# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 0001F | HEART FAILURE ASSESSED (INCLUDES | 1/1/2006 | $0.01 | T |
| 1 | 0001T | ENDOVASCULAR REPAIR OF INFRARENA | 1/1/2005 | INVALID | N |
| 1 | 0002F | TABACCO USE, SMOKING, ASSESSED | 1/1/2005 | INVALID | N |
| 1 | 0002T | ENDOVASCULAR REPAIR OF INFRARENA | 1/1/2004 | INVALID | N |
| 1 | 0003F | TABACCO USE, NON-SMOKING, ASSESS | 1/1/2005 | INVALID | N |
| 1 | 0003T | CERVICOGRAPHY | 1/1/2007 | INVALID | N |
| 1 | 0004F | TABACCO USE CESSATION INTERVENTI | 1/1/2005 | INVALID | N |
| 1 | 0005F | OSTEOARTHRITIS ASSESSED INCLUDES | 1/1/2006 | $0.01 | T |
| 1 | 0005T | TRANSCATHETER PLACEMENT OF EXTRA | 1/1/2005 | INVALID | N |
| 1 | 0006F | STATIN THERAPY, PRESCRIBED | 1/1/2005 | INVALID | N |
| 1 | 0006T | TRANSCATHETER PLACEMENT OF EXTRA | 1/1/2005 | INVALID | N |
| 1 | 0007F | BETA-BLOCKER THERAPY, PRESCRIBED | 1/1/2005 | INVALID | N |
| 1 | 0007T | TRANSCATHETER PLACE OF EXTRACRAN | 1/1/2005 | INVALID | N |
| 1 | 0008F | ACE INHIBITOR THERAPY, PRESCRIBE | 1/1/2005 | INVALID | N |
| 1 | 0008T | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | INVALID | N |
| 1 | 0009F | ANGINAL SYMPTOMS AND LEVEL OF AC | 1/1/2005 | INVALID | N |
| 1 | 0009T | ENDOMETRIAL CRYOABLATION WITH UL | 1/1/2005 | INVALID | N |
| 1 | 0010F | ANGINAL SYMPTOMS AND LEVEL OF AC | 1/1/2005 | INVALID | N |
| 1 | 0010T | TUBERCULOSIS TEST, CELL MEDIATED | 1/1/2006 | INVALID | N |
| 1 | 0011F | ORAL ANTIPLATELET THERAPY; PRESC | 1/1/2005 | INVALID | N |
| 1 | 0012F | COMMUNITY-ACQUIRED BACTERIAL PNE | 1/1/2007 | $0.01 | T |
| 1 | 0012T | ARTHROSCOPY, KNEE, SURGICAL, IMP | 1/1/2005 | INVALID | N |
| 1 | 0013T | ARTHROSCOPY, KNEE, SURGICAL, IMP | 1/1/2005 | INVALID | N |
| 1 | 0014T | MENISCAL TRANSPLANTATION, MEDIAL | 1/1/2005 | INVALID | N |
| 1 | 0016T | DESTRUCTION OF LOCALIZED LESION | 1/1/2002 | $0.01 | T |
| 1 | 0017T | DESTRUCTION OF MACULAR DRUSEN, P | 1/1/2002 | $0.01 | T |
| 1 | 0018T | DELIVERY OF HIGH POWER, FOCAL MA | 1/1/2007 | INVALID | N |
| 1 | 0019T | EXTRACORPOREAL SHOCK WAVE THERAP | 1/1/2002 | $0.01 | T |
| 1 | 0020T | EXTRACORPOREAL SHOCK WAVE THERAP | 1/1/2006 | INVALID | N |
| 1 | 0021T | INSERTION OF TRANSCERVICAL OR TR | 1/1/2007 | INVALID | N |
| 1 | 0023T | INFECTIOUS AGENT DRUG SUSCEPTIBI | 1/1/2003 | INVALID | N |
| 1 | 0024T | NON-SURGICAL SEPTAL REDUCTION TH | 1/1/2002 | $0.01 | T |
| 1 | 0025T | DETERMINATION OF CORNEAL THICKNE | 1/1/2004 | INVALID | N |
| 1 | 0026T | LIPOPROTEIN, DIRECT MEASUREMENT, | 1/1/2002 | $0.01 | T |
| 1 | 0027T | ENDOSCOPIC LYSIS OF EPIDURAL ADH | 1/1/2003 | $0.01 | T |
| 1 | 0028T | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2003 | $0.01 | T |
| 1 | 0029T | TREATMENT(S) FOR INCONTINENCE, P | 1/1/2003 | $0.01 | T |
| 1 | 0030T | ANTIPROTHROMBIN (PHOSPHOLIPID CO | 1/1/2003 | $0.01 | T |
| 1 | 0031T | SPECULOSCOPY; | 1/1/2003 | $0.01 | T |
| 1 | 0032T | SPECULOSCOPY; WITH DIRECTED SAMP | 1/1/2003 | $0.01 | T |
| 1 | 0033T | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | INVALID | N |
| 1 | 0034T | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | INVALID | N |
| 1 | 0035T | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2006 | INVALID | N |
| 1 | 0036T | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2006 | INVALID | N |
| 1 | 0037T | OPEN SUBCLAVIAN TO CAROTID ARTER | 1/1/2006 | INVALID | N |
| 1 | 0038T | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 0039T | ENDOVASCULAR REPIAR OF DESCENDIN | 1/1/2006 | INVALID | N |
| 1 | 0040T | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2006 | INVALID | N |
| 1 | 0041T | URINALYSIS INFECTIOUS AGENT DETE | 1/1/2003 | $0.01 | T |
| 1 | 0042T | CEREBRAL PERFUSION ANALYSIS USIN | 1/1/2003 | $0.01 | T |
| 1 | 0043T | CARBON MONOXIDE, EXPIRED GAS ANA | 1/1/2003 | $0.01 | T |
| 1 | 0044T | WHOLE BODY INTEGUMENTARY PHOTOGR | 1/1/2007 | INVALID | N |
| 1 | 0045T | WHOLE BODY INTEGUMENTARY PHOTOGR | 1/1/2007 | INVALID | N |
| 1 | 0046T | CATHETER LAVAGE OF A MAMMARY DUC | 1/1/2004 | $0.01 | T |
| 1 | 0047T | CATHETER LAVAGE OF A MAMMARY DUC | 1/1/2004 | $0.01 | T |
| 1 | 0048T | IMPLANTATION OF A VENTRICULAR AS | 1/1/2004 | $0.01 | T |
| 1 | 0049T | PROLONGED EXTRACORPOREAL PERCUTA | 1/1/2004 | $0.01 | T |
| 1 | 0050T | REMOVAL OF A VENTRICULAR ASSIST | 1/1/2004 | $0.01 | T |
| 1 | 0051T | IMPLANTATION OF A TOTAL REPLACEM | 1/1/2004 | $0.01 | T |
| 1 | 0052T | REPLACEMENT OR REPAIR OF THORACI | 1/1/2004 | $0.01 | T |
| 1 | 0053T | REPLACEMENT OR REPAIR OF IMPLANT | 1/1/2004 | $0.01 | T |
| 1 | 0054T | COMPUTER ASSISTED MUSCULOSKELETA | 1/1/2004 | $0.01 | T |
| 1 | 0055T | COMPUTER ASSISTED MUSCULOSKELETA | 1/1/2004 | $0.01 | T |
| 1 | 0056T | COMPUTER ASSISTED MUSCULOSKELETA | 1/1/2004 | $0.01 | T |
| 1 | 0057T | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2005 | INVALID | N |
| 1 | 0058T | CRYOPRESERVATION; REPORDUCTIVE T | 1/1/2004 | $0.01 | T |
| 1 | 0059T | CRYOPRESERVATION; OOCYTE(S) | 1/1/2004 | $0.01 | T |
| 1 | 0060T | ELECTRICAL IMPEDANCE SCAN OF THE | 1/1/2004 | $0.01 | T |
| 1 | 0061T | DESTRUCTION/REDUCTION OF MALIGNA | 1/1/2004 | $0.01 | T |
| 1 | 0062T | PERCUTANEOUS INTRADISCAL ANNULOP | 1/1/2005 | $0.01 | T |
| 1 | 0063T | PERCUTANEOUS INTRADISCAL ANNULOP | 1/1/2005 | $0.01 | T |
| 1 | 0064T | SPECTROSCOPY, EXPIRED GAS ANALYS | 1/1/2005 | $0.01 | T |
| 1 | 0065T | OCULAR PHOTOSCREENING, WITH INTE | 1/1/2005 | $0.01 | T |
| 1 | 0066T | COMPUTED TOMOGRAPHIC (CT) COLONO | 1/1/2005 | $0.01 | T |
| 1 | 0067T | COMPUTED TOMOGRAPHIC (CT) COLONO | 1/1/2005 | $0.01 | T |
| 1 | 0068T | ACOUSTIC HEART SOUND RECORDING A | 1/1/2005 | $0.01 | T |
| 1 | 0069T | ACOUSTIC HEART SOUND RECORDING A | 1/1/2005 | $0.01 | T |
| 1 | 0070T | ACOUSTIC HEART SOUND RECORDING A | 1/1/2005 | $0.01 | T |
| 1 | 0071T | FOCUSED ULTRASOUND ABLATION OF U | 1/1/2005 | $0.01 | T |
| 1 | 0072T | FOCUSED ULTRASOUND ABLATION OF U | 1/1/2005 | $0.01 | T |
| 1 | 0073T | COMPENSATOR-BASED BEAM MODULATIO | 1/1/2005 | $0.01 | T |
| 1 | 0074T | ONLINE EVALUATION AND MANAGEMENT | 1/1/2005 | $0.01 | T |
| 1 | 0075T | TRANSCATHETER PLACEMENT OF EXTRA | 1/1/2005 | $0.01 | T |
| 1 | 0076T | TRANSCATHETER PLACEMENT OF EXTRA | 1/1/2005 | $0.01 | T |
| 1 | 0077T | IMPLANTING AND SECURING CEREBRAL | 1/1/2005 | $0.01 | T |
| 1 | 0078T | ENDOVASCULAR REPAIR USING PROSTH | 1/1/2005 | $0.01 | T |
| 1 | 0079T | PLACEMENT OF VISCERAL EXTENSION | 1/1/2005 | $0.01 | T |
| 1 | 0080T | ENDOVASCULAR REPAIR OF ABDOMINAL | 1/1/2005 | $0.01 | T |
| 1 | 0081T | PLACEMENT OF VISCERAL EXTENSION | 1/1/2005 | $0.01 | T |
| 1 | 0082T | STEREOTACTIC BODY RADIATION THER | 1/1/2007 | INVALID | N |
| 1 | 0083T | STEREOTACTIC BODY RADIATION THER | 1/1/2007 | INVALID | N |
| 1 | 0084T | INSERTION OF A TEMPORARY PROSTAT | 1/1/2005 | $0.01 | T |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 0085T | BREATH TEST FOR HEART TRANSPLANT | 1/1/2005 | $0.01 | T |
| 1 | 0086T | LEFT VENTRICULAR FILLING PRESSUR | 1/1/2005 | $0.01 | T |
| 1 | 0087T | SPERM EVALUATION, HYALURONAN BIN | 1/1/2005 | $0.01 | T |
| 1 | 0088T | SUBMUCOSAL RADIOFREQUENCY TISSUE | 1/1/2005 | $0.01 | T |
| 1 | 0089T | ACTIGRAPHY TESTING, RECORDING, A | 1/1/2006 | $0.01 | T |
| 1 | 0090T | TOTAL DISC ARTHROPLASTY, ANTERIO | 1/1/2006 | $0.01 | T |
| 1 | 0091T | TOTAL DISC ARTHROPLASTY, ANTERIO | 1/1/2007 | INVALID | N |
| 1 | 0092T | TOTAL DISC ARTHROPLASTY, ANTERIO | 1/1/2006 | $0.01 | T |
| 1 | 0093T | REMOVAL OF TOTAL DISC ARTHROPLAS | 1/1/2006 | $0.01 | T |
| 1 | 0094T | REMOVAL OF TOTAL DISC ARTHROPLAS | 1/1/2007 | INVALID | N |
| 1 | 0095T | REMOVAL OF TOTAL DISC ARTHROPLAS | 1/1/2006 | $0.01 | T |
| 1 | 0096T | REVISION OF TOTAL DISC ARTHROPLA | 1/1/2006 | $0.01 | T |
| 1 | 0097T | REVISION OF TOTAL DISC ARTHROPLA | 1/1/2007 | INVALID | N |
| 1 | 0098T | REVISION OF TOTAL DISC ARTHROPLA | 1/1/2006 | $0.01 | T |
| 1 | 0099T | IMPLANTATION OF INTRASTROMAL COR | 1/1/2006 | $0.01 | T |
| 1 | 0100T | PLACEMENT OF A SUBCONJUNCTIVAL R | 1/1/2006 | $0.01 | T |
| 1 | 0101T | EXTRACORPOREAL SHOCK WAVE INVOLV | 1/1/2006 | $0.01 | T |
| 1 | 0102T | EXTRACORPOREAL SHOCK WAVE, HIGH | 1/1/2006 | $0.01 | T |
| 1 | 0103T | HOLOTRANSCOBALAMIN, QUANTITATIVE | 1/1/2006 | $0.01 | T |
| 1 | 0104T | INERT GAS REBREATHING FOR CARDIA | 1/1/2006 | $0.01 | T |
| 1 | 0105T | INERT GAS REBREATHING FOR CARDIA | 1/1/2006 | $0.01 | T |
| 1 | 0106T | QUANTITATIVE SENSORY TESTING (QS | 1/1/2006 | $0.01 | T |
| 1 | 0107T | QUANTITATIVE SENSORY TESTING (QS | 1/1/2006 | $0.01 | T |
| 1 | 0108T | QUANTITATIVE SENSORY TESTING (QS | 1/1/2006 | $0.01 | T |
| 1 | 0109T | QUANTITATIVE SENSORY TESTING (QS | 1/1/2006 | $0.01 | T |
| 1 | 0110T | QUANTITATIVE SENSORY TESTING (QS | 1/1/2006 | $0.01 | T |
| 1 | 0111T | LONG-CHAIN (C20-22) OMEGA-3 FATT | 1/1/2006 | $0.01 | T |
| 1 | 0115T | MEDICATION THERAPY MANAGEMENT SV | 1/1/2006 | $0.01 | T |
| 1 | 0116T | MEDICATION THERAPY MANAGEMENT SV | 1/1/2006 | $0.01 | T |
| 1 | 0117T | MEDICATION THERAPY MANAGEMENT SV | 1/1/2006 | $0.01 | T |
| 1 | 0120T | ABLATION, CRYOSURGICAL, OF FIBRO | 1/1/2007 | INVALID | N |
| 1 | 0123T | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2006 | $0.01 | T |
| 1 | 0124T | CONJUNCTIVAL INCISION W/POSTERIO | 1/1/2006 | $0.01 | T |
| 1 | 0126T | COMMON CAROTID INTIMA-MEDIA THIC | 1/1/2006 | $0.01 | T |
| 1 | 0130T | VALIDATED, STATISTICALLY RELIABL | 1/1/2006 | $0.01 | T |
| 1 | 0133T | UPPER GASTROINTESTINAL ENDOSOPY, | 1/1/2006 | $0.01 | T |
| 1 | 0135T | ABLATION, RENAL TUMOR(S), UNILAT | 1/1/2006 | $0.01 | T |
| 1 | 0137T | BIOPSY, PROSTATE, NEEDLE, SATURA | 1/1/2006 | $0.01 | T |
| 1 | 0140T | EXHALED BREATH CONDENSATE PH | 1/1/2006 | $0.01 | T |
| 1 | 0141T | PANCREATIC ISLET CELL TRANSPLANT | 1/1/2007 | $0.01 | T |
| 1 | 0142T | PANCREATIC ISLET CELL TRANSPLANT | 1/1/2007 | $0.01 | T |
| 1 | 0143T | LAPAROSCOPY, SURGICAL, PANCREATI | 1/1/2007 | $0.01 | T |
| 1 | 0144T | COMPUTED TOMOGRAPHY, HEART, WITH | 1/1/2007 | $0.01 | T |
| 1 | 0145T | COMPUTED TOMOGRAPHY, HEART, W/OU | 1/1/2007 | $0.01 | T |
| 1 | 0146T | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $0.01 | T |
| 1 | 0147T | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $0.01 | T |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 0148T | CARDIAC STRUCTURE AND MORPHOLOGY | 1/1/2007 | $0.01 | T |
| 1 | 0149T | CARDIAC STRUCTURE AND MORPHOLOGY | 1/1/2007 | $0.01 | T |
| 1 | 0150T | CARDIAC STRUCTURE AND MORPHOLOGY | 1/1/2007 | $0.01 | T |
| 1 | 0151T | COMPUTED TOMOGRAPHY, HEART, W/OU | 1/1/2007 | $0.01 | T |
| 1 | 0153T | TRANSCATHETER PLACEMENT OF WIREL | 1/1/2007 | $0.01 | T |
| 1 | 0154T | NONINVASIVE PHYSIOLOGIC STUDY OF | 1/1/2007 | $0.01 | T |
| 1 | 0155T | LAPAROSCOPY, SURGICAL; IMPLANTAT | 1/1/2007 | $0.01 | T |
| 1 | 0156T | LAPAROSCOPY, SURGICAL; REVISION | 1/1/2007 | $0.01 | T |
| 1 | 0157T | LAPAROTOMY, IMPLANTATION OR REPL | 1/1/2007 | $0.01 | T |
| 1 | 0158T | LAPAROTOMY, REVISION OR REMOVAL | 1/1/2007 | $0.01 | T |
| 1 | 0159T | COMPUTER-AIDED DETECTION, INCLUD | 1/1/2007 | $0.01 | T |
| 1 | 0160T | THERAPEUTIC REPETITIVE TRANSCRAN | 1/1/2007 | $0.01 | T |
| 1 | 0161T | THERAPEUTIC REPETITIVE TRANSCRAN | 1/1/2007 | $0.01 | T |
| 1 | 0162T | ELECTRONIC ANALYSIS AND PROGRAMM | 1/1/2007 | $0.01 | T |
| 1 | 0163T | TOTAL DISC ARTHROPLASTY, ANTERIO | 1/1/2007 | $0.01 | T |
| 1 | 0164T | REMOVAL OF TOTAL DISC ARTHROPLAS | 1/1/2007 | $0.01 | T |
| 1 | 0165T | REVISION OF TOTAL DISC ARTHROPLA | 1/1/2007 | $0.01 | T |
| 1 | 0166T | TRANSMYOCARDIAL TRANSCATHETER CL | 1/1/2007 | $0.01 | T |
| 1 | 0167T | TRANSMYOCARDIAL TRANSCATHETER CL | 1/1/2007 | $0.01 | T |
| 1 | 0168T | RHINOPHOTOTHERAPY, INTRANASAL AP | 1/1/2007 | $0.01 | T |
| 1 | 0169T | STEREOTACTIC PLACEMENT OF INFUSI | 1/1/2007 | $0.01 | T |
| 1 | 0170T | REPAIR OF ANORECTAL FISTULA WITH | 1/1/2007 | $0.01 | T |
| 1 | 0500F | INITIAL PRENATAL CARE VISIT | 1/1/2005 | $0.01 | T |
| 1 | 0501F | PRENATAL FLOW SHEET DOCUMENTED I | 1/1/2005 | $0.01 | T |
| 1 | 0502F | SUBSEQUENT PRENATAL CARE VISIT | 1/1/2005 | $0.01 | T |
| 1 | 0503F | POSTPARTUM CARE VISIT | 1/1/2005 | $0.01 | T |
| 1 | 1000F | TOBACCO USE, SMOKING, ASSESSED | 1/1/2005 | $0.01 | T |
| 1 | 1001F | TOBACCO USE, NON-SMOKING, ASSESS | 1/1/2007 | INVALID | N |
| 1 | 1002F | ANGINAL SYMPTOMS AND LEVEL OF AC | 1/1/2005 | $0.01 | T |
| 1 | 1003F | LEVEL OF ACTIVITY ASSESSED | 1/1/2006 | $0.01 | T |
| 1 | 1004F | CLINICAL SYMPTOMS OF VOLUME OVER | 1/1/2006 | $0.01 | T |
| 1 | 1005F | ASTHMA SYMPTOMS EVALUATED (INC P | 1/1/2006 | $0.01 | T |
| 1 | 1006F | OSTEOARTHRITIS SYMPTOMS AND FUNC | 1/1/2006 | $0.01 | T |
| 1 | 1007F | USE OF ANTI-INFLAMMATORY OR ANAL | 1/1/2006 | $0.01 | T |
| 1 | 1008F | GASTROINTESTINAL AND RENAL RISK | 1/1/2006 | $0.01 | T |
| 1 | 1015F | CHRONIC OBSTRUCTIVE PULMONARY DI | 1/1/2007 | $0.01 | T |
| 1 | 1018F | DYSPNEA ASSESSED, NOT PRESENT (C | 1/1/2007 | $0.01 | T |
| 1 | 1019F | DYSPNEA ASSESSED, PRESENT (COPD) | 1/1/2007 | $0.01 | T |
| 1 | 1022F | PNEUMOCOCCUS IMMUNIZATION STATUS | 1/1/2007 | $0.01 | T |
| 1 | 1026F | CO-MORBID CONDITIONS ASSESSED (C | 1/1/2007 | $0.01 | T |
| 1 | 1030F | INFLUENZA IMMUNIZATION STATUS AS | 1/1/2007 | $0.01 | T |
| 1 | 1034F | CURRENT TOBACCO SMOKER | 1/1/2007 | $0.01 | T |
| 1 | 1035F | CURRENT SMOKELESS TOBACCO USER | 1/1/2007 | $0.01 | T |
| 1 | 1036F | CURRENT TOBACCO NON-USER | 1/1/2007 | $0.01 | T |
| 1 | 1038F | PERSISTENT ASTHMA | 1/1/2007 | $0.01 | T |
| 1 | 1039F | INTERMITTENT ASTHMA | 1/1/2007 | $0.01 | T |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 2000F | BLOOD PRESSURE, MEASURED | 1/1/2005 | $0.01 | T |
| 1 | 2001F | WEIGHT RECORDED | 1/1/2006 | $0.01 | T |
| 1 | 2002F | CLINICAL SIGNS OF VOLUME OVERLOA | 1/1/2006 | $0.01 | T |
| 1 | 2003F | AUSCULTATION OF THE HEART PERFOR | 1/1/2007 | INVALID | N |
| 1 | 2004F | INITIAL EXAM OF THE INVOLVED JOI | 1/1/2006 | $0.01 | T |
| 1 | 2010F | VITAL SIGNS RECORDED | 1/1/2007 | $0.01 | T |
| 1 | 2014F | MENTAL STATUS ASSESSED | 1/1/2007 | $0.01 | T |
| 1 | 2018F | HYDRATION STATUS ASSESSED | 1/1/2007 | $0.01 | T |
| 1 | 2022F | DILATED RETINAL EYE EXAM WITH IN | 1/1/2007 | $0.01 | T |
| 1 | 2024F | SEVEN STANDARD FIELD STEREOSCOPI | 1/1/2007 | $0.01 | T |
| 1 | 2026F | EYE IMAGING VALIDATED TO MATCH D | 1/1/2007 | $0.01 | T |
| 1 | 2028F | FOOT EXAMINATION PERFORMED | 1/1/2007 | $0.01 | T |
| 1 | 3000F | BLOOD PRESSURE < OR = TO 140/90 | 1/1/2007 | INVALID | N |
| 1 | 3002F | BLOOD PRESSURE > 140/90 MM HG2 | 1/1/2007 | INVALID | N |
| 1 | 3006F | CHEST X-RAY RESULTS DOCUMENTED A | 1/1/2007 | $0.01 | T |
| 1 | 3011F | LIPID PANEL RESUTLS DOCUMENTED A | 1/1/2007 | $0.01 | T |
| 1 | 3014F | SCREENING MAMMOGRAPHY RESULTS DO | 1/1/2007 | $0.01 | T |
| 1 | 3017F | COLORECTAL CANCER SCREENING RESU | 1/1/2007 | $0.01 | T |
| 1 | 3020F | LEFT VENTRICULAR FUNCTION ASSESS | 1/1/2007 | $0.01 | T |
| 1 | 3021F | LEFT VENTRICULAR EJECTION FRACTI | 1/1/2007 | $0.01 | T |
| 1 | 3022F | LEFT VENTRICULAR EJECTION FRACTI | 1/1/2007 | $0.01 | T |
| 1 | 3023F | SPIROMETRY RESULTS DOCUMENTED AN | 1/1/2007 | $0.01 | T |
| 1 | 3025F | SPIROMETRY TEST RESULTS DEMONSTR | 1/1/2007 | $0.01 | T |
| 1 | 3027F | SPIROMETRY TEST RESULTS DEMONSTR | 1/1/2007 | $0.01 | T |
| 1 | 3028F | OXYGEN SATURATION RESULTS DOCUME | 1/1/2007 | $0.01 | T |
| 1 | 3035F | OXYGEN SATURATION <=88% OR A PA0 | 1/1/2007 | $0.01 | T |
| 1 | 3037F | OXYGEN SATURATION >88% OR PA02 > | 1/1/2007 | $0.01 | T |
| 1 | 3040F | FUNCTIONAL EXPIRATORY VOLUME (FE | 1/1/2007 | $0.01 | T |
| 1 | 3042F | FUNCTIONAL EXPIRATORY VOLUME (FE | 1/1/2007 | $0.01 | T |
| 1 | 3046F | MOST RECENT HEMOGLOBIN A1C LEVEL | 1/1/2007 | $0.01 | T |
| 1 | 3047F | MOST RECENT HEMOGLOBIN A1C LEVEL | 1/1/2007 | $0.01 | T |
| 1 | 3048F | MOST RECENT LDL-C 100 MG/DL | 1/1/2007 | $0.01 | T |
| 1 | 3049F | MOST RECENT LDL-C 100-129 MG/DL | 1/1/2007 | $0.01 | T |
| 1 | 3050F | MOST RECENT LDL-C >= 130 MG/DL | 1/1/2007 | $0.01 | T |
| 1 | 3060F | POSITIVE MICROALBUMINURIA TEST R | 1/1/2007 | $0.01 | T |
| 1 | 3061F | NEGATIVE MICROALBUMINURIA TEST R | 1/1/2007 | $0.01 | T |
| 1 | 3062F | POSITIVE MACROALBUMINURIA TEST R | 1/1/2007 | $0.01 | T |
| 1 | 3066F | DOCUMENTATION OF TREATMENT FOR N | 1/1/2007 | $0.01 | T |
| 1 | 3072F | LOW RISK FOR RETINOPATHY | 1/1/2007 | $0.01 | T |
| 1 | 3076F | MOST RECENT SYSTOLIC BLOOD PRESS | 1/1/2007 | $0.01 | T |
| 1 | 3077F | MOST RECENT SYSTOLIC BLOOD PRESS | 1/1/2007 | $0.01 | T |
| 1 | 3078F | MOST RECENT DIASTOLIC BLOOD PRES | 1/1/2007 | $0.01 | T |
| 1 | 3079F | MOST RECENT DIASTOLIC BLOOD PRES | 1/1/2007 | $0.01 | T |
| 1 | 3080F | MOST RECENT DIASTOLIC BLOOD PRES | 1/1/2007 | $0.01 | T |
| 1 | 4000F | TOBACCO USE CESSATION INTERVENTI | 1/1/2005 | $0.01 | T |
| 1 | 4001F | TOBACCO USE CESSATION INTERVENTI | 1/1/2005 | $0.01 | T |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 4002F | STATIN THERAPY, PRESCRIBED | 1/1/2005 | $0.01 | T |
| 1 | 4003F | PATIENT EDUCATION, WRITTEN/ORAL, | 1/1/2006 | $0.01 | T |
| 1 | 4006F | BETA-BLOCKER THERAPY, PRESCRIBED | 1/1/2005 | $0.01 | T |
| 1 | 4009F | ANGIOTENSIN CONVERTING ENZYME (A | 1/1/2005 | $0.01 | T |
| 1 | 4011F | ORAL ANTIPLATELET THERAPY, PRESC | 1/1/2005 | $0.01 | T |
| 1 | 4012F | WARFARIN THERAPY PRESCRIBED | 1/1/2006 | $0.01 | T |
| 1 | 4014F | WRITTEN DISCHARGE INSTRUCTIONS P | 1/1/2006 | $0.01 | T |
| 1 | 4015F | PERSISTENT ASTHMA, LONG TERM CON | 1/1/2006 | $0.01 | T |
| 1 | 4016F | ANTI-INFLAMMATORY/ANALGESIC AGEN | 1/1/2006 | $0.01 | T |
| 1 | 4017F | GASTROINTESTINAL PROPHYLAXIS FOR | 1/1/2006 | $0.01 | T |
| 1 | 4018F | THERAPEUTIC EXERCISE FOR THE INV | 1/1/2006 | $0.01 | T |
| 1 | 4025F | INHALED BRONCHODILATOR PRESCRIBE | 1/1/2007 | $0.01 | T |
| 1 | 4030F | LONG TERM OXYGEN THERAPY PRESCRI | 1/1/2007 | $0.01 | T |
| 1 | 4033F | PULMONARY REHABILITATION EXERCIS | 1/1/2007 | $0.01 | T |
| 1 | 4035F | INFLUENZA IMMUNIZATION RECOMMEND | 1/1/2007 | $0.01 | T |
| 1 | 4037F | INFLUENZA IMMUNIZATION ORDERED O | 1/1/2007 | $0.01 | T |
| 1 | 4040F | PNEUMOCOCCAL IMMUNIZATION ORDERE | 1/1/2007 | $0.01 | T |
| 1 | 4045F | APPROPRIATE EMPIRIC ANTIBIOTIC P | 1/1/2007 | $0.01 | T |
| 1 | 4050F | HYPERTENSION PLAN OF CARE DOCUME | 1/1/2007 | $0.01 | T |
| 1 | 59409 | VAGINAL DELIVERY ONLY (WITH OR W | 1/1/2002 | $0.01 | 1 |
| 1 | 59514 | CAESAREAN DELIVERY ONLY; | 1/1/2002 | $0.01 | 1 |
| 1 | 59612 | VAGINAL DELIVERY ONLY, AFTER PRE | 1/1/2002 | $0.01 | 1 |
| 1 | 59620 | CESAREAN DELIVERY ONLY, FOLLOWIN | 1/1/2002 | $0.01 | 1 |
| 1 | 6005F | RATIONALE FOR LEVEL OF CARE, DOC | 1/1/2007 | $0.01 | T |
| 1 | 90281 | IMMUNE GLOBULIN (IG), HUMAN, FOR | 10/1/2005 | $0.01 | 5 |
| 1 | 90283 | IMMUNE GLOBULIN (IGIV), HUMAN, F | 10/1/2005 | $0.01 | 5 |
| 1 | 90287 | BOTULINUM ANTITOXIN, EQUINE, ANY | 10/1/2005 | $0.01 | 5 |
| 1 | 90288 | BOTULISM IMMUNE GLOBULIN, HUMAN, | 10/1/2005 | $0.01 | 5 |
| 1 | 90291 | CYTOMEGALOVIRUS IMMUNE GLOBULIN | 10/1/2005 | $0.01 | 5 |
| 1 | 90296 | DIPHTHERIA ANTITOXIN, EQUINE, AN | 10/1/2005 | $0.01 | 5 |
| 1 | 90371 | HEPATITIS B IMMUNE GLOBULIN (HBI | 5/1/2005 | $183.69 | 3 |
| 1 | 90375 | RABIES IMMUNE GLOBULIN (RIG), HU | 2/13/2006 | $0.01 | 5 |
| 1 | 90376 | RABIES IMMUNE GLOBULIN, HEAT-TRE | 2/27/2006 | $89.84 | 3 |
| 1 | 90378 | RESPIRATORY SYNCYTIAL VIRUS IMMU | 2/27/2006 | $807.11 | 3 |
| 1 | 90379 | RESPIRATORY SYNCYTIAL VIRUS IMMU | 11/1/2001 | NC | 9 |
| 1 | 90384 | RHO(D) IMMUNE GLOBULIN (RHIG), H | 5/1/2003 | $126.14 | 3 |
| 1 | 90385 | RHO(D) IMMUNE GLOBULIN (RHIG), H | 5/1/2003 | $53.90 | 3 |
| 1 | 90386 | RHO(D) IMMUNE GLOBULIN (RHIGIV), | 10/1/2005 | $0.01 | 5 |
| 1 | 90389 | TETANUS IMMUNE GLOBULIN (TIG), H | 10/1/2005 | $0.01 | 5 |
| 1 | 90393 | VACCINIA IMMUNE GLOBULIN, HUMAN, | 10/1/2005 | $0.01 | 5 |
| 1 | 90396 | VARICELLA-ZOSTER IMMUNE GLOBULIN | 4/1/2006 | $0.01 | 5 |
| 1 | 90399 | UNLISTED IMMUNE GLOBULIN | 10/1/2005 | $0.01 | 5 |
| 1 | 90465 | IMMUNIZATION ADMINISTRATION UNDE | 1/1/2007 | $12.72 | 3 |
| 1 | 90466 | IMMUNIZATION ADMINISTRATION UNDE | 1/1/2007 | $7.53 | 3 |
| 1 | 90467 | IMMUNIZATION ADMINISTRATION (INT | 1/1/2007 | $9.08 | 3 |
| 1 | 90468 | IMMUNIZATION ADMINISTRATION (INT | 1/1/2007 | $7.01 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 90471 | IMMUNIZATION ADMIN; ONE VACCINE | 1/1/2007 | $12.72 | 1 |
| 1 | 90472 | IMMUNIZATION ADMIN; EACH ADDITIO | 1/1/2007 | $7.53 | 3 |
| 1 | 90473 | IMMUNIZATION ADMINISTRATION BY I | 1/1/2007 | $9.60 | 3 |
| 1 | 90474 | IMMUNIZATION ADMINISTRATION BY I | 10/1/2003 | NC | 9 |
| 1 | 90476 | ADENOVIRUS VACCINE, TYPE 4, LIVE | 10/1/2005 | $0.01 | 5 |
| 1 | 90477 | ADENOVIRUS VACCINE, TYPE 7, LIVE | 10/1/2005 | $0.01 | 5 |
| 1 | 90581 | ANTHRAX VACCINE, FOR SUBCUTANEOU | 10/1/2005 | $0.01 | 5 |
| 1 | 90585 | BACILLUS CALMETTE-GUERIN VACCINE | 5/1/2005 | $176.15 | 3 |
| 1 | 90586 | BACILLUS CALMETTE-GUERIN VACCINE | 5/1/2005 | $191.50 | 3 |
| 1 | 90632 | HEPATITIS A VACCINE, ADULT DOSAG | 5/9/2005 | $81.79 | 3 |
| 1 | 90634 | HEPATITIS A VACCINE, PEDIATRIC/A | 10/1/2004 | NC | 9 |
| 1 | 90636 | HEPATITIS A AND HEPATITIS B VACC | 5/9/2005 | $98.90 | 3 |
| 1 | 90645 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $29.02 | 3 |
| 1 | 90646 | HEMOPHILUS INFLUENZA B VACCINE ( | 12/1/2005 | NC | 9 |
| 1 | 90647 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $29.02 | 3 |
| 1 | 90648 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $27.04 | 3 |
| 1 | 90656 | INFLUENZA VIRUS VACCINE, SPLIT V | 9/15/2006 | $18.14 | 3 |
| 1 | 90658 | INFLUENZA VIRUS VACCINE, SPLIT V | 9/15/2006 | $13.81 | 3 |
| 1 | 90659 | INFLUENZA VIRUS VACCINE, WHOLE V | 4/1/2004 | INVALID | N |
| 1 | 90660 | INFLUENZA VIRUS VACCINE, LIVE, F | 9/15/2006 | $22.44 | 3 |
| 1 | 90665 | LYME DISEASE VACCINE, ADULT DOSA | 5/9/2005 | NC | 9 |
| 1 | 90675 | RABIES VACCINE, FOR INTRMUSCULAR | 2/27/2006 | $195.94 | 3 |
| 1 | 90676 | RABIES VACCINE, FOR INTRADERMAL | 5/16/2005 | $0.01 | 5 |
| 1 | 90680 | ROTAVIRUS VACCINE, PENTAVALENT, | 10/1/2004 | NC | 9 |
| 1 | 90690 | TYPHOID VACCINE, LIVE, ORAL | 1/1/1999 | NC | 9 |
| 1 | 90691 | TYPHOID VACCINE, VI CAPSULAR POL | 1/1/1999 | NC | 9 |
| 1 | 90692 | TYPHOID VACCINE, HEAT-AND PHENOL | 1/1/1999 | NC | 9 |
| 1 | 90693 | TYPHOID VACCINE, ACETONE-KILLED, | 1/1/1999 | NC | 9 |
| 1 | 90698 | DIPHTHERIA, TETANUS TOXOIDS, ACE | 3/1/2005 | NC | 9 |
| 1 | 90703 | IMMUNIZATION ACTIVE; TETANUS TOX | 4/24/2006 | $23.06 | 3 |
| 1 | 90704 | IMMUNIZATION ACTIVE; MUMPS VIRUS | 2/20/2006 | $23.87 | 3 |
| 1 | 90705 | IMMUNIZATION ACTIVE; MEASLES VIR | 2/20/2006 | $20.56 | 3 |
| 1 | 90706 | IMMUNIZATION, ACTIVE; RUBELLA VI | 2/20/2006 | $20.55 | 3 |
| 1 | 90707 | IMMUNIZATION ACTIVE; MEASLES, MU | 2/20/2006 | $58.51 | 3 |
| 1 | 90708 | IMMUNIZATION ACTIVE; MEASLES AND | 7/1/1990 | $23.90 | 3 |
| 1 | 90709 | IMMUNIZATION ACTIVE; RUBELLA AND | 7/1/2003 | INVALID | N |
| 1 | 90710 | IMMUNIZATION, ACTIVE; MEASLES, M | 8/1/2005 | NC | 9 |
| 1 | 90712 | IMMUNIZATION ACTIVE; POLIOVIRUS | 5/1/2000 | NC | 9 |
| 1 | 90713 | POLIOVIRUS VACCINE, INACTIVATED, | 2/20/2006 | $27.06 | 3 |
| 1 | 90714 | TETANUS AND DIPHTHERIA TOXOIDS ( | 7/1/2005 | $21.50 | 3 |
| 1 | 90715 | TETANUS, DIPHTHERIA TOXOIDS AND | 6/1/2005 | $43.50 | 3 |
| 1 | 90716 | IMMUNIZATION, ACTIVE; VARICELLA | 2/20/2006 | $95.77 | 3 |
| 1 | 90717 | IMMUNIZATION ACTIVE; YELLOW FEVE | 10/24/1989 | NC | 9 |
| 1 | 90718 | TETANUS AND DIPHTHERIA TOXOIDS ( | 2/27/2006 | $22.50 | 3 |
| 1 | 90719 | IMMUNIZATION ACTIVE; DIPTHERIA T | 7/1/1990 | $8.32 | 3 |
| 1 | 90720 | IMMUNIZATION, ACTIVE; DIPHTHERIA | 2/20/2006 | $35.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 90725 | IMMUNIZATION ACTIVE; CHOLERA VAC | 10/24/1989 | NC | 9 |
| 1 | 90727 | IMMUNIZATION ACTIVE; PLAGUE VACC | 5/9/2005 | NC | 9 |
| 1 | 90732 | PNEUMOCOCCAL POLYSACCHARIDE VACC | 2/21/2005 | $30.24 | 3 |
| 1 | 90733 | IMMUNIZATION ACTIVE; MENINGOCOCC | 8/1/2005 | $107.63 | 3 |
| 1 | 90734 | MENINGOCOCCAL CONJUGATE VACCINE, | 3/21/2005 | $102.50 | 3 |
| 1 | 90735 | IMMUNIZATION, ACTIVE; ENCEPHALIT | 2/1/2001 | NC | 9 |
| 1 | 90736 | ZOSTER (SHINGLES) VACCINE, LIVE, | 10/1/2006 | $190.63 | 3 |
| 1 | 90740 | HEPATITIS B VACCINE, DIALYSIS OR | 5/9/2005 | $207.36 | 3 |
| 1 | 90743 | HEPATITIS B VACCINE, ADOLESCENT | 5/9/2005 | $74.44 | 3 |
| 1 | 90746 | HEPATITIS B VACCINE, ADULT DOSAG | 5/9/2005 | $72.76 | 3 |
| 1 | 90747 | HEPATITIS B VACCINE, DIALYSIS OR | 5/9/2005 | $145.52 | 3 |
| 1 | 90749 | UNLISTED IMMUNIZATION PROCEDURE | 9/1/2004 | $0.01 | 5 |
| 1 | 90760 | INTRAVENOUS INFUSION, HYDRATION; | 1/1/2007 | $43.34 | 3 |
| 1 | 90761 | INTRAVENOUS INFUSION, HYDRATION; | 1/1/2007 | $13.75 | 3 |
| 1 | 90765 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2007 | $52.94 | 3 |
| 1 | 90766 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2007 | $17.65 | 3 |
| 1 | 90767 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2007 | $29.06 | 3 |
| 1 | 90768 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2007 | $16.87 | 3 |
| 1 | 90772 | THERAPEUTIC, PROPHYLACTIC OR DIA | 1/1/2007 | $12.72 | 3 |
| 1 | 90773 | THERAPEUTIC, PROPHYLACTIC OR DIA | 1/1/2007 | $13.23 | 3 |
| 1 | 90774 | THERAPEUTIC, PROPHYLACTIC OR DIA | 1/1/2007 | $39.44 | 3 |
| 1 | 90775 | THERAPEUTIC, PROPHYLACTIC OR DIA | 1/1/2007 | $18.42 | 3 |
| 1 | 90779 | UNLISTED THERAPEUTIC, PROPHYLACT | 1/1/2006 | $0.01 | 5 |
| 1 | 90780 | IV INFUSION FOR THERAPY/DIAGNOSI | 1/1/2006 | INVALID | N |
| 1 | 90781 | IV INFUSION THERAPY, ADMINISTERE | 1/1/2006 | INVALID | N |
| 1 | 90782 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| 1 | 90783 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| 1 | 90784 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| 1 | 90788 | INTRAMUSCULAR INJECTION OF ANTIB | 1/1/2006 | INVALID | N |
| 1 | 90799 | UNLISTED THERAPEUTIC OR DIAGNOST | 1/1/2006 | INVALID | N |
| 1 | 90801 | PSYCHIATRIC DIAGNOSTIC INTERVIEW | 3/1/2003 | $131.44 | 1 |
| 1 | 90802 | INTERACTIVE PSYCHIATRIC DIAGNOST | 4/1/2001 | $0.01 | 1 |
| 1 | 90804 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 4/1/2001 | $0.01 | 1 |
| 1 | 90805 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 4/1/2001 | $0.01 | 1 |
| 1 | 90806 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 4/1/2001 | $0.01 | 1 |
| 1 | 90807 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 4/1/2001 | $0.01 | 1 |
| 1 | 90808 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 4/1/2001 | $0.01 | 1 |
| 1 | 90809 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 4/1/2001 | $0.01 | 1 |
| 1 | 90810 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 4/1/2001 | $0.01 | 1 |
| 1 | 90811 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 4/1/2001 | $0.01 | 1 |
| 1 | 90812 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 4/1/2001 | $0.01 | 1 |
| 1 | 90813 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 4/1/2001 | $0.01 | 1 |
| 1 | 90814 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 4/1/2001 | $0.01 | 1 |
| 1 | 90815 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 4/1/2001 | $0.01 | 1 |
| 1 | 90847 | FAMILY MEDICAL PSYCHOTHERAPY (CO | 4/1/2001 | $0.01 | 1 |
| 1 | 90849 | MULTIPLE-FAMILY GROUP MEDICAL PS | 4/1/2001 | $0.01 | 1 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 90853 | GROUP MEDICAL PSYCHOTHERAPY (OTH | 4/1/2001 | $0.01 | 1 |
| 1 | 90857 | INTERACTIVE GROUP MEDICAL PSYCHO | 4/1/2001 | $0.01 | 1 |
| 1 | 90862 | PHARMACOLOGIC MGMNT, INCL PRESCR | 1/1/2007 | $35.55 | 1 |
| 1 | 90870 | ELECTROCONVULSIVE THERAPY (INCLU | 1/1/2007 | $100.17 | 3 |
| 1 | 90871 | ELECTROCONVULSIVE THERAPY (INCLU | 1/1/2006 | INVALID | N |
| 1 | 90875 | INDIVIDUAL PSYCHOPHYSIOLOGICAL T | 1/1/2003 | $0.01 | P |
| 1 | 90876 | INDIVIDUAL PSYCHOPHYSIOLOGICAL T | 1/1/2003 | $0.01 | P |
| 1 | 90880 | MEDICAL HYPNOTHERAPY | 1/1/2003 | $0.01 | P |
| 1 | 90882 | ENVIRONMENTAL INTERVENTION FOR M | 1/1/2003 | $0.01 | P |
| 1 | 90885 | PSYCHIATRIC EVALUATION OF HOSPIT | 1/1/2003 | $0.01 | P |
| 1 | 90887 | INTERPRETATION OR EXPLANATION OF | 10/1/2003 | $89.00 | 3 |
| 1 | 90889 | PREPARATION OF REPORT OF PATIENT | 1/1/2003 | $0.01 | P |
| 1 | 90899 | CDRC (029066) ONLY: UNLISTED PSY | 10/1/2003 | $0.01 | P |
| 1 | 90901 | BIOFEEDBACK TRAINING BY ANY MODA | 1/1/2007 | $28.03 | 3 |
| 1 | 90911 | BIOFEEDBACK TRAINING; ANORECTAL, | 1/1/2007 | $65.13 | 3 |
| 1 | 90918 | END STAGE RENAL DISEASE RELATED | 1/1/2007 | $458.02 | 3 |
| 1 | 90919 | END STAGE RENAL DISEASE (ESRD) R | 1/1/2007 | $332.94 | 3 |
| 1 | 90920 | END STAGE RENAL DISEASE (ESRD) R | 1/1/2007 | $291.94 | 3 |
| 1 | 90921 | END STAGE RENAL DISEASE RELATED | 1/1/2007 | $182.95 | 3 |
| 1 | 90922 | END STAGE RENAL DISEASE (ESRD) R | 1/1/2007 | $15.31 | 3 |
| 1 | 90923 | END STAGE RENAL DISEASE (ESRD) R | 1/1/2007 | $10.90 | 3 |
| 1 | 90924 | END STAGE RENAL DISEASE (ESRD) R | 1/1/2007 | $9.60 | 3 |
| 1 | 90925 | END STAGE RENAL DISEASE (ESRD) R | 1/1/2007 | $6.23 | 3 |
| 1 | 90935 | HEMODIALYSIS PROCEDURE WITH SING | 1/1/2007 | $50.08 | 3 |
| 1 | 90937 | HEMODIALYSIS PROCEDURE REQUIRING | 1/1/2007 | $81.74 | 3 |
| 1 | 90939 | HEMODIALYSIS ACCESS FLOW STUDY T | 1/1/2006 | INVALID | N |
| 1 | 90940 | HEMODIALYSIS ACCESS FLOW STUDY T | 10/1/2005 | $0.01 | 5 |
| 1 | 90945 | DIALYSIS PROCEDURE OTHER THAN HE | 1/1/2007 | $52.16 | 3 |
| 1 | 90947 | DIALYSIS PROCEDURE OTHER THAN HE | 1/1/2007 | $83.56 | 3 |
| 1 | 90989 | DIALYSIS TRAINING, PATIENT, INCL | 10/1/2000 | $529.48 | 3 |
| 1 | 90993 | DIALYSIS TRAINING, PATIENT, INCL | 5/1/1991 | $0.01 | 5 |
| 1 | 90997 | HEMOPERFUSION (EG WITH ACTIVATED | 1/1/2007 | $66.43 | 3 |
| 1 | 90999 | UNLISTED DIALYSIS PROCEDURE IN H | 4/1/1982 | $0.01 | 5 |
| 1 | 91000 | ESOPHAGEAL INTUBATION AND COLLEC | 1/1/2007 | $28.55 | 3 |
| 1 | 91010 | ESOPHAGEAL MOTILITY STUDY | 1/1/2007 | $150.25 | 3 |
| 1 | 91011 | ESOPHAGEAL MOTILITY STUDY; WITH | 1/1/2007 | $178.28 | 3 |
| 1 | 91012 | ESOPHAGEAL MOTILITY STUDY; WITH | 1/1/2007 | $190.99 | 3 |
| 1 | 91020 | ESOPHAGOGASTRIC MANOMETRIC STUDI | 1/1/2007 | $158.30 | 3 |
| 1 | 91022 | DUODENAL MOTILITY (MANOMETRIC) S | 4/1/2006 | NC | 9 |
| 1 | 91030 | ESOPHAGUS ACID PERFUSION (BERNST | 1/1/2007 | $88.49 | 3 |
| 1 | 91032 | ESOPHAGUS ACID REFLUX TEST WITH | 1/1/2005 | INVALID | N |
| 1 | 91033 | ESOPHAGUS ACID REFLUX TEST PROLO | 1/1/2005 | INVALID | N |
| 1 | 91034 | ESOPHAGUS, GASTROESOPHAGEAL REFL | 1/1/2007 | $164.52 | 3 |
| 1 | 91035 | ESOPHAGUS, GASTROESOPHAGEAL REFL | 1/1/2007 | $325.41 | 3 |
| 1 | 91037 | ESOPHAGEAL FUNCTION TEST, GASTRO | 4/1/2005 | NC | 9 |
| 1 | 91038 | ESOPHAGEAL FUNCTION TEST, GASTRO | 4/1/2005 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 91040 | ESOPHAGEAL BALLOON DISTENSION PR | 4/1/2005 | NC | 9 |
| 1 | 91052 | GASTRIC ANALYSIS TEST WITH INJEC | 1/1/2007 | $85.64 | 3 |
| 1 | 91055 | GASTRIC INTUBATION WASHINGS AND | 1/1/2007 | $102.76 | 3 |
| 1 | 91060 | GASTRIC SALINE LOAD TEST | 1/1/2007 | INVALID | N |
| 1 | 91065 | BREATH HYDROGEN TEST (EG, FOR DE | 1/1/2007 | $43.86 | 3 |
| 1 | 91100 | INTESTINAL BLEEDING TUBE PASSAGE | 1/1/2007 | $102.50 | 3 |
| 1 | 91105 | GASTRIC INTUBATION, AND ASPIRATI | 1/1/2007 | $65.13 | 3 |
| 1 | 91110 | GASTROINTESTINAL TRACT IMAGING, | 10/14/2005 | NC | 9 |
| 1 | 91111 | GASTROINTESTINAL TRACT IMAGING, | 1/1/2007 | NC | 9 |
| 1 | 91120 | RECTAL SENSATION, TONE, AND COMP | 4/1/2006 | NC | 9 |
| 1 | 91122 | ANORECTAL MANOMETRY | 1/1/2007 | $183.99 | 3 |
| 1 | 91123 | PULSED IRRIGATION OF FECAL IMPAC | 10/1/2005 | $0.01 | 5 |
| 1 | 91132 | ELECTROGASTROPGRAPHY, DIAGNOSTIC | 1/1/2007 | $18.68 | 3 |
| 1 | 91133 | ELECTROGASTROGRAPHY, DIAGNOSTIC, | 1/1/2007 | $23.87 | 3 |
| 1 | 91299 | UNLISTED DIAGNOSTIC GASTROENTERO | 4/1/1982 | $0.01 | 5 |
| 1 | 92002 | OPHTHALMOLOGICAL SERVICES MEDICA | 1/1/2007 | $48.53 | 1 |
| 1 | 92004 | OPHTHALMOLOGICAL SERVICES MEDICA | 1/1/2007 | $88.49 | 1 |
| 1 | 92012 | OPHTHALMOLOGICAL SERVICES MEDICA | 1/1/2007 | $44.63 | 1 |
| 1 | 92014 | OPHTHALMOLOGICAL SERVICES MEDICA | 1/1/2007 | $65.91 | 1 |
| 1 | 92015 | DETERMINATION OF REFRACTIVE STAT | 1/1/2007 | $48.79 | 3 |
| 1 | 92018 | OPHTHALMOLOGICAL EXAMINATION AND | 1/1/2007 | $94.46 | 3 |
| 1 | 92019 | OPHTHALMOLOGICAL EXAMINATION AND | 1/1/2007 | $49.31 | 3 |
| 1 | 92020 | GONIOSCOPY (SEPARATE PROCEDURE) | 1/1/2007 | $18.68 | 3 |
| 1 | 92025 | COMPUTERIZED CORNEAL TOPOGRAPHY, | 1/1/2007 | $21.02 | 3 |
| 1 | 92060 | SENSORIMOTOR EXAM W/MULTIPLE MEA | 1/1/2007 | $37.63 | 3 |
| 1 | 92065 | ORTHOPTIC AND/OR PLEOPTIC TRAINI | 1/1/2007 | $23.87 | 3 |
| 1 | 92070 | FITTING OF CONTACT LENS FOR TREA | 1/1/2007 | $46.45 | 3 |
| 1 | 92081 | VISUAL FIELD EXAM, UNILATERAL OR | 1/1/2007 | $34.25 | 3 |
| 1 | 92082 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $43.86 | 3 |
| 1 | 92083 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $50.60 | 3 |
| 1 | 92100 | SERIAL TONOMETRY W/MULTIPLE MEAS | 1/1/2007 | $59.43 | 3 |
| 1 | 92120 | TONOGRAPHY W/INTERPRETATION AND | 1/1/2007 | $49.31 | 3 |
| 1 | 92130 | TONOGRAPHY WITH WATER PROVOCATIO | 1/1/2007 | $54.75 | 3 |
| 1 | 92135 | SCANNING COMPUTERIZED OPHTHALMIC | 1/1/2007 | $30.10 | 3 |
| 1 | 92136 | OPHTHALMIC BIOMETRY BY PARTIAL C | 1/1/2007 | $58.91 | 3 |
| 1 | 92140 | PROVOCATIVE TESTS FOR GLAUCOMA, | 1/1/2007 | $38.93 | 3 |
| 1 | 92225 | OPHTHALMOSCOPY, EXTENDED, W/RETI | 1/1/2007 | $15.83 | 3 |
| 1 | 92226 | OPHTHALMOSCOPY EXTENDED AS FOR R | 1/1/2007 | $14.27 | 3 |
| 1 | 92230 | FLUORESCEIN ANGIOSCOPY WITH INTE | 1/1/2007 | $55.79 | 3 |
| 1 | 92235 | FLUORESCEIN ANGIOGRAPHY (INCLUDE | 1/1/2007 | $91.08 | 3 |
| 1 | 92240 | INDOCYNAINE-GREEN ANGIOGRAPHY (I | 1/1/2007 | $189.69 | 3 |
| 1 | 92250 | FUNDUS PHOTOGRAPHY WITH INTERPRE | 1/1/2007 | $51.64 | 3 |
| 1 | 92260 | OPHTHALMODYNAMOMETRY | 1/1/2007 | $12.20 | 3 |
| 1 | 92265 | NEEDLE OCULOELECTROMYOGRAPHY, ON | 1/1/2007 | $61.24 | 3 |
| 1 | 92270 | ELECTRO-OCULOGRAPHY WITH MEDICAL | 1/1/2007 | $62.02 | 3 |
| 1 | 92275 | ELECTRORETINOGRAPHY WITH MEDICAL | 1/1/2007 | $77.85 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 92283 | COLOR VISION EXAMINATION EXTENDE | 1/1/2007 | $26.73 | 3 |
| 1 | 92284 | DARK ADAPTATION EXAMINATION WITH | 1/1/2007 | $55.79 | 3 |
| 1 | 92285 | EXTERNAL OCULAR PHOTOGRAPHY W/IN | 1/1/2007 | $31.40 | 3 |
| 1 | 92286 | SPECIAL ANTERIOR SEGMENT PHOTOGR | 1/1/2007 | $97.57 | 3 |
| 1 | 92287 | SPECIAL ANTERIOR SEGMENT PHOTOGR | 1/1/2007 | $83.56 | 3 |
| 1 | 92310 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2007 | $60.46 | 3 |
| 1 | 92311 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2007 | $57.09 | 3 |
| 1 | 92312 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2007 | $61.50 | 3 |
| 1 | 92313 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| 1 | 92314 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| 1 | 92315 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| 1 | 92316 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| 1 | 92317 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| 1 | 92325 | MODIFICATION OF CONTACT LENS {SE | 1/1/2007 | $10.64 | 3 |
| 1 | 92330 | PRESCRIPTION FITTING AND SUPPLY | 1/1/2006 | INVALID | N |
| 1 | 92335 | PRESCRIPTION OF OCULAR PROSTHESI | 1/1/2006 | INVALID | N |
| 1 | 92340 | FITTING OF SPECTACLES, EXCEPT FO | 10/1/2004 | $25.00 | 3 |
| 1 | 92341 | FITTING OF SPECTACLES, EXCEPT FO | 10/1/2004 | $25.00 | 3 |
| 1 | 92342 | FITTING OF SPECTACLES, EXCEPT FO | 10/1/2004 | $25.00 | 3 |
| 1 | 92352 | FITTING OF SPECTACLE PROSTHESIS | 10/1/2004 | $25.00 | 3 |
| 1 | 92353 | FITTING OF SPECTACLE PROSTHESIS | 10/1/2004 | $25.00 | 3 |
| 1 | 92354 | FITTING OF SPECTACLE MOUNTED LOW | 12/15/1989 | NC | 9 |
| 1 | 92355 | FITTING OF SPECTACLE MOUNTED LOW | 12/15/1989 | NC | 9 |
| 1 | 92358 | PROSTHESIS SERVICE FOR APHAKIA T | 1/1/2007 | $26.47 | 3 |
| 1 | 92370 | REPAIR AND REFITTING SPECTACLES | 1/1/2007 | $23.10 | 3 |
| 1 | 92371 | REPAIR AND REFITTING SPECTACLES; | 1/1/2007 | $16.61 | 3 |
| 1 | 92390 | SUPPLY OF SPECTACLES EXCEPT PROS | 1/1/2006 | INVALID | N |
| 1 | 92391 | SUPPLY OF CONTACT LENSES EXCEPT | 1/1/2006 | INVALID | N |
| 1 | 92392 | SUPPLY OF LOW VISION AIDS (A LOW | 1/1/2006 | INVALID | N |
| 1 | 92393 | SUPPLY OF OCULAR PROSTHESIS (ART | 1/1/2006 | INVALID | N |
| 1 | 92395 | SUPPLY OF PERMANENT PROSTHESIS F | 1/1/2006 | INVALID | N |
| 1 | 92396 | SUPPLY OF PERMANENT PROSTHESIS F | 1/1/2006 | INVALID | N |
| 1 | 92499 | UNLISTED OPHTHALMOLOGICAL SERVIC | 2/1/1994 | $0.01 | 5 |
| 1 | 92502 | OTOLARYNGOLOGIC EXAMINATION UNDE | 1/1/2007 | $69.29 | 3 |
| 1 | 92504 | BINOCULAR MICROSCOPY {SEPARATE D | 1/1/2007 | $17.91 | 3 |
| 1 | 92506 | EVALUATION OF SPEECH, LANGUAGE, | 1/1/2007 | $90.57 | 3 |
| 1 | 92507 | TREATMENT OF SPEECH, LANGUAGE, V | 1/1/2007 | $42.82 | 3 |
| 1 | 92510 | AURAL REHABILITATION FOLLOWING C | 1/1/2006 | INVALID | N |
| 1 | 92511 | NASOPHARYNGOSCOPY WITH ENDOSCOPE | 1/1/2007 | $108.73 | 3 |
| 1 | 92512 | NASAL FUNCTION STUDIES EG RHINOM | 1/1/2007 | $44.37 | 3 |
| 1 | 92516 | FACIAL NERVE FUNCTION STUDIES (E | 1/1/2007 | $42.56 | 3 |
| 1 | 92520 | LARYNGEAL FUNCTION STUDIES (IE, | 1/1/2007 | $33.48 | 3 |
| 1 | 92525 | EVALUATION OF SWALLOWING AND ORA | 7/1/2003 | INVALID | N |
| 1 | 92526 | TREATMENT OF SWALLOWING DYSFUNCT | 1/1/2007 | $57.35 | 3 |
| 1 | 92531 | SPONTANEOUS NYSTAGMUS INCLUDING | 10/1/2000 | $22.68 | 3 |
| 1 | 92532 | POSITIONAL NYSTAGMUS TEST | 10/1/2000 | $34.96 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 92533 | CALORIC VESTIBULAR TEST EACH IRR | 10/1/2000 | $8.78 | 3 |
| 1 | 92534 | OPTOKINETIC NYSTAGMUS TEST | 10/1/2000 | $16.85 | 3 |
| 1 | 92541 | SPONTANEOUS NYSTAGMUS TEST INCLU | 1/1/2007 | $38.15 | 3 |
| 1 | 92542 | POSITIONAL NYSTAGMUS TEST MINIMU | 1/1/2007 | $38.93 | 3 |
| 1 | 92543 | CALORIC VESTIBULAR TEST EACH IRR | 1/1/2007 | $17.91 | 3 |
| 1 | 92544 | OPTOKINETIC NYSTAGMUS TEST BIDIR | 1/1/2007 | $30.88 | 3 |
| 1 | 92545 | OSCILLATING TRACKING TEST WITH R | 1/1/2007 | $27.51 | 3 |
| 1 | 92546 | SINUSOIDAL VERTICAL AXIS ROTATIO | 1/1/2007 | $59.94 | 3 |
| 1 | 92547 | USE OF VERTICAL ELECTRODES IN AN | 1/1/2007 | $3.63 | 3 |
| 1 | 92548 | COMPUTERIZED DYNAMIC POSTUROGRAP | 1/1/2007 | $75.51 | 3 |
| 1 | 92551 | SCREENING TEST PURE TONE AIR ONL | 10/1/2000 | $11.71 | 3 |
| 1 | 92552 | PURE TONE AUDIOMETRY {THRESHOLD} | 1/1/2007 | $12.46 | 3 |
| 1 | 92553 | PURE TONE AUDIOMETRY (THRESHOLD) | 1/1/2007 | $18.68 | 3 |
| 1 | 92555 | SPEECH AUDIOMETRY THRESHOLD; | 1/1/2007 | $10.90 | 3 |
| 1 | 92556 | SPEECH AUDIOMETRY THRESHOLD; WIT | 1/1/2007 | $16.35 | 3 |
| 1 | 92557 | COMPREHENSIVE AUDIOMETRY THRESHO | 1/1/2007 | $33.99 | 3 |
| 1 | 92559 | AUDIOMETRIC TESTING OF GROUPS | 10/1/2005 | NC | 9 |
| 1 | 92560 | BEKESY AUDIOMETRY SCREENING | 10/1/2000 | $14.90 | 3 |
| 1 | 92561 | BEKESY AUDIOMETRY; DIAGNOSTIC | 1/1/2007 | $20.24 | 3 |
| 1 | 92562 | LOUDNESS BALANCE TEST ALTERNATE | 1/1/2007 | $11.68 | 3 |
| 1 | 92563 | TONE DECAY TEST | 1/1/2007 | $10.90 | 3 |
| 1 | 92564 | SHORT INCREMENT SENSITIVTY INDEX | 1/1/2007 | $13.49 | 3 |
| 1 | 92565 | STENGER TEST PURE TONE | 1/1/2007 | $11.42 | 3 |
| 1 | 92567 | TYMPANOMETRY (IMPEDANCE TESTING) | 1/1/2007 | $15.05 | 3 |
| 1 | 92568 | ACOUSTIC REFLEX TESTING; THRESHO | 1/1/2007 | $10.90 | 3 |
| 1 | 92569 | ACOUSTIC REFLEX TESTING; DECAY | 1/1/2007 | $11.68 | 3 |
| 1 | 92571 | FILTERED SPEECH TEST | 1/1/2007 | $11.16 | 3 |
| 1 | 92572 | STAGGERED SPONDAIC WORD TEST | 1/1/2007 | $2.60 | 3 |
| 1 | 92573 | LOMBARD TEST | 1/1/2007 | INVALID | N |
| 1 | 92575 | SENSORINEURAL ACUITY LEVEL TEST | 1/1/2007 | $8.30 | 3 |
| 1 | 92576 | SYNTHETIC SENTENCE IDENTIFICATIO | 1/1/2007 | $12.72 | 3 |
| 1 | 92577 | STENGER TEST SPEECH | 1/1/2007 | $20.50 | 3 |
| 1 | 92579 | VISUAL REINFORCEMENT AUDIOMETRY | 1/1/2007 | $20.50 | 3 |
| 1 | 92582 | CONDITIONING PLAY AUDIOMETRY | 1/1/2007 | $20.50 | 3 |
| 1 | 92583 | SELECT PICTURE AUDIOMETRY | 1/1/2007 | $25.17 | 3 |
| 1 | 92584 | ELECTROCOCHLEOGRAPHY | 1/1/2007 | $69.81 | 3 |
| 1 | 92585 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $71.10 | 3 |
| 1 | 92586 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $51.90 | 3 |
| 1 | 92587 | EVOKED OTOACOUSTIC EMISSIONS; LI | 1/1/2007 | $42.04 | 3 |
| 1 | 92588 | EVOKED OTOACOUSTIC EMISSIONS; CO | 1/1/2007 | $55.27 | 3 |
| 1 | 92589 | CENTRAL AUDITORY FUNCTION TESTS | 1/1/2005 | INVALID | N |
| 1 | 92590 | HEARING AID EXAMINATION AND SELE | 10/1/2000 | $80.16 | 3 |
| 1 | 92591 | HEARING AID EXAMINATION AND SELE | 4/1/1990 | $0.01 | 5 |
| 1 | 92592 | HEARING AID CHECK MONAURAL | 1/14/2003 | NC | 9 |
| 1 | 92593 | HEARING AID CHECK; BINAURAL | 1/14/2003 | NC | 9 |
| 1 | 92594 | ELECTROACOUSTIC EVALUATION FOR H | 10/1/2000 | $24.72 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 92596 | EAR PROTECTOR ATTENUATION MEASUR | 1/1/2007 | $16.87 | 3 |
| 1 | 92598 | MODIFICATION OF VOICE PROSTHETIC | 7/1/2003 | INVALID | N |
| 1 | 92599 | UNLISTED OTORHINOLARYNGOLOGICAL | 7/1/2003 | INVALID | N |
| 1 | 92605 | EVALUATION FOR PRESCRIPTION OF N | 1/1/2003 | NC | 9 |
| 1 | 92606 | THERAPEUTIC SERVICE(S) FOR THE U | 1/1/2003 | NC | 9 |
| 1 | 92610 | EVALUATION OF ORAL AND PHARYNGEA | 1/1/2007 | $91.34 | 3 |
| 1 | 92611 | MOTION FLUOROSCOPIC EVALUATION O | 1/1/2007 | $91.34 | 3 |
| 1 | 92612 | FLEXIBLE FIBEROPTIC ENDOSCOPIC E | 1/1/2007 | $105.36 | 3 |
| 1 | 92613 | FLEXIBLE FIBEROPTIC ENDOSCOPIC E | 1/1/2007 | $30.10 | 3 |
| 1 | 92614 | FLEXIBLE FIBEROPTIC ENDOSCOPIC E | 1/1/2007 | $99.13 | 3 |
| 1 | 92615 | FLEXIBLE FIBEROPTIC ENDOSCOPIC E | 1/1/2007 | $26.73 | 3 |
| 1 | 92616 | FLEXIBLE FIBEROPTIC ENDOSCOPIC E | 1/1/2007 | $138.57 | 3 |
| 1 | 92617 | FLEXIBLE FIBEROPTIC ENDOSCOPIC E | 1/1/2007 | $33.22 | 3 |
| 1 | 92620 | EVALUATION OF CENTRAL AUDITORY F | 1/1/2005 | NC | 9 |
| 1 | 92621 | EVALUATION OF CENTRAL AUDITORY F | 1/1/2005 | NC | 9 |
| 1 | 92625 | ASSESSMENT OF TINNITUS (INC PITC | 1/1/2005 | NC | 9 |
| 1 | 92640 | DIAGNOSTIC ANALYSIS WITH PROGRAM | 1/1/2007 | NC | 9 |
| 1 | 92700 | UNLISTED OTORHINOLARYNGOLOGICAL | 1/1/2003 | $0.01 | 5 |
| 1 | 92950 | CARDIOPULMONARY RESUSCITATION {E | 1/1/2007 | $214.87 | 3 |
| 1 | 92953 | TEMPORARY TRANSCUTANEOUS PACING | 1/1/2007 | $8.30 | 3 |
| 1 | 92960 | CARDIOVERSION ELECTIVE ELECTRICA | 1/1/2007 | $224.47 | 3 |
| 1 | 92961 | CARDIOVERSION, ELECTIVE, ELECTRI | 1/1/2007 | $180.87 | 3 |
| 1 | 92970 | CARDIOASSIST-METHOD OF CIRCULATO | 1/1/2007 | $122.74 | 3 |
| 1 | 92971 | CARDIOASSIST-METHOD OF CIRCULATO | 1/1/2007 | $69.55 | 3 |
| 1 | 92973 | PERCUTANEOUS TRANSLUMINAL CORONA | 1/1/2007 | $124.56 | 3 |
| 1 | 92974 | TRANSCATHETER PLACEMENT OF RADIA | 1/1/2007 | $113.92 | 3 |
| 1 | 92975 | THROMBOLYSIS CORONARY BY INTRACO | 1/1/2007 | $274.03 | 3 |
| 1 | 92977 | THROMBOLYSIS CORONARY BY INTRAVE | 1/1/2007 | $221.35 | 3 |
| 1 | 92978 | INTRASVASCULAR ULTRASOUND (CORON | 1/1/2007 | $191.51 | 3 |
| 1 | 92979 | INTRASVASCULAR ULTRASOUND (CORON | 1/1/2007 | $116.52 | 3 |
| 1 | 92980 | TRANSCATHETER PLACEMENT OF AN IN | 1/1/2007 | $568.82 | 3 |
| 1 | 92981 | TRANSCATHETER PLACEMENT OF AN IN | 1/1/2007 | $157.78 | 3 |
| 1 | 92982 | PERCUTANEOUS TRANSLUMINAL CORONA | 1/1/2007 | $421.95 | 3 |
| 1 | 92984 | PERCUTANEOUS TRANSLUMINAL CORONA | 1/1/2007 | $112.62 | 3 |
| 1 | 92986 | PERCUTANEOUS BALLOON VALVULOPLAS | 1/1/2007 | $911.88 | 3 |
| 1 | 92987 | PERCUTANEOUS BALLOON VALVULOPLAS | 1/1/2007 | $947.43 | 3 |
| 1 | 92990 | PERCUTANEOUS BALLOON VALVULOPLAS | 1/1/2007 | $735.16 | 3 |
| 1 | 92992 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 10/1/2005 | $0.01 | 5 |
| 1 | 92993 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 10/1/2005 | $0.01 | 5 |
| 1 | 92995 | PERCUTANEOUS TRANSLUMINAL CORONA | 1/1/2007 | $463.99 | 3 |
| 1 | 92996 | PERCUTANEOUS TRANSLUMINAL CORONA | 1/1/2007 | $120.15 | 3 |
| 1 | 92997 | PERCUTANEOUS TRANSLUMINAL PULMON | 1/1/2007 | $446.60 | 3 |
| 1 | 92998 | PERCUTANEOUS TRANSLUMINAL PULMON | 1/1/2007 | $220.06 | 3 |
| 1 | 93000 | ELECTROCARDIOGRAM, ROUTINE ECG W | 1/1/2007 | $18.42 | 3 |
| 1 | 93005 | ELECTROCARDIOGRAM TRACING ONLY W | 1/1/2007 | $12.20 | 3 |
| 1 | 93010 | ELECTROCARDIOGRAM INTERPRETATION | 1/1/2007 | $6.23 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 93012 | TELEPHONIC TRANSMISSION OF POST- | 1/1/2007 | $161.15 | 3 |
| 1 | 93014 | TELEPHONIC OR TELEMETRIC TRANSMI | 1/1/2007 | $18.94 | 3 |
| 1 | 93015 | CARDIOVASCULAR STRESS TEST USING | 1/1/2007 | $73.96 | 3 |
| 1 | 93016 | CARDIOVASCULAR STRESS TEST USING | 1/1/2007 | $16.61 | 3 |
| 1 | 93017 | CARDIOVASCULAR STRESS TEST TRACI | 1/1/2007 | $46.45 | 3 |
| 1 | 93018 | CARDIOVASCULAR STRESS TEST INTER | 1/1/2007 | $10.90 | 3 |
| 1 | 93024 | ERGONOVINE PROVOCATION TEST | 1/1/2007 | $74.22 | 3 |
| 1 | 93025 | MICROVOLT T-WAVE ALTERNANS FOR A | 1/1/2007 | $220.58 | 3 |
| 1 | 93040 | RHYTHM ECG, ONE TO THREE LEADS; | 1/1/2007 | $9.86 | 3 |
| 1 | 93041 | RHYTHM ECG ONE TO THREE LEADS; T | 1/1/2007 | $4.15 | 3 |
| 1 | 93042 | RHYTHM ECG ONE TO THREE LEADS; I | 1/1/2007 | $5.71 | 3 |
| 1 | 93224 | ECG MONITOR FOR 24 HRS BY CONT O | 1/1/2007 | $113.66 | 3 |
| 1 | 93225 | ECG MONITOR FOR 24 HRS BY CONT O | 1/1/2007 | $34.25 | 3 |
| 1 | 93226 | ECG MONITOR FOR 24 HRS BY CONT O | 1/1/2007 | $60.46 | 3 |
| 1 | 93227 | ECG MONITOR FOR 24 HRS BY CONT O | 1/1/2007 | $18.94 | 3 |
| 1 | 93230 | ECG MON 24 HRS CONT ORIG ECG WAV | 1/1/2007 | $121.45 | 3 |
| 1 | 93231 | ECG MON FOR 24 HRS BY CONT ORIG | 1/1/2007 | $42.30 | 3 |
| 1 | 93232 | ECG MON FOR 24 HRS BY CONT ORIG | 1/1/2007 | $60.20 | 3 |
| 1 | 93233 | ECG MON FOR 24 HRS BY CONT ORIG | 1/1/2007 | $18.94 | 3 |
| 1 | 93235 | ECG MON FOR 24 HRS BY CONT COMP | 1/1/2007 | $88.23 | 3 |
| 1 | 93236 | ECG MON FOR 24 HRS BY CONT COMP | 1/1/2007 | $71.88 | 3 |
| 1 | 93237 | ECG MON FOR 24 HRS BY CONT COMP | 1/1/2007 | $16.35 | 3 |
| 1 | 93268 | PATIENT DEMAND SINGLE OR MULTIPL | 1/1/2007 | $214.35 | 3 |
| 1 | 93270 | PATIENT DEMAND SINGLE OR MULTIPL | 1/1/2007 | $34.25 | 3 |
| 1 | 93271 | PATIENT DEMAND SINGLE OR MULTIPL | 1/1/2007 | $161.15 | 3 |
| 1 | 93272 | PATIENT DEMAND SINGLE OR MULTIPL | 1/1/2007 | $18.94 | 3 |
| 1 | 93278 | SIGNAL-AVERAGED ELECTROCARDIOGRA | 1/1/2007 | $42.04 | 3 |
| 1 | 93303 | TRANSTHORACIC ECHOCARDIOGRAPHY F | 1/1/2007 | $153.62 | 3 |
| 1 | 93304 | TRANSTHORACIC ECHOCARDIOGRAPHY F | 1/1/2007 | $81.22 | 3 |
| 1 | 93307 | ECHOCARDIOGRAPHY, TRANSTHORACIC, | 1/1/2007 | $140.13 | 3 |
| 1 | 93308 | ECHOCARDIOGRAPHY, REAL-TIME W/IM | 1/1/2007 | $73.44 | 3 |
| 1 | 93312 | ECHOCARDIOGRAPHY, TRANSESOPHAGEA | 1/1/2007 | $185.54 | 3 |
| 1 | 93313 | ECHOCARDIOGRAPHY, REAL TIME WITH | 1/1/2007 | $31.66 | 3 |
| 1 | 93314 | ECHOCARDIOGRAPHY, REAL TIME WITH | 1/1/2007 | $151.55 | 3 |
| 1 | 93316 | TRANSESOPHAGEAL ECHOCARDIOGRAPHY | 1/1/2007 | $32.18 | 3 |
| 1 | 93317 | TRANSESOPHAGEAL ECHOCARDIOGRAPHY | 1/1/2007 | $170.75 | 3 |
| 1 | 93318 | ECHOCARDIOGRAPHY, TRANSESOPHAGEA | 10/1/2002 | $0.01 | 5 |
| 1 | 93320 | DOPPLER ECHOCARDIOGRAPHY, PULSED | 1/1/2007 | $61.50 | 3 |
| 1 | 93321 | DOPPLER ECHOCARDIOGRAPHY, PULSED | 1/1/2007 | $36.59 | 3 |
| 1 | 93325 | DOPPLER COLOR FLOW VELOCITY MAPP | 1/1/2007 | $83.82 | 3 |
| 1 | 93350 | ECHOCARDIOGRAPHY, TRANSTHORACIC, | 1/1/2007 | $103.80 | 3 |
| 1 | 93501 | RIGHT HEART CATHETERIZATION | 1/1/2007 | $580.76 | 3 |
| 1 | 93503 | INSERTION AND PLACEMENT OF FLOW | 1/1/2007 | $98.35 | 3 |
| 1 | 93505 | ENDOMYOCARDIAL BIOPSY | 1/1/2007 | $220.58 | 3 |
| 1 | 93508 | CATHETER PLACEMENT IN CORONARY A | 1/1/2007 | $512.51 | 3 |
| 1 | 93510 | LEFT HEART CATHETERIZATION RETRO | 1/1/2007 | $1,198.11 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 93511 | LEFT HEART CATHETERIZATION RETRO | 1/1/2007 | $1,197.07 | 3 |
| 1 | 93514 | LEFT HEART CATHETERIZATION BY LE | 1/1/2007 | $1,268.18 | 3 |
| 1 | 93524 | COMBINED TRANSSEPTAL AND RETROGR | 1/1/2007 | $1,574.91 | 3 |
| 1 | 93526 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $1,574.91 | 3 |
| 1 | 93527 | COMBINED RT HEART CATH & TRANSSE | 1/1/2007 | $1,587.88 | 3 |
| 1 | 93528 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $1,654.05 | 3 |
| 1 | 93529 | COMBINED RIGHT HEART CATH/LEFT H | 1/1/2007 | $1,491.87 | 3 |
| 1 | 93530 | RIGHT HEART CATHETERIZATION, FOR | 1/1/2007 | $634.48 | 3 |
| 1 | 93531 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $1,660.28 | 3 |
| 1 | 93532 | COMBINED RIGHT HEART CATHETERIZA | 10/1/2005 | $1,683.12 | 3 |
| 1 | 93533 | COMBINED RIGHT HEART CATHETERIZA | 10/1/2005 | $1,553.63 | 3 |
| 1 | 93536 | PERCUTANEOUS INSERTION OF INTRA- | 4/1/2002 | INVALID | N |
| 1 | 93539 | INJECTION PROCEDURE DURING CARDI | 1/1/2007 | $14.79 | 3 |
| 1 | 93540 | INJECTION PROCEDURE DURING CARDI | 1/1/2007 | $15.83 | 3 |
| 1 | 93541 | INJECTION PROCEDURE DURING CARDI | 1/1/2007 | $10.64 | 3 |
| 1 | 93542 | INJECTION PROCEDURE DURING CARDI | 1/1/2007 | $10.64 | 3 |
| 1 | 93543 | INJECTION PROCEDURE DURING CARDI | 1/1/2007 | $10.64 | 3 |
| 1 | 93544 | INJECTION PROCEDURE DURING CARDI | 1/1/2007 | $9.34 | 3 |
| 1 | 93545 | INJECTION PROCEDURE DURING CARDI | 1/1/2007 | $14.79 | 3 |
| 1 | 93555 | IMAGING SUPERVISION, INTERPRETAT | 1/1/2007 | $202.15 | 3 |
| 1 | 93556 | IMAGING SUPERVISION, INTERPRETAT | 1/1/2007 | $301.28 | 3 |
| 1 | 93561 | INDICATOR DILUTION STUDIES SUCH | 1/1/2007 | $32.70 | 3 |
| 1 | 93562 | INDICATOR DILUTION STUDIES SUCH | 1/1/2007 | $15.05 | 3 |
| 1 | 93571 | INTRAVASCULAR DOPPLER VELOCITY A | 1/1/2007 | $190.73 | 3 |
| 1 | 93572 | INTRAVASCULAR DOPPLER VELOCITY M | 10/1/2005 | $114.44 | 3 |
| 1 | 93580 | PERCUTANEOUS TRANSCATHETER CLOSU | 1/1/2007 | $690.79 | 3 |
| 1 | 93581 | PERCUTANEOUS TRANSCATHETER CLOSU | 1/1/2007 | $921.74 | 3 |
| 1 | 93600 | BUNDLE OF HIS RECORDING | 1/1/2007 | $134.94 | 3 |
| 1 | 93602 | INTRA-ATRIAL RECORDING | 1/1/2007 | $111.33 | 3 |
| 1 | 93603 | RIGHT VENTRICULAR RECORDING | 1/1/2007 | $127.16 | 3 |
| 1 | 93607 | LEFT VENTRICULAR RECORDING | 4/1/2002 | INVALID | N |
| 1 | 93609 | INTRAVENTRICULAR AND/OR INTRA-AT | 1/1/2007 | $264.69 | 3 |
| 1 | 93610 | INTRA-ATRIAL PACING | 1/1/2007 | $152.33 | 3 |
| 1 | 93612 | INTRAVENTRICULAR PACING | 1/1/2007 | $159.59 | 3 |
| 1 | 93613 | INTRACARDIAC ELECTROPHYSIOLOGIC | 1/1/2007 | $265.99 | 3 |
| 1 | 93615 | ESOPHAGEAL RECORDING OF ATRIAL E | 1/1/2007 | $42.30 | 3 |
| 1 | 93616 | ESOPHAGEAL RECORDING OF ATRIAL E | 10/1/2005 | $60.98 | 3 |
| 1 | 93618 | INDUCTION OF ARRHYTHMIA BY ELECT | 1/1/2007 | $270.66 | 3 |
| 1 | 93619 | COMPREHENSIVE ELECTROPHYSIOLOGIC | 1/1/2007 | $498.24 | 3 |
| 1 | 93621 | COMP ELECTROPHYSIOLOGIC EVAL W/R | 3/1/2004 | $0.01 | 5 |
| 1 | 93622 | COMP ELECTROPHYSIOLOGIC EVAL W/R | 4/1/1990 | $0.01 | 5 |
| 1 | 93623 | PROGRAMMED STIMULATION AND PACIN | 10/1/2004 | $0.01 | 5 |
| 1 | 93624 | ELECTROPHYSIOLOGIC FOLLOW-UP STU | 1/1/2007 | $245.23 | 3 |
| 1 | 93631 | INTRA-OPERATIVE EPICARDIAL AND E | 10/1/2005 | $467.10 | 3 |
| 1 | 93640 | ELECTROPHYSIOLOGIC EVAL OF CARDI | 1/1/2007 | $330.08 | 3 |
| 1 | 93641 | ELECTROPHYSIOLOGIC EVALUATION OF | 1/1/2007 | $421.95 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 93642 | ELECTROPHYSIOLOGIC EVALUATION OF | 1/1/2007 | $385.62 | 3 |
| 1 | 93650 | INTRACARDIAC CATHETER ABLATION O | 1/1/2007 | $406.38 | 3 |
| 1 | 93651 | INTRACARDIAC CATHETER ABLATION O | 1/1/2007 | $615.02 | 3 |
| 1 | 93652 | INTRACARDIAC CATHETER ABLATION O | 1/1/2007 | $668.99 | 3 |
| 1 | 93660 | EVALUATION OF CARDIOVASCULAR FUN | 1/1/2007 | $113.92 | 3 |
| 1 | 93662 | INTRACARDIAC ECHOCARDIOGRAPHY DU | 10/1/2002 | $0.01 | 5 |
| 1 | 93668 | PERIPHERAL ARTERIAL DISEAE (PAD) | 10/1/2005 | $0.01 | 5 |
| 1 | 93701 | BIOIMPEDANCE, THORACIC, ELECTRIC | 1/1/2007 | $30.36 | 3 |
| 1 | 93720 | PLETHYSMOGRAPHY TOTAL BODY WITH | 1/1/2007 | $25.95 | 3 |
| 1 | 93721 | PLETHYSMOGRAPHY TOTAL BODY TRACI | 1/1/2007 | $19.98 | 3 |
| 1 | 93722 | PLETHYSMOGRAPHY TOTAL BODY INTER | 1/1/2007 | $5.97 | 3 |
| 1 | 93724 | ELECTRONIC ANALYSIS OF ANTITACHY | 1/1/2007 | $289.60 | 3 |
| 1 | 93727 | ELECTRONIC ANALYSIS OF IMPLANTAB | 1/1/2007 | $19.20 | 3 |
| 1 | 93731 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $30.10 | 3 |
| 1 | 93732 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $48.01 | 3 |
| 1 | 93733 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $26.99 | 3 |
| 1 | 93734 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $23.61 | 3 |
| 1 | 93735 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $39.44 | 3 |
| 1 | 93736 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $23.61 | 3 |
| 1 | 93737 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| 1 | 93738 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| 1 | 93740 | TEMPERATURE GRADIENT STUDIES | 1/1/2007 | $9.60 | 3 |
| 1 | 93741 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $48.01 | 3 |
| 1 | 93742 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $52.16 | 3 |
| 1 | 93743 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $57.87 | 3 |
| 1 | 93744 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $62.02 | 3 |
| 1 | 93745 | INITIAL SET-UP AND PROGRAMMING B | 1/1/2005 | $0.01 | 5 |
| 1 | 93760 | THERMOGRAM CEPHALIC | 10/1/2000 | $50.61 | 3 |
| 1 | 93762 | THERMOGRAM; PERIPHERAL | 10/1/2000 | $60.62 | 3 |
| 1 | 93770 | DETERMINATION OF VENOUS PRESSURE | 1/1/2007 | $6.75 | 3 |
| 1 | 93784 | AMBULATORY BLOOD PRESSURE MONITO | 1/1/2007 | $50.86 | 3 |
| 1 | 93786 | AMBULATORY BLOOD PRESSURE MONITO | 1/1/2007 | $23.87 | 3 |
| 1 | 93788 | AMBULATORY BLOOD PRESSURE MONITO | 1/1/2007 | $13.49 | 3 |
| 1 | 93790 | AMBULATORY BLOOD PRESSURE MONITO | 1/1/2007 | $13.49 | 3 |
| 1 | 93797 | PHYSICIAN SERVICES FOR OUTPATIEN | 1/1/2007 | $12.72 | 3 |
| 1 | 93798 | PHYSICIAN SERVICES FOR OUTPATIEN | 1/1/2007 | $19.46 | 3 |
| 1 | 93799 | UNLISTED CARDIOVASCULAR SERVICE | 4/1/1982 | $0.01 | 5 |
| 1 | 93875 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $69.55 | 3 |
| 1 | 93880 | DUPLEX SCAN OF EXTRACRANIAL ARTE | 1/1/2007 | $170.23 | 3 |
| 1 | 93882 | DUPLEX SCAN OF EXTRACRANIAL ARTE | 1/1/2007 | $108.21 | 3 |
| 1 | 93886 | TRANSCRANIAL DOPPLER STUDY OF TH | 1/1/2007 | $211.49 | 3 |
| 1 | 93888 | TRANSCRANIAL DOPPLER STUDY OF TH | 1/1/2007 | $134.68 | 3 |
| 1 | 93890 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| 1 | 93892 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| 1 | 93893 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| 1 | 93922 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $80.19 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 93923 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $123.26 | 3 |
| 1 | 93924 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $145.32 | 3 |
| 1 | 93925 | DUPLEX SCAN OF LOWER EXTREMITY A | 1/1/2007 | $201.63 | 3 |
| 1 | 93926 | DUPLEX SCAN OF LOWER EXTREMITY A | 1/1/2007 | $122.48 | 3 |
| 1 | 93930 | DUPLEX SCAN OF UPPER EXTREMITY A | 1/1/2007 | $161.93 | 3 |
| 1 | 93931 | DUPLEX SCAN OF UPPER EXTREMITY A | 1/1/2007 | $105.62 | 3 |
| 1 | 93965 | NON-INVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $85.38 | 3 |
| 1 | 93970 | DUPLEX SCAN OF EXTREMITY VEINS I | 1/1/2007 | $166.08 | 3 |
| 1 | 93971 | DUPLEX SCAN OF EXTREMITY VEINS I | 1/1/2007 | $112.88 | 3 |
| 1 | 93975 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $259.76 | 3 |
| 1 | 93976 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $153.11 | 3 |
| 1 | 93978 | DUPLEX SCAN OF AORTA, INFERIOR V | 1/1/2007 | $145.32 | 3 |
| 1 | 93979 | DUPLEX SCAN OF AORTA, INFERIOR V | 1/1/2007 | $101.98 | 3 |
| 1 | 93980 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $117.55 | 3 |
| 1 | 93981 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $94.72 | 3 |
| 1 | 93990 | DUPLEX SCAN OF HEMODIALYSIS ACCE | 1/1/2007 | $117.03 | 3 |
| 1 | 94002 | VENTILATION ASSIST AND MANAGEMEN | 1/1/2007 | $64.10 | 3 |
| 1 | 94003 | VENTILATION ASSIST AND MANAGEMEN | 1/1/2007 | $45.67 | 3 |
| 1 | 94004 | VENTILATION ASSIST AND MANAGEMEN | 1/1/2007 | $33.22 | 3 |
| 1 | 94005 | HOME VENTILATOR MANAGEMENT CARE | 1/1/2007 | $58.39 | 3 |
| 1 | 94010 | SPIROMETRY INCLUDING GRAPHIC REC | 1/1/2007 | $22.58 | 3 |
| 1 | 94014 | PATIENT INITIATED SPIROMETRIC RE | 1/1/2007 | $33.99 | 3 |
| 1 | 94015 | PATIENT INITIATED SPIROMETRIC RE | 1/1/2007 | $15.57 | 3 |
| 1 | 94016 | PATIENT INITIATED SPIROMETRIC RE | 1/1/2007 | $18.42 | 3 |
| 1 | 94060 | BRONCHODILATION RESPONSIVE, SPIR | 1/1/2007 | $37.63 | 3 |
| 1 | 94070 | BRONCHOSPASM PROVOCATION EVAL, M | 1/1/2007 | $40.22 | 3 |
| 1 | 94150 | VITAL CAPACITY TOTAL {SEPARATE P | 1/1/2007 | $14.53 | 3 |
| 1 | 94200 | MAXIMUM BREATHING CAPACITY MAXIM | 1/1/2007 | $15.05 | 3 |
| 1 | 94240 | FUNCTIONAL RESIDUAL CAPACITY OR | 1/1/2007 | $25.43 | 3 |
| 1 | 94250 | EXPIRED GAS COLLECTION QUANTITAT | 1/1/2007 | $19.98 | 3 |
| 1 | 94260 | THORACIC GAS VOLUME | 1/1/2007 | $19.72 | 3 |
| 1 | 94350 | DETERMINATION OF MALDISTRIBUTION | 1/1/2007 | $27.77 | 3 |
| 1 | 94360 | DETERMINATION OF RESISTANCE TO A | 1/1/2007 | $26.73 | 3 |
| 1 | 94370 | DETERMINATION OF AIRWAY CLOSING | 1/1/2007 | $26.21 | 3 |
| 1 | 94375 | RESPIRATORY FLOW VOLUME LOOP | 1/1/2007 | $24.39 | 3 |
| 1 | 94400 | BREATHING RESPONSE TO C02 {C02 R | 1/1/2007 | $34.51 | 3 |
| 1 | 94450 | BREATHING RESPONSE TO HYPOXIA (H | 1/1/2007 | $33.48 | 3 |
| 1 | 94452 | HIGH ALTITUDE SIMULATION TEST (H | 1/1/2005 | NC | 9 |
| 1 | 94453 | HIGH ALTITUDE SIMULATION TEST (H | 1/1/2005 | NC | 9 |
| 1 | 94610 | INTRAPULMONARY SURFACTANT ADMINI | 1/1/2007 | $45.93 | 3 |
| 1 | 94620 | PULMONARY STRESS TESTING SIMPLE | 1/1/2007 | $84.86 | 3 |
| 1 | 94621 | PULMONARY STRESS TESTINT; COMPLE | 1/1/2007 | $98.35 | 3 |
| 1 | 94640 | NONPRESSURIZED INHALATION TREATM | 1/1/2007 | $8.30 | 3 |
| 1 | 94642 | AEROSOL INHALATION OF PENTAMIDIN | 10/1/2000 | $26.34 | 3 |
| 1 | 94644 | CONTINUOUS INHALATION TX WITH AE | 1/1/2007 | $24.39 | 3 |
| 1 | 94645 | CONTINUOUS INHALATION TX WITH AE | 1/1/2007 | $9.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 94650 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| 1 | 94651 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| 1 | 94652 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| 1 | 94656 | VENTILATION ASSIST AND MANAGEMEN | 1/1/2007 | INVALID | N |
| 1 | 94657 | VENTILATION ASSIST AND MANAGEMEN | 1/1/2007 | INVALID | N |
| 1 | 94660 | CONTINUOUS POSITIVE AIRWAY PRESS | 1/1/2007 | $37.63 | 3 |
| 1 | 94662 | CONTINUOUS NEGATIVE PRESSURE VEN | 1/1/2007 | $26.47 | 3 |
| 1 | 94664 | DEMONSTRATION AND/OR EVALUATION | 1/1/2007 | $9.08 | 3 |
| 1 | 94665 | AEROSOL OR VAPOR INHALATIONS FOR | 7/1/2003 | INVALID | N |
| 1 | 94667 | MANIPULATION CHEST WALL SUCH AS | 1/1/2007 | $14.79 | 3 |
| 1 | 94668 | MANIPULATION CHEST WALL SUCH AS | 1/1/2007 | $12.20 | 3 |
| 1 | 94680 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $57.09 | 3 |
| 1 | 94681 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $74.22 | 3 |
| 1 | 94690 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $55.01 | 3 |
| 1 | 94720 | CARBON MONOXIDE DIFFUSING CAPACI | 1/1/2007 | $34.51 | 3 |
| 1 | 94725 | MEMBRANE DIFFUSION CAPACITY | 1/1/2007 | $85.89 | 3 |
| 1 | 94750 | PULMONARY COMPLIANCE STUDY (EG, | 1/1/2007 | $42.04 | 3 |
| 1 | 94760 | NONINVASIVE EAR OR PULSE OXIMETR | 1/1/2007 | $1.56 | 3 |
| 1 | 94761 | NONINVASIVE EAR/PULSE OXIMETRY F | 1/1/2007 | $3.37 | 3 |
| 1 | 94762 | NONINVASIVE EAR OR PULSE OXIMETR | 1/1/2007 | $14.79 | 3 |
| 1 | 94770 | CARBON DIOXIDE EXPIRED GAS DETER | 1/1/2007 | $25.43 | 3 |
| 1 | 94772 | CIRCADIAN RESPIRATORY PATTERN RE | 10/1/2000 | $180.53 | 3 |
| 1 | 94774 | PEDIATRIC HOME APNEA MONITOR EVE | 1/1/2007 | $0.01 | 5 |
| 1 | 94775 | PEDIATRIC HOME APNEA MONITOR EVE | 1/1/2007 | $0.01 | 5 |
| 1 | 94776 | PEDIATRIC HOME APNEA MONITOR EVE | 1/1/2007 | $0.01 | 5 |
| 1 | 94777 | PEDIATRIC HOME APNEA MONITOR EVE | 1/1/2007 | $0.01 | 5 |
| 1 | 94799 | UNLISTED PULMONARY SERVICE OR PR | 4/1/1982 | $0.01 | 5 |
| 1 | 95004 | PERCUTANEOUS TESTS WITH ALLERGEN | 1/1/2007 | $2.85 | 3 |
| 1 | 95010 | PERCUTANEOUS TESTS SEQUENTIAL AN | 1/1/2007 | $12.46 | 3 |
| 1 | 95012 | NITRIC OXIDE EXPIRED GAS DETERMI | 1/1/2007 | NC | 9 |
| 1 | 95015 | INTRACUTANEOUS TESTS, SEQUENTIAL | 1/1/2007 | $7.79 | 3 |
| 1 | 95024 | INTRACUTANEOUS TESTS WITH ALLERG | 1/1/2007 | $4.15 | 3 |
| 1 | 95027 | SKIN END POINT TITRATION | 1/1/2007 | $4.15 | 3 |
| 1 | 95028 | INTRACUTANEOUS TESTS WITH ALLERG | 1/1/2007 | $6.23 | 3 |
| 1 | 95044 | PATCH OR APPLICATION TEST(S)(SPE | 1/1/2007 | $5.45 | 3 |
| 1 | 95052 | PHOTO PATCH TEST(S) (SPECITY NUM | 1/1/2007 | $6.75 | 3 |
| 1 | 95056 | PHOTO TESTS | 1/1/2007 | $4.67 | 3 |
| 1 | 95060 | OPHTHALMIC MUCOUS MEMBRANE TESTS | 1/1/2007 | $9.60 | 3 |
| 1 | 95065 | DIRECT NASAL MUCOUS MEMBRANE TES | 1/1/2007 | $5.45 | 3 |
| 1 | 95070 | INHALATION BRONCHIAL CHALLENGE T | 1/1/2007 | $59.94 | 3 |
| 1 | 95071 | INHALATION BRONCHIAL CHALLENGE T | 1/1/2007 | $76.55 | 3 |
| 1 | 95075 | INGESTION CHALLENGE TEST (SEQUEN | 1/1/2007 | $46.71 | 3 |
| 1 | 95078 | PROVACTIVE TESTING (EG RINKEL TE | 1/1/2007 | INVALID | N |
| 1 | 95115 | PROF SVCS FOR ALLERGEN IMMUNOTHE | 1/1/2007 | $10.64 | 3 |
| 1 | 95117 | PROFESSIONAL SERVICES FOR ALLERG | 1/1/2007 | $13.49 | 3 |
| 1 | 95120 | PROFESSIONAL SERVICES FOR ALLERG | 10/1/2000 | $11.93 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 95125 | PROFESSIONAL SERVICES FOR ALLERG | 10/1/2000 | $11.93 | 3 |
| 1 | 95130 | PROFESSIONAL SERVICES FOR ALLERG | 10/1/2000 | $16.58 | 3 |
| 1 | 95131 | PROFESSIONAL SERVICES FOR ALLERG | 10/1/2000 | $33.17 | 3 |
| 1 | 95132 | PROFESSIONAL SERVICES FOR ALLERG | 10/1/2000 | $49.74 | 3 |
| 1 | 95133 | PROFESSIONAL SERVICES FOR ALLERG | 10/1/2000 | $66.31 | 3 |
| 1 | 95134 | PROFESSIONAL SERVICES FOR ALLERG | 10/1/2000 | $82.91 | 3 |
| 1 | 95144 | PROFESSIONAL SERVICES FOR THE SU | 1/1/2007 | $6.75 | 3 |
| 1 | 95145 | PROFFESIONAL SERVICES FOR THE SU | 1/1/2007 | $10.12 | 3 |
| 1 | 95146 | PROFESSIONAL SERVICES FOR THE SU | 1/1/2007 | $13.23 | 3 |
| 1 | 95147 | PROFESSIONAL SERVICES FOR THE SU | 1/1/2007 | $12.72 | 3 |
| 1 | 95148 | PROFESSIONAL SERVICES FOR THE SU | 1/1/2007 | $16.87 | 3 |
| 1 | 95149 | PROFESSIONAL SERVICES FOR THE SU | 1/1/2007 | $22.58 | 3 |
| 1 | 95165 | PROFESSIONAL SERVICES FOR THE SU | 1/1/2007 | $6.75 | 3 |
| 1 | 95170 | PROFESSIONAL SERVICES FOR THE SU | 1/1/2007 | $5.19 | 3 |
| 1 | 95180 | RAPID DESENSITIZATION PROCEDURE, | 1/1/2007 | $106.14 | 3 |
| 1 | 95199 | UNLISTED ALLERGY/CLINICAL IMMUNO | 4/1/1982 | $0.01 | 5 |
| 1 | 95250 | AMBULATORY CONTINUOUS GLUCOSE MO | 1/1/2007 | $106.91 | 3 |
| 1 | 95251 | AMBULATORY CONTINUOUS GLUCOSE MO | 1/1/2007 | $18.94 | 3 |
| 1 | 95805 | MULTIPLE SLEEP LATENCY TESTING ( | 1/1/2007 | $509.14 | 3 |
| 1 | 95806 | SLEEP STUDY, SIMULTANEOUS RECORD | 1/1/2007 | $139.87 | 3 |
| 1 | 95807 | SLEEP STUDY, 3 OR MORE PARAMETER | 1/1/2007 | $364.34 | 3 |
| 1 | 95808 | POLYSOMNOGRAPHY; SLEEP STAGING W | 1/1/2007 | $426.36 | 3 |
| 1 | 95810 | POLYSOMNOGRAPHY; SLEEP STAGING W | 1/1/2007 | $561.82 | 3 |
| 1 | 95811 | POLYSOMNOGRAPHY; OF SLEEP, ATTEN | 1/1/2007 | $613.46 | 3 |
| 1 | 95812 | ELECTROENCEPHALOGRAM (EEG) EXTEN | 1/1/2007 | $137.28 | 3 |
| 1 | 95813 | ELECTROENCEPHALOGRAM (EEG) EXTEN | 1/1/2007 | $180.61 | 3 |
| 1 | 95816 | ELECTROENCEPHALOGRAM (EEG); INCL | 1/1/2007 | $128.71 | 3 |
| 1 | 95819 | ELECTROENCEPHALOGRAM (EEG); INCL | 1/1/2007 | $109.77 | 3 |
| 1 | 95822 | ELECTROENCEPHALOGRAM (EEG); RECO | 1/1/2007 | $152.59 | 3 |
| 1 | 95827 | ELECTROENCEPHALOGRAM (EEG); ALL | 1/1/2007 | $103.28 | 3 |
| 1 | 95829 | ELECTROCORTICOGRAM AT SURGERY (S | 1/1/2007 | $980.65 | 3 |
| 1 | 95830 | INSERTION BY PHYSICIAN OF SPHENO | 1/1/2007 | $132.60 | 3 |
| 1 | 95831 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $19.46 | 3 |
| 1 | 95832 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $16.61 | 3 |
| 1 | 95833 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $27.77 | 3 |
| 1 | 95834 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $32.70 | 3 |
| 1 | 95851 | RANGE OF MOTION MEASUREMENTS AND | 1/1/2007 | $13.75 | 3 |
| 1 | 95852 | RANGE OF MOTION MEASUREMENTS AND | 1/1/2007 | $9.86 | 3 |
| 1 | 95857 | TENSILON TEST FOR MYASTHENIA GRA | 1/1/2007 | $29.84 | 3 |
| 1 | 95858 | TENSILON TEST FOR MYASTHENIA GRA | 1/1/2006 | INVALID | N |
| 1 | 95860 | NEEDLE ELECTROMYOGRAPHY, ONE EXT | 1/1/2007 | $63.58 | 3 |
| 1 | 95861 | NEEDLE ELECTROMYOGRAPHY, TWO EXT | 1/1/2007 | $79.93 | 3 |
| 1 | 95863 | NEEDLE ELECTROMYOGRAPHY, THREE E | 1/1/2007 | $97.57 | 3 |
| 1 | 95864 | NEEDLE ELECTROMYOGRAPHY, FOUR EX | 1/1/2007 | $126.12 | 3 |
| 1 | 95865 | NEEDLE ELECTROMYOGRAPHY; LARYNX | 1/1/2007 | $81.22 | 3 |
| 1 | 95866 | NEEDLE ELECTROMYOGRAPHY; HEMIDIA | 1/1/2007 | $54.75 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 95867 | NEEDLE ELECTROMYOGRAPHY; CRANIAL | 1/1/2007 | $46.45 | 3 |
| 1 | 95868 | NEEDLE ELECTROMYOGRAPHY, CRANIAL | 1/1/2007 | $64.62 | 3 |
| 1 | 95869 | NEEDLE ELECTROMYOGRAPHY; THORACI | 1/1/2007 | $20.24 | 3 |
| 1 | 95870 | NEEDLE ELECTROMYOGRAPHY; OTHER T | 1/1/2007 | $20.24 | 3 |
| 1 | 95872 | NEEDLE ELECTROMYOGRAPHY USING SI | 1/1/2007 | $74.22 | 3 |
| 1 | 95873 | ELECTRICAL STIMULATION FOR GUIDA | 1/1/2007 | $19.98 | 3 |
| 1 | 95874 | NEEDLE ELECTROMYOGRAPHY FOR GUID | 1/1/2007 | $20.24 | 3 |
| 1 | 95875 | ISCHEMIC LIMB EXERCISE TEST WITH | 1/1/2007 | $69.03 | 3 |
| 1 | 95900 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $44.63 | 3 |
| 1 | 95903 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $47.75 | 3 |
| 1 | 95904 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $38.15 | 3 |
| 1 | 95920 | INTRAOPERATIVE NEUROPHYSIOLOGY T | 1/1/2007 | $118.85 | 3 |
| 1 | 95921 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $43.34 | 3 |
| 1 | 95922 | TESTING OF AUTONOMIC SYSTEM FUNC | 1/1/2007 | $46.97 | 3 |
| 1 | 95923 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $75.51 | 3 |
| 1 | 95925 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $45.93 | 3 |
| 1 | 95926 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $45.93 | 3 |
| 1 | 95927 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $46.71 | 3 |
| 1 | 95928 | CENTRAL MOTOR EVOKED POTENTIAL S | 1/1/2005 | NC | 9 |
| 1 | 95929 | CENTRAL MOTOR EVOKED POTENTIAL S | 1/1/2005 | NC | 9 |
| 1 | 95930 | VISUAL EVOKED POTENTIAL (VEP) TE | 1/1/2007 | $68.25 | 3 |
| 1 | 95933 | ORBICULARIS OCULI (BLINK) REFLEX | 1/1/2007 | $44.37 | 3 |
| 1 | 95934 | H-REFLEX, AMPLITUDE AND LATENCY | 1/1/2007 | $25.43 | 3 |
| 1 | 95936 | H-REFLEX, AMPLITUDE AND LATENCY | 1/1/2007 | $27.25 | 3 |
| 1 | 95937 | NEUROMUSCULAR JUNCTION TESTING ( | 1/1/2007 | $35.29 | 3 |
| 1 | 95950 | MONITORING FOR IDENTIFICATION AN | 1/1/2007 | $154.66 | 3 |
| 1 | 95953 | MONITORING FOR LOCALIZATION OF C | 1/1/2007 | $293.75 | 3 |
| 1 | 95954 | PHARMACOLOGICAL OR PHYSICAL ACTI | 1/1/2007 | $178.28 | 3 |
| 1 | 95955 | ELECTROENCEPHALOGRAM (EEG) DURIN | 1/1/2007 | $92.38 | 3 |
| 1 | 95956 | MONITORING FOR LOCALIZATION OF C | 1/1/2007 | $496.16 | 3 |
| 1 | 95957 | DIGITAL ANALYSIS OF ELECTROENCEP | 1/1/2007 | $123.52 | 3 |
| 1 | 95958 | WADA ACTIVATION TEST FOR HEMISPH | 1/1/2007 | $209.68 | 3 |
| 1 | 95961 | FUNCTIONAL CORTICAL MAPPING BY S | 1/1/2007 | $159.59 | 3 |
| 1 | 95962 | FUNCTIONAL CORTICAL MAPPING BY S | 1/1/2007 | $163.49 | 3 |
| 1 | 95965 | MAGNETOENCEPHALOGRAPHY (MEG), RE | 1/1/2003 | $0.01 | 5 |
| 1 | 95966 | MAGNETOENCEPHALOGRAPHY (MEG), RE | 1/1/2003 | $0.01 | 5 |
| 1 | 95967 | MAGNETOENCEPHALOGRAPHY (MEG), RE | 1/1/2003 | $0.01 | 5 |
| 1 | 95970 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2007 | $34.51 | 3 |
| 1 | 95971 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2007 | $39.70 | 3 |
| 1 | 95972 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2007 | $73.96 | 3 |
| 1 | 95973 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2007 | $41.78 | 3 |
| 1 | 95974 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2007 | $126.12 | 3 |
| 1 | 95975 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2007 | $70.32 | 3 |
| 1 | 95978 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2005 | NC | 9 |
| 1 | 95979 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2005 | NC | 9 |
| 1 | 95990 | REFILLING AND MAINTENANCE OF IMP | 1/1/2007 | $40.48 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 95991 | REFILLING AND MAINT OF IMPLANTAB | 1/1/2007 | $59.43 | 3 |
| 1 | 95999 | UNLISTED NEUROLOGICAL OR NEUROMU | 4/1/1982 | $0.01 | 5 |
| 1 | 96000 | COMPREHENSIVE COMPUTER-BASED MOT | 1/1/2007 | $63.32 | 3 |
| 1 | 96001 | COMPREHENSIVE COMPUTER-BASED MOT | 1/1/2007 | $75.51 | 3 |
| 1 | 96002 | DYNAMIC SURFACE ELECTROMYOGRAPHY | 1/1/2007 | $15.05 | 3 |
| 1 | 96003 | DYNAMIC FINE WIRE ELECTROMYOGRAP | 1/1/2007 | $13.23 | 3 |
| 1 | 96004 | PHYSICIAN REVIEW AND INTERPRETAT | 1/1/2007 | $82.78 | 3 |
| 1 | 96040 | MEDICAL GENETICS AND GENETIC COU | 1/1/2007 | NC | 9 |
| 1 | 96100 | PSYCHOLOGICAL TESTING WITH INTER | 1/1/2006 | INVALID | N |
| 1 | 96101 | PSYCHOLOGICAL TESTING, PER HOUR | 1/1/2007 | $66.43 | 3 |
| 1 | 96102 | PSYCHOLOGICAL TESTING, W/QUALIFI | 1/1/2006 | NC | 9 |
| 1 | 96103 | PSYCHOLOGICAL TESTING, ADMIN BY | 1/1/2006 | NC | 9 |
| 1 | 96105 | ASSESSMENT OF APHASIA WITH INTER | 1/1/1996 | NC | 9 |
| 1 | 96110 | DEVELOPMENTAL TESTING; LIMITED, | 1/1/2007 | $9.34 | 3 |
| 1 | 96111 | DEVELOPMENTAL TESTING; EXTENDED | 1/1/2007 | $99.39 | 3 |
| 1 | 96115 | NEUROBEHAVORIAL STATUS EXAM WITH | 1/1/2006 | INVALID | N |
| 1 | 96116 | NEUROBEHAVIORAL STATUS EXAM, PER | 4/1/2006 | NC | 9 |
| 1 | 96117 | NEUROPSYCHO TESTING BATTERY (HAL | 1/1/2006 | INVALID | N |
| 1 | 96118 | NEUROPSYCHOLOGICAL TESTING, PER | 1/1/2007 | $89.01 | 3 |
| 1 | 96119 | NEUROPSYCHOLOGICLA TESTING, W/QU | 1/1/2006 | NC | 9 |
| 1 | 96120 | NEUROPSYCHOLOGICAL TESTING, ADMI | 1/1/2006 | NC | 9 |
| 1 | 96154 | HEALTH AND BEHAVIOR INTERVENTION | 10/1/2004 | NC | 9 |
| 1 | 96155 | HEALTH AND BEHAVIOR INTERVENTION | 10/1/2004 | NC | 9 |
| 1 | 96400 | CHEMOTHERAPY ADMINISTRATION; SUB | 1/1/2006 | INVALID | N |
| 1 | 96401 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2007 | $45.41 | 3 |
| 1 | 96402 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2007 | $24.39 | 3 |
| 1 | 96405 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $86.41 | 3 |
| 1 | 96406 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $101.46 | 3 |
| 1 | 96408 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| 1 | 96409 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $83.82 | 3 |
| 1 | 96410 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| 1 | 96411 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $48.53 | 3 |
| 1 | 96412 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| 1 | 96413 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2007 | $118.33 | 3 |
| 1 | 96414 | CHEMO ADMIN, INTRAVEN; INFUSION | 1/1/2006 | INVALID | N |
| 1 | 96415 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2007 | $26.73 | 3 |
| 1 | 96416 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2007 | $127.16 | 3 |
| 1 | 96417 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2007 | $57.87 | 3 |
| 1 | 96420 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $75.51 | 3 |
| 1 | 96422 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $132.09 | 3 |
| 1 | 96423 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $53.98 | 3 |
| 1 | 96425 | CHEMO ADMIN, INTRA-ARTERIAL; INF | 1/1/2007 | $122.74 | 3 |
| 1 | 96440 | CHEMOTHERAPY ADMINISTRATION INTO | 1/1/2007 | $274.55 | 3 |
| 1 | 96445 | CHEMOTHERAPY ADMINISTRATION INTO | 1/1/2007 | $269.62 | 3 |
| 1 | 96450 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $222.65 | 3 |
| 1 | 96520 | PORTABLE PUMP REFILLING AND MAIN | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 96521 | REFILLING AND MAINTENANCE OF POR | 1/1/2007 | $104.84 | 3 |
| 1 | 96522 | REFILLING AND MAINT OF IMPLANTAB | 1/1/2007 | $75.77 | 3 |
| 1 | 96523 | IRRIGATION OF IMPLANTED VENOUS A | 1/1/2007 | $19.20 | 3 |
| 1 | 96530 | REFILLING AND MAINTENANCE OF IMP | 1/1/2006 | INVALID | N |
| 1 | 96542 | CHEMOTHERAPY INJECTION, SUBARACH | 1/1/2007 | $131.31 | 3 |
| 1 | 96545 | PROVISION OF CHEMOTHERAPY AGENT | 1/1/2006 | INVALID | N |
| 1 | 96549 | UNLISTED CHEMOTHERAPY PROCEDURE | 9/1/1985 | $0.01 | 5 |
| 1 | 96567 | PHOTODYNAMIC THERAPY BY EXTERNAL | 1/1/2007 | $51.90 | 3 |
| 1 | 96570 | PHOTODYNAMIC THERAPY BY ENDOSCOP | 1/1/2000 | NC | 9 |
| 1 | 96571 | PHOTODYNAMIC THERAPY BY ENDOSCOP | 1/1/2000 | NC | 9 |
| 1 | 96900 | ACTINOTHERAPY (ULTRAVIOLET LIGHT | 1/1/2007 | $11.94 | 3 |
| 1 | 96902 | MICROSCOPIC EXAM OF HAIRS PLUCKE | 1/1/2007 | $15.57 | 3 |
| 1 | 96904 | WHOLE BODY INTEGUMENTARY PHOTOGR | 1/1/2007 | NC | 9 |
| 1 | 96910 | PHOTOCHEMOTHERAPY; TAR AND ULTRA | 1/1/2007 | $26.73 | 3 |
| 1 | 96912 | PHOTOCHEMOTHERAPY; PSORALENS AND | 1/1/2007 | $33.99 | 3 |
| 1 | 96913 | PHOTOCHEMOTHERAPY (GOECKERMAN AN | 1/1/2007 | $46.19 | 3 |
| 1 | 96920 | LASER TREATMENT FOR INFLAMMATORY | 1/1/2007 | $96.27 | 3 |
| 1 | 96921 | LASER TREATMENT FOR INFLAMMATORY | 1/1/2007 | $98.87 | 3 |
| 1 | 96922 | LASER TREATMENT FOR INFLAMMATORY | 1/1/2007 | $146.10 | 3 |
| 1 | 96999 | UNLISTED SPECIAL DERMATOLOGICAL | 4/1/1982 | $0.01 | 5 |
| 1 | 97001 | PHYSICAL THERAPY EVALUATION | 1/1/2007 | $51.90 | 1 |
| 1 | 97002 | PHYSICAL THERAPY RE-EVALUATION | 1/1/2007 | $27.51 | 1 |
| 1 | 97003 | OCCUPATIONAL THERAPY EVALUATION | 1/1/2007 | $55.53 | 1 |
| 1 | 97004 | OCCUPATIONAL THERAPY RE-EVALUATI | 1/1/2007 | $33.48 | 1 |
| 1 | 97005 | ATHLETIC TRAINING EVALUATION | 1/1/2003 | NC | 9 |
| 1 | 97006 | ATHLETIC TRAINING RE-EVALUATION | 1/1/2003 | NC | 9 |
| 1 | 97010 | APPLICATION OF A MODALITY TO ONE | 10/1/2004 | NC | 9 |
| 1 | 97012 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $10.12 | 3 |
| 1 | 97014 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $9.86 | 3 |
| 1 | 97016 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| 1 | 97018 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| 1 | 97020 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2006 | INVALID | N |
| 1 | 97022 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $10.12 | 3 |
| 1 | 97024 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| 1 | 97026 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| 1 | 97028 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| 1 | 97032 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $10.90 | 3 |
| 1 | 97033 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| 1 | 97034 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| 1 | 97035 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| 1 | 97036 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $15.83 | 3 |
| 1 | 97039 | UNLISTED MODALTIY (SPECIFY TYPE | 4/1/2005 | NC | 9 |
| 1 | 97110 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.20 | 3 |
| 1 | 97112 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.98 | 3 |
| 1 | 97113 | THERAPEUTIC PROCEDURE, ONE OR MO | 1/1/2007 | $21.80 | 3 |
| 1 | 97116 | THERAPEUTIC PROCEDURE, ONE OR MO | 1/1/2007 | $16.87 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 97124 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $15.31 | 3 |
| 1 | 97139 | THERAPEUTIC PROC, ONE OR MORE AR | 4/1/2005 | NC | 9 |
| 1 | 97140 | MANUAL THERAPY TECHNIQUES, ONE O | 1/1/2007 | $17.91 | 3 |
| 1 | 97504 | ORTHOTIC(S) FITTING & TRAINING, | 1/1/2006 | INVALID | N |
| 1 | 97520 | PROSTHETIC TRAINING, UPPER AND/O | 1/1/2006 | INVALID | N |
| 1 | 97530 | THERAPEUTIC ACTIVITIES, DIRECT P | 1/1/2007 | $19.98 | 3 |
| 1 | 97532 | DEVELOPMENT OF COGNITIVE SKILLS | 1/1/2001 | NC | 9 |
| 1 | 97533 | SENSORY INTEGRATIVE TECHNIQUES T | 1/1/2001 | NC | 9 |
| 1 | 97545 | WORK HARDENING/CONDITIONING; INI | 1/1/1993 | NC | 9 |
| 1 | 97546 | WORK HARDENING/CONDITIONING; EAC | 1/1/1993 | NC | 9 |
| 1 | 97597 | REMOVAL OF DEVITALIZED TISSUE FR | 1/1/2007 | $33.48 | 3 |
| 1 | 97598 | REMOVAL OF DEVITALIZED TISSUE FR | 1/1/2007 | $42.56 | 3 |
| 1 | 97601 | REMOVAL OF DEVITALIZED TISSUE FR | 1/1/2005 | INVALID | N |
| 1 | 97602 | REMOVAL OF DEVITALIZED TISSUE FR | 5/1/2003 | $23.36 | 3 |
| 1 | 97605 | NEGATIVE PRESSURE WOUDN THERAPY, | 1/1/2005 | NC | 9 |
| 1 | 97606 | NEGATIVE PRESSURE WOUND THERAPY, | 1/1/2005 | NC | 9 |
| 1 | 97703 | CHECKOUT FOR ORTHOTIC/PROSTHETIC | 1/1/2006 | INVALID | N |
| 1 | 97750 | PHYSICAL PERFORMANCE TEST OR MEA | 1/1/2007 | $20.50 | 3 |
| 1 | 97755 | ASSISTIVE TECHNOLOGY ASSESSMENT, | 1/1/2007 | $23.87 | 3 |
| 1 | 97760 | ORTHOTIC(S) MANAGEMENT AND TRAIN | 1/1/2007 | $21.28 | 3 |
| 1 | 97761 | PROSTHETIC TRAINING, UPPER AND/O | 1/1/2007 | $19.46 | 3 |
| 1 | 97762 | CHECKOUT FOR ORTHOTIC/PROSTHETIC | 1/1/2007 | $17.91 | 3 |
| 1 | 97780 | ACUPUNCTURE, ONE OR MORE NEEDLES | 1/1/2005 | INVALID | N |
| 1 | 97781 | ACUPUNCTURE, ONE OR MORE NEEDLES | 1/1/2005 | INVALID | N |
| 1 | 97799 | UNLISTED PHYSICAL MEDICINE/REHAB | 4/1/1982 | $0.01 | 5 |
| 1 | 97802 | MEDICAL NUTRITION THERAPY; INITI | 1/1/2003 | $0.01 | P |
| 1 | 97803 | MEDICAL NUTRITION THERAPY; RE-AS | 1/1/2003 | $0.01 | P |
| 1 | 97804 | MEDICLA NUTRITION THERAPY; GROUP | 1/1/2001 | NC | 9 |
| 1 | 97810 | ACUPUNCTURE, ONE OR MORE NEEDLES | 1/1/2007 | $26.21 | 3 |
| 1 | 97811 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2007 | $20.24 | 3 |
| 1 | 97813 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2007 | $28.03 | 3 |
| 1 | 97814 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2007 | $22.84 | 3 |
| 1 | 98925 | OSTEOPATHIC MANIPULATIVE TREATME | 1/1/2007 | $20.50 | 3 |
| 1 | 98926 | OSTEOPATHIC MANIPULATIVE TREATME | 1/1/2007 | $28.29 | 3 |
| 1 | 98927 | OSTEOPATHIC MANIPULATIVE TREATME | 1/1/2007 | $36.33 | 3 |
| 1 | 98928 | OSTEOPATHIC MANIPULATIVE TREATME | 1/1/2007 | $43.08 | 3 |
| 1 | 98929 | OSTEOPATHIC MANIPULATIVE TREATME | 1/1/2007 | $49.56 | 3 |
| 1 | 98943 | CHIROPRACTIC MANIPULATIVE TREATM | 1/1/1997 | NC | 9 |
| 1 | 98960 | EDUCATION AND TRAINING FOR PT SE | 1/1/2006 | NC | 9 |
| 1 | 98961 | EDUCATION AND TRAINING FOR PT SE | 1/1/2006 | NC | 9 |
| 1 | 98962 | EDUCATION AND TRAINING FOR PT SE | 1/1/2006 | NC | 9 |
| 1 | 99000 | HANDLING AND/OR CONVEYANCE OF SP | 5/1/1991 | NC | 9 |
| 1 | 99001 | HANDLING AND/OR CONVEYANCE OF SP | 5/1/1991 | NC | 9 |
| 1 | 99002 | HANDLING, CONVEYANCE, AND/OR ANY | 3/27/1989 | NC | 9 |
| 1 | 99024 | POSTOPERATIVE FOLLOW-UP VISIT, I | 4/1/1988 | NC | 9 |
| 1 | 99025 | INITIAL (NEW PATIENT) VISIT WHEN | 4/1/2004 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 99026 | HOSPITAL MANDATED ON CALL SERVIC | 1/1/2003 | NC | 9 |
| 1 | 99027 | HOSPITAL MANDATED ON CALL SERVIC | 1/1/2003 | NC | 9 |
| 1 | 99050 | SERVICES PROVIDED IN THE OFFICE | 10/1/2000 | $11.71 | 3 |
| 1 | 99051 | SERVICES PROVIDED IN THE OFFICE | 1/1/2006 | NC | 9 |
| 1 | 99052 | SERVICES REQUESTED BETWEEN 10:00 | 1/1/2006 | INVALID | N |
| 1 | 99053 | SERVICES PROVIDED BETWEEN 10 PM | 1/1/2006 | NC | 9 |
| 1 | 99054 | SERVICES REQUESTED ON SUNDAYS AN | 1/1/2006 | INVALID | N |
| 1 | 99056 | SVCS TYPICALLY PROVIDED IN THE O | 4/1/1982 | NC | 9 |
| 1 | 99058 | SVCS PROVIDED ON AN EMERGENCY BA | 10/1/2000 | $4.71 | 3 |
| 1 | 99060 | SERVICES PROVIDED ON AN EMERGENC | 1/1/2006 | $0.01 | 5 |
| 1 | 99070 | SUPP & MAT (EX SPECTACLES) PROVI | 10/1/2002 | NC | 9 |
| 1 | 99071 | EDUCATIONAL SUPPLIES SUCH AS BOO | 10/1/2004 | NC | 9 |
| 1 | 99075 | MEDICAL TESTIMONY | 10/1/2004 | NC | 9 |
| 1 | 99078 | PHYSICIAN EDUCATIONAL SERVICES R | 10/1/2005 | $11.51 | 3 |
| 1 | 99082 | UNUSUAL TRAVEL (EG, TRANSPORTATI | 4/1/1982 | NC | 9 |
| 1 | 99090 | ANALYSIS OF CLINICAL DATA STORED | 4/1/1989 | NC | 9 |
| 1 | 99091 | COLLECTION AND INTERPRETATION OF | 1/1/2002 | NC | 9 |
| 1 | 99100 | ANESTHESIA FOR PATIENT OF EXTREM | 3/1/1989 | NC | 9 |
| 1 | 99116 | ANESTHESIA COMPLICATED BY UTILIZ | 3/1/1989 | NC | 9 |
| 1 | 99135 | ANESTHESIA COMPLICATED BY UTILIZ | 3/1/1989 | NC | 9 |
| 1 | 99140 | ANESTHESIA COMPLICATED BY EMERGE | 3/1/1989 | NC | 9 |
| 1 | 99141 | SEDATION WITH OR WITHOUT ANALGES | 1/1/2006 | INVALID | N |
| 1 | 99142 | SEDATION WITH OR WITHOUT ANALGES | 1/1/2006 | INVALID | N |
| 1 | 99143 | MODERATE SEDATION SVCS PROVIDED | 7/24/2006 | $81.73 | 3 |
| 1 | 99144 | MODERATE SEDATION SVCS PROVIDED | 3/1/2006 | $70.58 | 3 |
| 1 | 99145 | MODERATE SEDATION SVCS PROVIDED | 1/1/2006 | $0.01 | 5 |
| 1 | 99148 | MODERATE SEDATION SVCS PROVIDED | 1/1/2006 | $0.01 | 5 |
| 1 | 99149 | MODERATE SEDATION SVCS PROVIDED | 1/1/2006 | $0.01 | 5 |
| 1 | 99150 | MODERATE SEDATION SVCS PROVIDED | 1/1/2006 | $0.01 | 5 |
| 1 | 99170 | ANOGENITAL EXAMINATION WITH COLP | 1/1/2007 | $93.42 | 3 |
| 1 | 99172 | VISUAL FUNCTION SCREENING, AUTOM | 4/1/2002 | $85.64 | 3 |
| 1 | 99173 | SCREENING TEST OF VISUAL ACUITY, | 8/20/2003 | $7.27 | 3 |
| 1 | 99175 | IPECAC OR SIMILAR ADMINISTRATION | 1/1/2007 | $38.67 | 3 |
| 1 | 99183 | PHYSICIAN ATTENDANCE AND SUPERVI | 1/1/2007 | $149.21 | 3 |
| 1 | 99185 | HYPOTHERMIA REGIONAL | 1/1/2007 | $17.65 | 3 |
| 1 | 99186 | HYPOTHERMIA; TOTAL BODY | 1/1/2007 | $58.13 | 3 |
| 1 | 99190 | ASSEMBLY AND OPERATION OF PUMP W | 10/1/2000 | $84.26 | 3 |
| 1 | 99191 | ASSEMBLY AND OPERATION OF PUMP W | 10/1/2000 | $51.12 | 3 |
| 1 | 99192 | ASSEMBLY AND OPERATION OF PUMP W | 10/1/2000 | $38.02 | 3 |
| 1 | 99195 | PHLEBOTOMY THERAPEUTIC (SEPARATE | 1/1/2007 | $11.94 | 3 |
| 1 | 99199 | UNLISTED SPECIAL SERVICE OR REPO | 8/1/1984 | $0.01 | 5 |
| 1 | 99201 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $25.17 | 1 |
| 1 | 99202 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $44.63 | 1 |
| 1 | 99203 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $66.43 | 1 |
| 1 | 99204 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $93.94 | 1 |
| 1 | 99205 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $119.37 | 1 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 99211 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $14.79 | 1 |
| 1 | 99212 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $26.47 | 1 |
| 1 | 99213 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $36.07 | 1 |
| 1 | 99214 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $56.57 | 1 |
| 1 | 99215 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $82.26 | 1 |
| 1 | 99217 | OBSERVATION CARE DISCHARGE DAY M | 1/1/2007 | $48.53 | 1 |
| 1 | 99218 | INITIAL OBSERVATION CARE, PER DA | 1/1/2007 | $46.19 | 1 |
| 1 | 99219 | INITIAL OBSERVATION CARE, PER DA | 1/1/2007 | $76.81 | 1 |
| 1 | 99220 | INITIAL OBSERVATION CARE, PER DA | 1/1/2007 | $107.95 | 1 |
| 1 | 99221 | INITIAL HOSPITAL CARE, PER DAY, | 1/1/2007 | $46.71 | 1 |
| 1 | 99222 | INITIAL HOSP CARE, PER DAY, FOR | 1/1/2007 | $77.33 | 1 |
| 1 | 99223 | INITIAL HOSP CARE, PER DAY, FOR | 1/1/2007 | $107.69 | 1 |
| 1 | 99231 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $23.36 | 1 |
| 1 | 99232 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $38.15 | 1 |
| 1 | 99233 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $54.24 | 1 |
| 1 | 99234 | OBSERVATION OR INPATIENT HOSP CA | 1/1/2007 | $92.90 | 1 |
| 1 | 99235 | OBSERVATION OR INPATIENT HOSP CA | 1/1/2007 | $122.48 | 1 |
| 1 | 99236 | OBSERVATION OR INPATIENT HOSP CA | 1/1/2007 | $152.85 | 1 |
| 1 | 99238 | HOSPITAL DISCHARGE DAY MANAGEMEN | 1/1/2007 | $48.53 | 1 |
| 1 | 99239 | HOSPITAL DISCHARGE DAY MANAGEMEN | 1/1/2007 | $66.17 | 1 |
| 1 | 99241 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $34.51 | 1 |
| 1 | 99242 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $63.06 | 1 |
| 1 | 99243 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $84.08 | 1 |
| 1 | 99244 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $118.59 | 1 |
| 1 | 99245 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $153.36 | 1 |
| 1 | 99251 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $24.65 | 1 |
| 1 | 99252 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $49.56 | 1 |
| 1 | 99253 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $67.73 | 1 |
| 1 | 99254 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $97.31 | 1 |
| 1 | 99255 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $134.16 | 1 |
| 1 | 99261 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| 1 | 99262 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| 1 | 99263 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| 1 | 99271 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| 1 | 99272 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| 1 | 99273 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| 1 | 99274 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| 1 | 99275 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| 1 | 99281 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $11.42 | 1 |
| 1 | 99282 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $18.94 | 1 |
| 1 | 99283 | EMERGENCY DEPT VISIT FOR THE E/M | 1/1/2007 | $42.56 | 1 |
| 1 | 99284 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $66.43 | 1 |
| 1 | 99285 | EMER DEPT VISIT FOR E/M OF PT, W | 1/1/2007 | $104.06 | 1 |
| 1 | 99288 | PHYSICIAN DIRECTION OF EMER MEDI | 4/1/2001 | $36.13 | 1 |
| 1 | 99289 | CRITICAL CARE SERVICES DELIVERED | 1/1/2003 | NC | 9 |
| 1 | 99290 | CRITICAL CARE SERVICES DELIVERED | 1/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 99291 | CRITICAL CARE, E/M OF THE UNSTAB | 1/1/2007 | $175.94 | 1 |
| 1 | 99292 | CRITICAL CARE, INCL DIAG AND THE | 1/1/2007 | $78.11 | 1 |
| 1 | 99293 | INITIAL INPATIENT PEDIATRIC CRIT | 1/1/2007 | $567.27 | 3 |
| 1 | 99294 | SUBSEQUENT INPATIENT PEDIATRIC C | 1/1/2007 | $281.56 | 3 |
| 1 | 99295 | INITIAL INPATIENT NEONATAL CRITI | 1/1/2007 | $649.01 | 1 |
| 1 | 99296 | SUBSEQUENT INPATIENT NEONATAL CR | 1/1/2007 | $281.82 | 1 |
| 1 | 99297 | SUBSEQUENT NEONATAL INTENSIVE CA | 7/1/2003 | INVALID | N |
| 1 | 99298 | SUBSEQUENT INTENSIVE CARE, PER D | 1/1/2007 | $99.91 | 1 |
| 1 | 99299 | SUBSEQUENT INTENSIVE CARE, PER D | 1/1/2007 | $91.34 | 1 |
| 1 | 99300 | SUBSEQUENT INTENSIVE CARE, PER D | 1/1/2007 | $87.97 | 1 |
| 1 | 99301 | E/M OF NEW OR EST PT INVOLVING A | 1/1/2006 | INVALID | N |
| 1 | 99302 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| 1 | 99303 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| 1 | 99304 | INITIAL NURSING FACILITY CARE, P | 1/1/2007 | $45.15 | 1 |
| 1 | 99305 | INITIAL NURSING FACILITY CARE, P | 1/1/2007 | $59.94 | 1 |
| 1 | 99306 | INITIAL NURSING FACILITY CARE, P | 1/1/2007 | $73.96 | 1 |
| 1 | 99307 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $23.36 | 1 |
| 1 | 99308 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $38.67 | 1 |
| 1 | 99309 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $54.50 | 1 |
| 1 | 99310 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $68.25 | 1 |
| 1 | 99311 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| 1 | 99312 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| 1 | 99313 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| 1 | 99315 | NURSING FACILITY DISCHARGE DAY M | 1/1/2007 | $42.30 | 1 |
| 1 | 99316 | NURSING FACILITY DISCHARGE DAY M | 1/1/2007 | $55.79 | 1 |
| 1 | 99318 | E & M OF A PATIENT INVOLVING AN | 1/1/2007 | $45.15 | 3 |
| 1 | 99321 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| 1 | 99322 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| 1 | 99323 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| 1 | 99324 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $40.22 | 1 |
| 1 | 99325 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $58.91 | 1 |
| 1 | 99326 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $85.38 | 1 |
| 1 | 99327 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $112.36 | 1 |
| 1 | 99328 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $139.09 | 1 |
| 1 | 99331 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| 1 | 99332 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| 1 | 99333 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| 1 | 99334 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $31.14 | 1 |
| 1 | 99335 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $49.31 | 1 |
| 1 | 99336 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $76.03 | 1 |
| 1 | 99337 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $111.84 | 1 |
| 1 | 99339 | INDIVIDUAL PHYSICIAN SUPERVISION | 1/1/2006 | $0.01 | 5 |
| 1 | 99340 | INDIVIDUAL PHYSICIAN SUPERVISION | 1/1/2006 | $0.01 | 5 |
| 1 | 99341 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $39.96 | 1 |
| 1 | 99342 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $58.91 | 1 |
| 1 | 99343 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $85.89 | 1 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 99344 | HOME VISIT FOR THE E/M OF A NEW | 1/1/2007 | $112.62 | 1 |
| 1 | 99345 | HOME VISIT FOR THE E/M OF A NEW | 1/1/2007 | $139.35 | 1 |
| 1 | 99347 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $31.14 | 1 |
| 1 | 99348 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $49.31 | 1 |
| 1 | 99349 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $76.29 | 1 |
| 1 | 99350 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $112.62 | 1 |
| 1 | 99354 | PROLONGED PHYSICIAN SERVICE IN T | 1/1/2007 | $67.99 | 3 |
| 1 | 99355 | PROLONGED PHYSICIAN SERVICE IN T | 1/1/2007 | $67.21 | 3 |
| 1 | 99356 | PROLONGED PHYSICIAN SERVICE IN T | 1/1/2007 | $62.28 | 3 |
| 1 | 99357 | PROLONGED PHYSICIAN SERVICE IN T | 1/1/2007 | $62.80 | 3 |
| 1 | 99358 | PROLONGED EVALUATION AND MANAGEM | 10/1/2004 | NC | 9 |
| 1 | 99359 | PROLONGED EVALUATION AND MANAGEM | 10/1/2004 | NC | 9 |
| 1 | 99360 | PHYSICIAN STANDBY SERVICE, REQUI | 10/1/2003 | $60.42 | 3 |
| 1 | 99361 | MEDICAL CONF BY PHYS W/INTERDISC | 10/1/2003 | $26.46 | 3 |
| 1 | 99362 | MEDICAL CONF BY PHYS W/INTERDISC | 10/1/2003 | $39.70 | 3 |
| 1 | 99363 | ANTICOAGULANT MANAGEMENT FOR AN | 1/1/2007 | $78.11 | 3 |
| 1 | 99364 | ANTICOAGULANT MANAGEMENT FOR AN | 1/1/2007 | $27.25 | 3 |
| 1 | 99371 | TELEPHONE CALL BY PHYS TO PT OR | 10/1/2003 | $10.82 | 3 |
| 1 | 99372 | TELEPHONE CALL BY PHYS TO PT OR | 4/1/2001 | $10.82 | 1 |
| 1 | 99373 | PHONE CALL BY PHYS TO PT FOR CON | 10/1/2003 | $10.82 | 3 |
| 1 | 99374 | PHYSICIAN SUPERVISION OF A PATIE | 1/1/2007 | $48.01 | 3 |
| 1 | 99375 | PHYSICIAN SUPERVISION OF PATIENT | 1/1/2007 | $86.93 | 3 |
| 1 | 99377 | PHYSICIAN SUPERVISION OF A HOSPI | 1/1/2007 | $48.01 | 3 |
| 1 | 99378 | PHYSICIAN SUPERVISION OF A HOSPI | 1/1/2007 | $97.31 | 3 |
| 1 | 99379 | PHYSICIAN SUPERVISION OF A NURSI | 1/1/2007 | $47.75 | 3 |
| 1 | 99380 | PHYSICIAN SUPERVISION OF A NURSI | 1/1/2007 | $72.14 | 3 |
| 1 | 99381 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $71.10 | 1 |
| 1 | 99382 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $76.55 | 1 |
| 1 | 99383 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $75.00 | 1 |
| 1 | 99384 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $81.48 | 1 |
| 1 | 99385 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $81.48 | 1 |
| 1 | 99386 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $96.02 | 1 |
| 1 | 99387 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $104.06 | 1 |
| 1 | 99391 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $53.98 | 1 |
| 1 | 99392 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $60.46 | 1 |
| 1 | 99393 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $59.69 | 1 |
| 1 | 99394 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $65.91 | 1 |
| 1 | 99395 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $66.69 | 1 |
| 1 | 99396 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $73.70 | 1 |
| 1 | 99397 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $81.22 | 1 |
| 1 | 99401 | PREVENTIVE MEDICINE COUNSELING A | 1/1/2007 | $28.80 | 1 |
| 1 | 99402 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $48.53 | 1 |
| 1 | 99403 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $67.21 | 1 |
| 1 | 99404 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $86.15 | 1 |
| 1 | 99411 | PREVENTIVE MEDICINE COUNSELING A | 1/1/2007 | $8.82 | 1 |
| 1 | 99412 | COUNSELING AND/OR RISK FACTOR PR | 1/1/2007 | $13.23 | 1 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | 99420 | ADMINISTRATION AND INTERPRETATIO | 1/1/2003 | $0.01 | P |
| 1 | 99431 | HISTORY AND EXAM OF NORMAL NEWBO | 1/1/2007 | $41.52 | 1 |
| 1 | 99432 | NORMAL NEWBORN CARE IN OTHER THA | 1/1/2007 | $58.65 | 1 |
| 1 | 99433 | SUBSEQUENT HOSP CARE, FOR THE E/ | 1/1/2007 | $21.80 | 1 |
| 1 | 99435 | HISTORY AND EXAMINATION OF THE N | 1/1/2007 | $55.79 | 1 |
| 1 | 99436 | ATTENDANCE AT DELIVERY (WHEN REQ | 1/1/2007 | $52.68 | 1 |
| 1 | 99440 | NEWBORN RESUSCITATION; PROVISION | 1/1/2007 | $103.28 | 1 |
| 1 | 99450 | BASIC LIFE AND/OR DISABILITY EXA | 1/1/1995 | NC | 9 |
| 1 | 99455 | WORK RELATED OR MEDICAL DISABILI | 4/1/2002 | $151.02 | 3 |
| 1 | 99456 | WORK RELATED OR MEDICAL DISABILI | 4/1/2002 | $151.02 | 3 |
| 1 | 99499 | UNLISTED EVALUATION AND MANAGEME | 1/1/1992 | $0.01 | 5 |
| 1 | 99500 | HOME VISIT FOR PRENATAL MONITORI | 1/1/2002 | NC | 9 |
| 1 | 99501 | HOME VISIT FOR POSTNATAL ASSESSM | 1/1/2002 | NC | 9 |
| 1 | 99502 | HOME VISIT FOR NEWBORN CARE AND | 1/1/2002 | NC | 9 |
| 1 | 99503 | HOME VISIT FOR RESPIRATORY THERA | 1/1/2002 | NC | 9 |
| 1 | 99504 | HOME VISIT FOR MECHANICAL VENTIL | 1/1/2002 | NC | 9 |
| 1 | 99505 | HOME VISIT FOR STOMA CARE AND MA | 1/1/2002 | NC | 9 |
| 1 | 99506 | HOME VISIT FOR INTRAMUSCULAR INJ | 1/1/2002 | NC | 9 |
| 1 | 99507 | HOME VISIT FOR CARE AND MAINTENA | 1/1/2002 | NC | 9 |
| 1 | 99508 | HOME VISIT FOR POLYSOMNOGRAPHY A | 7/1/2003 | INVALID | N |
| 1 | 99509 | HOME VISIT FOR ASSISTANCE WITH A | 1/1/2002 | NC | 9 |
| 1 | 99510 | HOME VISIT FOR INDIVIDUAL, FAMIL | 1/1/2002 | NC | 9 |
| 1 | 99511 | HOME VISIT FOR FECAL IMPACTION M | 1/1/2002 | NC | 9 |
| 1 | 99512 | HOME VISIT FOR HEMODIALYSIS, PER | 1/1/2002 | NC | 9 |
| 1 | 99539 | UNLISTED HOME VISIT SERVICE OR P | 7/1/2003 | INVALID | N |
| 1 | 99551 | HOME INFUSION FOR PAIN MANAGEMEN | 4/1/2004 | INVALID | N |
| 1 | 99552 | HOME INFUSION FOR PAIN MANAGEMEN | 4/1/2004 | INVALID | N |
| 1 | 99553 | HOME INFUSION FOR TOCOLYTIC THER | 4/1/2004 | INVALID | N |
| 1 | 99554 | HOME INFUSION FOR HEMATOPOIETIC | 4/1/2004 | INVALID | N |
| 1 | 99555 | HOME INFUSION FOR CHEMOTHERAPY, | 4/1/2004 | INVALID | N |
| 1 | 99556 | HOME INFUSION FOR ANTIBIOTICS/AN | 4/1/2004 | INVALID | N |
| 1 | 99557 | HOME INFUSION OF CONTINUOUS ANTI | 4/1/2004 | INVALID | N |
| 1 | 99558 | HOME INFUSION OF IMMUNOTHERAPY, | 4/1/2004 | INVALID | N |
| 1 | 99559 | HOME INFUSION OF PERITONEAL DIAL | 4/1/2004 | INVALID | N |
| 1 | 99560 | HOME INFUSION OF ENTERAL NUTRITI | 4/1/2004 | INVALID | N |
| 1 | 99561 | HOME INFUSION OF HYDRATION THERA | 4/1/2004 | INVALID | N |
| 1 | 99562 | HOME INFUSION OF TOTAL PARENTERA | 4/1/2004 | INVALID | N |
| 1 | 99563 | HOME ADMINISTRATION OF AEROSOLIZ | 4/1/2004 | INVALID | N |
| 1 | 99564 | HOME INFUSION FOR ANTI-HEMOPHILI | 4/1/2004 | INVALID | N |
| 1 | 99565 | HOME INFUSIN OF ALPHA-1 PROTEINA | 4/1/2004 | INVALID | N |
| 1 | 99566 | HOME INFUSION FOR UNINTERRUPTED, | 4/1/2004 | INVALID | N |
| 1 | 99567 | HOME INFUSION OF SYMPATHOMIMETIC | 4/1/2004 | INVALID | N |
| 1 | 99568 | HOME INFUSION OF MISCELLANEOUS D | 4/1/2004 | INVALID | N |
| 1 | 99569 | HOME INFUSION, EACH ADDITIONAL T | 4/1/2004 | INVALID | N |
| 1 | 99601 | HOME INFUSION/SPECIALTY DRUG ADM | 1/1/2004 | $0.01 | 5 |
| 1 | 99602 | HOME INFUSION/SPECIALTY DRUG ADM | 1/1/2004 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | A4212 | NON-CORING NEEDLE OR STYLET WITH | 2/1/1994 | NC | 9 |
| 1 | A4214 | STERILE SALINE OR WATER, 30 CC V | 4/1/2004 | INVALID | N |
| 1 | A4220 | REFILL KIT FOR IMPLANTABLE INFUS | 10/1/2000 | $162.24 | 3 |
| 1 | A4222 | INFUSION SUPPLIES FOR EXTERNAL D | 1/1/2006 | NC | 9 |
| 1 | A4230 | INFUSION SET FOR EXTERNAL INSULI | 1/1/1996 | NC | 9 |
| 1 | A4231 | INFUSION SET FO REXTERNAL INSULI | 1/1/1996 | NC | 9 |
| 1 | A4232 | SYRINGE WITH NEEDLE FOR EXTERNAL | 7/1/2006 | NC | 9 |
| 1 | A4254 | REPLACEMENT BATTERY, ANY TYPE, F | 1/1/2006 | INVALID | N |
| 1 | A4260 | LEVONORGESTREL (CONTRACEPTIVE) I | 1/1/2006 | INVALID | N |
| 1 | A4261 | CERVICAL CAP FOR CONTRACEPTIVE U | 8/1/2003 | $86.25 | 3 |
| 1 | A4262 | TEMPORARY, ABSORBABLE LACRIMAL D | 10/1/2000 | $1.08 | 3 |
| 1 | A4263 | PERMANENT, LONG-TERM, NONDISSOLV | 10/1/2000 | $46.51 | 3 |
| 1 | A4266 | DIAPHRAGM FOR CONTRACEPTIVE USE | 8/1/2003 | $21.28 | 3 |
| 1 | A4267 | CONTRACEPTIVE SUPPLY, CONDOM, MA | 8/1/2003 | $0.11 | 3 |
| 1 | A4268 | CONTRACEPTIVE SUPPLY, CONDOM, FE | 8/1/2003 | $1.15 | 3 |
| 1 | A4269 | CONTRACEPTIVE SUPPLY, SPERMICIDE | 8/1/2003 | $7.36 | 3 |
| 1 | A4270 | DISPOSABLE ENDOSCOPE SHEATH, EAC | 10/1/2001 | NC | 9 |
| 1 | A4290 | SACRAL NERVE STIMULATION TEST LE | 1/1/2001 | NC | 9 |
| 1 | A4300 | IMPLANTABLE ACCESS CATHETER, (EG | 10/1/2000 | $54.08 | 3 |
| 1 | A4301 | IMPLANTABLE ACCESS TOTAL CATHETE | 1/1/1996 | NC | 9 |
| 1 | A4305 | DISPOSABLE DRUG DELIVERY SYSTEM, | 10/1/2000 | $21.63 | 3 |
| 1 | A4306 | DISPOSABLE DRUG DELIVERY SYSTEM, | 10/1/2000 | $21.63 | 3 |
| 1 | A4310 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $6.55 | 3 |
| 1 | A4311 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $12.61 | 3 |
| 1 | A4312 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $15.31 | 3 |
| 1 | A4313 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $15.72 | 3 |
| 1 | A4314 | INSERTION TRAY W/DRAINAGE BAG W/ | 10/1/2006 | $21.46 | 3 |
| 1 | A4315 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $22.39 | 3 |
| 1 | A4316 | INSERTION TRAY W/DRAINAGE BAG W/ | 10/1/2006 | $24.11 | 3 |
| 1 | A4319 | STERILE WATER IRRIGATION SOLUTIO | 4/1/2004 | INVALID | N |
| 1 | A4320 | IRRIGATION TRAY WITH BULB OR PIS | 10/1/2006 | $5.32 | 3 |
| 1 | A4321 | THERAPEUTIC AGENT FOR URINARY CA | 3/1/1997 | NC | 9 |
| 1 | A4322 | IRRIGATION SYRINGE, BULB OR PIST | 10/1/2006 | $2.73 | 3 |
| 1 | A4323 | STERILE SALINE IRRIGATION SOLUTI | 4/1/2004 | INVALID | N |
| 1 | A4324 | MALE EXTERNAL CATHETER, WITH ADH | 1/1/2005 | INVALID | N |
| 1 | A4325 | MALE EXTERNAL CATHETER, WITH ADH | 1/1/2005 | INVALID | N |
| 1 | A4326 | MALE EXTERNAL CATHETER SPECIALTY | 10/1/2006 | $10.35 | 3 |
| 1 | A4327 | FEMALE EXTERNAL URINARY COLLECTI | 10/1/2006 | $44.55 | 3 |
| 1 | A4328 | FEMALE EXTERNAL URINARY COLLECTI | 10/1/2006 | $9.86 | 3 |
| 1 | A4329 | EXTERNAL CATH START SET,MALE/FEM | 4/1/2002 | INVALID | N |
| 1 | A4330 | PERIANAL FECAL COLLECTION POUCH | 10/1/2006 | $6.93 | 3 |
| 1 | A4331 | EXTENSION DRAINAGE TUBINE, ANY T | 10/1/2006 | $3.18 | 3 |
| 1 | A4333 | URINARY CATHETER ANCHORING DEVIC | 10/1/2006 | $2.20 | 3 |
| 1 | A4334 | URINARY CATHETER ANCHORING DEVIC | 10/1/2006 | $4.93 | 3 |
| 1 | A4335 | INCONTINENCE SUPPLY; MISCELLANEO | 10/1/2001 | $12.00 | 3 |
| 1 | A4338 | INDWELLING CATHETER; FOLEY TYPE; | 10/1/2006 | $12.25 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | A4340 | INDWELLING CATHETER; SPECIALTY T | 10/1/2006 | $31.69 | 3 |
| 1 | A4344 | INDWELLING CATHETER, FOLEY TYPE, | 10/1/2006 | $15.99 | 3 |
| 1 | A4346 | INDWELLING CATHETER; FOLEY TYPE, | 10/1/2006 | $19.57 | 3 |
| 1 | A4347 | MALE EXTERNAL CATHETER WITH OR W | 1/1/2005 | INVALID | N |
| 1 | A4348 | MALE EXTERNAL CATHETER WITH INTE | 1/1/2007 | INVALID | N |
| 1 | A4351 | INTERMITTENT URINARY CATHETER; S | 10/1/2006 | $1.81 | 3 |
| 1 | A4352 | INTERMITTENT URINARY CATHETER; C | 10/1/2006 | $6.41 | 3 |
| 1 | A4353 | INTERMITTENT URINARY CATHETER, W | 10/1/2006 | $6.99 | 3 |
| 1 | A4354 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $10.01 | 3 |
| 1 | A4355 | IRRIGATION TUBING SET FOR CONTIN | 10/1/2006 | $8.90 | 3 |
| 1 | A4356 | EXTERNAL URETHRAL CLAMP OR COMPR | 10/1/2006 | $42.35 | 3 |
| 1 | A4357 | BEDSIDE DRAINAGE BAG, DAY OR NIG | 10/1/2006 | $9.68 | 3 |
| 1 | A4358 | URINARY DRAINAGE BAG, LEG OR ABD | 10/1/2006 | $5.85 | 3 |
| 1 | A4359 | URINARY SUSPENSORY WITHOUT LEG B | 1/1/2007 | INVALID | N |
| 1 | A4361 | OSTOMY FACEPLATE, EACH | 10/1/2006 | $18.37 | 3 |
| 1 | A4362 | SKIN BARRIER; SOLID, 4 X 4 OR EQ | 10/1/2006 | $2.94 | 3 |
| 1 | A4367 | OSTOMY BELT, EACH | 10/1/2006 | $7.35 | 3 |
| 1 | A4368 | OSTOMY FILTER, ANY TYPE, EACH | 7/1/2002 | NC | 9 |
| 1 | A4369 | OSTOMY SKIN BARRIER, LIQUID (SPR | 10/1/2006 | $2.06 | 3 |
| 1 | A4370 | OSTOMY SKIN BARRIER, PASTE, PER | 7/1/2003 | INVALID | N |
| 1 | A4371 | OSTOMY SKIN BARRIER, POWDER, PER | 10/1/2006 | $3.60 | 3 |
| 1 | A4372 | OSTOMY SKIN BARRIER, SOLID 4X4 O | 10/1/2006 | $4.18 | 3 |
| 1 | A4373 | OSTOMY SKIN BARRIER, W/FLANGE (S | 10/1/2006 | $6.28 | 3 |
| 1 | A4374 | OSTOMY SKIN BARRIER, W/FLANGE (S | 7/1/2003 | INVALID | N |
| 1 | A4375 | OSTOMY POUCH, DRAINABLE, WITH FA | 10/1/2006 | $17.18 | 3 |
| 1 | A4376 | OSTOMY POUCH, DRAINABLE, WITH FA | 10/1/2006 | $47.58 | 3 |
| 1 | A4377 | OSTOMY POUCH, DRAINABLE, FOR USE | 10/1/2006 | $4.29 | 3 |
| 1 | A4378 | POUCH, DRAINABLE, FOR USE ON FAC | 10/1/2006 | $30.75 | 3 |
| 1 | A4379 | POUCH, URINARY, WITH FACEPLATE A | 10/1/2006 | $15.02 | 3 |
| 1 | A4380 | POUCH, URINARY, WITH FACEPLATE, | 10/1/2006 | $37.33 | 3 |
| 1 | A4381 | OSTOMY POUCH, URINARY, FOR USE O | 10/1/2006 | $4.61 | 3 |
| 1 | A4382 | OSTOMY POUCH, URINARY, FOR USE O | 10/1/2006 | $24.62 | 3 |
| 1 | A4383 | OSTOMY POUCH, URINARY, FOR USE O | 10/1/2006 | $28.19 | 3 |
| 1 | A4384 | OSTOMY FACEPLATE EQUIVALENT, SIL | 10/1/2006 | $9.62 | 3 |
| 1 | A4385 | OSTOMY SKIN BARRIER, SOLID 4X4 O | 10/1/2006 | $5.10 | 3 |
| 1 | A4386 | SKIN BARRIER, WITH FLANGE (SOLID | 7/1/2003 | INVALID | N |
| 1 | A4387 | OSTOMY POUCH, CLOSED, WITH BARRI | 10/1/2005 | $3.95 | 3 |
| 1 | A4388 | OSTOMY POUCH, DRAINABLE, WITH EX | 10/1/2006 | $4.36 | 3 |
| 1 | A4389 | OSTOMY POUCH, DRAINABLE, WITH BA | 10/1/2006 | $6.22 | 3 |
| 1 | A4390 | OSTOMY POUCH, DRAINABLE, W/EXTEN | 10/1/2006 | $9.61 | 3 |
| 1 | A4391 | OSTOMY POUCH, URINARY, WITH EXTE | 10/1/2006 | $7.07 | 3 |
| 1 | A4392 | OSTOMY POUCH, URINARY, W/STANDAR | 10/1/2006 | $6.77 | 3 |
| 1 | A4393 | OSTOMY POUCH, URINARY, W/EXTENDE | 10/1/2006 | $9.04 | 3 |
| 1 | A4394 | OSTOMY DEODORANT FOR USE IN OSTO | 10/1/2006 | $2.58 | 3 |
| 1 | A4395 | OSTOMY DEODORANT FOR USE IN OSTO | 10/1/2006 | $0.05 | 3 |
| 1 | A4396 | OSTOMY BELT WITH PERISTOMAL HERN | 10/1/2006 | $40.48 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | A4397 | IRRIGATION SUPPLY; SLEEVE, EACH | 10/1/2006 | $4.07 | 3 |
| 1 | A4398 | OSTOMY IRRIGATION SUPPLY; BAG, E | 10/1/2006 | $13.81 | 3 |
| 1 | A4399 | OSTOMY IRRIGATION SUPPLY; CONE/C | 10/1/2006 | $12.26 | 3 |
| 1 | A4400 | OSTOMY IRRIGATION SET | 9/1/1996 | NC | 9 |
| 1 | A4402 | LUBRICANT, PER OUNCE | 10/1/2006 | $1.60 | 3 |
| 1 | A4404 | OSTOMY RING, EACH | 10/1/2006 | $1.44 | 3 |
| 1 | A4421 | OSTOMY SUPPLY; MISCELLANEOUS | 1/1/1994 | $100.00 | 3 |
| 1 | A4454 | TAPE, ALL TYPES, ALL SIZES | 7/1/2003 | INVALID | N |
| 1 | A4460 | ELASTIC BANDAGE, PER ROLL (EG; C | 7/1/2003 | INVALID | N |
| 1 | A4461 | SURGICAL DRESSING HOLDER, NON-RE | 1/1/2007 | NC | 9 |
| 1 | A4463 | SURGICAL DRESSING HOLDER, REUSAB | 1/1/2007 | NC | 9 |
| 1 | A4465 | NONELASTIC BINDER FOR EXTREMITY | 10/1/2000 | $21.63 | 3 |
| 1 | A4470 | GRAVLEE JET WASHER | 10/1/2001 | NC | 9 |
| 1 | A4480 | VABRA ASPIRATOR | 10/1/2001 | NC | 9 |
| 1 | A4490 | SURGICAL STOCKING ABOVE KNEE LEN | 4/1/2003 | NC | 9 |
| 1 | A4495 | SURGICAL STOCKING THIGH LENGTH, | 4/1/2003 | NC | 9 |
| 1 | A4500 | SURGICAL STOCKING BELOW KNEE LEN | 1/1/2003 | NC | 9 |
| 1 | A4510 | SURGICAL STOCKING FULL-LENGTH, E | 1/1/2003 | NC | 9 |
| 1 | A4550 | SURGICAL TRAYS | 10/1/2000 | $27.04 | 3 |
| 1 | A4559 | COUPLING GEL OR PASTE, FOR USE W | 1/1/2007 | NC | 9 |
| 1 | A4561 | PESSARY, RUBBER, ANY TYPE | 10/1/2005 | $18.35 | 3 |
| 1 | A4562 | PESSARY, NON RUBBER, ANY TYPE | 10/1/2005 | $20.64 | 3 |
| 1 | A4565 | SLINGS | 10/1/2000 | $10.82 | 3 |
| 1 | A4570 | SPLINT | 7/1/2002 | NC | 9 |
| 1 | A4572 | RIB BELT | 7/1/2003 | INVALID | N |
| 1 | A4575 | TOPICAL HYPERBARIC OXYGEN CHAMBE | 1/1/1996 | NC | 9 |
| 1 | A4580 | CAST SUPPLIES (E.G.,PLASTER) | 7/1/2002 | NC | 9 |
| 1 | A4590 | SPECIAL CASTING MATERIAL (E.G.,F | 7/1/2002 | NC | 9 |
| 1 | A4600 | SLEEVE FOR INTERMITTENT LIMB COM | 1/1/2007 | NC | 9 |
| 1 | A4601 | LITHIUM ION BATTERY FOR NON-PROS | 1/1/2007 | NC | 9 |
| 1 | A4621 | TRACHEOTOMY MASK OR COLLAR | 4/1/2004 | INVALID | N |
| 1 | A4622 | TRACHEOSTOMY OR LARYNGECTOMY TUB | 4/1/2004 | INVALID | N |
| 1 | A4630 | REPLACEMENT BATTERIES, MEDICALLY | 2/1/1994 | NC | 9 |
| 1 | A4641 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2001 | NC | 9 |
| 1 | A4642 | SUPPLY OF SATUMOMAB PENDETIDE, R | 1/1/1995 | NC | 9 |
| 1 | A4643 | SUPPLY OF ADDITIONAL HIGH DOSE C | 1/1/2006 | INVALID | N |
| 1 | A4644 | SUPPY OF LOW OSMOLAR CONTRAST MA | 1/1/2006 | INVALID | N |
| 1 | A4645 | SUPPY OF LOW OSMOLAR CONTRAST MA | 1/1/2006 | INVALID | N |
| 1 | A4646 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| 1 | A4647 | SUPPLY OF PARAMAGNETIC CONTRAST | 1/1/2006 | INVALID | N |
| 1 | A4649 | SURGICAL SUPPLY; MISCELLANEOUS | 12/20/2004 | $0.01 | 5 |
| 1 | A4712 | WATER, STERILE, FOR INJECTION, P | 4/1/2004 | INVALID | N |
| 1 | A4750 | BLOOD TUBING, ARTERIAL OR VENOUS | 1/1/2001 | NC | 9 |
| 1 | A4772 | BLOOD GLUCOSE TEST STRIPS, FOR D | 1/1/2006 | NC | 9 |
| 1 | A5051 | OSTOMY POUCH, CLOSED; WITH BARRI | 10/1/2006 | $2.07 | 3 |
| 1 | A5052 | OSTOMY POUCH, CLOSED; WITHOUT BA | 10/1/2006 | $1.49 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | A5053 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.74 | 3 |
| 1 | A5054 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.72 | 3 |
| 1 | A5055 | STOMA CAP | 10/1/2006 | $1.44 | 3 |
| 1 | A5062 | OSTOMY POUCH, DRAINABLE; WITHOUT | 10/1/2006 | $2.09 | 3 |
| 1 | A5063 | OSTOMY POUCH, DRAINABLE; FOR USE | 10/1/2006 | $2.21 | 3 |
| 1 | A5064 | POUCH, DRAINABLE; WITH FACEPLATE | 4/1/2002 | INVALID | N |
| 1 | A5071 | OSTOMY POUCH, URINARY; WITH BARR | 10/1/2006 | $3.77 | 3 |
| 1 | A5072 | OSTOMY POUCH, URINARY; WITHOUT B | 10/1/2006 | $3.50 | 3 |
| 1 | A5073 | OSTOMY POUCH, URINARY; FOR USE O | 10/1/2006 | $3.18 | 3 |
| 1 | A5074 | POUCH, URINARY; WITH FACEPLATE A | 4/1/2002 | INVALID | N |
| 1 | A5075 | POUCH, URINARY; FOR USE ON FACEP | 4/1/2002 | INVALID | N |
| 1 | A5081 | CONTINENT DEVICE; PLUG FOR CONTI | 10/1/2006 | $2.81 | 3 |
| 1 | A5082 | CONTINENT DEVICE; CATHETER FOR C | 10/1/2006 | $10.15 | 3 |
| 1 | A5093 | OSTOMY ACCESSORY; CONVEX INSERT | 10/1/2006 | $1.66 | 3 |
| 1 | A5102 | BEDSIDE DRAINAGE BOTTLE, WITH OR | 10/1/2006 | $22.54 | 3 |
| 1 | A5105 | URINARY SUSPENSORY; WITH LEG BAG | 10/1/2006 | $34.60 | 3 |
| 1 | A5112 | URINARY LEG BAG; LATEX | 10/1/2006 | $34.57 | 3 |
| 1 | A5119 | SKIN BARRIER; WIPES OR SWABS, PE | 1/1/2006 | INVALID | N |
| 1 | A5123 | SKIN BARRIER; WITH FLANGE (SOLID | 7/1/2003 | INVALID | N |
| 1 | A5500 | FOR DIABETICS ONLY, FITTING (INC | 10/1/2006 | $59.36 | 3 |
| 1 | A5501 | FOR DIABETICS ONLY, FITTING (INC | 10/1/2006 | $171.85 | 3 |
| 1 | A5502 | FOR DIABETICS ONLY, MULTIPLE DEN | 4/1/2002 | INVALID | N |
| 1 | A5503 | FOR DIABETICS ONLY, MODIFICIATIO | 10/1/2006 | $26.40 | 3 |
| 1 | A5504 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| 1 | A5505 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| 1 | A5506 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| 1 | A5507 | FOR DIABETICS ONLY, NOT OTHERWIS | 10/1/2006 | $26.40 | 3 |
| 1 | A5509 | FOR DIABETICS ONLY, DIRECT FORME | 1/1/2006 | INVALID | N |
| 1 | A5510 | FOR DIABETICS ONLY, DIRECT FORME | 2/15/2003 | $33.00 | 3 |
| 1 | A5511 | FOR DIABETICS ONLY, CUSTOM-MOLDE | 1/1/2006 | INVALID | N |
| 1 | A5512 | FOR DIABETICS ONLY, MULT DENSITY | 10/1/2006 | $24.22 | 3 |
| 1 | A5513 | FOR DIABETICS ONLY, MULT DENSITY | 10/1/2006 | $36.14 | 3 |
| 1 | A6010 | COLLAGEN BASED WOUND FILLER, DRY | 10/1/2006 | $30.96 | 3 |
| 1 | A6011 | COLLAGEN BASED WOUND FILLER, GEL | 10/1/2006 | $2.28 | 3 |
| 1 | A6021 | COLLAGEN DRESSING, PAD SIZE 16 S | 10/1/2006 | $21.02 | 3 |
| 1 | A6022 | COLLAGEN DRESSING, PAD SIZE MORE | 10/1/2006 | $21.02 | 3 |
| 1 | A6023 | COLLAGEN DRESSING, PAD SIZE MORE | 10/1/2006 | $190.30 | 3 |
| 1 | A6024 | COLLAGEN DRESSING WOUND FILLER, | 10/1/2006 | $6.19 | 3 |
| 1 | A6025 | GEL SHEET FOR DERMAL OR EPIDERMA | 1/1/2001 | $3.19 | 3 |
| 1 | A6154 | WOUND POUCH, EACH | 10/1/2006 | $14.36 | 3 |
| 1 | A6196 | ALGINATE DRESSING, WOUND COVER, | 10/1/2006 | $7.35 | 3 |
| 1 | A6197 | ALGINATE OR OTHER FIBER GELLING | 10/1/2006 | $16.44 | 3 |
| 1 | A6198 | ALGINATE OR OTHER FIBER GELLING | 1/1/2001 | $115.61 | 3 |
| 1 | A6199 | ALGIANTE OR OTHER FIBER GELLING | 10/1/2006 | $5.29 | 3 |
| 1 | A6200 | COMPOSITE DRESSING, PAD SIZE 16 | 10/1/2006 | $9.50 | 3 |
| 1 | A6201 | COMPOSITE DRESSING PAD SIZE MORE | 10/1/2006 | $20.80 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | A6202 | COMPOSITE DRESSING, PAD SIZE MOR | 10/1/2006 | $34.88 | 3 |
| 1 | A6203 | COMPOSITE DRESSING, PAD SIZE 16 | 10/1/2006 | $3.35 | 3 |
| 1 | A6204 | COMPOSITE DRESSING, PAD SIZE MOR | 10/1/2006 | $6.23 | 3 |
| 1 | A6205 | COMPOSITE DRESSING, PAD SIZE MOR | 1/1/2001 | $4.69 | 3 |
| 1 | A6206 | CONTACT LAYER, 16 SQ IN OR LESS, | 1/1/2001 | $1.05 | 3 |
| 1 | A6207 | CONTACT LAYER, MORE THAN 16 BUT | 10/1/2006 | $7.34 | 3 |
| 1 | A6208 | CONTACT LAYER, MORE THAN 48 SQ I | 1/1/2001 | $3.52 | 3 |
| 1 | A6209 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $7.48 | 3 |
| 1 | A6210 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $19.92 | 3 |
| 1 | A6211 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $29.37 | 3 |
| 1 | A6212 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $9.70 | 3 |
| 1 | A6213 | FOAM DRESSING, WOUND COVER, PAD | 1/1/2001 | $15.41 | 3 |
| 1 | A6214 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $10.29 | 3 |
| 1 | A6215 | FOAM DRESSING, WOUND FILLER, PER | 1/1/2001 | $2.39 | 3 |
| 1 | A6216 | GAUZE, NON-IMPREGNATED, NON-STER | 10/1/2006 | $0.05 | 3 |
| 1 | A6217 | GAUZE, NON-IMPREGNATED, NON-STER | 10/1/2006 | $0.39 | 3 |
| 1 | A6218 | GAUZE, NON-IMPREGNATED, NON-STER | 1/1/2001 | $0.62 | 3 |
| 1 | A6219 | GAUZE, NON-IMPREGNATED, PAD SIZE | 10/1/2006 | $0.95 | 3 |
| 1 | A6220 | GAUZE, NON-IMPREGNATED, PAD SIZE | 10/1/2006 | $2.58 | 3 |
| 1 | A6221 | GAUZE, NON-IMPREGNATED, PAD SIZE | 1/1/2001 | $6.17 | 3 |
| 1 | A6222 | GAUZE, IMPREGNATED W/OTHER THAN | 10/1/2006 | $2.13 | 3 |
| 1 | A6223 | GAUZE, IMPREGNATED W/OTHER THAN | 10/1/2006 | $2.42 | 3 |
| 1 | A6224 | GAUZE, IMPREGNATED W/OTHER THAN | 10/1/2006 | $3.61 | 3 |
| 1 | A6231 | GAUZE, IMPREGNATED, HYDROGEL, FO | 10/1/2006 | $4.68 | 3 |
| 1 | A6232 | GAUZE, IMPREGNATED, HYDROGEL, FO | 10/1/2006 | $6.88 | 3 |
| 1 | A6233 | GAUZE, IMPREGNATED, HYDROGEL FOR | 10/1/2006 | $19.19 | 3 |
| 1 | A6234 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $6.54 | 3 |
| 1 | A6235 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $16.82 | 3 |
| 1 | A6236 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $27.25 | 3 |
| 1 | A6237 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $7.91 | 3 |
| 1 | A6238 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $22.79 | 3 |
| 1 | A6239 | HYDROCOLLOID DRESSING, WOUND COV | 1/1/2001 | $18.74 | 3 |
| 1 | A6240 | HYDROCOLLOID DRESSING, WOUND FIL | 10/1/2006 | $12.24 | 3 |
| 1 | A6241 | HYDROCOLLOID DRESSINGK WOUND FIL | 10/1/2006 | $2.57 | 3 |
| 1 | A6242 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $6.07 | 3 |
| 1 | A6243 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $12.31 | 3 |
| 1 | A6244 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $39.28 | 3 |
| 1 | A6245 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $7.27 | 3 |
| 1 | A6246 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $9.92 | 3 |
| 1 | A6247 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $23.78 | 3 |
| 1 | A6248 | HYDROGEL DRESSING, WOUND FILLER, | 10/1/2006 | $16.24 | 3 |
| 1 | A6251 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $1.99 | 3 |
| 1 | A6252 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $3.25 | 3 |
| 1 | A6253 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $6.34 | 3 |
| 1 | A6254 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $1.21 | 3 |
| 1 | A6255 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $3.03 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | A6256 | SPECIALTY ABSORPTIVE DRESSING, W | 1/1/2001 | $8.22 | 3 |
| 1 | A6257 | TRANSPARENT FILM, 16 SQ IN OR LE | 10/1/2006 | $1.53 | 3 |
| 1 | A6258 | TRANSPARENT FILM, MORE THAN 16 B | 10/1/2006 | $4.30 | 3 |
| 1 | A6259 | TRANSPARENT FILM, MORE THAN 48 S | 10/1/2006 | $10.94 | 3 |
| 1 | A6261 | WOUND FILLER, GEL/PASTE, PER FLU | 1/1/2001 | $30.28 | 3 |
| 1 | A6262 | WOUND FILLER, DRY FORM, PER GRAM | 1/1/2001 | $1.08 | 3 |
| 1 | A6263 | GAUZE, ELASTIC, NON-STERILE, ALL | 7/1/2003 | INVALID | N |
| 1 | A6264 | GAUZE, NON-ELASTIC, NON-STERILE, | 7/1/2003 | INVALID | N |
| 1 | A6265 | TAPE, ALL TYPES, PER 18 SQ INCHE | 7/1/2003 | INVALID | N |
| 1 | A6266 | GAUZE, IMPREGNATED, OTHER THAN W | 10/1/2006 | $1.92 | 3 |
| 1 | A6402 | GAUZE, NON-IMPREGNATED, STERILE, | 10/1/2006 | $0.12 | 3 |
| 1 | A6403 | GAUZE, NON-IMPREGNATED, STERILE, | 10/1/2006 | $0.43 | 3 |
| 1 | A6404 | GAUZE, NON-IMPREGNATED, STERILE, | 1/1/2001 | $0.64 | 3 |
| 1 | A6405 | GAUZE, ELASTIC, STERILE, ALL TYP | 7/1/2003 | INVALID | N |
| 1 | A6406 | GAUZE, NON-ELASTIC, STERILE, ALL | 7/1/2003 | INVALID | N |
| 1 | A7523 | TRACHEOSTOMY SHOWER PROTECTOR, E | 1/1/2004 | NC | 9 |
| 1 | A8000 | HELMET, PROTECTIVE, SOFT, PREFAB | 1/1/2007 | NC | 9 |
| 1 | A8001 | HELMET, PROTECTIVE, HARD, PREFAB | 1/1/2007 | NC | 9 |
| 1 | A8002 | HELMET, PROTECTIVE, SOFT, CUSTOM | 1/1/2007 | NC | 9 |
| 1 | A8003 | HELMET, PROTECTIVE, HARD, CUSTOM | 1/1/2007 | NC | 9 |
| 1 | A8004 | SOFT INTERFACE FOR HELMET, REPLA | 1/1/2007 | NC | 9 |
| 1 | A9152 | SINGLE VITAMIN/MINERAL/TRACE ELE | 1/1/2005 | NC | 9 |
| 1 | A9153 | MULTIPLE VITAMINS, WITH OR WITHO | 1/1/2005 | NC | 9 |
| 1 | A9180 | PEDICULOSIS (LICE INFESTATION) T | 1/1/2005 | NC | 9 |
| 1 | A9270 | NONCOVERED ITEM OR SERVICE | 2/1/1995 | NC | 9 |
| 1 | A9279 | MONITORING FEATURE/DEVICE, STAND | 1/1/2007 | NC | 9 |
| 1 | A9281 | REACHING/GRABBING DEVICE, ANY TY | 1/1/2006 | NC | 9 |
| 1 | A9282 | WIG, ANY TYPE, EACH | 1/1/2006 | NC | 9 |
| 1 | A9300 | EXERCISE EQUIPMENT | 3/1/1987 | NC | 9 |
| 1 | A9500 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $150.10 | 3 |
| 1 | A9502 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $65.00 | 3 |
| 1 | A9503 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $30.51 | 3 |
| 1 | A9504 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $343.58 | 3 |
| 1 | A9505 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $15.05 | 3 |
| 1 | A9507 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $0.01 | 5 |
| 1 | A9508 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $0.01 | 5 |
| 1 | A9510 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $26.63 | 3 |
| 1 | A9511 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| 1 | A9512 | TECHNETIUM TC-99M PERTECHNETATE, | 6/1/2006 | $4.00 | 3 |
| 1 | A9513 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| 1 | A9514 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| 1 | A9515 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| 1 | A9516 | IODINE I-123 SODIUM IODIDE CAPSU | 6/1/2006 | $38.10 | 3 |
| 1 | A9517 | IODINE I-131 SODIUM IODIDE CAPSU | 6/1/2006 | $12.15 | 3 |
| 1 | A9518 | SUPPLY OF RADIOPHARMACEUTICAL TH | 4/1/2004 | INVALID | N |
| 1 | A9519 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | A9520 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| 1 | A9521 | TECHNETIUM TC-99M EXAMETAZIME, D | 6/1/2006 | $359.34 | 3 |
| 1 | A9522 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| 1 | A9523 | SUPPLY OF RADIOPHARMACEUTICAL TH | 1/1/2006 | INVALID | N |
| 1 | A9524 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2003 | $200.00 | 3 |
| 1 | A9525 | SUPPLY OF LOW OR ISO-OSMOLAR CON | 1/1/2006 | INVALID | N |
| 1 | A9526 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2004 | NC | 9 |
| 1 | A9527 | IODINE I-125, SODIUM IODIDE SOLU | 1/1/2007 | NC | 9 |
| 1 | A9528 | IODINE I-131 SODIUM IODIDE CAPSU | 1/1/2004 | NC | 9 |
| 1 | A9529 | IODINE I-131 SODIUM IODIDE SOLUT | 1/1/2004 | NC | 9 |
| 1 | A9530 | IODINE I-131 SODIUM IODIDE SOLUT | 1/1/2004 | NC | 9 |
| 1 | A9531 | IODINE I-131 SODIUM IODIDE, DIAG | 1/1/2004 | NC | 9 |
| 1 | A9532 | IODINE I-125 SERUM ALBUMIN, DIAG | 1/1/2004 | NC | 9 |
| 1 | A9533 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| 1 | A9534 | SUPPLY OF RADIOPHARMACEUTICAL TH | 1/1/2006 | INVALID | N |
| 1 | A9535 | INJECTION, METHYLENE BLUE, 1 ML | 1/1/2006 | $0.01 | 5 |
| 1 | A9536 | TECHNETIUM TC-99M DEPREOTIDE, DI | 1/1/2006 | $0.01 | 5 |
| 1 | A9537 | TECHNETIUM TC-99M MEBROFENIN, DI | 6/1/2006 | $25.11 | 3 |
| 1 | A9538 | TECHNETIUM TC-99M PYROPHOSPHATE, | 6/1/2006 | $16.00 | 3 |
| 1 | A9539 | TECHNETIUNM TC-99M PENTETATE, DI | 6/1/2006 | $9.00 | 3 |
| 1 | A9540 | TECHNETIUM TC-99M MACROAGGREGATE | 6/1/2006 | $9.00 | 3 |
| 1 | A9541 | TECHNETIUM TC-99M SULFUR COLLOID | 6/1/2006 | $16.80 | 3 |
| 1 | A9542 | INDIUM IN-111 IBRITUMOMAB TIUXET | 1/1/2006 | $0.01 | 5 |
| 1 | A9543 | YTTRIUM Y-90 IBRITUMOMAB TIUXETA | 1/1/2006 | $0.01 | 5 |
| 1 | A9544 | IODINE I-131 TOSITUMOMAB, DIAGNO | 1/1/2006 | $0.01 | 5 |
| 1 | A9545 | IODINE I-131 TOSITUMOMAB, THERAP | 1/1/2006 | $0.01 | 5 |
| 1 | A9546 | COBALT CO-57/58, CYANOCOBALAMIN, | 6/1/2006 | $183.61 | 3 |
| 1 | A9547 | INDIUM IN-111 OXYQUINOLINE, DIAG | 6/1/2006 | $381.25 | 3 |
| 1 | A9548 | INDIUM IN-111 PENTETATE, DIAGNOS | 6/1/2006 | $673.95 | 3 |
| 1 | A9549 | TECHNETIUM TC-99M ARCITUMOMAB, D | 1/1/2007 | INVALID | N |
| 1 | A9550 | TECHNETIUM TC-99M SODIUM GLUCEPT | 6/1/2006 | $99.64 | 3 |
| 1 | A9551 | TECHNETIUM TC-99M SUCCIMER, DIAG | 6/1/2006 | $95.00 | 3 |
| 1 | A9552 | FLUORODEOXYGLUCOSE F-18 FDG, DIA | 7/1/2006 | $220.00 | 3 |
| 1 | A9553 | CHROMIUM CR-51 SODIUMCHROMATE, D | 6/1/2006 | $497.00 | 3 |
| 1 | A9554 | IODINE I-125 SODIUM IOTHALAMATE, | 1/1/2006 | $0.01 | 5 |
| 1 | A9555 | RUBIDIUM RB-82, DIAGNOSTIC, PER | 1/1/2006 | $0.01 | 5 |
| 1 | A9556 | GALLIUM GA-67 CITRATE, DIAGNOSTI | 6/1/2006 | $19.18 | 3 |
| 1 | A9557 | TECHNETIUM TC-99M BICISATE, DIAG | 6/1/2006 | $292.22 | 3 |
| 1 | A9558 | XENON XE-133 GAS, DIAGNOSTIC, PE | 6/1/2006 | $21.65 | 3 |
| 1 | A9559 | COBALT CO-57 CYANOCOBALAMIN, ORA | 6/1/2006 | $58.66 | 3 |
| 1 | A9560 | TECHNETIUM TC-99M LABELED RED BL | 6/1/2006 | $79.67 | 3 |
| 1 | A9561 | TECHNETIUM TC-99M OXIDRONATE, DI | 6/1/2006 | $11.97 | 3 |
| 1 | A9562 | TECHNETIUM TC-99M MERTIATIDE, DI | 6/1/2006 | $166.87 | 3 |
| 1 | A9563 | SODIUM PHOSPHATE P-32, THERAPEUT | 6/1/2006 | $669.53 | 3 |
| 1 | A9564 | CHROMIC PHOSPHATE P-32 SUSPENSIO | 1/1/2006 | $0.01 | 5 |
| 1 | A9565 | INDIUM IN-111 PENTETREOTIDE, DIA | 1/1/2006 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | A9566 | TECHNETIUM TC-99M FANOLESOMAB, D | 1/1/2006 | $0.01 | 5 |
| 1 | A9567 | TECHNETIUM TC-99M PENTETATE, DIA | 1/1/2006 | $0.01 | 5 |
| 1 | A9568 | TECHNETIUM TC-99M ARCITUMOMAB, D | 1/1/2007 | $0.01 | 5 |
| 1 | A9600 | STRONTIUM SR-89 CHLORIDE, THERAP | 6/1/2006 | $0.01 | 5 |
| 1 | A9605 | SAMARIUM SM-153 LEXIDRONAMM, THE | 6/1/2006 | $0.01 | 5 |
| 1 | A9698 | NONRADIOACTIVE CONTRAST IMAGING | 1/1/2006 | $0.01 | 5 |
| 1 | A9700 | SUPPLY OF INJECTABLE CONTRAST MA | 1/1/2001 | NC | 9 |
| 1 | B4081 | NASOGASTRIC TUBING WITH STYLET | 10/1/2000 | $19.85 | 3 |
| 1 | B4082 | NASOGASTRIC TUBING WITHOUT STYLE | 10/1/2000 | $15.03 | 3 |
| 1 | B4083 | STOMACH TUBE - LEVINE TYPE | 10/1/2000 | $2.23 | 3 |
| 1 | B4084 | GASTROSTOMY/JEJUNOSTOMY TUBING | 4/1/2002 | INVALID | N |
| 1 | B4151 | ENTERAL FORMULAE; CATEGORY I; NA | 1/1/2005 | INVALID | N |
| 1 | B4156 | ENTERAL FORMULAE; CATEGORY VI; S | 1/1/2005 | NC | 9 |
| 1 | B4184 | PARENTERAL NUTRITION SOLUTION; L | 1/1/2006 | INVALID | N |
| 1 | B4186 | PARENTERAL NUTRITION SOLUTION; L | 1/1/2006 | INVALID | N |
| 1 | D0120 | PERIODIC ORAL EVALUATION | 4/1/2001 | $0.01 | 1 |
| 1 | D0140 | LIMITED ORAL EVALUATION - PROBLE | 4/1/2001 | $0.01 | 1 |
| 1 | D0145 | ORAL EVALUATION FOR A PATIENT UN | 1/1/2007 | $0.01 | 1 |
| 1 | D0150 | COMPREHENSIVE ORAL EVALUATION | 4/1/2001 | $0.01 | 1 |
| 1 | D0160 | DETAILED AND EXTENSIVE ORAL EVAL | 4/1/2001 | $0.01 | 1 |
| 1 | D0170 | RE-EVALUATION-LIMITED, PROBLEM F | 4/1/2001 | $0.01 | 1 |
| 1 | D0180 | COMPREHENSIVE PERIODONTAL EVALUA | 10/1/2003 | $0.01 | 1 |
| 1 | D1110 | PROPHYLAXIS - ADULT | 1/1/2002 | $0.01 | 1 |
| 1 | D1120 | PROPHYLAXIS - CHILD | 1/1/2002 | $0.01 | 1 |
| 1 | D1201 | TOPICAL APPLICATION OF FLUORIDE | 1/1/2007 | INVALID | N |
| 1 | D1203 | TOPICAL APPLICATION OF FLUORIDE | 7/1/2006 | $12.73 | 3 |
| 1 | D1204 | TOPICAL APPLICATION OF FLUORIDE | 7/1/2006 | $12.73 | 3 |
| 1 | E0100 | CANE, INCLUDES CANES OF ALL MATE | 10/1/2006 | $20.72 | 3 |
| 1 | E0105 | CANE, QUAD OR THREE-PRONG, INCLU | 10/1/2006 | $48.72 | 3 |
| 1 | E0110 | CRUTCHES, FOREARM, INC CRUTCHES | 10/1/2006 | $77.59 | 3 |
| 1 | E0111 | CRUTCH, FOREARM, INC CRUTCHES OF | 10/1/2006 | $53.26 | 3 |
| 1 | E0112 | CRUTCHES, UNDERARM, WOOD, ADJUST | 10/1/2006 | $37.00 | 3 |
| 1 | E0113 | CRUTCH, UNDERARM, WOOD, ADJUSTAB | 10/1/2006 | $21.13 | 3 |
| 1 | E0114 | CRUTCHES, UNDERARM, OTHER THAN W | 10/1/2006 | $47.19 | 3 |
| 1 | E0116 | CRUTCH, UNDERARM, OTHER THAN WOO | 10/1/2006 | $27.74 | 3 |
| 1 | E0142 | RIGID WALKER, WHEELED, WITH SEAT | 4/1/2004 | INVALID | N |
| 1 | E0145 | WALKER, WHEELED, WITH SEAT AND C | 4/1/2004 | INVALID | N |
| 1 | E0146 | FOLDING WALKER, WHEELED, WITH SE | 4/1/2004 | INVALID | N |
| 1 | E0164 | COMMODE CHAIR, MOBILE, WITH FIXE | 1/1/2007 | INVALID | N |
| 1 | E0166 | COMMODE CHAIR, MOBILE, WITH DETA | 1/1/2007 | INVALID | N |
| 1 | E0175 | FOOT REST, FOR USE WITH COMMODE | 3/1/1995 | NC | 9 |
| 1 | E0176 | AIR PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| 1 | E0177 | WATER PRESSURE PAD OR CUSHION, N | 1/1/2005 | INVALID | N |
| 1 | E0178 | GEL PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| 1 | E0179 | DRY PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| 1 | E0180 | PRESSURE PAD, ALTERNATING WITH P | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | E0191 | HEEL OR ELBOW PROTECTOR, EACH | 10/1/2006 | $8.49 | 3 |
| 1 | E0192 | LOW PRESSURE AND POSITIONING EQU | 1/1/2005 | INVALID | N |
| 1 | E0194 | AIR FLUIDIZED BED | 2/1/1994 | NC | 9 |
| 1 | E0202 | PHOTOTHERAPY (BILIRUBIN) LIGHT W | 2/1/1994 | NC | 9 |
| 1 | E0225 | HYDROCOLLATOR UNIT, INCLUDES PAD | 2/1/1994 | NC | 9 |
| 1 | E0239 | HYDROCOLLATOR UNIT, PORTABLE | 2/1/1994 | NC | 9 |
| 1 | E0265 | HOSPITAL BED, TOTAL ELECTRIC, WI | 2/1/1994 | NC | 9 |
| 1 | E0266 | HOSPITAL BED, TOTAL ELECTRIC, WI | 2/1/1994 | NC | 9 |
| 1 | E0270 | HOSPITAL BED, INSTITUTIONAL TYPE | 2/1/1994 | NC | 9 |
| 1 | E0273 | BED BOARD | 2/1/1994 | NC | 9 |
| 1 | E0274 | OVER-BED TABLE | 2/1/1994 | NC | 9 |
| 1 | E0280 | BED CRADLE, ANY TYPE | 2/1/1994 | NC | 9 |
| 1 | E0296 | HOSPITAL BED, TOTAL ELECTRIC, WI | 2/1/1994 | NC | 9 |
| 1 | E0297 | HOSPTIAL BED, TOTAL ELECTRIC, WI | 2/1/1994 | NC | 9 |
| 1 | E0315 | BED ACCESSORY: BOARD, TABLE, OR | 2/1/1994 | NC | 9 |
| 1 | E0462 | ROCKING BED, WITH OR WITHOUT SID | 2/1/1994 | NC | 9 |
| 1 | E0575 | NEBULIZER, ULTRASONIC, LARGE VOL | 6/1/1997 | NC | 9 |
| 1 | E0602 | BREAST PUMP, MANUAL, ANY TYPE | 10/1/2006 | $16.02 | 3 |
| 1 | E0608 | APNEA MONITOR | 7/1/2003 | INVALID | N |
| 1 | E0609 | BLOOD GLUCOSE MONITOR WITH SPECI | 4/1/2002 | INVALID | N |
| 1 | E0616 | IMPLANTABLE CARDIAC EVENT RECORD | 11/1/2001 | NC | 9 |
| 1 | E0617 | EXTERNAL DEFIBRILLATOR WITH INTE | 1/1/2001 | NC | 9 |
| 1 | E0625 | PATIENT LIFT, BATHROOM OR TOILET | 2/1/1994 | NC | 9 |
| 1 | E0627 | SEAT LIFT MECHANISM INCORPORATED | 2/1/1994 | NC | 9 |
| 1 | E0628 | SEPARATE SEAT LIFT MECHANISM FOR | 2/1/1994 | NC | 9 |
| 1 | E0629 | SEPARATE SEAT LIFT MECHANISM FOR | 2/1/1994 | NC | 9 |
| 1 | E0635 | PATIENT LIFT, ELECTRIC, WITH SEA | 5/1/2005 | NC | 9 |
| 1 | E0676 | INTERMITTENT LIMB COMPRESSION DE | 1/1/2007 | NC | 9 |
| 1 | E0690 | ULTRAVIOLET CABINET, APPROPRIATE | 7/1/2003 | INVALID | N |
| 1 | E0700 | SAFETY EQUIPMENT (EG, BELT, HARN | 2/1/1994 | NC | 9 |
| 1 | E0710 | RESTRAINT, ANY TYPE (BODY, CHEST | 2/1/1994 | NC | 9 |
| 1 | E0731 | FORM FITTING CONDUCTIVE GARMENT | 2/1/1994 | NC | 9 |
| 1 | E0744 | NEUROMUSCULAR STIMULATOR FOR SCO | 2/1/1994 | NC | 9 |
| 1 | E0746 | ELECTROMYOGRAPHY (EMG), BIOFEEDB | 2/1/1994 | NC | 9 |
| 1 | E0749 | OSTEOGENESIS STIMULATOR, ELECTRI | 2/1/1994 | NC | 9 |
| 1 | E0753 | IMPLANTABLE NEUROSTIMULATOR ELEC | 4/1/2002 | INVALID | N |
| 1 | E0755 | ELECTRONIC SALIVARY REFLEX STIMU | 2/1/1994 | NC | 9 |
| 1 | E0756 | IMPLANTABLE NEUROSTIMULATOR PULS | 1/1/2006 | INVALID | N |
| 1 | E0757 | IMPLANTABLE NEUROSTIMULATOR RADI | 1/1/2006 | INVALID | N |
| 1 | E0758 | RADIOFREQUENCY TRANSMITTER (EXTE | 1/1/2006 | INVALID | N |
| 1 | E0765 | FDA APPROVED NERVE STIMULATOR, W | 1/1/2001 | NC | 9 |
| 1 | E0776 | IV POLE | 10/1/2006 | NC | 9 |
| 1 | E0781 | AMBULATORY INFUSIN PUMP, SINGLE | 2/1/1994 | NC | 9 |
| 1 | E0782 | INFUSION PUMP, IMPLANTABLE, NON- | 2/1/1994 | NC | 9 |
| 1 | E0783 | INFUSION PUMP, IMPLATABLE, PROGR | 4/1/2001 | NC | 9 |
| 1 | E0785 | IMPLANTABLE INTRASPINAL CATHETER | 4/1/2001 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | E0786 | IMPLANTABLE PROGRAMMABLE INFUSIO | 1/1/2001 | NC | 9 |
| 1 | E0791 | PARENTERAL INFUSION PUMP, STATIO | 2/1/1994 | NC | 9 |
| 1 | E0830 | AMBULATORY TRACTION DEVICE, ALL | 1/1/2001 | NC | 9 |
| 1 | E0935 | CONTINUOUS PASSIVE MOTION EXERCI | 2/1/1994 | NC | 9 |
| 1 | E0936 | CONTINUOUS PASSIVE MOTION EXERCI | 1/1/2007 | NC | 9 |
| 1 | E0943 | CERVICAL PILLOW | 4/1/2004 | INVALID | N |
| 1 | E0953 | PNEUMATIC TIRE, EACH | 1/1/2006 | INVALID | N |
| 1 | E0954 | SEMI-PNEUMATIC CASTER, EACH | 1/1/2006 | INVALID | N |
| 1 | E0962 | ONE-INCH CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| 1 | E0963 | TWO-INCH CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| 1 | E0964 | THREE-INCH CUSHION, FOR WHEELCHA | 1/1/2005 | INVALID | N |
| 1 | E0965 | FOUR-INCH CUSHION, FOR WHEELCHAI | 1/1/2005 | INVALID | N |
| 1 | E0968 | COMMODE SEAT, WHEELCHAIR | 2/1/1994 | NC | 9 |
| 1 | E0969 | NARROWING DEVICE, WHEELCHAIR | 2/1/1994 | NC | 9 |
| 1 | E0970 | NO. 2 FOOTPLATES, EXCEPT FOR ELE | 2/1/1994 | NC | 9 |
| 1 | E0972 | WHEELCHAIR ACCESSORY, TRANSFER B | 1/1/2006 | INVALID | N |
| 1 | E0975 | REINFORCED SEAT UPHOLSTERY, WHEE | 4/1/2004 | INVALID | N |
| 1 | E0976 | REINFORCED BACK, WHEELCHAIR, UPH | 4/1/2004 | INVALID | N |
| 1 | E0977 | WEDGE CUSHION, WHEELCHAIR | 1/1/2007 | INVALID | N |
| 1 | E0979 | BELT, SAFETY WITH VELCRO CLOSURE | 4/1/2004 | INVALID | N |
| 1 | E0980 | SAFETY VEST, WHEELCHAIR | 2/1/1994 | NC | 9 |
| 1 | E0991 | UPHOLSTERY SEAT | 4/1/2004 | INVALID | N |
| 1 | E0993 | BACK, UPHOLSTERY | 4/1/2004 | INVALID | N |
| 1 | E0994 | ARMREST, EACH | 2/1/1994 | NC | 9 |
| 1 | E0996 | TIRE, SOLID, EACH | 1/1/2006 | INVALID | N |
| 1 | E0997 | CASTER WITH FORK | 1/1/2007 | INVALID | N |
| 1 | E0998 | CASTER WITHOUT FORK | 1/1/2007 | INVALID | N |
| 1 | E0999 | PNEUMATIC TIRE WITH WHEEL | 1/1/2007 | INVALID | N |
| 1 | E1000 | TIRE, PNEUMATIC CASTER | 1/1/2006 | INVALID | N |
| 1 | E1001 | WHEEL, SINGLE | 1/1/2006 | INVALID | N |
| 1 | E1031 | ROLLABOUT CHAIR, ANY AND ALL TYP | 2/1/1994 | NC | 9 |
| 1 | E1065 | POWER ATTACHMENT (TO CONVERT ANY | 1/1/2004 | INVALID | N |
| 1 | E1066 | BATTERY CHARGER | 4/1/2004 | INVALID | N |
| 1 | E1069 | DEEP CYCLE BATTERY | 4/1/2004 | INVALID | N |
| 1 | E1089 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 8/1/2004 | NC | 9 |
| 1 | E1090 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 8/1/2004 | NC | 9 |
| 1 | E1210 | MOTORIZED WHEELCHAIR; FIXED FULL | 1/1/2006 | INVALID | N |
| 1 | E1211 | MOTORIZED WHEELCHAIR; DETACHABLE | 1/1/2006 | INVALID | N |
| 1 | E1212 | MOTORIZED WHEELCHAIR; FIXED FULL | 1/1/2006 | INVALID | N |
| 1 | E1213 | MOTORIZED WHEELCHAIR; DETACHABLE | 1/1/2006 | INVALID | N |
| 1 | E1220 | WHEELCHAIR; SPECIALLY SIZED OR C | 2/1/1994 | NC | 9 |
| 1 | E1225 | WHEELCHAIR ACCESSORY, MANUAL SEM | 2/1/1994 | NC | 9 |
| 1 | E1227 | SPECIAL HEIGHT ARMS FOR WHEELCHA | 2/1/1994 | NC | 9 |
| 1 | E1296 | SPECIAL WHEELCHAIR SEAT HEIGHT F | 2/1/1994 | NC | 9 |
| 1 | E1297 | SPECIAL WHEELCHAIR SEAT DEPTH, B | 2/1/1994 | NC | 9 |
| 1 | E1298 | SPECIAL WHEELCHAIR SEAT DEPTH AN | 2/1/1994 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | E1300 | WHIRLPOOL, PORTABLE (OVERTUB TYP | 10/1/2000 | NC | 9 |
| 1 | E1310 | WHIRLPOOL, NONPORTABLE (BUILT-IN | 2/1/1994 | NC | 9 |
| 1 | E1399 | DURABLE MEDICAL EQIPMENT, MISCEL | 11/1/2001 | $0.01 | 5 |
| 1 | E1510 | KIDNEY, DIALYSATE DELIVERY SYSTE | 2/1/1994 | NC | 9 |
| 1 | E1520 | HEPARIN INFUSION PUMP FOR DIALYS | 2/1/1994 | NC | 9 |
| 1 | E1530 | AIR BUBBLE DETECTOR FOR HEMODIAL | 2/1/1994 | NC | 9 |
| 1 | E1540 | PRESSURE ALARM FOR HEMODIALYSIS, | 2/1/1994 | NC | 9 |
| 1 | E1550 | BATH CONDUCTIVITY METER FOR HEMO | 2/1/1994 | NC | 9 |
| 1 | E1560 | BLOOD LEAK DETECTOR FOR HEMODIAL | 2/1/1994 | NC | 9 |
| 1 | E1570 | ADJUSTABLE CHAIR, FOR ESRD PATIE | 2/1/1994 | NC | 9 |
| 1 | E1575 | TRANSDUCER PROTECTORS/FLUID BARR | 2/1/1994 | NC | 9 |
| 1 | E1580 | UNIPUNCTURE CONTROL SYSTEM FOR H | 2/1/1994 | NC | 9 |
| 1 | E1590 | HEMODIALYSIS MACHINE | 2/1/1994 | NC | 9 |
| 1 | E1592 | AUTOMATIC INTERMITTENT PERITONEA | 2/1/1994 | NC | 9 |
| 1 | E1594 | CYCLER DIALYSIS MACHINE FOR PERI | 2/1/1994 | NC | 9 |
| 1 | E1600 | DELIVERY AND/OR INSTALLATION CHA | 2/1/1994 | NC | 9 |
| 1 | E1610 | REVERSE OSMOSIS WATER PURIFICATI | 2/1/1994 | NC | 9 |
| 1 | E1615 | DEIONIZER WATER PURIFICATION SYS | 2/1/1994 | NC | 9 |
| 1 | E1620 | BLOOD PUMP FOR HEMODIALYSIS, REP | 2/1/1994 | NC | 9 |
| 1 | E1625 | WATER SOFTENING SYSTEM, FOR HEMO | 2/1/1994 | NC | 9 |
| 1 | E1630 | RECIPROCATING PERITONEAL DIALYSI | 2/1/1994 | NC | 9 |
| 1 | E1632 | WEARABLE ARTIFICIAL KIDNEY, EACH | 2/1/1994 | NC | 9 |
| 1 | E1635 | COMPACT (PORTABLE) TRAVEL HEMODI | 2/1/1994 | NC | 9 |
| 1 | E1636 | SORBENT CARTRIDGES, FOR HEMODIAL | 2/1/1994 | NC | 9 |
| 1 | E1640 | REPLACEMENT COMPONENTS FOR HEMOD | 4/1/2002 | INVALID | N |
| 1 | E1699 | DIALYSIS EQUIPMENT, NOT OTHERWIS | 2/1/1994 | NC | 9 |
| 1 | E1700 | JAW MOTION REHABILITATION SYSTEM | 2/1/1994 | NC | 9 |
| 1 | E1701 | REPLACEMENT CUSHIONS FOR JAW MOT | 2/1/1994 | NC | 9 |
| 1 | E1702 | REPLACEMENT MEASURING SCALES FOR | 2/1/1994 | NC | 9 |
| 1 | E1900 | SYNTHESIZED SPEECH AUGMENTATIVE | 4/1/2002 | INVALID | N |
| 1 | E2373 | POWER WHEELCHAIR ACCESSORY, HAND | 1/1/2007 | NC | 9 |
| 1 | E2374 | POWER WHEELCHAIR ACCESSORY, HAND | 1/1/2007 | NC | 9 |
| 1 | E2375 | POWER WHEELCHAIR ACCESSORY, NON- | 1/1/2007 | NC | 9 |
| 1 | E2376 | POWER WHEELCHAIR ACCESSORY, EXPA | 1/1/2007 | NC | 9 |
| 1 | E2377 | POWER WHEELCHAIR ACCESSORY, EXPA | 1/1/2007 | NC | 9 |
| 1 | E2381 | POWER WHEELCHAIR ACCESSORY, PNEU | 1/1/2007 | NC | 9 |
| 1 | E2382 | POWER WHEELCHAIR ACCESSORY, TUBE | 1/1/2007 | NC | 9 |
| 1 | E2383 | POWER WHEELCHAIR ACCESSORY, INSE | 1/1/2007 | NC | 9 |
| 1 | E2384 | POWER WHEELCHAIR ACCESSORY, PNEU | 1/1/2007 | NC | 9 |
| 1 | E2385 | POWER WHEELCHAIR ACCESSORY, TUBE | 1/1/2007 | NC | 9 |
| 1 | E2386 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| 1 | E2387 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| 1 | E2388 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| 1 | E2389 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| 1 | E2390 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |
| 1 | E2391 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | E2392 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |
| 1 | E2393 | POWER WHEELCHAIR ACCESSORY, VALV | 1/1/2007 | NC | 9 |
| 1 | E2394 | POWER WHEELCHAIR ACCESSORY, DRIV | 1/1/2007 | NC | 9 |
| 1 | E2395 | POWER WHEELCHAIR ACCESSORY, CAST | 1/1/2007 | NC | 9 |
| 1 | E2396 | POWER WHEELCHAIR ACCESSORY, CAST | 1/1/2007 | NC | 9 |
| 1 | G0001 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2005 | INVALID | N |
| 1 | G0004 | PATIENT DEMAND SINGLE OR MULTIPL | 7/1/2003 | INVALID | N |
| 1 | G0005 | PATIENT DEMAND SINGLE OR MULTIPL | 7/1/2003 | INVALID | N |
| 1 | G0006 | PATIENT DEMAND SINGLE OR MULTIPL | 7/1/2003 | INVALID | N |
| 1 | G0007 | PATIENT DEMAND SINGLE OR MULTIPL | 7/1/2003 | INVALID | N |
| 1 | G0008 | ADMINISTRATION OF INFLUENZA VIRU | 2/15/2000 | NC | 9 |
| 1 | G0009 | ADMINISTRATION OF PNEUMOCOCCAL V | 2/15/2000 | NC | 9 |
| 1 | G0010 | ADMINISTRATION OF HEPATITIS B VA | 2/15/2000 | NC | 9 |
| 1 | G0015 | POST-SYMPTOM TELEPHONIC TRANSMIS | 7/1/2003 | INVALID | N |
| 1 | G0016 | POST-SYMPTOM TELEPHONIC TRANSMIS | 4/1/2002 | INVALID | N |
| 1 | G0025 | COLLAGEN SKIN TEST KIT | 4/1/2004 | INVALID | N |
| 1 | G0050 | MEASUREMENT OF POST-VOIDING RESI | 7/1/2003 | INVALID | N |
| 1 | G0101 | CERVICAL OR VAGINAL CANCER SCREE | 1/1/2007 | $25.69 | 3 |
| 1 | G0102 | PROSTATE CANCER SCREENING; DIGIT | 1/1/2007 | $14.79 | 3 |
| 1 | G0104 | COLORECTAL CANCER SCREENING; FLE | 1/1/2007 | $86.15 | 3 |
| 1 | G0105 | COLORECTAL CANCER SCREENING; COL | 1/1/2007 | $263.39 | 3 |
| 1 | G0106 | COLORECTAL CANCER SCREENING; ALT | 1/1/2007 | $96.53 | 3 |
| 1 | G0107 | COLORECTAL CANCER SCREENING; FEC | 1/1/2007 | INVALID | N |
| 1 | G0108 | DIABETES OUTPATIENT SELF-MANAGEM | 1/1/2007 | $21.80 | 3 |
| 1 | G0109 | DIABETES OUPATIENT SELF-MANAGEME | 12/20/2004 | NC | 9 |
| 1 | G0110 | NETT PULMONARY REHABILITATION; E | 4/1/2004 | INVALID | N |
| 1 | G0111 | NETT PULMONARY REHABILITATION; E | 4/1/2004 | INVALID | N |
| 1 | G0112 | NETT PULMONARY REHABILITATION; N | 4/1/2004 | INVALID | N |
| 1 | G0113 | NETT PULMONARY REHABILITATION; N | 4/1/2004 | INVALID | N |
| 1 | G0114 | NETT PULMONARY REHABILITATION; P | 4/1/2004 | INVALID | N |
| 1 | G0115 | NETT PULMONARY REHABILITATION; P | 4/1/2004 | INVALID | N |
| 1 | G0116 | NETT PULMONARY REHABILITATION; P | 4/1/2004 | INVALID | N |
| 1 | G0117 | GLAUCOMA SCREENING FOR HIGH RISK | 1/1/2007 | $30.62 | 3 |
| 1 | G0118 | GLAUCOMA SCREENING FOR HIGH RISK | 1/1/2002 | NC | 9 |
| 1 | G0120 | COLORECTAL CANCER SCREENING; ALT | 1/1/2007 | $96.53 | 3 |
| 1 | G0121 | COLORECTAL CANCER SCREENING; COL | 1/1/2007 | $263.39 | 3 |
| 1 | G0122 | COLORECTAL CANCER SCREENING; BAR | 1/1/2007 | $97.31 | 3 |
| 1 | G0123 | SCREENING CYTOPATHOLOGY, CERVICA | 11/1/2003 | $20.95 | 3 |
| 1 | G0124 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2007 | $15.31 | 3 |
| 1 | G0127 | TRIMMING OF DYSTROPHIC NAILS, AN | 1/1/1999 | NC | 9 |
| 1 | G0128 | DIRECT (FACE TO FACE W/PT) SKILL | 1/1/2003 | NC | 9 |
| 1 | G0129 | OT REQUIRING THE SKILLS OF A QUA | 1/1/2000 | NC | 9 |
| 1 | G0163 | POSITRON EMISSION TOMOGRAPHY (PE | 4/1/2002 | INVALID | N |
| 1 | G0164 | POSITRON EMISSION TOMOGRAPHY (PE | 4/1/2002 | INVALID | N |
| 1 | G0165 | POSITRON EMISSION TOMOGRAPHY (PE | 4/1/2002 | INVALID | N |
| 1 | G0166 | EXTERNAL COUNTERPULSATION, PER T | 1/1/2000 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G0167 | HYPERBARIC OXYGEN TREATMENT NOT | 4/1/2004 | INVALID | N |
| 1 | G0168 | WOUND CLOSURE UTILIZING TISSUE A | 1/1/2004 | NC | 9 |
| 1 | G0173 | LINEAR ACCELERATOR BASED STEREOT | 1/1/2004 | NC | 9 |
| 1 | G0175 | SCHEDULED INTERDISCIPLINARY TEAM | 1/1/2001 | NC | 9 |
| 1 | G0178 | INTENSITY MODULATED RADIATION TH | 4/1/2002 | INVALID | N |
| 1 | G0179 | PHYSICIAN RECERTIFICATION SERVIC | 1/1/2001 | NC | 9 |
| 1 | G0180 | PHYSICIAN CERTIFICATION SERVICES | 1/1/2001 | NC | 9 |
| 1 | G0181 | PHYSICIAN SUPERVISION OF A PATIE | 1/1/2001 | NC | 9 |
| 1 | G0182 | PHYSICIAN SUPERVISION OF A PATIE | 1/1/2001 | NC | 9 |
| 1 | G0186 | DESTRUCTION OF LOCALIZED LESION | 1/1/2004 | NC | 9 |
| 1 | G0190 | IMMUNIZATION ADMINISTRATION (INC | 4/1/2002 | INVALID | N |
| 1 | G0191 | IMMUNIZATION ADMINISTRATION (INC | 4/1/2002 | INVALID | N |
| 1 | G0192 | INTRANASAL OR ORAL ADMINISTRATIO | 7/1/2003 | INVALID | N |
| 1 | G0193 | ENDOSCOPIC STUDY OF SWALLOWING F | 7/1/2003 | INVALID | N |
| 1 | G0194 | SENSORY TESTING DURING ENDOSCOPI | 7/1/2003 | INVALID | N |
| 1 | G0195 | CLINICAL EVALUATION OF SWALLOWIN | 7/1/2003 | INVALID | N |
| 1 | G0196 | EVALUATION OF SWALLOWING INVOLVI | 7/1/2003 | INVALID | N |
| 1 | G0197 | EVALUATION OF PATIENT FOR PRESCR | 7/1/2003 | INVALID | N |
| 1 | G0198 | PATIENT ADAPTATION AND TRAINING | 7/1/2003 | INVALID | N |
| 1 | G0199 | RE-EVALUATION OF PATIENT USING S | 7/1/2003 | INVALID | N |
| 1 | G0200 | EVALUATION OF PATIENT FOR PRESCR | 7/1/2003 | INVALID | N |
| 1 | G0201 | MODIFICATION OR TRAINING IN USE | 7/1/2003 | INVALID | N |
| 1 | G0202 | SCREENING MAMMOGRAPHY, PRODUCING | 1/1/2007 | $92.90 | 3 |
| 1 | G0204 | DIAGNOSTIC MAMMOGRAPHY, PRODUCIN | 1/1/2007 | $97.83 | 3 |
| 1 | G0206 | DIAGNOSTIC MAMMOGRAPHY, PRODUCIN | 1/1/2007 | $79.15 | 3 |
| 1 | G0237 | THERAPEUTIC PROCEDURES TO INCREA | 1/1/2002 | NC | 9 |
| 1 | G0238 | THERAPEUTIC PROCEDURES TO IMPROV | 1/1/2002 | NC | 9 |
| 1 | G0239 | THERAPEUTIC PROCEDURES TO IMPROV | 1/1/2002 | NC | 9 |
| 1 | G0243 | MULTI-SOURCE PHOTON STEREOTACTIC | 1/1/2007 | INVALID | N |
| 1 | G0244 | OBSERVATION CARE PROVIDED BY A F | 1/1/2006 | INVALID | N |
| 1 | G0245 | INITIAL PHYSICIAN EVALUATION AND | 1/1/2003 | NC | 9 |
| 1 | G0246 | FOLLOW-UP PHYSICIAN E&M OF A DIA | 1/1/2003 | NC | 9 |
| 1 | G0247 | ROUTINE FOOT CARE BY A PHYSICIAN | 1/1/2003 | NC | 9 |
| 1 | G0248 | DEMONSTRATION, AT INITIAL USE, O | 1/1/2003 | NC | 9 |
| 1 | G0249 | PROVISION OF TEST MATERIALS AND | 1/1/2003 | NC | 9 |
| 1 | G0250 | PHYSICIAN REVIEW, INTERPRETATION | 1/1/2003 | NC | 9 |
| 1 | G0251 | LINEAR ACCELERATOR BASED STEREOT | 1/1/2003 | NC | 9 |
| 1 | G0255 | CURRENT PERCEPTION THRESHOLD/SEN | 1/1/2003 | NC | 9 |
| 1 | G0256 | PROSTATE BRACHYTHERAPY USING PER | 1/1/2004 | INVALID | N |
| 1 | G0257 | UNSCHEDULED OR EMERGENCY DIALYSI | 1/1/2003 | NC | 9 |
| 1 | G0258 | INTRAVENOUS INFUSION DURING SEPA | 1/1/2006 | INVALID | N |
| 1 | G0259 | INJECTION PROCEDURE FOR SACROILI | 1/1/2003 | NC | 9 |
| 1 | G0260 | INJECTION PROCEDURE FOR SACROILI | 1/1/2003 | NC | 9 |
| 1 | G0261 | PROSTATE BRACHYTHERAPY USING PER | 1/1/2004 | INVALID | N |
| 1 | G0263 | DIRECT ADMISSION OF PATIENT WITH | 1/1/2006 | INVALID | N |
| 1 | G0264 | INITIAL NURSING ASSESSMENT OF PT | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G0265 | CRYOPRESERVATION, FREEZING AND S | 1/1/2003 | NC | 9 |
| 1 | G0266 | THAWING AND EXPANSION OF FROZEN | 1/1/2003 | NC | 9 |
| 1 | G0267 | BONE MARROW OR PERIPHERAL STEM C | 1/1/2003 | NC | 9 |
| 1 | G0268 | REMOVAL OF IMPACTED CERUMEN BY P | 1/1/2003 | NC | 9 |
| 1 | G0269 | PLACEMENT OF OCCLUSIVE DEVICE IN | 1/1/2003 | NC | 9 |
| 1 | G0270 | MEDICAL NUTRITION THERAPY; REASS | 1/1/2003 | NC | 9 |
| 1 | G0271 | MEDICAL NUTRITION THERAPY, REASS | 1/1/2003 | NC | 9 |
| 1 | G0272 | NASO/ORO GASTRIC TUBE PLACEMENT, | 4/1/2004 | INVALID | N |
| 1 | G0273 | RADIOPHARMACEUTICAL BIODISTRIBUT | 4/1/2004 | INVALID | N |
| 1 | G0274 | RADIOPHARMACEUTICAL THERAPY, NON | 4/1/2004 | INVALID | N |
| 1 | G0275 | RENAL ARTERY ANGIOGRAPHY PERFORM | 1/1/2003 | NC | 9 |
| 1 | G0278 | ILIAC ARTERY ANGIOGRAPHY PERFORM | 1/1/2003 | NC | 9 |
| 1 | G0279 | EXTRACORPOREAL SHOCK WAVE THERAP | 1/1/2006 | INVALID | N |
| 1 | G0280 | EXTRACORPOREAL SHOCK WAVE THERAP | 1/1/2006 | INVALID | N |
| 1 | G0281 | ELECTRICAL STIMULATION, TO ONE O | 1/1/2003 | NC | 9 |
| 1 | G0282 | ELECTRICAL STIMULATION, TO ONE O | 1/1/2003 | NC | 9 |
| 1 | G0283 | ELECTRICAL STIMULATION, TO ONE O | 1/1/2003 | NC | 9 |
| 1 | G0288 | RECONSTRUCTION, COMPUTED TOMOGRA | 1/1/2003 | NC | 9 |
| 1 | G0290 | TRANSCATHETER PLACEMENT OF A DRU | 1/1/2003 | NC | 9 |
| 1 | G0291 | TRANSCATHETER PLACEMENT OF A DRU | 1/1/2003 | NC | 9 |
| 1 | G0292 | ADMINISTRATION OF EXPERIMENTAL D | 1/1/2005 | INVALID | N |
| 1 | G0293 | NONCOVERED SURGICAL PROCEDURE US | 1/1/2003 | NC | 9 |
| 1 | G0294 | NONCOVERED PROCEDURE USING EITHE | 1/1/2003 | NC | 9 |
| 1 | G0295 | ELECTROMAGNETIC THERAPY, TO ONE | 1/1/2003 | NC | 9 |
| 1 | G0296 | PET IMAGING, FULL AND PARTIAL RI | 4/1/2005 | INVALID | N |
| 1 | G0297 | INSERTION OF SINGLE CHAMBER PACI | 1/1/2004 | NC | 9 |
| 1 | G0298 | INSERTION OF DUAL CHAMBER PACING | 1/1/2004 | NC | 9 |
| 1 | G0299 | INSERTION OF REPOSITIONING OF EL | 1/1/2004 | NC | 9 |
| 1 | G0300 | INSERTION OF REPOSITIONING OF EL | 1/1/2004 | NC | 9 |
| 1 | G0302 | PRE-OPERATIVE PULMONARY SURGERY | 1/1/2004 | NC | 9 |
| 1 | G0303 | PRE-OPERATIVE PULMONARY SURGERY | 1/1/2004 | NC | 9 |
| 1 | G0304 | PRE-OPERATIVE PULMONARY SURGERY | 1/1/2004 | NC | 9 |
| 1 | G0305 | POST-DISCHARGE PULMONARY SURGERY | 1/1/2004 | NC | 9 |
| 1 | G0306 | COMPLETE CBC, AUTOMATED (HGB, HC | 1/1/2004 | $8.04 | 3 |
| 1 | G0307 | COMPLETE (CBC), AUTOMATED (HGB, | 1/1/2004 | $6.69 | 3 |
| 1 | G0308 | ESRD SVC DURING COURSE OF TX, <2 | 1/1/2007 | $563.63 | 3 |
| 1 | G0309 | ESRD SVC DURING COURSE OF TX, <2 | 1/1/2007 | $469.44 | 3 |
| 1 | G0310 | ESRD SVC DURING COURSE OF TX, <2 | 1/1/2007 | $375.50 | 3 |
| 1 | G0311 | ESRD SVC DURING COURSE OF TX, PT | 1/1/2007 | $384.06 | 3 |
| 1 | G0312 | ESRD SVC DURING COURSE OF TX, 2- | 1/1/2007 | $319.96 | 3 |
| 1 | G0313 | ESRD SVC DURING COURSE OF TX, 2- | 1/1/2007 | $255.87 | 3 |
| 1 | G0314 | ESRD SVC DURING COURSE OF TX, 12 | 1/1/2007 | $336.83 | 3 |
| 1 | G0315 | ESRD SVC DURING COURSE OF TX, 12 | 1/1/2007 | $280.52 | 3 |
| 1 | G0316 | ESRD SVC DURING COURSE OF TX, 12 | 1/1/2007 | $224.21 | 3 |
| 1 | G0317 | ESRD SVC DURING COURSE OF TX, >= | 1/1/2007 | $210.97 | 3 |
| 1 | G0318 | ESRD SVC DURING COURSE OF TX, >= | 1/1/2007 | $175.68 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G0319 | ESRD SVC DURING COURSE OF TX, >= | 1/1/2007 | $140.39 | 3 |
| 1 | G0320 | ESRD SVC FOR HOME DIALYSIS PATIE | 1/1/2007 | $469.44 | 3 |
| 1 | G0321 | ESRD SVC FOR HOME DIALYSIS PER F | 1/1/2007 | $319.96 | 3 |
| 1 | G0322 | ESRD SVC FOR HOME DIALYSIS PER F | 1/1/2007 | $280.52 | 3 |
| 1 | G0323 | ESRD SVC FOR HOME DIALYSIS PER F | 1/1/2007 | $175.68 | 3 |
| 1 | G0324 | END STAGE RENAL DISEASE (ESRD) R | 1/1/2007 | $15.57 | 3 |
| 1 | G0325 | END STAGE RENAL DISEASE (ESRD) R | 1/1/2007 | $9.34 | 3 |
| 1 | G0326 | ESRD SVC LESS THAN FULL MONTH, P | 1/1/2007 | $10.64 | 3 |
| 1 | G0327 | ESRD RELATED SERVICES < FULL MON | 1/1/2007 | $5.97 | 3 |
| 1 | G0328 | COLORECTALCANCER SCREENING; FECA | 1/1/2004 | $13.39 | 3 |
| 1 | G0329 | ELECTROMAGNETIC THERAPY, TO ONE | 1/1/2005 | NC | 9 |
| 1 | G0330 | PET IMAGING INITIAL DIAGNOSIS CE | 7/1/2005 | INVALID | N |
| 1 | G0331 | PET IMAGING RESTAGING OVARIAN | 7/1/2005 | INVALID | N |
| 1 | G0333 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | NC | 9 |
| 1 | G0336 | PET IMAGING, BRAIN IMAGING FOR T | 4/1/2005 | INVALID | N |
| 1 | G0337 | HOSPICE EVALUATION AND COUNSELIN | 1/1/2005 | NC | 9 |
| 1 | G0338 | LINEAR ACCELERATOR BASED STEREOT | 1/1/2006 | INVALID | N |
| 1 | G0339 | IMAGE GUIDED ROBOTIC LINEAR ACCE | 1/1/2004 | NC | 9 |
| 1 | G0340 | IMAGE GUIDED ROBOTIC LINEAR ACCE | 1/1/2004 | NC | 9 |
| 1 | G0341 | PERCUTANEOUS ISLET CELL TRANSPLA | 1/1/2005 | NC | 9 |
| 1 | G0342 | LAPAROSCOPY FOR ISLET CELL TRANS | 2/1/2007 | NC | 9 |
| 1 | G0343 | LAPAROTOMY FOR ISLET CELL TRANSP | 2/1/2007 | NC | 9 |
| 1 | G0344 | INITIAL PREVENTIVE PHYSICAL EXAM | 1/1/2007 | $66.69 | 3 |
| 1 | G0345 | INTRAVENOUS INFUSION, HYDRATION; | 1/1/2006 | INVALID | N |
| 1 | G0346 | EACH ADDITIONAL HOUR, UP TO EIGH | 1/1/2006 | INVALID | N |
| 1 | G0347 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2006 | INVALID | N |
| 1 | G0348 | EACH ADDITIONAL HOUR, UP TO EIGH | 1/1/2006 | INVALID | N |
| 1 | G0349 | ADDITIONAL SEQUENTIAL INFUSION, | 1/1/2006 | INVALID | N |
| 1 | G0350 | CONCURRENT INFUSION REPORT ONLY | 1/1/2006 | INVALID | N |
| 1 | G0351 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| 1 | G0353 | INTRAVENOUS PUSH, SINGLE OR INIT | 1/1/2006 | INVALID | N |
| 1 | G0354 | EACH ADDITIONAL SEQUENTIAL INTRA | 1/1/2006 | INVALID | N |
| 1 | G0355 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2006 | INVALID | N |
| 1 | G0356 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2006 | INVALID | N |
| 1 | G0357 | INTRAVENOUS, PUSH TECHNIQUE, SIN | 1/1/2006 | INVALID | N |
| 1 | G0358 | INTRAVENOUS, PUSH TECHNIQUE, EAC | 1/1/2006 | INVALID | N |
| 1 | G0359 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| 1 | G0360 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| 1 | G0361 | INITIATION OF PROLONGED CHEMOTHE | 1/1/2006 | INVALID | N |
| 1 | G0362 | EACH ADDITIONAL SEQUENTIAL INFUS | 1/1/2006 | INVALID | N |
| 1 | G0363 | IRRIGATION OF IMPLANTED VENOUS A | 1/1/2006 | INVALID | N |
| 1 | G0364 | BONE MARROW ASPIRATION PERFORMED | 1/1/2007 | $8.82 | 3 |
| 1 | G0365 | VESSEL MAPPING OF VESSELS FOR HE | 1/1/2007 | $116.78 | 3 |
| 1 | G0366 | ELECTROCARDIOGRAM, ROUTINE ECG W | 1/1/2007 | $18.42 | 3 |
| 1 | G0367 | TRACING ONLY, W/OUT INTERPRETATI | 1/1/2007 | $12.20 | 3 |
| 1 | G0368 | INTERPRETATION AND REPORT ONLY, | 1/1/2007 | $6.23 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G0369 | PHARMACY SUPPLY FEE FOR INITIAL | 1/1/2006 | INVALID | N |
| 1 | G0370 | PHARMACY SUPPLY FEE FOR ORAL ANT | 1/1/2006 | INVALID | N |
| 1 | G0371 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | INVALID | N |
| 1 | G0372 | PHYSICIAN SERVICE REQUIRED TO ES | 1/1/2006 | NC | 9 |
| 1 | G0374 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | INVALID | N |
| 1 | G0375 | SMOKING AND TOBACCO USE CESSATIO | 1/1/2007 | $8.82 | 3 |
| 1 | G0376 | SMOKING AND TOBACCO USE CESSATIO | 1/1/2007 | $17.39 | 3 |
| 1 | G0380 | LEVEL 1 HOSPITAL EMERGENCY VISIT | 1/1/2007 | NC | 9 |
| 1 | G3001 | ADMINISTRATION AND SUPPLY OF TOS | 3/15/2004 | $2,449.60 | 3 |
| 1 | G8006 | ACUTE MYOCARDIAL INFARCTION: PAT | 1/1/2006 | $0.01 | T |
| 1 | G8007 | ACUTE MYOCARDIAL INFARCTION: PAT | 1/1/2006 | $0.01 | T |
| 1 | G8008 | CLINICIAN DOCUMENTED ACUTE MYOCA | 1/1/2006 | $0.01 | T |
| 1 | G8009 | ACUTE MYOCARDIAL INFARCTION: PT | 1/1/2006 | $0.01 | T |
| 1 | G8010 | ACUTE MYOCARDIAL INFARCTION: PT | 1/1/2006 | $0.01 | T |
| 1 | G8011 | CLINICIAN DOCUMENT THAT ACUTE MY | 1/1/2006 | $0.01 | T |
| 1 | G8012 | PNEUMONIA: PT DOCUMENT TO HAVE R | 1/1/2006 | $0.01 | T |
| 1 | G8013 | PNEUMONIA: PT NOT DOCUMENTED TO | 1/1/2006 | $0.01 | T |
| 1 | G8014 | CLINICIAN DOCUMENT THAT PNEUMONI | 1/1/2006 | $0.01 | T |
| 1 | G8015 | DIABETIC PATIENT WITH MOST RECEN | 1/1/2006 | $0.01 | T |
| 1 | G8016 | DIABETIC PT WITHMOST RECENT HEMO | 1/1/2006 | $0.01 | T |
| 1 | G8017 | CLINICIAN DOCUMENTED THAT DIABET | 1/1/2006 | $0.01 | T |
| 1 | G8018 | CLINICIAN HAS NOT PROVIDED CARE | 1/1/2006 | $0.01 | T |
| 1 | G8019 | DIABETIC PT W/MOST RECENT LOW-DE | 1/1/2006 | $0.01 | T |
| 1 | G8020 | DIABETIC PT W/MOST RECENT LOW-DE | 1/1/2006 | $0.01 | T |
| 1 | G8021 | CLINICIAN DOCUMENT THAT DIABETIC | 1/1/2006 | $0.01 | T |
| 1 | G8022 | CLINICIAN HAS NOT PROVIDED CARE | 1/1/2006 | $0.01 | T |
| 1 | G8023 | DIABETIC PT W/MOST RECENT BLOOD | 1/1/2006 | $0.01 | T |
| 1 | G8024 | DIABETIC PT W/MOST RECENT BLOOD | 1/1/2006 | $0.01 | T |
| 1 | G8025 | CLINICIAN DOCUMENT THAT DIABETIC | 1/1/2006 | $0.01 | T |
| 1 | G8026 | CLINICIAN HAS NOT PROVIDED CARE | 1/1/2006 | $0.01 | T |
| 1 | G8027 | HEART FAILURE PT W/LEFT VENTRICU | 1/1/2006 | $0.01 | T |
| 1 | G8028 | HEART FAILURE PT W/LEFT VENTRICU | 1/1/2006 | $0.01 | T |
| 1 | G8029 | CLINICIAN DOCUMENT THAT HEART FA | 1/1/2006 | $0.01 | T |
| 1 | G8030 | HEART FAILURE PT WITH LEFT VENTR | 1/1/2006 | $0.01 | T |
| 1 | G8031 | HEART FAILURE PT W/LEFT VENTRICU | 1/1/2006 | $0.01 | T |
| 1 | G8032 | CLINICIAN DOCUMENT THAT HEART FA | 1/1/2006 | $0.01 | T |
| 1 | G8033 | PRIOR MYOCARDIAL INFARCTION - CO | 1/1/2006 | $0.01 | T |
| 1 | G8034 | PRIOR MYOCARDIAL INFARCTION - CO | 1/1/2006 | $0.01 | T |
| 1 | G8035 | CLINICIAN DOCUMEN THAT PRIOR MYO | 1/1/2006 | $0.01 | T |
| 1 | G8036 | CORONARY ARTERY DISEASE PATIENT | 1/1/2006 | $0.01 | T |
| 1 | G8037 | CORONARY ARTERY DISEASE PATIENT | 1/1/2006 | $0.01 | T |
| 1 | G8038 | CLINICIAN DOCUMENTED THAT CORONA | 1/1/2006 | $0.01 | T |
| 1 | G8039 | CORONARY ARTERY DISEASE-PT W/LOW | 1/1/2006 | $0.01 | T |
| 1 | G8040 | CORONARY ARTERY DISEASE-PT W/LOW | 1/1/2006 | $0.01 | T |
| 1 | G8041 | CLINICIAN DOCUMENT THAT CORONARY | 1/1/2006 | $0.01 | T |
| 1 | G8051 | PATIENT (FEMALE) DOCUMENTED TO H | 1/1/2006 | $0.01 | T |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G8052 | PATIENT (FEMALE) NOT DOCUMENTED | 1/1/2006 | $0.01 | T |
| 1 | G8053 | CLINICIAN DOCUMENTED THAT (FEMAL | 1/1/2006 | $0.01 | T |
| 1 | G8054 | PT NOT DOCUMENTED FOR THE ASSESS | 1/1/2006 | $0.01 | T |
| 1 | G8055 | PT DOCUMENTED FOR THE ASSESSMENT | 1/1/2006 | $0.01 | T |
| 1 | G8056 | CLINICIAN DOCUMENTED THAT PT WAS | 1/1/2006 | $0.01 | T |
| 1 | G8057 | PATIENT DOCUMENTED TO HAVE RECEI | 1/1/2006 | $0.01 | T |
| 1 | G8058 | PATIENT NOT DOCUMENTED TO HAVE R | 1/1/2006 | $0.01 | T |
| 1 | G8059 | CLINICIAN DOCUMENTED THAT PT WAS | 1/1/2006 | $0.01 | T |
| 1 | G8060 | PATIENT DOCUMENTED FOR THE ASSES | 1/1/2006 | $0.01 | T |
| 1 | G8061 | PATIENT NOT DOCUMENTED FOR THE A | 1/1/2006 | $0.01 | T |
| 1 | G8062 | CLINICIAN DOCUMENTED THAT PT WAS | 1/1/2006 | $0.01 | T |
| 1 | G8075 | END-STAGE RENAL DISEASE PT W/DOC | 1/1/2006 | $0.01 | T |
| 1 | G8076 | END-STAGE RENAL DISEASE PT W/DOC | 1/1/2006 | $0.01 | T |
| 1 | G8077 | CLINICIAN DOCUMENT THAT END-STAG | 1/1/2006 | $0.01 | T |
| 1 | G8078 | END-STAGE RENAL DISEASE PT W/DOC | 1/1/2006 | $0.01 | T |
| 1 | G8079 | END-STAGE RENAL DISEASE PT W/DOC | 1/1/2006 | $0.01 | T |
| 1 | G8080 | CLINICIAN DOCUMENTED THAT END-ST | 1/1/2006 | $0.01 | T |
| 1 | G8081 | END-STAGE RENAL DISEASE PT REQUI | 1/1/2006 | $0.01 | T |
| 1 | G8082 | END-STAGE RENAL DISEASE PT REQ H | 1/1/2006 | $0.01 | T |
| 1 | G8093 | NEWLY DIAGNOSED CHRONIC OBSTRUCT | 1/1/2006 | $0.01 | T |
| 1 | G8094 | NEWLY DIAG CHRONIC OBSTRUCTIVE P | 1/1/2006 | $0.01 | T |
| 1 | G8099 | OSTEOPOROSIS PT DOCUMENTED TO HA | 1/1/2006 | $0.01 | T |
| 1 | G8100 | CLINICIAN DOCUMENTED THAT OSTEOP | 1/1/2006 | $0.01 | T |
| 1 | G8103 | NEWLY DIAG OSTEOPOROSIS PT DOCUM | 1/1/2006 | $0.01 | T |
| 1 | G8104 | CLINICIAN DOCUMENT THAT NEWLY DI | 1/1/2006 | $0.01 | T |
| 1 | G8106 | W/IN 6 MONTHS OF SUFFERING A NON | 1/1/2006 | $0.01 | T |
| 1 | G8107 | CLINICIAN DOCUMENT THAT FEMALE P | 1/1/2006 | $0.01 | T |
| 1 | G8108 | PT DOCUMENTED TO HAVE RECEIVED I | 1/1/2006 | $0.01 | T |
| 1 | G8109 | PATIENT NOT DOCUMENTED TO HAVE R | 1/1/2006 | $0.01 | T |
| 1 | G8110 | CLINICIAN DOCUMENTED THAT PATIEN | 1/1/2006 | $0.01 | T |
| 1 | G8111 | PT (FEMALE) DOCUMENT TO HAVE REC | 1/1/2006 | $0.01 | T |
| 1 | G8112 | PT (FEMALE) NOT DOCUMENT TO HAVE | 1/1/2006 | $0.01 | T |
| 1 | G8113 | CLINICIAN DOCUMENTED THAT FEMALE | 1/1/2006 | $0.01 | T |
| 1 | G8114 | CLINICIAN DID NOT PROVIDE CARE T | 1/1/2006 | $0.01 | T |
| 1 | G8115 | PATIENT DOCUMENTED TO HAVE RECEI | 1/1/2006 | $0.01 | T |
| 1 | G8116 | PATIENT NOT DOCUMENTED TO HAVE R | 1/1/2006 | $0.01 | T |
| 1 | G8117 | CLINICIAN DOCUMENTED THAT PT WAS | 1/1/2006 | $0.01 | T |
| 1 | G8126 | PATIENT DOCUMENTED AS BEING TREA | 1/1/2006 | $0.01 | T |
| 1 | G8127 | PT NOT DOCUMENTED AS BEING TREAT | 1/1/2006 | $0.01 | T |
| 1 | G8128 | CLINICIAN DOCUMENT THAT PT WAS N | 1/1/2006 | $0.01 | T |
| 1 | G8129 | PT DOCUMENT AS BEING TREATED W/A | 1/1/2006 | $0.01 | T |
| 1 | G8130 | PT NOT DOCUMENTED AS BEING TREAT | 1/1/2006 | $0.01 | T |
| 1 | G8131 | CLINICIAN DOCUMENT THAT PT WAS N | 1/1/2006 | $0.01 | T |
| 1 | G8135 | PT NOT DOCUMENT TO HAVE RECEIVED | 1/1/2006 | $0.01 | T |
| 1 | G8152 | PT DOCUMENTED TO HAVE RECEIVED A | 1/1/2006 | $0.01 | T |
| 1 | G8153 | PT NOT DOCUMENTED TO HAVE RECEIV | 1/1/2006 | $0.01 | T |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G8154 | CLINICIAN DOCUMENT THAT PT WAS N | 1/1/2006 | $0.01 | T |
| 1 | G8155 | PATIENT WITH DOCUMENTED RECEIPT | 1/1/2006 | $0.01 | T |
| 1 | G8156 | PATIENT W/OUT DOCUMENTED RECEIPT | 1/1/2006 | $0.01 | T |
| 1 | G8157 | CLINICIAN DOCUMENT PT WAS NOT AN | 1/1/2006 | $0.01 | T |
| 1 | G8158 | PT DOCUMENT TO HAVE RECEIVED COR | 1/1/2006 | $0.01 | T |
| 1 | G8159 | PT DOCUMENT TO HAVE RECEIVED COR | 1/1/2006 | $0.01 | T |
| 1 | G8160 | CLINICIAN DOCUMENT THAT PT WAS N | 1/1/2006 | $0.01 | T |
| 1 | G8161 | PT W/ISOLATED CORONARY ARTERY BY | 1/1/2006 | $0.01 | T |
| 1 | G8162 | PT W/ISOLATED CORONARY ARTERY BY | 1/1/2006 | $0.01 | T |
| 1 | G8163 | CLINICIAN DOCUMENT THAT PT W/ISO | 1/1/2006 | $0.01 | T |
| 1 | G8164 | PATIENT W/ISOLATED CORONARY ARTE | 1/1/2006 | $0.01 | T |
| 1 | G8165 | PATIENT W/ISOLATED CORONARY ARTE | 1/1/2006 | $0.01 | T |
| 1 | G8166 | PATIENT W/ISOLATED CORONARY ARTE | 1/1/2006 | $0.01 | T |
| 1 | G8167 | PATIENT W/ISOLATED CORONARY ARTE | 1/1/2006 | $0.01 | T |
| 1 | G8170 | PT W/ISOLATED CORONARY ARTERY BY | 1/1/2006 | $0.01 | T |
| 1 | G8171 | PT W/ISOLATED CORONARY ARTERY BY | 1/1/2006 | $0.01 | T |
| 1 | G8172 | CLINICIAN DOCUMENT THAT PT W/ISO | 1/1/2006 | $0.01 | T |
| 1 | G8182 | CLINICIAN HAS NOT PROVIDED CARE | 1/1/2006 | $0.01 | T |
| 1 | G8183 | PT WITH HEART FAILURE AND ATRIAL | 1/1/2006 | $0.01 | T |
| 1 | G8184 | CLINICIAN DOCUMENT THAT PT W/HEA | 1/1/2006 | $0.01 | T |
| 1 | G8185 | PT DIAG W/SYMPTOMATIC OSTEOARTHR | 1/1/2006 | $0.01 | T |
| 1 | G8186 | CLINICIAN DOCUMENT THAT SYMPTOMA | 1/1/2006 | $0.01 | T |
| 1 | G9001 | COORDINATED CARE FEE, INITIAL RA | 10/1/2003 | $22.93 | 3 |
| 1 | G9002 | COORDINATED CARE FEE (MCM FULL C | 10/1/2003 | $70.00 | 3 |
| 1 | G9003 | COORDINATED CARE FEE, RISK ADJUS | 1/1/2003 | $0.01 | P |
| 1 | G9004 | COORDINATED CARE FEE, RISK ADJUS | 1/1/2003 | $0.01 | P |
| 1 | G9005 | COORDINATED CARE FEE, (MCM FULL- | 4/1/2003 | $120.00 | 3 |
| 1 | G9006 | COORDINATED CARE FEE (MCM-HOME/E | 4/1/2003 | $40.00 | 3 |
| 1 | G9008 | COORDINATED CARE FEE, PHYSICIAN | 1/1/2001 | NC | 9 |
| 1 | G9009 | COORDINATED CARE FEE (MCM-PARTIA | 4/1/2003 | $35.00 | 3 |
| 1 | G9010 | COORDINATED CARE FEE (MCM-PARTIA | 4/1/2003 | $60.00 | 3 |
| 1 | G9011 | COORDINATED CARE FEE (MCM-TELEPH | 4/1/2003 | $10.00 | 3 |
| 1 | G9012 | COORDINATED CARE FEE (MCM-CASE M | 4/1/2003 | $40.00 | 1 |
| 1 | G9013 | ESRD DEMO BASIC BUNDLE LEVEL I | 1/1/2005 | NC | 9 |
| 1 | G9014 | ESRD DEMO EXPANDED BUNDLE INC VE | 1/1/2005 | NC | 9 |
| 1 | G9016 | SMOKING CESSATION COUNSELING, IN | 4/1/2001 | $10.00 | 1 |
| 1 | G9017 | AMANTADINE HYDROCHLORIDE, ORAL, | 1/1/2005 | NC | 9 |
| 1 | G9018 | ZANAMIVIR, INHALATION POWDER ADM | 1/1/2005 | NC | 9 |
| 1 | G9019 | OSELTAMIVIR PHOSPHATE, ORAL, PER | 1/1/2005 | NC | 9 |
| 1 | G9020 | RIMANTADINE HYDROCHLORIDE, ORAL, | 1/1/2005 | NC | 9 |
| 1 | G9021 | CHEMOTHERAPY ASSESSMENT FOR NAUS | 1/1/2006 | INVALID | N |
| 1 | G9022 | CHEMOTHERAPY ASSESSMENT FOR NAUS | 1/1/2006 | INVALID | N |
| 1 | G9023 | CHEMOTHERAPY ASSESSMENT FOR NAUS | 1/1/2006 | INVALID | N |
| 1 | G9024 | CHEMOTHERAPY ASSESSMENT FOR NAUS | 1/1/2006 | INVALID | N |
| 1 | G9025 | CHEMOTHERAPY ASSESSMENT FO RPAIN | 1/1/2006 | INVALID | N |
| 1 | G9026 | CHEMOTHERAPY ASSESSMENT FO RPAIN | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G9027 | CHEMOTHERAPY ASSESSMENT FO RPAIN | 1/1/2006 | INVALID | N |
| 1 | G9028 | CHEMOTHERAPY ASSESSMENT FO RPAIN | 1/1/2006 | INVALID | N |
| 1 | G9029 | CHEMOTHERAPY ASSESS FOR LACK OF | 1/1/2006 | INVALID | N |
| 1 | G9030 | CHEMOTHERAPY ASSESS FOR LACK OF | 1/1/2006 | INVALID | N |
| 1 | G9031 | CHEMOTHERAPY ASSESS FOR LACK OF | 1/1/2006 | INVALID | N |
| 1 | G9032 | CHEMOTHERAPY ASSESS FOR LACK OF | 1/1/2006 | INVALID | N |
| 1 | G9033 | AMANTADINE HYDROCHLORIDE, ORAL, | 1/1/2005 | NC | 9 |
| 1 | G9034 | ZANAMIVIR, INHALATION POWDER, AD | 1/1/2005 | NC | 9 |
| 1 | G9035 | OSELTAMIVIR PHOSPHATE, ORAL, BRA | 1/1/2005 | NC | 9 |
| 1 | G9036 | RIMANTADINE HYDROCHLORIDE, ORAL, | 1/1/2005 | NC | 9 |
| 1 | G9041 | SENSORY INTEGRATIVE TECH TO ENHA | 1/1/2006 | NC | 9 |
| 1 | G9042 | SENSORY INTEGRATIVE TECH TO ENHA | 1/1/2006 | NC | 9 |
| 1 | G9043 | SENSORY INTEGRATIVE TECH TO ENHA | 1/1/2006 | NC | 9 |
| 1 | G9044 | SENSORY INTEGRATIVE TECH TO ENHA | 1/1/2006 | NC | 9 |
| 1 | G9050 | ONCOLOGY; PRIMARY FOCUS OF VISIT | 1/1/2006 | $0.01 | T |
| 1 | G9051 | ONCOLOGY; PRIMARY FOCUS OF VISIT | 1/1/2006 | $0.01 | T |
| 1 | G9052 | ONCOLOGY; PRIMARY FOCUS OF VISIT | 1/1/2006 | $0.01 | T |
| 1 | G9053 | ONCOLOGY; EXPECTANT MANAGEMENT O | 1/1/2006 | $0.01 | T |
| 1 | G9054 | ONCOLOGY; SUPERVISING, COORDINAT | 1/1/2006 | $0.01 | T |
| 1 | G9055 | ONCOLOGY; OTHER, UNSPECIFIED SER | 1/1/2006 | $0.01 | T |
| 1 | G9056 | ONCOLOGY; PRACTICE GUIDELINES; M | 1/1/2006 | $0.01 | T |
| 1 | G9057 | ONCOLOGY; MANAGEMENT DIFFERS FRO | 1/1/2006 | $0.01 | T |
| 1 | G9058 | ONCOLOGY; MANAGEMENT DIFFERS FRO | 1/1/2006 | $0.01 | T |
| 1 | G9059 | ONCOLOGY; MANAGEMENT DIFFERS FRO | 1/1/2006 | $0.01 | T |
| 1 | G9060 | ONCOLOGY; MANAGEMENT DIFFERS FRO | 1/1/2006 | $0.01 | T |
| 1 | G9061 | ONCOLOGY; PT'S CONDITION NOT ADD | 1/1/2006 | $0.01 | T |
| 1 | G9062 | ONCOLOGY; MANAGEMENT DIFFERS FRO | 1/1/2006 | $0.01 | T |
| 1 | G9063 | ONCOLOGY; LIMITED TO NON-SMALL C | 1/1/2006 | $0.01 | T |
| 1 | G9064 | ONCOLOGY; LIMITED TONON-SMALL CE | 1/1/2006 | $0.01 | T |
| 1 | G9065 | ONCOLOGY; LIMITED TONON-SMALL CE | 1/1/2006 | $0.01 | T |
| 1 | G9066 | ONCOLOGY; LIMIT TO NON-SMALL CEL | 1/1/2006 | $0.01 | T |
| 1 | G9067 | ONCOLOGY; LIMIT TO NON-SMALL CEL | 1/1/2006 | $0.01 | T |
| 1 | G9068 | ONCOLOGY; LIMIT TO SMALL CELL AN | 1/1/2006 | $0.01 | T |
| 1 | G9069 | ONCOLOGY; SMALL CELL LUNG CANCER | 1/1/2006 | $0.01 | T |
| 1 | G9070 | ONCOLOGY; SMALL CELL LUNG CANCER | 1/1/2006 | $0.01 | T |
| 1 | G9071 | ONCOLOGY; INVASIVE FEMALE BREAST | 1/1/2006 | $0.01 | T |
| 1 | G9072 | ONCOLOGY; INVASIVE FEMALE BREAST | 1/1/2006 | $0.01 | T |
| 1 | G9073 | ONCOLOGY; INVASIVE FEMALE BREAST | 1/1/2006 | $0.01 | T |
| 1 | G9074 | ONCOLOGY; INVASIVE FEMALE BREAST | 1/1/2006 | $0.01 | T |
| 1 | G9075 | ONCOLOGY; INVASIVE FEMALE BREAST | 1/1/2006 | $0.01 | T |
| 1 | G9076 | ONCOLOGY; INVASIVE FEMALE BREAST | 1/1/2007 | INVALID | N |
| 1 | G9077 | ONCOLOGY; LIMIT TO ADENOCARCINOM | 1/1/2006 | $0.01 | T |
| 1 | G9078 | ONCOLOGY; PROSTATE CANCER, T2 OR | 1/1/2006 | $0.01 | T |
| 1 | G9079 | ONCOLOGY; PROSTATE CANCER, T3B-T | 1/1/2006 | $0.01 | T |
| 1 | G9080 | ONCOLOGY; PROSTATE CANCER, AFTER | 1/1/2006 | $0.01 | T |
| 1 | G9081 | ONCOLOGY; PROSTATE CANCER, INCOM | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G9082 | ONCOLOGY; PROSTATE CANCER, CASTR | 1/1/2007 | INVALID | N |
| 1 | G9083 | ONCOLOGY; PROSTATE CANCER, EXTEN | 1/1/2006 | $0.01 | T |
| 1 | G9084 | ONCOLOGY; COLON CANCER, LIMIT TO | 1/1/2006 | $0.01 | T |
| 1 | G9085 | ONCOLOGY; COLON CANCER, EXTENT O | 1/1/2006 | $0.01 | T |
| 1 | G9086 | ONCOLOGY; COLON CANCER, EXTENT O | 1/1/2006 | $0.01 | T |
| 1 | G9087 | ONCOLOGY; COLON CANCER, M1 AT DX | 1/1/2006 | $0.01 | T |
| 1 | G9088 | ONCOLOGY; COLON CANCER; M1 AT DX | 1/1/2006 | $0.01 | T |
| 1 | G9089 | ONCOLOGY; COLON CANCER; EXTENT O | 1/1/2006 | $0.01 | T |
| 1 | G9090 | ONCOLOGY; RECTAL CANCER; EXTENT | 1/1/2006 | $0.01 | T |
| 1 | G9091 | ONCOLOGY; RECTAL CANCER; EXTENT | 1/1/2006 | $0.01 | T |
| 1 | G9092 | ONCOLOGY; RECTAL CANCER; EXTENT | 1/1/2006 | $0.01 | T |
| 1 | G9093 | ONCOLOGY; RECTAL CANCER, LIMIT T | 1/1/2006 | $0.01 | T |
| 1 | G9094 | ONCOLOGY; RECTAL CANCER, LIMIT T | 1/1/2006 | $0.01 | T |
| 1 | G9095 | ONCOLOGY; RECTAL CANCER, LIMIT T | 1/1/2006 | $0.01 | T |
| 1 | G9096 | ONCOLOGY; ESOPHAGEAL CANCER, EXT | 1/1/2006 | $0.01 | T |
| 1 | G9097 | ONCOLOGY; ESOPHAGEAL CANCER, EXT | 1/1/2006 | $0.01 | T |
| 1 | G9098 | ONCOLOGY; ESOPHAGEAL CANCER; M1 | 1/1/2006 | $0.01 | T |
| 1 | G9099 | ONCOLOGY; ESOPHAGEAL CANCER; EXT | 1/1/2006 | $0.01 | T |
| 1 | G9100 | ONCOLOGY; GASTRIC CANCER; POST R | 1/1/2006 | $0.01 | T |
| 1 | G9101 | ONCOLOGY; GASTRIC CANCER; POST R | 1/1/2006 | $0.01 | T |
| 1 | G9102 | ONCOLOGY; GASTRIC CANCER; CLINIC | 1/1/2006 | $0.01 | T |
| 1 | G9103 | ONCOLOGY; GASTRIC CANCER; CLINIC | 1/1/2006 | $0.01 | T |
| 1 | G9104 | ONCOLOGY; GASTRIC CANCER; EXTENT | 1/1/2006 | $0.01 | T |
| 1 | G9105 | ONCOLOGY; PANCREATIC CANCER; POS | 1/1/2006 | $0.01 | T |
| 1 | G9106 | ONCOLOGY; PANCREATIC CANCER; POS | 1/1/2006 | $0.01 | T |
| 1 | G9107 | ONCOLOGY; PANCREATIC CANCER; UNR | 1/1/2006 | $0.01 | T |
| 1 | G9108 | ONCOLOGY; PANCREATIC CANCER; EXT | 1/1/2006 | $0.01 | T |
| 1 | G9109 | ONCOLOGY; HEAD AND NECK CANCER; | 1/1/2006 | $0.01 | T |
| 1 | G9110 | ONCOLOGY; HEAD AND NECK CANCER; | 1/1/2006 | $0.01 | T |
| 1 | G9111 | ONCOLOGY; HEAD AND NECK CANCER; | 1/1/2006 | $0.01 | T |
| 1 | G9112 | ONCOLOGY; HEAD AND NECK CANCER; | 1/1/2006 | $0.01 | T |
| 1 | G9113 | ONCOLOGY; OVARIAN CANCER; PATHOL | 1/1/2006 | $0.01 | T |
| 1 | G9114 | ONCOLOGY; OVARIAN CANCER; PATHOL | 1/1/2006 | $0.01 | T |
| 1 | G9115 | ONCOLOGY; OVARIAN CANCER; PATHOL | 1/1/2006 | $0.01 | T |
| 1 | G9116 | ONCOLOGY; OVARIAN CANCER; EVIDEN | 1/1/2006 | $0.01 | T |
| 1 | G9117 | ONCOLOGY; OVARIAN CANCER; EXTENT | 1/1/2006 | $0.01 | T |
| 1 | G9118 | ONCOLOGY; NON-HODGKINS LYMPHONA; | 1/1/2007 | INVALID | N |
| 1 | G9119 | ONCOLOGY; NON-HODGKINS LYMPHOMA; | 1/1/2007 | INVALID | N |
| 1 | G9120 | ONCOLOGY; NON-HODGKINS LYMPHOMA; | 1/1/2007 | INVALID | N |
| 1 | G9121 | ONCOLOGY; NON-HODGKINS LYMPHOMA; | 1/1/2007 | INVALID | N |
| 1 | G9122 | ONCOLOGY; NON-HODGKINS LYMPHOMA; | 1/1/2007 | INVALID | N |
| 1 | G9123 | ONCOLOGY; NON-HODGKINS LYMPHOMA; | 1/1/2006 | $0.01 | T |
| 1 | G9124 | ONCOLOGY; NON-HODGKINS LYMPHOMA; | 1/1/2006 | $0.01 | T |
| 1 | G9125 | ONCOLOGY; NON-HODGKINS LYMPHOMA, | 1/1/2006 | $0.01 | T |
| 1 | G9126 | ONCOLOGY; OVARIAN CANCER, LIMIT | 1/1/2006 | $0.01 | T |
| 1 | G9127 | ONCOLOGY; LIMITED TO MULTIPLE MY | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | G9128 | ONCOLOGY; LIMITED TO MULTIPLE MY | 1/1/2006 | $0.01 | T |
| 1 | G9129 | ONCOLOGY; CHRONIC MYELOGENOUS LE | 1/1/2006 | $0.01 | T |
| 1 | G9130 | ONCOLOGY; LIMITED TO MULTIPLE MY | 1/1/2006 | $0.01 | T |
| 1 | H0001 | ALCOHOL AND/OR DRUG ASSESSMENT | 1/1/2001 | $0.01 | 1 |
| 1 | H0002 | BEHAVIORAL HEALTH SCREENING TO D | 1/1/2001 | $0.01 | 1 |
| 1 | H0004 | BEHAVIORAL HEALTH COUNSELING AND | 1/1/2001 | $0.01 | 1 |
| 1 | H0005 | ALCOHOL AND/OR DRUG SERVICES; GR | 1/1/2001 | $0.01 | 1 |
| 1 | H0006 | ALCOHOL AND/OR DRUG SERVICES; CA | 10/1/2004 | NC | 9 |
| 1 | H0022 | ALCOHOL AND/OR DRUG INTERVENTION | 10/1/2003 | NC | 9 |
| 1 | H0023 | BEHAVIORAL HEALTH OUTREACH SERVI | 10/1/2003 | NC | 9 |
| 1 | H1000 | PRENATAL CARE, AT-RISK ASSESSMEN | 1/1/2002 | NC | 9 |
| 1 | H1001 | PRENATAL CARE, AT-RISK ENHANCED | 1/1/2002 | NC | 9 |
| 1 | H1002 | PRENATAL CARE, AT-RISK ENHANCED | 1/1/2002 | NC | 9 |
| 1 | H1003 | PRENATAL CARE, AT-RISK ENHANCED | 1/1/2002 | NC | 9 |
| 1 | H1004 | PRENATAL CARE, AT-RISK ENHANCED | 1/1/2002 | NC | 9 |
| 1 | H1005 | PRENATAL CARE, AT-RISK ENHANCED | 1/1/2002 | NC | 9 |
| 1 | H1010 | NON-MEDICAL FAMILY PLANNING EDUC | 1/1/2003 | NC | 9 |
| 1 | H2000 | COMPREHENSIVE MULTIDISCIPLINARY | 1/1/2003 | NC | 9 |
| 1 | H2001 | REHABILITATION PROGRAM, PER 1/2 | 1/1/2003 | NC | 9 |
| 1 | J0120 | INJECTION, TETRACYCLINE, UP TO 2 | 2/13/2006 | $0.01 | 5 |
| 1 | J0128 | INJECTION, ABARELIX, 10 MG (PLEN | 7/1/2006 | $68.62 | 3 |
| 1 | J0129 | INJECTION, ABATACEPT, 10 MG | 1/1/2007 | $18.70 | 3 |
| 1 | J0130 | INJECTION ABCIXIMAB, 10 MG (REOP | 1/1/2007 | $414.09 | 3 |
| 1 | J0132 | INJECTION, ACETYLCYSTEINE, 100 M | 4/15/2006 | NC | 9 |
| 1 | J0133 | INJECTION, ACYCLOVIR, 5 MG (ZOVI | 7/1/2006 | $0.03 | 3 |
| 1 | J0135 | INJECTION, ADALIMUMAB, 20 MG (HU | 1/1/2007 | $318.28 | 3 |
| 1 | J0150 | INJECTION, ADENOSINE FOR THERAPE | 1/1/2007 | $23.48 | 3 |
| 1 | J0151 | INJECTION, ADENOSINE, 90 MG (NOT | 4/1/2004 | INVALID | N |
| 1 | J0152 | INJECTION, ADENOSINE FOR DIAGNOS | 1/1/2007 | $69.31 | 3 |
| 1 | J0170 | INJECTION, ADRENALIN, EPINEPHRIN | 1/1/2007 | $0.80 | 3 |
| 1 | J0180 | INJECTION, AGALSIDASE BETA, 1 MG | 7/1/2006 | $127.20 | 3 |
| 1 | J0190 | INJECTION, BIPERIDEN LACTATE, PE | 10/25/2006 | NC | 9 |
| 1 | J0200 | INJECTION, ALATROFLOXACIN MESYLA | 2/13/2006 | $0.01 | 5 |
| 1 | J0205 | INJECTION, ALGLUCERASE, PER 10 U | 7/1/2006 | $39.22 | 3 |
| 1 | J0207 | INJECTION, AMIFOSTINE, 500 MG (E | 1/1/2007 | $463.58 | 3 |
| 1 | J0210 | INJECTION, METHYLDOPATE HCL, UP | 1/1/2007 | $10.08 | 3 |
| 1 | J0215 | INJECTION, ALEFACEPT, 0.5 MG (AM | 1/1/2007 | $26.30 | 3 |
| 1 | J0256 | INJECTION, ALPHA 1-PROTEINASE IN | 1/1/2007 | $3.41 | 3 |
| 1 | J0270 | INJECTION, ALPROSTADIL, PER 1.25 | 1/1/2007 | $1.80 | 3 |
| 1 | J0275 | ALPROSTADIL URETHRAL SUPPOSITORY | 1/1/2007 | $22.64 | 3 |
| 1 | J0278 | INJECTION, AMIKACIN SULFATE, 100 | 1/1/2007 | $1.10 | 3 |
| 1 | J0280 | INJECTION, AMINOPHYLLIN, UP TO 2 | 1/1/2007 | $0.39 | 3 |
| 1 | J0282 | INJECTION, AMIODARONE HCL, 30 MG | 1/1/2007 | $0.27 | 3 |
| 1 | J0285 | INJECTION, AMPHOTERICIN B, 50 MG | 1/1/2007 | $8.97 | 3 |
| 1 | J0286 | INJECTION, AMPHOTERICIN B, ANY L | 7/1/2003 | INVALID | N |
| 1 | J0287 | INJECTION, AMPHOTERICIN B LIPID | 1/1/2007 | $10.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J0288 | INJECTION, AMPHOTERICIN B CHOLES | 7/1/2006 | $12.00 | 3 |
| 1 | J0289 | INJECTION, AMPHOTERICIN B LIPOSO | 1/1/2007 | $16.67 | 3 |
| 1 | J0290 | INJECTION, AMPICILLIN, UP TO 500 | 1/1/2007 | $2.36 | 3 |
| 1 | J0295 | INJECTION, AMPICILLIN SODIUM/SUL | 1/1/2007 | $6.09 | 3 |
| 1 | J0300 | INJECTION, AMOBARBITAL, UP TO 12 | 1/1/2007 | $2.61 | 3 |
| 1 | J0330 | INJECTION, SUCCINYLCHOLINE CHLOR | 1/1/2007 | $0.18 | 3 |
| 1 | J0340 | INJECTION, NANDROLONE PHENPROPIO | 4/1/2002 | INVALID | N |
| 1 | J0348 | INJECTION, ANADULAFUNGIN, 1 MG | 1/1/2007 | $1.91 | 3 |
| 1 | J0350 | INJECTION, ANISTREPLASE, PER 30 | 7/1/2006 | $2,268.46 | 3 |
| 1 | J0360 | INJECTION, HYDRALAZINE HCL, UP T | 1/1/2007 | $6.51 | 3 |
| 1 | J0364 | INJECTION, APOMORPHINE HYDROCHLO | 1/1/2007 | $3.10 | 3 |
| 1 | J0365 | INJECTION, APROTONIN, 10,000 KIU | 4/15/2006 | NC | 9 |
| 1 | J0380 | INJECTION, METARAMINOL BITARTRAT | 10/15/2003 | $1.33 | 3 |
| 1 | J0390 | INJECTION, CHLOROQUINE HCL, UP T | 2/13/2006 | $0.01 | 5 |
| 1 | J0395 | INJECTION, ARBUTAMINE HCL, 1 MG | 2/13/2006 | $0.01 | 5 |
| 1 | J0400 | INJECTION, TRIMETHAPHAN CAMSYLAT | 4/1/2002 | INVALID | N |
| 1 | J0456 | INJECTION, AZITHROMYCIN, 500 MG | 1/1/2007 | $36.22 | 3 |
| 1 | J0460 | INJECTION, ATROPINE SULFATE, UP | 1/1/2007 | $0.63 | 3 |
| 1 | J0470 | INJECTION, DIMERCAPROL, PER 100 | 1/1/2007 | $25.51 | 3 |
| 1 | J0475 | INJECTION, BACLOFEN, 10 MG (LIOR | 1/1/2007 | $198.27 | 3 |
| 1 | J0476 | INJECTION, BACLOFEN, 50 MCG FOR | 1/1/2007 | $69.54 | 3 |
| 1 | J0480 | INJECTION, BASILIXIMAB, 10 MG (S | 4/15/2006 | NC | 9 |
| 1 | J0500 | INJECTION, DICYCLOMINE HCL, UP T | 1/1/2007 | $15.27 | 3 |
| 1 | J0510 | INJECTION, BENZQUINAMIDE HCL, UP | 4/1/2002 | INVALID | N |
| 1 | J0515 | INJECTION, BENZTROPINE MESYLATE, | 11/1/2006 | $17.08 | 3 |
| 1 | J0520 | INJECTION, BETHANECHOL CHLORIDE, | 2/13/2006 | $0.01 | 5 |
| 1 | J0530 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $13.16 | 3 |
| 1 | J0540 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $28.37 | 3 |
| 1 | J0550 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $30.49 | 3 |
| 1 | J0560 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $21.34 | 3 |
| 1 | J0570 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $36.44 | 3 |
| 1 | J0580 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $43.11 | 3 |
| 1 | J0583 | INJECTION, BIVALIRUDIN, 1 MG (AN | 1/1/2007 | $1.76 | 3 |
| 1 | J0585 | BOTULINUM TOXIN TYPE A, PER UNIT | 1/1/2007 | $5.10 | 3 |
| 1 | J0587 | BOTULINUM TOXIN TYPE B, PER 100 | 1/1/2007 | $8.27 | 3 |
| 1 | J0590 | INJECTION, ETHYLNOREPINEPHRINE H | 4/1/2002 | INVALID | N |
| 1 | J0592 | INJECTION, BUPRENORPHINE HYDROCH | 1/1/2007 | $0.76 | 3 |
| 1 | J0594 | INJECTION, BUSULFAN, 1 MG | 1/1/2007 | NC | 9 |
| 1 | J0595 | INJECTION, BUTORPHANOL TARTRATE, | 1/1/2007 | $0.72 | 3 |
| 1 | J0600 | INJECTION, EDETATE CALCIUM DISOD | 10/10/2007 | $40.19 | 3 |
| 1 | J0610 | INJECTION, CALCIUM GLUCONATE, PE | 1/1/2007 | $0.59 | 3 |
| 1 | J0620 | INJECTION, CALCIUM GLYCEROPHOSPH | 11/1/2006 | $13.70 | 3 |
| 1 | J0630 | INJECTION, CALCITONIN-SALMON, UP | 1/1/2007 | $40.79 | 3 |
| 1 | J0635 | INJECTION, CALCITRIOL, 1 MCG AMP | 7/1/2003 | INVALID | N |
| 1 | J0636 | INJECTION, CALCITRIOL, 0.1 MCG ( | 1/1/2007 | $0.56 | 3 |
| 1 | J0637 | INJECTION, CASPOFUNGIN ACETATE, | 1/1/2007 | $31.21 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J0640 | INJECTION, LEUCOVORIN CALCIUM, P | 1/1/2007 | $0.96 | 3 |
| 1 | J0670 | INJECTION, MEPIVACAINE HCL, PER | 1/1/2007 | $1.51 | 3 |
| 1 | J0690 | INJECTION, CEFAZOLIN SODIUM, UP | 1/1/2007 | $1.46 | 3 |
| 1 | J0692 | INJECTION, CEFEPIME HYDROCHLORID | 1/1/2007 | $6.96 | 3 |
| 1 | J0694 | INJECTION, CEFOXITIN SODIUM, 1 G | 1/1/2007 | $7.09 | 3 |
| 1 | J0695 | INJECTION, CEFONICID SODIUM, 1 G | 4/1/2002 | INVALID | N |
| 1 | J0696 | INJECTION, CEFTRIAXONE SODIUM, P | 1/1/2007 | $1.76 | 3 |
| 1 | J0697 | INJECTION, STERILE CEFUROXIME SO | 1/1/2007 | $3.95 | 3 |
| 1 | J0698 | CEFOTAXIME SODIUM, PER G (CLAFOR | 1/1/2007 | $4.43 | 3 |
| 1 | J0702 | INJECTION, BETAMETHASONE ACETATE | 1/1/2007 | $5.18 | 3 |
| 1 | J0704 | INJECTION, BETAMETHASONE SODIUM | 7/1/2006 | $1.13 | 3 |
| 1 | J0706 | INJECTION, CAFFEINE CITRATE, 5 M | 7/1/2006 | $3.48 | 3 |
| 1 | J0710 | INJECTION, CEPHAPIRIN SODIUM, UP | 2/13/2006 | $0.01 | 5 |
| 1 | J0713 | INJECTION, CEFTAZIDIME, PER 500 | 1/1/2007 | $4.01 | 3 |
| 1 | J0715 | INJECTION, CEFTIZOXIME SODIUM, P | 1/1/2007 | $2.98 | 3 |
| 1 | J0720 | INJECTION, CHLORAMPHENICOL SODIU | 1/1/2007 | $11.23 | 3 |
| 1 | J0725 | INJECTION, CHORIONIC GONADOTROPI | 1/1/2007 | $3.79 | 3 |
| 1 | J0730 | INJECTION, CHLORPHENIRAMINE MALE | 4/1/2002 | INVALID | N |
| 1 | J0735 | INJECTION, CLONIDINE HCL, 1 MG ( | 1/1/2007 | $65.84 | 3 |
| 1 | J0740 | INJECTION, CIDOFOVIR, 375 MG (VI | 1/1/2007 | $761.49 | 3 |
| 1 | J0743 | INJECTION, CILASTATIN SODIUM IMI | 1/1/2007 | $13.66 | 3 |
| 1 | J0744 | INJECTION, CIPROFLOXACIN FOR INT | 1/1/2007 | $5.07 | 3 |
| 1 | J0745 | INJECTION, CODEINE PHOSPHATE, PE | 1/1/2007 | $1.05 | 3 |
| 1 | J0760 | INJECTION, COLCHICINE, PER 1 MG | 1/1/2007 | $4.57 | 3 |
| 1 | J0770 | INJECTION, COLISTIMETHATE SODIUM | 1/1/2007 | $24.45 | 3 |
| 1 | J0780 | INJECTION, PROCHLORPERAZINE, UP | 1/1/2007 | $2.04 | 3 |
| 1 | J0795 | INJECTION, CORTICORELIN OVINE TR | 1/1/2007 | $4.48 | 3 |
| 1 | J0800 | INJECTION, CORTICOTROPIN, UP TO | 1/1/2007 | $114.53 | 3 |
| 1 | J0810 | INJECTION, CORTISONE ACETATE, UP | 4/1/2002 | INVALID | N |
| 1 | J0835 | INJECTION, COSYNTROPIN, PER 0.25 | 1/1/2007 | $63.92 | 3 |
| 1 | J0850 | INJECTION, CYTOMEGALOVIRUS IMMUN | 1/1/2007 | $866.58 | 3 |
| 1 | J0878 | INJECTION, DAPTOMYCIN, 1 MG (CUB | 1/1/2007 | $0.33 | 3 |
| 1 | J0880 | INJECTION, DARBEPOETIN ALFA, 5 M | 1/1/2006 | INVALID | N |
| 1 | J0881 | INJECTION, DARBEPOETIN ALFA, 1 M | 1/1/2007 | $3.09 | 3 |
| 1 | J0882 | INJECTION, DARBEPOETIN ALFA, 1 M | 1/1/2007 | $3.09 | 3 |
| 1 | J0885 | INJECTION, EPOETIN ALFA, (FOR NO | 1/1/2007 | $9.33 | 3 |
| 1 | J0886 | INJECTION, EPOETIN ALFA, 1000 UN | 1/1/2007 | INVALID | N |
| 1 | J0894 | INJECTION, DECITABINE, 1 MG | 1/1/2007 | NC | 9 |
| 1 | J0895 | INJECTION, DEFEROXAMINE MESYLATE | 1/1/2007 | $14.74 | 3 |
| 1 | J0900 | INJECTION, TESTOSTERONE ENANTHAT | 7/1/2006 | $1.38 | 3 |
| 1 | J0945 | INJECTION, BROMPHENIRAMINE MALEA | 1/1/2007 | $0.80 | 3 |
| 1 | J0970 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $34.23 | 3 |
| 1 | J1000 | INJECTION, DEPO-ESTRADIOL CYPION | 1/1/2007 | $5.62 | 3 |
| 1 | J1020 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $2.18 | 3 |
| 1 | J1030 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $5.11 | 3 |
| 1 | J1040 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $9.45 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J1050 | INJECTION, MEDROXYPROGESTERONE A | 7/1/2003 | INVALID | N |
| 1 | J1051 | INJECTION, MEDROXYPROGESTERONE A | 1/1/2007 | $5.53 | 3 |
| 1 | J1055 | INJECTION, MEDROXYPROGESTERONE A | 1/23/2006 | $65.54 | 3 |
| 1 | J1056 | INJECTION, MEDROXYPROGESTERONE A | 7/1/2006 | $22.89 | 3 |
| 1 | J1060 | INJECTION, TESTOSTERONE CYPIONAT | 7/1/2006 | $4.14 | 3 |
| 1 | J1070 | INJECTION, TESTOSTERONE CYPIONAT | 1/1/2007 | $5.45 | 3 |
| 1 | J1080 | INJECTION, TESTOSTERONE CYPIONAT | 1/1/2007 | $12.82 | 3 |
| 1 | J1090 | INJECTION, TESTOSTERONE CYPIONAT | 4/1/2002 | INVALID | N |
| 1 | J1094 | INJECTION, DEXAMETHASONE ACETATE | 7/1/2006 | $0.23 | 3 |
| 1 | J1095 | INJECTION, DEXAMETHASONE ACETATE | 7/1/2003 | INVALID | N |
| 1 | J1100 | INJECTION, DEXAMETHASONE SODIUM | 1/1/2007 | $0.11 | 3 |
| 1 | J1110 | INJECTION, DIHYDROERGOTAMINE MES | 1/1/2007 | $22.58 | 3 |
| 1 | J1120 | INJECTION, ACETAZOLAMIDE SODIUM, | 1/1/2007 | $16.10 | 3 |
| 1 | J1160 | INJECTION, DIGOXIN, UP TO 0.5 MG | 1/1/2007 | $3.36 | 3 |
| 1 | J1162 | INJECTION, DIGOXIN IMMUNE FAB (O | 1/1/2007 | $527.78 | 3 |
| 1 | J1165 | INJECTION, PHENYTOIN SODIUM, PER | 1/1/2007 | $0.73 | 3 |
| 1 | J1170 | INJECTION, HYDROMORPHONE HCL, UP | 1/1/2007 | $1.92 | 3 |
| 1 | J1180 | INJECTION, DYPHYLLINE, UP TO 500 | 7/1/2006 | $8.05 | 3 |
| 1 | J1190 | INJECTION, DEXRAZOXANE HCL, PER | 1/1/2007 | $175.19 | 3 |
| 1 | J1200 | INJECTION, DIPHENHYDRAMINE HCL, | 1/1/2007 | $0.80 | 3 |
| 1 | J1205 | INJECTION, CHLOROTHIAZIDE SODIUM | 11/1/2006 | $123.84 | 3 |
| 1 | J1212 | INJECTION, DMSO, DIMETHYL SULFOX | 1/1/2007 | $41.55 | 3 |
| 1 | J1230 | INJECTION, METHADONE HCL, UP TO | 1/1/2007 | $3.33 | 3 |
| 1 | J1240 | INJECTION, DIMENHYDRINATE, UP TO | 1/1/2007 | $2.93 | 3 |
| 1 | J1245 | INJECTION, DIPYRIDAMOLE, PER 10 | 1/1/2007 | $1.47 | 3 |
| 1 | J1250 | INJECTION, DOBUTAMINE HCL, PER 2 | 1/1/2007 | $4.17 | 3 |
| 1 | J1260 | INJECTION, DOLASETRON MESYLATE, | 1/1/2007 | $6.33 | 3 |
| 1 | J1265 | INJECTION, DOPAMINE HCL, 40 MG ( | 1/1/2007 | $0.82 | 3 |
| 1 | J1270 | INJECTION, DOXERCALCIFEROL, 1 MC | 1/1/2007 | $2.89 | 3 |
| 1 | J1320 | INJECTION, AMITRIPTYLINE HCL, UP | 7/1/2006 | $2.24 | 3 |
| 1 | J1324 | INJECTION, ENFUVIRTIDE, 1 MG | 1/1/2007 | NC | 9 |
| 1 | J1325 | INJECTION, EPOPROSTENOL, 0.5 MG | 1/1/2007 | $14.43 | 3 |
| 1 | J1327 | INJECTION, EPTIFIBATIDE, 5 MG (I | 1/1/2007 | $15.87 | 3 |
| 1 | J1330 | INJECTION, ERGONOVINE MALEATE, U | 2/13/2006 | $0.01 | 5 |
| 1 | J1335 | INJECTION, ERTAPENEM SODIUM, 500 | 1/1/2007 | $24.30 | 3 |
| 1 | J1362 | INJECTION, ERYTHROMYCIN GLUCEPTA | 4/1/2002 | INVALID | N |
| 1 | J1364 | INJECTION, ERYTHROMYCIN LACTOBIO | 1/1/2007 | $5.99 | 3 |
| 1 | J1380 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $12.52 | 3 |
| 1 | J1390 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $17.12 | 3 |
| 1 | J1410 | INJECTION, ESTROGEN CONJUGATED, | 1/1/2007 | $60.78 | 3 |
| 1 | J1430 | INJECTION, ETHANOLAMINE OLEATE, | 1/1/2007 | $69.72 | 3 |
| 1 | J1435 | INJECTION, ESTRONE, PER 1 MG(EST | 7/1/2006 | $0.14 | 3 |
| 1 | J1436 | INJECTION, ETIDRONATE DISODIUM, | 7/1/2006 | $71.41 | 3 |
| 1 | J1438 | INJECTION, ETANERCEPT, 25 MG (EN | 1/1/2007 | $162.39 | 3 |
| 1 | J1440 | INJECTION, FILGRASTIM (G-CSF), 3 | 1/1/2007 | $188.29 | 3 |
| 1 | J1441 | INJECTION, FILGRASTIM (G-CSF), 4 | 1/1/2007 | $299.09 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J1450 | INJECTION, FLUCONAZOLE, 200 MG ( | 1/1/2007 | $10.62 | 3 |
| 1 | J1451 | INJECTION, FOMEPIZOLE, 15 MG (AN | 4/15/2006 | NC | 9 |
| 1 | J1452 | INJECTION, FOMIVIRSEN SODIUM, IN | 7/1/2006 | $212.00 | 3 |
| 1 | J1455 | INJECTION, FOSCARNET SODIUM, PER | 1/1/2007 | $10.17 | 3 |
| 1 | J1457 | INJECTION, GALLIUM NITRATE, 1 MG | 1/1/2007 | $1.24 | 3 |
| 1 | J1458 | INJECTION, GALSULFASE, 1 MG | 1/1/2007 | NC | 9 |
| 1 | J1460 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $11.83 | 3 |
| 1 | J1470 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $23.66 | 3 |
| 1 | J1480 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $35.47 | 3 |
| 1 | J1490 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $47.31 | 3 |
| 1 | J1500 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $59.14 | 3 |
| 1 | J1510 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $71.02 | 3 |
| 1 | J1520 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $82.72 | 3 |
| 1 | J1530 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $94.62 | 3 |
| 1 | J1540 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $106.54 | 3 |
| 1 | J1550 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $118.27 | 3 |
| 1 | J1560 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $118.24 | 3 |
| 1 | J1561 | INJECTION, IMMUNE GLOBULIN, INTR | 7/1/2003 | INVALID | N |
| 1 | J1562 | INJECTION, IMMUNE GLOBULIN, SUBC | 1/1/2007 | NC | 9 |
| 1 | J1563 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| 1 | J1564 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| 1 | J1565 | INJECTION, RESPIRATORY SYNCYTIAL | 7/1/2006 | $16.18 | 3 |
| 1 | J1566 | INJECTION, IMMUNE GLOBULIN,INTRA | 1/1/2007 | $25.61 | 3 |
| 1 | J1567 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2007 | $30.44 | 3 |
| 1 | J1570 | INJECTION, GANCICLOVIR SODIUM 50 | 1/1/2007 | $39.55 | 3 |
| 1 | J1580 | INJECTION, GARAMYCIN, GENTAMICIN | 1/1/2007 | $1.07 | 3 |
| 1 | J1590 | INJECTION, GATIFLOXACIN, 10 MG ( | 1/1/2007 | $0.84 | 3 |
| 1 | J1595 | INJECTION, GLATIRAMER ACETATE, 2 | 1/1/2007 | $46.82 | 3 |
| 1 | J1600 | INJECTION, GOLD SODIUM THIOMALAT | 1/1/2007 | $5.41 | 3 |
| 1 | J1610 | INJECTION, GLUCAGON HYDROCHLORID | 1/1/2007 | $68.04 | 3 |
| 1 | J1620 | INJECTION, GONADORELIN HYDROCHLO | 1/1/2007 | $180.30 | 3 |
| 1 | J1626 | INJECTION, GRANISETRON HYDROCHLO | 1/1/2007 | $7.64 | 3 |
| 1 | J1630 | INJECTION, HALOPERIDOL, UP TO 5 | 1/1/2007 | $2.12 | 3 |
| 1 | J1631 | INJECTION, HALOPERIDOL DECANOATE | 1/1/2007 | $5.25 | 3 |
| 1 | J1640 | INJECTION, HEMIN, 1 MG (PANHEMAT | 4/15/2006 | NC | 9 |
| 1 | J1642 | INJECTION, HEPARIN SODIUM, (HEPA | 7/1/2006 | $0.05 | 3 |
| 1 | J1644 | INJECTION, HEPARIN SODIUM, PER 1 | 1/1/2007 | $0.23 | 3 |
| 1 | J1645 | INJECTION, DALTEPARIN SODIUM, PE | 10/10/2007 | $11.12 | 3 |
| 1 | J1650 | INJECTION, ENOXAPARIN SODIUM, 10 | 1/1/2007 | $5.64 | 3 |
| 1 | J1652 | INJECTION, FONDAPARINUX SODIUM, | 1/1/2007 | $5.85 | 3 |
| 1 | J1655 | INJECTION, TINZAPARIN SODIUM, 10 | 1/1/2007 | $2.45 | 3 |
| 1 | J1670 | INJECTION, TETANUS IMMUNE GLOBUL | 1/1/2007 | $95.91 | 3 |
| 1 | J1675 | INJECTION, HISTRELIN ACETATE, 10 | 10/1/2006 | NC | 9 |
| 1 | J1690 | INJECTION, PREDNISOLONE TEBUTATE | 4/1/2002 | INVALID | N |
| 1 | J1700 | INJECTION, HYDROCORTISONE ACETAT | 4/1/2003 | $0.24 | 3 |
| 1 | J1710 | INJECTION, HYDROCORTISONE SODIUM | 2/13/2006 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J1720 | INJECTION, HYDROCORTISONE SODIUM | 1/1/2007 | $1.99 | 3 |
| 1 | J1730 | INJECTION, DIAZOXIDE, UP TO 300 | 1/1/2007 | $111.85 | 3 |
| 1 | J1739 | INJECTION, HYDROXYPROGESTERONE C | 4/1/2002 | INVALID | N |
| 1 | J1740 | INJECTION, IBANDRONATE SODIUM, 1 | 1/1/2007 | $138.85 | 3 |
| 1 | J1741 | INJECTION, HYDROXYPROGESTERONE C | 4/1/2002 | INVALID | N |
| 1 | J1742 | INJECTION, IBUTILIDE FUMARATE, 1 | 1/1/2007 | $267.82 | 3 |
| 1 | J1745 | INJECTION, INFLIXIMAB, 10 MG (RE | 1/1/2007 | $53.73 | 3 |
| 1 | J1750 | INJECTION, IRON DEXTRAN, 50 MG ( | 1/1/2006 | INVALID | N |
| 1 | J1751 | INJECTION, IRON DEXTRAN 165, 50 | 7/1/2006 | $11.69 | 3 |
| 1 | J1752 | INJECTION, IRON DEXTRAN 267, 50 | 1/1/2007 | $10.40 | 3 |
| 1 | J1755 | INJECTION, IRON SUCROSE, 20 MG | 7/1/2003 | INVALID | N |
| 1 | J1756 | INJECTION, IRON SUCROSE, 1 MG (V | 1/1/2007 | $0.36 | 3 |
| 1 | J1785 | INJECTION, IMIGLUCERASE, PER UNI | 1/1/2007 | $3.92 | 3 |
| 1 | J1790 | INJECTION, DROPERIDOL, UP TO 5 M | 1/1/2007 | $1.13 | 3 |
| 1 | J1800 | INJECTION, PROPRANOLOL HCL, UP T | 1/1/2007 | $3.80 | 3 |
| 1 | J1810 | INJECTION, DROPERIDOL AND FENTAN | 7/1/2006 | $5.58 | 3 |
| 1 | J1815 | INJECTION, INSULIN, PER 5 UNITS | 1/1/2007 | $0.24 | 3 |
| 1 | J1817 | INSULIN FOR ADMINISTRATION THRU | 1/1/2007 | $2.41 | 3 |
| 1 | J1820 | INJECTION, INSULIN, UP TO 100 UN | 7/1/2003 | INVALID | N |
| 1 | J1825 | INJECTION, INTERFERON BETA-1A, 3 | 11/1/2006 | $435.47 | 3 |
| 1 | J1830 | INTERFERON BETA-1B, PER 0.25 MG | 1/1/2007 | $90.28 | 3 |
| 1 | J1835 | INJECTION, ITRACONAZOLE, 50 MG ( | 1/1/2007 | $37.89 | 3 |
| 1 | J1840 | INJECTION, KANAMYCIN SULFATE, UP | 1/1/2007 | $4.07 | 3 |
| 1 | J1850 | INJECTION, KANAMYCIN SULFATE, UP | 1/1/2007 | $0.61 | 3 |
| 1 | J1885 | INJECTION, KETOROLAC TROMETHAMIN | 1/1/2007 | $0.49 | 3 |
| 1 | J1890 | INJECTION, CEPHALOTHIN SODIUM, U | 7/11/2005 | $0.01 | 5 |
| 1 | J1910 | INJECTION, KUTAPRESSIN, UP TO 2 | 4/1/2004 | INVALID | N |
| 1 | J1930 | INJECTION, PROPIOMAZINE, UP TO 2 | 4/1/2002 | INVALID | N |
| 1 | J1931 | INJECTION, LARONIDASE, 0.1 MG (A | 7/1/2006 | $23.87 | 3 |
| 1 | J1940 | INJECTION, FUROSEMIDE, UP TO 20 | 1/1/2007 | $0.29 | 3 |
| 1 | J1945 | INJECTION, LEPIRUDIN, 50 MG | 4/15/2006 | NC | 9 |
| 1 | J1950 | INJECTION, LEUPROLIDE ACETATE (F | 1/1/2007 | $431.95 | 3 |
| 1 | J1955 | INJECTION, LEVOCARNITINE, PER 1 | 1/1/2007 | $9.36 | 3 |
| 1 | J1956 | INJECTION, LEVOFLOXACIN, 250 MG | 1/1/2007 | $7.55 | 3 |
| 1 | J1960 | INJECTION, LEVORPHANOL TARTRATE, | 1/30/2006 | $4.54 | 3 |
| 1 | J1970 | INJECTION, METHOTRIMEPRAZINE, UP | 4/1/2002 | INVALID | N |
| 1 | J1980 | INJECTION, HYOSCYAMINE SULFATE, | 1/1/2007 | $8.70 | 3 |
| 1 | J1990 | INJECTION, CHLORDIAZEPOXIDE HCL, | 7/1/2006 | $21.05 | 3 |
| 1 | J2000 | INJECTION, LIDOCAINE HCL, 50 CC | 4/1/2004 | INVALID | N |
| 1 | J2001 | INJECTION, LIDOCAINE HCL FOR INT | 7/1/2006 | $0.02 | 3 |
| 1 | J2010 | INJECTION, LINCOMYCIN HCL, UP TO | 1/1/2007 | $3.84 | 3 |
| 1 | J2020 | INJECTION, LINEZOLID, 200 MG (ZY | 1/1/2007 | $24.70 | 3 |
| 1 | J2060 | INJECTION, LORAZEPAM, 2 MG (ATIV | 1/1/2007 | $1.22 | 3 |
| 1 | J2150 | INJECTION, MANNITOL, 25% IN 50 M | 1/1/2007 | $0.86 | 3 |
| 1 | J2170 | INJECTION, MECASERMIN, 1 MG | 1/1/2007 | NC | 9 |
| 1 | J2175 | INJECTION, MEPERIDINE HCL, PER 1 | 1/1/2007 | $1.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J2180 | INJECTION, MEPERIDINE AND PROMET | 7/1/2006 | $3.79 | 3 |
| 1 | J2185 | INJECTION, MEROPENEM, 100 MG | 1/1/2007 | $3.76 | 3 |
| 1 | J2210 | INJECTION, METHYLERGONOVINE MALE | 1/1/2007 | $4.60 | 3 |
| 1 | J2240 | INJECTION, METOCURINE IODIDE, UP | 4/1/2002 | INVALID | N |
| 1 | J2248 | INJECTION, MICAFUNGIN SODIUM, 1 | 1/1/2007 | $1.78 | 3 |
| 1 | J2250 | INJECTION, MIDAZOLAM HCL, PER 1 | 1/1/2007 | $0.24 | 3 |
| 1 | J2260 | INJECTION, MILRINONE LACTATE, 5 | 1/1/2007 | $3.23 | 3 |
| 1 | J2270 | INJECTION, MORPHINE SULFATE, UP | 1/1/2007 | $2.56 | 3 |
| 1 | J2271 | INJECTION, MORPHINE SULFATE, 100 | 1/1/2007 | $3.88 | 3 |
| 1 | J2275 | INJECTION, MORPHINE SULFATE (PRE | 1/1/2007 | $6.50 | 3 |
| 1 | J2278 | INJECTION, ZICONOTIDE, 1 MCG | 1/1/2007 | $6.48 | 3 |
| 1 | J2280 | INJECTION, MOXIFLOXACIN, 100 MG | 1/1/2007 | $4.00 | 3 |
| 1 | J2300 | INJECTION, NALBUPHINE HCL, PER 1 | 1/1/2007 | $0.58 | 3 |
| 1 | J2310 | INJECTION, NALOXONE HCL, PER 1 M | 1/1/2007 | $1.84 | 3 |
| 1 | J2315 | INJECTION, NALTREXONE, DEPOT FOR | 1/1/2007 | $1.90 | 3 |
| 1 | J2320 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $3.20 | 3 |
| 1 | J2321 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $6.42 | 3 |
| 1 | J2322 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $12.79 | 3 |
| 1 | J2324 | INJECTION, NESIRITIDE, 0.25 MG ( | 1/1/2006 | INVALID | N |
| 1 | J2325 | INJECTION, NESIRITIDE, 0.1 MG (N | 4/15/2006 | NC | 9 |
| 1 | J2330 | INJECTION, THIOTHIXENE, UP TO 4 | 4/1/2002 | INVALID | N |
| 1 | J2350 | INJECTION, NIACINAMIDE, NIACIN, | 4/1/2002 | INVALID | N |
| 1 | J2352 | INJECTION, OCTREOTIDE ACETATE, 1 | 4/1/2004 | INVALID | N |
| 1 | J2353 | INJECTION, OCTREOTIDE, DEPOT FOR | 1/1/2007 | $95.39 | 3 |
| 1 | J2354 | INJECTION, OCTREOTIDE, NON-DEPOT | 1/1/2007 | $3.06 | 3 |
| 1 | J2355 | INJECTION, OPRELVEKIN, 5 MG (NEU | 1/1/2007 | $246.07 | 3 |
| 1 | J2357 | INJECTION, OMALIZUMAB, 5 MG (XOL | 1/1/2007 | $16.68 | 3 |
| 1 | J2360 | INJECTION, ORPHENADRINE CITRATE, | 1/1/2007 | $11.13 | 3 |
| 1 | J2370 | INJECTION, PHENYLEPHRINE HCL, UP | 1/1/2007 | $0.73 | 3 |
| 1 | J2400 | INJECTION, CHLOROPROCAINE HCL, P | 1/1/2007 | $15.20 | 3 |
| 1 | J2405 | INJECTION, ONDANSETRON HCL, PER | 1/1/2007 | $3.71 | 3 |
| 1 | J2410 | INJECTION, OXYMORPHONE HCL, UP T | 1/1/2007 | $2.36 | 3 |
| 1 | J2425 | INJECTION, PALIFERMIN, 50 MCG | 4/15/2006 | NC | 9 |
| 1 | J2430 | INJECTION, PAMIDRONATE DISODIUM, | 1/1/2007 | $33.95 | 3 |
| 1 | J2440 | INJECTION, PAPAVERINE HCL, UP TO | 7/1/2006 | $0.60 | 3 |
| 1 | J2460 | INJECTION, OXYTETRACYCLINE HCL, | 7/1/2006 | $0.94 | 3 |
| 1 | J2469 | INJECTION, PALONOSETRON HCL, 25 | 1/1/2007 | $17.46 | 3 |
| 1 | J2480 | INJECTION, HYDROCHLORIDES OF OPI | 4/1/2002 | INVALID | N |
| 1 | J2500 | INJECTION, PARICALCITOL, 5 MCG | 7/1/2003 | INVALID | N |
| 1 | J2501 | INJECTION, PARICALCITOL, 1 MCG ( | 1/1/2007 | $3.77 | 3 |
| 1 | J2503 | INJECTION, PEGAPTANIB SODIUM, 0. | 7/1/2006 | $1,054.70 | 3 |
| 1 | J2504 | INJECTION, PEGADEMASE BOVINE, 25 | 7/1/2006 | $177.83 | 3 |
| 1 | J2505 | INJECTION, PEGFILGRASTIM, 6 MG ( | 1/1/2007 | $2,152.34 | 3 |
| 1 | J2510 | INJECTION, PENICILLIN G PROCAINE | 1/1/2007 | $8.89 | 3 |
| 1 | J2512 | INJECTION, PENTAGASTRIN, PER 2 M | 4/1/2002 | INVALID | N |
| 1 | J2513 | INJECTION, PENTASTARCH, 10% SOLU | 4/15/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J2515 | INJECTION, PENTOBARBITAL SODIUM, | 1/1/2007 | $5.50 | 3 |
| 1 | J2540 | INJECTION, PENICILLIN G POTASSIU | 1/1/2007 | $0.96 | 3 |
| 1 | J2543 | INJECTION, PIPERACILLIN SODIUM/T | 1/1/2007 | $4.87 | 3 |
| 1 | J2545 | PENTAMIDINE ISETHIONATE, INHALAT | 1/1/2007 | $44.73 | 3 |
| 1 | J2550 | INJECTION, PROMETHAZINE HCL, UP | 1/1/2007 | $1.85 | 3 |
| 1 | J2560 | INJECTION, PHENOBARBITAL SODIUM, | 1/1/2007 | $3.19 | 3 |
| 1 | J2590 | INJECTION, OXYTOCIN, UP TO 10 UN | 1/1/2007 | $2.18 | 3 |
| 1 | J2597 | INJECTION, DESMOPRESSIN ACETATE, | 1/1/2007 | $2.66 | 3 |
| 1 | J2640 | INJECTION, PREDNISOLONE SODIUM P | 4/1/2002 | INVALID | N |
| 1 | J2650 | INJECTION, PREDNISOLONE ACETATE, | 1/1/2007 | $0.44 | 3 |
| 1 | J2670 | INJECTION, TOLAZOLINE HCL, UP TO | 7/1/2005 | $0.01 | 5 |
| 1 | J2675 | INJECTION, PROGESTERONE, PER 50 | 1/1/2007 | $1.69 | 3 |
| 1 | J2680 | INJECTION, FLUPHENAZINE DECANOAT | 1/1/2007 | $1.49 | 3 |
| 1 | J2690 | INJECTION, PROCAINAMIDE HCL, UP | 1/1/2007 | $2.24 | 3 |
| 1 | J2700 | INJECTION, OXACILLIN SODIUM, UP | 1/1/2007 | $1.54 | 3 |
| 1 | J2710 | INJECTION, NEOSTIGMINE METHYLSUL | 1/1/2007 | $0.08 | 3 |
| 1 | J2720 | INJECTION, PROTAMINE SULFATE, PE | 1/1/2007 | $0.43 | 3 |
| 1 | J2725 | INJECTION, PROTIRELIN, PER 250 M | 7/1/2006 | $21.78 | 3 |
| 1 | J2730 | INJECTION, PRALIDOXIME CHLORIDE, | 1/1/2007 | $66.49 | 3 |
| 1 | J2760 | INJECTION, PHENTOLAMINE MESYLATE | 1/1/2007 | $23.97 | 3 |
| 1 | J2765 | INJECTION, METOCLOPRAMIDE HCL, U | 1/1/2007 | $0.44 | 3 |
| 1 | J2770 | INJECTION, QUINUPRISTIN,DALFOPRI | 1/1/2007 | $115.48 | 3 |
| 1 | J2780 | INJECTION, RANITIDINE HYDROCHLOR | 1/1/2007 | $0.67 | 3 |
| 1 | J2783 | INJECTION, RASBURICASE, 0.5 MG ( | 1/1/2007 | $132.58 | 3 |
| 1 | J2788 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $26.17 | 3 |
| 1 | J2790 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $81.59 | 3 |
| 1 | J2792 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $16.52 | 3 |
| 1 | J2794 | INEJCTION, RISPERIDONE, LONG ACT | 1/1/2007 | $4.80 | 3 |
| 1 | J2795 | INJECTION, ROPIVACAINE HCL, 1 MG | 7/1/2006 | $0.07 | 3 |
| 1 | J2800 | INJECTION, METHOCARBAMOL, UP TO | 1/1/2007 | $12.28 | 3 |
| 1 | J2805 | INJECTION, SINCALIDE, 5 MCG | 4/15/2006 | NC | 9 |
| 1 | J2810 | INJECTION, THEOPHYLLINE, PER 40 | 7/1/2006 | $0.03 | 3 |
| 1 | J2820 | INJECTION, SARGRAMOSTIM (GM-CSF) | 1/1/2007 | $24.89 | 3 |
| 1 | J2850 | INJECTION, SECRETIN, SYNTHETIC, | 4/15/2006 | NC | 9 |
| 1 | J2860 | INJECTION, SECOBARBITAL SODIUM, | 4/1/2002 | INVALID | N |
| 1 | J2910 | INJECTION, AUROTHIOGLUCOSE, UP T | 7/1/2006 | $24.50 | 3 |
| 1 | J2912 | INJECTION, SODIUM CHLORIDE, 0.9% | 1/1/2007 | INVALID | N |
| 1 | J2915 | INJECTION, SODIUM FERRIC GLUCONA | 7/1/2003 | INVALID | N |
| 1 | J2916 | INJECTION, SODIUM FERRIC GLUCONA | 1/1/2007 | $4.77 | 3 |
| 1 | J2920 | INJECTION, METHYLPREDNISOLONE SO | 1/1/2007 | $1.95 | 3 |
| 1 | J2930 | INJECTION, METHYLPREDNISOLONE SO | 1/1/2007 | $2.48 | 3 |
| 1 | J2940 | INJECTION, SOMATREM, 1 MG (PROTR | 6/21/2004 | $52.88 | 3 |
| 1 | J2941 | INJECTION, SOMATROPIN, 1 MG (HUM | 1/1/2007 | $46.56 | 3 |
| 1 | J2950 | INJECTION, PROMAZINE HCL, UP TO | 11/1/2006 | $0.38 | 3 |
| 1 | J2970 | INJECTION, METHICILLIN SODIUM, U | 4/1/2002 | INVALID | N |
| 1 | J2993 | INJECTION, RETEPLASE, 18.1 MG (R | 1/1/2007 | $901.36 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J2995 | INJECTION, STREPTOKINASE, PER 25 | 7/1/2006 | $79.50 | 3 |
| 1 | J2997 | INJECTION, ALTEPLASE RECOMBINANT | 1/1/2007 | $32.76 | 3 |
| 1 | J3000 | INJECTION, STREPTOMYCIN, UP TO 1 | 1/1/2007 | $6.79 | 3 |
| 1 | J3010 | INECTION, FENTANYL CITRATE, 0.1 | 1/1/2007 | $0.34 | 3 |
| 1 | J3030 | INJECTION, SUMATRIPTAN SUCCINATE | 1/1/2007 | $58.49 | 3 |
| 1 | J3070 | INJECTION, PENTAZOCINE, 30 MG (T | 1/1/2007 | $5.80 | 3 |
| 1 | J3080 | INJECTION, CHLORPROTHIXENE, UP T | 4/1/2002 | INVALID | N |
| 1 | J3100 | INJECTION, TENECTEPLASE, 50 MG ( | 1/1/2007 | $2,050.23 | 3 |
| 1 | J3105 | INJECTION, TERBUTALINE SULFATE, | 1/1/2007 | $3.86 | 3 |
| 1 | J3110 | INJECTION, TERIPARATIDE, 10 MCG | 1/23/2006 | $3.38 | 3 |
| 1 | J3120 | INJECTION, TESTOSTERONE ENANTHAT | 1/1/2007 | $5.18 | 3 |
| 1 | J3130 | INJECTION, TESTOSTERONE ENANTHAT | 1/1/2007 | $10.35 | 3 |
| 1 | J3140 | INJECTION, TESTOSTERONE SUSPENSI | 7/5/2004 | $0.62 | 3 |
| 1 | J3150 | INJECTION, TESTOSTERONE PROPIONA | 8/21/2006 | $5.07 | 3 |
| 1 | J3230 | INJECTION, CHLORPROMAZINE HCL, U | 1/1/2007 | $3.95 | 3 |
| 1 | J3240 | INJECTION, THYROTROPIN ALPHS, 0. | 1/1/2007 | $765.20 | 3 |
| 1 | J3243 | INJECTION, TIGECYCLINE, 1 MG | 1/1/2007 | $0.90 | 3 |
| 1 | J3245 | INJECTION, TIROFIBAN HYDROCHLORI | 1/1/2005 | INVALID | N |
| 1 | J3246 | INJECTION, TIROFIBAN HCL, 0.25 M | 1/1/2005 | NC | 9 |
| 1 | J3250 | INJECTION, TRIMETHOBENZAMIDE HCL | 1/1/2007 | $4.03 | 3 |
| 1 | J3260 | INJECTION, TOBRAMYCIN SULFATE, U | 1/1/2007 | $1.97 | 3 |
| 1 | J3265 | INJECTION, TORSEMIDE, 10 MG/ML ( | 1/1/2007 | $2.35 | 3 |
| 1 | J3270 | INJECTION, IMIPRAMINE HCL, UP TO | 4/1/2002 | INVALID | N |
| 1 | J3280 | INJECTION, THIETHYLPERAZINE MALE | 2/13/2006 | $0.01 | 5 |
| 1 | J3285 | INJECTION, TREPROSTINIL, 1 MG (R | 4/15/2006 | NC | 9 |
| 1 | J3301 | INJECTION, TRIAMCINOLONE ACETONI | 1/1/2007 | $1.44 | 3 |
| 1 | J3302 | INJECTION, TRIAMCINOLONE DIACETA | 7/1/2006 | $0.28 | 3 |
| 1 | J3303 | INJECTION, TRIAMCINOLONE HEXACET | 1/1/2007 | $3.42 | 3 |
| 1 | J3305 | INJECTION, TRIMETREXATE GLUCORON | 1/1/2007 | $145.06 | 3 |
| 1 | J3310 | INJECTION, PERPHENAZINE, UP TO 5 | 2/13/2006 | $0.01 | 5 |
| 1 | J3315 | INJECITON, TRIPTORELIN PAMOATE, | 1/1/2007 | $178.14 | 3 |
| 1 | J3320 | INJECTION, SPECTINOMYCIN HCL, UP | 1/1/2007 | $18.30 | 3 |
| 1 | J3350 | INJECTION, UREA, UP TO 40 G (URE | 2/13/2006 | $0.01 | 5 |
| 1 | J3355 | INJECTION, UROFOLITROPIN, 75 IU | 1/1/2006 | NC | 9 |
| 1 | J3360 | INJECTION, DIAZEPAM, UP TO 5 MG | 1/1/2007 | $0.78 | 3 |
| 1 | J3364 | INJECTION, UROKINASE, 5000 IU VI | 7/1/2006 | $9.16 | 3 |
| 1 | J3365 | INJECTION, IV, UROKINASE, 250,00 | 7/1/2006 | $457.73 | 3 |
| 1 | J3370 | INJECTION, VANCOMYCIN HCL, UP TO | 1/1/2007 | $3.44 | 3 |
| 1 | J3390 | INJECTION, METHOXAMINE, UP TO 20 | 4/1/2002 | INVALID | N |
| 1 | J3395 | INJECTION, VERTEPORFIN, 15 MG | 1/1/2005 | INVALID | N |
| 1 | J3396 | INJECTION, VERTEPORFIN, 0.1 MG | 1/1/2007 | $8.89 | 3 |
| 1 | J3400 | INJECTION, TRIFLUPROMAZINE HCL, | 2/13/2006 | $0.01 | 5 |
| 1 | J3410 | INJECTION, HYDROXYZINE HCL, UP T | 1/1/2007 | $0.21 | 3 |
| 1 | J3411 | INJECTION, THIAMINE HCL, 100 MG | 1/1/2007 | $2.01 | 3 |
| 1 | J3415 | INJECTION, PYRIDOXINE HCL, 100 M | 1/1/2007 | $3.47 | 3 |
| 1 | J3420 | INJECTION, VITAMIN B-12 CYANOCOB | 1/1/2007 | $0.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J3430 | INJECTION, PHYTONADIONE (VITAMIN | 1/1/2007 | $2.89 | 3 |
| 1 | J3450 | INJECTION, MEPHENTERMINE SULFATE | 4/1/2002 | INVALID | N |
| 1 | J3465 | INJECTION, VORICONAZOLE, 10 MG | 1/1/2007 | $4.80 | 3 |
| 1 | J3470 | INJECTION, HYALURONIDASE, UP TO | 1/1/2007 | $16.71 | 3 |
| 1 | J3471 | INJECTION, HYALURONIDASE, OVINE, | 7/1/2006 | $0.11 | 3 |
| 1 | J3472 | INJECTION, HYALURONIDASE, OVINE, | 1/1/2007 | $135.36 | 3 |
| 1 | J3473 | INJECTION, HYALURONIDASE, RECOMB | 1/1/2007 | $0.40 | 3 |
| 1 | J3475 | INJECTION, MAGNESIUM SULFATE, PE | 1/1/2007 | $0.15 | 3 |
| 1 | J3480 | INJECTION, POTASSIUM CHLORIDE, P | 7/1/2006 | $0.02 | 3 |
| 1 | J3485 | INJECTION, ZIDOVUDINE, 10 MG (RE | 1/1/2007 | $1.06 | 3 |
| 1 | J3486 | INJECTION, ZIPRASIDONE MESYLATE, | 1/1/2007 | $5.09 | 3 |
| 1 | J3487 | INJECTION, ZOLEDRONIC ACID, 1 MG | 1/1/2007 | $205.00 | 3 |
| 1 | J3490 | UNCLASSIFIED DRUGS | 6/12/2006 | $0.01 | 5 |
| 1 | J3520 | EDETATE DISODIUM, PER 150 MG (EN | 1/1/2001 | NC | 9 |
| 1 | J3530 | NASAL VACCINE INHALATION | 1/17/2005 | NC | 9 |
| 1 | J3535 | DRUG ADMINISTERED THROUGH A METE | 1/1/2005 | $0.01 | 5 |
| 1 | J3570 | LAETRILE, AMYGDALIN, VITAMIN B17 | 3/1/1989 | NC | 9 |
| 1 | J3590 | UNCLASSIFIED BIOLOGICS | 1/1/2003 | $0.01 | 5 |
| 1 | J7030 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $1.06 | 3 |
| 1 | J7040 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $0.53 | 3 |
| 1 | J7042 | 5% DEXTROSE/NORMAL SALINE (500 M | 7/1/2006 | $0.39 | 3 |
| 1 | J7050 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $0.27 | 3 |
| 1 | J7051 | STERILE SALINE OR WATER, UP TO 5 | 1/1/2006 | INVALID | N |
| 1 | J7060 | 5% DEXTROSE/WATER (500 ML = 1 UN | 1/1/2007 | $1.30 | 3 |
| 1 | J7070 | INFUSION, D-5-W, 1000 CC | 1/1/2007 | $2.60 | 3 |
| 1 | J7100 | INFUSION, DEXTRAN 40, 500 ML (GE | 1/1/2007 | $13.98 | 3 |
| 1 | J7110 | INFUSION, DEXTRAN 75, 500 ML (GE | 1/1/2007 | $8.66 | 3 |
| 1 | J7120 | RINGERS LACTATE INFUSION, UP TO | 1/1/2007 | $0.88 | 3 |
| 1 | J7130 | HYPERTONIC SALINE SOLUTION, 50 O | 3/1/1989 | $0.01 | 5 |
| 1 | J7187 | INJECTION, VON WILLEBRAND FACTOR | 1/1/2007 | NC | 9 |
| 1 | J7188 | INJECTION, VON WILLEBRAND FACTOR | 1/1/2007 | INVALID | N |
| 1 | J7189 | FACTOR VIIA (ANTIHEMOPHILIC FACT | 1/1/2007 | $1.12 | 3 |
| 1 | J7190 | FACTOR VIII (ANTI-HEMOPHILIC FAC | 1/1/2007 | $0.70 | 3 |
| 1 | J7191 | FACTOR VIII (ANTI-HEMOPHILIC FAC | 2/1/1999 | $2.20 | 3 |
| 1 | J7192 | FACTOR VIII (ANTI-HEMOPHILIC FAC | 1/1/2007 | $1.07 | 3 |
| 1 | J7193 | FACTOR IX (ANTIHEMOPHILIC FACTOR | 1/1/2007 | $0.90 | 3 |
| 1 | J7194 | FACTOR IX COMPLEX, PER IU (KONYN | 1/1/2007 | $0.74 | 3 |
| 1 | J7195 | FACTOR IX (ANTIHEMOPHILIC FACTOR | 7/1/2006 | $0.99 | 3 |
| 1 | J7197 | ANTITHROMBIN III (HUMAN), PER I. | 1/1/2007 | $1.64 | 3 |
| 1 | J7198 | ANTI-INHIBITOR, PER I.U. (AUTOPL | 7/1/2006 | $1.35 | 3 |
| 1 | J7199 | HEMOPHILIA CLOTTING FACTOR, NOT | 1/1/2000 | $0.01 | 5 |
| 1 | J7300 | INTRAUTERINE COPPER CONTRACEPTIV | 1/23/2006 | $475.00 | 3 |
| 1 | J7302 | LEVONOGESTREL-RELEASING INTRAUTE | 1/23/2006 | $515.29 | 3 |
| 1 | J7303 | CONTRACEPTIVE SUPPLY, HORMONE CO | 1/1/2004 | $28.92 | 3 |
| 1 | J7304 | CONTRACEPTIVE SUPPLY, HORMONE CO | 1/1/2005 | $3.77 | 3 |
| 1 | J7306 | LEVONORGESTREL (CONTRACEPTIVE) I | 1/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J7308 | AMINOLEVULINIC ACID HCL FOR TOPI | 1/1/2007 | $106.95 | 3 |
| 1 | J7310 | GANCICLOVIR, 4.5 MG, LONG-ACTING | 12/20/2004 | NC | 9 |
| 1 | J7311 | FLUOCINOLONE ACETONIDE, INTRAVIT | 1/1/2007 | NC | 9 |
| 1 | J7315 | SODIUM HYALURONATE, 20 MG, FOR I | 4/1/2002 | INVALID | N |
| 1 | J7316 | SODIUM HYALURONATE, 5 MG FOR INT | 7/1/2003 | INVALID | N |
| 1 | J7317 | SODIUM HYALURONATE, PER 20 TO 25 | 1/1/2007 | INVALID | N |
| 1 | J7319 | HYALURONAN OR DERIVATIVE, INTRA- | 1/1/2007 | NC | 9 |
| 1 | J7320 | HYLAN G-F 20, 16 MG, FOR INTRA A | 1/1/2007 | INVALID | N |
| 1 | J7330 | AUTOLOGOUS CULTURED CHONDROCYTES | 7/18/2005 | NC | 9 |
| 1 | J7340 | DERMAL AND EPIDERMAL, TISSUE OF | 1/1/2003 | NC | 9 |
| 1 | J7341 | DERMAL TISSUE OF NONHUMAN ORIGIN | 1/1/2007 | $1.82 | 3 |
| 1 | J7342 | DERMAL TISSUE, OF HUMAN ORIGIN, | 10/28/2003 | NC | 9 |
| 1 | J7343 | DERMAL AND EPIDERMAL, TISSUE OF | 1/1/2005 | NC | 9 |
| 1 | J7344 | DERMAL TISSUE, OF HUMAN ORIGIN, | 1/1/2005 | NC | 9 |
| 1 | J7345 | DERMAL TISSUE OF NON-HUMAN ORIGI | 1/1/2007 | NC | 9 |
| 1 | J7346 | DERMAL TISSUE OF HUMAN ORIGIN, I | 1/1/2007 | NC | 9 |
| 1 | J7350 | DERMAL TISSUE OF HUMAN ORIGIN, I | 1/1/2007 | INVALID | N |
| 1 | J7500 | AZATHIOPRINE, ORAL, 50 MG (IMURA | 1/1/2007 | $0.27 | 3 |
| 1 | J7501 | AZATHIOPRINE, PARENTERAL, 100 MG | 1/1/2007 | $49.59 | 3 |
| 1 | J7502 | CYCLOSPORINE, ORAL, 100 MG (NEOR | 1/1/2007 | $3.54 | 3 |
| 1 | J7504 | LYMPHOCYTE IMMUNE GLOBULIN, ANTI | 1/1/2007 | $317.15 | 3 |
| 1 | J7505 | MUROMONAB-CD3, PARENTERAL, 5 MG | 1/1/2007 | $876.83 | 3 |
| 1 | J7506 | PREDNISONE, ORAL, PER 5 MG (LIQU | 7/1/2006 | $0.20 | 3 |
| 1 | J7507 | TACROLIMUS, ORAL, PER 1 MG (PROG | 7/1/2006 | $3.54 | 3 |
| 1 | J7508 | TACROLIMUS, ORAL, PER 5 MG (PROG | 4/1/2004 | INVALID | N |
| 1 | J7509 | METHYLPREDNISOLONE, ORAL, PER 4 | 7/1/2006 | $0.07 | 3 |
| 1 | J7510 | PREDNISOLONE, ORAL, PER 5 MG (DE | 1/1/2007 | $0.09 | 3 |
| 1 | J7511 | LYMPHOCYTE IMMUNE GLOBULIN, ANTI | 1/1/2007 | $331.07 | 3 |
| 1 | J7513 | DACLIZUMAB, PARENTERAL, 25 MG (Z | 1/1/2007 | $314.59 | 3 |
| 1 | J7515 | CYCLOSPORINE, ORAL, 25 MG (NEORA | 1/1/2007 | $0.95 | 3 |
| 1 | J7516 | CYCLOSPORINE, PARENTERAL, 250 MG | 1/1/2007 | $20.64 | 3 |
| 1 | J7517 | MYCOPHENOLATE MOFETIL, ORAL, 250 | 1/1/2007 | $2.55 | 3 |
| 1 | J7518 | MYCOPHENOLIC ACID, ORAL, 180 MG | 1/1/2005 | NC | 9 |
| 1 | J7520 | SIROLIMUS, ORAL, 1 MG (RAPAMUNE) | 1/1/2005 | NC | 9 |
| 1 | J7525 | TACROLIMUS, PARENTERAL, 5 MG (PR | 1/1/2007 | $140.39 | 3 |
| 1 | J7599 | IMMUNOSUPPRESSIVE DRUG, NOT OTHE | 1/1/1996 | NC | 9 |
| 1 | J7607 | LEVALBUTEROL, INHALATION SOLUTIO | 1/1/2007 | NC | 9 |
| 1 | J7608 | ACETYLCYSTEINE, INHALATION SOLUT | 1/1/2007 | $2.40 | 3 |
| 1 | J7609 | ALBUTEROL, INHAL SOL, COMPOUNDED | 1/1/2007 | NC | 9 |
| 1 | J7610 | ALBUTEROL, INAHL SOL, COMPOUNDED | 1/1/2007 | NC | 9 |
| 1 | J7611 | ALBUTEROL, INHALATION SOLUTION, | 1/1/2007 | $0.10 | 3 |
| 1 | J7612 | LEVALBUTEROL, INHALATION SOLUTIO | 1/1/2007 | $0.99 | 3 |
| 1 | J7613 | ALBUTEROL, INHALATION SOLUTION, | 1/1/2007 | $0.07 | 3 |
| 1 | J7614 | LEVALBUTEROL, INHALATION SOLUTIO | 1/1/2007 | $1.39 | 3 |
| 1 | J7615 | LEVALBUTEROL, INHAL SOL, COMPOUN | 1/1/2007 | NC | 9 |
| 1 | J7616 | ALBUTEROL, UP TO 5 MG AND IPRATR | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J7617 | LEVALBUTEROL, UP TO 2.5 MG AND I | 1/1/2006 | INVALID | N |
| 1 | J7618 | ALBUTEROL, ALL FORMULATIONS INCL | 1/1/2005 | INVALID | N |
| 1 | J7619 | ALBUTEROL, ALL FORMULATIONS INCL | 1/1/2005 | INVALID | N |
| 1 | J7620 | ALBUTEROL, UP TO 2.5 MG AND IPRA | 1/1/2007 | $1.05 | 3 |
| 1 | J7621 | ALBUTEROL, ALL FORMULATIONS, INC | 1/1/2005 | INVALID | N |
| 1 | J7622 | BECLOMETHASONE, INHALATION SOLUT | 9/20/2004 | $0.01 | 5 |
| 1 | J7624 | BETAMETHASONE, INHALATION SOLUTI | 1/1/2002 | $0.01 | 5 |
| 1 | J7626 | BUDESONIDE INHALATION SOLUTION, | 1/1/2007 | $4.59 | 3 |
| 1 | J7627 | BUDESONIDE, POWDER, COMPOUNDED F | 1/1/2006 | $0.01 | 5 |
| 1 | J7628 | BITOLTEROL MESYLATE, INHALATION | 2/13/2006 | $0.01 | 5 |
| 1 | J7629 | BITOLTEROL MESYLATE, INHALATION | 1/1/2000 | $0.01 | 5 |
| 1 | J7631 | CROMOLYN SODIUM, INHALATION SOLU | 1/1/2007 | $0.07 | 3 |
| 1 | J7633 | BUDESONIDE, INHALATION SOLUTION | 1/1/2003 | NC | 9 |
| 1 | J7634 | BUDESONIDE, INHAL SOL, COMPOUNDE | 1/1/2007 | NC | 9 |
| 1 | J7635 | ATROPINE, INHALATION SOLUTION AD | 9/20/2004 | $0.01 | 5 |
| 1 | J7636 | ATROPINE, INHALATION SOLUTION AD | 9/20/2004 | $0.01 | 5 |
| 1 | J7637 | DEXAMETHASONE, INHALATION SOLUTI | 9/20/2004 | $0.01 | 5 |
| 1 | J7638 | DEXAMETHASONE, INHALATION SOLUTI | 9/20/2004 | $0.01 | 5 |
| 1 | J7639 | DORNASE ALPHA, INHALATION SOLUTI | 1/1/2007 | $19.86 | 3 |
| 1 | J7640 | FORMOTEROL, INHALATION SOLUTION, | 10/1/2006 | $22.64 | 3 |
| 1 | J7641 | FLUNISOLIDE, INHALATION SOLUTION | 9/20/2004 | $0.01 | 5 |
| 1 | J7642 | GLYCOPYRROLATE, INHALATION SOLUT | 9/20/2004 | $0.01 | 5 |
| 1 | J7643 | GLYCOPYRROLATE, INHALATION SOLUT | 9/20/2004 | $0.01 | 5 |
| 1 | J7644 | IPRATROPIUM BROMIDE, INHALATION | 7/1/2006 | $0.21 | 3 |
| 1 | J7645 | IPRATROPIUM BROMIDE, INHAL SOL, | 1/1/2007 | NC | 9 |
| 1 | J7647 | ISOETHARINE HCL, INHAL SOL, COMP | 1/1/2007 | NC | 9 |
| 1 | J7648 | ISOETHARINE HCL, INHALATION SOLU | 1/2/2001 | $1.83 | 3 |
| 1 | J7649 | ISOETHARINE HCL, INHALATION SOLU | 5/24/2001 | $1.83 | 3 |
| 1 | J7650 | ISOETHARINE HCL, INHAL SOL, COMP | 1/1/2007 | NC | 9 |
| 1 | J7657 | ISOPROTERENOL HCL, INHAL SOL, CO | 1/1/2007 | NC | 9 |
| 1 | J7658 | ISOPROTERENOL HCL, INHALATION SO | 9/20/2004 | $0.01 | 5 |
| 1 | J7659 | ISOPROTERENOL HCL, INHALATION SO | 9/20/2004 | $0.01 | 5 |
| 1 | J7660 | ISOPROTERENOL HCL, INHAL SOL, CO | 1/1/2007 | NC | 9 |
| 1 | J7667 | METAPROTERENOL SULFATE, INHAL SO | 1/1/2007 | NC | 9 |
| 1 | J7668 | METAPROTERENOL SULFATE, INHALATI | 10/10/2005 | $3.14 | 3 |
| 1 | J7669 | METAPROTERENOL SULFATE, INHALATI | 1/1/2007 | $0.24 | 3 |
| 1 | J7670 | METAPROTERENOL SULFATE, INHAL SO | 1/1/2007 | NC | 9 |
| 1 | J7674 | METHACHOLINE CHLORIDE ADMINISTER | 1/1/2007 | $0.42 | 3 |
| 1 | J7680 | TERBUTALINE SULFATE, INHALATION | 9/20/2004 | $0.01 | 5 |
| 1 | J7681 | TERBUTALINE SULFATE, INHALATION | 9/20/2004 | $0.01 | 5 |
| 1 | J7682 | TOBRAMYCIN, UNIT DOSE FORM, 300 | 1/1/2007 | $57.31 | 3 |
| 1 | J7683 | TRIAMCINOLONE, INHALATION SOLUTI | 9/20/2004 | $0.01 | 5 |
| 1 | J7684 | TRIAMCINOLONE, INHALATION SOLUTI | 9/20/2004 | $0.01 | 5 |
| 1 | J7685 | TOBRAMYCIN, INHAL SOL, COMPOUNDE | 1/1/2007 | NC | 9 |
| 1 | J7699 | NOC DRUGS, INHALATION SOLUTION A | 11/1/2004 | $0.01 | 5 |
| 1 | J7799 | NOC DRUGS, OTHER THAN INHALATION | 11/1/2004 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J8498 | ANTIEMETIC DRUG, RECTAL/SUPPOSIT | 1/1/2006 | $0.01 | 5 |
| 1 | J8499 | PRESCRIPTION DRUG, ORAL, NON CHE | 11/1/2004 | $0.01 | 5 |
| 1 | J8501 | APREPITANT, ORAL, 5 MG (EMEND) | 1/1/2007 | $5.04 | 3 |
| 1 | J8510 | BULSULFAN; ORAL, 2 MG (MYLERAN, | 1/1/2006 | NC | 9 |
| 1 | J8515 | CABERGOLINE, ORAL, 0.25 MG (DOST | 1/1/2006 | NC | 9 |
| 1 | J8520 | CAPECITABINE, ORAL, 150 MG (XELO | 1/1/2007 | $3.96 | 3 |
| 1 | J8521 | CAPECITABINE, ORAL, 500 MG (XELO | 1/1/2007 | $13.18 | 3 |
| 1 | J8530 | CYCLOPHOSPHAMIDE; ORAL, 25 MG (C | 1/1/2007 | $0.98 | 3 |
| 1 | J8540 | DEXAMETHASONE, ORAL, 0.25 MG (DE | 1/1/2006 | NC | 9 |
| 1 | J8560 | ETOPOSIDE, ORAL, 50 MG (VEPESID) | 1/1/2007 | $30.54 | 3 |
| 1 | J8565 | GEFITINIB, ORAL, 250 MG | 1/1/2005 | NC | 9 |
| 1 | J8597 | ANTIEMETIC DRUG, ORAL, NOT OTHER | 1/1/2006 | $0.01 | 5 |
| 1 | J8600 | MELPHALAN, ORAL, 2 MG (ALKERAN) | 1/30/2006 | $6.58 | 3 |
| 1 | J8610 | METHOTREXATE, ORAL, 2.5 MG (RHEU | 1/1/2007 | $0.22 | 3 |
| 1 | J8650 | NABILONE, ORAL, 1 MG | 1/1/2007 | NC | 9 |
| 1 | J8700 | TEMOZOLMIDE, ORAL, 5 MG (TEMODAR | 1/1/2007 | $7.42 | 3 |
| 1 | J8999 | PRESCRIPTION DRUG, ORAL, CHEMOTH | 11/1/2004 | $0.01 | 5 |
| 1 | J9000 | DOXORUBICIN HCL, 10 MG (ADRIAMYC | 1/1/2007 | $6.24 | 3 |
| 1 | J9001 | DOXORUBICIN HYDROCHLORIDE, ALL L | 1/1/2007 | $386.08 | 3 |
| 1 | J9010 | ALEMTUZUMAB, 10 MG (CAMPATH) | 1/1/2007 | $541.30 | 3 |
| 1 | J9015 | ALDESLEUKIN, PER SINGLE USE VIAL | 1/1/2007 | $739.52 | 3 |
| 1 | J9017 | ARSENIC TRIOXIDE, 1 MG (TRISENOX | 1/1/2007 | $33.49 | 3 |
| 1 | J9020 | ASPARAGINASE, 10,000 UNITS (ELSP | 1/1/2007 | $54.77 | 3 |
| 1 | J9025 | INJECTION, AZACITIDINE, 1 MG (VI | 1/1/2007 | $4.22 | 3 |
| 1 | J9027 | INJECTION, CLOFARABINE, 1 MG (CL | 1/1/2007 | $116.58 | 3 |
| 1 | J9031 | BCG LIVE (INTRAVESICAL), PER INS | 1/1/2007 | $114.16 | 3 |
| 1 | J9035 | INJECTION, BEVACIZUMAB, 10 MG (A | 1/1/2007 | $57.48 | 3 |
| 1 | J9040 | BLEOMYCIN SULFATE, 15 UNITS (BLE | 1/1/2007 | $33.30 | 3 |
| 1 | J9041 | INJECTION, BORTEZOMIB, .1 MG (VE | 1/1/2007 | $32.68 | 3 |
| 1 | J9045 | CARBOPLATIN, 50 MG (PARAPLATIN) | 1/1/2007 | $8.94 | 3 |
| 1 | J9050 | CARMUSTINE, 100 MG (BICNU) | 1/1/2007 | $139.78 | 3 |
| 1 | J9055 | INJECTION, CETUXIMAB, 10 MG (ERB | 1/1/2007 | $49.83 | 3 |
| 1 | J9060 | CISPLATIN, POWDER OR SOLUTION, P | 1/1/2007 | $2.45 | 3 |
| 1 | J9062 | CISPLATIN, 50 MG (PLATINOL AQ) | 1/1/2007 | $12.26 | 3 |
| 1 | J9065 | INJECTION, CLADRIBINE, PER 1 MG | 1/1/2007 | $37.58 | 3 |
| 1 | J9070 | CYCLOPHOSPHAMIDE, 100 MG (CYTOXA | 1/1/2007 | $1.92 | 3 |
| 1 | J9080 | CYCLOPHOSPHAMIDE, 200 MG (CYTOXA | 1/1/2007 | $3.83 | 3 |
| 1 | J9090 | CYCLOPHOSPHAMIDE, 500 MG (CYTOXA | 1/1/2007 | $15.75 | 3 |
| 1 | J9091 | CYCLOPHOSPHAMIDE, 1 G (CYTOXAN, | 1/1/2007 | $19.17 | 3 |
| 1 | J9092 | CYCLOPHOSPHAMIDE, 2 G (CYTOXAN, | 1/1/2007 | $38.34 | 3 |
| 1 | J9093 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 1 | 1/1/2007 | $1.99 | 3 |
| 1 | J9094 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 2 | 1/1/2007 | $3.97 | 3 |
| 1 | J9095 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 5 | 1/1/2007 | $9.93 | 3 |
| 1 | J9096 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 1 | 1/1/2007 | $17.09 | 3 |
| 1 | J9097 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 2 | 1/1/2007 | $39.71 | 3 |
| 1 | J9098 | CYTARABINE LIPOSOME, 10 MG | 1/1/2007 | $394.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J9100 | CYTARABINE, 100 MG (CYTOSAR-U) | 1/1/2007 | $1.65 | 3 |
| 1 | J9110 | CYTARABINE, 500 MG (CYTOSAR-U) | 1/1/2007 | $8.22 | 3 |
| 1 | J9120 | DACTINOMYCIN, 0.5 MG (COSMEGEN) | 11/1/2006 | $493.43 | 3 |
| 1 | J9130 | DACARBAZINE, 100 MG (DTIC-DOME) | 1/1/2007 | $4.67 | 3 |
| 1 | J9140 | DACARBAZINE, 200 MG (DTIC-DOME) | 1/1/2007 | $9.34 | 3 |
| 1 | J9150 | DAUNORUBICIN HCL, 10 MG (CERUBID | 1/1/2007 | $22.78 | 3 |
| 1 | J9151 | DAUNORUBICIN CITRATE, LIPOSOMAL | 1/1/2007 | $55.92 | 3 |
| 1 | J9160 | DENILEUKIN DIFTITOX, 300 MCG (ON | 1/1/2007 | $1,390.51 | 3 |
| 1 | J9165 | DIETHYLSTILBESTROL DIPHOSPHATE, | 2/13/2006 | $0.01 | 5 |
| 1 | J9170 | DOCETAXEL, 20 MG (TAXOTERE) | 1/1/2007 | $306.13 | 3 |
| 1 | J9175 | INJECTION, ELIOTTS' B SOLUTION, | 1/1/2007 | $3.73 | 3 |
| 1 | J9178 | INJECTION, EPIRUBICIN HCL, 2 MG | 1/1/2007 | $24.60 | 3 |
| 1 | J9180 | EPIRUBICIN HYDROCHLORIDE, 50 MG | 4/1/2004 | INVALID | N |
| 1 | J9181 | ETOPOSIDE, 10 MG (VEPESID, TOPOS | 1/1/2007 | $0.51 | 3 |
| 1 | J9182 | ETOPOSIDE, 100 MG (VEPESID, TOPO | 1/1/2007 | $5.13 | 3 |
| 1 | J9185 | FLUDARABINE PHOSPHATE, 50 MG (FL | 1/1/2007 | $244.05 | 3 |
| 1 | J9190 | FLUOROURACIL, 500 MG (ADRUCIL) | 1/1/2007 | $1.50 | 3 |
| 1 | J9200 | FLOXURIDINE, 500 MG (FUDR) | 1/1/2007 | $58.27 | 3 |
| 1 | J9201 | GEMCITABINE HCL, 200 MG (GEMZAR) | 1/1/2007 | $124.55 | 3 |
| 1 | J9202 | GOSERELIN ACETATE IMPLANT, PER 3 | 1/1/2007 | $200.43 | 3 |
| 1 | J9206 | IRINOTECAN, 20 MG (CAMPTOSAR) | 1/1/2007 | $126.67 | 3 |
| 1 | J9208 | IFOSFAMIDE, PER 1 GM (IFEX) | 1/1/2007 | $49.61 | 3 |
| 1 | J9209 | MESNA, 200 MG (MESNEX) | 1/1/2007 | $8.89 | 3 |
| 1 | J9211 | IDARUBICIN HCL, 5 MG (IDAMYCIN) | 1/1/2007 | $285.38 | 3 |
| 1 | J9212 | INJECTION, INTERFERON ALFACON-1, | 7/1/2006 | $4.65 | 3 |
| 1 | J9213 | INTERFERON ALFA-2A, RECOMBINANT, | 1/1/2007 | $37.29 | 3 |
| 1 | J9214 | INTERFERON ALFA-2B, RECOMBINANT, | 1/1/2007 | $13.82 | 3 |
| 1 | J9215 | INTERFERON ALFA-N3, (HUMAN LEUKO | 2/13/2006 | $0.01 | 5 |
| 1 | J9216 | INTERFERON GAMMA-1B, 3 MILLION U | 7/1/2006 | $289.87 | 3 |
| 1 | J9217 | LEUPROLIDE ACETATE (FOR DEPOT SU | 1/1/2007 | $230.38 | 3 |
| 1 | J9218 | LEUPROLIDE ACETATE, PER 1 MG (LU | 1/1/2007 | $7.23 | 3 |
| 1 | J9219 | LEUPROLIDE ACETATE IMPLANT, 65 M | 1/1/2007 | $1,717.04 | 3 |
| 1 | J9225 | HISTRELIN IMPLANT, 50 MG | 1/1/2007 | $1,597.46 | 3 |
| 1 | J9230 | MECHLORETHAMINE HCL, (NITROGEN M | 11/1/2006 | $141.61 | 3 |
| 1 | J9245 | INJECTION, MELPHALAN HCL, 50 MG | 1/1/2007 | $1,197.78 | 3 |
| 1 | J9250 | METHOTREXATE SODIUM, 5 MG (FOLEX | 1/1/2007 | $0.25 | 3 |
| 1 | J9260 | METHOTREXATE SODIUM, 50 MG (FOLE | 1/1/2007 | $2.59 | 3 |
| 1 | J9261 | INJECTION, NELARABINE, 50 MG | 1/1/2007 | $82.94 | 3 |
| 1 | J9263 | INJECTION, OXALIPLATIN, 0.5 MG | 1/1/2007 | $8.92 | 3 |
| 1 | J9264 | INJECTION, PACLITAXEL PROTEIN-BO | 1/1/2007 | $8.67 | 3 |
| 1 | J9265 | PACLITAXEL, 30 MG (TAXOL) | 1/1/2007 | $12.36 | 3 |
| 1 | J9266 | PEGASPARGASE, PER SINGLE DOSE VI | 1/1/2007 | $1,687.85 | 3 |
| 1 | J9268 | PENTOSTATIN, PER 10 MG (NIPENT) | 1/1/2007 | $1,490.13 | 3 |
| 1 | J9270 | PLICAMYCIN, 2500 MCG (MITHRACIN) | 5/24/2001 | $98.74 | 3 |
| 1 | J9280 | MITOMYCIN, 5 MG (MUTAMYCIN) | 1/1/2007 | $17.13 | 3 |
| 1 | J9290 | MITOMYCIN, 20 MG (MUTAMYCIN) | 1/1/2007 | $68.52 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | J9291 | MITOMYCIN, 40 MG (MUTAMYCIN) | 1/1/2007 | $137.03 | 3 |
| 1 | J9293 | INJECTION, MITOXANTRONE HCL, PER | 1/1/2007 | $162.37 | 3 |
| 1 | J9300 | GEMTUZUMAB OZOGAMICIN, 5 MG (MYL | 1/1/2007 | $2,357.42 | 3 |
| 1 | J9305 | INJECTION, PEMETREXED, 10 MG (AL | 1/1/2007 | $43.68 | 3 |
| 1 | J9310 | RITUXIMAB, 100 MG (RITUXAN) | 1/1/2007 | $486.55 | 3 |
| 1 | J9320 | STREPTOZOCIN, 1 GM (ZANOSAR) | 1/1/2007 | $151.74 | 3 |
| 1 | J9340 | THIOTEPA, 15 MG (THIOPLEX) | 1/1/2007 | $40.61 | 3 |
| 1 | J9350 | TOPOTECAN, 4 MG (HYCAMTIN) | 1/1/2007 | $820.56 | 3 |
| 1 | J9355 | TRASTUZUMAB, 10 MG (HERCEPTIN) | 1/1/2007 | $56.76 | 3 |
| 1 | J9357 | VALRUBICIN, INTRAVESICAL, 200 MG | 2/13/2006 | $0.01 | 5 |
| 1 | J9360 | VINBLASTINE SULFATE, 1 MG (VELBA | 1/1/2007 | $1.22 | 3 |
| 1 | J9370 | VINCRISTINE SULFATE, 1 MG (ONCOV | 1/1/2007 | $7.70 | 3 |
| 1 | J9375 | VINCRISTINE SULFATE 2 MG (ONCOVI | 1/1/2007 | $15.41 | 3 |
| 1 | J9380 | VINCRISTINE SULFATE, 5 MG (ONCOV | 1/1/2007 | $38.52 | 3 |
| 1 | J9390 | VINORELBINE TARTRATE, PER 10 MG | 1/1/2007 | $18.37 | 3 |
| 1 | J9395 | INJECTION, FULVESTRANT, 25 MG | 1/1/2007 | $80.47 | 3 |
| 1 | J9600 | PORFIMER SODIUM, 75 MG, (PHOTOFR | 7/1/2006 | $2,505.40 | 3 |
| 1 | J9999 | NOT OTHERWISE CLASSIFIED, ANTINE | 1/1/2004 | $0.01 | 5 |
| 1 | K0008 | CUSTOM MANUAL WHEELCHAIR/BASE | 1/1/2002 | INVALID | N |
| 1 | K0010 | STANDARD-WEIGHT FRAME MOTORIZED/ | 10/1/2006 | NC | 9 |
| 1 | K0011 | STANDARD-WEIGHT FRAME MOTORIZED/ | 10/1/2006 | NC | 9 |
| 1 | K0012 | LIGHTWEIGHT PORTABLE MOTORIZED/P | 10/1/2006 | NC | 9 |
| 1 | K0013 | CUSTOM MOTORIZED/POWER WHEELCHAI | 4/1/2002 | INVALID | N |
| 1 | K0014 | OTHER MOTORIZED/POWER WHEELCHAIR | 10/1/2006 | NC | 9 |
| 1 | K0016 | DETACHABLE, ADJUSTABLE HEIGHT AR | 4/1/2004 | INVALID | N |
| 1 | K0021 | ANTITIPPING DEVICE, EACH | 7/1/2003 | INVALID | N |
| 1 | K0022 | REINFORCED BACK UPHOLSTERY | 4/1/2004 | INVALID | N |
| 1 | K0023 | SOLID BACK INSERT, PLANAR BACK, | 1/1/2005 | INVALID | N |
| 1 | K0024 | SOLID BACK INSERT, PLANAR BACK, | 1/1/2005 | INVALID | N |
| 1 | K0025 | HOOK-ON HEADREST EXTENSION | 4/1/2004 | INVALID | N |
| 1 | K0026 | BACK UPHOLSTERY FOR ULTRALIGHTWE | 4/1/2004 | INVALID | N |
| 1 | K0027 | BACK UPHOLSTERY FOR WHEELCHAIR T | 4/1/2004 | INVALID | N |
| 1 | K0028 | FULLY RECLINING BACK | 4/1/2004 | INVALID | N |
| 1 | K0029 | REINFORCED SEAT UPHOLSTERY | 4/1/2004 | INVALID | N |
| 1 | K0030 | SOLID SEAT INSERT, PLANAR SEAT, | 4/1/2004 | INVALID | N |
| 1 | K0031 | SAFETY BELT/PELVIC STRAP | 4/1/2004 | INVALID | N |
| 1 | K0032 | SEAT UPHOLSTERY FOR ULTRALIGHTWE | 4/1/2004 | INVALID | N |
| 1 | K0033 | SEAT UPHOLSTERY FOR WHEELCHAIR T | 4/1/2004 | INVALID | N |
| 1 | K0034 | HEEL LOOP, EACH | 7/1/2003 | INVALID | N |
| 1 | K0035 | HEEL LOOP WITH ANKLE STRAP, EACH | 4/1/2004 | INVALID | N |
| 1 | K0036 | TOE LOOP, EACH | 4/1/2004 | INVALID | N |
| 1 | K0048 | ELEVATING LEGREST, COMPLETE ASSE | 4/1/2004 | INVALID | N |
| 1 | K0049 | CALF PAD, EACH | 4/1/2004 | INVALID | N |
| 1 | K0054 | SEAT WIDTH OF 10, 11, 12, 15, 17 | 4/1/2004 | INVALID | N |
| 1 | K0055 | SEAT DEPTH OF 15, 17 OR 18 INCHE | 4/1/2004 | INVALID | N |
| 1 | K0057 | SEAT WIDTH 19 OR 20 INCHES FOR H | 4/1/2004 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | K0058 | SEAT DEPTH 17 OR 18 INCHES FOR A | 4/1/2004 | INVALID | N |
| 1 | K0059 | PLASTIC COATED HANDRIM, EACH | 1/1/2005 | INVALID | N |
| 1 | K0060 | STEEL HANDRIM, EACH | 1/1/2005 | INVALID | N |
| 1 | K0061 | ALUMINUM HANDRIM, EACH | 1/1/2005 | INVALID | N |
| 1 | K0062 | HANDRIM WITH 8 TO 10 VERTICAL OR | 4/1/2004 | INVALID | N |
| 1 | K0063 | HANDRIM WITH 12 TO 16 VERTICAL O | 4/1/2004 | INVALID | N |
| 1 | K0064 | ZERO PRESSURE TUBE (FLAT FREE IN | 1/1/2006 | INVALID | N |
| 1 | K0066 | SOLID TIRE, ANY SIZE, EACH | 1/1/2006 | INVALID | N |
| 1 | K0067 | PNEUMATIC TIRE, ANY SIZE, EACH | 1/1/2006 | INVALID | N |
| 1 | K0068 | PNEUMATIC TIRE TUBE, EACH | 1/1/2006 | INVALID | N |
| 1 | K0074 | PNEUMATIC CASTER TIRE, ANY SIZE, | 1/1/2006 | INVALID | N |
| 1 | K0075 | SEMIPNEUMATIC CASTER TIRE, ANY S | 1/1/2006 | INVALID | N |
| 1 | K0076 | SOLID CASTER TIRE, ANY SIZE, EAC | 1/1/2006 | INVALID | N |
| 1 | K0078 | PNEUMATIC CASTER TIRE TUBE, EACH | 1/1/2006 | INVALID | N |
| 1 | K0079 | WHEEL LOCK EXTENSION, PAIR | 4/1/2004 | INVALID | N |
| 1 | K0080 | ANTIROLLBACK DEVICE, PAIR | 4/1/2004 | INVALID | N |
| 1 | K0081 | WHEEL LOCK ASSEMBLY, COMPLETE, E | 1/1/2005 | INVALID | N |
| 1 | K0082 | 22 NF NON-SEALED LEAD ACID BATTE | 4/1/2004 | INVALID | N |
| 1 | K0083 | 22 NF SEALED LEAD ACID BATTERY, | 4/1/2004 | INVALID | N |
| 1 | K0084 | GROUP 24 NON-SEALED LEAD ACID BA | 4/1/2004 | INVALID | N |
| 1 | K0085 | GROUP 24 SEALED LEAD ACID BATTER | 4/1/2004 | INVALID | N |
| 1 | K0086 | U-1 NON-SEALED LEAD ACID BATTERY | 4/1/2004 | INVALID | N |
| 1 | K0087 | U-1 SEALED LEAD ACID BATTERY, EA | 4/1/2004 | INVALID | N |
| 1 | K0088 | BATTERY CHARGER, SINGLE MODE, FO | 4/1/2004 | INVALID | N |
| 1 | K0089 | BATTERY CHARGER, DUAL MODE, FOR | 4/1/2004 | INVALID | N |
| 1 | K0090 | REAR WHEEL TIRE FOR POWER WHEELC | 1/1/2007 | INVALID | N |
| 1 | K0091 | REAR WHEEL TIRE TUBE OTHER THAN | 1/1/2007 | INVALID | N |
| 1 | K0092 | REAR WHEEL ASSEMBLY FOR POWER WH | 1/1/2007 | INVALID | N |
| 1 | K0093 | REAR WHEEL ZERO PRESSURE TIRE TU | 1/1/2007 | INVALID | N |
| 1 | K0094 | WHEEL TIRE FOR POWER BASE, ANY S | 1/1/2007 | INVALID | N |
| 1 | K0095 | WHEEL TIRE TUBE OTHER THAN ZERO | 1/1/2007 | INVALID | N |
| 1 | K0096 | WHEEL ASSEMBLY FOR POWER BASE, C | 1/1/2007 | INVALID | N |
| 1 | K0097 | WHEEL ZERO PRESSURE TIRE TUBE (F | 1/1/2007 | INVALID | N |
| 1 | K0099 | FRONT CASTER FOR POWER WHEELCHAI | 1/1/2007 | INVALID | N |
| 1 | K0100 | AMPUTEE ADAPTER, PAIR | 4/1/2004 | INVALID | N |
| 1 | K0101 | ONE-ARM DRIVE ATTACHMENT | 7/1/2003 | INVALID | N |
| 1 | K0102 | CRUTCH AND CANE HOLDER, EACH | 1/1/2006 | INVALID | N |
| 1 | K0103 | TRANSFER BOARD, LESS THAN 25 INC | 4/1/2004 | INVALID | N |
| 1 | K0104 | CYLINDER TANK CARRIER, EACH | 1/1/2006 | INVALID | N |
| 1 | K0106 | ARM TROUGHT, EACH | 1/1/2006 | INVALID | N |
| 1 | K0107 | WHEELCHAIR TRAY | 4/1/2004 | INVALID | N |
| 1 | K0112 | TRUNK SUPPORT DEVICE, VEST TYPE, | 4/1/2004 | INVALID | N |
| 1 | K0113 | TRUNK SUPPORT DEVICE, VEST TYPE, | 4/1/2004 | INVALID | N |
| 1 | K0114 | BACK SUPPORT SYSTEM FOR USE WITH | 1/1/2005 | INVALID | N |
| 1 | K0115 | ORTHOTIC SEATING SYSTEM, BACK MO | 1/1/2005 | INVALID | N |
| 1 | K0116 | ORTHOTIC SEATING SYSTEM, COMBINE | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | K0415 | PRESCRIPTION ANTIEMETIC DRUG, OR | 1/1/2006 | INVALID | N |
| 1 | K0416 | PRESCRIPTION ANTIEMETIC DRUG, RE | 1/1/2006 | INVALID | N |
| 1 | K0548 | INJECTION, INSULIN LISPRO, UP TO | 1/1/2004 | INVALID | N |
| 1 | K0628 | FOR DIABETICS ONLY, MULTIPLE DEN | 1/1/2006 | INVALID | N |
| 1 | K0629 | FOR DIABETICS ONLY, MULT DENSITY | 1/1/2006 | INVALID | N |
| 1 | K0637 | LUMBAR-SACRAL ORTHOSIS, FLEXIBLE | 9/3/2005 | $54.43 | 3 |
| 1 | K0730 | CONTROLLED DOSE INHALATION DRUG | 1/1/2006 | NC | 9 |
| 1 | L0100 | CRANIAL ORTHOSIS (HELMET), WITH | 1/1/2007 | INVALID | N |
| 1 | L0110 | CRANIAL ORTHOSIS (HELMET), WITH | 1/1/2007 | INVALID | N |
| 1 | L0120 | CERVICAL, FLEXIBLE, NONADJUSTABL | 10/1/2006 | $23.94 | 3 |
| 1 | L0130 | CERVICAL, FLEXIBLE, THERMOPLASTI | 10/1/2006 | $133.18 | 3 |
| 1 | L0140 | CERVICAL, SEMI-RIGID, ADJUSTABLE | 10/1/2006 | $57.75 | 3 |
| 1 | L0150 | CERVICAL, SEMI-RIGID, ADJUSTABLE | 10/1/2006 | $76.91 | 3 |
| 1 | L0160 | CERVICAL, SEMI-RIGID, WIRE FRAME | 10/1/2006 | $105.98 | 3 |
| 1 | L0170 | CERVICAL COLLAR, MOLDED TO PATIE | 10/1/2006 | $514.04 | 3 |
| 1 | L0172 | CERVICAL COLLAR, SEMI-RIGID THER | 10/1/2006 | $92.77 | 3 |
| 1 | L0174 | CERVICAL COLLAR, SEMI-RIGID, THE | 10/1/2006 | $195.33 | 3 |
| 1 | L0180 | CERVICAL, MULTIPLE POST COLLAR, | 10/1/2006 | $284.79 | 3 |
| 1 | L0190 | CERVICAL, MULTIPLE POST COLLAR, | 10/1/2006 | $400.66 | 3 |
| 1 | L0200 | CERVICAL, MULTIPLE POST COLLAR, | 10/1/2006 | $447.40 | 3 |
| 1 | L0210 | THORACIC RIB BELT, CUSTOM FITTED | 10/1/2006 | $29.95 | 3 |
| 1 | L0220 | THORACIC RIB BELT, CUSTOM FABRIC | 10/1/2006 | $89.14 | 3 |
| 1 | L0300 | THORACIC-LUMBAR-SACRAL-ORTHOSIS | 7/1/2003 | INVALID | N |
| 1 | L0310 | TLSO, FLEXIBLE (DORSO-LUMBAR SUR | 7/1/2003 | INVALID | N |
| 1 | L0315 | TLSO, FLEXIBLE (DORSO-LUMBAR SUR | 7/1/2003 | INVALID | N |
| 1 | L0317 | TLSO, FLEXIBLE (DORSO-LUMBAR SUR | 7/1/2003 | INVALID | N |
| 1 | L0320 | TLSO, ANTERIOR-POSTERIOR CONTROL | 7/1/2003 | INVALID | N |
| 1 | L0330 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0340 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0350 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0360 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0370 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0380 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0390 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0400 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0410 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0420 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0440 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| 1 | L0491 | TLSO, SAGITTAL-CORONAL CONTROL, | 10/1/2006 | $603.47 | 3 |
| 1 | L0492 | TLSO, SAGITTAL-CORONAL CONTROL, | 10/1/2006 | $396.93 | 3 |
| 1 | L0500 | LUMBAR-SACRAL-ORTHOSIS (LSO), FL | 1/1/2005 | INVALID | N |
| 1 | L0510 | LSO, FLEXIBLE (LUMBO-SACRAL SUPP | 1/1/2005 | INVALID | N |
| 1 | L0515 | LSO, ANTERIOR-POSTERIOR CONTROL, | 1/1/2005 | INVALID | N |
| 1 | L0520 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| 1 | L0530 | LSO, ANTERIOR-POSTERIOR CONTROL | 1/1/2005 | INVALID | N |
| 1 | L0540 | LSO, LUMBAR FLEXION (WILLIAMS FL | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L0550 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| 1 | L0560 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| 1 | L0565 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| 1 | L0600 | SACROILIAC, FLEXIBLE (SACROILIAC | 1/1/2005 | INVALID | N |
| 1 | L0610 | SACROILIAC, FLEXIBLE (SACROILIAC | 1/1/2005 | INVALID | N |
| 1 | L0620 | SACROILIAC, SEMI-RIGID (GOLDTHWA | 1/1/2005 | INVALID | N |
| 1 | L0621 | SACROILIAC ORTHOSIS, FLEXIBLE, P | 10/1/2006 | $90.97 | 3 |
| 1 | L0625 | LUMBAR ORTHOSIS, FLEXIBLE, PROVI | 10/1/2006 | $43.27 | 3 |
| 1 | L0626 | LUMBAR ORTHOSIS, SAGITTAL CONTRO | 10/1/2006 | $61.25 | 3 |
| 1 | L0627 | LUMBAR ORTHOSIS, SAGITTAL CONTRO | 10/1/2006 | $322.98 | 3 |
| 1 | L0628 | LUMBAR-SACRAL ORTHOSIS, FLEXIBLE | 10/1/2006 | $65.92 | 3 |
| 1 | L0630 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $127.26 | 3 |
| 1 | L0633 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $225.31 | 3 |
| 1 | L0635 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | $0.01 | 5 |
| 1 | L0637 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $731.26 | 3 |
| 1 | L0700 | CTLSO, ANTERIOR-POSTERIOR-LATERA | 10/1/2006 | $1,367.92 | 3 |
| 1 | L0710 | CTLSO, ANTERIOR-POSTERIOR-LATERA | 10/1/2006 | $1,545.06 | 3 |
| 1 | L0810 | HALO PROCEDURE, CERVICAL HALO IN | 10/1/2006 | $1,860.35 | 3 |
| 1 | L0820 | HALO PROCEDURE, CERVICAL HALO IN | 10/1/2006 | $1,827.01 | 3 |
| 1 | L0830 | HALO PROCEDURE, CERVICAL HALO IN | 10/1/2006 | $2,562.63 | 3 |
| 1 | L0860 | ADDITION TO HALO PROCEDURE, MAGN | 1/1/2006 | INVALID | N |
| 1 | L0900 | TORSO SUPPORT, PTOSIS SUPPORT | 7/1/2003 | INVALID | N |
| 1 | L0910 | TORSO SUPPORT, PTOSIS SUPPORT, C | 7/1/2003 | INVALID | N |
| 1 | L0920 | TORSO SUPPORT, PENDULOUS ABDOMEN | 7/1/2003 | INVALID | N |
| 1 | L0930 | TORSO SUPPORT, PENDULOUS ABDOMEN | 7/1/2003 | INVALID | N |
| 1 | L0940 | TORSO SUPPORT, POSTSURGICAL SUPP | 7/1/2003 | INVALID | N |
| 1 | L0950 | TORSO SUPPORT, POSTSURGICAL SUPP | 7/1/2003 | INVALID | N |
| 1 | L0960 | TORSO SUPPORT, POSTSURGICAL SUPP | 10/1/2006 | $48.26 | 3 |
| 1 | L0970 | TLSO, CORSET FRONT | 10/1/2006 | $77.34 | 3 |
| 1 | L0972 | LSO, CORSET FRONT | 10/1/2006 | $69.65 | 3 |
| 1 | L0974 | TLSO, FULL CORSET | 10/1/2006 | $125.33 | 3 |
| 1 | L0976 | LSO, FULL CORSET | 10/1/2006 | $132.46 | 3 |
| 1 | L0978 | AXILLARY CRUTCH EXTENSION | 10/1/2006 | $138.85 | 3 |
| 1 | L0980 | PERONEALK STRAPS, PAIR | 10/1/2006 | $12.56 | 3 |
| 1 | L0982 | STOCKING SUPPORTER GRIPS, SET OF | 10/1/2006 | $11.72 | 3 |
| 1 | L0984 | PROTECTIVE BODY SOCK, EACH | 10/1/2006 | $46.26 | 3 |
| 1 | L1000 | CTLSO, INCLUSIVE OF FURNISHING I | 10/1/2006 | $1,645.26 | 3 |
| 1 | L1010 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $47.10 | 3 |
| 1 | L1020 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $69.07 | 3 |
| 1 | L1025 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $84.37 | 3 |
| 1 | L1030 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $44.20 | 3 |
| 1 | L1040 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $65.30 | 3 |
| 1 | L1050 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $69.35 | 3 |
| 1 | L1060 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $76.26 | 3 |
| 1 | L1070 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $68.90 | 3 |
| 1 | L1080 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $42.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L1085 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $111.19 | 3 |
| 1 | L1090 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $67.24 | 3 |
| 1 | L1100 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $122.21 | 3 |
| 1 | L1110 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $202.24 | 3 |
| 1 | L1120 | ADDITION TO CTLSO, SCOLIOSIS ORT | 10/1/2006 | $33.26 | 3 |
| 1 | L1200 | TLSO, INCLUSIVE OF FURNISHING IN | 10/1/2006 | $1,413.53 | 3 |
| 1 | L1210 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $177.04 | 3 |
| 1 | L1220 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $183.36 | 3 |
| 1 | L1230 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $384.63 | 3 |
| 1 | L1240 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $56.16 | 3 |
| 1 | L1250 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $51.37 | 3 |
| 1 | L1260 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $54.21 | 3 |
| 1 | L1270 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $52.43 | 3 |
| 1 | L1280 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $60.72 | 3 |
| 1 | L1290 | ADDITION TO TLSO, (LOW PROFILE), | 10/1/2006 | $54.33 | 3 |
| 1 | L1300 | OTHER SCOLIOSIS PROCEDURE, BODY | 10/1/2006 | $1,143.00 | 3 |
| 1 | L1310 | OTHER SCOLIOSIS PROCEDURE, POSTO | 10/1/2006 | $1,083.44 | 3 |
| 1 | L1499 | UNLISTED PROCEDURE FOR SPINAL OR | 3/1/2004 | $900.00 | 3 |
| 1 | L1500 | THKAO, MOBILITY FRAME (NEWINGTON | 10/1/2006 | $1,501.25 | 3 |
| 1 | L1510 | THKAO, STANDING FRAME, WITH OR W | 10/1/2006 | $956.32 | 3 |
| 1 | L1520 | THKAO, SWIVEL WALKER | 10/1/2006 | $1,866.88 | 3 |
| 1 | L1600 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $87.19 | 3 |
| 1 | L1610 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $29.70 | 3 |
| 1 | L1620 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $95.51 | 3 |
| 1 | L1630 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $123.84 | 3 |
| 1 | L1640 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $326.60 | 3 |
| 1 | L1650 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $156.65 | 3 |
| 1 | L1660 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $125.48 | 3 |
| 1 | L1680 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $1,099.21 | 3 |
| 1 | L1685 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $804.83 | 3 |
| 1 | L1686 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $625.85 | 3 |
| 1 | L1690 | COMBINATION, BILATERAL, LUMBO-SA | 10/1/2006 | $1,365.78 | 3 |
| 1 | L1700 | LEGG PERTHES ORTHOSIS, (TORONTO | 10/1/2006 | $1,111.27 | 3 |
| 1 | L1710 | LEGG PERTHES ORTHOSIS, (NEWINGTO | 10/1/2006 | $1,344.53 | 3 |
| 1 | L1720 | LEGG PERTHES ORTHOSIS, TRILATERA | 10/1/2006 | $937.93 | 3 |
| 1 | L1730 | LEGG PERTHES ORTHOSIS, (SCOTTISH | 10/1/2006 | $800.26 | 3 |
| 1 | L1750 | LEGG PERTHES ORTHOSIS, LEGG PERT | 1/1/2006 | INVALID | N |
| 1 | L1755 | LEGG PERTHES ORTHOSIS, (PATTEN B | 10/1/2006 | $1,071.25 | 3 |
| 1 | L1800 | KNEE ORTHOSIS, ELASTIC WITH STAY | 10/1/2006 | $45.68 | 3 |
| 1 | L1810 | KNEE ORTHOSIS, ELASTIC WITH JOIN | 10/1/2006 | $77.14 | 3 |
| 1 | L1815 | KNEE ORTHOSIS, ELASTIC OR OTHER | 10/1/2006 | $79.53 | 3 |
| 1 | L1820 | KO, ELASTIC W/CONDYLAR PADS AND | 10/1/2006 | $97.60 | 3 |
| 1 | L1825 | KNEE ORTHOSIS, ELASTIC KNEE CAP, | 10/1/2006 | $43.46 | 3 |
| 1 | L1830 | KNEE ORTHOSIS, IMMOBILIZER, CANV | 10/1/2006 | $75.65 | 3 |
| 1 | L1832 | KNEE ORTHOSIS, ADJUSTABLE KNEE J | 10/1/2006 | $411.36 | 3 |
| 1 | L1834 | KNEE ORTHOSIS, WITHOUT KNEE JOIN | 10/1/2006 | $525.23 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L1840 | KNEE ORTHOSIS, DEROTATION, MEDIA | 10/1/2006 | $719.66 | 3 |
| 1 | L1843 | KNEE ORTHOSIS, SINGLE UPRIGHT, T | 10/1/2006 | $633.73 | 3 |
| 1 | L1844 | KNEE ORTHOSIS, SINGLE UPRIGHT, T | 1/1/1994 | NC | 9 |
| 1 | L1845 | KNEE ORTHOSIS, DOUBLE UPRIGHT, T | 10/1/2006 | $574.35 | 3 |
| 1 | L1846 | KNEE ORTHOSIS, DOUBLE UPRIGHT, T | 10/1/2006 | $892.23 | 3 |
| 1 | L1847 | KNEE ORTHOSIS, DOUBLE UPRIGHT WI | 10/1/2006 | $406.22 | 3 |
| 1 | L1850 | KNEE ORTHOSIS, SWEDISH TYPE, PRE | 10/1/2006 | $217.49 | 3 |
| 1 | L1855 | KNEE ORTHOSIS, MOLDED PLASTIC, T | 10/1/2006 | $776.66 | 3 |
| 1 | L1858 | KNEE ORTHOSIS, MOLDED PLASTIC, P | 10/1/2006 | $898.48 | 3 |
| 1 | L1860 | KNEE ORTHOSIS, MODIFICATION OF S | 10/1/2006 | $887.70 | 3 |
| 1 | L1870 | KNEE ORTHOSIS, DOUBLE UPRIGHT, T | 10/1/2006 | $787.65 | 3 |
| 1 | L1880 | KNEE ORTHOSIS, DOUBLE UPRIGHT, N | 10/1/2006 | $638.54 | 3 |
| 1 | L1885 | KNEE ORTHOSIS, SINGLE OR DOUBLE | 4/1/2004 | INVALID | N |
| 1 | L1900 | ANKLE FOOT ORTHOSIS, SPRING WIRE | 10/1/2006 | $201.25 | 3 |
| 1 | L1902 | ANKLE FOOT ORTHOSIS, ANKLE GAUNT | 10/1/2006 | $66.23 | 3 |
| 1 | L1904 | ANKLE FOOT ORTHOSIS, MOLDED ANKL | 10/1/2006 | $318.18 | 3 |
| 1 | L1906 | ANKLE FOOT ORTHOSIS, MULTILIGAME | 10/1/2006 | $81.37 | 3 |
| 1 | L1910 | ANKLE FOOT ORTHOSIS, POSTERIOR, | 10/1/2006 | $228.88 | 3 |
| 1 | L1920 | ANKLE FOOT ORTHOSIS, SINGLE UPRI | 10/1/2006 | $303.18 | 3 |
| 1 | L1930 | ANKLE FOOT ORTHOSIS, PLASTIC OR | 10/1/2006 | $186.93 | 3 |
| 1 | L1940 | ANKLE FOOT ORTHOSIS, PLASTIC OR | 10/1/2006 | $359.47 | 3 |
| 1 | L1945 | ANKLE FOOT ORTHOSIS, PLASTIC, RI | 10/1/2006 | $706.77 | 3 |
| 1 | L1950 | ANKLE FOOT ORTHOSIS, SPIRAL, (IR | 10/1/2006 | $671.97 | 3 |
| 1 | L1960 | ANKLE FOOT ORTHOSIS, POSTERIOR S | 10/1/2006 | $375.05 | 3 |
| 1 | L1970 | ANKLE FOOT ORTHOSIS, PLASTIC WIT | 10/1/2006 | $500.49 | 3 |
| 1 | L1980 | ANKLE FOOT ORTHOSIS, SINGLE UPRI | 10/1/2006 | $317.59 | 3 |
| 1 | L1990 | ANKLE FOOT ORTHOSIS, DOUBLE UPRI | 10/1/2006 | $383.76 | 3 |
| 1 | L2000 | KNEE ANKLE FOOT ORTHOSIS, SINGLE | 10/1/2006 | $943.88 | 3 |
| 1 | L2010 | KNEE ANKLE FOOT ORTHOSIS, SINGLE | 10/1/2006 | $826.02 | 3 |
| 1 | L2020 | KNEE ANKLE FOOT ORTHOSIS, DOUBLE | 10/1/2006 | $1,053.40 | 3 |
| 1 | L2030 | KNEE ANKLE FOOT ORTHOSIS, DOUBLE | 10/1/2006 | $907.21 | 3 |
| 1 | L2035 | KAFO, FULL PLASTIC, STATIC (PED | 10/1/2006 | $127.11 | 3 |
| 1 | L2036 | KNEE ANKLE FOOT ORTHOSIS, FULL P | 10/1/2006 | $1,619.46 | 3 |
| 1 | L2037 | KNEE ANKLE FOOT ORTHOSIS, FULL P | 10/1/2006 | $1,336.04 | 3 |
| 1 | L2038 | KNEE ANKLE FOOT ORTHOSIS, FULL P | 10/1/2006 | $1,125.49 | 3 |
| 1 | L2039 | KAFO, FULL PLASTIC, SINGLE UPRIG | 1/1/2006 | INVALID | N |
| 1 | L2040 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $154.60 | 3 |
| 1 | L2050 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $326.88 | 3 |
| 1 | L2060 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $462.83 | 3 |
| 1 | L2070 | HIP KNEE ANKLE FOOT ORHTOSIS, TO | 10/1/2006 | $91.00 | 3 |
| 1 | L2080 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $280.54 | 3 |
| 1 | L2090 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $395.59 | 3 |
| 1 | L2102 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 4/1/2004 | INVALID | N |
| 1 | L2104 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 4/1/2004 | INVALID | N |
| 1 | L2106 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $474.20 | 3 |
| 1 | L2108 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $810.84 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L2112 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $327.31 | 3 |
| 1 | L2114 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $401.63 | 3 |
| 1 | L2116 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $481.69 | 3 |
| 1 | L2122 | KNEE ANKLE FOOT ORTHOSIS, FRACTU | 4/1/2004 | INVALID | N |
| 1 | L2124 | KNEE ANKLE FOOT ORTHOSIS, FRACTU | 4/1/2004 | INVALID | N |
| 1 | L2126 | KNEE ANKLE FOOT ORTHOSIS, FRACTU | 10/1/2006 | $810.23 | 3 |
| 1 | L2128 | KNEE ANKLE FOOT ORTHOSIS, FRACTU | 10/1/2006 | $1,546.96 | 3 |
| 1 | L2132 | KAFO, FRACTURE ORTHOSIS, FEMORAL | 10/1/2006 | $545.81 | 3 |
| 1 | L2134 | KAFO, FRACTURE ORTHOSIS, FEMORAL | 10/1/2006 | $684.34 | 3 |
| 1 | L2136 | KAFO, FRACTURE ORTHOSIS, FEMORAL | 10/1/2006 | $800.16 | 3 |
| 1 | L2180 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $79.24 | 3 |
| 1 | L2182 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $72.92 | 3 |
| 1 | L2184 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $83.81 | 3 |
| 1 | L2186 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $117.28 | 3 |
| 1 | L2188 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $219.58 | 3 |
| 1 | L2190 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $59.09 | 3 |
| 1 | L2192 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $241.26 | 3 |
| 1 | L2200 | ADDITION TO LOWER EXTREMITY, LIM | 10/1/2006 | $42.90 | 3 |
| 1 | L2210 | ADDITION TO LOWER EXTREMITY, DOR | 10/1/2006 | $47.67 | 3 |
| 1 | L2220 | ADDITION TO LOWER EXTREMITY, DOR | 10/1/2006 | $65.49 | 3 |
| 1 | L2230 | ADDITION TO LOWER EXTREMITY, SPL | 10/1/2006 | $63.75 | 3 |
| 1 | L2240 | ADDITION TO LOWER EXTREMITY, ROU | 10/1/2006 | $57.13 | 3 |
| 1 | L2250 | ADDITION TO LOWER EXTREMITY, FOO | 10/1/2006 | $320.56 | 3 |
| 1 | L2260 | ADDITION TO LOWER EXTREMITY, REI | 10/1/2006 | $135.63 | 3 |
| 1 | L2265 | ADDITION TO LOWER EXTREMITY, LON | 10/1/2006 | $79.68 | 3 |
| 1 | L2270 | ADDITION TO LOWER EXTREMITY, VAR | 10/1/2006 | $48.45 | 3 |
| 1 | L2275 | ADDITION TO LOWER EXTREMITY, VAR | 10/1/2006 | $105.83 | 3 |
| 1 | L2280 | ADDITION TO LOWER EXTREMITY, MOL | 10/1/2006 | $306.85 | 3 |
| 1 | L2300 | ADDITION TO LOWER EXTREMITY, ABD | 10/1/2006 | $227.13 | 3 |
| 1 | L2310 | ADDITION TO LOWER EXTREMITY, ABD | 10/1/2006 | $110.97 | 3 |
| 1 | L2320 | ADDITION TO LOWER EXTREMITY, NON | 10/1/2006 | $177.84 | 3 |
| 1 | L2330 | ADDITION TO LOWER EXTREMITY, LAC | 10/1/2006 | $314.32 | 3 |
| 1 | L2335 | ADDITION TO LOWER EXTREMITY, ANT | 10/1/2006 | $168.28 | 3 |
| 1 | L2340 | ADDITION TO LOWER EXTREMITY, PRE | 10/1/2006 | $373.43 | 3 |
| 1 | L2350 | ADDITION TO LOWER EXTREMITY, PRO | 10/1/2006 | $680.17 | 3 |
| 1 | L2360 | ADDITION TO LOWER EXTREMITY, EXT | 10/1/2006 | $46.68 | 3 |
| 1 | L2370 | ADDITION TO LOWER EXTREMITY, PAT | 10/1/2006 | $185.60 | 3 |
| 1 | L2375 | ADDITION TO LOWER EXTREMITY, TOR | 10/1/2006 | $76.46 | 3 |
| 1 | L2380 | ADDITION TO LOWER EXTREMITY, TOR | 10/1/2006 | $84.81 | 3 |
| 1 | L2385 | ADDITION TO LOWER EXTREMITY, STR | 10/1/2006 | $90.61 | 3 |
| 1 | L2390 | ADDITION TO LOWER EXTREMITY, OFF | 10/1/2006 | $74.06 | 3 |
| 1 | L2395 | ADDITION TO LOWER EXTREMITY, OFF | 10/1/2006 | $105.86 | 3 |
| 1 | L2397 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $89.42 | 3 |
| 1 | L2405 | ADDITION TO KNEE JOINT, DROP LOC | 10/1/2006 | $37.30 | 3 |
| 1 | L2415 | ADDITION TO KNEE LOCK W/INTEGRAT | 10/1/2006 | $95.43 | 3 |
| 1 | L2425 | ADDITION TO KNEE JOINT, DISC OR | 10/1/2006 | $112.64 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L2430 | ADDITION TO KNEE JOINT, RATCHET | 10/1/2006 | $69.44 | 3 |
| 1 | L2435 | ADDITION TO KNEE JOINT, POLYCENT | 1/1/2005 | INVALID | N |
| 1 | L2492 | ADDITION TO KNEE JOINT, LIFT LOO | 10/1/2006 | $71.55 | 3 |
| 1 | L2500 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $229.19 | 3 |
| 1 | L2510 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $559.07 | 3 |
| 1 | L2520 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $329.37 | 3 |
| 1 | L2525 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $877.99 | 3 |
| 1 | L2526 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $617.93 | 3 |
| 1 | L2530 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $165.99 | 3 |
| 1 | L2540 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $360.82 | 3 |
| 1 | L2550 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $212.03 | 3 |
| 1 | L2570 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $332.01 | 3 |
| 1 | L2580 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $371.13 | 3 |
| 1 | L2600 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $160.96 | 3 |
| 1 | L2610 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $193.98 | 3 |
| 1 | L2620 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $212.81 | 3 |
| 1 | L2622 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $207.50 | 3 |
| 1 | L2624 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $224.06 | 3 |
| 1 | L2627 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $1,159.92 | 3 |
| 1 | L2628 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $1,511.46 | 3 |
| 1 | L2630 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $176.99 | 3 |
| 1 | L2640 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $275.83 | 3 |
| 1 | L2650 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $108.27 | 3 |
| 1 | L2660 | ADDITION TO LOWER EXTREMITY, THO | 10/1/2006 | $126.10 | 3 |
| 1 | L2670 | ADDITION TO LOWER EXTREMITY, THO | 10/1/2006 | $119.34 | 3 |
| 1 | L2680 | ADDITION TO LOWER EXTREMITY, THO | 10/1/2006 | $105.88 | 3 |
| 1 | L2750 | ADDITION TO LOWER EXTREMITY ORTH | 1/1/1994 | NC | 9 |
| 1 | L2755 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $92.28 | 3 |
| 1 | L2760 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $41.97 | 3 |
| 1 | L2770 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $41.77 | 3 |
| 1 | L2780 | ADDITION TO LOWER EXTREMITY ORTH | 1/1/1994 | NC | 9 |
| 1 | L2785 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $23.67 | 3 |
| 1 | L2795 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $71.28 | 3 |
| 1 | L2800 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $82.73 | 3 |
| 1 | L2810 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $52.84 | 3 |
| 1 | L2820 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $58.76 | 3 |
| 1 | L2830 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $63.57 | 3 |
| 1 | L2840 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $29.56 | 3 |
| 1 | L2850 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $41.90 | 3 |
| 1 | L2860 | ADDITION TO LOWER EXTREMITY JOIN | 10/1/2005 | $219.75 | 3 |
| 1 | L2999 | LOWER LIMB ORTHOSES, NOT OTHERWI | 10/1/2005 | $5,572.80 | 3 |
| 1 | L3000 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $200.43 | 3 |
| 1 | L3001 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $84.40 | 3 |
| 1 | L3002 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $103.05 | 3 |
| 1 | L3003 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $111.17 | 3 |
| 1 | L3010 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $111.17 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L3020 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $126.58 | 3 |
| 1 | L3030 | FOOT INSERT, REMOVABLE, FORMED T | 10/1/2006 | $48.69 | 3 |
| 1 | L3040 | FOOT, ARCH SUPPORT, REMOVABLE, P | 10/1/2006 | $30.02 | 3 |
| 1 | L3050 | FOOT, ARCH SUPPORT, REMOVABLE, P | 10/1/2006 | $30.02 | 3 |
| 1 | L3060 | FOOT, ARCH SUPPORT, REMOVABLE, P | 10/1/2006 | $47.05 | 3 |
| 1 | L3070 | FOOT, ARCH SUPPORT, NONREMOVABLE | 10/1/2006 | $20.30 | 3 |
| 1 | L3080 | FOOT, ARCH SUPPORT, NONREMOVABLE | 10/1/2006 | $20.30 | 3 |
| 1 | L3090 | FOOT, ARCH SUPPORT, NONREMOVABLE | 10/1/2006 | $25.98 | 3 |
| 1 | L3100 | HALLUS-VALGUS NIGHT DYNAMIC SPLI | 10/1/2006 | $27.59 | 3 |
| 1 | L3140 | FOOT, ROTATION POSITIONING DEVIC | 10/1/2006 | $56.80 | 3 |
| 1 | L3150 | FOOT, ABDUCTION ROTATION BAR, WI | 10/1/2006 | $51.95 | 3 |
| 1 | L3160 | FOOT, ADJUSTABLE SHOE-STYLED POS | 10/1/2005 | $20.09 | 3 |
| 1 | L3170 | FOOT, PLASTIC, SILICONE OR EQUAL | 10/1/2006 | $32.46 | 3 |
| 1 | L3201 | ORTHOPEDIC SHOE, OXFORD WITH SUP | 10/1/2005 | $45.20 | 3 |
| 1 | L3202 | ORTHOPEDIC SHOE, OXFORD WITH SUP | 10/1/2005 | $45.20 | 3 |
| 1 | L3203 | ORTHOPEDIC SHOE, OXFORD WITH SUP | 10/1/2005 | $50.23 | 3 |
| 1 | L3204 | ORTHOPEDIC SHOE, HIGHTOP WITH SU | 10/1/2005 | $45.20 | 3 |
| 1 | L3206 | ORTHOPEDIC SHOE, HIGHTOP WITH SU | 10/1/2005 | $50.23 | 3 |
| 1 | L3207 | ORTHOPEDIC SHOE, HIGHTOP WITH SU | 10/1/2005 | $50.23 | 3 |
| 1 | L3208 | SURGICAL BOOT, EACH, INFANT | 10/1/2005 | $35.16 | 3 |
| 1 | L3209 | SURGICAL BOOT, EACH, CHILD | 10/1/2005 | $35.16 | 3 |
| 1 | L3211 | SURGICAL BOOT, EACH, JUNIOR | 10/1/2005 | $40.18 | 3 |
| 1 | L3212 | BENESCH BOOT, PAIR, INFANT | 10/1/2005 | $45.20 | 3 |
| 1 | L3213 | BENESCH BOOT, PAIR, CHILD | 10/1/2005 | $45.20 | 3 |
| 1 | L3214 | BENESCH BOOT, PAIR, JUNIOR | 10/1/2005 | $50.23 | 3 |
| 1 | L3215 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $67.40 | 3 |
| 1 | L3216 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $107.30 | 3 |
| 1 | L3217 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $83.55 | 3 |
| 1 | L3218 | ORTHOPEDIC FOOTWEAR, WOMAN'S SUR | 7/1/2003 | INVALID | N |
| 1 | L3219 | ORHTOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $78.46 | 3 |
| 1 | L3221 | ORTHOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $137.20 | 3 |
| 1 | L3222 | ORTHOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $101.15 | 3 |
| 1 | L3223 | ORTHOPEDIC FOOTWEAR, MAN'S SURGI | 7/1/2003 | INVALID | N |
| 1 | L3224 | ORTHOPEDIC FOOTWEAR, WOMAN'S SHO | 10/1/2006 | $39.79 | 3 |
| 1 | L3225 | ORTHOPEDIC FOOTWEAR, MAN'S SHOE, | 10/1/2006 | $38.74 | 3 |
| 1 | L3230 | ORTHOPEDIC FOOTWEAR, CUSTOM SHOE | 10/1/2005 | $241.49 | 3 |
| 1 | L3250 | ORTHOPEDIC FOOTWEAR, CUSTOM MOLD | 10/1/2005 | $203.84 | 3 |
| 1 | L3251 | FOOT, SHOE MOLDED TO PATIENT MOD | 1/1/1994 | NC | 9 |
| 1 | L3252 | FOOT, SHOE MOLDED TO PATIENT MOD | 10/1/2005 | $164.66 | 3 |
| 1 | L3253 | FOOT, MOLDED SHOE PLASTAZOTE (OR | 10/1/2005 | $78.28 | 3 |
| 1 | L3254 | NONSTANDARD SIZE OR WIDTH | 10/1/2005 | $16.08 | 3 |
| 1 | L3255 | NONSTANDARD SIZE OR LENGTH | 10/1/2005 | $16.08 | 3 |
| 1 | L3257 | ORTHOPEDIC FOOTWEAR, ADDITIONAL | 10/1/2005 | $45.20 | 3 |
| 1 | L3260 | SURGICAL BOOT/SHOE, EACH | 10/1/2005 | $100.45 | 3 |
| 1 | L3265 | PLASTAZOTE SANDAL, EACH | 10/1/2005 | $45.20 | 3 |
| 1 | L3300 | LIFT, ELEVATION, HEEL, TAPERED T | 10/1/2006 | $33.28 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L3310 | LIFT, ELEVATION, HEEL AND SOLE, | 10/1/2006 | $51.67 | 3 |
| 1 | L3320 | LIFT, ELEVATION, HEEL AND SOLE, | 10/1/2005 | $52.78 | 3 |
| 1 | L3330 | LIFT, ELEVATION, METAL EXTENSION | 10/1/2006 | $361.10 | 3 |
| 1 | L3332 | LIFT, ELEVATION, INSIDE SHOE, TA | 10/1/2006 | $47.05 | 3 |
| 1 | L3334 | LIFT, ELEVATION, HEEL, PER INCH | 10/1/2006 | $24.34 | 3 |
| 1 | L3340 | HEEL WEDGE, SACH | 10/1/2006 | $54.37 | 3 |
| 1 | L3350 | HEEL WEDGE | 10/1/2006 | $14.60 | 3 |
| 1 | L3360 | SOLE WEDGE, OUTSIDE SOLE | 10/1/2006 | $22.72 | 3 |
| 1 | L3370 | SOLE WEDGE, BETWEEN SOLE | 10/1/2006 | $31.66 | 3 |
| 1 | L3380 | CLUBFOOT WEDGE | 10/1/2006 | $31.66 | 3 |
| 1 | L3390 | OUTFLARE WEDGE | 10/1/2006 | $31.66 | 3 |
| 1 | L3400 | METATARSAL BAR WEDGE, ROCKER | 10/1/2006 | $25.98 | 3 |
| 1 | L3410 | METATARSAL BAR WEDGE, BETWEEN SO | 10/1/2006 | $59.23 | 3 |
| 1 | L3420 | FULL SOLE AND HEEL WEDGE, BETWEE | 10/1/2006 | $34.90 | 3 |
| 1 | L3430 | HEEL, COUNTER, PLASTIC REINFORCE | 10/1/2006 | $102.24 | 3 |
| 1 | L3440 | HEEL, COUNTER, LEATHER REINFORCE | 10/1/2006 | $48.69 | 3 |
| 1 | L3450 | HEEL, SACH CUSHION TYPE | 10/1/2006 | $67.35 | 3 |
| 1 | L3455 | HEEL, NEW LEATHER, STANDARD | 10/1/2006 | $25.98 | 3 |
| 1 | L3460 | HEEL, NEW RUBBER, STANDARD | 10/1/2006 | $21.91 | 3 |
| 1 | L3465 | HEEL, THOMAS WITH WEDGE | 10/1/2006 | $37.33 | 3 |
| 1 | L3470 | HEEL, THOMAS EXTENDED TO BALL | 10/1/2006 | $39.75 | 3 |
| 1 | L3480 | HEEL, PAD AND DEPRESSION FOR SPU | 10/1/2006 | $39.75 | 3 |
| 1 | L3485 | HEEL, PAD, REMOVABLE FOR SPUR | 10/1/2005 | $16.71 | 3 |
| 1 | L3500 | ORTHOPEDIC SHOE ADDITION, INSOLE | 10/1/2006 | $18.67 | 3 |
| 1 | L3510 | ORTHOPEDIC SHOE ADDITION, INSOLE | 10/1/2006 | $18.67 | 3 |
| 1 | L3520 | ORTHOPEDIC SHOE ADDITION, INSOLE | 10/1/2006 | $20.30 | 3 |
| 1 | L3530 | ORTHOPEDIC SHOE ADDITION, SOLE, | 10/1/2006 | $20.30 | 3 |
| 1 | L3540 | ORTHOPEDIC SHOE ADDITION, SOLE, | 10/1/2006 | $32.46 | 3 |
| 1 | L3550 | ORTHOPEDIC SHOE ADDITION, TOE TA | 10/1/2006 | $5.69 | 3 |
| 1 | L3560 | ORTHOPEDIC SHOE ADDITION, TOE TA | 10/1/2006 | $14.60 | 3 |
| 1 | L3570 | ORTHOPEDIC SHOE ADDITION, SPECIA | 10/1/2006 | $54.37 | 3 |
| 1 | L3580 | ORTHOPEDIC SHOE ADDITION, CONVER | 10/1/2006 | $16.84 | 3 |
| 1 | L3590 | ORTHOPEDIC SHOE ADDITION, CONVER | 10/1/2006 | $32.75 | 3 |
| 1 | L3595 | ORTHOPEDIC SHOE ADDITION, MARCH | 10/1/2006 | $18.71 | 3 |
| 1 | L3600 | TRANSFER OF AN ORTHOSIS FROM ON | 10/1/2006 | $48.69 | 3 |
| 1 | L3610 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $64.10 | 3 |
| 1 | L3620 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $48.69 | 3 |
| 1 | L3630 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $64.10 | 3 |
| 1 | L3640 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $27.59 | 3 |
| 1 | L3649 | ORTHOPEDIC SHOE, MODIFICATION, A | 10/1/2005 | $928.80 | 3 |
| 1 | L3650 | SHOULDER ORTHOSIS, FIGURE OF "8" | 10/1/2006 | $41.83 | 3 |
| 1 | L3660 | SHOULDER ORTHOSIS, FIGURE OF "8" | 10/1/2006 | $68.05 | 3 |
| 1 | L3670 | SHOULDER ORTHOSIS, ACROMIO/CLAVI | 10/1/2006 | $77.81 | 3 |
| 1 | L3675 | SHOULDER ORTHOSIS, VEST TYPE ABD | 10/1/2006 | $112.80 | 3 |
| 1 | L3700 | ELBOW ORTHOSIS, ELASTIC WITH STA | 10/1/2006 | $52.18 | 3 |
| 1 | L3710 | ELBOW ORTHOSIS, ELASTIC WITH MET | 10/1/2006 | $81.85 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L3720 | ELBOW ORTHOSIS, DOUBLE UPRIGHT W | 10/1/2006 | $517.27 | 3 |
| 1 | L3730 | ELBOW ORTHOSIS, DOUBLE UPRIGHT W | 10/1/2006 | $695.93 | 3 |
| 1 | L3740 | ELBOW ORTHOSIS, DOUBLE UPRIGHT W | 10/1/2006 | $710.41 | 3 |
| 1 | L3760 | ELBOW ORTHOSIS, WITH ADJUSTABLE | 10/1/2006 | $327.91 | 3 |
| 1 | L3800 | WRIST HAND FINGER ORTHOSIS, SHOR | 10/1/2006 | $176.02 | 3 |
| 1 | L3805 | WRIST HAND FINGER ORTHOSIS, LONG | 10/1/2006 | $217.09 | 3 |
| 1 | L3807 | WRIST HAND FINGER ORTHOSIS, WITH | 10/1/2006 | $162.32 | 3 |
| 1 | L3810 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $42.91 | 3 |
| 1 | L3815 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $39.84 | 3 |
| 1 | L3820 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $68.41 | 3 |
| 1 | L3825 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $44.42 | 3 |
| 1 | L3830 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $57.34 | 3 |
| 1 | L3835 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $81.02 | 3 |
| 1 | L3840 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $41.62 | 3 |
| 1 | L3845 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $61.10 | 3 |
| 1 | L3850 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $76.78 | 3 |
| 1 | L3855 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $77.40 | 3 |
| 1 | L3860 | WHFO, ADDITION TO SHORT AND LONG | 10/1/2006 | $105.93 | 3 |
| 1 | L3890 | ADDITION TO UPPER EXTREMITY JOIN | 10/1/2005 | $219.75 | 3 |
| 1 | L3900 | WRIST HAND FINGER ORTHOSIS, DYNA | 10/1/2006 | $964.24 | 3 |
| 1 | L3901 | WRIST HAND FINGER ORTHOSIS, DYNA | 10/1/2006 | $1,192.08 | 3 |
| 1 | L3902 | WRIST HAND FINGER ORTHOSIS, EXTE | 1/1/2007 | INVALID | N |
| 1 | L3904 | WRIST HAND FINGER ORTHOSIS, EXTE | 10/1/2006 | $1,938.94 | 3 |
| 1 | L3906 | WRIST HAND ORTHOSIS, W/OUT JOINT | 10/1/2006 | $274.39 | 3 |
| 1 | L3907 | WRIST HAND FINGER ORTHOSIS, WRIS | 10/1/2006 | $336.33 | 3 |
| 1 | L3908 | WRIST HAND ORTHOSIS, WRIST EXTEN | 10/1/2006 | $52.89 | 3 |
| 1 | L3910 | WRIST HAND FINGER ORTHOSIS, SWAN | 10/1/2006 | $248.35 | 3 |
| 1 | L3911 | WRIST HAND FINGER ORTHOSIS, ELAS | 10/1/2006 | $18.33 | 3 |
| 1 | L3912 | HAND FINGER ORTHOSIS, FLEXION GL | 10/1/2006 | $83.72 | 3 |
| 1 | L3914 | WRIST HAND ORTHOSIS, WRIST EXTEN | 1/1/2007 | INVALID | N |
| 1 | L3916 | WRIST HAND FINGER ORTHOSIS, WRIS | 10/1/2006 | $89.15 | 3 |
| 1 | L3918 | HAND FINGER ORTHOSIS, KNUCKLE BE | 10/1/2006 | $56.40 | 3 |
| 1 | L3920 | HAND FINGER ORTHOSIS, KNUCKLE BE | 10/1/2006 | $74.04 | 3 |
| 1 | L3922 | HAND FINGER ORTHOSIS, KNUCKLE BE | 10/1/2006 | $86.33 | 3 |
| 1 | L3923 | HAND FINGER ORTHOSIS, W/OUT JOIN | 10/1/2006 | $25.51 | 3 |
| 1 | L3924 | WRIST HAND FINGER ORTHOSIS, OPPE | 10/1/2006 | $94.13 | 3 |
| 1 | L3926 | WRIST HAND FINGER ORTHOSIS, THOM | 10/1/2006 | $65.33 | 3 |
| 1 | L3928 | HAND FINGER ORTHOSIS, FINGER EXT | 10/1/2006 | $42.02 | 3 |
| 1 | L3930 | WRIST HAND FINGER ORTHOSIS, FING | 10/1/2006 | $40.74 | 3 |
| 1 | L3932 | FINGER ORTHOSIS, SAFETY PIN, SPR | 10/1/2006 | $35.96 | 3 |
| 1 | L3934 | FINGER ORTHOSIS, SAFETY PIN, MOD | 10/1/2006 | $42.53 | 3 |
| 1 | L3936 | WRIST HAND FINGER ORTHOSIS, PALM | 10/1/2006 | $78.64 | 3 |
| 1 | L3938 | WRIST HAND FINGER ORTHOSIS, DORS | 10/1/2006 | $80.93 | 3 |
| 1 | L3940 | WRIST HAND FINGER ORTHOSIS, DORS | 10/1/2006 | $94.90 | 3 |
| 1 | L3942 | HAND FINGER ORTHOSIS, REVERSE KN | 10/1/2006 | $51.45 | 3 |
| 1 | L3944 | HAND FINGER ORTHOSIS, REVERSE KN | 10/1/2006 | $69.62 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L3946 | HAND FINGER ORTHOSIS, COMPOSITE | 10/1/2006 | $78.24 | 3 |
| 1 | L3948 | FINGER ORTHOSIS, FINGER KNUCKLE | 10/1/2006 | $36.80 | 3 |
| 1 | L3950 | WRIST HAND FINGER ORTHOSIS, COMB | 10/1/2006 | $116.53 | 3 |
| 1 | L3952 | WRIST HAND FINGER ORTHOSIS, COMB | 10/1/2006 | $146.93 | 3 |
| 1 | L3954 | HAND FINGER ORTHOSIS, SPREADING | 10/1/2006 | $80.41 | 3 |
| 1 | L3956 | ADDITION TO JOINT TO UPPER EXTRE | 10/1/2005 | $150.69 | 3 |
| 1 | L3960 | SHOULDER ELBOW WRIST HAND ORTHOS | 10/1/2006 | $547.15 | 3 |
| 1 | L3962 | SHOULDER ELBOW WRIST HAND ORTHOS | 10/1/2006 | $591.26 | 3 |
| 1 | L3963 | SHOULDER ELBOW WRIST HAND ORTHOS | 1/1/2006 | INVALID | N |
| 1 | L3964 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $569.51 | 3 |
| 1 | L3965 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $908.77 | 3 |
| 1 | L3966 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $684.61 | 3 |
| 1 | L3968 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $866.37 | 3 |
| 1 | L3969 | SHOULDER ELBOW ORTHOSIS, MOVILE | 10/1/2006 | $605.85 | 3 |
| 1 | L3970 | SEWHO, ADDITION TO MOBILE ARM SU | 10/1/2006 | $206.00 | 3 |
| 1 | L3972 | SEWHO, ADDITION TO MOBILE ARM SU | 10/1/2006 | $130.98 | 3 |
| 1 | L3974 | SEWHO, ADDITION TO MOBILE ARM SU | 10/1/2006 | $130.71 | 3 |
| 1 | L3980 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $204.69 | 3 |
| 1 | L3982 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $247.18 | 3 |
| 1 | L3984 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $237.86 | 3 |
| 1 | L3985 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $421.65 | 3 |
| 1 | L3986 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $407.86 | 3 |
| 1 | L3995 | ADDITION TO UPPER EXTREMITY ORTH | 10/1/2006 | $24.04 | 3 |
| 1 | L3999 | UNLISTED PROCEDURE FOR UPPER LIM | 10/1/2005 | $928.80 | 3 |
| 1 | L4000 | REPLACE GIRDLE FOR SPINAL ORTHOS | 10/1/2006 | $980.09 | 3 |
| 1 | L4010 | REPLACE TRILATERAL SOCKET BRIM | 10/1/2006 | $541.53 | 3 |
| 1 | L4020 | REPLACE QUADRILATERAL SOCKET BRI | 10/1/2006 | $648.37 | 3 |
| 1 | L4030 | REPLACE QUADRILATERAL SOCKET BRI | 10/1/2006 | $447.07 | 3 |
| 1 | L4040 | REPLACE MOLDED THIGH LACER | 10/1/2006 | $368.25 | 3 |
| 1 | L4045 | REPLACE NONMOLDED THIGH LACER | 10/1/2006 | $223.90 | 3 |
| 1 | L4050 | REPLACE MOLDED CALF LACER | 10/1/2006 | $336.56 | 3 |
| 1 | L4055 | REPLACE NONMOLDED CALF LACER | 10/1/2006 | $183.50 | 3 |
| 1 | L4060 | REPLACE HIGH ROLL CUFF | 10/1/2006 | $273.40 | 3 |
| 1 | L4070 | REPLACE PROXIMAL AND DISTAL UPRI | 10/1/2006 | $225.38 | 3 |
| 1 | L4080 | REPLACE METAL BANDS KAFO, PROXIM | 10/1/2006 | $81.06 | 3 |
| 1 | L4090 | REPLACE METAL BANDS KAFO-AFO, CA | 10/1/2006 | $81.39 | 3 |
| 1 | L4100 | REPLACE LEATHER CUFF KAFO, PROXI | 10/1/2006 | $94.09 | 3 |
| 1 | L4110 | REPLACE LEATHER CUFF KAFO-AFO, C | 10/1/2006 | $76.51 | 3 |
| 1 | L4130 | REPLACE PRETIBIAL SHELL | 10/1/2006 | $447.60 | 3 |
| 1 | L4210 | REPAIR OF ORTHOTIC DEVICE, REPAI | 10/1/2005 | $200.92 | 3 |
| 1 | L4350 | PNEUMATIC ANKLE CONTROL SPLINT, | 10/1/2006 | $66.60 | 3 |
| 1 | L4360 | WALKING BOOT,PNEUMATIC, W/OR W/O | 10/1/2006 | $249.79 | 3 |
| 1 | L4370 | PNEUMATIC FULL LEG SPLINT, PREFA | 10/1/2006 | $170.31 | 3 |
| 1 | L4380 | PNEUMATIC KNEE SPLINT, PREFABRIC | 10/1/2006 | $93.20 | 3 |
| 1 | L4386 | NON-PNEUMATIC WALKING SPLINT,WIT | 10/1/2006 | $119.76 | 3 |
| 1 | L4392 | REPLACEMENT, SOFT INTERFACE MATE | 10/1/2006 | $16.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L4394 | REPLACE SOFT INTERFACE MATERIAL, | 10/1/2006 | $11.92 | 3 |
| 1 | L4396 | STATIC ANKLE FOOT ORTHOSIS, INCL | 10/1/2006 | $116.55 | 3 |
| 1 | L4398 | FOOT DROP SPLINT, RECUMBENT POSI | 10/1/2006 | $53.65 | 3 |
| 1 | L5000 | PARTIAL FOOT, SHOE INSERT WITH L | 10/1/2006 | $364.22 | 3 |
| 1 | L5010 | PARTIAL FOOT, MOLDED SOCKET, ANK | 10/1/2006 | $877.60 | 3 |
| 1 | L5020 | PARTIAL FOOT, MOLDED SOCKET, TIB | 10/1/2006 | $1,627.52 | 3 |
| 1 | L5050 | ANKLE, SYMES, MOLDED SOCKET, SAC | 10/1/2006 | $1,943.15 | 3 |
| 1 | L5060 | ANKLE, SYMES, METAL FRAME, MOLDE | 10/1/2006 | $2,578.52 | 3 |
| 1 | L5100 | BELOW KNEE, MOLDED SOCKET, SHIN, | 10/1/2006 | $2,014.09 | 3 |
| 1 | L5105 | BELOW KNEE, PLASTIC SOCKET, JOIN | 10/1/2006 | $2,842.56 | 3 |
| 1 | L5150 | KNEE DISARTICULATION (OR THROUGH | 10/1/2006 | $2,939.18 | 3 |
| 1 | L5160 | KNEE DISARTICULATION (OR THRU KN | 10/1/2006 | $3,585.88 | 3 |
| 1 | L5200 | ABOVE KNEE, MOLDED SOCKET, SINGL | 10/1/2006 | $2,936.36 | 3 |
| 1 | L5210 | ABOVE KNEE, SHORT PROSTHESIS, NO | 10/1/2006 | $2,332.27 | 3 |
| 1 | L5220 | ABOVE KNEE, SHORT PROSTHESIS, NO | 10/1/2006 | $2,651.05 | 3 |
| 1 | L5230 | ABOVE KNEE, FOR PROXIMAL FEMORAL | 10/1/2006 | $3,545.63 | 3 |
| 1 | L5250 | HIP DISARTICULATION, CANADIAN TY | 10/1/2006 | $4,613.93 | 3 |
| 1 | L5270 | HIP DISARTICULATION, TILT TABLE | 10/1/2006 | $4,943.23 | 3 |
| 1 | L5280 | HEMIPELVECTOMY, CANADIAN TYPE; M | 10/1/2006 | $4,893.79 | 3 |
| 1 | L5300 | BELOW KNEE, MOLDED SOCKET, SACH | 4/1/2002 | INVALID | N |
| 1 | L5310 | KNEE DISARTICULATION, MOLDED SOC | 4/1/2002 | INVALID | N |
| 1 | L5320 | ABOVE KNEE, MOLDED SOCKET, OPEN | 4/1/2002 | INVALID | N |
| 1 | L5330 | HIP DISARTICULATION, CANADIAN TY | 4/1/2002 | INVALID | N |
| 1 | L5340 | HEMIPELVECTOMY, CANADIAN TYPE; M | 4/1/2002 | INVALID | N |
| 1 | L5400 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $964.00 | 3 |
| 1 | L5410 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $370.55 | 3 |
| 1 | L5420 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $1,164.38 | 3 |
| 1 | L5430 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $363.43 | 3 |
| 1 | L5450 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $318.05 | 3 |
| 1 | L5460 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $421.12 | 3 |
| 1 | L5500 | INITIAL, BELOW KNEE "PTB" TYPE S | 10/1/2006 | $925.82 | 3 |
| 1 | L5505 | INITIAL, ABOVE KNEE - KNEE DISAR | 10/1/2006 | $1,253.79 | 3 |
| 1 | L5510 | PREPARATORY, BELOW KNEE "PTB" TY | 10/1/2006 | $1,137.18 | 3 |
| 1 | L5520 | PREPARATORY, BELOW KNEE "PTB" TY | 10/1/2006 | $1,036.62 | 3 |
| 1 | L5530 | PREPARATORY, BELOW KNEE "PTB" TY | 10/1/2006 | $1,446.62 | 3 |
| 1 | L5535 | PREPARATORY, BELOW KNEE "PTB" TY | 10/1/2006 | $1,494.26 | 3 |
| 1 | L5540 | PREPARATORY, BELOW KNEE "PTB" TY | 10/1/2006 | $1,594.91 | 3 |
| 1 | L5560 | PREPARATORY, ABOVE KNEE - KNEE D | 10/1/2006 | $1,558.15 | 3 |
| 1 | L5570 | PREPARATORY, ABOVE KNEE - KNEE D | 10/1/2006 | $1,638.87 | 3 |
| 1 | L5580 | PREPARATORY, ABOVE KNEE - KNEE D | 10/1/2006 | $1,877.45 | 3 |
| 1 | L5585 | PREPARATORY, ABOVE KNEE - KNEE D | 10/1/2006 | $2,080.84 | 3 |
| 1 | L5590 | PREPARATORY, ABOVE KNEE - KNEE D | 10/1/2006 | $1,821.69 | 3 |
| 1 | L5595 | PREPARATORY, HIP DISARTICULATION | 10/1/2006 | $3,254.09 | 3 |
| 1 | L5600 | PREPARATORY, HIP DISARTICULATION | 10/1/2006 | $4,101.55 | 3 |
| 1 | L5610 | ADDITION TO LOWER EXTREMITY, ABO | 1/1/1994 | NC | 9 |
| 1 | L5611 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $1,271.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L5613 | ADDITION TO LOWER EXTREMITY, ABO | 1/1/1994 | NC | 9 |
| 1 | L5614 | ADDITION TO LOWER EXTREMITY, END | 5/1/1999 | NC | 9 |
| 1 | L5616 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $979.04 | 3 |
| 1 | L5617 | ADDITION TO LOWER EXTREMITY, QUI | 10/1/2006 | $395.95 | 3 |
| 1 | L5618 | ADDITION TO LOWER EXTREMITY, TES | 10/1/2006 | $225.18 | 3 |
| 1 | L5620 | ADDITION TO LOWER EXTREMITY, TES | 10/1/2006 | $213.84 | 3 |
| 1 | L5622 | ADDITION TO LOWER EXTREMITY, TES | 10/1/2006 | $301.56 | 3 |
| 1 | L5624 | ADDITION TO LOWER EXTREMITY, TES | 10/1/2006 | $271.50 | 3 |
| 1 | L5626 | ADDITION TO LOWER EXTREMITY, TES | 10/1/2006 | $394.18 | 3 |
| 1 | L5628 | ADDITION TO LOWER EXTREMITY, TES | 10/1/2006 | $435.84 | 3 |
| 1 | L5629 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $229.09 | 3 |
| 1 | L5630 | ADDITION TO LOWER EXTREMITY, SYM | 10/1/2006 | $365.08 | 3 |
| 1 | L5631 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $316.73 | 3 |
| 1 | L5632 | ADDITION TO LOWER EXTREMITY, SYM | 10/1/2006 | $213.41 | 3 |
| 1 | L5634 | ADDITION TO LOWER EXTREMITY, SYM | 10/1/2006 | $254.25 | 3 |
| 1 | L5636 | ADDITION TO LOWER EXTREMITY, SYM | 10/1/2006 | $226.59 | 3 |
| 1 | L5637 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $214.61 | 3 |
| 1 | L5638 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $397.68 | 3 |
| 1 | L5639 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $910.90 | 3 |
| 1 | L5640 | ADDITION TO LOWER EXTREMITY, KNE | 10/1/2006 | $603.29 | 3 |
| 1 | L5642 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $595.48 | 3 |
| 1 | L5643 | ADDITION TO LOWER EXTREMITY, HIP | 10/1/2006 | $1,288.00 | 3 |
| 1 | L5644 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $475.38 | 3 |
| 1 | L5645 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $575.16 | 3 |
| 1 | L5646 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $422.79 | 3 |
| 1 | L5647 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $573.41 | 3 |
| 1 | L5648 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $474.59 | 3 |
| 1 | L5649 | ADDITION TO LOWER EXTREMITY, ISC | 10/1/2006 | $1,450.75 | 3 |
| 1 | L5650 | ADDITION TO LOWER EXTREMITY, TOT | 10/1/2006 | $413.69 | 3 |
| 1 | L5651 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $865.69 | 3 |
| 1 | L5652 | ADDITION TO LOWER EXTREMITY, SUC | 10/1/2006 | $314.29 | 3 |
| 1 | L5653 | ADDITION TO LOWER EXTREMITY, KNE | 10/1/2006 | $515.64 | 3 |
| 1 | L5654 | ADDITOIN TO LOWER EXTREMITY, SOC | 10/1/2006 | $279.27 | 3 |
| 1 | L5655 | ADDITION TO LOWER EXTREMITY, SOC | 10/1/2006 | $250.24 | 3 |
| 1 | L5656 | ADDITION TO LOWER EXTREMITY, SOC | 10/1/2006 | $356.53 | 3 |
| 1 | L5658 | ADDITION TO LOWER EXTREMITY, SOC | 10/1/2006 | $349.47 | 3 |
| 1 | L5660 | ADDITION TO LOWER EXTREMITY, SOC | 7/1/2003 | INVALID | N |
| 1 | L5661 | ADDITION TO LOWER EXTREMITY, SOC | 10/1/2006 | $438.66 | 3 |
| 1 | L5662 | ADDITION TO LOWER EXTREMITY, SOC | 7/1/2003 | INVALID | N |
| 1 | L5663 | ADDITION TO LOWER EXTREMITY, SOC | 7/1/2003 | INVALID | N |
| 1 | L5664 | ADDITION TO LOWER EXTREMITY, SOC | 7/1/2003 | INVALID | N |
| 1 | L5665 | ADDITION TO LOWER EXTREMITY, SOC | 10/1/2006 | $369.09 | 3 |
| 1 | L5666 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $51.20 | 3 |
| 1 | L5667 | ADDITION OT LOWER EXTREMITY, BEL | 4/1/2002 | INVALID | N |
| 1 | L5668 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $80.89 | 3 |
| 1 | L5669 | ADDITION TO LOWER EXTREMITY, BEL | 4/1/2002 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L5670 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $213.51 | 3 |
| 1 | L5672 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $232.61 | 3 |
| 1 | L5674 | ADDITION TO LOWER EXTREMITY, BEL | 1/1/2005 | INVALID | N |
| 1 | L5675 | ADDITION TO LOWER EXTREMITY, BEL | 1/1/2005 | INVALID | N |
| 1 | L5676 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $304.30 | 3 |
| 1 | L5677 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $387.37 | 3 |
| 1 | L5678 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $34.11 | 3 |
| 1 | L5680 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $255.57 | 3 |
| 1 | L5682 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $455.76 | 3 |
| 1 | L5684 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $46.26 | 3 |
| 1 | L5686 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $45.94 | 3 |
| 1 | L5688 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $50.30 | 3 |
| 1 | L5690 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $76.50 | 3 |
| 1 | L5692 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $112.42 | 3 |
| 1 | L5694 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $173.68 | 3 |
| 1 | L5695 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $117.56 | 3 |
| 1 | L5696 | ADDITION TOI LOWER EXTREMITY, AB | 10/1/2006 | $177.83 | 3 |
| 1 | L5697 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $77.15 | 3 |
| 1 | L5698 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $90.15 | 3 |
| 1 | L5699 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $177.20 | 3 |
| 1 | L5700 | REPLACEMENT, SOCKET, BELOW KNEE, | 10/1/2006 | $2,632.12 | 3 |
| 1 | L5701 | REPLACEMENT, SOCKET, ABOVE KNEE/ | 10/1/2006 | $3,198.58 | 3 |
| 1 | L5702 | REPLACEMENT, SOCKET, HIP DISARTI | 10/1/2006 | $3,830.02 | 3 |
| 1 | L5704 | CUSTOM SHAPED PROTECTIVE COVER, | 10/1/2006 | $439.59 | 3 |
| 1 | L5705 | CUSTOM SHAPED PROTECTIVE COVER, | 10/1/2006 | $721.65 | 3 |
| 1 | L5706 | CUSTOM SHAPED PROTECTIVE COVER, | 10/1/2006 | $715.26 | 3 |
| 1 | L5707 | CUSTOM SHAPED PROTECTIVE COVER, | 10/1/2006 | $1,016.75 | 3 |
| 1 | L5710 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $328.00 | 3 |
| 1 | L5711 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $444.03 | 3 |
| 1 | L5712 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $398.60 | 3 |
| 1 | L5714 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $301.51 | 3 |
| 1 | L5716 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $525.39 | 3 |
| 1 | L5718 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $656.67 | 3 |
| 1 | L5722 | ADDFITION, EXOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| 1 | L5724 | ADDITION, EXOSKELETAL KNEE-SHIN | 2/22/1994 | NC | 9 |
| 1 | L5726 | ADDITION, EXOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| 1 | L5728 | ADDITION, EXOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| 1 | L5780 | ADDITION, EXOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| 1 | L5785 | ADDITION, EXOSKELETAL SYSTEM, BE | 10/1/2006 | $447.41 | 3 |
| 1 | L5790 | ADDITION, EXOSKELETAL SYSTEM, AB | 10/1/2006 | $538.70 | 3 |
| 1 | L5795 | ADDITION, EXOSKELETAL SYSTEM, HI | 10/1/2006 | $773.98 | 3 |
| 1 | L5810 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $400.78 | 3 |
| 1 | L5811 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $525.73 | 3 |
| 1 | L5812 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $454.99 | 3 |
| 1 | L5814 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $2,628.18 | 3 |
| 1 | L5816 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $613.05 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L5818 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $692.26 | 3 |
| 1 | L5822 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| 1 | L5824 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| 1 | L5826 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $2,295.72 | 3 |
| 1 | L5828 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| 1 | L5830 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| 1 | L5840 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $2,909.50 | 3 |
| 1 | L5845 | ADDITION, ENDOSKELETAL, KNEE-SHI | 10/1/2006 | $1,268.39 | 3 |
| 1 | L5846 | ADDITION, ENDOSKELETAL, KNEE-SHI | 1/1/2005 | INVALID | N |
| 1 | L5848 | ADD TO ENDOSKELETAL, KNEE-SHIN S | 5/9/2005 | NC | 9 |
| 1 | L5850 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $92.22 | 3 |
| 1 | L5855 | ADDITION, ENDOSKELETAL SYSTEM, H | 10/1/2006 | $296.82 | 3 |
| 1 | L5910 | ADDITION, ENDOSKELETAL SYSTEM, B | 10/1/2006 | $261.07 | 3 |
| 1 | L5920 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $382.47 | 3 |
| 1 | L5925 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $314.38 | 3 |
| 1 | L5930 | ADDITION, ENDOSKELETAL SYSTEM, H | 10/1/2006 | $2,381.92 | 3 |
| 1 | L5940 | ADDITION, ENDOSKELETAL SYSTEM, B | 10/1/2006 | $449.55 | 3 |
| 1 | L5950 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $646.20 | 3 |
| 1 | L5960 | ADDITION, ENDOSKELETAL SYSTEM, H | 10/1/2006 | $738.58 | 3 |
| 1 | L5962 | ADDITION, ENDOSKELETAL SYSTEM, B | 10/1/2006 | $564.95 | 3 |
| 1 | L5964 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $813.29 | 3 |
| 1 | L5966 | ADDITION, ENDOSKELETAL SYSTEM, H | 10/1/2006 | $1,054.40 | 3 |
| 1 | L5968 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $2,571.58 | 3 |
| 1 | L5970 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $176.83 | 3 |
| 1 | L5972 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $282.59 | 3 |
| 1 | L5974 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $223.97 | 3 |
| 1 | L5975 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $328.07 | 3 |
| 1 | L5976 | ALL LOWER EXREMITY PROSTHESES, E | 10/1/2006 | $451.28 | 3 |
| 1 | L5978 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $255.06 | 3 |
| 1 | L5979 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $2,172.84 | 3 |
| 1 | L5980 | ALL LOWER EXTREMITY PROSTHESES, | 1/1/1994 | NC | 9 |
| 1 | L5981 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $2,361.24 | 3 |
| 1 | L5982 | ALL EXOSKELETAL LOWER EXTREMITY | 10/1/2006 | $550.85 | 3 |
| 1 | L5984 | ALL ENDOSKELETAL LOWER EXTREMITY | 10/1/2006 | $520.77 | 3 |
| 1 | L5985 | ALL ENDOSKELETAL LOWER EXTREMITY | 10/1/2006 | $199.83 | 3 |
| 1 | L5986 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $551.17 | 3 |
| 1 | L5987 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $5,090.73 | 3 |
| 1 | L5988 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $1,413.70 | 3 |
| 1 | L5989 | ADDITION TO LOWER EXTREMITY PROS | 5/9/2005 | NC | 9 |
| 1 | L5999 | UNLISTED PROCEDURES FOR LOWER EX | 3/1/2004 | $900.00 | 3 |
| 1 | L6000 | PARTIAL HAND, ROBIN-AIDS, THUMB | 10/1/2006 | $1,277.05 | 3 |
| 1 | L6010 | PARTIAL HAND, ROBIN-AIDS, LITTLE | 10/1/2006 | $1,421.15 | 3 |
| 1 | L6020 | PARTIAL HAND, ROBIN-AIDS, NO FIN | 10/1/2006 | $1,325.01 | 3 |
| 1 | L6025 | TRANSCARPAL/METACARPAL OR PARTIA | 5/9/2005 | NC | 9 |
| 1 | L6050 | WRIST DISARTICULATION, MOLDED SO | 10/1/2006 | $1,565.05 | 3 |
| 1 | L6055 | WRIST DISARTICULATION, MOLDED SO | 10/1/2006 | $2,336.84 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L6100 | BELOW ELBOW, MOLDED SOCKET, FLEX | 10/1/2006 | $1,685.75 | 3 |
| 1 | L6110 | BELOW ELBOW, MOLDED SOCKET (MUEN | 10/1/2006 | $1,719.34 | 3 |
| 1 | L6120 | BELOW ELBOW, MOLDED DOUBLE WALL | 10/1/2006 | $2,162.02 | 3 |
| 1 | L6130 | BELOW ELBOW, MOLDED DOUBLE WALL | 10/1/2006 | $2,488.11 | 3 |
| 1 | L6200 | ELBOW DISARTICULATION, MOLDED SO | 10/1/2006 | $2,553.48 | 3 |
| 1 | L6205 | ELBOW DISARTICULATION, MOLDED SO | 10/1/2006 | $3,199.12 | 3 |
| 1 | L6250 | ABOVE ELBOW, MOLDED DOUBLE WALL | 10/1/2006 | $2,381.30 | 3 |
| 1 | L6300 | SHOULDER DISARTICULATION, MOLDED | 10/1/2006 | $3,349.60 | 3 |
| 1 | L6310 | SHOULDER DISARTICULATION, PASSIV | 1/1/1994 | NC | 9 |
| 1 | L6320 | SHOULDER DISARTICULATION, PASSIV | 10/1/2006 | $1,231.90 | 3 |
| 1 | L6350 | INTERSCAPULAR THORACIC, MOLDED S | 10/1/2006 | $3,764.71 | 3 |
| 1 | L6360 | INTERSCAPULAR THORACIC, PASSIVE | 1/1/1994 | NC | 9 |
| 1 | L6370 | INTERSCAPULAR THORACIC, PASSIVE | 10/1/2006 | $1,464.11 | 3 |
| 1 | L6380 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $985.74 | 3 |
| 1 | L6382 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $1,160.45 | 3 |
| 1 | L6384 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $1,469.12 | 3 |
| 1 | L6386 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $332.75 | 3 |
| 1 | L6388 | IMMEDIATE POSTSURGICAL OR EARLY | 10/1/2006 | $365.74 | 3 |
| 1 | L6400 | BELOW ELBOW, MOLDED SOCKET, ENDO | 10/1/2006 | $1,866.28 | 3 |
| 1 | L6450 | ELBOW DISARTICULATION, MOLDED SO | 10/1/2006 | $2,533.44 | 3 |
| 1 | L6500 | ABOVE ELBOW, MOLDED SOCKET, ENDO | 10/1/2006 | $2,562.39 | 3 |
| 1 | L6550 | SHOULDER DISARTICULATION, MOLDED | 10/1/2006 | $3,427.75 | 3 |
| 1 | L6570 | INTERSCAPULAR THORACIC, MOLDED S | 10/1/2006 | $3,820.95 | 3 |
| 1 | L6580 | PREPARATORY, WRIST DISARTICULATI | 10/1/2006 | $1,298.49 | 3 |
| 1 | L6582 | PREPARATORY, WRIST DISARTICULATI | 10/1/2006 | $1,031.90 | 3 |
| 1 | L6584 | PREPARATORY, ELBOW DISARTICULATI | 10/1/2006 | $1,753.24 | 3 |
| 1 | L6586 | PREPARATORY, ELBOW DISARTICULATI | 10/1/2006 | $1,498.40 | 3 |
| 1 | L6588 | PREPARATORY, SHOULDER DISARTICUL | 10/1/2006 | $2,537.11 | 3 |
| 1 | L6590 | PREPARATORY, SHOULDER DISARTICUL | 10/1/2006 | $2,337.74 | 3 |
| 1 | L6600 | UPPER EXTREMITY ADDITIONS, POLYC | 10/1/2006 | $146.50 | 3 |
| 1 | L6605 | UPPER EXTREMITY ADDITIONS, SINGL | 10/1/2006 | $138.21 | 3 |
| 1 | L6610 | UPPER EXTREMITY ADDITIONS, FLEXI | 10/1/2006 | $126.07 | 3 |
| 1 | L6615 | UPPER EXTREMITY ADDITION, DISCON | 10/1/2006 | $154.06 | 3 |
| 1 | L6616 | UPPER EXTREMITY ADDITION, ADDITI | 10/1/2006 | $56.15 | 3 |
| 1 | L6620 | UPPER EXTREMITY ADDITION, FLEXIO | 10/1/2006 | $241.30 | 3 |
| 1 | L6623 | UPPER EXREMITY ADDITION, SPRING | 10/1/2006 | $519.08 | 3 |
| 1 | L6625 | UPPER EXTREMITY ADDITION, ROTATI | 10/1/2006 | $443.93 | 3 |
| 1 | L6628 | UPPER EXTREMITY ADDITION, QUICK | 10/1/2006 | $416.90 | 3 |
| 1 | L6629 | UPPER EXTREMITY ADDITION, QUICK | 10/1/2006 | $105.66 | 3 |
| 1 | L6630 | UPPER EXTREMITY ADDITION, STAINL | 10/1/2006 | $155.35 | 3 |
| 1 | L6632 | UPPER EXTREMITY ADDITION, LATEX | 10/1/2006 | $46.83 | 3 |
| 1 | L6635 | UPPER EXTREMITY ADDITION, LIFT A | 10/1/2006 | $136.20 | 3 |
| 1 | L6637 | UPPER EXTREMITY ADDITION, NUDGE | 10/1/2006 | $313.21 | 3 |
| 1 | L6638 | UPPER EXTREMITY ADD TO PROSTHESI | 5/9/2005 | NC | 9 |
| 1 | L6640 | UPPER EXTREMITY ADDITIONS, SHOUL | 10/1/2006 | $248.35 | 3 |
| 1 | L6641 | UPPER EXTREMITY ADDITION, EXCURS | 10/1/2006 | $123.78 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L6642 | UPPER EXTREMITY ADDITION, EXCURS | 10/1/2006 | $167.42 | 3 |
| 1 | L6645 | UPPER EXTREMITY ADDITION, SHOULD | 10/1/2006 | $285.77 | 3 |
| 1 | L6646 | UPPER EXTREMITY ADD, SHOULDER JO | 5/9/2005 | NC | 9 |
| 1 | L6648 | UPPER EXTRMITY ADDITION, SHOULDE | 5/9/2005 | NC | 9 |
| 1 | L6650 | UPPER EXTREMITY ADDITION, SHOULD | 10/1/2006 | $246.46 | 3 |
| 1 | L6655 | UPPER EXTREMITY ADDITION, STANDA | 10/1/2006 | $72.19 | 3 |
| 1 | L6660 | UPPER EXTREMITY ADDITION, HEAVY | 10/1/2006 | $76.43 | 3 |
| 1 | L6665 | UPPER EXTREMITY ADDITION, TEFLON | 10/1/2006 | $35.53 | 3 |
| 1 | L6670 | UPPER EXTREMITY ADDITION, HOOK T | 10/1/2006 | $36.76 | 3 |
| 1 | L6672 | UPPER EXTREMITY ADDITION, HARNES | 10/1/2006 | $139.54 | 3 |
| 1 | L6675 | UPPER EXTREMITY ADDITION, HARNES | 10/1/2006 | $86.56 | 3 |
| 1 | L6676 | UPPER EXTREMITY ADDITION, HARNES | 10/1/2006 | $106.43 | 3 |
| 1 | L6680 | UPPER EXTREMITY ADDITION, TEST S | 10/1/2006 | $171.49 | 3 |
| 1 | L6682 | UPPER EXTREMITY ADDITION, TEST S | 10/1/2006 | $218.17 | 3 |
| 1 | L6684 | UPPER EXTREMITY ADDITION, TEST S | 10/1/2006 | $334.31 | 3 |
| 1 | L6686 | UPPER EXTREMITY ADDITION, SUCTIO | 10/1/2006 | $479.26 | 3 |
| 1 | L6687 | UPPER EXTREMITY ADDITION, FRAME | 10/1/2006 | $415.80 | 3 |
| 1 | L6688 | UPPER EXTREMITY ADDITION, FRAME | 10/1/2006 | $509.15 | 3 |
| 1 | L6689 | UPPER EXTREMITY ADDITION, FRAME | 10/1/2006 | $623.17 | 3 |
| 1 | L6690 | UPPER EXTREMITY ADDITION, FRAME | 10/1/2006 | $660.89 | 3 |
| 1 | L6691 | UPPER EXTREMITY ADDITION, REMOVA | 10/1/2006 | $285.92 | 3 |
| 1 | L6692 | UPP0ER EXTREMITY ADDITION, SILIC | 10/1/2006 | $403.12 | 3 |
| 1 | L6693 | UPPER EXTREMITY ADDITION, EXTERN | 10/1/2006 | $2,009.06 | 3 |
| 1 | L6700 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6705 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6710 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6715 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6720 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6725 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6730 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6735 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6740 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6745 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6750 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6755 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6765 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6770 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6775 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6780 | TERMINAL DEVICE, HOOK, DORRANCE | 1/1/2007 | INVALID | N |
| 1 | L6790 | TERMINAL DEVICE, HOOK, ACCU HOOK | 1/1/2007 | INVALID | N |
| 1 | L6795 | TERMINAL DEVICE, HOOK, 2 LOAD OR | 1/1/2007 | INVALID | N |
| 1 | L6800 | TERMINAL DEVICE, HOOK, APRL VC O | 1/1/2007 | INVALID | N |
| 1 | L6805 | TERMINAL DEVICE, MODIFIER WRIST | 10/1/2006 | $304.88 | 3 |
| 1 | L6806 | TERMINAL DEVICE, HOOK, TRS GRIP, | 1/1/2007 | INVALID | N |
| 1 | L6807 | TERMINAL DEVICE, HOOK, GRIP I, G | 1/1/2007 | INVALID | N |
| 1 | L6808 | TERMINAL DEVICE, HOOK, TRS ADEPT | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L6809 | TERMINAL DEVICE, HOOK, TRS SUPER | 1/1/2007 | INVALID | N |
| 1 | L6810 | TERMINAL DEVICE, PINCHER TOOL, O | 10/1/2006 | $144.26 | 3 |
| 1 | L6825 | TERMINAL DEVICE, HAND, DORRANCE, | 1/1/2007 | INVALID | N |
| 1 | L6830 | TERMINAL DEVICE, HAND, APRL, VC | 1/1/2007 | INVALID | N |
| 1 | L6835 | TERMINAL DEVICE, HAND, SIERRA, V | 1/1/2007 | INVALID | N |
| 1 | L6840 | TERMINAL DEVICE, HAND, BECKER IM | 1/1/2007 | INVALID | N |
| 1 | L6845 | TERMINAL DEVICE, HAND, BECKER LO | 1/1/2007 | INVALID | N |
| 1 | L6850 | TERMINAL DEVICE, HAND, BECKER PL | 1/1/2007 | INVALID | N |
| 1 | L6855 | 000MINAL DEVICE, HAND, ROBIN-AID | 1/1/2007 | INVALID | N |
| 1 | L6860 | TERMINAL DEVICE, HAND, ROBIN-AID | 1/1/2007 | INVALID | N |
| 1 | L6865 | TERMINAL DEVICE, HAND, PASSIVE H | 1/1/2007 | INVALID | N |
| 1 | L6867 | TERMINAL DEVICE, HAND, DETROIT I | 1/1/2007 | INVALID | N |
| 1 | L6868 | TERMINAL DEVICE, HAND, PASSIVE I | 1/1/2007 | INVALID | N |
| 1 | L6870 | TERMINAL DEVICE, HAND, CHILD MIT | 1/1/2007 | INVALID | N |
| 1 | L6872 | TERMINAL DEVICE, HAND, NYU CHILD | 1/1/2007 | INVALID | N |
| 1 | L6873 | TERMINAL DEVICE, HAND, MECHANICA | 1/1/2007 | INVALID | N |
| 1 | L6875 | TERMINAL DEVICE, HAND, BOCK, VC | 1/1/2007 | INVALID | N |
| 1 | L6880 | TERMINAL DEVICE, HAND, BOCK, VO | 1/1/2007 | INVALID | N |
| 1 | L6881 | AUTOMATIC GRASP FEATURE, ADDITIO | 5/9/2005 | NC | 9 |
| 1 | L6882 | MICROPROCESSOR CONTROL FEATURE, | 5/9/2005 | NC | 9 |
| 1 | L6890 | ADDITION TO UPPER EXTREMITY PROS | 10/1/2006 | $133.86 | 3 |
| 1 | L6895 | ADDITION TO UPPER EXTREMITY PROS | 10/1/2006 | $446.89 | 3 |
| 1 | L6900 | HAND RESTORATION (CASTS, SHADING | 10/1/2006 | $1,399.70 | 3 |
| 1 | L6905 | HAND RESTORATION (CASTS, SHADING | 10/1/2006 | $1,411.15 | 3 |
| 1 | L6910 | HAND RESTORATION (CASTS, SHADING | 10/1/2006 | $1,158.19 | 3 |
| 1 | L6915 | HAND RESTORATION (SHADING AND ME | 10/1/2006 | $523.42 | 3 |
| 1 | L6920 | WRIST DISARTICULATION, EXTERNAL | 1/1/1994 | NC | 9 |
| 1 | L6925 | WRIST DISARTICULATION, EXTERNAL | 1/1/1994 | NC | 9 |
| 1 | L6930 | BELOW ELBOW, EXTERNAL POWER, SEL | 1/1/1994 | NC | 9 |
| 1 | L6935 | BELOW ELBOW, EXTERNAL POWER, SEL | 1/1/1994 | NC | 9 |
| 1 | L6940 | ELBOW DISARTICULATION, EXTERNAL | 1/1/1994 | NC | 9 |
| 1 | L6945 | ELBOW DISARTICULATION, EXTERNAL | 1/1/1994 | NC | 9 |
| 1 | L6950 | ABOVE ELBOW, EXTERNAL POWER, MOL | 1/1/1994 | NC | 9 |
| 1 | L6955 | ABOVE ELBOW, EXTERNAL POWER, MOL | 1/1/1994 | NC | 9 |
| 1 | L6960 | SHOULDER DISARTICULATION, EXTERN | 1/1/1994 | NC | 9 |
| 1 | L6965 | SHOULDER DISARTICULATION, EXTERN | 1/1/1994 | NC | 9 |
| 1 | L6970 | INTERSCAPULAR-THORACIC, EXTERNAL | 1/1/1994 | NC | 9 |
| 1 | L6975 | INTERSCAPULAR-THORACIC, EXTERNAL | 1/1/1994 | NC | 9 |
| 1 | L7010 | ELECTRONIC HAND, OTTO BOCK, STEE | 1/1/2007 | INVALID | N |
| 1 | L7015 | ELECTRONIC HAND, SYSTEM TEKNIK, | 1/1/2007 | INVALID | N |
| 1 | L7020 | ELECTRONIC GREIFER, OTTO BOCK OR | 1/1/2007 | INVALID | N |
| 1 | L7025 | ELECTRONIC HAND, OTTO BOCK OR EQ | 1/1/2007 | INVALID | N |
| 1 | L7030 | ELECTRONIC HAND, SYSTEM TEKNIK, | 1/1/2007 | INVALID | N |
| 1 | L7035 | ELECTRONIC GREIFER, OTTO BOCK OR | 1/1/2007 | INVALID | N |
| 1 | L7040 | PREHENSILE ACTUATOR, HOSMER OR E | 1/1/1994 | NC | 9 |
| 1 | L7045 | ELECTRONIC HOOK, CHILD, MICHIGAN | 1/1/1994 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L7170 | ELECTRONIC ELBOW, HOSMER OR EQUA | 1/1/1994 | NC | 9 |
| 1 | L7180 | ELECTRONIC ELBOW, MICROPROCESSOR | 1/1/1994 | NC | 9 |
| 1 | L7185 | ELECTRONIC ELBOW, ADOLESCENT, VA | 1/1/1994 | NC | 9 |
| 1 | L7186 | ELECTRONIC ELBOW, CHILD, VARIETY | 1/1/1994 | NC | 9 |
| 1 | L7190 | ELECTRONIC ELBOW, ADOLESCENT, VA | 1/1/1994 | NC | 9 |
| 1 | L7191 | ELECTRONIC ELBOW, CHILD, VARIETY | 1/1/1994 | NC | 9 |
| 1 | L7260 | ELECTRONIC WRIST ROTATOR, OTTO B | 1/1/1994 | NC | 9 |
| 1 | L7261 | ELECTRONIC WRIST ROTATOR, FOR UT | 1/1/1994 | NC | 9 |
| 1 | L7266 | SERVO CONTROL, STEEPER OR EQUAL | 1/1/1994 | NC | 9 |
| 1 | L7272 | ANALOGUE CONTROL, UNB OR EQUAL | 1/1/1994 | NC | 9 |
| 1 | L7274 | PROPORTIONAL CONTROL, 6-12 VOLT, | 1/1/1994 | NC | 9 |
| 1 | L7360 | SIX VOLT BATTERY, OTTO BOCK OR E | 1/1/1994 | NC | 9 |
| 1 | L7362 | BATTERY CHARGER, SIX VOLT, OTTO | 1/1/1994 | NC | 9 |
| 1 | L7364 | TWELVE VOLT BATTERY, UTAH OR EQU | 1/1/1994 | NC | 9 |
| 1 | L7366 | BATTERY CHARGER, TWELVE VOLT, UT | 1/1/1994 | NC | 9 |
| 1 | L7367 | LITHIUM ION BATTERY, REPLACEMENT | 5/9/2005 | NC | 9 |
| 1 | L7368 | LITHIUM ION BATTERY CHARGER | 5/9/2005 | NC | 9 |
| 1 | L7499 | UNLISTED PROCEDURES FOR UPPER EX | 1/1/1994 | $0.01 | 5 |
| 1 | L7500 | REPAIR OF PROSTHETIC DEVICE, HOU | 5/9/2005 | NC | 9 |
| 1 | L7510 | REPAIR OF PROSTHETIC DEVICE, REP | 10/1/2005 | $200.92 | 3 |
| 1 | L8000 | BREAST PROSTHESIS, MASTECTOMY BR | 10/1/2006 | $29.78 | 3 |
| 1 | L8001 | BREAST PROSTHESIS, MASTECTOMY BR | 5/9/2005 | NC | 9 |
| 1 | L8002 | BREAST PROSTHESIS, MASTECTOMY BR | 5/9/2005 | NC | 9 |
| 1 | L8010 | BREAST PROSTHESIS, MASTECTOMY SL | 6/16/2002 | NC | 9 |
| 1 | L8015 | EXTERNAL BREAST PROSTHESIS GARME | 10/1/2006 | $44.06 | 3 |
| 1 | L8020 | BREAST PROSTHESIS, MASTECTOMY FO | 10/1/2006 | $173.67 | 3 |
| 1 | L8030 | BREAST PROSTHESIS, SILICONE OR E | 10/1/2006 | $227.41 | 3 |
| 1 | L8035 | CUSTOM BREAST PROSTHESIS, POST M | 5/9/2005 | NC | 9 |
| 1 | L8039 | BREAST PROSTHESIS, NOT OTHERWISE | 5/9/2005 | NC | 9 |
| 1 | L8049 | REPAIR OR MODIFICATION OF MAXILL | 10/1/2005 | $17.32 | 3 |
| 1 | L8100 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8110 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8120 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8130 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8140 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8150 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8160 | ELASTIC SUPPORTY, ELASTIC STOCKI | 1/1/2006 | INVALID | N |
| 1 | L8170 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8180 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8190 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8195 | GRADIENT COMPRESSION STOCKING, W | 1/1/2006 | INVALID | N |
| 1 | L8200 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| 1 | L8210 | GRADIENT COMPRESSION STOCKING, C | 1/1/2006 | INVALID | N |
| 1 | L8220 | GRADIENT COMPRESSION STOCKING, L | 1/1/2006 | INVALID | N |
| 1 | L8230 | GRADIENT COMPRESSION STOCKING, G | 1/1/2006 | INVALID | N |
| 1 | L8300 | TRUSS, SINGLE WITH STANDARD PAD | 10/1/2006 | $75.54 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L8310 | TRUSS, DOUBLE WITH STANDARD PADS | 10/1/2006 | $105.82 | 3 |
| 1 | L8320 | TRUSS, ADDITION TO STANDARD PAD, | 10/1/2006 | $40.28 | 3 |
| 1 | L8330 | TRUSS, ADDITION TO STANDARD PAD, | 10/1/2006 | $35.59 | 3 |
| 1 | L8400 | PROSTHETIC SHEATH, BELOW KNEE, E | 10/1/2006 | $13.37 | 3 |
| 1 | L8410 | PROSTHETIC SHEATH, ABOVE KNEE, E | 10/1/2006 | $19.05 | 3 |
| 1 | L8415 | PROSTHETIC SHEATH, UPPER LIMB, E | 10/1/2006 | $19.57 | 3 |
| 1 | L8417 | PROSTHETIC SHEATH/SOCK, INCLUDIN | 10/1/2006 | $53.21 | 3 |
| 1 | L8420 | PROSTHETIC SOCK, MULTIPLE PLY, B | 10/1/2006 | $14.46 | 3 |
| 1 | L8430 | PROSTHETIC SOCK, MULTIPLE PLY, A | 10/1/2006 | $16.53 | 3 |
| 1 | L8435 | PROSTHETIC SOCK, MULTI PLY, UPPE | 10/1/2006 | $20.21 | 3 |
| 1 | L8440 | PROSTHETIC SHRINKER, BELOW KNEE, | 10/1/2006 | $30.14 | 3 |
| 1 | L8460 | PROSTHETIC SHRINKER, ABOVE KNEE, | 10/1/2006 | $62.91 | 3 |
| 1 | L8465 | PROSTHETIC SHRINKER, UPPER LIMB, | 10/1/2006 | $35.16 | 3 |
| 1 | L8470 | STUMP SOCK, SINGLE PLY, FITTING, | 10/1/2006 | $4.81 | 3 |
| 1 | L8480 | PROSTHETIC SOCK, SINGLE PLY, FIT | 10/1/2006 | $8.84 | 3 |
| 1 | L8485 | PROSTHETIC SOCK, SINGLE PLY, FIT | 10/1/2006 | $10.36 | 3 |
| 1 | L8490 | ADDITION TO PROSTHETIC SHEATH/SO | 1/1/2005 | INVALID | N |
| 1 | L8499 | UNLISTED PROCEDURE FOR MISCELLAN | 10/1/2005 | $928.80 | 3 |
| 1 | L8509 | TRACHO-ESOPHAGEAL VOICE PROSTHES | 10/1/2006 | $81.75 | 3 |
| 1 | L8511 | INSERT FOR INDWELLING TRACHEOESO | 5/9/2005 | NC | 9 |
| 1 | L8512 | GELATIN CAPSULES OR EQUIVALENT, | 5/9/2005 | NC | 9 |
| 1 | L8513 | CLEANING DEVICE USED WITH TRACHE | 5/9/2005 | NC | 9 |
| 1 | L8514 | TRACHEOESOPHAGEAL PUNCTURE DILAT | 5/9/2005 | NC | 9 |
| 1 | L8600 | IMPLANTABLE BREAST PROSTHESIS, S | 1/1/1994 | NC | 9 |
| 1 | L8603 | INJECTABLE BULKING AGENT, COLLAG | 1/1/1995 | NC | 9 |
| 1 | L8606 | INJECTABLE BULKING AGENT, SYNTHE | 1/1/2001 | NC | 9 |
| 1 | L8609 | ARTIFICIAL CORNEA | 1/1/2006 | NC | 9 |
| 1 | L8610 | OCULAR IMPLANT | 1/1/1994 | NC | 9 |
| 1 | L8612 | AQUEOUS SHUNT | 1/1/1994 | NC | 9 |
| 1 | L8613 | OSSICULA IMPLANT | 1/1/1994 | NC | 9 |
| 1 | L8614 | COCHLEAR DEVICE/SYSTEM | 4/1/2002 | NC | 9 |
| 1 | L8630 | METACARPOPHALANGEAL JOINT IMPLAN | 1/1/1994 | NC | 9 |
| 1 | L8631 | METACARPAL PHALANGEAL JOINT REPL | 5/9/2005 | NC | 9 |
| 1 | L8641 | METATARSAL JOINT IMPLANT | 1/1/1994 | NC | 9 |
| 1 | L8642 | HALLUX IMPLANT | 1/1/1994 | NC | 9 |
| 1 | L8658 | INTERPHALANGEAL JOINT IMPLANT | 1/1/1994 | NC | 9 |
| 1 | L8659 | INTERPHALANGEAL FINGER JOINT REP | 5/9/2005 | NC | 9 |
| 1 | L8670 | VASCULAR GRAFT MATERIAL, SYNTHET | 1/1/1994 | NC | 9 |
| 1 | L8680 | IMPLANTABLE NEUROSTIMULATOR ELEC | 1/1/2006 | NC | 9 |
| 1 | L8681 | PATIENT PROGRAMMER (EXTERNAL) FO | 1/1/2006 | NC | 9 |
| 1 | L8682 | IMPLANTABLE NEUROSTIMULATOR RADI | 1/1/2006 | NC | 9 |
| 1 | L8683 | RADIOFREQUENCY TRANSMITTER (EXTE | 1/1/2006 | NC | 9 |
| 1 | L8684 | RADIOFREQUENCY TRANSMITTER (EXT) | 1/1/2006 | NC | 9 |
| 1 | L8685 | IMPLANTABLE NEUROSTIMULATOR PULS | 1/1/2006 | NC | 9 |
| 1 | L8686 | IMPLANTABLE NEUROSTIMULATOR PULS | 1/1/2006 | NC | 9 |
| 1 | L8687 | IMPLANTABLE NEUROSTIMULATOR PULS | 1/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | L8688 | IMPLANTABLE NEUROSTIMULATOR PULS | 1/1/2006 | NC | 9 |
| 1 | L8689 | EXTERNAL RECHARGING SYSTEM FO RI | 1/1/2006 | NC | 9 |
| 1 | L8699 | PROSTHETIC IMPLANT, NOS | 1/1/2002 | NC | 9 |
| 1 | M0064 | BREIF OFFICE VISIT FOR THE SOLE | 1/1/2007 | $18.68 | 3 |
| 1 | M0075 | CELLULAR THERAPY | 1/1/1989 | NC | 9 |
| 1 | M0076 | PROLOTHERAPY | 1/1/1989 | NC | 9 |
| 1 | M0100 | INTRAGASTRIC HYPOTHERMIA USING G | 1/1/1994 | NC | 9 |
| 1 | M0300 | IV CHELATION THERAPY (CHEMICAL E | 2/1/1994 | NC | 9 |
| 1 | M0301 | FABRIC WRAPPING OF ABDOMINAL ANE | 1/1/1994 | NC | 9 |
| 1 | M0302 | ASSESSMENT OF CARDIAC OUTPUT BY | 4/1/2002 | INVALID | N |
| 1 | P9019 | PLATELET CONCENTRATE EACH UNIT | 10/1/2004 | NC | 9 |
| 1 | P9021 | RED BLOOD CELLS, EACH UNIT | 3/1/1987 | NC | 9 |
| 1 | P9612 | CATHETERIZATION FOR COLLECTION O | 11/1/2001 | $2.22 | 3 |
| 1 | Q0035 | CARDIOKYMOGRAPHY | 1/1/1994 | NC | 9 |
| 1 | Q0081 | INFUSION THERAPY, USING OTHER TH | 9/1/2002 | $30.00 | 3 |
| 1 | Q0083 | CHEMOTHERAPY ADMINISTRATION BY O | 1/1/1999 | $30.00 | 3 |
| 1 | Q0084 | CHEMOTHERAPY ADMINISTRATION BY I | 1/1/1999 | $30.00 | 3 |
| 1 | Q0085 | CHEMOTHERAPY ADMINISTRATION BY B | 1/1/1999 | $30.00 | 3 |
| 1 | Q0086 | PHYSICAL THERAPY EVALUATION/TREA | 4/1/2004 | INVALID | N |
| 1 | Q0091 | SCREENING PAP SMEAR; OBTAINING, | 1/1/2005 | NC | 9 |
| 1 | Q0111 | WET MOUNTS, INCLUDING REARATOPMS | 1/1/2006 | $3.55 | 3 |
| 1 | Q0136 | INJECTION, EPOETIN ALPHA, (FOR N | 1/1/2006 | INVALID | N |
| 1 | Q0137 | INJECTION, DARBEPOETIN ALFA, 1 M | 1/1/2006 | INVALID | N |
| 1 | Q0144 | AZITHROMYCIN DIHYDRATE, ORAL, CA | 4/1/2002 | NC | 9 |
| 1 | Q0160 | FACTOR IX (ANTIHEMOPHILIC FACTOR | 4/1/2002 | INVALID | N |
| 1 | Q0161 | FACTOR IX (ANTIHEMOPHILIC FACTOR | 4/1/2002 | INVALID | N |
| 1 | Q0163 | DIPHENHYDRAMINE HYDROCHLORIDE, 5 | 11/1/2006 | $0.03 | 3 |
| 1 | Q0164 | PROCHLORPERAZINE MALEATE, 5 MG, | 1/1/2007 | $0.03 | 3 |
| 1 | Q0165 | PROCHLORPERAZINE MALEATE, 10 MG, | 1/1/2007 | $0.05 | 3 |
| 1 | Q0166 | GRANISETRON HYDROCHLORIDE, 1 MG, | 1/1/2007 | $44.17 | 3 |
| 1 | Q0167 | DRONABINOL, 2.5 MG, ORAL, FDA AP | 1/1/2007 | $4.65 | 3 |
| 1 | Q0168 | DRONABINOL, 5 MG, ORAL, FDA APPR | 1/1/2007 | $10.05 | 3 |
| 1 | Q0169 | PROMETHAZINE HYDROCHLORIDE, 12.5 | 11/1/2006 | $0.39 | 3 |
| 1 | Q0170 | PROMETHAZINE HYDROCHLORIDE, 25 M | 1/1/2007 | $0.39 | 3 |
| 1 | Q0171 | CHLORPROMAZINE HYDROCHLORIDE, 10 | 11/1/2006 | $0.02 | 3 |
| 1 | Q0172 | CHLORPROMAZINE HYDROCHLORIDE, 25 | 11/1/2006 | $0.05 | 3 |
| 1 | Q0173 | TRIMETHOBENZAMIDE HYDROCHLORIDE, | 1/1/2007 | $0.33 | 3 |
| 1 | Q0174 | THIETHYLPERAZINE MALEATE, 10 MG, | 1/30/2006 | $0.83 | 3 |
| 1 | Q0175 | PERPHENZAINE, 4 MG, ORAL, FDA AP | 1/1/2007 | $0.19 | 3 |
| 1 | Q0176 | PERPHENZAINE, 8 MG, ORAL, FDA AP | 1/1/2007 | $0.21 | 3 |
| 1 | Q0177 | HYDROXYZINE PAMOATE, 25 MG, ORAL | 11/1/2006 | $0.06 | 3 |
| 1 | Q0178 | HYDROXYZINE PAMOATE, 50 MG, ORAL | 1/1/2007 | $0.06 | 3 |
| 1 | Q0179 | ONDANSETRON HYDRCHLORIDE, 8 MG, | 1/1/2007 | $36.83 | 3 |
| 1 | Q0180 | DOLASETRON MESYLATE, 100 MG, ORA | 1/1/2007 | $48.71 | 3 |
| 1 | Q0181 | UNSPECIFIED ORAL DOSAGE FORM, FD | 6/13/2005 | $0.01 | 5 |
| 1 | Q0182 | DERMAL AND EPIDERMAL, TISSUE OF | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | Q0183 | DERMAL TISSUE, OF HUMAN ORIGIN, | 1/1/2005 | INVALID | N |
| 1 | Q0184 | DERMAL TISSUE, OF HUMAN ORIGIN, | 1/1/2003 | INVALID | N |
| 1 | Q0185 | DERMAL AND EPIDERMAL TISSUE, OF | 4/1/2002 | INVALID | N |
| 1 | Q0187 | FACTOR VIIA (COAGULATION FACTOR, | 1/1/2006 | INVALID | N |
| 1 | Q0480 | DRIVER FOR USE WITH PNEUMATIC VE | 1/1/2006 | NC | 9 |
| 1 | Q0481 | MICROPROCESSOR CONTROL UNIT FOR | 1/1/2006 | NC | 9 |
| 1 | Q0482 | MICROPROCESSOR CONTROL UNIT FOR | 1/1/2006 | NC | 9 |
| 1 | Q0483 | MONITOR/DISPLAY MODULE FOR USE W | 1/1/2006 | NC | 9 |
| 1 | Q0484 | MONITOR/DISPLAY MODULE FOR USE W | 1/1/2006 | NC | 9 |
| 1 | Q0485 | MONITOR CONTROL CABLE FOR USE WI | 1/1/2006 | NC | 9 |
| 1 | Q0486 | MONITOR CONTROL CABLE FOR USE WI | 1/1/2006 | NC | 9 |
| 1 | Q0487 | LEADS (PNEUMATIC/ELECTRICAL) FOR | 1/1/2006 | NC | 9 |
| 1 | Q0488 | POWER PACK BASE FOR USE WITH ELE | 1/1/2006 | NC | 9 |
| 1 | Q0489 | POWER PACK BASE FOR USE WITH ELE | 1/1/2006 | NC | 9 |
| 1 | Q0490 | EMERGENCY POWER SOURCE FOR USE W | 1/1/2006 | NC | 9 |
| 1 | Q0491 | EMERGENCY POWER SOURCE FOR USE W | 1/1/2006 | NC | 9 |
| 1 | Q0492 | EMERGENCY POWER SUPPLY CABLE FOR | 1/1/2006 | NC | 9 |
| 1 | Q0493 | EMERGENCY POWER SUPPLY CABLE FOR | 1/1/2006 | NC | 9 |
| 1 | Q0494 | EMERGENCY HAND PUMP FOR USE WITH | 1/1/2006 | NC | 9 |
| 1 | Q0495 | BATTERY/POWER PACK CHARGER FOR U | 1/1/2006 | NC | 9 |
| 1 | Q0496 | BATTERY FOR USE WITH ELECTRIC OR | 1/1/2006 | NC | 9 |
| 1 | Q0497 | BATTERY CLIPS FOR USE WITH ELECT | 1/1/2006 | NC | 9 |
| 1 | Q0498 | HOLSTER FOR USE WITH ELECTRIC OR | 1/1/2006 | NC | 9 |
| 1 | Q0499 | BELT/VEST FOR USE WITH ELECTRIC | 1/1/2006 | NC | 9 |
| 1 | Q0500 | FILTERS FOR USE WITH ELECTRIC OR | 1/1/2006 | NC | 9 |
| 1 | Q0501 | SHOWER COVER FOR USE WITH ELECTR | 1/1/2006 | NC | 9 |
| 1 | Q0502 | MOBILITY CART FOR PNEUMATIC VENT | 1/1/2006 | NC | 9 |
| 1 | Q0503 | BATTERY FOR PNEUMATIC VENTRICULA | 1/1/2006 | NC | 9 |
| 1 | Q0504 | POWER ADAPTER FOR PNEUMATIC VENT | 1/1/2006 | NC | 9 |
| 1 | Q0505 | MISCELLANEOUS SUPPLY OR ACCESSOR | 1/1/2006 | NC | 9 |
| 1 | Q0510 | PHARMACY SUPPLY FEE FOR INITIAL | 1/1/2006 | NC | 9 |
| 1 | Q0511 | PHARMACY SUPPLY FEE FOR ORAL ANT | 1/1/2006 | NC | 9 |
| 1 | Q0512 | PHARMACY SUPPLY FEE FOR ORAL ANT | 1/1/2006 | NC | 9 |
| 1 | Q0513 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | NC | 9 |
| 1 | Q0514 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | NC | 9 |
| 1 | Q0515 | INJECTION, SERMORELIN ACETATE, 1 | 11/1/2006 | $1.75 | 3 |
| 1 | Q1001 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2006 | INVALID | N |
| 1 | Q1002 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2006 | INVALID | N |
| 1 | Q1003 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2000 | NC | 9 |
| 1 | Q1004 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2000 | NC | 9 |
| 1 | Q1005 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2000 | NC | 9 |
| 1 | Q2001 | ORAL, CABERGOLINE, 0.5 MG | 1/1/2006 | INVALID | N |
| 1 | Q2002 | INJECTION, ELLIOTTS B SOLUTION, | 1/1/2006 | INVALID | N |
| 1 | Q2003 | INJECTION, APROTININ, 10,000 KIU | 1/1/2006 | INVALID | N |
| 1 | Q2004 | IRRIGATION SOLUTION FOR TREATMEN | 1/31/2005 | $28.25 | 3 |
| 1 | Q2005 | INJECTION, CORTICORELIN OVINE TR | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | Q2006 | INJECTION, DIGOXIN IMMUNE FAB (O | 1/1/2006 | INVALID | N |
| 1 | Q2007 | INJECTION, ETHANOLAMINE OLEATE, | 1/1/2006 | INVALID | N |
| 1 | Q2008 | INJECTION, FOMEPIZOLE, 15 MG | 1/1/2006 | INVALID | N |
| 1 | Q2009 | INJECTION, FOSPHENYTOIN, 50 MG | 1/1/2007 | $5.66 | 3 |
| 1 | Q2010 | INJECTION, GLATIRAMER ACETATE, P | 4/1/2004 | INVALID | N |
| 1 | Q2011 | INJECTION, HEMIN, PER 1 MG | 1/1/2006 | INVALID | N |
| 1 | Q2012 | INJECTION, PEGADEMASE BOVINE, 25 | 1/1/2006 | INVALID | N |
| 1 | Q2013 | INJECTION, PENTASTARCH, 10% SOLU | 1/1/2006 | INVALID | N |
| 1 | Q2014 | INJECTION, SERMORELIN ACETATE, 0 | 1/1/2006 | INVALID | N |
| 1 | Q2015 | INJECTION, SOMATREM, 5 MG | 4/1/2002 | INVALID | N |
| 1 | Q2016 | INJECTION, SOMATROPIN, 1 MG | 4/1/2002 | INVALID | N |
| 1 | Q2017 | INJECTION, TENIPOSIDE, 50 MG | 11/1/2006 | $264.88 | 3 |
| 1 | Q2018 | INJECTION, UROFOLLITROPIN, 75 IU | 1/1/2006 | INVALID | N |
| 1 | Q2019 | INJECTION, BASILIXIMAB, 20 MG | 1/1/2006 | INVALID | N |
| 1 | Q2020 | INJECTION, HISTRELIN ACETATE, 10 | 1/1/2006 | INVALID | N |
| 1 | Q2021 | INJECTION, LEPIRUDIN, 50 MG | 1/1/2006 | INVALID | N |
| 1 | Q2022 | VON WILLEBRAND FACTOR COMPLEX, H | 1/1/2006 | INVALID | N |
| 1 | Q3013 | INJECITON, VERTEPORFIN, 15 MG | 1/1/2002 | INVALID | N |
| 1 | Q3014 | TELEHEALTH ORIGINATING SITE FACI | 4/1/2005 | $20.00 | 3 |
| 1 | Q3021 | INJECTION, HEPATITIS B VACCINE, | 1/1/2003 | INVALID | N |
| 1 | Q3022 | INJECTION, HEPATITIS B VACCINE, | 1/1/2003 | INVALID | N |
| 1 | Q3023 | INJECTION, HEPATITIS B VACCINE, | 1/1/2003 | INVALID | N |
| 1 | Q3025 | INJECTION, INTERFERON BETA-1A, 1 | 11/1/2006 | $108.04 | 3 |
| 1 | Q3026 | INJECTION, INTERFERON BETA-1A, 1 | 1/1/2003 | $89.69 | 3 |
| 1 | Q3031 | COLLAGEN SKIN TEST | 1/1/2004 | NC | 9 |
| 1 | Q4001 | CAST SUPPLIES, BODY CAST ADULT, | 7/1/2001 | $34.78 | 3 |
| 1 | Q4002 | CAST SUPPLIES, BODY CAST ADULT, | 7/1/2001 | $131.44 | 3 |
| 1 | Q4003 | CAST SUPPLIES, APPLICATION OF SH | 7/1/2001 | $24.98 | 3 |
| 1 | Q4004 | CAST SUPPLIES, APPLICATION OF SH | 7/1/2001 | $86.48 | 3 |
| 1 | Q4005 | CAST SUPPLIES, LONG ARM CAST, AD | 7/1/2001 | $9.21 | 3 |
| 1 | Q4006 | CAST SUPPLIES, LONG ARM CAST, AD | 7/1/2001 | $20.76 | 3 |
| 1 | Q4007 | CAST SUPPLIES, LONG ARM CAST, PE | 7/1/2001 | $4.61 | 3 |
| 1 | Q4008 | CAST SUPPLIES, LONG ARM CAST, PE | 7/1/2001 | $10.38 | 3 |
| 1 | Q4009 | CAST SUPPLIES, SHORT ARM CAST, A | 7/1/2001 | $6.14 | 3 |
| 1 | Q4010 | CAST SUPPLIES, SHORT ARM CAST, A | 7/1/2001 | $13.84 | 3 |
| 1 | Q4011 | CAST SUPPLIES, SHORT ARM CAST, P | 7/1/2001 | $3.07 | 3 |
| 1 | Q4012 | CAST SUPPLIES, SHORT ARM CAST, P | 7/1/2001 | $6.92 | 3 |
| 1 | Q4013 | CAST SUPPLIES, GUANTLET CAST (IN | 7/1/2001 | $11.18 | 3 |
| 1 | Q4014 | CAST SUPPLIES, GAUNTLET CAST (IN | 7/1/2001 | $18.88 | 3 |
| 1 | Q4015 | CAST SUPPLIES, GAUNTLET CAST (IN | 7/1/2001 | $5.59 | 3 |
| 1 | Q4016 | CAST SUPPLIES, GAUNTLET CAST (IN | 7/1/2001 | $9.44 | 3 |
| 1 | Q4017 | CAST SUPPLIES, LONG ARM SPLINT, | 7/1/2001 | $6.47 | 3 |
| 1 | Q4018 | CAST SUPPLIES, LONG ARM SPLINT, | 7/1/2001 | $10.32 | 3 |
| 1 | Q4019 | CAST SUPPLIES, LONG ARM SPLINT, | 7/1/2001 | $3.24 | 3 |
| 1 | Q4020 | CAST SUPPLIES, LONG ARM SPLINT, | 7/1/2001 | $5.16 | 3 |
| 1 | Q4021 | CAST SUPPLIES, SHORT ARM SPLINT, | 7/1/2001 | $4.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | Q4022 | CAST SUPPLIES, SHORT ARM SPLINT, | 7/1/2001 | $8.64 | 3 |
| 1 | Q4023 | CAST SUPPLIES, SHORT ARM SPLINT, | 7/1/2001 | $2.40 | 3 |
| 1 | Q4024 | CAST SUPPLIES, SHORT ARM SPLINT, | 7/1/2001 | $4.32 | 3 |
| 1 | Q4025 | CAST SUPPLIES, HIP SPICA (ONE OR | 7/1/2001 | $26.86 | 3 |
| 1 | Q4026 | CAST SUPPLIES, HIP SPICA (ONE OR | 7/1/2001 | $83.85 | 3 |
| 1 | Q4027 | CAST SUPPLIES, HIP SPICA (ONE OR | 7/1/2001 | $13.43 | 3 |
| 1 | Q4028 | CAST SUPPLIES, HIP SPICA (ONE OR | 7/1/2001 | $41.93 | 3 |
| 1 | Q4029 | CAST SUPPLIES, LONG LEG CAST, AD | 7/1/2001 | $20.53 | 3 |
| 1 | Q4030 | CAST SUPPLIES, LONG LEG CAST, AD | 7/1/2001 | $54.05 | 3 |
| 1 | Q4031 | CAST SUPPLIES, LONG LEG CAST, PE | 7/1/2001 | $10.27 | 3 |
| 1 | Q4032 | CAST SUPPLIES, LONG LEG CAST, PE | 7/1/2001 | $27.03 | 3 |
| 1 | Q4033 | CAST SUPPLIES, LONG LEG CYLINDER | 7/1/2001 | $19.15 | 3 |
| 1 | Q4034 | CAST SUPPLIES, LONG LEG CYLINDER | 7/1/2001 | $47.65 | 3 |
| 1 | Q4035 | CAST SUPPLIES, LONG LEG CYLINDER | 7/1/2001 | $9.58 | 3 |
| 1 | Q4036 | CAST SUPPLIES, LONG LEG CYLINDER | 7/1/2001 | $23.83 | 3 |
| 1 | Q4037 | CAST SUPPLIES, SHORT LEG CAST, A | 7/1/2001 | $11.69 | 3 |
| 1 | Q4038 | CAST SUPPLIES, SHORT LEG CAST, A | 7/1/2001 | $29.27 | 3 |
| 1 | Q4039 | CAST SUPPLIES, SHORT LEG CAST, P | 7/1/2001 | $5.85 | 3 |
| 1 | Q4040 | CAST SUPPLIES, SHORT LEG CAST, P | 7/1/2001 | $14.64 | 3 |
| 1 | Q4041 | CAST SUPPLIES, LONG LEG SPLINT, | 7/1/2001 | $14.21 | 3 |
| 1 | Q4042 | CAST SUPPLIES, LONG LEG SPLINT, | 7/1/2001 | $24.25 | 3 |
| 1 | Q4043 | CAST SUPPLIES, LONG LEG SPLINT, | 7/1/2001 | $7.10 | 3 |
| 1 | Q4044 | CAST SUPPLIES, LONG LEG SPLINT, | 7/1/2001 | $12.13 | 3 |
| 1 | Q4045 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $8.25 | 3 |
| 1 | Q4046 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $13.27 | 3 |
| 1 | Q4047 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $4.12 | 3 |
| 1 | Q4048 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $6.64 | 3 |
| 1 | Q4049 | FINGER SPLINT, STATIC | 7/1/2001 | $1.50 | 3 |
| 1 | Q4050 | CAST SUPPLIES, FOR UNLISTED TYPE | 7/1/2001 | $50.00 | 3 |
| 1 | Q4051 | SPLINT SUPPLIES, MISC (INC THERM | 7/1/2001 | $50.00 | 3 |
| 1 | Q4053 | INJECTION, PEGFILGRASTIM, 1 MG | 4/1/2004 | INVALID | N |
| 1 | Q4054 | INJECTION, DARBEPOETIN ALFA, 1 M | 1/1/2006 | INVALID | N |
| 1 | Q4055 | INJECTION, EPOETIN ALFA, 1000 UN | 1/1/2006 | INVALID | N |
| 1 | Q4075 | INJECTION, ACYCLOVIR, 5 MG | 1/1/2006 | INVALID | N |
| 1 | Q4076 | INJECTION, DOPAMINE HCL, 40 MG | 1/1/2006 | INVALID | N |
| 1 | Q4077 | INJECTION, TREPROSTINIL, 1 MG | 1/1/2006 | INVALID | N |
| 1 | Q4079 | INJECTION, NATALIZUMAB, PER 1 MG | 4/15/2006 | NC | 9 |
| 1 | Q4080 | ILOPROST, INHALATION SOLUTION, A | 11/1/2006 | $33.18 | 3 |
| 1 | Q4081 | INJECTION, EPOETIN ALFA, 100 UNI | 1/1/2007 | $0.95 | 3 |
| 1 | Q4082 | DRUG OR BIOLOGICAL, NOC, PART B | 1/1/2007 | $0.01 | 5 |
| 1 | Q9920 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9921 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9922 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9923 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9924 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9925 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | Q9926 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9927 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9928 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9929 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9930 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9931 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9932 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9933 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9934 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9935 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9936 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9937 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9938 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9939 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9940 | INJECTION OF EPO, PER 1000 UNITS | 4/1/2004 | INVALID | N |
| 1 | Q9941 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| 1 | Q9942 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| 1 | Q9943 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| 1 | Q9944 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| 1 | Q9945 | LOW OSMOLAR CONTRAST MATERIAL, U | 11/1/2006 | $0.29 | 3 |
| 1 | Q9946 | LOW OSMOLAR CONTRAST MATERIAL, 1 | 11/1/2006 | $1.96 | 3 |
| 1 | Q9947 | LOW OSMOLAR CONTRAST MATERIAL, 2 | 11/1/2006 | $1.42 | 3 |
| 1 | Q9948 | LOW OSMOLAR CONTRAST MATERIAL, 2 | 11/1/2006 | $0.27 | 3 |
| 1 | Q9949 | LOW OSMOLAR CONTRAST MATERIAL, 3 | 11/1/2006 | $0.35 | 3 |
| 1 | Q9950 | LOW OSMOLAR CONTRAST MATERIAL, 3 | 11/1/2006 | $0.21 | 3 |
| 1 | Q9951 | LOW OSMOLAR CONTRAST MATERIAL, 4 | 3/1/2006 | $0.60 | 3 |
| 1 | Q9952 | INJECTION, GADOLINIUM-BASED MAGN | 10/1/2005 | NC | 9 |
| 1 | Q9953 | INJECTION, IRON-BASED MAGNETIC R | 11/1/2006 | $30.41 | 3 |
| 1 | Q9954 | ORAL MAGNETIC RESONANCE CONTRAST | 11/1/2006 | $8.90 | 3 |
| 1 | Q9955 | INJECTION, PERFLEXANE LIPID MICR | 4/1/2005 | $0.01 | 5 |
| 1 | Q9956 | INJECTION, OCTAFLUOROPROPANCE MI | 11/1/2006 | $49.61 | 3 |
| 1 | Q9957 | INJECTION, PERFLUTREN LIPID MICR | 11/1/2006 | $61.64 | 3 |
| 1 | S0009 | INJECTION, BUTORPHANOL TARTRATE, | 4/1/2004 | INVALID | N |
| 1 | S0012 | BUTORPHANOL TARTRATE, NASAL SPRA | 1/1/2000 | NC | 9 |
| 1 | S0014 | TACRINE HYDROCHLORIDE, 10 MG | 1/1/2000 | NC | 9 |
| 1 | S0016 | INJECTION, AMIKACIN SULFATE, 500 | 1/1/2006 | INVALID | N |
| 1 | S0017 | INJECTION, AMINOCAPROIC ACID, 5 | 8/21/2006 | $2.69 | 3 |
| 1 | S0020 | INJECTION, BUPIVICAINE HYDROCHLO | 11/1/2006 | $8.70 | 3 |
| 1 | S0021 | INJECTION, CEFTOPERAZONE SODIUM, | 1/1/2002 | $18.00 | 3 |
| 1 | S0023 | INJECTION, CIMETIDINE HYDROCHLOR | 11/13/2006 | $1.88 | 3 |
| 1 | S0024 | INJECTION, CIPROFLOXACIN, 200 MG | 4/1/2002 | INVALID | N |
| 1 | S0028 | INJECTION, FAMOTIDINE, 20 MG | 12/1/2002 | $6.81 | 3 |
| 1 | S0029 | INJECTION, FLUCONAZOLE, 400 MG | 4/1/2002 | INVALID | N |
| 1 | S0030 | INJECTION, METRONIDAZOLE, 500 MG | 12/1/2002 | $15.34 | 3 |
| 1 | S0032 | INJECTION, NAFCILLIN SODIUM, 2 G | 10/10/2005 | $20.11 | 3 |
| 1 | S0034 | INJECTION, OFLOXACIN, 400 MG | 11/1/2006 | $28.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S0039 | INJECTION, SULFAMETHOXAZOLE AND | 2/13/2006 | $0.01 | 5 |
| 1 | S0040 | INJECTION, TICARCILLIN DISODIUM | 11/1/2006 | $16.99 | 3 |
| 1 | S0071 | INJECTION, ACYCLOVIR SODIUM, 50 | 1/1/2006 | INVALID | N |
| 1 | S0072 | INJECTION, AMIKACIN SULFATE, 100 | 1/1/2006 | INVALID | N |
| 1 | S0073 | INJECTION, AZTREONAM, 500 MG | 1/23/2006 | $14.96 | 3 |
| 1 | S0074 | INJECTION, CEFOTETAN DISODIUM, 5 | 7/11/2005 | $6.76 | 3 |
| 1 | S0077 | INJECTION, CLINDAMYCIN PHOSPHATE | 12/1/2002 | $8.56 | 3 |
| 1 | S0078 | INJECTION, FOSPHENYTOIN SODIUM, | 1/23/2006 | $116.54 | 3 |
| 1 | S0079 | INJECTION, OCTREOTIDE ACETATE, 1 | 4/1/2004 | INVALID | N |
| 1 | S0080 | INJECTION, PENTAMIDINE ISETHIONA | 1/30/2006 | $47.20 | 3 |
| 1 | S0081 | INJECTION, PIPERACILLIN SODIUM, | 10/10/2005 | $25.58 | 3 |
| 1 | S0085 | INJECTION, GATIFLOXACIN, 200 MG | 7/1/2003 | INVALID | N |
| 1 | S0086 | INJECTION, VERTEPORFIN, 15 MG | 4/1/2002 | INVALID | N |
| 1 | S0087 | INJECTION, ALEMTUZUMAB, 30 MG | 7/1/2003 | INVALID | N |
| 1 | S0088 | IMATINIB, 100 MG | 1/30/2006 | $27.52 | 3 |
| 1 | S0090 | SILDENAFIL CITRATE, 25 MG | 1/1/2000 | NC | 9 |
| 1 | S0091 | TEST, GRANISETRON HCL, 1 MG (FOR | 1/30/2006 | $195.20 | 3 |
| 1 | S0092 | INJECTION, HYDROMORPHONE HCL | 1/30/2006 | $113.35 | 3 |
| 1 | S0093 | INJECTION, MORPHINE SULFATE | 7/1/2005 | $47.19 | 3 |
| 1 | S0096 | INJECTION, ITRACONAZOLE, 200 MG | 4/1/2002 | INVALID | N |
| 1 | S0104 | ZIDOVUDINE, ORAL 100 MG | 1/1/2003 | NC | 9 |
| 1 | S0106 | BUPROPION HCL SUSTAINED RELEASE | 1/1/2003 | NC | 9 |
| 1 | S0107 | INJECTION, OMALIZUMAB, 25 MG | 1/1/2006 | INVALID | N |
| 1 | S0108 | MERCAPTOPURINE, ORAL, 50 MG | 1/1/2003 | NC | 9 |
| 1 | S0109 | MTHADONE, ORAL, 5 MG | 1/1/2005 | NC | 9 |
| 1 | S0114 | INJECTION, TREPROSTINIL SODIUM, | 1/1/2006 | INVALID | N |
| 1 | S0115 | BORTEZOMIB, 3.5 MG | 1/1/2005 | INVALID | N |
| 1 | S0116 | BEVACIZUMAB, 100 MG | 7/1/2006 | INVALID | N |
| 1 | S0117 | TRETINOIN, TOPICAL, 5 GRAMS | 1/1/2005 | NC | 9 |
| 1 | S0118 | INJECTION, ZICONOTIDE, FOR INTRA | 1/1/2006 | INVALID | N |
| 1 | S0122 | INJECTION, MENOTROPINS, 75 IU (R | 1/1/2003 | NC | 9 |
| 1 | S0124 | INJECTION, UROFOLLITROPIN, PURIF | 4/1/2004 | INVALID | N |
| 1 | S0126 | INJECTION, FOLLITROPIN ALFA, 75 | 1/1/2003 | NC | 9 |
| 1 | S0128 | INJECTION, FOLLITROPIN BETA, 75 | 1/1/2003 | NC | 9 |
| 1 | S0130 | INJECTION, CHORIONIC GONADOTROPI | 4/1/2004 | INVALID | N |
| 1 | S0132 | INJECTION, GANIRELIX ACETATE, 25 | 1/1/2003 | NC | 9 |
| 1 | S0133 | HISTRELIN, IMPLANT, 50 MG | 4/1/2006 | INVALID | N |
| 1 | S0135 | INJECTION, PEGFILGRASTIM, 6 MG | 4/1/2004 | INVALID | N |
| 1 | S0136 | CLOZAPINE, 25 MG (CLOZARIL) | 4/1/2003 | NC | 9 |
| 1 | S0137 | DIDANOSINE (DDI), 25 MG (VIDEX) | 4/1/2003 | NC | 9 |
| 1 | S0138 | FINASTERIDE, 5 MG | 4/1/2003 | NC | 9 |
| 1 | S0139 | MINOXIDIL, 10 MG | 4/1/2003 | NC | 9 |
| 1 | S0140 | SAQUINAVIR, 200 MG (FORTOVASE (O | 4/1/2003 | NC | 9 |
| 1 | S0141 | ZALCITABINE (DDC), 0.375 MG | 4/1/2003 | NC | 9 |
| 1 | S0142 | COLISTIMETHATE SODIUM, INHALATIO | 1/1/2006 | $0.01 | 5 |
| 1 | S0143 | AZTREONAM, INHALATION SOLUTION A | 1/1/2006 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S0145 | INJECTION, PEGYLATED INTERFERON | 7/1/2005 | NC | 9 |
| 1 | S0146 | INJECTION, PEGYLATED INTERFERON | 7/1/2005 | NC | 9 |
| 1 | S0147 | INJECTION, ALGLUCOSIDASE ALFA, 2 | 1/1/2007 | NC | 9 |
| 1 | S0155 | STERILE DILUTANT FOR EPOPROSTENO | 1/30/2006 | $16.15 | 3 |
| 1 | S0156 | EXEMESTANE, 25 MG | 1/23/2006 | $9.29 | 3 |
| 1 | S0157 | BECAPLERMIN GEL 0.01%, 0.5 GM | 1/23/2006 | $20.34 | 3 |
| 1 | S0158 | INJECTION, LARONIDASE, 0.58 MG ( | 1/1/2006 | INVALID | N |
| 1 | S0159 | INJECTION, AGALSIDASE BETA, 35 M | 1/1/2006 | INVALID | N |
| 1 | S0160 | DEXTROAMPHETAMINE SULFATE, 5 MG | 1/1/2005 | NC | 9 |
| 1 | S0161 | CALCITROL, 0.25 MG | 4/1/2004 | NC | 9 |
| 1 | S0162 | INJECTION, EFALIZUMAB, 125 MG (R | 11/1/2006 | $432.95 | 3 |
| 1 | S0163 | INJECTION, RISPERIDONE, LONG ACT | 1/1/2005 | INVALID | N |
| 1 | S0164 | INJECTION, PANTOPRAZOLE SODIUM, | 4/1/2004 | $30.00 | 3 |
| 1 | S0165 | INJECTION, ABARELIX, 100 MG | 1/1/2005 | INVALID | N |
| 1 | S0166 | INJECTION, OLANZAPINE, 2.5 MG (Z | 4/24/2006 | $6.49 | 3 |
| 1 | S0167 | INJECTION, APOMORPHINE HYDROCHLO | 1/1/2005 | $0.01 | 5 |
| 1 | S0168 | INJECTION, AZACITIDINE, 100 MG ( | 1/1/2006 | INVALID | N |
| 1 | S0170 | ANASTROZOLE, ORAL, 1 MG | 4/24/2006 | $9.11 | 3 |
| 1 | S0171 | INJECTION, BUMETANIDE, 0.5 MG | 12/1/2002 | $1.69 | 3 |
| 1 | S0172 | CHLORAMBUCIL, ORAL, 2 MG | 1/23/2006 | $2.34 | 3 |
| 1 | S0173 | DEXAMETHASONE, ORAL, 4 MG | 1/1/2006 | INVALID | N |
| 1 | S0174 | DOLASETRON MESYLATE, ORAL 50 MG | 8/1/2002 | $57.52 | 3 |
| 1 | S0175 | FLUTAMIDE, ORAL, 125 MG | 2/7/2005 | $2.72 | 3 |
| 1 | S0176 | HYDROXYUREA, ORAL, 500 MG (DROXI | 3/25/2005 | NC | 9 |
| 1 | S0177 | LEVAMISOLE HCL, ORAL, 50 MG | 3/25/2005 | NC | 9 |
| 1 | S0178 | LOMUSTINE, ORAL, 10 MG | 2/7/2005 | $9.05 | 3 |
| 1 | S0179 | MEGESTROL ACETATE, ORAL, 20 MG | 3/25/2005 | NC | 9 |
| 1 | S0180 | ETONOGESTREL (CONTRACEPTIVE) IMP | 1/1/2007 | $653.75 | 3 |
| 1 | S0181 | ONDANSETRON HCL, ORAL, 4 MG (FOR | 11/1/2006 | $30.69 | 3 |
| 1 | S0182 | PROCARBAZINE HCL, ORAL, 50 MG | 10/10/2005 | $55.68 | 3 |
| 1 | S0183 | PROCHLORPERAZINE MALEATE, ORAL, | 8/1/2002 | $2.25 | 3 |
| 1 | S0187 | TAMOXIFEN CITRATE, ORAL, 10 MG | 2/7/2005 | $0.73 | 3 |
| 1 | S0189 | TESTOSTERONE PELLET, 75 MG | 1/1/2002 | $0.01 | 5 |
| 1 | S0190 | MIFEPRISTONE, ORAL, 200 MG | 1/1/2002 | $90.00 | 3 |
| 1 | S0191 | MISOPROSTOL, ORAL, 200 MCG | 12/1/2002 | $1.20 | 3 |
| 1 | S0194 | DIALYSIS/STRESS VITAMIN SUPPLEME | 1/1/2005 | NC | 9 |
| 1 | S0195 | PNEUMOCOCCAL CONJUGATE VACCINE, | 1/1/2003 | NC | 9 |
| 1 | S0196 | INJECTABLE POLY-L-LACTIC ACID, R | 1/1/2005 | NC | 9 |
| 1 | S0197 | PRENATAL VITAMINS, 30 DAY SUPPLY | 1/1/2006 | NC | 9 |
| 1 | S0198 | INJECTION, PEGAPTANIB SODIUM, 0. | 7/1/2006 | INVALID | N |
| 1 | S0199 | MEDICALLY INDUCED ABORTION BY OR | 8/1/2002 | $164.50 | 3 |
| 1 | S0201 | PARTIAL HOSPITALIZATION SERVICES | 1/1/2003 | NC | 9 |
| 1 | S0207 | PARAMEDIC INTERCEPT, NON-HOSPITA | 1/1/2003 | NC | 9 |
| 1 | S0208 | PARAMEDIC INTERCEPT, HOSPITAL-BA | 1/1/2003 | NC | 9 |
| 1 | S0220 | MEDICAL CONFERENCE BY A PHYSICIA | 1/1/2001 | NC | 9 |
| 1 | S0221 | MEDICAL CONFERENCE BY A PHYSICIA | 1/1/2001 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S0250 | COMPREHENSIVE GERIATRIC ASSESSME | 1/1/2003 | NC | 9 |
| 1 | S0255 | HOSPICE REFERRAL VISIT PERFORMED | 1/1/2003 | NC | 9 |
| 1 | S0257 | COUNSELING AND DISCUSSION REGARD | 1/1/2005 | NC | 9 |
| 1 | S0260 | HISTORY AND PHYSICAL RELATED TO | 1/1/2003 | NC | 9 |
| 1 | S0265 | GENETIC COUNSELING, UNDER PHYSIC | 1/1/2005 | NC | 9 |
| 1 | S0302 | COMPLETED EARLY PERIODIC SCREENI | 1/1/2003 | NC | 9 |
| 1 | S0310 | HSPITALIST SERVICES | 1/1/2003 | NC | 9 |
| 1 | S0315 | DISEASE MANAGEMENT PROGRAM; INIT | 1/1/2003 | NC | 9 |
| 1 | S0316 | DISEASE MANAGEMENT PROGRAM; FOLL | 1/1/2003 | NC | 9 |
| 1 | S0317 | DISEASE MANAGEMENT PROGRAM; PER | 1/1/2004 | NC | 9 |
| 1 | S0320 | TELEPHONE CALLS BY A REGISTERED | 1/1/2003 | NC | 9 |
| 1 | S0340 | LIFESTYLE MODIFICATION PROGRAM F | 1/1/2003 | NC | 9 |
| 1 | S0341 | LIFESTYLE MODIFICATION PROGRAM F | 1/1/2003 | NC | 9 |
| 1 | S0342 | LIFESTYLE MODIFICATION PROGRAM F | 1/1/2003 | NC | 9 |
| 1 | S0345 | ECG MONITORING UTILIZING A HOME | 4/1/2006 | NC | 9 |
| 1 | S0346 | ECG MONITORING UTILIZING A HOME | 4/1/2006 | NC | 9 |
| 1 | S0347 | ECG MONITORING UTILIZING A HOME | 4/1/2006 | NC | 9 |
| 1 | S0390 | ROUTINE FOOT CARE; REMOVAL AND/O | 1/1/2003 | NC | 9 |
| 1 | S0395 | IMPRESSION CASTING OF A FOOT PER | 1/1/2003 | NC | 9 |
| 1 | S0400 | GLOBAL FEE FOR EXTRACORPOREAL SH | 1/1/2003 | NC | 9 |
| 1 | S0500 | DISPOSABLE CONTACT LENS, PER LEN | 1/1/2003 | NC | 9 |
| 1 | S0504 | SINGLE VISION PRESCRIPTION LENS | 1/1/2003 | NC | 9 |
| 1 | S0506 | BIFOCAL VISION PRESCRIPTION LENS | 1/1/2003 | NC | 9 |
| 1 | S0508 | TRIFOCAL VISION PRESCRIPTION LEN | 1/1/2003 | NC | 9 |
| 1 | S0510 | NON-PRESCRIPTION LENS (SAFETY, A | 1/1/2003 | NC | 9 |
| 1 | S0512 | DAILY WEAR SPECIALTY CONTACT LEN | 1/1/2003 | NC | 9 |
| 1 | S0514 | COLOR CONTACT LENS, PER LENS | 1/1/2003 | NC | 9 |
| 1 | S0515 | SCLERAL LENS, LIQUID BANDAGE DEV | 1/1/2005 | NC | 9 |
| 1 | S0516 | SAFETY EYEGLASS FRAMES | 1/1/2003 | NC | 9 |
| 1 | S0518 | SUNGLASSES FRAMES | 1/1/2003 | NC | 9 |
| 1 | S0580 | POLYCARBONATE LENS | 1/1/2003 | NC | 9 |
| 1 | S0581 | NONSTANDARD LENS | 1/1/2003 | NC | 9 |
| 1 | S0590 | INTEGRAL LENS SERVICE, MISCELLAN | 1/1/2003 | NC | 9 |
| 1 | S0592 | COMPREHENSIVE CONTACT LENS EVALU | 1/1/2003 | NC | 9 |
| 1 | S0601 | SCREENING PROCTOSCOPY | 1/1/2000 | NC | 9 |
| 1 | S0605 | DIGITAL RECTAL EXAMINATION, ANNU | 1/1/2000 | NC | 9 |
| 1 | S0610 | ANNUAL GYNECOLOGICAL EXAMINATION | 1/1/2000 | NC | 9 |
| 1 | S0612 | ANNUAL GYNECOLOGICAL EXAMINATION | 1/1/2000 | NC | 9 |
| 1 | S0613 | ANNUAL GYNECOLOGICAL EXAMINATION | 1/1/2005 | NC | 9 |
| 1 | S0618 | AUDIOMETRY FOR HEARING AID EVALU | 1/1/2005 | NC | 9 |
| 1 | S0620 | ROUTINE OPHTHALMOLOGICAL EXAMINA | 10/1/2003 | $0.01 | 1 |
| 1 | S0621 | ROUTINE OPHTHALMOLOGICAL EXAMINA | 10/1/2003 | $0.01 | 1 |
| 1 | S0622 | PHYSICAL EXAM FOR COLLEGE, NEW O | 1/1/2003 | NC | 9 |
| 1 | S0625 | RETINAL TELESCREENING BY DIGITAL | 1/1/2006 | NC | 9 |
| 1 | S0630 | REMOVAL OF SUTURES BY A PHYSICIA | 1/1/2003 | NC | 9 |
| 1 | S0800 | LASER IN SITU KERATOMILEUSIS (LA | 1/1/2000 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S0810 | PHOTOREFRACTIVE KERATECTOMY (PRK | 1/1/2000 | NC | 9 |
| 1 | S0812 | PHOTOTHERAPEUTIC KERATECTOMY (PT | 1/1/2003 | NC | 9 |
| 1 | S0820 | COMPUTERIZED CORNEAL TOPOGRAPHY, | 8/1/2004 | $39.30 | 3 |
| 1 | S0830 | ULTRASOUND PACHYMETRY TO DETERMI | 1/1/2005 | INVALID | N |
| 1 | S1001 | DELUXE ITEM, PATIENT AWARE | 1/1/2003 | NC | 9 |
| 1 | S1002 | CUSTOMIZED ITEM | 1/1/2003 | NC | 9 |
| 1 | S1015 | IV TUBING EXTENSION SET | 1/1/2003 | NC | 9 |
| 1 | S1025 | INHALED NITRIC OXIDE FOR THE TRE | 1/1/2003 | NC | 9 |
| 1 | S1030 | CONTINUOUS NONINVASIVE GLUCOSE M | 1/1/2003 | NC | 9 |
| 1 | S1031 | CONTINUOUS NONINVASIVE GLUCOSE M | 1/1/2003 | NC | 9 |
| 1 | S2052 | TRANSPLANTATION OF SMALL INTESTI | 4/1/2002 | INVALID | N |
| 1 | S2053 | TRANSPLANTATION OF SMALL INTESTI | 10/1/2005 | $0.01 | 5 |
| 1 | S2054 | TRANSPLANTATION OF MULTIVISCERAL | 1/1/2000 | NC | 9 |
| 1 | S2055 | HARVESTING OF DONOR MULTIVISCERA | 1/1/2000 | NC | 9 |
| 1 | S2060 | LOBAR LUNG TRANSPLANTATION | 1/1/2003 | NC | 9 |
| 1 | S2061 | DONOR LOBECTOMY (LUNG) FOR TRANS | 1/1/2003 | NC | 9 |
| 1 | S2065 | SIMULTANEOUS PANCREAS KIDNEY TRA | 10/1/2005 | $0.01 | 5 |
| 1 | S2068 | BREAST RECONSTRUCTION W/DEEP INF | 4/1/2006 | $0.01 | 5 |
| 1 | S2070 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2004 | NC | 9 |
| 1 | S2075 | LAPAROSCOPY, SURGICAL; REPAIR IN | 4/1/2006 | $0.01 | 5 |
| 1 | S2076 | LAPAROSCOPY, SURGICAL; REPAIR UM | 4/1/2006 | $0.01 | 5 |
| 1 | S2077 | LAPAROSCOPY, SURGICAL; IMPLANT O | 4/1/2006 | $0.01 | 5 |
| 1 | S2078 | LAPAROSCOPIC SUPRACERVICAL HYSTE | 4/1/2006 | $0.01 | 5 |
| 1 | S2079 | LAPAROSCOPIC ESOPHAGOMYOTOMY (HE | 4/1/2006 | $0.01 | 5 |
| 1 | S2080 | LASER-ASSISTED UVULOPALATOPLASTY | 4/1/2006 | $0.01 | 5 |
| 1 | S2082 | LAPAROSCOPY, SURGICAL; GASTRIC R | 1/1/2006 | INVALID | N |
| 1 | S2083 | ADJUSTMENT OF GASTRIC BAND DIAME | 1/1/2005 | NC | 9 |
| 1 | S2085 | LAPAROSCOPY, GASTRIC RESTRICTIVE | 1/1/2005 | INVALID | N |
| 1 | S2090 | ABLATION, OPEN, ONE OR MORE RENA | 1/1/2006 | INVALID | N |
| 1 | S2091 | ABLATION, PERCUTANEOUS, ONE OR M | 1/1/2006 | INVALID | N |
| 1 | S2095 | TRANSCATHETER OCCLUSION OR EMBOL | 1/1/2004 | NC | 9 |
| 1 | S2102 | ISLET CELL TISSUE TRANSPLANT FRO | 1/1/2003 | NC | 9 |
| 1 | S2103 | ADRENAL TISSUE TRANSPLANT TO BRA | 1/1/2003 | NC | 9 |
| 1 | S2107 | ADOPTIVE IMMUNOTHERAPY IE, DEVEL | 1/1/2003 | NC | 9 |
| 1 | S2112 | ARTHROSCOPY, KNEE, SURGICAL FOR | 1/1/2003 | NC | 9 |
| 1 | S2113 | ARTHROSCOPY, KNEE, SURGICAL FOR | 1/1/2005 | INVALID | N |
| 1 | S2114 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2006 | NC | 9 |
| 1 | S2115 | OSTEOTOMY, PERIACETABULAR, WITH | 1/1/2003 | NC | 9 |
| 1 | S2117 | ARTHROEREISIS, SUBTALAR | 4/1/2006 | $0.01 | 5 |
| 1 | S2120 | LOW DENSITY LIPOPROTEIN (LDL) AP | 1/1/2003 | NC | 9 |
| 1 | S2130 | ENDOLUMINAL RADIOFREQUENCY ABLAT | 1/1/2005 | INVALID | N |
| 1 | S2135 | NEUROLYSIS, BY INJECTION, OF MET | 1/1/2004 | NC | 9 |
| 1 | S2140 | CORD BLOOD HARVESTING FOR TRANSP | 1/1/2003 | NC | 9 |
| 1 | S2142 | CORD BLOOD-DERIVED STEM-CELL TRA | 10/1/2005 | $0.01 | 5 |
| 1 | S2150 | BONE MARROW OR BLOOD-DERIVED PER | 10/1/2005 | $0.01 | 5 |
| 1 | S2152 | SOLID ORGAN(S), COMPLETE OR SEGM | 1/1/2005 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S2202 | ECHOSCLEROTHERAPY | 1/1/2003 | NC | 9 |
| 1 | S2205 | MINIMALLY INVASIVE DIRECT CORONA | 1/1/2000 | NC | 9 |
| 1 | S2206 | MINIMALLY INVASIVE DIRECT CORONA | 1/1/2000 | NC | 9 |
| 1 | S2207 | MINIMALLY INVASIVE DIRECT CORONA | 1/1/2000 | NC | 9 |
| 1 | S2208 | MINIMALLY INVASIVE DIRECT CORONA | 1/1/2000 | NC | 9 |
| 1 | S2209 | MINIMALLY INVASIVE DIRECT CORONA | 1/1/2000 | NC | 9 |
| 1 | S2210 | CRYOSURGICAL ABLATION (IN SITU D | 4/1/2002 | INVALID | N |
| 1 | S2211 | TRANSCATHETER PLACEMENT OF INTRA | 1/1/2005 | INVALID | N |
| 1 | S2213 | IMPLANTATION OF GASTRIC ELECTRIC | 1/1/2004 | NC | 9 |
| 1 | S2215 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2006 | INVALID | N |
| 1 | S2225 | MYRINGOTOMY, LASER-ASSISTED | 1/1/2004 | NC | 9 |
| 1 | S2230 | IMPLANTATION OF MAGNETIC COMPONE | 1/1/2004 | NC | 9 |
| 1 | S2235 | IMPLANTATION OF AUDITORY BRAIN S | 1/1/2004 | NC | 9 |
| 1 | S2250 | UTERINE ARTERY EMBOLIZATION FOR | 1/1/2003 | NC | 9 |
| 1 | S2260 | INDUCED ABORTION, 17 TO 24 WEEKS | 1/1/2003 | NC | 9 |
| 1 | S2262 | ABORTION FOR MATERNAL INDICATION | 1/1/2007 | INVALID | N |
| 1 | S2265 | ABORTION FOR FETAL INDICATION, 2 | 1/1/2003 | NC | 9 |
| 1 | S2266 | ABORTION FOR FETAL INDICATION, 2 | 1/1/2003 | NC | 9 |
| 1 | S2267 | ABORTION FOR FETAL INDICATION, 3 | 1/1/2003 | NC | 9 |
| 1 | S2300 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2000 | NC | 9 |
| 1 | S2325 | HIP CORE DECOMPRESSION | 10/1/2006 | NC | 9 |
| 1 | S2340 | CHEMODENERVATION OF ABDUCTOR MUS | 1/1/2003 | NC | 9 |
| 1 | S2341 | CHEMODENERVATION OF ADDUCTOR MUS | 1/1/2003 | NC | 9 |
| 1 | S2342 | NASAL ENDOSCOPY FOR POST-OPERATI | 11/1/2006 | $0.01 | 5 |
| 1 | S2348 | DECOMPRESSION PROCEDURE, PERCUTA | 1/1/2005 | NC | 9 |
| 1 | S2350 | DISKECTOMY, ANTERIOR, WITH DEOMP | 10/1/2005 | $0.01 | 5 |
| 1 | S2351 | DISKECTOMY, ANTERIOR, WITH DECOM | 10/1/2005 | $0.01 | 5 |
| 1 | S2360 | PERCUTANEOUS VERTEBROPLASTY, ONE | 1/1/2003 | NC | 9 |
| 1 | S2361 | EACH ADDITIONAL CERVICAL VERTEBR | 1/1/2003 | NC | 9 |
| 1 | S2362 | KYPHOPLASTY, ONE VERTEBRAL BODY, | 4/1/2006 | INVALID | N |
| 1 | S2363 | KYPHOPLASTY, ONE VERTEBRAL BODY, | 4/1/2006 | INVALID | N |
| 1 | S2370 | INTRADISCAL ELECTROTHERMAL THERA | 7/1/2005 | INVALID | N |
| 1 | S2371 | EACH ADDITIONAL INTERSPACE | 7/1/2005 | INVALID | N |
| 1 | S2400 | REPAIR, CONGENITAL DIAPHRAGMATIC | 1/1/2003 | NC | 9 |
| 1 | S2401 | REPAIR,URINARY TRACT OBSTRUCTION | 1/1/2003 | NC | 9 |
| 1 | S2402 | REPAIR, CONGENITAL CYSTIC ADENOM | 1/1/2003 | NC | 9 |
| 1 | S2403 | REPAIR, EXTRALOBAR PULMONARY SEQ | 1/1/2003 | NC | 9 |
| 1 | S2404 | REPAIR, MYELOMENINGOCELE IN THE | 1/1/2003 | NC | 9 |
| 1 | S2405 | REPAIR OF SACROCOCCYGEAL TERATOM | 1/1/2003 | NC | 9 |
| 1 | S2409 | REPAIR, CONGENITAL MALFORMATION | 1/1/2003 | NC | 9 |
| 1 | S2411 | FETOSCOPIC LASER THERAPY FOR TRE | 1/1/2003 | NC | 9 |
| 1 | S2900 | SURGICAL TECHNIQUES REQUIRING US | 1/1/2005 | NC | 9 |
| 1 | S3000 | DIABETIC INDICATOR; RETINAL EYE | 1/1/2004 | NC | 9 |
| 1 | S3005 | PERFORMANCE MEASUREMENT, EVALUAT | 1/1/2006 | $0.01 | T |
| 1 | S3600 | STAT LABORATORY REQUEST (SITUATI | 1/1/2003 | NC | 9 |
| 1 | S3601 | EMERGENCY STAT LABORATORY CHARGE | 1/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S3645 | HIV-1 ANTIBODY TESTING OF ORAL M | 1/1/2000 | NC | 9 |
| 1 | S3650 | SALIVA TEST, HORMONE LEVEL; DURI | 1/1/2000 | NC | 9 |
| 1 | S3652 | SALIVA TEST, HORMONE LEVEL; TO A | 1/1/2000 | NC | 9 |
| 1 | S3655 | ANTISPERM ANTIBODIES TEST (IMMUN | 1/1/2003 | NC | 9 |
| 1 | S3701 | IMMUNOASSAY FOR NUCLEAR MATRIX P | 4/1/2006 | INVALID | N |
| 1 | S3708 | GASTROINTESTINAL FAT ABSORPTION | 1/1/2003 | NC | 9 |
| 1 | S3818 | COMPLETE GENE SEQUENCE ANALYSIS; | 1/1/2003 | NC | 9 |
| 1 | S3819 | COMPLETE GENE SEQUENCE ANALYSIS; | 1/1/2003 | NC | 9 |
| 1 | S3820 | COMPLETE BRCA1 AND BRCA2 GENE SE | 1/1/2004 | NC | 9 |
| 1 | S3822 | SINGLE MUTATION ANALYSIS FOR SUS | 1/1/2004 | NC | 9 |
| 1 | S3823 | THREE-MUTATION BRCA1 AND BRCA2 A | 1/1/2004 | NC | 9 |
| 1 | S3828 | COMPLETE GENE SEQUENCE ANALYSIS; | 1/1/2004 | NC | 9 |
| 1 | S3829 | COMPLETE GENE SEQUENCE ANALYSIS; | 1/1/2004 | NC | 9 |
| 1 | S3830 | COMPLETE MLH1 AND MLH2 GENE SEQU | 1/1/2003 | NC | 9 |
| 1 | S3831 | SINGLE-MUTATION ANALYSIS FOR HER | 1/1/2003 | NC | 9 |
| 1 | S3833 | COMPLETE APC GENE SEQUENCE ANALY | 1/1/2004 | NC | 9 |
| 1 | S3834 | SINGLE-MUTATION ANALYSIS FOR SUS | 1/1/2004 | NC | 9 |
| 1 | S3835 | COMPLETE GENE SEQUENCE ANALYSIS | 1/1/2003 | NC | 9 |
| 1 | S3837 | COMPLETE GENE SEQUENCE ANALYSIS | 1/1/2003 | NC | 9 |
| 1 | S3840 | DNA ANALYSIS FOR GERMLINE MUTATI | 1/1/2004 | NC | 9 |
| 1 | S3841 | GENETIC TESTING FOR RETINOBLASTO | 1/1/2004 | NC | 9 |
| 1 | S3842 | GENETIC TESTING FOR VON HIPPEL-L | 1/1/2004 | NC | 9 |
| 1 | S3843 | DNA ANALYSIS OF THE F5 GENE FOR | 1/1/2004 | NC | 9 |
| 1 | S3844 | DNA ANALYSIS OF THE CONNEXIN 26 | 1/1/2004 | NC | 9 |
| 1 | S3845 | GENETIC TESTING FOR ALPHA-THALAS | 1/1/2004 | NC | 9 |
| 1 | S3846 | GENETIC TESTING FOR HEMOGLOBIN E | 1/1/2004 | NC | 9 |
| 1 | S3847 | GENETIC TESTING FOR TAY-SACHS DI | 1/1/2004 | NC | 9 |
| 1 | S3848 | GENETIC TESTING FOR GAUCHER DISE | 1/1/2004 | NC | 9 |
| 1 | S3849 | GENETIC TESTING FOR NIEMANN-PICK | 1/1/2004 | NC | 9 |
| 1 | S3850 | GENETIC TESTING FOR SICKLE CELL | 1/1/2004 | NC | 9 |
| 1 | S3851 | GENETIC TESTING FOR CANAVAN DISE | 1/1/2004 | NC | 9 |
| 1 | S3852 | DNA ANALYSIS FOR APOE EPILSON 4 | 1/1/2004 | NC | 9 |
| 1 | S3853 | GENETIC TESTING FOR MYOTONIC MUS | 1/1/2004 | NC | 9 |
| 1 | S3854 | GENE EXPRESSION PROFILING PANEL | 1/1/2006 | NC | 9 |
| 1 | S3890 | DNA ANALYSIS, FECAL, FOR COLOREC | 1/1/2005 | NC | 9 |
| 1 | S3900 | SURFACE ELECTROMYOGRAPHY (EMG) | 1/1/2003 | NC | 9 |
| 1 | S3902 | BALLISTOCARDIOGRAM | 1/1/2001 | NC | 9 |
| 1 | S3904 | MASTERS TWO STEP | 1/1/2001 | NC | 9 |
| 1 | S3906 | TRANSFUSION, DIRECT, BLOOD OR BL | 4/1/2002 | INVALID | N |
| 1 | S4011 | IN VITRO FERTILIZATION; INCLUDIN | 1/1/2003 | NC | 9 |
| 1 | S4013 | COMPLETE CYCLE, GAMETE INTRAFALL | 1/1/2003 | NC | 9 |
| 1 | S4014 | COMPLETE CYCLE, ZYGOTE INTRAFALL | 1/1/2003 | NC | 9 |
| 1 | S4015 | COMPLETE IN VITRO FERTILIZATION | 1/1/2003 | NC | 9 |
| 1 | S4016 | FROZEN IN VITRO FERTILIZATION CY | 1/1/2003 | NC | 9 |
| 1 | S4017 | INCOMPLETE CYCLE, TREATMENT CANC | 1/1/2003 | NC | 9 |
| 1 | S4018 | FROZEN EMBRYO TRANSFER PROCEDURE | 1/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S4020 | IN VITRO FERTILIZATION PROCEDURE | 1/1/2003 | NC | 9 |
| 1 | S4021 | IN VITRO FERTILIZATION PROCEDURE | 1/1/2003 | NC | 9 |
| 1 | S4022 | ASSISTED OOCYTE FERTILIZATION, C | 1/1/2003 | NC | 9 |
| 1 | S4023 | DONOR EGG CYCLE, INCOMPLETE, CAS | 1/1/2003 | NC | 9 |
| 1 | S4025 | DONOR SERVICES FOR IN VITRO FERT | 1/1/2003 | NC | 9 |
| 1 | S4026 | PROCUREMENT OF DONOR SPERM FROM | 1/1/2003 | NC | 9 |
| 1 | S4027 | STORAGE OF PREVIOUSLY FROZEN EMB | 1/1/2003 | NC | 9 |
| 1 | S4028 | MICROSURGICAL EPIDIDYMAL SPERM A | 1/1/2003 | NC | 9 |
| 1 | S4030 | SPERM PROCUREMENT AND CRYOPRESER | 1/1/2003 | NC | 9 |
| 1 | S4031 | SPERM PROCUREMENT AND CRYOPRESER | 1/1/2003 | NC | 9 |
| 1 | S4035 | STIMULATED INTRAUTERINE INSEMINA | 1/1/2003 | NC | 9 |
| 1 | S4036 | INTRAVAGINAL CULTURE (IVC), CASE | 1/1/2007 | INVALID | N |
| 1 | S4037 | CRYOPRESERVED EMBRYO TRANSFER, C | 1/1/2003 | NC | 9 |
| 1 | S4040 | MONITORING AND STORAGE FO CRYOPR | 1/1/2003 | NC | 9 |
| 1 | S4042 | MANAGEMENT OF OVULATION INDUCTIO | 1/1/2005 | NC | 9 |
| 1 | S4981 | INSERTION OF LEVONORGESTREL-RELE | 11/1/2006 | $64.88 | 3 |
| 1 | S4989 | CONTRACEPTIVE INTRAUTERINE DEVIC | 4/1/2002 | $299.00 | 3 |
| 1 | S4990 | NICOTINE PATCHES, LEGEND | 1/1/2003 | NC | 9 |
| 1 | S4991 | NICOTINE PATCHES, NON-LEGEND | 1/1/2003 | NC | 9 |
| 1 | S4993 | CONTRACEPTIVE PILLS FOR BIRTH CO | 9/1/2005 | $19.44 | 3 |
| 1 | S4995 | SMOKING CESSATION GUM | 1/1/2003 | NC | 9 |
| 1 | S5000 | PRESCRIPTION DRUG, GENERIC | 1/1/2003 | $0.01 | P |
| 1 | S5001 | PRESCRIPTION DRUG, BRAND NAME | 1/1/2003 | $0.01 | P |
| 1 | S5002 | FAT EMULSION 10% IN 250 ML, WITH | 4/1/2002 | INVALID | N |
| 1 | S5003 | FAT EMULSION 20% IN 250 ML, WITH | 4/1/2002 | INVALID | N |
| 1 | S5010 | 5% DEXTROSE AND 45% NORMAL SALIN | 1/1/2003 | NC | 9 |
| 1 | S5011 | 5% DEXTROSE IN LACTATED RINGER'S | 8/1/2004 | $14.35 | 3 |
| 1 | S5012 | 5% DEXTROSE WITH POTASSIUM CHLOR | 1/1/2003 | NC | 9 |
| 1 | S5013 | 5% DEXTROSE/45% NORMAL SALINE WI | 1/1/2003 | NC | 9 |
| 1 | S5014 | 5% DEXTROSE/0.45% NORMAL SALINE | 1/1/2003 | NC | 9 |
| 1 | S5100 | DAY CARE SERVICES, ADULT; PER 15 | 1/1/2003 | NC | 9 |
| 1 | S5101 | DAY CARE SERVICES, ADULT; PER HA | 1/1/2003 | NC | 9 |
| 1 | S5102 | DAY CARE SERVICES, ADULT; PER DI | 1/1/2003 | NC | 9 |
| 1 | S5105 | DAY CARE SERVICES, CENTER-BASED; | 1/1/2003 | NC | 9 |
| 1 | S5108 | HOME CARE TRAINING TO HOME CARE | 1/1/2004 | NC | 9 |
| 1 | S5109 | HOME CARE TRAINING TO HOME CARE | 1/1/2004 | NC | 9 |
| 1 | S5110 | HOME CARE TRAINING, FAMILY; PER | 1/1/2003 | NC | 9 |
| 1 | S5111 | HOME CARE TRAINING, FAMILY; PER | 1/1/2003 | NC | 9 |
| 1 | S5116 | HOME CARE TRAINING, FAMILY; PER | 1/1/2003 | NC | 9 |
| 1 | S5120 | CHORE SERVICES; PER 15 MINUTES | 1/1/2003 | NC | 9 |
| 1 | S5121 | HOME CARE TRAINING, FAMILY; PER | 1/1/2003 | NC | 9 |
| 1 | S5125 | ATTENDANT CARE SERVICES; PER 15 | 1/1/2006 | NC | 9 |
| 1 | S5126 | ATTENDANT CARE SERVICES; PER DIE | 1/1/2003 | NC | 9 |
| 1 | S5130 | HOMEMAKER SERVICE, NOS; PER 15 M | 1/1/2003 | NC | 9 |
| 1 | S5131 | HOMEMAKER SERVICE, NOS; PER DIEM | 1/1/2003 | NC | 9 |
| 1 | S5135 | COMPANION CARE, ADULT (EG, IADL/ | 1/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S5136 | COMPANION CARE, ADULT (EG, IADL/ | 1/1/2003 | NC | 9 |
| 1 | S5140 | FOSTER CARE, ADULT; PER DIEM | 1/1/2003 | NC | 9 |
| 1 | S5141 | FOSTER CARE, ADULT; PER MONTH | 1/1/2003 | NC | 9 |
| 1 | S5150 | UNSKILLED RESPITE CARE, NOT HOSP | 1/1/2003 | NC | 9 |
| 1 | S5165 | HOME MODIFICATIONS; PER SERVICE | 1/1/2003 | NC | 9 |
| 1 | S5170 | HOME DELIVERED MEALS, INCLUDING | 1/1/2003 | NC | 9 |
| 1 | S5175 | LAUNDRY SERVICE, EXTERNAL, PROFE | 1/1/2003 | NC | 9 |
| 1 | S5180 | HOME HEALTH RESPIRATORY THERAPY, | 1/1/2003 | NC | 9 |
| 1 | S5181 | HOME HEALTH RESPIRATORY THERAPY, | 1/1/2003 | NC | 9 |
| 1 | S5185 | MEDICATION REMINDER SERVICES, NO | 1/1/2003 | NC | 9 |
| 1 | S5190 | WELLNESS ASSESSMENT, PERFORMED B | 1/1/2003 | NC | 9 |
| 1 | S5199 | PERSONAL CARE ITEM, NOS, EACH | 1/1/2003 | NC | 9 |
| 1 | S5502 | HOME INFUSION THERAPY, CATHETER | 1/1/2003 | NC | 9 |
| 1 | S5517 | HOME INFUSION THERAPY, ALL SUPPL | 1/1/2003 | NC | 9 |
| 1 | S5518 | HOME INFUSION THERAPY, ALL SUPPL | 1/1/2003 | NC | 9 |
| 1 | S5522 | HOME INFUSION THERAPY, INSERTION | 1/1/2003 | NC | 9 |
| 1 | S5523 | HOME INFUSION THERAPY, INSERTION | 1/1/2003 | NC | 9 |
| 1 | S5550 | INSULIN, RAPID ONSET, 5 UNITS | 1/1/2004 | NC | 9 |
| 1 | S5551 | INSULIN, MOST RAPID ONSET (LISPR | 1/1/2004 | NC | 9 |
| 1 | S5552 | INSULIN, INTERMEDIATE ACTING (NP | 1/1/2004 | NC | 9 |
| 1 | S5553 | INSULIN, LONG ACTING; 5 UNITS | 1/1/2004 | NC | 9 |
| 1 | S5560 | INSULIN DELIVERY DEVICE, REUSABL | 1/1/2004 | NC | 9 |
| 1 | S5561 | INSULIN DELIVERY DEVICE, REUSABL | 1/1/2004 | NC | 9 |
| 1 | S5565 | INSULIN CARTRIDGE FOR USE IN INS | 1/1/2004 | NC | 9 |
| 1 | S5566 | INSULIN CARTRIDGE FO RUSE IN INS | 1/1/2004 | NC | 9 |
| 1 | S5570 | INSULIN DELIVERY DEVICE, DISPOSA | 1/1/2004 | NC | 9 |
| 1 | S5571 | INSULIN DELIVERY DEVICE, DISPOSA | 1/1/2004 | NC | 9 |
| 1 | S8004 | RADIOIMMUNOPHARMACEUTICAL LOCALI | 1/1/2006 | INVALID | N |
| 1 | S8030 | SCLERAL APPLICATION OF TANTALUM | 1/1/2003 | NC | 9 |
| 1 | S8035 | MAGNETIC SOURCE IMAGING | 1/1/2000 | NC | 9 |
| 1 | S8040 | TOPOGRAPHIC BRAIN MAPPING | 1/1/2000 | NC | 9 |
| 1 | S8049 | INTRAOPERATIVE RADIATION THERAPY | 1/1/2000 | NC | 9 |
| 1 | S8080 | SCINTIMAMMOGRAPHY, UNILATERAL,IN | 1/1/2005 | NC | 9 |
| 1 | S8085 | FLUORINE-18 FLUORODEOXYGLUCOSE I | 1/1/2005 | NC | 9 |
| 1 | S8092 | ELECTRON BEAM COMPUTED TOMOGRAPH | 1/1/2000 | NC | 9 |
| 1 | S8093 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 4/1/2006 | INVALID | N |
| 1 | S8095 | WIG (FOR MEDICALLY-INDUCED OR CO | 1/1/2006 | INVALID | N |
| 1 | S8096 | PORTABLE PEAK FLOW METER | 1/1/2000 | NC | 9 |
| 1 | S8110 | PEAK EXPIRATORY FLOW RATE (PHYSI | 1/1/2000 | NC | 9 |
| 1 | S8200 | CHEST COMPRESSION VEST | 7/1/2003 | INVALID | N |
| 1 | S8205 | CHEST COMPRESSION SYSTEM GENERAT | 7/1/2003 | INVALID | N |
| 1 | S8260 | ORAL ORTHOTIC FOR TREATMENT OF S | 4/1/2006 | INVALID | N |
| 1 | S8262 | MANDIBULAR ORTHOPEDIC RESPOSITIO | 1/1/2003 | NC | 9 |
| 1 | S8270 | ENURESIS ALARM, USING AUDITORY B | 1/1/2005 | NC | 9 |
| 1 | S8301 | INFECTION CONTROL SUPPLIES, NOT | 1/1/2005 | NC | 9 |
| 1 | S8415 | SUPPLIES FOR HOME DELIVERY OF IN | 10/1/2002 | $221.30 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S8940 | EQUESTRIAN/HIPPOTHERAPY, PER SES | 1/1/2005 | NC | 9 |
| 1 | S8945 | PHYSICAL MEDICINE TREATMENT (CON | 4/1/2004 | INVALID | N |
| 1 | S8950 | COMPLEX LYMPHEDEMA THERAPY, EACH | 10/1/2004 | NC | 9 |
| 1 | S9007 | ULTRAFILTRATION MONITOR | 1/1/2003 | NC | 9 |
| 1 | S9015 | AUTOMATED EEG MONITORING | 1/1/2001 | NC | 9 |
| 1 | S9022 | DIGITAL SUBTRACTION ANGIOGRAPHY | 4/1/2006 | INVALID | N |
| 1 | S9023 | XENON REGIONAL CEREBRAL BLOOD FL | 4/1/2002 | INVALID | N |
| 1 | S9024 | PARANASAL SINUS ULTRASOUND | 1/1/2000 | NC | 9 |
| 1 | S9025 | OMNICARDIOGRAM/CARDIOINTEGRAM | 1/1/2001 | NC | 9 |
| 1 | S9034 | EXTRACORPOREAL SHOCKWAVE LITHOTR | 1/1/2003 | NC | 9 |
| 1 | S9055 | PROCUREN OR OTHER GROWTH FACTOR | 1/1/2000 | NC | 9 |
| 1 | S9056 | OMA STIMULATION PER DIEM | 1/1/2000 | NC | 9 |
| 1 | S9061 | HOME ADMINISTRATION OF AEROSOLIZ | 1/1/2005 | NC | 9 |
| 1 | S9075 | SMOKING CESSATION TREATMENT | 4/1/2001 | $10.00 | 1 |
| 1 | S9083 | GLOBAL FEE URGENT CARE CENTERS | 1/1/2005 | NC | 9 |
| 1 | S9085 | MENISCAL ALLOGRAFT TRANSPLANTATI | 4/1/2002 | INVALID | N |
| 1 | S9088 | SERVICES PROVIDED IN AN URGENT C | 1/1/2001 | NC | 9 |
| 1 | S9090 | VERTEBRAL AXIAL DECOMPRESSION, P | 1/1/2000 | NC | 9 |
| 1 | S9097 | HOME VISIT FOR WOUND CARE | 1/1/2005 | NC | 9 |
| 1 | S9098 | HOME VISIT, PHOTOTHERAPY SERVICE | 1/1/2005 | NC | 9 |
| 1 | S9109 | CONGESTIVE HEART FAILURE TELEMON | 1/1/2003 | NC | 9 |
| 1 | S9117 | BACK SCHOOL, PER VISIT | 1/1/2003 | NC | 9 |
| 1 | S9122 | HOME HEALTH AIDE OR CERTIFIED NU | 1/1/2000 | NC | 9 |
| 1 | S9126 | HOSPICE CARE, IN THE HOME, PER D | 1/1/2000 | NC | 9 |
| 1 | S9127 | SOCIAL WORK VISIT, IN THE HOME, | 1/1/2000 | NC | 9 |
| 1 | S9128 | SPEECH THERAPY, IN THE HOME, PER | 1/1/2000 | NC | 9 |
| 1 | S9129 | OCCUPATIONAL THERAPY, IN THE HOM | 1/1/2000 | NC | 9 |
| 1 | S9140 | DIABETIC MANAGEMENT PROGRAM, FOL | 1/1/2000 | NC | 9 |
| 1 | S9141 | DIABETIC MANAGEMENT PROGRAM, FOL | 1/1/2000 | NC | 9 |
| 1 | S9145 | INSULIN PUMP INITIATION, INSTRUC | 1/1/2003 | NC | 9 |
| 1 | S9150 | EVALUATION BY OCULARIST | 1/1/2003 | NC | 9 |
| 1 | S9208 | HOME MANAGEMENT OF PRETERM LABOR | 1/1/2003 | NC | 9 |
| 1 | S9209 | HOME MANAGEMENT OF PRETERM PREMA | 1/1/2003 | NC | 9 |
| 1 | S9211 | HOME MANAGEMENT OF GESTATIONAL H | 1/1/2003 | NC | 9 |
| 1 | S9212 | HOME MANAGEMENT OF POSTPARTUM HY | 1/1/2003 | NC | 9 |
| 1 | S9213 | HOME MANAGEMENT OF PREECLAMPSIA, | 1/1/2003 | NC | 9 |
| 1 | S9214 | HOME MANAGEMENT OF GESTATIONAL D | 1/1/2003 | NC | 9 |
| 1 | S9338 | HOME INFUSION THERAPY, UMMUNOTHE | 1/1/2003 | NC | 9 |
| 1 | S9339 | HOME THERAPY; PERITONEAL DIALYSI | 1/1/2003 | NC | 9 |
| 1 | S9340 | HOME THERAPY; ENTERAL NUTRITION; | 1/1/2003 | NC | 9 |
| 1 | S9343 | HOME THERAPY; ENTERAL NUTRITION | 1/1/2003 | NC | 9 |
| 1 | S9345 | HOME INFUSION THERAPY, ANTI-HEMO | 1/1/2003 | NC | 9 |
| 1 | S9346 | HOME INFUSION THERAPY, ALPHA-1-P | 1/1/2003 | NC | 9 |
| 1 | S9353 | HOME INFUSION THERAPY, CONTINUOU | 1/1/2003 | NC | 9 |
| 1 | S9357 | HOME INFUSION THERAPY, ENZYME RE | 1/1/2003 | NC | 9 |
| 1 | S9359 | HOME INFUSION THERAPY, ANTI-TUMO | 1/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S9361 | HOME INFUSION THERAPY, DIURETIC | 1/1/2003 | NC | 9 |
| 1 | S9363 | HOME INFUSION THERAPY, ANTI-SPAS | 1/1/2003 | NC | 9 |
| 1 | S9370 | HOME THERAPY, INTERMITTENT ANTI- | 1/1/2003 | NC | 9 |
| 1 | S9372 | HOME THERAPY INTERMITTENT ANTICO | 1/1/2003 | NC | 9 |
| 1 | S9381 | DELIVERY OR SERVICE TO HIGH RISK | 1/1/2005 | NC | 9 |
| 1 | S9401 | ANTICOAGULATION CLINIC, INCLUSIV | 1/1/2003 | NC | 9 |
| 1 | S9430 | PHARMACY COMPOUNDING AND DISPENS | 1/1/2003 | NC | 9 |
| 1 | S9434 | MODIFIED SOLID FOOD SUPPLEMENTS | 1/1/2004 | NC | 9 |
| 1 | S9435 | MEDICAL FOODS FOR INBORN ERRORS | 1/1/2003 | $0.01 | P |
| 1 | S9436 | CHILDBIRTH, PREPARATION/LAMAZE C | 1/1/2003 | NC | 9 |
| 1 | S9437 | CHILDBIRTH REFRESHER CLASSES, NO | 1/1/2003 | NC | 9 |
| 1 | S9438 | CESAREAN BIRTH CLASSES, NON-PHYS | 1/1/2003 | NC | 9 |
| 1 | S9439 | VBAC (VAGINAL BIRTH AFTER CESARE | 1/1/2003 | NC | 9 |
| 1 | S9441 | ASTHMA EDUCATION, NON-PHYSICIAN | 1/1/2003 | NC | 9 |
| 1 | S9442 | BIRTHING CLASSES, NON-PHYSICIAN | 1/1/2003 | NC | 9 |
| 1 | S9443 | LACTATION CLASSES, NON-PHYSICIAN | 1/1/2003 | NC | 9 |
| 1 | S9444 | PARENTING CLASSES, NON-PHYSICIAN | 1/1/2003 | NC | 9 |
| 1 | S9445 | PATIENT EDUCATION, NOT OTHERWISE | 1/1/2003 | NC | 9 |
| 1 | S9446 | PATIENT EDUCATION, NOT OTHERWISE | 1/1/2003 | NC | 9 |
| 1 | S9447 | INFANT SAFETY (INCLUDING CPR) CL | 1/1/2003 | NC | 9 |
| 1 | S9449 | WEIGHT MANAGEMENT CLASSES, NON-P | 1/1/2003 | NC | 9 |
| 1 | S9451 | EXERCISE CLASSES, NON-PHYSICIAN | 1/1/2003 | NC | 9 |
| 1 | S9452 | NUTRITION CLASSES, NON-PHYSICIAN | 1/1/2003 | NC | 9 |
| 1 | S9453 | SMOKING CESSATION CLASSES, NON-P | 1/1/2003 | NC | 9 |
| 1 | S9454 | STRESS MANAGEMENT CLASSES, NON-P | 1/1/2003 | NC | 9 |
| 1 | S9455 | DIABETIC MANAGEMENT PROGRAM, GRO | 1/1/2000 | NC | 9 |
| 1 | S9460 | DIABETIC MANAGEMENT PROGRAM, NUR | 1/1/2000 | NC | 9 |
| 1 | S9465 | DIABETIC MANAGEMENT PROGRAM, DIE | 1/1/2000 | NC | 9 |
| 1 | S9470 | NUTRITIONAL COUNSELING, DIETICIA | 4/1/2003 | $44.10 | 3 |
| 1 | S9472 | CARDIAC REHABILITATION PROGRAM, | 1/1/2000 | NC | 9 |
| 1 | S9473 | PULMONARY REHABILITATION PROGRAM | 1/1/2000 | NC | 9 |
| 1 | S9474 | ENTEROSTOMAL THERAPY BY A REGIST | 1/1/2000 | NC | 9 |
| 1 | S9475 | AMBULATORY SETTING SUBSTANCE ABU | 1/1/2000 | NC | 9 |
| 1 | S9476 | VESTIBULAR REHABILITATION PROGRA | 1/1/2004 | NC | 9 |
| 1 | S9482 | FAMILY STABILIZATION SERVICES, P | 1/1/2005 | NC | 9 |
| 1 | S9485 | CRISIS INTERVENTION MENTAL HEALT | 8/1/2004 | NC | 9 |
| 1 | S9524 | NURSING SERVICES RELATED TO HOME | 4/1/2004 | INVALID | N |
| 1 | S9527 | INSERTION FO A PERIPHERALLY INSE | 4/1/2002 | INVALID | N |
| 1 | S9528 | INSERTION OF MIDINE CENTRAL VENO | 4/1/2002 | INVALID | N |
| 1 | S9529 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2003 | NC | 9 |
| 1 | S9537 | HOME THERAPY; HEMATOPOIETIC HORM | 1/1/2003 | NC | 9 |
| 1 | S9538 | HOME TRANSFUSION OF BLOOD PRODUC | 1/1/2003 | NC | 9 |
| 1 | S9542 | HOME INJECTABLE THERAPY, NOT OTH | 1/1/2003 | NC | 9 |
| 1 | S9543 | ADMINISTRATION OF MEDICATION, IN | 7/1/2003 | INVALID | N |
| 1 | S9558 | HOME INJECTABLE THERAPY; GROWTH | 1/1/2003 | NC | 9 |
| 1 | S9559 | HOME INJECTABLE THERAPY, INTERFE | 1/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | S9560 | HOME INJECTABLE THERAPY; HORMONA | 1/1/2003 | NC | 9 |
| 1 | S9562 | HOME INJECTABLE THERAPY, PALIVIZ | 1/1/2003 | NC | 9 |
| 1 | S9803 | EACH ADDITIONAL HOUR (LIST SEP I | 4/1/2004 | INVALID | N |
| 1 | S9806 | RN SERVICES IN THE INFUSION SUIT | 4/1/2004 | INVALID | N |
| 1 | S9810 | HOME THERAPY; PROFESSIONAL RX SV | 1/1/2003 | NC | 9 |
| 1 | S9900 | SERVICES BY AUTHORIZED CHRISTIAN | 1/1/2003 | NC | 9 |
| 1 | S9970 | HEALTH CLUB MEMBERSHIP, ANNUAL | 1/1/2003 | NC | 9 |
| 1 | S9975 | TRANSPLANT RELATED LODGING, MEAL | 1/1/2003 | NC | 9 |
| 1 | S9976 | LODGING, PER DIEM, NOT OTHERWISE | 1/1/2005 | NC | 9 |
| 1 | S9977 | MEALS, PER DIEM, NOT OTHERWISE S | 1/1/2005 | NC | 9 |
| 1 | S9981 | COPIES OF ALL EXISTING OFFICE RE | 4/1/2002 | $18.00 | 3 |
| 1 | S9988 | SERVICES PROVIDED AS PART OF A P | 1/1/2005 | NC | 9 |
| 1 | S9989 | SERVICES PROVIDED OUTSIDE OF THE | 1/1/2005 | NC | 9 |
| 1 | S9990 | SERVICES PROVIDED AS PART OF A P | 1/1/2000 | NC | 9 |
| 1 | S9991 | SERVICES PROVIDED AS PART OF A P | 1/1/2000 | NC | 9 |
| 1 | S9992 | TRANSPORTATION COSTS TO AND FROM | 1/1/2000 | NC | 9 |
| 1 | S9994 | LODGING COSTS FOR CLINICAL TRIAL | 1/1/2000 | NC | 9 |
| 1 | S9996 | MEALS FOR CLINICAL TRIAL PARTICI | 1/1/2000 | NC | 9 |
| 1 | S9999 | SALES TAX | 1/1/2000 | NC | 9 |
| 1 | T1006 | ALCOHOL AND/OR SUBSTANCE ABUSE S | 10/1/2003 | $0.01 | 1 |
| 1 | T1014 | TELEHEALTH TRANSMISSION, PER MIN | 1/1/2005 | NC | 9 |
| 1 | T1015 | CLINIC VISIT/ENCOUNTER, ALL-INCL | 10/1/2003 | $0.01 | 1 |
| 1 | T1023 | SCREENING TO DETERMINE THE APPRO | 4/1/2003 | NC | 9 |
| 1 | T1024 | EVALUATION AND TREATMENT BY AN I | 1/1/2003 | NC | 9 |
| 1 | T1025 | INTENSIVE, EXTENDED MULTIDISCIPL | 1/1/2003 | NC | 9 |
| 1 | T1026 | INTENSIVE, EXTENDED MULTIDISCIPL | 1/1/2003 | NC | 9 |
| 1 | T1027 | FAMILY TRAINING AND COUNSELING F | 1/1/2003 | NC | 9 |
| 1 | T1028 | ASSESSMENT OF HOME, PHYSICAL AND | 1/1/2003 | NC | 9 |
| 1 | T1029 | COMPREHENSIVE ENVIRONMENTAL LEAD | 1/1/2003 | NC | 9 |
| 1 | T1999 | MISC THERAPEUTIC ITEMS AND SUPPL | 1/1/2005 | NC | 9 |
| 1 | T2101 | HUMAN BREAST MILK PROCESSING, ST | 1/1/2005 | NC | 9 |
| 1 | T5999 | SUPPLY, NOT OTHERWISE SPECIFIED | 1/1/2005 | NC | 9 |
| 1 | V2500 | CONTACT LENS, PMA, SPHERICAL, PE | 1/1/2005 | $150.00 | 3 |
| 1 | V2510 | GAS PERMEABLE, SPERICAL, PER LEN | 1/1/2003 | $150.00 | 3 |
| 1 | V2511 | GAS PERMEABLE, TORIC, PRISM BALL | 7/1/2004 | $150.00 | 3 |
| 1 | V2520 | HYDROPHILIC, SPERICAL, PER LENS | 7/1/2004 | $180.00 | 3 |
| 1 | V2521 | HYDROPHILIC, TORIC OR PRISM BALL | 7/1/2004 | $150.00 | 3 |
| 1 | V2623 | PROSTHETIC EYE, PLASTIC, CUSTOM | 12/1/2002 | $806.74 | 3 |
| 1 | V2624 | POLISHING/RESURFACING OF OCULAR | 12/1/2002 | $60.86 | 3 |
| 1 | V2625 | ENLARGEMENT OF OCULAR PROSTHESIS | 12/1/2002 | $370.05 | 3 |
| 1 | V2626 | REDUCTION OF OCULAR PROSTHESIS | 12/1/2002 | $199.48 | 3 |
| 1 | V2627 | SCLERAL COVER SHELL | 12/1/2002 | $1,239.94 | 3 |
| 1 | V2628 | FABRICATION AND FITTING OF OCULA | 12/1/2002 | $304.19 | 3 |
| 1 | V2629 | PROSTHETIC EYE, OTHER TYPE | 1/10/1994 | $1,000.00 | 3 |
| 1 | V2630 | ANTERIOR CHAMBER INTRAOCULAR LEN | 1/1/1994 | NC | 9 |
| 1 | V2631 | IRIS SUPPORTED INTRAOCULAR LENS | 1/1/1994 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 1 | V2632 | POSTERIOR CHAMBER INTRAOCULAR LE | 1/1/1994 | NC | 9 |
| 1 | V2790 | AMNIOTIC MEMBRANE FOR SURGICAL R | 1/1/2001 | NC | 9 |
| 1 | V5090 | DISPENSING FEE, UNSPECIFIED HEAR | 7/1/2002 | NC | 9 |
| 2 | 0008T | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | INVALID | N |
| 2 | 0016T | DESTRUCTION OF LOCALIZED LESION | 1/1/2005 | $0.01 | T |
| 2 | 0017T | DESTRUCTION OF MACULAR DRUSEN, P | 1/1/2005 | $0.01 | T |
| 2 | 0018T | DELIVERY OF HIGH POWER, FOCAL MA | 1/1/2007 | INVALID | N |
| 2 | 0019T | EXTRACORPOREAL SHOCK WAVE THERAP | 1/1/2005 | $0.01 | T |
| 2 | 0020T | EXTRACORPOREAL SHOCK WAVE THERAP | 1/1/2006 | INVALID | N |
| 2 | 0021T | INSERTION OF TRANSCERVICAL OR TR | 1/1/2007 | INVALID | N |
| 2 | 0024T | NON-SURGICAL SEPTAL REDUCTION TH | 1/1/2005 | $0.01 | T |
| 2 | 0027T | ENDOSCOPIC LYSIS OF EPIDURAL ADH | 1/1/2005 | $0.01 | T |
| 2 | 0031T | SPECULOSCOPY; | 1/1/2005 | $0.01 | T |
| 2 | 0032T | SPECULOSCOPY; WITH DIRECTED SAMP | 1/1/2005 | $0.01 | T |
| 2 | 0033T | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2005 | $0.01 | T |
| 2 | 0034T | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | INVALID | N |
| 2 | 0035T | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2006 | INVALID | N |
| 2 | 0036T | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2006 | INVALID | N |
| 2 | 0037T | OPEN SUBCLAVIAN TO CAROTID ARTER | 1/1/2006 | INVALID | N |
| 2 | 0038T | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | INVALID | N |
| 2 | 0039T | ENDOVASCULAR REPIAR OF DESCENDIN | 1/1/2006 | INVALID | N |
| 2 | 0040T | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2006 | INVALID | N |
| 2 | 0046T | CATHETER LAVAGE OF A MAMMARY DUC | 1/1/2005 | $0.01 | T |
| 2 | 0047T | CATHETER LAVAGE OF A MAMMARY DUC | 1/1/2005 | $0.01 | T |
| 2 | 0048T | IMPLANTATION OF A VENTRICULAR AS | 1/1/2005 | $0.01 | T |
| 2 | 0049T | PROLONGED EXTRACORPOREAL PERCUTA | 1/1/2005 | $0.01 | T |
| 2 | 0050T | REMOVAL OF A VENTRICULAR ASSIST | 1/1/2005 | $0.01 | T |
| 2 | 0051T | IMPLANTATION OF A TOTAL REPLACEM | 1/1/2005 | $0.01 | T |
| 2 | 0052T | REPLACEMENT OR REPAIR OF THORACI | 1/1/2005 | $0.01 | T |
| 2 | 0053T | REPLACEMENT OR REPAIR OF IMPLANT | 1/1/2005 | $0.01 | T |
| 2 | 0054T | COMPUTER ASSISTED MUSCULOSKELETA | 1/1/2005 | $0.01 | T |
| 2 | 0055T | COMPUTER ASSISTED MUSCULOSKELETA | 1/1/2005 | $0.01 | T |
| 2 | 0056T | COMPUTER ASSISTED MUSCULOSKELETA | 1/1/2005 | $0.01 | T |
| 2 | 0061T | DESTRUCTION/REDUCTION OF MALIGNA | 1/1/2005 | $0.01 | T |
| 2 | 0062T | PERCUTANEOUS INTRADISCAL ANNULOP | 1/1/2005 | $0.01 | T |
| 2 | 0063T | PERCUTANEOUS INTRADISCAL ANNULOP | 1/1/2005 | $0.01 | T |
| 2 | 0071T | FOCUSED ULTRASOUND ABLATION OF U | 1/1/2005 | $0.01 | T |
| 2 | 0072T | FOCUSED ULTRASOUND ABLATION OF U | 1/1/2005 | $0.01 | T |
| 2 | 0075T | TRANSCATHETER PLACEMENT OF EXTRA | 1/1/2005 | $0.01 | T |
| 2 | 0076T | TRANSCATHETER PLACEMENT OF EXTRA | 1/1/2005 | $0.01 | T |
| 2 | 0077T | IMPLANTING AND SECURING CEREBRAL | 1/1/2005 | $0.01 | T |
| 2 | 0078T | ENDOVASCULAR REPAIR USING PROSTH | 1/1/2005 | $0.01 | T |
| 2 | 0079T | PLACEMENT OF VISCERAL EXTENSION | 1/1/2005 | $0.01 | T |
| 2 | 0080T | ENDOVASCULAR REPAIR OF ABDOMINAL | 1/1/2005 | $0.01 | T |
| 2 | 0081T | PLACEMENT OF VISCERAL EXTENSION | 1/1/2005 | $0.01 | T |
| 2 | 0084T | INSERTION OF A TEMPORARY PROSTAT | 1/1/2005 | $0.01 | T |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 0088T | SUBMUCOSAL RADIOFREQUENCY TISSUE | 1/1/2005 | $0.01 | T |
| 2 | 10021 | FINE NEEDLE ASPIRATION; WITHOUT | 1/1/2007 | $91.60 | 3 |
| 2 | 10022 | FINE NEEDLE ASPIRATION; WITH IMA | 1/1/2007 | $101.21 | 3 |
| 2 | 10040 | ACNE SURGERY (EG MARSUPIALIZATIO | 1/1/2007 | $58.13 | 3 |
| 2 | 10060 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2007 | $64.88 | 3 |
| 2 | 10061 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2007 | $116.52 | 3 |
| 2 | 10080 | INCISION AND DRAINAGE OF PILONID | 1/1/2007 | $113.92 | 3 |
| 2 | 10081 | INCISION AND DRAINAGE OF PILONID | 1/1/2007 | $175.68 | 3 |
| 2 | 10120 | INCISION AND REMOVAL OF FOREIGN | 1/1/2007 | $91.34 | 3 |
| 2 | 10121 | INCISION AND REMOVAL OF FOREIGN | 1/1/2007 | $169.71 | 3 |
| 2 | 10140 | INCISION AND DRAINAGE OF HEMATOM | 1/1/2007 | $90.83 | 3 |
| 2 | 10160 | PUNCTURE ASPIRATION OF ABSCESS H | 1/1/2007 | $76.29 | 3 |
| 2 | 10180 | INCISION AND DRAINAGE, COMPLEX, | 1/1/2007 | $145.06 | 3 |
| 2 | 11000 | DEBRIDEMENT OF EXTENSIVE ECZEMAT | 1/1/2007 | $32.44 | 3 |
| 2 | 11001 | DEBRIDEMENT OF EXTENSIVE ECZEMAT | 1/1/2007 | $14.79 | 3 |
| 2 | 11004 | DEBRIDEMENT OF SKIN, SUBCUTANEOU | 1/1/2007 | $386.40 | 3 |
| 2 | 11005 | DEBRIDEMENT OF SKIN, SUBCUTANEOU | 1/1/2007 | $526.53 | 3 |
| 2 | 11006 | DEBRIDEMENT OF SKIN, SUBCUTANEOU | 1/1/2007 | $486.56 | 3 |
| 2 | 11008 | REMOVAL OF PROSTHETIC MATERIAL O | 1/1/2007 | $198.26 | 3 |
| 2 | 11010 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $304.65 | 3 |
| 2 | 11011 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $359.67 | 3 |
| 2 | 11012 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $523.41 | 3 |
| 2 | 11040 | DEBRIDEMENT; SKIN, PARTIAL THICK | 1/1/2007 | $28.03 | 3 |
| 2 | 11041 | DEBRIDEMENT; SKIN FULL THICKNESS | 1/1/2007 | $41.00 | 3 |
| 2 | 11042 | DEBRIDEMENT; SKIN AND SUBCUTANEO | 1/1/2007 | $57.61 | 3 |
| 2 | 11043 | DEBRIDEMENT; SKIN SUBCUTANEOUS T | 1/1/2007 | $158.04 | 3 |
| 2 | 11044 | DEBRIDEMENT; SKIN SUBCUTANEOUS T | 1/1/2007 | $206.30 | 3 |
| 2 | 11055 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $26.99 | 3 |
| 2 | 11056 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $34.25 | 3 |
| 2 | 11057 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $42.30 | 3 |
| 2 | 11100 | BIOPSY OF SKIN SUBCUTANEOUS TISS | 1/1/2007 | $54.24 | 3 |
| 2 | 11101 | BIOPSY OF SKIN SUBCUTANEOUS TISS | 1/1/2007 | $19.72 | 3 |
| 2 | 11200 | REMOVAL OF SKIN TAGS, MULTIPLE F | 2/1/1993 | NC | 9 |
| 2 | 11201 | EXCISION SKIN TAGS MULTIPLE FIBR | 2/1/1993 | NC | 9 |
| 2 | 11300 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $39.70 | 3 |
| 2 | 11301 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $51.90 | 3 |
| 2 | 11302 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $62.28 | 3 |
| 2 | 11303 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $75.00 | 3 |
| 2 | 11305 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $41.26 | 3 |
| 2 | 11306 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $56.05 | 3 |
| 2 | 11307 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $64.88 | 3 |
| 2 | 11308 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $77.59 | 3 |
| 2 | 11310 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $48.79 | 3 |
| 2 | 11311 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $60.46 | 3 |
| 2 | 11312 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $69.55 | 3 |
| 2 | 11313 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $91.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 11400 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $75.51 | 3 |
| 2 | 11401 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $87.97 | 3 |
| 2 | 11402 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $100.43 | 3 |
| 2 | 11403 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $113.14 | 3 |
| 2 | 11404 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $129.23 | 3 |
| 2 | 11406 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $159.59 | 3 |
| 2 | 11420 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $73.70 | 3 |
| 2 | 11421 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $93.94 | 3 |
| 2 | 11422 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $105.10 | 3 |
| 2 | 11423 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $124.56 | 3 |
| 2 | 11424 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $142.47 | 3 |
| 2 | 11426 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $199.82 | 3 |
| 2 | 11440 | EXCISION, OTHER BENIGN LESION IN | 1/1/2007 | $86.93 | 3 |
| 2 | 11441 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $102.50 | 3 |
| 2 | 11442 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $114.96 | 3 |
| 2 | 11443 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $140.91 | 3 |
| 2 | 11444 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $179.57 | 3 |
| 2 | 11446 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $232.51 | 3 |
| 2 | 11450 | EXCISION OF SKIN AND SUBCUTANEOU | 1/1/2007 | $210.45 | 3 |
| 2 | 11451 | EXCISION OF SKIN AND SUBCUTANEOU | 1/1/2007 | $287.79 | 3 |
| 2 | 11462 | EXCISION OF SKIN AND SUBCUTANEOU | 1/1/2007 | $206.30 | 3 |
| 2 | 11463 | EXCISION OF SKIN AND SUBCUTANEOU | 1/1/2007 | $293.75 | 3 |
| 2 | 11470 | EXCISION OF SKIN AND SUBCUTANEOU | 1/1/2007 | $226.28 | 3 |
| 2 | 11471 | EXCISION OF SKIN AND SUBCUTANEOU | 1/1/2007 | $303.62 | 3 |
| 2 | 11600 | EXCISION, MALIGNANT LESION INCL | 1/1/2007 | $105.10 | 3 |
| 2 | 11601 | EXCISION, MALIGNANT LESION INCL | 1/1/2007 | $120.15 | 3 |
| 2 | 11602 | EXCISION, MALIGNANT LESION INCL | 1/1/2007 | $127.16 | 3 |
| 2 | 11603 | EXCISION, MALIGNANT LESION INCL | 1/1/2007 | $140.91 | 3 |
| 2 | 11604 | EXCISION, MALIGNANT LESION INCL | 1/1/2007 | $155.18 | 3 |
| 2 | 11606 | EXCISION MALIGNANT LESION TRUNK | 1/1/2007 | $203.71 | 3 |
| 2 | 11620 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $100.69 | 3 |
| 2 | 11621 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $119.11 | 3 |
| 2 | 11622 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $134.94 | 3 |
| 2 | 11623 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $159.59 | 3 |
| 2 | 11624 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $183.73 | 3 |
| 2 | 11626 | EXCESION MALIGNANT LESION SCALP | 1/1/2007 | $243.41 | 3 |
| 2 | 11640 | EXCISION MALIGNANT LESION FACE E | 1/1/2007 | $106.91 | 3 |
| 2 | 11641 | EXCISION MALIGNANT LESION FACE E | 1/1/2007 | $138.83 | 3 |
| 2 | 11642 | EXCISION MALIGNANT LESION FACE E | 1/1/2007 | $160.63 | 3 |
| 2 | 11643 | EXCISION MALIGNANT LESION FACE E | 1/1/2007 | $186.06 | 3 |
| 2 | 11644 | EXCISION MALIGNANT LESION FACE E | 1/1/2007 | $235.63 | 3 |
| 2 | 11646 | EXCISION MALIGNANT LESION FACE E | 1/1/2007 | $319.70 | 3 |
| 2 | 11719 | TRIMMING OF NONDYSTROPHIC NAILS, | 1/1/2007 | $11.42 | 3 |
| 2 | 11720 | DEBRIDEMENT OF NAIL(S) BY ANY ME | 1/1/2007 | $18.17 | 3 |
| 2 | 11721 | DEBRIDEMENT OF NAIL(S) BY ANY ME | 1/1/2007 | $27.25 | 3 |
| 2 | 11730 | AVULSION OF NAIL PLATE PARTIAL O | 1/1/2007 | $59.69 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 11732 | AVULSION OF NAIL PLATE PARTIAL O | 1/1/2007 | $28.03 | 3 |
| 2 | 11740 | EVACUATION OF SUBUNGUAL HEMATOMA | 1/1/2007 | $24.91 | 3 |
| 2 | 11750 | EXCISION OF NAIL AND NAIL MATRIX | 1/1/2007 | $110.29 | 3 |
| 2 | 11752 | EXCISION OF NAIL & NAIL MATRIX P | 1/1/2007 | $156.22 | 3 |
| 2 | 11755 | BIOPSY OF NAIL UNIT (EG, PLATE, | 1/1/2007 | $78.37 | 3 |
| 2 | 11760 | REPAIR OF NAIL BED | 1/1/2007 | $114.70 | 3 |
| 2 | 11762 | RECONSTRUCTION OF NAIL BED WITH | 1/1/2007 | $159.33 | 3 |
| 2 | 11765 | WEDGE EXCISION OF SKIN OF NAIL F | 1/1/2007 | $66.43 | 3 |
| 2 | 11770 | EXCISION OF PILONIDAL CYST OR SI | 1/1/2007 | $166.86 | 3 |
| 2 | 11771 | EXCISION OF PILONIDAL CYST OR SI | 1/1/2007 | $314.77 | 3 |
| 2 | 11772 | EXCISION OF PILONIDAL CYST OR SI | 1/1/2007 | $399.11 | 3 |
| 2 | 11900 | INJECTION INTRALESIONAL UP TO AN | 1/1/2007 | $30.88 | 3 |
| 2 | 11901 | INJECTION INTRALESIONAL; MORE TH | 1/1/2007 | $38.67 | 3 |
| 2 | 11920 | TATTOOING INTRADERMAL INTRODUCTI | 4/1/1982 | NC | 9 |
| 2 | 11921 | TATTOOING INTRADERMAL INTRO OF I | 4/1/1982 | NC | 9 |
| 2 | 11922 | TATTOOING INTRADERMAL INTRODUCTI | 4/1/1982 | NC | 9 |
| 2 | 11950 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| 2 | 11951 | SUBCUTANIOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| 2 | 11952 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| 2 | 11954 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| 2 | 11960 | INSERTION OF TISSUE EXPANDER(S) | 1/1/2007 | $539.76 | 3 |
| 2 | 11970 | REPLACEMENT OF TISSUE EXPANDER W | 1/1/2007 | $369.79 | 3 |
| 2 | 11971 | REMOVAL OF TISSUE EXPANDER(S) WI | 1/1/2007 | $300.76 | 3 |
| 2 | 11975 | INSERTION, IMPLANTABLE CONTRACEP | 1/1/2007 | $79.67 | 3 |
| 2 | 11976 | REMOVAL, IMPLANTABLE CONTRACEPTI | 1/1/2007 | $96.27 | 3 |
| 2 | 11977 | REMOVAL WITH REINSERTION, IMPLAN | 1/1/2007 | $154.40 | 3 |
| 2 | 11980 | SUBCUTANEOUS HORMONE PELLET IMPL | 1/1/2007 | $69.81 | 3 |
| 2 | 11981 | INSERTION, NON-BIODEGRADABLE DRU | 1/1/2007 | $85.64 | 3 |
| 2 | 11982 | REMOVAL, NON-BIODEGRADABLE DRUG | 1/1/2007 | $101.21 | 3 |
| 2 | 11983 | REMOVAL WITH REINSERTION, NON-BI | 1/1/2007 | $151.03 | 3 |
| 2 | 12001 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $99.65 | 3 |
| 2 | 12002 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $105.88 | 3 |
| 2 | 12004 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $124.04 | 3 |
| 2 | 12005 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $154.66 | 3 |
| 2 | 12006 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $192.29 | 3 |
| 2 | 12007 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $217.72 | 3 |
| 2 | 12011 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $105.36 | 3 |
| 2 | 12013 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $115.48 | 3 |
| 2 | 12014 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $136.76 | 3 |
| 2 | 12015 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $171.79 | 3 |
| 2 | 12016 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $203.71 | 3 |
| 2 | 12017 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $183.47 | 3 |
| 2 | 12018 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $218.50 | 3 |
| 2 | 12020 | TREATMENT OF SUPERFICIAL WOUND D | 1/1/2007 | $175.16 | 3 |
| 2 | 12021 | TREATMENT OF SUPERFICIAL WOUND D | 1/1/2007 | $101.46 | 3 |
| 2 | 12031 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $119.63 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 12032 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $168.16 | 3 |
| 2 | 12034 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $165.30 | 3 |
| 2 | 12035 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $234.07 | 3 |
| 2 | 12036 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $263.65 | 3 |
| 2 | 12037 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $296.61 | 3 |
| 2 | 12041 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $132.60 | 3 |
| 2 | 12042 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $160.37 | 3 |
| 2 | 12044 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $172.05 | 3 |
| 2 | 12045 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $241.85 | 3 |
| 2 | 12046 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $293.24 | 3 |
| 2 | 12047 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $300.50 | 3 |
| 2 | 12051 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $154.40 | 3 |
| 2 | 12052 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $160.11 | 3 |
| 2 | 12053 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $171.27 | 3 |
| 2 | 12054 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $189.95 | 3 |
| 2 | 12055 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $242.89 | 3 |
| 2 | 12056 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $326.71 | 3 |
| 2 | 12057 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $328.53 | 3 |
| 2 | 13100 | REPAIR COMPLEX TRUNK 1.1 CM TO 2 | 1/1/2007 | $193.07 | 3 |
| 2 | 13101 | REPAIR COMPLEX TRUNK; 2.6 CM TO | 1/1/2007 | $229.40 | 3 |
| 2 | 13102 | REPAIR, COMPLEX, TRUNK; EACH ADD | 1/1/2007 | $65.91 | 3 |
| 2 | 13120 | REPAIR COMPLEX SCALP ARMS AND/OR | 1/1/2007 | $200.07 | 3 |
| 2 | 13121 | REPAIR COMPLEX SCALP ARMS AND/OR | 1/1/2007 | $244.71 | 3 |
| 2 | 13122 | REPAIR, COMPLEX, SCALP, ARMS, AN | 1/1/2007 | $80.45 | 3 |
| 2 | 13131 | REPAIR COMPLEX FOREHEAD CHEEKS C | 1/1/2007 | $218.24 | 3 |
| 2 | 13132 | REPAIR COMPLEX FOREHEAD CHEEKS C | 1/1/2007 | $316.07 | 3 |
| 2 | 13133 | REPAIR, COMPLEX, FOREHEAD, CHEEK | 1/1/2007 | $104.58 | 3 |
| 2 | 13150 | REPAIR COMPLEX EYELIDS NOSE EARS | 1/1/2007 | $234.07 | 3 |
| 2 | 13151 | REPAIR COMPLEX EYELIDS NOSE EARS | 1/1/2007 | $248.08 | 3 |
| 2 | 13152 | REPAIR COMPLEX EYELIDS NOSE EARS | 1/1/2007 | $331.38 | 3 |
| 2 | 13153 | REPAIR, COMPLEX, EYELIDS, NOSE, | 1/1/2007 | $118.33 | 3 |
| 2 | 13160 | SECONDARY CLOSURE OF SURGICAL WO | 1/1/2007 | $497.72 | 3 |
| 2 | 14000 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $372.12 | 3 |
| 2 | 14001 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $485.78 | 3 |
| 2 | 14020 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $411.31 | 3 |
| 2 | 14021 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $541.32 | 3 |
| 2 | 14040 | ADJ TISSUE TRANS OR REARRANGE, F | 1/1/2007 | $449.19 | 3 |
| 2 | 14041 | ADJ TISSUE TRANS OR REARRANGE, F | 1/1/2007 | $592.18 | 3 |
| 2 | 14060 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $466.58 | 3 |
| 2 | 14061 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $639.93 | 3 |
| 2 | 14300 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $624.36 | 3 |
| 2 | 14350 | FILLETED FINGER OR TOE FLAP INCL | 1/1/2007 | $469.70 | 3 |
| 2 | 15000 | SURGICAL PREP OF RECIP SITE BY E | 1/1/2007 | INVALID | N |
| 2 | 15001 | SURGICAL PREP OF RECIP SITE BY E | 1/1/2007 | INVALID | N |
| 2 | 15002 | SURGICAL PREP OR CREATION OF REC | 1/1/2007 | $214.35 | 3 |
| 2 | 15003 | SURGICAL PREP OR CREATION OF REC | 1/1/2007 | $47.49 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 15004 | SURG PREP OR CREATION OF RECIP S | 1/1/2007 | $258.72 | 3 |
| 2 | 15005 | SURG PREP OR CREATION OF RECIP S | 1/1/2007 | $80.45 | 3 |
| 2 | 15040 | HARVEST OF SKIN FOR TISSUE CULTU | 1/1/2007 | $176.72 | 3 |
| 2 | 15050 | PINCH GRAFT, SING OR MULT, TIP O | 1/1/2007 | $305.95 | 3 |
| 2 | 15100 | SPLIT-THICKNESS AUTOGRAFT, TRUNK | 1/1/2007 | $595.29 | 3 |
| 2 | 15101 | SPLIT GRAFT, TRUNK, ARMS, LEGS; | 1/1/2007 | $147.92 | 3 |
| 2 | 15110 | EPIDERMAL AUTOGRAFT, TRUNK, ARMS | 1/1/2007 | $558.18 | 3 |
| 2 | 15111 | EPIDERMAL AUTOGRAFT, TRUNK, ARMS | 1/1/2007 | $88.23 | 3 |
| 2 | 15115 | EPIDERMAL AUTOGRAFT, FACE, SCALP | 1/1/2007 | $524.45 | 3 |
| 2 | 15116 | EPIDERMAL AUTOGRAFT, FACE, SCALP | 1/1/2007 | $114.44 | 3 |
| 2 | 15120 | SPLIT-THICKNESS AUTOGRAFT, FACE, | 1/1/2007 | $563.89 | 3 |
| 2 | 15121 | SPLIT GRAFT, FACE, SCALP, EYELID | 1/1/2007 | $195.66 | 3 |
| 2 | 15130 | DERMAL AUTOGRAFT, TRUNK, ARMS, L | 1/1/2007 | $463.47 | 3 |
| 2 | 15131 | DERMAL AUTOGRAFT, TRUNK, ARMS, L | 1/1/2007 | $72.14 | 3 |
| 2 | 15135 | DERMAL AUTOGRAFT, FACE, SCALP, E | 1/1/2007 | $561.30 | 3 |
| 2 | 15136 | DERMAL AUTOGRAFT, FACE, SCALP, E | 1/1/2007 | $67.21 | 3 |
| 2 | 15150 | TISSUE CULTURED EPIDERMAL AUTOGR | 1/1/2007 | $463.73 | 3 |
| 2 | 15151 | TISSUE CULTURED EPIDERMAL AUTOGR | 1/1/2007 | $93.16 | 3 |
| 2 | 15152 | TISSUE CULTUREED EPIDERMAL AUTOG | 1/1/2007 | $114.44 | 3 |
| 2 | 15155 | TISSUE CULTURED EPIDERMAL AUTOGR | 1/1/2007 | $464.25 | 3 |
| 2 | 15156 | TISSUE CULTURED EPIDERMAL AUTOGR | 1/1/2007 | $121.19 | 3 |
| 2 | 15157 | TISSUE CULTURED EPIDERMAL AUTOGR | 1/1/2007 | $134.16 | 3 |
| 2 | 15170 | ACELLULAR DERMAL REPLACEMENT, TR | 1/1/2007 | $243.67 | 3 |
| 2 | 15171 | ACELLULAR DERMAL REPLACEMENT, TR | 1/1/2007 | $62.80 | 3 |
| 2 | 15175 | ACELLULAR DERMAL REPLACE, FACE, | 1/1/2007 | $344.10 | 3 |
| 2 | 15176 | ACELLULAR DERMAL REPLACE, FACE, | 1/1/2007 | $99.91 | 3 |
| 2 | 15200 | FULL THICKNESS GRAFT, FREE,INC D | 1/1/2007 | $478.26 | 3 |
| 2 | 15201 | FULL THICKNESS GRAFT, FREE,INC D | 1/1/2007 | $105.88 | 3 |
| 2 | 15220 | FULL THICKNESS GRAFT FREE INC DI | 1/1/2007 | $464.76 | 3 |
| 2 | 15221 | FULL THICKNESS GRAFT FREE INC. D | 1/1/2007 | $95.50 | 3 |
| 2 | 15240 | FULL THICKNESS GRAFT, FREE, INC | 1/1/2007 | $523.67 | 3 |
| 2 | 15241 | FULL THICKNESS GRAFT, FREE, INC | 1/1/2007 | $117.81 | 3 |
| 2 | 15260 | FULL THICKNESS GRAFT FREE INC DI | 1/1/2007 | $544.17 | 3 |
| 2 | 15261 | FULL THICKNESS GRAFT FREE INC. D | 1/1/2007 | $133.38 | 3 |
| 2 | 15300 | ALLOGRAFT SKIN FOR TEMPORARY WOU | 1/1/2007 | $199.56 | 3 |
| 2 | 15301 | ALLOGRAFT SKIN FOR TEMPORARY WOU | 1/1/2007 | $41.78 | 3 |
| 2 | 15320 | ALLOGRAFT SKIN FOR TEMPORARY WOU | 1/1/2007 | $231.21 | 3 |
| 2 | 15321 | ALLOGRAFT SKIN FOR TEMPORARY WOU | 1/1/2007 | $62.28 | 3 |
| 2 | 15330 | ACELLULAR DERMAL ALLOGRAFT, TRUN | 1/1/2007 | $199.30 | 3 |
| 2 | 15331 | ACELLULAR DERMAL ALLOGRAFT, TRUN | 1/1/2007 | $41.52 | 3 |
| 2 | 15335 | ACELLULAR DERMAL ALLOGRAFT, FACE | 1/1/2007 | $221.35 | 3 |
| 2 | 15336 | ACELLULAR DERMAL ALLOGRAFT, FACE | 1/1/2007 | $60.20 | 3 |
| 2 | 15340 | TISSUE CULTURED ALLOGENEIC SKIN | 1/1/2007 | $211.23 | 3 |
| 2 | 15341 | TISSUE CULTURED ALLOGENEIC SKIN | 1/1/2007 | $30.36 | 3 |
| 2 | 15342 | APPLICATION OF BILAMINATE SKIN S | 1/1/2006 | INVALID | N |
| 2 | 15343 | APPLICATION OF BILAMINATE SKIN S | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 15350 | APPLICATION OF ALLOGRAFT (HOMOGR | 1/1/2006 | INVALID | N |
| 2 | 15351 | APPLICAION OF ALLOGRAFT, SKIN; E | 1/1/2006 | INVALID | N |
| 2 | 15360 | TISSUE CULTURED ALLOGENEIC DERMA | 1/1/2007 | $227.84 | 3 |
| 2 | 15361 | TISSUE CULTURED ALLOGENEIC DERMA | 1/1/2007 | $48.53 | 3 |
| 2 | 15365 | TISSUE CULTURED ALLOGENEIC DERMA | 1/1/2007 | $237.96 | 3 |
| 2 | 15366 | TISSUE CULTURED ALLOGENEIC DERMA | 1/1/2007 | $60.20 | 3 |
| 2 | 15400 | XENOGRAFT, SKIN (DERMAL), FOR TE | 1/1/2007 | $220.06 | 3 |
| 2 | 15401 | XENOGRAFT, SKIN, FOR TEMP WOUND | 1/1/2007 | $78.89 | 3 |
| 2 | 15420 | XENOGRAFT SKIN (DERMAL), FOR TEM | 1/1/2007 | $254.57 | 3 |
| 2 | 15421 | XENOGRAFT SKIN (DERMAL), FOR TEM | 1/1/2007 | $78.63 | 3 |
| 2 | 15430 | ACELLULAR XENOGRAFT IMPLANT; 1ST | 1/1/2007 | $345.91 | 3 |
| 2 | 15431 | ACELLULAR XENOGRAFT IMPLANT; EA | 1/1/2006 | $0.01 | 5 |
| 2 | 15570 | FORMATION OF DIRECT OR TUBED PED | 1/1/2007 | $567.53 | 3 |
| 2 | 15572 | FORMATION OF DIRECT OR TUBED PED | 1/1/2007 | $518.48 | 3 |
| 2 | 15574 | FORMATION OF DIRECT OR TUBED PED | 1/1/2007 | $565.19 | 3 |
| 2 | 15576 | FORMATION OF DIRECT OR TUBED PED | 1/1/2007 | $501.61 | 3 |
| 2 | 15600 | DELAY OF FLAP OR SECTIONING OF F | 1/1/2007 | $254.31 | 3 |
| 2 | 15610 | INTERMEDIATE DELAY OF ANY FLAP P | 1/1/2007 | $193.85 | 3 |
| 2 | 15620 | INTERMEDIATE DELAY OF ANY FLAP P | 1/1/2007 | $287.79 | 3 |
| 2 | 15630 | INTERMEDIATE DELAY OF ANY FLAP P | 1/1/2007 | $276.89 | 3 |
| 2 | 15650 | TRANSFER INTERMEDIATE OF ANY PED | 1/1/2007 | $299.46 | 3 |
| 2 | 15731 | FOREHEAD FLAP WITH PRESERVATION | 1/1/2007 | $714.40 | 3 |
| 2 | 15732 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $983.25 | 3 |
| 2 | 15734 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $999.85 | 3 |
| 2 | 15736 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $959.63 | 3 |
| 2 | 15738 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $1,000.63 | 3 |
| 2 | 15740 | FLAP; ISLAND PEDICLE | 1/1/2007 | $545.47 | 3 |
| 2 | 15750 | FLAP; NEUROVASCULAR PEDICLE | 1/1/2007 | $567.79 | 3 |
| 2 | 15756 | FREE MUSCLE FLAP WITH OR WITHOUT | 1/1/2007 | $1,567.64 | 3 |
| 2 | 15757 | FREE SKIN FLAP WITH MICROVASCULA | 1/1/2007 | $1,575.68 | 3 |
| 2 | 15758 | FREE FASCIAL FLAP WITH MICROVASC | 1/1/2007 | $1,580.61 | 3 |
| 2 | 15760 | GRAFT;COMPOSITE (FULL THICKNESS | 1/1/2007 | $509.40 | 3 |
| 2 | 15770 | GRAFT; DERMA-FAT-FASCIA | 1/1/2007 | $396.00 | 3 |
| 2 | 15775 | PUNCH GRAFT FOR HAIR TRANSPLANT | 4/1/1982 | NC | 9 |
| 2 | 15776 | PUNCH GRAFT FOR HAIR TRANSPLANT; | 4/1/1982 | NC | 9 |
| 2 | 15780 | DERMABRASION; TOTAL FACE (EG, FO | 2/1/1993 | NC | 9 |
| 2 | 15781 | DERMABRASION; SEGMENTAL, FACE (E | 2/1/1993 | NC | 9 |
| 2 | 15782 | DERMABRASION; REGIONAL, OTHER TH | 2/1/1993 | NC | 9 |
| 2 | 15783 | DERMABRASION; SUPERFICIAL, ANY S | 2/1/1993 | NC | 9 |
| 2 | 15786 | ABRASION SINGLE LESION (EG KERAT | 2/1/1993 | NC | 9 |
| 2 | 15787 | ABRASION; EACH ADDITIONAL FOUR L | 8/1/1994 | NC | 9 |
| 2 | 15788 | CHEMICAL PEEL, FACIAL; EPIDERMAL | 2/1/1994 | NC | 9 |
| 2 | 15789 | CHEMICAL PEEL, FACIAL; DERMAL | 2/1/1994 | NC | 9 |
| 2 | 15792 | CHEMICAL PEEL, NONFACIAL; EPIDER | 2/1/1994 | NC | 9 |
| 2 | 15793 | CHEMICAL PEEL, NONFACIAL; DERMAL | 2/1/1994 | NC | 9 |
| 2 | 15810 | SALABRASION 20 SQ CM OR LESS | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 15811 | SALABRASION; OVER 20 SQ CM | 1/1/2006 | INVALID | N |
| 2 | 15819 | CERVICOPLASTY | 2/1/1993 | NC | 9 |
| 2 | 15820 | BLEPHAROPLASTY LOWER EYELIDS | 2/1/1993 | NC | 9 |
| 2 | 15821 | BLEPHAROPLASTY LOWER EYELID WITH | 2/1/1993 | NC | 9 |
| 2 | 15822 | BLEPHAROPLASTY, UPPER EYELID | 1/1/2007 | $276.63 | 3 |
| 2 | 15823 | BLEPHAROPLASTY, UPPER EYELID; WI | 1/1/2007 | $399.89 | 3 |
| 2 | 15824 | RHYTIDECTOMY FOREHEAD | 4/1/1982 | NC | 9 |
| 2 | 15825 | RHYTIDECTOMY; NECK WITH PLATYSMA | 10/1/1984 | NC | 9 |
| 2 | 15826 | RHYTIDECTOMY; GLABELLAR FROWN LI | 4/1/1982 | NC | 9 |
| 2 | 15828 | RHYTIDECTOMY; CHEEK CHIN AND NEC | 4/1/1982 | NC | 9 |
| 2 | 15829 | RHYTIDECTOMY; SUPERFICIAL MUSCUL | 10/1/1984 | NC | 9 |
| 2 | 15830 | EXCISION, EXCESSIVE SKIN AND SUB | 1/1/2007 | NC | 9 |
| 2 | 15831 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/2007 | INVALID | N |
| 2 | 15832 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 2 | 15833 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 2 | 15834 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 2 | 15835 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 2 | 15836 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/2007 | $453.35 | 3 |
| 2 | 15837 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 2 | 15838 | EXCISION EXCESSIVE SKIN AND SUBC | 10/1/1984 | NC | 9 |
| 2 | 15839 | EXCISION EXCESSIVE SKIN AND SUBC | 10/1/1984 | NC | 9 |
| 2 | 15840 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $637.33 | 3 |
| 2 | 15841 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $1,058.76 | 3 |
| 2 | 15842 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $1,707.77 | 3 |
| 2 | 15845 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $588.81 | 3 |
| 2 | 15847 | EXCISION, EXCESSIVE SKIN AND SUB | 1/1/2007 | NC | 9 |
| 2 | 15850 | REMOVAL OF SUTURES UNDER ANESTHE | 1/1/2007 | $62.02 | 3 |
| 2 | 15851 | REMOVAL OF SUTURES IN HOSPITAL O | 1/1/2007 | $67.47 | 3 |
| 2 | 15852 | DRESSING CHANGE (FOR OTHER THAN | 1/1/2007 | $72.66 | 3 |
| 2 | 15860 | INTRAVENOUS INJECTION OF AGENT ( | 1/1/2007 | $79.15 | 3 |
| 2 | 15876 | SUCTION ASSISTED LIPECTOMY; HEAD | 3/1/1987 | NC | 9 |
| 2 | 15877 | SUCTION ASSISTED LIPECTOMY; TRUN | 3/1/1987 | NC | 9 |
| 2 | 15878 | SUCTION ASSISTED LIPECTOMY; UPPE | 3/1/1987 | NC | 9 |
| 2 | 15879 | SUCTION ASSISTED LIPECTOMY; LOWE | 3/1/1987 | NC | 9 |
| 2 | 15920 | COCCYGECTOMY WITH PRIMARY SUTURE | 1/1/2007 | $377.57 | 3 |
| 2 | 15922 | EXCISION, COCCYGEAL PRESSURE ULC | 1/1/2007 | $481.11 | 3 |
| 2 | 15931 | EXCISION SACRAL DECUBITUS ULCER | 1/1/2007 | $419.87 | 3 |
| 2 | 15933 | EXCISION SACRAL PRESSURE ULCER W | 1/1/2007 | $524.71 | 3 |
| 2 | 15934 | EXCISION, SACRAL PRESSURE ULCER, | 1/1/2007 | $584.13 | 3 |
| 2 | 15935 | EXCISION SACRAL PRESSURE ULCER W | 1/1/2007 | $700.39 | 3 |
| 2 | 15936 | EXCISION, SACRAL PRESSURE ULCER, | 1/1/2007 | $580.24 | 3 |
| 2 | 15937 | EXCISION SACRAL PRESSURE ULCER W | 1/1/2007 | $677.30 | 3 |
| 2 | 15940 | EXCISION ISCHIAL DECUBITUS ULCER | 1/1/2007 | $436.74 | 3 |
| 2 | 15941 | EXCISION ISCHIAL PRESSURE ULCER | 1/1/2007 | $585.17 | 3 |
| 2 | 15944 | EXCISION, ISCHIAL PRESSURE ULCER | 1/1/2007 | $563.37 | 3 |
| 2 | 15945 | EXCISION ISCHIAL PRESSURE ULCER | 1/1/2007 | $627.47 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 15946 | EXCISION, ISCHIAL PRESSURE ULCER | 1/1/2007 | $1,014.90 | 3 |
| 2 | 15950 | EXCISION TROCHANTERIC DECUBITUS | 1/1/2007 | $363.30 | 3 |
| 2 | 15951 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $520.82 | 3 |
| 2 | 15952 | EXCISION, TROCHANTERIC PRESSURE | 1/1/2007 | $538.20 | 3 |
| 2 | 15953 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $607.75 | 3 |
| 2 | 15956 | EXCISION, TROCHANTERIC PRESSURE, | 1/1/2007 | $739.83 | 3 |
| 2 | 15958 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $746.84 | 3 |
| 2 | 15999 | UNLISTED PROCEDURE, EXCISION PRE | 9/1/1985 | $0.01 | 5 |
| 2 | 16000 | INITIAL TREATMENT FIRST DEGREE B | 1/1/2007 | $47.49 | 3 |
| 2 | 16010 | DRESSINGS AND/OR DEBRIDEMENT INI | 1/1/2006 | INVALID | N |
| 2 | 16015 | DRESSINGS AND/OR DEBRIDEMENT INI | 1/1/2006 | INVALID | N |
| 2 | 16020 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $56.31 | 3 |
| 2 | 16025 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $98.87 | 3 |
| 2 | 16030 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $116.78 | 3 |
| 2 | 16035 | ESCHAROTOMY; INITIAL INCISION | 1/1/2007 | $149.99 | 3 |
| 2 | 16036 | ESCHAROTOMY; EACH ADDITIONAL INC | 1/1/2007 | $59.69 | 3 |
| 2 | 17000 | DESTRUCTION BY ANY METHOD, INCLU | 1/1/2007 | $41.52 | 3 |
| 2 | 17003 | DESTRUCTION BY ANY METHOD, INCLU | 1/1/2007 | $7.01 | 3 |
| 2 | 17004 | DESTRUCTION, ALL BENIGN OR PREMA | 1/1/2007 | $135.20 | 3 |
| 2 | 17106 | DESTRUCTION OF CUTANEOUS VASCULA | 1/1/2007 | $247.56 | 3 |
| 2 | 17107 | DESTRUCTION OF CUTANEOUS VASCULA | 1/1/2007 | $441.15 | 3 |
| 2 | 17108 | DESTRUCTION OF CUTANEOUS VASCULA | 1/1/2007 | $597.11 | 3 |
| 2 | 17110 | DESTRUCTION, OF FLAT WARTS, MOLL | 1/1/2007 | $60.20 | 3 |
| 2 | 17111 | DESTRUCTION BY ANY METHOD OF FLA | 1/1/2007 | $68.51 | 3 |
| 2 | 17250 | CHEMICAL CAUTERIZATION OF GRANUL | 1/1/2007 | $46.19 | 3 |
| 2 | 17260 | DESTRUCTION, MALIGNANT LESION, T | 1/1/2007 | $57.87 | 3 |
| 2 | 17261 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $73.44 | 3 |
| 2 | 17262 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $91.60 | 3 |
| 2 | 17263 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $101.72 | 3 |
| 2 | 17264 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $110.29 | 3 |
| 2 | 17266 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $128.19 | 3 |
| 2 | 17270 | DESTRUCTION, MALIGNANT LESION, S | 1/1/2007 | $79.67 | 3 |
| 2 | 17271 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $86.41 | 3 |
| 2 | 17272 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $99.65 | 3 |
| 2 | 17273 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $112.62 | 3 |
| 2 | 17274 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $136.50 | 3 |
| 2 | 17276 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $163.74 | 3 |
| 2 | 17280 | DESTRUCTION, MALIGNANT LESION, F | 1/1/2007 | $73.44 | 3 |
| 2 | 17281 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $96.02 | 3 |
| 2 | 17282 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $111.07 | 3 |
| 2 | 17283 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $137.54 | 3 |
| 2 | 17284 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $162.71 | 3 |
| 2 | 17286 | DESTRUCTION, MALIGNANT LESION, A | 1/1/2007 | $216.42 | 3 |
| 2 | 17304 | CHEMOSURGERY (MOHS' MICROGRAPHIC | 1/1/2007 | INVALID | N |
| 2 | 17305 | CHEMOSURGERY (MOH'S TECHNIQUE) S | 1/1/2007 | INVALID | N |
| 2 | 17306 | CHEMOSURGERY (MOH'S TECHNIQUE); | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 17307 | CHEMOSURGERY (MOH'S TECHNIQUE); | 1/1/2007 | INVALID | N |
| 2 | 17310 | CHEMOSURGERY (MOH'S TECHNIQUE); | 1/1/2007 | INVALID | N |
| 2 | 17311 | MOHS MICROGRAPHIC TECHNIQUE, INC | 1/1/2007 | $447.12 | 3 |
| 2 | 17312 | MOHS MICROGRAPHIC TECH, INCL REM | 1/1/2007 | $268.58 | 3 |
| 2 | 17313 | MOHS MICROGRAPHIC TECH, INCL REM | 1/1/2007 | $408.19 | 3 |
| 2 | 17314 | MOHS MICROGRAPHIC TECH, INCL REM | 1/1/2007 | $248.86 | 3 |
| 2 | 17315 | MOHS MICROGRAPHIC TECH, INCL REM | 1/1/2007 | $53.20 | 3 |
| 2 | 17340 | CRYOTHERAPY (CO2 SLUSH, LIQUID N | 1/1/2007 | $30.62 | 3 |
| 2 | 17360 | CHEMICAL EXFOLIATION FOR ACNE (E | 1/1/2007 | $76.03 | 3 |
| 2 | 17380 | ELECTROLYSIS EPILATION EACH 1/2 | 8/1/1989 | NC | 9 |
| 2 | 17999 | UNLISTED PROCEDURE SKIN MUCOUS M | 4/1/1982 | $0.01 | 5 |
| 2 | 19000 | PUNCTURE ASPIRATION OF CYST OF B | 1/1/2007 | $75.51 | 3 |
| 2 | 19001 | PUNCTURE ASPIRATION OF CYST OF B | 1/1/2007 | $18.42 | 3 |
| 2 | 19020 | MASTOTOMY WITH EXPLORATION OR DR | 1/1/2007 | $268.84 | 3 |
| 2 | 19030 | INJECTION PROCEDURE ONLY FOR MAM | 1/1/2007 | $116.52 | 3 |
| 2 | 19100 | BIOPSY OF BREAST; PERCUTANEOUS, | 1/1/2007 | $91.34 | 3 |
| 2 | 19101 | BIOPSY OF BREAST; OPEN, INCISION | 1/1/2007 | $209.68 | 3 |
| 2 | 19102 | BIOPSY OF BREAST; PERCUTANEOUS, | 1/1/2007 | $155.18 | 3 |
| 2 | 19103 | BIOPSY OF BREAST; PERCUTANEOUS, | 1/1/2007 | $402.48 | 3 |
| 2 | 19105 | ABLATION, CRYOSURGICAL, OF FIBRO | 1/1/2007 | NC | 9 |
| 2 | 19110 | NIPPLE EXPLORATION WITH OR WITHO | 1/1/2007 | $276.89 | 3 |
| 2 | 19112 | EXCISION OF LACTIFEROUS DUCT FIS | 1/1/2007 | $265.21 | 3 |
| 2 | 19120 | EXCISION OF CYST, FIBROADENOMA, | 1/1/2007 | $281.04 | 3 |
| 2 | 19125 | EXCISION OF BREAST LESION IDENTI | 1/1/2007 | $302.06 | 3 |
| 2 | 19126 | EXCISION OF BREAST LESION IDENTI | 1/1/2007 | $111.84 | 3 |
| 2 | 19140 | MASTECTOMY FOR GYNECOMASTIA | 1/1/2007 | INVALID | N |
| 2 | 19160 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | INVALID | N |
| 2 | 19162 | MASTECTOMY PARTIAL (QUADRECTOMY | 1/1/2007 | INVALID | N |
| 2 | 19180 | MASTECTOMY SIMPLE COMPLETE UNILA | 1/1/2007 | INVALID | N |
| 2 | 19182 | MASTECTOMY SUBCUTANEOUS | 1/1/2007 | INVALID | N |
| 2 | 19200 | MASTECTOMY RADICAL INCLUDING BRE | 1/1/2007 | INVALID | N |
| 2 | 19220 | MASTECTOMY RADICAL INCLUDING BRE | 1/1/2007 | INVALID | N |
| 2 | 19240 | MASTECTOMY,MODIFIED RAD,INCL AXI | 1/1/2007 | INVALID | N |
| 2 | 19260 | EXCISION OF CHEST WALL TUMOR INC | 1/1/2007 | $745.54 | 3 |
| 2 | 19271 | EXCISION OF CHEST WALL TUMOR INV | 1/1/2007 | $1,024.77 | 3 |
| 2 | 19272 | EXCISION OF CHEST WALL TUMOR INV | 1/1/2007 | $1,128.57 | 3 |
| 2 | 19290 | PREOPERATIVE PLACEMENT OF NEEDLE | 1/1/2007 | $108.99 | 3 |
| 2 | 19291 | PREOPERATIVE PLACEMENT OF NEEDLE | 1/1/2007 | $48.79 | 3 |
| 2 | 19295 | IMAGE GUIDED PLACEMENT, METALLIC | 1/1/2007 | $70.32 | 3 |
| 2 | 19296 | PLACEMENT OF RADIOTHERAPY AFTERL | 1/1/2007 | $143.24 | 3 |
| 2 | 19297 | PLACEMENT OF RADIOTHERAPY AFTERL | 1/1/2007 | $65.65 | 3 |
| 2 | 19298 | PLACEMENT OF RADIOTHERAPY AFTERL | 1/1/2007 | $1,264.02 | 3 |
| 2 | 19300 | MASTECTOMY FOR GYNECOMASTIA | 1/1/2007 | NC | 9 |
| 2 | 19301 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | $270.40 | 3 |
| 2 | 19302 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | $566.49 | 3 |
| 2 | 19303 | MASTECTOMY, SIMPLE, COMPLETE | 1/1/2007 | $618.91 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 19304 | MASTECTOMY, SUBCUTANEOUS | 1/1/2007 | $357.59 | 3 |
| 2 | 19305 | MASTECTOMY, RADICAL, INCLUDING P | 1/1/2007 | $708.95 | 3 |
| 2 | 19306 | MASTECTOMY, RADICAL, INCL PECTOR | 1/1/2007 | $740.87 | 3 |
| 2 | 19307 | MASTECTOMY, MODIFIED RADICAL, IN | 1/1/2007 | $748.66 | 3 |
| 2 | 19316 | MASTOPEXY | 8/1/2003 | NC | 9 |
| 2 | 19318 | REDUCTION MAMMAPLASTY | 1/1/2007 | $771.23 | 3 |
| 2 | 19324 | MAMMAPLASTY, AUGMENTATION; WITHO | 1/1/2007 | $300.50 | 3 |
| 2 | 19325 | MAMMAPLASTY AUGMENTATION; WITH P | 1/1/2007 | $423.24 | 3 |
| 2 | 19328 | REMOVAL OF INTACT MAMMARY IMPLAN | 1/1/2007 | $301.28 | 3 |
| 2 | 19330 | REMOVAL OF MAMMARY IMPLANT MATER | 1/1/2007 | $386.40 | 3 |
| 2 | 19340 | IMMEDIATE INSERTION OF BREAST PR | 1/1/2007 | $272.48 | 3 |
| 2 | 19342 | DELAYED INSERTION OF BREAST PROT | 1/1/2007 | $569.86 | 3 |
| 2 | 19350 | RECONSTRUCTION OF NIPPLE AND/OR | 1/1/2007 | $627.99 | 3 |
| 2 | 19355 | CORRECTION OF INVERTED NIPPLES | 1/1/2007 | $486.82 | 3 |
| 2 | 19357 | BREAST RECONSTRUCTION, IMMEDIATE | 1/1/2007 | $952.88 | 3 |
| 2 | 19361 | BREAST RECONSTRUCTION W/LATISSIM | 1/1/2007 | $898.39 | 3 |
| 2 | 19364 | BREAST RECONSTRUCTION WITH FREE | 1/1/2007 | $1,836.48 | 3 |
| 2 | 19366 | BREAST RECONSTRUCTION WITH OTHER | 1/1/2007 | $936.80 | 3 |
| 2 | 19367 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $1,205.64 | 3 |
| 2 | 19368 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $1,475.52 | 3 |
| 2 | 19369 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $1,368.34 | 3 |
| 2 | 19370 | OPEN PERIPROSTHETIC CAPSULOTOMY, | 10/1/1984 | NC | 9 |
| 2 | 19371 | PERIPROSTHETIC CAPSULECTOMY, BRE | 1/1/2007 | $487.86 | 3 |
| 2 | 19380 | REVISION OF RECONSTRUCTED BREAST | 1/1/2007 | $474.63 | 3 |
| 2 | 19396 | PREPARATION OF MOULAGE FOR CUSTO | 10/1/1984 | NC | 9 |
| 2 | 19499 | UNLISTED PROCEDURE BREAST | 2/1/1994 | $0.01 | 5 |
| 2 | 20000 | INCISION OF SOFT TISSUE ABSCESS | 1/1/2007 | $131.57 | 3 |
| 2 | 20005 | INCISION OF SOFT TISSUE ABSCESS | 1/1/2007 | $191.25 | 3 |
| 2 | 20100 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $408.45 | 3 |
| 2 | 20101 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $249.12 | 3 |
| 2 | 20102 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $308.81 | 3 |
| 2 | 20103 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $379.91 | 3 |
| 2 | 20150 | EXCISION OF EPIPHYSEAL BAR, W/OR | 1/1/2007 | $590.36 | 3 |
| 2 | 20200 | BIOPSY MUSCLE SUPERFICIAL | 1/1/2007 | $122.74 | 3 |
| 2 | 20205 | BIOPSY MUSCLE; DEEP | 1/1/2007 | $170.75 | 3 |
| 2 | 20206 | BIOPSY MUSCLE PERCUTANEOUS NEEDL | 1/1/2007 | $196.70 | 3 |
| 2 | 20220 | BIOPSY BONE TROCAR OR NEEDLE SUP | 1/1/2007 | $153.62 | 3 |
| 2 | 20225 | BIOPSY, BONE, TROCAR, OR NEEDLE; | 1/1/2007 | $690.53 | 3 |
| 2 | 20240 | BIOPSY, BONE, OPEN; SUPERFICIAL | 1/1/2007 | $161.67 | 3 |
| 2 | 20245 | BIOPSY, BONE, OPEN; DEEP (EG, HU | 1/1/2007 | $406.64 | 3 |
| 2 | 20250 | BIOPSY VERTEBRAL BODY OPEN THORA | 1/1/2007 | $247.82 | 3 |
| 2 | 20251 | BIOPSY VERTEBRAL BODY OPEN; LUMB | 1/1/2007 | $282.08 | 3 |
| 2 | 20500 | INJECTION OF SINUS TRACT THERAPE | 1/1/2007 | $93.94 | 3 |
| 2 | 20501 | INJECTION OF SINUS TRACT; DIAGNO | 1/1/2007 | $96.53 | 3 |
| 2 | 20520 | REMOVAL OF FOREIGN BODY IN MUSCL | 1/1/2007 | $129.23 | 3 |
| 2 | 20525 | REMOVAL OF FOREIGN BODY IN MUSCL | 1/1/2007 | $341.76 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 20526 | INJECTION, THERAPEUTIC (EG, LOCA | 1/1/2007 | $52.94 | 3 |
| 2 | 20550 | INJECTION(S); TENDON SHEATH, LIG | 1/1/2007 | $40.22 | 3 |
| 2 | 20551 | INJECTION; TENDON ORIGIN/INSERTI | 1/1/2007 | $39.18 | 3 |
| 2 | 20552 | INJECTION(S); SINGLE OR MULTIPLE | 7/1/2004 | NC | 9 |
| 2 | 20553 | INJECTION(S); SINGLE OR MULTIPLE | 7/1/2004 | NC | 9 |
| 2 | 20600 | ARTHROCENTESIS, ASPIRATION AND/O | 1/1/2007 | $36.07 | 3 |
| 2 | 20605 | ARTHROCENTESIS, ASPIRATION AND/O | 1/1/2007 | $39.44 | 3 |
| 2 | 20610 | ARTHROCENTESIS ASPIRATION AND/OR | 1/1/2007 | $48.01 | 3 |
| 2 | 20612 | ASPIRATION AND/OR INJECTION OF G | 1/1/2003 | NC | 9 |
| 2 | 20615 | ASPIRATION AND INJECTION FOR TRE | 1/1/2007 | $155.70 | 3 |
| 2 | 20650 | INSERTION OF WIRE OR PIN WITH AP | 1/1/2007 | $127.41 | 3 |
| 2 | 20660 | APPLICATION OF CRANIAL TONGS, CA | 1/1/2007 | $159.85 | 3 |
| 2 | 20661 | APPLICATION OF HALO, INCLUDING R | 1/1/2007 | $283.89 | 3 |
| 2 | 20662 | APPLICATION OF HALO INCLUDING RE | 1/1/2007 | $315.55 | 3 |
| 2 | 20663 | APPLICATION OF HALO INCLUDING RE | 1/1/2007 | $290.64 | 3 |
| 2 | 20664 | APPLICATION OF HALO, INCLUDING R | 1/1/2007 | $437.26 | 3 |
| 2 | 20665 | REMOVAL OF TONGS OR HALO APPLIED | 1/1/2007 | $94.98 | 3 |
| 2 | 20670 | REMOVAL OF IMPLANT SUPERFICIAL ( | 1/1/2007 | $352.66 | 3 |
| 2 | 20680 | REMOVAL OF IMPLANT; DEEP (EG BUR | 1/1/2007 | $329.82 | 3 |
| 2 | 20690 | APPLICATION OF A UNIPLANE (PINS | 1/1/2007 | $171.79 | 3 |
| 2 | 20692 | APPLICATION OF A MULTIPLANE (PIN | 1/1/2007 | $291.42 | 3 |
| 2 | 20693 | ADJUSTMENT OR REVISION OF EXTERN | 1/1/2007 | $318.93 | 3 |
| 2 | 20694 | REMOVAL, UNDER ANESTHESIA, OF EX | 1/1/2007 | $311.92 | 3 |
| 2 | 20802 | REPLANTATION ARM (INCLUDES SURGI | 1/1/2007 | $1,710.36 | 3 |
| 2 | 20805 | REPLANTATION FOREARM (INCLUDES R | 1/1/2007 | $2,314.22 | 3 |
| 2 | 20808 | REPLANTATION HAND (INCLUDES HAND | 1/1/2007 | $2,874.22 | 3 |
| 2 | 20816 | REPLANTATION DIGIT EXCL THUMB (I | 1/1/2007 | $1,902.39 | 3 |
| 2 | 20822 | REPLANTATION DIGIT EXCLUDING THU | 1/1/2007 | $1,671.70 | 3 |
| 2 | 20824 | REPLANTATION THUMB (INCLUDES CAR | 1/1/2007 | $1,872.29 | 3 |
| 2 | 20827 | REPLANTATION THUMB (INCLUDES DIS | 1/1/2007 | $1,728.53 | 3 |
| 2 | 20838 | REPLANTATION FOOT COMPLETE AMPUT | 1/1/2007 | $1,681.82 | 3 |
| 2 | 20900 | BONE GRAFT ANY DONOR AREA MINOR | 1/1/2007 | $388.21 | 3 |
| 2 | 20902 | BONE GRAFT ANY DONOR AREA; MAJOR | 1/1/2007 | $408.45 | 3 |
| 2 | 20910 | CARTILAGE GRAFT; COSTOCHONDRAL | 1/1/2007 | $291.68 | 3 |
| 2 | 20912 | CARTILAGE GRAFT; NASAL SEPTUM | 1/1/2007 | $333.20 | 3 |
| 2 | 20920 | FASCIA LATA GRAFT BY STRIPPER | 1/1/2007 | $264.43 | 3 |
| 2 | 20922 | FASCIA LATA GRAFT; BY INCISION A | 1/1/2007 | $385.62 | 3 |
| 2 | 20924 | TENDON GRAFT FROM A DISTANCE (EG | 1/1/2007 | $347.99 | 3 |
| 2 | 20926 | TISSUE GRAFTS OTHER (EG PARANTEN | 1/1/2007 | $289.34 | 3 |
| 2 | 20930 | ALLOGRAFT FOR SPINE SURGERY ONLY | 9/1/2006 | $54.61 | 3 |
| 2 | 20931 | ALLOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $82.26 | 3 |
| 2 | 20936 | AUTOGRAFT FOR SPINE SURGERY ONLY | 8/1/2003 | $123.00 | 3 |
| 2 | 20937 | AUTOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $124.04 | 3 |
| 2 | 20938 | AUTOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $135.46 | 3 |
| 2 | 20950 | MONITORING OF INTERSTITIAL FLUID | 1/1/2007 | $215.90 | 3 |
| 2 | 20955 | FIBULA GRAFT WITH MICROVASCULAR | 1/1/2007 | $1,774.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 20956 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $1,843.23 | 3 |
| 2 | 20957 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $1,729.05 | 3 |
| 2 | 20962 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $1,877.74 | 3 |
| 2 | 20969 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $1,955.33 | 3 |
| 2 | 20970 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $1,947.55 | 3 |
| 2 | 20972 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $1,787.18 | 3 |
| 2 | 20973 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $1,984.14 | 3 |
| 2 | 20974 | ELECTRICAL STIMULATION TO AID BO | 1/1/2007 | $36.85 | 3 |
| 2 | 20975 | ELECTRICAL STIMULATION TO AID BO | 1/1/2007 | $125.08 | 3 |
| 2 | 20979 | LOW INTENSITY ULTRASOUND STIMULA | 1/1/2007 | $39.18 | 3 |
| 2 | 20982 | ABLATION, BONE TUMOR(S) (EG, OST | 4/1/2004 | NC | 9 |
| 2 | 20999 | UNLISTED PROCEDURE MUSCULOSKELET | 2/1/1994 | $0.01 | 5 |
| 2 | 21010 | ARTHROTOMY, TEMPOROMANDIBULAR JO | 1/1/2007 | $475.92 | 3 |
| 2 | 21015 | RADICAL RESECTION OF TUMOR (EG,M | 1/1/2007 | $285.45 | 3 |
| 2 | 21025 | EXCISION OF BONE (EG, FOR OSTEOM | 1/1/2007 | $613.46 | 3 |
| 2 | 21026 | EXCISION OF BONE (EG, FOR OSTEOM | 1/1/2007 | $345.65 | 3 |
| 2 | 21029 | REMOVAL BY CONTOURING OF BENIGN | 1/1/2007 | $468.14 | 3 |
| 2 | 21030 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $295.31 | 3 |
| 2 | 21031 | EXCISION OF TORUS MANDIBULARIS | 1/1/2007 | $230.96 | 3 |
| 2 | 21032 | EXCISION OF MAXILLARY TORUS PALA | 1/1/2007 | $235.37 | 3 |
| 2 | 21034 | EXCISION OF MALIGNANT TUMOR OF M | 1/1/2007 | $877.89 | 3 |
| 2 | 21040 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $296.87 | 3 |
| 2 | 21041 | EXCISION OF BENIGN CYST OR TUMOR | 7/1/2003 | INVALID | N |
| 2 | 21044 | EXCISION OF MALIGNANT TUMOR OF M | 1/1/2007 | $580.24 | 3 |
| 2 | 21045 | EXCISION OF MALIGNANT TUMOR OF M | 1/1/2007 | $780.06 | 3 |
| 2 | 21046 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $694.42 | 3 |
| 2 | 21047 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $890.60 | 3 |
| 2 | 21048 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $711.29 | 3 |
| 2 | 21049 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $846.49 | 3 |
| 2 | 21050 | CONDYLECTOMY, TEMPOROMANDIBULAR | 1/1/2007 | $562.86 | 3 |
| 2 | 21060 | MENISCECTOMY, PARTIAL OR COMPLET | 1/1/2007 | $524.71 | 3 |
| 2 | 21070 | CORONOIDECTOMY (SEPARATE PROCEDU | 1/1/2007 | $430.25 | 3 |
| 2 | 21076 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $720.89 | 3 |
| 2 | 21077 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,807.94 | 3 |
| 2 | 21079 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,220.17 | 3 |
| 2 | 21080 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,384.69 | 3 |
| 2 | 21081 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,256.24 | 3 |
| 2 | 21082 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,124.93 | 3 |
| 2 | 21083 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,063.69 | 3 |
| 2 | 21084 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,223.80 | 3 |
| 2 | 21085 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $481.89 | 3 |
| 2 | 21086 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,359.78 | 3 |
| 2 | 21087 | IMPRESSION AND CUSTOM PREPARATIO | 1/1/2007 | $1,340.84 | 3 |
| 2 | 21088 | IMPRESSION AND CUSTOM PREPARATIO | 7/11/2005 | $0.01 | 5 |
| 2 | 21089 | UNLISTED MAXILLOFACIAL PROSTHETI | 8/19/2002 | $0.01 | 5 |
| 2 | 21100 | APPLICATION OF HALO TYPE APPLIAN | 1/1/2007 | $418.05 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 21110 | APPLICATION OF INTERDENTAL FIXAT | 1/1/2007 | $402.48 | 3 |
| 2 | 21116 | INJECTION PROCEDURE FOR TEMPOROM | 1/1/2007 | $135.20 | 3 |
| 2 | 21120 | GENIOPLASTY; AUGMENTATION (AUTOG | 1/1/2007 | $418.57 | 3 |
| 2 | 21121 | GENIOPLASTY; SLIDING OSTEOTOMY, | 1/1/2007 | $474.63 | 3 |
| 2 | 21122 | GENIOPLASTY; SLIDING OSTEOTOMIES | 2/1/1994 | NC | 9 |
| 2 | 21123 | GENIOPLASTY; SLIDING,AUGMENTATIO | 2/1/1994 | NC | 9 |
| 2 | 21125 | AUGMENTATION, MANDIBULAR BODY OR | 2/1/1994 | NC | 9 |
| 2 | 21127 | AUGMENTATION,MANDIBULAR BODY OR | 2/1/1994 | NC | 9 |
| 2 | 21137 | REDUCTION FOREHEAD; CONTOURING O | 1/1/2007 | $489.94 | 3 |
| 2 | 21138 | REDUCTION FOREHEAD; CONTOURING A | 1/1/2007 | $609.05 | 3 |
| 2 | 21139 | REDUCTION FOREHEAD; CONTOURING A | 1/1/2007 | $697.02 | 3 |
| 2 | 21141 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $885.15 | 3 |
| 2 | 21142 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $882.82 | 3 |
| 2 | 21143 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $922.78 | 3 |
| 2 | 21145 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $952.11 | 3 |
| 2 | 21146 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $1,015.68 | 3 |
| 2 | 21147 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $1,003.49 | 3 |
| 2 | 21150 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $1,156.33 | 3 |
| 2 | 21151 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $1,390.40 | 3 |
| 2 | 21154 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $1,456.83 | 3 |
| 2 | 21155 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $1,686.75 | 3 |
| 2 | 21159 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $2,067.18 | 3 |
| 2 | 21160 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $2,025.40 | 3 |
| 2 | 21172 | RECONSTRUCTION SUPERIOR-LATERAL | 1/1/2007 | $1,170.35 | 3 |
| 2 | 21175 | RECONSTRUCTION,BIFRONTAL,SUPERIO | 1/1/2007 | $1,447.75 | 3 |
| 2 | 21179 | RECONSTRUCTION, ENTIRE OR MAJORI | 1/1/2007 | $1,016.98 | 3 |
| 2 | 21180 | RECONSTRUCTION, ENTIRE OR MAJORI | 1/1/2007 | $1,143.10 | 3 |
| 2 | 21181 | REMOVAL BY CONTOURING OF BENIGN | 1/1/2007 | $485.01 | 3 |
| 2 | 21182 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $1,404.15 | 3 |
| 2 | 21183 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $1,573.09 | 3 |
| 2 | 21184 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $1,709.59 | 3 |
| 2 | 21188 | RECONSTRUCTION MIDFACE,OSTEOTOMI | 1/1/2007 | $1,116.89 | 3 |
| 2 | 21193 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $831.44 | 3 |
| 2 | 21194 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $924.34 | 3 |
| 2 | 21195 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $874.77 | 3 |
| 2 | 21196 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $952.11 | 3 |
| 2 | 21198 | OSTEOTOMY, MANDIBLE, SEGMENTAL | 1/1/2007 | $734.90 | 3 |
| 2 | 21199 | OSTEOTOMY, MANDIBLE, SEGMENTAL; | 1/1/2007 | $687.93 | 3 |
| 2 | 21206 | OSTEOTOMY,MAXILLA,SEGMENTAL (EG, | 1/1/2007 | $728.68 | 3 |
| 2 | 21208 | OSTEOPLASTY, FACIAL BONES; AUGME | 1/1/2007 | $874.26 | 3 |
| 2 | 21209 | OSTEOPLASTY, FACIAL BONES; REDUC | 1/1/2007 | $478.52 | 3 |
| 2 | 21210 | GRAFT BONE NASAL MAXILLARY AND M | 1/1/2007 | $945.88 | 3 |
| 2 | 21215 | GRAFT BONE; MANDIBLE (INCLUDES O | 1/1/2007 | $562.34 | 3 |
| 2 | 21230 | GRAFT RIB CARTILAGE AUTOGENOUS T | 1/1/2007 | $521.60 | 3 |
| 2 | 21235 | GRAFT;EAR CARTILAGE,AUTOGRAFT,TO | 1/1/2007 | $446.08 | 3 |
| 2 | 21240 | ARTHROPLASTY,TEMPOROMANDIBULAR J | 1/1/2007 | $735.68 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 21242 | ARTHROPLASTY, TEMPOROMANDIBULAR | 1/1/2007 | $681.19 | 3 |
| 2 | 21243 | ARTHROPLASTY, TEMPOROMANDIBULAR | 1/1/2007 | $1,076.67 | 3 |
| 2 | 21244 | RECONSTRUCTION OF MANDIBLE, EXTR | 1/1/2007 | $654.46 | 3 |
| 2 | 21245 | RECONSTRUCTION OF MANDIBLE OR MA | 1/1/2007 | $712.85 | 3 |
| 2 | 21246 | RECONSTRUCTION OF MANDIBLE OR MA | 1/1/2007 | $593.48 | 3 |
| 2 | 21247 | RECONSTRUCTION OF MANDIBULAR CON | 1/1/2007 | $1,111.44 | 3 |
| 2 | 21248 | RECONSTRUCTION OF MANDIBLE OR MA | 1/1/2007 | $653.42 | 3 |
| 2 | 21249 | RECONSTRUCTION OF MANDIBLE OR MA | 1/1/2007 | $953.40 | 3 |
| 2 | 21255 | RECONSTRUCTION OF ZYGOMATIC ARCH | 1/1/2007 | $914.74 | 3 |
| 2 | 21256 | RECONSTRUCTION OF ORBIT W/OSTEOT | 1/1/2007 | $766.04 | 3 |
| 2 | 21260 | ORBITAL HYPERTELORISM CORRECTION | 1/1/2007 | $785.51 | 3 |
| 2 | 21261 | PERIORBITAL OSTEOTOMIES FOR ORBI | 1/1/2007 | $1,535.20 | 3 |
| 2 | 21263 | PERIORBITAL OSTEOTOMIES FOR ORBI | 1/1/2007 | $1,300.87 | 3 |
| 2 | 21267 | ORBITAL REPOSITIONING PERIORBITA | 1/1/2007 | $1,048.38 | 3 |
| 2 | 21268 | ORBITAL REPOSITIONING PERIORBITA | 1/1/2007 | $1,254.94 | 3 |
| 2 | 21270 | MALAR AUGMENTATION, PROSTHETIC M | 1/1/2007 | $586.73 | 3 |
| 2 | 21275 | SECONDARY REVISION FOR ORBITOCRA | 1/1/2007 | $536.91 | 3 |
| 2 | 21280 | MEDIAL CANTHOPEXY (SEPARATE PROC | 1/1/2007 | $321.26 | 3 |
| 2 | 21282 | LATERAL CANTHOPEXY | 1/1/2007 | $213.57 | 3 |
| 2 | 21295 | REDUCTION OF MASSETER MUSCLE/BON | 1/1/2007 | $109.77 | 3 |
| 2 | 21296 | REDUCTION OF MASSETER MUSCLE (EG | 1/1/2007 | $246.53 | 3 |
| 2 | 21299 | UNLISTED CRANIOFACIAL AND MAXILL | 2/1/1994 | $0.01 | 5 |
| 2 | 21300 | CLOSED TREATMENT OF SKULL FRACTU | 1/1/2007 | INVALID | N |
| 2 | 21310 | CLOSED TREATMENT OF NASAL BONE F | 1/1/2007 | $75.77 | 3 |
| 2 | 21315 | CLOSED TREATMENT, NASAL BONE FRA | 1/1/2007 | $152.85 | 3 |
| 2 | 21320 | MANIPULATIVE TREATMENT NASAL BON | 1/1/2007 | $154.40 | 3 |
| 2 | 21325 | OPEN TREATMENT OF NASAL FRACTURE | 1/1/2007 | $329.82 | 3 |
| 2 | 21330 | OPEN TREATMENT OF NASAL FRACTURE | 1/1/2007 | $406.38 | 3 |
| 2 | 21335 | OPEN TREATMENT OF NASAL FRACTURE | 1/1/2007 | $492.79 | 3 |
| 2 | 21336 | OPEN TREATMENT OF NASAL SEPTAL F | 1/1/2007 | $412.61 | 3 |
| 2 | 21337 | CLOSED TREATMENT OF NASAL SEPTAL | 1/1/2007 | $236.66 | 3 |
| 2 | 21338 | OPEN TREATMENT OF NASOETHMOID FR | 1/1/2007 | $553.51 | 3 |
| 2 | 21339 | OPEN TREATMENT OF NASOETHMOID FR | 1/1/2007 | $596.33 | 3 |
| 2 | 21340 | PERCUTANEOUS TREAT OF NASOETHMOI | 1/1/2007 | $527.30 | 3 |
| 2 | 21343 | OPEN TREATMENT OF DEPRESSED FRON | 1/1/2007 | $776.16 | 3 |
| 2 | 21344 | OPEN TREATMENT OF COMPLICATED FR | 1/1/2007 | $1,003.49 | 3 |
| 2 | 21345 | CLOSED TREATMENT OF NASOMAXILLAR | 1/1/2007 | $491.49 | 3 |
| 2 | 21346 | OPEN TREATMENT OF NASOMAXILLARY | 1/1/2007 | $623.84 | 3 |
| 2 | 21347 | OPEN TREATMENT OF NASOMAXILLARY | 1/1/2007 | $788.36 | 3 |
| 2 | 21348 | OPEN TREATMENT OF NASOMAXILLARY | 1/1/2007 | $785.77 | 3 |
| 2 | 21355 | PERCUTANEOUS TREATMENT OF FRACTU | 1/1/2007 | $268.58 | 3 |
| 2 | 21356 | OPEN TREATMENT OF DEPRESSED ZYGO | 1/1/2007 | $304.65 | 3 |
| 2 | 21360 | OPEN TREATMENT OF DEPRESSED MALA | 1/1/2007 | $340.98 | 3 |
| 2 | 21365 | OPEN TREATMENT OF COMPLICATED FR | 1/1/2007 | $713.11 | 3 |
| 2 | 21366 | OPEN TREATMENT OF COMPLICATED FR | 1/1/2007 | $819.76 | 3 |
| 2 | 21385 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $478.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 21386 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $446.60 | 3 |
| 2 | 21387 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $512.51 | 3 |
| 2 | 21390 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $488.64 | 3 |
| 2 | 21395 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $600.74 | 3 |
| 2 | 21400 | CLOSED TREATMENT OF FRACTURE OF | 1/1/2007 | $108.21 | 3 |
| 2 | 21401 | TREATMENT OF FRACTURE OF ORBIE E | 1/1/2007 | $302.32 | 3 |
| 2 | 21406 | OPEN TREATMENT OF FRACTURE OF OR | 1/1/2007 | $358.89 | 3 |
| 2 | 21407 | OPEN TREATMENT OF FRACTURE OF OR | 1/1/2007 | $426.10 | 3 |
| 2 | 21408 | OPEN TREATMENT OF FRACTURE OF OR | 1/1/2007 | $589.32 | 3 |
| 2 | 21421 | CLOSED TREATMENT OF PALATAL OR M | 1/1/2007 | $394.96 | 3 |
| 2 | 21422 | OPEN TREATMENT OF PALATAL OR MAX | 1/1/2007 | $451.53 | 3 |
| 2 | 21423 | OPEN TREATMENT OF PALATAL OR MAX | 1/1/2007 | $544.95 | 3 |
| 2 | 21431 | CLOSED TREATMENT OF CRANIOFACIAL | 1/1/2007 | $448.68 | 3 |
| 2 | 21432 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $453.87 | 3 |
| 2 | 21433 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $1,155.81 | 3 |
| 2 | 21435 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $828.84 | 3 |
| 2 | 21436 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $1,280.89 | 3 |
| 2 | 21440 | CLOSED TREATMENT OF MANDIBULAR O | 1/1/2007 | $264.69 | 3 |
| 2 | 21445 | OPEN TREATMENT OF MANDIBULAR OR | 1/1/2007 | $413.38 | 3 |
| 2 | 21450 | CLOSED TREATMENT OF MANDIBULAR F | 1/1/2007 | $277.67 | 3 |
| 2 | 21451 | CLOSED TREATMENBT OF MANDIBULAR | 1/1/2007 | $385.88 | 3 |
| 2 | 21452 | PERCUTANEOUS TREATMENT OF MANDIB | 1/1/2007 | $397.29 | 3 |
| 2 | 21453 | CLOSED TREATMENT OF MANDIBULAR F | 1/1/2007 | $442.19 | 3 |
| 2 | 21454 | OPEN TREATMENT OF MANDIBULAR FRA | 1/1/2007 | $351.62 | 3 |
| 2 | 21461 | OPEN TREATMENT OF MANDIBULAR FRA | 1/1/2007 | $564.67 | 3 |
| 2 | 21462 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $617.61 | 3 |
| 2 | 21465 | OPEN TREATMENT OF MANDIBULAR CON | 1/1/2007 | $602.82 | 3 |
| 2 | 21470 | OPEN TREATMENT OF COMPLICATED MA | 1/1/2007 | $761.11 | 3 |
| 2 | 21480 | CLOSED TREATMENT OF TEMPOROMANDI | 1/1/2007 | $63.58 | 3 |
| 2 | 21485 | CLOSED TREATMENT OF TEMPOROMANDI | 1/1/2007 | $330.34 | 3 |
| 2 | 21490 | OPEN TREATMENT OF TEMPOROMANDIBU | 1/1/2007 | $610.34 | 3 |
| 2 | 21493 | CLOSED TREATMENT OF HYOID FRACTU | 1/1/2006 | INVALID | N |
| 2 | 21494 | TREATMENT OF CLOSED OR OPEN HYOI | 1/1/2006 | INVALID | N |
| 2 | 21495 | OPEN TREATMENT OF HYOID FRACTURE | 1/1/2007 | $378.35 | 3 |
| 2 | 21497 | INTERDENTAL WIRING FOR CONDITION | 1/1/2007 | $332.68 | 3 |
| 2 | 21499 | UNLISTED PROCEDURE HEAD | 2/1/1994 | $0.01 | 5 |
| 2 | 21501 | INCISION AND DRAINAGE DEEP ABSCE | 1/1/2007 | $276.89 | 3 |
| 2 | 21502 | INCISION AND DRAINAGE DEEP ABSCE | 1/1/2007 | $356.29 | 3 |
| 2 | 21510 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $316.85 | 3 |
| 2 | 21550 | BIOPSY, SOFT TISSUE OF NECK OR T | 1/1/2007 | $150.77 | 3 |
| 2 | 21555 | EXCISION TUMOR, SOFT TISSUE OF N | 1/1/2007 | $270.66 | 3 |
| 2 | 21556 | EXCISION TUMOR, SOFT TISSUE OF N | 1/1/2007 | $267.80 | 3 |
| 2 | 21557 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $397.55 | 3 |
| 2 | 21600 | EXCISION OF RIB PARTIAL | 1/1/2007 | $353.44 | 3 |
| 2 | 21610 | COSTOTRANSVERSECTOMY (SEPARATE P | 1/1/2007 | $688.97 | 3 |
| 2 | 21615 | EXCISION FIRST AND/OR CERVICAL R | 1/1/2007 | $467.36 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 21616 | EXCISION FIRST AND/OR CERVICAL F | 1/1/2007 | $568.82 | 3 |
| 2 | 21620 | OSTECTOMY OF STERNAUM PARTIAL | 1/1/2007 | $356.81 | 3 |
| 2 | 21627 | STERNAL DEBRIDEMENT | 1/1/2007 | $366.93 | 3 |
| 2 | 21630 | RADICAL RESECTION OF STERNUM | 1/1/2007 | $825.21 | 3 |
| 2 | 21632 | RADICAL RESECTION OF STERNUM; WI | 1/1/2007 | $827.81 | 3 |
| 2 | 21685 | HYOID MYOTOMY AND SUSPENSION | 4/1/2004 | NC | 9 |
| 2 | 21700 | DIVISION OF SCALENUS ANTICUS WIT | 1/1/2007 | $284.15 | 3 |
| 2 | 21705 | DIVISION OF SCALENUS ANTICUS; WI | 1/1/2007 | $431.29 | 3 |
| 2 | 21720 | DIVISION OF STERNOCLEIDOMASTOID | 1/1/2007 | $234.85 | 3 |
| 2 | 21725 | DIVISION OF STERNOCLEIDOMASTOID | 1/1/2007 | $354.22 | 3 |
| 2 | 21740 | RECONSTRUCTIVE REPAIR OF PECTUS | 1/1/2007 | $710.51 | 3 |
| 2 | 21742 | RECONSTRUCTIVE REPAIR OF PECTUS | 1/1/2003 | NC | 9 |
| 2 | 21743 | RECONSTRUCTIVE REPAIR OF PECTUS | 1/1/2003 | $0.01 | 5 |
| 2 | 21750 | CLOSURE OF MEDIAN STERNOTOMY SEP | 1/1/2007 | $480.33 | 3 |
| 2 | 21800 | CLOSED TREATMENT OF RIB FRACTURE | 1/1/2007 | $62.02 | 3 |
| 2 | 21805 | OPEN TREATMENT OF RIB FRACTURE W | 1/1/2007 | $164.52 | 3 |
| 2 | 21810 | TREATMENT OF RIB FRACTURE REQUIR | 1/1/2007 | $331.38 | 3 |
| 2 | 21820 | CLOSED TREATMENT OF STERNUM FRAC | 1/1/2007 | $84.86 | 3 |
| 2 | 21825 | OPEN TREATMENT OF STERNUM FRACTU | 1/1/2007 | $387.17 | 3 |
| 2 | 21899 | UNLISTED PROCEDURE NECK OR THORA | 2/1/1994 | $0.01 | 5 |
| 2 | 21920 | BIOPSY, SOFT TISSUE OF BACK OR F | 1/1/2007 | $142.47 | 3 |
| 2 | 21925 | BIOPSY, SOFT TISSUE OF BACK OR F | 1/1/2007 | $266.25 | 3 |
| 2 | 21930 | EXCISION, TUMOR, SOFT TISSUE OF | 1/1/2007 | $295.31 | 3 |
| 2 | 21935 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $779.80 | 3 |
| 2 | 22010 | INCISION AND DRAINAGE, OPEN, OF | 1/1/2007 | $562.86 | 3 |
| 2 | 22015 | INCISION AND DRAINAGE, OPEN, OF | 1/1/2007 | $557.93 | 3 |
| 2 | 22100 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $503.43 | 3 |
| 2 | 22101 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $505.25 | 3 |
| 2 | 22102 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $513.81 | 3 |
| 2 | 22103 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $103.54 | 3 |
| 2 | 22110 | PART EXCISION OF VERT BODY, CERV | 1/1/2007 | $640.19 | 3 |
| 2 | 22112 | PART EXCISION OF VERT BODY, THOR | 1/1/2007 | $638.63 | 3 |
| 2 | 22114 | PART EXCISION OF VERT BODY, LUMB | 1/1/2007 | $640.97 | 3 |
| 2 | 22116 | PART EXCISION OF VERT BODY, EA A | 1/1/2007 | $103.54 | 3 |
| 2 | 22210 | OSTEOTOMY OF SPINE, POSTERIOR OR | 1/1/2007 | $1,159.19 | 3 |
| 2 | 22212 | OSTEOTOMY OF SPINE, POSTERIOR AP | 1/1/2007 | $949.77 | 3 |
| 2 | 22214 | OSTEOTOMY OF SPINE, POSTERIOR AP | 1/1/2007 | $964.82 | 3 |
| 2 | 22216 | OSTEOTOMY OF SPINE, POSTERIOR OR | 1/1/2007 | $271.44 | 3 |
| 2 | 22220 | OSTEOTOMY OF SPINE, INCLUDING DI | 1/1/2007 | $1,039.56 | 3 |
| 2 | 22222 | OSTEOTOMY OF SPINE, ANTERIOR APP | 1/1/2007 | $954.18 | 3 |
| 2 | 22224 | OSTEOTOMY OF SPINE, ANTERIOR APP | 1/1/2007 | $1,036.18 | 3 |
| 2 | 22226 | OSTEOTOMY OF SPINE, INCLUDING DI | 1/1/2007 | $270.40 | 3 |
| 2 | 22305 | CLOSED TREATMENT OF VERTEBRAL PR | 1/1/2007 | $123.52 | 3 |
| 2 | 22310 | CLOSED TREATMENT OF VERTEBRAL BO | 1/1/2007 | $153.62 | 3 |
| 2 | 22315 | CLOSED TREATMENT OF VERTEBRAL FR | 1/1/2007 | $529.12 | 3 |
| 2 | 22318 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $1,042.41 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 22319 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $1,161.00 | 3 |
| 2 | 22325 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $888.79 | 3 |
| 2 | 22326 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $952.88 | 3 |
| 2 | 22327 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $922.52 | 3 |
| 2 | 22328 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $202.67 | 3 |
| 2 | 22505 | MANIPULATION OF SPINE REQUIRING | 1/1/2007 | $82.26 | 3 |
| 2 | 22520 | PERCUTANEOUS VERTEBROPLASTY, ONE | 1/1/2007 | $407.93 | 3 |
| 2 | 22521 | PERCUTANEOUS VERTEBROPLASTY, ONE | 1/1/2007 | $386.40 | 3 |
| 2 | 22522 | PERCUTANEOUS VERTEBROPLASTY, ONE | 1/1/2007 | $176.46 | 3 |
| 2 | 22523 | PERCUTANEOUS VERTEBRAL AUGMENTAT | 1/1/2006 | NC | 9 |
| 2 | 22524 | PERCUTANEOUS VERTEBRAL AUGMENTAT | 1/1/2006 | NC | 9 |
| 2 | 22525 | PERCUTANEOUS VERTEBRAL AUGMENTAT | 1/1/2006 | NC | 9 |
| 2 | 22526 | PERCUT INTRADISCAL ELECTROTHERMA | 1/1/2007 | NC | 9 |
| 2 | 22527 | PERCUT INTRADISCAL ELECTROTHERMA | 1/1/2007 | NC | 9 |
| 2 | 22532 | ARTHRODESIS, LATERAL EXTRACAVITA | 1/1/2007 | $1,120.00 | 3 |
| 2 | 22533 | ARTHRODESIS, LATERAL EXTRACAVITA | 1/1/2007 | $1,034.63 | 3 |
| 2 | 22534 | ARTHRODESIS, LATERAL EXTRACAVITA | 1/1/2007 | $266.77 | 3 |
| 2 | 22548 | ARTHRODESIS, ANTERIOR TRANSORAL | 1/1/2007 | $1,225.36 | 3 |
| 2 | 22554 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $919.15 | 3 |
| 2 | 22556 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $1,103.65 | 3 |
| 2 | 22558 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $1,005.04 | 3 |
| 2 | 22585 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $248.34 | 3 |
| 2 | 22590 | ARTHRODESIS, POSTERIOR TECHNIQUE | 1/1/2007 | $1,002.19 | 3 |
| 2 | 22595 | ARTHRODESIS, POSTERIOR TECHNIQUE | 1/1/2007 | $950.55 | 3 |
| 2 | 22600 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $806.01 | 3 |
| 2 | 22610 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $803.41 | 3 |
| 2 | 22612 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $1,029.44 | 3 |
| 2 | 22614 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $289.86 | 3 |
| 2 | 22630 | ARTHRODESIS, POSTERIOR INTERBODY | 1/1/2007 | $1,016.46 | 3 |
| 2 | 22632 | ARTHRODESIS, POSTERIOR INTERBODY | 1/1/2007 | $234.85 | 3 |
| 2 | 22800 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $902.54 | 3 |
| 2 | 22802 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $1,469.55 | 3 |
| 2 | 22804 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $1,711.66 | 3 |
| 2 | 22808 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $1,232.63 | 3 |
| 2 | 22810 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $1,395.07 | 3 |
| 2 | 22812 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $1,506.40 | 3 |
| 2 | 22818 | KYPHECTOMY, CIRCUMFERENTIAL EXPO | 1/1/2007 | $1,483.04 | 3 |
| 2 | 22819 | KYPHECTOMY, CIRCUMFERENTIAL EXPO | 1/1/2007 | $1,664.69 | 3 |
| 2 | 22830 | EXPLORATION OF SPINAL FUSION | 1/1/2007 | $547.55 | 3 |
| 2 | 22840 | POSTERIOR NON-SEGMENTAL INSTRUME | 1/1/2007 | $565.97 | 3 |
| 2 | 22841 | INTERNAL SPINAL FIXATION BY WIRI | 1/1/1996 | $0.01 | 5 |
| 2 | 22842 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $566.23 | 3 |
| 2 | 22843 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $594.51 | 3 |
| 2 | 22844 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $736.46 | 3 |
| 2 | 22845 | ANTERIOR INSTRUMENTATION; 2 TO 3 | 1/1/2007 | $541.84 | 3 |
| 2 | 22846 | ANTERIOR INSTRUMENTATION; 4 TO 7 | 1/1/2007 | $563.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 22847 | ANTERIOR INSTRUMENTATION; 8 OR M | 1/1/2007 | $617.87 | 3 |
| 2 | 22848 | PELVIC FIXATION (ATTACHMENT OF C | 1/1/2007 | $268.06 | 3 |
| 2 | 22849 | REINSERTION OF SPINAL FIXATION D | 1/1/2007 | $885.67 | 3 |
| 2 | 22850 | REMOVAL OF POSTERIOR NONSEGMENTA | 1/1/2007 | $481.63 | 3 |
| 2 | 22851 | APPLICATION OF PROSTHETIC DEVICE | 1/1/2007 | $299.98 | 3 |
| 2 | 22852 | REMOVAL OF POSTERIOR SEGMENTAL I | 1/1/2007 | $459.32 | 3 |
| 2 | 22855 | REMOVAL OF ANTERIOR INSTRUMENTAT | 1/1/2007 | $734.64 | 3 |
| 2 | 22857 | TOTAL DISC ARTHROPLASTY, ANTERIO | 1/1/2007 | NC | 9 |
| 2 | 22862 | REVISION INCL REPLACEMENT OF TOT | 1/1/2007 | NC | 9 |
| 2 | 22865 | REMOVAL OF TOTAL DISC ARTHROPLAS | 1/1/2007 | NC | 9 |
| 2 | 22899 | UNLISTED PROCEDURE SPINE | 2/1/1994 | $0.01 | 5 |
| 2 | 22900 | EXCISION ABDOMINAL WALL TUMOR SU | 1/1/2007 | $253.79 | 3 |
| 2 | 22999 | UNLISTED PROCEDURE, ABDOMEN, MUS | 2/1/1994 | $0.01 | 5 |
| 2 | 23000 | REMOVAL OF SUBDELTOID CALCAREOUS | 1/1/2007 | $352.40 | 3 |
| 2 | 23020 | CAPSULAR CONTRACTURE RELEASE (SE | 1/1/2007 | $468.14 | 3 |
| 2 | 23030 | INCISION AND DRAINAGE DEEP ABCES | 1/1/2007 | $295.83 | 3 |
| 2 | 23031 | INCISION AND DRAINAGE INFECTED B | 1/1/2007 | $287.53 | 3 |
| 2 | 23035 | INCISION DEEP WITH OPENING OF CO | 1/1/2007 | $476.44 | 3 |
| 2 | 23040 | ARTHROTOMY, GLENOHUMERAL JOINT, | 1/1/2007 | $484.49 | 3 |
| 2 | 23044 | ARTHROTOMY, ACROMIOCLAVICULAR, S | 1/1/2007 | $384.06 | 3 |
| 2 | 23065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $128.71 | 3 |
| 2 | 23066 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $323.60 | 3 |
| 2 | 23075 | EXCISION, TUMOR, SHOULDER AREA; | 1/1/2007 | $166.08 | 3 |
| 2 | 23076 | EXCISION BENIGN TUMOR; DEEP SUBF | 1/1/2007 | $371.60 | 3 |
| 2 | 23077 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $743.21 | 3 |
| 2 | 23100 | ARTHROTOMY WITH BIOPSY, GLENOHUM | 1/1/2007 | $330.34 | 3 |
| 2 | 23101 | ARTHROTOMY WITH BIOPSY, OR W/EXC | 1/1/2007 | $308.29 | 3 |
| 2 | 23105 | ARTHROTOMY WITH SYNOVECTOMY; GLE | 1/1/2007 | $435.44 | 3 |
| 2 | 23106 | ARTHROTOMY FOR SYNOVECTOMY STERN | 1/1/2007 | $328.53 | 3 |
| 2 | 23107 | ARTHROTOMY, GLENOHUMERAL JOINT, | 1/1/2007 | $454.38 | 3 |
| 2 | 23120 | CLAVICULECTOMY PARTIAL | 1/1/2007 | $384.32 | 3 |
| 2 | 23125 | CLAVICULECTOMY; TOTAL | 1/1/2007 | $482.15 | 3 |
| 2 | 23130 | ACROMIOPLASTY OR ACROMIONECTOMY, | 1/1/2007 | $414.94 | 3 |
| 2 | 23140 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $342.54 | 3 |
| 2 | 23145 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $467.88 | 3 |
| 2 | 23146 | EXCSION OR CURETTAGE OF BONE CYS | 1/1/2007 | $422.99 | 3 |
| 2 | 23150 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $434.14 | 3 |
| 2 | 23155 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $531.46 | 3 |
| 2 | 23156 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $455.94 | 3 |
| 2 | 23170 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $363.56 | 3 |
| 2 | 23172 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $368.49 | 3 |
| 2 | 23174 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $506.80 | 3 |
| 2 | 23180 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $493.31 | 3 |
| 2 | 23182 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $469.18 | 3 |
| 2 | 23184 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $527.82 | 3 |
| 2 | 23190 | OSTECTOMY OF SCAPULA PARTIAL (EG | 1/1/2007 | $378.61 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 23195 | RESECTION HUMERAL HEAD | 1/1/2007 | $499.54 | 3 |
| 2 | 23200 | RADICAL RESECTION FOR TUMOR CLAV | 1/1/2007 | $590.10 | 3 |
| 2 | 23210 | RADICAL RESECTION FOR TUMOR; SCA | 1/1/2007 | $610.08 | 3 |
| 2 | 23220 | RADICAL RESECTION FOR TUMOR PROX | 1/1/2007 | $723.23 | 3 |
| 2 | 23221 | RADICAL RESECTION TUMOR PROXIMAL | 1/1/2007 | $843.63 | 3 |
| 2 | 23222 | RADICAL RESECTION FOR TUMOR PROX | 1/1/2007 | $1,132.72 | 3 |
| 2 | 23330 | REMOVAL OF FOREIGN BODY SHOULDER | 1/1/2007 | $149.99 | 3 |
| 2 | 23331 | REMOVAL OF FOREIGN BODY; DEEP (E | 1/1/2007 | $400.93 | 3 |
| 2 | 23332 | REMOVAL OF FOREIGN BODY; COMPLIC | 1/1/2007 | $596.07 | 3 |
| 2 | 23350 | INJECTION PROCEDURE FOR SHOULDER | 1/1/2007 | $117.55 | 3 |
| 2 | 23395 | MUSCLE TRANSFER, ANY TYPE SHOULD | 1/1/2007 | $847.27 | 3 |
| 2 | 23397 | MUSCLE TRANSFER ANY TYPE FOR PAR | 1/1/2007 | $784.73 | 3 |
| 2 | 23400 | SCAPULOPEXY (EG SPRENGELS DEFORM | 1/1/2007 | $672.36 | 3 |
| 2 | 23405 | TENOMYOTOMY SINGLE | 1/1/2007 | $434.66 | 3 |
| 2 | 23406 | TENOMYOTOMY; MULTIPLE THROUGH SA | 1/1/2007 | $544.95 | 3 |
| 2 | 23410 | REPAIR OF RUPTURED MUSCULOTENDIN | 1/1/2007 | $623.32 | 3 |
| 2 | 23412 | REPAIR OF RUPTURED SUPRASPINATUS | 1/1/2007 | $662.24 | 3 |
| 2 | 23415 | CORACOACROMIAL LIGAMENT RELEASE, | 1/1/2007 | $511.22 | 3 |
| 2 | 23420 | REPAIR OF COMPLETE SHOULDER (ROT | 1/1/2007 | $686.64 | 3 |
| 2 | 23430 | TENODESIS OF LONG TENDON OF BICE | 1/1/2007 | $514.33 | 3 |
| 2 | 23440 | RESECTION OR TRANSPLANTATION OF | 1/1/2007 | $533.53 | 3 |
| 2 | 23450 | CAPSULORRHAPHY, ANTERIOR; PUTTI- | 1/1/2007 | $663.54 | 3 |
| 2 | 23455 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $708.69 | 3 |
| 2 | 23460 | CAPSULORRHAPHY, ANTERIOR, ANY TY | 1/1/2007 | $763.19 | 3 |
| 2 | 23462 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $743.47 | 3 |
| 2 | 23465 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $773.31 | 3 |
| 2 | 23466 | CAPSULORRHAPHY WITH ANY TYPE MUL | 1/1/2007 | $728.16 | 3 |
| 2 | 23470 | ARTHROPLASTY WITH PROXIMAL HUMER | 1/1/2007 | $840.52 | 3 |
| 2 | 23472 | ARTHROPLASTY WITH GLENOID AND PR | 1/1/2007 | $1,016.72 | 3 |
| 2 | 23480 | OSTEOTOMY CLAVICLE WITH OR WITHO | 1/1/2007 | $568.31 | 3 |
| 2 | 23485 | OSTEOTOMY CLAVICLE WITH OR WITHO | 1/1/2007 | $665.88 | 3 |
| 2 | 23490 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $571.68 | 3 |
| 2 | 23491 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $710.77 | 3 |
| 2 | 23500 | CLOSED TREATMENT OF CLAVICULAR F | 1/1/2007 | $136.50 | 3 |
| 2 | 23505 | TREATMENT OF CLOSED CLAVICULAR F | 1/1/2007 | $226.02 | 3 |
| 2 | 23515 | OPEN TREATMENT OF CLAVICULAR FRA | 1/1/2007 | $395.74 | 3 |
| 2 | 23520 | CLOSED TREATMENT OF STERNOCLAVIC | 1/1/2007 | $139.09 | 3 |
| 2 | 23525 | TREATMENT OF CLOSED STERNOCLAVIC | 1/1/2007 | $223.17 | 3 |
| 2 | 23530 | OPEN TREATMENT OF STERNOCLAVICUL | 1/1/2007 | $374.98 | 3 |
| 2 | 23532 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $424.80 | 3 |
| 2 | 23540 | CLOSED TREATMENT OF ACROMIOCLAVI | 1/1/2007 | $139.87 | 3 |
| 2 | 23545 | TREATMENT OF CLOSED ACROMIOCLAVI | 1/1/2007 | $202.41 | 3 |
| 2 | 23550 | OPEN TREATMENT OF ACROMIOCLAVICU | 1/1/2007 | $385.88 | 3 |
| 2 | 23552 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $447.38 | 3 |
| 2 | 23570 | CLOSED TREATMENT OF SCAPULAR FRA | 1/1/2007 | $145.58 | 3 |
| 2 | 23575 | CLOSED TREATMENT OF SCAPULAR FRA | 1/1/2007 | $247.30 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 23585 | OPEN TREATMENT OF SCAPULAR FRACT | 1/1/2007 | $470.99 | 3 |
| 2 | 23600 | CLOSED TREATMENT OF PROXIMAL HUM | 1/1/2007 | $206.82 | 3 |
| 2 | 23605 | CLOSED TREATMENT OF PROXIMAL HUM | 1/1/2007 | $308.03 | 3 |
| 2 | 23615 | OPEN TREATMENT OF PROXIMAL HUMER | 1/1/2007 | $514.33 | 3 |
| 2 | 23616 | OPEN TREATMENT OF PROXIMAL HUMER | 1/1/2007 | $1,014.90 | 3 |
| 2 | 23620 | CLOSED TREATMENT OF GREATER TUBE | 1/1/2007 | $166.60 | 3 |
| 2 | 23625 | TREATMENT OF CLOSED GREATER TUBE | 1/1/2007 | $247.56 | 3 |
| 2 | 23630 | OPEN TREATMENT OF GREATER TUBERO | 1/1/2007 | $396.00 | 3 |
| 2 | 23650 | CLOSED TREATMENT OF SHOULDER DIS | 1/1/2007 | $193.59 | 3 |
| 2 | 23655 | TREATMENT OF CLOSED SHOULDER DIS | 1/1/2007 | $244.71 | 3 |
| 2 | 23660 | OPEN TREATMENT OF ACUTE SHOULDER | 1/1/2007 | $393.66 | 3 |
| 2 | 23665 | CLOSED TREATMENT OF SHOULDER DIS | 1/1/2007 | $272.99 | 3 |
| 2 | 23670 | OPEN TREATMENT OF SHOULDER DISLO | 1/1/2007 | $417.80 | 3 |
| 2 | 23675 | CLOSED TREATMENT OF SHOULDER DIS | 1/1/2007 | $360.71 | 3 |
| 2 | 23680 | OPEN TREATMENT OF SHOULDER DISLO | 1/1/2007 | $516.92 | 3 |
| 2 | 23700 | MANIPULATION UNDER ANESTHESIA IN | 1/1/2007 | $133.38 | 3 |
| 2 | 23800 | ARTHRODESIS SHOULDER JOINT WITH | 1/1/2007 | $698.83 | 3 |
| 2 | 23802 | ARTHRODESIS SHOULDER JOINT; WITH | 1/1/2007 | $765.01 | 3 |
| 2 | 23900 | INTERTHORACOSCAPULAR AMPUTATION | 1/1/2007 | $898.13 | 3 |
| 2 | 23920 | DISARTICULATION OF SHOULDER | 1/1/2007 | $700.65 | 3 |
| 2 | 23921 | DISARTICULATION OF SHOULDER; SEC | 1/1/2007 | $294.53 | 3 |
| 2 | 23929 | UNLISTED PROCEDURE SHOULDER | 2/1/1994 | $0.01 | 5 |
| 2 | 23930 | INCISION AND DRAINAGE DEEP ABSCE | 1/1/2007 | $251.97 | 3 |
| 2 | 23931 | INCISION AND DRAINAGE; INFECTED | 1/1/2007 | $207.60 | 3 |
| 2 | 23935 | INCISION DEEP WITH OPENING OF CO | 1/1/2007 | $338.91 | 3 |
| 2 | 24000 | ARTHROTOMY ELBOW FOR INFECTION W | 1/1/2007 | $316.85 | 3 |
| 2 | 24006 | ARTHROTOMY OF THE ELBOW, WITH CA | 1/1/2007 | $481.89 | 3 |
| 2 | 24065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $141.95 | 3 |
| 2 | 24066 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $388.21 | 3 |
| 2 | 24075 | EXCISION, TUMOR, SOFT TISSUE OF | 1/1/2007 | $307.25 | 3 |
| 2 | 24076 | EXCISION BENIGN TUMOR; DEEP SUBF | 1/1/2007 | $314.25 | 3 |
| 2 | 24077 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $550.66 | 3 |
| 2 | 24100 | ARTHROTOMY, ELBOW; WITH SYNOVIAL | 1/1/2007 | $267.29 | 3 |
| 2 | 24101 | ARTHROTOMY, ELBOW; W/JOINT EXPLO | 1/1/2007 | $339.95 | 3 |
| 2 | 24102 | ARTHROTOMY, ELBOW; WITH SYNOVECT | 1/1/2007 | $421.17 | 3 |
| 2 | 24105 | EXCISION OLECRANON BURSA | 1/1/2007 | $223.43 | 3 |
| 2 | 24110 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $398.07 | 3 |
| 2 | 24115 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $480.59 | 3 |
| 2 | 24116 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $595.29 | 3 |
| 2 | 24120 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $355.00 | 3 |
| 2 | 24125 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $392.36 | 3 |
| 2 | 24126 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $428.18 | 3 |
| 2 | 24130 | EXCISION RADIAL HEAD | 1/1/2007 | $345.65 | 3 |
| 2 | 24134 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $525.23 | 3 |
| 2 | 24136 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $430.77 | 3 |
| 2 | 24138 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $445.82 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 24140 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $514.07 | 3 |
| 2 | 24145 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $438.56 | 3 |
| 2 | 24147 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $452.83 | 3 |
| 2 | 24149 | RADICAL RESECTION OF CAPSULE, SO | 1/1/2007 | $731.01 | 3 |
| 2 | 24150 | RADICAL RESECTION FOR TUMOR SHAF | 1/1/2007 | $664.06 | 3 |
| 2 | 24151 | RADICAL RESECTION FOR TUMOR SHAF | 1/1/2007 | $770.46 | 3 |
| 2 | 24152 | RADICAL RESECTION FOR TUMOR RADI | 1/1/2007 | $500.06 | 3 |
| 2 | 24153 | RADICAL RESECTION FOR TUMOR RADI | 1/1/2007 | $463.21 | 3 |
| 2 | 24155 | RESECTION OF ELBOW JOINT (ARTHRE | 1/1/2007 | $572.20 | 3 |
| 2 | 24160 | IMPLANT REMOVAL ELBOW JOINT | 1/1/2007 | $415.98 | 3 |
| 2 | 24164 | IMPLANT REMOVAL; RADIAL HEAD | 1/1/2007 | $338.39 | 3 |
| 2 | 24200 | REMOVAL OF FOREIGN BODY SUBCUTAN | 1/1/2007 | $139.61 | 3 |
| 2 | 24201 | REMOVAL OF FOREIGN BODY; DEEP | 1/1/2007 | $392.10 | 3 |
| 2 | 24220 | INJECTION PROCEDURE FOR ELBOW AR | 1/1/2007 | $130.53 | 3 |
| 2 | 24300 | MANIPULATION, ELBOW, UNDER ANEST | 1/1/2007 | $262.61 | 3 |
| 2 | 24301 | MUSCLE OR TENDON TRANSFER ANY TY | 1/1/2007 | $520.04 | 3 |
| 2 | 24305 | TENDON LENGTHENING SINGLE EACH | 1/1/2007 | $397.55 | 3 |
| 2 | 24310 | TENOTOMY OPEN ELBOW TO SHOULDER | 1/1/2007 | $325.15 | 3 |
| 2 | 24320 | TENOPLASTY WITH MUSCLE TRANSFER | 1/1/2007 | $514.33 | 3 |
| 2 | 24330 | FLEXOR-PLASTY ELBOW (EG STEINDLE | 1/1/2007 | $495.39 | 3 |
| 2 | 24331 | FLEXOR-PLASTY ELBOW (EG STEINDLE | 1/1/2007 | $547.55 | 3 |
| 2 | 24332 | TENOLYSIS, TRICEPS | 1/1/2007 | $401.19 | 3 |
| 2 | 24340 | TENODESIS OF BICEPS TENDON AT EL | 1/1/2007 | $421.43 | 3 |
| 2 | 24341 | REPAIR, TENDON OR MUSCLE, UPPER | 1/1/2007 | $446.08 | 3 |
| 2 | 24342 | REINSERTION OF RUPTURED BICEPS O | 1/1/2007 | $544.69 | 3 |
| 2 | 24343 | REPAIR LATERAL COLLATERAL LIGAME | 1/1/2007 | $473.33 | 3 |
| 2 | 24344 | RECONSTRUCTION LATERAL COLLATERA | 1/1/2007 | $723.75 | 3 |
| 2 | 24345 | REPAIR MEDIAL COLLATERAL LIGAMEN | 1/1/2007 | $470.21 | 3 |
| 2 | 24346 | RECONSTRUCTION MEDIAL COLLATERAL | 1/1/2007 | $718.30 | 3 |
| 2 | 24350 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $303.87 | 3 |
| 2 | 24351 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $333.72 | 3 |
| 2 | 24352 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $356.03 | 3 |
| 2 | 24354 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $355.77 | 3 |
| 2 | 24356 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $366.15 | 3 |
| 2 | 24360 | ARTHROPLASTY ELBOW WITH MEMBRANE | 1/1/2007 | $619.43 | 3 |
| 2 | 24361 | ATHROPLASTY ELBOW; WITH DISTAL H | 1/1/2007 | $696.76 | 3 |
| 2 | 24362 | ARTHROPLASTY ELBOW; WITH IMPLANT | 1/1/2007 | $717.26 | 3 |
| 2 | 24363 | ARTHROPLASTY ELBOW; WITH DISTAL | 1/1/2007 | $913.96 | 3 |
| 2 | 24365 | ARTHROPLASTY RADIAL HEAD | 1/1/2007 | $441.41 | 3 |
| 2 | 24366 | ARTHROPLASTY RADIAL HEAD; WITH I | 1/1/2007 | $472.29 | 3 |
| 2 | 24400 | OSTEOTOMY HUMERUS WITH OR WITHOU | 1/1/2007 | $566.75 | 3 |
| 2 | 24410 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $719.07 | 3 |
| 2 | 24420 | OSTEOPLASTY HUMERUS (EG SHORTENI | 1/1/2007 | $678.85 | 3 |
| 2 | 24430 | REPAIR OF NONUNION OR MALUNION H | 1/1/2007 | $642.78 | 3 |
| 2 | 24435 | REPAIR OF NONUNION OR MANUNION H | 1/1/2007 | $683.26 | 3 |
| 2 | 24470 | HEMIEPIPHYSEAL ARREST (EG FOR CU | 1/1/2007 | $465.80 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 24495 | DECOMPRESSION FASCIOTOMY FOREARM | 1/1/2007 | $468.66 | 3 |
| 2 | 24498 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $603.34 | 3 |
| 2 | 24500 | CLOSED TREATMENT OF HUMERAL SHAF | 1/1/2007 | $222.39 | 3 |
| 2 | 24505 | CLOSED TREATMENT OF HUMERAL SHAF | 1/1/2007 | $328.79 | 3 |
| 2 | 24515 | OPEN TREATMENT OF HUMERAL SHAFT | 1/1/2007 | $598.41 | 3 |
| 2 | 24516 | TREATMENT OF HUMERAL SHAFT FRACT | 1/1/2007 | $591.40 | 3 |
| 2 | 24530 | CLOSED TREATMENT OF SUPRACONDYLA | 1/1/2007 | $240.82 | 3 |
| 2 | 24535 | CLOSED TREATMENT OF SUPRACONDYLA | 1/1/2007 | $412.61 | 3 |
| 2 | 24538 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $513.55 | 3 |
| 2 | 24545 | OPEN TREATMENT OF HUMERAL SUPRAC | 1/1/2007 | $537.94 | 3 |
| 2 | 24546 | OPEN TREATMENT OF HUMERAL SUPRAC | 1/1/2007 | $772.01 | 3 |
| 2 | 24560 | CLOSED TREATMENT OF HUMERAL EPIC | 1/1/2007 | $200.59 | 3 |
| 2 | 24565 | TREATMENT OF CLOSED EPICONDYLAR | 1/1/2007 | $340.20 | 3 |
| 2 | 24566 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $447.90 | 3 |
| 2 | 24575 | OPEN TREATMENT OF HUMERAL EPICON | 1/1/2007 | $542.87 | 3 |
| 2 | 24576 | CLOSED TREATMENT OF HUMERAL COND | 1/1/2007 | $209.94 | 3 |
| 2 | 24577 | TREATMENT OF CLOSED CONDYLAR FRA | 1/1/2007 | $355.00 | 3 |
| 2 | 24579 | OPEN TREATMENT OF HUMERAL CONDYL | 1/1/2007 | $582.84 | 3 |
| 2 | 24582 | PERCUTAQNEOUS SKELETAL FIXATION | 1/1/2007 | $497.20 | 3 |
| 2 | 24586 | OPEN TREATMENT OF PERIARTICULAR | 1/1/2007 | $754.89 | 3 |
| 2 | 24587 | OPEN TREATMENT OF PERIARTICULAR | 1/1/2007 | $745.02 | 3 |
| 2 | 24600 | TREATMENT OF CLOSED ELBOW DISLOC | 1/1/2007 | $248.86 | 3 |
| 2 | 24605 | TREATMENT OF CLOSED ELBOW DISLOC | 1/1/2007 | $303.10 | 3 |
| 2 | 24615 | OPEN TREATMENT OF ACUTE OR CHRON | 1/1/2007 | $489.16 | 3 |
| 2 | 24620 | CLOSED TREATMENT OF MONTEGGIA TY | 1/1/2007 | $371.34 | 3 |
| 2 | 24635 | OPEN TREATMENT OF MONTEGGIA TYPE | 1/1/2007 | $766.56 | 3 |
| 2 | 24640 | CLOSED TREATMENT OF RADIAL HEAD | 1/1/2007 | $82.26 | 3 |
| 2 | 24650 | CLOSED TREATMENT OF RADIAL HEAD | 1/1/2007 | $163.49 | 3 |
| 2 | 24655 | TREATMENT OF CLOSED RADIAL HEAD | 1/1/2007 | $287.01 | 3 |
| 2 | 24665 | OPEN TREATMENT OF RADIAL HEAD OR | 1/1/2007 | $442.97 | 3 |
| 2 | 24666 | OPEN TREATMENT OF RADIAL HEAD OR | 1/1/2007 | $497.98 | 3 |
| 2 | 24670 | CLOSED TREATMENT OF ULNAR FRACTU | 1/1/2007 | $183.47 | 3 |
| 2 | 24675 | TREATMENT OF CLOSED ULNAR FRACTU | 1/1/2007 | $299.46 | 3 |
| 2 | 24685 | OPEN TREATMENT OF ULNAR FRACTURE | 1/1/2007 | $463.21 | 3 |
| 2 | 24800 | ARTHRODESIS ELBOW JOINT WITH OR | 1/1/2007 | $560.00 | 3 |
| 2 | 24802 | ARTHRODESIS ELBOW JOINT; WITH PR | 1/1/2007 | $686.38 | 3 |
| 2 | 24900 | AMPUTATION ARM THROUGH HUMERUS W | 1/1/2007 | $472.29 | 3 |
| 2 | 24920 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $469.70 | 3 |
| 2 | 24925 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $371.09 | 3 |
| 2 | 24930 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $497.20 | 3 |
| 2 | 24931 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $527.56 | 3 |
| 2 | 24935 | STUMP ELONGATION | 1/1/2007 | $667.17 | 3 |
| 2 | 24940 | CINEPLASTY UPPER EXTREMITY COMPL | 10/1/2000 | $871.55 | 3 |
| 2 | 24999 | UNLISTED PROCEDURE HUMERUS OR EL | 4/1/1982 | $0.01 | 5 |
| 2 | 25000 | TENDON SHEATH INCISION; AT RADIA | 1/1/2007 | $280.52 | 3 |
| 2 | 25001 | INCISION, FLEXOR TENDON SHEATH, | 1/1/2007 | $211.75 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 25020 | DECOMPRESSION FASCIOTOMY, FOREAR | 1/1/2007 | $426.36 | 3 |
| 2 | 25023 | DECOMPRESSION FASIOTOMY FLEXOR A | 1/1/2007 | $777.20 | 3 |
| 2 | 25024 | DECOMPRESSION FASCIOTOMY, FOREAR | 1/1/2007 | $475.92 | 3 |
| 2 | 25025 | DECOMPRESSION FASCIOTOMY, FOREAR | 1/1/2007 | $735.42 | 3 |
| 2 | 25028 | INCISION AND DRAINAGE DEEP ABSCE | 1/1/2007 | $369.27 | 3 |
| 2 | 25031 | INCISION AND DRAINAGE; INFECTED | 1/1/2007 | $329.57 | 3 |
| 2 | 25035 | INCISION DEEP WITH OPENING OF CO | 1/1/2007 | $576.61 | 3 |
| 2 | 25040 | ARTHROTOMY, RADIOCARPAL OR MIDCA | 1/1/2007 | $405.86 | 3 |
| 2 | 25065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $139.35 | 3 |
| 2 | 25066 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $307.25 | 3 |
| 2 | 25075 | EXCISION, TUMOR, SOFT TISSUE OF | 1/1/2007 | $264.43 | 3 |
| 2 | 25076 | EXCISION BENIGN TUMOR; DEEP SUBF | 1/1/2007 | $394.96 | 3 |
| 2 | 25077 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $604.38 | 3 |
| 2 | 25085 | CAPSULOTOMY WRIST (EG FOR CONTRA | 1/1/2007 | $349.81 | 3 |
| 2 | 25100 | ARTHROTOMY, WRIST JOINT; WITH BI | 1/1/2007 | $253.53 | 3 |
| 2 | 25101 | ARTHROTOMY, WRIST JOINT; W/JOINT | 1/1/2007 | $294.27 | 3 |
| 2 | 25105 | ARTHROTOMY, WRIST JOINT; WITH SY | 1/1/2007 | $365.38 | 3 |
| 2 | 25107 | ARTHROTOMY DISTAL RADIOULNAR JOI | 1/1/2007 | $409.23 | 3 |
| 2 | 25109 | EXCISION OF TENDON, FOREARM AND/ | 1/1/2007 | $339.69 | 3 |
| 2 | 25110 | EXCISION LESION OF TENDON SHEATH | 1/1/2007 | $301.02 | 3 |
| 2 | 25111 | EXCISION OF GANGLION WRIST (DORS | 1/1/2007 | $223.69 | 3 |
| 2 | 25112 | EXCISION OF GANGLION WRIST (DORS | 1/1/2007 | $272.22 | 3 |
| 2 | 25115 | RADICAL EXCISION OF BURSA SYNOVI | 1/1/2007 | $627.73 | 3 |
| 2 | 25116 | RADICAL EXCISION OF BURSA SYNOVI | 1/1/2007 | $555.07 | 3 |
| 2 | 25118 | SYNOVECTOMY EXTENSOR TENDON SHEA | 1/1/2007 | $280.26 | 3 |
| 2 | 25119 | SYNOVECTOMY EXTENSOR TENDON SHEA | 1/1/2007 | $379.13 | 3 |
| 2 | 25120 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $498.50 | 3 |
| 2 | 25125 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $555.59 | 3 |
| 2 | 25126 | EXCISION OF CURETTAGE OF BONE CY | 1/1/2007 | $567.27 | 3 |
| 2 | 25130 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $324.12 | 3 |
| 2 | 25135 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $400.41 | 3 |
| 2 | 25136 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $352.92 | 3 |
| 2 | 25145 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $504.99 | 3 |
| 2 | 25150 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $426.88 | 3 |
| 2 | 25151 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $553.25 | 3 |
| 2 | 25170 | RADICAL RESECTION FOR TUMOR RADI | 1/1/2007 | $727.38 | 3 |
| 2 | 25210 | CARPECTOMY ONE BONE | 1/1/2007 | $353.70 | 3 |
| 2 | 25215 | CARPECTOMY; ALL BONES OR PROXIMA | 1/1/2007 | $463.21 | 3 |
| 2 | 25230 | RADIAL STYLOIDECTOMY (SEPARATE P | 1/1/2007 | $315.81 | 3 |
| 2 | 25240 | EXCISION DISTAL ULNA PARTIAL OR | 1/1/2007 | $335.79 | 3 |
| 2 | 25246 | INJECTION PROCEDURE FOR WRIST AR | 1/1/2007 | $129.49 | 3 |
| 2 | 25248 | EXPLORATION WITH REMOVAL OF DEEP | 1/1/2007 | $373.42 | 3 |
| 2 | 25250 | REMOVAL OF WRIST PROSTHESIS (SEP | 1/1/2007 | $356.03 | 3 |
| 2 | 25251 | REMOVAL OF WRIST PROSTHESIS; COM | 1/1/2007 | $486.82 | 3 |
| 2 | 25259 | MANIPULATION, WRIST, UNDER ANEST | 1/1/2007 | $262.10 | 3 |
| 2 | 25260 | REPAIR TENDON OR MUSCLE FLEXOR P | 1/1/2007 | $579.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 25263 | REPAIR TENDON OR MUSCLE FLEXOR; | 1/1/2007 | $578.43 | 3 |
| 2 | 25265 | REPAIR TENDON OR MUSCLE FLEXOR; | 1/1/2007 | $666.66 | 3 |
| 2 | 25270 | REPAIR TENDON OR MUSCLE EXTENSOR | 1/1/2007 | $493.05 | 3 |
| 2 | 25272 | REPAIR TENDON OR MUSCLE EXTENSOR | 1/1/2007 | $544.17 | 3 |
| 2 | 25274 | REPAIR, TENDON OR MUSCLE, EXTENS | 1/1/2007 | $616.57 | 3 |
| 2 | 25275 | REPAIR, TENDON SHEATH, EXTENSOR, | 1/1/2007 | $451.53 | 3 |
| 2 | 25280 | LENGTHENING OR SHORTENING OF FLE | 1/1/2007 | $543.91 | 3 |
| 2 | 25290 | TENOTOMY OPEN SINGLE FLEXOR EXTE | 1/1/2007 | $548.32 | 3 |
| 2 | 25295 | TENOLYSIS SINGLE FLEXOR OR EXTEN | 1/1/2007 | $511.99 | 3 |
| 2 | 25300 | TENODESIS AT WRIST FLEXORS OF FI | 1/1/2007 | $480.59 | 3 |
| 2 | 25301 | TENODESIS AT WRIST; EXTENSORS OF | 1/1/2007 | $460.87 | 3 |
| 2 | 25310 | TENDON TRANSPLANTATION OR TRANSF | 1/1/2007 | $581.54 | 3 |
| 2 | 25312 | TENDON TRANSPLANTATION OR TRANSF | 1/1/2007 | $647.45 | 3 |
| 2 | 25315 | FLEXOR ORIGIN SLIDE (EG, FOR CER | 1/1/2007 | $679.89 | 3 |
| 2 | 25316 | FLEXOR ORIGIN SLIDE FOR CEREBRAL | 1/1/2007 | $786.80 | 3 |
| 2 | 25320 | CAPSULORRHAPHY OR RECONSTRUCTION | 1/1/2007 | $617.09 | 3 |
| 2 | 25332 | ARTHROPLASTY, WRIST, WITH OR WIT | 1/1/2007 | $581.80 | 3 |
| 2 | 25335 | CENTRALIZATION OF WRIST ON ULNA | 1/1/2007 | $685.08 | 3 |
| 2 | 25337 | RECONSTRUCTION FOR STABILIZATION | 1/1/2007 | $593.48 | 3 |
| 2 | 25350 | OSTEOTOMY RADIUS DISTAL THIRD | 1/1/2007 | $629.03 | 3 |
| 2 | 25355 | OSTOTOMY RADIUS; MIDDLE OR PROXI | 1/1/2007 | $688.45 | 3 |
| 2 | 25360 | OSTEOTOMY ULNA | 1/1/2007 | $616.05 | 3 |
| 2 | 25365 | OSTEOTOMY; RADIUS AND ULNA | 1/1/2007 | $784.21 | 3 |
| 2 | 25370 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $823.65 | 3 |
| 2 | 25375 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $823.91 | 3 |
| 2 | 25390 | OSTEOPLASTY RADIUS OR ULNA SHORT | 1/1/2007 | $691.57 | 3 |
| 2 | 25391 | OSTEOPLASTY RADIUS OR ULNA; LENG | 1/1/2007 | $841.82 | 3 |
| 2 | 25392 | OSTEOPLASTY RADIUS OR ULNA SHORT | 1/1/2007 | $831.44 | 3 |
| 2 | 25393 | OSTEOPOLASTY RADIUS AND ULNA; LE | 1/1/2007 | $940.43 | 3 |
| 2 | 25394 | OSTEOPLASTY, CARPAL BONE, SHORTE | 1/1/2007 | $520.30 | 3 |
| 2 | 25400 | REPAIR OF NONUNION OR MALUNION R | 1/1/2007 | $725.30 | 3 |
| 2 | 25405 | REPAIR OF NONUNION OR MALUNION, | 1/1/2007 | $882.30 | 3 |
| 2 | 25415 | REPAIR OF NONUNION OR MALUNION R | 1/1/2007 | $831.96 | 3 |
| 2 | 25420 | REPAIR OF NONUNION OR MALUNION, | 1/1/2007 | $966.38 | 3 |
| 2 | 25425 | REPAIR OF DEFECT WITH AUTOGENOUS | 1/1/2007 | $952.88 | 3 |
| 2 | 25426 | REPAIR OF DEFECT WITH AUTOGENOUS | 1/1/2007 | $906.69 | 3 |
| 2 | 25430 | INSERTION OF VASCULAR PEDICLE IN | 1/1/2007 | $463.73 | 3 |
| 2 | 25431 | REPAIR OF NONUNION OF CARPAL BON | 1/1/2007 | $538.20 | 3 |
| 2 | 25440 | REPAIR OF NONUNION, SCAPHOID CAR | 1/1/2007 | $557.41 | 3 |
| 2 | 25441 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $648.23 | 3 |
| 2 | 25442 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $551.96 | 3 |
| 2 | 25443 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $533.01 | 3 |
| 2 | 25444 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $568.31 | 3 |
| 2 | 25445 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $499.28 | 3 |
| 2 | 25446 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $803.15 | 3 |
| 2 | 25447 | INTERPOSITION ARTHROPLASTY INTER | 1/1/2007 | $535.61 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 25449 | REVISION OF ARTHROPLASTY INCLUDI | 1/1/2007 | $710.51 | 3 |
| 2 | 25450 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $504.47 | 3 |
| 2 | 25455 | EPIPHYSEAL ARREST BY EPIPHSIODES | 1/1/2007 | $553.51 | 3 |
| 2 | 25490 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $641.74 | 3 |
| 2 | 25491 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $676.00 | 3 |
| 2 | 25492 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $773.05 | 3 |
| 2 | 25500 | CLOSED TREATMENT OF RADIAL SHAFT | 1/1/2007 | $165.56 | 3 |
| 2 | 25505 | TREATMENT OF CLOSED RADIAL SHAFT | 1/1/2007 | $328.53 | 3 |
| 2 | 25515 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $473.33 | 3 |
| 2 | 25520 | CLOSED TREATMENT OF RADIAL SHAFT | 1/1/2007 | $368.75 | 3 |
| 2 | 25525 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $632.14 | 3 |
| 2 | 25526 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $744.51 | 3 |
| 2 | 25530 | CLOSED TREATMENT OF ULNAR SHAFT | 1/1/2007 | $160.89 | 3 |
| 2 | 25535 | TREATMENT OF CLOSED ULNAR SHAFT | 1/1/2007 | $312.70 | 3 |
| 2 | 25545 | OPEN TREATMENT OF ULNAR SHAFT FR | 1/1/2007 | $469.70 | 3 |
| 2 | 25560 | CLOSED TREATMENT OF RADIAL AND U | 1/1/2007 | $168.42 | 3 |
| 2 | 25565 | TREATMENT OF CLOSED RADIAL AND U | 1/1/2007 | $344.36 | 3 |
| 2 | 25574 | OPEN TREATMENT OF RADIAL AND ULN | 1/1/2007 | $400.41 | 3 |
| 2 | 25575 | OPEN TREATMENT OF RADIAL AND ULN | 1/1/2007 | $565.19 | 3 |
| 2 | 25600 | CLOSED TREATMENT OF DISTAL RADIA | 1/1/2007 | $185.54 | 3 |
| 2 | 25605 | TREATMENT OF CLOSED DISTAL RADIA | 1/1/2007 | $364.60 | 3 |
| 2 | 25606 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $418.05 | 3 |
| 2 | 25607 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $466.32 | 3 |
| 2 | 25608 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $534.05 | 3 |
| 2 | 25609 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $681.71 | 3 |
| 2 | 25611 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | INVALID | N |
| 2 | 25620 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | INVALID | N |
| 2 | 25622 | CLOSED TREATMENT OF CARPAL SCAPH | 1/1/2007 | $189.44 | 3 |
| 2 | 25624 | TREATMENT OF CLOSED CARPAL SCAPH | 1/1/2007 | $301.02 | 3 |
| 2 | 25628 | OPEN TREATMENT OF CARPAL SCAPHOI | 1/1/2007 | $457.50 | 3 |
| 2 | 25630 | CLOSED TREATMENT OF CARPAL BONE | 1/1/2007 | $195.14 | 3 |
| 2 | 25635 | TREATMENT OF CLOSED CARPAL BONE | 1/1/2007 | $287.53 | 3 |
| 2 | 25645 | OPEN TREATMENT OF CARPAL BONE FR | 1/1/2007 | $391.59 | 3 |
| 2 | 25650 | CLOSED TREATMENT OF ULNAR STYLOI | 1/1/2007 | $202.93 | 3 |
| 2 | 25651 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $303.87 | 3 |
| 2 | 25652 | OPEN TREATMENT OF ULNAR STYLOID | 1/1/2007 | $410.53 | 3 |
| 2 | 25660 | CLOSED TREATMENT OF RADIOCARPAL | 1/1/2007 | $260.80 | 3 |
| 2 | 25670 | OPEN TREATMENT OF RADIOCARPAL OR | 1/1/2007 | $420.39 | 3 |
| 2 | 25671 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $341.50 | 3 |
| 2 | 25675 | CLOSED TREATMENT OF DISTAL RADIO | 1/1/2007 | $284.15 | 3 |
| 2 | 25676 | OPEN TREATMENT OF DISTAL RADIOUL | 1/1/2007 | $433.11 | 3 |
| 2 | 25680 | CLOSED TREATMENT OF TRANS-SCAPHO | 1/1/2007 | $298.68 | 3 |
| 2 | 25685 | OPEN TREATMENT OF TRANS-SCAPHOPE | 1/1/2007 | $497.98 | 3 |
| 2 | 25690 | CLOSED TREATMENT OF LUNATE DISLO | 1/1/2007 | $308.55 | 3 |
| 2 | 25695 | OPEN TREATMENT OF LUNATE DISLOCA | 1/1/2007 | $434.92 | 3 |
| 2 | 25800 | ARTHRODESIS, WRIST JOINT (INCLUD | 1/1/2007 | $530.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 25805 | ARTHRODESIS WRIST JOINT (INCLUDI | 1/1/2007 | $605.67 | 3 |
| 2 | 25810 | ARTHRODESIS WRIST JOINT (INCLUDI | 1/1/2007 | $574.79 | 3 |
| 2 | 25820 | INTERCARPAL FUSION WITHOUT BONE | 1/1/2007 | $428.95 | 3 |
| 2 | 25825 | INTERCARPAL FUSION WITH AUTOGENO | 1/1/2007 | $517.18 | 3 |
| 2 | 25830 | DISTAL RADIOULNAR JOINT ARTHRODE | 1/1/2007 | $675.74 | 3 |
| 2 | 25900 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $594.26 | 3 |
| 2 | 25905 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $592.70 | 3 |
| 2 | 25907 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $536.65 | 3 |
| 2 | 25909 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $589.07 | 3 |
| 2 | 25915 | KRUKENBERG PROCEDURE | 1/1/2007 | $1,009.71 | 3 |
| 2 | 25920 | DISARTICULATION THROUGH WRIST | 1/1/2007 | $464.25 | 3 |
| 2 | 25922 | DISARTICULATION THROUGH WRIST; S | 1/1/2007 | $404.82 | 3 |
| 2 | 25924 | DISARTICULATION THROUGH WRIST; R | 1/1/2007 | $463.99 | 3 |
| 2 | 25927 | TRANSMETACARPAL AMPUTATION | 1/1/2007 | $564.93 | 3 |
| 2 | 25929 | TRANSMETACARPAL AMPUTATION; SECO | 1/1/2007 | $379.13 | 3 |
| 2 | 25931 | TRANSMETACARPAL AMPUTATION; REAM | 1/1/2007 | $530.42 | 3 |
| 2 | 25999 | UNLISTED PROCEDURE FOREARM OR WR | 2/1/1994 | $0.01 | 5 |
| 2 | 26010 | DRAINAGE OF FINGER ABSCESS SIMPL | 1/1/2007 | $189.44 | 3 |
| 2 | 26011 | DRAINAGE OF FINGER ABSCESS; COMP | 1/1/2007 | $294.79 | 3 |
| 2 | 26020 | DRAINAGE OF TENDON SHEATH ONE DI | 1/1/2007 | $279.22 | 3 |
| 2 | 26025 | DRAINAGE OF PALMAR BURSA SINGLE | 1/1/2007 | $277.67 | 3 |
| 2 | 26030 | DRAINAGE OF PALMAR BURSA; MULTIP | 1/1/2007 | $326.45 | 3 |
| 2 | 26034 | INCISION DEEP WITH OPENING OF CO | 1/1/2007 | $352.92 | 3 |
| 2 | 26035 | DECOMPRESSION FINGERS AND OR HAN | 1/1/2007 | $489.42 | 3 |
| 2 | 26037 | DECOMPRESSIVE FASCIOTOMY, HAND ( | 1/1/2007 | $381.72 | 3 |
| 2 | 26040 | FASCIOTOMY, PALMAR, FOR DUPUYTRE | 1/1/2007 | $205.52 | 3 |
| 2 | 26045 | FASCIOTOMY PALMAR FOR DUPUYTREN' | 1/1/2007 | $315.03 | 3 |
| 2 | 26055 | TENDON SHEATH INCISION (EG, FOR | 1/1/2007 | $454.38 | 3 |
| 2 | 26060 | TENOTOMY, PERCUTANEOUS, SINGLE, | 1/1/2007 | $175.94 | 3 |
| 2 | 26070 | ARTHROTOMY, WITH EXPLORATION, DR | 1/1/2007 | $195.40 | 3 |
| 2 | 26075 | ARTHROTOMY FOR INFECTION WITH EX | 1/1/2007 | $210.20 | 3 |
| 2 | 26080 | ARTHROTOMY FOR INFECTION WITH EX | 1/1/2007 | $253.01 | 3 |
| 2 | 26100 | ARTHROTOMY WITH SYNOVIAL BIOPSY; | 1/1/2007 | $216.42 | 3 |
| 2 | 26105 | ARTHROTOMY FOR SYNOVIAL BIOPSY; | 1/1/2007 | $221.35 | 3 |
| 2 | 26110 | ARTHROTOMY WITH SYNOVIAL BIOPSY; | 1/1/2007 | $210.20 | 3 |
| 2 | 26115 | EXCISION, TUMOR OR VASCULAR MALF | 1/1/2007 | $455.94 | 3 |
| 2 | 26116 | EXCISION, TUMOR OR VASCULAR MALF | 1/1/2007 | $321.26 | 3 |
| 2 | 26117 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $438.04 | 3 |
| 2 | 26121 | FASCIECTOMY, PALM ONLY, WITH OR | 1/1/2007 | $406.90 | 3 |
| 2 | 26123 | FASCIECTOMY, PARTIAL PALMAR WITH | 1/1/2007 | $508.36 | 3 |
| 2 | 26125 | FASCIECTOMY, PARTIAL PALMAR WITH | 1/1/2007 | $201.11 | 3 |
| 2 | 26130 | SYNOVECTOMY CARPOMETARCARPAL JOI | 1/1/2007 | $303.87 | 3 |
| 2 | 26135 | SYNOVECTOMY METACARPOPHALANGEAL | 1/1/2007 | $376.28 | 3 |
| 2 | 26140 | SYNOVECTOMY PROXIMAL INTERPHALAN | 1/1/2007 | $340.98 | 3 |
| 2 | 26145 | SYNOVECTOMY TENDON SHEATH RADICA | 1/1/2007 | $346.43 | 3 |
| 2 | 26160 | EXCISION OF LESION OF TENDON SHE | 1/1/2007 | $416.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 26170 | EXCISION OF TENDON PALM FLEXOR S | 1/1/2007 | $269.88 | 3 |
| 2 | 26180 | EXCISION OF TENDON FINGER FLEXOR | 1/1/2007 | $295.31 | 3 |
| 2 | 26185 | SESAMOIDECTOMY, THUMB OR FINGER | 1/1/2007 | $314.00 | 3 |
| 2 | 26200 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $304.91 | 3 |
| 2 | 26205 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $410.01 | 3 |
| 2 | 26210 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $295.05 | 3 |
| 2 | 26215 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $373.68 | 3 |
| 2 | 26230 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $344.10 | 3 |
| 2 | 26235 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $336.31 | 3 |
| 2 | 26236 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $297.39 | 3 |
| 2 | 26250 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $390.81 | 3 |
| 2 | 26255 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $609.57 | 3 |
| 2 | 26260 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $369.27 | 3 |
| 2 | 26261 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $425.84 | 3 |
| 2 | 26262 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $308.55 | 3 |
| 2 | 26320 | REMOVAL OF IMPLANT FROM FINGER O | 1/1/2007 | $230.44 | 3 |
| 2 | 26340 | MANIPULATION, FINGER JOINT, UNDE | 1/1/2007 | $201.89 | 3 |
| 2 | 26350 | REPAIR OR ADVANCEMENT, FLEXOR TE | 1/1/2007 | $559.48 | 3 |
| 2 | 26352 | FLEXOR TENDON REPAIR OR ADVANCEM | 1/1/2007 | $627.99 | 3 |
| 2 | 26356 | REPAIR OR ADVANCEMENT, FLEXOR TE | 1/1/2007 | $718.56 | 3 |
| 2 | 26357 | SECONDARY, EACH TENDON | 1/1/2007 | $663.80 | 3 |
| 2 | 26358 | FLEXOR TENDON REPAIR OR ADVANCEM | 1/1/2007 | $705.84 | 3 |
| 2 | 26370 | PROFUNDUS TENDON REPAIR OR ADVAN | 1/1/2007 | $606.45 | 3 |
| 2 | 26372 | PROFUNDUS TENDON REPAIR OR ADVAN | 1/1/2007 | $693.64 | 3 |
| 2 | 26373 | PROFUNDUS TENDON REPAIR OR ADVAN | 1/1/2007 | $660.95 | 3 |
| 2 | 26390 | EXCISION FLEXOR TENDON, W/IMPLAN | 1/1/2007 | $620.21 | 3 |
| 2 | 26392 | REMOVAL OF SYNTHETIC ROD AND INS | 1/1/2007 | $741.65 | 3 |
| 2 | 26410 | EXTENSOR TENDON REPAIR DORSUM OF | 1/1/2007 | $449.45 | 3 |
| 2 | 26412 | EXTENSOR TENDON REPAIR DORSUM OF | 1/1/2007 | $534.05 | 3 |
| 2 | 26415 | EXCISION OF EXTENSOR TENDON, W/I | 1/1/2007 | $548.06 | 3 |
| 2 | 26416 | REMOVAL OF SYNTHETIC ROD AND INS | 1/1/2007 | $643.04 | 3 |
| 2 | 26418 | EXTENSOR TENDON REPAIR DORSUM OF | 1/1/2007 | $448.16 | 3 |
| 2 | 26420 | EXTENSOR TENDON REPAIR DORSUM OF | 1/1/2007 | $557.93 | 3 |
| 2 | 26426 | REPAIR OF EXTENSOR TENDON, CENTR | 1/1/2007 | $526.53 | 3 |
| 2 | 26428 | REPAIR OF EXTENSOR TENDON, CENTR | 1/1/2007 | $575.83 | 3 |
| 2 | 26432 | EXTENSOR TENDON REPAIR DISTAL IN | 1/1/2007 | $387.69 | 3 |
| 2 | 26433 | EXTENSOR TENDON REPAIR, DISTAL I | 1/1/2007 | $417.54 | 3 |
| 2 | 26434 | EXTENSOR TENDON REPAIR OPEN PRIM | 1/1/2007 | $482.15 | 3 |
| 2 | 26437 | EXTENSOR TENDON REALIGNMENT, HAN | 1/1/2007 | $474.89 | 3 |
| 2 | 26440 | TENOLYSIS SIMPLE FLEXOR TENDON P | 1/1/2007 | $499.02 | 3 |
| 2 | 26442 | TENOLYSIS SIMPLE FLEXOR TENDON P | 1/1/2007 | $657.57 | 3 |
| 2 | 26445 | TENOLYSIS, EXTENSOR TENDON, HAND | 1/1/2007 | $470.47 | 3 |
| 2 | 26449 | TENOLYSIS COMPLEX EXTENSOR TENDO | 1/1/2007 | $619.43 | 3 |
| 2 | 26450 | TENOTOMY FLEXOR SINGLE PALM OPEN | 1/1/2007 | $301.02 | 3 |
| 2 | 26455 | TENOTOMY FLEXOR SINGLE FINGER OP | 1/1/2007 | $298.68 | 3 |
| 2 | 26460 | TENOTOMY, EXTENSOR, HAND OR FING | 1/1/2007 | $289.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 26471 | TENODESIS FOR PROXIMAL INTERPHAL | 1/1/2007 | $463.73 | 3 |
| 2 | 26474 | TENDODISIS FOR DISTAL JOINT STAB | 1/1/2007 | $453.87 | 3 |
| 2 | 26476 | TENDON LENGTHENING EXTENSOR SING | 1/1/2007 | $439.07 | 3 |
| 2 | 26477 | TENDON SHORTENING EXTENSOR SINGL | 1/1/2007 | $442.19 | 3 |
| 2 | 26478 | TENDON LENGTHENING, FLEXOR, HAND | 1/1/2007 | $481.63 | 3 |
| 2 | 26479 | TENDON SHORTENING, FLEXOR, HAND | 1/1/2007 | $473.33 | 3 |
| 2 | 26480 | TENDON TRANSFER OR TRANSPLANT CA | 1/1/2007 | $591.14 | 3 |
| 2 | 26483 | TENDON TRANSFER OR TRANSPLANT CA | 1/1/2007 | $650.83 | 3 |
| 2 | 26485 | TENDON TRANSFER OR TRANSPLANT PA | 1/1/2007 | $629.03 | 3 |
| 2 | 26489 | TENDON TRANSFER OR TRANSPLANT PA | 1/1/2007 | $594.00 | 3 |
| 2 | 26490 | OPPONENS PLASTY SUBLIMIS TENDON | 1/1/2007 | $583.10 | 3 |
| 2 | 26492 | OPPONENS PLASTY; TENDON TRANSFER | 1/1/2007 | $639.67 | 3 |
| 2 | 26494 | OPPONENS PLASTY HYPOTHENAR MUSCL | 1/1/2007 | $590.36 | 3 |
| 2 | 26496 | OPPONENS PLASTY; OTHER METHODS | 1/1/2007 | $630.59 | 3 |
| 2 | 26497 | TENDON TRANSFER TO RESTORE INTRI | 1/1/2007 | $637.85 | 3 |
| 2 | 26498 | TENDON TRANSFER TO RESTORE INTRI | 1/1/2007 | $837.93 | 3 |
| 2 | 26499 | CORRECTION CLAW FINGER OTHER MET | 1/1/2007 | $607.23 | 3 |
| 2 | 26500 | TENDON PULLEY RECONSTRUCTION WIT | 1/1/2007 | $475.40 | 3 |
| 2 | 26502 | TENDON PULLEY RECONSTRUCTION WIT | 1/1/2007 | $527.04 | 3 |
| 2 | 26504 | TENDON PULLEY RECONSTRUCTION; WI | 1/1/2007 | INVALID | N |
| 2 | 26508 | THENAR MUSCLE RELEASE FOR THUMB | 1/1/2007 | $485.01 | 3 |
| 2 | 26510 | CROSS INTRINSIC TRANSFER, EACH T | 1/1/2007 | $456.20 | 3 |
| 2 | 26516 | CAPSULODESIS FOR M-P JOINT STABI | 1/1/2007 | $532.23 | 3 |
| 2 | 26517 | CAPSULODESIS FOR M-P JOINT STABI | 1/1/2007 | $616.83 | 3 |
| 2 | 26518 | CAPSULODESIS FOR M-P JOINT STABI | 1/1/2007 | $617.35 | 3 |
| 2 | 26520 | CAPSULECTOMY OR CAPSULOTOMY FOR | 1/1/2007 | $519.52 | 3 |
| 2 | 26525 | CAPSULECTOMY FOR CONTRACTURE; IN | 1/1/2007 | $522.63 | 3 |
| 2 | 26530 | ARTHROPLASTY METACARPOPHALANGEAL | 1/1/2007 | $360.19 | 3 |
| 2 | 26531 | ARTHROPLASTY METACARPOPHALANGEAL | 1/1/2007 | $420.65 | 3 |
| 2 | 26535 | ARTHROPLASTY INTERPHALANGEAL JOI | 1/1/2007 | $251.46 | 3 |
| 2 | 26536 | ARTHROPLASTY INTERPHALANGEAL JOI | 1/1/2007 | $441.15 | 3 |
| 2 | 26540 | REPAIR OF COLLATERAL LIGAMENT, M | 1/1/2007 | $501.09 | 3 |
| 2 | 26541 | RECONSTRUCTION, COLLATERAL LIGAM | 1/1/2007 | $605.15 | 3 |
| 2 | 26542 | PRIMARY REPAIR OF COLLATERAL LIG | 1/1/2007 | $515.11 | 3 |
| 2 | 26545 | RECONSTRUCTION COLLATERAL LIGAME | 1/1/2007 | $522.37 | 3 |
| 2 | 26546 | REPAIR NON-UNION, METACARPAL OR | 1/1/2007 | $659.65 | 3 |
| 2 | 26548 | REPAIR AND RECONSTRUCTION, FINGE | 1/1/2007 | $573.75 | 3 |
| 2 | 26550 | POLLICIZATION OF A DIGIT | 1/1/2007 | $1,071.48 | 3 |
| 2 | 26551 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/2007 | $2,257.65 | 3 |
| 2 | 26553 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/2007 | $1,851.79 | 3 |
| 2 | 26554 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/2007 | $2,644.82 | 3 |
| 2 | 26555 | POSITIONAL CHANGE OF OTHER FINGE | 1/1/2007 | $968.45 | 3 |
| 2 | 26556 | FREE TOE JOINT TRANSFER WITH MIC | 1/1/2007 | $2,158.52 | 3 |
| 2 | 26560 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $416.50 | 3 |
| 2 | 26561 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $641.74 | 3 |
| 2 | 26562 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $892.68 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 26565 | OSTEOTOMY FOR CORRECTION OF DEFO | 1/1/2007 | $513.03 | 3 |
| 2 | 26567 | OSTEOTOMY FOR CORRECTION OF DEFO | 1/1/2007 | $514.59 | 3 |
| 2 | 26568 | OSTEOPLASTY FOR LENGTHENING OF M | 1/1/2007 | $675.48 | 3 |
| 2 | 26580 | REPAIR CLEFT HAND | 1/1/2007 | $885.15 | 3 |
| 2 | 26585 | REPAIR BIFID DIGIT | 4/1/2002 | INVALID | N |
| 2 | 26587 | RECONSTRUCTION OF POLYDACTYLOUS | 1/1/2007 | $643.56 | 3 |
| 2 | 26590 | REPAIR MACRODACTYLIA, EACH DIGIT | 1/1/2007 | $899.95 | 3 |
| 2 | 26591 | REPAIR, INTRINSIC MUSCLES OF HAN | 1/1/2007 | $347.21 | 3 |
| 2 | 26593 | RELEASE, INTRINSIC MUSCLES OF HA | 1/1/2007 | $447.38 | 3 |
| 2 | 26596 | EXCISION OF CONSTRICTING RING WI | 1/1/2007 | $498.76 | 3 |
| 2 | 26597 | RELEASE OF SCAR CONTRACTURE FLEX | 4/1/2002 | INVALID | N |
| 2 | 26600 | CLOSED TREATMENT OF METACARPAL F | 1/1/2007 | $152.59 | 3 |
| 2 | 26605 | TREATMENT OF CLOSED METACARPAL F | 1/1/2007 | $205.26 | 3 |
| 2 | 26607 | CLOSED TREATMENT OF METACARPAL F | 1/1/2007 | $324.63 | 3 |
| 2 | 26608 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $324.38 | 3 |
| 2 | 26615 | OPEN TREATMENT OF METACARPAL FRA | 1/1/2007 | $298.43 | 3 |
| 2 | 26641 | CLOSED TREATMENT OF CARPOMETACAR | 1/1/2007 | $230.96 | 3 |
| 2 | 26645 | CLOSED TREATMENT OF CARPOMETACAR | 1/1/2007 | $265.99 | 3 |
| 2 | 26650 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $346.69 | 3 |
| 2 | 26665 | OPEN TREATMENT OF CARPOMETACARPA | 1/1/2007 | $392.36 | 3 |
| 2 | 26670 | CLOSED TREATMENT OF CARPOMETACAR | 1/1/2007 | $216.42 | 3 |
| 2 | 26675 | TREATMENT OF CLOSED CARPOMETACAR | 1/1/2007 | $282.60 | 3 |
| 2 | 26676 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $340.72 | 3 |
| 2 | 26685 | OPEN TREATMENT OF CARPOMETACARPA | 1/1/2007 | $369.01 | 3 |
| 2 | 26686 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $417.54 | 3 |
| 2 | 26700 | CLOSED TREATMENT OF METACARPOPHA | 1/1/2007 | $202.41 | 3 |
| 2 | 26705 | TREATMENT OF CLOSED METACARPOPHA | 1/1/2007 | $264.43 | 3 |
| 2 | 26706 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $285.97 | 3 |
| 2 | 26715 | OPEN TREATMENT OF METACARPOPHALA | 1/1/2007 | $315.81 | 3 |
| 2 | 26720 | CLOSED TREATMENT OF PHALANGEAL S | 1/1/2007 | $121.71 | 3 |
| 2 | 26725 | CLOSED TREATMENT OF PHALANGEAL S | 1/1/2007 | $224.21 | 3 |
| 2 | 26727 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $319.44 | 3 |
| 2 | 26735 | OPEN TREATMENT OF PHALANGEAL SHA | 1/1/2007 | $324.12 | 3 |
| 2 | 26740 | CLOSED TX OF ARTICULAR FX, INVOL | 1/1/2007 | $139.87 | 3 |
| 2 | 26742 | TREATMENT OF CLOSED ARTICULAR FR | 1/1/2007 | $244.45 | 3 |
| 2 | 26746 | OPEN TX OF ARTICULAR FX, INVOLVI | 1/1/2007 | $318.93 | 3 |
| 2 | 26750 | CLOSED TREATMENT OF DISTAL PHALA | 1/1/2007 | $114.44 | 3 |
| 2 | 26755 | TREATMENT OF CLOSED DISTAL PHALA | 1/1/2007 | $206.30 | 3 |
| 2 | 26756 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $281.04 | 3 |
| 2 | 26765 | OPEN TREATMENT OF DISTAL PHALANG | 1/1/2007 | $239.26 | 3 |
| 2 | 26770 | CLOSED TREATMENT OF INTERPHALANG | 1/1/2007 | $174.64 | 3 |
| 2 | 26775 | TREATMENT OF CLOSED INTERPHALANG | 1/1/2007 | $245.23 | 3 |
| 2 | 26776 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $300.50 | 3 |
| 2 | 26785 | OPEN TREATMENT OF INTERPHALANGEA | 1/1/2007 | $244.45 | 3 |
| 2 | 26820 | FUSION IN OPPOSITION THUMB WITH | 1/1/2007 | $592.70 | 3 |
| 2 | 26841 | ARTHRODESIS CARPOMETACARPAL JOIN | 1/1/2007 | $559.74 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 26842 | ARTHRODESIS CARPOMETACARPAL JOIN | 1/1/2007 | $595.81 | 3 |
| 2 | 26843 | ARTHRODESIS, CARPOMETACARPAL JOI | 1/1/2007 | $548.58 | 3 |
| 2 | 26844 | ARTHRODESIS CARPOMETACARPAL JOIN | 1/1/2007 | $608.53 | 3 |
| 2 | 26850 | ARTHRODESIS METACARPOPHALANGEAL | 1/1/2007 | $525.75 | 3 |
| 2 | 26852 | ARTHRODESIS METACARPOPHALANGEAL | 1/1/2007 | $586.47 | 3 |
| 2 | 26860 | ARTHRODESIS INTERPHALANGEAL JOIN | 1/1/2007 | $431.55 | 3 |
| 2 | 26861 | ARTHRODESIS INTERPHALANGEAL JOIN | 1/1/2007 | $76.29 | 3 |
| 2 | 26862 | ARTHRODESIS INTERPHALANGEAL JOIN | 1/1/2007 | $540.80 | 3 |
| 2 | 26863 | ARTHRODESIS INTERPHALANGEAL JOIN | 1/1/2007 | $170.49 | 3 |
| 2 | 26910 | AMPUTATION METACARPAL WITH FINGE | 1/1/2007 | $519.00 | 3 |
| 2 | 26951 | AMPUTATION FINGER OR THUMB PRIMA | 1/1/2007 | $401.45 | 3 |
| 2 | 26952 | AMPUTATION FINGER/THUMB PRIMARY/ | 1/1/2007 | $491.49 | 3 |
| 2 | 26989 | UNLISTED PROCEDURE HANDS OR FING | 2/1/1994 | $0.01 | 5 |
| 2 | 26990 | INCISION AND DRAINAGE, PELVIS OR | 1/1/2007 | $413.12 | 3 |
| 2 | 26991 | INCISION AND DRAINAGE; INFECTED | 1/1/2007 | $492.27 | 3 |
| 2 | 26992 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $663.54 | 3 |
| 2 | 27000 | TENOTOMY ADDUCTOR SUBCUTANEOUS C | 1/1/2007 | $308.55 | 3 |
| 2 | 27001 | TENOTOMY, ADDUCTOR OF HIP, SUBCU | 1/1/2007 | $370.57 | 3 |
| 2 | 27003 | TENOTOMY, ADDUCTOR, SUBCUTANEOUS | 1/1/2007 | $387.95 | 3 |
| 2 | 27005 | TENOTOMY ILIOPSOAS OPEN (SEPARAT | 1/1/2007 | $498.50 | 3 |
| 2 | 27006 | TENOTOMY ABDUCTORS OPEN (SEPARAT | 1/1/2007 | $502.39 | 3 |
| 2 | 27025 | FASCIOTOMY, HIP OR THIGH, ANY TY | 1/1/2007 | $559.22 | 3 |
| 2 | 27030 | ARTHROTOMY HIP FOR INFECTION WIT | 1/1/2007 | $646.67 | 3 |
| 2 | 27033 | ARTHROTOMY, HIP, WITH EXPLORATIO | 1/1/2007 | $665.36 | 3 |
| 2 | 27035 | HIP JOINT DENERVATION INTRAPELVI | 1/1/2007 | $780.32 | 3 |
| 2 | 27036 | CAPSULECTOMY OR CAPSULOTOMY OF H | 1/1/2007 | $652.64 | 3 |
| 2 | 27040 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $217.72 | 3 |
| 2 | 27041 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $464.25 | 3 |
| 2 | 27047 | EXCISION, TUMOR, PELVIS AND HIP | 1/1/2007 | $404.82 | 3 |
| 2 | 27048 | EXCISION, TUMOR, PELVIS AND HIP | 1/1/2007 | $310.62 | 3 |
| 2 | 27049 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $625.91 | 3 |
| 2 | 27050 | ARTHROTOMY, WITH BIOPSY; SACROIL | 1/1/2007 | $243.41 | 3 |
| 2 | 27052 | ARTHROTOMY FOR BIOPSY; HIP JOINT | 1/1/2007 | $342.54 | 3 |
| 2 | 27054 | ARTHROTOMY WITH SYNOVECTOMY, HIP | 1/1/2007 | $450.49 | 3 |
| 2 | 27060 | EXCISION ISCHIAL BURSA | 1/1/2007 | $275.07 | 3 |
| 2 | 27062 | EXCISION; TROCHANTERIC BURSA OR | 1/1/2007 | $298.43 | 3 |
| 2 | 27065 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $320.74 | 3 |
| 2 | 27066 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $533.53 | 3 |
| 2 | 27067 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $683.52 | 3 |
| 2 | 27070 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $560.52 | 3 |
| 2 | 27071 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $610.08 | 3 |
| 2 | 27075 | RADICAL RESECTION OF TUMOR OR IN | 1/1/2007 | $1,553.11 | 3 |
| 2 | 27076 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $1,046.82 | 3 |
| 2 | 27077 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $1,785.10 | 3 |
| 2 | 27078 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $664.58 | 3 |
| 2 | 27079 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $654.98 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 27080 | COCCYGECTOMY PRIMARY | 1/1/2007 | $315.29 | 3 |
| 2 | 27086 | REMOVAL OF FOREIGN BODY SUBCUTAN | 1/1/2007 | $173.35 | 3 |
| 2 | 27087 | REMOVAL OF FOREIGN BODY; DEEP | 1/1/2007 | $429.73 | 3 |
| 2 | 27090 | REMOVAL OF HIP PROSTHESIS (SEPAR | 1/1/2007 | $567.79 | 3 |
| 2 | 27091 | REMOVAL OF HIP PROSTHESIS; COMPL | 1/1/2007 | $1,037.48 | 3 |
| 2 | 27093 | INJECTION PROCEDURE FOR HIP ARTH | 1/1/2007 | $153.11 | 3 |
| 2 | 27095 | INJECTION PROCEDURE FOR HIP ARTH | 1/1/2007 | $191.51 | 3 |
| 2 | 27096 | INJECTION PROCEDURE FOR SACROILI | 1/1/2007 | $151.55 | 3 |
| 2 | 27097 | HAMSTRING RESCESSION PROXIMAL | 1/1/2007 | $435.70 | 3 |
| 2 | 27098 | ADDUCTOR TRANSFER TO ISCHIUM | 1/1/2007 | $436.22 | 3 |
| 2 | 27100 | TRANSFER EXTERNAL OBLIQUE MUSCLE | 1/1/2007 | $560.52 | 3 |
| 2 | 27105 | TRANSFER PARASPINAL MUSCLE TO HI | 1/1/2007 | $588.03 | 3 |
| 2 | 27110 | TRANSFER ILIOPSOAS; TO GREATER T | 1/1/2007 | $637.33 | 3 |
| 2 | 27111 | TRANSFER ILIOPSOAS; TO FEMORAL N | 1/1/2007 | $602.82 | 3 |
| 2 | 27120 | ACETABULOPLASTY; (EG,WHITMAN,COL | 1/1/2007 | $854.53 | 3 |
| 2 | 27122 | ACETABULOPLASTY; RESECTION FEMOR | 1/1/2007 | $743.21 | 3 |
| 2 | 27125 | PARTIAL HIP REPLACEMENT, PROSTHE | 1/1/2007 | $722.97 | 3 |
| 2 | 27130 | ARTHROPLASTY, ACETABULAR & PROXI | 1/1/2007 | $958.33 | 3 |
| 2 | 27132 | CONVERSION OF PREVIOUS HIP SURGE | 1/1/2007 | $1,115.59 | 3 |
| 2 | 27134 | REVISION OF TOTAL HIP ARTHOPLAST | 1/1/2007 | $1,330.20 | 3 |
| 2 | 27137 | REVISION OF TOTAL HIP ATHROPLAST | 1/1/2007 | $1,006.34 | 3 |
| 2 | 27138 | REVISION OF TOTAL HIP ATHROPLAST | 1/1/2007 | $1,048.64 | 3 |
| 2 | 27140 | OSTEOTOMY AND TRANSFER OF GREATE | 1/1/2007 | $616.83 | 3 |
| 2 | 27146 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $844.15 | 3 |
| 2 | 27147 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $970.79 | 3 |
| 2 | 27151 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $891.64 | 3 |
| 2 | 27156 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $1,165.41 | 3 |
| 2 | 27158 | OSTEOTOMY, PELVIS, BILATERAL (EG | 1/1/2007 | $878.93 | 3 |
| 2 | 27161 | OSTEOTOMY FEMORAL NECK (SEPARATE | 1/1/2007 | $824.17 | 3 |
| 2 | 27165 | OSTEOTOMY INTERTROCHANTERIC OR S | 1/1/2007 | $880.48 | 3 |
| 2 | 27170 | BONE GRAFT, FEMORAL HEAD, NECK, | 1/1/2007 | $783.43 | 3 |
| 2 | 27175 | TREATMENT OF SLIPPED FEMORAL EPI | 1/1/2007 | $430.77 | 3 |
| 2 | 27176 | TREATMENT OF SLIPPED FEMORAL EPI | 1/1/2007 | $604.38 | 3 |
| 2 | 27177 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $741.91 | 3 |
| 2 | 27178 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $583.62 | 3 |
| 2 | 27179 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $654.72 | 3 |
| 2 | 27181 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $686.64 | 3 |
| 2 | 27185 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $495.65 | 3 |
| 2 | 27187 | PROPHYLACTIC TREATMENT WITH WITH | 1/1/2007 | $680.93 | 3 |
| 2 | 27193 | CLOSED TREATMENT OF PELVIC RING | 1/1/2007 | $301.28 | 3 |
| 2 | 27194 | CLOSED TREATMENT OF PELVIC RING | 1/1/2007 | $492.01 | 3 |
| 2 | 27200 | CLOSED TREATMENT OF COCCYGEAL FR | 1/1/2007 | $112.88 | 3 |
| 2 | 27202 | OPEN TREATMENT OF COCCYGEAL FRAC | 1/1/2007 | $648.75 | 3 |
| 2 | 27215 | OPEN TREATMENT OF ILIAC SPINE, T | 1/1/2007 | $495.65 | 3 |
| 2 | 27216 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $711.55 | 3 |
| 2 | 27217 | OPEN TREATMENT OF ANTERIOR RING | 1/1/2007 | $692.09 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 27218 | OPEN TREATMENT OF POSTERIOR RING | 1/1/2007 | $909.03 | 3 |
| 2 | 27220 | CLOSED TREATMENT OF ACETABULUM ( | 1/1/2007 | $336.83 | 3 |
| 2 | 27222 | TREATMENT OF CLOSED ACETABULUM ( | 1/1/2007 | $645.38 | 3 |
| 2 | 27226 | OPEN TREATMENT OF POSTERIOR OR A | 1/1/2007 | $653.94 | 3 |
| 2 | 27227 | OPEN TREATMENT OF ACETABULAR FRA | 1/1/2007 | $1,113.26 | 3 |
| 2 | 27228 | OPEN TREATMENT OF ACETABULAR FRA | 1/1/2007 | $1,283.23 | 3 |
| 2 | 27230 | CLOSED TREATMENT OF FEMORAL FRAC | 1/1/2007 | $310.62 | 3 |
| 2 | 27232 | CLOSED TREATMENT OF FEMORAL FRAC | 1/1/2007 | $511.22 | 3 |
| 2 | 27235 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $615.79 | 3 |
| 2 | 27236 | OPEN TREATMENT OF FEMORAL FRACTU | 1/1/2007 | $762.15 | 3 |
| 2 | 27238 | CLOSED TREATMENT OF INTERTROCHAN | 1/1/2007 | $299.72 | 3 |
| 2 | 27240 | CLOSED TREATMENT OF INTERTROCHAN | 1/1/2007 | $626.43 | 3 |
| 2 | 27244 | TREATMENT OF INTERTROCHANTERIC, | 1/1/2007 | $779.02 | 3 |
| 2 | 27245 | OPEN TREATMENT OF INTERTROCHANTE | 1/1/2007 | $975.20 | 3 |
| 2 | 27246 | CLOSED TREATMENT OF GREATER TROC | 1/1/2007 | $258.98 | 3 |
| 2 | 27248 | OPEN TREATMENT OF GREATER TROCHA | 1/1/2007 | $531.20 | 3 |
| 2 | 27250 | CLOSED TREATMENT OF HIP DISLOCAT | 1/1/2007 | $316.33 | 3 |
| 2 | 27252 | TREATMENT OF CLOSED HIP DISLOCAT | 1/1/2007 | $505.51 | 3 |
| 2 | 27253 | OPEN TREATMENT OF HIP DISLOCATIO | 1/1/2007 | $647.45 | 3 |
| 2 | 27254 | OPEN TREATMENT OF HIP DISLOCATIO | 1/1/2007 | $868.03 | 3 |
| 2 | 27256 | TREATMENT OF SPONTANEOUS HIP DIS | 1/1/2007 | $210.20 | 3 |
| 2 | 27257 | TREATMENT OF CONGENITAL HIP DISL | 1/1/2007 | $226.28 | 3 |
| 2 | 27258 | OPEN TREATMENT OF SPONTANEOUS HI | 1/1/2007 | $751.25 | 3 |
| 2 | 27259 | OPEN TREATMENT OF CONGENITAL HIP | 1/1/2007 | $1,022.95 | 3 |
| 2 | 27265 | CLOSED TREATMENT OF POST HIP ART | 1/1/2007 | $271.70 | 3 |
| 2 | 27266 | CLOSED TREATMENT OF POST HIP ART | 1/1/2007 | $392.62 | 3 |
| 2 | 27275 | MANIPULATION HIP JOINT REQUIRING | 1/1/2007 | $123.78 | 3 |
| 2 | 27280 | ARTHRODESIS SACROILIAC JOINT (IN | 1/1/2007 | $679.63 | 3 |
| 2 | 27282 | ARTHRODESIS SYMPHYSIS PUBIS (INC | 1/1/2007 | $550.14 | 3 |
| 2 | 27284 | ARTHRODESIS HIP JOINT (INCLUDES | 1/1/2007 | $1,093.27 | 3 |
| 2 | 27286 | ARTHRODESIS HIP JOINT (INCLUDES | 1/1/2007 | $1,099.50 | 3 |
| 2 | 27290 | INTERPELVIABDOMINAL AMPUTATION ( | 1/1/2007 | $1,058.24 | 3 |
| 2 | 27295 | DISARTICULATION OF HIP | 1/1/2007 | $854.01 | 3 |
| 2 | 27299 | UNLISTED PROCEDURE PELVIS OR HIP | 2/1/1994 | $0.01 | 5 |
| 2 | 27301 | INCISION AND DRAINAGE OF DEEP AB | 1/1/2007 | $457.24 | 3 |
| 2 | 27303 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $433.37 | 3 |
| 2 | 27305 | FASCIOTOMY ILIOTIBIAL (TENOTOMY) | 1/1/2007 | $314.51 | 3 |
| 2 | 27306 | TENOTOMY SUBCUTANEOUS CLOSED ADD | 1/1/2007 | $264.43 | 3 |
| 2 | 27307 | TENOTOMY SUBCUTANEOUS CLOSED ADD | 1/1/2007 | $317.37 | 3 |
| 2 | 27310 | ARTHROTOMY KNEE FOR INFECTION WI | 1/1/2007 | $479.30 | 3 |
| 2 | 27315 | NEURECTOMY HAMSTRING MUSCLE | 1/1/2007 | INVALID | N |
| 2 | 27320 | NEURECTOMY POPITEAL (GASTROCNEMI | 1/1/2007 | INVALID | N |
| 2 | 27323 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $156.74 | 3 |
| 2 | 27324 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $255.09 | 3 |
| 2 | 27325 | NEURECTOMY, HAMSTRING MUSCLE | 1/1/2007 | $353.70 | 3 |
| 2 | 27326 | NEURECTOMY, POPLITEAL (GASTROCNE | 1/1/2007 | $316.33 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 27327 | EXCISION, TUMOR, THIGH OR KNEE A | 1/1/2007 | $288.30 | 3 |
| 2 | 27328 | EXCISION, TUMOR, THIGH OR KNEE A | 1/1/2007 | $279.74 | 3 |
| 2 | 27329 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $656.79 | 3 |
| 2 | 27330 | ARTHROTOMY, KNEE; WITH SYNOVIAL | 1/1/2007 | $269.88 | 3 |
| 2 | 27331 | ARTHROTOMY, KNEE; W/JOINT EXPLOR | 1/1/2007 | $322.56 | 3 |
| 2 | 27332 | ARTHROTOMY, KNEE, WITH EXCISION | 1/1/2007 | $436.74 | 3 |
| 2 | 27333 | ARTHROTOMY KNEE FOR EXCISION OF | 1/1/2007 | $395.48 | 3 |
| 2 | 27334 | ARTHROTOMY, KNEE, WITH SYNOVECTO | 1/1/2007 | $457.50 | 3 |
| 2 | 27335 | ARTHROTOMY KNEE FOR SYNOVECTOMY; | 1/1/2007 | $518.22 | 3 |
| 2 | 27340 | EXCISION PREPATELLAR BURSA | 1/1/2007 | $245.49 | 3 |
| 2 | 27345 | EXCISION OF SYNOVIAL CYST OF POP | 1/1/2007 | $325.67 | 3 |
| 2 | 27347 | EXCISION OF LESION OF MENISCUS O | 1/1/2007 | $316.33 | 3 |
| 2 | 27350 | PATELLECTOMY OR HEMIPATELLECTOMY | 1/1/2007 | $436.74 | 3 |
| 2 | 27355 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $408.71 | 3 |
| 2 | 27356 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $492.79 | 3 |
| 2 | 27357 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $549.88 | 3 |
| 2 | 27358 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $209.68 | 3 |
| 2 | 27360 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $568.05 | 3 |
| 2 | 27365 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $797.96 | 3 |
| 2 | 27370 | INJECTION PROCEDURE FOR KNEE ART | 1/1/2007 | $123.78 | 3 |
| 2 | 27372 | REMOVAL FOREIGN BODY DEEP | 1/1/2007 | $414.68 | 3 |
| 2 | 27380 | SUTURE OF INFRAPATELLAR TENDON P | 1/1/2007 | $407.16 | 3 |
| 2 | 27381 | SUTURE OF INFRAPATELLAR TENDON S | 1/1/2007 | $550.92 | 3 |
| 2 | 27385 | SUTURE OF QUADRICEPS OR HAMSTRIN | 1/1/2007 | $434.92 | 3 |
| 2 | 27386 | SUTURE OF QUADRICEPS OR HAMSTRIN | 1/1/2007 | $569.08 | 3 |
| 2 | 27390 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $294.79 | 3 |
| 2 | 27391 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $389.25 | 3 |
| 2 | 27392 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $476.70 | 3 |
| 2 | 27393 | LENGTHENING OF HAMSTRING TENDON | 1/1/2007 | $345.91 | 3 |
| 2 | 27394 | LENGTHENING OF HAMSTRING TENDON; | 1/1/2007 | $446.34 | 3 |
| 2 | 27395 | LENGTHENING OF HAMSTRING TENDON; | 1/1/2007 | $599.45 | 3 |
| 2 | 27396 | TRANSPORT HAMSTRING TENDON TO PA | 1/1/2007 | $420.65 | 3 |
| 2 | 27397 | TRANSPLANT HAMSTRING TENDON TO P | 1/1/2007 | $574.79 | 3 |
| 2 | 27400 | TENDON OR MUSCLE TRANSFER HAMSTR | 1/1/2007 | $456.46 | 3 |
| 2 | 27403 | ARTHROTOMY WITH OPEN MENISCUS RE | 1/1/2007 | $440.11 | 3 |
| 2 | 27405 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $458.28 | 3 |
| 2 | 27407 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $528.86 | 3 |
| 2 | 27409 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $651.35 | 3 |
| 2 | 27412 | AUTOLOGOUS CHONDROCYTE IMPLANTAT | 1/1/2005 | NC | 9 |
| 2 | 27415 | OSTEOCHONDRAL ALLOGRAFT, KNEE, O | 1/1/2005 | NC | 9 |
| 2 | 27418 | ANTERIOR TIBIAL TUBERCLEPLASTY ( | 1/1/2007 | $561.56 | 3 |
| 2 | 27420 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $510.18 | 3 |
| 2 | 27422 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $508.88 | 3 |
| 2 | 27424 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $508.88 | 3 |
| 2 | 27425 | LATERAL RETINACULAR RELEASE OPEN | 1/1/2007 | $302.32 | 3 |
| 2 | 27427 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $487.86 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 27428 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $718.04 | 3 |
| 2 | 27429 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $795.37 | 3 |
| 2 | 27430 | QUADRICEPS PLASTY (BENNETT OR TH | 1/1/2007 | $502.65 | 3 |
| 2 | 27435 | CAPSULOTOMY KNEE POSTERIOR CAPSU | 1/1/2007 | $510.44 | 3 |
| 2 | 27437 | ARTHROPLASTY PATELLA WITHOUT PRO | 1/1/2007 | $446.34 | 3 |
| 2 | 27438 | ARTHROLASTY PATELLA; WITH PROSTH | 1/1/2007 | $563.63 | 3 |
| 2 | 27440 | ARTHROPLASTY KNEE TIBIAL PLATEAU | 1/1/2007 | $473.07 | 3 |
| 2 | 27441 | ARTHROPLASTY KNEE TIBIAL PLATEAU | 1/1/2007 | $503.69 | 3 |
| 2 | 27442 | ARTHROPLASTY KNEE FEMORAL CONDYL | 1/1/2007 | $594.26 | 3 |
| 2 | 27443 | ARTHROPLASTY KNEE FEMORAL CONDYL | 1/1/2007 | $559.48 | 3 |
| 2 | 27445 | ARTHROPLASTY KNEE CONSTRAINED PR | 1/1/2007 | $859.46 | 3 |
| 2 | 27446 | ARTHROPLASTY KNEE TOTAL CONDYLE | 1/1/2007 | $776.42 | 3 |
| 2 | 27447 | ARTHROPLASTY, KNEE, CONDYLE & PL | 1/1/2007 | $1,034.89 | 3 |
| 2 | 27448 | OSTEOTOMY FEMUR SHAFT OR SUPRACO | 1/1/2007 | $560.52 | 3 |
| 2 | 27450 | OSTEOTOMY FEMUR SHAFT OR SUPRACO | 1/1/2007 | $700.39 | 3 |
| 2 | 27454 | OSTEOTOMY MULTIPLE FEMORAL SHAFT | 1/1/2007 | $861.28 | 3 |
| 2 | 27455 | OSTEOTOMY PROXIMAL TIBIA INCLUDI | 1/1/2007 | $647.45 | 3 |
| 2 | 27457 | OSTEOTOMY PROXIMAL TIBIA INCLUDI | 1/1/2007 | $667.43 | 3 |
| 2 | 27465 | OSTEOPLASTY FEMUR SHORTENING (EX | 1/1/2007 | $689.49 | 3 |
| 2 | 27466 | OSTEOPLASTY FEMUR; LENGTHENING | 1/1/2007 | $802.89 | 3 |
| 2 | 27468 | OSTEOPLASTY FEMUR; COMBINED LENG | 1/1/2007 | $898.65 | 3 |
| 2 | 27470 | REPAIR NONUNION OR MALUNION FEMU | 1/1/2007 | $795.63 | 3 |
| 2 | 27472 | REPAIR NONUNION OR MALUNION FEMU | 1/1/2007 | $868.81 | 3 |
| 2 | 27475 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $446.86 | 3 |
| 2 | 27477 | TIBIA AND FIBULA PROXIMAL | 1/1/2007 | $501.35 | 3 |
| 2 | 27479 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $654.72 | 3 |
| 2 | 27485 | ARREST HEMIEPIPHYSEAL DISTAL FEM | 1/1/2007 | $461.39 | 3 |
| 2 | 27486 | REVISION OF TOTAL KNEE ATHROPLAS | 1/1/2007 | $937.57 | 3 |
| 2 | 27487 | REVISION OF TOTAL KNEE ARTHROPLA | 1/1/2007 | $1,199.41 | 3 |
| 2 | 27488 | REMOVAL OF KNEE PROSTHESIS, INCL | 1/1/2007 | $783.43 | 3 |
| 2 | 27495 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $770.20 | 3 |
| 2 | 27496 | DECOMPRESSION FASCIOTOMY, THIGH | 1/1/2007 | $329.82 | 3 |
| 2 | 27497 | DECOMPRESSION FASCIOTOMY, THIGH | 1/1/2007 | $357.07 | 3 |
| 2 | 27498 | DECOMPRESSION FASCIOTOMY, THIGH | 1/1/2007 | $394.18 | 3 |
| 2 | 27499 | DECOMPRESSION FASCIOTOMY, THIGH | 1/1/2007 | $448.94 | 3 |
| 2 | 27500 | CLOSED TREATMENT OF FEMORAL SHAF | 1/1/2007 | $339.17 | 3 |
| 2 | 27501 | CLOSED TREATMENT OF SUPRACONDYLA | 1/1/2007 | $330.86 | 3 |
| 2 | 27502 | CLOSED TREATMENT OF FEMORAL SHAF | 1/1/2007 | $531.20 | 3 |
| 2 | 27503 | CLOSED TREATMENT OF SUPRACONDYLA | 1/1/2007 | $537.42 | 3 |
| 2 | 27506 | OPEN TREATMENT OF FEMORAL SHAFT | 1/1/2007 | $863.36 | 3 |
| 2 | 27507 | OPEN TREATMENT OF FEMORAL SHAFT | 1/1/2007 | $681.45 | 3 |
| 2 | 27508 | CLOSED TREATMENT OF FEMORAL FRAC | 1/1/2007 | $344.36 | 3 |
| 2 | 27509 | PERCUTANEOUS SKELETAL FIX OF FEM | 1/1/2007 | $441.67 | 3 |
| 2 | 27510 | CLOSED TREATMENT OF FEMORAL FRAC | 1/1/2007 | $467.10 | 3 |
| 2 | 27511 | OPEN TREATMENT OF FEMORAL SUPRAC | 1/1/2007 | $706.36 | 3 |
| 2 | 27513 | OPEN TREATMENT OF FEMORAL SUPRAC | 1/1/2007 | $906.43 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 27514 | OPEN TREATMENT OF FEMORAL FRACTU | 1/1/2007 | $873.48 | 3 |
| 2 | 27516 | CLOSED TREATMENT OF DISTAL FEMOR | 1/1/2007 | $325.41 | 3 |
| 2 | 27517 | CLOSED TREATMENT OF DISTAL FEMOR | 1/1/2007 | $453.09 | 3 |
| 2 | 27519 | OPEN TREATMENT OF DISTAL FEMORAL | 1/1/2007 | $756.96 | 3 |
| 2 | 27520 | CLOSED TREATMENT OF PATELLAR FRA | 1/1/2007 | $204.49 | 3 |
| 2 | 27524 | OPEN TREATMENT OF PATELLAR FRACT | 1/1/2007 | $518.48 | 3 |
| 2 | 27530 | CLOSED TREATMENT OF TIBIAL FRACT | 1/1/2007 | $253.01 | 3 |
| 2 | 27532 | CLOSED TREATMENT OF TIBIAL FRACT | 1/1/2007 | $413.38 | 3 |
| 2 | 27535 | OPEN TREATMENT OF TIBIAL FRACTUR | 1/1/2007 | $612.94 | 3 |
| 2 | 27536 | OPEN TREATMENT OF TIBIAL FRACTUR | 1/1/2007 | $778.50 | 3 |
| 2 | 27538 | CLOSED TREATMENT OF INTERCONDYLA | 1/1/2007 | $307.51 | 3 |
| 2 | 27540 | OPEN TREATMENT OF INTERCONDYLAR | 1/1/2007 | $645.90 | 3 |
| 2 | 27550 | CLOSED TREATMENT OF KNEE DISLOCA | 1/1/2007 | $325.41 | 3 |
| 2 | 27552 | TREATMENT OF CLOSED KNEE DISLOCA | 1/1/2007 | $420.91 | 3 |
| 2 | 27556 | OPEN TREATMENT OF KNEE DISLOCATI | 1/1/2007 | $741.39 | 3 |
| 2 | 27557 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $852.98 | 3 |
| 2 | 27558 | OPEN TREATMENT OF KNEE DISLOCATI | 1/1/2007 | $878.41 | 3 |
| 2 | 27560 | CLOSED TREATMENT OF PATELLAR DIS | 1/1/2007 | $235.11 | 3 |
| 2 | 27562 | TREATMENT OF CLOSED PATELLAR DIS | 1/1/2007 | $298.43 | 3 |
| 2 | 27566 | OPEN TREATMENT OF PATELLAR DISLO | 1/1/2007 | $614.50 | 3 |
| 2 | 27570 | MANIPULATION OF KNEE JOINT UNDER | 1/1/2007 | $99.13 | 3 |
| 2 | 27580 | FUSION OF KNEE ANY TECHNIQUE | 1/1/2007 | $974.42 | 3 |
| 2 | 27590 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $530.42 | 3 |
| 2 | 27591 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $605.93 | 3 |
| 2 | 27592 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $457.76 | 3 |
| 2 | 27594 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $340.20 | 3 |
| 2 | 27596 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $492.53 | 3 |
| 2 | 27598 | DISARTICULATION AT KNEE | 1/1/2007 | $498.24 | 3 |
| 2 | 27599 | UNLISTED PROCEDURE FEMUR OR KNEE | 2/1/1994 | $0.01 | 5 |
| 2 | 27600 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $286.49 | 3 |
| 2 | 27601 | DECOMPRESSION FASCIOTOMY, LEG; P | 1/1/2007 | $292.98 | 3 |
| 2 | 27602 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $352.40 | 3 |
| 2 | 27603 | INCISION AND DRAINAGE DEEP ABSCE | 1/1/2007 | $342.02 | 3 |
| 2 | 27604 | INCISION AND DRAINAGE; INFECTED | 1/1/2007 | $291.94 | 3 |
| 2 | 27605 | TENOTOMY ACHILLES TENDON SUBCUTA | 1/1/2007 | $284.93 | 3 |
| 2 | 27606 | TENOTOMY ACHILLES TENDON SUBCUTA | 1/1/2007 | $212.53 | 3 |
| 2 | 27607 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $401.19 | 3 |
| 2 | 27610 | ARTHROTOMY, ANKLE, FOR INFECTION | 1/1/2007 | $434.66 | 3 |
| 2 | 27612 | ARTHROTOMY ANKLE POSTERIOR CAPSU | 1/1/2007 | $377.83 | 3 |
| 2 | 27613 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $145.58 | 3 |
| 2 | 27614 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $352.40 | 3 |
| 2 | 27615 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $617.35 | 3 |
| 2 | 27618 | EXCISION, TUMOR, LEG OR ANKLE AR | 1/1/2007 | $306.99 | 3 |
| 2 | 27619 | EXCISION, TUMOR, LEG OR ANKLE AR | 1/1/2007 | $497.72 | 3 |
| 2 | 27620 | ARTHROTOMY, ANKLE, W/JOINT EXPLO | 1/1/2007 | $322.30 | 3 |
| 2 | 27625 | ARTHROTOMY, ANKLE, WITH SYNOVECT | 1/1/2007 | $416.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 27626 | ARTHROTOMY ANKLE FOR SYNOVECTOMY | 1/1/2007 | $449.45 | 3 |
| 2 | 27630 | EXCISION OF LESION OF TENDON SHE | 1/1/2007 | $340.20 | 3 |
| 2 | 27635 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $411.05 | 3 |
| 2 | 27637 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $514.07 | 3 |
| 2 | 27638 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $537.17 | 3 |
| 2 | 27640 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $611.64 | 3 |
| 2 | 27641 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $494.35 | 3 |
| 2 | 27645 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $743.21 | 3 |
| 2 | 27646 | RESECTION FOR TUMOR RADICAL; FIB | 1/1/2007 | $668.21 | 3 |
| 2 | 27647 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $560.52 | 3 |
| 2 | 27648 | INJECTION PROCEDURE FOR ANKLE AR | 1/1/2007 | $118.59 | 3 |
| 2 | 27650 | REPAIR PRIMARY OPEN OR PERCUTANE | 1/1/2007 | $487.86 | 3 |
| 2 | 27652 | SUTURE PRIMARY RUPTURED ACHILLES | 1/1/2007 | $520.82 | 3 |
| 2 | 27654 | REPAIR SECONDARY RUPTURED ACHILL | 1/1/2007 | $486.30 | 3 |
| 2 | 27656 | REPAIR FASCIAL DEFECT OF LEG | 1/1/2007 | $358.11 | 3 |
| 2 | 27658 | REPAIR OR SUTURE OF FLEXOR TENDO | 1/1/2007 | $268.06 | 3 |
| 2 | 27659 | REPAIR OR SUTURE OF FLEXOR TENDO | 1/1/2007 | $351.62 | 3 |
| 2 | 27664 | REPAIR OR SUTURE OF EXTENSOR TEN | 1/1/2007 | $256.91 | 3 |
| 2 | 27665 | REPAIR OR SUTURE OF EXTENSOR TEN | 1/1/2007 | $292.20 | 3 |
| 2 | 27675 | REPAIR FOR DISLOCATING PERONEAL | 1/1/2007 | $364.08 | 3 |
| 2 | 27676 | REPAIR FOR DISLOCATING PERONEAL | 1/1/2007 | $429.47 | 3 |
| 2 | 27680 | TENOLYSIS INCLUDING TIBIA FIBULA | 1/1/2007 | $305.69 | 3 |
| 2 | 27681 | TENOLYSIS INCLUDING TIBIA FIBULA | 1/1/2007 | $360.45 | 3 |
| 2 | 27685 | LENGTHENING OR SHORTENING OF TEN | 1/1/2007 | $383.28 | 3 |
| 2 | 27686 | LENGTHENING OR SHORTENING OF TEN | 1/1/2007 | $394.44 | 3 |
| 2 | 27687 | GASTROCNEMIUS RECESSION (EG STRA | 1/1/2007 | $325.93 | 3 |
| 2 | 27690 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $425.58 | 3 |
| 2 | 27691 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $502.65 | 3 |
| 2 | 27692 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $80.96 | 3 |
| 2 | 27695 | SUTURE PRIMARY TORN RUPTURED OR | 1/1/2007 | $348.77 | 3 |
| 2 | 27696 | SUTURE PRIMARY TORN RUPTURED OR | 1/1/2007 | $414.94 | 3 |
| 2 | 27698 | SUTURE SECONDARY REPAIR TORN RUP | 1/1/2007 | $461.39 | 3 |
| 2 | 27700 | ARTHROPLASTY ANKLE | 1/1/2007 | $422.47 | 3 |
| 2 | 27702 | ARTHROPLASTY ANKLE; WITH IMPLANT | 1/1/2007 | $687.93 | 3 |
| 2 | 27703 | ARTHOPLASTY ANKLE SECONDARY RECO | 1/1/2007 | $775.13 | 3 |
| 2 | 27704 | REMOVAL OF ANKLE IMPLANT | 1/1/2007 | $376.02 | 3 |
| 2 | 27705 | OSTEOTOMY TIBIA | 1/1/2007 | $528.08 | 3 |
| 2 | 27707 | OSTEOTOMY; FIBULA | 1/1/2007 | $261.32 | 3 |
| 2 | 27709 | OSTEOTOMY; TIBIA AND FIBULA | 1/1/2007 | $514.33 | 3 |
| 2 | 27712 | OSTEOTOMY; MULTIPLE WITH REALIGN | 1/1/2007 | $712.85 | 3 |
| 2 | 27715 | OSTEOPLASTY TIBIA AND FIBULA LEN | 1/1/2007 | $717.78 | 3 |
| 2 | 27720 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $603.08 | 3 |
| 2 | 27722 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $597.11 | 3 |
| 2 | 27724 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $875.29 | 3 |
| 2 | 27725 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $784.21 | 3 |
| 2 | 27727 | REPAIR OF CONGENITAL PSEUDARTHRO | 1/1/2007 | $695.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 27730 | ARREST, EPIPHYSEAL (EPIPHYSIODES | 1/1/2007 | $403.78 | 3 |
| 2 | 27732 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $285.97 | 3 |
| 2 | 27734 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $418.31 | 3 |
| 2 | 27740 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $490.97 | 3 |
| 2 | 27742 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $458.02 | 3 |
| 2 | 27745 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $518.74 | 3 |
| 2 | 27750 | CLOSED TREATMENT OF TIBIAL SHAFT | 1/1/2007 | $220.83 | 3 |
| 2 | 27752 | CLOSED TREATMENT OF TIBIAL SHAFT | 1/1/2007 | $350.58 | 3 |
| 2 | 27756 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $374.20 | 3 |
| 2 | 27758 | OPEN TREATMENT OF TIBIAL SHAFT F | 1/1/2007 | $594.00 | 3 |
| 2 | 27759 | TREATMENT OF TIBIAL SHAFT FRACTU | 1/1/2007 | $686.64 | 3 |
| 2 | 27760 | CLOSED TREATMENT OF MEDIAL MALLE | 1/1/2007 | $212.27 | 3 |
| 2 | 27762 | CLOSED TREATMENT OF MEDIAL MALLE | 1/1/2007 | $322.82 | 3 |
| 2 | 27766 | OPEN TREATMENT OF MEDIAL MALLEOL | 1/1/2007 | $441.93 | 3 |
| 2 | 27780 | CLOSED TREATMENT OF PROXIMAL FIB | 1/1/2007 | $188.14 | 3 |
| 2 | 27781 | TREATMENT OF CLOSED PROXIMAL FIB | 1/1/2007 | $275.85 | 3 |
| 2 | 27784 | OPEN TREATMENT OF PROXIMAL FIBUL | 1/1/2007 | $384.58 | 3 |
| 2 | 27786 | CLOSED TREATMENT OF DISTAL FIBUL | 1/1/2007 | $201.63 | 3 |
| 2 | 27788 | TREATMENT OF CLOSED DISTAL FIBUL | 1/1/2007 | $281.30 | 3 |
| 2 | 27792 | OPEN TREATMENT OF DISTAL FIBULAR | 1/1/2007 | $413.90 | 3 |
| 2 | 27808 | CLOSED TREATMENT OF BIMALLEOLAR | 1/1/2007 | $210.20 | 3 |
| 2 | 27810 | TREATMENT OF CLOSED BIMALLEOLAR | 1/1/2007 | $316.59 | 3 |
| 2 | 27814 | OPEN TREATMENT OF BIMALLEOLAR AN | 1/1/2007 | $547.29 | 3 |
| 2 | 27816 | CLOSED TREATMENT OF TRIMALLEOLAR | 1/1/2007 | $200.07 | 3 |
| 2 | 27818 | TREATMENT OF CLOSED TRIMALLEOLAR | 1/1/2007 | $329.57 | 3 |
| 2 | 27822 | OPEN TREATMENT OF TRIMALLEOLAR A | 1/1/2007 | $611.64 | 3 |
| 2 | 27823 | OPEN TREATMENT OF TRIMALLEOLAR A | 1/1/2007 | $693.64 | 3 |
| 2 | 27824 | CLOSED TREATMENT OF FRACTURE OF | 1/1/2007 | $192.29 | 3 |
| 2 | 27825 | CLOSED TREATMENT OF FRACTURE OF | 1/1/2007 | $358.63 | 3 |
| 2 | 27826 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $489.16 | 3 |
| 2 | 27827 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $759.56 | 3 |
| 2 | 27828 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $856.09 | 3 |
| 2 | 27829 | OPEN TREATMENT OF DISTAL TIBIOFI | 1/1/2007 | $343.32 | 3 |
| 2 | 27830 | CLOSED TREATMENT OF PROXIMAL TIB | 1/1/2007 | $226.28 | 3 |
| 2 | 27831 | TREATMENT OF PROXIMAL TIBIOFIBUL | 1/1/2007 | $253.01 | 3 |
| 2 | 27832 | OPEN TREATMENT OF PROXIMAL TIBIO | 1/1/2007 | $355.52 | 3 |
| 2 | 27840 | CLOSED TREATMENT OF ANKLE DISLOC | 1/1/2007 | $228.36 | 3 |
| 2 | 27842 | CLOSED TREATMENT OF ANKLE DISLOC | 1/1/2007 | $319.96 | 3 |
| 2 | 27846 | OPEN TREATMENT OF ANKLE DISLOCAT | 1/1/2007 | $504.21 | 3 |
| 2 | 27848 | OPEN TREATMENT OF ANKLE DISLOCAT | 1/1/2007 | $593.22 | 3 |
| 2 | 27860 | MANIPULATION OF ANKLE UNDER GENE | 1/1/2007 | $122.48 | 3 |
| 2 | 27870 | ARTHRODESIS, ANKLE, OPEN | 1/1/2007 | $695.46 | 3 |
| 2 | 27871 | ARTHRODESIS TIBIOFIBULAR JOINT P | 1/1/2007 | $476.18 | 3 |
| 2 | 27880 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $537.94 | 3 |
| 2 | 27881 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $601.26 | 3 |
| 2 | 27882 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $433.88 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 27884 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $394.18 | 3 |
| 2 | 27886 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $447.38 | 3 |
| 2 | 27888 | AMPUTATION ANKLE THROUGH MALLEOL | 1/1/2007 | $485.01 | 3 |
| 2 | 27889 | ANKLE DISARTICULATION | 1/1/2007 | $465.02 | 3 |
| 2 | 27892 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $365.64 | 3 |
| 2 | 27893 | DECOMPRESSION FASCIOTOMY, LEG; P | 1/1/2007 | $361.22 | 3 |
| 2 | 27894 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $516.66 | 3 |
| 2 | 27899 | UNLISTED PROCEDURE LEG OR ANKLE | 4/1/1982 | $0.01 | 5 |
| 2 | 28001 | INCISION AND DRAINAGE INFECTED B | 1/1/2007 | $157.00 | 3 |
| 2 | 28002 | DEEP INFECTION BELOW FASCIA REQU | 1/1/2007 | $265.21 | 3 |
| 2 | 28003 | DEEP INFECTION BELOW FASCIA REQU | 1/1/2007 | $409.23 | 3 |
| 2 | 28005 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $412.35 | 3 |
| 2 | 28008 | FASCIOTOMY, FOOT AND/OR TOE | 1/1/2007 | $248.34 | 3 |
| 2 | 28010 | TENOTOMY SUBCUTANEOUS TOE SINGLE | 1/1/2007 | $144.80 | 3 |
| 2 | 28011 | TENOTOMY SUBCUTANEOUS TOE; MULTI | 1/1/2007 | $208.38 | 3 |
| 2 | 28020 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $304.91 | 3 |
| 2 | 28022 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $272.22 | 3 |
| 2 | 28024 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $264.17 | 3 |
| 2 | 28030 | NEURECTOMY OF INTRINSIC MUSCULAT | 1/1/2007 | INVALID | N |
| 2 | 28035 | TARSAL TUNNEL RELEASE (POSTERIOR | 1/1/2007 | $302.32 | 3 |
| 2 | 28043 | EXCISION, TUMOR, FOOT; SUBCUTANE | 1/1/2007 | $202.67 | 3 |
| 2 | 28045 | EXCISION, TUMOR, FOOT; DEEP, SUB | 1/1/2007 | $278.44 | 3 |
| 2 | 28046 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $527.04 | 3 |
| 2 | 28050 | ARTHROTOMY FOR SYNOVIAL BIOPSY I | 1/1/2007 | $252.75 | 3 |
| 2 | 28052 | ARTHROTOMY FOR SYNOVIAL BIOSY; M | 1/1/2007 | $243.41 | 3 |
| 2 | 28054 | ARTHROTOMY FOR SYNOVIAL BIOPSY; | 1/1/2007 | $223.95 | 3 |
| 2 | 28055 | NEURECTOMY, INTRINSIC MUSCULATUR | 1/1/2007 | $271.70 | 3 |
| 2 | 28060 | FASCIECTOMY EXCISION OF PLANTAR | 1/1/2007 | $296.09 | 3 |
| 2 | 28062 | FASCIECTOMY EXCISION OF PLANTAR | 1/1/2007 | $359.93 | 3 |
| 2 | 28070 | SYNOVECTOMY INTERTARSAL OR TARSO | 1/1/2007 | $286.75 | 3 |
| 2 | 28072 | SYNOVECTOMY; METATARSOPHALANGEAL | 1/1/2007 | $280.00 | 3 |
| 2 | 28080 | EXCISION OF INTERDIGITAL (MORTON | 1/1/2007 | $237.70 | 3 |
| 2 | 28086 | SYNOVECTOMY TENDON SHEATH FLEXOR | 1/1/2007 | $351.10 | 3 |
| 2 | 28088 | SYNOVECTOMY TENDON SHEATH; EXTEN | 1/1/2007 | $265.47 | 3 |
| 2 | 28090 | EXCISION OF LESION OF TENDON OR | 1/1/2007 | $263.13 | 3 |
| 2 | 28092 | EXCISION OF LESION OF TENDON/FIB | 1/1/2007 | $242.63 | 3 |
| 2 | 28100 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $374.98 | 3 |
| 2 | 28102 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $384.58 | 3 |
| 2 | 28103 | EXCISION OF CURETTAGE OF BONE CY | 1/1/2007 | $311.92 | 3 |
| 2 | 28104 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $293.49 | 3 |
| 2 | 28106 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $325.93 | 3 |
| 2 | 28107 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $332.94 | 3 |
| 2 | 28108 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $240.82 | 3 |
| 2 | 28110 | OSTECTOMY PARTIAL EXCISION FIFTH | 1/1/2007 | $255.35 | 3 |
| 2 | 28111 | OSTECTOMY COMPLETE EXCISION FIRS | 1/1/2007 | $310.36 | 3 |
| 2 | 28112 | OSTECTOMY COMPLETE EXCISION; OTH | 1/1/2007 | $283.11 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 28113 | OSTECTOMY COMPLETE EXCISION; FIF | 1/1/2007 | $297.91 | 3 |
| 2 | 28114 | OSTECTOMY, COMP EXCISION; ALL ME | 1/1/2007 | $592.96 | 3 |
| 2 | 28116 | OSTECTOMY EXCISION OF TARSAL COA | 1/1/2007 | $404.30 | 3 |
| 2 | 28118 | OSTECTOMY, CALCANEUS | 1/1/2007 | $338.65 | 3 |
| 2 | 28119 | OSTECTOMY CALCANEUS; FOR SPUR WI | 1/1/2007 | $298.94 | 3 |
| 2 | 28120 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $349.29 | 3 |
| 2 | 28122 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $392.10 | 3 |
| 2 | 28124 | PARTIAL EXCISION (CRATERIZATION, | 1/1/2007 | $269.88 | 3 |
| 2 | 28126 | RESECTION, PARTIAL OR COMPLETE, | 1/1/2007 | $212.27 | 3 |
| 2 | 28130 | TALECTOMY (ASTRAGALECTOMY) | 1/1/2007 | $417.54 | 3 |
| 2 | 28140 | METATARSECTOMY | 1/1/2007 | $390.81 | 3 |
| 2 | 28150 | PHALANGECTOMY SINGLE EACH | 1/1/2007 | $245.23 | 3 |
| 2 | 28153 | RESECTION HEAD OF PHALANX | 1/1/2007 | $219.02 | 3 |
| 2 | 28160 | HEMIPHALANGECTOMY OR INTERPHALAN | 1/1/2007 | $228.10 | 3 |
| 2 | 28171 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $424.54 | 3 |
| 2 | 28173 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $454.64 | 3 |
| 2 | 28175 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $324.12 | 3 |
| 2 | 28190 | REMOVE FOREIGN BODY SUBCUTANEOUS | 1/1/2007 | $144.80 | 3 |
| 2 | 28192 | REMOVE FOREIGN BODY; DEEP | 1/1/2007 | $278.44 | 3 |
| 2 | 28193 | REMOVE FOREIGN BODY; COMPLICATED | 1/1/2007 | $313.22 | 3 |
| 2 | 28200 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $267.29 | 3 |
| 2 | 28202 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $388.47 | 3 |
| 2 | 28208 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $253.27 | 3 |
| 2 | 28210 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $347.21 | 3 |
| 2 | 28220 | TENOLYSIS FLEXOR SINGLE | 1/1/2007 | $253.53 | 3 |
| 2 | 28222 | TENOLYSIS FLEXOR; MULTIPLE (THRO | 1/1/2007 | $299.72 | 3 |
| 2 | 28225 | TENOLYSIS EXTENSOR SINGLE | 1/1/2007 | $217.98 | 3 |
| 2 | 28226 | TENOLYSIS EXTENSOR; MULTIPLE (TH | 1/1/2007 | $256.91 | 3 |
| 2 | 28230 | TENOTOMY OPEN FLEXOR FOOT SINGLE | 1/1/2007 | $245.49 | 3 |
| 2 | 28232 | TENOTOMY OPEN FLEXOR; TOE SINGLE | 1/1/2007 | $216.68 | 3 |
| 2 | 28234 | TENOTOMY OPEN EXTENSOR FOOT OR T | 1/1/2007 | $220.06 | 3 |
| 2 | 28238 | RECONSTRUCTION, POSTERIOR TIBIAL | 1/1/2007 | $416.24 | 3 |
| 2 | 28240 | TENOTOMY LENGTHENING, OR RELEASE | 1/1/2007 | $248.34 | 3 |
| 2 | 28250 | DIVISION OF PLANTAR FASCIA AND M | 1/1/2007 | $321.00 | 3 |
| 2 | 28260 | CAPSULOTOMY MIDFOOT MEDIAL RELEA | 1/1/2007 | $400.41 | 3 |
| 2 | 28261 | CAPSULOTOMY MIDFOOT; WITH TENDON | 1/1/2007 | $568.56 | 3 |
| 2 | 28262 | CAPSULOTOMY,MIDFOOT;EXTEN,INCL P | 1/1/2007 | $830.14 | 3 |
| 2 | 28264 | CAPSULOTOMY MIDTARSAL(HEYMAN TYP | 1/1/2007 | $509.14 | 3 |
| 2 | 28270 | CAPSULOTOMY; METATARSOPHALANGEAL | 1/1/2007 | $266.51 | 3 |
| 2 | 28272 | CAPSULOTOMY FOR CONTRACTURE INTE | 1/1/2007 | $219.02 | 3 |
| 2 | 28280 | WEBBING OPERATION (CREATE SYNDAC | 1/1/2007 | $315.81 | 3 |
| 2 | 28285 | HAMMERTOE OPERATION; ONE TOE (EG | 1/1/2007 | $260.54 | 3 |
| 2 | 28286 | HAMMERTOE OPERATION, ONE TOE (EG | 1/1/2007 | $257.42 | 3 |
| 2 | 28288 | OSTECTOMY, PARTIAL, EXOSTECTOMY | 1/1/2007 | $294.01 | 3 |
| 2 | 28289 | HALLUX RIGIDUS CORRECTION WITH C | 1/1/2007 | $416.50 | 3 |
| 2 | 28290 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $330.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 28292 | HALLUX VALGUS (BUNION) CORRECTIO | 10/1/2003 | NC | 9 |
| 2 | 28293 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $545.99 | 3 |
| 2 | 28294 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $443.49 | 3 |
| 2 | 28296 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $480.85 | 3 |
| 2 | 28297 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $504.99 | 3 |
| 2 | 28298 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $420.65 | 3 |
| 2 | 28299 | CORRECTION, HALLUX VALGUS (BUNIO | 1/1/2007 | $537.68 | 3 |
| 2 | 28300 | OSTEOTOMY CALCANEUS (DWYER OR CH | 1/1/2007 | $470.21 | 3 |
| 2 | 28302 | OSTEOTOMY; TALUS | 1/1/2007 | $463.47 | 3 |
| 2 | 28304 | OSTEOTOMY MIDTARSAL BONES OTHER | 1/1/2007 | $476.96 | 3 |
| 2 | 28305 | OSTEOTOMY MIDTARSAL BONES OTHER | 1/1/2007 | $479.82 | 3 |
| 2 | 28306 | OSTEOTOMY, METATARSAL, BASE/SHAF | 1/1/2007 | $351.36 | 3 |
| 2 | 28307 | OSTEOTOMY,METATARSAL,BASE/SHAFT, | 1/1/2007 | $474.11 | 3 |
| 2 | 28308 | OSTEOTOMY METATARSAL BASE OR SHA | 1/1/2007 | $304.65 | 3 |
| 2 | 28309 | OSTEOTOMY METATARSALS MULTIPLE F | 1/1/2007 | $590.88 | 3 |
| 2 | 28310 | OSTEOTOMY FOR SHORTENING ANGULAR | 1/1/2007 | $308.29 | 3 |
| 2 | 28312 | OSTEOTOMY FOR SHORTENING ANGULAR | 1/1/2007 | $275.59 | 3 |
| 2 | 28313 | RECONSTRUCTION, ANGULAR DEFORMIT | 1/1/2007 | $285.97 | 3 |
| 2 | 28315 | SESAMOIDECTOMY FIRST TOE (SEPARA | 1/1/2007 | $269.36 | 3 |
| 2 | 28320 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $449.71 | 3 |
| 2 | 28322 | REPAIR OF NONUNION OR MALUNION M | 1/1/2007 | $487.86 | 3 |
| 2 | 28340 | RECONSTRUCTION, TOE, MACRODACTYL | 1/1/2007 | $370.31 | 3 |
| 2 | 28341 | RECONSTRUCTION, TOE, MACRODACTYL | 1/1/2007 | $424.54 | 3 |
| 2 | 28344 | RECONSTRUCTION, TOE(S); POLYDACT | 1/1/2007 | $272.99 | 3 |
| 2 | 28345 | RECONSTRUCTION, TOE(S); SYNDACTY | 1/1/2007 | $335.27 | 3 |
| 2 | 28360 | RECONSTRUCTION, CLEFT FOOT | 1/1/2007 | $677.81 | 3 |
| 2 | 28400 | CLOSED TREATMENT OF CALCANEAL FR | 1/1/2007 | $159.59 | 3 |
| 2 | 28405 | CLOSED TREATMENT OF CALCANEAL FR | 1/1/2007 | $262.87 | 3 |
| 2 | 28406 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $369.01 | 3 |
| 2 | 28415 | OPEN TREATMENT OF CALCANEAL FRAC | 1/1/2007 | $828.58 | 3 |
| 2 | 28420 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $840.00 | 3 |
| 2 | 28430 | CLOSED TREATMENT OF TALUS FRACTU | 1/1/2007 | $150.51 | 3 |
| 2 | 28435 | TREATMENT OF CLOSED TALUS FRACTU | 1/1/2007 | $203.19 | 3 |
| 2 | 28436 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $296.87 | 3 |
| 2 | 28445 | OPEN TREATMENT OF TALUS FRACTURE | 1/1/2007 | $758.78 | 3 |
| 2 | 28450 | TREATMENT OF TARSAL BONE FRACTUR | 1/1/2007 | $137.54 | 3 |
| 2 | 28455 | TREATMENT OF CLOSED TARSAL BONE | 1/1/2007 | $180.61 | 3 |
| 2 | 28456 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $188.92 | 3 |
| 2 | 28465 | OPEN TREATMENT OF TARSAL BONE FR | 1/1/2007 | $374.46 | 3 |
| 2 | 28470 | CLOSED TREATMENT OF METATARSAL F | 1/1/2007 | $140.65 | 3 |
| 2 | 28475 | TREATMENT OF CLOSED METATARSAL F | 1/1/2007 | $175.16 | 3 |
| 2 | 28476 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $230.96 | 3 |
| 2 | 28485 | OPEN TREATMENT OF METATARSAL FRA | 1/1/2007 | $311.14 | 3 |
| 2 | 28490 | CLOSED TREATMENT OF FRACTURE GRE | 1/1/2007 | $84.34 | 3 |
| 2 | 28495 | TREATMENT OF CLOSED FRACTURE GRE | 1/1/2007 | $102.76 | 3 |
| 2 | 28496 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $284.41 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 28505 | OPEN TREATMENT OF FRACTURE GREAT | 1/1/2007 | $323.86 | 3 |
| 2 | 28510 | CLOSED TREATMENT OF FRACTURE, PH | 1/1/2007 | $71.62 | 3 |
| 2 | 28515 | TREATMENT OF CLOSED FRACTURE PHA | 1/1/2007 | $91.86 | 3 |
| 2 | 28525 | OPEN TREATMENT OF FRACTURE, PHAL | 1/1/2007 | $294.27 | 3 |
| 2 | 28530 | CLOSED TREATMENT OF SESAMOID FRA | 1/1/2007 | $68.51 | 3 |
| 2 | 28531 | OPEN TREATMENT OF SESAMOID FRACT | 1/1/2007 | $258.72 | 3 |
| 2 | 28540 | CLOSED TREATMENT OF TARSAL BONE | 1/1/2007 | $122.22 | 3 |
| 2 | 28545 | TREATMENT OF CLOSED TARSAL BONE | 1/1/2007 | $134.16 | 3 |
| 2 | 28546 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $276.37 | 3 |
| 2 | 28555 | OPEN TREATMENT OF TARSAL BONE DI | 1/1/2007 | $447.90 | 3 |
| 2 | 28570 | CLOSED TREATMENT OF TALOTARSAL J | 1/1/2007 | $112.10 | 3 |
| 2 | 28575 | TREATMENT OF CLOSED TALOTARSAL J | 1/1/2007 | $197.22 | 3 |
| 2 | 28576 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $234.33 | 3 |
| 2 | 28585 | OPEN TREATMENT OF TALOTARSAL JOI | 1/1/2007 | $429.99 | 3 |
| 2 | 28600 | CLOSED TREATMENT OF TARSOMETATAR | 1/1/2007 | $129.23 | 3 |
| 2 | 28605 | TREATMENT OF CLOSED TARSOMETATAR | 1/1/2007 | $161.93 | 3 |
| 2 | 28606 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $270.14 | 3 |
| 2 | 28615 | OPEN TREATMENT OF TARSOMETATARSA | 1/1/2007 | $444.26 | 3 |
| 2 | 28630 | CLOSED TREATMENT OF METATARSOPHA | 1/1/2007 | $90.05 | 3 |
| 2 | 28635 | TREATMENT OF CLOSED METATARSOPHA | 1/1/2007 | $108.99 | 3 |
| 2 | 28636 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $183.73 | 3 |
| 2 | 28645 | OPEN TREATMENT OF METATARSOPHALA | 1/1/2007 | $252.75 | 3 |
| 2 | 28660 | CLOSED TREATMENT OF INTERPHALANG | 1/1/2007 | $67.99 | 3 |
| 2 | 28665 | TREATMENT OF CLOSED INTERPHALANG | 1/1/2007 | $93.68 | 3 |
| 2 | 28666 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $233.29 | 3 |
| 2 | 28675 | OPEN TREATMENT OF INTERPHALANGEA | 1/1/2007 | $273.25 | 3 |
| 2 | 28705 | PANTALAR ARTHRODESIS | 1/1/2007 | $890.60 | 3 |
| 2 | 28715 | TRIPLE ARTHRODESIS | 1/1/2007 | $649.27 | 3 |
| 2 | 28725 | SUBTALAR ARTHRODESIS | 1/1/2007 | $563.37 | 3 |
| 2 | 28730 | ARTHRODESIS MIDTARSAL ORTARSOMET | 1/1/2007 | $543.39 | 3 |
| 2 | 28735 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $528.08 | 3 |
| 2 | 28737 | ARTHRODESIS, WITH TENDON LENGTHE | 1/1/2007 | $465.02 | 3 |
| 2 | 28740 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $522.11 | 3 |
| 2 | 28750 | ARTHRODESIS GREAT TOE METARSOPHA | 1/1/2007 | $528.34 | 3 |
| 2 | 28755 | ARTHRODESIS GREAT TOE; INTERPHAL | 1/1/2007 | $298.43 | 3 |
| 2 | 28760 | ARTHRODESIS GREAT TOE INTERPHALA | 1/1/2007 | $435.44 | 3 |
| 2 | 28800 | AMPUTATION FOOT MIDTARSAL (CHOPA | 1/1/2007 | $393.40 | 3 |
| 2 | 28805 | AMPUTATION FOOT; TRANSMETATARSAL | 1/1/2007 | $394.96 | 3 |
| 2 | 28810 | AMPUTATION METATARSAL WITH TOE S | 1/1/2007 | $299.46 | 3 |
| 2 | 28820 | AMPUTATION TOE METATARSOPHALANGE | 1/1/2007 | $326.45 | 3 |
| 2 | 28825 | AMPUTATION TOE; INTERPHALANGEAL | 1/1/2007 | $287.79 | 3 |
| 2 | 28890 | EXTRACORPOREAL SHOCK WAVE, HIGH | 1/1/2006 | NC | 9 |
| 2 | 28899 | UNLISTED PROCEDURE FOOT OR TOES | 2/1/1994 | $0.01 | 5 |
| 2 | 29000 | APPLICATION OF HALO TYPE BODY CA | 1/1/2007 | $146.10 | 3 |
| 2 | 29010 | APPLICATION OF RISSER JACKET LOC | 1/1/2007 | $150.51 | 3 |
| 2 | 29015 | APPLICATION OF RISSER JACKET LOC | 1/1/2007 | $147.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 29020 | APPLICATION OF TURNBUCKLE JACKET | 1/1/2007 | $144.80 | 3 |
| 2 | 29025 | APPLICATION OF TURNBUCKLE JACKET | 1/1/2007 | $155.44 | 3 |
| 2 | 29035 | APPLICATION OF BODY CAST SHOULDE | 1/1/2007 | $147.14 | 3 |
| 2 | 29040 | APPLICATION OF BODY CAST SHOULDE | 1/1/2007 | $131.05 | 3 |
| 2 | 29044 | APPLICATION OF BODY CAST SHOULDE | 1/1/2007 | $167.38 | 3 |
| 2 | 29046 | APPLICATION OF BODY CAST SHOULDE | 1/1/2007 | $157.52 | 3 |
| 2 | 29049 | APPLICATION, CAST; FIGURE-OF-EIG | 1/1/2007 | $60.20 | 3 |
| 2 | 29055 | APPLICATION; SHOULDER SPICA | 1/1/2007 | $131.57 | 3 |
| 2 | 29058 | APPLICATION; PLASTER VELPEAU | 1/1/2007 | $78.89 | 3 |
| 2 | 29065 | APPLICATION; SHOULDER TO HAND (L | 1/1/2007 | $60.98 | 3 |
| 2 | 29075 | APPLICATION; ELBOW TO FINGER (SH | 1/1/2007 | $56.05 | 3 |
| 2 | 29085 | APPLICATION; HAND AND LOWER FORE | 1/1/2007 | $59.43 | 3 |
| 2 | 29086 | APPLICATION, CAST; FINGER (EG, C | 1/1/2007 | $42.82 | 3 |
| 2 | 29105 | APPLICATION OF LONG ARM SPLINT ( | 1/1/2007 | $57.61 | 3 |
| 2 | 29125 | APPLICATION OF SHORT ARM SPLINT | 1/1/2007 | $43.60 | 3 |
| 2 | 29126 | APPLICATION OF SHORT ARM SPLINT | 1/1/2007 | $53.20 | 3 |
| 2 | 29130 | APPLICATION OF FINGER SPLINT STA | 1/1/2007 | $26.73 | 3 |
| 2 | 29131 | APPLICATION OF FINGER SPLINT; DY | 1/1/2007 | $34.25 | 3 |
| 2 | 29200 | STRAPPING THORAX | 1/1/2007 | $36.59 | 3 |
| 2 | 29220 | STRAPPING; LOW BACK | 1/1/2007 | $36.33 | 3 |
| 2 | 29240 | STRAPPING; SHOULDER (EG VELPEAU) | 1/1/2007 | $42.04 | 3 |
| 2 | 29260 | STRAPPING; ELBOW OR WRIST | 1/1/2007 | $34.77 | 3 |
| 2 | 29280 | STRAPPING; HAND OR FINGER | 1/1/2007 | $34.77 | 3 |
| 2 | 29305 | APPLICATION OF HIP SPICA CAST; O | 1/1/2007 | $148.69 | 3 |
| 2 | 29325 | APPLICATION OF HIP SPICA CAST; O | 1/1/2007 | $162.45 | 3 |
| 2 | 29345 | APPLICATION OF LONG LEG CAST (TH | 1/1/2007 | $88.49 | 3 |
| 2 | 29355 | APPLICATION OF LONG LEG CAST (TH | 1/1/2007 | $90.83 | 3 |
| 2 | 29358 | APPLICATION OF LONG LEG CAST BRA | 1/1/2007 | $97.31 | 3 |
| 2 | 29365 | APPLICATION OF CYLINDER CAST (TH | 1/1/2007 | $78.89 | 3 |
| 2 | 29405 | APPLICATION OF SHORT LEG CAST (B | 1/1/2007 | $57.61 | 3 |
| 2 | 29425 | APPLICATION OF SHORT LEG CAST (B | 1/1/2007 | $62.02 | 3 |
| 2 | 29435 | APPLICATION OF PATELLAR TENDON B | 1/1/2007 | $76.29 | 3 |
| 2 | 29440 | ADDING WALKER TO PREVIOUSLY APPL | 1/1/2007 | $34.77 | 3 |
| 2 | 29445 | APPLICATION OF RIGID TOTAL CONTA | 1/1/2007 | $100.17 | 3 |
| 2 | 29450 | APPLICATION OF CLUBFOOT CAST WIT | 1/1/2007 | $99.13 | 3 |
| 2 | 29505 | APPLICATION OF LONG LEG SPLINT ( | 1/1/2007 | $50.60 | 3 |
| 2 | 29515 | APPLICATION OF SHORT LEG SPLINT | 1/1/2007 | $43.86 | 3 |
| 2 | 29520 | STRAPPING HIP | 1/1/2007 | $36.85 | 3 |
| 2 | 29530 | STRAPPING; KNEE | 1/1/2007 | $36.59 | 3 |
| 2 | 29540 | STRAPPING; ANKLE AND/OR FOOT | 1/1/2007 | $25.69 | 3 |
| 2 | 29550 | STRAPPING; TOES | 1/1/2007 | $24.65 | 3 |
| 2 | 29580 | STRAPPING; UNNA BOOT | 1/1/2007 | $33.48 | 3 |
| 2 | 29590 | DENIS-BROWNE SPLINT STRAPPING | 1/1/2007 | $35.29 | 3 |
| 2 | 29700 | REMOVAL OR BIVALVING GAUNTLET BO | 1/1/2007 | $39.96 | 3 |
| 2 | 29705 | REMOVAL OF BIVALVING; FULL ARM O | 1/1/2007 | $44.37 | 3 |
| 2 | 29710 | REMOVAL OR BIVALVING; SHOULDER O | 1/1/2007 | $79.67 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 29715 | REMOVAL OR BIVALVING; TURNBUCKLE | 1/1/2007 | $57.09 | 3 |
| 2 | 29720 | REPAIR OF SPICA BODY CAST OR JAC | 1/1/2007 | $50.86 | 3 |
| 2 | 29730 | WINDOWING OF CAST | 1/1/2007 | $43.60 | 3 |
| 2 | 29740 | WEDGING OF CAST (EXCEPT CLUBFOOT | 1/1/2007 | $63.58 | 3 |
| 2 | 29750 | WEDGING OF CLUBFOOT CAST | 1/1/2007 | $65.65 | 3 |
| 2 | 29799 | UNLISTED PROCEDURE CASTING OR ST | 4/1/1982 | $0.01 | 5 |
| 2 | 29800 | ARTHROSCOPY, TEMPOROMANDIBULAR J | 1/1/2007 | $373.68 | 3 |
| 2 | 29804 | ARTHROSCOPY, TEMPOROMANDIBULAR J | 1/1/2007 | $445.04 | 3 |
| 2 | 29805 | ARTHROSCOPY, SHOULDER, DIAGNOSTI | 1/1/2007 | $326.71 | 3 |
| 2 | 29806 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $727.38 | 3 |
| 2 | 29807 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $708.69 | 3 |
| 2 | 29815 | ARTHROSCOPY SHOULDER DIAGNOSTIC | 4/1/2002 | INVALID | N |
| 2 | 29819 | ARTHROSCOPY SHOULDER SURGICAL; W | 1/1/2007 | $408.45 | 3 |
| 2 | 29820 | ARTHROSCOPY SHOULDER SURGICAL; S | 1/1/2007 | $376.79 | 3 |
| 2 | 29821 | ARTHROSCOPY SHOULDER SURGICAL; S | 1/1/2007 | $411.57 | 3 |
| 2 | 29822 | ARTHROSCOPY SHOULDER SURGICAL; D | 1/1/2007 | $399.89 | 3 |
| 2 | 29823 | ARTHROSCOPY SHOULDER SURGICAL; D | 1/1/2007 | $436.22 | 3 |
| 2 | 29824 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $446.60 | 3 |
| 2 | 29825 | ARTHROSCOPY SHOULDER SURGICAL WI | 1/1/2007 | $407.67 | 3 |
| 2 | 29826 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $469.18 | 3 |
| 2 | 29827 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $767.08 | 3 |
| 2 | 29830 | ARTHROSCOPY ELBOW DIAGNOSTIC WIT | 1/1/2007 | $314.00 | 3 |
| 2 | 29834 | ARTHROSCOPY ELBOW SURGICAL; WITH | 1/1/2007 | $342.54 | 3 |
| 2 | 29835 | ARTHROSCOPY ELBOW SURGICAL; SYNO | 1/1/2007 | $350.33 | 3 |
| 2 | 29836 | ARTHROSCOPY ELBOW SURGICAL; SYNO | 1/1/2007 | $404.04 | 3 |
| 2 | 29837 | ARTHROSCOPY ELBOW SURGICAL; DEBR | 1/1/2007 | $368.49 | 3 |
| 2 | 29838 | ARTHROSCOPY ELBOW SURGICAL; DEBR | 1/1/2007 | $412.86 | 3 |
| 2 | 29840 | ARTHROSCOPY, WRIST, DIAGNOSTIC, | 1/1/2007 | $303.87 | 3 |
| 2 | 29843 | ARTHROSCOPY, WRIST, SURGICAL; FO | 1/1/2007 | $325.93 | 3 |
| 2 | 29844 | ARTHROSCOPY, WRIST, SURGICAL; SY | 1/1/2007 | $343.58 | 3 |
| 2 | 29845 | ARTHROSCOPY, WRIST, SURGICAL; SY | 1/1/2007 | $388.99 | 3 |
| 2 | 29846 | ARTHROSCOPY, WRIST, SURGICAL; EX | 1/1/2007 | $360.19 | 3 |
| 2 | 29847 | ARTHROSCOPY, WRIST, SURGICAL; IN | 1/1/2007 | $372.64 | 3 |
| 2 | 29848 | ARTHROSCOPY, WRIST, SURGICAL; W/ | 1/1/2007 | $309.06 | 3 |
| 2 | 29850 | ARTHROSCOPICALLY AIDED TREATMENT | 1/1/2007 | $375.76 | 3 |
| 2 | 29851 | ARTHROSCOPICALLY AIDED TREATMENT | 1/1/2007 | $654.98 | 3 |
| 2 | 29855 | ARTHROSCOPICALLY AIDED TREATMENT | 1/1/2007 | $550.92 | 3 |
| 2 | 29856 | ARTHROSCOPICALLY AIDED TREATMENT | 1/1/2007 | $706.10 | 3 |
| 2 | 29860 | ARTHROSCOPY, HIP, DIAGNOSTIC WIT | 1/1/2007 | $424.80 | 3 |
| 2 | 29861 | ARTHROSCOPY, HIP, SURGICAL; WITH | 1/1/2007 | $469.44 | 3 |
| 2 | 29862 | ARTHROSCOPY, HIP, SURGICAL; WITH | 1/1/2007 | $521.34 | 3 |
| 2 | 29863 | ARTHROSCOPY, HIP, SURGICAL; WITH | 1/1/2007 | $514.85 | 3 |
| 2 | 29866 | ARTHROSCOPY, KNEE, SURGICAL; OST | 1/1/2005 | NC | 9 |
| 2 | 29867 | ARTHROSCOPY, KNEE, SURGICAL; OST | 1/1/2005 | NC | 9 |
| 2 | 29868 | ARTHROSCOPY, KNEE, SURGICAL; MEN | 1/1/2005 | NC | 9 |
| 2 | 29870 | ARTHROSCOPY, KNEE, DIAGNOSTIC, W | 1/1/2007 | $280.52 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 29871 | ARTHROSCOPY, KNEE, SURGICAL; FOR | 1/1/2007 | $352.14 | 3 |
| 2 | 29873 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 1/1/2007 | $353.44 | 3 |
| 2 | 29874 | ARTHROSCOPY KNEE SURGICAL FOR RE | 1/1/2007 | $369.53 | 3 |
| 2 | 29875 | ARTHROSCOPY, KNEE, SURGICAL; SYN | 1/1/2007 | $344.10 | 3 |
| 2 | 29876 | ARTHROSCOPY KNEE SURGICAL SYNOVE | 1/1/2007 | $423.50 | 3 |
| 2 | 29877 | ARTHROSCOPY KNEE SURGICAL; DEBRI | 1/1/2007 | $399.11 | 3 |
| 2 | 29879 | ARTHROSCOPY KNEE SURGICAL ABRASI | 1/1/2007 | $429.73 | 3 |
| 2 | 29880 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 1/1/2007 | $449.97 | 3 |
| 2 | 29881 | ARTHROSCOPY KNEE SURGICAL WITH M | 1/1/2007 | $417.02 | 3 |
| 2 | 29882 | ARTHROSCOPY KNEE SURGICAL; WITH | 1/1/2007 | $451.53 | 3 |
| 2 | 29883 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 1/1/2007 | $571.94 | 3 |
| 2 | 29884 | ARTHROSCOPY KNEE SURGICAL WITH L | 1/1/2007 | $397.29 | 3 |
| 2 | 29885 | ARTHROSCOPY,KNEE,SURG;DRILL FOR | 1/1/2007 | $483.97 | 3 |
| 2 | 29886 | ARTHROSCOPY KNEE SURGICAL; DRILL | 1/1/2007 | $407.42 | 3 |
| 2 | 29887 | ARTHROSCOPY KNEE SURGICAL DRILLI | 1/1/2007 | $481.37 | 3 |
| 2 | 29888 | ARTHROSCOPICALLY AIDED ANTERIOR | 1/1/2007 | $688.19 | 3 |
| 2 | 29889 | ARTHROSCOPICALLY AIDED POSTERIOR | 1/1/2007 | $810.42 | 3 |
| 2 | 29891 | ARTHROSCOPY, ANKLE, SURGICAL; EX | 1/1/2007 | $449.19 | 3 |
| 2 | 29892 | ARTHROSCOPICALLY AIDED REPAIR OF | 1/1/2007 | $471.25 | 3 |
| 2 | 29893 | ENDOSCOPIC PLANTAR FASCIOTOMY | 1/1/2007 | $315.03 | 3 |
| 2 | 29894 | ARTHROSCOPY, ANKLE (TIBIOTALAR & | 1/1/2007 | $359.15 | 3 |
| 2 | 29895 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $352.40 | 3 |
| 2 | 29897 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $369.53 | 3 |
| 2 | 29898 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $410.01 | 3 |
| 2 | 29899 | ARTHROSCOPY, ANKLE, SURGICAL; WI | 1/1/2007 | $697.02 | 3 |
| 2 | 29900 | ARTHROSCOPY, METACARPOPHALANGEAL | 1/1/2007 | $317.37 | 3 |
| 2 | 29901 | ARTHROSCOPY, METACARPOPHALANGEAL | 1/1/2007 | $349.29 | 3 |
| 2 | 29902 | ARTHROSCOPY, METACARPOPHALANGEAL | 1/1/2007 | $372.90 | 3 |
| 2 | 29909 | UNLISTED PROCEDURE ARTHROSCOPY | 4/1/2002 | INVALID | N |
| 2 | 29999 | UNLISTED PROCEDURE, ARTHROSCOPY | 1/1/2002 | $0.01 | 5 |
| 2 | 30000 | DRAINAGE ABSCESS OR HEMATOMA NAS | 1/1/2007 | $146.10 | 3 |
| 2 | 30020 | DRAINAGE ABSCESS OR HEMATOMA NAS | 1/1/2007 | $125.34 | 3 |
| 2 | 30100 | BIOPSY INTRANASAL | 1/1/2007 | $77.59 | 3 |
| 2 | 30110 | EXCISION, NASAL POLYP(S), SIMPLE | 1/1/2007 | $130.27 | 3 |
| 2 | 30115 | EXCISION, NASAL POLYP(S), EXTENS | 1/1/2007 | $273.25 | 3 |
| 2 | 30117 | EXCISION OR DESTRUCTION (EG, LAS | 1/1/2007 | $430.77 | 3 |
| 2 | 30118 | EXCISION INTRANASAL LESION; EXTE | 1/1/2007 | $510.70 | 3 |
| 2 | 30120 | EXCISION OR SURGICAL PLANING OF | 4/1/1982 | NC | 9 |
| 2 | 30124 | EXCISION DERMOID CYST NOSE SIMPL | 1/1/2007 | $180.87 | 3 |
| 2 | 30125 | EXCISION DERMOID CYST NOSE; COMP | 1/1/2007 | $418.31 | 3 |
| 2 | 30130 | EXCISION INFERIOR TURBINATE, PAR | 1/1/2007 | $241.08 | 3 |
| 2 | 30140 | SUBMUCOUS RESECTION INFERIOR TUR | 1/1/2007 | $258.98 | 3 |
| 2 | 30150 | RHINECTOMY PARTIAL | 1/1/2007 | $547.55 | 3 |
| 2 | 30160 | RHINECTOMY; TOTAL | 1/1/2007 | $536.91 | 3 |
| 2 | 30200 | INJECTION INTO TURBINATES THERAP | 1/1/2007 | $63.84 | 3 |
| 2 | 30210 | DISPLACEMENT THERAPY (PROETZ TYP | 1/1/2007 | $85.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 30220 | INSERTION NASAL SEPTAL PROSTHESI | 1/1/2007 | $153.11 | 3 |
| 2 | 30300 | REMOVAL FOREIGN BODY INTRANASAL | 1/1/2007 | $149.47 | 3 |
| 2 | 30310 | REMOVAL FOREIGN BODY INTRANASAL; | 1/1/2007 | $135.72 | 3 |
| 2 | 30320 | REMOVAL FOREIGN BODY INTRANASAL; | 1/1/2007 | $310.36 | 3 |
| 2 | 30400 | RHINOPLASTY PRIMARY LATERAL AND | 1/1/2007 | $684.82 | 3 |
| 2 | 30410 | RHINOPLASTY PRIMARY COMPLETE EXT | 1/1/2007 | $851.16 | 3 |
| 2 | 30420 | RHINOPLASTY PRIMARY; INCLUDING M | 1/1/2007 | $915.52 | 3 |
| 2 | 30430 | RHINOPLASTY SECONDARY MINOR REVI | 1/1/2007 | $623.58 | 3 |
| 2 | 30435 | RHINOPLASTY SECONDARY; INTERMEDI | 1/1/2007 | $838.70 | 3 |
| 2 | 30450 | RHINOPLASTY SECONDARY; MAJOR REV | 1/1/2007 | $1,103.65 | 3 |
| 2 | 30460 | RHINOPLASTY FOR NASAL DEFORMITY | 1/1/2007 | $543.65 | 3 |
| 2 | 30462 | RHINOPLASTY FOR NASAL DEFORMITY | 1/1/2007 | $1,099.50 | 3 |
| 2 | 30465 | REPAIR OF NASAL VESTIBULAR STENO | 1/1/2007 | $640.45 | 3 |
| 2 | 30520 | SEPTOPLASTY OR SUBMUCOUS RESECTI | 1/1/2007 | $332.94 | 3 |
| 2 | 30540 | REPAIR CHOANAL ATRESIA INTRANASA | 1/1/2007 | $459.57 | 3 |
| 2 | 30545 | REPAIR CHOANAL ARTESIA; TRANSPAL | 1/1/2007 | $648.49 | 3 |
| 2 | 30560 | LYSIS INTRANASAL SYNECHIA | 1/1/2007 | $159.33 | 3 |
| 2 | 30580 | REPAIR FISTULA OROMAXILLARY (COM | 1/1/2007 | $398.59 | 3 |
| 2 | 30600 | REPAIR FISTULA; ORONASAL | 1/1/2007 | $369.79 | 3 |
| 2 | 30620 | SEPTAL OR OTHER INTRANASAL DERMA | 1/1/2007 | $399.37 | 3 |
| 2 | 30630 | REPAIR NASAL SEPTAL PERFORATIONS | 1/1/2007 | $407.16 | 3 |
| 2 | 30801 | CAUTERY AND/OR ABLATION, MUCOSA | 1/1/2007 | $138.05 | 3 |
| 2 | 30802 | CAUTERIZATION AND/OR ABLATION, M | 1/1/2007 | $176.72 | 3 |
| 2 | 30901 | CONTROL NASAL HEMORRHAGE,ANTERIO | 1/1/2007 | $69.55 | 3 |
| 2 | 30903 | CONTROL NASAL HEMORRHAGE,ANTERIO | 1/1/2007 | $113.92 | 3 |
| 2 | 30905 | CONTROL NASAL HEMORRHAGE, POSTER | 1/1/2007 | $146.88 | 3 |
| 2 | 30906 | CONTROL NASAL HEMORRHAGE POSTERI | 1/1/2007 | $169.97 | 3 |
| 2 | 30915 | LIGATION ARTERIES ETHMOIDAL | 1/1/2007 | $375.76 | 3 |
| 2 | 30920 | LIGATION ARTERIES; INTERNAL MAXI | 1/1/2007 | $509.14 | 3 |
| 2 | 30930 | FRACTURE NASAL INFERIOR TURBINAT | 1/1/2007 | $77.85 | 3 |
| 2 | 30999 | UNLISTED PROCEDURE NOSE | 4/1/1982 | $0.01 | 5 |
| 2 | 31000 | LAVAGE BY CANNULATION; MAXILLARY | 1/1/2007 | $106.14 | 3 |
| 2 | 31002 | LAVAGE BY CANNULATION; SPHENOID | 1/1/2007 | $137.79 | 3 |
| 2 | 31020 | SINUSOTOMY, MAXILLARY (ANTROTOMY | 1/1/2007 | $305.69 | 3 |
| 2 | 31030 | SINUSOTOMY, MAXILLARY (ANTROTOMY | 1/1/2007 | $468.14 | 3 |
| 2 | 31032 | SINUSOTOMY, MAXILLARY (ANTROTOMY | 1/1/2007 | $373.68 | 3 |
| 2 | 31040 | PTERYGOMAXILLARY FOSSA SURGERY, | 1/1/2007 | $522.37 | 3 |
| 2 | 31050 | SINUSOTOMY, SPHENOID, WITH OR WI | 1/1/2007 | $314.77 | 3 |
| 2 | 31051 | SINUSOTOMY, SPHENOID, WITH OR WI | 1/1/2007 | $414.68 | 3 |
| 2 | 31070 | SINUSOTOMY FRONTAL EXTERNAL SIMP | 1/1/2007 | $275.07 | 3 |
| 2 | 31075 | SINUSOTOMY FRONTAL TRANSORBITAL | 1/1/2007 | $510.18 | 3 |
| 2 | 31080 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $679.89 | 3 |
| 2 | 31081 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $758.52 | 3 |
| 2 | 31084 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $732.31 | 3 |
| 2 | 31085 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $775.91 | 3 |
| 2 | 31086 | SINUSOTOMY FRONTAL NONOBLITERATI | 1/1/2007 | $706.62 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 31087 | SINUSTOMY FRONTAL NONOBLITERATIV | 1/1/2007 | $702.99 | 3 |
| 2 | 31090 | SINUSOTOMY COMBINED THREE OR MOR | 1/1/2007 | $598.15 | 3 |
| 2 | 31200 | ETHMOIDECTOMY INTRANASAL ANTERIO | 1/1/2007 | $376.02 | 3 |
| 2 | 31201 | ETHMOIDECTOMY; INTRANASAL TOTAL | 1/1/2007 | $476.96 | 3 |
| 2 | 31205 | ETHMOIDECTOMY; EXTRANASAL TOTAL | 1/1/2007 | $591.66 | 3 |
| 2 | 31225 | MAXILLECTOMY WITHOUT ORBITAL EXE | 1/1/2007 | $1,003.23 | 3 |
| 2 | 31230 | MAXILLECTOMY; WITH ORBITAL EXENT | 1/1/2007 | $1,118.45 | 3 |
| 2 | 31231 | NASAL ENDOSCOPY, DIAGNOSTIC, UNI | 1/1/2007 | $118.85 | 3 |
| 2 | 31233 | NASAL/SINUS ENDOSCOPY, DIAGNOSTI | 1/1/2007 | $173.61 | 3 |
| 2 | 31235 | NASAL/SINUS ENDOSCOPY, DIAGNOSTI | 1/1/2007 | $202.93 | 3 |
| 2 | 31237 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 1/1/2007 | $219.80 | 3 |
| 2 | 31238 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 1/1/2007 | $227.84 | 3 |
| 2 | 31239 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 1/1/2007 | $449.71 | 3 |
| 2 | 31240 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 1/1/2007 | $119.11 | 3 |
| 2 | 31254 | NASAL ENDOSCOPY, SURGICAL; WITH | 1/1/2007 | $206.30 | 3 |
| 2 | 31255 | NASAL ENDOSCOPY, SURGICAL; WITH | 1/1/2007 | $306.21 | 3 |
| 2 | 31256 | NASAL ENDOSCOPY, SURGICAL; WITH | 1/1/2007 | $148.95 | 3 |
| 2 | 31267 | MAXILLARY SINUS ENDOSCOPY, SURGI | 1/1/2007 | $241.34 | 3 |
| 2 | 31276 | NASAL/SINUS ENDOSCOPY, SURGICAL | 1/1/2007 | $386.40 | 3 |
| 2 | 31287 | NASAL/SINUS ENDOSCOPY, SURGICAL, | 1/1/2007 | $175.42 | 3 |
| 2 | 31288 | NASAL/SINUS ENDOSCOPY, SURGICAL, | 1/1/2007 | $203.71 | 3 |
| 2 | 31290 | NASAL/SINUS ENDOSCOPY, SURGICAL, | 1/1/2007 | $796.41 | 3 |
| 2 | 31291 | NASAL/SINUS ENDOSCOPY, SURGICAL, | 1/1/2007 | $839.48 | 3 |
| 2 | 31292 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 1/1/2007 | $690.01 | 3 |
| 2 | 31293 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 1/1/2007 | $749.44 | 3 |
| 2 | 31294 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 1/1/2007 | $868.55 | 3 |
| 2 | 31299 | UNLISTED PROCEDURE ACCESSORY SIN | 4/1/1982 | $0.01 | 5 |
| 2 | 31300 | LARYNGOTOMY (THYROTOMY LARYNGOFI | 1/1/2007 | $790.44 | 3 |
| 2 | 31320 | LARYNOTOMY (THYROTOMY LARYNOGOFI | 1/1/2007 | $416.24 | 3 |
| 2 | 31360 | LARYNGECTOMY TOTAL WITHOUT RADIC | 1/1/2007 | $913.44 | 3 |
| 2 | 31365 | LARYNGECTOMY; TOTAL WITH RADICAL | 1/1/2007 | $1,206.93 | 3 |
| 2 | 31367 | LARYNGECTOMY; SUBTOTAL SUPRAGLOT | 1/1/2007 | $1,182.28 | 3 |
| 2 | 31368 | LARYNGECTOMY; SUBTOTAL SUPRAGLOT | 1/1/2007 | $1,422.32 | 3 |
| 2 | 31370 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $1,178.39 | 3 |
| 2 | 31375 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $1,096.39 | 3 |
| 2 | 31380 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $1,103.91 | 3 |
| 2 | 31382 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $1,137.39 | 3 |
| 2 | 31390 | PHARYNGOLARYNGECTOMY WITH RADICA | 1/1/2007 | $1,405.71 | 3 |
| 2 | 31395 | PHARYNOGLARYNGECTOMY WITH RADICA | 1/1/2007 | $1,606.31 | 3 |
| 2 | 31400 | ARYTENOIDECTOMY OR ARYTENOIDOPEX | 1/1/2007 | $646.93 | 3 |
| 2 | 31420 | EPIGLOTTIDECTOMY | 1/1/2007 | $534.57 | 3 |
| 2 | 31500 | INTUBATION ENDOTRACHEAL EMERGENC | 1/1/2007 | $79.15 | 3 |
| 2 | 31502 | TRACHEOTOMY TUBE CHANGE PRIOR TO | 1/1/2007 | $26.21 | 3 |
| 2 | 31505 | LARYNGOSCOPY INDIRECT (SEPARATE | 1/1/2007 | $54.75 | 3 |
| 2 | 31510 | LARYNGOSCOPY INDIRECT (SEPARATE | 1/1/2007 | $139.87 | 3 |
| 2 | 31511 | LARYNGOSCOPY INDIRECT (SEPARATE | 1/1/2007 | $142.21 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 31512 | LARYNGOSCOPY INDIRECT (SEPARATE | 1/1/2007 | $141.69 | 3 |
| 2 | 31513 | LARYNGOSCOPY INDIRECT (SEPARATE | 1/1/2007 | $96.79 | 3 |
| 2 | 31515 | LARYNGOSCOPY DIRECT, WITH OR WIT | 1/1/2007 | $142.47 | 3 |
| 2 | 31520 | LARYNGOSCOPY DIRECT; DIAGNOSTIC | 1/1/2007 | $112.10 | 3 |
| 2 | 31525 | LAYNGOSCOPY DIRECT; DIAGNOSTIC E | 1/1/2007 | $168.42 | 3 |
| 2 | 31526 | LARYNGOSCOPY DIRECT; W/OR W/OUT | 1/1/2007 | $116.78 | 3 |
| 2 | 31527 | LARYNGOSCOPY DIRECT; WITH INSERT | 1/1/2007 | $140.39 | 3 |
| 2 | 31528 | LARYNGOSCOPY DIRECT, WITH OR WIT | 1/1/2007 | $104.32 | 3 |
| 2 | 31529 | LARYNGOSCOPY DIRECT, WITH OR WIT | 1/1/2007 | $119.63 | 3 |
| 2 | 31530 | LARYNGOSCOPY DIRECT OPERATIVE WI | 1/1/2007 | $146.10 | 3 |
| 2 | 31531 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 1/1/2007 | $159.59 | 3 |
| 2 | 31535 | LARYNGOSCOPY DIRECT OPERATIVE WI | 1/1/2007 | $140.65 | 3 |
| 2 | 31536 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 1/1/2007 | $158.30 | 3 |
| 2 | 31540 | LARYNGOSCOPY DIRECT OPERATIVE WI | 1/1/2007 | $181.65 | 3 |
| 2 | 31541 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 1/1/2007 | $199.30 | 3 |
| 2 | 31545 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 1/1/2007 | $263.39 | 3 |
| 2 | 31546 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 1/1/2007 | $401.97 | 3 |
| 2 | 31560 | LARYNGOSCOPY DIRECT OPERATIVE WI | 1/1/2007 | $234.59 | 3 |
| 2 | 31561 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 1/1/2007 | $255.87 | 3 |
| 2 | 31570 | LARYNGOSCOPY DIRECT WITH INJECTI | 1/1/2007 | $255.87 | 3 |
| 2 | 31571 | LARYNGOSCOPY, DIRECT, W/INJECTIO | 1/1/2007 | $187.36 | 3 |
| 2 | 31575 | LARYNGOSCOPY FLEXIBLE FIBERSCOPI | 1/1/2007 | $80.45 | 3 |
| 2 | 31576 | LARYNGOSCOPY FLEXIBLE FIBERSCOPI | 1/1/2007 | $149.99 | 3 |
| 2 | 31577 | LARYNGOSCOPY FLEXIBLE FIBERSCOPI | 1/1/2007 | $167.38 | 3 |
| 2 | 31578 | LARYNGOSCOPY FLEXIBLE FIBERSCOPI | 1/1/2007 | $190.99 | 3 |
| 2 | 31579 | LARYNGOSCOPY, FLEXIBLE OR RIGID | 1/1/2007 | $161.67 | 3 |
| 2 | 31580 | LARYNGOPLASTY FOR LARYNAGEAL WEB | 1/1/2007 | $760.85 | 3 |
| 2 | 31582 | LARYNGOPLASTY; FOR LARYNGEAL STE | 1/1/2007 | $1,277.00 | 3 |
| 2 | 31584 | LARYNGOPLASTY; WITH OPEN REDUCTI | 1/1/2007 | $1,025.54 | 3 |
| 2 | 31585 | TREATMENT OF CLOSED LARYNGEAL FR | 1/1/2006 | INVALID | N |
| 2 | 31586 | TREATMENT OF CLOSED LARYNGEAL FR | 1/1/2006 | INVALID | N |
| 2 | 31587 | LARYNGOPLASTY, CRICOID SPLIT | 1/1/2007 | $576.87 | 3 |
| 2 | 31588 | LARYNGOPLASTY, NOT OTHERWISE SPE | 1/1/2007 | $721.41 | 3 |
| 2 | 31590 | LARYNGEAL REINNERVATION BY NEURO | 1/1/2007 | $606.71 | 3 |
| 2 | 31595 | SECTION RECURRENT LARYNGEAL NERV | 1/1/2007 | $508.36 | 3 |
| 2 | 31599 | UNLISTED PROCEDURE LARYNX | 4/1/1982 | $0.01 | 5 |
| 2 | 31600 | TRACHEOSTOMY PLANNED (SEPARATE P | 1/1/2007 | $289.86 | 3 |
| 2 | 31601 | TRACHEOSTOMY PLANNED (SEPARATE P | 1/1/2007 | $188.14 | 3 |
| 2 | 31603 | TRACHEOSTOMY EMERGENCY PROCEDURE | 1/1/2007 | $163.23 | 3 |
| 2 | 31605 | TRACHEOSTOMY EMERGENCY PROCEDURE | 1/1/2007 | $133.90 | 3 |
| 2 | 31610 | TRACHEOSTOMY FENESTRATION PROCED | 1/1/2007 | $462.43 | 3 |
| 2 | 31611 | CONSTRUCTION OF TRACHEOESOPHAGEA | 1/1/2007 | $341.76 | 3 |
| 2 | 31612 | TRACHEAL PUNCTURE, PERCUTANEOUS | 1/1/2007 | $54.24 | 3 |
| 2 | 31613 | TRACHEOSTOMA REVISION SIMPLE WIT | 1/1/2007 | $285.71 | 3 |
| 2 | 31614 | TRACHEOSTOMA REVISION; COMPLEX W | 1/1/2007 | $426.36 | 3 |
| 2 | 31615 | TRACHEOBRONCHOSCOPY THROUGH ESTA | 1/1/2007 | $125.86 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 31620 | ENDOBRONCHIAL ULTRASOUND (EBUS) | 4/1/2005 | NC | 9 |
| 2 | 31622 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $223.95 | 3 |
| 2 | 31623 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $245.23 | 3 |
| 2 | 31624 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $228.36 | 3 |
| 2 | 31625 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $243.15 | 3 |
| 2 | 31628 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $285.97 | 3 |
| 2 | 31629 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $481.11 | 3 |
| 2 | 31630 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $151.81 | 3 |
| 2 | 31631 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $167.90 | 3 |
| 2 | 31632 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $52.42 | 3 |
| 2 | 31633 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $62.28 | 3 |
| 2 | 31635 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $260.54 | 3 |
| 2 | 31636 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $165.56 | 3 |
| 2 | 31637 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $58.91 | 3 |
| 2 | 31638 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $183.73 | 3 |
| 2 | 31640 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 1/1/2007 | $193.85 | 3 |
| 2 | 31641 | BRONCHOSCOPY, (RIGID OR FLEXIBLE | 1/1/2007 | $188.40 | 3 |
| 2 | 31643 | BRONCHOSCOPY; WITH PLACEMENT OF | 1/1/2007 | $127.67 | 3 |
| 2 | 31645 | BRONCHOSCOPY; WITH THERAPEUTIC A | 1/1/2007 | $219.80 | 3 |
| 2 | 31646 | BRONCHOSCOPY; WITH THERAPEUTIC A | 1/1/2007 | $200.59 | 3 |
| 2 | 31656 | BRONCHOSCOPY; WITH INJECTION OF | 1/1/2007 | $81.74 | 3 |
| 2 | 31700 | CATHETERIZATION TRANSGLOTIC (SEP | 1/1/2007 | INVALID | N |
| 2 | 31708 | INSTILLATION OF CONTRAST MATERIA | 1/1/2007 | INVALID | N |
| 2 | 31710 | CATHETERIZATION FOR BRONCHOGRAPH | 1/1/2007 | INVALID | N |
| 2 | 31715 | TRANSTRACHEAL INJECTION FOR BRON | 1/1/2007 | $39.44 | 3 |
| 2 | 31717 | CATHETERIZATION WITH BRONCHIAL B | 1/1/2007 | $273.25 | 3 |
| 2 | 31720 | CATHETER ASPIRATION (SEPARATE PR | 1/1/2007 | $37.89 | 3 |
| 2 | 31725 | CATHETER ASPIRATION (SEPARATE PR | 1/1/2007 | $71.36 | 3 |
| 2 | 31730 | TRANSTRACHEAL INTRODUCTION OF NE | 1/1/2007 | $136.50 | 3 |
| 2 | 31750 | TRACHEOPLASTY; CERVICAL | 1/1/2007 | $821.32 | 3 |
| 2 | 31755 | TRACHEOPLASTY; TRACHEOPHARYNGEAL | 1/1/2007 | $1,084.45 | 3 |
| 2 | 31760 | TRACHEOPLASTY; INTRATHORACIC | 1/1/2007 | $934.20 | 3 |
| 2 | 31766 | CARINAL RECONSTRUCTION | 1/1/2007 | $1,260.91 | 3 |
| 2 | 31770 | BRONCHOPLASTY GRAFT REPAIR | 1/1/2007 | $923.30 | 3 |
| 2 | 31775 | BRONCHOPLASTY; EXCISION STENOSIS | 1/1/2007 | $994.66 | 3 |
| 2 | 31780 | EXCISION TRACHEAL STENOSIS AND A | 1/1/2007 | $789.40 | 3 |
| 2 | 31781 | EXCISION TRACHEAL STENOSIS AND A | 1/1/2007 | $983.25 | 3 |
| 2 | 31785 | EXCISION OF TRACHEAL TUMOR OR CA | 1/1/2007 | $752.55 | 3 |
| 2 | 31786 | EXCISION OF TRACHEAL TUMOR OR CA | 1/1/2007 | $1,047.34 | 3 |
| 2 | 31800 | SUTURE OF TRACHEAL WOUND OR INJU | 1/1/2007 | $453.61 | 3 |
| 2 | 31805 | SUTURE OF EXTERNAL TRACHEAL WOUN | 1/1/2007 | $575.05 | 3 |
| 2 | 31820 | SURGICAL CLOSURE TRACHEOSTOMY OR | 1/1/2007 | $273.51 | 3 |
| 2 | 31825 | SURGICAL CLOSURE TRACHEOSTOMY OF | 1/1/2007 | $389.51 | 3 |
| 2 | 31830 | REVISION OF TRACHEOSTOMY SCAR | 1/1/2007 | $277.92 | 3 |
| 2 | 31899 | UNLISTED PROCEDURE TRACHEA BRONC | 4/1/1982 | $0.01 | 5 |
| 2 | 32000 | THORACENTESIS PUNCTURE OF PLEURA | 1/1/2007 | $121.45 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 32002 | THORACENTESIS WITH INSERTION OF | 1/1/2007 | $143.50 | 3 |
| 2 | 32005 | CHEMICAL PLEURODESIS (EG FOR REC | 1/1/2007 | $230.70 | 3 |
| 2 | 32019 | INSERTION OF INDWELLING TUNNELED | 1/1/2007 | $638.63 | 3 |
| 2 | 32020 | TUBE THORACOSTOMY W/WO WATER SEA | 1/1/2007 | $149.21 | 3 |
| 2 | 32035 | THORACOSTOMY WITH RIB RESECTION | 1/1/2007 | $409.75 | 3 |
| 2 | 32036 | THORACOSTOMY; WITH OPEN FLAP DRA | 1/1/2007 | $455.42 | 3 |
| 2 | 32095 | THORACOTOMY LIMITED FOR BIOPSY O | 1/1/2007 | $387.95 | 3 |
| 2 | 32100 | THORACOTOMY MAJOR WITH EXPLORATI | 1/1/2007 | $656.28 | 3 |
| 2 | 32110 | THORACOTOMY MAJOR; WITH CONTROL | 1/1/2007 | $958.59 | 3 |
| 2 | 32120 | THORACOTOMY MAJOR; FOR POSTOPERA | 1/1/2007 | $525.23 | 3 |
| 2 | 32124 | THORACOTOMY MAJOR; WITH OPEN INT | 1/1/2007 | $566.23 | 3 |
| 2 | 32140 | THORACOTOMY MAJOR; WITH CYST(S) | 1/1/2007 | $611.64 | 3 |
| 2 | 32141 | THORACOTOMY MAJOR; WITH EXCISION | 1/1/2007 | $611.12 | 3 |
| 2 | 32150 | THORACOTOMY MAJOR; WITH REMOVAL | 1/1/2007 | $616.31 | 3 |
| 2 | 32151 | THORACOTOMY MAJOR; WITH REMOVAL | 1/1/2007 | $629.03 | 3 |
| 2 | 32160 | THORACOTOMY MAJOR; WITH CARDIAC | 1/1/2007 | $412.09 | 3 |
| 2 | 32200 | PNEUMONOSTOMY WITH OPEN DRAINAGE | 1/1/2007 | $675.48 | 3 |
| 2 | 32201 | PNEUMONOSTOMY; WITH PERCUTANEOUS | 1/1/2007 | $648.49 | 3 |
| 2 | 32215 | PLEURAL SCARIFICATION FOR REPEAT | 1/1/2007 | $516.66 | 3 |
| 2 | 32220 | DECORTICATION PULMONARY (SEPARAT | 1/1/2007 | $1,051.23 | 3 |
| 2 | 32225 | DECORTICATION PULMONARY (SEPARAT | 1/1/2007 | $614.24 | 3 |
| 2 | 32310 | PLEURECTOMY, PARIETAL (SEPARATE | 1/1/2007 | $592.18 | 3 |
| 2 | 32320 | DECORTICATION AND PARIETAL PLEUR | 1/1/2007 | $1,029.18 | 3 |
| 2 | 32400 | BIOPSY, PLEURA; PERCUTANEOUS NEE | 1/1/2007 | $103.54 | 3 |
| 2 | 32402 | BIOPSY PLEURA; OPEN | 1/1/2007 | $356.55 | 3 |
| 2 | 32405 | BIOPSY, LUNG OR MEDIASTINUM, PER | 1/1/2007 | $70.32 | 3 |
| 2 | 32420 | PNEUMONOCENTESIS, PUNCTURE OF LU | 1/1/2007 | $77.33 | 3 |
| 2 | 32440 | REMOVAL OF LUNG, TOTAL PNEUMONEC | 1/1/2007 | $1,078.74 | 3 |
| 2 | 32442 | REMOVAL OF LUNG, TOTAL PNEUMONEC | 1/1/2007 | $1,163.60 | 3 |
| 2 | 32445 | REMOVAL OF LUNG, TOTAL PNEUMONEC | 1/1/2007 | $1,112.22 | 3 |
| 2 | 32480 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $1,019.58 | 3 |
| 2 | 32482 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $1,078.74 | 3 |
| 2 | 32484 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $910.85 | 3 |
| 2 | 32486 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $1,055.39 | 3 |
| 2 | 32488 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $1,123.38 | 3 |
| 2 | 32491 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/1997 | NC | 9 |
| 2 | 32500 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $975.98 | 3 |
| 2 | 32501 | RESECTION AND REPAIR OF PORTION | 1/1/2007 | $178.28 | 3 |
| 2 | 32503 | RESECTION OF APICAL LUNG TUMOR, | 1/1/2007 | $1,284.01 | 3 |
| 2 | 32504 | RESECTION OF APICAL LUNG TUMOR, | 1/1/2007 | $1,468.51 | 3 |
| 2 | 32520 | RESECTION OF LUNG WITH RESECTION | 1/1/2006 | INVALID | N |
| 2 | 32522 | RESECTION OF LUNG; WITH RECONSTR | 1/1/2006 | INVALID | N |
| 2 | 32525 | RESECTION OF LUNG; WITH MAJOR RE | 1/1/2006 | INVALID | N |
| 2 | 32540 | EXTRAPLEURAL ENUCLEATION OF EMPY | 1/1/2007 | $683.78 | 3 |
| 2 | 32601 | THORACOSCOPY, DIAGNOSTIC (SEP PR | 1/1/2007 | $223.43 | 3 |
| 2 | 32602 | THORACOSCOPY, DIAGNOSTIC (SEP PR | 1/1/2007 | $242.63 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 32603 | THORACOSCOPY, DIAGNOSTIC (SEP PR | 1/1/2007 | $310.88 | 3 |
| 2 | 32604 | THORACOSCOPY, DIAGNOSTIC (SEP PR | 1/1/2007 | $349.81 | 3 |
| 2 | 32605 | THORACOSCOPY, DIAGNOSTIC (SEP PR | 1/1/2007 | $281.04 | 3 |
| 2 | 32606 | THORACOSCOPY, DIAGNOSTIC (SEP PR | 1/1/2007 | $336.05 | 3 |
| 2 | 32650 | THORACOSCOPY, SURGICAL; WITH PLE | 1/1/2007 | $495.39 | 3 |
| 2 | 32651 | THORACOSCOPY, SURGICAL; WITH PAR | 1/1/2007 | $570.90 | 3 |
| 2 | 32652 | THORACOSCOPY, SURGICAL; WITH TOT | 1/1/2007 | $817.94 | 3 |
| 2 | 32653 | THORACOSCOPY, SURGICAL; WITH REM | 1/1/2007 | $563.63 | 3 |
| 2 | 32654 | THORACOSCOPY, SURGICAL; WITH CON | 1/1/2007 | $560.52 | 3 |
| 2 | 32655 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $576.87 | 3 |
| 2 | 32656 | THORACOSCOPY, SURGICAL; WITH PAR | 1/1/2007 | $590.10 | 3 |
| 2 | 32657 | THORACOSCOPY, SURGICAL; WITH WED | 1/1/2007 | $605.15 | 3 |
| 2 | 32658 | THORACOSCOPY, SURGICAL; WITH REM | 1/1/2007 | $536.39 | 3 |
| 2 | 32659 | THORACOSCOPY, SURGICAL; WITH CRE | 1/1/2007 | $536.13 | 3 |
| 2 | 32660 | THORACOSCOPY, SURGICAL; WITH TOT | 1/1/2007 | $752.29 | 3 |
| 2 | 32661 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $595.81 | 3 |
| 2 | 32662 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $712.07 | 3 |
| 2 | 32663 | THORACOSCOPY, SURGICAL; WITH LOB | 1/1/2007 | $829.10 | 3 |
| 2 | 32664 | THORACOSCOPY, SURGICAL; WITH THO | 1/1/2007 | $626.69 | 3 |
| 2 | 32665 | THORACOSCOPY, SURGICAL; WITH ESO | 1/1/2007 | $670.03 | 3 |
| 2 | 32800 | REPAIR LUNG HERNIA THROUGH CHEST | 1/1/2007 | $598.93 | 3 |
| 2 | 32810 | CLOSURE OF CHEST WALL FOLLOWING | 1/1/2007 | $583.88 | 3 |
| 2 | 32815 | OPEN CLOSURE OF MAJOR BRONCHIAL | 1/1/2007 | $970.27 | 3 |
| 2 | 32820 | MAJOR RECONSTRUCTION CHEST WALL | 1/1/2007 | $938.61 | 3 |
| 2 | 32850 | DONOR PNEUMONECTOMY (INCL COLD P | 2/1/1994 | NC | 9 |
| 2 | 32851 | LUNG TRANSPLANT, SINGLE; WITHOUT | 1/1/2007 | $1,865.03 | 3 |
| 2 | 32852 | LUNG TRANSPLANT, SINGLE; WITH CA | 1/1/2007 | $2,101.95 | 3 |
| 2 | 32853 | LUNG TRANSPLANT, DOUBLE (BILATER | 1/1/2007 | $2,248.05 | 3 |
| 2 | 32854 | LUNG TRANSPLANT, DOUBLE (BILATER | 1/1/2007 | $2,411.53 | 3 |
| 2 | 32855 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 2 | 32856 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 2 | 32900 | RESECTION OF RIBS EXTRAPLEURAL A | 1/1/2007 | $858.43 | 3 |
| 2 | 32905 | THORACOPLASTY SCHEDE TYPE OR EXT | 1/1/2007 | $883.08 | 3 |
| 2 | 32906 | THORACOPLASTY SCHEDE TYPE OR EXT | 1/1/2007 | $1,110.40 | 3 |
| 2 | 32940 | PNEUMONOLYSIS EXTRAPERIOSTEAL IN | 1/1/2007 | $824.69 | 3 |
| 2 | 32960 | PNEUMOTHORAX THERAPEUTIC INTRAPL | 1/1/2007 | $97.05 | 3 |
| 2 | 32997 | TOTAL LUNG LAVAGE (UNILATERAL) | 1/1/2007 | $219.54 | 3 |
| 2 | 32998 | ABLATION THERAPY FOR REDUCTION O | 1/1/2007 | NC | 9 |
| 2 | 32999 | UNLISTED PROCEDURE LUNGS AND PLE | 2/1/1994 | $0.01 | 5 |
| 2 | 33010 | PERICARDIOCENTESIS INITIAL | 1/1/2007 | $82.00 | 3 |
| 2 | 33011 | PERICARDIOCENTESIS; SUBSEQUENT | 1/1/2007 | $83.04 | 3 |
| 2 | 33015 | TUBE PERICARDIOSTOMY | 1/1/2007 | $321.78 | 3 |
| 2 | 33020 | PERICARDIOTOMY FOR REMOVAL OF CL | 1/1/2007 | $549.62 | 3 |
| 2 | 33025 | CREATION OF PERICARDIAL WINDOW O | 1/1/2007 | $525.23 | 3 |
| 2 | 33030 | PERICARDIECTOMY, SUBTOTAL OR COM | 1/1/2007 | $806.01 | 3 |
| 2 | 33031 | PERICARDIECTOMY, SUBTOTAL OR COM | 1/1/2007 | $906.95 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 33050 | EXCISION OF PERICARDIAL CYST OR | 1/1/2007 | $631.62 | 3 |
| 2 | 33120 | EXCISION OF INTRACARDIAC TUMOR R | 1/1/2007 | $1,033.33 | 3 |
| 2 | 33130 | RESECTION OF EXTERNAL CARDIAC TU | 1/1/2007 | $895.28 | 3 |
| 2 | 33140 | TRANSMYOCARDIAL LASER REVASCULAR | 1/1/2007 | $875.29 | 3 |
| 2 | 33141 | TRANSMYOCARDIAL LASER REVASCULAR | 1/1/2007 | $184.25 | 3 |
| 2 | 33200 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | INVALID | N |
| 2 | 33201 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | INVALID | N |
| 2 | 33202 | INSERTION OF EPICARDIAL ELECTROD | 1/1/2007 | $547.03 | 3 |
| 2 | 33203 | INSERTION OF EPICARIDAL ELECTROD | 1/1/2007 | $560.52 | 3 |
| 2 | 33206 | INSERTION OR REPLACEMENT OF PERM | 1/1/2007 | $302.32 | 3 |
| 2 | 33207 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | $344.88 | 3 |
| 2 | 33208 | INSERTION OR REPLACEMENT OF PERM | 1/1/2007 | $349.29 | 3 |
| 2 | 33210 | INSERTION OR REPLACEMENT OF TEMP | 1/1/2007 | $122.74 | 3 |
| 2 | 33211 | INSERTION OR REPLACEMENT OF TEMP | 1/1/2007 | $127.41 | 3 |
| 2 | 33212 | INSERTION OR REPLACEMENT OF PACE | 1/1/2007 | $241.59 | 3 |
| 2 | 33213 | INSERTION OR REPLACEMENT OF PACE | 1/1/2007 | $273.51 | 3 |
| 2 | 33214 | UPGRADE OF IMPLANTED PACEMAKER S | 1/1/2007 | $343.06 | 3 |
| 2 | 33215 | REPOSITIONING OF PREVIOUSLY IMPL | 1/1/2007 | $215.64 | 3 |
| 2 | 33216 | INSERTION OF A TRANSVENOUS ELECT | 1/1/2007 | $268.32 | 3 |
| 2 | 33217 | INSERTION, REPLACEMENT OR REPOSI | 1/1/2007 | $269.10 | 3 |
| 2 | 33218 | REPAIR OF PACEMAKER ELECTRODE(S) | 1/1/2007 | $262.35 | 3 |
| 2 | 33220 | REPAIR OF PACEMAKER ELECTRODE(S) | 1/1/2007 | $263.65 | 3 |
| 2 | 33222 | REVISION OR RELACATION OF SKIN P | 1/1/2007 | $250.94 | 3 |
| 2 | 33223 | REVISION OR RELOCATION OF SKIN P | 1/1/2007 | $298.43 | 3 |
| 2 | 33224 | INSERTION OF PACING ELECTRODE, C | 1/1/2007 | $352.66 | 3 |
| 2 | 33225 | INSERTION OF PACING ELECTRODE, C | 1/1/2007 | $312.44 | 3 |
| 2 | 33226 | REPOSITIONING OF PREVIOUSLY IMPL | 1/1/2007 | $339.95 | 3 |
| 2 | 33233 | REMOVAL OF PERMANENT PACEMAKER P | 1/1/2007 | $176.20 | 3 |
| 2 | 33234 | REMOVAL OF TRANSVENOUS PACEMAKER | 1/1/2007 | $344.88 | 3 |
| 2 | 33235 | REMOVAL OF TRANSVENOUS PACEMAKER | 1/1/2007 | $439.85 | 3 |
| 2 | 33236 | REMOVAL OF PERMANENT EPICARDIAL | 1/1/2007 | $563.37 | 3 |
| 2 | 33237 | REMOVAL OF PERMANENT EPICARDIAL | 1/1/2007 | $598.93 | 3 |
| 2 | 33238 | REMOVAL OF PERMANENT TRANSVENOUS | 1/1/2007 | $660.17 | 3 |
| 2 | 33240 | INSERTION OR REPLACEMENT OF IMPL | 1/1/2007 | $326.71 | 3 |
| 2 | 33241 | REMOVAL OF IMPLANTABLE CARDIOVER | 1/1/2007 | $165.82 | 3 |
| 2 | 33243 | REMOVAL OF IMPLANTABLE CARDIOVER | 1/1/2007 | $939.13 | 3 |
| 2 | 33244 | REMOVAL OF IMPLANTABLE CARDIOVER | 1/1/2007 | $613.72 | 3 |
| 2 | 33245 | IMPLANTATION OR REPLACEMENT OF I | 1/1/2007 | INVALID | N |
| 2 | 33246 | IMPLANT/REPLACE. OF IMPLANT. CAR | 1/1/2007 | INVALID | N |
| 2 | 33249 | INSERTION OR REPLACEMENT OF IMPL | 1/1/2007 | $606.19 | 3 |
| 2 | 33250 | OPER ABLATION OF SUPRAVENTRICULA | 1/1/2007 | $935.50 | 3 |
| 2 | 33251 | OPER ABLATION OF SUPRAVENTRICULA | 1/1/2007 | $1,041.11 | 3 |
| 2 | 33253 | OPERATIVE INCISIONS AND RECONSTR | 1/1/2007 | INVALID | N |
| 2 | 33254 | OPERATIVE TISSUE ABLATION AND RE | 1/1/2007 | $956.78 | 3 |
| 2 | 33255 | OPERATIVE TISSUE ABLATION AND RE | 1/1/2007 | $1,152.70 | 3 |
| 2 | 33256 | OPERATIVE TISSUE ABLATION AND RE | 1/1/2007 | $1,377.69 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 33261 | OPERATIVE ABLATION OF VENTRICULA | 1/1/2007 | $1,040.34 | 3 |
| 2 | 33265 | ENDOSCOPY, SURGICAL; OPERATIVE T | 1/1/2007 | $956.78 | 3 |
| 2 | 33266 | ENDOSCOPY, SURGICAL; OPERATIVE T | 1/1/2007 | $1,310.73 | 3 |
| 2 | 33282 | IMPLANTATION OF PATIENT-ACTIVATE | 1/1/2007 | $218.50 | 3 |
| 2 | 33284 | REMOVAL OF AN IMPLANTABLE, PATIE | 1/1/2007 | $160.37 | 3 |
| 2 | 33300 | REPAIR OF CARDIAC WOUND WITHOUT | 1/1/2007 | $773.31 | 3 |
| 2 | 33305 | REPAIR OF CARDIAC WOUND; WITH CA | 1/1/2007 | $912.66 | 3 |
| 2 | 33310 | CARDIOTOMY EXPLORATORY (INCLUDES | 1/1/2007 | $795.89 | 3 |
| 2 | 33315 | CARDIOTOMY EXPLORATORY (INCLUDES | 1/1/2007 | $947.69 | 3 |
| 2 | 33320 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $702.47 | 3 |
| 2 | 33321 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $853.24 | 3 |
| 2 | 33322 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $877.89 | 3 |
| 2 | 33330 | INSERTION OF GRAFT, AORTA OR GRE | 1/1/2007 | $895.28 | 3 |
| 2 | 33332 | INSERTION OF GRAFT, AORTA OR GRE | 1/1/2007 | $972.61 | 3 |
| 2 | 33335 | INSERTION OF GRAFT; WITH CARDIOP | 1/1/2007 | $1,235.22 | 3 |
| 2 | 33400 | VALVULOPLASTY, AORTIC VALVE, OPE | 1/1/2007 | $1,252.61 | 3 |
| 2 | 33401 | VALVULOPLASTY, AORTIC VALVE; OPE | 1/1/2007 | $1,063.17 | 3 |
| 2 | 33403 | VALVULOPLASTY, AORTIC VALVE; USI | 1/1/2007 | $1,108.84 | 3 |
| 2 | 33404 | CONSTRUCTION OF APICAL-AORTIC CO | 1/1/2007 | $1,230.03 | 3 |
| 2 | 33405 | REPLACEMENT, AORTIC VALVE, WITH | 1/1/2007 | $1,520.67 | 3 |
| 2 | 33406 | REPLACEMENT, AORTIC VALVE, WITH | 1/1/2007 | $1,610.20 | 3 |
| 2 | 33410 | REPLACEMENT, AORTIC VALVE, W/CAR | 1/1/2007 | $1,394.03 | 3 |
| 2 | 33411 | REPLACEMENT AORTIC VALVE WITH AO | 1/1/2007 | $1,568.68 | 3 |
| 2 | 33412 | REPLACEMENT AORTIC VALVE WITH TR | 1/1/2007 | $1,784.58 | 3 |
| 2 | 33413 | REPLACEMENT, AORTIC VALVE; BY TR | 1/1/2007 | $1,837.52 | 3 |
| 2 | 33414 | REPAIR OF LEFT VENTRICULAR OUTFL | 1/1/2007 | $1,272.33 | 3 |
| 2 | 33415 | RESECTION OR INCISION OF SUBVALV | 1/1/2007 | $1,123.38 | 3 |
| 2 | 33416 | VENTRICULOMYOTOMY (-MYECTOMY) FO | 1/1/2007 | $1,255.98 | 3 |
| 2 | 33417 | AORTOPLASTY (GUSSET) FOR SUPRAVA | 1/1/2007 | $1,199.67 | 3 |
| 2 | 33420 | VALVOTOMY MITRAL VALVE; CLOSED H | 1/1/2007 | $884.12 | 3 |
| 2 | 33422 | VALVOTOMY MITRAL VALVE; OPEN HEA | 1/1/2007 | $1,129.34 | 3 |
| 2 | 33425 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $1,144.65 | 3 |
| 2 | 33426 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $1,430.88 | 3 |
| 2 | 33427 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $1,697.91 | 3 |
| 2 | 33430 | REPLACEMENT, MITRAL VALVE, WITH | 1/1/2007 | $1,449.83 | 3 |
| 2 | 33460 | VALVECTOMY, TRICUSPID VALVE, WIT | 1/1/2007 | $994.66 | 3 |
| 2 | 33463 | VALVULOPLASTY, TRICUSPID VALVE; | 1/1/2007 | $1,100.02 | 3 |
| 2 | 33464 | VALVULOPLASTY, TRICUSPID VALVE; | 1/1/2007 | $1,167.49 | 3 |
| 2 | 33465 | REPLACEMENT, TRICUSPID VALVE, WI | 1/1/2007 | $1,197.07 | 3 |
| 2 | 33468 | TRICUSPID VALVE REPOSITIONING AN | 1/1/2007 | $1,240.93 | 3 |
| 2 | 33470 | VALVOTOMY, PULMONARY VALVE, CLOS | 1/1/2007 | $844.15 | 3 |
| 2 | 33471 | VALVOTOMY, PULMONARY VALVE, CLOS | 1/1/2007 | $918.11 | 3 |
| 2 | 33472 | VALVOTOMY, PULMONARY VALVE, OPEN | 1/1/2007 | $977.02 | 3 |
| 2 | 33474 | VALVOTOMY PULMONARY VALVE (COMMI | 1/1/2007 | $963.52 | 3 |
| 2 | 33475 | REPLACEMENT, PULMONARY VALVE | 1/1/2007 | $1,382.62 | 3 |
| 2 | 33476 | RIGHT VENTRICULAR RESECTION FOR | 1/1/2007 | $1,041.37 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 33478 | OUTFLOW TRACT AUGMENTATION (GUSS | 1/1/2007 | $1,133.24 | 3 |
| 2 | 33496 | REPAIR OF NON-STRUCTURAL PROSTHE | 1/1/2007 | $1,144.65 | 3 |
| 2 | 33500 | REPAIR OF CORONARY ARTERIOVENOUS | 1/1/2007 | $1,060.32 | 3 |
| 2 | 33501 | REPAIR OF CORONARY ARTERIOVENOUS | 1/1/2007 | $725.30 | 3 |
| 2 | 33502 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $910.85 | 3 |
| 2 | 33503 | ANOMALOUS CORONARY ARTERY; GRAFT | 1/1/2007 | $863.62 | 3 |
| 2 | 33504 | ANOMALOUS CORONARY ARTERY; GRAFT | 1/1/2007 | $1,033.07 | 3 |
| 2 | 33505 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $1,087.82 | 3 |
| 2 | 33506 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $1,419.47 | 3 |
| 2 | 33507 | REPAIR OF ANOMALOUS AORTIC ORIGI | 1/1/2007 | $1,238.59 | 3 |
| 2 | 33508 | ENDOSCOPY, SURGICAL, INCLUDING V | 1/1/2007 | $11.68 | 3 |
| 2 | 33510 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $1,290.75 | 3 |
| 2 | 33511 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $1,339.80 | 3 |
| 2 | 33512 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $1,402.86 | 3 |
| 2 | 33513 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $1,418.17 | 3 |
| 2 | 33514 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $1,441.78 | 3 |
| 2 | 33516 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $1,528.71 | 3 |
| 2 | 33517 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $98.61 | 3 |
| 2 | 33518 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $185.54 | 3 |
| 2 | 33519 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $271.96 | 3 |
| 2 | 33521 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $359.15 | 3 |
| 2 | 33522 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $447.38 | 3 |
| 2 | 33523 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $534.31 | 3 |
| 2 | 33530 | REOPERATION, CORONARY ARTERY BYP | 1/1/2007 | $224.47 | 3 |
| 2 | 33533 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $1,323.97 | 3 |
| 2 | 33534 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $1,416.87 | 3 |
| 2 | 33535 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $1,495.76 | 3 |
| 2 | 33536 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $1,588.14 | 3 |
| 2 | 33542 | MYOCARDIAL RESECTION (EG VENTRIC | 1/1/2007 | $1,199.15 | 3 |
| 2 | 33545 | REPAIR OF POSTINFARCTION VENTRIC | 1/1/2007 | $1,494.20 | 3 |
| 2 | 33548 | SURGICAL VENTRICULAR RESTORATION | 4/1/2006 | NC | 9 |
| 2 | 33572 | CORONARY ENDARTERECTOMY, OPEN, A | 1/1/2007 | $169.71 | 3 |
| 2 | 33600 | CLOSURE OF ATRIOVENTRICULAR VALV | 1/1/2007 | $1,204.86 | 3 |
| 2 | 33602 | CLOSURE OF SEMILUNAR VALVE (AORT | 1/1/2007 | $1,162.30 | 3 |
| 2 | 33606 | ANASTOMOSIS OF PULMONARY ARTERY | 1/1/2007 | $1,266.36 | 3 |
| 2 | 33608 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $1,295.16 | 3 |
| 2 | 33610 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $1,265.06 | 3 |
| 2 | 33611 | REPAIR OF DOUBLE OUTLET RIGHT VE | 1/1/2007 | $1,361.86 | 3 |
| 2 | 33612 | REPAIR OF DOUBLE OUTLET RIGHT VE | 1/1/2007 | $1,438.15 | 3 |
| 2 | 33615 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $1,334.87 | 3 |
| 2 | 33617 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $1,521.19 | 3 |
| 2 | 33619 | REPAIR OF SINGLE VENTRICLE WITH | 1/1/2007 | $1,874.37 | 3 |
| 2 | 33641 | REPAIR ATRIAL SEPTAL DEFECT, SEC | 1/1/2007 | $886.97 | 3 |
| 2 | 33645 | DIRECT OR PATCH CLOSURE SINUS VE | 1/1/2007 | $1,047.34 | 3 |
| 2 | 33647 | REPAIR OF ATRIAL SEPTAL DEFECT A | 1/1/2007 | $1,188.77 | 3 |
| 2 | 33660 | REPAIR OF INCOMPLETE OR PARTIAL | 1/1/2007 | $1,244.56 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 33665 | REPAIR OF INTERMEDIATE OR TRANSI | 1/1/2007 | $1,204.60 | 3 |
| 2 | 33670 | REPAIR OF COMPLETE ATRIOVENTRICU | 1/1/2007 | $1,370.16 | 3 |
| 2 | 33675 | CLOSURE OF MULTIPLE VENTRICULAR | 1/1/2007 | $1,521.71 | 3 |
| 2 | 33676 | CLOSURE OF MULTIPLE VENTRICULAR | 1/1/2007 | $1,569.46 | 3 |
| 2 | 33677 | CLOSURE OF MULTIPLE VENTRICULAR | 1/1/2007 | $1,631.48 | 3 |
| 2 | 33681 | CLOSURE OF VENTRICULAR SEPTAL DE | 1/1/2007 | $1,290.23 | 3 |
| 2 | 33684 | CLOSURE VENTRICULAR SEPTAL DEFEC | 1/1/2007 | $1,210.57 | 3 |
| 2 | 33688 | CLOSURE VENTRICULAR SEPTAL DEFEC | 1/1/2007 | $1,188.25 | 3 |
| 2 | 33690 | BANDING OF PULMONARY ARTERY | 1/1/2007 | $821.84 | 3 |
| 2 | 33692 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $1,277.52 | 3 |
| 2 | 33694 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $1,387.55 | 3 |
| 2 | 33697 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $1,425.69 | 3 |
| 2 | 33702 | REPAIR SINUS OF VALSALVA FISTULA | 1/1/2007 | $1,109.88 | 3 |
| 2 | 33710 | REPAIR SINUS OF VALSALVA FISTULA | 1/1/2007 | $1,247.94 | 3 |
| 2 | 33720 | REPAIR SINUS OF VALSALVA ANEURYS | 1/1/2007 | $1,107.29 | 3 |
| 2 | 33722 | CLOSURE OF AORTICO-LEFT VENTRICU | 1/1/2007 | $1,130.38 | 3 |
| 2 | 33724 | REPAIR OF ISOLATED PARTIAL ANOMA | 1/1/2007 | $1,092.75 | 3 |
| 2 | 33726 | REPAIR OF PULMONARY VENOUS STENO | 1/1/2007 | $1,441.00 | 3 |
| 2 | 33730 | COMPLETE REPAIR OF ANOMALOUS VEN | 1/1/2007 | $1,384.95 | 3 |
| 2 | 33732 | REPAIR OF COR TRIATRIATUM OR SUP | 1/1/2007 | $1,173.20 | 3 |
| 2 | 33735 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $836.89 | 3 |
| 2 | 33736 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $997.52 | 3 |
| 2 | 33737 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $932.38 | 3 |
| 2 | 33750 | SHUNT SUBCLAVIAN TO PULMONARY AR | 1/1/2007 | $850.64 | 3 |
| 2 | 33755 | SHUNT; ASCENDING AORTA TO PULMON | 1/1/2007 | $878.15 | 3 |
| 2 | 33762 | SHUNT; DESCENDING AORTA TO PULMO | 1/1/2007 | $910.07 | 3 |
| 2 | 33764 | SHUNT CENTRAL WITH PROSTHETIC GR | 1/1/2007 | $908.51 | 3 |
| 2 | 33766 | SHUNT; SUPERIOR VENA CAVA TO PUL | 1/1/2007 | $989.21 | 3 |
| 2 | 33767 | SHUNT; SUPERIOR VENA CAVA TO PUL | 1/1/2007 | $1,038.52 | 3 |
| 2 | 33768 | ANASTOMOSIS, CAVOPULMONARY, SECO | 1/1/2007 | $307.77 | 3 |
| 2 | 33770 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $1,489.01 | 3 |
| 2 | 33771 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $1,367.05 | 3 |
| 2 | 33774 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $1,308.66 | 3 |
| 2 | 33775 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $1,353.55 | 3 |
| 2 | 33776 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $1,424.91 | 3 |
| 2 | 33777 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $1,415.31 | 3 |
| 2 | 33778 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $1,636.41 | 3 |
| 2 | 33779 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $1,413.76 | 3 |
| 2 | 33780 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $1,673.78 | 3 |
| 2 | 33781 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $1,445.93 | 3 |
| 2 | 33786 | TOTAL REPAIR TRUNCUS ARTERIOSUS | 1/1/2007 | $1,593.07 | 3 |
| 2 | 33788 | REIMPLANTATION OF AN ANOMALOUS P | 1/1/2007 | $1,104.95 | 3 |
| 2 | 33800 | AORTIC SUSPENSION FOR TRACHEAL D | 1/1/2007 | $695.46 | 3 |
| 2 | 33802 | DIVISION OF ABERRANT VESSEL (VAS | 1/1/2007 | $756.18 | 3 |
| 2 | 33803 | DIVISION OF ABERRANT VESSEL (VAS | 1/1/2007 | $844.67 | 3 |
| 2 | 33813 | OBLITERATION OF AORTOPULMONARY S | 1/1/2007 | $899.95 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 33814 | OBLITERATION OF AORTOPULMONARY S | 1/1/2007 | $1,096.39 | 3 |
| 2 | 33820 | REPAIR OF PATENT DUCTUS ARTERIOS | 1/1/2007 | $700.39 | 3 |
| 2 | 33822 | PATENT DUCTUS ARTERIOSUS; DIVISI | 1/1/2007 | $750.99 | 3 |
| 2 | 33824 | PATENT DUCTUS ARTERIOSUS; DIVISI | 1/1/2007 | $840.26 | 3 |
| 2 | 33840 | EXCISION OF COARCTATION OF AORTA | 1/1/2007 | $858.17 | 3 |
| 2 | 33845 | EXCISION OF COARCTATION OF AORTA | 1/1/2007 | $951.85 | 3 |
| 2 | 33851 | EXCIS OF COARCTATION OF AORTA,W/ | 1/1/2007 | $911.36 | 3 |
| 2 | 33852 | REPAIR OF HYPOPLASTIC OR INTERRU | 1/1/2007 | $965.60 | 3 |
| 2 | 33853 | REPAIR OF HYPOPLASTIC OR INTERRU | 1/1/2007 | $1,323.45 | 3 |
| 2 | 33860 | ASCENDING AORTA GRAFT, W/CARDIOP | 1/1/2007 | $1,561.67 | 3 |
| 2 | 33861 | ASCENDING AORTA GRAFT, WITH CORO | 1/1/2007 | $1,714.00 | 3 |
| 2 | 33863 | ASCENDING AORTA GRAFT, WITH AORT | 1/1/2007 | $1,822.73 | 3 |
| 2 | 33870 | TRANSVERSE ARCH GRAFT, WITH CARD | 1/1/2007 | $1,789.51 | 3 |
| 2 | 33875 | DESCENDING THORACIC AORTA GRAFT | 1/1/2007 | $1,349.92 | 3 |
| 2 | 33877 | REPAIR OF THORACOABDOMINAL AORTI | 1/1/2007 | $1,682.08 | 3 |
| 2 | 33880 | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2007 | $1,278.04 | 3 |
| 2 | 33881 | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2007 | $1,097.94 | 3 |
| 2 | 33883 | PLACEMENT OF PROXIMAL EXTENSION | 1/1/2007 | $812.49 | 3 |
| 2 | 33884 | PLACEMENT OF PROXIMAL EXTENSION | 1/1/2007 | $302.06 | 3 |
| 2 | 33886 | PLACEMENT OF DISTAL EXTENSION PR | 1/1/2007 | $701.69 | 3 |
| 2 | 33889 | OPEN SUBCLAVIAN TO CAROTID ARTER | 1/1/2007 | $604.12 | 3 |
| 2 | 33891 | BYPASS GRAFT, W/OTHER THAN VEIN, | 1/1/2007 | $770.72 | 3 |
| 2 | 33910 | PULMONARY ARTERY EMBOLECTOMY; WI | 1/1/2007 | $1,030.22 | 3 |
| 2 | 33915 | PULMONARY ARTERY EMBOLECTOMY; WI | 1/1/2007 | $832.74 | 3 |
| 2 | 33916 | PULMONARY ENDARTERECTOMY WITH OR | 1/1/2007 | $1,059.28 | 3 |
| 2 | 33917 | REPAIR OF PULMONARY ARTERY STENO | 1/1/2007 | $1,047.60 | 3 |
| 2 | 33918 | REPAIR OF PULMONARY ATRESIA WITH | 1/1/2006 | INVALID | N |
| 2 | 33919 | REPAIR OF PULMONARY ATRESIA WITH | 1/1/2006 | INVALID | N |
| 2 | 33920 | REPAIR OF PULMONARY ATRESIA WITH | 1/1/2007 | $1,300.87 | 3 |
| 2 | 33922 | TRANSECTION OF PULMONARY ARTERY | 1/1/2007 | $973.13 | 3 |
| 2 | 33924 | LIGATION AND TAKEDOWN OF A SYSTE | 1/1/2007 | $211.75 | 3 |
| 2 | 33925 | REPAIR OF PULMONARY ARTERY ARBOR | 1/1/2007 | $1,266.36 | 3 |
| 2 | 33926 | REPAIR OF PULMONARY ARTERY ARBOR | 1/1/2007 | $1,710.88 | 3 |
| 2 | 33930 | DONOR CARDIECTOMY-PNEUMONECTOMY | 8/1/1986 | NC | 9 |
| 2 | 33933 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 2 | 33935 | HEART LUNG TRANSPLANT WITH RECIP | 1/1/2007 | $2,562.56 | 3 |
| 2 | 33940 | DONOR CARDIECTOMY (INCLUDING COL | 7/17/1987 | NC | 9 |
| 2 | 33944 | BACKBENCH STANDARD PREP OF CADAV | 4/26/2006 | $580.89 | 3 |
| 2 | 33945 | HEART TRANSPLANT WITH OR WITHOUT | 1/1/2007 | $1,809.49 | 3 |
| 2 | 33960 | PROLONGED EXTRACORPOREAL CIRCULA | 1/1/2007 | $698.31 | 3 |
| 2 | 33961 | PROLONGED EXTRACORPOREAL CIRCULA | 1/1/2007 | $399.89 | 3 |
| 2 | 33967 | INSERTION OF INTRA-AORTIC BALLOO | 1/1/2007 | $182.69 | 3 |
| 2 | 33968 | REMOVAL OF INTRA-AORTIC BALLOON | 1/1/2007 | $24.39 | 3 |
| 2 | 33970 | INSERTION OF INTRA-AORTIC BALLOO | 1/1/2007 | $255.61 | 3 |
| 2 | 33971 | REMOVAL OF INTRA-AORTIC BALLOON | 1/1/2007 | $439.85 | 3 |
| 2 | 33973 | INSERTION OF INTRA-AORTIC BALLOO | 1/1/2007 | $371.86 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 33974 | REMOVAL OF INTRA-AORTIC BALLOON | 1/1/2007 | $623.32 | 3 |
| 2 | 33975 | INSERTION OF VENTRICULAR ASSIST | 1/1/2007 | $787.06 | 3 |
| 2 | 33976 | INSERTION OF VENTRICULAR ASSIST | 1/1/2007 | $876.85 | 3 |
| 2 | 33977 | REMOVAL OF VENTRICULAR ASSIST DE | 1/1/2007 | $860.50 | 3 |
| 2 | 33978 | REMOVAL OF VENTRICULAR ASSIST DE | 1/1/2007 | $954.44 | 3 |
| 2 | 33979 | INSERTION OF VENTRICULAR ASSIST | 1/1/2007 | $1,760.45 | 3 |
| 2 | 33980 | REMOVAL OF VENTRICULAR ASSIST DE | 1/1/2007 | $2,336.54 | 3 |
| 2 | 33999 | UNLISTED PROCEDURE CARDIAC SURGE | 4/1/1982 | $0.01 | 5 |
| 2 | 34001 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $556.89 | 3 |
| 2 | 34051 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $653.68 | 3 |
| 2 | 34101 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $435.18 | 3 |
| 2 | 34111 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $434.92 | 3 |
| 2 | 34151 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $1,010.49 | 3 |
| 2 | 34201 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $438.30 | 3 |
| 2 | 34203 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $698.31 | 3 |
| 2 | 34401 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $1,005.30 | 3 |
| 2 | 34421 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $514.85 | 3 |
| 2 | 34451 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $1,096.65 | 3 |
| 2 | 34471 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $432.33 | 3 |
| 2 | 34490 | THROMBECTOY DIRECT OR WITH CATHE | 1/1/2007 | $433.37 | 3 |
| 2 | 34501 | VALVULOPLASTY FEMORAL VEIN | 1/1/2007 | $696.24 | 3 |
| 2 | 34502 | RECONSTRUCTION OF VENA CAVA, ANY | 1/1/2007 | $1,112.22 | 3 |
| 2 | 34510 | VENOUS VALVE TRANSPOSITION ANY V | 1/1/2007 | $796.15 | 3 |
| 2 | 34520 | CROSS-OVER VEIN GRAFT TO VENOUS | 1/1/2007 | $743.99 | 3 |
| 2 | 34530 | SAPHENOPOPLITEAL VEIN ANASTOMOSI | 1/1/2007 | $700.13 | 3 |
| 2 | 34800 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $839.74 | 3 |
| 2 | 34802 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $910.85 | 3 |
| 2 | 34803 | ENDOVASCULAR REPAIR OF INFRARENA | 1/1/2007 | $940.43 | 3 |
| 2 | 34804 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $910.59 | 3 |
| 2 | 34805 | ENDOVASCULAR REPAIR OF INFRARENA | 1/1/2007 | $869.84 | 3 |
| 2 | 34808 | ENDOVASCULAR PLACEMENT OF ILIAC | 1/1/2007 | $157.78 | 3 |
| 2 | 34812 | OPEN FEMORAL ARTERY EXPOSURE FOR | 1/1/2007 | $263.65 | 3 |
| 2 | 34813 | PLACEMENT OF FEMORAL-FEMORAL PRO | 1/1/2007 | $182.43 | 3 |
| 2 | 34820 | OPEN ILIAC ARTERY EXPOSURE FOR D | 1/1/2007 | $375.76 | 3 |
| 2 | 34825 | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2007 | $503.95 | 3 |
| 2 | 34826 | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2007 | $153.88 | 3 |
| 2 | 34830 | OPEN REPAIR OF INFRARENAL AORTIC | 1/1/2007 | $1,318.52 | 3 |
| 2 | 34831 | OPEN REPAIR OF INFRARENAL AORTIC | 1/1/2007 | $1,347.58 | 3 |
| 2 | 34832 | OPEN REPAIR OF INFRARENAL AORTIC | 1/1/2007 | $1,421.80 | 3 |
| 2 | 34833 | OPEN ILIAC ARTERY EXPOSURE W/CRE | 1/1/2007 | $469.95 | 3 |
| 2 | 34834 | OPEN BRACHIAL ARTERY EXPOSURE TO | 1/1/2007 | $215.39 | 3 |
| 2 | 34900 | ENDOVASCULAR GRAFT REPLACEMENT F | 1/1/2007 | $673.40 | 3 |
| 2 | 35001 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $830.14 | 3 |
| 2 | 35002 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $874.00 | 3 |
| 2 | 35005 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $745.28 | 3 |
| 2 | 35011 | DIRECT REPAIR OF ANEURYSM, FALSE | 1/1/2007 | $739.83 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 35013 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $902.02 | 3 |
| 2 | 35021 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $828.32 | 3 |
| 2 | 35022 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $939.13 | 3 |
| 2 | 35045 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $713.63 | 3 |
| 2 | 35081 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $1,127.79 | 3 |
| 2 | 35082 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $1,535.98 | 3 |
| 2 | 35091 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $1,403.12 | 3 |
| 2 | 35092 | DIR. REPAIR OF ANEURYSM/EXCISION | 1/1/2007 | $1,790.29 | 3 |
| 2 | 35102 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $1,234.44 | 3 |
| 2 | 35103 | DIR. REPAIR OF ANEURYSM/EXCISION | 1/1/2007 | $1,610.72 | 3 |
| 2 | 35111 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $1,009.71 | 3 |
| 2 | 35112 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $1,194.22 | 3 |
| 2 | 35121 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $1,210.57 | 3 |
| 2 | 35122 | DIRECT REPAIR OF ANEURYSM/EXCISI | 1/1/2007 | $1,389.10 | 3 |
| 2 | 35131 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $1,025.54 | 3 |
| 2 | 35132 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $1,210.83 | 3 |
| 2 | 35141 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $825.21 | 3 |
| 2 | 35142 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $960.41 | 3 |
| 2 | 35151 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $930.31 | 3 |
| 2 | 35152 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $1,053.05 | 3 |
| 2 | 35161 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2005 | INVALID | N |
| 2 | 35162 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2005 | INVALID | N |
| 2 | 35180 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $559.48 | 3 |
| 2 | 35182 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $1,223.28 | 3 |
| 2 | 35184 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $747.36 | 3 |
| 2 | 35188 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $624.36 | 3 |
| 2 | 35189 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $1,140.24 | 3 |
| 2 | 35190 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $545.21 | 3 |
| 2 | 35201 | REPAIR BLOOD VESSEL DIRECT NECK | 1/1/2007 | $686.64 | 3 |
| 2 | 35206 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $562.08 | 3 |
| 2 | 35207 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $492.53 | 3 |
| 2 | 35211 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $932.12 | 3 |
| 2 | 35216 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $787.84 | 3 |
| 2 | 35221 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $977.54 | 3 |
| 2 | 35226 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $621.24 | 3 |
| 2 | 35231 | REPAIR BLOOD VESSEL WITH VEIN GR | 1/1/2007 | $847.01 | 3 |
| 2 | 35236 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $711.03 | 3 |
| 2 | 35241 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $979.87 | 3 |
| 2 | 35246 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $1,082.37 | 3 |
| 2 | 35251 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $1,196.04 | 3 |
| 2 | 35256 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $760.85 | 3 |
| 2 | 35261 | REPAIR BLOOD VESSEL WITH GRAFT O | 1/1/2007 | $736.98 | 3 |
| 2 | 35266 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $622.80 | 3 |
| 2 | 35271 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $928.49 | 3 |
| 2 | 35276 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $1,009.97 | 3 |
| 2 | 35281 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $1,132.72 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 35286 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $688.97 | 3 |
| 2 | 35301 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $773.05 | 3 |
| 2 | 35302 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $814.57 | 3 |
| 2 | 35303 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $895.28 | 3 |
| 2 | 35304 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $931.61 | 3 |
| 2 | 35305 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $895.28 | 3 |
| 2 | 35306 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $336.57 | 3 |
| 2 | 35311 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $1,093.53 | 3 |
| 2 | 35321 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $664.84 | 3 |
| 2 | 35331 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $1,070.18 | 3 |
| 2 | 35341 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $1,030.99 | 3 |
| 2 | 35351 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $932.38 | 3 |
| 2 | 35355 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $758.52 | 3 |
| 2 | 35361 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $1,142.58 | 3 |
| 2 | 35363 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $1,221.99 | 3 |
| 2 | 35371 | THROMBOENDARTERECTOMY, WITH OR W | 1/1/2007 | $617.61 | 3 |
| 2 | 35372 | THROMBOENDARTERECTOMY, WITH OR W | 1/1/2007 | $743.47 | 3 |
| 2 | 35381 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | INVALID | N |
| 2 | 35390 | REOPERATION, CAROTID, THROMBOEND | 1/1/2007 | $122.22 | 3 |
| 2 | 35400 | ANGIOSCOPY (NON-CORONARY VESSELS | 1/1/2007 | $117.81 | 3 |
| 2 | 35450 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $385.88 | 3 |
| 2 | 35452 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $271.18 | 3 |
| 2 | 35454 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $239.26 | 3 |
| 2 | 35456 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $289.34 | 3 |
| 2 | 35458 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $369.01 | 3 |
| 2 | 35459 | TRANSLUMINAL ANGIOPLASTY, OPEN; | 1/1/2007 | $337.61 | 3 |
| 2 | 35460 | TRANSLUMINAL ANGIOPLASTY, OPEN; | 1/1/2007 | $237.18 | 3 |
| 2 | 35470 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $328.79 | 3 |
| 2 | 35471 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $380.95 | 3 |
| 2 | 35472 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $265.47 | 3 |
| 2 | 35473 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $232.77 | 3 |
| 2 | 35474 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $280.78 | 3 |
| 2 | 35475 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $354.74 | 3 |
| 2 | 35476 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $226.54 | 3 |
| 2 | 35480 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $425.32 | 3 |
| 2 | 35481 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $301.28 | 3 |
| 2 | 35482 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $262.10 | 3 |
| 2 | 35483 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $318.41 | 3 |
| 2 | 35484 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $401.45 | 3 |
| 2 | 35485 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $372.90 | 3 |
| 2 | 35490 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $427.66 | 3 |
| 2 | 35491 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $302.06 | 3 |
| 2 | 35492 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $266.51 | 3 |
| 2 | 35493 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $323.34 | 3 |
| 2 | 35494 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $401.71 | 3 |
| 2 | 35495 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $378.09 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 35500 | HARVEST OF UPPER EXTREMITY VEIN, | 1/1/2007 | $243.93 | 3 |
| 2 | 35501 | BYPASS GRAFT VEIN CAROTID | 1/1/2007 | $789.92 | 3 |
| 2 | 35506 | BYPASS GRAFT VEIN; CAROTID-SUBCL | 1/1/2007 | $830.14 | 3 |
| 2 | 35507 | BYPASS GRAFT VEIN; SUBCLAVIAN-CA | 1/1/2007 | INVALID | N |
| 2 | 35508 | BYPASS GRAFT WITH VEIN CAROTID-V | 1/1/2007 | $800.82 | 3 |
| 2 | 35509 | BYPASS GRAFT VEIN; CAROTID-CAROT | 1/1/2007 | $763.97 | 3 |
| 2 | 35510 | BYPASS GRAFT, WITH VEIN; CAROTID | 1/1/2007 | $915.52 | 3 |
| 2 | 35511 | BYPASS GRAFT VEIN; SUBCLAVIAN-SU | 1/1/2007 | $868.03 | 3 |
| 2 | 35512 | BYPASS GRAFT, WITH VEIN; SUBCLAV | 1/1/2007 | $898.13 | 3 |
| 2 | 35515 | BYPASS GRAFT WITH VEIN SUBCLAVIA | 1/1/2007 | $796.67 | 3 |
| 2 | 35516 | BYPASS GRAFT VEIN; SUBCLAVIAN-AX | 1/1/2007 | $660.43 | 3 |
| 2 | 35518 | BYPASS GRAFT WITH VEIN AXILLARY- | 1/1/2007 | $861.28 | 3 |
| 2 | 35521 | BYPASS GRAFT VEIN; AXILLARY-FEMO | 1/1/2007 | $912.14 | 3 |
| 2 | 35522 | BYPASS GRAFT, WITH VEIN; AXILLAR | 1/1/2007 | $872.44 | 3 |
| 2 | 35525 | BYPASS GRAFT, WITH VEIN; BRACHIA | 1/1/2007 | $833.25 | 3 |
| 2 | 35526 | BYPASS GRAFT VEIN; AORTOSUBCLAVI | 1/1/2007 | $1,195.52 | 3 |
| 2 | 35531 | BYPASS GRAFT WITH VEIN AORTOCELI | 1/1/2007 | $1,448.53 | 3 |
| 2 | 35533 | BYPASS GRAFT WITH VEIN AXILLARY- | 1/1/2007 | $1,130.12 | 3 |
| 2 | 35536 | BYPASS GRAFT VEIN; SPLENORENAL | 1/1/2007 | $1,277.78 | 3 |
| 2 | 35537 | BYPASS GRAFT, WITH VEIN; AORTOIL | 1/1/2007 | $1,574.91 | 3 |
| 2 | 35538 | BYPASS GRAFT, WITH VEIN; AORTOBI | 1/1/2007 | $1,759.67 | 3 |
| 2 | 35539 | BYPASS GRAFT, WITH VEIN; AORTOFE | 1/1/2007 | $1,653.79 | 3 |
| 2 | 35540 | BYPASS GRAFT, WITH VEIN; AORTOBI | 1/1/2007 | $1,844.01 | 3 |
| 2 | 35541 | BYPASS GRAFT, WITH VEIN; AORTOIL | 1/1/2007 | INVALID | N |
| 2 | 35546 | BYPASS GRAFT WITH VEIN AORTOFEMO | 1/1/2007 | INVALID | N |
| 2 | 35548 | BYPASS GRAFT VEIN; AORTOILIOFEMO | 1/1/2007 | $881.26 | 3 |
| 2 | 35549 | BYPASS GRAFT VEIN; AORTOILIOFEMO | 1/1/2007 | $960.15 | 3 |
| 2 | 35551 | BYPASS GRAFT VEIN; AORTOFEMORAL- | 1/1/2007 | $1,087.05 | 3 |
| 2 | 35556 | BYPASS GRAFT VEIN; FEMORAL-POPLI | 1/1/2007 | $897.09 | 3 |
| 2 | 35558 | BYPASS GRAFT VEIN; FEMORAL-FEMOR | 1/1/2007 | $875.29 | 3 |
| 2 | 35560 | BYPASS GRAFT WITH VEIN AORTORENA | 1/1/2007 | $1,298.54 | 3 |
| 2 | 35563 | BYPASS GRAFT VEIN; ILIOLIAC | 1/1/2007 | $991.81 | 3 |
| 2 | 35565 | BYPASS GRAFT VEIN; ILIOFEMORAL | 1/1/2007 | $950.29 | 3 |
| 2 | 35566 | BYPASS GRAFT, W/VEIN;FEMORAL-ANT | 1/1/2007 | $1,092.75 | 3 |
| 2 | 35571 | BYPASS GRAFT, W/VEIN; POPLITEAL- | 1/1/2007 | $994.14 | 3 |
| 2 | 35572 | HARVEST OF FEMOROPOPLITEAL VEIN, | 1/1/2007 | $260.80 | 3 |
| 2 | 35582 | IN-SITU VEIN BYPASS; AORTOFEMORA | 1/1/2005 | INVALID | N |
| 2 | 35583 | IN-SITU VEIN BYPASS; FEMORAL P0P | 1/1/2007 | $925.90 | 3 |
| 2 | 35585 | IN-SITU VEIN BYPASS; FEMORAL-ANT | 1/1/2007 | $1,157.63 | 3 |
| 2 | 35587 | IN-SITU VEIN BYPASS POPLITEAL-TI | 1/1/2007 | $1,030.22 | 3 |
| 2 | 35600 | HARVEST OF UPPER EXTREMITY ARTER | 1/1/2007 | $189.18 | 3 |
| 2 | 35601 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $742.17 | 3 |
| 2 | 35606 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $789.14 | 3 |
| 2 | 35612 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $667.43 | 3 |
| 2 | 35616 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $674.44 | 3 |
| 2 | 35621 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $819.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 35623 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $984.28 | 3 |
| 2 | 35626 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $1,136.09 | 3 |
| 2 | 35631 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $1,369.38 | 3 |
| 2 | 35636 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $1,190.59 | 3 |
| 2 | 35637 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $1,252.87 | 3 |
| 2 | 35638 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $1,272.85 | 3 |
| 2 | 35641 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | INVALID | N |
| 2 | 35642 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $750.73 | 3 |
| 2 | 35645 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $732.31 | 3 |
| 2 | 35646 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $1,259.09 | 3 |
| 2 | 35647 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $1,135.05 | 3 |
| 2 | 35650 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $780.06 | 3 |
| 2 | 35651 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $1,014.65 | 3 |
| 2 | 35654 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $1,016.20 | 3 |
| 2 | 35656 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $802.11 | 3 |
| 2 | 35661 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $794.85 | 3 |
| 2 | 35663 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $910.07 | 3 |
| 2 | 35665 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $867.77 | 3 |
| 2 | 35666 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $933.68 | 3 |
| 2 | 35671 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $816.39 | 3 |
| 2 | 35681 | BYPASS GRAFT COMPOSITE | 1/1/2007 | $61.24 | 3 |
| 2 | 35682 | BYPASS GRAFT; AUTOGENOUS COMPOSI | 1/1/2007 | $275.33 | 3 |
| 2 | 35683 | BYPASS GRAFT; AUTOGENOUS COMPOSI | 1/1/2007 | $324.89 | 3 |
| 2 | 35685 | PLACEMENT OF VEIN PATCH OR CUFF | 1/1/2007 | $154.92 | 3 |
| 2 | 35686 | CREATION OF DISTAL ARTERIOVENOUS | 1/1/2007 | $128.19 | 3 |
| 2 | 35691 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $753.07 | 3 |
| 2 | 35693 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $656.28 | 3 |
| 2 | 35694 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $789.92 | 3 |
| 2 | 35695 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $789.66 | 3 |
| 2 | 35697 | REIMPLANTATION, VISCERAL ARTERY | 1/1/2007 | $114.96 | 3 |
| 2 | 35700 | REOPERATION, FEMORAL-POPLITEAL O | 1/1/2007 | $117.81 | 3 |
| 2 | 35701 | EXPLORATION (NOT FOLL BY SURG RE | 1/1/2007 | $383.28 | 3 |
| 2 | 35721 | EXPLORATION; FEMORAL ARTERY | 1/1/2007 | $328.01 | 3 |
| 2 | 35741 | EXPLORATION; POPLITEAL ARTERY | 1/1/2007 | $357.59 | 3 |
| 2 | 35761 | EXPLORATION; OTHER VESSELS | 1/1/2007 | $262.87 | 3 |
| 2 | 35800 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $327.49 | 3 |
| 2 | 35820 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $571.42 | 3 |
| 2 | 35840 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $425.58 | 3 |
| 2 | 35860 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $268.84 | 3 |
| 2 | 35870 | REPAIR OF GRAFT-ENTERIC FISTULA | 1/1/2007 | $906.43 | 3 |
| 2 | 35875 | THROMBECTOMY OF ARTERIAL OR VENO | 1/1/2007 | $433.88 | 3 |
| 2 | 35876 | THROMBECTOMY OF ARTERIAL OR VENO | 1/1/2007 | $697.80 | 3 |
| 2 | 35879 | REVISION, LOWER EXTREMITY ARTERI | 1/1/2007 | $673.66 | 3 |
| 2 | 35881 | REVISION, LOWER EXTREMITY ARTERI | 1/1/2007 | $758.00 | 3 |
| 2 | 35883 | REVISION, FEMORAL ANASTOMOSIS OF | 1/1/2007 | $913.96 | 3 |
| 2 | 35884 | REVISION, FEMORAL ANASTOMOSIS OF | 1/1/2007 | $970.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 35901 | EXCISION OF INFECTED GRAFT; NECK | 1/1/2007 | $380.17 | 3 |
| 2 | 35903 | EXCISION OF INFECTED GRAFT; EXTR | 1/1/2007 | $437.26 | 3 |
| 2 | 35905 | EXCISION OF INFECTED GRAFT; THOR | 1/1/2007 | $1,267.66 | 3 |
| 2 | 35907 | EXCISION OF INFECTED GRAFT; ABDO | 1/1/2007 | $1,402.86 | 3 |
| 2 | 36000 | INTRODUCTION OF NEEDLE OR INTRAC | 1/1/2007 | $19.72 | 3 |
| 2 | 36002 | INJECTION PROCEDURES (EG, THROMB | 1/1/2007 | $129.75 | 3 |
| 2 | 36005 | INJECTION PROCEDURE FOR EXTREMIT | 1/1/2007 | $224.99 | 3 |
| 2 | 36010 | INTRODUCTION OF CATHETER, SUPERI | 1/1/2007 | $88.75 | 3 |
| 2 | 36011 | SELECTIVE CATHETER PLACEMENT, VE | 1/1/2007 | $116.00 | 3 |
| 2 | 36012 | SELECTIVE CATHETER PLACEMENT, VE | 1/1/2007 | $127.93 | 3 |
| 2 | 36013 | INTRODUCTION OF CATHETER, RIGHT | 1/1/2007 | $89.79 | 3 |
| 2 | 36014 | SELECTIVE CATHETER PLACEMENT, LE | 1/1/2007 | $110.03 | 3 |
| 2 | 36015 | SELECTIVE CATHETER PLACEMENT, EA | 1/1/2007 | $127.41 | 3 |
| 2 | 36100 | INTRODUCTION OF NEEDLE OR INTRAC | 1/1/2007 | $113.92 | 3 |
| 2 | 36120 | INTRODUCTION OF NEEDLE OR INTRAC | 1/1/2007 | $72.66 | 3 |
| 2 | 36140 | INTRODUCTION OF NEEDLE OR INTRAC | 1/1/2007 | $72.92 | 3 |
| 2 | 36145 | INTRO OF NEEDLE/INTRACATHETER AR | 1/1/2007 | $72.14 | 3 |
| 2 | 36160 | INTRODUCTION OF NEEDLE OR INTRAC | 1/1/2007 | $93.94 | 3 |
| 2 | 36200 | INTRODUCTION OF CATHETER, AORTA | 1/1/2007 | $110.81 | 3 |
| 2 | 36215 | SELECTIVE CATHETER PLACEMENT,ART | 1/1/2007 | $169.97 | 3 |
| 2 | 36216 | SELECTIVE CATHETER PLACEMENT, AR | 1/1/2007 | $191.51 | 3 |
| 2 | 36217 | SELECTIVE CATHETER PLACEMENT, AR | 1/1/2007 | $231.21 | 3 |
| 2 | 36218 | SELECTIVE CATHETER ORDER, THIRD | 1/1/2007 | $36.85 | 3 |
| 2 | 36245 | SELECTIVE CATHETER PLACEMENT, AR | 1/1/2007 | $172.83 | 3 |
| 2 | 36246 | SELECTIVE CATHETER PLACEMENT, AR | 1/1/2007 | $194.11 | 3 |
| 2 | 36247 | SELECTIVE CATHETER PLACEMENT, AR | 1/1/2007 | $231.21 | 3 |
| 2 | 36248 | SELECTIVE CATHETER PLACEMENT, AR | 1/1/2007 | $36.85 | 3 |
| 2 | 36260 | INSERTION OF IMPLANTABLE INFUSIO | 1/1/2007 | $412.09 | 3 |
| 2 | 36261 | REVISION OF IMPLANTED INFUSION P | 1/1/2007 | $254.57 | 3 |
| 2 | 36262 | REMOVAL OF IMPLANTED INFUSION PU | 1/1/2007 | $189.69 | 3 |
| 2 | 36299 | UNLISTED PROCEDURE VASCULAR INJE | 2/1/1989 | $0.01 | 5 |
| 2 | 36400 | VENIPUNCTURE, UNDER AGE 3 YEARS; | 1/1/2007 | $17.91 | 3 |
| 2 | 36405 | VENIPUNCTURE UNDER AGE 3 YEARS; | 1/1/2007 | $15.57 | 3 |
| 2 | 36406 | VENIPUNCTURE UNDER AGE 3 YEARS O | 1/1/2007 | $12.20 | 3 |
| 2 | 36410 | VENIPUNCTURE CHILD OVER AGE 3 YE | 1/1/2007 | $12.46 | 3 |
| 2 | 36415 | COLLECTION OF VENOUS BLOOD BY VE | 2/13/2003 | $3.00 | 3 |
| 2 | 36416 | COLLECTION OF CAPILLARY BLOOD SP | 1/1/2003 | $3.00 | 3 |
| 2 | 36420 | VENIPUNCTURE CUTDOWN UNDER AGE 1 | 1/1/2007 | $36.85 | 3 |
| 2 | 36425 | VENIPUNCTURE CUTDOWN; AGE 1 OR O | 1/1/2007 | $26.99 | 3 |
| 2 | 36430 | TRANSFUSION, BLOOD OR BLOOD COMP | 1/1/2007 | $27.77 | 3 |
| 2 | 36440 | PUSH TRANSFUSION BLOOD 2 YEARS O | 1/1/2007 | $36.85 | 3 |
| 2 | 36450 | EXCHANGE TRANSFUSION BLOOD NEWBO | 1/1/2007 | $81.74 | 3 |
| 2 | 36455 | EXCHANGE TRANSFUSION BLOOD; OTHE | 1/1/2007 | $93.16 | 3 |
| 2 | 36460 | TRANSFUSION INTRAUTERINE FETAL | 1/1/2007 | $249.64 | 3 |
| 2 | 36468 | SINGLE OR MULTIPLE INJECTIONS OF | 3/1/1987 | NC | 9 |
| 2 | 36469 | SINGLE OR MULTIPLE INJECTIONS OF | 3/1/1987 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 36470 | INJECTION OF SCLEROSING SOLUTION | 2/1/1993 | NC | 9 |
| 2 | 36471 | INJECTION OF SCLEROSING SOLUTION | 2/1/1993 | NC | 9 |
| 2 | 36475 | ENDOVENOUS ABLATION THERAPY OF I | 1/1/2007 | $1,521.45 | 3 |
| 2 | 36476 | ENDOVENOUS ABLATION THERAPY OF I | 1/1/2007 | $297.39 | 3 |
| 2 | 36478 | ENDOVENOUS ABLATION THERAPY OF I | 1/1/2007 | $1,401.30 | 3 |
| 2 | 36479 | ENDOVENOUS ABLATION THERAPY OF I | 1/1/2007 | $300.24 | 3 |
| 2 | 36481 | PERCUTANEOUS PORTAL VEIN CATHETE | 1/1/2007 | $344.62 | 3 |
| 2 | 36488 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| 2 | 36489 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| 2 | 36490 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| 2 | 36491 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| 2 | 36493 | REPOSITIONING OF PREVIOUSLY PLAC | 4/1/2004 | INVALID | N |
| 2 | 36500 | VENOUS CATHETERIZATION FOR SELEC | 1/1/2007 | $131.83 | 3 |
| 2 | 36510 | CATHETERIZATION OF UMBILICAL VEI | 1/1/2007 | $132.09 | 3 |
| 2 | 36511 | THERAPEUTIC APHERESIS; FOR WHITE | 1/1/2003 | NC | 9 |
| 2 | 36512 | THERAPEUTIC APHERESIS; FOR RED B | 1/1/2003 | NC | 9 |
| 2 | 36513 | THERAPEUTIC APHERESIS; FOR PLATE | 1/1/2003 | NC | 9 |
| 2 | 36514 | THERAPEUTIC APHERESIS; FOR PLASM | 1/1/2003 | NC | 9 |
| 2 | 36515 | THERAPEUTIC APHERESIS; WITH EXTR | 1/1/2003 | NC | 9 |
| 2 | 36516 | THERAPEUTIC APHERESIS; WITH EXTR | 1/1/2003 | NC | 9 |
| 2 | 36520 | THERAPEUTIC APHERESIS (PLASMA AN | 7/1/2003 | INVALID | N |
| 2 | 36521 | THERAPEUTIC APHERESIS; W/EXTRACO | 7/1/2003 | INVALID | N |
| 2 | 36522 | PHOTOPHERESIS, EXTRACORPOREAL | 1/1/2007 | $889.05 | 3 |
| 2 | 36530 | INSERTION OF IMPLANTABLE INTRAVE | 4/1/2004 | INVALID | N |
| 2 | 36531 | REVISION OF IMPLANTABLE INTRAVEN | 4/1/2004 | INVALID | N |
| 2 | 36532 | REMOVAL OF IMPLANTABLE INTRAVENO | 4/1/2004 | INVALID | N |
| 2 | 36533 | INSERTION OF IMPLANTABLE VENOUS | 4/1/2004 | INVALID | N |
| 2 | 36534 | REVISION OF IMPLANTABLE VENOUS A | 4/1/2004 | INVALID | N |
| 2 | 36535 | REMOVAL OF IMPLANTABLE VENOUS AC | 4/1/2004 | INVALID | N |
| 2 | 36536 | MECHANICAL REMOVAL OF PERICATHET | 4/1/2004 | INVALID | N |
| 2 | 36537 | MECHANICAL REMOVAL OF INTRALUMIN | 4/1/2004 | INVALID | N |
| 2 | 36540 | COLLECTION OF BLOOD SPECIMEN FRO | 10/1/2002 | $17.91 | 3 |
| 2 | 36550 | DECLOTTING BY THROMBOLYTIC AGENT | 1/1/2007 | $19.72 | 3 |
| 2 | 36555 | INSERTION OF NON-TUNNELED CENTRA | 1/1/2007 | $222.13 | 3 |
| 2 | 36556 | INSERTION OF NON-TUNNELED CENTRA | 1/1/2007 | $216.16 | 3 |
| 2 | 36557 | INSERTION OF TUNNELED CENTRALLY | 1/1/2007 | $697.02 | 3 |
| 2 | 36558 | INSERTION OF TUNNELED CENTRALLY | 1/1/2007 | $686.64 | 3 |
| 2 | 36560 | INSERTION OF TUNNELED CENTRALLY | 1/1/2007 | $948.99 | 3 |
| 2 | 36561 | INSERTION OF TUNNELED CENTRALLY | 1/1/2007 | $940.17 | 3 |
| 2 | 36563 | INSERTION OF TUNNELED CENTRALLY | 1/1/2007 | $878.41 | 3 |
| 2 | 36565 | INSERTION OF TUNNELED CENTRALLY | 1/1/2007 | $813.01 | 3 |
| 2 | 36566 | INSERTION OF TUNNELED CENTRALLY | 1/1/2007 | $846.75 | 3 |
| 2 | 36568 | INSERTION OF PERIPHERALLY INSERT | 1/1/2007 | $248.60 | 3 |
| 2 | 36569 | INSERTION OF PERIPHERALLY INSERT | 1/1/2007 | $243.15 | 3 |
| 2 | 36570 | INSERTION OF PERIPHERALLY INSERT | 1/1/2007 | $1,015.94 | 3 |
| 2 | 36571 | INSERTION OF PERIPHERALLY INSERT | 1/1/2007 | $1,017.24 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 36575 | REPAIR OF TUNNELED OR NON-TUNNEL | 1/1/2007 | $127.93 | 3 |
| 2 | 36576 | REPAIR OF CENTRAL VENOUS ACCESS | 1/1/2007 | $268.32 | 3 |
| 2 | 36578 | REPLACEMENT, CATHETER ONLY, OF C | 1/1/2007 | $385.10 | 3 |
| 2 | 36580 | REPLACEMENT, COMPLETE, OF A NON- | 1/1/2007 | $219.54 | 3 |
| 2 | 36581 | REPLACEMENT, COMPLETE, OF A TUNN | 1/1/2007 | $601.26 | 3 |
| 2 | 36582 | REPLACEMENT, COMPLETE, OF A TUNN | 1/1/2007 | $816.65 | 3 |
| 2 | 36583 | REPLACEMENT, COMPLETE, OF A TUNN | 1/1/2007 | $818.46 | 3 |
| 2 | 36584 | REPLACEMENT, COMPLETE, OF A PERI | 1/1/2007 | $217.46 | 3 |
| 2 | 36585 | REPLACEMENT, COMPLETE, OF A PERI | 1/1/2007 | $853.24 | 3 |
| 2 | 36589 | REMOVAL OF TUNNELED CENTRAL VENO | 1/1/2007 | $123.52 | 3 |
| 2 | 36590 | REMOVAL OF TUNNELED CENTRAL VENO | 1/1/2007 | $184.76 | 3 |
| 2 | 36595 | MECHANICAL REMOVAL OF PERICATHET | 1/1/2007 | $547.55 | 3 |
| 2 | 36596 | MECHANICAL REMOVAL OF INTRALUMIN | 1/1/2007 | $116.78 | 3 |
| 2 | 36597 | REPOSITIONING OF PREVIOUSLY PLAC | 1/1/2007 | $95.76 | 3 |
| 2 | 36598 | CONTRAST INJECTION(S) FOR RADIOL | 1/1/2007 | $89.27 | 3 |
| 2 | 36600 | ARTERIAL PUNCTURE WITHDRAWAL OF | 1/1/2007 | $21.54 | 3 |
| 2 | 36620 | ARTERIAL CATHETERIZATION OR CANN | 1/1/2007 | $37.63 | 3 |
| 2 | 36625 | ARTERIAL CATHETERIZATION OR CANN | 1/1/2007 | $75.26 | 3 |
| 2 | 36640 | ARTERIAL CATHETERIZATION FOR PRO | 1/1/2007 | $86.93 | 3 |
| 2 | 36660 | CATHETERIZATION UMBILICAL ARTERY | 1/1/2007 | $51.38 | 3 |
| 2 | 36680 | PLACEMENT OF NEEDLE FOR INTRAOSS | 1/1/2007 | $46.71 | 3 |
| 2 | 36800 | INSERTION OF CANNULA FOR HEMODIA | 1/1/2007 | $116.52 | 3 |
| 2 | 36810 | INSERTION OF CANNULA FOR HEMODIA | 1/1/2007 | $158.04 | 3 |
| 2 | 36815 | INSERTION OF CANNULA FOR HEMODIA | 1/1/2007 | $107.43 | 3 |
| 2 | 36818 | ARTERIOVENOUS ANASTOMOSIS, OPEN; | 1/1/2007 | $504.99 | 3 |
| 2 | 36819 | ARTERIOVENOUS ANASTOMOSIS, OPEN; | 1/1/2007 | $579.20 | 3 |
| 2 | 36820 | ARTERIOVENOUS ANASTOMOSIS, OPEN; | 1/1/2007 | $579.20 | 3 |
| 2 | 36821 | ARTERIOVENOUS ANASTOMOSIS, DIREC | 1/1/2007 | $384.32 | 3 |
| 2 | 36822 | INSERTION OF CANNULA(S) FOR PROL | 1/1/2007 | $274.81 | 3 |
| 2 | 36823 | INSERTION OF ARTERIAL AND VENOUS | 1/1/2007 | $862.84 | 3 |
| 2 | 36825 | CREATION OF ARTERIOVENOUS FISTUL | 1/1/2007 | $421.43 | 3 |
| 2 | 36830 | CREATION OF ARTERIOVENOUS FISTUL | 1/1/2007 | $490.20 | 3 |
| 2 | 36831 | THROMBECTOMY, OPEN, ARTERIOVENOU | 1/1/2007 | $338.13 | 3 |
| 2 | 36832 | REVISION, OPEN, ARTERIOVENOUS FI | 1/1/2007 | $432.07 | 3 |
| 2 | 36833 | REVISION, ARTERIOVENOUS FISTULA; | 1/1/2007 | $487.86 | 3 |
| 2 | 36834 | PLASTIC REPAIR OF ARTERIOVENOUS | 1/1/2007 | $417.54 | 3 |
| 2 | 36835 | INSERTION OF THOMAS SHUNT (SEP P | 1/1/2007 | $323.08 | 3 |
| 2 | 36838 | DISTAL REVASCULARIZATION AND INT | 1/1/2007 | $856.87 | 3 |
| 2 | 36860 | CANNULA DECLOTTING (SEP PROC); W | 1/1/2007 | $101.21 | 3 |
| 2 | 36861 | CANNULA DECLOTTING; WITH BALLOON | 1/1/2007 | $111.07 | 3 |
| 2 | 36870 | THROMBECTOMY, PERCUTANEOUS, ARTE | 1/1/2007 | $1,521.19 | 3 |
| 2 | 37140 | VENOUS ANASTOMOSIS, OPEN; PORTOC | 1/1/2007 | $936.28 | 3 |
| 2 | 37145 | VENOUS ANASTOMOSIS; RENOPORTAL | 1/1/2007 | $1,004.52 | 3 |
| 2 | 37160 | VENOUS ANASTOMOSIS; CAVAL-MESENT | 1/1/2007 | $873.48 | 3 |
| 2 | 37180 | VENOUS ANASTOMOSIS; SPLENORENAL, | 1/1/2007 | $992.07 | 3 |
| 2 | 37181 | ANASTOMOSIS SPLENORENAL DISTAL ( | 1/1/2007 | $1,065.77 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 37182 | INSERTION OF TRANSVENOUS INTRAHE | 1/1/2007 | $624.10 | 3 |
| 2 | 37183 | REVISION OF TRANSVENOUS INTRAHEP | 1/1/2007 | $297.91 | 3 |
| 2 | 37184 | PRIMARY PERCUTANEOUS TRANSLUMINA | 1/1/2007 | $2,104.80 | 3 |
| 2 | 37185 | PRIMARY PERCUTANEOUS TRANSLUMINA | 1/1/2007 | $686.12 | 3 |
| 2 | 37186 | SECONDARY PERCUTANEOUS TRANSLUMI | 1/1/2007 | $1,421.28 | 3 |
| 2 | 37187 | PERCUTANEOUS TRANSLUMINAL MECHAN | 1/1/2007 | $2,047.97 | 3 |
| 2 | 37188 | PERCUTANEOUS TRANSLUMINAL MECH T | 1/1/2007 | $1,770.57 | 3 |
| 2 | 37195 | THROMBOLYSIS, CEREBRAL, BY INTRA | 10/1/2004 | $221.61 | 3 |
| 2 | 37200 | TRANSCATHETER BIOPSY | 1/1/2007 | $164.00 | 3 |
| 2 | 37201 | TRANSCATHETER THERAPY, INFUSION | 1/1/2007 | $204.23 | 3 |
| 2 | 37202 | TRANSCATHETER THERAPY, INFUSION | 1/1/2007 | $237.18 | 3 |
| 2 | 37203 | TRANSCATHETER RETRIEVAL, PERCUTA | 1/1/2007 | $993.37 | 3 |
| 2 | 37204 | TRANSCATHETER OCCLUSION OR EMBOL | 1/1/2007 | $661.98 | 3 |
| 2 | 37205 | TRANSCATHETER PLACEMENT OF AN IN | 1/1/2007 | $327.75 | 3 |
| 2 | 37206 | TRANSCATHETER PLACEMENT OF AN IN | 1/1/2007 | $152.07 | 3 |
| 2 | 37207 | TRANSCATHETER PLACEMENT OF AN IN | 1/1/2007 | $327.23 | 3 |
| 2 | 37208 | TRANSCATHETER PLACEMENT OF AN IN | 1/1/2007 | $158.04 | 3 |
| 2 | 37209 | EXCHANGE OF A PREVIOUSLY PLACED | 1/1/2007 | $82.00 | 3 |
| 2 | 37210 | UTERINE FIBROID EMBOLIZATION, PE | 1/1/2007 | NC | 9 |
| 2 | 37215 | TRANSCATHETER PLACEMENT OF INTRA | 1/1/2007 | $750.47 | 3 |
| 2 | 37216 | TRANSCATHETER PLACEMENT OF INTRA | 1/1/2007 | $722.97 | 3 |
| 2 | 37250 | INTRASVASCULAR ULTRASOUND (NON-C | 1/1/2007 | $79.41 | 3 |
| 2 | 37251 | INTRASVASCULAR ULTRASOUND (NON-C | 1/1/2007 | $60.72 | 3 |
| 2 | 37500 | VASCULAR ENDOSCOPY, SURGICAL, WI | 1/1/2007 | $503.17 | 3 |
| 2 | 37501 | UNLISTED VASCULAR ENDOSCOPY PROC | 1/1/2003 | $0.01 | 5 |
| 2 | 37565 | LIGATION, INTERNAL JUGULAR VEIN | 1/1/2007 | $462.69 | 3 |
| 2 | 37600 | LIGATION EXTERNAL CAROTID ARTERY | 1/1/2007 | $500.58 | 3 |
| 2 | 37605 | LIGATION; INTERNAL OR COMMON CAR | 1/1/2007 | $570.64 | 3 |
| 2 | 37606 | LIGATION INTERNAL OR COMMON CARO | 1/1/2007 | $313.22 | 3 |
| 2 | 37607 | LIGATION OR BANDING OF ANGIOACCE | 1/1/2007 | $274.29 | 3 |
| 2 | 37609 | LIGATION OR BIOPSY TEMPORAL ARTE | 1/1/2007 | $204.23 | 3 |
| 2 | 37615 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $272.99 | 3 |
| 2 | 37616 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $697.80 | 3 |
| 2 | 37617 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $887.49 | 3 |
| 2 | 37618 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $236.66 | 3 |
| 2 | 37620 | INTERRUPTION, PARTIAL OR COMPLET | 1/1/2007 | $445.82 | 3 |
| 2 | 37650 | LIGATION OF FEMORAL VEIN | 1/1/2007 | $350.07 | 3 |
| 2 | 37660 | LIGATION OF COMMON ILIAC VEIN | 1/1/2007 | $844.15 | 3 |
| 2 | 37700 | LIGATION AND DIVISION OF LONG SA | 1/1/2007 | $182.95 | 3 |
| 2 | 37718 | LIGATION, DIVISION, AND STRIPPIN | 1/1/2007 | $284.67 | 3 |
| 2 | 37720 | LIGATION AND DIVISION AND COMPLE | 1/1/2006 | INVALID | N |
| 2 | 37722 | LIGATION, DIVISION, AND STRIPPIN | 1/1/2007 | $339.17 | 3 |
| 2 | 37730 | LIGATION AND DIVISION AND COMPLE | 1/1/2006 | INVALID | N |
| 2 | 37735 | LIGATION & DIV & COMP STRIP OF L | 1/1/2007 | $454.38 | 3 |
| 2 | 37760 | LIGATION OF PERFORATOR VEINS, SU | 1/1/2007 | $447.64 | 3 |
| 2 | 37765 | STAB PHLEBECTOMY OF VARICOSE VEI | 1/1/2007 | $323.08 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 37766 | STAB PHLEBECTOMY OF VERICOSE VEI | 1/1/2007 | $392.10 | 3 |
| 2 | 37780 | LIGATION AND DIVISION OF SHORT S | 1/1/2007 | $187.36 | 3 |
| 2 | 37785 | LIGATION, DIVISION, AND/OR EXCIS | 1/1/2007 | $248.60 | 3 |
| 2 | 37788 | PENILE REVASCULARIZATION, ARTERY | 3/1/1992 | NC | 9 |
| 2 | 37790 | PENILE VENOUS OCCLUSIVE PROCEDUR | 1/1/1994 | NC | 9 |
| 2 | 37799 | UNLISTED PROCEDURE VASCULAR SURG | 2/1/1989 | $0.01 | 5 |
| 2 | 38100 | SPLENECTOMY; TOTAL | 1/1/2007 | $585.95 | 3 |
| 2 | 38101 | SPLENECTOMY (SEPARATE PROCEDURE) | 1/1/2007 | $619.43 | 3 |
| 2 | 38102 | SPLENECTOMY; TOTAL, EN BLOC FOR | 1/1/2007 | $183.21 | 3 |
| 2 | 38115 | REPAIR OF RUPTURED SPLEEN (SPLEN | 1/1/2007 | $636.81 | 3 |
| 2 | 38120 | LAPAROSCOPY, SURGICAL, SPLENECTO | 1/1/2007 | $690.53 | 3 |
| 2 | 38129 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 38200 | INJECTION PROCEDURE FOR SPLENOPO | 1/1/2007 | $95.24 | 3 |
| 2 | 38204 | MANAGEMENT OF RECIPIENT HEMATOPO | 1/1/2003 | $0.01 | 5 |
| 2 | 38205 | BLOOD-DERIVED HEMATOPOIETIC PROG | 1/1/2007 | $58.13 | 3 |
| 2 | 38206 | BLOOD-DERIVED HEMATOPOIETIC PROG | 1/1/2007 | $58.13 | 3 |
| 2 | 38207 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38208 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38209 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38210 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38211 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38212 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38213 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38214 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38215 | TRANSPLANT PREPARATION OF HEMATO | 1/1/2003 | $0.01 | 5 |
| 2 | 38220 | BONE MARROW; ASPIRATION ONLY | 1/1/2007 | $126.12 | 3 |
| 2 | 38221 | BONE MARROW; BIOPSY, NEEDLE OR T | 1/1/2007 | $139.61 | 3 |
| 2 | 38230 | BONE MARROW HARVESTING FOR TRANS | 1/1/2007 | $213.83 | 3 |
| 2 | 38231 | BLOOD-DERIVED PERIPHERAL STEM CE | 7/1/2003 | INVALID | N |
| 2 | 38240 | BONE MARROW OR BLOOD-DERIVED PER | 1/1/2007 | $87.71 | 3 |
| 2 | 38241 | BONE MARROW TRANSPLANTATION; AUT | 1/1/2007 | $87.97 | 3 |
| 2 | 38242 | BONE MARROW OR BLOOD-DERIVED PER | 1/1/2007 | $66.69 | 3 |
| 2 | 38300 | DRAINAGE OF LYMPH NODE ABSCESS O | 1/1/2007 | $169.97 | 3 |
| 2 | 38305 | DRAINAGE OF LYMPH NODE ABSCESS O | 1/1/2007 | $293.75 | 3 |
| 2 | 38308 | LYMPHAGIOTOMY OR OTHER OPERATION | 1/1/2007 | $286.49 | 3 |
| 2 | 38380 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $360.45 | 3 |
| 2 | 38381 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $560.52 | 3 |
| 2 | 38382 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $446.34 | 3 |
| 2 | 38500 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/2007 | $205.78 | 3 |
| 2 | 38505 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/2007 | $85.38 | 3 |
| 2 | 38510 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/2007 | $329.57 | 3 |
| 2 | 38520 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/2007 | $299.98 | 3 |
| 2 | 38525 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/2007 | $263.65 | 3 |
| 2 | 38530 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/2007 | $350.07 | 3 |
| 2 | 38542 | DISSECTION DEEP JUGULAR NODE(S) | 1/1/2007 | $285.19 | 3 |
| 2 | 38550 | EXCISION OF CYSTIC HYGROMA, AXIL | 1/1/2007 | $303.87 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 38555 | EXCISION OF CYSTIC HYGROMA, AXIL | 1/1/2007 | $633.70 | 3 |
| 2 | 38562 | LIMITED LYMPHADENECTOMY FOR STAG | 1/1/2007 | $453.09 | 3 |
| 2 | 38564 | LIMITED LYMPHADENECTOMY FOR STAG | 1/1/2007 | $451.27 | 3 |
| 2 | 38570 | LAPAROSCOPY, SURGICAL; W/RETROPE | 1/1/2007 | $372.38 | 3 |
| 2 | 38571 | LAPAROSCOPY, SURGICAL; WITH BILA | 1/1/2007 | $557.15 | 3 |
| 2 | 38572 | LAPAROSCOPY, SURGICAL; W/BILATER | 1/1/2007 | $663.28 | 3 |
| 2 | 38589 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 38700 | SUPRAHYOID LYMPHADENECTOMY | 1/1/2007 | $394.44 | 3 |
| 2 | 38720 | CERVICAL LYMPHADENECTOMY (COMPLE | 1/1/2007 | $627.21 | 3 |
| 2 | 38724 | CERVICAL LYMPHADENECTOMY (MODIFI | 1/1/2007 | $665.88 | 3 |
| 2 | 38740 | AXILLARY LYMPHADENECTOMY SUPERFI | 1/1/2007 | $422.47 | 3 |
| 2 | 38745 | AXILLARY LYMPHADENECTOMY; COMPLE | 1/1/2007 | $542.36 | 3 |
| 2 | 38746 | THORACIC LYMPHADENECTOMY, REGION | 1/1/2007 | $187.10 | 3 |
| 2 | 38747 | ABDOMINAL LYMPHADENECTOMY, REGIO | 1/1/2007 | $186.58 | 3 |
| 2 | 38760 | INGUINOFEMORAL LYMPHADENECTOMY, | 1/1/2007 | $539.24 | 3 |
| 2 | 38765 | INGUINOFEMORAL LYMPHADENECTOMY,S | 1/1/2007 | $810.94 | 3 |
| 2 | 38770 | PELVIC LYMPHADENECTOMY, INCLUDIN | 1/1/2007 | $528.60 | 3 |
| 2 | 38780 | RETROPERITONEAL TRANSABDOMINAL L | 1/1/2007 | $692.09 | 3 |
| 2 | 38790 | INJECTION PROCEDURE FOR LYMPHANG | 1/1/2007 | $228.10 | 3 |
| 2 | 38792 | INJECTION PROCEDURE; FOR IDENTIF | 1/1/2007 | $26.47 | 3 |
| 2 | 38794 | CANNULATION THORACIC DUCT | 1/1/2007 | $213.31 | 3 |
| 2 | 38999 | UNLISTED PROCEDURE HEMIC OR LYMP | 2/1/1989 | $0.01 | 5 |
| 2 | 39000 | MEDIASTINOTOMY WITH EXPLORATION, | 1/1/2007 | $302.06 | 3 |
| 2 | 39010 | MEDIASTINOTOMY WITH EXPLORATION, | 1/1/2007 | $547.03 | 3 |
| 2 | 39200 | EXCISION OF MEDIASTINAL CYST | 1/1/2007 | $601.26 | 3 |
| 2 | 39220 | EXCISION OF MEDIASTINAL TUMOR | 1/1/2007 | $758.52 | 3 |
| 2 | 39400 | MEDIASTINOSCOPY WITH OR WITHOUT | 1/1/2007 | $292.72 | 3 |
| 2 | 39499 | UNLISTED PROCEDURE MEDIASTINUM | 2/1/1994 | $0.01 | 5 |
| 2 | 39501 | REPAIR, LACERATION OF DIAPHRAGM, | 1/1/2007 | $555.59 | 3 |
| 2 | 39502 | REPAIR PARAESOPHAGEAL HIATUS HER | 1/1/2007 | $665.10 | 3 |
| 2 | 39503 | REPAIR, NEONATAL DIAPHRAGMATIC H | 1/1/2007 | $3,614.32 | 3 |
| 2 | 39520 | REPAIR DIAPHRAGMATIC HERNIA (ESO | 1/1/2007 | $684.30 | 3 |
| 2 | 39530 | REPAIR DIAPHRAGMATIC HERNIA (ESO | 1/1/2007 | $639.41 | 3 |
| 2 | 39531 | REPAIR DIAPHRAGMATIC HERNIA (ESO | 1/1/2007 | $674.96 | 3 |
| 2 | 39540 | REPAIR DIAPHRAGMATIC HERNIA (OTH | 1/1/2007 | $553.51 | 3 |
| 2 | 39541 | REPAIR DIAPHRAGMATIC HERNIA (OTH | 1/1/2007 | $594.51 | 3 |
| 2 | 39545 | IMBRICATION OF DIAPHRAGM FOR EVE | 1/1/2007 | $590.10 | 3 |
| 2 | 39560 | RESECTION, DIAPHRAGM; WITH SIMPL | 1/1/2007 | $515.63 | 3 |
| 2 | 39561 | RESECTION, DIAPHRAGM; WITH COMPL | 1/1/2007 | $759.56 | 3 |
| 2 | 39599 | UNLISTED PROCEDURE DIAPHRAGM | 2/1/1994 | $0.01 | 5 |
| 2 | 40490 | BIOPSY LIP | 1/1/2007 | $75.26 | 3 |
| 2 | 40500 | VERMILIONECTOMY (LIP SHAVE) WITH | 1/1/2007 | $299.98 | 3 |
| 2 | 40510 | EXCISION LIP TRANSVERSE WEDGE EX | 1/1/2007 | $306.47 | 3 |
| 2 | 40520 | EXCISION LIP; V-EXCISION WITH PR | 1/1/2007 | $330.60 | 3 |
| 2 | 40525 | EXCISION LIP; FULL THICKNESS REC | 1/1/2007 | $381.72 | 3 |
| 2 | 40527 | EXCISION LIP; FULL THICKNESS REC | 1/1/2007 | $453.09 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 40530 | RESECTION LIP MORE THAN ONE-FOUR | 1/1/2007 | $357.33 | 3 |
| 2 | 40650 | REPAIR LIP FULL THICKNESS VERMIL | 1/1/2007 | $280.78 | 3 |
| 2 | 40652 | REPAIR LIP FULL THICKNESS; UP TO | 1/1/2007 | $325.15 | 3 |
| 2 | 40654 | REPAIR LIP FULL THICKNESS; OVER | 1/1/2007 | $376.79 | 3 |
| 2 | 40700 | PLASTIC REPAIR OF CLEFT LIP/NASA | 1/1/2007 | $592.18 | 3 |
| 2 | 40701 | PLASTIC REPAIR OF CLEFT LIP; PRI | 1/1/2007 | $748.40 | 3 |
| 2 | 40702 | PLASTIC REPAIR OF CLEFT LIP; PRI | 1/1/2007 | $584.39 | 3 |
| 2 | 40720 | PLASTIC REPAIR OF CLEFT LIP; SEC | 1/1/2007 | $654.98 | 3 |
| 2 | 40761 | PLASTIC REPAIR OF CLEFT LIP WITH | 1/1/2007 | $698.83 | 3 |
| 2 | 40799 | UNLISTED PROCEDURE LIPS | 4/1/1982 | $0.01 | 5 |
| 2 | 40800 | DRAINAGE OF ABSCESS CYST HEMATOM | 1/1/2007 | $110.81 | 3 |
| 2 | 40801 | DRAINAGE OF ABSCESS CYST HEMATOM | 1/1/2007 | $178.28 | 3 |
| 2 | 40804 | REMOVAL OF EMBEDDED FOREIGN BODY | 1/1/2007 | $123.26 | 3 |
| 2 | 40805 | REMOVAL OF EMBEDDED FOREIGN BODY | 1/1/2007 | $194.63 | 3 |
| 2 | 40806 | INCISION OF LABIAL FRENUM(FRENOT | 1/1/2007 | $56.83 | 3 |
| 2 | 40808 | BIOPSY VESTIBULE OF MOUTH | 1/1/2007 | $96.53 | 3 |
| 2 | 40810 | EXCISION OF LESION OF MUCOSA AND | 1/1/2007 | $112.36 | 3 |
| 2 | 40812 | EXCISION OF LESION OF MUCOSA AND | 1/1/2007 | $164.00 | 3 |
| 2 | 40814 | EXCISION OF LESION OF MUCOSA AND | 1/1/2007 | $227.58 | 3 |
| 2 | 40816 | EXCISION OF LESION OF MUCOSA SUB | 1/1/2007 | $239.78 | 3 |
| 2 | 40818 | EXCISION OF MUCOSA AS DONOR GRAF | 1/1/2007 | $202.41 | 3 |
| 2 | 40819 | EXCISION OF FRENUM LABIAL OR BUC | 1/1/2007 | $176.20 | 3 |
| 2 | 40820 | DESTRUCTION OF LESION OR SCAR BY | 1/1/2007 | $138.31 | 3 |
| 2 | 40830 | CLOSURE OF LACERATION 2.5 CM OR | 1/1/2007 | $147.40 | 3 |
| 2 | 40831 | CLOSURE OF LACERATION, VESTIBULE | 1/1/2007 | $192.81 | 3 |
| 2 | 40840 | VESTIBULOPLASTY ANTERIOR | 1/1/2007 | $508.88 | 3 |
| 2 | 40842 | VESTIBULOPLASTY; POSTERIOR UNILA | 1/1/2007 | $516.15 | 3 |
| 2 | 40843 | VESTIBULOPLASTY; POSTERIOR BILAT | 1/1/2007 | $660.43 | 3 |
| 2 | 40844 | VESTIBULOPLASTY; ENTIRE ARCH | 1/1/2007 | $876.85 | 3 |
| 2 | 40845 | VESTIBULOPLASTY; COMPLEX (INCLUD | 1/1/2007 | $977.28 | 3 |
| 2 | 40899 | UNLISTED PROCEDURE VESTIBULE OF | 8/19/2002 | $0.01 | 5 |
| 2 | 41000 | INTRAORAL INCISION AND DRAINAGE | 1/1/2007 | $97.05 | 3 |
| 2 | 41005 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $122.48 | 3 |
| 2 | 41006 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $217.72 | 3 |
| 2 | 41007 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $222.13 | 3 |
| 2 | 41008 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $219.80 | 3 |
| 2 | 41009 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $234.33 | 3 |
| 2 | 41010 | INCISION OF LINGUAL FRENUM (FREN | 1/1/2007 | $118.33 | 3 |
| 2 | 41015 | EXTRAORAL INCISION AND DRAINAGE | 1/1/2007 | $255.09 | 3 |
| 2 | 41016 | INCISION AND DRAINAGE OF EXTRAOR | 1/1/2007 | $265.21 | 3 |
| 2 | 41017 | INCISION AND DRAINAGE OF EXTRAOR | 1/1/2007 | $265.73 | 3 |
| 2 | 41018 | INCISION AND DRAINAGE OF EXTRAOR | 1/1/2007 | $309.32 | 3 |
| 2 | 41100 | BIOPSY TONGUE ANTERIOR TWO-THIRD | 1/1/2007 | $109.25 | 3 |
| 2 | 41105 | BIOPSY TONGUE; POSTERIOR ONE-THI | 1/1/2007 | $100.17 | 3 |
| 2 | 41108 | BIOPSY FLOOR OF MOUTH | 1/1/2007 | $83.82 | 3 |
| 2 | 41110 | EXCISION LESION OF TONGUE WITHOU | 1/1/2007 | $120.15 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 41112 | EXCISION OF LESION OF TONGUE WIT | 1/1/2007 | $194.37 | 3 |
| 2 | 41113 | EXCISION OF LESION OF TONGUE WIT | 1/1/2007 | $214.87 | 3 |
| 2 | 41114 | EXCISION OF LESION OF TONGUE WIT | 1/1/2007 | $428.18 | 3 |
| 2 | 41115 | EXCISION OF LINGUAL FRENUM (FREN | 1/1/2007 | $135.46 | 3 |
| 2 | 41116 | EXCISION LESION OF FLOOR OF MOUT | 1/1/2007 | $182.43 | 3 |
| 2 | 41120 | GLOSSECTOMY LESS THAN ONE-HALF T | 1/1/2007 | $672.11 | 3 |
| 2 | 41130 | GLOSSECTOMY; HEMIGLOSSECTOMY | 1/1/2007 | $734.39 | 3 |
| 2 | 41135 | GLOSSECTOMY; PARTIAL WITH UNILAT | 1/1/2007 | $1,251.57 | 3 |
| 2 | 41140 | GLOSSECTOMY COMPLETE OR TOTAL WI | 1/1/2007 | $1,413.50 | 3 |
| 2 | 41145 | GLOSSECTOMY COMPLETE OR TOTAL WI | 1/1/2007 | $1,639.52 | 3 |
| 2 | 41150 | GLOSSECTOMY COMPOSITE PROCEDURE | 1/1/2007 | $1,290.49 | 3 |
| 2 | 41153 | GLOSSECTOMY COMPOSITE PROCEDURE | 1/1/2007 | $1,318.78 | 3 |
| 2 | 41155 | GLOSSECTOMY COMPOSITE PRODEDURE | 1/1/2007 | $1,476.30 | 3 |
| 2 | 41250 | REPAIR LACERATION 2.5 CM OR LESS | 1/1/2007 | $125.60 | 3 |
| 2 | 41251 | REPAIR LACERATION UP TO 2 CM; PO | 1/1/2007 | $149.73 | 3 |
| 2 | 41252 | REPAIR LACERATION OF TONGUE FLOO | 1/1/2007 | $185.80 | 3 |
| 2 | 41500 | FIXATION TONGUE MECHANICAL OTHER | 1/1/2007 | $297.65 | 3 |
| 2 | 41510 | SUTURE TONGUE TO LIP FOR MICROGN | 1/1/2007 | $299.98 | 3 |
| 2 | 41520 | FRENOPLASTY (SURGICAL REVISION O | 1/1/2007 | $198.00 | 3 |
| 2 | 41599 | UNLISTED PROCEDURE TONGUE FLOOR | 2/1/1989 | $0.01 | 5 |
| 2 | 41800 | DRAINAGE ABSCESS CYST HEMATOMA | 1/1/2007 | $100.95 | 3 |
| 2 | 41805 | REMOVAL EMBEDDED FOREIGN BODY FR | 1/1/2007 | $105.10 | 3 |
| 2 | 41806 | REMOVAL EMBEDDED FOREIGN BODY; F | 1/1/2007 | $172.57 | 3 |
| 2 | 41820 | GINGIVECTOMY EXCISION GINGIVA EA | 10/1/2000 | $87.61 | 3 |
| 2 | 41821 | OPERCULECTOMY EXCISION PERICORON | 10/1/2000 | $26.27 | 3 |
| 2 | 41822 | EXCISION FIBROUS TUBEROSITIES | 1/1/2007 | $169.19 | 3 |
| 2 | 41823 | EXCISION OSSEOUS TUBEROSITIES | 1/1/2007 | $242.63 | 3 |
| 2 | 41825 | EXCISION OF LESION OR TUMOR (EXC | 1/1/2007 | $117.55 | 3 |
| 2 | 41826 | EXCISION OF LESION OR TUMOR (EXC | 1/1/2007 | $131.05 | 3 |
| 2 | 41827 | EXCISION OF LESION OR TUMOR (EXC | 1/1/2007 | $241.08 | 3 |
| 2 | 41828 | EXCISION OF HYPERPLASTIC ALVEOLA | 1/1/2007 | $190.47 | 3 |
| 2 | 41830 | ALVEOLECTOMY INCLUDING CURETTAGE | 1/1/2007 | $227.06 | 3 |
| 2 | 41850 | DESTRUCTION OF LESION (EXCEPT EX | 10/1/2000 | $17.51 | 3 |
| 2 | 41870 | PERIODONTAL MUCOSAL GRAFTING | 2/1/1994 | NC | 9 |
| 2 | 41872 | GINGIVOPLASTY, EACH QUADRANT (SP | 2/1/1994 | NC | 9 |
| 2 | 41874 | ALVEOLOPLASTY, EACH QUADRANT (SP | 2/1/1993 | NC | 9 |
| 2 | 41899 | UNLISTED PROCEDURE DENTOALVEOIAR | 9/20/1993 | $0.01 | 5 |
| 2 | 42000 | DRAINAGE OF ABSCESS OF PALATE UV | 1/1/2007 | $101.72 | 3 |
| 2 | 42100 | BIOPSY OF PALATE UVULA | 1/1/2007 | $91.60 | 3 |
| 2 | 42104 | EXCISION LESION OF PALATE UVULA | 1/1/2007 | $112.88 | 3 |
| 2 | 42106 | EXCISION LESION OF PALATE UVULA; | 1/1/2007 | $144.80 | 3 |
| 2 | 42107 | EXCISION LESION OF PALATE UVULA; | 1/1/2007 | $275.07 | 3 |
| 2 | 42120 | RESECTION PALATE OR EXTENSIVE RE | 1/1/2007 | $479.56 | 3 |
| 2 | 42140 | UVULECTOMY EXCISION OF UVULA | 1/1/2007 | $142.21 | 3 |
| 2 | 42145 | PALATOPHARYNGOPLASTY (EG UVULOPA | 1/1/2007 | $420.39 | 3 |
| 2 | 42160 | DESTRUCTION OF LESION PALATE OR | 1/1/2007 | $161.67 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 42180 | REPAIR LACERATION OF PALATE UP T | 10/1/2005 | $149.99 | 3 |
| 2 | 42182 | REPAIR LACERATION OF PALATE; OVE | 1/1/2007 | $210.20 | 3 |
| 2 | 42200 | PALATOPLASTY FOR CLEFT PALATE SO | 1/1/2007 | $609.57 | 3 |
| 2 | 42205 | PALATOPLASTY FOR CLEFT PALATE WI | 1/1/2007 | $647.45 | 3 |
| 2 | 42210 | PALATOPLASTY FOR CLEFT PALATE WI | 1/1/2007 | $729.97 | 3 |
| 2 | 42215 | PALATOPLASTY FOR CLEFT PALATE MA | 1/1/2007 | $498.76 | 3 |
| 2 | 42220 | PALATOPLASTY FOR CLEFT PALATE; S | 1/1/2007 | $377.31 | 3 |
| 2 | 42225 | PALATOPLASTY FOR CLEFT PALATE; A | 1/1/2007 | $713.63 | 3 |
| 2 | 42226 | LENGTHENING OF PALATE, AND PHARY | 1/1/2007 | $667.95 | 3 |
| 2 | 42227 | LENGTHENING OF PALATE, WITH ISLA | 1/1/2007 | $676.78 | 3 |
| 2 | 42235 | REPAIR ANTERIOR PALATE INCLUDING | 1/1/2007 | $531.20 | 3 |
| 2 | 42260 | REPAIR NASOLABIAL FISTULA | 1/1/2007 | $551.96 | 3 |
| 2 | 42280 | MAXILLARY IMPRESSION FOR PALATAL | 1/1/2007 | $96.02 | 3 |
| 2 | 42281 | INSERTION OF PIN-RETAINED PALATA | 1/1/2007 | $123.00 | 3 |
| 2 | 42299 | UNLISTED PROCEDURE PALATE UVULA | 4/1/1982 | $0.01 | 5 |
| 2 | 42300 | DRAINAGE ABSCESS PAROTID SIMPLE | 1/1/2007 | $127.67 | 3 |
| 2 | 42305 | DRAINAGE ABSCESS; PAROTID COMPLI | 1/1/2007 | $293.24 | 3 |
| 2 | 42310 | SUBMAXILLARY OR SUBLINGUAL INTRA | 1/1/2007 | $102.76 | 3 |
| 2 | 42320 | DRAINAGE ABSCESS; SUBMAXILLARY E | 1/1/2007 | $151.55 | 3 |
| 2 | 42325 | FISTULIZATION SUBLINGUAL SALIVAR | 1/1/2006 | INVALID | N |
| 2 | 42326 | FISTULIZATION SUBLINGUAL SALIVAR | 1/1/2006 | INVALID | N |
| 2 | 42330 | SIALOLITHOTOMY SUBMANDIBULAR (SU | 1/1/2007 | $144.02 | 3 |
| 2 | 42335 | SIALOLITHOTOMY SUBMANDIBULAR (SU | 1/1/2007 | $220.83 | 3 |
| 2 | 42340 | SIALOLITHOTOMY; PAROTID EXTRAORA | 1/1/2007 | $287.27 | 3 |
| 2 | 42400 | BIOPSY SALIVARY GLAND NEEDLE | 1/1/2007 | $64.62 | 3 |
| 2 | 42405 | BIOPSY SALIVARY GLAND; INCISIONA | 1/1/2007 | $196.70 | 3 |
| 2 | 42408 | EXCISION SUBLINGUAL SALIVARY CYS | 1/1/2007 | $283.11 | 3 |
| 2 | 42409 | MARSUPIALIZATION SUBLINGUAL SALI | 1/1/2007 | $197.48 | 3 |
| 2 | 42410 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $427.66 | 3 |
| 2 | 42415 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $757.22 | 3 |
| 2 | 42420 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $872.44 | 3 |
| 2 | 42425 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $588.55 | 3 |
| 2 | 42426 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $936.28 | 3 |
| 2 | 42440 | EXCISION SUBMANDIBULAR (SUBMAXIL | 1/1/2007 | $320.48 | 3 |
| 2 | 42450 | EXCISION SUBLINGUAL GLAND | 1/1/2007 | $284.15 | 3 |
| 2 | 42500 | PLASTIC REPAIR SALIVARY DUCT SIA | 1/1/2007 | $269.88 | 3 |
| 2 | 42505 | PLASTIC REPAIR SALIVARY DUCT SIA | 1/1/2007 | $359.67 | 3 |
| 2 | 42507 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $340.98 | 3 |
| 2 | 42508 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $479.82 | 3 |
| 2 | 42509 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $588.29 | 3 |
| 2 | 42510 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $431.03 | 3 |
| 2 | 42550 | INJECTION PROCEDURE FOR SIALOGRA | 1/1/2007 | $117.81 | 3 |
| 2 | 42600 | CLOSURE SALIVARY FISTULA | 1/1/2007 | $307.25 | 3 |
| 2 | 42650 | DILATION SALIVARY DUCT | 1/1/2007 | $50.34 | 3 |
| 2 | 42660 | DILATION AND CATHETERIZATION OF | 1/1/2007 | $66.69 | 3 |
| 2 | 42665 | LIGATION SALIVARY DUCT INTRAORAL | 1/1/2007 | $180.09 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 42699 | UNLISTED PROCEDURE SALIVARY GLAN | 4/1/1982 | $0.01 | 5 |
| 2 | 42700 | INCISION AND DRAINAGE ABSCESS PE | 1/1/2007 | $114.44 | 3 |
| 2 | 42720 | INCISION AND DRAINAGE ABSCESS RE | 1/1/2007 | $277.41 | 3 |
| 2 | 42725 | INCISION AND DRAINAGE ABSCESS RE | 1/1/2007 | $515.11 | 3 |
| 2 | 42800 | BIOPSY OROPHARYNX | 1/1/2007 | $95.76 | 3 |
| 2 | 42802 | BIOPSY; HYPOPHARYNX | 1/1/2007 | $166.86 | 3 |
| 2 | 42804 | BIOPSY; NASOPHARYNX VISIBLE LESI | 1/1/2007 | $132.09 | 3 |
| 2 | 42806 | BIOPSY; NASOPHARYNX SURVEY FOR U | 1/1/2007 | $150.25 | 3 |
| 2 | 42808 | EXCISION OR DESTRUCTION OF LESIO | 1/1/2007 | $145.06 | 3 |
| 2 | 42809 | REMOVAL OF FOREIGN BODY FROM PHA | 1/1/2007 | $111.84 | 3 |
| 2 | 42810 | EXCISION BRANCHIAL CLEFT CYST OR | 1/1/2007 | $240.56 | 3 |
| 2 | 42815 | EXCISION BRANCHIAL CLEFT CYST, V | 1/1/2007 | $365.90 | 3 |
| 2 | 42820 | TONSILLECTOMY AND ADENOIDECTOMY | 1/1/2007 | $194.88 | 3 |
| 2 | 42821 | TONSILLECTOMY AND ADENOIDECTOMY; | 1/1/2007 | $211.23 | 3 |
| 2 | 42825 | TONSILLECTOMY PRIMARY OR SECONDA | 1/1/2007 | $177.50 | 3 |
| 2 | 42826 | TONSILLECTOMY PRIMARY OR SECONDA | 1/1/2007 | $173.35 | 3 |
| 2 | 42830 | ADENOIDECTOMY PRIMARY UNDER AGE | 1/1/2007 | $138.57 | 3 |
| 2 | 42831 | ADENOIDECTOMY PRIMARY; AGE 12 OR | 1/1/2007 | $149.99 | 3 |
| 2 | 42835 | ADENOIDECTOMY SECONDARY UNDER AG | 1/1/2007 | $129.23 | 3 |
| 2 | 42836 | ADENOIDECTOMY SECONDARY; AGE 12 | 1/1/2007 | $166.34 | 3 |
| 2 | 42842 | RADICAL RESECTION OF TONSIL, TON | 1/1/2007 | $531.46 | 3 |
| 2 | 42844 | RADICAL RESECTION OF TONSIL TONS | 1/1/2007 | $823.39 | 3 |
| 2 | 42845 | RADICAL RESECTION OF TONSIL TONS | 1/1/2007 | $1,284.01 | 3 |
| 2 | 42860 | EXCISION OF TONSIL TAGS | 1/1/2007 | $124.82 | 3 |
| 2 | 42870 | EXCISION OR DESTRUCTION LINGUAL | 1/1/2007 | $374.20 | 3 |
| 2 | 42890 | LIMITED PHARYNGECTOMY WITHOUT RA | 1/1/2007 | $730.75 | 3 |
| 2 | 42892 | RESECTION OF LATERAL PHARYNGEAL | 1/1/2007 | $890.34 | 3 |
| 2 | 42894 | RESECTION OF PHARYNGEAL WALL REQ | 1/1/2007 | $1,214.20 | 3 |
| 2 | 42900 | SUTURE PHARYNX FOR WOUND OR INJU | 1/1/2007 | $244.19 | 3 |
| 2 | 42950 | PHARYNGOPLASTY (PLASTIC OR RECON | 1/1/2007 | $537.42 | 3 |
| 2 | 42953 | PHARYNGOESOPHAGEAL REPAIR | 1/1/2007 | $706.10 | 3 |
| 2 | 42955 | PHARYNGOSTOMY (FISTULIZATION OF | 1/1/2007 | $489.94 | 3 |
| 2 | 42960 | CONTROL OROPHARYNEAL HEMORRHAGE | 1/1/2007 | $116.52 | 3 |
| 2 | 42961 | CONTROL OROPHARYNGEAL HEMORRHAGE | 1/1/2007 | $285.45 | 3 |
| 2 | 42962 | CONTROL OROPHARYNGEAL HEMORRHAGE | 1/1/2007 | $353.96 | 3 |
| 2 | 42970 | CONTROL OF NASOPHARYNGEAL HEMORR | 1/1/2007 | $259.50 | 3 |
| 2 | 42971 | CONTROL OF NASOPHARYNGEAL HEMORR | 1/1/2007 | $307.25 | 3 |
| 2 | 42972 | CONTROL OF NASOPHARYNGEAL HEMORR | 1/1/2007 | $351.10 | 3 |
| 2 | 42999 | UNLISTED PROCEDURE PHARYNX ADENO | 4/1/1982 | $0.01 | 5 |
| 2 | 43020 | ESOPHAGOTOMY CERVICAL APPROACH; | 1/1/2007 | $373.16 | 3 |
| 2 | 43030 | CRICOPHARYNGEAL MYOTOMY | 1/1/2007 | $360.45 | 3 |
| 2 | 43045 | ESOPHAGOTOMY, THORACIC APPROACH, | 1/1/2007 | $866.73 | 3 |
| 2 | 43100 | EXCISION OF LESION, ESOPHAGUS, W | 1/1/2007 | $424.28 | 3 |
| 2 | 43101 | EXCISION OF LESION, ESOPHAGUS, W | 1/1/2007 | $685.86 | 3 |
| 2 | 43107 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $1,647.05 | 3 |
| 2 | 43108 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $1,361.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 43112 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $1,781.21 | 3 |
| 2 | 43113 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $1,421.80 | 3 |
| 2 | 43116 | PARTIAL ESOPHAGECTOMY, CERVICAL, | 1/1/2007 | $1,322.41 | 3 |
| 2 | 43117 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $1,620.06 | 3 |
| 2 | 43118 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $1,325.27 | 3 |
| 2 | 43121 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $1,213.42 | 3 |
| 2 | 43122 | PARTIAL ESOPHAGECTOMY, THORACOAB | 1/1/2007 | $1,629.14 | 3 |
| 2 | 43123 | PARTIAL ESOPHAGECTOMY, THORACOAB | 1/1/2007 | $1,334.87 | 3 |
| 2 | 43124 | TOTAL OR PARTIAL ESOPHAGECTOMY, | 1/1/2007 | $1,145.17 | 3 |
| 2 | 43130 | DIVERTICULECTOMY HYPOPHARYNX OR | 1/1/2007 | $531.20 | 3 |
| 2 | 43135 | DIVERTICULECTOMY HYPOPHARYNX OR | 1/1/2007 | $688.19 | 3 |
| 2 | 43200 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $152.07 | 3 |
| 2 | 43201 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $178.54 | 3 |
| 2 | 43202 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $197.22 | 3 |
| 2 | 43204 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $144.80 | 3 |
| 2 | 43205 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $144.80 | 3 |
| 2 | 43215 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $104.32 | 3 |
| 2 | 43216 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $94.98 | 3 |
| 2 | 43217 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $262.87 | 3 |
| 2 | 43219 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $113.92 | 3 |
| 2 | 43220 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $84.08 | 3 |
| 2 | 43226 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $92.38 | 3 |
| 2 | 43227 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $138.05 | 3 |
| 2 | 43228 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $146.62 | 3 |
| 2 | 43231 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $122.74 | 3 |
| 2 | 43232 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2007 | $172.05 | 3 |
| 2 | 43234 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $195.14 | 3 |
| 2 | 43235 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $201.37 | 3 |
| 2 | 43236 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $247.82 | 3 |
| 2 | 43237 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $155.70 | 3 |
| 2 | 43238 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $192.55 | 3 |
| 2 | 43239 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $228.88 | 3 |
| 2 | 43240 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $260.02 | 3 |
| 2 | 43241 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $101.21 | 3 |
| 2 | 43242 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $274.29 | 3 |
| 2 | 43243 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $173.61 | 3 |
| 2 | 43244 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $191.51 | 3 |
| 2 | 43245 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $123.00 | 3 |
| 2 | 43246 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $164.78 | 3 |
| 2 | 43247 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $130.27 | 3 |
| 2 | 43248 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $121.71 | 3 |
| 2 | 43249 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $112.36 | 3 |
| 2 | 43250 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $123.78 | 3 |
| 2 | 43251 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $141.69 | 3 |
| 2 | 43255 | UGI ENDOSCOPY INCLUDING ESOPHAGU | 1/1/2007 | $182.95 | 3 |
| 2 | 43256 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $165.30 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 43257 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2005 | NC | 9 |
| 2 | 43258 | UGI ENDOSCOPY INCLUDING ESOPHAGU | 1/1/2007 | $172.83 | 3 |
| 2 | 43259 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2007 | $195.66 | 3 |
| 2 | 43260 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 1/1/2007 | $224.99 | 3 |
| 2 | 43261 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 1/1/2007 | $236.66 | 3 |
| 2 | 43262 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 1/1/2007 | $277.92 | 3 |
| 2 | 43263 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 1/1/2007 | $274.81 | 3 |
| 2 | 43264 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 1/1/2007 | $333.72 | 3 |
| 2 | 43265 | ERCP; WITH ENDOSCOPIC RETROGRADE | 1/1/2007 | $374.46 | 3 |
| 2 | 43267 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 1/1/2007 | $277.92 | 3 |
| 2 | 43268 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 1/1/2007 | $280.52 | 3 |
| 2 | 43269 | ERCP,W/ENDOSCOPIC RETROGRADE REM | 1/1/2007 | $308.29 | 3 |
| 2 | 43271 | ERCP; W/ENDOSCOPIC RETROGRADE BA | 1/1/2007 | $277.92 | 3 |
| 2 | 43272 | ERCP; W/ABLATION OF TUMOR(S), PO | 1/1/2007 | $277.92 | 3 |
| 2 | 43280 | LAPAROSCOPY, SURGICAL, ESOPHAGOG | 1/1/2007 | $694.94 | 3 |
| 2 | 43289 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 43300 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $431.81 | 3 |
| 2 | 43305 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $768.64 | 3 |
| 2 | 43310 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $1,039.04 | 3 |
| 2 | 43312 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $1,149.59 | 3 |
| 2 | 43313 | ESOPHAGOPLASTY FOR CONGENITAL DE | 1/1/2007 | $1,804.04 | 3 |
| 2 | 43314 | ESOPHAGOPLASTY FOR CONGENITAL DE | 1/1/2007 | $1,973.76 | 3 |
| 2 | 43320 | ESOPHAGOGASTROSTOMY (CARDIOPLAST | 1/1/2007 | $826.77 | 3 |
| 2 | 43324 | ESOPHAGOGASTRIC FUNDOPLASTY (EG | 1/1/2007 | $832.48 | 3 |
| 2 | 43325 | ESOPHAGOGASTRIC FUNDOPLASTY WITH | 1/1/2007 | $815.61 | 3 |
| 2 | 43326 | ESOPHAGOGASTRIC FUNDOPLASTY; WIT | 1/1/2007 | $827.03 | 3 |
| 2 | 43330 | ESOPHAGOMYTOMY (HELLER TYPE); AB | 1/1/2007 | $802.11 | 3 |
| 2 | 43331 | ESOPHAGOMYOTOMY ((HELLER TYPE) W | 1/1/2007 | $852.20 | 3 |
| 2 | 43340 | ESOPHAGOJEJUNOSTOMY (WITHOUT TOT | 1/1/2007 | $804.97 | 3 |
| 2 | 43341 | ESOPHAGOJEJUNOSTOMY (WITHOUT TOT | 1/1/2007 | $876.33 | 3 |
| 2 | 43350 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $665.36 | 3 |
| 2 | 43351 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $794.07 | 3 |
| 2 | 43352 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $666.66 | 3 |
| 2 | 43360 | GASTROINTESTINAL RECONSTRUCTION | 1/1/2007 | $1,445.93 | 3 |
| 2 | 43361 | GASTROINTESTINAL RECONSTRUCTION | 1/1/2007 | $1,605.27 | 3 |
| 2 | 43400 | LIGATION DIRECT ESOPHAGEAL VARIC | 1/1/2007 | $845.45 | 3 |
| 2 | 43401 | TRANSECTION OF ESOPHAGUS WITH RE | 1/1/2007 | $898.13 | 3 |
| 2 | 43405 | LIGATION OR STAPLING AT GASTROES | 1/1/2007 | $841.30 | 3 |
| 2 | 43410 | SUTURE ESOPHAGEAL WOUND OR INJUR | 1/1/2007 | $591.92 | 3 |
| 2 | 43415 | SUTURE OF ESOPHAGEAL WOUND OR IN | 1/1/2007 | $1,044.49 | 3 |
| 2 | 43420 | CLOSURE ESOPHAGOSTOMY OR FISTULA | 1/1/2007 | $601.52 | 3 |
| 2 | 43425 | CLOSURE OF ESOPHAGOSTOMY OR FIST | 1/1/2007 | $882.82 | 3 |
| 2 | 43450 | DILATION ESOPHAGUS, BY UNGUIDED | 1/1/2007 | $107.17 | 3 |
| 2 | 43453 | DILATION ESOPHAGUS OVER GUIDE WI | 1/1/2007 | $199.82 | 3 |
| 2 | 43456 | DILATION ESOPHAGUS BY BALLOON OR | 1/1/2007 | $429.47 | 3 |
| 2 | 43458 | DILATION OF ESOPHAGUS WITH BALLO | 1/1/2007 | $258.72 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 43460 | ESOPHAGOGASTRIC TAMPONADE WITH B | 1/1/2007 | $145.06 | 3 |
| 2 | 43496 | FREE JEJUNUM TRANSFER WITH MICRO | 1/1/1997 | $0.01 | 5 |
| 2 | 43499 | UNLISTED PROCEDURE ESOPHAGUS | 4/1/1982 | $0.01 | 5 |
| 2 | 43500 | GASTROTOMY WITH EXPLORATION OR F | 1/1/2007 | $453.09 | 3 |
| 2 | 43501 | GASTROTOMY; WITH SUTURE REPAIR O | 1/1/2007 | $803.67 | 3 |
| 2 | 43502 | GASTROTOMY; WITH SUTURE REPAIR O | 1/1/2007 | $925.64 | 3 |
| 2 | 43510 | GASTROTOMY; WITH ESOPHAGEAL DILA | 1/1/2007 | $548.58 | 3 |
| 2 | 43520 | PYLOROMYOTOMY CUTTING OF PYLORIC | 1/1/2007 | $431.03 | 3 |
| 2 | 43600 | BIOPSY OF STOMACH BY CAPSULE TUB | 1/1/2007 | $70.32 | 3 |
| 2 | 43605 | BIOPSY OF STOMACH; BY LAPAROTOMY | 1/1/2007 | $488.90 | 3 |
| 2 | 43610 | EXCISION, LOCAL; ULCER OR BENIGN | 1/1/2007 | $588.29 | 3 |
| 2 | 43611 | EXCISION, LOCAL; MALIGNANT TUMOR | 1/1/2007 | $719.85 | 3 |
| 2 | 43620 | GASTRECTOMY, TOTAL; WITH ESOPHAG | 1/1/2007 | $1,187.47 | 3 |
| 2 | 43621 | GASTRECTOMY, TOTAL; WITH ROUX-EN | 1/1/2007 | $1,212.12 | 3 |
| 2 | 43622 | GASTRECTOMY, TOTAL; WITH FORMATI | 1/1/2007 | $1,281.67 | 3 |
| 2 | 43631 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $900.98 | 3 |
| 2 | 43632 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $900.98 | 3 |
| 2 | 43633 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $920.45 | 3 |
| 2 | 43634 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $999.33 | 3 |
| 2 | 43635 | VAGOTOMY W/PARTIAL DISTAL GASTRE | 1/1/2007 | $78.63 | 3 |
| 2 | 43638 | GASTRECTOMY, PARTIAL, PROXIMAL, | 1/1/2006 | INVALID | N |
| 2 | 43639 | GASTRECTOMY, PARTIAL, PROXIMAL; | 1/1/2006 | INVALID | N |
| 2 | 43640 | VAGOTOMY INCLUDING PYLOROPLASTY | 1/1/2007 | $687.93 | 3 |
| 2 | 43641 | VAGOTOMY INCLUDING PYLOROPLASTY | 1/1/2007 | $697.02 | 3 |
| 2 | 43644 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2005 | NC | 9 |
| 2 | 43645 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2005 | NC | 9 |
| 2 | 43647 | LAPAROSCOPY, SURGICAL; IMPLANT O | 1/1/2007 | NC | 9 |
| 2 | 43648 | LAPAROSCOPY, SURGICAL; REVISION | 1/1/2007 | NC | 9 |
| 2 | 43651 | LAPAROSCOPY, SURGICAL; TRANSECTI | 1/1/2007 | $421.17 | 3 |
| 2 | 43652 | LAPAROSCOPY, SURGICAL; TRANSECTI | 1/1/2007 | $504.73 | 3 |
| 2 | 43653 | LAPAROSCOPY, SURGICAL; GASTROSTO | 1/1/2007 | $335.27 | 3 |
| 2 | 43659 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 43750 | PERCUTANEOUS PLACEMENT OF GASTRO | 1/1/2007 | $184.50 | 3 |
| 2 | 43752 | NASO- OR ORO-GASTRIC TUBE PLACEM | 1/1/2007 | $28.80 | 3 |
| 2 | 43760 | CHANGE OF GASTROSTOMY TUBE | 1/1/2007 | $85.12 | 3 |
| 2 | 43761 | REPOSITIONING OF THE GASTRIC FEE | 1/1/2007 | $85.89 | 3 |
| 2 | 43770 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2006 | NC | 9 |
| 2 | 43771 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2006 | NC | 9 |
| 2 | 43772 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2006 | NC | 9 |
| 2 | 43773 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2006 | NC | 9 |
| 2 | 43774 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2006 | NC | 9 |
| 2 | 43800 | PYLOROPLASTY | 1/1/2007 | $555.07 | 3 |
| 2 | 43810 | GASTRODUODENOSTOMY | 1/1/2007 | $590.36 | 3 |
| 2 | 43820 | GASTROJEJUNOSTOMY; WITHOUT VAGOT | 1/1/2007 | $617.61 | 3 |
| 2 | 43825 | GASTROJEJUNOSTOMY; WITH VAGOTOMY | 1/1/2007 | $772.01 | 3 |
| 2 | 43830 | GASTROSTOMY TEMPORARY (TUBE RUBB | 1/1/2007 | $405.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 43831 | GASTROSTOMY TEMPORARY (TUBE RUBB | 1/1/2007 | $347.21 | 3 |
| 2 | 43832 | GASTROSTOMY PERMANENT WITH CONST | 1/1/2007 | $633.44 | 3 |
| 2 | 43840 | GASTRORRHAPHY SUTURE OF PERFORAT | 1/1/2007 | $632.40 | 3 |
| 2 | 43842 | GASTRIC RESTRICTIVE PROCEDURE, W | 1/1/2007 | $744.51 | 3 |
| 2 | 43843 | GASTRIC RESTRICTIVE PROC, W/OUT | 1/1/2007 | $748.66 | 3 |
| 2 | 43845 | GASTRIC RESTRICTIVE PROC W/PARTI | 1/1/2005 | NC | 9 |
| 2 | 43846 | GASTRIC RESTRICTIVE PROC, W/GAST | 1/1/2007 | $966.38 | 3 |
| 2 | 43847 | GASTRIC RESTRICTIVE PROCEDURE, W | 1/1/1994 | NC | 9 |
| 2 | 43848 | REVISION, OPEN, OF GASTRIC RESTR | 1/1/1995 | NC | 9 |
| 2 | 43850 | REVISION OF GASTRODUODENAL ANAST | 1/1/2007 | $980.65 | 3 |
| 2 | 43855 | REVISION OF GASTRODUODENAL ANAST | 1/1/2007 | $1,036.18 | 3 |
| 2 | 43860 | REVISION OF GASTROJEJUNAL ANASTO | 1/1/2007 | $992.59 | 3 |
| 2 | 43865 | REVISION OF GASTROJEJUNAL ANASTO | 1/1/2007 | $1,051.23 | 3 |
| 2 | 43870 | CLOSURE OF GASTROSTOMY SURGICAL | 1/1/2007 | $401.45 | 3 |
| 2 | 43880 | CLOSURE OF GASTROCOLIC FISTULA | 1/1/2007 | $980.65 | 3 |
| 2 | 43881 | IMPLANTATION OR REPLACEMENT OF G | 1/1/2007 | NC | 9 |
| 2 | 43882 | REVISION OR REMOVAL OF GASTRIC N | 1/1/2007 | NC | 9 |
| 2 | 43886 | GASTRIC RESTRICTIVE PROC, OPEN; | 1/1/2006 | NC | 9 |
| 2 | 43887 | GASTRIC RESTRICTIVE PROCEDURE, O | 1/1/2006 | NC | 9 |
| 2 | 43888 | GASTRIC RESTRICTIVE PROC, OPEN; | 1/1/2006 | NC | 9 |
| 2 | 43999 | UNLISTED PROCEDURE STOMACH | 2/1/1994 | $0.01 | 5 |
| 2 | 44005 | ENTEROLYSIS (FREEING OF INTESTIN | 1/1/2007 | $650.83 | 3 |
| 2 | 44010 | DUODENOTOMY, FOR EXPLORATION, BI | 1/1/2007 | $508.62 | 3 |
| 2 | 44015 | TUBE OR NEEDLE CATHETER JEJUNOST | 1/1/2007 | $99.91 | 3 |
| 2 | 44020 | ENTEROTOMY, SMALL INTESTINE, OTH | 1/1/2007 | $564.93 | 3 |
| 2 | 44021 | ENTEROTOMY SMALL BOWELL OTHER TH | 1/1/2007 | $568.31 | 3 |
| 2 | 44025 | COLOTOMY, FOR EXPLORATION, BIOPS | 1/1/2007 | $575.83 | 3 |
| 2 | 44050 | REDUCTION OF VOLVULUS INTUSSUSCE | 1/1/2007 | $566.49 | 3 |
| 2 | 44055 | CORRECTION OF MALROTATION BY LYS | 1/1/2007 | $872.44 | 3 |
| 2 | 44100 | BIOPSY OF INTESTINE BY CAPSULE T | 1/1/2007 | $75.00 | 3 |
| 2 | 44110 | EXCISION OF ONE OR MORE LESIONS | 1/1/2007 | $482.15 | 3 |
| 2 | 44111 | EXCISION OF ONE OR MORE LESIONS | 1/1/2007 | $577.39 | 3 |
| 2 | 44120 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $682.49 | 3 |
| 2 | 44121 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $169.71 | 3 |
| 2 | 44125 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $701.69 | 3 |
| 2 | 44126 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $1,408.57 | 3 |
| 2 | 44127 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $1,620.58 | 3 |
| 2 | 44128 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $170.75 | 3 |
| 2 | 44130 | ENTEROENTEROSTOMY, ANASTOMOSIS O | 1/1/2007 | $585.69 | 3 |
| 2 | 44132 | DONOR ENTERECTOMY (INCLUDING COL | 10/1/2005 | NC | 9 |
| 2 | 44133 | DONOR ENTERECTOMY (INCLUDING COL | 10/1/2005 | NC | 9 |
| 2 | 44135 | INTESTINAL ALLOTRANSPLANTATION; | 1/1/2005 | $0.01 | 5 |
| 2 | 44136 | INTESTINAL ALLOTRANSPLANTATION; | 10/1/2005 | NC | 9 |
| 2 | 44137 | REMOVAL OF TRANSPLANTED INTESTIN | 1/1/2005 | $0.01 | 5 |
| 2 | 44139 | MOBILIZATION (TAKE-DOWN) OF SPLE | 1/1/2007 | $84.86 | 3 |
| 2 | 44140 | COLECTOMY PARTIAL WITH ANASTOMOS | 1/1/2007 | $839.22 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 44141 | COLLECTOMY PARTIAL; WITH SKIN LE | 1/1/2007 | $832.22 | 3 |
| 2 | 44143 | COLECTOMY PARTIAL; WITH END COLO | 1/1/2007 | $952.62 | 3 |
| 2 | 44144 | COLECTOMY PARTIAL; WITH RESECTIO | 1/1/2007 | $882.04 | 3 |
| 2 | 44145 | COLECTOMY PARTIAL; WITH COLOPROC | 1/1/2007 | $1,050.72 | 3 |
| 2 | 44146 | COLECTOMY PARTIAL; WITH COLOPROC | 1/1/2007 | $1,136.35 | 3 |
| 2 | 44147 | COLECTOMY PARTIAL ABDOMINAL AND | 1/1/2007 | $828.84 | 3 |
| 2 | 44150 | COLECTOMY TOTAL ABDOMINAL WITHOU | 1/1/2007 | $1,011.79 | 3 |
| 2 | 44151 | COLECTOMY TOTAL ABDOMINAL WITHOU | 1/1/2007 | $1,135.31 | 3 |
| 2 | 44152 | COLECTOMY,TOTAL,ABDOMINAL,W/O PR | 1/1/2007 | INVALID | N |
| 2 | 44153 | COLECTOMY,TOTAL,ABDOM,W/O PROCTE | 1/1/2007 | INVALID | N |
| 2 | 44155 | COLECTOMY TOTAL ABDOMINAL WITH P | 1/1/2007 | $1,152.96 | 3 |
| 2 | 44156 | COLECTOMY TOTAL ABDOMINAL WITH P | 1/1/2007 | $1,291.01 | 3 |
| 2 | 44157 | COLECTOMY, TOTAL, ABDOMINAL, W/P | 1/1/2007 | $1,429.59 | 3 |
| 2 | 44158 | COLECTOMY, TOTAL, ABDOMINAL, W/P | 1/1/2007 | $1,466.69 | 3 |
| 2 | 44160 | COLECTOMY, PARTIAL, WITH REMOVAL | 1/1/2007 | $745.02 | 3 |
| 2 | 44180 | LAPAROSCOPY, SURGICAL,ENTEROLYSI | 1/1/2007 | $584.39 | 3 |
| 2 | 44186 | LAPAROSCOPY, SURGICAL; JEJUNOSTO | 1/1/2007 | $411.05 | 3 |
| 2 | 44187 | LAPAROSCOPY, SURGICAL; ILEOSTOMY | 1/1/2007 | $679.11 | 3 |
| 2 | 44188 | LAPAROSCOPY, SURGICAL, COLOSTOMY | 1/1/2007 | $745.02 | 3 |
| 2 | 44200 | LAPAROSCOPY, SURGICAL; ENTEROLYS | 1/1/2006 | INVALID | N |
| 2 | 44201 | LAPAROSCOPY, SURGICAL; JEJUNOSTO | 1/1/2006 | INVALID | N |
| 2 | 44202 | LAPAROSCOPY, SURGICAL; ENTERECTO | 1/1/2007 | $877.11 | 3 |
| 2 | 44203 | LAPAROSCOPY, SURGICAL; EACH ADDI | 1/1/2007 | $168.93 | 3 |
| 2 | 44204 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $989.21 | 3 |
| 2 | 44205 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $877.37 | 3 |
| 2 | 44206 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $1,081.86 | 3 |
| 2 | 44207 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $1,171.12 | 3 |
| 2 | 44208 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $1,271.29 | 3 |
| 2 | 44209 | UNLISTED LAPAROSCOPY PROCEDURE, | 7/1/2003 | INVALID | N |
| 2 | 44210 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $1,122.86 | 3 |
| 2 | 44211 | LAPAROSCOPY,SURGICAL; COLECTOMY, | 1/1/2007 | $1,396.63 | 3 |
| 2 | 44212 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $1,295.94 | 3 |
| 2 | 44213 | LAPAROSCOPY, SURGICAL, MOBILIZAT | 1/1/2007 | $133.90 | 3 |
| 2 | 44227 | LAPAROSCOPY, SURGICAL, CLOSURE O | 1/1/2007 | $1,051.49 | 3 |
| 2 | 44238 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2003 | $0.01 | 5 |
| 2 | 44239 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2006 | INVALID | N |
| 2 | 44300 | ENTEROSTOMY OR CECOSTOMY, TUBE ( | 1/1/2007 | $497.98 | 3 |
| 2 | 44310 | ILEOSTOMY OR JEJUNOSTOMY, NON-TU | 1/1/2007 | $638.89 | 3 |
| 2 | 44312 | REVISION OF ILEOSTOMY;SIMPLE (RE | 1/1/2007 | $335.53 | 3 |
| 2 | 44314 | REVISION OF ILEOSTOMY;COMPLICATE | 1/1/2007 | $605.67 | 3 |
| 2 | 44316 | CONTINENT ILEOSTOMY (KOCK PROCED | 1/1/2007 | $830.14 | 3 |
| 2 | 44320 | COLOSTOMY OR SKIN LEVEL CECOSTOM | 1/1/2007 | $714.40 | 3 |
| 2 | 44322 | COLOSTOMY OR SKIN LEVEL CECOSTOM | 1/1/2007 | $573.24 | 3 |
| 2 | 44340 | REVISION OF COLOSTOMY;SIMPLE (RE | 1/1/2007 | $336.57 | 3 |
| 2 | 44345 | REVISION OF COLOSTOMY;COMPLICATE | 1/1/2007 | $629.81 | 3 |
| 2 | 44346 | REVISION OF COLOSTOMY;W/REPAIR O | 1/1/2007 | $687.16 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 44360 | SM INTESTINAL ENDOSCOPY, ENTEROS | 1/1/2007 | $100.69 | 3 |
| 2 | 44361 | SM INTESTINAL ENDOSCOPY, ENTEROS | 1/1/2007 | $111.07 | 3 |
| 2 | 44363 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2007 | $133.38 | 3 |
| 2 | 44364 | SM INTESTINAL ENDOSCOPY ENTEROSC | 1/1/2007 | $142.47 | 3 |
| 2 | 44365 | SMALL INTESTINAL ENDOSCOPY, WITH | 1/1/2007 | $127.41 | 3 |
| 2 | 44366 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2007 | $167.64 | 3 |
| 2 | 44369 | SM INTESTINAL ENDOSCOPY ENTEROSC | 1/1/2007 | $170.75 | 3 |
| 2 | 44370 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2007 | $185.28 | 3 |
| 2 | 44372 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2007 | $168.42 | 3 |
| 2 | 44373 | SM INTEST ENDOSCOPY,ENTEROSCOPY | 1/1/2007 | $134.42 | 3 |
| 2 | 44376 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2007 | $199.82 | 3 |
| 2 | 44377 | SMALL INTESTINAL ENDOSCOPY, WITH | 1/1/2007 | $209.16 | 3 |
| 2 | 44378 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2007 | $268.32 | 3 |
| 2 | 44379 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2007 | $285.45 | 3 |
| 2 | 44380 | ILEOSCOPY, THROUGH STOMA; DIAGNO | 1/1/2007 | $43.60 | 3 |
| 2 | 44382 | ILEOSCOPY, THROUGH STOMA; WITH B | 1/1/2007 | $52.42 | 3 |
| 2 | 44383 | ILEOSCOPY, THROUGH STOMA; WITH T | 1/1/2007 | $114.70 | 3 |
| 2 | 44385 | ENDOSCOPIC EVALUATION OF SM INTE | 1/1/2007 | $138.31 | 3 |
| 2 | 44386 | ENDOSCOPIC EVALUATION OF SM INTE | 1/1/2007 | $233.03 | 3 |
| 2 | 44388 | COLONOSCOPY THROUGH STOMA; DIAGN | 1/1/2007 | $212.01 | 3 |
| 2 | 44389 | COLONOSCOPY THROUGH STOMA; WITH | 1/1/2007 | $260.54 | 3 |
| 2 | 44390 | FIBEROPTIC COLONOSCOPY THROUGH C | 1/1/2007 | $292.46 | 3 |
| 2 | 44391 | COLONOSCOPY THRU STOMA; W/CONTRO | 1/1/2007 | $347.73 | 3 |
| 2 | 44392 | COLONOSCOPY THROUGH STOMA; W/REM | 1/1/2007 | $278.96 | 3 |
| 2 | 44393 | COLONOSCOPY THROUGH STOMA;W/ABLA | 1/1/2007 | $315.81 | 3 |
| 2 | 44394 | COLONOSCOPY THROUGH STOMA; WITH | 1/1/2007 | $327.75 | 3 |
| 2 | 44397 | COLONOSCOPY THROUGH STOMA; WITH | 1/1/2007 | $178.80 | 3 |
| 2 | 44500 | INTRODUCTION OF LONG GASTROINTES | 1/1/2007 | $17.65 | 3 |
| 2 | 44602 | SUTURE OF SMALL INTESTINE (ENTER | 1/1/2007 | $636.55 | 3 |
| 2 | 44603 | SUTURE OF SMALL INTESTINE (ENTER | 1/1/2007 | $735.16 | 3 |
| 2 | 44604 | SUTURE OF LARGE INTESTINE (COLOR | 1/1/2007 | $638.11 | 3 |
| 2 | 44605 | SUTURE OF INTESTINE (ENTERORRHAP | 1/1/2007 | $789.40 | 3 |
| 2 | 44615 | INTESTINAL STRICTUROPLASTY (ENTE | 1/1/2007 | $639.93 | 3 |
| 2 | 44620 | CLOSURE OF ENTEROSTOMY LARGE OR | 1/1/2007 | $493.83 | 3 |
| 2 | 44625 | CLOSURE OF ENTEROSTOMY LARGE OR | 1/1/2007 | $602.04 | 3 |
| 2 | 44626 | CLOSURE OF ENTEROSTOMY, LARGE OR | 1/1/2007 | $997.00 | 3 |
| 2 | 44640 | CLOSURE OF INTESTINAL CUTANEOUS | 1/1/2007 | $855.83 | 3 |
| 2 | 44650 | CLOSURE OF ENTEROENTERIC OR ENTE | 1/1/2007 | $891.90 | 3 |
| 2 | 44660 | CLOSURE OF ENTEROVESICAL FISTULA | 1/1/2007 | $825.73 | 3 |
| 2 | 44661 | CLOSURE OF ENTEROVESICAL FISTULA | 1/1/2007 | $964.04 | 3 |
| 2 | 44680 | INTESTINAL PLICATION (SEPARATE P | 1/1/2007 | $618.39 | 3 |
| 2 | 44700 | EXCLUSION OF SMALL INTESTINE FRO | 1/1/2007 | $638.37 | 3 |
| 2 | 44701 | INTRAOPERATIVE COLONIC LAVAGE (L | 1/1/2007 | $117.55 | 3 |
| 2 | 44715 | BACKBENCH STANDARD PREP OF CADAV | 10/1/2005 | $0.01 | 5 |
| 2 | 44720 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $183.73 | 3 |
| 2 | 44721 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $269.10 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 44799 | UNLISTED PROCEDURE INTESTINE | 4/1/1982 | $0.01 | 5 |
| 2 | 44800 | EXCISION OF MECKELS DIVERTICULUM | 1/1/2007 | $469.18 | 3 |
| 2 | 44820 | EXCISION OF LESION OF MESENTERY | 1/1/2007 | $497.20 | 3 |
| 2 | 44850 | SUTURE OF MESENTERY (SEPARATE PR | 1/1/2007 | $444.26 | 3 |
| 2 | 44899 | UNLISTED PROCEDURE MECKELS DIVER | 2/1/1989 | $0.01 | 5 |
| 2 | 44900 | INCISION AND DRAINAGE OF APPENDI | 1/1/2007 | $419.09 | 3 |
| 2 | 44901 | INCISION AND DRAINAGE OF APPENDI | 1/1/2007 | $121.97 | 3 |
| 2 | 44950 | APPENDECTOMY | 1/1/2007 | $405.34 | 3 |
| 2 | 44955 | APPENDECTOMY WHEN DONE FOR INDIC | 1/1/2007 | $58.91 | 3 |
| 2 | 44960 | APPENDECTOMY FOR RUPTURED APPEND | 1/1/2007 | $500.84 | 3 |
| 2 | 44970 | LAPAROSCOPY, SURGICAL; APPENDECT | 1/1/2007 | $361.22 | 3 |
| 2 | 44979 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 45000 | TRANSRECTAL DRAINAGE OF PELVIC A | 1/1/2007 | $207.60 | 3 |
| 2 | 45005 | INCISION AND DRAINAGE OF SUBMUCO | 1/1/2007 | $163.49 | 3 |
| 2 | 45020 | INCISION AND DRAINAGE OF DEEP SU | 1/1/2007 | $221.61 | 3 |
| 2 | 45100 | BIOPSY OF ANORECTAL WALL ANAL AP | 1/1/2007 | $168.16 | 3 |
| 2 | 45108 | ANORECTAL MYOMECTOMY | 1/1/2007 | $210.71 | 3 |
| 2 | 45110 | PROCTECTOMY; COMPLETE, COMBINED | 1/1/2007 | $1,135.05 | 3 |
| 2 | 45111 | PROCTECTOMY; PARTIAL RESECTION O | 1/1/2007 | $666.92 | 3 |
| 2 | 45112 | PROCTECTOMY, COMBINED ABDOMINOPE | 1/1/2007 | $1,185.92 | 3 |
| 2 | 45113 | PROCTECTOMY, PARTIAL, WITH RECTA | 1/1/2007 | $1,210.31 | 3 |
| 2 | 45114 | PROCTECTOMY, PARTIAL, WITH ANAST | 1/1/2007 | $1,077.70 | 3 |
| 2 | 45116 | PROCTECTOMY PARTIAL WITH ANASTOM | 1/1/2007 | $972.09 | 3 |
| 2 | 45119 | PROCTECTOMY, COMBINED ABDOMINOPE | 1/1/2007 | $1,210.05 | 3 |
| 2 | 45120 | PROCTECTOMY, COMPLETE, ABDOMINAL | 1/1/2007 | $975.72 | 3 |
| 2 | 45121 | PROCTECTOMY, COMPLETE, ABDOMINAL | 1/1/2007 | $1,073.55 | 3 |
| 2 | 45123 | PROCTECTOMY, PARTIAL, WITHOUT AN | 1/1/2007 | $659.13 | 3 |
| 2 | 45126 | PELVIC EXENTERATION FOR COLORECT | 1/1/2007 | $1,781.99 | 3 |
| 2 | 45130 | EXCISION OF RECTAL PROCIDENTIA W | 1/1/2007 | $648.49 | 3 |
| 2 | 45135 | EXCISION OF RECTAL PROCIDENTIA W | 1/1/2007 | $779.28 | 3 |
| 2 | 45136 | EXCISION OF ILEOANAL RESERVOIR W | 1/1/2007 | $1,105.99 | 3 |
| 2 | 45150 | DIVISION OF STRICTURE OF RECTUM | 1/1/2007 | $239.78 | 3 |
| 2 | 45160 | EXCISION OF RECTAL TUMOR BY PROC | 1/1/2007 | $613.20 | 3 |
| 2 | 45170 | EXCISION OF RECTAL TUMOR, TRANSA | 1/1/2007 | $468.92 | 3 |
| 2 | 45190 | DESTRUCTION OF RECTAL TUMOR, TRA | 1/1/2007 | $401.97 | 3 |
| 2 | 45300 | PROCTOSIGMOIDOSCOPY, RIGID; DIAG | 1/1/2007 | $50.60 | 3 |
| 2 | 45303 | PROCTOSIGMOIDOSCOPY, RIGID; WITH | 1/1/2007 | $498.76 | 3 |
| 2 | 45305 | PROCTOSIGMOIDOSCOPY, RIGID; WITH | 1/1/2007 | $97.57 | 3 |
| 2 | 45307 | PROCTOSIGMOIDOSCOPY; WITH REMOVA | 1/1/2007 | $106.14 | 3 |
| 2 | 45308 | PROCTOSIGMOIDOSCOPY, RIGID; WITH | 1/1/2007 | $75.77 | 3 |
| 2 | 45309 | PROCTOSIGMOIDOSCOPY, RIGID; WITH | 1/1/2007 | $131.05 | 3 |
| 2 | 45315 | PROCTOSIGMOIDOSCOPY, RIGID; W/RE | 1/1/2007 | $114.70 | 3 |
| 2 | 45317 | PROCTOSIGMOIDOSCOPY, RIGID; W/CO | 1/1/2007 | $106.14 | 3 |
| 2 | 45320 | PROCTOSIGMOIDOSCOPY, RIGID; W/AB | 1/1/2007 | $120.93 | 3 |
| 2 | 45321 | PROCTOSIGMOIDOSCOPY; WITH DECOMP | 1/1/2007 | $48.27 | 3 |
| 2 | 45327 | PROCTOSIGMOIDOSCOPY, RIGID; WITH | 1/1/2007 | $64.88 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 45330 | SIGMOIDOSCOPY, FLEXIBLE; DIAGNOS | 1/1/2007 | $86.15 | 3 |
| 2 | 45331 | SIGMOIDOSCOPY, FLEXIBLE; WITH BI | 1/1/2007 | $112.10 | 3 |
| 2 | 45332 | SIGMOIDOSCOPY, FLEXIBLE FIBEROPT | 1/1/2007 | $180.61 | 3 |
| 2 | 45333 | SIGMOIDOSCOPY, FLEXIBLE; W/REMOV | 1/1/2007 | $176.98 | 3 |
| 2 | 45334 | SIGMOIDOSCOPY, FLEXIBLE; W/CONTR | 1/1/2007 | $105.62 | 3 |
| 2 | 45335 | SIGMOIDOSCOPY, FLEXIBLE; WITH DI | 1/1/2007 | $124.30 | 3 |
| 2 | 45337 | SIGMOIDOSCOPY, FLEXIBLE; WITH DE | 1/1/2007 | $92.64 | 3 |
| 2 | 45338 | SIGMOIDOSCOPY, FLEXIBLE; WITH RE | 1/1/2007 | $201.37 | 3 |
| 2 | 45339 | SIGMOIDOSCOPY, FLEXIBLE; WITH AB | 1/1/2007 | $178.28 | 3 |
| 2 | 45340 | SIGMOIDOSCOPY, FLEXIBLE; WITH DI | 1/1/2007 | $213.57 | 3 |
| 2 | 45341 | SIGMOIDOSCOPY, FLEXIBLE; WITH EN | 1/1/2007 | $100.17 | 3 |
| 2 | 45342 | SIGMOIDOSCOPY, FLEXIBLE; WITH TR | 1/1/2007 | $152.85 | 3 |
| 2 | 45345 | SIGMOIDOSCOPY, FLEXIBLE; WITH TR | 1/1/2007 | $111.84 | 3 |
| 2 | 45355 | COLONOSCOPY, RIGID OR FLEXIBLE, | 1/1/2007 | $136.24 | 3 |
| 2 | 45378 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $263.39 | 3 |
| 2 | 45379 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $330.86 | 3 |
| 2 | 45380 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $311.14 | 3 |
| 2 | 45381 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $301.54 | 3 |
| 2 | 45382 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $416.76 | 3 |
| 2 | 45383 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $370.57 | 3 |
| 2 | 45384 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $308.55 | 3 |
| 2 | 45385 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $351.36 | 3 |
| 2 | 45386 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $451.53 | 3 |
| 2 | 45387 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2007 | $226.28 | 3 |
| 2 | 45391 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2005 | NC | 9 |
| 2 | 45392 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2005 | NC | 9 |
| 2 | 45395 | LAPAROSCOPY, SURGICAL; PROCTECTO | 1/1/2007 | $1,241.19 | 3 |
| 2 | 45397 | LAPAROSCOPY, SURGICAL; PROCTECTO | 1/1/2007 | $1,348.36 | 3 |
| 2 | 45400 | LAPAROSCOPY, SURGICAL; PROCTOPEX | 1/1/2007 | $724.78 | 3 |
| 2 | 45402 | LAPAROSCOPY, SURGICAL; PROCTOPEX | 1/1/2007 | $982.47 | 3 |
| 2 | 45499 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2006 | $0.01 | 5 |
| 2 | 45500 | PROCTOPLASTY FOR STENOSIS | 1/1/2007 | $300.24 | 3 |
| 2 | 45505 | PROCTOPLASTY; FOR PROLAPSE OF MU | 1/1/2007 | $318.93 | 3 |
| 2 | 45520 | PERIRECTAL INJECTION OF SCLEROSI | 1/1/2007 | $58.13 | 3 |
| 2 | 45540 | PROCTOPEXY (EG, FOR PROLAPSE); A | 1/1/2007 | $646.16 | 3 |
| 2 | 45541 | PROCTOPEXY FOR PROLAPSE; PERINEA | 1/1/2007 | $542.10 | 3 |
| 2 | 45550 | PROCTOPEXY (EG, FOR PROLAPSE); W | 1/1/2007 | $903.58 | 3 |
| 2 | 45560 | REPAIR OF RECTOCELE (SEPARATE PR | 1/1/2007 | $434.66 | 3 |
| 2 | 45562 | EXPLORATION, REPAIR, AND PRESACR | 1/1/2007 | $627.73 | 3 |
| 2 | 45563 | EXPLORATION, REPAIR, AND PRESACR | 1/1/2007 | $961.97 | 3 |
| 2 | 45800 | CLOSURE OF RECTOVESICAL FISTULA | 1/1/2007 | $701.43 | 3 |
| 2 | 45805 | CLOSURE OF RECTOVESICAL FISTULA; | 1/1/2007 | $838.19 | 3 |
| 2 | 45820 | CLOSURE OF RECTOURETHRAL FISTULA | 1/1/2007 | $718.04 | 3 |
| 2 | 45825 | CLOSURE OF RECTOURETHRAL FISTULA | 1/1/2007 | $865.95 | 3 |
| 2 | 45900 | REDUCTION OF PROCIDENTIA (SEPARA | 1/1/2007 | $114.44 | 3 |
| 2 | 45905 | DILATION OF ANAL SPHINCTER (SEPA | 1/1/2007 | $103.80 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 45910 | DILATION OF RECTAL STRICTURE (SE | 1/1/2007 | $123.52 | 3 |
| 2 | 45915 | REMOVAL OF FECAL IMPACTION OR FO | 1/1/2007 | $201.63 | 3 |
| 2 | 45990 | ANORECTAL EXAM, SURGICAL, REQUIR | 1/1/2006 | $0.01 | 5 |
| 2 | 45999 | UNLISTED PROCEDURE RECTUM | 2/1/1989 | $0.01 | 5 |
| 2 | 46020 | PLACEMENT OF SETON | 1/1/2007 | $144.02 | 3 |
| 2 | 46030 | REMOVAL OF SETON OTHER MARKER | 1/1/2007 | $70.58 | 3 |
| 2 | 46040 | INCISION AND DRAINAGE OF ISCHIOR | 1/1/2007 | $287.53 | 3 |
| 2 | 46045 | INCISION AND DRAINAGE OF INTRAMU | 1/1/2007 | $201.11 | 3 |
| 2 | 46050 | INCISION AND DRAINAGE PERIANAL A | 1/1/2007 | $100.69 | 3 |
| 2 | 46060 | INCISION & DRAINAGE OF ISCHIOREC | 1/1/2007 | $249.12 | 3 |
| 2 | 46070 | INCISION ANAL SEPTUM (INFANT) | 1/1/2007 | $127.41 | 3 |
| 2 | 46080 | SPHINCTEROTOMY ANAL DIVISION OF | 1/1/2007 | $133.90 | 3 |
| 2 | 46083 | INCISION OF THROMBOSED HEMORRHOI | 1/1/2007 | $105.88 | 3 |
| 2 | 46200 | FISSURECTOMY WITH OR WITHOUT SPH | 1/1/2007 | $198.78 | 3 |
| 2 | 46210 | CRYPECTOMY SINGLE | 1/1/2007 | $210.20 | 3 |
| 2 | 46211 | CRYPTECTOMY; MULTIPLE (SEPARATE | 1/1/2007 | $263.13 | 3 |
| 2 | 46220 | PAPILLECTOMY OR EXCISION OF SING | 1/1/2007 | $104.58 | 3 |
| 2 | 46221 | HEMORRHOIDECTOMY BY SIMPLE LIGAT | 1/1/2007 | $127.67 | 3 |
| 2 | 46230 | EXCISION OF EXTERNAL HEMORRHOID | 1/1/2007 | $154.40 | 3 |
| 2 | 46250 | HEMORRHOIDECTOMY EXTERNAL COMPLE | 1/1/2007 | $251.20 | 3 |
| 2 | 46255 | HEMORRHOIDECTOMY INTERNAL AND EX | 1/1/2007 | $285.97 | 3 |
| 2 | 46257 | HEMORRHOIDECTOMY INTERNAL AND EX | 1/1/2007 | $231.21 | 3 |
| 2 | 46258 | HEMORRHOIDECTOMY INTERNAL AND EX | 1/1/2007 | $251.20 | 3 |
| 2 | 46260 | HEMORRHOIDECTOMY INTERNAL AND EX | 1/1/2007 | $267.54 | 3 |
| 2 | 46261 | HEMORRHOIDECTOMY INTERNAL AND EX | 1/1/2007 | $297.65 | 3 |
| 2 | 46262 | HEMORRHOIDECTOMY INTERNAL AND EX | 1/1/2007 | $312.96 | 3 |
| 2 | 46270 | SURGICAL TREATMENT OF ANAL FISTU | 1/1/2007 | $237.96 | 3 |
| 2 | 46275 | FISTULECTOMY; SUBMUSCULAR | 1/1/2007 | $251.97 | 3 |
| 2 | 46280 | SURGICAL TREATMENT OF ANAL FISTU | 1/1/2007 | $256.65 | 3 |
| 2 | 46285 | FISTULECTOMY; SECOND STAGE | 1/1/2007 | $215.13 | 3 |
| 2 | 46288 | CLOSURE OF ANAL FISTULA WITH REC | 1/1/2007 | $300.76 | 3 |
| 2 | 46320 | ENUCLEATION OR EXCISION OF EXTER | 1/1/2007 | $101.72 | 3 |
| 2 | 46500 | INJECTION OF SCLEROSING SOLUTION | 1/1/2007 | $100.95 | 3 |
| 2 | 46505 | CHEMODENERVATION OF INTERNAL ANA | 4/1/2006 | NC | 9 |
| 2 | 46600 | ANOSCOPY; DIAGNOSTIC, W/WO COLLE | 1/1/2007 | $54.75 | 3 |
| 2 | 46604 | ANOSCOPY; WITH DILATION (EG, BAL | 1/1/2007 | $274.55 | 3 |
| 2 | 46606 | ANOSCOPY; WITH BIOPSY, SINGLE OR | 1/1/2007 | $121.71 | 3 |
| 2 | 46608 | ANOSCOPY; WITH REMOVAL OF FOREIG | 1/1/2007 | $157.78 | 3 |
| 2 | 46610 | ANOSCOPY; W/REMOVAL OF SINGLE TU | 1/1/2007 | $142.98 | 3 |
| 2 | 46611 | ANOSCOPY; WITH REMOVAL OF SINGLE | 1/1/2007 | $138.57 | 3 |
| 2 | 46612 | ANOSCOPY; W/REMOVAL OF MULTIPLE | 1/1/2007 | $202.93 | 3 |
| 2 | 46614 | ANOSCOPY; W/CONTROL OF BLEEDING | 1/1/2007 | $117.81 | 3 |
| 2 | 46615 | ANOSCOPY; WITH ABLATION OF TUMOR | 1/1/2007 | $142.73 | 3 |
| 2 | 46700 | ANOPLASTY PLASTIC OPERATION FOR | 1/1/2007 | $370.31 | 3 |
| 2 | 46705 | ANOPLASTY PLASTIC OPERATION FOR | 1/1/2007 | $298.17 | 3 |
| 2 | 46706 | REPAIR OF ANAL FISTULA WITH FIBR | 1/1/2007 | $101.72 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 46710 | REPAIR OF ILEONAL POUCH FISTULA/ | 1/1/2007 | $652.64 | 3 |
| 2 | 46712 | REPAIR OF ILEONAL POUCH FISTULA/ | 1/1/2007 | $1,368.60 | 3 |
| 2 | 46715 | REPAIR OF LOW IMPERFORATE ANUS; | 1/1/2007 | $303.36 | 3 |
| 2 | 46716 | REPAIR OF LOW IMPERFORATE ANUS; | 1/1/2007 | $638.89 | 3 |
| 2 | 46730 | REPAIR OF HIGH IMPERFORATE ANUS | 1/1/2007 | $1,069.66 | 3 |
| 2 | 46735 | REPAIR OF HIGH IMPERFORATE ANUS | 1/1/2007 | $1,268.96 | 3 |
| 2 | 46740 | CONSTRUCTION OF ANUS FOR CONGENI | 1/1/2007 | $1,184.10 | 3 |
| 2 | 46742 | REPAIR OF HIGH IMPERFORATE ANUS, | 1/1/2007 | $1,462.80 | 3 |
| 2 | 46744 | REPAIR OF CLOACAL ANOMALY BY ANO | 1/1/2007 | $2,078.60 | 3 |
| 2 | 46746 | REPAIR OF CLOACAL ANOMALY BY ANO | 1/1/2007 | $2,361.97 | 3 |
| 2 | 46748 | REPAIR OF CLOACAL ANOMALY, WITH | 1/1/2007 | $2,365.86 | 3 |
| 2 | 46750 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $425.32 | 3 |
| 2 | 46751 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $392.62 | 3 |
| 2 | 46753 | GRAFT (THIERSCH OPERATION) FOR R | 1/1/2007 | $339.17 | 3 |
| 2 | 46754 | REMOVAL OF THIERSCH WIRE OR SUTU | 1/1/2007 | $155.44 | 3 |
| 2 | 46760 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $599.45 | 3 |
| 2 | 46761 | SPHINCTEROPLASTY, ANAL, FOR INCO | 1/1/2007 | $551.96 | 3 |
| 2 | 46762 | SPHINCTEROPLASTY, ANAL, FOR INCO | 1/1/2007 | $504.99 | 3 |
| 2 | 46900 | DESTRUCTION OF LESION(S) ANUS (E | 1/1/2007 | $121.19 | 3 |
| 2 | 46910 | DESTRUCTION OF LESION(S) ANUS SI | 1/1/2007 | $128.71 | 3 |
| 2 | 46916 | DESTRUCTION OF LESION(S) ANUS SI | 1/1/2007 | $133.12 | 3 |
| 2 | 46917 | DESTRUCTION OF LESION(S) ANUS SI | 1/1/2007 | $291.16 | 3 |
| 2 | 46922 | DESTRUCTION OF LESION(S) ANUS SI | 1/1/2007 | $139.09 | 3 |
| 2 | 46924 | DESTRUCTION OF LESION(S), ANUS ( | 1/1/2007 | $304.39 | 3 |
| 2 | 46934 | DESTRUCTION OF HEMORRHOIDS ANY M | 1/1/2007 | $230.96 | 3 |
| 2 | 46935 | CRYOSURGERY OF HEMORRHOIDS; EXTE | 1/1/2007 | $159.07 | 3 |
| 2 | 46936 | CRYOSURGERY OF HEMORRHOIDS; INTE | 1/1/2007 | $230.96 | 3 |
| 2 | 46937 | CRYOSURGERY OF RECTAL TUMOR BENI | 1/1/2007 | $145.58 | 3 |
| 2 | 46938 | CRYOSURGERY OF RECTAL TUMOR; MAL | 1/1/2007 | $239.52 | 3 |
| 2 | 46940 | CURRETAGE OR CAUTERY OF ANAL FIS | 1/1/2007 | $118.07 | 3 |
| 2 | 46942 | CURETTAGE OR CAUTERIZATION AF AN | 1/1/2007 | $105.62 | 3 |
| 2 | 46945 | LIGATION OF INTERNAL HEMORRHOIDS | 1/1/2007 | $137.54 | 3 |
| 2 | 46946 | LIGATION OF INTERNAL HEMORRHOIDS | 1/1/2007 | $170.75 | 3 |
| 2 | 46947 | HEMORRHOIDOPEXY (EG, FOR PROLAPS | 1/1/2007 | $224.99 | 3 |
| 2 | 46999 | UNLISTED PROCEDURE ANUS | 2/1/1994 | $0.01 | 5 |
| 2 | 47000 | BIOPSY OF LIVER, NEEDLE; PERCUTA | 1/1/2007 | $132.35 | 3 |
| 2 | 47001 | BIOPSY OF LIVER, NEEDLE; WHEN DO | 1/1/2007 | $72.66 | 3 |
| 2 | 47010 | HEPATOTOMY FOR DRAINAGE OF ABSCE | 1/1/2007 | $679.89 | 3 |
| 2 | 47011 | HEPATOTOMY; FOR PERCUTANEOUS DRA | 1/1/2007 | $132.86 | 3 |
| 2 | 47015 | LAPAROTOMY, WITH ASPIRATION AND/ | 1/1/2007 | $633.70 | 3 |
| 2 | 47100 | BIOPSY OF LIVER, WEDGE | 1/1/2007 | $499.02 | 3 |
| 2 | 47120 | HEPATECTOMY RESECTION OF LIVER P | 1/1/2007 | $1,434.52 | 3 |
| 2 | 47122 | HEPATECTOMY, RESECTION OF LIVER; | 1/1/2007 | $2,173.05 | 3 |
| 2 | 47125 | HEPATECTOMY RESECTION OF LIVER; | 1/1/2007 | $1,949.62 | 3 |
| 2 | 47130 | HEPATECTOMY RESECTION OF LIVER; | 1/1/2007 | $2,107.92 | 3 |
| 2 | 47133 | DONOR HEPATECTOMY (INCLUDING COL | 7/17/1987 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 47134 | DONOR HEPATECTOMY, WITH PREPARAT | 4/1/2004 | INVALID | N |
| 2 | 47135 | LIVER ALLOTRANSPLANTATION; ORTHO | 1/1/2007 | $3,189.77 | 3 |
| 2 | 47136 | LIVER ALLOTRANSPLANTATION; HETER | 1/1/2007 | $2,698.80 | 3 |
| 2 | 47140 | DONOR HEPATECTOMY (INCLUDING COL | 1/1/2007 | $2,138.80 | 3 |
| 2 | 47141 | DONOR HEPATECTOMY (INCLUDING COL | 1/1/2007 | $2,583.32 | 3 |
| 2 | 47142 | DONOR HEPATECTOMY (INCLUDING COL | 1/1/2007 | $2,844.38 | 3 |
| 2 | 47143 | BACKBENCH STANDARD PREP OF CADAV | 5/15/2006 | $467.10 | 3 |
| 2 | 47144 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 2 | 47145 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 2 | 47146 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $230.70 | 3 |
| 2 | 47147 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $269.10 | 3 |
| 2 | 47300 | MARSUPIALIZATION OF CYST OR ABSC | 1/1/2007 | $630.07 | 3 |
| 2 | 47350 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $804.45 | 3 |
| 2 | 47360 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $1,086.01 | 3 |
| 2 | 47361 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $1,854.39 | 3 |
| 2 | 47362 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $771.23 | 3 |
| 2 | 47370 | LAPAROSSOPY, SURGICAL, ABLATION | 1/1/2007 | $787.84 | 3 |
| 2 | 47371 | LAPAROSCOPY, SURGICAL, ABLATION | 1/1/2007 | $789.40 | 3 |
| 2 | 47379 | UNLISTED LAPAROSCOPIC PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 47380 | ABLATION, OPEN, OF ONE OR MORE L | 1/1/2007 | $913.70 | 3 |
| 2 | 47381 | ABLATION, OPEN, OF ONE OR MORE L | 1/1/2007 | $926.16 | 3 |
| 2 | 47382 | ABLATION, ONE OR MORE LIVER TUMO | 1/1/2007 | $576.61 | 3 |
| 2 | 47399 | UNLISTED PROCEDURE LIVER | 2/1/1994 | $0.01 | 5 |
| 2 | 47400 | HEPATICOTOMY OR HEPATICOSTOMY WI | 1/1/2007 | $1,271.03 | 3 |
| 2 | 47420 | CHOLEDOCHOTOMY OR CHOLEDOCHOSTOM | 1/1/2007 | $810.94 | 3 |
| 2 | 47425 | CHOLEDOCHOTOMY OR CHOLEDOCHOSTOM | 1/1/2007 | $810.68 | 3 |
| 2 | 47460 | TRANSDUODENAL SPHINCTEROTOMY OR | 1/1/2007 | $741.91 | 3 |
| 2 | 47480 | CHOLECYSTOTOMY OR CHOLECYSTOSTOM | 1/1/2007 | $470.73 | 3 |
| 2 | 47490 | PERCUTANEOUS CHOLECYSTOSOMY | 1/1/2007 | $343.32 | 3 |
| 2 | 47500 | INJECTION PROCEDURE FOR PERCUTAN | 1/1/2007 | $70.58 | 3 |
| 2 | 47505 | INJECTION PROCEDURE FOR CHOLANGI | 1/1/2007 | $27.25 | 3 |
| 2 | 47510 | INTRODUCTION OF PERCUTANEOUS TRA | 1/1/2007 | $345.14 | 3 |
| 2 | 47511 | INTRODUCTION OF PERCUTANEOUS TRA | 1/1/2007 | $420.13 | 3 |
| 2 | 47525 | CHANGE OF PERCUTANEOUS BILIARY D | 1/1/2007 | $544.95 | 3 |
| 2 | 47530 | REVISION AND/OR REINSERTION OF T | 1/1/2007 | $257.68 | 3 |
| 2 | 47550 | BILIARY ENDOSCOPY, INTRAOPERATIV | 1/1/2007 | $115.22 | 3 |
| 2 | 47552 | BILIARY ENDOSCOPY, PERCUTANEOUS | 1/1/2007 | $229.14 | 3 |
| 2 | 47553 | BILIARY ENDOSCOPY, PERCUTANEOUS | 1/1/2007 | $227.84 | 3 |
| 2 | 47554 | BILIARY ENDOSCOPY, PERCUTANEOUS | 1/1/2007 | $346.95 | 3 |
| 2 | 47555 | BILIARY ENDOSCOPY,PERCUTANEOUS V | 1/1/2007 | $271.70 | 3 |
| 2 | 47556 | BILIARY ENDOSCOPY PERCUTANEOUS V | 1/1/2007 | $307.25 | 3 |
| 2 | 47560 | LAPAROSCOPY, SURGICAL; WITH GUID | 1/1/2007 | $186.84 | 3 |
| 2 | 47561 | LAPAROSCOPY, SURGICAL; WITH GUID | 1/1/2007 | $201.11 | 3 |
| 2 | 47562 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $454.64 | 3 |
| 2 | 47563 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $488.12 | 3 |
| 2 | 47564 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $572.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 47570 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $508.36 | 3 |
| 2 | 47579 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 47600 | CHOLECYSTECTOMY | 1/1/2007 | $557.67 | 3 |
| 2 | 47605 | CHOLECYSTECTOMY; WITH CHOLANGIOG | 1/1/2007 | $599.96 | 3 |
| 2 | 47610 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $758.00 | 3 |
| 2 | 47612 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $755.40 | 3 |
| 2 | 47620 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $827.03 | 3 |
| 2 | 47630 | BILIARY DUCT STONE EXTRACTION PE | 1/1/2007 | $379.91 | 3 |
| 2 | 47700 | EXPLORATION FOR CONGENITAL ATRES | 1/1/2007 | $650.83 | 3 |
| 2 | 47701 | PORTOENTEROSTOMY (EG, KASAI PROC | 1/1/2007 | $1,114.29 | 3 |
| 2 | 47711 | EXCISION OF BILE DUCT TUMOR, WIT | 1/1/2007 | $933.68 | 3 |
| 2 | 47712 | EXCISION OF BILE DUCT TUMOR, WIT | 1/1/2007 | $1,207.97 | 3 |
| 2 | 47715 | EXCISION OF CHOLEDOCHAL CYST | 1/1/2007 | $770.46 | 3 |
| 2 | 47716 | ANASTOMOSIS, CHOLEDOCHAL CYST, W | 1/1/2007 | INVALID | N |
| 2 | 47719 | ANASTOMOSIS, CHOLEDOCHAL CYST, W | 1/1/2007 | $757.48 | 3 |
| 2 | 47720 | CHOLECYSTOENTEROSTOMY DIRECT | 1/1/2007 | $660.95 | 3 |
| 2 | 47721 | CHOLECYSTOENTEROSTOMY; WITH GAST | 1/1/2007 | $783.17 | 3 |
| 2 | 47740 | CHOLECYSTOENTEROSTOMY; ROUX-EN-Y | 1/1/2007 | $758.78 | 3 |
| 2 | 47741 | CHOLECYSTOENTEROSTOMY; ROUX-EN-Y | 1/1/2007 | $867.51 | 3 |
| 2 | 47760 | ANASTOMOSIS, OF EXTRAHEPATIC BIL | 1/1/2007 | $1,040.08 | 3 |
| 2 | 47765 | ANASTOMOSIS, OF INTRAHEPATIC DUC | 1/1/2007 | $1,010.49 | 3 |
| 2 | 47780 | ANASTOMOSIS ROUX-EN-Y OF EXTRAHE | 1/1/2007 | $1,068.36 | 3 |
| 2 | 47785 | ANASTOMOSIS, ROUX-EN-Y, OF INTRA | 1/1/2007 | $1,249.49 | 3 |
| 2 | 47800 | RECONSTRUCTION PLASTIC OF EXTRAH | 1/1/2007 | $944.84 | 3 |
| 2 | 47801 | PLACEMENT OF CHOLEDOCHAL STENT | 1/1/2007 | $635.00 | 3 |
| 2 | 47802 | U-TUBE HEPATICOENTEROSTOMY | 1/1/2007 | $883.60 | 3 |
| 2 | 47900 | SUTURE OF EXTRAHEPATIC BILIARY D | 1/1/2007 | $814.57 | 3 |
| 2 | 47999 | UNLISTED PROCEDURE BILIARY TRACT | 4/1/1982 | $0.01 | 5 |
| 2 | 48000 | PLACEMENT OF DRAINS, PERIPANCREA | 1/1/2007 | $1,116.37 | 3 |
| 2 | 48001 | PLACEMENT OF DRAINS, WITH CHOLEC | 1/1/2007 | $1,400.78 | 3 |
| 2 | 48005 | RESECTION OR DEBRIDEMENT OF PANC | 1/1/2007 | INVALID | N |
| 2 | 48020 | REMOVAL OF PANCREATIC CALCULUS | 1/1/2007 | $651.60 | 3 |
| 2 | 48100 | BIOPSY OF PANCREAS, OPEN (EG, FI | 1/1/2007 | $504.21 | 3 |
| 2 | 48102 | BIOPSY OF PANCREAS, PERCUTANEOUS | 1/1/2007 | $335.27 | 3 |
| 2 | 48105 | RESECTION OR DEBRIDEMENT OF PANC | 1/1/2007 | $1,832.33 | 3 |
| 2 | 48120 | EXCISION OF LESION OF PANCREAS ( | 1/1/2007 | $643.04 | 3 |
| 2 | 48140 | PANCREATECTOMY, DISTAL SUBTOTAL, | 1/1/2007 | $920.71 | 3 |
| 2 | 48145 | PANCREATECTOMY DISTAL SUBTOTAL W | 1/1/2007 | $959.89 | 3 |
| 2 | 48146 | PANCREATECTOMY, DISTAL, NEAR-TOT | 1/1/2007 | $1,086.01 | 3 |
| 2 | 48148 | EXCISION OF AMPULLA OF VATER | 1/1/2007 | $706.10 | 3 |
| 2 | 48150 | PANCREATECTOMY PROXIMAL SUBTOTAL | 1/1/2007 | $1,914.33 | 3 |
| 2 | 48152 | PANCREATECTOMY, PROXIMAL SUBTOTA | 1/1/2007 | $1,756.56 | 3 |
| 2 | 48153 | PANCREATECTOMY, PROXIMAL SUBTOTA | 1/1/2007 | $1,912.26 | 3 |
| 2 | 48154 | PANCREATECTOMY, PROXIMAL SUBTOTA | 1/1/2007 | $1,767.45 | 3 |
| 2 | 48155 | PANCREATECTOMY TOTAL | 1/1/2007 | $1,026.06 | 3 |
| 2 | 48160 | PANCREATECTOMY, TOTAL OR SUBTOTA | 4/1/1990 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 48180 | PANCREATICOJEJUNOSTOMY, SIDE-TO- | 1/1/2007 | INVALID | N |
| 2 | 48400 | INJECTION PROCEDURE FOR INTRAOPE | 1/1/2007 | $71.10 | 3 |
| 2 | 48500 | MARSUPIALIZATION OF PANCREATIC C | 1/1/2007 | $638.89 | 3 |
| 2 | 48510 | EXTERNAL DRAINAGE, PSEUDOCYST OF | 1/1/2007 | $611.38 | 3 |
| 2 | 48511 | EXTERNAL DRAINAGE, PSEUDOCYST OF | 1/1/2007 | $143.76 | 3 |
| 2 | 48520 | INTERNAL ANASTOMOSIS OF PANCREAT | 1/1/2007 | $631.36 | 3 |
| 2 | 48540 | INTERNAL ANASTOMOSIS OF PANCREAT | 1/1/2007 | $789.14 | 3 |
| 2 | 48545 | PANCREATORRHAPHY FOR INJURY | 1/1/2007 | $739.83 | 3 |
| 2 | 48547 | DUODENAL EXCLUSION WITH GASTROJE | 1/1/2007 | $1,030.22 | 3 |
| 2 | 48548 | PANCREATICOJEJUNOSTOMY, SIDE-TO- | 1/1/2007 | $1,068.36 | 3 |
| 2 | 48550 | DONOR PANCREATECTOMY (INCLUDING | 2/1/1994 | NC | 9 |
| 2 | 48551 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 2 | 48552 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $157.52 | 3 |
| 2 | 48554 | TRANSPLANTATION OF PANCREATIC AL | 1/1/2007 | $1,468.77 | 3 |
| 2 | 48556 | REMOVAL OF TRANSPLANTED PANCREAT | 1/1/2007 | $670.55 | 3 |
| 2 | 48999 | UNLISTED PROCEDURE PANCREAS | 4/1/1982 | $0.01 | 5 |
| 2 | 49000 | EXPLORATORY LAPAROTOMY, EXPLORAT | 1/1/2007 | $481.89 | 3 |
| 2 | 49002 | REOPENING OF RECENT LAPAROTOMY | 1/1/2007 | $437.52 | 3 |
| 2 | 49010 | EXPLORATION, RETROPERITONEAL ARE | 1/1/2007 | $510.70 | 3 |
| 2 | 49020 | DRAINAGE OF PERITONEAL ABSCESS O | 1/1/2007 | $930.57 | 3 |
| 2 | 49021 | DRAINAGE OF PERITONEAL ABSCESS O | 1/1/2007 | $121.45 | 3 |
| 2 | 49040 | DRAINAGE OF SUBDIAPHRAGMATIC OR | 1/1/2007 | $561.04 | 3 |
| 2 | 49041 | DRAINAGE OF SUBDIAPHRAGMATIC OR | 1/1/2007 | $143.76 | 3 |
| 2 | 49060 | DRAINAGE OF RETROPERITONEAL ABSC | 1/1/2007 | $649.27 | 3 |
| 2 | 49061 | DRAINAGE OF RETROPERITONEAL ABSC | 1/1/2007 | $132.86 | 3 |
| 2 | 49062 | DRAINAGE OF EXTRAPERITONEAL LYMP | 1/1/2007 | $471.51 | 3 |
| 2 | 49080 | PERITONEOCENTESIS, ABDOMINAL PAR | 1/1/2007 | $140.65 | 3 |
| 2 | 49081 | PERITONEOCENTESIS ABDOMINAL PARA | 1/1/2007 | $102.24 | 3 |
| 2 | 49085 | REMOVAL OF PERITONEAL FOREIGN BO | 1/1/2007 | INVALID | N |
| 2 | 49180 | BIOPSY, ABDOMINAL OR RETROPERITO | 1/1/2007 | $128.19 | 3 |
| 2 | 49200 | EXCISION OR DESTRUCTION, OPEN, I | 1/1/2007 | $428.18 | 3 |
| 2 | 49201 | EXCISION OR DESTRUCTION BY ANY M | 1/1/2007 | $615.79 | 3 |
| 2 | 49215 | EXCISION OF PRESACRAL OR SACROCO | 1/1/2007 | $1,346.81 | 3 |
| 2 | 49220 | STAGING LAPAROTOMY FOR HODGKINS | 1/1/2007 | $606.71 | 3 |
| 2 | 49250 | UMBILECTOMY OMPHALECTOMY EXCISIO | 1/1/2007 | $355.26 | 3 |
| 2 | 49255 | OMENTECTOMY EPIPLOECTOMY RESECTI | 1/1/2007 | $471.51 | 3 |
| 2 | 49320 | LAPAROSCOPY, ABDOMEN, PERITONEUM | 1/1/2007 | $217.46 | 3 |
| 2 | 49321 | LAPAROSCOPY, SURGICAL; WITH BIOP | 1/1/2007 | $226.80 | 3 |
| 2 | 49322 | LAPAROSCOPY, SURGICAL, ABDOMEN, | 1/1/2007 | $243.93 | 3 |
| 2 | 49323 | LAPAROSCOPY, SURGICAL, ABDOMEN, | 1/1/2007 | $393.66 | 3 |
| 2 | 49324 | LAPAROSCOPY, SURGICAL; WITH INSE | 1/1/2007 | $254.31 | 3 |
| 2 | 49325 | LAPAROSCOPY, SURGICAL; W/REVISIO | 1/1/2007 | $274.03 | 3 |
| 2 | 49326 | LAPAROSCOPY, SURGICAL; WITH OMEN | 1/1/2007 | $126.12 | 3 |
| 2 | 49329 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 49400 | INJECTION OF AIR OR CONTRAST INT | 1/1/2007 | $68.77 | 3 |
| 2 | 49402 | REMOVAL OF PERITONEAL FOREIGN BO | 1/1/2007 | $550.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 49419 | INSERTION OF INTRAPERITONEAL CAN | 1/1/2007 | $285.97 | 3 |
| 2 | 49420 | INSERTION OF INTRAPERITONEAL CAN | 1/1/2007 | $91.34 | 3 |
| 2 | 49421 | INSERTION OF INTRAPERITONEAL CAN | 1/1/2007 | $244.71 | 3 |
| 2 | 49422 | REMOVAL OF PERMANENT INTRAPERITO | 1/1/2007 | $258.72 | 3 |
| 2 | 49423 | EXCHANGE OF PREVIOUSLY PLACED AB | 1/1/2007 | $53.72 | 3 |
| 2 | 49424 | CONTRAST INJECTION FOR ASSESSMEN | 1/1/2007 | $28.29 | 3 |
| 2 | 49425 | INSERTION OF PERITONEAL-VENOUS S | 1/1/2007 | $480.08 | 3 |
| 2 | 49426 | REVISION OF PERITONEAL-VENOUS SH | 1/1/2007 | $406.64 | 3 |
| 2 | 49427 | INJECTION PROCEDURE FOR EVALUATI | 1/1/2007 | $32.70 | 3 |
| 2 | 49428 | LIGATION OF PERITONEAL-VENOUS SH | 1/1/2007 | $279.74 | 3 |
| 2 | 49429 | REMOVAL OF PERITONEAL-VENOUS SHU | 1/1/2007 | $307.25 | 3 |
| 2 | 49435 | INSERTION OF SUBCUTANEOUS EXTENS | 1/1/2007 | $81.22 | 3 |
| 2 | 49436 | DELAYED CREATION OF EXIT SITE FR | 1/1/2007 | $119.37 | 3 |
| 2 | 49491 | REPAIR, INITIAL INGUINAL HERNIA, | 1/1/2007 | $455.94 | 3 |
| 2 | 49492 | REPAIR, INITIAL INGUINAL HERNIA, | 1/1/2007 | $569.08 | 3 |
| 2 | 49495 | REPAIR, INITIAL INGUINAL HERNIA, | 1/1/2007 | $248.60 | 3 |
| 2 | 49496 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $366.67 | 3 |
| 2 | 49500 | REPAIR INITIAL INGUINAL HERNIA A | 1/1/2007 | $241.34 | 3 |
| 2 | 49501 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $368.49 | 3 |
| 2 | 49505 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $321.00 | 3 |
| 2 | 49507 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $396.78 | 3 |
| 2 | 49520 | REPAIR RECURRENT INGUINAL HERNIA | 1/1/2007 | $398.07 | 3 |
| 2 | 49521 | REPAIR RECURRENT INGUINAL HERNIA | 1/1/2007 | $487.60 | 3 |
| 2 | 49525 | REPAIR INGUINAL HERNIA, SLIDING, | 1/1/2007 | $357.33 | 3 |
| 2 | 49540 | REPAIR LUMBAR HERNIA | 1/1/2007 | $427.92 | 3 |
| 2 | 49550 | REPAIR INITIAL FEMORAL HERNIA, A | 1/1/2007 | $360.45 | 3 |
| 2 | 49553 | REPAIR INITIAL FEMORAL HERNIA, A | 1/1/2007 | $391.59 | 3 |
| 2 | 49555 | REPAIR RECURRENT FEMORAL HERNIA; | 1/1/2007 | $376.02 | 3 |
| 2 | 49557 | REPAIR RECURRENT FEMORAL HERNIA; | 1/1/2007 | $456.46 | 3 |
| 2 | 49560 | REPAIR INITIAL INCISIONAL HERNIA | 1/1/2007 | $472.81 | 3 |
| 2 | 49561 | REPAIR INITIAL INCISIONAL HERNIA | 1/1/2007 | $575.57 | 3 |
| 2 | 49565 | REPAIR RECURRENT INCISIONAL HERN | 1/1/2007 | $474.89 | 3 |
| 2 | 49566 | REPAIR RECURRENT INCISIONAL HERN | 1/1/2007 | $581.80 | 3 |
| 2 | 49568 | IMPLANTATION OF MESH OR OTHER PR | 1/1/2007 | $186.58 | 3 |
| 2 | 49570 | REPAIR EPIGASTRIC HERNIA (EG, PR | 1/1/2007 | $249.12 | 3 |
| 2 | 49572 | REPAIR EPIGASTRIC HERNIA (EG, PR | 1/1/2007 | $287.27 | 3 |
| 2 | 49580 | REPAIR UMBILICAL HERNIA, UNDER A | 1/1/2007 | $187.88 | 3 |
| 2 | 49582 | REPAIR UMBILICAL HERNIA, UNDER A | 1/1/2007 | $285.19 | 3 |
| 2 | 49585 | REPAIR UMBILICAL HERNIA, AGE 5 Y | 1/1/2007 | $268.32 | 3 |
| 2 | 49587 | REPAIR UMBILICAL HERNIA, AGE 5 Y | 1/1/2007 | $318.67 | 3 |
| 2 | 49590 | REPAIR SPIGELIAN HERNIA | 1/1/2007 | $356.81 | 3 |
| 2 | 49600 | REPAIR OF SMALL OMPHALOCELE, WIT | 1/1/2007 | $456.72 | 3 |
| 2 | 49605 | REPAIR OF LARGE OMPHALOCELE OR G | 1/1/2007 | $2,953.89 | 3 |
| 2 | 49606 | REPAIR OF OMPHALOCELE WITH STAGE | 1/1/2007 | $745.28 | 3 |
| 2 | 49610 | REPAIR OF OMPHALOCELE (GROSS TYP | 1/1/2007 | $434.92 | 3 |
| 2 | 49611 | REPAIR OF OMPHALOCELE (GROSS TYP | 1/1/2007 | $432.85 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 49650 | LAPAROSCOPY, SURGICAL; REPAIR IN | 1/1/2007 | $269.62 | 3 |
| 2 | 49651 | LAPAROSCOPY, SURGICAL; REPAIR RE | 1/1/2007 | $348.25 | 3 |
| 2 | 49659 | UNLISTED LAPAROSCOPY PROCEDURE, | 4/1/2002 | $0.01 | 5 |
| 2 | 49900 | SUTURE SECONDARY OF ABDOMINAL WA | 1/1/2007 | $522.11 | 3 |
| 2 | 49904 | OMENTAL FLAP, EXTRA-ABDOMINAL (E | 1/1/2007 | $983.76 | 3 |
| 2 | 49905 | OMENTAL FLAP, INTRA-ABDOMINAL (L | 1/1/2007 | $248.86 | 3 |
| 2 | 49906 | FREE OMENTAL FLAP WITH MICROVASC | 1/1/1997 | $0.01 | 5 |
| 2 | 49999 | UNLISTED PROCEDURE ABDOMEN PERIT | 4/1/1982 | $0.01 | 5 |
| 2 | 50010 | RENAL EXPLORATION, NOT NECESSITA | 1/1/2007 | $444.26 | 3 |
| 2 | 50020 | DRAINAGE OF PERIRENAL OR RENAL A | 1/1/2007 | $616.05 | 3 |
| 2 | 50021 | DRAINAGE OF PERIRENAL OR RENAL A | 1/1/2007 | $121.19 | 3 |
| 2 | 50040 | NEPHROSTOMY NEPHROTOMY WITH DRAI | 1/1/2007 | $590.88 | 3 |
| 2 | 50045 | NEPHROTOMY WITH EXPLORATION | 1/1/2007 | $604.38 | 3 |
| 2 | 50060 | NEPHROLITHOTOMY REMOVAL OF CALCU | 1/1/2007 | $738.80 | 3 |
| 2 | 50065 | NEPHROLITHOTOMY; SECONDARY SURGI | 1/1/2007 | $738.02 | 3 |
| 2 | 50070 | NEPHROLITHOTOMY; COMPLICATED BY | 1/1/2007 | $777.46 | 3 |
| 2 | 50075 | NEPHROLITHOTOMY REMOVAL OF LARGE | 1/1/2007 | $960.67 | 3 |
| 2 | 50080 | PERCUTANEOUS NEPHROSTOLITHOTOMY | 1/1/2007 | $571.42 | 3 |
| 2 | 50081 | PERCUTANEOUS NEPHROSTOLITHOTOMY | 1/1/2007 | $832.74 | 3 |
| 2 | 50100 | TRANSECTION OR REPOSITIONING OF | 1/1/2007 | $672.88 | 3 |
| 2 | 50120 | PYELOTOMY WITH EXPLORATION | 1/1/2007 | $619.69 | 3 |
| 2 | 50125 | PYELOTOMY; WITH DRAINAGE PYELOST | 1/1/2007 | $646.41 | 3 |
| 2 | 50130 | PYELOTOMY WITH REMOVAL OF CALCUL | 1/1/2007 | $665.88 | 3 |
| 2 | 50135 | PYELOTOMY COMPLICATED (EG SECOND | 1/1/2007 | $733.61 | 3 |
| 2 | 50200 | RENAL BIOPSY PERCUTANEOUS BY TRO | 1/1/2007 | $105.88 | 3 |
| 2 | 50205 | RENAL BIOPSY PERCUTANEOUS; BY SU | 1/1/2007 | $456.98 | 3 |
| 2 | 50220 | NEPHRECTOMY, INCLUDING PARTIAL U | 1/1/2007 | $667.43 | 3 |
| 2 | 50225 | NEPHRECTOMY COMPLICATED BECAUSE | 1/1/2007 | $774.87 | 3 |
| 2 | 50230 | NEPHRECTOMY,INCLUDING PARTIAL UR | 1/1/2007 | $835.07 | 3 |
| 2 | 50234 | NEPHRECTOMY WITH TOTAL URETERECT | 1/1/2007 | $851.42 | 3 |
| 2 | 50236 | NEPHRECTOMY WITH TOTAL URETERECT | 1/1/2007 | $956.26 | 3 |
| 2 | 50240 | NEPHRECTOMY PARTIAL | 1/1/2007 | $844.67 | 3 |
| 2 | 50250 | ABLATION, OPEN, ONE OR MORE RENA | 1/1/2006 | NC | 9 |
| 2 | 50280 | EXCISION OR UNROOFING OF CYSTS O | 1/1/2007 | $610.86 | 3 |
| 2 | 50290 | EXCISION OF PERINEPHRIC CYST | 1/1/2007 | $586.21 | 3 |
| 2 | 50300 | DONOR NEPHRECTOMY (INCLUDING COL | 10/1/2000 | $543.14 | 3 |
| 2 | 50320 | DONOR NEPHRECTOMY (INCLUDING COL | 1/1/2007 | $913.70 | 3 |
| 2 | 50323 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 2 | 50325 | BACKBENCH STANDARD PREP OF LIVIN | 7/24/2006 | $170.00 | 3 |
| 2 | 50327 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $146.36 | 3 |
| 2 | 50328 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $128.19 | 3 |
| 2 | 50329 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $122.48 | 3 |
| 2 | 50340 | RECIPIENT NEPHRECTOMY (SEPARATE | 1/1/2007 | $526.53 | 3 |
| 2 | 50360 | RENAL ALLOTRANSPLANTATION, IMPLA | 1/1/2007 | $1,318.26 | 3 |
| 2 | 50365 | RENAL HOMOTRANSPLANTATION, IMPLA | 1/1/2007 | $1,541.69 | 3 |
| 2 | 50370 | REMOVAL OF TRANSPLANTED RENAL AL | 1/1/2007 | $584.65 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 50380 | RENAL AUTOTRANSPLANTATION REIMPL | 1/1/2007 | $915.52 | 3 |
| 2 | 50382 | REMOVAL AND REPLACE OF INTERNAL | 1/1/2007 | $1,091.46 | 3 |
| 2 | 50384 | REMOVAL OF INTERNAL DWELLING URE | 1/1/2007 | $1,054.35 | 3 |
| 2 | 50387 | REMOVAL AND REPLACE OF EXTERNALL | 1/1/2007 | $528.86 | 3 |
| 2 | 50389 | REMOVAL OF NEPHROSTOMY TUBE, REQ | 1/1/2007 | $362.00 | 3 |
| 2 | 50390 | ASPIRATION AND/OR INJECTION OF R | 1/1/2007 | $70.58 | 3 |
| 2 | 50391 | INSTILLATION(S) OF THERAPEUTIC A | 1/1/2007 | $95.50 | 3 |
| 2 | 50392 | INTRODUCTION OF INTRACATHETER OR | 1/1/2007 | $132.09 | 3 |
| 2 | 50393 | INTRODUCTION OF URETERAL CATHETE | 1/1/2007 | $160.63 | 3 |
| 2 | 50394 | INJECTION PROC FOR PYELOGRAPHY T | 1/1/2007 | $90.83 | 3 |
| 2 | 50395 | INTRODUCTION OF GUIDE INTO RENAL | 1/1/2007 | $131.83 | 3 |
| 2 | 50396 | MANOMETRIC STUDIES THROUGH NEPHR | 1/1/2007 | $85.64 | 3 |
| 2 | 50398 | CHANGE OF NEPHROSTOMY OR PYELOST | 1/1/2007 | $53.72 | 3 |
| 2 | 50400 | PYELOPLASTY (FOLEY Y-PYELOPLASTY | 1/1/2007 | $745.80 | 3 |
| 2 | 50405 | PYELOPLASTY; COMPLICATED (CONGEN | 1/1/2007 | $900.98 | 3 |
| 2 | 50500 | NEPHRORRHAPHY SUTURE OF KIDNEY W | 1/1/2007 | $777.20 | 3 |
| 2 | 50520 | CLOSURE OF NEPHROCUTANEOUS OR PY | 1/1/2007 | $678.07 | 3 |
| 2 | 50525 | CLOSURE OF NEPHROVISCERAL FISTUL | 1/1/2007 | $858.69 | 3 |
| 2 | 50526 | CLOSURE OF NEPHROVISCERAL FISTUL | 1/1/2007 | $929.53 | 3 |
| 2 | 50540 | SYMPHYSIOTOMY FOR HORSESHOE KIDN | 1/1/2007 | $768.12 | 3 |
| 2 | 50541 | LAPAROSCOPY, SURGICAL; ABLATION | 1/1/2007 | $612.68 | 3 |
| 2 | 50542 | LAPAROSCOPY, SURGICAL; ABLATION | 1/1/2007 | $765.78 | 3 |
| 2 | 50543 | LAPAROSCOPY, SURGICAL; PARTIAL N | 1/1/2007 | $972.61 | 3 |
| 2 | 50544 | LAPAROSCOPY, SURGICAL; PYELOPLAS | 1/1/2007 | $843.12 | 3 |
| 2 | 50545 | LAPAROSCOPY, SURGICAL; RADICAL N | 1/1/2007 | $904.88 | 3 |
| 2 | 50546 | LAPAROSCOPY, SURGICAL; NEPHRECTO | 1/1/2007 | $788.88 | 3 |
| 2 | 50547 | LAPAROSCOPY, SURGICAL; DONOR NEP | 1/1/2007 | $1,021.13 | 3 |
| 2 | 50548 | LAPAROSCOPY, SURGICAL; NEPHRECTO | 1/1/2007 | $915.52 | 3 |
| 2 | 50549 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 50551 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2007 | $263.13 | 3 |
| 2 | 50553 | RENAL ENDOSCOPY THROUGH EST NEPH | 1/1/2007 | $278.70 | 3 |
| 2 | 50555 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2007 | $305.95 | 3 |
| 2 | 50557 | RENAL ENDOSCOPY THROUGH ESTB NEP | 1/1/2007 | $302.84 | 3 |
| 2 | 50559 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2005 | INVALID | N |
| 2 | 50561 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2007 | $342.80 | 3 |
| 2 | 50562 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2007 | $413.90 | 3 |
| 2 | 50570 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2007 | $348.51 | 3 |
| 2 | 50572 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2007 | $381.21 | 3 |
| 2 | 50574 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2007 | $402.74 | 3 |
| 2 | 50575 | RENAL ENDOSCOPY WITH ENDOPYELOTO | 1/1/2007 | $508.36 | 3 |
| 2 | 50576 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2007 | $400.15 | 3 |
| 2 | 50578 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2005 | INVALID | N |
| 2 | 50580 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2007 | $431.81 | 3 |
| 2 | 50590 | LITHOTRIPSY, EXTRACORPOREAL SHOC | 1/1/2007 | $575.05 | 3 |
| 2 | 50592 | ABLATION, ONE OR MORE RENAL TUMO | 1/1/2006 | NC | 9 |
| 2 | 50600 | URETEROTOMY WITH EXPLORATION OR | 1/1/2007 | $613.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 50605 | URETEROTOMY FOR INSERTION OF IND | 1/1/2007 | $613.46 | 3 |
| 2 | 50610 | URETEROLITHOTOMY UPPER ONE-THIRD | 1/1/2007 | $630.84 | 3 |
| 2 | 50620 | URETEROLITHOTOMY; MIDDLE ONE-THI | 1/1/2007 | $585.43 | 3 |
| 2 | 50630 | URETEROLITHOTOMY; LOWER ONE-THIR | 1/1/2007 | $578.69 | 3 |
| 2 | 50650 | URETERECTOMY WITH BLADDER CUFF ( | 1/1/2007 | $670.81 | 3 |
| 2 | 50660 | URETERECTOMY TOTAL ECTOPIC URETE | 1/1/2007 | $749.18 | 3 |
| 2 | 50684 | INJECT PROC FOR URETEROGRAPHY OR | 1/1/2007 | $150.25 | 3 |
| 2 | 50686 | MANOMETRIC STUDIES THROUGH URETE | 1/1/2007 | $131.57 | 3 |
| 2 | 50688 | CHANGE OF URETEROSTOMY TUBE OR E | 1/1/2007 | $59.69 | 3 |
| 2 | 50690 | INJECT PROC FOR VISUALIZATION OF | 1/1/2007 | $79.41 | 3 |
| 2 | 50700 | URETEROPLASTY PLASTIC OPERATION | 1/1/2007 | $612.16 | 3 |
| 2 | 50715 | URETEROLYSIS, WITH OR WITHOUT RE | 1/1/2007 | $772.27 | 3 |
| 2 | 50722 | URETEROLYSIS FOR OVARIAN VEIN SY | 1/1/2007 | $676.00 | 3 |
| 2 | 50725 | URETEROLYSIS FOR RETROCAVAL URET | 1/1/2007 | $727.64 | 3 |
| 2 | 50727 | REVISION OF URINARY-CUTANEOUS AN | 1/1/2007 | $338.91 | 3 |
| 2 | 50728 | REVISION OF URINARY-CUTANEOUS AN | 1/1/2007 | $481.89 | 3 |
| 2 | 50740 | URETEROPYELOSTOMY ANASTOMOSIS OF | 1/1/2007 | $729.20 | 3 |
| 2 | 50750 | URETEROCALYCOSTOMY ANASTOMOSIS O | 1/1/2007 | $748.92 | 3 |
| 2 | 50760 | URETEROURETEROSTOMY | 1/1/2007 | $717.00 | 3 |
| 2 | 50770 | TRANSURETEROURETEROSTOMY ANASTOM | 1/1/2007 | $750.47 | 3 |
| 2 | 50780 | URETERONEOCYSTOSTOMY; ANASTOMOSI | 1/1/2007 | $712.07 | 3 |
| 2 | 50782 | URETERONEOCYSTOSTOMY; ANASTOMOSI | 1/1/2007 | $776.16 | 3 |
| 2 | 50783 | URETERONEOCYSTOSTOMY; WITH EXTEN | 1/1/2007 | $797.44 | 3 |
| 2 | 50785 | URETERONEOCYSTOSTOMY; WITH VESIC | 1/1/2007 | $784.99 | 3 |
| 2 | 50800 | URETEROENTEROSTOMY, DIRECT ANAST | 1/1/2007 | $575.31 | 3 |
| 2 | 50810 | URETEROSIGMOIDOSTOMY, W/CREATION | 1/1/2007 | $815.87 | 3 |
| 2 | 50815 | URETEROCOLON CONDUIT, INCLUDING | 1/1/2007 | $775.91 | 3 |
| 2 | 50820 | URETEROILEAL CONDUIT (ILEAL BLAD | 1/1/2007 | $841.04 | 3 |
| 2 | 50825 | CONTINENT DIVERSION, INC INTESTI | 1/1/2007 | $1,073.29 | 3 |
| 2 | 50830 | URINARY UNDIVERSION (EG TAKING D | 1/1/2007 | $1,188.51 | 3 |
| 2 | 50840 | REPLACEMENT OF ALL OR PART OF UR | 1/1/2007 | $775.39 | 3 |
| 2 | 50845 | CUTANEOUS APPENDICO-VESICOSTOMY | 1/1/2007 | $813.53 | 3 |
| 2 | 50860 | URETEROSTOMY, TRANSPLANTATION OF | 1/1/2007 | $603.60 | 3 |
| 2 | 50900 | URETERORRHAPHY SUTURE OF URETER | 1/1/2007 | $542.10 | 3 |
| 2 | 50920 | CLOSURE OF URETEROCUTANEOUS FIST | 1/1/2007 | $568.31 | 3 |
| 2 | 50930 | CLOSURE OF URETEROVISCERAL FISTU | 1/1/2007 | $725.30 | 3 |
| 2 | 50940 | DELIGATION OF URETER | 1/1/2007 | $575.05 | 3 |
| 2 | 50945 | LAPAROSCOPY, SURGICAL, URETEROLI | 1/1/2007 | $658.61 | 3 |
| 2 | 50947 | LAPAROSCOPY, SURGICAL; URETERONE | 1/1/2007 | $942.76 | 3 |
| 2 | 50948 | LAPAROSOCPY, SURGICAL; URETERONE | 1/1/2007 | $853.24 | 3 |
| 2 | 50949 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 50951 | URETERAL ENDOSCOPY THROUGH ESTAB | 1/1/2007 | $273.51 | 3 |
| 2 | 50953 | URETERAL ENDOSCOPY THROUGH EST U | 1/1/2007 | $287.27 | 3 |
| 2 | 50955 | URETERAL ENDOSCOPY THROUGH ESTAB | 1/1/2007 | $354.22 | 3 |
| 2 | 50957 | URETERAL ENDOSCOPY THROUGH ESTAB | 1/1/2007 | $306.99 | 3 |
| 2 | 50959 | URETERAL ENDOSCOPY THROUGH ESTAB | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 50961 | URETERAL ENDOSCOPY THROUGH ESTAB | 1/1/2007 | $280.78 | 3 |
| 2 | 50970 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2007 | $262.61 | 3 |
| 2 | 50972 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2007 | $255.35 | 3 |
| 2 | 50974 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2007 | $335.01 | 3 |
| 2 | 50976 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2007 | $331.12 | 3 |
| 2 | 50978 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2005 | INVALID | N |
| 2 | 50980 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2007 | $251.72 | 3 |
| 2 | 51000 | ASPIRATION OF BLADDER BY NEEDLE | 1/1/2007 | $72.14 | 3 |
| 2 | 51005 | ASPIRATION OF BLADDER BY TROCAR | 1/1/2007 | $151.29 | 3 |
| 2 | 51010 | ASPIRATION OF BLADDER; WITH INSE | 1/1/2007 | $244.45 | 3 |
| 2 | 51020 | CYSTOTOMY OR CYSTOSTOMY WITH FUL | 1/1/2007 | $286.23 | 3 |
| 2 | 51030 | CYSTOTOMY OR CYSTOSTOMY; WITH CR | 1/1/2007 | $293.75 | 3 |
| 2 | 51040 | CYSTOSTOMY CYSTOTOMY WITH DRAINA | 1/1/2007 | $193.85 | 3 |
| 2 | 51045 | CYSTOTOMY, WITH INSERTION OF URE | 1/1/2007 | $290.90 | 3 |
| 2 | 51050 | CYSTOLITHOTOMY CYSTOTOMY WITH RE | 1/1/2007 | $286.75 | 3 |
| 2 | 51060 | TRANSVESICAL URETEROLITHOTOMY | 1/1/2007 | $362.52 | 3 |
| 2 | 51065 | CYSTOTOMY, W/CALCULUS BASKET EXT | 1/1/2007 | $358.89 | 3 |
| 2 | 51080 | DRAINAGE OF PERIVESICAL OR PREVE | 1/1/2007 | $257.68 | 3 |
| 2 | 51500 | EXCISION OF URACHAL CYST OR SINU | 1/1/2007 | $419.35 | 3 |
| 2 | 51520 | CYSTOTOMY FOR SIMPLE EXCISON OF | 1/1/2007 | $380.17 | 3 |
| 2 | 51525 | CYSTOTOMY; FOR EXCISION OF BLADD | 1/1/2007 | $547.03 | 3 |
| 2 | 51530 | CYSTOTOMY; FOR EXCISION OF BLADD | 1/1/2007 | $497.46 | 3 |
| 2 | 51535 | CYSTOTOMY FOR EXCISION, INCISION | 1/1/2007 | $516.41 | 3 |
| 2 | 51550 | CYSTECTOMY PARTIAL SIMPLE | 1/1/2007 | $614.76 | 3 |
| 2 | 51555 | CYSTECTOMY PARTIAL COMPLICATED ( | 1/1/2007 | $819.24 | 3 |
| 2 | 51565 | CYSTECTOMY PARTIAL WITH REIMPLAN | 1/1/2007 | $835.59 | 3 |
| 2 | 51570 | CYSTECTOMY COMPLETE (SEPARATE PR | 1/1/2007 | $925.64 | 3 |
| 2 | 51575 | CYSTECTOMY COMPLETE WITH BILATER | 1/1/2007 | $1,157.63 | 3 |
| 2 | 51580 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $1,188.25 | 3 |
| 2 | 51585 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $1,333.57 | 3 |
| 2 | 51590 | CYSTECTOMY, COMPLETE, W/URETEROI | 1/1/2007 | $1,233.14 | 3 |
| 2 | 51595 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $1,396.89 | 3 |
| 2 | 51596 | CYSTECTOMY, COMPLETE, W/CONTINEN | 1/1/2007 | $1,491.87 | 3 |
| 2 | 51597 | PELVIC EXENTERATION COMPLETE FOR | 1/1/2007 | $1,452.16 | 3 |
| 2 | 51600 | INJECTION PROCEDURE FOR CYSTOGRA | 1/1/2007 | $155.70 | 3 |
| 2 | 51605 | INJECTION PROCEDURE AND PLACEMEN | 1/1/2007 | $175.16 | 3 |
| 2 | 51610 | INJECTION PROCEDURE FOR RETROGRA | 1/1/2007 | $88.49 | 3 |
| 2 | 51700 | BLADDER IRRIGATION SIMPLE LAVAGE | 1/1/2007 | $65.91 | 3 |
| 2 | 51701 | INSERTION OF NON-INDWELLING BLAD | 1/1/2007 | $55.01 | 3 |
| 2 | 51702 | INSERTION OF TEMPORARY INDWELLIN | 1/1/2007 | $68.25 | 3 |
| 2 | 51703 | INSERTION OF TEMPORARY INDWELLIN | 1/1/2007 | $111.84 | 3 |
| 2 | 51705 | CHANGE OF CYSTOSTOMY TUBE SIMPLE | 1/1/2007 | $87.45 | 3 |
| 2 | 51710 | CHANGE OF CYSTOSTOMY TUBE; COMPL | 1/1/2007 | $128.19 | 3 |
| 2 | 51715 | ENDOSCOPIC INJECTION OF IMPLANT | 1/1/2007 | $205.78 | 3 |
| 2 | 51720 | BLADDER INSTILLATION OF ANTICARC | 1/1/2007 | $99.91 | 3 |
| 2 | 51725 | SIMPLE CYSTOMETROGRAM (CMG) (EG, | 1/1/2007 | $188.66 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 51726 | COMPLEX CYSTOMETROGRAM (EG, CALI | 1/1/2007 | $244.19 | 3 |
| 2 | 51736 | SIMPLE UROFLOWMETRY (UFR) (EG, S | 1/1/2007 | $32.44 | 3 |
| 2 | 51741 | COMPLEX UROFLOWMETRY (EG, CALIBR | 1/1/2007 | $52.94 | 3 |
| 2 | 51772 | URETHRAL PRESSURE PROFILE STUDIE | 1/1/2007 | $192.03 | 3 |
| 2 | 51784 | ELECTROMYOGRAPHY STUDIES (EMG) O | 1/1/2007 | $147.40 | 3 |
| 2 | 51785 | NEEDLE ELECTROMYOGRAPHY STUDIES | 1/1/2007 | $159.07 | 3 |
| 2 | 51792 | STIMULUS EVOKED RESPONSE (EG MEA | 1/1/2007 | $189.69 | 3 |
| 2 | 51795 | VOIDING PRESSURE STUDIES (VP); B | 1/1/2007 | $235.11 | 3 |
| 2 | 51797 | VOIDING PRESSURE STUDIES (VP); I | 1/1/2007 | $196.44 | 3 |
| 2 | 51798 | MEASUREMENT OF POST-VOIDING RESI | 1/1/2007 | $10.90 | 3 |
| 2 | 51800 | CYSTOPLASTY OR CYSTOURETHROPLAST | 1/1/2007 | $682.23 | 3 |
| 2 | 51820 | CYSTOURETHROPLASTY WITH UNILATER | 1/1/2007 | $724.01 | 3 |
| 2 | 51840 | ANTERIOR VESICOURETHROPEXY, OR U | 1/1/2007 | $449.71 | 3 |
| 2 | 51841 | ANTERIOR VESICOURETHROPEXY OR UR | 1/1/2007 | $535.61 | 3 |
| 2 | 51845 | ABDOMINO-VAGINAL VESICAL NECK SU | 1/1/2007 | $396.00 | 3 |
| 2 | 51860 | CYSTORRHAPHY SUTURE OF BLADDER W | 1/1/2007 | $491.23 | 3 |
| 2 | 51865 | CYSTORRHAPHY SUTURE OF BLADDER W | 1/1/2007 | $595.29 | 3 |
| 2 | 51880 | CLOSURE OF CYSTOSTOMY (SEPARATE | 1/1/2007 | $319.96 | 3 |
| 2 | 51900 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $525.23 | 3 |
| 2 | 51920 | CLOSURE OF VESICOUTERINE FISTULA | 1/1/2007 | $483.19 | 3 |
| 2 | 51925 | CLOSURE OF VESICOUTERINE FISTUAL | 1/1/2007 | $680.41 | 3 |
| 2 | 51940 | CLOSURE, EXSTROPHY OF BLADDER | 1/1/2007 | $1,106.51 | 3 |
| 2 | 51960 | ENTEROCYSTOPLASTY, INCLUDING INT | 1/1/2007 | $889.31 | 3 |
| 2 | 51980 | CUTANEOUS VESICOSTOMY | 1/1/2007 | $456.46 | 3 |
| 2 | 51990 | LAPAROSCOPY, SURGICAL; URETHRAL | 1/1/2007 | $519.78 | 3 |
| 2 | 51992 | LAPAROSCOPY, SURGICAL; SLING OPE | 1/1/2007 | $561.04 | 3 |
| 2 | 51999 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2006 | $0.01 | 5 |
| 2 | 52000 | CYSTOURETHROSCOPY (SEPARATE PROC | 1/1/2007 | $141.69 | 3 |
| 2 | 52001 | CYSTOURETHROSCOPY WITH IRRIGATIO | 1/1/2007 | $283.11 | 3 |
| 2 | 52005 | CYSTOURETHROSCOPY WITH URETERAL | 1/1/2007 | $210.71 | 3 |
| 2 | 52007 | CYSTOURETHROSCOPY WITH URETERAL | 1/1/2007 | $113.92 | 3 |
| 2 | 52010 | CYSTOURETHROSCOPY WITH EJACULATO | 1/1/2007 | $113.66 | 3 |
| 2 | 52204 | CYSTOURETHROSCOPY, WITH BIOPSY | 1/1/2007 | $89.27 | 3 |
| 2 | 52214 | CYSTOURETHROSCOPY, WITH FULGURAT | 1/1/2007 | $137.28 | 3 |
| 2 | 52224 | CYSTOURETHROSCOPY, WITH FULGURAT | 1/1/2007 | $117.03 | 3 |
| 2 | 52234 | CYSTOURETHROSCOPY, WITH FULGURAT | 1/1/2007 | $171.53 | 3 |
| 2 | 52235 | CYSTOURETHROSCOPY WITH FULGURATI | 1/1/2007 | $201.63 | 3 |
| 2 | 52240 | CYSTOURETHROSCOPY WITH FULGURATI | 1/1/2007 | $355.77 | 3 |
| 2 | 52250 | CYSTOURETHROSCOPY WITH INSERTION | 1/1/2007 | $167.64 | 3 |
| 2 | 52260 | CYSTOURETHROSCOPY WITH DILATION | 1/1/2007 | $145.58 | 3 |
| 2 | 52265 | CYSTOURETHROSCOPY WITH DILATION | 1/1/2007 | $110.81 | 3 |
| 2 | 52270 | CYSTOURETHROSCOPY WITH INTERNAL | 1/1/2007 | $125.60 | 3 |
| 2 | 52275 | CYSTOURETHROSCOPY WITH INTERNAL | 1/1/2007 | $173.35 | 3 |
| 2 | 52276 | CYSTOURETHROSCOPY WITH DIRECT VI | 1/1/2007 | $185.02 | 3 |
| 2 | 52277 | CYSTOURETHROSCOPY WITH RESECTION | 1/1/2007 | $229.14 | 3 |
| 2 | 52281 | CYSTOURETHROSCOPY, WITH CALIBRAT | 1/1/2007 | $262.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 52282 | CYSTOURETHROSCOPY, WITH INSERTIO | 1/1/2007 | $235.63 | 3 |
| 2 | 52283 | CYSTOURETHROSCOPY, WITH STEROID | 1/1/2007 | $206.04 | 3 |
| 2 | 52285 | CYSTOURETHROSCOPY FOR TREATMENT | 1/1/2007 | $204.49 | 3 |
| 2 | 52290 | CYSTOURETHROSCOPY WITH URETERAL | 1/1/2007 | $169.97 | 3 |
| 2 | 52300 | CYSTOURETHROSCOPY; W/RESECTION O | 1/1/2007 | $196.96 | 3 |
| 2 | 52301 | CYSTOURETHROSCOPY; WITH RESECTIO | 1/1/2007 | $206.30 | 3 |
| 2 | 52305 | CYSTOURETHROSCOPY WITH INCISION | 1/1/2007 | $195.66 | 3 |
| 2 | 52310 | CYSTOURETHROSCOPY WITH REM OF FO | 1/1/2007 | $200.07 | 3 |
| 2 | 52315 | CYSTOURETHROSCOPY WITH REMOVAL O | 1/1/2007 | $192.29 | 3 |
| 2 | 52317 | LITHOLAPAXY: CRUSHING OR FRAGMEN | 1/1/2007 | $246.01 | 3 |
| 2 | 52318 | LITHOLAPAXY CRUSHING/FRAGMENTATI | 1/1/2007 | $335.53 | 3 |
| 2 | 52320 | CYSTOURETHROSCOPY (INCLUDING URE | 1/1/2007 | $172.57 | 3 |
| 2 | 52325 | CYSTOURETHROSCOPY (INCLUDING URE | 1/1/2007 | $226.02 | 3 |
| 2 | 52327 | CYSTOURETHROSCOPY (INC URETERAL | 1/1/2007 | $191.25 | 3 |
| 2 | 52330 | CYSTOURETHROSCOPY (INCLUDING URE | 1/1/2007 | $185.54 | 3 |
| 2 | 52332 | CYSTOURETHROSCOPY WITH INSERTION | 1/1/2007 | $106.14 | 3 |
| 2 | 52334 | CYSTOURETHROSCOPY WITH INSERTION | 1/1/2007 | $179.31 | 3 |
| 2 | 52341 | CYSTOURETHROSCOPY; WITH TREATMEN | 1/1/2007 | $224.21 | 3 |
| 2 | 52342 | CYSTOURETHROSCOPY; WITH TREATMEN | 1/1/2007 | $241.34 | 3 |
| 2 | 52343 | CYSTOURETHROSCOPY; WITH TREATMEN | 1/1/2007 | $267.03 | 3 |
| 2 | 52344 | CYSTOURETHROSCOPY WITH URETEROSC | 1/1/2007 | $286.49 | 3 |
| 2 | 52345 | CYSTOURETHROSCOPY WITH URETEROSC | 1/1/2007 | $304.39 | 3 |
| 2 | 52346 | CYSTOURETHROSCOPY WITH URETEROSC | 1/1/2007 | $341.50 | 3 |
| 2 | 52347 | CYSTOURETHROSCOPY WITH TRANSURET | 1/1/2005 | INVALID | N |
| 2 | 52351 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2007 | $218.24 | 3 |
| 2 | 52352 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2007 | $256.13 | 3 |
| 2 | 52353 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2007 | $295.57 | 3 |
| 2 | 52354 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2007 | $273.25 | 3 |
| 2 | 52355 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2007 | $326.71 | 3 |
| 2 | 52400 | CYSTOURETHROSCOPY WITH INCISION, | 1/1/2007 | $365.64 | 3 |
| 2 | 52402 | CYSTOURETHROSCOPY W/TRANSURETHRA | 1/1/2005 | NC | 9 |
| 2 | 52450 | TRANSURETHRAL INCISION OF PROSTA | 1/1/2007 | $307.51 | 3 |
| 2 | 52500 | TRANSURETHRAL RESECTION OF BLADD | 1/1/2007 | $337.09 | 3 |
| 2 | 52510 | TRANSURETHRAL BALLOON DILATION O | 1/1/2007 | $267.54 | 3 |
| 2 | 52601 | TRANSURETHRAL ELECTROSURGICAL RE | 1/1/2007 | $475.66 | 3 |
| 2 | 52606 | TRANSURETHRAL FULGURATION FOR PO | 1/1/2007 | $317.89 | 3 |
| 2 | 52612 | TRANSURETHRAL RESECTION OF PROST | 1/1/2007 | $318.41 | 3 |
| 2 | 52614 | TRANSURETHRAL RESECTION OF PROST | 1/1/2007 | $276.63 | 3 |
| 2 | 52620 | TRANSURETHRAL RESECTION OF RESID | 1/1/2007 | $261.06 | 3 |
| 2 | 52630 | TRANSURETHRAL RESECTION OF REGRO | 1/1/2007 | $284.41 | 3 |
| 2 | 52640 | TRANSURETHRAL RESECTION OF POSTO | 1/1/2007 | $260.80 | 3 |
| 2 | 52647 | LASER COAGULATION OF PROSTATE, I | 1/1/2007 | $2,211.46 | 3 |
| 2 | 52648 | LASER VAPORIZATION OF PROSTATE, | 1/1/2007 | $435.44 | 3 |
| 2 | 52700 | TRANSURETHRAL DRAINAGE OF PROSTA | 1/1/2007 | $271.44 | 3 |
| 2 | 53000 | URETHROTOMY OR URETHROSTOMY EXTE | 1/1/2007 | $103.28 | 3 |
| 2 | 53010 | URETHROTOMY OR URETHROSTOMY EXTE | 1/1/2007 | $176.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 53020 | MEATOTOMY, CUTTING OF MEATUS (SE | 1/1/2007 | $127.41 | 3 |
| 2 | 53025 | MEATOTOMY CUTTING OF MEATUS (SEP | 1/1/2007 | $128.45 | 3 |
| 2 | 53040 | DRAINAGE OF DEEP PERIURETHRAL AB | 1/1/2007 | $266.77 | 3 |
| 2 | 53060 | DRAINAGE OF SKENES GLAND ABSCESS | 1/1/2007 | $129.75 | 3 |
| 2 | 53080 | DRAINAGE OF PERINEAL URINARY EXT | 1/1/2007 | $331.38 | 3 |
| 2 | 53085 | DRAINAGE OF PERINEAL URINARY EXT | 1/1/2007 | $482.41 | 3 |
| 2 | 53200 | BIOPSY OF URETHRA | 1/1/2007 | $106.65 | 3 |
| 2 | 53210 | URETHRECTOMY TOTAL INCLUDING CYS | 1/1/2007 | $500.58 | 3 |
| 2 | 53215 | URETHRECTOMY TOTAL INCLUDING CYS | 1/1/2007 | $604.64 | 3 |
| 2 | 53220 | EXCISION OR FULGURATION OF CARCI | 1/1/2007 | $290.64 | 3 |
| 2 | 53230 | EXCISION OF URETHRAL DIVERTICULU | 1/1/2007 | $389.77 | 3 |
| 2 | 53235 | EXCISION OF URETHRAL DIVERTICULU | 1/1/2007 | $408.71 | 3 |
| 2 | 53240 | MARSUPIALIZATION OF URETHRAL DIV | 1/1/2007 | $272.22 | 3 |
| 2 | 53250 | EXCISION OF BULBOURETHRAL GLAND | 1/1/2007 | $250.94 | 3 |
| 2 | 53260 | EXCISION OR FULGURATION URETHRAL | 1/1/2007 | $142.21 | 3 |
| 2 | 53265 | EXCISION OR FULGURATION URETHRAL | 1/1/2007 | $157.78 | 3 |
| 2 | 53270 | EXCISION OR FULGURATION; SKENE'S | 1/1/2007 | $145.32 | 3 |
| 2 | 53275 | EXCISION OR FULGURATION; URETHRA | 1/1/2007 | $184.25 | 3 |
| 2 | 53400 | URETHROPLASTY FIRST STAGE FOR FI | 1/1/2007 | $513.03 | 3 |
| 2 | 53405 | URETHROPLASTY; SECOND STAGE (FOR | 1/1/2007 | $568.05 | 3 |
| 2 | 53410 | URETHROPLASTY ONE-STAGE RECONSTR | 1/1/2007 | $639.67 | 3 |
| 2 | 53415 | URETHROPLASTY, TRANSPUBIC OR PER | 1/1/2007 | $729.20 | 3 |
| 2 | 53420 | URETHROPLASTY TWO-STAGE RECONSTR | 1/1/2007 | $553.25 | 3 |
| 2 | 53425 | URETHROPLASTY TWO-STAGE RECONSTR | 1/1/2007 | $622.54 | 3 |
| 2 | 53430 | URETHROPLASTY RECONSTRUCTION OF | 1/1/2007 | $635.26 | 3 |
| 2 | 53431 | URETHROPLASTY WITH TUBULARIZATIO | 1/1/2007 | $761.37 | 3 |
| 2 | 53440 | SLING OPERATION FOR CORRECTION O | 1/1/2007 | $533.27 | 3 |
| 2 | 53442 | REMOVAL OR REVISION OF SLING FOR | 1/1/2007 | $462.43 | 3 |
| 2 | 53443 | URETHROPLASTY WITH TUBULARIZATIO | 4/1/2002 | INVALID | N |
| 2 | 53444 | INSERTION OF TANDEM CUFF (DUAL C | 1/1/2007 | $524.45 | 3 |
| 2 | 53445 | INSERTION OF INFLATABLE URETHRAL | 1/1/2007 | $574.27 | 3 |
| 2 | 53446 | REMOVAL OF INFLATABLE URETHRAL/B | 1/1/2007 | $419.35 | 3 |
| 2 | 53447 | REMOVAL AND REPLACEMENT OF INFLA | 1/1/2007 | $541.32 | 3 |
| 2 | 53448 | REMOVAL AND REPLACEMENT OF INFLA | 1/1/2007 | $822.36 | 3 |
| 2 | 53449 | REPAIR OF INFLATABLE URETHRAL/BL | 1/1/2007 | $391.85 | 3 |
| 2 | 53450 | URETHROMEATOPLASTY, WITH MUCOSAL | 1/1/2007 | $255.87 | 3 |
| 2 | 53460 | URETHROMEATOPLASTY, WITH PARTIAL | 1/1/2007 | $293.49 | 3 |
| 2 | 53500 | URETHROLYSIS, TRANSVAGINAL, SECO | 1/1/2007 | $501.09 | 3 |
| 2 | 53502 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $317.37 | 3 |
| 2 | 53505 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $312.18 | 3 |
| 2 | 53510 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $415.20 | 3 |
| 2 | 53515 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $526.27 | 3 |
| 2 | 53520 | CLOSURE OF URETHROSTOMY OR URETH | 1/1/2007 | $357.07 | 3 |
| 2 | 53600 | DILATION OF URETHRAL STRICTURE B | 1/1/2007 | $63.32 | 3 |
| 2 | 53601 | DILATION OF URETHRAL STRICTURE B | 1/1/2007 | $60.20 | 3 |
| 2 | 53605 | DILATION OF URETHRAL STRICTURE O | 1/1/2007 | $46.19 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 53620 | DILATION OF URETHRAL STRICTURE B | 1/1/2007 | $96.79 | 3 |
| 2 | 53621 | DILATION OF URETHRAL STRICTURE B | 1/1/2007 | $91.60 | 3 |
| 2 | 53660 | DILATION OF FEMALE URETHRA INCLU | 1/1/2007 | $53.72 | 3 |
| 2 | 53661 | DILATION OF FEMALE URETHRA INCLU | 1/1/2007 | $53.72 | 3 |
| 2 | 53665 | DILATION OF FEMALE URETHRA, GENE | 1/1/2007 | $27.77 | 3 |
| 2 | 53670 | CATHETERIZATION, URETHRA; SIMPLE | 7/1/2003 | INVALID | N |
| 2 | 53675 | CATHETERIZATION; COMPLICATED (MA | 7/1/2003 | INVALID | N |
| 2 | 53850 | TRANSURETHRAL DESTRUCTION OF PRO | 11/1/1998 | NC | 9 |
| 2 | 53852 | TRANSURETHRAL DESTRUCTION OF PRO | 1/1/2007 | $2,584.62 | 3 |
| 2 | 53853 | TRANSURETHRAL DESTRUCTION OF PRO | 1/1/2007 | $1,585.55 | 3 |
| 2 | 53899 | UNLISTED PROCEDURE URINARY SYSTE | 2/1/1994 | $0.01 | 5 |
| 2 | 54000 | SLITTING OF PREPUCE DORSAL OR LA | 1/1/2007 | $118.59 | 3 |
| 2 | 54001 | SLITTING OF PREPUCE DORSAL OR LA | 1/1/2007 | $143.50 | 3 |
| 2 | 54015 | INCISION AND DRAINAGE OF PENIS D | 1/1/2007 | $214.09 | 3 |
| 2 | 54050 | DESTRUCTION OF LESION(S) PENIS ( | 1/1/2007 | $77.33 | 3 |
| 2 | 54055 | DESTRUCTION OF LESION(S) PENIS S | 1/1/2007 | $74.48 | 3 |
| 2 | 54056 | DESTRUCTIN OF LESION(S) PENIS SI | 1/1/2007 | $77.59 | 3 |
| 2 | 54057 | DESTRUCTION OF LESION(S) PENIS S | 1/1/2007 | $92.12 | 3 |
| 2 | 54060 | DESTRUCTION OF LESION(S) PENIS S | 1/1/2007 | $134.16 | 3 |
| 2 | 54065 | DESTRUCTION OF LESION(S), PENIS | 1/1/2007 | $134.68 | 3 |
| 2 | 54100 | BIOPSY OF PENIS; CUTANEOUS (SEPA | 1/1/2007 | $124.82 | 3 |
| 2 | 54105 | BIOPSY OF PENIS; DEEP STRUCTURES | 1/1/2007 | $208.38 | 3 |
| 2 | 54110 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $404.56 | 3 |
| 2 | 54111 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $526.53 | 3 |
| 2 | 54112 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $616.57 | 3 |
| 2 | 54115 | REMOVAL FOREIGN BODY FROM DEEP P | 1/1/2007 | $284.15 | 3 |
| 2 | 54120 | AMPUTATION OF PENIS PARTIAL | 1/1/2007 | $397.55 | 3 |
| 2 | 54125 | AMPUTATION OF PENIS; COMPLETE | 1/1/2007 | $526.79 | 3 |
| 2 | 54130 | AMPUTATION OF PENIS RADICAL WITH | 1/1/2007 | $773.83 | 3 |
| 2 | 54135 | AMPUTATION OF PENIS RADICAL IN C | 1/1/2007 | $995.96 | 3 |
| 2 | 54150 | CIRCUMCISION,USING CLAMP OR OTHE | 1/1/2007 | $164.26 | 3 |
| 2 | 54152 | CIRCUMCISION CLAMP PROCEDURE; EX | 1/1/2007 | INVALID | N |
| 2 | 54160 | CIRCUMCISION, SURGICAL EXCISION | 1/1/2007 | $176.98 | 3 |
| 2 | 54161 | CIRCUMCISION SURGICAL EXCISION O | 1/1/2007 | $131.31 | 3 |
| 2 | 54162 | LYSIS OR EXCISION OF PENILE POST | 1/1/2007 | $204.23 | 3 |
| 2 | 54163 | REPAIR INCOMPLETE CIRCUMCISION | 1/1/2007 | $135.46 | 3 |
| 2 | 54164 | FRENULOTOMY OF PENIS | 1/1/2007 | $117.29 | 3 |
| 2 | 54200 | INJECTION PROCEDURE FOR PEYRONIE | 1/1/2007 | $76.29 | 3 |
| 2 | 54205 | INJECTION PROCEDURE FOR PEYRONIE | 1/1/2007 | $341.76 | 3 |
| 2 | 54220 | IRRIGATION OF CORPORA CAVERNOSA | 1/1/2007 | $167.12 | 3 |
| 2 | 54230 | INJECTION PROCEDURE FOR CORPORA | 1/1/2007 | $65.13 | 3 |
| 2 | 54231 | DYNAMIC CAVERNOSOMETRY, INCLUDIN | 1/1/2007 | $92.64 | 3 |
| 2 | 54235 | INJECTION OF CORPORA CAVERNOSA W | 1/1/2007 | $57.87 | 3 |
| 2 | 54240 | PENILE PLETHYSMOGRAPHY | 1/1/2007 | $65.13 | 3 |
| 2 | 54250 | NOCTURNAL PENILE TUMESCENCE AND/ | 1/1/2007 | $85.89 | 3 |
| 2 | 54300 | PLASTIC OPERATION OF PENIS FOR S | 1/1/2007 | $434.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 54304 | PLASTIC OPERATION ON PENIS FOR C | 1/1/2007 | $510.96 | 3 |
| 2 | 54308 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $483.19 | 3 |
| 2 | 54312 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $46.45 | 3 |
| 2 | 54316 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $673.66 | 3 |
| 2 | 54318 | URETHROPLASTY FOR THIRD STAGE HY | 1/1/2007 | $478.00 | 3 |
| 2 | 54322 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $528.86 | 3 |
| 2 | 54324 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $659.13 | 3 |
| 2 | 54326 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $638.37 | 3 |
| 2 | 54328 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $619.43 | 3 |
| 2 | 54332 | ONE STAGE PROXIMAL PENILE OR PEN | 1/1/2007 | $674.70 | 3 |
| 2 | 54336 | ONE STAGE PERINEAL HYPOSPADIAS R | 1/1/2007 | $843.89 | 3 |
| 2 | 54340 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $378.09 | 3 |
| 2 | 54344 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $654.46 | 3 |
| 2 | 54348 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $693.12 | 3 |
| 2 | 54352 | REPAIR OF HYPOSPADIAS CRIPPLE RE | 1/1/2007 | $989.73 | 3 |
| 2 | 54360 | PLASTIC OPERATION ON PENIS TO CO | 1/1/2007 | $487.60 | 3 |
| 2 | 54380 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $537.42 | 3 |
| 2 | 54385 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $635.78 | 3 |
| 2 | 54390 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $844.67 | 3 |
| 2 | 54400 | INSERTION OF PENILE PROSTHESIS; | 1/1/2007 | $362.52 | 3 |
| 2 | 54401 | INSERTION OF PENILE PROSTHESIS; | 1/1/2007 | $434.14 | 3 |
| 2 | 54402 | REMOVAL OR REPLACEMENT OF NON-IN | 4/1/2002 | INVALID | N |
| 2 | 54405 | INSERTION OF MULTI-COMPONENT, IN | 1/1/2007 | $526.53 | 3 |
| 2 | 54406 | REMOVAL OF ALL COMPONENTS OF A M | 1/1/2007 | $476.70 | 3 |
| 2 | 54407 | REMOVAL, REPAIR, OR REPLACEMENT | 4/1/2002 | INVALID | N |
| 2 | 54408 | REPAIR OF COMPONENT(S) OF A MULT | 1/1/2007 | $502.65 | 3 |
| 2 | 54409 | SURGICAL CORRECTION OF HYDRAULIC | 4/1/2002 | INVALID | N |
| 2 | 54410 | REMOVAL AND REPLACEMENT OF ALL C | 1/1/2007 | $602.30 | 3 |
| 2 | 54411 | REMOVAL AND REPLACEMENT OF ALL C | 1/1/2007 | $626.95 | 3 |
| 2 | 54415 | REMOVAL OF NON-INFLATABLE (SEMI- | 1/1/2007 | $336.57 | 3 |
| 2 | 54416 | REMOVAL AND REPLACEMENT OF NON-I | 1/1/2007 | $441.15 | 3 |
| 2 | 54417 | REMOVAL AND REPLACEMENT OF NON-I | 1/1/2007 | $554.03 | 3 |
| 2 | 54420 | CORPORA CAVERNOSA-SAPHENOUS VEIN | 1/1/2007 | $461.65 | 3 |
| 2 | 54430 | CORPORA CAVERNOSA-CORPUS SPONGIO | 1/1/2007 | $414.16 | 3 |
| 2 | 54435 | CORPORA CAVERNOSA-GLANS PENIS FI | 1/1/2007 | $263.65 | 3 |
| 2 | 54440 | PLASTIC OPERATION OF PENIS FOR I | 10/1/2000 | $523.45 | 3 |
| 2 | 54450 | FORESKIN MANIPULATION INCLUDING | 1/1/2007 | $55.79 | 3 |
| 2 | 54500 | BIOPSY OF TESTIS NEEDLE (SEPARAT | 1/1/2007 | $52.42 | 3 |
| 2 | 54505 | BIOPSY OF TESTIS, INCISIONAL (SE | 1/1/2007 | $146.36 | 3 |
| 2 | 54510 | EXCISION OF LOCAL LESION OF TEST | 4/1/2002 | INVALID | N |
| 2 | 54512 | EXCISION OF EXTRAPARENCHYMAL LES | 1/1/2007 | $346.95 | 3 |
| 2 | 54520 | ORCHIECTOMY, SIMPLE (INCLUDING S | 1/1/2007 | $220.83 | 3 |
| 2 | 54522 | ORCHIECTOMY, PARTIAL | 1/1/2007 | $395.74 | 3 |
| 2 | 54530 | ORCHIECTOMY RADICAL FOR TUMOR IN | 1/1/2007 | $349.55 | 3 |
| 2 | 54535 | ORCHIECTOMY RADICAL FOR TUMOR; W | 1/1/2007 | $483.71 | 3 |
| 2 | 54550 | EXPLORATION FOR UNDESCENDED TEST | 1/1/2007 | $315.81 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 54560 | EXPLORATION FOR UNDESCENDED TEST | 1/1/2007 | $445.56 | 3 |
| 2 | 54600 | REDUCTION OF TORSION OF TESTIS S | 1/1/2007 | $287.01 | 3 |
| 2 | 54620 | FIXATION OF CONTRALATERAL TESTIS | 1/1/2007 | $199.82 | 3 |
| 2 | 54640 | ORCHIOPEXY, INGUINAL APPROACH, W | 1/1/2007 | $291.94 | 3 |
| 2 | 54650 | ORCHIOPEXY, ABDOMINAL APPROACH, | 1/1/2007 | $467.10 | 3 |
| 2 | 54660 | INSERTION OF TESTICULAR PROSTHES | 4/1/1982 | NC | 9 |
| 2 | 54670 | SUTURE OR REPAIR OF TESTICULAR I | 1/1/2007 | $270.14 | 3 |
| 2 | 54680 | TRANSPLANTATION OF TESTIS(ES) TO | 1/1/2007 | $517.70 | 3 |
| 2 | 54690 | LAPAROSCOPY, SURGICAL; ORCHIECTO | 1/1/2007 | $438.56 | 3 |
| 2 | 54692 | LAPAROSCOPY, SURGICAL; ORCHIOPEX | 1/1/2007 | $508.62 | 3 |
| 2 | 54699 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 54700 | INCISION AND DRAINAGE OF EPIDIDY | 1/1/2007 | $146.36 | 3 |
| 2 | 54800 | BIOPSY OF EPIDIDYMIS NEEDLE | 1/1/2007 | $90.83 | 3 |
| 2 | 54820 | EXPLORATION OF EPIDIDYMIS WITH O | 1/1/2007 | INVALID | N |
| 2 | 54830 | EXCISION OF LOCAL LESION OF EPID | 1/1/2007 | $228.36 | 3 |
| 2 | 54840 | EXCISION OF SPERMATOCELE WITH OR | 1/1/2007 | $216.42 | 3 |
| 2 | 54860 | EPIDIDYMECTOMY UNILATERAL | 1/1/2007 | $261.32 | 3 |
| 2 | 54861 | EPIDIDYMECTOMY; BILATERAL | 1/1/2007 | $358.89 | 3 |
| 2 | 54865 | EXPLORATION OF EPIDIDYMIS, WIHT | 1/1/2007 | $270.40 | 3 |
| 2 | 54900 | EPIDIDYMOVASOSTOMY ANASTOMOSIS O | 7/1/1982 | NC | 9 |
| 2 | 54901 | EPIDIDYMOVASOSTOMY ANASTOMOSIS O | 7/1/1982 | NC | 9 |
| 2 | 55000 | PUNCTURE ASPIRATION OF HYDROCELE | 1/1/2007 | $93.68 | 3 |
| 2 | 55040 | EXCISION OF HYDROCELE UNILATERAL | 1/1/2007 | $225.25 | 3 |
| 2 | 55041 | EXCISION OF HYDROCELE; BILATERAL | 1/1/2007 | $319.19 | 3 |
| 2 | 55060 | REPAIR OF HYDROCELE (BOTTLE TYPE | 1/1/2007 | $234.85 | 3 |
| 2 | 55100 | DRAINAGE OF SCROTAL WALL ABSCESS | 1/1/2007 | $155.18 | 3 |
| 2 | 55110 | SCROTAL EXPLORATION | 1/1/2007 | $240.04 | 3 |
| 2 | 55120 | REMOVAL OF FOREIGN BODY IN SCROT | 1/1/2007 | $218.50 | 3 |
| 2 | 55150 | RESECTION OF SCROTUM | 1/1/2007 | $301.28 | 3 |
| 2 | 55175 | SCROTOPLASTY; SIMPLE | 1/1/2007 | $223.43 | 3 |
| 2 | 55180 | SCROTOPLASTY; COMPLICATED | 1/1/2007 | $440.37 | 3 |
| 2 | 55200 | VASOTOMY CANNULIZATION WITH OR W | 1/1/2007 | $438.81 | 3 |
| 2 | 55250 | VASECTOMY UNILATERAL OR BILATERA | 1/1/2007 | $390.29 | 3 |
| 2 | 55300 | VASOTOMY FOR VASOGRAMS SEMINAL V | 7/1/1982 | NC | 9 |
| 2 | 55400 | VASOVASOSTOMY, VASOVASORRHAPHY | 7/1/1982 | NC | 9 |
| 2 | 55450 | LIGATION (PERCUTANEOUS) OF VAS D | 1/1/2007 | $162.71 | 3 |
| 2 | 55500 | EXCISION OF HYDROCELE OF SPERMAT | 1/1/2007 | $239.26 | 3 |
| 2 | 55520 | EXCISION OF LESION OF SPERMATIC | 1/1/2007 | $260.02 | 3 |
| 2 | 55530 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $236.40 | 3 |
| 2 | 55535 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $270.40 | 3 |
| 2 | 55540 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $321.78 | 3 |
| 2 | 55550 | LAPAROSCOPY, SURGICAL, WITH LIGA | 1/1/2007 | $270.66 | 3 |
| 2 | 55559 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 55600 | VESICULOTOMY | 1/1/2007 | $267.80 | 3 |
| 2 | 55605 | VESICULOTOMY; COMPLICATED | 1/1/2007 | $334.24 | 3 |
| 2 | 55650 | VESICULECTOMY, ANY APPROACH | 1/1/2007 | $466.58 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 55680 | EXCISION OF MULLERIAN DUCT CYST | 1/1/2007 | $223.69 | 3 |
| 2 | 55700 | BIOPSY PROSTATE NEEDLE OR PUNCH | 1/1/2007 | $152.59 | 3 |
| 2 | 55705 | BIOPSY PROSTATE; INCISIONAL ANY | 1/1/2007 | $186.32 | 3 |
| 2 | 55720 | PROSTATOTOMY EXTERNAL DRAINAGE O | 1/1/2007 | $321.78 | 3 |
| 2 | 55725 | PROSTATOTOMY EXTERNAL DRAINAGE O | 1/1/2007 | $359.67 | 3 |
| 2 | 55801 | PROSTATECTOMY, PERINEAL, SUBTOTA | 1/1/2007 | $693.64 | 3 |
| 2 | 55810 | PROSTATECTOMY, PERINEAL RADICAL; | 1/1/2007 | $858.95 | 3 |
| 2 | 55812 | PROSTATECTOMY PERINEAL RADICAL; | 1/1/2007 | $1,050.98 | 3 |
| 2 | 55815 | PROSTATECTOMY PERINEAL RADICAL W | 1/1/2007 | $1,154.00 | 3 |
| 2 | 55821 | PROSTATECTOMY (INCLUDING CONTROL | 1/1/2007 | $556.63 | 3 |
| 2 | 55831 | PROSTATECTOMY RETROPUBIC SUBTOTA | 1/1/2007 | $606.19 | 3 |
| 2 | 55840 | PROSTATECTOMY, RETROPUBIC RADICA | 1/1/2007 | $870.88 | 3 |
| 2 | 55842 | PROSTATECTOMY RETROPUBIC RADICAL | 1/1/2007 | $931.86 | 3 |
| 2 | 55845 | PROSTATECTOMY RETROPUBIC RADICAL | 1/1/2007 | $1,076.15 | 3 |
| 2 | 55859 | TRANSPERINEAL PLACEMENT OF NEEDL | 1/1/2007 | INVALID | N |
| 2 | 55860 | EXPOSURE OF PROSTATE, ANY APPROA | 1/1/2007 | $567.27 | 3 |
| 2 | 55862 | EXPOSURE OF PROSTATE ANY APPROAC | 1/1/2007 | $718.82 | 3 |
| 2 | 55865 | EXPOSURE OF PROSTATE ANY APPROAC | 1/1/2007 | $875.55 | 3 |
| 2 | 55866 | LAPAROSCOPY, SURGICAL PROSTATECT | 1/1/2007 | $1,156.85 | 3 |
| 2 | 55870 | ELECTROEJACULATION | 3/1/1992 | NC | 9 |
| 2 | 55873 | CRYOSURGICAL ABLATION OF THE PRO | 1/1/2007 | $772.79 | 3 |
| 2 | 55875 | TRANSPERINEAL PLACEMENT OF NEEDL | 1/1/2007 | $576.87 | 3 |
| 2 | 55876 | PLACEMENT OF INTERSTITIAL DEVICE | 1/1/2007 | $105.10 | 3 |
| 2 | 55899 | UNLISTED PROCEDURE MALE GENITAL | 4/1/1982 | $0.01 | 5 |
| 2 | 55970 | INTERSEX SURGERY MALE TO FEMALE | 4/1/1982 | NC | 9 |
| 2 | 55980 | INTERSEX SURGERY; FEMALE TO MALE | 4/1/1982 | NC | 9 |
| 2 | 56405 | INCISION AND DRAINAGE OF VULVA O | 1/1/2007 | $76.29 | 3 |
| 2 | 56420 | INCISION AND DRAINAGE OF BARTHOL | 1/1/2007 | $99.39 | 3 |
| 2 | 56440 | MARSUPIALIZATION OF BARTHOLINS G | 1/1/2007 | $126.90 | 3 |
| 2 | 56441 | LYSIS OF LABIAL ADHESIONS | 1/1/2007 | $103.54 | 3 |
| 2 | 56442 | HYMENOTOMY, SIMPLE INCISION | 1/1/2007 | $32.96 | 3 |
| 2 | 56501 | DESTRUCTION OF LESION(S), VULVA; | 1/1/2007 | $90.83 | 3 |
| 2 | 56515 | DESTRUCTION OF LESION(S), VULVA; | 1/1/2007 | $146.36 | 3 |
| 2 | 56605 | BIOPSY OF VULVA OR PERINEUM (SEP | 1/1/2007 | $59.69 | 3 |
| 2 | 56606 | BIOPSY OF VULVA OR PERINEUM; EAC | 1/1/2007 | $28.80 | 3 |
| 2 | 56620 | VULVECTOMY SIMPLE; PARTIAL | 1/1/2007 | $341.50 | 3 |
| 2 | 56625 | VULVECTOMY SIMPLE; COMPLETE | 1/1/2007 | $382.50 | 3 |
| 2 | 56630 | VULVECTOMY RADICAL WITHOUT SKIN | 1/1/2007 | $536.65 | 3 |
| 2 | 56631 | VULVECTOMY, RADICAL, PARTIAL; WI | 1/1/2007 | $699.61 | 3 |
| 2 | 56632 | VULVECTOMY, RADICAL, PARTIAL; WI | 1/1/2007 | $835.07 | 3 |
| 2 | 56633 | VULVECTOMY, RADICAL, COMPLETE; | 1/1/2007 | $701.43 | 3 |
| 2 | 56634 | VULVECTOMY, RADICAL, COMPLETE; W | 1/1/2007 | $764.49 | 3 |
| 2 | 56637 | VULVECTOMY, RADICAL, COMPLETE; W | 1/1/2007 | $924.60 | 3 |
| 2 | 56640 | VULVECTOMY, RADICAL, COMPLETE, W | 1/1/2007 | $925.38 | 3 |
| 2 | 56700 | PARTIAL HYMENECTOMY OR REVISION | 1/1/2007 | $120.93 | 3 |
| 2 | 56720 | HYMENOTOMY SIMPLE INCISION | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 56740 | EXCISION OF BARTHOLINS GLAND OR | 1/1/2007 | $199.56 | 3 |
| 2 | 56800 | PLASTIC REPAIR OF INTROITUS | 1/1/2007 | $169.19 | 3 |
| 2 | 56805 | CLITOROPLASTY FOR INTERSEX STATE | 1/1/2007 | $789.14 | 3 |
| 2 | 56810 | PERINEOPLASTY, REPAIR OF PERINEU | 1/1/2007 | $179.31 | 3 |
| 2 | 56820 | COLPOSCOPY OF THE VULVA; | 1/1/2007 | $77.59 | 3 |
| 2 | 56821 | COLPOSCOPY OF THE VULVA; WITH BI | 1/1/2007 | $105.36 | 3 |
| 2 | 57000 | COLPOTOMY WITH EXPLORATION | 1/1/2007 | $129.75 | 3 |
| 2 | 57010 | COLPOTOMY; WITH DRAINAGE OF PELV | 1/1/2007 | $273.51 | 3 |
| 2 | 57020 | COLPOCENTESIS (SEPARATE PROCEDUR | 1/1/2007 | $67.99 | 3 |
| 2 | 57022 | INCISION AND DRAINAGE OF VAGINAL | 1/1/2007 | $111.84 | 3 |
| 2 | 57023 | INCISION AND DRAINAGE OF BAGINAL | 1/1/2007 | $205.01 | 3 |
| 2 | 57061 | DESTRUCTION OF VAGINAL LESION(S) | 1/1/2007 | $79.15 | 3 |
| 2 | 57065 | DESTRUCTION OF VAGINAL LESION(S) | 1/1/2007 | $135.46 | 3 |
| 2 | 57100 | BIOPSY OF VAGINAL MUCOSA SIMPLE | 1/1/2007 | $62.80 | 3 |
| 2 | 57105 | BIOPSY OF VAGINAL MUCOSA; EXTENS | 1/1/2007 | $95.76 | 3 |
| 2 | 57106 | VAGINECTOMY, PARTIAL REMOVAL OF | 1/1/2007 | $292.46 | 3 |
| 2 | 57107 | VAGINECTOMY, PARTIAL REMOVAL OF | 1/1/2007 | $938.61 | 3 |
| 2 | 57109 | VAGINECTOMY, PARTIAL REMOVAL OF | 1/1/2007 | $1,075.37 | 3 |
| 2 | 57110 | COLPECTOMY OBLITERATION OF VAGIN | 1/1/2007 | $604.38 | 3 |
| 2 | 57111 | VAGINECTOMY, COMPLETE REMOVAL OF | 1/1/2007 | $1,110.14 | 3 |
| 2 | 57112 | VAGINECTOMY, COMPLETE REMOVAL OF | 1/1/2007 | $1,145.95 | 3 |
| 2 | 57120 | COLPOCLEISIS (LE FORT TYPE) | 1/1/2007 | $334.76 | 3 |
| 2 | 57130 | EXCISION OF VAGINAL SEPTUM | 1/1/2007 | $126.64 | 3 |
| 2 | 57135 | EXCISION OF VAGINAL CYST OR TUMO | 1/1/2007 | $136.24 | 3 |
| 2 | 57150 | IRRIGATION AND/OR APPLICATION OF | 1/1/2007 | $44.63 | 3 |
| 2 | 57155 | INSERTION OF UTERINE TANDEMS AND | 1/1/2007 | $292.20 | 3 |
| 2 | 57160 | FITTING AND INSERTION OF PESSARY | 1/1/2007 | $51.90 | 3 |
| 2 | 57170 | DIAPHRAGM OR CERVICAL CAP FITTIN | 1/1/2007 | $64.88 | 3 |
| 2 | 57180 | INTRODUCTION OF ANY HEMOSTATIC A | 1/1/2007 | $102.24 | 3 |
| 2 | 57200 | COLPORRHAPHY SUTURE OF INJURY OF | 1/1/2007 | $189.18 | 3 |
| 2 | 57210 | COLPOPERINEORRHAPHY SUTURE OF IN | 1/1/2007 | $239.26 | 3 |
| 2 | 57220 | PLASTIC OPERATION ON URETHRAL SP | 1/1/2007 | $205.52 | 3 |
| 2 | 57230 | PLASTIC REPAIR OF URETHROCELE | 1/1/2007 | $248.60 | 3 |
| 2 | 57240 | ANTERIOR COLPORRHAPHY, REPAIR OF | 1/1/2007 | $272.48 | 3 |
| 2 | 57250 | POSTERIOR COLPORRHAPHY, REPAIR O | 1/1/2007 | $253.01 | 3 |
| 2 | 57260 | COMBINED ANTEROPOSTERIOR COLPORR | 1/1/2007 | $365.12 | 3 |
| 2 | 57265 | COMBINED ANTEROPOSTERIOR COLORRH | 1/1/2007 | $485.01 | 3 |
| 2 | 57267 | INSERTION OF MESH OR OTHER PROST | 1/1/2007 | $194.63 | 3 |
| 2 | 57268 | REPAIR OF ENTEROCELE VAGINAL APP | 1/1/2007 | $304.65 | 3 |
| 2 | 57270 | REPAIR OF ENTEROCELE ABDOMINAL A | 1/1/2007 | $513.03 | 3 |
| 2 | 57280 | COLPOPEXY ABDOMINAL APPROACH | 1/1/2007 | $624.62 | 3 |
| 2 | 57282 | COLPOPEXY, VAGINAL; EXTRA-PERITO | 1/1/2007 | $321.52 | 3 |
| 2 | 57283 | COLPOPEXY, VAGINAL; INTRA-PERITO | 1/1/2007 | $461.65 | 3 |
| 2 | 57284 | PARAVAGINAL DEFECT REPAIR (INCL | 1/1/2007 | $551.44 | 3 |
| 2 | 57287 | REMOVAL OR REVISION OF SLING FOR | 1/1/2007 | $443.23 | 3 |
| 2 | 57288 | SLING OPERATION FOR STRESS INCON | 1/1/2007 | $520.04 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 57289 | PEREYRA PROCEDURE INCLUDING ANTE | 1/1/2007 | $488.38 | 3 |
| 2 | 57291 | CONSTRUCTION OF ARTIFICIAL VAGIN | 1/1/2007 | $358.11 | 3 |
| 2 | 57292 | CONSTRUCTION OF ARTIFICIAL VAGIN | 1/1/2007 | $560.52 | 3 |
| 2 | 57295 | REVISION (INCLUDING REMOVAL) OF | 1/1/2007 | $332.16 | 3 |
| 2 | 57296 | REVISION OF PROSTHETIC VAGINAL G | 1/1/2007 | $645.90 | 3 |
| 2 | 57300 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $331.12 | 3 |
| 2 | 57305 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $564.41 | 3 |
| 2 | 57307 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $646.93 | 3 |
| 2 | 57308 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $419.61 | 3 |
| 2 | 57310 | CLOSURE OF URETHROVAGINAL FISTUL | 1/1/2007 | $289.34 | 3 |
| 2 | 57311 | CLOSURE OF URETHROVAGINAL FISTUL | 1/1/2007 | $330.60 | 3 |
| 2 | 57320 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $338.91 | 3 |
| 2 | 57330 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $495.90 | 3 |
| 2 | 57335 | VAGINOPLASTY FOR INTERSEX STATE | 1/1/2007 | $769.68 | 3 |
| 2 | 57400 | DILATION OF VAGINA UNDER ANESTHE | 1/1/2007 | $94.46 | 3 |
| 2 | 57410 | PELVIC EXAMINATION UNDER ANESTHE | 1/1/2007 | $102.50 | 3 |
| 2 | 57415 | REMOVAL OF IMPACTED VAGINAL FORE | 1/1/2007 | $99.39 | 3 |
| 2 | 57420 | COLPOSCOPY OF THE ENTIRE VAGINA, | 1/1/2007 | $81.48 | 3 |
| 2 | 57421 | COLPOSCOPY OF THE ENTIRE VAGINA, | 1/1/2007 | $112.10 | 3 |
| 2 | 57425 | LAPAROSCOPY, SURGICAL, COLPOPEXY | 1/1/2007 | $626.17 | 3 |
| 2 | 57452 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $76.81 | 3 |
| 2 | 57454 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $110.29 | 3 |
| 2 | 57455 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $102.50 | 3 |
| 2 | 57456 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $96.53 | 3 |
| 2 | 57460 | COLPOSCOPY (VAGINOSCOPY); WITH L | 1/1/2007 | $234.33 | 3 |
| 2 | 57461 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $258.46 | 3 |
| 2 | 57500 | BIOPSY SINGLE OR MULTIPLE OR LOC | 1/1/2007 | $94.46 | 3 |
| 2 | 57505 | ENDOCERVICAL CURETTAGE (NOT DONE | 1/1/2007 | $71.10 | 3 |
| 2 | 57510 | CAUTERY OF CERVIX; ELECTRO OR TH | 1/1/2007 | $95.76 | 3 |
| 2 | 57511 | CAUTERIZATION OF CERVIX; CRYOCAU | 1/1/2007 | $102.76 | 3 |
| 2 | 57513 | CAUTERIZATION OF CERVIX; LASER A | 1/1/2007 | $99.91 | 3 |
| 2 | 57520 | CONIZATION OF CERVIX, W/OR W/OUT | 1/1/2007 | $219.54 | 3 |
| 2 | 57522 | CONIZATION OF CERVIX, W/OR W/OUT | 1/1/2007 | $179.57 | 3 |
| 2 | 57530 | TRACHELECTOMY (CERVICECTOMY AMPU | 1/1/2007 | $227.06 | 3 |
| 2 | 57531 | RADICAL TRACHELECTOMY, WITH BILA | 1/1/2007 | $1,154.78 | 3 |
| 2 | 57540 | EXCISION OF CERVICAL STUMP ABDOM | 1/1/2007 | $517.44 | 3 |
| 2 | 57545 | EXCISION OF CERVICAL STUMP ABDOM | 1/1/2007 | $550.66 | 3 |
| 2 | 57550 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2007 | $260.02 | 3 |
| 2 | 57555 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2007 | $392.36 | 3 |
| 2 | 57556 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2007 | $366.93 | 3 |
| 2 | 57558 | DILATION AND CURETTAGE OF CERVIC | 1/1/2007 | $83.82 | 3 |
| 2 | 57700 | CERCLAGE OF UTERINE CERVIX, NONO | 1/1/2007 | $183.21 | 3 |
| 2 | 57720 | TRACHELORRHAPHY PLASTIC REPAIR O | 1/1/2007 | $200.33 | 3 |
| 2 | 57800 | DILATION OF CERVICAL CANAL INSTR | 1/1/2007 | $42.04 | 3 |
| 2 | 57820 | DILATION AND CURETTAGE OF CERVIC | 1/1/2007 | INVALID | N |
| 2 | 58100 | ENDOMETRIAL SAMPLING, W/OR W/OUT | 1/1/2007 | $78.63 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 58110 | ENDOMETRIAL SAMPLING (BIOPSY) PE | 1/1/2007 | $36.59 | 3 |
| 2 | 58120 | DILATION AND CURETTAGE DIAGNOSTI | 1/1/2007 | $154.92 | 3 |
| 2 | 58140 | MYOMECTOMY, EXCISION OF FIBROID | 1/1/2007 | $610.08 | 3 |
| 2 | 58145 | MYOMECTOMY EXCISION OF FIBROID T | 1/1/2007 | $358.11 | 3 |
| 2 | 58146 | MYOMECTOMY, EXCISION OF FIBROID | 1/1/2007 | $786.80 | 3 |
| 2 | 58150 | TOTAL ABDOMINAL HYSTERECTOMY(COR | 1/1/2007 | $637.33 | 3 |
| 2 | 58152 | TOTAL HYSTERECTOMY (CORPUS & CER | 1/1/2007 | $854.27 | 3 |
| 2 | 58180 | SUPRACERVICAL ABDOMINAL HYSTEREC | 1/1/2007 | $632.66 | 3 |
| 2 | 58200 | TOTAL ABDOMINAL HYSTERECTOMY, IN | 1/1/2007 | $885.41 | 3 |
| 2 | 58210 | RADIACL ABDOMINAL HYSTERECTOMY, | 1/1/2007 | $1,178.39 | 3 |
| 2 | 58240 | PELVIC EXENTERATION FOR GYNECOLO | 1/1/2007 | $1,562.45 | 3 |
| 2 | 58260 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $551.18 | 3 |
| 2 | 58262 | VAGINAL HYSTERECTOMY; WITH REMOV | 1/1/2007 | $621.24 | 3 |
| 2 | 58263 | VAGINAL HYSTERECTOMY; WITH REMOV | 1/1/2007 | $671.59 | 3 |
| 2 | 58267 | VAGINAL HYSTERECTOMY WITH COLPO- | 1/1/2007 | $712.59 | 3 |
| 2 | 58270 | VAGINAL HYSTERECTOMY; WITH REPAI | 1/1/2007 | $598.15 | 3 |
| 2 | 58275 | VAGINAL HYSTERECTOMY, WITH TOTAL | 1/1/2007 | $660.17 | 3 |
| 2 | 58280 | VAGINAL HYSTERECTOMY WITH TOTAL | 1/1/2007 | $708.69 | 3 |
| 2 | 58285 | VAGINAL HYSTERECTOMY RADICAL (SC | 1/1/2007 | $905.66 | 3 |
| 2 | 58290 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $789.14 | 3 |
| 2 | 58291 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $861.02 | 3 |
| 2 | 58292 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $911.10 | 3 |
| 2 | 58293 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $946.92 | 3 |
| 2 | 58294 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $836.11 | 3 |
| 2 | 58300 | INSERTION OF INTRAUTERINE DEVICE | 1/1/2007 | $66.17 | 3 |
| 2 | 58301 | REMOVAL OF INTRAUTERINE DEVICE ( | 1/1/2007 | $71.10 | 3 |
| 2 | 58321 | ARTIFICIAL IMSEMINATION; INTRA-C | 2/1/1994 | NC | 9 |
| 2 | 58322 | ARTIFICIAL INSEMINATION; INTRA-U | 2/1/1994 | NC | 9 |
| 2 | 58323 | SPERM WASHING FOR ARTIFICIAL INS | 2/1/1994 | NC | 9 |
| 2 | 58340 | INJECTION PROCEDURE FOR HYSTEROS | 1/1/2007 | $107.43 | 3 |
| 2 | 58345 | TRANSCERVICAL INTRODUCTION OF FA | 1/1/1993 | NC | 9 |
| 2 | 58346 | INSERTION OF HEYMAN CAPSULES FOR | 1/1/2007 | $291.42 | 3 |
| 2 | 58350 | CHROMOTUBATION OF OVIDUCT, INCLU | 4/1/1982 | NC | 9 |
| 2 | 58353 | ENDOMETRIAL ABLATION, THERMAL, W | 1/1/2007 | $156.74 | 3 |
| 2 | 58356 | ENDOMETRIAL CRYOABLATION WITH UL | 1/1/2005 | NC | 9 |
| 2 | 58400 | UTERINE SUSPENSION WITH OR WITHO | 1/1/2007 | $286.49 | 3 |
| 2 | 58410 | UTERINE SUSPENSION WITH/OUT SHOR | 1/1/2007 | $534.83 | 3 |
| 2 | 58520 | HYSTERORRHAPHY REPAIR OF RUPTURE | 1/1/2007 | $503.95 | 3 |
| 2 | 58540 | HYSTEROPLASTY REPAIR OF UTERINE | 1/1/2007 | $606.45 | 3 |
| 2 | 58541 | LAPAROSCOPY, SURGICAL, SUPRACERV | 1/1/2007 | $581.02 | 3 |
| 2 | 58542 | LAPAROSCOPY, SURGICAL, SUPRACERV | 1/1/2007 | $643.04 | 3 |
| 2 | 58543 | LAPAROSCOPY, SURGICAL, SUPRACERV | 1/1/2007 | $653.94 | 3 |
| 2 | 58544 | LAPAROSCOPY, SURGICAL, SUPRACERV | 1/1/2007 | $708.18 | 3 |
| 2 | 58545 | LAPAROSCOPY, SURGICAL, MYOMECTOM | 1/1/2007 | $611.12 | 3 |
| 2 | 58546 | LAPAROSCOPY, SURGICAL, MYOMECTOM | 1/1/2007 | $783.95 | 3 |
| 2 | 58548 | LAPAROSCOPY, SURGICAL; W/RADICAL | 1/1/2007 | $1,238.07 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 58550 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $602.04 | 3 |
| 2 | 58551 | LAPAROSCOPY, SURGICAL; WITH REMO | 7/1/2003 | INVALID | N |
| 2 | 58552 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $667.69 | 3 |
| 2 | 58553 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $783.95 | 3 |
| 2 | 58554 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $899.43 | 3 |
| 2 | 58555 | HYSTEROSCOPY, DIAGNOSTIC (SEPARA | 1/1/2007 | $153.88 | 3 |
| 2 | 58558 | HYSTEROSCOPY, SURGICAL; WITH SAM | 1/1/2007 | $194.37 | 3 |
| 2 | 58559 | HYSTEROSCOPY, SURGICAL; WITH LYS | 1/1/2007 | $250.16 | 3 |
| 2 | 58560 | HYSTEROSCOPY, SURGICAL; WITH DIV | 1/1/2007 | $283.37 | 3 |
| 2 | 58561 | HYSTEROSCOPY, SURGICAL; WITH REM | 1/1/2007 | $401.97 | 3 |
| 2 | 58562 | HYSTEROSCOPY, SURGICAL; WITH REM | 1/1/2007 | $212.53 | 3 |
| 2 | 58563 | HYSTEROSCOPY, SURGICAL; W/ENDOME | 1/1/2007 | $250.68 | 3 |
| 2 | 58565 | HYSTEROSCOPY, SURGICAL; W/BILATE | 1/1/2007 | $1,502.76 | 3 |
| 2 | 58578 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 58579 | UNLISTED HYSTEROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 58600 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $248.86 | 3 |
| 2 | 58605 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $225.77 | 3 |
| 2 | 58611 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $57.09 | 3 |
| 2 | 58615 | OCCLUSION OF FALLOPIAN TUBES BY | 1/1/2007 | $183.47 | 3 |
| 2 | 58660 | LAPAROSCOPY, SURGICAL; WITH LYSI | 1/1/2007 | $465.54 | 3 |
| 2 | 58661 | LAPAROSCOPY, SURGICAL; WITH REMO | 1/1/2007 | $454.13 | 3 |
| 2 | 58662 | LAPAROSCOPY, SURGICAL; WITH FULG | 1/1/2007 | $493.05 | 3 |
| 2 | 58670 | LAPAROSCOPY, SURGICAL; WITH FULG | 1/1/2007 | $247.56 | 3 |
| 2 | 58671 | LAPAROSCOPY, SURGICAL; WITH OCCL | 1/1/2007 | $247.82 | 3 |
| 2 | 58672 | LAPAROSCOPY, SURGICAL; WITH FIMB | 1/1/2007 | $536.13 | 3 |
| 2 | 58673 | LAPAROSCOPY, SURGICAL; WITH SALP | 1/1/2007 | $570.90 | 3 |
| 2 | 58679 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2000 | $0.01 | 5 |
| 2 | 58700 | SALPINGECTOMY COMPLETE OR PARTIA | 1/1/2007 | $507.06 | 3 |
| 2 | 58720 | SALPINGO-OOPHORECTOMY COMPLETE O | 1/1/2007 | $480.59 | 3 |
| 2 | 58740 | LYSIS OF ADHESIIONS (SALPINGOLYS | 1/1/2007 | $592.70 | 3 |
| 2 | 58750 | TUBOTUBAL ANASTOMOSIS | 4/1/1982 | NC | 9 |
| 2 | 58752 | TUBOUTERINE IMPLANTATION | 10/1/1984 | NC | 9 |
| 2 | 58760 | FIMBRIOPLASTY | 4/1/1982 | NC | 9 |
| 2 | 58770 | SALPINGOSTOMY (SALPINGONEOSTOMY) | 10/1/1984 | NC | 9 |
| 2 | 58800 | DRAINAGE OF OVARIAN CYSTS UNILAT | 1/1/2007 | $213.05 | 3 |
| 2 | 58805 | DRAINAGE OF OVARIAN CYST(S) UNIL | 1/1/2007 | $261.32 | 3 |
| 2 | 58820 | DRAINAGE OF OVARIAN ABSCESS VAGI | 1/1/2007 | $208.38 | 3 |
| 2 | 58822 | DRAINAGE OF OVARIAN ABSCESS; ABD | 1/1/2007 | $428.18 | 3 |
| 2 | 58823 | DRAINAGE OF PELVIC ABSCESS, TRAN | 1/1/2007 | $122.74 | 3 |
| 2 | 58825 | TRANSPOSITION, OVARY(S) | 1/1/2007 | $469.44 | 3 |
| 2 | 58900 | BIOPSY OF OVARY UNILATERAL OR BI | 1/1/2007 | $265.99 | 3 |
| 2 | 58920 | WEDGE RESECTION OR BISECTION OF | 1/1/2007 | $476.44 | 3 |
| 2 | 58925 | OVARIAN CYSTECTOMY UNILATERAL OR | 1/1/2007 | $478.78 | 3 |
| 2 | 58940 | OOPHORECTOMY PARTIAL OR TOTAL UN | 1/1/2007 | $319.19 | 3 |
| 2 | 58943 | OOPHORECTOMY, PARTIAL OR TOTAL, | 1/1/2007 | $760.08 | 3 |
| 2 | 58950 | RESECTION OF OVARIAN, TUBAL OR P | 1/1/2007 | $709.99 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 58951 | RESECTION OF OVARIAN MALIGNANCY | 1/1/2007 | $919.93 | 3 |
| 2 | 58952 | RESECTION OF OVARIAN, TUBAL OR P | 1/1/2007 | $1,032.03 | 3 |
| 2 | 58953 | BILATERAL SALPINGO-OOPHORECTOMY | 1/1/2007 | $1,306.84 | 3 |
| 2 | 58954 | BILATERAL SALPINGO-OOPHORECTOMY | 1/1/2007 | $1,423.88 | 3 |
| 2 | 58956 | BILATERAL SALPINGO-OOPHORECTOMY | 1/1/2007 | $911.36 | 3 |
| 2 | 58957 | RESECTION OF RECURRENT OVARIAN, | 1/1/2007 | $1,002.71 | 3 |
| 2 | 58958 | RESECTION OF RECURRENT OVARIAN, | 1/1/2007 | $1,110.40 | 3 |
| 2 | 58960 | LAPAROTOMY, FOR STAGING OR RESTA | 1/1/2007 | $617.35 | 3 |
| 2 | 58970 | FOLLICLE PUNCTURE FOR OOCYTE RET | 3/1/1987 | NC | 9 |
| 2 | 58974 | EMBRYO TRANSFER, INTRAUTERINE | 3/1/1987 | NC | 9 |
| 2 | 58976 | GAMETE, ZYGOTE, OR EMBRYO INTRAF | 3/1/1987 | NC | 9 |
| 2 | 58999 | UNLISTED PROCEDURE FEMALE GENITA | 2/1/1994 | $0.01 | 5 |
| 2 | 59000 | AMNIOCENTESIS; DIAGNOSTIC | 1/1/2007 | $95.76 | 3 |
| 2 | 59001 | AMNIOCENTESIS; THERAPEUTIC AMNIO | 1/1/2007 | $132.86 | 3 |
| 2 | 59012 | CORDOCENTESIS (INTRAUTERINE), AN | 1/1/2007 | $150.51 | 3 |
| 2 | 59015 | CHORIONIC VILLUS SAMPLING, ANY M | 1/1/2007 | $110.81 | 3 |
| 2 | 59020 | FETAL CONTRACTION STRESS TEST | 1/1/2007 | $44.12 | 3 |
| 2 | 59025 | FETAL NON-STRESS TEST | 1/1/2007 | $29.06 | 3 |
| 2 | 59030 | FETAL SCALP BLOOD SAMPLING | 1/1/2007 | $83.82 | 3 |
| 2 | 59050 | FETAL MONITORING DURING LABOR BY | 1/1/2007 | $37.63 | 3 |
| 2 | 59051 | FETAL MONITORING DURING LABOR BY | 1/1/2007 | $31.14 | 3 |
| 2 | 59070 | TRANSABDOMINAL AMNIOINFUSION, IN | 1/1/2007 | $277.15 | 3 |
| 2 | 59072 | FETAL UMBILICAL CORD OCCLUSION, | 1/1/2007 | $318.67 | 3 |
| 2 | 59074 | FETAL FLUID DRAINAGE (EG, VESICO | 1/1/2007 | $262.10 | 3 |
| 2 | 59076 | FETAL SHUNT PLACEMENT, INCLUDING | 1/1/2007 | $318.67 | 3 |
| 2 | 59100 | HYSTEROTOMY, ABDOMINAL (EG, FOR | 1/1/2007 | $564.15 | 3 |
| 2 | 59120 | SURG TREAT OF ECTOPIC PREG;TUB O | 1/1/2007 | $530.68 | 3 |
| 2 | 59121 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $538.98 | 3 |
| 2 | 59130 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $580.76 | 3 |
| 2 | 59135 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $633.18 | 3 |
| 2 | 59136 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $594.51 | 3 |
| 2 | 59140 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $232.51 | 3 |
| 2 | 59150 | LAPAROSCOPIC TREATMENT OF ECTOPI | 1/1/2007 | $530.42 | 3 |
| 2 | 59151 | LAPAROSCOPIC TREATMENT OF ECTOPI | 1/1/2007 | $526.01 | 3 |
| 2 | 59160 | CURETTAGE, POSTPARTUM (SEPARATE | 1/1/2007 | $172.57 | 3 |
| 2 | 59200 | INSERTION OF CERVICAL DILATOR (E | 1/1/2007 | $56.31 | 3 |
| 2 | 59300 | EPISIOTOMY OR VAGINAL REPAIR, BY | 1/1/2007 | $133.90 | 3 |
| 2 | 59320 | CERCLAGE OF CERVIX, DURGING PREG | 1/1/2007 | $111.84 | 3 |
| 2 | 59325 | CERCLAGE OF CERVIX, DURING PREGN | 1/1/2007 | $177.50 | 3 |
| 2 | 59350 | HYSTERORRHAPHY OF RUPTURED UTERU | 1/1/2007 | $207.34 | 3 |
| 2 | 59400 | ROUTINE OBSTETRIC CARE INCLUDING | 1/1/2007 | $1,702.16 | 3 |
| 2 | 59409 | VAGINAL DELIVERY ONLY (WITH OR W | 1/1/2007 | $853.99 | 3 |
| 2 | 59410 | VAGINAL DELIVERY ONLY (W/WO EPIS | 1/1/2007 | $954.09 | 3 |
| 2 | 59412 | EXTERNAL CEPHALIC VERSION, WITH | 1/1/2007 | $113.30 | 3 |
| 2 | 59414 | DELIVERY OF PLACENTA (SEPARATE P | 1/1/2007 | $102.04 | 3 |
| 2 | 59425 | ANTEPARTUM CARE ONLY; 4-6 VISITS | 1/1/2007 | $393.82 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 59426 | ANTEPARTUM CARE ONLY; 7 OR MORE | 1/1/2007 | $690.64 | 3 |
| 2 | 59430 | POSTPARTUM CARE ONLY (SEPARATE P | 1/1/2007 | $149.77 | 3 |
| 2 | 59510 | ROUTINE OBSTETRIC CARE INCLUDING | 1/1/2007 | $1,929.14 | 3 |
| 2 | 59514 | CAESAREAN DELIVERY ONLY; | 1/1/2007 | $1,007.64 | 3 |
| 2 | 59515 | CAESAREAN DELIVERY ONLY; INCLUDI | 1/1/2007 | $1,137.23 | 3 |
| 2 | 59525 | SUBTOTAL OR TOTAL HYSTERECTOMY A | 1/1/2007 | $534.66 | 3 |
| 2 | 59610 | ROUTINE OBSTETRIC CARE INCLUDING | 1/1/2007 | $1,797.99 | 3 |
| 2 | 59612 | VAGINAL DELIVERY ONLY, AFTER PRE | 1/1/2007 | $957.97 | 3 |
| 2 | 59614 | VAGINAL DELIVERY ONLY, AFTER PRE | 1/1/2007 | $1,053.42 | 3 |
| 2 | 59618 | ROUTINE OBSTETRIC CARE INCL ANTE | 1/1/2007 | $2,041.27 | 3 |
| 2 | 59620 | CESAREAN DELIVERY ONLY, FOLLOWIN | 1/1/2007 | $1,103.47 | 3 |
| 2 | 59622 | CESAREAN DELIVERY ONLY, FOLLOWIN | 1/1/2007 | $1,243.54 | 3 |
| 2 | 59812 | TREATMENT OF INCOMPLETE ABORTION | 1/1/2007 | $194.63 | 3 |
| 2 | 59820 | TREATMENT OF MISSED ABORTION, CO | 1/1/2007 | $243.41 | 3 |
| 2 | 59821 | TREATMENT OF MISSED ABORTION, CO | 1/1/2007 | $254.31 | 3 |
| 2 | 59830 | TREATMENT OF SEPTIC ABORTION, CO | 1/1/2007 | $299.20 | 3 |
| 2 | 59840 | INDUCED ABORTION, BY DILATION AN | 1/1/2007 | $151.81 | 3 |
| 2 | 59841 | INDUCED ABORTION, BY DILATION AN | 1/1/2007 | $258.72 | 3 |
| 2 | 59850 | INDUCED ABORTION, BY ONE OR MORE | 1/1/2007 | $270.92 | 3 |
| 2 | 59851 | INDUCED ABORTION, BY ONE OR MORE | 1/1/2007 | $284.15 | 3 |
| 2 | 59852 | INDUCED ABORTION, BY ONE OR MORE | 1/1/2007 | $391.33 | 3 |
| 2 | 59855 | INDUCED ABORTION, BY ONE OR MORE | 1/1/2007 | $288.30 | 3 |
| 2 | 59856 | INDUCED ABORTION, BY ONE OR MORE | 1/1/2007 | $345.65 | 3 |
| 2 | 59857 | INDUCED ABORTION, BY ONE OR MORE | 1/1/2007 | $415.46 | 3 |
| 2 | 59866 | MULTIFETAL PREGNANCY REDUCTION(S | 1/1/2007 | $175.42 | 3 |
| 2 | 59870 | UTERINE EVACUATION AND CURETTAGE | 1/1/2007 | $309.06 | 3 |
| 2 | 59871 | REMOVAL OF CERCLAGE SUTURE UNDER | 1/1/2007 | $113.66 | 3 |
| 2 | 59897 | UNLISTED FETAL INVASIVE PROCEDUR | 1/1/2004 | NC | 9 |
| 2 | 59898 | UNLISTED LAPAROSCOPY PROCEDURE, | 10/1/2001 | $0.01 | 5 |
| 2 | 59899 | UNLISTED PROCEDURE MATERNITY CAR | 1/1/1999 | $0.01 | 5 |
| 2 | 60000 | INCISION AND DRAINAGE OF THYROGL | 1/1/2007 | $99.65 | 3 |
| 2 | 60001 | ASPIRATION AND/OR INJECTION, THY | 1/1/2007 | $63.58 | 3 |
| 2 | 60100 | BIOPSY THYROID, PERCUTANEOUS COR | 1/1/2007 | $79.41 | 3 |
| 2 | 60200 | EXCISION OF CYST OR ADENOMA OF T | 1/1/2007 | $429.47 | 3 |
| 2 | 60210 | PARTIAL THYROID LOBECTOMY, UNILA | 1/1/2007 | $460.35 | 3 |
| 2 | 60212 | PARTIAL THYROID LOBECTOMY, UNILA | 1/1/2007 | $665.36 | 3 |
| 2 | 60220 | TOTAL THYROID LOVECTOMY, UNIALTE | 1/1/2007 | $502.39 | 3 |
| 2 | 60225 | TOTAL THYROID LOBECTOMY, UNILATE | 1/1/2007 | $602.82 | 3 |
| 2 | 60240 | THYROIDECTOMY TOTAL OR COMPLETE | 1/1/2007 | $661.47 | 3 |
| 2 | 60252 | THYROIDECTOMY TOTAL OR SUBTOTAL | 1/1/2007 | $855.05 | 3 |
| 2 | 60254 | THYROIDECTOMY TOTAL OR SUBTOTAL | 1/1/2007 | $1,134.79 | 3 |
| 2 | 60260 | THYROIDECTOMY, REMOVAL OF ALL RE | 1/1/2007 | $727.64 | 3 |
| 2 | 60270 | THYROIDECTOMY, INCL SUBSTERNAL T | 1/1/2007 | $857.39 | 3 |
| 2 | 60271 | THYROIDECTOMY, INC SUBSTERNAL TH | 1/1/2007 | $704.28 | 3 |
| 2 | 60280 | EXCISION OF THYROGLOSSAL DUCT CY | 1/1/2007 | $287.27 | 3 |
| 2 | 60281 | EXCISION OF THYROGLOSSAL DUCT CY | 1/1/2007 | $391.85 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 60500 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $665.10 | 3 |
| 2 | 60502 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $836.37 | 3 |
| 2 | 60505 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $909.55 | 3 |
| 2 | 60512 | PARATHYROID AUTOTRANSPLANTATION | 1/1/2007 | $171.01 | 3 |
| 2 | 60520 | THYMECTOMY, PARTIAL OR TOTAL; TR | 1/1/2007 | $707.92 | 3 |
| 2 | 60521 | THYMECTOMY, PARTIAL OR TOTAL; ST | 1/1/2007 | $810.16 | 3 |
| 2 | 60522 | THYMECTOMY, PARTIAL OR TOTAL; ST | 1/1/2007 | $975.98 | 3 |
| 2 | 60540 | ADRENALECTOMY, PART OR COMP, OR | 1/1/2007 | $683.52 | 3 |
| 2 | 60545 | ADRENALECTOMY PARTIAL OR COMPLET | 1/1/2007 | $790.70 | 3 |
| 2 | 60600 | EXCISION OF CAROTID BODY TUMOR W | 1/1/2007 | $806.53 | 3 |
| 2 | 60605 | EXCISION OF CAROTID BODY TUMOR W | 1/1/2007 | $907.99 | 3 |
| 2 | 60650 | LAPAROSCOPY, SURGICAL, WITH ADRE | 1/1/2007 | $784.99 | 3 |
| 2 | 60659 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 2 | 60699 | UNLISTED PROCEDURE ENDOCRINE SYS | 4/1/1982 | $0.01 | 5 |
| 2 | 61000 | SUBDURAL TAP THROUGH FONTANELLE, | 1/1/2007 | $69.03 | 3 |
| 2 | 61001 | SUBDURAL TAP THROUGH FONTANELLE | 1/1/2007 | $70.32 | 3 |
| 2 | 61020 | VENTRICULAR PUNCTURE THROUGH PRE | 1/1/2007 | $82.78 | 3 |
| 2 | 61026 | VENTRICULAR PUNCT THRU PREV BURR | 1/1/2007 | $88.49 | 3 |
| 2 | 61050 | CISTERNAL OR LATERAL CERVICAL (C | 1/1/2007 | $75.00 | 3 |
| 2 | 61055 | CISTERNAL OR LATERAL CERVICAL (C | 1/1/2007 | $95.76 | 3 |
| 2 | 61070 | PUNCTURE OF SHUNT TUBING OR RESE | 1/1/2007 | $53.72 | 3 |
| 2 | 61105 | TWIST DRILL HOLE FOR SUBDURAL OR | 1/1/2007 | $269.62 | 3 |
| 2 | 61107 | TWIST DRILL HOLE FOR SUBDURAL OR | 1/1/2007 | $228.88 | 3 |
| 2 | 61108 | TWIST DRILL HOLE FOR SUBDURAL OR | 1/1/2007 | $517.96 | 3 |
| 2 | 61120 | BURR HOLES FOR VENTRICULAR PUNCT | 1/1/2007 | $437.26 | 3 |
| 2 | 61140 | BURR HOLES OR TREPHINE WITH BIOP | 1/1/2007 | $775.91 | 3 |
| 2 | 61150 | BURR HOLE(S) OR TREPHINE WITH DR | 1/1/2007 | $836.89 | 3 |
| 2 | 61151 | BURR HOLE(S) OR TREPHINE WITH SU | 1/1/2007 | $602.82 | 3 |
| 2 | 61154 | BURR HOLE(S) WITH EVACUATION AND | 1/1/2007 | $744.25 | 3 |
| 2 | 61156 | BURR HOLE(S) WITH ASPIRATION OF | 1/1/2007 | $788.36 | 3 |
| 2 | 61210 | BURR HOLE(S); FOR IMPLANTING VEN | 1/1/2007 | $265.99 | 3 |
| 2 | 61215 | INSERTION OF SUBCUTANEOUS RESERV | 1/1/2007 | $263.39 | 3 |
| 2 | 61250 | BURR HOLE(S) OR TREPHINE, SUPRAT | 1/1/2007 | $519.78 | 3 |
| 2 | 61253 | BURR HOLES OR TREPHINE INFRATENT | 1/1/2007 | $588.81 | 3 |
| 2 | 61304 | CRANIECTOMY OR CRANIOTOMY EXPLOR | 1/1/2007 | $1,048.64 | 3 |
| 2 | 61305 | CRANIECTOMY OR CRANIOTOMY EXPLOR | 1/1/2007 | $1,245.34 | 3 |
| 2 | 61312 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $1,192.40 | 3 |
| 2 | 61313 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $1,197.85 | 3 |
| 2 | 61314 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $1,129.34 | 3 |
| 2 | 61315 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $1,319.30 | 3 |
| 2 | 61316 | INCISION AND SUBCUTANEOUS PLACEM | 1/1/2007 | $60.72 | 3 |
| 2 | 61320 | CRANIECTOMY OR CRANIOTOMY DRAINA | 1/1/2007 | $1,218.87 | 3 |
| 2 | 61321 | CRANIECTOMY OR CRANIOTOMY DRAINA | 1/1/2007 | $1,342.91 | 3 |
| 2 | 61322 | CRANIECTOMY OR CRANIOTOMY, DECOM | 1/1/2007 | $1,369.64 | 3 |
| 2 | 61323 | CRANIECTOMY OR CRANIOTOMY, DECOM | 1/1/2007 | $1,429.59 | 3 |
| 2 | 61330 | DECOMPRESSION OF ORBIT ONLY, TRA | 1/1/2007 | $1,021.39 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 61332 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $1,237.82 | 3 |
| 2 | 61333 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $1,231.07 | 3 |
| 2 | 61334 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $795.11 | 3 |
| 2 | 61340 | SUBTEMPORAL CRANIAL DECOMPRESSIO | 1/1/2007 | $898.13 | 3 |
| 2 | 61343 | CRANIECTOMY, SUBOCCIPITAL W/CERV | 1/1/2007 | $1,406.49 | 3 |
| 2 | 61345 | OTHER CRANIAL DECOMPRESSION POST | 1/1/2007 | $1,287.38 | 3 |
| 2 | 61440 | CRANIOTOMY FOR SECTION OF TENTOR | 1/1/2007 | $1,238.07 | 3 |
| 2 | 61450 | CRANIECTOMY, SUBTEMPORAL, FOR SE | 1/1/2007 | $1,193.70 | 3 |
| 2 | 61458 | CRANIECTOMY SUBOCCIPITAL FOR EXP | 1/1/2007 | $1,292.57 | 3 |
| 2 | 61460 | CRANIECTOMY SUBOCCIPITAL; FOR SE | 1/1/2007 | $1,319.04 | 3 |
| 2 | 61470 | CRANIECTOMY SUBOCCIPITAL; FOR ME | 1/1/2007 | $1,188.25 | 3 |
| 2 | 61480 | CRANIECTOMY SUBOCCIPITAL; FOR ME | 1/1/2007 | $1,257.80 | 3 |
| 2 | 61490 | CRANIOTOMY FOR LOBOTOMY, INCLUDI | 1/1/2007 | $1,216.54 | 3 |
| 2 | 61500 | CRANIECTOMY; WITH EXCISION OF TU | 1/1/2007 | $851.68 | 3 |
| 2 | 61501 | CRANIECTOMY; FOR OSTEOMYELITIS | 1/1/2007 | $707.40 | 3 |
| 2 | 61510 | CRANIECTOMY, TREPHINATION, BONE | 1/1/2007 | $1,361.86 | 3 |
| 2 | 61512 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,656.13 | 3 |
| 2 | 61514 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,199.15 | 3 |
| 2 | 61516 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,172.94 | 3 |
| 2 | 61517 | IMPLANTATION OF BRAIN INTRACAVIT | 1/1/2007 | $61.50 | 3 |
| 2 | 61518 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $1,765.38 | 3 |
| 2 | 61519 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $1,936.91 | 3 |
| 2 | 61520 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $2,500.28 | 3 |
| 2 | 61521 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $2,077.30 | 3 |
| 2 | 61522 | CRANIECTOMY INFRATENTORIAL OR PO | 1/1/2007 | $1,387.55 | 3 |
| 2 | 61524 | CRANIECTOMY INFRATENTORIAL OR PO | 1/1/2007 | $1,314.89 | 3 |
| 2 | 61526 | CRANIECTOMY BONE FLAP CRANIOTOMY | 1/1/2007 | $2,302.02 | 3 |
| 2 | 61530 | CRANIECTOMY BONE FLAP CRANIOTOMY | 1/1/2007 | $1,947.29 | 3 |
| 2 | 61531 | SUBDURAL IMPLANTATION OF STRIP E | 1/1/2007 | $714.66 | 3 |
| 2 | 61533 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $943.02 | 3 |
| 2 | 61534 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $998.56 | 3 |
| 2 | 61535 | CRANIECTOMY,TREPHINATION,BONE FL | 1/1/2007 | $572.46 | 3 |
| 2 | 61536 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,673.52 | 3 |
| 2 | 61537 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $1,210.83 | 3 |
| 2 | 61538 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,272.59 | 3 |
| 2 | 61539 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,508.73 | 3 |
| 2 | 61540 | CRANIOTOMY W/ELEVATION OF BONE F | 1/1/2007 | $1,441.52 | 3 |
| 2 | 61541 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,340.06 | 3 |
| 2 | 61542 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,475.26 | 3 |
| 2 | 61543 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,379.24 | 3 |
| 2 | 61544 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $1,174.76 | 3 |
| 2 | 61545 | CRANIECTOMY, TREPHINATION, BONE | 1/1/2007 | $2,039.93 | 3 |
| 2 | 61546 | CRANIOTOMY FOR HYPOPHYSECTOMY OR | 1/1/2007 | $292.92 | 3 |
| 2 | 61548 | HYPOPHYSECTOMY OR EXCISION OF PI | 1/1/2007 | $979.35 | 3 |
| 2 | 61550 | CRANIECTOMY FOR CRANIOSYNOSTOSIS | 1/1/2007 | $585.43 | 3 |
| 2 | 61552 | CRANIECTOMY FOR CRANIOSYNOSTOSIS | 1/1/2007 | $771.49 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 61556 | CRANIOTOMY FOR CRANIOSYNOSTOSIS; | 1/1/2007 | $992.85 | 3 |
| 2 | 61557 | CRANIOTOMY FOR CRANIOSYNOSTOSIS; | 1/1/2007 | $1,084.45 | 3 |
| 2 | 61558 | EXTENSIVE CRANIECTOMY FOR MULTIP | 1/1/2007 | $1,067.32 | 3 |
| 2 | 61559 | EXTENSIVE CRANIECTOMY FOR MULTIP | 1/1/2007 | $1,572.31 | 3 |
| 2 | 61563 | EXCISION, INTRA AND EXTRACRANIAL | 1/1/2007 | $1,225.36 | 3 |
| 2 | 61564 | EXCISION, INTRA AND EXTRACRANIAL | 1/1/2007 | $1,579.32 | 3 |
| 2 | 61566 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $1,445.16 | 3 |
| 2 | 61567 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $1,627.07 | 3 |
| 2 | 61570 | CRANIECTOMY OR CRANIOTOMY;W/EXCI | 1/1/2007 | $1,151.40 | 3 |
| 2 | 61571 | CRANIECTOMY OR CRANIOTOMY WITH T | 1/1/2007 | $1,253.39 | 3 |
| 2 | 61575 | TRANSORAL APPROACH TO SKULL BASE | 1/1/2007 | $1,539.35 | 3 |
| 2 | 61576 | TRANSORAL APP TO SKULL BASE,DECO | 1/1/2007 | $2,406.60 | 3 |
| 2 | 61580 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $1,539.09 | 3 |
| 2 | 61581 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $1,608.12 | 3 |
| 2 | 61582 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $1,717.37 | 3 |
| 2 | 61583 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $1,829.99 | 3 |
| 2 | 61584 | ORBITOCRANIAL APPROACH TO ANTERI | 1/1/2007 | $1,747.73 | 3 |
| 2 | 61585 | ORBITOCRANIAL APPROACH TO ANTERI | 1/1/2007 | $1,871.77 | 3 |
| 2 | 61586 | BICORONAL, TRANSZYGOMATIC AND/OR | 1/1/2007 | $1,351.22 | 3 |
| 2 | 61590 | INFRATEMPORAL PRE-AURICULAR APPR | 1/1/2007 | $1,964.67 | 3 |
| 2 | 61591 | INFRATEMPORAL POST-AURICULAR APP | 1/1/2007 | $2,046.42 | 3 |
| 2 | 61592 | ORBITOCRANIAL ZYGOMATIC APPROACH | 1/1/2007 | $1,977.39 | 3 |
| 2 | 61595 | TRANSTEMPORAL APPROACH TO POSTER | 1/1/2007 | $1,450.86 | 3 |
| 2 | 61596 | TRANSCOCHLEAR APPROACH TO POSTER | 1/1/2007 | $1,647.31 | 3 |
| 2 | 61597 | TRANSCONDYLAR (FAR LATERAL) APPR | 1/1/2007 | $1,810.53 | 3 |
| 2 | 61598 | TRANSPETROSAL APPROACH TO POSTER | 1/1/2007 | $1,617.72 | 3 |
| 2 | 61600 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $1,282.45 | 3 |
| 2 | 61601 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $1,427.51 | 3 |
| 2 | 61605 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $1,405.45 | 3 |
| 2 | 61606 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $1,892.53 | 3 |
| 2 | 61607 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $1,737.35 | 3 |
| 2 | 61608 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $2,060.95 | 3 |
| 2 | 61609 | TRANSECTION OR LIGATION, CAROTID | 1/1/2007 | $448.68 | 3 |
| 2 | 61610 | TRANSECTION OR LIGATION, CAROTID | 1/1/2007 | $1,309.70 | 3 |
| 2 | 61611 | TRANSECTION OR LIGATION, CAROTID | 1/1/2007 | $340.46 | 3 |
| 2 | 61612 | TRANSECTION OR LIGATION, CAROTID | 1/1/2007 | $1,180.47 | 3 |
| 2 | 61613 | OBLITERATION OF CAROTID ANEURYSM | 1/1/2007 | $1,960.78 | 3 |
| 2 | 61615 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $1,544.80 | 3 |
| 2 | 61616 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $2,082.23 | 3 |
| 2 | 61618 | SECONDARY REPAIR OF DURA FOR CER | 1/1/2007 | $808.08 | 3 |
| 2 | 61619 | SECONDARY REPAIR OF DURA FOR CSF | 1/1/2007 | $957.56 | 3 |
| 2 | 61623 | ENDOVASCULAR TEMPORARY BALLOON A | 1/1/2007 | $391.59 | 3 |
| 2 | 61624 | TRANSCATHETER PERMANENT OCCLUSIO | 1/1/2007 | $752.03 | 3 |
| 2 | 61626 | TRANSCATHETER OCCLUSION OR EMBOL | 1/1/2007 | $606.45 | 3 |
| 2 | 61630 | BALLOON ANGIOPLASTY, INTRACRANIA | 1/1/2006 | NC | 9 |
| 2 | 61635 | TRANSCATHETER PLACEMENT OF INTRA | 1/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 61640 | BALLOON DILATATION OF INTRACRANI | 1/1/2006 | NC | 9 |
| 2 | 61641 | BALLOON DILATATION OF INTRACRANI | 1/1/2006 | NC | 9 |
| 2 | 61642 | BALLOON DILATATION OF INTRACRANI | 1/1/2006 | NC | 9 |
| 2 | 61680 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $1,455.02 | 3 |
| 2 | 61682 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $2,844.90 | 3 |
| 2 | 61684 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $1,870.74 | 3 |
| 2 | 61686 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $3,006.83 | 3 |
| 2 | 61690 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $1,374.31 | 3 |
| 2 | 61692 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $2,406.34 | 3 |
| 2 | 61697 | SURGERY OF COMPLEX INTRACRANIAL | 1/1/2007 | $2,370.27 | 3 |
| 2 | 61698 | SURGERY OF COMPLEX INTRACRANIAL | 1/1/2007 | $2,273.48 | 3 |
| 2 | 61700 | SURGERY OF SIMPLE INTRACRANIAL A | 1/1/2007 | $2,369.24 | 3 |
| 2 | 61702 | SURGERY OF INTRACRANIAL ANEURYSM | 1/1/2007 | $2,211.20 | 3 |
| 2 | 61703 | SURGERY OF INTRACRANIAL ANEURYSM | 1/1/2007 | $829.88 | 3 |
| 2 | 61705 | SURGERY OF ANEURYSM VASCULAR MAL | 1/1/2007 | $1,668.59 | 3 |
| 2 | 61708 | SURGERY OF ANEURYSM VASCULAR MAL | 1/1/2007 | $1,373.79 | 3 |
| 2 | 61710 | SURGERY OF ANEURYSM VASCULAR MAL | 1/1/2007 | $1,240.93 | 3 |
| 2 | 61711 | ANASTOMOSIS ARTERIAL EXTRACRANIA | 1/1/2007 | $1,700.50 | 3 |
| 2 | 61720 | STEREOTACTIC LESION ANY METHOD I | 1/1/2007 | $766.04 | 3 |
| 2 | 61735 | CREATION OF LESION BY STEREOTACT | 1/1/2007 | $916.55 | 3 |
| 2 | 61750 | STEREOTACTIC BIOPSY ASPIRATION O | 1/1/2007 | $869.84 | 3 |
| 2 | 61751 | STERIOTACTIC BIOPSY, ASPIRATION, | 1/1/2007 | $856.09 | 3 |
| 2 | 61760 | STEREOTACTIC IMPLANTATION OF DEP | 1/1/2007 | $944.06 | 3 |
| 2 | 61770 | STEREOTACTIC LOCALIZATION, INCL | 1/1/2007 | $966.38 | 3 |
| 2 | 61790 | STEREOTACTIC LESION OF GASSERIAN | 1/1/2007 | $508.10 | 3 |
| 2 | 61791 | CREATION OF LESION BY STEREOTACT | 1/1/2007 | $698.57 | 3 |
| 2 | 61793 | STEREOTACTIC RADIOSURGERY (PARTI | 1/1/2007 | $825.47 | 3 |
| 2 | 61795 | STEREOTACTIC COMPUTER ASSISTED V | 1/1/2007 | $178.02 | 3 |
| 2 | 61850 | TWIST DRILL OR BURR HOLE(S) FOR | 1/1/2007 | $603.86 | 3 |
| 2 | 61860 | CRANIECTOMY OR CRANIOTOMY FOR IM | 1/1/2007 | $982.73 | 3 |
| 2 | 61862 | TWIST DRILL, BURR HOLE, CRANIOTO | 4/1/2004 | INVALID | N |
| 2 | 61863 | TWIST DRILL, BURR HOLE, CRANIOTO | 1/1/2007 | $938.87 | 3 |
| 2 | 61864 | TWIST DRILL, BURR HOLE, CRANIOTO | 1/1/2007 | $316.33 | 3 |
| 2 | 61867 | TWIST DRILL, BURR HOLE, CRANIOTO | 1/1/2007 | $1,421.28 | 3 |
| 2 | 61868 | TWIST DRILL, BURR HOLE, CRANIOTO | 1/1/2007 | $449.97 | 3 |
| 2 | 61870 | CRANIECTOMY FOR IMPLANTATION OF | 1/1/2007 | $739.83 | 3 |
| 2 | 61875 | CRANIECTOMY FOR IMPLANTATION OF | 1/1/2007 | $689.49 | 3 |
| 2 | 61880 | REVISION OR REMOVAL OF INTRACRAN | 1/1/2007 | $324.89 | 3 |
| 2 | 61885 | INSERTION OR REPLACE OF CRANIAL | 1/1/2007 | $330.86 | 3 |
| 2 | 61886 | INSERTION OR REPLACE OF CRANIAL | 1/1/2007 | $423.50 | 3 |
| 2 | 61888 | REVISION OR REM OF CRANIAL NEURO | 1/1/2007 | $261.32 | 3 |
| 2 | 62000 | ELEVATION OF DEPRESSED SKULL FRA | 1/1/2007 | $495.65 | 3 |
| 2 | 62005 | ELEVATION OF DEPRESSED SKULL FRA | 1/1/2007 | $748.14 | 3 |
| 2 | 62010 | ELEVATION OF DEPRESSED SKULL FRA | 1/1/2007 | $950.81 | 3 |
| 2 | 62100 | CRANIOTOMY FOR REPAIR OF DURAL/C | 1/1/2007 | $1,028.92 | 3 |
| 2 | 62115 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $1,006.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 62116 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $1,116.89 | 3 |
| 2 | 62117 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $1,206.42 | 3 |
| 2 | 62120 | REPAIR OF ENCEPHALOCELE,SKULL VA | 1/1/2007 | $1,163.34 | 3 |
| 2 | 62121 | CRANIOTOMY WITH REPAIR OF ENCEPH | 1/1/2007 | $1,069.14 | 3 |
| 2 | 62140 | CRANIOPLASTY FOR SKULL DEFECT UP | 1/1/2007 | $656.28 | 3 |
| 2 | 62141 | CRANIOPLASTY FOR SKULL DEFECT; L | 1/1/2007 | $719.07 | 3 |
| 2 | 62142 | REMOVAL OF BONE FLAP OR PROSTHET | 1/1/2007 | $531.98 | 3 |
| 2 | 62143 | REPLACEMENT OF BONE FLAP OR PROS | 1/1/2007 | $634.48 | 3 |
| 2 | 62145 | CRANIOPLASTY FOR SKULL DEFECT WI | 1/1/2007 | $887.49 | 3 |
| 2 | 62146 | CRANIOPLASTY WITH AUTOGRAFT (INC | 1/1/2007 | $762.15 | 3 |
| 2 | 62147 | CRANIOPLASTY WITH AUTOGRAFT (INC | 1/1/2007 | $906.95 | 3 |
| 2 | 62148 | INCISION AND RETRIEVAL OF SUBCUT | 1/1/2007 | $86.67 | 3 |
| 2 | 62160 | NEUROENDOSCOPY, INTRACRANIAL, FO | 1/1/2003 | NC | 9 |
| 2 | 62161 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $967.16 | 3 |
| 2 | 62162 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $1,193.44 | 3 |
| 2 | 62163 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $763.71 | 3 |
| 2 | 62164 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $1,240.67 | 3 |
| 2 | 62165 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $996.22 | 3 |
| 2 | 62180 | VENTRICULOCISTERNOSTOMY (TORKILD | 1/1/2007 | $994.40 | 3 |
| 2 | 62190 | CREATION OF SHUNT; SUBARACHNOID/ | 1/1/2007 | $543.39 | 3 |
| 2 | 62192 | CREATION OF SHUNT; SUBARACHNOID/ | 1/1/2007 | $593.74 | 3 |
| 2 | 62194 | REPLACEMENT OR IRRIGATION, SUBAR | 1/1/2007 | $217.46 | 3 |
| 2 | 62200 | VENTRICULOCISTERNOSTOMY THIRD VE | 1/1/2007 | $877.11 | 3 |
| 2 | 62201 | VENTRICULOCISTERNOSTOMY, THIRD V | 1/1/2007 | $726.08 | 3 |
| 2 | 62220 | CREATION OF SHUNT VENTRICULO-ATR | 1/1/2007 | $631.10 | 3 |
| 2 | 62223 | CREATION OF SHUNT; VENTRICULO-PE | 1/1/2007 | $629.03 | 3 |
| 2 | 62225 | REPLACEMENT OR IRRIGATION VENTRI | 1/1/2007 | $282.60 | 3 |
| 2 | 62230 | REPLACEMENT OR REVISION OF CEREB | 1/1/2007 | $511.73 | 3 |
| 2 | 62252 | REPROGRAMMING OF PROGRAMMABLE CE | 1/1/2007 | $62.80 | 3 |
| 2 | 62256 | REMOVAL OF COMPLETE CEREBROSPINA | 1/1/2007 | $337.35 | 3 |
| 2 | 62258 | REMOVAL OF COMPLETE SHUNT SYSTEM | 1/1/2007 | $700.39 | 3 |
| 2 | 62263 | PERCUTANEOUS LYSIS OF EPIDURAL A | 1/1/2007 | $500.06 | 3 |
| 2 | 62264 | PERCUTANEOUS LYSIS OF EPIDURAL A | 1/1/2007 | $322.82 | 3 |
| 2 | 62268 | PERCUTANEOUS ASPIRATION, SPINAL | 1/1/2007 | $433.88 | 3 |
| 2 | 62269 | BIOPSY OF SPINAL CORD, PERCUTANE | 1/1/2007 | $521.60 | 3 |
| 2 | 62270 | SPINAL PUNCTURE LUMBAR DIAGNOSTI | 1/1/2007 | $109.25 | 3 |
| 2 | 62272 | SPINAL PUNCTURE, THEREPEUTIC, FO | 1/1/2007 | $133.64 | 3 |
| 2 | 62273 | INJECTION LUMBAR EPIDURAL OF BLO | 1/1/2007 | $129.75 | 3 |
| 2 | 62280 | INJECTION OF NEUROLYTIC SUBSTANC | 1/1/2007 | $256.39 | 3 |
| 2 | 62281 | INJECTION OF NEUROLYTIC SUBSTANC | 1/1/2007 | $221.09 | 3 |
| 2 | 62282 | INJECTION OF NEUROLYTIC SUBSTANC | 1/1/2007 | $282.34 | 3 |
| 2 | 62284 | INJECTION PROCEDURE FOR MYELOGRA | 1/1/2007 | $172.31 | 3 |
| 2 | 62287 | ASPIRATION PROCEDURE,PERCUTANEOU | 1/1/2007 | $369.01 | 3 |
| 2 | 62290 | INJECTION PROCEDURE FOR DISKOGRA | 1/1/2007 | $269.36 | 3 |
| 2 | 62291 | INJECTION PROCEDURE FOR DISKOGRA | 1/1/2007 | $236.66 | 3 |
| 2 | 62292 | INJECTION PROCEDURE FOR CHEMONUC | 1/1/2007 | $341.24 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 62294 | INJECTION PROCEDURE ARTERIAL FOR | 1/1/2007 | $483.97 | 3 |
| 2 | 62310 | INJECTION, SINGLE, NOT INCL NEUR | 1/1/2007 | $177.76 | 3 |
| 2 | 62311 | INJECTION, SINGLE, NOT INCL NEUR | 1/1/2007 | $170.23 | 3 |
| 2 | 62318 | INJECTION, INCL CATHETER PLACEME | 1/1/2007 | $205.01 | 3 |
| 2 | 62319 | INJECTION, INCL CATHETER PLACEME | 1/1/2007 | $180.87 | 3 |
| 2 | 62350 | IMPLANTATION, REVISION OR REPOSI | 1/1/2007 | $306.99 | 3 |
| 2 | 62351 | IMPLANTATION, REVISION OR REPOSI | 1/1/2007 | $502.65 | 3 |
| 2 | 62355 | REMOVAL OF PREVIOUSLY IMPLANTED | 1/1/2007 | $241.85 | 3 |
| 2 | 62360 | IMPLANTATION OR REPLACEMENT OF D | 1/1/2007 | $146.62 | 3 |
| 2 | 62361 | IMPLANTATION OR REPLACEMENT OF D | 1/1/2007 | $263.13 | 3 |
| 2 | 62362 | IMPLANTATION OR REPLACEMENT OF D | 1/1/2007 | $326.45 | 3 |
| 2 | 62365 | REMOVAL OF SUBCUTANEOUS RESERVOI | 1/1/2007 | $255.87 | 3 |
| 2 | 62367 | ELECTRONIC ANALYSIS OF PROGRAMMA | 1/1/2007 | $29.06 | 3 |
| 2 | 62368 | ELECTRONIC ANALYSIS OF PROGRAMMA | 1/1/2007 | $38.93 | 3 |
| 2 | 63001 | LAMINECTOMY W/EXPL AND/OR DECOMP | 1/1/2007 | $755.15 | 3 |
| 2 | 63003 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $766.56 | 3 |
| 2 | 63005 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $732.83 | 3 |
| 2 | 63011 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $678.85 | 3 |
| 2 | 63012 | LAMINECTOMY WITH REMOVEL OF ABNO | 1/1/2007 | $752.81 | 3 |
| 2 | 63015 | LAMINECTOMY W/EXPL AND/OR DECOMP | 1/1/2007 | $933.42 | 3 |
| 2 | 63016 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $922.78 | 3 |
| 2 | 63017 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $777.72 | 3 |
| 2 | 63020 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $731.79 | 3 |
| 2 | 63030 | LAMINOTOMY,FOR DECOMPRESSION OF | 1/1/2007 | $607.75 | 3 |
| 2 | 63035 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $143.50 | 3 |
| 2 | 63040 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $907.73 | 3 |
| 2 | 63042 | LAMINOTOMY, WITH DECOMPRESSION O | 1/1/2007 | $857.91 | 3 |
| 2 | 63043 | LAMINOTOMY, WITH DECOMPRESSION O | 1/1/2003 | $138.83 | 3 |
| 2 | 63044 | LAMINOTOMY, WITH DECOMPRESSION O | 4/1/2004 | $138.83 | 3 |
| 2 | 63045 | LAMINECTOMY,FACETECTOMY & FORAMI | 1/1/2007 | $800.30 | 3 |
| 2 | 63046 | LAMINECTOMY, INC UNI/BI COMP FAC | 1/1/2007 | $766.56 | 3 |
| 2 | 63047 | LAMINECTOMY, INC UNI OR BI COMP | 1/1/2007 | $719.85 | 3 |
| 2 | 63048 | LAMINECTOMY,INC UNI/BI COMP FACE | 1/1/2007 | $146.36 | 3 |
| 2 | 63050 | LAMINOPLASTY, CERVICAL, W/DECOMP | 1/1/2007 | $967.42 | 3 |
| 2 | 63051 | LAMINOPLASTY, CERVICAL, W/DECOMP | 1/1/2007 | $1,100.80 | 3 |
| 2 | 63055 | TRANSPEDICULAR APPROACH W/DECOMP | 1/1/2007 | $1,048.38 | 3 |
| 2 | 63056 | TRANSPEDICULAR APPROACH FOR DECO | 1/1/2007 | $977.80 | 3 |
| 2 | 63057 | TRANSPEDICULAR APPR FOR DECOMP O | 1/1/2007 | $236.40 | 3 |
| 2 | 63064 | COSTOVERTEBRAL APPROACH W/DECOMP | 1/1/2007 | $1,160.48 | 3 |
| 2 | 63066 | COSTOVERTEBRAL APPROACH FOR DECO | 1/1/2007 | $145.58 | 3 |
| 2 | 63075 | DISKECTOMY,ANTERIOR,W/DECOMPRESS | 1/1/2007 | $937.31 | 3 |
| 2 | 63076 | DISKECTOMY ANTERIOR FOR DECOMPRE | 1/1/2007 | $183.21 | 3 |
| 2 | 63077 | DISKECTOMY, ANTR, FOR DECOMP OF | 1/1/2007 | $991.81 | 3 |
| 2 | 63078 | DISKECTOMY,ANT,FOR DECOMP OF SPI | 1/1/2007 | $144.80 | 3 |
| 2 | 63081 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $1,131.16 | 3 |
| 2 | 63082 | VERTEBRAL CORPECTOMY,PART/COMP,A | 1/1/2007 | $197.48 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 63085 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $1,216.28 | 3 |
| 2 | 63086 | VERTEBRAL CORPECTOMY,PART/COMP,T | 1/1/2007 | $139.35 | 3 |
| 2 | 63087 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $1,588.92 | 3 |
| 2 | 63088 | VERTEBRAL CORPECTOMY,PART/COMP,C | 1/1/2007 | $189.95 | 3 |
| 2 | 63090 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $1,256.24 | 3 |
| 2 | 63091 | VERTEBRAL CORPECTOMY,PART/COMP,T | 1/1/2007 | $128.97 | 3 |
| 2 | 63101 | VERTEBRAL CORPECTOMY, PARTIAL OR | 1/1/2007 | $1,478.37 | 3 |
| 2 | 63102 | VERTEBRAL CORPECTOMY, PARTIAL OR | 1/1/2007 | $1,478.37 | 3 |
| 2 | 63103 | VERTEBRAL CORPECTOMY, PARTIAL OR | 1/1/2007 | $208.12 | 3 |
| 2 | 63170 | LAMINECTOMY W/MYELOTOMY(EG,BISCH | 1/1/2007 | $948.47 | 3 |
| 2 | 63172 | LAMINECTOMY W/DRAINAGE OF INTRAM | 1/1/2007 | $850.64 | 3 |
| 2 | 63173 | LAMINECTOMY FOR DRAINAGE OF INTR | 1/1/2007 | $1,050.46 | 3 |
| 2 | 63180 | LAMINECTOMY AND SECTION OF DENTA | 1/1/2007 | $861.54 | 3 |
| 2 | 63182 | LAMINECTOMY AND SECTION OF DENTA | 1/1/2007 | $953.66 | 3 |
| 2 | 63185 | LAMINECTOMY W/RHIZOTOMY; ONE OR | 1/1/2007 | $672.62 | 3 |
| 2 | 63190 | LAMINECTOMY FOR RHIZOTOMY; MORE | 1/1/2007 | $799.78 | 3 |
| 2 | 63191 | LAMINECTOMY W/SECTION OF SPINAL | 1/1/2007 | $891.38 | 3 |
| 2 | 63194 | LAMINECTOMY W/CORDOTOMY, W/SECTI | 1/1/2007 | $886.45 | 3 |
| 2 | 63195 | LAMINECTOMY FOR CORDOTOMY, WITH | 1/1/2007 | $901.76 | 3 |
| 2 | 63196 | LAMINECTOMY W/CORDOTOMY,W/SECTIO | 1/1/2007 | $1,075.63 | 3 |
| 2 | 63197 | LAMINECTOMY FOR CORDOTOMY, WITH | 1/1/2007 | $1,003.75 | 3 |
| 2 | 63198 | LAMINECTOMY W/CORDOTOMY W/SECTIO | 1/1/2007 | $1,043.71 | 3 |
| 2 | 63199 | LAMINECTOMY FOR CORDOTOMY WITH S | 1/1/2007 | $1,124.15 | 3 |
| 2 | 63200 | LAMINECTOMY, W/RELEASE OF TETHER | 1/1/2007 | $919.41 | 3 |
| 2 | 63250 | LAMINECTOMY FOR EXCISION OF OCCL | 1/1/2007 | $1,808.46 | 3 |
| 2 | 63251 | LAMINECTOMY FOR EXCISION OR OCCL | 1/1/2007 | $1,925.49 | 3 |
| 2 | 63252 | LAMINECTOMY FOR EXCISION OF OCCL | 1/1/2007 | $1,921.86 | 3 |
| 2 | 63265 | LAMINECTOMY FOR EXCISION OR EVAC | 1/1/2007 | $1,031.77 | 3 |
| 2 | 63266 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $1,064.47 | 3 |
| 2 | 63267 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $866.47 | 3 |
| 2 | 63268 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $845.19 | 3 |
| 2 | 63270 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $1,273.63 | 3 |
| 2 | 63271 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $1,281.67 | 3 |
| 2 | 63272 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $1,198.37 | 3 |
| 2 | 63273 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $1,151.14 | 3 |
| 2 | 63275 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,122.08 | 3 |
| 2 | 63276 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,114.55 | 3 |
| 2 | 63277 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $995.44 | 3 |
| 2 | 63278 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $973.13 | 3 |
| 2 | 63280 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,347.58 | 3 |
| 2 | 63281 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,333.57 | 3 |
| 2 | 63282 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,257.80 | 3 |
| 2 | 63283 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,191.36 | 3 |
| 2 | 63285 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,689.86 | 3 |
| 2 | 63286 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,680.00 | 3 |
| 2 | 63287 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,725.68 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 63290 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $1,738.13 | 3 |
| 2 | 63295 | OSTEOPLASTIC RECONSTRUCTION OF D | 4/1/2005 | NC | 9 |
| 2 | 63300 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $1,159.71 | 3 |
| 2 | 63301 | VERT CORPECT, PART/COMP, FOR EXC | 1/1/2007 | $1,259.61 | 3 |
| 2 | 63302 | VERT CORP, PART/COMP, FOR EXCIS | 1/1/2007 | $1,276.48 | 3 |
| 2 | 63303 | VERT CORP,PART/COMP,FOR EXCIS OF | 1/1/2007 | $1,351.48 | 3 |
| 2 | 63304 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $1,401.30 | 3 |
| 2 | 63305 | VERT CORPECT, PART/COMP, FOR EXC | 1/1/2007 | $1,447.49 | 3 |
| 2 | 63306 | VERT CORP, PART/COMP, FOR EXCISI | 1/1/2007 | $1,513.92 | 3 |
| 2 | 63307 | VERT CORP,PART/COMP,FOR EXCIS OF | 1/1/2007 | $1,372.50 | 3 |
| 2 | 63308 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $237.18 | 3 |
| 2 | 63600 | STEREOTACTIC LESION OF SPINAL CO | 1/1/2007 | $543.13 | 3 |
| 2 | 63610 | STEREOTACTIC STIMULATION OF SPIN | 1/1/2007 | $1,801.71 | 3 |
| 2 | 63615 | STEREOTACTIC BIOPSY, ASPIRATION, | 1/1/2007 | $736.72 | 3 |
| 2 | 63650 | PERCUTANEOUS IMPLANTATION OF NEU | 1/1/2007 | $270.92 | 3 |
| 2 | 63655 | LAMINECTOMY FOR IMPLANTATION OF | 1/1/2007 | $508.88 | 3 |
| 2 | 63660 | REVISION OR REMOVAL OF SPINAL NE | 1/1/2007 | $273.77 | 3 |
| 2 | 63685 | INSERTION OR REPLACE OF SPINAL N | 1/1/2007 | $317.37 | 3 |
| 2 | 63688 | REVISION OR REMOVAL OF IMPLANTED | 1/1/2007 | $255.09 | 3 |
| 2 | 63700 | REPAIR OF MENINGOCELE LESS THAN | 1/1/2007 | $787.84 | 3 |
| 2 | 63702 | REPAIR OF MENINGOCELE; LARGER TH | 1/1/2007 | $872.70 | 3 |
| 2 | 63704 | REPAIR OF MYELOMENINGOCELE LESS | 1/1/2007 | $1,003.49 | 3 |
| 2 | 63706 | REPAIR OF MYELOMENINGOCELE; LARG | 1/1/2007 | $1,139.46 | 3 |
| 2 | 63707 | REPAIR OF DURAL/CEREBROSPINAL FL | 1/1/2007 | $557.15 | 3 |
| 2 | 63709 | REPAIR OF DURAL/CEREBROSPINAL FL | 1/1/2007 | $695.72 | 3 |
| 2 | 63710 | DURAL GRAFT SPINAL | 1/1/2007 | $687.93 | 3 |
| 2 | 63740 | CREATION OF SHUNT,LUMBAR,SUBARAC | 1/1/2007 | $561.30 | 3 |
| 2 | 63741 | CREATION OF SHUNT, LUMBAR, SUBAR | 1/1/2007 | $380.43 | 3 |
| 2 | 63744 | REPLACEMENT IRRIGATION OR REVISI | 1/1/2007 | $395.74 | 3 |
| 2 | 63746 | REMOVAL OF ENTIRE LUMBOSUBARACHN | 1/1/2007 | $304.39 | 3 |
| 2 | 64400 | INJECTION ANESTHETIC AGENT TRIGE | 1/1/2007 | $79.93 | 3 |
| 2 | 64402 | INJECTION ANESTHETIC AGENT; FACI | 1/1/2007 | $76.55 | 3 |
| 2 | 64405 | INJECTION ANESTHETIC AGENT; GREA | 1/1/2007 | $74.22 | 3 |
| 2 | 64408 | INJECTION ANESTHETIC AGENT; VAGU | 1/1/2007 | $80.19 | 3 |
| 2 | 64410 | INJECTION ANESTHETIC AGENT; PHRE | 1/1/2007 | $104.58 | 3 |
| 2 | 64412 | INJECTION ANESTHETIC AGENT; SPIN | 1/1/2007 | $101.72 | 3 |
| 2 | 64413 | INJECTION ANESTHETIC AGENT; CERV | 1/1/2007 | $86.41 | 3 |
| 2 | 64415 | INJECTION, ANESTHETIC AGENT; BRA | 1/1/2007 | $113.66 | 3 |
| 2 | 64416 | INJECTION, ANESTHETIC AGENT; BRA | 1/1/2007 | $119.11 | 3 |
| 2 | 64417 | INJECTION ANESTHETIC AGENT; AXIL | 1/1/2007 | $119.11 | 3 |
| 2 | 64418 | INJECTION ANESTHETIC AGENT; SUPR | 1/1/2007 | $104.32 | 3 |
| 2 | 64420 | INJECTION ANESTHETIC AGENT; INTE | 1/1/2007 | $133.64 | 3 |
| 2 | 64421 | INJECTION ANESTHETIC AGENT; INTE | 1/1/2007 | $204.75 | 3 |
| 2 | 64425 | INJECTION ANESTHETIC AGENT; ILIO | 1/1/2007 | $91.60 | 3 |
| 2 | 64430 | INJECTION ANESTHETIC AGENT; PUDE | 1/1/2007 | $105.88 | 3 |
| 2 | 64435 | INJECTION ANESTHETIC AGENT; PARA | 1/1/2007 | $107.43 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 64445 | INJECTION, ANESTHETIC AGENT; SCI | 1/1/2007 | $110.55 | 3 |
| 2 | 64446 | INJECTION, ANESTHETIC AGENT; SCI | 1/1/2007 | $115.48 | 3 |
| 2 | 64447 | INJECTION, ANESTHETIC AGENT; FEM | 1/1/2007 | $52.42 | 3 |
| 2 | 64448 | INJECTION, ANESTHETIC AGENT; FEM | 1/1/2007 | $103.54 | 3 |
| 2 | 64449 | INJECTION, ANESTHETIC AGENT; LUM | 1/1/2007 | $106.65 | 3 |
| 2 | 64450 | INJECTION ANESTHETIC AGENT; OTHE | 1/1/2007 | $68.51 | 3 |
| 2 | 64470 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2007 | $239.00 | 3 |
| 2 | 64472 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2007 | $96.27 | 3 |
| 2 | 64475 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2007 | $218.24 | 3 |
| 2 | 64476 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2007 | $82.52 | 3 |
| 2 | 64479 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2007 | $255.09 | 3 |
| 2 | 64480 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2007 | $116.52 | 3 |
| 2 | 64483 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2007 | $257.42 | 3 |
| 2 | 64484 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2007 | $121.97 | 3 |
| 2 | 64505 | INJECTION ANESTHETIC AGENT SPHEN | 1/1/2007 | $70.07 | 3 |
| 2 | 64508 | INJECTION ANESTHETIC AGENT; CARO | 1/1/2007 | $117.29 | 3 |
| 2 | 64510 | INJECTION ANESTHETIC AGENT; STEL | 1/1/2007 | $123.26 | 3 |
| 2 | 64517 | INJECTION, ANESTHETIC AGENT; SUP | 1/1/2007 | $130.79 | 3 |
| 2 | 64520 | INJECTION ANESTHETIC AGENT; LUMB | 1/1/2007 | $170.75 | 3 |
| 2 | 64530 | INJECTION ANESTHETIC AGENT; CELI | 1/1/2007 | $159.33 | 3 |
| 2 | 64550 | APPLICATION OF SURFACE (TRANSCUT | 1/1/2007 | $12.20 | 3 |
| 2 | 64553 | PERCUTANEOUS IMPLANTATION OF NEU | 1/1/2007 | $138.31 | 3 |
| 2 | 64555 | PERCUTANEOUS IMPLANTATION OF NEU | 1/1/2007 | $144.54 | 3 |
| 2 | 64560 | PERCUTANEOUS IMPLANTATION OF NEU | 1/1/2007 | $135.46 | 3 |
| 2 | 64561 | PERCUTANEOUS IMPLANTATION OF NEU | 1/1/2007 | $260.02 | 3 |
| 2 | 64565 | PERCUTANEOUS IMPLANTATION OF NEU | 1/1/2007 | $134.42 | 3 |
| 2 | 64573 | INCISION FOR IMPLANTATION OF NEU | 1/1/2007 | $372.38 | 3 |
| 2 | 64575 | INCISION FOR IMPLANTATION OF NEU | 1/1/2007 | $198.00 | 3 |
| 2 | 64577 | INCISION FOR IMPLANTATION OF NEU | 1/1/2007 | $231.99 | 3 |
| 2 | 64580 | INCISION FOR IMPLANTATION OF NEU | 1/1/2007 | $208.38 | 3 |
| 2 | 64581 | INCISION FOR IMPLANTATION OF NEU | 1/1/2007 | $516.92 | 3 |
| 2 | 64585 | REVISON OR REMOVAL OF PERIPHERAL | 1/1/2007 | $352.14 | 3 |
| 2 | 64590 | INCISION & SUBCUTANEOUS PLACE OF | 1/1/2007 | $253.01 | 3 |
| 2 | 64595 | REVISION OR REMOVAL OF PERIPHERA | 1/1/2007 | $320.22 | 3 |
| 2 | 64600 | DESTRUCTION BY NEUROLYTIC AGENT | 1/1/2007 | $341.50 | 3 |
| 2 | 64605 | DESTRUCTION BY NEUROLYTIC AGENT | 1/1/2007 | $414.42 | 3 |
| 2 | 64610 | DESTRUCTION BY NEUROLYTIC AGENT | 1/1/2007 | $457.24 | 3 |
| 2 | 64612 | CHEMODENERVATION OF MUSCLE(S); M | 1/1/2007 | $118.33 | 3 |
| 2 | 64613 | CHEMODENERVATION OF MUSCLE(S); N | 1/1/2007 | $130.01 | 3 |
| 2 | 64614 | CHEMODENERVATION OF MUSCLE(S); E | 1/1/2007 | $143.50 | 3 |
| 2 | 64620 | DESTRUCTION BY NEUROLYTIC AGENT | 1/1/2007 | $210.45 | 3 |
| 2 | 64622 | DESTRUCTION BY NEUROLYTIC AGENT | 1/1/2007 | $284.41 | 3 |
| 2 | 64623 | DESTRUCTION BY NEUROLYTIC AGENT | 1/1/2007 | $104.32 | 3 |
| 2 | 64626 | DESTRUCTION BY NEUROLYTIC AGENT; | 1/1/2007 | $292.72 | 3 |
| 2 | 64627 | DESTRUCTION BY NEUROLYTIC AGENT; | 1/1/2007 | $149.73 | 3 |
| 2 | 64630 | DESTRUCTION BY NEUROLYTIC AGENT; | 1/1/2007 | $154.66 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 64640 | DESTRUCTION BY NEUROLYTIC AGENT; | 1/1/2007 | $187.88 | 3 |
| 2 | 64650 | CHEMODENERVATION OF ECCRINE GLAN | 1/1/2006 | NC | 9 |
| 2 | 64653 | CHEMODENERVATION OF ECCRINE GLAN | 1/1/2006 | NC | 9 |
| 2 | 64680 | DESTRUCTION BY NEUROLYTIC AGENT | 1/1/2007 | $247.30 | 3 |
| 2 | 64681 | DESTRUCTION BY NEUROLYTIC AGENT, | 1/1/2007 | $340.98 | 3 |
| 2 | 64702 | NEUROPLASTY; DIGITAL, ONE OR BOT | 1/1/2007 | $225.77 | 3 |
| 2 | 64704 | NEUROLYSIS; NERVE OF HAND OR FOO | 1/1/2007 | $220.32 | 3 |
| 2 | 64708 | NEUROPLASTY, MAJOR PERIPHERAL NE | 1/1/2007 | $309.84 | 3 |
| 2 | 64712 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $354.48 | 3 |
| 2 | 64713 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $485.01 | 3 |
| 2 | 64714 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $407.67 | 3 |
| 2 | 64716 | NEUROPLASTY AND/OR TRANSPOSITION | 1/1/2007 | $335.27 | 3 |
| 2 | 64718 | NEUROLYSIS AND/OR TRANSPOSITION; | 1/1/2007 | $338.39 | 3 |
| 2 | 64719 | NEUROLYSIS AND/OR TRANSPOSITION; | 1/1/2007 | $263.13 | 3 |
| 2 | 64721 | NEUROLYSIS AND/OR TRANSPOSITION; | 1/1/2007 | $269.62 | 3 |
| 2 | 64722 | DECOMPRESSION UNSPECIFIED NERVES | 1/1/2007 | $213.31 | 3 |
| 2 | 64726 | DECOMPRESSION; PLANTAR DIGITAL N | 1/1/2007 | $194.88 | 3 |
| 2 | 64727 | INTERNAL NEUROLYSIS, REQUIRING U | 1/1/2007 | $131.83 | 3 |
| 2 | 64732 | TRANSECTION OR AVULSION OF SUPRA | 1/1/2007 | $230.70 | 3 |
| 2 | 64734 | TRANSECTION OR AVULSION OF; INFR | 1/1/2007 | $255.87 | 3 |
| 2 | 64736 | TRANSECTION OR AVULSION OF; MENT | 1/1/2007 | $237.18 | 3 |
| 2 | 64738 | TRANSECTION OR AVULSION OF; INFE | 1/1/2007 | $296.35 | 3 |
| 2 | 64740 | TRANSECTION OR AVULSION OF; LING | 1/1/2007 | $295.83 | 3 |
| 2 | 64742 | TRANSECTION OR AVULSION OF; FACI | 1/1/2007 | $302.32 | 3 |
| 2 | 64744 | TRANSECTION OR AVULSION OF; GREA | 1/1/2007 | $263.91 | 3 |
| 2 | 64746 | TRANSECTION OR AVULSION OF; PHRE | 1/1/2007 | $291.94 | 3 |
| 2 | 64752 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $318.41 | 3 |
| 2 | 64755 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $544.43 | 3 |
| 2 | 64760 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $291.16 | 3 |
| 2 | 64761 | TRANSECTION OR AVULSION OF; PUDE | 1/1/2007 | $271.44 | 3 |
| 2 | 64763 | TRANSECTION OR AVULSION OF OBTUR | 1/1/2007 | $339.17 | 3 |
| 2 | 64766 | TRANSECTION OR AVULSION OF OBTUR | 1/1/2007 | $388.73 | 3 |
| 2 | 64771 | TRANSECTION OR AVULSION OF OTHER | 1/1/2007 | $366.93 | 3 |
| 2 | 64772 | TRANSECTION OR AVULSION OF OTHER | 1/1/2007 | $351.10 | 3 |
| 2 | 64774 | EXCISION OF NEUROMA CUTANEOUS NE | 1/1/2007 | $252.75 | 3 |
| 2 | 64776 | EXCISION OF NEUROMA; DIGITAL NER | 1/1/2007 | $248.08 | 3 |
| 2 | 64778 | EXCISION OF NEUROMA DIGITAL NERV | 1/1/2007 | $131.57 | 3 |
| 2 | 64782 | EXCISION OF NEUROMA; HAND OR FOO | 1/1/2007 | $281.82 | 3 |
| 2 | 64783 | EXCISION OF NEUROMA HAND OR FOOT | 1/1/2007 | $157.26 | 3 |
| 2 | 64784 | EXCISION OF NEUROMA; MAJOR PERIP | 1/1/2007 | $461.91 | 3 |
| 2 | 64786 | EXCISION OF NEUROMA; SCIATIC NER | 1/1/2007 | $724.01 | 3 |
| 2 | 64787 | IMPLANTATION OF NERVE END INTO B | 1/1/2007 | $181.65 | 3 |
| 2 | 64788 | EXCISION OF NEUROFIBROMA OR NEUR | 1/1/2007 | $228.36 | 3 |
| 2 | 64790 | EXCISION OF NEUROFIBROMA OR NEUR | 1/1/2007 | $534.83 | 3 |
| 2 | 64792 | EXCISION OF NEUROFIBROMA OR NEUR | 1/1/2007 | $680.67 | 3 |
| 2 | 64795 | BIOPSY OF NERVE | 1/1/2007 | $132.09 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 64802 | SYMPATHECTOMY, CERVICAL | 1/1/2007 | $404.04 | 3 |
| 2 | 64804 | SYMPATHECTOMY, CERVICOTHORACIC | 1/1/2007 | $621.24 | 3 |
| 2 | 64809 | SYMPATHECTOMY, THORACOLUMBAR | 1/1/2007 | $543.13 | 3 |
| 2 | 64818 | SYMPATHECTOMY, LUMBAR | 1/1/2007 | $438.81 | 3 |
| 2 | 64820 | SYMPATHECTOMY; DIGITAL ARTERIES, | 1/1/2007 | $492.53 | 3 |
| 2 | 64821 | SYMPATHECTOMY; RADIAL ARTERY | 1/1/2007 | $449.97 | 3 |
| 2 | 64822 | SYMPATHECTOMY; ULNAR ARTERY | 1/1/2007 | $448.68 | 3 |
| 2 | 64823 | SYMPATHECTOMY; SUPERFICIAL PALMA | 1/1/2007 | $520.82 | 3 |
| 2 | 64831 | SUTURE OF DIGITAL NERVE HAND OR | 1/1/2007 | $465.28 | 3 |
| 2 | 64832 | SUTURE OF DIGITAL NERVE HAND OR | 1/1/2007 | $244.97 | 3 |
| 2 | 64834 | SUTURE OF ONE NERVE HAND OR FOOT | 1/1/2007 | $488.38 | 3 |
| 2 | 64835 | SUTURE OF ONE NERVE HAND OR FOOT | 1/1/2007 | $528.34 | 3 |
| 2 | 64836 | SUTURE OF ONE NERVE HAND OR FOOT | 1/1/2007 | $526.01 | 3 |
| 2 | 64837 | SUTURE OF EACH ADDITIONAL NERVE | 1/1/2007 | $271.44 | 3 |
| 2 | 64840 | SUTURE OF POSTERIOR TIBIAL NERVE | 1/1/2007 | $587.51 | 3 |
| 2 | 64856 | SUTURE OF MAJOR PERIPHERAL NERVE | 1/1/2007 | $651.60 | 3 |
| 2 | 64857 | SUTURE OF MAJOR PERIPHERAL NERVE | 1/1/2007 | $683.52 | 3 |
| 2 | 64858 | SUTURE OF SCIATIC NERVE | 1/1/2007 | $794.07 | 3 |
| 2 | 64859 | SUTURE OF EACH ADDITIONAL MAJOR | 1/1/2007 | $184.76 | 3 |
| 2 | 64861 | SUTURE OF BRACHIAL PLEXUS | 1/1/2007 | $910.59 | 3 |
| 2 | 64862 | SUTURE OF LUMBAR PLEXUS | 1/1/2007 | $925.90 | 3 |
| 2 | 64864 | SUTURE OF FACIAL NERVE EXTRACRAN | 1/1/2007 | $585.95 | 3 |
| 2 | 64865 | SUTURE OF FACIAL NERVE; INTRATEM | 1/1/2007 | $785.77 | 3 |
| 2 | 64866 | ANASTOMOSIS FACIAL-SPINAL ACCESS | 1/1/2007 | $803.41 | 3 |
| 2 | 64868 | ANASTOMOSIS; FACIAL-HYPOGLOSSAL | 1/1/2007 | $698.31 | 3 |
| 2 | 64870 | ANASTOMOSIS; FACIAL-PHRENIC | 1/1/2007 | $675.22 | 3 |
| 2 | 64872 | SUTURE OF NERVE REQUIRING SECOND | 1/1/2007 | $87.19 | 3 |
| 2 | 64874 | SUTURE OF NERVE; REQUIRING EXTEN | 1/1/2007 | $127.93 | 3 |
| 2 | 64876 | SUTURE OF NERVE REQUIRING SHORTE | 1/1/2007 | $145.06 | 3 |
| 2 | 64885 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $798.22 | 3 |
| 2 | 64886 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $944.06 | 3 |
| 2 | 64890 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $712.07 | 3 |
| 2 | 64891 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $657.83 | 3 |
| 2 | 64892 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $674.44 | 3 |
| 2 | 64893 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $728.68 | 3 |
| 2 | 64895 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $816.65 | 3 |
| 2 | 64896 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $898.65 | 3 |
| 2 | 64897 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $816.65 | 3 |
| 2 | 64898 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $883.86 | 3 |
| 2 | 64901 | NERVE GRAFT EACH ADDITIONAL NERV | 1/1/2007 | $437.26 | 3 |
| 2 | 64902 | NERVE GRAFT EACH ADDITIONAL NERV | 1/1/2007 | $501.87 | 3 |
| 2 | 64905 | NERVE PEDICLE TRANSFER FIRST STA | 1/1/2007 | $636.03 | 3 |
| 2 | 64907 | NERVE PEDICLE TRANSFER; SECOND S | 1/1/2007 | $895.79 | 3 |
| 2 | 64910 | NERVE REPAIR; WITH SYNTHETIC CON | 1/1/2007 | $471.25 | 3 |
| 2 | 64911 | NERVE REPAIR; WITH AUTOGENOUS VE | 1/1/2007 | $573.24 | 3 |
| 2 | 64999 | UNLISTED PROCEDURE NERVOUS SYSTE | 4/1/1982 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 65091 | EVISCERATION OF OCULAR CONTENTS; | 1/1/2007 | $392.88 | 3 |
| 2 | 65093 | EVISCERATION OF OCULAR CONTENTS; | 1/1/2007 | $413.64 | 3 |
| 2 | 65101 | ENUCLEATION OF EYE, WITHOUT IMPL | 1/1/2007 | $439.07 | 3 |
| 2 | 65103 | ENUCLEATION OF EYE; WITH IMPLANT | 1/1/2007 | $459.06 | 3 |
| 2 | 65105 | ENUCLEATION OF EYE; WITH IMPLANT | 1/1/2007 | $503.17 | 3 |
| 2 | 65110 | EXENTERATION OF ORBIT (DOES NOT | 1/1/2007 | $738.28 | 3 |
| 2 | 65112 | EXENTERATION OF ORBIT (DOES NOT | 1/1/2007 | $878.15 | 3 |
| 2 | 65114 | EXENTERATION OF ORBIT, REMOVAL O | 1/1/2007 | $905.91 | 3 |
| 2 | 65125 | MODIFICATION OF OCULAR IMPLANT W | 1/1/2007 | $315.03 | 3 |
| 2 | 65130 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $432.85 | 3 |
| 2 | 65135 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $441.67 | 3 |
| 2 | 65140 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $475.14 | 3 |
| 2 | 65150 | REINSERTION OF OCULAR IMPLANT; W | 1/1/2007 | $377.57 | 3 |
| 2 | 65155 | REINSERTION OF OCULAR IMPLANT WI | 1/1/2007 | $510.18 | 3 |
| 2 | 65175 | REMOVAL OF OCULAR IMPLANT (FOR O | 1/1/2007 | $391.33 | 3 |
| 2 | 65205 | REMOVAL OF FOREIGN BODY, EXTERNA | 1/1/2007 | $35.81 | 3 |
| 2 | 65210 | REMOVAL OF FOREIGN BODY EXTERNAL | 1/1/2007 | $43.86 | 3 |
| 2 | 65220 | REMOVAL OF FOREIGN BODY EXTERNAL | 1/1/2007 | $36.33 | 3 |
| 2 | 65222 | REMOVAL OF FOREIGN BODY EXTERNAL | 1/1/2007 | $48.27 | 3 |
| 2 | 65235 | REMOVAL OF FOREIGN BODY, INTRAOC | 1/1/2007 | $381.21 | 3 |
| 2 | 65260 | REMOVAL OF FOREIGN BODY INTRAOCU | 1/1/2007 | $549.88 | 3 |
| 2 | 65265 | REMOVAL OF FOREIGN BODY INTRAOCU | 1/1/2007 | $618.65 | 3 |
| 2 | 65270 | REPAIR OF LACERATION; CONJUNCTIV | 1/1/2007 | $187.62 | 3 |
| 2 | 65272 | REPAIR OF LACERATION; CONJUNCTIV | 1/1/2007 | $304.39 | 3 |
| 2 | 65273 | REPAIR OF LACERATION; CONJUNCTIV | 1/1/2007 | $211.75 | 3 |
| 2 | 65275 | REPAIR OF LACERATION; CORNEA NON | 1/1/2007 | $309.32 | 3 |
| 2 | 65280 | REPAIR OF LACERATION; CORNEA AND | 1/1/2007 | $370.57 | 3 |
| 2 | 65285 | REPAIR OF LACERATION; CORNEA AND | 1/1/2007 | $590.62 | 3 |
| 2 | 65286 | REPAIR OF LACERATION; APPLICATIO | 1/1/2007 | $439.59 | 3 |
| 2 | 65290 | REPAIR OF WOUND, EXTRAOCULAR MUS | 1/1/2007 | $271.44 | 3 |
| 2 | 65400 | EXCISION OF LESION, CORNEA (KERA | 1/1/2007 | $381.47 | 3 |
| 2 | 65410 | BIOPSY OF CORNEA | 1/1/2007 | $94.98 | 3 |
| 2 | 65420 | EXCISION OR TRANSPOSITION OF PTE | 1/1/2007 | $343.84 | 3 |
| 2 | 65426 | EXCISION OR TRANSPOSITION OF PTE | 1/1/2007 | $407.16 | 3 |
| 2 | 65430 | SCRAPING OF CORNEA, DIAGNOSTIC, | 1/1/2007 | $73.44 | 3 |
| 2 | 65435 | REMOVAL OF CORNEAL EPITHELIUM; W | 1/1/2007 | $50.86 | 3 |
| 2 | 65436 | REMOVAL OF CORNEAL EPITHELIUM; W | 1/1/2007 | $220.32 | 3 |
| 2 | 65450 | DESTRUCTION OF LESION OF CORNEA | 1/1/2007 | $194.88 | 3 |
| 2 | 65600 | MULTIPLE PUNCTURES OF ANTERIOR C | 1/1/2007 | $222.65 | 3 |
| 2 | 65710 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $627.21 | 3 |
| 2 | 65730 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $700.13 | 3 |
| 2 | 65750 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $719.33 | 3 |
| 2 | 65755 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $714.14 | 3 |
| 2 | 65760 | KERATOMILEUSIS | 2/1/1994 | $0.01 | 5 |
| 2 | 65765 | KERATOPHAKIA | 2/1/1994 | $0.01 | 5 |
| 2 | 65767 | EPIKERATOPLASTY | 2/1/1994 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 65770 | KERATOPROSTHESIS | 1/1/2007 | $821.06 | 3 |
| 2 | 65771 | RADIAL KERATOTOMY | 1/1/1991 | NC | 9 |
| 2 | 65772 | CORNEAL RELAXING INCISION FOR CO | 1/1/2007 | $260.54 | 3 |
| 2 | 65775 | CORNEAL WEDGE RESECTION FOR CORR | 1/1/2007 | $312.18 | 3 |
| 2 | 65780 | OCULAR SURFACE RECONSTRUCTION; A | 1/1/2007 | $544.69 | 3 |
| 2 | 65781 | OCULAR SURFACE RECONSTRUCTION; I | 1/1/2007 | $824.95 | 3 |
| 2 | 65782 | OCULAR SURFACE RECONSTRUCTION; L | 1/1/2007 | $712.07 | 3 |
| 2 | 65800 | PARACENTESIS OF ANTERIOR CHAMBER | 1/1/2007 | $98.61 | 3 |
| 2 | 65805 | PARACENTESIS OF ANTRIOR CHAMBER | 1/1/2007 | $108.47 | 3 |
| 2 | 65810 | PARACENTESIS OF ANTERIOR CHAMBER | 1/1/2007 | $254.57 | 3 |
| 2 | 65815 | PARACENTESIS OF ANTERIOR CHAMBER | 1/1/2007 | $397.55 | 3 |
| 2 | 65820 | GONIOTOMY | 1/1/2007 | $456.72 | 3 |
| 2 | 65850 | TRABECULOTOMY AB EXTERNO | 1/1/2007 | $505.51 | 3 |
| 2 | 65855 | TRABECULOPLASTY BY LASER SURGERY | 1/1/2007 | $216.68 | 3 |
| 2 | 65860 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $201.63 | 3 |
| 2 | 65865 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $298.68 | 3 |
| 2 | 65870 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $337.35 | 3 |
| 2 | 65875 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $354.48 | 3 |
| 2 | 65880 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $375.76 | 3 |
| 2 | 65900 | REMOVAL OF EPITHELIAL DOWNGROWTH | 1/1/2007 | $563.89 | 3 |
| 2 | 65920 | REMOVAL OF IMPLANTED MATERIAL, A | 1/1/2007 | $440.89 | 3 |
| 2 | 65930 | REMOVAL OF BLOOD CLOT, ANTERIOR | 1/1/2007 | $380.17 | 3 |
| 2 | 66020 | INJECTION, ANTERIOR CHAMBER OF E | 1/1/2007 | $124.56 | 3 |
| 2 | 66030 | INJECTION ANTERIOR CHAMBER (SEPA | 1/1/2007 | $111.07 | 3 |
| 2 | 66130 | EXCISION OF LESION, SCLERA | 1/1/2007 | $459.57 | 3 |
| 2 | 66150 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $471.77 | 3 |
| 2 | 66155 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $468.92 | 3 |
| 2 | 66160 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $541.58 | 3 |
| 2 | 66165 | FISTULIZATIN OF SCLERA FOR GLAUC | 1/1/2007 | $458.54 | 3 |
| 2 | 66170 | FISTULIZATION OF SCLEAR FOR GLAU | 1/1/2007 | $648.75 | 3 |
| 2 | 66172 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $804.45 | 3 |
| 2 | 66180 | AQUEOUS SHUNT TO EXTRAOCULAR RES | 1/1/2007 | $675.48 | 3 |
| 2 | 66185 | REVISION OF AQUEOUS SHUNT TO EXT | 1/1/2007 | $413.38 | 3 |
| 2 | 66220 | REPAIR OF SCLERAL STAPHYLOMA; WI | 1/1/2007 | $396.52 | 3 |
| 2 | 66225 | REPAIR OF SCLERAL STAPHYLOMA; WI | 1/1/2007 | $527.82 | 3 |
| 2 | 66250 | REVISION OR REPAIR OF OPERATIVE | 1/1/2007 | $466.84 | 3 |
| 2 | 66500 | IRIDOTOMY BY STAB INCISION (SEPA | 1/1/2007 | $221.35 | 3 |
| 2 | 66505 | IRIDOTOMY BY STAB INCISION (SEPA | 1/1/2007 | $240.56 | 3 |
| 2 | 66600 | IRIDECTOMY WITH CORNEOSCLERAL OR | 1/1/2007 | $449.97 | 3 |
| 2 | 66605 | IRIDECTOMY WITH CORNEOSCLERAL OR | 1/1/2007 | $612.16 | 3 |
| 2 | 66625 | IRIDECTOMY WITH CORNEOSCLERAL OF | 1/1/2007 | $262.61 | 3 |
| 2 | 66630 | IRIDECTOMY WITH CORNEOSCLERAL OR | 1/1/2007 | $316.33 | 3 |
| 2 | 66635 | IRIDECTOMY WITH CORNEOSCLERAL OR | 1/1/2007 | $319.44 | 3 |
| 2 | 66680 | REPAIR OF IRIS CILIARY BODY (AS | 1/1/2007 | $285.19 | 3 |
| 2 | 66682 | SUTURE OF IRIS CILIARY BODY (SEP | 1/1/2007 | $340.98 | 3 |
| 2 | 66700 | CILIARY BODY DESTRUCTION; DIATHE | 1/1/2007 | $266.51 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 66710 | CILIARY BODY DESTRUCTION; CYCLOP | 1/1/2007 | $264.17 | 3 |
| 2 | 66711 | CILIARY BODY DESTRUCTION; CYCLOP | 1/1/2007 | $347.47 | 3 |
| 2 | 66720 | CILIARY BODY DESTRUCTION; CRYOTH | 1/1/2007 | $281.30 | 3 |
| 2 | 66740 | CILIARY BODY DESTRUCTION; CYCLOD | 1/1/2007 | $262.10 | 3 |
| 2 | 66761 | IRIDOTOMY/IRIDECTOMY BY LASER SU | 1/1/2007 | $256.13 | 3 |
| 2 | 66762 | IRIDOPLASTY BY PHOTOCOAGULATION | 1/1/2007 | $271.70 | 3 |
| 2 | 66770 | DESTRUCTION OF CYST OR LESION IR | 1/1/2007 | $299.20 | 3 |
| 2 | 66820 | DISCISSION OF SECONDARY MEMBRANE | 1/1/2007 | $256.91 | 3 |
| 2 | 66821 | DISCISSION OF SECONDARY MEMBRANE | 1/1/2007 | $170.23 | 3 |
| 2 | 66825 | REPOSITIONING OF INTRAOCULAR LEN | 1/1/2007 | $459.57 | 3 |
| 2 | 66830 | REMOVAL OF SECONDARY MEMBRANOUS | 1/1/2007 | $402.74 | 3 |
| 2 | 66840 | REMOVAL OF LENS MATERIAL ASPIRAT | 1/1/2007 | $393.66 | 3 |
| 2 | 66850 | REMOVAL OF LENS MATERIAL PHACOFR | 1/1/2007 | $446.60 | 3 |
| 2 | 66852 | REMOVAL OF LENS MATERIAL; PARS P | 1/1/2007 | $481.89 | 3 |
| 2 | 66920 | REMOVAL OF LENS MATERIAL; INTRAC | 1/1/2007 | $431.03 | 3 |
| 2 | 66930 | EXTRACTION OF LENS WITH OR WITHO | 1/1/2007 | $488.12 | 3 |
| 2 | 66940 | REMOVAL OF LENS MATERIAL; EXTRAC | 1/1/2007 | $440.37 | 3 |
| 2 | 66982 | EXTRACAPSULAR CATARACT REMOVAL W | 1/1/2007 | $622.80 | 3 |
| 2 | 66983 | INTRACAPSULAR CATARACT EXTRACTIO | 1/1/2007 | $395.74 | 3 |
| 2 | 66984 | EXTRACAPSULAR CATARACT REM W/INS | 1/1/2007 | $468.14 | 3 |
| 2 | 66985 | INSERT OF INTRAOCULAR LENS PROST | 1/1/2007 | $420.65 | 3 |
| 2 | 66986 | EXCHANGE OF INTRAOCULAR LENS | 1/1/2007 | $572.46 | 3 |
| 2 | 66990 | USE OF OPHTHALMIC ENDOSCOPE (LIS | 1/1/2007 | $58.91 | 3 |
| 2 | 66999 | UNLISTED PROCEDURE ANTERIOR SEGM | 4/1/1982 | $0.01 | 5 |
| 2 | 67005 | REMOVAL OF VITREOUS ANTERIOR APP | 1/1/2007 | $281.30 | 3 |
| 2 | 67010 | REMOVAL OF VITREOUS, ANTERIOR AP | 1/1/2007 | $327.75 | 3 |
| 2 | 67015 | ASPIRATION OR RELEASE OF VITREOU | 1/1/2007 | $356.03 | 3 |
| 2 | 67025 | INJECTION OF VITREOUS SUBSTITUTE | 1/1/2007 | $426.10 | 3 |
| 2 | 67027 | IMPLANTATION OR REPLACEMENT OF I | 1/1/2007 | $503.17 | 3 |
| 2 | 67028 | INTRAVITREAL INJECTION OF A PHAR | 1/1/2007 | $138.83 | 3 |
| 2 | 67030 | DISCISSION OF VITREOUS STRANDS ( | 1/1/2007 | $283.89 | 3 |
| 2 | 67031 | SEVERING OF VITREOUS STRANDS, VI | 1/1/2007 | $219.28 | 3 |
| 2 | 67036 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $560.52 | 3 |
| 2 | 67038 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $980.39 | 3 |
| 2 | 67039 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $711.81 | 3 |
| 2 | 67040 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $824.43 | 3 |
| 2 | 67101 | REP OF RETINAL DETCHM, ONE OR MO | 1/1/2007 | $442.19 | 3 |
| 2 | 67105 | REP OF RETINAL DETACHMENT, ONE O | 1/1/2007 | $411.83 | 3 |
| 2 | 67107 | REPAIR OF RETINAL DETACHMENT; SC | 1/1/2007 | $697.54 | 3 |
| 2 | 67108 | REPAIR OF RETINAL DETACHMENT; W/ | 1/1/2007 | $941.21 | 3 |
| 2 | 67110 | REPAIR OF RETINAL DETACHMENT ONE | 1/1/2007 | $506.03 | 3 |
| 2 | 67112 | REPAIR OF RETINAL DETACHMENT; BY | 1/1/2007 | $765.53 | 3 |
| 2 | 67115 | RELEASE OF ENCIRCLING MATERIAL ( | 1/1/2007 | $267.80 | 3 |
| 2 | 67120 | REMOVAL OF IMPLANTED MATERIAL, P | 1/1/2007 | $385.62 | 3 |
| 2 | 67121 | REMOVAL OF IMPLANTED MATERIAL PO | 1/1/2007 | $511.99 | 3 |
| 2 | 67141 | PROPHYLAXIS OF RETINAL DETACHMEN | 1/1/2007 | $293.75 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 67145 | PROPHYLAXIS OF RETINAL DETACHMEN | 1/1/2007 | $295.05 | 3 |
| 2 | 67208 | DESTRUCTION OF LOCALIZED LESION | 1/1/2007 | $341.50 | 3 |
| 2 | 67210 | DESTRUCTION OF LOCALIZED LESION | 1/1/2007 | $411.05 | 3 |
| 2 | 67218 | DESTRUCTION OF LOCALIZED LESION | 1/1/2007 | $820.28 | 3 |
| 2 | 67220 | DESTRUCTION OF LOCALIZED LESION | 1/1/2007 | $628.25 | 3 |
| 2 | 67221 | DESTRUCTION OF LOCALIZED LESION | 1/1/2007 | $221.61 | 3 |
| 2 | 67225 | DESTRUCTION OF LOCALIZED LESION | 1/1/2007 | $19.20 | 3 |
| 2 | 67227 | DESTRUCTION OF EXTENSIVE OR PROG | 1/1/2007 | $350.33 | 3 |
| 2 | 67228 | DESTRUCTION OF EXTENSIVE OR PROG | 1/1/2007 | $645.12 | 3 |
| 2 | 67250 | SCLERAL REINFORCEMENT (SEPARATE | 1/1/2007 | $475.40 | 3 |
| 2 | 67255 | SCLERAL REINFORCEMENT (SEPARATE | 1/1/2007 | $499.54 | 3 |
| 2 | 67299 | UNLISTED PROCEDURE POSTERIOR SEG | 2/1/1994 | $0.01 | 5 |
| 2 | 67311 | STRABISMUS SURG,RECESSION OR RES | 1/1/2007 | $338.65 | 3 |
| 2 | 67312 | STRABISMUS SURG,RECESSION OR RES | 1/1/2007 | $408.19 | 3 |
| 2 | 67314 | STRABISMUS SURGERY, RECESSION OR | 1/1/2007 | $375.50 | 3 |
| 2 | 67316 | STRABISMUS SURGERY, RECESSION OR | 1/1/2007 | $458.28 | 3 |
| 2 | 67318 | STRABISMUS SURGERY, ANY PROC (PA | 1/1/2007 | $394.44 | 3 |
| 2 | 67320 | TRANSPOSITION PROC(EG,FOR PARETI | 1/1/2007 | $168.68 | 3 |
| 2 | 67331 | STRABISMUS SURG ON PATIENT W/PRE | 1/1/2007 | $158.30 | 3 |
| 2 | 67332 | STRABISMUS SURG ON PATIENT W/SCA | 1/1/2007 | $174.90 | 3 |
| 2 | 67334 | STRABISMUS SURGERY BY POSTERIOR | 1/1/2007 | $154.92 | 3 |
| 2 | 67335 | PLACE OF ADJUSTABLE SUTURE(S) DU | 1/1/2007 | $97.05 | 3 |
| 2 | 67340 | STRABISMUS SURGERY INVOLVING EXP | 1/1/2007 | $191.51 | 3 |
| 2 | 67343 | RELEASE OF EXTENSIVE SCAR TISSUE | 1/1/2007 | $369.53 | 3 |
| 2 | 67345 | CHEMODENERVATION OF EXTRAOCLAR M | 1/1/2007 | $148.43 | 3 |
| 2 | 67346 | BIOPSY OF EXTRAOCULAR MUSCLE | 1/1/2007 | $122.74 | 3 |
| 2 | 67350 | BIOPSY OF EXTRAOCULAR MUSCLE | 1/1/2007 | INVALID | N |
| 2 | 67399 | UNLISTED PROCEDURE OCULAR MUSCLE | 2/1/1994 | $0.01 | 5 |
| 2 | 67400 | ORBITOTOMY W/OUT BONE FLAP (FRON | 1/1/2007 | $560.52 | 3 |
| 2 | 67405 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $471.25 | 3 |
| 2 | 67412 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $543.13 | 3 |
| 2 | 67413 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $552.48 | 3 |
| 2 | 67414 | ORBITOTOMY W/OUT BONE FLAP; W/RE | 1/1/2007 | $618.39 | 3 |
| 2 | 67415 | FINE NEEDLE ASPIRATION OF ORBITA | 1/1/2007 | $67.73 | 3 |
| 2 | 67420 | ORBITOTOMY WITH BONE FLAP OR WIN | 1/1/2007 | $1,002.19 | 3 |
| 2 | 67430 | ORBITOTOMY WITH BONE FLAP LATERA | 1/1/2007 | $756.70 | 3 |
| 2 | 67440 | ORBITOTOMY WITH BONE FLAP OR WIN | 1/1/2007 | $728.42 | 3 |
| 2 | 67445 | ORBITOTOMY W/BONE FLAP OR WINDOW | 1/1/2007 | $151.81 | 3 |
| 2 | 67450 | ORBITOTOMY WITH BONE FLAP LATERA | 1/1/2007 | $749.96 | 3 |
| 2 | 67500 | RETROBULBAR INJECTION MEDICATION | 1/1/2007 | $39.18 | 3 |
| 2 | 67505 | RETROBULBAR INJECTION; ALCOHOL | 1/1/2007 | $40.48 | 3 |
| 2 | 67515 | INJECTION OF MEDICATION OR OTHER | 1/1/2007 | $31.92 | 3 |
| 2 | 67550 | ORBITAL IMPLANT (IMPLANT OUTSIDE | 1/1/2007 | $576.61 | 3 |
| 2 | 67560 | ORBITAL IMPLANT (IMPLANT OUTSIDE | 1/1/2007 | $585.95 | 3 |
| 2 | 67570 | OPTIC NERVE DECOMPRESSION (EG, I | 1/1/2007 | $722.97 | 3 |
| 2 | 67599 | UNLISTED PROCEDURE ORBIT | 4/1/1982 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 67700 | BLEPHAROTOMY, DRAINAGE OF ABSCES | 1/1/2007 | $193.59 | 3 |
| 2 | 67710 | SEVERING OF TARSORRHAPHY | 1/1/2007 | $167.64 | 3 |
| 2 | 67715 | CANTHOTOMY (SEPARATE PROCEDURE) | 1/1/2007 | $173.09 | 3 |
| 2 | 67800 | EXCISION OF CHALAZION; SINGLE | 1/1/2007 | $79.67 | 3 |
| 2 | 67801 | EXCISION OF CHALAZION; MULTIPLE | 1/1/2007 | $102.24 | 3 |
| 2 | 67805 | EXCISION OF CHALAZION; MULTIPLE | 1/1/2007 | $126.12 | 3 |
| 2 | 67808 | EXCISION OF CHALAZION; UNDER GEN | 1/1/2007 | $201.37 | 3 |
| 2 | 67810 | BIOPSY OF EYELID | 1/1/2007 | $126.64 | 3 |
| 2 | 67820 | CORRECTION OF TRICHIASIS; EPILAT | 1/1/2007 | $39.70 | 3 |
| 2 | 67825 | CORRECTION OF TRICHIASIS; EPILAT | 1/1/2007 | $82.78 | 3 |
| 2 | 67830 | CORRECTION OF TRICHIASIS; INCISI | 1/1/2007 | $190.21 | 3 |
| 2 | 67835 | CORRECTION OF TRICHIASIS; INCISI | 1/1/2007 | $271.44 | 3 |
| 2 | 67840 | EXCISION OF LESION OF EYELID (EX | 1/1/2007 | $198.00 | 3 |
| 2 | 67850 | DESTRUCTION OF LESION OF LID MAR | 1/1/2007 | $133.38 | 3 |
| 2 | 67875 | TEMPORARY CLOSURE OF EYELIDS BY | 1/1/2007 | $122.74 | 3 |
| 2 | 67880 | CONSTRUCTION OF INTERMARGINAL AD | 1/1/2007 | $275.33 | 3 |
| 2 | 67882 | CONSTRUCTION OF INTERMARGINAL AD | 1/1/2007 | $336.31 | 3 |
| 2 | 67900 | REPAIR OF BROW PTOSIS (SUPRACILI | 1/1/2007 | $404.82 | 3 |
| 2 | 67901 | REPAIR OF BLEPHAROPTOSIS; FRONTA | 1/1/2007 | $346.43 | 3 |
| 2 | 67902 | REPAIR OF BLEPHAROPTOSIS; FRONTA | 1/1/2007 | $400.41 | 3 |
| 2 | 67903 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 1/1/2007 | $426.10 | 3 |
| 2 | 67904 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 1/1/2007 | $423.50 | 3 |
| 2 | 67906 | REPAIR OF BLEPHAROPTOSIS; SUPERI | 1/1/2007 | $327.75 | 3 |
| 2 | 67908 | REPAIR OF BLEPHAROPTOSIS; CONJUN | 1/1/2007 | $312.70 | 3 |
| 2 | 67909 | REDUCTION OF OVERCORRECTION OF P | 1/1/2007 | $356.81 | 3 |
| 2 | 67911 | CORRECTION OF LID RETRACTION | 1/1/2007 | $268.84 | 3 |
| 2 | 67912 | CORRECTION OF LAGOPHTHALMOS, WIT | 1/1/2007 | $646.93 | 3 |
| 2 | 67914 | REPAIR OF ECTROPION; SUTURE | 1/1/2007 | $265.21 | 3 |
| 2 | 67915 | REPAIR OF ECTROPION; THERMOCAUTE | 1/1/2007 | $242.37 | 3 |
| 2 | 67916 | REPAIR OF ECTROPION; BLEPHAROPLA | 1/1/2007 | $354.22 | 3 |
| 2 | 67917 | REPAIR OF ECTROPION; BLEPHAROPLA | 1/1/2007 | $385.36 | 3 |
| 2 | 67921 | REPAIR OF ENTROPION; SUTURE | 1/1/2007 | $253.53 | 3 |
| 2 | 67922 | REPAIR OF ENTROPION; THERMOCAUTE | 1/1/2007 | $237.18 | 3 |
| 2 | 67923 | REPAIR OF ENTROPION; BLEPHAROPLA | 1/1/2007 | $371.34 | 3 |
| 2 | 67924 | REPAIR OF ENTROPION; BLEPHAROPLA | 1/1/2007 | $390.03 | 3 |
| 2 | 67930 | SUTURE OF RECENT WOUND, EYELID, | 1/1/2007 | $247.04 | 3 |
| 2 | 67935 | SUTURE OF RECENT WOUND EYELID IN | 1/1/2007 | $392.88 | 3 |
| 2 | 67938 | REMOVAL OF EMBEDDED FOREIGN BODY | 1/1/2007 | $176.20 | 3 |
| 2 | 67950 | CANTHOPLASTY (RECONSTUCTION OF C | 1/1/2007 | $384.84 | 3 |
| 2 | 67961 | EXCISION & REP OF EYELID INVOLVI | 1/1/2007 | $381.98 | 3 |
| 2 | 67966 | EXCISION AND REPAIR OF EYELID IN | 1/1/2007 | $417.54 | 3 |
| 2 | 67971 | RECONSTRUCTION OF EYELID, FULL T | 1/1/2007 | $456.98 | 3 |
| 2 | 67973 | RECONSTRUCTION OF EYELID FULL TH | 1/1/2007 | $595.29 | 3 |
| 2 | 67974 | RECONSTRUCTION OF EYELID FULL TH | 1/1/2007 | $592.44 | 3 |
| 2 | 67975 | RECONSTRUCTION OF EYELID FULL TH | 1/1/2007 | $430.51 | 3 |
| 2 | 67999 | UNLISTED PROCEDURE EYELIDS | 2/1/1994 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 68020 | INCISION OF CONJUNCTIVA, DRAINAG | 1/1/2007 | $73.70 | 3 |
| 2 | 68040 | EXPRESSION OF CONJUNCTIVAL FOLLI | 1/1/2007 | $41.52 | 3 |
| 2 | 68100 | BIOPSY OF CONJUNCTIVA | 1/1/2007 | $121.45 | 3 |
| 2 | 68110 | EXCISION OF LESION, CONJUNCTIVA; | 1/1/2007 | $154.92 | 3 |
| 2 | 68115 | EXCISION OF LESION CONJUNCTIVA; | 1/1/2007 | $219.54 | 3 |
| 2 | 68130 | EXCISION OF LESION CONJUNCTIVA; | 1/1/2007 | $360.71 | 3 |
| 2 | 68135 | DESTRUCTION OF LESION, CONJUNCTI | 1/1/2007 | $97.31 | 3 |
| 2 | 68200 | SUBCONJUNCTIVAL INJECTION | 1/1/2007 | $27.25 | 3 |
| 2 | 68320 | CONJUNCTIVOPLASTY WITH CONJUNCTI | 1/1/2007 | $439.59 | 3 |
| 2 | 68325 | CONJUNCTIVOPLASTY; WITH BUCCAL M | 1/1/2007 | $372.38 | 3 |
| 2 | 68326 | CONJUNCTIVOPLASTY RECONSTRUCTION | 1/1/2007 | $361.22 | 3 |
| 2 | 68328 | CONJUNCTIVOPLASTY RECONSTRUCTION | 1/1/2007 | $415.72 | 3 |
| 2 | 68330 | REPAIR OF SYMBLEPHARON; CONJUNCT | 1/1/2007 | $376.28 | 3 |
| 2 | 68335 | REPAIR OF SYMBLEPHARON WITH FREE | 1/1/2007 | $361.74 | 3 |
| 2 | 68340 | REPAIR OF SYMBLEPHARON DIVISION | 1/1/2007 | $344.36 | 3 |
| 2 | 68360 | CONJUNCTIVAL FLAP BRIDGE OR PART | 1/1/2007 | $328.01 | 3 |
| 2 | 68362 | CONJUNCTIVAL FLAP; TOTAL (SUCH A | 1/1/2007 | $366.15 | 3 |
| 2 | 68371 | HARVESTING CONJUNCTIVAL ALLOGRAF | 1/1/2007 | $261.32 | 3 |
| 2 | 68399 | UNLISTED PROCEDURE CONJUNCTIVA | 2/1/1994 | $0.01 | 5 |
| 2 | 68400 | INCISION, DRAINAGE OF LACRIMAL G | 1/1/2007 | $199.56 | 3 |
| 2 | 68420 | INCISION, DRAINAGE OF LACRIMAL S | 1/1/2007 | $223.69 | 3 |
| 2 | 68440 | SNIP INCISION OF LACRIMAL PUNCTU | 1/1/2007 | $79.93 | 3 |
| 2 | 68500 | EXCISION OF LACRIMAL GLAND (DACR | 1/1/2007 | $552.99 | 3 |
| 2 | 68505 | EXCISION OF LACRIMAL GLAND (DACR | 1/1/2007 | $574.79 | 3 |
| 2 | 68510 | BIOPSY OF LACRIMAL GLAND | 1/1/2007 | $316.07 | 3 |
| 2 | 68520 | EXCISION OF LACRIMAL SAC (DACRYO | 1/1/2007 | $397.29 | 3 |
| 2 | 68525 | BIOPSY OF LACRIMAL SAC | 1/1/2007 | $173.09 | 3 |
| 2 | 68530 | REMOVAL OF FOREIGN BODY OR DACRY | 1/1/2007 | $311.92 | 3 |
| 2 | 68540 | EXCISION OF LACRIMAL GLAND TUMOR | 1/1/2007 | $532.49 | 3 |
| 2 | 68550 | EXCISION OF LACRIMAL GLAND TUMOR | 1/1/2007 | $659.65 | 3 |
| 2 | 68700 | PLASTIC REPAIR OF CANALICULI | 1/1/2007 | $335.01 | 3 |
| 2 | 68705 | CORRECTION OF EVERTED PUNCTUM, C | 1/1/2007 | $164.52 | 3 |
| 2 | 68720 | DACRYOCYSTORHINOSTOMY (FISTULATI | 1/1/2007 | $448.16 | 3 |
| 2 | 68745 | CONJUNCTIVORHINOSTOMY (FISTULIZA | 1/1/2007 | $441.67 | 3 |
| 2 | 68750 | CONJUNCTIVORHINOSTOMY (FISTULIZA | 1/1/2007 | $450.75 | 3 |
| 2 | 68760 | CLOSURE OF THE LACRIMAL PUNCTUM; | 1/1/2007 | $139.35 | 3 |
| 2 | 68761 | CLOSURE OF THE LACRIMAL PUNCTUM; | 1/1/2007 | $96.02 | 3 |
| 2 | 68770 | CLOSURE OF LACRIMAL FISTULA (SEP | 1/1/2007 | $273.77 | 3 |
| 2 | 68801 | DIALTION OF LACRIMAL PUNCTUM, WI | 1/1/2007 | $76.29 | 3 |
| 2 | 68810 | PROBING OF NASOLACRIMAL DUCT, WI | 1/1/2007 | $147.14 | 3 |
| 2 | 68811 | PROBING OF NASOLACRIMAL DUCT, WI | 1/1/2007 | $127.16 | 3 |
| 2 | 68815 | PROBING OF NASOLACRIMAL DUCT, WI | 1/1/2007 | $301.80 | 3 |
| 2 | 68840 | PROBING OF LACRIMAL CANALICULI, | 1/1/2007 | $75.51 | 3 |
| 2 | 68850 | INJECTION OF CONTRAST MEDIUM FOR | 1/1/2007 | $44.63 | 3 |
| 2 | 68899 | UNLISTED PROCEDURE LACRIMAL SYST | 2/1/1994 | $0.01 | 5 |
| 2 | 69000 | DRAINAGE EXTERNAL EAR ABSCESS OR | 1/1/2007 | $115.74 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 69005 | DRAINAGE EXTERNAL EAR ABSCESS OR | 1/1/2007 | $135.46 | 3 |
| 2 | 69020 | DRAINAGE EXTERNAL AUDITORY CANAL | 1/1/2007 | $145.32 | 3 |
| 2 | 69090 | EAR PIERCING | 4/1/1982 | NC | 9 |
| 2 | 69100 | BIOPSY EXTERNAL EAR | 1/1/2007 | $66.17 | 3 |
| 2 | 69105 | BIOPSY EXTERNAL AUDITORY CANAL | 1/1/2007 | $84.86 | 3 |
| 2 | 69110 | EXCISION EXTERNAL EAR PARTIAL SI | 1/1/2007 | $272.22 | 3 |
| 2 | 69120 | EXCISION EXTERNAL EAR; COMPLETE | 1/1/2007 | $275.59 | 3 |
| 2 | 69140 | EXCISION EXOSTOSIS(ES) EXTERNAL | 1/1/2007 | $569.08 | 3 |
| 2 | 69145 | EXCISION SOFT TISSUE LESION EXTE | 1/1/2007 | $223.95 | 3 |
| 2 | 69150 | RADICAL EXCISION EXTERNAL AUDITO | 1/1/2007 | $728.42 | 3 |
| 2 | 69155 | RADICAL EXCISION EXTERNAL AUDITO | 1/1/2007 | $1,097.43 | 3 |
| 2 | 69200 | REMOVAL FOREIGN BODY FROM EXTERN | 1/1/2007 | $83.56 | 3 |
| 2 | 69205 | REMOVAL FOREIGN BODY FROM EXTERN | 1/1/2007 | $69.03 | 3 |
| 2 | 69210 | REMOVAL IMPACTED CERUMEN(SEPARAT | 1/1/2007 | $33.48 | 3 |
| 2 | 69220 | DEBRIDEMENT, MASTOIDECTOMY CAVIT | 1/1/2007 | $84.86 | 3 |
| 2 | 69222 | DEBRIDEMENT, MASTOIDECTOMY CAVIT | 1/1/2007 | $139.61 | 3 |
| 2 | 69300 | OTOPLASTY, PROTRUDING EAR, WITH | 1/1/2007 | $293.24 | 3 |
| 2 | 69310 | RECONSTRUCTION OF EXTERNAL AUDIT | 1/1/2007 | $725.30 | 3 |
| 2 | 69320 | RECONSTRUCTION EXTERNAL AUDITORY | 1/1/2007 | $1,043.19 | 3 |
| 2 | 69399 | UNLISTED PROCEDURE EXTERNAL EAR | 2/1/1994 | $0.01 | 5 |
| 2 | 69400 | EUSTACHIAN TUBE INFLATION TRANSN | 1/1/2007 | $79.67 | 3 |
| 2 | 69401 | EUSTACHIAN TUBE INFLATION TRANSN | 1/1/2007 | $49.82 | 3 |
| 2 | 69405 | EUSTACHIAN TUBE CATHERIZATION TR | 1/1/2007 | $164.78 | 3 |
| 2 | 69410 | FOCAL APPLICATION OF PHASE CONTR | 1/1/2006 | INVALID | N |
| 2 | 69420 | MYRINGOTOMY INCLUDING ASPIRATION | 1/1/2007 | $119.37 | 3 |
| 2 | 69421 | MYRINGOTOMY INCLUDING ASPIRATION | 1/1/2007 | $105.10 | 3 |
| 2 | 69424 | VENTILATING TUBE REMOVAL REQUIRI | 1/1/2007 | $80.70 | 3 |
| 2 | 69433 | TYMPANOSTOMY (REQUIRING INSERTIO | 1/1/2007 | $123.26 | 3 |
| 2 | 69436 | TYMPANOSTOMY (REQUIRING INSERTIO | 1/1/2007 | $115.48 | 3 |
| 2 | 69440 | MIDDLE EAR EXPLORATION THROUGH P | 1/1/2007 | $440.37 | 3 |
| 2 | 69450 | TYMPANOLYSIS TRANSCANAL | 1/1/2007 | $338.91 | 3 |
| 2 | 69501 | TRANSMASTOID ANTROTOMY (SIMPLE M | 1/1/2007 | $488.38 | 3 |
| 2 | 69502 | MASTOIDECTOMY COMPLETE | 1/1/2007 | $648.23 | 3 |
| 2 | 69505 | MASTOIDECTOMY; MODIFIED RADICAL | 1/1/2007 | $811.20 | 3 |
| 2 | 69511 | MASTOIDECTOMY; RADICAL | 1/1/2007 | $833.25 | 3 |
| 2 | 69530 | PETROUS APICECTOMY INCLUDING RAD | 1/1/2007 | $1,100.02 | 3 |
| 2 | 69535 | RESECTION TEMPORAL BONE EXTERNAL | 1/1/2007 | $1,844.01 | 3 |
| 2 | 69540 | EXCISION AURAL POLYP | 1/1/2007 | $131.05 | 3 |
| 2 | 69550 | EXCISION AURAL GLOMUS TUMOR TRAN | 1/1/2007 | $694.42 | 3 |
| 2 | 69552 | EXCISION AURAL GLOMUS TUMOR; TRA | 1/1/2007 | $1,083.41 | 3 |
| 2 | 69554 | EXCISION AURAL GLOMUS TUMOR; EXT | 1/1/2007 | $1,724.12 | 3 |
| 2 | 69601 | REVISION MASTOIDECTOMY RESULTING | 1/1/2007 | $700.65 | 3 |
| 2 | 69602 | REVISION MASTOIDECTOMY; RESULTIN | 1/1/2007 | $724.78 | 3 |
| 2 | 69603 | REVISION MASTOIDECTOMY; RESULTIN | 1/1/2007 | $870.62 | 3 |
| 2 | 69604 | REVISION MASTOIDECTOMY; RESULTIN | 1/1/2007 | $749.18 | 3 |
| 2 | 69605 | REVISION MASTOIDECTOMY; WITH API | 1/1/2007 | $1,063.17 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 69610 | TYMPANIC MEMBRANE REPAIR, W/WO S | 1/1/2007 | $268.58 | 3 |
| 2 | 69620 | MYRINGOPLASTY (SURGERY CONFINED | 1/1/2007 | $454.38 | 3 |
| 2 | 69631 | TYMPANOPLASTY WITHOUT MASTOIDECT | 1/1/2007 | $567.79 | 3 |
| 2 | 69632 | TYMPANOPLASTY WITHOUT MASTOIDECT | 1/1/2007 | $707.66 | 3 |
| 2 | 69633 | TYMPANOPLASTY WITHOUT MASTOIDECT | 1/1/2007 | $678.59 | 3 |
| 2 | 69635 | TYMPANOPLASTY WITH ANTROTOMY OR | 1/1/2007 | $809.12 | 3 |
| 2 | 69636 | TYMPANOPLASTY WITH ANTROTOMY OR | 1/1/2007 | $928.75 | 3 |
| 2 | 69637 | TYMPANOPLASTY WITH ANTROTOMY OR | 1/1/2007 | $923.56 | 3 |
| 2 | 69641 | TYMPANOPLASTY WITH MASTOIDECTOMY | 1/1/2007 | $688.71 | 3 |
| 2 | 69642 | TYMPANOPLASTY WITH MASTOIDECTOMY | 1/1/2007 | $895.28 | 3 |
| 2 | 69643 | TYMPANOPLASTY WITH MASTOIDECTOMY | 1/1/2007 | $814.83 | 3 |
| 2 | 69644 | TYMPANOPLASTY WITH MASTOIDECTOMY | 1/1/2007 | $1,006.08 | 3 |
| 2 | 69645 | TYMPANOPLASTY WITH MASTOIDECTOMY | 1/1/2007 | $980.13 | 3 |
| 2 | 69646 | TYMPANOPLASTY WITH MASTOIDECTOMY | 1/1/2007 | $1,044.23 | 3 |
| 2 | 69650 | STAPES MOBILIZATION | 1/1/2007 | $528.60 | 3 |
| 2 | 69660 | STAPEDECTOMY OR STAPEDOTOMY W/RE | 1/1/2007 | $624.10 | 3 |
| 2 | 69661 | STAPEDECTOMY OR STAPEDOTOMY W/RE | 1/1/2007 | $823.39 | 3 |
| 2 | 69662 | REVISION OF STAPEDECTOMY OR STAP | 1/1/2007 | $790.44 | 3 |
| 2 | 69666 | REPAIR OVAL WINDOW FISTULA | 1/1/2007 | $532.75 | 3 |
| 2 | 69667 | REPAIR ROUND WINDOW FISTULA | 1/1/2007 | $533.27 | 3 |
| 2 | 69670 | MASTOID OBLITERATION (SEPARATE P | 1/1/2007 | $626.95 | 3 |
| 2 | 69676 | TYMPANIC NEURECTOMY | 1/1/2007 | $547.55 | 3 |
| 2 | 69700 | CLOSURE POSTAURICULAR FISTULA MA | 1/1/2007 | $471.25 | 3 |
| 2 | 69710 | IMPLANTATION OR REPLACEMENT OF E | 10/1/2000 | $1,069.43 | 3 |
| 2 | 69711 | REMOVAL OR REPAIR OF ELECTROMAGN | 1/1/2007 | $572.72 | 3 |
| 2 | 69714 | IMPLANTATION, OSSEOINTEGRATED IM | 1/1/2007 | $721.67 | 3 |
| 2 | 69715 | IMPLANTATION, OSSEOINTEGRATED IM | 1/1/2007 | $902.28 | 3 |
| 2 | 69717 | REPLACEMENT, OSSEOINTEGRATED IMP | 1/1/2007 | $788.10 | 3 |
| 2 | 69718 | REPLACEMENT, OSSEOINTEGRATED IMP | 1/1/2007 | $960.67 | 3 |
| 2 | 69720 | DECOMPRESSION FACIAL NERVE INTRA | 1/1/2007 | $780.58 | 3 |
| 2 | 69725 | DECOMPRESSION FACIAL NERVE INTRA | 1/1/2007 | $1,244.82 | 3 |
| 2 | 69740 | SUTURE FACIAL NERVE INTRATEMPORA | 1/1/2007 | $795.63 | 3 |
| 2 | 69745 | SUTURE FACIAL NERVE INTRATEMPORA | 1/1/2007 | $851.42 | 3 |
| 2 | 69799 | UNLISTED PROCEDURE MIDDLE EAR | 2/1/1994 | $0.01 | 5 |
| 2 | 69801 | LABYRINTHOTOMY, W/OR W/OUT CRYOS | 1/1/2007 | $486.04 | 3 |
| 2 | 69802 | LABYRINTHOTOMY WITH OR WITHOUT C | 1/1/2007 | $687.68 | 3 |
| 2 | 69805 | ENDOLYMPHATIC SAC OPERATION WITH | 1/1/2007 | $696.24 | 3 |
| 2 | 69806 | ENDOLYMPHATIC SAC OPERATION; WIT | 1/1/2007 | $633.18 | 3 |
| 2 | 69820 | FENESTRATION SEMICIRCULAR CANAL | 1/1/2007 | $583.10 | 3 |
| 2 | 69840 | REVISION FENESTRATION OPERATION | 1/1/2007 | $629.03 | 3 |
| 2 | 69905 | LABYRINTHECTOMY TRANSCANAL | 1/1/2007 | $606.19 | 3 |
| 2 | 69910 | LABYRINTHECTOMY; WITH MASTOIDECT | 1/1/2007 | $691.05 | 3 |
| 2 | 69915 | VESTIBULAR NERVE SECTION TRANSLA | 1/1/2007 | $1,022.43 | 3 |
| 2 | 69930 | COCHLEAR DEVICE IMPLANTATION WIT | 1/1/2007 | $854.53 | 3 |
| 2 | 69949 | UNLISTED PROCEDURE INNER EAR | 4/1/1982 | $0.01 | 5 |
| 2 | 69950 | VESTIBULAR NERVE SECTION TRANSCR | 1/1/2007 | $1,215.24 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | 69955 | TOTAL FACIAL NERVE DECOMPRESSION | 1/1/2007 | $1,321.37 | 3 |
| 2 | 69960 | DECOMPRESSION INTERNAL AUDITORY | 1/1/2007 | $1,278.82 | 3 |
| 2 | 69970 | REMOVAL OF TUMOR | 1/1/2007 | $1,446.45 | 3 |
| 2 | 69979 | UNLISTED PROCEDURE TEMPORAL BONE | 4/1/1982 | $0.01 | 5 |
| 2 | 69990 | MICROSURGICAL TECHNIQUES, REQUIR | 1/1/2007 | $159.59 | 3 |
| 2 | D7110 | SINGLE TOOTH | 4/1/2003 | INVALID | N |
| 2 | D7120 | EACH ADDITIONAL TOOTH | 4/1/2003 | INVALID | N |
| 2 | D7130 | ROOT REMOVAL - EXPOSED ROOTS | 4/1/2003 | INVALID | N |
| 2 | G0001 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2005 | INVALID | N |
| 2 | G0002 | OFFICE PROCEDURE, INSERTION OF T | 7/1/2003 | INVALID | N |
| 2 | G0121 | COLORECTAL CANCER SCREENING; COL | 1/1/2007 | $263.39 | 3 |
| 2 | G0168 | WOUND CLOSURE UTILIZING TISSUE A | 1/1/2000 | NC | 9 |
| 2 | G0184 | OCULAR PHOTODYNAMIC THERAPY TREA | 4/1/2002 | INVALID | N |
| 2 | G0185 | DESTRUCTION OF LOCALIZED LESION | 7/1/2003 | INVALID | N |
| 2 | G0186 | DESTRUCTION OF LOCALIZED LESION | 1/1/2001 | NC | 9 |
| 2 | G0187 | DESTRUCTION OF MACULAR DRUSEN, P | 7/1/2003 | INVALID | N |
| 2 | G0289 | ARTHROSCOPY, KNEE, SURGICAL, FOR | 1/1/2003 | NC | 9 |
| 2 | G0297 | INSERTION OF SINGLE CHAMBER PACI | 1/1/2004 | NC | 9 |
| 2 | G0298 | INSERTION OF DUAL CHAMBER PACING | 1/1/2004 | NC | 9 |
| 2 | G0299 | INSERTION OR REPOSITIONING OF EL | 1/1/2004 | NC | 9 |
| 2 | G0300 | INSERTION OR REPOSITIONING OF EL | 1/1/2004 | NC | 9 |
| 2 | G0302 | PRE-OP PULMONARY SURGERY SERVICE | 1/1/2004 | NC | 9 |
| 2 | G0303 | PRE-OP PULMONARY SURGERY SERVICE | 1/1/2004 | NC | 9 |
| 2 | G0304 | PRE-OP PULMONARY SURGERY SERVICE | 1/1/2004 | NC | 9 |
| 2 | G0305 | POST-DISCHARGE PULMONARY SURGERY | 1/1/2004 | NC | 9 |
| 2 | G0342 | LAPAROSCOPY FOR ISLET CELL TRANS | 2/1/2007 | NC | 9 |
| 2 | G0343 | LAPAROTOMY FOR ISLET CELL TRANSP | 2/1/2007 | NC | 9 |
| 2 | M0075 | CELLULAR THERAPY | 1/1/1994 | NC | 9 |
| 2 | M0076 | PROLOTHERAPY | 1/1/1994 | NC | 9 |
| 2 | M0100 | INTRAGASTRIC HYPOTHERMIA USING G | 1/1/1989 | NC | 9 |
| 2 | M0301 | FABRIC WRAPPING OF ABDOMINAL ANE | 2/1/1994 | NC | 9 |
| 2 | P9612 | CATHETERIZATION FOR COLLECTION O | 11/1/2001 | $2.22 | 3 |
| 2 | S0630 | REMOVAL OF SUTURES BY A PHYSICIA | 1/1/2001 | NC | 9 |
| 2 | S2053 | TRANSPLANTATION OF SMALL INTESTI | 10/1/2005 | $0.01 | 5 |
| 2 | S2060 | LOBAR LUNG TRANSPLANTATION | 1/1/2001 | NC | 9 |
| 2 | S2061 | DONOR LOBECTOMY (LUNG) FOR TRANS | 1/1/2001 | NC | 9 |
| 2 | S2065 | SIMULTANEOUS PANCREAS KIDNEY TRA | 10/1/2005 | $0.01 | 5 |
| 2 | S2082 | LAPAROSCOPY, SURGICAL; GASTRIC R | 1/1/2006 | INVALID | N |
| 2 | S2083 | ADJUSTMENT OF GASTRIC BAND DIAME | 1/1/2005 | NC | 9 |
| 2 | S2102 | ISLET CELL TISSUE TRANSPLANT FRO | 1/1/2001 | NC | 9 |
| 2 | S2103 | ADRENAL TISSUE TRANSPLANT TO BRA | 1/1/2001 | NC | 9 |
| 2 | S2112 | ARTHROSCOPY, KNEE, SURGICAL FOR | 1/1/2002 | NC | 9 |
| 2 | S2120 | LOW DENSITY LIPOPROTEIN (LDL) AP | 1/1/2001 | NC | 9 |
| 2 | S2140 | CORD BLOOD HARVESTING FOR TRANSP | 1/1/2001 | NC | 9 |
| 2 | S2142 | CORD BLOOD-DERIVED STEM-CELL TRA | 10/1/2005 | $0.01 | 5 |
| 2 | S2150 | BONE MARROW OR BLOOD-DERIVED PER | 10/1/2005 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 2 | S2180 | DONOR LEUKOCYTE INFUSION (EG, DL | 7/1/2003 | INVALID | N |
| 2 | S2202 | ECHOSCLEROTHERPY | 1/1/2001 | NC | 9 |
| 2 | S2220 | THROMBECTOMY, CORONARY; BY MECHA | 4/1/2002 | INVALID | N |
| 2 | S2260 | INDUCED ABORTION, 17 TO 24 WEEKS | 1/1/2002 | NC | 9 |
| 2 | S2340 | CHEMODENERVATION OF ABDUCTOR MUS | 1/1/2001 | NC | 9 |
| 2 | S2342 | NASAL ENDOSCOPY FOR POST-OPERATI | 4/1/2002 | $0.01 | 5 |
| 2 | S2348 | DECOMPRESSION PROCEDURE, PERCUTA | 1/1/2005 | NC | 9 |
| 2 | S2350 | DISKECTOMY, ANTERIOR, WITH DEOMP | 10/1/2005 | $0.01 | 5 |
| 2 | S2351 | DISKECTOMY, ANTERIOR, WITH DECOM | 10/1/2005 | $0.01 | 5 |
| 2 | S2370 | INTRADISCAL ELECTROTHERMAL THERA | 1/1/2001 | NC | 9 |
| 2 | S2371 | EACH ADDITIONAL INTERSPACE (LSIT | 1/1/2001 | NC | 9 |
| 2 | S4981 | INSERTION OF LEVONORGESTREL-RELE | 1/1/2002 | $64.88 | 3 |
| 7 | 100 | ANESTHESIA FOR PROCEDURES ON INT | 11/1/2002 | $23.35 | 3 |
| 7 | 102 | ANESTHESIA FOR PLASTIC REPAIR OF | 11/1/2002 | $23.35 | 3 |
| 7 | 103 | BLEPHAROPLASTY | 11/1/2002 | $23.35 | 3 |
| 7 | 104 | ANESTHESIA FOR ELECTROCONVULSIVE | 11/1/2002 | $23.35 | 3 |
| 7 | 120 | ANESTHESIA FOR PROCEDURES ON EXT | 11/1/2002 | $23.35 | 3 |
| 7 | 124 | ANESTHESIA FOR PROCEDURES ON EXT | 11/1/2002 | $23.35 | 3 |
| 7 | 126 | ANESTHESIA FOR PROCEDURES ON EXT | 11/1/2002 | $23.35 | 3 |
| 7 | 140 | ANESTHESIA FOR PROCEDURES ON EYE | 11/1/2002 | $23.35 | 3 |
| 7 | 142 | ANESTHESIA FOR PROCEDURES ON EYE | 11/1/2002 | $23.35 | 3 |
| 7 | 144 | ANESTHISIA FOR PROCEDURES ON EYE | 11/1/2002 | $23.35 | 3 |
| 7 | 145 | ANESTHESIA FOR PROCEDURES ON EYE | 11/1/2002 | $23.35 | 3 |
| 7 | 147 | ANESTHESIA FOR PROCEDURES ON EYE | 11/1/2002 | $23.35 | 3 |
| 7 | 148 | ANESTHESIA FOR PROCEDURES ON EYE | 11/1/2002 | $23.35 | 3 |
| 7 | 160 | ANESTHESIA FOR PROCEDURES ON NOS | 11/1/2002 | $23.35 | 3 |
| 7 | 162 | ANESTHESIA FOR PROCEDURES ON NOS | 11/1/2002 | $23.35 | 3 |
| 7 | 164 | ANESTHESIA FOR PROCEDURES ON NOS | 11/1/2002 | $23.35 | 3 |
| 7 | 170 | ANESTHESIA FOR INTRAORAL PROCEDU | 11/1/2002 | $23.35 | 3 |
| 7 | 172 | ANESTHESIA FOR INTRAORAL PROCEDU | 11/1/2002 | $23.35 | 3 |
| 7 | 174 | ANESTHESIA FOR INTRAORAL PROCEDU | 11/1/2002 | $23.35 | 3 |
| 7 | 176 | ANESTHESIA FOR INTRAORAL PROCEDU | 11/1/2002 | $23.35 | 3 |
| 7 | 190 | ANESTHESIA FOR PROCEDURES ON FAC | 11/1/2002 | $23.35 | 3 |
| 7 | 192 | ANESTHESIA FOR PROCEDURES ON FAC | 11/1/2002 | $23.35 | 3 |
| 7 | 210 | ANESTHESIA FOR INTRACRANIAL PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 212 | ANESTHESIA FOR INTRACRANIAL PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 214 | ANESTHESIA FOR INTRACRANIAL PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 215 | ANESTHESIA FOR INTRACRANIAL PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 216 | ANESTHESIA FOR INTRACRANIAL PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 218 | ANESTHESIA FOR INTRACRANIAL PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 220 | ANESTHESIA FOR INTRACRANIAL PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 222 | ANESTHESIA FOR INTRACRANIAL PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 300 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 320 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 322 | ANESTHESIA FOR NEEDLE BIOPSY OF | 11/1/2002 | $23.35 | 3 |
| 7 | 326 | ANESTHESIA FOR ALL PROCEDURES ON | 1/1/2003 | $23.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 7 | 350 | ANESTHESIA FOR PROCEDURES ON MAJ | 11/1/2002 | $23.35 | 3 |
| 7 | 352 | ANESTHESIA FOR PROCEDURES ON MAJ | 11/1/2002 | $23.35 | 3 |
| 7 | 400 | ANESTHESIA FOR PROCEDURES ON ANT | 11/1/2002 | $23.35 | 3 |
| 7 | 402 | ANESTHESIA FOR RECONSTRUCTIVE PR | 11/1/2002 | $23.35 | 3 |
| 7 | 404 | ANESTHESIA FOR RADICAL OR MODIFI | 11/1/2002 | $23.35 | 3 |
| 7 | 406 | ANESTHESIA FOR RADICAL OR MODIFI | 11/1/2002 | $23.35 | 3 |
| 7 | 410 | ANESTHESIA FOR ELECTRICAL CONVER | 11/1/2002 | $23.35 | 3 |
| 7 | 450 | ANESTHESIA FOR PROCEDURES ON CLA | 11/1/2002 | $23.35 | 3 |
| 7 | 452 | ANESTHESIA FOR PROCEDURES ON CLA | 11/1/2002 | $23.35 | 3 |
| 7 | 454 | ANESTHESIA FOR PROCEDURES ON CLA | 11/1/2002 | $23.35 | 3 |
| 7 | 470 | ANESTHESIA FOR PARTIAL RIB RESEC | 11/1/2002 | $23.35 | 3 |
| 7 | 472 | ANESTHESIA FOR PARTIAL RIB RESEC | 11/1/2002 | $23.35 | 3 |
| 7 | 474 | ANESTHESIA FOR PARTIAL RIB RESEC | 11/1/2002 | $23.35 | 3 |
| 7 | 500 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 520 | ANESTHESIA FOR CLOSED CHEST PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 522 | ANESTHESIA FOR NEEDLE BIOPSY OF | 11/1/2002 | $23.35 | 3 |
| 7 | 524 | ANESTHESIA FOR PNEUMOCENTESIS | 11/1/2002 | $23.35 | 3 |
| 7 | 528 | ANESTHESIA FOR MEDIASTINOSCOPY | 11/1/2002 | $23.35 | 3 |
| 7 | 529 | ANESTHESIA FOR CLOSED CHEST PROC | 1/1/2004 | $23.35 | 3 |
| 7 | 530 | ANESTHESIA FOR PERMANENT TRANSVE | 11/1/2002 | $23.35 | 3 |
| 7 | 532 | ANESTHESIA FOR ACCESS TO CENTRAL | 11/1/2002 | $23.35 | 3 |
| 7 | 534 | ANESTHESIA FOR TRANSVENOUS INSER | 11/1/2002 | $23.35 | 3 |
| 7 | 537 | ANESTHESIA FOR CARDIAC ELECTROPH | 11/1/2002 | $23.35 | 3 |
| 7 | 539 | ANESTHESIA FOR TRACHEOBRONCHIAL | 1/1/2003 | $23.35 | 3 |
| 7 | 540 | ANESTHESIA FOR THORACOTOMY PROCE | 11/1/2002 | $23.35 | 3 |
| 7 | 541 | ANESTHESIA FOR THORACOTOMY PROCE | 1/1/2003 | $23.35 | 3 |
| 7 | 542 | ANESTHESIA FOR DECORTICATION | 11/1/2002 | $23.35 | 3 |
| 7 | 544 | ANESTHESIA FOR PLEURECTOMY | 4/1/2004 | INVALID | N |
| 7 | 546 | ANESTHESIA FOR PULMONARY RESECTI | 11/1/2002 | $23.35 | 3 |
| 7 | 548 | ANESTHESIA FOR INTRATHORACIC REP | 11/1/2002 | $23.35 | 3 |
| 7 | 550 | ANESTHESIA FOR STERNAL DEBRIDEME | 11/1/2002 | $23.35 | 3 |
| 7 | 560 | ANESTHESIA FOR PROCEDURES ON HEA | 11/1/2002 | $23.35 | 3 |
| 7 | 561 | ANESTHESIA FOR PROCEDURES ON HEA | 1/1/2005 | $23.35 | 3 |
| 7 | 562 | ANESTHESIA FOR PROCEDURES ON HEA | 11/1/2002 | $23.35 | 3 |
| 7 | 563 | ANESTHESIA FOR PROCEDURES ON HEA | 11/1/2002 | $23.35 | 3 |
| 7 | 566 | ANESTHESIA FOR DIRECT CORONARY A | 11/1/2002 | $23.35 | 3 |
| 7 | 580 | ANESTHESIA FOR HEART TRANSPLANT | 11/1/2002 | $23.35 | 3 |
| 7 | 600 | ANESTHESIA FOR PROCEDURES ON CER | 11/1/2002 | $23.35 | 3 |
| 7 | 604 | ANESTHESIA FOR PROCEDURES ON CER | 11/1/2002 | $23.35 | 3 |
| 7 | 620 | ANESTHESIA FOR PROCEDURES ON THO | 11/1/2002 | $23.35 | 3 |
| 7 | 622 | ANESTHESIA FOR PROCEDURES ON THO | 11/1/2002 | $23.35 | 3 |
| 7 | 625 | ANESTHESIA FOR PROCEDURES ON THE | 1/1/2007 | $23.35 | 3 |
| 7 | 626 | ANESTHESIA FOR PROCEDURES ON THE | 1/1/2007 | $23.35 | 3 |
| 7 | 630 | ANESTHESIA FOR PROCEDURES IN LUM | 11/1/2002 | $23.35 | 3 |
| 7 | 632 | ANESTHESIA FOR PROCEDURES IN LUM | 11/1/2002 | $23.35 | 3 |
| 7 | 634 | ANESTHESIA FOR PROCEDURES IN LUM | 11/1/2002 | $23.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 7 | 635 | ANESTHESIA FOR PROCEDURES IN LUM | 11/1/2002 | $23.35 | 3 |
| 7 | 640 | ANESTHESIA FOR MANIPULATION OF T | 1/1/2003 | $23.35 | 3 |
| 7 | 670 | ANESTHESIA FOR EXTENSIVE SPINE A | 11/1/2002 | $23.35 | 3 |
| 7 | 700 | ANESTHESIA FOR PROCEDURES ON UPP | 11/1/2002 | $23.35 | 3 |
| 7 | 702 | ANESTHESIA FOR PROCEDURES ON UPP | 11/1/2002 | $23.35 | 3 |
| 7 | 730 | ANESTHESIA FOR PROCEDURES ON UPP | 11/1/2002 | $23.35 | 3 |
| 7 | 740 | ANESTHESIA FOR UPPER GASTROINTES | 11/1/2002 | $23.35 | 3 |
| 7 | 750 | ANESTHESIA FOR HERNIA REPAIRS IN | 11/1/2002 | $23.35 | 3 |
| 7 | 752 | ANESTHESIA FOR LUMBAR AND VENTRA | 11/1/2002 | $23.35 | 3 |
| 7 | 754 | ANESTHESIA FOR HERNIA REPAIRS IN | 11/1/2002 | $23.35 | 3 |
| 7 | 756 | ANESTHESIA FOR TRANSABDOMINAL RE | 11/1/2002 | $23.35 | 3 |
| 7 | 770 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 790 | ANESTHESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 792 | ANESTHESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 794 | ANESTHESIA FOR PANCREATECTOMY PA | 11/1/2002 | $23.35 | 3 |
| 7 | 796 | ANESTHESIA FOR LIVER TRANSLANT ( | 11/1/2002 | $23.35 | 3 |
| 7 | 797 | ANESTHESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 800 | ANESTHESIA FOR PROCEDURES ON LOW | 11/1/2002 | $23.35 | 3 |
| 7 | 802 | ANESTHESIA FOR PROCEDURES ON LOW | 10/1/2005 | NC | 9 |
| 7 | 810 | ANESTHESIA FOR INTESTINAL ENDOSC | 11/1/2002 | $23.35 | 3 |
| 7 | 820 | ANESTHESIA FOR PROCEDURES ON LOW | 11/1/2002 | $23.35 | 3 |
| 7 | 830 | ANESTHESIA FOR HERNIA REPAIRS IN | 11/1/2002 | $23.35 | 3 |
| 7 | 832 | ANESTHESIA FOR HERNIA REPAIRS IN | 11/1/2002 | $23.35 | 3 |
| 7 | 834 | ANESTHESIA FOR HERNIA REPAIRS IN | 1/1/2003 | $23.35 | 3 |
| 7 | 836 | ANESTHESIA FOR HERNIA REPAIRS IN | 1/1/2003 | $23.35 | 3 |
| 7 | 840 | ANESTHESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 842 | ANESTHESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 844 | ANESHTESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 846 | ANESTHESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 848 | ANESTHESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 850 | ANESTHESIA FOR INTRAPERITONEAL P | 4/1/2002 | INVALID | N |
| 7 | 851 | ANESTHESIA FOR INTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 855 | ANESTHESIA FOR INTRAPERITONEAL P | 4/1/2002 | INVALID | N |
| 7 | 857 | CONTINUOUS EPIDURAL ANALGESIA, F | 4/1/2002 | INVALID | N |
| 7 | 860 | ANESTHESIA FOR EXTRAPERITONEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 862 | ANESTHESIA FOR RENAL PROCEDURES | 11/1/2002 | $23.35 | 3 |
| 7 | 864 | ANESTHESIA FOR TOTAL CYSTECTOMY | 11/1/2002 | $23.35 | 3 |
| 7 | 865 | ANESHESIA FOR EXTRAPERITONEAL PR | 11/1/2002 | $23.35 | 3 |
| 7 | 866 | ANESTHESIA FOR ADRENALECTOMY | 11/1/2002 | $23.35 | 3 |
| 7 | 868 | ANESTHESIA FOR RENAL TRANSPLANT | 11/1/2002 | $23.35 | 3 |
| 7 | 869 | ANESTHESIA FOR EXTRAPERITONEAL P | 7/1/2003 | INVALID | N |
| 7 | 870 | ANESTHESIA FOR CYSTOLITHOTOMY | 11/1/2002 | $23.35 | 3 |
| 7 | 872 | ANESTHESIA FOR LITHOTRIPSY, EXTR | 11/1/2002 | $23.35 | 3 |
| 7 | 873 | ANESTHESIA FOR LITHOTRIPSY, EXTR | 11/1/2002 | $23.35 | 3 |
| 7 | 880 | ANESTHESIA FOR PROCEDURES ON MAJ | 11/1/2002 | $23.35 | 3 |
| 7 | 882 | ANESTHESIA FOR PROCEDURES ON MAJ | 11/1/2002 | $23.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 7 | 884 | ANESTHESIA FOR PROCEDURES ON MAJ | 4/1/2002 | INVALID | N |
| 7 | 902 | ANESTHESIA FOR; ANORECTAL PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 904 | ANESHTESIA FOR RADICAL ERINEAL P | 11/1/2002 | $23.35 | 3 |
| 7 | 906 | ANESTHESIA FOR VULVECTOMY | 11/1/2002 | $23.35 | 3 |
| 7 | 908 | ANESTHESIA FOR PERINEAL PROSTATE | 11/1/2002 | $23.35 | 3 |
| 7 | 910 | ANESTHESIA FOR TRANSURETHRAL PRO | 11/1/2002 | $23.35 | 3 |
| 7 | 912 | ANESTHESIA FOR TRANSURETHRAL RES | 11/1/2002 | $23.35 | 3 |
| 7 | 914 | ANESTHESIA FOR TRANSURETHRAL RES | 11/1/2002 | $23.35 | 3 |
| 7 | 916 | ANESTHESIA FOR POST-TRANSURETHRA | 11/1/2002 | $23.35 | 3 |
| 7 | 918 | ANESTHESIA WITH FRAGMENTATION AN | 11/1/2002 | $23.35 | 3 |
| 7 | 920 | ANESTHESIA FOR PROCEDURES ON MAL | 11/1/2002 | $23.35 | 3 |
| 7 | 921 | ANESTHESIA FOR PROCEDURES ON MAL | 1/1/2004 | $23.35 | 3 |
| 7 | 922 | ANESTHESIA FOR PROCEDURES ON MAL | 11/1/2002 | $23.35 | 3 |
| 7 | 924 | ANESTHESIA FOR PROCEDURES ON MAL | 11/1/2002 | $23.35 | 3 |
| 7 | 926 | ANESTHESIA FOR PROCEDURES ON MAL | 11/1/2002 | $23.35 | 3 |
| 7 | 928 | ANESTHESIA FOR PROCEDURES ON MAL | 11/1/2002 | $23.35 | 3 |
| 7 | 930 | ANESTHESIA FOR PROCEDURES ON MAL | 11/1/2002 | $23.35 | 3 |
| 7 | 932 | ANESTHESIA FOR PROCEDURES ON MAL | 11/1/2002 | $23.35 | 3 |
| 7 | 934 | ANESTHESIA FOR RADICAL AMPUTATIO | 11/1/2002 | $23.35 | 3 |
| 7 | 936 | ANESTHESIA FOR RADICAL AMPUTATIO | 11/1/2002 | $23.35 | 3 |
| 7 | 938 | ANESTHESIA FOR INSERTION OF PENI | 11/1/2002 | $23.35 | 3 |
| 7 | 940 | ANESTHESIA FOR VAGINAL PROCEDURE | 11/1/2002 | $23.35 | 3 |
| 7 | 942 | ANESTHESIA FOR VAGINAL PROCEDURE | 11/1/2002 | $23.35 | 3 |
| 7 | 944 | ANESTHESIA FOR VAGINAL PROCEDURE | 11/1/2002 | $23.35 | 3 |
| 7 | 946 | ANESTHESIA FOR VAGINAL PROCEDURE | 4/1/2002 | INVALID | N |
| 7 | 948 | ANESTHESIA FOR VAGINAL PROCEDURE | 11/1/2002 | $23.35 | 3 |
| 7 | 950 | ANESTHESIA FOR VAGINAL PROCEDURE | 11/1/2002 | $23.35 | 3 |
| 7 | 952 | ANESTHESIA FOR VAGINAL ROCEDURES | 11/1/2002 | $23.35 | 3 |
| 7 | 955 | CONTINUOUS EPIDURAL ANALGESIA, F | 4/1/2002 | INVALID | N |
| 7 | 1112 | ANESTHESIA FOR BONE MARROW ASPIR | 11/1/2002 | $23.35 | 3 |
| 7 | 1120 | ANESTHESIA FOR PROCEDURES ON BON | 11/1/2002 | $23.35 | 3 |
| 7 | 1130 | BODY CAST APPLICATION REPLACEMEN | 11/1/2002 | $23.35 | 3 |
| 7 | 1140 | INTERPELVIABDOMINAL (HINDQUARTER | 11/1/2002 | $23.35 | 3 |
| 7 | 1150 | RADICAL PROCEDURES FOR TUMOR OF | 11/1/2002 | $23.35 | 3 |
| 7 | 1160 | CLOSED PROCEDURES INVOLVING SYMP | 11/1/2002 | $23.35 | 3 |
| 7 | 1170 | OPEN PROCEDURES INVOLVING SYMPHY | 11/1/2002 | $23.35 | 3 |
| 7 | 1173 | ANESTHESIA FOR OPEN REPAIR OF FR | 1/1/2004 | $23.35 | 3 |
| 7 | 1180 | ANESTHESIA FOR OBTURATOR NEURECT | 11/1/2002 | $23.35 | 3 |
| 7 | 1190 | ANESTHESIA FOR OBTURATOR NEURECT | 11/1/2002 | $23.35 | 3 |
| 7 | 1200 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 1202 | ANESTHESIA FOR ARTHROSCOPIC PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 1210 | ANESTHESIA FOR OPEN PROCEDURES I | 11/1/2002 | $23.35 | 3 |
| 7 | 1212 | ANESTHESIA FOR OPEN PROCEDURES I | 11/1/2002 | $23.35 | 3 |
| 7 | 1214 | ANESTHESIA FOR OPEN PROCEDURES I | 11/1/2002 | $23.35 | 3 |
| 7 | 1215 | ANESTHESIA FOR OPEN PROCEDURES I | 11/1/2002 | $23.35 | 3 |
| 7 | 1220 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 7 | 1230 | ANESTHESIA FOR OPEN PROCEDURES I | 11/1/2002 | $23.35 | 3 |
| 7 | 1232 | ANESTHESIA FOR OPEN PROCEDURES I | 11/1/2002 | $23.35 | 3 |
| 7 | 1234 | ANESTHESIA FOR OPEN PROCEDURES I | 11/1/2002 | $23.35 | 3 |
| 7 | 1250 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 1260 | ANESTHESIA FOR ALL PROCEDURES IN | 11/1/2002 | $23.35 | 3 |
| 7 | 1270 | ANESTHESIA FOR PROCEDURES INVOLV | 11/1/2002 | $23.35 | 3 |
| 7 | 1272 | ANESTHESIA FOR PROCEDURES INVOLV | 11/1/2002 | $23.35 | 3 |
| 7 | 1274 | ANESTHESIA FOR PROCEDURES INVOLV | 11/1/2002 | $23.35 | 3 |
| 7 | 1320 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 1340 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 1360 | ANESTHESIA FOR ALL OPEN PROCEDUR | 11/1/2002 | $23.35 | 3 |
| 7 | 1380 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 1382 | ANESTHESIA FOR DIAGNOSTIC ARTHRO | 11/1/2002 | $23.35 | 3 |
| 7 | 1390 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 1392 | ANESTHESIA FOR ALL OPEN PROCEDUR | 11/1/2002 | $23.35 | 3 |
| 7 | 1400 | ANESTHESIA FOR OPEN OR SURGICAL | 11/1/2002 | $23.35 | 3 |
| 7 | 1402 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1404 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1420 | ANESTHESIA FOR ALL CAST APPLICAT | 11/1/2002 | $23.35 | 3 |
| 7 | 1430 | ANESTHESIA FOR PROCEDURES ON VEI | 11/1/2002 | $23.35 | 3 |
| 7 | 1432 | ANESTHESIA FOR PROCEDURES ON VEI | 11/1/2002 | $23.35 | 3 |
| 7 | 1440 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1442 | ANESTHESIA FOR POPLITEAL THROMBO | 11/1/2002 | $23.35 | 3 |
| 7 | 1444 | ANESTHESIA FOR POPLITEAL EXCISIO | 11/1/2002 | $23.35 | 3 |
| 7 | 1462 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 1464 | ANESTHESIA FOR ARTHROSCOPIC PROC | 11/1/2002 | $23.35 | 3 |
| 7 | 1470 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1472 | ANESHTESIA FOR REPAIR OF RUPTURE | 11/1/2002 | $23.35 | 3 |
| 7 | 1474 | ANESTHESIA FOR GASTROCNEMIUS REC | 11/1/2002 | $23.35 | 3 |
| 7 | 1480 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1482 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1484 | ANESTHESIA FOR OSTEOTOMY OR OSTE | 11/1/2002 | $23.35 | 3 |
| 7 | 1486 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1490 | ANESTHESIA FOR LOWER LEG CAST AP | 11/1/2002 | $23.35 | 3 |
| 7 | 1500 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1502 | ANESTHESIA FOR PROCEDURE ON ARTE | 11/1/2002 | $23.35 | 3 |
| 7 | 1520 | ANESTHESIA FOR PROCEDURES ON VEI | 11/1/2002 | $23.35 | 3 |
| 7 | 1522 | ANESTHESIA FOR PROCEDURES ON VEI | 11/1/2002 | $23.35 | 3 |
| 7 | 1610 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 1620 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 1622 | ANESTHESIA FOR DIAGNOSTIC ARTHRO | 11/1/2002 | $23.35 | 3 |
| 7 | 1630 | ANESTHESIA FOR OPEN OR SURGICAL | 11/1/2002 | $23.35 | 3 |
| 7 | 1632 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1634 | ANESTHESIA FOR SHOULDER DISARTIC | 11/1/2002 | $23.35 | 3 |
| 7 | 1636 | ANESTHESIA FOR INTERTHORACOSCAPU | 11/1/2002 | $23.35 | 3 |
| 7 | 1638 | ANESTHESIA FOR TOTAL SHOULDER RE | 11/1/2002 | $23.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 7 | 1650 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1652 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1654 | ANESHTESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1656 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1670 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 1680 | ANESTHESIA FOR SHOULDER CAST APP | 11/1/2002 | $23.35 | 3 |
| 7 | 1682 | ANESTHESIA FOR SHOULDER CAST APP | 11/1/2002 | $23.35 | 3 |
| 7 | 1710 | ANESTHESIA FOR PROCEDURES ON NER | 11/1/2002 | $23.35 | 3 |
| 7 | 1712 | ANESTHESIA FOR TENOTOMY ELBOW TO | 11/1/2002 | $23.35 | 3 |
| 7 | 1714 | ANESTHESIA FOR TENOPLASTY ELBOW | 11/1/2002 | $23.35 | 3 |
| 7 | 1716 | ANESTHESIA FOR TENODESIS RUPTURE | 11/1/2002 | $23.35 | 3 |
| 7 | 1730 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 1732 | ANESTHESIA FOR DIAGNOSTIC ARTHRO | 11/1/2002 | $23.35 | 3 |
| 7 | 1740 | ANESTHESIA FOR OPEN OR SURGICAL | 11/1/2002 | $23.35 | 3 |
| 7 | 1742 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1744 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1756 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1758 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1760 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1770 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1772 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1780 | ANESTHESIA FOR PROCEDURES ON VEI | 11/1/2002 | $23.35 | 3 |
| 7 | 1782 | ANESTHESIA FOR PROCEDURES ON VEI | 11/1/2002 | $23.35 | 3 |
| 7 | 1810 | ANESTHESIA FOR ALL PROCEDURES ON | 11/1/2002 | $23.35 | 3 |
| 7 | 1820 | ANESTHESIA FOR ALL CLOSED PROCED | 11/1/2002 | $23.35 | 3 |
| 7 | 1829 | ANESTHESIA FOR DIAGNOSTIC ARTHRO | 1/1/2003 | $23.35 | 3 |
| 7 | 1830 | ANESTHESIA FOR OPEN OR SURGICAL | 11/1/2002 | $23.35 | 3 |
| 7 | 1832 | ANESTHESIA FOR OPEN PROCEDURES O | 11/1/2002 | $23.35 | 3 |
| 7 | 1840 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1842 | ANESTHESIA FOR PROCEDURES ON ART | 11/1/2002 | $23.35 | 3 |
| 7 | 1844 | ANESTHISIA FOR VASCULAR SHUNT OR | 11/1/2002 | $23.35 | 3 |
| 7 | 1850 | ANESTHESIA FOR PROCEDURES ON VEI | 11/1/2002 | $23.35 | 3 |
| 7 | 1852 | ANESTHESIA FOR PROCEDURES ON VEI | 11/1/2002 | $23.35 | 3 |
| 7 | 1860 | ANESTHESIA FOR FOREARM, WRIST OR | 11/1/2002 | $23.35 | 3 |
| 7 | 1904 | ANESTHESIA FOR INJECTION PROCEDU | 4/1/2002 | INVALID | N |
| 7 | 1905 | ANESTHESIA FOR MYELOGRAPHY, DISK | 11/1/2002 | $23.35 | 3 |
| 7 | 1906 | ANESTHESIA FOR INJECTION PROCEDU | 4/1/2002 | INVALID | N |
| 7 | 1908 | ANESTHESIA FOR INJECTION PROCEDU | 4/1/2002 | INVALID | N |
| 7 | 1910 | ANESTHESIA FOR INJECTION PROCEDU | 4/1/2002 | INVALID | N |
| 7 | 1912 | ANESTHESIA FOR INJECTION PROCEDU | 4/1/2002 | INVALID | N |
| 7 | 1914 | CERVICAL | 4/1/2002 | INVALID | N |
| 7 | 1916 | ANESTHESIA FOR DIAGNOSTIC ARTERI | 11/1/2002 | $23.35 | 3 |
| 7 | 1918 | ANESTHESIA FOR ARTERIOGRAMS NEED | 4/1/2002 | INVALID | N |
| 7 | 1920 | ANESTHESIA FOR CARDIAC CATHETERI | 11/1/2002 | $23.35 | 3 |
| 7 | 1921 | ANESTHESIA FOR ANGIOPLASTY | 4/1/2002 | INVALID | N |
| 7 | 1922 | ANESTHESIA FOR NON-INVASIVE IMAG | 11/1/2002 | $23.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 7 | 1924 | ANESTHESIA FOR THERAPEUTIC INTER | 11/1/2002 | $23.35 | 3 |
| 7 | 1925 | ANESTHESIA FOR THERAPEUTIC INTER | 11/1/2002 | $23.35 | 3 |
| 7 | 1926 | ANESTHESIA FOR THERAPEUTIC INTER | 11/1/2002 | $23.35 | 3 |
| 7 | 1930 | ANESTHESIA FOR THERAPEUTIC INTER | 11/1/2002 | $23.35 | 3 |
| 7 | 1931 | ANESTHESIA FOR THERAPEUTIC INTER | 11/1/2002 | $23.35 | 3 |
| 7 | 1932 | ANESTHESIA FOR THERAPEUTIC INTER | 11/1/2002 | $23.35 | 3 |
| 7 | 1933 | ANESTHESIA FOR THERAPEUTIC INTER | 11/1/2002 | $23.35 | 3 |
| 7 | 1951 | ANESTHESIA FOR SECOND AND THIRD | 11/1/2002 | $23.35 | 3 |
| 7 | 1952 | ANESTHESIA FOR SECOND AND THIRD | 11/1/2002 | $23.35 | 3 |
| 7 | 1953 | ANESTHESIA FOR SECOND AND THIRD | 11/1/2002 | $23.35 | 3 |
| 7 | 1958 | ANESTHESIA FOR EXTERNAL CEPHALIC | 1/1/2004 | $23.35 | 3 |
| 7 | 1960 | ANESTHESIA FOR; VAGINAL DELIVERY | 11/1/2002 | $23.35 | 3 |
| 7 | 1961 | ANESTHESIA FOR CESAREAN DELIVERY | 11/1/2002 | $23.35 | 3 |
| 7 | 1962 | ANESTHESIA FOR URGENT HYSTERECTO | 11/1/2002 | $23.35 | 3 |
| 7 | 1963 | ANESTHESIA FOR CESAREAN HYSTEREC | 11/1/2002 | $23.35 | 3 |
| 7 | 1964 | ANESTHESIA FOR ABORTION PROCEDUR | 1/1/2006 | INVALID | N |
| 7 | 1965 | ANESTHESIA FOR INCOMPLETE OR MIS | 1/1/2006 | $23.35 | 3 |
| 7 | 1966 | ANESTHESIA FOR INDUCED ABORTION | 1/1/2006 | $23.35 | 3 |
| 7 | 1967 | NEURAXIAL LABOR ANALGESIA/ANESTH | 11/1/2002 | $23.35 | 3 |
| 7 | 1968 | ANESTHESIA FOR CESAREAN DELIVERY | 11/1/2002 | $23.35 | 3 |
| 7 | 1969 | ANESTHESIA FOR CESAREAN HYSTEREC | 11/1/2002 | $23.35 | 3 |
| 7 | 1990 | PHYSIOLOGICAL SUPPORT FOR HARVES | 11/1/2002 | $23.35 | 3 |
| 7 | 1991 | ANESTHESIA FOR DIAGNOSTIC OR THE | 1/1/2003 | $23.35 | 3 |
| 7 | 1992 | ANESTHESIA FOR DIAGNOSTIC OR THE | 1/1/2003 | $23.35 | 3 |
| 7 | 1995 | REGIONAL INTRAVENOUS ADMIN OF LO | 1/1/2007 | INVALID | N |
| 7 | 1996 | DAILY HOSPITAL MANAGEMENT OF EPI | 11/1/2002 | $23.35 | 3 |
| 7 | 1999 | UNLISTED ANESTHESIA PROCEDURE(S) | 11/1/2002 | $0.01 | 5 |
| 7 | 31500 | INTUBATION ENDOTRACHEAL EMERGENC | 1/1/2007 | $79.15 | 3 |
| 7 | 36000 | INTRODUCTION OF NEEDLE OR INTRAC | 1/1/2007 | $19.72 | 3 |
| 7 | 36410 | VENIPUNCTURE CHILD OVER AGE 3 YE | 1/1/2007 | $12.46 | 3 |
| 7 | 36420 | VENIPUNCTURE CUTDOWN UNDER AGE 1 | 1/1/2007 | $36.85 | 3 |
| 7 | 36425 | VENIPUNCTURE CUTDOWN; AGE 1 OR O | 1/1/2007 | $26.99 | 3 |
| 7 | 36488 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| 7 | 36489 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| 7 | 36490 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| 7 | 36491 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| 7 | 36600 | ARTERIAL PUNCTURE WITHDRAWAL OF | 1/1/2007 | $21.54 | 3 |
| 7 | 36620 | ARTERIAL CATHETERIZATION OR CANN | 1/1/2007 | $37.63 | 3 |
| 7 | 36625 | ARTERIAL CATHETERIZATION OR CANN | 1/1/2007 | $75.26 | 3 |
| 7 | 62270 | SPINAL PUNCTURE LUMBAR DIAGNOSTI | 1/1/2007 | $109.25 | 3 |
| 7 | 62273 | INJECTION LUMBAR EPIDURAL OF BLO | 1/1/2007 | $129.75 | 3 |
| 7 | 62280 | INJECTION OF NEUROLYTIC SUBSTANC | 1/1/2007 | $256.39 | 3 |
| 7 | 62281 | INJECTION OF NEUROLYTIC SUBSTANC | 1/1/2007 | $221.09 | 3 |
| 7 | 62282 | INJECTION OF NEUROLYTIC SUBSTANC | 1/1/2007 | $282.34 | 3 |
| 7 | 62310 | INJECTION, SINGLE, NOT INCL NEUR | 1/1/2007 | $177.76 | 3 |
| 7 | 62311 | INJECTION, SINGLE, NOT INCL NEUR | 1/1/2007 | $170.23 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 7 | 62318 | INJECTION, INCL CATHETER PLACEME | 1/1/2007 | $205.01 | 3 |
| 7 | 62319 | INJECTION, INCL CATHETER PLACEME | 1/1/2007 | $180.87 | 3 |
| 7 | 64400 | INJECTION ANESTHETIC AGENT TRIGE | 1/1/2007 | $79.93 | 3 |
| 7 | 64402 | INJECTION ANESTHETIC AGENT; FACI | 1/1/2007 | $76.55 | 3 |
| 7 | 64405 | INJECTION ANESTHETIC AGENT; GREA | 1/1/2007 | $74.22 | 3 |
| 7 | 64408 | INJECTION ANESTHETIC AGENT; VAGU | 1/1/2007 | $80.19 | 3 |
| 7 | 64410 | INJECTION ANESTHETIC AGENT; PHRE | 1/1/2007 | $104.58 | 3 |
| 7 | 64412 | INJECTION ANESTHETIC AGENT; SPIN | 1/1/2007 | $101.72 | 3 |
| 7 | 64413 | INJECTION ANESTHETIC AGENT; CERV | 1/1/2007 | $86.41 | 3 |
| 7 | 64415 | INJECTION ANESTHETIC AGENT; BRAC | 1/1/2007 | $113.66 | 3 |
| 7 | 64416 | INJECTION ANESTHETIC AGENT; BRAC | 1/1/2007 | $119.11 | 3 |
| 7 | 64417 | INJECTION ANESTHETIC AGENT; AXIL | 1/1/2007 | $119.11 | 3 |
| 7 | 64418 | INJECTION ANESTHETIC AGENT; SUPR | 1/1/2007 | $104.32 | 3 |
| 7 | 64420 | INJECTION ANESTHETIC AGENT; INTE | 1/1/2007 | $133.64 | 3 |
| 7 | 64421 | INJECTION ANESTHETIC AGENT; INTE | 1/1/2007 | $204.75 | 3 |
| 7 | 64425 | INJECTION ANESTHETIC AGENT; ILIO | 1/1/2007 | $91.60 | 3 |
| 7 | 64430 | INJECTION ANESTHETIC AGENT; PUDE | 1/1/2007 | $105.88 | 3 |
| 7 | 64435 | INJECTION ANESTHETIC AGENT; PARA | 1/1/2007 | $107.43 | 3 |
| 7 | 64445 | INJECTION ANESTHETIC AGENT; SCIA | 1/1/2007 | $110.55 | 3 |
| 7 | 64446 | INJECTION ANESTHETIC AGENT; SCIA | 1/1/2007 | $115.48 | 3 |
| 7 | 64447 | INJECTION ANESTHETIC AGENT; FEMO | 1/1/2007 | $52.42 | 3 |
| 7 | 64448 | INJECTION ANESTHETIC AGENT; FEMO | 1/1/2007 | $103.54 | 3 |
| 7 | 64449 | INJECTION ANESTHETIC AGENT; LUMB | 1/1/2007 | $106.65 | 3 |
| 7 | 92950 | CARDIOPULMONARY RESUSCITATION (E | 1/1/2007 | $214.87 | 3 |
| 7 | 92953 | TEMPORARY TRANSCUTANEOUS PACING | 1/1/2007 | $8.30 | 3 |
| 7 | 92960 | CARDIOVERSION ELECTIVE ELECTRICA | 1/1/2007 | $224.47 | 3 |
| 7 | 92970 | CARDIOASSIST-METHOD OF CIRCULATO | 1/1/2007 | $122.74 | 3 |
| 7 | 92971 | CARDIOASSIST-METHOD OF CIRCULATO | 1/1/2007 | $69.55 | 3 |
| 7 | 93503 | INSERTION AND PLACEMENT OF FLOW | 1/1/2007 | $98.35 | 3 |
| 7 | 99100 | ANESTHESIA FOR PATIENT OF EXTREM | 9/1/1985 | NC | 9 |
| 7 | 99116 | ANESTHESIA COMPLICATED BY UTILIZ | 9/1/1985 | NC | 9 |
| 7 | 99135 | ANESTHESIA COMPLICATED BY UTILIZ | 9/1/1985 | NC | 9 |
| 7 | 99140 | ANESTHESIA COMPLICATED BY EMERGE | 9/1/1985 | NC | 9 |
| 7 | 99141 | SEDATION WITH OR WITHOUT ANALGES | 1/1/2006 | INVALID | N |
| 7 | 99142 | SEDATION WITH OR WITHOUT ANALGES | 1/1/2006 | INVALID | N |
| 7 | 99148 | MODERATE SEDATION SVCS PROVIDED | 1/1/2006 | $0.01 | 5 |
| 7 | 99149 | MODERATE SEDATION SVCS PROVIDED | 1/1/2006 | $0.01 | 5 |
| 7 | 99150 | MODERATE SEDATION SVCS PROVIDED | 1/1/2006 | $0.01 | 5 |
| 7 | 99360 | PHYSICIAN STANDBY SERVICE, REQUI | 10/1/2006 | $60.42 | 3 |
| 7 | 99440 | NEWBORN RESUSCITATION; PROVISION | 1/1/2007 | $103.28 | 3 |
| 7 | D9211 | REGIONAL BLOCK ANESTHESIA | 1/1/2001 | $0.01 | 5 |
| 7 | D9212 | TRIGEMINAL DIVISION BLOCK ANESTH | 1/1/2001 | $26.78 | 3 |
| 7 | D9230 | ANALGESIA | 1/1/2001 | $8.57 | 3 |
| 7 | D9241 | INTRAVENOUS SEDATION/ANALGESIA - | 1/1/2001 | $108.15 | 3 |
| 7 | D9242 | INTRAVENOUS SEDATION/ANALGESIA - | 1/1/2001 | $0.01 | 5 |
| 7 | D9248 | NON-INTRAVENOUS CONSCIOUS SEDATI | 1/1/2001 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 11005 | DEBRIDEMENT OF SKIN, SUBCUTANEOU | 1/1/2007 | $105.31 | 3 |
| 8 | 11008 | REMOVAL OF PROSTHETIC MATERIAL O | 1/1/2007 | $39.65 | 3 |
| 8 | 11010 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $60.93 | 3 |
| 8 | 11011 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $71.93 | 3 |
| 8 | 11012 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $104.68 | 3 |
| 8 | 11200 | REMOVAL OF SKIN TAGS, MULTIPLE F | 4/1/1982 | NC | 9 |
| 8 | 11201 | EXCISION SKIN TAGS MULTIPLE FIBR | 4/1/1982 | NC | 9 |
| 8 | 11920 | TATTOOING INTRADERMAL INTRODUCTI | 4/1/1982 | NC | 9 |
| 8 | 11921 | TATTOOING INTRADERMAL INTRO OF I | 4/1/1982 | NC | 9 |
| 8 | 11922 | TATTOOING INTRADERMAL INTRODUCTI | 4/1/1982 | NC | 9 |
| 8 | 11950 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| 8 | 11951 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| 8 | 11952 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| 8 | 11954 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| 8 | 12018 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $43.70 | 3 |
| 8 | 12047 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $60.10 | 3 |
| 8 | 12057 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $65.71 | 3 |
| 8 | 15000 | SURGICAL PREP OF RECIP SITE BY E | 1/1/2007 | INVALID | N |
| 8 | 15001 | SURGICAL PREP OF RECIP SITE BY E | 1/1/2007 | INVALID | N |
| 8 | 15002 | SURGICAL PREP OR CREATION OF REC | 1/1/2007 | $42.87 | 3 |
| 8 | 15003 | SURGICAL PREP OR CREATION OF REC | 1/1/2007 | $9.50 | 3 |
| 8 | 15004 | SURG PREP OR CREATION OF RECIP S | 1/1/2007 | $51.74 | 3 |
| 8 | 15005 | SURG PREP OR CREATION OF RECIP S | 1/1/2007 | $16.09 | 3 |
| 8 | 15100 | SPLIT-THICKNESS AUTOGRAFT, TRUNK | 1/1/2007 | $119.06 | 3 |
| 8 | 15101 | SPLIT GRAFT, TRUNK, ARMS, LEGS; | 1/1/2007 | $29.58 | 3 |
| 8 | 15120 | SPLIT-THICKNESS AUTOGRAFT, FACE, | 1/1/2007 | $112.78 | 3 |
| 8 | 15121 | SPLIT GRAFT, FACE, SCALP, EYELID | 1/1/2007 | $39.13 | 3 |
| 8 | 15342 | APPLICATION OF BILAMINATE SKIN S | 1/1/2006 | INVALID | N |
| 8 | 15343 | APPLICATION OF BILAMINATE SKIN S | 1/1/2006 | INVALID | N |
| 8 | 15350 | HOMOGRAFT SKIN | 1/1/2006 | INVALID | N |
| 8 | 15351 | APPLICAION OF ALLOGRAFT, SKIN; E | 1/1/2006 | INVALID | N |
| 8 | 15732 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $196.65 | 3 |
| 8 | 15734 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $199.97 | 3 |
| 8 | 15736 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $191.93 | 3 |
| 8 | 15738 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $200.13 | 3 |
| 8 | 15750 | FLAP; NEUROVASCULAR PEDICLE | 1/1/2007 | $113.56 | 3 |
| 8 | 15756 | FREE MUSCLE FLAP WITH OR WITHOUT | 1/1/2007 | $313.53 | 3 |
| 8 | 15757 | FREE SKIN FLAP WITH MICROVASCULA | 1/1/2007 | $315.14 | 3 |
| 8 | 15758 | FREE FASCIAL FLAP WITH MICROVASC | 1/1/2007 | $316.12 | 3 |
| 8 | 15770 | GRAFT; DERMA-FAT-FASCIA | 1/1/2007 | $79.20 | 3 |
| 8 | 15775 | PUNCH GRAFT FOR HAIR TRANSPLANT | 4/1/1982 | NC | 9 |
| 8 | 15776 | PUNCH GRAFT FOR HAIR TRANSPLANT; | 4/1/1982 | NC | 9 |
| 8 | 15780 | DERMABRASION; TOTAL FACE (EG, FO | 4/1/1982 | NC | 9 |
| 8 | 15781 | DERMABRASION; SEGMENTAL, FACE (E | 10/1/1984 | NC | 9 |
| 8 | 15782 | DERMABRASION; REGIONAL, OTHER TH | 10/1/1984 | NC | 9 |
| 8 | 15783 | DERMABRASION; SUPERFICIAL, ANY S | 3/1/1987 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 15786 | ABRASION SINGLE LESION (EG KERAT | 4/1/1982 | NC | 9 |
| 8 | 15787 | ABRASION; EACH ADDITIONAL FOR LE | 4/1/1982 | NC | 9 |
| 8 | 15810 | SALABRASION 20 SQ CM OR LESS | 1/1/2006 | INVALID | N |
| 8 | 15811 | SALABRASION; OVER 20 SQ CM | 1/1/2006 | INVALID | N |
| 8 | 15819 | CERVICOPLASTY | 10/1/1984 | NC | 9 |
| 8 | 15820 | BLEPHAROPLASTY LOWER EYELIDS | 4/1/1982 | NC | 9 |
| 8 | 15821 | BLEPHAROPLASTY LOWER EYELID; WIT | 4/1/1982 | NC | 9 |
| 8 | 15824 | RHYTIDECTOMY FOREHEAD | 4/1/1982 | NC | 9 |
| 8 | 15825 | RHYTIDECTOMY; NECK WITH PLATYSMA | 10/1/1984 | NC | 9 |
| 8 | 15826 | RHYTIDECTOMY; GLABELLAR FROWN LI | 4/1/1982 | NC | 9 |
| 8 | 15828 | THYTIDECTOMY; CHEEK CHIN AND NEC | 4/1/1982 | NC | 9 |
| 8 | 15829 | RHYTIDECTOMY; SUPERFICIAL MUSCUL | 10/1/1984 | NC | 9 |
| 8 | 15830 | EXCISION, EXCESSIVE SKIN AND SUB | 1/1/2007 | NC | 9 |
| 8 | 15831 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/2007 | INVALID | N |
| 8 | 15832 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 8 | 15833 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 8 | 15834 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 8 | 15835 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 8 | 15836 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/2007 | $90.67 | 3 |
| 8 | 15837 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| 8 | 15838 | EXCISION EXCESSIVE SKIN AND SUBC | 10/1/1984 | NC | 9 |
| 8 | 15839 | EXCISION EXCESSIVE SKIN AND SUBC | 10/1/1984 | NC | 9 |
| 8 | 15841 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $211.75 | 3 |
| 8 | 15842 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $341.55 | 3 |
| 8 | 15845 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $117.76 | 3 |
| 8 | 15876 | SUCTION ASSISTED LIPECTOMY; HEAD | 3/1/1987 | NC | 9 |
| 8 | 15877 | SUCTION ASSISTED LIPECTOMY; TRUN | 3/1/1987 | NC | 9 |
| 8 | 15878 | SUCTION ASSISTED LIPECTOMY; UPPE | 3/1/1987 | NC | 9 |
| 8 | 15879 | SUCTION ASSISTED LIPECTOMY; LOWE | 3/1/1987 | NC | 9 |
| 8 | 15922 | EXCISION, COCCYGEAL PRESSURE ULC | 1/1/2007 | $96.22 | 3 |
| 8 | 15935 | EXCISION SACRAL PRESSURE ULCER W | 1/1/2007 | $140.08 | 3 |
| 8 | 15936 | EXCISION, SACRAL PRESSURE ULCER, | 1/1/2007 | $116.05 | 3 |
| 8 | 15937 | EXCISION SACRAL PRESSURE ULCER W | 1/1/2007 | $135.46 | 3 |
| 8 | 15946 | EXCISION, ISCHIAL PRESSURE ULCER | 1/1/2007 | $202.98 | 3 |
| 8 | 15950 | EXCISION TROCHANTERIC DECUBITUS | 1/1/2007 | $72.66 | 3 |
| 8 | 15951 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $104.16 | 3 |
| 8 | 15952 | EXCISION, TROCHANTERIC PRESSURE | 1/1/2007 | $107.64 | 3 |
| 8 | 15953 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $121.55 | 3 |
| 8 | 15956 | EXCISION, TROCHANTERIC PRESSURE | 1/1/2007 | $147.97 | 3 |
| 8 | 15958 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $149.37 | 3 |
| 8 | 15999 | UNLISTED PROCEDURE, EXCISION PRE | 9/1/1985 | $0.01 | 5 |
| 8 | 16010 | DRESSINGS AND/OR DEBRIDEMENT INI | 1/1/2006 | INVALID | N |
| 8 | 16015 | DRESSINGS AND/OR DEBRIDEMENT INI | 1/1/2006 | INVALID | N |
| 8 | 17380 | ELECTROLYSIS EPILATION EACH 1/2 | 4/1/1982 | NC | 9 |
| 8 | 17999 | UNLISTED PROCEDURE SKIN MUCOUS M | 4/1/1982 | $0.01 | 5 |
| 8 | 19140 | MASTECTOMY FOR GYNECOMASTIA | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 19160 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | INVALID | N |
| 8 | 19162 | MASTECTOMY PARTIAL (QUADRECTOMY | 1/1/2007 | INVALID | N |
| 8 | 19180 | MASTECTOMY SIMPLE COMPLETE UNILA | 1/1/2007 | INVALID | N |
| 8 | 19182 | MASTECTOMY SUBCUTANEOUS | 1/1/2007 | INVALID | N |
| 8 | 19200 | MASTECTOMY RADICAL INCLUDING BRE | 1/1/2007 | INVALID | N |
| 8 | 19220 | MASTECTOMY RADICAL INCLUDING BRE | 1/1/2007 | INVALID | N |
| 8 | 19240 | MASTECTOMY,MODIFIED RAD,INCL AXI | 1/1/2007 | INVALID | N |
| 8 | 19260 | EXCISION OF CHEST WALL TUMOR INC | 1/1/2007 | $149.11 | 3 |
| 8 | 19271 | EXCISION OF CHEST WALL TUMOR INV | 1/1/2007 | $204.95 | 3 |
| 8 | 19272 | EXCISION OF CHEST WALL TUMOR INV | 1/1/2007 | $225.71 | 3 |
| 8 | 19296 | PLACEMENT OF RADIOTHERAPY AFTERL | 1/1/2007 | $28.65 | 3 |
| 8 | 19298 | PLACEMENT OF RADIOTHERAPY AFTERL | 1/1/2007 | $252.80 | 3 |
| 8 | 19301 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | $54.08 | 3 |
| 8 | 19302 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | $113.30 | 3 |
| 8 | 19303 | MASTECTOMY, SIMPLE, COMPLETE | 1/1/2007 | $123.78 | 3 |
| 8 | 19304 | MASTECTOMY, SUBCUTANEOUS | 1/1/2007 | $71.52 | 3 |
| 8 | 19305 | MASTECTOMY, RADICAL, INCLUDING P | 1/1/2007 | $141.79 | 3 |
| 8 | 19306 | MASTECTOMY, RADICAL, INCL PECTOR | 1/1/2007 | $148.17 | 3 |
| 8 | 19307 | MASTECTOMY, MODIFIED RADICAL, IN | 1/1/2007 | $149.73 | 3 |
| 8 | 19316 | MASTOPEXY | 8/1/2003 | NC | 9 |
| 8 | 19318 | REDUCTION MAMMAPLASTY | 1/1/2007 | $154.25 | 3 |
| 8 | 19357 | BREAST RECONSTRUCTION, IMMEDIATE | 1/1/2007 | $190.58 | 3 |
| 8 | 19361 | BREAST RECONSTRUCTION W/LATISSIM | 1/1/2007 | $179.68 | 3 |
| 8 | 19364 | BREAST RECONSTRUCTION WITH FREE | 1/1/2007 | $367.30 | 3 |
| 8 | 19366 | BREAST RECONSTRUCTION WITH OTHER | 1/1/2007 | $187.36 | 3 |
| 8 | 19367 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $241.13 | 3 |
| 8 | 19368 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $295.10 | 3 |
| 8 | 19369 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $273.67 | 3 |
| 8 | 19370 | OPEN PERIPROSTHETIC CAPSULOTOMY, | 10/1/1984 | NC | 9 |
| 8 | 19396 | PREPARATION OF MOULAGE FOR CUSTO | 10/1/1984 | NC | 9 |
| 8 | 19499 | UNLISTED PROCEDURE BREAST | 2/1/1994 | $0.01 | 5 |
| 8 | 20100 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $81.69 | 3 |
| 8 | 20101 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $49.82 | 3 |
| 8 | 20102 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $61.76 | 3 |
| 8 | 20103 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $75.98 | 3 |
| 8 | 20150 | EXCISION OF EPIPHYSEAL BAR, W/OR | 1/1/2007 | $118.07 | 3 |
| 8 | 20245 | BIOPSY, BONE, OPEN; DEEP (EG, HU | 1/1/2007 | $81.33 | 3 |
| 8 | 20251 | BIOPSY VERTEBRAL BODY OPEN; LUMB | 1/1/2007 | $56.42 | 3 |
| 8 | 20650 | INSERTION OF WIRE OR PIN WITH AP | 1/1/2007 | $25.48 | 3 |
| 8 | 20680 | REMOVAL OF INPLANT; DEEP (EG BUR | 1/1/2007 | $65.96 | 3 |
| 8 | 20692 | APPLICATION OF A MULTIPLANE (PIN | 1/1/2007 | $58.28 | 3 |
| 8 | 20802 | REPLANTATION ARM (INCLUDES SURGI | 1/1/2007 | $342.07 | 3 |
| 8 | 20805 | REPLANTATION FOREARM (INCLUDES R | 1/1/2007 | $462.84 | 3 |
| 8 | 20808 | REPLANTATION HAND (INCLUDES HAND | 1/1/2007 | $574.84 | 3 |
| 8 | 20816 | REPLANTATION DIGIT EXCL THUMB (I | 1/1/2007 | $380.48 | 3 |
| 8 | 20822 | REPLANTATION DIGIT EXCLUDING THU | 1/1/2007 | $334.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 20824 | REPLANTATION THUMB (INCLUDES CAR | 1/1/2007 | $374.46 | 3 |
| 8 | 20827 | REPLANTATION THUMB (INCLUDES DIS | 1/1/2007 | $345.71 | 3 |
| 8 | 20838 | REPLANTATION FOOT COMPLETE AMPUT | 1/1/2007 | $336.36 | 3 |
| 8 | 20900 | BONE GRAFT ANY DONOR AREA MINOR | 1/1/2007 | $77.64 | 3 |
| 8 | 20902 | BONE GRAFT ANY DONOR AREA; MAJOR | 1/1/2007 | $81.69 | 3 |
| 8 | 20920 | FASCIA LATA GRAFT BY STRIPPER | 1/1/2007 | $52.89 | 3 |
| 8 | 20922 | BASCIA LATA GRAFT; BY INCISION A | 1/1/2007 | $77.12 | 3 |
| 8 | 20924 | TENDON GRAFT FROM A DISTANCE (EG | 1/1/2007 | $69.60 | 3 |
| 8 | 20931 | ALLOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $16.45 | 3 |
| 8 | 20936 | AUTOGRAFT FOR SPINE SURGERY ONLY | 8/1/2003 | $24.70 | 3 |
| 8 | 20937 | AUTOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $24.81 | 3 |
| 8 | 20938 | AUTOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $27.09 | 3 |
| 8 | 20955 | FIBULA GRAFT WITH MICROVASCULAR | 1/1/2007 | $354.89 | 3 |
| 8 | 20956 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $368.65 | 3 |
| 8 | 20957 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $345.81 | 3 |
| 8 | 20962 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $375.55 | 3 |
| 8 | 20969 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $391.07 | 3 |
| 8 | 20970 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $389.51 | 3 |
| 8 | 20972 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $357.44 | 3 |
| 8 | 20973 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $396.83 | 3 |
| 8 | 20975 | ELECTRICAL STIMULATION TO AID BO | 1/1/2007 | $25.02 | 3 |
| 8 | 20982 | ABLATION, BONE TUMOR(S) (EG, OST | 4/1/2004 | NC | 9 |
| 8 | 20999 | UNLISTED PROCEDURE MUSCULOSKELET | 2/1/1994 | $0.01 | 5 |
| 8 | 21034 | EXCISION OF MALIGNANT TUMOR OF M | 1/1/2007 | $175.58 | 3 |
| 8 | 21041 | EXCISION OF BENIGN CYST OR TUMOR | 7/1/2003 | INVALID | N |
| 8 | 21044 | EXCISION OF MALIGNANT TUMOR OF M | 1/1/2007 | $116.05 | 3 |
| 8 | 21045 | EXCISION OF MALIGNANT TUMOR OF M | 1/1/2007 | $156.01 | 3 |
| 8 | 21046 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $138.88 | 3 |
| 8 | 21047 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $178.12 | 3 |
| 8 | 21048 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $142.26 | 3 |
| 8 | 21049 | EXCISION OF BENIGN TUMOR OR CYST | 1/1/2007 | $169.30 | 3 |
| 8 | 21060 | MENISCECTOMY, PARTIAL OR COMPLET | 1/1/2007 | $104.94 | 3 |
| 8 | 21121 | GENIOPLASTY; SLIDING OSTEOTOMY, | 1/1/2007 | $94.93 | 3 |
| 8 | 21137 | REDUCTION FOREHEAD; CONTOURING O | 1/1/2007 | $97.99 | 3 |
| 8 | 21138 | REDUCTION FOREHEAD; CONTOURING A | 1/1/2007 | $121.81 | 3 |
| 8 | 21139 | REDUCTION FOREHEAD; CONTOURING A | 1/1/2007 | $139.40 | 3 |
| 8 | 21141 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $177.03 | 3 |
| 8 | 21142 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $176.56 | 3 |
| 8 | 21143 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $184.56 | 3 |
| 8 | 21145 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $190.42 | 3 |
| 8 | 21146 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $203.14 | 3 |
| 8 | 21147 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $200.70 | 3 |
| 8 | 21150 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $231.27 | 3 |
| 8 | 21151 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $278.08 | 3 |
| 8 | 21154 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $291.37 | 3 |
| 8 | 21155 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $337.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 21159 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $413.44 | 3 |
| 8 | 21160 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $405.08 | 3 |
| 8 | 21172 | RECONSTRUCTION SUPERIOR-LATERAL | 1/1/2007 | $234.07 | 3 |
| 8 | 21175 | RECONSTRUCTION,BIFRONTAL,SUPERIO | 1/1/2007 | $289.55 | 3 |
| 8 | 21179 | RECONSTRUCTION, ENTIRE OR MAJORI | 1/1/2007 | $203.40 | 3 |
| 8 | 21180 | RECONSTRUCTION, ENTIRE OR MAJORI | 1/1/2007 | $228.62 | 3 |
| 8 | 21182 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $280.83 | 3 |
| 8 | 21183 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $314.62 | 3 |
| 8 | 21184 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $341.92 | 3 |
| 8 | 21188 | RECONSTRUCTION MIDFACE,OSTEOTOMI | 1/1/2007 | $223.38 | 3 |
| 8 | 21193 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $166.29 | 3 |
| 8 | 21194 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $184.87 | 3 |
| 8 | 21195 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $174.95 | 3 |
| 8 | 21196 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $190.42 | 3 |
| 8 | 21198 | OSTEOTOMY, MANDIBLE, SEGMENTAL | 1/1/2007 | $146.98 | 3 |
| 8 | 21199 | OSTEOTOMY, MANDIBLE, SEGMENTAL; | 1/1/2007 | $137.59 | 3 |
| 8 | 21206 | OSTEOTOMY,MAXILLA,SEGMENTAL (EG, | 1/1/2007 | $145.74 | 3 |
| 8 | 21209 | OSTEOPLASTY, FACIAL BONES; REDUC | 1/1/2007 | $95.70 | 3 |
| 8 | 21240 | ARTHROPLASTY,TEMPOROMANDIBULAR J | 1/1/2007 | $147.14 | 3 |
| 8 | 21242 | ARTHROPLASTY, TEMPOROMANDIBULAR | 1/1/2007 | $136.24 | 3 |
| 8 | 21243 | ARTHROPLASTY, TEMPOROMANDIBULAR | 1/1/2007 | $215.33 | 3 |
| 8 | 21244 | RECONSTRUCTION OF MANDIBLE, EXTR | 1/1/2007 | $130.89 | 3 |
| 8 | 21245 | RECONSTRUCTION OF MANDIBLE OR MA | 1/1/2007 | $142.57 | 3 |
| 8 | 21246 | RECONSTRUCTION OF MANDIBLE OR MA | 1/1/2007 | $118.70 | 3 |
| 8 | 21247 | RECONSTRUCTION OF MANDIBULAR CON | 1/1/2007 | $222.29 | 3 |
| 8 | 21255 | RECONSTRUCTION OF ZYGOMATIC ARCH | 1/1/2007 | $182.95 | 3 |
| 8 | 21256 | RECONSTRUCTION OF ORBIT W/OSTEOT | 1/1/2007 | $153.21 | 3 |
| 8 | 21260 | ORBITAL HYPERTELORISM CORRECTION | 1/1/2007 | $157.10 | 3 |
| 8 | 21261 | PERIORBITAL OSTEOTOMIES FOR ORBI | 1/1/2007 | $307.04 | 3 |
| 8 | 21263 | PERIORBITAL OSTEOTOMIES FOR ORBI | 1/1/2007 | $260.17 | 3 |
| 8 | 21267 | ORBITAL REPOSITIONING PERIORBITA | 1/1/2007 | $209.68 | 3 |
| 8 | 21268 | ORBITAL REPOSITIONING PERIORBITA | 1/1/2007 | $250.99 | 3 |
| 8 | 21270 | MALAR AUGMENTATION, PROSTHETIC M | 1/1/2007 | $117.35 | 3 |
| 8 | 21275 | SECONDARY REVISION FOR ORBITOCRA | 1/1/2007 | $107.38 | 3 |
| 8 | 21300 | TREATMENT OF CLOSED SKULL FRACTU | 1/1/2007 | INVALID | N |
| 8 | 21339 | OPEN TREATMENT OF NASOETHMOID FR | 1/1/2007 | $119.27 | 3 |
| 8 | 21343 | OPEN TREATMENT OF DEPRESSED FRON | 1/1/2007 | $155.23 | 3 |
| 8 | 21344 | OPEN TREATMENT OF COMPLICATED FR | 1/1/2007 | $200.70 | 3 |
| 8 | 21347 | OPEN TREATMENT OF NASOMAXILLARY | 1/1/2007 | $157.67 | 3 |
| 8 | 21348 | OPEN TREATMENT OF NASOMAXILLARY | 1/1/2007 | $157.15 | 3 |
| 8 | 21360 | OPEN TREATMENT OF DEPRESSED MALA | 1/1/2007 | $68.20 | 3 |
| 8 | 21365 | OPEN TREATMENT OF COMPLICATED FR | 1/1/2007 | $142.62 | 3 |
| 8 | 21366 | OPEN TREATMENT OF COMPLICATED FR | 1/1/2007 | $163.95 | 3 |
| 8 | 21385 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $95.60 | 3 |
| 8 | 21386 | OPEN TREATMENT OF ORBITAL "BLOWO | 1/1/2007 | $89.32 | 3 |
| 8 | 21387 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $102.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 21390 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $97.73 | 3 |
| 8 | 21395 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $120.15 | 3 |
| 8 | 21401 | TREATMENT OF FRACTURE OF ORBIT E | 1/1/2007 | $60.46 | 3 |
| 8 | 21406 | OPEN TREATMENT OF FRACTURE OF OR | 1/1/2007 | $71.78 | 3 |
| 8 | 21407 | OPEN TREATMENT OF FRACTURE OF OR | 1/1/2007 | $85.22 | 3 |
| 8 | 21408 | OPEN TREATMENT OF FRACTURE OF OR | 1/1/2007 | $117.86 | 3 |
| 8 | 21422 | OPEN TREATMENT OF PALATAL OR MAX | 1/1/2007 | $90.31 | 3 |
| 8 | 21423 | OPEN TREATMENT OF PALATAL OR MAX | 1/1/2007 | $108.99 | 3 |
| 8 | 21431 | CLOSED TREATMENT OF CRANIOFACIAL | 1/1/2007 | $89.74 | 3 |
| 8 | 21432 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $90.77 | 3 |
| 8 | 21433 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $231.16 | 3 |
| 8 | 21435 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $165.77 | 3 |
| 8 | 21436 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $256.18 | 3 |
| 8 | 21445 | OPEN TREATMENT OF MANDIBULAR OR | 1/1/2007 | $82.68 | 3 |
| 8 | 21454 | OPEN TREATMENT OF MANDIBULAR FRA | 1/1/2007 | $70.32 | 3 |
| 8 | 21461 | OPEN TREATMENT OF MANDIBULAR FRA | 1/1/2007 | $112.93 | 3 |
| 8 | 21462 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $123.52 | 3 |
| 8 | 21465 | OPEN TREATMENT OF MANDIBULAR CON | 1/1/2007 | $120.56 | 3 |
| 8 | 21470 | OPEN TREATMENT OF COMPLICATED MA | 1/1/2007 | $152.22 | 3 |
| 8 | 21490 | OPEN TREATMENT OF TEMPOROMANDIBU | 1/1/2007 | $122.07 | 3 |
| 8 | 21493 | CLOSED TREATMENT OF HYOID FRACTU | 1/1/2006 | INVALID | N |
| 8 | 21494 | TREATMENT OF CLOSED OR OPEN HYOI | 1/1/2006 | INVALID | N |
| 8 | 21495 | OPEN TREATMENT OF HYOID FRACTURE | 1/1/2007 | $75.67 | 3 |
| 8 | 21502 | INCISION AND DRAINAGE DEEP ABSCE | 1/1/2007 | $71.26 | 3 |
| 8 | 21557 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $79.51 | 3 |
| 8 | 21600 | EXCISION OF RIB PARTIAL | 1/1/2007 | $70.69 | 3 |
| 8 | 21610 | COSTOTRANSVERSECTOMY (SEPARATE P | 1/1/2007 | $137.79 | 3 |
| 8 | 21615 | EXCISION FIRST AND/OR CERVICAL R | 1/1/2007 | $93.47 | 3 |
| 8 | 21616 | EXCISION FIRST AND/OR CERVICAL R | 1/1/2007 | $113.76 | 3 |
| 8 | 21620 | OSTECTOMY OF STERNUM PARTIAL | 1/1/2007 | $71.36 | 3 |
| 8 | 21627 | STERNAL DEBRIDEMENT | 1/1/2007 | $73.39 | 3 |
| 8 | 21630 | RADICAL RESECTION OF STERNUM | 1/1/2007 | $165.04 | 3 |
| 8 | 21632 | RADICAL RESECTION OF STERNUM; WI | 1/1/2007 | $165.56 | 3 |
| 8 | 21685 | HYOID MYOTOMY AND SUSPENSION | 4/1/2004 | NC | 9 |
| 8 | 21700 | DIVISION OF SCALENUS ANTICUS WIT | 1/1/2007 | $56.83 | 3 |
| 8 | 21705 | DIVISION OF SCALENUS ANTICUS; WI | 1/1/2007 | $86.26 | 3 |
| 8 | 21720 | DIVISION OF STERNOCLEIDOMASTOID | 1/1/2007 | $46.97 | 3 |
| 8 | 21725 | DIVISION OF STERNOCLEIDOMASTOID | 1/1/2007 | $70.84 | 3 |
| 8 | 21740 | RECONSTRUCTIVE REPAIR OF PECTUS | 1/1/2007 | $142.10 | 3 |
| 8 | 21750 | CLOSURE OF MEDIAN STERNOTOMY SEP | 1/1/2007 | $96.07 | 3 |
| 8 | 21810 | TREATMENT OF RIB FRACTURE REQUIR | 1/1/2007 | $66.28 | 3 |
| 8 | 21825 | OPEN TREATMENT OF STERNUM FRACTU | 1/1/2007 | $77.43 | 3 |
| 8 | 22100 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $100.69 | 3 |
| 8 | 22101 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $101.05 | 3 |
| 8 | 22102 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $102.76 | 3 |
| 8 | 22103 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $20.71 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 22110 | PART EXCISION OF VERT BODY, CERV | 1/1/2007 | $128.04 | 3 |
| 8 | 22112 | PART EXCISION OF VERT BODY, THOR | 1/1/2007 | $127.73 | 3 |
| 8 | 22114 | PART EXCISION OF VERT BODY, LUMB | 1/1/2007 | $128.19 | 3 |
| 8 | 22116 | PART EXCISION OF VERT BODY, EA A | 1/1/2007 | $20.71 | 3 |
| 8 | 22210 | OSTEOTOMY OF SPINE, POSTERIOR OR | 1/1/2007 | $231.84 | 3 |
| 8 | 22214 | OSTEOTOMY OF SPINE, POSTERIOR AP | 1/1/2007 | $192.96 | 3 |
| 8 | 22216 | OSTEOTOMY OF SPINE, POSTERIOR OR | 1/1/2007 | $54.29 | 3 |
| 8 | 22220 | OSTEOTOMY OF SPINE, INCLUDING DI | 1/1/2007 | $207.91 | 3 |
| 8 | 22222 | OSTEOTOMY OF SPINE, ANTERIOR APP | 1/1/2007 | $190.84 | 3 |
| 8 | 22224 | OSTEOTOMY OF SPINE, ANTERIOR APP | 1/1/2007 | $207.24 | 3 |
| 8 | 22226 | OSTEOTOMY OF SPINE, INCLUDING DI | 1/1/2007 | $54.08 | 3 |
| 8 | 22318 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $208.48 | 3 |
| 8 | 22319 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $232.20 | 3 |
| 8 | 22325 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $177.76 | 3 |
| 8 | 22326 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $190.58 | 3 |
| 8 | 22327 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $184.50 | 3 |
| 8 | 22328 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $40.53 | 3 |
| 8 | 22532 | ARTHRODESIS, LATERAL EXTRACAVITA | 1/1/2007 | $224.00 | 3 |
| 8 | 22533 | ARTHRODESIS, LATERAL EXTRACAVITA | 1/1/2007 | $206.93 | 3 |
| 8 | 22534 | ARTHRODESIS, LATERAL EXTRACAVITA | 1/1/2007 | $53.35 | 3 |
| 8 | 22548 | ARTHRODESIS, ANTERIOR TRANSORAL | 1/1/2007 | $245.07 | 3 |
| 8 | 22554 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $183.83 | 3 |
| 8 | 22556 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $220.73 | 3 |
| 8 | 22558 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $201.01 | 3 |
| 8 | 22585 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $49.67 | 3 |
| 8 | 22590 | ARTHRODESIS, POSTERIOR TECHNIQUE | 1/1/2007 | $200.44 | 3 |
| 8 | 22595 | ARTHRODESIS, POSTERIOR TECHNIQUE | 1/1/2007 | $190.11 | 3 |
| 8 | 22600 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $161.20 | 3 |
| 8 | 22610 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $160.68 | 3 |
| 8 | 22612 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $205.89 | 3 |
| 8 | 22614 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $57.97 | 3 |
| 8 | 22630 | ARTHRODESIS, POSTERIOR INTERBODY | 1/1/2007 | $203.29 | 3 |
| 8 | 22632 | ARTHRODESIS, POSTERIOR INTERBODY | 1/1/2007 | $46.97 | 3 |
| 8 | 22800 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $180.51 | 3 |
| 8 | 22802 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $293.91 | 3 |
| 8 | 22804 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $342.33 | 3 |
| 8 | 22808 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $246.53 | 3 |
| 8 | 22810 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $279.01 | 3 |
| 8 | 22812 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $301.28 | 3 |
| 8 | 22818 | KYPHECTOMY, CIRCUMFERENTIAL EXPO | 1/1/2007 | $296.61 | 3 |
| 8 | 22819 | KYPHECTOMY, CIRCUMFERENTIAL EXPO | 1/1/2007 | $332.94 | 3 |
| 8 | 22830 | EXPLORATION OF SPINAL FUSION | 1/1/2007 | $109.51 | 3 |
| 8 | 22840 | POSTERIOR NON-SEGMENTAL INSTRUME | 1/1/2007 | $113.19 | 3 |
| 8 | 22841 | INTERNAL SPINAL FIXATION BY WIRI | 1/1/1996 | $0.01 | 5 |
| 8 | 22842 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $113.25 | 3 |
| 8 | 22843 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $118.90 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 22844 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $147.29 | 3 |
| 8 | 22845 | ANTERIOR INSTRUMENTATION; 2 TO 3 | 1/1/2007 | $108.37 | 3 |
| 8 | 22846 | ANTERIOR INSTRUMENTATION; 4 TO 7 | 1/1/2007 | $112.62 | 3 |
| 8 | 22847 | ANTERIOR INSTRUMENTATION; 8 OR M | 1/1/2007 | $123.57 | 3 |
| 8 | 22848 | PELVIC FIXATION (ATTACHMENT OF C | 1/1/2007 | $53.61 | 3 |
| 8 | 22849 | REINSERTION OF SPINAL FIXATION D | 1/1/2007 | $177.13 | 3 |
| 8 | 22850 | REMOVAL OF POSTERIOR NONSEGMENTA | 1/1/2007 | $96.33 | 3 |
| 8 | 22851 | APPLICATION OF PROSTHETIC DEVICE | 1/1/2007 | $60.00 | 3 |
| 8 | 22852 | REMOVAL OF POSTERIOR SEGMENTAL I | 1/1/2007 | $91.86 | 3 |
| 8 | 22855 | REMOVAL OF ANTERIOR INSTRUMENTAT | 1/1/2007 | $146.93 | 3 |
| 8 | 22857 | TOTAL DISC ARTHROPLASTY, ANTERIO | 1/1/2007 | NC | 9 |
| 8 | 22862 | REVISION INCL REPLACEMENT OF TOT | 1/1/2007 | NC | 9 |
| 8 | 22865 | REMOVAL OF TOTAL DISC ARTHROPLAS | 1/1/2007 | NC | 9 |
| 8 | 22899 | UNLISTED PROCEDURE SPINE | 2/1/1994 | $0.01 | 5 |
| 8 | 22900 | EXCISION ABDOMINAL WALL TUMOR SU | 1/1/2007 | $50.76 | 3 |
| 8 | 23000 | REMOVAL OF SUBDELTOID CALCAREOUS | 1/1/2007 | $70.48 | 3 |
| 8 | 23020 | CAPSULAR CONTRACTURE RELEASE (SE | 1/1/2007 | $93.63 | 3 |
| 8 | 23035 | INCISION DEEP WITH OPENING OF CO | 1/1/2007 | $95.29 | 3 |
| 8 | 23040 | ARTHROTOMY GLENOHUMERAL JOINT FO | 1/1/2007 | $96.90 | 3 |
| 8 | 23044 | ARTHROTOMY ACROMIOCLAVICULAR STE | 1/1/2007 | $76.81 | 3 |
| 8 | 23077 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $148.64 | 3 |
| 8 | 23100 | ARTHROTOMY WITH BIOPSY, GLENOHUM | 1/1/2007 | $66.07 | 3 |
| 8 | 23101 | ARTHROTOMY WITH BIOPSY, OR W/EXC | 1/1/2007 | $61.66 | 3 |
| 8 | 23105 | ARTHROTOMY WITH SYNOVECTOMY; GLE | 1/1/2007 | $87.09 | 3 |
| 8 | 23106 | ARTHROTOMY FOR SYNOVECTOMY STERN | 1/1/2007 | $65.71 | 3 |
| 8 | 23107 | ARTHROTOMY, GLENOHUMERAL JOINT, | 1/1/2007 | $90.88 | 3 |
| 8 | 23120 | CLAVICULECTOMY PARTIAL | 1/1/2007 | $76.86 | 3 |
| 8 | 23125 | CLAVICULECTOMY; TOTAL | 1/1/2007 | $96.43 | 3 |
| 8 | 23130 | ACROMIOPLASTY OR ACROMIONECTOMY, | 1/1/2007 | $82.99 | 3 |
| 8 | 23145 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $93.58 | 3 |
| 8 | 23150 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $86.83 | 3 |
| 8 | 23155 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $106.29 | 3 |
| 8 | 23156 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $91.19 | 3 |
| 8 | 23170 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $72.71 | 3 |
| 8 | 23172 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $73.70 | 3 |
| 8 | 23174 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $101.36 | 3 |
| 8 | 23180 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $98.66 | 3 |
| 8 | 23182 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $93.84 | 3 |
| 8 | 23184 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $105.56 | 3 |
| 8 | 23190 | OSTECTOMY OF SCAPULA PARTIAL (EG | 1/1/2007 | $75.72 | 3 |
| 8 | 23195 | RESECTION HUMERAL HEAD | 1/1/2007 | $99.91 | 3 |
| 8 | 23200 | RADICAL RESECTION FOR TUMOR CLAV | 1/1/2007 | $118.02 | 3 |
| 8 | 23210 | RADICAL RESECTION FOR TUMOR; SCA | 1/1/2007 | $122.02 | 3 |
| 8 | 23220 | RADICAL RESECTION FOR TUMOR PROX | 1/1/2007 | $144.65 | 3 |
| 8 | 23221 | RADICAL RESECTION FOR TUMOR PROX | 1/1/2007 | $168.73 | 3 |
| 8 | 23222 | RADICAL RESECTION FOR TUMOR PROX | 1/1/2007 | $226.54 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 23332 | REMOVAL OF FOREIGN BODY; COMPLIC | 1/1/2007 | $119.21 | 3 |
| 8 | 23395 | MUSCLE TRANSFER, ANY TYPE, SHOUL | 1/1/2007 | $169.45 | 3 |
| 8 | 23397 | MUSCLE TRANSFER ANY TYPE FOR PAR | 1/1/2007 | $156.95 | 3 |
| 8 | 23400 | SCAPULOPEXY (EG SPRENGELS DEFORM | 1/1/2007 | $134.47 | 3 |
| 8 | 23405 | TENOMYOTOMY SINGLE | 1/1/2007 | $86.93 | 3 |
| 8 | 23406 | TENOMYOTOMY; MULTIPLE THROUGH SA | 1/1/2007 | $108.99 | 3 |
| 8 | 23410 | REPAIR OF RUPTURED MUSCULOTENDIN | 1/1/2007 | $124.66 | 3 |
| 8 | 23412 | REPAIR OF RUPTURED SUPRASPINATUS | 1/1/2007 | $132.45 | 3 |
| 8 | 23415 | CORACOACROMIAL LIGAMENT RELEASE, | 1/1/2007 | $102.24 | 3 |
| 8 | 23420 | REPAIR OF COMPLETE SHOULDER (ROT | 1/1/2007 | $137.33 | 3 |
| 8 | 23430 | TENODESIS OF LONG TENDON OF BICE | 1/1/2007 | $102.87 | 3 |
| 8 | 23440 | RESECTION OR TRANSPLANTATION OF | 1/1/2007 | $106.71 | 3 |
| 8 | 23450 | CAPSULORRHAPHY, ANTERIOR; PUTTI- | 1/1/2007 | $132.71 | 3 |
| 8 | 23455 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $141.74 | 3 |
| 8 | 23460 | CAPSULORRHAPHY, ANTERIOR, ANY TY | 1/1/2007 | $152.64 | 3 |
| 8 | 23462 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $148.69 | 3 |
| 8 | 23465 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $154.66 | 3 |
| 8 | 23466 | CAPSULORRHAPHY WITH ANY TYPE MUL | 1/1/2007 | $145.63 | 3 |
| 8 | 23470 | ARTHROPLASTY WITH PROXIMAL HUMER | 1/1/2007 | $168.10 | 3 |
| 8 | 23472 | ARTHROPLASTY WITH GLENOID AND PR | 1/1/2007 | $203.34 | 3 |
| 8 | 23480 | OSTEOTOMY CLAVICLE WITH OR WITHO | 1/1/2007 | $113.66 | 3 |
| 8 | 23485 | OSTEOTOMY CLAVICLE WITH OR WITHO | 1/1/2007 | $133.18 | 3 |
| 8 | 23490 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $114.34 | 3 |
| 8 | 23491 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $142.15 | 3 |
| 8 | 23515 | OPEN TREATMENT OF CLAVICULAR FRA | 1/1/2007 | $79.15 | 3 |
| 8 | 23530 | OPEN TREATMENT OF STERNOCLAVICUL | 1/1/2007 | $75.00 | 3 |
| 8 | 23532 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $84.96 | 3 |
| 8 | 23550 | OPEN TREATMENT OF ACROMIOCLAVICU | 1/1/2007 | $77.18 | 3 |
| 8 | 23552 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $89.48 | 3 |
| 8 | 23585 | OPEN TREATMENT OF SCAPULAR FRACT | 1/1/2007 | $94.20 | 3 |
| 8 | 23615 | OPEN TREATMENT OF PROXIMAL HUMER | 1/1/2007 | $102.87 | 3 |
| 8 | 23616 | OPEN TREATMENT OF PROXIMAL HUMER | 1/1/2007 | $202.98 | 3 |
| 8 | 23630 | OPEN TREATMENT OF GREATER TUBERO | 1/1/2007 | $79.20 | 3 |
| 8 | 23660 | OPEN TREATMENT OF ACUTE SHOULDER | 1/1/2007 | $78.73 | 3 |
| 8 | 23670 | OPEN TREATMENT OF SHOULDER DISLO | 1/1/2007 | $83.56 | 3 |
| 8 | 23680 | OPEN TREATMENT OF SHOULDER DISLO | 1/1/2007 | $103.38 | 3 |
| 8 | 23800 | ARTHRODESIS SHOULDER JOINT WITH | 1/1/2007 | $139.77 | 3 |
| 8 | 23802 | ARTHRODISIS SHOULDER JOINT; WITH | 1/1/2007 | $153.00 | 3 |
| 8 | 23900 | INTERTHORACOSCAPULAR AMPUTATION | 1/1/2007 | $179.63 | 3 |
| 8 | 23920 | DISARTICULATION OF SHOULDER | 1/1/2007 | $140.13 | 3 |
| 8 | 23921 | DISARTICULATION OF SHOULDER; SEC | 1/1/2007 | $58.91 | 3 |
| 8 | 23929 | UNLISTED PROCEDURE SHOULDER | 2/1/1994 | $0.01 | 5 |
| 8 | 24006 | ARTHROTOMY OF THE ELBOW, WITH CA | 1/1/2007 | $96.38 | 3 |
| 8 | 24077 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $110.13 | 3 |
| 8 | 24100 | ARTHROTOMY, ELBOW; WITH SYNOVIAL | 1/1/2007 | $53.46 | 3 |
| 8 | 24101 | ARTHROTOMY, ELBOW; W/JOINT EXPLO | 1/1/2007 | $67.99 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 24102 | ARTHROTOMY, ELBOW; WITH SYNOVECT | 1/1/2007 | $84.23 | 3 |
| 8 | 24115 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $96.12 | 3 |
| 8 | 24116 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $119.06 | 3 |
| 8 | 24125 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $78.47 | 3 |
| 8 | 24126 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $85.64 | 3 |
| 8 | 24130 | EXCISION RADIAL HEAD | 1/1/2007 | $69.13 | 3 |
| 8 | 24134 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $105.05 | 3 |
| 8 | 24136 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $86.15 | 3 |
| 8 | 24138 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $89.16 | 3 |
| 8 | 24140 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $102.81 | 3 |
| 8 | 24145 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $87.71 | 3 |
| 8 | 24149 | RADICAL RESECTION OF CAPSULE, SO | 1/1/2007 | $146.20 | 3 |
| 8 | 24150 | RADICAL RESECTION FOR TUMOR SHAF | 1/1/2007 | $132.81 | 3 |
| 8 | 24151 | RADICAL RESECTION FOR TUMOR SHAF | 1/1/2007 | $154.09 | 3 |
| 8 | 24152 | RADICAL RESECTION FOR TUMOR RADI | 1/1/2007 | $100.01 | 3 |
| 8 | 24155 | RESECTION OF ELBOW JOINT (ARTHRE | 1/1/2007 | $114.44 | 3 |
| 8 | 24160 | IMPLANT REMOVAL ELBOW JOINT | 1/1/2007 | $83.20 | 3 |
| 8 | 24164 | IMPLANT REMOVAL; RADIAL HEAD | 1/1/2007 | $67.68 | 3 |
| 8 | 24301 | MUSCLE OR TENDON TRANSFER ANY TY | 1/1/2007 | $104.01 | 3 |
| 8 | 24320 | TENOPLASTY WITH MUSCLE TRANSFER | 1/1/2007 | $102.87 | 3 |
| 8 | 24330 | FLEXOR-PLASTY ELBOW (EG STEINDLE | 1/1/2007 | $99.08 | 3 |
| 8 | 24331 | FLEXOR-PLASTY ELBOW (EG STEINDLE | 1/1/2007 | $109.51 | 3 |
| 8 | 24340 | TENODESIS OF BICEPS TENDON AT EL | 1/1/2007 | $84.29 | 3 |
| 8 | 24341 | REPAIR, TENDON OR MUSCLE, UPPER | 1/1/2007 | $89.22 | 3 |
| 8 | 24342 | REINSERTION OF RUPTURED BICEPS O | 1/1/2007 | $108.94 | 3 |
| 8 | 24352 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $71.21 | 3 |
| 8 | 24354 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $71.15 | 3 |
| 8 | 24360 | ARTHROPLASTY ELBOW WITH MEMBRANE | 1/1/2007 | $123.89 | 3 |
| 8 | 24361 | ARTHROPLASTY ELBOW; WITH DISTAL | 1/1/2007 | $139.35 | 3 |
| 8 | 24362 | ARTHROPLASTY ELBOW; WITH INPLANT | 1/1/2007 | $143.45 | 3 |
| 8 | 24363 | ARTHROPLASTY ELBOW; WITH DISTAL | 1/1/2007 | $182.79 | 3 |
| 8 | 24365 | ARTHROPLASTY RADIAL HEAD | 1/1/2007 | $88.28 | 3 |
| 8 | 24366 | ARTHROPLASTY RADIAL HEAD; WITH I | 1/1/2007 | $94.46 | 3 |
| 8 | 24400 | OSTEOTOMY HUMERUS WITH OR WITHOU | 1/1/2007 | $113.35 | 3 |
| 8 | 24410 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $143.81 | 3 |
| 8 | 24420 | OSTEOPLASTY HUMERUS (EG SHORTENI | 1/1/2007 | $135.77 | 3 |
| 8 | 24430 | REPAIR OF NONUNION OR MALUNION H | 1/1/2007 | $128.56 | 3 |
| 8 | 24435 | REPAIR OF NONUNION OR MALUNION H | 1/1/2007 | $136.65 | 3 |
| 8 | 24470 | HEMIEPIPHYSEAL ARREST (EG FOR CU | 1/1/2007 | $93.16 | 3 |
| 8 | 24498 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $120.67 | 3 |
| 8 | 24515 | OPEN TREATMENT OF HUMERAL SHAFT | 1/1/2007 | $119.68 | 3 |
| 8 | 24516 | TREATMENT OF HUMERAL SHAFT FRACT | 1/1/2007 | $118.28 | 3 |
| 8 | 24538 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $102.71 | 3 |
| 8 | 24545 | OPEN TREATMENT OF HUMERAL SUPRAC | 1/1/2007 | $107.59 | 3 |
| 8 | 24546 | OPEN TREATMENT OF HUMERAL SUPRAC | 1/1/2007 | $154.40 | 3 |
| 8 | 24565 | TREATMENT OF CLOSED EPICONDYLAR | 1/1/2007 | $68.04 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 24575 | OPEN TREATMENT OF HUMERAL EPICON | 1/1/2007 | $108.57 | 3 |
| 8 | 24579 | OPEN TREATMENT OF HUMERAL CONDYL | 1/1/2007 | $116.57 | 3 |
| 8 | 24586 | OPEN TREATMENT OF PERIARTICULAR | 1/1/2007 | $150.98 | 3 |
| 8 | 24587 | OPEN TREATMENT OF PERIARTICULAR | 1/1/2007 | $149.00 | 3 |
| 8 | 24615 | OPEN TREATMENT OF ACUTE OR CHRON | 1/1/2007 | $97.83 | 3 |
| 8 | 24635 | OPEN TREATMENT OF MONTEGGIA TYPE | 1/1/2007 | $153.31 | 3 |
| 8 | 24665 | OPEN TREATMENT OF RADIAL HEAD OR | 1/1/2007 | $88.59 | 3 |
| 8 | 24666 | OPEN TREATMENT OF RADIAL HEAD OR | 1/1/2007 | $99.60 | 3 |
| 8 | 24685 | OPEN TREATMENT OF ULNAR FRACTURE | 1/1/2007 | $92.64 | 3 |
| 8 | 24800 | ARTHRODESIS ELBOW JOINT WITH OR | 1/1/2007 | $112.00 | 3 |
| 8 | 24802 | ARTHRODESIS ELBOW JOINT; WITH PR | 1/1/2007 | $137.28 | 3 |
| 8 | 24900 | AMPUTATION ARM THROUGH HUMERUS W | 1/1/2007 | $94.46 | 3 |
| 8 | 24920 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $93.94 | 3 |
| 8 | 24925 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $74.22 | 3 |
| 8 | 24930 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $99.44 | 3 |
| 8 | 24931 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $105.51 | 3 |
| 8 | 24940 | CINEPLASTY UPPER EXTREMITY COMPL | 10/1/2000 | $174.31 | 3 |
| 8 | 25085 | CAPSULOTOMY WRIST (EG FOR CONTRA | 1/1/2007 | $69.96 | 3 |
| 8 | 25107 | ARTHROTOMY DISTAL RADIOULNAR JOI | 1/1/2007 | $81.85 | 3 |
| 8 | 25119 | SYNOVECTOMY EXTENSOR TENDON SHEA | 1/1/2007 | $75.83 | 3 |
| 8 | 25126 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $113.45 | 3 |
| 8 | 25135 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $80.08 | 3 |
| 8 | 25136 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $70.58 | 3 |
| 8 | 25145 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $101.00 | 3 |
| 8 | 25151 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $110.65 | 3 |
| 8 | 25170 | RADICAL RESECTION FOR TUMOR RADI | 1/1/2007 | $145.48 | 3 |
| 8 | 25215 | CARPECTOMY; ALL BONES OR PROXIMA | 1/1/2007 | $92.64 | 3 |
| 8 | 25250 | REMOVAL OF WRIST PROSTHESIS (SEP | 1/1/2007 | $71.21 | 3 |
| 8 | 25251 | REMOVAL OF WRIST PROSTHESIS; COM | 1/1/2007 | $97.36 | 3 |
| 8 | 25263 | REPAIR TENDON OR MUSCLE FLEXOR; | 1/1/2007 | $115.69 | 3 |
| 8 | 25265 | REPAIR TENDON OR MUSCLE FLEXOR S | 1/1/2007 | $133.33 | 3 |
| 8 | 25300 | TENODESIS AT WRIST FLEXORS OF FI | 1/1/2007 | $96.12 | 3 |
| 8 | 25301 | TENODESIS AT WRIST; EXTENSORS OF | 1/1/2007 | $92.17 | 3 |
| 8 | 25310 | TENDON TRANSPLANTATION OR TRANSF | 1/1/2007 | $116.31 | 3 |
| 8 | 25312 | TENDON TRANSPLANTATION OR TRANSF | 1/1/2007 | $129.49 | 3 |
| 8 | 25315 | FLEXOR ORIGIN SLIDE (EG, FOR CER | 1/1/2007 | $135.98 | 3 |
| 8 | 25316 | FLEXOR ORIGIN SLIDE FOR CEREBRAL | 1/1/2007 | $157.36 | 3 |
| 8 | 25320 | CAPSULORRHAPHY OR RECONSTRUCTION | 1/1/2007 | $123.42 | 3 |
| 8 | 25332 | ARTHROPLASTY, WRIST, WITH OR WIT | 1/1/2007 | $116.36 | 3 |
| 8 | 25335 | CENTRALIZATION OF WRIST ON ULNA | 1/1/2007 | $137.02 | 3 |
| 8 | 25337 | RECONSTRUCTION FOR STABILIZATION | 1/1/2007 | $118.70 | 3 |
| 8 | 25350 | OSTEOTOMY RADIUS DISTAL THIRD | 1/1/2007 | $125.81 | 3 |
| 8 | 25355 | OSTEOTOMY RADIUS; MIDDLE OR PROX | 1/1/2007 | $137.69 | 3 |
| 8 | 25360 | OSTEOTOMY ULNA | 1/1/2007 | $123.21 | 3 |
| 8 | 25365 | OSTEOTOMY; RADIUS AND ULNA | 1/1/2007 | $156.84 | 3 |
| 8 | 25370 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $164.73 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 25375 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $164.78 | 3 |
| 8 | 25390 | OSTEOPLASTY RADIUS OR ULNA SHORT | 1/1/2007 | $138.31 | 3 |
| 8 | 25391 | OSTEOPLASTY RADIUS OR ULNA; LENG | 1/1/2007 | $168.36 | 3 |
| 8 | 25392 | OSTEOPLASTY RADIUS AND ULNA SHOR | 1/1/2007 | $166.29 | 3 |
| 8 | 25393 | OSTEOPLASTY RADIUS AND ULNA; LEN | 1/1/2007 | $188.09 | 3 |
| 8 | 25400 | REPAIR OF NONUNION OR MALUNION R | 1/1/2007 | $145.06 | 3 |
| 8 | 25405 | REPAIR OF NONUNION OR MALUNION, | 1/1/2007 | $176.46 | 3 |
| 8 | 25415 | REPAIR OF NONUNION OR MALUNION R | 1/1/2007 | $166.39 | 3 |
| 8 | 25420 | REPAIR OF NONUNION OR MALUNION, | 1/1/2007 | $193.28 | 3 |
| 8 | 25425 | REPAIR OF DEFECT WITH AUTOGENOUS | 1/1/2007 | $190.58 | 3 |
| 8 | 25426 | REPAIR OF DEFECT WITH AUTOGENOUS | 1/1/2007 | $181.34 | 3 |
| 8 | 25440 | REPAIR OF NONUNION, SCAPHOID CAR | 1/1/2007 | $111.48 | 3 |
| 8 | 25441 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $129.65 | 3 |
| 8 | 25442 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $110.39 | 3 |
| 8 | 25443 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $106.60 | 3 |
| 8 | 25444 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $113.66 | 3 |
| 8 | 25445 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $99.86 | 3 |
| 8 | 25446 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $160.63 | 3 |
| 8 | 25447 | INTERPOSITION ARTHROPLASTY INTER | 1/1/2007 | $107.12 | 3 |
| 8 | 25449 | REVISION OF ARTHROPLASTY INCLUDI | 1/1/2007 | $142.10 | 3 |
| 8 | 25450 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $100.89 | 3 |
| 8 | 25455 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $110.70 | 3 |
| 8 | 25490 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $128.35 | 3 |
| 8 | 25491 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $135.20 | 3 |
| 8 | 25492 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $154.61 | 3 |
| 8 | 25515 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $94.67 | 3 |
| 8 | 25525 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $126.43 | 3 |
| 8 | 25526 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $148.90 | 3 |
| 8 | 25545 | OPEN TREATMENT OF ULNAR SHAFT FR | 1/1/2007 | $93.94 | 3 |
| 8 | 25574 | OPEN TREATMENT OF RADIAL AND ULN | 1/1/2007 | $80.08 | 3 |
| 8 | 25575 | OPEN TREATMENT OF RADIAL AND ULN | 1/1/2007 | $113.04 | 3 |
| 8 | 25607 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $93.26 | 3 |
| 8 | 25608 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $106.81 | 3 |
| 8 | 25609 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $136.34 | 3 |
| 8 | 25611 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | INVALID | N |
| 8 | 25620 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | INVALID | N |
| 8 | 25628 | OPEN TREATMENT OF CARPAL SCAPHOI | 1/1/2007 | $91.50 | 3 |
| 8 | 25645 | OPEN TREATMENT OF CARPAL BONE FR | 1/1/2007 | $78.32 | 3 |
| 8 | 25670 | OPEN TREATMENT OF RADIOCARPAL OR | 1/1/2007 | $84.08 | 3 |
| 8 | 25676 | OPEN TREATMENT OF DISTAL RADIOUL | 1/1/2007 | $86.62 | 3 |
| 8 | 25685 | OPEN TREATMENT OF TRANS-SCAPHOPE | 1/1/2007 | $99.60 | 3 |
| 8 | 25695 | OPEN TREATMENT OF LUNATE DISLOCA | 1/1/2007 | $86.98 | 3 |
| 8 | 25800 | ARTHRODESIS, WRIST JOINT (INCLUD | 1/1/2007 | $106.08 | 3 |
| 8 | 25805 | ARTHRODESIS WRIST JOINT (INCLUDI | 1/1/2007 | $121.13 | 3 |
| 8 | 25810 | ARTHRODESIS WRIST JOINT (INCLUDI | 1/1/2007 | $114.96 | 3 |
| 8 | 25820 | INTERCARPAL FUSION WITHOUT BONE | 1/1/2007 | $85.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 25825 | INTERCARPAL FUSION WITH AUTOGENO | 1/1/2007 | $103.44 | 3 |
| 8 | 25830 | DISTAL RADIOULNAR JOINT ARTHRODE | 1/1/2007 | $135.15 | 3 |
| 8 | 25900 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $118.85 | 3 |
| 8 | 25905 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $118.54 | 3 |
| 8 | 25907 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $107.33 | 3 |
| 8 | 25909 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $117.81 | 3 |
| 8 | 25915 | KRUKENBERG PROCEDURE | 1/1/2007 | $201.94 | 3 |
| 8 | 25920 | DISARTICULATION THROUGH WRIST | 1/1/2007 | $92.85 | 3 |
| 8 | 25922 | DISARTICULATION THROUGH WRIST; S | 1/1/2007 | $80.96 | 3 |
| 8 | 25924 | DISARTICULATION THROUGH WRIST; R | 1/1/2007 | $92.80 | 3 |
| 8 | 25929 | TRANSMETACARPAL AMPUTATION; SECO | 1/1/2007 | $75.83 | 3 |
| 8 | 25931 | TRANSMETACARPAL AMPUTATION; REAM | 1/1/2007 | $106.08 | 3 |
| 8 | 26185 | SESAMOIDECTOMY, THUMB OR FINGER | 1/1/2007 | $62.80 | 3 |
| 8 | 26215 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $74.74 | 3 |
| 8 | 26255 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $121.91 | 3 |
| 8 | 26260 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $73.85 | 3 |
| 8 | 26261 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $85.17 | 3 |
| 8 | 26262 | RADICAL RESECTION OSTECTOMY) FOR | 1/1/2007 | $61.71 | 3 |
| 8 | 26352 | FLEXOR TENDON REPAIR OR ADVANCEM | 1/1/2007 | $125.60 | 3 |
| 8 | 26357 | SECONDARY, EACH TENDON | 1/1/2007 | $132.76 | 3 |
| 8 | 26358 | FLEXOR TENDON REPAIR OR ADVANCEM | 1/1/2007 | $141.17 | 3 |
| 8 | 26372 | PROFUNDUS TENDON REPAIR OR ADVAN | 1/1/2007 | $138.73 | 3 |
| 8 | 26373 | PROFUNDUS TENDON REPAIR OR ADVAN | 1/1/2007 | $132.19 | 3 |
| 8 | 26390 | EXCISION FLEXOR TENDON, W/IMPLAN | 1/1/2007 | $124.04 | 3 |
| 8 | 26392 | REMOVAL OF SYNTHETIC ROD AND INS | 1/1/2007 | $148.33 | 3 |
| 8 | 26412 | EXTENSOR TENDON REPAIR DORSUM OF | 1/1/2007 | $106.81 | 3 |
| 8 | 26416 | REMOVAL OF SYNTHETIC ROD AND INS | 1/1/2007 | $128.61 | 3 |
| 8 | 26420 | EXTENSOR TENDON REPAIR DORSUM OF | 1/1/2007 | $111.59 | 3 |
| 8 | 26426 | REPAIR OF EXTENSOR TENDON, CENTR | 1/1/2007 | $105.31 | 3 |
| 8 | 26434 | EXTENSOR TENDON REPAIR OPEN PRIM | 1/1/2007 | $96.43 | 3 |
| 8 | 26474 | TENODESIS FOR DISTAL JOINT STABI | 1/1/2007 | $90.77 | 3 |
| 8 | 26476 | TENDON LENGTHENING EXTENSOR SING | 1/1/2007 | $87.81 | 3 |
| 8 | 26479 | TENDON SHORTENING, FLEXOR, HAND | 1/1/2007 | $94.67 | 3 |
| 8 | 26480 | TENDON TRANSFER OR TRANSPLANT CA | 1/1/2007 | $118.23 | 3 |
| 8 | 26483 | TENDON TRANSFER OR TRANSPLANT CA | 1/1/2007 | $130.17 | 3 |
| 8 | 26485 | TENDON TRANSFER OR TRANSPLANT PA | 1/1/2007 | $125.81 | 3 |
| 8 | 26492 | OPPONENS PLASTY; TENDON TRANSFER | 1/1/2007 | $127.93 | 3 |
| 8 | 26494 | OPPONENS PLASTY; HYPOTHENAR MUSC | 1/1/2007 | $118.07 | 3 |
| 8 | 26497 | TENDON TRANSFER TO RESTORE INTRI | 1/1/2007 | $127.57 | 3 |
| 8 | 26498 | TENDON TRANSFER TO RESTORE INTRI | 1/1/2007 | $167.59 | 3 |
| 8 | 26499 | CORRECTION CLAW FINGER OTHER MET | 1/1/2007 | $121.45 | 3 |
| 8 | 26502 | TENDON PULLEY RECONSTRUCTION WIT | 1/1/2007 | $105.41 | 3 |
| 8 | 26504 | TENDON PULLEY RECONSTRUCTION; WI | 1/1/2007 | INVALID | N |
| 8 | 26517 | CAPSULODESIS FOR M-P JOINT STABI | 1/1/2007 | $123.37 | 3 |
| 8 | 26518 | CAPSULODESIS FOR M-P JOINT STABI | 1/1/2007 | $123.47 | 3 |
| 8 | 26530 | ARTHROPLASTY METACARPOPHALANGEAL | 1/1/2007 | $72.04 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 26531 | ARTHROPLASTY METACARPOPHALANGEAL | 1/1/2007 | $84.13 | 3 |
| 8 | 26536 | ARTHROPLASTY INTERPHALANGEAL JOI | 1/1/2007 | $88.23 | 3 |
| 8 | 26541 | RECONSTRUCTION, COLLATERAL LIGAM | 1/1/2007 | $121.03 | 3 |
| 8 | 26546 | REPAIR NON-UNION, METACARPAL OR | 1/1/2007 | $131.93 | 3 |
| 8 | 26550 | POLLICIZATION OF A DIGIT | 1/1/2007 | $214.30 | 3 |
| 8 | 26551 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/2007 | $451.53 | 3 |
| 8 | 26553 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/2007 | $370.36 | 3 |
| 8 | 26554 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/2007 | $528.96 | 3 |
| 8 | 26555 | POSITIONAL CHANGE OF OTHER FINGE | 1/1/2007 | $193.69 | 3 |
| 8 | 26556 | FREE TOE JOINT TRANSFER WITH MIC | 1/1/2007 | $431.70 | 3 |
| 8 | 26560 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $83.30 | 3 |
| 8 | 26561 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $128.35 | 3 |
| 8 | 26562 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $178.54 | 3 |
| 8 | 26565 | OSTEOTOMY FOR CORRECTION OF DEFO | 1/1/2007 | $102.61 | 3 |
| 8 | 26568 | OSTEOPLASTY FOR LENGTHENING OF M | 1/1/2007 | $135.10 | 3 |
| 8 | 26580 | REPAIR CLEFT HAND | 1/1/2007 | $177.03 | 3 |
| 8 | 26585 | REPAIR BIFID DIGIT | 4/1/2002 | INVALID | N |
| 8 | 26587 | RECONSTRUCTION OF POLYDACTYLOUS | 1/1/2007 | $128.71 | 3 |
| 8 | 26590 | REPAIR MACRODACTYLIA, EACH DIGIT | 1/1/2007 | $179.99 | 3 |
| 8 | 26596 | EXCISION OF CONSTRICTING RING WI | 1/1/2007 | $99.75 | 3 |
| 8 | 26597 | RELEASE OF SCAR CONTRACTURE FLEX | 4/1/2002 | INVALID | N |
| 8 | 26665 | OPEN TREATMENT OF CARPOMETACARPA | 1/1/2007 | $78.47 | 3 |
| 8 | 26676 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $68.14 | 3 |
| 8 | 26685 | OPEN TREATMENT OF CARPOMETACARPA | 1/1/2007 | $73.80 | 3 |
| 8 | 26686 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $83.51 | 3 |
| 8 | 26706 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $57.19 | 3 |
| 8 | 26820 | FUSION IN OPPOSITION THUMB WITH | 1/1/2007 | $118.54 | 3 |
| 8 | 26842 | ARTHRODESIS CARPOMETACARPAL JOIN | 1/1/2007 | $119.16 | 3 |
| 8 | 26843 | ARTHRODESIS, CARPOMETACARPAL JOI | 1/1/2007 | $109.72 | 3 |
| 8 | 26844 | ARTHRODESIS CARPOMETACARPAL JOIN | 1/1/2007 | $121.71 | 3 |
| 8 | 26852 | ARTHRODESIS METACARPOPHALANGEAL | 1/1/2007 | $117.29 | 3 |
| 8 | 26862 | ARTHRODESIS INTERPHALANGEAL JOIN | 1/1/2007 | $108.16 | 3 |
| 8 | 26863 | ARTHRODESIS INTERPHALANGEAL JOIN | 1/1/2007 | $34.10 | 3 |
| 8 | 27000 | TENOTOMY ADDUCTOR SUBCUTANEOUS C | 1/1/2007 | $61.71 | 3 |
| 8 | 27001 | TENOTOMY, ADDUCTOR OF HIP, SUBCU | 1/1/2007 | $74.11 | 3 |
| 8 | 27003 | TENOTOMY, ADDUCTOR, SUBCUTANEOUS | 1/1/2007 | $77.59 | 3 |
| 8 | 27005 | TENOTOMY ILIOPSOAS OPEN (SEPARAT | 1/1/2007 | $99.70 | 3 |
| 8 | 27006 | TENOTOMY ABDUCTORS OPEN (SEPARAT | 1/1/2007 | $100.48 | 3 |
| 8 | 27030 | ARTHROTOMY HIP FOR INFECTION WIT | 1/1/2007 | $129.33 | 3 |
| 8 | 27033 | ARTHROTOMY, HIP, WITH EXPLORATIO | 1/1/2007 | $133.07 | 3 |
| 8 | 27035 | HIP JOINT DENERVATION INTRAPELVI | 1/1/2007 | $156.06 | 3 |
| 8 | 27036 | CAPSULECTOMY OR CAPSULOTOMY OF H | 1/1/2007 | $130.53 | 3 |
| 8 | 27048 | EXCISION, TUMOR, PELVIS AND HIP | 1/1/2007 | $62.12 | 3 |
| 8 | 27049 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $125.18 | 3 |
| 8 | 27052 | ARTHROTOMY FOR BIOPSY; HIP JOINT | 1/1/2007 | $68.51 | 3 |
| 8 | 27054 | ARTHROTOMY WITH SYNOVECTOMY, HIP | 1/1/2007 | $90.10 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 27060 | EXCISION ISCHIAL BURSA | 1/1/2007 | $55.01 | 3 |
| 8 | 27062 | EXCISION; TROCHANTERIC BURSA OR | 1/1/2007 | $59.69 | 3 |
| 8 | 27065 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $64.15 | 3 |
| 8 | 27066 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $106.71 | 3 |
| 8 | 27067 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $136.70 | 3 |
| 8 | 27070 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $112.10 | 3 |
| 8 | 27071 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $122.02 | 3 |
| 8 | 27075 | RADICAL RESECTION OF TUMOR OR IN | 1/1/2007 | $310.62 | 3 |
| 8 | 27076 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $209.36 | 3 |
| 8 | 27077 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $357.02 | 3 |
| 8 | 27078 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $132.92 | 3 |
| 8 | 27079 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $131.00 | 3 |
| 8 | 27080 | COCCYGECTOMY PRIMARY | 1/1/2007 | $63.06 | 3 |
| 8 | 27087 | REMOVAL OF FOREIGN BODY; DEEP | 1/1/2007 | $85.95 | 3 |
| 8 | 27090 | REMOVAL OF HIP PROSTHESIS (SEPAR | 1/1/2007 | $113.56 | 3 |
| 8 | 27091 | REMOVAL OF HIP PROSTHESIS; COMPL | 1/1/2007 | $207.50 | 3 |
| 8 | 27097 | HAMSTRING RESCESSION PROXIMAL | 1/1/2007 | $87.14 | 3 |
| 8 | 27098 | ADDUCTOR TRANSFER TO ISCHIUM | 1/1/2007 | $87.24 | 3 |
| 8 | 27100 | TRANSFER EXTERNAL OBLIQUE MUSCLE | 1/1/2007 | $112.10 | 3 |
| 8 | 27105 | TRANSFER PARASPINAL MUSCLE TO HI | 1/1/2007 | $117.61 | 3 |
| 8 | 27110 | TRANSFER ILIOPSOAS; TO GREATER T | 1/1/2007 | $127.47 | 3 |
| 8 | 27111 | TRANSFER ILIOPSOAS; TO FEMORAL N | 1/1/2007 | $120.56 | 3 |
| 8 | 27120 | ACETABULOPLASTY; (EG,WHITMAN,COL | 1/1/2007 | $170.91 | 3 |
| 8 | 27122 | ACETABULOPLASTY; RESECTION FEMOR | 1/1/2007 | $148.64 | 3 |
| 8 | 27125 | PARTIAL HIP REPLACEMENT, PROSTHE | 1/1/2007 | $144.59 | 3 |
| 8 | 27130 | ARTHROPLASTY, ACETABULAR & PROXI | 1/1/2007 | $191.67 | 3 |
| 8 | 27132 | CONVERSION OF PREVIOUS HIP SURGE | 1/1/2007 | $223.12 | 3 |
| 8 | 27134 | REVISION OF TOTAL HIP ARTHOPLAST | 1/1/2007 | $266.04 | 3 |
| 8 | 27137 | REVISION OF TOTAL HIP ATHROPLAST | 1/1/2007 | $201.27 | 3 |
| 8 | 27138 | REVISION OF TOTAL HIP ATHROPLAST | 1/1/2007 | $209.73 | 3 |
| 8 | 27140 | OSTEOTOMY AND TRANSFER OF GREATE | 1/1/2007 | $123.37 | 3 |
| 8 | 27146 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $168.83 | 3 |
| 8 | 27147 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $194.16 | 3 |
| 8 | 27151 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $178.33 | 3 |
| 8 | 27156 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $233.08 | 3 |
| 8 | 27158 | OSTEOTOMY, PELVIS, BILATERAL (EG | 1/1/2007 | $175.79 | 3 |
| 8 | 27161 | OSTEOTOMY FEMORAL NECK (SEPARATE | 1/1/2007 | $164.83 | 3 |
| 8 | 27165 | OSTEOTOMY INTERTROCHANTERIC OR S | 1/1/2007 | $176.10 | 3 |
| 8 | 27170 | BONE GRAFT, FEMORAL HEAD, NECK, | 1/1/2007 | $156.69 | 3 |
| 8 | 27176 | TREATMENT OF SLIPPED FEMORAL EPI | 1/1/2007 | $120.88 | 3 |
| 8 | 27177 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $148.38 | 3 |
| 8 | 27178 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $116.72 | 3 |
| 8 | 27179 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $130.94 | 3 |
| 8 | 27181 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $137.33 | 3 |
| 8 | 27185 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $99.13 | 3 |
| 8 | 27187 | PROPHYLACTIC TREATMENT WITH WITH | 1/1/2007 | $136.19 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 27202 | OPEN TREATMENT OF COCCYGEAL FRAC | 1/1/2007 | $129.75 | 3 |
| 8 | 27215 | OPEN TREATMENT OF ILIAC SPINE, T | 1/1/2007 | $99.13 | 3 |
| 8 | 27216 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $142.31 | 3 |
| 8 | 27217 | OPEN TREATMENT OF ANTERIOR RING | 1/1/2007 | $138.42 | 3 |
| 8 | 27218 | OPEN TREATMENT OF POSTERIOR RING | 1/1/2007 | $181.81 | 3 |
| 8 | 27226 | OPEN TREATMENT OF POSTERIOR OR A | 1/1/2007 | $130.79 | 3 |
| 8 | 27227 | OPEN TREATMENT OF ACETABULAR FRA | 1/1/2007 | $222.65 | 3 |
| 8 | 27228 | OPEN TREATMENT OF ACETABULAR FRA | 1/1/2007 | $256.65 | 3 |
| 8 | 27235 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $123.16 | 3 |
| 8 | 27236 | OPEN TREATMENT OF FEMORAL FRACTU | 1/1/2007 | $152.43 | 3 |
| 8 | 27244 | TREATMENT OF INTERTROCHANTERIC, | 1/1/2007 | $155.80 | 3 |
| 8 | 27245 | OPEN TREATMENT OF INTERTROCHANTE | 1/1/2007 | $195.04 | 3 |
| 8 | 27248 | OPEN TREATMENT OF GREATER TROCHA | 1/1/2007 | $106.24 | 3 |
| 8 | 27253 | OPEN TREATMENT OF HIP DISLOCATIO | 1/1/2007 | $129.49 | 3 |
| 8 | 27254 | OPEN TREATMENT OF HIP DISLOCATIO | 1/1/2007 | $173.61 | 3 |
| 8 | 27258 | OPEN TREATMENT OF SPONTANEOUS HI | 1/1/2007 | $150.25 | 3 |
| 8 | 27259 | OPEN TREATMENT OF CONGENITAL HIP | 1/1/2007 | $204.59 | 3 |
| 8 | 27280 | ARTHRODESIS SACROILIAC JOINT (IN | 1/1/2007 | $135.93 | 3 |
| 8 | 27282 | ARTHRODESIS SYMPHYSIS PUBIS (INC | 1/1/2007 | $110.03 | 3 |
| 8 | 27284 | ARTHRODESIS HIP JOINT (INCLUDES | 1/1/2007 | $218.65 | 3 |
| 8 | 27286 | ARTHRODESIS HIP JOINT (INCLUDES | 1/1/2007 | $219.90 | 3 |
| 8 | 27290 | INTERPELVIABDOMINAL AMPUTATION ( | 1/1/2007 | $211.65 | 3 |
| 8 | 27295 | DISARTICULATION OF HIP | 1/1/2007 | $170.80 | 3 |
| 8 | 27299 | UNLISTED PROCEDURE PELVIS OR HIP | 2/1/1994 | $0.01 | 5 |
| 8 | 27303 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $86.67 | 3 |
| 8 | 27305 | FASCIOTOMY ILIOTIBIAL (TENOTOMY) | 1/1/2007 | $62.90 | 3 |
| 8 | 27306 | TENOTOMY SUBCUTANEOUS CLOSED ADD | 1/1/2007 | $52.89 | 3 |
| 8 | 27307 | TENOTOMY SUBCUTANEOUS CLOSED ADD | 1/1/2007 | $63.47 | 3 |
| 8 | 27310 | ARTHROTOMY KNEE FOR INFECTION WI | 1/1/2007 | $95.86 | 3 |
| 8 | 27315 | NEURECTOMY HAMSTRING MUSCLE | 1/1/2007 | INVALID | N |
| 8 | 27320 | NEURECTOMY POPLITEAL (GASTROCNEM | 1/1/2007 | INVALID | N |
| 8 | 27325 | NEURECTOMY, HAMSTRING MUSCLE | 1/1/2007 | $70.74 | 3 |
| 8 | 27326 | NEURECTOMY, POPLITEAL (GASTROCNE | 1/1/2007 | $63.27 | 3 |
| 8 | 27329 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $131.36 | 3 |
| 8 | 27330 | ARTHROTOMY, KNEE; WITH SYNOVIAL | 1/1/2007 | $53.98 | 3 |
| 8 | 27331 | ARTHROTOMY, KNEE; W/JOINT EXPLOR | 1/1/2007 | $64.51 | 3 |
| 8 | 27332 | ARTHROTOMY, KNEE, WITH EXCISION | 1/1/2007 | $87.35 | 3 |
| 8 | 27333 | ARTHROTOMY KNEE FOR EXCISION OF | 1/1/2007 | $79.10 | 3 |
| 8 | 27334 | ARTHROTOMY, KNEE, WITH SYNOVECTO | 1/1/2007 | $91.50 | 3 |
| 8 | 27335 | ARTHROTOMY KNEE FOR SYNOVECTOMY; | 1/1/2007 | $103.64 | 3 |
| 8 | 27345 | EXCISION OF SYNOVIAL CYST OF POP | 1/1/2007 | $65.13 | 3 |
| 8 | 27347 | EXCISION OF LESION OF MENISCUS O | 1/1/2007 | $63.27 | 3 |
| 8 | 27350 | PATELLECTOMY OR HEMIPATELLECTOMY | 1/1/2007 | $87.35 | 3 |
| 8 | 27355 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $81.74 | 3 |
| 8 | 27356 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $98.56 | 3 |
| 8 | 27357 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $109.98 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 27358 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $41.94 | 3 |
| 8 | 27360 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $113.61 | 3 |
| 8 | 27365 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $159.59 | 3 |
| 8 | 27380 | SUTURE OF INFRAPATELLAR TENDON P | 1/1/2007 | $81.43 | 3 |
| 8 | 27381 | SUTURE OF INFRAPATELLAR TENDON S | 1/1/2007 | $110.18 | 3 |
| 8 | 27385 | SUTURE OF QUADRICEPS OR HAMSTRIN | 1/1/2007 | $86.98 | 3 |
| 8 | 27386 | SUTURE OF QUADRICEPS OR HAMSTRIN | 1/1/2007 | $113.82 | 3 |
| 8 | 27390 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $58.96 | 3 |
| 8 | 27391 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $77.85 | 3 |
| 8 | 27392 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $95.34 | 3 |
| 8 | 27393 | LENGTHENING OF HAMSTRING TENDON | 1/1/2007 | $69.18 | 3 |
| 8 | 27394 | LENGTHENING OF HAMSTRING TENDON; | 1/1/2007 | $89.27 | 3 |
| 8 | 27395 | LENGTHENING OF HAMSTRING TENDON; | 1/1/2007 | $119.89 | 3 |
| 8 | 27396 | TRANSPLANT HAMSTRING TENDON TO P | 1/1/2007 | $84.13 | 3 |
| 8 | 27397 | TRANSPLANT HAMSTRING TENDON TO P | 1/1/2007 | $114.96 | 3 |
| 8 | 27400 | TENDON OR MUSCLE TRANSFER HAMSTR | 1/1/2007 | $91.29 | 3 |
| 8 | 27403 | ARTHROTOMY WITH OPEN MENISCUS RE | 1/1/2007 | $88.02 | 3 |
| 8 | 27405 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $91.66 | 3 |
| 8 | 27407 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $105.77 | 3 |
| 8 | 27409 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $130.27 | 3 |
| 8 | 27418 | ANTERIOR TIBIAL TUBERCLEPLASTY ( | 1/1/2007 | $112.31 | 3 |
| 8 | 27420 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $102.04 | 3 |
| 8 | 27422 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $101.78 | 3 |
| 8 | 27424 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $101.78 | 3 |
| 8 | 27425 | LATERAL RETINACULAR RELEASE OPEN | 1/1/2007 | $60.46 | 3 |
| 8 | 27427 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $97.57 | 3 |
| 8 | 27428 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $143.61 | 3 |
| 8 | 27429 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $159.07 | 3 |
| 8 | 27430 | QUADRICEPS PLASTY (BENNETT OR TH | 1/1/2007 | $100.53 | 3 |
| 8 | 27435 | CAPSULOTOMY KNEE POSTERIOR CAPSU | 1/1/2007 | $102.09 | 3 |
| 8 | 27437 | ARTHROPLASTY PATELLA WITHOUT PRO | 1/1/2007 | $89.27 | 3 |
| 8 | 27438 | ARTHROPLASTY PATELLA; WITH PROST | 1/1/2007 | $112.73 | 3 |
| 8 | 27440 | ARTHROPLASTY KNEE TIBIAL PLATEAU | 1/1/2007 | $94.61 | 3 |
| 8 | 27441 | ARTHROPLASTY KNEE TIBILA PLATEAU | 1/1/2007 | $100.74 | 3 |
| 8 | 27442 | ARTHROPLASTY KNEE FEMORAL CONDYL | 1/1/2007 | $118.85 | 3 |
| 8 | 27443 | ARTHROPLASTY KNEE FEMORAL CONDYL | 1/1/2007 | $111.90 | 3 |
| 8 | 27445 | ARTHROPLASTY KNEE CONSTRAINED PR | 1/1/2007 | $171.89 | 3 |
| 8 | 27446 | ARTHROPLASTY KNEE TOTAL CONDYLE | 1/1/2007 | $155.28 | 3 |
| 8 | 27447 | ARTHROPLASTY, KNEE, CONDYLE & PL | 1/1/2007 | $206.98 | 3 |
| 8 | 27448 | OSTEOTOMY FEMUR SHAFT OR SUPRACO | 1/1/2007 | $112.10 | 3 |
| 8 | 27450 | OSTEOTOMY FEMUR SHAFT OR SUPRACO | 1/1/2007 | $140.08 | 3 |
| 8 | 27454 | OSTEOTOMY MULTIPLE FEMORAL SHAFT | 1/1/2007 | $172.26 | 3 |
| 8 | 27455 | OSTEOTOMY PROXIMAL TIBIA INCLUDI | 1/1/2007 | $129.49 | 3 |
| 8 | 27457 | OSTEOTOMY PROXIMAL TIBIA INCLUDI | 1/1/2007 | $133.49 | 3 |
| 8 | 27465 | OSTEOPLASTY FEMUR SHORTENING (EX | 1/1/2007 | $137.90 | 3 |
| 8 | 27466 | OSTEOPLASTY FEMUR; LENGTHENING | 1/1/2007 | $160.58 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 27468 | OSTEOPLASTY FEMUR; COMBINED LENG | 1/1/2007 | $179.73 | 3 |
| 8 | 27470 | REPAIR NONUNION OR MALUNION FEMU | 1/1/2007 | $159.13 | 3 |
| 8 | 27472 | REPAIR NONUNION OR MALUNION FEMU | 1/1/2007 | $173.76 | 3 |
| 8 | 27475 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $89.37 | 3 |
| 8 | 27477 | TIBIA AND FIBULA PROXIMAL | 1/1/2007 | $100.27 | 3 |
| 8 | 27479 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $130.94 | 3 |
| 8 | 27485 | ARREST HEMIEPIPHYSEAL DISTAL FEM | 1/1/2007 | $92.28 | 3 |
| 8 | 27486 | REVISION OF TOTAL KNEE ATHROPLAS | 1/1/2007 | $187.51 | 3 |
| 8 | 27487 | REVISION OF TOTAL KNEE ARTHROPLA | 1/1/2007 | $239.88 | 3 |
| 8 | 27488 | REMOVAL OF KNEE PROSTHESIS, INCL | 1/1/2007 | $156.69 | 3 |
| 8 | 27495 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $154.04 | 3 |
| 8 | 27498 | DECOMPRESSION FASCIOTOMY, THIGH | 1/1/2007 | $78.84 | 3 |
| 8 | 27499 | DECOMPRESSION FASCIOTOMY, THIGH | 1/1/2007 | $89.79 | 3 |
| 8 | 27506 | OPEN TREATMENT OF FEMORAL SHAFT | 1/1/2007 | $172.67 | 3 |
| 8 | 27507 | OPEN TREATMENT OF FEMORAL SHAFT | 1/1/2007 | $136.29 | 3 |
| 8 | 27511 | OPEN TREATMENT OF FEMORAL SUPRAC | 1/1/2007 | $141.27 | 3 |
| 8 | 27513 | OPEN TREATMENT OF FEMORAL SUPRAC | 1/1/2007 | $181.29 | 3 |
| 8 | 27514 | OPEN TREATMENT OF FEMORAL FRACTU | 1/1/2007 | $174.70 | 3 |
| 8 | 27519 | OPEN TREATMENT OF DISTAL FEMORAL | 1/1/2007 | $151.39 | 3 |
| 8 | 27524 | OPEN TREATMENT OF PATELLAR FRACT | 1/1/2007 | $103.70 | 3 |
| 8 | 27535 | OPEN TREATMENT OF TIBIAL FRACTUR | 1/1/2007 | $122.59 | 3 |
| 8 | 27536 | OPEN TREATMENT OF TIBIAL FRACTUR | 1/1/2007 | $155.70 | 3 |
| 8 | 27540 | OPEN TREATMENT OF INTERCONDYLAR | 1/1/2007 | $129.18 | 3 |
| 8 | 27556 | OPEN TREATMENT OF KNEE DISLOCATI | 1/1/2007 | $148.28 | 3 |
| 8 | 27557 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $170.60 | 3 |
| 8 | 27558 | OPEN TREATMENT OF KNEE DISLOCATI | 1/1/2007 | $175.68 | 3 |
| 8 | 27566 | OPEN TREATMENT OF PATELLAR DISLO | 1/1/2007 | $122.90 | 3 |
| 8 | 27580 | FUSION OF KNEE ANY TECHNIQUE | 1/1/2007 | $194.88 | 3 |
| 8 | 27590 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $106.08 | 3 |
| 8 | 27591 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $121.19 | 3 |
| 8 | 27592 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $91.55 | 3 |
| 8 | 27598 | DISARTICULATION AT KNEE | 1/1/2007 | $99.65 | 3 |
| 8 | 27599 | UNLISTED PROCEDURE FEMUR OR KNEE | 2/1/1994 | $0.01 | 5 |
| 8 | 27600 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $57.30 | 3 |
| 8 | 27601 | DECOMPRESSION FASCIOTOMY, LEG; P | 1/1/2007 | $58.60 | 3 |
| 8 | 27602 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $70.48 | 3 |
| 8 | 27606 | TENOTOMY ACHILLES TENDON SUBCUTA | 1/1/2007 | $42.51 | 3 |
| 8 | 27612 | ARTHROTOMY ANKLE POSTERIOR CAPSU | 1/1/2007 | $75.57 | 3 |
| 8 | 27620 | ARTHROTOMY, ANKLE, W/JOINT EXPLO | 1/1/2007 | $64.46 | 3 |
| 8 | 27625 | ARTHROTOMY, ANKLE, WITH SYNOVECT | 1/1/2007 | $83.30 | 3 |
| 8 | 27626 | ARTHROTOMY ANKLE FOR SYNOVECTOMY | 1/1/2007 | $89.89 | 3 |
| 8 | 27635 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $82.21 | 3 |
| 8 | 27637 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $102.81 | 3 |
| 8 | 27638 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $107.43 | 3 |
| 8 | 27640 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $122.33 | 3 |
| 8 | 27641 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $98.87 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 27645 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $148.64 | 3 |
| 8 | 27646 | RESECTION FOR TUMOR RADICAL; FIB | 1/1/2007 | $133.64 | 3 |
| 8 | 27647 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $112.10 | 3 |
| 8 | 27650 | REPAIR PRIMARY OPEN OR PERCUTANE | 1/1/2007 | $97.57 | 3 |
| 8 | 27652 | SUTURE PRIMARY RUPTURED ACHILLES | 1/1/2007 | $104.16 | 3 |
| 8 | 27654 | REPAIR SECONDARY RUPTURED ACHILL | 1/1/2007 | $97.26 | 3 |
| 8 | 27656 | REPAIR FASCIAL DEFECT OF LEG | 1/1/2007 | $71.62 | 3 |
| 8 | 27658 | REPAIR OR SUTURE OF FLEXOR TENDO | 1/1/2007 | $53.61 | 3 |
| 8 | 27659 | REPAIR OR SUTURE OF FLEXOR TENDO | 1/1/2007 | $70.32 | 3 |
| 8 | 27665 | REPAIR OR SUTURE OF EXTENSOR TEN | 1/1/2007 | $58.44 | 3 |
| 8 | 27675 | REPAIR FOR DISLOCATING PERONEAL | 1/1/2007 | $72.82 | 3 |
| 8 | 27676 | REPAIR FOR DISLOCATING PERONEAL | 1/1/2007 | $85.89 | 3 |
| 8 | 27680 | TENOLYSIS INCLUDING TIBIA FIBULA | 1/1/2007 | $61.14 | 3 |
| 8 | 27681 | TENOLYSIS INCLUDING TIBIA FIBULA | 1/1/2007 | $72.09 | 3 |
| 8 | 27685 | LENGTHENING OR SHORTENING OF TEN | 1/1/2007 | $76.66 | 3 |
| 8 | 27686 | LENGTHENING OR SHORTENING OF TEN | 1/1/2007 | $78.89 | 3 |
| 8 | 27687 | GASTROCNEMIUS RECESSION (EG STRA | 1/1/2007 | $65.19 | 3 |
| 8 | 27690 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $85.12 | 3 |
| 8 | 27691 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $100.53 | 3 |
| 8 | 27692 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $16.19 | 3 |
| 8 | 27695 | SUTURE PRIMARY TORN RUPTURED OR | 1/1/2007 | $69.75 | 3 |
| 8 | 27696 | SUTURE PRIMARY TORN RUPTURED OR | 1/1/2007 | $82.99 | 3 |
| 8 | 27698 | SUTURE SECONDARY REPAIR TORN RUP | 1/1/2007 | $92.28 | 3 |
| 8 | 27700 | ARTHROPLASTY ANKLE | 1/1/2007 | $84.49 | 3 |
| 8 | 27702 | ARTHROPLASTY ANKLE; WITH IMPLANT | 1/1/2007 | $137.59 | 3 |
| 8 | 27703 | ARTHOPLASTY ANKLE SECONDARY RECO | 1/1/2007 | $155.03 | 3 |
| 8 | 27704 | REMOVAL OF ANKLE IMPLANT | 1/1/2007 | $75.20 | 3 |
| 8 | 27705 | OSTEOTOMY TIBIA | 1/1/2007 | $105.62 | 3 |
| 8 | 27707 | OSTEOTOMY; FIBULA | 1/1/2007 | $52.26 | 3 |
| 8 | 27709 | OSTEOTOMY; TIBIA AND FIBULA | 1/1/2007 | $102.87 | 3 |
| 8 | 27712 | OSTEOTOMY; MULTIPLE WITH REALIGN | 1/1/2007 | $142.57 | 3 |
| 8 | 27715 | OSTEOPLASTY TIBIA AND FIBULA LEN | 1/1/2007 | $143.56 | 3 |
| 8 | 27720 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $120.62 | 3 |
| 8 | 27722 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $119.42 | 3 |
| 8 | 27724 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $175.06 | 3 |
| 8 | 27725 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $156.84 | 3 |
| 8 | 27727 | REPAIR OF CONGENITAL PSEUDARTHRO | 1/1/2007 | $139.04 | 3 |
| 8 | 27730 | ARREST, EPIPHYSEAL (EPIPHYSIODES | 1/1/2007 | $80.76 | 3 |
| 8 | 27732 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $57.19 | 3 |
| 8 | 27734 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $83.66 | 3 |
| 8 | 27740 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $98.19 | 3 |
| 8 | 27742 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $91.60 | 3 |
| 8 | 27745 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $103.75 | 3 |
| 8 | 27756 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $74.84 | 3 |
| 8 | 27758 | OPEN TREATMENT OF TIBIAL SHAFT F | 1/1/2007 | $118.80 | 3 |
| 8 | 27759 | TREATMENT OF TIBIAL SHAFT FRACTU | 1/1/2007 | $137.33 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 27766 | OPEN TREATMENT OF MEDIAL MALLEOL | 1/1/2007 | $88.39 | 3 |
| 8 | 27784 | OPEN TREATMENT OF PROXIMAL FIBUL | 1/1/2007 | $76.92 | 3 |
| 8 | 27792 | OPEN TREATMENT OF DISTAL FIBULAR | 1/1/2007 | $82.78 | 3 |
| 8 | 27814 | OPEN TREATMENT OF BIMALLEOLAR AN | 1/1/2007 | $109.46 | 3 |
| 8 | 27822 | OPEN TREATMENT OF TRIMALLEOLAR A | 1/1/2007 | $122.33 | 3 |
| 8 | 27823 | OPEN TREATMENT OF TRIMALLEOLAR A | 1/1/2007 | $138.73 | 3 |
| 8 | 27826 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $97.83 | 3 |
| 8 | 27827 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $151.91 | 3 |
| 8 | 27828 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $171.22 | 3 |
| 8 | 27829 | OPEN TREATMENT OF DISTAL TIBIOFI | 1/1/2007 | $68.66 | 3 |
| 8 | 27832 | OPEN TREATMENT OF PROXIMAL TIBIO | 1/1/2007 | $71.10 | 3 |
| 8 | 27846 | OPEN TREATMENT OF ANKLE DISLOCAT | 1/1/2007 | $100.84 | 3 |
| 8 | 27848 | OPEN TREATMENT OF ANKLE DISLOCAT | 1/1/2007 | $118.64 | 3 |
| 8 | 27870 | ARTHRODESIS, ANKLE, OPEN | 1/1/2007 | $139.09 | 3 |
| 8 | 27871 | ARTHRODESIS TIBIOFIBULAR JOINT P | 1/1/2007 | $95.24 | 3 |
| 8 | 27880 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $107.59 | 3 |
| 8 | 27881 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $120.25 | 3 |
| 8 | 27882 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $86.78 | 3 |
| 8 | 27886 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $89.48 | 3 |
| 8 | 27888 | AMPUTATION ANKLE THROUGH MALLEOL | 1/1/2007 | $97.00 | 3 |
| 8 | 27889 | ANKLE DISARTICULATION | 1/1/2007 | $93.00 | 3 |
| 8 | 27894 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $103.33 | 3 |
| 8 | 28020 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $60.98 | 3 |
| 8 | 28030 | NEURECTOMY OF INTRINSIC MUSCULAT | 1/1/2007 | INVALID | N |
| 8 | 28035 | TARSAL TUNNEL RELEASE (POSTERIOR | 1/1/2007 | $60.46 | 3 |
| 8 | 28050 | ARTHROTOMY FOR SYNOVIAL BIOPSY I | 1/1/2007 | $50.55 | 3 |
| 8 | 28060 | FASCIECTOMY EXCISION OF PLANTAR | 1/1/2007 | $59.22 | 3 |
| 8 | 28062 | FASCIECTOMY EXCISION OF PLANTAR | 1/1/2007 | $71.99 | 3 |
| 8 | 28070 | SYNOVECTOMY INTERTARSAL OR TARSO | 1/1/2007 | $57.35 | 3 |
| 8 | 28072 | SYNOVECTOMY; METATARSOPHALANGEAL | 1/1/2007 | $56.00 | 3 |
| 8 | 28086 | SYNOVECTOMY TENDON SHEATH FLEXOR | 1/1/2007 | $70.22 | 3 |
| 8 | 28100 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $75.00 | 3 |
| 8 | 28102 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $76.92 | 3 |
| 8 | 28103 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $62.38 | 3 |
| 8 | 28104 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $58.70 | 3 |
| 8 | 28106 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $65.19 | 3 |
| 8 | 28107 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $66.59 | 3 |
| 8 | 28110 | OSTECTOMY PARTIAL EXCISION FIFTH | 1/1/2007 | $51.07 | 3 |
| 8 | 28111 | OSTECTOMY COMPLETE EXCISION FIRS | 1/1/2007 | $62.07 | 3 |
| 8 | 28112 | OSTECTOMY COMPLETE EXCISION; OTH | 1/1/2007 | $56.62 | 3 |
| 8 | 28114 | OSTECTOMY, COMP EXCISION; ALL ME | 1/1/2007 | $118.59 | 3 |
| 8 | 28118 | OSTECTOMY, CALCANEUS | 1/1/2007 | $67.73 | 3 |
| 8 | 28119 | OSTECTOMY CALCANEUS; FOR SPUR WI | 1/1/2007 | $59.79 | 3 |
| 8 | 28122 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $78.42 | 3 |
| 8 | 28130 | TALECTOMY (ASTRAGALECTOMY) | 1/1/2007 | $83.51 | 3 |
| 8 | 28171 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $84.91 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 28200 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $53.46 | 3 |
| 8 | 28202 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $77.69 | 3 |
| 8 | 28208 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $50.65 | 3 |
| 8 | 28210 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $69.44 | 3 |
| 8 | 28238 | RECONSTRUCTION, POSTERIOR TIBIAL | 1/1/2007 | $83.25 | 3 |
| 8 | 28250 | DIVISION OF PLANTAR FASCIA AND M | 1/1/2007 | $64.20 | 3 |
| 8 | 28260 | CAPSULOTOMY MIDFOOT MEDIAL RELEA | 1/1/2007 | $80.08 | 3 |
| 8 | 28262 | CAPSULOTOMY,MIDFOOT;EXTEN,INCL P | 1/1/2007 | $166.03 | 3 |
| 8 | 28264 | CAPSULOTOMY MIDTARSAL (HEYMAN TY | 1/1/2007 | $101.83 | 3 |
| 8 | 28285 | HAMMERTOE OPERATION; ONE TOE (EG | 1/1/2007 | $52.11 | 3 |
| 8 | 28289 | HALLUX RIGIDUS CORRECTION WITH C | 1/1/2007 | $83.30 | 3 |
| 8 | 28292 | HALLUX VALGUS (BUNION) CORRECTIO | 10/1/2003 | NC | 9 |
| 8 | 28294 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $88.70 | 3 |
| 8 | 28296 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $96.17 | 3 |
| 8 | 28297 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $101.00 | 3 |
| 8 | 28298 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $84.13 | 3 |
| 8 | 28299 | CORRECTION, HALLUX VALGUS (BUNIO | 1/1/2007 | $107.54 | 3 |
| 8 | 28300 | OSTEOTOMY CALCANEUS (DWYER OR CH | 1/1/2007 | $94.04 | 3 |
| 8 | 28302 | OSTEOTOMY; TALUS | 1/1/2007 | $92.69 | 3 |
| 8 | 28304 | OSTEOTOMY MIDTARSAL BONES OTHER | 1/1/2007 | $95.39 | 3 |
| 8 | 28305 | OSTEOTOMY MIDTARSAL BONES OTHER | 1/1/2007 | $95.96 | 3 |
| 8 | 28306 | OSTEOTOMY, METATARSAL, BASE/SHAF | 1/1/2007 | $70.27 | 3 |
| 8 | 28308 | OSTEOTOMY METATARSAL BASE OR SHA | 1/1/2007 | $60.93 | 3 |
| 8 | 28309 | OSTEOTOMY METATARSALS MULTIPLE F | 1/1/2007 | $118.18 | 3 |
| 8 | 28310 | OSTEOTOMY FOR SHORTENING ANGULAR | 1/1/2007 | $61.66 | 3 |
| 8 | 28312 | OSTEOTOMY FOR SHORTENING ANGULAR | 1/1/2007 | $55.12 | 3 |
| 8 | 28315 | SESAMOIDECTOMY FIRST TOE (SEPARA | 1/1/2007 | $53.87 | 3 |
| 8 | 28320 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $89.94 | 3 |
| 8 | 28322 | REPAIR OF NONUNION OR MALUNION M | 1/1/2007 | $97.57 | 3 |
| 8 | 28340 | RECONSTRUCTION, TOE, MACRODACTYL | 1/1/2007 | $74.06 | 3 |
| 8 | 28341 | RECONSTRUCTION, TOE, MACRODACTYL | 1/1/2007 | $84.91 | 3 |
| 8 | 28344 | RECONSTRUCTION, TOE(S); POLYDACT | 1/1/2007 | $54.60 | 3 |
| 8 | 28360 | RESCONSTRUCTION, CLEFT FOOT | 1/1/2007 | $135.56 | 3 |
| 8 | 28415 | OPEN TREATMENT OF CALCANEAL FRAC | 1/1/2007 | $165.72 | 3 |
| 8 | 28420 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $168.00 | 3 |
| 8 | 28436 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $59.37 | 3 |
| 8 | 28445 | OPEN TREATMENT OF TALUS FRACTURE | 1/1/2007 | $151.76 | 3 |
| 8 | 28456 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $37.78 | 3 |
| 8 | 28485 | OPEN TREATMENT OF METATARSAL FRA | 1/1/2007 | $62.23 | 3 |
| 8 | 28496 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $56.88 | 3 |
| 8 | 28555 | OPEN TREATMENT OF TARSAL BONE DI | 1/1/2007 | $89.58 | 3 |
| 8 | 28585 | OPEN TREATMENT OF TALOTARSAL JOI | 1/1/2007 | $86.00 | 3 |
| 8 | 28615 | OPEN TREATMENT OF TARSOMETATARSA | 1/1/2007 | $88.85 | 3 |
| 8 | 28645 | OPEN TREATMENT OF METATARSOPHALA | 1/1/2007 | $50.55 | 3 |
| 8 | 28675 | OPEN TREATMENT OF INTERPHALANGEA | 1/1/2007 | $54.65 | 3 |
| 8 | 28705 | PANTALAR ARTHRODESIS | 1/1/2007 | $178.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 28715 | TRIPLE ARTHRODESIS | 1/1/2007 | $129.85 | 3 |
| 8 | 28725 | SUBTALAR ARTHRODESIS | 1/1/2007 | $112.67 | 3 |
| 8 | 28730 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $108.68 | 3 |
| 8 | 28735 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $105.62 | 3 |
| 8 | 28737 | ARTHRODESIS, WITH TENDON LENGTHE | 1/1/2007 | $93.00 | 3 |
| 8 | 28740 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $104.42 | 3 |
| 8 | 28755 | ARTHRODESIS GREAT TOE; INTERPHAL | 1/1/2007 | $59.69 | 3 |
| 8 | 28760 | ARTHRODESIS GREAT TOE INTERPHALA | 1/1/2007 | $87.09 | 3 |
| 8 | 28800 | AMPUTATION FOOT MIDTARSAL (CHOPA | 1/1/2007 | $78.68 | 3 |
| 8 | 28805 | AMPUTATION FOOT; TRANSMETATARSAL | 1/1/2007 | $78.99 | 3 |
| 8 | 28899 | UNLISTED PROCEDURE FOOT OR TOES | 2/1/1994 | $0.01 | 5 |
| 8 | 29804 | ARTHROSCOPY, TEMPOROMANDIBULAR J | 1/1/2007 | $89.01 | 3 |
| 8 | 29815 | ARTHROSCOPY SHOULDER DIAGNOSTIC | 4/1/2002 | INVALID | N |
| 8 | 29819 | ARTHROSCOPY SHOULDER SURGICAL; W | 1/1/2007 | $81.69 | 3 |
| 8 | 29820 | ARTHROSCOPY SHOULDER SURGICAL; S | 1/1/2007 | $75.36 | 3 |
| 8 | 29821 | ARTHROSCOPY SHOULDER SURGICAL; S | 1/1/2007 | $82.31 | 3 |
| 8 | 29822 | ARTHROSCOPY SHOULDER SURGICAL; D | 1/1/2007 | $79.98 | 3 |
| 8 | 29823 | ARTHROSCOPY SHOULDER SURGICAL; D | 1/1/2007 | $87.24 | 3 |
| 8 | 29824 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $89.32 | 3 |
| 8 | 29825 | ARTHROSCOPY SHOULDER SURGICAL WI | 1/1/2007 | $81.53 | 3 |
| 8 | 29826 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $93.84 | 3 |
| 8 | 29827 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $153.42 | 3 |
| 8 | 29830 | ARTHROSCOPY ELBOW DIAGNOSTIC WIT | 1/1/2007 | $62.80 | 3 |
| 8 | 29834 | ARTHROSCOPY ELBOW SURGICAL; WITH | 1/1/2007 | $68.51 | 3 |
| 8 | 29835 | ARTHROSCOPY ELBOW SURGICAL; SYNO | 1/1/2007 | $70.07 | 3 |
| 8 | 29836 | ARTHROSCOPY ELBOW SURGICAL; SYNO | 1/1/2007 | $80.81 | 3 |
| 8 | 29837 | ARTHROSCOPY ELBOW SURGICAL; DEBR | 1/1/2007 | $73.70 | 3 |
| 8 | 29847 | ARTHROSCOPY, WRIST, SURGICAL; IN | 1/1/2007 | $74.53 | 3 |
| 8 | 29851 | ARTHROSCOPICALLY AIDED TREATMENT | 1/1/2007 | $131.00 | 3 |
| 8 | 29855 | ARTHROSCOPICALLY AIDED TREATMENT | 1/1/2007 | $110.18 | 3 |
| 8 | 29856 | ARTHROSCOPICALLY AIDED TREATMENT | 1/1/2007 | $141.22 | 3 |
| 8 | 29861 | ARTHROSCOPY, HIP, SURGICAL; WITH | 1/1/2007 | $93.89 | 3 |
| 8 | 29862 | ARTHROSCOPY, HIP, SURGICAL; WITH | 1/1/2007 | $104.27 | 3 |
| 8 | 29863 | ARTHROSCOPY, HIP, SURGICAL; WITH | 1/1/2007 | $102.97 | 3 |
| 8 | 29874 | ARTHROSCOPY KNEE SURGICAL FOR RE | 1/1/2007 | $73.91 | 3 |
| 8 | 29875 | ARTHROSCOPY, KNEE, SURGICAL; SYN | 1/1/2007 | $68.82 | 3 |
| 8 | 29876 | ARTHROSCOPY KNEE SURGICAL SYNOVE | 1/1/2007 | $84.70 | 3 |
| 8 | 29877 | ARTHROSCOPY KNEE SURGICAL; DEBRI | 1/1/2007 | $79.82 | 3 |
| 8 | 29879 | ARTHROSCOPY KNEE SURGICAL ABRASI | 1/1/2007 | $85.95 | 3 |
| 8 | 29880 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 1/1/2007 | $89.99 | 3 |
| 8 | 29881 | ARTHROSCOPY KNEE SURGICAL WITH M | 1/1/2007 | $83.40 | 3 |
| 8 | 29882 | ARTHROSCOPY KNEE SURGICAL; WITH | 1/1/2007 | $90.31 | 3 |
| 8 | 29883 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 1/1/2007 | $114.39 | 3 |
| 8 | 29884 | ARTHROSCOPY KNEE SURGICAL WITH L | 1/1/2007 | $79.46 | 3 |
| 8 | 29885 | ARTHROSCOPY,KNEE,SURG;DRILL FOR | 1/1/2007 | $96.79 | 3 |
| 8 | 29886 | ARTHROSCOPY KNEE SURGICAL; DRIL | 1/1/2007 | $81.48 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 29887 | ARTHROSCOPY KNEE SURGICAL DRILLI | 1/1/2007 | $96.27 | 3 |
| 8 | 29888 | ARTHROSCOPICALLY AIDED ANTERIOR | 1/1/2007 | $137.64 | 3 |
| 8 | 29889 | ARTHROSCOPICALLY AIDED POSTERIOR | 1/1/2007 | $162.08 | 3 |
| 8 | 29891 | ARTHROSCOPY, ANKLE, SURGICAL; EX | 1/1/2007 | $89.84 | 3 |
| 8 | 29892 | ARTHROSCOPICALLY AIDED REPAIR OF | 1/1/2007 | $94.25 | 3 |
| 8 | 29893 | ENDOSCOPIC PLANTAR FASCIOTOMY | 1/1/2007 | $63.01 | 3 |
| 8 | 29894 | ARTHROSCOPY, ANKLE (TIBIOTALAR & | 1/1/2007 | $71.83 | 3 |
| 8 | 29895 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $70.48 | 3 |
| 8 | 29897 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $73.91 | 3 |
| 8 | 29898 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $82.00 | 3 |
| 8 | 29899 | ARTHROSCOPY, ANKLE, SURGICAL; WI | 1/1/2007 | $139.40 | 3 |
| 8 | 29909 | UNLISTED PROCEDURE ARTHROSCOPY | 4/1/2002 | INVALID | N |
| 8 | 29999 | UNLISTED PROCEDURE, ARTHROSCOPY | 2/14/2002 | $0.01 | 5 |
| 8 | 30118 | EXCISION INTRANASAL LESION; EXTE | 1/1/2007 | $102.14 | 3 |
| 8 | 30120 | EXCISION OR SURGICAL PLANING OF | 4/1/1982 | NC | 9 |
| 8 | 30125 | EXCISION DERMOID CYST NOSE; COMP | 1/1/2007 | $83.66 | 3 |
| 8 | 30160 | RHINECTOMY; TOTAL | 1/1/2007 | $107.38 | 3 |
| 8 | 30410 | RHINOPLASTY PRIMARY COMPLETE EXT | 1/1/2007 | $170.23 | 3 |
| 8 | 30430 | RHINOPLASTY SECONDARY MINOR REVI | 1/1/2007 | $124.72 | 3 |
| 8 | 30435 | RHINOPLASTY SECONDARY; INTERMEDI | 1/1/2007 | $167.74 | 3 |
| 8 | 30450 | RHINOPLASTY SECONDARY; MAJOR REV | 1/1/2007 | $220.73 | 3 |
| 8 | 30460 | RHINOPLASTY FOR NASAL DEFORMITY | 1/1/2007 | $108.73 | 3 |
| 8 | 30462 | RHINOPLASTY FOR NASAL DEFORMITY | 1/1/2007 | $219.90 | 3 |
| 8 | 30465 | REPAIR OF NASAL VESTIBULAR STENO | 1/1/2007 | $128.09 | 3 |
| 8 | 30540 | REPAIR CHOANAL ATRESIA INTRANASA | 1/1/2007 | $91.91 | 3 |
| 8 | 30545 | REPAIR CHOANAL ARTRESIA; TRANSPA | 1/1/2007 | $129.70 | 3 |
| 8 | 31075 | SINUSOTOMY FRONTAL TRANSORBITAL | 1/1/2007 | $102.04 | 3 |
| 8 | 31080 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $135.98 | 3 |
| 8 | 31081 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $151.70 | 3 |
| 8 | 31084 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $146.46 | 3 |
| 8 | 31085 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $155.18 | 3 |
| 8 | 31086 | SINUSOTOMY FRONTAL NONOBLITERATI | 1/1/2007 | $141.32 | 3 |
| 8 | 31087 | SINUSOTOMY FRONTAL NONOBLITERATI | 1/1/2007 | $140.60 | 3 |
| 8 | 31205 | ETHMOIDECTOMY; EXTRANASAL TOTAL | 1/1/2007 | $118.33 | 3 |
| 8 | 31225 | MAXILLECTOMY WITHOUT ORBITAL EXE | 1/1/2007 | $200.65 | 3 |
| 8 | 31230 | MAXILLECTOMY; WITH ORBITAL EXENT | 1/1/2007 | $223.69 | 3 |
| 8 | 31300 | LARYNGOTOMY (THYROTOMY LARYNGOFI | 1/1/2007 | $158.09 | 3 |
| 8 | 31360 | LARYNGECTOMY TOTAL WITHOUT RADIC | 1/1/2007 | $182.69 | 3 |
| 8 | 31365 | LARYNGECTOMY; TOTAL WITH RADICAL | 1/1/2007 | $241.39 | 3 |
| 8 | 31367 | LARYNGECTOMY; SUBTOTAL SUPRAGLOT | 1/1/2007 | $236.46 | 3 |
| 8 | 31368 | LARYNGECTOMY; SUBTOTAL SUPRAGLOT | 1/1/2007 | $284.46 | 3 |
| 8 | 31370 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $235.68 | 3 |
| 8 | 31375 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $219.28 | 3 |
| 8 | 31380 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $220.78 | 3 |
| 8 | 31382 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $227.48 | 3 |
| 8 | 31390 | PHARYNGOLARYNGECTOMY WITH RADICA | 1/1/2007 | $281.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 31395 | PHARYNOGOLARYNGECTOMY WITH RADIC | 1/1/2007 | $321.26 | 3 |
| 8 | 31400 | ARYTENOIDECTOMY OR ARYTENOIDOPEX | 1/1/2007 | $129.39 | 3 |
| 8 | 31420 | EPIGLOTTIDECTOMY | 1/1/2007 | $106.91 | 3 |
| 8 | 31580 | LARYNGOPLASTY FOR LARYNGEAL WEB | 1/1/2007 | $152.17 | 3 |
| 8 | 31584 | LARYNGOPLASTY; WITH OPEN REDUCTI | 1/1/2007 | $205.11 | 3 |
| 8 | 31585 | TREATMENT OF CLOSED LARYNGEAL FR | 1/1/2006 | INVALID | N |
| 8 | 31586 | TREATMENT OF CLOSED LARYNGEAL FR | 1/1/2006 | INVALID | N |
| 8 | 31587 | LARYNGOPLASTY, CRICOID SPLIT | 1/1/2007 | $115.37 | 3 |
| 8 | 31588 | LARYNGOPLASTY, NOT OTHERWISE SPE | 1/1/2007 | $144.28 | 3 |
| 8 | 31590 | LARYNGEAL REINNERVATION BY NEURO | 1/1/2007 | $121.34 | 3 |
| 8 | 31595 | SECTION RECURRENT LARYNGEAL NERV | 1/1/2007 | $101.67 | 3 |
| 8 | 31601 | TRACHEOSTOMY PLANNED (SEPARATE P | 1/1/2007 | $37.63 | 3 |
| 8 | 31611 | CONSTRUCTION OF TRACHEOESOPHAGEA | 1/1/2007 | $68.35 | 3 |
| 8 | 31700 | CATHETERIZATION TRANSGLOTIC (SEP | 1/1/2007 | INVALID | N |
| 8 | 31708 | INSTILLATION OF CONTRAST MATERIA | 1/1/2007 | INVALID | N |
| 8 | 31710 | CATHETERIZATION FOR BRONCHOGRAPH | 1/1/2007 | INVALID | N |
| 8 | 31750 | TRACHEOPLASTY; CERVICAL | 1/1/2007 | $164.26 | 3 |
| 8 | 31755 | TRACHEOPLASTY; TRACHEOPHARYNGEAL | 1/1/2007 | $216.89 | 3 |
| 8 | 31760 | TRACHEOPLASTY; INTRATHORACIC | 1/1/2007 | $186.84 | 3 |
| 8 | 31766 | CARINAL RECONSTRUCTION | 1/1/2007 | $252.18 | 3 |
| 8 | 31770 | BRONCHOPLASTY GRAFT REPAIR | 1/1/2007 | $184.66 | 3 |
| 8 | 31775 | BRONCHOPLASTY; EXCISION STENOSIS | 1/1/2007 | $198.93 | 3 |
| 8 | 31780 | EXCISION TRACHEAL STENOSIS AND A | 1/1/2007 | $157.88 | 3 |
| 8 | 31781 | EXCISION TRACHEAL STENOSIS AND A | 1/1/2007 | $196.65 | 3 |
| 8 | 31785 | EXCISION OF TRACHEAL TUMOR OR CA | 1/1/2007 | $150.51 | 3 |
| 8 | 31786 | EXCISION OF TRACHEAL TUMOR OR CA | 1/1/2007 | $209.47 | 3 |
| 8 | 31805 | SUTURE OF EXTERNAL TRACHEAL WOUN | 1/1/2007 | $115.01 | 3 |
| 8 | 32035 | THORACOSTOMY WITH RIB RESECTION | 1/1/2007 | $81.95 | 3 |
| 8 | 32036 | THORACOSTOMY; WITH OPEN FLAP DRA | 1/1/2007 | $91.08 | 3 |
| 8 | 32095 | THORACOTOMY LIMITED FOR BIOPSY O | 1/1/2007 | $77.59 | 3 |
| 8 | 32100 | THORACOTOMY MAJOR WITH EXPLORATI | 1/1/2007 | $131.26 | 3 |
| 8 | 32110 | THORACOTOMY MAJOR; WITH CONTROL | 1/1/2007 | $191.72 | 3 |
| 8 | 32120 | THORACTOMY MAJOR; FOR POSTOPERAT | 1/1/2007 | $105.05 | 3 |
| 8 | 32124 | THORACOTOMY MAJOR; WITH OPEN INT | 1/1/2007 | $113.25 | 3 |
| 8 | 32140 | THORACOTOMY MAJOR; WITH CYST(S) | 1/1/2007 | $122.33 | 3 |
| 8 | 32141 | THORACOTOMY MAJOR; WITH EXCISION | 1/1/2007 | $122.22 | 3 |
| 8 | 32150 | THORACOTOMY MAJOR; WITH REMOVAL | 1/1/2007 | $123.26 | 3 |
| 8 | 32151 | THORACOTOMY MAJOR; WITH REMOVAL | 1/1/2007 | $125.81 | 3 |
| 8 | 32160 | THORACOTOMY MAJOR; WITH CARDIAC | 1/1/2007 | $82.42 | 3 |
| 8 | 32200 | PNEUMONOSTOMY WITH OPEN DRAINAGE | 1/1/2007 | $135.10 | 3 |
| 8 | 32201 | PNEUMONOSTOMY; WITH PERCUTANEOUS | 1/1/2007 | $129.70 | 3 |
| 8 | 32215 | PLEURAL SCARIFICATION FOR REPEAT | 1/1/2007 | $103.33 | 3 |
| 8 | 32220 | DECORTICATION PULMONARY (SEPARAT | 1/1/2007 | $210.25 | 3 |
| 8 | 32225 | DECORTICATION PULMONARY (SEPARAT | 1/1/2007 | $122.85 | 3 |
| 8 | 32310 | PLEURECTOMY, PARIETAL (SEPARATE | 1/1/2007 | $118.44 | 3 |
| 8 | 32320 | DECORTICATION AND PARIETAL PLEUR | 1/1/2007 | $205.84 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 32402 | BIOPSY PLEURA; OPEN | 1/1/2007 | $71.31 | 3 |
| 8 | 32440 | REMOVAL OF LUNG, TOTAL PNEUMONEC | 1/1/2007 | $215.75 | 3 |
| 8 | 32442 | REMOVALK OF LUNG, WITH RESECTION | 1/1/2007 | $232.72 | 3 |
| 8 | 32445 | REMOVAL OF LUNG, TOTAL PNEUMONEC | 1/1/2007 | $222.44 | 3 |
| 8 | 32480 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $203.92 | 3 |
| 8 | 32482 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $215.75 | 3 |
| 8 | 32484 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $182.17 | 3 |
| 8 | 32486 | REMOVAL OF LUNG, WITH CIRCUMFERE | 1/1/2007 | $211.08 | 3 |
| 8 | 32488 | REMOVAL OF LUNG, ALL REMAINING L | 1/1/2007 | $224.68 | 3 |
| 8 | 32500 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $195.20 | 3 |
| 8 | 32501 | RESECTION AND REPAIR OF PORTION | 1/1/2007 | $35.66 | 3 |
| 8 | 32503 | RESECTION OF APICAL LUNG TUMOR, | 1/1/2006 | $256.80 | 3 |
| 8 | 32504 | RESECTION OF APICAL LUNG TUMOR, | 1/1/2006 | $293.70 | 3 |
| 8 | 32520 | RESECTION OF LUNG WITH RESECTION | 1/1/2006 | INVALID | N |
| 8 | 32522 | RESECTION OF LUNG; WITH RECONSTR | 1/1/2006 | INVALID | N |
| 8 | 32525 | RESECTION OF LUNG; WITH MAJOR RE | 1/1/2006 | INVALID | N |
| 8 | 32540 | EXTRAPLEURAL ENUCLEATION OF EMPY | 1/1/2007 | $136.76 | 3 |
| 8 | 32650 | THORACOSCOPY, SURGICAL; WITH PLE | 1/1/2007 | $99.08 | 3 |
| 8 | 32651 | THORACOSCOPY, SURGICAL; WITH PAR | 1/1/2007 | $114.18 | 3 |
| 8 | 32652 | THORACOSCOPY, SURGICAL; WITH TOT | 1/1/2007 | $163.59 | 3 |
| 8 | 32653 | THORACOSCOPY, SURGICAL; WITH REM | 1/1/2007 | $112.73 | 3 |
| 8 | 32654 | THORACOSCOPY, SURGICAL; WITH CON | 1/1/2007 | $112.10 | 3 |
| 8 | 32655 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $115.37 | 3 |
| 8 | 32656 | THORACOSCOPY, SURGICAL; WITH PAR | 1/1/2007 | $118.02 | 3 |
| 8 | 32657 | THORACOSCOPY, SURGICAL; WITH WED | 1/1/2007 | $121.03 | 3 |
| 8 | 32658 | THORACOSCOPY, SURGICAL; WITH REM | 1/1/2007 | $107.28 | 3 |
| 8 | 32659 | THORACOSCOPY, SURGICAL; WITH CRE | 1/1/2007 | $107.23 | 3 |
| 8 | 32660 | THORACOSCOPY, SURGICAL; WITH TOT | 1/1/2007 | $150.46 | 3 |
| 8 | 32661 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $119.16 | 3 |
| 8 | 32662 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $142.41 | 3 |
| 8 | 32663 | THORACOSCOPY, SURGICAL; WITH LOB | 1/1/2007 | $165.82 | 3 |
| 8 | 32664 | THORACOSCOPY, SURGICAL; WITH THO | 1/1/2007 | $125.34 | 3 |
| 8 | 32665 | THORACOSCOPY, SURGICAL; WITH ESO | 1/1/2007 | $134.01 | 3 |
| 8 | 32800 | REPAIR LUNG HERNIA THROUGH CHEST | 1/1/2007 | $119.79 | 3 |
| 8 | 32810 | CLOSURE OF CHEST WALL FOLLOWING | 1/1/2007 | $116.78 | 3 |
| 8 | 32815 | OPEN CLOSURE OF MAJOR BRONCHIAL | 1/1/2007 | $194.05 | 3 |
| 8 | 32820 | MAJOR RECONSTRUCTION CHEST WALL | 1/1/2007 | $187.72 | 3 |
| 8 | 32851 | LUNG TRANSPLANT, SINGLE; WITHOUT | 1/1/2007 | $373.01 | 3 |
| 8 | 32852 | LUNG TRANSPLANT, SINGLE; WITH CA | 1/1/2007 | $420.39 | 3 |
| 8 | 32853 | LUNG TRANSPLANT, DOUBLE; WITHOUT | 1/1/2007 | $449.61 | 3 |
| 8 | 32854 | LUNG TRANSPLANT, DOUBLE; WITH CA | 1/1/2007 | $482.31 | 3 |
| 8 | 32855 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 8 | 32856 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 8 | 32900 | RESECTION OF RIBS EXTRAPLEURAL A | 1/1/2007 | $171.69 | 3 |
| 8 | 32905 | THORACOPLASTY SCHEDE TYPE OR EXT | 1/1/2007 | $176.62 | 3 |
| 8 | 32906 | THORACOPLASTY SCHEDE TYPE OR EXT | 1/1/2007 | $222.08 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 32940 | PNEUMONOLYSIS EXTRAPERIOSTEAL IN | 1/1/2007 | $164.94 | 3 |
| 8 | 32998 | ABLATION THERAPY FOR REDUCTION O | 1/1/2007 | NC | 9 |
| 8 | 32999 | UNLISTED PROCEDURE LUNGS AND PLE | 2/1/1994 | $0.01 | 5 |
| 8 | 33020 | PERICARDIOTOMY FOR REMOVAL OF CL | 1/1/2007 | $109.92 | 3 |
| 8 | 33025 | CREATION OR PERICARDIAL WINDOW O | 1/1/2007 | $105.05 | 3 |
| 8 | 33030 | PERICARDIECTOMY, SUBTOTAL OR COM | 1/1/2007 | $161.20 | 3 |
| 8 | 33031 | PERICARDIECTOMY, SUBTOTAL OR COM | 1/1/2007 | $181.39 | 3 |
| 8 | 33050 | EXCISION OF PERICARDIAL CYST OR | 1/1/2007 | $126.32 | 3 |
| 8 | 33120 | EXCISION OF INTRACARDIAC TUMOR R | 1/1/2007 | $206.67 | 3 |
| 8 | 33130 | RESECTION OF EXTERNAL CARDIAC TU | 1/1/2007 | $179.06 | 3 |
| 8 | 33141 | TRANSMYOCARDIAL LASER REVASCULAR | 1/1/2007 | $36.85 | 3 |
| 8 | 33200 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | INVALID | N |
| 8 | 33201 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | INVALID | N |
| 8 | 33238 | REMOVAL OF PERMANENT TRANSVENOUS | 1/1/2007 | $132.03 | 3 |
| 8 | 33243 | REMOVAL OF IMPLANTABLE CARDIOVER | 1/1/2007 | $187.83 | 3 |
| 8 | 33245 | IMPLANTATION OR REPLACEMENT OF I | 1/1/2007 | INVALID | N |
| 8 | 33246 | IMPLANT/REPLACE. OF IMPLANT. CAR | 1/1/2007 | INVALID | N |
| 8 | 33250 | OPER ABLATION OF SUPRAVENTRICULA | 1/1/2007 | $187.10 | 3 |
| 8 | 33251 | OPER ABLATION OF SUPRAVENTRICULA | 1/1/2007 | $208.22 | 3 |
| 8 | 33253 | OPERATIVE INCISIONS AND RECONSTR | 1/1/2007 | INVALID | N |
| 8 | 33254 | OPERATIVE TISSUE ABLATION AND RE | 1/1/2007 | $191.36 | 3 |
| 8 | 33255 | OPERATIVE TISSUE ABLATION AND RE | 1/1/2007 | $230.54 | 3 |
| 8 | 33256 | OPERATIVE TISSUE ABLATION AND RE | 1/1/2007 | $275.54 | 3 |
| 8 | 33261 | OPERATIVE ABLATION OF VENTRICULA | 1/1/2007 | $208.07 | 3 |
| 8 | 33265 | ENDOSCOPY, SURGICAL; OPERATIVE T | 1/1/2007 | $191.36 | 3 |
| 8 | 33266 | ENDOSCOPY, SURGICAL; OPERATIVE T | 1/1/2007 | $262.15 | 3 |
| 8 | 33300 | REPAIR OF CARDIAC WOUND WITHOUT | 1/1/2007 | $154.66 | 3 |
| 8 | 33305 | REPAIR OF CARDIAC WOUND; WITH CA | 1/1/2007 | $182.53 | 3 |
| 8 | 33310 | CARDIOTOMY EXPLORATORY (INCLUDES | 1/1/2007 | $159.18 | 3 |
| 8 | 33315 | CARDIOTOMY EXPLORATORY (INCLUDES | 1/1/2007 | $189.54 | 3 |
| 8 | 33320 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $140.49 | 3 |
| 8 | 33321 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $170.65 | 3 |
| 8 | 33322 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $175.58 | 3 |
| 8 | 33330 | INSERTION OF GRAFT, AORTA OR GRE | 1/1/2007 | $179.06 | 3 |
| 8 | 33332 | INSERTION OF GRAFT, AORTA OR GRE | 1/1/2007 | $194.52 | 3 |
| 8 | 33335 | INSERTION OF GRAFT; WITH CARDIOP | 1/1/2007 | $247.04 | 3 |
| 8 | 33400 | VALVULOPLASTY, AORTIC VALVE, OPE | 1/1/2007 | $250.52 | 3 |
| 8 | 33401 | VALVULOPLASTY, AORTIC VALVE; OPE | 1/1/2007 | $212.63 | 3 |
| 8 | 33403 | VALVULOPLASTY, AORTIC VALVE; USI | 1/1/2007 | $221.77 | 3 |
| 8 | 33404 | CONSTRUCTION OF APICAL-AORTIC CO | 1/1/2007 | $246.01 | 3 |
| 8 | 33405 | REPLACEMENT, AORTIC VALVE, WITH | 1/1/2007 | $304.13 | 3 |
| 8 | 33406 | REPLACEMENT, AORTIC VALVE; WITH | 1/1/2007 | $322.04 | 3 |
| 8 | 33410 | REPLACEMENT, AORTIC VALVE, W/CAR | 1/1/2007 | $278.81 | 3 |
| 8 | 33411 | REPLACEMENT AORTIC VALVE WITH AO | 1/1/2007 | $313.74 | 3 |
| 8 | 33412 | REPLACEMENT AORTIC VALVE WITH TR | 1/1/2007 | $356.92 | 3 |
| 8 | 33413 | REPLACEMENT, AORTIC VALVE; BY TR | 1/1/2007 | $367.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 33414 | REPAIR OF LEFT VENTRICULAR OUTFL | 1/1/2007 | $254.47 | 3 |
| 8 | 33415 | RESECTION OR INCISION OF SUBVALV | 1/1/2007 | $224.68 | 3 |
| 8 | 33416 | VENTRICULOMYOTOMY (-MYECTOMY) FO | 1/1/2007 | $251.20 | 3 |
| 8 | 33417 | AORTOPLASTY (GUSSET) FOR SUPRAVA | 1/1/2007 | $239.93 | 3 |
| 8 | 33420 | VALVOTOMY MITRAL VALVE; CLOSED H | 1/1/2007 | $176.82 | 3 |
| 8 | 33422 | VALVOTOMY MITRAL VALVE; OPEN HEA | 1/1/2007 | $225.87 | 3 |
| 8 | 33425 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $228.93 | 3 |
| 8 | 33426 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $286.18 | 3 |
| 8 | 33427 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $339.58 | 3 |
| 8 | 33430 | REPLACEMENT, MITRAL VALVE, WITH | 1/1/2007 | $289.97 | 3 |
| 8 | 33460 | VALVECTOMY, TRICUSPID VALVE, WIT | 1/1/2007 | $198.93 | 3 |
| 8 | 33463 | VALVULOPLASTY, TRICUSPID VALVE; | 1/1/2007 | $220.00 | 3 |
| 8 | 33464 | VALVULOPLASTY, TRICUSPID VALVE; | 1/1/2007 | $233.50 | 3 |
| 8 | 33465 | REPLACEMENT, TRICUSPID VALVE, WI | 1/1/2007 | $239.41 | 3 |
| 8 | 33468 | TRICUSPID VALVE REPOSITIONING AN | 1/1/2007 | $248.19 | 3 |
| 8 | 33470 | VALVOTOMY, PULMONARY VALVE, CLOS | 1/1/2007 | $168.83 | 3 |
| 8 | 33471 | VALVOTOMY, PULMONARY VALVE, CLOS | 1/1/2007 | $183.62 | 3 |
| 8 | 33472 | VALVOTOMY, PULMONARY VALVE, OPEN | 1/1/2007 | $195.40 | 3 |
| 8 | 33474 | VALVOTOMY PULMONARY VALVE (COMMI | 1/1/2007 | $192.70 | 3 |
| 8 | 33475 | REPLACEMENT, PULMONARY VALVE | 1/1/2007 | $276.52 | 3 |
| 8 | 33476 | RIGHT VENTRICULAR RESECTION FOR | 1/1/2007 | $208.27 | 3 |
| 8 | 33478 | OUTFLOW TRACT AUGMENTATION (GUSS | 1/1/2007 | $226.65 | 3 |
| 8 | 33496 | REPAIR OF NON-STRUCTURAL PROSTHE | 1/1/2007 | $228.93 | 3 |
| 8 | 33500 | REPAIR OF CORONARY ARTERIOVENOUS | 1/1/2007 | $212.06 | 3 |
| 8 | 33501 | REPAIR OF CORONARY ARTERIOVENOUS | 1/1/2007 | $145.06 | 3 |
| 8 | 33502 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $182.17 | 3 |
| 8 | 33503 | ANOMALOUS CORONARY ARTERY; GRAFT | 1/1/2007 | $172.72 | 3 |
| 8 | 33504 | ANOMALOUS CORONARY ARTERY; GRAFT | 1/1/2007 | $206.61 | 3 |
| 8 | 33505 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $217.56 | 3 |
| 8 | 33506 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $283.89 | 3 |
| 8 | 33507 | REPAIR OF ANOMALOUS AORTIC ORIGI | 1/1/2006 | $247.72 | 3 |
| 8 | 33508 | ENDOSCOPY, SURGICAL, INCLUDING V | 1/1/2007 | $2.34 | 3 |
| 8 | 33510 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $258.15 | 3 |
| 8 | 33511 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $267.96 | 3 |
| 8 | 33512 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $280.57 | 3 |
| 8 | 33513 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $283.63 | 3 |
| 8 | 33514 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $288.36 | 3 |
| 8 | 33516 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $305.74 | 3 |
| 8 | 33517 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $19.72 | 3 |
| 8 | 33518 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $37.11 | 3 |
| 8 | 33519 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $54.39 | 3 |
| 8 | 33521 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $71.83 | 3 |
| 8 | 33522 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $89.48 | 3 |
| 8 | 33523 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $106.86 | 3 |
| 8 | 33530 | REOPERATION, CORONARY ARTERY BYP | 1/1/2007 | $44.89 | 3 |
| 8 | 33533 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $264.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 33534 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $283.37 | 3 |
| 8 | 33535 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $299.15 | 3 |
| 8 | 33536 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $317.63 | 3 |
| 8 | 33542 | MYOCARDIAL RESECTION (EG VENTRIC | 1/1/2007 | $239.83 | 3 |
| 8 | 33545 | REPAIR OF POSTINFARCTION VENTRIC | 1/1/2007 | $298.84 | 3 |
| 8 | 33548 | SURGICAL VENTRICULAR RESTORATION | 4/1/2006 | NC | 9 |
| 8 | 33572 | CORONARY ENDARTERECTOMY, OPEN, A | 1/1/2007 | $33.94 | 3 |
| 8 | 33600 | CLOSURE OF ATRIOVENTRICULAR VALV | 1/1/2007 | $240.97 | 3 |
| 8 | 33602 | CLOSURE OF SEMILUNAR VALVE (AORT | 1/1/2007 | $232.46 | 3 |
| 8 | 33606 | ANASTOMOSIS OF PULMONARY ARTERY | 1/1/2007 | $253.27 | 3 |
| 8 | 33608 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $259.03 | 3 |
| 8 | 33610 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $253.01 | 3 |
| 8 | 33611 | REPAIR OF DOUBLE OUTLET RIGHT VE | 1/1/2007 | $272.37 | 3 |
| 8 | 33612 | REPAIR OF DOUBLE OUTLET RIGHT VE | 1/1/2007 | $287.63 | 3 |
| 8 | 33615 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $266.97 | 3 |
| 8 | 33617 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $304.24 | 3 |
| 8 | 33619 | REPAIR OF SINGLE VENTRICLE WITH | 1/1/2007 | $374.87 | 3 |
| 8 | 33641 | REPAIR ATRIAL SEPTAL DEFECT, SEC | 1/1/2007 | $177.39 | 3 |
| 8 | 33645 | DIRECT OR PATCH CLOSURE SINUS VE | 1/1/2007 | $209.47 | 3 |
| 8 | 33647 | REPAIR OF ATRIAL SEPTAL DEFECT A | 1/1/2007 | $237.75 | 3 |
| 8 | 33660 | REPAIR OF INCOMPLETE OR PARTIAL | 1/1/2007 | $248.91 | 3 |
| 8 | 33665 | REPAIR OF INTERMEDIATE OR TRANSI | 1/1/2007 | $240.92 | 3 |
| 8 | 33670 | REPAIR OF COMPLETE ATRIOVENTRICU | 1/1/2007 | $274.03 | 3 |
| 8 | 33675 | CLOSURE OF MULTIPLE VENTRICULAR | 1/1/2007 | $304.34 | 3 |
| 8 | 33676 | CLOSURE OF MULTIPLE VENTRICULAR | 1/1/2007 | $313.89 | 3 |
| 8 | 33677 | CLOSURE OF MULTIPLE VENTRICULAR | 1/1/2007 | $326.30 | 3 |
| 8 | 33681 | CLOSURE OF VENTRICULAR SEPTAL DE | 1/1/2007 | $258.05 | 3 |
| 8 | 33684 | CLO;SURE VENTRICULAR SEPTAL DEFE | 1/1/2007 | $242.11 | 3 |
| 8 | 33688 | CLOSURE VENTRICULAR SEPTAL DEFEC | 1/1/2007 | $237.65 | 3 |
| 8 | 33690 | BANDING OF PULMONARY ARTERY | 1/1/2007 | $164.37 | 3 |
| 8 | 33692 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $255.50 | 3 |
| 8 | 33694 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $277.51 | 3 |
| 8 | 33697 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $285.14 | 3 |
| 8 | 33702 | REPAIR SINUS OF VALSALVA FISTULA | 1/1/2007 | $221.98 | 3 |
| 8 | 33710 | REPAIR SINUS OF VALSALVA FISTULA | 1/1/2007 | $249.59 | 3 |
| 8 | 33720 | REPAIR SINUS OF VALSALVA ANEURYS | 1/1/2007 | $221.46 | 3 |
| 8 | 33722 | CLOSURE OF AORTICO-LEFT VENTRICU | 1/1/2007 | $226.08 | 3 |
| 8 | 33724 | REPAIR OF ISOLATED PARTIAL ANOMA | 1/1/2007 | $218.55 | 3 |
| 8 | 33726 | REPAIR OF PULMONARY VENOUS STENO | 1/1/2007 | $288.20 | 3 |
| 8 | 33730 | COMPLETE REPAIR OF ANOMALOUS VEN | 1/1/2007 | $276.99 | 3 |
| 8 | 33732 | REPAIR OF COR TRIATRIATUM OR SUP | 1/1/2007 | $234.64 | 3 |
| 8 | 33735 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $167.38 | 3 |
| 8 | 33736 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $199.50 | 3 |
| 8 | 33737 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $186.48 | 3 |
| 8 | 33750 | SHUNT SUBCLAVIAN TO PULMONARY AR | 1/1/2007 | $170.13 | 3 |
| 8 | 33755 | SHUNT; ASCENDING AORTA TO PULMON | 1/1/2007 | $175.63 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 33762 | SHUNT; DESCENDING AORTA TO PULMO | 1/1/2007 | $182.01 | 3 |
| 8 | 33764 | SHUNT CENTRAL WITH PROSTHETIC GR | 1/1/2007 | $181.70 | 3 |
| 8 | 33766 | SHUNT; SUPERIOR VENA CAVA TO PUL | 1/1/2007 | $197.84 | 3 |
| 8 | 33767 | SHUNT; SUPERIOR VENA CAVA TO PUL | 1/1/2007 | $207.70 | 3 |
| 8 | 33768 | ANASTOMOSIS, CAVOPULMONARY, SECO | 1/1/2006 | $61.55 | 3 |
| 8 | 33770 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $297.80 | 3 |
| 8 | 33771 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $273.41 | 3 |
| 8 | 33774 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $261.73 | 3 |
| 8 | 33775 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $270.71 | 3 |
| 8 | 33776 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $284.98 | 3 |
| 8 | 33777 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $283.06 | 3 |
| 8 | 33778 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $327.28 | 3 |
| 8 | 33779 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $282.75 | 3 |
| 8 | 33780 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $334.76 | 3 |
| 8 | 33781 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $289.19 | 3 |
| 8 | 33786 | TOTAL REPAIR TRUNCUS ARTERIOSUS | 1/1/2007 | $318.61 | 3 |
| 8 | 33788 | REIMPLANTATION OF AN ANOMALOUS P | 1/1/2007 | $220.99 | 3 |
| 8 | 33800 | AORTIC SUSPENSION FOR TRACHEAL D | 1/1/2007 | $139.09 | 3 |
| 8 | 33802 | DIVISION OF ABERRANT VESSEL (VAS | 1/1/2007 | $151.24 | 3 |
| 8 | 33803 | DIVISION OF ABERRANT VESSEL (VAS | 1/1/2007 | $168.93 | 3 |
| 8 | 33813 | OBLITERATION OF AORTOPULMONARY S | 1/1/2007 | $179.99 | 3 |
| 8 | 33814 | OBLITERATION OF AORTOPULMONARY S | 1/1/2007 | $219.28 | 3 |
| 8 | 33820 | REPAIR OF PATENT DUCTUS ARTERIOS | 1/1/2007 | $140.08 | 3 |
| 8 | 33822 | PATENT DUCTUS ARTERIOSUS; DIVISI | 1/1/2007 | $150.20 | 3 |
| 8 | 33824 | PATENT DUCTUS ARTERIOSUS; DIVISI | 1/1/2007 | $168.05 | 3 |
| 8 | 33840 | EXCISION OF COARCTATION OF AORTA | 1/1/2007 | $171.63 | 3 |
| 8 | 33845 | EXCISION OF COARCTATION OF AORTA | 1/1/2007 | $190.37 | 3 |
| 8 | 33851 | EXCIS OF COARCTATION OF AORTA,W/ | 1/1/2007 | $182.27 | 3 |
| 8 | 33852 | REPAIR OF HYPOPLASTIC OR INTERRU | 1/1/2007 | $193.12 | 3 |
| 8 | 33853 | REPAIR OF HYPOPLASTIC OR INTERRU | 1/1/2007 | $264.69 | 3 |
| 8 | 33860 | ASCENDING AORTA GRAFT, W/CARDIOP | 1/1/2007 | $312.33 | 3 |
| 8 | 33861 | ASCENDING AORTA GRAFT, WITH CARI | 1/1/2007 | $342.80 | 3 |
| 8 | 33863 | ASCENDING AORTA GRAFT WITH CARDI | 1/1/2007 | $364.55 | 3 |
| 8 | 33870 | TRANSVERSE ARCH GRAFT, WITH CARD | 1/1/2007 | $357.90 | 3 |
| 8 | 33875 | DESCENDING THORACIC AORTA GRAFT | 1/1/2007 | $269.98 | 3 |
| 8 | 33877 | REPAIR OF THORACOABDOMINAL AORTI | 1/1/2007 | $336.42 | 3 |
| 8 | 33880 | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | $255.61 | 3 |
| 8 | 33881 | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | $219.59 | 3 |
| 8 | 33883 | PLACEMENT OF PROXIMAL EXTENSION | 1/1/2006 | $162.50 | 3 |
| 8 | 33884 | PLACEMENT OF PROXIMAL EXTENSION | 1/1/2006 | $60.41 | 3 |
| 8 | 33886 | PLACEMENT OF DISTAL EXTENSION PR | 1/1/2006 | $140.34 | 3 |
| 8 | 33889 | OPEN SUBCLAVIAN TO CAROTID ARTER | 1/1/2006 | $120.82 | 3 |
| 8 | 33891 | BYPASS GRAFT, W/OTHER THAN VEIN, | 1/1/2006 | $154.14 | 3 |
| 8 | 33910 | PULMONARY ARTERY EMBOLECTOMY; WI | 1/1/2007 | $206.04 | 3 |
| 8 | 33915 | PULMONARY ARTERY EMBOLECTOMY; WI | 1/1/2007 | $166.55 | 3 |
| 8 | 33916 | PULMONARY ENDARTERECTOMY WITH OR | 1/1/2007 | $211.86 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 33917 | REPAIR OF PULMONARY ARTERY STENO | 1/1/2007 | $209.52 | 3 |
| 8 | 33918 | REPAIR OF PULMONARY ATRESIA WITH | 1/1/2006 | INVALID | N |
| 8 | 33919 | REPAIR OF PULMONARY ATRESIA WITH | 1/1/2006 | INVALID | N |
| 8 | 33920 | REPAIR OF PULMONARY ATRESIA WITH | 1/1/2007 | $260.17 | 3 |
| 8 | 33922 | TRANSECTION OF PULMONARY ARTERY | 1/1/2007 | $194.63 | 3 |
| 8 | 33924 | LIGATION AND TAKEDOWN OF A SYSTE | 1/1/2007 | $42.35 | 3 |
| 8 | 33925 | REPAIR OF PULMONARY ARTERY ARBOR | 1/1/2006 | $253.27 | 3 |
| 8 | 33926 | REPAIR OF PULMONARY ARTERY ARBOR | 1/1/2006 | $342.18 | 3 |
| 8 | 33930 | DONOR CARDIECTOMY-PNEUMONECTOMY | 8/1/1986 | NC | 9 |
| 8 | 33933 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 8 | 33935 | HEART LUNG TRANSPLANT WITH RECIP | 1/1/2007 | $512.51 | 3 |
| 8 | 33940 | DONOR CARDIECTOMY (INCLUDING COL | 7/17/1987 | NC | 9 |
| 8 | 33944 | BACKBENCH STANDARD PREP OF CADAV | 4/26/2006 | $116.18 | 3 |
| 8 | 33945 | HEART TRANSPLANT WITH OR WITHOUT | 1/1/2007 | $361.90 | 3 |
| 8 | 33968 | REMOVAL OF INTRA-AORTIC BALLOON | 1/1/2007 | $4.88 | 3 |
| 8 | 33970 | INSERTION OF INTRA-AORTIC BALLOO | 1/1/2007 | $51.12 | 3 |
| 8 | 33973 | INSERTION OF INTRA-AORTIC BALLOO | 1/1/2007 | $74.37 | 3 |
| 8 | 33975 | INSERTION OF VENTRICULAR ASSIST | 1/1/2007 | $157.41 | 3 |
| 8 | 33976 | INSERTION OF VENTRICULAR ASSIST | 1/1/2007 | $175.37 | 3 |
| 8 | 33977 | REMOVAL OF VENTRICULAR ASSIST DE | 1/1/2007 | $172.10 | 3 |
| 8 | 33978 | REMOVAL OF VENTRICULAR ASSIST DE | 1/1/2007 | $190.89 | 3 |
| 8 | 33999 | UNLISTED PROCEDURE CARDIAC SURGE | 4/1/1982 | $0.01 | 5 |
| 8 | 34001 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $111.38 | 3 |
| 8 | 34051 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $130.74 | 3 |
| 8 | 34101 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $87.04 | 3 |
| 8 | 34111 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $86.98 | 3 |
| 8 | 34151 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $202.10 | 3 |
| 8 | 34201 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $87.66 | 3 |
| 8 | 34203 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $139.66 | 3 |
| 8 | 34401 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $201.06 | 3 |
| 8 | 34421 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $102.97 | 3 |
| 8 | 34451 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $219.33 | 3 |
| 8 | 34471 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $86.47 | 3 |
| 8 | 34490 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $86.67 | 3 |
| 8 | 34501 | VALVULOPLASTY FEMORAL VEIN | 1/1/2007 | $139.25 | 3 |
| 8 | 34502 | RECONSTRUCTION OF VENA CAVA, ANY | 1/1/2007 | $222.44 | 3 |
| 8 | 34510 | VENOUS VALVE TRANSPOSITION ANY V | 1/1/2007 | $159.23 | 3 |
| 8 | 34520 | CROSS-OVER VEIN GRAFT TO VENOUS | 1/1/2007 | $148.80 | 3 |
| 8 | 34530 | SAPHENOPOPLITEAL VEIN ANASTOMOSI | 1/1/2007 | $140.03 | 3 |
| 8 | 34800 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $167.95 | 3 |
| 8 | 34802 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $182.17 | 3 |
| 8 | 34803 | ENDOVASCULAR REPAIR OF INFRARENA | 1/1/2007 | $188.09 | 3 |
| 8 | 34804 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $182.12 | 3 |
| 8 | 34805 | ENDOVASCULAR REPAIR OF INFRARENA | 1/1/2007 | $173.97 | 3 |
| 8 | 34808 | ENDOVASCULAR PLACEMENT OF ILIAC | 1/1/2007 | $31.56 | 3 |
| 8 | 34812 | OPEN FEMORAL ARTERY EXPOSURE FOR | 1/1/2007 | $52.73 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 34813 | PLACEMENT OF FEMORAL-FEMORAL PRO | 1/1/2007 | $36.49 | 3 |
| 8 | 34820 | OPEN ILIAC ARTERY EXPOSURE FOR D | 1/1/2007 | $75.15 | 3 |
| 8 | 34825 | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2007 | $100.79 | 3 |
| 8 | 34826 | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2007 | $30.78 | 3 |
| 8 | 34830 | OPEN REPAIR OF INFRARENAL AORTIC | 1/1/2007 | $263.70 | 3 |
| 8 | 34831 | OPEN REPAIR OF INFRERENAL AORTIC | 1/1/2007 | $269.52 | 3 |
| 8 | 34832 | OPEN REPAIR OF INFRARENAL AORTIC | 1/1/2007 | $284.36 | 3 |
| 8 | 34833 | OPEN ILIAC ARTERY EXPOSURE W/CRE | 1/1/2007 | $93.99 | 3 |
| 8 | 34834 | OPEN BRACHIAL ARTERY EXPOSURE TO | 1/1/2007 | $43.08 | 3 |
| 8 | 34900 | ENDOVASCULAR GRAFT REPLACEMENT F | 1/1/2007 | $134.68 | 3 |
| 8 | 35001 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $166.03 | 3 |
| 8 | 35002 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $174.80 | 3 |
| 8 | 35005 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $149.06 | 3 |
| 8 | 35011 | DIRECT REPAIR OF ANEURYSM, FALSE | 1/1/2007 | $147.97 | 3 |
| 8 | 35013 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $180.40 | 3 |
| 8 | 35021 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $165.66 | 3 |
| 8 | 35022 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $187.83 | 3 |
| 8 | 35045 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $142.73 | 3 |
| 8 | 35081 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $225.56 | 3 |
| 8 | 35082 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $307.20 | 3 |
| 8 | 35091 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $280.62 | 3 |
| 8 | 35092 | DIR. REPAIR OF ANEURYSM/EXCISION | 1/1/2007 | $358.06 | 3 |
| 8 | 35102 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $246.89 | 3 |
| 8 | 35103 | DIR. REPAIR OF ANEURYSM/EXCISION | 1/1/2007 | $322.14 | 3 |
| 8 | 35111 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $201.94 | 3 |
| 8 | 35112 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $238.84 | 3 |
| 8 | 35121 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $242.11 | 3 |
| 8 | 35122 | DIRECT REPAIR OF ANEURYSM/EXCISI | 1/1/2007 | $277.82 | 3 |
| 8 | 35131 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $205.11 | 3 |
| 8 | 35132 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $242.17 | 3 |
| 8 | 35141 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $165.04 | 3 |
| 8 | 35142 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $192.08 | 3 |
| 8 | 35151 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $186.06 | 3 |
| 8 | 35152 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $210.61 | 3 |
| 8 | 35161 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2005 | INVALID | N |
| 8 | 35162 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2005 | INVALID | N |
| 8 | 35180 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $111.90 | 3 |
| 8 | 35182 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $244.66 | 3 |
| 8 | 35184 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $149.47 | 3 |
| 8 | 35188 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $124.87 | 3 |
| 8 | 35189 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $228.05 | 3 |
| 8 | 35190 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $109.04 | 3 |
| 8 | 35201 | REPAIR BLOOD VESSEL DIRECT NECK | 1/1/2007 | $137.33 | 3 |
| 8 | 35206 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $112.42 | 3 |
| 8 | 35207 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $98.51 | 3 |
| 8 | 35211 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $186.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 35216 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $157.57 | 3 |
| 8 | 35221 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $195.51 | 3 |
| 8 | 35226 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $124.25 | 3 |
| 8 | 35231 | REPAIR BLOOD VESSEL WITH VEIN GR | 1/1/2007 | $169.40 | 3 |
| 8 | 35236 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $142.21 | 3 |
| 8 | 35241 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $195.97 | 3 |
| 8 | 35246 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $216.47 | 3 |
| 8 | 35251 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $239.21 | 3 |
| 8 | 35256 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $152.17 | 3 |
| 8 | 35261 | REPAIR BLOOD VESSEL WITH GRAFT O | 1/1/2007 | $147.40 | 3 |
| 8 | 35266 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $124.56 | 3 |
| 8 | 35271 | REPAIR BLOOD VESSEL OR A-V FISUT | 1/1/2007 | $185.70 | 3 |
| 8 | 35276 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $201.99 | 3 |
| 8 | 35281 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $226.54 | 3 |
| 8 | 35286 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $137.79 | 3 |
| 8 | 35301 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $154.61 | 3 |
| 8 | 35302 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $162.91 | 3 |
| 8 | 35303 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $179.06 | 3 |
| 8 | 35304 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $186.32 | 3 |
| 8 | 35305 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $179.06 | 3 |
| 8 | 35306 | THROMBOENDARTERECTOMY, INCL PATC | 1/1/2007 | $67.31 | 3 |
| 8 | 35311 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $218.71 | 3 |
| 8 | 35321 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $132.97 | 3 |
| 8 | 35331 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $214.04 | 3 |
| 8 | 35341 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $206.20 | 3 |
| 8 | 35351 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $186.48 | 3 |
| 8 | 35355 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $151.70 | 3 |
| 8 | 35361 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $228.52 | 3 |
| 8 | 35363 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $244.40 | 3 |
| 8 | 35371 | THROMBOENDARTERECTOMY, WITH OR W | 1/1/2007 | $123.52 | 3 |
| 8 | 35372 | THROMBOENDARTERECTOMY, WITH OR W | 1/1/2007 | $148.69 | 3 |
| 8 | 35381 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | INVALID | N |
| 8 | 35390 | REOPERATION, CAROTID, THROMBOEND | 1/1/2007 | $24.44 | 3 |
| 8 | 35450 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $77.18 | 3 |
| 8 | 35452 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $54.24 | 3 |
| 8 | 35454 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $47.85 | 3 |
| 8 | 35456 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $57.87 | 3 |
| 8 | 35458 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $73.80 | 3 |
| 8 | 35459 | TRANSLUMINAL ANGIOPLASTY, OPEN; | 1/1/2007 | $67.52 | 3 |
| 8 | 35460 | TRANSLUMINAL ANGIOPLASTY, OPEN; | 1/1/2007 | $47.44 | 3 |
| 8 | 35470 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $65.76 | 3 |
| 8 | 35471 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $76.19 | 3 |
| 8 | 35472 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $53.09 | 3 |
| 8 | 35473 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $46.55 | 3 |
| 8 | 35474 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $56.16 | 3 |
| 8 | 35475 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $70.95 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 35476 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $45.31 | 3 |
| 8 | 35480 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $85.06 | 3 |
| 8 | 35481 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $60.26 | 3 |
| 8 | 35482 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $52.42 | 3 |
| 8 | 35483 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $63.68 | 3 |
| 8 | 35484 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $80.29 | 3 |
| 8 | 35485 | TRANSLUMINAL PERIPHERAL ATHERECT | 1/1/2007 | $74.58 | 3 |
| 8 | 35500 | HARVEST OF UPPER EXTREMITY VEIN, | 1/1/2007 | $48.79 | 3 |
| 8 | 35501 | BYPASS GRAFT VEIN CAROTID | 1/1/2007 | $157.98 | 3 |
| 8 | 35506 | BYPASS GRAFT VEIN; CAROTID SUB-C | 1/1/2007 | $166.03 | 3 |
| 8 | 35507 | BYPASS GRAFT VEIN; SUBCLAVIAN-CA | 1/1/2007 | INVALID | N |
| 8 | 35508 | BYPASS GRAFT WITH VEIN CAROTID-V | 1/1/2007 | $160.16 | 3 |
| 8 | 35509 | BYPASS GRAFT VEIN; CAROTID-CAROT | 1/1/2007 | $152.79 | 3 |
| 8 | 35510 | BYPASS GRAFT, WITH VEIN; CAROTID | 1/1/2007 | $183.10 | 3 |
| 8 | 35511 | BYPASS GRAFT VEIN; SUBCLAVIAN-SU | 1/1/2007 | $173.61 | 3 |
| 8 | 35512 | BYPASS GRAFT, WITH VEIN; SUBCLAV | 1/1/2007 | $179.63 | 3 |
| 8 | 35515 | BYPASS GRAFT WITH VEIN SUBCLAVIA | 1/1/2007 | $159.33 | 3 |
| 8 | 35516 | BYPASS GRAFT VEIN; SUBCLAVIAN-AX | 1/1/2007 | $132.09 | 3 |
| 8 | 35518 | BYPASS GRAFT WITH VEIN AXILLARY- | 1/1/2007 | $172.26 | 3 |
| 8 | 35521 | BYPASSA GRAFT VEIN; AXILLARY-FEM | 1/1/2007 | $182.43 | 3 |
| 8 | 35522 | BYPASS GRAFT, WITH VEIN; AXILLAR | 1/1/2007 | $174.49 | 3 |
| 8 | 35525 | BYPASS GRAFT, WITH VEIN; BRACHIA | 1/1/2007 | $166.65 | 3 |
| 8 | 35526 | BYPASS GRAFT VEIN; AORTOSUBCLAVI | 1/1/2007 | $239.10 | 3 |
| 8 | 35531 | BYPASS GRAFT WITH VEIN AORTOCELI | 1/1/2007 | $289.71 | 3 |
| 8 | 35533 | BYPASS GRAFT WITH VEIN AXILLARY- | 1/1/2007 | $226.02 | 3 |
| 8 | 35536 | BYPASS GRAFT VEIN; SPLENORENAL | 1/1/2007 | $255.56 | 3 |
| 8 | 35537 | BYPASS GRAFT, WITH VEIN; AORTOIL | 1/1/2007 | $314.98 | 3 |
| 8 | 35538 | BYPASS GRAFT, WITH VEIN; AORTOBI | 1/1/2007 | $351.93 | 3 |
| 8 | 35539 | BYPASS GRAFT, WITH VEIN; AORTOFE | 1/1/2007 | $330.76 | 3 |
| 8 | 35541 | BYPASS GRAFT, WITH VEIN; AORTOIL | 1/1/2007 | INVALID | N |
| 8 | 35546 | BYPASS GRAFT WITH VEIN AORTOFEMO | 1/1/2007 | INVALID | N |
| 8 | 35548 | BYPASS GRAFT VEIN; AORTOILIOFEMO | 1/1/2007 | $176.25 | 3 |
| 8 | 35549 | BYPASS GRAFT VEIN; AORTOILIOFEMO | 1/1/2007 | $192.03 | 3 |
| 8 | 35551 | BYPASS GRAFT VEIN; AORTOFEMORAL- | 1/1/2007 | $217.41 | 3 |
| 8 | 35556 | BYPASS GRAFT VEIN; FEMORAL-POPLI | 1/1/2007 | $179.42 | 3 |
| 8 | 35558 | BYPASS GRAFT VEIN; FEMORAL-FEMOR | 1/1/2007 | $175.06 | 3 |
| 8 | 35560 | BYPASS GRAFT WITH VEIN AORTORENA | 1/1/2007 | $259.71 | 3 |
| 8 | 35563 | BYPASS GRAFT VEIN; ILOILIAC | 1/1/2007 | $198.36 | 3 |
| 8 | 35565 | BYPASS GRAFT VEIN; ILIOFEMORAL | 1/1/2007 | $190.06 | 3 |
| 8 | 35566 | BYPASS GRAFT, W/VEIN;FEMORAL-ANT | 1/1/2007 | $218.55 | 3 |
| 8 | 35571 | BYPASS GRAFT, W/VEIN; POPLITEAL- | 1/1/2007 | $198.83 | 3 |
| 8 | 35572 | HARVEST OF FEMOROPOPLITEAL VEIN, | 1/1/2007 | $52.16 | 3 |
| 8 | 35582 | IN-SITU VEIN BYPASS; AORTOFEMORA | 1/1/2005 | INVALID | N |
| 8 | 35583 | IN-SITU VEIN BYPASS; FEMORAL POP | 1/1/2007 | $185.18 | 3 |
| 8 | 35585 | IN-SITU VEIN BYPASS; FEMORAL-ANT | 1/1/2007 | $231.53 | 3 |
| 8 | 35587 | IN-SITU VEIN BYPASS; POPLITEAL-T | 1/1/2007 | $206.04 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 35600 | HARVEST OF UPPER EXTREMITY ARTER | 1/1/2007 | $37.84 | 3 |
| 8 | 35601 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $148.43 | 3 |
| 8 | 35606 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $157.83 | 3 |
| 8 | 35612 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $133.49 | 3 |
| 8 | 35616 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $134.89 | 3 |
| 8 | 35621 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $163.90 | 3 |
| 8 | 35623 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $196.86 | 3 |
| 8 | 35626 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $227.22 | 3 |
| 8 | 35631 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $273.88 | 3 |
| 8 | 35636 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $238.12 | 3 |
| 8 | 35637 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $250.57 | 3 |
| 8 | 35638 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $254.57 | 3 |
| 8 | 35641 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | INVALID | N |
| 8 | 35642 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $150.15 | 3 |
| 8 | 35645 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $146.46 | 3 |
| 8 | 35646 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $251.82 | 3 |
| 8 | 35647 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $227.01 | 3 |
| 8 | 35650 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $156.01 | 3 |
| 8 | 35651 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $202.93 | 3 |
| 8 | 35654 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $203.24 | 3 |
| 8 | 35656 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $160.42 | 3 |
| 8 | 35661 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $158.97 | 3 |
| 8 | 35663 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $182.01 | 3 |
| 8 | 35665 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $173.55 | 3 |
| 8 | 35666 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $186.74 | 3 |
| 8 | 35671 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $163.28 | 3 |
| 8 | 35681 | BYPASS GRAFT COMPOSITE | 1/1/2007 | $12.25 | 3 |
| 8 | 35682 | BYPASS GRAFT; AUTOGENOUS COMPOSI | 1/1/2007 | $55.07 | 3 |
| 8 | 35683 | BYPASS GRAFT; AUTOGENOUS COMPOSI | 1/1/2007 | $64.98 | 3 |
| 8 | 35691 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $150.61 | 3 |
| 8 | 35693 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $131.26 | 3 |
| 8 | 35694 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $157.98 | 3 |
| 8 | 35695 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $157.93 | 3 |
| 8 | 35700 | REOPERATION, FEMORAL-POPLITEAL O | 1/1/2007 | $23.56 | 3 |
| 8 | 35701 | EXPLORATION (NOT FOLL BY SURG RE | 1/1/2007 | $76.66 | 3 |
| 8 | 35721 | EXPLORATION; FEMORAL ARTERY | 1/1/2007 | $65.60 | 3 |
| 8 | 35741 | EXPLORATION; POPLITEAL ARTERY | 1/1/2007 | $71.52 | 3 |
| 8 | 35761 | EXPLORATION; OTHER VESSELS | 1/1/2007 | $52.57 | 3 |
| 8 | 35800 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $65.50 | 3 |
| 8 | 35820 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $114.28 | 3 |
| 8 | 35840 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $85.12 | 3 |
| 8 | 35860 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $53.77 | 3 |
| 8 | 35870 | REPAIR OF GRAFT-ENTERIC FISTULA | 1/1/2007 | $181.29 | 3 |
| 8 | 35875 | THROMBECTOMY OF ARTERIAL OR VENO | 1/1/2007 | $86.78 | 3 |
| 8 | 35876 | THROMBECTOMY OF ARTERIAL OR VENO | 1/1/2007 | $139.56 | 3 |
| 8 | 35879 | REVISION, LOWER EXTREMITY ARTERI | 1/1/2007 | $134.73 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 35881 | REVISION, LOWER EXTREMITY ARTERI | 1/1/2007 | $151.60 | 3 |
| 8 | 35883 | REVISION, FEMORAL ANASTOMOSIS OF | 1/1/2007 | $182.79 | 3 |
| 8 | 35884 | REVISION, FEMORAL ANASTOMOSIS OF | 1/1/2007 | $194.16 | 3 |
| 8 | 35901 | EXCISION OF INFECTED GRAFT; NECK | 1/1/2007 | $76.03 | 3 |
| 8 | 35903 | EXCISION OF INFECTED GRAFT; EXTR | 1/1/2007 | $87.45 | 3 |
| 8 | 35905 | EXCISION OF INFECTED GRAFT; THOR | 1/1/2007 | $253.53 | 3 |
| 8 | 35907 | EXCISION OF INFECTED GRAFT; ABDO | 1/1/2007 | $280.57 | 3 |
| 8 | 36261 | REVISION OF IMPLANTED INFUSION P | 1/1/2007 | $50.91 | 3 |
| 8 | 36455 | EXCHANGE TRANSFUSION; OTHER THAN | 1/1/2007 | $18.63 | 3 |
| 8 | 36460 | TRANSFUSION INTRAUTERINE FETAL | 1/1/2007 | $49.93 | 3 |
| 8 | 36470 | INJECTION OF SCLEROSING SOLUTION | 2/1/1984 | NC | 9 |
| 8 | 36471 | INJECTION OF SCLEROSING SOLUTION | 2/1/1984 | NC | 9 |
| 8 | 36490 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | NC | 9 |
| 8 | 36491 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | NC | 9 |
| 8 | 36520 | THERAPEUTIC APHERESIS (PLASMA AN | 7/1/2003 | INVALID | N |
| 8 | 36521 | THERAPEUTIC APHERESIS; W/EXTRACO | 7/1/2003 | INVALID | N |
| 8 | 36530 | INSERTION OF IMPLANTABLE INTRAVE | 4/1/2004 | INVALID | N |
| 8 | 36531 | REVISION OF IMPLANTABLE INTRAVEN | 4/1/2004 | INVALID | N |
| 8 | 36532 | REMOVAL OF IMPLANTABLE INTRAVENO | 4/1/2004 | INVALID | N |
| 8 | 36533 | INSERTION OF IMPLANTABLE VENOUS | 4/1/2004 | INVALID | N |
| 8 | 36534 | REVISION OF IMPLANTABLE VENOUS A | 4/1/2004 | INVALID | N |
| 8 | 36535 | REMOVAL OF IMPLANTABLE VENOUS AC | 4/1/2004 | INVALID | N |
| 8 | 36818 | ARTERIOVENOUS ANASTOMOSIS, OPEN; | 1/1/2007 | $101.00 | 3 |
| 8 | 36819 | ARTERIOVENOUS ANASTOMOSIS, OPEN; | 1/1/2007 | $115.84 | 3 |
| 8 | 36821 | ARTERIOVENOUS ANASTOMOSIS, DIREC | 1/1/2007 | $76.86 | 3 |
| 8 | 36825 | CREATION OF ARTERIOVENOUS FISTUL | 1/1/2007 | $84.29 | 3 |
| 8 | 36830 | CREATION OF ARTERIOVENOUS FISTUL | 1/1/2007 | $98.04 | 3 |
| 8 | 36831 | THROMBECTOMY, OPEN, ARTERIOVENOU | 1/1/2007 | $67.63 | 3 |
| 8 | 36832 | REVISION, OPEN, ARTERIOVENOUS FI | 1/1/2007 | $86.41 | 3 |
| 8 | 36833 | REVISION, ARTERIOVENOUS FISTULA; | 1/1/2007 | $97.57 | 3 |
| 8 | 36834 | PLASTIC REPAIR OF ARTERIOVENOUS | 1/1/2007 | $83.51 | 3 |
| 8 | 36838 | DISTAL REVASCULARIZATION AND INT | 1/1/2007 | $171.37 | 3 |
| 8 | 37145 | VENOUS ANASTOMOSIS; RENOPORTAL | 1/1/2007 | $200.90 | 3 |
| 8 | 37160 | VENOUS ANASTOMOSIS; CAVAL-MESENT | 1/1/2007 | $174.70 | 3 |
| 8 | 37180 | VENOUS ANASTOMOSIS; SPLENORENAL, | 1/1/2007 | $198.41 | 3 |
| 8 | 37181 | ANASTOMOSIS SPLENORENAL DISTAL ( | 1/1/2007 | $213.15 | 3 |
| 8 | 37182 | INSERTION OF TRANSVENOUS INTRAHE | 1/1/2007 | $124.82 | 3 |
| 8 | 37183 | REVISION OF TRANSVENOUS INTRAHEP | 1/1/2007 | $59.58 | 3 |
| 8 | 37207 | TRANSCATHETER PLACEMENT OF INTRA | 8/9/2004 | $70.59 | 3 |
| 8 | 37208 | TRANSCATHETER PLACEMENT OF INTRA | 6/26/2006 | $31.50 | 3 |
| 8 | 37215 | TRANSCATHETER PLACEMENT OF INTRA | 1/1/2007 | $150.09 | 3 |
| 8 | 37216 | TRANSCATHETER PLACEMENT OF INTRA | 1/1/2007 | $144.59 | 3 |
| 8 | 37600 | LIGATION EXTERNAL CAROTIDARTERY | 1/1/2007 | $100.12 | 3 |
| 8 | 37605 | LIGATION; INTERNAL OR COMMON CAR | 1/1/2007 | $114.13 | 3 |
| 8 | 37606 | LIGATION INTERNAL OR COMMON CARO | 1/1/2007 | $62.64 | 3 |
| 8 | 37615 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $54.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 37616 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $139.56 | 3 |
| 8 | 37617 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $177.50 | 3 |
| 8 | 37618 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $47.33 | 3 |
| 8 | 37660 | LIGATION OF COMMON ILIAC VEIN | 1/1/2007 | $168.83 | 3 |
| 8 | 37720 | LIGATION AND DIVISION AND COMPLE | 1/1/2006 | INVALID | N |
| 8 | 37730 | LIGATION AND DIVISION AND COMPLE | 1/1/2006 | INVALID | N |
| 8 | 37735 | LIGATION & DIV & COMP STRIP OF L | 1/1/2007 | $90.88 | 3 |
| 8 | 37760 | LIGATION OF PERFORATOR VEINS, SU | 1/1/2007 | $89.53 | 3 |
| 8 | 37785 | LIGATION, DIVISION, AND/OR EXCIS | 1/1/2007 | $49.72 | 3 |
| 8 | 37788 | PENILE REVASCULARIZATION, ARTERY | 3/1/1992 | NC | 9 |
| 8 | 38100 | SPLENECTOMY; TOTAL, EN BLOC | 1/1/2007 | $117.19 | 3 |
| 8 | 38101 | SPLENECTOMY (SEPARATE PROCEDURE) | 1/1/2007 | $123.89 | 3 |
| 8 | 38102 | SPLENECTOMY; TOTAL, EN BLOC FOR | 1/1/2007 | $36.64 | 3 |
| 8 | 38115 | REPAIR OF RUPTURED SPLEEN (SPLEN | 1/1/2007 | $127.36 | 3 |
| 8 | 38120 | LAPAROSCOPY, SURGICAL, SPLENECTO | 1/1/2007 | $138.11 | 3 |
| 8 | 38231 | BLOOD-DERIVED PERIPHERAL STEM CE | 7/1/2003 | INVALID | N |
| 8 | 38308 | LYMPHANGIOTOMY OR OTHER OPERATIO | 1/1/2007 | $57.30 | 3 |
| 8 | 38380 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $72.09 | 3 |
| 8 | 38381 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $112.10 | 3 |
| 8 | 38382 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $89.27 | 3 |
| 8 | 38530 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/2007 | $70.01 | 3 |
| 8 | 38542 | DISSECTION DEEP JUGULAR NODE(S) | 1/1/2007 | $57.04 | 3 |
| 8 | 38550 | EXCISION OF CYSTIC HYGROMA, AXIL | 1/1/2007 | $60.77 | 3 |
| 8 | 38555 | EXCISION OF CYSTIC HYGROMA, AXIL | 1/1/2007 | $126.74 | 3 |
| 8 | 38562 | LIMITED LYMPHADENECTOMY FOR STAG | 1/1/2007 | $90.62 | 3 |
| 8 | 38564 | LIMITED LYMPHADENECTOMY FOR STAG | 1/1/2007 | $90.25 | 3 |
| 8 | 38570 | LAPAROSCOPY, SURGICAL; W/RETROPE | 1/1/2007 | $74.48 | 3 |
| 8 | 38571 | LAPAROSCOPY, SURGICAL; WITH BILA | 1/1/2007 | $111.43 | 3 |
| 8 | 38572 | LAPAROSCOPY, SURGICAL; W/BILATER | 1/1/2007 | $132.66 | 3 |
| 8 | 38700 | SUPRAHYOID LYMPHADENECTOMY | 1/1/2007 | $78.89 | 3 |
| 8 | 38720 | CERVICAL LYMPHADENECTOMY (COMPLE | 1/1/2007 | $125.44 | 3 |
| 8 | 38724 | CERVICAL LYMPHADENECTOMY (MODIFI | 1/1/2007 | $133.18 | 3 |
| 8 | 38740 | AXILLARY LYMPHADENECTOMY SUPERFI | 1/1/2007 | $84.49 | 3 |
| 8 | 38745 | AXILLARY LYMPHADENECTOMY; COMPLE | 1/1/2007 | $108.47 | 3 |
| 8 | 38746 | THORACIC LYMPHADENECTOMY, REGION | 1/1/2007 | $37.42 | 3 |
| 8 | 38747 | ABDOMINAL LYMPHADENECTOMY, REGIO | 1/1/2007 | $37.32 | 3 |
| 8 | 38760 | INGUINOFEMORAL LYMPHADENECTOMY, | 1/1/2007 | $107.85 | 3 |
| 8 | 38765 | INGUINOFEMORAL LYMPHADENECTOMY,S | 1/1/2007 | $162.19 | 3 |
| 8 | 38770 | PELVIC LYMPHADENECTOMY, INCLUDIN | 1/1/2007 | $105.72 | 3 |
| 8 | 38780 | RETROPERITONEAL TRANSABDOMINAL L | 1/1/2007 | $138.42 | 3 |
| 8 | 38999 | UNLISTED PROCEDURE HEMIC OR LYMP | 2/1/1989 | $0.01 | 5 |
| 8 | 39000 | MEDIASTINOTOMY WITH EXPLORATION, | 1/1/2007 | $60.41 | 3 |
| 8 | 39010 | MEDIASTINOTOMY WITH EXPLORATION, | 1/1/2007 | $109.41 | 3 |
| 8 | 39200 | EXCISION OF MEDIASTINAL CYST | 1/1/2007 | $120.25 | 3 |
| 8 | 39220 | EXCISION OF MEDIASTINAL TUMOR | 1/1/2007 | $151.70 | 3 |
| 8 | 39499 | UNLISTED PROCEDURE MEDIASTINUM | 2/1/1994 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 39501 | REPAIR, LACERATION OF DIAPHRAGM, | 1/1/2007 | $111.12 | 3 |
| 8 | 39502 | REPAIR PARAESOPHAGEAL HIATUS HER | 1/1/2007 | $133.02 | 3 |
| 8 | 39503 | REPAIR, NEONATAL DIAPHRAGMATIC H | 1/1/2007 | $722.86 | 3 |
| 8 | 39520 | REPAIR DIAPHRAGMATIC HERNIA (ESO | 1/1/2007 | $136.86 | 3 |
| 8 | 39530 | REPAIR DIAPHRAGMATIC HERNIA (ESO | 1/1/2007 | $127.88 | 3 |
| 8 | 39531 | REPAIR DIAPHRAGMATIC HERNIA (ESO | 1/1/2007 | $134.99 | 3 |
| 8 | 39540 | REPAIR DIAPHRAGMATIC HERNIA (OTH | 1/1/2007 | $110.70 | 3 |
| 8 | 39541 | REPAIR DIAPHRAGMATIC HERNIA (OTH | 1/1/2007 | $118.90 | 3 |
| 8 | 39545 | IMBRICATION OF DIAPHRAGM FOR EVE | 1/1/2007 | $118.02 | 3 |
| 8 | 39560 | RESECTION, DIAPHGRAGM; WITH SIMP | 1/1/2007 | $103.13 | 3 |
| 8 | 39561 | RESECTION, DIAPHRAGM; WITH COMPL | 1/1/2007 | $151.91 | 3 |
| 8 | 39599 | UNLISTED PROCEDURE DIAPHRAGM | 2/1/1994 | $0.01 | 5 |
| 8 | 40701 | PLASTIC REPAIR OF CLEFT LIP; PRI | 1/1/2007 | $149.68 | 3 |
| 8 | 40702 | PLASTIC REPAIR OF CLEFT LIP; PRI | 1/1/2007 | $116.88 | 3 |
| 8 | 40761 | PLASTIC REPAIR OF CLEFT LIP WITH | 1/1/2007 | $139.77 | 3 |
| 8 | 40799 | UNLISTED PROCEDURE LIPS | 4/1/1982 | $0.01 | 5 |
| 8 | 40840 | VESTIBULOPLASTY ANTERIOR | 1/1/2007 | $101.78 | 3 |
| 8 | 40843 | VESTIBULOPLASTY; POSTERIOR BILAT | 1/1/2007 | $132.09 | 3 |
| 8 | 40844 | VESTIBULOPLASTY; ENTIRE ARCH | 1/1/2007 | $175.37 | 3 |
| 8 | 41120 | GLOSSECTOMY LESS THAN ONE-HALF T | 1/1/2007 | $134.42 | 3 |
| 8 | 41130 | GLOSSECTOMY; HEMIGLOSSECTOMY | 1/1/2007 | $146.88 | 3 |
| 8 | 41135 | GLOSSECTOMY; PARTIAL WITH UNILAT | 1/1/2007 | $250.31 | 3 |
| 8 | 41140 | GLOSSECTOMY COMPLETE OR TOTAL WI | 1/1/2007 | $282.70 | 3 |
| 8 | 41145 | GLOSSECTOMY COMPLETE OR TOTAL WI | 1/1/2007 | $327.90 | 3 |
| 8 | 41150 | GLOSSECTOMY COMPOSITE PROCEDURE | 1/1/2007 | $258.10 | 3 |
| 8 | 41153 | GLOSSECTOMY COMPOSITE PROCEDURE | 1/1/2007 | $263.76 | 3 |
| 8 | 41155 | GLOSSECTOMY COMPOSITE PROCEDURE | 1/1/2007 | $295.26 | 3 |
| 8 | 41870 | PERIODONTAL MUCOSAL GRAFTING | 1/1/1993 | NC | 9 |
| 8 | 41872 | GINGIVOPLASTY, EACH QUADRANT (SP | 1/1/1993 | NC | 9 |
| 8 | 41874 | ALVEOLOPLASTY, EACH QUADDRANT (S | 2/1/1993 | NC | 9 |
| 8 | 41899 | UNLISTED PROCEDURE DENTOALVEOLAR | 9/20/1993 | $0.01 | 5 |
| 8 | 42120 | RESECTION PALATE OR EXTENSIVE RE | 1/1/2007 | $95.91 | 3 |
| 8 | 42200 | PALATOPLASTY FOR CLEFT PALATE SO | 1/1/2007 | $121.91 | 3 |
| 8 | 42205 | PALATOPLASTY FOR CLEFT PALATE WI | 1/1/2007 | $129.49 | 3 |
| 8 | 42210 | PALATOPLASTY FOR CLEFT PALATE WI | 1/1/2007 | $145.99 | 3 |
| 8 | 42215 | PALATOPLASTY FOR CLEFT PALATE MA | 1/1/2007 | $99.75 | 3 |
| 8 | 42220 | PALATOPLASTY FOR CLEFT PALATE; S | 1/1/2007 | $75.46 | 3 |
| 8 | 42225 | PALATOPLASTY FOR CLEFT PALATE; A | 1/1/2007 | $142.73 | 3 |
| 8 | 42226 | LENGTHENING OF PALATE, AND PHARY | 1/1/2007 | $133.59 | 3 |
| 8 | 42227 | LENGTHENING OF PALATE, WITH ISLA | 1/1/2007 | $135.36 | 3 |
| 8 | 42235 | REPAIR ANTERIOR PALATE INCLUDING | 1/1/2007 | $106.24 | 3 |
| 8 | 42260 | REPAIR NASOLABIAL FISTULA | 1/1/2007 | $110.39 | 3 |
| 8 | 42299 | UNLISTED PROCEDURE PALATE UVULA | 4/1/1982 | $0.01 | 5 |
| 8 | 42325 | FISTULIZATION SUBLINGUAL SALIVAR | 1/1/2006 | INVALID | N |
| 8 | 42326 | FISTULIZATION SUBLINGUAL SALIVAR | 1/1/2006 | INVALID | N |
| 8 | 42409 | MARSUPIALIZATION SUBLINGUAL SALI | 1/1/2007 | $39.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 42410 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $85.53 | 3 |
| 8 | 42415 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $151.44 | 3 |
| 8 | 42420 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $174.49 | 3 |
| 8 | 42425 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $117.71 | 3 |
| 8 | 42426 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $187.26 | 3 |
| 8 | 42440 | EXCISION SUBMANDIBULAR (SUBMAXIL | 1/1/2007 | $64.10 | 3 |
| 8 | 42507 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $68.20 | 3 |
| 8 | 42508 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $95.96 | 3 |
| 8 | 42510 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $86.21 | 3 |
| 8 | 42699 | UNLISTED PROCEDURE SALIVARY GLAN | 4/1/1982 | $0.01 | 5 |
| 8 | 42725 | INCISION AND DRAINAGE ABSCESS RE | 1/1/2007 | $103.02 | 3 |
| 8 | 42810 | EXCISION BRANCHIAL CLEFT CYST OR | 1/1/2007 | $48.11 | 3 |
| 8 | 42815 | EXCISION BRANCHIAL CLEFT CYST, V | 1/1/2007 | $73.18 | 3 |
| 8 | 42844 | RADICAL RESECTION OF TONSIL TONS | 1/1/2007 | $164.68 | 3 |
| 8 | 42845 | RADICAL RESECTION OF TONSIL TONS | 1/1/2007 | $256.80 | 3 |
| 8 | 42890 | LIMITED PHARYNGECTOMY WITHOUT RA | 1/1/2007 | $146.15 | 3 |
| 8 | 42892 | RESECTION OF LATERAL PHARYNGEAL | 1/1/2007 | $178.07 | 3 |
| 8 | 42894 | RESECTION OF PHARYNGEAL WALL REQ | 1/1/2007 | $242.84 | 3 |
| 8 | 42950 | PHARYNGOPLASTY (PLASTIC OR RECON | 1/1/2007 | $107.48 | 3 |
| 8 | 42953 | PHARYNGOESOPHAGEAL REPAIR | 1/1/2007 | $141.22 | 3 |
| 8 | 42955 | PHARYNGOSTOMY (FISTULIZATION OF | 1/1/2007 | $97.99 | 3 |
| 8 | 42961 | CONTROL OROPHARYNGEAL HEMORRHAGE | 1/1/2007 | $57.09 | 3 |
| 8 | 42962 | CONTROL OROPHARYNGEAL HEMORRHAGE | 1/1/2007 | $70.79 | 3 |
| 8 | 42971 | CONTROL OF NASOPHARYNGEAL HEMORR | 1/1/2007 | $61.45 | 3 |
| 8 | 42972 | CONTROL OF NASOPHARYNGEAL HEMORR | 1/1/2007 | $70.22 | 3 |
| 8 | 43020 | ESOPHAGOTOMY CERVICAL APPROACH; | 1/1/2007 | $74.63 | 3 |
| 8 | 43030 | CRICOPHARYNGEAL MYOTOMY | 1/1/2007 | $72.09 | 3 |
| 8 | 43045 | ESOPHAGOTOMY, THORACIC APPROACH, | 1/1/2007 | $173.35 | 3 |
| 8 | 43100 | EXCISION OF LESION, ESOPHAGUS, W | 1/1/2007 | $84.86 | 3 |
| 8 | 43101 | EXCISION OF LESION, ESOPHAGUS, W | 1/1/2007 | $137.17 | 3 |
| 8 | 43107 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $329.41 | 3 |
| 8 | 43108 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $272.27 | 3 |
| 8 | 43112 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $356.24 | 3 |
| 8 | 43113 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $284.36 | 3 |
| 8 | 43116 | PARTIAL ESOPHAGECTOMY, CERVICAL, | 1/1/2007 | $264.48 | 3 |
| 8 | 43117 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $324.01 | 3 |
| 8 | 43118 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $265.05 | 3 |
| 8 | 43121 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $242.68 | 3 |
| 8 | 43122 | PARTIAL ESOPHAGECTOMY, THORACOAB | 1/1/2007 | $325.83 | 3 |
| 8 | 43123 | PARTIAL ESOPHAGECTOMY, THORACOAB | 1/1/2007 | $266.97 | 3 |
| 8 | 43124 | TOTAL OR PARTIAL ESOPHAGECTOMY, | 1/1/2007 | $229.03 | 3 |
| 8 | 43130 | DIVERTICULECTOMY HYPOPHARYNX OR | 1/1/2007 | $106.24 | 3 |
| 8 | 43135 | DIVERTICULECTOMY HYPOPHARYNX OR | 1/1/2007 | $137.64 | 3 |
| 8 | 43280 | LAPAROSCOPY, SURGICAL, ESOPHAGOG | 1/1/2007 | $138.99 | 3 |
| 8 | 43289 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 43300 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $86.36 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 43305 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $153.73 | 3 |
| 8 | 43310 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $207.81 | 3 |
| 8 | 43312 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $229.92 | 3 |
| 8 | 43320 | ESOPHAGOGASTROSTOMY (CARDIOPLAST | 1/1/2007 | $165.35 | 3 |
| 8 | 43324 | ESOPHAGOGASTRIC FUNDOPLASTY (EG | 1/1/2007 | $166.50 | 3 |
| 8 | 43325 | ESOPHAGOGASTRIC FUNDOPLASTY WITH | 1/1/2007 | $163.12 | 3 |
| 8 | 43326 | ESOPHAGOGASTRIC FUNDOPLASTY; WIT | 1/1/2007 | $165.41 | 3 |
| 8 | 43330 | ESOPHAGOMYOTOMY (HELLER TYPE); A | 1/1/2007 | $160.42 | 3 |
| 8 | 43331 | ESOPHAGOMYOTOMY ((HELLER TYPE) W | 1/1/2007 | $170.44 | 3 |
| 8 | 43340 | ESOPHAGOJEJUNOSTOMY (WITHOUT TOT | 1/1/2007 | $160.99 | 3 |
| 8 | 43341 | ESOPHAGOJEJUNOSTOMY (WITHOUT TOT | 1/1/2007 | $175.27 | 3 |
| 8 | 43350 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $133.07 | 3 |
| 8 | 43351 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $158.81 | 3 |
| 8 | 43352 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $133.33 | 3 |
| 8 | 43360 | GASTROINTESTINAL RECONSTRUCTION | 1/1/2007 | $289.19 | 3 |
| 8 | 43361 | GASTROINTESTINAL RECONSTRUCTION | 1/1/2007 | $321.05 | 3 |
| 8 | 43400 | LIGATION DIRECT ESOPHAGEAL VARIC | 1/1/2007 | $169.09 | 3 |
| 8 | 43401 | TRANSECTION OF ESOPHAGUS WITH RE | 1/1/2007 | $179.63 | 3 |
| 8 | 43405 | LIGATION OR STAPLING AT GASTROES | 1/1/2007 | $168.26 | 3 |
| 8 | 43410 | SUTURE ESOPHAGEAL WOUND OR INJUR | 1/1/2007 | $118.38 | 3 |
| 8 | 43415 | SUTURE OF ESOPHAGEAL WOUND OR IN | 1/1/2007 | $208.90 | 3 |
| 8 | 43425 | CLOSURE OF ESOPHAGOSTOMY OR FIST | 1/1/2007 | $176.56 | 3 |
| 8 | 43496 | FREE JEJUNUM TRANSFER WITH MICRO | 1/1/1997 | $0.01 | 5 |
| 8 | 43499 | UNLISTED PROCEDURE ESOPHAGUS | 4/1/1982 | $0.01 | 5 |
| 8 | 43500 | GASTROTOMY WITH EXPLORATION OR F | 1/1/2007 | $90.62 | 3 |
| 8 | 43501 | GASTROTOMY; WITH SUTURE REPAIR O | 1/1/2007 | $160.73 | 3 |
| 8 | 43502 | GASTROTOMY; WITH SUTURE REPAIR O | 1/1/2007 | $185.13 | 3 |
| 8 | 43510 | GASTROTOMY; WITH ESOPHAGEAL DILA | 1/1/2007 | $109.72 | 3 |
| 8 | 43520 | PYLOROMYOTOMY CUTTING OF PYLORIC | 1/1/2007 | $86.21 | 3 |
| 8 | 43605 | BIOPSY OF STOMACH; BY LAPAROTOMY | 1/1/2007 | $97.78 | 3 |
| 8 | 43610 | EXCISION, LOCAL; ULCER OR BENIGN | 1/1/2007 | $117.66 | 3 |
| 8 | 43611 | EXCISION, LOCAL; MALIGNANT TUMOR | 1/1/2007 | $143.97 | 3 |
| 8 | 43620 | GASTRECTOMY, TOTAL; WITH ESOPHAG | 1/1/2007 | $237.49 | 3 |
| 8 | 43621 | GASTRECTOMY, TOTAL; WITH ROUX-EN | 1/1/2007 | $242.42 | 3 |
| 8 | 43622 | GASTRECTOMY, TOTAL; WITH FORMATI | 1/1/2007 | $256.33 | 3 |
| 8 | 43631 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $180.20 | 3 |
| 8 | 43632 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $180.20 | 3 |
| 8 | 43633 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $184.09 | 3 |
| 8 | 43634 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $199.87 | 3 |
| 8 | 43635 | VAGOTOMY W/PARTIAL DISTAL GASTRE | 1/1/2007 | $15.73 | 3 |
| 8 | 43638 | GASTRECTOMY, PARTIAL, PROXIMAL, | 1/1/2006 | INVALID | N |
| 8 | 43639 | GASTRECTOMY, PARTIAL, PROXIMAL; | 1/1/2006 | INVALID | N |
| 8 | 43640 | VAGOTOMY INCLUDING PYLOROPLASTY | 1/1/2007 | $137.59 | 3 |
| 8 | 43641 | VAGOTOMY INCLUDING PYLOROPLASTY | 1/1/2007 | $139.40 | 3 |
| 8 | 43644 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2006 | NC | 9 |
| 8 | 43645 | LAPAROSCOPY, SURGICAL, GASTRIC R | 1/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 43651 | LAPAROSCOPY, SURGICAL; TRANSECTI | 1/1/2007 | $84.23 | 3 |
| 8 | 43652 | LAPAROSCOPY, SURGICAL; TRANSECTI | 1/1/2007 | $100.95 | 3 |
| 8 | 43653 | LAPAROSCOPY, SURGICAL; GASTROSTO | 1/1/2007 | $67.05 | 3 |
| 8 | 43659 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 43800 | PYLOROPLASTY | 1/1/2007 | $111.01 | 3 |
| 8 | 43810 | GASTRODUODENOSTOMY | 1/1/2007 | $118.07 | 3 |
| 8 | 43820 | GASTROJEJUNOSTOMY; WITHOUT VAGOT | 1/1/2007 | $123.52 | 3 |
| 8 | 43825 | GASTROJEJUNOSTOMY; WITH VAGOTOMY | 1/1/2007 | $154.40 | 3 |
| 8 | 43830 | GASTROSTOMY TEMPORARY (TUBE RUBB | 1/1/2007 | $81.07 | 3 |
| 8 | 43831 | GASTROSTOMY TEMPORARY (TUBE RUBB | 1/1/2007 | $69.44 | 3 |
| 8 | 43832 | GASTROSTOMY PERMANENT WITH CONST | 1/1/2007 | $126.69 | 3 |
| 8 | 43840 | GASTRORRHAPHY SUTURE OF PERFORAT | 1/1/2007 | $126.48 | 3 |
| 8 | 43842 | GASTRIC RESTRICTIVE PROCEDURE, W | 1/1/2007 | $148.90 | 3 |
| 8 | 43843 | GASTRIC RESTRICTIVE PROC, W/OUT | 1/1/2007 | $149.73 | 3 |
| 8 | 43846 | GASTRIC RESTRICTIVE PROC, W/GAST | 1/1/2007 | $193.28 | 3 |
| 8 | 43847 | GASTRIC RESTRICTIVE PROCEDURE, W | 1/1/2002 | NC | 9 |
| 8 | 43850 | REVISION OF GASTRODUODENAL ANAST | 1/1/2007 | $196.13 | 3 |
| 8 | 43855 | REVISION OF GASTRODUODENAL ANAST | 1/1/2007 | $207.24 | 3 |
| 8 | 43860 | REVISION OF GASTROJEJUNAL ANASTO | 1/1/2007 | $198.52 | 3 |
| 8 | 43865 | REVISION OF GASTROJEJUNAL ANASTO | 1/1/2007 | $210.25 | 3 |
| 8 | 43870 | CLOSURE OF GASTROSTOMY SURGICAL | 1/1/2007 | $80.29 | 3 |
| 8 | 43880 | CLOSURE OF GASTROCOLIC FISTULA | 1/1/2007 | $196.13 | 3 |
| 8 | 44005 | ENTEROLYSIS (FREEING OF INTESTIN | 1/1/2007 | $130.17 | 3 |
| 8 | 44010 | DUODENOTOMY, FOR EXPLORATION, BI | 1/1/2007 | $101.72 | 3 |
| 8 | 44015 | TUBE OR NEEDLE CATHETER JEJUNOST | 1/1/2007 | $19.98 | 3 |
| 8 | 44020 | ENTEROTOMY, SMALL INTESTINE, OTH | 1/1/2007 | $112.99 | 3 |
| 8 | 44021 | ENTEROTOMY SMALL BOWELL OTHER TH | 1/1/2007 | $113.66 | 3 |
| 8 | 44025 | COLOTOMY, FOR EXPLORATION, BIOPS | 1/1/2007 | $115.17 | 3 |
| 8 | 44050 | REDUCTION OF VOLVULUS INTUSSUSCE | 1/1/2007 | $113.30 | 3 |
| 8 | 44055 | CORRECTION OF MALROTATION BY LYS | 1/1/2007 | $174.49 | 3 |
| 8 | 44110 | EXCISION OF ONE OR MORE LESIONS | 1/1/2007 | $96.43 | 3 |
| 8 | 44111 | EXCISION OF ONE OR MORE LESIONS | 1/1/2007 | $115.48 | 3 |
| 8 | 44120 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $136.50 | 3 |
| 8 | 44121 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $33.94 | 3 |
| 8 | 44125 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $140.34 | 3 |
| 8 | 44130 | ENTEROENTEROSTOMY, ANASTOMOSIS O | 1/1/2007 | $117.14 | 3 |
| 8 | 44132 | DONOR ENTERECTOMY (INCLUDING COL | 10/1/2005 | NC | 9 |
| 8 | 44133 | DONOR ENTERECTOMY (INCLUDING COL | 10/1/2005 | NC | 9 |
| 8 | 44135 | INTESTINAL ALLOTRANSPLANTATION; | 1/1/2005 | $0.01 | 5 |
| 8 | 44136 | INTESTINAL ALLOTRANSPLANTATION; | 10/1/2005 | NC | 9 |
| 8 | 44137 | REMOVAL OF TRANSPLANTED INTESTIN | 1/1/2005 | $0.01 | 5 |
| 8 | 44139 | MOBILIZATION (TAKE-DOWN) OF SPLE | 1/1/2007 | $16.97 | 3 |
| 8 | 44140 | COLECTOMY PARTIAL WITH ANASTOMOS | 1/1/2007 | $167.84 | 3 |
| 8 | 44141 | COLECTOMY PARTIAL; WITH SKIN LEV | 1/1/2007 | $166.44 | 3 |
| 8 | 44143 | COLECTOMY PARTIAL; WITH END COLO | 1/1/2007 | $190.52 | 3 |
| 8 | 44144 | COLECTOMY PARTIAL; WITH RESECTIO | 1/1/2007 | $176.41 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 44145 | COLECTOMY PARTIAL; WITH COLOPROC | 1/1/2007 | $210.14 | 3 |
| 8 | 44146 | COLECTOMY PARTIAL; WITH COLOPROC | 1/1/2007 | $227.27 | 3 |
| 8 | 44147 | COLECTOMY PARTIAL ABDOMINAL AND | 1/1/2007 | $165.77 | 3 |
| 8 | 44150 | COLECTOMY TOTAL ABDOMINAL WITHOU | 1/1/2007 | $202.36 | 3 |
| 8 | 44151 | COLECTOMY TOTAL ABDOMINAL WITHOU | 1/1/2007 | $227.06 | 3 |
| 8 | 44152 | COLECTOMY,TOTAL,ABDOMINAL,W/O PR | 1/1/2007 | INVALID | N |
| 8 | 44153 | COLECTOMY,TOTAL,ABDOM,W/O PROCTE | 1/1/2007 | INVALID | N |
| 8 | 44155 | COLECTOMY TOTAL ABDOMINAL WITH P | 1/1/2007 | $230.59 | 3 |
| 8 | 44156 | COLECTOMY TOTAL ABDOMINAL WITH P | 1/1/2007 | $258.20 | 3 |
| 8 | 44157 | COLECTOMY, TOTAL, ABDOMINAL, W/P | 1/1/2007 | $285.92 | 3 |
| 8 | 44158 | COLECTOMY, TOTAL, ABDOMINAL, W/P | 1/1/2007 | $293.34 | 3 |
| 8 | 44160 | COLECTOMY, PARTIAL, WITH REMOVAL | 1/1/2007 | $149.00 | 3 |
| 8 | 44180 | LAPAROSCOPY, SURGICAL,ENTEROLYSI | 1/1/2006 | $116.88 | 3 |
| 8 | 44186 | LAPAROSCOPY, SURGICAL; JEJUNOSTO | 1/1/2006 | $82.21 | 3 |
| 8 | 44187 | LAPAROSCOPY, SURGICAL; ILEOSTOMY | 1/1/2006 | $135.82 | 3 |
| 8 | 44188 | LAPAROSCOPY, SURGICAL, COLOSTOMY | 1/1/2006 | $149.08 | 3 |
| 8 | 44200 | LAPAROSCOPY, SURGICAL; ENTEROLYS | 1/1/2006 | INVALID | N |
| 8 | 44201 | LAPAROSCOPY, SURGICAL; JEJUNOSTO | 1/1/2006 | INVALID | N |
| 8 | 44202 | LAPAROSCOPY, SURGICAL; ENTERECTO | 1/1/2007 | $175.42 | 3 |
| 8 | 44203 | LAPAROSCOPY, SURGICAL; EACH ADDI | 1/1/2007 | $33.79 | 3 |
| 8 | 44204 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $197.84 | 3 |
| 8 | 44205 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $175.47 | 3 |
| 8 | 44206 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $216.37 | 3 |
| 8 | 44207 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $234.22 | 3 |
| 8 | 44208 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $254.26 | 3 |
| 8 | 44209 | UNLISTED LAPAROSCOPY PROCEDURE, | 7/1/2003 | INVALID | N |
| 8 | 44210 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $224.57 | 3 |
| 8 | 44211 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $279.33 | 3 |
| 8 | 44212 | LAPAROSCOPY, SURGICAL; COLECTOMY | 1/1/2007 | $259.19 | 3 |
| 8 | 44213 | LAPAROSCOPY, SURGICAL, MOBILIZAT | 1/1/2006 | $26.78 | 3 |
| 8 | 44227 | LAPAROSCOPY, SURGICAL, CLOSURE O | 1/1/2006 | $210.30 | 3 |
| 8 | 44238 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2003 | $0.01 | 5 |
| 8 | 44239 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2006 | INVALID | N |
| 8 | 44300 | ENTEROSTOMY OR CECOSTOMY, TUBE ( | 1/1/2007 | $99.60 | 3 |
| 8 | 44310 | ILEOSTOMY OR JEJUNOSTOMY, NON-TU | 1/1/2007 | $127.78 | 3 |
| 8 | 44312 | REVISION OF ILEOSTOMY;SIMPLE (RE | 1/1/2007 | $67.11 | 3 |
| 8 | 44314 | REVISION OF ILEOSTOMY;COMPLICATE | 1/1/2007 | $121.13 | 3 |
| 8 | 44316 | CONTINENT ILEOSTOMY (KOCK PROCED | 1/1/2007 | $166.03 | 3 |
| 8 | 44320 | COLOSTOMY OR SKIN LEVEL CECOSTOM | 1/1/2007 | $142.88 | 3 |
| 8 | 44322 | COLOSTOMY OR SKIN LEVEL CECOSTOM | 1/1/2007 | $114.65 | 3 |
| 8 | 44340 | REVISION OF COLOSTOMY;SIMPLE (RE | 1/1/2007 | $67.31 | 3 |
| 8 | 44345 | REVISION OF COLOSTOMY;COMPLICATE | 1/1/2007 | $125.96 | 3 |
| 8 | 44346 | REVISION OF COLOSTOMY;W/REPAIR O | 1/1/2007 | $137.43 | 3 |
| 8 | 44602 | SUTURE OF SMALL INTESTINE FOR PE | 1/1/2007 | $127.31 | 3 |
| 8 | 44603 | SUTURE OF SMALL INTESTINE FOR PE | 1/1/2007 | $147.03 | 3 |
| 8 | 44604 | SUTURE OF LARGE INTESTINE FOR PE | 1/1/2007 | $127.62 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 44605 | SUTURE OF INTESTINE (ENTERORRHAP | 1/1/2007 | $157.88 | 3 |
| 8 | 44615 | INTESTINAL STRICTUROPLASTY WITH | 1/1/2007 | $127.99 | 3 |
| 8 | 44620 | CLOSURE OF ENTEROSTOMY LARGE OR | 1/1/2007 | $98.77 | 3 |
| 8 | 44625 | CLOSURE OF ENTEROSTOMY LARGE OR | 1/1/2007 | $120.41 | 3 |
| 8 | 44626 | CLOSURE OF ENTEROSTOMY, LARGE OR | 1/1/2007 | $199.40 | 3 |
| 8 | 44640 | CLOSURE OF INTESTINAL CUTANEOUS | 1/1/2007 | $171.17 | 3 |
| 8 | 44650 | CLOSURE OF ENTEROENTERIC OR ENTE | 1/1/2007 | $178.38 | 3 |
| 8 | 44660 | CLOSURE OF ENTEROVESICAL FISTULA | 1/1/2007 | $165.15 | 3 |
| 8 | 44661 | CLOSURE OF ENTEROVESICAL FISTULA | 1/1/2007 | $192.81 | 3 |
| 8 | 44680 | INTESTINAL PLICATION (SEPARATE P | 1/1/2007 | $123.68 | 3 |
| 8 | 44700 | EXCLUSION OF SMALL INTESTINE FRO | 1/1/2007 | $127.67 | 3 |
| 8 | 44701 | INTRAOPERATIVE COLONIC LAVAGE (L | 1/1/2007 | $23.51 | 3 |
| 8 | 44799 | UNLISTED PROCEDURE INTESTINE | 4/1/1982 | $0.01 | 5 |
| 8 | 44800 | EXCISION OF MECKELS DIVERTICULUM | 1/1/2007 | $93.84 | 3 |
| 8 | 44820 | EXCISION OF LESION OF MESENTERY | 1/1/2007 | $99.44 | 3 |
| 8 | 44850 | SUTURE OF MESENTERY (SEPARATE PR | 1/1/2007 | $88.85 | 3 |
| 8 | 44899 | UNLISTED PROCEDURE MECKELS DIVER | 2/1/1989 | $0.01 | 5 |
| 8 | 44900 | INCISION AND DRAINAGE OF APPENDI | 1/1/2007 | $83.82 | 3 |
| 8 | 44901 | INCISION AND DRAINAGE OF APPENDI | 1/1/2007 | $24.39 | 3 |
| 8 | 44950 | APPENDECTOMY | 1/1/2007 | $81.07 | 3 |
| 8 | 44955 | APPENDECTOMY WHEN DONE FOR INDIC | 1/1/2007 | $11.78 | 3 |
| 8 | 44960 | APPENDECTOMY FOR RUPTURED APPEND | 1/1/2007 | $100.17 | 3 |
| 8 | 44970 | LAPAROSCOPY, SURGICAL; APPENDECT | 1/1/2007 | $72.24 | 3 |
| 8 | 44979 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 45000 | TRANSRECTAL DRAINAGE OF PELVIC A | 1/1/2007 | $41.52 | 3 |
| 8 | 45108 | ANORECTAL MYOMECTOMY | 1/1/2007 | $42.14 | 3 |
| 8 | 45110 | PROCTECTOMY; COMPLETE, COMBINED | 1/1/2007 | $227.01 | 3 |
| 8 | 45111 | PROCTECTOMY; PARTIAL RESECTION O | 1/1/2007 | $133.38 | 3 |
| 8 | 45112 | PROCTECTOMY, COMBINED ABDOMINOPE | 1/1/2007 | $237.18 | 3 |
| 8 | 45113 | PROCTECTOMY, PARTIAL, WITH RECTA | 1/1/2007 | $242.06 | 3 |
| 8 | 45114 | PROCTECTOMY, PARTIAL, WITH ANAST | 1/1/2007 | $215.54 | 3 |
| 8 | 45116 | PROCTECTOMY PARTIAL WITH ANASTOM | 1/1/2007 | $194.42 | 3 |
| 8 | 45119 | PROCTECTOMY, COMBINED ABDOMINOPE | 1/1/2007 | $242.01 | 3 |
| 8 | 45120 | PROCTECTOMY, COMPLETE, ABDOMINAL | 1/1/2007 | $195.14 | 3 |
| 8 | 45121 | PROCTECTOMY, COMPLETE, ABDOMINAL | 1/1/2007 | $214.71 | 3 |
| 8 | 45123 | PROCTECTOMY, PARTIAL, WITHOUT AN | 1/1/2007 | $131.83 | 3 |
| 8 | 45126 | PELVIC EXENTERATION FOR COLORECT | 1/1/2007 | $356.40 | 3 |
| 8 | 45130 | EXCISION OF RECTAL PROCIDENTIA W | 1/1/2007 | $129.70 | 3 |
| 8 | 45135 | EXCISION OF RECTAL PROCIDENTIA W | 1/1/2007 | $155.86 | 3 |
| 8 | 45160 | EXCISION OF RECTAL TUMOR BY PROC | 1/1/2007 | $122.64 | 3 |
| 8 | 45170 | EXCISION OF RECTAL TUMOR, TRANSA | 1/1/2007 | $93.78 | 3 |
| 8 | 45395 | LAPAROSCOPY, SURGICAL; PROCTECTO | 1/1/2006 | $248.24 | 3 |
| 8 | 45397 | LAPAROSCOPY, SURGICAL; PROCTECTO | 1/1/2006 | $269.67 | 3 |
| 8 | 45400 | LAPAROSCOPY, SURGICAL; PROCTOPEX | 1/1/2006 | $144.96 | 3 |
| 8 | 45402 | LAPAROSCOPY, SURGICAL; PROCTOPEX | 1/1/2006 | $196.49 | 3 |
| 8 | 45499 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2006 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 45540 | PROCTOPEXY (EG, FOR PROLAPSE); A | 1/1/2007 | $129.23 | 3 |
| 8 | 45541 | PROCTOPEXY FOR PROLAPSE; PERINEA | 1/1/2007 | $108.42 | 3 |
| 8 | 45550 | PROCTOPEXY (EG, FOR PROLAPSE); W | 1/1/2007 | $180.72 | 3 |
| 8 | 45560 | REPAIR OF RECTOCELE (SEPARATE PR | 1/1/2007 | $86.93 | 3 |
| 8 | 45562 | EXPLORATION, REPAIR, AND PRESACR | 1/1/2007 | $125.55 | 3 |
| 8 | 45563 | EXPLORATION, REPAIR, AND PRESACR | 1/1/2007 | $192.39 | 3 |
| 8 | 45800 | CLOSURE OF RECTOVESICAL FISTULA | 1/1/2007 | $140.29 | 3 |
| 8 | 45805 | CLOSURE OF RECTOVESICAL FISTULA; | 1/1/2007 | $167.64 | 3 |
| 8 | 45820 | CLOSURE OF RECTOURETHRAL FISTULA | 1/1/2007 | $143.61 | 3 |
| 8 | 45825 | CLOSURE OF RECTOURETHRAL FISTULA | 1/1/2007 | $173.19 | 3 |
| 8 | 45999 | UNLISTED PROCEDURE RECTUM | 2/1/1989 | $0.01 | 5 |
| 8 | 46285 | FISTULECTOMY; SECOND STAGE | 1/1/2007 | $43.03 | 3 |
| 8 | 46705 | ANOPLASTY PLASTIC OPERATION FOR | 1/1/2007 | $59.63 | 3 |
| 8 | 46710 | REPAIR OF ILEONAL POUCH FISTULA/ | 1/1/2006 | $130.53 | 3 |
| 8 | 46712 | REPAIR OF ILEONAL POUCH FISTULA/ | 1/1/2006 | $273.72 | 3 |
| 8 | 46715 | REPAIR OF LOW IMPERFORATE ANUS; | 1/1/2007 | $60.67 | 3 |
| 8 | 46716 | REPAIR OF LOW IMPERFORATE ANUS; | 1/1/2007 | $127.78 | 3 |
| 8 | 46730 | REPAIR OF HIGH IMPERFORATE ANUS | 1/1/2007 | $213.93 | 3 |
| 8 | 46735 | REPAIR OF HIGH IMPERFORATE ANUS | 1/1/2007 | $253.79 | 3 |
| 8 | 46740 | CONSTRUCTION OF ANUS FOR CONGENI | 1/1/2007 | $236.82 | 3 |
| 8 | 46742 | REPAIR OF HIGH IMPERFORATE ANUS | 1/1/2007 | $292.56 | 3 |
| 8 | 46744 | REPAIR OF CLOACAL ANOMALY BY ANO | 1/1/2007 | $415.72 | 3 |
| 8 | 46746 | REPAIR OF CLOACAL ANOMALY BY ANO | 1/1/2007 | $472.39 | 3 |
| 8 | 46748 | REPAIR OF CLOACAL ANOMALY WITH V | 1/1/2007 | $473.17 | 3 |
| 8 | 46750 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $85.06 | 3 |
| 8 | 46751 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $78.52 | 3 |
| 8 | 46760 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $119.89 | 3 |
| 8 | 46761 | SPHINCTEROPLASTY, ANAL, FOR INCO | 1/1/2007 | $110.39 | 3 |
| 8 | 46762 | SPHINCTEROPLASTY, ANAL, FOR INCO | 1/1/2007 | $101.00 | 3 |
| 8 | 47001 | BIOPSY OF LIVER, NEEDLE; WHEN DO | 1/1/2007 | $14.53 | 3 |
| 8 | 47010 | HEPATOTOMY FOR DRAINAGE OF ABSCE | 1/1/2007 | $135.98 | 3 |
| 8 | 47011 | HEPATOTOMY; FOR PERCUTANEOUS DRA | 1/1/2007 | $26.57 | 3 |
| 8 | 47015 | LAPAROTOMY, WITH ASPIRATION AND/ | 1/1/2007 | $126.74 | 3 |
| 8 | 47100 | BIOPSY OF LIVER, WEDGE | 1/1/2007 | $99.80 | 3 |
| 8 | 47120 | HEPATECTOMY RESECTION OF LIVER P | 1/1/2007 | $286.90 | 3 |
| 8 | 47122 | HEPATECTOMY, RESECTION OF LIVER; | 1/1/2007 | $434.61 | 3 |
| 8 | 47125 | HEPATECTOMY RESECTION OF LIVER; | 1/1/2007 | $389.92 | 3 |
| 8 | 47130 | HEPATECTOMY RESECTION OF LIVER; | 1/1/2007 | $421.58 | 3 |
| 8 | 47133 | DONOR HEPATECTOMY (INCLUDING COL | 7/17/1987 | NC | 9 |
| 8 | 47134 | DONOR HEPATECTOMY, WITH PREPARAT | 4/1/2004 | INVALID | N |
| 8 | 47135 | LIVER ALLOTRANSPLANTATION; ORTHO | 1/1/2007 | $637.95 | 3 |
| 8 | 47136 | LIVER ALLOTRANSPLANTATION; METER | 1/1/2007 | $539.76 | 3 |
| 8 | 47140 | DONOR HEPATECTOMY (INCLUDING COL | 1/1/2007 | $427.76 | 3 |
| 8 | 47141 | DONOR HEPATECTOMY (INCLUDING COL | 1/1/2007 | $516.66 | 3 |
| 8 | 47142 | DONOR HEPATECTOMY (INCLUDING COL | 1/1/2007 | $568.88 | 3 |
| 8 | 47143 | BACKBENCH STANDARD PREP OF CADAV | 5/15/2006 | $93.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 47144 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 8 | 47145 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 8 | 47146 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $46.14 | 3 |
| 8 | 47147 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $53.82 | 3 |
| 8 | 47300 | MARSUPIALIZATION OF CYST OR ABSC | 1/1/2007 | $126.01 | 3 |
| 8 | 47350 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $160.89 | 3 |
| 8 | 47360 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $217.20 | 3 |
| 8 | 47361 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $370.88 | 3 |
| 8 | 47362 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $154.25 | 3 |
| 8 | 47379 | UNLISTED LAPAROSCOPIC PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 47399 | UNLISTED PROCEDURE LIVER | 2/1/1994 | $0.01 | 5 |
| 8 | 47400 | HEPATOCOTOMY OR HEPATICOSTOMY WI | 1/1/2007 | $254.21 | 3 |
| 8 | 47420 | CHOLEDOCHOTOMY OR CHOLEDOCHOSTOM | 1/1/2007 | $162.19 | 3 |
| 8 | 47425 | CHOLEDOCHOTOMY OR CHOLEDOCHOSTOM | 1/1/2007 | $162.14 | 3 |
| 8 | 47460 | TRANSDUODENAL SPHINCTEROTOMY OR | 1/1/2007 | $148.38 | 3 |
| 8 | 47480 | CHOLECYSTOTOMY OR CHOLECYCSTOSOM | 1/1/2007 | $94.15 | 3 |
| 8 | 47550 | BILIARY ENDOSCOPY, INTRAOPERATIV | 1/1/2007 | $23.04 | 3 |
| 8 | 47560 | LAPAROSCOPY, SURGICAL; WITH GUID | 1/1/2007 | $37.37 | 3 |
| 8 | 47561 | LAPAROSCOPY, SURGICAL; WITH GUID | 1/1/2007 | $40.22 | 3 |
| 8 | 47562 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $90.93 | 3 |
| 8 | 47563 | LAPAROSCOPY, SURGICAL; CHOLEYSTE | 1/1/2007 | $97.62 | 3 |
| 8 | 47564 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $114.44 | 3 |
| 8 | 47570 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $101.67 | 3 |
| 8 | 47579 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 47600 | CHOLECYSTECTOMY | 1/1/2007 | $111.53 | 3 |
| 8 | 47605 | CHOLECYSTECTOMY; WITH CHOLANGIOG | 1/1/2007 | $119.99 | 3 |
| 8 | 47610 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $151.60 | 3 |
| 8 | 47612 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $151.08 | 3 |
| 8 | 47620 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $165.41 | 3 |
| 8 | 47630 | BILIARY DUCT STONE EXTRACTION PE | 1/1/2007 | $75.98 | 3 |
| 8 | 47700 | EXPLORATION FOR CONGENITAL ATRES | 1/1/2007 | $130.17 | 3 |
| 8 | 47701 | PORTOENTEROSTOMY (EG, KASAI PROC | 1/1/2007 | $222.86 | 3 |
| 8 | 47711 | EXCISION OF BILE DUCT TUMOR, WIT | 1/1/2007 | $186.74 | 3 |
| 8 | 47712 | EXCISION OF BILE DUCT TUMOR, WIT | 1/1/2007 | $241.59 | 3 |
| 8 | 47715 | EXCISION OF CHOLEDOCHAL CYST | 1/1/2007 | $154.09 | 3 |
| 8 | 47716 | ANASTOMOSIS, CHOLEDOCHAL CYST, W | 1/1/2007 | INVALID | N |
| 8 | 47719 | ANASTOMOSIS, CHOLEDOCHAL CYST, W | 1/1/2007 | $151.50 | 3 |
| 8 | 47720 | CHOLECYSTOENTEROSTOMY DIRECT | 1/1/2007 | $132.19 | 3 |
| 8 | 47721 | CHOLECYSTOENTEROSTOMY; WITH GAST | 1/1/2007 | $156.63 | 3 |
| 8 | 47740 | CHOLECYSTOENTEROSTOMY; ROUX-EN-Y | 1/1/2007 | $151.76 | 3 |
| 8 | 47741 | CHOLECYSTOENTEROSTOMY; ROUX-EN-Y | 1/1/2007 | $173.50 | 3 |
| 8 | 47760 | ANASTOMOSIS, OF EXTRAHEPATIC BIL | 1/1/2007 | $208.02 | 3 |
| 8 | 47765 | ANASTOMOSIS, OF INTRAHEPATIC DUC | 1/1/2007 | $202.10 | 3 |
| 8 | 47780 | ANASTOMOSIS ROUX-EN-Y OF EXTRAHE | 1/1/2007 | $213.67 | 3 |
| 8 | 47785 | ANASTOMOSIS, ROUX-EN-Y, OF INTRA | 1/1/2007 | $249.90 | 3 |
| 8 | 47800 | RECONSTRUCTION PLASTIC OF EXTRAH | 1/1/2007 | $188.97 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 47801 | PLACEMENT OF CHOLEDOCHAL STENT | 1/1/2007 | $127.00 | 3 |
| 8 | 47802 | U-TUBE HEPATICOENTEROSTOMY | 1/1/2007 | $176.72 | 3 |
| 8 | 47900 | SUTURE OF EXTRAHEPATIC BILIARY D | 1/1/2007 | $162.91 | 3 |
| 8 | 47999 | UNLISTED PROCEDURE BILIARY TRACT | 4/1/1982 | $0.01 | 5 |
| 8 | 48000 | PLACEMENT OF DRAINS, PERIPANCREA | 1/1/2007 | $223.27 | 3 |
| 8 | 48001 | PLACEMENT OF DRAINS, PERIPANCREA | 1/1/2007 | $280.16 | 3 |
| 8 | 48005 | RESECTION OR DEBRIDEMENT OF PANC | 1/1/2007 | INVALID | N |
| 8 | 48020 | REMOVAL OF PANCREATIC CALCULUS | 1/1/2007 | $130.32 | 3 |
| 8 | 48100 | BIOPSY OF PANCREAS, OPEN (EG, FI | 1/1/2007 | $100.84 | 3 |
| 8 | 48105 | RESECTION OR DEBRIDEMENT OF PANC | 1/1/2007 | $366.47 | 3 |
| 8 | 48120 | EXCISION OF LESION OF PANCREAS ( | 1/1/2007 | $128.61 | 3 |
| 8 | 48140 | PANCREATECTOMY, DISTAL SUBTOTAL, | 1/1/2007 | $184.14 | 3 |
| 8 | 48145 | PANCREATECTOMY DISTAL SUBTOTAL W | 1/1/2007 | $191.98 | 3 |
| 8 | 48146 | PANCREATECTOMY, DISTAL, NEAR-TOT | 1/1/2007 | $217.20 | 3 |
| 8 | 48148 | EXCISION AMPULLA OF VATER | 1/1/2007 | $141.22 | 3 |
| 8 | 48150 | PANCREATECTOMY PROXIMAL SUBTOTAL | 1/1/2007 | $382.87 | 3 |
| 8 | 48152 | PANCREATECTOMY, PROXIMAL SUBTOTA | 1/1/2007 | $351.31 | 3 |
| 8 | 48153 | PANCREATECTOMY, PROXIMAL SUBTOTA | 1/1/2007 | $382.45 | 3 |
| 8 | 48154 | PANCREATECTOMY, PROX SUBTOTAL WI | 1/1/2007 | $353.49 | 3 |
| 8 | 48155 | PANCREATECTOMY TOTAL | 1/1/2007 | $205.21 | 3 |
| 8 | 48160 | PANCREATECTOMY, TOTAL OR SUBTOTA | 4/1/1990 | $0.01 | 5 |
| 8 | 48180 | PANCREATICOJEJUNOSTOMY, SIDE-T0- | 1/1/2007 | INVALID | N |
| 8 | 48500 | MARSUPIALIZATION OF PANCREATIC C | 1/1/2007 | $127.78 | 3 |
| 8 | 48510 | EXTERNAL DRAINAGE, PSEUDOCYST OF | 1/1/2007 | $122.28 | 3 |
| 8 | 48511 | EXTERNAL DRAINAGE, PSEUDOCYST OF | 1/1/2007 | $28.75 | 3 |
| 8 | 48520 | INTERNAL ANASTOMOSIS OF PANCREAT | 1/1/2007 | $126.27 | 3 |
| 8 | 48540 | INTERNAL ANASTOMOSIS OF PANCREAT | 1/1/2007 | $157.83 | 3 |
| 8 | 48545 | PANCREATORRHAPHY FOR INJURY | 1/1/2007 | $147.97 | 3 |
| 8 | 48547 | DUODENAL EXCLUSION WITH GASTROJE | 1/1/2007 | $206.04 | 3 |
| 8 | 48548 | PANCREATICOJEJUNOSTOMY, SIDE-TO- | 1/1/2007 | $213.67 | 3 |
| 8 | 48551 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 8 | 48552 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $31.50 | 3 |
| 8 | 48554 | TRANSPLANTATION OF PANCREATIC AL | 1/1/2007 | $293.75 | 3 |
| 8 | 48556 | REMOVAL OF TRANSPLANTED PANCREAT | 1/1/2007 | $134.11 | 3 |
| 8 | 48999 | UNLISTED PROCEDURE PANCREAS | 4/1/1982 | $0.01 | 5 |
| 8 | 49000 | EXPLORATORY LAPAROTOMY, EXPLORAT | 1/1/2007 | $96.38 | 3 |
| 8 | 49002 | REOPENING OF RECENT LAPAROTOMY | 1/1/2007 | $87.50 | 3 |
| 8 | 49010 | EXPLORATION, RETROPERITONEAL ARE | 1/1/2007 | $102.14 | 3 |
| 8 | 49020 | DRAINAGE OF PERITONEAL ABSCESS O | 1/1/2007 | $186.11 | 3 |
| 8 | 49021 | DRAINAGE OF PERITONEAL ABSCESS O | 1/1/2007 | $24.29 | 3 |
| 8 | 49040 | DRAINAGE OF SUBDIAPHRAGMATIC OR | 1/1/2007 | $112.21 | 3 |
| 8 | 49041 | DRAINAGE OF SUBDIAPHRAGMATIC OR | 1/1/2007 | $28.75 | 3 |
| 8 | 49060 | DRAINAGE OF RETROPERITONEAL ABSC | 1/1/2007 | $129.85 | 3 |
| 8 | 49061 | DRAINAGE OF RETROPERITONEAL ABSC | 1/1/2007 | $26.57 | 3 |
| 8 | 49062 | DRAINAGE OF EXTRAPERITONEAL LYMP | 1/1/2007 | $94.30 | 3 |
| 8 | 49085 | REMOVAL OF PERITONEAL FOREIGN BO | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 49200 | EXCISION OR DESTRUCTION, OPEN, I | 1/1/2007 | $85.64 | 3 |
| 8 | 49201 | EXCISION OR DESTRUCTION BY ANY M | 1/1/2007 | $123.16 | 3 |
| 8 | 49215 | EXCISION OF PRESACRAL OR SACROCO | 1/1/2007 | $269.36 | 3 |
| 8 | 49220 | STAGING LAPAROTOMY FOR HODGKINS | 1/1/2007 | $121.34 | 3 |
| 8 | 49250 | UMBILECTOMY OMPHALECTOMY EXCISIO | 1/1/2007 | $71.05 | 3 |
| 8 | 49255 | OMENTECTOMY EPIPLOECTOMY RESECTI | 1/1/2007 | $94.30 | 3 |
| 8 | 49320 | LAPAROSCOPY, ABDOMEN, PERITONEUM | 1/1/2007 | $43.49 | 3 |
| 8 | 49321 | LAPAROSCOPY, SURGICAL; WITH BIOP | 1/1/2007 | $45.36 | 3 |
| 8 | 49322 | LAPAROSCOPY, SURGICAL, ABDOMEN, | 1/1/2007 | $48.79 | 3 |
| 8 | 49323 | LAPAROSCOPY, SURGICAL, ABDOMEN, | 1/1/2007 | $78.73 | 3 |
| 8 | 49324 | LAPAROSCOPY, SURGICAL; WITH INSE | 1/1/2007 | $50.86 | 3 |
| 8 | 49325 | LAPAROSCOPY, SURGICAL; W/REVISIO | 1/1/2007 | $54.81 | 3 |
| 8 | 49326 | LAPAROSCOPY, SURGICAL; WITH OMEN | 1/1/2007 | $25.22 | 3 |
| 8 | 49329 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 49425 | INSERTION OF PERITONEAL-VENOUS S | 1/1/2007 | $96.02 | 3 |
| 8 | 49426 | REVISION OF PERITONEAL-VENOUS SH | 1/1/2007 | $81.33 | 3 |
| 8 | 49435 | INSERTION OF SUBCUTANEOUS EXTENS | 1/1/2007 | $16.24 | 3 |
| 8 | 49436 | DELAYED CREATION OF EXIT SITE FR | 1/1/2007 | $23.87 | 3 |
| 8 | 49491 | REPAIR, INITIAL INGUINAL HERNIA, | 1/1/2007 | $91.19 | 3 |
| 8 | 49492 | REPAIR, INITIAL INGUINAL HERNIA, | 1/1/2007 | $113.82 | 3 |
| 8 | 49495 | REPAIR, INITIAL INGUINAL HERNIA, | 1/1/2007 | $49.72 | 3 |
| 8 | 49496 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $73.33 | 3 |
| 8 | 49500 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $48.27 | 3 |
| 8 | 49501 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $73.70 | 3 |
| 8 | 49505 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $64.20 | 3 |
| 8 | 49507 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $79.36 | 3 |
| 8 | 49520 | REPAIR RECURRENT INGUINAL HERNIA | 1/1/2007 | $79.61 | 3 |
| 8 | 49521 | REPAIR RECURRENT INGUINAL HERNIA | 1/1/2007 | $97.52 | 3 |
| 8 | 49525 | REPAIR INGUINAL HERNIA, SLIDING, | 1/1/2007 | $71.47 | 3 |
| 8 | 49540 | REPAIR LUMBAR HERNIA | 1/1/2007 | $85.58 | 3 |
| 8 | 49550 | REPAIR INITIAL FEMORAL HERNIA, A | 1/1/2007 | $72.09 | 3 |
| 8 | 49553 | REPAIR INITIAL FEMORAL HERNIA, A | 1/1/2007 | $78.32 | 3 |
| 8 | 49555 | REPAIR RECURRENT FEMORAL HERNIA; | 1/1/2007 | $75.20 | 3 |
| 8 | 49557 | REPAIR RECURRENT FEMORAL HERNIA; | 1/1/2007 | $91.29 | 3 |
| 8 | 49560 | REPAIR INITIAL INCISIONAL HERNIA | 1/1/2007 | $94.56 | 3 |
| 8 | 49561 | REPAIR INITIAL INCISIONAL HERNIA | 1/1/2007 | $115.11 | 3 |
| 8 | 49565 | REPAIR RECURRENT INCISIONAL HERN | 1/1/2007 | $94.98 | 3 |
| 8 | 49566 | REPAIR RECURRENT INCISIONAL HERN | 1/1/2007 | $116.36 | 3 |
| 8 | 49568 | IMPLANTATION OF MESH OR OTHER PR | 1/1/2007 | $37.32 | 3 |
| 8 | 49570 | REPAIR EPIGASTRIC HERNIA (EG, PR | 1/1/2007 | $49.82 | 3 |
| 8 | 49572 | REPAIR EPIGASTRIC HERNIA; INCARC | 1/1/2007 | $57.45 | 3 |
| 8 | 49580 | REPAIR UMBILICAL HERNIA, UNDER A | 1/1/2007 | $37.58 | 3 |
| 8 | 49582 | REPAIR UMBILICAL HERNIA, UNDER A | 1/1/2007 | $57.04 | 3 |
| 8 | 49585 | REPAIR UMBILICAL HERNIA, AGE 5 Y | 1/1/2007 | $53.66 | 3 |
| 8 | 49587 | REPAIR UMBILICAL HERNIA, AGE 5 Y | 1/1/2007 | $63.73 | 3 |
| 8 | 49590 | REPAIR SPIGELIAN HERNIA | 1/1/2007 | $71.36 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 49600 | REPAIR OF SMALL OMPHALOCELE, WIT | 1/1/2007 | $91.34 | 3 |
| 8 | 49605 | REPAIR OF LARGE OMPHALOCELE OR G | 1/1/2007 | $590.78 | 3 |
| 8 | 49606 | REPAIR OF OMPHALOCELE WITH STAGE | 1/1/2007 | $149.06 | 3 |
| 8 | 49610 | REPAIR OF OMPHALOCELE (GROSS TYP | 1/1/2007 | $86.98 | 3 |
| 8 | 49611 | REPAIR OF OMPHALOCELE (GROSS TYP | 1/1/2007 | $86.57 | 3 |
| 8 | 49650 | LAPASROSCOPY, SURGICAL; REPAIR I | 1/1/2007 | $53.92 | 3 |
| 8 | 49651 | LAPAROSCOPY, SURGICAL; REPAIR RE | 1/1/2007 | $69.65 | 3 |
| 8 | 49659 | UNLISTED LAPAROSCOPY PROCEDURE, | 4/1/2002 | $0.01 | 5 |
| 8 | 49900 | SUTURE SECONDARY OF ABDOMINAL WA | 1/1/2007 | $104.42 | 3 |
| 8 | 49904 | OMENTAL FLAP, EXTRA-ABDOMINAL (E | 1/1/2007 | $196.75 | 3 |
| 8 | 49905 | OMENTAL FLAP, INTRA-ABDOMINAL (L | 1/1/2007 | $49.77 | 3 |
| 8 | 49906 | FREE OMENTAL FLAP WITH MICROVASC | 1/1/1997 | $0.01 | 5 |
| 8 | 49999 | UNLISTED PROCEDURE ABDOMEN PERIT | 4/1/1982 | $0.01 | 5 |
| 8 | 50010 | RENAL EXPLORATION, NOT NECESSITA | 1/1/2007 | $88.85 | 3 |
| 8 | 50020 | DRAINAGE OF PERIRENAL OR RENAL A | 1/1/2007 | $123.21 | 3 |
| 8 | 50021 | DRAINAGE OF PERIRENAL OR RENAL A | 1/1/2007 | $24.24 | 3 |
| 8 | 50040 | NEPHROSTOMY NEPHROTOMY WITH DRAI | 1/1/2007 | $118.18 | 3 |
| 8 | 50045 | NEPHROTOMY WITH EXPLORATION | 1/1/2007 | $120.88 | 3 |
| 8 | 50060 | NEPHROLITHOTOMY REMOVAL OF CALCU | 1/1/2007 | $147.76 | 3 |
| 8 | 50065 | NEPHROLITHOTOMY; SECONDARY SURGI | 1/1/2007 | $147.60 | 3 |
| 8 | 50070 | NEPHROLITHOTOMY; COMPLICATED BY | 1/1/2007 | $155.49 | 3 |
| 8 | 50075 | NEPHROLITHOTOMY REMOVAL OF LARGE | 1/1/2007 | $192.13 | 3 |
| 8 | 50081 | PERCUTANEOUS NEPHROSTOLITHOTOMY | 1/1/2007 | $166.55 | 3 |
| 8 | 50100 | TRANSECTION OR REPOSITIONING OF | 1/1/2007 | $134.58 | 3 |
| 8 | 50120 | PYELOTOMY WITH EXPLORATION | 1/1/2007 | $123.94 | 3 |
| 8 | 50125 | PYELOTOMY; WITH DRAINAGE PYELOST | 1/1/2007 | $129.28 | 3 |
| 8 | 50130 | PYELOTOMY WITH REMOVAL OF CALCUL | 1/1/2007 | $133.18 | 3 |
| 8 | 50135 | PYELOTOMY COMPLICATED (EG SECOND | 1/1/2007 | $146.72 | 3 |
| 8 | 50205 | RENAL BIOPSY PERCUTANEOUS; BY SU | 1/1/2007 | $91.40 | 3 |
| 8 | 50220 | NEPHRECTOMY, INCLUDING PARTIAL U | 1/1/2007 | $133.49 | 3 |
| 8 | 50225 | NEPHRECTOMY COMPLICATED BECAUSE | 1/1/2007 | $154.97 | 3 |
| 8 | 50230 | NEPHRECTOMY,INCLUDING PARTIAL UR | 1/1/2007 | $167.01 | 3 |
| 8 | 50234 | NEPHRECTOMY WITH TOTAL URETERECT | 1/1/2007 | $170.28 | 3 |
| 8 | 50236 | NEPHRECTOMY WITH TOTAL URETERECT | 1/1/2007 | $191.25 | 3 |
| 8 | 50240 | NEPHRECTOMY PARTIAL | 1/1/2007 | $168.93 | 3 |
| 8 | 50280 | EXCISION OR UNROOFING OF CYSTS O | 1/1/2007 | $122.17 | 3 |
| 8 | 50290 | EXCISION OF PERINEPHRIC CYST | 1/1/2007 | $117.24 | 3 |
| 8 | 50320 | DONOR NEPHRECTOMY (INCLUDING COL | 1/1/2007 | $182.74 | 3 |
| 8 | 50323 | BACKBENCH STANDARD PREP OF CADAV | 1/1/2005 | $0.01 | 5 |
| 8 | 50325 | BACKBENCH STANDARD PREP OF LIVIN | 7/24/2006 | $34.00 | 3 |
| 8 | 50327 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $29.27 | 3 |
| 8 | 50328 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $25.64 | 3 |
| 8 | 50329 | BACKBENCH RECONSTRUCTION OF CADA | 1/1/2007 | $24.50 | 3 |
| 8 | 50340 | RECIPIENT NEPHRECTOMY (SEPARATE | 1/1/2007 | $105.31 | 3 |
| 8 | 50360 | RENAL ALLOTRANSPLANTATION, IMPLA | 1/1/2007 | $263.65 | 3 |
| 8 | 50365 | RENAL HOMOTRANSPLANTATION, IMPLA | 1/1/2007 | $308.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 50370 | REMOVAL OF TRANSPLANTED RENAL AL | 1/1/2007 | $116.93 | 3 |
| 8 | 50380 | RENAL AUTOTRANSPLANTATION REIMPL | 1/1/2007 | $183.10 | 3 |
| 8 | 50400 | PYELOPLASTY (FOLEY Y-PYELOPLASTY | 1/1/2007 | $149.16 | 3 |
| 8 | 50405 | PYELOPLASTY COMPLICATED (CONGENI | 1/1/2007 | $180.20 | 3 |
| 8 | 50500 | NEPHRORRHAPHY SUTURE OF KIDNEY W | 1/1/2007 | $155.44 | 3 |
| 8 | 50520 | CLOSURE OF NEPHROCUTANEOUS OR PY | 1/1/2007 | $135.61 | 3 |
| 8 | 50525 | CLOSURE OF NEPHROVISCERAL FISTUL | 1/1/2007 | $171.74 | 3 |
| 8 | 50526 | CLOSURE OF NEPHROVISCERAL FISTUL | 1/1/2007 | $185.91 | 3 |
| 8 | 50540 | SYMPHYSIOTOMY FOR HORSESHOE KIDN | 1/1/2007 | $153.62 | 3 |
| 8 | 50541 | LAPAROSCOPY, SURGICAL; ABLATION | 1/1/2007 | $122.54 | 3 |
| 8 | 50542 | LAPAROSCOPY, SURGICAL; ABLATION | 1/1/2007 | $153.16 | 3 |
| 8 | 50543 | LAPAROSCOPY, SURGICAL; PARTIAL N | 1/1/2007 | $194.52 | 3 |
| 8 | 50544 | LAPAROSCOPY, SURGICAL; PYELOPLAS | 1/1/2007 | $168.62 | 3 |
| 8 | 50545 | LAPAROSCOPY, SURGICAL; RADICAL N | 1/1/2007 | $180.98 | 3 |
| 8 | 50546 | LAPAROSCOPY, SURGICAL; NEPHRECTO | 1/1/2007 | $157.78 | 3 |
| 8 | 50547 | LAPAROSCOPY, SURGICAL; DONOR NEP | 1/1/2007 | $204.23 | 3 |
| 8 | 50548 | LAPAROSCOPY, SURGICAL; NEPHRECTO | 1/1/2007 | $183.10 | 3 |
| 8 | 50549 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 50559 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2005 | INVALID | N |
| 8 | 50562 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2007 | $82.78 | 3 |
| 8 | 50578 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2005 | INVALID | N |
| 8 | 50600 | URETEROTOMY WITH EXPLORATION OR | 1/1/2007 | $122.64 | 3 |
| 8 | 50605 | URETEROTOMY FOR INSERTION OF IND | 1/1/2007 | $122.69 | 3 |
| 8 | 50610 | URETEROLITHOTOMY UPPER ONE-THIRD | 1/1/2007 | $126.17 | 3 |
| 8 | 50620 | URETEROLITHOTOMY; MIDDLE ONE-THI | 1/1/2007 | $117.09 | 3 |
| 8 | 50630 | URETEROLITHOTOMY; LOWER ONE-THIR | 1/1/2007 | $115.74 | 3 |
| 8 | 50650 | URETERECTOMY WITH BLADDER CUFF ( | 1/1/2007 | $134.16 | 3 |
| 8 | 50660 | URETERECTOMY TOTAL ECTOPIC URETE | 1/1/2007 | $149.84 | 3 |
| 8 | 50700 | URETEROPLASTY PLASTIC OPERATION | 1/1/2007 | $122.43 | 3 |
| 8 | 50715 | URETEROLYSIS, WITH OR WITHOUT RE | 1/1/2007 | $154.45 | 3 |
| 8 | 50722 | URETEROLYSIS FOR OVARIAN VEIN SY | 1/1/2007 | $135.20 | 3 |
| 8 | 50725 | URETEROLYSIS FOR RETROCAVAL URET | 1/1/2007 | $145.53 | 3 |
| 8 | 50727 | REVISION OF URINARY-CUTANEOUS AN | 1/1/2007 | $67.78 | 3 |
| 8 | 50728 | REVISION OF URINARY-CUTANEOUS AN | 1/1/2007 | $96.38 | 3 |
| 8 | 50740 | URETEROPYELOSTOMY ANASTOMOSIS OF | 1/1/2007 | $145.84 | 3 |
| 8 | 50750 | URETEROCALYCOSTOMY ANASTOMOSIS O | 1/1/2007 | $149.78 | 3 |
| 8 | 50760 | URETEROURETEROSTOMY | 1/1/2007 | $143.40 | 3 |
| 8 | 50770 | TRANSURETEROURETEROSTOMY ANASTOM | 1/1/2007 | $150.09 | 3 |
| 8 | 50780 | URETERONEOCYSTOSTOMY; ANASTOMOSI | 1/1/2007 | $142.41 | 3 |
| 8 | 50782 | URETERONEOCYSTOSTOMY; ANASTOMOSI | 1/1/2007 | $155.23 | 3 |
| 8 | 50783 | URETERONEOCYSTOSTOMY; WITH EXTEN | 1/1/2007 | $159.49 | 3 |
| 8 | 50785 | URETERONEOCYSTOSTOMY; WITH VESIC | 1/1/2007 | $157.00 | 3 |
| 8 | 50800 | URETEROENTEROSTOMY, DIRECT ANAST | 1/1/2007 | $115.06 | 3 |
| 8 | 50810 | URETEROSIGMOIDOSTOMY, W/CREATION | 1/1/2007 | $163.17 | 3 |
| 8 | 50815 | URETEROCOLON CONDUIT, INCLUDING | 1/1/2007 | $155.18 | 3 |
| 8 | 50820 | URETEROILEAL CONDUIT (ILEAL BLAD | 1/1/2007 | $168.21 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 50825 | CONTINENT DIVERSION, INC INTESTI | 1/1/2007 | $214.66 | 3 |
| 8 | 50830 | URINARY UNDIVERSION (EG TAKING D | 1/1/2007 | $237.70 | 3 |
| 8 | 50840 | REPLACEMENT OF ALL OR PART OF UR | 1/1/2007 | $155.08 | 3 |
| 8 | 50845 | CUTANEOUS APPENDICO-VESICOSTOMY | 1/1/2007 | $162.71 | 3 |
| 8 | 50860 | URETEROSTOMY, TRANSPLANTATION OF | 1/1/2007 | $120.72 | 3 |
| 8 | 50900 | URETERORRHAPHY SUTURE OF URETER | 1/1/2007 | $108.42 | 3 |
| 8 | 50920 | CLOSURE OF URETEROCUTANEOUS FIST | 1/1/2007 | $113.66 | 3 |
| 8 | 50930 | CLOSURE OF URETEROVISCERAL FISTU | 1/1/2007 | $145.06 | 3 |
| 8 | 50940 | DELIGATION OF URETER | 1/1/2007 | $115.01 | 3 |
| 8 | 50945 | LAPAROSCOPY, SURGICAL, URETEROLI | 1/1/2007 | $131.72 | 3 |
| 8 | 50947 | LAPAROSCOPY, SURGICAL; URETERONE | 1/1/2007 | $188.55 | 3 |
| 8 | 50948 | LAPAROSOCPY, SURGICAL; URETERONE | 1/1/2007 | $170.65 | 3 |
| 8 | 50959 | URETERAL ENDOSCOPY THROUGH ESTAB | 1/1/2005 | INVALID | N |
| 8 | 50978 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2005 | INVALID | N |
| 8 | 51020 | CYSTOTOMY OR CYSTOSTOMY WITH FUL | 1/1/2007 | $57.25 | 3 |
| 8 | 51030 | CYSTOTOMY OR CYSTOSTOMY; WITH CR | 1/1/2007 | $58.75 | 3 |
| 8 | 51040 | CYSTOSTOMY CYSTOTOMY WITH DRAINA | 1/1/2007 | $38.77 | 3 |
| 8 | 51045 | CYSTOTOMY, WITH INSERTION OF URE | 1/1/2007 | $58.18 | 3 |
| 8 | 51050 | CYSTOLITHOTOMY CYSTOTOMY WITH RE | 1/1/2007 | $57.35 | 3 |
| 8 | 51060 | TRANSVESICAL URETEROLITHOTOMY | 1/1/2007 | $72.50 | 3 |
| 8 | 51080 | DRAINAGE OF PERIVESICAL OR PREVE | 1/1/2007 | $51.54 | 3 |
| 8 | 51500 | EXCISION OF URACHAL CYST OR SINU | 1/1/2007 | $83.87 | 3 |
| 8 | 51520 | CYSTOTOMY FOR SIMPLE EXCISION OF | 1/1/2007 | $76.03 | 3 |
| 8 | 51525 | CYSTOTOMY; FOR EXCISION OF BLADD | 1/1/2007 | $109.41 | 3 |
| 8 | 51530 | CYSTOTOMY; FOR EXCISION OF BLADD | 1/1/2007 | $99.49 | 3 |
| 8 | 51535 | CYSTOTOMY FOR EXCISION, INCISION | 1/1/2007 | $103.28 | 3 |
| 8 | 51550 | CYSTECTOMY PARTIAL SIMPLE | 1/1/2007 | $122.95 | 3 |
| 8 | 51555 | CYSTECTOMY PARTIAL COMPLICATED ( | 1/1/2007 | $163.85 | 3 |
| 8 | 51565 | CYSTECTOMY PARTIAL WITH REIMPLAN | 1/1/2007 | $167.12 | 3 |
| 8 | 51570 | CYSTECTOMY COMPLETE (SEPARATE PR | 1/1/2007 | $185.13 | 3 |
| 8 | 51575 | CYSTECTOMY COMPLETE WITH BILATER | 1/1/2007 | $231.53 | 3 |
| 8 | 51580 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $237.65 | 3 |
| 8 | 51585 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $266.71 | 3 |
| 8 | 51590 | CYSTECTOMY, COMPLETE, W/URETEROI | 1/1/2007 | $246.63 | 3 |
| 8 | 51595 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $279.38 | 3 |
| 8 | 51596 | CYSTECTOMY, COMPLETE, W/CONTINEN | 1/1/2007 | $298.37 | 3 |
| 8 | 51597 | PELVIC EXENTERATION COMPLETE FOR | 1/1/2007 | $290.43 | 3 |
| 8 | 51800 | CYSTOPLASTY OR CYSTOURETHROPLAST | 1/1/2007 | $136.45 | 3 |
| 8 | 51820 | CYSTOURETHROPLASTY WITH UNILATER | 1/1/2007 | $144.80 | 3 |
| 8 | 51840 | ANTERIOR VESICOURETHROPEXY, OR U | 1/1/2007 | $89.94 | 3 |
| 8 | 51841 | ANTERIOR VESICOURETHROPEXY OR UR | 1/1/2007 | $107.12 | 3 |
| 8 | 51845 | ABDOMINO-VAGINAL VESICAL NECK SU | 1/1/2007 | $79.20 | 3 |
| 8 | 51860 | CYSTORRHAPHY SUTURE OF BLADDER W | 1/1/2007 | $98.25 | 3 |
| 8 | 51865 | CYSTORRHAPHY SUTURE OF BLADDER W | 1/1/2007 | $119.06 | 3 |
| 8 | 51880 | CLOSURE OF CYSTOSTOMY (SEPARATE | 1/1/2007 | $63.99 | 3 |
| 8 | 51900 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $105.05 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 51920 | CLOSURE OF VESICOUTERINE FISTULA | 1/1/2007 | $96.64 | 3 |
| 8 | 51925 | CLOSURE OF VESICOUTERINE FISTULA | 1/1/2007 | $136.08 | 3 |
| 8 | 51940 | CLOSURE, EXSTROPHY OF BLADDER | 1/1/2007 | $221.30 | 3 |
| 8 | 51960 | ENTEROCYSTOPLASTY, INCLUDING INT | 1/1/2007 | $177.86 | 3 |
| 8 | 51980 | CUTANEOUS VESICOSTOMY | 1/1/2007 | $91.29 | 3 |
| 8 | 51990 | LAPAROSCOPY, SURGICAL; URETHRAL | 1/1/2007 | $103.96 | 3 |
| 8 | 51992 | LAPAROSCOPY, SURGICAL; SLING OPE | 1/1/2007 | $112.21 | 3 |
| 8 | 51999 | UNLISTED LAPAROSCOPY PROCEDURE, | 1/1/2006 | $0.01 | 5 |
| 8 | 53060 | DRAINAGE OF SKENES GLAND ABSCESS | 1/1/2007 | $25.95 | 3 |
| 8 | 53080 | DRAINAGE OF PERINEAL URINARY EXT | 1/1/2007 | $66.28 | 3 |
| 8 | 53085 | DRAINAGE OF PERINEAL URINARY EXT | 1/1/2007 | $96.48 | 3 |
| 8 | 53210 | URETHRECTOMY TOTAL INCLUDING CYS | 1/1/2007 | $100.12 | 3 |
| 8 | 53215 | URETHRECTOMY TOTAL INCLUDING CYS | 1/1/2007 | $120.93 | 3 |
| 8 | 53230 | EXCISION OF URETHRAL DIVERTICULU | 1/1/2007 | $77.95 | 3 |
| 8 | 53235 | EXCISION OF URETHRAL DIVERTICULU | 1/1/2007 | $81.74 | 3 |
| 8 | 53240 | MARSUPIALIZATION OF URETHRAL DIV | 1/1/2007 | $54.44 | 3 |
| 8 | 53250 | EXCISION OF BULBOURETHRAL GLAND | 1/1/2007 | $50.19 | 3 |
| 8 | 53400 | URETHROPLASTY FIRST STAGE FOR FI | 1/1/2007 | $102.61 | 3 |
| 8 | 53405 | URETHROPLASTY; SECOND STAGE (FOR | 1/1/2007 | $113.61 | 3 |
| 8 | 53410 | URETHROPLASTY ONE-STAGE RECONSTR | 1/1/2007 | $127.93 | 3 |
| 8 | 53415 | URETHROPLASTY, TRANSPUBIC OR PER | 1/1/2007 | $145.84 | 3 |
| 8 | 53420 | URETHROPLASTY TWO-STAGE RECONSTR | 1/1/2007 | $110.65 | 3 |
| 8 | 53425 | URETHROPLASTY TWO-STAGE RECONSTR | 1/1/2007 | $124.51 | 3 |
| 8 | 53430 | URETHROPLASTY RECONSTRUCTION OF | 1/1/2007 | $127.05 | 3 |
| 8 | 53440 | SLING OPERATION FOR CORRECTION O | 1/1/2007 | $106.65 | 3 |
| 8 | 53442 | REMOVAL OR REVISION OF SLING FOR | 1/1/2007 | $92.49 | 3 |
| 8 | 53443 | URETHROPLASTY WITH TUBULARIZATIO | 4/1/2002 | INVALID | N |
| 8 | 53445 | INSERTION OF INFLATABLE URETHRAL | 1/1/2007 | $114.85 | 3 |
| 8 | 53447 | REMOVAL AND REPLACEMENT OF INFLA | 1/1/2007 | $108.26 | 3 |
| 8 | 53449 | REPAIR OF INFLATABLE URETHRAL/BL | 1/1/2007 | $78.37 | 3 |
| 8 | 53500 | URETHROLYSIS, TRANSVAGINAL, SECO | 1/1/2007 | $100.22 | 3 |
| 8 | 53502 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $63.47 | 3 |
| 8 | 53505 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $62.44 | 3 |
| 8 | 53510 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $83.04 | 3 |
| 8 | 53515 | URETHRORRPAPHY SUTURE OF URETHRA | 1/1/2007 | $105.25 | 3 |
| 8 | 53520 | CLOSURE OF URETHROSTOMY OR URETH | 1/1/2007 | $71.41 | 3 |
| 8 | 53670 | CATHETERIZATION, URETHRA; SIMPLE | 7/1/2003 | INVALID | N |
| 8 | 53675 | CATHETERIZATION; COMPLICATED (MA | 7/1/2003 | INVALID | N |
| 8 | 53850 | TRANSURETHRAL DESTRUCTION OF PRO | 11/1/1998 | NC | 9 |
| 8 | 53852 | TRANSURETHRAL DESTRUCTION OF PRO | 1/1/2007 | $516.92 | 3 |
| 8 | 53899 | UNLISTED PROCEDURE URINARY SYSTE | 2/1/1994 | $0.01 | 5 |
| 8 | 54110 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $80.91 | 3 |
| 8 | 54111 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $105.31 | 3 |
| 8 | 54112 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $123.31 | 3 |
| 8 | 54115 | REMOVAL FOREIGN BODY FROM DEEP P | 1/1/2007 | $56.83 | 3 |
| 8 | 54120 | AMPUTATION OF PENIS PARTIAL | 1/1/2007 | $79.51 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 54125 | AMPUTATION OF PENIS; COMPLETE | 1/1/2007 | $105.36 | 3 |
| 8 | 54130 | AMPUTATION OF PENIS RADICAL WITH | 1/1/2007 | $154.77 | 3 |
| 8 | 54135 | AMPUTATION OF PENIS RADICAL IN C | 1/1/2007 | $199.19 | 3 |
| 8 | 54152 | CIRCUMCISION CLAMP PROCEDURE; EX | 1/1/2007 | INVALID | N |
| 8 | 54160 | CIRCUMCISION, SURGICAL EXCISION | 1/1/2007 | $35.40 | 3 |
| 8 | 54205 | INJECTION PROCEDURE FOR PEYRONIE | 1/1/2007 | $68.35 | 3 |
| 8 | 54300 | PLASTIC OPERATION OF PENIS FOR S | 1/1/2007 | $86.83 | 3 |
| 8 | 54304 | PLASTIC OPERATION ON PENIS FOR C | 1/1/2007 | $102.19 | 3 |
| 8 | 54308 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $96.64 | 3 |
| 8 | 54312 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $9.29 | 3 |
| 8 | 54316 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $134.73 | 3 |
| 8 | 54318 | URETHROPLASTY FOR THIRD STAGE HY | 1/1/2007 | $95.60 | 3 |
| 8 | 54322 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $105.77 | 3 |
| 8 | 54324 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $131.83 | 3 |
| 8 | 54326 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $127.67 | 3 |
| 8 | 54328 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $123.89 | 3 |
| 8 | 54332 | ONE STAGE PROXIMAL PENILE OR PEN | 1/1/2007 | $134.94 | 3 |
| 8 | 54336 | ONE STAGE PERINEAL HYPOSPADIAS R | 1/1/2007 | $168.78 | 3 |
| 8 | 54340 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $75.62 | 3 |
| 8 | 54344 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $130.89 | 3 |
| 8 | 54348 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $138.62 | 3 |
| 8 | 54352 | REPAIR OF HYPOSPADIAS CRIPPLE RE | 1/1/2007 | $197.95 | 3 |
| 8 | 54360 | PLASTIC OPERATION ON PENIS TO CO | 1/1/2007 | $97.52 | 3 |
| 8 | 54380 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $107.48 | 3 |
| 8 | 54385 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $127.16 | 3 |
| 8 | 54390 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $168.93 | 3 |
| 8 | 54400 | INSERTION OF PENILE PROSTHESIS; | 1/1/2007 | $72.50 | 3 |
| 8 | 54401 | INSERTION OF PENILE PROSTHESIS; | 1/1/2007 | $86.83 | 3 |
| 8 | 54402 | REMOVAL OR REPLACEMENT OF NON-IN | 4/1/2002 | INVALID | N |
| 8 | 54405 | INSERTION OF MULTI-COMPONENT, IN | 1/1/2007 | $105.31 | 3 |
| 8 | 54407 | REMOVAL, REPAIR, OR REPLACEMENT | 4/1/2002 | INVALID | N |
| 8 | 54409 | SURGICAL CORRECTION OF HYDRAULIC | 4/1/2002 | INVALID | N |
| 8 | 54420 | CORPORA CAVERNOSA-SAPHENOUS VEIN | 1/1/2007 | $92.33 | 3 |
| 8 | 54430 | CORPORA CAVERNOSA-CORPUS SPONGIO | 1/1/2007 | $82.83 | 3 |
| 8 | 54435 | CORPORA CAVERNOSA-GLANS PENIS FI | 1/1/2007 | $52.73 | 3 |
| 8 | 54440 | PLASTIC OPERATION OF PENIS FOR I | 10/1/2000 | $104.69 | 3 |
| 8 | 54510 | EXCISION OF LOCAL LESION OF TEST | 4/1/2002 | INVALID | N |
| 8 | 54530 | ORCHIECTOMY RADICAL FOR TUMOR IN | 1/1/2007 | $69.91 | 3 |
| 8 | 54535 | ORCHIECTOMY RADICAL FOR TUMOR; W | 1/1/2007 | $96.74 | 3 |
| 8 | 54550 | EXPLORATION FOR UNDESCENDED TEST | 1/1/2007 | $63.16 | 3 |
| 8 | 54560 | EXPLORATION FOR UNDESCENDED TEST | 1/1/2007 | $89.11 | 3 |
| 8 | 54600 | REDUCTION OF TORSION OF TESTIS S | 1/1/2007 | $57.40 | 3 |
| 8 | 54620 | FIXATION OF CONTRALATERAL TESTIS | 1/1/2007 | $39.96 | 3 |
| 8 | 54640 | ORCHIOPEXY, INGUINAL APPROACH, W | 1/1/2007 | $58.39 | 3 |
| 8 | 54650 | ORCHIOPEXY, ABDOMINAL APPROACH, | 1/1/2007 | $93.42 | 3 |
| 8 | 54660 | INSERTION OF TESTICULAR PROSTHES | 4/1/1982 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 54680 | TRANSPLANTATION OF TESTIS(ES) TO | 1/1/2007 | $103.54 | 3 |
| 8 | 54690 | LAPAROSCOPY, SURGICAL; ORCHIECTO | 1/1/2007 | $87.71 | 3 |
| 8 | 54692 | LAPAROSCOPY, SURGICAL; ORCHIOPEX | 1/1/2007 | $101.72 | 3 |
| 8 | 54820 | EXPLORATION OF EPIDIDYMIS WITH O | 1/1/2007 | INVALID | N |
| 8 | 54865 | EXPLORATION OF EPIDIDYMIS, WIHT | 1/1/2007 | $54.08 | 3 |
| 8 | 54900 | EPIDIDYMOVASOSTOMY ANASTOMOSIS O | 7/1/1982 | NC | 9 |
| 8 | 54901 | EPIDIDYMOVASOSTOMY ANASTOMOSIS O | 7/1/1982 | NC | 9 |
| 8 | 55150 | RESECTION OF SCROTUM | 1/1/2007 | $60.26 | 3 |
| 8 | 55300 | VASOTOMY FOR VASOGRAMS SEMINAL V | 7/1/1982 | NC | 9 |
| 8 | 55400 | VASOVASOSTOMY, VASOVASORRHAPHY | 7/1/1982 | NC | 9 |
| 8 | 55520 | EXCISION OF LESION OF SPERMATIC | 1/1/2007 | $52.00 | 3 |
| 8 | 55530 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $47.28 | 3 |
| 8 | 55535 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $54.08 | 3 |
| 8 | 55540 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $64.36 | 3 |
| 8 | 55550 | LAPAROSCOPY, SURGICAL, WITH LIGA | 1/1/2007 | $54.13 | 3 |
| 8 | 55650 | VESICULECTOMY, ANY APPROACH | 1/1/2007 | $93.32 | 3 |
| 8 | 55720 | PROSTATOTOMY EXTERNAL DRAINAGE O | 1/1/2007 | $64.36 | 3 |
| 8 | 55725 | PROSTATOTOMY EXTERNAL DRAINAGE O | 1/1/2007 | $71.93 | 3 |
| 8 | 55801 | PROSTATECTOMY, PERINEAL, SUBTOTA | 1/1/2007 | $138.73 | 3 |
| 8 | 55810 | PROSTATECTOMY, PERINEAL RADICAL; | 1/1/2007 | $171.79 | 3 |
| 8 | 55812 | PROSTATECTOMY PERINEAL RADICAL; | 1/1/2007 | $210.20 | 3 |
| 8 | 55815 | PROSTATECTOMY PERINEAL RADICAL W | 1/1/2007 | $230.80 | 3 |
| 8 | 55821 | PROSTATECTOMY (INCLUDING CONTROL | 1/1/2007 | $111.33 | 3 |
| 8 | 55831 | PROSTATECTOMY RETROPUBIC SUBTOTA | 1/1/2007 | $121.24 | 3 |
| 8 | 55840 | PROSTATECTOMY, RETROPUBIC RADICA | 1/1/2007 | $174.18 | 3 |
| 8 | 55842 | PROSTATECTOMY RETROPUBIC RADICAL | 1/1/2007 | $186.37 | 3 |
| 8 | 55845 | PROSTATECTOMY RETROPUBIC RADICAL | 1/1/2007 | $215.23 | 3 |
| 8 | 55859 | TRANSPERINEAL PLACEMENT OF NEEDL | 1/1/2007 | INVALID | N |
| 8 | 55862 | EXPOSURE OF PROSTATE ANY APPROAC | 1/1/2007 | $143.76 | 3 |
| 8 | 55865 | EXPOSURE OF PROSTATE ANY APPROAC | 1/1/2007 | $175.11 | 3 |
| 8 | 55866 | LAPAROSCOPY, SURGICAL PROSTATECT | 1/1/2007 | $231.37 | 3 |
| 8 | 55875 | TRANSPERINEAL PLACEMENT OF NEEDL | 1/1/2007 | $115.37 | 3 |
| 8 | 55899 | UNLISTED PROCEDURE MALE GENITAL | 4/1/1982 | $0.01 | 5 |
| 8 | 55970 | INTERSEX SURGERY MALE TO FEMALE | 4/1/1982 | NC | 9 |
| 8 | 55980 | INTERSEX SURGERY; FEMALE TO MALE | 4/1/1982 | NC | 9 |
| 8 | 56442 | HYMENOTOMY, SIMPLE INCISION | 1/1/2007 | NC | 9 |
| 8 | 56620 | VULVECTOMY SIMPLE; PARTIAL | 1/1/2007 | $68.30 | 3 |
| 8 | 56625 | VULVECTOMY SIMPLE; COMPLETE | 1/1/2007 | $76.50 | 3 |
| 8 | 56630 | VULVECTOMY RADICAL WITHOUT SKIN | 1/1/2007 | $107.33 | 3 |
| 8 | 56631 | VULVECTOMY, RADICAL, PARTIAL; WI | 1/1/2007 | $139.92 | 3 |
| 8 | 56632 | VULVECTOMY,RADICAL,PARTIAL;WITH | 1/1/2007 | $167.01 | 3 |
| 8 | 56633 | VULVECTOMY, RADICAL, COMPELTE | 1/1/2007 | $140.29 | 3 |
| 8 | 56634 | VULVECTOMY, RADICAL, COMPLETE; W | 1/1/2007 | $152.90 | 3 |
| 8 | 56637 | VULVECTOMY, RADICAL, COMPLETE; W | 1/1/2007 | $184.92 | 3 |
| 8 | 56640 | VULVECTOMY, RADICAL, COMPLETE, W | 1/1/2007 | $185.08 | 3 |
| 8 | 56700 | PARTIAL HYMENECTOMY OR REVISION | 1/1/2007 | $24.19 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 56720 | HYMENOTOMY SIMPLE INCISION | 1/1/2007 | INVALID | N |
| 8 | 56800 | PLASTIC REPAIR OF INTROITUS | 1/1/2007 | $33.84 | 3 |
| 8 | 56805 | CLITOROPLASTY FOR INTERSEX STATE | 1/1/2007 | $157.83 | 3 |
| 8 | 57106 | VAGINECTOMY, PARTIAL REMOVAL OF | 1/1/2007 | $58.49 | 3 |
| 8 | 57107 | VAGINECTOMY, PARTIAL REMOVAL OF | 1/1/2007 | $187.72 | 3 |
| 8 | 57109 | VAGINECTOMY, PARTIAL REMOVAL OF | 1/1/2007 | $215.07 | 3 |
| 8 | 57110 | COLPECTOMY OBLITERATION OF VAGIN | 1/1/2007 | $120.88 | 3 |
| 8 | 57111 | VAGINECTOMY, COMPLETE REMOVAL OF | 1/1/2007 | $222.03 | 3 |
| 8 | 57112 | VAGINECTOMY, COMPLETE REMOVAL OF | 1/1/2007 | $229.19 | 3 |
| 8 | 57120 | COLPOCLEISIS (LE FORT TYPE) | 1/1/2007 | $66.95 | 3 |
| 8 | 57130 | EXCISION OF VAGINAL SEPTUM | 1/1/2007 | $25.33 | 3 |
| 8 | 57200 | COLPORRHAPHY SUTURE OF INJURY OF | 1/1/2007 | $37.84 | 3 |
| 8 | 57210 | COLPOPERINEORRHAPHY SUTURE OF IN | 1/1/2007 | $47.85 | 3 |
| 8 | 57220 | PLASTIC OPERATION ON URETHRAL SP | 1/1/2007 | $41.10 | 3 |
| 8 | 57230 | PLASTIC REPAIR OF URETHROCELE | 1/1/2007 | $49.72 | 3 |
| 8 | 57240 | ANTERIOR COLPORRHAPHY, REPAIR OF | 1/1/2007 | $54.50 | 3 |
| 8 | 57250 | POSTERIOR COLPORRHAPHY, REPAIR O | 1/1/2007 | $50.60 | 3 |
| 8 | 57260 | COMBINED ANTEROPOSTERIOR COLPORR | 1/1/2007 | $73.02 | 3 |
| 8 | 57265 | COMBINED ANTEROPOSTERIOR COLPORR | 1/1/2007 | $97.00 | 3 |
| 8 | 57267 | INSERTION OF MESH OR OTHER PROST | 1/1/2007 | $38.93 | 3 |
| 8 | 57268 | REPAIR OF ENTEROCELE VAGINAL APP | 1/1/2007 | $60.93 | 3 |
| 8 | 57270 | REPAIR OF ENTEROCELE ABDOMINAL A | 1/1/2007 | $102.61 | 3 |
| 8 | 57280 | COLPOPEXY ABDOMINAL APPROACH | 1/1/2007 | $124.92 | 3 |
| 8 | 57282 | COLPOPEXY, VAGINAL; EXTRA-PERITO | 1/1/2007 | $64.30 | 3 |
| 8 | 57283 | COLPOPEXY, VAGINAL; INTRA-PERITO | 1/1/2007 | $92.33 | 3 |
| 8 | 57284 | PARAVAGINAL DEFECT REPAIR (INCL | 1/1/2007 | $110.29 | 3 |
| 8 | 57287 | REMOVAL OR REVISION OF SLING FOR | 1/1/2007 | $88.65 | 3 |
| 8 | 57288 | SLING OPERATION FOR STRESS INCON | 1/1/2007 | $104.01 | 3 |
| 8 | 57289 | PEREYRA PROCEDURE INCLUDING ANTE | 1/1/2007 | $97.68 | 3 |
| 8 | 57291 | CONSTRUCTION OF ARTIFICIAL VAGIN | 1/1/2007 | $71.62 | 3 |
| 8 | 57292 | CONSTRUCTION OF ARTIFICIAL VAGIN | 1/1/2007 | $112.10 | 3 |
| 8 | 57295 | REVISION (INCLUDING REMOVAL) OF | 1/1/2006 | $66.43 | 3 |
| 8 | 57296 | REVISION OF PROSTHETIC VAGINAL G | 1/1/2007 | $129.18 | 3 |
| 8 | 57300 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $66.22 | 3 |
| 8 | 57305 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $112.88 | 3 |
| 8 | 57307 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $129.39 | 3 |
| 8 | 57308 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $83.92 | 3 |
| 8 | 57310 | CLOSURE OF URETHROVAGINAL FISTUL | 1/1/2007 | $57.87 | 3 |
| 8 | 57311 | CLOSURE OF URETHROVAGINAL FISTUL | 1/1/2007 | $66.12 | 3 |
| 8 | 57320 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $67.78 | 3 |
| 8 | 57330 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $99.18 | 3 |
| 8 | 57335 | VAGINOPLASTY FOR INTERSEX STATE | 1/1/2007 | $153.94 | 3 |
| 8 | 57425 | LAPAROSCOPY, SURGICAL, COLPOPEXY | 1/1/2007 | $125.23 | 3 |
| 8 | 57530 | TRACHELECTOMY (CERVICECTOMY) AMP | 1/1/2007 | $45.41 | 3 |
| 8 | 57531 | RADICAL TRACHELECTOMY, WITH BILA | 1/1/2007 | $230.96 | 3 |
| 8 | 57540 | EXCISION OF CERVICAL STUMP ABDOM | 1/1/2007 | $103.49 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 57545 | EXCISION OF CERVICAL STUMP ABDOM | 1/1/2007 | $110.13 | 3 |
| 8 | 57550 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2007 | $52.00 | 3 |
| 8 | 57555 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2007 | $78.47 | 3 |
| 8 | 57556 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2007 | $73.39 | 3 |
| 8 | 57720 | TRACHELORRHAPHY PLASTIC REPAIR O | 1/1/2007 | $40.07 | 3 |
| 8 | 57820 | DILATION AND CURETTAGE OF CERVIC | 1/1/2007 | INVALID | N |
| 8 | 58140 | MYOMECTOMY, EXCISION OF FIBROID | 1/1/2007 | $122.02 | 3 |
| 8 | 58145 | MYOMECTOMY EXCISION OF FIBROID T | 1/1/2007 | $71.62 | 3 |
| 8 | 58146 | MYOMECTOMY, EXCISION OF FIBROID | 1/1/2007 | $157.36 | 3 |
| 8 | 58150 | TOTAL ABDOMINAL HYSTERECTOMY(COR | 1/1/2007 | $127.47 | 3 |
| 8 | 58152 | TOT HYSTERECTOMY (CORPUS & CERVI | 1/1/2007 | $170.85 | 3 |
| 8 | 58180 | SUPRACERVICAL ABDOMINAL HYSTEREC | 1/1/2007 | $126.53 | 3 |
| 8 | 58200 | TOTAL ABDOMINAL HYSTERECTOMY, IN | 1/1/2007 | $177.08 | 3 |
| 8 | 58210 | RADICAL ABDOMINAL HYSTERECTOMY, | 1/1/2007 | $235.68 | 3 |
| 8 | 58240 | PELVIC EXENTERATION FOR GYNECOLO | 1/1/2007 | $312.49 | 3 |
| 8 | 58260 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $110.24 | 3 |
| 8 | 58262 | VAGINAL HYSTERECTOMY; WITH REMOV | 1/1/2007 | $124.25 | 3 |
| 8 | 58263 | VAGINAL HYSTERECTOMY; WITH REMOV | 1/1/2007 | $134.32 | 3 |
| 8 | 58267 | VAGINAL HYSTERECTOMY; WITH COLPO | 1/1/2007 | $142.52 | 3 |
| 8 | 58270 | VAGINAL HYSTERECTOMY; WITH REPAI | 1/1/2007 | $119.63 | 3 |
| 8 | 58275 | VAGINAL HYSTERECTOMY, WITH TOTAL | 1/1/2007 | $132.03 | 3 |
| 8 | 58280 | VAGINAL HYSTERECTOMY WITH TOTAL | 1/1/2007 | $141.74 | 3 |
| 8 | 58285 | VAGINAL HYSTERECTOMY RADICAL (SC | 1/1/2007 | $181.13 | 3 |
| 8 | 58290 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $157.83 | 3 |
| 8 | 58291 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $172.20 | 3 |
| 8 | 58292 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $182.22 | 3 |
| 8 | 58293 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $189.38 | 3 |
| 8 | 58294 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $167.22 | 3 |
| 8 | 58350 | CHROMOTUBATION OF OVIDUCT, INCLU | 4/1/1982 | NC | 9 |
| 8 | 58400 | UTERINE SUSPENSION WITH OR WITHO | 1/1/2007 | $57.30 | 3 |
| 8 | 58410 | UTERINE SUSPENSION WITH/OUT SHOR | 1/1/2007 | $106.97 | 3 |
| 8 | 58520 | HYSTERORRHAPHY REPAIR OF RUPTURE | 1/1/2007 | $100.79 | 3 |
| 8 | 58540 | HYSTEROPLASTY REPAIR OF UTERINE | 1/1/2007 | $121.29 | 3 |
| 8 | 58541 | LAPAROSCOPY, SURGICAL, SUPRACERV | 1/1/2007 | $116.20 | 3 |
| 8 | 58542 | LAPAROSCOPY, SURGICAL, SUPRACERV | 1/1/2007 | $128.61 | 3 |
| 8 | 58543 | LAPAROSCOPY, SURGICAL, SUPRACERV | 1/1/2007 | $130.79 | 3 |
| 8 | 58544 | LAPAROSCOPY, SURGICAL, SUPRACERV | 1/1/2007 | $141.64 | 3 |
| 8 | 58545 | LAPAROSCOPY, SURGICAL,MYOMECTOMY | 1/1/2007 | $122.22 | 3 |
| 8 | 58546 | LAPAROSCOPY, SURGICAL, MYOMECTOM | 1/1/2007 | $156.79 | 3 |
| 8 | 58548 | LAPAROSCOPY, SURGICAL; W/RADICAL | 1/1/2007 | $247.61 | 3 |
| 8 | 58550 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $120.41 | 3 |
| 8 | 58551 | LAPAROSCOPY, SURGICAL; WITH REMO | 7/1/2003 | INVALID | N |
| 8 | 58552 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $133.54 | 3 |
| 8 | 58553 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $156.79 | 3 |
| 8 | 58554 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $179.89 | 3 |
| 8 | 58578 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 58579 | UNLISTED HYSTEROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 58600 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $49.77 | 3 |
| 8 | 58605 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $45.15 | 3 |
| 8 | 58611 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $11.42 | 3 |
| 8 | 58615 | OCCLUSION OF FALLOPIAN TUBES BY | 1/1/2007 | $36.69 | 3 |
| 8 | 58660 | LAPAROSCOPY, SURGICAL; WITH LYSI | 1/1/2007 | $93.11 | 3 |
| 8 | 58661 | LAPAROSCOPY, SURGICAL; WITH REMO | 1/1/2007 | $90.83 | 3 |
| 8 | 58662 | LAPAROSCOPY, SURGICAL; WITH FULG | 1/1/2007 | $98.61 | 3 |
| 8 | 58670 | LAPAROSCOPY, SURGICAL; WITH FULG | 1/1/2007 | $49.51 | 3 |
| 8 | 58671 | LAPAROSCOPY, SURGICAL; WITH OCCL | 1/1/2007 | $49.56 | 3 |
| 8 | 58672 | LAPAROSCOPY, SURGICAL; WITH FIMB | 1/1/2007 | $107.23 | 3 |
| 8 | 58673 | LAPAROSCOPY, SURGICAL; WITH SALP | 1/1/2007 | $114.18 | 3 |
| 8 | 58679 | UNLISTED LAPAROSCOPY PROCEDURE, | 11/1/2005 | $0.01 | 5 |
| 8 | 58700 | SALPINGETOMY COMPLETE OR PARTIAL | 1/1/2007 | $101.41 | 3 |
| 8 | 58720 | SALPINGO-OOPHORECTOMY COMPLETE O | 1/1/2007 | $96.12 | 3 |
| 8 | 58740 | LYSIS OF ADHESIONS (SALPINGOLYSI | 2/2/2005 | $113.40 | 3 |
| 8 | 58750 | TOBOTUBAL ANASTOMOSIS | 4/1/1982 | NC | 9 |
| 8 | 58752 | TUBOUTERINE IMPLANTATION | 10/1/1984 | NC | 9 |
| 8 | 58760 | FIMBRIOPLASTY | 4/1/1982 | NC | 9 |
| 8 | 58770 | SALPINGOSTOMY (SALPINGONEOSTOMY) | 10/1/1984 | NC | 9 |
| 8 | 58800 | DRAINAGE OF OVARIAN CYSTS UNILAT | 1/1/2007 | $42.61 | 3 |
| 8 | 58805 | DRAINAGE OF OVARIAN CYST(S) UNIL | 1/1/2007 | $52.26 | 3 |
| 8 | 58820 | DRAINAGE OF OVARIAN ABSCESS VAGI | 1/1/2007 | $41.68 | 3 |
| 8 | 58822 | DRAINAGE OF OVARIAN ABSCESS; ABD | 1/1/2007 | $85.64 | 3 |
| 8 | 58823 | DRAINAGE OF PELVIC ABSDCESS, TRA | 1/1/2007 | $24.55 | 3 |
| 8 | 58825 | TRANSPOSITION, OVARY(S) | 1/1/2007 | $93.89 | 3 |
| 8 | 58900 | BIOPSY OF OVARY UNILATERAL OR BI | 1/1/2007 | $53.20 | 3 |
| 8 | 58920 | WEDGE RESECTION OR BISECTION OF | 1/1/2007 | $95.29 | 3 |
| 8 | 58925 | OVARIAN CYSTECTOMY UNILATERAL OR | 1/1/2007 | $95.76 | 3 |
| 8 | 58940 | OOPHORECTOMY PARTIAL OR TOTAL UN | 1/1/2007 | $63.84 | 3 |
| 8 | 58943 | OOPHORECTOMY, PARTIAL OR TOTAL, | 1/1/2007 | $152.02 | 3 |
| 8 | 58950 | RSECTION OF OVARIAN, TUBAL OR PR | 1/1/2007 | $142.00 | 3 |
| 8 | 58951 | RESECTION OF OVARIAN MALIGNANCY | 1/1/2007 | $183.99 | 3 |
| 8 | 58952 | RESECTION OF OVARIAN, TUBAL OR P | 1/1/2007 | $206.41 | 3 |
| 8 | 58953 | BILATERAL SALPINGO-OOPHORECTOMY | 1/1/2007 | $261.37 | 3 |
| 8 | 58954 | BILATERAL SALPINGO-OOPHORECTOMY | 1/1/2007 | $284.78 | 3 |
| 8 | 58956 | BILATERAL SALPINGO-OOPHORECTOMY | 1/1/2007 | $182.27 | 3 |
| 8 | 58957 | RESECTION OF RECURRENT OVARIAN, | 1/1/2007 | $200.54 | 3 |
| 8 | 58958 | RESECTION OF RECURRENT OVARIAN, | 1/1/2007 | $222.08 | 3 |
| 8 | 58960 | LAPAROTOMY, FOR STAGING OR RESTA | 1/1/2007 | $123.47 | 3 |
| 8 | 58999 | UNLISTED PROCEDURE FEMALE GENITA | 2/1/1994 | $0.01 | 5 |
| 8 | 59100 | HYSTEROTOMY, ABDOMINAL (EG, FOR | 1/1/2007 | $112.83 | 3 |
| 8 | 59120 | SURG TREAT OF ECTOPIC PREG;TUB O | 1/1/2007 | $106.14 | 3 |
| 8 | 59121 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $107.80 | 3 |
| 8 | 59130 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $116.15 | 3 |
| 8 | 59135 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $126.64 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 59136 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $118.90 | 3 |
| 8 | 59140 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $46.50 | 3 |
| 8 | 59150 | LAPAROSCOPIC TREATMENT OF ECTOPI | 1/1/2007 | $106.08 | 3 |
| 8 | 59151 | LAPAROSCOPIC TREATMENT OF ECTOPI | 1/1/2007 | $105.20 | 3 |
| 8 | 59350 | HYSTERORRHAPHY OF RUPTURED UTERU | 1/1/2007 | $41.47 | 3 |
| 8 | 59409 | VAGINAL DELIVERY ONLY (WITH OR W | 1/1/2007 | $170.80 | 3 |
| 8 | 59514 | CAESAREAN DELIVERY ONLY | 1/1/2007 | $201.53 | 3 |
| 8 | 59525 | SUBTOTAL OR TOTAL HYSTERECTOMY A | 1/1/2007 | $106.93 | 3 |
| 8 | 59612 | VAGINAL DELIVERY ONLY, AFTER PRE | 1/1/2007 | $191.59 | 3 |
| 8 | 59620 | CESAREAN DELIVERY ONLY, FOLLOWIN | 1/1/2007 | $220.69 | 3 |
| 8 | 59870 | UTERINE EVACUATION AND CURETTAGE | 1/1/2007 | $61.81 | 3 |
| 8 | 59898 | UNLISTED LAPAROSCOPY PROCEDURE, | 10/1/2001 | $0.01 | 5 |
| 8 | 60200 | EXCISION OF CYST OR ADENOMA OF T | 1/1/2007 | $85.89 | 3 |
| 8 | 60210 | PARTIAL THYROID LOBECTOMY, UNILA | 1/1/2007 | $92.07 | 3 |
| 8 | 60212 | PARTIAL THYROID LOBECTOMY, UNILA | 1/1/2007 | $133.07 | 3 |
| 8 | 60220 | TOTAL THYROID LOBECTOMY, UNILATE | 1/1/2007 | $100.48 | 3 |
| 8 | 60225 | TOTAL THYROID LOBECTOMY, UNILATE | 1/1/2007 | $120.56 | 3 |
| 8 | 60240 | THYROIDECTOMY TOTAL OR COMPLETE | 1/1/2007 | $132.29 | 3 |
| 8 | 60252 | THYROIDECTOMY TOTAL OR SUBTOTAL | 1/1/2007 | $171.01 | 3 |
| 8 | 60254 | THYROIDECTOMY TOTAL OR SUBTOTAL | 1/1/2007 | $226.96 | 3 |
| 8 | 60260 | THYROIDECTOMY, REMOVAL OF ALL RE | 1/1/2007 | $145.53 | 3 |
| 8 | 60270 | THYROIDECTOMY, INCL SUBSTERNAL T | 1/1/2007 | $171.48 | 3 |
| 8 | 60271 | THYROIDECTOMY, INC SUBSTERNAL TH | 1/1/2007 | $140.86 | 3 |
| 8 | 60280 | EXCISION OF THYROGLOSSAL DUCT CY | 1/1/2007 | $57.45 | 3 |
| 8 | 60281 | EXCISION OF THYROGLOSSAL DUCT CY | 1/1/2007 | $78.37 | 3 |
| 8 | 60500 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $133.02 | 3 |
| 8 | 60502 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $167.27 | 3 |
| 8 | 60505 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $181.91 | 3 |
| 8 | 60512 | PARATHYROID AUTOTRANSPLANTATION | 1/1/2007 | $34.20 | 3 |
| 8 | 60520 | THYMECTOMY, PARTIAL OR TOTAL; TR | 1/1/2007 | $141.58 | 3 |
| 8 | 60521 | THYMECTOMY, PARTIAL OR TOTAL; ST | 1/1/2007 | $162.03 | 3 |
| 8 | 60522 | THYMECTOMY, PARTIAL OR TOTAL; ST | 1/1/2007 | $195.20 | 3 |
| 8 | 60540 | ADRENALECTOMY, PART OR COMP, OR | 1/1/2007 | $136.70 | 3 |
| 8 | 60545 | ADRENALECTOMY PARTIAL/COMPLETE W | 1/1/2007 | $158.14 | 3 |
| 8 | 60600 | EXCISION OF CAROTID BODY TUMOR W | 1/1/2007 | $161.31 | 3 |
| 8 | 60605 | EXCISION OF CAROTID BODY TUMOR W | 1/1/2007 | $181.60 | 3 |
| 8 | 60650 | LAPAROSCOPY, SURGICAL, WITH ADRE | 1/1/2007 | $157.00 | 3 |
| 8 | 60659 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| 8 | 60699 | UNLISTED PROCEDURE ENDOCRINE SYS | 4/1/1982 | $0.01 | 5 |
| 8 | 61001 | SUBDURAL TAP THROUGH FONTANELLE | 1/1/2007 | $14.06 | 3 |
| 8 | 61140 | BURR HOLES OR TREPHINE WITH BIOP | 1/1/2007 | $155.18 | 3 |
| 8 | 61150 | BURR HOLE(S) OR TREPHINE WITH DR | 1/1/2007 | $167.38 | 3 |
| 8 | 61151 | BURR HOLE(S) OR TREPHINE WITH SU | 1/1/2007 | $120.56 | 3 |
| 8 | 61154 | BURR HOLE(S) WITH EVACUATION AND | 1/1/2007 | $148.85 | 3 |
| 8 | 61156 | BURR HOLE(S) WITH ASPIRATION OF | 1/1/2007 | $157.67 | 3 |
| 8 | 61210 | BURR HOLE(S); FOR IMPLANTING VEN | 1/1/2007 | $53.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 61215 | INSERTION OF SUBCUTANEOUS RESERV | 1/1/2007 | $52.68 | 3 |
| 8 | 61250 | BURR HOLE(S) OR TREPHINE, SUPRAT | 1/1/2007 | $103.96 | 3 |
| 8 | 61253 | BURR HOLES OR TREPHINE INFRATENT | 1/1/2007 | $117.76 | 3 |
| 8 | 61304 | CRANIECTOMY OR CRANIOTOMY EXPLOR | 1/1/2007 | $209.73 | 3 |
| 8 | 61305 | CRANIECTOMY OR CRANIOTOMY EXPLOR | 1/1/2007 | $249.07 | 3 |
| 8 | 61312 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $238.48 | 3 |
| 8 | 61313 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $239.57 | 3 |
| 8 | 61314 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $225.87 | 3 |
| 8 | 61315 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $263.86 | 3 |
| 8 | 61320 | CRANIECTOMY OR CRANIOTOMY DRAINA | 1/1/2007 | $243.77 | 3 |
| 8 | 61321 | CRANIECTOMY OR CRANIOTOMY DRAINA | 1/1/2007 | $268.58 | 3 |
| 8 | 61322 | CRANIECTOMY OR CRANIOTOMY, DECOM | 1/1/2007 | $273.93 | 3 |
| 8 | 61323 | CRANIECTOMY OR CRANIOTOMY, DECOM | 1/1/2007 | $285.92 | 3 |
| 8 | 61330 | DECOMPRESSION OF ORBIT ONLY, TRA | 1/1/2007 | $204.28 | 3 |
| 8 | 61332 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $247.56 | 3 |
| 8 | 61333 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $246.21 | 3 |
| 8 | 61334 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $159.02 | 3 |
| 8 | 61340 | SUBTEMPORAL CRANIAL DECOMPRESSIO | 1/1/2007 | $179.63 | 3 |
| 8 | 61343 | CRANIECTOMY, SUBOCCIPITAL W/CERV | 1/1/2007 | $281.30 | 3 |
| 8 | 61345 | OTHER CRANIAL DECOMPRESSION POST | 1/1/2007 | $257.48 | 3 |
| 8 | 61440 | CRANIOTOMY FOR SECTION OF TENTOR | 1/1/2007 | $247.61 | 3 |
| 8 | 61450 | CRANIECTOMY, SUBTEMPORAL, FOR SE | 1/1/2007 | $238.74 | 3 |
| 8 | 61458 | CRANIECTOMY SUBOCCIPITAL FOR EXP | 1/1/2007 | $258.51 | 3 |
| 8 | 61460 | CRANIECTOMY SUBOCCIPITAL; FOR SE | 1/1/2007 | $263.81 | 3 |
| 8 | 61470 | CRANIECTOMY SUBOCCIPITAL; FOR ME | 1/1/2007 | $237.65 | 3 |
| 8 | 61480 | CRANIECTOMY SUBOCCIPITAL; FOR ME | 1/1/2007 | $251.56 | 3 |
| 8 | 61490 | CRANIOTOMY FOR LOBOTOMY, INCLUDI | 1/1/2007 | $243.31 | 3 |
| 8 | 61500 | CRANIECTOMY; WITH EXCISION OF TU | 1/1/2007 | $170.34 | 3 |
| 8 | 61501 | CRANIECTOMY; FOR OSTEOMYELITIS | 1/1/2007 | $141.48 | 3 |
| 8 | 61510 | CRANIECTOMY, TREPHINATION, BONE | 1/1/2007 | $272.37 | 3 |
| 8 | 61512 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $331.23 | 3 |
| 8 | 61514 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $239.83 | 3 |
| 8 | 61516 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $234.59 | 3 |
| 8 | 61518 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $353.08 | 3 |
| 8 | 61519 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $387.38 | 3 |
| 8 | 61520 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $500.06 | 3 |
| 8 | 61521 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $415.46 | 3 |
| 8 | 61522 | CRANIECTOMY INFRATENTORIAL OR PO | 1/1/2007 | $277.51 | 3 |
| 8 | 61524 | CRANIECTOMY INFRATENTORIAL OR PO | 1/1/2007 | $262.98 | 3 |
| 8 | 61526 | CRANIECTOMY BONE FLAP CRANIOTOMY | 1/1/2007 | $460.40 | 3 |
| 8 | 61530 | CRANIECTOMY BONE FLAP CRANIOTOMY | 1/1/2007 | $389.46 | 3 |
| 8 | 61531 | SUBDURAL IMPLANTATION OF STRIP E | 1/1/2007 | $142.93 | 3 |
| 8 | 61533 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $188.60 | 3 |
| 8 | 61534 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $199.71 | 3 |
| 8 | 61535 | CRANIECTOMY,TREPHINATION,BONE FL | 1/1/2007 | $114.49 | 3 |
| 8 | 61536 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $334.70 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 61537 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $242.17 | 3 |
| 8 | 61538 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $254.52 | 3 |
| 8 | 61539 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $301.75 | 3 |
| 8 | 61540 | CRANIOTOMY W/ELEVATION OF BONE F | 1/1/2007 | $288.30 | 3 |
| 8 | 61541 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $268.01 | 3 |
| 8 | 61542 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $295.05 | 3 |
| 8 | 61543 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $275.85 | 3 |
| 8 | 61544 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $234.95 | 3 |
| 8 | 61545 | CRANIECTOMY, TREPHINATION, BONE | 1/1/2007 | $407.99 | 3 |
| 8 | 61546 | CRANIOTOMY FOR HYPOPHYSECTOMY OR | 1/1/2007 | $292.92 | 3 |
| 8 | 61548 | HYPOPHYSECTOMY OR EXCISION OF PI | 1/1/2007 | $195.87 | 3 |
| 8 | 61550 | CRANIECTOMY FOR CRANIOSYNOSTOSIS | 1/1/2007 | $117.09 | 3 |
| 8 | 61552 | CRANIECTOMY FOR CRANIOSYNOSTOSIS | 1/1/2007 | $154.30 | 3 |
| 8 | 61556 | CRANIOTOMY FOR CRANIOSYNOSTOSIS; | 1/1/2007 | $198.57 | 3 |
| 8 | 61557 | CRANIOTOMY FOR CRANIOSYNOSTOSIS; | 1/1/2007 | $216.89 | 3 |
| 8 | 61558 | EXTENSIVE CRANIECTOMY FOR MULTIP | 1/1/2007 | $213.46 | 3 |
| 8 | 61559 | EXTENSIVE CRANIECTOMY FOR MULTIP | 1/1/2007 | $314.46 | 3 |
| 8 | 61563 | EXCISION, INTRA AND EXTRACRANIAL | 1/1/2007 | $245.07 | 3 |
| 8 | 61564 | EXCISION, INTRA AND EXTRACRANIAL | 1/1/2007 | $315.86 | 3 |
| 8 | 61566 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $289.03 | 3 |
| 8 | 61567 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $325.41 | 3 |
| 8 | 61570 | CRANIECTOMY OR CRANIOTOMY;W/EXCI | 1/1/2007 | $230.28 | 3 |
| 8 | 61571 | CRANIECTOMY OR CRANIOTOMY WITH T | 1/1/2007 | $250.68 | 3 |
| 8 | 61575 | TRANSORAL APPROACH TO SKULL BASE | 1/1/2007 | $307.87 | 3 |
| 8 | 61576 | TRANSORAL APP TO SKULL BASE,DECO | 1/1/2007 | $481.32 | 3 |
| 8 | 61580 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $307.82 | 3 |
| 8 | 61581 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $321.62 | 3 |
| 8 | 61582 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $343.47 | 3 |
| 8 | 61583 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $366.00 | 3 |
| 8 | 61584 | ORBITOCRANIAL APPROACH TO ANTERI | 1/1/2007 | $349.55 | 3 |
| 8 | 61585 | ORBITOCRANIAL APPROACH TO ANTERI | 1/1/2007 | $374.35 | 3 |
| 8 | 61586 | BICORONAL, TRANSZYGOMATIC AND/OR | 1/1/2007 | $270.24 | 3 |
| 8 | 61590 | INFRATEMPORAL PRE-AURICULAR APPR | 1/1/2007 | $392.93 | 3 |
| 8 | 61591 | INFRATEMPORAL POST-AURICULAR APP | 1/1/2007 | $409.28 | 3 |
| 8 | 61592 | ORBITOCRANIAL ZYGOMATIC APPROACH | 1/1/2007 | $395.48 | 3 |
| 8 | 61595 | TRANSTEMPORAL APPROACH TO POSTER | 1/1/2007 | $290.17 | 3 |
| 8 | 61596 | TRANSCOCHLEAR APPROACH TO POSTER | 1/1/2007 | $329.46 | 3 |
| 8 | 61597 | TRANSCONDYLAR APPROACH TO POST C | 1/1/2007 | $362.11 | 3 |
| 8 | 61598 | TRANSPETROSAL APPROACH TO POST C | 1/1/2007 | $323.54 | 3 |
| 8 | 61600 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $256.49 | 3 |
| 8 | 61601 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $285.50 | 3 |
| 8 | 61605 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $281.09 | 3 |
| 8 | 61606 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $378.51 | 3 |
| 8 | 61607 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $347.47 | 3 |
| 8 | 61608 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $412.19 | 3 |
| 8 | 61609 | TRANSECTION OR LIGATION,CAROTID | 1/1/2007 | $89.74 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 61610 | TRANSECTION OR LIGATION,CAROTID | 1/1/2007 | $261.94 | 3 |
| 8 | 61611 | TRANSECTION OR LIGATION, CAROTID | 1/1/2007 | $68.09 | 3 |
| 8 | 61612 | TRANSECTION OR LIGATION,CAROTID | 1/1/2007 | $236.09 | 3 |
| 8 | 61613 | OBLITERATION OF CAROTID ANEURYSM | 1/1/2007 | $392.16 | 3 |
| 8 | 61615 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $308.96 | 3 |
| 8 | 61616 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $416.45 | 3 |
| 8 | 61618 | SECONDARY REPAIR OF DURA FOR CER | 1/1/2007 | $161.62 | 3 |
| 8 | 61619 | 2ND REPAIR OF DURA FOR CSF LEAK, | 1/1/2007 | $191.51 | 3 |
| 8 | 61680 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $291.00 | 3 |
| 8 | 61682 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $568.98 | 3 |
| 8 | 61684 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $374.15 | 3 |
| 8 | 61686 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $601.37 | 3 |
| 8 | 61690 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $274.86 | 3 |
| 8 | 61692 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $481.27 | 3 |
| 8 | 61697 | SURGERY OF COMPLEX INTRACRANIAL | 1/1/2007 | $474.05 | 3 |
| 8 | 61698 | SURGERY OF COMPLEX INTRACRANIAL | 1/1/2007 | $454.70 | 3 |
| 8 | 61700 | SURGERY OF SIMPLE INTRACRANIAL A | 1/1/2007 | $473.85 | 3 |
| 8 | 61702 | SURGERY OF INTRACRANIAL ANEURYSM | 1/1/2007 | $442.24 | 3 |
| 8 | 61703 | SURGERY OF INTRACRANIAL ANEURYSM | 1/1/2007 | $165.98 | 3 |
| 8 | 61705 | SURGERY OF ANEURYSN VASCULAR MAL | 1/1/2007 | $333.72 | 3 |
| 8 | 61708 | SURGERY OF ANEURYSM VASCULAR MAL | 1/1/2007 | $274.76 | 3 |
| 8 | 61711 | ANASTOMOSIS ARTERIAL EXTRACRANIA | 1/1/2007 | $340.10 | 3 |
| 8 | 61850 | TWIST DRILL OR BURR HOLE(S) FOR | 1/1/2007 | $120.77 | 3 |
| 8 | 61860 | CRANIECTOMY OR CRANIOTOMY FOR IM | 1/1/2007 | $196.55 | 3 |
| 8 | 61862 | TWIST DRILL, BURR HOLE, CRANIOTO | 4/1/2004 | INVALID | N |
| 8 | 61863 | TWIST DRILL, BURR HOLE, CRANIOTO | 1/1/2007 | $187.77 | 3 |
| 8 | 61864 | TWIST DRILL, BURR HOLE, CRANIOTO | 1/1/2007 | $63.27 | 3 |
| 8 | 61867 | TWIST DRILL, BURR HOLE, CRANIOTO | 1/1/2007 | $284.26 | 3 |
| 8 | 61868 | TWIST DRILL, BURR HOLE, CRANIOTO | 1/1/2007 | $89.99 | 3 |
| 8 | 61870 | CRANIECTOMY FOR IMPLANTATION OF | 1/1/2007 | $147.97 | 3 |
| 8 | 61875 | CRANIECTOMY FOR IMPLANTATION OF | 1/1/2007 | $137.90 | 3 |
| 8 | 61880 | REVISION OR REMOVAL OF INTRACRAN | 1/1/2007 | $64.98 | 3 |
| 8 | 62005 | ELEVATION OF DEPRESSED SKULL FRA | 1/1/2007 | $149.63 | 3 |
| 8 | 62010 | ELEVATION OF DEPRESSED SKULL FRA | 1/1/2007 | $190.16 | 3 |
| 8 | 62100 | CRANIOTOMY FOR REPAIR OF DURAL/C | 1/1/2007 | $205.78 | 3 |
| 8 | 62115 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $201.32 | 3 |
| 8 | 62116 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $223.38 | 3 |
| 8 | 62117 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $241.28 | 3 |
| 8 | 62120 | REPAIR OF ENCEPHALOCELE,SKULL VA | 1/1/2007 | $232.67 | 3 |
| 8 | 62121 | CRANIOTOMY WITH REPAIR OF ENCEPH | 1/1/2007 | $213.83 | 3 |
| 8 | 62140 | CRANIOPLASTY FOR SKULL DEFECT UP | 1/1/2007 | $131.26 | 3 |
| 8 | 62141 | CRANIOPLASTY FOR SKULL DEFECT; L | 1/1/2007 | $143.81 | 3 |
| 8 | 62142 | REMOVAL OF BONE FLAP OR PROSTHET | 1/1/2007 | $106.40 | 3 |
| 8 | 62143 | REPLACEMENT OF BONE FLAP OR PROS | 1/1/2007 | $126.90 | 3 |
| 8 | 62145 | CRANIOPLASTY FOR SKULL DEFECT WI | 1/1/2007 | $177.50 | 3 |
| 8 | 62146 | CRANIOPLASTY WITH AUTOGRAFT (INC | 1/1/2007 | $152.43 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 62147 | CRANIOPLASTY WITH AUTOGRAFT (INC | 1/1/2007 | $181.39 | 3 |
| 8 | 62161 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $193.43 | 3 |
| 8 | 62162 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $238.69 | 3 |
| 8 | 62163 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $152.74 | 3 |
| 8 | 62164 | NEUROENDOSCOPY, INTRACRANIAL; WI | 1/1/2007 | $248.13 | 3 |
| 8 | 62165 | NEUROENDOSOCPY, INTRACRANIAL; WI | 1/1/2007 | $199.24 | 3 |
| 8 | 62180 | VENTRICULOCISTERNOSTOMY (TORKILD | 1/1/2007 | $198.88 | 3 |
| 8 | 62192 | CREATION OF SHUNT; SUBARACHNOID/ | 1/1/2007 | $118.75 | 3 |
| 8 | 62200 | VENTRICULOCISTERNOSTOMY THIRD VE | 1/1/2007 | $175.42 | 3 |
| 8 | 62220 | CREATION OF SHUNT VENTRICULO-ATR | 1/1/2007 | $126.22 | 3 |
| 8 | 62223 | CREATION OF SHUNT; VENTRICULO-PE | 1/1/2007 | $125.81 | 3 |
| 8 | 62230 | REPLACEMENT OR REVISION OF CEREB | 1/1/2007 | $102.35 | 3 |
| 8 | 62256 | REMOVAL OF COMPLETE CEREBROSPINA | 1/1/2007 | $67.47 | 3 |
| 8 | 62258 | REMOVAL OF COMPLETE SHUNT SYSTEM | 1/1/2007 | $140.08 | 3 |
| 8 | 62351 | IMPLANTATION, REVISION OR REPOSI | 1/1/2007 | $100.53 | 3 |
| 8 | 63001 | LAMINECTOMY W/EXPL AND/OR DECOMP | 1/1/2007 | $151.03 | 3 |
| 8 | 63003 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $153.31 | 3 |
| 8 | 63005 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $146.57 | 3 |
| 8 | 63011 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $135.77 | 3 |
| 8 | 63012 | LAMINECTOMY WITH REMOVAL OF ABNO | 1/1/2007 | $150.56 | 3 |
| 8 | 63015 | LAMINECTOMY W/EXPL AND/OR DECOMP | 1/1/2007 | $186.68 | 3 |
| 8 | 63016 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $184.56 | 3 |
| 8 | 63017 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $155.54 | 3 |
| 8 | 63020 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $146.36 | 3 |
| 8 | 63030 | LAMINOTOMY,FOR DECOMPRESSION OF | 1/1/2007 | $121.55 | 3 |
| 8 | 63035 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $28.70 | 3 |
| 8 | 63040 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $181.55 | 3 |
| 8 | 63042 | LAMINOTOMY, WITH DECOMPRESSION O | 1/1/2007 | $171.58 | 3 |
| 8 | 63043 | LAMINOTOMY, WITH DECOMPRESSION O | 1/1/2003 | $27.77 | 3 |
| 8 | 63044 | LAMINOTOMY, WITH DECOMPRESSION O | 4/1/2004 | $27.77 | 3 |
| 8 | 63045 | LAMINECTOMY,FACETECTOMY & FORAMI | 1/1/2007 | $160.06 | 3 |
| 8 | 63046 | LAMINECTOMY, INC UNI/BI COMP FAC | 1/1/2007 | $153.31 | 3 |
| 8 | 63047 | LAMINECTOMY, INC UNI OR BI COMP | 1/1/2007 | $143.97 | 3 |
| 8 | 63048 | LAMINECTOMY,INC UNI/BI COMP FACE | 1/1/2007 | $29.27 | 3 |
| 8 | 63050 | LAMINOPLASTY, CERVICAL, W/DECOMP | 1/1/2007 | $193.48 | 3 |
| 8 | 63051 | LAMINOPLASTY, CERVICAL, W/DECOMP | 1/1/2007 | $220.16 | 3 |
| 8 | 63055 | TRANSPEDICULAR APPROACH W/DECOMP | 1/1/2007 | $209.68 | 3 |
| 8 | 63056 | TRANSPEDICULAR APPROACH FOR DECO | 1/1/2007 | $195.56 | 3 |
| 8 | 63057 | TRANSPEDICULAR APPR FOR DECOMP O | 1/1/2007 | $47.28 | 3 |
| 8 | 63064 | COSTOVERTEBRAL APPROACH W/DECOMP | 1/1/2007 | $232.10 | 3 |
| 8 | 63066 | COSTOVERTEBRAL APPROACH FOR DECO | 1/1/2007 | $29.12 | 3 |
| 8 | 63075 | DISKECTOMY,ANTERIOR,W/DECOMPRESS | 1/1/2007 | $187.46 | 3 |
| 8 | 63076 | DISKECTOMY ANTERIOR FOR DECOMPRE | 1/1/2007 | $36.64 | 3 |
| 8 | 63077 | DISKECTOMY, ANTR, FOR DECOMP OF | 1/1/2007 | $198.36 | 3 |
| 8 | 63078 | DISKECTOMY,ANT,FOR DECOMP OF SPI | 1/1/2007 | $28.96 | 3 |
| 8 | 63081 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $226.23 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 63082 | VERTEBRAL CORPECTOMY,PART/COMP,A | 1/1/2007 | $39.50 | 3 |
| 8 | 63085 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $243.26 | 3 |
| 8 | 63086 | VERTEBRAL CORPECTOMY,PART/COMP,T | 1/1/2007 | $27.87 | 3 |
| 8 | 63087 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $317.78 | 3 |
| 8 | 63088 | VERTEBRAL CORPECTOMY,PART/COMP,C | 1/1/2007 | $37.99 | 3 |
| 8 | 63090 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $251.25 | 3 |
| 8 | 63091 | VERTEBRAL CORPECTOMY,PART/COMP,T | 1/1/2007 | $25.79 | 3 |
| 8 | 63101 | VERTEBRAL CORPECTOMY, PARTIAL OR | 1/1/2007 | $295.67 | 3 |
| 8 | 63102 | VERTEBRAL CORPECTOMY, PARTIAL OR | 1/1/2007 | $295.67 | 3 |
| 8 | 63103 | VERTEBRAL CORPECTOMY, PARTIAL OR | 1/1/2007 | $41.62 | 3 |
| 8 | 63170 | LAMINECTOMY W/MYELOTOMY(EG,BISCH | 1/1/2007 | $189.69 | 3 |
| 8 | 63172 | LAMINECTOMY W/DRAINAGE OF INTRAM | 1/1/2007 | $170.13 | 3 |
| 8 | 63173 | LAMINECTOMY FOR DRAINAGE OF INTR | 1/1/2007 | $210.09 | 3 |
| 8 | 63180 | LAMINECTOMY AND SECTION OF DENTA | 1/1/2007 | $172.31 | 3 |
| 8 | 63182 | LAMINECTOMY AND SECTION OF DENTA | 1/1/2007 | $190.73 | 3 |
| 8 | 63185 | LAMINECTOMY W/RHIZOTOMY; ONE OR | 1/1/2007 | $134.52 | 3 |
| 8 | 63190 | LAMINECTOMY FOR RHIZOTOMY; MORE | 1/1/2007 | $159.96 | 3 |
| 8 | 63191 | LAMINECTOMY W/SECTION OF SPINAL | 1/1/2007 | $178.28 | 3 |
| 8 | 63194 | LAMINECTOMY W/CORDOTOMY, W/SECTI | 1/1/2007 | $177.29 | 3 |
| 8 | 63195 | LAMINECTOMY FOR CORDOTOMY, WITH | 1/1/2007 | $180.35 | 3 |
| 8 | 63196 | LAMINECTOMY W/CORDOTOMY,W/SECTIO | 1/1/2007 | $215.13 | 3 |
| 8 | 63197 | LAMINECTOMY FOR CORDOTOMY, WITH | 1/1/2007 | $200.75 | 3 |
| 8 | 63198 | LAMINECTOMY W/CORDOTOMY W/SECTIO | 1/1/2007 | $208.74 | 3 |
| 8 | 63199 | LAMINECTOMY FOR CORDOTOMY WITH S | 1/1/2007 | $224.83 | 3 |
| 8 | 63200 | LAMINECTOMY, W/RELEASE OF TETHER | 1/1/2007 | $183.88 | 3 |
| 8 | 63250 | LAMINECTOMY FOR EXCISION OF OCCL | 1/1/2007 | $361.69 | 3 |
| 8 | 63251 | LAMINECTOMY FOR EXCISION OR OCCL | 1/1/2007 | $385.10 | 3 |
| 8 | 63252 | LAMINECTOMY FOR EXCISION OF OCCL | 1/1/2007 | $384.37 | 3 |
| 8 | 63265 | LAMINECTOMY FOR EXCISION OR EVAC | 1/1/2007 | $206.35 | 3 |
| 8 | 63266 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $212.89 | 3 |
| 8 | 63267 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $173.29 | 3 |
| 8 | 63268 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $169.04 | 3 |
| 8 | 63270 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $254.73 | 3 |
| 8 | 63271 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $256.33 | 3 |
| 8 | 63272 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $239.67 | 3 |
| 8 | 63273 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $230.23 | 3 |
| 8 | 63275 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $224.42 | 3 |
| 8 | 63276 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $222.91 | 3 |
| 8 | 63277 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $199.09 | 3 |
| 8 | 63278 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $194.63 | 3 |
| 8 | 63280 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $269.52 | 3 |
| 8 | 63281 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $266.71 | 3 |
| 8 | 63282 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $251.56 | 3 |
| 8 | 63283 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $238.27 | 3 |
| 8 | 63285 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $337.97 | 3 |
| 8 | 63286 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $336.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 63287 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $345.14 | 3 |
| 8 | 63290 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $347.63 | 3 |
| 8 | 63295 | OSTEOPLASTIC RECONSTRUCTION OF D | 4/1/2005 | NC | 9 |
| 8 | 63300 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $231.94 | 3 |
| 8 | 63301 | VERT CORPECT, PART/COMP, FOR EXC | 1/1/2007 | $251.92 | 3 |
| 8 | 63302 | VERT CORP, PART/COMP, FOR EXCIS | 1/1/2007 | $255.30 | 3 |
| 8 | 63303 | VERT CORP,PART/COMP,FOR EXCIS OF | 1/1/2007 | $270.30 | 3 |
| 8 | 63304 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $280.26 | 3 |
| 8 | 63305 | VERT CORPECT, PART/COMP, FOR EXC | 1/1/2007 | $289.50 | 3 |
| 8 | 63306 | VERT CORP, PART/COMP, FOR EXCISI | 1/1/2007 | $302.78 | 3 |
| 8 | 63307 | VERT CORP,PART/COMP,FOR EXCIS OF | 1/1/2007 | $274.50 | 3 |
| 8 | 63308 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $47.44 | 3 |
| 8 | 63655 | LAMINECTOMY FOR IMPLANTATION OF | 1/1/2007 | $101.78 | 3 |
| 8 | 63685 | INSERTION OR REPLACE OF SPINAL N | 1/1/2007 | $63.47 | 3 |
| 8 | 63700 | REPAIR OF MENINGOCELE LESS THAN | 1/1/2007 | $157.57 | 3 |
| 8 | 63702 | REPAIR OF MENINGOCELE; LARGER TH | 1/1/2007 | $174.54 | 3 |
| 8 | 63704 | REPAIR OF MYELOMENINGOCELE LESS | 1/1/2007 | $200.70 | 3 |
| 8 | 63706 | REPAIR OF MYELOMENINGOCELE; LARG | 1/1/2007 | $227.89 | 3 |
| 8 | 63707 | REPAIR OF DURAL/CEREBROSPINAL FL | 1/1/2007 | $111.43 | 3 |
| 8 | 63709 | REPAIR OF DURAL/CEREBROSPINAL FL | 1/1/2007 | $139.14 | 3 |
| 8 | 63710 | DURAL GRAFT SPINAL | 1/1/2007 | $137.59 | 3 |
| 8 | 63740 | CREATION OF SHUNT,LUMBAR,SUBARAC | 1/1/2007 | $112.26 | 3 |
| 8 | 63741 | CREATION OF SHUNT, LUMBAR, SUBAR | 1/1/2007 | $76.09 | 3 |
| 8 | 63744 | REPLACEMENT IRRIGATION OR REVISI | 1/1/2007 | $79.15 | 3 |
| 8 | 64580 | INCISION FOR IMPLANTATION OF NEU | 1/1/2007 | $41.68 | 3 |
| 8 | 64585 | REVISION OR REMOVAL OF PERIPHERA | 1/1/2007 | $70.43 | 3 |
| 8 | 64590 | INCISION & SUBCUTANEOUS PLACE OF | 1/1/2007 | $50.60 | 3 |
| 8 | 64704 | NEUROLYSIS; NERVE OF HAND OR FOO | 1/1/2007 | $44.06 | 3 |
| 8 | 64708 | NEUROPLASTY, MAJOR PERIPHERAL NE | 1/1/2007 | $61.97 | 3 |
| 8 | 64712 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $70.90 | 3 |
| 8 | 64713 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $97.00 | 3 |
| 8 | 64714 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $81.53 | 3 |
| 8 | 64716 | NEUROPLASTY AND/OR TRANSPOSITION | 1/1/2007 | $67.05 | 3 |
| 8 | 64722 | DECOMPRESSION UNSPECIFIED NERVES | 1/1/2007 | $42.66 | 3 |
| 8 | 64732 | TRANSECTION OR AVULSION OF SUPRA | 1/1/2007 | $46.14 | 3 |
| 8 | 64736 | TRANSECTION OR AVULSION OF; MENT | 1/1/2007 | $47.44 | 3 |
| 8 | 64738 | TRANSECTION OR AVULSION OF; INFE | 1/1/2007 | $59.27 | 3 |
| 8 | 64740 | TRANSECTION OR AVULSION OF; LING | 1/1/2007 | $59.17 | 3 |
| 8 | 64742 | TRANSECTION OR AVULSION OF; FACI | 1/1/2007 | $60.46 | 3 |
| 8 | 64746 | TRANSECTION OR AVULSION OF; PHRE | 1/1/2007 | $58.39 | 3 |
| 8 | 64752 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $63.68 | 3 |
| 8 | 64755 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $108.89 | 3 |
| 8 | 64760 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $58.23 | 3 |
| 8 | 64761 | TRANSECTION OR AVULSION OF; PUDE | 1/1/2007 | $54.29 | 3 |
| 8 | 64763 | TRANSECTION OR AVULSION OF OBTUR | 1/1/2007 | $67.83 | 3 |
| 8 | 64766 | TRANSECTION OR AVULSION OF OBTUR | 1/1/2007 | $77.75 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 64771 | TRANSECTION OR AVULSION OF OTHER | 1/1/2007 | $73.39 | 3 |
| 8 | 64772 | TRANSECTION OR AVULSION OF OTHER | 1/1/2007 | $70.22 | 3 |
| 8 | 64786 | EXCISION OF NEUROMA; SCIATIC NER | 1/1/2007 | $144.80 | 3 |
| 8 | 64792 | EXCISION OF NEUROFIBROMA OR NEUR | 1/1/2007 | $136.13 | 3 |
| 8 | 64802 | SYMPATHECTOMY, CERVICAL | 1/1/2007 | $80.81 | 3 |
| 8 | 64804 | SYMPATHECTOMY, CERVICOTHORACIC | 1/1/2007 | $124.25 | 3 |
| 8 | 64809 | SYMPATHECTOMY, THORACOLUMBAR | 1/1/2007 | $108.63 | 3 |
| 8 | 64818 | SYMPATHECTOMY, LUMBAR | 1/1/2007 | $87.76 | 3 |
| 8 | 64835 | SUTURE OF ONE NERVE HAND OR FOOT | 1/1/2007 | $105.67 | 3 |
| 8 | 64836 | SUTURE OF ONE NERVE HAND OR FOOT | 1/1/2007 | $105.20 | 3 |
| 8 | 64837 | SUTURE OF EACH ADDITIONAL NERVE | 1/1/2007 | $54.29 | 3 |
| 8 | 64840 | SUTURE OF POSTERIOR TIBIAL NERVE | 1/1/2007 | $117.50 | 3 |
| 8 | 64857 | SUTURE OF MAJOR PERIPHERAL NERVE | 1/1/2007 | $136.70 | 3 |
| 8 | 64858 | SUTURE OF SCIATIC NERVE | 1/1/2007 | $158.81 | 3 |
| 8 | 64859 | SUTURE OF EACH ADDITIONAL MAJOR | 1/1/2007 | $36.95 | 3 |
| 8 | 64861 | SUTURE OF BRACHIAL PLEXIS | 1/1/2007 | $182.12 | 3 |
| 8 | 64862 | SUTURE OF; LUMBAR PLEXUS | 1/1/2007 | $185.18 | 3 |
| 8 | 64864 | SUTURE OF FACIAL NERVE EXTRACRAN | 1/1/2007 | $117.19 | 3 |
| 8 | 64865 | SUTURE OF FACIAL NERVE; INTRATEM | 1/1/2007 | $157.15 | 3 |
| 8 | 64866 | ANASTOMOSIS FACIAL-SPINAL ACCESS | 1/1/2007 | $160.68 | 3 |
| 8 | 64868 | ANASTOMOSIS; FACIAL-HYPOGLOSSAL | 1/1/2007 | $139.66 | 3 |
| 8 | 64870 | ANASTOMOSIS; FACIAL-PHRENIC | 1/1/2007 | $135.04 | 3 |
| 8 | 64872 | SUTURE OF NERVE REQUIRING SECOND | 1/1/2007 | $17.44 | 3 |
| 8 | 64874 | SUTURE OF NERVE; REQUIRING EXTEN | 1/1/2007 | $25.59 | 3 |
| 8 | 64876 | SUTURE OF NERVE REQUIRING SHORTE | 1/1/2007 | $29.01 | 3 |
| 8 | 64885 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $159.64 | 3 |
| 8 | 64886 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $188.81 | 3 |
| 8 | 64890 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $142.41 | 3 |
| 8 | 64891 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $131.57 | 3 |
| 8 | 64892 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $134.89 | 3 |
| 8 | 64893 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $145.74 | 3 |
| 8 | 64895 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $163.33 | 3 |
| 8 | 64896 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $179.73 | 3 |
| 8 | 64897 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $163.33 | 3 |
| 8 | 64898 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $176.77 | 3 |
| 8 | 64901 | NERVE GRAFT EACH ADDITIONAL NERV | 1/1/2007 | $87.45 | 3 |
| 8 | 64902 | NERVE GRAFT EACH ADDITIONAL NERV | 1/1/2007 | $100.37 | 3 |
| 8 | 64905 | NERVE PEDICLE TRANSFER FIRST STA | 1/1/2007 | $127.21 | 3 |
| 8 | 64907 | NERVE PEDICLE TRANSFER; SECOND S | 1/1/2007 | $179.16 | 3 |
| 8 | 64910 | NERVE REPAIR; WITH SYNTHETIC CON | 1/1/2007 | $94.25 | 3 |
| 8 | 64911 | NERVE REPAIR; WITH AUTOGENOUS VE | 1/1/2007 | $114.65 | 3 |
| 8 | 64999 | UNLISTED PROCEDURE NERVOUS SYSTE | 11/1/2004 | $0.01 | 5 |
| 8 | 65105 | ENUCLEATION OF EYE; WITH IMPLANT | 1/1/2007 | $100.63 | 3 |
| 8 | 65110 | EXENTERATION OF ORBIT (DOES NOT | 1/1/2007 | $147.66 | 3 |
| 8 | 65112 | EXENTERATION OF ORBIT (DOES NOT | 1/1/2007 | $175.63 | 3 |
| 8 | 65114 | EXENTERATION OF ORBIT, REMOVAL O | 1/1/2007 | $181.18 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 65130 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $86.57 | 3 |
| 8 | 65135 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $88.33 | 3 |
| 8 | 65140 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $95.03 | 3 |
| 8 | 65155 | REINSERTION OF OCULAR IMPLANT WI | 1/1/2007 | $102.04 | 3 |
| 8 | 65175 | REMOVAL OF OCULAR IMPLANT (FOR O | 1/1/2007 | $78.27 | 3 |
| 8 | 65260 | REMOVAL OF FOREIGN BODY INTRAOCU | 1/1/2007 | $109.98 | 3 |
| 8 | 65265 | REMOVAL OF FOREIGN BODY INTRAOCU | 1/1/2007 | $123.73 | 3 |
| 8 | 65272 | REPAIR OF LACERATION; CONJUNCTIV | 1/1/2007 | $60.88 | 3 |
| 8 | 65273 | REPAIR OF LACERATION; CONJUNCTIV | 1/1/2007 | $42.35 | 3 |
| 8 | 65285 | REPAIR OF LACERATION; CORNEA AND | 1/1/2007 | $118.12 | 3 |
| 8 | 65290 | REPAIR OF WOUND, EXTRAOCULAR MUS | 1/1/2007 | $54.29 | 3 |
| 8 | 65710 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $125.44 | 3 |
| 8 | 65730 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $140.03 | 3 |
| 8 | 65750 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $143.87 | 3 |
| 8 | 65755 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $142.83 | 3 |
| 8 | 65770 | KERATOPROSTHESIS | 1/1/2007 | $164.21 | 3 |
| 8 | 65771 | RADIAL KERATOTOMY | 1/1/1991 | NC | 9 |
| 8 | 65780 | OCULAR SURFACE RECONSTRUCTION; A | 1/1/2007 | $108.94 | 3 |
| 8 | 65781 | OCULAR SURFACE RECONSTRUCTION; I | 1/1/2007 | $164.99 | 3 |
| 8 | 65782 | OCULAR SURFACE RECONSTRUCTION; L | 1/1/2007 | $142.41 | 3 |
| 8 | 65865 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $59.74 | 3 |
| 8 | 65870 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $67.47 | 3 |
| 8 | 65875 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $70.90 | 3 |
| 8 | 65880 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $75.15 | 3 |
| 8 | 65900 | REMOVAL OF EPITHELIAL DOWNGROWTH | 1/1/2007 | $112.78 | 3 |
| 8 | 65920 | REMOVAL OF IMPLANTED MATERIAL, A | 1/1/2007 | $88.18 | 3 |
| 8 | 66150 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $94.35 | 3 |
| 8 | 66160 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $108.32 | 3 |
| 8 | 66165 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $91.71 | 3 |
| 8 | 66170 | FISTULIZATION OF SCLEAR FOR GLAU | 1/1/2007 | $129.75 | 3 |
| 8 | 66172 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $160.89 | 3 |
| 8 | 66180 | AQUEOUS SHUNT TO EXTRAOCULAR RES | 1/1/2007 | $135.10 | 3 |
| 8 | 66185 | REVISION OF AQUEOUS SHUNT TO EXT | 1/1/2007 | $82.68 | 3 |
| 8 | 66220 | REPAIR OF SCLERAL STAPHYLOMA; WI | 1/1/2007 | $79.30 | 3 |
| 8 | 66225 | REPAIR OF SCLERAL STAPHYLOMA; WI | 1/1/2007 | $105.56 | 3 |
| 8 | 66250 | REVISION OR REPAIR OF OPERATIVE | 1/1/2007 | $93.37 | 3 |
| 8 | 66500 | IRIDOTOMY BY STAB INCISION (SEPA | 1/1/2007 | $44.27 | 3 |
| 8 | 66505 | IRIDOTOMY BY STAB INCISION (SEPA | 1/1/2007 | $48.11 | 3 |
| 8 | 66605 | IRIDECTOMY WITH CORNEOSCLERAL OR | 1/1/2007 | $122.43 | 3 |
| 8 | 66680 | REPAIR OF IRIS CILIARY BODY (AS | 1/1/2007 | $57.04 | 3 |
| 8 | 66682 | SUTURE OF IRIS CILIARY BODY (SEP | 1/1/2007 | $68.20 | 3 |
| 8 | 66986 | EXCHANGE OF INTRAOCULAR LENS | 1/1/2007 | $114.49 | 3 |
| 8 | 67005 | REMOVAL OF VITREOUS ANTERIOR APP | 1/1/2007 | $56.26 | 3 |
| 8 | 67010 | REMOVAL OF VITREOUS, ANTERIOR AP | 1/1/2007 | $65.55 | 3 |
| 8 | 67015 | ASPIRATION OR RELEASE OF VITREOU | 1/1/2007 | $71.21 | 3 |
| 8 | 67025 | INJECTION OF VITREOUS SUBSTITUTE | 1/1/2007 | $85.22 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 67030 | DISCISSION OF VITREOUS STRANDS ( | 1/1/2007 | $56.78 | 3 |
| 8 | 67036 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $112.10 | 3 |
| 8 | 67038 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $196.08 | 3 |
| 8 | 67039 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $142.36 | 3 |
| 8 | 67040 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $164.89 | 3 |
| 8 | 67107 | REPAIR OF RETINAL DETACHMENT; SC | 1/1/2007 | $139.51 | 3 |
| 8 | 67108 | REPAIR OF RETINAL DETACHMENT; W/ | 1/1/2007 | $188.24 | 3 |
| 8 | 67112 | REPAIR OF RETINAL DETACHMENT; BY | 1/1/2007 | $153.11 | 3 |
| 8 | 67115 | RELEASE OF ENCIRCLING MATERIAL ( | 1/1/2007 | $53.56 | 3 |
| 8 | 67120 | REMOVAL OF IMPLANTED MATERIAL, P | 1/1/2007 | $77.12 | 3 |
| 8 | 67121 | REMOVAL OF IMPLANTED MATERIAL PO | 1/1/2007 | $102.40 | 3 |
| 8 | 67218 | DESTRUCTION OF LOCALIZED LESION | 1/1/2007 | $164.06 | 3 |
| 8 | 67250 | SCLERAL REINFORCEMENT (SEPARATE | 1/1/2007 | $95.08 | 3 |
| 8 | 67255 | SCLERAL REINFORCEMENT (SEPARATE | 1/1/2007 | $99.91 | 3 |
| 8 | 67314 | STRABISMUS SURGERY, RECESSION OR | 1/1/2007 | $75.10 | 3 |
| 8 | 67316 | STRABISMUS SURGERY, RECESSION OR | 1/1/2007 | $91.68 | 3 |
| 8 | 67318 | STRABISMUS SURGERY, ANY METHOD ( | 1/1/2007 | $78.89 | 3 |
| 8 | 67320 | TRANSPOSITION PROC(EG,FOR PARETI | 1/1/2007 | $33.74 | 3 |
| 8 | 67331 | STRABISMUS SURG ON PATIENT W/PRE | 1/1/2007 | $31.66 | 3 |
| 8 | 67332 | STRABISMUS SURG ON PATIENT W/SCA | 1/1/2007 | $34.98 | 3 |
| 8 | 67334 | STRABISMUS SURGERY BY POSTERIOR | 1/1/2007 | $30.98 | 3 |
| 8 | 67340 | STRABISMUS SURGERY INVOLVING EXP | 1/1/2007 | $38.30 | 3 |
| 8 | 67343 | RELEASE OF EXTENSIVE SCAR TISSUE | 1/1/2007 | $73.91 | 3 |
| 8 | 67346 | BIOPSY OF EXTRAOCULAR MUSCLE | 1/1/2007 | $24.55 | 3 |
| 8 | 67350 | BIOPSY OF EXTRAOCULAR MUSCLE | 1/1/2007 | INVALID | N |
| 8 | 67399 | UNLISTED PROCEDURE OCULAR MUSCLE | 2/1/1994 | $0.01 | 5 |
| 8 | 67400 | ORBITOTOMY W/OUT BONE FLAP (FRON | 1/1/2007 | $112.10 | 3 |
| 8 | 67405 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $94.25 | 3 |
| 8 | 67412 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $108.63 | 3 |
| 8 | 67413 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $110.50 | 3 |
| 8 | 67414 | ORBITOTOMY W/OUT BONE FLAP; W/RE | 1/1/2007 | $123.68 | 3 |
| 8 | 67420 | ORBITOTOMY WITH BONE FLAP OR WIN | 1/1/2007 | $200.44 | 3 |
| 8 | 67430 | ORBITOTOMY WITH BONE FLAP LATERA | 1/1/2007 | $151.34 | 3 |
| 8 | 67440 | ORBITOTOMY WITH BONE FLAP OR WIN | 1/1/2007 | $145.68 | 3 |
| 8 | 67445 | ORBITOTOMY W/BONE FLAP OR WINDOW | 1/1/2007 | $151.81 | 3 |
| 8 | 67450 | ORBITOTOMY WITH BONE FLAP LATERA | 1/1/2007 | $149.99 | 3 |
| 8 | 67550 | ORBITAL IMPLANT (IMPLANT OUTSIDE | 1/1/2007 | $115.32 | 3 |
| 8 | 67560 | ORBITAL IMPLANT (IMPLANT OUTSIDE | 1/1/2007 | $117.19 | 3 |
| 8 | 67570 | OPTIC NERVE DECOMPRESSION (EG, I | 1/1/2007 | $144.59 | 3 |
| 8 | 67599 | UNLISTED PROCEDURE ORBIT | 4/1/1982 | $0.01 | 5 |
| 8 | 67901 | REPAIR OF BLEPHAROPTOSIS; FRONTA | 1/1/2007 | $69.29 | 3 |
| 8 | 67902 | REPAIR OF BLEPHAROPTOSIS; FRONTA | 1/1/2007 | $80.08 | 3 |
| 8 | 67903 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 1/1/2007 | $85.22 | 3 |
| 8 | 67904 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 1/1/2007 | $84.70 | 3 |
| 8 | 67906 | REPAIR OF BLEPHAROPTOSIS; SUPERI | 1/1/2007 | $65.55 | 3 |
| 8 | 67908 | REPAIR OF BLEPHAROPTOSIS; CONJUN | 1/1/2007 | $62.54 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 67950 | CANTHOPLASTY (RECONSTRUCTION OF | 1/1/2007 | $76.97 | 3 |
| 8 | 67961 | EXCISION & REP OF EYELID INVOLVI | 1/1/2007 | $76.40 | 3 |
| 8 | 67966 | EXCISION AND REPAIR OF EYELID IN | 1/1/2007 | $83.51 | 3 |
| 8 | 67971 | 8ECONSTRUCTION OF EYELID, FULL T | 1/1/2007 | $91.40 | 3 |
| 8 | 67973 | RECONSTRUCTION OF EYELID FULL TH | 1/1/2007 | $119.06 | 3 |
| 8 | 67974 | RECONSTRUCTION OF EYELID FULL TH | 1/1/2007 | $118.49 | 3 |
| 8 | 68320 | CONJUNCTIVOPLASTY WITH CONJUNCTI | 1/1/2007 | $87.92 | 3 |
| 8 | 68325 | CONJUNCTIVOPLASTY; WITH BUCCAL M | 1/1/2007 | $74.48 | 3 |
| 8 | 68326 | CONJUNCTIVOPLASTY RECONSTRUCTION | 1/1/2007 | $72.24 | 3 |
| 8 | 68335 | REPAIR OF SYMBLEPHARON; WITH FRE | 1/1/2007 | $72.35 | 3 |
| 8 | 68362 | CONJUNCTIVAL FLAP; TOTAL (SUCH A | 1/1/2007 | $73.23 | 3 |
| 8 | 68500 | EXCISION OF LACRIMAL GLAND (DACR | 1/1/2007 | $110.60 | 3 |
| 8 | 68505 | EXCISION OF LACRIMAL GLAND (DACR | 1/1/2007 | $114.96 | 3 |
| 8 | 68540 | EXCISION OF LACRIMAL GLAND TUMOR | 1/1/2007 | $106.50 | 3 |
| 8 | 68550 | EXCISION OF LACRIMAL GLAND TUMOR | 1/1/2007 | $131.93 | 3 |
| 8 | 68720 | DACRYOCYSTORHINOSTOMY (FISTULIZA | 1/1/2007 | $89.63 | 3 |
| 8 | 68745 | CONJUNCTIVORHINOSTOMY (FISTULIZA | 1/1/2007 | $88.33 | 3 |
| 8 | 68750 | CONJUNCTIVORHINOSTOMY (FISTULIZA | 1/1/2007 | $90.15 | 3 |
| 8 | 69090 | EAR PIERCING | 4/1/1982 | NC | 9 |
| 8 | 69150 | RADICAL EXCISION EXTERNAL AUDITO | 1/1/2007 | $145.68 | 3 |
| 8 | 69155 | RADICAL EXCISION EXTERNAL AUDITO | 1/1/2007 | $219.49 | 3 |
| 8 | 69320 | RECONSTRUCTION EXTERNAL AUDITORY | 1/1/2007 | $208.64 | 3 |
| 8 | 69410 | FOCAL APPLICATION OF PHASE CONTR | 1/1/2006 | INVALID | N |
| 8 | 69501 | TRANSMASTOID ANTROTOMY (SIMPLE M | 1/1/2007 | $97.68 | 3 |
| 8 | 69530 | PETROUS APICECTOMY INCLUDING RAD | 1/1/2007 | $220.00 | 3 |
| 8 | 69535 | RESECTION TEMPORAL BONE EXTERNAL | 1/1/2007 | $368.80 | 3 |
| 8 | 69550 | EXCISION AURAL GLOMUS TUMOR TRAN | 1/1/2007 | $138.88 | 3 |
| 8 | 69552 | EXCISION AURAL GLOMUS TUMOR; TRA | 1/1/2007 | $216.68 | 3 |
| 8 | 69554 | EXCISION AURAL GLOMUS TUMOR; EXT | 1/1/2007 | $344.82 | 3 |
| 8 | 69604 | REVISION MASTOIDECTOMY; RESULTIN | 1/1/2007 | $149.84 | 3 |
| 8 | 69605 | REVISION MASTOIDECTOMY; WITH API | 1/1/2007 | $212.63 | 3 |
| 8 | 69650 | STAPES MOBILIZATION | 1/1/2007 | $105.72 | 3 |
| 8 | 69670 | MASTOID OBLITERATION (SEPARATE P | 1/1/2007 | $125.39 | 3 |
| 8 | 69676 | TYMPANIC NEURECTOMY | 1/1/2007 | $109.51 | 3 |
| 8 | 69700 | CLOSURE POSTAURICULAR FISTULA MA | 1/1/2007 | $94.25 | 3 |
| 8 | 69711 | REMOVAL OR REPAIR OF ELECTROMAGN | 1/1/2007 | $114.54 | 3 |
| 8 | 69720 | DECOMPRESSION FACIAL NERVE INTRA | 1/1/2007 | $156.12 | 3 |
| 8 | 69725 | DECOMPRESSION FACIAL NERVE INTRA | 1/1/2007 | $248.96 | 3 |
| 8 | 69740 | SUTURE FACIAL NERVE INTRATEMPORA | 1/1/2007 | $159.13 | 3 |
| 8 | 69745 | SUTURE FACIAL NERVE INTRATEMPORA | 1/1/2007 | $170.28 | 3 |
| 8 | 69802 | LABYRINTHOTOMY WITH OR WITHOUT C | 1/1/2007 | $137.54 | 3 |
| 8 | 69805 | ENDOLYMPHATIC SAC OPERATION WITH | 1/1/2007 | $139.25 | 3 |
| 8 | 69820 | FENESTRATION SEMICIRCULAR CANAL | 1/1/2007 | $116.62 | 3 |
| 8 | 69840 | REVISION FENESTRATION OPERATION | 1/1/2007 | $125.81 | 3 |
| 8 | 69905 | LABYRINTHECTOMY TRANSCANAL | 1/1/2007 | $121.24 | 3 |
| 8 | 69915 | VESTIBULAR NERVE SECTION TRANSLA | 1/1/2007 | $204.49 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| 8 | 69930 | COCHLEAR DEVICE IMPLANTATION WIT | 9/21/1998 | $0.01 | 5 |
| 8 | 69950 | VESTIBULAR NERVE SECTION TRANSCR | 1/1/2007 | $243.05 | 3 |
| 8 | 69955 | TOTAL FACIAL NERVE DECOMPRESSION | 1/1/2007 | $264.27 | 3 |
| 8 | 69960 | DECOMPRESSION INTERNAL AUDITORY | 1/1/2007 | $255.76 | 3 |
| 8 | 69970 | REMOVAL OF TUMOR | 1/1/2007 | $289.29 | 3 |
| 8 | 69990 | MICROSURGICAL TEFHNIQUES, REQUIR | 1/1/2007 | $31.92 | 3 |
| 8 | M0301 | FABRIC WRAPPING OF ABDOMINAL ANE | 2/1/1994 | NC | 9 |
| 8 | S2053 | TRANSPLANTATION OF SMALL INTESTI | 10/1/2005 | $0.01 | 5 |
| 8 | S2150 | BONE MARROW OR BLOOD-DERIVED PER | 10/1/2005 | $0.01 | 5 |
| A | A4206 | SYRINGE WITH NEEDLE, STERILE, 1 | 12/22/2003 | $0.33 | 3 |
| A | A4207 | SYRINGE WITH NEEDLE, STERILE, 2C | 10/1/2000 | $0.17 | 3 |
| A | A4208 | SYRINGE WITH NEEDLE, STERILE, 3C | 2/15/2000 | $0.10 | 3 |
| A | A4209 | SYRINGE WITH NEEDLE, STERILE, 5C | 10/1/2000 | $0.44 | 3 |
| A | A4210 | NEEDLE-FREE INJECTION DEVICE, EA | 3/1/2004 | $252.20 | 3 |
| A | A4211 | SUPPLIES FOR SELF-ADMINISTERED I | 1/1/2005 | NC | 9 |
| A | A4212 | NON-CORING NEEDLE OR STYLET WITH | 1/1/1994 | NC | 9 |
| A | A4213 | SYRINGE, STERILE, 20CC OR GREATE | 10/1/2000 | $1.08 | 3 |
| A | A4214 | STERILE SALINE OR WATER, 30 CC V | 4/1/2004 | INVALID | N |
| A | A4215 | NEEDLE, STERILE, ANY SIZE, EACH | 5/1/2006 | $0.20 | 3 |
| A | A4216 | STERILE WATER, SALINE AND/OR DEX | 10/1/2006 | $0.38 | 3 |
| A | A4217 | STERILE WATER/SALINE, 500 ML | 10/1/2006 | $3.13 | 3 |
| A | A4218 | STERILE SALINE OR WATER, METERED | 1/1/2006 | NC | 9 |
| A | A4221 | SUPPLIES FOR MAINTENANCE OF DRUG | 10/1/2006 | $22.26 | 3 |
| A | A4222 | INFUSION SUPPLIES FOR EXTERNAL D | 1/1/2006 | NC | 9 |
| A | A4223 | INFUSION SUPPLIES NOT USED WITH | 1/1/2005 | NC | 9 |
| A | A4230 | INFUSION SET FOR EXTERNAL INSULI | 1/1/1996 | NC | 9 |
| A | A4231 | INFUSION SET FOR EXTERNAL INSULI | 1/1/1996 | NC | 9 |
| A | A4232 | SYRINGE WITH NEEDLE FOR EXTERNAL | 7/1/2006 | NC | 9 |
| A | A4233 | REPLACEMENT BATTERY, ALKALINE (O | 10/1/2006 | $0.80 | 3 |
| A | A4234 | REPLACEMENT BATTERY, ALKALINE, J | 10/1/2006 | $3.63 | 3 |
| A | A4235 | REPLACEMENT BATTERY, LITHIUM, FO | 10/1/2006 | $2.34 | 3 |
| A | A4236 | REPLACEMENT BATTERY, SILVER OXID | 10/1/2006 | $1.68 | 3 |
| A | A4244 | ALCOHOL OR PEROXIDE, PER PINT | 10/1/2000 | $1.03 | 3 |
| A | A4245 | ALCOHOL WIPES, PER BOX | 1/1/2002 | $3.00 | 3 |
| A | A4246 | BETADINE OR PHISOHEX SOLUTION, P | 10/1/2000 | $4.33 | 3 |
| A | A4247 | BETADINE OR IODINE SWABS/WIPES, | 10/1/2000 | $5.95 | 3 |
| A | A4248 | CHLORHEXIDINE CONTAINING ANTISEP | 1/1/2004 | NC | 9 |
| A | A4250 | URINE TEST OR REAGENT STRIPS OR | 3/1/2004 | $16.79 | 3 |
| A | A4253 | BLOOD GLUCOSE TEST OR REAGENT ST | 10/1/2006 | $36.94 | 3 |
| A | A4254 | REPLACEMENT BATTERY, ANY TYPE, F | 1/1/2006 | INVALID | N |
| A | A4255 | PLATFORMS FOR HOME BLOOD GLUCOSE | 10/1/2006 | $4.11 | 3 |
| A | A4256 | NORMAL, LOW AND HIGH CALIBRATOR | 10/1/2006 | $11.44 | 3 |
| A | A4257 | REPLACEMENT LENS SHIELD CARTRIDG | 1/1/2002 | NC | 9 |
| A | A4258 | SPRING-POWERED DEVICE FOR LANCET | 10/1/2006 | $17.75 | 3 |
| A | A4259 | LANCETS, PER BOX OF 100 | 10/1/2006 | $12.06 | 3 |
| A | A4260 | LEVONORGESTREL (CONTRACEPTIVE) I | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A4265 | PARAFFIN, PER POUND | 10/1/2006 | $3.39 | 3 |
| A | A4270 | DISPOSABLE ENDOSCOPE SHEATH, EAC | 10/1/2001 | NC | 9 |
| A | A4280 | ADHESIVE SKIN SUPPORT ATTACHMENT | 10/1/2006 | $4.84 | 3 |
| A | A4281 | TUBING FOR BREAST PUMP, REPLACEM | 4/1/2003 | NC | 9 |
| A | A4282 | ADAPTER FOR BREAST PUMP, REPLACE | 4/1/2003 | NC | 9 |
| A | A4283 | CAP FOR BREAST PUMP BOTTLE, REPL | 4/1/2003 | NC | 9 |
| A | A4284 | BREAST SHIELD AND SPLASH PROTECT | 4/1/2003 | NC | 9 |
| A | A4285 | POLYCARBONATE BOTTLE FOR USE WIT | 4/1/2003 | NC | 9 |
| A | A4286 | LOCKING RING FOR BREAST PUMP, RE | 4/1/2003 | NC | 9 |
| A | A4301 | IMPLANTABLE ACCESS TOTAL CATHETE | 1/1/1996 | NC | 9 |
| A | A4310 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $6.55 | 3 |
| A | A4311 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $12.61 | 3 |
| A | A4312 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $15.31 | 3 |
| A | A4313 | INSERTION TRAY W/O DRAINAGE BAG | 10/1/2006 | $15.72 | 3 |
| A | A4314 | INSERTION TRAY W/DRAINAGE BAG W/ | 10/1/2006 | $21.46 | 3 |
| A | A4315 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $22.39 | 3 |
| A | A4316 | INSERTION TRAY W/DRAINAGE BAG W/ | 10/1/2006 | $24.11 | 3 |
| A | A4319 | STERILE WATER IRRIGATION SOLUTIO | 4/1/2004 | INVALID | N |
| A | A4320 | IRRIGATION TRAY WITH BULB OR PIS | 10/1/2006 | $5.32 | 3 |
| A | A4321 | THERAPEUTIC AGENT FOR URINARY CA | 3/1/1997 | NC | 9 |
| A | A4322 | IRRIGATION SYRINGE, BULB OR PIST | 10/1/2006 | $2.73 | 3 |
| A | A4323 | STERILE SALINE IRRIGATION SOLUTI | 4/1/2004 | INVALID | N |
| A | A4324 | MALE EXTERNAL CATHETER, WITH ADH | 1/1/2005 | INVALID | N |
| A | A4325 | MALE EXTERNAL CATHETER, WITH ADH | 1/1/2005 | INVALID | N |
| A | A4326 | MALE EXTERNAL CATHETER SPECIALTY | 10/1/2006 | $10.35 | 3 |
| A | A4327 | FEMALE EXTERNAL URINARY COLLECTI | 10/1/2006 | $44.55 | 3 |
| A | A4328 | FEMALE EXTERNAL URINARY COLLECTI | 10/1/2006 | $9.86 | 3 |
| A | A4329 | EXTERNAL CATH START SET,MALE/FEM | 4/1/2002 | INVALID | N |
| A | A4330 | PERIANAL FECAL COLLECTION POUCH | 10/1/2006 | $6.93 | 3 |
| A | A4331 | EXTENSION DRAINAGE TUBING, ANY T | 10/1/2006 | $3.18 | 3 |
| A | A4332 | LUBRICANT, INDIVIDUAL STERILE PA | 10/1/2006 | $0.12 | 3 |
| A | A4333 | URINARY CATHETER ANCHORING DEVIC | 10/1/2006 | $2.20 | 3 |
| A | A4334 | URINARY CATHETER ANCHORING DEVIC | 10/1/2006 | $4.93 | 3 |
| A | A4335 | INCONTINENCE SUPPLY; MISCELLANEO | 7/1/2004 | $1.00 | 3 |
| A | A4338 | INDWELLING CATHETER; FOLEY TYPE; | 10/1/2006 | $12.25 | 3 |
| A | A4340 | INDWELLING CATHETER; SPECIALTY T | 10/1/2006 | $31.69 | 3 |
| A | A4344 | INDWELLING CATHETER; FOLEY TYPE, | 10/1/2006 | $15.99 | 3 |
| A | A4346 | INDWELLING CATHETER; FOLEY TYPE, | 10/1/2006 | $19.57 | 3 |
| A | A4347 | MALE EXTERNAL CATHETER WITH OR W | 1/1/2005 | INVALID | N |
| A | A4348 | MALE EXTERNAL CATHETER WITH INTE | 1/1/2007 | INVALID | N |
| A | A4349 | MALE EXTERNAL CATHETER, WITH OR | 10/1/2006 | $2.02 | 3 |
| A | A4351 | INTERMITTENT URINARY CATHETER; S | 10/1/2006 | $1.81 | 3 |
| A | A4352 | INTERMITTENT URINARY CATHETER; C | 10/1/2006 | $6.41 | 3 |
| A | A4353 | INTERMITTENT URINARY CATHETER, W | 10/1/2006 | $6.99 | 3 |
| A | A4354 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $10.01 | 3 |
| A | A4355 | IRRIGATION TUBING SET FOR CONTIN | 10/1/2006 | $8.90 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A4356 | EXTERNAL URETHRAL CLAMP OR COMPR | 10/1/2006 | $42.35 | 3 |
| A | A4357 | BEDSIDE DRAINAGE BAG, DAY OR NIG | 10/1/2006 | $9.68 | 3 |
| A | A4358 | URINARY DRAINAGE BAG, LEG OR ABD | 10/1/2006 | $5.85 | 3 |
| A | A4359 | URINARY SUSPENSORY WITHOUT LEG B | 1/1/2007 | INVALID | N |
| A | A4360 | ADULT INCONTINENCE GARMENT (EG, | 7/1/2003 | INVALID | N |
| A | A4361 | OSTOMY FACEPLATE, EACH | 10/1/2006 | $18.37 | 3 |
| A | A4362 | SKIN BARRIER; SOLID, 4 X 4 OR EQ | 10/1/2006 | $2.94 | 3 |
| A | A4363 | OSTOMY CLAMP, ANY TYPE, REPLACEM | 10/1/2006 | $2.36 | 3 |
| A | A4364 | ADHESIVE, LIQUID OR EQUAL, ANY T | 10/1/2006 | $2.93 | 3 |
| A | A4365 | ADHESIVE REMOVER WIPES, ANY TYPE | 10/1/2006 | $11.32 | 3 |
| A | A4366 | OSTOMY VENT, ANY TYPE, EACH | 10/1/2006 | $1.30 | 3 |
| A | A4367 | OSTOMY BELT, EACH | 10/1/2006 | $7.35 | 3 |
| A | A4368 | OSTOMY FILTER, ANY TYPE, EACH | 7/1/2002 | NC | 9 |
| A | A4369 | OSTOMY SKIN BARRIER, LIQUID (SPR | 10/1/2006 | $2.06 | 3 |
| A | A4370 | OSTOMY SKIN BARRIER, PASTE, PER | 7/1/2003 | INVALID | N |
| A | A4371 | OSTOMY SKIN BARRIER, POWDER, PER | 10/1/2006 | $3.60 | 3 |
| A | A4372 | OSTOMY SKIN BARRIER, SOLID 4X4 O | 10/1/2006 | $4.18 | 3 |
| A | A4373 | OSTOMY SKIN BARRIER, W/FLANGE (S | 10/1/2006 | $6.28 | 3 |
| A | A4374 | OSTOMY SKIN BARRIER, W/FLANGE (S | 7/1/2003 | INVALID | N |
| A | A4375 | OSTOMY POUCH, DRAINABLE, WITH FA | 10/1/2006 | $17.18 | 3 |
| A | A4376 | OSTOMY POUCH, DRAINABLE, WITH FA | 10/1/2006 | $47.58 | 3 |
| A | A4377 | OSTOMY POUCH, DRAINABLE, FOR USE | 10/1/2006 | $4.29 | 3 |
| A | A4378 | POUCH, DRAINABLE, FOR USE ON FAC | 10/1/2006 | $30.75 | 3 |
| A | A4379 | POUCH, URINARY, WITH FACEPLATE A | 10/1/2006 | $15.02 | 3 |
| A | A4380 | POUCH, URINARY, WITH FACEPLATE A | 10/1/2006 | $37.33 | 3 |
| A | A4381 | OSTOMY POUCH, URINARY, FOR USE O | 10/1/2006 | $4.61 | 3 |
| A | A4382 | OSTOMY POUCH, URINARY, FOR USE O | 10/1/2006 | $24.62 | 3 |
| A | A4383 | OSTOMY POUCH, URINARY, FOR USE O | 10/1/2006 | $28.19 | 3 |
| A | A4384 | OSTOMY FACEPLATE EQUIVALENT, SIL | 10/1/2006 | $9.62 | 3 |
| A | A4385 | OSTOMY SKIN BARRIER, SOLID 4X4 O | 10/1/2006 | $5.10 | 3 |
| A | A4386 | SKIN BARRIER, WITH FLANGE (SOLID | 7/1/2003 | INVALID | N |
| A | A4387 | OSTOMY POUCH, CLOSED, WITH BARRI | 10/1/2005 | $3.95 | 3 |
| A | A4388 | OSTOMY POUCH, DRAINABLE, WITH EX | 10/1/2006 | $4.36 | 3 |
| A | A4389 | OSTOMY POUCH, DRAINABLE, WITH BA | 10/1/2006 | $6.22 | 3 |
| A | A4390 | OSTOMY POUCH, DRAINABLE, W/EXTEN | 10/1/2006 | $9.61 | 3 |
| A | A4391 | OSTOMY POUCH, URINARY, WITH EXTE | 10/1/2006 | $7.07 | 3 |
| A | A4392 | OSTOMY POUCH, URINARY, W/STANDAR | 10/1/2006 | $6.77 | 3 |
| A | A4393 | OSTOMY POUCH, URINARY, W/EXTENDE | 10/1/2006 | $9.04 | 3 |
| A | A4394 | OSTOMY DEODORANT FOR USE IN OSTO | 10/1/2006 | $2.58 | 3 |
| A | A4395 | OSTOMY DEODORANT FOR USE IN OSTO | 10/1/2006 | $0.05 | 3 |
| A | A4396 | OSTOMY BELT WITH PERISTOMAL HERN | 10/1/2006 | $40.48 | 3 |
| A | A4397 | IRRIGATION SUPPLY; SLEEVE, EACH | 10/1/2006 | $4.07 | 3 |
| A | A4398 | OSTOMY IRRIGATION SUPPLY; BAG, E | 10/1/2006 | $13.81 | 3 |
| A | A4399 | OSTOMY IRRIGATION SUPPLY; CONE/C | 10/1/2006 | $12.26 | 3 |
| A | A4400 | OSTOMY IRRIGATION SET | 9/1/1996 | NC | 9 |
| A | A4402 | LUBRICANT, PER OUNCE | 10/1/2006 | $1.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A4404 | OSTOMY RING, EACH | 10/1/2006 | $1.44 | 3 |
| A | A4405 | OSTOMY SKIN BARRIER, NON-PECTIN | 10/1/2006 | $3.40 | 3 |
| A | A4406 | OSTOMY SKIN BARRIER, PECTIN-BASE | 10/1/2006 | $5.74 | 3 |
| A | A4407 | OSTOMY SKIN BARRIER, WITH FLANGE | 10/1/2006 | $8.76 | 3 |
| A | A4408 | OSTOMY SKIN BARRIER, WITH FLANGE | 10/1/2006 | $9.87 | 3 |
| A | A4409 | OSTOMY SKIN BARRIER, WITH FLANGE | 10/1/2006 | $6.22 | 3 |
| A | A4410 | OSTOMY SKIN BARRIER, WITH FLANGE | 10/1/2006 | $9.04 | 3 |
| A | A4411 | OSTOMY SKIN BARRIER, SOLID 4X4 O | 10/1/2006 | $5.10 | 3 |
| A | A4412 | OSTOMY POUCH, DRAINABLE, HIGH OU | 10/1/2006 | $2.70 | 3 |
| A | A4413 | OSTOMY POUCH, DRAINABLE, HIGH OU | 10/1/2006 | $5.50 | 3 |
| A | A4414 | OSTOMY SKIN BARRIER, W/FLANGE, W | 10/1/2006 | $4.93 | 3 |
| A | A4415 | OSTOMY SKIN BARRIER, WITH FLANGE | 10/1/2006 | $6.00 | 3 |
| A | A4416 | OSTOMY POUCH, CLOSED, WITH BARRI | 10/1/2006 | $2.75 | 3 |
| A | A4417 | OSTOMY POUCH, CLOSED, WITH BARRI | 10/1/2006 | $3.72 | 3 |
| A | A4418 | OSTOMY POUCH, CLOSED; WITHOUT BA | 10/1/2006 | $1.81 | 3 |
| A | A4419 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.74 | 3 |
| A | A4420 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2005 | $1.79 | 3 |
| A | A4421 | OSTOMY SUPPLY; MISCELLANEOUS | 4/1/1988 | $100.00 | 3 |
| A | A4422 | OSTOMY ABOSRBENT MATERIAL FOR US | 10/1/2006 | $0.12 | 3 |
| A | A4423 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.86 | 3 |
| A | A4424 | OSTOMY POUCH, DRAINABLE, WITH BA | 10/1/2006 | $4.75 | 3 |
| A | A4425 | OSTOMY POUCH, DRAINABLE; FOR USE | 10/1/2006 | $3.58 | 3 |
| A | A4426 | OSTOMY POUCH, DRAINABLE; FOR USE | 10/1/2006 | $2.53 | 3 |
| A | A4427 | OSTOMY POUCH, DRAINABLE; FOR USE | 10/1/2006 | $2.78 | 3 |
| A | A4428 | OSTOMY POUCH, URINARY, W/EXTENDE | 10/1/2006 | $6.51 | 3 |
| A | A4429 | OSTOMY POUCH, URINARY, W/BARRIER | 10/1/2006 | $8.03 | 3 |
| A | A4430 | OSTOMY POUCH, URINARY, W/EXTENDE | 10/1/2006 | $8.52 | 3 |
| A | A4431 | OSTOMY POUCH, URINARY; W/BARRIER | 10/1/2006 | $5.42 | 3 |
| A | A4432 | OSTOMY POUCH, URINARY; FOR USE O | 10/1/2006 | $3.59 | 3 |
| A | A4433 | OSTOMY POUCH, URINARY; FOR USE O | 10/1/2006 | $3.34 | 3 |
| A | A4434 | OSTOMY POUCH, URINARY; FOR USE O | 10/1/2006 | $3.76 | 3 |
| A | A4450 | TAPE, NON-WATERPROOF, PER 18 SQU | 10/1/2006 | $0.09 | 3 |
| A | A4452 | TAPE, WATERPROOF, PER 18 SQUARE | 10/1/2006 | $0.36 | 3 |
| A | A4454 | TAPE, ALL TYPES, ALL SIZES | 7/1/2003 | INVALID | N |
| A | A4455 | ADHESIVE REMOVER OR SOLVENT (FOR | 10/1/2006 | $1.43 | 3 |
| A | A4458 | ENEMA BAG WITH TUBING, REUSABLE | 4/1/2003 | NC | 9 |
| A | A4460 | ELASTIC BANDAGE, PER ROLL (EG CO | 7/1/2003 | INVALID | N |
| A | A4461 | SURGICAL DRESSING HOLDER, NON-RE | 1/1/2007 | NC | 9 |
| A | A4462 | ABDOMINAL DRESSING HOLDER, EACH | 1/1/2007 | INVALID | N |
| A | A4463 | SURGICAL DRESSING HOLDER, REUSAB | 1/1/2007 | NC | 9 |
| A | A4464 | JOINT SUPPORTIVE DEVICE/GARMENT, | 7/1/2003 | INVALID | N |
| A | A4470 | GRAVLEE JET WASHER | 10/1/2001 | NC | 9 |
| A | A4480 | VABRA ASPIRATOR | 10/1/2001 | NC | 9 |
| A | A4481 | THRACHEOSTOMA FILTER, ANY TYPE, | 10/1/2006 | $0.38 | 3 |
| A | A4483 | MOISTURE EXCHANGER, DISPOSABLE, | 10/1/2005 | $4.47 | 3 |
| A | A4490 | SURGICAL STOCKINGS ABOVE KNEE LE | 4/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A4495 | SURGICAL STOCKINGS THIGH LENGTH, | 4/1/2003 | NC | 9 |
| A | A4500 | SURGICAL STOCKINGS BELOW KNEE LE | 1/1/2003 | NC | 9 |
| A | A4510 | SURGICAL STOCKINGS FULL LENGTH, | 1/1/2003 | NC | 9 |
| A | A4520 | INCONTINENCE GARMENT, ANY TYPE, | 1/1/2005 | NC | 9 |
| A | A4521 | ADULT-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4522 | ADULT-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4523 | ADULT-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4524 | ADULT-SIZED INCONTINCNE PRODUCT, | 1/1/2005 | INVALID | N |
| A | A4525 | ADULT-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4526 | ADULT-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4527 | ADULT-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4528 | ADULT-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4529 | CHILD-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4530 | CHILD-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4531 | CHILD-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4532 | CHILD-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4533 | YOUTH-SIZED INCONTINENCE PRODUCT | 1/1/2005 | INVALID | N |
| A | A4534 | YOUTH-SIZED INCONTINENCE PRODUCT | 1/1/2005 | NC | 9 |
| A | A4535 | DISPOSABLE LINER/SHIELD FOR INCO | 1/1/2005 | INVALID | N |
| A | A4536 | PROTECTIVE UNDERWEAR, WASHABLE, | 1/1/2005 | INVALID | N |
| A | A4537 | UNDER PAD, REUSABLE/WASHABLE, AN | 1/1/2005 | INVALID | N |
| A | A4538 | DIAPER SERVICE, REUSABLE DIAPER, | 1/1/2005 | INVALID | N |
| A | A4554 | DISPOSABLE UNDERPADS, ALL SIZES, | 1/1/2005 | NC | 9 |
| A | A4556 | ELECTRODES (EG APNEA MONITOR), P | 10/1/2006 | $11.85 | 3 |
| A | A4557 | LEAD WIRES, (EG. APNEA MONITOR), | 10/1/2006 | $21.10 | 3 |
| A | A4558 | CONDUCTIVE PASTE OR GEL | 10/1/2006 | $5.02 | 3 |
| A | A4559 | COUPLING GEL OR PASTE, FOR USE W | 1/1/2007 | NC | 9 |
| A | A4565 | SLINGS | 7/1/2007 | NC | 9 |
| A | A4570 | SPLINT | 10/1/2001 | NC | 9 |
| A | A4572 | RIB BELT -H | 7/1/2003 | INVALID | N |
| A | A4575 | TOPICAL HYPERBARIC OXYGEN CHAMBE | 1/1/1996 | NC | 9 |
| A | A4580 | CAST SUPPLIES (EG, PLASTER) | 7/1/2002 | NC | 9 |
| A | A4590 | SPECIAL CASTING MATERIAL (EG, FI | 7/1/2002 | NC | 9 |
| A | A4595 | ELECTRICAL STIMULATOR SUPPLIES, | 10/1/2006 | $28.35 | 3 |
| A | A4600 | SLEEVE FOR INTERMITTENT LIMB COM | 1/1/2007 | NC | 9 |
| A | A4601 | LITHIUM ION BATTERY FOR NON-PROS | 1/1/2007 | NC | 9 |
| A | A4604 | TUBING WITH INTEGRATED HEATING E | 10/1/2006 | $66.81 | 3 |
| A | A4605 | TRACHEAL SUCTION CATHETER, CLOSE | 10/1/2006 | $16.40 | 3 |
| A | A4606 | OXYGEN PROBE FOR USE WITH OXIMET | 4/1/2003 | $125.00 | 3 |
| A | A4608 | TRANSTRACHEAL OXYGEN CATHETER, E | 10/1/2006 | $58.15 | 3 |
| A | A4609 | TRACHEAL SUCTION CATHETER, CLOSE | 1/1/2005 | INVALID | N |
| A | A4610 | TRACHEAL SUCTION CATHETER, CLOSE | 1/1/2005 | INVALID | N |
| A | A4611 | BATTERY, HEAVY DUTY; REPLACEMENT | 10/1/2006 | $166.98 | 3 |
| A | A4612 | BATTERY CABLES; REPLACEMENT FOR | 10/1/2006 | $79.93 | 3 |
| A | A4613 | BATTERY CHARGER; REPLACEMENT FOR | 10/1/2006 | $144.21 | 3 |
| A | A4614 | PEAK EXPIRATORY FLOW RATE METER, | 10/1/2006 | $23.78 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A4615 | CANNULA, NASAL | 10/1/2000 | $4.22 | 3 |
| A | A4616 | TUBING, (OXYGEN), PER FOOT | 10/1/2000 | $0.37 | 3 |
| A | A4617 | MOUTHPIECE | 10/1/2000 | $3.24 | 3 |
| A | A4618 | BREATHING CIRCUITS | 10/1/2006 | $7.66 | 3 |
| A | A4619 | FACE TENT | 10/1/2006 | $1.21 | 3 |
| A | A4620 | VARIABLE CONCENTRATION MASK | 10/1/2000 | $3.79 | 3 |
| A | A4621 | TRACHEOTOMY MASK OR COLLAR | 4/1/2004 | INVALID | N |
| A | A4622 | TRACHEOSTOMY OR LARYNGECTOMY TUB | 4/1/2004 | INVALID | N |
| A | A4623 | TRACHEOSTOMY, INNER CANNULA | 10/1/2006 | $5.57 | 3 |
| A | A4624 | TRACHEAL SUCTION CATHETER, ANY T | 10/1/2006 | $2.63 | 3 |
| A | A4625 | TRACHEOSTOMY CARE KIT FOR NEW TR | 10/1/2006 | $5.89 | 3 |
| A | A4626 | TRACHEOSTOMY CLEANING BRUSH, EAC | 10/1/2006 | $2.71 | 3 |
| A | A4627 | SPACER, BAG OR RESERVOIR, W/OR W | 10/1/2000 | $26.50 | 3 |
| A | A4628 | OROPHARYNGEAL SUCTION CATHETER, | 10/1/2006 | $3.65 | 3 |
| A | A4629 | TRACHEOSTOMY CARE KIT FOR ESTABL | 10/1/2006 | $4.61 | 3 |
| A | A4630 | REPLACEMENT BATTERIES, MEDICALLY | 5/1/1997 | NC | 9 |
| A | A4632 | REPLACEMENT BATTERY FOR EXTERNAL | 1/1/2007 | INVALID | N |
| A | A4633 | REPLACEMENT BULB/LAMP FOR ULTRAV | 10/1/2006 | $41.04 | 3 |
| A | A4634 | REPLACEMENT BULB FOR THERAPEUTIC | 4/1/2003 | NC | 9 |
| A | A4635 | UNDERARM PAD, CRUTCH, REPLACEMEN | 10/1/2006 | $5.12 | 3 |
| A | A4636 | REPLACEMENT, HANDGRIP, CANE, CRU | 10/1/2006 | $4.21 | 3 |
| A | A4637 | REPLACEMENT TIP, CANE, CRUTCH, O | 10/1/2006 | $2.13 | 3 |
| A | A4638 | REPLACEMENT BATTERY FOR PATIENT- | 1/1/2004 | NC | 9 |
| A | A4639 | REPLACEMENT PAD FOR INFRARED HEA | 4/1/2003 | NC | 9 |
| A | A4640 | REPLACEMENT PAD FOR USE WITH MED | 10/1/2006 | $53.82 | 3 |
| A | A4649 | SURGICAL SUPPLIES; MISCELLANEOUS | 3/6/1989 | $200.00 | 3 |
| A | A4650 | CENTRIFUGE (INCLUDES CALIBRATED | 4/1/2002 | INVALID | N |
| A | A4651 | CALIBRATED MICROCAPILLARY TUBE, | 1/1/2002 | NC | 9 |
| A | A4652 | MICROCAPILLARY TUBE SEALANT | 1/1/2002 | NC | 9 |
| A | A4653 | PERITONEAL DIALYSIS CATHETER ANC | 4/1/2003 | NC | 9 |
| A | A4655 | NEEDLES AND SYRINGES FOR DIALYSI | 4/1/2002 | INVALID | N |
| A | A4656 | NEEDLE, ANY SIZE, EACH | 1/1/2006 | INVALID | N |
| A | A4657 | SYRINGE, WITH OR WITHOUT NEEDLE, | 1/1/2002 | NC | 9 |
| A | A4660 | SPHYGMOMANOMETER/BLOOD PRESSURE | 1/1/2005 | $25.00 | 3 |
| A | A4663 | BLOOD PRESSURE CUFF ONLY | 10/1/2000 | $22.71 | 3 |
| A | A4670 | AUTOMATIC BLOOD PRESSURE MONITOR | 1/1/2005 | $55.00 | 3 |
| A | A4671 | DISPOSABLE CYCLER SET USED WITH | 1/1/2004 | NC | 9 |
| A | A4672 | DRAINAGE EXTENSION LINE, STERILE | 1/1/2004 | NC | 9 |
| A | A4673 | EXTENSION LINE WITH EASY LOCK CO | 1/1/2004 | NC | 9 |
| A | A4674 | CHEMICALS/ANTISEPTICS SOLUTION U | 1/1/2004 | NC | 9 |
| A | A4680 | ACTIVATED CARBON FILTER FOR HEMO | 4/1/1990 | NC | 9 |
| A | A4690 | DIALYZER (ARTIFICIAL KIDNEYS), A | 4/1/1990 | NC | 9 |
| A | A4700 | STANDARD DIALYSATE SOLUTION, EAC | 4/1/2002 | INVALID | N |
| A | A4705 | BICARBONATE DIALYSATE SOLUTION, | 4/1/2002 | INVALID | N |
| A | A4706 | BICARBONATE CONCENTRATE, SOLUTIO | 1/1/2002 | NC | 9 |
| A | A4707 | BICARBONATE CONCENTRATE, POWDER, | 1/1/2002 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A4708 | ACETATE CONCENTRATE SOLUTION, FO | 1/1/2002 | NC | 9 |
| A | A4709 | ACID CONCENTRATE, SOLUTION, FOR | 1/1/2002 | NC | 9 |
| A | A4712 | WATER, STERILE, FOR INJECTION, P | 4/1/2004 | INVALID | N |
| A | A4772 | BLOOD GLUCOSE TEST STRIPS, FOR D | 1/1/2006 | NC | 9 |
| A | A4773 | OCCULT BLOOD TEST STRIPS, FOR DI | 10/1/2000 | $48.67 | 3 |
| A | A4927 | GLOVES, NON-STERILE, PER 100 | 3/1/2006 | $10.00 | 3 |
| A | A4928 | SURGICAL MASK, PER 20 | 1/1/2002 | NC | 9 |
| A | A4929 | TOURNIQUET FOR DIALYSIS, EACH | 1/1/2002 | NC | 9 |
| A | A4930 | GLOVES,STERILE, PER PAIR | 4/1/2003 | $2.00 | 3 |
| A | A4931 | ORAL THERMOMETER, REUSABLE, ANY | 4/1/2003 | NC | 9 |
| A | A4932 | RECTAL THERMOMETER, REUSABLE, AN | 4/1/2003 | NC | 9 |
| A | A5051 | OSTOMY POUCH, CLOSED; WITH BARRI | 10/1/2006 | $2.07 | 3 |
| A | A5052 | OSTOMY POUCH, CLOSED; WITHOUT BA | 10/1/2006 | $1.49 | 3 |
| A | A5053 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.74 | 3 |
| A | A5054 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.72 | 3 |
| A | A5055 | STOMA CAP | 10/1/2006 | $1.44 | 3 |
| A | A5061 | OSTOMY POUCH, DRAINABLE; WITH BA | 10/1/2006 | $2.62 | 3 |
| A | A5062 | OSTOMY POUCH, DRAINABLE; WITHOUT | 10/1/2006 | $2.09 | 3 |
| A | A5063 | OSTOMY POUCH, DRAINABLE; FOR USE | 10/1/2006 | $2.21 | 3 |
| A | A5064 | POUCH, DRAINABLE; WITH FACEPLATE | 4/1/2002 | INVALID | N |
| A | A5071 | OSTOMY POUCH, URINARY; WITH BARR | 10/1/2006 | $3.77 | 3 |
| A | A5072 | OSTOMY POUCH, URINARY; WITHOUT B | 10/1/2006 | $3.50 | 3 |
| A | A5073 | OSTOMY POUCH, URINARY; FOR USE O | 10/1/2006 | $3.18 | 3 |
| A | A5074 | POUCH, URINARY; WITH FACEPLATE A | 4/1/2002 | INVALID | N |
| A | A5075 | POUCH, URINARY; FOR USE ON FACEP | 4/1/2002 | INVALID | N |
| A | A5081 | CONTINENT DEVICE; PLUG FOR CONTI | 10/1/2006 | $2.81 | 3 |
| A | A5082 | CONTINENT DEVICE; CATHETER FOR C | 10/1/2006 | $10.15 | 3 |
| A | A5093 | OSTOMY ACCESSORY; CONVEX INSERT | 10/1/2006 | $1.66 | 3 |
| A | A5102 | BEDSIDE DRAINAGE BOTTLE, WITH OR | 10/1/2006 | $22.54 | 3 |
| A | A5105 | URINARY SUSPENSORY; WITH LEG BAG | 10/1/2006 | $34.60 | 3 |
| A | A5112 | URINARY LEG BAG; LATEX | 10/1/2006 | $34.57 | 3 |
| A | A5113 | LEG STRAP; LATEX, REPLACEMENT ON | 10/1/2006 | $3.98 | 3 |
| A | A5114 | LEG STRAP; FOAM OR FABRIC, REPLA | 10/1/2006 | $7.59 | 3 |
| A | A5119 | SKIN BARRIER; WIPES OR SWABS, PE | 1/1/2006 | INVALID | N |
| A | A5120 | SKIN BARRIER, WIPES OR SWABS, EA | 10/1/2006 | $0.21 | 3 |
| A | A5121 | SKIN BARRIER; SOLID, 6 X 6 OR EQ | 10/1/2006 | $7.46 | 3 |
| A | A5122 | SKIN BARRIER; SOLID, 8 X 8 OR EQ | 10/1/2006 | $10.92 | 3 |
| A | A5123 | SKIN BARRIER; WITH FLANGE (SOLID | 7/1/2003 | INVALID | N |
| A | A5126 | ADHESIVE OR NON-ADHESIVE, DISK O | 10/1/2006 | $1.12 | 3 |
| A | A5131 | APPLIANCE CLEANER, INCONTINENCE | 10/1/2006 | $13.46 | 3 |
| A | A5200 | PERCUTANEOUS CATHETER/TUBE ANCHO | 10/1/2006 | $11.27 | 3 |
| A | A5500 | FOR DIABETICS ONLY, FITTING (INC | 10/1/2006 | $59.36 | 3 |
| A | A5501 | FOR DIABETICS ONLY, FITTING (INC | 10/1/2006 | $171.85 | 3 |
| A | A5502 | FOR DIABETICS ONLY, MULTIPLE DEN | 4/1/2002 | INVALID | N |
| A | A5503 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| A | A5504 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A5505 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| A | A5506 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| A | A5507 | FOR DIABETICS ONLY, NOT OTHERWIS | 10/1/2006 | $26.40 | 3 |
| A | A5508 | FOR DIABETICS ONLY, DELUXE FEATU | 1/1/2000 | NC | 9 |
| A | A5509 | FOR DIABETICS ONLY, DIRECT FORME | 1/1/2006 | INVALID | N |
| A | A5510 | FOR DIABETICS ONLY, DIRECT FORME | 4/1/2002 | $33.00 | 3 |
| A | A5511 | FOR DIABETICS ONLY, CUSTOM-MOLDE | 1/1/2006 | INVALID | N |
| A | A5512 | FOR DIABETICS ONLY, MULT DENSITY | 10/1/2006 | $24.22 | 3 |
| A | A5513 | FOR DIABETICS ONLY, MULT DENSITY | 10/1/2006 | $36.14 | 3 |
| A | A6000 | NON-CONTACT WOUND WARMING WOUND | 1/1/2002 | NC | 9 |
| A | A6010 | COLLAGEN BASED WOUND FILLER, DRY | 10/1/2006 | $30.96 | 3 |
| A | A6011 | COLLAGEN BASED WOUND FILLER, GEL | 10/1/2006 | $2.28 | 3 |
| A | A6021 | COLLAGEN DRESSING, PAD SIZE 16 S | 10/1/2006 | $21.02 | 3 |
| A | A6022 | COLLAGEN DRESSING, PAD SIZE MORE | 10/1/2006 | $21.02 | 3 |
| A | A6023 | COLLAGEN DRESSING, PAD SIZE MORE | 10/1/2006 | $190.30 | 3 |
| A | A6024 | COLLAGEN DRESSING WOUND FILLER, | 10/1/2006 | $6.19 | 3 |
| A | A6025 | GEL SHEET FOR DERMAL OR EPIDERMA | 10/1/2000 | $3.19 | 3 |
| A | A6154 | WOUND POUCH, EACH | 10/1/2006 | $14.36 | 3 |
| A | A6196 | ALGINATE OR OTHER FIBER GELLING | 10/1/2006 | $7.35 | 3 |
| A | A6197 | ALGINATE OR OTHER FIBER GELLING | 10/1/2006 | $16.44 | 3 |
| A | A6198 | ALGINATE OR OTHER FIBER GELLING | 10/1/2000 | $115.61 | 3 |
| A | A6199 | ALGIANTE OR OTHER FIBER GELLING | 10/1/2006 | $5.29 | 3 |
| A | A6200 | COMPOSITE DRESSING, PAD SIZE 16 | 10/1/2006 | $9.50 | 3 |
| A | A6201 | COMPOSITE DRESSING PAD SIZE MORE | 10/1/2006 | $20.80 | 3 |
| A | A6202 | COMPOSITE DRESSING, PAD SIZE MOR | 10/1/2006 | $34.88 | 3 |
| A | A6203 | COMPOSITE DRESSING, PAD SIZE 16 | 10/1/2006 | $3.35 | 3 |
| A | A6204 | COMPOSITE DRESSING, PAD SIZE MOR | 10/1/2006 | $6.23 | 3 |
| A | A6205 | COMPOSITE DRESSING, PAD SIZE MOR | 10/1/2000 | $4.69 | 3 |
| A | A6206 | CONTACT LAYER, 16 SQ IN OR LESS, | 10/1/2000 | $1.05 | 3 |
| A | A6207 | CONTACT LAYER, MORE THAN 16 BUT | 10/1/2006 | $7.34 | 3 |
| A | A6208 | CONTACT LAYER, MORE THAN 48 SQ I | 10/1/2000 | $3.52 | 3 |
| A | A6209 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $7.48 | 3 |
| A | A6210 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $19.92 | 3 |
| A | A6211 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $29.37 | 3 |
| A | A6212 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $9.70 | 3 |
| A | A6213 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2000 | $15.41 | 3 |
| A | A6214 | FOAM DRESSING, WOUND COVER, PAD | 10/1/2006 | $10.29 | 3 |
| A | A6215 | FOAM DRESSING, WOUND FILLER, PER | 10/1/2000 | $2.39 | 3 |
| A | A6216 | GAUZE, NON-IMPREGNATED, NON-STER | 10/1/2006 | $0.05 | 3 |
| A | A6217 | GAUZE, NON-IMPREGNATED, NON-STER | 10/1/2006 | $0.39 | 3 |
| A | A6218 | GAUZE, NON-IMPREGNATED, NON-STER | 10/1/2000 | $0.62 | 3 |
| A | A6219 | GAUZE, NON-IMPREGNATED, PAD SIZE | 10/1/2006 | $0.95 | 3 |
| A | A6220 | GAUZE, NON-IMPREGNATED, PAD SIZE | 10/1/2006 | $2.58 | 3 |
| A | A6221 | GAUZE, NON-IMPREGNATED, PAD SIZE | 10/1/2000 | $6.17 | 3 |
| A | A6222 | GAUZE, IMPREGNATED W/OTHER THAN | 10/1/2006 | $2.13 | 3 |
| A | A6223 | GAUZE, IMPREGNATED W/OTHER THAN | 10/1/2006 | $2.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A6224 | GAUZE, IMPREGNATED W/OTHER THAN | 10/1/2006 | $3.61 | 3 |
| A | A6228 | GAUZE, IMPREGNATED, WATER OR NOR | 10/1/2000 | NC | 9 |
| A | A6229 | GAUZE, IMPREGNATED, WATER OR NOR | 10/1/2000 | NC | 9 |
| A | A6230 | GAUZE, IMPREGNATED, WATER OR NOR | 10/1/2000 | NC | 9 |
| A | A6231 | GAUZE, IMPREGNATED, HYDROGEL, FO | 10/1/2006 | $4.68 | 3 |
| A | A6232 | GAUZE, IMPREGNATED, HYDROGEL, FO | 10/1/2006 | $6.88 | 3 |
| A | A6233 | GAUZE, IMPREGNATED, HYDROGEL FOR | 10/1/2006 | $19.19 | 3 |
| A | A6234 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $6.54 | 3 |
| A | A6235 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $16.82 | 3 |
| A | A6236 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $27.25 | 3 |
| A | A6237 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $7.91 | 3 |
| A | A6238 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2006 | $22.79 | 3 |
| A | A6239 | HYDROCOLLOID DRESSING, WOUND COV | 10/1/2000 | $18.74 | 3 |
| A | A6240 | HYDROCOLLOID DRESSING, WOUND FIL | 10/1/2006 | $12.24 | 3 |
| A | A6241 | HYDROCOLLOID DRESSING, WOUND FIL | 10/1/2006 | $2.57 | 3 |
| A | A6242 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $6.07 | 3 |
| A | A6243 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $12.31 | 3 |
| A | A6244 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $39.28 | 3 |
| A | A6245 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $7.27 | 3 |
| A | A6246 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $9.92 | 3 |
| A | A6247 | HYDROGEL DRESSING, WOUND COVER, | 10/1/2006 | $23.78 | 3 |
| A | A6248 | HYDROGEL DRESSING, WOUND FILLER, | 10/1/2006 | $16.24 | 3 |
| A | A6250 | SKIN SEALANTS, PROTECTANTS, MOIS | 3/1/1997 | NC | 9 |
| A | A6251 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $1.99 | 3 |
| A | A6252 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $3.25 | 3 |
| A | A6253 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $6.34 | 3 |
| A | A6254 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $1.21 | 3 |
| A | A6255 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2006 | $3.03 | 3 |
| A | A6256 | SPECIALTY ABSORPTIVE DRESSING, W | 10/1/2000 | $8.22 | 3 |
| A | A6257 | TRANSPARENT FILM, 16 SQ IN OR LE | 10/1/2006 | $1.53 | 3 |
| A | A6258 | TRANSPARENT FILM, MORE THAN 16 B | 10/1/2006 | $4.30 | 3 |
| A | A6259 | TRANSPARENT FILM, MORE THAN 48 S | 10/1/2006 | $10.94 | 3 |
| A | A6260 | WOUND CLEANSERS, ANY TYPE, ANY S | 10/1/2000 | NC | 9 |
| A | A6261 | WOUND FILLER, GEL/PASTE, PER FLU | 10/1/2000 | $30.28 | 3 |
| A | A6262 | WOUND FILLER, DRY FORM, PER GRAM | 10/1/2000 | $1.08 | 3 |
| A | A6263 | GAUZE, ELASTIC, NON-STERILE, ALL | 7/1/2003 | INVALID | N |
| A | A6264 | GAUZE, NON-ELASTIC, NON-STERILE, | 7/1/2003 | INVALID | N |
| A | A6265 | TAPE, ALL TYPES, PER 18 SQ INCHE | 7/1/2003 | INVALID | N |
| A | A6266 | GAUZE, IMPREGNATED, OTHER THAN W | 10/1/2006 | $1.92 | 3 |
| A | A6402 | GAUZE, NON-IMPREGNATED, STERILE, | 10/1/2006 | $0.12 | 3 |
| A | A6403 | GAUZE, NON-IMPREGNATED, STERILE, | 10/1/2006 | $0.43 | 3 |
| A | A6404 | GAUZE, NON-IMPREGNATED, STERILE, | 10/1/2000 | $0.64 | 3 |
| A | A6405 | GAUZE, ELASTIC, STERILE, ALL TYP | 7/1/2003 | INVALID | N |
| A | A6406 | GAUZE, NON-ELASTIC, STERILE, ALL | 7/1/2003 | INVALID | N |
| A | A6407 | PACKING STRIPS, NON-IMPREGNATED, | 10/1/2006 | $1.88 | 3 |
| A | A6410 | EYE PAD, STERILE, EACH | 10/1/2006 | $0.39 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A6411 | EYE PAD,NON-STERILE, EACH | 10/1/2006 | $0.27 | 3 |
| A | A6412 | EYE PATCH, OCCLUSIVE, EACH | 4/1/2003 | $0.50 | 3 |
| A | A6421 | PADDING BANDAGE, NON-ELASTIC, NO | 4/1/2004 | INVALID | N |
| A | A6422 | CONFORMING BANDAGE, NON-ELASTIC, | 4/1/2004 | INVALID | N |
| A | A6424 | CONFORMING BANDAGE, NON-ELASTIC, | 4/1/2004 | INVALID | N |
| A | A6426 | CONFORMING BANDAGE, NON-ELASTIC, | 4/1/2004 | INVALID | N |
| A | A6428 | CONFORMING BANDAGE, NON-ELASTIC, | 4/1/2004 | INVALID | N |
| A | A6430 | LIGHT COMPRESSION BANDAGE, ELAST | 4/1/2004 | INVALID | N |
| A | A6432 | LIGHT COMPRESSIONBANDAGE, ELASTI | 4/1/2004 | INVALID | N |
| A | A6434 | MODERATE COMPRESSION BANDAGE, EL | 4/1/2004 | INVALID | N |
| A | A6436 | HIGH COMPRESSION BANDAGE, ELASTI | 4/1/2004 | INVALID | N |
| A | A6438 | SELF-ADHERENT BANDAGE, ELASTIC, | 4/1/2004 | INVALID | N |
| A | A6440 | ZINC PASTE IMPREGNATED BANDAGE, | 4/1/2004 | INVALID | N |
| A | A6441 | PADDING BANDAGE, NON-ELASTIC, NO | 10/1/2006 | $0.67 | 3 |
| A | A6442 | CONFORMING BANDAGE, NON-ELASTIC, | 10/1/2006 | $0.17 | 3 |
| A | A6443 | CONFORMING BANDAGE, NON-ELASTIC, | 10/1/2006 | $0.29 | 3 |
| A | A6444 | CONFORMING BANDAGE, NON-ELASTIC, | 10/1/2006 | $0.56 | 3 |
| A | A6445 | CONFORMING BANDAGE, NON-ELASTIC, | 10/1/2006 | $0.32 | 3 |
| A | A6446 | CONFORMING BANDAGE, NON-ELASTIC, | 10/1/2006 | $0.41 | 3 |
| A | A6447 | CONFORMING BANDAGE, NON-ELASTIC, | 10/1/2006 | $0.67 | 3 |
| A | A6448 | LIGHT COMPRESSION BANDAGE, ELAST | 10/1/2006 | $1.16 | 3 |
| A | A6449 | LIGHT COMPRESSION BANDAGE, ELAST | 10/1/2006 | $1.75 | 3 |
| A | A6450 | LIGHT COMPRESSION BANDAGE, ELAST | 1/1/2004 | NC | 9 |
| A | A6451 | MODERATE COMPRESSION BANDAGE, EL | 1/1/2004 | NC | 9 |
| A | A6452 | HIGH COMPRESSION BANDAGE, ELASTI | 10/1/2006 | $5.91 | 3 |
| A | A6453 | SELF-ADHERENT BANDAGE, ELASTIC, | 10/1/2006 | $0.61 | 3 |
| A | A6454 | SELF-ADHERENT BANDAGE, ELASTIC, | 10/1/2006 | $0.77 | 3 |
| A | A6455 | SELF-ADHERENT BANDAGE, ELASTIC, | 10/1/2006 | $1.39 | 3 |
| A | A6456 | ZINC PASTE IMPREGNATED BANDAGE, | 10/1/2006 | $1.28 | 3 |
| A | A6457 | TUBULAR DRESSING WITH OR WITHOUT | 10/1/2006 | $1.14 | 3 |
| A | A6501 | COMPRESSION BURN GARMENT, BODYSU | 10/1/2005 | $516.00 | 3 |
| A | A6502 | COMPRESSION BURN GARMENT, CHIN S | 10/1/2005 | $103.20 | 3 |
| A | A6503 | COMPRESSION BURN GARMENT, FACIAL | 10/1/2005 | $103.20 | 3 |
| A | A6504 | COMPRESSION BURN GARMENT, GLOVE | 10/1/2005 | $72.24 | 3 |
| A | A6505 | COMPRESSION BURN GARMENT, GLOVE | 10/1/2005 | $123.84 | 3 |
| A | A6506 | COMPRESSION BURN GARMENT, GLOVE | 10/1/2005 | $103.20 | 3 |
| A | A6507 | COMPRESSION BURN GARMENT, FOOT T | 10/1/2005 | $103.20 | 3 |
| A | A6508 | COMPRESSION BURN GARMENT, FOOT T | 10/1/2005 | $46.44 | 3 |
| A | A6509 | COMPRESSION BURN GARMENT, UPPER | 10/1/2005 | $309.60 | 3 |
| A | A6510 | COMPRESSION BURN GARMENT, TRUNK, | 10/1/2005 | $309.60 | 3 |
| A | A6511 | COMPRESSION BURN GARMENT, LOWER | 10/1/2005 | $309.60 | 3 |
| A | A6512 | COMPRESSION BURN GARMENT, NOT OT | 4/1/2003 | $800.00 | 3 |
| A | A6513 | COMPRESSION BURN MASK, FACE AND/ | 1/1/2006 | $0.01 | 3 |
| A | A6530 | GRADIENT COMPRESSION STOCKING, B | 1/1/2006 | $28.93 | 3 |
| A | A6531 | GRADIENT COMPRESSION STOCKING, B | 10/1/2006 | $29.94 | 3 |
| A | A6532 | GRADIENT COMPRESSION STOCKING, B | 10/1/2006 | $32.75 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A6533 | GRADIENT COMPRESSION STOCKING, T | 1/1/2006 | $37.97 | 3 |
| A | A6534 | GRADIENT COMPRESSION STOCKING, T | 1/1/2006 | $37.97 | 3 |
| A | A6535 | GRADIENT COMPRESSION STOCKING, T | 1/1/2006 | $45.20 | 3 |
| A | A6536 | GRADIENT COMPRESSION STOCKING, F | 1/1/2006 | $42.49 | 3 |
| A | A6537 | GRADIENT COMPRESSION STOCKING, F | 1/1/2006 | $42.49 | 3 |
| A | A6538 | GRADIENT COMPRESSION STOCKING, F | 1/1/2006 | $54.25 | 3 |
| A | A6539 | GRADIENT COMPRESSION STOCKING, W | 1/1/2006 | $113.01 | 3 |
| A | A6540 | GRADIENT COMPRESSION STOCKING, W | 1/1/2006 | $150.69 | 3 |
| A | A6541 | GRADIENT COMPRESSION STOCKING, W | 1/1/2006 | $162.75 | 3 |
| A | A6542 | GRADIENT COMPRESSION STOCKING, C | 1/1/2006 | $67.31 | 3 |
| A | A6543 | GRADIENT COMPRESSION STOCKING, L | 1/1/2006 | $67.31 | 3 |
| A | A6544 | GRADIENT COMPRESSION STOCKING, G | 1/1/2006 | $22.61 | 3 |
| A | A6549 | GRADIENT COMPRESSION STOCKING, N | 1/1/2006 | $200.92 | 3 |
| A | A6550 | WOUND CARE SET, FOR NEGATIVE PRE | 10/1/2006 | $27.42 | 3 |
| A | A6551 | CANISTER SET FOR NEGATIVE PRESSU | 1/1/2006 | INVALID | N |
| A | A7000 | CANISTER, DISPOSABLE, USED WITH | 10/1/2006 | $9.54 | 3 |
| A | A7001 | CANISTER, NON-DISPOSABLE, USED W | 10/1/2006 | $33.08 | 3 |
| A | A7002 | TUBING, USED WITH SUCTION PUMP, | 10/1/2006 | $3.83 | 3 |
| A | A7003 | ADMINISTRATION SET, WITH SMALL V | 10/1/2006 | $2.74 | 3 |
| A | A7004 | SMALL VOLUME NONFILTERED PNEUMAT | 10/1/2006 | $1.80 | 3 |
| A | A7005 | ADMINISTRATION SET, WITH SMALL V | 10/1/2006 | $30.83 | 3 |
| A | A7006 | ADMINISTRATION SET, WITH SMALL V | 10/1/2006 | $9.54 | 3 |
| A | A7007 | LARGE VOLUME NEBULIZER, DISPOSAB | 1/1/2000 | NC | 9 |
| A | A7008 | LARGE VOLUME NEBULIZER, DISPOSAB | 1/1/2000 | NC | 9 |
| A | A7009 | RESERVOIR BOTTLE, NON-DISPOSABLE | 10/1/2001 | NC | 9 |
| A | A7010 | CORRUGATED TUBING, DISPOSABLE, U | 10/1/2006 | $23.59 | 3 |
| A | A7011 | CORRUGATED TUBING, NON-DISPOSABL | 10/1/2000 | $1.21 | 3 |
| A | A7012 | WATER COLLECTION DEVICE, USED WI | 10/1/2006 | $3.78 | 3 |
| A | A7013 | FILTER, DISPOSABLE, USED WITH AE | 10/1/2006 | $0.83 | 3 |
| A | A7014 | FILTER, NON-DISPOSABLE, USED WIT | 10/1/2006 | $4.49 | 3 |
| A | A7015 | AEROSOL MASK, USED WITH DME NEBU | 10/1/2006 | $1.88 | 3 |
| A | A7016 | DOME AND MOUTHPIECE, USED WITH S | 7/1/2006 | NC | 9 |
| A | A7017 | NEBULIZER, DURABLE, GLASS OR AUT | 10/1/2006 | $134.04 | 3 |
| A | A7018 | WATER, DISTILLED, USED WITH LARG | 10/1/2006 | $0.38 | 3 |
| A | A7019 | SALINE SOLUTION, PER 10 ML, METE | 4/1/2004 | INVALID | N |
| A | A7020 | STERILE WATER OR STERILE SALINE, | 4/1/2004 | INVALID | N |
| A | A7025 | HIGH FREQUENCY CHEST WALL OSCILL | 4/1/2003 | NC | 9 |
| A | A7026 | HIGH FREQUENCY CHEST WALL OSCILL | 4/1/2003 | NC | 9 |
| A | A7030 | FULL FACE MASK USED WITH POSITIV | 10/1/2006 | $188.64 | 3 |
| A | A7031 | FACE MASK INTERFACE, REPLACEMENT | 10/1/2006 | $69.77 | 3 |
| A | A7032 | CUSHION FOR USE ON NASALMASK INT | 10/1/2006 | $40.53 | 3 |
| A | A7033 | PILLOW FOR USE ON NASAL CANNULA | 10/1/2006 | $25.09 | 3 |
| A | A7034 | NASAL INTERFACE (MASK OR CANNULA | 10/1/2006 | $81.88 | 3 |
| A | A7035 | HEADGEAR USED WITH POSITIVE AIRW | 10/1/2006 | $39.75 | 3 |
| A | A7036 | CHINSTRAP USED WITH POSITIVE AIR | 10/1/2006 | $18.20 | 3 |
| A | A7037 | TUBING USED WITH POSITIVE AIRWAY | 10/1/2006 | $41.02 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | A7038 | FILTER, DISPOSABLE, USED WITH PO | 10/1/2006 | $5.39 | 3 |
| A | A7039 | FILTER,NON DISPOSABLE, USED WITH | 10/1/2006 | $15.33 | 3 |
| A | A7040 | ONE WAY CHEST DRAIN VALVE | 10/1/2006 | $36.86 | 3 |
| A | A7041 | WATER SEAL DRAINAGE CONTAINER AN | 10/1/2006 | $69.26 | 3 |
| A | A7042 | IMPLANTED PLEURAL CATHETER, EACH | 4/1/2003 | NC | 9 |
| A | A7043 | VACUUM DRAINAGE BOTTLE AND TUBIN | 4/1/2003 | NC | 9 |
| A | A7044 | ORAL INTERFACE USED WITH POSITIV | 10/1/2006 | $120.91 | 3 |
| A | A7045 | EXHALATION PORT WITH OR WITHOUT | 10/1/2006 | $19.47 | 3 |
| A | A7046 | WATER CHAMBER FOR HUMIDIFIER, US | 10/1/2006 | $19.51 | 3 |
| A | A7501 | TRACHEOSTOMA VALVE, INCLUDING DI | 10/1/2006 | $105.03 | 3 |
| A | A7502 | REPLACEMENT DIAPHRAGM/FACEPLATE | 10/1/2006 | $49.91 | 3 |
| A | A7503 | FILTER HOLDER OR FILTER CAP, REU | 10/1/2006 | $11.33 | 3 |
| A | A7504 | FILTER FOR USE IN A TRACHEOSTOMA | 10/1/2006 | $0.67 | 3 |
| A | A7505 | HOUSING, REUSABLE W/OUT ADHESIVE | 10/1/2006 | $4.68 | 3 |
| A | A7506 | ADHESIVE DISC FOR USE IN A HEAT | 10/1/2006 | $0.33 | 3 |
| A | A7507 | FILTER HOLDER AND INTEGRATED FIL | 10/1/2006 | $2.49 | 3 |
| A | A7508 | HOUSING AND INTEGRATED ADHESIVE, | 10/1/2006 | $2.87 | 3 |
| A | A7509 | FILTER HOLDER AND INTEGRATED FIL | 10/1/2006 | $1.41 | 3 |
| A | A7520 | TRACHEOSTOMY/LARYNGECTOMY TUBE, | 10/1/2006 | $47.48 | 3 |
| A | A7521 | TRACHEOSTOMY/LARYNGECTOMY TUBE, | 10/1/2006 | $47.05 | 3 |
| A | A7522 | TRACHEOSTOMY/LARYNGECTOMY TUBE, | 10/1/2006 | $45.16 | 3 |
| A | A7523 | TRACHEOSTOMY SHOWER PROTECTOR, E | 1/1/2004 | NC | 9 |
| A | A7524 | TRACHEOSTOMA STENT/STUD/BUTTON, | 10/1/2006 | $77.40 | 3 |
| A | A7525 | TRACHEOSTOMY MASK, EACH | 10/1/2006 | $1.48 | 3 |
| A | A7526 | TRACHEOSTOMY TUBE COLLAR/HOLDER, | 10/1/2006 | $3.37 | 3 |
| A | A7527 | TRACHEOSTOMY/LARYNGECTOMY TUBE P | 10/1/2006 | $3.58 | 3 |
| A | A8000 | HELMET, PROTECTIVE, SOFT, PREFAB | 1/1/2007 | $153.35 | 3 |
| A | A8001 | HELMET, PROTECTIVE, HARD, PREFAB | 1/1/2007 | $153.35 | 3 |
| A | A9150 | NON-PRESCRIPTION DRUGS | 3/1/1987 | NC | 9 |
| A | A9270 | NON-COVERED ITEM OR SERVICE | 1/1/1991 | NC | 9 |
| A | A9275 | HOME GLUCOSE DISPOSABLE MONITOR, | 1/1/2006 | $0.01 | 3 |
| A | A9280 | ALERT OR ALARM DEVICE, NOT OTHER | 1/1/2004 | NC | 9 |
| A | A9281 | REACHING/GRABBING DEVICE, ANY TY | 1/1/2006 | NC | 9 |
| A | A9282 | WIG, ANY TYPE, EACH | 1/1/2006 | NC | 9 |
| A | A9300 | EXERCISE EQUIPMENT | 4/1/1993 | NC | 9 |
| A | A9699 | RADIOPHARMACEUTICAL, THERAPEUTIC | 4/1/2003 | NC | 9 |
| A | A9900 | MISCELLANEOUS DME SUPPLY, ACCESS | 10/1/2005 | NC | 9 |
| A | A9901 | DME DELIVERY, SET UP, AND/OR DIS | 1/1/2000 | NC | 9 |
| A | A9999 | MISCELLANEOUS DME SUPPLY OR ACCE | 1/1/2004 | NC | 9 |
| A | B4084 | GASTROSTOMY/JEJUNOSTOMY TUBING - | 4/1/2002 | INVALID | N |
| A | B4085 | GASTROSTOMY TUBE, SILICONE WITH | 4/1/2002 | INVALID | N |
| A | B4156 | ENTERAL FORMULAE; CATEGORY VI; S | 1/1/2005 | INVALID | N |
| A | B4184 | PARENTERAL NUTRITION SOLUTION LI | 1/1/2006 | INVALID | N |
| A | B4186 | PARENTERAL NUTRITION SOLUTION LI | 1/1/2006 | INVALID | N |
| A | DMA68 | BRIEF, DISPOSABLE, YOUTH - EACH | 7/1/2003 | INVALID | N |
| A | DMA69 | BRIEF, DISPOSABLE, ADULT SMALL - | 7/1/2003 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | DMA70 | BRIEF, DISPOSABLE, ADULT MEDIUM | 7/1/2003 | INVALID | N |
| A | DMA71 | BRIEF, DISPOSABLE, ADULT LARGE - | 7/1/2003 | INVALID | N |
| A | DMA72 | BRIEF, DISPOSABLE, ADULT EXTRA-L | 7/1/2003 | INVALID | N |
| A | DMA73 | BELTLESS UNDERGARMENT, DISPOSABL | 7/1/2003 | INVALID | N |
| A | DMA74 | BELTED UNDERGARMENT, DISPOSABLE, | 7/1/2003 | INVALID | N |
| A | DMA75 | SLIP-ON UNDERGARMENT, DISPOSABLE | 7/1/2003 | INVALID | N |
| A | DMA77 | PROTECTIVE UNDERWEAR, WASHABLE, | 7/1/2003 | INVALID | N |
| A | E0100 | CANE, INCLUDES CANES OF ALL MATE | 10/1/2006 | $20.72 | 3 |
| A | E0105 | CANE, QUAD OR THREE PRONG, INCLU | 10/1/2006 | $48.72 | 3 |
| A | E0110 | CRUTCHES, FOREARM, INC CRUTCHES | 10/1/2006 | $77.59 | 3 |
| A | E0111 | CRUTCH, FOREARM, INC CRUTCHES OF | 10/1/2006 | $53.26 | 3 |
| A | E0112 | CRUTCHES, UNDERARM, WOOD, ADJUST | 10/1/2006 | $37.00 | 3 |
| A | E0113 | CRUTCH, UNDERARM, WOOD, ADJUSTAB | 10/1/2006 | $21.13 | 3 |
| A | E0114 | CRUTCHES, UNDERARM, OTHER THAN W | 10/1/2006 | $47.19 | 3 |
| A | E0116 | CRUTCH, UNDERARM, OTHER THAN WOO | 10/1/2006 | $27.74 | 3 |
| A | E0117 | CRUTCH, UNDERARM, ARTICULATING, | 10/1/2006 | $192.71 | 3 |
| A | E0118 | CRUTCH SUBSTITUTE, LOWER LEG PLA | 1/1/2004 | NC | 9 |
| A | E0130 | WALKER, RIGID (PICKUP), ADJUSTAB | 10/1/2006 | $70.23 | 3 |
| A | E0135 | WALKER, FOLDING (PICKUP), ADJUST | 10/1/2006 | $83.33 | 3 |
| A | E0140 | WALKER, WITH TRUNK SUPPORT, ADJU | 10/1/2006 | $360.71 | 3 |
| A | E0141 | WALKER, RIGID, WHEELED, ADJUSTAB | 10/1/2006 | $115.29 | 3 |
| A | E0142 | RIGID WALKER, WHEELED, WITH SEAT | 4/1/2004 | INVALID | N |
| A | E0143 | WALKER, FOLDING, WHEELED, ADJUST | 10/1/2006 | $120.23 | 3 |
| A | E0144 | WALKER, ENCLOSED, FOUR SIDED FRA | 10/1/2006 | $318.45 | 3 |
| A | E0145 | WALKER, WHEELED, WITH SEAT AND C | 4/1/2004 | INVALID | N |
| A | E0146 | FOLDING WALKER, WHEELED, WITH SE | 4/1/2004 | INVALID | N |
| A | E0147 | WALKER, HEAVY DUTY, MULTIPLE BRA | 10/1/2006 | $574.81 | 3 |
| A | E0148 | WALKER, HEAVY DUTY, WITHOUT WHEE | 10/1/2006 | $127.05 | 3 |
| A | E0149 | WALKER, HEAVY DUTY, WHEELED, RIG | 10/1/2006 | $223.20 | 3 |
| A | E0153 | PLATFORM ATTACHMENT, FOREARM, CR | 10/1/2006 | $69.38 | 3 |
| A | E0154 | PLATFORM ATTACHMENT, WALKER, EAC | 10/1/2006 | $70.51 | 3 |
| A | E0155 | WHEEL ATTACHMENT, RIGID PICK-UP | 10/1/2006 | $29.62 | 3 |
| A | E0156 | SEAT ATTACHMENT, WALKER | 10/1/2006 | $22.47 | 3 |
| A | E0157 | CRUTCH ATTACHMENT, WALKER, EACH | 10/1/2006 | $81.92 | 3 |
| A | E0158 | LEG EXTENSIONS FOR WALKER, PER S | 10/1/2006 | $31.14 | 3 |
| A | E0159 | BRAKE ATTACHMENT FOR WHEELED WAL | 10/1/2006 | $17.87 | 3 |
| A | E0160 | SITZ TYPE BATH OR EQUIPMENT, POR | 10/1/2006 | $33.06 | 3 |
| A | E0161 | SITZ TYPE BATH OR EQUIPMENT, POR | 10/1/2006 | $26.23 | 3 |
| A | E0162 | SITZ BATH CHAIR | 10/1/2006 | $145.70 | 3 |
| A | E0163 | COMMODE CHAIR, STATIONARY, WITH | 10/1/2006 | $106.52 | 3 |
| A | E0164 | COMMODE CHAIR, MOBILE, WITH FIXE | 1/1/2007 | INVALID | N |
| A | E0165 | COMMODE CHAIR, STATIONARY, WITH | 10/1/2005 | $249.27 | 3 |
| A | E0166 | COMMODE CHAIR, MOBILE, WITH DETA | 1/1/2007 | INVALID | N |
| A | E0167 | PAIL OR PAN FOR USE WITH COMMODE | 10/1/2006 | $11.89 | 3 |
| A | E0168 | COMMODE CHAIR, EXTRA WIDE AND/OR | 10/1/2006 | $150.92 | 3 |
| A | E0169 | COMMODE CHAIR WITH SEAT LIFT MEC | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E0172 | SEAT LIFT MECHANISM PLACED OVER | 1/1/2006 | NC | 9 |
| A | E0175 | FOOT REST, FOR USE WITH COMMODE | 3/1/1995 | NC | 9 |
| A | E0176 | AIR PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| A | E0177 | WATER PRESSURE PAD OR CUSHION, N | 1/1/2005 | INVALID | N |
| A | E0178 | GEL PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| A | E0179 | DRY PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| A | E0180 | PRESSURE PAD, ALTERNATING WITH P | 1/1/2007 | INVALID | N |
| A | E0181 | PRESSURE PAD, ALTERNATING WITH P | 12/1/2002 | $344.55 | 3 |
| A | E0182 | PUMP FOR ALTERNATING PRESSURE PA | 12/1/2002 | $374.70 | 3 |
| A | E0184 | DRY PRESSURE MATTRESS | 10/1/2006 | $178.42 | 3 |
| A | E0185 | GEL OR GEL-LIKE PRESSURE PAD FOR | 10/1/2006 | $319.86 | 3 |
| A | E0186 | AIR PRESSURE MATTRESS | 10/1/2005 | $299.69 | 3 |
| A | E0187 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 10/1/2005 | $342.73 | 3 |
| A | E0188 | SYNTHETIC SHEEPSKIN PAD | 10/1/2006 | $22.66 | 3 |
| A | E0189 | LAMBSWOOL SHEEPSKIN PAD, ANY SIZ | 10/1/2006 | $42.58 | 3 |
| A | E0190 | POSITIONING CUSHION/PILLOW/WEDGE | 1/1/2004 | NC | 9 |
| A | E0191 | HEEL OR ELBOW PROTECTOR, EACH | 10/1/2006 | $8.49 | 3 |
| A | E0192 | LOW PRESSURE AND POSITIONING EQU | 1/1/2005 | INVALID | N |
| A | E0196 | GEL PRESSURE MATTRESS | 10/1/2005 | $479.73 | 3 |
| A | E0197 | AIR PRESSURE PAD FOR MATTRESS, S | 10/1/2006 | $221.58 | 3 |
| A | E0198 | WATER PRESSURE PAD FOR MATTRESS, | 10/1/2006 | $221.58 | 3 |
| A | E0199 | DRY PRESSURE PAD FOR MATTRESS, S | 10/1/2006 | $27.24 | 3 |
| A | E0200 | HEAT LAMP, WITHOUT STAND (TABLE | 10/1/2006 | $79.28 | 3 |
| A | E0203 | THERAPEUTIC LIGHTBOX, MINIMUM 10 | 4/1/2003 | NC | 9 |
| A | E0205 | HEAT LAMP, WITH STAND, INCLUDES | 10/1/2006 | $164.95 | 3 |
| A | E0210 | ELECTRIC HEAT PAD, STANDARD | 10/1/2006 | $30.62 | 3 |
| A | E0215 | ELECTRIC HEAT PAD, MOIST | 10/1/2006 | $60.21 | 3 |
| A | E0217 | WATER CIRCULATING HEAT PAD WITH | 10/1/2006 | $496.47 | 3 |
| A | E0218 | WATER CIRCULATING COLD PAD WITH | 1/1/1997 | NC | 9 |
| A | E0220 | HOT WATER BOTTLE | 10/1/2006 | $7.20 | 3 |
| A | E0221 | INFRARED HEATING PAD SYSTEM | 1/1/2002 | NC | 9 |
| A | E0225 | HYDROCOLLATOR UNIT, INCLUDES PAD | 1/1/1995 | NC | 9 |
| A | E0230 | ICE CAP OR COLLAR | 10/1/2006 | $8.48 | 3 |
| A | E0231 | NON-CONTACT WOUND WARMING DEVICE | 1/1/2002 | NC | 9 |
| A | E0232 | WARMING CARD FOR USE WITH THE NO | 1/1/2002 | NC | 9 |
| A | E0235 | PARAFFIN BATH UNIT, PORTABLE (SE | 10/1/2005 | $254.80 | 3 |
| A | E0236 | PUMP FOR WATER CIRCULATING PAD | 10/1/2005 | $555.42 | 3 |
| A | E0238 | NON-ELECTRIC HEAT PAD, MOIST | 10/1/2006 | $27.03 | 3 |
| A | E0239 | HYDROCOLLATOR UNIT, PORTABLE | 1/1/1995 | NC | 9 |
| A | E0240 | BATH/SHOWER CHAIR, WITH OR WITHO | 10/1/2005 | $154.80 | 3 |
| A | E0241 | BATHTUB WALL RAIL, EACH | 10/1/2005 | $25.68 | 3 |
| A | E0242 | BATHTUB RAIL, FLOOR BASE | 10/1/2005 | $47.44 | 3 |
| A | E0243 | TOILET RAIL, EACH | 10/1/2005 | $27.91 | 3 |
| A | E0244 | RAISED TOILET SEAT | 10/1/2005 | $22.32 | 3 |
| A | E0245 | TUB STOOL OR BENCH | 10/1/2005 | $129.00 | 3 |
| A | E0246 | TRANSFER TUB RAIL ATTACHMENT | 10/1/2005 | $47.44 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E0247 | TRANSFER BENCH FOR TUB OR TOILET | 10/1/2005 | $129.00 | 3 |
| A | E0248 | TRANSFER BENCH, HEAVY DUTY, FOR | 10/1/2005 | $154.80 | 3 |
| A | E0249 | PAD FOR WATER CIRCULATING HEAT U | 10/1/2006 | $84.66 | 3 |
| A | E0250 | HOSPITAL BED, FIXED HEIGHT, WITH | 10/1/2005 | $1,325.24 | 3 |
| A | E0251 | HOSPITAL BED, FIXED HEIGHT, WITH | 10/1/2005 | $929.73 | 3 |
| A | E0255 | HOSPITAL BED, VARIABLE HEIGHT, H | 10/1/2005 | $1,734.53 | 3 |
| A | E0256 | HOSPITAL BED, VARIABLE HEIGHT, H | 10/1/2005 | $1,230.66 | 3 |
| A | E0260 | HOSPITAL BED, SEMI-ELECTRIC (HEA | 10/1/2005 | $2,479.43 | 3 |
| A | E0261 | HOSPITAL BED, SEMI-ELECTRIC (HEA | 10/1/2005 | $2,022.00 | 3 |
| A | E0270 | HOSPITAL BED, INSTITUTIONAL TYPE | 3/1/1995 | NC | 9 |
| A | E0271 | MATTRESS, INNER SPRING | 10/1/2006 | $222.03 | 3 |
| A | E0272 | MATTRESS, FOAM RUBBER | 10/1/2006 | $172.01 | 3 |
| A | E0273 | BED BOARD | 4/1/1988 | NC | 9 |
| A | E0274 | OVER-BED TABLE | 4/1/1988 | NC | 9 |
| A | E0275 | BED PAN, STANDARD, METAL OR PLAS | 10/1/2006 | $15.31 | 3 |
| A | E0276 | BED PAN, FRACTURE, METAL OR PLAS | 10/1/2006 | $13.22 | 3 |
| A | E0280 | BED CRADLE, ANY TYPE | 3/1/1987 | NC | 9 |
| A | E0290 | HOSPITAL BED, FIXED HEIGHT, WITH | 10/1/2005 | $938.09 | 3 |
| A | E0291 | HOSPITAL BED, FIXED HEIGHT, WITH | 10/1/2005 | $801.71 | 3 |
| A | E0292 | HOSPITAL BED, VARIABLE HEIGHT, H | 10/1/2005 | $1,240.88 | 3 |
| A | E0293 | HOSPITAL BED, VARIABLE HEIGHT, H | 10/1/2005 | $1,055.89 | 3 |
| A | E0294 | HOSPITAL BED, SEMI-ELECTRIC (HEA | 10/1/2005 | $1,929.12 | 3 |
| A | E0295 | HOSPITAL BED, SEMI-ELECTRIC (HEA | 10/1/2005 | $1,880.36 | 3 |
| A | E0298 | HOSPITAL BED, HEAVY DUTY, EXTRA | 4/1/2002 | INVALID | N |
| A | E0300 | PEDIATRIC CRIB, HOSPITAL GRADE, | 1/1/2004 | NC | 9 |
| A | E0301 | HOSPITAL BED, HEAVY DUTY, EXTRA | 10/1/2005 | $4,139.01 | 3 |
| A | E0302 | HOSPITAL BED, EXTRA HEAVY DUTY, | 10/1/2005 | $10,938.28 | 3 |
| A | E0303 | HOSPITAL BED, HEAVY DUTY, EXTRA | 10/1/2005 | $4,488.27 | 3 |
| A | E0304 | HOSPITAL BED, EXTRA HEAVY DUTY, | 10/1/2005 | $12,187.09 | 3 |
| A | E0305 | BED SIDE RAILS, HALF LENGTH | 10/1/2005 | $223.22 | 3 |
| A | E0310 | BED SIDE RAILS, FULL LENGTH | 10/1/2006 | $194.14 | 3 |
| A | E0315 | BED ACCESSORY: BOARD, TABLE, OR | 3/1/1991 | NC | 9 |
| A | E0325 | URINAL, MALE, JUG-TYPE, ANY MATE | 10/1/2006 | $10.11 | 3 |
| A | E0326 | URINAL, FEMALE, JUG-TYPE, ANY MA | 10/1/2006 | $8.93 | 3 |
| A | E0350 | CONTROL UNIT FOR ELECTRONIC BOWE | 1/1/1995 | NC | 9 |
| A | E0352 | DISPOSABLE PACK FOR USE WITH THE | 1/1/1995 | NC | 9 |
| A | E0370 | AIR PRESSURE ELEVATOR FOR HEEL | 10/1/2005 | $23.62 | 3 |
| A | E0425 | STATIONARY COMPRESSED GAS SYSTEM | 10/1/2005 | $1,032.00 | 3 |
| A | E0430 | PORTABLE GASEOUS OXYGEN SYSTEM, | 10/1/2005 | $1,032.00 | 3 |
| A | E0435 | PORTABLE LIQUID OXYGEN SYSTEM, P | 10/1/2005 | $1,032.00 | 3 |
| A | E0440 | STATIONARY LIQ OXYGEN SYSTEM, PU | 10/1/2005 | $1,032.00 | 3 |
| A | E0441 | OXYGEN CONTENTS, GASEOUS, ONE MO | 1/1/2007 | $77.45 | 3 |
| A | E0442 | OXYGEN CONTENTS, LIQUID, ONE MON | 1/1/2007 | $77.45 | 3 |
| A | E0443 | PORTABLE OXYGEN CONTENTS, GASEOU | 1/1/2007 | $77.45 | 3 |
| A | E0444 | PORTABLE OXYGEN CONTENTS, LIQUID | 1/1/2007 | $77.45 | 3 |
| A | E0454 | PRESSURE VENTILATOR WITH PRESSUR | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E0457 | CHEST SHELL (CUIRASS) | 10/1/2006 | $614.51 | 3 |
| A | E0470 | RESPIRATORY ASSIST DEVICE, BI-LE | 10/1/2005 | $3,710.71 | 3 |
| A | E0480 | PERCUSSOR, ELECTRIC OR PNEUMATIC | 10/1/2005 | $618.89 | 3 |
| A | E0481 | INTRAPULMONARY PERCUSSIVE VENTIL | 1/1/2002 | NC | 9 |
| A | E0484 | OSCILLATORY POSITIVE EXPIRATORY | 4/1/2003 | NC | 9 |
| A | E0485 | ORAL DEVICE/APPLIANCE USED TO RE | 1/1/2006 | NC | 9 |
| A | E0486 | ORAL DEVICE/APPLIANCE USED TO RE | 1/1/2006 | NC | 9 |
| A | E0500 | IPPB MACHINE, ALL TYPES, W/BUILT | 10/1/2005 | $1,501.56 | 3 |
| A | E0550 | HUMIDIFIER, DURABLE FOR EXTENSIV | 10/1/2005 | $671.05 | 3 |
| A | E0555 | HUMIDIFIER, DURABLE, GLASS OR AU | 10/1/2005 | $4.47 | 3 |
| A | E0560 | HUMIDIFIER, DURABLE FOR SUPPLEME | 10/1/2006 | $145.79 | 3 |
| A | E0561 | HUMIDIFIER, NON-HEATED, USED WIT | 10/1/2006 | $107.00 | 3 |
| A | E0562 | HUMIDIFIER, HEATED, USED WITH PO | 10/1/2006 | $301.22 | 3 |
| A | E0565 | COMPRESSOR, AIR POWER SOURCE FOR | 1/1/2006 | $640.63 | 3 |
| A | E0570 | NEBULIZER WITH COMPRESSOR | 10/1/2005 | $139.32 | 3 |
| A | E0571 | AEROSOL COMPRESSOR, BATTERY POWE | 10/1/2005 | $442.42 | 3 |
| A | E0572 | AEROSOL COMPRESSOR, ADJUSTABLE P | 10/1/2005 | $562.54 | 3 |
| A | E0575 | NEBULIZER, ULTRASONIC, LARGE VOL | 6/1/1997 | NC | 9 |
| A | E0580 | NEBULIZER, DURABLE, GLASS OR AUT | 10/1/2006 | $134.04 | 3 |
| A | E0585 | NEBULIZER, WITH COMPRESSOR AND H | 10/1/2005 | $517.81 | 3 |
| A | E0590 | DISPENSING FEE COVERED DRUG ADMI | 1/1/2006 | INVALID | N |
| A | E0600 | RESPIRATORY SUCTION PUMP, HOME M | 10/1/2005 | $589.48 | 3 |
| A | E0601 | CONTINUOUS AIRWAY PRESSURE (CPAP | 10/1/2005 | $1,238.40 | 3 |
| A | E0602 | BREAST PUMP, MANUAL, ANY TYPE | 10/1/2006 | $16.02 | 3 |
| A | E0604 | BREAST PUMP, HEAVY DUTY, HOSP GR | 1/1/2002 | NC | 9 |
| A | E0605 | VAPORIZER, ROOM TYPE | 10/1/2006 | $26.43 | 3 |
| A | E0606 | POSTURAL DRAINAGE BOARD | 10/1/2005 | $328.02 | 3 |
| A | E0607 | HOME BLOOD GLUCOSE MONITOR | 10/1/2006 | $66.03 | 3 |
| A | E0609 | BLOOD GLUCOSE MONITOR WITH SPECI | 4/1/2002 | INVALID | N |
| A | E0610 | PACEMAKER MONITOR, SELF-CONTAINE | 10/1/2006 | $202.18 | 3 |
| A | E0615 | PACEMAKER MONITOR, SELF CONTAINE | 10/1/2006 | $407.00 | 3 |
| A | E0620 | SKIN PIERCING DEVICE FOR COLLECT | 1/1/2002 | NC | 9 |
| A | E0621 | SLING OR SEAT, PATIENT LIFT, CAN | 10/1/2006 | $95.99 | 3 |
| A | E0625 | PATIENT LIFT, BATHROOM OR TOILET | 3/1/1995 | NC | 9 |
| A | E0627 | SEAT LIFT MECHANISM INCORPORATED | 4/1/1992 | NC | 9 |
| A | E0628 | SEPARATE SEAT LIFT MECHANISM FOR | 4/1/1992 | NC | 9 |
| A | E0629 | SEPARATE SEAT LIFT MECHANISM FOR | 4/1/1992 | NC | 9 |
| A | E0630 | PATIENT LIFT, HYDRAULIC, WITH SE | 10/1/2005 | $1,341.60 | 3 |
| A | E0637 | COMBINATION SIT TO STAND SYSTEM, | 6/1/2004 | $2,104.97 | 3 |
| A | E0638 | STANDING FRAME SYSTEM, ONE POSIT | 1/1/2004 | $853.57 | 3 |
| A | E0639 | PATIENT LIFT, MOVEABLE FROM ROOM | 1/1/2005 | NC | 9 |
| A | E0640 | PATIENT LIFT, FIXED SYSTEM, INCL | 1/1/2006 | NC | 9 |
| A | E0641 | STANDING FRAME SYSTEM, MULTI-POS | 1/1/2006 | $0.01 | 5 |
| A | E0642 | STANDING FRAME SYSTEM, MOBILE (D | 7/1/2006 | $0.01 | 5 |
| A | E0650 | PNEUMATIC COMPRESSOR, NON-SEGMEN | 10/1/2006 | $720.22 | 3 |
| A | E0651 | PNEUMATIC COMPRESSOR, SEGMENTAL | 10/1/2006 | $918.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E0652 | PNEUMATIC COMPRESSOR, SEGMENTAL | 10/1/2006 | $5,301.45 | 3 |
| A | E0655 | NON-SEGMENTAL PNEUMATIC APPLIANC | 10/1/2006 | $107.92 | 3 |
| A | E0660 | NON-SEGMENTAL PNEUMATIC APPLIANC | 10/1/2006 | $159.75 | 3 |
| A | E0665 | NON-SEGMENTAL PNEUMATIC APPLIANC | 10/1/2006 | $136.99 | 3 |
| A | E0666 | NON-SEGMENTAL PNEUMATIC APPLIANC | 10/1/2006 | $138.08 | 3 |
| A | E0667 | SEGMENTAL PNEUMATIC APPLIANCE FO | 10/1/2006 | $323.77 | 3 |
| A | E0668 | SEGMENTAL PNEUMATIC APPLIANCE FO | 10/1/2006 | $441.88 | 3 |
| A | E0669 | SEGMENTAL PNEUMATIC APPLIANCE FO | 10/1/2006 | $183.31 | 3 |
| A | E0671 | SEGMENTAL GRADIENT PRESSURE PNEU | 10/1/2006 | $415.35 | 3 |
| A | E0672 | SEGMENTAL GRADIENT PRESSURE PNEU | 10/1/2006 | $322.73 | 3 |
| A | E0673 | SEGMENTAL GRADIENT PRESSURE PNEU | 10/1/2006 | $268.17 | 3 |
| A | E0675 | PNEUMATIC COMPRESSION DEVICE, HI | 1/1/2004 | NC | 9 |
| A | E0676 | INTERMITTENT LIMB COMPRESSION DE | 1/1/2007 | NC | 9 |
| A | E0690 | ULTRAVIOLET CABINET, APPROPRIATE | 7/1/2003 | INVALID | N |
| A | E0691 | ULTRAVIOLET LIGHT THERAPY SYSTEM | 10/1/2006 | $898.59 | 3 |
| A | E0692 | ULTRAVIOLET LIGHT THERAPY SYSTEM | 10/1/2006 | $1,128.37 | 3 |
| A | E0693 | ULTRAVIOLET LIGHT THERAPY SYSTEM | 10/1/2006 | $1,390.98 | 3 |
| A | E0694 | ULTRAVIOLET MULTIDIRECTIONAL LIG | 10/1/2006 | $4,427.34 | 3 |
| A | E0700 | SAFETY EQUIPMENT (E.G. BELT, HAR | 4/1/1988 | NC | 9 |
| A | E0701 | HELMET WITH FACE GUARD AND SOFT | 1/1/2007 | INVALID | N |
| A | E0705 | TRANSFER BOARD OR DEVICE, ANY TY | 10/1/2006 | $55.12 | 3 |
| A | E0710 | RESTRAINT, ANY TYPE (BODY, CHEST | 3/1/1987 | NC | 9 |
| A | E0720 | TENS, TWO LEAD, LOCALIZED STIMUL | 10/1/2006 | $312.44 | 3 |
| A | E0730 | TENS DEVICE, FOUR OR MORE LEADS, | 10/1/2006 | $341.31 | 3 |
| A | E0731 | FORM FITTING CONDUCTIVE GARMENT | 3/1/1989 | NC | 9 |
| A | E0740 | INCONTINENCE TREATMENT SYSTEM, P | 4/1/1995 | NC | 9 |
| A | E0744 | NEUROMUSCULAR STIMULATOR FOR SCO | 3/1/1989 | NC | 9 |
| A | E0746 | ELECTROMYOGRAPHY (EMG), BIOFEEDB | 3/1/1989 | NC | 9 |
| A | E0747 | OSTEOGENESIS STIMULATOR, ELECTRI | 10/1/2006 | $3,593.53 | 3 |
| A | E0748 | OSTEOGENIC STIMUALTOR, ELECTRICA | 10/1/2006 | $3,570.24 | 3 |
| A | E0749 | OSTEOGENESIS STIMULATOR, ELECTRI | 4/1/1988 | NC | 9 |
| A | E0752 | IMPLANTABLE NEUROSTIMULATOR ELEC | 1/1/2006 | INVALID | N |
| A | E0754 | PATIENT PROGRAMMER (EXTERNAL) FO | 1/1/2006 | INVALID | N |
| A | E0755 | ELECTRONIC SALIVARY REFLEX STIMU | 3/1/1987 | NC | 9 |
| A | E0759 | RADIOFREQUENCY TRANSMITTER (EXTE | 1/1/2006 | INVALID | N |
| A | E0760 | OSTOGENESIS STIMUALTOR, LOW INTE | 10/1/2006 | $2,975.71 | 3 |
| A | E0761 | NON-THERMAL PULSED HIGH FREQUENC | 1/1/2003 | NC | 9 |
| A | E0762 | TRANSCUTANEOUS ELECTRICAL JOINT | 1/1/2006 | NC | 9 |
| A | E0764 | FUNCTIONAL NEUROMUSCULAR STIMULA | 1/1/2006 | NC | 9 |
| A | E0769 | ELECTRICAL STIMULATION OR ELECTR | 1/1/2005 | NC | 9 |
| A | E0776 | IV POLE | 10/1/2006 | NC | 9 |
| A | E0782 | INFUSION PUMP, IMPLANTABLE, NON- | 5/1/1997 | NC | 9 |
| A | E0783 | INFUSION PUMP, IMPLATABLE, PROGR | 5/1/1997 | NC | 9 |
| A | E0784 | EXTERNAL AMBULATORY INFUSION PUM | 5/1/2006 | $5,427.37 | 3 |
| A | E0785 | IMPLANTABLE INTRASPINAL CATHETER | 1/1/1999 | NC | 9 |
| A | E0830 | AMBULATORY TRACTION DEVICE, ALL | 1/1/2001 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E0840 | TRACTION FRAME, ATTACHED TO HEAD | 10/1/2006 | $73.28 | 3 |
| A | E0849 | TRACTION EQUIPMENT, CERVICAL, FR | 10/1/2006 | $515.31 | 3 |
| A | E0850 | TRACTION STAND, FREE STANDING, C | 10/1/2006 | $105.06 | 3 |
| A | E0855 | CERVICAL TRACTION EQUIPMENT NOT | 10/1/2006 | $494.22 | 3 |
| A | E0860 | TRACTION EQUIPMENT, OVERDOOR, CE | 10/1/2006 | $32.75 | 3 |
| A | E0870 | TRACTION FRAME, ATTACHED TO FOOT | 10/1/2006 | $116.31 | 3 |
| A | E0880 | TRACTION STAND, FREE STANDING EX | 10/1/2006 | $125.54 | 3 |
| A | E0890 | TRACTION FRAME, ATTACHED TO FOOT | 10/1/2006 | $118.85 | 3 |
| A | E0900 | TRACTION STAND, FREE STANDING, P | 10/1/2006 | $128.12 | 3 |
| A | E0910 | TRAPEZE BARS, AKA PATIENT HELPER | 10/1/2005 | $295.20 | 3 |
| A | E0920 | FRACTURE FRAME, ATTACHED TO BED, | 10/1/2005 | $642.42 | 3 |
| A | E0930 | FRACTURE FRAME, FREE STANDING, I | 10/1/2005 | $573.38 | 3 |
| A | E0935 | CONTINUOUS PASSIVE MOTION EXERCI | 3/1/1987 | NC | 9 |
| A | E0936 | CONTINUOUS PASSIVE MOTION EXERCI | 1/1/2007 | NC | 9 |
| A | E0940 | TRAPEZE BAR, FREE STANDING, COMP | 10/1/2005 | $513.32 | 3 |
| A | E0941 | GRAVITY ASSISTED TRACTION DEVICE | 10/1/2005 | $641.03 | 3 |
| A | E0942 | CERVICAL HEAD HARNESS/HALTER | 10/1/2006 | $19.85 | 3 |
| A | E0943 | CERVICAL PILLOW -H | 4/1/2004 | INVALID | N |
| A | E0944 | PELVIC BELT/HARNESS/BOOT | 10/1/2006 | $45.88 | 3 |
| A | E0945 | EXTREMITY BELT/HARNESS | 10/1/2006 | $44.32 | 3 |
| A | E0946 | FRACTURE, FRAME, DUAL WITH CROSS | 10/1/2005 | $873.54 | 3 |
| A | E0947 | FRACTURE FRAME, ATTACHMENTS FOR | 10/1/2006 | $606.46 | 3 |
| A | E0948 | FRACTURE FRAME, ATTACHMENTS FOR | 10/1/2006 | $569.28 | 3 |
| A | E0950 | WHEELCHAIR ACCESSORY, TRAY, EACH | 10/1/2006 | $103.95 | 3 |
| A | E0951 | HEEL LOOP/HOLDER, ANY TYPE, WITH | 10/1/2006 | $18.98 | 3 |
| A | E0952 | TOE LOOP/HOLDER, ANY TYPE, EACH | 10/1/2006 | $18.83 | 3 |
| A | E0953 | PNEUMATIC TIRE, EACH | 1/1/2006 | INVALID | N |
| A | E0954 | SEMI-PNEUMATIC CASTER, EACH | 1/1/2006 | INVALID | N |
| A | E0955 | WHEELCHAIR ACCESSORY, HEADREST, | 10/1/2006 | $202.18 | 3 |
| A | E0956 | WHEELCHAIR ACCESSORY, LATERAL TR | 10/1/2006 | $98.58 | 3 |
| A | E0957 | WHEELCHAIR ACCESSORY, MEDIAL THI | 10/1/2006 | $137.93 | 3 |
| A | E0958 | MANUAL WHEELCHAIR ACCESSORY, ONE | 10/1/2005 | $644.28 | 3 |
| A | E0959 | MANUAL WHEELCHAIR ACCESSORY, ADA | 10/1/2006 | $44.21 | 3 |
| A | E0960 | WHEELCHAIR ACCESSORY, SHOULDER H | 10/1/2006 | $90.98 | 3 |
| A | E0961 | MANUAL WHEELCHAIR ACCESSORY, WHE | 10/1/2006 | $26.03 | 3 |
| A | E0962 | 1" CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| A | E0963 | 2" CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| A | E0964 | 3" CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| A | E0965 | 4" INCH CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| A | E0966 | MANUAL WHEELCHAIR ACCESSORY, HEA | 10/1/2006 | $71.37 | 3 |
| A | E0967 | MANUAL WHEELCHAIR ACCESSORY, HAN | 10/1/2006 | $64.59 | 3 |
| A | E0969 | NARROWING DEVICE, WHEELCHAIR | 3/1/1995 | NC | 9 |
| A | E0970 | NO.2 FOOTPLATES, EXCEPT FOR ELEV | 3/1/1995 | NC | 9 |
| A | E0971 | MANUAL WHEELCHAIR ACCESSORY, ANT | 10/1/2006 | $43.39 | 3 |
| A | E0972 | WHEELCHAIR ACCESSORY, TRANSFER B | 1/1/2006 | INVALID | N |
| A | E0973 | WHEELCHAIR ACCESSORY, ADJUSTABLE | 10/1/2006 | $114.97 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E0974 | MANUAL WHEELCHAIR ACCESSORY, ANT | 10/1/2006 | $78.41 | 3 |
| A | E0975 | REINFORCED SEAT, UPHOLSTERY WHEE | 4/1/2004 | INVALID | N |
| A | E0976 | REINFORCED BACK WHEELCHAIR, UPHO | 4/1/2004 | INVALID | N |
| A | E0977 | WEDGE CUSHION, WHEELCHAIR | 1/1/2007 | INVALID | N |
| A | E0978 | WHEELCHAIR ACCESSORY, POSITIONIN | 10/1/2006 | $36.30 | 3 |
| A | E0979 | BELT, SAFETY WITH VELCRO CLOSURE | 4/1/2004 | INVALID | N |
| A | E0980 | SAFETY VEST, WHEELCHAIR | 3/1/1995 | NC | 9 |
| A | E0981 | WHEELCHAIR ACCESSORY, SEAT UPHOL | 10/1/2006 | $47.15 | 3 |
| A | E0982 | WHEELCHAIR ACCESSORY, BACK UPHOL | 10/1/2006 | $51.53 | 3 |
| A | E0984 | MANUAL WHEELCHAIR ACCESSORY, POW | 1/1/2006 | NC | 9 |
| A | E0985 | WHEELCHAIR ACCESSORY, SEAT LIFT | 10/1/2006 | $202.85 | 3 |
| A | E0986 | MANUAL WHEELCHAIR ACCESSORY, PUS | 1/1/2006 | NC | 9 |
| A | E0990 | WHEELCHAIR ACCESSORY, ELEVATING | 10/1/2006 | $100.31 | 3 |
| A | E0991 | UPHOLSTERY SEAT | 4/1/2004 | INVALID | N |
| A | E0992 | MANUAL WHEELCHAIR ACCESSORY, SOL | 10/1/2006 | $95.15 | 3 |
| A | E0993 | BACK, UPHOLSTERY -H | 4/1/2004 | INVALID | N |
| A | E0994 | ARMREST, EACH | 3/1/1995 | NC | 9 |
| A | E0995 | WHEELCHAIR ACCESSORY, CALF REST/ | 10/1/2006 | $30.40 | 3 |
| A | E0996 | TIRE, SOLID, EACH | 1/1/2006 | INVALID | N |
| A | E0997 | CASTER WITH FORK | 1/1/2007 | INVALID | N |
| A | E0998 | CASTER WITHOUT FORK | 1/1/2007 | INVALID | N |
| A | E0999 | PNEUMATIC TIRE WITH WHEEL | 1/1/2007 | INVALID | N |
| A | E1000 | TIRE, PNEUMATIC CASTER | 1/1/2006 | INVALID | N |
| A | E1001 | WHEEL, SINGLE | 1/1/2006 | INVALID | N |
| A | E1002 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $4,113.02 | 3 |
| A | E1003 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $4,391.30 | 3 |
| A | E1004 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $4,869.05 | 3 |
| A | E1005 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $5,270.36 | 3 |
| A | E1006 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $6,455.70 | 3 |
| A | E1007 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $8,741.27 | 3 |
| A | E1008 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $8,742.05 | 3 |
| A | E1009 | WHEELCHAIR ACCESSORY, ADD TO POW | 1/1/2004 | NC | 9 |
| A | E1010 | WHEELCHAIR ACCESSORY, ADD TO POW | 10/1/2006 | $1,143.79 | 3 |
| A | E1011 | MODIFICATION TO PEDIATRIC WHEELC | 10/1/2006 | $160.22 | 3 |
| A | E1012 | INTEGRATED SEATING SYSTEM, PLANA | 1/1/2005 | INVALID | N |
| A | E1013 | INTEGRATED SEATING SYSTEM, CONTO | 1/1/2005 | INVALID | N |
| A | E1014 | RECLINING BACK, ADDITION TO PEDI | 10/1/2006 | $365.14 | 3 |
| A | E1015 | SHOCK ABSORBER FOR MANUAL WHEELC | 10/1/2006 | $114.70 | 3 |
| A | E1016 | SHOCK ABSORBER FOR POWER WHEELCH | 10/1/2006 | $131.31 | 3 |
| A | E1017 | HEAVY DUTY SHOCK ABSORBER FOR HE | 10/1/2006 | $106.81 | 3 |
| A | E1018 | HEAVY DUTY SHOCK ABSORBER FOR HE | 10/1/2006 | $160.22 | 3 |
| A | E1019 | WHEELCHAIR ACCESSORY, POWER SEAT | 1/1/2006 | INVALID | N |
| A | E1020 | RESIDUAL LIMB SUPPORT SYSTEM FOR | 10/1/2006 | $243.41 | 3 |
| A | E1021 | WHEELCHAIR ACCESSORY, POWER SEAT | 1/1/2006 | INVALID | N |
| A | E1025 | LATERAL THORACIC SUPPORT, NON-CO | 1/1/2006 | INVALID | N |
| A | E1026 | LATERAL THORACIC SUPPORT, CONTOU | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E1027 | LATERAL/ANTERIOR SUPPORT, FOR PE | 1/1/2006 | INVALID | N |
| A | E1028 | WHEELCHAIR ACCESSORY, MANUAL SWI | 10/1/2006 | $206.54 | 3 |
| A | E1029 | WHEELCHAIR ACCESSORY, VENTILATOR | 10/1/2006 | $369.54 | 3 |
| A | E1030 | WHEELCHAIR ACCESSORY, VENTILATOR | 10/1/2006 | $1,165.27 | 3 |
| A | E1065 | POWER ATTACHMENT (TO CONVERT ANY | 1/1/2004 | INVALID | N |
| A | E1066 | BATTERY CHARGER -H | 4/1/2004 | INVALID | N |
| A | E1069 | DEEP CYCLE BATTERY | 4/1/2004 | INVALID | N |
| A | E1089 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 8/1/2004 | NC | 9 |
| A | E1090 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 8/1/2004 | NC | 9 |
| A | E1161 | MANUAL ADULT SIZE WHEELCHAIR, IN | 10/1/2006 | $2,366.09 | 3 |
| A | E1210 | MOTORIZED WHEELCHAIR; FIXED FULL | 1/1/2006 | INVALID | N |
| A | E1211 | MOTORIZED WHEELCHAIR; DETACHABLE | 1/1/2006 | INVALID | N |
| A | E1212 | MOTORIZED WHEELCHAIR; FIXED FULL | 1/1/2006 | INVALID | N |
| A | E1213 | MOTORIZED WHEELCHAIR; DETACHABLE | 1/1/2006 | INVALID | N |
| A | E1220 | WHEELCHAIR; SPECIALLY SIZED OR C | 3/1/1995 | NC | 9 |
| A | E1226 | WHEELCHAIR ACCESSORY, MANUAL FUL | 10/1/2006 | $545.65 | 3 |
| A | E1227 | SPECIAL HEIGHT ARMS FOR WHEELCHA | 3/1/1995 | NC | 9 |
| A | E1229 | WHEELCHAIR, PEDIATRIC SIZE, NOT | 1/1/2006 | $0.01 | 5 |
| A | E1230 | POWER OPERATED VEHICLE (3 OR 4 W | 10/1/2006 | $2,189.10 | 3 |
| A | E1231 | WHEELCHAIR, PEDIATRIC SIZE, TILT | 10/1/2006 | $3,845.23 | 3 |
| A | E1232 | WHEELCHAIR, PEDIATRIC SIZE, TILT | 10/1/2006 | $2,138.41 | 3 |
| A | E1233 | WHEELCHAIR, PEDIATRIC SIZE, TILT | 10/1/2006 | $2,215.73 | 3 |
| A | E1234 | WHEELCHAIR, PEDIATRIC SIZE, TILT | 10/1/2006 | $1,928.95 | 3 |
| A | E1235 | WHEELCHAIR, PEDIATRIC SIZE, RIGI | 10/1/2006 | $1,857.43 | 3 |
| A | E1236 | WHEELCHAIR, PEDIATRIC SIZE, FOLD | 10/1/2006 | $1,638.73 | 3 |
| A | E1237 | WHEELCHAIR, PEDIATRIC SIZE, RIGI | 10/1/2006 | $1,653.05 | 3 |
| A | E1238 | WHEELCHAIR, PEDIATRIC SIZE, FOLD | 10/1/2006 | $1,638.73 | 3 |
| A | E1239 | POWER WHEELCHAIR, PEDIATRIC SIZE | 10/1/2005 | $5,286.73 | 3 |
| A | E1296 | SPECIAL WHEELCHAIR SEAT HEIGHT F | 3/1/1995 | NC | 9 |
| A | E1297 | SPECIAL WHEELCHAIR SEAT DEPTH, B | 3/1/1995 | NC | 9 |
| A | E1298 | SPECIAL WHEELCHAIR SEAT DEPTH AN | 3/1/1995 | NC | 9 |
| A | E1300 | WHIRLPOOL, PORTABLE (OVERTUB TYP | 10/1/2000 | NC | 9 |
| A | E1310 | WHIRLPOOL, NON-PORTABLE (BUILT-I | 4/1/1988 | NC | 9 |
| A | E1353 | REGULATOR | 10/1/2005 | $108.86 | 3 |
| A | E1355 | STAND/RACK | 10/1/2005 | $37.45 | 3 |
| A | E1372 | IMMERSION EXTERNAL HEATER FOR NE | 10/1/2006 | $163.03 | 3 |
| A | E1399 | DURABLE MEDICAL EQUIPMENT, MISCE | 11/10/2003 | $6,000.00 | 3 |
| A | E1500 | CENTRIFUGE, FOR DIALYSIS | 1/1/2002 | NC | 9 |
| A | E1510 | KIDNEY, DIALYSATE DELIVERY SYST | 4/1/1990 | NC | 9 |
| A | E1530 | AIR BUBBLE DETECTOR FOR HEMODIAL | 4/1/1990 | NC | 9 |
| A | E1540 | PRESSURE ALARM FOR HEMODIALYSIS, | 4/1/1990 | NC | 9 |
| A | E1550 | BATH CONDUCTIVITY METER FOR HEMO | 4/1/1990 | NC | 9 |
| A | E1560 | BLOOD LEAK DETECTOR FOR HEMODIAL | 4/1/1990 | NC | 9 |
| A | E1570 | ADJUSTABLE CHAIR, FOR ESRD PATIE | 4/1/1990 | NC | 9 |
| A | E1575 | TRANSDUCER PROTECTORS/FLUID BARR | 4/1/1990 | NC | 9 |
| A | E1580 | UNIPUNCTURE CONTROL SYSTEM FOR H | 4/1/1990 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E1590 | HEMODIALYSIS MACHINE | 4/1/1990 | NC | 9 |
| A | E1592 | AUTOMATIC INTERMITTENT PERITONEA | 4/1/1990 | NC | 9 |
| A | E1594 | CYCLER DIALYSIS MACHINE FOR PERI | 4/1/1990 | NC | 9 |
| A | E1600 | DELIVERY AND/OR INSTALLATION CHA | 4/1/1988 | NC | 9 |
| A | E1610 | REVERSE OSMOSIS WATER PURIFICATI | 4/1/1990 | NC | 9 |
| A | E1615 | DEIONIZER WATER PURIFICATION SYS | 4/1/1990 | NC | 9 |
| A | E1620 | BLOOD PUMP FOR HEMODIALYSIS, REP | 4/1/1990 | NC | 9 |
| A | E1625 | WATER SOFTENING SYSTEM, FOR HEMO | 4/1/1990 | NC | 9 |
| A | E1630 | RECIPROCATING PERITONEAL DIALYSI | 4/1/1990 | NC | 9 |
| A | E1632 | WEARABLE ARTIFICIAL KIDNEY, EACH | 4/1/1990 | NC | 9 |
| A | E1634 | PERITONEAL DIALYSIS CLAMPS, EACH | 1/1/2004 | NC | 9 |
| A | E1635 | COMPACT (PORTABLE) TRAVEL HEMODI | 4/1/1990 | NC | 9 |
| A | E1636 | SORBENT CARTRIDGES, FOR HEMODIAL | 4/1/1990 | NC | 9 |
| A | E1637 | HEMOSTATS, EACH | 1/1/2002 | NC | 9 |
| A | E1638 | HEATING PAD, FOR PERITONEAL DIAL | 7/1/2003 | INVALID | N |
| A | E1639 | SCALE, EACH | 1/1/2002 | NC | 9 |
| A | E1640 | REPLACEMENT COMPONENTS FOR HEMOD | 4/1/2002 | INVALID | N |
| A | E1699 | DIALYSIS EQUIPMENT, NOT OTHERWIS | 10/1/1993 | NC | 9 |
| A | E1700 | JAW MOTION REHABILITATION SYSTEM | 4/1/1993 | NC | 9 |
| A | E1701 | REPLACEMENT CUSHIONS FOR JAW MOT | 4/1/1993 | NC | 9 |
| A | E1702 | REPLACEMENT MEASURING SCALES FOR | 4/1/1993 | NC | 9 |
| A | E1800 | DYNAMIC ADJUSTABLE ELBOW EXTENSI | 10/1/2005 | $1,720.91 | 3 |
| A | E1802 | DYNAMIC ADJUSTABLE FOREARM PRONA | 4/1/2003 | $4,902.00 | 3 |
| A | E1805 | DYNAMIC ADJUSTABLE WRIST EXTENSI | 10/1/2005 | $1,765.49 | 3 |
| A | E1810 | DYNAMIC ADJUSTABLE KNEE EXTENSIO | 10/1/2005 | $1,723.23 | 3 |
| A | E1815 | DYNAMIC ADJUSTABLE ANKLE EXTENSI | 10/1/2005 | $1,765.49 | 3 |
| A | E1820 | REPLACEMENT SOFT INTERFACE MATER | 10/1/2006 | $77.11 | 3 |
| A | E1821 | REPLACEMENT SOFT INTERFACE MATER | 1/1/2002 | NC | 9 |
| A | E1825 | DYNAMIC ADJUSTABLE FINGER EXTENS | 10/1/2005 | $1,766.11 | 3 |
| A | E1830 | DYNAMIC ADJUSTABLE TOE EXTENSION | 10/1/2005 | $1,765.49 | 3 |
| A | E1840 | DYNAMIC ADJUSTABLE SHOULDER FLEX | 10/1/2005 | $5,895.09 | 3 |
| A | E1902 | COMMUNICATION BOARD, NON-ELECTRO | 1/1/2002 | NC | 9 |
| A | E2000 | GASTRIC SUCTION PUMP, HOME MODEL | 10/1/2005 | $802.59 | 3 |
| A | E2100 | BLOOD GLUCOSE MONITOR WITH INTEG | 10/1/2006 | $545.85 | 3 |
| A | E2101 | BLOOD GLUCOSE MONITOR WITH INTEG | 10/1/2006 | $188.56 | 3 |
| A | E2201 | MANUAL WHEELCHAIR ACCESSORY, NON | 10/1/2006 | $373.10 | 3 |
| A | E2202 | MANUAL WHEELCHAIR ACCESSORY, NON | 10/1/2006 | $473.98 | 3 |
| A | E2203 | MANUAL WHEELCHAIR ACCESSORY, NON | 10/1/2006 | $479.05 | 3 |
| A | E2204 | MANUAL WHEELCHAIR ACCESSORY, NON | 10/1/2006 | $813.40 | 3 |
| A | E2205 | MANUAL WHEELCHAIR ACCESSORY, HAN | 10/1/2006 | $32.04 | 3 |
| A | E2206 | MANUAL WHEELCHAIR ACCESSORY, WHE | 10/1/2006 | $40.01 | 3 |
| A | E2207 | WHEELCHAIR ACCESSORY, CRUTCH AND | 10/1/2006 | $42.62 | 3 |
| A | E2208 | WHEELCHAIR ACCESSORY, CYLINDER T | 10/1/2006 | $116.80 | 3 |
| A | E2209 | WHEELCHAIR ACCESSORY, ARM TROUGH | 10/1/2006 | $105.39 | 3 |
| A | E2210 | WHEELCHAIR ACCESSORY, BEARINGS, | 10/1/2006 | $6.55 | 3 |
| A | E2211 | MANUAL WHEELCHAIR ACCESSORY, PNE | 10/1/2006 | $39.09 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E2212 | MANUAL WHEELCHAIR ACCESSORY, TUB | 10/1/2006 | $5.78 | 3 |
| A | E2213 | MANUAL WHEELCHAIR ACCESSORY, INS | 10/1/2006 | $29.91 | 3 |
| A | E2214 | MANUAL WHEELCHAIR ACCESSORY, PNE | 10/1/2006 | $30.60 | 3 |
| A | E2215 | MANUAL WHEELCHAIR ACCESSORY, TUB | 10/1/2006 | $9.45 | 3 |
| A | E2216 | MANUAL WHEELCHAIR ACCESSORY, FOA | 1/1/2006 | $0.01 | 3 |
| A | E2217 | MANUAL WHEELCHAIR ACCESSORY, FOA | 1/1/2006 | $0.01 | 3 |
| A | E2218 | MANUAL WHEELCHAIR ACCESSORY, FOA | 1/1/2006 | $0.01 | 3 |
| A | E2219 | MANUAL WHEELCHAIR ACCESSORY, FOA | 10/1/2006 | $41.85 | 3 |
| A | E2220 | MANUAL WHEELCHAIR ACCESSORY, SOL | 10/1/2006 | $24.24 | 3 |
| A | E2221 | MANUAL WHEELCHAIR ACCESSORY, SOL | 10/1/2006 | $25.12 | 3 |
| A | E2222 | MANUAL WHEELCHAIR ACCESSORY, SOL | 10/1/2006 | $21.06 | 3 |
| A | E2223 | MANUAL WHEELCHAIR ACCESSORY, VAL | 10/1/2006 | $5.61 | 3 |
| A | E2224 | MANUAL WHEELCHAIR ACCESSORY, PRO | 10/1/2006 | $98.06 | 3 |
| A | E2225 | MANUAL WHEELCHAIR ACCESSORY, CAS | 10/1/2006 | $17.40 | 3 |
| A | E2226 | MANUAL WHEELCHAIR ACCESSORY, CAS | 10/1/2006 | $37.94 | 3 |
| A | E2291 | BACK, PLANAR, FOR PEDIATRIC SIZE | 10/1/2005 | $261.63 | 3 |
| A | E2292 | SEAT, PLANAR, FOR PEDIATRIC SIZE | 10/1/2005 | $261.63 | 3 |
| A | E2293 | BACK, CONTOURED, FOR PEDIATRIC S | 10/1/2005 | $432.37 | 3 |
| A | E2294 | SEAT, CONTOURED, FOR PEDIATRIC S | 10/1/2005 | $432.37 | 3 |
| A | E2300 | POWER WHEELCHAIR ACCESSORY, POWE | 1/1/2004 | NC | 9 |
| A | E2301 | POWER WHEELCHAIR ACCESSORY, POWE | 1/1/2004 | NC | 9 |
| A | E2310 | POWER WHEELCHAIR ACCESSORY, ELEC | 10/1/2006 | $1,170.24 | 3 |
| A | E2311 | POWER WHEELCHAIR ACCESSORY, ELEC | 10/1/2006 | $2,369.20 | 3 |
| A | E2320 | POWER WHEELCHAIR ACCESSORY, HAND | 1/1/2007 | INVALID | N |
| A | E2321 | POWER WHEELCHAIR ACCESSORY, HAND | 10/1/2006 | $1,589.10 | 3 |
| A | E2322 | POWER WHEELCHAIR ACCESSORY, HAND | 10/1/2006 | $1,410.36 | 3 |
| A | E2323 | POWER WHEELCHAIR ACCESSORY, SPEC | 10/1/2006 | $69.04 | 3 |
| A | E2324 | POWER WHEELCHAIR ACCESSORY, CHIN | 10/1/2006 | $43.82 | 3 |
| A | E2325 | POWER WHEELCHAIR ACCESSORY, SIP | 10/1/2006 | $1,346.83 | 3 |
| A | E2326 | POWER WHEELCHAIR ACCESSORY, BREA | 10/1/2006 | $341.37 | 3 |
| A | E2327 | POWER WHEELCHAIR ACCESSORY, HEAD | 10/1/2006 | $2,463.24 | 3 |
| A | E2328 | POWER WHEELCHAIR ACCESSORY, HEAD | 10/1/2006 | $4,141.44 | 3 |
| A | E2329 | POWER WHEELCHAIR ACCESSORY, HEAD | 10/1/2006 | $1,766.13 | 3 |
| A | E2330 | POWER WHEELCHAIR ACCESSORY, HEAD | 10/1/2006 | $3,422.09 | 3 |
| A | E2331 | POWER WHEELCHAIR ACCESSORY, ATTE | 1/1/2004 | NC | 9 |
| A | E2340 | POWER WHEELCHAIR ACCESSORY, NONS | 10/1/2006 | $358.36 | 3 |
| A | E2341 | POWER WHEELCHAIR ACCESSORY, NONS | 10/1/2006 | $537.58 | 3 |
| A | E2342 | POWER WHEELCHAIR ACCESSORY, NONS | 10/1/2006 | $447.98 | 3 |
| A | E2343 | POWER WHEELCHAIR ACCESSORY, NONS | 10/1/2006 | $716.78 | 3 |
| A | E2351 | POWER WHEELCHAIR ACCESSORY, ELEC | 10/1/2006 | $596.97 | 3 |
| A | E2360 | POWER WHEELCHAIR ACCESSORY, 22 N | 10/1/2006 | $95.49 | 3 |
| A | E2361 | POWER WHEELCHAIR ACCESSORY, 22NF | 10/1/2006 | $137.15 | 3 |
| A | E2362 | POWER WHEELCHAIR ACCESSORY, GROU | 10/1/2006 | $90.44 | 3 |
| A | E2363 | POWER WHEELCHAIR ACCESSORY, GROU | 10/1/2006 | $182.89 | 3 |
| A | E2364 | POWER WHEELCHAIR ACCESSORY, U-1 | 10/1/2006 | $95.49 | 3 |
| A | E2365 | POWER WHEELCHAIR ACCESSORY, U-1 | 10/1/2006 | $110.31 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E2366 | POWER WHEELCHAIR ACCESSORY, BATT | 10/1/2006 | $263.62 | 3 |
| A | E2367 | POWER WHEELCHAIR ACCESSORY, BATT | 1/1/2004 | NC | 9 |
| A | E2368 | POWER WHEELCHAIR COMPONENT, MOTO | 10/1/2006 | $516.57 | 3 |
| A | E2369 | POWER WHEELCHAIR COMPONENT, GEAR | 10/1/2006 | $449.94 | 3 |
| A | E2370 | POWER WHEELCHAIR COMPONENT, MOTO | 10/1/2006 | $802.84 | 3 |
| A | E2371 | POWER WHEELCHAIR ACCESSORY, GROU | 10/1/2006 | $150.74 | 3 |
| A | E2372 | POWER WHEELCHAIR ACCESSORY, GROU | 1/1/2006 | $0.01 | 3 |
| A | E2373 | POWER WHEELCHAIR ACCESSORY, HAND | 1/1/2007 | $1,025.90 | 3 |
| A | E2374 | POWER WHEELCHAIR ACCESSORY, HAND | 1/1/2007 | NC | 9 |
| A | E2375 | POWER WHEELCHAIR ACCESSORY, NON- | 1/1/2007 | NC | 9 |
| A | E2376 | POWER WHEELCHAIR ACCESSORY, EXPA | 1/1/2007 | NC | 9 |
| A | E2377 | POWER WHEELCHAIR ACCESSORY, EXPA | 1/1/2007 | NC | 9 |
| A | E2381 | POWER WHEELCHAIR ACCESSORY, PNEU | 1/1/2007 | NC | 9 |
| A | E2382 | POWER WHEELCHAIR ACCESSORY, TUBE | 1/1/2007 | NC | 9 |
| A | E2383 | POWER WHEELCHAIR ACCESSORY, INSE | 1/1/2007 | NC | 9 |
| A | E2384 | POWER WHEELCHAIR ACCESSORY, PNEU | 1/1/2007 | NC | 9 |
| A | E2385 | POWER WHEELCHAIR ACCESSORY, TUBE | 1/1/2007 | NC | 9 |
| A | E2386 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| A | E2387 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| A | E2388 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| A | E2389 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| A | E2390 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |
| A | E2391 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |
| A | E2392 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |
| A | E2393 | POWER WHEELCHAIR ACCESSORY, VALV | 1/1/2007 | NC | 9 |
| A | E2394 | POWER WHEELCHAIR ACCESSORY, DRIV | 1/1/2007 | NC | 9 |
| A | E2395 | POWER WHEELCHAIR ACCESSORY, CAST | 1/1/2007 | NC | 9 |
| A | E2396 | POWER WHEELCHAIR ACCESSORY, CAST | 1/1/2007 | NC | 9 |
| A | E2399 | POWER WHEELCHAIR ACCESSORY, NOT | 10/1/2005 | $0.01 | 5 |
| A | E2601 | GENERAL USE WHEELCHAIR SEAT CUSH | 10/1/2006 | $61.16 | 3 |
| A | E2602 | GENERAL USE WHEELCHAIR SEAT CUSH | 10/1/2006 | $119.40 | 3 |
| A | E2603 | SKIN PROTECTION WHEELCHAIR SEAT | 10/1/2006 | $151.59 | 3 |
| A | E2604 | SKIN PROTECTION WHEELCHAIR SEAT | 10/1/2006 | $188.41 | 3 |
| A | E2605 | POSITIONING WHEELCHAIR SEAT CUSH | 10/1/2006 | $269.17 | 3 |
| A | E2606 | POSITIONING WHEELCHAIR SEAT CUSH | 10/1/2006 | $419.93 | 3 |
| A | E2607 | SKIN PROTECTION AND POSITIONING | 10/1/2006 | $289.85 | 3 |
| A | E2608 | SKIN PROTECTION AND POSITIONING | 10/1/2006 | $348.09 | 3 |
| A | E2609 | CUSTOM FABRICATED WHEELCHAIR SEA | 5/1/2006 | $788.13 | 3 |
| A | E2610 | WHEELCHAIR SEAT CUSHION, POWERED | 1/1/2005 | NC | 9 |
| A | E2611 | GENERAL USE WHEELCHAIR BACK CUSH | 10/1/2006 | $312.35 | 3 |
| A | E2612 | GENERAL USE WHEELCHAIR BACK CUSH | 10/1/2006 | $422.54 | 3 |
| A | E2613 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $393.04 | 3 |
| A | E2614 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $543.93 | 3 |
| A | E2615 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $452.32 | 3 |
| A | E2616 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $608.58 | 3 |
| A | E2617 | CUSTOM FABRICATED WHEELCHAIR BAC | 5/1/2006 | $788.13 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | E2618 | WHEELCHAIR ACCESSORY, SOLID SEAT | 10/1/2006 | $153.68 | 3 |
| A | E2619 | REPLACEMENT COVER FOR WHEELCHAIR | 10/1/2006 | $51.32 | 3 |
| A | E2620 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $547.70 | 3 |
| A | E2621 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $566.87 | 3 |
| A | E8000 | GAIT TRAINER, PEDIATRIC SIZE, PO | 10/1/2005 | $1,599.60 | 3 |
| A | E8001 | GAIT TRAINER, PEDIATRIC SIZE, UP | 10/1/2005 | $1,599.60 | 3 |
| A | E8002 | GAIT TRAINER, PEDIATRIC SIZE, AN | 10/1/2005 | $1,599.60 | 3 |
| A | G0109 | DIABETES SELF-MANAGEMENT TRAININ | 12/20/2004 | NC | 9 |
| A | G0369 | PHARMACY SUPPLY FEE FOR INITIAL | 1/1/2006 | INVALID | N |
| A | G0370 | PHARMACY SUPPLY FEE FOR ORAL ANT | 1/1/2006 | INVALID | N |
| A | G0371 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | INVALID | N |
| A | G0374 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | INVALID | N |
| A | J0151 | INJECTION, ADENOSINE, 90 MG (NOT | 4/1/2004 | INVALID | N |
| A | J1056 | INJECTION, MEDROXYPROGESTERONE A | 10/17/2005 | NC | 9 |
| A | J1565 | INJECTION, RESPIRATORY SYNCYTIAL | 1/1/2002 | NC | 9 |
| A | J1750 | INJECTION, IRON DEXTRAN, 50 MG | 1/1/2006 | INVALID | N |
| A | J1910 | INJECTION, KUTAPRESSIN, UP TO 2 | 4/1/2004 | INVALID | N |
| A | J2000 | INJECTION, LIDOCAINE HCL, 50 CC | 4/1/2004 | INVALID | N |
| A | J2352 | INJECTION, OCTREOTIDE ACETATE, 1 | 4/1/2004 | INVALID | N |
| A | J2912 | INJECTION, SODIUM CHLORIDE, 0.9% | 1/1/2007 | INVALID | N |
| A | J3245 | INJECTION, TIROFIBAN HYDROCHLORI | 1/1/2005 | INVALID | N |
| A | J3395 | INJECTION, VERTEPORFIN, 15 MG | 1/1/2005 | INVALID | N |
| A | J3530 | NASAL VACCINE INHALATION | 1/17/2005 | NC | 9 |
| A | J7051 | STERILE SALINE OR WATER, UP TO 5 | 1/1/2006 | INVALID | N |
| A | J7310 | GANCICLOVIR, 4.5 MG, LONG-ACTING | 12/20/2004 | NC | 9 |
| A | J7320 | HYLAN G-F 20, 16 MG, FOR INTRA A | 1/1/2007 | INVALID | N |
| A | J7340 | DERMAL AND EPIDERMAL, TISSUE OF | 1/1/2003 | NC | 9 |
| A | J7508 | TACROLIMUS, ORAL, PER 5 MG | 4/1/2004 | INVALID | N |
| A | J7520 | SIROLIMUS, ORAL, 1 MG | 1/1/2005 | NC | 9 |
| A | J7618 | ALBUTEROL, ALL FORMULATIONS INCL | 1/1/2005 | INVALID | N |
| A | J7619 | ALBUTEROL, ALL FORMULATIONS INCL | 1/1/2005 | INVALID | N |
| A | J7633 | BUDESONIDE, INHALATION SOLUTION | 4/1/2003 | NC | 9 |
| A | J9180 | EPIRUBICIN HYDROCHLORIDE, 50 MG | 4/1/2004 | INVALID | N |
| A | K0001 | STANDARD WHEELCHAIR | 10/1/2005 | $806.51 | 3 |
| A | K0002 | STANDARD HEMI (LOW SEAT) WHEELCH | 10/1/2005 | $1,191.96 | 3 |
| A | K0003 | LIGHTWEIGHT WHEELCHAIR | 10/1/2005 | $1,278.03 | 3 |
| A | K0004 | HIGH STRENGTH, LIGHTWEIGHT WHEEL | 10/1/2005 | $1,677.26 | 3 |
| A | K0005 | ULTRALIGHTWEIGHT WHEELCHAIR | 10/1/2006 | $1,817.84 | 3 |
| A | K0006 | HEAVY-DUTY WHEELCHAIR | 10/1/2005 | $1,851.72 | 3 |
| A | K0007 | EXTRA HEAVY-DUTY WHEELCHAIR | 10/1/2005 | $2,635.62 | 3 |
| A | K0008 | CUSTOM MANUAL WHEELCHAIR/BASE | 1/1/2002 | INVALID | N |
| A | K0009 | OTHER MANUAL WHEELCHAIR/BASE | 10/1/2005 | $6,192.00 | 3 |
| A | K0010 | STANDARD-WEIGHT FRAME MOTORIZED/ | 11/15/2006 | NC | 9 |
| A | K0011 | STANDARD-WEIGHT FRAME MOTORIZED/ | 11/15/2006 | NC | 9 |
| A | K0012 | LIGHTWEIGHT PORTABLE MOTORIZED/P | 11/15/2006 | NC | 9 |
| A | K0013 | CUSTOM MOTORIZED/POWER WHEELCHAI | 4/1/2002 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | K0014 | OTHER MOTORIZED/POWER WHEELCHAIR | 11/15/2006 | NC | 9 |
| A | K0015 | DETACHABLE, NONADJUSTABLE HEIGHT | 10/1/2006 | $178.67 | 3 |
| A | K0016 | DETACHABLE, ADJUSTABLE HEIGHT AR | 4/1/2004 | INVALID | N |
| A | K0017 | DETACHABLE, ADJUSTABLE HEIGHT AR | 10/1/2006 | $50.25 | 3 |
| A | K0018 | DETACHABLE, ADJUSTABLE HEIGHT AR | 10/1/2006 | $28.09 | 3 |
| A | K0019 | ARM PAD, EACH | 10/1/2006 | $17.24 | 3 |
| A | K0020 | FIXED, ADJUSTABLE HEIGHT ARMREST | 10/1/2006 | $45.67 | 3 |
| A | K0021 | ANTITIPPING DEVICE, EACH | 7/1/2003 | INVALID | N |
| A | K0022 | REINFORCED BACK UPHOLSTERY | 4/1/2004 | INVALID | N |
| A | K0023 | SOLID BACK INSERT, PLANAR BACK, | 1/1/2005 | INVALID | N |
| A | K0024 | SOLID BACK INSERT, PLANAR BACK, | 1/1/2005 | INVALID | N |
| A | K0025 | HOOK-ON HEADREST EXTENSION | 4/1/2004 | INVALID | N |
| A | K0026 | BACK UPHOLSTERY FOR ULTRALIGHTWE | 4/1/2004 | INVALID | N |
| A | K0027 | BACK UPHOLSTERY FOR WHEELCHAIR T | 4/1/2004 | INVALID | N |
| A | K0028 | FULLY RECLINING BACK | 4/1/2004 | INVALID | N |
| A | K0029 | REINFORCED SEAT UPHOLSTERY | 4/1/2004 | INVALID | N |
| A | K0030 | SOLID SEAT INSERT, PLANAR SEAT, | 4/1/2004 | INVALID | N |
| A | K0031 | SAFETY BELT/PELVIC STRAP | 4/1/2004 | INVALID | N |
| A | K0032 | SEAT UPHOLSTERY FOR ULTRALIGHTWE | 4/1/2004 | INVALID | N |
| A | K0033 | SEAT UPHOLSTERY FOR WHEELCHAIR T | 4/1/2004 | INVALID | N |
| A | K0034 | HEEL LOOP, EACH | 7/1/2003 | INVALID | N |
| A | K0035 | HEEL LOOP WITH ANKLE STRAP, EACH | 4/1/2004 | INVALID | N |
| A | K0036 | TOE LOOP, EACH | 4/1/2004 | INVALID | N |
| A | K0037 | HIGH MOUNT FLIP-UP FOOTREST, EAC | 10/1/2006 | $48.16 | 3 |
| A | K0038 | LEG STRAP, EACH | 10/1/2006 | $23.84 | 3 |
| A | K0039 | LEG STRAP, H STYLE, EACH | 10/1/2006 | $52.99 | 3 |
| A | K0040 | ADJUSTABLE ANGLE FOOTPLATE, EACH | 10/1/2006 | $73.41 | 3 |
| A | K0041 | LARGE SIZE FOOTPLATE, EACH | 10/1/2006 | $52.05 | 3 |
| A | K0042 | STANDARD SIZE FOOTPLATE, EACH | 10/1/2006 | $30.97 | 3 |
| A | K0043 | FOOTREST, LOWER EXTENSION TUBE, | 10/1/2006 | $19.20 | 3 |
| A | K0044 | FOOTREST, UPPER HANGER BRACKET, | 10/1/2006 | $16.37 | 3 |
| A | K0045 | FOOTREST, COMPLETE ASSEMBLY | 10/1/2006 | $56.62 | 3 |
| A | K0046 | ELEVATING LEGREST, LOWER EXTENSI | 10/1/2006 | $19.20 | 3 |
| A | K0047 | ELEVATING LEGREST, UPPER HANGER | 10/1/2006 | $75.18 | 3 |
| A | K0048 | ELEVATING LEGREST, COMPLETE ASSE | 4/1/2004 | INVALID | N |
| A | K0049 | CALF PAD, EACH | 4/1/2004 | INVALID | N |
| A | K0050 | RATCHET ASSEMBLY | 10/1/2006 | $31.96 | 3 |
| A | K0051 | CAM RELEASE ASSEMBLY, FOOTREST O | 10/1/2006 | $51.72 | 3 |
| A | K0052 | SWINGAWAY, DETACHABLE FOOTRESTS, | 10/1/2006 | $90.90 | 3 |
| A | K0053 | ELEVATING FOOTRESTS, ARTICULATIN | 10/1/2006 | $100.31 | 3 |
| A | K0054 | SEAT WIDTH OF 10, 11, 12, 15, 17 | 4/1/2004 | INVALID | N |
| A | K0055 | SEAT DEPTH OF 15, 17, OR 18" FOR | 4/1/2004 | INVALID | N |
| A | K0056 | SEAT HEIGHT <17" OR >= TO 21" FO | 10/1/2006 | $93.51 | 3 |
| A | K0057 | SEAT WIDTH 19 OR 20 INCHES FOR H | 4/1/2004 | INVALID | N |
| A | K0058 | SEAT DEPTH 17 OR 18 INCHES FOR A | 4/1/2004 | INVALID | N |
| A | K0059 | PLASTIC COATED HANDRIM, EACH | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | K0060 | STEEL HANDRIM, EACH | 1/1/2005 | INVALID | N |
| A | K0061 | ALUMINUM HANDRIM, EACH | 1/1/2005 | INVALID | N |
| A | K0062 | HANDRIM WITH 8 TO 10 VERTICAL OR | 4/1/2004 | INVALID | N |
| A | K0063 | HANDRIM WITH 12 TO 16 VERTICAL O | 4/1/2004 | INVALID | N |
| A | K0064 | ZERO PRESSURE TUBE (FLAT FREE IN | 1/1/2006 | INVALID | N |
| A | K0065 | SPOKE PROTECTORS, EACH | 10/1/2006 | $43.71 | 3 |
| A | K0066 | SOLID TIRE, ANY SIZE, EACH | 1/1/2006 | INVALID | N |
| A | K0067 | PNEUMATIC TIRE, ANY SIZE, EACH | 1/1/2006 | INVALID | N |
| A | K0068 | PNEUMATIC TIRE TUBE, EACH | 1/1/2006 | INVALID | N |
| A | K0069 | REAR WHEEL ASSEMBLY, COMPLETE, W | 10/1/2006 | $98.23 | 3 |
| A | K0070 | REAR WHEEL ASSEMBLY, COMPLETE, W | 10/1/2006 | $180.11 | 3 |
| A | K0071 | FRONT CASTER ASSEMBLY, COMPLETE, | 10/1/2006 | $107.41 | 3 |
| A | K0072 | FRONT CASTER ASSEMBLY, COMPLETE, | 10/1/2006 | $60.76 | 3 |
| A | K0073 | CASTER PIN LOCK, EACH | 10/1/2006 | $32.90 | 3 |
| A | K0074 | PNEUMATIC CASTER TIRE, ANY SIZE, | 1/1/2006 | INVALID | N |
| A | K0075 | SEMI-PNEUMATIC CASTER TIRE, ANY | 1/1/2006 | INVALID | N |
| A | K0076 | SOLID CASTER TIRE, ANY SIZE, EAC | 1/1/2006 | INVALID | N |
| A | K0077 | FRONT CASTER ASSEMBLY, COMPLETE, | 10/1/2006 | $57.84 | 3 |
| A | K0078 | PNEUMATIC CASTER TIRE TUBE, EACH | 1/1/2006 | INVALID | N |
| A | K0079 | WHEEL LOCK EXTENSION, PAIR | 4/1/2004 | INVALID | N |
| A | K0080 | ANTI-ROLLBACK DEVICE, PAIR | 4/1/2004 | INVALID | N |
| A | K0081 | WHEEL LOCK ASSEMBLY, COMPLETE, E | 1/1/2005 | INVALID | N |
| A | K0082 | 22 NF NON-SEALED LEAD ACID BATTE | 4/1/2004 | INVALID | N |
| A | K0083 | 22 NF SEALED LEAD ACID BATTERY, | 4/1/2004 | INVALID | N |
| A | K0084 | GROUP 24 NON-SEALED LEAD ACID BA | 4/1/2004 | INVALID | N |
| A | K0085 | GROUP 24 SEALED LEAD ACID BATTER | 4/1/2004 | INVALID | N |
| A | K0086 | U-1 NON-SEALED LEAD ACID BATTERY | 4/1/2004 | INVALID | N |
| A | K0087 | U-1 SEALED LEAD ACID BATTERY, EA | 4/1/2004 | INVALID | N |
| A | K0088 | BATTERY CHARGER, SINGLE MODE, FO | 4/1/2004 | INVALID | N |
| A | K0089 | BATTERY CHARGER, DUAL MODE, FOR | 4/1/2004 | INVALID | N |
| A | K0090 | REAR WHEEL TIRE FOR POWER WHEELC | 1/1/2007 | INVALID | N |
| A | K0091 | REAR WHEEL TIRE TUBE OTHER THAN | 1/1/2007 | INVALID | N |
| A | K0092 | REAR WHEEL ASSEMBLY FOR POWER WH | 1/1/2007 | INVALID | N |
| A | K0093 | REAR WHEEL, ZERO PRESSURE TIRE T | 1/1/2007 | INVALID | N |
| A | K0094 | WHEEL TIRE FOR POWER BASE, ANY S | 1/1/2007 | INVALID | N |
| A | K0095 | WHEEL TIRE TUBE OTHER THAN ZERO | 1/1/2007 | INVALID | N |
| A | K0096 | WHEEL ASSEMBLY FOR POWER BASE, C | 1/1/2007 | INVALID | N |
| A | K0097 | WHEEL ZERO PRESSURE TIRE TUBE (F | 1/1/2007 | INVALID | N |
| A | K0098 | DRIVE BELT FOR POWER WHEELCHAIR | 10/1/2006 | $25.96 | 3 |
| A | K0099 | FRONT CASTER FOR POWER WHEELCHAI | 1/1/2007 | INVALID | N |
| A | K0100 | AMPUTEE ADAPTER, PART | 4/1/2004 | INVALID | N |
| A | K0101 | ONE-ARM DRIVE ATTACHMENT | 7/1/2003 | INVALID | N |
| A | K0102 | CRUTCH AND CANE HOLDER, EACH | 1/1/2006 | INVALID | N |
| A | K0103 | TRANSFER BOARD, LESS THAN 25 INC | 4/1/2004 | INVALID | N |
| A | K0104 | CYLINDER TANK CARRIER, EACH | 1/1/2006 | INVALID | N |
| A | K0105 | IV HANGER, EACH | 10/1/2006 | $97.76 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | K0106 | ARM TROUGH, EACH | 1/1/2006 | INVALID | N |
| A | K0107 | WHEELCHAIR TRAY | 4/1/2004 | INVALID | N |
| A | K0108 | OTHER WHEELCHAIR ACCESSORIES | 10/1/2005 | $12,384.00 | 3 |
| A | K0112 | TRUNK SUPPORT DEVICE, VEST TYPE, | 4/1/2004 | INVALID | N |
| A | K0113 | TRUNK SUPPORT DEVICE, VEST TYPE, | 4/1/2004 | INVALID | N |
| A | K0114 | BACK SUPPORT SYSTEM FOR USE WITH | 1/1/2005 | INVALID | N |
| A | K0115 | ORTHOTIC SEATING SYSTEM, BACK MO | 1/1/2005 | INVALID | N |
| A | K0116 | ORTHOTIC SEATING SYSTEM, COMBINE | 1/1/2005 | INVALID | N |
| A | K0183 | NASAL APPLICATION DEVICE, USED W | 7/1/2003 | INVALID | N |
| A | K0184 | NASAL SINGLE PIECE INTERFACE, RE | 7/1/2003 | INVALID | N |
| A | K0185 | HEADGEAR, USED WITH POSITIVE AIR | 7/1/2003 | INVALID | N |
| A | K0186 | CHIN STRAP, USED WITH POSITIVE A | 7/1/2003 | INVALID | N |
| A | K0187 | TUBING, USED WITH POSITIVE AIRWA | 7/1/2003 | INVALID | N |
| A | K0188 | FILTER, DISPOSABLE, USED WITH PO | 7/1/2003 | INVALID | N |
| A | K0189 | FILTER, NON-DISPOSABLE, USED WIT | 7/1/2003 | INVALID | N |
| A | K0268 | HUMIDIFIER, NON-HEATED, USED WIT | 4/1/2004 | INVALID | N |
| A | K0452 | WHEELCHAIR BEARINGS, ANY TYPE | 1/1/2006 | INVALID | N |
| A | K0460 | POWER ADD-ON, TO CONVERT MANUAL | 4/1/2004 | INVALID | N |
| A | K0461 | POWER ADD-ON, TO CONVERT MANUAL | 4/1/2004 | INVALID | N |
| A | K0531 | HUMIDIFIER, HEATED, USED WITH PO | 4/1/2004 | INVALID | N |
| A | K0532 | RESPIRATORY ASSIST DEVICE, BI-LE | 4/1/2004 | INVALID | N |
| A | K0533 | RESPIRATORY ASSIST DEVICE, BI-LE | 4/1/2004 | INVALID | N |
| A | K0534 | RESPIRATORY ASSIST DEVICE, BI-LE | 4/1/2004 | INVALID | N |
| A | K0539 | DRESSING SET FOR NEGATIVE PRESSU | 4/1/2004 | INVALID | N |
| A | K0540 | CANISTER SET FOR NEGATIVE PRESSU | 4/1/2004 | INVALID | N |
| A | K0549 | HOSPITAL BED, HEAVY DUTY, EXTRA | 4/1/2004 | INVALID | N |
| A | K0550 | HOSPITAL BED, EXTRA HEAVY DUTY, | 4/1/2004 | INVALID | N |
| A | K0551 | RESIDUAL LIMB SUPPORT SYSTEM, SO | 7/1/2003 | INVALID | N |
| A | K0552 | SUPPLIES FOR EXTERNAL DRUG INFUS | 10/1/2006 | $2.58 | 3 |
| A | K0556 | ADD TO LOWER EXTREMITY, BELOW KN | 4/1/2004 | INVALID | N |
| A | K0557 | ADD TO LOWER EXTREMITY, BELOW KN | 4/1/2004 | INVALID | N |
| A | K0558 | ADD TO LOWER EXTREMITY, BELOW/AB | 4/1/2004 | INVALID | N |
| A | K0559 | ADD TO LOWER EXTREMITY, BELOW/AB | 4/1/2004 | INVALID | N |
| A | K0561 | OSTOMY SKIN BARRIER, NON-PECTIN | 7/1/2003 | INVALID | N |
| A | K0562 | OSTOMY SKIN BARRIER, PECTIN-BASE | 7/1/2003 | INVALID | N |
| A | K0563 | OSTOMY SKIN BARRIER, WITH FLANGE | 7/1/2003 | INVALID | N |
| A | K0564 | OSTOMY SKIN BARRIER, WITH FLANGE | 7/1/2003 | INVALID | N |
| A | K0565 | OSTOMY SKIN BARRIER, WITH FLANGE | 7/1/2003 | INVALID | N |
| A | K0566 | OSTOMY SKIN BARRIER, WITH FLANGE | 7/1/2003 | INVALID | N |
| A | K0567 | OSTOMY POUCH, DRAINABLE, WITH KA | 7/1/2003 | INVALID | N |
| A | K0568 | OSTOMY POUCH, DRAINABLE, WITH ST | 7/1/2003 | INVALID | N |
| A | K0569 | OSTOMY POUCH, DRAINABLE, HIGH OU | 7/1/2003 | INVALID | N |
| A | K0570 | OSTOMY SKIN BARRIER, WITH FLANGE | 7/1/2003 | INVALID | N |
| A | K0571 | OSTOMY SKIN BARRIER, WITH FLANGE | 7/1/2003 | INVALID | N |
| A | K0572 | TAPE, NON-WATERPROOF, PER 18 SQU | 7/1/2003 | INVALID | N |
| A | K0573 | TAPE, WATERPROOF, PER 18 SQUARE | 7/1/2003 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | K0574 | ADDITION TO OSTOMY POUCH, FILTER | 7/1/2003 | INVALID | N |
| A | K0575 | ADDITION TO OSTOMY POUCH, RUSTLE | 7/1/2003 | INVALID | N |
| A | K0576 | ADDITION TO OSTOMY POUCH, FRICTI | 7/1/2003 | INVALID | N |
| A | K0577 | ADDITION TO OSTOMY POUCH, ODOR B | 7/1/2003 | INVALID | N |
| A | K0578 | ADDITION TO OSTOMY POUCH, FAUCET | 7/1/2003 | INVALID | N |
| A | K0579 | ADDITION TO OSTOMY POUCH, ABSORB | 7/1/2003 | INVALID | N |
| A | K0580 | ADDITION TO OSTOMY POUCH, FLANGE | 7/1/2003 | INVALID | N |
| A | K0581 | OSTOMY POUCH, CLOSED,WITH BARRIE | 4/1/2004 | INVALID | N |
| A | K0582 | OSTOMY POUCH, CLOSED,WITH BARRIE | 4/1/2004 | INVALID | N |
| A | K0583 | OSTOMY POUCH, CLOSED; WITHOUT BA | 4/1/2004 | INVALID | N |
| A | K0584 | OSTOMY POUCH, CLOSED; FOR USE ON | 4/1/2004 | INVALID | N |
| A | K0585 | OSTOMY POUCH, CLOSED; FOR USE ON | 4/1/2004 | INVALID | N |
| A | K0586 | OSTOMY POUCH, CLOSED; FOR USE ON | 4/1/2004 | NC | 9 |
| A | K0587 | OSTOMY POUCH, DRAINABLE, WITH BA | 4/1/2004 | INVALID | N |
| A | K0588 | OSTOMY POUCH, DRAINABLE; FOR USE | 4/1/2004 | INVALID | N |
| A | K0589 | OSTOMY POUCH, DRAINABLE; FOR USE | 4/1/2004 | INVALID | N |
| A | K0590 | OSTOMY POUCH, DRAINABLE; FOR USE | 4/1/2004 | INVALID | N |
| A | K0591 | OSTOMY POUCH, URINARY, WITH EXTE | 4/1/2004 | INVALID | N |
| A | K0592 | OSTOMY POUCH, URINARY, W/BARRIER | 4/1/2004 | INVALID | N |
| A | K0593 | OSTOMY POUCH, URINARY, WITH EXTE | 4/1/2004 | INVALID | N |
| A | K0594 | OSTOMY POUCH, URINARY; W/BARRIER | 4/1/2004 | INVALID | N |
| A | K0595 | OSTOMY POUCH, URINARY; FOR USE O | 4/1/2004 | INVALID | N |
| A | K0596 | OSTOMY POUCH, URINARY; FOR USE O | 4/1/2004 | INVALID | N |
| A | K0597 | OSTOMY POUCH, URINARY; FOR USE O | 4/1/2004 | INVALID | N |
| A | K0600 | FUNCTIONAL NEUROMUSCULAR STIMULA | 1/1/2006 | INVALID | N |
| A | K0601 | REPLACEMENT BATTERY FOR EXTERNAL | 10/1/2006 | $1.10 | 3 |
| A | K0602 | REPLACEMENT BATTERY FOR EXTERNAL | 10/1/2006 | $6.36 | 3 |
| A | K0603 | REPLACEMENT BATTERY FOR EXTERNAL | 10/1/2006 | $0.57 | 3 |
| A | K0604 | REPLACEMENT BATTERY FOR EXTERNAL | 10/1/2006 | $6.09 | 3 |
| A | K0605 | REPLACEMENT BATTERY FOR EXTERNAL | 10/1/2006 | $14.60 | 3 |
| A | K0607 | REPLACEMENT BATTERY FOR AUTOMATE | 1/1/2004 | NC | 9 |
| A | K0608 | REPLACEMENT GARMENT FOR USE WITH | 1/1/2004 | NC | 9 |
| A | K0609 | REPLACEMENT ELECTRODES FOR USE W | 1/1/2004 | NC | 9 |
| A | K0618 | TLSO, SAGITTAL-CORONAL CONTROL, | 1/1/2006 | INVALID | N |
| A | K0619 | TLSO, SAGITTAL-CORONAL, MODULAR | 1/1/2006 | INVALID | N |
| A | K0620 | TUBULAR ELASTIC DRESSING, ANY WI | 1/1/2006 | INVALID | N |
| A | K0628 | FOR DIABETICS ONLY, MULTIPLE DEN | 1/1/2006 | INVALID | N |
| A | K0629 | FOR DIABETICS ONLY, MULT DENSITY | 1/1/2006 | INVALID | N |
| A | K0630 | SACROILIAC ORTHOSIS, FLEXIBLE, P | 1/1/2006 | INVALID | N |
| A | K0631 | SACROILIAC ORTHOSIS, FLEXIBLE, P | 1/1/2006 | INVALID | N |
| A | K0632 | SACROILIAC ORTHOSIS, PROVIDES PE | 1/1/2006 | INVALID | N |
| A | K0633 | SACROILIAC ORTHOSIS, PROVIDES PE | 1/1/2006 | INVALID | N |
| A | K0634 | LUMBAR ORTHOSIS, FLEXIBLE, PROVI | 1/1/2006 | INVALID | N |
| A | K0635 | LUMBAR ORTHOSIS, SAGITTAL CONTRO | 1/1/2006 | INVALID | N |
| A | K0636 | LUMBAR ORTHOSIS, SAGITTAL CONTRO | 1/1/2006 | INVALID | N |
| A | K0637 | LUMBAR-SACRAL ORTHOSIS, FLEXIBLE | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | K0638 | LUMBAR-SACRAL ORTHOSIS, FLEXIBLE | 1/1/2006 | INVALID | N |
| A | K0639 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0640 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0641 | LSO, SAGITTAL CONTROL, W/RIGID A | 1/1/2006 | INVALID | N |
| A | K0642 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0643 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0644 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0645 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0646 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2005 | $820.27 | 3 |
| A | K0647 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0648 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0649 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | INVALID | N |
| A | K0650 | GENERAL USE WHEELCHAIR SEAT CUSH | 1/1/2005 | INVALID | N |
| A | K0651 | GENERAL USE WHEELCHAIR SEAT CUSH | 1/1/2005 | INVALID | N |
| A | K0652 | SKIN PROTECTION WHEELCHAIR SEAT | 1/1/2005 | INVALID | N |
| A | K0653 | SKIN PROTECTION WHEELCHAIR SEAT | 1/1/2005 | INVALID | N |
| A | K0654 | POSITIONING WHEELCHAIR SEAT CUSH | 1/1/2005 | INVALID | N |
| A | K0655 | POSITIONING WHEELCHAIR SEAT CUSH | 1/1/2005 | INVALID | N |
| A | K0656 | SKIN PROTECTION AND POSITIONING | 1/1/2005 | INVALID | N |
| A | K0657 | SKIN PROTECTION AND POSITIONING | 1/1/2005 | INVALID | N |
| A | K0658 | CUSTOM FABRICATED WHEELCHAIR SEA | 1/1/2005 | INVALID | N |
| A | K0659 | WHEELCHAIR SEAT CUSHION POWERED | 1/1/2005 | INVALID | N |
| A | K0660 | GENERAL USE WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| A | K0661 | GENERAL USE WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| A | K0662 | POSITIONING WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| A | K0663 | POSITIONING WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| A | K0664 | POSITIONING WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| A | K0665 | POSITIONING WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| A | K0666 | CUSTOM FABRICATED WHEELCHAIR BAC | 1/1/2005 | INVALID | N |
| A | K0667 | MOUNTING HARDWARE, ANY TYPE, FOR | 1/1/2005 | INVALID | N |
| A | K0668 | REPLACEMENT COVER FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| A | K0669 | WHEELCHAIR ACCESSORY, WHEELCHAIR | 7/1/2004 | NC | 9 |
| A | K0731 | LITHIUM ION BATTERY FOR USE WITH | 1/1/2006 | INVALID | N |
| A | K0732 | LITHIUM ION BATTERY FOR USE W/CO | 1/1/2006 | INVALID | N |
| A | K0733 | POWER WHEELCHAIR ACCESSORY, 12-2 | 10/1/2006 | $30.21 | 3 |
| A | K0734 | SKIN PROTECTION WHEELCHAIR SEAT | 10/1/2006 | $331.47 | 3 |
| A | K0735 | SKIN PROTECTION WHEELCHAIR SEAT | 10/1/2006 | $421.78 | 3 |
| A | K0736 | SKIN PROTECTION AND POSITIONING | 10/1/2006 | $334.19 | 3 |
| A | K0737 | SKIN PROTECTION AND POSITIONING | 10/1/2006 | $423.06 | 3 |
| A | K0800 | POWER OPERATED VEHICLE, GRP 1 ST | 10/1/2006 | $0.01 | 3 |
| A | K0801 | POWER OPERATED VEHICLE, GRP 1 VE | 10/1/2006 | $0.01 | 3 |
| A | K0802 | POWER OPERATED VEHICLE, GRP 1 VE | 10/1/2006 | $0.01 | 3 |
| A | K0806 | POWER OPERATED VEHICLE, GRP 2 ST | 11/15/2006 | NC | 9 |
| A | K0807 | OWER OPERATED VEHICLE, GRP 2 VER | 11/15/2006 | NC | 9 |
| A | K0808 | POWER OPERATED VEHICLE, GRP 2 VE | 11/15/2006 | NC | 9 |
| A | K0812 | POWER OPERATED VEHICLE, NOT OTHE | 11/15/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | K0813 | POWER WHLCHR, GRP 1 STANDARD, PO | 11/15/2006 | $2,228.30 | 3 |
| A | K0814 | POWER WHLCHR, GRP 1 STANDARD, PO | 11/15/2006 | $2,807.60 | 3 |
| A | K0815 | POWER WHLCHR, GRP 1 STANDARD, SL | 11/15/2006 | $3,449.10 | 3 |
| A | K0816 | POWER WHLCHR, GRP 1 STANDARD, CA | 11/15/2006 | $3,292.10 | 3 |
| A | K0820 | POWER WHLCHR, GRP 2 STANDARD, PO | 11/15/2006 | $2,509.60 | 3 |
| A | K0821 | POWER WHLCHR, GRP 2 STANDARD, PO | 11/15/2006 | $3,157.60 | 3 |
| A | K0822 | POWER WHLCHR, GRP 2 STANDARD, SL | 11/15/2006 | $3,913.00 | 3 |
| A | K0823 | POWER WHLCHR, GRP 2 STANDARD, CA | 11/15/2006 | $3,948.50 | 3 |
| A | K0824 | POWER WHLCHR, GRP 2 HEAVY DUTY, | 11/15/2006 | $4,759.00 | 3 |
| A | K0825 | POWER WHLCHR, GRP 2 HEAVY DUTY, | 11/15/2006 | $3,952.00 | 3 |
| A | K0826 | POWER WHLCHR, GRP 2 VERY HEAVY D | 11/15/2006 | $6,185.70 | 3 |
| A | K0827 | POWER WHLCHR, GRP 2 VERY HEAVY D | 11/15/2006 | $4,725.70 | 3 |
| A | K0828 | POWER WHLCHR, GRP 2 EXTRA HEAVY | 11/15/2006 | $6,824.40 | 3 |
| A | K0829 | POWER WHLCHR, GRP 2 EXTRA HEAVY | 11/15/2006 | $5,623.80 | 3 |
| A | K0830 | POWER WHLCHR, GRP 2 STANDARD, SE | 11/15/2006 | NC | 9 |
| A | K0831 | POWER WHLCHR, GRP 2 STANDARD, SE | 11/15/2006 | NC | 9 |
| A | K0835 | POWER WHLCHR, GRP 2 STNDRD, SING | 11/15/2006 | $4,049.80 | 3 |
| A | K0836 | POWER WHLCHR, GRP 2 STANDARD, SI | 11/15/2006 | $4,124.00 | 3 |
| A | K0837 | POWER WHLCHR, GRP 2 HEAVY DUTY, | 11/15/2006 | $4,759.00 | 3 |
| A | K0838 | POWER WHLCHR, GRP 2 HEAVY DUTY, | 11/15/2006 | $4,294.60 | 3 |
| A | K0839 | POWER WHLCHR, GRP 2 VERY HEAVY D | 11/15/2006 | $6,185.70 | 3 |
| A | K0840 | POWER WHLCHR, GRP 2 EXTRA HEAVY | 11/15/2006 | $8,350.60 | 3 |
| A | K0841 | POWER WHLCHR, GRP 2 STNDRD, MULT | 11/15/2006 | $4,551.50 | 3 |
| A | K0842 | POWER WHLCHR, GRP 2 STNDRD, MULT | 11/15/2006 | $4,551.50 | 3 |
| A | K0843 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $5,088.20 | 3 |
| A | K0848 | POWER WHLCHR, GRP 3 STANDARD, SL | 11/15/2006 | $5,173.10 | 3 |
| A | K0849 | POWER WHLCHR, GRP 3 STANDARD, CA | 11/15/2006 | $4,972.10 | 3 |
| A | K0850 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $5,742.10 | 3 |
| A | K0851 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $5,519.20 | 3 |
| A | K0852 | POWER WHLCHR, GRP 3 VERY HEAVY D | 11/15/2006 | $6,971.00 | 3 |
| A | K0853 | POWER WHLCHR, GRP 3 VERY HEAVY D | 11/15/2006 | $7,164.00 | 3 |
| A | K0854 | POWER WHLCHR, GRP 3 EXTRA HEAVY | 11/15/2006 | $9,115.60 | 3 |
| A | K0855 | POWER WHLCHR, GRP 3 EXTRA HEAVY | 11/15/2006 | $8,525.30 | 3 |
| A | K0856 | POWER WHLCHR, GRP 3 STNDRD, SING | 11/15/2006 | $5,561.30 | 3 |
| A | K0857 | POWER WHLCHR, GRP 3 STNDRD, SING | 11/15/2006 | $5,672.50 | 3 |
| A | K0858 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $6,926.20 | 3 |
| A | K0859 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $7,090.60 | 3 |
| A | K0860 | POWER WHLCHR, GRP 3 VERY HEAVY D | 11/15/2006 | $9,734.10 | 3 |
| A | K0861 | POWER WHLCHR, GRP 3 STNDRD, MULT | 11/15/2006 | $5,570.10 | 3 |
| A | K0862 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $6,926.20 | 3 |
| A | K0863 | POWER WHLCHR, GRP 3 VERY HEAVY D | 11/15/2006 | $9,734.10 | 3 |
| A | K0864 | POWER WHLCHR, GRP 3 EXTRA HEAVY | 11/15/2006 | $11,583.30 | 3 |
| A | K0868 | POWER WHLCHR, GRP 4 STNDRD, SLIN | 11/15/2006 | NC | 9 |
| A | K0869 | POWER WHLCHR, GRP 4 STNDRD, CAPT | 11/15/2006 | NC | 9 |
| A | K0870 | POWER WHLCHR, GRP 4 HEAVY DUTY, | 11/15/2006 | NC | 9 |
| A | K0871 | POWER WHLCHR, GRP 4 VERY HEAVY D | 11/15/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | K0877 | POWER WHLCHR, GRP 4 STNDRD, SING | 11/15/2006 | NC | 9 |
| A | K0878 | POWER WHLCHR, GRP 4 STNDRD, SING | 11/15/2006 | NC | 9 |
| A | K0879 | POWER WHLCHR, GRP 4 HEAVY DUTY, | 11/15/2006 | NC | 9 |
| A | K0880 | POWER WHLCHR, GRP 4 VERY HEAVY D | 11/15/2006 | NC | 9 |
| A | K0884 | POWER WHLCHR, GRP 4 STNDRD, MLTP | 11/15/2006 | NC | 9 |
| A | K0885 | POWER WHEELCHAIR, GROUP 4 STANDA | 11/15/2006 | NC | 9 |
| A | K0886 | POWER WHLCHR, GRP 4 HEAVY DUTY, | 11/15/2006 | NC | 9 |
| A | K0890 | POWER WHLCHR, GRP 5 PEDIATRIC, S | 11/15/2006 | $0.01 | 5 |
| A | K0891 | POWER WHLCHR, GRP 5 PEDIATRIC, M | 11/15/2006 | $0.01 | 5 |
| A | K0898 | POWER WHEELCHAIR, NO OTHERWISE C | 11/15/2006 | NC | 9 |
| A | K0899 | POWER MOBILITY DEVICE, NOT CODED | 11/15/2006 | NC | 9 |
| A | L0100 | CRANIAL ORTHOSIS (HELMET), WITH | 1/1/2007 | INVALID | N |
| A | L0110 | CRANIAL ORTHOSIS (HELMET), WITH | 1/1/2007 | INVALID | N |
| A | L0112 | CRANIAL CERVICAL ORTHOSIS, CONGE | 10/1/2006 | $1,057.21 | 3 |
| A | L0120 | CERVICAL, FLEXIBLE, NONADJUSTABL | 10/1/2006 | $23.94 | 3 |
| A | L0130 | CERVICAL, FLEXIBLE, THERMOPLASTI | 10/1/2006 | $133.18 | 3 |
| A | L0140 | CERVICAL, SEMI-RIGID, ADJUSTABLE | 10/1/2006 | $57.75 | 3 |
| A | L0150 | CERVICAL, SEMI-RIGID, ADJUSTABLE | 10/1/2006 | $76.91 | 3 |
| A | L0160 | CERVICAL, SEMI-RIGID, WIRE FRAME | 10/1/2006 | $105.98 | 3 |
| A | L0170 | CERVICAL, COLLAR, MOLDED TO PATI | 10/1/2006 | $514.04 | 3 |
| A | L0172 | CERVICAL, COLLAR, SEMI-RIGID THE | 10/1/2006 | $92.77 | 3 |
| A | L0174 | CERVICAL, COLLAR, SEMI-RIGID THE | 10/1/2006 | $195.33 | 3 |
| A | L0180 | CERVICAL, MULTIPLE POST COLLAR, | 10/1/2006 | $284.79 | 3 |
| A | L0190 | CERVICAL, MULTIPLE POST COLLAR, | 10/1/2006 | $400.66 | 3 |
| A | L0200 | CERVICAL, MULTIPLE POST COLLAR, | 10/1/2006 | $447.40 | 3 |
| A | L0210 | THORACIC, RIB BELT | 10/1/2006 | $29.95 | 3 |
| A | L0220 | THORACIC, RIB BELT, CUSTOM FABRI | 10/1/2006 | $89.14 | 3 |
| A | L0300 | THORACIC-LUMBAR-SACRAL-ORTHOSES | 7/1/2003 | INVALID | N |
| A | L0310 | TLSO, FLEXIBLE, (DORSO-LUMBAR SU | 7/1/2003 | INVALID | N |
| A | L0315 | TLSO, FLEXIBLE DORSO-LUMBAR SURG | 7/1/2003 | INVALID | N |
| A | L0317 | TLSO, FLEXIBLE DORSO-LUMBAR SURG | 7/1/2003 | INVALID | N |
| A | L0320 | TLSO, ANTERIOR-POSTERIOR CONTROL | 7/1/2003 | INVALID | N |
| A | L0321 | TLSO, ANTERIOR-POSTERIOR CONTROL | 7/1/2003 | INVALID | N |
| A | L0330 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0331 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0340 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0350 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0360 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0370 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0380 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0390 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0391 | TLSO, ANTERIOR-POSTERIOR-LATREAL | 7/1/2003 | INVALID | N |
| A | L0400 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0410 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0420 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0430 | SPINAL ORTHOSIS, ANTERIOR-POSTER | 10/1/2006 | $906.63 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L0440 | TLSO, ANTERIOR-POSTERIOR-LATERAL | 7/1/2003 | INVALID | N |
| A | L0450 | TLSO, FLEXIBLE, PROVIDES TRUNK S | 10/1/2006 | $166.09 | 3 |
| A | L0452 | TLSO, FLEXIBLE, PROVIDES TRUNK S | 10/1/2006 | $276.09 | 3 |
| A | L0454 | TLSO FLEXIBLE, PROVIDES TRUNK SU | 10/1/2006 | $272.52 | 3 |
| A | L0456 | TLSO, FLEXIBLE, PROVIDES TRUNK S | 10/1/2006 | $352.63 | 3 |
| A | L0458 | TLSO, TRIPLANAR CONTROL, MODULAR | 10/1/2006 | $536.13 | 3 |
| A | L0460 | TLSO, TRIPLANAR CONTROL, MODULAR | 10/1/2006 | $536.13 | 3 |
| A | L0462 | TLSO, TRIPLANAR CONTROL, MODULAR | 10/1/2006 | $536.13 | 3 |
| A | L0464 | TLSO, TRIPLANAR CONTROL, MODULAR | 10/1/2006 | $536.13 | 3 |
| A | L0466 | TLSO, SAGITTAL CONTROL, RIGID PO | 10/1/2006 | $341.41 | 3 |
| A | L0468 | TLSO, SAGITTAL-CORONAL CONTROL, | 10/1/2006 | $409.80 | 3 |
| A | L0470 | TLSO, TRIPLANAR CONTROL, RIGID P | 10/1/2006 | $491.86 | 3 |
| A | L0472 | TLSO, TRIPLANAR CONTROL, HYPEREX | 10/1/2006 | $349.28 | 3 |
| A | L0474 | TLSO, TRIPLANAR CONTROL, RIGID P | 4/1/2004 | NC | 9 |
| A | L0476 | TLSO, SAGITTAL-CORONAL CONTROL, | 1/1/2005 | INVALID | N |
| A | L0478 | TLSO, SAGITTAL-CORONAL CONTROL, | 1/1/2005 | INVALID | N |
| A | L0480 | TLSO, TRIPLANAR CONTROL, ONE PIE | 10/1/2006 | $1,204.38 | 3 |
| A | L0482 | TLSO, TRIPLANAR CONTROL, ONE PIE | 10/1/2006 | $1,227.45 | 3 |
| A | L0484 | TLSO, TRIPLANAR CONTROL, TWO PIE | 10/1/2006 | $1,285.99 | 3 |
| A | L0486 | TLSO, TRIPLANAR CONTROL, TWO PIE | 10/1/2006 | $1,364.37 | 3 |
| A | L0488 | TLSO, TRIPLANAR CONTROL, ONE PIE | 10/1/2006 | $816.36 | 3 |
| A | L0490 | TLSO, SAGITTAL-CORONAL CONTROL, | 10/1/2006 | $222.28 | 3 |
| A | L0491 | TLSO, SAGITTAL-CORONAL CONTROL, | 10/1/2006 | $603.47 | 3 |
| A | L0492 | TLSO, SAGITTAL-CORONAL CONTROL, | 10/1/2006 | $396.93 | 3 |
| A | L0500 | LUMBAR-SACRAL-ORTHOSIS (LSO), FL | 1/1/2005 | INVALID | N |
| A | L0510 | LSO, FLEXIBLE (LUMBO-SACRAL SUPP | 1/1/2005 | INVALID | N |
| A | L0515 | LSO, ANTERIOR-POSTERIOR CONTROL, | 1/1/2005 | INVALID | N |
| A | L0520 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| A | L0530 | LSO, ANTERIOR-POSTERIOR CONTROL | 1/1/2005 | INVALID | N |
| A | L0540 | LSO, LUMBAR FLEXION (WILLIAMS FL | 1/1/2005 | INVALID | N |
| A | L0550 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| A | L0560 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| A | L0561 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| A | L0565 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| A | L0600 | SACROILIAC, FLEXIBLE (SACROILIAC | 1/1/2005 | INVALID | N |
| A | L0610 | SACROILIAC, FLEXIBLE (SACROILIAC | 1/1/2005 | INVALID | N |
| A | L0620 | SACROILIAC, SEMI-RIGID (GOLDTHWA | 1/1/2005 | INVALID | N |
| A | L0621 | SACROILIAC ORTHOSIS, FLEXIBLE, P | 10/1/2006 | $90.97 | 3 |
| A | L0622 | SACROILIAC ORTHOSIS, FLEXIBLE, P | 10/1/2006 | $241.43 | 3 |
| A | L0623 | SACROILIAC ORTHOSIS, PROVIDES PE | 1/1/2006 | $0.01 | 3 |
| A | L0624 | SACROILIAC ORTHOSIS, PROVIDES PE | 1/1/2006 | $0.01 | 3 |
| A | L0625 | LUMBAR ORTHOSIS, FLEXIBLE, PROVI | 10/1/2006 | $43.27 | 3 |
| A | L0626 | LUMBAR ORTHOSIS, SAGITTAL CONTRO | 10/1/2006 | $61.25 | 3 |
| A | L0627 | LUMBAR ORTHOSIS, SAGITTAL CONTRO | 10/1/2006 | $322.98 | 3 |
| A | L0628 | LUMBAR-SACRAL ORTHOSIS, FLEXIBLE | 10/1/2006 | $65.92 | 3 |
| A | L0629 | LUMBAR-SACRAL ORTHOSIS, FLEXIBLE | 1/1/2006 | $0.01 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L0630 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $127.26 | 3 |
| A | L0631 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $806.64 | 3 |
| A | L0632 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | $0.01 | 3 |
| A | L0633 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $225.31 | 3 |
| A | L0634 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 1/1/2006 | $0.01 | 3 |
| A | L0635 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $830.31 | 3 |
| A | L0636 | LUMBAR SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $1,082.60 | 3 |
| A | L0637 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $731.26 | 3 |
| A | L0638 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $1,036.35 | 3 |
| A | L0639 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $883.16 | 3 |
| A | L0640 | LUMBAR-SACRAL ORTHOSIS, SAGITTAL | 10/1/2006 | $822.21 | 3 |
| A | L0700 | CERVICAL-THORACIC-LUMBARSACRAL-O | 10/1/2006 | $1,367.92 | 3 |
| A | L0710 | CTLSO, ANTERIOR-POSTERIOR-LATERA | 10/1/2006 | $1,545.06 | 3 |
| A | L0810 | HALO PROCEDURE, CERVICAL HALO IN | 10/1/2006 | $1,860.35 | 3 |
| A | L0820 | HALO PROCEDURE, CERVICAL HALO IN | 10/1/2006 | $1,827.01 | 3 |
| A | L0830 | HALO PROCEDURE, CERVICAL HALO IN | 10/1/2006 | $2,562.63 | 3 |
| A | L0859 | ADDITION TO HALO PROC, MAGNETIC | 10/1/2006 | $917.03 | 3 |
| A | L0860 | ADDITION TO HALO PROCEDURES, MAG | 1/1/2006 | INVALID | N |
| A | L0861 | ADDITION TO HALO PROCEDURE, REPL | 10/1/2006 | $162.81 | 3 |
| A | L0900 | TORSO SUPPORT, PTOSIS SUPPORT | 7/1/2003 | INVALID | N |
| A | L0910 | TORSO SUPPORT, PTOSIS SUPPORT, C | 7/1/2003 | INVALID | N |
| A | L0920 | TORSO SUPPORT, PENDULOUS ABDOMEN | 7/1/2003 | INVALID | N |
| A | L0930 | TORSO SUPPORT, PENDULOUS ABDOMEN | 7/1/2003 | INVALID | N |
| A | L0940 | TORSO SUPPORT, POSTSURGICAL SUPP | 7/1/2003 | INVALID | N |
| A | L0950 | TORSO SUPPORT, POST SURGICAL SUP | 7/1/2003 | INVALID | N |
| A | L0960 | TORSO SUPPORT, POST SURGICAL SUP | 10/1/2006 | $48.26 | 3 |
| A | L0970 | TLSO CORSET FRONT -H | 10/1/2006 | $77.34 | 3 |
| A | L0972 | LSO CORSET FRONT -H | 10/1/2006 | $69.65 | 3 |
| A | L0974 | TLSO FULL CORSET -H | 10/1/2006 | $125.33 | 3 |
| A | L0976 | LSO FULL CORSET -H | 10/1/2006 | $132.46 | 3 |
| A | L0978 | AXILLARY CRUTCH EXTENSION -H | 10/1/2006 | $138.85 | 3 |
| A | L0980 | PERITONEAL STRAPS PAIR -H | 10/1/2006 | $12.56 | 3 |
| A | L0982 | STOCKING SUPPORTER GRIPS SET OF | 10/1/2006 | $11.72 | 3 |
| A | L0984 | PROTECTIVE BODY SOCK, EACH | 10/1/2006 | $46.26 | 3 |
| A | L0986 | ADDITION TO SPINAL ORTHOSIS, RIG | 7/1/2003 | INVALID | N |
| A | L0999 | ADDITION TO SPINAL ORTHOSIS, NOT | 4/1/1998 | $1,000.00 | 3 |
| A | L1000 | CERVICAL-THORACIC-LUMBAR-SACRAL | 10/1/2006 | $1,645.26 | 3 |
| A | L1001 | CERVICAL THORACIC LUMBAR SACRAL | 1/1/2007 | NC | 9 |
| A | L1005 | TENSION BASED SCOLIOSIS ORTHOSIS | 10/1/2006 | $2,417.63 | 3 |
| A | L1010 | ADDITION TO CERVICAL-THORACIC-LU | 10/1/2006 | $47.10 | 3 |
| A | L1020 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $69.07 | 3 |
| A | L1025 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $84.37 | 3 |
| A | L1030 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $44.20 | 3 |
| A | L1040 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $65.30 | 3 |
| A | L1050 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $69.35 | 3 |
| A | L1060 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $76.26 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L1070 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $68.90 | 3 |
| A | L1080 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $42.60 | 3 |
| A | L1085 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $111.19 | 3 |
| A | L1090 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $67.24 | 3 |
| A | L1100 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $122.21 | 3 |
| A | L1110 | ADDITION TO CTLSO OR SCOLIOSIS O | 10/1/2006 | $202.24 | 3 |
| A | L1120 | ADDITION TO CTLSO SCOLIOSIS ORTH | 10/1/2006 | $33.26 | 3 |
| A | L1200 | THORACIC-LUMBAR-SACRAL-ORTHOSES | 10/1/2006 | $1,413.53 | 3 |
| A | L1210 | ADDITION TO TLSO (LOW PROFILE), | 10/1/2006 | $177.04 | 3 |
| A | L1220 | ADDITION TO TLSO (LOW PROFILE), | 10/1/2006 | $183.36 | 3 |
| A | L1230 | ADDITION TO TLSO (LOW PROFILE), | 10/1/2006 | $384.63 | 3 |
| A | L1240 | ADDITION TO TLSO (LOW PROFILE) L | 10/1/2006 | $56.16 | 3 |
| A | L1250 | ADDITION TO TLSO (LOW PROFILE) A | 10/1/2006 | $51.37 | 3 |
| A | L1260 | ADDITION TO TLSO (LOW PROFILE) A | 10/1/2006 | $54.21 | 3 |
| A | L1270 | ADDITION TO TLSO (LOW PROFILE) A | 10/1/2006 | $52.43 | 3 |
| A | L1280 | ADDITION TO TLSO (LOW PROFILE) R | 10/1/2006 | $60.72 | 3 |
| A | L1290 | ADDITION TO TLSO (LOW PROFILE) L | 10/1/2006 | $54.33 | 3 |
| A | L1300 | OTHER SCOLIOSIS PROCEDURE, BODY | 10/1/2006 | $1,143.00 | 3 |
| A | L1310 | OTHER SCOLIOSIS PROCEDURE, POST- | 10/1/2006 | $1,083.44 | 3 |
| A | L1499 | UNLISTED PROCEDURE FOR SPINAL OR | 3/1/2004 | $900.00 | 3 |
| A | L1500 | THORACIC-HIP-KNEE-ANKLE ORTHOSES | 10/1/2006 | $1,501.25 | 3 |
| A | L1510 | THKAO, STANDING FRAME, WITH OR W | 10/1/2006 | $956.32 | 3 |
| A | L1520 | THKAO SWIVEL WALKER -H | 10/1/2006 | $1,866.88 | 3 |
| A | L1600 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $87.19 | 3 |
| A | L1610 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $29.70 | 3 |
| A | L1620 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $95.51 | 3 |
| A | L1630 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $123.84 | 3 |
| A | L1640 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $326.60 | 3 |
| A | L1650 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $156.65 | 3 |
| A | L1652 | HIP ORTHOSIS, BILATERAL THIGH CU | 10/1/2006 | $269.27 | 3 |
| A | L1660 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $125.48 | 3 |
| A | L1680 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $1,099.21 | 3 |
| A | L1685 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $804.83 | 3 |
| A | L1686 | HIP ORTHOSIS, ABDUCTION CONTROL | 10/1/2006 | $625.85 | 3 |
| A | L1690 | COMBINATION, BILATERAL, LUMBO-SA | 10/1/2006 | $1,365.78 | 3 |
| A | L1700 | LEGG PERTHES ORTHOSIS, (TORONTO | 10/1/2006 | $1,111.27 | 3 |
| A | L1710 | LEGG PERTHES ORTHOSIS, (NEWINGTO | 10/1/2006 | $1,344.53 | 3 |
| A | L1720 | LEGG PERTHES ORTHOSIS, TRILATERA | 10/1/2006 | $937.93 | 3 |
| A | L1730 | LEGG PERTHES ORTHOSIS, (SCOTTISH | 10/1/2006 | $800.26 | 3 |
| A | L1750 | LEGG PERTHES ORTHOSIS, LEGG PERT | 1/1/2006 | INVALID | N |
| A | L1755 | LEGG PERTHES ORTHOSIS, (PATTEN B | 10/1/2006 | $1,071.25 | 3 |
| A | L1800 | KNEE ORTHOSIS, ELASTIC WITH STAY | 10/1/2006 | $45.68 | 3 |
| A | L1810 | KNEE ORTHOSIS, ELASTIC WITH JOIN | 10/1/2006 | $77.14 | 3 |
| A | L1815 | KNEE ORTHOSIS, ELASTIC OR OTHER | 10/1/2006 | $79.53 | 3 |
| A | L1820 | KO, ELASTIC W/CONDYLAR PADS AND | 10/1/2006 | $97.60 | 3 |
| A | L1825 | KNEE ORTHOSIS, ELASTIC KNEE CAP, | 10/1/2006 | $43.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L1830 | KNEE ORTHOSIS, IMMOBILIZER, CANV | 10/1/2006 | $75.65 | 3 |
| A | L1831 | KNEE ORTHOSIS, LOCKING KNEE JOIN | 10/1/2006 | $222.31 | 3 |
| A | L1832 | KNEE ORTHOSIS, ADJUSTABLE KNEE J | 10/1/2006 | $411.36 | 3 |
| A | L1834 | KNEE ORTHOSIS, WITHOUT KNEE JOIN | 10/1/2006 | $525.23 | 3 |
| A | L1836 | KNEE ORTHOSIS, RIGID, W/OUT JOIN | 10/1/2006 | $100.79 | 3 |
| A | L1840 | KNEE ORTHOSIS, DEROTATION, MEDIA | 10/1/2006 | $719.66 | 3 |
| A | L1843 | KNEE ORTHOSIS, SINGLE UPRIGHT, T | 10/1/2006 | $633.73 | 3 |
| A | L1844 | KNEE ORTHOSIS, SINGLE UPRIGHT, T | 4/1/1993 | NC | 9 |
| A | L1845 | KNEE ORTHOSIS, DOUBLE UPRIGHT, T | 10/1/2006 | $574.35 | 3 |
| A | L1846 | KNEE ORTHOSIS, DOUBLE UPRIGHT, T | 10/1/2006 | $892.23 | 3 |
| A | L1847 | KNEE ORTHOSIS, DOUBLE UPRIGHT WI | 10/1/2006 | $406.22 | 3 |
| A | L1850 | KNEE ORTHOSIS, SWEDISH TYPE, PRE | 10/1/2006 | $217.49 | 3 |
| A | L1855 | KNEE ORTHOSIS, MOLDED PLASTIC, T | 10/1/2006 | $776.66 | 3 |
| A | L1858 | KNEE ORTHOSIS, MOLDED PLASTIC, P | 10/1/2006 | $898.48 | 3 |
| A | L1860 | KNEE ORTHOSIS, MODIFICATION OF S | 10/1/2006 | $887.70 | 3 |
| A | L1870 | KNEE ORTHOSIS, DOUBLE UPRIGHT, T | 10/1/2006 | $787.65 | 3 |
| A | L1880 | KNEE ORTHOSIS, DOUBLE UPRIGHT, N | 10/1/2006 | $638.54 | 3 |
| A | L1885 | KNEE ORTHOSIS, SINGLE OR DOUBLE | 4/1/2004 | INVALID | N |
| A | L1900 | ANKLE FOOT ORTHOSIS, SPRING WIRE | 10/1/2006 | $201.25 | 3 |
| A | L1901 | ANKLE ORTHOSIS, ELASTIC, PREFABR | 10/1/2006 | $13.37 | 3 |
| A | L1902 | ANKLE FOOT ORTHOSIS, ANKLE GAUNT | 10/1/2006 | $66.23 | 3 |
| A | L1904 | ANKLE FOOT ORTHOSIS, MOLDED ANKL | 10/1/2006 | $318.18 | 3 |
| A | L1906 | ANKLE FOOT ORTHOSIS, MULTILIGAME | 10/1/2006 | $81.37 | 3 |
| A | L1907 | AFO, SUPRAMALLEOLAR WITH STRAPS, | 10/1/2006 | $425.03 | 3 |
| A | L1910 | ANKLE FOOT ORTHOSIS, POSTERIOR, | 10/1/2006 | $228.88 | 3 |
| A | L1920 | ANKLE FOOT ORTHOSIS, SINGLE UPRI | 10/1/2006 | $303.18 | 3 |
| A | L1930 | ANKLE FOOT ORTHOSIS, PLASTIC OR | 10/1/2006 | $186.93 | 3 |
| A | L1932 | AFO, RIGID ANTERIOR TIBIAL SECTI | 10/1/2006 | $674.04 | 3 |
| A | L1940 | ANKLE FOOT ORTHOSIS, PLASTIC OR | 10/1/2006 | $359.47 | 3 |
| A | L1945 | ANKLE FOOT ORTHOSIS, PLASTIC, RI | 10/1/2006 | $706.77 | 3 |
| A | L1950 | ANKLE FOOT ORTHOSIS, SPIRAL, (IR | 10/1/2006 | $671.97 | 3 |
| A | L1951 | ANKLE FOOT ORTHOSIS, SPIRAL, (IN | 10/1/2006 | $634.38 | 3 |
| A | L1960 | ANKLE FOOT ORTHOSIS, POSTERIOR S | 10/1/2006 | $375.05 | 3 |
| A | L1970 | ANKLE FOOT ORTHOSIS, PLASTIC WIT | 10/1/2006 | $500.49 | 3 |
| A | L1971 | ANKLE FOOT ORTHOSIS, PLASTIC OR | 10/1/2006 | $354.05 | 3 |
| A | L1980 | ANKLE FOOT ORTHOSIS, SINGLE UPRI | 10/1/2006 | $317.59 | 3 |
| A | L1990 | ANKLE FOOT ORTHOSIS, DOUBLE UPRI | 10/1/2006 | $383.76 | 3 |
| A | L2000 | KNEE ANKLE FOOT ORTHOSIS, SINGLE | 10/1/2006 | $943.88 | 3 |
| A | L2005 | KNEE ANKLE FOOT ORTHOSIS, ANY MA | 10/1/2006 | $2,719.03 | 3 |
| A | L2010 | KNEE ANKLE FOOT ORTHOSIS, SINGLE | 10/1/2006 | $826.02 | 3 |
| A | L2020 | KNEE ANKLE FOOT ORTHOSIS, DOUBLE | 10/1/2006 | $1,053.40 | 3 |
| A | L2030 | KNEE ANKLE FOOT ORTHOSIS, DOUBLE | 10/1/2006 | $907.21 | 3 |
| A | L2034 | KNEE ANKLE FOOT ORTHOSIS, FULL P | 10/1/2006 | $1,593.39 | 3 |
| A | L2035 | KAFO, FULL PLASTIC, STATIC (PED | 10/1/2006 | $127.11 | 3 |
| A | L2036 | KNEE ANKLE FOOT ORTHOSIS, FULL P | 10/1/2006 | $1,619.46 | 3 |
| A | L2037 | KNEE ANKLE FOOT ORTHOSIS, FULL P | 10/1/2006 | $1,336.04 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L2038 | KNEE ANKLE FOOT ORTHOSIS, FULL P | 10/1/2006 | $1,125.49 | 3 |
| A | L2039 | KAFO, FULL PLASTIC, SINGLE UPRIG | 1/1/2006 | INVALID | N |
| A | L2040 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $154.60 | 3 |
| A | L2050 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $326.88 | 3 |
| A | L2060 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $462.83 | 3 |
| A | L2070 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $91.00 | 3 |
| A | L2080 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $280.54 | 3 |
| A | L2090 | HIP KNEE ANKLE FOOT ORTHOSIS, TO | 10/1/2006 | $395.59 | 3 |
| A | L2102 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 4/1/2004 | INVALID | N |
| A | L2104 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 4/1/2004 | INVALID | N |
| A | L2106 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $474.20 | 3 |
| A | L2108 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $810.84 | 3 |
| A | L2112 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $327.31 | 3 |
| A | L2114 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $401.63 | 3 |
| A | L2116 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $481.69 | 3 |
| A | L2122 | KNEE ANKLE FOOT ORTHOSIS, FRACTU | 4/1/2004 | INVALID | N |
| A | L2124 | KNEE ANKLE FOOT ORTHOSIS, FRACTU | 4/1/2004 | INVALID | N |
| A | L2126 | KNEE ANKLE FOOT ORTHOSIS, FRACTU | 10/1/2006 | $810.23 | 3 |
| A | L2128 | KNEE ANKLE FOOT ORTHOSIS, FRACTU | 10/1/2006 | $1,546.96 | 3 |
| A | L2132 | KAFO, FRACTURE ORTHOSIS, FEMORAL | 10/1/2006 | $545.81 | 3 |
| A | L2134 | KAFO, FRACTURE ORTHOSIS, FEMORAL | 10/1/2006 | $684.34 | 3 |
| A | L2136 | KAFO, FRACTURE ORTHOSIS, FEMORAL | 10/1/2006 | $800.16 | 3 |
| A | L2180 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $79.24 | 3 |
| A | L2182 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $72.92 | 3 |
| A | L2184 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $83.81 | 3 |
| A | L2186 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $117.28 | 3 |
| A | L2188 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $219.58 | 3 |
| A | L2190 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $59.09 | 3 |
| A | L2192 | ADDITION TO LOWER EXTREMITY FRAC | 10/1/2006 | $241.26 | 3 |
| A | L2200 | ADDITIONS TO LOWER EXTREMITY LIM | 10/1/2006 | $42.90 | 3 |
| A | L2210 | ADDITIONS TO LOWER EXTREMITY DOR | 10/1/2006 | $47.67 | 3 |
| A | L2220 | ADDITIONS TO LOWER EXTREMITY DOR | 10/1/2006 | $65.49 | 3 |
| A | L2230 | ADDITIONS TO LOWER EXTREMITY SPL | 10/1/2006 | $63.75 | 3 |
| A | L2232 | ADDITION TO LOWER EXTREMITY ORTH | 1/1/2005 | NC | 9 |
| A | L2240 | ADDITIONS TO LOWER EXTREMITY ROU | 10/1/2006 | $57.13 | 3 |
| A | L2250 | ADDITIONS TO LOWER EXTREMITY FOO | 10/1/2006 | $320.56 | 3 |
| A | L2260 | ADDITIONS TO LOWER EXTREMITY REI | 10/1/2006 | $135.63 | 3 |
| A | L2265 | ADDITION TO LOWER EXTREMITY, LON | 10/1/2006 | $79.68 | 3 |
| A | L2270 | ADDITIONS TO LOWER EXTREMITY VAR | 10/1/2006 | $48.45 | 3 |
| A | L2275 | ADDITION TO LOWER EXTREMITY, VAR | 10/1/2006 | $105.83 | 3 |
| A | L2280 | ADDITIONS TO LOWER EXTREMITY MOL | 10/1/2006 | $306.85 | 3 |
| A | L2300 | ADDITIONS TO LOWER EXTREMITY ABD | 10/1/2006 | $227.13 | 3 |
| A | L2310 | ADDITIONS TO LOWER EXTREMITY ABD | 10/1/2006 | $110.97 | 3 |
| A | L2320 | ADDITION TO LOWER EXTREMITY, NON | 10/1/2006 | $177.84 | 3 |
| A | L2330 | ADDITION TO LOWER EXTREMITY, LAC | 10/1/2006 | $314.32 | 3 |
| A | L2335 | ADDITION TO LOWER EXTREMITY, ANT | 10/1/2006 | $168.28 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L2340 | ADDITIONS TO LOWER EXTREMITY PRE | 10/1/2006 | $373.43 | 3 |
| A | L2350 | ADDITIONS TO LOWER EXTREMITY PRO | 10/1/2006 | $680.17 | 3 |
| A | L2360 | ADDITIONS TO LOWER EXTREMITY EXT | 10/1/2006 | $46.68 | 3 |
| A | L2370 | ADDITION TO LOWER EXTREMITY, PAT | 10/1/2006 | $185.60 | 3 |
| A | L2375 | ADDITION TO LOWER EXTREMITY, TOR | 10/1/2006 | $76.46 | 3 |
| A | L2380 | ADDITION TO LOWER EXTREMITY, TOR | 10/1/2006 | $84.81 | 3 |
| A | L2385 | ADDITION TO LOWER EXTREMITY, STR | 10/1/2006 | $90.61 | 3 |
| A | L2387 | ADDITION TO LOWER EXTREMITY, POL | 10/1/2006 | $152.87 | 3 |
| A | L2390 | ADDITION TO LOWER EXTREMITY, OFF | 10/1/2006 | $74.06 | 3 |
| A | L2395 | ADDITION TO LOWER EXTREMITY, OFF | 10/1/2006 | $105.86 | 3 |
| A | L2397 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $89.42 | 3 |
| A | L2405 | ADDITION TO KNEE JOINT, DROP LOC | 10/1/2006 | $37.30 | 3 |
| A | L2415 | ADDITION TO KNEE LOCK W/INTEGRAT | 10/1/2006 | $95.43 | 3 |
| A | L2425 | ADDITION TO KNEE JOINT, DISC OR | 10/1/2006 | $112.64 | 3 |
| A | L2430 | ADDITION TO KNEE JOINT, RATCHET | 10/1/2006 | $69.44 | 3 |
| A | L2435 | ADDITION TO KNEE JOINT, POLYCENT | 1/1/2005 | INVALID | N |
| A | L2492 | ADDITION TO KNEE JOINT, LIFT LOO | 10/1/2006 | $71.55 | 3 |
| A | L2500 | ADDITION TO LOWER EXTREMITY, THI | 10/1/2006 | $229.19 | 3 |
| A | L2510 | ADDITIONS TO LOWER EXTREMITY THI | 10/1/2006 | $559.07 | 3 |
| A | L2520 | ADDITIONS TO LOWER EXTREMITY THI | 10/1/2006 | $329.37 | 3 |
| A | L2525 | ADD TO LOWER EXTREM, THIGH/WGHT | 10/1/2006 | $877.99 | 3 |
| A | L2526 | ADD TO LOWER EXTREMITY, THIGH/WE | 10/1/2006 | $617.93 | 3 |
| A | L2530 | ADDITIONS TO LOWER EXTREMITY THI | 10/1/2006 | $165.99 | 3 |
| A | L2540 | ADDITIONS TO LOWER EXTREMITY THI | 10/1/2006 | $360.82 | 3 |
| A | L2550 | ADDITIONS TO LOWER EXTREMITY THI | 10/1/2006 | $212.03 | 3 |
| A | L2570 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $332.01 | 3 |
| A | L2580 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $371.13 | 3 |
| A | L2600 | ADDITIONS TO LOWER EXTREMITY PEL | 10/1/2006 | $160.96 | 3 |
| A | L2610 | ADDITIONS TO LOWER EXTREMITY PEL | 10/1/2006 | $193.98 | 3 |
| A | L2620 | ADDITIONS TO LOWER EXTREMITY PEL | 10/1/2006 | $212.81 | 3 |
| A | L2622 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $207.50 | 3 |
| A | L2624 | ADD. TO LOWER EXTREMITY, PELVIC | 10/1/2006 | $224.06 | 3 |
| A | L2627 | ADD TO LOWER EXTREM, PELVIC CNTR | 10/1/2006 | $1,159.92 | 3 |
| A | L2628 | ADDITION TO LOWER EXTREMITY, PEL | 10/1/2006 | $1,511.46 | 3 |
| A | L2630 | ADDITIONS TO LOWER EXTREMITY PEL | 10/1/2006 | $176.99 | 3 |
| A | L2640 | ADDITIONS TO LOWER EXTREMITY PEL | 10/1/2006 | $275.83 | 3 |
| A | L2650 | ADDITIONS TO LOWER EXTREMITY PEL | 10/1/2006 | $108.27 | 3 |
| A | L2660 | ADDITIONS TO LOWER EXTREMITY THO | 10/1/2006 | $126.10 | 3 |
| A | L2670 | ADDITIONS TO LOWER EXTREMITY THO | 10/1/2006 | $119.34 | 3 |
| A | L2680 | ADDITIONS TO LOWER EXTREMITY THO | 10/1/2006 | $105.88 | 3 |
| A | L2750 | ADDITION TO LOWER EXTREMITY ORTH | 5/1/1997 | NC | 9 |
| A | L2755 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $92.28 | 3 |
| A | L2760 | ADDITIONS TO LOWER EXTREMITY ORT | 10/1/2006 | $41.97 | 3 |
| A | L2768 | ORTHOTIC SIDE BAR DISCONNECT DEV | 10/1/2006 | $102.38 | 3 |
| A | L2770 | ADDITIONS TO LOWER EXTREMITY ORT | 10/1/2006 | $41.77 | 3 |
| A | L2780 | ADDITION TO LOWER EXTREMITY ORTH | 5/1/1997 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L2785 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $23.67 | 3 |
| A | L2795 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $71.28 | 3 |
| A | L2800 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $82.73 | 3 |
| A | L2810 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $52.84 | 3 |
| A | L2820 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $58.76 | 3 |
| A | L2830 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $63.57 | 3 |
| A | L2840 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $29.56 | 3 |
| A | L2850 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $41.90 | 3 |
| A | L2860 | ADDITION TO LOWER EXTREMITY JOIN | 3/1/2004 | $212.94 | 3 |
| A | L2999 | LOWER LIMB ORTHOSES, NOT OTHERWI | 3/1/2004 | $5,400.00 | 3 |
| A | L3000 | FOOT INSERT REMOVABLE MOLDED TO | 10/1/2006 | $200.43 | 3 |
| A | L3001 | FOOT INSERT REMOVABLE MOLDED TO | 10/1/2006 | $84.40 | 3 |
| A | L3002 | FOOT INSERT REMOVABLE MOLDED TO | 10/1/2006 | $103.05 | 3 |
| A | L3003 | FOOT INSERT REMOVABLE MOLDED TO | 10/1/2006 | $111.17 | 3 |
| A | L3010 | FOOT INSERT REMOVABLE MOLDED TO | 10/1/2006 | $111.17 | 3 |
| A | L3020 | FOOT INSERT REMOVABLE MOLDED TO | 10/1/2006 | $126.58 | 3 |
| A | L3030 | FOOT INSERT REMOVABLE FORMED TO | 10/1/2006 | $48.69 | 3 |
| A | L3031 | FOOT, INSERT/PLATE, REMOVABLE, A | 1/1/2004 | NC | 9 |
| A | L3040 | FOOT ARCH SUPPORT REMOVABLE PREM | 10/1/2006 | $30.02 | 3 |
| A | L3050 | FOOT ARCH SUPPORT REMOVABLE PREM | 10/1/2006 | $30.02 | 3 |
| A | L3060 | FOOT ARCH SUPPORT REMOVABLE PREM | 10/1/2006 | $47.05 | 3 |
| A | L3070 | FOOT ARCH SUPPORT NONREMOVABLE A | 10/1/2006 | $20.30 | 3 |
| A | L3080 | FOOT ARCH SUPPORT NONREMOVABLE A | 10/1/2006 | $20.30 | 3 |
| A | L3090 | FOOT ARCH SUPPORT NONREMOVABLE A | 10/1/2006 | $25.98 | 3 |
| A | L3100 | HALLUS-VALGUS NIGHT DYNAMIC SPLI | 10/1/2006 | $27.59 | 3 |
| A | L3140 | FOOT, ABDUCTION ROTATION BAR, IN | 10/1/2006 | $56.80 | 3 |
| A | L3150 | FOOT, ABDUCTION ROTATION BAR, WI | 10/1/2006 | $51.95 | 3 |
| A | L3160 | FOOT, ADJUSTABLE SHOE-STYLED POS | 10/1/2005 | $20.09 | 3 |
| A | L3170 | FOOT, PLASTIC, SILICONE OR EQUAL | 10/1/2006 | $32.46 | 3 |
| A | L3201 | ORTHOPEDIC SHOE, OXFORD WITH SUP | 10/1/2005 | $45.20 | 3 |
| A | L3202 | ORTHOPEDIC SHOE, OXFORD WITH SUP | 10/1/2005 | $45.20 | 3 |
| A | L3203 | ORTHOPEDIC SHOE OXFORD WITH SUPI | 10/1/2005 | $50.23 | 3 |
| A | L3204 | ORTHOPEDIC SHOE, HIGHTOP WITH SU | 10/1/2005 | $45.20 | 3 |
| A | L3206 | ORTHOPEDIC SHOE, HIGHTOP WITH SU | 10/1/2005 | $50.23 | 3 |
| A | L3207 | ORTHOPEDIC SHOE HIGHTOP WITH SUP | 10/1/2005 | $50.23 | 3 |
| A | L3208 | SURGICAL BOOT EACH-INFANT -H | 10/1/2005 | $35.16 | 3 |
| A | L3209 | SURGICAL BOOT EACH-CHILD -H | 10/1/2005 | $35.16 | 3 |
| A | L3211 | SURGICAL BOOT EACH-JUNIOR -H | 10/1/2005 | $40.18 | 3 |
| A | L3212 | BENESCH BOOT PAIR-INFANT -H | 10/1/2005 | $45.20 | 3 |
| A | L3213 | BENESCH BOOT PAIR-CHILD -H | 10/1/2005 | $45.20 | 3 |
| A | L3214 | BENESCH BOOT PAIR-JUNIOR -H | 10/1/2005 | $50.23 | 3 |
| A | L3215 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $67.40 | 3 |
| A | L3216 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $107.30 | 3 |
| A | L3217 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $83.55 | 3 |
| A | L3218 | ORTHOPEDIC FOOTWEAR LADIES SURGI | 7/1/2003 | INVALID | N |
| A | L3219 | ORHTOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $78.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L3221 | ORTHOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $137.20 | 3 |
| A | L3222 | ORTHOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $101.15 | 3 |
| A | L3223 | ORTHOPEDIC FOOTWEAR MENS SURGICA | 7/1/2003 | INVALID | N |
| A | L3224 | ORTHOPEDIC FOOTWEAR, WOMAN'S SHO | 10/1/2006 | $39.79 | 3 |
| A | L3225 | ORTHOPEDIC FOOTWEAR, MAN'S SHOE, | 10/1/2006 | $38.74 | 3 |
| A | L3230 | ORTHOPEDIC FOOTWEAR, CUSTOM SHOE | 10/1/2005 | $241.49 | 3 |
| A | L3250 | ORTHOPEDIC FOOTWEAR CUSTOM MOLDE | 10/1/2005 | $203.84 | 3 |
| A | L3251 | FOOT-SHOE MOLDED TO PATIENT MODE | 7/1/1993 | NC | 9 |
| A | L3252 | FOOT-SHOE MOLDED TO PATIENT MODE | 10/1/2005 | $164.66 | 3 |
| A | L3253 | FOOT-MOLDED SHOE PLASTAZOTE (OR | 10/1/2005 | $78.28 | 3 |
| A | L3254 | NON-STANDARD SIZE OR WIDTH -H | 10/1/2005 | $16.08 | 3 |
| A | L3255 | NON-STANDARD SIZE OR LENGTH -H | 10/1/2005 | $16.08 | 3 |
| A | L3257 | ORTHOPEDIC FOOTWEAR, ADDITIONAL | 10/1/2005 | $45.20 | 3 |
| A | L3260 | SURGICAL BOOT/SHOE, EACH | 10/1/2005 | $100.45 | 3 |
| A | L3265 | PLASTAZOTE SANDAL EACH -H | 10/1/2005 | $45.20 | 3 |
| A | L3300 | LIFTS-ELEVATION HEEL TAPERED TO | 10/1/2006 | $33.28 | 3 |
| A | L3310 | LIFTS-ELEVATION HEEL AND SOLE NE | 10/1/2006 | $51.67 | 3 |
| A | L3320 | LIFTS-ELEVATION HEEL AND SOLE CO | 10/1/2005 | $52.78 | 3 |
| A | L3330 | LIFTS-ELEVATION METAL EXTENSION | 10/1/2006 | $361.10 | 3 |
| A | L3332 | LIFTS-ELEVATION INSIDE SHOE TAPE | 10/1/2006 | $47.05 | 3 |
| A | L3334 | LIFTS-ELEVATION HEEL PER INCH -H | 10/1/2006 | $24.34 | 3 |
| A | L3340 | HEEL WEDGE SACH -H | 10/1/2006 | $54.37 | 3 |
| A | L3350 | HEEL WEDGE -H | 10/1/2006 | $14.60 | 3 |
| A | L3360 | SOLE WEDGE-OUTSIDE SOLE -H | 10/1/2006 | $22.72 | 3 |
| A | L3370 | SOLE WEDGE-BETWEEN SOLE -H | 10/1/2006 | $31.66 | 3 |
| A | L3380 | CLUBFOOT WEDGE -H | 10/1/2006 | $31.66 | 3 |
| A | L3390 | OUTFLARE WEDGE -H | 10/1/2006 | $31.66 | 3 |
| A | L3400 | METATARSAL BAR WEDGE-ROCKER | 10/1/2006 | $25.98 | 3 |
| A | L3410 | METATARSAL BAR WEDGE-BETWEEN SOL | 10/1/2006 | $59.23 | 3 |
| A | L3420 | FULL SOLE AND HEEL WEDGE BETWEEN | 10/1/2006 | $34.90 | 3 |
| A | L3430 | HEEL COUNTER PLASTIC REINFORCED | 10/1/2006 | $102.24 | 3 |
| A | L3440 | HEEL-COUNTER LEATHER REINFORCED | 10/1/2006 | $48.69 | 3 |
| A | L3450 | HEEL-SACH CUSHION TYPE -H | 10/1/2006 | $67.35 | 3 |
| A | L3455 | HEEL-NEW LEATHER STANDARD -H | 10/1/2006 | $25.98 | 3 |
| A | L3460 | HEEL-NEW RUBBER STANDARD -H | 10/1/2006 | $21.91 | 3 |
| A | L3465 | HEEL-THOMAS WITH WEDGE -H | 10/1/2006 | $37.33 | 3 |
| A | L3470 | HEEL-THOMAS EXTENDED TO BALL -H | 10/1/2006 | $39.75 | 3 |
| A | L3480 | HEEL-PAD AND DEPRESSION FOR SPUR | 10/1/2006 | $39.75 | 3 |
| A | L3485 | HEEL-PAD REMOVABLE FOR SPUR -H | 10/1/2005 | $16.71 | 3 |
| A | L3500 | ORTHOPEDIC SHOE ADDITION, INSOLE | 10/1/2006 | $18.67 | 3 |
| A | L3510 | ORTHOPEDIC SHOE ADDITION, INSOLE | 10/1/2006 | $18.67 | 3 |
| A | L3520 | ORTHOPEDIC SHOE ADDITION, INSOLE | 10/1/2006 | $20.30 | 3 |
| A | L3530 | ORTHOPEDIC SHOE ADDITION, SOLE, | 10/1/2006 | $20.30 | 3 |
| A | L3540 | ORTHOPEDIC SHOE ADDITION, SOLE, | 10/1/2006 | $32.46 | 3 |
| A | L3550 | ORTHOPEDIC SHOE ADDITION, TOE TA | 10/1/2006 | $5.69 | 3 |
| A | L3560 | ORTHOPEDIC SHOE ADDITION, TOE TA | 10/1/2006 | $14.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L3570 | ORTHOPEDIC SHOE ADDITION, SPECIA | 10/1/2006 | $54.37 | 3 |
| A | L3580 | ORTHOPEDIC SHOE ADDITION, CONVER | 10/1/2006 | $16.84 | 3 |
| A | L3590 | ORTHOPEDIC SHOE ADDITION, CONVER | 10/1/2006 | $32.75 | 3 |
| A | L3595 | ORTHOPEDIC SHOE ADDITION, MARCH | 10/1/2006 | $18.71 | 3 |
| A | L3600 | TRANSFERS OF AN ORTHOSIS FROM ON | 10/1/2006 | $48.69 | 3 |
| A | L3610 | TRANSFERS OF AN ORTHOSIS FROM ON | 10/1/2006 | $64.10 | 3 |
| A | L3620 | TRANSFERS OF AN ORTHOSIS FROM ON | 10/1/2006 | $48.69 | 3 |
| A | L3630 | TRANSFERS OF AN ORTHOSIS FROM ON | 10/1/2006 | $64.10 | 3 |
| A | L3640 | TRANSFERS OF AN ORTHOSIS FROM ON | 10/1/2006 | $27.59 | 3 |
| A | L3649 | ORTHOPEDIC SHOE, MODIFICATION, A | 10/1/2005 | $928.80 | 3 |
| A | L3650 | SHOULDER ORTHOSIS, FIGURE OF "8" | 10/1/2006 | $41.83 | 3 |
| A | L3651 | SHOULDER ORTHOSIS, SINGLE SHOULD | 10/1/2006 | $45.27 | 3 |
| A | L3652 | SHOULDER ORTHOSIS, DOUBLE SHOULD | 10/1/2006 | $136.41 | 3 |
| A | L3660 | SHOULDER ORTHOSIS, FIGURE OF "8" | 10/1/2006 | $68.05 | 3 |
| A | L3670 | SHOULDER ORHTOSIS, ACROMIO/CLAVI | 10/1/2006 | $77.81 | 3 |
| A | L3671 | SHOULDER ORTHOSIS, SHOULDER CAP | 10/1/2006 | $644.37 | 3 |
| A | L3672 | SHOULDER ORTHOSIS, ABDUCTION PIS | 10/1/2006 | $801.31 | 3 |
| A | L3673 | SHOULDER ORTHOSIS, THORACIC COMP | 10/1/2006 | $873.35 | 3 |
| A | L3675 | SHOULDER ORTHOSIS, VEST TYPE ABD | 10/1/2006 | $112.80 | 3 |
| A | L3677 | SHOULDER ORTHOSIS, HARD PLASTIC, | 10/1/2005 | $206.40 | 3 |
| A | L3700 | ELBOW ORTHOSIS, ELASTIC WITH STA | 10/1/2006 | $52.18 | 3 |
| A | L3701 | ELBOW ORTHOSIS, ELASTIC, PREFABR | 10/1/2006 | $13.99 | 3 |
| A | L3702 | ELBOW ORTHOSIS, W/OUT JOINTS, CU | 10/1/2006 | $213.72 | 3 |
| A | L3710 | ELBOW ORTHOSIS, ELASTIC WITH MET | 10/1/2006 | $81.85 | 3 |
| A | L3720 | ELBOW ORTHOSIS, DOUBLE UPRIGHT W | 10/1/2006 | $517.27 | 3 |
| A | L3730 | ELBOW ORTHOSIS, DOUBLE UPRIGHT W | 10/1/2006 | $695.93 | 3 |
| A | L3740 | ELBOW ORTHOSIS, DOUBLE UPRIGHT W | 10/1/2006 | $710.41 | 3 |
| A | L3760 | ELBOW ORTHOSIS, WITH ADJUSTABLE | 10/1/2006 | $327.91 | 3 |
| A | L3762 | ELBOW ORTHOSIS, RIGID, WITHOUT J | 10/1/2006 | $73.91 | 3 |
| A | L3763 | ELBOW WRIST HAND ORTHOSIS, RIGID | 10/1/2006 | $916.94 | 3 |
| A | L3764 | ELBOW WRIST HAND ORTHOSIS, INC O | 10/1/2006 | $970.98 | 3 |
| A | L3765 | ELBOW WRIST HAND FINGER ORTHOSIS | 10/1/2006 | $916.94 | 3 |
| A | L3766 | ELBOW WRIST HAND FINGER ORTHOSIS | 10/1/2006 | $970.98 | 3 |
| A | L3800 | WRIST HAND FINGER ORTHOSIS, SHOR | 10/1/2006 | $176.02 | 3 |
| A | L3805 | WRIST HAND FINGER ORTHOSIS, LONG | 10/1/2006 | $217.09 | 3 |
| A | L3806 | WRIST HAND FINGER ORTHOSIS, INCL | 1/1/2007 | NC | 9 |
| A | L3807 | WRIST HAND FINGER ORTHOSIS, WITH | 10/1/2006 | $162.32 | 3 |
| A | L3808 | WRIST HAND FINGER ORTHOSIS, RIGI | 1/1/2007 | NC | 9 |
| A | L3810 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $42.91 | 3 |
| A | L3815 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $39.84 | 3 |
| A | L3820 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $68.41 | 3 |
| A | L3825 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $44.42 | 3 |
| A | L3830 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $57.34 | 3 |
| A | L3835 | WHFO ADDITIONS TO SHORT ANDLONG | 10/1/2006 | $81.02 | 3 |
| A | L3840 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $41.62 | 3 |
| A | L3845 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $61.10 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L3850 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $76.78 | 3 |
| A | L3855 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $77.40 | 3 |
| A | L3860 | WHFO ADDITIONS TO SHORT AND LONG | 10/1/2006 | $105.93 | 3 |
| A | L3890 | ADDITION TO UPPER EXTREMITY JOIN | 10/1/2005 | $219.75 | 3 |
| A | L3900 | WRIST HAND FINGER ORTHOSIS, DYNA | 10/1/2006 | $964.24 | 3 |
| A | L3901 | WRIST HAND FINGER ORTHOSIS, DYNA | 10/1/2006 | $1,192.08 | 3 |
| A | L3902 | WRIST HAND FINGER ORTHOSIS, EXTE | 1/1/2007 | INVALID | N |
| A | L3904 | WRIST HAND FINGER ORTHOSIS, EXTE | 10/1/2006 | $1,938.94 | 3 |
| A | L3905 | WRIST HAND ORTHOSIS, INC ONE OR | 10/1/2006 | $709.19 | 3 |
| A | L3906 | WRIST HAND ORTHOSIS, W/OUT JOINT | 10/1/2006 | $274.39 | 3 |
| A | L3907 | WRIST HAND FINGER ORTHOSIS, WRIS | 10/1/2006 | $336.33 | 3 |
| A | L3908 | WRIST HAND ORTHOSIS, WRIST EXTEN | 10/1/2006 | $52.89 | 3 |
| A | L3909 | WRIST ORTHOSIS, ELASTIC, PREFAB, | 10/1/2006 | $9.70 | 3 |
| A | L3910 | WRIST HAND FINGER ORTHOSIS, SWAN | 10/1/2006 | $248.35 | 3 |
| A | L3911 | WRIST HAND FINGER ORTHOSIS, ELAS | 10/1/2006 | $18.33 | 3 |
| A | L3912 | HAND FINGER ORTHOSIS, FLEXION GL | 10/1/2006 | $83.72 | 3 |
| A | L3913 | HAND FINGER ORTHOSIS, W/OUT JOIN | 10/1/2006 | $193.69 | 3 |
| A | L3914 | WRIST HAND ORTHOSIS, WRIST EXTEN | 1/1/2007 | INVALID | N |
| A | L3915 | WRIST HAND ORTHOSIS, INCL ONR OR | 1/1/2007 | NC | 9 |
| A | L3916 | WRIST HAND FINGER ORTHOSIS, WRIS | 10/1/2006 | $89.15 | 3 |
| A | L3917 | HAND ORTHOSIS, METACARPAL FRACTU | 10/1/2006 | $72.63 | 3 |
| A | L3918 | HAND FINGER ORTHOSIS, KNUCKLE BE | 10/1/2006 | $56.40 | 3 |
| A | L3919 | HAND ORTHOSIS, W/OUT JOINTS, MAY | 10/1/2006 | $193.69 | 3 |
| A | L3920 | HAND FINGER ORTHOSIS, KNUCKLE BE | 10/1/2006 | $74.04 | 3 |
| A | L3921 | HAND FINGER ORTHOSIS, INC ONE OR | 10/1/2006 | $229.71 | 3 |
| A | L3922 | HAND FINGER ORTHOSIS, KNUCKLE BE | 10/1/2006 | $86.33 | 3 |
| A | L3923 | HAND FINGER ORTHOSIS, W/OUT JOIN | 10/1/2006 | $25.51 | 3 |
| A | L3924 | WRIST HAND FINGER ORTHOSIS, OPPE | 10/1/2006 | $94.13 | 3 |
| A | L3926 | WRIST HAND FINGER ORTHOSIS, THOM | 10/1/2006 | $65.33 | 3 |
| A | L3928 | HAND FINGER ORTHOSIS, FINGER EXT | 10/1/2006 | $42.02 | 3 |
| A | L3930 | WRIST HAND FINGER ORTHOSIS, FING | 10/1/2006 | $40.74 | 3 |
| A | L3932 | FINGER ORTHOSIS, SAFETY PIN, SPR | 10/1/2006 | $35.96 | 3 |
| A | L3933 | FINGER ORTHOSIS, W/OUT JOINTS, M | 10/1/2006 | $152.58 | 3 |
| A | L3934 | FINGER ORTHOSIS, SAFETY PIN, MOD | 10/1/2006 | $42.53 | 3 |
| A | L3935 | FINGER ORTHOSIS, NONTORSION JOIN | 10/1/2006 | $157.98 | 3 |
| A | L3936 | WRIST HAND FINGER ORTHOSIS, PALM | 10/1/2006 | $78.64 | 3 |
| A | L3938 | WRIST HAND FINGER ORTHOSIS, DORS | 10/1/2006 | $80.93 | 3 |
| A | L3940 | WRIST HAND FINGER ORTHOSIS, DORS | 10/1/2006 | $94.90 | 3 |
| A | L3942 | HAND FINGER ORTHOSIS, REVERSE KN | 10/1/2006 | $51.45 | 3 |
| A | L3944 | HAND FINGER ORTHOSIS, REVERSE KN | 10/1/2006 | $69.62 | 3 |
| A | L3946 | HAND FINGER ORTHOSIS, COMPOSITE | 10/1/2006 | $78.24 | 3 |
| A | L3948 | FINGER ORTHOSIS, FINGER KNUCKLE | 10/1/2006 | $36.80 | 3 |
| A | L3950 | WRIST HAND FINGER ORTHOSIS, COMB | 10/1/2006 | $116.53 | 3 |
| A | L3952 | WRIST HAND FINGER ORTHOSIS, COMB | 10/1/2006 | $146.93 | 3 |
| A | L3954 | HAND FINGER ORTHOSIS, SPREADING | 10/1/2006 | $80.41 | 3 |
| A | L3956 | ADDITION TO JOINT TO UPPER EXTRE | 10/1/2005 | $150.69 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L3960 | SHOULDER ELBOW WRIST HAND ORTHOS | 10/1/2006 | $547.15 | 3 |
| A | L3961 | SHOULDER ELBOW WRIST HAND ORTHOS | 10/1/2006 | $1,201.47 | 3 |
| A | L3962 | SHOULDER ELBOW WRIST HAND ORTHOS | 10/1/2006 | $591.26 | 3 |
| A | L3963 | SHOULDER ELBOW WRIST HAND ORTHOS | 1/1/2006 | INVALID | N |
| A | L3964 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $569.51 | 3 |
| A | L3965 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $908.77 | 3 |
| A | L3966 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $684.61 | 3 |
| A | L3967 | SHOULDER ELBOW WRIST HAND ORTHOS | 10/1/2006 | $1,418.53 | 3 |
| A | L3968 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $866.37 | 3 |
| A | L3969 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $605.85 | 3 |
| A | L3970 | SEWHO ADDITIONS TO MOBILE ARM SU | 10/1/2006 | $206.00 | 3 |
| A | L3971 | SHOULDER ELBOW WRIST HAND ORTHOS | 10/1/2006 | $1,346.51 | 3 |
| A | L3972 | SEWHO ADDITIONS TO MOBILE ARM SU | 10/1/2006 | $130.98 | 3 |
| A | L3973 | SHOULDER ELBOW WRIST HAND ORTHOS | 10/1/2006 | $1,418.53 | 3 |
| A | L3974 | SEWHO ADDITIONS TO MOBILE ARM SU | 10/1/2006 | $130.71 | 3 |
| A | L3975 | SHOULDER ELBOW WRIST HAND FINGER | 10/1/2006 | $1,201.47 | 3 |
| A | L3976 | SHOULDER ELBOW WRIST HAND FINGER | 10/1/2006 | $1,201.47 | 3 |
| A | L3977 | SHOULDER ELBOW WRIST HAND FINGER | 10/1/2006 | $1,346.51 | 3 |
| A | L3978 | SHOULDER ELBOW WRIST HAND FINGER | 10/1/2006 | $1,418.53 | 3 |
| A | L3980 | UPPER EXTREMITY FRACTURE OTHROSI | 10/1/2006 | $204.69 | 3 |
| A | L3982 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $247.18 | 3 |
| A | L3984 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $237.86 | 3 |
| A | L3985 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $421.65 | 3 |
| A | L3986 | UPPER EXTREMITY FRACTURE ORTHOSI | 10/1/2006 | $407.86 | 3 |
| A | L3995 | ADDITION TO UPPER EXTREMITY ORTH | 10/1/2006 | $24.04 | 3 |
| A | L3999 | UNLISTED PROCEDURES FOR UPPER LI | 10/1/2005 | $928.80 | 3 |
| A | L4000 | REPLACE GIRDLE FOR SPINAL ORTHOS | 10/1/2006 | $980.09 | 3 |
| A | L4002 | REPLACEMENT STRAP, ANY ORTHOSIS, | 1/1/2006 | $3.50 | 3 |
| A | L4010 | REPLACE TRILATERAL SOCKET BRIM - | 10/1/2006 | $541.53 | 3 |
| A | L4020 | REPLACE QUADRILATERAL SOCKET BRI | 10/1/2006 | $648.37 | 3 |
| A | L4030 | REPLACE QUADRILATERAL SOCKET BRI | 10/1/2006 | $447.07 | 3 |
| A | L4040 | REPLACE MOLDED THIGH LACER -H | 10/1/2006 | $368.25 | 3 |
| A | L4045 | REPLACE NON-MOLDED THIGH LACER - | 10/1/2006 | $223.90 | 3 |
| A | L4050 | REPLACE MOLDED CALF LACER -H | 10/1/2006 | $336.56 | 3 |
| A | L4055 | REPLACE NON-MOLDED CALF LACER -H | 10/1/2006 | $183.50 | 3 |
| A | L4060 | REPLACE HIGH ROLL CUFF -H | 10/1/2006 | $273.40 | 3 |
| A | L4070 | REPLACE PROXIMAL AND DISTAL UPRI | 10/1/2006 | $225.38 | 3 |
| A | L4080 | REPLACE METAL BANDS KAFO, PROXIM | 10/1/2006 | $81.06 | 3 |
| A | L4090 | REPLACE METAL BANDS KAFO-AFO CAL | 10/1/2006 | $81.39 | 3 |
| A | L4100 | REPLACE LEATHER CUFF KAFO, PROXI | 10/1/2006 | $94.09 | 3 |
| A | L4110 | REPLACE LEATHER CUFF KAFO-AFO CA | 10/1/2006 | $76.51 | 3 |
| A | L4130 | REPLACE PRETIBIAL SHELL -H | 10/1/2006 | $447.60 | 3 |
| A | L4210 | REPAIR OF ORTHOTIC DEVICE REPAIR | 10/1/2005 | $200.92 | 3 |
| A | L4350 | PNEUMATIC ANKLE CONTROL SPLINT, | 10/1/2006 | $66.60 | 3 |
| A | L4360 | WALKING BOOT,PNEUMATIC, W/OR W/O | 10/1/2006 | $249.79 | 3 |
| A | L4370 | PNEUMATIC FULL LEG SPLINT, PREFA | 10/1/2006 | $170.31 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L4380 | PNEUMATIC KNEE SPLINT, PREFABRIC | 10/1/2006 | $93.20 | 3 |
| A | L4386 | NON-PNEUMATIC WALKING SPLINT,WIT | 10/1/2006 | $119.76 | 3 |
| A | L4392 | REPLACEMENT, SOFT INTERFACE MATE | 10/1/2006 | $16.34 | 3 |
| A | L4394 | REPLACE SOFT INTERFACE MATERIAL, | 10/1/2006 | $11.92 | 3 |
| A | L4396 | STATIC ANKLE FOOT ORTHOSIS, INCL | 10/1/2006 | $116.55 | 3 |
| A | L4398 | FOOT DROP SPLINT, RECUMBENT POSI | 10/1/2006 | $53.65 | 3 |
| A | L5000 | PARTIAL FOOT SHOE INSERT WITH LO | 10/1/2006 | $364.22 | 3 |
| A | L5010 | PARTIAL FOOT MOLDED SOCKET ANKLE | 10/1/2006 | $877.60 | 3 |
| A | L5020 | PARTIAL FOOT MOLDED SOCKET TIBIA | 10/1/2006 | $1,627.52 | 3 |
| A | L5050 | ANKLE SYMES MOLDED SOCKET SACH F | 10/1/2006 | $1,943.15 | 3 |
| A | L5060 | ANKLE SYMES METAL FRAME MOLDED L | 10/1/2006 | $2,578.52 | 3 |
| A | L5100 | BELOW KNEE MOLDED SOCKET SHIN SA | 10/1/2006 | $2,014.09 | 3 |
| A | L5105 | BELOW KNEE, PLASTIC SOCKET, JOIN | 10/1/2006 | $2,842.56 | 3 |
| A | L5150 | KNEE DISARTICULATION (OR THROUGH | 10/1/2006 | $2,939.18 | 3 |
| A | L5160 | KNEE DISARTICULATION (OR THROUGH | 10/1/2006 | $3,585.88 | 3 |
| A | L5200 | ABOVE KNEE MOLDED SOCKET SINGLE | 10/1/2006 | $2,936.36 | 3 |
| A | L5210 | ABOVE KNEE SHORT PROSTHESIS NO K | 10/1/2006 | $2,332.27 | 3 |
| A | L5220 | ABOVE KNEE SHORT PROSTHESIS NO K | 10/1/2006 | $2,651.05 | 3 |
| A | L5230 | ABOVE KNEE FOR PROXIMAL FEMORAL | 10/1/2006 | $3,545.63 | 3 |
| A | L5250 | HIP DISARTICULATION CANADIAN TYP | 10/1/2006 | $4,613.93 | 3 |
| A | L5270 | HIP DISARTICULATION TILT TABLE T | 10/1/2006 | $4,943.23 | 3 |
| A | L5280 | HEMIPELVECTOMY CANADIAN TYPE MOL | 10/1/2006 | $4,893.79 | 3 |
| A | L5300 | BELOW KNEE MOLDED SOCKET SACH FO | 4/1/2002 | INVALID | N |
| A | L5301 | BELOW KNEE, MOLDED SOCKET, SHIN, | 10/1/2006 | $2,136.34 | 3 |
| A | L5310 | KNEE DISARTICULATION (OR THROUGH | 4/1/2002 | INVALID | N |
| A | L5311 | KNEE DISARTICULATION (OR THRU KN | 10/1/2006 | $3,353.68 | 3 |
| A | L5320 | ABOVE KNEE MOLDED SOCKET OPEN EN | 4/1/2002 | INVALID | N |
| A | L5321 | ABOVE KNEE, MOLDED SOCKET, OPEN | 10/1/2006 | $3,300.29 | 3 |
| A | L5330 | HIP DISARTICULATION CANADIAN TYP | 4/1/2002 | INVALID | N |
| A | L5331 | HIP DISARTICULATION, CANADIAN TY | 10/1/2006 | $4,682.72 | 3 |
| A | L5340 | HEMIPELVECTOMY CANADIAN TYPE MOL | 4/1/2002 | INVALID | N |
| A | L5341 | HEMIPELVECTOMY, CANADIAN TYPE, M | 10/1/2006 | $4,887.48 | 3 |
| A | L5400 | IMMEDIATE POST SURGICAL OR EARLY | 10/1/2006 | $964.00 | 3 |
| A | L5410 | IMMEDIATE POST SURGICAL OR EARLY | 10/1/2006 | $370.55 | 3 |
| A | L5420 | IMMEDIATE POST SURGICAL OR EARLY | 10/1/2006 | $1,164.38 | 3 |
| A | L5430 | IMMEDIATE POST SURGICAL OR EARLY | 10/1/2006 | $363.43 | 3 |
| A | L5450 | IMMEDIATE POST SURGICAL OR EARLY | 10/1/2006 | $318.05 | 3 |
| A | L5460 | IMMEDIATE POST SURGICAL OR EARLY | 10/1/2006 | $421.12 | 3 |
| A | L5500 | INITIAL,BELOW KNEE "PTB" TYPE SO | 10/1/2006 | $925.82 | 3 |
| A | L5505 | INITIAL,ABOVE KNEE-KNEE DISARTIC | 10/1/2006 | $1,253.79 | 3 |
| A | L5510 | PREP,BELOW KNEE PTB TYPE SOCKET, | 10/1/2006 | $1,137.18 | 3 |
| A | L5520 | PREP,BELOW KNEE PTB TYPE SOCK,US | 10/1/2006 | $1,036.62 | 3 |
| A | L5530 | PREP,BELOW KNEE PTB TYPE SOCK,US | 10/1/2006 | $1,446.62 | 3 |
| A | L5535 | PREP,BELOW KNEE PTB TYPE SOCKET, | 10/1/2006 | $1,494.26 | 3 |
| A | L5540 | PREP,BELOW KNEE PTB TYPE SOCKET, | 10/1/2006 | $1,594.91 | 3 |
| A | L5560 | PREP,ABOVE KNEE-KNEE DISARTICULA | 10/1/2006 | $1,558.15 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L5570 | PREP,ABOVE KNEE-KNEE DISARTICULA | 10/1/2006 | $1,638.87 | 3 |
| A | L5580 | PREP,ABOVE KNEE-KNEE DISARTICULA | 10/1/2006 | $1,877.45 | 3 |
| A | L5585 | PREP,ABOVE KNEE-KNEE DISARTICULA | 10/1/2006 | $2,080.84 | 3 |
| A | L5590 | PREP,ABOVE KNEE-KNEE DISARTICULA | 10/1/2006 | $1,821.69 | 3 |
| A | L5595 | PREP,HIP DISARTICULATION-HEMIPEL | 10/1/2006 | $3,254.09 | 3 |
| A | L5600 | PREP,HIP DISARTICULATION-HEMIPEL | 10/1/2006 | $4,101.55 | 3 |
| A | L5610 | ADDITIONS TO LOWER EXTREMITY ABO | 1/1/1994 | NC | 9 |
| A | L5611 | ADD TO LOWER EXTREM, ABOVE KNEE- | 10/1/2006 | $1,271.79 | 3 |
| A | L5613 | ADD TO LOWER EXTREM, ABOVE KNEE- | 1/1/1994 | NC | 9 |
| A | L5614 | ADDITION TO LOWER EXTREMITY, END | 5/1/1999 | NC | 9 |
| A | L5616 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $979.04 | 3 |
| A | L5617 | ADDITION TO LOWER EXTREMITY, QUI | 10/1/2006 | $395.95 | 3 |
| A | L5618 | ADDITIONS TO LOWER EXTREMITY TES | 10/1/2006 | $225.18 | 3 |
| A | L5620 | ADDITIONS TO LOWER EXTREMITY TES | 10/1/2006 | $213.84 | 3 |
| A | L5622 | ADDITIONS TO LOWER EXTREMITY TES | 10/1/2006 | $301.56 | 3 |
| A | L5624 | ADDITIONS TO LOWER EXTREMITY TES | 10/1/2006 | $271.50 | 3 |
| A | L5626 | ADDITIONS TO LOWER EXTREMITY TES | 10/1/2006 | $394.18 | 3 |
| A | L5628 | ADDITIONS TO LOWER EXTREMITY TES | 10/1/2006 | $435.84 | 3 |
| A | L5629 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $229.09 | 3 |
| A | L5630 | ADDITIONS TO LOWER EXTREMITY SYM | 10/1/2006 | $365.08 | 3 |
| A | L5631 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $316.73 | 3 |
| A | L5632 | ADDITIONS TO LOWER EXTREMITY SYM | 10/1/2006 | $213.41 | 3 |
| A | L5634 | ADDITIONS TO LOWER EXTREMITY SYM | 10/1/2006 | $254.25 | 3 |
| A | L5636 | ADDITIONS TO LOWER EXTREMITY SYM | 10/1/2006 | $226.59 | 3 |
| A | L5637 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $214.61 | 3 |
| A | L5638 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $397.68 | 3 |
| A | L5639 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $910.90 | 3 |
| A | L5640 | ADDITIONS TO LOWER EXTREMITY KNE | 10/1/2006 | $603.29 | 3 |
| A | L5642 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $595.48 | 3 |
| A | L5643 | ADDITION TO LOWER EXTREMITY, HIP | 10/1/2006 | $1,288.00 | 3 |
| A | L5644 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $475.38 | 3 |
| A | L5645 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $575.16 | 3 |
| A | L5646 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $422.79 | 3 |
| A | L5647 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $573.41 | 3 |
| A | L5648 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $474.59 | 3 |
| A | L5649 | ADDITION TO LOWER EXTREMITY, ISC | 10/1/2006 | $1,450.75 | 3 |
| A | L5650 | ADDITIONS TO LOWER EXTREMITY TOT | 10/1/2006 | $413.69 | 3 |
| A | L5651 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $865.69 | 3 |
| A | L5652 | ADDITIONS TO LOWER EXTREMITY SUC | 10/1/2006 | $314.29 | 3 |
| A | L5653 | ADDITIONS TO LOWER EXTREMITY KNE | 10/1/2006 | $515.64 | 3 |
| A | L5654 | ADDITIONS TO LOWER EXTREMITY SOC | 10/1/2006 | $279.27 | 3 |
| A | L5655 | ADDITIONS TO LOWER EXTREMITY SOC | 10/1/2006 | $250.24 | 3 |
| A | L5656 | ADDITIONS TO LOWER EXTREMITY SOC | 10/1/2006 | $356.53 | 3 |
| A | L5658 | ADDITIONS TO LOWER EXTREMITY SOC | 10/1/2006 | $349.47 | 3 |
| A | L5660 | ADDITIONS TO LOWER EXTREMITY SOC | 7/1/2003 | INVALID | N |
| A | L5661 | ADDITION TO LOWER EXTREMITY, SOC | 10/1/2006 | $438.66 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L5662 | ADDITIONS TO LOWER EXTREMITY SOC | 7/1/2003 | INVALID | N |
| A | L5663 | ADDITIONS TO LOWER EXTREMITY SOC | 7/1/2003 | INVALID | N |
| A | L5664 | ADDITIONS TO LOWER EXTREMITY SOC | 7/1/2003 | INVALID | N |
| A | L5665 | ADDITION TO LOWER EXTREMITY, SOC | 10/1/2006 | $369.09 | 3 |
| A | L5666 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $51.20 | 3 |
| A | L5667 | ADDITION TO LOWER EXTREMITY, ABO | 4/1/2002 | INVALID | N |
| A | L5668 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $80.89 | 3 |
| A | L5669 | ADDITION TO LOWER EXTREMITY, ABO | 4/1/2002 | INVALID | N |
| A | L5670 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $213.51 | 3 |
| A | L5671 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $505.73 | 3 |
| A | L5672 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $232.61 | 3 |
| A | L5673 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $552.22 | 3 |
| A | L5674 | ADDITION TO LOWER EXTREMITY, BEL | 1/1/2005 | INVALID | N |
| A | L5675 | ADDITION TO LOWER EXTREMITY, BEL | 1/1/2005 | INVALID | N |
| A | L5676 | ADDITIONS TO LOWER EXTREMITY, BE | 10/1/2006 | $304.30 | 3 |
| A | L5677 | ADDITIONS TO LOWER EXTREMITY, BE | 10/1/2006 | $387.37 | 3 |
| A | L5678 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $34.11 | 3 |
| A | L5679 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $460.20 | 3 |
| A | L5680 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $255.57 | 3 |
| A | L5681 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $995.51 | 3 |
| A | L5682 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $455.76 | 3 |
| A | L5683 | ADDITION TO LOWER EXTREMITY, BEL | 10/1/2006 | $995.51 | 3 |
| A | L5684 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $46.26 | 3 |
| A | L5685 | ADDITION TO LOWER EXTREMITY PROS | 10/1/2006 | $54.27 | 3 |
| A | L5686 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $45.94 | 3 |
| A | L5688 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $50.30 | 3 |
| A | L5690 | ADDITIONS TO LOWER EXTREMITY BEL | 10/1/2006 | $76.50 | 3 |
| A | L5692 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $112.42 | 3 |
| A | L5694 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $173.68 | 3 |
| A | L5695 | ADDITION TO LOWER EXTREMITY, ABO | 10/1/2006 | $117.56 | 3 |
| A | L5696 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $177.83 | 3 |
| A | L5697 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $77.15 | 3 |
| A | L5698 | ADDITIONS TO LOWER EXTREMITY ABO | 10/1/2006 | $90.15 | 3 |
| A | L5699 | ALL LOWER EXTREMITY PROSTHESIS S | 10/1/2006 | $177.20 | 3 |
| A | L5700 | REPLACEMENT, SOCKET, BELOW KNEE, | 10/1/2006 | $2,632.12 | 3 |
| A | L5701 | REPLACEMENT SOCKET, ABOVE KNEE/K | 10/1/2006 | $3,198.58 | 3 |
| A | L5702 | REPLACEMENT, SOCKET, HIP DISARTI | 10/1/2006 | $3,830.02 | 3 |
| A | L5703 | ANKLE, SYMES, MOLDED TO PATIENT | 10/1/2006 | $1,965.06 | 3 |
| A | L5704 | CUSTOM SHAPED PROTECTIVE COVER, | 10/1/2006 | $439.59 | 3 |
| A | L5705 | CUSTOM SHAPED PROTECTIVE COVER, | 10/1/2006 | $721.65 | 3 |
| A | L5706 | CUSTOM SHAPED PROTECTIVE COVER, | 10/1/2006 | $715.26 | 3 |
| A | L5707 | CUSTOM SHAPED PROTECTIVE COVER, | 10/1/2006 | $1,016.75 | 3 |
| A | L5710 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $328.00 | 3 |
| A | L5711 | ADDITIONS EXOSKELETAL KNEE-SHIN | 10/1/2006 | $444.03 | 3 |
| A | L5712 | ADDITION EXOSKELETAL KNEE-SHIN S | 10/1/2006 | $398.60 | 3 |
| A | L5714 | ADDITION EXOSKELETAL KNEE-SHIN S | 10/1/2006 | $301.51 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L5716 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $525.39 | 3 |
| A | L5718 | ADDITION, EXOSKELETAL KNEE-SHIN | 10/1/2006 | $656.67 | 3 |
| A | L5722 | ADDITION, EXOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| A | L5724 | ADDITION, EXOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| A | L5726 | ADDITION, EXOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| A | L5728 | ADDITION EXOSKELETAL KNEE-SHIN S | 1/1/1994 | NC | 9 |
| A | L5780 | ADDITION EXOSKELETAL KNEE-SHIN S | 1/1/1994 | NC | 9 |
| A | L5781 | ADD TO LOWER LIMB PROSTHESIS, VA | 4/1/2003 | NC | 9 |
| A | L5782 | ADD TO LOWER LIMB PROSTHESIS, VA | 4/1/2003 | NC | 9 |
| A | L5785 | ADDITION, EXOSKELETAL SYSTEM, BE | 10/1/2006 | $447.41 | 3 |
| A | L5790 | ADDITION, EXOSKELETAL SYSTEM, AB | 10/1/2006 | $538.70 | 3 |
| A | L5795 | ADDITION, EXOSKELETAL SYSTEM, HI | 10/1/2006 | $773.98 | 3 |
| A | L5810 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $400.78 | 3 |
| A | L5811 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $525.73 | 3 |
| A | L5812 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $454.99 | 3 |
| A | L5814 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $2,628.18 | 3 |
| A | L5816 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $613.05 | 3 |
| A | L5818 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $692.26 | 3 |
| A | L5822 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| A | L5824 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| A | L5826 | ADDITION, ENDOSKELETAL KNEE-SHIN | 10/1/2006 | $2,295.72 | 3 |
| A | L5828 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| A | L5830 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/1994 | NC | 9 |
| A | L5840 | ENDOSKELETAL KNEE/SHIN SYSTEM, M | 10/1/2006 | $2,909.50 | 3 |
| A | L5845 | ADDITION, ENDOSKELETAL, KNEE-SHI | 10/1/2006 | $1,268.39 | 3 |
| A | L5846 | ADDITION, ENDOSKELETAL, KNEE-SHI | 1/1/2005 | INVALID | N |
| A | L5847 | ADDITION, ENDOSKELETAL KNEE-SHIN | 1/1/2005 | INVALID | N |
| A | L5848 | ADD TO ENDOSKELETAL, KNEE-SHIN S | 4/1/2003 | NC | 9 |
| A | L5850 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $92.22 | 3 |
| A | L5855 | ADDITION, ENDOSKELETAL SYSTEM, H | 10/1/2006 | $296.82 | 3 |
| A | L5856 | ADDITION TO LOWER EXTREMITY PROS | 1/1/2005 | NC | 9 |
| A | L5857 | ADDITION TO LOWER EXTREMITY PROS | 1/1/2005 | NC | 9 |
| A | L5858 | ADDITION TO LOWER EXTREMITY PROS | 1/1/2006 | NC | 9 |
| A | L5910 | ADDITION, ENDOSKELETAL SYSTEM, B | 10/1/2006 | $261.07 | 3 |
| A | L5920 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $382.47 | 3 |
| A | L5925 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $314.38 | 3 |
| A | L5930 | ADDITION, ENDOSKELETAL SYSTEM, H | 10/1/2006 | $2,381.92 | 3 |
| A | L5940 | ADDITION, ENDOSKELETAL SYSTEM, B | 10/1/2006 | $449.55 | 3 |
| A | L5950 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $646.20 | 3 |
| A | L5960 | ADDITION, ENDOSKELETAL SYSTEM, H | 10/1/2006 | $738.58 | 3 |
| A | L5962 | ADDITION, ENDOSKELETAL SYSTEM, B | 10/1/2006 | $564.95 | 3 |
| A | L5964 | ADDITION, ENDOSKELETAL SYSTEM, A | 10/1/2006 | $813.29 | 3 |
| A | L5966 | ADDITION, ENDOSKELETAL SYSTEM, H | 10/1/2006 | $1,054.40 | 3 |
| A | L5968 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $2,571.58 | 3 |
| A | L5970 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $176.83 | 3 |
| A | L5971 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $196.72 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L5972 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $282.59 | 3 |
| A | L5974 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $223.97 | 3 |
| A | L5975 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $328.07 | 3 |
| A | L5976 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $451.28 | 3 |
| A | L5978 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $255.06 | 3 |
| A | L5979 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $2,172.84 | 3 |
| A | L5980 | ALL LOWER EXTREMITY PROSTHESES, | 1/1/1994 | NC | 9 |
| A | L5981 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $2,361.24 | 3 |
| A | L5982 | ALL EXOSKELETAL LOWER EXTREMITY | 10/1/2006 | $550.85 | 3 |
| A | L5984 | ALL ENDOSKELETAL LOWER EXTREMITY | 10/1/2006 | $520.77 | 3 |
| A | L5985 | ALL ENDOSKELETAL LOWER EXTREMITY | 10/1/2006 | $199.83 | 3 |
| A | L5986 | ALL LOWER EXTREMITY PROSTHESES, | 10/1/2006 | $551.17 | 3 |
| A | L5987 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $5,090.73 | 3 |
| A | L5988 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $1,413.70 | 3 |
| A | L5989 | ADDITION TO LOWER EXTREMITY PROS | 1/1/2005 | INVALID | N |
| A | L5990 | ADDITION TO LOWER EXTREMITY PROS | 10/1/2006 | $1,358.11 | 3 |
| A | L5993 | ADDITION TO LOWER EXTREM PROSTHE | 1/1/2007 | NC | 9 |
| A | L5994 | ADDITION TO LOWER EXTREM PROSTHE | 1/1/2007 | NC | 9 |
| A | L5995 | ADD TO LOWER EXTREMITY PROSTHESI | 10/1/2006 | $961.31 | 3 |
| A | L5999 | UNLISTED PROCEDURES FOR LOWER EX | 3/1/2004 | $900.00 | 3 |
| A | L6000 | PARTIAL HAND ROBIN-AIDS THUMB RE | 10/1/2006 | $1,277.05 | 3 |
| A | L6010 | PARTIAL HAND ROBIN-AIDS LITTLE A | 10/1/2006 | $1,421.15 | 3 |
| A | L6020 | PARTIAL HAND ROBIN-AIDS NO FINGE | 10/1/2006 | $1,325.01 | 3 |
| A | L6025 | TRANSCARPAL/METACARPAL OR PARTIA | 4/1/2003 | NC | 9 |
| A | L6050 | WRIST DISARTICULATION MOLDED SOC | 10/1/2006 | $1,565.05 | 3 |
| A | L6055 | WRIST DISARTICULATION, MOLDED SO | 10/1/2006 | $2,336.84 | 3 |
| A | L6100 | BELOW ELBOW MOLDED SOCKET FLEXIB | 10/1/2006 | $1,685.75 | 3 |
| A | L6110 | BELOW ELBOW MOLDED SOCKET (MUENS | 10/1/2006 | $1,719.34 | 3 |
| A | L6120 | BELOW ELBOW MOLDED DOUBLE WALL S | 10/1/2006 | $2,162.02 | 3 |
| A | L6130 | BELOW ELBOW MOLDED DOUBLE WALL S | 10/1/2006 | $2,488.11 | 3 |
| A | L6200 | ELBOW DISARTICULATION MOLDED SOC | 10/1/2006 | $2,553.48 | 3 |
| A | L6205 | ELBOW DISARTICULATION, MOLDED SO | 10/1/2006 | $3,199.12 | 3 |
| A | L6250 | ABOVE ELBOW MOLDED DOUBLE WALL S | 10/1/2006 | $2,381.30 | 3 |
| A | L6300 | SHOULDER DISARTICULATION MOLDED | 10/1/2006 | $3,349.60 | 3 |
| A | L6310 | SHOULDER DISARTICULATION, PASSIV | 5/1/1997 | NC | 9 |
| A | L6320 | SHOULDER DISARTICULATION PASSIVE | 10/1/2006 | $1,231.90 | 3 |
| A | L6350 | INTERSCAPULAR THORACIC MOLDED SO | 10/1/2006 | $3,764.71 | 3 |
| A | L6360 | INTERSCAPULAR THORACIC, PASSIVE | 5/1/1997 | NC | 9 |
| A | L6370 | INTERSCAPULAR THORACIC PASSIVE R | 10/1/2006 | $1,464.11 | 3 |
| A | L6380 | IMM POST SURG/EARLY FIT, APP OF | 10/1/2006 | $985.74 | 3 |
| A | L6382 | IMM POST SURG/EARLY FIT, APP OF | 10/1/2006 | $1,160.45 | 3 |
| A | L6384 | IMM POST SUR/EARLY FIT, APP OF I | 10/1/2006 | $1,469.12 | 3 |
| A | L6386 | IMMEDIATE POST SURGICAL OR EARLY | 10/1/2006 | $332.75 | 3 |
| A | L6388 | IMMEDIATE POST SURGICAL OR EARLY | 10/1/2006 | $365.74 | 3 |
| A | L6400 | BELOW ELBOW MOLDED SOCKET ENDOSK | 10/1/2006 | $1,866.28 | 3 |
| A | L6450 | ELBOW DISARTICULATION MOLDED SOC | 10/1/2006 | $2,533.44 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L6500 | ABOVE ELBOW MOLDED SOCKET ENDOSK | 10/1/2006 | $2,562.39 | 3 |
| A | L6550 | SHOULDER DISARTICULATION MOLDED | 10/1/2006 | $3,427.75 | 3 |
| A | L6570 | INTERSCAPULAR THORACIC MOLDED SO | 10/1/2006 | $3,820.95 | 3 |
| A | L6580 | PREP, WRIST DISART/BELOW ELB, SI | 10/1/2006 | $1,298.49 | 3 |
| A | L6582 | PREP, WRIST DISART/BELOW ELBOW/S | 10/1/2006 | $1,031.90 | 3 |
| A | L6584 | PREP, ELB DISART/ABOVE ELB/SIN W | 10/1/2006 | $1,753.24 | 3 |
| A | L6586 | PREP, ELB DISART/ABOVE ELB/SIN W | 10/1/2006 | $1,498.40 | 3 |
| A | L6588 | PREP, SHOULDER DISART/INTERSCAPU | 10/1/2006 | $2,537.11 | 3 |
| A | L6590 | PREP, SHOULDER DISART/INTERSCAPU | 10/1/2006 | $2,337.74 | 3 |
| A | L6600 | UPPER EXTREMITY ADDITIONS POLYCE | 10/1/2006 | $146.50 | 3 |
| A | L6605 | UPPER EXTREMITY ADDITIONS SINGLE | 10/1/2006 | $138.21 | 3 |
| A | L6610 | UPPER EXTREMITY ADDITIONS FLEXIB | 10/1/2006 | $126.07 | 3 |
| A | L6611 | ADDITION TO UPPER ETREMITY PROST | 1/1/2007 | NC | 9 |
| A | L6615 | UPPER EXTREMITY ADDITIONS DISCON | 10/1/2006 | $154.06 | 3 |
| A | L6616 | UPPER EXTREMITY ADDITION, ADDITI | 10/1/2006 | $56.15 | 3 |
| A | L6620 | UPPER EXTREMITY ADDITIONS FLEXIO | 10/1/2006 | $241.30 | 3 |
| A | L6621 | UPPER EXTREMITY PROSTHESIS ADDIT | 1/1/2006 | NC | 9 |
| A | L6623 | UPPER EXTREMITY ADDITION, SPRING | 10/1/2006 | $519.08 | 3 |
| A | L6624 | UPPER EXTREMITY ADDITION, FLEXIO | 1/1/2007 | NC | 9 |
| A | L6625 | UPPER EXTREMITY ADDITIONS ROTATI | 10/1/2006 | $443.93 | 3 |
| A | L6628 | UPPER EXTREMITY ADDITION, QUICK | 10/1/2006 | $416.90 | 3 |
| A | L6629 | UPPER EXTREMITY ADDITION, QUICK | 10/1/2006 | $105.66 | 3 |
| A | L6630 | UPPER EXTREMITY ADDITIONS STAINL | 10/1/2006 | $155.35 | 3 |
| A | L6632 | UPPER EXTREMITY ADDITION, LATEX | 10/1/2006 | $46.83 | 3 |
| A | L6635 | UPPER EXTREMITY ADDITIONS LIFT A | 10/1/2006 | $136.20 | 3 |
| A | L6637 | UPPER EXTREMITY ADDITION, NUDGE | 10/1/2006 | $313.21 | 3 |
| A | L6638 | UPPER EXTREMITY ADD TO PROSTHESI | 4/1/2003 | NC | 9 |
| A | L6639 | UPPER EXTREMITY ADDITION, HEAVY | 1/1/2007 | NC | 9 |
| A | L6640 | UPPER EXTREMITY ADDITIONS SHOULD | 10/1/2006 | $248.35 | 3 |
| A | L6641 | UPPER EXTREMITY ADDITION, EXCURS | 10/1/2006 | $123.78 | 3 |
| A | L6642 | UPPER EXTREMITY ADDITION, EXCURS | 10/1/2006 | $167.42 | 3 |
| A | L6645 | UPPER EXTREMITY ADDITIONS SHOULD | 10/1/2006 | $285.77 | 3 |
| A | L6646 | UPPER EXTREMITY ADD, SHOULDER JO | 4/1/2003 | NC | 9 |
| A | L6647 | UPPER EXTREMITY ADD, SHOULDER LO | 10/1/2006 | $392.97 | 3 |
| A | L6648 | UPPER EXTRMITY ADDITION, SHOULDE | 4/1/2003 | NC | 9 |
| A | L6650 | UPPER EXTREMITY ADDITIONS SHOULD | 10/1/2006 | $246.46 | 3 |
| A | L6655 | UPPER EXTREMITY ADDITIONS STANDA | 10/1/2006 | $72.19 | 3 |
| A | L6660 | UPPER EXTREMITY ADDITIONS HEAVY | 10/1/2006 | $76.43 | 3 |
| A | L6665 | UPPER EXTREMITY ADDITIONS TEFLON | 10/1/2006 | $35.53 | 3 |
| A | L6670 | UPPER EXTREMITY ADDITIONS HOOK T | 10/1/2006 | $36.76 | 3 |
| A | L6672 | UPPER EXTREMTIY ADDITIONS HARNES | 10/1/2006 | $139.54 | 3 |
| A | L6675 | UPPER EXTREMITY ADDITIONS HARNES | 10/1/2006 | $86.56 | 3 |
| A | L6676 | UPPER EXTREMITY ADDITIONS HARNES | 10/1/2006 | $106.43 | 3 |
| A | L6677 | UPPER EXTREMITY ADDITION, HARNES | 1/1/2006 | NC | 9 |
| A | L6680 | UPPER EXTREMITY ADDITIONS TEST S | 10/1/2006 | $171.49 | 3 |
| A | L6682 | UPPER EXTREMITY ADDITIONS TEST S | 10/1/2006 | $218.17 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L6684 | UPPER EXTREMITY ADDITIONS TEST S | 10/1/2006 | $334.31 | 3 |
| A | L6686 | UPPER EXTREMITY ADDITION, SUCTIO | 10/1/2006 | $479.26 | 3 |
| A | L6687 | UPPER EXTREMITY ADDITION, FRAME | 10/1/2006 | $415.80 | 3 |
| A | L6688 | UPPER EXTREMITY ADDITION, FRAME | 10/1/2006 | $509.15 | 3 |
| A | L6689 | UPPER EXTREMITY ADDITION, FRAME | 10/1/2006 | $623.17 | 3 |
| A | L6690 | UPPER EXTREMITY ADDITION, FRAME | 10/1/2006 | $660.89 | 3 |
| A | L6691 | UPPER EXTREMITY ADDITION, REMOVA | 10/1/2006 | $285.92 | 3 |
| A | L6692 | UPPER EXTREMITY ADDITION, SILICO | 10/1/2006 | $403.12 | 3 |
| A | L6693 | UPPER EXTREMITY ADDITION, EXTERN | 10/1/2006 | $2,009.06 | 3 |
| A | L6694 | ADDITION TO UPPER EXTREMITY PROS | 1/1/2005 | NC | 9 |
| A | L6695 | ADDITION TO UPPER EXTREMITY PROS | 1/1/2005 | NC | 9 |
| A | L6696 | ADDITION TO UPPER EXTREMITY PROS | 1/1/2005 | NC | 9 |
| A | L6697 | ADDITION TO UPPER EXTREMITY PROS | 1/1/2005 | NC | 9 |
| A | L6698 | ADDITION TO UPPER EXTREMITY PROS | 1/1/2005 | NC | 9 |
| A | L6700 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6703 | TERMINAL DEVICE, PASSIVE HAND/MI | 1/1/2007 | NC | 9 |
| A | L6704 | TERMINAL DEVICE, SPORT/RECREATIO | 1/1/2007 | NC | 9 |
| A | L6705 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6706 | TERMINAL DEVICE, HOOK, MECHANICA | 1/1/2007 | NC | 9 |
| A | L6707 | TERMINAL DEVICE, HOOK, MECHANICA | 1/1/2007 | NC | 9 |
| A | L6708 | TERMINAL DEVICE, HAND, MECHANICA | 1/1/2007 | NC | 9 |
| A | L6709 | TERMINAL DEVICE, HAND, MECHANICA | 1/1/2007 | NC | 9 |
| A | L6710 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6715 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6720 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6725 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6730 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6735 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6740 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6745 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6750 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6755 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6765 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6770 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6775 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6780 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| A | L6790 | TERMINAL DEVICE, HOOK-ACCU HOOK, | 1/1/2007 | INVALID | N |
| A | L6795 | TERMINAL DEVICE, HOOK-2 LOAD, OR | 1/1/2007 | INVALID | N |
| A | L6800 | TERMINAL DEVICE, HOOK-APRL VC, O | 1/1/2007 | INVALID | N |
| A | L6805 | TERMINAL DEVICE, MODIFIER WRIST | 10/1/2006 | $304.88 | 3 |
| A | L6806 | TERMINAL DEVICE, HOOK, TRS GRIP, | 1/1/2007 | INVALID | N |
| A | L6807 | TERMINAL DEVICE, HOOK, GRIP I, G | 1/1/2007 | INVALID | N |
| A | L6808 | TERMINAL DEVICE, HOOK, TRS ADEPT | 1/1/2007 | INVALID | N |
| A | L6809 | TERMINAL DEVICE, HOOK, TRS SUPER | 1/1/2007 | INVALID | N |
| A | L6810 | TERMINAL DEVICE, PINCHER TOOL, O | 10/1/2006 | $144.26 | 3 |
| A | L6825 | TERMINAL DEVICE, HAND, DORRANCE, | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L6830 | TERMINAL DEVICE, HAND, APRL, VC | 1/1/2007 | INVALID | N |
| A | L6835 | TERMINAL DEVICE, HAND, SIERRA, V | 1/1/2007 | INVALID | N |
| A | L6840 | TERMINAL DEVICE, HAND, BECKER IM | 1/1/2007 | INVALID | N |
| A | L6845 | TERMINAL DEVICE, HAND, BECKER LO | 1/1/2007 | INVALID | N |
| A | L6850 | TERMINAL DEVICE, HAND, BECKER PL | 1/1/2007 | INVALID | N |
| A | L6855 | TERMINAL DEVICE, HAND, ROBIN-AID | 1/1/2007 | INVALID | N |
| A | L6860 | TERMINAL DEVICE, HAND, ROBIN-AID | 1/1/2007 | INVALID | N |
| A | L6865 | TERMINAL DEVICE, HAND, PASSIVE H | 1/1/2007 | INVALID | N |
| A | L6867 | TERMINAL DEVICE, HAND, DETROLT I | 1/1/2007 | INVALID | N |
| A | L6868 | TERMINAL DEVICE, HAND, PASSIVE I | 1/1/2007 | INVALID | N |
| A | L6870 | TERMINAL DEVICE, HAND, CHILD MIT | 1/1/2007 | INVALID | N |
| A | L6872 | TERMINAL DEVICE, HAND, NYU CHILD | 1/1/2007 | INVALID | N |
| A | L6873 | TERMINAL DEVICE, HAND, MECHANICA | 1/1/2007 | INVALID | N |
| A | L6875 | TERMINAL DEVICE, HAND, BOCK, VC | 1/1/2007 | INVALID | N |
| A | L6880 | TERMINAL DEVICE, HAND, BOCK, VO | 1/1/2007 | INVALID | N |
| A | L6881 | AUTOMATIC GRASP FEATURE, ADDITIO | 1/1/2002 | NC | 9 |
| A | L6882 | MICROPROCESSOR CONTROL FEATURE, | 1/1/2002 | NC | 9 |
| A | L6883 | REPLACEMENT SOCKET, BELOW ELBOW/ | 1/1/2006 | NC | 9 |
| A | L6884 | REPLACEMENT SOCKET, ABOVE ELBOW | 1/1/2006 | NC | 9 |
| A | L6885 | REPLACEMENT SOCKET, SHOULDER DIS | 1/1/2006 | NC | 9 |
| A | L6890 | ADDITION TO UPPER EXTREMITY PROS | 10/1/2006 | $133.86 | 3 |
| A | L6895 | ADDITION TO UPPER EXTREMITY PROS | 10/1/2006 | $446.89 | 3 |
| A | L6900 | HAND RESTORATION (CASTS SHADING | 10/1/2006 | $1,399.70 | 3 |
| A | L6905 | HAND RESTORATION (CASTS SHADING | 10/1/2006 | $1,411.15 | 3 |
| A | L6910 | HAND RESTORATION (CASTS SHADING | 10/1/2006 | $1,158.19 | 3 |
| A | L6915 | HAND RESTORATION (SHADING AND ME | 10/1/2006 | $523.42 | 3 |
| A | L6920 | WRIST DISARTICULATION, EXTERNAL | 5/1/1997 | NC | 9 |
| A | L6925 | WRIST DISARTICULATION, EXTERNAL | 5/1/1997 | NC | 9 |
| A | L6930 | BELOW ELBOW, EXTERNAL POWER, SEL | 5/1/1997 | NC | 9 |
| A | L6935 | BELOW ELBOW, EXTERNAL POWER, SEL | 5/1/1997 | NC | 9 |
| A | L6940 | ELBOW DISARTICULATION, EXTERNAL | 5/1/1997 | NC | 9 |
| A | L6945 | ELBOW DISARTICULATION, EXTERNAL | 5/1/1997 | NC | 9 |
| A | L6950 | ABOVE ELBOW, EXTERNAL POWER, MOL | 5/1/1997 | NC | 9 |
| A | L6955 | ABOVE ELBOW, EXTERNAL POWER, MOL | 5/1/1997 | NC | 9 |
| A | L6960 | SHOULDER DISARTICULATION, EXTERN | 5/1/1997 | NC | 9 |
| A | L6965 | SHOULDER DISARTICULATION, EXTERN | 5/1/1997 | NC | 9 |
| A | L6970 | INTERSCAPULAR-THORACIC, EXTERNAL | 5/1/1997 | NC | 9 |
| A | L6975 | INTERSCAPULAR-THORACIC, EXTERNAL | 5/1/1997 | NC | 9 |
| A | L7007 | ELECTRIC HAND, SWITCH OR MYOELEC | 1/1/2007 | NC | 9 |
| A | L7008 | ELECTRIC HAND, SWITCH OR MYOELEC | 1/1/2007 | NC | 9 |
| A | L7009 | ELECTRIC HOOK, SWITCH OR MYOELEC | 1/1/2007 | NC | 9 |
| A | L7010 | ELECTRONIC HAND, OTTO BOCK, STEE | 1/1/2007 | INVALID | N |
| A | L7015 | ELECTRONIC HAND, SYSTEM TEKNIK, | 1/1/2007 | INVALID | N |
| A | L7020 | ELECTRONIC GREIFER, OTTO BOCK OR | 1/1/2007 | INVALID | N |
| A | L7025 | ELECTRONIC HAND, OTTO BOCK OR EQ | 1/1/2007 | INVALID | N |
| A | L7030 | ELECTRONIC HAND, SYSTEM TEKNIK, | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L7035 | ELECTRONIC GREIFER, OTTO BOCK OR | 1/1/2007 | INVALID | N |
| A | L7040 | PREHENSILE ACTUATOR, HOSMER OR E | 5/1/1997 | NC | 9 |
| A | L7045 | ELECTRONIC HOOK, CHILD, MICHIGAN | 5/1/1997 | NC | 9 |
| A | L7170 | ELECTRONIC ELBOW, HOSMER OR EQUA | 5/1/1997 | NC | 9 |
| A | L7180 | ELECTRONIC ELBOW, MICROPROCESSOR | 1/1/1997 | NC | 9 |
| A | L7181 | ELECTRONIC ELBOW, MICROPROCESSOR | 1/1/2005 | NC | 9 |
| A | L7185 | ELECTRONIC ELBOW, ADOLESCENT, VA | 5/1/1997 | NC | 9 |
| A | L7186 | ELECTRONIC ELBOW, CHILD, VARIETY | 5/1/1997 | NC | 9 |
| A | L7190 | ELECTRONIC ELBOW, ADOLESCENT, VA | 5/1/1997 | NC | 9 |
| A | L7191 | ELECTRONIC ELBOW, CHILD, VARIETY | 5/1/1997 | NC | 9 |
| A | L7260 | ELECTRONIC WRIST ROTATOR, OTTO B | 5/1/1997 | NC | 9 |
| A | L7261 | ELECTRONIC WRIST ROTATOR, FOR UT | 5/1/1997 | NC | 9 |
| A | L7266 | SERVO CONTROL, STEEPER OR EQUAL | 5/1/1997 | NC | 9 |
| A | L7272 | ANALOGUE CONTROL, UNB OR EQUAL | 5/1/1997 | NC | 9 |
| A | L7274 | PROPORTIONAL CONTROL, 6-12 VOLT, | 1/1/1997 | NC | 9 |
| A | L7360 | SIX VOLT BATTERY, OTTO BOCK OR E | 5/1/1997 | NC | 9 |
| A | L7362 | BATTERY CHARGER, SIX VOLT, OTTO | 5/1/1997 | NC | 9 |
| A | L7364 | TWELVE VOLT BATTERY, UTAH OR EQU | 5/1/1997 | NC | 9 |
| A | L7366 | BATTERY CHARGER, TWELVE VOLT, UT | 5/1/1997 | NC | 9 |
| A | L7367 | LITHIUM ION BATTERY, REPLACEMENT | 4/1/2003 | NC | 9 |
| A | L7368 | LITHIUM ION BATTERY CHARGER | 4/1/2003 | NC | 9 |
| A | L7400 | ADDITION TO UPPER EXTREMITY PROS | 1/1/2006 | NC | 9 |
| A | L7401 | ADDITION TO UPPER EXTREMITY PROS | 1/1/2006 | NC | 9 |
| A | L7402 | ADDITION TO UPPER EXTREMITY PROS | 1/1/2006 | NC | 9 |
| A | L7403 | ADDITION TO UPPER EXTREMITY PROS | 10/1/2006 | $289.93 | 3 |
| A | L7404 | ADDITION TO UPPER EXTREMITY PROS | 10/1/2006 | $437.58 | 3 |
| A | L7405 | ADDITION TO UPPER EXTREMITY PROS | 10/1/2006 | $572.30 | 3 |
| A | L7499 | UNLISTED PROCEDURES FOR UPPER EX | 10/1/2005 | $928.80 | 3 |
| A | L7500 | REPAIR OF PROSTHETIC DEVICE, HRL | 5/9/2005 | NC | 9 |
| A | L7503 | ANKLE, SYMES, MOLDED TO PT MODEL | 1/1/2006 | $0.01 | 3 |
| A | L7600 | PROSTHETIC DONNING SLEEVE, ANY M | 1/1/2006 | $0.01 | 3 |
| A | L7900 | VACUUM ERECTION SYSTEM | 3/1/1997 | NC | 9 |
| A | L8000 | BREAST PROSTHESIS, MASTECTOMY BR | 10/1/2006 | $29.78 | 3 |
| A | L8001 | BREAST PROSTHESIS, MASTECTOMY BR | 10/1/2006 | $93.88 | 3 |
| A | L8002 | BREAST PROSTHESIS, MASTECTOMY BR | 10/1/2006 | $123.50 | 3 |
| A | L8010 | BREAST PROSTHESIS, MASTECTOMY SL | 6/16/2002 | NC | 9 |
| A | L8015 | EXTERNAL BREAST PROSTHESIS GARME | 10/1/2006 | $44.06 | 3 |
| A | L8020 | BREAST PROSTHESIS, MASTECTOMY FO | 10/1/2006 | $173.67 | 3 |
| A | L8030 | BREAST PROSTHESIS, SILICONE OR E | 10/1/2006 | $227.41 | 3 |
| A | L8035 | CUSTOM BREAST PROSTHESIS, POST M | 7/1/2007 | NC | 9 |
| A | L8039 | BREAST PROSTHESIS, NOT OTHERWISE | 3/1/2004 | $900.00 | 3 |
| A | L8040 | NASAL PROSTHESIS, PROVIDED BY A | 10/1/2006 | $1,423.17 | 3 |
| A | L8041 | MIDFACIAL PROSTHESIS, PROVIDED B | 10/1/2006 | $1,715.47 | 3 |
| A | L8042 | ORBITAL PROSTHESIS, PROVIDED BY | 10/1/2006 | $1,927.51 | 3 |
| A | L8043 | UPPER FACIAL PROSTHESIS, PROVIDE | 10/1/2006 | $2,158.82 | 3 |
| A | L8044 | HEMI-FACIAL PROSTHESIS, PROVIDED | 10/1/2006 | $2,390.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L8045 | AURICULAR PROSTHESIS, PROVIDED B | 10/1/2006 | $1,500.36 | 3 |
| A | L8046 | PARTIAL FACIAL PROSTHESIS, PROVI | 10/1/2006 | $1,542.01 | 3 |
| A | L8047 | NASAL SEPTAL PROSTHESIS, PROVIDE | 10/1/2006 | $790.28 | 3 |
| A | L8048 | UNSPECIFIED MAXILLOFACIAL PROSTH | 10/1/2005 | $4,644.00 | 3 |
| A | L8100 | GRADIENT COMPRESSION STOCKING, B | 1/1/2006 | INVALID | N |
| A | L8110 | GRADIENT COMPRESSION STOCKING, B | 1/1/2006 | INVALID | N |
| A | L8120 | GRADIENT COMPRESSION STOCKING, B | 1/1/2006 | INVALID | N |
| A | L8130 | GRADIENT COMPRESSION STOCKING, T | 1/1/2006 | INVALID | N |
| A | L8140 | GRADIENT COMPRESSION STOCKING, T | 1/1/2006 | INVALID | N |
| A | L8150 | GRADIENT COMPRESSION STOCKING, T | 1/1/2006 | INVALID | N |
| A | L8160 | GRADIENT COMPRESSION STOCKING, F | 1/1/2006 | INVALID | N |
| A | L8170 | GRADIENT COMPRESSION STOCKING, F | 1/1/2006 | INVALID | N |
| A | L8180 | GRADIENT COMPRESSION STOCKING, F | 1/1/2006 | INVALID | N |
| A | L8190 | GRADIENT COMPRESSION STOCKING, W | 1/1/2006 | INVALID | N |
| A | L8195 | GRADIENT COMPRESSION STOCKING, W | 1/1/2006 | INVALID | N |
| A | L8200 | GRADIENT COMPRESSION STOCKING, W | 1/1/2006 | INVALID | N |
| A | L8210 | GRADIENT COMPRESSION STOCKING, C | 1/1/2006 | INVALID | N |
| A | L8220 | GRADIENT COMPRESSION STOCKING, L | 1/1/2006 | INVALID | N |
| A | L8230 | GRADIENT COMPRESSION STOCKING, G | 1/1/2006 | INVALID | N |
| A | L8239 | GRADIENT COMPRESSION STOCKING, N | 1/1/2006 | INVALID | N |
| A | L8300 | TRUSSES SINGLE WITH STANDARD PAD | 10/1/2006 | $75.54 | 3 |
| A | L8310 | TRUSSES DOUBLE WITH STANDARD PAD | 10/1/2006 | $105.82 | 3 |
| A | L8320 | TRUSSES ADDITION TO STANDARD PAD | 10/1/2006 | $40.28 | 3 |
| A | L8330 | TRUSSES ADDITION TO STANDARD PAD | 10/1/2006 | $35.59 | 3 |
| A | L8400 | PROSTHETIC SHEATH BELOW KNEE EAC | 10/1/2006 | $13.37 | 3 |
| A | L8410 | PROSTHETIC SHEATH ABOVE KNEE EAC | 10/1/2006 | $19.05 | 3 |
| A | L8415 | PROSTHETIC SHEATH, UPPER LIMB, E | 10/1/2006 | $19.57 | 3 |
| A | L8417 | PROSTHETIC SHEATH/SOCK, INCLUDIN | 10/1/2006 | $53.21 | 3 |
| A | L8420 | PROSTHETIC SOCK, MULTIPLE PLY, B | 10/1/2006 | $14.46 | 3 |
| A | L8430 | PROSTHETIC SOCK, MULTIPLE PLY, A | 10/1/2006 | $16.53 | 3 |
| A | L8435 | PROSTHETIC SOCK, MULTI PLY, UPPE | 10/1/2006 | $20.21 | 3 |
| A | L8440 | PROSTHETIC SHRINKER BELOW KNEE E | 10/1/2006 | $30.14 | 3 |
| A | L8460 | PROSTHETIC SHRINKER ABOVE KNEE E | 10/1/2006 | $62.91 | 3 |
| A | L8465 | PROSTHETIC SHRINKER UPPER LIMB E | 10/1/2006 | $35.16 | 3 |
| A | L8470 | STUMP SOCK, SINGLE PLY, FITTING, | 10/1/2006 | $4.81 | 3 |
| A | L8480 | PROSTHETIC SOCK, SINGLE PLY, FIT | 10/1/2006 | $8.84 | 3 |
| A | L8485 | PROSTHETIC SOCK, SINGLE PLY, FIT | 10/1/2006 | $10.36 | 3 |
| A | L8490 | ADDITION TO PROSTHETIC SHEATH/SO | 1/1/2005 | INVALID | N |
| A | L8499 | UNLISTED PROCEDURE FOR MISCELLAN | 10/1/2005 | $928.80 | 3 |
| A | L8509 | TRACHO-ESOPHAGEAL VOICE PROSTHES | 10/1/2006 | $81.75 | 3 |
| A | L8510 | VOICE AMPLIFIER | 10/1/2006 | $198.94 | 3 |
| A | L8511 | INSERT FOR INDWELLING TRACHEOESO | 1/1/2004 | NC | 9 |
| A | L8512 | GELATIN CAPSULES OR EQUIVALENT, | 1/1/2004 | NC | 9 |
| A | L8513 | CLEANING DEVICE USED WITH TRACHE | 1/1/2004 | NC | 9 |
| A | L8514 | TRACHEOESOPHAGEAL PUNCTURE DILAT | 1/1/2004 | NC | 9 |
| A | L8614 | COCHLEAR DEVICE/SYSTEM | 1/1/1994 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | L8620 | LITHIUM ION BATTERY FOR USE WITH | 1/1/2006 | INVALID | N |
| A | L8631 | METACARPAL PHALANGEAL JOINT REPL | 1/1/2004 | NC | 9 |
| A | L8659 | INTERPHALANGEAL FINGER JOINT REP | 1/1/2004 | NC | 9 |
| A | L8690 | AUDITORY OSSEOINTEGRATED DEVICE, | 1/1/2007 | NC | 9 |
| A | L8691 | AUDITORY OSSEOINTEGRATED DEVICE, | 1/1/2007 | NC | 9 |
| A | L8695 | EXTERNAL RECHARGING SYSTEM FOR B | 1/1/2007 | NC | 9 |
| A | L8699 | PROSTHETIC IMPLANT, NOS | 1/1/2002 | NC | 9 |
| A | L9900 | ORTHOTIC AND PROSTHETIC SUPPLY, | 3/1/2004 | $900.00 | 3 |
| A | Q0480 | DRIVER FOR USE WITH PNEUMATIC VE | 10/1/2005 | NC | 9 |
| A | Q0481 | MICROPROCESSOR CONTROL UNIT FOR | 10/1/2005 | NC | 9 |
| A | Q0482 | MICROPROCESSOR CONTROL UNIT FOR | 10/1/2005 | NC | 9 |
| A | Q0483 | MONITOR/DISPLAY MODULE FOR USE W | 10/1/2005 | NC | 9 |
| A | Q0484 | MONITOR/DISPLAY MODULE FOR USE W | 10/1/2005 | NC | 9 |
| A | Q0485 | MONITOR CONTROL CABLE FOR USE WI | 10/1/2005 | NC | 9 |
| A | Q0486 | MONITOR CONTROL CABLE FOR USE WI | 10/1/2005 | NC | 9 |
| A | Q0487 | LEADS (PNEUMATIC/ELECTRICAL) FOR | 10/1/2005 | NC | 9 |
| A | Q0488 | POWER PACK BASE FOR USE WITH ELE | 10/1/2005 | NC | 9 |
| A | Q0489 | POWER PACK BASE FOR USE WITH ELE | 10/1/2005 | NC | 9 |
| A | Q0490 | EMERGENCY POWER SOURCE FOR USE W | 10/1/2005 | NC | 9 |
| A | Q0491 | EMERGENCY POWER SOURCE FOR USE W | 10/1/2005 | NC | 9 |
| A | Q0492 | EMERGENCY POWER SUPPLY CABLE FOR | 10/1/2005 | NC | 9 |
| A | Q0493 | EMERGENCY POWER SUPPLY CABLE FOR | 10/1/2005 | NC | 9 |
| A | Q0494 | EMERGENCY HAND PUMP FOR USE WITH | 10/1/2005 | NC | 9 |
| A | Q0495 | BATTERY/POWER PACK CHARGER FOR U | 10/1/2005 | NC | 9 |
| A | Q0496 | BATTERY FOR USE WITH ELECTRIC OR | 10/1/2005 | NC | 9 |
| A | Q0497 | BATTERY CLIPS FOR USE WITH ELECT | 10/1/2005 | NC | 9 |
| A | Q0498 | HOLSTER FOR USE WITH ELECTRIC OR | 10/1/2005 | NC | 9 |
| A | Q0499 | BELT/VEST FOR USE WITH ELECTRIC | 10/1/2005 | NC | 9 |
| A | Q0500 | FILTERS FOR USE WITH ELECTRIC OR | 10/1/2005 | NC | 9 |
| A | Q0501 | SHOWER COVER FOR USE WITH ELECTR | 10/1/2005 | NC | 9 |
| A | Q0502 | MOBILITY CART FOR PNEUMATIC VENT | 10/1/2005 | NC | 9 |
| A | Q0503 | BATTERY FOR PNEUMATIC VENTRICULA | 10/1/2005 | NC | 9 |
| A | Q0504 | POWER ADAPTER FOR PNEUMATIC VENT | 10/1/2005 | NC | 9 |
| A | Q0505 | MISCELLANEOUS SUPPLY OR ACCESSOR | 10/1/2005 | NC | 9 |
| A | S1001 | DELUXE ITEM, PATIENT AWARE (LIST | 1/1/2002 | NC | 9 |
| A | S1002 | CUSTOMIZED ITEM (LIST IN ADDITIO | 1/1/2002 | NC | 9 |
| A | S1030 | CONTINUOUS NONINVASIVE GLUCOSE M | 1/1/2002 | NC | 9 |
| A | S1031 | CONTINUOUS NONINVASIVE GLUCOSE M | 1/1/2002 | NC | 9 |
| A | S1040 | CRANIAL REMOLDING ORTHOSIS, RIGI | 4/1/2003 | $500.00 | 3 |
| A | S5165 | HOME MODIFICATIONS; PER SERVICE | 1/1/2006 | NC | 9 |
| A | S5560 | INSULIN DELIVERY DEVICE, REUSABL | 1/1/2004 | NC | 9 |
| A | S5561 | INSULIN DELIVERY DEVICE, REUSABL | 1/1/2004 | NC | 9 |
| A | S5565 | INSULIN CARTRIDGE FOR USE IN INS | 1/1/2004 | NC | 9 |
| A | S5566 | INSULIN CARTRIDGE FOR USE IN INS | 1/1/2004 | NC | 9 |
| A | S8097 | ASTHMA KIT (INCL BUT NOT LIMITED | 1/1/2002 | NC | 9 |
| A | S8100 | HOLDING CHAMBER OR SPACER FOR US | 1/1/2002 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | S8101 | HOLDING CHAMBER OR SPACER FOR US | 1/1/2002 | NC | 9 |
| A | S8120 | OXYGEN CONTENTS, GASEOUS, 1 UNIT | 1/1/2004 | NC | 9 |
| A | S8121 | OXYGEN CONTENTS, LIQUID, 1 UNIT | 1/1/2004 | NC | 9 |
| A | S8182 | HUMIDIFIER, HEATED, USED WITH VE | 1/1/2005 | INVALID | N |
| A | S8183 | HUMIDIFIER, HEATED, USED WITH VE | 1/1/2005 | INVALID | N |
| A | S8185 | FLUTTER DEVICE | 4/1/2002 | $44.34 | 3 |
| A | S8186 | SWIVEL ADAPTOR | 4/1/2002 | $8.00 | 3 |
| A | S8189 | TRACHEOSTOMY SUPPLY, NOT OTHERWI | 4/1/2002 | $100.00 | 3 |
| A | S8190 | ELECTRONIC SPIROMETER (OR MICROS | 1/1/2002 | NC | 9 |
| A | S8210 | MUCUS TRAP | 1/1/2001 | $6.00 | 3 |
| A | S8262 | MANDIBULAR ORTHOPEDIC REPOSITION | 4/1/2003 | NC | 9 |
| A | S8265 | HABERMAN FEEDER FOR CLEFT LIP/PA | 4/1/2003 | $15.00 | 3 |
| A | S8270 | ENURESIS ALARM, USING AUDITORY B | 1/1/2005 | NC | 9 |
| A | S8420 | GRADIENT PRESSURE AID (SLEEVE AN | 4/1/2002 | $128.18 | 3 |
| A | S8421 | GRADIENT PRESSURE AID (SLEEVE AN | 4/1/2002 | $90.00 | 3 |
| A | S8422 | GRADIENT PRESSURE AID (SLEEVE), | 4/1/2002 | $62.58 | 3 |
| A | S8423 | GRADIENT PRESSURE AID (SLEEVE), | 4/1/2002 | $62.58 | 3 |
| A | S8424 | GRADIENT PRESSURE AID (SLEEVE), | 1/1/2006 | $74.40 | 3 |
| A | S8425 | GRADIENT PRESSURE AID (GLOVE), C | 1/1/2002 | NC | 9 |
| A | S8426 | GRADIENT PRESSURE AID (GLOVE), C | 1/1/2002 | NC | 9 |
| A | S8427 | GRADIENT PRESSURE AID (GLOVE), R | 1/1/2002 | NC | 9 |
| A | S8428 | GRADIENT PRESSURE AID (GAUNTLET) | 1/1/2002 | NC | 9 |
| A | S8429 | GRADIENT PRESSURE EXTERIOR WRAP | 1/1/2002 | NC | 9 |
| A | S8430 | PADDING FOR COMPRESSION BANDAGE, | 1/1/2002 | NC | 9 |
| A | S8431 | COMPRESSION BANDAGE, ROLL | 1/1/2002 | NC | 9 |
| A | S8450 | SPLINT, PREFABRICATED, DIGIT (SP | 1/1/2002 | NC | 9 |
| A | S8451 | SPLINT, PREFABRICATED, WRIST OR | 1/1/2002 | NC | 9 |
| A | S8452 | SPLINT, PREFABRICATED, ELBOW | 1/1/2002 | NC | 9 |
| A | S8460 | CAMISOLE, POST MASTECTOMY | 4/1/2003 | NC | 9 |
| A | S8490 | INSULIN SYRINGES (100 SYRINGES, | 3/1/2004 | $21.34 | 3 |
| A | S8999 | RESUSCITATION BAG (FOR USE BY PA | 10/1/2001 | $30.00 | 3 |
| A | T1500 | DIAPER/INCONTINENT PANT, REUSABL | 1/1/2005 | INVALID | N |
| A | T1999 | MISC THERAPEUTIC ITEMS AND SUPPL | 4/1/2003 | NC | 9 |
| A | T4521 | ADULT-SIZED DISPOSABLE INCONTINE | 1/1/2005 | $0.50 | 3 |
| A | T4522 | ADULT-SIZED DISPOSABLE INCONTINE | 1/1/2005 | $0.68 | 3 |
| A | T4523 | ADULT-SIZED DISPOSABLE INCONTINE | 1/1/2005 | $0.75 | 3 |
| A | T4524 | ADULT-SIZED DISPOSABLE INCONTINE | 1/1/2005 | $0.80 | 3 |
| A | T4525 | ADULT-SIZED DISPOSABLE INCONTINE | 10/1/2005 | $0.50 | 3 |
| A | T4526 | ADULT-SIZED DISPOSABLE INCONTINE | 10/1/2005 | $0.68 | 3 |
| A | T4527 | ADULT-SIZED DISPOSABLE INCONTINE | 10/1/2005 | $0.75 | 3 |
| A | T4528 | ADULT-SIZED DISPOSABLE INCONTINE | 10/1/2005 | $0.80 | 3 |
| A | T4529 | PEDIATRIC-SIZED DISPOSABLE INCON | 1/1/2005 | $0.50 | 3 |
| A | T4530 | PEDIATRIC-SIZED DISPOSABLE INCON | 1/1/2005 | $0.50 | 3 |
| A | T4531 | PEDIATRIC-SIZED DISPOSABLE INCON | 1/1/2005 | $0.50 | 3 |
| A | T4532 | PEDIATRIC-SIZED DISPOSABLE INCON | 1/1/2005 | $0.50 | 3 |
| A | T4533 | YOUTH-SIZED DISPOSABLE INCONTINE | 1/1/2005 | $0.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| A | T4534 | YOUTH-SIZED DISPOSABLE INCONTINE | 10/1/2005 | $0.50 | 3 |
| A | T4535 | DISPOSABLE LINER/SHIELD/GUARD/PA | 1/1/2005 | $0.68 | 3 |
| A | T4536 | INCONTINENCE PRODUCT, PROTECTIVE | 1/1/2005 | $12.00 | 3 |
| A | T4537 | INCONTINENCE PRODUCT, PROTECTIVE | 1/1/2005 | $16.00 | 3 |
| A | T4539 | INCONTINENCE PRODUCT, DIAPER/BRI | 1/1/2005 | NC | 9 |
| A | T4540 | INCONTINENCE PRODUCT, PROTECTIVE | 1/1/2005 | $16.00 | 3 |
| A | T4541 | INCONTINENCE PRODUCT, DISPOSABLE | 1/1/2005 | $0.25 | 3 |
| A | T4542 | INCONTINENCE PRODUCT, DISPOSABLE | 1/1/2005 | $0.25 | 3 |
| A | T5001 | POSITIONING SEAT FOR PERSONS WIT | 1/1/2004 | NC | 9 |
| A | V2623 | PROSTHETIC EYE PLASTIC CUSTOM | 12/1/2002 | $806.74 | 3 |
| A | V2624 | POLISHING/RESURFACING OF OCULAR | 12/1/2002 | $60.86 | 3 |
| A | V2625 | ENLARGEMENT OF OCULAR PROSTHESIS | 12/1/2002 | $370.05 | 3 |
| A | V2626 | REDUCTION OF OCULAR PROSTHESIS | 12/1/2003 | $199.48 | 3 |
| A | V2627 | SCLERAL COVER SHELL | 12/1/2002 | $1,239.94 | 3 |
| A | V2628 | FABRICATION AND FITTING OF OCULA | 12/1/2002 | $304.19 | 3 |
| A | V2629 | PROSTHETIC EYE, OTHER TYPE | 4/1/1993 | $1,000.00 | 3 |
| A | V5266 | BATTERY FOR USE IN HEARING DEVIC | 4/1/2002 | $2.00 | 3 |
| B | A4232 | SYRINGE WITH NEEDLE FOR EXTERNAL | 7/1/2006 | NC | 9 |
| B | A4254 | REPLACEMENT BATTERY, ANY TYPE, F | 1/1/2006 | INVALID | N |
| B | A4335 | INCONTINENCE SUPPLY; MISCELLANEO | 4/1/2003 | $12.00 | 3 |
| B | A4400 | OSTOMY IRRIGATION SET | 6/1/1996 | NC | 9 |
| B | A4538 | DIAPER SERVICE, REUSABLE DIAPER, | 1/1/2005 | INVALID | N |
| B | A4611 | BATTERY, HEAVY DUTY; REPLACEMENT | 10/1/2006 | $17.31 | 3 |
| B | A4612 | BATTERY CABLES; REPLACEMENT FOR | 10/1/2006 | $8.14 | 3 |
| B | A4613 | BATTERY CHARGER; REPLACEMENT FOR | 10/1/2006 | $14.43 | 3 |
| B | A4618 | BREATHING CIRCUITS | 10/1/2006 | $0.87 | 3 |
| B | A4635 | UNDERARM PAD, CRUTCH, REPLACEMEN | 10/1/2006 | $0.69 | 3 |
| B | A4636 | REPLACEMENT, HANDGRIP, CANE, CRU | 10/1/2006 | $0.31 | 3 |
| B | A4637 | REPLACEMENT TIP, CANE, CRUTCH, O | 10/1/2006 | $0.30 | 3 |
| B | A4640 | REPLACEMENT PAD FOR USE WITH MED | 10/1/2006 | $5.48 | 3 |
| B | A7017 | NEBULIZER, DURABLE, GLASS OR AUT | 11/1/2006 | $10.82 | 3 |
| B | A7045 | EXHALATION PORT WITH OR WITHOUT | 10/1/2006 | $1.95 | 3 |
| B | A8000 | HELMET, PROTECTIVE, SOFT, PREFAB | 1/1/2007 | $15.33 | 3 |
| B | A8001 | HELMET, PROTECTIVE, HARD, PREFAB | 1/1/2007 | $15.33 | 3 |
| B | A9270 | NON-COVERED ITEM OR SERVICE | 1/1/1991 | NC | 9 |
| B | A9300 | EXERCISE EQUIPMENT | 4/1/1993 | NC | 9 |
| B | B4084 | GASTROSTOMY/JEJUNOSTOMY TUBING - | 4/1/2002 | INVALID | N |
| B | B4085 | GASTROSTOMY TUBE, SILICONE WITH | 4/1/2002 | INVALID | N |
| B | E0100 | CANE, INCLUDES CANES OF ALL MATE | 10/1/2006 | $5.94 | 3 |
| B | E0105 | CANE, QUAD OR THREE PRONG, INCLU | 10/1/2006 | $8.86 | 3 |
| B | E0110 | CRUTCHES, FOREARM, INC CRUTCHES | 10/1/2006 | $15.99 | 3 |
| B | E0111 | CRUTCH, FOREARM, INC CRUTCHES OF | 10/1/2006 | $8.43 | 3 |
| B | E0112 | CRUTCHES, UNDERARM, WOOD, ADJUST | 10/1/2006 | $9.93 | 3 |
| B | E0113 | CRUTCH, UNDERARM, WOOD, ADJUSTAB | 10/1/2006 | $4.38 | 3 |
| B | E0114 | CRUTCHES, UNDERARM, OTHER THAN W | 10/1/2006 | $8.57 | 3 |
| B | E0116 | CRUTCH, UNDERARM, OTHER THAN WOO | 10/1/2006 | $5.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E0117 | CRUTCH, UNDERARM, ARTICULATING, | 10/1/2006 | $19.26 | 3 |
| B | E0130 | WALKER, RIGID (PICKUP), ADJUSTAB | 10/1/2006 | $16.25 | 3 |
| B | E0135 | WALKER, FOLDING (PICKUP), ADJUST | 10/1/2006 | $17.26 | 3 |
| B | E0140 | WALKER, WITH TRUNK SUPPORT, ADJU | 10/1/2006 | $36.08 | 3 |
| B | E0141 | WALKER, RIGID, WHEELED, ADJUSTAB | 10/1/2006 | $22.36 | 3 |
| B | E0142 | RIGID WALKER, WHEELED, WITH SEAT | 4/1/2004 | INVALID | N |
| B | E0143 | WALKER, FOLDING, WHEELED, ADJUST | 10/1/2006 | $21.59 | 3 |
| B | E0144 | WALKER, ENCLOSED, FOUR SIDED FRA | 10/1/2006 | $31.86 | 3 |
| B | E0145 | WALKER, WHEELED, WITH SEAT AND C | 4/1/2004 | INVALID | N |
| B | E0146 | FOLDING WALKER, WHEELED, WITH SE | 4/1/2004 | INVALID | N |
| B | E0147 | WALKER, HEAVY DUTY, MULTIPLE BRA | 10/1/2006 | $57.48 | 3 |
| B | E0148 | WALKER, HEAVY DUTY, WITHOUT WHEE | 10/1/2006 | $12.72 | 3 |
| B | E0149 | WALKER, HEAVY DUTY, WHEELED, RIG | 10/1/2006 | $22.32 | 3 |
| B | E0153 | PLATFORM ATTACHMENT, FOREARM, CR | 10/1/2006 | $7.84 | 3 |
| B | E0154 | PLATFORM ATTACHMENT, WALKER, EAC | 10/1/2006 | $8.56 | 3 |
| B | E0155 | WHEEL ATTACHMENT, RIGID PICK-UP | 10/1/2006 | $3.31 | 3 |
| B | E0156 | SEAT ATTACHMENT, WALKER | 10/1/2006 | $3.13 | 3 |
| B | E0157 | CRUTCH ATTACHMENT, WALKER, EACH | 10/1/2006 | $8.99 | 3 |
| B | E0158 | LEG EXTENSIONS FOR WALKER, PER S | 10/1/2006 | $3.10 | 3 |
| B | E0159 | BRAKE ATTACHMENT FOR WHEELED WAL | 10/1/2006 | $1.80 | 3 |
| B | E0160 | SITZ TYPE BATH OR EQUIPMENT, POR | 10/1/2006 | $4.33 | 3 |
| B | E0161 | SITZ TYPE BATH OR EQUIPMENT, POR | 10/1/2006 | $3.57 | 3 |
| B | E0162 | SITZ BATH CHAIR | 10/1/2006 | $15.29 | 3 |
| B | E0163 | COMMODE CHAIR, STATIONARY, WITH | 10/1/2006 | $23.02 | 3 |
| B | E0164 | COMMODE CHAIR, MOBILE, WITH FIXE | 1/1/2007 | INVALID | N |
| B | E0165 | COMMODE CHAIR, STATIONARY, WITH | 10/1/2006 | $18.58 | 3 |
| B | E0166 | COMMODE CHAIR, MOBILE, WITH DETA | 1/1/2007 | INVALID | N |
| B | E0167 | PAIL OR PAN FOR USE WITH COMMODE | 10/1/2006 | $1.19 | 3 |
| B | E0168 | COMMODE CHAIR, EXTRA WIDE AND/OR | 10/1/2006 | $15.09 | 3 |
| B | E0170 | COMMODE CHAIR WITH INTEGRATED SE | 1/1/2006 | NC | 9 |
| B | E0171 | COMMODE CHAIR WITH INTEGRATED SE | 1/1/2006 | NC | 9 |
| B | E0175 | FOOT REST, FOR USE WITH COMMODE | 3/1/1989 | NC | 9 |
| B | E0176 | AIR PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| B | E0177 | WATER PRESSURE PAD OR CUSHION, N | 1/1/2005 | INVALID | N |
| B | E0178 | GEL PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| B | E0179 | DRY PRESSURE PAD OR CUSHION, NON | 1/1/2005 | INVALID | N |
| B | E0180 | PRESSURE PAD, ALTERNATING WITH P | 1/1/2007 | INVALID | N |
| B | E0181 | PRESSURE PAD, ALTERNATING WITH P | 10/1/2006 | $24.08 | 3 |
| B | E0182 | PUMP FOR ALTERNATING PRESSURE PA | 10/1/2006 | $26.18 | 3 |
| B | E0184 | DRY PRESSURE MATTRESS | 10/1/2006 | $20.88 | 3 |
| B | E0185 | GEL OR GEL-LIKE PRESSURE PAD FOR | 10/1/2006 | $44.94 | 3 |
| B | E0186 | AIR PRESSURE MATTRESS | 10/1/2006 | $20.30 | 3 |
| B | E0187 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 10/1/2006 | $23.21 | 3 |
| B | E0191 | HEEL OR ELBOW PROTECTOR, EACH | 10/1/2006 | $0.87 | 3 |
| B | E0192 | LOW PRESSURE AND POSITIONING EQU | 1/1/2005 | INVALID | N |
| B | E0193 | POWERED AIR FLOTATION BED (LOW A | 10/1/2006 | $903.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E0194 | AIR FLUIDIZED BED | 1/1/1991 | NC | 9 |
| B | E0196 | GEL PRESSURE MATTRESS | 10/1/2006 | $32.49 | 3 |
| B | E0197 | AIR PRESSURE PAD FOR MATTRESS, S | 10/1/2006 | $30.57 | 3 |
| B | E0198 | WATER PRESSURE PAD FOR MATTRESS, | 10/1/2006 | $22.95 | 3 |
| B | E0199 | DRY PRESSURE PAD FOR MATTRESS, S | 10/1/2006 | $2.71 | 3 |
| B | E0200 | HEAT LAMP, WITHOUT STAND (TABLE | 10/1/2006 | $10.76 | 3 |
| B | E0202 | PHOTOTHERAPY (BILIRUBIN) LIGHT W | 10/1/2006 | $53.22 | 3 |
| B | E0205 | HEAT LAMP, WITH STAND, INCLUDES | 10/1/2006 | $18.14 | 3 |
| B | E0210 | ELECTRIC HEAT PAD, STANDARD | 10/1/2006 | $3.07 | 3 |
| B | E0215 | ELECTRIC HEAT PAD, MOIST | 10/1/2006 | $6.30 | 3 |
| B | E0217 | WATER CIRCULATING HEAT PAD WITH | 10/1/2006 | $55.28 | 3 |
| B | E0220 | HOT WATER BOTTLE | 10/1/2006 | $0.89 | 3 |
| B | E0225 | HYDROCOLLATOR UNIT, INCLUDES PAD | 5/1/1997 | NC | 9 |
| B | E0230 | ICE CAP OR COLLAR | 10/1/2006 | $0.95 | 3 |
| B | E0235 | PARAFFIN BATH UNIT, PORTABLE (SE | 10/1/2006 | $17.26 | 3 |
| B | E0236 | PUMP FOR WATER CIRCULATING PAD | 10/1/2006 | $37.61 | 3 |
| B | E0238 | NON-ELECTRIC HEAT PAD, MOIST | 10/1/2006 | $2.72 | 3 |
| B | E0239 | HYDROCOLLATOR UNIT, PORTABLE | 5/1/1997 | NC | 9 |
| B | E0240 | BATH/SHOWER CHAIR, WITH OR WITHO | 10/1/2005 | $9.68 | 3 |
| B | E0249 | PAD FOR WATER CIRCULATING HEAT U | 10/1/2006 | $9.31 | 3 |
| B | E0250 | HOSPITAL BED, FIXED HEIGHT, WITH | 10/1/2006 | $85.05 | 3 |
| B | E0251 | HOSPITAL BED, FIXED HEIGHT, WITH | 10/1/2006 | $59.67 | 3 |
| B | E0255 | HOSPITAL BED, VARIABLE HEIGHT, H | 10/1/2006 | $111.30 | 3 |
| B | E0256 | HOSPITAL BED, VARIABLE HEIGHT, H | 10/1/2006 | $78.97 | 3 |
| B | E0260 | HOSPITAL BED, SEMI-ELECTRIC (HEA | 10/1/2006 | $139.53 | 3 |
| B | E0261 | HOSPITAL BED, SEMI-ELECTRIC (HEA | 10/1/2006 | $129.76 | 3 |
| B | E0265 | HOSPITAL BED, TOTAL ELECTRIC (HE | 8/1/1999 | NC | 9 |
| B | E0266 | HOSPITAL BED, TOTAL ELECTRIC (HE | 3/1/1995 | NC | 9 |
| B | E0270 | HOSPITAL BED, INSTITUTIONAL TYPE | 3/1/1995 | NC | 9 |
| B | E0271 | MATTRESS, INNER SPRING | 10/1/2006 | $22.21 | 3 |
| B | E0272 | MATTRESS, FOAM RUBBER | 10/1/2006 | $17.96 | 3 |
| B | E0273 | BED BOARD | 4/1/1988 | NC | 9 |
| B | E0274 | OVER-BED TABLE | 4/1/1988 | NC | 9 |
| B | E0275 | BED PAN, STANDARD, METAL OR PLAS | 10/1/2006 | $1.60 | 3 |
| B | E0276 | BED PAN, FRACTURE, METAL OR PLAS | 10/1/2006 | $1.33 | 3 |
| B | E0277 | POWERED PRESSURE-REDUCING AIR MA | 10/1/2006 | $703.47 | 3 |
| B | E0280 | BED CRADLE, ANY TYPE | 3/1/1987 | NC | 9 |
| B | E0290 | HOSPITAL BED, FIXED HEIGHT, WITH | 10/1/2006 | $60.20 | 3 |
| B | E0291 | HOSPITAL BED, FIXED HEIGHT, WITH | 10/1/2006 | $51.44 | 3 |
| B | E0292 | HOSPITAL BED, VARIABLE HEIGHT, H | 10/1/2006 | $79.63 | 3 |
| B | E0293 | HOSPITAL BED, VARIABLE HEIGHT, H | 10/1/2006 | $67.76 | 3 |
| B | E0294 | HOSPITAL BED, SEMI-ELECTRIC (HEA | 10/1/2006 | $123.80 | 3 |
| B | E0295 | HOSPITAL BED, SEMI-ELECTRIC (HEA | 10/1/2006 | $120.67 | 3 |
| B | E0296 | HOSPITAL BED, TOTAL ELECTRIC (HE | 3/1/1995 | NC | 9 |
| B | E0297 | HOSPITAL BED TOTAL ELECTRIC (HEA | 3/1/1995 | NC | 9 |
| B | E0298 | HOSPITAL BED, HEAVY DUTY, EXTRA | 4/1/2002 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E0301 | HOSPITAL BED, HEAVY DUTY, EXTRA | 10/1/2006 | $268.92 | 3 |
| B | E0302 | HOSPITAL BED, EXTRA HEAVY DUTY, | 10/1/2006 | $710.68 | 3 |
| B | E0303 | HOSPITAL BED, HEAVY DUTY, EXTRA | 10/1/2006 | $288.01 | 3 |
| B | E0304 | HOSPITAL BED, EXTRA HEAVY DUTY, | 10/1/2006 | $770.67 | 3 |
| B | E0305 | BED SIDE RAILS, HALF LENGTH | 10/1/2006 | $15.12 | 3 |
| B | E0310 | BED SIDE RAILS, FULL LENGTH | 10/1/2006 | $22.70 | 3 |
| B | E0315 | BED ACCESSORY: BOARD, TABLE, OR | 3/1/1991 | NC | 9 |
| B | E0316 | SAFETY ENCLOSURE FRAME/CANOPY FO | 1/1/2002 | NC | 9 |
| B | E0325 | URINAL, MALE, JUG-TYPE, ANY MATE | 10/1/2006 | $1.51 | 3 |
| B | E0326 | URINAL, FEMALE, JUG-TYPE, ANY MA | 10/1/2006 | $1.01 | 3 |
| B | E0370 | AIR PRESSURE ELEVATOR FOR HEEL | 10/1/2005 | $2.38 | 3 |
| B | E0371 | NONPOWERED ADVANCED PRESSURE RED | 10/1/2006 | $444.48 | 3 |
| B | E0372 | POWERED AIR OVERLAY FOR MATTRESS | 10/1/2006 | $539.34 | 3 |
| B | E0373 | NONPOWERED ADVANCED PRESSURE RED | 10/1/2006 | $614.47 | 3 |
| B | E0424 | STATIONARY COMPRESSED GASEOUS OX | 1/1/2007 | $198.40 | 3 |
| B | E0431 | PORTABLE GASEOUS OXYGEN SYSTEM, | 1/1/2007 | $31.79 | 3 |
| B | E0434 | PORTABLE LIQUID OXYGEN SYSTEM, R | 1/1/2007 | $31.79 | 3 |
| B | E0439 | STATIONARY LIQUID OXYGEN SYSTEM, | 1/1/2007 | $198.40 | 3 |
| B | E0445 | OXIMETER DEVICE FOR MEASURING BL | 10/1/2005 | $371.52 | 3 |
| B | E0450 | VOLUME CONTROL VENTILATOR, W/OUT | 10/1/2006 | $857.74 | 3 |
| B | E0454 | PRESSURE VENTILATOR WITH PRESSUR | 1/1/2005 | INVALID | N |
| B | E0455 | OXYGEN TENT, EXCLUDING CROUP OR | 10/1/2005 | $4.76 | 3 |
| B | E0457 | CHEST SHELL (CUIRASS) | 10/1/2006 | $56.35 | 3 |
| B | E0459 | CHEST WRAP | 10/1/2006 | $46.67 | 3 |
| B | E0460 | NEGATIVE PRESSURE VENTILATOR; PO | 10/1/2006 | $672.63 | 3 |
| B | E0461 | VOLUME CONTROL VENTILATOR, W/OUT | 10/1/2006 | $963.27 | 3 |
| B | E0462 | ROCKING BED WITH OR WITHOUT SIDE | 3/1/1987 | NC | 9 |
| B | E0463 | PRESSURE SUPPORT VENTILATOR WITH | 10/1/2006 | $1,345.97 | 3 |
| B | E0464 | PRESSURE SUPPORT VENTILATOR WITH | 10/1/2006 | $1,345.97 | 3 |
| B | E0470 | RESPIRATORY ASSIST DEVICE, BI-LE | 10/1/2006 | $230.43 | 3 |
| B | E0471 | RESPIRATORY ASSIST DEVICE, BI-LE | 10/1/2006 | $588.82 | 3 |
| B | E0472 | RESPIRATORY ASSIST DEVICE, BI-LE | 10/1/2006 | $588.82 | 3 |
| B | E0480 | PERCUSSOR, ELECTRIC OR PNEUMATIC | 10/1/2006 | $38.43 | 3 |
| B | E0482 | COUGH STIMULATING DEVICE, ALTERN | 1/1/2002 | NC | 9 |
| B | E0483 | HIGH FREQUENCY CHEST WALL OSCILL | 9/24/2005 | NC | 9 |
| B | E0500 | IPPB MACHINE, ALL TYPES, W/BUILT | 10/1/2006 | $93.68 | 3 |
| B | E0550 | HUMIDIFIER, DURABLE FOR EXTENSIV | 10/1/2006 | $39.07 | 3 |
| B | E0560 | HUMIDIFIER, DURABLE FOR SUPPLEME | 10/1/2006 | $15.66 | 3 |
| B | E0561 | HUMIDIFIER, NON-HEATED, USED WIT | 10/1/2006 | $10.69 | 3 |
| B | E0562 | HUMIDIFIER, HEATED, USED WITH PO | 10/1/2006 | $30.11 | 3 |
| B | E0565 | COMPRESSOR, AIR POWER SOURCE FOR | 1/1/2006 | $49.28 | 3 |
| B | E0570 | NEBULIZER WITH COMPRESSOR | 10/1/2006 | $15.38 | 3 |
| B | E0571 | AEROSOL COMPRESSOR, BATTERY POWE | 10/1/2006 | $27.47 | 3 |
| B | E0572 | AEROSOL COMPRESSOR, ADJUSTABLE P | 10/1/2006 | $34.94 | 3 |
| B | E0574 | ULTRASONIC/ELECTRONIC AEROSOL GE | 10/1/2001 | NC | 9 |
| B | E0575 | NEBULIZER, ULTRASONIC, LARGE VOL | 6/1/1997 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E0580 | NEBULIZER, DURABLE, GLASS OR AUT | 10/1/2006 | $12.29 | 3 |
| B | E0585 | NEBULIZER, WITH COMPRESSOR AND H | 10/1/2006 | $32.15 | 3 |
| B | E0600 | RESPIRATORY SUCTION PUMP, HOME M | 10/1/2006 | $36.61 | 3 |
| B | E0601 | CONTINUOUS AIRWAY PRESSURE (CPAP | 10/1/2006 | $98.59 | 3 |
| B | E0603 | BREAST PUMP, ELECTRIC (AC AND/OR | 10/1/2005 | $2.79 | 3 |
| B | E0605 | VAPORIZER, ROOM TYPE | 10/1/2006 | $2.82 | 3 |
| B | E0606 | POSTURAL DRAINAGE BOARD | 10/1/2006 | $20.37 | 3 |
| B | E0607 | HOME BLOOD GLUCOSE MONITOR | 10/1/2006 | $6.60 | 3 |
| B | E0608 | APNEA MONITOR | 7/1/2003 | INVALID | N |
| B | E0609 | BLOOD GLUCOSE MONITOR WITH SPECI | 4/1/2002 | INVALID | N |
| B | E0610 | PACEMAKER MONITOR, SELF-CONTAINE | 10/1/2006 | $21.33 | 3 |
| B | E0615 | PACEMAKER MONITOR, SELF CONTAINE | 10/1/2006 | $49.73 | 3 |
| B | E0617 | EXTERNAL DEFIBRILLATOR WITH INTE | 1/1/2005 | NC | 9 |
| B | E0618 | APNEA MONITOR, WITHOUT RECORDING | 10/1/2006 | $280.35 | 3 |
| B | E0619 | APNEA MONITOR, WITH RECORDING FE | 10/1/2006 | $318.73 | 3 |
| B | E0621 | SLING OR SEAT, PATIENT LIFT, CAN | 10/1/2006 | $9.25 | 3 |
| B | E0625 | PATIENT LIFT, BATHROOM OR TOILET | 3/1/1995 | NC | 9 |
| B | E0627 | SEAT LIFT MECHANISM INCORPORATED | 4/1/1992 | NC | 9 |
| B | E0628 | SEPARATE SEAT LIFT MECHANISM FOR | 4/1/1992 | NC | 9 |
| B | E0629 | SEPARATE SEAT LIFT MECHANISM FOR | 4/1/1992 | NC | 9 |
| B | E0630 | PATIENT LIFT, HYDRAULIC, WITH SE | 10/1/2006 | $101.89 | 3 |
| B | E0635 | PATIENT LIFT, ELECTRIC, WITH SEA | 5/1/2005 | NC | 9 |
| B | E0636 | MULTIPOSITIONAL PATIENT SUPPORT | 4/1/2003 | NC | 9 |
| B | E0637 | COMBINATION SIT TO STAND SYSTEM, | 6/1/2004 | $210.51 | 3 |
| B | E0638 | STANDING FRAME SYSTEM, ONE POSIT | 1/1/2004 | $85.36 | 3 |
| B | E0639 | PATIENT LIFT, MOVEABLE FROM ROOM | 1/1/2005 | NC | 9 |
| B | E0640 | PATIENT LIFT, FIXED SYSTEM, INCL | 1/1/2006 | NC | 9 |
| B | E0641 | STANDING FRAME SYSTEM, MULTI-POS | 1/1/2006 | $0.01 | 5 |
| B | E0642 | STANDING FRAME SYSTEM, MOBILE (D | 1/1/2006 | $0.01 | 3 |
| B | E0650 | PNEUMATIC COMPRESSOR, NON-SEGMEN | 10/1/2006 | $88.87 | 3 |
| B | E0651 | PNEUMATIC COMPRESSOR, SEGMENTAL | 10/1/2006 | $91.85 | 3 |
| B | E0652 | PNEUMATIC COMPRESSOR, SEGMENTAL | 10/1/2006 | $523.95 | 3 |
| B | E0655 | NON-SEGMENTAL PNEUMATIC APPLIANC | 10/1/2006 | $12.68 | 3 |
| B | E0660 | NON-SEGMENTAL PNEUMATIC APPLIANC | 10/1/2006 | $16.63 | 3 |
| B | E0665 | NON-SEGMENTAL PNEUMATIC APPLIANC | 10/1/2006 | $14.07 | 3 |
| B | E0666 | NON-SEGMENTAL PNEUMATIC APPLIANC | 10/1/2006 | $14.23 | 3 |
| B | E0667 | SEGMENTAL PNEUMATIC APPLIANCE FO | 10/1/2006 | $36.56 | 3 |
| B | E0668 | SEGMENTAL PNEUMATIC APPLIANCE FO | 10/1/2006 | $43.61 | 3 |
| B | E0669 | SEGMENTAL PNEUMATIC APPLIANCE FO | 10/1/2006 | $18.34 | 3 |
| B | E0671 | SEGMENTAL GRADIENT PRESSURE PNEU | 10/1/2006 | $41.54 | 3 |
| B | E0672 | SEGMENTAL GRADIENT PRESSURE PNEU | 10/1/2006 | $32.28 | 3 |
| B | E0673 | SEGMENTAL GRADIENT PRESSURE PNEU | 10/1/2006 | $26.82 | 3 |
| B | E0676 | INTERMITTENT LIMB COMPRESSION DE | 1/1/2007 | NC | 9 |
| B | E0690 | ULTRAVIOLET CABINET, APPROPRIATE | 7/1/2003 | INVALID | N |
| B | E0691 | ULTRAVIOLET LIGHT THERAPY SYSTEM | 10/1/2006 | $89.86 | 3 |
| B | E0692 | ULTRAVIOLET LIGHT THERAPY SYSTEM | 10/1/2006 | $112.83 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E0693 | ULTRAVIOLET LIGHT THERAPY SYSTEM | 10/1/2006 | $139.10 | 3 |
| B | E0694 | ULTRAVIOLET MULTIDIRECTIONAL LIG | 10/1/2006 | $442.73 | 3 |
| B | E0700 | SAFETY EQUIPMENT (E.G., HARNESS | 4/1/1988 | NC | 9 |
| B | E0705 | TRANSFER BOARD OR DEVICE, ANY TY | 10/1/2006 | $5.61 | 3 |
| B | E0710 | RESTRAINT, ANY TYPE (BODY, CHEST | 3/1/1987 | NC | 9 |
| B | E0720 | TENS, TWO LEAD, LOCALIZED STIMUL | 10/1/2005 | $20.51 | 3 |
| B | E0730 | TENS DEVICE, FOUR OR MORE LEADS, | 10/1/2005 | $22.39 | 3 |
| B | E0731 | FORM FITTING CONDUCTIVE GARMENT | 10/1/1993 | NC | 9 |
| B | E0744 | NEUROMUSCULAR STIMULATOR FOR SCO | 3/1/1989 | NC | 9 |
| B | E0745 | NEUROMUSCULAR STIMULATOR, ELECTR | 10/1/2006 | $89.51 | 3 |
| B | E0746 | ELECTROMYOGRAPHY (EMG), BIOFEEDB | 3/1/1989 | NC | 9 |
| B | E0747 | OSTEOGENESIS STIMULATOR, ELECTRI | 10/1/2006 | $359.35 | 3 |
| B | E0748 | OSTEOGENIC STIMULATOR, ELECTRICA | 10/1/2006 | $357.02 | 3 |
| B | E0749 | OSTEOGENESIS STIMULATOR, ELECTRI | 4/1/1988 | NC | 9 |
| B | E0755 | ELECTRONIC SALIVARY REFLEX STIMU | 3/1/1987 | NC | 9 |
| B | E0760 | OSTOGENESIS STIMUALTOR, LOW INTE | 10/1/2006 | $297.57 | 3 |
| B | E0761 | NON-THERMAL PULSED HIGH FREQUENC | 1/1/2003 | NC | 9 |
| B | E0776 | IV POLE | 10/1/2006 | NC | 9 |
| B | E0784 | EXTERNAL AMBULATORY INFUSION PUM | 10/1/2006 | $417.49 | 3 |
| B | E0840 | TRACTION FRAME, ATTACHED TO HEAD | 10/1/2006 | $16.32 | 3 |
| B | E0849 | TRACTION EQUIPMENT, CERVICAL, FR | 10/1/2006 | $51.53 | 3 |
| B | E0850 | TRACTION STAND, FREE STANDING, C | 10/1/2006 | $14.43 | 3 |
| B | E0855 | CERVICAL TRACTION EQUIPMENT NOT | 10/1/2006 | $49.44 | 3 |
| B | E0860 | TRACTION EQUIPMENT, OVERDOOR, CE | 10/1/2006 | $5.53 | 3 |
| B | E0870 | TRACTION FRAME, ATTACHED TO FOOT | 10/1/2006 | $13.40 | 3 |
| B | E0880 | TRACTION STAND, FREE STANDING EX | 10/1/2006 | $19.28 | 3 |
| B | E0890 | TRACTION FRAME, ATTACHED TO FOOT | 10/1/2006 | $32.83 | 3 |
| B | E0900 | TRACTION STAND, FREE STANDING PE | 10/1/2006 | $27.62 | 3 |
| B | E0910 | TRAPEZE BARS, AKA PATIENT HELPER | 10/1/2006 | $20.00 | 3 |
| B | E0911 | TRAPEZE BAR, HEAVY DUTY, FOR PAT | 10/1/2006 | $49.85 | 3 |
| B | E0912 | TRAPEZE BAR, HEAVY DUTY, FOR PT | 10/1/2006 | $114.47 | 3 |
| B | E0920 | FRACTURE FRAME, ATTACHED TO BED, | 10/1/2006 | $43.51 | 3 |
| B | E0930 | FRACTURE FRAME, FREE STANDING, I | 10/1/2006 | $38.84 | 3 |
| B | E0935 | CONTINUOUS PASSIVE MOTION EXERCI | 3/1/1987 | NC | 9 |
| B | E0936 | CONTINUOUS PASSIVE MOTION EXERCI | 1/1/2007 | NC | 9 |
| B | E0940 | TRAPEZE BAR, FREE STANDING, COMP | 10/1/2006 | $34.77 | 3 |
| B | E0941 | GRAVITY ASSISTED TRACTION DEVICE | 10/1/2006 | $43.41 | 3 |
| B | E0942 | CERVICAL HEAD HARNESS/HALTER | 10/1/2006 | $2.34 | 3 |
| B | E0943 | CERVICAL PILLOW | 4/1/2004 | INVALID | N |
| B | E0944 | PELVIC BELT/HARNESS/BOOT | 10/1/2006 | $4.60 | 3 |
| B | E0945 | EXTREMITY BELT/HARNESS | 10/1/2006 | $4.44 | 3 |
| B | E0946 | FRACTURE, FRAME, DUAL WITH CROSS | 10/1/2006 | $59.16 | 3 |
| B | E0947 | FRACTURE FRAME, ATTACHMENTS FOR | 10/1/2006 | $60.65 | 3 |
| B | E0948 | FRACTURE FRAME, ATTACHMENTS FOR | 10/1/2006 | $56.93 | 3 |
| B | E0950 | WHEELCHAIR ACCESSORY, TRAY, EACH | 10/1/2006 | $10.41 | 3 |
| B | E0951 | HEEL LOOP/HOLDER, ANY TYPE, WITH | 10/1/2006 | $1.96 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E0952 | TOE LOOP/HOLDER, ANY TYPE, EACH | 10/1/2006 | $1.96 | 3 |
| B | E0953 | PNEUMATIC TIRE, EACH | 1/1/2006 | INVALID | N |
| B | E0954 | SEMI-PNEUMATIC CASTER, EACH | 1/1/2006 | INVALID | N |
| B | E0955 | WHEELCHAIR ACCESSORY, HEADREST, | 10/1/2006 | $20.23 | 3 |
| B | E0956 | WHEELCHAIR ACCESSORY, LATERAL TR | 10/1/2006 | $9.87 | 3 |
| B | E0957 | WHEELCHAIR ACCESSORY, MEDIAL THI | 10/1/2006 | $13.79 | 3 |
| B | E0958 | MANUAL WHEELCHAIR ACCESSORY, ONE | 10/1/2006 | $43.63 | 3 |
| B | E0959 | MANUAL WHEELCHAIR ACCESSORY, ADA | 10/1/2006 | $4.45 | 3 |
| B | E0960 | WHEELCHAIR ACCESSORY, SHOULDER H | 10/1/2006 | $9.10 | 3 |
| B | E0961 | MANUAL WHEELCHAIR ACCESSORY, WHE | 10/1/2006 | $2.64 | 3 |
| B | E0962 | 1" CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| B | E0963 | 2" CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| B | E0964 | 3" CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| B | E0965 | 4" CUSHION, FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| B | E0966 | MANUAL WHEELCHAIR ACCESSORY, HEA | 10/1/2006 | $7.04 | 3 |
| B | E0967 | MANUAL WHEELCHAIR ACCESSORY, HAN | 10/1/2006 | $6.46 | 3 |
| B | E0968 | COMMODE SEAT, WHEELCHAIR | 3/1/1989 | NC | 9 |
| B | E0969 | NARROWING DEVICE, WHEELCHAIR | 3/1/1989 | NC | 9 |
| B | E0970 | NO.2 FOOTPLATES, EXCEPT FOR ELEV | 3/1/1989 | NC | 9 |
| B | E0971 | MANUAL WHEELCHAIR ACCESSORY, ANT | 10/1/2006 | $4.34 | 3 |
| B | E0972 | WHEELCHAIR ACCESSORY, TRANSFER B | 1/1/2006 | INVALID | N |
| B | E0973 | WHEELCHAIR ACCESSORY, ADJUSTABLE | 10/1/2006 | $10.95 | 3 |
| B | E0974 | MANUAL WHEELCHAIR ACCESSORY, ANT | 10/1/2006 | $8.31 | 3 |
| B | E0975 | REINFORCED SEAT, UPHOLSTERY WHEE | 4/1/2004 | INVALID | N |
| B | E0976 | REINFORCED BACK WHEELCHAIR, UPHO | 4/1/2004 | INVALID | N |
| B | E0977 | WEDGE CUSHION, WHEELCHAIR | 1/1/2007 | INVALID | N |
| B | E0978 | WHEELCHAIR ACCESSORY, POSITIONIN | 10/1/2006 | $3.64 | 3 |
| B | E0979 | BELT, SAFETY WITH VELCRO CLOSURE | 4/1/2004 | INVALID | N |
| B | E0980 | SAFETY VEST, WHEELCHAIR | 3/1/1989 | NC | 9 |
| B | E0981 | WHEELCHAIR ACCESSORY, SEAT UPHOL | 10/1/2006 | $4.80 | 3 |
| B | E0982 | WHEELCHAIR ACCESSORY, BACK UPHOL | 10/1/2006 | $5.15 | 3 |
| B | E0983 | MANUAL WHEELCHAIR ACCESSORY, POW | 1/1/2006 | NC | 9 |
| B | E0984 | MANUAL WHEELCHAIR ACCESSORY, POW | 1/1/2006 | NC | 9 |
| B | E0985 | WHEELCHAIR ACCESSORY, SEAT LIFT | 10/1/2006 | $20.30 | 3 |
| B | E0986 | MANUAL WHEELCHAIR ACCESSORY, PUS | 1/1/2006 | NC | 9 |
| B | E0990 | WHEELCHAIR ACCESSORY, ELEVATING | 10/1/2006 | $11.24 | 3 |
| B | E0991 | UPHOLSTERY SEAT | 4/1/2004 | INVALID | N |
| B | E0992 | MANUAL WHEELCHAIR ACCESSORY, SOL | 10/1/2006 | $9.25 | 3 |
| B | E0993 | BACK, UPHOLSTERY -H | 4/1/2004 | INVALID | N |
| B | E0994 | ARMREST, EACH | 3/1/1989 | NC | 9 |
| B | E0995 | WHEELCHAIR ACCESSORY, CALF REST/ | 10/1/2006 | $3.05 | 3 |
| B | E0996 | TIRE, SOLID, EACH | 1/1/2006 | INVALID | N |
| B | E0997 | CASTER WITH FORK | 1/1/2007 | INVALID | N |
| B | E0998 | CASTER WITHOUT FORK | 1/1/2007 | INVALID | N |
| B | E0999 | PNEUMATIC TIRE WITH WHEEL | 1/1/2007 | INVALID | N |
| B | E1000 | TIRE, PNEUMATIC CASTER | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E1001 | WHEEL, SINGLE | 1/1/2006 | INVALID | N |
| B | E1002 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $411.33 | 3 |
| B | E1003 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $439.14 | 3 |
| B | E1004 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $486.90 | 3 |
| B | E1005 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $527.03 | 3 |
| B | E1006 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $645.55 | 3 |
| B | E1007 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $874.13 | 3 |
| B | E1008 | WHEELCHAIR ACCESSORY, POWER SEAT | 10/1/2006 | $874.20 | 3 |
| B | E1010 | WHEELCHAIR ACCESSORY, ADD TO POW | 10/1/2006 | $114.38 | 3 |
| B | E1011 | MODIFICATION TO PEDIATRIC WHEELC | 10/1/2006 | $16.02 | 3 |
| B | E1012 | INTEGRATED SEATING SYSTEM, PLANA | 1/1/2005 | INVALID | N |
| B | E1013 | INTEGRATED SEATING SYSTEM, CONTO | 1/1/2005 | INVALID | N |
| B | E1014 | RECLINING BACK, ADDITION TO PEDI | 10/1/2006 | $36.52 | 3 |
| B | E1015 | SHOCK ABSORBER FOR MANUAL WHEELC | 10/1/2006 | $11.46 | 3 |
| B | E1016 | SHOCK ABSORBER FOR POWER WHEELCH | 10/1/2006 | $13.14 | 3 |
| B | E1017 | HEAVY DUTY SHOCK ABSORBER FOR HE | 10/1/2006 | $10.68 | 3 |
| B | E1018 | HEAVY DUTY SHOCK ABSORBER FOR HE | 10/1/2006 | $16.02 | 3 |
| B | E1020 | RESIDUAL LIMB SUPPORT SYSTEM FOR | 10/1/2006 | $24.32 | 3 |
| B | E1025 | LATERAL THORACIC SUPPORT, NON-CO | 1/1/2006 | INVALID | N |
| B | E1026 | LATERAL THORACIC SUPPORT, CONTOU | 1/1/2006 | INVALID | N |
| B | E1027 | LATERAL/ANTERIOR SUPPORT, FOR PE | 1/1/2006 | INVALID | N |
| B | E1028 | WHEELCHAIR ACCESSORY, MANUAL SWI | 10/1/2006 | $20.65 | 3 |
| B | E1029 | WHEELCHAIR ACCESSORY, VENTILATOR | 10/1/2006 | $36.95 | 3 |
| B | E1030 | WHEELCHAIR ACCESSORY, VENTILATOR | 10/1/2006 | $116.53 | 3 |
| B | E1031 | ROLLABOUT CHAIR, ANY AND ALL TYP | 3/1/1987 | NC | 9 |
| B | E1035 | MULTI-POSITIONAL PATIENT TRANSFE | 1/1/2001 | NC | 9 |
| B | E1037 | TRANSPORT CHAIR, PEDIATRIC SIZE | 4/1/2003 | NC | 9 |
| B | E1038 | TRANSPORT CHAIR, ADULT SIZE, PAT | 4/1/2003 | NC | 9 |
| B | E1050 | FULLY-RECLINING WHEELCHAIR; FIXE | 1/1/2006 | NC | 9 |
| B | E1060 | FULLY-RECLINING WHEELCHAIR; DETA | 1/1/2006 | NC | 9 |
| B | E1065 | POWER ATTACHMENT (TO CONVERT ANY | 1/1/2004 | INVALID | N |
| B | E1066 | BATTERY CHARGER -H | 4/1/2004 | INVALID | N |
| B | E1069 | DEEP CYCLE BATTERY | 4/1/2004 | INVALID | N |
| B | E1070 | FULLY-RECLINING WHEELCHAIR; DETA | 1/1/2006 | NC | 9 |
| B | E1083 | HEMI-WHEELCHAIR; FIXED FULL-LENG | 1/1/2006 | NC | 9 |
| B | E1084 | HEMI-WHEELCHAIR; DETACHABLE ARMS | 1/1/2006 | NC | 9 |
| B | E1085 | HEMI-WHEELCHAIR; FIXED FULL-LENG | 1/1/2006 | NC | 9 |
| B | E1086 | HEMI-WHEELCHAIR; DETACHABLE ARMS | 1/1/2006 | NC | 9 |
| B | E1087 | HIGH STRENGTH LIGHTWEIGHT WHEELC | 1/1/2006 | NC | 9 |
| B | E1088 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 1/1/2006 | NC | 9 |
| B | E1089 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 8/1/2004 | NC | 9 |
| B | E1090 | HIGH-STRENGTH LIGHTWEIGHT WHEELC | 8/1/2004 | NC | 9 |
| B | E1091 | YOUTH WHEELCHAIR, ANY TYPE | 1/1/2006 | NC | 9 |
| B | E1092 | WIDE, HEAVY-DUTY WHEELCHAIR; DET | 1/1/2006 | NC | 9 |
| B | E1093 | WIDE, HEAVY-DUTY WHEELCHAIR; DET | 1/1/2006 | NC | 9 |
| B | E1100 | SEMI-RECLINING WHEELCHAIR; FIXED | 1/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E1110 | SEMI-RECLINING WHEELCHAIR; DETAC | 1/1/2006 | NC | 9 |
| B | E1130 | STANDARD WHEELCHAIR; FIXED FULL- | 1/1/2006 | NC | 9 |
| B | E1140 | WHEELCHAIR; DETACHABLE ARMS, DES | 1/1/2006 | NC | 9 |
| B | E1150 | WHEELCHAIR; DETACHABLE ARMS, DES | 1/1/2006 | NC | 9 |
| B | E1160 | WHEELCHAIR; FIXED FULL-LENGTH AR | 1/1/2006 | NC | 9 |
| B | E1161 | MANUAL ADULT SIZE WHEELCHAIR, IN | 10/1/2006 | $234.36 | 3 |
| B | E1170 | AMPUTEE WHEELCHAIR; FIXED FULL-L | 1/1/2006 | NC | 9 |
| B | E1171 | AMPUTEE WHEELCHAIR; FIXED FULL-L | 1/1/2006 | NC | 9 |
| B | E1172 | AMPUTEE WHEELCHAIR; DETACHABLE A | 1/1/2006 | NC | 9 |
| B | E1180 | AMPUTEE WHEELCHAIR; DETACHABLE A | 1/1/2006 | NC | 9 |
| B | E1190 | AMPUTEE WHEELCHAIR; DETACHABLE A | 1/1/2006 | NC | 9 |
| B | E1195 | HEAVY DUTY WHEELCHAIR; FIXED FUL | 1/1/2006 | NC | 9 |
| B | E1200 | AMPUTEE WHEELCHAIR; FIXED FULL-L | 1/1/2006 | NC | 9 |
| B | E1210 | MOTORIZED WHEELCHAIR; FIXED FULL | 1/1/2006 | INVALID | N |
| B | E1211 | MOTORIZED WHEELCHAIR; DETACHABLE | 1/1/2006 | INVALID | N |
| B | E1212 | MOTORIZED WHEELCHAIR; FIXED FULL | 1/1/2006 | INVALID | N |
| B | E1213 | MOTORIZED WHEELCHAIR; DETACHABLE | 1/1/2006 | INVALID | N |
| B | E1220 | WHEELCHAIR; SPECIALLY SIZED OR C | 3/1/1995 | NC | 9 |
| B | E1221 | WHEELCHAIR WITH FIXED ARM, FOOTR | 1/1/2006 | NC | 9 |
| B | E1222 | WHEELCHAIR WITH FIXED ARM, ELEVA | 1/1/2006 | NC | 9 |
| B | E1223 | WHEELCHAIR WITH DETACHABLE ARMS, | 1/1/2006 | NC | 9 |
| B | E1224 | WHEELCHAIR WITH DETACHABLE ARMS, | 1/1/2006 | NC | 9 |
| B | E1225 | WHEELCHAIR ACCESSORY, MANUAL SEM | 3/1/1989 | NC | 9 |
| B | E1226 | WHEELCHAIR ACCESSORY, MANUAL FUL | 10/1/2006 | $56.16 | 3 |
| B | E1227 | SPECIAL HEIGHT ARMS FOR WHEELCHA | 3/1/1989 | NC | 9 |
| B | E1228 | SPECIAL BACK HEIGHT FOR WHEELCHA | 1/1/2006 | NC | 9 |
| B | E1229 | WHEELCHAIR, PEDIATRIC SIZE, NOT | 1/1/2006 | $0.01 | 5 |
| B | E1230 | POWER OPERATED VEHICLE (3 OR 4 W | 10/1/2006 | $222.45 | 3 |
| B | E1231 | WHEELCHAIR, PEDIATRIC SIZE, TILT | 10/1/2006 | $238.40 | 3 |
| B | E1232 | WHEELCHAIR, PEDIATRIC SIZE, TILT | 10/1/2006 | $213.85 | 3 |
| B | E1233 | WHEELCHAIR, PEDIATRIC SIZE, TILT | 10/1/2006 | $213.57 | 3 |
| B | E1234 | WHEELCHAIR, PEDIATRIC SIZE, TILT | 10/1/2006 | $192.91 | 3 |
| B | E1235 | WHEELCHAIR, PEDIATRIC SIZE, RIGI | 10/1/2006 | $185.75 | 3 |
| B | E1236 | WHEELCHAIR, PEDIATRIC SIZE, FOLD | 10/1/2006 | $163.87 | 3 |
| B | E1237 | WHEELCHAIR, PEDIATRIC SIZE, RIGI | 10/1/2006 | $158.93 | 3 |
| B | E1238 | WHEELCHAIR, PEDIATRIC SIZE, FOLD | 10/1/2006 | $153.97 | 3 |
| B | E1239 | POWER WHEELCHAIR, PEDIATRIC SIZE | 10/1/2005 | $406.67 | 3 |
| B | E1240 | LIGHTWEIGHT WHEELCHAIR; DETACH A | 1/1/2006 | NC | 9 |
| B | E1250 | LIGHTWEIGHT WHEELCHAIR; FIXED FU | 1/1/2006 | NC | 9 |
| B | E1260 | LIGHTWEIGHT WHEELCHAIR; DETACHAB | 1/1/2006 | NC | 9 |
| B | E1270 | LIGHTWEIGHT WHEELCHAIR; FIXED FU | 1/1/2006 | NC | 9 |
| B | E1280 | HEAVY DUTY WHEELCHAIR; DETACHABL | 1/1/2006 | NC | 9 |
| B | E1285 | HEAVY-DUTY WHEELCHAIR; FIXED FUL | 1/1/2006 | NC | 9 |
| B | E1290 | HEAVY-DUTY WHEELCHAIR; DETACHABL | 1/1/2006 | NC | 9 |
| B | E1295 | HEAVY DUTY WHEELCHAIR; FIXED FUL | 1/1/2006 | NC | 9 |
| B | E1296 | SPECIAL WHEELCHAIR SEAT HEIGHT F | 3/1/1989 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E1297 | SPECIAL WHEELCHAIR SEAT DEPTH, B | 3/1/1989 | NC | 9 |
| B | E1298 | SPECIAL WHEELCHAIR SEAT DEPTH AN | 3/1/1989 | NC | 9 |
| B | E1300 | WHIRLPOOL, PORTABLE (OVERTUB TYP | 10/1/2000 | NC | 9 |
| B | E1310 | WHIRLPOOL, NON-PORTABLE (BUILT-I | 4/1/1988 | NC | 9 |
| B | E1372 | IMMERSION EXTERNAL HEATER FOR NE | 11/1/2006 | $13.17 | 3 |
| B | E1390 | OXYGEN CONCENTRATOR, SINGLE DELI | 1/1/2007 | $198.40 | 3 |
| B | E1391 | OXYGEN CONCENTRATOR, DUAL DELIVE | 1/1/2007 | $198.40 | 3 |
| B | E1392 | PORTABLE OXYGEN CONCENTRATOR, RE | 1/1/2007 | $51.63 | 3 |
| B | E1399 | DURABLE MEDICAL EQUIPMENT, MISCE | 10/1/2003 | $200.00 | 3 |
| B | E1405 | OXYGEN AND WATER VAPOR ENRICHING | 10/1/2006 | $219.11 | 3 |
| B | E1406 | OXYGEN AND WATER VAPOR ENRICHIN | 10/1/2006 | $181.44 | 3 |
| B | E1510 | KIDNEY, DIALYSATE DELIVERY SYST | 4/1/1990 | NC | 9 |
| B | E1530 | AIR BUBBLE DETECTOR FOR HEMODIAL | 4/1/1990 | NC | 9 |
| B | E1540 | PRESSURE ALARM FOR HEMODIALYSIS, | 4/1/1990 | NC | 9 |
| B | E1550 | BATH CONDUCTIVITY METER FOR HEMO | 4/1/1990 | NC | 9 |
| B | E1560 | BLOOD LEAK DETECTOR FOR HEMODIAL | 4/1/1990 | NC | 9 |
| B | E1570 | ADJUSTABLE CHAIR, FOR ESRD PATIE | 4/1/1990 | NC | 9 |
| B | E1575 | TRANSDUCER PROTECTORS/FLUID BARR | 4/1/1990 | NC | 9 |
| B | E1580 | UNIPUNCTURE CONTROL SYSTEM FOR H | 4/1/1990 | NC | 9 |
| B | E1590 | HEMODIALYSIS MACHINE | 4/1/1990 | NC | 9 |
| B | E1592 | AUTOMATIC INTERMITTENT PERITONEA | 4/1/1990 | NC | 9 |
| B | E1594 | CYCLER DIALYSIS MACHINE FOR PERI | 4/1/1990 | NC | 9 |
| B | E1600 | DELIVERY AND/OR INSTALLATION CHA | 4/1/1988 | NC | 9 |
| B | E1610 | REVERSE OSMOSIS WATER PURIFICATI | 4/1/1990 | NC | 9 |
| B | E1615 | DEIONIZER WATER PURIFICATION SYS | 4/1/1990 | NC | 9 |
| B | E1620 | BLOOD PUMP FOR HEMODIALYSIS, REP | 4/1/1990 | NC | 9 |
| B | E1625 | WATER SOFTENING SYSTEM, FOR HEMO | 4/1/1990 | NC | 9 |
| B | E1630 | RECIPROCATING PERITONEAL DIALYSI | 4/1/1990 | NC | 9 |
| B | E1632 | WEARABLE ARTIFICIAL KIDNEY, EACH | 4/1/1990 | NC | 9 |
| B | E1635 | COMPACT (PORTABLE) TRAVEL HEMODI | 4/1/1990 | NC | 9 |
| B | E1636 | SORBENT CARTRIDGES, FOR HEMODIAL | 4/1/1990 | NC | 9 |
| B | E1640 | REPLACEMENT COMPONENTS FOR HEMOD | 4/1/2002 | INVALID | N |
| B | E1699 | DIALYSIS EQUIPMENT, NOT OTHERWIS | 10/1/1993 | NC | 9 |
| B | E1700 | JAW MOTION REHABILITATION SYSTEM | 4/1/1993 | NC | 9 |
| B | E1701 | REPLACEMENT CUSHIONS FOR JAW MOT | 4/1/1993 | NC | 9 |
| B | E1702 | REPLACEMENT MEASURING SCALES FOR | 4/1/1993 | NC | 9 |
| B | E1800 | DYNAMIC ADJUSTABLE ELBOW EXTENSI | 10/1/2006 | $118.75 | 3 |
| B | E1801 | BI-DIRECTIONAL STATIC PROGRESSIV | 1/1/2002 | NC | 9 |
| B | E1802 | DYNAMIC ADJUSTABLE FOREARM PRONA | 10/1/2006 | $326.80 | 3 |
| B | E1805 | DYNAMIC ADJUSTABLE WRIST EXTENSI | 10/1/2006 | $121.86 | 3 |
| B | E1806 | BI-DIRECTIONAL STATIC PROGRESSIV | 1/1/2002 | NC | 9 |
| B | E1810 | DYNAMIC ADJUSTABLE KNEE EXTENSIO | 10/1/2006 | $118.90 | 3 |
| B | E1811 | BI-DIRECTIONAL STATIC PROGRESSIV | 1/1/2002 | NC | 9 |
| B | E1812 | DYNAMIC KNEE, EXTENSION/FLEXION | 1/1/2006 | NC | 9 |
| B | E1815 | DYNAMIC ADJUSTABLE ANKLE EXTENSI | 10/1/2006 | $121.86 | 3 |
| B | E1816 | BI-DIRECTIONAL STATIC PROGRESSIV | 1/1/2002 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E1818 | BI-DIRECTIONAL STATIC PROGRESSIV | 1/1/2002 | NC | 9 |
| B | E1820 | REPLACEMENT SOFT INTERFACE MATER | 10/1/2006 | $7.72 | 3 |
| B | E1825 | DYNAMIC ADJUSTABLE FINGER EXTENS | 10/1/2006 | $121.86 | 3 |
| B | E1830 | DYNAMIC ADJUSTABLE TOE EXTENSION | 10/1/2006 | $121.86 | 3 |
| B | E1840 | DYNAMIC ADJUSTABLE SHOULDER FLEX | 10/1/2006 | $382.71 | 3 |
| B | E1841 | MULTI-DIRECTIONAL STATIC PROGRES | 1/1/2005 | NC | 9 |
| B | E2000 | GASTRIC SUCTION PUMP, HOME MODEL | 10/1/2006 | $51.83 | 3 |
| B | E2120 | PULSE GENERATOR SYSTEM FOR TYMPA | 1/1/2004 | NC | 9 |
| B | E2201 | MANUAL WHEELCHAIR ACCESSORY, NON | 10/1/2006 | $37.31 | 3 |
| B | E2202 | MANUAL WHEELCHAIR ACCESSORY, NON | 10/1/2006 | $47.40 | 3 |
| B | E2203 | MANUAL WHEELCHAIR ACCESSORY, NON | 10/1/2006 | $47.89 | 3 |
| B | E2204 | MANUAL WHEELCHAIR ACCESSORY, NON | 10/1/2006 | $81.35 | 3 |
| B | E2205 | MANUAL WHEELCHAIR ACCESSORY, HAN | 10/1/2006 | $3.19 | 3 |
| B | E2206 | MANUAL WHEELCHAIR ACCESSORY, WHE | 10/1/2006 | $3.99 | 3 |
| B | E2207 | WHEELCHAIR ACCESSORY, CRUTCH AND | 10/1/2006 | $4.27 | 3 |
| B | E2208 | WHEELCHAIR ACCESSORY, CYLINDER T | 10/1/2006 | $11.68 | 3 |
| B | E2209 | WHEELCHAIR ACCESSORY, ARM TROUGH | 10/1/2006 | $10.52 | 3 |
| B | E2210 | WHEELCHAIR ACCESSORY, BEARINGS, | 10/1/2006 | $0.66 | 3 |
| B | E2211 | MANUAL WHEELCHAIR ACCESSORY, PNE | 10/1/2006 | $3.92 | 3 |
| B | E2212 | MANUAL WHEELCHAIR ACCESSORY, TUB | 10/1/2006 | $0.61 | 3 |
| B | E2213 | MANUAL WHEELCHAIR ACCESSORY, INS | 10/1/2006 | $3.01 | 3 |
| B | E2214 | MANUAL WHEELCHAIR ACCESSORY, PNE | 10/1/2006 | $3.37 | 3 |
| B | E2215 | MANUAL WHEELCHAIR ACCESSORY, TUB | 10/1/2006 | $0.94 | 3 |
| B | E2216 | MANUAL WHEELCHAIR ACCESSORY, FOA | 1/1/2006 | $0.01 | 3 |
| B | E2217 | MANUAL WHEELCHAIR ACCESSORY, FOA | 1/1/2006 | $0.01 | 3 |
| B | E2218 | MANUAL WHEELCHAIR ACCESSORY, FOA | 1/1/2006 | $0.01 | 3 |
| B | E2219 | MANUAL WHEELCHAIR ACCESSORY, FOA | 10/1/2006 | $4.72 | 3 |
| B | E2220 | MANUAL WHEELCHAIR ACCESSORY, SOL | 10/1/2006 | $2.34 | 3 |
| B | E2221 | MANUAL WHEELCHAIR ACCESSORY, SOL | 10/1/2006 | $2.49 | 3 |
| B | E2222 | MANUAL WHEELCHAIR ACCESSORY, SOL | 10/1/2006 | $2.09 | 3 |
| B | E2223 | MANUAL WHEELCHAIR ACCESSORY, VAL | 10/1/2006 | $0.56 | 3 |
| B | E2224 | MANUAL WHEELCHAIR ACCESSORY, PRO | 10/1/2006 | $10.29 | 3 |
| B | E2225 | MANUAL WHEELCHAIR ACCESSORY, CAS | 10/1/2006 | $1.74 | 3 |
| B | E2226 | MANUAL WHEELCHAIR ACCESSORY, CAS | 10/1/2006 | $3.79 | 3 |
| B | E2291 | BACK, PLANAR, FOR PEDIATRIC SIZE | 10/1/2005 | $26.16 | 3 |
| B | E2292 | SEAT, PLANAR, FOR PEDIATRIC SIZE | 10/1/2005 | $26.16 | 3 |
| B | E2293 | BACK, CONTOURED, FOR PEDIATRIC S | 10/1/2005 | $43.24 | 3 |
| B | E2294 | SEAT, CONTOURED, FOR PEDIATRIC S | 10/1/2005 | $43.24 | 3 |
| B | E2310 | POWER WHEELCHAIR ACCESSORY, ELEC | 10/1/2006 | $117.02 | 3 |
| B | E2311 | POWER WHEELCHAIR ACCESSORY, ELEC | 10/1/2006 | $236.93 | 3 |
| B | E2320 | POWER WHEELCHAIR ACCESSORY, HAND | 1/1/2007 | INVALID | N |
| B | E2321 | POWER WHEELCHAIR ACCESSORY, HAND | 10/1/2006 | $158.92 | 3 |
| B | E2322 | POWER WHEELCHAIR ACCESSORY, HAND | 10/1/2006 | $141.03 | 3 |
| B | E2323 | POWER WHEELCHAIR ACCESSORY, SPEC | 10/1/2006 | $6.91 | 3 |
| B | E2324 | POWER WHEELCHAIR ACCESSORY, CHIN | 10/1/2006 | $4.37 | 3 |
| B | E2325 | POWER WHEELCHAIR ACCESSORY, SIP | 10/1/2006 | $134.70 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E2326 | POWER WHEELCHAIR ACCESSORY, BREA | 10/1/2006 | $34.13 | 3 |
| B | E2327 | POWER WHEELCHAIR ACCESSORY, HEAD | 10/1/2006 | $246.33 | 3 |
| B | E2328 | POWER WHEELCHAIR ACCESSORY, HEAD | 10/1/2006 | $414.16 | 3 |
| B | E2329 | POWER WHEELCHAIR ACCESSORY, HEAD | 10/1/2006 | $176.61 | 3 |
| B | E2330 | POWER WHEELCHAIR ACCESSORY, HEAD | 10/1/2006 | $342.20 | 3 |
| B | E2340 | POWER WHEELCHAIR ACCESSORY, NONS | 10/1/2006 | $35.85 | 3 |
| B | E2341 | POWER WHEELCHAIR ACCESSORY, NONS | 10/1/2006 | $53.76 | 3 |
| B | E2342 | POWER WHEELCHAIR ACCESSORY, NONS | 10/1/2006 | $44.80 | 3 |
| B | E2343 | POWER WHEELCHAIR ACCESSORY, NONS | 10/1/2006 | $71.67 | 3 |
| B | E2351 | POWER WHEELCHAIR ACCESSORY, ELEC | 10/1/2006 | $59.71 | 3 |
| B | E2360 | POWER WHEELCHAIR ACCESSORY, 22 N | 10/1/2006 | $9.60 | 3 |
| B | E2361 | POWER WHEELCHAIR ACCESSORY, 22NF | 10/1/2006 | $13.72 | 3 |
| B | E2362 | POWER WHEELCHAIR ACCESSORY, GROU | 10/1/2006 | $9.04 | 3 |
| B | E2363 | POWER WHEELCHAIR ACCESSORY, GROU | 10/1/2006 | $18.30 | 3 |
| B | E2364 | POWER WHEELCHAIR ACCESSORY, U-1 | 10/1/2006 | $9.60 | 3 |
| B | E2365 | POWER WHEELCHAIR ACCESSORY, U-1 | 10/1/2006 | $11.03 | 3 |
| B | E2366 | POWER WHEELCHAIR ACCESSORY, BATT | 10/1/2006 | $26.43 | 3 |
| B | E2368 | POWER WHEELCHAIR COMPONENT, MOTO | 10/1/2006 | $51.67 | 3 |
| B | E2369 | POWER WHEELCHAIR COMPONENT, GEAR | 10/1/2006 | $45.00 | 3 |
| B | E2370 | POWER WHEELCHAIR COMPONENT, MOTO | 10/1/2006 | $80.29 | 3 |
| B | E2371 | POWER WHEELCHAIR ACCESSORY, GROU | 10/1/2006 | $15.08 | 3 |
| B | E2372 | POWER WHEELCHAIR ACCESSORY, GROU | 1/1/2006 | $0.01 | 3 |
| B | E2373 | POWER WHEELCHAIR ACCESSORY, HAND | 1/1/2007 | NC | 9 |
| B | E2374 | POWER WHEELCHAIR ACCESSORY, HAND | 1/1/2007 | NC | 9 |
| B | E2375 | POWER WHEELCHAIR ACCESSORY, NON- | 1/1/2007 | NC | 9 |
| B | E2376 | POWER WHEELCHAIR ACCESSORY, EXPA | 1/1/2007 | NC | 9 |
| B | E2377 | POWER WHEELCHAIR ACCESSORY, EXPA | 1/1/2007 | NC | 9 |
| B | E2381 | POWER WHEELCHAIR ACCESSORY, PNEU | 1/1/2007 | NC | 9 |
| B | E2382 | POWER WHEELCHAIR ACCESSORY, TUBE | 1/1/2007 | NC | 9 |
| B | E2383 | POWER WHEELCHAIR ACCESSORY, INSE | 1/1/2007 | NC | 9 |
| B | E2384 | POWER WHEELCHAIR ACCESSORY, PNEU | 1/1/2007 | NC | 9 |
| B | E2385 | POWER WHEELCHAIR ACCESSORY, TUBE | 1/1/2007 | NC | 9 |
| B | E2386 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| B | E2387 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| B | E2388 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| B | E2389 | POWER WHEELCHAIR ACCESSORY, FOAM | 1/1/2007 | NC | 9 |
| B | E2390 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |
| B | E2391 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |
| B | E2392 | POWER WHEELCHAIR ACCESSORY, SOLI | 1/1/2007 | NC | 9 |
| B | E2393 | POWER WHEELCHAIR ACCESSORY, VALV | 1/1/2007 | NC | 9 |
| B | E2394 | POWER WHEELCHAIR ACCESSORY, DRIV | 1/1/2007 | NC | 9 |
| B | E2395 | POWER WHEELCHAIR ACCESSORY, CAST | 1/1/2007 | NC | 9 |
| B | E2396 | POWER WHEELCHAIR ACCESSORY, CAST | 1/1/2007 | NC | 9 |
| B | E2399 | POWER WHEELCHAIR ACCESSORY, NOT | 10/1/2005 | $0.01 | 5 |
| B | E2402 | NEGATIVE PRESSURE WOUND THERAPY | 10/1/2006 | $1,716.46 | 3 |
| B | E2601 | GENERAL USE WHEELCHAIR SEAT CUSH | 10/1/2006 | $6.13 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | E2602 | GENERAL USE WHEELCHAIR SEAT CUSH | 10/1/2006 | $11.94 | 3 |
| B | E2603 | SKIN PROTECTION WHEELCHAIR SEAT | 10/1/2006 | $15.17 | 3 |
| B | E2604 | SKIN PROTECTION WHEELCHAIR SEAT | 10/1/2006 | $18.83 | 3 |
| B | E2605 | POSITIONING WHEELCHAIR SEAT CUSH | 10/1/2006 | $26.93 | 3 |
| B | E2606 | POSITIONING WHEELCHAIR SEAT CUSH | 10/1/2006 | $42.01 | 3 |
| B | E2607 | SKIN PROTECTION AND POSITIONING | 10/1/2006 | $28.99 | 3 |
| B | E2608 | SKIN PROTECTION AND POSITIONING | 10/1/2006 | $34.80 | 3 |
| B | E2609 | CUSTOM FABRICATED WHEELCHAIR SEA | 10/1/2005 | $66.01 | 3 |
| B | E2611 | GENERAL USE WHEELCHAIR BACK CUSH | 10/1/2006 | $31.23 | 3 |
| B | E2612 | GENERAL USE WHEELCHAIR BACK CUSH | 10/1/2006 | $42.25 | 3 |
| B | E2613 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $39.31 | 3 |
| B | E2614 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $54.40 | 3 |
| B | E2615 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $45.24 | 3 |
| B | E2616 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $60.86 | 3 |
| B | E2617 | CUSTOM FABRICATED WHEELCHAIR BAC | 10/1/2005 | $65.34 | 3 |
| B | E2618 | WHEELCHAIR ACCESSORY, SOLID SEAT | 10/1/2006 | $15.37 | 3 |
| B | E2619 | REPLACEMENT COVER FOR WHEELCHAIR | 10/1/2006 | $5.13 | 3 |
| B | E2620 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $54.77 | 3 |
| B | E2621 | POSITIONING WHEELCHAIR BACK CUSH | 10/1/2006 | $56.69 | 3 |
| B | E8000 | GAIT TRAINER, PEDIATRIC SIZE, PO | 10/1/2005 | $99.98 | 3 |
| B | E8001 | GAIT TRAINER, PEDIATRIC SIZE, UP | 10/1/2005 | $99.98 | 3 |
| B | E8002 | GAIT TRAINER, PEDIATRIC SIZE, AN | 10/1/2005 | $99.98 | 3 |
| B | G0249 | PROVISION OF TEST MATERIALS AND | 7/1/2002 | NC | 9 |
| B | K0001 | STANDARD WHEELCHAIR | 10/1/2006 | $51.75 | 3 |
| B | K0002 | STANDARD HEMI (LOW SEAT) WHEELCH | 10/1/2006 | $76.69 | 3 |
| B | K0003 | LIGHTWEIGHT WHEELCHAIR | 10/1/2006 | $82.01 | 3 |
| B | K0004 | HIGH STRENGTH, LIGHTWEIGHT WHEEL | 10/1/2006 | $107.63 | 3 |
| B | K0005 | ULTRALIGHTWEIGHT WHEELCHAIR | 10/1/2006 | $172.22 | 3 |
| B | K0006 | HEAVY-DUTY WHEELCHAIR | 10/1/2006 | $118.83 | 3 |
| B | K0007 | EXTRA HEAVY-DUTY WHEELCHAIR | 10/1/2006 | $169.13 | 3 |
| B | K0008 | CUSTOM MANUAL WHEELCHAIR/BASE | 1/1/2002 | INVALID | N |
| B | K0009 | OTHER MANUAL WHEELCHAIR/BASE | 10/1/2005 | $959.76 | 3 |
| B | K0010 | STANDARD-WEIGHT FRAME MOTORIZED/ | 11/15/2006 | NC | 9 |
| B | K0011 | STANDARD-WEIGHT FRAME MOTORIZED/ | 11/15/2006 | NC | 9 |
| B | K0012 | LIGHTWEIGHT PORTABLE MOTORIZED/P | 11/15/2006 | NC | 9 |
| B | K0013 | CUSTOM MOTORIZED/POWER WHEELCHAI | 4/1/2002 | INVALID | N |
| B | K0014 | OTHER MOTORIZED/POWER WHEELCHAIR | 11/15/2006 | NC | 9 |
| B | K0015 | DETACHABLE, NONADJUSTABLE HEIGHT | 10/1/2006 | $17.86 | 3 |
| B | K0016 | DETACHABLE, ADJUSTABLE HEIGHT AR | 4/1/2004 | INVALID | N |
| B | K0017 | DETACHABLE, ADJUSTABLE HEIGHT AR | 10/1/2006 | $5.03 | 3 |
| B | K0018 | DETACHABLE, ADJUSTABLE HEIGHT AR | 10/1/2006 | $2.80 | 3 |
| B | K0019 | ARM PAD, EACH | 10/1/2006 | $1.72 | 3 |
| B | K0020 | FIXED, ADJSUTABLE HEIGHT ARMREST | 10/1/2006 | $4.58 | 3 |
| B | K0021 | ANTITIPPING DEVICE, EACH | 7/1/2003 | INVALID | N |
| B | K0022 | REINFORCED BACK UPHOLSTERY | 4/1/2004 | INVALID | N |
| B | K0023 | SOLID BACK INSERT, PLANAR BACK, | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | K0024 | SOLID BACK INSERT, PLANAR BACK, | 1/1/2005 | INVALID | N |
| B | K0025 | HOOK-ON HEADREST EXTENSION | 4/1/2004 | INVALID | N |
| B | K0026 | BACK UPHOLSTERY FOR ULTRALIGHTWE | 4/1/2004 | INVALID | N |
| B | K0027 | BACK UPHOLSTERY FOR WHEELCHAIR T | 4/1/2004 | INVALID | N |
| B | K0028 | FULLY RECLINING BACK | 4/1/2004 | INVALID | N |
| B | K0029 | REINFORCED SEAT UPHOLSTERY | 4/1/2004 | INVALID | N |
| B | K0030 | SOLID SEAT INSERT, PLANAR SEAT, | 4/1/2004 | INVALID | N |
| B | K0031 | SAFETY BELT/PELVIC STRAP | 4/1/2004 | INVALID | N |
| B | K0032 | SEAT UPHOLSTERY FOR ULTRALIGHTWE | 4/1/2004 | INVALID | N |
| B | K0033 | SEAT UPHOLSTERY FOR WHEELCHAIR T | 4/1/2004 | INVALID | N |
| B | K0034 | HEEL LOOP, EACH | 7/1/2003 | INVALID | N |
| B | K0035 | HEEL LOOP WITH ANKLE STRAP, EACH | 4/1/2004 | INVALID | N |
| B | K0036 | TOE LOOP, EACH | 4/1/2004 | INVALID | N |
| B | K0037 | HIGH MOUNT FLIP-UP FOOTREST, EAC | 10/1/2006 | $4.30 | 3 |
| B | K0038 | LEG STRAP, EACH | 10/1/2006 | $2.38 | 3 |
| B | K0039 | LEG STRAP, H STYLE, EACH | 10/1/2006 | $5.32 | 3 |
| B | K0040 | ADJUSTABLE ANGLE FOOTPLATE, EACH | 10/1/2006 | $7.35 | 3 |
| B | K0041 | LARGE SIZE FOOTPLATE, EACH | 10/1/2006 | $5.19 | 3 |
| B | K0042 | STANDARD SIZE FOOTPLATE, EACH | 10/1/2006 | $3.09 | 3 |
| B | K0043 | FOOTREST, LOWER EXTENSION TUBE, | 10/1/2006 | $1.92 | 3 |
| B | K0044 | FOOTREST, UPPER HANGER BRACKET, | 10/1/2006 | $1.64 | 3 |
| B | K0045 | FOOTREST, COMPLETE ASSEMBLY | 10/1/2006 | $5.84 | 3 |
| B | K0046 | ELEVATING LEGREST, LOWER EXTENSI | 10/1/2006 | $1.92 | 3 |
| B | K0047 | ELEVATING LEGREST, UPPER HANGER | 10/1/2006 | $7.52 | 3 |
| B | K0048 | ELEVATING LEGREST, COMPLETE ASSE | 4/1/2004 | INVALID | N |
| B | K0049 | CALF PAD, EACH | 4/1/2004 | INVALID | N |
| B | K0050 | RATCHET ASSEMBLY | 10/1/2006 | $3.18 | 3 |
| B | K0051 | CAM RELEASE ASSEMBLY, FOOTREST O | 10/1/2006 | $5.16 | 3 |
| B | K0052 | SWINGAWAY, DETACHABLE FOOTRESTS, | 10/1/2006 | $9.10 | 3 |
| B | K0053 | ELEVATING FOOTRESTS, ARTICULATIN | 10/1/2006 | $10.04 | 3 |
| B | K0054 | SEAT WIDTH OF 10, 11, 12, 15, 17 | 4/1/2004 | INVALID | N |
| B | K0055 | SEAT DEPTH OF 15, 17, OR 18 INCH | 4/1/2004 | INVALID | N |
| B | K0056 | SEAT HEIGHT <17" OR >= TO 21" FO | 10/1/2006 | $9.36 | 3 |
| B | K0057 | SEAT WIDTH 19 OR 20 INCHES FOR H | 4/1/2004 | INVALID | N |
| B | K0058 | SEAT DEPTH 17 OR 18 INCHES FOR A | 4/1/2004 | INVALID | N |
| B | K0059 | PLASTIC COATED HANDRIM, EACH | 1/1/2005 | INVALID | N |
| B | K0060 | STEEL HANDRIM, EACH | 1/1/2005 | INVALID | N |
| B | K0061 | ALUMINUM HANDRIM, EACH | 1/1/2005 | INVALID | N |
| B | K0062 | HANDRIM WITH 8 TO 10 VERTICAL OR | 4/1/2004 | INVALID | N |
| B | K0063 | HANDRIM WITH 12 TO 16 VERTICAL O | 4/1/2004 | INVALID | N |
| B | K0064 | ZERO PRESSURE TUBE (FLAT FREE IN | 1/1/2006 | INVALID | N |
| B | K0065 | SPOKE PROTECTORS, EACH | 10/1/2006 | $4.36 | 3 |
| B | K0066 | SOLID TIRE, ANY SIZE, EACH | 1/1/2006 | INVALID | N |
| B | K0067 | PNEUMATIC TIRE, ANY SIZE, EACH | 1/1/2006 | INVALID | N |
| B | K0068 | PNEUMATIC TIRE TUBE, EACH | 1/1/2006 | INVALID | N |
| B | K0069 | REAR WHEEL ASSEMBLY, COMPLETE, W | 10/1/2006 | $9.84 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | K0070 | REAR WHEEL ASSEMBLY, COMPLETE, W | 10/1/2006 | $18.02 | 3 |
| B | K0071 | FRONT CASTER ASSEMBLY, COMPLETE, | 10/1/2006 | $10.77 | 3 |
| B | K0072 | FRONT CASTER ASSEMBLY, COMPLETE, | 10/1/2006 | $6.08 | 3 |
| B | K0073 | CASTER PIN LOCK, EACH | 10/1/2006 | $3.29 | 3 |
| B | K0074 | PNEUAMTIC CASTER TIRE, ANY SIZE, | 1/1/2006 | INVALID | N |
| B | K0075 | SEMI-PNEUMATIC CASTER TIRE, ANY | 1/1/2006 | INVALID | N |
| B | K0076 | SOLID CASTER TIRE, ANY SIZE, EAC | 1/1/2006 | INVALID | N |
| B | K0077 | FRONT CASTER ASSEMBLY, COMPLETE, | 10/1/2006 | $5.78 | 3 |
| B | K0078 | PNEUMATIC CASTER TIRE TUBE, EACH | 1/1/2006 | INVALID | N |
| B | K0079 | WHEEL LOCK EXTENSION, PAIR | 4/1/2004 | INVALID | N |
| B | K0080 | ANTI-ROLLBACK DEVICE, PAIR | 4/1/2004 | INVALID | N |
| B | K0081 | WHEEL LOCK ASSEMBLY, COMPLETE, E | 1/1/2005 | INVALID | N |
| B | K0082 | 22 NF NON-SEALED LEAD ACID BATTE | 4/1/2004 | INVALID | N |
| B | K0083 | 22 NF SEALED LEAD ACID BATTERY, | 4/1/2004 | INVALID | N |
| B | K0084 | GROUP 24 NON-SEALED LEAD ACID BA | 4/1/2004 | INVALID | N |
| B | K0085 | GROUP 24 SEALED LEAD ACID BATTER | 4/1/2004 | INVALID | N |
| B | K0086 | U-1 NON-SEALED LEAD ACID BATTERY | 4/1/2004 | INVALID | N |
| B | K0087 | U-1 SEALED LEAD ACID BATTERY, EA | 4/1/2004 | INVALID | N |
| B | K0088 | BATTERY CHARGER, SINGLE MODE, FO | 4/1/2004 | INVALID | N |
| B | K0089 | BATTERY CHARGER, DUAL MODE, FOR | 4/1/2004 | INVALID | N |
| B | K0090 | REAR WHEEL TIRE FOR POWER WHEELC | 1/1/2007 | INVALID | N |
| B | K0091 | REAR WHEEL TIRE TUBE OTHER THAN | 1/1/2007 | INVALID | N |
| B | K0092 | REAR WHEEL ASSEMBLY FOR POWER WH | 1/1/2007 | INVALID | N |
| B | K0093 | REAR WHEEL, ZERO PRESSURE TIRE T | 1/1/2007 | INVALID | N |
| B | K0094 | WHEEL TIRE FOR POWER BASE, ANY S | 1/1/2007 | INVALID | N |
| B | K0095 | WHEEL TIRE TUBE OTHER THAN ZERO | 1/1/2007 | INVALID | N |
| B | K0096 | WHEEL ASSEMBLY FOR POWER BASE, C | 1/1/2007 | INVALID | N |
| B | K0097 | WHEEL ZERO PRESSURE TIRE TUBE (F | 1/1/2007 | INVALID | N |
| B | K0098 | DRIVE BELT FOR POWER WHEELCHAIR | 10/1/2006 | $2.61 | 3 |
| B | K0099 | FRONT CASTER FOR POWER WHEELCHAI | 1/1/2007 | INVALID | N |
| B | K0100 | AMPUTEE ADAPTER, PART | 4/1/2004 | INVALID | N |
| B | K0101 | ONE-ARM DRIVE ATTACHMENT | 7/1/2003 | INVALID | N |
| B | K0102 | CRUTCH AND CANE HOLDER, EACH | 1/1/2006 | INVALID | N |
| B | K0103 | TRANSFER BOARD, LESS THAN 25 INC | 4/1/2004 | INVALID | N |
| B | K0104 | CYLINDER TANK CARRIER, EACH | 1/1/2006 | INVALID | N |
| B | K0105 | IV HANGER, EACH | 10/1/2006 | $9.76 | 3 |
| B | K0106 | ARM TROUGH, EACH | 1/1/2006 | INVALID | N |
| B | K0107 | WHEELCHAIR TRAY | 4/1/2004 | INVALID | N |
| B | K0108 | OTHER WHEELCHAIR ACCESSORIES | 10/1/2005 | $103.20 | 3 |
| B | K0112 | TRUNK SUPPORT DEVICE, VEST TYPE, | 4/1/2004 | INVALID | N |
| B | K0113 | TRUNK SUPPORT DEVICE, VEST TYPE, | 4/1/2004 | INVALID | N |
| B | K0114 | BACK SUPPORT SYSTEM FOR USE WITH | 1/1/2005 | INVALID | N |
| B | K0115 | ORTHOTIC SEATING SYSTEM, BACK MO | 1/1/2005 | INVALID | N |
| B | K0116 | ORTHOTIC SEATING SYSTEM, COMBINE | 1/1/2005 | INVALID | N |
| B | K0195 | ELEVATING LEG RESTS, PAIR (FOR U | 10/1/2006 | $21.07 | 3 |
| B | K0268 | HUMIDIFIER, USED WITH CPAP DEVIC | 4/1/2004 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | K0452 | WHEELCHAIR BEARINGS, ANY TYPE | 1/1/2006 | INVALID | N |
| B | K0460 | POWER ADD-ON, TO CONVERT MANUAL | 4/1/2004 | INVALID | N |
| B | K0461 | POWER ADD-ON, TO CONVERT MANUAL | 4/1/2004 | INVALID | N |
| B | K0462 | TEMPORARY REPLACEMENT FOR PATIEN | 10/1/2005 | $619.20 | 3 |
| B | K0531 | HUMIDIFIER, HEATED, USED WITH PO | 4/1/2004 | INVALID | N |
| B | K0532 | RESPIRATORY ASSIST DEVICE, BI-LE | 4/1/2004 | INVALID | N |
| B | K0533 | RESPIRATORY ASSIST DEVICE, BI-LE | 4/1/2004 | INVALID | N |
| B | K0534 | RESPIRATORY ASSIST DEVICE, BI-LE | 4/1/2004 | INVALID | N |
| B | K0538 | NEGATIVE PRESSURE WOUND THERAPY | 4/1/2004 | INVALID | N |
| B | K0549 | HOSPITAL BED, HEAVY DUTY, EXTRA | 4/1/2004 | NC | 9 |
| B | K0550 | HOSPITAL BED, EXTRA HEAVY DUTY, | 4/1/2004 | INVALID | N |
| B | K0551 | RESIDUAL LIMB SUPPORT SYSTEM, SO | 7/1/2003 | INVALID | N |
| B | K0606 | AUTOMATIC EXTERNAL DEFIBRILLATOR | 1/1/2006 | NC | 9 |
| B | K0650 | GENERAL USE WHEELCHAIR SEAT CUSH | 1/1/2005 | INVALID | N |
| B | K0651 | GENERAL USE WHEELCHAIR SEAT CUSH | 1/1/2005 | INVALID | N |
| B | K0652 | SKIN PROTECTION WHEELCHAIR SEAT | 1/1/2005 | INVALID | N |
| B | K0653 | SKIN PROTECTION WHEELCHAIR SEAT | 1/1/2005 | INVALID | N |
| B | K0654 | POSITIONING WHEELCHAIR SEAT CUSH | 1/1/2005 | INVALID | N |
| B | K0655 | POSITIONING WHEELCHAIR SEAT CUSH | 1/1/2005 | INVALID | N |
| B | K0656 | SKIN PROTECTION AND POSITIONING | 1/1/2005 | INVALID | N |
| B | K0657 | SKIN PROTECTION AND POSITIONING | 1/1/2005 | INVALID | N |
| B | K0658 | CUSTOM FABRICATED WHEELCHAIR SEA | 1/1/2005 | INVALID | N |
| B | K0659 | WHEELCHAIR SEAT CUSHION POWERED | 1/1/2005 | INVALID | N |
| B | K0660 | GENERAL USE WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| B | K0661 | GENERAL USE WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| B | K0662 | POSITIONING WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| B | K0663 | POSITIONING WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| B | K0664 | POSITIONING WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| B | K0665 | POSITIONING WHEELCHAIR BACK CUSH | 1/1/2005 | INVALID | N |
| B | K0666 | CUSTOM FABRICATED WHEELCHAIR BAC | 1/1/2005 | INVALID | N |
| B | K0668 | REPLACEMENT COVER FOR WHEELCHAIR | 1/1/2005 | INVALID | N |
| B | K0669 | WHEELCHAIR ACCESSORY, WHEELCHAIR | 7/1/2004 | NC | 9 |
| B | K0671 | PORTABLE OXYGEN CONCENTRATOR, RE | 1/1/2006 | INVALID | N |
| B | K0733 | POWER WHEELCHAIR ACCESSORY, 12-2 | 10/1/2006 | $3.04 | 3 |
| B | K0734 | SKIN PROTECTION WHEELCHAIR SEAT | 10/1/2006 | $33.15 | 3 |
| B | K0735 | SKIN PROTECTION WHEELCHAIR SEAT | 10/1/2006 | $42.19 | 3 |
| B | K0736 | SKIN PROTECTION AND POSITIONING | 10/1/2006 | $33.42 | 3 |
| B | K0737 | SKIN PROTECTION AND POSITIONING | 10/1/2006 | $42.30 | 3 |
| B | K0738 | PORTABLE GASEOUS OXYGEN SYSTEM, | 1/1/2007 | $51.63 | 3 |
| B | K0800 | POWER OPERATED VEHICLE, GRP 1 ST | 10/1/2006 | NC | 9 |
| B | K0801 | POWER OPERATED VEHICLE, GRP 1 VE | 10/1/2006 | NC | 9 |
| B | K0802 | POWER OPERATED VEHICLE, GRP 1 VE | 10/1/2006 | NC | 9 |
| B | K0806 | POWER OPERATED VEHICLE, GRP 2 ST | 10/1/2006 | NC | 9 |
| B | K0807 | OWER OPERATED VEHICLE, GRP 2 VER | 10/1/2006 | NC | 9 |
| B | K0808 | POWER OPERATED VEHICLE, GRP 2 VE | 10/1/2006 | NC | 9 |
| B | K0812 | POWER OPERATED VEHICLE, NOT OTHE | 10/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | K0813 | POWER WHLCHR, GRP 1 STANDARD, PO | 11/15/2006 | $222.83 | 3 |
| B | K0814 | POWER WHLCHR, GRP 1 STANDARD, PO | 11/15/2006 | $280.76 | 3 |
| B | K0815 | POWER WHLCHR, GRP 1 STANDARD, SL | 11/15/2006 | $344.91 | 3 |
| B | K0816 | POWER WHLCHR, GRP 1 STANDARD, CA | 11/15/2006 | $329.21 | 3 |
| B | K0820 | POWER WHLCHR, GRP 2 STANDARD, PO | 11/15/2006 | $250.96 | 3 |
| B | K0821 | POWER WHLCHR, GRP 2 STANDARD, PO | 11/15/2006 | $315.76 | 3 |
| B | K0822 | POWER WHLCHR, GRP 2 STANDARD, SL | 11/15/2006 | $391.30 | 3 |
| B | K0823 | POWER WHLCHR, GRP 2 STANDARD, CA | 11/15/2006 | $394.85 | 3 |
| B | K0824 | POWER WHLCHR, GRP 2 HEAVY DUTY, | 11/15/2006 | $475.90 | 3 |
| B | K0825 | POWER WHLCHR, GRP 2 HEAVY DUTY, | 11/15/2006 | $395.20 | 3 |
| B | K0826 | POWER WHLCHR, GRP 2 VERY HEAVY D | 11/15/2006 | $618.57 | 3 |
| B | K0827 | POWER WHLCHR, GRP 2 VERY HEAVY D | 11/15/2006 | $472.57 | 3 |
| B | K0828 | POWER WHLCHR, GRP 2 EXTRA HEAVY | 11/15/2006 | $682.44 | 3 |
| B | K0829 | POWER WHLCHR, GRP 2 EXTRA HEAVY | 11/15/2006 | $562.38 | 3 |
| B | K0830 | POWER WHLCHR, GRP 2 STANDARD, SE | 11/15/2006 | NC | 9 |
| B | K0831 | POWER WHLCHR, GRP 2 STANDARD, SE | 11/15/2006 | NC | 9 |
| B | K0835 | POWER WHLCHR, GRP 2 STNDRD, SING | 11/15/2006 | $404.98 | 3 |
| B | K0836 | POWER WHLCHR, GRP 2 STANDARD, SI | 11/15/2006 | $412.40 | 3 |
| B | K0837 | POWER WHLCHR, GRP 2 HEAVY DUTY, | 11/15/2006 | $475.90 | 3 |
| B | K0838 | POWER WHLCHR, GRP 2 HEAVY DUTY, | 11/15/2006 | $429.46 | 3 |
| B | K0839 | POWER WHLCHR, GRP 2 VERY HEAVY D | 11/15/2006 | $618.57 | 3 |
| B | K0840 | POWER WHLCHR, GRP 2 EXTRA HEAVY | 11/15/2006 | $835.06 | 3 |
| B | K0841 | POWER WHLCHR, GRP 2 STNDRD, MULT | 11/15/2006 | $455.15 | 3 |
| B | K0842 | POWER WHLCHR, GRP 2 STNDRD, MULT | 11/15/2006 | $455.15 | 3 |
| B | K0843 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $508.82 | 3 |
| B | K0848 | POWER WHLCHR, GRP 3 STANDARD, SL | 11/15/2006 | $517.31 | 3 |
| B | K0849 | POWER WHLCHR, GRP 3 STANDARD, CA | 11/15/2006 | $497.21 | 3 |
| B | K0850 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $574.21 | 3 |
| B | K0851 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $551.92 | 3 |
| B | K0852 | POWER WHLCHR, GRP 3 VERY HEAVY D | 11/15/2006 | $697.10 | 3 |
| B | K0853 | POWER WHLCHR, GRP 3 VERY HEAVY D | 11/15/2006 | $716.40 | 3 |
| B | K0854 | POWER WHLCHR, GRP 3 EXTRA HEAVY | 11/15/2006 | $911.56 | 3 |
| B | K0855 | POWER WHLCHR, GRP 3 EXTRA HEAVY | 11/15/2006 | $852.53 | 3 |
| B | K0856 | POWER WHLCHR, GRP 3 STNDRD, SING | 11/15/2006 | $556.13 | 3 |
| B | K0857 | POWER WHLCHR, GRP 3 STNDRD, SING | 11/15/2006 | $567.25 | 3 |
| B | K0858 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $692.62 | 3 |
| B | K0859 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $709.06 | 3 |
| B | K0860 | POWER WHLCHR, GRP 3 VERY HEAVY D | 11/15/2006 | $973.41 | 3 |
| B | K0861 | POWER WHLCHR, GRP 3 STNDRD, MULT | 11/15/2006 | $557.01 | 3 |
| B | K0862 | POWER WHLCHR, GRP 3 HEAVY DUTY, | 11/15/2006 | $692.62 | 3 |
| B | K0863 | POWER WHLCHR, GRP 3 VERY HEAVY D | 11/15/2006 | $973.41 | 3 |
| B | K0864 | POWER WHLCHR, GRP 3 EXTRA HEAVY | 11/15/2006 | $1,158.33 | 3 |
| B | K0868 | POWER WHLCHR, GRP 4 STNDRD, SLIN | 11/15/2006 | NC | 9 |
| B | K0869 | POWER WHLCHR, GRP 4 STNDRD, CAPT | 10/1/2006 | NC | 9 |
| B | K0870 | POWER WHLCHR, GRP 4 HEAVY DUTY, | 10/1/2006 | NC | 9 |
| B | K0871 | POWER WHLCHR, GRP 4 VERY HEAVY D | 10/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | K0877 | POWER WHLCHR, GRP 4 STNDRD, SIN | 10/1/2006 | NC | 9 |
| B | K0878 | POWER WHLCHR, GRP 4 STNDRD, SING | 10/1/2006 | NC | 9 |
| B | K0879 | POWER WHLCHR, GRP 4 HEAVY DUTY, | 10/1/2006 | NC | 9 |
| B | K0880 | POWER WHLCHR, GRP 4 VERY HEAVY D | 10/1/2006 | NC | 9 |
| B | K0884 | POWER WHLCHR, GRP 4 STNDRD, MLTP | 10/1/2006 | NC | 9 |
| B | K0885 | POWER WHEELCHAIR, GROUP 4 STANDA | 11/15/2006 | NC | 9 |
| B | K0886 | POWER WHLCHR, GRP 4 HEAVY DUTY, | 10/1/2006 | NC | 9 |
| B | K0890 | POWER WHLCHR, GRP 5 PEDIATRIC, S | 11/15/2006 | $0.01 | 5 |
| B | K0891 | POWER WHLCHR, GRP 5 PEDIATRIC, M | 11/15/2006 | $0.01 | 5 |
| B | K0898 | POWER WHEELCHAIR, NO OTHERWISE C | 10/1/2006 | NC | 9 |
| B | K0899 | POWER MOBILITY DEVICE, NOT CODED | 10/1/2006 | NC | 9 |
| B | L0100 | CRANIAL ORTHOSIS (HELMET), WITH | 1/1/2007 | INVALID | N |
| B | L0110 | CRANIAL ORTHOSIS (HELMET), WITH | 1/1/2007 | INVALID | N |
| B | L0560 | LSO, ANTERIOR-POSTERIOR-LATERAL | 1/1/2005 | INVALID | N |
| B | L0600 | SACROILIAC, FLEXIBLE (SACROILIAC | 1/1/2005 | INVALID | N |
| B | L0610 | SACROILIAC, FLEXIBLE (SACROILIAC | 1/1/2005 | INVALID | N |
| B | L0620 | SACROILIAC, SEMI-RIGID (GOLDTHWA | 1/1/2005 | INVALID | N |
| B | L0860 | ADDITION TO HALO PROCEDURES, MAG | 1/1/2006 | INVALID | N |
| B | L1750 | LEGG PERTHES ORTHOSIS, LEGG PERT | 1/1/2006 | INVALID | N |
| B | L2435 | ADDITION TO KNEE JOINT, POLYCENT | 1/1/2005 | INVALID | N |
| B | L3902 | WRIST HAND FINGER ORTHOSIS, EXTE | 1/1/2007 | INVALID | N |
| B | L3914 | WRIST HAND ORTHOSIS, WRIST EXTEN | 1/1/2007 | INVALID | N |
| B | L3963 | SHOULDER ELBOW WRIST HAND ORTHOS | 1/1/2006 | INVALID | N |
| B | L3964 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $56.95 | 3 |
| B | L3965 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $90.88 | 3 |
| B | L3966 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $68.47 | 3 |
| B | L3968 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $86.64 | 3 |
| B | L3969 | SHOULDER ELBOW ORTHOSIS, MOBILE | 10/1/2006 | $60.60 | 3 |
| B | L3970 | SEWHO ADDITIONS TO MOBILE ARM SU | 10/1/2006 | $20.61 | 3 |
| B | L3972 | SEWHO ADDITIONS TO MOBILE ARM SU | 10/1/2006 | $13.10 | 3 |
| B | L3974 | SEWHO ADDITIONS TO MOBILE ARM SU | 10/1/2006 | $13.08 | 3 |
| B | L5674 | ADDITION TO LOWER EXTREMITY, BEL | 1/1/2005 | INVALID | N |
| B | L5675 | ADDITION TO LOWER EXTREMITY, BEL | 1/1/2005 | INVALID | N |
| B | L6700 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6705 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6710 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6715 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6720 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6725 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6730 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6735 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6740 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6745 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6750 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6755 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6765 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| B | L6770 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6775 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6780 | TERMINAL DEVICE, HOOK, DORRANCE, | 1/1/2007 | INVALID | N |
| B | L6790 | TERMINAL DEVICE, HOOK-ACCU HOOK, | 1/1/2007 | INVALID | N |
| B | L6795 | TERMINAL DEVICE, HOOK-2 LOAD, OR | 1/1/2007 | INVALID | N |
| B | L6800 | TERMINAL DEVICE, HOOK-APRL VC, O | 1/1/2007 | INVALID | N |
| B | L6806 | TERMINAL DEVICE, HOOK, TRS GRIP, | 1/1/2007 | INVALID | N |
| B | L6807 | TERMINAL DEVICE, HOOK, GRIP I, G | 1/1/2007 | INVALID | N |
| B | L6808 | TERMINAL DEVICE, HOOK, TRS ADEPT | 1/1/2007 | INVALID | N |
| B | L6809 | TERMINAL DEVICE, HOOK, TRS SUPER | 1/1/2007 | INVALID | N |
| B | L6830 | TERMINAL DEVICE, HAND, APRL, VC | 1/1/2007 | INVALID | N |
| B | L6835 | TERMINAL DEVICE, HAND, SIERRA, V | 1/1/2007 | INVALID | N |
| B | L6840 | TERMINAL DEVICE, HAND, BECKER IM | 1/1/2007 | INVALID | N |
| B | L6845 | TERMINAL DEVICE, HAND, BECKER LO | 1/1/2007 | INVALID | N |
| B | L6850 | TERMINAL DEVICE, HAND, BECKER PL | 1/1/2007 | INVALID | N |
| B | L6855 | TERMINAL DEVICE, HAND, ROBIN-AID | 1/1/2007 | INVALID | N |
| B | L6860 | TERMINAL DEVICE, HAND, ROBIN-AID | 1/1/2007 | INVALID | N |
| B | L6865 | TERMINAL DEVICE, HAND, PASSIVE H | 1/1/2007 | INVALID | N |
| B | L6867 | TERMINAL DEVICE, HAND, DETROLT I | 1/1/2007 | INVALID | N |
| B | L6868 | TERMINAL DEVICE, HAND, PASSIVE I | 1/1/2007 | INVALID | N |
| B | L6870 | TERMINAL DEVICE, HAND, CHILD MIT | 1/1/2007 | INVALID | N |
| B | L6872 | TERMINAL DEVICE, HAND, NYU CHILD | 1/1/2007 | INVALID | N |
| B | L6873 | TERMINAL DEVICE, HAND, MECHANICA | 1/1/2007 | INVALID | N |
| B | L6880 | TERMINAL DEVICE, HAND, BOCK, VO | 1/1/2007 | INVALID | N |
| B | L7500 | REPAIR OF PROSTHETIC DEVICE, HRL | 5/9/2005 | NC | 9 |
| B | L8190 | ELASTIC SUPPORTS ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| B | L8200 | ELASTIC SUPPORTS ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| B | L8210 | GRADIENT COMPRESSION STOCKING, C | 1/1/2006 | INVALID | N |
| B | L8220 | GRADIENT COMPRESSION STOCKING, L | 1/1/2006 | INVALID | N |
| B | L8230 | GRADIENT COMPRESSION STOCKING, G | 1/1/2006 | INVALID | N |
| B | S8105 | OXIMETER FOR MEASURING BLOOD OXY | 7/1/2003 | INVALID | N |
| B | S9001 | HOME UTERINE MONITOR WITH OR WIT | 1/1/2000 | $75.00 | 3 |
| B | S9098 | HOME VISIT, PHOTOTHERAPY SERVICE | 7/1/2006 | NC | 9 |
| B | S9145 | INSULIN PUMP INITIATION, INSTRUC | 7/1/2002 | NC | 9 |
| B | T4538 | DIAPER SERVICE, REUSABLE DIAPER, | 1/1/2005 | $0.70 | 3 |
| C | E1340 | REPAIR OR NONROUTINE SERVICE FOR | 10/1/2005 | $7.43 | 3 |
| C | L4205 | REPAIR OF ORTHOTIC DEVICE, LABOR | 10/1/2005 | $6.71 | 3 |
| C | L7510 | REPAIR OF PROSTHETIC DEVICE, REP | 8/1/2006 | $200.92 | 3 |
| C | L7520 | REPAIR PROSTHETIC DEVICE, LABOR | 10/1/2005 | $20.64 | 3 |
| C | L8049 | REPAIR OR MODIFICATION OF MAXILL | 10/1/2005 | $17.32 | 3 |
| D | 90799 | UNLISTED THERAPEUTIC OR DIAGNOST | 1/1/2006 | INVALID | N |
| D | 99002 | HANDLING, CONVEYANCE AND/OR ANY | 3/1/1987 | NC | 9 |
| D | A0021 | AMBULANCE SERVICE, OUTSIDE STATE | 1/1/1988 | NC | 9 |
| D | A0080 | NON-EMERGENCY TRANSPORT, PER MIL | 1/1/1988 | NC | 9 |
| D | A0090 | NON-EMERGENCY TRANSPORT, PER MIL | 1/1/1999 | $0.25 | 3 |
| D | A0100 | NON-EMERGENCY TRANSPORTATION; TA | 3/17/2003 | $999.00 | 1 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| D | A0110 | NONEMERGENCY TRANSPORTATION AND | 2/15/1987 | $0.01 | 5 |
| D | A0120 | NON-EMERGENCY TRANSPORT: MINI-BU | 4/1/1988 | NC | 9 |
| D | A0130 | NONEMERGENCY TRANSPORTATION: WHE | 10/1/2000 | $17.72 | 1 |
| D | A0140 | NONEMERGENCY TRANSPORTATION AND | 2/15/1987 | $0.01 | 5 |
| D | A0160 | NONEMERGENCY TRANSPORTATION: PER | 1/1/1988 | NC | 9 |
| D | A0170 | TRANSPORTATION ANCILLARY: PARKIN | 10/1/2000 | $2.00 | 1 |
| D | A0180 | NONEMERGENCY TRANSPORTATION: ANC | 1/1/1999 | $40.00 | 3 |
| D | A0190 | NONEMERGENCY TRANSPORTATION: ANC | 1/1/1999 | $12.00 | 3 |
| D | A0200 | NONEMERGENCY TRANSPORTATION: ANC | 1/1/1999 | $40.00 | 3 |
| D | A0210 | NONEMERGENCY TRANSPORTATION: ANC | 1/1/1999 | $12.00 | 3 |
| D | A0368 | AMBULANCE SERVICE ALS EMERGENCY | 4/1/2002 | INVALID | N |
| D | A0380 | BLS MILEAGE (PER MILE) | 2/1/2003 | INVALID | N |
| D | A0382 | BLS ROUTINE DISPOSABLE SUPPLIES | 1/1/1995 | NC | 9 |
| D | A0384 | BLS SPECIALIZED SERVICE DISPOSAB | 1/1/1995 | NC | 9 |
| D | A0390 | ALS MILEAGE (PER MILE) | 2/1/2003 | INVALID | N |
| D | A0392 | ALS SPECIALIZED SERVICE DISPOSAB | 1/1/1995 | NC | 9 |
| D | A0394 | ALS SPECIALIZED SERVICE DISPOSAB | 1/1/1995 | NC | 9 |
| D | A0396 | ALS SPECIALIZED SERVICE DISPOSAB | 1/1/1995 | NC | 9 |
| D | A0398 | ALS ROUTINE DISPOSABLE SUPPLIES | 1/1/1995 | NC | 9 |
| D | A0420 | AMBULANCE WAITING TIME (ALS OR B | 1/1/1995 | NC | 9 |
| D | A0422 | AMBULANCE (ALS OR BLS) OXYGEN AN | 1/1/1995 | NC | 9 |
| D | A0424 | EXTRA AMBULANCE ATTENDANT, GROUN | 10/1/2000 | $17.72 | 3 |
| D | A0426 | AMBULANCE SERVICE, ADVANCED LIFE | 1/1/2001 | $141.73 | 3 |
| D | A0428 | AMBULANCE SERVICE, BASIC LIFE SU | 1/1/2001 | $141.73 | 3 |
| D | A0430 | AMBULANCE SERVICE, CONVENTIONAL | 1/1/2001 | $2,945.40 | 3 |
| D | A0431 | AMBULANCE SERVICE, CONVENTIONAL | 1/1/2001 | $2,945.40 | 3 |
| D | A0432 | PARAMEDIC INTERCEPT (PI), RURAL | 1/1/2001 | NC | 9 |
| D | A0433 | ADVANCED LIFE SUPPORT, LEVEL 2 ( | 10/1/2001 | $345.00 | 3 |
| D | A0434 | SPECIALTY CARE TRANSPORT (SCT) - | 10/1/2004 | $3,000.00 | 3 |
| D | A0435 | FIXED WING AIR MILEAGE, PER STAT | 1/1/2001 | NC | 9 |
| D | A0436 | ROTARY WING AIR MILEAGE, PER STA | 1/1/2001 | NC | 9 |
| D | A0800 | AMBULANCE TRANSPORT PROVIDED BET | 1/1/2007 | INVALID | N |
| D | A0888 | NONCOVERED AMBULANCE MILEAGE PER | 1/1/1995 | NC | 9 |
| D | A0999 | UNLISTED AMBULANCE SERVICE | 4/1/2003 | $0.01 | 1 |
| D | A4214 | STERILE SALINE OR WATER 30 CC VI | 4/1/2004 | INVALID | N |
| D | A9150 | NON-PRESCRIPTION DRUGS | 3/1/1987 | NC | 9 |
| D | J2000 | INJECTION, LIDOCAINE HCL, 50 CC | 4/1/2004 | INVALID | N |
| D | J2912 | INJECTION, SODIUM CHLORIDE, 0.9% | 1/1/2007 | INVALID | N |
| D | Q3020 | ALS VEHICLE USED, NON-EMERGENCY | 4/1/2006 | INVALID | N |
| D | S0209 | WHEELCHAIR VAN, MILEAGE, PER MIL | 10/1/2004 | $1.19 | 1 |
| D | S0215 | NON-EMERGENCY TRANSPORTATION; MI | 10/1/2004 | $1.77 | 3 |
| D | T2001 | EXTRA ATTENDANT | 10/1/2002 | $17.72 | 3 |
| D | T2002 | MILEAGE - ONE WAY | 12/9/2002 | $1.19 | 1 |
| D | T2003 | NON-EMERGENCY TRANSPORTATION/STR | 10/1/2004 | $70.86 | 3 |
| D | T2004 | NON-EMERGENCY TRANSPORT; COMMERC | 1/1/2003 | NC | 9 |
| D | T2005 | NON-EMERGENCY TRANSPORTATION; ST | 10/1/2002 | $53.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| D | T2007 | TRANSPORTATION WAITING TIME, AIR | 1/1/2003 | NC | 9 |
| D | T2049 | NON-EMERGENCY TRANSPORTATION; ST | 10/1/2004 | $1.77 | 3 |
| E | 90799 | UNLISTED THERAPEUTIC OR DIAGNOST | 1/1/2006 | INVALID | N |
| E | 99002 | HANDLING, CONVEYANCE AND/OR ANY | 3/1/1987 | NC | 9 |
| E | A0021 | AMBULANCE SERVICE, OUTSIDE STATE | 3/1/1989 | NC | 9 |
| E | A0080 | NON-EMERGENCY TRANSPORT, PER MIL | 3/1/1989 | NC | 9 |
| E | A0120 | NON-EMERGENCY TRANSPORT: MINI-BU | 3/1/1989 | NC | 9 |
| E | A0160 | NONEMERGENCY TRANSPORTATION: PER | 3/1/1989 | NC | 9 |
| E | A0225 | AMBULANCE SERVICE, NEONATAL TRAN | 10/1/2006 | $330.49 | 3 |
| E | A0368 | AMBULANCE SERVICE ALS EMERGENCY | 4/1/2002 | INVALID | N |
| E | A0380 | BLS MILEAGE (PER MILE) | 2/1/2003 | INVALID | N |
| E | A0382 | BLS ROUTINE DISPOSABLE SUPPLIES | 1/1/1995 | NC | 9 |
| E | A0384 | BLS SPECIALIZED SERVICE DISPOSAB | 1/1/1995 | NC | 9 |
| E | A0390 | ALS MILEAGE (PER MILE) | 2/1/2003 | INVALID | N |
| E | A0392 | ALS SPECIALIZED SERVICE DISPOSAB | 1/1/1995 | NC | 9 |
| E | A0394 | ALS SPECIALIZED SERVICE DISPOSAB | 1/1/1995 | NC | 9 |
| E | A0396 | ALS SPECIALIZED SERVICE DISPOSAB | 1/1/1995 | NC | 9 |
| E | A0398 | ALS ROUTINE DISPOSABLE SUPPLIES | 1/1/1995 | NC | 9 |
| E | A0420 | AMBULANCE WAITING TIME (ALS OR B | 1/1/1995 | NC | 9 |
| E | A0422 | AMBULANCE (ALS OR BLS) OXYGEN AN | 1/1/1995 | NC | 9 |
| E | A0424 | EXTRA AMBULANCE ATTENDANT, GROUN | 10/1/2006 | $18.93 | 3 |
| E | A0425 | GROUND MILEAGE, PER STATUTE MILE | 10/1/2006 | $3.67 | 3 |
| E | A0427 | AMBULANCE SERVICE, ADVANCED LIFE | 10/1/2006 | $368.50 | 3 |
| E | A0429 | AMBULANCE SERVICE, BASIC LIFE SU | 10/1/2006 | $202.94 | 3 |
| E | A0430 | AMBULANCE SERVICE, CONVENTIONAL | 1/1/2001 | $2,945.40 | 3 |
| E | A0431 | AMBULANCE SERVICE, CONVENTIONAL | 1/1/2001 | $2,945.40 | 3 |
| E | A0432 | PARAMEDIC INTERCEPT (PI), RURAL | 1/1/2001 | NC | 9 |
| E | A0433 | ADVANCED LIFE SUPPORT, LEVEL 2 ( | 10/1/2006 | $368.50 | 3 |
| E | A0435 | FIXED WING AIR MILEAGE, PER STAT | 1/1/2001 | NC | 9 |
| E | A0436 | ROTARY WING AIR MILEAGE, PER STA | 1/1/2001 | NC | 9 |
| E | A0800 | AMBULANCE TRANSPORT PROVIDED BET | 1/1/2007 | INVALID | N |
| E | A0888 | NONCOVERED AMBULANCE MILEAGE PER | 1/1/1995 | NC | 9 |
| E | A0998 | AMBULANCE RESPONSE AND TREATMENT | 7/1/2006 | $53.25 | 3 |
| E | A4214 | STERILE SALINE OR WATER 30 CC VI | 4/1/2004 | INVALID | N |
| E | A9150 | NON-PRESCRIPTION DRUGS | 3/1/1987 | NC | 9 |
| E | J2000 | INJECTION, LIDOCAINE HCL, 50 CC | 4/1/2004 | INVALID | N |
| E | J2912 | INJECTION, SODIUM CHLORIDE, 0.9% | 1/1/2007 | INVALID | N |
| E | Q3019 | ALS VEHICLE USED, EMERGENCY TRAN | 4/1/2006 | INVALID | N |
| E | T2006 | AMBULANCE RESPONSE AND TREATMENT | 1/1/2006 | INVALID | N |
| F | 15823 | BLEPHAROPLASTY, UPPER EYELID; WI | 10/1/2004 | $78.99 | 3 |
| F | 65205 | REMOVAL OF FOREIGN BODY, EXTERNA | 1/1/2007 | $35.81 | 3 |
| F | 65210 | REMOVAL OF FOREIGN BODY EXTERNAL | 1/1/2007 | $43.86 | 3 |
| F | 65220 | REMOVAL OF FOREIGN BODY EXTERNAL | 1/1/2007 | $36.33 | 3 |
| F | 65222 | REMOVAL OF FOREIGN BODY EXTERNAL | 1/1/2007 | $48.27 | 3 |
| F | 65430 | SCRAPING OF CORNEA, DIAGNOSTIC, | 1/1/2007 | $73.44 | 3 |
| F | 65435 | REMOVAL OF CORNEAL EPITHELIUM; W | 10/1/2005 | $51.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| F | 66820 | DISCISSION OF SECONDARY MEMBRANE | 1/1/2007 | $51.38 | 3 |
| F | 66821 | DISCISSION OF SECONDARY MEMBRANO | 1/1/2007 | $34.05 | 3 |
| F | 66840 | REMOVAL OF LENS MATERIAL; ASPIRA | 1/1/2007 | $78.73 | 3 |
| F | 66983 | INTRACAPSULAR CATARACT EXTRACTIO | 1/1/2007 | $79.15 | 3 |
| F | 66984 | EXTRACAPSULAR CATARACT REM W/INS | 1/1/2007 | $93.63 | 3 |
| F | 67311 | STRABISMUS SURG,RECESSION OR RES | 1/1/2007 | $67.73 | 3 |
| F | 67312 | STRABISMUS SURG,RECESSION OR RES | 1/1/2007 | $81.64 | 3 |
| F | 67314 | STRABISMUS SURGERY, RECESSION OR | 1/1/2007 | $75.10 | 3 |
| F | 67316 | STRABISMUS SURGERY, RECESSION OR | 1/1/2007 | $91.66 | 3 |
| F | 67318 | STRABISMUS SURGERY, ANY PROC (PA | 1/1/2007 | $78.89 | 3 |
| F | 67320 | TRANSPOSITION PROC(EG,FOR PARETI | 1/1/2007 | $33.74 | 3 |
| F | 67331 | STRABISMUS SURG ON PATIENT W/PRE | 1/1/2007 | $31.66 | 3 |
| F | 67332 | STRABISMUS SURG ON PATIENT W/SCA | 1/1/2007 | $34.98 | 3 |
| F | 67334 | STRABISMUS SURGERY BY POSTERIOR | 1/1/2007 | $30.98 | 3 |
| F | 67340 | STRABISMUS SURGERY INVOLVING EXP | 1/1/2007 | $38.30 | 3 |
| F | 67343 | RELEASE OF EXTENSIVE SCAR TISSUE | 1/1/2007 | $73.91 | 3 |
| F | 67820 | CORRECTION OF TRICHIASIS; EPILAT | 1/1/2007 | $39.70 | 3 |
| F | 67904 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 1/1/2007 | $84.70 | 3 |
| F | 68761 | CLOSURE OF THE LACRIMAL PUNCTUM; | 1/1/2007 | $96.02 | 3 |
| F | 92002 | OPHTHALMOLOGICAL SERVICES MEDICA | 1/1/2007 | $48.53 | 3 |
| F | 92004 | COMPREHENSIVE NEW PATIENT ONE OR | 1/1/2007 | $88.49 | 3 |
| F | 92012 | OPHTHALMOLOGICAL SERVICES MEDICA | 1/1/2007 | $44.63 | 3 |
| F | 92014 | COMPREHENSIVE ESTABLISHED PATIEN | 1/1/2007 | $65.91 | 3 |
| F | 92015 | DETERMINATION OF REFRACTIVE STAT | 1/1/2007 | $48.79 | 3 |
| F | 92020 | GONIOSCOPY (SEPARATE PROCEDURE) | 1/1/2007 | $18.68 | 3 |
| F | 92060 | SENSORIMOTOR EXAM W/MULTIPLE MEA | 1/1/2007 | $37.63 | 3 |
| F | 92065 | ORTHOPTIC AND/OR PLEOPTIC TRAINI | 1/1/2007 | $23.87 | 3 |
| F | 92070 | FITTING OF CONTACT LENS FOR TREA | 1/1/2007 | $46.45 | 3 |
| F | 92081 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $34.25 | 3 |
| F | 92082 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $43.86 | 3 |
| F | 92083 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $50.60 | 3 |
| F | 92100 | SERIAL TONOMETRY W/MULTIPLE MEAS | 1/1/2007 | $59.43 | 3 |
| F | 92120 | TONOGRAPHY W/INTERPRETATION AND | 1/1/2007 | $49.31 | 3 |
| F | 92130 | TONOGRAPHY WITH WATER PROVOCATIO | 1/1/2007 | $54.75 | 3 |
| F | 92135 | SCANNING COMPUTERIZED OPHTHALMIC | 1/1/2007 | $30.10 | 3 |
| F | 92140 | PROVOCATIVE TESTS FOR GLAUCOMA, | 1/1/2007 | $38.93 | 3 |
| F | 92225 | OPHTHALMOSCOPY, EXTENDED, W/RETI | 1/1/2007 | $15.83 | 3 |
| F | 92226 | SUBSEQUENT | 1/1/2007 | $14.27 | 3 |
| F | 92235 | FLUORESCEIN ANGIOGRAPHY (INCLUDE | 1/1/2004 | $99.13 | 3 |
| F | 92250 | FUNDUS PHOTOGRAPHY WITH INTERPRE | 1/1/2007 | $51.64 | 3 |
| F | 92260 | WITH OPHTHALMODYNAMOMETRY | 1/1/2007 | $12.20 | 3 |
| F | 92265 | OCULOELECTROMYOGRAPHY ONE OR MOR | 1/1/2007 | $61.24 | 3 |
| F | 92270 | ELECTRO-OCULOGRAPHY WITH MEDICAL | 1/1/2007 | $62.02 | 3 |
| F | 92275 | ELECTRORETINOGRAPHY WITH MEDICAL | 1/1/2007 | $77.85 | 3 |
| F | 92283 | COLOR VISION EXAMINATION EXTENDE | 1/1/2007 | $26.73 | 3 |
| F | 92284 | DARK ADAPTATION EXAMINATION WITH | 1/1/2007 | $55.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| F | 92285 | EXTERNAL OCULAR PHOTOGRAPHY W/IN | 1/1/2007 | $31.40 | 3 |
| F | 92286 | SPECIAL ANTERIOR SEGMENT PHOTOGR | 1/1/2007 | $97.57 | 3 |
| F | 92310 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2007 | $60.46 | 3 |
| F | 92311 | CORNEAL LENS FOR APHAKIA ONE EYE | 1/1/2007 | $57.09 | 3 |
| F | 92312 | CORNEAL LENS FOR APHAKIA BOTH EY | 1/1/2007 | $61.50 | 3 |
| F | 92313 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| F | 92314 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| F | 92315 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| F | 92316 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| F | 92317 | PRESCRIPTION OF OPTICAL AND PHYS | 1/1/2003 | NC | 9 |
| F | 92325 | MODIFICATION OF CONTACT LENS (SE | 1/1/2007 | $10.64 | 3 |
| F | 92330 | PRESCRIPTION FITTING AND SUPPLY | 1/1/2006 | INVALID | N |
| F | 92335 | PRESCRIPTION OF OCULAR PROSTHESI | 1/1/2006 | INVALID | N |
| F | 92340 | FITTING OF SPECTACLES, EXCEPT FO | 2/1/2001 | $25.00 | 3 |
| F | 92341 | FITTING OF SPECTACLES, EXCEPT FO | 2/1/2001 | $25.00 | 3 |
| F | 92342 | FITTING OF SPECTACLES, EXCEPT FO | 2/1/2001 | $25.00 | 3 |
| F | 92352 | FITTING OF SPECTACLE PROSTHESIS | 2/1/2001 | $25.00 | 3 |
| F | 92353 | FITTING OF SPECTACLE PROSTHESIS | 2/1/2001 | $25.00 | 3 |
| F | 92354 | FITTING OF SPECTACLE MOUNTED LOW | 12/15/1989 | NC | 9 |
| F | 92355 | FITTING OF SPECTACLE MOUNTED LOW | 12/15/1989 | NC | 9 |
| F | 92358 | PROSTHESIS SERVICE FOR APHAKIA T | 1/1/2007 | $26.47 | 3 |
| F | 92370 | REPAIR AND REFITTING SPECTACLES | 1/1/2007 | $23.10 | 3 |
| F | 92371 | SPECTACLE PROSTHESIS FOR APHAKIA | 1/1/2007 | $16.61 | 3 |
| F | 92390 | SUPPLY OF SPECTACLES EXCEPT PROS | 1/1/2006 | INVALID | N |
| F | 92391 | SUPPLY OF CONTACT LENSES EXCEPT | 1/1/2006 | INVALID | N |
| F | 92392 | SUPPLY OF LOW VISION AIDS (A LOW | 1/1/2006 | INVALID | N |
| F | 92393 | SUPPLY OF OCULAR PROSTHESIS (ART | 1/1/2006 | INVALID | N |
| F | 92395 | SUPPLY OF PERMANENT PROSTHESIS F | 1/1/2006 | INVALID | N |
| F | 92396 | SUPPLY OF PERMANENT PROSTHESIS F | 1/1/2006 | INVALID | N |
| F | 92499 | UNLISTED OPHTHALMOLOGICAL SERVIC | 2/1/1994 | $0.01 | 5 |
| F | 92504 | BINOCULAR MICROSCOPY (SEPARATE D | 1/1/2007 | $17.91 | 3 |
| F | 95930 | VISUAL EVOKED POTENTIAL (VEP) TE | 1/1/2007 | $68.25 | 3 |
| F | 99000 | HANDLING AND/OR CONVEYANCE OF SP | 8/1/1989 | NC | 9 |
| F | 99001 | HANDLING AND/OR CONVEYANCE OF SP | 8/1/1989 | NC | 9 |
| F | 99002 | HANDLING, CONVEYANCE, AND/OR ANY | 4/1/1982 | NC | 9 |
| F | 99024 | POSTOPERATIVE FOLLOWUP CARE | 4/1/1982 | NC | 9 |
| F | 99025 | INITIAL (NEW PATIENT) VISIT WHEN | 4/1/2004 | INVALID | N |
| F | 99050 | SERVICES PROVIDED IN THE OFFICE | 10/1/2000 | $11.71 | 3 |
| F | 99052 | SERVICES REQUESTED BETWEEN 10:00 | 1/1/2006 | INVALID | N |
| F | 99054 | SERVICES REQUESTED ON SUNDAYS AN | 1/1/2006 | INVALID | N |
| F | 99056 | SVCS TYPICALLY PROVIDED IN THE O | 7/1/1989 | NC | 9 |
| F | 99058 | SVCS PROVIDED ON AN EMERGENCY BA | 10/1/2000 | $4.71 | 3 |
| F | 99071 | EDUCATIONAL SUPPLIES SUCH AS BOO | 10/1/2004 | NC | 9 |
| F | 99075 | MEDICAL TESTIMONY | 10/1/2004 | NC | 9 |
| F | 99078 | PHYSICIAN EDUCATIONAL SERVICES R | 10/1/2005 | NC | 9 |
| F | 99082 | UNUSUAL TRAVEL (EG TRANSPORTATIO | 8/1/1989 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| F | 99090 | ANALYSIS OF CLINICAL DATA STORED | 8/1/1989 | NC | 9 |
| F | 99172 | VISUAL FUNCTION SCREENING, AUTOM | 10/1/2002 | $85.64 | 3 |
| F | 99173 | SCREENING TEST OF VISUAL ACUITY, | 1/1/2004 | $7.27 | 3 |
| F | 99201 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $25.17 | 3 |
| F | 99202 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $44.63 | 3 |
| F | 99203 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $66.43 | 3 |
| F | 99204 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $93.94 | 3 |
| F | 99205 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $119.37 | 3 |
| F | 99211 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $14.79 | 3 |
| F | 99212 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $26.47 | 3 |
| F | 99213 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $36.07 | 3 |
| F | 99214 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $56.57 | 3 |
| F | 99215 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $82.26 | 3 |
| F | 99241 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $34.51 | 3 |
| F | 99242 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $63.06 | 3 |
| F | 99243 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $84.08 | 3 |
| F | 99244 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $118.59 | 3 |
| F | 99245 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $153.36 | 3 |
| F | 99251 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $24.65 | 3 |
| F | 99252 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $49.56 | 3 |
| F | 99253 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $67.73 | 3 |
| F | 99254 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $97.31 | 3 |
| F | 99255 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $134.16 | 3 |
| F | 99261 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| F | 99262 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| F | 99263 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| F | 99271 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| F | 99272 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| F | 99273 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| F | 99274 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| F | 99275 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| F | 99301 | E/M OF NEW OR EST PT INVOLVING A | 1/1/2006 | INVALID | N |
| F | 99302 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| F | 99303 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| F | 99311 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| F | 99312 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| F | 99313 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| F | 99321 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| F | 99322 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| F | 99323 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| F | 99331 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| F | 99332 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| F | 99333 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| F | 99341 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $39.96 | 3 |
| F | 99342 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $58.91 | 3 |
| F | 99343 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $85.89 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| F | 99455 | WORK RELATED OR MEDICAL DISABILI | 4/1/2003 | $151.02 | 3 |
| F | 99456 | WORK RELATED OR MEDICAL DISABILI | 4/1/2003 | $151.02 | 3 |
| F | A4262 | TEMPORARY, ABSORBABLE LACRIMAL D | 10/1/2000 | $1.08 | 3 |
| F | A4263 | PERMANENT, LONG-TERM, NONDISSOLV | 10/1/2000 | $46.51 | 3 |
| F | G0117 | GLAUCOMA SCREENING FOR HIGH RISK | 1/1/2007 | $30.62 | 3 |
| F | G0167 | HYPERBARIC OXYGEN TREATMENT NOT | 4/1/2004 | INVALID | N |
| F | Q1001 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2006 | INVALID | N |
| F | Q1002 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2006 | INVALID | N |
| F | Q1003 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2000 | NC | 9 |
| F | Q1004 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2000 | NC | 9 |
| F | Q1005 | NEW TECHNOLOGY INTRAOCULAR LENS | 1/1/2000 | NC | 9 |
| F | S0515 | SCLERAL LENS, LIQUID BANDAGE DEV | 1/1/2005 | NC | 9 |
| F | S9981 | COPIES OF ALL EXISTING OFFICE RE | 4/1/2002 | $18.00 | 3 |
| F | V2100 | SPHERE, SINGLE VISION, PLANO TO | 11/1/2003 | $7.10 | 3 |
| F | V2101 | SPHERE, SINGLE VISION, PLUS OR M | 11/1/2003 | $8.58 | 3 |
| F | V2102 | SPHERE, SINGLE VISION, PLUS OR M | 11/1/2003 | $13.71 | 3 |
| F | V2103 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $7.10 | 3 |
| F | V2104 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $8.53 | 3 |
| F | V2105 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $11.75 | 3 |
| F | V2106 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $14.75 | 3 |
| F | V2107 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $8.69 | 3 |
| F | V2108 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $10.30 | 3 |
| F | V2109 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $13.30 | 3 |
| F | V2110 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $16.30 | 3 |
| F | V2111 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $15.95 | 3 |
| F | V2112 | SPHEROCYLINDER, SINGLE VISION, P | 11/1/2003 | $16.55 | 3 |
| F | V2113 | SPHEROCYLINDER, SGL VISION, + OR | 11/1/2003 | $19.47 | 3 |
| F | V2114 | SPHEROCYLINDER, SINGLE VISION, S | 11/1/2003 | $26.22 | 3 |
| F | V2115 | LENTICULAR, (MYODISC), PER LENS, | 11/1/2003 | $22.04 | 3 |
| F | V2116 | LENTICULAR LENS, NONASPHERIC, PE | 4/1/2004 | INVALID | N |
| F | V2117 | LENTICULAR, ASPHERIC, PER LENS, | 4/1/2004 | INVALID | N |
| F | V2199 | NOC SINGLE VISION LENS (PER LENS | 7/1/2002 | $175.00 | 3 |
| F | V2200 | SPHERE, BIFOCAL, PLANO TO PLUS O | 11/1/2003 | $9.30 | 3 |
| F | V2201 | SPHERE, BIFOCAL, PLUS OR MINUS 4 | 11/1/2003 | $11.27 | 3 |
| F | V2202 | SPHERE, BIFOCAL, PLUS OR MINUS 7 | 11/1/2003 | $16.00 | 3 |
| F | V2203 | SPHEROCYLINDER, BIFOCAL, PLANO T | 11/1/2003 | $9.30 | 3 |
| F | V2204 | SPHEROCYLINDER, BIFOCAL, PLANO T | 11/1/2003 | $10.80 | 3 |
| F | V2205 | SPHEROCYLINDER, BIFOCAL, PLANO T | 11/1/2003 | $13.80 | 3 |
| F | V2206 | SPHEROCYLINDER, BIFOCAL, PLANO T | 11/1/2003 | $16.91 | 3 |
| F | V2207 | SPHEROCYLINDER, BIFOCAL, PLUS OR | 11/1/2003 | $10.86 | 3 |
| F | V2208 | SPHEROCYLINDER, BIFOCAL, PLUS OR | 11/1/2003 | $12.36 | 3 |
| F | V2209 | SPHEROCYLINDER, BIFOCAL, PLUS OR | 11/1/2003 | $15.48 | 3 |
| F | V2210 | SPHEROCYLINDER, BIFOCAL, PLUS OR | 11/1/2003 | $18.48 | 3 |
| F | V2211 | SPHEROCYLINDER, BIFOCAL, PLUS OR | 11/1/2003 | $11.33 | 3 |
| F | V2212 | SPHEROCYLINDER, BIFOCAL, PLUS OR | 11/1/2003 | $12.83 | 3 |
| F | V2213 | SPHEROCYLINDER, BIFOCAL, PLUS OR | 11/1/2003 | $15.83 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| F | V2214 | SPHEROCYLINDER, BIFOCAL, SPHERE | 11/1/2003 | $11.33 | 3 |
| F | V2216 | LENTICULAR, NONASPHERIC, PER LEN | 4/1/2004 | INVALID | N |
| F | V2217 | LENTICULAR, ASPHERIC LENS, BIFOC | 4/1/2004 | INVALID | N |
| F | V2219 | BIFOCAL SEG WIDTH OVER 28MM | 6/18/1993 | NC | 9 |
| F | V2220 | BIFOCAL ADD OVER 3.25D | 11/1/2003 | $5.25 | 3 |
| F | V2299 | SPECIALTY BIFOCAL (PER LENS), GL | 1/1/2005 | NC | 9 |
| F | V2300 | SPHERE, TRIFOCAL, PLANO TO PLUS | 11/1/2003 | $13.81 | 3 |
| F | V2301 | SPHERE, TRIFOCAL, PLUS OR MINUS | 11/1/2003 | $15.31 | 3 |
| F | V2302 | SPHERE, TRIFOCAL, PLUS OR MINUS | 11/1/2003 | $38.92 | 3 |
| F | V2303 | SPHEROCYLINDER, TRIFOCAL, PLANO | 11/1/2003 | $13.81 | 3 |
| F | V2304 | SPHEROCYLINDER, TRIFOCAL, PLANO | 11/1/2003 | $15.31 | 3 |
| F | V2305 | SPHEROCYLINDER, TRIFOCAL, PLANO | 11/1/2003 | $18.31 | 3 |
| F | V2306 | SPHEROCYLINDER, TRIFOCAL, PLANO | 11/1/2003 | $21.31 | 3 |
| F | V2307 | SPHEROCYLINDER, TRIFOCAL, PLUS/M | 11/1/2003 | $15.31 | 3 |
| F | V2308 | SPHEROCYLINDER, TRIFOCAL, PLUS/M | 11/1/2003 | $16.81 | 3 |
| F | V2309 | SPHEROCYLINDER, TRIFOCAL, PLUS/M | 11/1/2003 | $19.81 | 3 |
| F | V2310 | SPHEROCYLINDER, TRIFOCAL, PLUS/M | 11/1/2003 | $22.81 | 3 |
| F | V2311 | SPHEROCYLINDER, TRIFOCAL, PLUS/M | 11/1/2003 | $34.42 | 3 |
| F | V2312 | SPHEROCYLINDER, TRIFOCAL, PLUS/M | 11/1/2003 | $35.92 | 3 |
| F | V2313 | SPHEROCYLINDER, TRIFOCAL, PLUS/M | 11/1/2003 | $38.92 | 3 |
| F | V2314 | SPHEROCYLINDER, TRIFOCAL, SPHERE | 11/1/2003 | $11.66 | 3 |
| F | V2315 | LENTICULAR, (MYODISC), PER LENS, | 6/18/1993 | NC | 9 |
| F | V2316 | LENTICULAR, NONASPHERIC, PER LEN | 4/1/2004 | INVALID | N |
| F | V2317 | LENTICULAR, ASPHERIC LENS, TRIFO | 4/1/2004 | INVALID | N |
| F | V2319 | TRIFOCAL SEG WIDTH OVER 28MM | 6/18/1993 | NC | 9 |
| F | V2320 | TRIFOCAL ADD OVER 3.25D | 11/1/2003 | $5.25 | 3 |
| F | V2399 | SPECIALTY TRIFOCAL (PER LENS), G | 7/15/1996 | $170.00 | 3 |
| F | V2500 | CONTACT LENS, PMA, SPHERICAL, PE | 1/1/2005 | $150.00 | 3 |
| F | V2510 | GAS PERMEABLE, SPERICAL, PER LEN | 2/1/2002 | $150.00 | 3 |
| F | V2511 | GAS PERMEABLE, TORIC, PRISM BALL | 7/1/2004 | $150.00 | 3 |
| F | V2520 | HYDROPHILIC, SPERICAL, PER LENS | 7/1/2004 | $180.00 | 3 |
| F | V2521 | HYDROPHILIC, TORIC OR PRISM BALL | 7/1/2004 | $150.00 | 3 |
| F | V2615 | TELESCOPIC AND OTHER COMPOUND LE | 1/4/2007 | NC | 9 |
| G | 90849 | MULTIPLE-FAMILY GROUP | 10/1/2003 | $41.28 | 3 |
| G | 90887 | INTERPRETATION OR EXPLANATION OF | 10/1/2003 | $41.26 | 3 |
| G | 97780 | ACUPUNCTURE WITHOUT ELECTRICAL S | 1/1/2005 | INVALID | N |
| G | 97781 | ACUPUNCTURE WITH ELECTRICAL STIM | 1/1/2005 | INVALID | N |
| G | 97810 | ACUPUNCTURE, ONE OR MORE NEEDLE( | 1/1/2005 | $13.74 | 3 |
| G | 97811 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2005 | $6.87 | 3 |
| G | 97813 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2005 | $13.74 | 3 |
| G | 97814 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2005 | $6.87 | 3 |
| G | H0001 | ALCOHOL AND/OR DRUG ASSESSMENT | 10/1/2003 | $165.04 | 3 |
| G | H0002 | BEHAVIORAL HEALTH SCREENING TO D | 10/1/2003 | $82.52 | 3 |
| G | H0004 | BEHAVIORAL HEALTH COUNSELING AND | 10/1/2003 | $20.63 | 3 |
| G | H0005 | ALCOHOL AND/OR DRUG SERVICES; GR | 10/1/2003 | $41.28 | 3 |
| G | H0006 | ALCOHOL AND/OR DRUG CASE MANAGEM | 1/1/2003 | $0.01 | P |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| G | H0012 | ALCOHOL AND/OR DRUG SERVICES; SU | 1/1/2003 | $0.01 | P |
| G | H0015 | ALCOHOL AND/OR DRUG SERVICES; IN | 7/1/2004 | $0.01 | 1 |
| G | H0016 | ALCOHOL AND/OR DRUG SERVICES; ME | 10/1/2003 | $102.85 | 3 |
| G | H0020 | ALCOHOL AND/OR DRUG SERVICES; ME | 10/1/2003 | $4.95 | 3 |
| G | H0033 | ORAL MEDICATION ADMINISTRATION, | 10/1/2003 | $8.30 | 3 |
| G | H0048 | ALCOHOL AND/OR OTHER DRUG TESTIN | 10/1/2003 | $11.08 | 3 |
| G | H0049 | ALCOHOL AND/OR DRUG SCREENING | 1/1/2007 | NC | 9 |
| G | H0050 | ALCOHOL AND/OR DRUG SERVICES, BR | 1/1/2007 | NC | 9 |
| G | H2035 | ALCOHOL AND/OR OTHER DRUG TREATM | 7/15/2004 | $0.01 | 1 |
| G | J3490 | UNCLASSIFIED DRUG - BILLING MUST | 10/1/2003 | $2,950.00 | 3 |
| G | T1006 | ALCOHOL AND/OR OTHER SUBSTANCE A | 10/1/2003 | $123.78 | 3 |
| G | T1013 | SIGN LANGUAGE OR ORAL INTERPRETI | 10/1/2003 | $7.42 | 3 |
| G | T1502 | ADMINISTRATION OF ORAL MEDICATIO | 7/1/2004 | $5.00 | 1 |
| H | 10121 | INCISION AND REMOVAL OF FOREIGN | 7/1/2003 | $363.00 | 3 |
| H | 10180 | INCISION AND DRAINAGE, COMPLEX, | 7/1/2002 | $363.00 | 3 |
| H | 11010 | DEBRIDEMENT INCLUDING REMOVAL OF | 7/1/2003 | $363.00 | 3 |
| H | 11011 | DEBRIDEMENT INCLUDING REMOVAL OF | 7/1/2003 | $363.00 | 3 |
| H | 11012 | DEBRIDEMENT INCLUDING REMOVAL OF | 7/1/2003 | $363.00 | 3 |
| H | 11042 | DEBRIDEMENT; SKIN AND SUBCUTANEO | 7/1/1997 | $363.00 | 3 |
| H | 11043 | DEBRIDEMENT; SKIN SUBCUTANEOUS T | 7/1/1997 | $363.00 | 3 |
| H | 11044 | DEBRIDEMENT; SKIN SUBCUTANEOUS T | 7/1/1997 | $363.00 | 3 |
| H | 11200 | REMOVAL OF SKIN TAGS, MULTIPLE F | 1/1/1984 | NC | 9 |
| H | 11201 | EXCISION SKIN TAGS MULTIPLE FIBR | 1/1/1984 | NC | 9 |
| H | 11404 | EXCISION, BENIGN LESION INCL MAR | 7/1/1997 | $271.00 | 3 |
| H | 11406 | EXCISION, BENIGN LESION INCL MAR | 7/1/1997 | $363.00 | 3 |
| H | 11424 | EXCISION, BENIGN LESION INC MARG | 7/1/1997 | $363.00 | 3 |
| H | 11426 | EXCISION, BENIGN LESION INC MARG | 7/1/1997 | $363.00 | 3 |
| H | 11444 | EXCISION OTHER BENIGN LESION FAC | 7/1/1997 | $271.00 | 3 |
| H | 11446 | EXCISION OTHER BENIGN LESION FAC | 7/1/1997 | $363.00 | 3 |
| H | 11450 | EXCISION OF SKIN AND SUBCUTANEOU | 7/1/1997 | $363.00 | 3 |
| H | 11451 | EXCISION OF SKIN AND SUBCUTANEOU | 7/1/1997 | $363.00 | 3 |
| H | 11462 | EXCISION OF SKIN AND SUBCUTANEOU | 7/1/1997 | $363.00 | 3 |
| H | 11463 | EXCISION OF SKIN AND SUBCUTANEOU | 7/1/1997 | $363.00 | 3 |
| H | 11470 | EXCISION OF SKIN AND SUBCUTANEOU | 7/1/1997 | $363.00 | 3 |
| H | 11471 | EXCISION OF SKIN AND SUBCUTANEOU | 7/1/1997 | $363.00 | 3 |
| H | 11604 | EXCISION, MALIGNANT LESION INCL | 7/1/1997 | $363.00 | 3 |
| H | 11606 | EXCISION MALIGNANT LESION TRUNK | 7/1/1997 | $363.00 | 3 |
| H | 11624 | EXCISION MALIGNANT LESION SCALP | 7/1/1997 | $363.00 | 3 |
| H | 11626 | EXCISION MALIGNANT LESION SCALP | 7/1/1997 | $363.00 | 3 |
| H | 11644 | EXCISION MALIGNANT LESION FACE E | 7/1/1997 | $363.00 | 3 |
| H | 11646 | EXCISION MALIGNANT LESION FACE E | 7/1/1997 | $363.00 | 3 |
| H | 11770 | EXCISION OF PILONIDAL CYST OR SI | 7/1/1997 | $417.00 | 3 |
| H | 11771 | EXCISION OF PILONIDAL CYST OR SI | 7/1/1997 | $417.00 | 3 |
| H | 11772 | EXCISION OF PILONIDAL CYST OR SI | 7/1/1997 | $417.00 | 3 |
| H | 11920 | TATTOOING INTRADERMAL INTRODUCTI | 1/1/1984 | NC | 9 |
| H | 11921 | TATTOOING INTRADERMAL INTRODUCTI | 1/1/1984 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 11922 | TATTOOING INTRADERMAL INTRODUCTI | 1/1/1984 | NC | 9 |
| H | 11950 | SUBCUTANEOUS INJECTION OF "FILLI | 1/1/1984 | NC | 9 |
| H | 11951 | SUBCUTANEOUS INJECTION OF FILLIN | 1/1/1984 | NC | 9 |
| H | 11952 | SUBCUTANEOUS INJECTION OF FILLIN | 1/1/1984 | NC | 9 |
| H | 11954 | SUBCUTANEOUS INJECTION OF FILLIN | 1/1/1984 | NC | 9 |
| H | 11960 | INSERTION OF TISSUE EXPANDER(S) | 6/1/2005 | $363.00 | 3 |
| H | 11970 | REPLACEMENT OF TISSUE EXPANDER W | 7/1/1997 | $417.00 | 3 |
| H | 11971 | REMOVAL OF TISSUE EXPANDER(S) WI | 7/1/1997 | $271.00 | 3 |
| H | 12005 | SIMPLE REPAIR OF SUPERFICIAL WOU | 7/1/1997 | $363.00 | 3 |
| H | 12006 | SIMPLE REPAIR OF SUPERFICIAL WOU | 7/1/1997 | $363.00 | 3 |
| H | 12007 | SIMPLE REPAIR OF SUPERFICIAL WOU | 7/1/1997 | $363.00 | 3 |
| H | 12016 | 12.5 CM TO 20.0 CM | 7/1/1997 | $363.00 | 3 |
| H | 12017 | SIMPLE REPAIR OF SUPERFICIAL WOU | 7/1/1997 | $363.00 | 3 |
| H | 12018 | SIMPLE REPAIR OF SUPERFICIAL WOU | 7/1/1997 | $363.00 | 3 |
| H | 12020 | TREATMENT OF SUPERFICIAL WOUND D | 7/1/1997 | $271.00 | 3 |
| H | 12021 | TREATMENT OF SUPERFICIAL WOUND D | 7/1/1997 | $271.00 | 3 |
| H | 12034 | LAYER CLOSURE OF WOUNDS OF SCALP | 7/1/1997 | $363.00 | 3 |
| H | 12035 | LAYER CLOSURE OF WOUNDS OF SCALP | 7/1/1997 | $363.00 | 3 |
| H | 12036 | LAYER CLOSURE OF WOUNDS OF SCALP | 7/1/1997 | $363.00 | 3 |
| H | 12037 | LAYER CLOSURE OF WOUNDS OF SCALP | 7/1/1997 | $363.00 | 3 |
| H | 12044 | LAYER CLOSURE OF WOUNDS OF NECK | 7/1/1997 | $363.00 | 3 |
| H | 12045 | LAYER CLOSURE OF WOUNDS OF NECK | 7/1/1997 | $363.00 | 3 |
| H | 12046 | LAYER CLOSURE OF WOUNDS OF NECK | 7/1/1997 | $363.00 | 3 |
| H | 12047 | LAYER CLOSURE OF WOUNDS OF NECK | 7/1/1997 | $363.00 | 3 |
| H | 12054 | LAYER CLOSURE OF WOUNDS OF FACE | 7/1/1997 | $363.00 | 3 |
| H | 12055 | LAYER CLOSURE OF WOUNDS OF FACE | 7/1/1997 | $363.00 | 3 |
| H | 12056 | LAYER CLOSURE OF WOUNDS OF FACE | 7/1/1997 | $363.00 | 3 |
| H | 12057 | LAYER CLOSURE OF WOUNDS OF FACE | 7/1/1997 | $363.00 | 3 |
| H | 13100 | REPAIR COMPLEX TRUNK 1.0 CM TO 2 | 7/1/1997 | $363.00 | 3 |
| H | 13101 | REPAIR COMPLEX TRUNK; 2.5 TO 7.5 | 7/1/1997 | $417.00 | 3 |
| H | 13120 | REPAIR COMPLEX SCALP ARMS AND/OR | 7/1/1997 | $363.00 | 3 |
| H | 13121 | REPAIR COMPLEX SCALP ARMS AND/OR | 7/1/1997 | $417.00 | 3 |
| H | 13131 | REPAIR COMPLEX FOREHEAD CHEEKS C | 7/1/1997 | $363.00 | 3 |
| H | 13132 | REPAIR COMPLEX FOREHEAD CHEEKS C | 7/1/1997 | $417.00 | 3 |
| H | 13150 | REPAIR COMPLEX EYELIDS NOSE EARS | 7/1/1997 | $417.00 | 3 |
| H | 13151 | REPAIR COMPLEX EYELIDS NOSE EARS | 7/1/1997 | $417.00 | 3 |
| H | 13152 | REPAIR VOMPLEX EYELIDS NOSE EARS | 7/1/1997 | $417.00 | 3 |
| H | 13160 | SECONDARY CLOSURE OF SURGICAL WO | 7/1/1997 | $363.00 | 3 |
| H | 14000 | ADJACENT TISSUE TRANSFER OR REAR | 5/1/2005 | $363.00 | 3 |
| H | 14001 | ADJACENT TISSUE TRANSFER OR REAR | 7/1/1997 | $417.00 | 3 |
| H | 14020 | ADJACENT TISSUE TRANSFER OR REAR | 7/1/1997 | $417.00 | 3 |
| H | 14021 | ADJACENT TISSUE TRANSFER OR REAR | 7/1/1997 | $417.00 | 3 |
| H | 14040 | ADJ TISSUE TRANS OR REARRANGE, F | 7/1/1997 | $363.00 | 3 |
| H | 14041 | ADJ TISSUE TRANS OR REARRANGE, F | 7/1/1997 | $417.00 | 3 |
| H | 14060 | ADJACENT TISSUE TRANSFER OR REAR | 7/1/1997 | $417.00 | 3 |
| H | 14061 | ADJACENT TISSUE TRANSFER OR REAR | 7/1/1997 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 14300 | ADJACENT TISSUE TRANSFER OR REAR | 7/1/1997 | $513.00 | 3 |
| H | 14350 | FILLETED FINGER OR TOE FLAP INCL | 7/1/1997 | $417.00 | 3 |
| H | 15000 | SURGICAL PREP OF RECIP SITE BY E | 1/1/2007 | INVALID | N |
| H | 15001 | SURGICAL PREP OF RECIP SITE BY E | 1/1/2007 | INVALID | N |
| H | 15002 | SURGICAL PREP OR CREATION OF REC | 1/1/2007 | $363.00 | 3 |
| H | 15003 | SURGICAL PREP OR CREATION OF REC | 1/1/2007 | $271.00 | 3 |
| H | 15004 | SURG PREP OR CREATION OF RECIP S | 1/1/2007 | $363.00 | 3 |
| H | 15005 | SURG PREP OR CREATION OF RECIP S | 1/1/2007 | $271.00 | 3 |
| H | 15040 | HARVEST OF SKIN FOR TISSUE CULTU | 10/1/2006 | $363.00 | 3 |
| H | 15050 | PINCH GRAFT, SING OR MULT, TIP O | 7/1/1997 | $363.00 | 3 |
| H | 15100 | SPLIT-THICKNESS AUTOGRAFT, TRUNK | 7/1/1997 | $363.00 | 3 |
| H | 15101 | SPLIT GRAFT, TRUNK, ARMS, LEGS; | 11/1/2006 | $363.00 | 3 |
| H | 15110 | EPIDERMAL AUTOGRAFT, TRUNK, ARMS | 10/1/2006 | $363.00 | 3 |
| H | 15111 | EPIDERMAL AUTOGRAFT, TRUNK, ARMS | 10/1/2006 | $271.00 | 3 |
| H | 15115 | EPIDERMAL AUTOGRAFT, FACE, SCALP | 10/1/2006 | $363.00 | 3 |
| H | 15116 | EPIDERMAL AUTOGRAFT, FACE, SCALP | 10/1/2006 | $271.00 | 3 |
| H | 15120 | SPLIT-THICKNESS AUTOGRAFT, FACE, | 7/1/1997 | $363.00 | 3 |
| H | 15121 | SPLIT GRAFT, FACE, SCALP, EYELID | 11/1/2006 | $363.00 | 3 |
| H | 15130 | DERMAL AUTOGRAFT, TRUNK, ARMS, L | 10/1/2006 | $363.00 | 3 |
| H | 15131 | DERMAL AUTOGRAFT, TRUNK, ARMS, L | 10/1/2006 | $271.00 | 3 |
| H | 15135 | DERMAL AUTOGRAFT, FACE, SCALP, E | 10/1/2006 | $363.00 | 3 |
| H | 15136 | DERMAL AUTOGRAFT, FACE, SCALP, E | 10/1/2006 | $271.00 | 3 |
| H | 15150 | TISSUE CULTURED EPIDERMAL AUTOGR | 10/1/2006 | $363.00 | 3 |
| H | 15151 | TISSUE CULTURED EPIDERMAL AUTOGR | 10/1/2006 | $271.00 | 3 |
| H | 15152 | TISSUE CULTUREED EPIDERMAL AUTOG | 1/1/2006 | $271.00 | 3 |
| H | 15155 | TISSUE CULTURED EPIDERMAL AUTOGR | 10/1/2006 | $363.00 | 3 |
| H | 15156 | TISSUE CULTURED EPIDERMAL AUTOGR | 10/1/2006 | $271.00 | 3 |
| H | 15157 | TISSUE CULTURED EPIDERMAL AUTOGR | 10/1/2006 | $271.00 | 3 |
| H | 15200 | FULL THICKNESS GRAFT, FREE,INC D | 7/1/1997 | $417.00 | 3 |
| H | 15201 | FULL THICKNESS GRAFT, FREE,INC D | 7/1/1997 | $363.00 | 3 |
| H | 15220 | FULL THICKNESS GRAFT FREE INCLUD | 7/1/1997 | $363.00 | 3 |
| H | 15221 | FULL THICKNESS GRAFT GREE INCLUD | 7/1/1997 | $363.00 | 3 |
| H | 15240 | FULL THICKNESS GRAFT, FREE, INC | 7/1/1997 | $417.00 | 3 |
| H | 15241 | FULL THICKNESS GRAFT, FREE, INC | 7/1/1997 | $417.00 | 3 |
| H | 15260 | FULL THICKNESS GRAFT FREE INCLUD | 7/1/1997 | $363.00 | 3 |
| H | 15261 | FULL THICK GRAFT FREE INC DIR CL | 7/1/1997 | $363.00 | 3 |
| H | 15300 | ALLOGRAFT SKIN FOR TEMPORARY WOU | 10/1/2006 | $363.00 | 3 |
| H | 15301 | ALLOGRAFT SKIN FOR TEMPORARY WOU | 10/1/2006 | $271.00 | 3 |
| H | 15320 | ALLOGRAFT SKIN FOR TEMPORARY WOU | 10/1/2006 | $363.00 | 3 |
| H | 15321 | ALLOGRAFT SKIN FOR TEMPORARY WOU | 10/1/2006 | $271.00 | 3 |
| H | 15330 | ACELLULAR DERMAL ALLOGRAFT, TRUN | 10/1/2006 | $363.00 | 3 |
| H | 15331 | ACELLULAR DERMAL ALLOGRAFT, TRUN | 10/1/2006 | $271.00 | 3 |
| H | 15335 | ACELLULAR DERMAL ALLOGRAFT, FACE | 10/1/2006 | $363.00 | 3 |
| H | 15336 | ACELLULAR DERMAL ALLOGRAFT, FACE | 10/1/2006 | $271.00 | 3 |
| H | 15350 | HOMOGRAFT SKIN | 1/1/2006 | INVALID | N |
| H | 15351 | APPLICATION OF ALLOGRAFT, SKIN; | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 15400 | XENOGRAFT, SKIN (DERMAL), FOR TE | 7/1/1997 | $363.00 | 3 |
| H | 15401 | XENOGRAFT, SKIN, FOR TEMP WOUND | 6/1/2005 | $363.00 | 3 |
| H | 15420 | XENOGRAFT SKIN (DERMAL), FOR TEM | 10/1/2006 | $363.00 | 3 |
| H | 15421 | XENOGRAFT SKIN (DERMAL), FOR TEM | 10/1/2006 | $271.00 | 3 |
| H | 15430 | ACELLULAR XENOGRAFT IMPLANT; 1ST | 10/1/2006 | $363.00 | 3 |
| H | 15431 | ACELLULAR XENOGRAFT IMPLANT; EA | 10/1/2006 | $271.00 | 3 |
| H | 15570 | FORMATION OF DIRECT OR TUBED PED | 7/1/1997 | $417.00 | 3 |
| H | 15572 | FORMATION OF DIRECT OR TUBED PED | 7/1/1997 | $417.00 | 3 |
| H | 15574 | FORMATION OF DIRECT OR TUBED PED | 7/1/1997 | $417.00 | 3 |
| H | 15576 | FORMATION OF DIRECT OR TUBED PED | 7/1/1997 | $417.00 | 3 |
| H | 15600 | DELAY OF FLAP OR SECTIONING OF F | 7/1/1997 | $417.00 | 3 |
| H | 15610 | INTER DEL OF ANY FLAP PRIM DEL O | 7/1/1997 | $417.00 | 3 |
| H | 15620 | INTER DEL OF ANY FLAP PRIM DEL O | 7/1/1997 | $513.00 | 3 |
| H | 15630 | INTER DELAY ANY FLAP PRIM DEL SM | 7/1/1997 | $417.00 | 3 |
| H | 15650 | TRANSFER INTERMEDIATE OF ANY PED | 7/1/1997 | $585.00 | 3 |
| H | 15731 | FOREHEAD FLAP WITH PRESERVATION | 1/1/2007 | $417.00 | 3 |
| H | 15732 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 7/1/1997 | $417.00 | 3 |
| H | 15734 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 7/1/1997 | $417.00 | 3 |
| H | 15736 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 7/1/1997 | $417.00 | 3 |
| H | 15738 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 7/1/1997 | $417.00 | 3 |
| H | 15740 | FLAP; ISLAND PEDICLE | 7/1/1997 | $363.00 | 3 |
| H | 15750 | FLAP; NEUROVASCULAR PEDICLE | 7/1/1997 | $363.00 | 3 |
| H | 15756 | FREE MUSCLE FLAP WITH OR WITHOUT | 1/1/1999 | $482.00 | 3 |
| H | 15757 | FREE SKIN FLAP WITH MICROVASCULA | 1/1/1999 | $482.00 | 3 |
| H | 15758 | FREE FASCIAL FLAP WITH MICROVASC | 1/1/1999 | $482.00 | 3 |
| H | 15760 | GRAFT;COMPOSITE (FULL THICKNESS | 7/1/1997 | $363.00 | 3 |
| H | 15770 | GRAFT; DERMA-FAT-FASCIA | 7/1/1997 | $417.00 | 3 |
| H | 15775 | PUNCH GRAFT FOR HAIR TRANSPLANT | 1/1/1984 | NC | 9 |
| H | 15776 | PUNCH GRAFT FOR HAIR GRAFT; MORE | 1/1/1984 | NC | 9 |
| H | 15780 | DERMABRASION; TOTAL FACE (EG, FO | 1/1/1984 | NC | 9 |
| H | 15781 | DERMABRASION; SEGMENTAL, FACE (E | 10/1/1984 | NC | 9 |
| H | 15782 | DERMABRASION; REGIONAL, OTHER TH | 10/1/1984 | NC | 9 |
| H | 15783 | DERMABRASION; SUPERFICIAL, ANY S | 3/1/1987 | NC | 9 |
| H | 15786 | ABRASION SINGLE LESION (EG KERAT | 1/1/1984 | NC | 9 |
| H | 15787 | ABRASION; EACH ADDITIONAL FOUR L | 1/1/1984 | NC | 9 |
| H | 15810 | SALABRASION UP TO 20 SQ CM | 1/1/2006 | INVALID | N |
| H | 15811 | SALABRASION; 20 SQ CM AND OVER | 1/1/2006 | INVALID | N |
| H | 15819 | CERVICOPLASTY | 10/1/1984 | NC | 9 |
| H | 15820 | BLEPHAROPLASTY LOWER EYELIDS | 1/1/1984 | NC | 9 |
| H | 15821 | BLEPHAROPLASTY LOWER EYELID; WIT | 1/1/1984 | NC | 9 |
| H | 15822 | BLEPHAROPLASTY, UPPER EYELID | 6/1/2005 | $417.00 | 3 |
| H | 15823 | BLEPHAROPLASTY, UPPER EYELID; WI | 6/1/2005 | $585.00 | 3 |
| H | 15824 | RHYTIDECTOMY FOREHEAD | 1/1/1984 | NC | 9 |
| H | 15825 | RHYTIDECTOMY; NECK WITH PLATYSMA | 10/1/1984 | NC | 9 |
| H | 15826 | RHYTIDECTOMY; GLABELLAR FROWN LI | 1/1/1984 | NC | 9 |
| H | 15828 | RHYTIDECTOMY; CHEEK CHIN AND NEC | 1/1/1984 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 15829 | RHYTIDECTOMY; SUPERFICIAL MUSCUL | 10/1/1984 | NC | 9 |
| H | 15830 | EXCISION, EXCESSIVE SKIN AND SUB | 1/1/2007 | NC | 9 |
| H | 15831 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/2007 | INVALID | N |
| H | 15832 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/1984 | NC | 9 |
| H | 15833 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/1984 | NC | 9 |
| H | 15834 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/1984 | NC | 9 |
| H | 15835 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/1984 | NC | 9 |
| H | 15837 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/1984 | NC | 9 |
| H | 15838 | EXCISION EXCESSIVE SKIN AND SUBC | 10/1/1984 | NC | 9 |
| H | 15839 | EXCISION EXCESSIVE SKIN AND SUBC | 10/1/1984 | NC | 9 |
| H | 15840 | GRAFT FOR FACIAL NERVE PARALYSIS | 7/1/1997 | $513.00 | 3 |
| H | 15841 | GRAFT FOR FACIAL NERVE PARALYSIS | 7/1/1997 | $513.00 | 3 |
| H | 15842 | GRAFT FOR FACIAL NERVE PARALYSIS | 7/1/1997 | $513.00 | 3 |
| H | 15845 | GRAFT FOR FACIAL NERVE PARALYSIS | 7/1/1997 | $513.00 | 3 |
| H | 15847 | EXCISION, EXCESSIVE SKIN AND SUB | 1/1/2007 | NC | 9 |
| H | 15920 | EXCISION, COCCYGEAL PRESSURE ULC | 7/1/1997 | $417.00 | 3 |
| H | 15922 | EXCISION, COCCYGEAL PRESSURE ULC | 7/1/1997 | $513.00 | 3 |
| H | 15931 | EXCISION SACRAL DECUBITUS ULCER | 7/1/1997 | $417.00 | 3 |
| H | 15933 | EXCISION SACRAL PRESSURE ULCER W | 7/1/1997 | $417.00 | 3 |
| H | 15934 | EXCISION,, SACRAL PRESSURE ULCER | 7/1/1997 | $417.00 | 3 |
| H | 15935 | EXCISION SACRAL PRESSURE ULCER W | 7/1/1997 | $513.00 | 3 |
| H | 15936 | EXCISION, SACRAL PRESSURE ULCER, | 7/1/1997 | $515.00 | 3 |
| H | 15937 | EXCISION SACRAL PRESSURE ULCER W | 7/1/1997 | $515.00 | 3 |
| H | 15940 | EXCISION ISCHIAL DECUBITUS ULCER | 7/1/1997 | $417.00 | 3 |
| H | 15941 | EXCISION, ISCHIAL PRESSURE ULCER | 7/1/1997 | $417.00 | 3 |
| H | 15944 | EXCISION, ISCHIAL PRESSURE ULCER | 7/1/1997 | $417.00 | 3 |
| H | 15945 | EXCISION ISCHIAL PRESSURE ULCER | 7/1/1997 | $513.00 | 3 |
| H | 15946 | EXCISION, ISCHIAL PRESSURE ULCER | 7/1/1997 | $513.00 | 3 |
| H | 15950 | EXCISION, TROCHANTERIC PRESSURE | 7/1/1997 | $417.00 | 3 |
| H | 15951 | EXCISION TROCHANTERIC PRESSURE U | 7/1/1997 | $513.00 | 3 |
| H | 15952 | EXCISION, TROCHANTERIC PRESSURE | 7/1/1997 | $417.00 | 3 |
| H | 15953 | EXCISION TROCHANTERIC PRESSURE U | 7/1/1997 | $513.00 | 3 |
| H | 15956 | EXCISION, TROCHANTERIC PRESSURE | 7/1/1997 | $417.00 | 3 |
| H | 15958 | EXCISION TROCHANTERIC PRESSURE U | 7/1/1997 | $513.00 | 3 |
| H | 16010 | DRESSINGS AND/OR DEBRIDEMENT INI | 1/1/2006 | INVALID | N |
| H | 16015 | DRESSINGS AND/OR DEBRIDEMENT INI | 1/1/2006 | INVALID | N |
| H | 16025 | DRESSINGS AND/OR DEBRIDEMENT OF | 10/1/2006 | $363.00 | 3 |
| H | 16030 | DRESSINGS AND/OR DEBRIDEMENT OF | 10/1/2006 | $363.00 | 3 |
| H | 16035 | ESCHAROTOMY; INITIAL INCISION | 7/1/1997 | $363.00 | 3 |
| H | 17380 | ELECTROLYSIS EPILATION EACH 1/2 | 1/1/1984 | NC | 9 |
| H | 17999 | UNLISTED PROCEDURE SKIN MUCOUS M | 4/1/1989 | $0.01 | 5 |
| H | 19020 | MASTOTOMY WITH EXPLORATION OR DR | 7/1/1997 | $363.00 | 3 |
| H | 19100 | BIOPSY OF BREAST; PERCUTANEOUS, | 6/1/2005 | $271.00 | 3 |
| H | 19101 | BIOPSY OF BREAST; OPEN, INCISION | 7/1/1997 | $363.00 | 3 |
| H | 19102 | BIOPSY OF BREAST; PERCUTANEOUS, | 7/1/2001 | $363.00 | 3 |
| H | 19103 | BIOPSY OF BREAST; PERCUTANEOUS, | 7/1/2001 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 19110 | NIPPLE EXPLORATION WITH OR WITHO | 7/1/1997 | $363.00 | 3 |
| H | 19112 | EXCISION OF LACTIFEROUS DUCT FIS | 6/1/2005 | $417.00 | 3 |
| H | 19120 | EXCISION OF CYST, FIBROADENOMA, | 7/1/1997 | $417.00 | 3 |
| H | 19125 | EXCISION OF BREAST LESION IDENTI | 7/1/1997 | $417.00 | 3 |
| H | 19126 | EXCISION OF BREAST LESION IDENTI | 6/1/2005 | $417.00 | 3 |
| H | 19140 | MASTECTOMY FOR GYNECOMASTIA THRO | 1/1/2007 | INVALID | N |
| H | 19160 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | INVALID | N |
| H | 19162 | MASTECTOMY PARTIAL (QUADRECTOMY | 1/1/2007 | INVALID | N |
| H | 19180 | MASTECTOMY, SIMPLE, COMPLETE | 1/1/2007 | INVALID | N |
| H | 19182 | MASTECTOMY SUBCUTANEOUS UNILATER | 1/1/2007 | INVALID | N |
| H | 19200 | MASTECTOMY RADICAL INCLUDING BRE | 1/1/2007 | INVALID | N |
| H | 19220 | MASTECTOMY RADICAL INCLUDING BRE | 1/1/2007 | INVALID | N |
| H | 19240 | MASTECTOMY,MODIFIED RAD,INCL AXI | 1/1/2007 | INVALID | N |
| H | 19260 | EXCISION OF CHEST WALL TUMOR INC | 7/1/1997 | $585.00 | 3 |
| H | 19290 | PREOPERATIVE PLACEMENT OF NEEDLE | 7/1/2002 | $271.00 | 3 |
| H | 19291 | PREOPERATIVE PLACEMENT OF NEEDLE | 6/1/2005 | $271.00 | 3 |
| H | 19296 | PLACEMENT OF RADIOTHERAPY AFTERL | 6/1/2005 | $900.00 | 3 |
| H | 19298 | PLACEMENT OF RADIOTHERAPY AFTERL | 6/1/2005 | $271.00 | 3 |
| H | 19301 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | $417.00 | 3 |
| H | 19302 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | $812.00 | 3 |
| H | 19303 | MASTECTOMY, SIMPLE, COMPLETE | 1/1/2007 | $513.00 | 3 |
| H | 19304 | MASTECTOMY, SUBCUTANEOUS | 1/1/2007 | $513.00 | 3 |
| H | 19316 | MASTOPEXY | 8/1/2003 | NC | 9 |
| H | 19318 | REDUCTION MAMMAPLASTY | 7/1/1997 | $513.00 | 3 |
| H | 19324 | MAMMAPLASTY, AUGMENTATION; WITHO | 7/1/2003 | $513.00 | 3 |
| H | 19325 | MAMMAPLASTY AUGMENTATION; WITH P | 1/1/2004 | $1,150.00 | 3 |
| H | 19328 | REMOVAL OF INTACT MAMMARY IMPLAN | 7/1/1997 | $271.00 | 3 |
| H | 19330 | REMOVAL OF MAMMARY IMPLANT MATER | 7/1/1997 | $271.00 | 3 |
| H | 19340 | IMMEDIATE INSERTION OF BREAST PR | 6/1/2005 | $363.00 | 3 |
| H | 19342 | DELAYED INSERTION OF BREAST PROS | 6/1/2005 | $417.00 | 3 |
| H | 19350 | RECONSTRUCTION OF NIPPLE AND/OR | 6/1/2005 | $513.00 | 3 |
| H | 19355 | CORRECTION OF INVERTED NIPPLES | 7/1/2003 | $513.00 | 3 |
| H | 19357 | BREAST RECONSTRUCTION, IMMEDIATE | 6/1/2005 | $585.00 | 3 |
| H | 19364 | BREAST RECONSTRUCTION WITH FREE | 1/1/2000 | $678.00 | 3 |
| H | 19366 | BREAST RECONSTRUCTION WITH OTHER | 6/1/2005 | $585.00 | 3 |
| H | 19370 | OPEN PERIPROSTHETIC CAPSULOTOMY, | 10/1/1984 | NC | 9 |
| H | 19371 | PERIPROSTHETIC CAPSULOTOMY, BREA | 6/1/2005 | $513.00 | 3 |
| H | 19380 | REVISION OF RECONSTRUCTED BREAST | 10/1/2004 | $585.00 | 3 |
| H | 19396 | PREPARATION OF MOULAGE FOR CUSTO | 10/1/1984 | NC | 9 |
| H | 20005 | INCISION OF SOFT TISSUE ABSCESS | 7/1/1997 | $363.00 | 3 |
| H | 20200 | BIOPSY MUSCLE SUPERFICIAL | 7/1/1997 | $363.00 | 3 |
| H | 20205 | BIOPSY MUSCLE; DEEP | 7/1/1997 | $417.00 | 3 |
| H | 20206 | BIOPSY MUSCLE PERCUTANEOUS NEEDL | 6/1/2005 | $271.00 | 3 |
| H | 20220 | BIOPSY BONE TROCAR OR NEEDLE SUP | 7/1/1997 | $271.00 | 3 |
| H | 20225 | BIOPSY, BONE, TROCAR, OR NEEDLE; | 7/1/1997 | $363.00 | 3 |
| H | 20240 | BIOPSY, BONE, OPEN; SUPERFICIAL | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 20245 | BIOPSY, BONE, OPEN; DEEP (EG, HU | 7/1/1997 | $417.00 | 3 |
| H | 20250 | BIOPSY, VERTEBRAL BODY, OPEN; TH | 7/1/1997 | $417.00 | 3 |
| H | 20251 | BIOPSY, VERTEBRAL BODY, OPEN; LU | 7/1/1997 | $417.00 | 3 |
| H | 20525 | REMOVAL OF FOREIGN BODY IN MUSCL | 7/1/1997 | $417.00 | 3 |
| H | 20650 | INSERTION OF WIRE OR PIN WITH AP | 7/1/1997 | $417.00 | 3 |
| H | 20660 | APPLICATION OF CRANIAL TONGS, CA | 7/1/1997 | $363.00 | 3 |
| H | 20661 | APPLICATION OF HALO, INCLUDING R | 7/1/1997 | $417.00 | 3 |
| H | 20662 | APPLICATION OF HALO INCLUDING RE | 7/1/1997 | $417.00 | 3 |
| H | 20663 | APPLICATION OF HALO INCLUDING RE | 7/1/1997 | $417.00 | 3 |
| H | 20665 | REMOVAL OF TONGS OR HALO APPLIED | 7/1/1997 | $271.00 | 3 |
| H | 20670 | REMOVAL OF IMPLANT SUPERFICIAL ( | 7/1/1997 | $271.00 | 3 |
| H | 20680 | REMOVAL OF IMPLANT; DEEP, (EG, B | 7/1/1997 | $417.00 | 3 |
| H | 20690 | APPLICATION OF A UNIPLANE (PINS | 7/1/1997 | $363.00 | 3 |
| H | 20692 | APPLICATION OF A MULTIPLANE (PIN | 6/1/2005 | $417.00 | 3 |
| H | 20693 | ADJUSTMENT OR REVISION OF EXTERN | 6/1/2005 | $417.00 | 3 |
| H | 20694 | REMOVAL, UNDER ANESTHESIA, OF EX | 7/1/1997 | $271.00 | 3 |
| H | 20900 | BONE GRAFT, ANY DONOR AREA; MINO | 7/1/1997 | $417.00 | 3 |
| H | 20902 | BONE GRAFT ANY DONOR AREA; MAJOR | 7/1/1997 | $513.00 | 3 |
| H | 20910 | CARTILAGE GRAFT; COSTOCHONDRAL | 6/1/2005 | $417.00 | 3 |
| H | 20912 | CARTILAGE GRAFT; NASAL SEPTUM | 7/1/1997 | $417.00 | 3 |
| H | 20920 | FASCIA LATA GRAFT; BY STRIPPER | 7/1/1997 | $513.00 | 3 |
| H | 20922 | FASCIA LATA GRAFT; BY INCISION A | 7/1/1997 | $417.00 | 3 |
| H | 20924 | TENDON GRAFT FROM A DISTANCE (EG | 7/1/1997 | $513.00 | 3 |
| H | 20955 | BONE GRAFT WITH MICROVASCULAR AN | 7/1/1997 | $513.00 | 3 |
| H | 20962 | BONE GRAFT WITH MICROVASCULAR AN | 7/1/1997 | $513.00 | 3 |
| H | 20969 | FREE OSTEOCUTANEOUS FLAP WITH MI | 7/1/1997 | $513.00 | 3 |
| H | 20970 | FREE OSTEOCUTANEOUS FLAP WITH MI | 7/1/1997 | $513.00 | 3 |
| H | 20972 | FREE OSTEOCUTANEOUS FLAP WITH MI | 7/1/1997 | $513.00 | 3 |
| H | 20973 | FREE OSTEOCUTANEOUS FLAP WITH MI | 7/1/1997 | $513.00 | 3 |
| H | 20975 | ELECTRICAL STIMULATION TO AID BO | 7/1/1997 | $363.00 | 3 |
| H | 21010 | ARTHROTOMY, TEMPOROMANDIBULAR JO | 7/1/1997 | $363.00 | 3 |
| H | 21015 | RADICAL RESECTION OF TUMOR (EG, | 6/1/2005 | $417.00 | 3 |
| H | 21025 | EXCISION OF BONE (EG, FOR OSTEOM | 7/1/1997 | $363.00 | 3 |
| H | 21026 | EXCISION OF BONE (EG, FOR OSTEOM | 7/1/1997 | $363.00 | 3 |
| H | 21029 | REMOVAL BY CONTOURING OF BENIGN | 7/1/2003 | $363.00 | 3 |
| H | 21034 | EXCISION OF MALIGNANT TUMOR OF M | 7/1/1997 | $417.00 | 3 |
| H | 21040 | EXCISION OF BENIGN TUMOR OR CYST | 7/1/1997 | $363.00 | 3 |
| H | 21041 | EXCISION OF BENIGN CYST OR TUMOR | 7/1/2003 | INVALID | N |
| H | 21044 | EXCISION OF MALIGNANT TUMOR OF M | 7/1/1997 | $363.00 | 3 |
| H | 21046 | EXCISION OF BENIGN TUMOR OR CYST | 7/1/2003 | $363.00 | 3 |
| H | 21047 | EXCISION OF BENIGN TUMOR OR CYST | 7/1/2003 | $363.00 | 3 |
| H | 21050 | CONDYLECTOMY, TEMPOROMANDIBULAR | 7/1/1997 | $417.00 | 3 |
| H | 21060 | MENISCECTOMY, PARTIAL OR COMPLET | 7/1/1997 | $363.00 | 3 |
| H | 21070 | CORONOIDECTOMY (SEPARATE PROCEDU | 7/1/1997 | $417.00 | 3 |
| H | 21100 | APPLICATION OF HALO TYPE APPLIAN | 7/1/1997 | $363.00 | 3 |
| H | 21120 | GENIOPLASTY; AUGMENTATION (AUTOG | 6/1/2005 | $812.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 21121 | GENIOPLASTY; SLIDING OSTEOTOMY, | 7/1/2003 | $812.00 | 3 |
| H | 21122 | GENIOPLASTY; SLIDING OSTEOTOMIES | 7/1/2003 | $812.00 | 3 |
| H | 21123 | GENIOPLASTY; SLIDING,AUGMENTATIO | 3/28/2005 | NC | 9 |
| H | 21127 | AUGMENTATION,MANDIBULAR BODY OR | 7/1/2003 | NC | 9 |
| H | 21181 | REMOVAL BY CONTOURING OF BENIGN | 7/1/2003 | $812.00 | 3 |
| H | 21206 | OSTEOTOMY,MAXILLA,SEGMENTAL (EG, | 7/1/1997 | $585.00 | 3 |
| H | 21208 | OSTEOPLASTY, FACIAL BONES; AUGME | 7/1/1997 | $812.00 | 3 |
| H | 21209 | OSTEOPLASTY, FACIAL BONES; REDUC | 7/1/1997 | $585.00 | 3 |
| H | 21210 | GRAFT BONE NASAL MAXILLARY AND M | 7/1/1997 | $812.00 | 3 |
| H | 21215 | GRAFT BONE; MANDIBLE (INCLUDES O | 7/1/1997 | $812.00 | 3 |
| H | 21230 | GRAFT RIB CARTILAGE AUTOGENOUS T | 7/1/1997 | $812.00 | 3 |
| H | 21235 | GRAFT;EAR CARTILAGE,AUTOGRAFT,TO | 7/1/1997 | $812.00 | 3 |
| H | 21240 | ARTHROPLASTY,TEMPOROMANDIBULAR J | 7/1/1997 | $513.00 | 3 |
| H | 21242 | ARTHROPLASTY, TEMPOROMANDIBULAR | 7/1/1997 | $585.00 | 3 |
| H | 21243 | ARTHROPLASTY, TEMPOROMANDIBULAR | 7/1/1997 | $585.00 | 3 |
| H | 21244 | RECONSTRUCTION OF MANDIBLE, EXTR | 7/1/1997 | $812.00 | 3 |
| H | 21245 | RECONSTRUCTION OF MANDIBLE OR MA | 7/1/1997 | $812.00 | 3 |
| H | 21246 | RECONSTRUCTION OF MANDIBLE OR MA | 7/1/1997 | $812.00 | 3 |
| H | 21248 | RECONSTRUCTION OF MANDIBLE OR MA | 7/1/1997 | $812.00 | 3 |
| H | 21249 | RECONSTRUCTION OF MANDIBLE OR MA | 7/1/1997 | $812.00 | 3 |
| H | 21267 | ORBITAL REPOSITIONING PERIORBITA | 7/1/1997 | $812.00 | 3 |
| H | 21270 | MALAR AUGMENTATION, PROSTHETIC M | 7/1/1997 | $585.00 | 3 |
| H | 21275 | SECONDARY REVISION FOR ORBITOCRA | 7/1/1997 | $812.00 | 3 |
| H | 21280 | MEDIAL CANTHOPEXY (SEPARATE PROC | 7/1/1997 | $585.00 | 3 |
| H | 21282 | LATERAL CANTHOPEXY | 7/1/1997 | $585.00 | 3 |
| H | 21295 | REDUCTION OF MASSETER MUSCLE/BON | 7/1/2003 | $271.00 | 3 |
| H | 21296 | REDUCTION OF MASSETER MUSCLE (EG | 7/1/2003 | $271.00 | 3 |
| H | 21300 | CLOSED TREATMENT OF SKULL FRACTU | 1/1/2007 | INVALID | N |
| H | 21310 | CLOSED TREATMENT OF NASAL BONE F | 7/1/1997 | $363.00 | 3 |
| H | 21315 | MANIPULATIVE TREATMENT, NASAL BO | 7/1/1997 | $363.00 | 3 |
| H | 21320 | MANIPULATIVE TREATMENT, NASAL BO | 7/1/1997 | $363.00 | 3 |
| H | 21325 | OPEN TREATMENT OF NASAL FRACTURE | 7/1/1997 | $513.00 | 3 |
| H | 21330 | OPEN TREATMENT OF NASAL FRACTURE | 7/1/1997 | $585.00 | 3 |
| H | 21335 | OPEN TREATMENT OF NASAL FRACTURE | 7/1/1997 | $812.00 | 3 |
| H | 21336 | OPEN TREATMENT OF NASAL SEPTAL F | 7/1/2003 | $513.00 | 3 |
| H | 21337 | CLOSED TREATMENT OF NASAL SEPTAL | 7/1/1997 | $363.00 | 3 |
| H | 21338 | OPEN TREATMENT OF NASOETHMOID FR | 7/1/1997 | $513.00 | 3 |
| H | 21339 | OPEN TREATMENT OF NASOETHMOID FR | 7/1/1997 | $585.00 | 3 |
| H | 21340 | PERCUTANEOUS TREAT OF NASOETHMOI | 7/1/1997 | $513.00 | 3 |
| H | 21343 | OPEN TREATMENT OF DEPRESSED FRON | 7/1/1997 | $585.00 | 3 |
| H | 21345 | CLOSED TREATMENT OF NASOMAXILLAR | 7/1/2003 | $812.00 | 3 |
| H | 21355 | PERCUTANEOUS TREATMENT OF FRACTU | 7/1/1997 | $417.00 | 3 |
| H | 21360 | OPEN TREATMENT OF CLOSED OR OPEN | 7/1/1997 | $513.00 | 3 |
| H | 21365 | OPEN TREATMENT OF COMPLICATED FR | 7/1/1997 | $585.00 | 3 |
| H | 21385 | OPEN TREATMENT OF ORBITAL FLOOR | 7/1/1997 | $585.00 | 3 |
| H | 21386 | OPEN TREATMENT OF ORBITAL FLOOR | 7/1/1997 | $585.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 21387 | OPEN TREATMENT OF ORBITAL FLOOR | 7/1/1997 | $585.00 | 3 |
| H | 21390 | OPEN TREATMENT OF ORBITAL FLOOR | 7/1/1997 | $812.00 | 3 |
| H | 21395 | OPEN TREATMENT OF ORBITAL FLOOR | 7/1/1997 | $812.00 | 3 |
| H | 21400 | CLOSED TREATMENT OF FRACTURE OF | 7/1/1997 | $363.00 | 3 |
| H | 21401 | TREATMENT OF FRACTURE OF ORBIT E | 7/1/1997 | $417.00 | 3 |
| H | 21406 | OPEN TREATMENT OF FRACTURE OF OR | 7/1/1997 | $513.00 | 3 |
| H | 21407 | OPEN TREATMENT OF FRACTURE OF OR | 7/1/1997 | $585.00 | 3 |
| H | 21421 | CLOSED TREATMENT OF PALATAL OR M | 7/1/1997 | $513.00 | 3 |
| H | 21422 | OPEN TREATMENT OF PALATAL OR MAX | 7/1/1997 | $585.00 | 3 |
| H | 21440 | CLOSED TREATMENT OF MANDIBULAR O | 7/1/1997 | $417.00 | 3 |
| H | 21445 | OPEN TREATMENT OF MANDIBULAR OR | 7/1/1997 | $513.00 | 3 |
| H | 21450 | CLOSED TREATMENT OF MANDIBULAR F | 7/1/1997 | $417.00 | 3 |
| H | 21451 | CLOSED TREATMENT OF MANDIBULAR F | 7/1/1997 | $513.00 | 3 |
| H | 21452 | PERCUTANEOUS TREATMENT OF MANDIB | 7/1/1997 | $363.00 | 3 |
| H | 21453 | CLOSED TREATMENT OF MANDIBULAR F | 7/1/1997 | $417.00 | 3 |
| H | 21454 | OPEN TREATMENT OF MANDIBULAR FRA | 7/1/1997 | $585.00 | 3 |
| H | 21461 | OPEN TREATMENT OF MANDIBULAR FRA | 7/1/1997 | $513.00 | 3 |
| H | 21462 | OPEN TREATMENT OF CLOSED OR OEN | 7/1/1997 | $585.00 | 3 |
| H | 21465 | OPEN TREATMENT OF MANDIBULAR CON | 7/1/1997 | $513.00 | 3 |
| H | 21470 | OPEN TREATMENT OF COMPLICATED MA | 7/1/1997 | $585.00 | 3 |
| H | 21480 | CLOSED TREATMENT OF TEMPOROMANDI | 7/1/1997 | $271.00 | 3 |
| H | 21485 | CLOSED TREATMENT OF TEMPOROMANDI | 7/1/1997 | $363.00 | 3 |
| H | 21490 | OPEN TREATMENT OF TEMPOROMANDIBU | 7/1/1997 | $417.00 | 3 |
| H | 21493 | CLOSED TREATMENT OF HYOID FRACTU | 1/1/2006 | INVALID | N |
| H | 21494 | TREATMENT OF CLOSED OR OPEN HYOI | 1/1/2006 | INVALID | N |
| H | 21495 | OPEN TREATMENT OF HYOID FRACTURE | 7/1/1997 | $513.00 | 3 |
| H | 21497 | INTERDENTAL WIRING FOR CONDITION | 7/1/1997 | $363.00 | 3 |
| H | 21501 | INCISION AND DRAINAGE, DEEP ABSC | 7/1/1997 | $363.00 | 3 |
| H | 21502 | INCISION AND DRAINAGE, DEEP ABSC | 7/1/1997 | $363.00 | 3 |
| H | 21510 | INCISION, DEEP, WITH OPENING OF | 7/1/1997 | $417.00 | 3 |
| H | 21550 | BIOPSY, SOFT TISSUE OF NECK OR T | 7/1/1997 | $271.00 | 3 |
| H | 21555 | EXCISION TUMOR, SOFT TISSUE OF N | 7/1/1997 | $363.00 | 3 |
| H | 21556 | EXCISION TUMOR, SOFT TISSUE OF N | 7/1/1997 | $363.00 | 3 |
| H | 21600 | EXCISION OF RIB PARTIAL | 7/1/1997 | $363.00 | 3 |
| H | 21610 | COSTOTRANSVERSECTOMY (SEPARATE P | 7/1/1997 | $363.00 | 3 |
| H | 21620 | OSTECTOMY OF STERNAUM PARTIAL | 7/1/1997 | $363.00 | 3 |
| H | 21700 | DIVISION OF SCALENUS ANTICUS WIT | 7/1/1997 | $363.00 | 3 |
| H | 21720 | DIVISION OF STERNOCLEIDOMASTOID | 7/1/1997 | $417.00 | 3 |
| H | 21725 | DIVISION OF STERNOCLEIDOMASTOID | 7/1/1997 | $417.00 | 3 |
| H | 21800 | CLOSED TREATMENT OF RIB FRACTURE | 7/1/1997 | $271.00 | 3 |
| H | 21805 | OPEN TREATMENT OF RIB FRACTURE W | 7/1/1997 | $363.00 | 3 |
| H | 21810 | TREATMENT OF RIB FRACTURE REQUIR | 7/1/1997 | $363.00 | 3 |
| H | 21820 | CLOSED TREATMENT OF STERNUM FRAC | 7/1/1997 | $271.00 | 3 |
| H | 21920 | BIOPSY, SOFT TISSUE OF BACK OR F | 7/1/1997 | $271.00 | 3 |
| H | 21925 | BIOPSY, SOFT TISSUE OF BACK OR F | 7/1/1997 | $363.00 | 3 |
| H | 21930 | EXCISION, TUMOR, SOFT TISSUE OF | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 21935 | RADICAL RESECTION OF TUMOR (EG, | 7/1/1997 | $417.00 | 3 |
| H | 22100 | PART EXCISION OF POST VERT COMPO | 7/1/1997 | $417.00 | 3 |
| H | 22101 | PART EXCISION OF POST VERT COMPO | 7/1/1997 | $417.00 | 3 |
| H | 22102 | PART EXCISION OF POST VERT COMPO | 7/1/1997 | $417.00 | 3 |
| H | 22103 | PART EXCISION OF POST VERT COMPO | 1/1/1999 | $482.00 | 3 |
| H | 22305 | CLOSED TREATMENT OF VERTEBRAL PR | 7/1/1997 | $271.00 | 3 |
| H | 22310 | CLOSED TREATMENT OF VERTEBRAL BO | 7/1/1997 | $271.00 | 3 |
| H | 22315 | CLOSED TREATMENT OF VERTEBRAL FR | 7/1/1997 | $363.00 | 3 |
| H | 22325 | OPEN TREATMENT AND/OR REDUCTION | 7/1/1997 | $417.00 | 3 |
| H | 22326 | OPEN TREATMENT AND/OR REDUCTION | 7/1/1997 | $417.00 | 3 |
| H | 22327 | OPEN TREATMENT AND/OR REDUCTION | 7/1/1997 | $417.00 | 3 |
| H | 22328 | OPEN TREATMENT AND/OR REDUCTION | 1/1/1999 | $482.00 | 3 |
| H | 22505 | REQUIRING ANESTHESIA | 7/1/1997 | $363.00 | 3 |
| H | 22554 | ARTHRODESIS, ANTERIOR INTERBODY | 11/1/2001 | $1,150.00 | 3 |
| H | 22556 | ARTHRODESIS, ANTERIOR INTERBODY | 11/1/2001 | $1,150.00 | 3 |
| H | 22900 | EXCISION ABDOMINAL WALL TUMOR SU | 7/1/1997 | $513.00 | 3 |
| H | 23000 | REMOVAL OF SUBDELTOID CALCAREOUS | 7/1/1997 | $363.00 | 3 |
| H | 23020 | CAPSULAR CONTRACTURE RELEASE (SE | 7/1/1997 | $363.00 | 3 |
| H | 23030 | INCISION AND DRAINAGE, SHOULDER | 7/1/1997 | $271.00 | 3 |
| H | 23031 | INCISION AND DRAINAGE; INFECTED | 6/1/2005 | $417.00 | 3 |
| H | 23035 | INCISION, DEEP, WITH OPENING OF | 7/1/1997 | $417.00 | 3 |
| H | 23040 | ARTHROTOMY, GLENOHUMERAL JOINT, | 7/1/1997 | $417.00 | 3 |
| H | 23044 | ARTHROTOMY, ACROMIOCLAVICULAR, S | 7/1/1997 | $513.00 | 3 |
| H | 23065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2000 | $314.00 | 3 |
| H | 23066 | BIOPSY, SOFT TISSUE OF SHOULDER | 7/1/1997 | $363.00 | 3 |
| H | 23075 | EXCISION TUMOR, SHOULDER AREA, S | 7/1/1997 | $363.00 | 3 |
| H | 23076 | EXCISION, TUMOR, SHOULDER AREA; | 7/1/1997 | $363.00 | 3 |
| H | 23077 | RADICAL RESECTION OF TUMOR (EG, | 7/1/1997 | $417.00 | 3 |
| H | 23100 | ARTHROTOMY WITH BIOPSY, GLENOHUM | 7/1/1997 | $363.00 | 3 |
| H | 23101 | ARTHROTOMY WITH BIOPSY, OR W/EXC | 7/1/1997 | $812.00 | 3 |
| H | 23105 | ARTHROTOMY WITH SYNOVECTOMY; GLE | 7/1/1997 | $513.00 | 3 |
| H | 23106 | ARTHROTOMY FOR SYNOVECTOMY; ACRO | 7/1/1997 | $513.00 | 3 |
| H | 23107 | ARTHROTOMY, GLENOHUMERAL JOINT, | 7/1/1997 | $513.00 | 3 |
| H | 23120 | CLAVICULECTOMY PARTIAL | 7/1/1997 | $585.00 | 3 |
| H | 23125 | CLAVICULECTOMY; TOTAL | 7/1/1997 | $585.00 | 3 |
| H | 23130 | ACROMIOPLASTY OR ACROMIONECTOMY, | 7/1/1997 | $585.00 | 3 |
| H | 23140 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $513.00 | 3 |
| H | 23145 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $585.00 | 3 |
| H | 23146 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/1997 | $585.00 | 3 |
| H | 23150 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $513.00 | 3 |
| H | 23155 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $585.00 | 3 |
| H | 23156 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/1997 | $585.00 | 3 |
| H | 23170 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 7/1/1997 | $363.00 | 3 |
| H | 23172 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 7/1/1997 | $363.00 | 3 |
| H | 23174 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 7/1/1997 | $363.00 | 3 |
| H | 23180 | PART EXCISION (CRATERIZATION, SA | 7/1/1997 | $513.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 23182 | PART EXCISION (CRATERIZATION, SA | 7/1/1997 | $513.00 | 3 |
| H | 23184 | PART EXCIS(CRATERIZATION, SAUCER | 7/1/1997 | $513.00 | 3 |
| H | 23190 | OSTECTOMY OF SCAPULA PARTIAL (EG | 7/1/1997 | $513.00 | 3 |
| H | 23195 | RESECTION HUMERAL HEAD | 7/1/1997 | $585.00 | 3 |
| H | 23330 | REMOVAL OF FOREIGN BODY SUBCUTAN | 6/1/2005 | $271.00 | 3 |
| H | 23331 | REMOVAL OF FOREIGN BODY, SHOULDE | 7/1/1997 | $271.00 | 3 |
| H | 23395 | MUSCLE TRANSFER, ANY TYPE, SHOUL | 7/1/1997 | $585.00 | 3 |
| H | 23397 | MUSCLE TRANSFER ANY TYPE FOR PAR | 7/1/1997 | $812.00 | 3 |
| H | 23400 | SCAPULOPEXY (EG SPRENGELS DEFORM | 7/1/1997 | $812.00 | 3 |
| H | 23405 | TENOMYOTOMY, SHOULDER AREA; SING | 7/1/1997 | $363.00 | 3 |
| H | 23406 | TENOMYOTOMY, SHOULDER AREA; MULT | 7/1/1997 | $363.00 | 3 |
| H | 23410 | REPAIR OF RUPTURED MUSCULOTENDIN | 7/1/1997 | $585.00 | 3 |
| H | 23412 | REPAIR OF RUPTURED SUPRASPINATUS | 7/1/1997 | $812.00 | 3 |
| H | 23415 | CORACOACROMIAL LIGAMENT RELEASE, | 7/1/1997 | $585.00 | 3 |
| H | 23420 | REPAIR OF COMPLETE SHOULDER CUFF | 7/1/1997 | $812.00 | 3 |
| H | 23430 | TENODESIS OF LONG TENDON OF BICE | 7/1/1997 | $513.00 | 3 |
| H | 23440 | RESECTION OR TRANSPLANTATION OF | 7/1/1997 | $513.00 | 3 |
| H | 23450 | CAPSULORRHAPHY, ANTERIOR; PUTTI- | 7/1/1997 | $585.00 | 3 |
| H | 23455 | CAPSULORRHAPHY FOR RECURRENT DIS | 7/1/1997 | $812.00 | 3 |
| H | 23460 | CAPSULORRHAPHY, ANTERIOR, ANY TY | 7/1/1997 | $585.00 | 3 |
| H | 23462 | CAPSULORRHAPHY FOR RECURRENT DIS | 7/1/1997 | $812.00 | 3 |
| H | 23465 | CAPSULORRHAPHY FOR RECURRENT DIS | 7/1/1997 | $585.00 | 3 |
| H | 23466 | CAPSULORRHAPHY WITH ANY TYPE MUL | 7/1/1997 | $812.00 | 3 |
| H | 23480 | OSTEOTOMY CLAVICLE WITH OR WITHO | 7/1/1997 | $513.00 | 3 |
| H | 23485 | OSTEOTOMY CLAVICLE WITH OR WITHO | 7/1/1997 | $812.00 | 3 |
| H | 23490 | PROPHYLACTIC TREATMENT (NAILING | 7/1/1997 | $417.00 | 3 |
| H | 23491 | PROPHYLACTIC TREATMENT (NAILING | 7/1/1997 | $417.00 | 3 |
| H | 23500 | TREATMENT OF CLOSED CLAVICULAR F | 6/1/2005 | $271.00 | 3 |
| H | 23505 | TREATMENT OF CLOSED CLAVICULAR F | 7/1/1997 | $271.00 | 3 |
| H | 23515 | OPEN TREATMENT OF CLAVICULAR FRA | 7/1/1997 | $417.00 | 3 |
| H | 23520 | CLOSED TREATMENT OF STERNOCLAVIC | 6/1/2005 | $271.00 | 3 |
| H | 23525 | TREATMENT OF CLOSED STERNOCLAVIC | 7/1/1997 | $271.00 | 3 |
| H | 23530 | OPEN TREATMENT OF STERNOCLAVICUL | 7/1/1997 | $417.00 | 3 |
| H | 23532 | OPEN TREATMENT OF CLOSED OR OPEN | 7/1/1997 | $513.00 | 3 |
| H | 23540 | CLOSED TREATMENT OF ACROMIOCLAVI | 6/1/2005 | $271.00 | 3 |
| H | 23545 | TREATMENT OF CLOSED ACROMIOCLAVI | 7/1/1997 | $271.00 | 3 |
| H | 23550 | OPEN TREATMENT OF ACROMIOCLAVICU | 7/1/1997 | $417.00 | 3 |
| H | 23552 | OPEN TREATMENT OF CLOSED OR OPEN | 7/1/1997 | $513.00 | 3 |
| H | 23570 | CLOSED TREATMENT OF SCAPULAR FRA | 6/1/2005 | $271.00 | 3 |
| H | 23575 | CLOSED TREATMENT OF SCAPULAR FRA | 7/1/1997 | $271.00 | 3 |
| H | 23585 | OPEN TREATMENT OF SCAPULAR FRACT | 7/1/1997 | $417.00 | 3 |
| H | 23600 | CLOSED TREATMENT OF PROXIMAL HUM | 1/1/2000 | $314.00 | 3 |
| H | 23615 | OPEN TREATMENT OF PROXIMAL HUMER | 7/1/1997 | $513.00 | 3 |
| H | 23616 | OPEN TREATMENT OF PROXIMAL HUMER | 6/1/2005 | $513.00 | 3 |
| H | 23625 | TREATMENT OF CLOSED GREATER TUBE | 7/1/1997 | $363.00 | 3 |
| H | 23630 | OPEN TREATMENT OF GREATER TUBERO | 7/1/1997 | $585.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 23650 | CLOSED TREATMENT OF SHOULDER DIS | 7/1/1997 | $271.00 | 3 |
| H | 23655 | TREATMENT OF CLOSED SHOULDER DIS | 7/1/1997 | $271.00 | 3 |
| H | 23660 | OPEN TREATMENT OF ACUTE SHOULDER | 7/1/1997 | $417.00 | 3 |
| H | 23665 | CLOSED TREATMENT OF SHOULDER DIS | 7/1/1997 | $363.00 | 3 |
| H | 23670 | OPEN TREATMENT OF SHOULDER DISLO | 7/1/1997 | $417.00 | 3 |
| H | 23675 | CLOSED TREATMENT OF SHOULDER DIS | 7/1/1997 | $363.00 | 3 |
| H | 23680 | OPEN TREATMENT OF SHOULDER DISLO | 7/1/1997 | $417.00 | 3 |
| H | 23700 | MANIPULATION UNDER ANESTHESIA, S | 7/1/1997 | $271.00 | 3 |
| H | 23800 | ARTHRODESIS SHOULDER JOINT WITH | 7/1/1997 | $513.00 | 3 |
| H | 23802 | ARTHRODESIS SHOULDER JOINT; WITH | 7/1/1997 | $812.00 | 3 |
| H | 23921 | DISARTICULATIO;N OF SHOULDER; SE | 7/1/1997 | $417.00 | 3 |
| H | 23930 | INCISION AND DRAINAGE, UPPER ARM | 7/1/1997 | $271.00 | 3 |
| H | 23931 | INCISION AND DRAINAGE; INFECTED | 7/1/1997 | $363.00 | 3 |
| H | 23935 | INCISION, DEEP, W/OPENING OF BON | 7/1/1997 | $363.00 | 3 |
| H | 24000 | ARTHROTOMY, ELBOW, FOR INFECTION | 7/1/1997 | $513.00 | 3 |
| H | 24006 | ARTHROTOMY OF THE ELBOW, WITH CA | 7/1/2003 | $513.00 | 3 |
| H | 24065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2000 | $314.00 | 3 |
| H | 24066 | BIOPSY SOFT TISSUES; DEEP | 7/1/1997 | $363.00 | 3 |
| H | 24075 | EXCISION, TUMOR, SOFT TISSUE OF | 7/1/1997 | $363.00 | 3 |
| H | 24076 | EXCISION, TUMOR, UPPER ARM OR EL | 7/1/1997 | $363.00 | 3 |
| H | 24077 | RADICAL RESECTION OF TUMOR (EG, | 7/1/1997 | $417.00 | 3 |
| H | 24100 | ARTHROTOMY, ELBOW; WITH SYNOVIAL | 7/1/1997 | $271.00 | 3 |
| H | 24101 | ARTHROTOMY, ELBOW; W/JOINT EXPLO | 7/1/1997 | $513.00 | 3 |
| H | 24102 | ARTHROTOMY, ELBOW; WITH SYNOVECT | 7/1/1997 | $513.00 | 3 |
| H | 24105 | EXCISION OLECRANON BURSA | 7/1/1997 | $417.00 | 3 |
| H | 24110 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $363.00 | 3 |
| H | 24115 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 24116 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 24120 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 24125 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/1997 | $417.00 | 3 |
| H | 24126 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/1997 | $417.00 | 3 |
| H | 24130 | EXCISION RADIAL HEAD | 7/1/1997 | $417.00 | 3 |
| H | 24134 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 7/1/1997 | $363.00 | 3 |
| H | 24136 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 7/1/1997 | $363.00 | 3 |
| H | 24138 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 7/1/1997 | $363.00 | 3 |
| H | 24140 | PARTIAL EXCISION (CRATERIZATION | 7/1/1997 | $417.00 | 3 |
| H | 24145 | PART EXCIS(CRATERIZATION,SAUCERI | 7/1/1997 | $417.00 | 3 |
| H | 24147 | PART EXCIS(CRATERIZATION,SAUCERI | 7/1/1997 | $363.00 | 3 |
| H | 24150 | RADICAL RESECTION FOR TUMOR SHAF | 7/1/1997 | $417.00 | 3 |
| H | 24151 | RADICAL RESECTION FOR TUMOR SHAF | 7/1/1997 | $513.00 | 3 |
| H | 24152 | RADICAL RESECTION FOR TUMOR RADI | 7/1/1997 | $417.00 | 3 |
| H | 24153 | RADICAL RESECTION FOR TUMOR RADI | 7/1/1997 | $513.00 | 3 |
| H | 24155 | RESECTION OF ELBOW JOINT (ARTHRE | 7/1/1997 | $417.00 | 3 |
| H | 24160 | IMPLANT REMOVAL; ELBOW JOINT | 7/1/1997 | $363.00 | 3 |
| H | 24164 | IMPLANT REMOVAL; RADIAL HEAD | 7/1/1997 | $417.00 | 3 |
| H | 24201 | REMOVAL OF FOREIGN BODY, UPPER A | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 24301 | MUSCLE OR TENDON TRANSFER, ANY T | 7/1/1997 | $513.00 | 3 |
| H | 24305 | TENDON LENGTHENING SINGLE EACH | 7/1/2003 | $513.00 | 3 |
| H | 24310 | TENOTOMY OPEN ELBOW TO SHOULDER | 7/1/1997 | $417.00 | 3 |
| H | 24320 | TENOPLASTY WITH MUSCLE TRANSFER | 7/1/1997 | $417.00 | 3 |
| H | 24330 | FLEXOR-PLASTY ELBOW (EG STEINDLE | 7/1/1997 | $417.00 | 3 |
| H | 24331 | FLEXOR-PLASTY ELBOW (EG STEINDLE | 7/1/1997 | $417.00 | 3 |
| H | 24340 | TENODESIS OF BICEPS TENDON AT EL | 7/1/1997 | $417.00 | 3 |
| H | 24341 | REPAIR, TENDON OR MUSCLE, UPPER | 6/1/2005 | $417.00 | 3 |
| H | 24342 | REINSERTION OF RUPTURED BICEPS O | 7/1/1997 | $417.00 | 3 |
| H | 24345 | REPAIR MEDIAL COLLATERAL LIGAMEN | 7/1/2003 | $363.00 | 3 |
| H | 24350 | FASCIOTOMY LATERAL OR MEDIAL (EG | 7/1/1997 | $417.00 | 3 |
| H | 24351 | FASCIOTOMY, LATERAL OR MEDIAL (E | 7/1/1997 | $417.00 | 3 |
| H | 24352 | FASCIOTOMY, LATERAL OR MEDIAL (E | 7/1/1997 | $417.00 | 3 |
| H | 24354 | FASCIOTOMY, LATERAL OR MEDIAL (E | 7/1/1997 | $417.00 | 3 |
| H | 24356 | FASCIOTOMY, LATERAL OR MEDIAL (E | 7/1/1997 | $417.00 | 3 |
| H | 24360 | ARTHROPLASTY ELBOW WITH MEMBRANE | 7/1/1997 | $585.00 | 3 |
| H | 24361 | ARTHROPLASTY ELBOW; WITH DISTAL | 7/1/1997 | $585.00 | 3 |
| H | 24362 | ARTHROPLASTY ELBOW; WITH IMPLANT | 7/1/1997 | $585.00 | 3 |
| H | 24363 | ARTHROPLASTY ELBOW; WITH DISTAL | 7/1/1997 | $812.00 | 3 |
| H | 24365 | ARTHROPLASTY RADIAL HEAD | 7/1/1997 | $585.00 | 3 |
| H | 24366 | ARTHROPLASTY RADIAL HEAD; WITH I | 7/1/1997 | $585.00 | 3 |
| H | 24400 | OSTEOTOMY HUMERUS WITH OR WITHOU | 7/1/1997 | $513.00 | 3 |
| H | 24410 | MULTIPLE OSTEOTOMIES WITH REALIG | 7/1/1997 | $513.00 | 3 |
| H | 24420 | OSTEOPLASTY HUMERUS (EG SHORTENI | 7/1/1997 | $417.00 | 3 |
| H | 24430 | REPAIR OF NONUNION OR MALUNION H | 7/1/1997 | $417.00 | 3 |
| H | 24435 | REPAIR OF NONUNION OR MALUNION H | 7/1/1997 | $513.00 | 3 |
| H | 24470 | HEMIEPIPHYSEAL ARREST (EG FOR CU | 7/1/1997 | $417.00 | 3 |
| H | 24495 | DECOMPRESSION FASCIOTOMY FOREARM | 7/1/1997 | $363.00 | 3 |
| H | 24498 | PROPHYLACTIC TREATMENT (NAILING | 7/1/1997 | $417.00 | 3 |
| H | 24500 | CLOSED TREATMENT OF HUMERAL SHAF | 6/1/2005 | $271.00 | 3 |
| H | 24505 | CLOSED TREATMENT OF HUMERAL SHAF | 7/1/1997 | $271.00 | 3 |
| H | 24515 | OPEN TREATMENT OF HUMERAL SHAFT | 7/1/1997 | $513.00 | 3 |
| H | 24516 | TREATMENT OF HUMERAL SHAFT FRACT | 7/1/1997 | $513.00 | 3 |
| H | 24530 | CLOSED TREATMENT OF SUPRACONDYLA | 7/1/1997 | $271.00 | 3 |
| H | 24535 | CLOSED TREATMENT OF SUPRACONDYLA | 7/1/1997 | $271.00 | 3 |
| H | 24538 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 24545 | OPEN TREATMENT OF HUMERAL SUPRAC | 7/1/1997 | $513.00 | 3 |
| H | 24546 | OPEN TREATMENT OF HUMERAL SUPRAC | 6/1/2005 | $585.00 | 3 |
| H | 24560 | CLOSED TREATMENT OF HUMERAL EPIC | 6/1/2005 | $271.00 | 3 |
| H | 24565 | TREATMENT OF CLOSED HUMERAL EPIC | 7/1/1997 | $363.00 | 3 |
| H | 24566 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 24575 | OPEN TREATMENT OF HUMERAL EPICON | 7/1/1997 | $417.00 | 3 |
| H | 24576 | CLOSED TREATMENT OF HUMERAL COND | 6/1/2005 | $271.00 | 3 |
| H | 24577 | TREATMENT OF CLOSED HUMERAL COND | 7/1/1997 | $271.00 | 3 |
| H | 24579 | OPEN TREATMENT OF HUMERAL CONDYL | 7/1/1997 | $417.00 | 3 |
| H | 24582 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 24586 | OPEN TREATMENT OF PERIARTICULAR | 7/1/1997 | $513.00 | 3 |
| H | 24587 | OPEN TREATMENT OF PERIARTICULAR | 7/1/1997 | $585.00 | 3 |
| H | 24600 | TREATMENT OF CLOSED ELBOW DISLOC | 7/1/1997 | $271.00 | 3 |
| H | 24605 | TREATMENT OF CLOSED ELBOW DISLOC | 7/1/1997 | $363.00 | 3 |
| H | 24615 | OPEN TREATMENT OF ACUTE OR CHRON | 7/1/1997 | $417.00 | 3 |
| H | 24620 | CLOSED TREATMENT OF MONTEGGIA TY | 7/1/1997 | $363.00 | 3 |
| H | 24635 | OPEN TREATMENT OF MONTEGGIA TYPE | 7/1/1997 | $417.00 | 3 |
| H | 24655 | TREATMENT OF CLOSED RADIAL HEAD | 7/1/1997 | $271.00 | 3 |
| H | 24665 | OPEN TREATMENT OF RADIAL HEAD OR | 7/1/1997 | $513.00 | 3 |
| H | 24666 | OPEN TREATMENT OF RADIAL HEAD OR | 7/1/1997 | $513.00 | 3 |
| H | 24670 | CLOSED TREATMENT OF ULNAR FRACTU | 6/1/2005 | $271.00 | 3 |
| H | 24675 | TREATMENT OF CLOSED ULNAR FRACTU | 7/1/1997 | $271.00 | 3 |
| H | 24685 | OPEN TREATMENT OF ULNAR FRACTURE | 7/1/1997 | $417.00 | 3 |
| H | 24800 | ARTHRODESIS ELBOW JOINT WITH OR | 7/1/1997 | $513.00 | 3 |
| H | 24802 | ARTHRODESIS ELBOW JOINT; WITH PR | 7/1/1997 | $585.00 | 3 |
| H | 24925 | AMPUTATION ARM THROUGH HUMERUS; | 7/1/1997 | $417.00 | 3 |
| H | 25000 | TENDON SHEATH INCISION; AT RADIA | 7/1/1997 | $417.00 | 3 |
| H | 25020 | DECOMPRESSION FASCIOTOMY, FOREAR | 7/1/1997 | $417.00 | 3 |
| H | 25023 | DECOMPRESS FASCIOTOMY, FLEXOR AN | 7/1/1997 | $417.00 | 3 |
| H | 25024 | DECOMPRESSION FASCIOTOMY, FOREAR | 1/1/2002 | $417.00 | 3 |
| H | 25025 | DECOMPRESSION FASCIOTOMY, FOREAR | 1/1/2002 | $417.00 | 3 |
| H | 25028 | INCISION AND DRAINAGE, FOREARM A | 7/1/1997 | $271.00 | 3 |
| H | 25031 | INCISION AND DRAINAGE; INFECTED | 7/1/1997 | $363.00 | 3 |
| H | 25035 | INCISION, DEEP, W/OPENING OF BON | 7/1/1997 | $363.00 | 3 |
| H | 25040 | ARTHROTOMY, RADIOCARPAL OR MIDCA | 7/1/1997 | $585.00 | 3 |
| H | 25065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2000 | $314.00 | 3 |
| H | 25066 | BIOPSY, SOFT TISSUE OF FOREARM A | 7/1/1997 | $363.00 | 3 |
| H | 25069 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $585.00 | 3 |
| H | 25075 | EXCISION, TUMOR, SOFT TISSUE OF | 6/1/2005 | $363.00 | 3 |
| H | 25076 | EXCISION, TUMOR, FOREARM AND/OR | 7/1/1997 | $417.00 | 3 |
| H | 25077 | RADICAL RESECTION OF TUMOR (EG, | 7/1/1997 | $417.00 | 3 |
| H | 25085 | CAPSULOTOMY WRIST (EG FOR CONTRA | 7/1/1997 | $417.00 | 3 |
| H | 25100 | ARTHROTOMY, WRIST JOINT; WITH BI | 7/1/1997 | $363.00 | 3 |
| H | 25101 | ARTHROTOMY, WRIST JOINT; W/JOINT | 7/1/1997 | $417.00 | 3 |
| H | 25105 | ARTHROTOMY, WRIST JOINT; WITH SY | 7/1/1997 | $513.00 | 3 |
| H | 25107 | ARTHROTOMY, DISTAL RADIOULNAR JO | 7/1/1997 | $417.00 | 3 |
| H | 25110 | EXCISION, LESION OF TENDON SHEAT | 7/1/1997 | $417.00 | 3 |
| H | 25111 | EXCISION OF GANGLION, WRIST (DOR | 7/1/1997 | $417.00 | 3 |
| H | 25112 | EXCISION OF GANGLION, WRIST (DOR | 7/1/1997 | $513.00 | 3 |
| H | 25115 | RADICAL EXCISION OF BURSA SYNOVI | 7/1/1997 | $513.00 | 3 |
| H | 25116 | RADICAL EXCISION OF BURSA SYNOVI | 7/1/1997 | $513.00 | 3 |
| H | 25118 | SYNOVECTOMY EXTENSOR TENDON SHEA | 7/1/1997 | $363.00 | 3 |
| H | 25119 | SYNOVECTOMY EXTENSOR TENDON SHEA | 7/1/1997 | $417.00 | 3 |
| H | 25120 | EXCIS/CURETTAGE OF BONE CYST/BEN | 7/1/1997 | $417.00 | 3 |
| H | 25125 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/1997 | $417.00 | 3 |
| H | 25126 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 25130 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 25135 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 25136 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 25145 | SEQUESTRECTOMY (EG, FOR OSTEOMYE | 7/1/1997 | $363.00 | 3 |
| H | 25150 | PART EXCIS (CRATERIZATION, SAUCE | 7/1/1997 | $363.00 | 3 |
| H | 25151 | PART EXCIS (CRATERIZATION, SAUCE | 7/1/1997 | $363.00 | 3 |
| H | 25170 | RADICAL RESECTION FOR TUMOR RADI | 7/1/1997 | $417.00 | 3 |
| H | 25210 | CARPECTOMY; ONE BONE | 7/1/1997 | $417.00 | 3 |
| H | 25215 | CARPECTOMY; ALL BONES OF PROXIMA | 7/1/1997 | $513.00 | 3 |
| H | 25230 | RADIAL STYLOIDECTOMY (SEPARATE P | 7/1/1997 | $513.00 | 3 |
| H | 25240 | EXCISION DISTAL ULNA PARTIAL OR | 7/1/1997 | $513.00 | 3 |
| H | 25248 | EXPLORATION WITH REMOVAL OF DEEP | 7/1/1997 | $363.00 | 3 |
| H | 25250 | REMOVAL OF WRIST PROSTHESIS (SEP | 7/1/1997 | $271.00 | 3 |
| H | 25251 | REMOVAL OF WRIST PROSTHESIS; COM | 7/1/1997 | $271.00 | 3 |
| H | 25260 | REPAIR, TENDON OR MUSCLE, FLEXOR | 7/1/1997 | $513.00 | 3 |
| H | 25263 | REPAIR, TENDON OR MUSCLE, FLEXOR | 7/1/1997 | $363.00 | 3 |
| H | 25265 | REPAIR, TENDON OR MUSCLE, FLEXOR | 7/1/1997 | $417.00 | 3 |
| H | 25270 | REPAIR, TENDON OR MUSCLE, EXTENS | 7/1/1997 | $513.00 | 3 |
| H | 25272 | REPAIR, TENDON OR MUSCLE, EXTENS | 7/1/1997 | $417.00 | 3 |
| H | 25274 | REPAIR, TENDON OR MUSCLE, EXTENS | 7/1/1997 | $513.00 | 3 |
| H | 25275 | REPAIR, TENDON SHEATH, EXTENSOR, | 1/1/2002 | $513.00 | 3 |
| H | 25280 | LENGTHENING OR SHORTENING OF FLE | 7/1/1997 | $513.00 | 3 |
| H | 25290 | TENOTOMY, OPEN, FLEXOR OR EXTENS | 7/1/1997 | $417.00 | 3 |
| H | 25295 | TENOLYSIS, FLEXOR OR EXTENSOR TE | 7/1/1997 | $417.00 | 3 |
| H | 25300 | TENODESIS AT WRIST; FLEXORS OF F | 7/1/1997 | $417.00 | 3 |
| H | 25301 | TENODESIS AT WRIST; EXTENSORS OF | 7/1/1997 | $417.00 | 3 |
| H | 25310 | TENDON TRANSPLANTATION OR TRANSF | 7/1/1997 | $417.00 | 3 |
| H | 25312 | TENDON TRANSPLANT/TRANSFER, FLEX | 7/1/1997 | $513.00 | 3 |
| H | 25315 | FLEXOR ORIGIN SLIDE (EG, FOR CER | 7/1/1997 | $417.00 | 3 |
| H | 25316 | FLEXOR ORIGIN SLIDE FOR CEREBRAL | 7/1/1997 | $417.00 | 3 |
| H | 25320 | CAPSULORRHAPHY OR RECONSTRUCTION | 7/1/1997 | $417.00 | 3 |
| H | 25332 | ARTHROPLASTY, WRIST, WITH OR WIT | 7/1/1997 | $585.00 | 3 |
| H | 25335 | TRANSPOSITION AND REALIGNMENT OF | 7/1/1997 | $417.00 | 3 |
| H | 25337 | RECONSTRUCTION FOR STABILIZATION | 7/1/2003 | $585.00 | 3 |
| H | 25350 | OSTEOTOMY RADIUS DISTAL THIRD | 7/1/1997 | $417.00 | 3 |
| H | 25355 | OSTEOTOMY RADIUS; MIDDLE OR PROX | 7/1/1997 | $417.00 | 3 |
| H | 25360 | OSTEOTOMY ULNA | 7/1/1997 | $417.00 | 3 |
| H | 25365 | OSTEOTOMY; RADIUS AND ULNA | 7/1/1997 | $417.00 | 3 |
| H | 25370 | MULTIPLE OSTEOTOMIES WITH REALIG | 7/1/1997 | $417.00 | 3 |
| H | 25375 | MULTIPLE OSTEOTOMIES WITH REALIG | 7/1/1997 | $513.00 | 3 |
| H | 25390 | OSTEOPLASTY, RADIUS OR ULNA; SHO | 7/1/1997 | $417.00 | 3 |
| H | 25391 | OSTEOPLASTY, RADIUS OR ULNA; LEN | 7/1/1997 | $513.00 | 3 |
| H | 25392 | OSTEOPLASTY, RADIUS AND ULNA; SH | 7/1/1997 | $417.00 | 3 |
| H | 25393 | OSTEOPLASTY, RADIUS AND ULNA; LE | 7/1/1997 | $513.00 | 3 |
| H | 25400 | REPAIR OF NONUNION OR MALUNION R | 7/1/1997 | $417.00 | 3 |
| H | 25405 | REPAIR OF NONUNION OR MALUNION, | 7/1/1997 | $513.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 25415 | REPAIR OF NONUNION OR MALUNION R | 7/1/1997 | $417.00 | 3 |
| H | 25420 | REPAIR OF NONUNION OR MALUNION, | 7/1/1997 | $513.00 | 3 |
| H | 25425 | REPAIR OF DEFECT WITH AUTOGENOUS | 7/1/1997 | $417.00 | 3 |
| H | 25426 | REPAIR OF DEFECT WITH AUTOGENOUS | 7/1/1997 | $513.00 | 3 |
| H | 25440 | REPAIR OF NONUNION, SCAPHOID CAR | 7/1/1997 | $513.00 | 3 |
| H | 25441 | ARTHROPLASTY WITH PROSTHETIC REP | 7/1/1997 | $585.00 | 3 |
| H | 25442 | ARTHROPLASTY WITH PROSTHETIC REP | 7/1/1997 | $585.00 | 3 |
| H | 25443 | ARTHROPLASTY WITH PROSTHETIC REP | 7/1/1997 | $585.00 | 3 |
| H | 25444 | ARTHROPLASTY WITH PROSTHETIC REP | 7/1/1997 | $585.00 | 3 |
| H | 25445 | ARTHROPLASTY WITH PROSTHETIC REP | 7/1/1997 | $585.00 | 3 |
| H | 25446 | ARTHROPLASTY WITH PROSTHETIC REP | 7/1/1997 | $812.00 | 3 |
| H | 25447 | INTERPOSITION ARTHROPLASTY INTER | 7/1/1997 | $585.00 | 3 |
| H | 25449 | ARTHROPLASTY WITH REMOVAL OF IMP | 7/1/1997 | $585.00 | 3 |
| H | 25450 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 7/1/1997 | $417.00 | 3 |
| H | 25455 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 7/1/1997 | $417.00 | 3 |
| H | 25490 | PROPHYLACTIC TREATMENT (NAILING | 7/1/1997 | $417.00 | 3 |
| H | 25491 | PROPHYLACTIC TREATMENT (NAILING | 7/1/1997 | $417.00 | 3 |
| H | 25492 | PROPHYLACTIC TREATMENT (NAILING | 7/1/1997 | $417.00 | 3 |
| H | 25505 | TREATMENT OF CLOSED RADIAL SHAFT | 7/1/1997 | $271.00 | 3 |
| H | 25515 | OPEN TREATMENT OF RADIAL SHAFT F | 7/1/1997 | $417.00 | 3 |
| H | 25520 | CLOSED TREATMENT OF RADIAL SHAFT | 6/1/2005 | $271.00 | 3 |
| H | 25525 | OPEN TREATMENT OF RADIAL SHAFT F | 7/1/1997 | $513.00 | 3 |
| H | 25526 | OPEN TREATMENT OF RADIAL SHAFT F | 7/1/1997 | $585.00 | 3 |
| H | 25535 | TREATMENT OF CLOSED ULNAR SHAFT | 7/1/1997 | $271.00 | 3 |
| H | 25545 | OPEN TREATMENT OF ULNAR SHAFT FR | 7/1/1997 | $417.00 | 3 |
| H | 25565 | TREATMENT OF CLOSED RADIAL AND U | 7/1/1997 | $363.00 | 3 |
| H | 25574 | OPEN TREATMENT OF RADIAL AND ULN | 6/1/2005 | $417.00 | 3 |
| H | 25575 | OPEN TREATMENT OF RADIAL AND ULN | 7/1/1997 | $417.00 | 3 |
| H | 25605 | TREAT OF CLOSED DISTAL RADIAL FR | 7/1/1997 | $417.00 | 3 |
| H | 25606 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $417.00 | 3 |
| H | 25607 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $585.00 | 3 |
| H | 25608 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | $585.00 | 3 |
| H | 25611 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | INVALID | N |
| H | 25620 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | INVALID | N |
| H | 25624 | TREATMENT OF CLOSED CARPAL SCAPH | 7/1/1997 | $363.00 | 3 |
| H | 25628 | OPEN TREATMENT OF CARPAL SCAPHOI | 7/1/1997 | $417.00 | 3 |
| H | 25635 | TREATMENT OF CLOSED CARPAL BONE | 7/1/1997 | $271.00 | 3 |
| H | 25645 | OPEN TREATMENT OF CARPAL BONE FR | 7/1/1997 | $417.00 | 3 |
| H | 25660 | CLOSED TREATMENT OF RADIOCARPAL | 7/1/1997 | $271.00 | 3 |
| H | 25670 | OPEN TREATMENT OF RADIOCARPAL OR | 7/1/1997 | $417.00 | 3 |
| H | 25671 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2002 | $271.00 | 3 |
| H | 25675 | CLOSED TREATMENT OF DISTAL RADIO | 7/1/1997 | $271.00 | 3 |
| H | 25676 | OPEN TREATMENT OF DISTAL RADIOUL | 7/1/1997 | $363.00 | 3 |
| H | 25680 | CLOSED TREATMENT OF TRANS-SCAPHO | 7/1/1997 | $363.00 | 3 |
| H | 25685 | OPEN TREATMENT OF TRANS-SCAPHOPE | 7/1/1997 | $417.00 | 3 |
| H | 25690 | CLOSED TREATMENT OF LUNATE DISLO | 7/1/1997 | $271.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 25695 | OPEN TREATMENT OF LUNATE DISLOCA | 7/1/1997 | $363.00 | 3 |
| H | 25800 | ARTHRODESIS, WRIST JOINT (INCLUD | 7/1/1997 | $513.00 | 3 |
| H | 25805 | ARTHRODESIS WRIST JOINT (INCLUDI | 7/1/1997 | $585.00 | 3 |
| H | 25810 | ARTHRODESIS WRIST JOINT WITH ILI | 7/1/1997 | $585.00 | 3 |
| H | 25820 | INTERCARPAL FUSION WITHOUT BONE | 7/1/1997 | $513.00 | 3 |
| H | 25825 | INTERCARPAL FUSION WITH AUTOGENO | 7/1/1997 | $585.00 | 3 |
| H | 25830 | DISTAL RADIOULNAR JOINT ARTHRODE | 7/1/2003 | $585.00 | 3 |
| H | 25907 | AMPUTATION FOREARM THROUGH RADIU | 7/1/1997 | $417.00 | 3 |
| H | 25922 | DISARTICULATION THROUGH WRIST; S | 7/1/1997 | $417.00 | 3 |
| H | 25929 | TRANSMETACARPAL AMPUTATION; SECO | 6/1/2005 | $417.00 | 3 |
| H | 26011 | DRAINAGE OF FINGER ABSCESS; COMP | 7/1/1997 | $271.00 | 3 |
| H | 26020 | DRAINAGE OF TENDON SHEATH ONE DI | 7/1/1997 | $363.00 | 3 |
| H | 26025 | DRAINAGE OF PALMAR BURSA; SINGLE | 7/1/1997 | $271.00 | 3 |
| H | 26030 | DRAINAGE OF PALMAR BURSA; MULTIP | 7/1/1997 | $363.00 | 3 |
| H | 26034 | INCISION, DEEP, WITH OPENING OF | 7/1/1997 | $363.00 | 3 |
| H | 26035 | DECOMPRESSION FINGERS AND/OR HAN | 7/1/1997 | $513.00 | 3 |
| H | 26037 | DECOMPRESSIVE FASCIOTOMY, HAND ( | 7/1/1997 | $513.00 | 3 |
| H | 26040 | FASCIOTOMY, PALMAR, FOR DUPUYTRE | 7/1/1997 | $513.00 | 3 |
| H | 26045 | FASCIOTOMY, PALMAR, FOR DUPUYTRE | 7/1/1997 | $417.00 | 3 |
| H | 26055 | TENDON SHEATH INCISION (EG, FOR | 7/1/1997 | $363.00 | 3 |
| H | 26060 | TENOTOMY, PERCUTANEOUS, SINGLE, | 7/1/1997 | $363.00 | 3 |
| H | 26070 | ARTHROTOMY, WITH EXPLORATION, DR | 7/1/1997 | $363.00 | 3 |
| H | 26075 | ARTHROTOMY, FOR INFECTION, W/EXP | 7/1/1997 | $513.00 | 3 |
| H | 26080 | ARTHROTOMY, FOR INFECTION, W/EXP | 7/1/1997 | $513.00 | 3 |
| H | 26100 | ARTHROTOMY WITH SYNOVIAL BIOPSY; | 7/1/1997 | $363.00 | 3 |
| H | 26105 | ARTHROTOMY FOR SYNOVIAL BIOPSY; | 7/1/1997 | $271.00 | 3 |
| H | 26110 | ARTHROTOMY WITH SYNOVIAL BIOPSY; | 7/1/1997 | $271.00 | 3 |
| H | 26115 | EXCISION, TUMOR OR VASCULAR MALF | 7/1/1997 | $363.00 | 3 |
| H | 26116 | EXCISION, TUMOR OR VASCULAR MALF | 7/1/1997 | $363.00 | 3 |
| H | 26117 | RADICAL RESECTION OF TUMOR (EG, | 7/1/1997 | $417.00 | 3 |
| H | 26121 | FASCIECTOMY, PALM ONLY, WITH OR | 7/1/1997 | $513.00 | 3 |
| H | 26123 | FASCIECTOMY, PARTIAL PALMAR WITH | 7/1/1997 | $513.00 | 3 |
| H | 26125 | FASCIECTOMY, PARTIAL PALMAR WITH | 7/1/1997 | $513.00 | 3 |
| H | 26130 | SYNOVECTOMY CARPOMETACARPAL JOIN | 7/1/1997 | $417.00 | 3 |
| H | 26135 | SYNOVECTOMY METACARPOPHALANGEAL | 7/1/1997 | $513.00 | 3 |
| H | 26140 | SYNOVECTOMY PROXIMAL INTERPHALAN | 7/1/1997 | $363.00 | 3 |
| H | 26145 | SYNOVECTOMY TENDON SHEATH RADICA | 7/1/1997 | $417.00 | 3 |
| H | 26160 | EXCISION OF LESION OF TENDON SHE | 7/1/1997 | $417.00 | 3 |
| H | 26170 | EXCISION OF TENDON PALM FLEXOR S | 7/1/1997 | $417.00 | 3 |
| H | 26180 | EXCISION OF TENDON FINGER FLEXOR | 7/1/1997 | $417.00 | 3 |
| H | 26185 | SESAMOIDECTOMY, THUMB OR FINGER | 7/1/2003 | $513.00 | 3 |
| H | 26200 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $363.00 | 3 |
| H | 26205 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 26210 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $363.00 | 3 |
| H | 26215 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/1997 | $417.00 | 3 |
| H | 26230 | PART EXCIS (CRATERIZATION,SAUCER | 7/1/1997 | $812.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 26235 | PART EXCIS (CRATERIZATION,SAUCER | 7/1/1997 | $417.00 | 3 |
| H | 26236 | PARTIAL EXCISION (CRATERIZATION | 7/1/1997 | $417.00 | 3 |
| H | 26250 | RADIACAL RESECTION (OSTECTOMY) F | 7/1/1997 | $417.00 | 3 |
| H | 26255 | RADICAL RESECTION (OSTECTOMY) FO | 7/1/1997 | $417.00 | 3 |
| H | 26260 | RADICAL RESECTION (OSTECTOMY) FO | 7/1/1997 | $417.00 | 3 |
| H | 26261 | RADICAL RESECT (OSTECTOMY) FOR T | 7/1/1997 | $417.00 | 3 |
| H | 26262 | RADICAL RESECTION (OSTECTOMY) FO | 7/1/1997 | $363.00 | 3 |
| H | 26320 | REMOVAL OF IMPLANT FROM FINGER O | 7/1/1997 | $363.00 | 3 |
| H | 26350 | REPAIR OR ADVANCEMENT, FLEXOR TE | 7/1/1997 | $271.00 | 3 |
| H | 26352 | FLEXOR TENDON REPAIR/ADVANCEMENT | 7/1/1997 | $513.00 | 3 |
| H | 26356 | REPAIR OR ADVANCEMENT, FLEXOR TE | 7/1/1997 | $513.00 | 3 |
| H | 26357 | SECONDARY, EACH TENDON | 7/1/1997 | $513.00 | 3 |
| H | 26358 | FLEXOR TENDON REPAIR OR ADVANCEM | 7/1/1997 | $513.00 | 3 |
| H | 26370 | PROFUNDUS TENDON REPAIR OR ADVAN | 7/1/1997 | $513.00 | 3 |
| H | 26372 | PROFUNDUS TENDON REPAIR OR ADVAN | 7/1/1997 | $513.00 | 3 |
| H | 26373 | PROFUNDUS TENDON REPAIR OR ADVAN | 7/1/1997 | $417.00 | 3 |
| H | 26390 | EXCISION FLEXOR TENDON, W/IMPLAN | 7/1/1997 | $513.00 | 3 |
| H | 26392 | REMOVAL OF SYNTHETIC ROD AND INS | 7/1/1997 | $417.00 | 3 |
| H | 26410 | EXTENSOR TENDON REPAIR, DORSUM O | 7/1/1997 | $417.00 | 3 |
| H | 26412 | EXTENSOR TENDON REPAIR, DORSUM O | 7/1/1997 | $417.00 | 3 |
| H | 26415 | EXCISION OF EXTENSOR TENDON, W/I | 7/1/1997 | $513.00 | 3 |
| H | 26416 | REMOVAL OF SYNTHETIC ROD AND INS | 7/1/2002 | $417.00 | 3 |
| H | 26418 | EXTENSOR TENDON REPAIR, DORSUM O | 7/1/1997 | $513.00 | 3 |
| H | 26420 | EXTENSOR TENDON REPAIR, DORSUM O | 7/1/1997 | $513.00 | 3 |
| H | 26426 | REPAIR OF EXTENSOR TENDON, CENTR | 7/1/1997 | $417.00 | 3 |
| H | 26428 | REPAIR OF EXTENSOR TENDON, CENTR | 7/1/1997 | $417.00 | 3 |
| H | 26432 | EXTENSOR TENDON REPAIR DISTAL IN | 7/1/1997 | $417.00 | 3 |
| H | 26433 | EXTENSOR TENDON REPAIR, DISTAL I | 7/1/1997 | $417.00 | 3 |
| H | 26434 | EXTENSOR TENDON REPAIR, DISTAL I | 7/1/1997 | $417.00 | 3 |
| H | 26437 | EXTENSOR TENDON REALIGNMENT, HAN | 7/1/1997 | $417.00 | 3 |
| H | 26440 | TENOLYSIS, SIMPLE, FLEXOR TENDON | 7/1/1997 | $417.00 | 3 |
| H | 26442 | TENOLYSIS, SIMPLE, FLEXOR TENDON | 7/1/1997 | $417.00 | 3 |
| H | 26445 | TENOLYSIS, EXTENSOR TENDON, HAND | 7/1/1997 | $417.00 | 3 |
| H | 26449 | TENOLYSIS COMPLEX EXTENSOR TENDO | 7/1/1997 | $417.00 | 3 |
| H | 26450 | TENOTOMY FLEXOR SINGLE PALM OPEN | 7/1/1997 | $417.00 | 3 |
| H | 26455 | TENOTOMY FLEXOR SINGLE FINGER OP | 7/1/1997 | $417.00 | 3 |
| H | 26460 | TENOTOMY, EXTENSOR, HAND OR FING | 7/1/1997 | $417.00 | 3 |
| H | 26471 | TENODESIS; FOR PROXIMAL INTERPHA | 7/1/1997 | $363.00 | 3 |
| H | 26474 | TENODESIS; FOR DISTAL JOINT STAB | 7/1/1997 | $363.00 | 3 |
| H | 26476 | TENDON LENGTHENING, EXTENSOR, HA | 7/1/1997 | $271.00 | 3 |
| H | 26477 | TENDON SHORTENING, EXTENSOR, HAN | 7/1/1997 | $271.00 | 3 |
| H | 26478 | TENDON LENGTHENING, FLEXOR, HAND | 7/1/1997 | $271.00 | 3 |
| H | 26479 | TENDON SHORTENING, FLEXOR, HAND | 7/1/1997 | $271.00 | 3 |
| H | 26480 | TENDON TRANSFER OR TRANSPLANT, C | 7/1/1997 | $417.00 | 3 |
| H | 26483 | TENDON TRANSFER/TRANSPLANT,CARPO | 7/1/1997 | $417.00 | 3 |
| H | 26485 | TENDON TRANSFER OR TRANSPLANT, P | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 26489 | TENDON TRANSFER/TRANSPLANT, PALM | 7/1/1997 | $417.00 | 3 |
| H | 26490 | OPPONENS PLASTY; SUBLIMIS TENDON | 7/1/1997 | $417.00 | 3 |
| H | 26492 | OPPONENS PLASTY; TENDON TRANSFER | 7/1/1997 | $417.00 | 3 |
| H | 26494 | OPPONENS PLASTY; HYPOTHENAR MUSC | 7/1/1997 | $417.00 | 3 |
| H | 26496 | OPPONENS PLASTY; OTHER METHODS | 7/1/1997 | $417.00 | 3 |
| H | 26497 | TENDON TRANSFER TO RESTORE INTRI | 7/1/1997 | $417.00 | 3 |
| H | 26498 | TENDON TRANSFER TO RESTORE INTRI | 7/1/1997 | $513.00 | 3 |
| H | 26499 | CORRECTION CLAW FINGER OTHER MET | 7/1/1997 | $417.00 | 3 |
| H | 26500 | TENDON PULLEY RECONSTRUCTION; WI | 7/1/1997 | $513.00 | 3 |
| H | 26502 | TENDON PULLEY RECONSTRUCTION; W/ | 7/1/1997 | $513.00 | 3 |
| H | 26504 | WITH TENDON PROSTHESIS (SEPARATE | 1/1/2007 | INVALID | N |
| H | 26508 | THENAR MUSCLE RELEASE FOR THUMB | 7/1/1997 | $417.00 | 3 |
| H | 26510 | CROSS INTRINSIC TRANSFER, EACH T | 7/1/1997 | $417.00 | 3 |
| H | 26516 | CAPSULODESIS FOR M-P JOINT STABI | 7/1/1997 | $271.00 | 3 |
| H | 26517 | CAPSULODESIS FOR M-P JOINT STABI | 7/1/1997 | $417.00 | 3 |
| H | 26518 | CAPSULODISIS FOR M-P JOINT STABI | 7/1/1997 | $417.00 | 3 |
| H | 26520 | CAPSULECTOMY OR CAPSULOTOMY FOR | 7/1/1997 | $417.00 | 3 |
| H | 26525 | CAPSULECTOMY OR CAPSULOTOMY FOR | 7/1/1997 | $417.00 | 3 |
| H | 26530 | ARTHROPLASTY, METACARPOPHALANGEA | 7/1/1997 | $417.00 | 3 |
| H | 26531 | ARTHROPLASTY METACARPOPHALANGEAL | 7/1/1997 | $812.00 | 3 |
| H | 26535 | ARTHROPLASTY INTERPHALANGEAL JOI | 7/1/1997 | $585.00 | 3 |
| H | 26536 | ARTHROPLASTY INTERPHALANGEAL JOI | 7/1/1997 | $585.00 | 3 |
| H | 26540 | REPAIR OF COLLATERAL LIGAMENT, M | 7/1/1997 | $513.00 | 3 |
| H | 26541 | RECONSTRUCTION, COLLATERAL LIGAM | 7/1/1997 | $812.00 | 3 |
| H | 26542 | PRIMARY REPAIR OF COLLATERAL LIG | 7/1/1997 | $513.00 | 3 |
| H | 26545 | RECONSTRUCTION COLLATERAL LIGAME | 7/1/1997 | $513.00 | 3 |
| H | 26546 | REPAIR NON-UNION, METACARPAL OR | 7/1/2003 | $513.00 | 3 |
| H | 26548 | REPAIR AND RECONSTRUCTION, FINGE | 7/1/1997 | $513.00 | 3 |
| H | 26550 | POLLICIZATION OF A DIGIT | 7/1/1997 | $363.00 | 3 |
| H | 26551 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/1999 | $595.00 | 3 |
| H | 26553 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/1999 | $422.00 | 3 |
| H | 26554 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/1999 | $422.00 | 3 |
| H | 26555 | POSITIONAL CHANGE OF OTHER FINGE | 7/1/1997 | $417.00 | 3 |
| H | 26560 | REPAIR OF SYNDACTYLY (WEB FINGER | 7/1/1997 | $363.00 | 3 |
| H | 26561 | REPAIR OF SYNDACTYLY (WEB FINGER | 7/1/1997 | $417.00 | 3 |
| H | 26562 | REPAIR OF SYNDACTYLY (WEB FINGER | 7/1/1997 | $513.00 | 3 |
| H | 26565 | OSTEOTOMY FOR CORRECTION OF DEFO | 7/1/1997 | $585.00 | 3 |
| H | 26567 | OSTEOTOMY FOR CORRECTION OF DEFO | 7/1/1997 | $585.00 | 3 |
| H | 26568 | OSTEOPLASTY FOR LENGTHENING OF M | 7/1/1997 | $417.00 | 3 |
| H | 26580 | REPAIR CLEFT HAND | 7/1/1997 | $585.00 | 3 |
| H | 26585 | REPAIR BIFID DIGIT | 4/1/2002 | INVALID | N |
| H | 26587 | RECONSTRUCTION OF POLYDACTYLOUS | 7/1/2002 | $585.00 | 3 |
| H | 26590 | REPAIR MACRODACTYLIA, EACH DIGIT | 7/1/1997 | $585.00 | 3 |
| H | 26591 | REPAIR, INTRINSIC MUSCLES OF HAN | 7/1/1997 | $417.00 | 3 |
| H | 26593 | RELEASE, INTRINSIC MUSCLES OF HA | 7/1/1997 | $417.00 | 3 |
| H | 26596 | EXCISION OF CONSTRICTING RING OF | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 26597 | RELEASE OF SCAR CONTRACTURE FLEX | 4/1/2002 | INVALID | N |
| H | 26605 | TREATMENT OF CLOSED METACARPAL F | 7/1/1997 | $363.00 | 3 |
| H | 26607 | CLOSED TREATMENT OF METACARPAL F | 7/1/1997 | $363.00 | 3 |
| H | 26608 | PERCUTANEOUS SKELETAL FIXATION O | 6/17/2003 | $513.00 | 3 |
| H | 26615 | OPEN TREATMENT OF METACARPAL FRA | 7/1/1997 | $513.00 | 3 |
| H | 26645 | CLOSED TREATMENT OF CARPOMETACAR | 7/1/1997 | $271.00 | 3 |
| H | 26650 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 26665 | OPEN TREATMENT OF CARPOMETACARPA | 7/1/1997 | $513.00 | 3 |
| H | 26675 | TREAT OF CLOSED CARPOMETACARPAL | 7/1/1997 | $363.00 | 3 |
| H | 26676 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 26685 | OPEN TREATMENT OF CARPOMETACARPA | 7/1/1997 | $417.00 | 3 |
| H | 26686 | OPEN TREAT OF CLOSED/OPEN CARPOM | 7/1/1997 | $417.00 | 3 |
| H | 26705 | TREATMEANT OF CLOSED METACARPOPH | 7/1/1997 | $363.00 | 3 |
| H | 26706 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 26715 | OPEN TREATMENT OF METACARPOPHALA | 7/1/1997 | $513.00 | 3 |
| H | 26727 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $812.00 | 3 |
| H | 26735 | OPEN TREATMENT OF PHALANGEAL SHA | 7/1/1997 | $513.00 | 3 |
| H | 26742 | TREATMENT OF CLOSED ARTICULAR FR | 7/1/1997 | $363.00 | 3 |
| H | 26746 | OPEN TREATMENT OF ARTICULAR FRAC | 7/1/1997 | $585.00 | 3 |
| H | 26756 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 26765 | OPEN TREATMENT OF DISATL PHALANG | 7/1/1997 | $513.00 | 3 |
| H | 26776 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 26785 | OPEN TREATMENT OF INTERPHALANGEA | 7/1/1997 | $363.00 | 3 |
| H | 26820 | FUSION IN OPPOSITION, THUMB, WIT | 7/1/1997 | $585.00 | 3 |
| H | 26841 | ARTHRODESIS CARPOMETACARPAL JOIN | 7/1/1997 | $513.00 | 3 |
| H | 26842 | ARTHRODESIS, CARPOMETACARPAL JOI | 7/1/1997 | $513.00 | 3 |
| H | 26843 | ARTHRODESIS, CARPOMETACARPAL JOI | 7/1/1997 | $417.00 | 3 |
| H | 26844 | ARTHRODESIS, CARPOMETACARPAL JOI | 7/1/1997 | $417.00 | 3 |
| H | 26850 | ARTHRODESIS METACARPOPHALANGEAL | 7/1/1997 | $513.00 | 3 |
| H | 26852 | ARTHRODESIS METACARPOPHALANGEAL | 7/1/1997 | $513.00 | 3 |
| H | 26860 | ARTHRODESIS INTERPHALANGEAL JOIN | 7/1/1997 | $417.00 | 3 |
| H | 26861 | ARTHRODESIS, INTERPHALANGEAL JOI | 7/1/1997 | $363.00 | 3 |
| H | 26862 | ARTHRODESIS, INTERPHALANGEAL JOI | 7/1/1997 | $513.00 | 3 |
| H | 26863 | ARTHRODESIS, INTERPHALANGEAL JOI | 7/1/1997 | $417.00 | 3 |
| H | 26910 | AMPUTATION METACARPAL WITH FINGE | 7/1/1997 | $417.00 | 3 |
| H | 26951 | AMPUTATION, FINGER/THUMB, PRIMAR | 7/1/1997 | $363.00 | 3 |
| H | 26952 | AMPUTATION,FING/THUMB,PRIMARY/SE | 7/1/1997 | $513.00 | 3 |
| H | 26990 | INCISION AND DRAINAGE, PELVIS OR | 7/1/1997 | $271.00 | 3 |
| H | 26991 | INCISION AND DRAINAGE, PELVIS OR | 7/1/1997 | $271.00 | 3 |
| H | 26992 | INCISION, DEEP, W/OPENING OF BON | 7/1/1997 | $363.00 | 3 |
| H | 27000 | TENOTOMY, ADDUCTOR OF HIP, SUBCU | 7/1/1997 | $363.00 | 3 |
| H | 27001 | TENOTOMY, ADDUCTOR OF HIP, SUBCU | 7/1/1997 | $417.00 | 3 |
| H | 27003 | TENOTOMY, ADDUCTOR, SUBCUTANEOUS | 7/1/1997 | $417.00 | 3 |
| H | 27030 | ARTHROTOMY, HIP, FOR INFECTION, | 7/1/1997 | $417.00 | 3 |
| H | 27033 | ARTHROTOMY, HIP, WITH EXPLORATIO | 7/1/1997 | $417.00 | 3 |
| H | 27035 | HIP JNT DENERVATION, INTRAPELVIC | 7/1/1997 | $513.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 27040 | BIOPSY, SOFT TISSUE OF PELVIS AN | 7/1/1997 | $271.00 | 3 |
| H | 27041 | BIOPSY, SOFT TISSUE OF PELVIS AN | 7/1/1997 | $363.00 | 3 |
| H | 27047 | EXCISION, TUMOR, PELVIS AND HIP | 7/1/1997 | $363.00 | 3 |
| H | 27048 | EXCISION, TUMOR, PELVIS AND HIP | 7/1/1997 | $417.00 | 3 |
| H | 27049 | RADICAL RESECTION OF TUMOR (EG, | 7/1/1997 | $417.00 | 3 |
| H | 27050 | ARTHROTOMY, WITH BIOPSY; SACROIL | 7/1/1997 | $417.00 | 3 |
| H | 27052 | ARTHROTOMY FOR BIOPSY; HIP JOINT | 7/1/1997 | $417.00 | 3 |
| H | 27060 | EXCISION ISCHIAL BURSA | 7/1/1997 | $585.00 | 3 |
| H | 27062 | EXCISION; TROCHANTERIC BURSA OR | 7/1/1997 | $585.00 | 3 |
| H | 27065 | EXCISION OF BONE CYST OR BENIGN | 7/1/1997 | $585.00 | 3 |
| H | 27066 | EXCISION OF BONE CYST OR BENIGN | 7/1/1997 | $585.00 | 3 |
| H | 27067 | EXCISION OF BONE CYST OR BENIGN | 7/1/2003 | $585.00 | 3 |
| H | 27080 | COCCYGECTOMY PRIMARY | 7/1/1997 | $363.00 | 3 |
| H | 27086 | REMOVAL OF FOREIGN BODY SUBCUTAN | 6/1/2005 | $271.00 | 3 |
| H | 27087 | REMOVAL OF FOREIGN BODY; DEEP | 7/1/1997 | $417.00 | 3 |
| H | 27097 | HAMSTRING RESCESSION PROXIMAL | 7/1/1997 | $417.00 | 3 |
| H | 27098 | ADDUCTOR TRANSFER TO ISCHIUM | 7/1/1997 | $417.00 | 3 |
| H | 27100 | TRANSFER EXTERNAL OBLIQUE MUSCLE | 7/1/1997 | $513.00 | 3 |
| H | 27105 | TRANSFER PARASPINAL MUSCLE TO HI | 7/1/1997 | $513.00 | 3 |
| H | 27110 | TRANSFER ILIOPSOAS; TO GREATER T | 7/1/1997 | $513.00 | 3 |
| H | 27111 | TRANSFER ILIOPSOAS; TO FEMORAL N | 7/1/1997 | $513.00 | 3 |
| H | 27193 | CLOSED TREATMENT OF PELVIC RING | 6/1/2005 | $271.00 | 3 |
| H | 27194 | CLOSED TREATMENT OF PELVIC RING | 7/1/1997 | $363.00 | 3 |
| H | 27202 | OPEN TREATMENT OF COCCYGEAL FRAC | 7/1/1997 | $363.00 | 3 |
| H | 27230 | CLOSED TREATMENT OF FEMORAL FRAC | 6/1/2005 | $271.00 | 3 |
| H | 27238 | CLOSED TREATMENT OF INTERTROCHAN | 6/1/2005 | $271.00 | 3 |
| H | 27246 | CLOSED TREATMENT OF GREATER TROC | 6/1/2005 | $271.00 | 3 |
| H | 27250 | CLOSED TREATMENT OF HIP DISLOCAT | 7/1/1997 | $271.00 | 3 |
| H | 27252 | TREATMENT OF CLOSED HIP DISLOCAT | 7/1/1997 | $363.00 | 3 |
| H | 27257 | TREATMENT OF CONGENITAL HIP DISL | 6/1/2005 | $417.00 | 3 |
| H | 27265 | CLOSED TREATMENT OF POST HIP ART | 7/1/1997 | $271.00 | 3 |
| H | 27266 | CLOSED TREATMENT OF POST HIP ART | 7/1/1997 | $363.00 | 3 |
| H | 27275 | MANIPULATION HIP JOINT REQUIRING | 7/1/1997 | $363.00 | 3 |
| H | 27301 | INCISION AND DRAINAGE OF DEEP AB | 7/1/1997 | $417.00 | 3 |
| H | 27303 | INCISION, DEEP, W/OPENING OF BON | 7/1/1997 | $363.00 | 3 |
| H | 27305 | FASCIOTOMY ILIOTIBIAL (TENOTOMY) | 7/1/1997 | $363.00 | 3 |
| H | 27306 | TENOTOMY, SUBCUTANEOUS, CLOSED, | 7/1/1997 | $417.00 | 3 |
| H | 27307 | TENOTOMY SUBCUTANEOUS CLOSED ADD | 7/1/1997 | $417.00 | 3 |
| H | 27310 | ARTHROTOMY, KNEE, FOR INFECTION, | 7/1/1997 | $513.00 | 3 |
| H | 27315 | NEURECTOMY HAMSTRING MUSCLE | 1/1/2007 | INVALID | N |
| H | 27320 | NEURECTOMY POPITEAL (GASTROCNEMI | 1/1/2007 | INVALID | N |
| H | 27323 | BIOPSY SOFT TISSUES SUPERFICIAL | 6/1/2005 | $271.00 | 3 |
| H | 27324 | BIOPSY, SOFT TISSUE OF THIGH OR | 7/1/1997 | $271.00 | 3 |
| H | 27325 | NEURECTOMY, HAMSTRING MUSCLE | 1/1/2007 | $363.00 | 3 |
| H | 27326 | NEURECTOMY, POPLITEAL (GASTROCNE | 1/1/2007 | $363.00 | 3 |
| H | 27327 | EXCISION, TUMOR, THIGH OR KNEE A | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 27328 | EXCISION, TUMOR, THIGH OR KNEE A | 7/1/1997 | $417.00 | 3 |
| H | 27329 | RADICAL RESECTION OF TUMOR (EG, | 7/1/2003 | $513.00 | 3 |
| H | 27330 | ARTHROTOMY, KNEE; WITH SYNOVIAL | 7/1/1997 | $513.00 | 3 |
| H | 27331 | ARTHROTOMY, KNEE; W/JOINT EXPLOR | 7/1/1997 | $513.00 | 3 |
| H | 27332 | ARTHROTOMY, KNEE, WITH EXCISION | 7/1/1997 | $513.00 | 3 |
| H | 27333 | ARTHROTOMY KNEE FOR EXCISION OF | 7/1/1997 | $513.00 | 3 |
| H | 27334 | ARTHROTOMY, KNEE, WITH SYNOVECTO | 7/1/1997 | $513.00 | 3 |
| H | 27335 | ARTHROTOMY KNEE FOR SYNOVECTOMY; | 7/1/1997 | $513.00 | 3 |
| H | 27340 | EXCISION PREPATELLAR BURSA | 7/1/1997 | $417.00 | 3 |
| H | 27345 | EXCISION OF SYNOVIAL CYST OF POP | 7/1/1997 | $513.00 | 3 |
| H | 27347 | EXCISION OF LESION OF MENISCUS O | 7/1/2003 | $513.00 | 3 |
| H | 27350 | PATELLECTOMY OR HEMIPATELLECTOMY | 7/1/1997 | $513.00 | 3 |
| H | 27355 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 27356 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $513.00 | 3 |
| H | 27357 | EXCISION OR CURETTAGE OF BONE CY | 7/1/2003 | $585.00 | 3 |
| H | 27358 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/2003 | $585.00 | 3 |
| H | 27360 | PART EXCIS(CRATERIZATION,SAUCERI | 7/1/1997 | $585.00 | 3 |
| H | 27372 | REMOVAL OF FOREIGN BODY, DEEP, T | 7/1/1997 | $812.00 | 3 |
| H | 27380 | SUTURE OF INFRAPATELLAR TENDON P | 7/1/1997 | $271.00 | 3 |
| H | 27381 | SUTURE OF INFRAPATELLAR TENDON S | 7/1/1997 | $417.00 | 3 |
| H | 27385 | SUTURE OF QUADRICEPS OR HAMSTRIN | 7/1/1997 | $417.00 | 3 |
| H | 27386 | SUTURE OF QUADRICEPS OR HAMSTRIN | 7/1/1997 | $417.00 | 3 |
| H | 27390 | TENOTOMY, OPEN, HAMSTRING, KNEE | 7/1/1997 | $271.00 | 3 |
| H | 27391 | TENOTOMY OPEN HAMSTRING KNEE TO | 7/1/1997 | $363.00 | 3 |
| H | 27392 | TENOTOMY OPEN HAMSTRING KNEE TO | 7/1/1997 | $417.00 | 3 |
| H | 27393 | LENGTHENING OF HAMSTRING TENDON; | 7/1/1997 | $363.00 | 3 |
| H | 27394 | LENGTHENING OF HAMSTRING TENDON; | 7/1/1997 | $417.00 | 3 |
| H | 27395 | LENGTHENING OF HAMSTRING TENDON; | 7/1/1997 | $417.00 | 3 |
| H | 27396 | TRANSPLANT, HAMSTRING TENDON TO | 7/1/1997 | $417.00 | 3 |
| H | 27397 | TRANSPLANT HAMSTRING TENDON TO P | 7/1/1997 | $417.00 | 3 |
| H | 27400 | TENDON OR MUSCLE TRANSFER HAMSTR | 7/1/1997 | $417.00 | 3 |
| H | 27403 | ARTHROTOMY WITH OPEN MENISCUS RE | 7/1/1997 | $513.00 | 3 |
| H | 27405 | SUTURE PRIMARY TORN RUPTURED OR | 7/1/1997 | $513.00 | 3 |
| H | 27407 | REPAIR PRIMARY TORN LIGAMENT AND | 7/1/1997 | $513.00 | 3 |
| H | 27409 | REPAIR PRIMARY TORN LIGAMENT AND | 7/1/1997 | $513.00 | 3 |
| H | 27418 | ANTERIOR TIBIAL TUBERCLEPLASTY ( | 7/1/1997 | $417.00 | 3 |
| H | 27420 | RECONSTRUCTION FOR RECURRENT DIS | 7/1/1997 | $417.00 | 3 |
| H | 27422 | RECONSTRUCT FOR RECURRENT DISLOC | 7/1/1997 | $812.00 | 3 |
| H | 27424 | RECONSTRUCTION FOR RECURRENT DIS | 7/1/1997 | $417.00 | 3 |
| H | 27425 | LATERAL RETINACULAR RELEASE OPEN | 7/1/1997 | $812.00 | 3 |
| H | 27427 | RECONSTRUCTION (AUGMENTATION) KN | 7/1/1997 | $417.00 | 3 |
| H | 27428 | RECONSTRUCTION (AUGMENTATION) KN | 7/1/1997 | $513.00 | 3 |
| H | 27429 | RECONSTRUCTION (AUGMENTATION) KN | 7/1/1997 | $513.00 | 3 |
| H | 27430 | QUADRICEPS PLASTY (BENNETT OR TH | 7/1/1997 | $513.00 | 3 |
| H | 27435 | CAPSULOTOMY KNEE POSTERIOR CAPSU | 7/1/1997 | $513.00 | 3 |
| H | 27437 | ARTHROPLASTY PATELLA WITHOUT PRO | 7/1/1997 | $513.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 27438 | ARTHROPLASTY PATELLA; WITH PROST | 7/1/1997 | $585.00 | 3 |
| H | 27440 | ARTHROPLASTY KNEE TIBIAL PLATEAU | 7/1/1997 | $585.00 | 3 |
| H | 27441 | ARTHROPLASTY KNEE TIBIAL PLATEAU | 7/1/1997 | $585.00 | 3 |
| H | 27442 | ARTHROPLASTY KNEE FEMORAL CONDYL | 7/1/1997 | $585.00 | 3 |
| H | 27443 | ARTHROPLASTY KNEE FEMORAL CONDYL | 7/1/1997 | $585.00 | 3 |
| H | 27496 | DECOMPRESSION FASCIOTOMY, THIGH | 7/1/2003 | $585.00 | 3 |
| H | 27497 | DECOMPRESSION FASCIOTOMY, THIGH | 6/1/2005 | $417.00 | 3 |
| H | 27498 | DECOMPRESSION FASCIOTOMY, THIGH | 6/1/2005 | $417.00 | 3 |
| H | 27499 | DECOMPRESSION FASCIOTOMY, THIGH | 6/1/2005 | $417.00 | 3 |
| H | 27500 | CLOSED TREATMENT OF FEMORAL SHAF | 6/1/2005 | $271.00 | 3 |
| H | 27501 | CLOSED TREATMENT OF SUPRACONDYLA | 6/1/2005 | $363.00 | 3 |
| H | 27502 | CLOSED TREATMENT OF FEMORAL SHAF | 7/1/1997 | $363.00 | 3 |
| H | 27503 | CLOSED TREATMENT OF SUPRACONDYLA | 6/1/2005 | $417.00 | 3 |
| H | 27507 | OPEN TREATMENT OF FEMORAL SHAFT | 7/1/1997 | $573.00 | 3 |
| H | 27508 | CLOSED TREATMENT OF FEMORAL FRAC | 6/1/2005 | $271.00 | 3 |
| H | 27509 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $417.00 | 3 |
| H | 27510 | CLOSED TREATMENT OF FEMORAL FRAC | 7/1/1997 | $271.00 | 3 |
| H | 27511 | OPEN TREATMENT OF FEMORAL SUPRAC | 7/1/1997 | $585.00 | 3 |
| H | 27513 | OPEN TREATMENT OF FEMORAL SUPRAC | 7/1/1997 | $585.00 | 3 |
| H | 27516 | CLOSED TREATMENT OF DISTAL FEMOR | 6/1/2005 | $271.00 | 3 |
| H | 27517 | CLOSED TREATMENT OF DISTAL FEMOR | 7/1/1997 | $271.00 | 3 |
| H | 27520 | CLOSED TREATMENT OF PATELLAR FRA | 6/1/2005 | $271.00 | 3 |
| H | 27524 | OPEN TREATMENT OF PATELLAR FRACT | 7/1/1997 | $417.00 | 3 |
| H | 27530 | CLOSED TREATMENT OF TIBIAL FRACT | 6/1/2005 | $271.00 | 3 |
| H | 27532 | CLOSED TREATMENT OF TIBIAL FRACT | 7/1/1997 | $271.00 | 3 |
| H | 27535 | OPEN TREATMENT OF TIBIAL FRACTUR | 7/1/1997 | $585.00 | 3 |
| H | 27538 | CLOSED TREATMENT OF INTERCONDYLA | 7/1/1997 | $271.00 | 3 |
| H | 27550 | CLOSED TREATMENT OF KNEE DISLOCA | 7/1/1997 | $271.00 | 3 |
| H | 27552 | TREATMENT OF CLOSED KNEE DISLOCA | 7/1/1997 | $271.00 | 3 |
| H | 27560 | CLOSED TREATMENT OF PATELLAR DIS | 7/1/1997 | $271.00 | 3 |
| H | 27562 | TREATMENT OF CLOSED PATELLAR DIS | 7/1/1997 | $271.00 | 3 |
| H | 27566 | OPEN TREATMENT OF PATELLAR DISLO | 7/1/1997 | $363.00 | 3 |
| H | 27570 | MANIPULATION OF KNEE JOINT UNDER | 7/1/1997 | $271.00 | 3 |
| H | 27594 | AMPUTATION THIGH THROUGH FEMUR A | 6/1/2005 | $417.01 | 3 |
| H | 27600 | DECOMPRESSION FASCIOTOMY, LEG; A | 6/1/2005 | $417.01 | 3 |
| H | 27601 | DECOMPRESSION FASCIOTOMY, LEG; P | 6/1/2005 | $417.00 | 3 |
| H | 27602 | DECOMPRESSION FASCIOTOMY, LEG; A | 6/1/2005 | $417.00 | 3 |
| H | 27603 | INCISION AND DRAINAGE, LEG OR AN | 7/1/1997 | $363.00 | 3 |
| H | 27604 | INCISION AND DRAINAGE; INFECTED | 7/1/1997 | $363.00 | 3 |
| H | 27605 | TENOTOMY, ACHILLES TENDON, SUBCU | 7/1/1997 | $271.00 | 3 |
| H | 27606 | TENOTOMY ACHILLES TENDON SUBCUTA | 7/1/1997 | $271.00 | 3 |
| H | 27607 | INCISION, DEEP, WITH OPENING OF | 7/1/1997 | $363.00 | 3 |
| H | 27610 | ARTHROTOMY, ANKLE, FOR INFECTION | 7/1/1997 | $363.00 | 3 |
| H | 27612 | ARTHROTOMY ANKLE POSTERIOR CAPSU | 7/1/1997 | $417.00 | 3 |
| H | 27613 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2000 | $314.00 | 3 |
| H | 27614 | BIOPSY SOFT TISSUES; DEEP | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 27615 | RADICAL RESECTION OF TUMOR (EG, | 7/1/1997 | $417.00 | 3 |
| H | 27618 | EXCISION, TUMOR, LEG OR ANKLE AR | 7/1/1997 | $363.00 | 3 |
| H | 27619 | EXCISION, TUMOR, LEG OR ANKLE AR | 7/1/1997 | $417.00 | 3 |
| H | 27620 | ARTHROTOMY, ANKLE, W/JOINT EXPLO | 7/1/1997 | $513.00 | 3 |
| H | 27625 | ARTHROTOMY, ANKLE, WITH SYNOVECT | 7/1/1997 | $513.00 | 3 |
| H | 27626 | ARTHROTOMY ANKLE FOR SYNOVECTOMY | 7/1/1997 | $513.00 | 3 |
| H | 27630 | EXCISION OF LESION OF TENDON SHE | 7/1/1997 | $417.00 | 3 |
| H | 27635 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 27637 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 27638 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 27640 | PART EXCISION(CRATERIZATION,SAUC | 7/1/1997 | $363.00 | 3 |
| H | 27641 | PARTIAL EXCISION (CRATERIZATION | 7/1/1997 | $363.00 | 3 |
| H | 27647 | RADICAL RESECTION OF TUMOR, BONE | 6/1/2005 | $417.00 | 3 |
| H | 27650 | REPAIR, PRIMARY, OPEN OR PERCUTA | 7/1/1997 | $417.00 | 3 |
| H | 27652 | REPAIR, PRIMARY, OPEN OR PERCUTA | 7/1/1997 | $417.00 | 3 |
| H | 27654 | REPAIR, SECONDARY, RUPTURED ACHI | 7/1/1997 | $417.00 | 3 |
| H | 27656 | REPAIR FASCIAL DEFECT OF LEG | 7/1/1997 | $363.00 | 3 |
| H | 27658 | REPAIR OR SUTURE OF FLEXOR TENDO | 7/1/1997 | $271.00 | 3 |
| H | 27659 | REPAIR OR SUTURE OF FLEXOR TENDO | 7/1/1997 | $363.00 | 3 |
| H | 27664 | REPAIR OR SUTURE OF EXTENSOR TEN | 7/1/1997 | $363.00 | 3 |
| H | 27665 | REPAIR OR SUTURE OF EXTENSOR TEN | 7/1/1997 | $363.00 | 3 |
| H | 27675 | REPAIR FOR DISLOCATING PERONEAL | 7/1/1997 | $363.00 | 3 |
| H | 27676 | REPAIR FOR DISLOCATING PERONEAL | 7/1/1997 | $417.00 | 3 |
| H | 27680 | TENOLYSIS, INCLUDING TIBIA, FIBU | 7/1/1997 | $417.00 | 3 |
| H | 27681 | TENOLYSIS INCLUDING TIBIA FIBULA | 7/1/1997 | $363.00 | 3 |
| H | 27685 | LENGTHENING OR SHORTENING OF TEN | 7/1/1997 | $417.00 | 3 |
| H | 27686 | LENGTHENING OR SHORTENING OF TEN | 7/1/1997 | $417.00 | 3 |
| H | 27687 | GASTROCNEMIUS RECESSION (EG STRA | 7/1/1997 | $417.00 | 3 |
| H | 27690 | TRANSFER/TRANSPLANT OF SGL TENDO | 7/1/1997 | $513.00 | 3 |
| H | 27691 | TRANSFER OR TRANSPLANT OF SINGLE | 7/1/1997 | $513.00 | 3 |
| H | 27692 | TRANSFER OR TRANSPLANT OF SINGLE | 7/1/1997 | $417.00 | 3 |
| H | 27695 | SUTURE PRIMARY TORN RUPTURED OR | 7/1/1997 | $363.00 | 3 |
| H | 27696 | SUTURE PRIMARY TORN RUPTURED OR | 7/1/1997 | $363.00 | 3 |
| H | 27698 | SUTURE SECONDARY REPAIR TORN RUP | 7/1/1997 | $363.00 | 3 |
| H | 27700 | ARTHROPLASTY ANKLE | 7/1/1997 | $585.00 | 3 |
| H | 27704 | REMOVAL OF ANKLE IMPLANT | 7/1/1997 | $363.00 | 3 |
| H | 27705 | OSTEOTOMY TIBIA | 7/1/1997 | $363.00 | 3 |
| H | 27707 | OSTEOTOMY; FIBULA | 7/1/1997 | $363.00 | 3 |
| H | 27709 | OSTEOTOMY; TIBIA AND FIBULA | 7/1/1997 | $363.00 | 3 |
| H | 27715 | OSTEOPLASTY TIBIA AND FIBULA LEN | 7/1/1997 | $513.00 | 3 |
| H | 27720 | REPAIR OF NONUNION OR MALUNION T | 8/9/2002 | $513.00 | 3 |
| H | 27722 | REPAIR OF NONUNION OR MALUNION T | 7/1/2003 | $513.00 | 3 |
| H | 27724 | REPAIR OF NONUNION OR MALUNION T | 7/1/2003 | $513.00 | 3 |
| H | 27725 | REPAIR OF NONUNION OR MALUNION T | 7/1/2003 | $513.00 | 3 |
| H | 27730 | ARREST, EPIPHYSEAL (EPIPHYSIODES | 7/1/1997 | $363.00 | 3 |
| H | 27732 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 27734 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 7/1/1997 | $363.00 | 3 |
| H | 27740 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 7/1/1997 | $363.00 | 3 |
| H | 27742 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 7/1/1997 | $363.00 | 3 |
| H | 27745 | PROPHYLACTIC TREATMENT (NAILING | 7/1/1997 | $417.00 | 3 |
| H | 27750 | CLOSED TREATMENT OF TIBIAL SHAFT | 6/1/2005 | $271.00 | 3 |
| H | 27752 | CLOSED TREATMENT OF TIBIAL SHAFT | 7/1/1997 | $271.00 | 3 |
| H | 27756 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $417.00 | 3 |
| H | 27758 | OPEN TREATMENT OF TIBIAL SHAFT F | 7/1/1997 | $513.00 | 3 |
| H | 27759 | TREATMENT OF TIBIAL SHAFT FRACTU | 7/1/1997 | $513.00 | 3 |
| H | 27760 | CLOSED TREATMENT OF MEDIAL MALLE | 6/1/2005 | $271.00 | 3 |
| H | 27762 | CLOSED TREATMENT OF MEDIAL MALLE | 7/1/1997 | $271.00 | 3 |
| H | 27766 | OPEN TREATMENT OF MEDIAL MALLEOL | 7/1/1997 | $417.00 | 3 |
| H | 27780 | CLOSED TREATMENT OF PROXIMAL FIB | 6/1/2005 | $271.00 | 3 |
| H | 27781 | TREATMENT OF CLOSED PROXIMAL FIB | 7/1/1997 | $271.00 | 3 |
| H | 27784 | OPEN TREATMENT OF PROXIMAL FIBUL | 7/1/1997 | $417.00 | 3 |
| H | 27786 | CLOSED TREATMENT OF DISTAL FIBUL | 6/1/2005 | $271.00 | 3 |
| H | 27788 | TREATMENT OF CLOSED DISTAL FIBUL | 7/1/1997 | $271.00 | 3 |
| H | 27792 | OPEN TREATMENT OF DISTAL FIBULAR | 7/1/1997 | $417.00 | 3 |
| H | 27808 | CLOSED TREATMENT OF BIMALLEOLAR | 6/1/2005 | $271.00 | 3 |
| H | 27810 | TREATMENT OF CLOSED BIMALLEOLAR | 7/1/1997 | $271.00 | 3 |
| H | 27814 | OPEN TREATMENT OF BIMALLEOLAR AN | 7/1/1997 | $417.00 | 3 |
| H | 27816 | CLOSED TREATMENT OF TRIMALLEOLAR | 6/1/2005 | $271.00 | 3 |
| H | 27818 | TREATMENT OF CLOSED TRIMALLEOLAR | 7/1/1997 | $271.00 | 3 |
| H | 27822 | OPEN TREATMENT OF TRIMALLEOLAR A | 7/1/1997 | $417.00 | 3 |
| H | 27823 | OPEN TREATMENT OF TRIMALLEOLAR A | 7/1/1997 | $417.00 | 3 |
| H | 27824 | CLOSED TREATMENT OF FRACTURE OF | 7/1/1997 | $271.00 | 3 |
| H | 27825 | CLOSED TREATMENT OF FRACTURE OF | 6/1/2005 | $363.00 | 3 |
| H | 27826 | OPEN TREATMENT OF FRACTURE OF WE | 7/1/1997 | $417.00 | 3 |
| H | 27827 | OPEN TREATMENT OF FRACTURE OF WE | 7/1/1997 | $417.00 | 3 |
| H | 27828 | OPEN TREATMENT OF FRACTURE OF WE | 6/1/2005 | $513.00 | 3 |
| H | 27829 | OPEN TREATMENT OF DISTAL TIBIOFI | 6/1/2005 | $363.00 | 3 |
| H | 27830 | CLOSED TREATMENT OF PROXIMAL TIB | 7/1/1997 | $271.00 | 3 |
| H | 27831 | TREATMENT OF PROXIMAL TIBIOFIBUL | 7/1/1997 | $271.00 | 3 |
| H | 27832 | OPEN TREATMENT OF PROXIMAL TIBIO | 7/1/1997 | $363.00 | 3 |
| H | 27840 | CLOSED TREATMENT OF ANKLE DISLOC | 7/1/1997 | $271.00 | 3 |
| H | 27842 | CLOSED TREATMENT OF ANKLE DISLOC | 7/1/1997 | $271.00 | 3 |
| H | 27846 | OPEN TREATMENT OF ANKLE DISLOCAT | 7/1/1997 | $417.00 | 3 |
| H | 27848 | OPEN TREATMENT OF ANKLE DISLOCAT | 7/1/1997 | $417.00 | 3 |
| H | 27860 | MANIPULATION OF ANKLE UNDER GENE | 7/1/1997 | $271.00 | 3 |
| H | 27870 | ARTHRODESIS, ANKLE, OPEN | 7/1/1997 | $513.00 | 3 |
| H | 27871 | ARTHRODESIS TIBIOFIBULAR JOINT P | 7/1/1997 | $513.00 | 3 |
| H | 27884 | AMPUTATION LEG THROUGH TIBIA AND | 7/1/2002 | $417.00 | 3 |
| H | 27889 | ANKLE DISARTICULATION | 6/1/2005 | $417.00 | 3 |
| H | 27892 | DECOMPRESSION FASCIOTOMY, LEG; A | 6/1/2005 | $417.00 | 3 |
| H | 27893 | DECOMPRESSION FASCIOTOMY, LEG; P | 6/1/2005 | $417.00 | 3 |
| H | 27894 | DECOMPRESSION FASCIOTOMY, LEG; A | 6/1/2005 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 28002 | DEEP DISSECT BELOW FASCIA,FOR DE | 7/1/1997 | $417.00 | 3 |
| H | 28003 | DEEP DISSECT BELOW FASCIA, FOR D | 7/1/1997 | $417.00 | 3 |
| H | 28005 | INCISION, DEEP, WITH OPENING OF | 7/1/1997 | $417.00 | 3 |
| H | 28008 | FASCIOTOMY, FOOT AND/OR TOE | 7/1/1997 | $417.00 | 3 |
| H | 28011 | TENOTOMY SUBCUTANEOUS TOE; MULTI | 6/1/2005 | $417.00 | 3 |
| H | 28020 | ARTHROTOMY WITH EXPLORATION DRAI | 7/1/1997 | $363.00 | 3 |
| H | 28022 | ARTHROTOMY WITH EXPLORATION DRAI | 7/1/2003 | $363.00 | 3 |
| H | 28024 | ARTHROTOMY WITH EXPLORATION DRAI | 7/1/2003 | $363.00 | 3 |
| H | 28030 | NEURECTOMY OF INTRINSIC MUSCULAT | 1/1/2007 | INVALID | N |
| H | 28035 | TARSAL TUNNEL RELEASE (POSTERIOR | 7/1/1997 | $513.00 | 3 |
| H | 28043 | EXCISION TUMOR, FOOT; SUBCUTANEO | 7/1/1997 | $363.00 | 3 |
| H | 28045 | EXCISION, TUMOR, FOOT; DEEP, SUB | 7/1/1997 | $417.00 | 3 |
| H | 28046 | RADICAL RESECTION OF TUMOR (EG, | 7/1/1997 | $417.00 | 3 |
| H | 28050 | ARTHROTOMY FOR SYNOVIAL BIOPSY; | 7/1/1997 | $363.00 | 3 |
| H | 28052 | ARTHROTOMY FOR SYNOVIAL BIOPSY; | 7/1/2003 | $363.00 | 3 |
| H | 28054 | ARTHROTOMY FOR SYNOVIAL BIOPSY; | 7/1/1997 | $363.00 | 3 |
| H | 28055 | NEURECTOMY, INTRINSIC MUSCULATUR | 1/1/2007 | $363.00 | 3 |
| H | 28060 | FASCIECTOMY EXCISION OF PLANTAR | 7/1/1997 | $363.00 | 3 |
| H | 28062 | FASCIECTOMY EXCISION OF PLANTAR | 7/1/1997 | $417.00 | 3 |
| H | 28070 | SYNOVECTOMY INTERTARSAL OR TARSO | 7/1/1997 | $417.00 | 3 |
| H | 28072 | SYNOVECTOMY; METATARSOPHALANGEAL | 7/1/1997 | $417.00 | 3 |
| H | 28080 | EXCISION OF INTERDIGITAL (MORTON | 7/1/1997 | $417.00 | 3 |
| H | 28086 | SYNOVECTOMY, TENDON SHEATH, FOOT | 7/1/1997 | $363.00 | 3 |
| H | 28088 | SYNOVECTOMY, TENDON SHEATH, FOOT | 7/1/1997 | $363.00 | 3 |
| H | 28090 | EXCISION OF LESION OF TENDON/FIB | 7/1/1997 | $417.00 | 3 |
| H | 28092 | EXCISION OF LESION OF TENDON/FIB | 7/1/1997 | $417.00 | 3 |
| H | 28100 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $363.00 | 3 |
| H | 28102 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/1997 | $417.00 | 3 |
| H | 28103 | EXCISION OR CURETTAGE OF BONE CY | 7/1/1997 | $417.00 | 3 |
| H | 28104 | EXCISION OR CURETTAGE OF BONE CY | 7/1/2002 | $363.00 | 3 |
| H | 28106 | EXCISION/CURETTAGE OF BONE CYST/ | 7/1/1997 | $417.00 | 3 |
| H | 28107 | EXCIS/CURETTAGE OF BONE CYST/BEN | 7/1/1997 | $417.00 | 3 |
| H | 28110 | OSTECTOMY PARTIAL EXCISION FIFTH | 7/1/1997 | $417.00 | 3 |
| H | 28111 | OSTECTOMY, COMPLETE EXCISION; FI | 7/1/1997 | $417.00 | 3 |
| H | 28112 | OSTECTOMY COMPLETE EXCISION; OTH | 7/1/1997 | $417.00 | 3 |
| H | 28113 | OSTECTOMY COMPLETE EXCISION; FIF | 7/1/1997 | $417.00 | 3 |
| H | 28114 | OSTECTOMY, COMP EXCISION; ALL ME | 7/1/1997 | $417.00 | 3 |
| H | 28116 | OSTECTOMY EXCISION OF TARSAL COA | 7/1/1997 | $417.00 | 3 |
| H | 28118 | OSTECTOMY, CALCANEUS | 7/1/1997 | $513.00 | 3 |
| H | 28119 | OSTECTOMY CALCANEUS; FOR SPUR WI | 7/1/1997 | $513.00 | 3 |
| H | 28120 | PART EXCISION(CRATERIZATION,SAUC | 7/1/1997 | $812.00 | 3 |
| H | 28122 | PART EXCISION(CRATERIZATION,SAUC | 7/1/1997 | $417.00 | 3 |
| H | 28126 | RESECTION, PARTIAL OR COMPLETE, | 6/1/2005 | $417.00 | 3 |
| H | 28130 | TALECTOMY (ASTRAGALECTOMY) | 7/1/1997 | $417.00 | 3 |
| H | 28140 | METATARSECTOMY | 7/1/1997 | $417.00 | 3 |
| H | 28150 | PHALANGECTOMY SINGLE EACH | 7/1/1997 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 28153 | RESECTION HEAD OF PHALANX | 6/1/2005 | $417.00 | 3 |
| H | 28160 | HEMIPHALANGECTOMY OR INTERPHALAN | 6/1/2005 | $417.00 | 3 |
| H | 28171 | RADICAL RESECTION OF TUMOR, BONE | 7/1/1997 | $417.00 | 3 |
| H | 28173 | RADICAL RESECTION OF TUMOR, BONE | 7/1/1997 | $417.00 | 3 |
| H | 28175 | RADICAL RESECTION OF TUMOR, BONE | 7/1/1997 | $417.00 | 3 |
| H | 28192 | REMOVE FOREIGN BODY; DEEP | 7/1/1997 | $363.00 | 3 |
| H | 28193 | REMOVAL OF FOREIGN BODY, FOOT; C | 7/1/1997 | $513.00 | 3 |
| H | 28200 | REPAIR OR SUTURE OF TENDON, FOOT | 7/1/1997 | $417.00 | 3 |
| H | 28202 | REPAIR OR SUTURE OF TENDON, FOOT | 7/1/1997 | $417.00 | 3 |
| H | 28208 | REPAIR OR SUTURE OF TENDON, FOOT | 7/1/1997 | $417.00 | 3 |
| H | 28210 | REPAIR OR SUTURE OF TENDON, FOOT | 7/1/1997 | $417.00 | 3 |
| H | 28222 | TENOLYSIS, FLEXOR, FOOT; MULTIPL | 7/1/1997 | $271.00 | 3 |
| H | 28225 | TENOLYSIS, EXTENSOR, FOOT; SINGL | 7/1/1997 | $271.00 | 3 |
| H | 28226 | TENOLYSIS, EXTENSOR, FOOT; MULTI | 7/1/1997 | $271.00 | 3 |
| H | 28234 | TENOTOMY OPEN EXTENSOR FOOT OR T | 7/1/2003 | $363.00 | 3 |
| H | 28238 | RECONSTRUCTION, POSTERIOR TIBIAL | 7/1/1997 | $417.00 | 3 |
| H | 28240 | TENOTOMY LENGTHENING, OR RELEASE | 7/1/1997 | $363.00 | 3 |
| H | 28250 | DIVISION OF PLANTAR FASCIA AND M | 7/1/1997 | $417.00 | 3 |
| H | 28260 | CAPSULOTOMY, MIDFOOT; MEDIAL REL | 7/1/1997 | $417.00 | 3 |
| H | 28261 | CAPSULOTOMY MIDFOOT; WITH TENDON | 7/1/1997 | $417.00 | 3 |
| H | 28262 | CAPSULOTOMY MIDFOOT EXTENSIVE IN | 7/1/1997 | $513.00 | 3 |
| H | 28264 | CAPSULOTOMY MIDTARSAL(HEYMAN TYP | 7/1/1997 | $271.00 | 3 |
| H | 28270 | CAPSULOTOMY; METATARSOPHALANGEAL | 6/1/2005 | $417.00 | 3 |
| H | 28280 | WEBBING OPERATION (CREATE SYNDAC | 6/1/2005 | $363.00 | 3 |
| H | 28285 | HAMMERTOE OPERATION; ONE TOE (EG | 7/1/1997 | $417.00 | 3 |
| H | 28286 | HAMMERTOE OPERATION, ONE TOE (EG | 7/1/1997 | $513.00 | 3 |
| H | 28288 | OSTECTOMY, PARTIAL, EXOSTECTOMY | 10/1/2002 | $417.00 | 3 |
| H | 28289 | HALLUS REGIDUS CORRECTION WIT CH | 6/1/2005 | $417.00 | 3 |
| H | 28290 | HALLUX VALGUS (BUNION) CORRECTIO | 7/1/1997 | $363.00 | 3 |
| H | 28292 | HALLUX VALGUS (BUNION) CORRECTIO | 10/1/2003 | NC | 9 |
| H | 28293 | HALLUX VALGUS (BUNION) CORRECTIO | 8/1/2004 | $417.00 | 3 |
| H | 28294 | HALLUX VALGUS (BUNION) CORRECTIO | 7/1/1997 | $417.00 | 3 |
| H | 28296 | HALLUX VALGUS (BUNION) CORRECTIO | 7/1/1997 | $417.00 | 3 |
| H | 28297 | HALLUX VALGUS (BUNION) CORRECTIO | 7/1/1997 | $417.00 | 3 |
| H | 28298 | HALLUX VALGUS (BUNION) CORRECTIO | 7/1/1997 | $417.00 | 3 |
| H | 28299 | CORRECTION, HALLUX VALGUS (BUNIO | 7/1/1997 | $585.00 | 3 |
| H | 28300 | OSTEOTOMY CALCANEUS (DWYER OR CH | 7/1/1997 | $363.00 | 3 |
| H | 28302 | OSTEOTOMY; TALUS | 7/1/1997 | $363.00 | 3 |
| H | 28304 | OSTEOTOMY MIDTARSAL BONES OTHER | 7/1/1997 | $363.00 | 3 |
| H | 28305 | OSTEOTOMY MIDTARSAL BONES OTHER | 7/1/1997 | $417.00 | 3 |
| H | 28306 | OSTEOTOMY, METATARSAL, BASE/SHAF | 7/1/1997 | $513.00 | 3 |
| H | 28307 | OSTEOTOMY,METATARSAL,BASE/SHAFT, | 7/1/2002 | $513.00 | 3 |
| H | 28308 | OSTEOTOMY, METATARSAL, BASE/SHAF | 7/1/1997 | $363.00 | 3 |
| H | 28309 | OSTEOTOMY METATRSALS MULTIPLE FO | 7/1/1997 | $513.00 | 3 |
| H | 28310 | OSTEOTOMY FOR SHORTENING, ANGULA | 7/1/1997 | $417.00 | 3 |
| H | 28312 | OSTEOTOMY FOR SHORTENING, ANGULA | 7/1/1997 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 28313 | RECONSTRUCTION, ANGULAR DEFORMIT | 7/1/1997 | $363.00 | 3 |
| H | 28315 | SESAMOIDECTOMY FIRST TOE (SEPARA | 7/1/1997 | $513.00 | 3 |
| H | 28320 | REPAIR OF NONUNION OR MALUNION; | 7/1/1997 | $513.00 | 3 |
| H | 28322 | REPAIR OF NONUNION OR MALUNION; | 7/1/1997 | $513.00 | 3 |
| H | 28340 | RECONSTRUCTION, TOE, MACRODACTYL | 6/1/2005 | $513.00 | 3 |
| H | 28341 | RECONSTRUCTION, TOE, MACRODACTYL | 6/1/2005 | $513.00 | 3 |
| H | 28344 | RECONSTRUCTION, TOE(S); POLYDACT | 6/1/2005 | $513.00 | 3 |
| H | 28345 | RECONSTRUCTION, TOE(S); SYNDACTY | 6/1/2005 | $513.00 | 3 |
| H | 28400 | CLOSED TREATMENT OF CALCANEAL FR | 6/1/2005 | $271.00 | 3 |
| H | 28405 | CLOSED TREATMENT OF CALCANEAL FR | 7/1/1997 | $363.00 | 3 |
| H | 28406 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 28415 | OPEN TREATMENT OF CALCANEAL FRAC | 7/1/1997 | $417.00 | 3 |
| H | 28420 | OPEN TREAT OF CLOSED/OPEN CALCAN | 7/1/1997 | $513.00 | 3 |
| H | 28435 | TREATMENT OF CLOSED TALUS FRACTU | 7/1/1997 | $363.00 | 3 |
| H | 28436 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 28445 | OPEN TREATMENT OF TALUS FRACTURE | 7/1/1997 | $417.00 | 3 |
| H | 28456 | PERCUTANEOUS SKELETAL FIXATION O | 6/1/2005 | $363.00 | 3 |
| H | 28465 | OPEN TREATMENT OF TARSAL BONE FR | 7/1/1997 | $417.00 | 3 |
| H | 28476 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 28485 | OPEN TREATMENT OF METATARSAL FRA | 7/1/1997 | $513.00 | 3 |
| H | 28496 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 28505 | OPEN TREATMENT OF FRACTURE GREAT | 7/1/1997 | $417.00 | 3 |
| H | 28525 | OPEN TREATMENT OF FRACTURE, PHAL | 7/1/1997 | $417.00 | 3 |
| H | 28531 | OPEN TREATMENT OF SESAMOID FRACT | 4/15/2002 | $417.00 | 3 |
| H | 28545 | TREATMENT OF CLOSED TARSAL BONE | 7/1/1997 | $271.00 | 3 |
| H | 28546 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 28555 | OPEN TREATMENT OF TARSAL BONE DI | 7/1/1997 | $363.00 | 3 |
| H | 28575 | TREATMENT OF CLOSED TALOTARSAL J | 7/1/1997 | $271.00 | 3 |
| H | 28576 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $417.00 | 3 |
| H | 28585 | OPEN TREATMENT OF TALOTARSAL JOI | 7/1/1997 | $417.00 | 3 |
| H | 28605 | TREATMENT OF CLOSED TARSOMETATAR | 7/1/1997 | $271.00 | 3 |
| H | 28606 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $363.00 | 3 |
| H | 28615 | OPEN TREATMENT OF TARSOMETATARSA | 7/1/1997 | $417.00 | 3 |
| H | 28635 | TREATMENT OF CLOSED METATARSOPHA | 7/1/1997 | $271.00 | 3 |
| H | 28636 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $417.00 | 3 |
| H | 28645 | OPEN TREATMENT OF METATARSOPHALA | 7/1/1997 | $417.00 | 3 |
| H | 28665 | TREATMENT OF CLOSED INTERPHALANG | 7/1/1997 | $271.00 | 3 |
| H | 28666 | PERCUTANEOUS SKELETAL FIXATION O | 7/1/1997 | $417.00 | 3 |
| H | 28675 | OPEN TREATMENT OF INTERPHALANGEA | 7/1/1997 | $417.00 | 3 |
| H | 28705 | PANTALAR ARTHRODESIS | 7/1/1997 | $513.00 | 3 |
| H | 28715 | TRIPLE ARTHRODESIS | 7/1/1997 | $513.00 | 3 |
| H | 28725 | SUBTALAR ARTHRODESIS (INCLUDES G | 7/1/1997 | $513.00 | 3 |
| H | 28730 | ARTHRODESIS MIDTARSAL ORTARSOMET | 7/1/1997 | $513.00 | 3 |
| H | 28735 | ARTHRODESIS MIDTARSAL OR TARSOME | 7/1/1997 | $513.00 | 3 |
| H | 28737 | ARTHRODESIS, WITH TENDON LENGTHE | 7/1/1997 | $585.00 | 3 |
| H | 28740 | ARTHRODESIS MIDTARSAL OR TARSOME | 7/1/1997 | $513.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 28750 | ARTHRODESIS, GREAT TOE; METATARS | 7/1/1997 | $513.00 | 3 |
| H | 28755 | ARTHRODESIS, GREAT TOE; INTERPHA | 7/1/1997 | $513.00 | 3 |
| H | 28760 | ARTHRODESIS, GREAT TOE, INTERPHA | 7/1/1997 | $513.00 | 3 |
| H | 28800 | AMPUTATION FOOT MIDTARSAL (CHOPA | 4/15/2002 | $363.00 | 3 |
| H | 28805 | AMPUTATION FOOT; TRANSMETATARSAL | 4/15/2002 | $363.00 | 3 |
| H | 28810 | AMPUTATION METATARSAL WITH TOE S | 7/1/1997 | $363.00 | 3 |
| H | 28820 | AMPUTATION, TOE; METATARSOPHALAN | 7/1/1997 | $363.00 | 3 |
| H | 28825 | AMPUTATION TOE; INTERPHALANGEAL | 7/1/1997 | $363.00 | 3 |
| H | 29800 | ARTHROSCOPY, TEMPOROMANDIBULAR J | 6/1/2005 | $417.00 | 3 |
| H | 29804 | ARTHROSCOPY, TEMPOROMANDIBULAR J | 7/1/1997 | $417.00 | 3 |
| H | 29805 | ARTHROSCOPY, SHOULDER, DIAGNOSTI | 1/1/2002 | $417.00 | 3 |
| H | 29806 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2002 | $417.00 | 3 |
| H | 29807 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2002 | $417.00 | 3 |
| H | 29815 | ARTHROSCOPY SHOULDER DIAGNOSTIC | 4/1/2002 | INVALID | N |
| H | 29819 | ARTHROSCOPY SHOULDER SURGICAL WI | 7/1/1997 | $417.00 | 3 |
| H | 29820 | ARTHROSCOPY SHOULDER SURGICAL SY | 7/1/1997 | $417.00 | 3 |
| H | 29821 | ARTHROSCOPY SHOULDER SURGICAL SY | 7/1/1997 | $417.00 | 3 |
| H | 29822 | ARTHROSCOPY SHOULDER SURGICAL DE | 7/1/1997 | $417.00 | 3 |
| H | 29823 | ARTHROSCOPY SHOULDER SURGICAL DE | 7/1/1997 | $417.00 | 3 |
| H | 29824 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2002 | $585.00 | 3 |
| H | 29825 | ARTHROSCOPY SHOULDER SURGICAL WI | 7/1/1997 | $417.00 | 3 |
| H | 29826 | ARTHROSCOPY, SHOULDER, SURGICAL; | 7/1/1997 | $417.00 | 3 |
| H | 29827 | ARTHROSCOPY, SHOULDER, SURGICAL; | 6/1/2005 | $585.00 | 3 |
| H | 29830 | ARTHROSCOPY ELBOW DIAGNOSTIC WIT | 7/1/1997 | $417.00 | 3 |
| H | 29834 | ARTHROSCOPY ELBOW SURGICAL WITH | 7/1/1997 | $417.00 | 3 |
| H | 29835 | ARTHROSCOPY ELBOW SURGICAL SYNOV | 7/1/1997 | $417.00 | 3 |
| H | 29836 | ARTHROSCOPY ELBOW SURGICAL SYNOV | 7/1/1997 | $417.00 | 3 |
| H | 29837 | ARTHROSCOPY ELBOW SURGICAL DEBRI | 7/1/1997 | $417.00 | 3 |
| H | 29838 | ARTHROSCOPY ELBOW SURGICAL DEBRI | 7/1/1997 | $417.00 | 3 |
| H | 29840 | ARTHROSCOPY, WRIST, DIAGNOSTIC, | 7/1/1997 | $417.00 | 3 |
| H | 29843 | ARTHROSCOPY, WRIST, SURGICAL; FO | 7/1/1997 | $417.00 | 3 |
| H | 29844 | SYNOVECTOMY, PARTIAL | 7/1/1997 | $417.00 | 3 |
| H | 29845 | SYNOVECTOMY, COMPLETE | 7/1/1997 | $417.00 | 3 |
| H | 29846 | EXCISION OF TRIANGULAR FIBROCART | 7/1/1997 | $417.00 | 3 |
| H | 29847 | INTERNAL FIXATION FOR FRACTURE O | 7/1/1997 | $417.00 | 3 |
| H | 29848 | ARTHROSCOPY, WRIST, SURGICAL; W/ | 1/1/2004 | $1,150.00 | 3 |
| H | 29850 | ARTHROSCOPICALLY AIDED TREATMENT | 6/1/2005 | $513.00 | 3 |
| H | 29851 | ARTHROSCOPICALLY AIDED TREATMENT | 6/1/2005 | $513.00 | 3 |
| H | 29855 | ARTHROSCOPICALLY AIDED TREATMENT | 6/1/2005 | $513.00 | 3 |
| H | 29856 | ARTHROSCOPICALLY AIDED TREATMENT | 6/1/2005 | $513.00 | 3 |
| H | 29860 | ARTHROSCOPY, HIP, DIAGNOSTIC WIT | 7/1/2003 | $513.00 | 3 |
| H | 29861 | ARTHROSCOPY, HIP, SURGICAL; WITH | 7/1/2003 | $513.00 | 3 |
| H | 29862 | ARTHROSCOPY, HIP, SURGICAL; WITH | 1/1/2004 | $1,150.00 | 3 |
| H | 29863 | ARTHROSCOPY, HIP, SURGICAL; WITH | 7/1/2003 | $513.00 | 3 |
| H | 29870 | ARTHROSCOPY KNEE DIAGNOSTIC WITH | 7/1/1997 | $417.00 | 3 |
| H | 29871 | ARTHROSCOPY, KNEE, SURGICAL; FOR | 7/1/1997 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 29873 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 6/1/2005 | $417.00 | 3 |
| H | 29874 | ARTHROSCOPY, KNEE, SURGICAL; FOR | 7/1/1997 | $417.00 | 3 |
| H | 29875 | ARTHROSCOPY, KNEE, SURGICAL; SYN | 7/1/1997 | $513.00 | 3 |
| H | 29876 | ARTHROSCOPY, KNEE, SURGICAL; SYN | 7/1/1997 | $513.00 | 3 |
| H | 29877 | ARTHROSCOPY, KNEE, SURGICAL; DEB | 7/1/1997 | $513.00 | 3 |
| H | 29879 | ARTHROSCOPY, KNEE, SURGICAL; ABR | 7/1/1997 | $417.00 | 3 |
| H | 29880 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 7/1/1997 | $513.00 | 3 |
| H | 29881 | ARTHROSCOPY, KNEE, SURGICAL; W/M | 7/1/1997 | $513.00 | 3 |
| H | 29882 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 7/1/1997 | $417.00 | 3 |
| H | 29883 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 7/1/1997 | $417.00 | 3 |
| H | 29884 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 7/1/1997 | $417.00 | 3 |
| H | 29885 | ARTHROSCOPY,KNEE,SURG;DRILL FOR | 7/1/1997 | $417.00 | 3 |
| H | 29886 | ARTHROSCOPY, KNEE, SURGICAL; DRI | 7/1/1997 | $417.00 | 3 |
| H | 29887 | ARTHROSCOPY, KNEE, SURGICAL; DRI | 7/1/1997 | $417.00 | 3 |
| H | 29888 | AUTHROSCOPICALLY AIDED INTERIOR | 7/1/1997 | $417.00 | 3 |
| H | 29889 | ARTHROSCOPICALLY AIDED POSTERIOR | 7/1/1997 | $417.00 | 3 |
| H | 29891 | ARTHROSCOPY, ANKLE, SURGICAL; EX | 7/1/2003 | $446.00 | 3 |
| H | 29892 | ARTHROSCOPICALLY AIDED REPAIR OF | 7/1/2003 | $446.00 | 3 |
| H | 29893 | ENDOSCOPIC PLANTAR FASCIOTOMY | 1/1/2004 | $1,150.00 | 3 |
| H | 29894 | ARTHROSCOPY, ANKLE (TIBIOTALAR & | 7/1/1997 | $417.00 | 3 |
| H | 29895 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 7/1/1997 | $417.00 | 3 |
| H | 29897 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 7/1/1997 | $417.00 | 3 |
| H | 29898 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 7/1/1997 | $417.00 | 3 |
| H | 29899 | ARTHROSCOPY, ANKLE, SURGICAL; WI | 1/1/2003 | $513.00 | 3 |
| H | 29900 | ARTHROSCOPY, METACARPOPHALANGEAL | 1/1/2002 | $417.00 | 3 |
| H | 29901 | ARTHROSCOPY, METACARPOPHALANGEAL | 1/1/2002 | $417.00 | 3 |
| H | 29902 | ARTHROSCOPY, METACARPOPHALANGEAL | 1/1/2002 | $417.00 | 3 |
| H | 29909 | UNLISTED PROCEDURE ATHROSCOPY | 4/1/2002 | INVALID | N |
| H | 30115 | EXCISION, NASAL POLYP(S), EXTENS | 7/1/1997 | $363.00 | 3 |
| H | 30117 | EXCISION OR DESTRUCTION (EG, LAS | 7/1/1997 | $417.00 | 3 |
| H | 30118 | EXCISION INTRANASAL LESION; EXTE | 7/1/1997 | $417.00 | 3 |
| H | 30120 | EXCISION OR SURGICAL PLANING OF | 1/1/1984 | NC | 9 |
| H | 30124 | EXCISION DERMOID CYST NOSE SIMPL | 7/1/1997 | $271.00 | 3 |
| H | 30125 | EXCISION DERMOID CYST NOSE; COMP | 7/1/1997 | $363.00 | 3 |
| H | 30130 | EXCISION INFERIOR TURBINATE, PAR | 7/1/1997 | $417.00 | 3 |
| H | 30140 | SUBMUCOUS RESECTION INFERIOR TUR | 7/1/1997 | $363.00 | 3 |
| H | 30150 | RHINECTOMY; PARTIAL | 7/1/1997 | $417.00 | 3 |
| H | 30160 | RHINECTOMY; TOTAL | 7/1/1997 | $513.00 | 3 |
| H | 30310 | REMOVAL FOREIGN BODY INTRANASAL; | 7/1/1997 | $271.00 | 3 |
| H | 30320 | REMOVAL FOREIGN BODY INTRANASAL; | 7/1/1997 | $363.00 | 3 |
| H | 30400 | RHINOPLASTY, PRIMARY; LATERAL AN | 1/1/2000 | $595.00 | 3 |
| H | 30410 | RHINOPLASTY,PRIMARY;COMP,EXT PAR | 1/1/2000 | $678.00 | 3 |
| H | 30420 | RHINOPLASTY PRIMARY; INCLUDING M | 1/1/2000 | $678.00 | 3 |
| H | 30430 | RHINOPLASTY, SECONDARY; MINOR RE | 1/1/2000 | $482.00 | 3 |
| H | 30435 | RHINOPLASTY SECONDARY; INTERMEDI | 1/1/2000 | $678.00 | 3 |
| H | 30450 | RHINOPLASTY SECONDARY; MAJOR REV | 1/1/2000 | $941.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 30460 | RHINOPLASTY FOR NASAL DEFORMITY | 7/1/2003 | $812.00 | 3 |
| H | 30462 | RHINOPLASTY FOR NASAL DEFORMITY | 1/1/2004 | $1,150.00 | 3 |
| H | 30465 | REPAIR OF NASAL VESTIBULAR STENO | 1/1/2004 | $1,150.00 | 3 |
| H | 30520 | SEPTOPLASTY OR SUBMUCOUS RESECTI | 7/1/1997 | $513.00 | 3 |
| H | 30540 | REPAIR CHOANAL ATRESIA INTRANASA | 7/1/1997 | $585.00 | 3 |
| H | 30545 | REPAIR CHOANAL ATRESIA; TRANSPAL | 7/1/2003 | $585.00 | 3 |
| H | 30560 | LYSIS INTRANASAL SYNECHIA | 7/1/1997 | $363.00 | 3 |
| H | 30580 | REPAIR FISTULA; OROMAXILLARY | 7/1/1997 | $513.00 | 3 |
| H | 30600 | REPAIR FISTULA; ORONASAL | 7/1/1997 | $513.00 | 3 |
| H | 30620 | SEPTAL OR OTHER INTRANASAL DERMA | 1/1/1998 | $812.00 | 3 |
| H | 30630 | REPAIR NASAL SEPTAL PERFORATIONS | 7/1/1997 | $812.00 | 3 |
| H | 30801 | CAUTERY AND/OR ABLATION, MUCOSA | 7/1/1997 | $271.00 | 3 |
| H | 30802 | CAUTERIZATION AND/OR ABLATION, M | 7/1/1997 | $271.00 | 3 |
| H | 30903 | CONTROL NASAL HEMORRHAGE,ANTERIO | 1/1/2000 | $314.00 | 3 |
| H | 30905 | CONTROL NASAL HEMORRHAGE, POSTER | 7/1/1997 | $271.00 | 3 |
| H | 30906 | CONTROL NASAL HEMORRHAGE POSTERI | 7/1/1997 | $271.00 | 3 |
| H | 30915 | LIGATION ARTERIES; ETHMOIDAL | 7/1/1997 | $363.00 | 3 |
| H | 30920 | LIGATION ARTERIES; INTERNAL MAXI | 7/1/1997 | $417.00 | 3 |
| H | 30930 | FRACTURE NASAL INFERIOR TURBINAT | 7/1/2003 | $513.00 | 3 |
| H | 31020 | SINUSOTOMY, MAXILLARY (ANTROTOMY | 7/1/1997 | $363.00 | 3 |
| H | 31030 | SINUSOTOMY, MAXILLARY (ANTROTOMY | 7/1/1997 | $417.00 | 3 |
| H | 31032 | SINUSOTOMY, MAXILLARY (ANTROTOMY | 7/1/1997 | $513.00 | 3 |
| H | 31050 | SINUSOTOMY, SPHENOID, WITH OR WI | 7/1/1997 | $363.00 | 3 |
| H | 31051 | SINUSOTOMY, SPHENOID, WITH OR WI | 7/1/1997 | $513.00 | 3 |
| H | 31070 | SINUSOTOMY FRONTAL; EXTERNAL, SI | 7/1/1997 | $363.00 | 3 |
| H | 31075 | SINUSOTOMY FRONTAL; TRANSORBITAL | 7/1/1997 | $513.00 | 3 |
| H | 31080 | SINUSOTOMY FRONTAL; OBLITERATIVE | 7/1/1997 | $513.00 | 3 |
| H | 31081 | SINUSOTOMY FRONTAL; OBLITERATIVE | 7/1/2003 | $513.00 | 3 |
| H | 31084 | SINUSOTOMY FRONTAL; OBLITERATIVE | 10/1/2002 | $513.00 | 3 |
| H | 31085 | SINUSOTOMY FRONTAL; OBLITERATIVE | 7/1/2003 | $513.00 | 3 |
| H | 31086 | SINUSOTOMY FRONTAL; NONOBLITERAT | 7/1/1997 | $513.00 | 3 |
| H | 31087 | SINUSOTOMY FRONTAL; NONOBLITERAT | 7/1/2003 | $513.00 | 3 |
| H | 31090 | SINUSOTOMY COMBINED THREE OR MOR | 7/1/1997 | $585.00 | 3 |
| H | 31200 | ETHMOIDECTOMY; INTRANASAL, ANTER | 7/1/1997 | $363.00 | 3 |
| H | 31201 | ETHMOIDECTOMY; INTRANASAL TOTAL | 7/1/1997 | $585.00 | 3 |
| H | 31205 | ETHMOIDECTOMY; EXTRANASAL TOTAL | 7/1/1997 | $417.00 | 3 |
| H | 31233 | NASAL/SINUS ENDOSCOPY, DIAGNOSTI | 7/1/1997 | $271.00 | 3 |
| H | 31235 | NASAL/SINUS ENDOSCOPY, DIAGNOSTI | 7/1/1997 | $271.00 | 3 |
| H | 31237 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 7/1/1997 | $271.00 | 3 |
| H | 31238 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 7/1/1997 | $271.00 | 3 |
| H | 31239 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 7/1/1997 | $271.00 | 3 |
| H | 31240 | NASAL/SINUS ENDOSCOPY, SURGICAL; | 7/1/1997 | $271.00 | 3 |
| H | 31254 | NASAL ENDOSCOPY, SURGICAL; WITH | 7/1/1997 | $417.00 | 3 |
| H | 31255 | NASAL ENDOSCOPY, SURGICAL; WITH | 7/1/1997 | $585.00 | 3 |
| H | 31256 | NASAL ENDOSCOPY, SURGICAL; WITH | 7/1/1997 | $417.00 | 3 |
| H | 31267 | MAXILLARY SINUS ENDOSCOPY, SURGI | 7/1/1997 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 31276 | NASAL/SINUS ENDOSCOPY, SURGICAL | 7/1/1997 | $217.00 | 3 |
| H | 31287 | NASAL/SINUS ENDOSCOPY, SURGICAL, | 7/1/1997 | $363.00 | 3 |
| H | 31288 | NASAL/SINUS ENDOSCOPY, SURGICAL, | 7/1/1997 | $363.00 | 3 |
| H | 31300 | LARYNGOTOMY (THYROTOMY LARYNGOFI | 7/1/1997 | $585.00 | 3 |
| H | 31320 | LARYNGOTOMY (THYROTOMY LARYNOFIS | 7/1/1997 | $363.00 | 3 |
| H | 31400 | ARYTENOIDECTOMY OR ARYTENOIDOPEX | 7/1/2003 | $363.00 | 3 |
| H | 31420 | EPIGLOTTIDECTOMY | 7/1/2003 | $363.00 | 3 |
| H | 31510 | LARYNGOSCOPY INDIRECT (SEPARATE | 7/1/1997 | $363.00 | 3 |
| H | 31511 | LARYNGOSCOPY INDIRECT (SEPARATE | 7/1/1997 | $363.00 | 3 |
| H | 31512 | LARYNGOSCOPY INDIRECT (SEPARATE | 7/1/1997 | $363.00 | 3 |
| H | 31513 | LARYNGOSCOPY INDIRECT (SEPARATE | 7/1/1997 | $363.00 | 3 |
| H | 31515 | LARYNGOSCOPY DIRECT, WITH OR WIT | 7/1/1997 | $271.00 | 3 |
| H | 31525 | LARYNGOSCOPY DIRECT; DIAGNOSTIC | 7/1/1997 | $271.00 | 3 |
| H | 31526 | LARYNGOSCOPY DIRECT; W/OR W/OUT | 7/1/1997 | $363.00 | 3 |
| H | 31527 | LARYNGOSCOPY DIRECT; WITH INSERT | 7/1/1997 | $271.00 | 3 |
| H | 31528 | LARYNGOSCOPY DIRECT, WITH OR WIT | 7/1/1997 | $363.00 | 3 |
| H | 31529 | LARYNGOSCOPY DIRECT, WITH OR WIT | 7/1/1997 | $363.00 | 3 |
| H | 31530 | LARYNGOSCOPY DIRECT OPERATIVE WI | 7/1/1997 | $363.00 | 3 |
| H | 31531 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 7/1/1997 | $417.00 | 3 |
| H | 31535 | LARYNGOSCOPY DIRECT OPERATIVE WI | 7/1/1997 | $363.00 | 3 |
| H | 31536 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 7/1/1997 | $417.00 | 3 |
| H | 31540 | LARYNGOSCOPY DIRECT OPERATIVE WI | 7/1/1997 | $417.00 | 3 |
| H | 31541 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 7/1/1997 | $513.00 | 3 |
| H | 31560 | LARYNGOSCOPY DIRECT OPERATIVE WI | 7/1/1997 | $585.00 | 3 |
| H | 31561 | LARYNGOSCOPY, DIRECT, OPERATIVE, | 7/1/1997 | $585.00 | 3 |
| H | 31570 | LARYNGOSCOPY DIRECT WITH INJECTI | 7/1/1997 | $363.00 | 3 |
| H | 31571 | LARYNGOSCOPY, DIRECT, W/INJECTIO | 7/1/1997 | $363.00 | 3 |
| H | 31576 | LARYNGOSCOPY, FLEXIBLE FIBEROPTI | 7/1/1997 | $363.00 | 3 |
| H | 31577 | LARYNGOSCOPY, FLEXIBLE FIBEROPTI | 7/1/1997 | $363.00 | 3 |
| H | 31578 | LARYNGOSCOPY, FLEXIBLE FIBEROPTI | 7/1/1997 | $363.00 | 3 |
| H | 31580 | LARYNGOPLASTY FOR LARYNGEAL WEB | 7/1/1997 | $585.00 | 3 |
| H | 31582 | LARYNGOPLASTY; FOR LARYNGEAL STE | 7/1/1997 | $585.00 | 3 |
| H | 31584 | LARYNGOPLASTY; WITH OPEN REDUCTI | 7/1/1997 | $513.00 | 3 |
| H | 31585 | TREATMENT OF CLOSED LARYNGEAL FR | 1/1/2006 | INVALID | N |
| H | 31586 | TREATMENT OF CLOSED LARYNGEAL FR | 1/1/2006 | INVALID | N |
| H | 31588 | LARYNGOPLASTY, NOT OTHERWISE SPE | 7/1/1997 | $585.00 | 3 |
| H | 31590 | LARYNGEAL REINNERVATION BY NEURO | 7/1/1997 | $585.00 | 3 |
| H | 31595 | SECTION RECURRENT LARYNGEAL NERV | 7/1/1997 | $363.00 | 3 |
| H | 31600 | TRACHEOSTOMY PLANNED (SEPARATE P | 7/1/1997 | $363.00 | 3 |
| H | 31611 | CONSTRUCTION OF TRACHEOESOPHAGEA | 7/1/1997 | $417.00 | 3 |
| H | 31612 | TRACHEAL PUNCTURE, PERCUTANEOUS | 7/1/1997 | $271.00 | 3 |
| H | 31613 | TRACHEOSTOMA REVISION; SIMPLE, W | 7/1/1997 | $363.00 | 3 |
| H | 31614 | TRACHEOSTOMA REVISION; COMPLEX W | 7/1/1997 | $363.00 | 3 |
| H | 31615 | TRACHEOSCOPY THROUGH ESTABLISHED | 7/1/1997 | $271.00 | 3 |
| H | 31622 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/1997 | $271.00 | 3 |
| H | 31623 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/2003 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 31624 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/2003 | $363.00 | 3 |
| H | 31625 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/1997 | $363.00 | 3 |
| H | 31628 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/1997 | $363.00 | 3 |
| H | 31629 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/1997 | $363.00 | 3 |
| H | 31630 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/1997 | $363.00 | 3 |
| H | 31631 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/1997 | $363.00 | 3 |
| H | 31635 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/1997 | $363.00 | 3 |
| H | 31640 | BRONCHOSCOPY, RIGID OR FLEX, W/O | 7/1/1997 | $363.00 | 3 |
| H | 31641 | BRONCHOSCOPY, (RIGID OR FLEXIBLE | 7/1/1997 | $363.00 | 3 |
| H | 31643 | BRONCHOSCOPY; WITH PLACEMENT OF | 7/1/2003 | $363.00 | 3 |
| H | 31645 | BRONCHOSCOPY; WITH THERAPEUTIC A | 7/1/1997 | $271.00 | 3 |
| H | 31646 | BRONCHOSCOPY; WITH THERAPEUTIC A | 7/1/1997 | $271.00 | 3 |
| H | 31656 | BRONCHOSCOPY; WITH INJECTION OF | 7/1/1997 | $271.00 | 3 |
| H | 31700 | CATHETERIZATION TRANSGLOTIC (SEP | 1/1/2007 | INVALID | N |
| H | 31708 | INSTILLATION OF CONTRAST MATERIA | 1/1/2007 | INVALID | N |
| H | 31710 | CATHETERIZATION FOR BRONCHOGRAPH | 1/1/2007 | INVALID | N |
| H | 31715 | TRANSTRACHEAL INJECTION FOR BRON | 7/1/1997 | $271.00 | 3 |
| H | 31717 | CATHETERIZATION WITH BRONCHIAL B | 7/1/1997 | $271.00 | 3 |
| H | 31720 | CATHETER ASPIRATION (SEPARATE PR | 7/1/1997 | $271.00 | 3 |
| H | 31730 | TRANSTRACHEAL INTRODUCTION OF NE | 7/1/1997 | $271.00 | 3 |
| H | 31750 | TRACHEOPLASTY; CERVICAL | 7/1/1997 | $585.00 | 3 |
| H | 31755 | TRACHEOPLASTY; TRACHEOPHARYNGEAL | 7/1/1997 | $363.00 | 3 |
| H | 31785 | EXCISION OF TRACHEAL TUMOR OR CA | 7/1/1997 | $513.00 | 3 |
| H | 31800 | SUTURE OF TRACHEAL WOUND OR INJU | 7/1/1997 | $363.00 | 3 |
| H | 31820 | SURGICAL CLOSURE TRACHEOSTOMY OR | 7/1/1997 | $271.00 | 3 |
| H | 31825 | SURGICAL CLOSURE TRACHEOSTOMY OF | 7/1/1997 | $363.00 | 3 |
| H | 31830 | REVISION OF TRACHEOSTOMY SCAR | 7/1/1997 | $363.00 | 3 |
| H | 32000 | THORACENTESIS PUNCTURE OF PLEURA | 7/1/1997 | $271.00 | 3 |
| H | 32002 | THORACENTESIS WITH INSERTION OF | 7/1/1997 | $363.00 | 3 |
| H | 32005 | CHEMICAL PLEURODESIS (EG FOR REC | 7/1/1997 | $363.00 | 3 |
| H | 32020 | TUBE THORACOSTOMY W/WO WATER SEA | 7/1/1997 | $363.00 | 3 |
| H | 32400 | BIOPSY, PLEURA; PERCUTANEOUS NEE | 7/1/1997 | $271.00 | 3 |
| H | 32405 | BIOPSY, LUNG OR MEDIASTINUM, PER | 7/1/1997 | $271.00 | 3 |
| H | 32420 | PNEUMONOCENTESIS, PUNCTURE OF LU | 7/1/1997 | $271.00 | 3 |
| H | 32520 | RESECTION OF LUNG WITH RESECTION | 1/1/2006 | INVALID | N |
| H | 32522 | RESECTION OF LUNG; WITH RECONSTR | 1/1/2006 | INVALID | N |
| H | 32525 | RESECTION OF LUNG; WITH MAJOR RE | 1/1/2006 | INVALID | N |
| H | 33010 | PERICARDIOCENTESIS INITIAL | 7/1/1997 | $363.00 | 3 |
| H | 33011 | PERICARDIOCENTESIS; SUBSEQUENT | 7/1/1997 | $363.00 | 3 |
| H | 33200 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | INVALID | N |
| H | 33201 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | INVALID | N |
| H | 33222 | REVISION OR RELOCATION OF SKIN P | 7/1/2003 | $363.00 | 3 |
| H | 33246 | IMPLANT OF AUTO IMPLANT CARDIO-D | 1/1/2007 | INVALID | N |
| H | 34101 | EMBOLECTOMY OR THROMBECTOMY WITH | 7/1/1997 | $417.00 | 3 |
| H | 35161 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2005 | INVALID | N |
| H | 35162 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 35188 | REPAIR ACQUIRED OR TRAUMATIC ART | 7/1/2003 | $513.00 | 3 |
| H | 35207 | REPAIR BLOOD VESSELS OR A-V FIST | 7/1/2003 | $513.00 | 3 |
| H | 35381 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | INVALID | N |
| H | 35507 | BYPASS GRAFT VEIN; SUBCLAVIAN-CA | 1/1/2007 | INVALID | N |
| H | 35541 | BYPASS GRAFT, WITH VEIN; AORTOIL | 1/1/2007 | INVALID | N |
| H | 35546 | BYPASS GRAFT VEIN; AORTOFEMORAL | 1/1/2007 | INVALID | N |
| H | 35641 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | INVALID | N |
| H | 35875 | THROMBECTOMY OF ARTERIAL OR VENO | 1/1/2004 | $1,150.00 | 3 |
| H | 35876 | THROMBECTOMY OF ARTERIAL OR VENO | 1/1/2004 | $1,150.00 | 3 |
| H | 36260 | INSERTION OF IMPLANTABLE INFUSIO | 7/1/2003 | $446.00 | 3 |
| H | 36261 | REVISION OF IMPLANTED INFUSION P | 7/1/1997 | $363.00 | 3 |
| H | 36262 | REMOVAL OF IMPLANTED INFUSION PU | 7/1/1997 | $271.00 | 3 |
| H | 36470 | INJECTION OF SCLEROSING SOLUTION | 4/1/1988 | NC | 9 |
| H | 36471 | INJECTION OF SCLEROSING SOLUTION | 4/1/1988 | NC | 9 |
| H | 36488 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| H | 36489 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| H | 36490 | CUTDOWN PLACEMENT OF CENTRAL VEN | 4/1/2004 | INVALID | N |
| H | 36491 | OVER AGE 2 (FOR EXAMINATION OF P | 4/1/2004 | INVALID | N |
| H | 36520 | THERAPEUTIC APHERESIS (PLASMA AN | 7/1/2003 | INVALID | N |
| H | 36530 | INSERTION OF IMPLANTABLE INTRAVE | 4/1/2004 | INVALID | N |
| H | 36531 | REVISION OF IMPLANTABLE INTRAVEN | 4/1/2004 | INVALID | N |
| H | 36532 | REMOVAL OF IMPLANTABLE INTRAVENO | 4/1/2004 | INVALID | N |
| H | 36533 | INSERTION OF IMPLANTABLE VENOUS | 4/1/2004 | INVALID | N |
| H | 36534 | REVISION OF IMPLANTABLE VENOUS A | 4/1/2004 | INVALID | N |
| H | 36535 | REMOVAL OF IMPLANTABLE VENOUS AC | 4/1/2004 | INVALID | N |
| H | 36555 | INSERTION OF NON-TUNNELED CENTRA | 4/1/2004 | $217.00 | 3 |
| H | 36556 | INSERTION OF NON-TUNNELED CENTRA | 4/1/2004 | $217.00 | 3 |
| H | 36557 | INSERTION OF TUNNELED CENTRALLY | 4/1/2004 | $363.00 | 3 |
| H | 36558 | INSERTION OF TUNNELED CENTRALLY | 4/1/2004 | $363.00 | 3 |
| H | 36560 | INSERTION OF TUNNELED CENTRALLY | 4/1/2004 | $417.00 | 3 |
| H | 36561 | INSERTION OF TUNNELED CENTRALLY | 4/1/2004 | $417.00 | 3 |
| H | 36563 | INSERTION OF TUNNELED CENTRALLY | 4/1/2004 | $417.00 | 3 |
| H | 36565 | INSERTION OF TUNNELED CENTRALLY | 4/1/2004 | $417.00 | 3 |
| H | 36566 | INSERTION OF TUNNELED CENTRALLY | 4/1/2004 | $417.00 | 3 |
| H | 36568 | INSERTION OF PERIPHERALLY INSERT | 4/1/2004 | $217.00 | 3 |
| H | 36569 | INSERTION OF PERIPHERALLY INSERT | 4/1/2004 | $217.00 | 3 |
| H | 36570 | INSERTION OF PERIPHERALLY INSERT | 4/1/2004 | $417.00 | 3 |
| H | 36571 | INSERTION OF PERIPHERALLY INSERT | 4/1/2004 | $417.00 | 3 |
| H | 36575 | REPAIR OF TUNNELED OR NON-TUNNEL | 4/1/2004 | $363.00 | 3 |
| H | 36576 | REPAIR OF CENTRAL VENOUS ACCESS | 4/1/2004 | $363.00 | 3 |
| H | 36578 | REPLACEMENT, CATHETER ONLY, OF C | 4/1/2004 | $363.00 | 3 |
| H | 36580 | REPLACEMENT, COMPLETE, OF A NON- | 4/1/2004 | $217.00 | 3 |
| H | 36581 | REPLACEMENT, COMPLETE, OF A TUNN | 4/1/2004 | $363.00 | 3 |
| H | 36582 | REPLACEMENT, COMPLETE, OF A TUNN | 4/1/2004 | $417.00 | 3 |
| H | 36583 | REPLACEMENT, COMPLETE, OF A TUNN | 4/1/2004 | $417.00 | 3 |
| H | 36584 | REPLACEMENT, COMPLETE, OF A PERI | 4/1/2004 | $217.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 36585 | REPLACEMENT, COMPLETE, OF A PERI | 4/1/2004 | $417.00 | 3 |
| H | 36589 | REMOVAL OF TUNNELED CENTRAL VENO | 4/1/2004 | $217.00 | 3 |
| H | 36590 | REMOVAL OF TUNNELED CENTRAL VENO | 4/1/2004 | $217.00 | 3 |
| H | 36640 | ARTERIAL CATHETERIZATION FOR PRO | 7/1/1997 | $271.00 | 3 |
| H | 36800 | INSERTION OF CANNULA FOR HEMODIA | 7/1/1997 | $417.00 | 3 |
| H | 36810 | INSERTION OF CANNULA FOR HEMODIA | 7/1/1997 | $417.00 | 3 |
| H | 36815 | INSERTION OF CANNULA FOR HEMODIA | 7/1/1997 | $417.00 | 3 |
| H | 36819 | ARTERIOVENOUS ANASTOMOSIS, OPEN; | 1/1/2002 | $417.00 | 3 |
| H | 36820 | ARTERIOVENOUS ANASTOMOSIS, OPEN; | 1/1/2002 | $417.00 | 3 |
| H | 36821 | ARTERIOVENOUS ANASTOMOSIS, DIREC | 7/1/1997 | $513.00 | 3 |
| H | 36825 | CREATION OF ARTERIOVENOUS FISTUL | 7/1/1997 | $513.00 | 3 |
| H | 36830 | CREATION OF ARTERIOVENOUS FISTUL | 7/1/1997 | $513.00 | 3 |
| H | 36831 | THROMBECTOMY, OPEN, ARTERIOVENOU | 1/1/2004 | $1,150.00 | 3 |
| H | 36832 | REVISION, OPEN, ARTERIOVENOUS FI | 7/1/1997 | $513.00 | 3 |
| H | 36835 | INSERTION OF THOMAS SHUNT (SEP P | 7/1/1997 | $513.00 | 3 |
| H | 36860 | CANNULA DECLOTTING (SEP PROC); W | 7/1/1997 | $363.00 | 3 |
| H | 36861 | CANNULA DECLOTTING; WITH BALLOON | 7/1/1997 | $417.00 | 3 |
| H | 36870 | THROMBECTOMY, PERCUTANEOUS, ARTE | 1/1/2004 | $1,150.00 | 3 |
| H | 37607 | LIGATION OR BANDING OF ANGIOACCE | 7/1/2003 | $446.00 | 3 |
| H | 37609 | LIGATION OR BIOPSY TEMPORAL ARTE | 7/1/1997 | $363.00 | 3 |
| H | 37650 | LIGATION OF FEMORAL VEIN | 7/1/2003 | $363.00 | 3 |
| H | 37700 | LIGATION AND DIVISION OF LONG SA | 7/1/1997 | $363.00 | 3 |
| H | 37718 | LIGATION, DIVISION, AND STRIPPIN | 10/1/2006 | $417.00 | 3 |
| H | 37720 | LIGATION AND DIVISION AND COMPLE | 1/1/2006 | INVALID | N |
| H | 37722 | LIGATION, DIVISION, AND STRIPPIN | 10/1/2006 | $417.00 | 3 |
| H | 37730 | LIGATION AND DIVISION AND COMPLE | 1/1/2006 | INVALID | N |
| H | 37735 | LIGATION & DIV & COMP STRIP OF L | 7/1/1997 | $417.00 | 3 |
| H | 37760 | LIGATION OF PERFORATOR VEINS, SU | 7/1/1997 | $417.00 | 3 |
| H | 37780 | LIGATION AND DIVISION OF SHORT S | 7/1/1997 | $417.00 | 3 |
| H | 37788 | PENILE REVASCULARIZATION, ARTERY | 3/1/1992 | NC | 9 |
| H | 38300 | DRAINAGE OF LYMPH NODE ABSCESS O | 7/1/1997 | $271.00 | 3 |
| H | 38305 | DRAINAGE OF LYMPH NODE ABSCESS O | 7/1/1997 | $363.00 | 3 |
| H | 38308 | LYMPHANGIOTOMY OR OTHER OPERATIO | 7/1/1997 | $363.00 | 3 |
| H | 38500 | BIOPSY OR EXCISION OF LY,PH NODE | 7/1/1997 | $363.00 | 3 |
| H | 38505 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/1999 | $314.00 | 3 |
| H | 38510 | BIOPSY OR EXCISION OF LYMPH NODE | 7/1/1997 | $363.00 | 3 |
| H | 38520 | BIOPSY OR EXCISION OF LYMPH NODE | 7/1/1997 | $363.00 | 3 |
| H | 38525 | BIOPSY OR EXCISION OF LYMPH NODE | 7/1/1997 | $363.00 | 3 |
| H | 38530 | BIOPSY OR EXCISION OF LYMPH NODE | 7/1/1997 | $363.00 | 3 |
| H | 38542 | DISSECTION; DEEP JUGULAR NODE | 7/1/1997 | $363.00 | 3 |
| H | 38550 | EXCISION OF CYSTIC HYGROMA, AXIL | 7/1/1997 | $417.00 | 3 |
| H | 38555 | EXCISION OF CYSTIC HYGROMA, AXIL | 7/1/1997 | $513.00 | 3 |
| H | 38570 | LAPAROSCOPY, SURGICAL; W/RETROPE | 1/1/2004 | $1,150.00 | 3 |
| H | 38571 | LAPAROSCOPY, SURGICAL; WITH BILA | 1/1/2004 | $1,150.00 | 3 |
| H | 38572 | LAPAROSCOPY, SURGICAL; W/BILATER | 1/1/2004 | $1,150.00 | 3 |
| H | 38700 | SUPRAHYOID LYMPHADENECTOMY | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 38740 | AXILLARY LYMPHADENECTOMY SUPERFI | 7/1/1997 | $363.00 | 3 |
| H | 38745 | AXILLARY LYMPHADENECTOMY; COMPLE | 7/1/1997 | $513.00 | 3 |
| H | 38760 | INGUINOFEMORAL LYMPHADENECTOMY, | 7/1/1997 | $363.00 | 3 |
| H | 38790 | INJECTION PROCEDURE FOR LYMPHANG | 7/1/1997 | $271.00 | 3 |
| H | 40500 | VERMILIONECTOMY (LIP SHAVE) WITH | 7/1/1997 | $363.00 | 3 |
| H | 40510 | EXCISION LIP TRANSVERSE WEDGE EX | 7/1/1997 | $363.00 | 3 |
| H | 40520 | EXCISION LIP; V-EXCISION WITH PR | 7/1/1997 | $363.00 | 3 |
| H | 40525 | EXCISION LIP; FULL THICKNESS REC | 7/1/1997 | $363.00 | 3 |
| H | 40527 | EXCISION LIP; FULL THICKNESS REC | 7/1/1997 | $363.00 | 3 |
| H | 40530 | RESECTION LIP MORE THAN ONE-FOUR | 7/1/1997 | $363.00 | 3 |
| H | 40650 | REPAIR LIP FULL THICKNESS VERMIL | 7/1/1997 | $417.00 | 3 |
| H | 40652 | REPAIR LIP FULL THICKNESS; UP TO | 7/1/1997 | $417.00 | 3 |
| H | 40654 | REPAIR LIP FULL THICKNESS; OVER | 7/1/1997 | $417.00 | 3 |
| H | 40700 | PLASTIC REPAIR OF CLEFT LIP/NASA | 7/1/2003 | $812.00 | 3 |
| H | 40701 | PLASTIC REPAIR OF CLEFT LIP; PRI | 7/1/2003 | $812.00 | 3 |
| H | 40720 | PLASTIC REPAIR OF CLEFT LIP; SEC | 7/1/2003 | $812.00 | 3 |
| H | 40761 | PLASTIC REPAIR OF CLEFT LIP WITH | 7/1/2003 | $446.00 | 3 |
| H | 40801 | DRAINAGE OF ABSCESS CYST HEMATOM | 7/1/1997 | $363.00 | 3 |
| H | 40805 | REMOVAL OF EMBEDDED FOREIGN BODY | 7/1/1997 | $363.00 | 3 |
| H | 40806 | INCISION OF LABIAL FRENUM(FRENOT | 1/1/2000 | $314.00 | 3 |
| H | 40814 | EXCISION OF LESION OF MUCOSA AND | 7/1/1997 | $363.00 | 3 |
| H | 40816 | EXCISION OR LESION OF MUCOSA SUB | 7/1/1997 | $363.00 | 3 |
| H | 40818 | EXCISION OF MUCOSA OF VESIBULE O | 7/1/1997 | $271.00 | 3 |
| H | 40819 | EXCISION OF FRENUM LABIAL OR BUC | 7/1/1997 | $271.00 | 3 |
| H | 40820 | DESTRUCTION OF LESION OR SCAR BY | 7/1/1997 | $217.12 | 3 |
| H | 40831 | CLOSURE OF LACERATION, VESTIBULE | 7/1/1997 | $271.00 | 3 |
| H | 40840 | VESTIBULOPLASTY ANTERIOR | 1/1/2000 | $422.00 | 3 |
| H | 40842 | VESTIBULOPLASTY; POSTERIOR UNILA | 1/1/2000 | $482.00 | 3 |
| H | 40843 | VESTIBULOPLASTY; POSTERIOR BILAT | 1/1/2000 | $482.00 | 3 |
| H | 40844 | VESTIBULOPLASTY; ENTIRE ARCH | 1/1/2000 | $678.00 | 3 |
| H | 40845 | VESTIBULOPLASTY; COMPLEX (INCLUD | 1/1/2000 | $678.00 | 3 |
| H | 41000 | INCISION AND DRAINAGE OF INTRAOR | 7/1/1997 | $271.00 | 3 |
| H | 41005 | INCISION & DRAINAGE OF INTRAORAL | 7/1/1997 | $271.00 | 3 |
| H | 41006 | INCISION & DRAIN OF INTRAORAL AB | 7/1/1997 | $271.00 | 3 |
| H | 41007 | INCISION & DRAIN OF INTRAORAL AB | 7/1/1997 | $271.00 | 3 |
| H | 41008 | INCISION & DRAIN OF INTRAORAL AB | 7/1/1997 | $271.00 | 3 |
| H | 41009 | INCISION & DRAIN OF INTRAORAL AB | 7/1/1997 | $271.00 | 3 |
| H | 41010 | INCISION OF LINGUAL FRENUM (FREN | 7/1/1997 | $271.00 | 3 |
| H | 41015 | INCISION AND DRAINAGE OF EXTRAOR | 7/1/1997 | $271.00 | 3 |
| H | 41016 | INCISION AND DRAINAGE OF ETRAORA | 7/1/1997 | $271.00 | 3 |
| H | 41017 | INCISION AND DRAINAGE OF EXTRAOR | 7/1/1997 | $271.00 | 3 |
| H | 41018 | INCISION AND DRAINAGE OF EXTRAOR | 7/1/1997 | $271.00 | 3 |
| H | 41105 | BIOPSY TONGUE; POSTERIOR ONE-THI | 7/1/1997 | $363.00 | 3 |
| H | 41110 | EXCISION LESION OF TONGUE WITHOU | 7/1/1997 | $271.00 | 3 |
| H | 41112 | WITH CLOSURE ANTERIOR TWO-THIRDS | 7/1/1997 | $363.00 | 3 |
| H | 41113 | EXCISION OF LESION OF TONGUE WIT | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 41114 | EXCISION OF LESION OF TONGUE WIT | 7/1/1997 | $363.00 | 3 |
| H | 41115 | EXCISION OF LINGUAL FRENUM (FREN | 7/1/1997 | $271.00 | 3 |
| H | 41116 | EXCISION LESION OF FLOOR OF MOUT | 7/1/1997 | $271.00 | 3 |
| H | 41120 | GLOSSECTOMY LESS THAN ONE-HALF T | 7/1/1997 | $585.00 | 3 |
| H | 41250 | REPAIR LACERATION UP TO 2 CM FLO | 7/1/1997 | $363.00 | 3 |
| H | 41251 | REPAIR LACERATION UP TO 2 CM; PO | 7/1/1997 | $363.00 | 3 |
| H | 41252 | REPAIR LACERATION OF TONGUE FLOO | 7/1/1997 | $363.00 | 3 |
| H | 41500 | FIXATION TONGUE MECHANCIAL OTHER | 7/1/1997 | $271.00 | 3 |
| H | 41510 | SUTURE TONGUE TO LIP FOR MICROGN | 7/1/1997 | $271.00 | 3 |
| H | 41520 | FRENOPLASTY (SURGICAL REVISION O | 7/1/1997 | $363.00 | 3 |
| H | 41800 | DRAINAGE ABSCESS CYST HEMATOMA | 7/1/1997 | $271.00 | 3 |
| H | 41805 | REMOVAL EMBEDDED FOREIGN BODY FR | 7/1/1997 | $271.00 | 3 |
| H | 41806 | REMOVAL EMBEDDED FOREIGN BODY; F | 7/1/1997 | $271.00 | 3 |
| H | 41827 | EXCISION OF LESION OR TUMOR (EXC | 7/1/1997 | $363.00 | 3 |
| H | 41870 | PERIODONTAL MUCOSAL GRAFTING | 5/27/1994 | NC | 9 |
| H | 41872 | GINGIVOPLASTY, EACH QUADRANT (SP | 5/27/1994 | NC | 9 |
| H | 41874 | ALVEOLOPLASTY, EACH QUADRANT (SP | 5/27/1994 | NC | 9 |
| H | 41899 | UNLISTED PROCEDURE DENTOALVEOIAR | 4/1/1989 | $0.01 | 5 |
| H | 42000 | DRAINAGE OF ABSCESS OF PALATE UV | 7/1/1997 | $363.00 | 3 |
| H | 42104 | EXCISION LESION OF PALATE UVULA | 7/1/1997 | $363.00 | 3 |
| H | 42106 | EXCISION LESION OF PALATE UVULA; | 7/1/1997 | $363.00 | 3 |
| H | 42107 | EXCISION LESION OF PALATE UVULA; | 7/1/1997 | $363.00 | 3 |
| H | 42120 | RESECTION PALATE OR EXTENSIVE RE | 7/1/1997 | $513.00 | 3 |
| H | 42140 | UVULECTOMY EXCISION OF UVULA | 7/1/1997 | $363.00 | 3 |
| H | 42145 | PALATOPHARYNGOPLASTY (EG, UVULOP | 7/1/1997 | $585.00 | 3 |
| H | 42160 | DESTRUCTION OF LESION PALATE OR | 7/1/1997 | $271.00 | 3 |
| H | 42180 | REPAIR LACERATION OF PALATE UP T | 7/1/1997 | $271.00 | 3 |
| H | 42182 | REPAIR LACERATION OF PALATE; OVE | 7/1/1997 | $363.00 | 3 |
| H | 42200 | PALATOPLASTY FOR CLEFT PALATE SO | 7/1/1997 | $585.00 | 3 |
| H | 42205 | PALATOPLASTY FOR CLEFT PALATE WI | 7/1/1997 | $585.00 | 3 |
| H | 42210 | PALATOPLASTY FOR CLEFT PALATE WI | 7/1/1997 | $585.00 | 3 |
| H | 42215 | PALATOPLASTY FOR CLEFT PALATE MA | 7/1/1997 | $812.00 | 3 |
| H | 42220 | PALATOPLASTY FOR CLEFT PALATE; S | 7/1/1997 | $585.00 | 3 |
| H | 42225 | PALATOPLASTY FOR CLEFT PALATE; A | 7/1/1997 | $585.00 | 3 |
| H | 42226 | LENGTHENING OF PALATE, AND PHARY | 7/1/2003 | $585.00 | 3 |
| H | 42235 | REPAIR ANTERIOR PALATE INCLUDING | 7/1/1997 | $585.00 | 3 |
| H | 42260 | REPAIR NASOLABIAL FISTULA | 7/1/1997 | $513.00 | 3 |
| H | 42281 | INSERTION OF PIN-RETAINED PALATA | 7/1/1997 | $417.00 | 3 |
| H | 42300 | DRAINAGE ABSCESS PAROTID SIMPLE | 7/1/1997 | $271.00 | 3 |
| H | 42305 | DRAINAGE OF ABCESS; PAROTID, COM | 7/1/1997 | $363.00 | 3 |
| H | 42310 | SUBMAXILLARY OR SUBLINGUAL INTRA | 7/1/1997 | $271.00 | 3 |
| H | 42320 | DRAINAGE OF ABCESS; SUBMAXILLARY | 7/1/1997 | $271.00 | 3 |
| H | 42325 | FISTULIZATION SUBLINGUAL SALIVAR | 1/1/2006 | INVALID | N |
| H | 42326 | WITH PROSTHESIS | 1/1/2006 | INVALID | N |
| H | 42335 | SIALOLITHOTOMY; SUBMANDIBULAR (S | 7/1/1997 | $417.00 | 3 |
| H | 42340 | SIALOLITHOTOMY; PAROTID EXTRAORA | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 42405 | BIOPSY SALIVARY GLAND; INCISIONA | 7/1/1997 | $363.00 | 3 |
| H | 42408 | EXCISION SUBLINGUAL SALIVARY CYS | 7/1/1997 | $417.00 | 3 |
| H | 42409 | MARSUPIALIZATION SUBLINGUAL SALI | 7/1/1997 | $417.00 | 3 |
| H | 42410 | EXCISION PAROTID TUMOR OR PAROTI | 7/1/1997 | $417.00 | 3 |
| H | 42415 | EXCISION PAROTID TUMOR OR PAROTI | 10/1/2002 | $417.00 | 3 |
| H | 42420 | EXCISION PAROTID TUMOR OR PAROTI | 7/1/1997 | $812.00 | 3 |
| H | 42425 | EXCISION PAROTID TUMOR OR PAROTI | 7/1/1997 | $812.00 | 3 |
| H | 42440 | EXCISION SUBMANDIBULAR (SUBMAXIL | 7/1/1997 | $417.00 | 3 |
| H | 42450 | EXCISION SUBLINGUAL GLAND | 7/1/1997 | $363.00 | 3 |
| H | 42500 | PLASTIC REPAIR SALIVARY DUCT SIA | 7/1/1997 | $417.00 | 3 |
| H | 42505 | PLASTIC REPAIR SALIVARY DUCT SIA | 7/1/1997 | $513.00 | 3 |
| H | 42507 | PAROTID DUCT DIVERSION BILATERAL | 7/1/1997 | $417.00 | 3 |
| H | 42508 | PAROTID DUCT DIVERSION BILATERAL | 7/1/1997 | $513.00 | 3 |
| H | 42509 | PAROTID DUCT DIVERSION BILATERAL | 7/1/1997 | $513.00 | 3 |
| H | 42510 | PAROTID DUCT DIVERSION BILATERAL | 7/1/1997 | $513.00 | 3 |
| H | 42600 | CLOSURE SALIVARY FISTULA | 7/1/1997 | $271.00 | 3 |
| H | 42700 | INCISION AND DRAINAGE ABSCESS PE | 7/1/1997 | $271.00 | 3 |
| H | 42720 | INCISION AND DRAINAGE ABSCESS; R | 7/1/1997 | $271.00 | 3 |
| H | 42725 | INCISION AND DRAINAGE ABSCESS; R | 7/1/1997 | $363.00 | 3 |
| H | 42802 | BIOPSY; HYPOPHARYNX | 7/1/1997 | $271.00 | 3 |
| H | 42804 | BIOPSY; NASOPHARYNX VISIBLE LESI | 7/1/1997 | $271.00 | 3 |
| H | 42806 | BIOPSY; NASOPHARYNX SURVEY FOR U | 7/1/1997 | $363.00 | 3 |
| H | 42808 | EXCISION OR DESTRUCTION OF LESIO | 7/1/1997 | $363.00 | 3 |
| H | 42810 | EXCISION BRANCHIAL CLEFT CYST OR | 7/1/1997 | $417.00 | 3 |
| H | 42815 | EXCISION BRANCHIAL CLEFT CYST, V | 7/1/1997 | $585.00 | 3 |
| H | 42820 | TONSILLECTOMY AND ADENOIDECTOMY | 10/1/2002 | $585.00 | 3 |
| H | 42821 | TONSILLECTOMY AND ADENOIDECTOMY; | 7/1/1997 | $585.00 | 3 |
| H | 42825 | TONSILLECTOMY PRIMARY OR SECONDA | 10/1/2002 | $585.00 | 3 |
| H | 42826 | TONSILLECTOMY PRIMARY OR SECONDA | 7/1/1997 | $513.00 | 3 |
| H | 42830 | ADENOIDECTOMY PRIMARY UNDER AGE | 10/1/2002 | $513.00 | 3 |
| H | 42831 | ADENOIDECTOMY PRIMARY; AGE 12 OR | 7/1/1997 | $513.00 | 3 |
| H | 42835 | ADENOIDECTOMY SECONDARY UNDER AG | 10/1/2002 | $513.00 | 3 |
| H | 42836 | ADENOIDECTOMY SECONDARY; AGE 12 | 7/1/1997 | $513.00 | 3 |
| H | 42860 | EXCISION OF TONSIL TAGS | 7/1/1997 | $417.00 | 3 |
| H | 42870 | EXCISION OR DESTRUCTION LINGUAL | 7/1/1997 | $417.00 | 3 |
| H | 42890 | LIMITED PHARYNGECTOMY WITHOUT RA | 7/1/2003 | $812.00 | 3 |
| H | 42892 | RESECTION OF LATERAL PHARYNGEAL | 7/1/2003 | $812.00 | 3 |
| H | 42900 | SUTURE PHARYNX FOR WOUND OR INJU | 7/1/1997 | $271.00 | 3 |
| H | 42950 | PHARYNGOPLASTY (PLASTIC OR RECON | 7/1/1997 | $363.00 | 3 |
| H | 42955 | PHARYNGOSTOMY (FISTULIZATION OF | 7/1/1997 | $363.00 | 3 |
| H | 42960 | CONTROL OROPHARYNEAL HEMORRHAGE | 7/1/1997 | $271.00 | 3 |
| H | 42962 | CONTROL OROPHARYNGEAL HEMORRHAGE | 7/1/1997 | $363.00 | 3 |
| H | 42972 | CONTROL OF NASOPHARYNGEAL HEMORR | 7/1/2003 | $446.00 | 3 |
| H | 43200 | ESOPHAGOSCOPY RIGID OR FIBEROPTI | 7/1/1997 | $271.00 | 3 |
| H | 43201 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 1/1/2003 | $271.00 | 3 |
| H | 43202 | ESOPHAGOSCOPY RIGID/FLEXIBLE FIB | 7/1/1997 | $271.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 43204 | ESOPHAGOSCOPY RIGID OR FLEXIBLE | 7/1/1997 | $271.00 | 3 |
| H | 43205 | ESIOPHAGOSCOPY, RIGID OR FLEXIBL | 7/1/2003 | $271.00 | 3 |
| H | 43215 | ESOPHAGOSCOPY RIGID OR FLEXIBLE | 7/1/1997 | $271.00 | 3 |
| H | 43216 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 7/1/1997 | $271.00 | 3 |
| H | 43217 | ESOPHAGOSCOPY RIGID OR FLEXIBLE | 7/1/1997 | $271.00 | 3 |
| H | 43219 | ESOPHAGOSCOPY RIGID OR FLEXIBLE | 7/1/1997 | $271.00 | 3 |
| H | 43220 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 7/1/1997 | $271.00 | 3 |
| H | 43226 | ESOPHAGOSCOPY RIGID OR FLEXIBLE | 7/1/1997 | $271.00 | 3 |
| H | 43227 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 7/1/1997 | $363.00 | 3 |
| H | 43228 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 7/1/1997 | $363.00 | 3 |
| H | 43231 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 7/1/2003 | $363.00 | 3 |
| H | 43232 | ESOPHAGOSCOPY, RIGID OR FLEXIBLE | 7/1/2003 | $363.00 | 3 |
| H | 43234 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $271.00 | 3 |
| H | 43235 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $271.00 | 3 |
| H | 43236 | UPPER GASTROINTESTINAL ENDOSCOPY | 1/1/2003 | $363.00 | 3 |
| H | 43239 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43240 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/2003 | $363.00 | 3 |
| H | 43241 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43242 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/2003 | $363.00 | 3 |
| H | 43243 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43244 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/2003 | $363.00 | 3 |
| H | 43245 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43246 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43247 | UPPER GASTROINTESTINAL INDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43248 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43249 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43250 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $271.00 | 3 |
| H | 43251 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43255 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 43256 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/2003 | $446.00 | 3 |
| H | 43258 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $417.00 | 3 |
| H | 43259 | UPPER GASTROINTESTINAL ENDOSCOPY | 7/1/1997 | $417.00 | 3 |
| H | 43260 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 7/1/1997 | $363.00 | 3 |
| H | 43261 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 7/1/1997 | $417.00 | 3 |
| H | 43262 | ENDOSCOPIC RETROGADE CHOLANGIOPA | 7/1/1997 | $363.00 | 3 |
| H | 43263 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 7/1/1997 | $363.00 | 3 |
| H | 43264 | ENDOSCOPIC RETROGADE CHOLANGIOPA | 7/1/1997 | $363.00 | 3 |
| H | 43265 | ERCP; WITH ENDOSCOPIC RETROGRADE | 7/1/1997 | $363.00 | 3 |
| H | 43267 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 7/1/1997 | $363.00 | 3 |
| H | 43268 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 7/1/1997 | $363.00 | 3 |
| H | 43269 | ERCP,W/WO BIOPSY AND/OR COLLECTI | 7/1/1997 | $363.00 | 3 |
| H | 43271 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 7/1/1997 | $363.00 | 3 |
| H | 43272 | ENDOSCOPIC RETROGRADE CHOLANGIOP | 7/1/1997 | $363.00 | 3 |
| H | 43450 | DILATION ESOPHAGUS BY UNGUIDED S | 7/1/1997 | $271.00 | 3 |
| H | 43453 | DILATION ESOPHAGUS OVER GUIDE WI | 7/1/1997 | $271.00 | 3 |
| H | 43456 | DILATION ESOPHAGUS BY BALLOON OR | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 43458 | DILATION OF ESOPHAGUS WITH BALLO | 7/1/1997 | $417.00 | 3 |
| H | 43600 | BIOPSY OF STOMACH BY CAPSULE TUB | 7/1/1997 | $271.00 | 3 |
| H | 43638 | HEMIGASTRECTOMY OR PROXIMAL SUBT | 1/1/2006 | INVALID | N |
| H | 43653 | LAPAROSCOPY, SURGICAL; GASTROSTO | 1/1/2004 | $1,150.00 | 3 |
| H | 43750 | PERCUTANEOUS PLACEMENT OF GASTRO | 7/1/1997 | $363.00 | 3 |
| H | 43760 | CHANGE OF GASTROSTOMY TUBE SIMPL | 7/1/1997 | $271.00 | 3 |
| H | 43870 | CLOSURE OF GASTROSTOMY SURGICAL | 10/1/2002 | $217.00 | 3 |
| H | 44100 | BIOPSY OF INTESTINE BY CAPSULE T | 7/1/1997 | $271.00 | 3 |
| H | 44312 | REVISION OF ILEOSTOMY;SIMPLE (RE | 7/1/1997 | $271.00 | 3 |
| H | 44340 | REVISION OF COLOSTOMY;SIMPLE (RE | 7/1/1997 | $417.00 | 3 |
| H | 44345 | REVISION OF COLOSTOMY;COMPLICATE | 7/1/1997 | $513.00 | 3 |
| H | 44346 | REVISION OF COLOSTOMY;W/REPAIR O | 7/1/1997 | $513.00 | 3 |
| H | 44360 | SMALL INTESTINAL ENDOSCOPY ENTER | 7/1/1997 | $363.00 | 3 |
| H | 44361 | SMALL INTESTINAL ENDOSCOPY, ENTE | 7/1/1997 | $363.00 | 3 |
| H | 44363 | SMALL INTESTINAL ENDOSCOPY, ENTE | 7/1/1997 | $363.00 | 3 |
| H | 44364 | SMALL INTESTINAL ENDOSCOPY, ENTE | 7/1/1997 | $363.00 | 3 |
| H | 44365 | SMALL INTESTINAL ENDOSCOPY, WITH | 7/1/1997 | $363.00 | 3 |
| H | 44366 | SMALL INTESTINAL ENDOSCOPY, ENTE | 7/1/1997 | $363.00 | 3 |
| H | 44369 | SMALL INTESTINAL ENDOSCOPY, ENTE | 7/1/1997 | $363.00 | 3 |
| H | 44370 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2004 | $1,150.00 | 3 |
| H | 44372 | SMALL INTESTINAL ENDOSCOPY, ENTE | 7/1/1997 | $363.00 | 3 |
| H | 44373 | SM INTEST ENDOSCOPY,ENTEROSCOPY | 7/1/1997 | $363.00 | 3 |
| H | 44376 | SMALL INTESTINAL ENDOSCOPY, ENTE | 7/1/2003 | $363.00 | 3 |
| H | 44377 | SMALL INTESTINAL ENDOSCOPY, WITH | 7/1/2003 | $363.00 | 3 |
| H | 44378 | SMALL INTESTINAL ENDOSCOPY, ENTE | 7/1/2003 | $363.00 | 3 |
| H | 44379 | SMALL INTESTINAL ENDOSCOPY, ENTE | 1/1/2004 | $1,150.00 | 3 |
| H | 44380 | FIBEROPTIC ILEOSCOPY THROUGH STO | 7/1/1997 | $271.00 | 3 |
| H | 44382 | FIBEROPTIC ILEOSCOPY THROUGH STO | 7/1/1997 | $271.00 | 3 |
| H | 44383 | ILEOSCOPY, THROUGH STOMA; WITH T | 1/1/2004 | $1,150.00 | 3 |
| H | 44385 | FIBEROPTIC EVALUATION OF SMALL I | 7/1/1997 | $271.00 | 3 |
| H | 44386 | FIBEROPTIC EVALUATION OF SMALL I | 7/1/1997 | $271.00 | 3 |
| H | 44388 | FIBEROPTIC COLONOSCOPY THROUGH C | 7/1/1997 | $271.00 | 3 |
| H | 44389 | FIBEROPTIC COLONOSCOPY THROUGH C | 7/1/1997 | $271.00 | 3 |
| H | 44390 | FIBEROPTIC COLONSCOPY THROUGH CO | 7/1/1997 | $271.00 | 3 |
| H | 44391 | COLONOSCOPY THRU STOMA; W/CONTRO | 7/1/1997 | $271.00 | 3 |
| H | 44392 | FIBEROPTIC COLONOSCOPY THROUGH C | 7/1/1997 | $271.00 | 3 |
| H | 44393 | FIBEROPTIC COLONOSCOPY THROUGH C | 7/1/1997 | $271.00 | 3 |
| H | 44394 | COLONOSCOPY THROUGH STOMA; WITH | 7/1/1997 | $271.00 | 3 |
| H | 45000 | TRANSRECTAL DRAINAGE OF PELVIC A | 7/1/1997 | $271.00 | 3 |
| H | 45005 | INCISION AND DRAINAGE OF SUBMUCO | 7/1/1997 | $363.00 | 3 |
| H | 45020 | INCISION AND DRAINAGE OF DEEP SU | 7/1/1997 | $363.00 | 3 |
| H | 45100 | BIOPSY OF ANORECTAL WALL ANAL AP | 7/1/1997 | $271.00 | 3 |
| H | 45108 | ANORECTAL MYOMECTOMY | 7/1/1997 | $363.00 | 3 |
| H | 45150 | DIVISION OF STRICTURE OF RECTUM | 7/1/1997 | $271.00 | 3 |
| H | 45160 | EXCISION OF RECTAL TUMOR BY PROC | 7/1/2003 | $363.00 | 3 |
| H | 45170 | EXCISION OF RECTAL TUMOR, TRANSA | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 45190 | DESTRUCTION OF RECTAL TUMOR, TRA | 1/1/2004 | $1,150.00 | 3 |
| H | 45305 | PROCTOSIGMOIDOSCOPY; WITH BIOPSY | 7/1/1997 | $271.00 | 3 |
| H | 45307 | PROCTOSIGMOIDOSCOPY; WITH REMOVA | 7/1/1997 | $271.00 | 3 |
| H | 45308 | PROCTOSIGMOIDOSCOPY, RIGID; WITH | 7/1/1997 | $271.00 | 3 |
| H | 45309 | PROCTOSIGMOIDOSCOPY, RIGID; WITH | 7/1/1997 | $271.00 | 3 |
| H | 45315 | PROCTOSIGMOIDOSCOPY; WITH REMOVA | 7/1/1997 | $271.00 | 3 |
| H | 45317 | PROCTOSIGMOIDOSCOPY, RIGID; W/CO | 7/1/1997 | $271.00 | 3 |
| H | 45320 | PROCTOSIGMOIDOSCOPY; WITH ABLATI | 7/1/1997 | $271.00 | 3 |
| H | 45321 | PROCTOSIGMOIDOSCOPY; WITH DECOMP | 7/1/1997 | $271.00 | 3 |
| H | 45331 | SIGMOIDOSCOPY, FLEXIBLE FIBEROPT | 7/1/1997 | $271.00 | 3 |
| H | 45332 | SIGMOIDOSCOPY, FLEXIBLE FIBEROPT | 7/1/1997 | $271.00 | 3 |
| H | 45333 | SIGMOIDOSCOPY, FLEXIBLE FIBEROPT | 7/1/1997 | $271.00 | 3 |
| H | 45334 | SIGMOIDOSCOPY, FLEXIBLE; W/CONTR | 7/1/1997 | $271.00 | 3 |
| H | 45335 | SIGMOIDOSCOPY, FLEXIBLE; WITH DI | 1/1/2003 | $271.00 | 3 |
| H | 45337 | SIGMOIDOSCOPY, FLEXIBLE FIBEROPT | 7/1/1997 | $271.00 | 3 |
| H | 45338 | SIGMOIDOSCOPY, FLEXIBLE; WITH RE | 7/1/1997 | $271.00 | 3 |
| H | 45339 | SIGMOIDOSCOPY, FLEXIBLE; WITH AB | 7/1/1997 | $271.00 | 3 |
| H | 45355 | COLONOSCOPY WITH STANDARD SIGMOI | 7/1/1997 | $271.00 | 3 |
| H | 45378 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 7/1/1997 | $363.00 | 3 |
| H | 45379 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 7/1/1997 | $363.00 | 3 |
| H | 45380 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 7/1/1997 | $363.00 | 3 |
| H | 45381 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2003 | $363.00 | 3 |
| H | 45382 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 7/1/1997 | $363.00 | 3 |
| H | 45383 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 7/1/1997 | $363.00 | 3 |
| H | 45384 | COLONOSCOPY, FLEXIBLE; WITH REMO | 7/1/1997 | $271.00 | 3 |
| H | 45385 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 7/1/1997 | $363.00 | 3 |
| H | 45386 | COLONOSCOPY, FLEXIBLE, PROXIMAL | 1/1/2003 | $363.00 | 3 |
| H | 45500 | PROCTOPLASTY FOR STENOSIS | 7/1/1997 | $363.00 | 3 |
| H | 45505 | PROCTOPLASTY; FOR PROLAPSE OF MU | 7/1/1997 | $363.00 | 3 |
| H | 45560 | REPAIR OF RECTOCELE (SEPARATE PR | 7/1/1997 | $363.00 | 3 |
| H | 45900 | REDUCTION OF PROCIDENTIA (SEPARA | 7/1/1997 | $271.00 | 3 |
| H | 45905 | DILATION OF ANAL SPHINCTER (SEPA | 7/1/1997 | $271.00 | 3 |
| H | 45910 | DILATION OF RECTAL STRICTURE (SE | 7/1/1997 | $271.00 | 3 |
| H | 45915 | REMOVAL OF FECAL IMPACTION OR FO | 7/1/1997 | $271.00 | 3 |
| H | 45990 | ANORECTAL EXAM, SURGICAL, REQUIR | 10/1/2006 | $363.00 | 3 |
| H | 46020 | PLACEMENT OF SETON | 1/1/2002 | $417.00 | 3 |
| H | 46030 | REMOVAL OF SETON OTHER MARKER | 7/1/1997 | $271.00 | 3 |
| H | 46040 | INCISION AND DRAINAGE OF ISCHIOR | 7/1/1997 | $417.00 | 3 |
| H | 46045 | INCISION AND DRAINAGE OF INTRAMU | 7/1/1997 | $363.00 | 3 |
| H | 46050 | INCISION AND DRAINAGE PERIANAL A | 7/1/1997 | $271.00 | 3 |
| H | 46060 | INCISION AND DRAINAGE OF ISCHIOR | 7/1/1997 | $363.00 | 3 |
| H | 46080 | SPHINCTEROTOMY ANAL DIVISION OF | 7/1/1997 | $417.00 | 3 |
| H | 46200 | FISSURECTOMY WITH OR WITHOUT SPH | 7/1/1997 | $363.00 | 3 |
| H | 46210 | CRYPECTOMY SINGLE | 7/1/1997 | $363.00 | 3 |
| H | 46211 | CRYPTECTOMY; MULTIPLE (SEPARATE | 7/1/1997 | $363.00 | 3 |
| H | 46220 | PAPILLECTOMY OR EXCISION OF SING | 7/1/1997 | $271.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 46250 | HEMORRHOIDECTOMY EXTERNAL COMPLE | 7/1/1997 | $417.00 | 3 |
| H | 46255 | HEMORRHOIDECTOMY INTERNAL AND EX | 7/1/1997 | $417.00 | 3 |
| H | 46257 | HEMORRHOIDECTOMY INTERNAL AND EX | 7/1/1997 | $417.00 | 3 |
| H | 46258 | HEMORRHOIDECTOMY INTERNAL AND EX | 7/1/1997 | $417.00 | 3 |
| H | 46260 | HEMORRHOIDECTOMY INTERNAL AND EX | 7/1/1997 | $417.00 | 3 |
| H | 46261 | HEMORRHOIDECTOMY INTERNAL AND EX | 7/1/1997 | $513.00 | 3 |
| H | 46262 | HEMORRHOIDECTOMY INTERNAL AND EX | 7/1/1997 | $513.00 | 3 |
| H | 46270 | FISTULECTOMY SUBCUTANEOUS | 7/1/1997 | $417.00 | 3 |
| H | 46275 | FISTULECTOMY; SUBMUSCULAR | 7/1/1997 | $417.00 | 3 |
| H | 46280 | FISTULECTOMY; COMPLEX OR MULTIPL | 7/1/1997 | $513.00 | 3 |
| H | 46285 | FISTULECTOMY; SECOND STAGE | 7/1/1997 | $271.00 | 3 |
| H | 46288 | CLOSURE OF ANAL FISTULA WITH REC | 7/1/2003 | $513.00 | 3 |
| H | 46608 | ANOSCOPY; FOR REMOVAL OF FOREIGN | 7/1/1997 | $271.00 | 3 |
| H | 46610 | ANOSCOPY; FOR REMOVAL OF POLYP | 7/1/1997 | $271.00 | 3 |
| H | 46611 | ANOSCOPY; WITH REMOVAL OF SINGLE | 7/1/1997 | $271.00 | 3 |
| H | 46612 | ANOSCOPY; FOR MULTIPLE POLYP REM | 7/1/1997 | $271.00 | 3 |
| H | 46615 | ANOSCOPY; WITH ABLATION OF TUMOR | 7/1/2003 | $363.00 | 3 |
| H | 46700 | ANOPLASTY PLASTIC OPERATION FOR | 7/1/1997 | $417.00 | 3 |
| H | 46750 | SPHINCTEROPLASTY ANAL FOR INCONT | 7/1/1997 | $417.00 | 3 |
| H | 46753 | GRAFT (THIERSCH OPERATION) FOR R | 7/1/1997 | $417.00 | 3 |
| H | 46754 | REMOVAL OF THIERSCH WIRE OR SUTU | 7/1/1997 | $363.00 | 3 |
| H | 46760 | SPHINCTEROPLASTY ANAL FOR INCONT | 7/1/1997 | $363.00 | 3 |
| H | 46761 | SPHINCTEROPLASTY, ANAL, FOR INCO | 7/1/2003 | $446.00 | 3 |
| H | 46762 | SPHINCTEROPLASTY, ANAL, FOR INCO | 7/1/2003 | $812.00 | 3 |
| H | 46917 | DESTRUCTION OF LESION(S) ANUS SI | 7/1/2003 | $271.00 | 3 |
| H | 46922 | DESTRUCTION OF LESION(S) ANUS SI | 7/1/1997 | $271.00 | 3 |
| H | 46924 | DESTRUCTION OF LESION(S), ANUS ( | 7/1/1997 | $271.00 | 3 |
| H | 46937 | CRYOSURGERY OF RECTAL TUMOR BENI | 7/1/1997 | $363.00 | 3 |
| H | 46938 | CRYOSURGERY OF RECTAL TUMOR; MAL | 7/1/1997 | $363.00 | 3 |
| H | 47000 | BIOPSY OF LIVER, NEEDLE; PERCUTA | 7/1/1997 | $271.00 | 3 |
| H | 47510 | INTRODUCTION OF PERCUTANEOUS TRA | 7/1/1997 | $363.00 | 3 |
| H | 47511 | INTRODUCTION OF PERCUTANEOUS TRA | 1/1/2004 | $1,150.00 | 3 |
| H | 47525 | CHANGE OF PERCUTANEOUS BILIARY D | 1/1/1999 | $314.00 | 3 |
| H | 47530 | REVISION AND/OR REINSERTION OF T | 1/1/1999 | $314.00 | 3 |
| H | 47552 | BILIARY ENDOSCOPY, PERCUTANEOUS | 7/1/1997 | $363.00 | 3 |
| H | 47553 | BILIARY ENDOSCOPY PERCUTANEOUS V | 7/1/1997 | $417.00 | 3 |
| H | 47554 | BILIARY ENDOSCOPY, PERCUTANEOUS | 7/1/1997 | $417.00 | 3 |
| H | 47555 | BILIARY ENDOSCOPY,PERCUTANEOUS V | 7/1/1997 | $417.00 | 3 |
| H | 47560 | LAPAROSCOPY, SURGICAL; WITH GUID | 1/1/2000 | $486.00 | 3 |
| H | 47561 | LAPAROSCOPY, SURGICAL; WITH GUID | 1/1/2000 | $486.00 | 3 |
| H | 47562 | LAPAROSCOPY, SURGICAL; CHOLECYST | 4/1/2000 | $585.00 | 3 |
| H | 47563 | LAPAROSCOPY, SURGICAL; CHOLECYST | 4/1/2000 | $585.00 | 3 |
| H | 47564 | LAPAROSCPY, SURGICAL; CHOLECYSTE | 4/1/2000 | $585.00 | 3 |
| H | 47630 | BILIARY DUCT STONE EXTRACTION PE | 7/1/1997 | $417.00 | 3 |
| H | 47716 | ANASTOMOSIS, CHOLEDOCHAL CYST, W | 1/1/2007 | INVALID | N |
| H | 48102 | BIOPSY OF PANCREAS, PERCUTANEOUS | 7/1/1997 | $271.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 48180 | PANCREATICOJEJUNOSTOMY SIDE-TO-S | 1/1/2007 | INVALID | N |
| H | 49000 | EXPLORATORY LAPAROTOMY, EXPLORAT | 7/1/1997 | $513.00 | 3 |
| H | 49080 | PERITONEOCENTESIS, ABDOMINAL PAR | 7/1/1997 | $363.00 | 3 |
| H | 49081 | PERITONEOCENTESIS ABDOMINAL PARA | 7/1/1997 | $363.00 | 3 |
| H | 49085 | REMOVAL OF PERITONEAL FOREIGN BO | 1/1/2007 | INVALID | N |
| H | 49180 | BIOPSY, ABDOMINAL OR RETROPERITO | 7/1/1997 | $271.00 | 3 |
| H | 49250 | UMBILECTOMY OMPHALECTOMY EXCISIO | 10/1/2002 | $417.00 | 3 |
| H | 49320 | LAPAROSCOPY, ABDOMAN, PERITONEUM | 1/1/2000 | $486.00 | 3 |
| H | 49321 | LAPAROSCOPY, SURGICAL; WITH BIOP | 1/1/2000 | $600.00 | 3 |
| H | 49322 | LAPAROSCOPY, SURGICAL, ABDOMEN, | 1/1/2000 | $600.00 | 3 |
| H | 49324 | LAPAROSCOPY, SURGICAL; WITH INSE | 1/1/2007 | $486.00 | 3 |
| H | 49325 | LAPAROSCOPY, SURGICAL; W/REVISIO | 1/1/2007 | $486.00 | 3 |
| H | 49326 | LAPAROSCOPY, SURGICAL; WITH OMEN | 1/1/2007 | $486.00 | 3 |
| H | 49400 | PNEUMOPERITONEUM (SEPARATE PROCE | 7/1/1997 | $271.00 | 3 |
| H | 49402 | REMOVAL OF PERITONEAL FOREIGN BO | 1/1/2007 | $363.00 | 3 |
| H | 49420 | INSERTION OF INTRAPERITONEAL CAN | 7/1/1997 | $271.00 | 3 |
| H | 49421 | INSERTION OF INTRAPERITONEAL CAN | 7/1/1997 | $271.00 | 3 |
| H | 49422 | REMOVAL OF PERMANENT INTRAPERITO | 7/1/2003 | $271.00 | 3 |
| H | 49425 | INSERTION OF PERITONEAL-VENOUS S | 10/1/2002 | $812.00 | 3 |
| H | 49426 | REVISION OF PERITONEAL-VENOUS SH | 7/1/1997 | $363.00 | 3 |
| H | 49495 | REPAIR, INITIAL INGUINAL HERNIA, | 10/1/2002 | $513.00 | 3 |
| H | 49496 | REPAIR INITIAL INGUINAL HERNIA, | 10/1/2002 | $513.00 | 3 |
| H | 49500 | REPAIR INGUINAL HERNIA UNDER AGE | 10/1/2002 | $513.00 | 3 |
| H | 49501 | REPAIR INITIAL INGUINAL HERNIA, | 10/1/2002 | $513.00 | 3 |
| H | 49505 | REPAIR INGUINAL HERNIA, AGE 5 OR | 7/1/1997 | $513.00 | 3 |
| H | 49507 | REPAIR INITIAL INGUINAL HERNIA, | 10/1/2002 | $513.00 | 3 |
| H | 49520 | RECURRENT | 7/1/1997 | $812.00 | 3 |
| H | 49521 | REPAIR RECURRENT INGUINAL HERNIA | 10/1/2002 | $812.00 | 3 |
| H | 49525 | REPAIR INGUINAL HERNIA ANY AGE; | 7/1/1997 | $513.00 | 3 |
| H | 49540 | REPAIR LUMBAR HERNIA | 7/1/1997 | $363.00 | 3 |
| H | 49550 | REPAIR FEMORAL HERNIA GROIN INCI | 7/1/1997 | $585.00 | 3 |
| H | 49553 | REPAIR INITIAL FEMORAL HERNIA, A | 10/1/2002 | $585.00 | 3 |
| H | 49555 | REPAIR FEMORAL HERNIA RECURRENT | 7/1/1997 | $585.00 | 3 |
| H | 49557 | REPAIR RECURRENT FEMORAL HERNIA; | 10/1/2002 | $585.00 | 3 |
| H | 49560 | REPAIR INITIAL INCISIONAL HERNIA | 7/1/1997 | $513.00 | 3 |
| H | 49561 | REPAIR INITIAL INCISIONAL HERNIA | 10/1/2002 | $513.00 | 3 |
| H | 49565 | REPAIR RECURRENT INCISIONAL HERN | 7/1/1997 | $513.00 | 3 |
| H | 49566 | REPAIR RECURRENT INCISIONAL HERN | 10/1/2002 | $513.00 | 3 |
| H | 49568 | IMPLANTATION OF MESH OR OTHER PR | 7/1/1997 | $417.00 | 3 |
| H | 49570 | REPAIR EPIGASTRIC HERNIA PROPERI | 7/1/1997 | $513.00 | 3 |
| H | 49572 | REPAIR EPIGASTRIC HERNIA; INCARC | 1/1/2004 | $1,150.00 | 3 |
| H | 49580 | REPAIR UMBILICAL HERNIA UNDER AG | 10/1/2002 | $513.00 | 3 |
| H | 49582 | REPAIR UMBILICAL HERNIA, UNDER A | 1/1/2004 | $1,150.00 | 3 |
| H | 49585 | REPAIR UMBILICAL HERNIA, AGE 5 Y | 10/1/2002 | $513.00 | 3 |
| H | 49587 | REPAIR UMBILICAL HERNIA, AGE 5 Y | 1/1/2004 | $1,150.00 | 3 |
| H | 49590 | REPAIR SPIGELIAN HERNIA | 7/1/1997 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 49600 | REPAIR OF OMPHALOCELE SMALL WITH | 10/1/2002 | $513.00 | 3 |
| H | 49605 | REPAIR OF OMPHALOCELE; LARGE OR | 10/1/2002 | $513.00 | 3 |
| H | 49606 | REPAIR OF OMPHALOCELE WITH STAGE | 10/1/2002 | $513.00 | 3 |
| H | 49610 | REPAIR OF OMPHALOCELE (GROSS TYP | 10/1/2002 | $513.00 | 3 |
| H | 49611 | REPAIR OF OMPHALOCELE (GROSS TYP | 10/1/2002 | $513.00 | 3 |
| H | 49650 | LAPAROSOCPY, SURGICAL; REPAIR IN | 10/1/2002 | $513.00 | 3 |
| H | 49651 | LAPAROSCOPY, SURGICAL; REPAIR RE | 10/1/2002 | $812.00 | 3 |
| H | 50020 | DRAINAGE OF PERIRENAL OR RENAL A | 7/1/1997 | $363.00 | 3 |
| H | 50040 | NEPHROSTOMY NEPHROTOMY WITH DRAI | 7/1/1997 | $417.00 | 3 |
| H | 50200 | RENAL BIOPSY PERCUTANEOUS BY TRO | 7/1/1997 | $271.00 | 3 |
| H | 50390 | ASPIRATION AND/OR INJECTION OF R | 7/1/1997 | $271.00 | 3 |
| H | 50392 | INTRODUCTION OF INTRACATHETER OR | 7/1/1997 | $271.00 | 3 |
| H | 50393 | INTRODUCTION OF URETERAL CATHETE | 7/1/1997 | $271.00 | 3 |
| H | 50395 | INTRODUCTION OF GUIDE INTO RENAL | 7/1/1997 | $271.00 | 3 |
| H | 50396 | MANOMETRIC STUDIES THROUGH NEPHR | 7/1/1997 | $271.00 | 3 |
| H | 50398 | CHANGE OF NEPHROSTOMY OR PYELOST | 7/1/1997 | $271.00 | 3 |
| H | 50520 | CLOSURE OF NEPHROCUTANEOUS OR PY | 7/1/1997 | $271.00 | 3 |
| H | 50551 | RENAL ENDOSCOPY THROUGH ESTABLIS | 7/1/1997 | $271.00 | 3 |
| H | 50553 | RENAL ENDOSCOPY THROUGH EST NEPH | 7/1/1997 | $271.00 | 3 |
| H | 50555 | RENAL ENDOSCOPY THROUGH ESTABLIS | 7/1/1997 | $271.00 | 3 |
| H | 50557 | RENAL ENDOSCOPY THROUGH ESTB NEP | 7/1/1997 | $271.00 | 3 |
| H | 50559 | RENAL ENDOSCOPY WITH INSERTION O | 1/1/2005 | INVALID | N |
| H | 50561 | RENAL ENDOSCOPY THROUGH ESTABLIS | 7/1/1997 | $271.00 | 3 |
| H | 50562 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2003 | $363.00 | 3 |
| H | 50570 | RENAL ENDOSCOPY THROUGH NEPHROTO | 7/1/1997 | $271.00 | 3 |
| H | 50572 | RENAL ENDOSCOPY THROUGH NEPHROTO | 7/1/1997 | $271.00 | 3 |
| H | 50574 | RENAL ENDOSCOPY THROUGH NEPHROTO | 7/1/1997 | $271.00 | 3 |
| H | 50576 | RENAL ENDOSCOPY THROUGH NEPHROTO | 7/1/1997 | $271.00 | 3 |
| H | 50578 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2005 | INVALID | N |
| H | 50580 | RENAL ENDOSCOPY THROUGH NEPHROTO | 7/1/1997 | $271.00 | 3 |
| H | 50590 | LITHOTRIPSY, EXTRACORPOREAL SHOC | 7/1/1997 | $920.00 | 3 |
| H | 50684 | INJECT PROC FOR URETEROGRAPHY OR | 7/1/1997 | $271.00 | 3 |
| H | 50688 | CHANGE OF URETEROSTOMY TUBE OR E | 7/1/1997 | $271.00 | 3 |
| H | 50690 | INJECT PROC FOR VISUALIZATION OF | 7/1/1997 | $271.00 | 3 |
| H | 50951 | URETERAL ENDOSCOPY THROUGH ESTAB | 7/1/1997 | $271.00 | 3 |
| H | 50953 | URETERAL ENDOSCOPY THROUGH EST U | 7/1/1997 | $271.00 | 3 |
| H | 50955 | URETERAL ENDOSCOPY THROUGH ESTAB | 7/1/1997 | $271.00 | 3 |
| H | 50957 | URETERAL ENDOSCOPY THROUGH ESTAB | 7/1/1997 | $271.00 | 3 |
| H | 50959 | URETERAL ENDOSCOPY THROUGH ESTAB | 1/1/2005 | INVALID | N |
| H | 50961 | URETERAL ENDOSCOPY THROUGH ESTAB | 7/1/1997 | $271.00 | 3 |
| H | 50970 | URETERAL ENDOSCOPY THROUGH URETE | 7/1/1997 | $271.00 | 3 |
| H | 50972 | URETERAL ENDOSCOPY THROUGH URETE | 7/1/1997 | $271.00 | 3 |
| H | 50974 | URETERAL ENDOSCOPY THROUGH URETE | 7/1/1997 | $271.00 | 3 |
| H | 50976 | URETERAL ENDOSCOPY THROUGH URETE | 7/1/1997 | $271.00 | 3 |
| H | 50978 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2005 | INVALID | N |
| H | 50980 | URETERAL ENDOSCOPY THROUGH URETE | 7/1/1997 | $271.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 51005 | ASPIRATION OF BLADDER BY TROCAR | 7/1/1997 | $271.00 | 3 |
| H | 51010 | ASPIRATION OF BLADDER; WITH INSE | 7/1/1997 | $271.00 | 3 |
| H | 51020 | CYSTOTOMY OR CYSTOSTOMY WITH FUL | 7/1/1997 | $513.00 | 3 |
| H | 51030 | CYSTOTOMY OR CYSTOSTOMY; WITH CR | 7/1/1997 | $513.00 | 3 |
| H | 51040 | CYSTOSTOMY CYSTOTOMY WITH DRAINA | 10/1/2002 | $513.00 | 3 |
| H | 51045 | CYSTOTOMY, WITH INSERTION OF URE | 10/1/2002 | $513.00 | 3 |
| H | 51050 | CYSTOLITHOTOMY CYSTOTOMY WITH RE | 7/1/2003 | $513.00 | 3 |
| H | 51065 | CYSTOTOMY, W/CALCULUS BASKET EXT | 7/1/2003 | $513.00 | 3 |
| H | 51080 | DRAINAGE OF PERIVESICAL OR PREVE | 7/1/2003 | $271.00 | 3 |
| H | 51500 | EXCISION OF URACHAL CYST OR SINU | 7/1/1997 | $513.00 | 3 |
| H | 51520 | CYSTOTOMY FOR SIMPLE EXCISION OF | 7/1/2003 | $513.00 | 3 |
| H | 51600 | INJECTION PROCEDURE FOR CYSTOGRA | 7/1/1997 | $271.00 | 3 |
| H | 51605 | INJECTION PROCEDURE AND PLACEMEN | 7/1/1997 | $271.00 | 3 |
| H | 51610 | INJECTION PROCEDURE FOR RETROGRA | 7/1/1997 | $271.00 | 3 |
| H | 51710 | CHANGE OF CYSTOSTOMY TUBE; COMPL | 7/1/1997 | $271.00 | 3 |
| H | 51715 | ENDOSCOPIC INJECTION OF IMPLANT | 7/1/2003 | $446.00 | 3 |
| H | 51725 | SIMPLE CYSTOMETROGRAM (CMG) (EG, | 7/1/1997 | $271.00 | 3 |
| H | 51726 | COMPLEX CYSTOMETROGRAM (EG, CALI | 7/1/1997 | $271.00 | 3 |
| H | 51772 | URETHRAL PRESSURE PROFILE STUDIE | 1/1/2000 | $314.00 | 3 |
| H | 51785 | ELECTROMYOGRAPHIC STUDIES (EMG) | 7/1/1997 | $271.00 | 3 |
| H | 51865 | CYSTORRHAPHY SUTURE OF BLADDER W | 7/1/1997 | $513.00 | 3 |
| H | 51880 | CLOSURE OF CYSTOSTOMY (SEPARATE | 7/1/1997 | $271.00 | 3 |
| H | 51900 | CLOSURE OF VESICOVAGINAL FISTULA | 7/1/1997 | $513.00 | 3 |
| H | 51920 | CLOSURE OF VESTICOUTERINE FISTUL | 7/1/1997 | $417.00 | 3 |
| H | 52000 | CYSTOURETHROSCOPY; (SEPARATE PRO | 7/1/1997 | $271.00 | 3 |
| H | 52001 | CYSTOURETHROSCOPY WITH IRRIGATIO | 1/1/2002 | $363.00 | 3 |
| H | 52005 | WITH URETERAL CATHETERIZATION WI | 7/1/1997 | $363.00 | 3 |
| H | 52007 | CYSTOURETHROSCOPY WITH URETERAL | 7/1/1997 | $363.00 | 3 |
| H | 52010 | WITH EJACULATORY DUCT CATHETERIZ | 7/1/1997 | $363.00 | 3 |
| H | 52204 | CYSTOURETHROSCOPY, WITH BIOPSY | 7/1/1997 | $363.00 | 3 |
| H | 52214 | CYSTOURETHROSCOPY, WITH FULGURAT | 7/1/1997 | $363.00 | 3 |
| H | 52224 | CYSTOURETHROSCOPY, WITH FULGURAT | 7/1/1997 | $363.00 | 3 |
| H | 52234 | CYSTOURETHROSCOPY, WITH FULGURAT | 7/1/1997 | $363.00 | 3 |
| H | 52235 | CYSTOURETHROSCOPY WITH FULGURATI | 7/1/1997 | $417.00 | 3 |
| H | 52240 | CYSTOURETHROSCOPY WITH FULGURATI | 7/1/1997 | $417.00 | 3 |
| H | 52250 | CYSTOURETHROSCOPY WITH INSERTION | 7/1/1997 | $513.00 | 3 |
| H | 52260 | CYSTOURETHROSCOPY WITH DILATION | 7/1/1997 | $363.00 | 3 |
| H | 52270 | CYSTOURETHROSCOPY WITH INTERNAL | 7/1/1997 | $363.00 | 3 |
| H | 52275 | CYSTOURETHROSCOPY WITH INTERNAL | 7/1/1997 | $363.00 | 3 |
| H | 52276 | CYSTOURETHROSCOPY WITH DIRECT VI | 7/1/1997 | $417.00 | 3 |
| H | 52277 | CYSTOURETHROSCOPY WITH RESECTION | 7/1/1997 | $363.00 | 3 |
| H | 52281 | CYSTOURETHROSCOPY, WITH CALIBRAT | 7/1/1997 | $363.00 | 3 |
| H | 52283 | CYSTOURETHROSCOPY, WITH STEROID | 7/1/1997 | $363.00 | 3 |
| H | 52285 | CYSTOURETHROSCOPY FOR TREATMENT | 7/1/1997 | $363.00 | 3 |
| H | 52290 | CYSTOURETHROSCOPY WITH URETERAL | 7/1/1997 | $363.00 | 3 |
| H | 52300 | CYSTOURETHROSCOPY; W/RESECTION O | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 52305 | CYSTOURETHROSCOPY; WITH INCISION | 7/1/1997 | $363.00 | 3 |
| H | 52310 | CYSTOURETHROSCOPY WITH REMOVAL O | 7/1/1997 | $363.00 | 3 |
| H | 52315 | CYSTOURETHROSCOPY WITH REMOVAL O | 7/1/1997 | $363.00 | 3 |
| H | 52317 | LITHOLAPAXY: CRUSHING OR FRAGMEN | 7/1/1997 | $271.00 | 3 |
| H | 52318 | LITHOLAPAXY: CRUSHING OF FRAGMEN | 7/1/1997 | $363.00 | 3 |
| H | 52320 | CYSTOURETHROSCOPY (INCLUDING URE | 7/1/1997 | $585.00 | 3 |
| H | 52325 | CYSTOURETHROSCOPY (INCLUDING URE | 7/1/1997 | $513.00 | 3 |
| H | 52327 | CYSTOURETHROSCOPY (INC URETERAL | 7/1/2003 | $363.00 | 3 |
| H | 52330 | CYSTOURETHROSCOPY (INCLUDING URE | 7/1/1997 | $363.00 | 3 |
| H | 52332 | WITH INSERTION OF INDWELLING URE | 7/1/1997 | $363.00 | 3 |
| H | 52334 | CYSTOURETHROSCOPY WITH INSERTION | 7/1/1997 | $417.00 | 3 |
| H | 52341 | CYSTOURETHROSCOPY; WITH TREATMEN | 7/1/2003 | $446.00 | 3 |
| H | 52342 | CYSTOURETHROSCOPY; WITH TREATMEN | 7/1/2003 | $446.00 | 3 |
| H | 52343 | CYSTOURETHROSCOPY; WITH TREATMEN | 7/1/2003 | $446.00 | 3 |
| H | 52344 | CYSTOURETHROSCOPY WITH URETEROSC | 7/1/2003 | $446.00 | 3 |
| H | 52345 | CYSTOURETHROSCOPY WITH URETEROSC | 7/1/2003 | $446.00 | 3 |
| H | 52346 | CYSTOURETHROSCOPY WITH URETEROSC | 7/1/2003 | $446.00 | 3 |
| H | 52351 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2001 | $438.00 | 3 |
| H | 52352 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2001 | $539.00 | 3 |
| H | 52353 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2001 | $539.00 | 3 |
| H | 52354 | CYSTOURETHROSCOPY, WITH URETEROS | 1/1/2001 | $539.00 | 3 |
| H | 52355 | CYSTOURETHROSCOPY, WITH URETEROS | 7/1/2003 | $513.00 | 3 |
| H | 52400 | CYSTOURETHROSCOPY WITH INCISION, | 1/1/2001 | $438.00 | 3 |
| H | 52450 | TRANSURETHRAL INCISION OF PROSTA | 7/1/1997 | $417.00 | 3 |
| H | 52500 | TRANSURETHRAL RESECTION OF BLADD | 7/1/1997 | $417.00 | 3 |
| H | 52510 | TRANSURETHRAL BALLOON DILATION O | 7/1/2003 | $446.00 | 3 |
| H | 52601 | TRANSURETHRAL ELECTROSURGICAL RE | 7/1/1997 | $513.00 | 3 |
| H | 52606 | TRANSURETHRAL FULGURATION FOR PO | 7/1/1997 | $271.00 | 3 |
| H | 52612 | TRANSURETHRAL RESECTION OF PROST | 7/1/1997 | $363.00 | 3 |
| H | 52614 | TRANSURETHRAL RESECTION OF PROST | 7/1/1997 | $271.00 | 3 |
| H | 52620 | TRANSURETHRAL RESECTION OF RESID | 7/1/1997 | $271.00 | 3 |
| H | 52630 | TRANSURETHRAL RESECTION; OF REGR | 7/1/1997 | $363.00 | 3 |
| H | 52640 | TRANSURETHRAL RESECTION; OF POST | 7/1/1997 | $363.00 | 3 |
| H | 52647 | LASER COAGULATION OF PROSTATE, I | 1/1/2004 | $1,150.00 | 3 |
| H | 52648 | LASER VAPORIZATION OF PROSTATE, | 1/1/2004 | $1,150.00 | 3 |
| H | 52700 | TRANSURETHRAL DRAINAGE OF PROSTA | 7/1/1997 | $363.00 | 3 |
| H | 53000 | URETHROTOMY OR URETHROSTOMY EXTE | 7/1/1997 | $271.00 | 3 |
| H | 53010 | URETHROTOMY OR URETHROSTOMY EXTE | 7/1/1997 | $271.00 | 3 |
| H | 53020 | MEATOTOMY, CUTTING OF MEATUS (SE | 7/1/1997 | $271.00 | 3 |
| H | 53040 | DRAINAGE OF DEEP PERIURETHRAL AB | 7/1/1997 | $363.00 | 3 |
| H | 53080 | DRAINAGE OF PERINEAL URINARY EXT | 7/1/2003 | $446.00 | 3 |
| H | 53200 | BIOPSY OF URETHRA | 7/1/1997 | $271.00 | 3 |
| H | 53210 | URETHRECTOMY TOTAL INCLUDING CYS | 7/1/1997 | $585.00 | 3 |
| H | 53215 | URETHRECTOMY TOTAL INCLUDING CYS | 7/1/1997 | $585.00 | 3 |
| H | 53220 | EXCISION OR FULGURATION OF CARCI | 7/1/1997 | $363.00 | 3 |
| H | 53230 | EXCISION OF URETHRAL DIVERTICULU | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 53235 | EXCISION OF URETHRAL DIVERTICULU | 7/1/1997 | $417.00 | 3 |
| H | 53240 | MARSUPIALIZATION OF URETHRAL DIV | 7/1/1997 | $363.00 | 3 |
| H | 53250 | EXCISION OF BULBOURETHRAL GLAND | 7/1/1997 | $363.00 | 3 |
| H | 53260 | EXCISION OR FULGURATION URETHRAL | 7/1/1997 | $363.00 | 3 |
| H | 53265 | EXCISION OR FULGURATION; URETHRA | 7/1/1997 | $363.00 | 3 |
| H | 53270 | EXCISION OR FULGURATION; SKENE'S | 7/1/2003 | $363.00 | 3 |
| H | 53275 | EXCISION OR FULGURATION; URETHRA | 7/1/1997 | $363.00 | 3 |
| H | 53400 | URETHROPLASTY FIRST STAGE FOR FI | 7/1/1997 | $417.00 | 3 |
| H | 53405 | URETHROPLASTY; SECOND STAGE (FOR | 7/1/1997 | $363.00 | 3 |
| H | 53410 | URETHROPLASTY ONE-STAGE RECONSTR | 7/1/1997 | $363.00 | 3 |
| H | 53420 | URETHTROPLASTY TWO-STAGE RECONST | 7/1/1997 | $417.00 | 3 |
| H | 53425 | URETHROPLASTY TWO-STAGE RECONSTR | 7/1/1997 | $363.00 | 3 |
| H | 53430 | URETHROPLASTY RECONSTRUCTION OF | 7/1/1997 | $363.00 | 3 |
| H | 53431 | URETHROPLASTY WITH TUBULARIZATIO | 1/1/2002 | $363.00 | 3 |
| H | 53440 | SLING OPERATION FOR CORRECTION O | 7/1/1997 | $363.00 | 3 |
| H | 53442 | REMOVAL OR REVISION OF SLING FOR | 7/1/1997 | $271.00 | 3 |
| H | 53444 | INSERTION OF TANDEM CUFF (DUAL C | 1/1/2002 | $363.00 | 3 |
| H | 53445 | INSERTION OF INFLATABLE URETHRAL | 1/1/2002 | $271.00 | 3 |
| H | 53446 | REMOVAL OF INFLATABLE URETHRAL/B | 1/1/2002 | $271.00 | 3 |
| H | 53447 | REMOVAL AND REPLACEMENT OF INFLA | 7/1/1997 | $271.00 | 3 |
| H | 53449 | REPAIR OF INFLATABLE URETHRAL/BL | 7/1/1997 | $271.00 | 3 |
| H | 53450 | URETHROMEATOPLASTY, WITH MUCOSAL | 7/1/1997 | $271.00 | 3 |
| H | 53460 | URETHROMEATOPLASTY, WITH PARTIAL | 7/1/1997 | $271.00 | 3 |
| H | 53502 | URETHRORRHAPHY SUTURE OF URETHRA | 7/1/1997 | $363.00 | 3 |
| H | 53505 | URETHRORRHAPHY SUTURE OF URETHRA | 7/1/1997 | $363.00 | 3 |
| H | 53510 | URETHRORRHAPHY SUTURE OF URETHRA | 7/1/1997 | $363.00 | 3 |
| H | 53515 | URETHRORRHAPHY SUTURE OF URETHRA | 7/1/1997 | $363.00 | 3 |
| H | 53520 | CLOSURE OF URETHROSTOMY OR URETH | 7/1/1997 | $363.00 | 3 |
| H | 53605 | DILATION OF URETHRAL STRICTURE O | 7/1/1997 | $363.00 | 3 |
| H | 53665 | DILATION OF FEMALE URETHRA, GENE | 7/1/1997 | $271.00 | 3 |
| H | 53670 | CATHETERIZATION, URETHRA; SIMPLE | 7/1/2003 | INVALID | N |
| H | 53675 | CATHETERIZATION; COMPLICATED (MA | 7/1/2003 | INVALID | N |
| H | 53850 | TRANSURETHRAL DESTRUCTION OF PRO | 1/1/2004 | $1,150.00 | 3 |
| H | 54000 | SLITTING OF PREPUCE DORSAL OR LA | 1/1/2004 | $363.00 | 3 |
| H | 54001 | SLITTING OF PREPUCE DORSAL OR LA | 7/1/1997 | $363.00 | 3 |
| H | 54015 | INCISION AND DRAINAGE OF PENIS D | 10/1/2002 | $363.00 | 3 |
| H | 54057 | DESTRUCTION OF LESION(S) PENIS S | 7/1/1997 | $271.00 | 3 |
| H | 54060 | DESTRUCTION OF LESION(S) PENIS S | 7/1/1997 | $271.00 | 3 |
| H | 54065 | DESTRUCTION OF LESION(S), PENIS | 7/1/1997 | $271.00 | 3 |
| H | 54100 | BIOPSY OF PENIS CUTANEOUS (SEPAR | 7/1/1997 | $271.00 | 3 |
| H | 54105 | BIOPSY OF PENIS; DEEP STRUCTURES | 7/1/1997 | $271.00 | 3 |
| H | 54110 | EXCISION OF PENILE PLAQUE (PEYRO | 7/1/1997 | $363.00 | 3 |
| H | 54111 | EXCISION OF PENILE PLAQUE (PEYRO | 7/1/2003 | $363.00 | 3 |
| H | 54112 | EXCISION OF PENILE PLAQUE (PEYRO | 7/1/2003 | $363.00 | 3 |
| H | 54115 | REMOVAL FOREIGN BODY FROM DEEP P | 7/1/1997 | $271.00 | 3 |
| H | 54120 | AMPUTATION OF PENIS PARTIAL | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 54125 | AMPUTATION OF PENIS; COMPLETE | 7/1/1997 | $363.00 | 3 |
| H | 54152 | CIRCUMCISION CLAMP PROCEDURE; EX | 1/1/2007 | INVALID | N |
| H | 54160 | CIRCUMCISION, SURGICAL EXCISION | 1/1/2004 | $363.00 | 3 |
| H | 54161 | CIRCUMCISION SURGICAL EXCISION O | 7/1/1997 | $363.00 | 3 |
| H | 54162 | LYSIS OR EXCISION OF PENILE POST | 1/1/2002 | $363.00 | 3 |
| H | 54163 | REPAIR INCOMPLETE CIRCUMCISION | 1/1/2002 | $363.00 | 3 |
| H | 54164 | FRENULOTOMY OF PENIS | 1/1/2002 | $363.00 | 3 |
| H | 54205 | INJECTION PROCEDURE FOR PEYRONIE | 1/1/2004 | $513.00 | 3 |
| H | 54220 | IRRIGATION OF CORPORA CAVERNOSA | 7/1/1997 | $271.00 | 3 |
| H | 54300 | PLASTIC OPERATION OF PENIS FOR S | 1/1/2004 | $446.00 | 3 |
| H | 54304 | PLASTIC OPERATION ON PENIS FOR C | 7/1/2003 | $446.00 | 3 |
| H | 54308 | URETHROPLASTY FOR SECOND STAGE H | 7/1/2003 | $446.00 | 3 |
| H | 54312 | URETHROPLASTY FOR SECOND STAGE H | 7/1/2003 | $446.00 | 3 |
| H | 54316 | URETHROPLASTY FOR SECOND STAGE H | 7/1/2003 | $446.00 | 3 |
| H | 54318 | URETHROPLASTY FOR THIRD STAGE HY | 7/1/2003 | $446.00 | 3 |
| H | 54322 | ONE STAGE DISTAL HYPOSPADIAS REP | 7/1/2003 | $446.00 | 3 |
| H | 54324 | ONE STAGE DISTAL HYPOSPADIAS REP | 7/1/2003 | $446.00 | 3 |
| H | 54326 | ONE STAGE DISTAL HYPOSPADIAS REP | 7/1/2003 | $446.00 | 3 |
| H | 54328 | ONE STAGE DISTAL HYPOSPADIAS REP | 7/1/2003 | $446.00 | 3 |
| H | 54340 | REPAIR OF HYPOSPADIAS COMPLICATI | 7/1/2003 | $446.00 | 3 |
| H | 54344 | REPAIR OF HYPOSPADIAS COMPLICATI | 7/1/2003 | $446.00 | 3 |
| H | 54348 | REPAIR OF HYPOSPADIAS COMPLICATI | 7/1/2003 | $446.00 | 3 |
| H | 54352 | REPAIR OF HYPOSPADIAS CRIPPLE RE | 7/1/2003 | $446.00 | 3 |
| H | 54360 | PLASTIC OPERATION ON PENIS TO CO | 1/1/2004 | $446.00 | 3 |
| H | 54380 | PLASTIC OPERATION ON PENIS FOR E | 7/1/2003 | $446.00 | 3 |
| H | 54385 | PLASTIC OPERATION ON PENIS FOR E | 7/1/2003 | $446.00 | 3 |
| H | 54402 | REMOVAL OR REPLACEMENT OF NON-IN | 4/1/2002 | INVALID | N |
| H | 54407 | REMOVAL, REPAIR, OR REPLACEMENT | 4/1/2002 | INVALID | N |
| H | 54409 | SURGICAL CORRECTION OF HYDRAULIC | 4/1/2002 | INVALID | N |
| H | 54415 | REMOVAL OF NON-INFLATABLE (SEMI- | 1/1/2004 | $446.00 | 3 |
| H | 54420 | CORPORA CAVERNOSA-SAPHENOUS VEIN | 7/1/1997 | $513.00 | 3 |
| H | 54435 | CORPORA CAVERNOSA-GLANS PENIS FI | 7/1/1997 | $513.00 | 3 |
| H | 54440 | PLASTIC OPERATION OF PENIS FOR I | 7/1/1997 | $513.00 | 3 |
| H | 54450 | FORESKIN MANIPULATION INCLUDING | 7/1/1997 | $271.00 | 3 |
| H | 54500 | BIOPSY OF TESTIS NEEDLE (SEPARAT | 7/1/1997 | $271.00 | 3 |
| H | 54505 | BIOPSY OF TESTIS, INCISIONAL (SE | 7/1/1997 | $271.00 | 3 |
| H | 54510 | EXCISION OF LOCAL LESION OF TEST | 4/1/2002 | INVALID | N |
| H | 54512 | EXCISION OF EXTRAPARENCHYMAL LES | 1/1/2002 | $363.00 | 3 |
| H | 54520 | ORCHIECTOMY, SIMPLE (INCLUDING S | 7/1/1997 | $417.00 | 3 |
| H | 54522 | ORCHIECTOMY, PARTIAL | 7/1/2003 | $446.00 | 3 |
| H | 54530 | ORCHIECTOMY RADICAL FOR TUMOR IN | 7/1/1997 | $513.00 | 3 |
| H | 54550 | EXPLORATION FOR UNDESCENDED TEST | 7/1/1997 | $513.00 | 3 |
| H | 54600 | REDUCTION OF TORSION OF TESTIS S | 7/1/1997 | $513.00 | 3 |
| H | 54620 | FIXATION OF CONTRALATERAL TESTIS | 7/1/1997 | $417.00 | 3 |
| H | 54640 | ORCHIOPEXY, ANY TYPE, WITH OR WI | 7/1/1997 | $513.00 | 3 |
| H | 54660 | INSERTION OF TESTICULAR PROSTHES | 1/1/1984 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 54670 | SUTURE OR REPAIR OF TESTICULAR I | 7/1/1997 | $417.00 | 3 |
| H | 54680 | TRANSPLANTATION OF TESTIS(ES) TO | 7/1/1997 | $417.00 | 3 |
| H | 54690 | LAPAROSCOPY, SURGICAL; ORCHIECTO | 1/1/2004 | $1,150.00 | 3 |
| H | 54700 | INCISION AND DRAINAGE OF EPIDIDY | 7/1/1997 | $363.00 | 3 |
| H | 54800 | BIOPSY OF EPIDIDYMIS NEEDLE | 7/1/1997 | $271.00 | 3 |
| H | 54820 | EXPLORATION OF EPIDIDYMIS WITH O | 1/1/2007 | INVALID | N |
| H | 54830 | EXCISION OF LOCAL LESION OF EPID | 7/1/1997 | $417.00 | 3 |
| H | 54840 | EXCISION OF SPERMATOCELE WITH OR | 7/1/1997 | $513.00 | 3 |
| H | 54860 | EPIDIDYMECTOMY UNILATERAL | 7/1/1997 | $417.00 | 3 |
| H | 54861 | EPIDIDYMECTOMY; BILATERAL | 7/1/1997 | $513.00 | 3 |
| H | 54865 | EXPLORATION OF EPIDIDYMIS, WIHT | 1/1/2007 | $271.00 | 3 |
| H | 54900 | EPIDIDYMOVASOSTOMY ANASTOMOSIS O | 1/1/1984 | NC | 9 |
| H | 54901 | EPIDIDYMOVASOSTOMY ANASTOMOSIS O | 1/1/1984 | NC | 9 |
| H | 55040 | EXCISION OF HYDROCELE UNILATERAL | 7/1/1997 | $417.00 | 3 |
| H | 55041 | EXCISION OF HYDROCELE; BILATERAL | 7/1/1997 | $585.00 | 3 |
| H | 55060 | REPAIR OF HYDROCELE (BOTTLE TYPE | 7/1/1997 | $513.00 | 3 |
| H | 55100 | DRAINAGE OF SCROTAL WALL ABSCESS | 7/1/1997 | $271.00 | 3 |
| H | 55110 | SCROTAL EXPLORATION | 7/1/1997 | $363.00 | 3 |
| H | 55120 | REMOVAL OF FOREIGN BODY IN SCROT | 7/1/1997 | $363.00 | 3 |
| H | 55150 | RESECTION OF SCROTUM | 7/1/1997 | $271.00 | 3 |
| H | 55175 | SCROTOPLASTY; SIMPLE | 7/1/1997 | $271.00 | 3 |
| H | 55180 | SCROTOPLASTY; COMPLICATED | 7/1/1997 | $363.00 | 3 |
| H | 55250 | VASECTOMY UNILATERAL OR BILATERA | 7/1/2003 | $363.00 | 3 |
| H | 55300 | VASOTOMY FOR VASOGRAMS SEMINAL V | 1/1/1984 | NC | 9 |
| H | 55400 | VASOVASOSTOMY, VASOVASORRAPHY | 1/1/1984 | NC | 9 |
| H | 55500 | EXCISION OF HYDROCELE OF SPERMAT | 7/1/1997 | $417.00 | 3 |
| H | 55520 | EXCISION OF LESION OF SPERMATIC | 7/1/1997 | $513.00 | 3 |
| H | 55530 | EXCISION OF VARICOCELE OR LIGATI | 7/1/1997 | $513.00 | 3 |
| H | 55535 | EXCISION OF VARICOCELE OR LIGATI | 7/1/1997 | $513.00 | 3 |
| H | 55540 | EXCISION OF VARICOCELE OR LIGATI | 7/1/1997 | $585.00 | 3 |
| H | 55550 | LAPAROSCOPY, SURGICAL, WITH LIGA | 1/1/2004 | $1,150.00 | 3 |
| H | 55600 | VESICULOTOMY | 7/1/1997 | $271.00 | 3 |
| H | 55605 | VESICULOTOMY; COMPLICATED | 7/1/1997 | $271.00 | 3 |
| H | 55650 | VESICULECTOMY, ANY APPROACH | 7/1/1997 | $271.00 | 3 |
| H | 55680 | EXCISION OF MULLERIAN DUCT CYST | 7/1/1997 | $271.00 | 3 |
| H | 55700 | BIOPSY PROSTATE NEEDLE OR PUNCH | 7/1/1997 | $363.00 | 3 |
| H | 55705 | BIOPSY PROSTATE; INCISIONAL ANY | 7/1/1997 | $363.00 | 3 |
| H | 55720 | PROSTATOTOMY EXTERNAL DRAINAGE O | 7/1/1997 | $271.00 | 3 |
| H | 55725 | PROSTATOTOMY EXTERNAL DRAINAGE O | 7/1/2003 | $363.00 | 3 |
| H | 55859 | TRANSPERINEAL PLACEMENT OF NEEDL | 1/1/2007 | INVALID | N |
| H | 55870 | ELECTROEJACULATION | 3/1/1992 | NC | 9 |
| H | 55875 | TRANSPERINEAL PLACEMENT OF NEEDL | 1/1/2007 | $1,150.00 | 3 |
| H | 55970 | INTERSEX SURGERY MALE TO FEMALE | 1/1/1984 | NC | 9 |
| H | 55980 | INTERSEX SURGERY; FEMALE TO MALE | 1/1/1984 | NC | 9 |
| H | 56405 | INCISION AND DRAINAGE OF VULVA O | 7/1/1997 | $363.00 | 3 |
| H | 56440 | MARSUPIALIZATION OF BARTHOLINS G | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 56441 | LYSIS OF LABIAL ADHESIONS | 7/1/1997 | $417.00 | 3 |
| H | 56442 | HYMENOTOMY, SIMPLE INCISION | 1/1/2007 | $271.00 | 3 |
| H | 56515 | DESTRUCTION OF LESION(S), VULVA; | 7/1/1997 | $417.00 | 3 |
| H | 56605 | BIOPSY OF VULVA OR PERINEUM (SEP | 7/1/1997 | $271.00 | 3 |
| H | 56620 | VULVECTOMY SIMPLE; PARTIAL | 7/1/1997 | $585.00 | 3 |
| H | 56625 | VULVECTOMY SIMPLE; COMPLETE | 7/1/1997 | $812.00 | 3 |
| H | 56700 | PARTIAL HYMENECTOMY OR REVISION | 7/1/1997 | $363.00 | 3 |
| H | 56720 | HYMENOTOMY SIMPLE INCISION | 1/1/2007 | INVALID | N |
| H | 56740 | EXCISION OF BARTHOLINS GLAND OR | 7/1/1997 | $417.00 | 3 |
| H | 56800 | PLASTIC REPAIR OF INTROITUS | 7/1/1997 | $417.00 | 3 |
| H | 56810 | PERINEOPLASTY, REPAIR OF PERINEU | 7/1/1997 | $585.00 | 3 |
| H | 57000 | COLPOTOMY WITH EXPLORATION | 7/1/1997 | $271.00 | 3 |
| H | 57010 | COLPOTOMY; WITH DRAINAGE OF PELV | 7/1/1997 | $363.00 | 3 |
| H | 57020 | COLPOCENTESIS (SEPARATE PROCEDUR | 7/1/1997 | $363.00 | 3 |
| H | 57065 | DESTRUCTION OF VAGINAL LESION(S) | 7/1/1997 | $271.00 | 3 |
| H | 57105 | BIOPSY OF VAGINAL MUCOSA; EXTENS | 7/1/1997 | $363.00 | 3 |
| H | 57130 | EXCISION OF VAGINAL SEPTUM | 7/1/1997 | $363.00 | 3 |
| H | 57135 | EXCISION OF VAGINAL CYST OR TUMO | 7/1/1997 | $363.00 | 3 |
| H | 57180 | INTRODUCTION OF ANY HEMOSTATIC A | 7/1/1997 | $271.00 | 3 |
| H | 57200 | COLPORRHAPHY SUTURE OF INJURY OF | 7/1/1997 | $271.00 | 3 |
| H | 57210 | COLPOPERINEORRHAPHY SUTURE OF IN | 7/1/1997 | $363.00 | 3 |
| H | 57220 | PLASTIC OPERATION ON URETHRAL SP | 7/1/1997 | $417.00 | 3 |
| H | 57230 | PLASTIC REPAIR OF URETHROCELE | 7/1/1997 | $417.00 | 3 |
| H | 57240 | ANTERIOR COLPORRHAPHY, REPAIR OF | 7/1/1997 | $585.00 | 3 |
| H | 57250 | POSTERIOR COLPORRHAPHY, REPAIR O | 7/1/1997 | $585.00 | 3 |
| H | 57260 | COMBINED ANTEROPOSTERIOR COLPORR | 7/1/1997 | $585.00 | 3 |
| H | 57265 | CONSTRUCTION OF ARTIFICIAL VAGIN | 7/1/1997 | $812.00 | 3 |
| H | 57268 | REPAIR OF ENTEROCELE VAGINAL APP | 7/1/1997 | $417.00 | 3 |
| H | 57289 | PEREYRA PROCEDURE INCLUDING ANTE | 7/1/2003 | $585.00 | 3 |
| H | 57300 | CLOSURE OF RECTOVAGINAL FISTULA; | 7/1/1997 | $417.00 | 3 |
| H | 57310 | CLOSURE OF URETHROVAGINAL FISTUL | 7/1/1997 | $417.00 | 3 |
| H | 57311 | CLOSURE OF URETHROVAGINAL FISTUL | 7/1/1997 | $513.00 | 3 |
| H | 57320 | CLOSURE OF VESICOVAGINAL FISTULA | 7/1/1997 | $417.00 | 3 |
| H | 57400 | DILATION OF VAGINA UNDER ANESTHE | 7/1/1997 | $363.00 | 3 |
| H | 57410 | PELVIC EXAMINATION UNDER ANESTHE | 7/1/1997 | $363.00 | 3 |
| H | 57415 | REMOVAL OF IMPACTED VAGINAL FORE | 10/1/2002 | $363.00 | 3 |
| H | 57460 | COLPOSCOPY (VAGINOSCOPY); WITH L | 6/1/2005 | $363.00 | 3 |
| H | 57461 | COLPOSCOPY OF THE CERVIX INCLUDI | 3/16/2005 | $363.00 | 3 |
| H | 57513 | CAUTERIZATION OF CERVIX; LASER A | 10/1/2002 | $363.00 | 3 |
| H | 57520 | CONIZATION OF CERVIX, W/OR W/OUT | 7/1/1997 | $363.00 | 3 |
| H | 57522 | CONIZATION OF CERVIX, W/OR W/OUT | 10/1/2002 | $363.00 | 3 |
| H | 57530 | TRACHELECTOMY (CERVICECTOMY) AMP | 7/1/1997 | $417.00 | 3 |
| H | 57550 | EXCISION OF CERVICAL STUMP VAGIN | 7/1/1997 | $417.00 | 3 |
| H | 57556 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2004 | $1,150.00 | 3 |
| H | 57558 | DILATION AND CURETTAGE OF CERVIC | 1/1/2007 | $271.00 | 3 |
| H | 57700 | CERCLAGE OF UTERINE CERVIX, NONO | 7/1/1997 | $271.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 57720 | TRACHELORRHAPHY PLASTIC REPAIR O | 7/1/1997 | $417.00 | 3 |
| H | 57800 | DILATION OF CERVICAL CANAL INSTR | 10/1/2002 | $363.00 | 3 |
| H | 57820 | DILATION AND CURETTAGE OF CERVIC | 1/1/2007 | INVALID | N |
| H | 58120 | DILATION AND CURETTAGE DIAGNOSTI | 7/1/1997 | $363.00 | 3 |
| H | 58145 | MYOMECTOMY EXCISION OF FIBROID T | 7/1/1997 | $585.00 | 3 |
| H | 58345 | TRANSCERVICAL INTRODUCTION OF FA | 1/1/1993 | NC | 9 |
| H | 58350 | CHROMOTUBATION OF OVIDUCT, INCLU | 1/1/1984 | NC | 9 |
| H | 58353 | ENDOMETRIAL ABLATION, THERMAL, W | 7/1/2001 | $513.00 | 3 |
| H | 58545 | LAPAROSCOPY, SURGICAL, MYOMECTOM | 1/1/2004 | $1,150.00 | 3 |
| H | 58546 | LAPAROSCOPY, SURGICAL, MYOMECTOM | 1/1/2004 | $1,150.00 | 3 |
| H | 58550 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2004 | $1,150.00 | 3 |
| H | 58551 | LAPAROSCOPY, SURGICAL; WITH REMO | 7/1/2003 | INVALID | N |
| H | 58555 | HYSTEROSCOPY, DIAGNOSTIC (SEPARA | 10/1/2002 | $363.00 | 3 |
| H | 58558 | HYSTEROSCOPY, SURGICAL; WITH SAM | 10/1/2002 | $513.00 | 3 |
| H | 58559 | HYSTEROSCOPY, SURGICAL; WITH LYS | 10/1/2002 | $513.00 | 3 |
| H | 58560 | HYSTEROSCOPY, SURGICAL; WITH DIV | 7/1/2003 | $446.00 | 3 |
| H | 58561 | HYSTEROSCOPY, SURGICAL; WITH REM | 10/1/2002 | $513.00 | 3 |
| H | 58562 | HYSTEROSCOPY, SURGICAL; WITH REM | 7/1/2003 | $446.00 | 3 |
| H | 58563 | HYSTEROSCOPY, SURGICAL; W/ENDOME | 1/1/2000 | $600.00 | 3 |
| H | 58600 | LIGATION OR TRANSECTION OF FALLO | 10/1/2002 | $513.00 | 3 |
| H | 58615 | OCCLUSION OF FALLOPIAN TUBES BY | 10/1/2002 | $513.00 | 3 |
| H | 58660 | LAPAROSCOPY, SURGICAL; WITH LYSI | 10/1/2002 | $585.00 | 3 |
| H | 58661 | LAPAROSCOPY, SURGICAL; WITH REMO | 1/1/2000 | $683.00 | 3 |
| H | 58662 | LAPAROSCOPY, SURGICAL;WITH FULGU | 1/1/2000 | $683.00 | 3 |
| H | 58670 | LAPAROSCOPY, SURGICAL; WITH FULG | 10/1/2002 | $513.00 | 3 |
| H | 58671 | LAPAROSCOPY, SURGICAL; WITH OCCL | 10/1/2002 | $513.00 | 3 |
| H | 58672 | LAPAROSCOPY, SURGICAL; WITH FIMB | 1/1/2000 | $683.00 | 3 |
| H | 58673 | LAPAROSCOPY, SURGICAL; WITH SALP | 1/1/2000 | $683.00 | 3 |
| H | 58740 | LYSIS OF ADHESIONS (SALPINGOLYSI | 1/1/1984 | NC | 9 |
| H | 58750 | TUBOTUBAL ANASTOMOSIS | 1/1/1984 | NC | 9 |
| H | 58752 | TUBOUTERINE IMPLANTATION | 10/1/1984 | NC | 9 |
| H | 58760 | FIMBRIOPLASTY | 1/1/1984 | NC | 9 |
| H | 58770 | SALPINGOSTOMY (SALPINGONEOSTOMY) | 10/1/1984 | NC | 9 |
| H | 58800 | DRAINAGE OF OVARIAN CYSTS UNILAT | 7/1/1997 | $417.00 | 3 |
| H | 58820 | DRAINAGE OF OVARIAN ABSCESS VAGI | 7/1/1997 | $417.00 | 3 |
| H | 58900 | BIOPSY OF OVARY UNILATERAL OR BI | 7/1/1997 | $417.00 | 3 |
| H | 59160 | CURETTAGE, POSTPARTUM (SEPARATE | 7/1/2003 | $446.00 | 3 |
| H | 59409 | VAGINAL DELIVERY ONLY (WITH OR W | 7/1/1997 | $600.00 | 3 |
| H | 59812 | TREATMENT OF INCOMPLETE ABORTION | 10/1/2002 | $417.00 | 3 |
| H | 59820 | TREATMENT OF MISSED ABORTION, CO | 10/26/2001 | $417.00 | 3 |
| H | 59821 | TREATMENT OF MISSED ABORTION, CO | 10/1/2002 | $585.00 | 3 |
| H | 59830 | TREATMENT OF SEPTIC ABORTION, CO | 10/1/2002 | $752.00 | 3 |
| H | 59840 | INDUCED ABORTION, BY DILATION AN | 4/1/2003 | $280.00 | 3 |
| H | 59841 | INDUCED ABORTION, BY DILATION AN | 4/1/2003 | $420.00 | 3 |
| H | 59850 | INDUCED ABORTION, BY ONE OR MORE | 4/1/2003 | $0.01 | 5 |
| H | 59851 | INDUCED ABORTION, BY ONE OR MORE | 4/1/2003 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 59852 | INDUCED ABORTION, BY ONE OR MORE | 4/1/2003 | $0.01 | 5 |
| H | 59855 | INDUCED ABORTION, BY ONE OR MORE | 4/1/2003 | $0.01 | 5 |
| H | 59856 | INDUCED ABORTION, BY ONE OR MORE | 4/1/2003 | $0.01 | 5 |
| H | 59857 | INDUCED ABORTION, BY ONE OR MORE | 4/1/2003 | $0.01 | 5 |
| H | 59870 | UTERINE EVACUATION AND CURETTAGE | 10/1/2002 | $513.00 | 3 |
| H | 59871 | REMOVAL OF CERCLAGE SUTURE UNDER | 10/1/2002 | $363.00 | 3 |
| H | 60000 | INCISION AND DRAINAGE OF THYROGL | 7/1/1997 | $271.00 | 3 |
| H | 60200 | EXCISION OF CYST OR ADENOMA OF T | 7/1/1997 | $363.00 | 3 |
| H | 60220 | TOTAL THYROID LOBECTOMY, UNILATE | 7/1/1997 | $363.00 | 3 |
| H | 60225 | TOTAL THYROID LOBECTOMY, UNILATE | 7/1/1997 | $417.00 | 3 |
| H | 60280 | EXCISION OF THYROGLOSSAL DUCT CY | 7/1/1997 | $513.00 | 3 |
| H | 60281 | EXCISION OF THYROGLOSSAL DUCT CY | 7/1/1997 | $513.00 | 3 |
| H | 61020 | VENTRICULAR PUNCTURE THROUGH PRE | 7/1/1997 | $271.00 | 3 |
| H | 61026 | VENTRICULAR PUNCT THRU PREV BURR | 7/1/1997 | $271.00 | 3 |
| H | 61050 | CISTERNAL OR LATERAL CERVICAL (C | 7/1/1997 | $271.00 | 3 |
| H | 61055 | CISTERNAL OR LATERAL CERVICAL (C | 7/1/1997 | $271.00 | 3 |
| H | 61070 | PUNCTURE OF SHUNT TUBING OR RESE | 7/1/1997 | $271.00 | 3 |
| H | 61215 | INSERTION OF SUBCUTANEOUS RESERV | 7/1/1997 | $417.00 | 3 |
| H | 61790 | STEREOTACTIC LESION OF GASSERIAN | 7/1/1997 | $417.00 | 3 |
| H | 61791 | CREATION OF LESION BY STEREOTACT | 7/1/1997 | $417.00 | 3 |
| H | 61885 | INSERTION OR REPLACE OF CRANIAL | 7/1/1997 | $363.00 | 3 |
| H | 61886 | INSERTION OR REPLACE OF CRANIAL | 7/1/2003 | $446.00 | 3 |
| H | 61888 | REVISION OR REM OF CRANIAL NEURO | 7/1/1997 | $271.00 | 3 |
| H | 62140 | CRANIOPLASTY FOR SKULL DEFECT UP | 11/1/2001 | $1,150.00 | 3 |
| H | 62141 | CRANIOPLASTY FOR SKULL DEFECT; L | 11/1/2001 | $1,150.00 | 3 |
| H | 62194 | REPLACEMENT OR IRRIGATION, SUBAR | 7/1/1997 | $271.00 | 3 |
| H | 62225 | REPLACEMENT OR IRRIGATION VENTRI | 7/1/1997 | $271.00 | 3 |
| H | 62230 | REPLACEMENT OR REVISION OF CEREB | 7/1/1997 | $363.00 | 3 |
| H | 62256 | REMOVAL OF COMPLETE CEREBROSPINA | 7/1/1997 | $363.00 | 3 |
| H | 62263 | PERCUTANEOUS LYSIS OF EPIDURAL A | 1/1/2000 | $287.17 | 3 |
| H | 62264 | PERCUTANEOUS LYSIS OF EPIDURAL A | 1/1/2003 | $271.00 | 3 |
| H | 62268 | PERCUTANEOUS ASPIRATION, SPINAL | 7/1/1997 | $271.00 | 3 |
| H | 62269 | BIOPSY OF SPINAL CORD, PERCUTANE | 7/1/1997 | $271.00 | 3 |
| H | 62270 | SPINAL PUNCTURE LUMBAR DIAGNOSTI | 7/1/1997 | $271.00 | 3 |
| H | 62272 | SPINAL PUNCTURE, THEREPEUTIC, FO | 7/1/1997 | $271.00 | 3 |
| H | 62273 | INJECTION LUMBAR EPIDURAL OF BLO | 7/1/1997 | $271.00 | 3 |
| H | 62280 | INJECTION OF NEUROLYTIC SUBSTANC | 7/1/1997 | $271.00 | 3 |
| H | 62281 | INJECTION OF NEUROLYTIC SUBSTANC | 7/1/2002 | $271.00 | 3 |
| H | 62282 | INJECTION OF NEUROLYTIC SUBSTANC | 7/1/1997 | $271.00 | 3 |
| H | 62284 | INJECTION PROCEDURE FOR MYELOGRA | 7/1/2002 | $271.00 | 3 |
| H | 62287 | ASPIRATION PROCEDURE, PERCUTANEO | 1/1/2004 | $1,150.00 | 3 |
| H | 62290 | INJECTION PROCEDURE FOR DISKOGRA | 7/1/2002 | $271.00 | 3 |
| H | 62291 | INJECTION PROCEDURE FOR DISKOGRA | 7/1/2002 | $271.00 | 3 |
| H | 62292 | INJECTION PROCEDURE FOR CHEMONUC | 7/1/2002 | $271.00 | 3 |
| H | 62294 | INJECTION PROCEDURE ARTERIAL FOR | 7/1/1997 | $417.00 | 3 |
| H | 62310 | INJECTION, SINGLE, NOT INCL NEUR | 1/1/2000 | $317.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 62311 | INJECTION, SINGLE, NOT INCL NEUR | 1/1/2000 | $317.00 | 3 |
| H | 62318 | INJECTION, INCL CATHETER PLACEME | 1/1/2000 | $317.00 | 3 |
| H | 62319 | INJECTION, INCL CATHETER PLACEME | 1/1/2000 | $317.00 | 3 |
| H | 62350 | IMPLANTATION, REVISION OR REPOSI | 7/1/2002 | $271.00 | 3 |
| H | 62351 | IMPLANTATION, REVISION OR REPOSI | 7/1/2002 | $1,150.00 | 3 |
| H | 62355 | REMOVAL OF PREVIOUSLY IMPLANTED | 7/1/2002 | $271.00 | 3 |
| H | 62360 | IMPLANTATION OR REPLACEMENT OF D | 7/1/2002 | $363.00 | 3 |
| H | 62361 | IMPLANTATION OR REPLACEMENT OF D | 7/1/2002 | $363.00 | 3 |
| H | 62362 | IMPLANTATION OR REPLACEMENT OF D | 7/1/2002 | $363.00 | 3 |
| H | 62365 | REMOVAL OF SUBCUTANEOUS RESERVOI | 7/1/2002 | $363.00 | 3 |
| H | 63001 | LAMINECTOMY W/EXPL AND/OR DECOMP | 11/1/2001 | $1,150.00 | 3 |
| H | 63003 | LAMINECTOMY FOR DECOMPRESSION OF | 7/1/2002 | $1,150.00 | 3 |
| H | 63005 | LAMINECTOMY FOR DECOMPRESSION OF | 11/1/2001 | $1,150.00 | 3 |
| H | 63011 | LAMINECTOMY FOR DECOMPRESSION OF | 11/1/2001 | $1,150.00 | 3 |
| H | 63020 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 7/1/2002 | $1,150.00 | 3 |
| H | 63030 | LAMINOTOMY,FOR DECOMPRESSION OF | 11/1/2001 | $1,150.00 | 3 |
| H | 63042 | LAMINOTOMY, WITH DECOMPRESSION O | 8/6/2001 | $1,150.00 | 3 |
| H | 63056 | TRANSPEDICULAR APPROACH FOR DECO | 11/1/2001 | $1,150.00 | 3 |
| H | 63075 | DISKECTOMY,ANTERIOR,W/DECOMPRESS | 11/1/2001 | $1,150.00 | 3 |
| H | 63076 | DISKECTOMY ANTERIOR FOR DECOMPRE | 11/1/2001 | $1,150.00 | 3 |
| H | 63077 | DISKECTOMY, ANTR, FOR DECOMP OF | 7/1/2002 | $1,150.00 | 3 |
| H | 63600 | STEREOTACTIC LESION OF SPINAL CO | 7/1/1997 | $363.00 | 3 |
| H | 63610 | STEREOTACTIC STIMULATION OF SPIN | 7/1/1997 | $271.00 | 3 |
| H | 63650 | PERCUTANEOUS IMPLANTATION OF NEU | 7/1/1997 | $363.00 | 3 |
| H | 63660 | REVISION OR REMOVAL OF SPINAL NE | 7/1/1997 | $271.00 | 3 |
| H | 63685 | INSERTION OR REPLACE OF SPINAL N | 7/1/1997 | $363.00 | 3 |
| H | 63688 | REVISION OR REMOVAL OF IMPLANTED | 7/1/1997 | $271.00 | 3 |
| H | 63700 | REPAIR OF MENINGOCELE LESS THAN | 7/1/2002 | $417.00 | 3 |
| H | 63702 | REPAIR OF MENINGOCELE; LARGER TH | 7/1/2002 | $585.00 | 3 |
| H | 63704 | REPAIR OF MYELOMENINGOCELE LESS | 7/1/2002 | $417.00 | 3 |
| H | 63706 | REPAIR OF MYELOMENINGOCELE; LARG | 7/1/2002 | $585.00 | 3 |
| H | 63707 | REPAIR OF DURAL/CEREBROSPINAL FL | 7/1/2002 | $417.00 | 3 |
| H | 63744 | REPLACEMENT IRRIGATION OR REVISI | 7/1/1997 | $417.00 | 3 |
| H | 63746 | REMOVAL OF ENTIRE LUMBOSUBARACHN | 7/1/1997 | $363.00 | 3 |
| H | 64410 | INJECTION ANESTHETIC AGENT; PHRE | 7/1/1997 | $271.00 | 3 |
| H | 64415 | INJECTION, ANESTHETIC AGENT; BRA | 7/1/1997 | $271.00 | 3 |
| H | 64417 | INJECTION ANESTHETIC AGENT; AXIL | 7/1/1997 | $271.00 | 3 |
| H | 64420 | INJECTION ANESTHETIC AGENT; INTE | 7/1/1997 | $271.00 | 3 |
| H | 64421 | INJECTION ANESTHETIC AGENT; INTE | 7/1/1997 | $271.00 | 3 |
| H | 64430 | INJECTION ANESTHETIC AGENT; PUDE | 7/1/1997 | $271.00 | 3 |
| H | 64470 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2001 | $285.00 | 3 |
| H | 64472 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2001 | $285.00 | 3 |
| H | 64475 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2000 | $317.00 | 3 |
| H | 64476 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2000 | $317.00 | 3 |
| H | 64479 | INJECTION, ANESTHETIC AGENT AND/ | 3/13/2000 | $285.00 | 3 |
| H | 64480 | INJECTIN, ANESTHETIC AGENT AND/O | 1/1/2001 | $285.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 64483 | INJECTION, ANESTHETIC AGENT AND/ | 3/13/2000 | $285.00 | 3 |
| H | 64484 | INJECTION, ANESTHETIC AGENT AND/ | 1/1/2001 | $285.00 | 3 |
| H | 64510 | INJECTION ANESTHETIC AGENT; STEL | 7/1/1997 | $271.00 | 3 |
| H | 64520 | INJECTIO;N ANESTHETIC AGENT; LUM | 7/1/1997 | $271.00 | 3 |
| H | 64530 | INJECTION ANESTHETIC AGENT; CELI | 7/1/1997 | $271.00 | 3 |
| H | 64553 | PERCUTANEOUS IMPLANTATION OF NEU | 7/1/2003 | $271.00 | 3 |
| H | 64573 | INCISION FOR IMPLANTATION OF NEU | 7/1/2003 | $271.00 | 3 |
| H | 64575 | INCISION FOR IMPLANTATION OF NEU | 7/1/1997 | $271.00 | 3 |
| H | 64577 | INCISION FOR IMPLANTATION OF NEU | 7/1/2003 | $271.00 | 3 |
| H | 64580 | INCISION FOR IMPLANTATION OF NEU | 7/1/2003 | $271.00 | 3 |
| H | 64585 | REVISION OR REMOVAL OF PERIPHERA | 7/1/2003 | $271.00 | 3 |
| H | 64590 | INCISION & SUBCUTANEOUS PLACE OF | 7/1/1997 | $363.00 | 3 |
| H | 64595 | REVISION OR REMOVAL OF PERIPHERA | 7/1/1997 | $271.00 | 3 |
| H | 64600 | DESTRUCTION BY NEUROLYTIC AGENT | 7/1/1997 | $271.00 | 3 |
| H | 64605 | DESTRUCTION BY NEUROLYTIC AGENT | 7/1/1997 | $271.00 | 3 |
| H | 64610 | DESTRUCTION BY NEUROLYTIC AGENT | 7/1/1997 | $271.00 | 3 |
| H | 64620 | DESTRUCTION OF NEUROLYTIC AGENT | 7/1/1997 | $271.00 | 3 |
| H | 64622 | DESTRUCTION BY NEUROLYTIC AGENT | 7/1/1997 | $271.00 | 3 |
| H | 64623 | DESTRUCTION BY NEUROLYTIC AGENT; | 7/1/1997 | $271.00 | 3 |
| H | 64626 | DESTRUCTION BY NEUROLYTIC AGENT; | 1/1/2001 | $285.00 | 3 |
| H | 64627 | DESTRUCTION BY NEUROLYTIC AGENT; | 1/1/2001 | $285.00 | 3 |
| H | 64630 | DESTRUCTION BY NEUROLYTIC AGENT; | 7/1/2002 | $271.00 | 3 |
| H | 64680 | DESTRUCTION BY NEUROLYTIC AGENT | 7/1/2002 | $271.00 | 3 |
| H | 64702 | NEUROPLASTY; DIGITAL, ONE OR BOT | 7/1/1997 | $271.00 | 3 |
| H | 64704 | NEUROLYSIS; NERVE OF HAND OR FOO | 7/1/1997 | $271.00 | 3 |
| H | 64708 | NEUROPLASTY, MAJOR PERIPHERAL NE | 7/1/1997 | $363.00 | 3 |
| H | 64712 | NEUROLYSIS MAJOR PERIPHERAL NERV | 7/1/1997 | $363.00 | 3 |
| H | 64713 | NEUROLYSIS MAJOR PERIPHERAL NERV | 7/1/1997 | $363.00 | 3 |
| H | 64714 | NEUROLYSIS MAJOR PERIPHERAL NERV | 7/1/1997 | $363.00 | 3 |
| H | 64716 | NEUROPLASTY AND/OR TRANSPOSITION | 7/1/1997 | $417.00 | 3 |
| H | 64718 | NEUROLYSIS AND/OR TRANSPOSITION; | 7/1/1997 | $363.00 | 3 |
| H | 64719 | NEUROLYSIS AND/OR TRANSPOSITION; | 7/1/1997 | $363.00 | 3 |
| H | 64721 | NEUROLYSIS AND/OR TRANSPOSITION; | 7/1/1997 | $363.00 | 3 |
| H | 64722 | DECOMPRESSION UNSPECIFIED NERVES | 7/1/1997 | $271.00 | 3 |
| H | 64726 | DECOMPRESSION; PLANTAR DIGITAL N | 7/1/1997 | $271.00 | 3 |
| H | 64727 | INTERNAL NEUROLYSIS, REQUIRING U | 7/1/1997 | $271.00 | 3 |
| H | 64732 | TRANSECTION OR AVULSION OF SUPRA | 7/1/1997 | $363.00 | 3 |
| H | 64734 | TRANSECTION OR AVULSION OF; INFR | 7/1/1997 | $363.00 | 3 |
| H | 64736 | TRANSECTION OF AVULSION OF; MENT | 7/1/1997 | $363.00 | 3 |
| H | 64738 | TRANSECTION OR AVULSION OF; INFE | 7/1/1997 | $363.00 | 3 |
| H | 64740 | TRANSECTION OR AVULSION OF; LING | 7/1/1997 | $363.00 | 3 |
| H | 64742 | TRANSECTION OR AVULSION OF; FACI | 7/1/1997 | $363.00 | 3 |
| H | 64744 | TRANSECTION OR AVULSION OF; GREA | 7/1/1997 | $363.00 | 3 |
| H | 64746 | TRANSECTION OR AVULSION OF; PHRE | 7/1/1997 | $363.00 | 3 |
| H | 64771 | TRANSECTION OR AVULSI0N OF OTHER | 7/1/1997 | $363.00 | 3 |
| H | 64772 | TRANSECTION OR AVULSION OF OTHER | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 64774 | EXCISION OF NEUROMA CUTANEOUS NE | 7/1/1997 | $363.00 | 3 |
| H | 64776 | EXCISION OF NEUROMA; DIGITAL NER | 7/1/1997 | $417.00 | 3 |
| H | 64778 | EXCISION OF NEUROMA; DIGITAL NER | 7/1/1997 | $363.00 | 3 |
| H | 64782 | EXCISION OF NEUROMA; HAND OR FOO | 7/1/1997 | $417.00 | 3 |
| H | 64783 | EXCISION OF NEUROMA HAND OR FOOT | 7/1/1997 | $363.00 | 3 |
| H | 64784 | EXCISION OF NEUROMA; MAJOR PERIP | 7/1/1997 | $417.00 | 3 |
| H | 64786 | EXCISION OF NEUROMA; SCIATIC NER | 7/1/1997 | $417.00 | 3 |
| H | 64787 | IMPLANTATION OF NERVE END INTO B | 7/1/1997 | $363.00 | 3 |
| H | 64788 | EXCISION OF NEUROFIBROMA OR NEUR | 7/1/1997 | $417.00 | 3 |
| H | 64790 | EXCISION OF NEUROFIBROMA OR NEUR | 7/1/1997 | $417.00 | 3 |
| H | 64792 | EXCISION OF NEUROFIBROMA OR NEUR | 7/1/1997 | $417.00 | 3 |
| H | 64795 | BIOPSY OF NERVE | 7/1/1997 | $363.00 | 3 |
| H | 64802 | SYMPATHECTOMY, CERVICAL | 7/1/1997 | $363.00 | 3 |
| H | 64821 | SYMPATHECTOMY; RADIAL ARTERY | 7/1/2003 | $513.00 | 3 |
| H | 64831 | SUTURE OF DIGITAL NERVE HAND OR | 7/1/1997 | $513.00 | 3 |
| H | 64832 | SUTURE OF DIGITAL NERVE HAND OR | 7/1/1997 | $271.00 | 3 |
| H | 64834 | SUTURE OF ONE NERVE HAND OR FOOT | 7/1/1997 | $363.00 | 3 |
| H | 64835 | SUTURE OF ONE NERVE HAND OR FOOT | 7/1/1997 | $417.00 | 3 |
| H | 64836 | SUTURE OF ONE NERVE HAND OR FOOT | 7/1/1997 | $417.00 | 3 |
| H | 64837 | SUTURE OF EACH ADDITIONAL NERVE | 7/1/1997 | $271.00 | 3 |
| H | 64840 | SUTURE OF POSTERIOR TIBIAL NERVE | 7/1/1997 | $363.00 | 3 |
| H | 64856 | SUTURE OF MAJOR PERIPHERAL NERVE | 7/1/1997 | $363.00 | 3 |
| H | 64857 | SUTURE OF MAJOR PERIPHERAL NERVE | 7/1/1997 | $363.00 | 3 |
| H | 64858 | SUTURE OF SCIATIC NERVE | 7/1/1997 | $363.00 | 3 |
| H | 64859 | SUTURE OF EACH ADDITIONAL MAJOR | 7/1/1997 | $271.00 | 3 |
| H | 64861 | SUTURE OF BRACHIAL PLEXUS | 7/1/1997 | $417.00 | 3 |
| H | 64862 | SUTURE OF; LUMBAR PLEXUS | 7/1/1997 | $417.00 | 3 |
| H | 64864 | SUTURE OF FACIAL NERVE EXTRACRAN | 7/1/1997 | $417.00 | 3 |
| H | 64865 | SUTURE OF FACIAL NERVE; INTRATEM | 7/1/1997 | $513.00 | 3 |
| H | 64870 | ANASTOMOSIS; FACIAL-PHRENIC | 7/1/1997 | $513.00 | 3 |
| H | 64872 | SUTURE OF NERVE REQUIRING SECOND | 7/1/1997 | $363.00 | 3 |
| H | 64874 | SUTURE OF NERVE; REQUIRING EXTEN | 7/1/1997 | $417.00 | 3 |
| H | 64876 | SUTURE OF NERVE REQUIRING SHORTE | 7/1/1997 | $417.00 | 3 |
| H | 64885 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/2003 | $363.00 | 3 |
| H | 64886 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/2003 | $363.00 | 3 |
| H | 64890 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/1997 | $363.00 | 3 |
| H | 64891 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/1997 | $363.00 | 3 |
| H | 64892 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/1997 | $363.00 | 3 |
| H | 64893 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/1997 | $363.00 | 3 |
| H | 64895 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/1997 | $417.00 | 3 |
| H | 64896 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/1997 | $417.00 | 3 |
| H | 64897 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/1997 | $417.00 | 3 |
| H | 64898 | NERVE GRAFT (INCLUDES OBTAINING | 7/1/1997 | $417.00 | 3 |
| H | 64901 | NERVE GRAFT EACH ADDITIONAL NERV | 7/1/1997 | $363.00 | 3 |
| H | 64902 | NERVE GRAFT EACH ADDITIONAL NERV | 7/1/1997 | $363.00 | 3 |
| H | 64905 | NERVE PEDICLE TRANSFER FIRST STA | 7/1/1997 | $363.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 64907 | NERVE PEDICLE TRANSFER; SECOND S | 7/1/1997 | $271.00 | 3 |
| H | 65091 | EVISCERATION OF OCULAR CONTENTS; | 7/1/1997 | $417.00 | 3 |
| H | 65093 | EVISCERATION OF OCULAR CONTENTS; | 7/1/1997 | $417.00 | 3 |
| H | 65101 | ENUCLEATION OF EYE; WITHOUT IMPL | 7/1/1997 | $417.00 | 3 |
| H | 65103 | ENUCLEATION OF EYE; WITH IMPLANT | 7/1/1997 | $417.00 | 3 |
| H | 65105 | ENUCLEATION OF EYE; WITH IMPLANT | 7/1/1997 | $513.00 | 3 |
| H | 65110 | EXENTERATION OF ORBIT (DOES NOT | 7/1/1997 | $585.00 | 3 |
| H | 65112 | EXENTERATION OF ORBIT (DOES NOT | 7/1/1997 | $812.00 | 3 |
| H | 65114 | EXENTERATION OF ORBIT, REMOVAL O | 7/1/1997 | $812.00 | 3 |
| H | 65130 | INSERTION OF OCULAR IMPLANT SECO | 7/1/1997 | $417.00 | 3 |
| H | 65135 | INSERTION OF OCULAR IMPLANT SECO | 7/1/1997 | $363.00 | 3 |
| H | 65140 | INSERTION OF OCULAR IMPLANT SECO | 7/1/1997 | $417.00 | 3 |
| H | 65150 | REINSERTION OF OCULAR IMPLANT; W | 7/1/1997 | $363.00 | 3 |
| H | 65155 | REINSERTION OF OCULAR IMPLANT WI | 7/1/1997 | $417.00 | 3 |
| H | 65175 | REMOVAL OF OCULAR IMPLANT (FOR O | 7/1/1997 | $271.00 | 3 |
| H | 65235 | REMOVAL OF FOREIGN BODY, INTRAOC | 7/1/1997 | $363.00 | 3 |
| H | 65260 | REMOVAL OF FOREIGN BODY INTRAOCU | 7/1/1997 | $417.00 | 3 |
| H | 65265 | REMOVAL OF FOREIGN BODY, INTRAOC | 7/1/1997 | $513.00 | 3 |
| H | 65270 | REPAIR OF LACERATION; CONJUNCTIV | 7/1/1997 | $363.00 | 3 |
| H | 65272 | REPAIR OF LACERATION; CONJUNCTIV | 7/1/1997 | $363.00 | 3 |
| H | 65275 | REPAIR OF LACERATION; CORNEA NON | 7/1/1997 | $513.00 | 3 |
| H | 65280 | REPAIR OF LACERATION; CORNEA AND | 7/1/1997 | $513.00 | 3 |
| H | 65285 | REPAIR OF LACERATION CORNEA AND/ | 7/1/1997 | $513.00 | 3 |
| H | 65290 | REPAIR OF WOUND, EXTRAOCULAR MUS | 7/1/1997 | $417.00 | 3 |
| H | 65400 | EXCISION OF LESION, CORNEA (KERA | 7/1/1997 | $271.00 | 3 |
| H | 65410 | BIOPSY OF CORNEA | 7/1/1997 | $363.00 | 3 |
| H | 65420 | EXCISION OR TRANSPOSITION OF PTE | 7/1/1997 | $363.00 | 3 |
| H | 65426 | EXCISION OR TRANSPOSITION OF PTE | 7/1/1997 | $585.00 | 3 |
| H | 65710 | KERATOPLASTY (CORNEAL TRANSPLANT | 7/1/1997 | $812.00 | 3 |
| H | 65730 | KERATOPLASTY (CORNEAL TRANSPLANT | 7/1/1997 | $812.00 | 3 |
| H | 65750 | KERATOPLASTY (CORNEAL TRANSPLANT | 7/1/1997 | $812.00 | 3 |
| H | 65755 | KERATOPLASTY (CORNEAL TRANSPLANT | 7/1/1997 | $812.00 | 3 |
| H | 65770 | KERATOPROSTHSIS | 7/1/2002 | $812.00 | 3 |
| H | 65771 | RADIAL KERATOTOMY | 1/1/1991 | NC | 9 |
| H | 65800 | PARACENTESIS OF ANTERIOR CHAMBER | 7/1/1997 | $271.00 | 3 |
| H | 65805 | PARACENTESIS OF ANTERIOR CHAMBER | 7/1/1997 | $271.00 | 3 |
| H | 65810 | PARACENTESIS OF ANTERIOR CHAMBER | 7/1/1997 | $417.00 | 3 |
| H | 65815 | PARACENTESIS OF ANTERIOR CHAMBER | 7/1/1997 | $363.00 | 3 |
| H | 65850 | TRABECULOTOMY AB EXTERNO | 7/1/1997 | $513.00 | 3 |
| H | 65865 | SEVERING ADHESIONS OF ANTERIOR S | 7/1/1997 | $271.00 | 3 |
| H | 65870 | SEVERING ADHESION OF ANTERIOR SE | 7/1/1997 | $513.00 | 3 |
| H | 65875 | SEVERING ADHESIONS OF ANTERIOR S | 7/1/1997 | $513.00 | 3 |
| H | 65880 | SEVERING ADHESIONS OF ANTERIOR S | 7/1/1997 | $513.00 | 3 |
| H | 65900 | REMOVAL OF EPITHELIAL DOWNGROWTH | 7/1/1997 | $585.00 | 3 |
| H | 65920 | REMOVAL OF IMPLANTED MATERIAL, A | 7/1/1997 | $812.00 | 3 |
| H | 65930 | REMOVAL OF BLOOD CLOT, ANTERIOR | 7/1/1997 | $585.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 66020 | INJECTION, ANTERIOR CHAMBER OF E | 7/1/1997 | $271.00 | 3 |
| H | 66030 | INJECTION ANTERIOR CHAMBER (SEPA | 7/1/1997 | $271.00 | 3 |
| H | 66130 | EXCISION OF LESION, SCLERA | 7/1/1997 | $812.00 | 3 |
| H | 66150 | FISTULIZATION OF SCLERA FOR GLAU | 7/1/1997 | $513.00 | 3 |
| H | 66155 | FISTULIZATION OF SCLERA FOR GLAU | 7/1/1997 | $513.00 | 3 |
| H | 66160 | FISTULIZATION OF SCLERA FOR GLAU | 7/1/1997 | $363.00 | 3 |
| H | 66165 | FISTULIZATION OF SCLERA FOR GLAU | 7/1/1997 | $513.00 | 3 |
| H | 66170 | FISTULIZATION OF SCLERA FOR GLAU | 7/1/1997 | $513.00 | 3 |
| H | 66172 | FISTULIZATION OF SCLERA FOR GLAU | 7/1/1997 | $513.00 | 3 |
| H | 66180 | AQUEOUS SHUNT TO EXTRAOCULAR RES | 7/1/1997 | $417.00 | 3 |
| H | 66185 | REVISION OF AQUEOUS SHUNT TO EXT | 7/1/1997 | $417.00 | 3 |
| H | 66220 | REPAIR OF SCLERAL STAPHYLOMA; WI | 7/1/1997 | $417.00 | 3 |
| H | 66225 | REPAIR OF SCLERAL STAPHYLOMA; WI | 7/1/1997 | $513.00 | 3 |
| H | 66250 | REVISION OR REPAIR OF OPERATIVE | 7/1/1997 | $363.00 | 3 |
| H | 66500 | IRIDOTOMY BY STAB INCISION (SEPA | 7/1/1997 | $271.00 | 3 |
| H | 66505 | IRIDOTOMY BY STAB INCISION (SEPA | 7/1/1997 | $271.00 | 3 |
| H | 66600 | IRIDECTOMY WITH CORNEOSCLERAL OR | 7/1/1997 | $417.00 | 3 |
| H | 66605 | IRIDECTOMY WITH CORNEOSCLERAL OR | 7/1/1997 | $417.00 | 3 |
| H | 66625 | IRIDECTOMY WITH CORNEOSCLERAL OR | 7/1/1997 | $417.00 | 3 |
| H | 66630 | IRIDECTOMY WITH CORNEOSCLERAL OR | 7/1/1997 | $417.00 | 3 |
| H | 66635 | IRIDECTOMY WITH CORNEOSCLERAL OR | 7/1/1997 | $417.00 | 3 |
| H | 66680 | REPAIR OF IRIS CILIARY BODY (AS | 7/1/1997 | $417.00 | 3 |
| H | 66682 | SUTURE OF IRIS CILIARY BODY (SEP | 7/1/1997 | $363.00 | 3 |
| H | 66700 | CYCLODIATHERMY INITIAL | 7/1/1997 | $363.00 | 3 |
| H | 66710 | CILIARY BODY DESTRUCTION; CYCLOP | 7/1/1997 | $363.00 | 3 |
| H | 66711 | CILIARY BODY DESTRUCTION; CYCLOP | 11/1/2006 | $363.00 | 3 |
| H | 66720 | CILIARY BODY DESTRUCTION; CRYOTH | 7/1/1997 | $363.00 | 3 |
| H | 66740 | CILIARY BODY DESTRUCTION; CYCLOD | 7/1/1997 | $363.00 | 3 |
| H | 66821 | DISCISSION OF SECONDARY MEMBRANE | 7/1/1997 | $363.00 | 3 |
| H | 66825 | REPOSITIONING OF INTRAOCULAR LEN | 7/1/2003 | $513.00 | 3 |
| H | 66830 | REMOVAL OF SECONDARY MEMBRANOUS | 7/1/1997 | $513.00 | 3 |
| H | 66840 | REMOVAL OF LENS MATERIAL ASPIRAT | 7/1/1997 | $513.00 | 3 |
| H | 66850 | REMOVAL OF LENS MATERIAL PHACOFR | 7/1/1997 | $812.00 | 3 |
| H | 66852 | REMOVAL OF LENS MATERIAL; PARS P | 7/1/1997 | $513.00 | 3 |
| H | 66920 | REMOVAL OF LENS MATERIAL; INTRAC | 7/1/1997 | $513.00 | 3 |
| H | 66930 | EXTRACTION OF LENS WITH OR WITHO | 7/1/1997 | $585.00 | 3 |
| H | 66940 | REMOVAL OF LENS MATERIAL; EXTRAC | 7/1/1997 | $585.00 | 3 |
| H | 66982 | EXTRACAPSULAR CATARACT REMOVAL W | 7/1/2001 | $855.00 | 3 |
| H | 66983 | INTRACAPSULAR CATARACT EXTRACTIO | 7/1/1997 | $855.00 | 3 |
| H | 66984 | EXTRACAPSULAR CATARACT REM W/INS | 7/1/1997 | $855.00 | 3 |
| H | 66985 | INSERT OF INTRAOCULAR LENS PROST | 7/1/1997 | $752.00 | 3 |
| H | 66986 | EXCHANGE OF INTRAOCULAR LENS | 7/1/1997 | $752.00 | 3 |
| H | 67005 | REMOVAL OF VITREOUS ANTERIOR APP | 7/1/1997 | $513.00 | 3 |
| H | 67010 | REMOVAL OF VITREOUS, ANTERIOR AP | 7/1/1997 | $513.00 | 3 |
| H | 67015 | ASPIRATION OR RELEASE OF VITREOU | 7/1/1997 | $271.00 | 3 |
| H | 67025 | INJECTION OF VITREOUS SUBSTITUTE | 7/1/1997 | $271.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 67027 | IMPLANTATION OR REPLACEMENT OF I | 7/1/2003 | $513.00 | 3 |
| H | 67030 | DISCISSION OF VITREOUS STRANDS ( | 7/1/1997 | $271.00 | 3 |
| H | 67031 | SEVERING OF VITREOUS STRANDS, VI | 7/1/1997 | $363.00 | 3 |
| H | 67036 | VITRECTOMY, MECHANICAL, PARS PLA | 7/1/1997 | $513.00 | 3 |
| H | 67038 | VITRECTOMY, MECHANICAL, PARS PLA | 7/1/1997 | $585.00 | 3 |
| H | 67039 | VITRECTOMY, MECHANICAL, PARS PLA | 7/1/1997 | $812.00 | 3 |
| H | 67040 | VITRECTOMY, MECHANICAL, PARS PLA | 7/1/1997 | $812.00 | 3 |
| H | 67107 | REPAIR OF RETINAL DETACHMENT; SC | 7/1/1997 | $585.00 | 3 |
| H | 67108 | REPAIR OF RETINAL DTACHMENT; W/V | 7/1/1997 | $812.00 | 3 |
| H | 67112 | REPAIR OF RETINAL DETACHMENT; BY | 7/1/1997 | $812.00 | 3 |
| H | 67115 | RELEASE OF ENCIRCLING MATERIAL ( | 7/1/1997 | $363.00 | 3 |
| H | 67120 | REMOVAL OF IMPLANTED MATERIAL, P | 7/1/1997 | $363.00 | 3 |
| H | 67121 | REMOVAL OF IMPLANTED MATERIAL PO | 7/1/1997 | $363.00 | 3 |
| H | 67141 | PROPHYLAXIS OF RETINAL DETACHMEN | 7/1/1997 | $363.00 | 3 |
| H | 67218 | DESTRUCTION OF LOCALIZED LESION | 7/1/1997 | $585.00 | 3 |
| H | 67227 | DESTRUCTION OF EXTENSIVE OR PROG | 7/1/1997 | $271.00 | 3 |
| H | 67250 | SCLERAL REINFORCEMENT (SEPARATE | 7/1/1997 | $417.00 | 3 |
| H | 67255 | SCLERAL REINFORCEMENT (SEPARATE | 7/1/1997 | $417.00 | 3 |
| H | 67311 | STRABISMUS SURG,RECESSION OR RES | 7/1/1997 | $417.00 | 3 |
| H | 67312 | STRABISMUS SURG,RECESSION OR RES | 7/1/1997 | $513.00 | 3 |
| H | 67314 | STRABISMUS SURGERY, RECESSION OR | 7/1/1997 | $513.00 | 3 |
| H | 67316 | STRABISMUSSURGERY, RECESSION OR | 7/1/1997 | $585.00 | 3 |
| H | 67318 | STRABISMUS SURGERY, ANY PROCEDUR | 7/1/1997 | $513.00 | 3 |
| H | 67320 | TRANSPOSITION PROC(EG,FOR PARETI | 7/1/1997 | $513.00 | 3 |
| H | 67331 | STRABISMUS SURG ON PATIENT W/PRE | 7/1/1997 | $513.00 | 3 |
| H | 67332 | STRABISMUS SURG ON PATIENT W/SCA | 7/1/1997 | $513.00 | 3 |
| H | 67340 | STRABISMUS SURGERY INVOLVING EXP | 7/1/1997 | $513.00 | 3 |
| H | 67346 | BIOPSY OF EXTRAOCULAR MUSCLE | 1/1/2007 | $271.00 | 3 |
| H | 67350 | BIOPSY OF EXTRAOCULAR MUSCLE | 1/1/2007 | INVALID | N |
| H | 67400 | ORBITOTOMY W/OUT BONE FLAP (FRON | 7/1/1997 | $417.00 | 3 |
| H | 67405 | ORBITOTOMY WITHOUT BONE FLAP (FR | 7/1/1997 | $513.00 | 3 |
| H | 67412 | ORBITOTOMY WITHOUT BONE FLAP (FR | 7/1/1997 | $585.00 | 3 |
| H | 67413 | ORBITOTOMY WITHOUT BONE FLAP (FR | 7/1/1997 | $585.00 | 3 |
| H | 67415 | FINE NEEDLE ASPIRATION OF ORBITA | 7/1/1997 | $271.00 | 3 |
| H | 67420 | ORBITOTOMY WITH BONE FLAP OR WIN | 7/1/1997 | $585.00 | 3 |
| H | 67430 | ORBITOTOMY WITH BONE FLAP LATERA | 7/1/1997 | $585.00 | 3 |
| H | 67440 | ORBITOTOMY WITH BONE FLAP OR WIN | 7/1/1997 | $585.00 | 3 |
| H | 67450 | ORBITOTOMY WITH BONE FLAP LATERA | 7/1/1997 | $585.00 | 3 |
| H | 67550 | ORBITAL IMPLANT (IMPLANT OUTSIDE | 7/1/1997 | $513.00 | 3 |
| H | 67560 | ORBITAL IMPLANT (IMPLANT OUTSIDE | 7/1/1997 | $363.00 | 3 |
| H | 67715 | CANTHOTOMY (SEPARATE PROCEDURE) | 7/1/1997 | $271.00 | 3 |
| H | 67808 | EXCISION OF CHALAZION UNDER GENE | 7/1/1997 | $363.00 | 3 |
| H | 67830 | CORRECTION OF TRICHIASIS; INCISI | 7/1/1997 | $363.00 | 3 |
| H | 67835 | CORRECTION OF TRICHIASIS; INCISI | 7/1/1997 | $363.00 | 3 |
| H | 67880 | CONSTRUCTION OF INTERMARGINAL AD | 7/1/1997 | $417.00 | 3 |
| H | 67882 | CONSTRUCTION OF INTERMARGINAL AD | 7/1/1997 | $417.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 67901 | REPAIR OF BLEPHAROPTOSIS; FRONTA | 7/1/1997 | $585.00 | 3 |
| H | 67902 | REPAIR OF BLEPHAROPTOSIS; FRONTA | 7/1/1997 | $585.00 | 3 |
| H | 67903 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 7/1/1997 | $513.00 | 3 |
| H | 67904 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 7/1/1997 | $513.00 | 3 |
| H | 67906 | REPAIR OF BLEPHAROPTOSIS SUPERIO | 7/1/1997 | $585.00 | 3 |
| H | 67908 | REPAIR OF BLEPHAROPTOSIS; CONJUN | 7/1/1997 | $513.00 | 3 |
| H | 67909 | REDUCTION OF OVERCORRECTION OF P | 7/1/1997 | $513.00 | 3 |
| H | 67911 | CORRECTION OF LID RETRACTION | 7/1/1997 | $417.00 | 3 |
| H | 67914 | REPAIR OF ECTROPION; SUTURE | 7/1/1997 | $417.00 | 3 |
| H | 67916 | REPAIR OF ECTROPION; BLEPHAROPLA | 7/1/1997 | $513.00 | 3 |
| H | 67917 | REPAIR OF ECTROPION; BLEPHAROPLA | 7/1/1997 | $513.00 | 3 |
| H | 67921 | REPAIR OF ENTROPION; SUTURE | 7/1/1997 | $417.00 | 3 |
| H | 67923 | REPAIR OF ENTROPION; BLEPHAROPLA | 7/1/1997 | $513.00 | 3 |
| H | 67924 | REPAIR OF ENTROPION; BLEPHAROPLA | 7/1/1997 | $513.00 | 3 |
| H | 67935 | SUTURE OF RECENT WOUND EYELID IN | 7/1/1997 | $363.00 | 3 |
| H | 67950 | CANTHOPLASTY (RECONSTUCTION OF C | 1/1/2004 | $363.00 | 3 |
| H | 67961 | EXCISION AND REPAIR OF EYELID, I | 1/1/2004 | $417.00 | 3 |
| H | 67966 | OVER ONE-FOURTH OF LID MARGIN | 1/1/2004 | $417.00 | 3 |
| H | 67971 | RECONSTRUCTION OF EYELID, FULL T | 7/1/1997 | $417.00 | 3 |
| H | 67973 | RECONSTRUCTION OF EYELID FULLTHI | 7/1/1997 | $417.00 | 3 |
| H | 67974 | RECONSTRUCTION OF EYELID FULLTHI | 7/1/1997 | $417.00 | 3 |
| H | 67975 | RECONSTRUCTION OF EYELID FULL TH | 7/1/1997 | $417.00 | 3 |
| H | 68115 | EXCISION OF LESION CONJUNCTIVA; | 7/1/2003 | $363.00 | 3 |
| H | 68130 | EXCISION OF LESION CONJUNCTIVA; | 7/1/1997 | $363.00 | 3 |
| H | 68320 | CONJUNCTIVOPLASTY WITH CONJUNCTI | 7/1/1997 | $513.00 | 3 |
| H | 68325 | WITH BUCCAL MUCOUS MEMBRANE GRAF | 7/1/1997 | $513.00 | 3 |
| H | 68326 | CONJUNCTIVOPLASTY RECONSTRUCTION | 7/1/1997 | $513.00 | 3 |
| H | 68328 | CONJUNCTIVOPLASTY RECONSTRUCTION | 7/1/1997 | $513.00 | 3 |
| H | 68330 | REPAIR OF SYMBLEPHARON; CONJUNCT | 7/1/1997 | $513.00 | 3 |
| H | 68335 | REPAIR OF SYMBLEPHARON WITH FREE | 7/1/1997 | $513.00 | 3 |
| H | 68340 | REPAIR OF SYMBLEPHARON DIVISION | 7/1/1997 | $513.00 | 3 |
| H | 68360 | CONJUNCTIVAL FLAP BRIDGE OR PART | 7/1/1997 | $363.00 | 3 |
| H | 68362 | CONJUNCTIVAL FLAP; TOTAL (SUCH A | 7/1/1997 | $363.00 | 3 |
| H | 68500 | EXCISION OF LACRIMAL GLAND (DACR | 7/1/1997 | $417.00 | 3 |
| H | 68505 | EXCISION OF LACRIMAL GLAND (DACR | 7/1/1997 | $417.00 | 3 |
| H | 68510 | BIOPSY OF LACRIMAL GLAND | 7/1/1997 | $271.00 | 3 |
| H | 68520 | EXCISION OF LACRIMAL SAC (DACRYO | 7/1/1997 | $417.00 | 3 |
| H | 68525 | BIOPSY OF LACRIMAL SAC | 7/1/1997 | $271.00 | 3 |
| H | 68540 | EXCISION OF LACRIMAL GLAND TUMOR | 7/1/1997 | $417.00 | 3 |
| H | 68550 | EXCISION OF LACRIAMAL GLAND TUMO | 7/1/1997 | $417.00 | 3 |
| H | 68700 | PLASTIC REPAIR OF CANALICULI | 7/1/1997 | $363.00 | 3 |
| H | 68720 | DACRYOCYSTORHINOSTOMY (FISTULATI | 7/1/1997 | $513.00 | 3 |
| H | 68745 | CONJUNCTIVORHINOSTOMY (FISTULIZA | 7/1/1997 | $513.00 | 3 |
| H | 68750 | CONJUNCTIVORHINOSTOMY (FISTULIZF | 7/1/1997 | $513.00 | 3 |
| H | 68770 | CLOSURE OF LACRIMAL FISTULA (SEP | 7/1/2003 | $513.00 | 3 |
| H | 68810 | PROBING OF NASOLACRIMAL DUCT, WI | 1/1/1999 | $314.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 68811 | PROBING OF NASOLACRIMAL DUCT, WI | 1/1/1999 | $422.00 | 3 |
| H | 68815 | PROBING OF NASOLACRIMAL DUCT, WI | 1/1/1999 | $422.00 | 3 |
| H | 69090 | EAR PIERCING | 1/1/1984 | NC | 9 |
| H | 69110 | EXCISION EXTERNAL EAR PARTIAL SI | 7/1/1997 | $271.00 | 3 |
| H | 69120 | EXCISION EXTERNAL EAR; COMPLETE | 7/1/1997 | $363.00 | 3 |
| H | 69140 | EXCISION EXOSTOSIS(ES) EXTERNAL | 7/1/1997 | $363.00 | 3 |
| H | 69145 | EXCISION SOFT TISSUE LESION EXTE | 7/1/1997 | $363.00 | 3 |
| H | 69150 | RADICAL EXCISION EXTERNAL AUDITO | 7/1/1997 | $417.00 | 3 |
| H | 69205 | REMOVAL FOREIGN BODY FROM EXTERN | 7/1/1997 | $271.00 | 3 |
| H | 69310 | RECONSTRUCTION OF EXTERNAL AUDIT | 7/1/1997 | $417.00 | 3 |
| H | 69320 | RECONSTRUCTION EXTERNAL AUDITORY | 7/1/1997 | $812.00 | 3 |
| H | 69400 | EUSTACHIAN TUBE INFLATION TRANSN | 7/1/1997 | $217.12 | 3 |
| H | 69401 | EUSTACHIAN TUBE INFLATION TRANSN | 7/1/1997 | $217.12 | 3 |
| H | 69405 | EUSTACHIAN TUBE CATHERIZATION TR | 7/1/1997 | $250.92 | 3 |
| H | 69410 | FOCAL APPLICATION OF PHASE CONTR | 1/1/2006 | INVALID | N |
| H | 69421 | MYRINGOTOMY INCLUDING ASPIRATION | 7/1/1997 | $417.00 | 3 |
| H | 69436 | TYMPANOSTOMY (REQUIRING INSERTIO | 7/1/1997 | $417.00 | 3 |
| H | 69440 | MIDDLE EAR EXPLORATION THROUGH P | 7/1/1997 | $417.00 | 3 |
| H | 69450 | TYMPANOLYSIS TRANSCANAL | 7/1/1997 | $271.00 | 3 |
| H | 69501 | TRANSMASTOID ANTROTOMY (SIMPLE M | 7/1/1997 | $812.00 | 3 |
| H | 69502 | MASTOIDECTOMY COMPLETE | 7/1/1997 | $812.00 | 3 |
| H | 69505 | MASTOIDECTOMY; MODIFIED RADICAL | 7/1/1997 | $812.00 | 3 |
| H | 69511 | MASTOIDECTOMY; RADICAL | 7/1/1997 | $812.00 | 3 |
| H | 69530 | PETROUS APICECTOMY INCLUDING RAD | 7/1/1997 | $812.00 | 3 |
| H | 69550 | EXCISION AURAL GLOMUS TUMOR TRAN | 7/1/1997 | $585.00 | 3 |
| H | 69552 | EXCISION AURAL GLOMUS TUMOR; TRA | 7/1/1997 | $812.00 | 3 |
| H | 69601 | REVISION MASTOIDECTOMY RESULTING | 7/1/1997 | $812.00 | 3 |
| H | 69602 | REVISION MASTOIDECTOMY; RESULTIN | 7/1/1997 | $812.00 | 3 |
| H | 69603 | REVISION MASTOIDECTOMY; RESULTIN | 7/1/1997 | $812.00 | 3 |
| H | 69604 | REVISION MASTOIDECTOMY; RESULTIN | 7/1/1997 | $812.00 | 3 |
| H | 69605 | WITH APICETOMY | 7/1/1997 | $812.00 | 3 |
| H | 69620 | MYRINGOPLASTY (SURGERY CONFINED | 7/1/1997 | $363.00 | 3 |
| H | 69631 | TYMPANOPLASTY WITHOUT MASTOIDECT | 7/1/1997 | $585.00 | 3 |
| H | 69632 | TYMPANOPLASTY WITHOUT MASTOIDECT | 7/1/1997 | $585.00 | 3 |
| H | 69633 | TYMPANOPLASTY WITHOUT MASTOIDECT | 7/1/1997 | $585.00 | 3 |
| H | 69635 | TYMPANOPLASTY WITH ANTROTOMY OR | 7/1/1997 | $812.00 | 3 |
| H | 69636 | TYMPANOPLASTY WITH ANTROTOMY OR | 7/1/1997 | $812.00 | 3 |
| H | 69637 | TYMPANOPLASTY WITH ANTROTOMY OR | 7/1/1997 | $812.00 | 3 |
| H | 69641 | TYMPANOPLASTY WITH MASTOIDECTOMY | 7/1/1997 | $812.00 | 3 |
| H | 69642 | TYMPANOPLASTY WITH MASTOIDECTOMY | 7/1/1997 | $812.00 | 3 |
| H | 69643 | TYMPANOPLASTY WITH MASTOIDECTOMY | 7/1/1997 | $812.00 | 3 |
| H | 69644 | TYMPANOPLASTY WITH MASTOIDECTOMY | 7/1/1997 | $812.00 | 3 |
| H | 69645 | TYMPANOPLASTY WITH MASTOIDECTOMY | 7/1/1997 | $812.00 | 3 |
| H | 69646 | TYMPANOPLASTY WITH MASTOIDECTOMY | 7/1/1997 | $812.00 | 3 |
| H | 69650 | STAPES MOBILIZATION | 7/1/1997 | $812.00 | 3 |
| H | 69660 | STAPEDECTOMY OR STAPEDOTOMY W/RE | 7/1/1997 | $585.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | 69661 | STAPEDECTOMY OR STAPEDOTOMY W/RE | 7/1/1997 | $585.00 | 3 |
| H | 69662 | REVISION OF STAPEDECTOMY OR STAP | 7/1/1997 | $585.00 | 3 |
| H | 69666 | REPAIR OVAL WINDOW FISTULA | 7/1/1997 | $513.00 | 3 |
| H | 69667 | REPAIR ROUND WINDOW FISTULA | 7/1/1997 | $513.00 | 3 |
| H | 69670 | MASTOID OBLITERATION (SEPARATE P | 7/1/1997 | $417.00 | 3 |
| H | 69676 | TYMPANIC NEURECTOMY | 7/1/1997 | $417.00 | 3 |
| H | 69700 | CLOSURE POSTAURICULAR FISTULA MA | 7/1/1997 | $417.00 | 3 |
| H | 69710 | IMPLANTATION OR REPLACEMENT OF E | 7/1/1997 | $417.00 | 3 |
| H | 69711 | REMOVAL OR REPAIR OF ELECTROMAGN | 7/1/1997 | $271.00 | 3 |
| H | 69720 | DECOMPRESSION FACIAL NERVE INTRA | 7/1/1997 | $585.00 | 3 |
| H | 69725 | DECOMPRESSION FACIAL NERVE INTRA | 7/1/1997 | $585.00 | 3 |
| H | 69740 | SUTURE FACIAL NERVE INTRATEMPORA | 7/1/1997 | $585.00 | 3 |
| H | 69745 | SUTURE FACIAL NERVE INTRATEMPORA | 7/1/1997 | $585.00 | 3 |
| H | 69801 | LABYRINTHOTOMY, W/OR W/OUT CRYOS | 7/1/1997 | $585.00 | 3 |
| H | 69802 | LABYRINTHOTOMY WITH MASTOIDECTOM | 7/1/1997 | $812.00 | 3 |
| H | 69805 | ENDOLYMPHATIC SAC OPERATION WITH | 7/1/1997 | $812.00 | 3 |
| H | 69806 | ENDOLYMPHATIC SAC OPERATION; WIT | 7/1/1997 | $812.00 | 3 |
| H | 69820 | FENESTRATION SEMICIRCULAR CANAL | 7/1/1997 | $585.00 | 3 |
| H | 69840 | REVISION FENESTRATION OPERATION | 7/1/1997 | $585.00 | 3 |
| H | 69905 | LABYRINTHECTOMY TRANSCANAL | 7/1/1997 | $812.00 | 3 |
| H | 69910 | LABYRINTHECTOMY; WITH MASTOIDECT | 7/1/1997 | $812.00 | 3 |
| H | 69915 | VESTIBULAR NERVE SECTION TRANSLA | 7/1/1997 | $812.00 | 3 |
| H | 69930 | COCHLEAR DEVICE IMPLANTATION WIT | 1/1/1999 | $941.00 | 3 |
| H | 74740 | HYSTEROSALPINGOGRAPHY, RADIOLOGI | 8/11/2003 | NC | 9 |
| H | 92018 | OPHTHALMOLOGICAL EXAMINATION AND | 7/1/1997 | $250.92 | 3 |
| H | 92499 | UNLISTED OPHTHALMOLOGICAL SERVIC | 2/1/1994 | $0.01 | 5 |
| H | 92502 | OTOLARYNGOLOGIC EXAMINATION UNDE | 6/21/2004 | $217.00 | 3 |
| H | 92599 | UNLISTED OTORHINOLARYNGOLOGICAL | 7/1/2003 | INVALID | N |
| H | 93799 | UNLISTED CARDIOVASCULAR SERVICE | 1/1/1984 | $0.01 | 5 |
| H | 94799 | UNLISTED PULMONARY SERVICE OR PR | 1/1/1984 | $0.01 | 5 |
| H | 99000 | HANDLING AND/OR CONVEYANCE OF SP | 8/14/1989 | NC | 9 |
| H | 99002 | HANDLING, CONVEYANCE, AND/OR ANY | 8/14/1989 | NC | 9 |
| H | 99070 | SUPP & MAT (EX SPECTACLES) PROVI | 10/1/2002 | NC | 9 |
| H | A9170 | NONCOVERED SERVICE BY CHIROPRACT | 4/1/2002 | INVALID | N |
| H | D2110 | AMALGAM - ONE SURFACE, PRIMARY | 4/1/2003 | INVALID | N |
| H | D2120 | AMALGAM - TWO SURFACES, PRIMARY | 4/1/2003 | INVALID | N |
| H | D2130 | AMALGAM - THREE SURFACES, PRIMAR | 4/1/2003 | INVALID | N |
| H | D2131 | AMALGAM - FOUR OR MORE SURFACES, | 4/1/2003 | INVALID | N |
| H | D2140 | AMALGAM - ONE SURFACE, PERMANENT | 1/1/2002 | $363.00 | 3 |
| H | D2161 | AMALGAM - FOUR OR MORE SURFACES, | 1/1/2002 | $363.00 | 3 |
| H | D2336 | RESIN-BASED COMPOSITE CROWN, ANT | 4/1/2003 | INVALID | N |
| H | D2337 | RESIN-BASED COMPOSITE CROWN, ANT | 4/1/2003 | INVALID | N |
| H | D2380 | RESIN-BASED COMPOSITE - ONE SURF | 4/1/2003 | INVALID | N |
| H | D2381 | RESIN-BASED COMPOSITE - TWO SURF | 4/1/2003 | INVALID | N |
| H | D2382 | RESIN-BASED COMPOSITE - THREE OR | 4/1/2003 | INVALID | N |
| H | D2385 | RESIN-BASED COMPOSITE - ONE SURF | 4/1/2003 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| H | D2386 | RESIN-BASED COMPOSITE - TWO SURF | 4/1/2003 | INVALID | N |
| H | D2387 | RESIN-BASED COMPOSITE - THREE SU | 4/1/2003 | INVALID | N |
| H | D2388 | RESIN-BASED COMPOSITE - FOUR OR | 4/1/2003 | INVALID | N |
| H | D2970 | TEMPORARY CROWN (FRACTURED TOOTH | 1/1/2005 | INVALID | N |
| H | G0105 | COLORECTAL CANCER SCREENING; COL | 10/1/2002 | $363.00 | 3 |
| H | G0121 | COLORECTAL CANCER SCREENING; COL | 7/1/2001 | $363.00 | 3 |
| H | M0300 | IV CHELATION THERAPY (CHEMICAL E | 10/1/1984 | NC | 9 |
| H | M0301 | FABRIC WRAPPING OF ABDOMINAL ANE | 8/30/1994 | NC | 9 |
| H | S4005 | INTERIM LABOR FACILITY GLOBAL (L | 1/1/2004 | $0.01 | 5 |
| H | V2785 | PROCESSING, PRESERVING AND TRANS | 10/1/1998 | $1,600.00 | 3 |
| J | 69210 | REMOVAL IMPACTED CERUMEN (SEPARA | 1/1/2007 | $33.48 | 3 |
| J | 92506 | EVALUATION OF SPEECH, LANGUAGE, | 1/1/2007 | $90.57 | 3 |
| J | 92507 | TREATMENT OF SPEECH, LANGUAGE, V | 1/1/2007 | $42.82 | 3 |
| J | 92508 | GROUP, TWO OR MORE INDIVIDUALS | 1/1/2007 | $20.24 | 3 |
| J | 92510 | AURAL REHABILITATION FOLLOWING C | 1/1/2006 | INVALID | N |
| J | 92525 | EVALUATION OF SWALLOWING AND ORA | 7/1/2003 | INVALID | N |
| J | 92526 | TREATMENT OF SWALLOWING DYSFUNCT | 1/1/2007 | $57.35 | 3 |
| J | 92541 | SPONTANEOUS NYSTAGMUS TEST INCLU | 1/1/2007 | $38.15 | 3 |
| J | 92542 | POSITIONAL NYSTAGMUS TEST MINIMU | 1/1/2007 | $38.93 | 3 |
| J | 92543 | CALORIC VESTIBULAR TEST EACH IRR | 1/1/2007 | $17.91 | 3 |
| J | 92544 | OPTOKINETIC NYSTAGMUS TEST BIDIR | 1/1/2007 | $30.88 | 3 |
| J | 92545 | OSCILLATING TRACKING TEST WITH R | 1/1/2007 | $27.51 | 3 |
| J | 92546 | SINUSOIDAL VERTICAL AXIS ROTATIO | 1/1/2007 | $59.94 | 3 |
| J | 92547 | USE OF VERTICAL ELECTRODES ..... | 1/1/2007 | $3.63 | 3 |
| J | 92551 | SCREENING TEST, PURE TONE, AIR O | 10/1/2000 | $11.71 | 3 |
| J | 92552 | PURE TONE AUDIOMETRY (THRESHOLD) | 1/1/2007 | $12.46 | 3 |
| J | 92553 | BASIC AUDIOLOGIC ASSESSMENT | 1/1/2007 | $18.68 | 3 |
| J | 92555 | SPEECH AUDIOMETRY THRESHOLD; | 1/1/2007 | $10.90 | 3 |
| J | 92556 | SPEECH AUDIOMETRY THRESHOLD; WIT | 1/1/2007 | $16.35 | 3 |
| J | 92557 | COMPREHENSIVE AUDIOMETRY THRESHO | 1/1/2007 | $33.99 | 3 |
| J | 92562 | LOUDNESS BALANCE TEST ALTERNATE | 1/1/2007 | $11.68 | 3 |
| J | 92563 | TONE DECAY TEST | 1/1/2007 | $10.90 | 3 |
| J | 92564 | SHORT INCREMENT SENSITIVITY INDE | 1/1/2007 | $13.49 | 3 |
| J | 92565 | STENGER TEST, PURE TONE | 1/1/2007 | $11.42 | 3 |
| J | 92567 | TYMPANOMETRY (IMPEDANCE TESTING) | 1/1/2007 | $15.05 | 3 |
| J | 92568 | ACOUSTIC REFLEX TESTING; THRESHO | 1/1/2007 | $10.90 | 3 |
| J | 92569 | ACOUSTIC REFLEX TESTING; DECAY | 1/1/2007 | $11.68 | 3 |
| J | 92571 | FILTERED SPEECH TEST | 1/1/2007 | $11.16 | 3 |
| J | 92572 | STAGGERED SPONDAIC WORD TEST | 1/1/2007 | $2.60 | 3 |
| J | 92576 | SYNTHETIC SENTENCE IDENTIFICATIO | 1/1/2007 | $12.72 | 3 |
| J | 92577 | STENGER TEST, SPEECH | 1/1/2007 | $20.50 | 3 |
| J | 92579 | VISUAL REINFORCEMENT AUDROMETRY | 1/1/2007 | $20.50 | 3 |
| J | 92582 | CONDITIONING PLAY AUDIOMETRY | 1/1/2007 | $20.50 | 3 |
| J | 92583 | SELECT PICTURE AUDIOMETRY | 1/1/2007 | $25.17 | 3 |
| J | 92585 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $71.10 | 3 |
| J | 92586 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $51.90 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| J | 92587 | EVOKED OTACOUSTIC EMISSIONS-LIMI | 1/1/2007 | $42.04 | 3 |
| J | 92588 | EVOKED OTACOUSTIC EMISSIONS-COMP | 1/1/2007 | $55.27 | 3 |
| J | 92589 | CENTRAL AUDITORY FUNCTION TEST(S | 1/1/2005 | INVALID | N |
| J | 92590 | HEARING AID EXAMINATION AND SELE | 10/1/2000 | $80.16 | 3 |
| J | 92591 | HEARING AID EXAMINATION AND SELE | 10/1/2000 | $81.09 | 3 |
| J | 92592 | HEARING AID CHECK MONAURAL | 1/14/2003 | NC | 9 |
| J | 92593 | HEARING AID CHECK; BINAURAL | 1/14/2003 | NC | 9 |
| J | 92594 | ELECTROACOUSTIC EVALUATION FOR H | 10/1/2000 | $24.72 | 3 |
| J | 92595 | ELECTROACOUSTIC EVALUATION FOR H | 10/1/2000 | $28.45 | 3 |
| J | 92597 | EVALUATION FOR USE AND/OR FITTIN | 1/1/2007 | $66.95 | 3 |
| J | 92599 | UNLISTED OTORHINOLARYNGOLOGICAL | 7/1/2003 | INVALID | N |
| J | 92601 | DIAGNOSTIC ANALYSIS OF COCHLEAR | 1/1/2007 | $92.90 | 3 |
| J | 92602 | DIAGNOSTIC ANALYSIS OF COCHLEAR | 1/1/2007 | $63.84 | 3 |
| J | 92603 | DIAGNOSTIC ANALYSIS OF COCHLEAR | 1/1/2007 | $57.61 | 3 |
| J | 92604 | DIAGNOSTIC ANALYSIS OF COCHLEAR | 1/1/2007 | $36.85 | 3 |
| J | 92605 | EVALUATION FOR PRESCRIPTION OF N | 1/1/2003 | NC | 9 |
| J | 92606 | THERAPEUTIC SERVICE(S) FOR THE U | 1/1/2003 | NC | 9 |
| J | 92607 | EVALUATION FOR PRESCRIPTION FOR | 1/1/2007 | $81.48 | 3 |
| J | 92608 | EVAL FOR PRESCRIPTION FOR SPEECH | 1/1/2007 | $15.57 | 3 |
| J | 92609 | THERAPEUTIC SERVICES FOR THE USE | 1/1/2007 | $42.30 | 3 |
| J | 92610 | EVALUATION OF ORAL AND PHARYNGEA | 1/1/2007 | $91.34 | 3 |
| J | 92611 | MOTION FLUOROSCOPIC EVALUATION O | 1/1/2007 | $91.34 | 3 |
| J | 92620 | EVALUATION OF CENTRAL AUDITORY F | 1/1/2005 | NC | 9 |
| J | 92621 | EVALUATION OF CENTRAL AUDITORY F | 1/1/2005 | NC | 9 |
| J | 92626 | EVALUATION OF AUDITORY REHABILIT | 1/1/2007 | $15.83 | 3 |
| J | 92627 | EVALUATION OF AUDITORY REHABILIT | 1/1/2007 | $15.83 | 3 |
| J | 92630 | AUDITORY REHABILIATION; PRE-LING | 1/1/2006 | $94.72 | 3 |
| J | 92633 | AUDITORY REHABILIATION; POST-LIN | 1/1/2006 | $94.72 | 3 |
| J | 97703 | CHECKOUT FOR ORTHOTIC/PROSTETIC | 1/1/2006 | INVALID | N |
| J | A4649 | SURGICAL SUPPLIES, MISCELLANEOUS | 4/1/2001 | $4.75 | 3 |
| J | E1900 | SYNTHESIZED SPEECH AUGMENTATIVE | 4/1/2002 | INVALID | N |
| J | E2500 | SPEECH GENERATING DEVICE, DIGITI | 10/1/2006 | $391.06 | 3 |
| J | E2502 | SPEECH GENERATING DEVICE, DIGITI | 10/1/2006 | $1,195.80 | 3 |
| J | E2504 | SPEECH GENERATING DEVICE, DIGITI | 10/1/2006 | $1,577.42 | 3 |
| J | E2506 | SPEECH GENERATING DEVICE, DIGITI | 10/1/2006 | $2,312.96 | 3 |
| J | E2508 | SPEECH GENERATING DEVICE, SYNTHE | 10/1/2006 | $3,576.61 | 3 |
| J | E2510 | SPEECH GENERATING DEVICE, SYNTHE | 10/1/2006 | $6,768.25 | 3 |
| J | E2511 | SPEECH GENERATING SOFTWARE PROGR | 1/1/2004 | $0.01 | 5 |
| J | E2512 | ACCESSORY FOR SPEECH GENERATING | 1/1/2004 | $500.00 | 3 |
| J | E2599 | ACCESSORY FOR SPEECH GENERATING | 1/1/2004 | $500.00 | 3 |
| J | G0195 | CLINICAL EVALUATION OF SWALLOWIN | 7/1/2003 | INVALID | N |
| J | G0196 | EVALUATION OF SWALLOWING INVOLVI | 7/1/2003 | INVALID | N |
| J | G0197 | EVALUATION OF PATIENT FOR PRESCR | 7/1/2003 | INVALID | N |
| J | G0200 | EVALUATION OF PATIENT FOR PRESCR | 7/1/2003 | INVALID | N |
| J | K0541 | SPEECH GENERATING DEVICE, DIGITI | 4/1/2004 | INVALID | N |
| J | K0542 | SPEECH GENERATING DEVICE, DIGITI | 4/1/2004 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| J | K0543 | SPEECH GENERATING DEVICE, SYNTHE | 4/1/2004 | INVALID | N |
| J | K0544 | SPEECH GENERATING DEVICE, SYNTHE | 4/1/2004 | INVALID | N |
| J | K0545 | SPEECH GENERATING SOFTWARE PROGR | 4/1/2004 | INVALID | N |
| J | K0546 | ACCESSORY FOR SPEECH GENERATING | 4/1/2004 | INVALID | N |
| J | K0547 | ACCESSORY FOR SPEECH GENERATING | 4/1/2004 | INVALID | N |
| J | K0731 | LITHIUM ION BATTERY FOR USE WITH | 1/1/2006 | INVALID | N |
| J | K0732 | LITHIUM ION BATTERY FOR USE WITH | 1/1/2006 | INVALID | N |
| J | L7510 | REPAIRING PROSTHETIC DEVICE, REP | 10/1/2005 | $200.92 | 3 |
| J | L7520 | REPAIR PROSTHETIC DEVICE, LABOR | 10/1/2005 | $20.64 | 3 |
| J | L8500 | ARTIFICIAL LARYNX ANY TYPE | 10/1/2006 | $626.11 | 3 |
| J | L8501 | TRACHEOSTOMY SPEAKING VALVE | 10/1/2006 | $96.88 | 3 |
| J | L8505 | ARTIFICIAL LARYNX REPLACEMENT BA | 4/1/2002 | $200.00 | 3 |
| J | L8507 | TRACHEO-ESOPHAGEAL VOICE PROSTHE | 10/1/2006 | $32.98 | 3 |
| J | L8509 | TRACHEO-ESOPHAGEAL VOICE PROTHES | 10/1/2006 | $81.75 | 3 |
| J | L8510 | VOICE AMPLIFIER | 10/1/2006 | $198.94 | 3 |
| J | L8515 | GELATIN CAPSULE, APPLICATION DEV | 10/1/2006 | $49.69 | 3 |
| J | L8615 | HEADSET/HEADPIECE FO RUSE WITH C | 10/1/2006 | $355.07 | 3 |
| J | L8616 | MICROPHONE FOR USE WITH COCHLEAR | 10/1/2006 | $82.70 | 3 |
| J | L8617 | TRANSMITTING COIL FOR USE WITH C | 10/1/2006 | $72.23 | 3 |
| J | L8618 | TRANSMITTER CABLE FO RUSE WITH C | 10/1/2006 | $20.64 | 3 |
| J | L8619 | COCHLEAR IMPLANT EXTERNAL SPEECH | 10/1/2006 | $6,467.57 | 3 |
| J | L8620 | LITHIUM ION BATTERY FOR USE WITH | 1/1/2006 | INVALID | N |
| J | L8621 | ZINC AIR BATTERY FOR USE WITH CO | 10/1/2006 | $0.49 | 3 |
| J | L8622 | ALKALINE BATTERY FOR USE WITH CO | 10/1/2006 | $0.26 | 3 |
| J | L8623 | LITHIUM ION BATTERY FOR USE WITH | 10/1/2006 | $50.93 | 3 |
| J | L8624 | LITHIUM ION BATTERY FOR USE WITH | 10/1/2006 | $126.96 | 3 |
| J | L9900 | ORTHOTIC AND PROSTHETIC SUPPLY, | 3/1/2004 | $900.00 | 3 |
| J | S0618 | AUDIOMETRY FOR HEARING AID EVALU | 1/1/2005 | NC | 9 |
| J | S8945 | PHYSICAL MEDICINE TREATMENT FOR | 4/1/2004 | INVALID | N |
| J | S9092 | CANOLITH REPOSITIONING, PER VISI | 1/1/2003 | $22.50 | 3 |
| J | V5008 | HEARING SCREENING | 1/1/1994 | NC | 9 |
| J | V5010 | HEARING AID EVALUATION/TESTS/SEL | 12/1/1996 | NC | 9 |
| J | V5011 | FITTING/ORIENTATION/CHECKING OF | 4/1/2002 | $100.00 | 3 |
| J | V5014 | REPAIR/MODIFICATION OF A HEARING | 4/1/2001 | $105.00 | 3 |
| J | V5020 | CONFORMITY EVALUATION | 1/1/1994 | NC | 9 |
| J | V5030 | HEARING AID, MONAURAL, BODY WORN | 10/1/2002 | $600.00 | 3 |
| J | V5040 | HEARING AID, MONAURAL, BODY WORN | 10/1/2002 | $600.00 | 3 |
| J | V5050 | HEARING AID, MONAURAL, IN THE EA | 10/1/1993 | $600.00 | 3 |
| J | V5060 | HEARING AID, MONAURAL, BEHIND TH | 4/1/2002 | $600.00 | 3 |
| J | V5070 | GLASSES, AIR CONDUCTION | 1/1/1994 | NC | 9 |
| J | V5080 | GLASSES, BONE CONDUCTION | 1/1/1994 | NC | 9 |
| J | V5090 | HEARING AID DISPENSING/FITTING | 7/1/2002 | NC | 9 |
| J | V5095 | SEMI-IMPLANTABLE MIDDLE EAR HEAR | 1/1/2003 | NC | 9 |
| J | V5100 | HEARING AID, BILATERAL, BODY WOR | 1/1/1994 | NC | 9 |
| J | V5110 | DISPENSING FEE, BILATERAL | 1/1/1994 | NC | 9 |
| J | V5120 | BINAURAL, BODY | 1/1/1994 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| J | V5130 | BINAURAL HEARING AID, IN THE EAR | 10/1/1993 | $600.00 | 3 |
| J | V5140 | BINAURAL HEARING AID, BEHIND THE | 10/1/1993 | $600.00 | 3 |
| J | V5150 | BINAURAL, GLASSES | 1/1/1994 | NC | 9 |
| J | V5160 | DISPENSING FEE, BINAURAL | 4/1/2002 | $48.20 | 3 |
| J | V5170 | HEARING AID, CROS, IN THE EAR | 10/1/1993 | $600.00 | 3 |
| J | V5180 | HEARING AID, CROS, BEHIND THE EA | 4/1/2002 | $600.00 | 3 |
| J | V5190 | HEARING AID, CROS, GLASSES | 1/1/1994 | NC | 9 |
| J | V5200 | HEARING AID DISPENSING FEE, CROS | 4/1/2002 | $48.20 | 3 |
| J | V5210 | HEARING AID, BICROS, IN THE EAR | 4/1/2002 | $600.00 | 3 |
| J | V5220 | HEARING AID, BICROS, BEHIND THE | 4/1/2002 | $600.00 | 3 |
| J | V5230 | HEARING AID, BICROS, GLASSES | 1/1/1994 | NC | 9 |
| J | V5240 | HEARING AID DISPENSING FEE, BICR | 4/1/2002 | $48.20 | 3 |
| J | V5241 | DISPENSING FEE, MONAURAL HEARING | 4/1/2002 | $48.20 | 3 |
| J | V5242 | HEARING AID, ANALOG, MONAURAL, C | 1/1/2002 | NC | 9 |
| J | V5243 | HEARING AID, ANALOG, MONAURAL, I | 1/1/2002 | NC | 9 |
| J | V5244 | HEARING AID, DIGITALLY PROGRAMMA | 1/1/2002 | NC | 9 |
| J | V5245 | HEARING AID, DIGITALLY PROGRAMMA | 1/1/2002 | NC | 9 |
| J | V5246 | HEARING AID, DIGITALLY PROGRAMMA | 7/1/2006 | $600.00 | 3 |
| J | V5247 | HEARING AID, DIGITALLY PROGRAMMA | 7/1/2006 | $600.00 | 3 |
| J | V5248 | HEARING AID, ANALOG, BINAURAL, C | 1/1/2002 | NC | 9 |
| J | V5249 | HEARING AID, ANALOG, BINAURAL, I | 1/1/2002 | NC | 9 |
| J | V5250 | HEARING AID, DIGITALLY PROGRAMMA | 1/1/2002 | NC | 9 |
| J | V5251 | HEARING AID, DIGITALLY PROGRAMMA | 1/1/2002 | NC | 9 |
| J | V5252 | HEARING AID, DIGITALLY PROGRAMMA | 7/1/2006 | $600.00 | 3 |
| J | V5253 | HEARING AID, DIGITALLY PROGRAMMA | 7/1/2006 | $600.00 | 3 |
| J | V5254 | HEARING AID, DIGITAL, MONAURAL, | 1/1/2002 | NC | 9 |
| J | V5255 | HEARING AID, DIGITAL, MONAURAL, | 1/1/2002 | NC | 9 |
| J | V5256 | HEARING AID, DIGITAL, MONAURAL, | 7/1/2006 | $600.00 | 3 |
| J | V5257 | HEARING AID, DIGITAL, MONAURAL, | 7/1/2006 | $600.00 | 3 |
| J | V5258 | HEARING AID, DIGITAL, BINAURAL, | 1/1/2002 | NC | 9 |
| J | V5259 | HEARING AID, DIGITAL, BINAURAL, | 1/1/2002 | NC | 9 |
| J | V5260 | HEARING AID, DIGITAL, BINAURAL, | 7/1/2006 | $600.00 | 3 |
| J | V5261 | HEARING AID, DIGITAL, BINAURAL, | 7/1/2006 | $600.00 | 3 |
| J | V5262 | HEARING AID, DISPOSABLE, ANY TYP | 1/1/2002 | NC | 9 |
| J | V5263 | HEARING AID, DISPOSABLE, ANY TYP | 1/1/2002 | NC | 9 |
| J | V5264 | EAR MOLD, NOT DISPOSABLE | 4/1/2002 | $32.45 | 3 |
| J | V5265 | EAR MOLD/INSERT, DISPOSABLE, ANY | 1/1/2002 | NC | 9 |
| J | V5266 | BATTERY FOR USE IN HEARING AID | 4/1/2002 | $2.00 | 3 |
| J | V5267 | HEARING AID SUPPLIES/ACCESSORIES | 1/1/2006 | $68.00 | 3 |
| J | V5268 | ASSISTIVE LISTENING DEVICE, TELE | 1/1/2002 | NC | 9 |
| J | V5269 | ASSISTIVE LISTENING DEVICE, ALER | 1/1/2002 | NC | 9 |
| J | V5270 | ASSISTIVE LISTENING DEVICE, TELE | 1/1/2002 | NC | 9 |
| J | V5271 | ASSISTIVE LISTENING DEVICE, TELE | 1/1/2002 | NC | 9 |
| J | V5272 | ASSISTIVE LISTENING DEVICE, TDD | 1/1/2002 | NC | 9 |
| J | V5273 | ASSISTIVE LISTENING DEVICE, FOR | 4/1/2002 | NC | 9 |
| J | V5274 | ASSISTIVE LISTENING DEVICE, NOT | 11/20/2006 | $107.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| J | V5275 | EAR IMPRESSION, EACH | 1/1/2002 | NC | 9 |
| J | V5298 | HEARING AID, NOT OTHERWISE CLASS | 1/1/2003 | NC | 9 |
| J | V5299 | HEARING AID | 11/1/1993 | NC | 9 |
| J | V5336 | REPAIR/MODIFICATION OF AUGMENTAT | 2/15/2000 | $728.00 | 3 |
| J | V5362 | SPEECH SCREENING | 10/1/2000 | $30.58 | 3 |
| J | V5363 | LANGUAGE SCREENING, INCLUDES SPE | 10/1/2000 | $30.58 | 3 |
| J | V5364 | DYSPHAGIA SCREENING STUDY (TO DE | 10/1/2000 | $30.57 | 3 |
| K | 36415 | COLLECTION OF VENOUS BLOOD BY VE | 8/1/2003 | $3.00 | 3 |
| K | 36416 | COLLECTION OF CAPILLARY BLOOD SP | 1/1/2005 | $3.00 | 3 |
| K | 53670 | CATHETERIZATION, URETHRA; SIMPLE | 7/1/2003 | INVALID | N |
| K | 70010 | MYELOGRAPHY, POSTERIOR FOSSA, RA | 1/1/2007 | $160.63 | 3 |
| K | 70015 | CISTERNOGRAPHY, POSITIVE CONTRAS | 1/1/2007 | $80.19 | 3 |
| K | 70030 | RADIOLOGIC EXAMINATION EYE FOR D | 1/1/2007 | $17.65 | 3 |
| K | 70100 | RADIOLOGIC EXAMINATION MANDIBLE | 1/1/2007 | $20.50 | 3 |
| K | 70110 | RADIOLOGIC EXAMINATION MANDIBLE; | 1/1/2007 | $25.95 | 3 |
| K | 70120 | RADIOLOGIC EXAMINATION MASTOIDS | 1/1/2007 | $23.61 | 3 |
| K | 70130 | RADIOLOGIC EXAMINATION MASTOIDS; | 1/1/2007 | $33.74 | 3 |
| K | 70134 | RADIOLOGIC EXAMINATION INTERNAL | 1/1/2007 | $32.44 | 3 |
| K | 70140 | RADIOLOGIC EXAMINATION FACIAL BO | 1/1/2007 | $23.87 | 3 |
| K | 70150 | RADIOLOGIC EXAMINATION FACIAL BO | 1/1/2007 | $30.62 | 3 |
| K | 70160 | RADIOLOGIC EXAMINATION NASAL BON | 1/1/2007 | $20.24 | 3 |
| K | 70170 | DACRYOCYSTOGRAPHY, NASOLACRIMAL | 1/1/2007 | $36.85 | 3 |
| K | 70190 | RADIOLOGIC EXAMINATION OPTIC FOR | 1/1/2007 | $24.65 | 3 |
| K | 70200 | RADIOLOGIC EXAMINATION; ORBITS C | 1/1/2007 | $31.40 | 3 |
| K | 70210 | RADIOLOGIC EXAMINATION SINUSES P | 1/1/2007 | $23.36 | 3 |
| K | 70220 | RADIOLOGIC EXAMINATION SINUSES P | 1/1/2007 | $30.36 | 3 |
| K | 70240 | RADIOLOGIC EXAMINATION SELLA TUR | 1/1/2007 | $18.17 | 3 |
| K | 70250 | RADIOLOGIC EXAMINATION SKULL LES | 1/1/2007 | $25.69 | 3 |
| K | 70260 | RADIOLOGIC EXAMINATION SKULL; CO | 1/1/2007 | $36.85 | 3 |
| K | 70300 | RADIOLOGIC EXAMINATION TEETH SIN | 1/1/2007 | $11.42 | 3 |
| K | 70310 | RADIOLOGIC EXAMINATION TEETH; PA | 1/1/2007 | $17.91 | 3 |
| K | 70320 | RADIOLOGIC EXAMINATION TEETH; CO | 1/1/2007 | $29.58 | 3 |
| K | 70328 | RADIOLOGIC EXAMINATION TEMPOROMA | 1/1/2007 | $19.72 | 3 |
| K | 70330 | RADIOLOGIC EXAMINATION TEMPOROMA | 1/1/2007 | $31.66 | 3 |
| K | 70332 | TEMPOROMANDIBULAR JOINT ARTHROGR | 1/1/2007 | $77.59 | 3 |
| K | 70336 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $359.67 | 3 |
| K | 70350 | CEPHALOGRAM ORTHODONTIC | 1/1/2007 | $16.87 | 3 |
| K | 70355 | ORTHOPANTOGRAM | 1/1/2007 | $23.10 | 3 |
| K | 70360 | RADIOLOGIC EXAMINATION NECK SOFT | 1/1/2007 | $17.65 | 3 |
| K | 70370 | RADIOLOGIC EXAMINATION; PHARYNX | 1/1/2007 | $46.97 | 3 |
| K | 70371 | COMPLEX DYNAMIC PHARYNGEAL AND S | 1/1/2007 | $87.97 | 3 |
| K | 70373 | LARYNGOGRAPHY, CONTRAST, RADIOLO | 1/1/2007 | $64.88 | 3 |
| K | 70380 | RADIOLOGIC EXAMINATION SALIVARY | 1/1/2007 | $24.65 | 3 |
| K | 70390 | SIALOGRAPHY, RADIOLOGICAL SUPERV | 1/1/2007 | $62.80 | 3 |
| K | 70450 | COMPUTED TOMOGRAPHY, HEAD OR BRA | 1/1/2007 | $159.59 | 3 |
| K | 70460 | COMPUTERIZED AXIAL TOMOGRAPHY HE | 1/1/2007 | $195.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 70470 | COMPUTERIZED AXIAL TOMOGRAPHY HE | 1/1/2007 | $239.00 | 3 |
| K | 70480 | COMPUTED TOMOGRAPHY, ORBIT, SELL | 1/1/2007 | $174.90 | 3 |
| K | 70481 | COMPUTERIZED AXIAL TOMOGRAPHY OR | 1/1/2007 | $204.23 | 3 |
| K | 70482 | COMPUTERIZED AXIAL TOMOGRAPHY OR | 1/1/2007 | $245.23 | 3 |
| K | 70486 | COMPUTED TOMOGRAPHY, MAXILLOFACI | 1/1/2007 | $169.71 | 3 |
| K | 70487 | COMPUTERIZED AXIAL TOMOGRAPHY MA | 1/1/2007 | $201.63 | 3 |
| K | 70488 | COMPUTERIZED AXIAL TOMOGRAPHY MA | 1/1/2007 | $243.93 | 3 |
| K | 70490 | COMPUTED TOMOGRAPHY, SOFT TISSUE | 1/1/2007 | $174.90 | 3 |
| K | 70491 | COMPUTERIZED AXIAL TOMOGRAPHY SO | 1/1/2007 | $204.23 | 3 |
| K | 70492 | COMPUTERIZED AXIAL TOMOGRAPHY SO | 1/1/2007 | $244.97 | 3 |
| K | 70496 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $353.18 | 3 |
| K | 70498 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $353.18 | 3 |
| K | 70540 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $349.55 | 3 |
| K | 70542 | MAGNETIC RESONANCE IMAGING, ORBI | 1/1/2007 | $419.61 | 3 |
| K | 70543 | MAGNETIC RESONANCE IMAGING, ORBI | 1/1/2007 | $746.06 | 3 |
| K | 70544 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $349.55 | 3 |
| K | 70545 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $349.29 | 3 |
| K | 70546 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $662.50 | 3 |
| K | 70547 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $349.29 | 3 |
| K | 70548 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $349.29 | 3 |
| K | 70549 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $662.50 | 3 |
| K | 70551 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $359.67 | 3 |
| K | 70552 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $431.55 | 3 |
| K | 70553 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $765.53 | 3 |
| K | 70554 | MRI, BRAIN, FUNCTIONAL MRI; INCL | 1/1/2007 | NC | 9 |
| K | 70557 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2004 | $0.01 | 5 |
| K | 70558 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2004 | $0.01 | 5 |
| K | 70559 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2004 | $0.01 | 5 |
| K | 71010 | RADIOLOGIC EXAMINATION, CHEST; S | 1/1/2007 | $19.20 | 3 |
| K | 71015 | RADIOLOGIC EXAMINATION CHEST; ST | 1/1/2007 | $21.54 | 3 |
| K | 71020 | RADIOLOGIC EXAMINATION, CHEST, T | 1/1/2007 | $24.91 | 3 |
| K | 71021 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $29.84 | 3 |
| K | 71022 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $31.14 | 3 |
| K | 71023 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $35.03 | 3 |
| K | 71030 | RADIOLOGIC EXAMINATION, CHEST, C | 1/1/2007 | $32.44 | 3 |
| K | 71034 | RADIOLOGIC EXAMINATION CHEST COM | 1/1/2007 | $56.05 | 3 |
| K | 71035 | RADIOLOGIC EXAMINATION CHEST SPE | 1/1/2007 | $20.50 | 3 |
| K | 71040 | BRONCHOGRAPHY, UNILATERAL, RADIO | 1/1/2007 | $60.72 | 3 |
| K | 71060 | BRONCHOGRAPHY, BILATERAL, RADIOL | 1/1/2007 | $86.93 | 3 |
| K | 71090 | INSERTION PACEMAKER, FLUOROSCOPY | 1/1/2007 | $66.43 | 3 |
| K | 71100 | RADIOLOGIC EXAMINATION RIBS UNIL | 1/1/2007 | $23.61 | 3 |
| K | 71101 | RADIOLOGIC EXAMINATION RIBS UNIL | 1/1/2007 | $28.03 | 3 |
| K | 71110 | RADIOLOGIC EXAMINATION RIBS BILA | 1/1/2007 | $31.14 | 3 |
| K | 71111 | RADIOLOGIC EXAMINATION RIBS BILA | 1/1/2007 | $35.81 | 3 |
| K | 71120 | RADIOLOGIC EXAMINATION STERNUM M | 1/1/2007 | $25.17 | 3 |
| K | 71130 | RADIOLOGIC EXAMINATION; STERNOCL | 1/1/2007 | $27.25 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 71250 | COMPUTED TOMOGRAPHY, THORAX; WIT | 1/1/2007 | $203.19 | 3 |
| K | 71260 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $237.70 | 3 |
| K | 71270 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $291.42 | 3 |
| K | 71275 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $400.93 | 3 |
| K | 71550 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $355.00 | 3 |
| K | 71551 | MAGNETIC RESONANCE IMAGING, CHES | 1/1/2007 | $425.06 | 3 |
| K | 71552 | MAGNETIC RESONANCE IMAGING, CHES | 1/1/2007 | $745.54 | 3 |
| K | 71555 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $371.34 | 3 |
| K | 72010 | RADIOLOGIC EXAMINATION SPINE ENT | 1/1/2007 | $44.12 | 3 |
| K | 72020 | RADIOLOGIC EXAMINATION SPINE SIN | 1/1/2007 | $16.87 | 3 |
| K | 72040 | RADIOLOGIC EXAMINATION, SPINE, C | 1/1/2007 | $24.39 | 3 |
| K | 72050 | RADIOLOGIC EXAMINATION SPINE CER | 1/1/2007 | $35.55 | 3 |
| K | 72052 | RADIOLOGIC EXAAMINATION SPINE CE | 1/1/2007 | $43.86 | 3 |
| K | 72069 | RADIOLOGIC EXAMINATION, SPINE, T | 1/1/2007 | $21.28 | 3 |
| K | 72070 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $25.69 | 3 |
| K | 72072 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $28.03 | 3 |
| K | 72074 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $32.96 | 3 |
| K | 72080 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $26.21 | 3 |
| K | 72090 | RADIOLOGIC EXAMINATION SPINE; SC | 1/1/2007 | $28.29 | 3 |
| K | 72100 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $26.21 | 3 |
| K | 72110 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $36.07 | 3 |
| K | 72114 | RADIOLOGIC EXAMINATION SPINE LUM | 1/1/2007 | $45.41 | 3 |
| K | 72120 | RADIOLOGIC EXAMINATION SPINE LUM | 1/1/2007 | $32.44 | 3 |
| K | 72125 | COMPUTED TOMOGRAPHY, CERVICAL SP | 1/1/2007 | $203.19 | 3 |
| K | 72126 | COMPUTERIZED AXIAL TOMOGRAPHY CE | 1/1/2007 | $236.92 | 3 |
| K | 72127 | COMPUTERIZED AXIAL TOMOGRAPHY, C | 1/1/2007 | $287.79 | 3 |
| K | 72128 | COMPUTED TOMOGRAPHY, THORACIC SP | 1/1/2007 | $203.19 | 3 |
| K | 72129 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $236.92 | 3 |
| K | 72130 | COMPUTERIZED AXIAL TOMOGRAPHY, T | 1/1/2007 | $287.79 | 3 |
| K | 72131 | COMPUTED TOMOGRAPHY, LUMBAR SPIN | 1/1/2007 | $203.19 | 3 |
| K | 72132 | COMPUTERIZED AXIAL TOMOGRAPHY LU | 1/1/2007 | $236.92 | 3 |
| K | 72133 | COMPUTERIZED AXIAL TOMOGRAPHY, L | 1/1/2007 | $287.79 | 3 |
| K | 72141 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $363.82 | 3 |
| K | 72142 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $436.74 | 3 |
| K | 72146 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $397.55 | 3 |
| K | 72147 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $436.48 | 3 |
| K | 72148 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $393.40 | 3 |
| K | 72149 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $431.81 | 3 |
| K | 72156 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $773.05 | 3 |
| K | 72157 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $772.79 | 3 |
| K | 72158 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $765.53 | 3 |
| K | 72159 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $402.23 | 3 |
| K | 72170 | RADIOLOGIC EXAMINATION, PELVIS; | 1/1/2007 | $20.24 | 3 |
| K | 72190 | RADIOLOGIC EXAMINATION PELVIS; C | 1/1/2007 | $25.95 | 3 |
| K | 72191 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $387.69 | 3 |
| K | 72192 | COMPUTERIZED AXIAL TOMOGRAPHY, P | 1/1/2007 | $200.85 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 72193 | COMPUTERIZED AXIAL TOMOGRAPHY PE | 1/1/2007 | $228.62 | 3 |
| K | 72194 | COMPUTERIZED AXIAL TOMOGRAPHY PE | 1/1/2007 | $275.33 | 3 |
| K | 72195 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $355.00 | 3 |
| K | 72196 | MAGNETIC RESONANSE (EG, PROTON) | 1/1/2007 | $425.06 | 3 |
| K | 72197 | MAGNETIC RESONANCE IMAGING, PELV | 1/1/2007 | $751.77 | 3 |
| K | 72198 | MAGNETIC RESONANCE ANGIOGRPAHY, | 1/1/2007 | $370.83 | 3 |
| K | 72200 | RADIOLOGIC EXAMINATION SACROILIA | 1/1/2007 | $20.24 | 3 |
| K | 72202 | RADIOLOGIC EXAMINATION SACROILIA | 1/1/2007 | $23.87 | 3 |
| K | 72220 | RADIOLOGIC EXAMINATION SACRUM AN | 1/1/2007 | $22.06 | 3 |
| K | 72240 | MYELOGRAPHY, CERVICAL, RADIOLOGI | 1/1/2007 | $162.19 | 3 |
| K | 72255 | MYELOGRAPHY, THORACIC, RADIOLOGI | 1/1/2007 | $149.99 | 3 |
| K | 72265 | MYELOGRAPHY, LUMBOSACRAL, RADIOL | 1/1/2007 | $140.65 | 3 |
| K | 72270 | MYELOGRAPHY, ENTIRE SPINAL CANAL | 1/1/2007 | $214.35 | 3 |
| K | 72275 | EPIDUROGRAPHY, RADIOLOGICAL SUPE | 1/1/2007 | $86.41 | 3 |
| K | 72285 | DISKOGRAPHY, CERVICAL, RADIOLOGI | 1/1/2007 | $270.40 | 3 |
| K | 72295 | DISKOGRAPHY, LUMBAR, RADIOLOGICA | 1/1/2007 | $244.97 | 3 |
| K | 73000 | RADIOLOGIC EXAMINATION CLAVICLE | 1/1/2007 | $19.72 | 3 |
| K | 73010 | RADIOLOGIC EXAMINATION; SCAPULA | 1/1/2007 | $20.24 | 3 |
| K | 73020 | RADIOLOGIC EXAMINATION SHOULDER | 1/1/2007 | $18.17 | 3 |
| K | 73030 | RADIOLOGIC EXAMINATION SHOULDER; | 1/1/2007 | $22.32 | 3 |
| K | 73040 | RADIOLOGICAL EXAMINATION, SHOULD | 1/1/2007 | $77.07 | 3 |
| K | 73050 | RADIOLOGIC EXAMINATION ACROMIOCL | 1/1/2007 | $25.69 | 3 |
| K | 73060 | RADIOLOGIC EXAMINATION; HUMERUS | 1/1/2007 | $22.06 | 3 |
| K | 73070 | RADIOLOGIC EXAMINATION, ELBOW; T | 1/1/2007 | $19.46 | 3 |
| K | 73080 | RADIOLOGIC EXAMINATION ELBOW; CO | 1/1/2007 | $22.06 | 3 |
| K | 73085 | RADIOLIGIC EXAMINATION, ELBOW, A | 1/1/2007 | $77.33 | 3 |
| K | 73090 | RADIOLOGIC EXAMINATION; FOREARM, | 1/1/2007 | $19.72 | 3 |
| K | 73092 | RADIOLOGIC EXAMINATION; UPPER EX | 1/1/2007 | $18.94 | 3 |
| K | 73100 | RADIOLOGIC EXAMINATION, WRIST; T | 1/1/2007 | $18.94 | 3 |
| K | 73110 | RADIOLOGIC EXAMINATION WRIST; CO | 1/1/2007 | $20.50 | 3 |
| K | 73115 | RADIOLOGIC EXAMINATION, WRIST, A | 1/1/2007 | $62.80 | 3 |
| K | 73120 | RADIOLOGIC EXAMINATION HAND TWO | 1/1/2007 | $18.94 | 3 |
| K | 73130 | RADIOLOGIC EXAMINATION HAND; MIN | 1/1/2007 | $20.50 | 3 |
| K | 73140 | RADIOLOGIC EXAMINATION FINGER OR | 1/1/2007 | $16.09 | 3 |
| K | 73200 | COMPUTED TOMOGRAPHY, UPPER EXTRE | 1/1/2007 | $174.38 | 3 |
| K | 73201 | COMPUTERIZED AXIAL TOMOGRAPHY UP | 1/1/2007 | $203.19 | 3 |
| K | 73202 | COMPUTERIZED AXIAL TOMOGRAPHY UP | 1/1/2007 | $246.53 | 3 |
| K | 73206 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $359.67 | 3 |
| K | 73218 | MAGNETIC RESONANCE IMAGING, UPPE | 1/1/2007 | $349.55 | 3 |
| K | 73219 | MAGNETIC RESONANCE IMAGING, UPPE | 1/1/2007 | $419.87 | 3 |
| K | 73220 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $746.06 | 3 |
| K | 73221 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $349.55 | 3 |
| K | 73222 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $419.61 | 3 |
| K | 73223 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $746.06 | 3 |
| K | 73225 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $366.67 | 3 |
| K | 73500 | RADIOLOGIC EXAMINATION HIP UNILA | 1/1/2007 | $18.94 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 73510 | RADIOLOGIC EXAMINATION HIP; COMP | 1/1/2007 | $23.36 | 3 |
| K | 73520 | RADIOLOGIC EXAMINATION HIPS BILA | 1/1/2007 | $27.77 | 3 |
| K | 73525 | RADIOLOGIC EXAMINATION, HIP, ART | 1/1/2007 | $77.33 | 3 |
| K | 73530 | RADIOLOGIC EXAMINATION HIP DURIN | 1/1/2007 | $24.39 | 3 |
| K | 73540 | RADIOLOGIC EXAMINATION PELVIS AN | 1/1/2007 | $23.10 | 3 |
| K | 73542 | RADIOLOGICAL EXAMINATION, SACROI | 1/1/2007 | $78.11 | 3 |
| K | 73550 | RADIOLOGIC EXAMINATION, FEMUR, T | 1/1/2007 | $22.06 | 3 |
| K | 73560 | RADIOLOGIC EXAMINATION KNEE ANTE | 1/1/2007 | $20.24 | 3 |
| K | 73562 | RADIOLOGIC EXAMINATION KNEE ANTE | 1/1/2007 | $22.32 | 3 |
| K | 73564 | RADIOLOGIC EXAM, KNEE; COMPLETE, | 1/1/2007 | $24.91 | 3 |
| K | 73565 | RADIOLOGIC EXAMINATION, KNEE; BO | 1/1/2007 | $19.46 | 3 |
| K | 73580 | RADIOLOGIC EXAMINATION, KNEE, AR | 1/1/2007 | $91.08 | 3 |
| K | 73590 | RADIOLOGIC EXAMINATION; TIBIA AN | 1/1/2007 | $20.24 | 3 |
| K | 73592 | RADIOLOGIC EXAMINATION; LOWER EX | 1/1/2007 | $18.94 | 3 |
| K | 73600 | RADIOLOGIC EXAMINATION, ANKLE; T | 1/1/2007 | $18.94 | 3 |
| K | 73610 | RADIOLOGIC EXAMINATION ANKLE; CO | 1/1/2007 | $20.50 | 3 |
| K | 73615 | RADIOLOGIC EXAMINATION, ANKLE, A | 1/1/2007 | $77.33 | 3 |
| K | 73620 | RADIOLOGIC EXAMINATION, FOOT; TW | 1/1/2007 | $18.94 | 3 |
| K | 73630 | RADIOLOGIC EXAMINATION FOOT; COM | 1/1/2007 | $20.50 | 3 |
| K | 73650 | RADIOLOGIC EXAMINATION CALCANEUS | 1/1/2007 | $18.42 | 3 |
| K | 73660 | RADIOLOGIC EXAMINATION; TOE OR T | 1/1/2007 | $16.09 | 3 |
| K | 73700 | COMPUTED TOMOGRAPHY, LOWER EXTRE | 1/1/2007 | $174.38 | 3 |
| K | 73701 | COMPUTERIZED AXIAL TOMOGRAPHY LO | 1/1/2007 | $203.19 | 3 |
| K | 73702 | COMPUTIERIZED AXIAL TOMOGRAPHY L | 1/1/2007 | $246.53 | 3 |
| K | 73706 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $362.78 | 3 |
| K | 73718 | MAGNETIC RESONANCE IMAGING, LOWE | 1/1/2007 | $349.55 | 3 |
| K | 73719 | MAGNETIC RESONANCE IMAGING, LOWE | 1/1/2007 | $419.61 | 3 |
| K | 73720 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $745.80 | 3 |
| K | 73721 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $349.55 | 3 |
| K | 73722 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $419.61 | 3 |
| K | 73723 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $746.06 | 3 |
| K | 73725 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $371.60 | 3 |
| K | 74000 | RADIOLOGIC EXAMINATION ABDOMEN S | 1/1/2007 | $20.50 | 3 |
| K | 74010 | RADIOLOGIC EXAMINATION ABDOMEN; | 1/1/2007 | $24.13 | 3 |
| K | 74020 | RADIOLOGIC EXAMINATION ABDOMEN; | 1/1/2007 | $26.73 | 3 |
| K | 74022 | RADIOLOGIC EXAMINATION, ABDOMEN; | 1/1/2007 | $31.40 | 3 |
| K | 74150 | COMPUTED TOMOGRAPHY, ABDOMEN; WI | 1/1/2007 | $197.48 | 3 |
| K | 74160 | COMPUTERIZED AXIAL TOMOGRAPHY AB | 1/1/2007 | $232.77 | 3 |
| K | 74170 | COMPUTERIZED AXIAL TOMOGRAPHY AB | 1/1/2007 | $281.82 | 3 |
| K | 74175 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $390.55 | 3 |
| K | 74181 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $355.00 | 3 |
| K | 74182 | MAGNETIC RESONANCE IMAGING, ABDO | 1/1/2007 | $425.06 | 3 |
| K | 74183 | MAGNETIC RESONANCE IMAGING, ABDO | 1/1/2007 | $751.77 | 3 |
| K | 74185 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $370.83 | 3 |
| K | 74190 | PERITONEOGRAM, RADILOGICAL SUPER | 1/1/2007 | $52.94 | 3 |
| K | 74210 | RADIOLOGIC EXAMINATION PHARYNX A | 1/1/2007 | $45.41 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 74220 | RADIOLOGIC EXAMINATION; ESOPHAGU | 1/1/2007 | $48.79 | 3 |
| K | 74230 | SWALLOWING FUNCTION, WITH CINERA | 1/1/2007 | $54.50 | 3 |
| K | 74235 | REMOVAL OF FOREIGN BODY(S), ESOP | 10/1/2005 | $114.18 | 3 |
| K | 74240 | RADIOLOGIC EXAMINATION GASTROINT | 1/1/2007 | $64.62 | 3 |
| K | 74241 | RADIOLOGIC EXAMINATION GASTROINT | 1/1/2007 | $65.39 | 3 |
| K | 74245 | RADIOLOGIC EXAM, GASTROINTESTINA | 1/1/2007 | $97.83 | 3 |
| K | 74246 | RADIOLOGICAL EXAMINATION GASTROI | 1/1/2007 | $69.81 | 3 |
| K | 74247 | RADIOLOGICAL EXAMINATION GASTROI | 1/1/2007 | $71.10 | 3 |
| K | 74249 | RADIOLOGICAL EXAM, GASTROINTESTI | 1/1/2007 | $103.02 | 3 |
| K | 74250 | RADIOLOGIC EXAMINATION, SMALL IN | 1/1/2007 | $52.42 | 3 |
| K | 74251 | RADIOLOGIC EXAMINATION, SMALL BO | 1/1/2007 | $60.46 | 3 |
| K | 74260 | DUODENOGRAPHY HYPOTONIC | 1/1/2007 | $58.39 | 3 |
| K | 74270 | RADIOLOGIC EXAMINATION, COLON; B | 1/1/2007 | $71.62 | 3 |
| K | 74280 | RADIOLOGIC EXAMINATION COLON AIR | 1/1/2007 | $96.53 | 3 |
| K | 74283 | BARIUM ENEMA, THERAPEUTIC, FOR R | 1/1/2007 | $142.21 | 3 |
| K | 74290 | CHOLECYSTOGRAPHY ORAL CONTRAST | 1/1/2007 | $31.40 | 3 |
| K | 74291 | CHOLECYSTOGRAPHY ORAL CONTRAST A | 1/1/2007 | $18.68 | 3 |
| K | 74300 | CHOLANGIOGRAPHY AND/OR PANCREATO | 10/1/2005 | $97.84 | 3 |
| K | 74301 | CHOLANGIOGRAPHY; ADDITIONAL SET | 1/1/2007 | $7.53 | 3 |
| K | 74305 | CHOLANGIOGRAPHY AND/OR PANCREATO | 1/1/2007 | $36.59 | 3 |
| K | 74320 | CHOLANGIOGRAPHY, PERCUTANEOUS, T | 1/1/2007 | $105.62 | 3 |
| K | 74327 | POSTOPERATIVE BILIARY DUCT CALCU | 1/1/2007 | $73.70 | 3 |
| K | 74328 | ENDOSCOPIC CATHETERIZATION OF TH | 1/1/2007 | $111.33 | 3 |
| K | 74329 | ENDOSCOPIC CATHETERIZATION OF TH | 10/1/2005 | $111.07 | 3 |
| K | 74330 | COMBINED ENDOSCOPIC CATHETERIZAT | 1/1/2007 | $118.33 | 3 |
| K | 74340 | INTRO OF LONG GASTROINTESTINAL T | 1/1/2007 | $91.08 | 3 |
| K | 74350 | PERCUTANEOUD PLACEMENT OF GASTRO | 1/1/2007 | $113.40 | 3 |
| K | 74355 | PERCUTANEOUS PLACEMENT OF ENTERO | 1/1/2007 | $98.87 | 3 |
| K | 74360 | INTRALUMINAL DILATION OF STRICTU | 1/1/2007 | $105.88 | 3 |
| K | 74363 | PERCUTANEOUS TRANSHEPATIC DILATA | 10/1/2005 | $198.26 | 3 |
| K | 74400 | UROGRAPHY (PYELOGRAPHY), INTRAVE | 1/1/2007 | $63.84 | 3 |
| K | 74410 | UROGRAPHY, INFUSION, DRIP TECHNI | 1/1/2007 | $71.10 | 3 |
| K | 74415 | UROGRAPHY INFUSION DRIP TECHNIQU | 1/1/2007 | $75.77 | 3 |
| K | 74420 | UROGRAPHY RETROGRADE WITH OR WIT | 1/1/2007 | $84.86 | 3 |
| K | 74425 | UROGRAPHY, ANTEGRADE, (PYELOSTOG | 1/1/2007 | $48.79 | 3 |
| K | 74430 | CYSTOGRAPHY, MINIMUM OF THREE VI | 1/1/2007 | $40.22 | 3 |
| K | 74440 | VASOGRAPHY, VESICULOGRAPHY, OR E | 1/1/2007 | $44.37 | 3 |
| K | 74445 | CORPORA CAVERNOSOGRAPHY, RADIOLO | 1/1/2007 | $71.88 | 3 |
| K | 74450 | URETHROCYSTOGRAPHY, RETROGRADE, | 1/1/2007 | $51.90 | 3 |
| K | 74455 | URETHROCYSTOGRAPHY, VOIDING, RAD | 1/1/2007 | $55.53 | 3 |
| K | 74470 | RADIOLOGIC EXAMINATION, RENAL CY | 1/1/2007 | $53.46 | 3 |
| K | 74475 | INTRODUCTION OF INTRACATHETER OR | 1/1/2007 | $130.79 | 3 |
| K | 74480 | INTRO OF URETERAL CATHETER OR ST | 1/1/2007 | $130.79 | 3 |
| K | 74485 | DILATION OF NEPHROSTOMY, URETERS | 1/1/2007 | $105.62 | 3 |
| K | 74710 | PELVIMETRY WITH OR WITHOUT PLACE | 1/1/2007 | $41.00 | 3 |
| K | 74740 | HYSTEROSALPINGOGRAPHY, RADIOLOGI | 8/11/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 74742 | TRANSCERVICAL CATHETERIZATION OF | 1/1/1993 | NC | 9 |
| K | 74775 | PERINEOGRAM (EG, VAGINOGRAM, FOR | 1/1/2007 | $62.28 | 3 |
| K | 75552 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $363.82 | 3 |
| K | 75553 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $377.31 | 3 |
| K | 75554 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $372.64 | 3 |
| K | 75555 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $370.31 | 3 |
| K | 75556 | CARDIAC MAGNETIC RESONANCE IMAGI | 10/1/2001 | $0.01 | 5 |
| K | 75600 | AORTOGRAPHY, THORACIC, W/OUT SER | 1/1/2007 | $363.04 | 3 |
| K | 75605 | AORTOGRAPHY, THORACIC, BY SERIAL | 1/1/2007 | $386.14 | 3 |
| K | 75625 | AORTOGRAPHY, ABDOMINAL, BY SERIA | 1/1/2007 | $385.88 | 3 |
| K | 75630 | AORTOGRAPHY, ABDOM PLUS BILAT IL | 1/1/2007 | $424.80 | 3 |
| K | 75635 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $509.92 | 3 |
| K | 75650 | ANGIOGRAPHY, CERVICOCEREBRAL, CA | 1/1/2007 | $398.07 | 3 |
| K | 75658 | ANGIOGRAPHY, BRACHIAL, RETROGRAD | 1/1/2007 | $392.88 | 3 |
| K | 75660 | ANGIOGRAPHY, EXTERNAL CAROTID, U | 1/1/2007 | $391.85 | 3 |
| K | 75662 | ANGIOGRAPHY, EXTERNAL CAROTID, B | 1/1/2007 | $404.82 | 3 |
| K | 75665 | ANGIOGRAPHY, CAROTID, CEREBRAL, | 1/1/2007 | $392.62 | 3 |
| K | 75671 | ANGIOGRAPHY, CAROTID, CEREBRAL, | 1/1/2007 | $404.04 | 3 |
| K | 75676 | ANGIOGRAPHY, CAROTID, CERVICAL, | 1/1/2007 | $392.10 | 3 |
| K | 75680 | ANGIOGRAPHY, CAROTID, CERVICAL, | 1/1/2007 | $404.04 | 3 |
| K | 75685 | ANGIOGRAPHY, VERTEBRAL, CERVICAL | 1/1/2007 | $391.59 | 3 |
| K | 75705 | ANGIOGRAPHY, SPINAL, SELECTIVE, | 1/1/2007 | $423.76 | 3 |
| K | 75710 | ANGIOGRAPHY, EXTREMITY, UNILATER | 1/1/2007 | $386.40 | 3 |
| K | 75716 | ANGIOGRAPHY, EXTREMITY, BILATERA | 1/1/2007 | $391.85 | 3 |
| K | 75722 | ANGIOGRAPHY, RENAL, UNILATERAL, | 1/1/2007 | $386.14 | 3 |
| K | 75724 | ANGIOGRAPHY, RENAL, BILATERAL, S | 1/1/2007 | $399.37 | 3 |
| K | 75726 | ANGIOGRAPHY,VISCERAL,SELECTIVE O | 1/1/2007 | $385.36 | 3 |
| K | 75731 | ANGIOGRAPHY, ADRENAL, UNILATERAL | 1/1/2007 | $385.62 | 3 |
| K | 75733 | ANGIOGRAPHY, ADRENAL, BILATERAL, | 1/1/2007 | $391.85 | 3 |
| K | 75736 | ANGIOGRAPHY, PELVIC, SELECTIVE O | 1/1/2007 | $385.88 | 3 |
| K | 75741 | ANGIOGRAPHY, PULMONARY, UNILATER | 1/1/2007 | $391.59 | 3 |
| K | 75743 | ANGIOGRAPHY, PULMONARY, BILATERA | 1/1/2007 | $403.78 | 3 |
| K | 75746 | ANGIOGRAPHY, PULMONARY, BY NONSE | 1/1/2007 | $385.62 | 3 |
| K | 75756 | ANGIOGRAPHY, INTERNAL MAMMARY, R | 1/1/2007 | $387.17 | 3 |
| K | 75774 | ANGIOGRAPHY, SELECTIVE, EACH ADD | 1/1/2007 | $357.85 | 3 |
| K | 75790 | ANGIOGRAPHY, ARTERIOVENOUS SHUNT | 1/1/2007 | $102.76 | 3 |
| K | 75801 | LYMPHANGIOGRAPHY, EXTREMITY ONLY | 1/1/2007 | $178.54 | 3 |
| K | 75803 | LYMPHANGIOGRAPHY, EXTREMITY ONLY | 1/1/2007 | $189.95 | 3 |
| K | 75805 | LYMPHANGIOGRAPHY, PELVIC/ABDOMIN | 1/1/2007 | $196.70 | 3 |
| K | 75807 | LYMPHANGIOGRAPHY, PELVIC/ABDOMIN | 10/1/2005 | $208.38 | 3 |
| K | 75809 | SHUNTOGRAM FOR INVESTIGATION OF | 1/1/2007 | $38.15 | 3 |
| K | 75810 | SPLENOPORTOGRAPHY, RADIOLOGICAL | 1/1/2007 | $385.36 | 3 |
| K | 75820 | VENOGRAPHY, EXTREMITY, UNILATERA | 1/1/2007 | $51.12 | 3 |
| K | 75822 | VENOGRAPHY, EXTREMITY, BILATERAL | 1/1/2007 | $78.37 | 3 |
| K | 75825 | VENOGRAPHY, CAVAL, INFERIOR, W/S | 1/1/2007 | $385.88 | 3 |
| K | 75827 | VENOGRAPHY, CAVAL, SUPERIOR, W/S | 1/1/2007 | $385.36 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 75831 | VENOGRAPHY, RENAL, UNILATERAL, S | 1/1/2007 | $385.62 | 3 |
| K | 75833 | VENOGRAPHY, RENAL, BILATERAL, SE | 1/1/2007 | $398.59 | 3 |
| K | 75840 | VENOGRAPHY, ADRENAL, UNILATERAL, | 1/1/2007 | $386.14 | 3 |
| K | 75842 | VENOGRAPHY, ADRENAL, BILATERAL, | 1/1/2007 | $397.81 | 3 |
| K | 75860 | VENOGRAPHY, SINUS OR JUGULAR, CA | 1/1/2007 | $385.62 | 3 |
| K | 75870 | VENOGRAPHY, SUPERIOR SAGITTAL SI | 1/1/2007 | $385.88 | 3 |
| K | 75872 | VENOGRAPHY, EPIDURAL, RADIOLOGIC | 1/1/2007 | $387.69 | 3 |
| K | 75880 | VENOGRAPHY, ORBITAL, RADIOLOGICA | 1/1/2007 | $51.12 | 3 |
| K | 75885 | PERCUTANEOUS TRANSHEPATIC PORTOG | 1/1/2007 | $396.00 | 3 |
| K | 75887 | PERCUTANEOUS TRANSHEPATIC PORTOG | 1/1/2007 | $396.00 | 3 |
| K | 75889 | HEPATIC VENOGRAPHY, WEDGED OR FR | 1/1/2007 | $385.36 | 3 |
| K | 75891 | HEPATIC VENOGRAPHY, WEDGED OR FR | 1/1/2007 | $385.36 | 3 |
| K | 75893 | VENOUS SAMPLING THRU CATH, W/OR | 1/1/2007 | $364.08 | 3 |
| K | 75894 | TRANSCATHETER THERAPY, EMBOLIZAT | 1/1/2007 | $708.18 | 3 |
| K | 75896 | TRANSCATHETER THERAPY, INFUSION, | 1/1/2007 | $621.76 | 3 |
| K | 75898 | ANGIOGRAPHY THRU EXISTING CATHET | 1/1/2007 | $87.71 | 3 |
| K | 75900 | EXCHANGE OF A PREVIOUSLY PLACED | 10/1/2005 | $590.62 | 3 |
| K | 75901 | MECHANICAL REMOVAL OF PERICATHET | 1/1/2007 | $72.92 | 3 |
| K | 75902 | MECHANICAL REMOVAL OF INTRALUMIN | 1/1/2007 | $69.55 | 3 |
| K | 75940 | PERCUTANEOUS PLACEMENT OF IVC FI | 1/1/2007 | $364.60 | 3 |
| K | 75945 | INTRAVASCULAR ULTRASOUND (NON-CO | 1/1/2007 | $139.87 | 3 |
| K | 75946 | INTRAVASCULAR ULTRASOUND (NON-CO | 10/1/2005 | $78.11 | 3 |
| K | 75952 | ENDOVASCULAR REPAIR OF INFRARENA | 6/1/2004 | $0.01 | 5 |
| K | 75953 | PLACEMENT OF PROXIMAL OR DISTAL | 6/1/2004 | $0.01 | 5 |
| K | 75954 | ENDOVASCULAR REPAIR OF ILIAC ART | 1/1/2003 | $0.01 | 5 |
| K | 75960 | TRANSCATHETER INTRO OF INTRAVASC | 1/1/2007 | $437.52 | 3 |
| K | 75961 | TRANSCATHETER RETRIEVAL,PERCUTAN | 1/1/2007 | $438.30 | 3 |
| K | 75962 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $450.75 | 3 |
| K | 75964 | TRANSLUMIANL BALLOON ANGIOPLASTY | 1/1/2007 | $242.63 | 3 |
| K | 75966 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $478.78 | 3 |
| K | 75968 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $242.63 | 3 |
| K | 75970 | TRANSCATHETER BIOPSY, RADIOLOGIC | 1/1/2007 | $345.65 | 3 |
| K | 75978 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $450.49 | 3 |
| K | 75980 | PERCUTANEOUS TRANSHEPATIC BILIRY | 1/1/2007 | $199.56 | 3 |
| K | 75982 | PERCUTANEOUS PLACE OF DRAIN CATH | 10/1/2005 | $217.98 | 3 |
| K | 75984 | CHANGE OF PERCUTANEOUS TUBE OR D | 1/1/2007 | $79.15 | 3 |
| K | 75989 | RADIOLOGICAL GUIDANCE FOR PERCUT | 1/1/2007 | $128.71 | 3 |
| K | 75992 | TRANSLUMINAL ATHERECTOMY, PERIPH | 1/1/2007 | $451.01 | 3 |
| K | 75993 | TRANSLUMINAL ATHERECTOMY, EACH A | 10/1/2005 | $242.11 | 3 |
| K | 75994 | TRANSLUMINAL ATHERECTOMY, RENAL, | 10/1/2005 | $477.74 | 3 |
| K | 75995 | TRANSLUMINAL ATHERECTOMY, VISCER | 10/1/2005 | $477.48 | 3 |
| K | 75996 | TRANSLUMINAL ATHERECTOMY, EACH A | 10/1/2005 | $241.85 | 3 |
| K | 75998 | FLUOROSCOPIC GUIDANCE FOR CENTRA | 1/1/2007 | INVALID | N |
| K | 76000 | FLUOROSCOPY (SEP PROC), UP TO ON | 1/1/2007 | $41.78 | 3 |
| K | 76001 | FLUOROSCOPY, PHYS TIME MORE THAN | 1/1/2007 | $96.27 | 3 |
| K | 76003 | FLUOROSCOPIC GUIDANCE FOR NEEDLE | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 76005 | FLUOROSCOPIC GUIDANCE AND LOCALI | 1/1/2007 | INVALID | N |
| K | 76006 | MANUAL APPLICATION OF STRESS PER | 1/1/2007 | INVALID | N |
| K | 76010 | RADIOLOGIC EXAMINATION FROM NOSE | 1/1/2007 | $20.50 | 3 |
| K | 76012 | RADIOLOGICAL SUPERVISION AND INT | 1/1/2007 | INVALID | N |
| K | 76013 | RADIOLOGICAL SUPERVISION AND INT | 1/1/2007 | INVALID | N |
| K | 76020 | BONE AGE STUDIES | 1/1/2007 | INVALID | N |
| K | 76040 | BONE LENGTH STUDIES (ORTHOROENTG | 1/1/2007 | INVALID | N |
| K | 76061 | RADIOLOGIC EXAMINATION OSSEOUS S | 1/1/2007 | INVALID | N |
| K | 76062 | RADIOLOGIC EXAMINATION OSSEOUS S | 1/1/2007 | INVALID | N |
| K | 76065 | INFANT | 1/1/2007 | INVALID | N |
| K | 76066 | JOINT SURVEY, SINGLE VIEW, TWO O | 1/1/2007 | INVALID | N |
| K | 76070 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | INVALID | N |
| K | 76071 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | INVALID | N |
| K | 76075 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| K | 76076 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| K | 76077 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| K | 76078 | RADIOGRAPHIC ABSORPTIOMETRY (EG, | 1/1/2007 | INVALID | N |
| K | 76080 | RADIOLOGIC EXAM, FISTULA OR SINU | 1/1/2007 | $48.01 | 3 |
| K | 76082 | COMPUTER AIDED DETECTION WITH FU | 1/1/2007 | INVALID | N |
| K | 76083 | COMPUTER AIDED DETECTION WITH FU | 1/1/2007 | INVALID | N |
| K | 76085 | DIGITIZATION OF FILM RADIOGRAPHI | 4/1/2004 | INVALID | N |
| K | 76086 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | INVALID | N |
| K | 76088 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | INVALID | N |
| K | 76090 | MAMMOGRAPHY UNILATERAL | 1/1/2007 | INVALID | N |
| K | 76091 | MAMMOGRAPHY; BILATERAL | 1/1/2007 | INVALID | N |
| K | 76092 | SCREENING MAMMOGRAPHY, BILATERAL | 1/1/2007 | INVALID | N |
| K | 76093 | MAGNETIC RESONANCE IMAGING, BREA | 1/1/2007 | INVALID | N |
| K | 76094 | MAGNETIC RESONANCE IMAGING, BREA | 1/1/2007 | INVALID | N |
| K | 76095 | STEREOTACTIC LOCALIZATION GUIDAN | 1/1/2007 | INVALID | N |
| K | 76096 | MAMMOGRAPHIC GUIDANCE FOR NEEDLE | 1/1/2007 | INVALID | N |
| K | 76098 | RADIOLOGICAL EXAMINATION, SURGIC | 1/1/2007 | $17.13 | 3 |
| K | 76100 | RADIOLOGICAL EXAMINATION, SINGLE | 1/1/2007 | $55.01 | 3 |
| K | 76101 | RADIOLOGIC EXAM,CMPLX MOTION(HYP | 1/1/2007 | $59.69 | 3 |
| K | 76102 | RADIOLOGIC EXAMINATION COMPLEX M | 1/1/2007 | $68.77 | 3 |
| K | 76120 | CINERADIOGRAPHY/VIDEORADIOGRAPHY | 1/1/2007 | $42.56 | 3 |
| K | 76125 | CINERADIOGRAPHY/VIDEORADIOGRAPHY | 1/1/2007 | $31.14 | 3 |
| K | 76140 | CONSULTATION ON X-RAY EXAMINATIO | 4/1/1982 | $0.01 | 5 |
| K | 76150 | XERORADIOGRAPHY | 1/1/2007 | $11.42 | 3 |
| K | 76350 | SUBTRACTION IN CONJUNCTION WITH | 1/1/2003 | $78.20 | 3 |
| K | 76355 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| K | 76360 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| K | 76362 | COMPUTERIZED AXIAL TOMOGRAPHIC G | 1/1/2007 | INVALID | N |
| K | 76370 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| K | 76375 | CORONAL, SAGITTAL, MULTIPLANAR, | 1/1/2006 | INVALID | N |
| K | 76376 | 3D RENDERING W/INTERPRETATION AN | 4/1/2006 | NC | 9 |
| K | 76377 | 3D RENDERING W/INTERPRETATION AN | 4/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 76380 | COMPUTED TOMOGRAPHY, LIMITED OR | 1/1/2007 | $130.53 | 3 |
| K | 76390 | MAGNETIC RESONANCE SPECTROSCOPY | 1/1/2007 | $352.14 | 3 |
| K | 76393 | MAGNETIC RESONANCE GUIDANCE FOR | 1/1/2007 | INVALID | N |
| K | 76394 | MAGNETIC RESONANCE GUIDANCE FOR, | 1/1/2007 | INVALID | N |
| K | 76400 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | INVALID | N |
| K | 76490 | ULTRASOUND GUIDANCE FOR, AND MON | 4/1/2004 | INVALID | N |
| K | 76496 | UNLISTED FLUOROSCOPIC PROCEDURE | 1/1/2003 | $0.01 | 5 |
| K | 76497 | UNLISTED COMPUTED TOMOGRAPHY PRO | 1/1/2003 | $0.01 | 5 |
| K | 76498 | UNLISTED MAGNETIC RESONANCE PROC | 1/1/2003 | $0.01 | 5 |
| K | 76499 | UNLISTED DIAGNOSTIC RADIOGRAPHIC | 4/1/1982 | $0.01 | 5 |
| K | 76506 | ECHOENCEPHALOGRAPHY, B-MODE (GRA | 1/1/2007 | $63.06 | 3 |
| K | 76510 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $117.29 | 3 |
| K | 76511 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $90.31 | 3 |
| K | 76512 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $85.64 | 3 |
| K | 76513 | OPHTHALMIC ULTRASOUND, ECHOGRAPH | 1/1/2007 | $67.21 | 3 |
| K | 76514 | OPHTHALMIC ULTRASOUND, ECHOGRAPH | 1/1/2007 | $8.30 | 3 |
| K | 76516 | OPHTHALMIC BIOMETRY BY ULTRASOUN | 1/1/2007 | $53.98 | 3 |
| K | 76519 | OPHTHALMIC BIOMETRY BY ULTRASOUN | 1/1/2007 | $56.31 | 3 |
| K | 76529 | OPHTHALMIC ULTRASONIC FOREIGN BO | 1/1/2007 | $52.94 | 3 |
| K | 76536 | ULTRASOUND, SOFT TISSUES OF HEAD | 1/1/2007 | $58.65 | 3 |
| K | 76604 | ULTRASOUND, CHEST, B-SCAN (INCL | 1/1/2007 | $55.27 | 3 |
| K | 76645 | ULTRASOUND, BREAST(S) (UNILATERA | 1/1/2007 | $48.01 | 3 |
| K | 76700 | ULTRASOUND, ABDOMINAL, B-SCAN AN | 1/1/2007 | $83.30 | 3 |
| K | 76705 | ECHOGRAPHY ABDOMINAL B-SCAN AND/ | 1/1/2007 | $59.94 | 3 |
| K | 76770 | ULTRASOUND, RETROPERITONEAL (REN | 1/1/2007 | $80.45 | 3 |
| K | 76775 | ECHOGRAPHY RETROPERITONEAL B-SCA | 1/1/2007 | $59.69 | 3 |
| K | 76776 | ULTRASOUND, TRANSPLANTED KIDNEY, | 1/1/2007 | $106.14 | 3 |
| K | 76778 | ULTRASOUND, TRANSPLANTED KIDNEY, | 1/1/2007 | INVALID | N |
| K | 76800 | ULTRASOUND, SPINAL CANAL AND CON | 1/1/2007 | $78.37 | 3 |
| K | 76801 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $93.42 | 3 |
| K | 76802 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $60.46 | 3 |
| K | 76805 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $93.42 | 3 |
| K | 76810 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $68.25 | 3 |
| K | 76811 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $173.09 | 3 |
| K | 76812 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $103.28 | 3 |
| K | 76813 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $89.01 | 3 |
| K | 76814 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $59.43 | 3 |
| K | 76815 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $62.54 | 3 |
| K | 76816 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $61.76 | 3 |
| K | 76817 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $67.99 | 3 |
| K | 76818 | FETAL BIOPHYSICAL PROFILE; WITH | 1/1/2007 | $83.04 | 3 |
| K | 76819 | FETAL BIOPHYSICAL PROFILE; WITHO | 1/1/2007 | $72.40 | 3 |
| K | 76820 | DOPPLER VELOCIMETRY, FETAL; UMBI | 1/1/2007 | $63.58 | 3 |
| K | 76821 | DOPPLER VELOCIMETRY, FETAL; MIDD | 1/1/2007 | $70.84 | 3 |
| K | 76825 | ECHOCARDIOGRAPHY, FETAL, CARDIOV | 1/1/2007 | $114.96 | 3 |
| K | 76826 | ECHOCARDIOGRAPHY, FETAL, CARDIOV | 1/1/2007 | $49.56 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 76827 | DOPPLER ECHOCARDIOGRAPHY, FETAL, | 1/1/2007 | $68.77 | 3 |
| K | 76828 | DOPPLER ECHOCARDIOGRAPHY, FETAL, | 1/1/2007 | $51.90 | 3 |
| K | 76830 | ULTRASOUND, TRANSVAGINAL | 1/1/2007 | $66.69 | 3 |
| K | 76831 | HYSTEROSONOGRAPHY, WITH OR WITHO | 1/1/2007 | $67.99 | 3 |
| K | 76856 | ULTRASOUND, PELVIC (NON-OBSTETRI | 1/1/2007 | $66.69 | 3 |
| K | 76857 | ECHOGRAPHY, PELVIC (NON-OBSTETRI | 1/1/2007 | $59.43 | 3 |
| K | 76870 | ULTRASOUND, SCROTUM AND CONTENTS | 1/1/2007 | $64.88 | 3 |
| K | 76872 | ECHOGRAPHY, TRANSRECTAL | 1/1/2007 | $79.93 | 3 |
| K | 76873 | ECHOGRAPHY, TRANSRECTAL; PROSTAT | 1/1/2007 | $114.44 | 3 |
| K | 76880 | ULTRASOUND, EXTREMITY, NON-VASCU | 1/1/2007 | $59.94 | 3 |
| K | 76885 | ULTRASOUND, INFANT HIPS, REAL TI | 1/1/2007 | $68.25 | 3 |
| K | 76886 | ULTRASOUND, INFANT HIPS, REAL TI | 1/1/2007 | $60.98 | 3 |
| K | 76930 | ULTRASONIC GUIDANCE FOR PERICARD | 1/1/2007 | $66.43 | 3 |
| K | 76932 | ULTRASONIC GUIDANCE FOR ENDOMYOC | 1/1/2007 | $66.43 | 3 |
| K | 76936 | ULTRASOUND GUIDED COMPRESSION RE | 1/1/2007 | $244.71 | 3 |
| K | 76937 | ULTRASOUND GUIDANCE FOR VASCULAR | 1/1/2007 | $23.61 | 3 |
| K | 76940 | ULTRASOUND GUIDANCE FOR, AND MON | 1/1/2007 | $123.78 | 3 |
| K | 76941 | ULTRASONIC GUIDANCE FOR INTRAUTE | 1/1/2007 | $90.57 | 3 |
| K | 76942 | ULTRASONIC GUIDANCE FOR NEEDLE P | 1/1/2007 | $99.65 | 3 |
| K | 76945 | ULTRASONIC GUIDANCE FOR CHORIONI | 1/1/2007 | $65.65 | 3 |
| K | 76946 | ULTRASONIC GUIDANCE FOR AMNIOCEN | 1/1/2007 | $56.05 | 3 |
| K | 76948 | ULTRASONIC GUIDANCE FOR ASPIRATI | 1/1/2007 | $55.79 | 3 |
| K | 76950 | ULTRASONIC GUIDANCE FOR PLACEMEN | 1/1/2007 | $56.57 | 3 |
| K | 76965 | ULTRASONIC GUIDANCE FOR INTERSTI | 1/1/2007 | $200.59 | 3 |
| K | 76970 | ULTRASOUND STUDY FOLLOW-UP (SPEC | 1/1/2007 | $43.08 | 3 |
| K | 76975 | GASTROINTESTINAL ENDOSCOPIC ULTR | 1/1/2007 | $71.36 | 3 |
| K | 76977 | ULTRASOUND BOND DENSITY MEASUREM | 1/1/2007 | $24.65 | 3 |
| K | 76986 | ULTRASONIC GUIDANCE, INTRAOPERAT | 1/1/2007 | INVALID | N |
| K | 76999 | UNLISTED ULTRASOUND PROCEDURE (E | 4/1/1982 | $0.01 | 5 |
| K | 77001 | FLUOROSCOPIC GUIDANCE FOR CENTRA | 1/1/2007 | $79.67 | 3 |
| K | 77002 | FLUOROSCOPIC GUIDANCE FOR NEEDLE | 1/1/2007 | $46.19 | 3 |
| K | 77003 | FLUOROSCOPIC GUIDANCE AND LOCALI | 1/1/2007 | $37.37 | 3 |
| K | 77011 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $549.62 | 3 |
| K | 77012 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $97.83 | 3 |
| K | 77014 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $142.21 | 3 |
| K | 77021 | MRI FOR NEEDLE PLACEMENT, RADIOL | 1/1/2007 | $294.27 | 3 |
| K | 77031 | STEREOTACTIC LOCALIZATION GUIDAN | 1/1/2007 | $97.57 | 3 |
| K | 77032 | MAMMOGRAPHIC GUIDANCE FOR NEEDLE | 1/1/2007 | $31.40 | 3 |
| K | 77051 | COMPUTER-AIDED DETECTION W/FURTH | 1/1/2007 | $7.01 | 3 |
| K | 77052 | COMPUTER-AIDED DETECTION W/FURTH | 1/1/2007 | $7.01 | 3 |
| K | 77053 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | $28.80 | 3 |
| K | 77054 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | $57.61 | 3 |
| K | 77055 | MAMMOGRAPHY; UNILATERAL | 1/1/2007 | $59.69 | 3 |
| K | 77056 | MAMMOGRAPHY; BILATERAL | 1/1/2007 | $75.51 | 3 |
| K | 77057 | SCREENING MAMMOGRAPHY, BILATERAL | 1/1/2007 | $55.27 | 3 |
| K | 77058 | MRI, BREAST, WITHOUT AND/OR WITH | 1/1/2007 | $602.82 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 77059 | MRI, BREAST, WITHOUT AND/OR WITH | 1/1/2007 | $608.53 | 3 |
| K | 77071 | MANUAL APPLICATION OF STRESS PER | 1/1/2007 | $31.92 | 3 |
| K | 77072 | BONE AGE STUDIES | 1/1/2007 | $15.83 | 3 |
| K | 77073 | BONE LENGTH STUDIES (ORTHOROENTG | 1/1/2007 | $25.17 | 3 |
| K | 77074 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $48.53 | 3 |
| K | 77075 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $72.14 | 3 |
| K | 77076 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $69.81 | 3 |
| K | 77077 | JOINT SURVEY, SINGLE VIEW, 2 OR | 1/1/2007 | $26.73 | 3 |
| K | 77078 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | $128.19 | 3 |
| K | 77079 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | $25.95 | 3 |
| K | 77080 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $30.36 | 3 |
| K | 77081 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $25.17 | 3 |
| K | 77082 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $16.61 | 3 |
| K | 77083 | RADIOGRAPHIC ABSORPTIOMETRY, 1 O | 1/1/2007 | NC | 9 |
| K | 77084 | MRI, BONE MAROW BLOOD SUPPLY | 1/1/2007 | NC | 9 |
| K | 77261 | THERAPEUTIC RADIOLOGY TREATMENT | 1/1/2007 | $51.12 | 3 |
| K | 77262 | THERAPEUTIC RADIOLOGY TREATMENT | 1/1/2007 | $77.07 | 3 |
| K | 77263 | THERAPEUTIC RADIOLOGY TREATMENT | 1/1/2007 | $114.44 | 3 |
| K | 77280 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $119.89 | 3 |
| K | 77285 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $190.21 | 3 |
| K | 77290 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $234.07 | 3 |
| K | 77295 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $927.45 | 3 |
| K | 77299 | UNLISTED PROCEDURE, THERAPEUTIC | 4/1/1982 | $0.01 | 5 |
| K | 77300 | BASIC RADIATION DOSIMETRY CALCUL | 1/1/2007 | $58.65 | 3 |
| K | 77301 | INTENSITY MODULATED RADIOTHERAPY | 1/1/2007 | $1,049.68 | 3 |
| K | 77305 | TELETHERAPY ISODOSE PLAN (WHETHE | 1/1/2007 | $76.55 | 3 |
| K | 77310 | TELETHERAPY ISODOSE PLAN (WHETHE | 1/1/2007 | $101.46 | 3 |
| K | 77315 | TELETHERAPY, ISODOSE PLAN (WHETH | 1/1/2007 | $128.45 | 3 |
| K | 77321 | SPECIAL TELETHERAPY PORT PLAN, P | 1/1/2007 | $144.28 | 3 |
| K | 77326 | BRACHYTHERAPY ISODOSE PLAN; SIMP | 1/1/2007 | $98.09 | 3 |
| K | 77327 | BRACHYTHERAPY ISODOSE CALCULATIO | 1/1/2007 | $144.28 | 3 |
| K | 77328 | BRACHYTHERAPY ISODOSE CALCULATIO | 1/1/2007 | $209.94 | 3 |
| K | 77331 | SPECIAL DOSIMETRY (EG, TLD, MICR | 1/1/2007 | $44.37 | 3 |
| K | 77332 | TREATMENT DEVICES, DESIGN AND CO | 1/1/2007 | $55.79 | 3 |
| K | 77333 | TREATMENT DEVICES DESIGN AND CON | 1/1/2007 | $82.00 | 3 |
| K | 77334 | TREATMENT DEVICES DESIGN AND CON | 1/1/2007 | $133.12 | 3 |
| K | 77336 | CONTINUING MEDICAL RADIATION PHY | 1/1/2007 | $81.74 | 3 |
| K | 77370 | SPECIAL MEDICAL RADIATION PHYSIC | 1/1/2007 | $95.50 | 3 |
| K | 77371 | RADIATION TREATMENT DELIVERY, ST | 1/1/2007 | $788.36 | 3 |
| K | 77372 | RADIATION TREATMENT DELIVERY, ST | 1/1/2007 | $598.41 | 3 |
| K | 77373 | STEREOTACTIC BODY RADIATION THER | 1/1/2007 | NC | 9 |
| K | 77399 | UNLISTED PROCEDURE MEDICAL RADIA | 4/1/1982 | $0.01 | 5 |
| K | 77401 | RADIATION TREATMENT DELIVERY, SU | 1/1/2007 | $49.05 | 3 |
| K | 77402 | RADIATION TREATMENT DELIVERY,SIN | 1/1/2007 | $49.05 | 3 |
| K | 77403 | RADIATION TREATMENT DELIVERY,SIN | 1/1/2007 | $49.05 | 3 |
| K | 77404 | RADIATION TREATMENT DELIVERY,SIN | 1/1/2007 | $49.05 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 77406 | RADIATION TREATMENT DELIVERY,SIN | 1/1/2007 | $49.05 | 3 |
| K | 77407 | RADIATION TREATMENT DELIVERY,TWO | 1/1/2007 | $57.61 | 3 |
| K | 77408 | RADIATION TREATMENT DELIVERY,TWO | 1/1/2007 | $57.61 | 3 |
| K | 77409 | RADIATION TREATMENT DELIVERY,TWO | 1/1/2007 | $57.61 | 3 |
| K | 77411 | RADIATION TREATMENT DELIVERY,TWO | 1/1/2007 | $57.61 | 3 |
| K | 77412 | RADIATION TREATMENT DELIVERY,THR | 1/1/2007 | $64.10 | 3 |
| K | 77413 | RADIATION TREATMENT DELIVERY,THR | 1/1/2007 | $64.10 | 3 |
| K | 77414 | RADIATION TREATMENT DELIVERY,THR | 1/1/2007 | $64.10 | 3 |
| K | 77416 | RADIATION TREATMENT DELIVERY,THR | 1/1/2007 | $64.10 | 3 |
| K | 77417 | THERAPEUTIC RADIOLOGY PORT FILM( | 1/1/2007 | $16.35 | 3 |
| K | 77418 | INTENSITY MODULATED TREATMENT DE | 1/1/2007 | $472.29 | 3 |
| K | 77421 | STEREOSCOPIC X-RAY GUIDANCE FOR | 4/1/2006 | NC | 9 |
| K | 77422 | HIGH ENERGY NEUTRON RADIATION TR | 7/1/2006 | NC | 9 |
| K | 77423 | HIGH ENERGY NEUTRON RADIATION TR | 7/1/2006 | NC | 9 |
| K | 77427 | RADIATION TREATMENT MANAGEMENT, | 1/1/2007 | $117.81 | 3 |
| K | 77431 | RADIATION THERAPY MANAGEMENT W/C | 1/1/2007 | $66.95 | 3 |
| K | 77432 | STEREOTACTIC RADIATION TREATMENT | 1/1/2007 | $291.68 | 3 |
| K | 77435 | STEREOTACTIC BODY RADIATION THER | 1/1/2007 | NC | 9 |
| K | 77470 | SPECIAL TREATMENT PROCEDURE (EG, | 1/1/2007 | $379.91 | 3 |
| K | 77499 | UNLISTED PROCEDURE THERAPEUTIC R | 9/20/1993 | $0.01 | 5 |
| K | 77520 | PROTON TREATMENT DELIVERY; SIMPL | 12/1/2002 | $0.01 | 5 |
| K | 77522 | PROTON TREATMENT DELIVERY; SIMPL | 12/1/2002 | $0.01 | 5 |
| K | 77523 | PROTON TREATMENT DELIVERY; INTER | 12/1/2002 | $0.01 | 5 |
| K | 77525 | PROTON TREATMENT DELIVERY; COMPL | 10/1/2001 | $0.01 | 5 |
| K | 77600 | HYPERTHERMIA, EXTERNALLY GENERAT | 1/1/2007 | $139.09 | 3 |
| K | 77605 | HYPERTHERMIA, EXTERNALLY GENERAT | 1/1/2007 | $186.84 | 3 |
| K | 77610 | HYPERTHERMIA GENERATED BY INTERS | 1/1/2007 | $139.35 | 3 |
| K | 77615 | HYPERTHERMIA GENERATED BY INTERS | 1/1/2007 | $185.54 | 3 |
| K | 77620 | HYPERTHERMIA GENERATED BY INTRAC | 1/1/2007 | $142.73 | 3 |
| K | 77750 | INFUSION OR INSTILLATION OF RADI | 1/1/2007 | $210.97 | 3 |
| K | 77761 | INTRACAVITARY RADIATION SOURCE A | 1/1/2007 | $200.59 | 3 |
| K | 77762 | INTRACAVITARY RADIOELEMENT APPLI | 1/1/2007 | $302.32 | 3 |
| K | 77763 | INTRACAVITARY RADIOELEMENT APPLI | 1/1/2007 | $427.40 | 3 |
| K | 77776 | INTERSTITIAL RADIATION SOURCE AP | 1/1/2007 | $216.94 | 3 |
| K | 77777 | INTERSTITIAL RADIOELEMENT APPLIC | 1/1/2007 | $381.47 | 3 |
| K | 77778 | INTERSTITIAL RADIOELEMENT APPLIC | 1/1/2007 | $537.94 | 3 |
| K | 77781 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $614.76 | 3 |
| K | 77782 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $644.60 | 3 |
| K | 77783 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $688.19 | 3 |
| K | 77784 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $755.40 | 3 |
| K | 77789 | SURFACE APPLICATION OF RADIATION | 1/1/2007 | $52.42 | 3 |
| K | 77790 | SUPERVISION, HANDLING, LOADING O | 1/1/2007 | $50.86 | 3 |
| K | 77799 | UNLISTED PROCEDURE CLINICAL BRAC | 4/1/1982 | $0.01 | 5 |
| K | 78000 | THYROID UPTAKE; SINGLE DETERMINA | 1/1/2007 | $33.48 | 3 |
| K | 78001 | THYROID UPTAKE; MULTIPLE DETERMI | 1/1/2007 | $45.15 | 3 |
| K | 78003 | THYROID UPTAKE; STIMULATION SUPP | 1/1/2007 | $38.41 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 78006 | THYROID IMAGING WITH UPTAKE SING | 1/1/2007 | $82.78 | 3 |
| K | 78007 | THYROID IMAGING WITH UPTAKE; MUL | 1/1/2007 | $88.49 | 3 |
| K | 78010 | THYROID IMAGING; ONLY | 1/1/2007 | $64.36 | 3 |
| K | 78011 | THYROID IMAGING; WITH VASCULAR F | 1/1/2007 | $82.26 | 3 |
| K | 78015 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $94.72 | 3 |
| K | 78016 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $124.56 | 3 |
| K | 78018 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $179.83 | 3 |
| K | 78020 | THYROID CARCINOMA METASTASES UPT | 1/1/2007 | $59.17 | 3 |
| K | 78070 | PARATHYROID IMAGING | 1/1/2007 | $143.50 | 3 |
| K | 78075 | ADRENAL IMAGING, CORTEX AND/OR M | 1/1/2007 | $175.42 | 3 |
| K | 78099 | UNLISTED ENDOCRINE PROCEDURE DIA | 10/1/2001 | $0.01 | 5 |
| K | 78102 | BONE MARROW IMAGING LIMITED AREA | 1/1/2007 | $76.03 | 3 |
| K | 78103 | BONE MARROW IMAGING; MULTIPLE AR | 1/1/2007 | $113.92 | 3 |
| K | 78104 | BONE MARROW IMAGING; WHOLE BODY | 1/1/2007 | $140.13 | 3 |
| K | 78110 | PLASMA VOLUME, RADIOPHARMACEUTIC | 1/1/2007 | $33.22 | 3 |
| K | 78111 | BLOOD OR PLASMA VOLUME RADIOISOT | 1/1/2007 | $78.63 | 3 |
| K | 78120 | RED CELL VOLUME DETERMINATION (S | 1/1/2007 | $56.31 | 3 |
| K | 78121 | RED CELL MASS DETERMINATION; MUL | 1/1/2007 | $90.83 | 3 |
| K | 78122 | WHOLE BLOOD BOLUME DETERMINATION | 1/1/2007 | $142.21 | 3 |
| K | 78130 | RED CELL SURVIVAL STUDY; | 1/1/2007 | $99.91 | 3 |
| K | 78135 | RED CELL SURVIVAL STUDY; DIFFERE | 1/1/2007 | $156.22 | 3 |
| K | 78140 | LABELED RED CELL SEQUESTRATION, | 1/1/2007 | $129.49 | 3 |
| K | 78160 | PLASMA RADIOIRON DISAPPEARANCE ( | 1/1/2006 | INVALID | N |
| K | 78162 | RADIOIRON ORAL ABSORPTION | 1/1/2006 | INVALID | N |
| K | 78170 | RADIOIRON RED CELL UTILIZATION | 1/1/2006 | INVALID | N |
| K | 78172 | CHELATABLE IRON FOR ESTIMATION O | 1/1/2006 | INVALID | N |
| K | 78185 | SPLEEN IMAGING ONLY, WITH OR WIT | 1/1/2007 | $79.41 | 3 |
| K | 78190 | KINETICS,STUDY OF PLATELET SURVI | 1/1/2007 | $196.96 | 3 |
| K | 78191 | PLATELET SURVIVAL STUDY | 1/1/2007 | $222.39 | 3 |
| K | 78195 | LYMPHATICS AND LYMPH NODES IMAGI | 1/1/2007 | $154.92 | 3 |
| K | 78199 | UNLISTED HEMATOPOIETIC, RETICULO | 4/1/1982 | $0.01 | 5 |
| K | 78201 | LIVER IMAGING STATIC ONLY | 1/1/2007 | $80.70 | 3 |
| K | 78202 | LIVER IMAGING; WITH VASCULAR FLO | 1/1/2007 | $96.79 | 3 |
| K | 78205 | LIVER IMAGING (SPECT) | 1/1/2007 | $187.36 | 3 |
| K | 78206 | LIVERY IMAGING (SPECT); WITH VAS | 1/1/2007 | $191.25 | 3 |
| K | 78215 | LIVER AND SPLEEN IMAGING STATIC | 1/1/2007 | $97.57 | 3 |
| K | 78216 | LIVER AND SPLEEN IMAGING; WITH V | 1/1/2007 | $115.48 | 3 |
| K | 78220 | LIVER FUNCTION STUDY WITH HEPATO | 1/1/2007 | $119.11 | 3 |
| K | 78223 | HEPATOBILIARY DUCTAL SYSTEM IMAG | 1/1/2007 | $130.27 | 3 |
| K | 78230 | SALIVARY GLAND IMAGING; | 1/1/2007 | $76.29 | 3 |
| K | 78231 | SALIVARY GLAND IMAGING; WITH SER | 1/1/2007 | $105.62 | 3 |
| K | 78232 | SALIVARY GLAND FUNCTION STUDY | 1/1/2007 | $113.66 | 3 |
| K | 78258 | ESOPHAGEAL MOTILITY | 1/1/2007 | $105.10 | 3 |
| K | 78261 | GASTRIC MUCOSA IMAGING | 1/1/2007 | $137.28 | 3 |
| K | 78262 | GASTROESOPHAGEAL REFLUX STUDY | 1/1/2007 | $140.65 | 3 |
| K | 78264 | GASTRIC EMPTYING STUDY | 1/1/2007 | $140.91 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 78267 | UREA BREATH TEST, C-14; ACQUISIT | 10/1/2001 | $6.53 | 3 |
| K | 78268 | UREA BREATH TEST, C-14; ANALYSIS | 10/1/2001 | $55.99 | 3 |
| K | 78270 | VITAMIN B-12 ABSORPTION STUDY (E | 1/1/2007 | $50.08 | 3 |
| K | 78271 | VITAMIN B-12 ABSORPTION STUDY (E | 1/1/2007 | $52.42 | 3 |
| K | 78272 | VITAMIN B-12 ABSORPTION STUDIES | 1/1/2007 | $73.44 | 3 |
| K | 78278 | ACUTE GASTROINTESTINAL BLOOD LOS | 1/1/2007 | $168.42 | 3 |
| K | 78282 | GASTROINTESTINAL PROTEIN LOSS | 10/1/2001 | $0.01 | 5 |
| K | 78290 | INTESTING IMAGING (EG, ECTOPIC G | 1/1/2007 | $107.95 | 3 |
| K | 78291 | PERITONEAL-VENOUS SHUNT PATENCY | 1/1/2007 | $115.48 | 3 |
| K | 78299 | UNLISTED GASTROINTESTINAL PROCED | 4/1/1982 | $0.01 | 5 |
| K | 78300 | BONE AND/OR JOINT IMAGING; LIMIT | 1/1/2007 | $90.57 | 3 |
| K | 78305 | BONE IMAGING; MULTIPLE AREAS | 1/1/2007 | $130.01 | 3 |
| K | 78306 | BONE IMAGING; WHOLE BODY | 1/1/2007 | $147.66 | 3 |
| K | 78315 | BONE AND/OR JOINT IMAGING; THREE | 1/1/2007 | $167.12 | 3 |
| K | 78320 | BONE IMAGING; TOMOGRAPHIC (SPECT | 1/1/2007 | $199.30 | 3 |
| K | 78350 | BONE DENSITY (BONE MINERAL CONTE | 1/1/2007 | $28.55 | 3 |
| K | 78351 | BONE DENSITY (BONE MINERAL CONTE | 1/1/2007 | $52.68 | 3 |
| K | 78399 | UNLISTED MUSCULOSKELETAL PROCEDU | 4/1/1982 | $0.01 | 5 |
| K | 78414 | DETERMINATION OF CENTRAL C-V HEM | 7/1/2003 | $0.01 | 5 |
| K | 78428 | CARDIAC SHUNT DETECTION | 1/1/2007 | $90.57 | 3 |
| K | 78445 | NON-CARDIAC VASCULAR FLOW IMAGIN | 1/1/2007 | $69.03 | 3 |
| K | 78455 | VENOUS THROMBOSIS STUDY (EG RADI | 1/1/2006 | INVALID | N |
| K | 78456 | ACUTE VENOUS THROMBOSIS IMAGING, | 1/1/2007 | $146.88 | 3 |
| K | 78457 | VENOUS THROMBOSOS IMAGING(E.G.,V | 1/1/2007 | $100.43 | 3 |
| K | 78458 | VENOUS THROMBOSIS IMAGING (EG VE | 1/1/2007 | $142.73 | 3 |
| K | 78459 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| K | 78460 | MYOCARDIAL PERFUSION IMAGING; (P | 1/1/2007 | $95.76 | 3 |
| K | 78461 | MYOCARDIAL PERFUSION IMAGING; MU | 1/1/2007 | $173.61 | 3 |
| K | 78464 | MYOCARDIAL PERFUSION IMAGING; TO | 1/1/2007 | $232.77 | 3 |
| K | 78465 | MYOCARDIAL PERFUSION IMAGING; TO | 1/1/2007 | $375.50 | 3 |
| K | 78466 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $96.79 | 3 |
| K | 78468 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $128.71 | 3 |
| K | 78469 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $175.94 | 3 |
| K | 78472 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $186.58 | 3 |
| K | 78473 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $278.70 | 3 |
| K | 78478 | MYOCARDIAL PERFUSION STUDY W/WAL | 1/1/2007 | $65.65 | 3 |
| K | 78480 | MYOCARDIAL PERFUSION STUDY W/EJE | 1/1/2007 | $65.39 | 3 |
| K | 78481 | CARDIAC BLOOD POOL IMAGING, (PLA | 1/1/2007 | $178.80 | 3 |
| K | 78483 | CARDIAC BLOOD POOL IMAGING, (PLA | 1/1/2007 | $268.84 | 3 |
| K | 78491 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| K | 78492 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| K | 78494 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $234.85 | 3 |
| K | 78496 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $209.94 | 3 |
| K | 78499 | UNLISTED CARDIOVASCULAR PROCEDUR | 4/1/1982 | $0.01 | 5 |
| K | 78580 | PULMONARY PERFUSION IMAGING PART | 1/1/2007 | $120.41 | 3 |
| K | 78584 | PULMONARY PERFUSION IMAGING,PART | 1/1/2007 | $123.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 78585 | PULMONARY PERFUSION IMAGING PART | 1/1/2007 | $193.59 | 3 |
| K | 78586 | PULMONARY VENTILATION IMAGING AE | 1/1/2007 | $85.38 | 3 |
| K | 78587 | PULMONARY VENTILATION IMAGING AE | 1/1/2007 | $94.20 | 3 |
| K | 78588 | PULMONARY PERFUSION IMAGING, PAR | 1/1/2007 | $126.90 | 3 |
| K | 78591 | PULMONARY VENTILATION IMAGING GA | 1/1/2007 | $92.12 | 3 |
| K | 78593 | PULMONARY VENTILATION IMAGING GA | 1/1/2007 | $111.84 | 3 |
| K | 78594 | PULMONARY VENTILATION IMAGING GA | 1/1/2007 | $154.92 | 3 |
| K | 78596 | PULMONARY QUANTITATIVE DIFFERENT | 1/1/2007 | $238.74 | 3 |
| K | 78599 | UNLISTED RESPIRATORY PROCEDURE D | 4/1/1982 | $0.01 | 5 |
| K | 78600 | BRAIN IMAGING, LIMITED PROCEDURE | 1/1/2007 | $94.46 | 3 |
| K | 78601 | BRAIN IMAGING LIMITED PRODEDURE; | 1/1/2007 | $111.33 | 3 |
| K | 78605 | BRAIN IMAGING COMPLETE STUDY STA | 1/1/2007 | $112.10 | 3 |
| K | 78606 | BRAIN IMAGING COMPLETE STUDY; WI | 1/1/2007 | $128.97 | 3 |
| K | 78607 | BRAIN IMAGING, COMPLETE STUDY; T | 1/1/2007 | $223.95 | 3 |
| K | 78608 | BRAIN IMAGING, POSITRON EMISSION | 6/1/2005 | $1,212.91 | 3 |
| K | 78609 | BRAIN IMAGING, POSITRON EMISSION | 6/1/2005 | $1,212.91 | 3 |
| K | 78610 | BRAIN IMAGING, VASCULAR FLOW ONL | 1/1/2007 | $54.50 | 3 |
| K | 78615 | CEREBRAL VASCULAR FLOW | 1/1/2007 | $120.93 | 3 |
| K | 78630 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $162.45 | 3 |
| K | 78635 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $92.12 | 3 |
| K | 78645 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $114.18 | 3 |
| K | 78647 | CEREBROSPINAL FLUID FLOW, IMAGIN | 1/1/2007 | $194.37 | 3 |
| K | 78650 | CEREBROSPINAL FLUID LEAKAGE DETE | 1/1/2007 | $148.95 | 3 |
| K | 78660 | RADIOPHARMACEUTICAL DACRYOCYSTOG | 1/1/2007 | $77.33 | 3 |
| K | 78699 | UNLISTED NERVOUS SYSTEM PROCEDUR | 4/1/1982 | $0.01 | 5 |
| K | 78700 | KIDNEY IMAGING STATIC ONLY | 1/1/2007 | $99.65 | 3 |
| K | 78701 | KIDNEY IMAGING; WITH VASCULAR FL | 1/1/2007 | $114.70 | 3 |
| K | 78704 | KIDNEY IMAGING; WITH FUNCTION ST | 1/1/2007 | INVALID | N |
| K | 78707 | KIDNEY IMAGING; WITH VASCULAR FL | 1/1/2007 | $156.48 | 3 |
| K | 78708 | KIDNEY IMAGING WITH VASCULAR FLO | 1/1/2007 | $165.56 | 3 |
| K | 78709 | KIDNEY IMAGING WITH VASCULAR FLO | 1/1/2007 | $172.57 | 3 |
| K | 78710 | KIDNEY IMAGING; TOMOGRAPHIC (SEP | 1/1/2007 | $185.54 | 3 |
| K | 78715 | KIDNEY VASCULAR FLOW ONLY | 1/1/2007 | INVALID | N |
| K | 78725 | KIDNEY FUNCTION STUDY WITHOUT PH | 1/1/2007 | $63.06 | 3 |
| K | 78730 | URINARY BLADDER RESIDUAL STUDY | 1/1/2007 | $52.94 | 3 |
| K | 78740 | URETERAL REFLUX STUDY (RADIOPHAR | 1/1/2007 | $78.89 | 3 |
| K | 78760 | TESTICULAR IMAGING | 1/1/2007 | INVALID | N |
| K | 78761 | TESTICULAR IMAGING; WITH VASCULA | 1/1/2007 | $113.14 | 3 |
| K | 78799 | UNLISTED GENITOURINARY PROCEDURE | 4/1/1982 | $0.01 | 5 |
| K | 78800 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $117.03 | 3 |
| K | 78801 | TUMOR LOCALIZATION; MULTIPLE ARE | 1/1/2007 | $144.28 | 3 |
| K | 78802 | TUMOR LOCALIZATION; WHOLE BODY | 1/1/2007 | $182.69 | 3 |
| K | 78803 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $219.02 | 3 |
| K | 78804 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $333.98 | 3 |
| K | 78805 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $119.37 | 3 |
| K | 78806 | ABSCESS LOCALIZATION; WHOLE BODY | 1/1/2007 | $207.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 78807 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $219.02 | 3 |
| K | 78810 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2005 | INVALID | N |
| K | 78811 | TUMOR IMAGING, POSITRON EMISSION | 4/1/2005 | $1,040.87 | 3 |
| K | 78812 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2005 | $1,224.16 | 3 |
| K | 78813 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2005 | $1,356.66 | 3 |
| K | 78814 | TUMOR IMAGING, POSITRON EMISSION | 4/1/2005 | $1,212.91 | 3 |
| K | 78815 | TUMOR IMAGING, POSITRON EMISSION | 4/1/2005 | $1,431.24 | 3 |
| K | 78816 | TUMOR IMAGING, POSITRON EMISSION | 4/1/2005 | $1,531.57 | 3 |
| K | 78890 | GENERATION OF AUTOMATED DATA: IN | 1/1/2007 | $37.63 | 3 |
| K | 78891 | GENERATION OF AUTOMATED DATA INT | 1/1/2007 | $75.51 | 3 |
| K | 78990 | PROVISION OF DIAGNOSTIC RADIOPHA | 1/1/2005 | INVALID | N |
| K | 78999 | UNLISTED MISCELLANEOUS PROCEDURE | 4/1/1982 | $0.01 | 5 |
| K | 79000 | RADIOPHARMACEUTICAL THERAPY, HYP | 1/1/2005 | INVALID | N |
| K | 79001 | RADIONUCLIDE THERAPY HYPERTHYROI | 1/1/2005 | INVALID | N |
| K | 79005 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $136.24 | 3 |
| K | 79020 | RADIPHARMACEUTICAL THERAPY, THYR | 1/1/2005 | INVALID | N |
| K | 79030 | RADIOPHARMACEUTICAL ABLATION OF | 1/1/2005 | INVALID | N |
| K | 79035 | RADIOPHARMACEUTICAL THERAPY FOR | 1/1/2005 | INVALID | N |
| K | 79100 | RADIOPHARMACEUTICAL THERAPY, POL | 1/1/2005 | INVALID | N |
| K | 79101 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $142.21 | 3 |
| K | 79200 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $143.76 | 3 |
| K | 79300 | RADIOPHARMACEUTICAL THERAPY, BY | 4/1/1982 | $0.01 | 5 |
| K | 79400 | RADIOPHARMACEUTICAL THERAPY, NON | 1/1/2005 | INVALID | N |
| K | 79403 | RADIOPHARMACEUTICAL THERAPY, RAD | 1/1/2007 | $198.78 | 3 |
| K | 79420 | INTRAVASCULAR RADIOPHARMACEUTICA | 1/1/2005 | INVALID | N |
| K | 79440 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $144.28 | 3 |
| K | 79445 | RADIOPHARMACEUTICAL THERAPY, BY | 10/1/2005 | $158.81 | 3 |
| K | 79900 | PROVISION OF THERAPEUTIC RADIOPH | 1/1/2005 | INVALID | N |
| K | 79999 | RADIOPHARMACEUTICAL THERAPY, UNL | 4/1/1982 | $0.01 | 5 |
| K | 80048 | BASIC METABOLIC PANEL | 11/1/2001 | $8.66 | 3 |
| K | 80050 | GENERAL HEALTH PANEL | 10/1/2001 | $36.75 | 3 |
| K | 80051 | ELECROLYTE PANEL | 11/1/2001 | $7.17 | 3 |
| K | 80053 | COMPREHENSIVE METABOLIC PANEL | 11/1/2001 | $10.81 | 3 |
| K | 80055 | OBSTETRIC PANEL | 10/1/2001 | $40.00 | 3 |
| K | 80061 | LIPID PANEL; CHOLESTEROL, SERUM, | 11/1/2001 | $13.70 | 3 |
| K | 80069 | RENAL FUNCTION PANEL | 11/1/2001 | $8.88 | 3 |
| K | 80072 | ARTHRITIS PANEL; URIC ACID, BLOO | 4/1/2002 | INVALID | N |
| K | 80074 | ACUTE HEPATITIS PANEL | 11/1/2001 | $48.71 | 3 |
| K | 80076 | HEPATIC FUNCTION PANEL | 11/1/2001 | $8.35 | 3 |
| K | 80090 | TORCH ANTIBODY PANEL; ANTIBODY, | 7/1/2003 | INVALID | N |
| K | 80100 | DRUG SCREEN, QUALITATIVE; MULTIP | 11/1/2001 | $14.87 | 3 |
| K | 80101 | DRUG SCREEN, QUALITATIVE; SINGLE | 11/1/2001 | $14.08 | 3 |
| K | 80102 | DRUG, CONFIRMATION, EACH PROCEDU | 11/1/2001 | $13.55 | 3 |
| K | 80103 | TISSUE PREPARATION FOR DRUG ANAL | 10/1/2005 | $0.01 | 5 |
| K | 80150 | AMIKACIN | 11/1/2001 | $15.41 | 3 |
| K | 80152 | AMITRIPTYLINE | 11/1/2001 | $18.31 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 80154 | BENZODIAZEPINES | 11/1/2001 | $18.91 | 3 |
| K | 80156 | CARBAMAZEPINE; TOTAL | 11/1/2001 | $14.89 | 3 |
| K | 80157 | CARBAMAZEPINE; FREE | 11/1/2001 | $10.17 | 3 |
| K | 80158 | CYCLOSPORINE | 11/1/2001 | $18.46 | 3 |
| K | 80160 | DESIPRAMINE | 11/1/2001 | $17.60 | 3 |
| K | 80162 | DIGOXIN | 11/1/2001 | $13.58 | 3 |
| K | 80164 | DIPROPYLACETIC ACID (VALPROIC AC | 11/1/2001 | $13.85 | 3 |
| K | 80166 | DOXEPIN | 11/1/2001 | $15.85 | 3 |
| K | 80168 | ETHOSUXIMIDE | 11/1/2001 | $16.71 | 3 |
| K | 80170 | GENTAMICIN | 11/1/2001 | $16.76 | 3 |
| K | 80172 | GOLD | 11/1/2001 | $16.66 | 3 |
| K | 80173 | HALOPERIDOL | 11/1/2001 | $14.89 | 3 |
| K | 80174 | IMIPRAMINE | 11/1/2001 | $17.60 | 3 |
| K | 80176 | LIDOCAINE | 11/1/2001 | $15.02 | 3 |
| K | 80178 | LITHIUM | 11/1/2001 | $6.76 | 3 |
| K | 80182 | NORTRIPTYLINE | 11/1/2001 | $13.85 | 3 |
| K | 80184 | PHENOBARBITAL | 11/1/2001 | $11.71 | 3 |
| K | 80185 | PHENYTOIN; TOTAL | 11/1/2001 | $13.56 | 3 |
| K | 80186 | PHENYTOIN; FREE | 11/1/2001 | $14.08 | 3 |
| K | 80188 | PRIMIDONE | 11/1/2001 | $16.97 | 3 |
| K | 80190 | PROCAINAMIDE; | 11/1/2001 | $17.13 | 3 |
| K | 80192 | PROCAINAMIDE; WITH METABOLITES ( | 11/1/2001 | $17.13 | 3 |
| K | 80194 | QUINIDINE | 11/1/2001 | $14.93 | 3 |
| K | 80195 | SIROLIMUS | 1/1/2006 | $14.19 | 3 |
| K | 80196 | SALICYLATE | 11/1/2001 | $7.26 | 3 |
| K | 80197 | TACROLIMUS | 11/1/2001 | $14.04 | 3 |
| K | 80198 | THEOPHYLLINE | 11/1/2001 | $14.47 | 3 |
| K | 80200 | TOBRAMYCIN | 11/1/2001 | $16.48 | 3 |
| K | 80201 | TOPIRAMATE | 11/1/2001 | $12.20 | 3 |
| K | 80202 | VANCOMYCIN | 11/1/2001 | $13.85 | 3 |
| K | 80299 | QUANTITATION OF DRUG, NOT ELSEWH | 11/1/2001 | $14.00 | 3 |
| K | 80400 | ACTH STIMULATION PANEL; FOR ADRE | 11/1/2001 | $33.34 | 3 |
| K | 80402 | ACTH STIMUALTION PANEL; FOR 21 H | 11/1/2001 | $88.90 | 3 |
| K | 80406 | ACTH STIMUALTION PANEL; FOR 3 BE | 11/1/2001 | $80.02 | 3 |
| K | 80408 | ALDOSTERONE SUPPRESSION EVALUATI | 11/1/2001 | $128.35 | 3 |
| K | 80410 | CALCITONIN STIMULATION PANEL (EG | 11/1/2001 | $82.10 | 3 |
| K | 80412 | CORTICOTROPIC RELEASING HORMONE | 11/1/2001 | $337.04 | 3 |
| K | 80414 | CHORIONIC GONADOTROPHIN STIMULAT | 1/1/1994 | NC | 9 |
| K | 80415 | CHORIONIC GONADOTROPHIN STIMULAT | 1/1/1994 | NC | 9 |
| K | 80416 | RENAL VEIN RENIN STIMUALTION PAN | 11/1/2001 | $134.98 | 3 |
| K | 80417 | PERIPHERAL VEIN RENIN STIMULATIO | 11/1/2001 | $44.99 | 3 |
| K | 80418 | COMBINED RAPID ANTERIOR PITUITAR | 11/1/2001 | $592.68 | 3 |
| K | 80420 | DEXAMETHASONE SUPPRESSION PANEL; | 11/1/2001 | $73.66 | 3 |
| K | 80422 | GLUCAGON TOLERANCE PANEL; FOR IN | 11/1/2001 | $47.13 | 3 |
| K | 80424 | GLUCAGON TOLERANCE PANEL; FOR PH | 11/1/2001 | $51.65 | 3 |
| K | 80426 | GONADOTROPIN RELEASING HORMONE S | 11/1/2001 | $151.82 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 80428 | GROWTH HORMONE STIMULATION PANEL | 11/1/2001 | $68.20 | 3 |
| K | 80430 | GROWTH HORMONE SUPPRESSION PANEL | 11/1/2001 | $80.23 | 3 |
| K | 80432 | INSULIN-INDUCED C-PEPTIDE SUPPRE | 11/1/2001 | $138.13 | 3 |
| K | 80434 | INSULIN TOLERANCE PANEL; FOR ACT | 11/1/2001 | $103.42 | 3 |
| K | 80435 | INSULIN TOLERANCE PANEL; FOR GRO | 11/1/2001 | $105.30 | 3 |
| K | 80436 | METYRAPONE PANEL | 11/1/2001 | $93.23 | 3 |
| K | 80438 | THYROTROPIN RELEASING HORMONE (T | 11/1/2001 | $51.53 | 3 |
| K | 80439 | THYROTROPIN RELEASING HORMONE (T | 11/1/2001 | $68.70 | 3 |
| K | 80440 | THYROTROPIN RELEASING HORMONE (T | 11/1/2001 | $59.45 | 3 |
| K | 80500 | CLINICAL PATHOLOGY CONSULTATION; | 1/1/2007 | $15.31 | 3 |
| K | 80502 | CLINICAL PATHOLOGY CONSULTATION | 1/1/2007 | $49.56 | 3 |
| K | 81000 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $3.23 | 3 |
| K | 81001 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $3.23 | 3 |
| K | 81002 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $2.62 | 3 |
| K | 81003 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $2.29 | 3 |
| K | 81005 | URINALYSIS; QUALITATIVE OR SEMIQ | 11/1/2001 | $2.22 | 3 |
| K | 81007 | URINALYSIS; BACTERIURIA SCREEN, | 11/1/2001 | $2.63 | 3 |
| K | 81015 | URINALYSIS; MICROSCOPIC ONLY | 11/1/2001 | $3.11 | 3 |
| K | 81020 | URINALYSIS; TWO OR THREE GLASS T | 11/1/2001 | $3.77 | 3 |
| K | 81025 | URINE PREGNANCY TEST, BY VISUAL | 11/1/2001 | $6.47 | 3 |
| K | 81050 | VOLUME MEASUREMENT FOR TIMED COL | 11/1/2001 | $3.06 | 3 |
| K | 81099 | UNLISTED URINALYSIS PROCEDURE | 10/1/2005 | $0.01 | 5 |
| K | 82000 | ACETALDEHYDE BLOOD | 11/1/2001 | $12.67 | 3 |
| K | 82003 | ACETAMINOPHEN | 11/1/2001 | $20.69 | 3 |
| K | 82009 | ACETONE OR OTHER KETONE BODIES, | 11/1/2001 | $4.63 | 3 |
| K | 82010 | ACETONE; QUANTITATIVE | 11/1/2001 | $8.35 | 3 |
| K | 82013 | ACETYLCHOLINESTRASE | 11/1/2001 | $11.43 | 3 |
| K | 82016 | ACYLCARNITINES; QUALITATIVE, EAC | 11/1/2001 | $14.18 | 3 |
| K | 82017 | ACYLCARNITINES; QUANTITATIVE, EA | 11/1/2001 | $17.25 | 3 |
| K | 82024 | ADRENOCORTICOTROPIC HORMONE (ACT | 11/1/2001 | $39.50 | 3 |
| K | 82030 | ADENOSINE; 5'-MONOPHOSPHATE, CYC | 11/1/2001 | $16.38 | 3 |
| K | 82040 | ALBUMIN SERUM | 11/1/2001 | $5.07 | 3 |
| K | 82042 | ALBUMIN; URINE OR OTHER SOURCE, | 11/1/2001 | $5.29 | 3 |
| K | 82043 | ALBUMIN; URINE, MICROALBUMIN, QU | 11/1/2001 | $5.92 | 3 |
| K | 82044 | ALBUMIN; URINE, MICROALBUMIN, SE | 11/1/2001 | $4.68 | 3 |
| K | 82045 | ALBUMIN; ISCHEMIA MODIFIED | 1/1/2005 | $35.10 | 3 |
| K | 82055 | ALCOHOL (ETHANOL); ANY SPECIMEN | 11/1/2001 | $11.05 | 3 |
| K | 82075 | ALCOHOL (ETHANOL); BREATH | 11/1/2001 | $12.33 | 3 |
| K | 82085 | ALDOLASE | 11/1/2001 | $9.93 | 3 |
| K | 82088 | ALDOSTERONE | 11/1/2001 | $41.68 | 3 |
| K | 82101 | ALKALOIDS, URINE, QUANTITATIVE | 11/1/2001 | $30.70 | 3 |
| K | 82103 | ALPHA-1-ANTITRYPSIN; TOTAL | 11/1/2001 | $13.73 | 3 |
| K | 82104 | ALPHA-1-ANTITRYPSIN; PHENOTYPE | 11/1/2001 | $14.79 | 3 |
| K | 82105 | ALPHA-FETOPROTEIN; SERUM | 11/1/2001 | $16.38 | 3 |
| K | 82106 | ALPHA-FETOPROTEIN; AMNIOTIC FLUI | 11/1/2001 | $16.38 | 3 |
| K | 82107 | ALPHA-FETOPROTEIN; AFP-L3 FRACTI | 1/1/2007 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 82108 | ALUMINUM | 11/1/2001 | $16.35 | 3 |
| K | 82120 | AMINES, VAGINAL FLUID, QUALITATI | 11/1/2001 | $3.23 | 3 |
| K | 82127 | AMINO ACIDS; SINGLE, QUALITATIVE | 11/1/2001 | $14.18 | 3 |
| K | 82128 | AMINO ACIDS QUALITATIVE | 11/1/2001 | $14.18 | 3 |
| K | 82131 | AMINO ACIDS, QUANTITATION, EACH | 11/1/2001 | $17.25 | 3 |
| K | 82135 | AMINOLEVULINIC ACID DELTA (ALA) | 11/1/2001 | $16.84 | 3 |
| K | 82136 | AMINO ACIDS, 2 TO 5 AMINO ACIDS, | 11/1/2001 | $17.25 | 3 |
| K | 82139 | AMINO ACIDS, 6 OR MORE AMINO ACI | 11/1/2001 | $17.25 | 3 |
| K | 82140 | AMMONIA | 11/1/2001 | $14.90 | 3 |
| K | 82143 | AMNIOTIC FLUID SCAN (SPECTROPHOT | 11/1/2001 | $7.03 | 3 |
| K | 82145 | AMPHETAMINE OR METHAMPHETAMINE | 11/1/2001 | $15.90 | 3 |
| K | 82150 | AMYLASE | 11/1/2001 | $6.63 | 3 |
| K | 82154 | ANDROSTANEDIOL GLUCURONIDE | 11/1/2001 | $29.49 | 3 |
| K | 82157 | ANDROSTENEDIONE | 11/1/2001 | $29.94 | 3 |
| K | 82160 | ANDROSTERONE | 11/1/2001 | $25.58 | 3 |
| K | 82163 | ANGIOTENSIN II | 11/1/2001 | $20.99 | 3 |
| K | 82164 | ANGIOTENSIN I - CONVERTING ENZYM | 11/1/2001 | $14.93 | 3 |
| K | 82172 | APOLIPOPROTEIN, EACH | 11/1/2001 | $15.84 | 3 |
| K | 82175 | ARSENIC | 11/1/2001 | $19.40 | 3 |
| K | 82180 | ASCORBIC ACID (VITAMIN C) BLOOD | 11/1/2001 | $10.11 | 3 |
| K | 82190 | ATOMIC ABSORPTION SPECTROSCOPY, | 11/1/2001 | $15.24 | 3 |
| K | 82205 | BARBITURATES, NOT ELSEWHERE SPEC | 11/1/2001 | $11.71 | 3 |
| K | 82232 | BETA-2 MICROGLOBULIN | 11/1/2001 | $16.55 | 3 |
| K | 82239 | BILE ACIDS; TOTAL | 11/1/2001 | $17.52 | 3 |
| K | 82240 | BILE ACIDS; CHOLYLGLYCINE | 11/1/2001 | $27.18 | 3 |
| K | 82247 | BILIRUBIN; TOTAL | 11/1/2001 | $5.14 | 3 |
| K | 82248 | BILIRUBIN; DIRECT | 11/1/2001 | $5.14 | 3 |
| K | 82252 | BILIRUBIN; FECES QUALITATIVE | 11/1/2001 | $4.65 | 3 |
| K | 82261 | BIOTINIDASE, EACH SPECIMEN | 11/1/2001 | $17.25 | 3 |
| K | 82270 | BLOOD, OCCULT, BY PEROXIDASE ACT | 11/1/2001 | $3.32 | 3 |
| K | 82271 | BLOOD, OCCULT, BY PEROXIDASE ACT | 1/1/2006 | $3.36 | 3 |
| K | 82272 | BLOOD, OCCULT, BY PEROXIDASE ACT | 1/1/2006 | $3.36 | 3 |
| K | 82273 | BLOOD, OCCULT, BY PEROXIDASE ACT | 1/1/2006 | INVALID | N |
| K | 82274 | BLOOD, OCCULT, BY FECAL HEMOGLOB | 12/1/2002 | $3.32 | 3 |
| K | 82286 | BRADYKININ | 11/1/2001 | $7.04 | 3 |
| K | 82300 | CADMIUM | 11/1/2001 | $20.94 | 3 |
| K | 82306 | CALCIFEDIOL (25-OH VITAMIN D-3) | 11/1/2001 | $24.55 | 3 |
| K | 82307 | CALCIFEROL (VITAMIN D) | 11/1/2001 | $32.95 | 3 |
| K | 82308 | CALCITONIN | 11/1/2001 | $27.39 | 3 |
| K | 82310 | CALCIUM; TOTAL | 11/1/2001 | $5.27 | 3 |
| K | 82330 | CALCIUM; IONIZED | 11/1/2001 | $13.97 | 3 |
| K | 82331 | CALCIUM BLOOD; AFTER CALCIUM INF | 11/1/2001 | $5.29 | 3 |
| K | 82340 | CALCIUM; URINE QUANTITATIVE, TIM | 11/1/2001 | $5.33 | 3 |
| K | 82355 | CALCULUS; QUALITATIVE ANALYSIS | 11/1/2001 | $11.83 | 3 |
| K | 82360 | CALCULUS (STONE); QUANTITATIVE A | 11/1/2001 | $13.17 | 3 |
| K | 82365 | CALCULUS (STONE) QUANTITATIVE; I | 11/1/2001 | $13.19 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 82370 | CALCULUS (STONE) QUANTITATIVE; X | 11/1/2001 | $12.82 | 3 |
| K | 82373 | CARBOHYDRATE DEFICIENT TRANSFERR | 11/1/2001 | $7.36 | 3 |
| K | 82374 | CARBON DIOXIDE (BICARBONATE) | 11/1/2001 | $5.00 | 3 |
| K | 82375 | CARON MONOXIDE (CARBOXYHEMOGLOBI | 11/1/2001 | $12.60 | 3 |
| K | 82376 | CARBON MONOXIDE (CARBOXYHEMOGLOB | 11/1/2001 | $5.70 | 3 |
| K | 82378 | CARCINOEMBRYONIC ANTIGEN (CEA) | 11/1/2001 | $19.40 | 3 |
| K | 82379 | CARNITINE (TOTAL AND FREE), QUAN | 11/1/2001 | $17.25 | 3 |
| K | 82380 | CAROTENE | 11/1/2001 | $9.44 | 3 |
| K | 82382 | CATECHOLAMINES; TOTAL URINE | 11/1/2001 | $17.58 | 3 |
| K | 82383 | CATECHOLAMINES (DOPAMINE NOREPIN | 11/1/2001 | $21.42 | 3 |
| K | 82384 | CATECHOLAMINES (DOPAMINE NOREPIN | 11/1/2001 | $25.83 | 3 |
| K | 82387 | CATHEPSIN-D | 11/1/2001 | $21.28 | 3 |
| K | 82390 | CERULOPLASMIN | 11/1/2001 | $10.98 | 3 |
| K | 82397 | CHEMILUMINESCENT ASSAY | 11/1/2001 | $14.45 | 3 |
| K | 82415 | CHLORAMPHENICOL | 11/1/2001 | $12.96 | 3 |
| K | 82435 | CHLORIDE; BLOOD | 11/1/2001 | $4.70 | 3 |
| K | 82436 | CHLORIDE; URINE | 11/1/2001 | $5.14 | 3 |
| K | 82438 | CHLORIDE; OTHER SOURCE | 11/1/2001 | $5.00 | 3 |
| K | 82441 | CHLORINATED HYDROCARBONS SCREEN | 11/1/2001 | $6.14 | 3 |
| K | 82465 | CHOLESTEROL, SERUM OR WHOLE BLOO | 11/1/2001 | $4.45 | 3 |
| K | 82480 | CHOLINESTERASE SERUM | 11/1/2001 | $8.06 | 3 |
| K | 82482 | CHOLINESTERASE; RBC | 11/1/2001 | $7.86 | 3 |
| K | 82485 | CHONDROITIN B SULFATE QUANTITATI | 11/1/2001 | $21.12 | 3 |
| K | 82486 | CHROMATOGRAPHY, QUALITATIVE; COL | 11/1/2001 | $18.47 | 3 |
| K | 82487 | CHROMATOGRAPHY, QUALITATIVE; PAP | 11/1/2001 | $14.75 | 3 |
| K | 82488 | CHROMATOGRAPHY, QUALITATIVE; PAP | 11/1/2001 | $21.85 | 3 |
| K | 82489 | CHROMATOGRAPHY, QUALITATIVE; THI | 11/1/2001 | $18.91 | 3 |
| K | 82491 | CHROMOTOGRAPHY, QUANTITATIVE; CO | 11/1/2001 | $18.47 | 3 |
| K | 82492 | CHROMATOGRAPHY; MULTIPLE ANALYTE | 11/1/2001 | $18.47 | 3 |
| K | 82495 | CHROMIUM | 11/1/2001 | $20.74 | 3 |
| K | 82507 | CITRIC ACID | 11/1/2001 | $28.44 | 3 |
| K | 82520 | COCAINE OR METABOLITE | 11/1/2001 | $15.50 | 3 |
| K | 82523 | COLLAGEN CROSS LINKS, ANY METHOD | 11/1/2001 | $19.11 | 3 |
| K | 82525 | COPPER | 11/1/2001 | $12.69 | 3 |
| K | 82528 | CORTICOSTERONE | 11/1/2001 | $23.02 | 3 |
| K | 82530 | CORTISOL; FREE | 11/1/2001 | $17.09 | 3 |
| K | 82533 | CORTISOL; TOTAL | 11/1/2001 | $16.67 | 3 |
| K | 82540 | CREATINE | 11/1/2001 | $4.74 | 3 |
| K | 82541 | COLUMN CHROMATOGRAPHY/MASS SPECT | 11/1/2001 | $18.47 | 3 |
| K | 82542 | COLUMN CHROMATOGRAPHY/MASS SPECT | 11/1/2001 | $18.47 | 3 |
| K | 82543 | COLUMN CHROMATOGRAPHY/MASS SPECT | 11/1/2001 | $18.47 | 3 |
| K | 82544 | COLUMN CHROMATOGRAPHY/MASS SPECT | 11/1/2001 | $18.47 | 3 |
| K | 82550 | CREATINE KINASE (CK), (CPK); TOT | 11/1/2001 | $6.67 | 3 |
| K | 82552 | CREATINE PHOSPHOKINASE (CPK) BLO | 11/1/2001 | $13.70 | 3 |
| K | 82553 | CREATINE KINASE (CK), (CPK); MB | 11/1/2001 | $11.80 | 3 |
| K | 82554 | CREATINE KINASE (CK, (CPK); ISOF | 11/1/2001 | $12.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 82565 | CREATININE; BLOOD | 11/1/2001 | $5.23 | 3 |
| K | 82570 | CREATININE; OTHER SOURCE | 11/1/2001 | $5.29 | 3 |
| K | 82575 | CREATININE; CLEARANCE | 11/1/2001 | $9.66 | 3 |
| K | 82585 | CRYOFIBRINOGEN | 11/1/2001 | $8.77 | 3 |
| K | 82595 | CRYOGLOBULIN, QUALITATIVE OR SEM | 11/1/2001 | $6.62 | 3 |
| K | 82600 | CYANIDE | 11/1/2001 | $19.84 | 3 |
| K | 82607 | CYANOCOBALAMIN (VITAMIN B-12) | 11/1/2001 | $15.41 | 3 |
| K | 82608 | CYANOCOBALAMIN (VITAMIN B-12); U | 11/1/2001 | $14.65 | 3 |
| K | 82615 | CYSTINE AND HOMOCYSTINE URINE QU | 11/1/2001 | $8.35 | 3 |
| K | 82626 | DEHYDROEPIANDROSTERONE (DHEA) | 11/1/2001 | $25.85 | 3 |
| K | 82627 | DEHYDROEPIANDROSTERONE-SULFATE ( | 11/1/2001 | $22.73 | 3 |
| K | 82633 | DESOXYCORTICOSTERONE, 11- | 11/1/2001 | $31.68 | 3 |
| K | 82634 | DESOXYCORTISOL, 11- | 11/1/2001 | $29.94 | 3 |
| K | 82638 | DIBUCAINE NUMBER | 11/1/2001 | $12.52 | 3 |
| K | 82646 | DIHYDROCODINONE | 11/1/2001 | $21.12 | 3 |
| K | 82649 | DIHYDROMORPHINONE | 11/1/2001 | $26.28 | 3 |
| K | 82651 | DIHYDROTESTOSTERONE (DHT) | 11/1/2001 | $26.40 | 3 |
| K | 82652 | DIHYDROXYVITAMIN D, 1, 25 | 11/1/2001 | $39.36 | 3 |
| K | 82654 | DIMETHADIONE | 11/1/2001 | $14.16 | 3 |
| K | 82656 | ELASTASE, PANCREATIC (EL-1), FEC | 1/1/2005 | $11.93 | 3 |
| K | 82657 | ENZYME ACTIVITY IN BLOOD CELLS, | 11/1/2001 | $18.47 | 3 |
| K | 82658 | ENZYME ACTIVITY IN BLOOD CELLS, | 11/1/2001 | $18.47 | 3 |
| K | 82664 | ELECTROPHORETIC TECHNIQUE NOT EL | 11/1/2001 | $35.14 | 3 |
| K | 82666 | EPIANDROSTERONE | 11/1/2001 | $21.97 | 3 |
| K | 82668 | ERYTHROPOIETIN | 11/1/2001 | $19.22 | 3 |
| K | 82670 | ESTRADIOL | 11/1/2001 | $28.58 | 3 |
| K | 82671 | ESTROGENS FRACTIONATED | 11/1/2001 | $33.03 | 3 |
| K | 82672 | ESTROGENS; TOTAL | 11/1/2001 | $22.18 | 3 |
| K | 82677 | ESTRIOL | 11/1/2001 | $24.74 | 3 |
| K | 82679 | ESTRONE | 11/1/2001 | $25.53 | 3 |
| K | 82690 | ETHCHLORVYNOL | 11/1/2001 | $17.68 | 3 |
| K | 82693 | ETHYLENE GLYCOL | 11/1/2001 | $15.24 | 3 |
| K | 82696 | ETIOCHOLANOLONE | 11/1/2001 | $24.12 | 3 |
| K | 82705 | FAT OR LIPIDS, FECES; QUALITATIV | 11/1/2001 | $4.51 | 3 |
| K | 82710 | FAT OR LIPIDS, FECES; QUANTITATI | 11/1/2001 | $17.18 | 3 |
| K | 82715 | FAT DIFFERENTIAL FECES QUANTITAT | 11/1/2001 | $17.60 | 3 |
| K | 82725 | FATTY ACIDS, NONESTERIFIED | 11/1/2001 | $13.62 | 3 |
| K | 82726 | VERY LONG CHAIN FATTY ACIDS | 11/1/2001 | $18.47 | 3 |
| K | 82728 | FERRITIN | 11/1/2001 | $8.95 | 3 |
| K | 82731 | FETAL FIBRONECTIN, CERVICOVAGINA | 11/1/2001 | $65.87 | 3 |
| K | 82735 | FLUORIDE | 11/1/2001 | $18.97 | 3 |
| K | 82742 | FLURAZEPAM | 11/1/2001 | $20.25 | 3 |
| K | 82746 | FOLIC ACID; SERUM | 11/1/2001 | $15.04 | 3 |
| K | 82747 | FOLIC ACID; RBC | 11/1/2001 | $17.71 | 3 |
| K | 82757 | FRUCTOSE SEMEN | 2/22/1994 | NC | 9 |
| K | 82759 | GALACTOKINASE RBC | 11/1/2001 | $21.97 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 82760 | GALACTOSE | 11/1/2001 | $11.45 | 3 |
| K | 82775 | GALACTOSE-1-PHOSPHATE URIDYL TRA | 11/1/2001 | $21.54 | 3 |
| K | 82776 | GALACTOSE-1-PHOSPHATE URIDYL TRA | 11/1/2001 | $8.58 | 3 |
| K | 82784 | GAMMAGLOBULIN; IGA, IGD, IGG, IG | 11/1/2001 | $6.56 | 3 |
| K | 82785 | GAMMAGLOBULIN; IGE | 11/1/2001 | $16.84 | 3 |
| K | 82787 | GAMMAGLOBULIN; IMMUNOGLOBULIN SU | 11/1/2001 | $8.21 | 3 |
| K | 82800 | GASES BLOOD PH ONLY | 11/1/2001 | $8.67 | 3 |
| K | 82803 | GASES, BLOOD, ANY COMBINATION OF | 11/1/2001 | $19.79 | 3 |
| K | 82805 | GASES, BLOOD, ANY COMBINATION OF | 11/1/2001 | $29.02 | 3 |
| K | 82810 | GASES, BLOOD, 02 SATURATION ONLY | 11/1/2001 | $8.92 | 3 |
| K | 82820 | HEMOGLOBIN-OXYGEN AFFINITY (PO2 | 11/1/2001 | $10.23 | 3 |
| K | 82926 | GASTRIC ACID, FREE AND TOTAL; EA | 11/1/2001 | $4.95 | 3 |
| K | 82928 | GASTRIC ACID, FREE OR TOTAL; EAC | 11/1/2001 | $6.70 | 3 |
| K | 82938 | GASTRIN AFTER SECRETIN STIMULATI | 11/1/2001 | $18.10 | 3 |
| K | 82941 | GASTRIN | 11/1/2001 | $18.04 | 3 |
| K | 82943 | GLUCAGON | 11/1/2001 | $14.62 | 3 |
| K | 82945 | GLUCOSE, BODY FLUID, OTHER THAN | 11/1/2001 | $4.01 | 3 |
| K | 82946 | GLUCAGON TOLERANCE TEST | 11/1/2001 | $15.41 | 3 |
| K | 82947 | GLUCOSE; QUANTITATIVE, BLOOD (EX | 11/1/2001 | $4.01 | 3 |
| K | 82948 | GLUCOSE; BLOOD, REAGENT STRIP | 11/1/2001 | $3.23 | 3 |
| K | 82950 | GLUCOSE; POST GLUCOSE DOSE (INCL | 11/1/2001 | $4.85 | 3 |
| K | 82951 | GLUCOSE; TOLERANCE TEST (GTT) TH | 11/1/2001 | $7.71 | 3 |
| K | 82952 | GLUCOSE; TOLERANCE TEST EACH ADD | 11/1/2001 | $4.01 | 3 |
| K | 82953 | GLUCOSE; TOLBUTAMIDE TOLERANCE T | 11/1/2001 | $15.49 | 3 |
| K | 82955 | GLUCOSE-6-PHOSPHATE DEHYDROGENAS | 11/1/2001 | $9.92 | 3 |
| K | 82960 | GLUCOSE-6-PHOSPHATE DEHYDROGENAS | 11/1/2001 | $6.20 | 3 |
| K | 82962 | GLUCOSE, BLOOD, BY GLUCOSE MONIT | 10/1/2001 | $4.34 | 3 |
| K | 82963 | GLUCOSIDASE, BETA | 11/1/2001 | $21.97 | 3 |
| K | 82965 | GLUTAMATE DEHYDROGENASE | 11/1/2001 | $7.90 | 3 |
| K | 82975 | GLUTAMINE (GLUTAMIC ACID AMIDE) | 11/1/2001 | $16.19 | 3 |
| K | 82977 | GLUTAMYLTRANSFERASE, GAMMA (GGT) | 11/1/2001 | $7.36 | 3 |
| K | 82978 | GLUTATHIONE | 11/1/2001 | $14.58 | 3 |
| K | 82979 | GLUTATHIONE REDUCTASE RBC | 11/1/2001 | $7.04 | 3 |
| K | 82980 | GLUTETHIMIDE | 11/1/2001 | $12.28 | 3 |
| K | 82985 | GLYCATED PROTEIN | 11/1/2001 | $15.41 | 3 |
| K | 83001 | GONADOTROPIN; FOLLICLE STIMULATI | 11/1/2001 | $19.01 | 3 |
| K | 83002 | GONADTROPIN; LUTEINIZING HORMONE | 11/1/2001 | $18.94 | 3 |
| K | 83003 | GROWTH HORMONE, HUMAN (HGH) (SOM | 11/1/2001 | $17.05 | 3 |
| K | 83008 | GUANOSINE MONOPHOSPHATE (GMP), C | 11/1/2001 | $17.17 | 3 |
| K | 83009 | HELICOBACTER PYLORI, BLOOD TEST | 1/1/2005 | $69.64 | 3 |
| K | 83010 | HAPTOGLOBIN; QUANTITATIVE | 11/1/2001 | $12.86 | 3 |
| K | 83012 | HAPTOGLOBIN; PHENOTYPES | 11/1/2001 | $15.41 | 3 |
| K | 83013 | HELICOBACTER PYLORI; BREATH TEST | 11/1/2001 | $68.89 | 3 |
| K | 83014 | HELICOBACTER PYLORI; DRUG ADMINI | 11/1/2001 | $8.04 | 3 |
| K | 83015 | HEAVY METAL (ARSENIC, BARIUM, BE | 11/1/2001 | $18.56 | 3 |
| K | 83018 | HEAVY METAL (ARSENIC, BARIUM, BE | 11/1/2001 | $22.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 83020 | HEMOGLOBIN; ELECTROPHORESIS (EG, | 7/1/1997 | $17.67 | 3 |
| K | 83021 | HEMOGLOBIN FRACTIONATION AND QUA | 11/1/2001 | $18.47 | 3 |
| K | 83026 | HEMOGLOBIN; BY COPPER SULFATE ME | 11/1/2001 | $2.41 | 3 |
| K | 83030 | HEMOGLOBIN; F(FETAL) CHEMICAL | 11/1/2001 | $8.46 | 3 |
| K | 83033 | HEMOGLOBIN; F (FETAL), QUALITATI | 11/1/2001 | $6.10 | 3 |
| K | 83036 | HEMOGLOBIN; GLYCOSYLATED (A1C) | 11/1/2001 | $9.93 | 3 |
| K | 83037 | HEMOGLOBIN; GLYCOSYLATED (A1C) B | 4/1/2006 | NC | 9 |
| K | 83045 | HEMOGLOBIN; METHEMOGLOBIN QUALIT | 11/1/2001 | $5.07 | 3 |
| K | 83050 | HEMOGLOBIN; METHEMOGLOBIN QUANTI | 11/1/2001 | $7.49 | 3 |
| K | 83051 | HEMOGLOBIN; PLASMA | 11/1/2001 | $7.47 | 3 |
| K | 83055 | HEMOGLOBIN; SULFHEMOGLOBIN QUALI | 11/1/2001 | $5.03 | 3 |
| K | 83060 | HEMOGLOBIN; SULFHEMOGLOBIN QUANT | 11/1/2001 | $8.46 | 3 |
| K | 83065 | HEMOGLOBIN; THERMOLABILE | 11/1/2001 | $7.04 | 3 |
| K | 83068 | HEMOGLOBIN; UNSTABLE SCREEN | 11/1/2001 | $8.67 | 3 |
| K | 83069 | HEMOBLOBIN; URINE | 11/1/2001 | $2.95 | 3 |
| K | 83070 | HEMOSIDERIN; QUALITATIVE | 11/1/2001 | $4.85 | 3 |
| K | 83071 | HEMOSIDERIN; QUANTITATIVE | 11/1/2001 | $7.03 | 3 |
| K | 83080 | B-HEXOSAMINIDASE, EACH ASSAY | 11/1/2001 | $17.25 | 3 |
| K | 83088 | HISTAMINE | 11/1/2001 | $30.20 | 3 |
| K | 83090 | HOMOCYSTINE | 11/1/2001 | $17.25 | 3 |
| K | 83150 | HOMOVANILLIC ACID (HVA) | 11/1/2001 | $19.79 | 3 |
| K | 83491 | HYDROXYCORTICOSTEROIDS, 17- (17- | 11/1/2001 | $17.92 | 3 |
| K | 83497 | HYDROCYINDOLACETIC ACID 5-(HIAA) | 11/1/2001 | $13.19 | 3 |
| K | 83498 | HYDROXYPROGESTERONE, 17-D | 11/1/2001 | $27.78 | 3 |
| K | 83499 | HYDROXYPROGESTERONE 20 | 11/1/2001 | $25.77 | 3 |
| K | 83500 | HYDROXYPROLINE; FREE | 11/1/2001 | $23.16 | 3 |
| K | 83505 | HYDROXYPROLINE; TOTAL | 11/1/2001 | $24.86 | 3 |
| K | 83516 | IMMUNOASSAY FOR ANALYTE OTHER TH | 11/1/2001 | $11.80 | 3 |
| K | 83518 | IMMUNOASSAY FOR ANALYTE OTHER TH | 11/1/2001 | $8.67 | 3 |
| K | 83519 | IMMUNOASSAY, ANALYTE, QUANTITATI | 11/1/2001 | $13.82 | 3 |
| K | 83520 | IMMUNOASSAY, ANALYTE; NOT OTHERW | 11/1/2001 | $13.24 | 3 |
| K | 83525 | INSULIN; TOTAL | 11/1/2001 | $11.70 | 3 |
| K | 83527 | INSULIN; FREE | 11/1/2001 | $13.25 | 3 |
| K | 83528 | INTRINSIC FACTOR | 11/1/2001 | $16.27 | 3 |
| K | 83540 | IRON | 11/1/2001 | $6.62 | 3 |
| K | 83550 | IRON BINDING CAPACITY | 11/1/2001 | $8.94 | 3 |
| K | 83570 | ISOCITRIC DEHYDROGENASE (IDH) | 11/1/2001 | $9.04 | 3 |
| K | 83582 | KETOGENIC STEROIDS; FRACTIONATIO | 11/1/2001 | $14.50 | 3 |
| K | 83586 | KETOSTEROIDS, 17- (17-KS); TOTAL | 11/1/2001 | $13.09 | 3 |
| K | 83593 | KETOSTEROIDS, 17- (17-KS); FRACT | 11/1/2001 | $26.90 | 3 |
| K | 83605 | LACTATE (LACTIC ACID) | 11/1/2001 | $10.92 | 3 |
| K | 83615 | LACTATE DEHYDROGENASE (LD), (LDH | 11/1/2001 | $6.18 | 3 |
| K | 83625 | LACTATE DEHYDROGENASE (LD), (LDH | 11/1/2001 | $13.09 | 3 |
| K | 83630 | LACTOFERRIN, FECAL; QUALITATIVE | 1/1/2005 | $11.93 | 3 |
| K | 83631 | LACTOFERRIN, FECAL; QUANTITATIVE | 4/1/2006 | NC | 9 |
| K | 83632 | LACTOGEN, HUMAN PLACENTAL (HPL) | 11/1/2001 | $20.67 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 83633 | LACTOSE URINE QUALITATIVE | 11/1/2001 | $5.63 | 3 |
| K | 83634 | LACTOSE URINE; QUANTITATIVE | 11/1/2001 | $11.78 | 3 |
| K | 83655 | LEAD | 11/1/2001 | $12.37 | 3 |
| K | 83661 | FETAL LUNG MATURITY ASSESSMENT; | 11/1/2001 | $22.48 | 3 |
| K | 83662 | LECITHIN-SPHINGOMYELIN RATIO (L/ | 11/1/2001 | $19.34 | 3 |
| K | 83663 | FETAL LUNG MATURITY ASSESSMENT; | 11/1/2001 | $9.67 | 3 |
| K | 83664 | FETAL LUNG MATURITY ASSESSMENT; | 11/1/2001 | $4.83 | 3 |
| K | 83670 | LEUCINE AMINOPEPTIDASE (LAP) | 11/1/2001 | $9.37 | 3 |
| K | 83690 | LIPASE | 11/1/2001 | $7.04 | 3 |
| K | 83695 | LIPOPROTEIN (A) | 4/1/2006 | NC | 9 |
| K | 83698 | LIPOPROTEIN-ASSOCIATED PHOSPHOLI | 1/1/2007 | NC | 9 |
| K | 83700 | LIPOPROTEIN, BLOOD; ELECTROPHORE | 11/1/2006 | NC | 9 |
| K | 83701 | LIPOPROTEIN, BLOOD; HIGH RESOLUT | 11/1/2006 | NC | 9 |
| K | 83704 | LIPOPROTEIN, BLOOD; QUANTITATION | 11/1/2006 | NC | 9 |
| K | 83715 | LIPOPROTEIN, BLOOD; ELECTROPHORE | 1/1/2006 | INVALID | N |
| K | 83716 | LIPOPROTEIN, BLOOD; HIGH RESOLUT | 1/1/2006 | INVALID | N |
| K | 83718 | LIPOPROTEIN, DIRECT MEASUREMENT; | 11/1/2001 | $8.37 | 3 |
| K | 83719 | LIPOPROTEIN, DIRECT MEASUREMENT; | 11/1/2001 | $11.90 | 3 |
| K | 83721 | LIPOPROTEIN, DIRECT MEASUREMENT; | 11/1/2001 | $9.75 | 3 |
| K | 83727 | LUTEINIZING RELEASING FACTOR (LR | 11/1/2001 | $17.58 | 3 |
| K | 83735 | MAGNESIUM | 11/1/2001 | $6.85 | 3 |
| K | 83775 | MALATE DEHYDROGENASE | 11/1/2001 | $7.54 | 3 |
| K | 83785 | MANGANESE | 11/1/2001 | $25.15 | 3 |
| K | 83788 | MASS SPECTROMETRY AND TANDEM MAS | 11/1/2001 | $18.47 | 3 |
| K | 83789 | MASS SPECTROMETRY AND TANDEM MAS | 11/1/2001 | $18.47 | 3 |
| K | 83805 | MEPROBAMATE | 11/1/2001 | $18.03 | 3 |
| K | 83825 | MERCURY, QUANTITATIVE | 11/1/2001 | $16.63 | 3 |
| K | 83835 | METANEPHRINES | 11/1/2001 | $17.32 | 3 |
| K | 83840 | METHADONE | 11/1/2001 | $16.69 | 3 |
| K | 83857 | METHEMALBUMIN | 11/1/2001 | $10.98 | 3 |
| K | 83858 | METHSUXIMIDE | 11/1/2001 | $15.16 | 3 |
| K | 83864 | MUCOPOLYSACCHARIDES, ACID; QUANT | 11/1/2001 | $20.36 | 3 |
| K | 83866 | MUCOPOLYSACCHARIDES ACID URINE; | 11/1/2001 | $10.08 | 3 |
| K | 83872 | MUCIN SYNOVIAL FLUID (ROPES TEST | 11/1/2001 | $5.70 | 3 |
| K | 83873 | MYELIN BASIC PROTEIN, CEREBROSPI | 11/1/2001 | $7.38 | 3 |
| K | 83874 | MYOGLOBIN | 11/1/2001 | $13.20 | 3 |
| K | 83880 | NATRIURETIC PEPTIDE | 1/1/2003 | $25.10 | 3 |
| K | 83883 | NEPHELOMETRY, EACH ANALYTE NOT E | 11/1/2001 | $13.90 | 3 |
| K | 83885 | NICKEL | 11/1/2001 | $25.06 | 3 |
| K | 83887 | NICOTINE | 11/1/2001 | $24.22 | 3 |
| K | 83890 | MOLECULAR DIAGNOSTICS; MOLECULAR | 11/1/2001 | $4.10 | 3 |
| K | 83891 | MOLECULAR DIAGNOSTICS; ISOLATION | 11/1/2001 | $4.10 | 3 |
| K | 83892 | NUCLEAR MOLECULAR DIAGNOSTICS; E | 11/1/2001 | $4.10 | 3 |
| K | 83893 | MOLECULAR DIAGNOSTICS; DOT/SLOT | 11/1/2001 | $4.10 | 3 |
| K | 83894 | NUCLEAR MOLECULAR DIAGNOSTICS; S | 11/1/2001 | $4.10 | 3 |
| K | 83896 | NUCLEAR MOLECULAR DIAGNOSTICS; N | 11/1/2001 | $4.10 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 83897 | MOLECULAR DIAGNOSTICS; NUCLEIC A | 11/1/2001 | $4.10 | 3 |
| K | 83898 | MOLECULAR DIAGNOSTICS; AMPLIFICA | 11/1/2001 | $17.15 | 3 |
| K | 83900 | MOLECULAR DIAGNOSTICS; AMPLIFICA | 1/1/2006 | $34.66 | 3 |
| K | 83901 | MOLECULAR DIAGNOSTICS; AMPLIFICA | 11/1/2001 | $17.15 | 3 |
| K | 83902 | MOLECULAR DIAGNOSTICS; REVERSE T | 11/1/2001 | $8.79 | 3 |
| K | 83903 | MOLECULAR DIAGNOSTICS; MUTATION | 11/1/2001 | $17.15 | 3 |
| K | 83904 | MOLECULAR DIAGNOSTICS; MUTATION | 11/1/2001 | $17.15 | 3 |
| K | 83905 | MOLECULAR DIAGNOSTICS; MUTATION | 11/1/2001 | $17.15 | 3 |
| K | 83906 | MOLECULAR DIAGNOSTICS; MUTATION | 11/1/2001 | $17.15 | 3 |
| K | 83907 | MOLECULAR DIAGNOSTICS; LYSIS OF | 1/1/2006 | $13.81 | 3 |
| K | 83908 | MOLECULAR DIAGNOSTICS; SIGNAL AM | 1/1/2006 | $17.33 | 3 |
| K | 83909 | MOLECULAR DIAGNOSTICS; SEPARATIO | 1/1/2006 | $17.33 | 3 |
| K | 83912 | NUCLEAR MOLECULAR DIAGNOSTICS; I | 5/22/2006 | $4.10 | 3 |
| K | 83913 | MOLECULAR DIAGNOSTICS; RNA STABI | 1/1/2007 | NC | 9 |
| K | 83914 | MUTATION IDENTIFICATION BY ENZYM | 1/1/2006 | $17.33 | 3 |
| K | 83915 | NUCLEOTIDASE 5 | 11/1/2001 | $11.40 | 3 |
| K | 83916 | OLIGOCLONAL IMMUNE (OLIGOCLONAL | 11/1/2001 | $20.56 | 3 |
| K | 83918 | ORGANIC ACIDS; TOTAL, QUANTITATI | 11/1/2001 | $16.84 | 3 |
| K | 83919 | ORGANIC ACIDS; QUALITATIVE, EACH | 11/1/2001 | $16.84 | 3 |
| K | 83921 | ORGANIC ACID, SINGLE, QUANTITATI | 11/1/2001 | $16.84 | 3 |
| K | 83925 | OPIATES, (EG, MORPHINE, MEPERIDI | 11/1/2001 | $19.90 | 3 |
| K | 83930 | OSMOLALITY BLOOD | 11/1/2001 | $6.76 | 3 |
| K | 83935 | OSMOLALITY; URINE | 11/1/2001 | $6.97 | 3 |
| K | 83937 | OSTEOCALCIN (BONE G1A PROTEIN) | 11/1/2001 | $30.53 | 3 |
| K | 83945 | OXALATE | 11/1/2001 | $13.17 | 3 |
| K | 83950 | ONCOPROTEIN, HER-2/NEU | 12/1/2002 | $65.87 | 3 |
| K | 83970 | PARATHORMONE (PARATHYROID HORMON | 11/1/2001 | $42.21 | 3 |
| K | 83986 | PH BODY FLUID EXCEPT BLOOD | 11/1/2001 | $3.66 | 3 |
| K | 83992 | PHENCYCLIDINE (PCP) | 11/1/2001 | $15.03 | 3 |
| K | 84022 | PHENOTHIAZINE | 11/1/2001 | $15.93 | 3 |
| K | 84030 | PHENYLALANINE (PKU), BLOOD | 3/1/1992 | NC | 9 |
| K | 84035 | PHENYLKETONES, QUALITATIVE | 11/1/2001 | $3.74 | 3 |
| K | 84060 | PHOSPHATASE, ACID; TOTAL | 11/1/2001 | $7.55 | 3 |
| K | 84061 | PHOSPHATASE, ACID; FORENSIC EXAM | 11/1/2001 | $8.10 | 3 |
| K | 84066 | PHOSPHATASE, ACID; PROSTATIC | 11/1/2001 | $9.88 | 3 |
| K | 84075 | PHOSPHATASE, ALKALINE; | 11/1/2001 | $5.29 | 3 |
| K | 84078 | PHOSPHATASE ALKALINE BLOOD; HEAT | 11/1/2001 | $7.47 | 3 |
| K | 84080 | PHOSPHATASE, ALKALINE; ISOENZYME | 11/1/2001 | $15.13 | 3 |
| K | 84081 | PHOSPHATIDYLGYCEROL | 11/1/2001 | $16.90 | 3 |
| K | 84085 | PHOSPHOGLUCONATE 6- DEHYDROGENAS | 11/1/2001 | $6.90 | 3 |
| K | 84087 | PHOSPHOHEXOSE ISOMERASE | 11/1/2001 | $10.56 | 3 |
| K | 84100 | PHOSPHORUS INORGANIC (PHOSPHATE) | 11/1/2001 | $4.85 | 3 |
| K | 84105 | PHOSPHORUS (PHOSPHATE); URINE | 11/1/2001 | $5.29 | 3 |
| K | 84106 | PORPHOBILINOGEN URINE QUALITATIV | 11/1/2001 | $4.38 | 3 |
| K | 84110 | PORPHOBILINOGEN URINE; QUANTITAT | 11/1/2001 | $8.64 | 3 |
| K | 84119 | PORPHYRINS, URINE; QUALITATIVE | 11/1/2001 | $8.81 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 84120 | PORPHYRINS, URINE; QUANTITATION | 11/1/2001 | $15.04 | 3 |
| K | 84126 | PORPHYRINS, FECES; QUANTITATIVE | 11/1/2001 | $26.05 | 3 |
| K | 84127 | PORPHYRINS, FECES; QUALITATIVE | 11/1/2001 | $11.91 | 3 |
| K | 84132 | POTASSIUM; SERUM | 11/1/2001 | $4.70 | 3 |
| K | 84133 | POTASSIUM; URINE | 11/1/2001 | $4.40 | 3 |
| K | 84134 | PREALBUMIN | 11/1/2001 | $14.92 | 3 |
| K | 84135 | PREGNANEDIOL | 11/1/2001 | $19.57 | 3 |
| K | 84138 | PREGNANETRIOL | 11/1/2001 | $19.36 | 3 |
| K | 84140 | PREGNENOLONE | 11/1/2001 | $21.15 | 3 |
| K | 84143 | 17-HYDROXYPREGNENOLONE | 11/1/2001 | $23.34 | 3 |
| K | 84144 | PROGESTERONE | 11/1/2001 | $21.33 | 3 |
| K | 84146 | PROLACTIN | 11/1/2001 | $19.82 | 3 |
| K | 84150 | PROSTAGLANDIN, EACH | 11/1/2001 | $25.53 | 3 |
| K | 84152 | PROSTATE SPECIFIC ANTIGEN (PSA); | 11/1/2001 | $18.81 | 3 |
| K | 84153 | PROSTATE SPECIFIC ANTIGEN (PSA) | 11/1/2001 | $18.81 | 3 |
| K | 84154 | PROSTATE SPECIFIC ANTIGEN (PSA); | 11/1/2001 | $18.81 | 3 |
| K | 84155 | PROTEIN; TOTAL, EXCEPT REFRACTOM | 11/1/2001 | $3.74 | 3 |
| K | 84156 | PROTEIN, TOTAL, EXCEPT BY REFRAC | 1/1/2004 | $3.79 | 3 |
| K | 84157 | PROTEIN, TOTAL, EXCEPT BY REFRAC | 1/1/2004 | $3.79 | 3 |
| K | 84160 | PROTEIN TOTAL SERUM; REFRACTOMET | 11/1/2001 | $5.29 | 3 |
| K | 84163 | PREGNANCY-ASSOCIATED PLASMA PROT | 1/1/2005 | $15.56 | 3 |
| K | 84165 | PROTEIN; ELECTROPHORETIC FRACTIO | 7/1/1997 | $15.45 | 3 |
| K | 84166 | PROTEIN; ELECTROPHORETIC FRACTIO | 10/1/2005 | $18.44 | 3 |
| K | 84181 | PROTEIN; WESTERN BLOT, WITH INTE | 7/1/1997 | $24.55 | 3 |
| K | 84182 | PROTEIN; WESTERN BLOT, WITH INTE | 7/1/1997 | $25.95 | 3 |
| K | 84202 | PROTOPORPHYRIN RBC QUANTITATIVE | 10/1/2001 | $14.67 | 3 |
| K | 84203 | PROTOPORPHYRIN RBC; SCREEN | 11/1/2001 | $8.80 | 3 |
| K | 84206 | PROINSULIN | 11/1/2001 | $18.22 | 3 |
| K | 84207 | PYRIDOXAL PHOSPHATE (VITAMIN B-6 | 11/1/2001 | $28.73 | 3 |
| K | 84210 | PYRUVATE | 11/1/2001 | $11.11 | 3 |
| K | 84220 | PYRUVATE KINASE | 11/1/2001 | $9.65 | 3 |
| K | 84228 | QUININE | 11/1/2001 | $11.90 | 3 |
| K | 84233 | RECEPTOR ASSAY; ESTROGEN | 11/1/2001 | $65.87 | 3 |
| K | 84234 | RECEPTOR ASSAY; PROGESTERONE | 11/1/2001 | $66.33 | 3 |
| K | 84235 | RECEPTOR ASSAY; ENDOCRINE OTHER | 11/1/2001 | $53.51 | 3 |
| K | 84238 | RECEPTOR ASSAY; NON-ENDOCRINE (S | 11/1/2001 | $37.39 | 3 |
| K | 84244 | RENIN | 11/1/2001 | $22.50 | 3 |
| K | 84252 | RIBOFLAVIN (VITAMIN B-2) | 11/1/2001 | $20.69 | 3 |
| K | 84255 | SELENIUM | 11/1/2001 | $26.11 | 3 |
| K | 84260 | SEROTONIN | 11/1/2001 | $31.68 | 3 |
| K | 84270 | SEX HORMONE BINDING GLOBULIN (SH | 11/1/2001 | $22.22 | 3 |
| K | 84275 | SIALIC ACID | 11/1/2001 | $13.73 | 3 |
| K | 84285 | SILICA | 11/1/2001 | $24.09 | 3 |
| K | 84295 | SODIUM; SERUM | 11/1/2001 | $4.92 | 3 |
| K | 84300 | SODIUM; URINE | 11/1/2001 | $4.97 | 3 |
| K | 84302 | SODIUM; OTHER SOURCE | 1/1/2003 | $5.02 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 84305 | SOMATOMEDIN | 11/1/2001 | $21.74 | 3 |
| K | 84307 | SOMATOSTATIN | 11/1/2001 | $18.70 | 3 |
| K | 84311 | SPECTROPHOTOMETRY, ANALYTE NOT E | 11/1/2001 | $7.15 | 3 |
| K | 84315 | SPECIFIC GRAVITY (EXCEPT URINE) | 11/1/2001 | $2.56 | 3 |
| K | 84375 | SUGARS CHROMATOGRAPHIC TLC OR PA | 11/1/2001 | $8.95 | 3 |
| K | 84376 | SUGARS (MON-, DI, AND OLIGOSACCH | 11/1/2001 | $5.63 | 3 |
| K | 84377 | SUGARS (MON-, DI, AND OLIGOSACCH | 11/1/2001 | $5.63 | 3 |
| K | 84378 | SUGARS (MON-, DI, AND OLIGOSACCH | 11/1/2001 | $11.78 | 3 |
| K | 84379 | SUGARS (MON-, DI, AND OLIGOSACCH | 11/1/2001 | $11.78 | 3 |
| K | 84392 | SULFATE, URINE | 11/1/2001 | $4.85 | 3 |
| K | 84402 | TESTOSTERONE; FREE | 11/1/2001 | $26.04 | 3 |
| K | 84403 | TESTOSTERONE; TOTAL | 11/1/2001 | $26.40 | 3 |
| K | 84425 | THIAMINE (VITAMIN B-1) | 11/1/2001 | $21.72 | 3 |
| K | 84430 | THIOCYANATE | 11/1/2001 | $8.95 | 3 |
| K | 84432 | THYROGLOBULIN | 11/1/2001 | $16.43 | 3 |
| K | 84436 | THYROXINE; TOTAL | 11/1/2001 | $7.03 | 3 |
| K | 84437 | THYROXINE; REQUIRING ELUTION (EG | 11/1/2001 | $6.62 | 3 |
| K | 84439 | THYROXINE; FREE | 11/1/2001 | $9.22 | 3 |
| K | 84442 | THYROXINE BINDING GLOBULIN (TBG) | 11/1/2001 | $15.13 | 3 |
| K | 84443 | THYROID STIMULATING HORMONE (TSH | 11/1/2001 | $17.18 | 3 |
| K | 84445 | THYROID STIMULATING IMMUNE GLOBU | 11/1/2001 | $52.01 | 3 |
| K | 84446 | TOCOPHEROL ALPHA (VITAMIN E) | 11/1/2001 | $14.50 | 3 |
| K | 84449 | TRANSCORTIN (CORTISOL BINDING GL | 11/1/2001 | $18.40 | 3 |
| K | 84450 | TRANSFERASSE; ASPARTATE AMINO (A | 11/1/2001 | $5.28 | 3 |
| K | 84460 | TRANSFERASE; ALANINE AMINO (ALT) | 11/1/2001 | $5.42 | 3 |
| K | 84466 | TRANSFERRIN | 11/1/2001 | $13.06 | 3 |
| K | 84478 | TRIGLYCERIDES | 11/1/2001 | $5.88 | 3 |
| K | 84479 | THYROID HORMONE (T3 OR T4) UPTAK | 11/1/2001 | $6.62 | 3 |
| K | 84480 | TRIIODOTHYRONINE T3; TOTAL (TT-3 | 11/1/2001 | $14.50 | 3 |
| K | 84481 | TRIDOTHYRONINE (T-3); FREE | 11/1/2001 | $17.32 | 3 |
| K | 84482 | TRIDOTHYRONINE (T-3); REVERSE | 11/1/2001 | $16.12 | 3 |
| K | 84484 | TROPONIN | 11/1/2001 | $10.06 | 3 |
| K | 84485 | TRYPSIN DUODENAL FLUID | 11/1/2001 | $7.67 | 3 |
| K | 84488 | TRYPSIN; FECES, QUALITATIVE | 11/1/2001 | $7.47 | 3 |
| K | 84490 | TRYPSIN; FECES, QUANTITATIVE, 24 | 11/1/2001 | $7.78 | 3 |
| K | 84510 | TYROSINE | 11/1/2001 | $10.64 | 3 |
| K | 84512 | TROPONIN, QUALITATIVE | 11/1/2001 | $7.87 | 3 |
| K | 84520 | UREA NITROGEN; QUANTITATIVE | 11/1/2001 | $4.03 | 3 |
| K | 84525 | UREA NITROGEN; SEMIQUANTITATIVE | 11/1/2001 | $3.23 | 3 |
| K | 84540 | UREA NITROGEN URINE | 11/1/2001 | $4.85 | 3 |
| K | 84545 | UREA NITROGEN CLEARANCE | 11/1/2001 | $6.75 | 3 |
| K | 84550 | URIC ACID; BLOOD | 11/1/2001 | $4.63 | 3 |
| K | 84560 | URIC ACID; OTHER SOURCE | 11/1/2001 | $4.85 | 3 |
| K | 84577 | UROBILINOGEN FECES QUANTITATIVE | 11/1/2001 | $3.90 | 3 |
| K | 84578 | UROBILINOGEN URINE QUALITATIVE | 11/1/2001 | $3.32 | 3 |
| K | 84580 | UROBILINOGEN URINE; QUANTITATIVE | 11/1/2001 | $7.26 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 84583 | UROBILINOGEN URINE; SEMIQUANTITA | 11/1/2001 | $5.14 | 3 |
| K | 84585 | VANILLYLMANDELIC ACID (VMA) URIN | 11/1/2001 | $15.85 | 3 |
| K | 84586 | VASOACTIVE INTESTINAL PEPTIDE (V | 11/1/2001 | $36.13 | 3 |
| K | 84588 | VASOPRESSIN (ANTIDIURETIC HORMON | 11/1/2001 | $34.71 | 3 |
| K | 84590 | VITAMIN A | 11/1/2001 | $11.85 | 3 |
| K | 84591 | VITAMIN, NOT OTHERWISE SPECIFIED | 11/1/2001 | $11.85 | 3 |
| K | 84597 | VITAMIN K | 11/1/2001 | $14.02 | 3 |
| K | 84600 | VOLATILES (EG, ACETIC ANHYDRIDE, | 11/1/2001 | $16.44 | 3 |
| K | 84620 | XYLOSE ABSORPTION TEST, BLOOD AN | 11/1/2001 | $12.11 | 3 |
| K | 84630 | ZINC | 11/1/2001 | $11.65 | 3 |
| K | 84681 | C-PEPTIDE | 11/1/2001 | $21.28 | 3 |
| K | 84702 | GONADOTROPIN, CHORIONIC (HCG); Q | 11/1/2001 | $15.39 | 3 |
| K | 84703 | GONADOTROPIN CHORIONIC QUALITAVE | 11/1/2001 | $7.68 | 3 |
| K | 84830 | OVULATION TESTS, BY VISUAL COLOR | 2/22/1994 | NC | 9 |
| K | 84999 | UNLISTED CHEMISTRY PROCEDURE | 4/1/1982 | $0.01 | 5 |
| K | 85002 | BLEEDING TIME | 11/1/2001 | $4.60 | 3 |
| K | 85004 | BLOOD COUNT; AUTOMATED DIFFERENT | 1/1/2003 | $6.69 | 3 |
| K | 85007 | BLOOD COUNT; BLOOD SMEAR, MICROS | 7/1/1997 | $4.06 | 3 |
| K | 85008 | BLOOD COUNT; BLOOD SMEAR, MICROS | 11/1/2001 | $3.52 | 3 |
| K | 85009 | BLOOD COUNT; MANUAL DIFFERENTIAL | 11/1/2001 | $3.80 | 3 |
| K | 85013 | BLOOD COUNT; SPUN MICROHEMATOCRI | 11/1/2001 | $2.42 | 3 |
| K | 85014 | BLOOD COUNT; HEMATOCRIT (HCT) | 11/1/2001 | $2.42 | 3 |
| K | 85018 | BLOOD COUNT; HEMOGLOBIN (HGB) | 11/1/2001 | $2.42 | 3 |
| K | 85021 | BLOOD COUNT; HEMOGRAM AUTOMATED | 7/1/2003 | INVALID | N |
| K | 85022 | BLOOD COUNT HEMOGRAM AUTOMATED A | 7/1/2003 | INVALID | N |
| K | 85023 | BLOOD COUNT HEMOGRAM AND PLATELE | 7/1/2003 | INVALID | N |
| K | 85024 | BLOOD COUNT HEMOGRAM AND PLATELE | 7/1/2003 | INVALID | N |
| K | 85025 | BLOOD COUNT; COMPLETE (CBC), AUT | 11/1/2001 | $7.95 | 3 |
| K | 85027 | BLOOD COUNT; COMPLETE (CBC), AUT | 11/1/2001 | $6.62 | 3 |
| K | 85031 | BLOOD COUNT HEMOGRAM MANUAL COMP | 7/1/2003 | INVALID | N |
| K | 85032 | BLOOD COUNT; MANUAL CELL COUNT ( | 1/1/2003 | $4.45 | 3 |
| K | 85041 | BLOOD COUNT; RED BLOOD CELL (RBC | 11/1/2001 | $3.08 | 3 |
| K | 85044 | BLOOD COUNT; RETICULOCYTE, MANUA | 11/1/2001 | $4.40 | 3 |
| K | 85045 | BLOOD COUNT; RETICULOCYTE, AUTOM | 11/1/2001 | $4.10 | 3 |
| K | 85046 | BLOOD COUNT; RETICULOCYTES, AUTO | 11/1/2001 | $5.70 | 3 |
| K | 85048 | BLOOD COUNT; LEUKOCYTE (WBC), AU | 11/1/2001 | $2.60 | 3 |
| K | 85049 | BLOOD COUNT; PLATELET, AUTOMATED | 1/1/2003 | $4.63 | 3 |
| K | 85055 | RETICULATED PLATELET ASSAY | 1/1/2004 | $18.71 | 3 |
| K | 85060 | BLOOD SMEAR, PERIPHERAL, INTERPR | 1/1/2007 | $16.87 | 3 |
| K | 85095 | BONE MARROW; ASPIRATION ONLY | 4/1/2002 | INVALID | N |
| K | 85097 | BONE MARROW, SMEAR INTERPRETATIO | 1/1/2007 | $75.26 | 3 |
| K | 85102 | BONE MARROW BIOPSY, NEEDLE OR TR | 4/1/2002 | INVALID | N |
| K | 85130 | CHROMOGENIC SUBSTRATE ASSAY | 11/1/2001 | $12.17 | 3 |
| K | 85170 | CLOT RETRACTION | 11/1/2001 | $3.70 | 3 |
| K | 85175 | CLOT LYSIS TIME WHOLE BLOOD DILU | 11/1/2001 | $4.65 | 3 |
| K | 85210 | CLOTTING FACTOR II PROTHROMBIN S | 11/1/2001 | $13.28 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 85220 | CLOTTING; FACTOR V (ACG OR PROAC | 11/1/2001 | $16.38 | 3 |
| K | 85230 | CLOTTING; FACTOR VII (PROCONVERT | 11/1/2001 | $16.38 | 3 |
| K | 85240 | CLOTTING; FACTOR VIII (AHG) ONE | 11/1/2001 | $16.38 | 3 |
| K | 85244 | CLOTTING; FACTOR VIII RELATED AN | 11/1/2001 | $20.88 | 3 |
| K | 85245 | CLOTTING; FACTOR VIII, VW FACTOR | 11/1/2001 | $23.47 | 3 |
| K | 85246 | CLOTTING; FACTOR VIII, VW FACTOR | 11/1/2001 | $23.47 | 3 |
| K | 85247 | CLOTTING; FACTOR VIII, VON WILLE | 11/1/2001 | $23.47 | 3 |
| K | 85250 | CLOTTING; FACTOR IX (PTC OR CHRI | 11/1/2001 | $16.38 | 3 |
| K | 85260 | CLOTTING; FACTOR X (STUART-PROWE | 11/1/2001 | $16.38 | 3 |
| K | 85270 | CLOTTING; FACTOR XI (PTA) | 11/1/2001 | $16.38 | 3 |
| K | 85280 | CLOTTING; FACTOR XII (HAGEMAN) | 11/1/2001 | $19.79 | 3 |
| K | 85290 | CLOTTING; FACTOR XIII (FIBRIN ST | 11/1/2001 | $16.38 | 3 |
| K | 85291 | CLOTTING; FACTOR XIII (FIBRIN ST | 11/1/2001 | $9.09 | 3 |
| K | 85292 | CLOTTING; PREKALLIKREIN ASSAY (F | 11/1/2001 | $19.37 | 3 |
| K | 85293 | CLOTTING; HIGH MOLECULAR WEIGHT | 11/1/2001 | $19.37 | 3 |
| K | 85300 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $12.12 | 3 |
| K | 85301 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $11.06 | 3 |
| K | 85302 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $12.29 | 3 |
| K | 85303 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $14.14 | 3 |
| K | 85305 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $11.85 | 3 |
| K | 85306 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $15.67 | 3 |
| K | 85307 | ACTIVATED PROTEIN C (APC) RESIST | 11/1/2001 | $15.67 | 3 |
| K | 85335 | FACTOR INHIBITOR TEST | 11/1/2001 | $13.17 | 3 |
| K | 85337 | THROMBOMODULIN | 11/1/2001 | $10.66 | 3 |
| K | 85345 | COAGULATION TIME LEE AND WHITE | 11/1/2001 | $4.40 | 3 |
| K | 85347 | COAGULATION TIME; ACTIVATED | 11/1/2001 | $3.23 | 3 |
| K | 85348 | COAGULATION TIME; OTHER METHODS | 11/1/2001 | $3.80 | 3 |
| K | 85360 | EUGLOBULIN LYSIS | 11/1/2001 | $8.59 | 3 |
| K | 85362 | FIBRIN(OGEN) DEGRADATION (SPLIT) | 11/1/2001 | $6.56 | 3 |
| K | 85366 | FIBRIN(OGEN) DEGRADATION (SPLIT) | 11/1/2001 | $8.81 | 3 |
| K | 85370 | FIBRIN(OGEN) DEGRADATION (SPLIT) | 11/1/2001 | $11.62 | 3 |
| K | 85378 | FIBRIN DEGRADATION PRODUCTS, D-D | 11/1/2001 | $7.30 | 3 |
| K | 85379 | FIBRIN DEGRADATION PRODUCTS, D-D | 11/1/2001 | $10.40 | 3 |
| K | 85380 | FIBRIN DEGRADATION PRODUCTS, D-D | 1/1/2003 | $10.52 | 3 |
| K | 85384 | FIBRINOGEN; ACTIVITY | 11/1/2001 | $8.69 | 3 |
| K | 85385 | FIBRINOGEN; ANTIGEN | 11/1/2001 | $8.69 | 3 |
| K | 85390 | FIBRINOLYSINS OR COAGULOPATHY SC | 7/1/1997 | $7.08 | 3 |
| K | 85396 | COAGULATION/FIBRINOLYSIS ASSAY, | 1/1/2007 | $14.79 | 3 |
| K | 85400 | FIBRINOLYTIC FACTORS AND INHIBIT | 11/1/2001 | $9.04 | 3 |
| K | 85410 | FIBRINOLYTIC MECHANISMS ALPHA-2 | 11/1/2001 | $7.89 | 3 |
| K | 85415 | FIBRINOLYTIC FACTORS AND INHIBIT | 11/1/2001 | $17.58 | 3 |
| K | 85420 | FIBRINOLYTIC MECHANISMS; PLASMIN | 11/1/2001 | $6.69 | 3 |
| K | 85421 | FIBRINOLYTIC MECHANISMS; PLASMIN | 11/1/2001 | $10.41 | 3 |
| K | 85441 | HEINZ BODIES DIRECT | 11/1/2001 | $4.30 | 3 |
| K | 85445 | HEINZ BODIES; INDUCED ACETYL PHE | 11/1/2001 | $6.97 | 3 |
| K | 85460 | HEMOGLOBIN OR RBCS, FETAL, FOR F | 11/1/2001 | $7.91 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 85461 | HEMOGLOBIN OR RBCS, FETAL, FOR F | 11/1/2001 | $6.79 | 3 |
| K | 85475 | HEMOLYSIN, ACID | 11/1/2001 | $9.07 | 3 |
| K | 85520 | HEPARIN ASSAY | 11/1/2001 | $13.39 | 3 |
| K | 85525 | HEPARIN NEUTRALIZATION | 11/1/2001 | $12.12 | 3 |
| K | 85530 | HEPARIN-PROTAMINE TOLERANCE TEST | 11/1/2001 | $14.50 | 3 |
| K | 85535 | IRON STAIN (RBC OR BONE MARROW S | 4/1/2002 | INVALID | N |
| K | 85536 | IRON STAIN, PERIPHERAL BLOOD | 11/1/2001 | $6.62 | 3 |
| K | 85540 | LEUKOCYTE ALKALINE PHOSPHATASE W | 11/1/2001 | $8.79 | 3 |
| K | 85547 | MECHANICAL FRAGILITY RBC | 11/1/2001 | $8.79 | 3 |
| K | 85549 | MURAMIDASE | 11/1/2001 | $19.18 | 3 |
| K | 85555 | OSMOTIC FRAGILITY, RBC; UNINCUBA | 11/1/2001 | $6.84 | 3 |
| K | 85557 | OSMOTIC FRAGILITY, RBC; INCUBATE | 11/1/2001 | $6.85 | 3 |
| K | 85576 | PLATELET; AGGREGATION (IN VITRO) | 7/1/1997 | $29.50 | 3 |
| K | 85585 | PLATELET; ESTIMATION ON SMEAR ON | 7/1/2003 | INVALID | N |
| K | 85590 | PLATELET; MANUAL COUNT | 7/1/2003 | INVALID | N |
| K | 85595 | PLATELET; AUTOMATED COUNT | 7/1/2003 | INVALID | N |
| K | 85597 | PLATELET NEUTRALIZATION | 11/1/2001 | $18.38 | 3 |
| K | 85610 | PROTHROMBIN TIME | 11/1/2001 | $4.02 | 3 |
| K | 85611 | PROTHROMBIN TIME; SUBSTITUTION, | 11/1/2001 | $4.03 | 3 |
| K | 85612 | RUSSELL VIPER VENOM TIME (INCLUD | 11/1/2001 | $6.56 | 3 |
| K | 85613 | RUSSELL VIPER VENOM TIME (INCLUD | 11/1/2001 | $6.56 | 3 |
| K | 85635 | REPTILASE TEST | 11/1/2001 | $10.07 | 3 |
| K | 85651 | SEDIMENTATION RATE, ERYTHROCYTE; | 11/1/2001 | $3.63 | 3 |
| K | 85652 | SEDIMENTATION RATE, ERYTHROCYTE; | 11/1/2001 | $2.76 | 3 |
| K | 85660 | SICKLING OF RBC REDUCTION SLIDE | 11/1/2001 | $5.65 | 3 |
| K | 85670 | THROMBIN TIME; PLASMA | 11/1/2001 | $5.91 | 3 |
| K | 85675 | THROMBIN TIME; TITER | 10/1/2001 | $7.01 | 3 |
| K | 85705 | THROMBOPLASTIN INHIBITION; TISSU | 11/1/2001 | $9.85 | 3 |
| K | 85730 | THROMBOPLASTIN TIME PARTIAL (PTT | 11/1/2001 | $6.14 | 3 |
| K | 85732 | THROMBOPLASTIN TIME, PARTIAL (PT | 11/1/2001 | $6.62 | 3 |
| K | 85810 | VISCOSITY | 11/1/2001 | $11.94 | 3 |
| K | 85999 | UNLISTED HEMATOLOGY PROCEDURE | 10/1/2001 | $0.01 | 5 |
| K | 86000 | AGGLUTININS, FEBRILE, EACH ANTIG | 11/1/2001 | $7.14 | 3 |
| K | 86001 | ALLERGEN SPECIFIC IGG QUANTITATI | 11/1/2001 | $5.34 | 3 |
| K | 86003 | ALLERGEN SPECIFIC IGE; QUANTITAT | 11/1/2001 | $5.34 | 3 |
| K | 86005 | ALLERGEN SPECIFIC IGE; QUALITATI | 11/1/2001 | $8.15 | 3 |
| K | 86021 | ANTIBODY IDENTIFICATION LEUKOCYT | 11/1/2001 | $15.39 | 3 |
| K | 86022 | ANTIBODY IDENTIFICATION; PLATELE | 11/1/2001 | $18.78 | 3 |
| K | 86023 | ANTIBODY IDENTIFICATION; PLATELE | 11/1/2001 | $12.74 | 3 |
| K | 86038 | ANTINUCLEAR ANTIBODIES (ANA); | 11/1/2001 | $12.36 | 3 |
| K | 86039 | ANTINUCLEAR ANTIBODIES (ANA); TI | 11/1/2001 | $11.42 | 3 |
| K | 86060 | ANTISTREPTOLYSIN O TITER | 11/1/2001 | $7.47 | 3 |
| K | 86063 | ANTISTREPTOLYSIN O; SCREEN | 11/1/2001 | $5.91 | 3 |
| K | 86064 | B CELLS, TOTAL COUNT | 1/1/2006 | INVALID | N |
| K | 86077 | BLOOD BANK PHYSICIAN SERVICES; D | 1/1/2007 | $35.29 | 3 |
| K | 86078 | BLOOD BANK PHYSICIAN SERVICES IN | 1/1/2007 | $37.11 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 86079 | BLOOD BANK PHYSICIAN SERVICES AU | 1/1/2007 | $36.85 | 3 |
| K | 86140 | C-REACTIVE PROTEIN | 11/1/2001 | $5.29 | 3 |
| K | 86141 | C-REACTIVE PROTEIN; HIGH SENSITI | 12/1/2002 | $13.24 | 3 |
| K | 86146 | BETA 2 BLYCOPROTEIN I ANTIBODY, | 11/1/2001 | $26.02 | 3 |
| K | 86147 | CARDIOLIPIN (PHOSPHOLIPID) ANTIB | 11/1/2001 | $26.02 | 3 |
| K | 86148 | ANTI-PHOSPHATIDYLSERINE (PHOSPHO | 11/1/2001 | $16.43 | 3 |
| K | 86155 | CHEMOTAXIS ASSAY SPECIFY METHOD | 11/1/2001 | $16.34 | 3 |
| K | 86156 | COLD AGGLUTININ; SCREEN | 11/1/2001 | $6.85 | 3 |
| K | 86157 | COLD AGGLUTININ; TITER | 11/1/2001 | $8.24 | 3 |
| K | 86160 | COMPLEMENT; ANTIGEN, EACH COMPON | 11/1/2001 | $12.28 | 3 |
| K | 86161 | COMPLEMENT; FUNCTIONAL ACTIVITY, | 11/1/2001 | $12.28 | 3 |
| K | 86162 | COMPLEMENT; TOTAL HEMOLYTIC (CH5 | 11/1/2001 | $20.78 | 3 |
| K | 86171 | COMPLEMENT FIXATION TESTS, EACH | 11/1/2001 | $10.25 | 3 |
| K | 86185 | COUNTERIMMUNOELECTROPHORESIS, EA | 11/1/2001 | $9.15 | 3 |
| K | 86200 | CYCLIC CITRULLINATED PEPTIDE (CC | 1/1/2006 | $13.39 | 3 |
| K | 86215 | DEOXYRIBONUCLEASE ANTIBODY | 11/1/2001 | $13.56 | 3 |
| K | 86225 | DEOXYRIBONUCLEIC ACID (DNA) ANTI | 11/1/2001 | $14.05 | 3 |
| K | 86226 | DEOXYRIBONUCLEIC ACID (DNA) ANTI | 11/1/2001 | $12.38 | 3 |
| K | 86235 | EXTRACTABLE NUCLEAR ANTIGEN, ANT | 11/1/2001 | $16.38 | 3 |
| K | 86243 | FC RECEPTOR | 11/1/2001 | $20.99 | 3 |
| K | 86255 | FLUORESCENT ANTIBODY; SCREEN, EA | 7/1/1997 | $15.33 | 3 |
| K | 86256 | FLUORESCENT ANTIBODY; TITER, EAC | 7/1/1997 | $16.55 | 3 |
| K | 86277 | GROWTH HORMONE, HUMAN (HGH), ANT | 11/1/2001 | $16.10 | 3 |
| K | 86280 | HEMAGGLUTINATION INHIBITION TEST | 11/1/2001 | $8.37 | 3 |
| K | 86294 | IMMUNOASSAY FOR TUMOR ANTIGEN, Q | 6/1/2006 | $21.28 | 3 |
| K | 86300 | IMMUNOASSAY FOR TUMOR ANTIGEN, Q | 11/1/2001 | $21.28 | 3 |
| K | 86301 | IMMUNOASSAY FOR TUMOR ANTIGEN, Q | 11/1/2001 | $21.28 | 3 |
| K | 86304 | IMMUNOASSAY FOR TUMOR ANTIGEN, Q | 11/1/2001 | $21.28 | 3 |
| K | 86308 | HETEROPHILE ANTIBODIES; SCREENIN | 11/1/2001 | $5.29 | 3 |
| K | 86309 | HETEROPHILE ANTIBODIES; TITER | 11/1/2001 | $6.62 | 3 |
| K | 86310 | HETEROPHILE ANTIBODIES; TITERS A | 11/1/2001 | $7.54 | 3 |
| K | 86316 | IMMUNOASSAY FOR TUMOR ANTIGEN; O | 11/1/2001 | $21.28 | 3 |
| K | 86317 | IMMUNOASSAY FOR INFECTIOUS AGENT | 11/1/2001 | $15.33 | 3 |
| K | 86318 | IMMUNOASSAY FOR INFECTIOUS AGENT | 11/1/2001 | $13.24 | 3 |
| K | 86320 | IMMUNOELECTROPHORESIS; SERUM | 7/1/1997 | $30.77 | 3 |
| K | 86325 | IMMUNOELECTROPHORESIS; OTHER FLU | 7/1/1997 | $30.69 | 3 |
| K | 86327 | IMMUNOELECTROPHORISIS; CROSSED ( | 7/1/1997 | $31.15 | 3 |
| K | 86329 | IMMUNODIFFUSION, NOT ELSEWHERE S | 11/1/2001 | $14.36 | 3 |
| K | 86331 | IMMUNODIFFUSION; GEL DIFFUSION, | 11/1/2001 | $12.25 | 3 |
| K | 86332 | IMMUNE COMPLEX ASSAY | 11/1/2001 | $24.92 | 3 |
| K | 86334 | IMMUNOFIXATION ELECTROPHORESIS; | 7/1/1997 | $30.66 | 3 |
| K | 86335 | IMMUNOFIXATION ELECTROPHORESIS; | 1/1/2005 | $30.34 | 3 |
| K | 86336 | INHIBIN A | 12/1/2002 | $15.29 | 3 |
| K | 86337 | INSULIN ANTIBODIES | 11/1/2001 | $21.90 | 3 |
| K | 86340 | INTRINSIC FACTOR ANTIBODIES | 11/1/2001 | $15.41 | 3 |
| K | 86341 | ISLET CELL ANTIBODY | 11/1/2001 | $20.23 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 86343 | LEUKOCYTE HISTAMINE RELEASE TEST | 11/1/2001 | $12.74 | 3 |
| K | 86344 | LEUKOCYTE PHAGOCYTOSIS | 11/1/2001 | $8.17 | 3 |
| K | 86353 | LYMPHOCYTE TRANSFORMATION, MITOG | 11/1/2001 | $50.14 | 3 |
| K | 86355 | B CELLS, TOTAL COUNT | 1/1/2006 | $39.00 | 3 |
| K | 86357 | NATURAL KILLER (NK) CELLS, TOTAL | 1/1/2006 | $39.00 | 3 |
| K | 86359 | T CELLS; TOTAL COUNT | 11/1/2001 | $38.58 | 3 |
| K | 86360 | T CELLS; T4 AND T8, INCLUDING RA | 11/1/2001 | $48.05 | 3 |
| K | 86361 | T CELLS; ABSOLUTE CD4 COUNT | 11/1/2001 | $18.50 | 3 |
| K | 86367 | STEM CELLS (IE, CD34), TOTAL COU | 1/1/2006 | $39.00 | 3 |
| K | 86376 | MICROSOMAL ANTIBODIES (EG, THYRO | 11/1/2001 | $14.88 | 3 |
| K | 86378 | MIGRATION INHIBITORY FACTOR TEST | 11/1/2001 | $20.14 | 3 |
| K | 86379 | NATURAL KILLER (NK) CELLS, TOTAL | 1/1/2006 | INVALID | N |
| K | 86382 | NEUTRALIZATION TEST VIRAL | 11/1/2001 | $17.29 | 3 |
| K | 86384 | NITROBLUE TETRAZOLIUM DYE TEST ( | 11/1/2001 | $11.65 | 3 |
| K | 86403 | PARTICLE AGGLUTINATION; SCREEN, | 11/1/2001 | $10.42 | 3 |
| K | 86406 | PARTICLE AGGLUTINATION; TITER, E | 11/1/2001 | $10.88 | 3 |
| K | 86430 | RHEUMATOID FACTOR; QUALITATIVE | 11/1/2001 | $5.81 | 3 |
| K | 86431 | RHEUMATOID FACTOR; QUANTITATIVE | 11/1/2001 | $5.81 | 3 |
| K | 86480 | TUBERCULOSIS TEST, CELL MEDIATED | 11/1/2006 | NC | 9 |
| K | 86485 | SKIN TEST; CANDIDA | 10/1/2001 | $27.75 | 3 |
| K | 86490 | SKIN TEST; COCCIDIOIDOMYCOSIS | 1/1/2007 | $8.04 | 3 |
| K | 86510 | SKIN TEST; HISTOPLASMOSIS | 1/1/2007 | $8.82 | 3 |
| K | 86580 | SKIN TEST; TUBERCULOSIS INTRADER | 1/1/2007 | $7.01 | 3 |
| K | 86585 | SKIN TEST; TUBERCULOSIS TINE TES | 1/1/2006 | INVALID | N |
| K | 86586 | SKIN TEST; UNLISTED ANTIGEN, EAC | 10/1/2001 | $15.33 | 3 |
| K | 86587 | STEM CELLS (IE, CD34), TOTAL COU | 1/1/2006 | INVALID | N |
| K | 86590 | STREPTOKINASE ANTIBODY | 11/1/2001 | $11.28 | 3 |
| K | 86592 | SYPHILIS TEST; QUALITATIVE (EG, | 11/1/2001 | $4.37 | 3 |
| K | 86593 | SYPHILIS TEST; QUANTITATIVE | 11/1/2001 | $4.51 | 3 |
| K | 86602 | ANTIBODY; ACTINOMYCES | 11/1/2001 | $10.40 | 3 |
| K | 86603 | ANTIBODY; ADENOVIRUS | 11/1/2001 | $13.16 | 3 |
| K | 86606 | ANTIBODY; ASPIRGILLUS | 11/1/2001 | $15.39 | 3 |
| K | 86609 | ANTIBODY; BACTERIUM, NOT ELSEWHE | 11/1/2001 | $13.18 | 3 |
| K | 86611 | BARTONELLA | 11/1/2001 | $10.40 | 3 |
| K | 86612 | ANTIBODY; BLASTOMYCES | 11/1/2001 | $13.19 | 3 |
| K | 86615 | ANTIBODY; BORDETELLA | 11/1/2001 | $13.49 | 3 |
| K | 86617 | ANTIBODY; BORRELIA BURGDORFERI ( | 11/1/2001 | $15.84 | 3 |
| K | 86618 | ANTIBODY; BORELLIA BUFGDORFERI ( | 11/1/2001 | $17.42 | 3 |
| K | 86619 | ANTIBODY; BORRELIA (RELAPSING FE | 11/1/2001 | $13.68 | 3 |
| K | 86622 | ANTIBODY; BRUCELLA | 11/1/2001 | $9.14 | 3 |
| K | 86625 | ANTIBODY; CAMPYLOBACTER | 11/1/2001 | $13.42 | 3 |
| K | 86628 | ANTIBODY; CANDIDA | 11/1/2001 | $12.28 | 3 |
| K | 86631 | ANTIBODY; CHLAMYDIA | 11/1/2001 | $12.10 | 3 |
| K | 86632 | ANTIBODY; CHLAMYDIA, IGM | 11/1/2001 | $12.99 | 3 |
| K | 86635 | ANTIBODY; COCCIDIOIDES | 11/1/2001 | $11.73 | 3 |
| K | 86638 | ANTIBODY; COXIELLA BRUNETII (Q F | 11/1/2001 | $12.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 86641 | ANTIBODY; CRYPTOCOCCUS | 11/1/2001 | $14.74 | 3 |
| K | 86644 | ANTIBODY; CYTOMEGALOVIRUS (CMV) | 11/1/2001 | $14.72 | 3 |
| K | 86645 | ANTIBODY; CYTOMEGALOVIRUS (CMV), | 11/1/2001 | $17.23 | 3 |
| K | 86648 | ANTIBODY; DIPTHERIA | 11/1/2001 | $15.55 | 3 |
| K | 86651 | ANTIBODY; ENCEPHALITIS, CALIFORN | 11/1/2001 | $13.49 | 3 |
| K | 86652 | ANTIBODY; ENCEPHALITIS, EASTERN | 11/1/2001 | $13.49 | 3 |
| K | 86653 | ANTIBODY; ENCEPHALITIS, ST. LOUI | 11/1/2001 | $13.49 | 3 |
| K | 86654 | ANTIBODY; ENCEPHALITIS, WESTERN | 11/1/2001 | $13.49 | 3 |
| K | 86658 | ANTIBODY; ENTEROVIRUS (EG, COXSA | 11/1/2001 | $13.33 | 3 |
| K | 86663 | ANTIBODY; EPSTEIN-BARR (EB) VIRU | 11/1/2001 | $13.42 | 3 |
| K | 86664 | ANTIBODY; EPSTEIN-BARR (EB) VIRU | 11/1/2001 | $15.64 | 3 |
| K | 86665 | ANTIBODY; EPSTEIN-BARR (EB) VIRU | 11/1/2001 | $18.55 | 3 |
| K | 86666 | EHRLICHIA | 11/1/2001 | $10.40 | 3 |
| K | 86668 | ANTIBODY; FRANCISELLA TULARENSIS | 11/1/2001 | $10.64 | 3 |
| K | 86671 | ANTIBODY; FUNGUS, NOT ELSEWHERE | 11/1/2001 | $12.54 | 3 |
| K | 86674 | ANTIBODY; GIARDIA LAMBLIA | 11/1/2001 | $15.05 | 3 |
| K | 86677 | ANTIBODY; HELICOBACTER PYLORI | 11/1/2001 | $14.84 | 3 |
| K | 86682 | ANTIBODY; HELMINTH, NOT ELSEWHER | 11/1/2001 | $13.30 | 3 |
| K | 86683 | HEMOGLOBIN, FECAL | 4/1/2002 | INVALID | N |
| K | 86684 | ANTIBODY; HEMOPHILUS INFLUENZA | 11/1/2001 | $16.21 | 3 |
| K | 86687 | ANTIBODY; HTLV I | 11/1/2001 | $8.58 | 3 |
| K | 86688 | ANTIBODY; HTLV-II | 11/1/2001 | $14.33 | 3 |
| K | 86689 | ANTIBODY; HTLV OR HIV ANTIBODY, | 11/1/2001 | $19.80 | 3 |
| K | 86692 | ANTIBODY; HEPATITIS, DELTA AGENT | 11/1/2001 | $17.55 | 3 |
| K | 86694 | ANTIBODY; HERPES SIMPLEX, NON-SP | 11/1/2001 | $14.72 | 3 |
| K | 86695 | ANTIBODY; HERPES SIMPLEX, TYPE I | 11/1/2001 | $13.49 | 3 |
| K | 86696 | HERPES SIMPLEX, TYPE 2 | 3/1/2003 | $25.00 | 3 |
| K | 86698 | ANTIBODY; HISTOPLASMA | 11/1/2001 | $12.79 | 3 |
| K | 86701 | ANTIBODY; HIV-1 | 11/1/2001 | $9.09 | 3 |
| K | 86702 | ANTIBODY; HIV-2 | 11/1/2001 | $13.83 | 3 |
| K | 86703 | ANTIBODY; HIV-1 AND HIV-2, SINGL | 11/1/2001 | $14.03 | 3 |
| K | 86704 | HEPATITIS B CORE ANTIBODY (HBCAB | 11/1/2001 | $12.33 | 3 |
| K | 86705 | HEPATITIS B CORE ANTIBODY (HBCAB | 11/1/2001 | $12.04 | 3 |
| K | 86706 | HEPATITIS B SURFACE ANTIBODY (HB | 11/1/2001 | $10.98 | 3 |
| K | 86707 | HEPATITIS BE ANTIBODY (HBEAB) | 11/1/2001 | $11.83 | 3 |
| K | 86708 | HEPATITIS A ANTIBODY (HAAB), TOT | 11/1/2001 | $12.67 | 3 |
| K | 86709 | HEPATITIS A ANTIBODY (HAAB); IGM | 11/1/2001 | $11.51 | 3 |
| K | 86710 | ANTIBODY; INFLUENZA VIRUS | 11/1/2001 | $13.87 | 3 |
| K | 86713 | ANTIBODY; LEGIONELLA | 11/1/2001 | $15.65 | 3 |
| K | 86717 | ANTIBODY; LEISHMANIA | 11/1/2001 | $12.53 | 3 |
| K | 86720 | ANTIBODY; LEPTOSPIRA | 11/1/2001 | $13.49 | 3 |
| K | 86723 | ANTIBODY; LISTERIA MONOCYTOGENES | 11/1/2001 | $13.49 | 3 |
| K | 86727 | ANTIBODY; LYMPHOCYTIC CHORIOMENI | 11/1/2001 | $13.16 | 3 |
| K | 86729 | ANTIBODY; LYMPHOGRANULOMA VENERE | 11/1/2001 | $12.22 | 3 |
| K | 86732 | ANTIBODY; MUCORMYCOSIS | 11/1/2001 | $13.49 | 3 |
| K | 86735 | ANTIBODY; MUMPS | 11/1/2001 | $13.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 86738 | ANTIBODY; MYCOPLASMA | 11/1/2001 | $13.55 | 3 |
| K | 86741 | ANTIBODY; NEISSERIA MENINGITIS | 11/1/2001 | $13.49 | 3 |
| K | 86744 | ANTIBODY; NOCARDIA | 11/1/2001 | $13.49 | 3 |
| K | 86747 | ANTIBODY; PAROVIRUS | 11/1/2001 | $15.37 | 3 |
| K | 86750 | ANTIBODY; PLASMODIUM (MALARIA) | 11/1/2001 | $13.49 | 3 |
| K | 86753 | ANTIBODY; PROTOZOA, NOT ELSEWHER | 11/1/2001 | $12.67 | 3 |
| K | 86756 | ANTIBODY; RESPIRATORY SYNCYTIAL | 11/1/2001 | $13.18 | 3 |
| K | 86757 | RICKETTSIA | 11/1/2001 | $19.80 | 3 |
| K | 86759 | ANTIBODY; ROTAVIRUS | 11/1/2001 | $13.49 | 3 |
| K | 86762 | ANTIBODY; RUBELLA | 11/1/2001 | $14.72 | 3 |
| K | 86765 | ANTIBODY; RUBEOLA | 11/1/2001 | $13.18 | 3 |
| K | 86768 | ANTIBODY; SALMONELLA | 11/1/2001 | $13.49 | 3 |
| K | 86771 | ANTIBODY; SHIGELLA | 11/1/2001 | $13.49 | 3 |
| K | 86774 | ANTIBODY; TETANUS | 11/1/2001 | $15.13 | 3 |
| K | 86777 | ANTIBODY; TOXOPLASMA | 11/1/2001 | $14.72 | 3 |
| K | 86778 | ANTIBODY; TOXOPLASMA, IGM | 11/1/2001 | $14.73 | 3 |
| K | 86781 | ANTIBODY; TREPONEMA PALLIDUM, CO | 11/1/2001 | $13.54 | 3 |
| K | 86784 | ANTIBODY; TRICHINELLA | 11/1/2001 | $12.85 | 3 |
| K | 86787 | ANTIBODY; VARICELLA-ZOSTER | 11/1/2001 | $13.18 | 3 |
| K | 86788 | ANTIBODY; WEST NILE VIRUS, IGM | 1/1/2007 | NC | 9 |
| K | 86789 | ANTIBODY; WEST NILE VIRUS | 1/1/2007 | NC | 9 |
| K | 86790 | ANTIBODY; VIRUS, NOT ELSEWHERE S | 11/1/2001 | $13.18 | 3 |
| K | 86793 | ANTIBODY; YERSINIA | 11/1/2001 | $13.49 | 3 |
| K | 86800 | THYROGLOBULIN ANTIBODY | 11/1/2001 | $16.27 | 3 |
| K | 86803 | HEPATITIS C ANTIBODY; | 11/1/2001 | $14.60 | 3 |
| K | 86804 | HEPATITIS C ANTIBODY; CONFIRMATO | 11/1/2001 | $15.84 | 3 |
| K | 86805 | LYMPHOCYTOTOXICITY ASSAY, VISUAL | 11/1/2001 | $53.47 | 3 |
| K | 86806 | LYMPHOCYTOTOXICITY ASSAY, VISUAL | 11/1/2001 | $48.66 | 3 |
| K | 86807 | SERUM SCREENING FOR CYTOTOXIC PE | 11/1/2001 | $40.47 | 3 |
| K | 86808 | SERUM SCREENING FOR CYTOTOXIC PE | 11/1/2001 | $30.35 | 3 |
| K | 86812 | HLA TYPING; A, B, OR C (EG, A10, | 11/1/2001 | $26.39 | 3 |
| K | 86813 | HLA TYPING; A, B, OR C, MULTIPLE | 11/1/2001 | $59.30 | 3 |
| K | 86816 | HLA TYPING; DR/DQ, SINGLE ANTIGE | 11/1/2001 | $28.48 | 3 |
| K | 86817 | HLA TYPING; DR/DQ, MULTIPLE ANTI | 11/1/2001 | $65.85 | 3 |
| K | 86821 | TISSUE TYPING; LYMPHOCYTE CULTUR | 11/1/2001 | $57.74 | 3 |
| K | 86822 | TISSUE TYPING; LYMPHOCYTE CULTUR | 11/1/2001 | $37.38 | 3 |
| K | 86849 | UNLISTED IMMUNOLOGY PROCEDURE | 10/1/2005 | $0.01 | 5 |
| K | 86850 | ANTIBODY SCREEN, RBC, EACH SERUM | 7/1/1997 | $7.81 | 3 |
| K | 86860 | ANTIBODY ELUTION (RBC), EACH ELU | 2/15/2000 | $32.48 | 3 |
| K | 86870 | ANTIBODY IDENTIFICATION, RBC ANT | 10/1/2001 | $38.52 | 3 |
| K | 86880 | ANTIHUMAN GLOBULIN TEST (COOMBS | 11/1/2001 | $5.49 | 3 |
| K | 86885 | ANTIHUMAN GLOBULIN TEST; INDIREC | 11/1/2001 | $5.85 | 3 |
| K | 86886 | ANTIHUMAN GLOBULIN TEST (COOMBS | 11/1/2001 | $5.29 | 3 |
| K | 86890 | AUTOLOGOUS BLOOD OR COMPONENT, C | 10/1/2001 | $46.51 | 3 |
| K | 86891 | AUTOLOGOUS BLOOD OR COMPONENT, C | 7/1/2006 | NC | 9 |
| K | 86900 | BLOOD TYPING; ABO | 11/1/2001 | $3.05 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 86901 | BLOOD TYPING; RH (D) | 10/1/2001 | $6.62 | 3 |
| K | 86903 | BLOOD TYPING; ANTIGEN SCREENING | 11/1/2001 | $9.66 | 3 |
| K | 86904 | BLOOD TYPING; ANTIGEN SCREENING | 11/1/2001 | $9.72 | 3 |
| K | 86905 | BLOOD TYPING; RBC ANTIGENS, OTHE | 11/1/2001 | $3.91 | 3 |
| K | 86906 | BLOOD TYPING; RH PHENOTYPING, CO | 11/1/2001 | $7.93 | 3 |
| K | 86910 | BLOOD TYPING, FOR PATERNITY TEST | 2/22/1994 | NC | 9 |
| K | 86911 | BLOOD TYPING, FOR PATERNITY TEST | 1/1/1994 | NC | 9 |
| K | 86915 | BONE MARROW, MODIFICATION OR TRE | 7/1/2003 | INVALID | N |
| K | 86920 | COMPATIBILITY TEST EACH UNIT; IM | 10/1/2001 | $58.92 | 3 |
| K | 86921 | COMPATIBILITY TEST EACH UNIT; IN | 6/19/2006 | $58.92 | 3 |
| K | 86922 | COMPATIBILITY TEST EACH UNIT; AN | 12/5/2005 | $58.92 | 3 |
| K | 86923 | COMPATIBILITY TEST EACH UNIT; EL | 1/1/2006 | $0.01 | 5 |
| K | 86927 | FRESH FROZEN PLASMA, THAWING, EA | 10/1/2005 | $0.01 | 5 |
| K | 86930 | FROZEN BLOOD, EACH UNIT; FREEZIN | 10/1/2005 | $0.01 | 5 |
| K | 86931 | FROZEN BLOOD, EACH UNIT; THAWING | 10/1/2005 | $0.01 | 5 |
| K | 86932 | FROZEN BLOOD, EACH UNIT; FREEZIN | 10/1/2005 | $0.01 | 5 |
| K | 86940 | HEMOLYSINS AND AGGLUTININS, AUTO | 11/1/2001 | $8.38 | 3 |
| K | 86941 | HEMOLYSINS AND AGGLUTININS, AUTO | 11/1/2001 | $12.38 | 3 |
| K | 86950 | LEUKOCYTE TRANSFUSION | 11/1/2000 | $0.01 | 5 |
| K | 86960 | VOLUME REDUCTION OF BLOOD OR BLO | 1/1/2006 | NC | 9 |
| K | 86965 | POOLING OF PLATELETS OR OTHER BL | 10/1/2001 | $27.35 | 3 |
| K | 86970 | PRETREATMENT OF RBC'S FOR USE IN | 10/1/2005 | $0.01 | 5 |
| K | 86971 | PRETREATMENT OF RBC'S FOR USE IN | 10/1/2005 | $0.01 | 5 |
| K | 86972 | PRETREATMENT OF RBC'S FOR USE IN | 10/1/2005 | $0.01 | 5 |
| K | 86975 | PRETREATMENT OF SERUM FOR USE IN | 10/1/2005 | $0.01 | 5 |
| K | 86976 | PRETREATMENT OF SERUM FOR USE IN | 10/1/2005 | $0.01 | 5 |
| K | 86977 | PRETREATMENT OF SERUM FOR USE IN | 10/1/2005 | $0.01 | 5 |
| K | 86978 | PRETREATMENT OF SERUM FOR USE IN | 10/1/2005 | $0.01 | 5 |
| K | 86985 | SPLITTING OF BLOOD OR BLOOD PROD | 10/1/2005 | $0.01 | 5 |
| K | 86999 | UNLISTED TRANSFUSION MEDICINE PR | 10/1/2005 | $0.01 | 5 |
| K | 87001 | ANIMAL INOCULATION SMALL ANIMAL | 11/1/2001 | $13.52 | 3 |
| K | 87003 | ANIMAL INOCULATION SMALL ANIMAL; | 11/1/2001 | $17.21 | 3 |
| K | 87015 | CONCENTRATION (ANY TYPE), FOR IN | 11/1/2001 | $6.83 | 3 |
| K | 87040 | CULTURE, BACTERIAL; BLOOD, WITH | 11/1/2001 | $10.56 | 3 |
| K | 87045 | CULTURE, BACTERIAL; FECES, W/ISO | 11/1/2001 | $9.65 | 3 |
| K | 87046 | CULTURE, BACTERIAL; STOOL, AEROB | 11/1/2001 | $2.41 | 3 |
| K | 87070 | CULTURE, BACTERIAL; ANY OTHER SO | 11/1/2001 | $8.81 | 3 |
| K | 87071 | CULTURE, BACTERIAL; QUANTITATIVE | 11/1/2001 | $4.82 | 3 |
| K | 87073 | CULTURE, BACTERIAL; QUANTITATIVE | 11/1/2001 | $4.82 | 3 |
| K | 87075 | CULTURE, BACTERIAL; ANY SOURCE, | 11/1/2001 | $9.68 | 3 |
| K | 87076 | CULTURE, BACTERIAL; ANAEROBIC IS | 11/1/2001 | $8.26 | 3 |
| K | 87077 | CULTURE, BACTERIAL; AEROBIC ISOL | 11/1/2001 | $8.26 | 3 |
| K | 87081 | CULTURE, PRESUMPTIVE, PATHOGENIC | 11/1/2001 | $6.78 | 3 |
| K | 87084 | CULTURE PRESUMPTIVE PATHOGENIC O | 11/1/2001 | $8.81 | 3 |
| K | 87086 | CULTURE, BACTERIAL; QUANTITATIVE | 11/1/2001 | $8.26 | 3 |
| K | 87088 | CULTURE, BACTERIAL; WITH ISOLATI | 11/1/2001 | $8.27 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 87101 | CULTURE, FUNGI (MOLD OR YEAST) I | 11/1/2001 | $7.89 | 3 |
| K | 87102 | CULTURE, FUNGI, ISOLATION; OTHER | 11/1/2001 | $8.59 | 3 |
| K | 87103 | CULTURE, FUNGI, ISOLATION; BLOOD | 11/1/2001 | $9.22 | 3 |
| K | 87106 | CULTURE, FUNGI, DEFINITIVE IDENT | 11/1/2001 | $8.95 | 3 |
| K | 87107 | CULTURE, FUNGI, DEFINITIVE IDENT | 11/1/2001 | $8.95 | 3 |
| K | 87109 | CULTURE MYCOPLASMA ANY SOURCE | 11/1/2001 | $15.73 | 3 |
| K | 87110 | CULTURE, CHLAMYDIA, ANY SOURCE | 11/1/2001 | $20.04 | 3 |
| K | 87116 | CULTURE, TUBERCLE OR OTHER ACID- | 11/1/2001 | $11.05 | 3 |
| K | 87118 | CULTURE, MYCOBACTERIAL, DEFINITI | 11/1/2001 | $11.20 | 3 |
| K | 87140 | CULTURE, TYPING; IMMUNOFLUORESCE | 11/1/2001 | $5.71 | 3 |
| K | 87143 | CULTURE, TYPING; GAS LIQUID CHRO | 11/1/2001 | $12.82 | 3 |
| K | 87147 | CULTURE, TYPING; IMMUNOLOGIC MET | 11/1/2001 | $5.29 | 3 |
| K | 87149 | CULTURE, TYPING; IDENTIFICATION | 11/1/2001 | $20.51 | 3 |
| K | 87152 | CULTURE, TYPING; IDENTIFICATION | 11/1/2001 | $5.35 | 3 |
| K | 87158 | CULTURE TYPING; OTHER METHODS | 11/1/2001 | $5.35 | 3 |
| K | 87164 | DARK FIELD EXAMINATION ANY SOURC | 7/1/1997 | $14.74 | 3 |
| K | 87166 | DARK FIELD EXAMINATION ANY SOURC | 11/1/2001 | $11.55 | 3 |
| K | 87168 | MACROSCOPIC EXAMINATION; ARTHROP | 11/1/2001 | $4.37 | 3 |
| K | 87169 | MACROSCOPIC EXAMINATION; PARASIT | 11/1/2001 | $4.37 | 3 |
| K | 87172 | PINWORM EXAM (EG, CELLOPHANE TAP | 11/1/2001 | $4.37 | 3 |
| K | 87176 | HOMOGENIZATION, TISSUE, FOR CULT | 11/1/2001 | $6.02 | 3 |
| K | 87177 | OVA AND PARASITES DIRECT SMEARS | 11/1/2001 | $9.10 | 3 |
| K | 87181 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $0.86 | 3 |
| K | 87184 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $7.05 | 3 |
| K | 87185 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $0.86 | 3 |
| K | 87186 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $8.84 | 3 |
| K | 87187 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $10.60 | 3 |
| K | 87188 | SUSCEPTIBILITY STUDIES, ANTIMIRO | 11/1/2001 | $6.79 | 3 |
| K | 87190 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $4.95 | 3 |
| K | 87197 | SERUM BACTERICIDAL TITER (SCHLIC | 11/1/2001 | $12.27 | 3 |
| K | 87198 | CYTOMEGALOVIRUS, DIRECT FLUORESC | 7/1/2003 | INVALID | N |
| K | 87199 | ENTEROVIRUS, DIRECT FLUORESCENT | 7/1/2003 | INVALID | N |
| K | 87205 | SMEAR, PRIMARY SOURCE WITH INTER | 11/1/2001 | $4.37 | 3 |
| K | 87206 | SMEAR, PRIMARY SOURCE WITH INTER | 11/1/2001 | $5.49 | 3 |
| K | 87207 | SMEAR, PRIMARY SOURCE WITH INTER | 7/1/1997 | $7.58 | 3 |
| K | 87209 | SMEAR, PRIMARY SOURCE W/INTERPRE | 1/1/2006 | $18.58 | 3 |
| K | 87210 | SMEAR, PRIMARY SOURCE WITH INTER | 11/1/2001 | $4.37 | 3 |
| K | 87220 | TISSUE EXAMINATION BY KOH SLIDE | 11/1/2001 | $4.37 | 3 |
| K | 87230 | TOXIN OR ANTITOXIN ASSAY, TISSUE | 11/1/2001 | $20.19 | 3 |
| K | 87250 | VIRUS ISOLATION; INOCULATION OF | 11/1/2001 | $19.99 | 3 |
| K | 87252 | VIRUS ISOLATION; TISSUE CULTURE | 11/1/2001 | $24.54 | 3 |
| K | 87253 | VIRUS ISOLATION; TISSUE CULTURE, | 11/1/2001 | $20.65 | 3 |
| K | 87254 | VIRUS ISOLATION; CENTRIFUGE ENHA | 11/1/2001 | $5.00 | 3 |
| K | 87255 | VIRUS ISOLATION; INCLUDING IDENT | 1/1/2003 | $35.01 | 3 |
| K | 87260 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87265 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 87267 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2003 | $12.40 | 3 |
| K | 87269 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2004 | $12.40 | 3 |
| K | 87270 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87271 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2003 | $12.40 | 3 |
| K | 87272 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87273 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87274 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87275 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87276 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87277 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87278 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87279 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87280 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87281 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87283 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87285 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87290 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87299 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87300 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $6.13 | 3 |
| K | 87301 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87305 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2007 | NC | 9 |
| K | 87320 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87324 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87327 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87328 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87329 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2004 | $12.40 | 3 |
| K | 87332 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87335 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87336 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87337 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87338 | HELICOBACTER PYLORI, STOOL | 1/15/2007 | $12.40 | 3 |
| K | 87339 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87340 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $10.56 | 3 |
| K | 87341 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $10.56 | 3 |
| K | 87350 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $11.78 | 3 |
| K | 87380 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $16.79 | 3 |
| K | 87385 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87390 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $18.04 | 3 |
| K | 87391 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $18.04 | 3 |
| K | 87400 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $6.13 | 3 |
| K | 87420 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87425 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87427 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87430 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87449 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| K | 87450 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $9.81 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 87451 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $9.81 | 3 |
| K | 87470 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $20.51 | 3 |
| K | 87471 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87472 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87475 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87476 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87477 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87480 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87481 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87482 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| K | 87485 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87486 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87487 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87490 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87491 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87492 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.75 | 3 |
| K | 87495 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87496 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87497 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87498 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| K | 87510 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87511 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87512 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| K | 87515 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87516 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87517 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87520 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87521 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87522 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87525 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87526 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87527 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| K | 87528 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87529 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87530 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87531 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87532 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87533 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| K | 87534 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87535 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87536 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $87.02 | 3 |
| K | 87537 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87538 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87539 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87540 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87541 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 87542 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| K | 87550 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87551 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87552 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87555 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87556 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87557 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87560 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87561 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87562 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87580 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87581 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87582 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| K | 87590 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87591 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87592 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| K | 87620 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87621 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87622 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| K | 87640 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| K | 87641 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| K | 87650 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| K | 87651 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| K | 87652 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| K | 87653 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| K | 87660 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2004 | $20.73 | 3 |
| K | 87797 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $20.51 | 3 |
| K | 87798 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $35.89 | 3 |
| K | 87799 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $0.01 | 5 |
| K | 87800 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $20.51 | 3 |
| K | 87801 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $35.89 | 3 |
| K | 87802 | INFECTIOUS AGENT ANTIGEN DETECTI | 12/1/2002 | $12.27 | 3 |
| K | 87803 | INFECTIOUS AGENT ANTIGEN DETECTI | 12/1/2002 | $12.27 | 3 |
| K | 87804 | INFECTIOUS AGENT ANTIGEN DETECTI | 12/1/2002 | $12.27 | 3 |
| K | 87807 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2005 | $12.40 | 3 |
| K | 87808 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2007 | NC | 9 |
| K | 87810 | INFECTIOUS AGENT DETECTION BY IM | 11/1/2001 | $12.27 | 3 |
| K | 87850 | INFECTIOUS AGENT DETECTION BY IM | 11/1/2001 | $12.27 | 3 |
| K | 87880 | INFECTIOUS AGENT DETECTION BY IM | 11/1/2001 | $12.27 | 3 |
| K | 87899 | INFECTIOUS AGENT DETECTION BY IM | 8/1/2003 | $12.27 | 3 |
| K | 87900 | INFECTIOUS AGENT DRUG SUSCEPTIBI | 1/1/2006 | $124.02 | 3 |
| K | 87901 | INFECTIOUS AGENT GENOTYPE ANALYS | 11/1/2001 | $263.28 | 3 |
| K | 87902 | INFECTIOUS AGENT GENOTYPE ANALYS | 12/1/2002 | $263.28 | 3 |
| K | 87903 | INFECTIOUS AGENT PHENOTYPE ANALY | 11/1/2001 | $499.71 | 3 |
| K | 87904 | INFECTIOUS AGENT PHENOTYPE ANALY | 11/1/2001 | $24.54 | 3 |
| K | 87999 | UNLISTED MICROBIOLOGY PROCEDURE | 10/1/2001 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 88000 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| K | 88005 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| K | 88007 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| K | 88012 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| K | 88014 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| K | 88016 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| K | 88020 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| K | 88025 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| K | 88027 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| K | 88028 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| K | 88029 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| K | 88036 | NECROPSY (AUTOPSY) LIMITED GROSS | 4/1/1982 | NC | 9 |
| K | 88037 | NECROPSY (AUTOPSY) LIMITED GROSS | 4/1/1982 | NC | 9 |
| K | 88040 | NECROPSY (AUTOPSY) FORENSIC EXAM | 4/1/1982 | NC | 9 |
| K | 88045 | NECROPSY (AUTOPSY); CORONER'S CA | 4/1/1982 | NC | 9 |
| K | 88099 | UNLISTED NECROPSY (AUTOPSY) PROC | 4/1/1982 | NC | 9 |
| K | 88104 | CYTOPATHOLOGY, FLUIDS,WASHINGS O | 1/1/2007 | $37.63 | 3 |
| K | 88106 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $50.60 | 3 |
| K | 88107 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $60.98 | 3 |
| K | 88108 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $46.97 | 3 |
| K | 88112 | CYTOPATHOLOGY, SELECTIVE CELLULA | 1/1/2007 | $82.78 | 3 |
| K | 88125 | CYTOPATHOLOGY, FERENSIC, (EG, SP | 10/1/2002 | NC | 9 |
| K | 88130 | SEX CHROMATIN IDENTIFICATION BAR | 10/1/2001 | $21.69 | 3 |
| K | 88140 | SEX CHROMATIN IDENTIFICATION; PE | 11/1/2001 | $8.18 | 3 |
| K | 88141 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2007 | $15.31 | 3 |
| K | 88142 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2003 | $20.95 | 3 |
| K | 88143 | CYTOPATHOLOGY; WITH MANUAL SCREE | 1/1/2003 | $20.95 | 3 |
| K | 88144 | CYTOPATHOLOGY; WITH MANUAL SCREE | 7/1/2003 | INVALID | N |
| K | 88145 | CYTOPATHOLOGY; WITH MANUAL SCREE | 7/1/2003 | INVALID | N |
| K | 88147 | CYTOPATHOLOGY SMEARS, CERVICAL O | 1/1/2003 | $14.76 | 3 |
| K | 88148 | CYTOPATHOLOGY SMEARS, CERVICAL O | 1/1/2003 | $20.95 | 3 |
| K | 88150 | SYTOPATHOLOGY, SMEARS, CERVICAL | 1/1/2003 | $14.76 | 3 |
| K | 88152 | CYTOPATHOLOGY, SMEARS, CERVICAL | 1/1/2003 | $14.76 | 3 |
| K | 88153 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| K | 88154 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| K | 88155 | CYTOPATHOLOGY SMEARS WITH DEFINI | 1/1/2003 | $6.19 | 3 |
| K | 88160 | CYTOPATHOLOGY, SMEARS, ANY OTHER | 1/1/2007 | $35.55 | 3 |
| K | 88161 | CYTOPATHOLOGY ANY OTHER SOURCE; | 1/1/2007 | $38.41 | 3 |
| K | 88162 | CYTOPATHOLOGY ANY OTHER SOURCE; | 1/1/2007 | $47.49 | 3 |
| K | 88164 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| K | 88165 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| K | 88166 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| K | 88167 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| K | 88170 | FINE NEEDLE ASPIRATION; SUPERFIC | 4/1/2002 | INVALID | N |
| K | 88171 | FINE NEEDLE ASPIRATION WITH OR W | 4/1/2002 | INVALID | N |
| K | 88172 | CYTOPATHOLOGY, EVALUATION OF FIN | 1/1/2007 | $35.55 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 88173 | EVALUATION OF FINE NEEDLE ASPIRA | 1/1/2007 | $93.42 | 3 |
| K | 88174 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2003 | $22.13 | 3 |
| K | 88175 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2003 | $30.17 | 3 |
| K | 88180 | FLOW CYTOMETRY; EACH CELL SURFAC | 1/1/2005 | INVALID | N |
| K | 88182 | FLOW CYTOMETRY; CELL CYCLE OR DN | 1/1/2007 | $73.18 | 3 |
| K | 88184 | FLOW CYTOMETRY, CELL SURFACE, CY | 1/1/2007 | $34.77 | 3 |
| K | 88185 | FLOW CYTOMETRY, CELL SURFACE, CY | 1/1/2007 | $17.13 | 3 |
| K | 88187 | FLOW CYTOMETRY, INTERPRETATION; | 1/1/2007 | $47.23 | 3 |
| K | 88188 | FLOW CYTOMETRY, INTERPRETATION; | 1/1/2007 | $58.91 | 3 |
| K | 88189 | FLOW CYTOMETRY, INTERPRETATION; | 1/1/2007 | $77.59 | 3 |
| K | 88199 | UNLISTED CYTOPATHOLOGY PROCEDURE | 4/1/1982 | $0.01 | 5 |
| K | 88230 | TISSUE CULTURE FOR CHROMESOME AN | 11/1/2001 | $78.53 | 3 |
| K | 88233 | TISSUE CULTURE FOR CHROMOSOME AN | 11/1/2001 | $143.92 | 3 |
| K | 88235 | TISSUE CULTURE FOR CHROMOSOME A | 11/1/2001 | $82.15 | 3 |
| K | 88237 | TISSUE CULTURE FOR CHROMOSOME AN | 11/1/2001 | $129.17 | 3 |
| K | 88239 | TISSUE CULTURE FOR CHROMOSOME AN | 11/1/2001 | $144.43 | 3 |
| K | 88240 | CRYOPRESERVATION, FREEZING AND S | 11/1/2001 | $10.33 | 3 |
| K | 88241 | THAWING AND EXPANSION OF FRAZEN | 11/1/2001 | $10.33 | 3 |
| K | 88245 | CHROMOSOME ANALYSIS FOR BREAKAGE | 11/1/2001 | $152.23 | 3 |
| K | 88248 | CHROMOSOME ANALYSIS FOR BREAKAGE | 11/1/2001 | $177.10 | 3 |
| K | 88249 | CHROMOSOME ANALYSIS FOR BREAKAGE | 11/1/2001 | $177.10 | 3 |
| K | 88261 | CHROMOSOME ANALYSIS; COUNT 5 CEL | 11/1/2001 | $180.74 | 3 |
| K | 88262 | CHROMOSOME ANALYSIS; COUNT 15-20 | 11/1/2001 | $127.47 | 3 |
| K | 88263 | CHROMOSOME ANALYSIS; COUNT 45 CE | 11/1/2001 | $153.68 | 3 |
| K | 88264 | CHROMOSOME ANALYSIS; ANALYZE 20 | 11/1/2001 | $127.47 | 3 |
| K | 88267 | CHROMOSOME ANALYSIS, AMNIOTIC FL | 11/1/2001 | $183.85 | 3 |
| K | 88269 | CHROMOSOME ANALYSIS IN SITU FOR | 11/1/2001 | $170.09 | 3 |
| K | 88271 | MOLECULAR CYTOGENETICS; DNA PROB | 11/1/2001 | $21.90 | 3 |
| K | 88272 | MOLECULAR CYTOGENETICS; CHROMOSO | 11/1/2001 | $27.38 | 3 |
| K | 88273 | MOLECULAR CYTOGENETICS; CHROMOSO | 11/1/2001 | $32.86 | 3 |
| K | 88274 | MOLECULAR CYTOGENETICS; INTERPHA | 11/1/2001 | $35.59 | 3 |
| K | 88275 | MOLECULAR CYTOGENETICS; INTERPHA | 11/1/2001 | $41.07 | 3 |
| K | 88280 | CHROMOSOME ANALYSIS; ADDITIONAL | 11/1/2001 | $25.66 | 3 |
| K | 88283 | CHROMOSOME ANALYSIS; ADDITIONAL | 11/1/2001 | $70.14 | 3 |
| K | 88285 | CHROMOSOME ANALYSIS; ADDITIONAL | 11/1/2001 | $19.43 | 3 |
| K | 88289 | CHROMOSOME ANALYSIS; ADDITIONAL | 11/1/2001 | $22.57 | 3 |
| K | 88291 | CYTOGENETICS AND MOLECULAR CYTOG | 1/1/2007 | $18.42 | 3 |
| K | 88299 | UNLISTED CYTOGENETIC STUDY | 4/1/1982 | $0.01 | 5 |
| K | 88300 | LEVEL I - SURGICAL PATHOLOGY, GR | 1/1/2007 | $14.27 | 3 |
| K | 88302 | LEVEL II - SURGICAL PATHOLOGY, G | 1/1/2007 | $30.88 | 3 |
| K | 88304 | LEVEL III - SURGICAL PATHOLOGY, | 1/1/2007 | $40.74 | 3 |
| K | 88305 | LEVEL IV - SURGICAL PATHOLOGY, G | 1/1/2007 | $70.84 | 3 |
| K | 88307 | LEVEL V - SURGICAL PATHOLOGY, GR | 1/1/2007 | $126.38 | 3 |
| K | 88309 | LEVEL VI - SURGICAL PATHOLOGY, G | 1/1/2007 | $176.98 | 3 |
| K | 88311 | DECALCIFICATION PROCEDURE (LIST | 1/1/2007 | $12.72 | 3 |
| K | 88312 | SPECIAL STAINS (LIST SEPERATELY | 1/1/2007 | $54.24 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 88313 | SPECIAL STAINS GROUP II ALL OTHE | 1/1/2007 | $39.18 | 3 |
| K | 88314 | SPECIAL STAINS HISTOCHEMICAL STA | 1/1/2007 | $66.43 | 3 |
| K | 88318 | DETERMINATIVE HISTOCHEMISTRY TO | 1/1/2007 | $54.50 | 3 |
| K | 88319 | DETERMINATIVE HISTOCHEMISTRY OR | 1/1/2007 | $103.54 | 3 |
| K | 88321 | CONSULTATION AND REPORT ON REFER | 1/1/2007 | $55.53 | 3 |
| K | 88323 | CONSULTATION AND REPORT ON REFER | 1/1/2007 | $83.04 | 3 |
| K | 88325 | CONSULTATION, COMPREHENSIVE, WIT | 1/1/2007 | $135.72 | 3 |
| K | 88329 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $34.77 | 3 |
| K | 88331 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $61.50 | 3 |
| K | 88332 | CONSULTATION DURING SURGERY; EAC | 1/1/2007 | $28.29 | 3 |
| K | 88333 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $61.24 | 3 |
| K | 88334 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $31.92 | 3 |
| K | 88342 | IMMUNOCYTOCHEMISTRY (INCLUDING T | 1/1/2007 | $61.24 | 3 |
| K | 88346 | IMMUNOFLUORESCENT STUDY, EACH AN | 1/1/2007 | $64.36 | 3 |
| K | 88347 | IMMUNOFLUORESCENT STUDY, EACH AN | 1/1/2007 | $56.31 | 3 |
| K | 88348 | ELECTRON MICROSCOPY DIAGNOSTIC | 1/1/2007 | $285.97 | 3 |
| K | 88349 | SCANNING | 1/1/2007 | $114.70 | 3 |
| K | 88355 | MORPHOMETRIC ANALYSIS SKELETAL M | 1/1/2007 | $279.48 | 3 |
| K | 88356 | MORPHOMETRIC ANALYSIS NERVE | 1/1/2007 | $192.03 | 3 |
| K | 88358 | MORPHOMETRIC ANALYSIS; TUMOR | 1/1/2007 | $50.86 | 3 |
| K | 88360 | MORPHOMETRIC ANALYSIS, TUMOR IMM | 1/1/2007 | $75.51 | 3 |
| K | 88361 | MORPHOMETRIC ANALYSIS; TUMOR IMM | 1/1/2007 | $113.66 | 3 |
| K | 88362 | NERVE TEASING PREPARATIONS | 1/1/2007 | $182.17 | 3 |
| K | 88365 | IN SITU HYBRIDIZATION (EG, FISH) | 1/1/2007 | $87.71 | 3 |
| K | 88367 | MORPHOMETRIC ANALYSIS, IN SITU H | 1/1/2007 | $141.69 | 3 |
| K | 88368 | MORPHOMETRIC ANALYSIS, IN SITU H | 1/1/2007 | $101.72 | 3 |
| K | 88371 | PROTEIN ANALYSIS OF TISSUE BY WE | 7/1/1997 | $30.44 | 3 |
| K | 88372 | PROTEIN ANALYSIS OF TISSUE BY WE | 7/1/1997 | $31.04 | 3 |
| K | 88380 | MICRODISSECTION (EG, MECHANICAL, | 10/1/2005 | $0.01 | 5 |
| K | 88384 | ARRAY-BASED EVALUATION OF MULTIP | 11/1/2006 | NC | 9 |
| K | 88385 | ARRAY-BASED EVALUATION OF MULTIP | 11/1/2006 | NC | 9 |
| K | 88386 | ARRAY-BASED EVALUATION OF MULTIP | 11/1/2006 | NC | 9 |
| K | 88399 | UNLISTED SURGICAL PATHOLOGY PROC | 4/1/1982 | $0.01 | 5 |
| K | 88400 | BILIRUBIN, TOTAL, TRANSCUTANEOUS | 11/1/2001 | $2.57 | 3 |
| K | 89049 | CAFFEINE HALOTHANE CONTRACTURE T | 1/1/2007 | $130.27 | 3 |
| K | 89050 | CELL COUNT, MISCELLANEOUS BODY F | 11/1/2001 | $4.83 | 3 |
| K | 89051 | CELL COUNT MISCELLANEOUS BODY FL | 11/1/2001 | $5.63 | 3 |
| K | 89055 | LEUKOCYTE COUNT, FECAL | 1/1/2003 | $4.41 | 3 |
| K | 89060 | CRYSTAL IDENTIFICATION BY LIGHT | 1/1/2007 | $14.01 | 3 |
| K | 89100 | DUODENAL INTUBATION AND ASPIRATI | 1/1/2007 | $64.10 | 3 |
| K | 89105 | DUODENAL INTUBATION AND ASPIRATI | 1/1/2007 | $71.36 | 3 |
| K | 89125 | FAT STAIN, FECES, URINE, OR RESP | 11/1/2001 | $2.95 | 3 |
| K | 89130 | GASTRIC INTUBATION AND ASPIRATIO | 1/1/2007 | $57.61 | 3 |
| K | 89132 | GASTRIC INTUBATION AND ASPIRATIO | 1/1/2007 | $45.41 | 3 |
| K | 89135 | GASTRIC INTUBATION ASPIRATION AN | 1/1/2007 | $70.84 | 3 |
| K | 89136 | GASTRIC INTUBATION ASPIRATION AN | 1/1/2007 | $50.86 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 89140 | GASTRIC INTUBATION ASPIRATION AN | 1/1/2007 | $79.67 | 3 |
| K | 89141 | GASTRIC INTUBATION ASPIRATION AN | 1/1/2007 | $95.50 | 3 |
| K | 89160 | MEAT FIBERS FECES | 11/1/2001 | $3.77 | 3 |
| K | 89190 | NASAL SMEAR FOR EOSINOPHILS | 11/1/2001 | $4.85 | 3 |
| K | 89220 | SPUTUM, OBTAINING SPECIMEN, AERO | 1/1/2007 | $11.68 | 3 |
| K | 89225 | STARCH GRANULES, FECES | 1/1/2004 | $2.97 | 3 |
| K | 89230 | SWEAT COLLECTION BY IONTOPHORESI | 1/1/2007 | $3.37 | 3 |
| K | 89235 | WATER LOAD TEST | 1/1/2004 | NC | 9 |
| K | 89240 | UNLISTED MISCELLANEOUS PATHOLOGY | 1/1/2004 | NC | 9 |
| K | 89250 | CULTURE AND FERTILIZATION OF OOC | 1/1/1996 | NC | 9 |
| K | 89251 | CULTURE AND FERTILIZATION OF OOC | 1/1/1998 | NC | 9 |
| K | 89252 | ASSISTED OOCYTE FERTILIZATION, M | 4/1/2004 | INVALID | N |
| K | 89253 | ASSISTED EMBRYO HATCHING, MICROT | 1/1/1998 | NC | 9 |
| K | 89254 | OOCYTE IDENTIFICATION FROM FOLLI | 1/1/1998 | NC | 9 |
| K | 89255 | PREPARATION OF EMBRYO FOR TRANSF | 1/1/1998 | NC | 9 |
| K | 89256 | PREPARATION OF CRYOPRESERVED EMB | 4/1/2004 | INVALID | N |
| K | 89257 | SPERM IDENTIFICATION FROM ASPIRA | 1/1/1998 | NC | 9 |
| K | 89258 | CRYOPRESERVATION; EMBRYO | 1/1/1998 | NC | 9 |
| K | 89259 | CRYOPRESERVATION; SPERM | 1/1/1998 | NC | 9 |
| K | 89260 | SPERM ISOLATION; SIMPLE PREP FOR | 1/1/1998 | NC | 9 |
| K | 89261 | SPERM ISOLATION; COMPLEX PREP FO | 1/1/1998 | NC | 9 |
| K | 89264 | SPERM IDENTIFICATION FROM TESTIS | 1/1/1999 | NC | 9 |
| K | 89268 | INSEMINATION OF OOCYTES | 1/1/2004 | NC | 9 |
| K | 89272 | EXTENDED CULTURE OF OOCYTE(S)/EM | 1/1/2004 | NC | 9 |
| K | 89280 | ASSISTED OOCYTE FERTILIZATION, M | 1/1/2004 | NC | 9 |
| K | 89281 | ASSISTED OOCYTE FERTILIZATION, M | 1/1/2004 | NC | 9 |
| K | 89290 | BIOPSY, OOCYTE POLAR BODY OR EMB | 1/1/2004 | NC | 9 |
| K | 89291 | BIOPSY, OOCYTE POLAR BODY OR EMB | 1/1/2004 | NC | 9 |
| K | 89300 | SEMEN ANALYSIS PRESENCE AND/OR M | 12/7/1993 | NC | 9 |
| K | 89310 | SEMEN ANALYSIS; MOTILITY AND COU | 4/1/1982 | NC | 9 |
| K | 89320 | SEMEN ANALYSIS; COMPLETE (VOLUME | 4/1/1982 | NC | 9 |
| K | 89321 | SEMEN ANALYSIS, PRESENCE AND/OR | 1/1/2001 | NC | 9 |
| K | 89325 | SPERM ANTIBODIES | 4/1/1982 | NC | 9 |
| K | 89329 | SPERM EVALUATION HAMSTER PENETRA | 3/1/1987 | NC | 9 |
| K | 89330 | SPERM EVALUATION CERVICAL MUCUS | 8/1/1986 | NC | 9 |
| K | 89335 | CRYOPRESERVATION, REPORDUCTIVE T | 1/1/2004 | NC | 9 |
| K | 89342 | STORAGE, (PER YEAR); EMBRYO(S) | 1/1/2004 | NC | 9 |
| K | 89343 | STORAGE, (PER YEAR); SPERM/SEMEN | 1/1/2004 | NC | 9 |
| K | 89344 | STORAGE, (PER YEAR); REPRODUCTIV | 1/1/2004 | NC | 9 |
| K | 89346 | STORAGE, (PER YEAR); OOCYTE(S) | 1/1/2004 | NC | 9 |
| K | 89350 | SPUTUM OBTAINING SPECIMEN AEROSO | 4/1/2004 | INVALID | N |
| K | 89352 | THAWING OF CRYOPRESERVED; EMBRYO | 1/1/2004 | NC | 9 |
| K | 89353 | THAWING OF CRYOPRESERVED; SPERM/ | 1/1/2004 | NC | 9 |
| K | 89354 | THAWING OF CRYOPRESERVED; REPROD | 1/1/2004 | NC | 9 |
| K | 89355 | STARCH GRANULES FECES | 4/1/2004 | INVALID | N |
| K | 89356 | THAWING OF CRYOPRESERVED; OOCYTE | 1/1/2004 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | 89360 | SWEAT COLLECTION BY IONTOPHORESI | 4/1/2004 | INVALID | N |
| K | 89365 | WATER LOAD TEST | 4/1/2004 | INVALID | N |
| K | 89399 | UNLISTED MISCELLANEOUS PATHOLOGY | 4/1/2004 | INVALID | N |
| K | A4641 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2001 | NC | 9 |
| K | A4642 | SUPPLY OF SATUMOMAB PENDETIDE, R | 1/1/2001 | NC | 9 |
| K | A4643 | SUPPLY OF ADDITIONAL HIGH DOSE C | 1/1/2006 | INVALID | N |
| K | A4644 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| K | A4645 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| K | A4646 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| K | A4647 | SUPPLY OF PARAMAGNETIC CONTRAST | 1/1/2006 | INVALID | N |
| K | A9525 | SUPPLY OF LOW OR ISO-OSMOLAR CON | 1/1/2006 | INVALID | N |
| K | G0001 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2005 | INVALID | N |
| K | G0026 | FECAL LEUKOCYTE EXAMINATION | 7/1/2003 | INVALID | N |
| K | G0027 | SEMEN ANALYSIS: PRESENCE AND/OR | 7/1/2003 | INVALID | N |
| K | G0030 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0031 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0032 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0033 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0034 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0035 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0036 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0037 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0038 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0039 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0040 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0041 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0042 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0043 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0044 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0045 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0046 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0047 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| K | G0050 | MEASUREMENT OF POST-VOIDING RESI | 7/1/2003 | INVALID | N |
| K | G0103 | PROSTATE CANCER SCREENING; PROST | 11/1/2001 | $18.81 | 3 |
| K | G0106 | COLORECTAL CANCER SCREENING; ALT | 1/1/2007 | $96.53 | 3 |
| K | G0107 | COLORECTAL CANCER SCREENING; FEC | 1/1/2007 | INVALID | N |
| K | G0120 | COLORECTAL CANCER SCREENING; ALT | 1/1/2007 | $96.53 | 3 |
| K | G0122 | COLORECTAL CANCER SCREENING; BAR | 1/1/2007 | $97.31 | 3 |
| K | G0123 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2003 | $20.95 | 3 |
| K | G0124 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2007 | $15.31 | 3 |
| K | G0125 | PET IMAGING REGIONAL OR WHOLE BO | 1/1/2006 | INVALID | N |
| K | G0126 | PET LUNG IMAGING OF SOLITARY PUL | 4/1/2002 | INVALID | N |
| K | G0130 | SINGLE ENERGY X-RAY ABSORPTIOMET | 1/1/2007 | $29.84 | 3 |
| K | G0131 | COMPUTERIZED TOMOGRAPHY BONE MIN | 7/1/2003 | INVALID | N |
| K | G0132 | COMPUTERIZED TOMOGRAPHY BONE MIN | 7/1/2003 | INVALID | N |
| K | G0141 | SCREENING CYTOPATHOLOGY SMEARS, | 1/1/2007 | $15.31 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | G0143 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2003 | $20.95 | 3 |
| K | G0144 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2003 | $22.13 | 3 |
| K | G0145 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2003 | $30.17 | 3 |
| K | G0147 | SCREENING CYTOPATHOLOGY SMEARS, | 1/1/2003 | $14.76 | 3 |
| K | G0148 | SCREENING CYTOPATHOLOGY SMEARS, | 1/1/2003 | $20.95 | 3 |
| K | G0163 | POSITRON EMISSION TOMOGRAPHY (PE | 4/1/2002 | INVALID | N |
| K | G0164 | POSITRON EMISSION TOMOGRAPHY (PE | 4/1/2002 | INVALID | N |
| K | G0165 | POSITRON EMISSION TOMOGRAPHY (PE | 4/1/2002 | INVALID | N |
| K | G0173 | LINEAR ACCELERATOR BASED STEREOT | 1/1/2001 | NC | 9 |
| K | G0174 | INTENSITY MODULATED RADIATION TH | 4/1/2002 | INVALID | N |
| K | G0188 | FULL LENGTH RADIOGRAPHY OF LOWER | 4/1/2002 | INVALID | N |
| K | G0202 | SCREENING MAMMOGRAPHY, PRODUCING | 1/1/2007 | $92.90 | 3 |
| K | G0204 | DIAGNOSTIC MAMMOGRAPHY, PRODUCIN | 1/1/2007 | $97.83 | 3 |
| K | G0206 | DIAGNOSTIC MAMMOGRAPHY, PRODUCIN | 1/1/2007 | $79.15 | 3 |
| K | G0210 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| K | G0211 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| K | G0212 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| K | G0213 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| K | G0214 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| K | G0215 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| K | G0216 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| K | G0217 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| K | G0218 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| K | G0219 | PET IMAGING WHOLE BODY; MELANOMA | 6/20/2005 | NC | 9 |
| K | G0220 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| K | G0221 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| K | G0222 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| K | G0223 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |
| K | G0224 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |
| K | G0225 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |
| K | G0226 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| K | G0227 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| K | G0228 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| K | G0229 | PET IMAGING; METABOLIC BRAIN IMA | 1/1/2006 | INVALID | N |
| K | G0230 | PET IMAGING; METABOLIC ASSESS FO | 1/1/2006 | INVALID | N |
| K | G0231 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| K | G0232 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| K | G0233 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| K | G0234 | PET, REGIONAL OR WHOLE BODY, FOR | 1/1/2006 | INVALID | N |
| K | G0235 | PET IMAGING, ANY SITE, NOT OTHER | 4/1/2005 | NC | 9 |
| K | G0236 | DIGITIZATION OF FILM RADIOGRAPHI | 4/1/2004 | INVALID | N |
| K | G0242 | MULTI-SOURCE PHOTON STEREOTACTIC | 1/1/2006 | INVALID | N |
| K | G0243 | MULTI-SOURCE PHOTON STEREOTACTIC | 1/1/2007 | INVALID | N |
| K | G0252 | PET IMAGING, FULL AND PARTIAL-RI | 1/1/2003 | NC | 9 |
| K | G0253 | PET IMAGING FOR BREAST CANCER, F | 1/1/2006 | INVALID | N |
| K | G0254 | PET IMAGING FOR BREAST CANCER, F | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | G0262 | SMALL INTESTINAL IMAGING; INTRAL | 4/1/2004 | INVALID | N |
| K | G0296 | PET IMAGING, FULL AND PARTIAL RI | 1/1/2006 | INVALID | N |
| K | G0306 | COMPLETE CBC, AUTOMATED (HGB, HC | 1/1/2004 | $8.04 | 3 |
| K | G0307 | COMPLETE (CBC), AUTOMATED (HGB, | 1/1/2004 | $6.69 | 3 |
| K | G0328 | COLORECTALCANCER SCREENING; FECA | 1/1/2004 | $13.39 | 3 |
| K | G0330 | PET IMAGING INITIAL DIAGNOSIS CE | 4/1/2005 | INVALID | N |
| K | G0331 | PET IMAGING RESTAGING OVARIAN | 4/1/2005 | INVALID | N |
| K | G0336 | PET IMAGING, BRAIN IMAGING FOR T | 4/1/2005 | INVALID | N |
| K | P2028 | CEPHALIN FLOCULATION, BLOOD | 8/24/1993 | NC | 9 |
| K | P2029 | CONGO RED, BLOOD | 8/24/1993 | NC | 9 |
| K | P2031 | HAIR ANALYSIS (EXCLUDING ARSENIC | 10/1/1984 | NC | 9 |
| K | P2033 | THYMOL TURBIDITY, BLOOD | 8/24/1993 | NC | 9 |
| K | P2038 | MUCOPROTEIN, BLOOD (SEROMUCOID) | 1/1/2004 | NC | 9 |
| K | P3000 | SCREENING PAPANICOLAOU SMEAR, CE | 1/1/2003 | $14.76 | 3 |
| K | P3001 | SCREENING PAPANICOLAOU SMEAR, CE | 1/1/2007 | $15.31 | 3 |
| K | P7001 | CULTURE, BACTERIAL, URINE; QUANT | 2/15/2000 | NC | 9 |
| K | P9010 | BLOOD (WHOLE) FOR TRANSFUSION PE | 1/1/1988 | NC | 9 |
| K | P9011 | BLOOD (SPLIT UNIT) SPECIFY AMOUN | 1/1/1988 | NC | 9 |
| K | P9012 | CRYOPRECIPITATE EACH UNIT | 1/1/1988 | NC | 9 |
| K | P9016 | RED BLOOD CELLS, LEUKOCYTES REDU | 1/1/1988 | NC | 9 |
| K | P9017 | FRESH FROZEN PLASMA (SINGLE DONO | 1/1/1988 | NC | 9 |
| K | P9019 | PLATELETS, EACH UNIT | 10/1/2004 | NC | 9 |
| K | P9020 | PLATELET RICH PLASMA EACH UNIT | 1/1/1988 | NC | 9 |
| K | P9021 | RED BLOOD CELLS EACH UNIT | 1/1/1988 | NC | 9 |
| K | P9022 | RED BLOOD CELLS, WASHED, EACH UN | 1/1/1988 | NC | 9 |
| K | P9023 | PLASMA, POOLED MULTIPLE DONOR, S | 1/1/2001 | NC | 9 |
| K | P9031 | PLATELETS, LEUKOCYTES REDUCED, E | 1/1/2001 | NC | 9 |
| K | P9032 | PLATELETS, IRRADIATED, EACH UNIT | 1/1/2001 | NC | 9 |
| K | P9033 | PLATELETS, LEUKOCYTES REDUCED, I | 1/1/2001 | NC | 9 |
| K | P9034 | PLATELETS, PHERESIS, EACH UNIT | 1/1/2001 | NC | 9 |
| K | P9035 | PLATELETS, PHERESIS, LEUKOCYTES | 1/1/2001 | NC | 9 |
| K | P9036 | PLATELETS, PHERESIS, IRRADIATED, | 1/1/2001 | NC | 9 |
| K | P9037 | PLATELETS, PHERESIS, LEUKOCYTES | 1/1/2001 | NC | 9 |
| K | P9038 | RED BLOOD CELLS, IRRADIATED, EAC | 1/1/2001 | NC | 9 |
| K | P9039 | RED BLOOD CELLS, DEGLYCEROLIZED, | 1/1/2001 | NC | 9 |
| K | P9040 | RED BLOOD CELLS, LEUKOCYTES REDU | 1/1/2001 | NC | 9 |
| K | P9041 | INFUSION, ALBUMIN (HUMAN), 5%, 5 | 1/1/2001 | NC | 9 |
| K | P9042 | INFUSION, ALBUMIN (HUMAN), 25%, | 4/1/2002 | INVALID | N |
| K | P9043 | INFUSION, PLASMA PROTEIN FRACTIO | 1/1/2001 | NC | 9 |
| K | P9044 | PLASMA, CRYOPRECIPITATE REDUCED, | 1/1/2001 | NC | 9 |
| K | P9045 | INFUSION, ALBUMIN (HUMAN), 5%, 2 | 1/1/2002 | NC | 9 |
| K | P9046 | INFUSION, ALBUMIN (HUMAN), 25%, | 1/1/2002 | NC | 9 |
| K | P9047 | INFUSION, ALBUMIN (HUMAN), 25%, | 1/1/2002 | NC | 9 |
| K | P9048 | INFUSION, PLASMA PROTEIN FRACTIO | 1/1/2002 | NC | 9 |
| K | P9050 | GRANULOCYTES, PHERESIS, EACH UNI | 1/1/2002 | NC | 9 |
| K | P9051 | WHOLE BLOOD OR RED BLOOD CELLS, | 1/1/2004 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | P9052 | PLATELETS, HLA-MATCHED LEUKOCYTE | 1/1/2004 | NC | 9 |
| K | P9053 | PLATELETS, PHERESIS, LEUKOCYTES | 1/1/2004 | NC | 9 |
| K | P9054 | WHOLE BLOOD OR RED BLOOD CELLS, | 1/1/2004 | NC | 9 |
| K | P9055 | PLATELETS, LEUKOCYTES REDUCED, C | 1/1/2004 | NC | 9 |
| K | P9056 | WHOLE BLOOD, LEUKOCYTES REDUCED, | 1/1/2004 | NC | 9 |
| K | P9057 | RED BLOOD CELLS, FROZEN/DEGLYCER | 1/1/2004 | NC | 9 |
| K | P9058 | RED BLOOD CELLS, LEUKOCYTES REDU | 1/1/2004 | NC | 9 |
| K | P9059 | FRESH FROZEN PLASMA BETWEEN 8-24 | 1/1/2004 | NC | 9 |
| K | P9060 | FRESH FROZEN PLASMA, DONOR RETES | 1/1/2004 | NC | 9 |
| K | P9603 | TRAVEL ALLOW 1-WAY IN CONNECTION | 2/23/1994 | $0.80 | 3 |
| K | P9604 | TRAVEL ALL 1-WAY IN CONNECTION W | 2/23/1994 | $0.80 | 3 |
| K | P9615 | CATHETERIZATION FOR COLLECTION O | 11/1/2001 | $2.22 | 3 |
| K | Q0035 | CARDIOKYMOGRAPHY | 1/1/2004 | NC | 9 |
| K | Q0091 | SCREENING PAP SMEAR; OBTAINING, | 1/1/1992 | NC | 9 |
| K | Q0092 | SET-UP PORTABLE X-RAY EQUIPMENT | 4/20/1992 | NC | 9 |
| K | Q0111 | WET MOUNTS, INCLUDING PREPARATIO | 4/1/2001 | $3.55 | 3 |
| K | Q0112 | ALL POTASSIUM HYDROXIDE (KOH) PR | 4/1/2001 | $3.55 | 3 |
| K | Q0113 | PINWORM EXAMINATIONS | 4/1/2001 | $4.49 | 3 |
| K | Q0114 | FERN TEST | 8/16/1993 | NC | 9 |
| K | Q0115 | POST-COITAL DIRECT, QUALITATIVE | 8/16/1993 | NC | 9 |
| K | Q3000 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3001 | RADIOELEMENTS FOR BRACHYTHERAPY, | 1/1/2001 | NC | 9 |
| K | Q3002 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3003 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3004 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3005 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3006 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3007 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3008 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3009 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3010 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3011 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| K | Q3012 | SUPPLY OF ORAL RADIOPHARMACEUTIC | 1/1/2006 | INVALID | N |
| K | Q9941 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| K | Q9942 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| K | Q9945 | LOW OSMOLAR CONTRAST MATERIAL, U | 7/18/2005 | $0.41 | 3 |
| K | Q9946 | LOW OSMOLAR CONTRAST MATERIAL, 1 | 7/18/2005 | $0.41 | 3 |
| K | Q9947 | LOW OSMOLAR CONTRAST MATERIAL, 2 | 7/18/2005 | $0.48 | 3 |
| K | Q9948 | LOW OSMOLAR CONTRAST MATERIAL, 2 | 7/18/2005 | $0.48 | 3 |
| K | Q9949 | LOW OSMOLAR CONTRAST MATERIAL, 3 | 7/18/2005 | $0.53 | 3 |
| K | Q9950 | LOW OSMOLAR CONTRAST MATERIAL, 3 | 7/18/2005 | $0.60 | 3 |
| K | Q9951 | LOW OSMOLAR CONTRAST MATERIAL, 4 | 7/18/2005 | $0.60 | 3 |
| K | Q9952 | INJECTION, GADOLINIUM-BASED MAGN | 10/1/2005 | NC | 9 |
| K | Q9953 | INJECTION, IRON-BASED MAGNETIC R | 4/1/2005 | $0.01 | 5 |
| K | Q9954 | ORAL MAGNETIC RESONANCE CONTRAST | 4/1/2005 | $0.01 | 5 |
| K | Q9955 | INJECTION, PERFLEXANE LIPID MICR | 4/1/2005 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| K | Q9956 | INJECTION, OCTAFLUOROPROPANCE MI | 4/1/2005 | $0.01 | 5 |
| K | Q9957 | INJECTION, PERFLUTREN LIPID MICR | 4/1/2005 | $0.01 | 5 |
| K | Q9958 | HIGH OSMOLOR CONTRAST MATERIAL, | 7/1/2005 | NC | 9 |
| K | Q9959 | HIGH OSMOLOR CONTRAST MATERIAL, | 7/1/2005 | NC | 9 |
| K | Q9960 | HIGH OSMOLOR CONTRAST MATERIAL, | 7/1/2005 | NC | 9 |
| K | Q9961 | HIGH OSMOLOR CONTRAST MATERIAL, | 7/1/2005 | NC | 9 |
| K | Q9962 | HIGH OSMOLOR CONTRAST MATERIAL, | 7/1/2005 | NC | 9 |
| K | Q9963 | HIGH OSMOLOR CONTRAST MATERIAL, | 7/1/2005 | NC | 9 |
| K | Q9964 | HIGH OSMOLOR CONTRAST MATERIAL, | 7/1/2005 | NC | 9 |
| K | R0070 | TRANSPORT OF PORT X-RAY EQUIP/PE | 8/1/2006 | $81.70 | 3 |
| K | R0075 | TRANSPORT OF PORT X-RAY EQUIP/PE | 8/1/2006 | $0.01 | 5 |
| K | R0076 | TRANSPORTATION OF PORTABLE EKG T | 10/1/2000 | $50.22 | 3 |
| K | S0830 | ULTRASOUND PACHYMETRY TO DETERMI | 1/1/2005 | INVALID | N |
| K | S3625 | MATERNAL SERUM TRIPLE MARKER SCR | 1/1/2004 | NC | 9 |
| K | S3626 | MATERNAL SERUM QUADRUPLE MARKER | 1/1/2006 | NC | 9 |
| K | S3630 | EOSINOPHIL COUNT, BLOOD, DIRECT | 1/1/2003 | NC | 9 |
| K | S3700 | BLADDER TUMOR-ASSOCIATED ANTIGEN | 4/1/2002 | INVALID | N |
| K | S3708 | GASTROINTESTINAL FAT ABSORPTION | 1/1/2001 | NC | 9 |
| K | S3890 | DNA ANALYSIS, FECAL, FOR COLOREC | 1/1/2005 | NC | 9 |
| K | S4042 | MANAGEMENT OF OVULATION INDUCTIO | 1/1/2005 | NC | 9 |
| K | S8037 | MAGNETIC RESONANCE CHOLANGIOPANC | 1/1/2003 | NC | 9 |
| K | S8042 | MAGNETIC RESONANCE IMAGING (MRI) | 1/1/2003 | NC | 9 |
| K | S8055 | ULTRASOUND GUIDANCE FOR MULTIFET | 4/1/2002 | $0.01 | 5 |
| K | S8075 | COMPUTER ANALYSIS OF FULL-FIELD | 7/1/2006 | INVALID | N |
| K | S8080 | SCINTIMAMMOGRAPHY, UNILATERAL,IN | 1/1/2005 | NC | 9 |
| K | S8085 | FLUORINE-18 FLUORODEOXYGLUCOSE I | 1/1/2005 | NC | 9 |
| K | S8093 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | INVALID | N |
| L | 10060 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2007 | $64.88 | 3 |
| L | 10061 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2007 | $116.52 | 3 |
| L | 10120 | INCISION AND REMOVAL OF FOREIGN | 1/1/2007 | $91.34 | 3 |
| L | 10121 | INCISION AND REMOVAL OF FOREIGN | 1/1/2007 | $169.71 | 3 |
| L | 10140 | INCISION AND DRAINAGE OF HEMATOM | 1/1/2007 | $90.83 | 3 |
| L | 10160 | PUNCTURE ASPIRATION OF ABSCESS H | 1/1/2007 | $76.29 | 3 |
| L | 10180 | INCISION AND DRAINAGE, COMPLEX, | 1/1/2007 | $145.06 | 3 |
| L | 11000 | DEBRIDEMENT OF EXTENSIVE ECZEMAT | 1/1/2007 | $32.44 | 3 |
| L | 11010 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $304.65 | 3 |
| L | 11011 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $359.67 | 3 |
| L | 11012 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $523.41 | 3 |
| L | 11040 | DEBRIDEMENT; SKIN PARTIAL THICKN | 1/1/2007 | $28.03 | 3 |
| L | 11041 | DEBRIDEMENT; SKIN FULL THICKNESS | 1/1/2007 | $41.00 | 3 |
| L | 11042 | DEBRIDEMENT; SKIN AND SUBCUTANEO | 1/1/2007 | $57.61 | 3 |
| L | 11043 | DEBRIDEMENT; SKIN SUBCUTANEOUS T | 1/1/2007 | $158.04 | 3 |
| L | 11044 | DEBRIDEMENT; SKIN SUBCUTANEOUS T | 1/1/2007 | $206.30 | 3 |
| L | 11055 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $26.99 | 3 |
| L | 11056 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $34.25 | 3 |
| L | 11057 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $42.30 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 11100 | BIOPSY OF SKIN SUBCUTANEOUS TISS | 1/1/2007 | $54.24 | 3 |
| L | 11101 | BIOPSY OF SKIN SUBCUTANEOUS TISS | 1/1/2007 | $19.72 | 3 |
| L | 11200 | REMOVAL OF SKIN TAGS, MULTIPLE F | 6/8/1994 | NC | 9 |
| L | 11420 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $73.70 | 3 |
| L | 11421 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $93.94 | 3 |
| L | 11422 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $105.10 | 3 |
| L | 11423 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $124.56 | 3 |
| L | 11424 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $142.47 | 3 |
| L | 11426 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $199.82 | 3 |
| L | 11620 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $100.69 | 3 |
| L | 11621 | EXCISION MELIGNANT LESION SCALP | 1/1/2007 | $119.11 | 3 |
| L | 11622 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $134.94 | 3 |
| L | 11623 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $159.59 | 3 |
| L | 11624 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $183.73 | 3 |
| L | 11626 | EXCISION MALIGNANT LESION SCALP | 1/1/2007 | $243.41 | 3 |
| L | 11719 | TRIMMING OF NONDYSTROPHIC NAILS, | 1/1/2007 | $11.42 | 3 |
| L | 11720 | DEBRIDEMENT OF NAIL(S) BY ANY ME | 1/1/2007 | $18.17 | 3 |
| L | 11721 | DEBRIDEMENT OF NAIL(S) BY ANY ME | 1/1/2007 | $27.25 | 3 |
| L | 11730 | AVULSION OF NAIL PLATE PARTIAL O | 1/1/2007 | $59.69 | 3 |
| L | 11732 | AVULSION OF NAIL PLATE PARTIAL O | 1/1/2007 | $28.03 | 3 |
| L | 11740 | EVACUATION OF SUBUNGUAL HEMATOMA | 1/1/2007 | $24.91 | 3 |
| L | 11750 | EXCISION OF NAIL AND NAIL MATRIX | 1/1/2007 | $110.29 | 3 |
| L | 11752 | EXCISION OF NAIL & NAIL MATRIX P | 1/1/2007 | $156.22 | 3 |
| L | 11755 | BIOPSY OF NAIL UNIT (EG, PLATE, | 6/30/2005 | $64.36 | 3 |
| L | 11760 | REPAIR OF NAIL BED | 1/1/2007 | $114.70 | 3 |
| L | 11762 | RECONSTRUCTION OF NAIL BED WITH | 1/1/2007 | $159.33 | 3 |
| L | 11765 | WEDGE EXCICION OF SKIN OF NAIL F | 1/1/2007 | $66.43 | 3 |
| L | 11900 | INJECTION INTRALESIONAL UP TO AN | 1/1/2007 | $30.88 | 3 |
| L | 11901 | INJECTION INTRALESIONAL; MORE TH | 1/1/2007 | $38.67 | 3 |
| L | 12001 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $99.65 | 3 |
| L | 12002 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $105.88 | 3 |
| L | 12004 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $124.04 | 3 |
| L | 12041 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $132.60 | 3 |
| L | 12042 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $160.37 | 3 |
| L | 12044 | LAYER CL;OSURE OF WOUNDS OF NECK | 1/1/2007 | $172.05 | 3 |
| L | 13131 | REPAIR COMPLEX FOREHEAD CHEEKS C | 1/1/2007 | $218.24 | 3 |
| L | 13132 | REPAIR COMPLEX FOREHEAD CHEEKS C | 1/1/2007 | $316.07 | 3 |
| L | 13160 | SECONDARY CLOSURE OF SURGICAL WO | 1/1/2007 | $497.72 | 3 |
| L | 14040 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $449.19 | 3 |
| L | 14041 | ADJACENT TISSUE TRANSFER OR REAR | 1/1/2007 | $592.18 | 3 |
| L | 15000 | SURGICAL PREP OR CREATION OF REC | 1/1/2007 | INVALID | N |
| L | 15050 | PINCH GRAFT SINGLE OR MULTIPLE T | 1/1/2007 | $305.95 | 3 |
| L | 15100 | SPLIT-THICKNESS AUTOGRAFT, TRUNK | 1/1/2007 | $595.29 | 3 |
| L | 15101 | SPLIT GRAFT, TRUNK, ARMS, LEGS; | 1/1/2007 | $147.92 | 3 |
| L | 15342 | APPLICATION OF BILAMINATE SKIN S | 1/1/2006 | INVALID | N |
| L | 15350 | APPLICATION OF ALLOGRAFT (HOMOGR | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 15351 | APPLICATION OF ALLOGRAFT, SKIN; | 1/1/2006 | INVALID | N |
| L | 15400 | XENOGRAFT, SKIN (DERMAL), FOR TE | 1/1/2007 | $220.06 | 3 |
| L | 15401 | XENOGRAFT, SKIN, FOR TEMP WOUND | 1/1/2007 | $78.89 | 3 |
| L | 15574 | FORMATION OF DIRECT OR TUBED PED | 1/1/2007 | $565.19 | 3 |
| L | 15620 | INTERMEDIATE DELAY OF ANY FLAP P | 1/1/2007 | $287.79 | 3 |
| L | 16000 | INITIAL TREATMENT FIRST DEGREE B | 1/1/2007 | $47.49 | 3 |
| L | 16020 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $56.31 | 3 |
| L | 16025 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $98.87 | 3 |
| L | 16030 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $116.78 | 3 |
| L | 16035 | ESCHAROTOMY; INITIAL INCISION | 1/1/2007 | $149.99 | 3 |
| L | 16036 | ESCHAROTOMY; EACH ADDITIONAL INC | 1/1/2007 | $59.69 | 3 |
| L | 17000 | DESTRUCTION BY ANY METHOD, INCLU | 1/1/2007 | $41.52 | 3 |
| L | 17003 | DESTRUCTION BY ANY METHOD, INCLU | 1/1/2007 | $7.01 | 3 |
| L | 17004 | DESTRUCTION, ALL BENIGN OR PREMA | 1/1/2007 | $135.20 | 3 |
| L | 17110 | DESTRUCTION, OF FLAT WARTS, MOLL | 1/1/2007 | $60.20 | 3 |
| L | 17999 | UNLISTED PROCEDURE, SKIN, MUCOUS | 9/1/1986 | $0.01 | 5 |
| L | 20520 | REMOVAL OF FOREIGN BODY IN MUSCL | 1/1/2007 | $129.23 | 3 |
| L | 20525 | REMOVAL OF FOREIGN BODY IN MUSCL | 1/1/2007 | $341.76 | 3 |
| L | 20550 | INJECTION(S); TENDON SHEATH, LIG | 1/1/2007 | $40.22 | 3 |
| L | 20600 | ARTHROCENTESIS, ASPIRATION AND/O | 1/1/2007 | $36.07 | 3 |
| L | 20605 | ARTHROCENTESIS, ASPIRATION AND/O | 1/1/2007 | $39.44 | 3 |
| L | 20670 | REMOVAL OF IMPLANT; SUPERFICIAL | 1/1/2007 | $352.66 | 3 |
| L | 20680 | REMOVAL OF IMPLANT; DEEP (EG BUR | 1/1/2007 | $329.82 | 3 |
| L | 20900 | BONE GRAFT ANY DONOR AREA MINOR | 1/1/2007 | $388.21 | 3 |
| L | 27603 | INCISION AND DRAINAGE DEEP ABSCE | 1/1/2007 | $342.02 | 3 |
| L | 27604 | INCISION AND DRAINAGE; INFECTED | 1/1/2007 | $291.94 | 3 |
| L | 27605 | TENOTOMY ACHILLES TENDON SUBCUTA | 1/1/2007 | $284.93 | 3 |
| L | 27606 | TENOTOMY ACHILLES TENDON SUBCUTA | 1/1/2007 | $212.53 | 3 |
| L | 27607 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $401.19 | 3 |
| L | 27610 | ARTHROTOMY, ANKLE, FOR INFECTION | 1/1/2007 | $434.66 | 3 |
| L | 27612 | ARTHROTOMY ANKLE POSTERIOR CAPSU | 1/1/2007 | $377.83 | 3 |
| L | 27613 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $145.58 | 3 |
| L | 27614 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $352.40 | 3 |
| L | 27620 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $322.30 | 3 |
| L | 27625 | ARTHROTOMY, ANKLE, WITH SYNOVECT | 1/1/2007 | $416.50 | 3 |
| L | 27626 | ARTHROTOMY ANKLE FOR SYNOVECTOMY | 1/1/2007 | $449.45 | 3 |
| L | 27630 | EXCISION OF LESION OF TENDON SHE | 1/1/2007 | $340.20 | 3 |
| L | 27647 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $560.52 | 3 |
| L | 27648 | INJECTION PROCEDURE FOR ANKLE AR | 1/1/2007 | $118.59 | 3 |
| L | 27650 | REPAIR PRIMARY OPEN OR PERCUTANE | 1/1/2007 | $487.86 | 3 |
| L | 27652 | SUTURE PRIMARY RUPTURED ACHILLES | 1/1/2007 | $520.82 | 3 |
| L | 27654 | REPAIR SECONDARY RUPTURED ACHILL | 1/1/2007 | $486.30 | 3 |
| L | 27680 | TENOLYSIS, INCLUDING TIBIA, FIBU | 1/1/2007 | $305.69 | 3 |
| L | 27681 | TENOLYSIS, INCLUDING TIBIA, FIBU | 1/1/2007 | $360.45 | 3 |
| L | 27685 | LENGTHENING OR SHORTENING OF TEN | 1/1/2007 | $383.28 | 3 |
| L | 27686 | LENGTHENING OR SHORTENING OF TEN | 1/1/2007 | $394.44 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 27687 | GASTROCNEMIUS RECESSION (EG STRA | 10/1/2003 | $415.72 | 3 |
| L | 27690 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $425.58 | 3 |
| L | 27691 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $502.65 | 3 |
| L | 27692 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $80.96 | 3 |
| L | 27695 | SUTURE PRIMARY TORN RUPTURED OR | 1/1/2007 | $348.77 | 3 |
| L | 27696 | SUTURE PRIMARY TORN RUPTURED OR | 1/1/2007 | $414.94 | 3 |
| L | 27698 | SUTURE SECONDARY REPAIR TORN RUP | 1/1/2007 | $461.39 | 3 |
| L | 27705 | OSTEOTOMY TIBIA | 10/1/2005 | $526.01 | 3 |
| L | 27792 | OPEN TREATMENT OF DISTAL FIBULAR | 10/1/2005 | $412.86 | 3 |
| L | 27840 | CLOSED TREATMENT OF ANKLE DISLOC | 1/1/2007 | $228.36 | 3 |
| L | 27842 | CLOSED TREATMENT OF ANKLE DISLOC | 1/1/2007 | $319.96 | 3 |
| L | 27846 | OPEN TREATMENT OF ANKLE DISLOCAT | 1/1/2007 | $504.21 | 3 |
| L | 27848 | OPEN TREATMENT OF ANKLE DISLOCAT | 1/1/2007 | $593.22 | 3 |
| L | 27860 | MANIPULATION OF ANKLE UNDER GENE | 1/1/2007 | $122.48 | 3 |
| L | 27870 | ARTHRODESIS, ANKLE, OPEN | 1/1/2007 | $695.46 | 3 |
| L | 27899 | UNLISTED PROCEDURE LEG OR ANKLE | 2/1/1993 | $0.01 | 5 |
| L | 28001 | INCISION AND DRAINAGE INFECTED B | 1/1/2007 | $157.00 | 3 |
| L | 28002 | DEEP INFECTION BELOW FASCIA REQU | 1/1/2007 | $265.21 | 3 |
| L | 28003 | DEEP INFECTION BELOW FASCIA REQU | 1/1/2007 | $409.23 | 3 |
| L | 28005 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $412.35 | 3 |
| L | 28008 | FASCIOTOMY, FOOT AND/OR TOE | 1/1/2007 | $248.34 | 3 |
| L | 28010 | TENOTOMY SUBCUTANEOUS TOE SINGLE | 1/1/2007 | $144.80 | 3 |
| L | 28011 | TENOTOMY SUBCUTANEOUS TOE; MULTI | 1/1/2007 | $208.38 | 3 |
| L | 28020 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $304.91 | 3 |
| L | 28022 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $272.22 | 3 |
| L | 28024 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $264.17 | 3 |
| L | 28030 | NEURECTOMY OF INTRINSIC MUSCULAT | 1/1/2007 | INVALID | N |
| L | 28035 | TARSAL TUNNEL RELEASE (POSTERIOR | 1/1/2007 | $302.32 | 3 |
| L | 28043 | EXCISION, TUMOR, FOOT; SUBCUTANE | 1/1/2007 | $202.67 | 3 |
| L | 28045 | EXCISION, TUMOR, FOOT; DEEP, SUB | 1/1/2007 | $278.44 | 3 |
| L | 28050 | ARTHROTOMY FOR SYNOVIAL BIOPSY I | 1/1/2007 | $252.75 | 3 |
| L | 28052 | ARTHROTOMY FOR SYNOVIAL BIOPSY; | 1/1/2007 | $243.41 | 3 |
| L | 28054 | ARTHROTOMY FOR SYNOVIAL BIOPSY; | 1/1/2007 | $223.95 | 3 |
| L | 28055 | NEURECTOMY, INTRINSIC MUSCULATUR | 1/1/2007 | $271.70 | 3 |
| L | 28060 | FASCIECTOMY EXCISION OF PLANTAR | 1/1/2007 | $296.09 | 3 |
| L | 28062 | FASCIECTOMY EXCISION OF PLANTAR | 1/1/2007 | $359.93 | 3 |
| L | 28070 | SYNOVECTOMY INTERTARSAL OR TARSO | 1/1/2007 | $286.75 | 3 |
| L | 28072 | SYNOVECTOMY; METATARSOPHALANGEAL | 1/1/2007 | $280.00 | 3 |
| L | 28080 | EXCISION OF INTERDIGITAL (MORTON | 1/1/2007 | $237.70 | 3 |
| L | 28086 | SYNOVECTOMY TENDON SHEATH FLEXOR | 1/1/2007 | $351.10 | 3 |
| L | 28088 | SYNOVECTOMY TENDON SHEATH; EXTEN | 1/1/2007 | $265.47 | 3 |
| L | 28090 | EXCISION OF LESION OF TENDON OR | 1/1/2007 | $263.13 | 3 |
| L | 28092 | EXCISION OF LESION OF TENDON/FIB | 1/1/2007 | $242.63 | 3 |
| L | 28100 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $374.98 | 3 |
| L | 28102 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $384.58 | 3 |
| L | 28103 | EXCISION OF CURETTAGE OF BONE CY | 1/1/2007 | $311.92 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 28104 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $293.49 | 3 |
| L | 28106 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $325.93 | 3 |
| L | 28107 | EXCISION OF CURETTAGE OF BONE CY | 1/1/2007 | $332.94 | 3 |
| L | 28108 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $240.82 | 3 |
| L | 28110 | OSTECTOMY PARTIAL EXCISION FIFTH | 1/1/2007 | $255.35 | 3 |
| L | 28111 | OSTECTOMY COMPLETE EXCISION OF F | 1/1/2007 | $310.36 | 3 |
| L | 28112 | OSTECTOMY COMPLETE EXCISION; OTH | 1/1/2007 | $283.11 | 3 |
| L | 28113 | OSTECTOMY COMPLETE EXCISION; FIF | 1/1/2007 | $297.91 | 3 |
| L | 28114 | OSTECTOMY, COMP EXCISION; ALL ME | 1/1/2007 | $592.96 | 3 |
| L | 28116 | OSTECTOMY EXCISION OF TARSAL COA | 1/1/2007 | $404.30 | 3 |
| L | 28118 | OSTECTOMY, CALCANEUS | 1/1/2007 | $338.65 | 3 |
| L | 28119 | OSTECTOMY CALCANEUS; FOR SPUR WI | 1/1/2007 | $298.94 | 3 |
| L | 28120 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $349.29 | 3 |
| L | 28122 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $392.10 | 3 |
| L | 28124 | PARTIAL EXCISION (CRATERIZATION, | 1/1/2007 | $269.88 | 3 |
| L | 28126 | RESECTION, PARTIAL OR COMPLETE, | 1/1/2007 | $212.27 | 3 |
| L | 28130 | TALECTOMY (ASTRAGALECTOMY) | 1/1/2007 | $417.54 | 3 |
| L | 28140 | METATARSECTOMY | 1/1/2007 | $390.81 | 3 |
| L | 28150 | PHALANGECTOMY SINGLE EACH | 1/1/2007 | $245.23 | 3 |
| L | 28153 | RESECTION HEAD OF PHALANX | 1/1/2007 | $219.02 | 3 |
| L | 28160 | HEMIPHALANGECTOMY OR INTERPHALAN | 1/1/2007 | $228.10 | 3 |
| L | 28171 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $424.54 | 3 |
| L | 28173 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $454.64 | 3 |
| L | 28175 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $324.12 | 3 |
| L | 28190 | REMOVE FOREIGN BODY SUBCUTANEOUS | 1/1/2007 | $144.80 | 3 |
| L | 28192 | REMOVE FOREIGN BODY; DEEP | 1/1/2007 | $278.44 | 3 |
| L | 28193 | REMOVE FOREIGN BODY; COMPLICATED | 1/1/2007 | $313.22 | 3 |
| L | 28200 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $267.29 | 3 |
| L | 28202 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $388.47 | 3 |
| L | 28208 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $253.27 | 3 |
| L | 28210 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $347.21 | 3 |
| L | 28220 | TENOLYSIS FLEXOR SINGLE | 1/1/2007 | $253.53 | 3 |
| L | 28222 | TENOLYSIS FLEXOR; MULTIPLE (THRO | 1/1/2007 | $299.72 | 3 |
| L | 28225 | TENOLYSIS EXTENSOR SINGLE | 1/1/2007 | $217.98 | 3 |
| L | 28226 | TENOLYSIS EXTENSOR; MULTIPLE (TH | 1/1/2007 | $256.91 | 3 |
| L | 28230 | TENOTOMY OPEN FLEXOR FOOT SINGLE | 1/1/2007 | $245.49 | 3 |
| L | 28232 | TENOTOMY OPEN FLEXOR; TOE SINGLE | 1/1/2007 | $216.68 | 3 |
| L | 28234 | TENOTOMY OPEN EXTENSOR FOOT OR T | 1/1/2007 | $220.06 | 3 |
| L | 28238 | RECONSTRUCTION, POSTERIOR TIBIAL | 1/1/2007 | $416.24 | 3 |
| L | 28240 | TENOTOMY LENGTHENING, OR RELEASE | 1/1/2007 | $248.34 | 3 |
| L | 28250 | DIVISION OF PLANTAR FASCIA AND M | 1/1/2007 | $321.00 | 3 |
| L | 28260 | CAPSULOTOMY MIDFOOT MEDIAL RELEA | 1/1/2007 | $400.41 | 3 |
| L | 28261 | CAPSULOTOMY MIDFOOT; WITH TENDON | 1/1/2007 | $568.56 | 3 |
| L | 28262 | CAPSULOTOMY,MIDFOOT;EXTEN,INCL P | 1/1/2007 | $830.14 | 3 |
| L | 28264 | CAPSULOTOMY MIDTARSAL (HEYMAN TY | 1/1/2007 | $509.14 | 3 |
| L | 28270 | CAPSULOTOMY; METATARSOPHALANGEAL | 1/1/2007 | $266.51 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 28272 | CAPSULOTOMY FOR CONTRACTURE INTE | 1/1/2007 | $219.02 | 3 |
| L | 28280 | WEBBING OPERATION (CREATE SYNDAC | 1/1/2007 | $315.81 | 3 |
| L | 28285 | HAMMERTOE OPERATION; ONE TOE (EG | 1/1/2007 | $260.54 | 3 |
| L | 28286 | HAMMERTOE OPERATION, ONE TOE (EG | 1/1/2007 | $257.42 | 3 |
| L | 28288 | OSTECTOMY, PARTIAL, EXOSTECTOMY | 1/1/2007 | $294.01 | 3 |
| L | 28289 | HALLUX RIGIDUS CORRECTION WITH C | 1/1/2007 | $416.50 | 3 |
| L | 28290 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $330.60 | 3 |
| L | 28292 | HALLUX VALGUS (BUNION) CORRECTIO | 10/1/2003 | NC | 9 |
| L | 28294 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $443.49 | 3 |
| L | 28296 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $480.85 | 3 |
| L | 28297 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $504.99 | 3 |
| L | 28298 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $420.65 | 3 |
| L | 28299 | CORRECTION, HALLUX VALGUS (BUNIO | 1/1/2007 | $537.68 | 3 |
| L | 28300 | OSTEOTOMY CALCANEUS (DWYER OR CH | 1/1/2007 | $470.21 | 3 |
| L | 28302 | OSTEOTOMY; TALUS | 1/1/2007 | $463.47 | 3 |
| L | 28304 | OSTEOTOMY MIDTARSAL BONES OTHER | 1/1/2007 | $476.96 | 3 |
| L | 28305 | OSTEOTOMY MIDTARSAL BONES OTHER | 1/1/2007 | $479.82 | 3 |
| L | 28306 | OSTEOTOMY, METATARSAL, BASE/SHAF | 1/1/2007 | $351.36 | 3 |
| L | 28307 | OSTEOTOMY, METATARSAL,BASE/SHAFT | 1/1/2007 | $474.11 | 3 |
| L | 28308 | OSTEOTOMY METATARSAL BASE OR SHA | 1/1/2007 | $304.65 | 3 |
| L | 28309 | OSTEOTOMY METATARSALS MULTIPLE F | 1/1/2007 | $590.88 | 3 |
| L | 28310 | OSTEOTOMY FOR SHORTENING ANGULAR | 1/1/2007 | $308.29 | 3 |
| L | 28312 | OSTEOTOMY FOR SHORTENING ANGULAR | 1/1/2007 | $275.59 | 3 |
| L | 28313 | RECONSTRUCTION, ANGULAR DEFORMIT | 1/1/2007 | $285.97 | 3 |
| L | 28315 | SESAMOIDECTOMY FIRST TOE (SEPARA | 1/1/2007 | $269.36 | 3 |
| L | 28320 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $449.71 | 3 |
| L | 28322 | REPAIR OF NONUNION OR MALUNION M | 1/1/2007 | $487.86 | 3 |
| L | 28340 | RECONSTRUCTION, TOE, MACRODACTYL | 1/1/2007 | $370.31 | 3 |
| L | 28341 | RECONSTRUCTION, TOE, MACRODACTYL | 1/1/2007 | $424.54 | 3 |
| L | 28360 | RECONSTRUCTION, CLEFT FOOT | 1/1/2007 | $677.81 | 3 |
| L | 28400 | CLOSED TREATMENT OF CALCANEAL FR | 1/1/2007 | $159.59 | 3 |
| L | 28405 | CLOSED TREATMENT OF CALCANEAL FR | 1/1/2007 | $262.87 | 3 |
| L | 28406 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $369.01 | 3 |
| L | 28415 | OPEN TREATMENT OF CALCANEAL FRAC | 1/1/2007 | $828.58 | 3 |
| L | 28420 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $840.00 | 3 |
| L | 28430 | CLOSED TREATMENT OF TALUS FRACTU | 1/1/2007 | $150.51 | 3 |
| L | 28435 | TREATMENT OF CLOSED TALUS FRACTU | 1/1/2007 | $203.19 | 3 |
| L | 28436 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $296.87 | 3 |
| L | 28445 | OPEN TREATMENT OF TALUS FRACTURE | 1/1/2007 | $758.78 | 3 |
| L | 28450 | TREATMENT OF TARSAL BONE FRACTUR | 1/1/2007 | $137.54 | 3 |
| L | 28455 | TREATMENT OF CLOSED TARSAL BONE | 1/1/2007 | $180.61 | 3 |
| L | 28456 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $188.92 | 3 |
| L | 28465 | OPEN TREATMENT OF TARSAL BONE FR | 1/1/2007 | $374.46 | 3 |
| L | 28470 | CLOSED TREATMENT OF METATARSAL F | 1/1/2007 | $140.65 | 3 |
| L | 28475 | TREATMENT OF CLOSED METATARSAL F | 1/1/2007 | $175.16 | 3 |
| L | 28476 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $230.96 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 28485 | OPEN TREATMENT OF METATARSAL FRA | 1/1/2007 | $311.14 | 3 |
| L | 28490 | CLOSED TREATMENT OF FRACTURE GRE | 1/1/2007 | $84.34 | 3 |
| L | 28495 | TREATMENT OF CLOSED FRACTURE GRE | 1/1/2007 | $102.76 | 3 |
| L | 28496 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $284.41 | 3 |
| L | 28505 | OPEN TREATMENT OF FRACTURE GREAT | 1/1/2007 | $323.86 | 3 |
| L | 28510 | CLOSED TREATMENT OF FRACTURE, PH | 1/1/2007 | $71.62 | 3 |
| L | 28515 | TREATMENT OF CLOSED FRACTURE PHA | 1/1/2007 | $91.86 | 3 |
| L | 28525 | OPEN TREATMENT OF FRACTURE, PHAL | 1/1/2007 | $294.27 | 3 |
| L | 28530 | CLOSED TREATMENT OF SESAMOID FRA | 1/1/2007 | $68.51 | 3 |
| L | 28531 | OPEN TREATMENT OF SESAMOID FRACT | 4/20/2006 | $258.20 | 3 |
| L | 28540 | CLOSED TREATMENT OF TARSAL BONE | 1/1/2007 | $122.22 | 3 |
| L | 28545 | TREATMENT OF CLOSED TARSAL BONE | 1/1/2007 | $134.16 | 3 |
| L | 28546 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $276.37 | 3 |
| L | 28555 | OPEN TREATMENT OF TARSAL BONE DI | 1/1/2007 | $447.90 | 3 |
| L | 28570 | CLOSED TREATMENT OF TALOTARSAL J | 1/1/2007 | $112.10 | 3 |
| L | 28575 | TREATMENT OF CLOSED TALOTARSAL J | 1/1/2007 | $197.22 | 3 |
| L | 28576 | PERCUTANEOUS SKELETAL FEXATION O | 6/19/2006 | $234.07 | 3 |
| L | 28585 | OPEN TREATMENT OF TALOTARSAL JOI | 1/1/2007 | $429.99 | 3 |
| L | 28600 | CLOSED TREATMENT OF TARSOMETATAR | 1/1/2007 | $129.23 | 3 |
| L | 28605 | TREATMENT OF CLOSED TARSOMETATAR | 1/1/2007 | $161.93 | 3 |
| L | 28606 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $270.14 | 3 |
| L | 28615 | OPEN TREATMENT OF TARSOMETATARSA | 1/1/2007 | $444.26 | 3 |
| L | 28630 | CLOSED TREATMENT OF METATARSOPHA | 1/1/2007 | $90.05 | 3 |
| L | 28635 | TREATMENT OF CLOSED METATARSOPHA | 1/1/2007 | $108.99 | 3 |
| L | 28636 | PERCUTANEOUS SKELETAL FIXATION O | 6/19/2006 | $183.47 | 3 |
| L | 28645 | OPEN TREATMENT OF METATARSOPHALA | 1/1/2007 | $252.75 | 3 |
| L | 28660 | CLOSED TREATMENT OF INTERPHALANG | 1/1/2007 | $67.99 | 3 |
| L | 28665 | TREATMENT OF CLOSED INTERPHALANG | 1/1/2007 | $93.68 | 3 |
| L | 28666 | PERCUTANEOUS SKELETAL FIXATION O | 6/19/2006 | $232.77 | 3 |
| L | 28675 | OPEN TREATMENT OF INTERPHALANGEA | 1/1/2007 | $273.25 | 3 |
| L | 28705 | PANTALAR ARTHRODESIS | 1/1/2007 | $890.60 | 3 |
| L | 28715 | TRIPLE ARTHRODESIS | 1/1/2007 | $649.27 | 3 |
| L | 28725 | SUBTALAR ARTHRODESIS | 1/1/2007 | $563.37 | 3 |
| L | 28730 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $543.39 | 3 |
| L | 28735 | ATHRODESIS MIDTARSAL OR TARSOMET | 1/1/2007 | $528.08 | 3 |
| L | 28737 | ARTHRODESIS, WITH TENDON LENGTHE | 1/1/2007 | $465.02 | 3 |
| L | 28740 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $522.11 | 3 |
| L | 28750 | ARTHRODESIS GREAT TOE METATARSOP | 1/1/2007 | $528.34 | 3 |
| L | 28755 | ARTHRODESIS GREAT TOE; INTERPHAL | 1/1/2007 | $298.43 | 3 |
| L | 28760 | ARTHRODESIS GREAT TOE INTERPHALA | 1/1/2007 | $435.44 | 3 |
| L | 28800 | AMPUTATION FOOT MIDTARSAL (CHOPA | 1/1/2007 | $393.40 | 3 |
| L | 28805 | AMPUTATION FOOT; TRANSMETATARSAL | 1/1/2007 | $394.96 | 3 |
| L | 28810 | AMPUTATION METATARSAL WITH TOE S | 1/1/2007 | $299.46 | 3 |
| L | 28820 | AMPUTATION TOE METATARSOPHALANGE | 1/1/2007 | $326.45 | 3 |
| L | 28825 | AMPUTATION TOE; INTERPHALANGEAL | 1/1/2007 | $287.79 | 3 |
| L | 28899 | UNLISTED PROCEDURE FOOT OR TOES | 2/1/1994 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 29345 | APPLICATION OF LONG LEG CAST (TH | 1/1/2007 | $88.49 | 3 |
| L | 29355 | APPLICATION OF LONG LEG CAST (TH | 1/1/2007 | $90.83 | 3 |
| L | 29405 | APPLICATION OF SHORT LEG CAST (B | 1/1/2007 | $57.61 | 3 |
| L | 29425 | APPLICATION OF SHORT LEG CAST (B | 1/1/2007 | $62.02 | 3 |
| L | 29440 | ADDING WALKER TO PREVIOUSLY APPL | 1/1/2007 | $34.77 | 3 |
| L | 29445 | APPLICATION OF RIGID TOTAL CONTA | 1/1/2007 | $100.17 | 3 |
| L | 29450 | APPLICATION OF CLUBFOOT CAST WIT | 1/1/2007 | $99.13 | 3 |
| L | 29505 | APPLICATION LONG LEG SPLINT (THI | 1/1/2007 | $50.60 | 3 |
| L | 29515 | APPLICATION OF SHORT LEG SPLINT | 1/1/2007 | $43.86 | 3 |
| L | 29540 | STRAPPING; ANKLE AND/OR FOOT | 1/1/2007 | $25.69 | 3 |
| L | 29550 | STRAPPING; TOES | 1/1/2007 | $24.65 | 3 |
| L | 29580 | STRAPPING; UNNA BOOT | 1/1/2007 | $33.48 | 3 |
| L | 29590 | DENIS-BROWNE SPLINT STRAPPING | 1/1/2007 | $35.29 | 3 |
| L | 29700 | REMOVAL OR BIVALVING GAUNTLET BO | 1/1/2007 | $39.96 | 3 |
| L | 29730 | WINDOWING OF CAST | 1/1/2007 | $43.60 | 3 |
| L | 29740 | WEDGING OF CAST (EXCEPT CLUBFOOT | 1/1/2007 | $63.58 | 3 |
| L | 29750 | WEDGING OF CLUBFOOT CAST | 1/1/2007 | $65.65 | 3 |
| L | 29799 | UNLISTED PROCEDURE CASTING OR ST | 5/1/1982 | $0.01 | 5 |
| L | 36415 | COLLECTION OF VENOUS BLOOD BY VE | 2/13/2003 | $3.00 | 3 |
| L | 36416 | COLLECTION OF CAPILLARY BLOOD SP | 1/1/2003 | $3.00 | 3 |
| L | 38220 | BONE MARROW; ASPIRATION ONLY | 1/1/2007 | $126.12 | 3 |
| L | 64450 | INJECTION ANESTHETIC AGENT; OTHE | 1/1/2007 | $68.51 | 3 |
| L | 64550 | APPLICATION OF SURFACE (TRANSCUT | 1/1/2007 | $12.20 | 3 |
| L | 64640 | DESTRUCTION BY NEUROLYTIC AGENT; | 1/1/2007 | $187.88 | 3 |
| L | 64702 | NEUROPLASTY; DIGITAL, ONE OR BOT | 1/1/2007 | $225.77 | 3 |
| L | 64704 | NEUROLYSIS; NERVE OF HAND OR FOO | 1/1/2007 | $220.32 | 3 |
| L | 64726 | DECOMPRESSION; PLANTAR DIGITAL N | 1/1/2007 | $194.88 | 3 |
| L | 64774 | EXCISION OF NEUROMA CUTANEOUS NE | 1/1/2007 | $252.75 | 3 |
| L | 64776 | EXCISION OF NEUROMA; DIGITAL NER | 1/1/2007 | $248.08 | 3 |
| L | 64778 | EXCISION OF NEUROMA; DIGITAL NER | 1/1/2007 | $131.57 | 3 |
| L | 64782 | EXCISION OF NEUROMA; HAND OR FOO | 1/1/2007 | $281.82 | 3 |
| L | 64783 | EXCISION OF NEUROMA; HAND OR FOO | 1/1/2007 | $157.26 | 3 |
| L | 64787 | INSERTION OF PLASTIC CAP ON NERV | 1/1/2007 | $181.65 | 3 |
| L | 64788 | EXCISION OF NEUROFIBROMA OR NEUR | 1/1/2007 | $228.36 | 3 |
| L | 64831 | SUTURE OF DIGITAL NERVE HAND OR | 1/1/2007 | $465.28 | 3 |
| L | 64832 | SUTURE OF DIGITAL NERVE HAND OR | 1/1/2007 | $244.97 | 3 |
| L | 64834 | SUTURE OF ONE NERVE HAND OR FOOT | 1/1/2007 | $488.38 | 3 |
| L | 64837 | SUTURE OF EACH ADDITIONAL NERVE | 1/1/2007 | $271.44 | 3 |
| L | 90471 | IMMUNIZATION ADMIN; SINGLE OR CO | 1/1/2007 | $12.72 | 3 |
| L | 90703 | IMMUNIZATION ACTIVE; TETANUS TOX | 7/1/1991 | $6.70 | 3 |
| L | 90782 | THERAPEUTIC OR DIAGNOSTIC INJECT | 10/1/2005 | $12.98 | 3 |
| L | 90788 | INTRAMUSCULAR INJECTION OF ANTIB | 1/1/2006 | INVALID | N |
| L | 90799 | UNLISTED THERAPEUTIC OR DIAGNOST | 1/1/2006 | INVALID | N |
| L | 93922 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $80.19 | 3 |
| L | 93923 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $123.26 | 3 |
| L | 95831 | MUSCLE TESTING, MANUAL (SEPARATE | 1/1/2007 | $19.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 97010 | APPLICATION OF A MODALITY TO ONE | 10/1/2004 | NC | 9 |
| L | 97014 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $9.86 | 3 |
| L | 97016 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| L | 97018 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| L | 97022 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $10.12 | 3 |
| L | 97024 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| L | 97032 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $10.90 | 3 |
| L | 97035 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| L | 97039 | UNLISTED MODALITY (SPECIFY TYPE | 4/1/2005 | NC | 9 |
| L | 97110 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.20 | 3 |
| L | 97124 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $15.31 | 3 |
| L | 97139 | THERAPEUTIC PROC, ONE OR MORE AR | 4/1/2005 | NC | 9 |
| L | 97799 | UNLISTED PHYSICAL MEDICINE/REHAB | 10/1/1991 | $0.01 | 5 |
| L | 99000 | HANDLING AND/OR CONVEYANCE OF SP | 8/1/1989 | NC | 9 |
| L | 99002 | HANDLING, CONVEYANCE, AND/OR ANY | 3/1/1987 | NC | 9 |
| L | 99025 | INITIAL (NEW PATIENT) VISIT WHEN | 4/1/2004 | INVALID | N |
| L | 99050 | SERVICES PROVIDED IN THE OFFICE | 10/1/2000 | $11.71 | 3 |
| L | 99052 | SERVICES REQUESTED BETWEEN 10:00 | 1/1/2006 | INVALID | N |
| L | 99054 | SERVICES REQUESTED ON SUNDAYS AN | 1/1/2006 | INVALID | N |
| L | 99056 | SVCS TYPICALLY PROVIDED IN THE O | 3/1/1987 | NC | 9 |
| L | 99058 | SVCS PROVIDED ON AN EMERGENCY BA | 10/1/2000 | $4.71 | 3 |
| L | 99071 | EDUCATIONAL SUPPLIES SUCH AS BOO | 10/1/2004 | NC | 9 |
| L | 99082 | UNUSUAL TRAVEL (EG, TRANSPORTATI | 1/1/1991 | NC | 9 |
| L | 99199 | UNLISTED SPECIAL SERVICE OR REPO | 8/1/1986 | $0.01 | 5 |
| L | 99201 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $25.17 | 3 |
| L | 99202 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $44.63 | 3 |
| L | 99203 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $66.43 | 3 |
| L | 99204 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $93.94 | 3 |
| L | 99205 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $119.37 | 3 |
| L | 99211 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $14.79 | 3 |
| L | 99212 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $26.47 | 3 |
| L | 99213 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $36.07 | 3 |
| L | 99214 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $56.57 | 3 |
| L | 99215 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $82.26 | 3 |
| L | 99231 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $23.36 | 3 |
| L | 99232 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $38.15 | 3 |
| L | 99233 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $54.24 | 3 |
| L | 99238 | HOSPITAL DISCHARGE DAY MANAGEMEN | 1/1/2007 | $48.53 | 3 |
| L | 99241 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $34.51 | 3 |
| L | 99242 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $63.06 | 3 |
| L | 99243 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $84.08 | 3 |
| L | 99244 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $118.59 | 3 |
| L | 99245 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $153.36 | 3 |
| L | 99251 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $24.65 | 3 |
| L | 99252 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $49.56 | 3 |
| L | 99253 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $67.73 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | 99254 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $97.31 | 3 |
| L | 99255 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $134.16 | 3 |
| L | 99261 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| L | 99262 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| L | 99263 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| L | 99271 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| L | 99272 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| L | 99273 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| L | 99274 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| L | 99275 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| L | 99281 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $11.42 | 3 |
| L | 99282 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $18.94 | 3 |
| L | 99283 | EMERGENCY DEPT VISIT FOR THE E/M | 1/1/2007 | $42.56 | 3 |
| L | 99284 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $66.43 | 3 |
| L | 99285 | EMER DEPT VISIT FOR E/M OF PT, W | 1/1/2007 | $104.06 | 3 |
| L | 99301 | E/M OF NEW OR EST PT INVOLVING A | 1/1/2006 | INVALID | N |
| L | 99302 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| L | 99303 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| L | 99307 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $23.36 | 3 |
| L | 99308 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $38.67 | 3 |
| L | 99309 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $54.50 | 3 |
| L | 99311 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| L | 99312 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| L | 99313 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| L | 99321 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| L | 99322 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| L | 99323 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| L | 99324 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $40.22 | 3 |
| L | 99325 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $58.91 | 3 |
| L | 99326 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $85.38 | 3 |
| L | 99327 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $112.36 | 3 |
| L | 99331 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| L | 99332 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| L | 99333 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| L | 99334 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $31.14 | 3 |
| L | 99335 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $49.31 | 3 |
| L | 99336 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $76.03 | 3 |
| L | 99341 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $39.96 | 3 |
| L | 99342 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $58.91 | 3 |
| L | 99343 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $85.89 | 3 |
| L | 99499 | UNLISTED EVALUATION AND MANAGEME | 1/1/1992 | $0.01 | 5 |
| L | A4454 | TAPE, ALL TYPES, ALL SIZES | 7/1/2003 | INVALID | N |
| L | A4460 | ELASTIC BANDAGE, PER ROLL (EG; C | 7/1/2003 | INVALID | N |
| L | A4465 | NONELASTIC BINDER FOR EXREMITY | 10/1/2000 | $21.63 | 3 |
| L | A4490 | SURGICAL STOCKING ABOVE KNEE LEN | 4/1/2003 | NC | 9 |
| L | A4495 | SURGICAL STOCKING THIGH LENGTH, | 4/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | A4500 | SURGICAL STOCKING BELOW KNEE LEN | 1/1/2003 | NC | 9 |
| L | A4510 | SURGICAL STOCKING FULL-LENGTH, E | 1/1/2003 | NC | 9 |
| L | A4550 | SURGICAL TRAYS | 10/1/2000 | $27.04 | 3 |
| L | A4570 | SPLINT -H | 7/1/2002 | NC | 9 |
| L | A4572 | RIB BELT -H | 7/1/2003 | INVALID | N |
| L | A4580 | CAST SUPPLIES (E.G.,PLASTER) | 7/1/2002 | NC | 9 |
| L | A4590 | SPECIAL CASTING MATERIAL (E.G.,F | 7/1/2002 | NC | 9 |
| L | A4649 | SURGICAL SUPPLY; MISCELLANEOUS | 12/20/2004 | $0.01 | 5 |
| L | A5500 | FOR DIABETICS ONLY, FITTING (INC | 10/1/2006 | $59.36 | 3 |
| L | A5501 | FOR DIABETICS ONLY, FITTING (INC | 10/1/2006 | $171.85 | 3 |
| L | A5502 | FOR DIABETICS ONLY, MULTIPLE DEN | 4/1/2002 | INVALID | N |
| L | A5503 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| L | A5504 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| L | A5505 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| L | A5506 | FOR DIABETICS ONLY, MODIFICATION | 10/1/2006 | $26.40 | 3 |
| L | A5507 | FOR DIABETICS ONLY, NOT OTHERWIS | 10/1/2006 | $26.40 | 3 |
| L | A5509 | FOR DIABETICS ONLY, DIRECT FORME | 1/1/2006 | INVALID | N |
| L | A5510 | FOR DIABETICS ONLY, DIRECT FORME | 2/15/2003 | $33.00 | 3 |
| L | A5511 | FOR DIABETICS ONLY, CUSTOM-MOLDE | 1/1/2006 | INVALID | N |
| L | A5512 | FOR DIABETICS ONLY, MULT DENSITY | 10/1/2006 | $24.22 | 3 |
| L | A5513 | FOR DIABETICS ONLY, MULT DENSITY | 10/1/2006 | $36.14 | 3 |
| L | A9160 | NONCOVERED SERVICE BY PODIATRIST | 4/1/2002 | INVALID | N |
| L | E0100 | CANE, INCLUDES CANES OF ALL MATE | 10/1/2006 | $20.72 | 3 |
| L | E0105 | CANE, QUAD OR THREE-PRONG, INCLU | 10/1/2006 | $48.72 | 3 |
| L | E0110 | CRUTCHES, FOREARM, INCLUDES CRUT | 10/1/2006 | $77.59 | 3 |
| L | E0111 | CRUTCH, FOREARM, INCLUDES CRUTCH | 10/1/2006 | $53.26 | 3 |
| L | E0112 | CRUTCHES, UNDERARM, WOOD, ADJUST | 10/1/2006 | $37.00 | 3 |
| L | E0113 | CRUTCH, UNDERARM, WOOD, ADJUSTAB | 10/1/2006 | $21.13 | 3 |
| L | E0114 | CRUTCHES UNDERARM, OTHER THAN WO | 10/1/2006 | $47.19 | 3 |
| L | E0116 | CRUTCH, UNDERARM, OTHER THAN WOO | 10/1/2006 | $27.74 | 3 |
| L | E0191 | HEEL OR ELBOW PROTECTOR, EACH | 10/1/2006 | $8.49 | 3 |
| L | E1399 | DURABLE MEDICAL EQUIPMENT, MISCE | 11/1/2001 | $0.01 | 5 |
| L | G0001 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2005 | INVALID | N |
| L | G0127 | TRIMMING OF DYSTROPHIC NAILS, AN | 1/1/1999 | NC | 9 |
| L | J0120 | INJECTION, TETRACYCLINE, UP TO 2 | 2/13/2006 | $0.01 | 5 |
| L | J0150 | INJECTION, ADENOSINE FOR THERAPE | 1/1/2007 | $23.48 | 3 |
| L | J0170 | INJECTION, ADRENALIN, EPINEPHRIN | 1/1/2007 | $0.80 | 3 |
| L | J0190 | INJECTION, BIPERIDEN LACTATE, PE | 10/25/2006 | NC | 9 |
| L | J0205 | INJECTION, ALGLUCERASE, PER 10 U | 7/1/2006 | $39.22 | 3 |
| L | J0210 | INJECTION, METHYLDOPATE HCL, UP | 1/1/2007 | $10.08 | 3 |
| L | J0270 | INJECTION, ALPROSTADIL, PER 1.25 | 1/1/2007 | $1.80 | 3 |
| L | J0280 | INJECTION, AMINOPHYLLIN, UP TO 2 | 1/1/2007 | $0.39 | 3 |
| L | J0290 | INJECTION, AMPICILLIN, UP TO 500 | 1/1/2007 | $2.36 | 3 |
| L | J0300 | INJECTION, AMOBARBITAL, UP TO 12 | 1/1/2007 | $2.61 | 3 |
| L | J0330 | INJECTION, SUCCINYLCHOLINE CHLOR | 1/1/2007 | $0.18 | 3 |
| L | J0340 | INJECTION, NANDROLONE PHENPROPIO | 4/1/2002 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | J0360 | INJECTION, HYDRALAZINE HCL, UP T | 1/1/2007 | $6.51 | 3 |
| L | J0380 | INJECTION, METARAMINOL BITARTRAT | 10/15/2003 | $1.33 | 3 |
| L | J0390 | INJECTION, CHLOROQUINE HCL, UP T | 2/13/2006 | $0.01 | 5 |
| L | J0400 | INJECTION, TRIMETHAPHAN CAMSYLAT | 4/1/2002 | INVALID | N |
| L | J0460 | INJECTION, ATROPINE SULFATE, UP | 1/1/2007 | $0.63 | 3 |
| L | J0470 | INJECTION, DIMERCAPROL, PER 100 | 1/1/2007 | $25.51 | 3 |
| L | J0475 | INJECTION, BACLOFEN, 10 MG (LIOR | 1/1/2007 | $198.27 | 3 |
| L | J0500 | INJECTION, DICYCLOMINE HCL, UP T | 1/1/2007 | $15.27 | 3 |
| L | J0510 | INJECTION, BENZQUINAMIDE HCL, UP | 4/1/2002 | INVALID | N |
| L | J0520 | INJECTION, BETHANECHOL CHLORIDE, | 2/13/2006 | $0.01 | 5 |
| L | J0530 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $13.16 | 3 |
| L | J0540 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $28.37 | 3 |
| L | J0550 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $30.49 | 3 |
| L | J0560 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $21.34 | 3 |
| L | J0570 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $36.44 | 3 |
| L | J0580 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $43.11 | 3 |
| L | J0590 | INJECTION, ETHYLNOREPINEPHRINE H | 4/1/2002 | INVALID | N |
| L | J0600 | INJECTION, EDETATE CALCIUM DISOC | 1/1/2007 | $40.19 | 3 |
| L | J0610 | INJECTION, CALCIUM GLUCONATE, PE | 1/1/2007 | $0.59 | 3 |
| L | J0620 | INJECTION, CALCIUM GLYCEROPHOSPH | 11/1/2006 | $13.70 | 3 |
| L | J0630 | INJECTION, CALCITONIN-SALMON, UP | 1/1/2007 | $40.79 | 3 |
| L | J0635 | INJECTION, CALCITRIOL, 1 MCG AMP | 7/1/2003 | INVALID | N |
| L | J0640 | INJECTION, LEUCOVORIN CALCIUM, P | 1/1/2007 | $0.96 | 3 |
| L | J0670 | INJECTION, MEPIVACAINE HCL, PER | 1/1/2007 | $1.51 | 3 |
| L | J0690 | INJECTION, CEFAZOLIN SODIUM, UP | 1/1/2007 | $1.46 | 3 |
| L | J0694 | INJECTION, CEFOXITIN SODIUM, 1 G | 1/1/2007 | $7.09 | 3 |
| L | J0695 | INJECTION, CEFONICID SODIUM, 1 G | 4/1/2002 | INVALID | N |
| L | J0696 | INJECTION, CEFTRIAXONE SODIUM, P | 1/1/2007 | $1.76 | 3 |
| L | J0698 | CEFOTAXIME SODIUM, PER G (CLAFOR | 1/1/2007 | $4.43 | 3 |
| L | J0702 | INJECTION, BETAMETHASONE ACETATE | 1/1/2007 | $5.18 | 3 |
| L | J0710 | INJECTION, CEPHAPIRIN SODIUM, UP | 2/13/2006 | $0.01 | 5 |
| L | J0720 | INJECTION, CHLORAMPHENICOL SODIU | 1/1/2007 | $11.23 | 3 |
| L | J0725 | INJECTION, CHORIONIC GONADOTROPI | 1/1/2007 | $3.79 | 3 |
| L | J0730 | INJECTION, CHLORPHENIRAMINE MALE | 4/1/2002 | INVALID | N |
| L | J0743 | INJECTION, CILASTATIN SODIUM IMI | 1/1/2007 | $13.66 | 3 |
| L | J0745 | INJECTION, CODEINE PHOSPHATE, PE | 1/1/2007 | $1.05 | 3 |
| L | J0760 | INJECTION, COLCHICINE, PER 1 MG | 1/1/2007 | $4.57 | 3 |
| L | J0770 | INJECTION, COLISTIMETHATE SODIUM | 1/1/2007 | $24.45 | 3 |
| L | J0780 | INJECTION, PROCHLORPERAZINE, UP | 1/1/2007 | $2.04 | 3 |
| L | J0800 | INJECTION, CORTICOTROPIN, UP TO | 1/1/2007 | $114.53 | 3 |
| L | J0810 | INJECTION, CORTISONE ACETATE, UP | 4/1/2002 | INVALID | N |
| L | J0895 | INJECTION, DEFEROXAMINE MESYLATE | 1/1/2007 | $14.74 | 3 |
| L | J0900 | INJECTION, TESTOSTERONE ENANTHAT | 7/1/2006 | $1.38 | 3 |
| L | J0945 | INJECTION, BROMPHENIRAMINE MALEA | 1/1/2007 | $0.80 | 3 |
| L | J0970 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $34.23 | 3 |
| L | J1000 | INJECTION, DEPO-ESTRADIOL CYPION | 1/1/2007 | $5.62 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | J1020 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $2.18 | 3 |
| L | J1030 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $5.11 | 3 |
| L | J1040 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $9.45 | 3 |
| L | J1050 | INJECTION, MEDROXYPROGESTERONE A | 7/1/2003 | INVALID | N |
| L | J1060 | INJECTION, TESTOSTERONE CYPIONAT | 7/1/2006 | $4.14 | 3 |
| L | J1070 | INJECTION, TESTOSTERONE CYPIONAT | 1/1/2007 | $5.45 | 3 |
| L | J1080 | INJECTION, TESTOSTERONE CYPIONAT | 1/1/2007 | $12.82 | 3 |
| L | J1090 | INJECTION, TESTOSTERONE CYPIONAT | 4/1/2002 | INVALID | N |
| L | J1095 | INJECTION, DEXAMETHASONE ACETATE | 7/1/2003 | INVALID | N |
| L | J1100 | INJECTION, DEXAMETHASONE SODIUM | 1/1/2007 | $0.11 | 3 |
| L | J1110 | INJECTION, DIHYDROERGOTAMINE MES | 1/1/2007 | $22.58 | 3 |
| L | J1120 | INJECTION, ACETAZOLAMIDE SODIUM, | 1/1/2007 | $16.10 | 3 |
| L | J1160 | INJECTION, DIGOXIN, UP TO 0.5 MG | 1/1/2007 | $3.36 | 3 |
| L | J1165 | INJECTION, PHENYTOIN SODIUM, PER | 1/1/2007 | $0.73 | 3 |
| L | J1170 | INJECTION, HYDROMORPHONE HCL, UP | 1/1/2007 | $1.92 | 3 |
| L | J1180 | INJECTION, DYPHYLLINE, UP TO 500 | 7/1/2006 | $8.05 | 3 |
| L | J1190 | INJECTION, DEXRAZOXANE HCL, PER | 1/1/2007 | $175.19 | 3 |
| L | J1200 | INJECTION, DIPHENHYDRAMINE HCL, | 1/1/2007 | $0.80 | 3 |
| L | J1205 | INJECTION, CHLOROTHIAZIDE SODIUM | 11/1/2006 | $123.84 | 3 |
| L | J1212 | INJECTION, DMSO, DIMETHYL SULFOX | 1/1/2007 | $41.55 | 3 |
| L | J1230 | INJECTION, METHADONE HCL, UP TO | 1/1/2007 | $3.33 | 3 |
| L | J1240 | INJECTION, DIMENHYDRINATE, UP TO | 1/1/2007 | $2.93 | 3 |
| L | J1250 | INJECTION, DOBUTAMINE HCL, PER 2 | 1/1/2007 | $4.17 | 3 |
| L | J1320 | INJECTION, AMITRIPTYLINE HCL, UP | 7/1/2006 | $2.24 | 3 |
| L | J1330 | INJECTION, ERGONOVINE MALEATE, U | 2/13/2006 | $0.01 | 5 |
| L | J1380 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $12.52 | 3 |
| L | J1390 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $17.12 | 3 |
| L | J1410 | INJECTION, ESTROGEN CONJUGATED, | 1/1/2007 | $60.78 | 3 |
| L | J1435 | INJECTION, ESTRONE, PER 1 MG(EST | 7/1/2006 | $0.14 | 3 |
| L | J1440 | INJECTION, FILGRASTIM (G-CSF), 3 | 1/1/2007 | $188.29 | 3 |
| L | J1441 | INJECTION, FILGRASTIM (G-CSF), 4 | 1/1/2007 | $299.09 | 3 |
| L | J1460 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $11.83 | 3 |
| L | J1470 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $23.66 | 3 |
| L | J1480 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $35.47 | 3 |
| L | J1490 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $47.31 | 3 |
| L | J1500 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $59.14 | 3 |
| L | J1510 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $71.02 | 3 |
| L | J1520 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $82.72 | 3 |
| L | J1530 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $94.62 | 3 |
| L | J1540 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $106.54 | 3 |
| L | J1550 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $118.27 | 3 |
| L | J1561 | INJECTION, IMMUNE GLOBULIN, INTR | 7/1/2003 | INVALID | N |
| L | J1570 | INJECTION, GANCICLOVIR SODIUM, 5 | 1/1/2007 | $39.55 | 3 |
| L | J1580 | INJECTION, GARAMYCIN, GENTAMICIN | 1/1/2007 | $1.07 | 3 |
| L | J1600 | INJECTION, GOLD SODIUM THIOMALAT | 1/1/2007 | $5.41 | 3 |
| L | J1630 | INJECTION, HALOPERIDOL, UP TO 5 | 1/1/2007 | $2.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | J1631 | INJECTION, HALOPERIDOL DECANOATE | 1/1/2007 | $5.25 | 3 |
| L | J1645 | INJECTION, DALTEPARIN SODIUM, PE | 1/1/2007 | $11.12 | 3 |
| L | J1650 | INJECTION, ENOXAPARIN SODIUM, 10 | 1/1/2007 | $5.64 | 3 |
| L | J1670 | INJECTION, TETANUS IMMUNE GLOBUL | 1/1/2007 | $95.91 | 3 |
| L | J1690 | INJECTION, PREDNISOLONE TEBUTATE | 4/1/2002 | INVALID | N |
| L | J1700 | INJECTION, HYDROCORTISONE ACETAT | 4/1/2003 | $0.24 | 3 |
| L | J1710 | INJECTION, HYDROCORTISONE SODIUM | 2/13/2006 | $0.01 | 5 |
| L | J1720 | INJECTION, HYDROCORTISONE SODIUM | 1/1/2007 | $1.99 | 3 |
| L | J1730 | INJECTION, DIAZOXIDE, UP TO 300 | 1/1/2007 | $111.85 | 3 |
| L | J1739 | INJECTION, HYDROXYPROGESTERONE C | 4/1/2002 | INVALID | N |
| L | J1741 | INJECTION, HYDROXYPROGESTERONE C | 4/1/2002 | INVALID | N |
| L | J1790 | INJECTION, DROPERIDOL, UP TO 5 M | 1/1/2007 | $1.13 | 3 |
| L | J1800 | INJECTION, PROPRANOLOL HCL, UP T | 1/1/2007 | $3.80 | 3 |
| L | J1810 | INJECTION, DROPERIDOL AND FENTAN | 7/1/2006 | $5.58 | 3 |
| L | J1820 | INJECTION, INSULIN, UP TO 100 UN | 7/1/2003 | INVALID | N |
| L | J1840 | INJECTION, KANAMYCIN SULFATE, UP | 1/1/2007 | $4.07 | 3 |
| L | J1850 | INJECTION, KANAMYCIN SULFATE, UP | 1/1/2007 | $0.61 | 3 |
| L | J1885 | INJECTION, KETOROLAC TROMETHAMIN | 1/1/2007 | $0.49 | 3 |
| L | J1890 | INJECTION, CEPHALOTHIN SODIUM, U | 7/11/2005 | $0.01 | 5 |
| L | J1910 | INJECTION, KUTAPRESSIN, UP TO 2 | 4/1/2004 | INVALID | N |
| L | J1930 | INJECTION, PROPIOMAZINE, UP TO 2 | 4/1/2002 | INVALID | N |
| L | J1940 | INJECTION, FUROSEMIDE, UP TO 20 | 1/1/2007 | $0.29 | 3 |
| L | J1955 | INJECTION, LEVOCARNITINE, PER 1 | 1/1/2007 | $9.36 | 3 |
| L | J1960 | INJECTION, LEVORPHANOL TARTRATE, | 1/30/2006 | $4.54 | 3 |
| L | J1970 | INJECTION, METHOTRIMEPRAZINE, UP | 4/1/2002 | INVALID | N |
| L | J1980 | INJECTION, HYOSCYAMINE SULFATE, | 1/1/2007 | $8.70 | 3 |
| L | J1990 | INJECTION, CHLORDIAZEPOXIDE HCL, | 7/1/2006 | $21.05 | 3 |
| L | J2000 | INJECTION, LIDOCAINE HCL, 50 CC | 4/1/2004 | INVALID | N |
| L | J2010 | INJECTION, LINCOMYCIN HCL, UP TO | 1/1/2007 | $3.84 | 3 |
| L | J2060 | INJECTION, LORAZEPAM, 2 MG (ATIV | 1/1/2007 | $1.22 | 3 |
| L | J2150 | INJECTION, MANNITOL, 25% IN 50 M | 1/1/2007 | $0.86 | 3 |
| L | J2175 | INJECTION, MEPERIDINE HCL, PER 1 | 1/1/2007 | $1.79 | 3 |
| L | J2180 | INJECTION, MEPERIDINE AND PROMET | 7/1/2006 | $3.79 | 3 |
| L | J2210 | INJECTION, METHYLERGONOVINE MALE | 1/1/2007 | $4.60 | 3 |
| L | J2240 | INJECTION, METOCURINE IODIDE, UP | 4/1/2002 | INVALID | N |
| L | J2250 | INJECTION, MIDAZOLAM HCL, PER 1 | 1/1/2007 | $0.24 | 3 |
| L | J2270 | INJECTION, MORPHINE SULFATE, UP | 1/1/2007 | $2.56 | 3 |
| L | J2275 | INJECTION, MORPHINE SULFATE (PRE | 1/1/2007 | $6.50 | 3 |
| L | J2300 | INJECTION, NALBUPHINE HCL, PER 1 | 1/1/2007 | $0.58 | 3 |
| L | J2310 | INJECTION, NALOXONE HCL, PER 1 M | 1/1/2007 | $1.84 | 3 |
| L | J2320 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $3.20 | 3 |
| L | J2321 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $6.42 | 3 |
| L | J2322 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $12.79 | 3 |
| L | J2330 | INJECTION, THIOTHIXENE, UP TO 4 | 4/1/2002 | INVALID | N |
| L | J2350 | INJECTION, NIACINAMIDE, NIACIN, | 4/1/2002 | INVALID | N |
| L | J2360 | INJECTION, ORPHENADRINE CITRATE, | 1/1/2007 | $11.13 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | J2370 | INJECTION, PHENYLEPHRINE HCL, UP | 1/1/2007 | $0.73 | 3 |
| L | J2400 | INJECTION, CHLOROPROCAINE HCL, P | 1/1/2007 | $15.20 | 3 |
| L | J2405 | INJECTION, ONDANSETRON HCL, PER | 1/1/2007 | $3.71 | 3 |
| L | J2410 | INJECTION, OXYMORPHONE HCL, UP T | 1/1/2007 | $2.36 | 3 |
| L | J2440 | INJECTION, PAPAVERINE HCL, UP TO | 7/1/2006 | $0.60 | 3 |
| L | J2460 | INJECTION, OXYTETRACYCLINE HCL, | 7/1/2006 | $0.94 | 3 |
| L | J2480 | INJECTION, HYDROCHLORIDES OF OPI | 4/1/2002 | INVALID | N |
| L | J2510 | INJECTION, PENICILLIN G PROCAINE | 1/1/2007 | $8.89 | 3 |
| L | J2515 | INJECTION, PENTOBARBITAL SODIUM, | 1/1/2007 | $5.50 | 3 |
| L | J2540 | INJECTION, PENICILLIN G POTASSIU | 1/1/2007 | $0.96 | 3 |
| L | J2550 | INJECTION, PROMETHAZINE HCL, UP | 1/1/2007 | $1.85 | 3 |
| L | J2560 | INJECTION, PHENOBARBITAL SODIUM, | 1/1/2007 | $3.19 | 3 |
| L | J2590 | INJECTION, OXYTOCIN, UP TO 10 UN | 1/1/2007 | $2.18 | 3 |
| L | J2597 | INJECTION, DESMOPRESSIN ACETATE, | 1/1/2007 | $2.66 | 3 |
| L | J2640 | INJECTION, PREDNISOLONE SODIUM P | 4/1/2002 | NC | 9 |
| L | J2650 | INJECTION, PREDNISOLONE ACETATE, | 1/1/2007 | $0.44 | 3 |
| L | J2675 | INJECTION, PROGESTERONE, PER 50 | 1/1/2007 | $1.69 | 3 |
| L | J2680 | INJECTION, FLUPHENAZINE DECANOAT | 1/1/2007 | $1.49 | 3 |
| L | J2690 | INJECTION, PROCAINAMIDE HCL, UP | 1/1/2007 | $2.24 | 3 |
| L | J2700 | INJECTION, OXACILLIN SODIUM, UP | 1/1/2007 | $1.54 | 3 |
| L | J2710 | INJECTION, NEOSTIGMINE METHYLSUL | 1/1/2007 | $0.08 | 3 |
| L | J2720 | INJECTION, PROTAMINE SULFATE, PE | 1/1/2007 | $0.43 | 3 |
| L | J2730 | INJECTION, PRALIDOXIME CHLORIDE, | 1/1/2007 | $66.49 | 3 |
| L | J2760 | INJECTION, PHENTOLAMINE MESYLATE | 7/1/2006 | $23.72 | 3 |
| L | J2765 | INJECTION, METOCLOPRAMIDE HCL, U | 1/1/2007 | $0.44 | 3 |
| L | J2790 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $81.59 | 3 |
| L | J2800 | INJECTION, METHOCARBAMOL, UP TO | 1/1/2007 | $12.28 | 3 |
| L | J2820 | INJECTION, SARGRAMOSTIM (GM-CSF) | 1/1/2007 | $24.89 | 3 |
| L | J2860 | INJECTION, SECOBARBITAL SODIUM, | 4/1/2002 | INVALID | N |
| L | J2910 | INJECTION, AUROTHIOGLUCOSE, UP T | 7/1/2006 | $24.50 | 3 |
| L | J2912 | INJECTION, SODIUM CHLORIDE, 0.9% | 1/1/2007 | INVALID | N |
| L | J2920 | INJECTION, METHYLPREDNISOLONE SO | 1/1/2007 | $1.95 | 3 |
| L | J2930 | INJECTION, METHYLPREDNISOLONE SO | 1/1/2007 | $2.48 | 3 |
| L | J2950 | INJECTION, PROMAZINE HCL, UP TO | 11/1/2006 | $0.38 | 3 |
| L | J2970 | INJECTION, METHICILLIN SODIUM, U | 4/1/2002 | INVALID | N |
| L | J2995 | INJECTION, STREPTOKINASE, PER 25 | 7/1/2006 | $79.50 | 3 |
| L | J3000 | INJECTION, STREPTOMYCIN, UP TO 1 | 1/1/2007 | $6.79 | 3 |
| L | J3010 | INJECTION, FENTANYL CITRATE, 0.1 | 1/1/2007 | $0.34 | 3 |
| L | J3070 | INJECTION, PENTAZOCINE, 30 MG (T | 1/1/2007 | $5.80 | 3 |
| L | J3080 | INJECTION, CHLORPROTHIXENE, UP T | 4/1/2002 | INVALID | N |
| L | J3105 | INJECTION, TERBUTALINE SULFATE, | 1/1/2007 | $3.86 | 3 |
| L | J3120 | INJECTION, TESTOSTERONE ENANTHAT | 1/1/2007 | $5.18 | 3 |
| L | J3130 | INJECTION, TESTOSTERONE ENANTHAT | 1/1/2007 | $10.35 | 3 |
| L | J3140 | INJECTION, TESTOSTERONE SUSPENSI | 7/5/2004 | $0.62 | 3 |
| L | J3150 | INJECTION, TESTOSTERONE PROPIONA | 8/21/2006 | $5.07 | 3 |
| L | J3230 | INJECTION, CHLORPROMAZINE HCL, U | 1/1/2007 | $3.95 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | J3240 | INJECTION, THYROTROPIN ALPHA, 0. | 1/1/2007 | $765.20 | 3 |
| L | J3250 | INJECTION, TRIMETHOBENZAMIDE HCL | 1/1/2007 | $4.03 | 3 |
| L | J3260 | INJECTION, TOBRAMYCIN SULFATE, U | 1/1/2007 | $1.97 | 3 |
| L | J3265 | INJECTION, TORSEMIDE, 10 MG/ML ( | 1/1/2007 | $2.35 | 3 |
| L | J3270 | INJECTION, IMIPRAMINE HCL, UP TO | 4/1/2002 | INVALID | N |
| L | J3280 | INJECTION, THIETHYLPERAZINE MALE | 2/13/2006 | $0.01 | 5 |
| L | J3301 | INJECTION, TRIAMCINOLONE ACETONI | 1/1/2007 | $1.44 | 3 |
| L | J3302 | INJECTION, TRIAMCINOLONE DIACETA | 7/1/2006 | $0.28 | 3 |
| L | J3303 | INJECTION, TRAMCINOLONE HEXACETO | 1/1/2007 | $3.42 | 3 |
| L | J3305 | INJECTION, TRIMETREXATE GLUCORON | 1/1/2007 | $145.06 | 3 |
| L | J3310 | INJECTION, PERPHENAZINE, UP TO 5 | 2/13/2006 | $0.01 | 5 |
| L | J3320 | INJECTION, SPECTINOMYCIN HCL, UP | 1/1/2007 | $18.30 | 3 |
| L | J3350 | INJECTION, UREA, UP TO 40 G (URE | 2/13/2006 | $0.01 | 5 |
| L | J3360 | INJECTION, DIAZEPAM, UP TO 5 MG | 1/1/2007 | $0.78 | 3 |
| L | J3364 | INJECTION, UROKINASE, 5000 IU VI | 7/1/2006 | $9.16 | 3 |
| L | J3365 | INJECTION, IV, UROKINASE, 250,00 | 7/1/2006 | $457.73 | 3 |
| L | J3370 | INJECTION, VANCOMYCIN HCL, UP TO | 1/1/2007 | $3.44 | 3 |
| L | J3390 | INJECTION, METHOXAMINE, UP TO 20 | 4/1/2002 | INVALID | N |
| L | J3400 | INJECTION, TRIFLUPROMAZINE HCL, | 2/13/2006 | $0.01 | 5 |
| L | J3410 | INJECTION, HYDROXYZINE HCL, UP T | 1/1/2007 | $0.21 | 3 |
| L | J3420 | INJECTION, VITAMIN B-12 CYANOCOB | 1/1/2007 | $0.34 | 3 |
| L | J3430 | INJECTION, PHYTONADIONE (VITAMIN | 1/1/2007 | $2.89 | 3 |
| L | J3450 | INJECTION, MEPHENTERMINE SULFATE | 4/1/2002 | INVALID | N |
| L | J3470 | INJECTION, HYALURONIDASE, UP TO | 1/1/2007 | $16.71 | 3 |
| L | J3475 | INJECTION, MAGNESIUM SULFATE, PE | 1/1/2007 | $0.15 | 3 |
| L | J3480 | INJECTION, POTASSIUM CHLORIDE, P | 7/1/2006 | $0.02 | 3 |
| L | J3490 | UNCLASSIFIED DRUGS | 11/1/2004 | $0.01 | 5 |
| L | J3520 | EDETATE DISODIUM, PER 150 MG (EN | 1/1/2001 | NC | 9 |
| L | J3530 | NASAL VACCINE INHALATION | 1/17/2005 | NC | 9 |
| L | J3535 | DRUG ADMINISTERED THROUGH A METE | 1/1/2005 | $0.01 | 5 |
| L | J3570 | LAETRILE, AMYGDALIN, VITAMIN B17 | 3/1/1989 | NC | 9 |
| L | J7030 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $1.06 | 3 |
| L | J7040 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $0.53 | 3 |
| L | J7042 | 5% DEXTROSE/NORMAL SALINE (500 M | 7/1/2006 | $0.39 | 3 |
| L | J7050 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $0.27 | 3 |
| L | J7051 | STERILE SALINE OR WATER, UP TO 5 | 1/1/2006 | INVALID | N |
| L | J7060 | 5% DEXTROSE/WATER (500 ML = 1 UN | 1/1/2007 | $1.30 | 3 |
| L | J7070 | INFUSION, D-5-W, 1000 CC | 1/1/2007 | $2.60 | 3 |
| L | J7100 | INFUSION, DEXTRAN 40, 500 ML (GE | 1/1/2007 | $13.98 | 3 |
| L | J7110 | INFUSION, DEXTRAN 75, 500 ML (GE | 1/1/2007 | $8.66 | 3 |
| L | J7120 | RINGERS LACTATE INFUSION, UP TO | 1/1/2007 | $0.88 | 3 |
| L | J7130 | HYPERTONIC SALINE SOLUTION, 50 O | 3/1/1989 | $0.01 | 5 |
| L | J7191 | FACTOR VIII (ANTI-HEMOPHILIC FAC | 2/1/1999 | $2.20 | 3 |
| L | J7197 | ANTITHROMBIN III (HUMAN), PER I. | 1/1/2007 | $1.36 | 3 |
| L | J7310 | GANCICLOVIR, 4.5 MG, LONG-ACTING | 12/20/2004 | NC | 9 |
| L | J7506 | PREDNISONE, ORAL, PER 5 MG (LIQU | 7/1/2006 | $0.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | J7509 | METHYLPREDNISOLONE, ORAL, PER 4 | 7/1/2006 | $0.07 | 3 |
| L | J7510 | PREDNISOLONE, ORAL, PER 5 MG (DE | 1/1/2007 | $0.09 | 3 |
| L | J7599 | IMMUNOSUPPRESSIVE DRUG, NOT OTHE | 1/1/1996 | NC | 9 |
| L | J7627 | BITOLTEROL MESYLATE, 0.2%, PER 1 | 4/1/2001 | NC | 9 |
| L | J9015 | ALDESLEUKIN, PER SINGLE USE VIAL | 1/1/2007 | $739.52 | 3 |
| L | J9211 | IDARUBICIN HCL, 5 MG (IDAMYCIN) | 1/1/2007 | $285.38 | 3 |
| L | J9213 | INTERFERON ALFA-2A, RECOMBINANT, | 1/1/2007 | $37.29 | 3 |
| L | J9214 | INTERFERON ALFA-2B, RECOMBINANT, | 1/1/2007 | $13.82 | 3 |
| L | J9215 | INTERFERON ALFA-N3, (HUMAN LEUKO | 2/13/2006 | $0.01 | 5 |
| L | J9216 | INTERFERON GAMMA-1B, 3 MILLION U | 7/1/2006 | $289.87 | 3 |
| L | J9217 | LEUPROLIDE ACETATE (FOR DEPOT SU | 1/1/2007 | $230.38 | 3 |
| L | J9266 | PEGASPARGASE, PER SINGLE DOSE VI | 1/1/2007 | $1,687.85 | 3 |
| L | J9270 | PLICAMYCIN, 2500 MCG (MITHRACIN) | 5/24/2001 | $98.74 | 3 |
| L | J9340 | THIOTEPA, 15 MG (THIOPLEX) | 1/1/2007 | $40.61 | 3 |
| L | K0628 | FOR DIABETICS ONLY, MULTIPLE DEN | 1/1/2006 | INVALID | N |
| L | K0629 | FOR DIABETICS ONLY, MULT DENSITY | 1/1/2006 | INVALID | N |
| L | L1902 | ANKLE FOOT ORTHOSIS, ANKLE GAUNT | 10/1/2006 | $66.23 | 3 |
| L | L1906 | ANKLE FOOT ORTHOSIS, MULTILIGAME | 10/1/2006 | $81.37 | 3 |
| L | L1930 | ANKLE FOOT ORTHOSIS, PLASTIC OR | 10/1/2006 | $186.93 | 3 |
| L | L1940 | ANKLE FOOT ORTHOSIS, PLASTIC OR | 10/1/2006 | $359.47 | 3 |
| L | L1970 | ANKLE FOOT ORTHOSIS, PLASTIC WIT | 10/1/2006 | $500.49 | 3 |
| L | L2112 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $327.31 | 3 |
| L | L2114 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $401.63 | 3 |
| L | L2116 | ANKLE FOOT ORTHOSIS, FRACTURE OR | 10/1/2006 | $481.69 | 3 |
| L | L2270 | ADDITIONS TO LOWER EXTREMITY VAR | 10/1/2006 | $48.45 | 3 |
| L | L2275 | ADDITION TO LOWER EXTREMITY, VAR | 10/1/2006 | $105.83 | 3 |
| L | L2280 | ADDITION TO LOWER EXTREMITY, MOL | 10/1/2006 | $306.85 | 3 |
| L | L2820 | ADDITION TO LOWER EXTREMITY ORTH | 10/1/2006 | $58.76 | 3 |
| L | L2999 | LOWER LIMB ORTHOSES, NOT OTHERWI | 10/1/2005 | $5,572.80 | 3 |
| L | L3000 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $200.43 | 3 |
| L | L3001 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $84.40 | 3 |
| L | L3002 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $103.05 | 3 |
| L | L3003 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $111.17 | 3 |
| L | L3010 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $111.17 | 3 |
| L | L3020 | FOOT INSERT, REMOVABLE, MOLDED T | 10/1/2006 | $126.58 | 3 |
| L | L3030 | FOOT INSERT, REMOVABLE, FORMED T | 10/1/2006 | $48.69 | 3 |
| L | L3040 | FOOT, ARCH SUPPORT, REMOVABLE, P | 10/1/2006 | $30.02 | 3 |
| L | L3050 | FOOT, ARCH SUPPORT, REMOVABLE, P | 10/1/2006 | $30.02 | 3 |
| L | L3060 | FOOT, ARCH SUPPORT, REMOVABLE, P | 10/1/2006 | $47.05 | 3 |
| L | L3070 | FOOT, ARCH SUPPORT, NONREMOVABLE | 10/1/2006 | $20.30 | 3 |
| L | L3080 | FOOT, ARCH SUPPORT, NONREMOVABLE | 10/1/2006 | $20.30 | 3 |
| L | L3090 | FOOT, ARCH SUPPORT, NONREMOVABLE | 10/1/2006 | $25.98 | 3 |
| L | L3100 | HALLUS-VALGUS NIGHT DYNAMIC SPLI | 10/1/2006 | $27.59 | 3 |
| L | L3140 | FOOT, ABDUCTION ROTATION BAR, IN | 10/1/2006 | $56.80 | 3 |
| L | L3150 | FOOT, ABDUCTION ROTATION BAR, WI | 10/1/2006 | $51.95 | 3 |
| L | L3170 | FOOT, PLASTIC, SILICONE OR EQUAL | 10/1/2006 | $32.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | L3201 | ORTHOPEDIC SHOE, OXFORD WITH SUP | 10/1/2005 | $45.20 | 3 |
| L | L3202 | ORTHOPEDIC SHOE, OXFORD WITH SUP | 10/1/2005 | $45.20 | 3 |
| L | L3203 | ORTHOPEDIC SHOE, OXFORD WITH SUP | 10/1/2005 | $50.23 | 3 |
| L | L3204 | ORTHOPEDIC SHOE, HIGHTOP WITH SU | 10/1/2005 | $45.20 | 3 |
| L | L3206 | ORTHOPEDIC SHOE, HIGHTOP WITH SU | 10/1/2005 | $50.23 | 3 |
| L | L3207 | ORTHOPEDIC SHOE, HIGHTOP WITH SU | 10/1/2005 | $50.23 | 3 |
| L | L3208 | SURGICAL BOOT, EACH, INFANT | 10/1/2005 | $35.16 | 3 |
| L | L3209 | SURGICAL BOOT, EACH, CHILD | 10/1/2005 | $35.16 | 3 |
| L | L3211 | SURGTICAL BOOT, EACH, JUNIOR | 10/1/2005 | $40.18 | 3 |
| L | L3212 | BENESCH BOOT, PAIR, INFANT | 10/1/2005 | $45.20 | 3 |
| L | L3213 | BENESCH BOOT, PAIR, CHILD | 10/1/2005 | $45.20 | 3 |
| L | L3214 | BENESCH BOOT, PAIR, JUNIOR | 10/1/2005 | $50.23 | 3 |
| L | L3215 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $67.40 | 3 |
| L | L3216 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $107.30 | 3 |
| L | L3217 | ORTHOPEDIC FOOTWEAR, LADIES SHOE | 10/1/2005 | $83.55 | 3 |
| L | L3218 | ORTHOPEDIC FOOTWEAR, WOMAN'S SUR | 7/1/2003 | INVALID | N |
| L | L3219 | ORHTOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $78.46 | 3 |
| L | L3221 | ORTHOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $137.20 | 3 |
| L | L3222 | ORTHOPEDIC FOOTWEAR, MENS SHOE, | 10/1/2005 | $101.15 | 3 |
| L | L3223 | ORTHOPEDIC FOOTWEAR, MAN'S SURGI | 7/1/2003 | INVALID | N |
| L | L3230 | ORTHOPEDIC FOOTWEAR, CUSTOM SHOE | 10/1/2005 | $241.49 | 3 |
| L | L3250 | ORTHOPEDIC FOOTWEAR, CUSTOM MOLD | 10/1/2005 | $203.84 | 3 |
| L | L3251 | FOOT, SHOE MOLDED TO PATIENT MOD | 1/1/1994 | NC | 9 |
| L | L3252 | FOOT, SHOE MOLDED TO PATIENT MOD | 10/1/2005 | $164.66 | 3 |
| L | L3253 | FOOT, MOLDED SHOE PLASTAZOTE (OR | 10/1/2005 | $78.28 | 3 |
| L | L3254 | NONSTANDARD SIZE OR WIDTH | 10/1/2005 | $16.08 | 3 |
| L | L3255 | NONSTANDARD SIZE OR LENGTH | 10/1/2005 | $16.08 | 3 |
| L | L3257 | ORTHOPEDIC FOOTWEAR, ADDITIONAL | 10/1/2005 | $45.20 | 3 |
| L | L3260 | AMBULATORY SURGICAL BOOT, EACH | 10/1/2005 | $100.45 | 3 |
| L | L3265 | PLASTAZOTE SANDAL, EACH | 10/1/2005 | $45.20 | 3 |
| L | L3300 | LIFT, ELEVATION, HEEL, TAPERED T | 10/1/2006 | $33.28 | 3 |
| L | L3310 | LIFT, ELEVATION, HEEL AND SHOE, | 10/1/2006 | $51.67 | 3 |
| L | L3320 | LIFT, ELEVATION, HEEL AND SOLE, | 10/1/2005 | $52.78 | 3 |
| L | L3330 | LIFT, ELEVATION, METAL EXTENSION | 10/1/2006 | $361.10 | 3 |
| L | L3332 | LIFT, ELEVATION, INSIDE SHOE, TA | 10/1/2006 | $47.05 | 3 |
| L | L3334 | LIFT, ELEVATION, HEEL, PER INCH | 10/1/2006 | $24.34 | 3 |
| L | L3340 | HEEL WEDGE, SACH | 10/1/2006 | $54.37 | 3 |
| L | L3350 | HEELK WEDGE | 10/1/2006 | $14.60 | 3 |
| L | L3360 | SOLE WEDGE, OUTSIDE SOLE | 10/1/2006 | $22.72 | 3 |
| L | L3370 | SOLE WEDGE, BETWEEN SOLE | 10/1/2006 | $31.66 | 3 |
| L | L3380 | CLUBFOOT WEDGE | 10/1/2006 | $31.66 | 3 |
| L | L3390 | OUTFLARE WEDGE | 10/1/2006 | $31.66 | 3 |
| L | L3400 | METATARSAL BAR WEDGE, ROCKER | 10/1/2006 | $25.98 | 3 |
| L | L3410 | METATARSAL BAR WEDGE, BETWEEN SO | 10/1/2006 | $59.23 | 3 |
| L | L3420 | FULL SOLE AND HEEL WEDGE, BETWEE | 10/1/2006 | $34.90 | 3 |
| L | L3430 | HEEL, COUNTER, PLASTIC REINFORCE | 10/1/2006 | $102.24 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | L3440 | HEEL, COUNTER, LEATHER REINFORCE | 10/1/2006 | $48.69 | 3 |
| L | L3450 | HEEL, SACH CUSHION TYPE | 10/1/2006 | $67.35 | 3 |
| L | L3455 | HEEL, NEW LEATHER, STANDARD | 10/1/2006 | $25.98 | 3 |
| L | L3460 | HEEL, NEW RUBBER, STANDARD | 10/1/2006 | $21.91 | 3 |
| L | L3465 | HEEL, THOMAS WITH WEDGE | 10/1/2006 | $37.33 | 3 |
| L | L3470 | HEEL, THOMAS EXTENDED TO BALL | 10/1/2006 | $39.75 | 3 |
| L | L3480 | HEEL, PAD AND DEPRESSION FOR SPU | 10/1/2006 | $39.75 | 3 |
| L | L3485 | HEEL, PAD, REMOVABLE FOR SPUR | 10/1/2005 | $16.71 | 3 |
| L | L3500 | MISCELLANEOUS SHOE ADDITION, INS | 10/1/2006 | $18.67 | 3 |
| L | L3510 | MISCELLANEOUS SHOE ADDITION, INS | 10/1/2006 | $18.67 | 3 |
| L | L3520 | MISCELLANEOUS SHOE ADDITION, INS | 10/1/2006 | $20.30 | 3 |
| L | L3530 | MISCELLANEOUS SHOE ADDITION, SOL | 10/1/2006 | $20.30 | 3 |
| L | L3540 | MISCELLANEOUS SHOE ADDITION, SOL | 10/1/2006 | $32.46 | 3 |
| L | L3550 | MISCELLANEOUS SHOE ADDITION, TOE | 10/1/2006 | $5.69 | 3 |
| L | L3560 | MISCELLANEOUS SHOE ADDITION, TOE | 10/1/2006 | $14.60 | 3 |
| L | L3570 | MISCELLANEOUS SHOE ADDITION, SPE | 10/1/2006 | $54.37 | 3 |
| L | L3580 | MISCELLANEOUS SHOE ADDITON, CONV | 10/1/2006 | $16.84 | 3 |
| L | L3590 | MISCELLANEOUS SHOE ADDITION, CON | 10/1/2006 | $32.75 | 3 |
| L | L3595 | MISCELLANEOUS SHOE ADDITION, MAR | 10/1/2006 | $18.71 | 3 |
| L | L3600 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $48.69 | 3 |
| L | L3610 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $64.10 | 3 |
| L | L3620 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $48.69 | 3 |
| L | L3630 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $64.10 | 3 |
| L | L3640 | TRANSFER OF AN ORTHOSIS FROM ONE | 10/1/2006 | $27.59 | 3 |
| L | L3649 | UNLISTED PROCEDURES FOR FOOT ORT | 10/1/2005 | $928.80 | 3 |
| L | L4210 | REPAIR OF ORTHOTIC DEVICE, REPAI | 10/1/2005 | $200.92 | 3 |
| L | L4360 | WALKING BOOT,PNEUMATIC, W/OR W/O | 10/1/2006 | $249.79 | 3 |
| L | L4386 | NON-PNEUMATIC WALKING SPLINT,WIT | 10/1/2006 | $119.76 | 3 |
| L | L5000 | PARTIAL FOOT, SHOE INSERT WITH L | 10/1/2006 | $364.22 | 3 |
| L | L5010 | PARTIAL FOOT, MOLDED SOCKET, ANK | 10/1/2006 | $877.60 | 3 |
| L | L5020 | PARTIAL FOOT, MOLDED SOCKET, TIB | 10/1/2006 | $1,627.52 | 3 |
| L | L8100 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8110 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8120 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8130 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8140 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8150 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8160 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8170 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8180 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8190 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8200 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8210 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8220 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | L8230 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| L | M0300 | IV CHELATION THERAPY (CHEMICAL E | 8/30/1994 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| L | Q0185 | DERMAL AND EPIDERMAL TISSUE, OF | 4/1/2002 | INVALID | N |
| L | Q4037 | CAST SUPPLIES, SHORT LEG CAST, A | 7/1/2001 | $11.69 | 3 |
| L | Q4038 | CAST SUPPLIES, SHORT LEG CAST, A | 7/1/2001 | $29.27 | 3 |
| L | Q4039 | CAST SUPPLIES, SHORT LEG CAST, P | 7/1/2001 | $5.85 | 3 |
| L | Q4040 | CAST SUPPLIES, SHORT LEG CAST, P | 7/1/2001 | $14.64 | 3 |
| L | Q4045 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $8.25 | 3 |
| L | Q4046 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $13.27 | 3 |
| L | Q4047 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $4.12 | 3 |
| L | Q4048 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $6.64 | 3 |
| L | S0390 | ROUTINE FOOT CARE; REMOVAL AND/O | 1/1/2003 | NC | 9 |
| N | 10040 | ACNE SURGERY (EG MARSUPIALIZATIO | 1/1/2007 | $58.13 | 3 |
| N | 10060 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2007 | $64.88 | 3 |
| N | 10061 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2007 | $116.52 | 3 |
| N | 10080 | INCISION AND DRAINAGE OF PILONID | 1/1/2007 | $113.92 | 3 |
| N | 10120 | INCISION AND REMOVAL OF FOREIGN | 1/1/2007 | $91.34 | 3 |
| N | 10121 | INCISION AND REMOVAL OF FOREIGN | 1/1/2007 | $169.71 | 3 |
| N | 10140 | INCISION AND DRAINAGE OF HEMATOM | 1/1/2007 | $90.83 | 3 |
| N | 10160 | PUNCTURE ASPIRATION OF ABSCESS H | 1/1/2007 | $76.29 | 3 |
| N | 11000 | DEBRIDEMENT OF EXTENSIVE ECZEMAT | 1/1/2007 | $32.44 | 3 |
| N | 11001 | DEBRIDEMENT OF EXTENSIVE ECZEMAT | 1/1/2007 | $14.79 | 3 |
| N | 11010 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $60.93 | 3 |
| N | 11011 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $71.93 | 3 |
| N | 11012 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $104.68 | 3 |
| N | 11040 | DEBRIDEMENT; SKIN, PARTIAL THICK | 1/1/2007 | $28.03 | 3 |
| N | 11055 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $26.99 | 3 |
| N | 11056 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $34.25 | 3 |
| N | 11057 | PARING OR CUTTING OF BENIGN HYPE | 1/1/2007 | $42.30 | 3 |
| N | 11100 | BIOPSY OF SKIN SUBCUTANEOUS TISS | 1/1/2007 | $54.24 | 3 |
| N | 11101 | BIOPSY OF SKIN SUBCUTANEOUS TISS | 1/1/2007 | $19.72 | 3 |
| N | 11300 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $39.70 | 3 |
| N | 11301 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $51.90 | 3 |
| N | 11305 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $41.26 | 3 |
| N | 11306 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $56.05 | 3 |
| N | 11310 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $48.79 | 3 |
| N | 11311 | SHAVING OF EPIDERMAL OR DERMAL L | 1/1/2007 | $60.46 | 3 |
| N | 11400 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $75.51 | 3 |
| N | 11401 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $87.97 | 3 |
| N | 11402 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $100.43 | 3 |
| N | 11403 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $113.14 | 3 |
| N | 11404 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $129.23 | 3 |
| N | 11406 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $159.59 | 3 |
| N | 11420 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $73.70 | 3 |
| N | 11421 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $93.94 | 3 |
| N | 11422 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $105.10 | 3 |
| N | 11423 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $124.56 | 3 |
| N | 11424 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $142.47 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 11426 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $199.82 | 3 |
| N | 11440 | EXCISION, OTHER BENIGN LESION IN | 1/1/2007 | $86.93 | 3 |
| N | 11441 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $102.50 | 3 |
| N | 11442 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $114.96 | 3 |
| N | 11443 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $140.91 | 3 |
| N | 11444 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $179.57 | 3 |
| N | 11446 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $232.51 | 3 |
| N | 11719 | TRIMMING OF NONDYSTROPHIC NAILS, | 1/1/2007 | $11.42 | 3 |
| N | 11720 | DEBRIDEMENT OF NAIL(S) BY ANY ME | 1/1/2007 | $18.17 | 3 |
| N | 11721 | DEBRIDEMENT OF NAIL(S) BY ANY ME | 1/1/2007 | $27.25 | 3 |
| N | 11730 | AVULSION OF NAIL PLATE PARTIAL O | 1/1/2007 | $59.69 | 3 |
| N | 11732 | AVULSION OF NAIL PLATE PARTIAL O | 1/1/2007 | $28.03 | 3 |
| N | 11740 | EVACUATION OF SUBUNGUAL HEMATOMA | 1/1/2007 | $24.91 | 3 |
| N | 11750 | EXCISION OF NAIL AND NAIL MATRIX | 1/1/2007 | $110.29 | 3 |
| N | 11900 | INJECTION INTRALESIONAL UP TO AN | 1/1/2007 | $30.88 | 3 |
| N | 11901 | INJECTION INTRALESIONAL; MORE TH | 1/1/2007 | $38.67 | 3 |
| N | 11975 | INSERTION, IMPLANTABLE CONTRACEP | 1/1/2007 | $79.67 | 3 |
| N | 11976 | REMOVAL, IMPLANTABLE CONTRACEPTI | 1/1/2007 | $96.27 | 3 |
| N | 11977 | REMOVAL WITH REINSERTION, IMPLAN | 1/1/2007 | $154.40 | 3 |
| N | 12001 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $99.65 | 3 |
| N | 12002 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $105.88 | 3 |
| N | 12004 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $124.04 | 3 |
| N | 12005 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $154.66 | 3 |
| N | 12006 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $192.29 | 3 |
| N | 12007 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $217.72 | 3 |
| N | 12011 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $105.36 | 3 |
| N | 12013 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $115.48 | 3 |
| N | 12014 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $136.76 | 3 |
| N | 12015 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $171.79 | 3 |
| N | 12016 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $203.71 | 3 |
| N | 12017 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $183.47 | 3 |
| N | 12018 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $43.70 | 3 |
| N | 12020 | TREATMENT OF SUPERFICIAL WOUND D | 1/1/2007 | $175.16 | 3 |
| N | 12021 | TREATMENT OF SUPERFICIAL WOUND D | 1/1/2007 | $101.46 | 3 |
| N | 12031 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $119.63 | 3 |
| N | 12032 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $168.16 | 3 |
| N | 12041 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $132.60 | 3 |
| N | 12042 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $160.37 | 3 |
| N | 12051 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $154.40 | 3 |
| N | 12052 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $160.11 | 3 |
| N | 12053 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $171.27 | 3 |
| N | 16000 | INITIAL TREATMENT FIRST DEGREE B | 1/1/2007 | $47.49 | 3 |
| N | 16020 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $56.31 | 3 |
| N | 16025 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $98.87 | 3 |
| N | 16030 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $116.78 | 3 |
| N | 16036 | ESCHAROTOMY; EACH ADDITIONAL INC | 1/1/2007 | $59.69 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 17000 | DESTRUCTION BY ANY METHOD, INCLU | 1/1/2007 | $41.52 | 3 |
| N | 17003 | DESTRUCTION BY ANY METHOD, INCLU | 1/1/2007 | $7.01 | 3 |
| N | 17004 | DESTRUCTION, ALL BENIGN OR PREMA | 1/1/2007 | $135.20 | 3 |
| N | 17110 | DESTRUCTION, OF FLAT WARTS, MOLL | 1/1/2007 | $60.20 | 3 |
| N | 17111 | DESTRUCTION BY ANY METHOD OF FLA | 1/1/2007 | $68.51 | 3 |
| N | 17250 | CHEMICAL CAUTERIZATION OF GRANUL | 1/1/2007 | $46.19 | 3 |
| N | 17340 | CRYOTHERAPY (CO2 SLUSH, LIQUID N | 1/1/2007 | $30.62 | 3 |
| N | 17999 | UNLISTED PROCEDURE SKIN MUCOUS M | 8/1/1986 | $0.01 | 5 |
| N | 19000 | PUNCTURE ASPIRATION OF CYST OF B | 1/1/2007 | $75.51 | 3 |
| N | 19001 | PUNCTURE ASPIRATION OF CYST OF B | 1/1/2007 | $18.42 | 3 |
| N | 19100 | BIOPSY OF BREAST; PERCUTANEOUS, | 1/1/2007 | $91.34 | 3 |
| N | 19367 | BREAST RECONSTRUCTION W/TRANSVER | 1/1/2007 | $241.13 | 3 |
| N | 19368 | BREAST RECONSTRUCTION W/TRANSVER | 1/1/2007 | $295.10 | 3 |
| N | 19369 | BREAST RECONSTRUCTION W/TRANSVER | 1/1/2007 | $273.67 | 3 |
| N | 19499 | UNLISTED PROCEDURE BREAST | 2/1/1994 | $0.01 | 5 |
| N | 20000 | INCISION OF SOFT TISSUE ABSCESS | 1/1/2007 | $131.57 | 3 |
| N | 20520 | REMOVAL OF FOREIGN BODY IN MUSCL | 1/1/2007 | $129.23 | 3 |
| N | 20550 | INJECTION(S); TENDON SHEATH, LIG | 1/1/2007 | $40.22 | 3 |
| N | 20552 | INJECTION(S); SINGLE OR MULTIPLE | 7/1/2004 | NC | 9 |
| N | 20600 | ARTHROCENTESIS, ASPIRATION AND/O | 1/1/2007 | $36.07 | 3 |
| N | 20605 | ARTHROCENTESIS, ASPIRATION AND/O | 1/1/2007 | $39.44 | 3 |
| N | 20610 | ARTHROCENTESIS ASPIRATION AND/OR | 1/1/2007 | $48.01 | 3 |
| N | 20999 | UNLISTED PROCEDURE MUSCULOSKELET | 2/1/1994 | $0.01 | 5 |
| N | 21750 | CLOSURE OF MEDIAN STERNOTOMY SEP | 1/1/2007 | $96.07 | 3 |
| N | 23330 | REMOVAL OF FOREIGN BODY SHOULDER | 1/1/2007 | $149.99 | 3 |
| N | 23500 | CLOSED TREATMENT OF CLAVICULAR F | 1/1/2007 | $136.50 | 3 |
| N | 23520 | CLOSED TREATMENT OF STERNOCLAVIC | 1/1/2007 | $139.09 | 3 |
| N | 23540 | CLOSED TREATMENT OF ACROMIOCLAVI | 1/1/2007 | $139.87 | 3 |
| N | 23570 | CLOSED TREATMENT OF SCAPULAR FRA | 1/1/2007 | $145.58 | 3 |
| N | 23600 | CLOSED TREATMENT OF PROXIMAL HUM | 1/1/2007 | $206.82 | 3 |
| N | 23620 | CLOSED TREATMENT OF GREATER TUBE | 1/1/2007 | $166.60 | 3 |
| N | 23929 | UNLISTED PROCEDURE SHOULDER | 2/1/1994 | $0.01 | 5 |
| N | 24065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $141.95 | 3 |
| N | 24500 | CLOSED TREATMENT OF HUMERAL SHAF | 1/1/2007 | $222.39 | 3 |
| N | 24530 | CLOSED TREATMENT OF SUPRACONDYLA | 1/1/2007 | $240.82 | 3 |
| N | 24560 | CLOSED TREATMENT OF HUMERAL EPIC | 1/1/2007 | $200.59 | 3 |
| N | 24576 | CLOSED TREATMENT OF HUMERAL COND | 1/1/2007 | $209.94 | 3 |
| N | 24600 | TREATMENT OF CLOSED ELBOW DISLOC | 1/1/2007 | $248.86 | 3 |
| N | 24650 | CLOSED TREATMENT OF RADIAL HEAD | 1/1/2007 | $163.49 | 3 |
| N | 24670 | CLOSED TREATMENT OF ULNAR FRACTU | 1/1/2007 | $183.47 | 3 |
| N | 24999 | UNLISTED PROCEDURE HUMERUS OR EL | 2/13/1989 | $0.01 | 5 |
| N | 25500 | CLOSED TREATMENT OF RADIAL SHAFT | 1/1/2007 | $165.56 | 3 |
| N | 25530 | CLOSED TREATMENT OF ULNAR SHAFT | 1/1/2007 | $160.89 | 3 |
| N | 25560 | CLOSED TREATMENT OF RADIAL AND U | 1/1/2007 | $168.42 | 3 |
| N | 25600 | CLOSED TREATMENT OF DISTAL RADIA | 1/1/2007 | $185.54 | 3 |
| N | 25622 | TREATMENT OF CLOSED CARPAL SCAPH | 1/1/2007 | $189.44 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 25630 | CLOSED TREATMENT OF CARPAL BONE | 1/1/2007 | $195.14 | 3 |
| N | 25650 | CLOSED TREATMENT OF ULNAR STYLOI | 1/1/2007 | $202.93 | 3 |
| N | 25830 | DISTAL RADIOULNAR JOINT ARTHRODE | 1/1/2007 | $135.15 | 3 |
| N | 25999 | UNLISTED PROCEDURE FOREARM OR WR | 2/1/1994 | $0.01 | 5 |
| N | 26010 | DRAINAGE OF FINGER ABSCESS SIMPL | 1/1/2007 | $189.44 | 3 |
| N | 26600 | CLOSED TREATMENT OF METACARPAL F | 1/1/2007 | $152.59 | 3 |
| N | 26670 | CLOSED TREATMENT OF CARPOMETACAR | 1/1/2007 | $216.42 | 3 |
| N | 26700 | CLOSED TREATMENT OF METACARPOPHA | 1/1/2007 | $202.41 | 3 |
| N | 26720 | CLOSED TREATMENT OF PHALANGEAL S | 1/1/2007 | $121.71 | 3 |
| N | 26740 | CLOSED TX OF ARTICULAR FX, INVOL | 1/1/2007 | $139.87 | 3 |
| N | 26750 | CLOSED TREATMENT OF DISTAL PHALA | 1/1/2007 | $114.44 | 3 |
| N | 26770 | CLOSED TREATMENT OF INTERPHALANG | 1/1/2007 | $174.64 | 3 |
| N | 26989 | UNLISTED PROCEDURE HANDS OR FING | 2/1/1994 | $0.01 | 5 |
| N | 27086 | REMOVAL OF FOREIGN BODY SUBCUTAN | 1/1/2007 | $173.35 | 3 |
| N | 27193 | CLOSED TREATMENT OF PELVIC RING | 1/1/2007 | $301.28 | 3 |
| N | 27200 | CLOSED TREATMENT OF COCCYGEAL FR | 1/1/2007 | $112.88 | 3 |
| N | 27220 | CLOSED TREATMENT OF ACETABULUM ( | 1/1/2007 | $336.83 | 3 |
| N | 27230 | CLOSED TREATMENT OF FEMORAL FRAC | 1/1/2007 | $310.62 | 3 |
| N | 27246 | CLOSED TREATMENT OF GREATER TROC | 1/1/2007 | $258.98 | 3 |
| N | 27500 | CLOSED TREATMENT OF FEMORAL SHAF | 1/1/2007 | $339.17 | 3 |
| N | 27501 | CLOSED TREATMENT OF SUPRACONDYLA | 1/1/2007 | $330.86 | 3 |
| N | 27508 | CLOSED TREATMENT OF FEMORAL FRAC | 1/1/2007 | $344.36 | 3 |
| N | 27516 | CLOSED TREATMENT OF DISTAL FEMOR | 1/1/2007 | $325.41 | 3 |
| N | 27520 | CLOSED TREATMENT OF PATELLAR FRA | 1/1/2007 | $204.49 | 3 |
| N | 27530 | CLOSED TREATMENT OF TIBIAL FRACT | 1/1/2007 | $253.01 | 3 |
| N | 27550 | CLOSED TREATMENT OF KNEE DISLOCA | 1/1/2007 | $325.41 | 3 |
| N | 27613 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $145.58 | 3 |
| N | 27750 | CLOSED TREATMENT OF TIBIAL SHAFT | 1/1/2007 | $220.83 | 3 |
| N | 27760 | CLOSED TREATMENT OF MEDIAL MALLE | 1/1/2007 | $212.27 | 3 |
| N | 27780 | CLOSED TREATMENT OF PROXIMAL FIB | 1/1/2007 | $188.14 | 3 |
| N | 27786 | CLOSED TREATMENT OF DISTAL FIBUL | 1/1/2007 | $201.63 | 3 |
| N | 27808 | CLOSED TREATMENT OF BIMALLEOLAR | 1/1/2007 | $210.20 | 3 |
| N | 27816 | CLOSED TREATMENT OF TRIMALLEOLAR | 1/1/2007 | $200.07 | 3 |
| N | 27830 | CLOSED TREATMENT OF PROXIMAL TIB | 1/1/2007 | $226.28 | 3 |
| N | 27840 | CLOSED TREATMENT OF ANKLE DISLOC | 1/1/2007 | $228.36 | 3 |
| N | 27899 | UNLISTED PROCEDURE LEG OR ANKLE | 2/13/1989 | $0.01 | 5 |
| N | 28190 | REMOVE FOREIGN BODY SUBCUTANEOUS | 1/1/2007 | $144.80 | 3 |
| N | 28400 | CLOSED TREATMENT OF CALCANEAL FR | 1/1/2007 | $159.59 | 3 |
| N | 28430 | CLOSED TREATMENT OF TALUS FRACTU | 1/1/2007 | $150.51 | 3 |
| N | 28450 | TREATMENT OF TARSAL BONE FRACTUR | 1/1/2007 | $137.54 | 3 |
| N | 28470 | CLOSED TREATMENT OF METATARSAL F | 1/1/2007 | $140.65 | 3 |
| N | 28490 | CLOSED TREATMENT OF FRACTURE GRE | 1/1/2007 | $84.34 | 3 |
| N | 28510 | CLOSED TREATMENT OF FRACTURE, PH | 1/1/2007 | $71.62 | 3 |
| N | 28530 | CLOSED TREATMENT OF SESAMOID FRA | 1/1/2007 | $68.51 | 3 |
| N | 28540 | CLOSED TREATMENT OF TARSAL BONE | 1/1/2007 | $122.22 | 3 |
| N | 28570 | CLOSED TREATMENT OF TALOTARSAL J | 1/1/2007 | $112.10 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 28600 | CLOSED TREATMENT OF TARSOMETATAR | 1/1/2007 | $129.23 | 3 |
| N | 28630 | CLOSED TREATMENT OF METATARSOPHA | 1/1/2007 | $90.05 | 3 |
| N | 28660 | CLOSED TREATMENT OF INTERPHALANG | 1/1/2007 | $67.99 | 3 |
| N | 28899 | UNLISTED PROCEDURE FOOT OR TOES | 2/1/1994 | $0.01 | 5 |
| N | 29065 | APPLICATION; SHOULDER TO HAND (L | 1/1/2007 | $60.98 | 3 |
| N | 29075 | APPLICATION; ELBOW TO FINGER (SH | 1/1/2007 | $56.05 | 3 |
| N | 29085 | APPLICATION; HAND AND LOWER FORE | 1/1/2007 | $59.43 | 3 |
| N | 29105 | APPLICATION OF LONG ARM SPLINT ( | 1/1/2007 | $57.61 | 3 |
| N | 29125 | APPLICATION OF SHORT ARM SPLINT | 1/1/2007 | $43.60 | 3 |
| N | 29126 | APPLICATION OF SHORT ARM SPLINT | 1/1/2007 | $53.20 | 3 |
| N | 29130 | APPLICATION OF FINGER SPLINT STA | 1/1/2007 | $26.73 | 3 |
| N | 29131 | APPLICATION OF FINGER SPLINT; DY | 1/1/2007 | $34.25 | 3 |
| N | 29200 | STRAPPING THORAX | 1/1/2007 | $36.59 | 3 |
| N | 29220 | STRAPPING; LOW BACK | 1/1/2007 | $36.33 | 3 |
| N | 29240 | STRAPPING; SHOULDER (EG VELPEAU) | 1/1/2007 | $42.04 | 3 |
| N | 29260 | STRAPPING; ELBOW OR WRIST | 1/1/2007 | $34.77 | 3 |
| N | 29280 | STRAPPING; HAND OR FINGER | 1/1/2007 | $34.77 | 3 |
| N | 29345 | APPLICATION OF LONG LEG CAST (TH | 1/1/2007 | $88.49 | 3 |
| N | 29355 | APPLICATION OF LONG LEG CAST (TH | 1/1/2007 | $90.83 | 3 |
| N | 29358 | APPLICATION OF LONG LEG CAST BRA | 1/1/2007 | $97.31 | 3 |
| N | 29365 | APPLICATION OF CYLINDER CAST (TH | 1/1/2007 | $78.89 | 3 |
| N | 29405 | APPLICATION OF SHORT LEG CAST (B | 1/1/2007 | $57.61 | 3 |
| N | 29425 | APPLICATION OF SHORT LEG CAST (B | 1/1/2007 | $62.02 | 3 |
| N | 29435 | APPLICATION OF PATELLAR TENDON B | 1/1/2007 | $76.29 | 3 |
| N | 29440 | ADDING WALKER TO PREVIOUSLY APPL | 1/1/2007 | $34.77 | 3 |
| N | 29450 | APPLICATION OF CLUBFOOT CAST WIT | 1/1/2007 | $99.13 | 3 |
| N | 29505 | APPLICATION OF LONG LEG SPLINT ( | 1/1/2007 | $50.60 | 3 |
| N | 29515 | APPLICATION OF SHORT LEG SPLINT | 1/1/2007 | $43.86 | 3 |
| N | 29520 | STRAPPING HIP | 1/1/2007 | $36.85 | 3 |
| N | 29530 | STRAPPING; KNEE | 1/1/2007 | $36.59 | 3 |
| N | 29540 | STRAPPING; ANKLE AND/OR FOOT | 1/1/2007 | $25.69 | 3 |
| N | 29550 | STRAPPING; TOES | 1/1/2007 | $24.65 | 3 |
| N | 29580 | STRAPPING; UNNA BOOT | 1/1/2007 | $33.48 | 3 |
| N | 29590 | DENIS-BROWNE SPLINT STRAPPING | 1/1/2007 | $35.29 | 3 |
| N | 29700 | REMOVAL OR BIVALVING GAUNTLET BO | 1/1/2007 | $39.96 | 3 |
| N | 29705 | REMOVAL OR VIBALVING; FULL OR FU | 1/1/2007 | $44.37 | 3 |
| N | 29720 | REPAIR OF SPICA BODY CAST OR JAC | 1/1/2007 | $50.86 | 3 |
| N | 29730 | WINDOWING OF CAST | 1/1/2007 | $43.60 | 3 |
| N | 29740 | WEDGING OF CAST (EXCEPT CLUBFOOT | 1/1/2007 | $63.58 | 3 |
| N | 29750 | WEDGING OF CLUBFOOT CAST | 1/1/2007 | $65.65 | 3 |
| N | 29799 | UNLISTED PROCEDURE CASTING OR ST | 4/1/1982 | $0.01 | 5 |
| N | 29848 | ARTHROSCOPY, WRIST, SURGICAL; W/ | 1/1/2007 | $309.06 | 3 |
| N | 30300 | REMOVE FOREIGN BODY INTRANASAL O | 1/1/2007 | $149.47 | 3 |
| N | 30801 | CAUTERY AND/OR ABLATION, MUCOSA | 1/1/2007 | $138.05 | 3 |
| N | 30802 | CAUTERIZATION AND/OR ABLATION, M | 1/1/2007 | $176.72 | 3 |
| N | 30901 | CONTROL NASAL HEMORRHAGE,ANTERIO | 1/1/2007 | $69.55 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 30905 | CONTROL NASAL HEMORRHAGE, POSTER | 1/1/2007 | $146.88 | 3 |
| N | 30906 | CONTROL NASAL HEMORRHAGE POSTERI | 1/1/2007 | $169.97 | 3 |
| N | 36000 | INTRODUCTION OF NEEDLE OR INTRAC | 1/1/2007 | $19.72 | 3 |
| N | 36400 | VENIPUNCTURE, UNDER AGE 3 YEARS; | 1/1/2007 | $17.91 | 3 |
| N | 36405 | VENIPUNCTURE UNDER AGE 3 YEARS; | 1/1/2007 | $15.57 | 3 |
| N | 36406 | VENIPUNCTURE UNDER AGE 3 YEARS O | 1/1/2007 | $12.20 | 3 |
| N | 36415 | COLLECTION OF VENOUS BLOOD BY VE | 2/13/2003 | $3.00 | 3 |
| N | 36416 | COLLECTION OF CAPILLARY BLOOD SP | 1/1/2003 | $3.00 | 3 |
| N | 36430 | TRANSFUSION, BLOOD OR BLOOD COMP | 1/1/2007 | $27.77 | 3 |
| N | 36540 | COLLECTION OF BLOOD SPECIMEN FRO | 10/1/2002 | $17.91 | 3 |
| N | 36600 | ARTERIAL PUNCTURE WITHDRAWAL OF | 1/1/2007 | $21.54 | 3 |
| N | 37788 | PENILE REVASCULARIZATION, ARTERY | 3/1/1992 | NC | 9 |
| N | 38220 | BONE MARROW; ASPIRATION ONLY | 1/1/2007 | $126.12 | 3 |
| N | 38221 | BONE MARROW; BIOPSY, NEEDLE OR T | 1/1/2007 | $139.61 | 3 |
| N | 38300 | DRAINAGE OF LYMPH NODE ABSCESS O | 1/1/2007 | $169.97 | 3 |
| N | 40800 | DRAINAGE OF ABSCESS CYST HEMATOM | 1/1/2007 | $110.81 | 3 |
| N | 40804 | REMOVAL OF EMBEDDED FOREIGN BODY | 1/1/2007 | $123.26 | 3 |
| N | 41005 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $122.48 | 3 |
| N | 42000 | DRAINAGE OF ABSCESS OF PALATE UV | 1/1/2007 | $101.72 | 3 |
| N | 43760 | CHANGE OF GASTROSTOMY TUBE | 1/1/2007 | $85.12 | 3 |
| N | 44500 | INTRODUCTION OF LONG GASTROINTES | 1/1/2007 | $17.65 | 3 |
| N | 45330 | SIGMOIDOSCOPY, FLEXIBLE; DIAGNOS | 1/1/2007 | $86.15 | 3 |
| N | 45331 | SIGMOIDOSCOPY, FLEXIBLE; WITH BI | 1/1/2007 | $112.10 | 3 |
| N | 46050 | INCISION AND DRAINAGE PERIANAL A | 1/1/2007 | $100.69 | 3 |
| N | 46083 | INCISION OF THROMBOSED HEMORRHOI | 1/1/2007 | $105.88 | 3 |
| N | 46288 | CLOSURE OF ANAL FISTULA WITH REC | 1/1/2007 | $300.76 | 3 |
| N | 46320 | ENUCLEATION OR EXCISION OF EXTER | 1/1/2007 | $101.72 | 3 |
| N | 46600 | ANOSCOPY DIAGNOSTIC (SEPARATE PR | 1/1/2007 | $54.75 | 3 |
| N | 46606 | ANOSCOPY; FOR BIOPSY | 1/1/2007 | $121.71 | 3 |
| N | 46900 | CHEMOSURGERY OF CONDYLOMATA ANAL | 1/1/2007 | $121.19 | 3 |
| N | 46910 | DESTRUCTION OF LESION(S) ANUS SI | 1/1/2007 | $128.71 | 3 |
| N | 46999 | UNLISTED PROCEDURE ANUS | 2/1/1994 | $0.01 | 5 |
| N | 47136 | LIVER ALLOTRANSPLANTATION; HETER | 1/1/2007 | $539.76 | 3 |
| N | 49000 | EXPLORATORY LAPAROTOMY, EXPLORAT | 1/1/2007 | $96.38 | 3 |
| N | 49999 | UNLISTED PROCEDURE ABDOMEN PERIT | 2/13/1989 | $0.01 | 5 |
| N | 51700 | BLADDER IRRIGATION SIMPLE LAVAGE | 1/1/2007 | $65.91 | 3 |
| N | 51702 | INSERTION OF TEMPORARY INDWELLIN | 1/1/2007 | $68.25 | 3 |
| N | 51705 | CHANGE OF CYSTOSTOMY TUBE; SIMPL | 1/1/2007 | $87.45 | 3 |
| N | 51725 | SIMPLE CYSTOMETROGRAM (CMG) (EG, | 1/1/2007 | $188.66 | 3 |
| N | 51785 | ELECTROMYOGRAPHIC STUDIES (EMG) | 1/1/2007 | $159.07 | 3 |
| N | 53670 | CATHETERIZATION, URETHRA; SIMPLE | 7/1/2003 | INVALID | N |
| N | 53675 | CATHETERIZATION; COMPLICATED (MA | 7/1/2003 | INVALID | N |
| N | 53899 | UNLISTED PROCEDURE URINARY SYSTE | 2/1/1994 | $0.01 | 5 |
| N | 54050 | DESTRUCTION OF CONDYLOMATA PENIS | 1/1/2007 | $77.33 | 3 |
| N | 54055 | DESTRUCTION OF LESION(S) PENIS S | 1/1/2007 | $74.48 | 3 |
| N | 54060 | DESTRUCTION OF LESION(S) PENIS S | 1/1/2007 | $134.16 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 55100 | DRAINAGE OF SCROTAL WALL ABSCESS | 1/1/2007 | $155.18 | 3 |
| N | 55870 | ELECTROEJACULATION | 3/1/1992 | NC | 9 |
| N | 55899 | UNLISTED PROCEDURE MALE GENITAL | 2/13/1989 | $0.01 | 5 |
| N | 56501 | DESTRUCTION OF LESION(S), VULVA; | 1/1/2007 | $90.83 | 3 |
| N | 56820 | COLPOSCOPY OF THE VULVA; | 1/1/2007 | $77.59 | 3 |
| N | 56821 | COLPOSCOPY OF THE VULVA; WITH BI | 1/1/2007 | $105.36 | 3 |
| N | 57061 | DESTRUCTION OF VAGINAL LESION(S) | 1/1/2007 | $79.15 | 3 |
| N | 57100 | BIOPSY OF VAGINAL MUCOSA SIMPLE | 1/1/2007 | $62.80 | 3 |
| N | 57150 | IRRIGATION AND/OR APPLICATION OF | 1/1/2007 | $44.63 | 3 |
| N | 57170 | DIAPHRAGM OR CERVICAL CAP FITTIN | 1/1/2007 | $64.88 | 3 |
| N | 57420 | COLPOSCOPY OF THE ENTIRE VAGINA, | 1/1/2007 | $81.48 | 3 |
| N | 57421 | COLPOSCOPY OF THE ENTIRE VAGINA, | 1/1/2007 | $112.10 | 3 |
| N | 57452 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $76.81 | 3 |
| N | 57454 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $110.29 | 3 |
| N | 57455 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $102.50 | 3 |
| N | 57456 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $96.53 | 3 |
| N | 57460 | COLPOSCOPY (VAGINOSCOPY); WITH L | 1/1/2007 | $234.33 | 3 |
| N | 57461 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $258.46 | 3 |
| N | 57500 | BIOPSY SINGLE OR MULTIPLE OR LOC | 1/1/2007 | $94.46 | 3 |
| N | 57510 | CAUTERY OF CERVIX; ELECTRO OR TH | 1/1/2007 | $95.76 | 3 |
| N | 57511 | CAUTERIZATION OF CERVIX; CRYOCAU | 1/1/2007 | $102.76 | 3 |
| N | 58100 | ENDOMETRIAL SAMPLING W/OR W/OUT | 1/1/2007 | $78.63 | 3 |
| N | 58300 | INSERTION OF INTRAUTERINE DEVICE | 1/1/2007 | $66.17 | 3 |
| N | 58301 | REMOVAL OF INTRAUTERINE DEVICE ( | 1/1/2007 | $71.10 | 3 |
| N | 58953 | BILATERAL SALPINGO-OOPHORECTOMY | 1/1/2007 | $261.37 | 3 |
| N | 58954 | BILATERAL SALPINGO-OOPHORECTOMY | 1/1/2007 | $284.78 | 3 |
| N | 58999 | UNLISTED PROCEDURE FEMALE GENITA | 2/1/1994 | $0.01 | 5 |
| N | 59020 | FETAL CONTRACTION STRESS TEST | 1/1/2007 | $44.12 | 3 |
| N | 59025 | FETAL NON-STESS TEST | 1/1/2007 | $29.06 | 3 |
| N | 59030 | FETAL SCALP BLOOD SAMPLING | 1/1/2007 | $83.82 | 3 |
| N | 59200 | INSERTION OF CERVICAL DILATOR (E | 1/1/2007 | $56.31 | 3 |
| N | 59300 | EPISIOTOMY OR VAGINAL REPAIR, BY | 1/1/2007 | $133.90 | 3 |
| N | 59400 | ROUTINE OBSTETRIC CARE INCLUDING | 1/1/2007 | $1,702.16 | 3 |
| N | 59409 | VAGINAL DELIVERY ONLY WITH OR WI | 1/1/2007 | $853.99 | 3 |
| N | 59410 | VAGINAL DELIVERY ONLY (W/WO EPIS | 1/1/2007 | $954.09 | 3 |
| N | 59412 | EXTERNAL CEPHALIC VERSION, WITH | 1/1/2007 | $113.30 | 3 |
| N | 59414 | DELIVERY OF PLACENTA (SEPARATE P | 1/1/2007 | $102.04 | 3 |
| N | 59425 | ANTEPARTUM CARE ONLY; 4-6 VISITS | 1/1/2007 | $393.82 | 3 |
| N | 59426 | ANTEPARTUM CARE ONLY; 7 OR MORE | 1/1/2007 | $690.64 | 3 |
| N | 59430 | POSTPARTUM CARE ONLY (SEPARATE P | 1/1/2007 | $149.77 | 3 |
| N | 59514 | CAESAREAN DELIVERY ONLY | 1/1/2007 | $201.53 | 3 |
| N | 59610 | ROUTINE OBSTETRIC CARE INCLUDING | 1/1/2007 | $1,797.99 | 3 |
| N | 59612 | VAGINAL DELIVERY ONLY, AFTER PRE | 1/1/2007 | $957.97 | 3 |
| N | 59614 | VAGINAL DELIVERY ONLY, AFTER PRE | 1/1/2007 | $1,053.42 | 3 |
| N | 59620 | CESAREAN DELIVERY ONLY, FOLLOWIN | 1/1/2007 | $220.69 | 3 |
| N | 59840 | INDUCED ABORTION, BY DILATION AN | 1/1/2006 | $151.55 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 59841 | INDUCED ABORTION, BY DILATION AN | 1/1/2006 | $258.20 | 3 |
| N | 59899 | UNLISTED PROCEDURE MATERNITY CAR | 1/1/1999 | $0.01 | 5 |
| N | 60210 | PARTIAL THYROID LOBECTOMY, UNILA | 1/1/2007 | $92.07 | 3 |
| N | 60212 | PARTIAL THYROID LOBECTOMY, UNIAL | 1/1/2007 | $133.07 | 3 |
| N | 60271 | THYROIDECTOMY, INC SUBSTERNAL TH | 1/1/2007 | $140.86 | 3 |
| N | 60512 | PARATHYROID AUTOTRANSPLANTATION | 1/1/2007 | $34.20 | 3 |
| N | 60521 | THYMECTOMY, PARTIAL OR TOTAL; ST | 1/1/2007 | $162.03 | 3 |
| N | 60522 | THYMECTOMY, PARTIAL OR TOTAL; ST | 1/1/2007 | $195.20 | 3 |
| N | 64435 | INJECTION ANESTHETIC AGENT; PARA | 1/1/2006 | $106.91 | 3 |
| N | 64450 | INJECTION ANESTHETIC AGENT; OTHE | 1/1/2007 | $68.51 | 3 |
| N | 69000 | DRAINAGE EXTERNAL EAR ABSCESS OR | 1/1/2007 | $115.74 | 3 |
| N | 69020 | DRAINAGE EXTERNAL AUDITORY CANAL | 1/1/2007 | $145.32 | 3 |
| N | 69200 | REMOVAL FOREIGN BODY FROM EXTERN | 1/1/2007 | $83.56 | 3 |
| N | 69210 | REMOVAL IMPACTED CERUMEN (SEPARA | 1/1/2007 | $33.48 | 3 |
| N | 69399 | UNLISTED PROCEDURE EXTERNAL EAR | 2/1/1994 | $0.01 | 5 |
| N | 69420 | MYRINGOTOMY INCLUDING ASPIRATION | 1/1/2007 | $119.37 | 3 |
| N | 90281 | IMMUNE GLOBULIN (IG), HUMAN, FOR | 10/1/2005 | $0.01 | 5 |
| N | 90283 | IMMUNE GLOBULIN (IGIV), HUMAN, F | 10/1/2005 | $0.01 | 5 |
| N | 90287 | BOTULINUM ANTITOXIN, EQUINE, ANY | 10/1/2005 | $0.01 | 5 |
| N | 90288 | BOTULISM IMMUNE GLOBULIN, HUMAN, | 10/1/2005 | $0.01 | 5 |
| N | 90291 | CYTOMEGALOVIRUS IMMUNE GLOBULIN | 10/1/2005 | $0.01 | 5 |
| N | 90296 | DIPHTHERIA ANTITOXIN, EQUINE, AN | 10/1/2005 | $0.01 | 5 |
| N | 90371 | HEPATITIS B IMMUNE GLOBULIN (HBI | 5/1/2005 | $183.69 | 3 |
| N | 90375 | RABIES IMMUNE GLOBULIN (RIG), HU | 2/13/2006 | $0.01 | 5 |
| N | 90376 | RABIES IMMUNE GLOBULIN, HEAT-TRE | 2/27/2006 | $89.84 | 3 |
| N | 90378 | RESPIRATORY SYNCYTIAL VIRUS IMMU | 2/27/2006 | $807.11 | 3 |
| N | 90379 | RESPIRATORY SYNCYTIAL VIRUS IMMU | 11/1/2001 | NC | 9 |
| N | 90384 | RHO(D) IMMUNE GLOBULIN (RHIG), H | 5/1/2003 | $126.14 | 3 |
| N | 90385 | RHO(D) IMMUNE GLOBULIN (RHIG), H | 5/1/2003 | $53.90 | 3 |
| N | 90386 | RHO(D) IMMUNE GLOBULIN (RHIGIV), | 10/1/2005 | $0.01 | 5 |
| N | 90389 | TETANUS IMMUNE GLOBULIN (TIG), H | 10/1/2005 | $0.01 | 5 |
| N | 90393 | VACCINIA IMMUNE GLOBULIN, HUMAN, | 10/1/2005 | $0.01 | 5 |
| N | 90396 | VARICELLA-ZOSTER IMMUNE GLOBULIN | 4/1/2006 | $0.01 | 5 |
| N | 90399 | UNLISTED IMMUNE GLOBULIN | 10/1/2005 | $0.01 | 5 |
| N | 90465 | IMMUNIZATION ADMINISTRATION UNDE | 1/1/2007 | $12.72 | 3 |
| N | 90466 | IMMUNIZATION ADMINISTRATION UNDE | 1/1/2007 | $7.53 | 3 |
| N | 90467 | IMMUNIZATION ADMINISTRATION (INT | 1/1/2007 | $9.08 | 3 |
| N | 90468 | IMMUNIZATION ADMINISTRATION (INT | 1/1/2007 | $7.01 | 3 |
| N | 90471 | IMMUNIZATION ADMIN; ONE VACCINE | 1/1/2007 | $12.72 | 3 |
| N | 90472 | IMMUNIZATION ADMIN; EACH ADDITIO | 1/1/2007 | $7.53 | 3 |
| N | 90473 | IMMUNIZATION ADMIN. BY INTRANASA | 1/1/2007 | $9.60 | 3 |
| N | 90476 | ADENOVIRUS VACCINE, TYPE 4, LIVE | 10/1/2005 | $0.01 | 5 |
| N | 90477 | ADENOVIRUS VACCINE, TYPE 7, LIVE | 10/1/2005 | $0.01 | 5 |
| N | 90581 | ANTHRAX VACCINE, FOR SUBCUTANEOU | 10/1/2005 | $0.01 | 5 |
| N | 90585 | BACILLUS CALMETTE-GUERIN VACCINE | 5/1/2005 | $176.15 | 3 |
| N | 90586 | BACILLUS CALMETTE-GUERIN VACCINE | 5/1/2005 | $191.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 90632 | HEPATITIS A VACCINE, ADULT DOSAG | 5/9/2005 | $81.79 | 3 |
| N | 90634 | HEPATITIS A VACCINE, PEDIATRIC/A | 10/1/2004 | NC | 9 |
| N | 90636 | HEPATITIS A AND HEPATITIS B VACC | 5/9/2005 | $98.90 | 3 |
| N | 90645 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $29.02 | 3 |
| N | 90646 | HEMOPHILUS INFLUENZA B VACCINE ( | 12/1/2005 | NC | 9 |
| N | 90647 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $29.02 | 3 |
| N | 90648 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $27.04 | 3 |
| N | 90656 | INFLUENZA VIRUS VACCINE, SPLIT V | 9/15/2006 | $18.14 | 3 |
| N | 90658 | INFLUENZA VIRUS VACCINE, SPLIT V | 9/15/2006 | $13.81 | 3 |
| N | 90659 | INFLUENZA VIRUS VACCINE, WHOLE V | 4/1/2004 | INVALID | N |
| N | 90660 | INFLUENZA VIRUS VACCINE, LIVE, F | 9/15/2006 | $22.44 | 3 |
| N | 90665 | LYME DISEASE VACCINE, ADULT DOSA | 5/9/2005 | NC | 9 |
| N | 90675 | RABIES VACCINE, FOR INTRMUSCULAR | 2/27/2006 | $195.94 | 3 |
| N | 90676 | RABIES VACCINE, FOR INTRADERMAL | 5/16/2005 | $0.01 | 5 |
| N | 90680 | ROTAVIRUS VACCINE, PENTAVALENT, | 10/1/2004 | NC | 9 |
| N | 90690 | TYPHOID VACCINE, LIVE, ORAL | 1/1/1999 | NC | 9 |
| N | 90691 | TYPHOID VACCINE, VI CAPSULAR POL | 1/1/1999 | NC | 9 |
| N | 90692 | TYPHOID VACCINE, HEAT AND PHENOL | 1/1/1999 | NC | 9 |
| N | 90693 | TYPHOID VACCINE, ACETONE-KILLED, | 1/1/1999 | NC | 9 |
| N | 90698 | DIPHTHERIA, TETANUS TOXOIDS, ACE | 3/1/2005 | NC | 9 |
| N | 90703 | IMMUNIZATION ACTIVE; TETANUS TOX | 4/24/2006 | $23.06 | 3 |
| N | 90704 | IMMUNIZATION ACTIVE; MUMPS VIRUS | 2/20/2006 | $23.87 | 3 |
| N | 90705 | IMMUNIZATION ACTIVE; MEASLES VIR | 2/20/2006 | $20.56 | 3 |
| N | 90706 | IMMUNIZATION ACTIVE; RUBELLA VIR | 2/27/2006 | $20.55 | 3 |
| N | 90707 | IMMUNIZATION ACTIVE; MEASLES, MU | 2/20/2006 | $58.51 | 3 |
| N | 90708 | IMMUNIZATION ACTIVE; MEASLES AND | 7/1/1990 | $23.90 | 3 |
| N | 90709 | IMMUNIZATION ACTIVE; RUBELLA AND | 7/1/2003 | INVALID | N |
| N | 90710 | IMMUNIZATION, ACTIVE; MEASLES, M | 8/1/2005 | NC | 9 |
| N | 90712 | IMMUNIZATION ACTIVE; POLIOVIRUS | 5/1/2000 | NC | 9 |
| N | 90713 | POLIOVIRUS VACCINE, INACTIVATED, | 2/20/2006 | $27.06 | 3 |
| N | 90714 | TETANUS AND DIPHTHERIA TOXOIDS ( | 7/1/2005 | $21.50 | 3 |
| N | 90715 | TETANUS, DIPHTHERIA TOXOIDS AND | 6/1/2005 | $43.50 | 3 |
| N | 90716 | IMMUNIZATION, ACTIVE; VARICELLA | 2/20/2006 | $95.77 | 3 |
| N | 90717 | IMMUNIZATION ACTIVE; YELLOW FEVE | 10/24/1989 | NC | 9 |
| N | 90718 | TETANUS AND DIPHTHERIA TOXOIDS ( | 2/27/2006 | $22.50 | 3 |
| N | 90719 | IMMUNIZATION ACTIVE; DIPTHERIA T | 7/1/1990 | $8.32 | 3 |
| N | 90720 | IMMUNIZATION, ACTIVE; DIPHTHERIA | 2/20/2006 | $35.42 | 3 |
| N | 90725 | IMMUNIZATION ACTIVE; CHOLERA VAC | 10/24/1989 | NC | 9 |
| N | 90727 | IMMUNIZATION ACTIVE; PLAGUE VACC | 5/9/2005 | NC | 9 |
| N | 90732 | PNEUMOCOCCAL POLYSACCHARIDE VACC | 2/21/2005 | $30.24 | 3 |
| N | 90733 | IMMUNIZATION ACTIVE; MENINGOCOCC | 8/1/2005 | $107.63 | 3 |
| N | 90734 | MENINGOCOCCAL CONJUGATE VACCINE, | 3/21/2005 | $102.50 | 3 |
| N | 90735 | IMMUNIZATION, ACITVE; ENCEPHALIT | 2/1/2001 | NC | 9 |
| N | 90736 | ZOSTER (SHINGLES) VACCINE, LIVE, | 10/1/2006 | $190.63 | 3 |
| N | 90740 | HEPATITIS B VACCINE, DIALYSIS OR | 5/9/2005 | $207.36 | 3 |
| N | 90743 | HEPATITIS B VACCINE, ADOLESCENT | 5/9/2005 | $74.44 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 90746 | HEPATITIS B VACCINE, ADULT DOSAG | 5/9/2005 | $72.76 | 3 |
| N | 90747 | HEPATITIS B VACCINE, DIALYSIS OR | 5/9/2005 | $145.52 | 3 |
| N | 90749 | UNLISTED IMMUNIZATION PROCEDURES | 2/1/2001 | $60.00 | 3 |
| N | 90760 | INTRAVENOUS INFUSION, HYDRATION; | 1/1/2006 | $43.34 | 3 |
| N | 90761 | INTRAVENOUS INFUSION, HYDRATION; | 1/1/2006 | $13.75 | 3 |
| N | 90765 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2006 | $52.94 | 3 |
| N | 90766 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2006 | $17.65 | 3 |
| N | 90767 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2006 | $29.06 | 3 |
| N | 90768 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2006 | $16.87 | 3 |
| N | 90772 | THERAPEUTIC, PROPHYLACTIC OR DIA | 1/1/2006 | $12.72 | 3 |
| N | 90774 | THERAPEUTIC, PROPHYLACTIC OR DIA | 1/1/2006 | $39.44 | 3 |
| N | 90775 | THERAPEUTIC, PROPHYLACTIC OR DIA | 1/1/2006 | $18.42 | 3 |
| N | 90779 | UNLISTED THERAPEUTIC, PROPHYLACT | 1/1/2006 | $0.01 | 5 |
| N | 90780 | IV INFUSION FOR THERAPY/DIAGNOSI | 1/1/2006 | INVALID | N |
| N | 90781 | IV INFUSION THERAPY, ADMINISTERE | 1/1/2006 | INVALID | N |
| N | 90782 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| N | 90783 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| N | 90784 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| N | 90788 | INTRAMUSCULAR INJECTION OF ANTIB | 1/1/2006 | INVALID | N |
| N | 90799 | UNLISTED THERAPEUTIC OR DIAGNOST | 1/1/2006 | INVALID | N |
| N | 90862 | PHARMACOLOGIC MGMNT, INCL PRESCR | 1/1/2007 | $35.55 | 3 |
| N | 90901 | BIOFEEDBACK TRAINING BY ANY MODA | 1/1/2007 | $28.03 | 3 |
| N | 91105 | GASTRIC INTUBATION, AND ASPIRATI | 1/1/2007 | $65.13 | 3 |
| N | 91299 | UNLISTED DIAGNOSTIC GASTROENTERO | 2/13/1989 | $0.01 | 5 |
| N | 92551 | SCREENING TEST PURE TONE AIR ONL | 10/1/2000 | $11.71 | 3 |
| N | 92552 | PURE TONE AUDIOMETRY (THRESHOLD) | 1/1/2007 | $12.46 | 3 |
| N | 92553 | PURE TONE AUDIOMETRY (THRESHOLD) | 1/1/2007 | $18.68 | 3 |
| N | 92555 | SPEECH AUDIOMETRY THRESHOLD; | 1/1/2007 | $10.90 | 3 |
| N | 92556 | SPEECH AUDIOMETRY THRESHOLD; WIT | 1/1/2007 | $16.35 | 3 |
| N | 92557 | COMPREHENSIVE AUDIOMETRY THRESHO | 1/1/2007 | $33.99 | 3 |
| N | 92559 | AUDIOMETRIC TESTING OF GROUPS | 10/1/2005 | NC | 9 |
| N | 92560 | BEKESY AUDIOMETRY; SCREENING | 10/1/2000 | $14.90 | 3 |
| N | 92567 | TYMPANOMETRY (IMPEDANCE TESTING) | 1/1/2007 | $15.05 | 3 |
| N | 92586 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $51.90 | 3 |
| N | 92587 | EVOKED OTOACOUSTIC EMISSIONS; LI | 1/1/2007 | $42.04 | 3 |
| N | 92588 | EVOKED OTOACOUSTIC EMISSIONS; CO | 1/1/2007 | $55.27 | 3 |
| N | 92599 | UNLISTED OTORHINOLARYNGOLOGICAL | 7/1/2003 | INVALID | N |
| N | 92950 | CARDIOPULMONARY RESUSCITATION (E | 1/1/2007 | $214.87 | 3 |
| N | 92953 | TEMPORARY TRANSCUTANEOUS PACING | 1/1/2007 | $8.30 | 3 |
| N | 92960 | CARDIOVERSION ELECTIVE ELECTRICA | 1/1/2007 | $224.47 | 3 |
| N | 93000 | ELECTROCARDIOGRAM, ROUTINE ECG W | 1/1/2007 | $18.42 | 3 |
| N | 93005 | ELECTROCARDIOGRAM TRACING ONLY W | 1/1/2007 | $12.20 | 3 |
| N | 93010 | ELECTROCARDIOGRAM INTERPRETATION | 1/1/2007 | $6.23 | 3 |
| N | 93016 | CARDIOVASCULAR STRESS TEST USING | 1/1/2007 | $16.61 | 3 |
| N | 93040 | RHYTHM ECG, ONE TO THREE LEADS; | 1/1/2007 | $9.86 | 3 |
| N | 93041 | RYTHM ECG ONE TO THREE LEADS; TR | 1/1/2007 | $4.15 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 93042 | RHYTHM ECG ONE TO THREE LEADS; I | 1/1/2007 | $5.71 | 3 |
| N | 93501 | RIGHT HEART CATHETERIZATION | 1/1/2007 | $580.76 | 3 |
| N | 93503 | INSERTION AND PLACEMENT OF FLOW | 1/1/2007 | $98.35 | 3 |
| N | 93505 | ENDOMYOCARDIAL BIOPSY | 1/1/2007 | $220.58 | 3 |
| N | 93731 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $30.10 | 3 |
| N | 93732 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $48.01 | 3 |
| N | 93733 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $26.99 | 3 |
| N | 93734 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $23.61 | 3 |
| N | 93735 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $39.44 | 3 |
| N | 93736 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $23.61 | 3 |
| N | 93737 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| N | 93741 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $48.01 | 3 |
| N | 93742 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $52.16 | 3 |
| N | 93743 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $57.87 | 3 |
| N | 93744 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $62.02 | 3 |
| N | 93784 | AMBULATORY BLOOD PRESSURE MONITO | 1/1/2007 | $50.86 | 3 |
| N | 93790 | AMBULATORY BLOOD PRESSURE MONITO | 1/1/2007 | $13.49 | 3 |
| N | 93799 | UNLISTED CARDIOVASCULAR SERVICE | 4/1/1982 | $0.01 | 5 |
| N | 94010 | SPIROMETRY INCLUDING GRAPHIC REC | 1/1/2007 | $22.58 | 3 |
| N | 94060 | BRONCHODILATION RESPONSIVE, SPIR | 1/1/2007 | $37.63 | 3 |
| N | 94070 | BRONCHOSPASM PROVOCATION EVAL, M | 1/1/2007 | $40.22 | 3 |
| N | 94150 | VITAL CAPACITY TOTAL (SEPARATE P | 1/1/2007 | $14.53 | 3 |
| N | 94200 | MAXIMUM BREATHING CAPACITY MAXIM | 1/1/2007 | $15.05 | 3 |
| N | 94375 | RESPIRATORY FLOW VOLUME LOOP | 1/1/2007 | $24.39 | 3 |
| N | 94640 | NONPRESSURIZED INHALATION TREATM | 1/1/2007 | $8.30 | 3 |
| N | 94650 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| N | 94651 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| N | 94652 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| N | 94664 | DEMONSTRATION AND/OR EVALUATION | 1/1/2007 | $9.08 | 3 |
| N | 94665 | AEROSOL OR VAPOR INHALATIONS FOR | 7/1/2003 | INVALID | N |
| N | 94680 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $57.09 | 3 |
| N | 94681 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $74.22 | 3 |
| N | 94690 | OXYGEN UPTAKE, EXPIRED GAS ANALY | 1/1/2007 | $55.01 | 3 |
| N | 94760 | NONINVASIVE EAR OR PULSE OXIMETR | 1/1/2007 | $1.56 | 3 |
| N | 94761 | NONINVASIVE EAR/PULSE OXIMETRY F | 1/1/2007 | $3.37 | 3 |
| N | 94772 | CIRCADIAN RESPIRATORY PATTERN RE | 10/1/2000 | $180.53 | 3 |
| N | 94799 | UNLISTED PULMONARY SERVICE OR PR | 4/1/1982 | $0.01 | 5 |
| N | 95027 | SKIN END POINT TITRATION | 1/1/2007 | $4.15 | 3 |
| N | 95056 | PHOTO TESTS | 1/1/2007 | $4.67 | 3 |
| N | 95060 | OPHTHALMIC MUCOUS MEMBRANE TESTS | 1/1/2007 | $9.60 | 3 |
| N | 95065 | DIRECT NASAL MUCOUS MEMBRANE TES | 1/1/2007 | $5.45 | 3 |
| N | 95115 | PROF SVCS FOR ALLERGEN IMMUNOTHE | 1/1/2007 | $10.64 | 3 |
| N | 95117 | PROFESSIONAL SERVICES FOR ALLERG | 1/1/2007 | $13.49 | 3 |
| N | 95199 | UNLISTED ALLERGY/CLINICAL IMMUNO | 4/1/1982 | $0.01 | 5 |
| N | 95831 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $19.46 | 3 |
| N | 95832 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $16.61 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 95833 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $27.77 | 3 |
| N | 95834 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $32.70 | 3 |
| N | 95851 | RANGE OF MOTION MEASUREMENTS AND | 1/1/2007 | $13.75 | 3 |
| N | 95852 | RANGE OF MOTION MEASUREMENTS AND | 1/1/2007 | $9.86 | 3 |
| N | 95974 | ELECTRONIC ANALYSIS OF IMPLANTED | 1/1/2007 | $126.12 | 3 |
| N | 95999 | UNLISTED NEUROLOGICAL OR NEUROMU | 2/13/1989 | $0.01 | 5 |
| N | 96400 | CHEMOTHERAPY ADMINISTRATION; SUB | 1/1/2006 | INVALID | N |
| N | 96401 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2007 | $45.41 | 3 |
| N | 96402 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2007 | $24.39 | 3 |
| N | 96405 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $86.41 | 3 |
| N | 96406 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $101.46 | 3 |
| N | 96408 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| N | 96409 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $83.82 | 3 |
| N | 96410 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| N | 96411 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $48.53 | 3 |
| N | 96412 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| N | 96413 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2007 | $118.33 | 3 |
| N | 96414 | CHEMO ADMIN, INTRAVEN; INFUSION | 1/1/2006 | INVALID | N |
| N | 96415 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2007 | $26.73 | 3 |
| N | 96416 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2007 | $127.16 | 3 |
| N | 96417 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2007 | $57.87 | 3 |
| N | 96450 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $222.65 | 3 |
| N | 96521 | REFILLING AND MAINTENANCE OF POR | 1/1/2007 | $104.84 | 3 |
| N | 96522 | REFILLING AND MAINT OF IMPLANTAB | 1/1/2007 | $75.77 | 3 |
| N | 96523 | IRRIGATION OF IMPLANTED VENOUS A | 1/1/2007 | $19.20 | 3 |
| N | 96999 | UNLISTED SPECIAL DERMATOLOGICAL | 2/13/1989 | $0.01 | 5 |
| N | 97010 | APPLICATION OF A MODALITY TO ONE | 10/1/2004 | NC | 9 |
| N | 97012 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $10.12 | 3 |
| N | 97014 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $9.86 | 3 |
| N | 97016 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| N | 97018 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| N | 97020 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2006 | INVALID | N |
| N | 97022 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $10.12 | 3 |
| N | 97024 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| N | 97026 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| N | 97028 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| N | 97032 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $10.90 | 3 |
| N | 97033 | APPLICATION OF A MODALITY TO ON | 4/1/2005 | NC | 9 |
| N | 97034 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| N | 97035 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| N | 97036 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $15.83 | 3 |
| N | 97039 | UNLISTED MODALITY (SPECIFY TYPE | 4/1/2005 | NC | 9 |
| N | 97110 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.20 | 3 |
| N | 97112 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.98 | 3 |
| N | 97116 | THERAPEUTIC PROCEDURE, ONE OR MO | 1/1/2007 | $16.87 | 3 |
| N | 97124 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $15.31 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 97139 | THERAPEUTIC PROC, ONE OR MORE AR | 4/1/2005 | NC | 9 |
| N | 97140 | MANUAL THERAPY TECHNIQUES, ONE O | 1/1/2007 | $17.91 | 3 |
| N | 97520 | PROSTHETIC TRAINING, UPPER AND/O | 1/1/2006 | INVALID | N |
| N | 97530 | THERAPEUTIC ACTIVITIES, DIRECT P | 1/1/2007 | $19.98 | 3 |
| N | 97545 | WORK HARDENING/CONDITIONING; INI | 1/1/1993 | NC | 9 |
| N | 97546 | WORK HARDENING/CONDITIONING; EAC | 1/1/1993 | NC | 9 |
| N | 97601 | REMOVAL OF DEVITALIZED TISSUE FR | 1/1/2005 | INVALID | N |
| N | 97602 | REMOVAL OF DEVITALIZED TISSUE FR | 5/1/2003 | $23.36 | 3 |
| N | 97750 | PHYSICAL PERFORMANCE TEST OR MEA | 1/1/2007 | $20.50 | 3 |
| N | 97799 | UNLISTED PHYSICAL MEDICINE/REHAB | 4/1/1982 | $0.01 | 5 |
| N | 99000 | HANDLING AND/OR CONVEYANCE OF SP | 5/1/1991 | NC | 9 |
| N | 99001 | HANDLING AND/OR CONVEYANCE OF SP | 5/1/1991 | NC | 9 |
| N | 99025 | INITIAL (NEW PATIENT) VISIT WHEN | 4/1/2004 | INVALID | N |
| N | 99050 | SERVICES PROVIDED IN THE OFFICE | 10/1/2000 | $11.71 | 3 |
| N | 99052 | SERVICES REQUESTED BETWEEN 10:00 | 1/1/2006 | INVALID | N |
| N | 99054 | SERVICES REQUESTED ON SUNDAYS AN | 1/1/2006 | INVALID | N |
| N | 99058 | SVCS PROVIDED ON AN EMERGENCY BA | 10/1/2000 | $4.71 | 3 |
| N | 99070 | SUPP & MAT (EX SPECTACLES) PROVI | 10/1/2002 | NC | 9 |
| N | 99071 | EDUCATIONAL SUPPLIES SUCH AS BOO | 10/1/2004 | NC | 9 |
| N | 99170 | ANOGENITAL EXAMINATION WIT COLPO | 1/1/2007 | $93.42 | 3 |
| N | 99173 | SCREENING TEST OF VISUAL ACUITY, | 8/20/2003 | $7.27 | 3 |
| N | 99195 | PHLEBOTOMY THERAPEUTIC (SEPARATE | 1/1/2007 | $11.94 | 3 |
| N | 99199 | UNLISTED SPECIAL SERVICE OR REPO | 4/1/1982 | $0.01 | 5 |
| N | 99201 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $25.17 | 3 |
| N | 99202 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $44.63 | 3 |
| N | 99203 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $66.43 | 3 |
| N | 99204 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $93.94 | 3 |
| N | 99205 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $119.37 | 3 |
| N | 99211 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $14.79 | 3 |
| N | 99212 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $26.47 | 3 |
| N | 99213 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $36.07 | 3 |
| N | 99214 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $56.57 | 3 |
| N | 99215 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $82.26 | 3 |
| N | 99217 | OBSERVATION CARE DISCHARGE DAY M | 1/1/2007 | $48.53 | 3 |
| N | 99218 | INITIAL OBSERVATION CARE, PER DA | 1/1/2007 | $46.19 | 3 |
| N | 99219 | INITIAL OBSERVATION CARE, PER DA | 1/1/2007 | $76.81 | 3 |
| N | 99220 | INITIAL OBSERVATION CARE, PER DA | 1/1/2007 | $107.95 | 3 |
| N | 99221 | INITIAL HOSPITAL CARE, PER DAY, | 1/1/2007 | $46.71 | 3 |
| N | 99222 | INITIAL HOSP CARE, PER DAY, FOR | 1/1/2007 | $77.33 | 3 |
| N | 99223 | INITIAL HOSP CARE, PER DAY, FOR | 1/1/2007 | $107.69 | 3 |
| N | 99231 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $23.36 | 3 |
| N | 99232 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $38.15 | 3 |
| N | 99233 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $54.24 | 3 |
| N | 99234 | OBSERVATION OR INPATIENT HOSP CA | 1/1/2007 | $92.90 | 3 |
| N | 99238 | HOSPITAL DISCHARGE DAY MANAGEMEN | 1/1/2007 | $48.53 | 3 |
| N | 99239 | HOSPITAL DISCHARGE DAY MANAGEMEN | 1/1/2007 | $66.17 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 99241 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $34.51 | 3 |
| N | 99242 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $63.06 | 3 |
| N | 99243 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $84.08 | 3 |
| N | 99244 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $118.59 | 3 |
| N | 99245 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $153.36 | 3 |
| N | 99251 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $24.65 | 3 |
| N | 99252 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $49.56 | 3 |
| N | 99253 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $67.73 | 3 |
| N | 99254 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $97.31 | 3 |
| N | 99255 | INITIAL IP CONS FOR NEW OR EST P | 1/1/2007 | $134.16 | 3 |
| N | 99261 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| N | 99262 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| N | 99263 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| N | 99271 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| N | 99272 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| N | 99273 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| N | 99274 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| N | 99275 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| N | 99281 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $11.42 | 3 |
| N | 99282 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $18.94 | 3 |
| N | 99283 | EMERGENCY DEPT VISIT FOR THE E/M | 1/1/2007 | $42.56 | 3 |
| N | 99284 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $66.43 | 3 |
| N | 99285 | EMER DEPT VISIT FOR E/M OF PT, W | 1/1/2007 | $104.06 | 3 |
| N | 99301 | E/M OF NEW OR EST PT INVOLVING A | 1/1/2006 | INVALID | N |
| N | 99302 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| N | 99303 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| N | 99304 | INITIAL NURSING FACILITY CARE, P | 1/1/2007 | $45.15 | 3 |
| N | 99305 | INITIAL NURSING FACILITY CARE, P | 1/1/2007 | $59.94 | 3 |
| N | 99306 | INITIAL NURSING FACILITY CARE, P | 1/1/2007 | $73.96 | 3 |
| N | 99307 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $23.36 | 3 |
| N | 99308 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $38.67 | 3 |
| N | 99309 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $54.50 | 3 |
| N | 99310 | SUBSEQUENT NURSING FACILITY CARE | 1/1/2007 | $68.25 | 3 |
| N | 99311 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| N | 99312 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| N | 99313 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| N | 99315 | NURSING FACILITY DISCHARGE DAY M | 1/1/2007 | $42.30 | 3 |
| N | 99316 | NURSING FACILITY DISCHARGE DAY M | 1/1/2007 | $55.79 | 3 |
| N | 99318 | E & M OF A PATIENT INVOLVING AN | 1/1/2007 | $45.15 | 3 |
| N | 99321 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| N | 99322 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| N | 99323 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| N | 99324 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $40.22 | 3 |
| N | 99325 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $58.91 | 3 |
| N | 99326 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $85.38 | 3 |
| N | 99327 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $112.36 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 99328 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $139.09 | 3 |
| N | 99331 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| N | 99332 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| N | 99333 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| N | 99334 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $31.14 | 3 |
| N | 99335 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $49.31 | 3 |
| N | 99336 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $76.03 | 3 |
| N | 99337 | DOMICILIARY OR REST HOME VISIT F | 1/1/2007 | $111.84 | 3 |
| N | 99339 | INDIVIDUAL PHYSICIAN SUPERVISION | 1/1/2006 | $0.01 | 5 |
| N | 99340 | INDIVIDUAL PHYSICIAN SUPERVISION | 1/1/2006 | $0.01 | 5 |
| N | 99341 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $39.96 | 3 |
| N | 99342 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $58.91 | 3 |
| N | 99343 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $85.89 | 3 |
| N | 99344 | HOME VISIT FOR THE E/M OF A NEW | 1/1/2007 | $112.62 | 3 |
| N | 99345 | HOME VISIT FOR THE E/M OF A NEW | 1/1/2007 | $139.35 | 3 |
| N | 99347 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $31.14 | 3 |
| N | 99348 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $49.31 | 3 |
| N | 99349 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $76.29 | 3 |
| N | 99350 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $112.62 | 3 |
| N | 99354 | PROLONGED PHYSICIAN SERVICE IN T | 1/1/2007 | $67.99 | 3 |
| N | 99355 | PROLONGED PHYSICIAN SERVICE IN T | 1/1/2007 | $67.21 | 3 |
| N | 99371 | TELEPHONE CALL BY PHYS TO PT OR | 10/1/2000 | $10.82 | 3 |
| N | 99372 | TELEPHONE CALL BY PHYS TO PT OR | 10/1/2000 | $10.82 | 3 |
| N | 99373 | PHONE CALL BY PHYS TO PT OR CONS | 10/1/2000 | $10.82 | 3 |
| N | 99381 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $71.10 | 3 |
| N | 99382 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $76.55 | 3 |
| N | 99383 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $75.00 | 3 |
| N | 99384 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $81.48 | 3 |
| N | 99385 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $81.48 | 3 |
| N | 99386 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $96.02 | 3 |
| N | 99387 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $104.06 | 3 |
| N | 99391 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $53.98 | 3 |
| N | 99392 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $60.46 | 3 |
| N | 99393 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $59.69 | 3 |
| N | 99394 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $65.91 | 3 |
| N | 99395 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $66.69 | 3 |
| N | 99396 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $73.70 | 3 |
| N | 99397 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $81.22 | 3 |
| N | 99401 | PREVENTIVE MEDICINE COUNSELING A | 1/1/2007 | $28.80 | 3 |
| N | 99402 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $48.53 | 3 |
| N | 99403 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $67.21 | 3 |
| N | 99404 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $86.15 | 3 |
| N | 99429 | UNLISTED PREVENTIVE MEDICINE SER | 2/1/1994 | $0.01 | 5 |
| N | 99431 | HISTORY AND EXAM OF NORMAL NEWBO | 1/1/2007 | $41.52 | 3 |
| N | 99432 | NORMAL NEWBORN CARE IN OTHER THA | 1/1/2007 | $58.65 | 3 |
| N | 99433 | SUBSEQUENT HOSP CARE, FOR THE E/ | 1/1/2007 | $21.80 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | 99435 | HISTORY AND EXAMINATION OF THE N | 1/1/2007 | $55.79 | 3 |
| N | 99436 | ATTENDANCE AT DELIVERY (WHEN REQ | 1/1/2007 | $52.68 | 3 |
| N | 99440 | NEWBORN RESUSCITATION; PROVISION | 1/1/2007 | $103.28 | 3 |
| N | 99499 | UNLISTED EVALUATION AND MANAGEME | 1/1/1992 | $0.01 | 5 |
| N | A4214 | STERILE SALINE OR WATER, 30CC VI | 4/1/2004 | INVALID | N |
| N | A4260 | LEVONORGESTREL (CONTRACEPTIVE) I | 1/1/2006 | INVALID | N |
| N | A4261 | CERVICAL CAP FOR CONTRACEPTIVE U | 8/1/2003 | $86.25 | 3 |
| N | A4266 | DIAPHRAGM FOR CONTRACEPTIVE USE | 11/1/2003 | $21.28 | 3 |
| N | A4310 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $6.55 | 3 |
| N | A4311 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $12.61 | 3 |
| N | A4312 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $15.31 | 3 |
| N | A4313 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $15.72 | 3 |
| N | A4314 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $21.46 | 3 |
| N | A4315 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $22.39 | 3 |
| N | A4316 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $24.11 | 3 |
| N | A4320 | IRRIGATION TRAY WITH BULB OR PIS | 10/1/2006 | $5.32 | 3 |
| N | A4322 | IRRIGATION SYRINGE, BULB OR PIST | 10/1/2006 | $2.73 | 3 |
| N | A4323 | STERILE SALINE IRRIGATION SOLUTI | 4/1/2004 | INVALID | N |
| N | A4326 | MALE EXTERNAL CATHETER SPECIALTY | 10/1/2006 | $10.35 | 3 |
| N | A4327 | FEMALE EXTERNAL URINARY COLLECTI | 10/1/2006 | $44.55 | 3 |
| N | A4328 | FEMALE EXTERNAL URINARY COLLECTI | 10/1/2006 | $9.86 | 3 |
| N | A4329 | EXTERNAL CATHETER STARTER SET, M | 4/1/2002 | INVALID | N |
| N | A4330 | PERIANAL FECAL COLLECTION POUCH | 10/1/2006 | $6.93 | 3 |
| N | A4335 | INCONTINENCE SUPPLY; MISCELLANEO | 10/1/2001 | $12.00 | 3 |
| N | A4338 | INDWELLING CATHETER; FOLEY TYPE; | 10/1/2006 | $12.25 | 3 |
| N | A4340 | INDWELLING CATHETER; SPECIALTY T | 10/1/2006 | $31.69 | 3 |
| N | A4344 | INDWELLING CATHETER, FOLEY TYPE, | 10/1/2006 | $15.99 | 3 |
| N | A4346 | INDWELLING CATHETER; FOLEY TYPE, | 10/1/2006 | $19.57 | 3 |
| N | A4347 | MALE EXTERNAL CATHETER WITH OR W | 1/1/2005 | INVALID | N |
| N | A4351 | INTERMITTENT URINARY CATHETER; S | 10/1/2006 | $1.81 | 3 |
| N | A4352 | INTERMITTENT URINARY CATHETER; C | 10/1/2006 | $6.41 | 3 |
| N | A4354 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $10.01 | 3 |
| N | A4355 | IRRIGATION TUBING SET FOR CONTIN | 10/1/2006 | $8.90 | 3 |
| N | A4356 | EXTERNAL URETHRAL CLAMP OR COMPR | 10/1/2006 | $42.35 | 3 |
| N | A4357 | BEDSIDE DRAINAGE BAG, DAY OR NIG | 10/1/2006 | $9.68 | 3 |
| N | A4358 | URINARY DRAINAGE BAG, LEG OR ABD | 10/1/2006 | $5.85 | 3 |
| N | A4359 | URINARY SUSPENSORY WITHOUT LEG B | 1/1/2007 | INVALID | N |
| N | A4361 | OSTOMY FACEPLATE, EACH | 10/1/2006 | $18.37 | 3 |
| N | A4362 | SKIN BARRIER; SOLID, 4 X 4 OR EQ | 10/1/2006 | $2.94 | 3 |
| N | A4367 | OSTOMY BELT, EACH | 10/1/2006 | $7.35 | 3 |
| N | A4397 | IRRIGATION SUPPLY; SLEEVE, EACH | 10/1/2006 | $4.07 | 3 |
| N | A4398 | OSTOMY IRRIGATION SUPPLY; BAG, E | 10/1/2006 | $13.81 | 3 |
| N | A4399 | OSTOMY IRRIGATION SUPPLY; CONE/C | 10/1/2006 | $12.26 | 3 |
| N | A4400 | OSTOMY IRRIGATION SET | 4/1/2005 | NC | 9 |
| N | A4402 | LUBRICANT, PER OUNCE | 10/1/2006 | $1.60 | 3 |
| N | A4404 | OSTOMY RING, EACH | 10/1/2006 | $1.44 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | A4421 | OSTOMY SUPPLY; MISCELLANEOUS | 1/1/1994 | $100.00 | 3 |
| N | A4454 | TAPE, ALL TYPES, ALL SIZES | 7/1/2003 | INVALID | N |
| N | A4460 | ELASTIC BANDAGE, PER ROLL (EG; C | 7/1/2003 | INVALID | N |
| N | A4465 | NONELASTIC BINDER FOR EXREMITY | 10/1/2000 | $21.63 | 3 |
| N | A4470 | GRAVLEE JET WASHER | 10/1/2001 | NC | 9 |
| N | A4480 | VABRA ASPIRATOR | 10/1/2001 | NC | 9 |
| N | A4490 | SURGICAL STOCKING ABOVE KNEE LEN | 4/1/2003 | NC | 9 |
| N | A4495 | SURGICAL STOCKING THIGH LENGTH, | 4/1/2003 | NC | 9 |
| N | A4500 | SURGICAL STOCKING BELOW KNEE LEN | 1/1/2003 | NC | 9 |
| N | A4510 | SURGICAL STOCKING FULL-LENGTH, E | 1/1/2003 | NC | 9 |
| N | A4550 | SURGICAL TRAYS | 10/1/2000 | $27.04 | 3 |
| N | A4565 | SLINGS | 10/1/2000 | $10.82 | 3 |
| N | A4570 | SPLINT | 7/1/2002 | NC | 9 |
| N | A4572 | RIB BELT | 7/1/2003 | INVALID | N |
| N | A4580 | CAST SUPPLIES (EG; PLASTER) | 7/1/2002 | NC | 9 |
| N | A4590 | SPECIAL CASTING MATERIAL (E.G.,F | 7/1/2002 | NC | 9 |
| N | A4621 | TRACHEOTOMY MASK OR COLLAR | 4/1/2004 | INVALID | N |
| N | A4622 | TRACHEOSTOMY OR LARYNGECTOMY TUB | 4/1/2004 | INVALID | N |
| N | A4649 | SURGICAL SUPPLY; MISCELLANEOUS | 12/20/2004 | $0.01 | 5 |
| N | A4712 | WATER, STERILE, FOR INJECTION, P | 4/1/2004 | INVALID | N |
| N | A4750 | BLOOD TUBING, ARTERIAL OR VENOUS | 1/1/2004 | NC | 9 |
| N | A5051 | OSTOMY POUCH, CLOSED; WITH BARRI | 10/1/2006 | $2.07 | 3 |
| N | A5052 | OSTOMY POUCH, CLOSED; WITHOUT BA | 10/1/2006 | $1.49 | 3 |
| N | A5053 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.74 | 3 |
| N | A5054 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.72 | 3 |
| N | A5055 | STOMA CAP | 10/1/2006 | $1.44 | 3 |
| N | A5062 | OSTOMY POUCH, DRAINABLE; WITHOUT | 10/1/2006 | $2.09 | 3 |
| N | A5063 | OSTOMY POUCH, DRAINABLE; FOR USE | 10/1/2006 | $2.21 | 3 |
| N | A5064 | POUCH, DRAINABLE; WITH FACEPLATE | 4/1/2002 | INVALID | N |
| N | A5071 | OSTOMY POUCH, URINARY; WITH BARR | 10/1/2006 | $3.77 | 3 |
| N | A5072 | OSTOMY POUCH, URINARY; WITHOUT B | 10/1/2006 | $3.50 | 3 |
| N | A5073 | OSTOMY POUCH, URINARY; FOR USE O | 10/1/2006 | $3.18 | 3 |
| N | A5074 | POUCH, URINARY; WITH FACEPLATE A | 4/1/2002 | INVALID | N |
| N | A5075 | POUCH, URINARY; FOR USE ON FACEP | 4/1/2002 | INVALID | N |
| N | A5081 | CONTINENT DEVICE; PLUG FOR CONTI | 10/1/2006 | $2.81 | 3 |
| N | A5082 | CONTINENT DEVICE; CATHETER FOR C | 10/1/2006 | $10.15 | 3 |
| N | A5093 | OSTOMY ACCESSORY; CONVEX INSERT | 10/1/2006 | $1.66 | 3 |
| N | A5102 | BEDSIDE DRAINAGE BOTTLE, WITH OR | 10/1/2006 | $22.54 | 3 |
| N | A5105 | URINARY SUSPENSORY; WITH LEG BAG | 10/1/2006 | $34.60 | 3 |
| N | A5112 | URINARY LEG BAG; LATEX | 10/1/2006 | $34.57 | 3 |
| N | A5119 | SKIN BARRIER; WIPES OR SWABS, PE | 1/1/2006 | INVALID | N |
| N | A5123 | SKIN BARRIER; WITH FLANGE (SOLID | 7/1/2003 | INVALID | N |
| N | B4081 | NASOGASTRIC TUBING WITH SYLET | 10/1/2000 | $19.85 | 3 |
| N | B4082 | NASOGASTRIC TUBING WITHOUT STYLE | 10/1/2000 | $15.03 | 3 |
| N | B4083 | STOMACH TUBE - LEVINE TYPE | 10/1/2000 | $2.23 | 3 |
| N | B4084 | GASTROSTOMY/JEJUNOSTOMY TUBING | 4/1/2002 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | D1203 | TOPICAL APPLICATION OF FLUORIDE | 10/1/2000 | $12.73 | 3 |
| N | D1204 | TOPICAL APPLICATION OF FLUORIDE | 10/1/2003 | $12.73 | 3 |
| N | E0100 | CANE, INCLUDES CANES OF ALL MATE | 10/1/2006 | $20.72 | 3 |
| N | E0105 | CANE, QUAD OR THREE-PRONG, INCLU | 10/1/2006 | $48.72 | 3 |
| N | E0110 | CRUTCHES, FOREARM, INC CRUTCHES | 10/1/2006 | $77.59 | 3 |
| N | E0111 | CRUTCH, FOREARM, INC CRUTCHES OF | 10/1/2006 | $53.26 | 3 |
| N | E0112 | CRUTCHES, UNDERARM, WOOD, ADJUST | 10/1/2006 | $37.00 | 3 |
| N | E0113 | CRUTCH, UNDERARM, WOOD, ADJUSTAB | 10/1/2006 | $21.13 | 3 |
| N | E0114 | CRUTCHES, UNDERARM, OTHER THAN W | 10/1/2006 | $47.19 | 3 |
| N | E0116 | CRUTCH, UNDERARM, OTHER THAN WOO | 10/1/2006 | $27.74 | 3 |
| N | E0191 | HEEL OR ELBOW PROTECTOR, EACH | 10/1/2006 | $8.49 | 3 |
| N | E0602 | BREAST PUMP, MANUAL, ANY TYPE | 10/1/2006 | $16.02 | 3 |
| N | E1399 | DURABLE MEDICAL EQUIPMENT, MISCE | 11/1/2001 | $0.01 | 5 |
| N | G0001 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2005 | INVALID | N |
| N | G0002 | OFFICE PROCEDURE, INSERTION OF T | 7/1/2003 | INVALID | N |
| N | G0008 | ADMINISTRATION OF INFLUENZA VIRU | 2/15/2000 | NC | 9 |
| N | G0009 | ADMINISTRATION OF PNEUMOCOCCAL V | 2/15/2000 | NC | 9 |
| N | G0010 | ADMINISTRATION OF HEPATITIS B VA | 2/15/2000 | NC | 9 |
| N | G0101 | CERVICAL OR VAGINAL CANCER SCREE | 1/1/2007 | $25.69 | 3 |
| N | G0104 | COLORECTAL CANCER SCREENING; FLE | 1/1/2007 | $86.15 | 3 |
| N | G0108 | DIABETES OUTPATIENT SELF-MANAGEM | 1/1/2007 | $21.80 | 3 |
| N | G0109 | DIABETES OUTPATIENT SELF-MANAGEM | 12/20/2004 | NC | 9 |
| N | G0123 | SCREENING CYTOPATHOLOGY, CERVICA | 11/1/2003 | $20.95 | 3 |
| N | G0124 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2007 | $15.31 | 3 |
| N | G0127 | TRIMMING OF DYSTROPHIC NAILS, AN | 1/1/1999 | NC | 9 |
| N | G0345 | INTRAVENOUS INFUSION, HYDRATION; | 1/1/2006 | INVALID | N |
| N | G0346 | EACH ADDITIONAL HOUR, UP TO EIGH | 1/1/2006 | INVALID | N |
| N | G0347 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2006 | INVALID | N |
| N | G0348 | EACH ADDITIONAL HOUR, UP TO EIGH | 1/1/2006 | INVALID | N |
| N | G0349 | ADDITIONAL SEQUENTIAL INFUSION, | 1/1/2006 | INVALID | N |
| N | G0350 | CONCURRENT INFUSIN REPORT ONLY O | 1/1/2006 | INVALID | N |
| N | G0351 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| N | G0353 | INTRAVENOUS PUSH, SINGLE OR INIT | 1/1/2006 | INVALID | N |
| N | G0354 | EACH ADDITIONAL SEQUENTIAL INTRA | 1/1/2006 | INVALID | N |
| N | G0355 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2006 | INVALID | N |
| N | G0356 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2006 | INVALID | N |
| N | G0357 | INTRAVENOUS, PUSH TECHNIQUE, SIN | 1/1/2006 | INVALID | N |
| N | G0358 | INTRAVENOUS, PUSH TECHNIQUE, EAC | 1/1/2006 | INVALID | N |
| N | G0359 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| N | G0360 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| N | G0361 | INITIATION OF PROLONGED CHEMOTHE | 1/1/2006 | INVALID | N |
| N | G0362 | EACH ADDITIONAL SEQUENTIAL INFUS | 1/1/2006 | INVALID | N |
| N | G0363 | IRRIGATION OF IMPLANTED VENOUS A | 1/1/2006 | INVALID | N |
| N | G0364 | BONE MARROW ASPIRATION PERFORMED | 7/14/2005 | $8.82 | 3 |
| N | G0375 | SMOKING AND TOBACCO USE CESSATIO | 1/1/2006 | $10.00 | 3 |
| N | G0376 | SMOKING AND TOBACCO USE CESSATIO | 1/1/2006 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | G9001 | COORDINATED CARE FEE (MCM INITIA | 4/1/2003 | $22.93 | 3 |
| N | G9002 | COORDINATED CARE FEE (MCM FULL C | 4/1/2003 | $70.00 | 3 |
| N | G9003 | COORDINATED CARE FEE, RISK ADJUS | 1/1/2003 | $0.01 | P |
| N | G9004 | COORDINATED CARE FEE, RISK ADJUS | 1/1/2003 | $0.01 | P |
| N | G9005 | COORDINATED CARE FEE, (MCM FULL- | 4/1/2003 | $120.00 | 3 |
| N | G9006 | COORDINATED CARE FEE (MCM-HOME/E | 4/1/2003 | $40.00 | 3 |
| N | G9009 | COORDINATED CARE FEE (MCM-PARTIA | 4/1/2003 | $35.00 | 3 |
| N | G9010 | COORDINATED CARE FEE (MCM-PARTIA | 4/1/2003 | $60.00 | 3 |
| N | G9011 | COORDINATED CARE FEE (MCM-TELEPH | 4/1/2003 | $10.00 | 3 |
| N | G9012 | COORDINATED CARE FEE (MCM-CASE M | 4/1/2003 | $40.00 | 3 |
| N | G9016 | SMOKING CESSATION COUNSELING, IN | 4/1/2001 | $10.00 | 3 |
| N | J0120 | INJECTION, TETRACYCLINE, UP TO 2 | 2/13/2006 | $0.01 | 5 |
| N | J0130 | INJECTION ABCISIMAB, 10 MG (REOP | 1/1/2007 | $414.09 | 3 |
| N | J0150 | INJECTION, ADENOSINE FOR THERAPE | 1/1/2007 | $23.48 | 3 |
| N | J0151 | INJECTION, ADENOSINE, 90 MG (NOT | 4/1/2004 | INVALID | N |
| N | J0170 | INJECTION, ADRENALIN, EPINEPHRIN | 1/1/2007 | $0.80 | 3 |
| N | J0190 | INJECTION, BIPERIDEN LACTATE, PE | 10/25/2006 | NC | 9 |
| N | J0205 | INJECTION, ALGLUCERASE, PER 10 U | 7/1/2006 | $39.22 | 3 |
| N | J0207 | INJECTION, AMIFOSTINE, 500 MG (E | 1/1/2007 | $463.58 | 3 |
| N | J0210 | INJECTION, METHYLDOPATE HCL, UP | 1/1/2007 | $10.08 | 3 |
| N | J0256 | INJECTION, ALPHA 1-PROTEINASE IN | 1/1/2007 | $3.41 | 3 |
| N | J0270 | INJECTION, ALPROSTADIL, PER 1.25 | 1/1/2007 | $1.80 | 3 |
| N | J0280 | INJECTION, AMINOPHYLLIN, UP TO 2 | 1/1/2007 | $0.39 | 3 |
| N | J0285 | INJECTION, AMPHOTERICIN B, 50 MG | 1/1/2007 | $8.97 | 3 |
| N | J0286 | INJECTION, AMPHOTERICIN B, ANY L | 7/1/2003 | INVALID | N |
| N | J0290 | INJECTION, AMPICILLIN, UP TO 500 | 1/1/2007 | $2.36 | 3 |
| N | J0295 | INJECTION, AMPICILLIN SODIUM/SUL | 1/1/2007 | $6.09 | 3 |
| N | J0300 | INJECTION, AMOBARBITAL, UP TO 12 | 1/1/2007 | $2.61 | 3 |
| N | J0330 | INJECTION, SUCCINYLCHOLINE CHLOR | 1/1/2007 | $0.18 | 3 |
| N | J0340 | INJECTION, NANDROLONE PHENPROPIO | 4/1/2002 | INVALID | N |
| N | J0350 | INJECTION, ANISTREPLASE, PER 30 | 7/1/2006 | $2,268.46 | 3 |
| N | J0360 | INJECTION, HYDRALAZINE HCL, UP T | 1/1/2007 | $6.51 | 3 |
| N | J0380 | INJECTION, METARAMINOL BITARTRAT | 10/15/2003 | $1.33 | 3 |
| N | J0390 | INJECTION, CHLOROQUINE HCL, UP T | 2/13/2006 | $0.01 | 5 |
| N | J0395 | INJECTION, ARBUTAMINE HCL, 1 MG | 2/13/2006 | $0.01 | 5 |
| N | J0400 | INJECTION, TRIMETHAPHAN CAMSYLAT | 4/1/2002 | INVALID | N |
| N | J0460 | INJECTION, ATROPINE SULFATE, UP | 1/1/2007 | $0.63 | 3 |
| N | J0470 | INJECTION, DIMERCAPROL, PER 100 | 1/1/2007 | $25.51 | 3 |
| N | J0475 | INJECTION, BACLOFEN, 10 MG (LIOR | 1/1/2007 | $198.27 | 3 |
| N | J0476 | INJECTION, BACLOFEN, 50 MCG FOR | 1/1/2007 | $69.54 | 3 |
| N | J0500 | INJECTION, DICYCLOMINE HCL, UP T | 1/1/2007 | $15.27 | 3 |
| N | J0510 | INJECTION, BENZQUINAMIDE HCL, UP | 4/1/2002 | INVALID | N |
| N | J0515 | INJECTION, BENZTROPINE MESYLATE, | 11/1/2006 | $17.08 | 3 |
| N | J0520 | INJECTION, BETHANECHOL CHLORIDE, | 2/13/2006 | $0.01 | 5 |
| N | J0530 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $13.16 | 3 |
| N | J0540 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $28.37 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J0550 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $30.49 | 3 |
| N | J0560 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $21.34 | 3 |
| N | J0570 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $36.44 | 3 |
| N | J0580 | INJECTION, PENICILLIN G BENZATHI | 1/1/2007 | $43.11 | 3 |
| N | J0585 | BOTULINUM TOXIN TYPE A, PER UNIT | 1/1/2007 | $5.10 | 3 |
| N | J0590 | INJECTION, ETHYLNOREPINEPHRINE H | 4/1/2002 | INVALID | N |
| N | J0600 | INJECTION, EDETATE CALCIUM DISOD | 1/1/2007 | $40.19 | 3 |
| N | J0610 | INJECTION, CALCIUM GLUCONATE, PE | 1/1/2007 | $0.59 | 3 |
| N | J0620 | INJECTION, CALCIUM GLYCEROPHOSPH | 11/1/2006 | $13.70 | 3 |
| N | J0630 | INJECTION, CALCITONIN-SALMON, UP | 1/1/2007 | $40.79 | 3 |
| N | J0635 | INJECTION, CALCITRIOL, 1 MCG AMP | 7/1/2003 | INVALID | N |
| N | J0640 | INJECTION, LEUCOVORIN CALCIUM, P | 1/1/2007 | $0.96 | 3 |
| N | J0670 | INJECTION, MEPIVACAINE HCL, PER | 1/1/2007 | $1.51 | 3 |
| N | J0690 | INJECTION, CEFAZOLIN SODIUM, UP | 1/1/2007 | $1.46 | 3 |
| N | J0694 | INJECTION, CEFOXITIN SODIUM, 1 G | 1/1/2007 | $7.09 | 3 |
| N | J0695 | INJECTION, CEFONICID SODIUM, 1 G | 4/1/2002 | INVALID | N |
| N | J0696 | INJECTION, CEFTRIAXONE SODIUM, P | 1/1/2007 | $1.76 | 3 |
| N | J0698 | CEFOTAXIME SODIUM, PER G (CLAFOR | 1/1/2007 | $4.43 | 3 |
| N | J0702 | INJECTION, BETAMETHASONE ACETATE | 1/1/2007 | $5.18 | 3 |
| N | J0704 | INJECTION, BETAMETHASONE SODIUM | 7/1/2006 | $1.13 | 3 |
| N | J0710 | INJECTION, CEPHAPIRIN SODIUM, UP | 2/13/2006 | $0.01 | 5 |
| N | J0713 | INJECTION, CEFTAZIDIME, PER 500 | 1/1/2007 | $4.01 | 3 |
| N | J0715 | INJECTION, CEFTIZOXIME SODIUM, P | 1/1/2007 | $2.98 | 3 |
| N | J0720 | INJECTION, CHLORAMPHENICOL SODIU | 1/1/2007 | $11.23 | 3 |
| N | J0725 | INJECTION, CHORIONIC GONADOTROPI | 1/1/2007 | $3.79 | 3 |
| N | J0730 | INJECTION, CHLORPHENIRAMINE MALE | 4/1/2002 | INVALID | N |
| N | J0735 | INJECTION, CLONIDINE HCL, 1 MG ( | 1/1/2007 | $65.84 | 3 |
| N | J0743 | INJECTION, CILASTATIN SODIUM IMI | 1/1/2007 | $13.66 | 3 |
| N | J0745 | INJECTION, CODEINE PHOSPHATE, PE | 1/1/2007 | $1.05 | 3 |
| N | J0760 | INJECTION, COLCHICINE, PER 1 MG | 1/1/2007 | $4.57 | 3 |
| N | J0770 | INJECTION, COLISTIMETHATE SODIUM | 1/1/2007 | $24.45 | 3 |
| N | J0780 | INJECTION, PROCHLORPERAZINE, UP | 1/1/2007 | $2.04 | 3 |
| N | J0800 | INJECTION, CORTICOTROPIN, UP TO | 1/1/2007 | $114.53 | 3 |
| N | J0810 | INJECTION, CORTISONE ACETATE, UP | 4/1/2002 | INVALID | N |
| N | J0835 | INJECTION, COSYNTROPIN, PER 0.25 | 1/1/2007 | $63.92 | 3 |
| N | J0850 | INJECTION, CYTOMEGALOVIRUS IMMUN | 1/1/2007 | $866.58 | 3 |
| N | J0880 | INJECTION, DARBEPOETIN ALFA, 5 M | 1/1/2006 | INVALID | N |
| N | J0881 | INJECTION, DARBEPOETIN ALFA, 1 M | 1/1/2007 | $3.09 | 3 |
| N | J0882 | INJECTION, DARBEPOETIN ALFA, 1 M | 1/1/2007 | $3.09 | 3 |
| N | J0885 | INJECTION, EPOETIN ALFA, (FOR NO | 1/1/2007 | $9.33 | 3 |
| N | J0895 | INJECTION, DEFEROXAMINE MESYLATE | 1/1/2007 | $14.74 | 3 |
| N | J0900 | INJECTION, TESTOSTERONE ENANTHAT | 7/1/2006 | $1.38 | 3 |
| N | J0945 | INJECTION, BROMPHENIRAMINE MALEA | 1/1/2007 | $0.80 | 3 |
| N | J0970 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $34.23 | 3 |
| N | J1000 | INJECTION, DEPO-ESTRADIOL CYPION | 1/1/2007 | $5.62 | 3 |
| N | J1020 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $2.18 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J1030 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $5.11 | 3 |
| N | J1040 | INJECTION, METHYLPREDNISOLONE AC | 1/1/2007 | $9.45 | 3 |
| N | J1050 | INJECTION, MEDROXYPROGESTERONE A | 7/1/2003 | INVALID | N |
| N | J1055 | INJECTION, MEDROXYPROGESTERONE A | 1/23/2006 | $65.54 | 3 |
| N | J1056 | INJECTION, MEDROXYPROGESTERONE A | 7/1/2006 | $22.89 | 3 |
| N | J1060 | INJECTION, TESTOSTERONE CYPIONAT | 7/1/2006 | $4.14 | 3 |
| N | J1070 | INJECTION, TESTOSTERONE CYPIONAT | 1/1/2007 | $5.45 | 3 |
| N | J1080 | INJECTION, TESTOSTERONE CYPIONAT | 1/1/2007 | $12.82 | 3 |
| N | J1090 | INJECTION, TESTOSTERONE CYPIONAT | 4/1/2002 | INVALID | N |
| N | J1095 | INJECTION, DEXAMEHTASONE ACETATE | 7/1/2003 | INVALID | N |
| N | J1100 | INJECTION, DEXAMETHASONE SODIUM | 1/1/2007 | $0.11 | 3 |
| N | J1110 | INJECTION, DIHYDROERGOTAMINE MES | 1/1/2007 | $22.58 | 3 |
| N | J1120 | INJECTION, ACETAZOLAMIDE SODIUM, | 1/1/2007 | $16.10 | 3 |
| N | J1160 | INJECTION, DIGOXIN, UP TO 0.5 MG | 1/1/2007 | $3.36 | 3 |
| N | J1165 | INJECTION, PHENYTOIN SODIUM, PER | 1/1/2007 | $0.73 | 3 |
| N | J1170 | INJECTION, HYDROMORPHONE HCL, UP | 1/1/2007 | $1.92 | 3 |
| N | J1180 | INJECTION, DYPHYLLINE, UP TO 500 | 7/1/2006 | $8.05 | 3 |
| N | J1190 | INJECTION, DEXRAZOXANE HCL, PER | 1/1/2007 | $175.19 | 3 |
| N | J1200 | INJECTION, DIPHENHYDRAMINE HCL, | 1/1/2007 | $0.80 | 3 |
| N | J1205 | INJECTION, CHLOROTHIAZIDE SODIUM | 11/1/2006 | $123.84 | 3 |
| N | J1212 | INJECTION, DMSO, DIMETHYL SULFOX | 1/1/2007 | $41.55 | 3 |
| N | J1230 | INJECTION, METHADONE HCL, UP TO | 1/1/2007 | $3.33 | 3 |
| N | J1240 | INJECTION, DIMENHYDRINATE, UP TO | 1/1/2007 | $2.93 | 3 |
| N | J1245 | INJECTION, DIPYRIDAMOLE, PER 10 | 1/1/2007 | $1.47 | 3 |
| N | J1250 | INJECTION, DOBUTAMINE HCL, PER 2 | 1/1/2007 | $4.17 | 3 |
| N | J1320 | INJECTION, AMITRIPTYLINE HCL, UP | 7/1/2006 | $2.24 | 3 |
| N | J1325 | INJECTION, EPOPROSTENOL, 0.5 MG | 1/1/2007 | $14.43 | 3 |
| N | J1330 | INJECTION, ERGONOVINE MALEATE, U | 2/13/2006 | $0.01 | 5 |
| N | J1362 | INJECTION, ERYTHROMYCIN GLUCEPTA | 4/1/2002 | INVALID | N |
| N | J1364 | INJECTION, ERYTHROMYCIN LACTOBIO | 1/1/2007 | $5.99 | 3 |
| N | J1380 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $12.52 | 3 |
| N | J1390 | INJECTION, ESTRADIOL VALERATE, U | 1/1/2007 | $17.12 | 3 |
| N | J1410 | INJECTION, ESTROGEN CONJUGATED, | 1/1/2007 | $60.78 | 3 |
| N | J1435 | INJECTION, ESTRONE, PER 1 MG(EST | 7/1/2006 | $0.14 | 3 |
| N | J1440 | INJECTION, FILGRASTIM (G-CSF), 3 | 1/1/2007 | $188.29 | 3 |
| N | J1441 | INJECTION, FILGRASTIM (G-CSF), 4 | 1/1/2007 | $299.09 | 3 |
| N | J1455 | INJECTION, FOSCARNET SODIUM, PER | 1/1/2007 | $10.17 | 3 |
| N | J1460 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $11.83 | 3 |
| N | J1470 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $23.66 | 3 |
| N | J1480 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $35.47 | 3 |
| N | J1490 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $47.31 | 3 |
| N | J1500 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $59.14 | 3 |
| N | J1510 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $71.02 | 3 |
| N | J1520 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $82.72 | 3 |
| N | J1530 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $94.62 | 3 |
| N | J1540 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $106.54 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J1550 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $118.27 | 3 |
| N | J1560 | INJECTION, GAMMA GLOBULIN, INTRA | 1/1/2007 | $118.24 | 3 |
| N | J1561 | INJECTION, IMMUNE GLOBULIN, INTR | 7/1/2003 | INVALID | N |
| N | J1565 | INJECTION, RESPIRATORY SYNCYTIAL | 7/1/2006 | $16.18 | 3 |
| N | J1570 | INJECTION, GANCICLOVIR SODIUM, 5 | 1/1/2007 | $39.55 | 3 |
| N | J1580 | INJECTION, GARAMYCIN, GENTAMICIN | 1/1/2007 | $1.07 | 3 |
| N | J1600 | INJECTION, GOLD SODIUM THIOMALAT | 1/1/2007 | $5.41 | 3 |
| N | J1610 | INJECTION, GLUCAGON HYDROCHLORID | 1/1/2007 | $68.04 | 3 |
| N | J1620 | INJECTION, GONADORELIN HYDROCHLO | 1/1/2007 | $180.30 | 3 |
| N | J1626 | INJECTION, GRANISETRON HYDROCHLO | 1/1/2007 | $7.64 | 3 |
| N | J1630 | INJECTION, HALOPERIDOL, UP TO 5 | 1/1/2007 | $2.12 | 3 |
| N | J1631 | INJECTION, HALOPERIDOL DECANOATE | 1/1/2007 | $5.25 | 3 |
| N | J1642 | INJECTION, HEPARIN SODIUM, (HEPA | 7/1/2006 | $0.05 | 3 |
| N | J1644 | INJECTION, HEPARIN SODIUM, PER 1 | 1/1/2007 | $0.23 | 3 |
| N | J1645 | INJECTION, DALTEPARIN SODIUM, PE | 1/1/2007 | $11.12 | 3 |
| N | J1650 | INJECTION, ENOXAPARIN SODIUM, 10 | 1/1/2007 | $5.64 | 3 |
| N | J1670 | INJECTION, TETANUS IMMUNE GLOBUL | 1/1/2007 | $95.91 | 3 |
| N | J1690 | INJECTION, PREDNISOLONE TEBUTATE | 4/1/2002 | INVALID | N |
| N | J1700 | INJECTION, HYDROCORTISONE ACETAT | 4/1/2003 | $0.24 | 3 |
| N | J1710 | INJECTION, HYDROCORTISONE SODIUM | 2/13/2006 | $0.01 | 5 |
| N | J1720 | INJECTION, HYDROCORTISONE SODIUM | 1/1/2007 | $1.99 | 3 |
| N | J1730 | INJECTION, DIAZOXIDE, UP TO 300 | 1/1/2007 | $111.85 | 3 |
| N | J1739 | INJECTION, HYDROXYPROGESTERONE C | 4/1/2002 | INVALID | N |
| N | J1741 | INJECTION, HYDROXYPROGESTERONE C | 4/1/2002 | INVALID | N |
| N | J1742 | INJECTION, IBUTILIDE FUMARATE, 1 | 1/1/2007 | $267.82 | 3 |
| N | J1750 | INJECTION, IRON DEXTRAN, 50 MG ( | 1/1/2006 | INVALID | N |
| N | J1785 | INJECTION, IMIGLUCERASE, PER UNI | 1/1/2007 | $3.92 | 3 |
| N | J1790 | INJECTION, DROPERIDOL, UP TO 5 M | 1/1/2007 | $1.13 | 3 |
| N | J1800 | INJECTION, PROPRANOLOL HCL, UP T | 7/1/2006 | $3.80 | 3 |
| N | J1810 | INJECTION, DROPERIDOL AND FENTAN | 7/1/2006 | $5.58 | 3 |
| N | J1820 | INJECTION, INSULIN, UP TO 100 UN | 7/1/2003 | INVALID | N |
| N | J1825 | INJECTION, INTERFERON BETA-1A, 3 | 11/1/2006 | $435.47 | 3 |
| N | J1830 | INTERFERON BETA-1B, PER 0.25 MG | 1/1/2007 | $90.28 | 3 |
| N | J1840 | INJECTION, KANAMYCIN SULFATE, UP | 1/1/2007 | $4.07 | 3 |
| N | J1850 | INJECTION, KANAMYCIN SULFATE, UP | 1/1/2007 | $0.61 | 3 |
| N | J1885 | INJECTION, KETOROLAC TROMETHAMIN | 1/1/2007 | $0.49 | 3 |
| N | J1890 | INJECTION, CEPHALOTHIN SODIUM, U | 7/11/2005 | $0.01 | 5 |
| N | J1910 | INJECTION, KUTAPRESSIN, UP TO 2 | 4/1/2004 | INVALID | N |
| N | J1930 | INJECTION, PROPIOMAZINE, UP TO 2 | 4/1/2002 | INVALID | N |
| N | J1940 | INJECTION, FUROSEMIDE, UP TO 20 | 1/1/2007 | $0.29 | 3 |
| N | J1950 | INJECTION, LEUPROLIDE ACETATE (F | 1/1/2007 | $431.95 | 3 |
| N | J1955 | INJECTION, LEVOCARNITINE, PER 1 | 1/1/2007 | $9.36 | 3 |
| N | J1956 | INJECTION, LEVOFLOXACIN, 250 MG | 1/1/2007 | $7.55 | 3 |
| N | J1960 | INJECTION, LEVORPHANOL TARTRATE, | 1/30/2006 | $4.54 | 3 |
| N | J1970 | INJECTION, METHOTRIMEPRAZINE, UP | 4/1/2002 | INVALID | N |
| N | J1980 | INJECTION, HYOSCYAMINE SULFATE, | 1/1/2007 | $8.70 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J1990 | INJECTION, CHLORDIAZEPOXIDE HCL, | 7/1/2006 | $21.05 | 3 |
| N | J2000 | INJECTION, LIDOCAINE HCL, 50 CC | 4/1/2004 | INVALID | N |
| N | J2010 | INJECTION, LINCOMYCIN HCL, UP TO | 1/1/2007 | $3.84 | 3 |
| N | J2060 | INJECTION, LORAZEPAM, 2 MG (ATIV | 1/1/2007 | $1.22 | 3 |
| N | J2150 | INJECTION, MANNITOL, 25% IN 50 M | 1/1/2007 | $0.86 | 3 |
| N | J2175 | INJECTION, MEPERIDINE HCL, PER 1 | 1/1/2007 | $1.79 | 3 |
| N | J2180 | INJECTION, MEPERIDINE AND PROMET | 7/1/2006 | $3.79 | 3 |
| N | J2210 | INJECTION, METHYLERGONOVINE MALE | 1/1/2007 | $4.60 | 3 |
| N | J2240 | INJECTION, METOCURINE IODIDE, UP | 4/1/2002 | INVALID | N |
| N | J2250 | INJECTION, MIDAZOLAM HCL, PER 1 | 1/1/2007 | $0.24 | 3 |
| N | J2260 | INJECTION, MILRINONE LACTATE, 5 | 1/1/2007 | $3.23 | 3 |
| N | J2270 | INJECTION, MORPHINE SULFATE, UP | 1/1/2007 | $2.56 | 3 |
| N | J2271 | INJECTION, MORPHINE SULFATE, 100 | 1/1/2007 | $3.88 | 3 |
| N | J2275 | INJECTION, MORPHINE SULFATE (PRE | 1/1/2007 | $6.50 | 3 |
| N | J2300 | INJECTION, NALBUPHINE HCL, PER 1 | 1/1/2007 | $0.58 | 3 |
| N | J2310 | INJECTION, NALOXONE HCL, PER 1 M | 1/1/2007 | $1.84 | 3 |
| N | J2320 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $3.20 | 3 |
| N | J2321 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $6.42 | 3 |
| N | J2322 | INJECTION, NANDROLONE DECANOATE, | 1/1/2007 | $12.79 | 3 |
| N | J2330 | INJECTION, THIOTHIXENE, UP TO 4 | 4/1/2002 | INVALID | N |
| N | J2350 | INJECTION, NIACINAMIDE, NIACIN, | 4/1/2002 | INVALID | N |
| N | J2355 | INJECTION, OPRELVEKIN, 5 MG (NEU | 1/1/2007 | $246.07 | 3 |
| N | J2360 | INJECTION, ORPHENADRINE CITRATE, | 1/1/2007 | $11.13 | 3 |
| N | J2370 | INJECTION, PHENYLEPHRINE HCL, UP | 1/1/2007 | $0.73 | 3 |
| N | J2400 | INJECTION, CHLOROPROCAINE HCL, P | 1/1/2007 | $15.20 | 3 |
| N | J2405 | INJECTION, ONDANSETRON HCL, PER | 1/1/2007 | $3.71 | 3 |
| N | J2410 | INJECTION, OXYMORPHONE HCL, UP T | 1/1/2007 | $2.36 | 3 |
| N | J2430 | INJECTION, PAMIDRONATE DISODIUM, | 1/1/2007 | $33.95 | 3 |
| N | J2440 | INJECTION, PAPAVERINE HCL, UP TO | 7/1/2006 | $0.60 | 3 |
| N | J2460 | INJECTION, OXYTETRACYCLINE HCL, | 7/1/2006 | $0.94 | 3 |
| N | J2469 | INJECTION, PALONOSETRON HCL, 25 | 1/1/2007 | $17.46 | 3 |
| N | J2480 | INJECTION, HYDROCHLORIDES OF OPI | 4/1/2002 | INVALID | N |
| N | J2505 | INJECTION, PEGFILGRASTIM, 6 MG ( | 1/1/2007 | $2,152.34 | 3 |
| N | J2510 | INJECTION, PENICILLIN G PROCAINE | 1/1/2007 | $8.89 | 3 |
| N | J2512 | INJECTION, PENTAGASTRIN, PER 2 M | 4/1/2002 | INVALID | N |
| N | J2515 | INJECTION, PENTOBARBITAL SODIUM, | 1/1/2007 | $5.50 | 3 |
| N | J2540 | INJECTION, PENICILLIN G POTASSIU | 1/1/2007 | $0.96 | 3 |
| N | J2543 | INJECTION, PIPERACILLIN SODIUM/T | 1/1/2007 | $4.87 | 3 |
| N | J2545 | PENTAMIDINE ISETHIONATE, INHALAT | 1/1/2007 | $44.73 | 3 |
| N | J2550 | INJECTION, PROMETHAZINE HCL, UP | 1/1/2007 | $1.85 | 3 |
| N | J2560 | INJECTION, PHENOBARBITAL SODIUM, | 1/1/2007 | $3.19 | 3 |
| N | J2590 | INJECTION, OXYTOCIN, UP TO 10 UN | 1/1/2007 | $2.18 | 3 |
| N | J2597 | INJECTION, DESMOPRESSIN ACETATE, | 1/1/2007 | $2.66 | 3 |
| N | J2640 | INJECTION, PREDNISOLONE SODIUM P | 4/1/2002 | NC | 9 |
| N | J2650 | INJECTION, PREDNISOLONE ACETATE, | 1/1/2007 | $0.44 | 3 |
| N | J2670 | INJECTION, TOLAZOLINE HCL, UP TO | 7/1/2005 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J2675 | INJECTION, PROGESTERONE, PER 50 | 1/1/2007 | $1.69 | 3 |
| N | J2680 | INJECTION, FLUPHENAZINE DECANOAT | 1/1/2007 | $1.49 | 3 |
| N | J2690 | INJECTION, PROCAINAMIDE HCL, UP | 1/1/2007 | $2.24 | 3 |
| N | J2700 | INJECTION, OXACILLIN SODIUM, UP | 1/1/2007 | $1.54 | 3 |
| N | J2710 | INJECTION, NEOSTIGMINE METHYLSUL | 1/1/2007 | $0.08 | 3 |
| N | J2720 | INJECTION, PROTAMINE SULFATE, PE | 1/1/2007 | $0.43 | 3 |
| N | J2725 | INJECTION, PROTIRELIN, PER 250 M | 7/1/2006 | $21.78 | 3 |
| N | J2730 | INJECTION, PRALIDOXIME CHLORIDE, | 1/1/2007 | $66.49 | 3 |
| N | J2760 | INJECTION, PHENTOLAMINE MESYLATE | 1/1/2007 | $23.97 | 3 |
| N | J2765 | INJECTION, METOCLOPRAMIDE HCL, U | 1/1/2007 | $0.44 | 3 |
| N | J2788 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $26.17 | 3 |
| N | J2790 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $81.59 | 3 |
| N | J2792 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $16.52 | 3 |
| N | J2800 | INJECTION, METHOCARBAMOL, UP TO | 1/1/2007 | $12.28 | 3 |
| N | J2810 | INJECTION, THEOPHYLLINE, PER 40 | 7/1/2006 | $0.03 | 3 |
| N | J2820 | INJECTION, SARGRAMOSTIM (GM-CSF) | 1/1/2007 | $24.89 | 3 |
| N | J2860 | INJECTION, SECOBARBITAL SODIUM, | 4/1/2002 | INVALID | N |
| N | J2910 | INJECTION, AUROTHIOGLUCOSE, UP T | 7/1/2006 | $24.50 | 3 |
| N | J2912 | INJECTION, SODIUM CHLORIDE, 0.9% | 1/1/2007 | INVALID | N |
| N | J2920 | INJECTION, METHYLPREDNISOLONE SO | 1/1/2007 | $1.95 | 3 |
| N | J2930 | INJECTION, METHYLPREDNISOLONE SO | 1/1/2007 | $2.48 | 3 |
| N | J2950 | INJECTION, PROMAZINE HCL, UP TO | 11/1/2006 | $0.38 | 3 |
| N | J2970 | INJECTION, METHICILLIN SODIUM, U | 4/1/2002 | INVALID | N |
| N | J2995 | INJECTION, STREPTOKINASE, PER 25 | 7/1/2006 | $79.50 | 3 |
| N | J3000 | INJECTION, STREPTOMYCIN, UP TO 1 | 1/1/2007 | $6.79 | 3 |
| N | J3010 | INJECTION, FENTANYL CITRATE, 0.1 | 1/1/2007 | $0.34 | 3 |
| N | J3030 | INJECTION, SUMATRIPTAN SUCCINATE | 1/1/2007 | $58.49 | 3 |
| N | J3070 | INJECTION, PENTAZOCINE, 30 MG (T | 1/1/2007 | $5.80 | 3 |
| N | J3080 | INJECTION, CHLORPROTHIXENE, UP T | 4/1/2002 | INVALID | N |
| N | J3105 | INJECTION, TERBUTALINE SULFATE, | 1/1/2007 | $3.86 | 3 |
| N | J3120 | INJECTION, TESTOSTERONE ENANTHAT | 1/1/2007 | $5.18 | 3 |
| N | J3130 | INJECTION, TESTOSTERONE ENANTHAT | 1/1/2007 | $10.35 | 3 |
| N | J3140 | INJECTION, TESTOSTERONE SUSPENSI | 7/5/2004 | $0.62 | 3 |
| N | J3150 | INJECTION, TESTOSTERONE PROPIONA | 8/21/2006 | $5.07 | 3 |
| N | J3230 | INJECTION, CHLORPROMAZINE HCL, U | 1/1/2007 | $3.95 | 3 |
| N | J3240 | INJECTION, THYROTROPIN ALPHA, 0. | 1/1/2007 | $765.20 | 3 |
| N | J3250 | INJECTION, TRIMETHOBENZAMIDE HCL | 1/1/2007 | $4.03 | 3 |
| N | J3260 | INJECTION, TOBRAMYCIN SULFATE, U | 1/1/2007 | $1.97 | 3 |
| N | J3265 | INJECTION, TORSEMIDE, 10 MG/ML ( | 1/1/2007 | $2.35 | 3 |
| N | J3270 | INJECTION, IMIPRAMINE HCL, UP TO | 4/1/2002 | INVALID | N |
| N | J3280 | INJECTION, THIETHYLPERAZINE MALE | 2/13/2006 | $0.01 | 5 |
| N | J3301 | INJECTION, TRIAMCINOLONE ACETONI | 1/1/2007 | $1.44 | 3 |
| N | J3302 | INJECTION, TRIAMCINOLONE DIACETA | 7/1/2006 | $0.28 | 3 |
| N | J3303 | INJECTION, TRIAMCINOLONE HEXACET | 1/1/2007 | $3.42 | 3 |
| N | J3305 | INJECTION, TRIMETREXATE GLUCORON | 1/1/2007 | $145.06 | 3 |
| N | J3310 | INJECTION, PERPHENAZINE, UP TO 5 | 2/13/2006 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J3320 | INJECTION, SPECTINOMYCIN HCL, UP | 1/1/2007 | $18.30 | 3 |
| N | J3350 | INJECTION, UREA, UP TO 40 G (URE | 2/13/2006 | $0.01 | 5 |
| N | J3360 | INJECTION, DIAZEPAM, UP TO 5 MG | 1/1/2007 | $0.78 | 3 |
| N | J3364 | INJECTION, UROKINASE, 5000 IU VI | 7/1/2006 | $9.16 | 3 |
| N | J3365 | INJECTION, IV, UROKINASE, 250,00 | 7/1/2006 | $457.73 | 3 |
| N | J3370 | INJECTION, VANCOMYCIN HCL, UP TO | 1/1/2007 | $3.44 | 3 |
| N | J3390 | INJECTION, METHOXAMINE, UP TO 20 | 4/1/2002 | INVALID | N |
| N | J3400 | INJECTION, TRIFLUPROMAZINE HCL, | 2/13/2006 | $0.01 | 5 |
| N | J3410 | INJECTION, HYDROXYZINE HCL, UP T | 1/1/2007 | $0.21 | 3 |
| N | J3420 | INJECTION, VITAMIN B-12 CYANOCOB | 1/1/2007 | $0.34 | 3 |
| N | J3430 | INJECTION, PHYTONADIONE (VITAMIN | 1/1/2007 | $2.89 | 3 |
| N | J3450 | INJECTION, MEPHENTERMINE SULFATE | 4/1/2002 | INVALID | N |
| N | J3470 | INJECTION, HYALURONIDASE, UP TO | 1/1/2007 | $16.71 | 3 |
| N | J3475 | INJECTION, MAGNESIUM SULFATE, PE | 1/1/2007 | $0.15 | 3 |
| N | J3480 | INJECTION, POTASSIUM CHLORIDE, P | 7/1/2006 | $0.02 | 3 |
| N | J3490 | UNCLASSIFIED DRUGS | 11/1/2004 | $0.01 | 5 |
| N | J3520 | EDETATE DISODIUM, PER 150 MG (EN | 1/1/2001 | NC | 9 |
| N | J3530 | NASAL VACCINE INHALATION | 1/17/2005 | NC | 9 |
| N | J3535 | DRUG ADMINISTERED THROUGH A METE | 1/1/2005 | $0.01 | 5 |
| N | J3570 | LAETRILE, AMYGDALIN, VITAMIN B17 | 3/1/1989 | NC | 9 |
| N | J7030 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $1.06 | 3 |
| N | J7040 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $0.53 | 3 |
| N | J7042 | 5% DEXTROSE/NORMAL SALINE (500 M | 7/1/2006 | $0.39 | 3 |
| N | J7050 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $0.27 | 3 |
| N | J7051 | STERILE SALINE OR WATER, UP TO 5 | 1/1/2006 | INVALID | N |
| N | J7060 | 5% DEXTROSE/WATER (500 ML = 1 UN | 1/1/2007 | $1.30 | 3 |
| N | J7070 | INFUSION, D-5-W, 1000 CC | 1/1/2007 | $2.60 | 3 |
| N | J7100 | INFUSION, DEXTRAN 40, 500 ML (GE | 1/1/2007 | $13.98 | 3 |
| N | J7110 | INFUSION, DEXTRAN 75, 500 ML (GE | 1/1/2007 | $8.66 | 3 |
| N | J7120 | RINGERS LACTATE INFUSION, UP TO | 1/1/2007 | $0.88 | 3 |
| N | J7130 | HYPERTONIC SALINE SOLUTION, 50 O | 3/1/1989 | $0.01 | 5 |
| N | J7190 | FACTOR VIII (ANTI-HEMOPHILIC FAC | 1/1/2007 | $0.70 | 3 |
| N | J7191 | FACTOR VIII (ANTI-HEMOPHILIC FAC | 2/1/1999 | $2.20 | 3 |
| N | J7194 | FACTOR IX COMPLEX, PER IU (KONYN | 1/1/2007 | $0.74 | 3 |
| N | J7197 | ANTITHROMBIN III (HUMAN), PER I. | 1/1/2007 | $1.64 | 3 |
| N | J7300 | INTRAUTERINE COPPER CONTRACEPTIV | 1/23/2006 | $475.00 | 3 |
| N | J7302 | LEVONOGESTREL-RELEASING INTRAUTE | 1/23/2006 | $515.29 | 3 |
| N | J7304 | CONTRACEPTIVE SUPPLY, HORMONE CO | 1/1/2005 | $0.01 | 5 |
| N | J7306 | LEVONORGESTREL (CONTRACEPTIVE) I | 1/1/2006 | NC | 9 |
| N | J7310 | GANCICLOVIR, 4.5 MG, LONG-ACTING | 12/20/2004 | NC | 9 |
| N | J7315 | SODIUM HYALURONATE, 20 MG, FOR I | 4/1/2002 | INVALID | N |
| N | J7320 | HYLAN G-F 20, 16 MG, FOR INTRA A | 1/1/2007 | INVALID | N |
| N | J7500 | AZATHIOPRINE, ORAL, 50 MG (IMURA | 1/1/2007 | $0.27 | 3 |
| N | J7501 | AZATHIOPRINE, PARENTERAL, 100 MG | 1/1/2007 | $49.59 | 3 |
| N | J7502 | CYCLOSPORINE, ORAL, 100 MG (NEOR | 1/1/2007 | $3.54 | 3 |
| N | J7504 | LYMPHOCYTE IMMUNE GLOBULIN, ANTI | 1/1/2007 | $317.15 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J7505 | MUROMONAB-CD3, PARENTERAL, 5 MG | 1/1/2007 | $876.83 | 3 |
| N | J7506 | PREDNISONE, ORAL, PER 5 MG (LIQU | 7/1/2006 | $0.20 | 3 |
| N | J7507 | TACROLIMUS, ORAL, PER 1 MG (PROG | 7/1/2006 | $3.54 | 3 |
| N | J7508 | TACROLIMUS, ORAL, PER 5 MG (PROG | 4/1/2004 | INVALID | N |
| N | J7509 | METHYLPREDNISOLONE, ORAL, PER 4 | 7/1/2006 | $0.07 | 3 |
| N | J7510 | PREDNISOLONE, ORAL, PER 5 MG (DE | 1/1/2007 | $0.09 | 3 |
| N | J7513 | DACLIZUMAB, PARENTERAL, 25 MG (Z | 1/1/2007 | $314.59 | 3 |
| N | J7515 | CYCLOSPORINE, ORAL, 25 MG (NEORA | 1/1/2007 | $0.95 | 3 |
| N | J7516 | CYCLOSPORINE, PARENTERAL, 250 MG | 1/1/2007 | $20.64 | 3 |
| N | J7599 | IMMUNOSUPPRESSIVE DRUG, NOT OTHE | 1/1/1996 | NC | 9 |
| N | J7619 | ALBUTEROL, ALL FORMULATIONS INCL | 1/1/2005 | INVALID | N |
| N | J7699 | NOC DRUGS, INHALATION SOLUTION A | 11/1/2004 | $0.01 | 5 |
| N | J7799 | NOC DRUGS, OTHER THAN INHALATION | 11/1/2004 | $0.01 | 5 |
| N | J8498 | ANTIEMETIC DRUG, RECTAL/SUPPOSIT | 1/1/2006 | $0.01 | 5 |
| N | J8499 | PRESCRIPTION DRUG, ORAL, NON CHE | 11/1/2004 | $0.01 | 5 |
| N | J8530 | CYCLOPHOSPHAMIDE; ORAL, 25 MG (B | 1/1/2007 | $0.98 | 3 |
| N | J8560 | ETOPOSIDE, ORAL, 50 MG (VEPESID) | 1/1/2007 | $30.54 | 3 |
| N | J8600 | MELPHALAN, ORAL, 2 MG (ALKERAN) | 1/30/2006 | $6.58 | 3 |
| N | J8610 | METHOTREXATE, ORAL, 2.5 MG (RHEU | 1/1/2007 | $0.22 | 3 |
| N | J8999 | PRESCRIPTION DRUG, ORAL, CHEMOTH | 11/1/2004 | $0.01 | 5 |
| N | J9000 | DOXORUBICIN HCL, 10 MG (ADRIAMYC | 1/1/2007 | $6.24 | 3 |
| N | J9001 | DOXORUBICIN HYDROCHLORIDE, ALL L | 1/1/2007 | $386.08 | 3 |
| N | J9010 | ALEMTUZUMAB, 10 MG (CAMPATH) | 1/1/2007 | $541.30 | 3 |
| N | J9015 | ALDESLEUKIN, PER SINGLE USE VIAL | 1/1/2007 | $739.52 | 3 |
| N | J9017 | ARSENIC TRIOXIDE, 1 MG (TRISENOX | 1/1/2007 | $33.49 | 3 |
| N | J9020 | ASPARAGINASE, 10,000 UNITS (ELSP | 1/1/2007 | $54.77 | 3 |
| N | J9031 | BCG LIVE (INTRAVESICAL), PER INS | 1/1/2007 | $114.16 | 3 |
| N | J9035 | INJECTION, BEVACIZUMAB, 10 MG (A | 1/1/2007 | $57.48 | 3 |
| N | J9040 | BLEOMYCIN SULFATE, 15 UNITS (BLE | 1/1/2007 | $33.30 | 3 |
| N | J9041 | INJECTION, BORTEZOMIB, .1 MG (VE | 1/1/2007 | $32.68 | 3 |
| N | J9045 | CARBOPLATIN, 50 MG (PARAPLATIN) | 1/1/2007 | $8.94 | 3 |
| N | J9055 | INJECTION, CETUXIMAB, 10 MG (ERB | 1/1/2007 | $49.83 | 3 |
| N | J9060 | CISPLATIN, POWDER OR SOLUTION, P | 1/1/2007 | $2.45 | 3 |
| N | J9062 | CISPLATIN, 50 MG (PLATINOL AQ) | 1/1/2007 | $12.26 | 3 |
| N | J9065 | INJECTION, CLADRIBINE, PER 1 MG | 1/1/2007 | $37.58 | 3 |
| N | J9070 | CYCLOPHOSPHAMIDE, 100 MG (CYTOXA | 1/1/2007 | $1.92 | 3 |
| N | J9080 | CYCLOPHOSPHAMIDE, 200 MG (CYTOXA | 1/1/2007 | $3.83 | 3 |
| N | J9090 | CYCLOPHOSPHAMIDE, 500 MG (CYTOXA | 1/1/2007 | $15.75 | 3 |
| N | J9091 | CYCLOPHOSPHAMIDE, 1 G (CYTOXAN, | 1/1/2007 | $19.17 | 3 |
| N | J9092 | CYCLOPHOSPHAMIDE, 2 G (CYTOXAN, | 1/1/2007 | $38.34 | 3 |
| N | J9093 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 1 | 1/1/2007 | $1.99 | 3 |
| N | J9094 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 2 | 1/1/2007 | $3.97 | 3 |
| N | J9095 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 5 | 1/1/2007 | $9.93 | 3 |
| N | J9096 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 1 | 1/1/2007 | $17.09 | 3 |
| N | J9097 | CYCLOPHOSPHAMIDE, LYOPHILIZED, 2 | 1/1/2007 | $39.71 | 3 |
| N | J9098 | CYTARABINE LIPOSOME, 10 MG | 1/1/2007 | $394.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J9100 | CYTARABINE, 100 MG (CYTOSAR-U) | 1/1/2007 | $1.65 | 3 |
| N | J9110 | CYTARABINE, 500 MG (CYTOSAR-U) | 1/1/2007 | $8.22 | 3 |
| N | J9120 | DACTINOMYCIN, 0.5 MG (COSMEGEN) | 11/1/2006 | $493.43 | 3 |
| N | J9130 | DACARBAZINE, 100 MG (DTIC-DOME) | 1/1/2007 | $4.67 | 3 |
| N | J9140 | DACARBAZINE, 200 MG (DTIC-DOME) | 1/1/2007 | $9.34 | 3 |
| N | J9150 | DAUNORUBICIN HCL, 10 MG (CERUBID | 1/1/2007 | $22.78 | 3 |
| N | J9151 | DAUNORUBICIN CITRATE, LIPOSOMAL | 1/1/2007 | $55.92 | 3 |
| N | J9160 | DENILEUKIN DIFTITOX, 300 MCG (ON | 1/1/2007 | $1,390.51 | 3 |
| N | J9165 | DIETHYLSTILBESTROL DIPHOSPHATE, | 2/13/2006 | $0.01 | 5 |
| N | J9170 | DOCETAXEL, 20 MG (TAXOTERE) | 1/1/2007 | $306.13 | 3 |
| N | J9178 | INJECTION, EPIRUBICIN HCL, 2 MG | 1/1/2007 | $24.60 | 3 |
| N | J9181 | ETOPOSIDE, 10 MG (VEPESID, TOPOS | 1/1/2007 | $0.51 | 3 |
| N | J9182 | ETOPOSIDE, 100 MG (VEPESID, TOPO | 1/1/2007 | $5.13 | 3 |
| N | J9185 | FLUDARABINE PHOSPHATE, 50 MG (FL | 1/1/2007 | $244.05 | 3 |
| N | J9190 | FLUOROURACIL, 500 MG (ADRUCIL) | 1/1/2007 | $1.50 | 3 |
| N | J9200 | FLOXURIDINE, 500 MG (FUDR) | 1/1/2007 | $58.27 | 3 |
| N | J9201 | GEMCITABINE HCL, 200 MG (GEMZAR) | 1/1/2007 | $124.55 | 3 |
| N | J9202 | GOSERELIN ACETATE IMPLANT, PER 3 | 1/1/2007 | $200.43 | 3 |
| N | J9206 | IRINOTECAN, 20 MG (CAMPTOSAR) | 1/1/2007 | $126.67 | 3 |
| N | J9208 | IFOSFAMIDE, PER 1 GM (IFEX) | 1/1/2007 | $49.61 | 3 |
| N | J9209 | MESNA, 200 MG (MESNEX) | 1/1/2007 | $8.89 | 3 |
| N | J9211 | IDARUBICIN HCL, 5 MG (IDAMYCIN) | 1/1/2007 | $285.38 | 3 |
| N | J9212 | INJECTION, INTERFERON ALFACON-1, | 7/1/2006 | $4.65 | 3 |
| N | J9213 | INTERFERON ALFA-2A, RECOMBINANT, | 1/1/2007 | $37.29 | 3 |
| N | J9214 | INTERFERON ALFA-2B, RECOMBINANT, | 1/1/2007 | $13.82 | 3 |
| N | J9215 | INTERFERON ALFA-N3, (HUMAN LEUKO | 2/13/2006 | $0.01 | 5 |
| N | J9216 | INTERFERON GAMMA-1B, 3 MILLION U | 7/1/2006 | $289.87 | 3 |
| N | J9218 | LEUPROLIDE ACETATE, PER 1 MG (LU | 1/1/2007 | $7.23 | 3 |
| N | J9219 | LEUPROLIDE ACETATE IMPLANT, 65 M | 1/1/2007 | $1,717.04 | 3 |
| N | J9230 | MECHLORETHAMINE HCL, (NITROGEN M | 11/1/2006 | $141.61 | 3 |
| N | J9245 | INJECTION, MELPHALAN HCL, 50 MG | 1/1/2007 | $1,197.78 | 3 |
| N | J9250 | METHOTREXATE SODIUM, 5 MG (FOLEX | 1/1/2007 | $0.25 | 3 |
| N | J9260 | METHOTREXATE SODIUM, 50 MG (FOLE | 1/1/2007 | $2.59 | 3 |
| N | J9263 | INJECTION, OXALIPLATIN, 0.5 MG | 1/1/2007 | $8.92 | 3 |
| N | J9264 | INJECTION, PACLITAXEL PROTEIN-BO | 1/1/2007 | $8.67 | 3 |
| N | J9265 | PACLITAXEL, 30 MG (TAXOL) | 1/1/2007 | $12.36 | 3 |
| N | J9266 | PEGASPARGASE, PER SINGLE DOSE VI | 1/1/2007 | $1,687.85 | 3 |
| N | J9268 | PENTOSTATIN, PER 10 MG (NIPENT) | 1/1/2007 | $1,490.13 | 3 |
| N | J9270 | PLICAMYCIN, 2500 MCG (MITHRACIN) | 5/24/2001 | $98.74 | 3 |
| N | J9280 | MITOMYCIN, 5 MG (MUTAMYCIN) | 1/1/2007 | $17.13 | 3 |
| N | J9290 | MITOMYCIN, 20 MG (MUTAMYCIN) | 1/1/2007 | $68.52 | 3 |
| N | J9291 | MITOMYCIN, 40 MG (MUTAMYCIN) | 1/1/2007 | $137.03 | 3 |
| N | J9293 | MITOXANTRONE HCL, PER 5 MG (NOVA | 1/1/2007 | $162.37 | 3 |
| N | J9300 | GEMTUZUMAB OZOGAMICIN, 5 MG (MYL | 1/1/2007 | $2,357.42 | 3 |
| N | J9305 | INJECTION, PEMETREXED, 10 MG (AL | 1/1/2007 | $43.68 | 3 |
| N | J9310 | RITUXIMAB, 100 MG (RITUXAN) | 1/1/2007 | $486.55 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | J9320 | STREPTOZOCIN, 1 GM (ZANOSAR) | 1/1/2007 | $151.74 | 3 |
| N | J9340 | THIOTEPA, 15 MG (THIOPLEX) | 1/1/2007 | $40.61 | 3 |
| N | J9350 | THYTROPAR, THYROID CANCER, 10 UN | 1/1/2007 | $820.56 | 3 |
| N | J9355 | TRASTUZUMAB, 10 MG (HERCEPTIN) | 1/1/2007 | $56.76 | 3 |
| N | J9357 | VALRUBICIN, INTRAVESICAL, 200 MG | 2/13/2006 | $0.01 | 5 |
| N | J9360 | VINBLASTINE SULFATE, 1 MG (VELBA | 1/1/2007 | $1.22 | 3 |
| N | J9370 | VINCRISTINE SULFATE, 1 MG (ONCOV | 1/1/2007 | $7.70 | 3 |
| N | J9375 | VINCRISTINE SULFATE 2 MG (ONCOVI | 1/1/2007 | $15.41 | 3 |
| N | J9380 | VINCRISTINE SULFATE, 5 MG (ONCOV | 1/1/2007 | $38.52 | 3 |
| N | J9390 | VINORELBINE TARTRATE, PER 10 MG | 1/1/2007 | $18.37 | 3 |
| N | J9395 | INJECTION, FULVESTRANT, 25 MG | 1/1/2007 | $80.47 | 3 |
| N | J9600 | PORFIMER SODIUM, 75 MG, (PHOTOFR | 7/1/2006 | $2,505.40 | 3 |
| N | J9999 | NOT OTHERWISE CLASSIFIED, ANTINE | 9/1/2005 | $0.01 | 5 |
| N | L3800 | WRIST HAND FINGER ORTHOSIS, SHOR | 10/1/2006 | $176.02 | 3 |
| N | L4350 | PNEUMATIC ANKLE CONTROL SPLINT, | 10/1/2006 | $66.60 | 3 |
| N | L5968 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $2,571.58 | 3 |
| N | L5975 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $328.07 | 3 |
| N | L5988 | ALL LOWER EXTREMITY PROSTHESIS, | 10/1/2006 | $1,413.70 | 3 |
| N | L7499 | UNLISTED PROCEDURES FOR UPPER EX | 1/1/1994 | $0.01 | 5 |
| N | L8100 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8110 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8120 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8130 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8140 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8150 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8160 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8170 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8180 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8190 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8195 | GRADIENT COMPRESSION STOCKING, W | 1/1/2006 | INVALID | N |
| N | L8200 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8210 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8220 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8230 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| N | L8300 | TRUSS, SINGLE WITH STANDARD PAD | 10/1/2006 | $75.54 | 3 |
| N | L8310 | TRUSS, DOUBLE WITH STANDARD PADS | 10/1/2006 | $105.82 | 3 |
| N | L8320 | TRUSS, ADDITION TO STANDARD PAD, | 10/1/2006 | $40.28 | 3 |
| N | L8330 | TRUSS, ADDITION TO STANDARD PAD, | 10/1/2006 | $35.59 | 3 |
| N | M0064 | BREIF OFFICE VISIT FOR THE SOLE | 1/1/2007 | $18.68 | 3 |
| N | M0300 | IV CHELATION THERAPY (CHEMICAL | 2/1/1994 | NC | 9 |
| N | P9612 | CATHETERIZATION FOR COLLECTION O | 11/1/2001 | $2.22 | 3 |
| N | Q0136 | INJECTION, EPOETIN ALPHA, (FOR N | 1/1/2006 | INVALID | N |
| N | Q0137 | INJECTION, DARBEPOETIN ALFA, 1 M | 1/1/2006 | INVALID | N |
| N | Q0160 | FACTOR IX (ANTIHEMOPHILIC FACTOR | 4/1/2002 | INVALID | N |
| N | Q0161 | FACTOR IX (ANTIHEMOPHILIC FACTOR | 4/1/2002 | INVALID | N |
| N | Q0163 | DIPHENHYDRAMINE HYDROOCHLORIDE, | 11/1/2006 | $0.03 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | Q0164 | PROCHLORPERAZINE MALEATE, 5 MG, | 1/1/2007 | $0.03 | 3 |
| N | Q0165 | PROCHLORPERAZINE MALEASTE, 10 MG | 1/1/2007 | $0.05 | 3 |
| N | Q0166 | GRANISETRON HYDROCHLORIDE, 1 MG, | 1/1/2007 | $44.17 | 3 |
| N | Q0167 | DRONABINOL, 2.5 MG, ORAL, FDA AP | 1/1/2007 | $4.65 | 3 |
| N | Q0168 | DRONABINOL, 5 MG, ORAL, FDA APPR | 1/1/2007 | $10.05 | 3 |
| N | Q0169 | PROMETHAZINE HYDROCHLORIDE, 12.5 | 11/1/2006 | $0.39 | 3 |
| N | Q0170 | PROMETHAZINE HYDROCHLORIDE, 25 M | 1/1/2007 | $0.39 | 3 |
| N | Q0171 | CHLORPROMAZINE HYDROCHLORIDE, 10 | 11/1/2006 | $0.02 | 3 |
| N | Q0172 | CHLORPROMAZINE HYDROCHLORIDE, 25 | 11/1/2006 | $0.05 | 3 |
| N | Q0173 | TRIMETHOBENZAMIDE HYDROCHLORIDE, | 1/1/2007 | $0.33 | 3 |
| N | Q0174 | THIETHYLPERAZINE MALEATE, 10 MG, | 1/30/2006 | $0.83 | 3 |
| N | Q0175 | PERPHENZAINE, 4 MG, ORAL, FDA AP | 1/1/2007 | $0.19 | 3 |
| N | Q0176 | PERPHENZAINE, 8 MG, ORAL, FDA AP | 1/1/2007 | $0.21 | 3 |
| N | Q0177 | HYDROXYZINE PAMOATE, 25 MG, ORAL | 11/1/2006 | $0.06 | 3 |
| N | Q0178 | HYDROXYZINE PAMOATE, 50 MG, ORAL | 1/1/2007 | $0.06 | 3 |
| N | Q0179 | ONDANSETRON HYDROCHLORIDE, 8 MG, | 1/1/2007 | $36.83 | 3 |
| N | Q0180 | DOLASETRON MESYLATE, 100 MG, ORA | 1/1/2007 | $48.71 | 3 |
| N | Q0181 | UNSPECIFIED ORAL DOSAGE FORM, FD | 6/13/2005 | $0.01 | 5 |
| N | Q0183 | DERMAL TISSUE, OF HUMAN ORIGIN, | 1/1/2005 | INVALID | N |
| N | Q0184 | DERMAL TISSUE, OF HUMAN ORIGIN, | 1/1/2003 | INVALID | N |
| N | Q0185 | DERMAL AND EPIDERMAL, TISSUE OF | 4/1/2002 | INVALID | N |
| N | Q3025 | INJECTION, INTERFERON BETA-1A, 1 | 11/1/2006 | $108.04 | 3 |
| N | Q3026 | INJECTION, INTERFERON BETA-1A, 1 | 1/1/2003 | $89.69 | 3 |
| N | Q4001 | CAST SUPPLIES, BODY CAST ADULT, | 7/1/2001 | $34.78 | 3 |
| N | Q4002 | CAST SUPPLIES, BODY CAST ADULT, | 7/1/2001 | $131.44 | 3 |
| N | Q4003 | CAST SUPPLIES, APPLICATION OF SH | 7/1/2001 | $24.98 | 3 |
| N | Q4004 | CAST SUPPLIES, APPLIATION OF SHO | 7/1/2001 | $86.48 | 3 |
| N | Q4005 | CAST SUPPLIES, LONG ARM CAST, AD | 7/1/2001 | $9.21 | 3 |
| N | Q4006 | CAST SUPPLIES, LONG ARM CAST, AD | 7/1/2001 | $20.76 | 3 |
| N | Q4007 | CAST SUPPLIES, LONG ARM CAST, PE | 7/1/2001 | $4.61 | 3 |
| N | Q4008 | CAST SUPPLIES, LONG ARM CAST, PE | 7/1/2001 | $10.38 | 3 |
| N | Q4009 | CAST SUPPLIES, SHORT ARM CAST, A | 7/1/2001 | $6.14 | 3 |
| N | Q4010 | CAST SUPPLIES, SHORT ARM CAST, A | 7/1/2001 | $13.84 | 3 |
| N | Q4011 | CAST SUPPLIES, SHORT ARM CAST, P | 7/1/2001 | $3.07 | 3 |
| N | Q4012 | CAST SUPPLIES, SHORT ARM CAST, P | 7/1/2001 | $6.92 | 3 |
| N | Q4013 | CAST SUPPLIES, GAUNTLET CAST (IN | 7/1/2001 | $11.18 | 3 |
| N | Q4014 | CAST SUPPLIES, GAUNTLET CAST (IN | 7/1/2001 | $18.88 | 3 |
| N | Q4015 | CAST SUPPLIES, GAUNTLET CAST (IN | 7/1/2001 | $5.59 | 3 |
| N | Q4016 | CAST SUPPLIES, GAUNTLET CAST (IN | 7/1/2001 | $9.44 | 3 |
| N | Q4017 | CAST SUPPLIES, LONG ARM SPLINT, | 7/1/2001 | $6.47 | 3 |
| N | Q4018 | CAST SUPPLIES, LONG ARM SPLINT, | 7/1/2001 | $10.32 | 3 |
| N | Q4019 | CAST SUPPLIES, LONG ARM SPLINT, | 7/1/2001 | $3.24 | 3 |
| N | Q4020 | CAST SUPPLIES, LONG ARM SPLINT, | 7/1/2001 | $5.16 | 3 |
| N | Q4021 | CAST SUPPLIES, SHORT ARM SPLINT, | 7/1/2001 | $4.79 | 3 |
| N | Q4022 | CAST SUPPLIES, SHORT ARM SPLINT, | 7/1/2001 | $6.14 | 3 |
| N | Q4023 | CAST SUPPLIES, SHORT ARM SPLINT, | 7/1/2001 | $2.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| N | Q4024 | CAST SUPPLIES, SHORT ARM SPLINT, | 7/1/2001 | $4.32 | 3 |
| N | Q4025 | CAST SUPPLIES, HIP SPICA (ONE OR | 7/1/2001 | $26.86 | 3 |
| N | Q4026 | CAST SUPPLIES, HIP SPICA (ONE OR | 7/1/2001 | $83.85 | 3 |
| N | Q4027 | CAST SUPPLIES, HIP SPICA (ONE OR | 7/1/2001 | $13.43 | 3 |
| N | Q4028 | CAST SUPPLIES, HIP SPICA (ONE OR | 7/1/2001 | $41.93 | 3 |
| N | Q4029 | CAST SUPPLIES, LONG LEG CAST, AD | 7/1/2001 | $20.53 | 3 |
| N | Q4030 | CAST SUPPLIES, LONG LEG CAST, AD | 7/1/2001 | $54.05 | 3 |
| N | Q4031 | CAST SUPPLIES, LONG LEG CAST, PE | 7/1/2001 | $10.27 | 3 |
| N | Q4032 | CAST SUPPLIES, LONG LEG CAST, PE | 7/1/2001 | $27.03 | 3 |
| N | Q4033 | CAST SUPPLIES, LONG LEG CYLINDER | 7/1/2001 | $19.15 | 3 |
| N | Q4034 | CAST SUPPLIES, LONG LEG CYLINDER | 7/1/2001 | $47.65 | 3 |
| N | Q4035 | CAST SUPPLIES, LONG LEG CYLINDER | 7/1/2001 | $9.58 | 3 |
| N | Q4036 | CAST SUPPLIES, LONG LEG CYLINDER | 7/1/2001 | $23.83 | 3 |
| N | Q4037 | CAST SUPPLIES, SHORT LEG CAST, A | 7/1/2001 | $11.69 | 3 |
| N | Q4038 | CAST SUPPLIES, SHORT LEG CAST, A | 7/1/2001 | $29.27 | 3 |
| N | Q4039 | CAST SUPPLIES, SHORT LEG CAST, P | 7/1/2001 | $5.85 | 3 |
| N | Q4040 | CAST SUPPLIES, SHORT LEG CAST, P | 7/1/2001 | $14.64 | 3 |
| N | Q4041 | CAST SUPPLIES, LONG LEG SPLINT, | 7/1/2001 | $14.21 | 3 |
| N | Q4042 | CAST SUPPLIES, LONG LEG SPLINT, | 7/1/2001 | $24.25 | 3 |
| N | Q4043 | CAST SUPPLIES, LONG LEG SPLINT, | 7/1/2001 | $7.10 | 3 |
| N | Q4044 | CAST SUPPLIES, LONG LEG SPLINT, | 7/1/2001 | $12.13 | 3 |
| N | Q4045 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $8.25 | 3 |
| N | Q4046 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $13.27 | 3 |
| N | Q4047 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $4.12 | 3 |
| N | Q4048 | CAST SUPPLIES, SHORT LEG SPLINT, | 7/1/2001 | $6.64 | 3 |
| N | Q4049 | FINGER SPLINT, STATIC | 7/1/2001 | $1.50 | 3 |
| N | Q4050 | CAST SUPPLIES, FOR UNLISTED TYPE | 7/1/2001 | $50.00 | 3 |
| N | Q4051 | SPLINT SUPPLIES, MISC (INC THERM | 7/1/2001 | $50.00 | 3 |
| N | S0180 | ETONOGESTREL (CONTRACEPTIVE) IMP | 1/1/2007 | $653.75 | 3 |
| N | S0191 | MISOPROSTOL, ORAL, 200 MCG | 8/10/2003 | $1.20 | 3 |
| N | S4989 | CONTRACEPTIVE INTRAUTERINE DEVIC | 4/1/2002 | $299.00 | 3 |
| N | S5011 | 5% DEXTROSE IN LACTATED RINGER'S | 2/1/2006 | $14.35 | 3 |
| N | S8415 | SUPPLIES FOR HOME DELIVERY OF IN | 10/1/2002 | $221.30 | 3 |
| N | S9075 | SMOKING CESSATION TREATMENT | 10/1/2000 | $10.00 | 3 |
| N | S9470 | NUTRITIONAL COUNSELING, DIETICIA | 4/1/2003 | $44.10 | 3 |
| P | 51725 | SIMPLE CYSTOMETROGRAM (CMG) (EG, | 1/1/2007 | $55.01 | 3 |
| P | 51726 | COMPLEX CYSTOMETROGRAM (EG, CALI | 1/1/2007 | $62.28 | 3 |
| P | 51736 | SIMPLE UROFLOWMETRY (UFR) (EG, S | 1/1/2007 | $22.32 | 3 |
| P | 51741 | COMPLEX UROFLOWMETRY (EG, CALIBR | 1/1/2007 | $41.52 | 3 |
| P | 51772 | URETHRAL PRESSURE PROFILE STUDIE | 1/1/2007 | $59.94 | 3 |
| P | 51784 | ELECTROMYOGRAPHY STUDIES (EMG) O | 1/1/2007 | $55.79 | 3 |
| P | 51785 | ELECTROMYOGRAPHIC STUDIES (EMG) | 1/1/2007 | $55.53 | 3 |
| P | 51792 | STIMULUS EVOKED RESPONSE (EG MEA | 1/1/2007 | $41.00 | 3 |
| P | 51795 | VOIDING PRESSURE STUDIES (VP); B | 1/1/2007 | $55.79 | 3 |
| P | 51797 | VOIDING PRESSURE STUDIES (VP); I | 1/1/2007 | $58.39 | 3 |
| P | 54240 | PENILE PLETHYSMOGRAPHY | 1/1/2007 | $48.01 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 54250 | NOCTURNAL PENILE TUMESCENCE AND/ | 1/1/2007 | $80.19 | 3 |
| P | 59020 | FETAL CONTRACTION STRESS TEST | 1/1/2007 | $28.03 | 3 |
| P | 59025 | FETAL NON-STRESS TEST | 1/1/2007 | $22.58 | 3 |
| P | 62252 | REPROGRAMMING OF PROGRAMMABLE CE | 1/1/2007 | $33.74 | 3 |
| P | 62367 | ELECTRONIC ANALYSIS OF PROGRAMMA | 1/1/2007 | $29.06 | 3 |
| P | 62368 | ELECTRONIC ANALYSIS OF PROGRAMMA | 1/1/2007 | $38.93 | 3 |
| P | 70010 | MYELOGRAPHY, POSTERIOR FOSSA, RA | 1/1/2007 | $42.30 | 3 |
| P | 70015 | CISTERNOGRAPHY, POSITIVE CONTRAS | 1/1/2007 | $43.08 | 3 |
| P | 70030 | RADIOLOGIC EXAMINATION EYE FOR D | 1/1/2007 | $6.23 | 3 |
| P | 70100 | RADIOLOGIC EXAMINATION MANDIBLE | 1/1/2007 | $6.49 | 3 |
| P | 70110 | RADIOLOGIC EXAMINATION MANDIBLE; | 1/1/2007 | $8.82 | 3 |
| P | 70120 | RADIOLOGIC EXAMINATION MASTOIDS | 1/1/2007 | $6.49 | 3 |
| P | 70130 | RADIOLOGIC EXAMINATION MASTOIDS; | 1/1/2007 | $12.20 | 3 |
| P | 70134 | RADIOLOGIC EXAMINATION INTERNAL | 1/1/2007 | $12.20 | 3 |
| P | 70140 | RADIOLOGIC EXAMINATION FACIAL BO | 1/1/2007 | $6.75 | 3 |
| P | 70150 | RADIOLO;GIC EXAMINATION FACIAL B | 1/1/2007 | $9.08 | 3 |
| P | 70160 | RADIOLOGIC EXAMINATION NASAL BON | 1/1/2007 | $6.23 | 3 |
| P | 70170 | DACRYOCYSTOGRAPHY, NASOLACRIMAL | 1/1/2007 | $10.64 | 3 |
| P | 70190 | RADIOLOGIC EXAMINATION OPTIC FOR | 1/1/2007 | $7.53 | 3 |
| P | 70200 | RADIOLOGIC EXAMINATION; ORBITS C | 1/1/2007 | $9.86 | 3 |
| P | 70210 | RADIOLOGIC EXAMINATION SINUSES P | 1/1/2007 | $6.23 | 3 |
| P | 70220 | RADIOLOGIC EXAMINATION SINUSES P | 1/1/2007 | $8.82 | 3 |
| P | 70240 | RADIOLOIC EXAMINATION SELLA TURC | 1/1/2007 | $6.75 | 3 |
| P | 70250 | RADIOLOGIC EXAMINATION SKULL LES | 1/1/2007 | $8.56 | 3 |
| P | 70260 | RADIOLOGIC EXAMINATION SKULL; CO | 1/1/2007 | $12.20 | 3 |
| P | 70300 | RADIOLOGIC EXAMINATION TEETH SIN | 1/1/2007 | $4.15 | 3 |
| P | 70310 | RADIOLOGIC EXAMINATION TEETH; PA | 1/1/2007 | $6.49 | 3 |
| P | 70320 | RADIOLOGIC EXAMINATION TEETH; CO | 1/1/2007 | $8.04 | 3 |
| P | 70328 | RADIOLOGIC EXAIMINATION TEMPOROM | 1/1/2007 | $6.49 | 3 |
| P | 70330 | RADIOLOGIC EXAMINATION TEMPOROMA | 1/1/2007 | $8.56 | 3 |
| P | 70332 | TEMPOROMANDIBULAR JOINT ARTHROGR | 1/1/2007 | $19.72 | 3 |
| P | 70336 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $52.94 | 3 |
| P | 70350 | CEPHALOGRAM ORTHODONTIC | 1/1/2007 | $6.49 | 3 |
| P | 70355 | ORTHOPANTOGRAM | 1/1/2007 | $7.27 | 3 |
| P | 70360 | RADIOLOGIC EXAMINATION NECK SOFT | 1/1/2007 | $6.23 | 3 |
| P | 70370 | RADIOLOGIC EXAMINATION; PHARYNX | 1/1/2007 | $11.16 | 3 |
| P | 70371 | COMPLEX DYNAMIC PHARYNGEAL AND S | 1/1/2007 | $30.10 | 3 |
| P | 70373 | LARYNGOGRAPHY, CONTRAST, RADIOLO | 1/1/2007 | $15.57 | 3 |
| P | 70380 | RADIOLOGIC EXAMINATION SALIVARY | 1/1/2007 | $6.23 | 3 |
| P | 70390 | SIALOGRAPHY, RADIOLOGICAL SUPERV | 1/1/2007 | $13.49 | 3 |
| P | 70450 | COMPUTED TOMOGRAPHY, HEAD OR BRA | 1/1/2007 | $30.36 | 3 |
| P | 70460 | COMPUTERIZED AXIAL TOMOGRAPHY HE | 1/1/2007 | $40.22 | 3 |
| P | 70470 | COMPUTERIZED AXIAL TOMOGRAPHY HE | 1/1/2007 | $45.41 | 3 |
| P | 70480 | COMPUTED TOMOGRAPHY, ORBIT, SELL | 1/1/2007 | $45.67 | 3 |
| P | 70481 | COMPUTIRIZED AXIAL TOMOGRAPHY OR | 1/1/2007 | $49.05 | 3 |
| P | 70482 | COMPUTERIZED AXIAL TOMOGRAPHY OR | 1/1/2007 | $51.64 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 70486 | COMPUTED TOMOGRAPHY, MAXILLOFACI | 1/1/2007 | $40.48 | 3 |
| P | 70487 | COMPUTERIZED AXIAL TOMOGRAPHY MA | 1/1/2007 | $46.45 | 3 |
| P | 70488 | COMPUTERIZED AXIAL TOMOGRAPHY MA | 1/1/2007 | $50.34 | 3 |
| P | 70490 | COMPUTED TOMOGRAPHY, SOFT TISSUE | 1/1/2007 | $45.67 | 3 |
| P | 70491 | COMPUTERIZED AXIAL TOMOGRAPHY SO | 1/1/2007 | $49.05 | 3 |
| P | 70492 | COMPUTERIZED AXIAL TOMOGRAPHY SO | 1/1/2007 | $51.38 | 3 |
| P | 70496 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $62.28 | 3 |
| P | 70498 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $62.28 | 3 |
| P | 70540 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $48.01 | 3 |
| P | 70542 | MAGNETIC RESONANCE IMAGING, ORBI | 1/1/2007 | $57.61 | 3 |
| P | 70543 | MAGNETIC RESONANCE IMAGING, ORBI | 1/1/2007 | $76.81 | 3 |
| P | 70544 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $42.82 | 3 |
| P | 70545 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $42.56 | 3 |
| P | 70546 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $64.10 | 3 |
| P | 70547 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $42.56 | 3 |
| P | 70548 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $42.56 | 3 |
| P | 70549 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $64.10 | 3 |
| P | 70551 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $52.94 | 3 |
| P | 70552 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $63.58 | 3 |
| P | 70553 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $84.08 | 3 |
| P | 70554 | MRI, BRAIN, FUNCTIONAL MRI; INCL | 1/1/2007 | NC | 9 |
| P | 70555 | MRI, BRAIN, FUNCTIONAL MRI; REQU | 1/1/2007 | NC | 9 |
| P | 70557 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $106.65 | 3 |
| P | 70558 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $117.81 | 3 |
| P | 70559 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $118.33 | 3 |
| P | 71010 | RADIOLOGIC EXAMINATION, CHEST; S | 1/1/2007 | $6.49 | 3 |
| P | 71015 | RADIOLOGIC EXAMINATION CHEST; ST | 1/1/2007 | $7.53 | 3 |
| P | 71020 | RADIOLOGIC EXAMINATION, CHEST, T | 1/1/2007 | $7.79 | 3 |
| P | 71021 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $9.60 | 3 |
| P | 71022 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $10.90 | 3 |
| P | 71023 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $13.49 | 3 |
| P | 71030 | RADIOLOGIC EXAMINATION, CHEST, C | 1/1/2007 | $10.90 | 3 |
| P | 71034 | RADIOLOGIC EXAMINATION CHEST COM | 1/1/2007 | $16.61 | 3 |
| P | 71035 | RADIOLOGIC EXAMINATION CHEST SPE | 1/1/2007 | $6.49 | 3 |
| P | 71040 | BRONCHOGRAPHY, UNILATERAL, RADIO | 1/1/2007 | $20.76 | 3 |
| P | 71060 | BRONCHOGRAPHY, BILATERAL, RADIOL | 1/1/2007 | $26.21 | 3 |
| P | 71090 | INSERTION PACEMAKER, FLUOROSCOPY | 1/1/2007 | $19.98 | 3 |
| P | 71100 | RADIOLOGIC EXAMINATION RIBS UNIL | 1/1/2007 | $7.79 | 3 |
| P | 71101 | RADIOLOGIC EXAMINATION RIBS UNIL | 1/1/2007 | $9.60 | 3 |
| P | 71110 | RADIOLOGIC EXAMINATION RIBS BILA | 1/1/2007 | $9.60 | 3 |
| P | 71111 | RADIOLOGIC EXAMINATION RIBS BILA | 1/1/2007 | $11.16 | 3 |
| P | 71120 | RADIOLOGIC EXAMINATION STERNUM M | 1/1/2007 | $7.27 | 3 |
| P | 71130 | RADIOLOGIC EXAMINATION; STERNOCL | 1/1/2007 | $7.79 | 3 |
| P | 71250 | COMPUTED TOMOGRAPHY, THORAX; WIT | 1/1/2007 | $41.26 | 3 |
| P | 71260 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $44.12 | 3 |
| P | 71270 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $49.05 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 71275 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $68.51 | 3 |
| P | 71550 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $51.90 | 3 |
| P | 71551 | MAGNETIC RESONANCE IMAGING, CHES | 1/1/2007 | $61.76 | 3 |
| P | 71552 | MAGNETIC RESONANCE IMAGING, CHES | 1/1/2007 | $80.45 | 3 |
| P | 71555 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $64.62 | 3 |
| P | 72010 | RADIOLOGIC EXAMINATION SPINE ENT | 1/1/2007 | $16.09 | 3 |
| P | 72020 | RADIOLOGIC EXAMINATION SPINE SIN | 1/1/2007 | $5.45 | 3 |
| P | 72040 | RADIOLOGIC EXAMINATION, SPINE, C | 1/1/2007 | $7.79 | 3 |
| P | 72050 | RADIOLOGIC EXAMINATION SPINE CER | 1/1/2007 | $10.90 | 3 |
| P | 72052 | RADIOLOGIC EXAMINATION SPINE CER | 1/1/2007 | $12.98 | 3 |
| P | 72069 | RADIOLOGIC EXAMINATION, SPINE, T | 1/1/2007 | $8.04 | 3 |
| P | 72070 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $7.79 | 3 |
| P | 72072 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $7.79 | 3 |
| P | 72074 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $7.79 | 3 |
| P | 72080 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $7.79 | 3 |
| P | 72090 | RADIOLOGIC EXAMINATION SPINE; SC | 1/1/2007 | $9.86 | 3 |
| P | 72100 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $7.79 | 3 |
| P | 72110 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $10.90 | 3 |
| P | 72114 | RADIOLOGIC EXAMINATION SPINE LUM | 1/1/2007 | $12.98 | 3 |
| P | 72120 | RADIOLOGIC EXAMINATION SPINE LUM | 1/1/2007 | $7.79 | 3 |
| P | 72125 | COMPUTED TOMOGRAPHY, CERVICAL SP | 1/1/2007 | $41.26 | 3 |
| P | 72126 | COMPUTERIZED AXIAL TOMOGRAPHY CE | 1/1/2007 | $43.34 | 3 |
| P | 72127 | COMPUTERIZED AXIAL TOMOGRAPHY, C | 1/1/2007 | $45.41 | 3 |
| P | 72128 | COMPUTED TOMOGRAPHY, THORACIC SP | 1/1/2007 | $41.26 | 3 |
| P | 72129 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $43.34 | 3 |
| P | 72130 | COMPUTERIZED AXIAL TOMOGRAPHY, T | 1/1/2007 | $45.41 | 3 |
| P | 72131 | COMPUTED TOMOGRAPHY, LUMBAR SPIN | 1/1/2007 | $41.26 | 3 |
| P | 72132 | COMPUTERIZED AXIAL TOMOGRAPHY LU | 1/1/2007 | $43.34 | 3 |
| P | 72133 | COMPUTERIZED AXIAL TOMOGRAPHY, L | 1/1/2007 | $45.41 | 3 |
| P | 72141 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $57.09 | 3 |
| P | 72142 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $68.77 | 3 |
| P | 72146 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $57.09 | 3 |
| P | 72147 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $68.51 | 3 |
| P | 72148 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $52.94 | 3 |
| P | 72149 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $63.84 | 3 |
| P | 72156 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $91.60 | 3 |
| P | 72157 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $91.34 | 3 |
| P | 72158 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $84.08 | 3 |
| P | 72159 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $67.21 | 3 |
| P | 72170 | RADIOLOGIC EXAMINATION, PELVIS; | 1/1/2007 | $6.23 | 3 |
| P | 72190 | RADIOLOGIC EXAMINATION PELVIS; C | 1/1/2007 | $7.53 | 3 |
| P | 72191 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $64.62 | 3 |
| P | 72192 | COMPUTERIZED AXIAL TOMOGRAPHY, P | 1/1/2007 | $38.93 | 3 |
| P | 72193 | COMPUTERIZED AXIAL TOMOGRAPHY PE | 1/1/2007 | $41.26 | 3 |
| P | 72194 | COMPUTERIZED AXIAL TOMOGRAPHY PE | 1/1/2007 | $43.34 | 3 |
| P | 72195 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $51.90 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 72196 | MAGNETIC RESONANSE (EG, PROTON) | 1/1/2007 | $61.76 | 3 |
| P | 72197 | MAGNETIC RESONANCE IMAGING, PELV | 1/1/2007 | $80.45 | 3 |
| P | 72198 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $64.10 | 3 |
| P | 72200 | RADIOLOGIC EXAMINATION SACROILIA | 1/1/2007 | $6.23 | 3 |
| P | 72202 | RADIOLOGIC EXAMINATION SACROILIA | 1/1/2007 | $6.75 | 3 |
| P | 72220 | RADIOLOGIC EXAMINATION SACRUM AN | 1/1/2007 | $6.23 | 3 |
| P | 72240 | MYELOGRAPHY, CERVICAL, RADIOLOGI | 1/1/2007 | $32.18 | 3 |
| P | 72255 | MYELOGRAPHY, THORACIC, RADIOLOGI | 1/1/2007 | $31.66 | 3 |
| P | 72265 | MYELOGRAPHY, LUMBOSACRAL, RADIOL | 1/1/2007 | $29.06 | 3 |
| P | 72270 | MYELOGRAPHY, ENTIRE SPINAL CANAL | 1/1/2007 | $46.97 | 3 |
| P | 72275 | EPIDUROGRAPHY, RADIOLOGICAL SUPE | 1/1/2007 | $25.95 | 3 |
| P | 72285 | DISKOGRAPHY, CERVICAL, RADIOLOGI | 1/1/2007 | $41.26 | 3 |
| P | 72291 | RADIOLOGICAL SUPERVISION AND INT | 1/1/2007 | $47.23 | 3 |
| P | 72292 | RADIOLOGICAL SUPERVISION AND INT | 1/1/2007 | $48.27 | 3 |
| P | 72295 | DISKOGRAPHY, LUMBAR, RADIOLOGICA | 1/1/2007 | $30.10 | 3 |
| P | 73000 | RADIOLOGIC EXAMINATION CLAVICLE | 1/1/2007 | $5.71 | 3 |
| P | 73010 | RADIOLOGIC EXAMINATION; SCAPULA | 1/1/2007 | $6.23 | 3 |
| P | 73020 | RADIOLOGIC EXAMINATION SHOULDER | 1/1/2007 | $5.45 | 3 |
| P | 73030 | RADIOLOGIC EXAMINATION SHOULDER; | 1/1/2007 | $6.49 | 3 |
| P | 73040 | RADIOLOGIC EXAMINATION, SHOULDER | 1/1/2007 | $19.20 | 3 |
| P | 73050 | RADIOLOGIC EXAMINATION ACROMIOCL | 1/1/2007 | $7.27 | 3 |
| P | 73060 | RADIOLOGIC EXAMINATION; HUMERUS | 1/1/2007 | $6.23 | 3 |
| P | 73070 | RADIOLOGIC EXAMINATION, ELBOW; T | 1/1/2007 | $5.45 | 3 |
| P | 73080 | RADIOLOGIC EXAMINATION ELBOW; CO | 1/1/2007 | $6.23 | 3 |
| P | 73085 | RADIOLOGIC EXAMINATION, ELBOW, A | 1/1/2007 | $19.46 | 3 |
| P | 73090 | RADIOLOGIC EXAMINATION; FOREARM, | 1/1/2007 | $5.71 | 3 |
| P | 73092 | RADIOLOGIC EXAMINATION; UPPER EX | 1/1/2007 | $5.71 | 3 |
| P | 73100 | RADIOLOGIC EXAMINATION, WRIST; T | 1/1/2007 | $5.71 | 3 |
| P | 73110 | RADIOLOGIC EXAMINATION WRIST; CO | 1/1/2007 | $6.23 | 3 |
| P | 73115 | RADIOLOGIC EXAMINATION, WRIST, A | 1/1/2007 | $19.20 | 3 |
| P | 73120 | RADIOLOGIC EXAMINATION HAND TWO | 1/1/2007 | $5.71 | 3 |
| P | 73130 | RADIOLOGIC EXAMINATION HAND; MIN | 1/1/2007 | $6.23 | 3 |
| P | 73140 | RADIOLOGIC EXAMINATION FINGER OR | 1/1/2007 | $4.67 | 3 |
| P | 73200 | COMPUTED TOMOGRAPHY, UPPER EXTRE | 1/1/2007 | $38.93 | 3 |
| P | 73201 | COMPUTERIZED AXIAL TOMOGRAPHY UP | 1/1/2007 | $41.26 | 3 |
| P | 73202 | COMPUTERIZED AXIAL TOMOGRAPHY UP | 1/1/2007 | $43.34 | 3 |
| P | 73206 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $64.36 | 3 |
| P | 73218 | MAGNETIC RESONANCE IMAGING, UPPE | 1/1/2007 | $48.01 | 3 |
| P | 73219 | MAGNETIC RESONANCE IMAGING, UPPE | 1/1/2007 | $57.87 | 3 |
| P | 73220 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $76.81 | 3 |
| P | 73221 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $48.01 | 3 |
| P | 73222 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $57.61 | 3 |
| P | 73223 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $76.81 | 3 |
| P | 73225 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $64.88 | 3 |
| P | 73500 | RADIOLOGIC EXAMINATION HIP UNILA | 1/1/2007 | $6.23 | 3 |
| P | 73510 | RADIOLOGIC EXAMINATION HIP; COMP | 1/1/2007 | $7.53 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 73520 | RADIOLOGIC EXAMINATION HIPS BILA | 1/1/2007 | $9.34 | 3 |
| P | 73525 | RADIOLOGIC EXAMINATION, HIP, ART | 1/1/2007 | $19.46 | 3 |
| P | 73530 | RADIOLOGIC EXAMINATION HIP DURIN | 1/1/2007 | $10.38 | 3 |
| P | 73540 | RADIOLOGIC EXAMINATION PELVIS AN | 1/1/2007 | $7.27 | 3 |
| P | 73542 | RADIOLOGICAL EXAMINATION, SACROI | 1/1/2007 | $20.24 | 3 |
| P | 73550 | RADIOLOGIC EXAMINATION, FEMUR, T | 1/1/2007 | $6.23 | 3 |
| P | 73560 | RADIOLOGIC EXAMINATION KNEE ANTE | 1/1/2007 | $6.23 | 3 |
| P | 73562 | RADIOLOGIC EXAMINATION KNEE; ANT | 1/1/2007 | $6.49 | 3 |
| P | 73564 | RADIOLOGIC EXAM, KNEE; COMPLETE, | 1/1/2007 | $7.79 | 3 |
| P | 73565 | RADIOLOGIC EXAMINATION, KNEE; BO | 1/1/2007 | $6.23 | 3 |
| P | 73580 | RADIOLOGIC EXAMINATION, KNEE, AR | 1/1/2007 | $19.20 | 3 |
| P | 73590 | RADIOLOGIC EXAMINATION; TIBIA AN | 1/1/2007 | $6.23 | 3 |
| P | 73592 | RADIOLOGIC EXAMINATION; LOWER EX | 1/1/2007 | $5.71 | 3 |
| P | 73600 | RADIOLOGIC EXAMINATION, ANKLE; T | 1/1/2007 | $5.71 | 3 |
| P | 73610 | RADIOLOGIC EXAMINATION ANKLE; CO | 1/1/2007 | $6.23 | 3 |
| P | 73615 | RADIOLOGIC EXAMINATION, ANKLE, A | 1/1/2007 | $19.46 | 3 |
| P | 73620 | RADIOLOGIC EXAMINATION, FOOT; TW | 1/1/2007 | $5.71 | 3 |
| P | 73630 | RADIOLOGIC EXAMINATION FOOT; COM | 1/1/2007 | $6.23 | 3 |
| P | 73650 | RADIOLOGIC EXAMINATION CALCANEUS | 1/1/2007 | $5.71 | 3 |
| P | 73660 | RADIOLOGIC EXAMINATION; TOE OR T | 1/1/2007 | $4.67 | 3 |
| P | 73700 | COMPUTED TOMOGRAPHY, LOWER EXTRE | 1/1/2007 | $38.93 | 3 |
| P | 73701 | COMPUTERIZED AXIAL TOMOGRAPHY LO | 1/1/2007 | $41.26 | 3 |
| P | 73702 | COMPUTERIZED AXIAL TOMOGRAPHY LO | 1/1/2007 | $43.34 | 3 |
| P | 73706 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $67.47 | 3 |
| P | 73718 | MAGNETIC RESONANCE IMAGING, LOWE | 1/1/2007 | $48.01 | 3 |
| P | 73719 | MAGNETIC RESONANCE IMAGING, LOWE | 1/1/2007 | $57.61 | 3 |
| P | 73720 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $76.55 | 3 |
| P | 73721 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $48.01 | 3 |
| P | 73722 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $57.61 | 3 |
| P | 73723 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $76.81 | 3 |
| P | 73725 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $64.88 | 3 |
| P | 74000 | RADIOLOGIC EXAMINATION ABDOMEN S | 1/1/2007 | $6.49 | 3 |
| P | 74010 | RADIOLOGIC EXAMINATION ABDOMEN; | 1/1/2007 | $8.30 | 3 |
| P | 74020 | RADIOLOGIC EXAMINATION ABDOMEN; | 1/1/2007 | $9.60 | 3 |
| P | 74022 | RADIOLOGIC EXAMINATION, ABDOMEN; | 1/1/2007 | $11.16 | 3 |
| P | 74150 | COMPUTED TOMOGRAPHY, ABDOMEN; WI | 1/1/2007 | $42.30 | 3 |
| P | 74160 | COMPUTERIZED AXIAL TOMOGRAPHY AB | 1/1/2007 | $45.41 | 3 |
| P | 74170 | COMPUTERIZED AXIAL TOMOGRAPHY AB | 1/1/2007 | $49.82 | 3 |
| P | 74175 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $67.47 | 3 |
| P | 74181 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $51.90 | 3 |
| P | 74182 | MAGNETIC RESONANCE IMAGING, ABDO | 1/1/2007 | $61.76 | 3 |
| P | 74183 | MAGNETIC RESONANCE IMAGING, ABDO | 1/1/2007 | $80.45 | 3 |
| P | 74185 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $64.10 | 3 |
| P | 74190 | PERITONEOGRAM, RADIOLOGICAL SUPE | 1/1/2007 | $17.13 | 3 |
| P | 74210 | RADIOLOGIC EXAMINATION PHARYNX A | 1/1/2007 | $12.98 | 3 |
| P | 74220 | RADIOLOGIC EXAMINATION; ESOPHAGU | 1/1/2007 | $16.35 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 74230 | SWALLOWING FUNCTION, WITH CINERA | 1/1/2007 | $18.68 | 3 |
| P | 74235 | REMOVAL OF FOREIGN BODY(S), ESOP | 1/1/2007 | $42.30 | 3 |
| P | 74240 | RADIOLOGIC EXAMINATION GASTROINT | 1/1/2007 | $24.65 | 3 |
| P | 74241 | RADIOLOGIC EXAMINATION GASTROINT | 1/1/2007 | $24.65 | 3 |
| P | 74245 | RADIOLOGIC EXAM, GASTGROINTESTIN | 1/1/2007 | $32.44 | 3 |
| P | 74246 | RADIOLOGICAL EXAMINATION GASTROI | 1/1/2007 | $24.65 | 3 |
| P | 74247 | RADIOLOGICAL EXAMINATION GASTROI | 1/1/2007 | $24.65 | 3 |
| P | 74249 | RADIOLOGICAL EXAM, GASTROINTESTI | 1/1/2007 | $32.44 | 3 |
| P | 74250 | RADIOLOGIC EXAMINATION, SMALL IN | 1/1/2007 | $16.61 | 3 |
| P | 74251 | RADIOLOGIC EXAMINATION, SMALL BO | 1/1/2007 | $24.65 | 3 |
| P | 74260 | DUODENOGRAPHY HYPOTONIC | 1/1/2007 | $17.65 | 3 |
| P | 74270 | RADIOLOGIC EXAMINATION, COLON; B | 1/1/2007 | $24.65 | 3 |
| P | 74280 | RADIOLOGIC EXAMINATION COLON AIR | 1/1/2007 | $35.03 | 3 |
| P | 74283 | BARIUM ENEMA, THERAPEUTIC, FOR R | 1/1/2007 | $71.88 | 3 |
| P | 74290 | CHOLECYSTOGRAPHY ORAL CONTRAST | 1/1/2007 | $11.16 | 3 |
| P | 74291 | CHOLECYSTOGRAPHY ORAL CONTRAST; | 1/1/2007 | $7.27 | 3 |
| P | 74300 | CHOLANGIOGRAPHY AND/OR PANCREATO | 1/1/2007 | $12.98 | 3 |
| P | 74301 | CHOLANGIOGRAPHY; ADDITIONAL SET | 1/1/2007 | $7.53 | 3 |
| P | 74305 | CHOLANGIOGRAPHY AND/OR PANCREATO | 1/1/2007 | $15.05 | 3 |
| P | 74320 | CHOLANGIOGRAPHY, PERCUTANEOUS, T | 1/1/2007 | $19.20 | 3 |
| P | 74327 | POSTOPERATIVE BILIARY DUCT CALCU | 1/1/2007 | $24.91 | 3 |
| P | 74328 | ENDOSCOPIC CATHETERIZATION OF TH | 1/1/2007 | $24.91 | 3 |
| P | 74329 | ENDOSCOPIC CATHETERIZATION OF TH | 10/1/2005 | $24.91 | 3 |
| P | 74330 | COMBINED ENDOSCOPIC CATHETERIZAT | 1/1/2007 | $31.92 | 3 |
| P | 74340 | INTRO OF LONG GASTROINTESTINAL T | 1/1/2007 | $19.20 | 3 |
| P | 74350 | PERCUTANEOUS PLACEMENT OF GASTRO | 1/1/2007 | $26.99 | 3 |
| P | 74355 | PERCUTANEOUS PLACEMENT OF ENTERO | 1/1/2007 | $26.99 | 3 |
| P | 74360 | INTRALUMINAL DILATION OF STRICTU | 1/1/2007 | $19.46 | 3 |
| P | 74363 | PERCUTANEOUS TRANSHEPATIC DILATA | 1/1/2007 | $31.40 | 3 |
| P | 74400 | UROGRAPHY (PYELOGRAPHY), INTRAVE | 1/1/2007 | $17.39 | 3 |
| P | 74410 | UROGRAPHY, INFUSION, DRIP TECHNI | 1/1/2007 | $17.39 | 3 |
| P | 74415 | UROGRAPHY INFUSION DRIP TECHNIQU | 1/1/2007 | $17.39 | 3 |
| P | 74420 | UROGRAPHY RETROGRADE WITH OR WIT | 1/1/2007 | $12.98 | 3 |
| P | 74425 | UROGRAPHY, ANTEGRADE, (PYELOSTOG | 1/1/2007 | $12.98 | 3 |
| P | 74430 | CYSTOGRAPHY, MINIMUM OF THREE VI | 1/1/2007 | $11.42 | 3 |
| P | 74440 | VASOGRAPHY, VESICULOGRAPHY, OR E | 1/1/2007 | $13.49 | 3 |
| P | 74445 | CORPORA CAVERNOSOGRAPHY, RADIOLO | 1/1/2007 | $41.00 | 3 |
| P | 74450 | URETHROCYSTOGRAPHY, RETROGRADE, | 1/1/2007 | $10.38 | 3 |
| P | 74455 | URETHROCYSTOGRAPHY, VOIDING, RAD | 1/1/2007 | $11.94 | 3 |
| P | 74470 | RADIOLOGIC EXAMINATION, RENAL CY | 1/1/2007 | $19.20 | 3 |
| P | 74475 | INTRODUCTION OF INTRACATHETER OR | 1/1/2007 | $19.20 | 3 |
| P | 74480 | INTRO OF URETERAL CATH OR STENT | 1/1/2007 | $19.20 | 3 |
| P | 74485 | DILATION OF NEPHROSTOMY, URETERS | 1/1/2007 | $19.20 | 3 |
| P | 74710 | PELVIMETRY WITH OR WITHOUT PLACE | 1/1/2007 | $12.20 | 3 |
| P | 74740 | HYSTEROSALPINGOGRAPHY, RADIOLOGI | 8/11/2003 | NC | 9 |
| P | 74742 | TRANSCERVICAL CATHETERIZATION OF | 1/1/1993 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 74775 | PERINEOGRAM (EG, VAGINOGRAM, FOR | 1/1/2007 | $22.32 | 3 |
| P | 75552 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $57.09 | 3 |
| P | 75553 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $70.58 | 3 |
| P | 75554 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $65.91 | 3 |
| P | 75555 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $63.58 | 3 |
| P | 75556 | CARDIAC MAGNETIC RESONANCE IMAGI | 9/25/2006 | $30.45 | 3 |
| P | 75600 | AORTOGRAPHY, THORACIC, W/OUT SER | 1/1/2007 | $18.17 | 3 |
| P | 75605 | AORTOGRAPHY, THORACIC, BY SERIAL | 1/1/2007 | $41.26 | 3 |
| P | 75625 | AORTOGRAPHY, ABDOMINAL, BY SERIA | 1/1/2007 | $41.00 | 3 |
| P | 75630 | AORTOGRAPHY, ABDOM PLUS BILAT IL | 1/1/2007 | $65.13 | 3 |
| P | 75635 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $85.64 | 3 |
| P | 75650 | ANGIOGRAPHY, CERVICOCEREBRAL, CA | 1/1/2007 | $53.20 | 3 |
| P | 75658 | ANGIOGRAPHY, BRACHIAL, RETROGRAD | 1/1/2007 | $48.01 | 3 |
| P | 75660 | ANGIOGRAPHY, EXTERNAL CAROTID, U | 1/1/2007 | $46.97 | 3 |
| P | 75662 | ANGIOGRAPHY, EXTERNAL CAROTID, B | 1/1/2007 | $59.94 | 3 |
| P | 75665 | ANGIOGRAPHY, CAROTID, CEREBRAL, | 1/1/2007 | $47.75 | 3 |
| P | 75671 | ANGIOGRAPHY, CAROTID, CEREBRAL, | 1/1/2007 | $59.17 | 3 |
| P | 75676 | ANGIOGRAPHY, CAROTID, CERVICAL, | 1/1/2007 | $47.23 | 3 |
| P | 75680 | ANGIOGRAPHY, CAROTID, CERVICAL, | 1/1/2007 | $59.17 | 3 |
| P | 75685 | ANGIOGRAPHY, VERTEBRAL, CERVICAL | 1/1/2007 | $46.71 | 3 |
| P | 75705 | ANGIOGRAPHY, SPINAL, SELECTIVE, | 1/1/2007 | $78.89 | 3 |
| P | 75710 | ANGIOGRAPHY, EXTREMITY, UNILATER | 1/1/2007 | $41.52 | 3 |
| P | 75716 | ANGIOGRAPHY, EXTREMITY, BILATERA | 1/1/2007 | $46.97 | 3 |
| P | 75722 | ANGIOGRAPHY, RENAL, UNILATERAL, | 1/1/2007 | $41.26 | 3 |
| P | 75724 | ANGIOGRAPHY, RENAL, BILATERAL, S | 1/1/2007 | $54.50 | 3 |
| P | 75726 | ANGIOGRAPHY,VISCERAL,SELECTIVE O | 1/1/2007 | $40.48 | 3 |
| P | 75731 | ANGIOGRAPHY, ADRENAL, UNILATERAL | 1/1/2007 | $40.74 | 3 |
| P | 75733 | ANGIOGRAPHY, ADRENAL, BILATERAL, | 1/1/2007 | $46.97 | 3 |
| P | 75736 | ANGIOGRAPHY, PELVIC, SELECTIVE O | 1/1/2007 | $41.00 | 3 |
| P | 75741 | ANGIOGRAPHY, PULMONARY, UNILATER | 1/1/2007 | $46.71 | 3 |
| P | 75743 | ANGIOGRAPHY, PULMONARY, BILATERA | 1/1/2007 | $58.91 | 3 |
| P | 75746 | ANGIOGRAPHY, PULMONARY, BY NONSE | 1/1/2007 | $40.74 | 3 |
| P | 75756 | ANGIOGRAPHY, INTERNAL MAMMARY, R | 1/1/2007 | $42.30 | 3 |
| P | 75774 | ANGIOGRAPHY, SELECTIVE, EACH ADD | 1/1/2007 | $12.98 | 3 |
| P | 75790 | ANGIOGRAPHY, ARTERIOVENOUS SHUNT | 1/1/2007 | $65.65 | 3 |
| P | 75801 | LYMPHANGIOGRAPHY, EXTREMITY ONLY | 1/1/2007 | $30.10 | 3 |
| P | 75803 | LYMPHANGIOGRAPHY, EXTREMITY ONLY | 1/1/2007 | $41.52 | 3 |
| P | 75805 | LYMPHANGIOGRAPHY, PELVIC/ABDOMIN | 1/1/2007 | $29.32 | 3 |
| P | 75807 | LYMPHANGIOGRAPHY, PELVIC/ABDOMIN | 1/1/2007 | $41.52 | 3 |
| P | 75809 | SHUNTOGRAM FOR INVESTIGATION OF | 1/1/2007 | $16.61 | 3 |
| P | 75810 | SPLENOPORTOGRAPHY, RADIOLOGICAL | 1/1/2007 | $40.48 | 3 |
| P | 75820 | VENOGRAPHY, EXTREMITY, UNILATERA | 1/1/2007 | $24.91 | 3 |
| P | 75822 | VENOGRAPHY, EXTREMITY, BILATERAL | 1/1/2007 | $37.89 | 3 |
| P | 75825 | VENOGRAPHY, CAVAL, INFERIOR, W/S | 1/1/2007 | $41.00 | 3 |
| P | 75827 | VENOGRAPHY, CAVAL, SUPERIOR, W/S | 1/1/2007 | $40.48 | 3 |
| P | 75831 | VENOGRAPHY, RENAL, UNILATERAL, S | 1/1/2007 | $40.74 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 75833 | VENOGRAPHY, RENAL, BIALTERAL, SE | 1/1/2007 | $53.72 | 3 |
| P | 75840 | VENOGRAPHY, ADRENAL, UNILATERAL, | 1/1/2007 | $41.26 | 3 |
| P | 75842 | VENOGRAPHY, ADRENAL, BILATERAL, | 1/1/2007 | $52.94 | 3 |
| P | 75860 | VENOGRAPHY, SINUS OR JUGULAR, CA | 1/1/2007 | $40.74 | 3 |
| P | 75870 | VENOGRAPHY, SUPERIOR SAGITTAL SI | 1/1/2007 | $41.00 | 3 |
| P | 75872 | VENOGRAPHY, EPIDURAL, RADIOLOGIC | 1/1/2007 | $42.82 | 3 |
| P | 75880 | VENOGRAPHY, ORBITAL, RADIOLOGICA | 1/1/2007 | $24.91 | 3 |
| P | 75885 | PERCUTANEOUS TRANSHEPATIC PORTOG | 1/1/2007 | $51.12 | 3 |
| P | 75887 | PERCUTANEOUS TRANSHEPATIC PORTOG | 1/1/2007 | $51.12 | 3 |
| P | 75889 | HEPATIC VENOGRAPHY, WEDGED OR FR | 1/1/2007 | $40.48 | 3 |
| P | 75891 | HEPATIC VENOGRAPHY, WEDGED OR FR | 1/1/2007 | $40.48 | 3 |
| P | 75893 | VENOUS SAMPLING THRU CATH, W/OR | 1/1/2007 | $19.20 | 3 |
| P | 75894 | TRANSCATHETER THERAPY, EMBOLIZAT | 1/1/2007 | $47.23 | 3 |
| P | 75896 | TRANSCATHETER THERAPY, INFUSION, | 1/1/2007 | $46.97 | 3 |
| P | 75898 | ANGIOGRAPHY THRU EXISTING CATHET | 1/1/2007 | $58.91 | 3 |
| P | 75900 | EXCHANGE OF A PREVIOUSLY PLACED | 1/1/2007 | $17.65 | 3 |
| P | 75901 | MECHANICAL REMOVAL OF PERICATHET | 1/1/2007 | $17.39 | 3 |
| P | 75902 | MECHANICAL REMOVAL OF INTRALUMIN | 1/1/2007 | $14.01 | 3 |
| P | 75940 | PERCUTANEOUS PLACEMENT OF IVC FI | 1/1/2007 | $19.72 | 3 |
| P | 75945 | INTRAVASCULAR ULTRASOUND (NON-CO | 1/1/2007 | $15.05 | 3 |
| P | 75946 | INTRAVASCULAR ULTRASOUND (NON-CO | 1/1/2007 | $15.31 | 3 |
| P | 75952 | ENDOVASCULAR REPAIR OF INFRARENA | 1/1/2007 | $166.34 | 3 |
| P | 75953 | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2007 | $50.34 | 3 |
| P | 75954 | ENDOVASCULAR REPAIR OF ILIAC ART | 1/1/2007 | $82.52 | 3 |
| P | 75956 | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2007 | $269.88 | 3 |
| P | 75957 | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2007 | $231.21 | 3 |
| P | 75958 | PLACEMENT OF PROXIMAL EXTENSION | 1/1/2007 | $154.14 | 3 |
| P | 75959 | PLACEMENT OF DISTAL EXTENSION PR | 1/1/2007 | $134.94 | 3 |
| P | 75960 | TRANSCATHETER INTRO OF INTRAVASC | 1/1/2007 | $29.84 | 3 |
| P | 75961 | TRANSCATHETER RETRIEVAL,PERCUTAN | 1/1/2007 | $150.77 | 3 |
| P | 75962 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $19.46 | 3 |
| P | 75964 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $13.23 | 3 |
| P | 75966 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $47.49 | 3 |
| P | 75968 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $13.23 | 3 |
| P | 75970 | TRANSCATHETER BIOPSY, RADIOLOGIC | 1/1/2007 | $29.84 | 3 |
| P | 75978 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $19.20 | 3 |
| P | 75980 | PERCUTANEOUS TRANSHEPATIC BILIRY | 1/1/2007 | $51.12 | 3 |
| P | 75982 | PERCUTANEOUS PLACE OF DRAIN CATH | 1/1/2007 | $51.12 | 3 |
| P | 75984 | CHANGE OF PERCUTANEOUS TUBE OR D | 1/1/2007 | $25.43 | 3 |
| P | 75989 | RADIOLOGICAL GUIDANCE FOR PERCUT | 1/1/2007 | $42.30 | 3 |
| P | 75992 | TRANSLUMINAL ATHERECTOMY, PERIPH | 1/1/2007 | $19.72 | 3 |
| P | 75993 | TRANSLUMINAL ATHERECTOMY, EACH A | 1/1/2007 | $13.23 | 3 |
| P | 75994 | TRANSLUMINAL ATHERECTOMY, RENAL, | 1/1/2007 | $47.75 | 3 |
| P | 75995 | TRANSLUMINAL ATHERECTOMY, VISCER | 1/1/2007 | $47.49 | 3 |
| P | 75996 | TRANSLUMINAL ATHERECTOMY, EACH A | 1/1/2007 | $12.98 | 3 |
| P | 75998 | FLUOROSCOPIC GUIDANCE FOR CENTRA | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 76000 | FLUOROSCOPY (SEP PROC), UP TO ON | 1/1/2007 | $5.97 | 3 |
| P | 76001 | FLUOROSCOPY, PHYS TIME MORE THAN | 1/1/2007 | $24.39 | 3 |
| P | 76003 | FLUROSCOPIC GUIDANCE FOR NEEDLE | 1/1/2007 | INVALID | N |
| P | 76005 | FLUOROSCOPIC GUIDANCE AND LOCALI | 1/1/2007 | INVALID | N |
| P | 76006 | MANUAL APPLICATION OF STRESS PER | 1/1/2007 | INVALID | N |
| P | 76010 | RADIOLOGIC EXAMINATION FROM NOSE | 1/1/2007 | $6.49 | 3 |
| P | 76012 | RADIOLOGICAL SUPERVISION AND INT | 1/1/2007 | INVALID | N |
| P | 76013 | RADIOLOGICAL SUPERVISION AND INT | 1/1/2007 | INVALID | N |
| P | 76020 | BONE AGE STUDIES | 1/1/2007 | INVALID | N |
| P | 76040 | BONE LENGTH STUDIES (ORTHOROENTG | 1/1/2007 | INVALID | N |
| P | 76061 | RADIOLOGIC EXAMINATION OSSEOUS S | 1/1/2007 | INVALID | N |
| P | 76062 | RADIOLOGIC EXAMINATION OSSEOUS S | 1/1/2007 | INVALID | N |
| P | 76065 | INFANT | 1/1/2007 | INVALID | N |
| P | 76066 | JOINT SURVEY, SINGLE VIEW, TWO O | 1/1/2007 | INVALID | N |
| P | 76070 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | INVALID | N |
| P | 76071 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | INVALID | N |
| P | 76075 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| P | 76076 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| P | 76077 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| P | 76078 | RADIOGRAPHIC ABSORPTIOMETRY (EG, | 1/1/2007 | INVALID | N |
| P | 76080 | RADIOLOGIC EXAM, FISTULA OR SINU | 1/1/2007 | $19.20 | 3 |
| P | 76082 | COMPUTER AIDED DETECTION WITH FU | 1/1/2007 | INVALID | N |
| P | 76083 | COMPUTER AIDED DETECTION WITH FU | 1/1/2007 | INVALID | N |
| P | 76085 | DIGITIZATION OF FILM RADIOGRAPHI | 4/1/2004 | INVALID | N |
| P | 76086 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | INVALID | N |
| P | 76088 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | INVALID | N |
| P | 76090 | MAMMOGRAPHY UNILATERAL | 1/1/2007 | INVALID | N |
| P | 76091 | MAMMOGRAPHY; BILATERAL | 1/1/2007 | INVALID | N |
| P | 76092 | SCREENING MAMMOGRAPHY, BILATERAL | 1/1/2007 | INVALID | N |
| P | 76093 | MAGNETIC RESONANCE IMAGING, BREA | 1/1/2007 | INVALID | N |
| P | 76094 | MAGNETIC RESONANCE IMAGING, BREA | 1/1/2007 | INVALID | N |
| P | 76095 | STEREOTACTIC LOCALIZATION GUIDAN | 1/1/2007 | INVALID | N |
| P | 76096 | MAMMOGRAPHIC GUIDANCE FOR NEEDLE | 1/1/2007 | INVALID | N |
| P | 76098 | RADIOLOGICAL EXAMINATION, SURGIC | 1/1/2007 | $5.71 | 3 |
| P | 76100 | RADIOLOGICAL EXAMINATION, SINGLE | 1/1/2007 | $20.76 | 3 |
| P | 76101 | RADIOLOGIC EXAM,CMPLX MOTION(HYP | 1/1/2007 | $20.76 | 3 |
| P | 76102 | RADIOLOGIC EXAMINATION COMPLEX M | 1/1/2007 | $20.76 | 3 |
| P | 76120 | CINERADIOGRAPHY/VIDEORADIOGRAPHY | 1/1/2007 | $13.75 | 3 |
| P | 76125 | CINERADIOGRAPHY/VIDEORADIOGRAPHY | 1/1/2007 | $9.60 | 3 |
| P | 76140 | CONSULTATION ON X-RAY EXAMINATIO | 4/1/1982 | $0.01 | 5 |
| P | 76355 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| P | 76360 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| P | 76362 | COMPUTERIZED AXIAL TOMOGRAPHIC G | 1/1/2007 | INVALID | N |
| P | 76370 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| P | 76375 | CORONAL, SAGITTAL, MULTIPLANAR, | 1/1/2006 | INVALID | N |
| P | 76376 | 3D RENDERING W/INTERPRETATION AN | 4/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 76377 | 3D RENDERING W/INTERPRETATION AN | 4/1/2006 | NC | 9 |
| P | 76380 | COMPUTED TOMOGRAPHY, LIMITED OR | 1/1/2007 | $34.77 | 3 |
| P | 76390 | MAGNETIC RESONANCE SPECTROSCOPY | 1/1/2007 | $50.34 | 3 |
| P | 76393 | MAGNETIC RESONANCE GUIDANCE FOR | 1/1/2007 | INVALID | N |
| P | 76394 | MAGNETIC RESONANCE GUIDANCE FOR, | 1/1/2007 | INVALID | N |
| P | 76400 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | INVALID | N |
| P | 76490 | ULTRASOUND GUIDANCE FOR, AND MON | 4/1/2004 | INVALID | N |
| P | 76496 | UNLISTED FLUOROSCOPIC PROCEDURE | 1/1/2003 | $0.01 | 5 |
| P | 76497 | UNLISTED COMPUTED TOMOGRAPHY PRO | 1/1/2003 | $0.01 | 5 |
| P | 76498 | UNLISTED MAGNETIC RESONANCE PROC | 1/1/2003 | $0.01 | 5 |
| P | 76499 | UNLISTED DIAGNOSTIC RADIOGRAPHIC | 4/1/1982 | $0.01 | 5 |
| P | 76506 | ECHOENCEPHALOGRAPHY B-MODE (GRAY | 1/1/2007 | $24.13 | 3 |
| P | 76510 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $58.65 | 3 |
| P | 76511 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $35.55 | 3 |
| P | 76512 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $35.81 | 3 |
| P | 76513 | OPHTHALMIC ULTRASOUND; ECHOGRAPH | 1/1/2007 | $25.17 | 3 |
| P | 76514 | OPHTHALMIC ULTRASOUND, ECHOGRAPH | 1/1/2007 | $6.75 | 3 |
| P | 76516 | OPHTHALMIC BIOMETRY BY ULTRASOUN | 1/1/2007 | $20.50 | 3 |
| P | 76519 | OPHTHALMIC BIOMETRY BY ULTRASOUN | 1/1/2007 | $20.50 | 3 |
| P | 76529 | OPHTHALMIC ULTRASONIC FOREIGN BO | 1/1/2007 | $21.54 | 3 |
| P | 76536 | ULTRASOUND, SOFT TISSUES OF HEAD | 1/1/2007 | $19.72 | 3 |
| P | 76604 | ULTRASOUND, CHEST, B-SCAN (INCL | 1/1/2007 | $19.46 | 3 |
| P | 76645 | ULTRASOUND, BREAST(S) (UNILATERA | 1/1/2007 | $19.20 | 3 |
| P | 76700 | ULTRASOUND, ABDOMINAL, B-SCAN AN | 1/1/2007 | $29.06 | 3 |
| P | 76705 | ECHOGRAPHY ABDOMINAL B-SCAN AND/ | 1/1/2007 | $21.02 | 3 |
| P | 76770 | ULTRASOUND, RETROPERITONEAL (REN | 1/1/2007 | $26.21 | 3 |
| P | 76775 | ECHOGRAPHY RETROPERITONEAL B-SCA | 1/1/2007 | $20.76 | 3 |
| P | 76776 | ULTRASOUND, TRANSPLANTED KIDNEY, | 1/1/2007 | $25.95 | 3 |
| P | 76778 | ULTRASOUND, TRANSPLANTED KIDNEY, | 1/1/2007 | INVALID | N |
| P | 76800 | ULTRASOUND, SPINAL CANAL AND CON | 1/1/2007 | $39.44 | 3 |
| P | 76801 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $35.55 | 3 |
| P | 76802 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $30.10 | 3 |
| P | 76805 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $35.55 | 3 |
| P | 76810 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $35.29 | 3 |
| P | 76811 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $70.07 | 3 |
| P | 76812 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $65.39 | 3 |
| P | 76813 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $40.48 | 3 |
| P | 76814 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $33.99 | 3 |
| P | 76815 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $23.61 | 3 |
| P | 76816 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $31.40 | 3 |
| P | 76817 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $26.99 | 3 |
| P | 76818 | FETAL BIOPHYSICAL PROFILE; WITH | 1/1/2007 | $38.67 | 3 |
| P | 76819 | FETAL BIOPHYSICAL PROFILE; WITHO | 1/1/2007 | $28.03 | 3 |
| P | 76820 | DOPPLER VELOCIMETRY, FETAL; UMBI | 1/1/2007 | $18.68 | 3 |
| P | 76821 | DOPPLER VELOCIMETRY, FETAL; MIDD | 1/1/2007 | $25.95 | 3 |
| P | 76825 | ECHOCARDIOGRAPHY, FETAL, CARDIOV | 1/1/2007 | $60.72 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 76826 | ECHOCARDIOGRAPHY, FETAL, CARDIOV | 1/1/2007 | $29.84 | 3 |
| P | 76827 | DOPPLER ECHOCARDIOGRAPHY, FETAL, | 1/1/2007 | $21.02 | 3 |
| P | 76828 | DOPPLER ECHOCARDIOGRAPHY, FETAL, | 1/1/2007 | $21.02 | 3 |
| P | 76830 | ULTRASOUND, TRANSVAGINAL | 1/1/2007 | $24.65 | 3 |
| P | 76831 | HYSTEROSONOGRAPHY, WITH OR WITHO | 1/1/2007 | $25.95 | 3 |
| P | 76856 | ULTRASOUND, PELVIC (NON-OBSTETRI | 1/1/2007 | $24.65 | 3 |
| P | 76857 | ECHOGRAPHY, PELVIC (NON-OBSTETRI | 1/1/2007 | $13.49 | 3 |
| P | 76870 | ULTRASOUND, SCROTUM AND CONTENTS | 1/1/2007 | $22.84 | 3 |
| P | 76872 | ECHOGRAPHY, TRANSRECTAL | 1/1/2007 | $24.65 | 3 |
| P | 76873 | ECHOGRAPHY, TRANSRECTAL; PROSTAT | 1/1/2007 | $55.53 | 3 |
| P | 76880 | ULTRASOUND, EXTREMITY, NON-VASCU | 1/1/2007 | $21.02 | 3 |
| P | 76885 | ULTRASOUND, INFANT HIPS, REAL TI | 1/1/2007 | $26.21 | 3 |
| P | 76886 | ULTRASOUND, INFANT HIPS, REAL TI | 1/1/2007 | $22.06 | 3 |
| P | 76930 | ULTRASONIC GUIDANCE FOR PERICARD | 1/1/2007 | $24.39 | 3 |
| P | 76932 | ULTRASONIC GUIDANCE FOR ENDOMYOC | 1/1/2007 | $24.39 | 3 |
| P | 76936 | ULTRASOUND GUIDED COMPRESSION RE | 1/1/2007 | $72.14 | 3 |
| P | 76937 | ULTRASOUND GUIDANCE FOR VASCULAR | 1/1/2007 | $11.16 | 3 |
| P | 76940 | ULTRASOUND GUIDANCE FOR, AND MON | 1/1/2007 | $76.81 | 3 |
| P | 76941 | ULTRASONIC GUIDANCE FOR INTRAUTE | 1/1/2007 | $48.79 | 3 |
| P | 76942 | ULTRASONIC GUIDANCE FOR NEEDLE P | 1/1/2007 | $23.87 | 3 |
| P | 76945 | ULTRASONIC GUIDANCE FOR CHORIONI | 1/1/2007 | $23.87 | 3 |
| P | 76946 | ULTRASONIC GUIDANCE FOR AMNIOCEN | 1/1/2007 | $14.01 | 3 |
| P | 76948 | ULTRASONIC GUIDANCE FOR ASPIRATI | 1/1/2007 | $13.75 | 3 |
| P | 76950 | ULTRASONIC GUIDANCE FOR PLACEMEN | 1/1/2007 | $20.76 | 3 |
| P | 76965 | ULTRASONIC GUIDANCE FOR INTERSTI | 1/1/2007 | $48.01 | 3 |
| P | 76970 | ULTRASOUND STUDY FOLLOW-UP (SPEC | 1/1/2007 | $14.27 | 3 |
| P | 76975 | GASTROINTESTINAL ENDOSCOPIC ULTR | 1/1/2007 | $29.32 | 3 |
| P | 76977 | ULTRASOUND BONE DENSITY MEASUREM | 1/1/2007 | $2.08 | 3 |
| P | 76986 | ULTRASONIC GUIDANCE, INTRAOPERAT | 1/1/2007 | INVALID | N |
| P | 76998 | ULTRASONIC GUIDANCE, INTRAOPERAT | 1/1/2007 | $43.34 | 3 |
| P | 76999 | UNLISTED ULTRASOUND PROCEDURE (E | 4/1/1982 | $0.01 | 5 |
| P | 77001 | FLUOROSCOPIC GUIDANCE FOR CENTRA | 1/1/2007 | $12.98 | 3 |
| P | 77002 | FLUOROSCOPIC GUIDANCE FOR NEEDLE | 1/1/2007 | $18.17 | 3 |
| P | 77003 | FLUOROSCOPIC GUIDANCE AND LOCALI | 1/1/2007 | $19.98 | 3 |
| P | 77011 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $41.52 | 3 |
| P | 77012 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $39.95 | 3 |
| P | 77013 | COMPUTERIZED TOMOGRAPHY GUIDANCE | 1/1/2007 | $139.09 | 3 |
| P | 77014 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $30.10 | 3 |
| P | 77021 | MRI FOR NEEDLE PLACEMENT, RADIOL | 1/1/2007 | $52.68 | 3 |
| P | 77022 | MRI FOR, AND MONITORING OF, PARE | 1/1/2007 | $147.92 | 3 |
| P | 77031 | STEREOTACTIC LOCALIZATION GUIDAN | 1/1/2007 | $55.01 | 3 |
| P | 77032 | MAMMOGRAPHIC GUIDANCE FOR NEEDLE | 1/1/2007 | $19.20 | 3 |
| P | 77051 | COMPUTER-AIDED DETECTION W/FURTH | 1/1/2007 | $2.34 | 3 |
| P | 77052 | COMPUTER-AIDED DETECTION W/FURTH | 1/1/2007 | $2.34 | 3 |
| P | 77053 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | $12.46 | 3 |
| P | 77054 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | $15.57 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 77055 | MAMMOGRAPHY; UNILATERAL | 1/1/2007 | $24.13 | 3 |
| P | 77056 | MAMMOGRAPHY; BILATERAL | 1/1/2007 | $29.84 | 3 |
| P | 77057 | SCREENING MAMMOGRAPHY, BILATERAL | 1/1/2007 | $24.13 | 3 |
| P | 77058 | MRI, BREAST, WITHOUT AND/OR WITH | 1/1/2007 | $56.05 | 3 |
| P | 77059 | MRI, BREAST, WITHOUT AND/OR WITH | 1/1/2007 | $56.05 | 3 |
| P | 77072 | BONE AGE STUDIES | 1/1/2007 | $6.49 | 3 |
| P | 77073 | BONE LENGTH STUDIES (ORTHOROENTG | 1/1/2007 | $9.60 | 3 |
| P | 77074 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $15.57 | 3 |
| P | 77075 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $18.68 | 3 |
| P | 77076 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $23.61 | 3 |
| P | 77077 | JOINT SURVEY, SINGLE VIEW, 2 OR | 1/1/2007 | $11.42 | 3 |
| P | 77078 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | $8.56 | 3 |
| P | 77079 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | $7.53 | 3 |
| P | 77080 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $7.01 | 3 |
| P | 77081 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $7.53 | 3 |
| P | 77082 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $5.97 | 3 |
| P | 77083 | RADIOGRAPHIC ABSORPTIOMETRY, 1 O | 1/1/2007 | NC | 9 |
| P | 77084 | MRI, BONE MAROW BLOOD SUPPLY | 1/1/2007 | NC | 9 |
| P | 77261 | THERAPEUTIC RADIOLOGY TREATMENT | 1/1/2007 | $51.12 | 3 |
| P | 77262 | THERAPEUTIC RADIOLOGY TREATMENT | 1/1/2007 | $77.07 | 3 |
| P | 77263 | THERAPEUTIC RADIOLOGY TREATMENT | 1/1/2007 | $114.44 | 3 |
| P | 77280 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $24.91 | 3 |
| P | 77285 | THERAPEUTIC RADIOLOGY SIMUALTION | 1/1/2007 | $37.37 | 3 |
| P | 77290 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $55.53 | 3 |
| P | 77295 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $162.19 | 3 |
| P | 77299 | UNLISTED PROCEDURE, THERAPEUTIC | 4/1/1982 | $0.01 | 5 |
| P | 77300 | BASIC RADIATION DOSIMETRY CALCUL | 1/1/2007 | $22.06 | 3 |
| P | 77301 | INTENSITY MODULATED RADIOTHERAPY | 1/1/2007 | $284.41 | 3 |
| P | 77305 | TELETHERAPY ISODOSE PLAN (WHETHE | 1/1/2007 | $25.17 | 3 |
| P | 77310 | TELETHERAPY ISODOSE PLAN (WHETHE | 1/1/2007 | $37.37 | 3 |
| P | 77315 | TELETHERAPY, ISODOSE PLAN (WHETH | 1/1/2007 | $55.53 | 3 |
| P | 77321 | SPECIAL TELETHERAPY PORT PLAN PA | 1/1/2007 | $33.74 | 3 |
| P | 77326 | BRACHYTHERAPY ISODOSE PLAN; SIMP | 1/1/2007 | $33.22 | 3 |
| P | 77327 | BRACHYTHERAPY ISODOSE CALCULATIO | 1/1/2007 | $49.31 | 3 |
| P | 77328 | BRACHYTHERAPY ISODOSE CALCULATIO | 1/1/2007 | $74.48 | 3 |
| P | 77331 | SPECIAL DOSIMETRY (EG, TLD, MICR | 1/1/2007 | $30.88 | 3 |
| P | 77332 | TREATMENT DEVICES DESIGN AND CON | 1/1/2007 | $19.20 | 3 |
| P | 77333 | TREATMENT DEVICES DESIGN AND CON | 1/1/2007 | $29.84 | 3 |
| P | 77334 | TREATMENT DEVICES DESIGN AND CON | 1/1/2007 | $44.12 | 3 |
| P | 77399 | UNLISTED PROCEDURE MEDICAL RADIA | 4/1/1982 | $0.01 | 5 |
| P | 77421 | STEREOSCOPIC X-RAY GUIDANCE FOR | 4/1/2006 | NC | 9 |
| P | 77431 | RADIATION THERAPY MANAGEMENT W/C | 1/1/2007 | $66.95 | 3 |
| P | 77432 | STEREOTACTIC RADIATION TREATMENT | 1/1/2007 | $291.68 | 3 |
| P | 77470 | SPECIAL TREATMENT PROCEDURE (EG | 1/1/2007 | $74.48 | 3 |
| P | 77499 | UNLISTED PROCEDURE THERAPEUTIC R | 4/1/1982 | $0.01 | 5 |
| P | 77520 | PROTON TREATMENT DELIVERY; SIMPL | 12/1/2002 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 77522 | PROTON TREATMENT DELIVERY; SIMPL | 12/1/2002 | $0.01 | 5 |
| P | 77523 | PROTON TREATMENT DELIVERY; INTER | 12/1/2002 | $0.01 | 5 |
| P | 77525 | PROTON TREATMENT DELIVERY; COMPL | 12/1/2002 | $0.01 | 5 |
| P | 77600 | HYPERTHERMIA, EXTERNALLY GENERAT | 1/1/2007 | $55.53 | 3 |
| P | 77605 | HYPERTHERMIA, EXTERNALLY GENERAT | 1/1/2007 | $75.51 | 3 |
| P | 77610 | HYPERTHERMIA GENERATED BY INTERS | 1/1/2007 | $55.79 | 3 |
| P | 77615 | HYPERTHERMIA GENERATED BY INTERS | 1/1/2007 | $74.22 | 3 |
| P | 77620 | HYPERTHERMIA GENERATED BY INTRAC | 1/1/2007 | $59.17 | 3 |
| P | 77750 | INFUSION OR INSTILLATION OF RADI | 1/1/2007 | $174.64 | 3 |
| P | 77761 | INTRACAVITARY RADIATION SOURCE A | 1/1/2007 | $131.83 | 3 |
| P | 77762 | INTRACAVITARY RADIOELEMENT APPLI | 1/1/2007 | $203.45 | 3 |
| P | 77763 | INTRCAVITARY RADIOELEMENT APPLIC | 1/1/2007 | $304.65 | 3 |
| P | 77776 | INTERSTITIAL RADIATION SOURCE AP | 1/1/2007 | $156.74 | 3 |
| P | 77777 | INTERSTITIAL RADIOELEMENT APPLIC | 1/1/2007 | $265.73 | 3 |
| P | 77778 | INTERSTITIAL RADIOELEMENT APPLIC | 1/1/2007 | $397.55 | 3 |
| P | 77781 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $58.91 | 3 |
| P | 77782 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $88.75 | 3 |
| P | 77783 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $132.35 | 3 |
| P | 77784 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $199.56 | 3 |
| P | 77789 | SURFACE APPLICATION OF RADIATION | 1/1/2007 | $40.22 | 3 |
| P | 77790 | SUPERVISION, HANDLING, LOADING O | 1/1/2007 | $37.37 | 3 |
| P | 77799 | UNLISTED PROCEDURE CLINICAL BRAC | 4/1/1982 | $0.01 | 5 |
| P | 78000 | THYROID UPTAKE; SINGLE DETERMINA | 1/1/2007 | $6.75 | 3 |
| P | 78001 | THYROID UPTAKE; MULTIPLE DETERMI | 1/1/2007 | $9.34 | 3 |
| P | 78003 | THYROID UPTAKE; STIMULATION SUPP | 1/1/2007 | $11.68 | 3 |
| P | 78006 | THYROID IMAGING WITH UPTAKE SING | 1/1/2007 | $17.39 | 3 |
| P | 78007 | THYROID IMAGING WITH UPTAKE; MUL | 1/1/2007 | $17.91 | 3 |
| P | 78010 | THYROID IMAGING; ONLY | 1/1/2007 | $14.01 | 3 |
| P | 78011 | THYROID IMAGING; WITH VASCULAR F | 1/1/2007 | $16.09 | 3 |
| P | 78015 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $24.13 | 3 |
| P | 78016 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $29.32 | 3 |
| P | 78018 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $31.14 | 3 |
| P | 78020 | THYROID CARCINOMA METASTASES UPT | 1/1/2007 | $21.54 | 3 |
| P | 78070 | PARATHYROID IMAGING | 1/1/2007 | $29.58 | 3 |
| P | 78075 | ADRENAL IMAGING, CORTEX AND/OR M | 1/1/2007 | $26.73 | 3 |
| P | 78099 | UNLISTED ENDOCRINE PROCEDURE DIA | 10/1/2001 | $0.01 | 5 |
| P | 78102 | BONE MARROW IMAGING LIMITED AREA | 1/1/2007 | $19.72 | 3 |
| P | 78103 | BONE MARROW IMAGING; MULTIPLE AR | 1/1/2007 | $26.99 | 3 |
| P | 78104 | BONE MARROW IMAGING; WHOLE BODY | 1/1/2007 | $28.55 | 3 |
| P | 78110 | PLASMA VOLUME, RADIOPHARMACEUTIC | 1/1/2007 | $7.01 | 3 |
| P | 78111 | BLOOD OR PLASMA VOLUME RADIOISOT | 1/1/2007 | $8.04 | 3 |
| P | 78120 | RED CELL VOLUME DETERMINATION (S | 1/1/2007 | $8.30 | 3 |
| P | 78121 | RED CELL MASS DETERMINATION; MUL | 1/1/2007 | $11.42 | 3 |
| P | 78122 | WHOLE BLOOD VOLUME DETERMINATION | 1/1/2007 | $16.35 | 3 |
| P | 78130 | RED CELL SURVIVAL STUDY; | 1/1/2007 | $22.06 | 3 |
| P | 78135 | RED CELL SURVIVAL STUDY; DIFFERE | 1/1/2007 | $23.10 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 78140 | LABELED RED CELL SEQUESTRATION, | 1/1/2007 | $21.80 | 3 |
| P | 78160 | PLASMA RADIOIRON DISAPPEARANCE ( | 1/1/2006 | INVALID | N |
| P | 78162 | RADIOIRON ORAL ABSORPTION | 1/1/2006 | INVALID | N |
| P | 78170 | RADIOIRON RED CELL UTILIZATION | 1/1/2006 | INVALID | N |
| P | 78172 | CHELATABLE IRON FOR ESTIMATION O | 1/1/2006 | INVALID | N |
| P | 78185 | SPLEEN IMAGING ONLY, WITH OR WIT | 1/1/2007 | $14.53 | 3 |
| P | 78190 | KINETICS,STUDY OF PLATELET SURVI | 1/1/2007 | $40.48 | 3 |
| P | 78191 | PLATELET SURVIVAL STUDY | 1/1/2007 | $21.80 | 3 |
| P | 78195 | LYMPHATICS AND LYMPH NODES IMAGI | 1/1/2007 | $43.34 | 3 |
| P | 78199 | UNLISTED HEMATOPOIETIC, RETICULO | 4/1/1982 | $0.01 | 5 |
| P | 78201 | LIVER IMAGING STATIC ONLY | 1/1/2007 | $15.83 | 3 |
| P | 78202 | LIVER IMAGING; WITH VASCULAR FLO | 1/1/2007 | $18.17 | 3 |
| P | 78205 | LIVER IMAGING (SPECT) | 1/1/2007 | $25.43 | 3 |
| P | 78206 | LIVER IMAGING (SPECT); WITH VASC | 1/1/2007 | $34.51 | 3 |
| P | 78215 | LIVER AND SPLEEN IMAGING STATIC | 1/1/2007 | $17.39 | 3 |
| P | 78216 | LIVER AND SPLEEN IMAGING; WITH V | 1/1/2007 | $20.24 | 3 |
| P | 78220 | LIVER FUNCTION STUDY WITH HEPATO | 1/1/2007 | $17.39 | 3 |
| P | 78223 | HEPATOBILIARY DUCTAL SYSTEM IMAG | 1/1/2007 | $30.10 | 3 |
| P | 78230 | SALIVARY GLAND IMAGING; | 1/1/2007 | $16.09 | 3 |
| P | 78231 | SALIVARY GLAND IMAGING; WITH SER | 1/1/2007 | $18.68 | 3 |
| P | 78232 | SALIVARY GLAND FUNCTION STUDY | 1/1/2007 | $16.87 | 3 |
| P | 78258 | ESOPHAGEAL MOTILITY | 1/1/2007 | $26.47 | 3 |
| P | 78261 | GASTRIC MUCOSA IMAGING | 1/1/2007 | $24.91 | 3 |
| P | 78262 | GASTROESOPHAGEAL REFLUX STUDY | 1/1/2007 | $24.39 | 3 |
| P | 78264 | GASTRIC EMPTYING STUDY | 1/1/2007 | $27.77 | 3 |
| P | 78270 | VITAMIN B-12 ABSORPTION STUDY (E | 1/1/2007 | $7.27 | 3 |
| P | 78271 | VITAMIN B-12 ABSORPTION STUDY (E | 1/1/2007 | $7.27 | 3 |
| P | 78272 | VITAMIN B-12 ABSORPTION STUDIES | 1/1/2007 | $9.60 | 3 |
| P | 78278 | ACUTE GASTROINTESTINAL BLOOD LOS | 1/1/2007 | $35.29 | 3 |
| P | 78282 | GASTROINTESTINAL PROTEIN LOSS | 1/1/2007 | $13.75 | 3 |
| P | 78290 | INTESTINE IMAGING (EG, ECTOPIC G | 1/1/2007 | $24.39 | 3 |
| P | 78291 | PERITONEAL-VENOUS SHUNT PATENCY | 1/1/2007 | $31.66 | 3 |
| P | 78299 | UNLISTED GASTROINTESTINAL PROCED | 4/1/1982 | $0.01 | 5 |
| P | 78300 | BONE AND/OR JOINT IMAGING; LIMIT | 1/1/2007 | $22.32 | 3 |
| P | 78305 | BONE IMAGING; MULTIPLE AREAS | 1/1/2007 | $29.84 | 3 |
| P | 78306 | BONE IMAGING; WHOLE BODY | 1/1/2007 | $30.88 | 3 |
| P | 78315 | BONE AND/OR JOINT IMAGING; THREE | 1/1/2007 | $36.33 | 3 |
| P | 78320 | BONE IMAGING; TOMOGRAPHIC (SPECT | 1/1/2007 | $37.37 | 3 |
| P | 78350 | BONE DENSITY (BONE MINERAL CONTE | 1/1/2007 | $7.79 | 3 |
| P | 78399 | UNLISTED MUSCULOSKELETAL PROCEDU | 4/1/1982 | $0.01 | 5 |
| P | 78414 | DETERMINATION OF CENTRAL C-V HEM | 1/1/2007 | $16.35 | 3 |
| P | 78428 | CARDIAC SHUNT DETECTION | 1/1/2007 | $28.55 | 3 |
| P | 78445 | NON-CARDIAC VASCULAR FLOW IMAGIN | 1/1/2007 | $17.65 | 3 |
| P | 78455 | VENOUS THROMBOSIS STUDY (EG RADI | 1/1/2006 | INVALID | N |
| P | 78456 | ACUTE VENOUS THROMBOSIS IMAGING, | 1/1/2007 | $35.81 | 3 |
| P | 78457 | VENOUS THROMBOSIS IMAGING(E.G.,V | 1/1/2007 | $27.51 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 78458 | VENOUS THROMBOSIS IMAGING (EG VE | 1/1/2007 | $32.70 | 3 |
| P | 78459 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| P | 78460 | MYOCARDIAL PERFUSION IMAGING; (P | 1/1/2007 | $30.88 | 3 |
| P | 78461 | MYOCARDIAL PERFUSION IMAGING; MU | 1/1/2007 | $44.37 | 3 |
| P | 78464 | MYOCARDIAL PERFUSION IMAGING; TO | 1/1/2007 | $39.18 | 3 |
| P | 78465 | MYOCARDIAL PERFUSION IMAGING; TO | 1/1/2007 | $52.68 | 3 |
| P | 78466 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $24.91 | 3 |
| P | 78468 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $28.55 | 3 |
| P | 78469 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $32.70 | 3 |
| P | 78472 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $35.29 | 3 |
| P | 78473 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $52.94 | 3 |
| P | 78478 | MYOCARDIAL PERFUSION STUDY W/WAL | 1/1/2007 | $22.58 | 3 |
| P | 78480 | MYOCARDIAL PERFUSION STUDY W/EJE | 1/1/2007 | $22.32 | 3 |
| P | 78481 | CARDIAC BLOOD POOL IMAGING, (PLA | 1/1/2007 | $35.55 | 3 |
| P | 78483 | CARDIAC BLOOD POOL IMAGING, (PLA | 1/1/2007 | $53.46 | 3 |
| P | 78491 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| P | 78492 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| P | 78494 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $43.08 | 3 |
| P | 78496 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $18.17 | 3 |
| P | 78499 | UNLISTED CARDIOVASCULAR PROCEDUR | 4/1/1982 | $0.01 | 5 |
| P | 78580 | PULMONARY PERFUSION IMAGING PART | 1/1/2007 | $26.47 | 3 |
| P | 78584 | PULMONARY PERFUSION IMAGIN, PART | 1/1/2007 | $35.29 | 3 |
| P | 78585 | PULMONARY PERFUSION IMAGING PART | 1/1/2007 | $38.93 | 3 |
| P | 78586 | PULMONARY VENTILATION IMAGING AE | 1/1/2007 | $14.27 | 3 |
| P | 78587 | PULMONARY BENTILATION IMAGING AE | 1/1/2007 | $17.65 | 3 |
| P | 78588 | PULMONARY PERFUSION IMAGING, PAR | 1/1/2007 | $38.93 | 3 |
| P | 78591 | PULMONARY VENTILATION IMAGING GA | 1/1/2007 | $14.27 | 3 |
| P | 78593 | PULMONARY VENTILATION IMAGING GA | 1/1/2007 | $17.39 | 3 |
| P | 78594 | PULMONARY VENTILATION IMAGING GA | 1/1/2007 | $18.94 | 3 |
| P | 78596 | PULMONARY QUANTITATIVE DIFFERENT | 1/1/2007 | $45.15 | 3 |
| P | 78599 | UNLISTED RESPIRATORY PROCEDURE D | 4/1/1982 | $0.01 | 5 |
| P | 78600 | BRAIN IMAGING, LIMITED PROCEDURE | 1/1/2007 | $15.83 | 3 |
| P | 78601 | BRAIN IMAGING LIMITED PROCEDURE; | 1/1/2007 | $18.17 | 3 |
| P | 78605 | BRAIN IMAGING COMPLETE STUDY STA | 1/1/2007 | $18.94 | 3 |
| P | 78606 | BRAIN IMAGING COMPLETE STUDY; WI | 1/1/2007 | $22.84 | 3 |
| P | 78607 | BRAIN IMAGING, COMPLETE STUDY; T | 1/1/2007 | $44.37 | 3 |
| P | 78608 | BRAIN IMAGING, POSITRON EMISSION | 1/1/2007 | $53.72 | 3 |
| P | 78609 | BRAIN IMAGING, POSITRON EMISSION | 1/1/2007 | $53.72 | 3 |
| P | 78610 | BRAIN IMAGING, VASCULAR FLOW ONL | 1/1/2007 | $10.90 | 3 |
| P | 78615 | CEREBRAL VASCULAR FLOW | 1/1/2007 | $15.31 | 3 |
| P | 78630 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $24.39 | 3 |
| P | 78635 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $22.32 | 3 |
| P | 78645 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $20.24 | 3 |
| P | 78647 | CEREBROSPINAL FLUID FLOW, IMAGIN | 1/1/2007 | $32.44 | 3 |
| P | 78650 | CEREBROSPINAL FLUID LEAKAGE DETE | 1/1/2007 | $22.06 | 3 |
| P | 78660 | RADIOPHARMACEUTICAL DACRYOCYSTOG | 1/1/2007 | $18.94 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 78699 | UNLISTED NERVOUS SYSTEM PROCEDUR | 4/1/1982 | $0.01 | 5 |
| P | 78700 | KIDNEY IMAGING STATIC ONLY | 1/1/2007 | $16.09 | 3 |
| P | 78701 | KIDNEY IMAGING; WITH VASCULAR FL | 1/1/2007 | $17.39 | 3 |
| P | 78704 | KIDNEY IMAGING; WITH FUNCTION ST | 1/1/2007 | INVALID | N |
| P | 78707 | KIDNEY IMAGING; WITH VASCULAR FL | 1/1/2007 | $34.25 | 3 |
| P | 78708 | KIDNEY IMAGING WITH VASCULAR FLO | 1/1/2007 | $43.34 | 3 |
| P | 78709 | KIDNEY IMAGING WITH VASCULAR FLO | 1/1/2007 | $50.34 | 3 |
| P | 78710 | KIDNEY IMAGING; TOMOGRAPHIC (SPE | 1/1/2007 | $23.61 | 3 |
| P | 78715 | KIDNEY VASCULAR FLOW ONLY | 1/1/2007 | INVALID | N |
| P | 78725 | KIDNEY FUNCTION STUDY WITHOUT PH | 1/1/2007 | $13.75 | 3 |
| P | 78730 | URINARY BLADDER RESIDUAL STUDY | 1/1/2007 | $12.98 | 3 |
| P | 78740 | URETERAL REFLUX STUDY (RADIOPHAR | 1/1/2007 | $20.50 | 3 |
| P | 78760 | TESTICULAR IMAGING | 1/1/2007 | INVALID | N |
| P | 78761 | TESTICULAR IMAGING; WITH VASCULA | 1/1/2007 | $25.43 | 3 |
| P | 78799 | UNLISTED GENITOURINARY PROCEDURE | 4/1/1982 | $0.01 | 5 |
| P | 78800 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $23.87 | 3 |
| P | 78801 | TUMOR LOCALIZATION; MULTIPLE ARE | 1/1/2007 | $28.80 | 3 |
| P | 78802 | TUMOR LOCALIZATION; WHOLE BODY | 1/1/2007 | $30.88 | 3 |
| P | 78803 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $39.44 | 3 |
| P | 78804 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $38.41 | 3 |
| P | 78805 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $26.21 | 3 |
| P | 78806 | ABSCESS LOCALIZATION; WHOLE BODY | 1/1/2007 | $30.88 | 3 |
| P | 78807 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $39.44 | 3 |
| P | 78810 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2005 | INVALID | N |
| P | 78811 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2007 | $56.57 | 3 |
| P | 78812 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2007 | $70.07 | 3 |
| P | 78813 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2007 | $72.66 | 3 |
| P | 78814 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2007 | $79.67 | 3 |
| P | 78815 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2007 | $87.97 | 3 |
| P | 78816 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2007 | $90.05 | 3 |
| P | 78890 | GENERATION OF AUTOMATED DATA: IN | 1/1/2007 | $2.08 | 3 |
| P | 78891 | GENERATION OF AUTOMATED DATA INT | 1/1/2007 | $3.89 | 3 |
| P | 78990 | PROVISION OF DIAGNOSTIC RADIOPHA | 1/1/2005 | INVALID | N |
| P | 78999 | UNLISTED MISCELLANEOUS PROCEDURE | 4/1/1982 | $0.01 | 5 |
| P | 79000 | RADIOPHARMACEUTICAL THERAPY, HYP | 1/1/2005 | INVALID | N |
| P | 79001 | RADIONUCLIDE THERAPY HYPERTHYROI | 1/1/2005 | INVALID | N |
| P | 79005 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $64.36 | 3 |
| P | 79020 | RADIOPHARMACEUTICAL THERAPY, THY | 1/1/2005 | INVALID | N |
| P | 79030 | RADIOPHARMACEUTICAL ABLATION OF | 1/1/2005 | INVALID | N |
| P | 79035 | RADIOPHARMACEUTICAL THERAPY FOR5 | 1/1/2005 | INVALID | N |
| P | 79100 | RADIOPHARMACEUTICAL THERAPY, POL | 1/1/2005 | INVALID | N |
| P | 79101 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $70.32 | 3 |
| P | 79200 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $71.88 | 3 |
| P | 79300 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $59.43 | 3 |
| P | 79400 | RADIOPHARMACEUTICAL THERAPY, NON | 1/1/2005 | INVALID | N |
| P | 79403 | RADIOPHARMACEUTICAL THERAPY, RAD | 1/1/2007 | $84.08 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 79420 | INTRAVASCULAR RADIOPHARMACEUTICA | 1/1/2005 | INVALID | N |
| P | 79440 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $72.40 | 3 |
| P | 79445 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $86.67 | 3 |
| P | 79900 | PROVISION OF THERAPEUTIC RADIOPH | 1/1/2005 | INVALID | N |
| P | 79999 | RADIOPHARMACEUTICAL THERAPY, UNL | 4/1/1982 | $0.01 | 5 |
| P | 80072 | ARTHRITIS PANEL; URIC ACID, BLOO | 4/1/2002 | INVALID | N |
| P | 80090 | TORCH ANTIBODY PANEL; ANTIBODY, | 7/1/2003 | INVALID | N |
| P | 80414 | CHORIONIC GONADOTROPHIN STIMULAT | 1/1/1994 | NC | 9 |
| P | 80415 | CHORIONIC GONADOTROPHIN STIMULAT | 1/1/1994 | NC | 9 |
| P | 82107 | ALPHA-FETOPROTEIN; AFP-L3 FRACTI | 1/1/2007 | NC | 9 |
| P | 82273 | BLOOD, OCCULT, BY PEROXIDASE ACT | 1/1/2006 | INVALID | N |
| P | 82757 | FRUCTOSE SEMEN | 4/1/1982 | NC | 9 |
| P | 83020 | HEMOGLOBIN; ELECTROPHORESIS (EG, | 1/1/2007 | $13.75 | 3 |
| P | 83698 | LIPOPROTEIN-ASSOCIATED PHOSPHOLI | 1/1/2007 | NC | 9 |
| P | 83715 | LIPOPROTEIN, BLOOD; ELECTROPHORE | 1/1/2006 | INVALID | N |
| P | 83912 | NUCLEAR MOLECULAR DIAGNOSTICS; I | 10/1/2005 | $12.98 | 3 |
| P | 83913 | MOLECULAR DIAGNOSTICS; RNA STABI | 1/1/2007 | NC | 9 |
| P | 84030 | PHENYLALANINE (PKU), BLOOD | 4/1/1982 | NC | 9 |
| P | 84165 | PROTEIN; ELECTROPHORETIC FRACTIO | 1/1/2007 | $13.49 | 3 |
| P | 84166 | PROTEIN; ELECTROPHORETIC FRACTIO | 1/1/2007 | $13.49 | 3 |
| P | 84181 | WESTERN BLOT, WITH INTERPRETATIO | 1/1/2007 | $13.49 | 3 |
| P | 84182 | WESTERN BLOT, WITH INTERPRETATIO | 1/1/2007 | $14.27 | 3 |
| P | 85021 | BLOOD COUNT; HEMOGRAM AUTOMATED | 7/1/2003 | INVALID | N |
| P | 85022 | BLOOD COUNT HEMOGRAM AUTOMATED A | 7/1/2003 | INVALID | N |
| P | 85023 | BLOOD COUNT HEMOGRAM AND PLATELE | 7/1/2003 | INVALID | N |
| P | 85024 | BLOOD COUNT HEMOGRAM AND PLATELE | 7/1/2003 | INVALID | N |
| P | 85031 | BLOOD COUNT HEMOGRAM MANUAL COMP | 7/1/2003 | INVALID | N |
| P | 85095 | BONE MARROW; ASPIRATION ONLY | 4/1/2002 | INVALID | N |
| P | 85102 | BONE MARROW BIOPSY, NEEDLE OR TR | 4/1/2002 | INVALID | N |
| P | 85390 | FIBRINOLYSINS OR COAGULOPATHY SC | 1/1/2007 | $13.23 | 3 |
| P | 85535 | IRON STAIN (RBC OR BONE MARROW S | 4/1/2002 | INVALID | N |
| P | 85576 | PLATELET; AGGREGATION (IN VITRO) | 1/1/2007 | $14.01 | 3 |
| P | 85585 | PLATELET; ESTIMATION ON SMEAR ON | 7/1/2003 | INVALID | N |
| P | 85590 | PLATELET; MANUAL COUNT | 7/1/2003 | INVALID | N |
| P | 85595 | PLATELET; AUTOMATED COUNT | 7/1/2003 | INVALID | N |
| P | 86255 | FLUORESCENT ANTIBODY; SCREEN, EA | 1/1/2007 | $13.75 | 3 |
| P | 86256 | FLUORESCENT ANTIBODY; TITER, EAC | 1/1/2007 | $13.75 | 3 |
| P | 86320 | IMMUNOELECTROPHORESIS; SERUM | 1/1/2007 | $13.75 | 3 |
| P | 86325 | IMMUNOELECTROPHORESIS; OTHER FLU | 1/1/2007 | $13.23 | 3 |
| P | 86327 | IMMUNOELECTROPHORESIS; CROSSED ( | 1/1/2007 | $16.09 | 3 |
| P | 86334 | IMMUNOFIXATION ELECTROPHORESIS; | 1/1/2007 | $13.75 | 3 |
| P | 86335 | IMMUNOFIXATION ELECTROPHORESIS; | 1/1/2007 | $13.49 | 3 |
| P | 86585 | SKIN TEST; TUBERCULOSIS TINE TES | 1/1/2006 | INVALID | N |
| P | 86683 | HEMOGLOBIN, FECAL | 4/1/2002 | INVALID | N |
| P | 86788 | ANTIBODY; WEST NILE VIRUS, IGM | 1/1/2007 | NC | 9 |
| P | 86789 | ANTIBODY; WEST NILE VIRUS | 1/1/2007 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 86911 | BLOOD TYPING, FOR PATERNITY TEST | 8/1/1993 | NC | 9 |
| P | 87164 | DARK FIELD EXAMINATION ANY SOURC | 1/1/2007 | $12.98 | 3 |
| P | 87207 | SMEAR, PRIMARY SOURCE WITH INTER | 1/1/2007 | $14.01 | 3 |
| P | 87305 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2007 | NC | 9 |
| P | 87498 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| P | 87640 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| P | 87641 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| P | 87653 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| P | 87808 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2007 | NC | 9 |
| P | 88000 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| P | 88005 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| P | 88007 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| P | 88012 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| P | 88014 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| P | 88016 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| P | 88020 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| P | 88025 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| P | 88027 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| P | 88028 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| P | 88029 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| P | 88036 | NECROPSY (AUTOPSY) LIMITED GROSS | 4/1/1982 | NC | 9 |
| P | 88037 | NECROPSY (AUTOPSY) LIMITED GROSS | 4/1/1982 | NC | 9 |
| P | 88040 | NECROPSY (AUTOPSY) FORENSIC EXAM | 4/1/1982 | NC | 9 |
| P | 88045 | NECROPSY (AUTOPSY); CORONER'S CA | 4/1/1982 | NC | 9 |
| P | 88099 | UNLISTED NECROPSY (AUTOPSY) PROC | 4/1/1982 | NC | 9 |
| P | 88104 | CYTOPATHOLOGY, FLUIDS, WASHINGS | 1/1/2007 | $21.28 | 3 |
| P | 88106 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $21.28 | 3 |
| P | 88107 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $29.06 | 3 |
| P | 88108 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $21.28 | 3 |
| P | 88112 | CYTOPATHOLOGY, SELECTIVE CELLULA | 1/1/2007 | $44.37 | 3 |
| P | 88125 | CYTOPATHOLOGY, FERENSIC, (EG, SP | 10/1/2002 | NC | 9 |
| P | 88141 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2007 | $15.31 | 3 |
| P | 88160 | CYTOPATHOLOGY, SMEARS, ANY OTHER | 1/1/2007 | $18.94 | 3 |
| P | 88161 | CYTOPATHOLOGY ANY OTHER SOURCE; | 1/1/2007 | $18.94 | 3 |
| P | 88162 | CYTOPATHOLOGY ANY OTHER SOURCE; | 1/1/2007 | $29.06 | 3 |
| P | 88170 | FINE NEEDLE ASPIRATION; SUPERFIC | 4/1/2002 | INVALID | N |
| P | 88171 | FINE NEEDLE ASPIRATION WITH OR W | 4/1/2002 | INVALID | N |
| P | 88172 | CYTOPATHOLOGY, EVALUATION OF FIN | 1/1/2007 | $22.84 | 3 |
| P | 88173 | EVALUATION OF FINE NEEDLE ASPIRA | 1/1/2007 | $52.68 | 3 |
| P | 88180 | FLOW CYTOMETRY; EACH CELL SURFAC | 1/1/2005 | INVALID | N |
| P | 88182 | FLOW CYTOMETRY; CELL CYCLE OR DN | 1/1/2007 | $29.32 | 3 |
| P | 88199 | UNLISTED CYTOPATHOLOGY PROCEDURE | 4/1/1982 | $0.01 | 5 |
| P | 88299 | UNLISTED CYTOGENETIC STUDY | 4/1/1982 | $0.01 | 5 |
| P | 88300 | LEVEL I - SURGICAL PATHOLOGY, GR | 1/1/2007 | $3.11 | 3 |
| P | 88302 | LEVEL II - SURGICAL PATHOLOGY, G | 1/1/2007 | $5.19 | 3 |
| P | 88304 | LEVEL III - SURGICAL PATHOLOGY, | 1/1/2007 | $8.30 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 88305 | LEVEL IV - SURGICAL PATHOLOGY, G | 1/1/2007 | $28.80 | 3 |
| P | 88307 | LEVEL V - SURGICAL PATHOLOGY, GR | 1/1/2007 | $60.46 | 3 |
| P | 88309 | LEVEL VI - SURGICAL PATHOLOGY, G | 1/1/2007 | $86.41 | 3 |
| P | 88311 | DECALCIFICATION PROCEDURE (LIST | 1/1/2007 | $9.08 | 3 |
| P | 88312 | SPECIAL STAINS (LIST SEPERATELY | 1/1/2007 | $20.50 | 3 |
| P | 88313 | SPECIAL STAINS GROUP II ALL OTHE | 1/1/2007 | $9.08 | 3 |
| P | 88314 | SPECIAL STAINS HISTOCHEMICAL STA | 1/1/2007 | $17.13 | 3 |
| P | 88318 | DETERMINATIVE HISTOCHEMISTRY TO | 1/1/2007 | $16.09 | 3 |
| P | 88319 | DETERMINATIVE HISTOCHEMISTRY OR | 1/1/2007 | $19.98 | 3 |
| P | 88323 | CONSULTATION AND REPORT ON REFER | 1/1/2007 | $51.12 | 3 |
| P | 88331 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $45.15 | 3 |
| P | 88332 | CONSULTATION DURING SURGERY; EAC | 1/1/2007 | $22.32 | 3 |
| P | 88333 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $45.93 | 3 |
| P | 88334 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $22.58 | 3 |
| P | 88342 | IMMUNOCYTOCHEMISTRY (INCLUDING T | 1/1/2007 | $32.18 | 3 |
| P | 88346 | IMMUNOFLUORESCENT STUDY, EACH AN | 1/1/2007 | $32.44 | 3 |
| P | 88347 | IMMUNOFLUORESCENT STUDY, EACH AN | 1/1/2007 | $32.18 | 3 |
| P | 88348 | ELECTRON MICROSCOPY DIAGNOSTIC | 1/1/2007 | $57.35 | 3 |
| P | 88349 | SCANNING | 1/1/2007 | $29.06 | 3 |
| P | 88355 | MORPHOMETRIC ANALYSIS SKELETAL M | 1/1/2007 | $70.32 | 3 |
| P | 88356 | MORPHOMETRIC ANALYSIS NERVE | 1/1/2007 | $114.18 | 3 |
| P | 88358 | MORPHOMETRIC ANALYSIS; TUMOR | 1/1/2007 | $37.63 | 3 |
| P | 88360 | MORPHOMETRIC ANALYSIS, TUMOR IMM | 1/1/2007 | $42.30 | 3 |
| P | 88361 | MORPHOMETRIC ANALYSIS; TUMOR IMM | 1/1/2007 | $45.93 | 3 |
| P | 88362 | NERVE TEASING PREPARATIONS | 1/1/2007 | $82.52 | 3 |
| P | 88365 | IN SITU HYBRIDIZATION (EG, FISH) | 1/1/2007 | $45.15 | 3 |
| P | 88367 | MORPHOMETRIC ANALYSIS, IN SITU H | 1/1/2007 | $49.31 | 3 |
| P | 88368 | MORPHOMETRIC ANALYSIS, IN SITU H | 1/1/2007 | $53.46 | 3 |
| P | 88371 | PROTEIN ANALYSIS OF TISSUE BY WE | 1/1/2007 | $13.23 | 3 |
| P | 88372 | PROTEIN ANALYSIS OF TISSUE BY WE | 1/1/2007 | $14.01 | 3 |
| P | 88385 | ARRAY-BASED EVALUATION OF MULTIP | 11/1/2006 | NC | 9 |
| P | 88386 | ARRAY-BASED EVALUATION OF MULTIP | 11/1/2006 | NC | 9 |
| P | 88399 | UNLISTED SURGICAL PATHOLOGY PROC | 4/1/1982 | $0.01 | 5 |
| P | 89060 | CRYSTAL IDENTIFICATION BY COMPEN | 1/1/2007 | $14.01 | 3 |
| P | 89235 | WATER LOAD TEST | 1/1/2004 | NC | 9 |
| P | 89240 | UNLISTED MISCELLANEOUS PATHOLOGY | 1/1/2004 | NC | 9 |
| P | 89250 | CULTURE AND FERTILIZATION OF OOC | 1/1/1996 | NC | 9 |
| P | 89251 | CULTURE AND FERTILIZATION OF OOC | 1/1/1998 | NC | 9 |
| P | 89252 | ASSISTED OOCYTE FERTILIZATION, M | 4/1/2004 | INVALID | N |
| P | 89253 | ASSISTED EMBRYO HATCHING, MICROT | 1/1/1998 | NC | 9 |
| P | 89254 | OOCYTE IDENTIFICATION FROM FOLLI | 1/1/1998 | NC | 9 |
| P | 89255 | PREPARATION OF EMBRYO FOR TRANSF | 1/1/1998 | NC | 9 |
| P | 89256 | PREPARATION OF CRYOPRESERVED EMB | 4/1/2004 | INVALID | N |
| P | 89257 | SPERM IDENTIFICATION FROM ASPIRA | 1/1/1998 | NC | 9 |
| P | 89258 | CRYOPRESERVATION; EMBRYO | 1/1/1998 | NC | 9 |
| P | 89259 | CRYOPRESERVATION; SPERM | 1/1/1998 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 89260 | SPERM ISOLATION; SIMPLE PREP FOR | 1/1/1998 | NC | 9 |
| P | 89261 | SPERM ISOLATION; COMPLEX PREP FO | 1/1/1998 | NC | 9 |
| P | 89268 | INSEMINATION OF OOCYTES | 1/1/2004 | NC | 9 |
| P | 89272 | EXTENDED CULTURE OF OOCYTE(S)/EM | 1/1/2004 | NC | 9 |
| P | 89280 | ASSISTED OOCYTE FERTILIZATION, M | 1/1/2004 | NC | 9 |
| P | 89281 | ASSISTED OOCYTE FERTILIZATION, M | 1/1/2004 | NC | 9 |
| P | 89290 | BIOPSY, OOCYTE POLAR BODY OR EMB | 1/1/2004 | NC | 9 |
| P | 89291 | BIOPSY, OOCYTE POLAR BODY OR EMB | 1/1/2004 | NC | 9 |
| P | 89300 | SEMEN ANALYSIS PRESENCE AND/OR M | 4/1/1982 | NC | 9 |
| P | 89310 | SEMEN ANALYSIS; MOTILITY AND COU | 4/1/1982 | NC | 9 |
| P | 89320 | SEMEN ANALYSIS; COMPLETE (VOLUME | 4/1/1988 | NC | 9 |
| P | 89321 | SEMEN ANALYSIS, PRESENCE AND/OR | 1/1/2001 | NC | 9 |
| P | 89325 | SPERM ANTIBODIES | 4/1/1982 | NC | 9 |
| P | 89329 | SPERM EVALUATION HAMSTER PENETRA | 3/1/1987 | NC | 9 |
| P | 89330 | SPERM EVALUATION CERVICAL MUCUS | 8/1/1986 | NC | 9 |
| P | 89335 | CRYOPRESERVATION, REPORDUCTIVE T | 1/1/2004 | NC | 9 |
| P | 89342 | STORAGE, (PER YEAR); EMBRYO(S) | 1/1/2004 | NC | 9 |
| P | 89343 | STORAGE, (PER YEAR); SPERM/SEMEN | 1/1/2004 | NC | 9 |
| P | 89344 | STORAGE, (PER YEAR); REPRODUCTIV | 1/1/2004 | NC | 9 |
| P | 89346 | STORAGE, (PER YEAR); OOCYTE(S) | 1/1/2004 | NC | 9 |
| P | 89350 | SPUTUM OBTAINING SPECIMEN AEROSL | 4/1/2004 | INVALID | N |
| P | 89352 | THAWING OF CRYOPRESERVED; EMBRYO | 1/1/2004 | NC | 9 |
| P | 89353 | THAWING OF CRYOPRESERVED; SPERM/ | 1/1/2004 | NC | 9 |
| P | 89354 | THAWING OF CRYOPRESERVED; REPROD | 1/1/2004 | NC | 9 |
| P | 89355 | STARCH GRANULES FECES | 4/1/2004 | INVALID | N |
| P | 89356 | THAWING OF CRYOPRESERVED; OOCYTE | 1/1/2004 | NC | 9 |
| P | 89360 | SWEAT COLLECTION BY IONTOPHORESI | 4/1/2004 | INVALID | N |
| P | 89365 | WATER LOAD TEST | 4/1/2004 | INVALID | N |
| P | 89399 | UNLISTED MISCELLANEOUS PATHOLOGY | 4/1/2004 | INVALID | N |
| P | 90632 | HEPATITIS A VACCINE, ADULT DOSAG | 2/1/2001 | $15.19 | 3 |
| P | 90633 | HEPATITIS A VACCINE, PEDIATRIC/A | 1/1/1999 | $15.19 | 3 |
| P | 90636 | HEPATITIS A AND HEPATITIS B VACC | 2/1/2003 | $15.19 | 3 |
| P | 90645 | HEMOPHILUS INFLUENZA B VACCINE ( | 1/1/1999 | $15.19 | 3 |
| P | 90646 | HEMOPHILUS INFLUENZA B VACCINE ( | 12/1/2005 | NC | 9 |
| P | 90647 | HEMOPHILUS INFLUENZA B VACCINE ( | 1/1/1999 | $15.19 | 3 |
| P | 90648 | HEMOPHILUS INFLUENZA B VACCINE ( | 1/1/1999 | $15.19 | 3 |
| P | 90649 | HUMAN PAPILLOMA VIRUS (HPV) VACC | 12/1/2006 | $15.19 | 3 |
| P | 90655 | INFLUENZA VIRUS VACCINE, SPLIT V | 11/15/2003 | $15.19 | 3 |
| P | 90656 | INFLUENZA VIRUS VACCINE, SPLIT V | 1/1/2005 | $15.19 | 3 |
| P | 90657 | INFLUENZA VIRUS VACCINE, SPLIT V | 9/1/2000 | $15.19 | 3 |
| P | 90658 | INFLUENZA VIRUS VACCINE, SPLIT V | 9/1/2000 | $15.19 | 3 |
| P | 90660 | INFLUENZA VIRUS VACCINE, LIVE, F | 9/15/2005 | $15.19 | 3 |
| P | 90669 | PNEUMOCOCCAL CONJUGATE VACCINE, | 1/1/1999 | $15.19 | 3 |
| P | 90680 | ROTAVIRUS VACCINE, PENTAVALENT, | 7/1/2006 | $15.19 | 3 |
| P | 90698 | DIPHTHERIA, TETANUS TOXOIDS, ACE | 3/1/2005 | NC | 9 |
| P | 90700 | IMMUNIZATION, ACTIVE; DIPHTHERIA | 1/1/1995 | $15.19 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 90702 | DIPHTHERIA AND TETANUS TOXOIDS ( | 1/1/1995 | $15.19 | 3 |
| P | 90707 | IMMUNIZATION ACTIVE; MEASLES, MU | 1/1/1995 | $15.19 | 3 |
| P | 90709 | IMMUNIZATION ACTIVE; RUBELLA AND | 7/1/2003 | INVALID | N |
| P | 90710 | IMMUNIZATION, ACTIVE; MEASLES, M | 5/1/2006 | $15.19 | 3 |
| P | 90712 | IMMUNIZATION, ACTIVE; POLIOVIRUS | 4/1/2001 | NC | 9 |
| P | 90713 | POLIOVIRUS VACCINE, INACTIVATED, | 1/1/1995 | $15.19 | 3 |
| P | 90714 | TETANUS AND DIPHTHERIA TOXOIDS ( | 7/1/2005 | $15.19 | 3 |
| P | 90715 | TETANUS, DIPHTHERIA TOXOIDS AND | 7/1/2005 | $15.19 | 3 |
| P | 90716 | IMMUNIZATION, ACTIVE; VARICELLA | 11/1/1996 | $15.19 | 3 |
| P | 90721 | IMMUNIZATION ACTIVE; DIPHTHERIA, | 5/1/2002 | $15.19 | 3 |
| P | 90723 | DIPHTHERIA, TETANUS TOXOIDS, ACE | 4/1/2003 | $15.19 | 3 |
| P | 90727 | PLAGUE VACCINE | 5/9/2005 | NC | 9 |
| P | 90732 | PNEUMOCOCCAL POLYSACCHARIDE VACC | 1/1/2001 | $15.19 | 3 |
| P | 90733 | IMMUNIZATION ACTIVE; MENINGOCOCC | 8/1/2005 | $15.19 | 3 |
| P | 90734 | MENINGOCOCCAL CONJUGATE VACCINE, | 6/27/2005 | $15.19 | 3 |
| P | 90735 | IMMUNIZATION, ACTIVE; ENCEPHALIT | 2/1/2001 | NC | 9 |
| P | 90740 | HEPATITIS B VACCINE, DIALYSIS OR | 1/1/2001 | $15.19 | 3 |
| P | 90744 | HEPATITIS B VACCINE, PEDIATRIC/A | 4/1/1996 | $15.19 | 3 |
| P | 90746 | IMMUNIZATION, ACTIVE, HEPATITIS | 1/1/2001 | $15.19 | 3 |
| P | 90747 | HEPATITIS B VACCINE, DIALYSIS OR | 1/1/2001 | $15.19 | 3 |
| P | 90748 | HEPATITIS B AND HEMOPHILUS INFLU | 1/1/1999 | $15.19 | 3 |
| P | 90749 | UNLISTED IMMUNIZATION PROCEDURE | 4/1/2005 | $15.19 | 3 |
| P | 91000 | ESOPHAGEAL INTUBATION AND COLLEC | 1/1/2007 | $26.21 | 3 |
| P | 91010 | ESOPHAGEAL MOTILITY STUDY | 1/1/2007 | $45.41 | 3 |
| P | 91011 | ESOPHAGEAL MOTILITY STUDY; WITH | 1/1/2007 | $54.50 | 3 |
| P | 91012 | ESOPHAGEAL MOTILITY STUDY; WITH | 1/1/2007 | $52.68 | 3 |
| P | 91020 | ESOPHAGOGASTRIC MANOMETRIC STUDI | 1/1/2007 | $51.90 | 3 |
| P | 91022 | DUODENAL MOTILITY (MANOMETRIC) S | 4/1/2006 | NC | 9 |
| P | 91030 | ESOPHAGUS ACID PERFUSION (BERNST | 1/1/2007 | $32.96 | 3 |
| P | 91032 | ESOPHAGUS ACID REFLUX TEST WITH | 1/1/2005 | INVALID | N |
| P | 91033 | ESOPHAGUS ACID REFLUX TEST PROLO | 1/1/2005 | INVALID | N |
| P | 91034 | ESOPHAGUS, GASTROESOPHAGEAL REFL | 1/1/2007 | $35.55 | 3 |
| P | 91035 | ESOPHAGUS, GASTROESOPHAGEAL REFL | 1/1/2007 | $57.35 | 3 |
| P | 91037 | ESOPHAGEAL FUNCTION TEST, GASTRO | 4/1/2005 | NC | 9 |
| P | 91038 | ESOPHAGEAL FUNCTION TEST, GASTRO | 4/1/2005 | NC | 9 |
| P | 91040 | ESOPHAGEAL BALLOON DISTENSION PR | 4/1/2005 | NC | 9 |
| P | 91052 | GASTRIC ANALYSIS TEST WITH INJEC | 1/1/2007 | $28.55 | 3 |
| P | 91055 | GASTRIC INTUBATION WASHINGS AND | 1/1/2007 | $32.70 | 3 |
| P | 91060 | GASTRIC SALINE LOAD TEST | 1/1/2007 | INVALID | N |
| P | 91065 | BREATH HYDROGEN TEST (EG, FOR DE | 1/1/2007 | $7.27 | 3 |
| P | 91120 | RECTAL SENSATION, TONE, AND COMP | 4/1/2006 | NC | 9 |
| P | 91122 | ANORECTAL MANOMETRY | 1/1/2007 | $64.88 | 3 |
| P | 91132 | ELECTROGASTROPOGRAPHY, DIAGNOSTI | 1/1/2007 | $18.68 | 3 |
| P | 91133 | ELECTROGASTROGRAPHY, DIAGNOSTIC, | 1/1/2007 | $23.87 | 3 |
| P | 91299 | UNLISTED DIAGNOSTIC GASTROENTERO | 9/1/1993 | $0.01 | 5 |
| P | 92025 | COMPUTERIZED CORNEAL TOPOGRAPHY, | 1/1/2007 | $12.46 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 92060 | SENSORIMOTOR EXAM W/MULTIPLE MEA | 1/1/2007 | $25.95 | 3 |
| P | 92065 | ORTHOPTIC AND/OR PLEOPTIC TRAINI | 1/1/2007 | $13.75 | 3 |
| P | 92081 | VISUAL FIELD EXAM, UNILATERAL OR | 1/1/2007 | $13.49 | 3 |
| P | 92082 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $16.61 | 3 |
| P | 92083 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $18.94 | 3 |
| P | 92135 | SCANNING COMPUTERIZED OPTHALMIC | 1/1/2007 | $13.23 | 3 |
| P | 92136 | OPHTHALMIC BIOMETRY BY PARTIAL C | 1/1/2007 | $20.50 | 3 |
| P | 92235 | OPHTHALMOSCOPY WITH MEDICAL DIAG | 1/1/2007 | $31.14 | 3 |
| P | 92240 | INDOCYNAINE-GREEN ANGIOGRAPHY (I | 1/1/2007 | $42.30 | 3 |
| P | 92250 | FUNDUS PHOTOGRAPHY WITH INTERPRE | 1/1/2007 | $16.61 | 3 |
| P | 92265 | OCULOELECTROMYOGRAPHY ONE OR MOR | 1/1/2007 | $29.32 | 3 |
| P | 92270 | ELECTRO-OCULOGRAPHY WITH MEDICAL | 1/1/2007 | $30.36 | 3 |
| P | 92275 | ELECTRORETINOGRAPHY WITH MEDICAL | 1/1/2007 | $38.15 | 3 |
| P | 92283 | COLOR VISION EXAMINATION EXTENDE | 1/1/2007 | $6.49 | 3 |
| P | 92284 | DARK ADAPTATION EXAMINATION WITH | 1/1/2007 | $8.56 | 3 |
| P | 92285 | EXTERNAL OCULAR PHOTOGRAPHY W/IN | 1/1/2007 | $7.79 | 3 |
| P | 92286 | SPECIAL ANTERIOR SEGMENT PHOTOGR | 1/1/2007 | $25.17 | 3 |
| P | 92499 | UNLISTED ORPHTHALMOLOGICAL SERVI | 9/21/1993 | $0.01 | 5 |
| P | 92541 | SPONTANEOUS NYSTAGMUS TEST INCLU | 1/1/2007 | $15.83 | 3 |
| P | 92542 | POSITIONAL NYSTAGMUS TEST MINIMU | 1/1/2007 | $12.98 | 3 |
| P | 92543 | CALORIC VESTIBULAR TEST EACH IRR | 1/1/2007 | $4.15 | 3 |
| P | 92544 | OPTOKINETIC NYSTAGMUS TEST BIDIR | 1/1/2007 | $10.12 | 3 |
| P | 92545 | OSCILLATING TRACKING TEST WITH R | 1/1/2007 | $9.08 | 3 |
| P | 92546 | SINUSOIDAL VERTICAL AXIS ROTATIO | 1/1/2007 | $11.16 | 3 |
| P | 92548 | COMPUTERIZED DYNAMIC POSTUROGRAP | 1/1/2007 | $20.24 | 3 |
| P | 92585 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $19.20 | 3 |
| P | 92587 | EVOKED OTOACOUSTIC EMISSIONS; LI | 1/1/2007 | $5.19 | 3 |
| P | 92588 | EVOKED OTOACOUSTIC EMISSIONS; CO | 1/1/2007 | $13.75 | 3 |
| P | 92599 | UNLISTED OTORHINOLARYNGOLOGICAL | 7/1/2003 | INVALID | N |
| P | 92978 | INTRAVASCULAR ULTRASOUND DURING | 1/1/2007 | $66.69 | 3 |
| P | 92979 | INTERVASCULAR ULTRASOUND DURING | 1/1/2007 | $53.46 | 3 |
| P | 93024 | ERGONOVINE PROVOCATION TEST | 1/1/2007 | $43.08 | 3 |
| P | 93025 | MICROVOLT T-WAVE ALTERNANS FOR A | 1/1/2007 | $27.77 | 3 |
| P | 93278 | SIGNAL-AVERAGED ELECTROCARDIOGRA | 1/1/2007 | $9.34 | 3 |
| P | 93303 | TRANSTHORACIC ECHOCARDIOGRAPHY F | 1/1/2007 | $47.23 | 3 |
| P | 93304 | TRANSTHORACIC ECHOCARDIOGRAPHY F | 1/1/2007 | $27.25 | 3 |
| P | 93307 | ECHOCARDIOGRAPHY, TRANSTHORACIC, | 1/1/2007 | $33.74 | 3 |
| P | 93308 | ECHOCARDIOGRAPHY, REAL-TIME W/IM | 1/1/2007 | $19.46 | 3 |
| P | 93312 | ECHOCARDIOGRAPHY, TRANSESOPHAGEA | 1/1/2007 | $79.67 | 3 |
| P | 93314 | ECHOCARDIOGRAPHY, REAL TIME WITH | 1/1/2007 | $45.67 | 3 |
| P | 93315 | TRANSESOPHAGEAL ECHOCARDIOGRAPHY | 1/1/2007 | $100.69 | 3 |
| P | 93317 | TRANSESOPHAGEAL ECHOCARDIOGRAPHY | 1/1/2007 | $66.95 | 3 |
| P | 93318 | ECHOCARDIOGRAPHY, TRANSESOPHAGEA | 1/1/2007 | $73.18 | 3 |
| P | 93320 | DOPPLER ECHOCARDIOGRAPHY, PULSED | 1/1/2007 | $14.01 | 3 |
| P | 93321 | DOPPLER ECHOCARDIOGRAPHY, PULSED | 1/1/2007 | $5.71 | 3 |
| P | 93325 | DOPPLER COLOR FLOW VELOCITY MAPP | 1/1/2007 | $2.85 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 93350 | ECHOCARDIOGRAPHY, TRANSTHORACIC, | 1/1/2007 | $54.50 | 3 |
| P | 93501 | RIGHT HEART CATHETERIZATION | 1/1/2007 | $113.66 | 3 |
| P | 93505 | ENDOMYOCARDIAL BIOPSY | 1/1/2007 | $164.78 | 3 |
| P | 93508 | CATHETER PLACEMENT IN CORONARY A | 1/1/2007 | $167.64 | 3 |
| P | 93510 | LEFT HEART CATHETERIZATION RETRO | 1/1/2007 | $176.46 | 3 |
| P | 93511 | LEFT HEART CATHETERIZATION RETRO | 1/1/2007 | $202.93 | 3 |
| P | 93514 | LEFT HEART CATHETERIZATION BY LE | 1/1/2007 | $276.63 | 3 |
| P | 93524 | COMBINED TRANSSEPTAL AND RETROGR | 1/1/2007 | $275.07 | 3 |
| P | 93526 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $239.26 | 3 |
| P | 93527 | COMBINED RT HEART CATH & TRANSSE | 1/1/2007 | $288.05 | 3 |
| P | 93528 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $354.22 | 3 |
| P | 93529 | COMBINED RIGHT HEART CATH/LEFT H | 1/1/2007 | $192.03 | 3 |
| P | 93530 | RIGHT HEART CATHETERIZATION, FOR | 1/1/2007 | $167.38 | 3 |
| P | 93531 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $324.63 | 3 |
| P | 93532 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $387.69 | 3 |
| P | 93533 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $258.46 | 3 |
| P | 93536 | PERCUTANEOUS INSERTION OF INTRA- | 4/1/2002 | INVALID | N |
| P | 93555 | IMAGING SUPERVISION, INTERPRETAT | 1/1/2007 | $30.10 | 3 |
| P | 93556 | IMAGING SUPERVISION, INTERPRETAT | 1/1/2007 | $30.62 | 3 |
| P | 93561 | INDICATOR DILUTION STUDIES SUCH | 1/1/2007 | $17.65 | 3 |
| P | 93562 | INDICATOR DILUTION STUDIES SUCH | 1/1/2007 | $5.71 | 3 |
| P | 93571 | INTRAVASCULAR DOPPLER VELOCITY A | 1/1/2007 | $65.91 | 3 |
| P | 93572 | INTRAVASCULAR DOPPLER VELOCITY A | 1/1/2007 | $51.38 | 3 |
| P | 93600 | BUNDLE OF HIS RECORDING | 1/1/2007 | $80.70 | 3 |
| P | 93602 | INTRA-ATRIAL RECORDING | 1/1/2007 | $80.70 | 3 |
| P | 93603 | RIGHT VENTRICULAR RECORDING | 1/1/2007 | $80.70 | 3 |
| P | 93607 | LEFT VENTRICULAR RECORDING | 4/1/2002 | INVALID | N |
| P | 93609 | INTRAVENTRICULAR AND/OR INTRA-AT | 1/1/2007 | $189.44 | 3 |
| P | 93610 | INTRA-ATRIAL PACING | 1/1/2007 | $114.70 | 3 |
| P | 93612 | INTRAVENTRICULAR PACING | 1/1/2007 | $114.96 | 3 |
| P | 93615 | ESOPHAGEAL RECORDING OF ATRIAL E | 1/1/2007 | $33.48 | 3 |
| P | 93616 | ESOPHAGEAL RECORDING OF ATRIAL E | 1/1/2007 | $52.16 | 3 |
| P | 93618 | INDUCTION OF ARRHYTHMIA BY ELECT | 1/1/2007 | $161.41 | 3 |
| P | 93619 | COMPREHENSIVE ELECTROPHYSIOLOGIC | 1/1/2007 | $285.71 | 3 |
| P | 93620 | COMP ELECTROPHYSIOLOGIC EVAL W/R | 1/1/2007 | $446.86 | 3 |
| P | 93621 | COMP ELECTROPHYSIOLOGIC EVAL W/R | 1/1/2007 | $79.67 | 3 |
| P | 93622 | COMP ELECTROPHYSIOLOGIC EVAL W/R | 1/1/2007 | $117.55 | 3 |
| P | 93623 | PROGRAMMED STIMULATION AND PACIN | 1/1/2007 | $107.95 | 3 |
| P | 93624 | ELECTROPHYSIOLOGIC FOLLOW-UP STU | 1/1/2007 | $190.21 | 3 |
| P | 93631 | INTRA-OPERATIVE CARDIAC PACING A | 1/1/2007 | $294.27 | 3 |
| P | 93640 | ELECTROPHYSIOLOGIC EVALUATION OF | 1/1/2007 | $132.60 | 3 |
| P | 93641 | ELECTROPHYSIOLOGIC EVALUATION OF | 1/1/2007 | $224.47 | 3 |
| P | 93642 | ELECTROPHYSIOLOGIC EVALUATION OF | 1/1/2007 | $188.14 | 3 |
| P | 93660 | EVALUATION OF CARDIOVASCULAR FUN | 1/1/2007 | $69.81 | 3 |
| P | 93662 | INTRACARDIAC ECHOCARDIOGRAPHY DU | 1/1/2007 | $103.80 | 3 |
| P | 93701 | BIOIMPEDANCE, THORACIC, ELECTRIC | 1/1/2007 | $6.49 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 93724 | ELECTRONIC ANALYSIS OF ANTITACHY | 1/1/2007 | $180.35 | 3 |
| P | 93731 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $16.35 | 3 |
| P | 93732 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $33.74 | 3 |
| P | 93733 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $6.49 | 3 |
| P | 93734 | ELECTRONIC ANALYSIS OF SINGLE-CH | 7/1/1991 | $17.14 | 3 |
| P | 93735 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $26.99 | 3 |
| P | 93736 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $5.71 | 3 |
| P | 93737 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| P | 93738 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| P | 93740 | TEMPERATURE GRADIENT STUDIES | 1/1/2007 | $5.45 | 3 |
| P | 93741 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $29.58 | 3 |
| P | 93742 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $33.74 | 3 |
| P | 93743 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $37.89 | 3 |
| P | 93744 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $43.60 | 3 |
| P | 93745 | INITIAL SET-UP AND PROGRAMMING B | 1/1/2005 | $0.01 | 5 |
| P | 93760 | THERMOGRAM CEPHALIC | 10/1/2000 | $19.26 | 3 |
| P | 93762 | THERMOGRAM; PERIPHERAL | 10/1/2000 | $20.04 | 3 |
| P | 93770 | DETERMINATION OF VENOUS PRESSURE | 1/1/2007 | $5.71 | 3 |
| P | 93799 | UNLISTED CARDIOVASCULAR SERVICE | 4/5/1993 | $0.01 | 5 |
| P | 93875 | NON-INVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $8.04 | 3 |
| P | 93880 | DUPLEX SCAN OF EXTRACRANIAL ARTE | 1/1/2007 | $21.80 | 3 |
| P | 93882 | DUPLEX SCAN OF EXTRACRANIAL ARTE | 1/1/2007 | $15.05 | 3 |
| P | 93886 | TRANSCRANIAL DOPPLER STUDY OF TH | 1/1/2007 | $35.55 | 3 |
| P | 93888 | TRANSCRANIAL DOPPLER STUDY OF TH | 1/1/2007 | $23.36 | 3 |
| P | 93890 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| P | 93892 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| P | 93893 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| P | 93922 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $9.08 | 3 |
| P | 93923 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $16.61 | 3 |
| P | 93924 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $18.68 | 3 |
| P | 93925 | DUPLEX SCAN OF LOWER EXTREMITY A | 1/1/2007 | $21.28 | 3 |
| P | 93926 | DUPLEX SCAN OF LOWER EXTREMITY A | 1/1/2007 | $14.53 | 3 |
| P | 93930 | DUPLEX SCAN OF UPPER EXTREMITY A | 1/1/2007 | $17.13 | 3 |
| P | 93931 | DUPLEX SCAN OF UPPER EXTREMITY A | 1/1/2007 | $11.42 | 3 |
| P | 93965 | NON-INVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $12.72 | 3 |
| P | 93970 | DUPLEX SCAN OF EXTREMITY VEINS I | 1/1/2007 | $25.17 | 3 |
| P | 93971 | DUPLEX SCAN OF EXTREMITY VEINS I | 1/1/2007 | $16.35 | 3 |
| P | 93975 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $65.65 | 3 |
| P | 93976 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $43.08 | 3 |
| P | 93978 | DUPLEX SCAN OF AORTA, INFERIOR V | 1/1/2007 | $24.13 | 3 |
| P | 93979 | DUPLEX SCAN OF AORTA, INFERIOR V | 1/1/2007 | $16.09 | 3 |
| P | 93980 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $45.15 | 3 |
| P | 93981 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $15.57 | 3 |
| P | 93990 | DUPLEX SCAN OF HEMODIALYSIS ACCE | 1/1/2007 | $9.60 | 3 |
| P | 94010 | SPIROMETRY INCLUDING GRAPHIC REC | 1/1/2007 | $5.97 | 3 |
| P | 94060 | BRONCHOSPASM EVALUATION SPIROMET | 1/1/2007 | $10.64 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 94070 | PROLONGED POSTEXPOSURE EVALUATIO | 1/1/2007 | $21.02 | 3 |
| P | 94150 | VITAL CAPACITY TOTAL (SEPARATE P | 1/1/2007 | $2.85 | 3 |
| P | 94200 | MAXIMUM BREATHING CAPACITY MAXIM | 1/1/2007 | $3.89 | 3 |
| P | 94240 | FUNCTIONAL RESIDUAL CAPACITY OR | 1/1/2007 | $9.08 | 3 |
| P | 94250 | EXPIRED GAS COLLECTION QUANTITAT | 1/1/2007 | $3.89 | 3 |
| P | 94260 | THORACIC GAS VOLUME | 1/1/2007 | $4.67 | 3 |
| P | 94350 | DETERMINATION OF MALDISTRIBUTION | 1/1/2007 | $9.08 | 3 |
| P | 94360 | DETERMINATION OF RESISTANCE TO A | 1/1/2007 | $9.08 | 3 |
| P | 94370 | DETERMINATION OF AIRWAY CLOSING | 1/1/2007 | $9.08 | 3 |
| P | 94375 | RESPIRATORY FLOW VOLUME LOOP | 1/1/2007 | $10.64 | 3 |
| P | 94400 | BREATHING RESPONSE TO C02 (C02 R | 1/1/2007 | $14.27 | 3 |
| P | 94450 | BREATHING RESPONSE TO HYPOXIA (H | 1/1/2007 | $14.01 | 3 |
| P | 94620 | PULMONARY STRESS TESTING SIMPLE | 1/1/2007 | $22.58 | 3 |
| P | 94621 | PULMONARY STRESS TESTING; COMPLE | 1/1/2007 | $49.82 | 3 |
| P | 94680 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $9.08 | 3 |
| P | 94681 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $7.01 | 3 |
| P | 94690 | OXYGEN UPTASKE EXPIRED GAS ANALY | 1/1/2007 | $2.60 | 3 |
| P | 94720 | CARBON MONOXIDE DIFFUSING CAPACI | 1/1/2007 | $9.08 | 3 |
| P | 94725 | MEMBRANE DIFFUSION CAPACITY | 1/1/2007 | $9.08 | 3 |
| P | 94750 | PULMONARY COMPLIANCE STUDY (EG, | 1/1/2007 | $8.04 | 3 |
| P | 94770 | CARBON DIOXIDE EXPIRED GAS DETER | 1/1/2007 | $5.19 | 3 |
| P | 94772 | CIRCADIAN RESPIRATORY PATTERN RE | 10/1/2000 | $53.52 | 3 |
| P | 94799 | UNLISTED PULMONARY SERVICE OR PR | 6/1/1991 | $0.01 | 5 |
| P | 95805 | MULTIPLE SLEEP LATENCY TESTING ( | 1/1/2007 | $68.25 | 3 |
| P | 95806 | SLEEP STUDY, SIMULTANEOUS RECORD | 1/1/2007 | $59.17 | 3 |
| P | 95807 | SLEEP STUDY, 3 OR MORE PARAMETER | 1/1/2007 | $58.91 | 3 |
| P | 95808 | POLYSOMNOGRAPHY; SLEEP STAGING W | 1/1/2007 | $96.02 | 3 |
| P | 95810 | POLYSOMNOGRAPHY; SLEEP STAGING W | 1/1/2007 | $126.38 | 3 |
| P | 95811 | POLYSOMNOGRAPHY; OF SLEEP, ATTEN | 1/1/2007 | $135.98 | 3 |
| P | 95812 | ELECTROENCEPHALOGRAM (EEG) EXTEN | 1/1/2007 | $41.26 | 3 |
| P | 95813 | ELECTROENCEPHALOGRAM (EEG) EXTEN | 1/1/2007 | $65.39 | 3 |
| P | 95816 | ELECTROENCEPHALOGRAM (EEG); INCL | 1/1/2007 | $41.52 | 3 |
| P | 95819 | ELECTROENCEPHALOGRAM (EEG); INCL | 1/1/2007 | $41.52 | 3 |
| P | 95822 | ELECTROENCEPHALOGRAM (EEG); RECO | 1/1/2007 | $41.52 | 3 |
| P | 95824 | ELECTROENCEPHALOGRAM (EEG); CERE | 1/1/2007 | $28.29 | 3 |
| P | 95827 | ELECTROENCEPHALOGRAM (EEG); ALL | 1/1/2007 | $39.96 | 3 |
| P | 95829 | ELECTROCORTICOGRAM AT SURGERY (S | 1/1/2007 | $233.55 | 3 |
| P | 95858 | TENSILON TEST FOR MYASTHENIA GRA | 1/1/2006 | INVALID | N |
| P | 95860 | ELECTROMYOGRAPHY ONE EXTREMITY A | 1/1/2007 | $37.11 | 3 |
| P | 95861 | ELECTROMYOGRAPHY; TWO EXTREMITIE | 1/1/2007 | $59.43 | 3 |
| P | 95863 | ELECTROMYOGRAPHY; THREE EXTREMIT | 1/1/2007 | $71.62 | 3 |
| P | 95864 | ELECTROMYOGRAPHY; FOUR EXTREMITI | 1/1/2007 | $76.55 | 3 |
| P | 95865 | NEEDLE ELECTROMYOGRAPHY; LARYNX | 1/1/2007 | $62.80 | 3 |
| P | 95866 | NEEDLE ELECTROMYOGRAPHY; HEMIDIA | 1/1/2007 | $48.79 | 3 |
| P | 95867 | NEEDLE ELECTROMYOGRAPHY; CRANIAL | 1/1/2007 | $30.36 | 3 |
| P | 95868 | ELECTROMYOGRAPHY CRANIAL NERVE S | 1/1/2007 | $45.15 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | 95869 | NEEDLE ELECTROMYOGRAPHY; THORACI | 1/1/2007 | $14.27 | 3 |
| P | 95870 | NEEDLE ELECTROMYOGRAPHY; OTHER T | 1/1/2007 | $14.27 | 3 |
| P | 95872 | NEEDLE ELECTROMYOGRAPHY USING SI | 1/1/2007 | $57.35 | 3 |
| P | 95873 | ELECTRICAL STIMULATION FOR GUIDA | 1/1/2007 | $14.27 | 3 |
| P | 95874 | NEEDLE ELECTROMYOGRAPHY FOR GUID | 1/1/2007 | $14.53 | 3 |
| P | 95875 | ISCHEMIC LIMB EXERCISE TEST WITH | 1/1/2007 | $42.04 | 3 |
| P | 95900 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $16.09 | 3 |
| P | 95903 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $23.10 | 3 |
| P | 95904 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $13.23 | 3 |
| P | 95920 | INTRAOPERATIVE NEUROPHYSIOLOGY T | 1/1/2007 | $83.04 | 3 |
| P | 95921 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $32.96 | 3 |
| P | 95922 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $36.59 | 3 |
| P | 95923 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $34.51 | 3 |
| P | 95925 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $20.76 | 3 |
| P | 95926 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $20.76 | 3 |
| P | 95927 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $21.54 | 3 |
| P | 95930 | VISUAL EVOKED POTENTIAL (VEP) TE | 1/1/2007 | $13.49 | 3 |
| P | 95933 | ORBICULARIS OCULI (BLINK) REFLEX | 1/1/2007 | $22.58 | 3 |
| P | 95934 | H-REFLEX, AMPLITUDE AND LATENCY | 1/1/2007 | $19.46 | 3 |
| P | 95936 | H-REFLEX, AMPLITUDE AND LATENCY | 1/1/2007 | $21.28 | 3 |
| P | 95937 | NEUROMUSCULAR JUNCTION TESTING ( | 1/1/2007 | $25.95 | 3 |
| P | 95950 | MONITORING FOR IDENTIFICATION AN | 1/1/2007 | $57.87 | 3 |
| P | 95951 | MONITORING FOR IDENTIFICATION OF | 1/1/2007 | $230.18 | 3 |
| P | 95953 | MONITORING FOR LOCALIZATION OF C | 1/1/2007 | $117.81 | 3 |
| P | 95954 | PHARMACOLOGICAL OR PHYSICAL ACTI | 1/1/2007 | $93.94 | 3 |
| P | 95955 | ELECTROENCEPHALOGRAM (EEG) DURIN | 1/1/2007 | $36.85 | 3 |
| P | 95956 | MONITORING FOR LOCALIZATION OF C | 1/1/2007 | $117.81 | 3 |
| P | 95957 | DIGITAL ANALYSIS OF ELECTROENCEP | 1/1/2007 | $76.29 | 3 |
| P | 95958 | WADA ACTIVATION TEST FOR HEMISPH | 1/1/2007 | $160.89 | 3 |
| P | 95961 | FUNCTIONAL CORTICAL MAPPING BY S | 1/1/2007 | $123.78 | 3 |
| P | 95962 | FUNCTIONAL CORTICAL MAPPING BY S | 1/1/2007 | $127.67 | 3 |
| P | 95965 | MAGNETOENCEPHALOGRAPHY (MEG), RE | 1/1/2007 | $308.29 | 3 |
| P | 95966 | MAGNETOENCEPHALOGRAPHY (MEG), RE | 1/1/2007 | $152.85 | 3 |
| P | 95967 | MAGNETOENCEPHALOGRAPHY (MEG), RE | 1/1/2007 | $125.34 | 3 |
| P | 96020 | NEUROFUNCTIONAL TEST SEL AND ADM | 1/1/2007 | NC | 9 |
| P | 99056 | SVCS TYPICALLY PROVIDED IN THE O | 1/1/1992 | NC | 9 |
| P | 99311 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| P | A4642 | SUPPLY OF SATUMOMAB PENDETIDE, R | 1/1/2001 | NC | 9 |
| P | A4643 | SUPPLY OF ADDITIONAL HIGH DOSE C | 1/1/2006 | INVALID | N |
| P | A4644 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| P | A4645 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| P | A4646 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| P | A4647 | SUPPLY OF PARAMAGNETIC CONTRAST | 1/1/2006 | INVALID | N |
| P | G0030 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0031 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0032 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | G0033 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0034 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0035 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0036 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0037 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0038 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0039 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0040 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0041 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0042 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0043 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0044 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0045 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0046 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0047 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| P | G0050 | MEASUREMENT OF POST-VOIDING RESI | 7/1/2003 | INVALID | N |
| P | G0106 | COLORECTAL CANCER SCREENING; ALT | 1/1/2007 | $35.03 | 3 |
| P | G0120 | COLORECTAL CANCER SCREENING; ALT | 1/1/2007 | $35.03 | 3 |
| P | G0122 | COLORECTAL CANCER SCREENING; BAR | 1/1/2007 | $36.85 | 3 |
| P | G0125 | PET IMAGING REGIONAL OR WHOLE BO | 1/1/2006 | INVALID | N |
| P | G0126 | PET LUNG IMAGING OF SOLITARY PUL | 4/1/2002 | INVALID | N |
| P | G0130 | SINGLE ENERGY X-RAY ABSORPTIOMET | 1/1/2007 | $7.79 | 3 |
| P | G0131 | COMPUTERIZED TOMOGRAPHY BONE MIN | 7/1/2003 | INVALID | N |
| P | G0132 | COMPUTERIZED TOMOGRAPHY BONE MIN | 7/1/2003 | INVALID | N |
| P | G0173 | LINEAR ACCELERATOR BASED STEREOT | 1/1/2001 | NC | 9 |
| P | G0174 | INTENSITY MODULATED RADIATION TH | 4/1/2002 | INVALID | N |
| P | G0188 | FULL LENGTH RADIOGRAPHY OF LOWER | 4/1/2002 | INVALID | N |
| P | G0202 | SCREENING MAMMOGRAPHY, PRODUCING | 1/1/2007 | $24.91 | 3 |
| P | G0204 | DIAGNOSTIC MAMMOGRAPHY, PRODUCIN | 1/1/2007 | $30.88 | 3 |
| P | G0206 | DIAGNOSTIC MAMMOGRAPHY, PRODUCIN | 1/1/2007 | $24.91 | 3 |
| P | G0210 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| P | G0211 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| P | G0212 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| P | G0213 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| P | G0214 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| P | G0215 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| P | G0216 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| P | G0217 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| P | G0218 | PET IMAGING WHOLD BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| P | G0219 | PET IMAGING WHOLE BODY; MELANOMA | 6/20/2005 | NC | 9 |
| P | G0220 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| P | G0221 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| P | G0222 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| P | G0223 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |
| P | G0224 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |
| P | G0225 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| P | G0226 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| P | G0227 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| P | G0228 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| P | G0229 | PET IMAGING; METABOLIC BRAIN IMA | 1/1/2006 | INVALID | N |
| P | G0230 | PET IMAGING; METABOLIC ASSESS FO | 1/1/2006 | INVALID | N |
| P | G0231 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| P | G0232 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| P | G0233 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| P | G0234 | PET, REGIONAL OR WHOLE BODY, FOR | 1/1/2006 | INVALID | N |
| P | G0235 | PET IMAGING, ANY SITE, NOT OTHER | 4/1/2005 | NC | 9 |
| P | G0236 | DIGITIZATION OF FILM RADIOGRAPHI | 4/1/2004 | INVALID | N |
| P | G0242 | MULTI-SOURCE PHOTON STEREOTACTIC | 1/1/2006 | INVALID | N |
| P | G0243 | MULTI-SOURCE PHOTON STEREOTACTIC | 1/1/2007 | INVALID | N |
| P | G0252 | PET IMAGING, FULL AND PARTIAL-RI | 1/1/2003 | NC | 9 |
| P | G0253 | PET IMAGING FOR BREAST CANCER, F | 1/1/2006 | INVALID | N |
| P | G0254 | PET IMAGING FOR BREAST CANCER, F | 1/1/2006 | INVALID | N |
| P | G0296 | PET IMAGING, FULL AND PARTIAL RI | 1/1/2006 | INVALID | N |
| P | G0336 | PET IMAGING, BRAIN IMAGING FOR T | 4/1/2005 | INVALID | N |
| P | G0365 | VESSEL MAPPING OF VESSELS FOR HE | 1/1/2007 | $9.34 | 3 |
| P | P2028 | CEPHALIN FLOCULATION, BLOOD | 4/1/1988 | NC | 9 |
| P | P2029 | CONGO RED, BLOOD | 12/1/1984 | NC | 9 |
| P | P2031 | HAIR ANALYSIS (EXCLUDING ARSENIC | 12/1/1984 | NC | 9 |
| P | P2033 | THYMOL TURBIDITY, BLOOD | 12/1/1984 | NC | 9 |
| P | P2038 | MUCOPROTEIN, BLOOD (SEROMUCOID) | 1/1/2004 | NC | 9 |
| P | P7001 | CULTURE, BACTERIAL, URINE; QUANT | 2/15/2000 | NC | 9 |
| P | P9010 | BLOOD (WHOLE) FOR TRANSFUSION PE | 1/1/1988 | NC | 9 |
| P | P9011 | BLOOD (SPLIT UNIT) SPECIFY AMOUN | 1/1/1988 | NC | 9 |
| P | P9012 | CRYOPRECIPITATE EACH UNIT | 1/1/1988 | NC | 9 |
| P | P9016 | RED BLOOD CELLS, LEUKOCYTES REDU | 1/1/1988 | NC | 9 |
| P | P9017 | FRESH FROZEN PLASMA (SINGLE DONO | 1/1/1988 | NC | 9 |
| P | P9019 | PLATELETS, EACH UNIT | 10/1/2004 | NC | 9 |
| P | P9020 | PLATELET RICH PLASMA EACH UNIT | 1/1/1988 | NC | 9 |
| P | P9021 | RED BLOOD CELLS EACH UNIT | 1/1/1988 | NC | 9 |
| P | P9022 | RED BLOOD CELLS, WASHED, EACH UN | 1/1/1988 | NC | 9 |
| P | Q0035 | CARDIOKYMOGRAPHY | 1/1/2004 | NC | 9 |
| P | Q0091 | SCREENING PAP SMEAR; OBTAINING, | 1/1/1992 | NC | 9 |
| P | Q0092 | SET-UP PORTABLE X-RAY EQUIPMENT | 4/20/1992 | NC | 9 |
| P | Q0114 | FERN TEST | 8/16/1993 | NC | 9 |
| P | Q0115 | POST-COITAL DIRECT, QUALITATIVE | 8/16/1993 | NC | 9 |
| P | Q9942 | INJECTION, IMMUNE GLOBULIN, INTR | 4/1/2005 | $0.01 | 5 |
| P | S0820 | COMPUTERIZED CORNEAL TOPOGRAPHY, | 8/1/2004 | $6.75 | 3 |
| P | S8055 | ULTRASOUND GUIDANCE FOR MULTIFET | 4/1/2002 | $0.01 | 5 |
| S | 11200 | REMOVAL OF SKIN TAGS, MULTIPLE F | 1/1/1996 | NC | 9 |
| S | 29105 | APPLICATION OF LONG ARM SPLINT ( | 1/1/2007 | $57.61 | 3 |
| S | 29125 | APPLICATION OF SHORT ARM SPLINT | 1/1/2007 | $43.60 | 3 |
| S | 29126 | APPLICATION OF SHORT ARM SPLINT | 1/1/2007 | $53.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | 29130 | APPLICATION OF FINGER SPLINT STA | 1/1/2007 | $26.73 | 3 |
| S | 29131 | APPLICATION OF FINGER SPLINT; DY | 1/1/2007 | $34.25 | 3 |
| S | 36415 | COLLECTION OF VENOUS BLOOD BY VE | 2/13/2003 | $3.00 | 3 |
| S | 36416 | COLLECTION OF CAPILLARY BLOOD SP | 1/1/2003 | $3.00 | 3 |
| S | 57170 | DIAPHRAGM OR CERVICAL CAP FITTIN | 1/1/2007 | $64.88 | 3 |
| S | 59400 | ROUTINE OBSTETRIC CARE INCLUDING | 1/1/2007 | $1,702.16 | 3 |
| S | 59409 | VAGINAL DELIVERY ONLY (WITH OR W | 1/1/2007 | $853.99 | 3 |
| S | 59410 | VAGINAL DELIVERY ONLY (W/WO EPIS | 1/1/2007 | $954.09 | 3 |
| S | 59412 | EXTERNAL CEPHALIC VERSION, WITH | 1/1/2007 | $113.30 | 3 |
| S | 59414 | DELIVERY OF PLACENTA (SEPARATE P | 1/1/2007 | $102.04 | 3 |
| S | 59425 | ANTEPARTUM CARE ONLY; 4-6 VISITS | 1/1/2007 | $393.82 | 3 |
| S | 59426 | ANTEPARTUM CARE ONLY; 7 OR MORE | 1/1/2007 | $690.64 | 3 |
| S | 59430 | POSTPARTUM CARE ONLY (SEPARATE P | 1/1/2007 | $149.77 | 3 |
| S | 59610 | ROUTINE OBSTETRIC CARE INCLUDING | 1/1/2007 | $1,797.99 | 3 |
| S | 59612 | VAGINAL DELIVERY ONLY, AFTER PRE | 1/1/2007 | $957.97 | 3 |
| S | 59614 | VAGINAL DELIVERY ONLY, AFTER PRE | 1/1/2007 | $1,053.42 | 3 |
| S | 59899 | UNLISTED PROCEDURE MATERNITY CAR | 1/1/2003 | $0.01 | 5 |
| S | 69090 | EAR PIERCING | 1/1/1996 | NC | 9 |
| S | 70140 | RADIOLOGIC EXAMINATION, FACIAL B | 1/1/2007 | $23.87 | 3 |
| S | 70150 | RADIOLOGIC EXAMINATION, FACIAL B | 1/1/2007 | $30.62 | 3 |
| S | 70250 | RADIOLOGIC EXAMINATION, SKULL; L | 1/1/2007 | $25.69 | 3 |
| S | 70260 | RADIOLOGIC EXAMINATION, SKULL; C | 1/1/2007 | $36.85 | 3 |
| S | 70328 | RADIOLOGIC EXAMINATION, TEMPOROM | 1/1/2007 | $19.72 | 3 |
| S | 70330 | RADIOLOGIC EXAMINATION, TEMPOROM | 1/1/2007 | $31.66 | 3 |
| S | 71010 | RADIOLOGIC EXAMINATION, CHEST; S | 1/1/2007 | $19.20 | 3 |
| S | 71020 | RADIOLOGIC EXAMINATION, CHEST, T | 1/1/2007 | $24.91 | 3 |
| S | 71030 | RADIOLOGIC EXAMINATION, CHEST, C | 1/1/2007 | $32.44 | 3 |
| S | 71100 | RADIOLOGIC EXAMINATION, RIBS, UN | 1/1/2007 | $23.61 | 3 |
| S | 71101 | RADIOLOGIC EXAMINATION, RIBS, UN | 1/1/2007 | $28.03 | 3 |
| S | 71110 | RADIOLOGIC EXAMINATION, RIBS, BI | 1/1/2007 | $31.14 | 3 |
| S | 71120 | RADIOLOGIC EXAMINATION; STERNUM, | 1/1/2007 | $25.17 | 3 |
| S | 71130 | RADIOLOGIC EXAMINATION; STERNOCL | 1/1/2007 | $27.25 | 3 |
| S | 72010 | RADIOLOGIC EXAMINATION, SPINE, E | 1/1/2007 | $44.12 | 3 |
| S | 72040 | RADIOLOGIC EXAMINATION, SPINE, C | 1/1/2007 | $24.39 | 3 |
| S | 72050 | RADIOLOGIC EXAMINATION, SPINE, C | 1/1/2007 | $35.55 | 3 |
| S | 72052 | RADIOLOGIC EXAMINATION, SPINE, C | 1/1/2007 | $43.86 | 3 |
| S | 72070 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $25.69 | 3 |
| S | 72072 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $28.03 | 3 |
| S | 72080 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $26.21 | 3 |
| S | 72090 | RADIOLOGIC EXAMINATION, SPINE; S | 1/1/2007 | $28.29 | 3 |
| S | 72100 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $26.21 | 3 |
| S | 72110 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $36.07 | 3 |
| S | 72114 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $45.41 | 3 |
| S | 72120 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $32.44 | 3 |
| S | 72170 | RADIOLOGIC EXAMINATION, PELVIS; | 1/1/2007 | $20.24 | 3 |
| S | 72202 | RADIOLOGIC EXAMINATION, SACROILI | 1/1/2007 | $23.87 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | 72220 | RADIOLOGIC EXAMINATION, SACRUM A | 1/1/2007 | $22.06 | 3 |
| S | 73010 | RADIOLOGIC EXAMINATION; SCAPULA, | 1/1/2007 | $20.24 | 3 |
| S | 73030 | RADIOLOGIC EXAMINATION, SHOULDER | 10/1/2005 | $22.32 | 3 |
| S | 73060 | RADIOLOGIC EXAMINATION; HUMERUS, | 1/1/2007 | $22.06 | 3 |
| S | 73070 | RADIOLOGIC EXAMINATION, ELBOW; T | 1/1/2007 | $19.46 | 3 |
| S | 73080 | RADIOLOGIC EXAMINATION, ELBOW; C | 1/1/2007 | $22.06 | 3 |
| S | 73090 | RADIOLOGIC EXAMINATION; FOREARM, | 1/1/2007 | $19.72 | 3 |
| S | 73100 | RADIOLOGIC EXAMINATION, WRIST; T | 1/1/2007 | $18.94 | 3 |
| S | 73110 | RADIOLOGIC EXAMINATION, WRIST; C | 1/1/2007 | $20.50 | 3 |
| S | 73120 | RADIOLOGIC EXAMINATION, HAND; TW | 1/1/2007 | $18.94 | 3 |
| S | 73130 | RADIOLOGIC EXAMINATION, HAND; MI | 1/1/2007 | $20.50 | 3 |
| S | 73140 | RADIOLOGIC EXAMINATION, FINGER O | 1/1/2007 | $16.09 | 3 |
| S | 73510 | RADIOLOGIC EXAMINATION, HIP; COM | 1/1/2007 | $23.36 | 3 |
| S | 73520 | RADIOLOGIC EXAM, HIPS, BILATERAL | 1/1/2007 | $27.77 | 3 |
| S | 73550 | RADIOLOGIC EXAMINATION, FEMUR, T | 1/1/2007 | $22.06 | 3 |
| S | 73560 | RADIOLOGIC EXAMINATION, KNEE; AN | 1/1/2007 | $20.24 | 3 |
| S | 73562 | RADIOLOGIC EXAMINATION, KNEE; AN | 1/1/2007 | $22.32 | 3 |
| S | 73600 | RADIOLOGIC EXAMINATION, ANKLE; T | 1/1/2007 | $18.94 | 3 |
| S | 73610 | RADIOLOGIC EXAMINATION, ANKLE; C | 1/1/2007 | $20.50 | 3 |
| S | 73620 | RADIOLOGIC EXAMINATION, FOOT; TW | 1/1/2007 | $18.94 | 3 |
| S | 73630 | RADIOLOGIC EXAMINATION, FOOT; CO | 1/1/2007 | $20.50 | 3 |
| S | 73650 | RADIOLOGIC EXAMINATION; CALCANEU | 1/1/2007 | $18.42 | 3 |
| S | 74000 | RADIOLOGIC EXAMINATION, ABDOMEN; | 1/1/2007 | $20.50 | 3 |
| S | 74010 | RADILOGIC EXAMINATION, ABDOMEN; | 1/1/2007 | $24.13 | 3 |
| S | 74210 | RADIOLOGIC EXAMINATION; PHARYNX | 1/1/2007 | $45.41 | 3 |
| S | 74220 | RADIOLOGIC EXAMINATION; ESOPHAGU | 1/1/2007 | $48.79 | 3 |
| S | 74270 | RADIOLOGIC EXAMINATION, COLON; B | 1/1/2007 | $71.62 | 3 |
| S | 81000 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $3.23 | 3 |
| S | 81002 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $2.62 | 3 |
| S | 81003 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $2.29 | 3 |
| S | 81005 | URINALYSIS; QUALITATIVE OR SEMIQ | 11/1/2001 | $2.22 | 3 |
| S | 81007 | URINALYSIS; BACTERIURIA SCREEN, | 11/1/2001 | $2.63 | 3 |
| S | 81015 | URINALYSIS; MICROSCOPIC ONLY | 11/1/2001 | $3.11 | 3 |
| S | 81025 | URINE PREGNANCY TEST, BY VISUAL | 11/1/2001 | $6.47 | 3 |
| S | 82270 | BLOOD, OCCULT, BY PEROXIDASE ACT | 11/1/2001 | $3.32 | 3 |
| S | 82947 | GLUCOSE; QUANTITATIVE, BLOOD (EX | 11/1/2001 | $4.01 | 3 |
| S | 82948 | GLUCOSE; BLOOD, REAGENT STRIP | 11/1/2001 | $3.23 | 3 |
| S | 83898 | MOLECULAR DIAGNOSTICS; AMPLIFICA | 11/1/2001 | $17.15 | 3 |
| S | 84520 | UREA NITROGEN; QUANTITATIVE | 11/1/2001 | $4.03 | 3 |
| S | 84525 | UREA NITROGEN; SEMIQUANTITATIVE | 11/1/2001 | $3.23 | 3 |
| S | 85009 | BLOOD COUNT; MANUAL DIFFERENTIAL | 11/1/2001 | $3.80 | 3 |
| S | 85018 | BLOOD COUNT; HEMOGLOBIN (HGB) | 11/1/2001 | $2.42 | 3 |
| S | 85022 | BLOOD COUNT HEMOGRAM AUTOMATED A | 7/1/2003 | INVALID | N |
| S | 85031 | BLOOD COUNT; HEMOGRAM, MANUAL, C | 7/1/2003 | INVALID | N |
| S | 85041 | BLOOD COUNT; RED BLOOD CELL (RBC | 11/1/2001 | $3.08 | 3 |
| S | 85048 | BLOOD COUNT; WHITE BLOOD CELL (W | 11/1/2001 | $2.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | 85651 | SEDIMENTATION RATE, ERYTHROCYTE; | 11/1/2001 | $3.63 | 3 |
| S | 86674 | ANTIBODY; GIARDIA LAMBLIA | 11/1/2001 | $15.05 | 3 |
| S | 90385 | RHO(D) IMMUNE GLOBULIN (RHIG), H | 12/1/2004 | $53.90 | 3 |
| S | 90471 | IMMUNIZATION ADMIN; ONE VACCINE | 1/1/2007 | $12.72 | 3 |
| S | 90472 | IMMUNIZATION ADMIN; EACH ADDITIO | 1/1/2007 | $7.53 | 3 |
| S | 90476 | ADENOVIRUS VACCINE, TYPE 4, LIVE | 10/1/2005 | $0.01 | 5 |
| S | 90477 | ADENOVIRUS VACCINE, TYPE 7, LIVE | 10/1/2005 | $0.01 | 5 |
| S | 90581 | ANTHRAX VACCINE, FOR SUBCUTANEOU | 10/1/2005 | $0.01 | 5 |
| S | 90585 | BACILLUS CALMETTE-GUERIN VACCINE | 5/1/2005 | $176.15 | 3 |
| S | 90586 | BACILLUS CALMETTE-GUERIN VACCINE | 5/1/2005 | $191.50 | 3 |
| S | 90632 | HEPATITIS A VACCINE, ADULT DOSAG | 5/9/2005 | $81.79 | 3 |
| S | 90634 | HEPATITIS A VACCINE, PEDIATRIC/A | 10/1/2004 | NC | 9 |
| S | 90636 | HEPATITIS A AND HEPATITIS B VACC | 5/9/2005 | $98.90 | 3 |
| S | 90645 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $29.02 | 3 |
| S | 90646 | HEMOPHILUS INFLUENZA B VACCINE ( | 12/1/2005 | NC | 9 |
| S | 90647 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $29.02 | 3 |
| S | 90648 | HEMOPHILUS INFLUENZA B VACCINE ( | 5/9/2005 | $27.04 | 3 |
| S | 90658 | INFLUENZA VIRUS VACCINE, SPLIT V | 10/1/2005 | $13.19 | 3 |
| S | 90659 | INFLUENZA VIRUS VACCINE, WHOLE V | 4/1/2004 | INVALID | N |
| S | 90665 | LYME DISEASE VACCINE, ADULT DOSA | 5/9/2005 | NC | 9 |
| S | 90675 | RABIES VACCINE, FOR INTRAMUSCULA | 2/27/2006 | $195.94 | 3 |
| S | 90676 | RABIES VACCINE, FOR INTRADERMAL | 5/16/2005 | $0.01 | 5 |
| S | 90680 | ROTAVIRUS VACCINE, PENTAVALENT, | 10/1/2004 | NC | 9 |
| S | 90690 | TYPHOID VACCINE, LIVE, ORAL | 1/1/1999 | NC | 9 |
| S | 90691 | TYPHOID VACCINE, VI CAPSULAR POL | 1/1/1999 | NC | 9 |
| S | 90692 | TYPHOID VACCINE, HEAT AND PHENOL | 1/1/1999 | NC | 9 |
| S | 90693 | TYPHOID VACCINE, ACETONE-KILLED, | 1/1/1999 | NC | 9 |
| S | 90703 | IMMUNIZATION ACTIVE; TETANUS TOX | 4/24/2006 | $23.06 | 3 |
| S | 90704 | IMMUNIZATION, ACTIVE; MUMPS VIRU | 2/20/2006 | $23.87 | 3 |
| S | 90705 | IMMUNIZATION, ACTIVE; MEASLES VI | 2/20/2006 | $20.56 | 3 |
| S | 90706 | IMMUNIZATION, ACTIVE; RUBELLA VI | 2/20/2006 | $20.55 | 3 |
| S | 90707 | IMMUNIZATION ACTIVE; MEASLES, MU | 2/20/2006 | $58.51 | 3 |
| S | 90708 | IMMUNIZATION, ACTIVE; MEASLES & | 10/1/2001 | $23.90 | 3 |
| S | 90709 | IMMUNIZATION, ACTIVE; RUBELLA & | 7/1/2003 | INVALID | N |
| S | 90710 | IMMUNIZATION, ACTIVE; MEASLES, M | 8/1/2005 | NC | 9 |
| S | 90712 | IMMUNIZATION ACTIVE; POLIOVIRUS | 5/1/2000 | NC | 9 |
| S | 90713 | POLIOVIRUS VACCINE, INACTIVATED, | 2/20/2006 | $27.06 | 3 |
| S | 90716 | IMMUNIZATION, ACTIVE; VARICELLA | 2/20/2006 | $95.77 | 3 |
| S | 90718 | TETANUS AND DIPHTHERIA TOXOIDS ( | 2/27/2006 | $22.50 | 3 |
| S | 90719 | IMMUNIZATION, ACTIVE; DIPHTHERIA | 10/1/2001 | $8.32 | 3 |
| S | 90720 | IMMUNIZATION, ACTIVE; DIPHTHERIA | 2/20/2006 | $35.42 | 3 |
| S | 90727 | PLAGUE VACCINE | 5/9/2005 | NC | 9 |
| S | 90732 | PNEUMOCOCCAL POLYSACCHARIDE VACC | 10/1/2001 | $16.54 | 3 |
| S | 90733 | IMMUNIZATION ACTIVE; MENINGOCOCC | 8/1/2005 | $107.63 | 3 |
| S | 90735 | IMMUNIZATION ACTIVE; ENCEPHALITI | 2/1/2001 | NC | 9 |
| S | 90740 | HEPATITIS B VACCINE, DIALYSIS OR | 5/9/2005 | $207.36 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | 90746 | HEPATITIS B VACCINE, ADULT DOSAG | 5/9/2005 | $72.76 | 3 |
| S | 90747 | HEPATITIS B VACCINE, DIALYSIS OR | 5/9/2005 | $145.52 | 3 |
| S | 90749 | UNLISTED IMMUNIZATION PROCEDURE | 10/1/2001 | $60.00 | 3 |
| S | 90782 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| S | 90801 | PSYCHIATRIC DIAGNOSTIC INTERVIEW | 3/1/2003 | $131.44 | 3 |
| S | 90802 | INTERACTIVE PSYCHIATRIC DIAGNOST | 10/1/2003 | $131.44 | 3 |
| S | 90804 | INDIVIDUAL THERAPY, INSIGHT, 20- | 10/1/2003 | $65.72 | 3 |
| S | 90805 | INDIVIDUAL THERAPY, INSIGHT, WIT | 10/1/2003 | $65.72 | 3 |
| S | 90806 | INDIVIDUAL THERAPY, INSIGHT, 45- | 10/1/2003 | $98.58 | 3 |
| S | 90807 | INDIVIDUAL THERAPY, INSIGHT, WIT | 10/1/2003 | $98.58 | 3 |
| S | 90808 | INDIVIDUAL THERAPY, INSIGHT, 75- | 10/1/2003 | $164.30 | 3 |
| S | 90809 | INDIVIDUAL THERAPY,INSIGHT, WITH | 10/1/2003 | $164.30 | 3 |
| S | 90810 | INDIVIDUAL THERAPY, INTERACTIVE, | 10/1/2003 | $65.72 | 3 |
| S | 90811 | INDIVIDUAL THERAPY, INTERACTIVE, | 10/1/2003 | $65.72 | 3 |
| S | 90812 | INDIVIDUAL THERAPY, INTERACTIVE, | 10/1/2003 | $98.58 | 3 |
| S | 90813 | INDIVIDUAL THERAPY, INTERACTIVE, | 10/1/2003 | $98.58 | 3 |
| S | 90814 | INDIVIDUAL THERAPY, INTERACTIVE, | 10/1/2003 | $164.30 | 3 |
| S | 90815 | INDIVIDUAL THERAPY, INTERACTIVE, | 10/1/2003 | $164.30 | 3 |
| S | 90816 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 12/1/2003 | $65.72 | 3 |
| S | 90817 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 12/1/2003 | $65.72 | 3 |
| S | 90818 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 12/1/2003 | $98.58 | 3 |
| S | 90819 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 12/1/2003 | $98.58 | 3 |
| S | 90821 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 12/1/2003 | $164.30 | 3 |
| S | 90822 | INDIVIDUAL PSYCHOTHERAPY, INSIGH | 12/1/2003 | $164.30 | 3 |
| S | 90823 | INDIVIDUAL PSYCHOTHERPAY, INTERA | 12/1/2003 | $65.72 | 3 |
| S | 90824 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 12/1/2003 | $65.72 | 3 |
| S | 90826 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 12/1/2003 | $98.58 | 3 |
| S | 90827 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 12/1/2003 | $98.58 | 3 |
| S | 90828 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 12/1/2003 | $164.30 | 3 |
| S | 90829 | INDIVIDUAL PSYCHOTHERAPY, INTERA | 12/1/2003 | $164.30 | 3 |
| S | 90846 | FAMILY THERAPY WITHOUT PATIENT P | 10/1/2003 | $133.50 | 3 |
| S | 90847 | FAMILY THERAPY, WITH PATIENT PRE | 10/1/2003 | $133.50 | 3 |
| S | 90849 | MULTI-FAMILY GROUP THERAPY | 10/1/2003 | $44.52 | 3 |
| S | 90853 | GROUP THERAPY | 10/1/2003 | $44.52 | 3 |
| S | 90857 | INTERACTIVE GROUP THERAPY | 10/1/2003 | $44.52 | 3 |
| S | 90862 | PHARMACOLOGIC MGMNT, INCL PRESCR | 10/1/2003 | $65.72 | 1 |
| S | 90871 | ELECTROCONVULSIVE THERAPY (INCLU | 1/1/2006 | INVALID | N |
| S | 90882 | ENVIRONMENTAL INTERVENTION WITH | 10/1/2003 | $89.00 | 3 |
| S | 90887 | INTERPRETATION OR EXPLANATION OF | 10/1/2003 | $89.00 | 3 |
| S | 90901 | BIOFEEDBACK TRAINING BY ANY MODA | 1/1/2007 | $28.03 | 3 |
| S | 92326 | REPLACEMENT OF CONTACT LENS (EAC | 1/1/2007 | $43.86 | 3 |
| S | 92335 | PRESCRIPTION OF OCULAR PROSTHESI | 1/1/2006 | INVALID | N |
| S | 92340 | FITTING OF SPECTACLES, EXCEPT FO | 2/1/2001 | $25.00 | 3 |
| S | 92341 | FITTING OF SPECTACLES, EXCEPT FO | 2/1/2001 | $25.00 | 3 |
| S | 92342 | FITTING OF SPECTACLES, EXCEPT FO | 2/1/2001 | $25.00 | 3 |
| S | 92352 | FITTING OF SPECTACLE PROSTHESIS | 2/1/2001 | $25.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | 92353 | FITTING OF SPECTACLE PROSTHESIS | 2/1/2001 | $25.00 | 3 |
| S | 92354 | FITTING OF SPECTACLE MOUNTED LOW | 5/15/1990 | NC | 9 |
| S | 92355 | FITTING OF SPECTACLE MOUNTED LOW | 5/15/1990 | NC | 9 |
| S | 92358 | PROSTHESIS SERVICE FOR APHAKIA T | 1/1/2007 | $26.47 | 3 |
| S | 92370 | REPAIR AND REFITTING SPECTACLES | 1/1/2007 | $23.10 | 3 |
| S | 92371 | REPAIR AND REFITTING SPECTACLES; | 1/1/2007 | $16.61 | 3 |
| S | 92390 | SUPPLY OF SPECTACLES EXCEPT PROS | 1/1/2006 | INVALID | N |
| S | 92392 | SUPPLY OF LOW VISION AIDS; (A LO | 1/1/2006 | INVALID | N |
| S | 92395 | SUPPLY OF PERMANENT PROSTHESIS F | 1/1/2006 | INVALID | N |
| S | 95831 | MUSCLE TESTING OF MANUAL (SEP PR | 1/1/2007 | $19.46 | 3 |
| S | 95832 | MUSCLE TESTING MANUAL (SEP PROC) | 1/1/2007 | $16.61 | 3 |
| S | 95833 | MUSCLE TESTING MANUAL (SEP PROC) | 1/1/2007 | $27.77 | 3 |
| S | 95834 | MUSCLE TESTING MANUAL (SEP PROC) | 1/1/2007 | $32.70 | 3 |
| S | 95851 | RANGE OF MOTION MEASUREMENTS AND | 1/1/2007 | $13.75 | 3 |
| S | 95852 | RANGE OF MOTION MEASUREMENTS AND | 1/1/2007 | $9.86 | 3 |
| S | 96100 | PSYCHOLOGICAL TESTING WITH INTER | 1/1/2006 | INVALID | N |
| S | 96101 | PSYCHOLOGICAL TESTING, PER HOUR | 1/1/2006 | $89.00 | 3 |
| S | 96111 | DEVELOPMENTAL TESTING; EXTENDED | 1/1/2007 | $99.39 | 3 |
| S | 96115 | NEUROBEHAVIORAL STATUS EXAM WITH | 1/1/2006 | INVALID | N |
| S | 96117 | NEUROPSYCHO TESTING BATTERY (HAL | 1/1/2006 | INVALID | N |
| S | 96151 | HEALTH AND BEHAVIOR ASSESSMENT; | 10/1/2006 | $8.25 | 3 |
| S | 97001 | PHYSICAL THERAPY EVALUATION | 1/1/2007 | $51.90 | 3 |
| S | 97002 | PHYSICAL THERAPY RE-EVALUATION | 1/1/2007 | $27.51 | 3 |
| S | 97003 | OCCUPATIONAL THERAPY EVALUATION | 1/1/2007 | $55.53 | 3 |
| S | 97004 | OCCUPATIONAL THERAPY RE-EVALUATI | 1/1/2007 | $33.48 | 3 |
| S | 97010 | APPLICATION OF A MODALITY TO ONE | 10/1/2004 | NC | 9 |
| S | 97012 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $10.12 | 3 |
| S | 97014 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $9.86 | 3 |
| S | 97016 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| S | 97018 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| S | 97020 | APPLICATION OF A MODALITY TO ONE | 1/1/2006 | INVALID | N |
| S | 97022 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $10.12 | 3 |
| S | 97024 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| S | 97026 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| S | 97028 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| S | 97032 | APPLICATION OF MODALITY TO ONE O | 1/1/2007 | $10.90 | 3 |
| S | 97033 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| S | 97034 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| S | 97035 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| S | 97036 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $15.83 | 3 |
| S | 97039 | UNLISTED MODALITY (SPECIFY TYPE | 4/1/2005 | NC | 9 |
| S | 97110 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.20 | 3 |
| S | 97112 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.98 | 3 |
| S | 97113 | THERAPEUTIC PROCEDURE ONE OR MOR | 1/1/2007 | $21.80 | 3 |
| S | 97116 | THERAPEUTIC PROCEDURE, ONE OR MO | 1/1/2007 | $16.87 | 3 |
| S | 97124 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $15.31 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | 97139 | THERAPEUTIC PROC, ONE OR MORE AR | 4/1/2005 | NC | 9 |
| S | 97140 | MANUAL THERAPY TECHNIQUES, ONE O | 1/1/2007 | $17.91 | 3 |
| S | 97150 | THERAPEUTIC PROCEDURE(S), GROUP | 1/1/2007 | $11.94 | 3 |
| S | 97504 | ORTHOTIC(S) FITTING & TRAINING, | 1/1/2006 | INVALID | N |
| S | 97520 | PROSTHETIC TRAINING, UPPER AND/O | 1/1/2006 | INVALID | N |
| S | 97530 | THERAPEUTIC ACTIVITIES, DIRECT P | 1/1/2007 | $19.98 | 3 |
| S | 97532 | DEVELOPMENT OF COGNITIVE SKILLS | 1/1/2001 | NC | 9 |
| S | 97533 | SENSORY INTEGRATIVE TECHNIQUES T | 1/1/2001 | NC | 9 |
| S | 97535 | SELF CARE/HOME MANAGEMENT TRAINI | 1/1/2007 | $20.50 | 3 |
| S | 97537 | COMMUNITY/WORK REINTEGRATION TRA | 1/1/2007 | $18.68 | 3 |
| S | 97542 | WHEELCHAIR MANAGEMENT (EG, ASSES | 1/1/2007 | $19.20 | 3 |
| S | 97597 | REMOVAL OF DEVITALIZED TISSUE FR | 1/1/2007 | $33.48 | 3 |
| S | 97598 | REMOVAL OF DEVITALIZED TISSUE FR | 1/1/2007 | $42.56 | 3 |
| S | 97601 | REMOVAL OF DEVITALIZED TISSUE FR | 1/1/2005 | INVALID | N |
| S | 97602 | REMOVAL OF DEVITALIZED TISSUE FR | 10/1/2004 | $23.36 | 3 |
| S | 97703 | CHECKOUT FOR ORTHOTIC/PROSTHETIC | 1/1/2006 | INVALID | N |
| S | 97750 | PHYSICAL PERFORMANCE TEST OR MEA | 1/1/2007 | $20.50 | 3 |
| S | 97755 | ASSISTIVE TECHNOLOGY ASSESSMENT, | 1/1/2007 | $23.87 | 3 |
| S | 97760 | ORTHOTIC(S) MANAGEMENT AND TRAIN | 1/1/2006 | $21.28 | 3 |
| S | 97761 | PROSTHETIC TRAINING, UPPER AND/O | 1/1/2006 | $19.46 | 3 |
| S | 97762 | CHECKOUT FOR ORTHOTIC/PROSTHETIC | 1/1/2006 | $17.91 | 3 |
| S | 97780 | ACUPUNCTURE, ONE OR MORE NEEDLES | 1/1/2005 | INVALID | N |
| S | 97781 | ACUPUNCTURE, ONE OR MORE NEEDLES | 1/1/2005 | INVALID | N |
| S | 97810 | ACUPUNCTURE, ONE OR MORE NEEDLES | 1/1/2007 | $26.21 | 3 |
| S | 97811 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2007 | $20.24 | 3 |
| S | 97813 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2007 | $28.03 | 3 |
| S | 97814 | ACUPUNCTURE, 1 OR MORE NEEDLES; | 1/1/2007 | $22.84 | 3 |
| S | 98940 | CHIROPRACTIC MANIPULATIVE TREATM | 1/1/2007 | $17.91 | 3 |
| S | 98941 | CHIROPRACTIC MANIPULATIVE TREATM | 1/1/2007 | $24.91 | 3 |
| S | 98942 | CHIROPRACTIC MANIPULATIVE TREATM | 1/1/2007 | $32.44 | 3 |
| S | 98943 | CHIROPRACTIC MANIPULATIVE TREATM | 1/1/1997 | NC | 9 |
| S | 99000 | HANDLING AND/OR CONVEYANCE OF SP | 1/1/1996 | NC | 9 |
| S | 99024 | POSTOPERATIVE FOLLOW-UP VISIT, I | 1/1/1996 | NC | 9 |
| S | 99025 | INITIAL (NEW PATIENT) VISIT WHEN | 4/1/2004 | INVALID | N |
| S | 99056 | SVCS TYPICALLY PROVIDED IN THE O | 1/1/1996 | NC | 9 |
| S | 99078 | PHYSICIAN EDUCATIONAL SERVICES R | 10/1/2005 | NC | 9 |
| S | 99082 | UNUSUAL TRAVEL (EG, TRANSPORTATI | 1/1/1996 | NC | 9 |
| S | 99201 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $25.17 | 3 |
| S | 99202 | OFFICE VISIT FOR THE EVALUATION | 1/1/2007 | $44.63 | 3 |
| S | 99203 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $66.43 | 3 |
| S | 99212 | OFFICE VISIT FOR THE EVALUATION | 1/1/2007 | $26.47 | 3 |
| S | 99213 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $36.07 | 3 |
| S | 99214 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $56.57 | 3 |
| S | 99261 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| S | 99262 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |
| S | 99263 | FOLLOW-UP IP CONS FOR EST PT, WH | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | 99271 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| S | 99272 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| S | 99273 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| S | 99274 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| S | 99275 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| S | 99301 | E/M OF NEW OR EST PT INVOLVING A | 1/1/2006 | INVALID | N |
| S | 99302 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| S | 99303 | E/M OF NEW OR EST PT INVOLVING N | 1/1/2006 | INVALID | N |
| S | 99311 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| S | 99312 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| S | 99313 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| S | 99321 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| S | 99322 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| S | 99323 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| S | 99331 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| S | 99332 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| S | 99333 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| S | 99341 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $39.96 | 3 |
| S | 99342 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $58.91 | 3 |
| S | 99343 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $85.89 | 3 |
| S | 99347 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $31.14 | 3 |
| S | 99348 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $49.31 | 3 |
| S | 99349 | HOME VISIT FOR THE E/M OF AN EST | 1/1/2007 | $76.29 | 3 |
| S | 99354 | PROLONGED PHYSICIAN SERVICE IN T | 1/1/2007 | $67.99 | 3 |
| S | 99355 | PROLONGED PHYSICIAN SERVICE IN T | 1/1/2007 | $67.21 | 3 |
| S | 99385 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $81.48 | 3 |
| S | 99386 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $96.02 | 3 |
| S | 99391 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $53.98 | 3 |
| S | 99395 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $66.69 | 3 |
| S | 99396 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $73.70 | 3 |
| S | 99401 | PREVENTIVE MEDICINE COUNSELING A | 1/1/2007 | $28.80 | 3 |
| S | 99402 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $48.53 | 3 |
| S | 99403 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $67.21 | 3 |
| S | 99404 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $86.15 | 3 |
| S | 99431 | HISTORY AND EXAM OF NORMAL NEWBO | 1/1/2007 | $41.52 | 3 |
| S | 99432 | NORMAL NEWBORN CARE IN OTHER THA | 1/1/2007 | $58.65 | 3 |
| S | 99433 | SUBSEQUENT HOSP CARE, FOR THE E/ | 1/1/2007 | $21.80 | 3 |
| S | 99435 | HISTORY AND EXAMINATION OF THE N | 1/1/2007 | $55.79 | 3 |
| S | 99440 | NEWBORN RESUSCITATION; PROVISION | 4/14/2005 | $103.80 | 3 |
| S | 99455 | WORK RELATED OR MEDICAL DISABILI | 4/1/2003 | $151.02 | 3 |
| S | 99456 | WORK RELATED OR MEDICAL DISABILI | 4/1/2003 | $151.02 | 3 |
| S | 99551 | HOME INFUSION FOR PAIN MANAGEMEN | 4/1/2004 | INVALID | N |
| S | 99552 | HOME INFUSION FOR PAIN MANAGEMEN | 4/1/2004 | INVALID | N |
| S | 99553 | HOME INFUSION FOR TOCOLYTIC THER | 4/1/2004 | INVALID | N |
| S | 99554 | HOME INFUSION FOR HEMATOPOIETIC | 4/1/2004 | INVALID | N |
| S | 99555 | HOME INFUSION FOR CHEMOTHERAPY, | 4/1/2004 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | 99556 | HOME INFUSION FOR ANTIBIOTICS/AN | 4/1/2004 | INVALID | N |
| S | 99557 | HOME INFUSION OF CONTINUOUS ANTI | 4/1/2004 | INVALID | N |
| S | 99558 | HOME INFUSION OF IMMUNOTHERAPY, | 4/1/2004 | INVALID | N |
| S | 99559 | HOME INFUSION OF PERITONEAL DIAL | 4/1/2004 | INVALID | N |
| S | 99560 | HOME INFUSION OF ENTERAL NUTRITI | 4/1/2004 | INVALID | N |
| S | 99561 | HOME INFUSION OF HYDRATION THERA | 4/1/2004 | INVALID | N |
| S | 99562 | HOME INFUSION OF TOTAL PARENTERA | 4/1/2004 | INVALID | N |
| S | 99563 | HOME ADMINISTRATION OF AEROSOLIZ | 4/1/2004 | INVALID | N |
| S | 99564 | HOME INFUSION FOR ANTI-HEMOPHILI | 4/1/2004 | INVALID | N |
| S | 99565 | HOME INFUSION OF ALPHA-1-PROTEIN | 4/1/2004 | INVALID | N |
| S | 99566 | HOME INFUSION FO RUNINTERRUPTED, | 4/1/2004 | INVALID | N |
| S | 99567 | HOME INFUSION OF SYMPATHOMIMETIC | 4/1/2004 | INVALID | N |
| S | 99568 | HOME INFUSION OF MISCELLANEOUS D | 4/1/2004 | INVALID | N |
| S | 99569 | HOME INFUSION, EACH ADDITIONAL T | 4/1/2004 | INVALID | N |
| S | 99600 | UNLISTED HOME VISIT SERVICE OR P | 4/1/2003 | $48.13 | 3 |
| S | 99601 | HOME INFUSION/SPECIALTY DRUG ADM | 7/1/2003 | $48.13 | 3 |
| S | 99602 | HOME INFUSION/SPECIALTY DRUG ADM | 12/1/2003 | $28.88 | 3 |
| S | A4221 | SUPPLIES FOR MAINTENANCE OF DRUG | 10/1/2005 | $21.91 | 3 |
| S | A4222 | INFUSION SUPPLIES FOR EXTERNAL D | 10/1/2005 | $44.17 | 3 |
| S | A4261 | CERVICAL CAP FOR CONTRACEPTIVE U | 8/1/2003 | $86.25 | 3 |
| S | A4266 | DIAPHRAGM FOR CONTRACEPTIVE USE | 9/1/2004 | $21.28 | 3 |
| S | A4301 | IMPLANTABLE ACCESS TOTAL CATHETE | 1/1/1996 | NC | 9 |
| S | A4305 | DISPOSABLE DRUG DELIVERY SYSTEM, | 2/1/2001 | $21.63 | 3 |
| S | A4306 | DISPOSABLE DRUG DELIVERY SYSTEM, | 2/1/2001 | $21.63 | 3 |
| S | A4570 | SPLINT | 7/1/2002 | NC | 9 |
| S | A9901 | DME DELIVERY, SET UP, AND/OR DIS | 9/1/2003 | NC | 9 |
| S | B4034 | ENTERAL FEEDING SUPPLY KIT; SYRI | 1/1/2003 | $5.60 | 3 |
| S | B4035 | ENTERAL FEEDING SUPPLY KIT; PUMP | 1/1/2003 | $10.67 | 3 |
| S | B4036 | ENTERAL FEEDING SUPPLY KIT; GRAV | 1/1/2003 | $7.31 | 3 |
| S | B4081 | NASOGASTRIC TUBING WITH STYLET | 1/1/2003 | $19.78 | 3 |
| S | B4082 | NASOGASTRIC TUBING WITHOUT STYLE | 1/1/2003 | $14.73 | 3 |
| S | B4083 | STOMACH TUBE - LEVINE TYPE | 1/1/2003 | $2.25 | 3 |
| S | B4084 | GASTROSTOMY/JEJUNOSTOMY TUBING, | 4/1/2002 | INVALID | N |
| S | B4085 | GASTROSTOMY TUBE WITH SILICONE S | 4/1/2002 | INVALID | N |
| S | B4086 | GASTROSTOMY/JEJUNOSTOMY TUBE, AN | 1/1/2003 | $32.66 | 3 |
| S | B4100 | FOOD THICKENER, ADMINISTERED ORA | 1/1/2003 | NC | 9 |
| S | B4102 | ENTERAL FORMULA, FOR ADULTS, USE | 1/1/2005 | NC | 9 |
| S | B4103 | ENTERAL FORMULA, FOR PEDIATRICS, | 1/1/2005 | NC | 9 |
| S | B4104 | ADDITIVE FOR ENTERAL FORMULA (EG | 1/1/2005 | NC | 9 |
| S | B4149 | ENTERAL FORMULA, MANUFACTURED BL | 1/1/2005 | NC | 9 |
| S | B4150 | ENTERAL FORMULA, NUTRITIONALLY C | 1/1/2003 | $0.61 | 3 |
| S | B4151 | ENTERAL FORMULAE; CATEGORY I; NA | 1/1/2005 | INVALID | N |
| S | B4152 | ENTERAL FORMULA, NUTRITIONALLY C | 1/1/2003 | $0.51 | 3 |
| S | B4153 | ENTERAL FORMULA, NUTRITIONALLY C | 1/1/2003 | $1.74 | 3 |
| S | B4154 | ENTERAL FORMULA, NUTRITIONALLY C | 1/1/2003 | $1.12 | 3 |
| S | B4155 | ENTERAL FORMULA, NUTRITIONALLY I | 1/1/2003 | $0.87 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | B4156 | ENTERAL FORMULAE; CATEGORY VI; S | 1/1/2005 | INVALID | N |
| S | B4157 | ENTERAL FORMULA, NUTRITIONALLY C | 1/1/2005 | $1.74 | 3 |
| S | B4158 | ENTERAL FORMULA, FOR PEDIATRICS, | 1/1/2005 | $0.61 | 3 |
| S | B4159 | ENTERAL FORMULA, FOR PEDIATRICS, | 1/1/2005 | $0.61 | 3 |
| S | B4160 | ENTERAL FORMULA, FOR PEDIATRICS, | 1/1/2005 | $0.61 | 3 |
| S | B4161 | ENTERAL FORMULA, FOR PEDIATRICS, | 1/1/2005 | $1.74 | 3 |
| S | B4162 | ENTERAL FORMULA, FOR PEDIATRICS, | 1/1/2005 | $1.74 | 3 |
| S | B4164 | PARENTERAL NUTRITION SOLUTION; C | 1/1/2003 | $15.08 | 3 |
| S | B4168 | PARENTERAL NUTRITION SOLUTION; A | 1/1/2003 | $21.96 | 3 |
| S | B4172 | PARENTERAL NUTRITION SOLUTION; A | 10/1/2000 | $34.90 | 3 |
| S | B4176 | PARENTERAL NUTRITION SOLUTION; A | 1/1/2003 | $42.51 | 3 |
| S | B4178 | PARENTERAL NUTRITION SOLUTION; A | 1/1/2003 | $51.04 | 3 |
| S | B4180 | PARENTERAL NUTRITION SOLUTION; C | 1/1/2003 | $21.61 | 3 |
| S | B4184 | PARENTERAL NUTRITION SOLUTION; L | 1/1/2006 | INVALID | N |
| S | B4185 | PARENTERAL NUTRITION SOLUTION, P | 1/1/2006 | $10.89 | 3 |
| S | B4186 | PARENTERAL NUTRITION SOLUTION; L | 1/1/2006 | INVALID | N |
| S | B4189 | PARENTERAL NUTRITION SOLUTION; C | 1/1/2003 | $157.66 | 3 |
| S | B4193 | PARENTERAL NUTRITION SOLUTION; C | 1/1/2003 | $203.73 | 3 |
| S | B4197 | PARENTERAL NUTRITION SOLUTION; C | 1/1/2003 | $248.02 | 3 |
| S | B4199 | PARENTERAL NUTRITION SOLUTION; C | 1/1/2003 | $283.42 | 3 |
| S | B4216 | PARENTERAL NUTRITION; ADDITIVES | 1/1/2003 | $6.85 | 3 |
| S | B4220 | PARENTERAL NUTRITION SUPPLY KIT; | 4/1/2003 | $7.10 | 3 |
| S | B4222 | PARENTERAL NUTRITION SUPPLY KIT; | 4/1/2003 | $8.75 | 3 |
| S | B4224 | PARENTERAL NUTRITION ADMINISTRAT | 4/1/2003 | $22.19 | 3 |
| S | B5000 | PARENTERAL NUTRITION SOLUTION; C | 1/1/2003 | $10.54 | 3 |
| S | B5100 | PARENTERAL NUTRITION SOLUTION; C | 1/1/2003 | $4.12 | 3 |
| S | B5200 | PARENTERAL NUTRITION SOLUTION; C | 10/1/2000 | $4.85 | 3 |
| S | B9000 | ENTERAL NUTRITION INFUSION PUMP | 1/1/2003 | $103.10 | 3 |
| S | B9002 | ENTERAL NUTRITION INFUSION PUMP | 1/1/2003 | $108.65 | 3 |
| S | B9004 | PARENTERAL NUTRITION INFUSION PU | 1/1/2003 | $354.30 | 3 |
| S | B9006 | PARENTERAL NUTRITION INFUSION PU | 1/1/2003 | $354.30 | 3 |
| S | B9998 | NOC FOR ENTERAL SUPPLIES | 9/1/1990 | $0.01 | 5 |
| S | B9999 | NOC FOR PARENTERAL SUPPLIES | 9/1/1990 | $0.01 | 5 |
| S | BRS01 | SHELTER CARE | 4/1/2003 | INVALID | N |
| S | BRS02 | THERAPEUTIC FOSTER CARE/PROCTOR | 4/1/2003 | INVALID | N |
| S | BRS03 | THERAPEUTIC FOSTER CARE/PROCTOR | 4/1/2003 | INVALID | N |
| S | BRS04 | RESIDENTIAL CARE/LEVEL 4 | 4/1/2003 | INVALID | N |
| S | BRS05 | RESIDENTIAL CARE/LEVEL 5 | 4/1/2003 | INVALID | N |
| S | D0120 | PERIODIC ORAL EVALUATION | 2/15/2000 | $23.23 | 3 |
| S | D0140 | LIMITED ORAL EVALUATION - PROBLE | 2/15/2000 | $30.97 | 3 |
| S | D0145 | ORAL EVALUATION FOR A PATIENT UN | 1/1/2007 | $23.23 | 3 |
| S | D0150 | COMPREHENSIVE ORAL EVALUATION - | 2/15/2000 | $36.14 | 3 |
| S | D0160 | DETAILED AND EXTENSIVE ORAL EVAL | 10/1/2000 | $62.09 | 3 |
| S | D0170 | RE-EVALUATION-LIMITED, PROBLEM F | 10/1/2000 | $24.16 | 3 |
| S | D0180 | COMPREHENSIVE PERIODONTAL EVALUA | 1/1/2003 | $36.14 | 3 |
| S | D0210 | INTRAORAL - COMPLETE SERIES (INC | 10/1/2000 | $29.99 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D0220 | INTRAORAL PERIAPICAL-FIRST FILM | 1/1/2000 | $9.27 | 3 |
| S | D0230 | INTRAORAL PERIAPICAL-EACH ADDITI | 10/1/2000 | $5.36 | 3 |
| S | D0240 | INTRAORAL-OCCLUSAL FILM | 10/1/2000 | $4.28 | 3 |
| S | D0250 | EXTRAORAL-FIRST FILM | 10/1/2000 | $18.21 | 3 |
| S | D0260 | EXTRAORAL-EACH ADDITIONAL FILM | 10/1/2000 | $13.93 | 3 |
| S | D0270 | BITEWING - SINGLE FILM | 10/1/2000 | $5.36 | 3 |
| S | D0272 | BITEWINGS - TWO FILMS | 10/1/2000 | $10.71 | 3 |
| S | D0273 | BITEWINGS - THREE FILMS | 1/1/2007 | $15.71 | 3 |
| S | D0274 | BITEWINGS - FOUR FILMS | 10/1/2000 | $12.85 | 3 |
| S | D0277 | VERTICAL BITEWINGS - 7 TO 8 FILM | 10/1/2000 | $22.26 | 3 |
| S | D0290 | POSTERIOR - ANTERIOR OR LATERAL | 10/1/2000 | $19.28 | 3 |
| S | D0310 | SIALOGRAPHY | 10/1/2000 | $0.01 | 5 |
| S | D0320 | TEMPOROMADIBULAR JOINT ARTHROGRA | 10/1/2000 | $0.01 | 5 |
| S | D0321 | OTHER TEMPOROMANDIBULAR JOINT FI | 10/1/2000 | $20.35 | 3 |
| S | D0322 | TOMOGRAPHIC SURVEY | 10/1/2000 | $0.01 | 5 |
| S | D0330 | PANORAMIC FILM | 10/1/2000 | $22.50 | 3 |
| S | D0340 | CEPHALOMETRIC FILM | 10/1/2000 | $17.14 | 3 |
| S | D0350 | ORAL/FACIAL PHOTOGRAPHIC IMAGES | 10/1/2000 | $20.80 | 3 |
| S | D0360 | CONE BEAM CT - CRANIOFACIAL DATA | 1/1/2007 | $0.01 | 5 |
| S | D0362 | CONE BEAM - TWO-D IMAGE RECONSTR | 1/1/2007 | $0.01 | 5 |
| S | D0363 | CONE BEAM - 3D IMAGE RECONSTRUCT | 1/1/2007 | $0.01 | 5 |
| S | D0415 | COLLECTION OF MICROORGANISMS FOR | 10/1/2000 | $0.01 | 5 |
| S | D0416 | VIRAL CULTURE | 1/1/2005 | NC | 9 |
| S | D0421 | GENETIC TEST FOR SUSCEPTIBILITY | 1/1/2005 | NC | 9 |
| S | D0425 | CARIES SUSCEPTIBILITY TESTS | 1/1/2000 | NC | 9 |
| S | D0431 | ADJUNCTIVE PRE-DIAGNOSTIC TEST T | 1/1/2005 | NC | 9 |
| S | D0460 | PULP VITALITY TESTS | 1/1/2000 | NC | 9 |
| S | D0470 | DIAGNOSTIC CASTS | 1/1/2000 | NC | 9 |
| S | D0472 | ACCESSION OF TISSUE, GROSS EXAMI | 10/1/2000 | $34.28 | 3 |
| S | D0473 | ACCESSION OF TISSUE, GROSS AND M | 10/1/2000 | $34.28 | 3 |
| S | D0474 | ACCESSION OF TISSUE, GROSS AND M | 10/1/2000 | $34.28 | 3 |
| S | D0475 | DECALCIFICATION PROCEDURE | 1/1/2005 | NC | 9 |
| S | D0476 | SPECIAL STAINS FOR MICROORGANISM | 1/1/2005 | NC | 9 |
| S | D0477 | SPECIAL STAINS, NOT FOR MICROORG | 1/1/2005 | NC | 9 |
| S | D0478 | IMMUNOHISTOCHEMICAL STAINS | 1/1/2005 | NC | 9 |
| S | D0479 | TISSUE IN-SITU HYBRIDIZATION, IN | 1/1/2005 | NC | 9 |
| S | D0480 | PROCESS AND INTERP OF EXFOLIATIV | 10/1/2000 | $34.28 | 3 |
| S | D0481 | ELECTRON MICROSCOPY - DIAGNOSTIC | 1/1/2005 | NC | 9 |
| S | D0482 | DIRECT IMMUNOFLUORESCENCE | 1/1/2005 | NC | 9 |
| S | D0483 | INDIRECT IMMUNOFLUORESCENCE | 1/1/2005 | NC | 9 |
| S | D0484 | CONSULTATION ON SLIDES PREPARED | 1/1/2005 | NC | 9 |
| S | D0485 | CONSULTATION, INCLUDING PREPARAT | 1/1/2005 | NC | 9 |
| S | D0486 | ACCESSION OF BRUSH BIOPSY SAMPLE | 1/1/2007 | $0.01 | 5 |
| S | D0501 | HISTOPATHOLOGIC EXAMINATIONS | 4/1/2003 | INVALID | N |
| S | D0502 | OTHER ORAL PATHOLOGY PROCEDURES, | 1/1/2000 | $0.01 | 5 |
| S | D0999 | UNSPECIFIED DIAGNOSTIC PROCEDURE | 1/1/2000 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D1110 | PROPHYLAXIS - ADULT | 10/1/2000 | $36.50 | 3 |
| S | D1120 | PROPHYLAXIS - CHILD | 1/1/2000 | $28.06 | 3 |
| S | D1201 | TOPICAL APPLICATION OF FLUORIDE | 1/1/2007 | INVALID | N |
| S | D1203 | TOPICAL APPLICATION OF FLUORIDE | 10/1/2000 | $12.73 | 3 |
| S | D1204 | TOPICAL APPLICATION OF FLUORIDE | 10/1/2003 | $12.73 | 3 |
| S | D1205 | TOPICAL APPLICATION OF FLUORIDE | 1/1/2007 | INVALID | N |
| S | D1206 | TOPICAL FLUORIDE VARNISH; THERAP | 1/1/2007 | $12.73 | 3 |
| S | D1310 | NUTRITIONAL COUSELING FOR THE CO | 1/1/2005 | $0.01 | P |
| S | D1320 | TOBACCO COUNSELING FOR THE CONTR | 10/1/2000 | $10.00 | 3 |
| S | D1330 | ORAL HYGIENE INSTRUCTIONS | 1/1/2005 | $0.01 | P |
| S | D1351 | SEALENT - PER TOOTH | 1/1/2000 | $18.96 | 3 |
| S | D1510 | SPACE MAINTAINER - FIXED-UNILATE | 10/1/2000 | $74.98 | 3 |
| S | D1515 | SPACE MAINTAINER - FIXED BILATER | 10/1/2000 | $96.41 | 3 |
| S | D1520 | SPACE MAINTAINER - REMOVABLE-UNI | 10/1/2000 | $72.84 | 3 |
| S | D1525 | SPACE MAINTAINER - REMOVABLE-BIL | 10/1/2000 | $86.77 | 3 |
| S | D1550 | RECEMENTATION OF SPACE MAINTAINE | 10/1/2000 | $26.78 | 3 |
| S | D1555 | REMOVAL OF FIXED SPACE MAINTAINE | 1/1/2007 | NC | 9 |
| S | D2110 | AMALGAM - ONE SURFACE, PRIMARY | 4/1/2003 | INVALID | N |
| S | D2120 | AMALGAM - TWO SURFACES, PRIMARY | 4/1/2003 | INVALID | N |
| S | D2130 | AMALGAM - THREE SURFACES, PRIMAR | 4/1/2003 | INVALID | N |
| S | D2131 | AMALGAM - FOUR OR MORE SURFACES, | 4/1/2003 | INVALID | N |
| S | D2140 | AMALGAM - ONE SURFACE, PRIMARY O | 10/1/2000 | $36.37 | 3 |
| S | D2150 | AMALGAM - TWO SURFACES, PRIMARY | 10/1/2000 | $45.74 | 3 |
| S | D2160 | AMALGAM - THREE SURFACES, PRIMAR | 10/1/2000 | $55.67 | 3 |
| S | D2161 | AMALGAM - FOUR OR MORE SURFACES, | 10/1/2000 | $63.27 | 3 |
| S | D2330 | RESIN-BASED COMPOSITE - ONE SURF | 10/1/2000 | $38.56 | 3 |
| S | D2331 | RESIN-BASED COMPOSITE - TWO SURF | 10/1/2000 | $52.39 | 3 |
| S | D2332 | RESIN-BASED COMPOSITE - THREE SU | 10/1/2000 | $66.87 | 3 |
| S | D2335 | RESIN-BASED COMPOSITE - FOUR OR | 10/1/2000 | $81.19 | 3 |
| S | D2336 | COMPOSITE RESIN CROWN, ANTERIOR | 4/1/2003 | INVALID | N |
| S | D2337 | RESIN-BASED COMPOSITE CROWN, ANT | 4/1/2003 | INVALID | N |
| S | D2380 | RESIN - ONE SURFACE, POSTERIOR - | 4/1/2003 | INVALID | N |
| S | D2381 | RESIN - TWO SURFACES, POSTERIOR | 4/1/2003 | INVALID | N |
| S | D2382 | RESIN - THREE OR MORE SURFACES, | 4/1/2003 | INVALID | N |
| S | D2385 | RESIN - ONE SURFACE, POSTERIOR - | 4/1/2003 | INVALID | N |
| S | D2386 | RESIN - TWO SURFACES, POSTERIOR | 4/1/2003 | INVALID | N |
| S | D2387 | RESIN - THREE OR MORE SURFACES, | 4/1/2003 | INVALID | N |
| S | D2388 | RESIN-BASED COMPOSITE - FOUR OR | 4/1/2003 | INVALID | N |
| S | D2390 | RESIN-BASED COMPOSITE CROWN, ANT | 1/1/2003 | $72.80 | 3 |
| S | D2391 | RESIN-BASED COMPOSITE - ONE SURF | 4/1/2005 | $36.37 | 3 |
| S | D2392 | RESIN-BASED COMPOSITE - TWO SURF | 4/1/2005 | $45.74 | 3 |
| S | D2393 | RESIN-BASED COMPOSITE - THREE SU | 4/1/2005 | $55.67 | 3 |
| S | D2394 | RESIN-BASED COMPOSITE - FOUR OR | 4/1/2005 | $63.27 | 3 |
| S | D2410 | GOLD FOIL - ONE SURFACE | 1/1/2000 | NC | 9 |
| S | D2420 | GOLD FOIL - TWO SURFACES | 1/1/2000 | NC | 9 |
| S | D2430 | GOLD FOIL - THREE SURFACES | 1/1/2000 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D2510 | INLAY - METALLIC - ONE SURFACE | 1/1/2000 | NC | 9 |
| S | D2520 | INLAY - METALLIC - TWO SURFACES | 1/1/2000 | NC | 9 |
| S | D2530 | INLAY - METALLIC - THREE OR MORE | 1/1/2000 | NC | 9 |
| S | D2542 | ONLAY - METALLIC - TWO SURFACES | 1/1/2000 | NC | 9 |
| S | D2543 | ONLAY - METALLIC - THREE SURFACE | 1/1/2000 | NC | 9 |
| S | D2544 | ONLAY - METALLIC - FOUR OR MORE | 1/1/2000 | NC | 9 |
| S | D2610 | INLAY PORCELAIN/CERAMIC - ONE SU | 1/1/2000 | NC | 9 |
| S | D2620 | INLAY - PORCELAIN/ TWO SURFACES | 1/1/2000 | NC | 9 |
| S | D2630 | INLAY - PERCELAIN/CERAMIC - THRE | 1/1/2000 | NC | 9 |
| S | D2642 | ONLAY - PORCELAIN/CERAMIC - TWO | 1/1/2000 | NC | 9 |
| S | D2643 | ONLAY - PORCELAIN/CERAMIC - THRE | 1/1/2000 | NC | 9 |
| S | D2644 | ONLAY - PORCELAIN/CERAMIC - FOUR | 1/1/2000 | NC | 9 |
| S | D2650 | INLAY - COMPOSITE/RESIN - ONE SU | 1/1/2000 | NC | 9 |
| S | D2651 | INLAY - COMPOSITE/RESIN - TWO SU | 1/1/2000 | NC | 9 |
| S | D2652 | INLAY - COMPOSITE/RESIN - THREE | 1/1/2000 | NC | 9 |
| S | D2662 | ONLAY - COMPOSITE/RESIN - TWO SU | 1/1/2000 | NC | 9 |
| S | D2663 | ONLAY - COMPOSITE/RESIN - THREE | 1/1/2000 | NC | 9 |
| S | D2664 | ONLAY - COMPOSITE/RESIN - FOUR O | 1/1/2000 | NC | 9 |
| S | D2710 | CROWN - RESIN-BASED COMPOSITE (I | 10/1/2000 | $59.99 | 3 |
| S | D2712 | CROWN - 3/4 RESIN-BASED COMPOSIT | 1/1/2005 | NC | 9 |
| S | D2720 | CROWN - RESIN WITH HIGH NOBLE ME | 1/1/2000 | NC | 9 |
| S | D2721 | CROWN - RESIN WITH PREDOMINANTLY | 10/1/2000 | $192.82 | 3 |
| S | D2722 | CROWN - RESIN WITH NOBLE METAL | 10/1/2000 | $224.95 | 3 |
| S | D2740 | CROWN - PORCELAIN/CERAMIC - SUBS | 1/1/2000 | NC | 9 |
| S | D2750 | CROWN - PORCELAIN FUSED TO HIGH | 1/1/2000 | NC | 9 |
| S | D2751 | CROWN - PORCELAIN FUSED TO PREDO | 10/1/2000 | $257.09 | 3 |
| S | D2752 | CROWN - PORCELAIN FUSED TO NOBLE | 10/1/2000 | $267.80 | 3 |
| S | D2780 | CROWN - 3/4 CASDT HIGH NOBLE MET | 1/1/2000 | NC | 9 |
| S | D2781 | CROWN - 3/4 CAST PREDOMINATELY B | 1/1/2000 | NC | 9 |
| S | D2782 | CROWN - 3/4 CAST NOBLE METAL | 1/1/2000 | NC | 9 |
| S | D2783 | CROWN - 3/4 PORCELAIN/CERAMIC | 1/1/2000 | NC | 9 |
| S | D2790 | CROWN - FULL CAST HIGH NOBLE MET | 1/1/2000 | NC | 9 |
| S | D2791 | CROWN - FULL CAST PREDOMINANTLY | 1/1/2000 | NC | 9 |
| S | D2792 | CROWN - FULL CAST NOBLE METAL | 1/1/2000 | NC | 9 |
| S | D2794 | CORWN-TITANIUM | 1/1/2005 | NC | 9 |
| S | D2799 | PROVISIONAL CROWN | 1/1/2000 | NC | 9 |
| S | D2910 | RECEMENT INLAY, ONLAY OR PARTIAL | 10/1/2000 | $26.78 | 3 |
| S | D2915 | RECEMENT CAST OR PREFABRICATED P | 1/1/2005 | NC | 9 |
| S | D2920 | RECEMENT CROWN | 10/1/2000 | $26.78 | 3 |
| S | D2930 | PREFABRICATED STAINLESS STEEL CR | 10/1/2000 | $71.79 | 3 |
| S | D2931 | PREFABRICATED STAINLESS STEEL CR | 10/1/2000 | $75.49 | 3 |
| S | D2932 | PREFABRICATED RESIN CROWN | 10/1/2000 | $59.99 | 3 |
| S | D2933 | PREFABRICATED STAINLESS STEEL CR | 10/1/2000 | $64.27 | 3 |
| S | D2934 | PREFABRICATED ESTHETIC COATED ST | 1/1/2005 | NC | 9 |
| S | D2940 | SEDATIVE FILLING | 10/1/2000 | $28.84 | 3 |
| S | D2950 | CORE BUILDUP, INCLUDING ANY PINS | 10/1/2000 | $48.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D2951 | PIN RETENTION - PER TOOTH, IN AD | 10/1/2000 | $21.80 | 3 |
| S | D2952 | CAST POST AND CORE IN ADDITION T | 1/1/2000 | NC | 9 |
| S | D2953 | EACH ADDITIONAL CAST POST - SAME | 1/1/2000 | NC | 9 |
| S | D2954 | PREFABRICATED POST AND CORE IN A | 10/1/2000 | $64.27 | 3 |
| S | D2955 | POST REMOVAL (NOT IN CONJUNCTION | 10/1/2000 | $0.01 | 5 |
| S | D2957 | EACH ADDITIONAL PREFABRICATED PO | 10/1/2000 | $64.27 | 3 |
| S | D2960 | LABIAL VENEER (LAMINATE) - CHAIR | 1/1/2000 | NC | 9 |
| S | D2961 | LABIAL VENEER (RESIN LAMINATE) - | 1/1/2000 | NC | 9 |
| S | D2962 | LABIAL VENEER (PORCELAIN LAMINAT | 1/1/2000 | NC | 9 |
| S | D2970 | TEMPORARY CROWN (FRACTURED TOOTH | 1/1/2005 | INVALID | N |
| S | D2971 | ADDITIONAL PROCEDURES TO CONSTRU | 1/1/2005 | NC | 9 |
| S | D2975 | COPING | 1/1/2005 | NC | 9 |
| S | D2980 | CROWN REPAIR, BY REPORT | 1/1/2000 | $0.01 | 5 |
| S | D2999 | UNSPECIFIED RESTORATIVE PROCEDUR | 1/1/2000 | NC | 9 |
| S | D3110 | PULP CAP - DIRECT (EXCLUDING FIN | 1/1/2000 | NC | 9 |
| S | D3120 | PULP CAP - INDIRECT (EXCLUDING F | 1/1/2000 | NC | 9 |
| S | D3220 | THERAPEUTIC PULPOTOMY (EXCLUDING | 10/1/2000 | $48.33 | 3 |
| S | D3221 | PULPAL DEBRIDEMENT, PRIMARY AND | 10/1/2000 | $46.06 | 3 |
| S | D3230 | PULPAL THERAPY (RESORBABLE FILLI | 10/1/2000 | $46.06 | 3 |
| S | D3240 | PULPAL THERAPY (RESORBABLE FILLI | 10/1/2000 | $46.06 | 3 |
| S | D3310 | ENDODONTIC THERAPY - ANTERIOR (E | 10/1/2000 | $144.61 | 3 |
| S | D3320 | ENDODONTIC THERAPY - BICUSPID (E | 10/1/2000 | $166.04 | 3 |
| S | D3330 | ENDODONTIC THERAPY - MOLAR (EXCL | 10/1/2000 | $208.88 | 3 |
| S | D3331 | TREATMENT OF ROOT CANAL OBSTRUCT | 10/1/2000 | $260.00 | 3 |
| S | D3332 | INCOMPLETE ENDODONTIC THERAPY; I | 1/1/2000 | $0.01 | 5 |
| S | D3333 | INTERNAL ROOT REPAIR OF PERFORAT | 1/1/2000 | $0.01 | 5 |
| S | D3346 | RETREATMENT OF PREVIOUS ROOT CAN | 4/1/2005 | $0.01 | 5 |
| S | D3347 | RETREATMENT OF PREVIOUS ROOT CAN | 1/1/2000 | NC | 9 |
| S | D3348 | RETREATMENT OF PREVIOUS ROOT CAN | 1/1/2000 | NC | 9 |
| S | D3351 | APEXIFICATION/RECALCIFICATION - | 10/1/2000 | $107.12 | 3 |
| S | D3352 | APEXIFICATION/RECALCIFICATION - | 10/1/2000 | $53.56 | 3 |
| S | D3353 | APEXIFICATION/RECALCIFICATION - | 10/1/2000 | $0.01 | 5 |
| S | D3410 | APICOECTOMY/PERIRADICULAR SURGER | 1/1/2000 | NC | 9 |
| S | D3421 | APICOECTOMY/PERIRADICULAR SURGER | 1/1/2000 | NC | 9 |
| S | D3425 | APICOECTOMY/PERIRADICULAR SURGER | 1/1/2000 | NC | 9 |
| S | D3426 | APICOECTOMY/PERIRADICULAR SURGER | 1/1/2000 | NC | 9 |
| S | D3430 | RETROGRADE FILLING - PER ROOT | 1/1/2000 | NC | 9 |
| S | D3450 | ROOT AMPUTATION - PER ROOT | 1/1/2000 | NC | 9 |
| S | D3460 | ENDODONTIC ENDOSSEOUS IMPLANT | 1/1/2000 | NC | 9 |
| S | D3470 | INTENTIONAL REPLANTATION (INCLUD | 1/1/2000 | NC | 9 |
| S | D3910 | SURGICAL PROCEDURE FOR ISOLATION | 1/1/2000 | NC | 9 |
| S | D3920 | HEMISECTION (INCLUDING ANY ROOT | 1/1/2000 | NC | 9 |
| S | D3950 | CANAL PREPARATION AND FITTING OF | 10/1/2000 | $80.34 | 3 |
| S | D3999 | UNSPECIFIED ENDODONITC PROCEDURE | 1/1/2000 | NC | 9 |
| S | D4210 | GINGIVECTOMY OR GINGIVOPLASTY - | 10/1/2000 | $52.00 | 6 |
| S | D4211 | GINGIVECTOMY OR GINGIVOPLASTY - | 1/1/2000 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D4220 | GINGIVAL CURETTAGE, SURGICAL, PE | 4/1/2003 | INVALID | N |
| S | D4230 | ANATOMICAL CROWN EXPOSURE - FOUR | 1/1/2007 | NC | 9 |
| S | D4231 | ANATOMICAL CROWN EXPOSURE - ONE | 1/1/2007 | NC | 9 |
| S | D4240 | GINGIVAL FLAP PROCEDURE, INCL RO | 10/1/2000 | $53.56 | 3 |
| S | D4241 | GINGIVAL FLAP PROC, INCL ROOT PL | 1/1/2003 | $40.71 | 3 |
| S | D4245 | APICALLY POSITIONED FLAP | 10/1/2000 | $64.27 | 3 |
| S | D4249 | CLINICAL CROWN LENGTHENING - HAR | 1/1/2000 | NC | 9 |
| S | D4260 | SD4261S SURGERY (INCL FLAP ENTRY | 10/1/2000 | $314.81 | 3 |
| S | D4261 | OSSEOUS SURGERY (INCL FLAP ENTRY | 1/1/2003 | $236.10 | 3 |
| S | D4263 | BONE REPLACEMENT GRAFT - FIRST S | 1/1/2000 | NC | 9 |
| S | D4264 | BONE REPLACEMENT GRAFT - EACH AD | 1/1/2000 | NC | 9 |
| S | D4265 | BIOLOGIC MATERIALS TO AID IN SOF | 1/1/2003 | NC | 9 |
| S | D4266 | GUIDED TISSUE REGENERATION - RES | 1/1/2000 | NC | 9 |
| S | D4267 | GUIDED TISSUE REGENERATION - NON | 1/1/2000 | NC | 9 |
| S | D4268 | SURGICAL REVISION PROCEDURE, PER | 10/1/2000 | $64.27 | 3 |
| S | D4270 | PEDICLE SOFT TISSUE GRAFT PROCED | 1/1/2000 | NC | 9 |
| S | D4271 | FREE SOFT TISSUE GRAFT PROCEDURE | 1/1/2000 | NC | 9 |
| S | D4273 | SUBEPITHELIAL CONNECTIVE TISSUE | 1/1/2000 | NC | 9 |
| S | D4274 | DISTAL OR PROXIMAL WEDGE PROCEDU | 1/1/2000 | NC | 9 |
| S | D4275 | SOFT TISSUE ALLOGRAFT | 1/1/2003 | NC | 9 |
| S | D4276 | COMBINED CONNECTIVE TISSUE AND D | 1/1/2003 | NC | 9 |
| S | D4320 | PROVISIONAL SPLINTING INTRACORON | 1/1/2000 | NC | 9 |
| S | D4321 | PROVISIONAL SPLINTING EXTRACORON | 1/1/2000 | NC | 9 |
| S | D4341 | PERIODONTAL SCALING AND ROOT PLA | 10/1/2000 | $62.01 | 3 |
| S | D4342 | PERIODONTAL SCALING AND ROOT PLA | 1/1/2003 | $46.50 | 3 |
| S | D4355 | FULL MOUTH DEBRIDEMENT TO ENABLE | 10/1/2000 | $48.20 | 3 |
| S | D4381 | LOCALIZED DELIVERY OF ANTIMICROB | 1/1/2000 | NC | 9 |
| S | D4910 | PERIODONTAL MAINTENANCE | 10/1/2000 | $32.14 | 3 |
| S | D4920 | UNSCHEDULED DRESSING CHANGE (BY | 1/1/2000 | $0.01 | 5 |
| S | D4999 | UNSPECIFIED PERIODONTAL PROCEDUR | 1/1/2000 | NC | 9 |
| S | D5110 | COMPLETE DENTURE - MAXILLARY | 10/1/2000 | $348.14 | 3 |
| S | D5120 | COMPLETE DENTURE - MANDIBULAR | 10/1/2000 | $348.14 | 3 |
| S | D5130 | IMMEDIATE DENTURE - MAXILLARY | 10/1/2000 | $348.14 | 3 |
| S | D5140 | IMMEDIATE DENTURE - MANDIBULAR | 10/1/2000 | $348.14 | 3 |
| S | D5211 | MAXILLARY PARTIAL DENTURE - RESI | 3/1/2003 | NC | 9 |
| S | D5212 | MANDIBULAR PARTIAL DENTURE - RES | 3/1/2003 | NC | 9 |
| S | D5213 | MAXILLARY PARTIAL DENTURE - CAST | 10/1/2000 | $348.14 | 3 |
| S | D5214 | MANDIBULAR PARTIAL DENTURE - CAS | 10/1/2000 | $348.14 | 3 |
| S | D5225 | MAXILLARY PARTIAL DENTURE - FLEX | 1/1/2005 | NC | 9 |
| S | D5226 | MANDIBULAR PARTIAL DENTURE - FLE | 1/1/2005 | NC | 9 |
| S | D5281 | REMOVABLE UNILATERAL PARTIAL DEN | 1/1/2000 | NC | 9 |
| S | D5410 | ADJUST COMPLETE DENTUE - MAXILLA | 10/1/2000 | $18.21 | 3 |
| S | D5411 | ADJUST COMPLETE DENTURE - MANDIB | 10/1/2000 | $18.21 | 3 |
| S | D5421 | ADJUST PARTIAL DENTURE - MAXILLA | 10/1/2000 | $19.28 | 3 |
| S | D5422 | ADJUST PARTIAL DENTURE - MANDIBU | 10/1/2000 | $19.28 | 3 |
| S | D5510 | REPAIR BROKEN COMPLETE DENTURE B | 10/1/2000 | $32.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D5520 | REPLACE MISSING OR BROKEN TEETH | 10/1/2000 | $32.14 | 3 |
| S | D5610 | REPAIR RESIN DENTUE BASE | 10/1/2000 | $32.14 | 3 |
| S | D5620 | REPAIR CAST FRAMEWORK | 10/1/2000 | $32.14 | 3 |
| S | D5630 | REPAIR OR REPLACE BROKEN CLASP | 10/1/2000 | $53.56 | 3 |
| S | D5640 | REPLACE BROKEN TEETH - PER TOOTH | 10/1/2000 | $32.14 | 3 |
| S | D5650 | ADD TOOTH TO EXISTING PARTIAL DE | 10/1/2000 | $32.14 | 3 |
| S | D5660 | ADD CLASP TO EXISTING PARTIAL DE | 10/1/2000 | $48.20 | 3 |
| S | D5670 | REPLACE ALL TEETH AND ACRYLIC ON | 1/1/2003 | NC | 9 |
| S | D5671 | REPLACE ALL TEETH AND ACRYLIC ON | 1/1/2003 | NC | 9 |
| S | D5710 | REBASE COMPLETE MAXILLARY DENTUR | 10/1/2000 | $170.56 | 3 |
| S | D5711 | REBASE COMPLETE MANDIBULAR DENTU | 10/1/2000 | $170.56 | 3 |
| S | D5720 | REBASE MAXILLARY PARTIAL DENTURE | 10/1/2000 | $170.56 | 3 |
| S | D5721 | REBASE MANDIBULAR PARTIAL DENTUR | 10/1/2000 | $170.56 | 3 |
| S | D5730 | RELINE COMPLETE MAXILLARY DENTUR | 10/1/2000 | $32.14 | 3 |
| S | D5731 | RELINE COMPLETE MANDIBULAR DENTU | 10/1/2000 | $32.14 | 3 |
| S | D5740 | RELINE MAXILLARY PARTIAL DENTURE | 10/1/2000 | $32.14 | 3 |
| S | D5741 | RELINE MANDIBULAR PARTIAL DENTUR | 10/1/2000 | $32.14 | 3 |
| S | D5750 | RELINE COMPLETE MAXILLARY DENTUR | 10/1/2000 | $107.12 | 3 |
| S | D5751 | RELINE COMPLETE MANDIBULAR DENTU | 10/1/2000 | $107.12 | 3 |
| S | D5760 | RELINE MAXILLARY PARTIAL DENTURE | 10/1/2000 | $107.12 | 3 |
| S | D5761 | RELINE MANDIBULAR PARTIAL DENTUR | 10/1/2000 | $107.12 | 3 |
| S | D5810 | INTERIM COMPLETE DENTURE (MAXILL | 1/1/2000 | NC | 9 |
| S | D5811 | INTERIM COMPLETE DENTURE (MANDIB | 1/1/2000 | NC | 9 |
| S | D5820 | INTERIM PARTIAL DENTURE (MAXILLA | 10/1/2000 | $152.00 | 3 |
| S | D5821 | INTERIM PARTIAL DENTURE (MANDIBU | 10/1/2000 | $158.08 | 3 |
| S | D5850 | TISSUE CONDITIONING, MAXILLARY | 10/1/2000 | $27.85 | 3 |
| S | D5851 | TISSUE CONDITIONING, MANDIBULAR | 10/1/2000 | $27.85 | 3 |
| S | D5860 | OVERDENTURE - COMPLETE, BY REPOR | 1/1/2000 | NC | 9 |
| S | D5861 | OVERDENTURE - PARTIAL, BY REPORT | 1/1/2000 | NC | 9 |
| S | D5862 | PRECISION ATTACHMENT, BY REPORT | 1/1/2000 | NC | 9 |
| S | D5867 | REPLACEMENT OF REPLACEABLE PART | 1/1/2000 | NC | 9 |
| S | D5875 | MODIFICATION OF REMOVABLE PROSTH | 1/1/2000 | NC | 9 |
| S | D5899 | UNSPECIFIED REMOVABLE PROSTHODON | 1/1/2000 | NC | 9 |
| S | D5911 | FACIAL MOULAGE (SECTIONAL) | 10/1/2000 | $0.01 | 5 |
| S | D5912 | FACIAL MOULAGE (COMPLETE) | 10/1/2000 | $0.01 | 5 |
| S | D5913 | NASAL PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5914 | AURICULAR PROSTHESIS | 1/1/2000 | NC | 9 |
| S | D5915 | ORBITAL PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5916 | OCULAR PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5919 | FACIAL PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5922 | NASAL SEPTAL PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5923 | OCULAR PROSTHESIS, INTERIM | 10/1/2000 | $0.01 | 5 |
| S | D5924 | CRANIAL PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5925 | FACIAL AUGMENTATION IMPLANT PROS | 10/1/2000 | $0.01 | 5 |
| S | D5926 | NASAL PROSTHESIS, REPLACEMENT | 10/1/2000 | $0.01 | 5 |
| S | D5927 | AURICULAR PROSTHESIS, REPLACEMEN | 1/1/2000 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D5928 | ORBITAL PROSTHESIS, REPLACEMENT | 10/1/2000 | $0.01 | 5 |
| S | D5929 | FACIAL PROSTHESIS, REPLACEMENT | 10/1/2000 | $0.01 | 5 |
| S | D5931 | OBTURATOR PROSTHESIS, SURGICAL | 10/1/2000 | $0.01 | 5 |
| S | D5932 | OBTURATOR PROSTHESIS, DEFINITIVE | 10/1/2000 | $0.01 | 5 |
| S | D5933 | OBTURATOR PROSTHESIS, MODIFICATI | 10/1/2000 | $0.01 | 5 |
| S | D5934 | MANDIBULAR RESECTION PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5935 | MANDIBULAR RESECTION PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5936 | OBTURATOR PROSTHESIS, INTERIM | 10/1/2000 | $0.01 | 5 |
| S | D5937 | TRISMUS APPLIANCE (NOT FOR TMD T | 10/1/2000 | $0.01 | 5 |
| S | D5951 | FEEDING AID | 10/1/2000 | $0.01 | 5 |
| S | D5952 | SPEECH AID PROSTHESIS, PEDIATRIC | 10/1/2000 | $428.48 | 3 |
| S | D5953 | SPEECH AID PROSTHESIS, ADULT | 10/1/2000 | $0.01 | 5 |
| S | D5954 | PALATAL AUGMENTATION PROSTHESIS | 10/1/2000 | $0.01 | 5 |
| S | D5955 | PALATAL LIFT PROSTHESIS, DEFINIT | 10/1/2000 | $428.48 | 3 |
| S | D5958 | PALATAL LIFT PROSTHESIS, INTERIM | 10/1/2000 | $0.01 | 5 |
| S | D5959 | PALATAL LIFT PROSTHESIS, MODIFIC | 10/1/2000 | $0.01 | 5 |
| S | D5960 | SPEECH AID PROSTHESIS, MODIFICAT | 10/1/2000 | $0.01 | 5 |
| S | D5982 | SURGICAL STENT | 1/1/2000 | NC | 9 |
| S | D5983 | RADIATION CARRIER | 10/1/2000 | $0.01 | 5 |
| S | D5984 | RADIATION SHIELD | 10/1/2000 | $0.01 | 5 |
| S | D5985 | RADIATION CONE LOCATOR | 10/1/2000 | $0.01 | 5 |
| S | D5986 | FLUORIDE GEL CARRIER | 10/1/2000 | $0.01 | 5 |
| S | D5987 | COMMISSURE SPLINT | 10/1/2000 | $0.01 | 5 |
| S | D5988 | SURGICAL SPLINT | 1/1/2000 | NC | 9 |
| S | D5999 | UNSPECIFIED MAXILLOFACIAL PROSTH | 1/1/2000 | NC | 9 |
| S | D6010 | SURGICAL PLACEMENT OF IMPLANT BO | 1/1/2000 | NC | 9 |
| S | D6012 | SURGICAL PLACEMENT OF INTERIM IM | 1/1/2007 | NC | 9 |
| S | D6020 | ABUTMENT PLACEMENT OF SUBSTITUTI | 1/1/2005 | INVALID | N |
| S | D6040 | SURGICAL PLACEMENT: EPOSTEAL IMP | 1/1/2000 | NC | 9 |
| S | D6050 | SURGICAL PLACEMENT: TRANSOSTEAL | 1/1/2000 | NC | 9 |
| S | D6053 | IMPLANT/ABUTMENT SUPPORTED REMOV | 1/1/2003 | NC | 9 |
| S | D6054 | IMPLANT/ABUTMENT SUPPORTED REMOV | 1/1/2003 | NC | 9 |
| S | D6055 | DENTAL IMPLANT SUPPORTED CONNECT | 1/1/2000 | NC | 9 |
| S | D6056 | PREFABRICATED ABUTMENT - INCLUDE | 1/1/2000 | NC | 9 |
| S | D6057 | CUSTOM ABUTMENT - INCLUDES PLACE | 1/1/2000 | NC | 9 |
| S | D6058 | ABUTMENT SUPPORTED PORCELAIN/CER | 1/1/2000 | NC | 9 |
| S | D6059 | ABUTMENT SUPPORTED PORCELAIN FUS | 1/1/2000 | NC | 9 |
| S | D6060 | ABUTMENT SUPPORTED PORCELAIN FUS | 1/1/2000 | NC | 9 |
| S | D6061 | ABUTMENT SUPPORTED PORCELAIN FUS | 1/1/2000 | NC | 9 |
| S | D6062 | ABUTMENT SUPPORTED CAST METAL CR | 1/1/2000 | NC | 9 |
| S | D6063 | ABUTMENT SUPPORTED CAST METAL CR | 1/1/2000 | NC | 9 |
| S | D6064 | ABUTMENT SUPPORTED CAST METAL CR | 1/1/2000 | NC | 9 |
| S | D6065 | IMPLANT SUPPORTED PORCELAIN/CERA | 1/1/2000 | NC | 9 |
| S | D6066 | IMPLANT SUPPORTED PORCELAIN FUSE | 1/1/2000 | NC | 9 |
| S | D6067 | IMPLANT SUPPORTED METAL CROWN (T | 1/1/2000 | NC | 9 |
| S | D6068 | ABUTMENT SUPPORTED RETAINER FOR | 1/1/2000 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D6069 | ABUTMENT SUPPORTED RETAINER FOR | 1/1/2000 | NC | 9 |
| S | D6070 | ABUTMENT SUPPORTED RETAINER FOR | 1/1/2000 | NC | 9 |
| S | D6071 | ABUTMENT SUPPORTED RETAINER FOR | 1/1/2000 | NC | 9 |
| S | D6072 | ABUTMENT SUPPORTED RETAINER FOR | 1/1/2000 | NC | 9 |
| S | D6073 | ABUTMENT SUPPORTED RETAINER FOR | 1/1/2000 | NC | 9 |
| S | D6074 | ABUTMENT SUPPORTED RETAINER FOR | 1/1/2000 | NC | 9 |
| S | D6075 | IMPLANT SUPPORTED RETAINER FOR C | 1/1/2000 | NC | 9 |
| S | D6076 | IMPLANT SUPPORTED RETAINER FOR P | 1/1/2000 | NC | 9 |
| S | D6077 | IMPLANT SUPPORTED RETAINER FOR C | 1/1/2000 | NC | 9 |
| S | D6078 | IMPLANT/ABUTMENT SUPPORTED FIXED | 1/1/2000 | NC | 9 |
| S | D6079 | IMPLANT/ABUTMENT SUPPORTED FIXED | 1/1/2000 | NC | 9 |
| S | D6080 | IMPLANT MAINTENANCE PROCEDURES, | 1/1/2000 | NC | 9 |
| S | D6090 | REPAIR IMPLANT SUPPORTED PROSTHE | 1/1/2000 | NC | 9 |
| S | D6091 | REPLACEMENT OF SEMI-PRECISION OR | 1/1/2007 | NC | 9 |
| S | D6092 | RECEMENT IMPLANT/ABUTMENT SUPPOR | 1/1/2007 | NC | 9 |
| S | D6093 | RECEMENT IMPLANT/ABUTMENT SUPPOR | 1/1/2007 | NC | 9 |
| S | D6094 | ABUTMENT SUPPORTED CROWN - (TITA | 1/1/2005 | NC | 9 |
| S | D6095 | REPAIR IMPLANT ABUTMENT, BY REPO | 1/1/2000 | NC | 9 |
| S | D6100 | IMPLANT REMOVAL, BY REPORT | 1/1/2000 | NC | 9 |
| S | D6190 | RADIOGRAPHIC/SURGICAL IMPLANT IN | 1/1/2005 | NC | 9 |
| S | D6194 | ABUTMENT SUPPORTED RETAINER CROW | 1/1/2005 | NC | 9 |
| S | D6199 | IMPLANT REMOVAL, BY REPORT | 1/1/2000 | NC | 9 |
| S | D6205 | PONTIC - INDIRECT RESIN BASED CO | 1/1/2005 | NC | 9 |
| S | D6210 | PONTIC-CAST HIGH NOBLE METAL | 1/1/2000 | NC | 9 |
| S | D6211 | PONTIC-CAST HIGH NOBLE METAL | 1/1/2000 | NC | 9 |
| S | D6212 | PONTIC-CAST NOBLE METAL | 1/1/2000 | NC | 9 |
| S | D6214 | PONTIC - TITANIUM | 1/1/2005 | NC | 9 |
| S | D6240 | PONTIC-PORCELAIN FUSED TO HIGH N | 1/1/2000 | NC | 9 |
| S | D6241 | PONTIC-PORCELAIN FUSED TO PREDOM | 1/1/2000 | NC | 9 |
| S | D6242 | PONTIC-PORCELAIN FUSED TO NOBLE | 1/1/2000 | NC | 9 |
| S | D6245 | PONTIC - PORCELAIN/CERAMIC | 1/1/2000 | NC | 9 |
| S | D6250 | PONTIC-RESIN WITH HIGH NOBLE MET | 1/1/2000 | NC | 9 |
| S | D6251 | PONTIC-RESIN WITH PREDOMINANTLY | 1/1/2000 | NC | 9 |
| S | D6252 | PONTIC-RESIN WITH PREDOMINANTLY | 1/1/2000 | NC | 9 |
| S | D6253 | PROVISIONAL PONTIC | 1/1/2003 | NC | 9 |
| S | D6519 | INLAY/ONLAY - PORCELAIN/CERAMIC | 4/1/2003 | INVALID | N |
| S | D6520 | INLAY - METALLIC - TWO SURFACES | 4/1/2003 | INVALID | N |
| S | D6530 | INLAY - METALLIC - THREE OR MORE | 4/1/2003 | INVALID | N |
| S | D6543 | ONLAY-METALLIC-THREE SURFACES | 4/1/2003 | INVALID | N |
| S | D6544 | ONLAY - METALLIC - THREE SURFACE | 4/1/2003 | INVALID | N |
| S | D6545 | RETAINER - CAST METAL FOR RESIN | 1/1/2000 | NC | 9 |
| S | D6548 | RETAINER - PORCELAIN/CERAMIC FOR | 1/1/2000 | NC | 9 |
| S | D6600 | INLAY - PORCELAIN/CERAMIC, TWO S | 1/1/2003 | NC | 9 |
| S | D6601 | INLAY - PORCELAIN/CERAMIC, THREE | 1/1/2003 | NC | 9 |
| S | D6602 | INLAY - CAST HIGH NOBLE METAL, T | 1/1/2003 | NC | 9 |
| S | D6603 | INLAY - CAST HIGH NOBLE METAL, T | 1/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D6604 | INLAY - CAST PREDOMINANTLY BASE | 1/1/2003 | NC | 9 |
| S | D6605 | INLAY - CST PREDOMINANTLY BASE M | 1/1/2003 | NC | 9 |
| S | D6606 | INLAY - CAST NOBLE METAL, TWO SU | 1/1/2003 | NC | 9 |
| S | D6607 | INLAY - CAST NOBLE METAL, THREE | 1/1/2003 | NC | 9 |
| S | D6608 | ONLAY - PORCELAIN/CERAMIC, TWO S | 1/1/2003 | NC | 9 |
| S | D6609 | ONLAY - PORCELAIN/CERAMIC, THREE | 1/1/2003 | NC | 9 |
| S | D6610 | ONLAY - CAST HIGH NOBLE METAL, T | 1/1/2003 | NC | 9 |
| S | D6611 | ONLAY - CAST HIGH NOBLE METAL, T | 1/1/2003 | NC | 9 |
| S | D6612 | ONLAY - CAST PREDOMINANTLY BASE | 1/1/2003 | NC | 9 |
| S | D6613 | ONLAY - CAST PREDOMINANTLY BASE | 1/1/2003 | NC | 9 |
| S | D6614 | ONLAY - CAST NOBLE METAL, TWO SU | 1/1/2003 | NC | 9 |
| S | D6615 | ONLAY - CAST NOBLE METAL, THREE | 1/1/2003 | NC | 9 |
| S | D6624 | INLAY - TITANIUM | 1/1/2005 | NC | 9 |
| S | D6634 | ONLAY - TITANIUM | 1/1/2005 | NC | 9 |
| S | D6710 | CROWN - INDIRECT RESIN BASED COM | 1/1/2005 | NC | 9 |
| S | D6720 | CROWN-RESIN WITH HIGH NOBLE META | 1/1/2000 | NC | 9 |
| S | D6721 | CROWN - RESIN WITH PREDOMINANTLY | 4/1/2000 | NC | 9 |
| S | D6722 | CROWN - RESIN WITH NOBLE METAL | 4/1/2000 | NC | 9 |
| S | D6740 | CROWN - PORCELAIN/CERAMIC | 1/1/2000 | NC | 9 |
| S | D6750 | CROWN - PORCELAIN FUSED TO HIGH | 1/1/2000 | NC | 9 |
| S | D6751 | CROWN-PORCELAIN FUSED TO PREDOMI | 1/1/2000 | NC | 9 |
| S | D6752 | CROWN - PORCELAIN FUSED TO NOBLE | 1/1/2000 | NC | 9 |
| S | D6780 | CROWN - 3/4 CAST HIGH NOBLE META | 1/1/2000 | NC | 9 |
| S | D6781 | CROWN - 3/4 CAST PREDOMINATELY B | 1/1/2000 | NC | 9 |
| S | D6782 | CROWN - 3/4 CAST NOBLE METAL | 1/1/2000 | NC | 9 |
| S | D6783 | CROWN - 3/4 PORCELAIN/CERAMIC | 1/1/2000 | NC | 9 |
| S | D6790 | CROWN-FULL CAST HIGH NOBLE METAL | 1/1/2000 | NC | 9 |
| S | D6791 | CROWN - FULL CAST PREDOMINANTLY | 1/1/2000 | NC | 9 |
| S | D6792 | CROWN - FULL CAST NOBLE METAL | 1/1/2000 | NC | 9 |
| S | D6793 | PROVISIONAL RETAINER CROWN | 1/1/2003 | NC | 9 |
| S | D6794 | CROWN - TITANIUM | 1/1/2005 | NC | 9 |
| S | D6920 | CONNECTOR BAR | 1/1/2000 | NC | 9 |
| S | D6930 | RECEMENT FIXED PARTIAL DENTURE | 10/1/2000 | $44.99 | 3 |
| S | D6940 | STRESS BREAKER | 1/1/2000 | NC | 9 |
| S | D6950 | PRECISION ATTACHMENT | 1/1/2000 | NC | 9 |
| S | D6970 | CAST POST AND CORE IN ADDITION T | 1/1/2000 | NC | 9 |
| S | D6971 | CAST POST AS PART OF FIXED PARTI | 1/1/2007 | INVALID | N |
| S | D6972 | PREFABRICATED POST AND CORE IN A | 10/1/2000 | $64.27 | 3 |
| S | D6973 | CORE BUILD UP FOR RETAINER; INCL | 1/1/2000 | NC | 9 |
| S | D6975 | COPING - METAL | 1/1/2000 | NC | 9 |
| S | D6976 | EACH ADDITIONAL CAST POST - SAME | 1/1/2000 | NC | 9 |
| S | D6977 | EACH ADDITIONAL PREFABRICATED PO | 1/1/2000 | NC | 9 |
| S | D6980 | FIXED PARTIAL DENTURE REPAIR, BY | 1/1/2000 | $0.01 | 5 |
| S | D6985 | PEDIATRIC PARTIAL DENTURE, FIXED | 1/1/2003 | NC | 9 |
| S | D6999 | UNSPECIFIED FIXED PROSTHODONTIC | 1/1/2000 | NC | 9 |
| S | D7110 | SINGLE TOOTH | 4/1/2003 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D7111 | EXTRACTION, CORONAL REMNANTS - D | 10/1/2004 | $30.00 | 3 |
| S | D7120 | EACH ADDITIONAL TOOTH | 4/1/2003 | INVALID | N |
| S | D7130 | ROOT REMOVAL - EXPOSED ROOTS | 4/1/2003 | INVALID | N |
| S | D7140 | EXTRACTION, ERUPTED TOOTH OR EXP | 1/1/2003 | $75.19 | 3 |
| S | D7210 | SURGICAL REM OF ERUPTED TOOTH RE | 10/1/2000 | $85.70 | 3 |
| S | D7220 | ROMOVAL OF IMPACTED TOOTH - SOFT | 1/1/2000 | $92.70 | 3 |
| S | D7230 | REMOVAL OF IMPACTED TOOTH - PART | 1/1/2000 | $125.66 | 3 |
| S | D7240 | REMOVAL OF IMPACTED TOOTH - COMP | 1/1/2000 | $154.50 | 3 |
| S | D7241 | REMOVAL OF IMPACTED TOOTH - COMP | 1/1/2000 | $0.01 | 5 |
| S | D7250 | SURGICAL REMOVAL OF RESIDUAL TOO | 1/1/2000 | $115.36 | 3 |
| S | D7260 | OROLANTRAL FISTULA CLOSURE | 10/1/2000 | $96.41 | 3 |
| S | D7261 | PRIMARY CLOSURE OF A SINUS PERFO | 1/1/2003 | NC | 9 |
| S | D7270 | TOOTH REIMPLANTATION AND/OR STAB | 10/1/2000 | $64.27 | 3 |
| S | D7272 | TOOTH TRANSPLANTATION (INC REIMP | 1/1/2000 | NC | 9 |
| S | D7280 | SURGICAL ACCESS OF AN UNERUPTED | 1/1/2000 | NC | 9 |
| S | D7281 | SURGICAL EXPOSURE OF IMPACTED OR | 1/1/2005 | INVALID | N |
| S | D7282 | MOBILIZATION OF ERUPTED OR MALPO | 1/1/2003 | NC | 9 |
| S | D7283 | PLACEMENT OF DEVICE TO FACILITAT | 1/1/2005 | NC | 9 |
| S | D7285 | BIOPSY OF ORAL TISSUE - HARD (BO | 10/1/2000 | $0.01 | 5 |
| S | D7286 | BIOPSY OF ORAL TISSUE - SOFT | 10/1/2000 | $48.20 | 3 |
| S | D7287 | EXFOLIATIVE CYTOLOGICAL SAMPLE C | 1/1/2003 | $0.01 | 5 |
| S | D7288 | BRUSH BIOPSY - TRANSEPITHELIAL S | 1/1/2005 | $0.01 | 5 |
| S | D7290 | SURGICAL REPOSITIONING OF TEETH | 1/1/2000 | NC | 9 |
| S | D7291 | TRANSSEPTAL FIBEROTOMY/SUPRA CRE | 1/1/2000 | NC | 9 |
| S | D7292 | SURGICAL PLACEMENT: TEMPORARY AN | 1/1/2007 | NC | 9 |
| S | D7293 | SURGICAL PLACEMENT: TEMPORARY AN | 1/1/2007 | NC | 9 |
| S | D7294 | SURGICAL PLACEMENT: TEMPORARY AN | 1/1/2007 | NC | 9 |
| S | D7310 | ALVEOLOPLASTY IN CONJUNCTION WIT | 1/1/2000 | NC | 9 |
| S | D7311 | ALVEOLOPLASTY IN CONJUNCTION WIT | 1/1/2005 | NC | 9 |
| S | D7320 | ALVEOLOPLASTY NOT IN CONJUNCTION | 10/1/2000 | $37.49 | 3 |
| S | D7321 | ALVEOLOPLASTY NOT IN CONJUNCTIN | 1/1/2005 | $0.01 | P |
| S | D7340 | VESTIBULOPLASTY - RIDGE EXTENSIO | 10/1/2000 | $0.01 | 5 |
| S | D7350 | VESTIBULOPLASTY RIDGE EXTENSION | 10/1/2000 | $0.01 | 5 |
| S | D7410 | EXCISION OF BENIGN LESION UP TO | 1/1/2000 | NC | 9 |
| S | D7411 | EXCISION OF BENIGN LESION GREATE | 1/1/2003 | NC | 9 |
| S | D7412 | EXCISION OF BENIGN LESION, COMPL | 1/1/2003 | NC | 9 |
| S | D7413 | EXCISION OF MALIGNANT LESION UP | 1/1/2003 | NC | 9 |
| S | D7414 | EXCISION OF MALIGNANT LESION GRE | 1/1/2003 | NC | 9 |
| S | D7415 | EXCISION OF MALIGNANT LESION, CO | 1/1/2003 | NC | 9 |
| S | D7420 | RADICAL EXCISION - LESION DIAMET | 4/1/2003 | INVALID | N |
| S | D7430 | EXCISION OF BENIGN TUMOR - LESIO | 4/1/2003 | INVALID | N |
| S | D7431 | EXCISION OF BENIGN TUMOR - LESIO | 4/1/2003 | INVALID | N |
| S | D7440 | EXCISION OF MALIGNANT TUMOR - LE | 10/1/2000 | $0.01 | 5 |
| S | D7441 | EXCISION OF MALIGNANT TUMOR - LE | 10/1/2000 | $0.01 | 5 |
| S | D7450 | REMOVAL OF BENIGN ODONTOGENIC CY | 10/1/2004 | $165.75 | 3 |
| S | D7451 | REMOVAL OF BENIGN ODONTOGENIC CY | 10/1/2000 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D7460 | REMOVAL OF BENIGN NONODONTOGENIC | 1/1/2000 | NC | 9 |
| S | D7461 | REMOVAL OF BENIGN NONODONTOGENIC | 1/1/2000 | NC | 9 |
| S | D7465 | DESTRUCTION OF LESION(S) BY PHYS | 1/1/2005 | NC | 9 |
| S | D7471 | REMOVAL OF LATERAL EXOSTOSIS (MA | 10/1/2000 | $37.49 | 3 |
| S | D7472 | REMOVAL OF TORUS PALATINUS | 1/1/2003 | NC | 9 |
| S | D7473 | REMOVAL OF TORUS MANDIBULARIS | 1/1/2003 | NC | 9 |
| S | D7480 | PARTIAL OSTECTOMY (GUTTERING OR | 4/1/2003 | INVALID | N |
| S | D7485 | SURGICAL REDUCTION OF OSSEOUS TU | 1/1/2003 | NC | 9 |
| S | D7490 | RADICAL RESECTION OF MAXILLA OR | 10/1/2000 | $0.01 | 5 |
| S | D7510 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2000 | $66.95 | 3 |
| S | D7511 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2005 | $0.01 | 5 |
| S | D7520 | INCISION AND DRAINAGE OF ABSCESS | 10/1/2000 | $40.71 | 3 |
| S | D7521 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2005 | $0.01 | 5 |
| S | D7530 | REMOVAL OF FOREIGN BODY FROM MUC | 10/1/2000 | $85.70 | 3 |
| S | D7540 | REMOVAL OF REACTION - PRODUCING | 10/1/2000 | $0.01 | 5 |
| S | D7550 | PARTIAL OSTECTOMY/SEQUESTRECTOMY | 10/1/2000 | $0.01 | 5 |
| S | D7560 | MAXILLARY SINUSOTOMY FOR REMOVAL | 10/1/2000 | $0.01 | 5 |
| S | D7610 | MAXILLA - OPEN REDUCTION (TEETH | 10/1/2000 | $0.01 | 5 |
| S | D7620 | MAXILLA - CLOSED REDUCTION (TEET | 10/1/2000 | $0.01 | 5 |
| S | D7630 | MANDIBLE - OPEN REDUCTION (TEETH | 10/1/2000 | $0.01 | 5 |
| S | D7640 | MANDIBLE - CLOSED REDUCTION (TEE | 10/1/2000 | $0.01 | 5 |
| S | D7650 | MALAR AND/OR ZYGOMATIC ARCH - OP | 10/1/2000 | $0.01 | 5 |
| S | D7660 | MALAR AND/OR ZYGOMATIC ARCH - CL | 10/1/2000 | $0.01 | 5 |
| S | D7670 | ALVEOLUS - CLOSED REDUCTION, MAY | 10/1/2004 | $331.90 | 3 |
| S | D7671 | ALVEOLUS - OPEN REDUCTION, MAY I | 1/1/2003 | NC | 9 |
| S | D7680 | FACIAL BONES - COMPLICATED REDUC | 10/1/2000 | $0.01 | 5 |
| S | D7710 | MAXILLA - OPEN REDUCTION | 10/1/2000 | $0.01 | 5 |
| S | D7720 | MAXILLA - CLOSED REDUCTION | 10/1/2000 | $62.13 | 3 |
| S | D7730 | MANDIBLE - OPEN REDUCTION | 10/1/2000 | $0.01 | 5 |
| S | D7740 | MANDIBLE - CLOSED REDUCTION | 10/1/2000 | $0.01 | 5 |
| S | D7750 | MALAR AND/OR ZYGOMATIC ARCH - OP | 10/1/2000 | $0.01 | 5 |
| S | D7760 | MALAR AND/OR ZYGOMATIC ARCH - CL | 10/1/2000 | $0.01 | 5 |
| S | D7770 | ALVEOLUS - OPEN REDUCTION STABIL | 10/1/2000 | $0.01 | 5 |
| S | D7771 | ALVEOLUS - CLOSED REDUCTION STAB | 1/1/2003 | NC | 9 |
| S | D7780 | FACIAL BONES - COMPLICATED REDUC | 10/1/2000 | $0.01 | 5 |
| S | D7810 | OPEN REDUCTION OF DISLOCATION | 1/1/2000 | NC | 9 |
| S | D7820 | CLOSED REDUCTION OF DISLOCATION | 1/1/2000 | NC | 9 |
| S | D7830 | MANIPULATION UNDER ANESTHESIA | 1/1/2000 | NC | 9 |
| S | D7840 | CONDYLECTOMY | 1/1/2000 | NC | 9 |
| S | D7850 | SURGICAL DISCECTOMY, WITH/WITHOU | 1/1/2000 | NC | 9 |
| S | D7852 | DISC REPAIR | 1/1/2000 | NC | 9 |
| S | D7854 | SYNOVECTOMY | 1/1/2000 | NC | 9 |
| S | D7856 | MYOTOMY | 1/1/2000 | NC | 9 |
| S | D7858 | JOINT RECONSTRUCTION | 1/1/2000 | NC | 9 |
| S | D7860 | ARTHROTOMY | 1/1/2000 | NC | 9 |
| S | D7865 | ARTHROPLASTY | 1/1/2000 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D7870 | ARTHROCENTESIS | 1/1/2000 | NC | 9 |
| S | D7871 | NON-ARTHROSCOPIC LYSIS AND LAVAG | 1/1/2000 | NC | 9 |
| S | D7872 | ARTHROSCOPY - DIAGNOSIS, WITH OR | 1/1/2000 | NC | 9 |
| S | D7873 | ARTHROSCOPY - SURGICAL: LAVAGE A | 1/1/2000 | NC | 9 |
| S | D7874 | ARTHROSCOPY - SURGICAL: DISC REP | 1/1/2000 | NC | 9 |
| S | D7875 | ARTHROSCOPY - SURGICAL: SYNOVECT | 1/1/2000 | NC | 9 |
| S | D7876 | ARTHROSCOPY - SURGICAL: DISCECTO | 1/1/2000 | NC | 9 |
| S | D7877 | ARTHROSCOPY - SURGICAL; DEBRIDEM | 1/1/2000 | NC | 9 |
| S | D7880 | OCCLUSAL ORTHOTIC DEVICE, BY REP | 4/1/2000 | NC | 9 |
| S | D7899 | UNSPECIFIED TMD THERAPY, BY REPO | 1/1/2000 | NC | 9 |
| S | D7910 | SUTURE OF RECENT SMALL WOUNDS UP | 10/1/2000 | $62.40 | 3 |
| S | D7911 | COMPLICATED SUTURE - UP TO FIVE | 10/1/2000 | $93.60 | 3 |
| S | D7912 | COMPLICATED SUTURE - GREATER THA | 10/1/2000 | $135.20 | 3 |
| S | D7920 | SKIN GRAFT (IDENTIFY DEFECT COVE | 10/1/2000 | $0.01 | 5 |
| S | D7940 | OSTEOPLASTY - FOR ORTHOGNATHIC D | 1/1/2000 | NC | 9 |
| S | D7941 | OSTEOTOMY - RAMUS, CLOSED | 1/1/2000 | NC | 9 |
| S | D7943 | OSTEOTOMY - MANDIBULAR RAMI WITH | 1/1/2000 | NC | 9 |
| S | D7944 | OSTEOTOMY - SEGMENTED OR SUBAPIC | 1/1/2000 | NC | 9 |
| S | D7945 | OSTEOTOMY - BODY OF MANDIBLE | 1/1/2000 | NC | 9 |
| S | D7946 | LEFORT I (MAXILLA TOTAL) | 1/1/2000 | NC | 9 |
| S | D7947 | LEFORT I (MAXILLA SEGMENTED) | 1/1/2000 | NC | 9 |
| S | D7948 | LEFORT II OR LEFORT III (OSTEOPL | 1/1/2000 | NC | 9 |
| S | D7949 | LEFORT II OR LEFORT III WITH BON | 1/1/2000 | NC | 9 |
| S | D7950 | OSSEOUS, OSTEOPERIOSTEAL, OR CAR | 1/1/2000 | $0.01 | 5 |
| S | D7951 | SINUS AUGMENTATION WITH BONE OR | 1/1/2007 | NC | 9 |
| S | D7953 | BONE REPLACEMENT GRAFT FOR RIDGE | 1/1/2005 | NC | 9 |
| S | D7955 | REPAIR OF MAXILLOFACIAL SOFT AND | 1/1/2000 | NC | 9 |
| S | D7960 | FRENULECTOMY (FRENECTOMY OR FREN | 1/1/2000 | NC | 9 |
| S | D7963 | FRENULOPLASTY | 1/1/2005 | NC | 9 |
| S | D7970 | EXCISION OF HYPERPLASTIC TISSUE | 10/1/2000 | $64.27 | 3 |
| S | D7971 | EXCISION OF PERICORONAL GINGIVA | 1/1/2000 | NC | 9 |
| S | D7972 | SURGICAL REDUCTION OF FIBROUS TU | 1/1/2003 | NC | 9 |
| S | D7980 | SIALOLITHOTOMY | 10/1/2000 | $0.01 | 5 |
| S | D7981 | EXCISION OF SALIVARY GLAND, BY R | 1/1/2000 | $0.01 | 5 |
| S | D7982 | SIALODOCHOPLASTY | 10/1/2000 | $0.01 | 5 |
| S | D7983 | CLOSURE OF SALIVARY FISTULA | 10/1/2000 | $0.01 | 5 |
| S | D7990 | EMERGENCY TRACHEOTOMY | 10/1/2000 | $0.01 | 5 |
| S | D7991 | CORONOIDECTOMY | 1/1/2000 | NC | 9 |
| S | D7995 | SYNTHETIC GRAFT - MANDIBLE OR FA | 1/1/2000 | NC | 9 |
| S | D7996 | IMPLANT-MANDIBLE FOR AUGMENTATIO | 1/1/2000 | NC | 9 |
| S | D7997 | APPLIANCE REMOVAL (NOT BY DENTIS | 1/1/2000 | $0.01 | 5 |
| S | D7998 | INTRAORAL PLACEMENT OF A FIXATIO | 1/1/2007 | NC | 9 |
| S | D7999 | UNSPECIFIED ORAL SURGERY PROCEDU | 1/1/2000 | NC | 9 |
| S | D8010 | LIMITED ORTHODONTIC TREATMENT OF | 1/1/2000 | $0.01 | 5 |
| S | D8020 | LIMITED ORTHODONTIC TREATMENT OF | 1/1/2000 | $0.01 | 5 |
| S | D8030 | LIMITED ORTHODONTIC TREATMENT OF | 1/1/2000 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D8040 | LIMITED ORTHODONTIC TREATMENT OF | 1/1/2000 | $0.01 | 5 |
| S | D8050 | INTERCEPTIVE ORTHODONTIC TREATME | 1/1/2000 | $0.01 | 5 |
| S | D8060 | INTERCEPTIVE ORTHODONTIC TREATME | 1/1/2000 | $0.01 | 5 |
| S | D8070 | COMPREHENSIVE ORTHODONTIC TREATM | 10/1/2000 | $0.01 | 5 |
| S | D8080 | COMPREHENSIVE ORTHODONTIC TREATM | 1/1/2000 | $0.01 | 5 |
| S | D8090 | COMPREHENSIVE ORTHODONTIC TREATM | 10/1/2000 | $0.01 | 5 |
| S | D8100 | ORTHODONTIC RECORDS NOT TO BE PA | 4/1/2001 | NC | 9 |
| S | D8110 | REMOVABLE APPLIANCE THERAPY | 1/1/2005 | INVALID | N |
| S | D8120 | FIXED APPLIANCE THERAPY | 1/1/2005 | INVALID | N |
| S | D8200 | ORTHODONTIC EXAMINATION | 10/1/2004 | NC | 9 |
| S | D8210 | REMOVABLE APPLIANCE THERAPY | 1/1/2000 | $0.01 | 5 |
| S | D8220 | FIXED APPLIANCE THERAPY | 1/1/2000 | $0.01 | 5 |
| S | D8360 | REMOVABLE APPLIANCE THERAPY | 1/1/2005 | INVALID | N |
| S | D8370 | FIXED APPLIANCE THERAPY | 1/1/2005 | INVALID | N |
| S | D8460 | CLASS I MALOCCLUSION | 1/1/2005 | INVALID | N |
| S | D8470 | CLASS II MALOCCLUSION | 1/1/2005 | INVALID | N |
| S | D8480 | CLASS III MALOCCLUSION | 1/1/2005 | INVALID | N |
| S | D8560 | CLASS I MALOCCLUSION | 1/1/2005 | INVALID | N |
| S | D8570 | CLASS II MALOCCLUSION | 1/1/2005 | INVALID | N |
| S | D8580 | CLASS III MALOCCLUSION | 1/1/2005 | INVALID | N |
| S | D8650 | TREATMENT OF THE ATYPICAL OR EXT | 1/1/2005 | INVALID | N |
| S | D8660 | PRE-ORTHODONTIC TREATMENT VISIT | 1/1/2000 | $0.01 | 5 |
| S | D8670 | PERIODIC ORTHODONTIC TREATMENT V | 1/1/2000 | $0.01 | 5 |
| S | D8680 | ORTHODONTIC RETENTION (REMOVAL O | 1/1/2000 | $0.01 | 5 |
| S | D8690 | ORTHODONTIC TREATMENT, (ALTERNAT | 1/1/2000 | $0.01 | 5 |
| S | D8691 | REPAIR OF ORTHODONTIC APPLIANCE | 1/1/2000 | NC | 9 |
| S | D8692 | REPLACEMENT OF LOST OR BROKEN RE | 1/1/2000 | NC | 9 |
| S | D8693 | REBONDING OR RECEMENTING; AND/OR | 1/1/2007 | NC | 9 |
| S | D8750 | POST TREATMENT STABILIZATION | 10/1/2000 | $0.01 | 5 |
| S | D8999 | UNSPECIFIED ORTHODONTIC PROCEDUR | 1/1/2000 | $0.01 | 5 |
| S | D9110 | PALLIATIVE (EMERGENCY) TREATMENT | 1/1/2000 | $44.29 | 3 |
| S | D9120 | FIXED PARTIAL DENTURE SECTIONING | 1/1/2007 | NC | 9 |
| S | D9210 | LOCAL ANESTHESIA NOT IN CONJUNCT | 1/1/2000 | NC | 9 |
| S | D9211 | REGIONAL BLOCK ANESTHESIA | 10/1/2000 | $0.01 | 5 |
| S | D9212 | TRIGEMINAL DIVISION BLOCK ANESTH | 10/1/2000 | $26.78 | 3 |
| S | D9215 | LOCAL ANESTHESIA | 1/1/2000 | NC | 9 |
| S | D9220 | DEEP SEDATION/GENERAL ANESTHESIA | 10/1/2000 | $117.83 | 3 |
| S | D9221 | DEEP SEDATION/GENERAL ANESTHESIA | 10/1/2000 | $28.92 | 3 |
| S | D9230 | ANALGESIA, ANXIOLYSIS, INHALATIO | 10/1/2000 | $8.57 | 3 |
| S | D9241 | INTRAVENOUS CONSCIOUS SEDATION/A | 10/1/2001 | $108.15 | 3 |
| S | D9242 | INTRAVENOUS CONSCIOUS SEDATION/A | 1/1/2000 | $0.01 | 5 |
| S | D9248 | NON-INTRAVENOUS CONSCIOUS SEDATI | 1/1/2002 | $75.00 | 3 |
| S | D9310 | CONSULTATION (DIAGNOSTIC SERVICE | 10/1/2000 | $26.78 | 3 |
| S | D9410 | HOUSE/EXTENDED CARE FACILITY CAL | 1/1/2000 | NC | 9 |
| S | D9420 | HOSPITAL CALL | 10/1/2000 | $107.12 | 3 |
| S | D9430 | OFFICE VISIT FOR OBSERVATION (DU | 10/1/2000 | $8.57 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | D9440 | OFFICE VISIT AFTER REGULARLY SCH | 10/1/2000 | $35.35 | 3 |
| S | D9450 | CASE PRESENTATION, DETAILED AND | 1/1/2003 | NC | 9 |
| S | D9610 | THERAPEUTIC DRUG INJECTION, BY R | 10/1/2000 | $12.85 | 3 |
| S | D9612 | THERAPEUTIC PARENTERAL DRUGS, TW | 1/1/2007 | $0.01 | 5 |
| S | D9630 | ORAL DRUGS AND/OR MEDICAMENTS, B | 4/1/2000 | $41.20 | 3 |
| S | D9910 | APPLICATION OF DESENSITIZING MED | 1/1/2000 | NC | 9 |
| S | D9911 | APPLICATION OF DESENSIIZING RESI | 1/1/2000 | NC | 9 |
| S | D9920 | BEHAVIOR MANAGEMENT, BY REPORT | 10/1/2000 | $0.01 | 5 |
| S | D9930 | TREATMENT OF COMPLICATIONS (POST | 1/1/2000 | $0.01 | 5 |
| S | D9940 | OCCLUSAL GUARD, BY REPORT | 1/1/2000 | NC | 9 |
| S | D9941 | FABRICATION OF ATHLETIC MOUTHGUA | 1/1/2000 | NC | 9 |
| S | D9942 | REPAIR AND/OR RELINE OF OCCLUSAL | 1/1/2005 | NC | 9 |
| S | D9950 | OCCLUSION ANALYSIS - MOUNTED CAS | 1/1/2000 | NC | 9 |
| S | D9951 | OCCLUSAL ADJUSTMENT - LIMITED | 1/1/2000 | NC | 9 |
| S | D9952 | OCCLUSAL ADJUSTMENT - COMPLETE | 1/1/2000 | NC | 9 |
| S | D9970 | ENAMEL MICROABRASION | 1/1/2000 | NC | 9 |
| S | D9971 | ODONTOPLASTY 1-2 TEETH; INLUDES | 1/1/2000 | NC | 9 |
| S | D9972 | EXTERNAL BLEACHING - PER ARCH | 1/1/2000 | NC | 9 |
| S | D9973 | EXTERNAL BLEACHING - PER TOOTH | 1/1/2000 | NC | 9 |
| S | D9974 | INTERNAL BLEACHING - PER TOOTH | 1/1/2000 | NC | 9 |
| S | D9999 | UNSPECIFIED ADJUNCTIVE PROCEDURE | 1/1/2000 | $0.01 | 5 |
| S | E0602 | BREAST PUMP, MANUAL, ANY TYPE | 10/1/2005 | $15.48 | 3 |
| S | E0776 | IV POLE | 1/1/2003 | $93.30 | 3 |
| S | E0779 | AMBULATORY INFUSION PUMP, MECHAN | 4/1/2003 | $21.34 | 3 |
| S | E0780 | AMBULATORY INFUSION PUMP, MECHAN | 4/1/2003 | $15.34 | 3 |
| S | E0783 | INFUSION PUMP SYSTEM, IMPLANTABL | 1/1/1998 | NC | 9 |
| S | E1210 | SINGLE VISION LENS SPHERO CYLIND | 1/1/2006 | INVALID | N |
| S | E1300 | SINGLE VISION LENS 4.25 TO 8.00 | 10/1/2000 | NC | 9 |
| S | G0001 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2005 | INVALID | N |
| S | G0151 | SERVICES OF PHYSICAL THERAPIST I | 1/1/2000 | NC | 9 |
| S | G0152 | SERVICES OF OCCUPATIONAL THERAPI | 1/1/2000 | NC | 9 |
| S | G0153 | SERVICES OF SPEECH AND LANGUAGE | 1/1/2000 | NC | 9 |
| S | G0154 | SERVICES OF SKILLED NURSE IN HOM | 1/1/2000 | NC | 9 |
| S | G0155 | SERVICES OF CLINICAL SOCIAL WORK | 1/1/2000 | NC | 9 |
| S | G0156 | SERVICES OF HOME HEALTH AIDE IN | 1/1/2000 | NC | 9 |
| S | G0166 | EXTERNAL COUNTERPULSATION, PER T | 1/1/2000 | NC | 9 |
| S | G0167 | HYPERBARIC OXYGEN TREATMENT NOT | 4/1/2004 | INVALID | N |
| S | G0176 | ACTIVITY THERAPY RELATED TO THE | 10/1/2003 | $16.95 | 3 |
| S | G0177 | TRAINING AND EDUCATIONAL SERVICE | 10/1/2003 | $47.22 | 3 |
| S | G0369 | PHARMACY SUPPLY FEE FOR INTITIAL | 1/1/2006 | INVALID | N |
| S | G0370 | PHARMACY SUPPLY FEE FOR ORAL ANT | 1/1/2006 | INVALID | N |
| S | G0371 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | INVALID | N |
| S | G0374 | PHARMACY DISPENSING FEE FOR INHA | 1/1/2006 | INVALID | N |
| S | G9001 | COORDINATED CARE FEE (MCM INITIA | 4/1/2003 | $22.93 | 3 |
| S | G9002 | COORDINATED CARE FEE (MCM FULL C | 4/1/2003 | $70.00 | 3 |
| S | G9003 | COORDINATED CARE FEE, RISK ADJUS | 1/1/2003 | $0.01 | P |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | G9004 | COORDINATED CARE FEE, RISK ADJUS | 1/1/2003 | $0.01 | P |
| S | G9005 | COORDINATED CARE FEE, (MCM FULL- | 4/1/2003 | $120.00 | 3 |
| S | G9006 | COORDINATED CARE FEE (MCM-HOME/E | 4/1/2003 | $40.00 | 3 |
| S | G9009 | COORDINATED CARE FEE (MCM-PARTIA | 4/1/2003 | $35.00 | 3 |
| S | G9010 | COORDINATED CARE FEE (MCM-PARTIA | 4/1/2003 | $60.00 | 3 |
| S | G9011 | COORDINATED CARE FEE (MCM-TELEPH | 4/1/2003 | $10.00 | 3 |
| S | G9012 | COORDINATED CARE FEE (MCM-CASE M | 4/1/2003 | $40.00 | 3 |
| S | G9016 | SMOKING CESSATION COUNSELING, IN | 4/1/2001 | $10.00 | 3 |
| S | G9037 | SERVICES PROVIDED BY REHABILITAT | 10/1/2005 | INVALID | N |
| S | G9041 | SERVICES PROVIDED BY A QUALIFIED | 1/1/2005 | NC | 9 |
| S | G9042 | SERVICES PROVIDED BY AN ORIENTAT | 1/1/2005 | NC | 9 |
| S | G9043 | SERVICES PROVIDED BY A LOW VISIO | 1/1/2005 | NC | 9 |
| S | G9044 | SERVICES PROVIDED BY A CERTIFIED | 1/1/2005 | NC | 9 |
| S | H0001 | ALCOHOL AND/OR DRUG ASSESSMENT | 1/1/2003 | $0.01 | P |
| S | H0002 | BEHAVIORAL HEALTH SCREENING TO D | 1/1/2003 | $0.01 | P |
| S | H0003 | ALCOHOL AND/OR DRUG SCREENING; L | 1/1/2003 | $0.01 | P |
| S | H0004 | BEHAVIORAL HEALTH COUNSELING AND | 10/1/2003 | $22.25 | 3 |
| S | H0005 | ALCOHOL AND/OR DRUG SERVICES; GR | 1/1/2003 | $0.01 | P |
| S | H0006 | ALCOHOL AND/OR DRUG SERVICES; CA | 10/1/2003 | NC | 9 |
| S | H0007 | ALCOHOL AND/OR DRUG SERVICES; CR | 1/1/2003 | $0.01 | P |
| S | H0008 | ALCOHOL AND/OR DRUG SERVICES; SU | 1/1/2003 | $0.01 | P |
| S | H0009 | ALCOHOL AND/OR DRUG SERVICES; AC | 1/1/2003 | $0.01 | P |
| S | H0010 | ALCOHOL AND/OR DRUG SERVICES; SU | 1/1/2003 | $0.01 | P |
| S | H0011 | ALCOHOL AND/OR DRUG SERVICES; AC | 1/1/2003 | $0.01 | P |
| S | H0012 | ALCOHOL AND/OR DRUG SERVICES; SU | 1/1/2003 | $0.01 | P |
| S | H0013 | ALCOHOL AND/OR DRUG SERVICES; AC | 1/1/2003 | $0.01 | P |
| S | H0014 | ALCOHOL AND/OR DRUG SERVICES; AM | 1/1/2003 | $0.01 | P |
| S | H0015 | ALCOHOL AND/OR DRUG SERVICES; IN | 1/1/2003 | $0.01 | P |
| S | H0016 | ALCOHOL AND/OR DRUG SERVICES; ME | 1/1/2003 | $0.01 | P |
| S | H0017 | BEHAVIORAL HEALTH; RESIDENTIAL, | 4/1/2006 | $121.00 | 3 |
| S | H0018 | BEHAVIORAL HEALTH; SHORT-TERM RE | 4/1/2006 | $121.00 | 3 |
| S | H0019 | BEHAVIORAL HEALTH; LONG-TERM RES | 4/1/2006 | $121.00 | 3 |
| S | H0020 | ALCOHOL AND/OR DRUG SERVICES; ME | 1/1/2003 | $0.01 | P |
| S | H0021 | ALCOHOL AND/OR DRUG TRAINING SER | 1/1/2003 | $0.01 | P |
| S | H0022 | ALCOHOL AND/OR DRUG INTERVENTION | 10/1/2003 | NC | 9 |
| S | H0023 | BEHAVIORAL HEALTH OUTREACH SERVI | 10/1/2003 | NC | 9 |
| S | H0024 | BEHAVIORAL HEALTH PREVENTION INF | 1/1/2003 | $0.01 | P |
| S | H0025 | BEHAVIORAL HEALTH PREVENTION EDU | 1/1/2003 | $0.01 | P |
| S | H0026 | ALCOHOL AND/OR DRUG PREVENTION P | 1/1/2003 | $0.01 | P |
| S | H0027 | ALCOHOL AND/OR DRUG PREVENTION E | 1/1/2003 | $0.01 | P |
| S | H0028 | ALCOHOL AND/OR DRUG PREVENTION P | 1/1/2003 | $0.01 | P |
| S | H0029 | ALCOHOL AND/OR DRUG PREVENTION A | 1/1/2003 | $0.01 | P |
| S | H0030 | BEHAVIORAL HEALTH HOTLINE SERVIC | 1/1/2003 | $0.01 | P |
| S | H0031 | MENTAL HEALTH ASSESSMENT, BY NON | 10/1/2003 | $89.00 | 3 |
| S | H0032 | MENTAL HEALTH SERVICE PLAN DEVEL | 4/1/2005 | $89.00 | 3 |
| S | H0033 | ORAL MEDICATION ADMINISTRATION, | 1/1/2003 | $0.01 | P |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | H0034 | MEDICATION TRAINING AND SUPPORT, | 10/1/2003 | $15.74 | 3 |
| S | H0035 | MENTAL HEALTH PARTIAL HOSPITALIZ | 1/1/2003 | $0.01 | P |
| S | H0036 | COMMUNITY PSYCHIATRIC SUPPORTIVE | 10/1/2003 | $7.87 | 3 |
| S | H0037 | COMMUNITY PSYCHIATRIC SUPPORTIVE | 7/1/2003 | $0.01 | 1 |
| S | H0038 | SELF-HELP/PEER SERVICES, PER 15 | 1/1/2003 | $0.01 | P |
| S | H0039 | ASSERTIVE COMMUNITY TREATMENT, F | 1/1/2006 | $15.72 | 3 |
| S | H0040 | ASSERTIVE COMMUNITY TREATMENT PR | 7/1/2005 | $0.01 | 1 |
| S | H0041 | FOSTER CARE, CHILD, NON-THERAPEU | 1/1/2003 | NC | 9 |
| S | H0042 | FOSTER CARE, CHILD, NON-THERAPEU | 1/1/2003 | NC | 9 |
| S | H0043 | SUPPORTED HOUSING, PER DIEM | 1/1/2003 | NC | 9 |
| S | H0044 | SUPPORTED HOUSING, PER MONTH | 1/1/2003 | NC | 9 |
| S | H0045 | RESPITE CARE SERVICES, NOT IN TH | 1/1/2003 | $0.01 | P |
| S | H0046 | THERAPEUTIC FOSTER CARE/PROCTOR | 7/1/2005 | $0.01 | 1 |
| S | H0047 | ALCOHOL AND/OR OTHER DRUG ABUSE | 1/1/2003 | NC | 9 |
| S | H0049 | ALCOHOL AND/OR DRUG SCREENING | 1/1/2007 | NC | 9 |
| S | H0050 | ALCOHOL AND/OR DRUG SERVICES, BR | 1/1/2007 | NC | 9 |
| S | H2010 | COMPREHENSIVE MEDICATION SERVICE | 10/1/2003 | $22.25 | 3 |
| S | H2011 | CRISIS INTERVENTION SERVICE, PER | 1/1/2004 | $0.01 | P |
| S | H2012 | BEHAVIORAL HEALTH DAY TREATMENT, | 7/1/2003 | $0.01 | 1 |
| S | H2013 | PSYCHIATRIC HEALTH FACILITY SERV | 10/1/2003 | $432.58 | 3 |
| S | H2014 | SKILLS TRAINING AND DEVELOPMENT, | 10/1/2003 | $2.74 | 3 |
| S | H2015 | THERAPEUTIC FOSTER CARE/PROCTOR | 7/1/2005 | $0.01 | 1 |
| S | H2016 | COMPREHENSIVE COMMUNITY SUPPORT | 1/1/2004 | NC | 9 |
| S | H2017 | PSYCHOSOCIAL REHABILITATION SERV | 1/1/2004 | NC | 9 |
| S | H2018 | PSYCHOSOCIAL REHABILITATION SERV | 7/1/2003 | $93.47 | 3 |
| S | H2019 | THERAPEUTIC BEHAVIORAL SERVICES, | 1/1/2004 | NC | 9 |
| S | H2020 | THERAPEUTIC BEHAVIORAL SERVICES, | 7/1/2003 | $62.87 | 3 |
| S | H2021 | COMMUNITY BASED WRAPAROUND SERVI | 1/1/2003 | $0.01 | P |
| S | H2022 | COMMUNITY BASED WRAPAROUND SERVI | 1/1/2003 | $0.01 | P |
| S | H2023 | SUPPORTED EMPLOYEMENT, PER 15 MI | 10/1/2003 | $15.74 | 3 |
| S | H2024 | SUPPORTED EMPLOYMENT, PER DIEM | 1/1/2004 | NC | 9 |
| S | H2025 | ONGOING SUPPORT TO MAINTAIN EMPL | 1/1/2004 | NC | 9 |
| S | H2026 | ONGOING SUPPORT TO MAINTAIN EMPL | 1/1/2004 | NC | 9 |
| S | H2027 | PSYCHOEDUCATIONAL SERVICE, PER 1 | 1/1/2004 | $0.01 | P |
| S | H2028 | SEXUAL OFFENDER TREATMENT SERVIC | 1/1/2004 | NC | 9 |
| S | H2029 | SEXUAL OFFENDER TREATMENT SERVIC | 1/1/2004 | NC | 9 |
| S | H2030 | MENTAL HEALTH CLUBHOUSE SERVICES | 1/1/2004 | NC | 9 |
| S | H2031 | MENTAL HEALTH CLUBHOUSE SERVICES | 1/1/2004 | NC | 9 |
| S | H2032 | ACTIVITY THERAPY, PER 15 MINUTES | 4/1/2005 | $7.87 | 3 |
| S | H2033 | MULTISYSTEMIC THERAPY FOR JUVENI | 10/1/2003 | $22.25 | 3 |
| S | H2034 | ALCOHOL AND/OR DRUG ABUSE HALFWA | 1/1/2004 | NC | 9 |
| S | H2036 | ALCOHOL AND/OR OTHER DRUG TREATM | 1/1/2004 | NC | 9 |
| S | H2037 | DEVELOPMENTAL DELAY PREVENTION A | 1/1/2004 | NC | 9 |
| S | J1330 | INJECTION, ERGONOVINE MALEATE, U | 8/1/2004 | $4.93 | 3 |
| S | J1750 | INJECTION, IRON DEXTRAN, 50 MG | 1/1/2006 | INVALID | N |
| S | J2210 | INJECTION, METHYLERGONOVINE MALE | 1/1/2007 | $4.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | J2590 | INJECTION, OXYTOCIN, UP TO 10 UN | 1/1/2007 | $2.18 | 3 |
| S | J2788 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $26.17 | 3 |
| S | J2790 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $81.59 | 3 |
| S | J2792 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $16.52 | 3 |
| S | J3430 | INJECTION, PHYTONADIONE (VITAMIN | 1/1/2007 | $2.89 | 3 |
| S | J7030 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $1.06 | 3 |
| S | J7050 | INFUSION, NORMAL SALINE SOLUTION | 1/1/2007 | $0.27 | 3 |
| S | J7060 | 5% DEXTROSE/WATER (500 ML = 1 UN | 1/1/2007 | $1.30 | 3 |
| S | J7070 | INFUSION, D-5-W, 1000 CC | 1/1/2007 | $2.60 | 3 |
| S | J7120 | RINGERS LACTATE INFUSION, UP TO | 1/1/2007 | $0.88 | 3 |
| S | J7502 | CYCLOSPORINE, ORAL, 100 MG (NEOR | 1/1/2007 | $3.54 | 3 |
| S | J7515 | CYCLOSPORINE, ORAL, 25 MG (NEORA | 1/1/2007 | $0.95 | 3 |
| S | J7516 | CYCLOSPORINE, PARENTERAL, 250 MG | 1/1/2007 | $20.64 | 3 |
| S | K0100 | OCCUPATIONAL THERAPY UP TO 30 MI | 4/1/2004 | INVALID | N |
| S | K0455 | INFUSION PUMP USED FOR UNINTERRU | 1/1/1998 | NC | 9 |
| S | L0500 | LUMBAR-SACRAL-ORTHOSIS (LSO), FL | 1/1/2005 | INVALID | N |
| S | L3805 | WRIST HAND FINGER ORTHOSIS, LONG | 10/1/2005 | $209.75 | 3 |
| S | MFC03 | SDSD: MEDICALLY FRAGILE CHILDREN | 6/25/1996 | $960.00 | 3 |
| S | OCP01 | EARLY CHILDHOOD MENTAL HEALTH OU | 4/1/2003 | INVALID | N |
| S | OCP02 | EARLY CHILDHOOD PREVENTIVE MENTA | 4/1/2003 | INVALID | N |
| S | OCP03 | EARLY CHILDHOOD PREVENTIVE MENTA | 4/1/2003 | INVALID | N |
| S | OCP04 | EARLY CHILDHOOD MENTAL HEALTH CO | 4/1/2003 | INVALID | N |
| S | OCP05 | DEVELOPMENTAL SUPPORT AND CARE C | 4/1/2003 | INVALID | N |
| S | PUB04 | OMAP: PUBLIC HEALTH TREATMENT FO | 10/1/2002 | INVALID | N |
| S | Q0086 | PHYSICAL THERAPY EVALUATION/TREA | 4/1/2004 | INVALID | N |
| S | Q4017 | CAST SUPPLIES, LONG ARM SPLINT, | 10/1/2001 | $6.47 | 3 |
| S | Q4018 | CAST SUPPLIES, LONG ARM SPLINT, | 10/1/2001 | $10.32 | 3 |
| S | Q4019 | CAST SUPPLIES, LONG ARM SPLINT, | 10/1/2001 | $3.24 | 3 |
| S | Q4020 | CAST SUPPLIES, LONG ARM SPLINT, | 10/1/2001 | $5.16 | 3 |
| S | Q4021 | CAST SUPPLIES, SHORT ARM SPLINT, | 10/1/2001 | $4.79 | 3 |
| S | Q4022 | CAST SUPPLIES, SHORT ARM SPLINT, | 10/1/2001 | $8.64 | 3 |
| S | Q4023 | CAST SUPPLIES, SHORT ARM SPLINT, | 10/1/2001 | $2.40 | 3 |
| S | Q4024 | CAST SUPPLIES, SHORT ARM SPLINT, | 10/1/2001 | $4.32 | 3 |
| S | Q4049 | FINGER SPLINT, STATIC | 10/1/2001 | $1.50 | 3 |
| S | Q4051 | SPLINT SUPPLIES, MISC (INC THERM | 10/1/2001 | $10.00 | 3 |
| S | S0191 | MISOPROSTOL, ORAL, 200 MCG | 8/1/2004 | $1.20 | 3 |
| S | S0255 | HOSPICE REFERRAL VISIT PERFORMED | 1/1/2002 | NC | 9 |
| S | S0595 | DISPENSING NEW SPECTACLE LENSES | 1/1/2006 | NC | 9 |
| S | S1015 | IV TUBING EXTENSION SET | 1/1/2001 | NC | 9 |
| S | S1016 | NON-PVC (POLYVINYL CHLORIDE) INT | 1/1/2001 | NC | 9 |
| S | S5000 | PRESCRIPTION DRUG, GENERIC | 1/1/2003 | $0.01 | P |
| S | S5001 | PRESCRIPTION DRUG, BRAND NAME | 1/1/2003 | $0.01 | P |
| S | S5011 | 5% DEXTROSE IN LACTATED RINGER'S | 2/1/2006 | $14.35 | 3 |
| S | S5025 | INFUSION PUMP RENTAL, PER DIEM | 4/1/2002 | INVALID | N |
| S | S5035 | HOME INFUSION THERAPY, ROUTINE S | 4/1/2003 | $0.01 | 5 |
| S | S5036 | HOME INFUSION THERAPY, REPAIR OF | 1/1/2003 | $8.23 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | S5115 | HOME CARE TRAINING, NON-FAMILY; | 9/1/2003 | $7.00 | 3 |
| S | S5145 | FOSTER CARE, THERAPEUTIC, CHILD; | 2/1/2005 | $0.01 | 1 |
| S | S5146 | FOSTER CARE, THERAPEUTIC, CHILD; | 4/1/2006 | $2,435.28 | 3 |
| S | S5151 | UNSKILLED RESPITE CARE, NOT HOSP | 1/1/2003 | $0.01 | P |
| S | S5160 | EMERGENCY RESPONSE SYSTEM; INSTA | 5/1/2003 | $0.01 | 1 |
| S | S5161 | EMERGENCY RESPONSE SYSTEM; SERVI | 5/1/2003 | $0.01 | 1 |
| S | S5162 | EMERGENCY RESPONSE SYSTEM; PURCH | 5/1/2003 | $0.01 | 1 |
| S | S5497 | HOME INFUSION THERAPY, CATHETER | 8/1/2005 | $7.04 | 3 |
| S | S5498 | HOME INFUSION THERAPY, CATHETER | 4/1/2003 | $6.00 | 3 |
| S | S5501 | HOME INFUSION THERAPY, CATHETER | 4/1/2003 | $7.20 | 3 |
| S | S5520 | HOME INFUSION THERAPY, ALL SUPPL | 4/1/2003 | $75.21 | 3 |
| S | S5521 | HOME INFUSION THERAPY, ALL SUPPL | 4/1/2003 | $75.21 | 3 |
| S | S8415 | SUPPLIES FOR HOME DELIVERY OF IN | 10/1/2002 | $221.30 | 3 |
| S | S8948 | APPLICATION OF A MODALITY TO ONE | 1/1/2004 | NC | 9 |
| S | S8950 | COMPLEX LYMPHEDEMA THERAPY, EACH | 10/1/2004 | NC | 9 |
| S | S8990 | PHYSICAL OR MANIPULATIVE THERAPY | 1/1/2004 | NC | 9 |
| S | S9075 | SMOKING CESSATION TREATMENT | 4/1/2001 | $10.00 | 1 |
| S | S9123 | NURSING CARE, IN THE HOME; BY RE | 10/1/2000 | $34.90 | 3 |
| S | S9124 | NURSING CARE, IN THE HOME; BY LI | 10/1/2000 | $29.66 | 3 |
| S | S9125 | RESPITE CARE SERVICES, IN THE HO | 1/1/2003 | $0.01 | P |
| S | S9131 | PHYSICAL THERAPY; IN HOME, PER D | 1/1/2003 | NC | 9 |
| S | S9200 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9210 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9220 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9225 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9230 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9300 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9308 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9310 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9325 | HOME INFUSION THERAPY, PAIN MANA | 4/1/2003 | $50.00 | 3 |
| S | S9326 | HOME INFUSION THERAPY, CONTINUOU | 4/1/2003 | $41.40 | 3 |
| S | S9327 | HOME INFUSION THERAPY, INTERMITT | 4/1/2003 | $41.40 | 3 |
| S | S9328 | HOME INFUSION THERAPY, IMPLANTED | 4/1/2003 | $41.40 | 3 |
| S | S9329 | HOME INFUSION THERAPY, CHEMOTHER | 4/1/2003 | $78.00 | 3 |
| S | S9330 | HOME INFUSION THERAPY, CONTINUOU | 4/1/2003 | $116.00 | 3 |
| S | S9331 | HOME INFUSION THERAPY, INTERMITT | 4/1/2003 | $89.00 | 3 |
| S | S9335 | HOME THERAPY, HEMODIALYSIS; ADMI | 1/1/2004 | NC | 9 |
| S | S9336 | HOME INFUSION THERAPY, CONTINUOU | 4/1/2003 | $78.00 | 3 |
| S | S9341 | HOME THERAPY; ENTERAL NUTRITION | 4/1/2003 | $4.99 | 3 |
| S | S9342 | HOME THERAPY; ENTERAL NUTRITION | 4/1/2003 | $19.17 | 3 |
| S | S9347 | HOME INFUSION THERAPY, UNINTERRU | 1/1/2003 | NC | 9 |
| S | S9348 | HOME INFUSION THERAPY, SYMPATHOM | 4/1/2003 | $78.00 | 3 |
| S | S9349 | HOME INFUSION THERAPY, TOCOLYTIC | 4/1/2003 | NC | 9 |
| S | S9351 | HOME INFUSION THERAPY, CONTINUOU | 4/1/2003 | $100.00 | 3 |
| S | S9355 | HOME INFUSION THERAPY, CHELATION | 4/1/2003 | NC | 9 |
| S | S9364 | HOME INFUSION THERAPY, TOTAL PAR | 4/1/2003 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | S9365 | HOME INFUSION THERAPY, TOTAL PAR | 4/1/2003 | $105.00 | 3 |
| S | S9366 | HOME INFUSION THERAPY, TOTAL PAR | 4/1/2003 | $131.00 | 3 |
| S | S9367 | HOME INFUSION THERAPY, TOTAL PAR | 4/1/2003 | $135.00 | 3 |
| S | S9368 | HOME INFUSION THERAPY, TOTAL PAR | 4/1/2003 | $135.00 | 3 |
| S | S9373 | HOME INFUSION THERAPY, HYDRATION | 1/1/2005 | $35.00 | 3 |
| S | S9374 | HOME INFUSION THERAPY, HYDRATION | 4/1/2003 | $40.00 | 3 |
| S | S9375 | HOME INFUSION THERAPY, HYDRATION | 4/1/2003 | $55.00 | 3 |
| S | S9376 | HOME INFUSION THERAPY, HYDRATION | 4/1/2003 | $55.00 | 3 |
| S | S9377 | HOME INFUSION THERAPY, HYDRATION | 4/1/2003 | $55.00 | 3 |
| S | S9379 | HOME INFUSION THERAPY, HYDRATION | 8/1/2005 | $8.80 | 3 |
| S | S9395 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9420 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9423 | NURSING SERVICES, PATIENT ASSESS | 4/1/2002 | INVALID | N |
| S | S9425 | NURSING SERVICES AND ALL NECESSA | 4/1/2002 | INVALID | N |
| S | S9470 | NUTRITIONAL COUNSELING, DIETICIA | 4/1/2003 | $44.10 | 3 |
| S | S9480 | INTENSIVE OUTPATIENT PSYCHIATRIC | 4/1/2005 | $0.01 | P |
| S | S9484 | CRISIS INTERVENTION MENTAL HEALT | 1/1/2003 | $0.01 | P |
| S | S9490 | HOME INFUSION THERAPY, CORTICOST | 1/1/2003 | NC | 9 |
| S | S9494 | HOME INFUSION THERAPY, ANTIBIOTI | 1/1/2005 | $8.64 | 3 |
| S | S9497 | HOME INFUSION THERAPY, ANTIBIOTI | 4/1/2003 | $83.00 | 3 |
| S | S9500 | HOME INFUSION THERAPY, ANTIBIOTI | 4/1/2003 | $88.00 | 3 |
| S | S9501 | HOME INFUSION THERAPY, ANTIBIOTI | 4/1/2003 | $88.00 | 3 |
| S | S9502 | HOME INFUSION THERAPY, ANTIBIOTI | 4/1/2003 | $108.00 | 3 |
| S | S9503 | HOME INFUSION THERAPY, ANTIBIOTI | 4/1/2003 | $108.00 | 3 |
| S | S9504 | HOME INFUSION THERAPY, ANTIBIOTI | 4/1/2003 | $108.00 | 3 |
| S | S9524 | NURSING SERVICES RELATED TO HOME | 4/1/2004 | INVALID | N |
| S | S9526 | SKILLED NURSING VISITS FOR BLOOD | 4/1/2002 | INVALID | N |
| S | S9533 | PAIN MANAGEMENT, INTRAVENOUS, EP | 4/1/2002 | INVALID | N |
| S | S9535 | ADMIN OF HEMATOPOIETIC HORMONES | 4/1/2002 | INVALID | N |
| S | S9539 | ADMIN OF ANTIBIOTICS, INTRAVENOU | 4/1/2002 | INVALID | N |
| S | S9545 | ADMIN OF IMMUNE GLOBULIN, INTRAV | 4/1/2002 | INVALID | N |
| S | S9546 | HOME INFUSION OF BLOOD PRODUCTS, | 4/1/2004 | INVALID | N |
| S | S9550 | HOME IV THERAPY, HYDRATION FLUID | 4/1/2002 | INVALID | N |
| S | S9555 | ADDITIONAL HOME INFUSION THERAPY | 4/1/2002 | INVALID | N |
| S | S9590 | HOME THERAPY, IRRIGATION THERAPY | 4/1/2003 | NC | 9 |
| S | S9802 | HOME INFUSION/SPECIALTY DRUG ADM | 4/1/2004 | INVALID | N |
| S | S9803 | EACH ADDITIONAL HOUR (LIST SEPAR | 4/1/2004 | INVALID | N |
| S | S9981 | MEDICAL RECORDS COPYING FEE, ADM | 4/1/2002 | $18.00 | 3 |
| S | S9982 | MEDICAL RECORDS COPYING FEE, PER | 4/1/2002 | $4.50 | 3 |
| S | S9986 | NOT MEDICALLY NECESSARY SERVICE | 1/1/2002 | NC | 9 |
| S | T1000 | PRIVATE DUTY/INDEPENDENT NURSING | 9/1/2003 | $7.00 | 3 |
| S | T1001 | NURSING ASSESSMENT/EVALUATION | 10/1/2006 | $33.00 | 3 |
| S | T1002 | RN SERVICES, UP TO 15 MINUTES | 9/1/2003 | $7.00 | 3 |
| S | T1005 | RESPITE CARE SERVICES, UP TO 15 | 1/1/2003 | $0.01 | P |
| S | T1011 | ALCOHOL AND DRUG SERVICE NOS - I | 4/1/2004 | INVALID | N |
| S | T1012 | FAMILY SUPPORT SERVICES (FAMILY | 10/1/2003 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | T1013 | SIGN LANGUAGE OR ORAL INTERPRETI | 10/1/2003 | $7.65 | 3 |
| S | T1016 | CASE MANAGEMENT, PER 15 MINUTES | 10/1/2003 | $22.25 | 3 |
| S | T1018 | SCHOOL-BASED INDIVIDUALIZED EDUC | 1/1/2003 | NC | 9 |
| S | T1019 | PERSONAL CARE SERVICES, PER 15 M | 4/1/2003 | NC | 9 |
| S | T1020 | PERSONAL CARE SERVICES, PER DIEM | 4/1/2003 | NC | 9 |
| S | T1021 | HOME HEALTH AIDE OR CERTIFIED NU | 4/1/2003 | NC | 9 |
| S | T1022 | CONTRACTED HOME HEALTH AGENCY SE | 4/1/2003 | NC | 9 |
| S | T1023 | SCREENING TO DETERMINE THE APPRO | 4/1/2005 | $89.00 | 3 |
| S | T1030 | NURSING CARE, IN THE HOME, BY RE | 4/1/2003 | $16.59 | 3 |
| S | T1031 | NURSING CARE, IN THE HOME, BY LI | 4/1/2003 | $14.79 | 3 |
| S | T2010 | PREADMISSION SCREENING AND RESID | 4/1/2006 | $169.66 | 3 |
| S | T2011 | PREADMISSION SCREENING AND RESID | 4/1/2006 | $593.80 | 3 |
| S | T2012 | HABILITATION, EDUCATIONAL; WAIVE | 1/1/2004 | NC | 9 |
| S | T2013 | HABILITATION, EDUCATIONAL, WAIVE | 1/1/2004 | NC | 9 |
| S | T2014 | HABILITATION, PREVOCATIONAL, WAI | 1/1/2004 | NC | 9 |
| S | T2015 | HABILITATION, PREVOCATIONAL, WAI | 1/1/2004 | NC | 9 |
| S | T2016 | HABILITATION, RESIDENTIAL, WAIVE | 1/1/2004 | NC | 9 |
| S | T2017 | HABILITATION, RESIDENTIAL, WAIVE | 1/1/2004 | NC | 9 |
| S | T2018 | HABILITATION, SUPPORTED EMPLOYME | 1/1/2004 | NC | 9 |
| S | T2019 | HABILITATION, SUPPORTED EMPLOYME | 1/1/2004 | NC | 9 |
| S | T2020 | DAY HABILITATION, WAIVER; PER DI | 1/1/2004 | NC | 9 |
| S | T2021 | DAY HABILITATION, WAIVER; PER 15 | 1/1/2004 | NC | 9 |
| S | T2022 | CASE MANAGEMENT, PER MONTH | 1/1/2004 | NC | 9 |
| S | T2023 | TARGETED CASE MANAGEMENT PER MON | 10/1/2003 | $80.00 | 3 |
| S | T2024 | SERVICE ASSESSMENT/PLAN OF CARE | 1/1/2004 | NC | 9 |
| S | T2025 | WAIVER SERVICES; NOT OTHERWISE S | 1/1/2004 | NC | 9 |
| S | T2026 | SPECIALIZED CHILDCARE, WAIVER; P | 1/1/2004 | NC | 9 |
| S | T2027 | SPECIALIZED CHILDCARE, WAIVER; P | 1/1/2004 | NC | 9 |
| S | T2028 | SPECIALIZED SUPPLY, NOT OTHERWIS | 1/1/2004 | NC | 9 |
| S | T2029 | SPECIALIZED MEDICAL EQUIPMENT, N | 1/1/2004 | NC | 9 |
| S | T2030 | ASSISTED LIVING, WAIVER; PER MON | 1/1/2004 | NC | 9 |
| S | T2031 | ASSISTED LIVING; WAIVER, PER DIE | 1/1/2004 | NC | 9 |
| S | T2032 | RESIDENTIAL CARE, NOT OTHERWISE | 1/1/2004 | NC | 9 |
| S | T2033 | RESIDENTIAL CARE LEVEL 5 - BRS O | 7/1/2005 | $0.01 | 1 |
| S | T2035 | UTILITY SERVICES TO SUPPORT MEDI | 1/1/2004 | NC | 9 |
| S | T2036 | THERAPEUTIC CAMPING, OVERNIGHT, | 1/1/2004 | NC | 9 |
| S | T2037 | THERAPEUTIC CAMPING, DAY, WAIVER | 1/1/2004 | NC | 9 |
| S | T2038 | COMMUNITY TRANSITION, WAIVER; PE | 1/1/2004 | NC | 9 |
| S | T2039 | VEHICLE MODIFICATIONS, WAIVER; P | 1/1/2004 | NC | 9 |
| S | T2040 | FINANCIAL MANAGEMENT, SELF-DIREC | 1/1/2004 | NC | 9 |
| S | T2041 | SUPPORTS BROKERAGE, SELF-DIRECTE | 1/1/2004 | NC | 9 |
| S | T2042 | HOSPICE ROUTINE HOME CARE; PER D | 1/1/2004 | NC | 9 |
| S | T2043 | HOSPICE CONTINUOUS HOME CARE; PE | 1/1/2004 | NC | 9 |
| S | T2044 | HOSPICE INPATIENT RESPITE CARE; | 1/1/2004 | NC | 9 |
| S | T2045 | HOSPICE GENERAL INPATIENT CARE; | 1/1/2004 | NC | 9 |
| S | T2046 | HOSPICE LONG TERM CARE, ROOM AND | 1/1/2004 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | T2048 | BEHAVIORAL HEALTH; LONG-TERM CAR | 1/1/2004 | NC | 9 |
| S | TCM01 | OMAP: TARGETED CASE MANAGMENT - | 10/1/2004 | INVALID | N |
| S | TU111 | HOMECARE WORKER LEAVE TIME USED | 7/1/2006 | $9.76 | 3 |
| S | V2020 | FRAME PURCHASES ON SWEEP CONTRAC | 1/1/1999 | $50.00 | 3 |
| S | V2025 | DELUXE FRAME | 7/1/1996 | $100.00 | 3 |
| S | V2100 | SPHERE SINGLE VISION PLANO TO PL | 11/1/2003 | $7.10 | 3 |
| S | V2101 | SPHERE SINGLE VISION PLUS OR MIN | 11/1/2003 | $8.58 | 3 |
| S | V2102 | SPHERE SINGLE VISION PLUS OR MIN | 11/1/2003 | $13.71 | 3 |
| S | V2103 | SPHEROCYLINDER SINGLE VISION PLA | 11/1/2003 | $7.10 | 3 |
| S | V2104 | SPHEROCYLINDER SINGLE VISION PLA | 11/1/2003 | $8.53 | 3 |
| S | V2105 | SPHEROCYLINDER SINGLE VISION PLA | 11/1/2003 | $11.75 | 3 |
| S | V2106 | SPHEROCYLINDER SINGLE VISION PLA | 11/1/2003 | $14.75 | 3 |
| S | V2107 | SPHEROCYLINDER SINGLE VIS PLUS O | 11/1/2003 | $8.69 | 3 |
| S | V2108 | SPHEROCYLINDER SINGLE VI PLUS OR | 11/1/2003 | $10.30 | 3 |
| S | V2109 | SPHEROCYLINDER SINGLE VIS PLUS O | 11/1/2003 | $13.30 | 3 |
| S | V2110 | SPEROCYLINDER SINGLE VISION PLUS | 11/1/2003 | $16.30 | 3 |
| S | V2111 | SPHEROCYLINDER SINGLE VISION PLU | 8/8/2005 | $15.92 | 3 |
| S | V2112 | SPHEROCYLINDER SINGLE VIS PLUS O | 11/1/2003 | $16.55 | 3 |
| S | V2113 | SPHEROCYLINDER, SGL VISION, + OR | 11/1/2003 | $19.47 | 3 |
| S | V2114 | SPHEROCYLINDER, SINGLE VISION, S | 11/1/2003 | $26.22 | 3 |
| S | V2115 | LENTICULAR (MYODISC) PER LENS SI | 11/1/2003 | $22.04 | 3 |
| S | V2116 | LENTICULAR LENS NONASPHERIC PER | 4/1/2004 | INVALID | N |
| S | V2117 | LENTICULAR ASPHERIC PER LENS SIN | 4/1/2004 | INVALID | N |
| S | V2118 | ANISEIKONIC LENS, SINGLE VISION | 1/1/1994 | NC | 9 |
| S | V2121 | LENTICULAR LENS, PER LENS, SINGL | 4/1/2004 | $26.22 | 3 |
| S | V2199 | NOC SINGLE VISION LENS (PER LENS | 7/1/2002 | $175.00 | 3 |
| S | V2200 | SPHERE BIFOCAL PLANO TO PLUS OR | 11/1/2003 | $9.30 | 3 |
| S | V2201 | SPHERE BIFOCAL PLUS OR MINUS 4.1 | 11/1/2003 | $11.27 | 3 |
| S | V2202 | SPHERE BIFOCAL PLUS OR MINUS 7.1 | 11/1/2003 | $16.00 | 3 |
| S | V2203 | SPHEROCYLINDER BIFOCAL PLANO TO | 11/1/2003 | $9.30 | 3 |
| S | V2204 | SPHEROCYLINDER BIFOCAL PLANO TO | 11/1/2003 | $10.80 | 3 |
| S | V2205 | SPHEROCYLINDER BIFOCAL PLANO TO | 11/1/2003 | $13.80 | 3 |
| S | V2206 | SPHEROCYLINDER BIFOCAL PLANO TO | 11/1/2003 | $16.91 | 3 |
| S | V2207 | SPHEROCYLINDER BIFOCAL PLUS/MINU | 11/1/2003 | $10.86 | 3 |
| S | V2208 | SPHEROCYLINDER BIFOCAL PLUS/MINU | 11/1/2003 | $12.36 | 3 |
| S | V2209 | SPHEROCYLINDER BIFOCAL PLUS OR M | 11/1/2003 | $15.48 | 3 |
| S | V2210 | SPHEROCYLINDER BIFOCAL PLUS/MINU | 11/1/2003 | $18.48 | 3 |
| S | V2211 | SPHEROCYLINDER BIFOCAL PLUS/MINU | 11/1/2003 | $11.33 | 3 |
| S | V2212 | SPHEROCYLINDER BIFOCAL PLUS/MINU | 11/1/2003 | $12.83 | 3 |
| S | V2213 | SPHEROCYLINDER BIFOCAL PLUS/MINU | 11/1/2003 | $15.83 | 3 |
| S | V2214 | SPHEROCYLINDER, BIFOCAL, SPHERE | 11/1/2003 | $11.33 | 3 |
| S | V2215 | LENTICULAR (MYODISC) PER LENS BI | 11/1/2003 | $26.77 | 3 |
| S | V2216 | LENTICULAR NONASPHERIC PER LENS | 4/1/2004 | INVALID | N |
| S | V2217 | LENTICULAR ASPHERIC LENS BIFOCAL | 4/1/2004 | INVALID | N |
| S | V2218 | ANISEIKONIC, PER LENS, BIFOCAL | 1/1/1994 | NC | 9 |
| S | V2219 | BIFOCAL SEG WIDTH OVER 28MM | 6/18/1993 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | V2220 | BIFOCAL ADD OVER 3.25D | 11/1/2003 | $5.25 | 3 |
| S | V2221 | LENTICULAR LENS, PER LENS, BIFOC | 4/1/2004 | $16.43 | 3 |
| S | V2299 | BPECIALTY BIFOCAL (PER LENS), PL | 1/1/2005 | NC | 9 |
| S | V2300 | SPHERE TRIFOCAL PLANO TO PLUS OR | 11/1/2003 | $13.81 | 3 |
| S | V2301 | SPHERE TRIFOCAL PLUS OR MINUS 4. | 11/1/2003 | $15.31 | 3 |
| S | V2302 | SPHERE TRIFOCAL PLUS OR MINUS 7. | 11/1/2003 | $38.92 | 3 |
| S | V2303 | SPHEROCYLINDER TRIFOCAL PLANO TO | 11/1/2003 | $13.81 | 3 |
| S | V2304 | SPHEROCYLINDER TRIFOCAL PLANO TO | 11/1/2003 | $15.31 | 3 |
| S | V2305 | SPHEROCYLINDER TRIFOCAL PLANO TO | 11/1/2003 | $18.31 | 3 |
| S | V2306 | SPHEROCYLINDER TRIFOCAL PLANO TO | 11/1/2003 | $21.31 | 3 |
| S | V2307 | SPHEROCYLINDER TRIFOCAL PLUS OR | 11/1/2003 | $15.31 | 3 |
| S | V2308 | SPHEROCYLINDER TRIFOCAL PLUS/MIN | 11/1/2003 | $16.81 | 3 |
| S | V2309 | SPHEROCYLINDER TRIFOCAL PLUS/MIN | 11/1/2003 | $19.81 | 3 |
| S | V2310 | SPHEROCYLINDER TRIFOCAL PLUS/MIN | 11/1/2003 | $22.81 | 3 |
| S | V2311 | SPHEROCYLINDER TRIFOCAL PLUS/MIN | 11/1/2003 | $34.42 | 3 |
| S | V2312 | SPHEROCYLINDER TRIFOCAL PLUS/MIN | 11/1/2003 | $35.92 | 3 |
| S | V2313 | SPHEROCYLINDER TRIFOCAL PLUS/MIN | 11/1/2003 | $38.92 | 3 |
| S | V2314 | SPHEROCYLINDER TRIFOCAL SPHERE O | 11/1/2003 | $11.66 | 3 |
| S | V2315 | LENTICULAR (MYODISC) PER LENS TR | 6/18/1993 | NC | 9 |
| S | V2316 | LENTICULAR NONASPHERIC PER LENS | 4/1/2004 | INVALID | N |
| S | V2317 | LENTICULAR ASPHERIC LENS TRIFOCA | 4/1/2004 | INVALID | N |
| S | V2318 | ANISEIKONIC LENS, TRIFOCAL | 1/1/1994 | NC | 9 |
| S | V2319 | TRIFOCAL SEG WIDTH OVER 28MM | 6/18/1993 | NC | 9 |
| S | V2320 | TRIFOCAL ADD OVER 3.25D | 11/1/2003 | $5.25 | 3 |
| S | V2321 | LENTICULAR LENS, PER LENS, TRIFO | 1/1/2004 | NC | 9 |
| S | V2399 | SPECIALTY TRIFOCAL (PER LENS), P | 7/1/2002 | $200.00 | 3 |
| S | V2410 | VARIABLE ASPHERICITY LENS SINGLE | 11/1/2003 | $21.54 | 3 |
| S | V2430 | VARIABLE ASPHERICITY LENS BIFOCA | 11/1/2003 | $26.54 | 3 |
| S | V2499 | VARIABLE SPHERICITY LENS, OTHER | 11/1/2003 | $31.54 | 3 |
| S | V2500 | CONTACT LENS, PMA, SPHERICAL, PE | 1/1/2000 | $150.00 | 3 |
| S | V2501 | PMMA, TORIC OR PRISM BALLAST, PE | 1/1/2000 | $150.00 | 3 |
| S | V2502 | PMMA, BIFOCAL, PER LENS | 1/1/2000 | $150.00 | 3 |
| S | V2503 | PMMA, BIFOCAL, COLOR VISION DEFI | 1/1/2000 | $150.00 | 3 |
| S | V2510 | GAS PERMEABLE, SPERICAL, PER LEN | 1/1/2000 | $150.00 | 3 |
| S | V2511 | GAS PERMEABLE, TORIC, PRISM BALL | 1/1/2000 | $150.00 | 3 |
| S | V2512 | GAS PERMEABLE, BIFOCAL, PER LENS | 1/1/2000 | $150.00 | 3 |
| S | V2513 | GAS PERMEABLE, EXTENDED WEAR, PE | 1/1/2000 | $150.00 | 3 |
| S | V2520 | HYDROPHILIC, SPERICAL, PER LENS | 1/1/2004 | $180.00 | 3 |
| S | V2521 | HYDROPHILIC, TORIC OR PRISM BALL | 1/1/2000 | $150.00 | 3 |
| S | V2522 | HYDROPHILIC, BIFOCAL, PER LENS | 1/1/2000 | $150.00 | 3 |
| S | V2523 | CONTACT LENS, HYDROPHILIC, EXTEN | 1/1/2000 | $150.00 | 3 |
| S | V2530 | SCLERAL, PER LENS | 1/1/2000 | $150.00 | 3 |
| S | V2531 | CONTACT LENS, SCLERAL, GAL PERME | 1/1/2000 | $150.00 | 3 |
| S | V2599 | CONTACT LENS, OTHER TYPE | 3/1/1995 | $0.01 | 5 |
| S | V2600 | HAND HELD LOW VISION AIDS AND OT | 1/1/1994 | NC | 9 |
| S | V2610 | SINGLE LENS SPECTACLE MOUNTED LO | 1/1/1994 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| S | V2615 | TELESCOPIC AND OTHER COMPOUND LE | 1/1/1994 | NC | 9 |
| S | V2700 | BALANCE LENS PER LENS | 11/1/2003 | $9.94 | 3 |
| S | V2702 | DELUXE LENS FEATURE | 1/1/2005 | NC | 9 |
| S | V2710 | SLAB OFF PRISM GLASS OR PLASTIC | 11/1/2003 | $34.00 | 3 |
| S | V2715 | PRISM PER LENS | 8/8/2005 | $1.75 | 3 |
| S | V2718 | PRESS-ON LENS, FRESNELL PRISM, P | 11/1/2003 | $18.65 | 3 |
| S | V2730 | SPECIAL BASE CURVE GLASS OR PLAS | 11/1/2003 | $1.16 | 3 |
| S | V2740 | TINT PLASTIC ROSE 1 OR 2 PER LEN | 4/1/2004 | INVALID | N |
| S | V2741 | TINT PLASTIC OTHER THAN ROSE 1-2 | 4/1/2004 | INVALID | N |
| S | V2742 | TINT GLASS ROSE 1 OR 2 PER LENS | 4/1/2004 | INVALID | N |
| S | V2743 | TINT GLASS OTHER THAN ROSE 1 OR | 4/1/2004 | INVALID | N |
| S | V2744 | TINT PHOTOCHROMATIC PER LENS | 11/1/2003 | $10.00 | 3 |
| S | V2745 | ADDITION TO LENS; TINT, ANY COLO | 4/1/2004 | $4.00 | 3 |
| S | V2750 | ANTIREFLECTIVE COATING, PER LENS | 1/1/1994 | NC | 9 |
| S | V2755 | U-V LENS, PER LENS | 1/1/1994 | NC | 9 |
| S | V2756 | EYE GLASS CASE | 1/1/2004 | NC | 9 |
| S | V2760 | SCRATCH RESISTANT COATING PER LE | 11/1/2003 | $1.25 | 3 |
| S | V2761 | MIRROR COATING, ANY TYPE, SOLID, | 1/1/2004 | NC | 9 |
| S | V2762 | POLARIZATION, ANY LENS MATERIAL, | 1/1/2004 | NC | 9 |
| S | V2770 | OCCLUDER LENS PER LENS | 7/1/2002 | NC | 9 |
| S | V2780 | OVERSIZE LENS PER LENS | 7/1/2002 | $7.00 | 3 |
| S | V2781 | PROGRESSIVE LENS, PER LENS | 12/1/2006 | NC | 9 |
| S | V2782 | LENS, INDEX 1.54 TO 1.65 PLASTIC | 1/1/2004 | $15.00 | 3 |
| S | V2783 | LENS, INDEX GREATER THAN OR EQUA | 1/1/2004 | $22.50 | 3 |
| S | V2784 | LENS, POLYCARBONATE OR EQUAL, AN | 4/1/2004 | $12.00 | 3 |
| S | V2786 | SPECIALTY OCCUPATIONAL MULTIFOCA | 1/1/2004 | NC | 9 |
| S | V2797 | VISION SUPPLY, ACCESSORY AND/OR | 1/1/2004 | NC | 9 |
| S | V2799 | VISION SERVICE, MISCELLANEOUS | 4/1/2003 | $50.00 | 3 |
| T | 36415 | COLLECTION OF VENOUS BLOOD BY VE | 7/11/2005 | $3.00 | 3 |
| T | 51725 | SIMPLE CYSTOMETROGRAM (CMG) (EG, | 1/1/2007 | $133.64 | 3 |
| T | 51726 | COMPLEX CYSTOMETROGRAM (EG, CALI | 1/1/2007 | $181.91 | 3 |
| T | 51736 | SIMPLE UROFLOWMETRY (UFR) (EG, S | 1/1/2007 | $10.12 | 3 |
| T | 51741 | COMPLEX UROFLOWMETRY (EG, CALIBR | 1/1/2007 | $11.42 | 3 |
| T | 51772 | URETHRAL PRESSURE PROFILE STUDIE | 1/1/2007 | $132.09 | 3 |
| T | 51784 | ELECTROMYOGRAPHY STUDIES (EMG) O | 1/1/2007 | $91.60 | 3 |
| T | 51785 | ELECTROMYOGRAPHIC STUDIES (EMG) | 1/1/2007 | $103.54 | 3 |
| T | 51792 | STIMULUS EVOKED RESPONSE (EG MEA | 1/1/2007 | $148.69 | 3 |
| T | 51795 | VOIDING PRESSURE STUDIES (VP); B | 1/1/2007 | $179.31 | 3 |
| T | 51797 | VOIDING PRESSURE STUDIES (VP); I | 1/1/2007 | $138.05 | 3 |
| T | 53670 | CATHERIZATION, URETHRA; SIMPLE | 7/1/2003 | INVALID | N |
| T | 54240 | PENILE PLETHYSMOGRAPHY | 1/1/2007 | $17.13 | 3 |
| T | 54250 | NOCTURNAL PENILE TUMESCENCE AND/ | 1/1/2007 | $5.71 | 3 |
| T | 59020 | FETAL CONTRACTION STRESS TEST | 1/1/2007 | $16.09 | 3 |
| T | 59025 | FETAL NON-STRESS TEST | 1/1/2007 | $6.49 | 3 |
| T | 62252 | REPROGRAMMING OF PROGRAMMABLE CE | 1/1/2007 | $29.06 | 3 |
| T | 70010 | MYELOGRAPHY, POSTERIOR FOSSA, RA | 1/1/2007 | $118.33 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 70015 | CISTERNOGRAPHY, POSITIVE CONTRAS | 1/1/2007 | $37.11 | 3 |
| T | 70030 | RADIOLOGIC EXAMINATION EYE FOR D | 1/1/2007 | $11.42 | 3 |
| T | 70100 | RADIOLOGIC EXAMINATION MANDIBLE | 1/1/2007 | $14.01 | 3 |
| T | 70110 | RADIOLOGIC EXAMINATION MANDIBLE; | 1/1/2007 | $17.13 | 3 |
| T | 70120 | RADIOLOGIC EXAMINATION MASTOIDS | 1/1/2007 | $17.13 | 3 |
| T | 70130 | RADIOLOGIC EXAMINATION MASTOIDS; | 1/1/2007 | $21.54 | 3 |
| T | 70134 | RADIOLOGIC EXAMINATION INTERNAL | 1/1/2007 | $20.24 | 3 |
| T | 70140 | RADIOLOGIC EXAMINATION FACIAL BO | 1/1/2007 | $17.13 | 3 |
| T | 70150 | RADIOLOGIC EXAMINATION FACIAL BO | 1/1/2007 | $21.54 | 3 |
| T | 70160 | RADIOLOGIC EXAMINATION NASAL BON | 1/1/2007 | $14.01 | 3 |
| T | 70170 | DACRYOCYSTOGRAPHY, NASOLACRIMAL | 1/1/2007 | $26.21 | 3 |
| T | 70190 | RADIOLOGIC EXAMINATION OPTIC FOR | 1/1/2007 | $17.13 | 3 |
| T | 70200 | RADIOLOGIC EXAMINATION; ORBITS C | 1/1/2007 | $21.54 | 3 |
| T | 70210 | RADIOLOGIC EXAMINATION SINUSES P | 1/1/2007 | $17.13 | 3 |
| T | 70220 | RADIOLOGIC EXAMINATION SINUSES P | 1/1/2007 | $21.54 | 3 |
| T | 70240 | RADIOLOGIC EXAMINATION SELLA TUR | 1/1/2007 | $11.42 | 3 |
| T | 70250 | RADIOLOGIC EXAMINATION SKULL LES | 1/1/2007 | $17.13 | 3 |
| T | 70260 | RADIOLOGIC EXAAMINATION SKULL; C | 1/1/2007 | $24.65 | 3 |
| T | 70300 | RADIOLOGIC EXAMINATION TEETH SIN | 1/1/2007 | $7.27 | 3 |
| T | 70310 | RADIOLOGIC EXAMINATION TEETH; PA | 1/1/2007 | $11.42 | 3 |
| T | 70320 | RADIOLOGIC EXAMINATION TEETH; CO | 1/1/2007 | $21.54 | 3 |
| T | 70328 | RADIOLOGIC EXAMINATION TEMPOROMA | 1/1/2007 | $13.23 | 3 |
| T | 70330 | RADIOLOGIC EXAMINATION TEMPOROMA | 1/1/2007 | $23.10 | 3 |
| T | 70332 | TEMPOROMANDIBULAR JOINT ARTHROGR | 1/1/2007 | $57.87 | 3 |
| T | 70336 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $306.73 | 3 |
| T | 70350 | CEPHALOGRAM ORTHODONTIC | 1/1/2007 | $10.38 | 3 |
| T | 70355 | ORTHOPANTOGRAM | 1/1/2007 | $15.83 | 3 |
| T | 70360 | RADIOLOGIC EXAMINATION NECK SOFT | 1/1/2007 | $11.42 | 3 |
| T | 70370 | RADIOLOGIC EXAMINATION; PHARYNX | 1/1/2007 | $35.81 | 3 |
| T | 70371 | COMPLEX DYNAMIC PHARYNGEAL AND S | 1/1/2007 | $57.87 | 3 |
| T | 70373 | LARYNGOGRAPHY, CONTRAST, RADIOLO | 1/1/2007 | $49.31 | 3 |
| T | 70380 | RADIOLOGIC EXAMINATION SALIVARY | 1/1/2007 | $18.42 | 3 |
| T | 70390 | SIALOGRAPHY, RADIOLOGICAL SUPERV | 1/1/2007 | $49.31 | 3 |
| T | 70450 | COMPUTED TOMOGRAPHY, HEAD OR BRA | 1/1/2007 | $129.23 | 3 |
| T | 70460 | COMPUTERIZED AXIAL TOMOGRAPHY HE | 1/1/2007 | $155.18 | 3 |
| T | 70470 | COMPUTERIZED AXIAL TOMOGRAPHY HE | 1/1/2007 | $193.59 | 3 |
| T | 70480 | COMPUTED TOMOGRAPHY, ORBIT, SELL | 1/1/2007 | $129.23 | 3 |
| T | 70481 | COMPUTERIZED AXIAL TOMOGRAPHY OR | 1/1/2007 | $155.18 | 3 |
| T | 70482 | COMPUTERIZED AXIAL TOMOGRAPHY OR | 1/1/2007 | $193.59 | 3 |
| T | 70486 | COMPUTED TOMOGRAPHY, MAXILLOFACI | 1/1/2007 | $129.23 | 3 |
| T | 70487 | COMPUTERIZED AXIAL TOMOGRAPHY MA | 1/1/2007 | $155.18 | 3 |
| T | 70488 | COMPUTERIZED AXIAL TOMOGRAPHY MA | 1/1/2007 | $193.59 | 3 |
| T | 70490 | COMPUTED TOMOGRAPHY, SOFT TISSUE | 1/1/2007 | $129.23 | 3 |
| T | 70491 | COMPUTERIZED AXIAL TOMOGRAPHY SO | 1/1/2007 | $155.18 | 3 |
| T | 70492 | COMPUTERIZED AXIAL TOMOGRAPHY SO | 1/1/2007 | $193.59 | 3 |
| T | 70496 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $290.90 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 70498 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $290.90 | 3 |
| T | 70540 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $301.54 | 3 |
| T | 70542 | MAGNETIC RESONANCE IMAGING, ORBI | 1/1/2007 | $362.00 | 3 |
| T | 70543 | MAGNETIC RESONANCE IMAGING, ORBI | 1/1/2007 | $669.25 | 3 |
| T | 70544 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $306.73 | 3 |
| T | 70545 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $306.73 | 3 |
| T | 70546 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $598.41 | 3 |
| T | 70547 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $306.73 | 3 |
| T | 70548 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $306.73 | 3 |
| T | 70549 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $598.41 | 3 |
| T | 70551 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $306.73 | 3 |
| T | 70552 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $367.97 | 3 |
| T | 70553 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $681.45 | 3 |
| T | 70554 | MRI, BRAIN, FUNCTIONAL MRI; INCL | 1/1/2007 | NC | 9 |
| T | 70557 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2004 | $0.01 | 5 |
| T | 70558 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2004 | $0.01 | 5 |
| T | 70559 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2004 | $0.01 | 5 |
| T | 71010 | RADIOLOGIC EXAMINATION, CHEST; S | 1/1/2007 | $12.72 | 3 |
| T | 71015 | RADIOLOGIC EXAMINATION CHEST; ST | 1/1/2007 | $14.01 | 3 |
| T | 71020 | RADIOLOGIC EXAMINATION, CHEST, T | 1/1/2007 | $17.13 | 3 |
| T | 71021 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $20.24 | 3 |
| T | 71022 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $20.24 | 3 |
| T | 71023 | RADIOLOGIC EXAMINATION CHEST TWO | 1/1/2007 | $21.54 | 3 |
| T | 71030 | RADIOLOGIC EXAMINATION, CHEST, C | 1/1/2007 | $21.54 | 3 |
| T | 71034 | RADIOLOGIC EXAMINATION CHEST COM | 1/1/2007 | $39.44 | 3 |
| T | 71035 | RADIOLOGIC EXAMINATION CHEST SPE | 1/1/2007 | $14.01 | 3 |
| T | 71040 | BRONCHOGRAPHY, UNILATERAL, RADIO | 1/1/2007 | $39.96 | 3 |
| T | 71060 | BRONCHOGRAPHY, BILATERAL, RADIOL | 1/1/2007 | $60.72 | 3 |
| T | 71090 | INSERTION PACEMAKER, FLUOROSCOPY | 1/1/2007 | $46.45 | 3 |
| T | 71100 | RADIOLOGIC EXAMINATION RIBS UNIL | 1/1/2007 | $15.83 | 3 |
| T | 71101 | RADIOLOGIC EXAMINATION RIBS UNIL | 1/1/2007 | $18.42 | 3 |
| T | 71110 | RADIOLOGIC EXAMINATION RIBS BILA | 1/1/2007 | $21.54 | 3 |
| T | 71111 | RADIOLOGIC EXAMINATION RIBS BILA | 1/1/2007 | $24.65 | 3 |
| T | 71120 | RADIOLOGIC EXAMINATION STERNUM M | 1/1/2007 | $17.91 | 3 |
| T | 71130 | RADIOLOGIC EXAMINATION; STERNOCL | 1/1/2007 | $19.46 | 3 |
| T | 71250 | COMPUTED TOMOGRAPHY, THORAX; WIT | 1/1/2007 | $161.93 | 3 |
| T | 71260 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $193.59 | 3 |
| T | 71270 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $242.37 | 3 |
| T | 71275 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $332.42 | 3 |
| T | 71550 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $303.10 | 3 |
| T | 71551 | MAGNETIC RESONANCE IMAGING, CHES | 1/1/2007 | $363.30 | 3 |
| T | 71552 | MAGNETIC RESONANCE IMAGING, CHES | 1/1/2007 | $665.10 | 3 |
| T | 71555 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $306.73 | 3 |
| T | 72010 | RADIOLOGIC EXAMINATION SPINE ENT | 1/1/2007 | $28.03 | 3 |
| T | 72020 | RADIOLOGIC EXAMINATION SPINE SIN | 1/1/2007 | $11.42 | 3 |
| T | 72040 | RADIOLOGIC EXAMINATION, SPINE, C | 1/1/2007 | $16.61 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 72050 | RADIOLOGIC EXAMINATION SPINE CER | 1/1/2007 | $24.65 | 3 |
| T | 72052 | RADIOLOGIC EXAMINATION SPINE CER | 1/1/2007 | $30.88 | 3 |
| T | 72069 | RADIOLOGIC EXAMINATION, SPINE, T | 1/1/2007 | $13.23 | 3 |
| T | 72070 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $17.91 | 3 |
| T | 72072 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $20.24 | 3 |
| T | 72074 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $25.17 | 3 |
| T | 72080 | RADIOLOGIC EXAMINATION, SPINE; T | 1/1/2007 | $18.42 | 3 |
| T | 72090 | RADIOLOGIC EXAMINATION SPINE; SC | 1/1/2007 | $18.42 | 3 |
| T | 72100 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $18.42 | 3 |
| T | 72110 | RADIOLOGIC EXAMINATION, SPINE, L | 1/1/2007 | $25.17 | 3 |
| T | 72114 | RADIOLOGIC EXAMINATION SPINE LUM | 1/1/2007 | $32.44 | 3 |
| T | 72120 | RADIOLOGIC EXAMINATION SPINE LUM | 1/1/2007 | $24.65 | 3 |
| T | 72125 | COMPUTED TOMOGRAPHY, CERVICAL SP | 1/1/2007 | $161.93 | 3 |
| T | 72126 | COMPUTERIZED AXIAL TOMOGRAPHY CE | 1/1/2007 | $193.59 | 3 |
| T | 72127 | COMPUTERIZED AXIAL TOMOGRAPHY, C | 1/1/2007 | $242.37 | 3 |
| T | 72128 | COMPUTED TOMOGRAPHY, THORACIC SP | 1/1/2007 | $161.93 | 3 |
| T | 72129 | COMPUTERIZED AXIAL TOMOGRAPHY TH | 1/1/2007 | $193.59 | 3 |
| T | 72130 | COMPUTERIZED AXIAL TOMOGRAPHY, T | 1/1/2007 | $242.37 | 3 |
| T | 72131 | COMPUTED TOMOGRAPHY, LUMBAR SPIN | 1/1/2007 | $161.93 | 3 |
| T | 72132 | COMPUTERIZED AXIAL TOMOGRAPHY LU | 1/1/2007 | $193.59 | 3 |
| T | 72133 | COMPUTERIZED AXIAL TOMOGRAPHY, L | 1/1/2007 | $242.37 | 3 |
| T | 72141 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $306.73 | 3 |
| T | 72142 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $367.97 | 3 |
| T | 72146 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $340.46 | 3 |
| T | 72147 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $367.97 | 3 |
| T | 72148 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $340.46 | 3 |
| T | 72149 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $367.97 | 3 |
| T | 72156 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $681.45 | 3 |
| T | 72157 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $681.45 | 3 |
| T | 72158 | MAGNETIC RESONANCE (EG,PROTON) I | 1/1/2007 | $681.45 | 3 |
| T | 72159 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $335.01 | 3 |
| T | 72170 | RADIOLOGIC EXAMINATION, PELVIS; | 1/1/2007 | $14.01 | 3 |
| T | 72190 | RADIOLOGIC EXAMINATION PELVIS; C | 1/1/2007 | $18.42 | 3 |
| T | 72191 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $323.08 | 3 |
| T | 72192 | COMPUTERIZED AXIAL TOMOGRAPHY, P | 1/1/2007 | $161.93 | 3 |
| T | 72193 | COMPUTERIZED AXIAL TOMOGRAPHY PE | 1/1/2007 | $187.36 | 3 |
| T | 72194 | COMPUTERIZED AXIAL TOMOGRAPHY PE | 1/1/2007 | $231.99 | 3 |
| T | 72195 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $303.10 | 3 |
| T | 72196 | MAGNETIC RESONANSE (EG, PROTON) | 1/1/2007 | $363.30 | 3 |
| T | 72197 | MAGNETIC RESONANCE IMAGING, PELV | 1/1/2007 | $671.33 | 3 |
| T | 72198 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $306.73 | 3 |
| T | 72200 | RADIOLOGIC EXAMINATION SACROILIA | 1/1/2007 | $14.01 | 3 |
| T | 72202 | RADIOLOGIC EXAMINATION SACROILIA | 1/1/2007 | $17.13 | 3 |
| T | 72220 | RADIOLOGIC EXAMINATION SACRUM AN | 1/1/2007 | $15.83 | 3 |
| T | 72240 | MYELOGRAPHY, CERVICAL, RADIOLOGI | 1/1/2007 | $130.01 | 3 |
| T | 72255 | MYELOGRAPHY, THORACIC, RADIOLOGI | 1/1/2007 | $118.33 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 72265 | MYELOGRAPHY, LUMBOSACRAL, RADIOL | 1/1/2007 | $111.59 | 3 |
| T | 72270 | MYELOGRAPHY, ENTIRE SPINAL CANAL | 1/1/2007 | $167.38 | 3 |
| T | 72275 | EPIDUROGRAPHY, RADIOLOGICAL SUPE | 1/1/2007 | $60.46 | 3 |
| T | 72285 | DISKOGRAPHY, CERVICAL, RADIOLOGI | 1/1/2007 | $229.14 | 3 |
| T | 72295 | DISKOGRAPHY, LUMBAR, RADIOLOGICA | 1/1/2007 | $214.87 | 3 |
| T | 73000 | RADIOLOGIC EXAMINATION CLAVICLE | 1/1/2007 | $14.01 | 3 |
| T | 73010 | RADIOLOGIC EXAMINATION; SCAPULA | 1/1/2007 | $14.01 | 3 |
| T | 73020 | RADIOLOGIC EXAMINATION SHOULDER | 1/1/2007 | $12.72 | 3 |
| T | 73030 | RADIOLOGIC EXAMINATION SHOULDER; | 1/1/2007 | $15.83 | 3 |
| T | 73040 | RADIOLOGICAL EXAMINATION, SHOULD | 1/1/2007 | $57.87 | 3 |
| T | 73050 | RADIOLOGIC EXAMINATION ACROMIOCL | 1/1/2007 | $18.42 | 3 |
| T | 73060 | RADIOLOGIC EXAMINATION; HUMERUS | 1/1/2007 | $15.83 | 3 |
| T | 73070 | RADIOLOGIC EXAMINATION, ELBOW; T | 1/1/2007 | $14.01 | 3 |
| T | 73080 | RADIOLOGIC EXAMINATION ELBOW; CO | 1/1/2007 | $15.83 | 3 |
| T | 73085 | RADIOLOGIC EXAMINATION, ELBOW, A | 1/1/2007 | $57.87 | 3 |
| T | 73090 | RADIOLOGIC EXAMINATION; FOREARM, | 1/1/2007 | $14.01 | 3 |
| T | 73092 | RADIOLOGIC EXAMINATION; UPPER EX | 1/1/2007 | $13.23 | 3 |
| T | 73100 | RADIOLOGIC EXAMINATION, WRIST; T | 1/1/2007 | $13.23 | 3 |
| T | 73110 | RADIOLOGIC EXAMINATION WRIST; CO | 1/1/2007 | $14.27 | 3 |
| T | 73115 | RADIOLOGIC EXAMINATION, WRIST, A | 1/1/2007 | $43.60 | 3 |
| T | 73120 | RADIOLOGIC EXAMINATION HAND TWO | 1/1/2007 | $13.23 | 3 |
| T | 73130 | RADIOLOGIC EXAMINATIO;N HAND; MI | 1/1/2007 | $14.27 | 3 |
| T | 73140 | RADIOLOGIC EXAMINATION FINGER OR | 1/1/2007 | $11.42 | 3 |
| T | 73200 | COMPUTED TOMOGRAPHY, UPPER EXTRE | 1/1/2007 | $135.46 | 3 |
| T | 73201 | COMPUTERIZED AXIAL TOMOGRAPHY UP | 1/1/2007 | $161.93 | 3 |
| T | 73202 | COMPUTERIZED AXIAL TOMOGRAPHY UP | 1/1/2007 | $203.19 | 3 |
| T | 73206 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $295.31 | 3 |
| T | 73218 | MAGNETIC RESONANCE IMAGING, UPPE | 1/1/2007 | $301.54 | 3 |
| T | 73219 | MAGNETIC RESONANCE IMAGING, UPPE | 1/1/2007 | $362.00 | 3 |
| T | 73220 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $669.25 | 3 |
| T | 73221 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $301.54 | 3 |
| T | 73222 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $362.00 | 3 |
| T | 73223 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $669.25 | 3 |
| T | 73225 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $301.80 | 3 |
| T | 73500 | RADIOLOGIC EXAMINATION HIP UNILA | 1/1/2007 | $12.72 | 3 |
| T | 73510 | RADIOLOGIC EXAMINATION HIP; COMP | 1/1/2007 | $15.83 | 3 |
| T | 73520 | RADIOLOGIC EXAMINATION HIPS BILA | 1/1/2007 | $18.42 | 3 |
| T | 73525 | RADIOLOGIC EXAMINATION, HIP, ART | 1/1/2007 | $57.87 | 3 |
| T | 73530 | RADIOLOGIC EXAMINATION HIP DURIN | 1/1/2007 | $14.01 | 3 |
| T | 73540 | RADIOLOGIC EXAMINATION PELVIS AN | 1/1/2007 | $15.83 | 3 |
| T | 73542 | RADIOLOGICAL EXAMINATION, SACROI | 1/1/2007 | $57.87 | 3 |
| T | 73550 | RADIOLOGIC EXAMINATION, FEMUR, T | 1/1/2007 | $15.83 | 3 |
| T | 73560 | RADIOLOGIC EXAMINATION KNEE ANTE | 1/1/2007 | $14.01 | 3 |
| T | 73562 | RADIOLOGIC EXAMINATION KNEE; ANT | 1/1/2007 | $15.83 | 3 |
| T | 73564 | RADIOLOGIC EXAM, KNEE; COMPLETE, | 1/1/2007 | $17.13 | 3 |
| T | 73565 | RADIOLOGIC EXAMINATION, KNEE; BO | 1/1/2007 | $13.23 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 73580 | RADIOLOGIC EXAMINATION, KNEE, AR | 1/1/2007 | $71.88 | 3 |
| T | 73590 | RADIOLOGIC EXAMINATION; TIBIA AN | 1/1/2007 | $14.01 | 3 |
| T | 73592 | RADIOLOGIC EXAMINATION; LOWER EX | 1/1/2007 | $13.23 | 3 |
| T | 73600 | RADIOLOGIC EXAMINATION, ANKLE; T | 1/1/2007 | $13.23 | 3 |
| T | 73610 | RADIOLOGIC EXAMINATION ANKLE; CO | 1/1/2007 | $14.27 | 3 |
| T | 73615 | RADIOLOGIC EXAMINATION, ANKLE, A | 1/1/2007 | $57.87 | 3 |
| T | 73620 | RADIOLOGIC EXAMINATION, FOOT; TW | 1/1/2007 | $13.23 | 3 |
| T | 73630 | RADIOLOGIC EXAMINATION FOOT; COM | 1/1/2007 | $14.27 | 3 |
| T | 73650 | RADIOLOGIC EXAMINATION CALCANEUS | 1/1/2007 | $12.72 | 3 |
| T | 73660 | RADIOLOGIC EXAMINATION; TOE OR T | 1/1/2007 | $11.42 | 3 |
| T | 73700 | COMPUTED TOMOGRAPHY, LOWER EXTRE | 1/1/2007 | $135.46 | 3 |
| T | 73701 | COMPUTERIZED AXIAL TOMOGRAPHY LO | 1/1/2007 | $161.93 | 3 |
| T | 73702 | COMPUTERIZED AXIAL TOMOGRAPHY LO | 1/1/2007 | $203.19 | 3 |
| T | 73706 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $295.31 | 3 |
| T | 73718 | MAGNETIC RESONANCE IMAGING, LOWE | 1/1/2007 | $301.54 | 3 |
| T | 73719 | MAGNETIC RESONANCE IMAGING, LOWE | 1/1/2007 | $362.00 | 3 |
| T | 73720 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $669.25 | 3 |
| T | 73721 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $301.54 | 3 |
| T | 73722 | MAGNETIC RESONANCE IMAGING, ANY | 1/1/2007 | $362.00 | 3 |
| T | 73723 | MAGNETIC RESONANCE IAMGING, ANY | 1/1/2007 | $669.25 | 3 |
| T | 73725 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $306.73 | 3 |
| T | 74000 | RADIOLOGIC EXAMINATION ABDOMEN S | 1/1/2007 | $14.01 | 3 |
| T | 74010 | RADIOLOGIC EXAMINATION ABDOMEN; | 1/1/2007 | $15.83 | 3 |
| T | 74020 | RADIOLOGIC EXAMINATION ABDOMEN; | 1/1/2007 | $17.13 | 3 |
| T | 74022 | RADIOLOGIC EXAMINATION, ABDOMEN; | 1/1/2007 | $20.24 | 3 |
| T | 74150 | COMPUTED TOMOGRAPHY, ABDOMEN; WI | 1/1/2007 | $155.18 | 3 |
| T | 74160 | COMPUTERIZED AXAIAL TOMOGRAPHY A | 1/1/2007 | $187.36 | 3 |
| T | 74170 | COMPUTERIZED AXIAL TOMOGRAPHY AB | 1/1/2007 | $231.99 | 3 |
| T | 74175 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $323.08 | 3 |
| T | 74181 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | $303.10 | 3 |
| T | 74182 | MAGNETIC RESONANCE IMAGING, ABDO | 1/1/2007 | $363.30 | 3 |
| T | 74183 | MAGNETIC RESONANCE IMAGING, ABDO | 1/1/2007 | $671.33 | 3 |
| T | 74185 | MAGNETIC RESONANCE ANGIOGRAPHY, | 1/1/2007 | $306.73 | 3 |
| T | 74190 | PERITONEOGRAM, RADIOLOGICAL SUPE | 1/1/2007 | $35.81 | 3 |
| T | 74210 | RADIOLOGIC EXAMINATION PHARYNX A | 1/1/2007 | $32.44 | 3 |
| T | 74220 | RADIOLOGIC EXAMINATION; ESOPHAGU | 1/1/2007 | $32.44 | 3 |
| T | 74230 | SWALLOWING FUNCTION, WITH CINERA | 1/1/2007 | $35.81 | 3 |
| T | 74235 | REMOVAL OF FOREIGN BODY(S), ESOP | 10/1/2005 | $71.62 | 3 |
| T | 74240 | RADIOLOGIC EXAMINATION GASTROINT | 1/1/2007 | $39.96 | 3 |
| T | 74241 | RADIOLOGIC EXAMINATION GASTROINT | 1/1/2007 | $40.74 | 3 |
| T | 74245 | RADIOLOGIC EXAM, GASTGROINTESTIN | 1/1/2007 | $65.39 | 3 |
| T | 74246 | RADIOLOGICAL EXAMINATION GASTROI | 1/1/2007 | $45.15 | 3 |
| T | 74247 | RADIOLOGICAL EXAMINATION GASTROI | 1/1/2007 | $46.45 | 3 |
| T | 74249 | RADIOLOGICAL EXAM, GASTROINTESTI | 1/1/2007 | $70.58 | 3 |
| T | 74250 | RADIOLOGIC EXAMINTION, SMALL INT | 1/1/2007 | $35.81 | 3 |
| T | 74251 | RADIOLOGIC EXAMINATION, SMALL BO | 1/1/2007 | $35.81 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 74260 | DUODENOGRAPHY HYPOTONIC | 1/1/2007 | $40.74 | 3 |
| T | 74270 | RADIOLOGIC EXAMINATION, COLON; B | 1/1/2007 | $46.97 | 3 |
| T | 74280 | RADIOLOGIC EXAMINATION COLON AIR | 1/1/2007 | $61.50 | 3 |
| T | 74283 | BARIUM ENEMA, THERAPEUTIC, FOR R | 1/1/2007 | $70.32 | 3 |
| T | 74290 | CHOLECYSTOGRAPHY ORAL CONTRAST | 1/1/2007 | $20.24 | 3 |
| T | 74291 | CHOLECYSTOGRAPHY ORAL CONTRAST; | 1/1/2007 | $11.42 | 3 |
| T | 74300 | CHOLANGIOGRAPHY AND/OR PANCREATO | 10/1/2005 | $84.86 | 3 |
| T | 74305 | CHOLANGIOGRAPHY AND/OR PANCREATO | 1/1/2007 | $21.54 | 3 |
| T | 74320 | CHOLANGIOGRAPHY, PERCUTANEOUS, T | 1/1/2007 | $86.41 | 3 |
| T | 74327 | POSTOPERATIVE BILIARY DUCT CALCU | 1/1/2007 | $48.79 | 3 |
| T | 74328 | ENDOSCOPIC CATHETERIZATION OF TH | 1/1/2007 | $86.41 | 3 |
| T | 74329 | ENDOSCOPIC CATHETERIZATION OF TH | 10/1/2005 | $86.15 | 3 |
| T | 74330 | COMBINED ENDOSCOPIC CATHETERIZAT | 1/1/2007 | $86.41 | 3 |
| T | 74340 | INTRO OF LONG GASTROINTESTINAL T | 1/1/2007 | $71.88 | 3 |
| T | 74350 | PERCUTANEOUS PLACEMENT OF GASTRO | 1/1/2007 | $86.41 | 3 |
| T | 74355 | PERCUTANEOUS PLACEMENT OF INTERO | 1/1/2007 | $71.88 | 3 |
| T | 74360 | INTRALUMINAL DILATION OF STRICTU | 1/1/2007 | $86.41 | 3 |
| T | 74363 | PERCUTANEOUS TRANSHEPATIC DILATA | 10/1/2005 | $166.86 | 3 |
| T | 74400 | UROGRAPHY (PYELOGRAPHY), INTRAVE | 1/1/2007 | $46.45 | 3 |
| T | 74410 | UROGRAPHY, INFUSION, DRIP TECHNI | 1/1/2007 | $53.72 | 3 |
| T | 74415 | UROGRAPHY INFUSION DRIP TECHNIQU | 1/1/2007 | $58.39 | 3 |
| T | 74420 | UROGRAPHY RETROGRADE WITH OR WIT | 1/1/2007 | $71.88 | 3 |
| T | 74425 | UROGRAPHY, ANTEGRADE, (PYELOSTOG | 1/1/2007 | $35.81 | 3 |
| T | 74430 | CYSTOGRAPHY, MINIMUM OF THREE VI | 1/1/2007 | $28.80 | 3 |
| T | 74440 | VASOGRAPHY, VESICULOGRAPHY, OR E | 1/1/2007 | $30.88 | 3 |
| T | 74445 | CORPORA CAVERNOSOGRAPHY, RADIOLO | 1/1/2007 | $30.88 | 3 |
| T | 74450 | URETHROCYSTOGRAPHY, RETROGRADE, | 1/1/2007 | $39.96 | 3 |
| T | 74455 | URETHROCYSTOGRAPHY, VOIDING, RAD | 1/1/2007 | $43.60 | 3 |
| T | 74470 | RADIOLOGIC EXAMINATION, RENAL CY | 1/1/2007 | $34.25 | 3 |
| T | 74475 | INTRODUCTION OF INTRACATHETER OR | 1/1/2007 | $111.59 | 3 |
| T | 74480 | INTRO OF URETERAL CATH OR STENT | 1/1/2007 | $111.59 | 3 |
| T | 74485 | DILATION OF NEPHROSTOMY, URETERS | 1/1/2007 | $86.41 | 3 |
| T | 74710 | PELVIMETRY WITH OR WITHOUT PLACE | 1/1/2007 | $28.80 | 3 |
| T | 74740 | HYSTEROSALPINGOGRAPHY, RADIOLOGI | 8/11/2003 | NC | 9 |
| T | 74742 | TRANSCERVICAL CATHETERIZATION OF | 1/1/1993 | NC | 9 |
| T | 74775 | PERINEOGRAM (EG, VAGINOGRAM, FOR | 1/1/2007 | $39.96 | 3 |
| T | 75552 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $306.73 | 3 |
| T | 75553 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $306.73 | 3 |
| T | 75554 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $306.73 | 3 |
| T | 75555 | CARDIAC MAGNETIC RESONANCE IMAGI | 1/1/2007 | $306.73 | 3 |
| T | 75556 | CARDIAC MAGNETIC RESONANCE IMAGI | 10/1/2001 | $0.01 | 5 |
| T | 75600 | AORTOGRAPHY, THORACIC, W/OUT SER | 1/1/2007 | $344.88 | 3 |
| T | 75605 | AORTOGRAPHY, THORACIC, BY SERIAL | 1/1/2007 | $344.88 | 3 |
| T | 75625 | AORTOGRAPHY, ABDOMINAL, BY SERIA | 1/1/2007 | $344.88 | 3 |
| T | 75630 | AORTOGRAPHY, ABDOM PLUS BILAT IL | 1/1/2007 | $359.67 | 3 |
| T | 75635 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY | 1/1/2007 | $424.28 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 75650 | ANGIOGRAPHY, CERVICOCEREBRAL, CA | 1/1/2007 | $344.88 | 3 |
| T | 75658 | ANGIOGRAPHY, BRACHIAL, RETROGRAD | 1/1/2007 | $344.88 | 3 |
| T | 75660 | ANGIOGRAPHY, EXTERNAL CAROTID, U | 1/1/2007 | $344.88 | 3 |
| T | 75662 | ANGIOGRAPHY, EXTERNAL CAROTID, B | 1/1/2007 | $344.88 | 3 |
| T | 75665 | ANGIOGRPAHY, CAROTID, CEREBRAL, | 1/1/2007 | $344.88 | 3 |
| T | 75671 | ANGIOGRAPHY, CAROTID, CEREBRAL, | 1/1/2007 | $344.88 | 3 |
| T | 75676 | ANGIOGRAPHY, CAROTID, CERVICAL, | 1/1/2007 | $344.88 | 3 |
| T | 75680 | ANGIOGRAPHY, CAROTID, CERVICAL, | 1/1/2007 | $344.88 | 3 |
| T | 75685 | ANGIOGRAPHY, VERTEBRAL, CERVICAL | 1/1/2007 | $344.88 | 3 |
| T | 75705 | ANGIOGRAPHY, SPINAL, SELECTIVE, | 1/1/2007 | $344.88 | 3 |
| T | 75710 | ANGIOGRAPHY, EXTREMITY, UNILATER | 1/1/2007 | $344.88 | 3 |
| T | 75716 | ANGIOGRAPHY, EXTREMITY, BILATERA | 1/1/2007 | $344.88 | 3 |
| T | 75722 | ANGIOGRAPHY, RENAL, UNILATERAL, | 1/1/2007 | $344.88 | 3 |
| T | 75724 | ANGIOGRAPHY, RENAL, BILATERAL, S | 1/1/2007 | $344.88 | 3 |
| T | 75726 | ANGIOGRAPHY,VISCERAL,SELECTIVE O | 1/1/2007 | $344.88 | 3 |
| T | 75731 | ANGIOGRAPHY, ADRENAL, UNILATERAL | 1/1/2007 | $344.88 | 3 |
| T | 75733 | ANGIOGRAPHY, ADRENAL, BILATERAL, | 1/1/2007 | $344.88 | 3 |
| T | 75736 | ANGIOGRAPHY, PELVIC, SELECTIVE O | 1/1/2007 | $344.88 | 3 |
| T | 75741 | ANGIOGRAPHY, PULMONARY, UNILATER | 1/1/2007 | $344.88 | 3 |
| T | 75743 | ANGIOGRAPHY, PULMONARY, BILATERA | 1/1/2007 | $344.88 | 3 |
| T | 75746 | ANGIOGRAPHY, PULMONARY, BY NONSE | 1/1/2007 | $344.88 | 3 |
| T | 75756 | ANGIOGRAPHY, INTERNAL MAMMARY, R | 1/1/2007 | $344.88 | 3 |
| T | 75774 | ANGIOGRAPHY, SELECTIVE, EACH ADD | 1/1/2007 | $344.88 | 3 |
| T | 75790 | ANGIOGRAPHY, ARTERIOVENOUS SHUNT | 1/1/2007 | $37.11 | 3 |
| T | 75801 | LYMPHANGIOGRAPHY, EXTREMITY ONLY | 1/1/2007 | $148.43 | 3 |
| T | 75803 | LYMPHANGIOGRAPHY, EXTREMITY ONLY | 1/1/2007 | $148.43 | 3 |
| T | 75805 | LYMPHANGIOGRAPHY, PELVIC/ABDOMIN | 1/1/2007 | $167.38 | 3 |
| T | 75807 | LYMPHANGIOGRAPHY, PELVIC/ABDOMIN | 10/1/2005 | $166.86 | 3 |
| T | 75809 | SHUNTOGRAM FOR INVESTIGATION OF | 1/1/2007 | $21.54 | 3 |
| T | 75810 | SPLENOPORTOGRAPHY, RADIOLOGICAL | 1/1/2007 | $344.88 | 3 |
| T | 75820 | VENOGRAPHY, EXTREMITY, UNILATERA | 1/1/2007 | $26.21 | 3 |
| T | 75822 | VENOGRAPHY, EXTREMITY, BILATERAL | 1/1/2007 | $40.48 | 3 |
| T | 75825 | VENOGRAPHY, CAVAL, INFERIOR, W/S | 1/1/2007 | $344.88 | 3 |
| T | 75827 | VENOGRAPHY, CAVAL, SUPERIOR, W/S | 1/1/2007 | $344.88 | 3 |
| T | 75831 | VENOGRAPHY, RENAL, UNILATERAL, S | 1/1/2007 | $344.88 | 3 |
| T | 75833 | VENOGRAPHY, RENAL, BILATERAL, SE | 1/1/2007 | $344.88 | 3 |
| T | 75840 | VENOGRAPHY, ADRENAL, UNILATERAL, | 1/1/2007 | $344.88 | 3 |
| T | 75842 | VENOGRAPHY, ADRENAL, BILATERAL, | 1/1/2007 | $344.88 | 3 |
| T | 75860 | VENOGRAPHY, SINUS OR JUGULAR, CA | 1/1/2007 | $344.88 | 3 |
| T | 75870 | VENOGRAPHY, SUPERIOR SAGITTAL SI | 1/1/2007 | $344.88 | 3 |
| T | 75872 | VENOGRAPHY, EPIDURAL, RADIOLOGIC | 1/1/2007 | $344.88 | 3 |
| T | 75880 | VENOGRAPHY, ORBITAL, RADIOLOGICA | 1/1/2007 | $26.21 | 3 |
| T | 75885 | PERCUTANEOUS TRANSHEPATIC PORTOG | 1/1/2007 | $344.88 | 3 |
| T | 75887 | PERCUTANEOUS TRANSHEPATIC PORTOG | 1/1/2007 | $344.88 | 3 |
| T | 75889 | HEPATIC VENOGRAPHY, WEDGED OR FR | 1/1/2007 | $344.88 | 3 |
| T | 75891 | HEPATIC VENOGRAPHY, WEDGED OR FR | 1/1/2007 | $344.88 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 75893 | VENOUS SAMPLING THRU CATH, W/OR | 1/1/2007 | $344.88 | 3 |
| T | 75894 | TRANSCATHETER THERAPY, EMBOLIZAT | 1/1/2007 | $660.95 | 3 |
| T | 75896 | TRANSCATHETER THERAPY, INFUSION, | 1/1/2007 | $574.79 | 3 |
| T | 75898 | ANGIOGRAPHY THRU EXISTING CATHET | 1/1/2007 | $28.80 | 3 |
| T | 75900 | EXCHANGE OF A PREVIOUSLY PLACED | 10/1/2005 | $572.98 | 3 |
| T | 75901 | MECHANICAL REMOVAL OF PERICATHET | 1/1/2007 | $55.53 | 3 |
| T | 75902 | MECHANICAL REMOVAL OF INTRALUMIN | 1/1/2007 | $55.53 | 3 |
| T | 75940 | PERCUTANEOUS PLACEMENT OF IVC FI | 1/1/2007 | $344.88 | 3 |
| T | 75945 | INTRAVASCULAR ULTRASOUND (NON-CO | 1/1/2007 | $124.82 | 3 |
| T | 75946 | INTRAVASCULAR ULTRASOUND (NON-CO | 10/1/2005 | $62.80 | 3 |
| T | 75952 | ENDOVASCULAR REPAIR OF INFRARENA | 6/1/2004 | $0.01 | 5 |
| T | 75953 | PLACEMENT OF PROXIMAL OR DISTAL | 6/1/2004 | $0.01 | 5 |
| T | 75954 | ENDOVASCULAR REPAIR OF ILIAC ART | 10/1/2005 | $0.01 | 5 |
| T | 75956 | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | $0.01 | 5 |
| T | 75957 | ENDOVASCULAR REPAIR OF DESCENDIN | 1/1/2006 | $0.01 | 5 |
| T | 75958 | PLACEMENT OF PROXIMAL EXTENSION | 1/1/2006 | $0.01 | 5 |
| T | 75959 | PLACEMENT OF DISTAL EXTENSION PR | 1/1/2006 | $0.01 | 5 |
| T | 75960 | TRANSCATHETER INTRO OF INTRAVASC | 1/1/2007 | $407.67 | 3 |
| T | 75961 | TRANSCATHETER RETRIEVAL,PERCUTAN | 1/1/2007 | $287.53 | 3 |
| T | 75962 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $431.29 | 3 |
| T | 75964 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $229.40 | 3 |
| T | 75966 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $431.29 | 3 |
| T | 75968 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $229.40 | 3 |
| T | 75970 | TRANSCATHETER BIOPSY, RADIOLOGIC | 1/1/2007 | $315.81 | 3 |
| T | 75978 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $431.29 | 3 |
| T | 75980 | PERCUTANEOUS TRANSHEPATIC BILIRY | 1/1/2007 | $148.43 | 3 |
| T | 75982 | PERCUTANEOUS PLACE OF DRAIN CATH | 10/1/2005 | $166.86 | 3 |
| T | 75984 | CHANGE OF PERCUTANEOUS TUBE OR D | 1/1/2007 | $53.72 | 3 |
| T | 75989 | RADIOLOGICAL GUIDANCE FOR PERCUT | 1/1/2007 | $86.41 | 3 |
| T | 75992 | TRANSLUMINAL ATHERECTOMY, PERIPH | 1/1/2007 | $431.29 | 3 |
| T | 75993 | TRANSLUMINAL ATHERECTOMY, EACH A | 10/1/2005 | $228.88 | 3 |
| T | 75994 | TRANSLUMINAL ATHERECTOMY, RENAL, | 10/1/2005 | $429.99 | 3 |
| T | 75995 | TRANSLUMINAL ATHERECTOMY, VISCER | 10/1/2005 | $429.99 | 3 |
| T | 75996 | TRANSLUMINAL ATHERECTOMY, EACH A | 10/1/2005 | $228.88 | 3 |
| T | 75998 | FLUOROSCOPIC GUIDANCE FOR CENTRA | 1/1/2007 | INVALID | N |
| T | 76000 | FLUOROSCOPY 9SEP PROC), UP TO ON | 1/1/2007 | $35.81 | 3 |
| T | 76001 | FLUOROSCOPY, PHYS TIME MORE THAN | 1/1/2007 | $71.88 | 3 |
| T | 76003 | FLUROSCOPIC GUIDANCE FOR NEEDLE | 1/1/2007 | INVALID | N |
| T | 76005 | FLUOROSCOPIC GUIDANCE AND LOCALI | 1/1/2007 | INVALID | N |
| T | 76006 | MANUAL APPLICATION OF STRESS PER | 1/1/2007 | INVALID | N |
| T | 76010 | RADIOLOGIC EXAMINATION FROM NOSE | 1/1/2007 | $14.01 | 3 |
| T | 76012 | RADIOLOGICAL SUPERVISION AND INT | 1/1/2007 | INVALID | N |
| T | 76013 | RADIOLOGICAL SUPERVISION AND INT | 1/1/2007 | INVALID | N |
| T | 76020 | BONE AGE STUDIES | 1/1/2007 | INVALID | N |
| T | 76040 | BONE LENGTH STUDIES (ORTHOROENTG | 1/1/2007 | INVALID | N |
| T | 76061 | RADIOLOGIC EXAMINATION OSSEOUS S | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 76062 | RADIOLOGIC EXAMINATION OSSEOUS S | 1/1/2007 | INVALID | N |
| T | 76065 | INFANT | 1/1/2007 | INVALID | N |
| T | 76066 | JOINT SURVEY, SINGLE VIEW, TWO O | 1/1/2007 | INVALID | N |
| T | 76070 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | INVALID | N |
| T | 76071 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | INVALID | N |
| T | 76075 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| T | 76076 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| T | 76077 | DUAL ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | INVALID | N |
| T | 76078 | RADIOGRAPHIC ABSORPTIOMETRY (EG, | 1/1/2007 | INVALID | N |
| T | 76080 | RADIOLOGIC EXAM, FISTULA OR SINU | 1/1/2007 | $28.80 | 3 |
| T | 76082 | COMPUTER AIDED DETECTION WITH FU | 1/1/2007 | INVALID | N |
| T | 76083 | COMPUTER AIDED DETECTION WITH FU | 1/1/2007 | INVALID | N |
| T | 76085 | DIGITIZATION OF FILM RADIOGRAPHI | 4/1/2004 | INVALID | N |
| T | 76086 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | INVALID | N |
| T | 76088 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | INVALID | N |
| T | 76090 | MAMMOGRAPHY UNILATERAL | 1/1/2007 | INVALID | N |
| T | 76091 | MAMMOGRAPHY; BILATERAL | 1/1/2007 | INVALID | N |
| T | 76092 | SCREENING MAMMOGRAPHY, BILATERAL | 1/1/2007 | INVALID | N |
| T | 76093 | MAGNETIC RESONANCE IMAGING, BREA | 1/1/2007 | INVALID | N |
| T | 76094 | MAGNETIC RESONANCE IMAGING, BREA | 1/1/2007 | INVALID | N |
| T | 76095 | STEREOTACTIC LOCALIZATION GUIDAN | 1/1/2007 | INVALID | N |
| T | 76096 | MAMMOGRAPHIC GUIDANCE FOR NEEDLE | 1/1/2007 | INVALID | N |
| T | 76098 | RADIOLOGICAL EXAMINATION, SURGIC | 1/1/2007 | $11.42 | 3 |
| T | 76100 | RADIOLOGICAL EXAMINATION, SINGLE | 1/1/2007 | $34.25 | 3 |
| T | 76101 | RADIOLOGIC EXAM,CMPLX MOTION(HYP | 1/1/2007 | $38.93 | 3 |
| T | 76102 | RADIOLOGIC EXAMINATION COMPLEX M | 1/1/2007 | $48.01 | 3 |
| T | 76120 | CINERADIOGRAPHY/VIDEORADIOGRAPHY | 1/1/2007 | $28.80 | 3 |
| T | 76125 | CINERADIOGRAPHY/VIDEORADIOGRAPHY | 1/1/2007 | $21.54 | 3 |
| T | 76150 | XERORADIOGRAPHY | 1/1/2007 | $11.42 | 3 |
| T | 76350 | SUBTRACTION IN CONJUNCTION WITH | 1/1/2003 | $78.20 | 3 |
| T | 76355 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| T | 76360 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| T | 76362 | COMPUTERIZED AXIAL TOMOGRAPHIC G | 1/1/2007 | INVALID | N |
| T | 76370 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | INVALID | N |
| T | 76375 | CORONAL, SAGITTAL, MULTIPLANAR, | 1/1/2006 | INVALID | N |
| T | 76376 | 3D RENDERING W/INTERPRETATION AN | 4/1/2006 | NC | 9 |
| T | 76377 | 3D RENDERING W/INTERPRETATION AN | 4/1/2006 | NC | 9 |
| T | 76380 | COMPUTED TOMOGRAPHY, LIMITED OR | 1/1/2007 | $95.76 | 3 |
| T | 76390 | MAGNETIC RESONANCE SPECTROSCOPY | 1/1/2007 | $301.80 | 3 |
| T | 76393 | MAGNETIC RESONANCE GUIDANCE FOR | 1/1/2007 | INVALID | N |
| T | 76394 | MAGNETIC RESONANCE GUIDANCE FOR, | 1/1/2007 | INVALID | N |
| T | 76400 | MAGNETIC RESONANCE (EG, PROTON) | 1/1/2007 | INVALID | N |
| T | 76490 | ULTRASOUND GUIDANCE FOR, AND MON | 4/1/2004 | INVALID | N |
| T | 76496 | UNLISTED FLUOROSCOPIC PROCEDURE | 1/1/2003 | $0.01 | 5 |
| T | 76497 | UNLISTED COMPUTED TOMOGRAPHY PRO | 1/1/2003 | $0.01 | 5 |
| T | 76498 | UNLISTED MAGNETIC RESONANCE PROC | 1/1/2003 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 76499 | UNLISTED DIAGNOSTIC RADIOGRAPHIC | 10/1/2001 | $0.01 | 5 |
| T | 76506 | ECHOENCEPHALOGRAPHY B-MODE (GRAY | 1/1/2007 | $38.93 | 3 |
| T | 76510 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $58.65 | 3 |
| T | 76511 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $54.75 | 3 |
| T | 76512 | OPHTHALMIC ULTRASOUND, DIAGNOSTI | 1/1/2007 | $49.82 | 3 |
| T | 76513 | OPHTHALMIC ULTRASOUND; ECHOGRAPH | 1/1/2007 | $42.04 | 3 |
| T | 76514 | OPHTHALMIC ULTRASOUND, ECHOGRAPH | 1/1/2007 | $1.56 | 3 |
| T | 76516 | OPHTHALMIC BIOMETRY BY ULTRASOUN | 1/1/2007 | $33.48 | 3 |
| T | 76519 | OPHTHALMIC BIOMETRY BY ULTRASOUN | 1/1/2007 | $35.81 | 3 |
| T | 76529 | OPHTHALMIC ULTRASONIC FOREIGN BO | 1/1/2007 | $31.40 | 3 |
| T | 76536 | ULTRASOUND, SOFT TISSUES OF HEAD | 1/1/2007 | $38.93 | 3 |
| T | 76604 | ULTRASOUND, CHEST, B-SCAN (INCL | 1/1/2007 | $35.81 | 3 |
| T | 76645 | ULTRASOUND, BREAST(S) (UNILATERA | 1/1/2007 | $28.80 | 3 |
| T | 76700 | ULTRASOUND, ABDOMINAL, B-SCAN AN | 1/1/2007 | $54.24 | 3 |
| T | 76705 | ECHOGRAPHY ABDOMINAL B-SCAN AND/ | 1/1/2007 | $38.93 | 3 |
| T | 76770 | ULTRASOUND, RETROPERITONEAL (REN | 1/1/2007 | $54.24 | 3 |
| T | 76775 | ECHOGRAPHY RETROPERITONEAL B-SCA | 1/1/2007 | $38.93 | 3 |
| T | 76776 | ULTRASOUND, TRANSPLANTED KIDNEY, | 1/1/2007 | $80.19 | 3 |
| T | 76778 | ULTRASOUND, TRANSPLANTED KIDNEY, | 1/1/2007 | INVALID | N |
| T | 76800 | ULTRASOUND, SPINAL CANAL AND CON | 1/1/2007 | $38.93 | 3 |
| T | 76801 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $57.87 | 3 |
| T | 76802 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $30.36 | 3 |
| T | 76805 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $57.87 | 3 |
| T | 76810 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $32.96 | 3 |
| T | 76811 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $103.02 | 3 |
| T | 76812 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $37.89 | 3 |
| T | 76813 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $48.53 | 3 |
| T | 76814 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $25.43 | 3 |
| T | 76815 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $38.93 | 3 |
| T | 76816 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $30.36 | 3 |
| T | 76817 | ULTRASOUND, PREGNANT UTERUS, REA | 1/1/2007 | $41.00 | 3 |
| T | 76818 | FETAL BIOPHYSICAL PROFILE; WITH | 1/1/2007 | $44.37 | 3 |
| T | 76819 | FETAL BIOPHYSICAL PROFILE; WITHO | 1/1/2007 | $44.37 | 3 |
| T | 76820 | DOPPLER VELOCIMETRY, FETAL; UMBI | 1/1/2007 | $44.89 | 3 |
| T | 76821 | DOPPLER VELOCIMETRY, FETAL; MIDD | 1/1/2007 | $44.89 | 3 |
| T | 76825 | ECHOCARDIOGRAPHY, FETAL, CARDIOV | 1/1/2007 | $54.24 | 3 |
| T | 76826 | ECHOCARDIOGRAPHY, FETAL, CARDIOV | 1/1/2007 | $19.72 | 3 |
| T | 76827 | DOPPLER ECHOCARDIOGRAPHY, FETAL, | 1/1/2007 | $47.75 | 3 |
| T | 76828 | DOPPLER ECHOCARDIOGRAPHY, FETAL, | 1/1/2007 | $30.88 | 3 |
| T | 76830 | ULTRASOUND, TRANSVAGINAL | 1/1/2007 | $42.04 | 3 |
| T | 76831 | HYSTEROSONOGRAPHY, WITH OR WITHO | 1/1/2007 | $42.04 | 3 |
| T | 76856 | ULTRASOUND, PELVIC (NON-OBSTETRI | 1/1/2007 | $42.04 | 3 |
| T | 76857 | ECHOGRAPHY, PELVIC (NON-OBSTETRI | 1/1/2007 | $45.93 | 3 |
| T | 76870 | ULTRASOUND, SCROTUM AND CONTENTS | 1/1/2007 | $42.04 | 3 |
| T | 76872 | ECHOGRAPHY, TRANSRECTAL | 1/1/2007 | $55.27 | 3 |
| T | 76873 | ECHOGRAPHY, TRANSRECTAL; PROSTAT | 1/1/2007 | $58.91 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 76880 | ULTRASOUND, EXTREMITY, NON-VASCU | 1/1/2007 | $38.93 | 3 |
| T | 76885 | ULTRASOUND, INFANT HIPS, REAL TI | 1/1/2007 | $42.04 | 3 |
| T | 76886 | ULTRASOUND, INFANT HIPS, REAL TI | 1/1/2007 | $38.93 | 3 |
| T | 76930 | ULTRASONIC GUIDANCE FOR PERICARD | 1/1/2007 | $42.04 | 3 |
| T | 76932 | ULTRASONIC GUIDANCE FOR ENDOMYOC | 1/1/2007 | $42.04 | 3 |
| T | 76936 | ULTRASOUND GUIDED COMPRESSION RE | 1/1/2007 | $172.57 | 3 |
| T | 76937 | ULTRASOUND GUIDANCE FOR VASCULAR | 1/1/2007 | $12.46 | 3 |
| T | 76940 | ULTRASOUND GUIDANCE FOR, AND MON | 1/1/2007 | $46.97 | 3 |
| T | 76941 | ULTRASONIC GUIDANCE FOR INTRAUTE | 1/1/2007 | $41.78 | 3 |
| T | 76942 | ULTRASONIC GUIDANCE FOR NEEDLE P | 1/1/2007 | $75.77 | 3 |
| T | 76945 | ULTRASONIC GUIDANCE FOR CHORIONI | 1/1/2007 | $41.78 | 3 |
| T | 76946 | ULTRASONIC GUIDANCE FOR AMNIOCEN | 1/1/2007 | $42.04 | 3 |
| T | 76948 | ULTRASONIC GUIDANCE FOR ASPIRATI | 1/1/2007 | $42.04 | 3 |
| T | 76950 | ULTRASONIC GUIDANCE FOR PLACEMEN | 1/1/2007 | $35.81 | 3 |
| T | 76965 | ULTRASONIC GUIDANCE FOR INTERSTI | 1/1/2007 | $152.59 | 3 |
| T | 76970 | ULTRASOUND STUDY FOLLOW-UP (SPEC | 1/1/2007 | $28.80 | 3 |
| T | 76975 | GASTROINTESTINAL ENDOSCOPIC ULTR | 1/1/2007 | $42.04 | 3 |
| T | 76977 | ULTRASOUND BONE DENSITY MEASUREM | 1/1/2007 | $22.58 | 3 |
| T | 76986 | ULTRASONIC GUIDANCE, INTRAOPERAT | 1/1/2007 | INVALID | N |
| T | 76999 | UNLISTED ULTRASOUND PROCEDURE (E | 10/1/2001 | $0.01 | 5 |
| T | 77001 | FLUOROSCOPIC GUIDANCE FOR CENTRA | 1/1/2007 | $66.69 | 3 |
| T | 77002 | FLUOROSCOPIC GUIDANCE FOR NEEDLE | 1/1/2007 | $28.03 | 3 |
| T | 77003 | FLUOROSCOPIC GUIDANCE AND LOCALI | 1/1/2007 | $17.39 | 3 |
| T | 77011 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $508.10 | 3 |
| T | 77012 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $57.87 | 3 |
| T | 77014 | COMPUTED TOMOGRAPHY GUIDANCE FOR | 1/1/2007 | $112.10 | 3 |
| T | 77021 | MRI FOR NEEDLE PLACEMENT, RADIOL | 1/1/2007 | $241.59 | 3 |
| T | 77031 | STEREOTACTIC LOCALIZATION GUIDAN | 1/1/2007 | $42.56 | 3 |
| T | 77032 | MAMMOGRAPHIC GUIDANCE FOR NEEDLE | 1/1/2007 | $12.20 | 3 |
| T | 77051 | COMPUTER-AIDED DETECTION W/FURTH | 1/1/2007 | $4.67 | 3 |
| T | 77052 | COMPUTER-AIDED DETECTION W/FURTH | 1/1/2007 | $4.67 | 3 |
| T | 77053 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | $16.35 | 3 |
| T | 77054 | MAMMARY DUCTOGRAM OR GALACTOGRAM | 1/1/2007 | $42.04 | 3 |
| T | 77055 | MAMMOGRAPHY; UNILATERAL | 1/1/2007 | $35.55 | 3 |
| T | 77056 | MAMMOGRAPHY; BILATERAL | 1/1/2007 | $45.67 | 3 |
| T | 77057 | SCREENING MAMMOGRAPHY, BILATERAL | 1/1/2007 | $31.14 | 3 |
| T | 77058 | MRI, BREAST, WITHOUT AND/OR WITH | 1/1/2007 | $546.77 | 3 |
| T | 77059 | MRI, BREAST, WITHOUT AND/OR WITH | 1/1/2007 | $552.48 | 3 |
| T | 77072 | BONE AGE STUDIES | 1/1/2007 | $9.34 | 3 |
| T | 77073 | BONE LENGTH STUDIES (ORTHOROENTG | 1/1/2007 | $15.57 | 3 |
| T | 77074 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $32.96 | 3 |
| T | 77075 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $53.46 | 3 |
| T | 77076 | RADIOLOGIC EXAMINATION, OSSEOUS | 1/1/2007 | $46.19 | 3 |
| T | 77077 | JOINT SURVEY, SINGLE VIEW, 2 OR | 1/1/2007 | $15.31 | 3 |
| T | 77078 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | $119.63 | 3 |
| T | 77079 | COMPUTED TOMOGRAPHY, BONE MINERA | 1/1/2007 | $18.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 77080 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $23.36 | 3 |
| T | 77081 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $17.65 | 3 |
| T | 77082 | DUAL-ENERGY X-RAY ABSORPTIOMETRY | 1/1/2007 | $10.64 | 3 |
| T | 77083 | RADIOGRAPHIC ABSORPTIOMETRY, 1 O | 1/1/2007 | NC | 9 |
| T | 77084 | MRI, BONE MAROW BLOOD SUPPLY | 1/1/2007 | NC | 9 |
| T | 77280 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $94.98 | 3 |
| T | 77285 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $152.85 | 3 |
| T | 77290 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $178.54 | 3 |
| T | 77295 | THERAPEUTIC RADIOLOGY SIMULATION | 1/1/2007 | $765.27 | 3 |
| T | 77299 | UNLISTED PROCEDURE, THERAPEUTIC | 10/1/2001 | $0.01 | 5 |
| T | 77300 | BASIC RADIATION DOSIMETRY CALCUL | 1/1/2007 | $36.59 | 3 |
| T | 77301 | INTENSITY MODULATED RADIOTHERAPY | 1/1/2007 | $765.27 | 3 |
| T | 77305 | TELETHERAPY ISODOSE PLAN (WHETHE | 1/1/2007 | $51.38 | 3 |
| T | 77310 | TELETHERAPY ISODOSE PLAN (WHETHE | 1/1/2007 | $64.10 | 3 |
| T | 77315 | TELETHERAPY, ISODOSE PLAN (WHETH | 1/1/2007 | $72.92 | 3 |
| T | 77321 | SPECIAL TELETHERAPY PORT PLAN PA | 1/1/2007 | $110.55 | 3 |
| T | 77326 | BRACHYTHERAPY ISODOSE PLAN; SIMP | 1/1/2007 | $64.88 | 3 |
| T | 77327 | BRACHYTHERAPY ISODOSE CALCULATIO | 1/1/2007 | $94.98 | 3 |
| T | 77328 | BRACHYTHERAPY ISODOSE CALCULATIO | 1/1/2007 | $135.46 | 3 |
| T | 77331 | SPECIAL DOSIMETRY (EG, TLD, MICR | 1/1/2007 | $13.49 | 3 |
| T | 77332 | TREATMENT DEVICES DESIGN AND CON | 1/1/2007 | $36.59 | 3 |
| T | 77333 | TREATMENT DEVICES DESIGN AND CON | 1/1/2007 | $52.16 | 3 |
| T | 77334 | TREATMENT DEVICES DESIGN AND CON | 1/1/2007 | $89.01 | 3 |
| T | 77336 | CONTINUING MEDICAL RADIATION PHY | 1/1/2007 | $81.74 | 3 |
| T | 77370 | SPECIAL MEDICAL RADIATION PHYSIC | 1/1/2007 | $95.50 | 3 |
| T | 77399 | UNLISTED PROCEDURE MEDICAL RADIA | 10/1/2001 | $0.01 | 5 |
| T | 77401 | RADIATION TREATMENT DELIVERY, SU | 1/1/2007 | $49.05 | 3 |
| T | 77402 | RADIATION TREATMENT DELIVERY,SIN | 1/1/2007 | $49.05 | 3 |
| T | 77403 | RADIATION TREATMENT DELIVERY,SIN | 1/1/2007 | $49.05 | 3 |
| T | 77404 | RADIATION TREATMENT DELIVERY,SIN | 1/1/2007 | $49.05 | 3 |
| T | 77406 | RADIATION TREATMENT DELIVERY,SIN | 1/1/2007 | $49.05 | 3 |
| T | 77407 | RADIATION TREATMENT DELIVERY,TWO | 1/1/2007 | $57.61 | 3 |
| T | 77408 | RADIATION TREATMENT DELIVERY,TWO | 1/1/2007 | $57.61 | 3 |
| T | 77409 | RADIATION TREATMENT DELIVERY,TWO | 1/1/2007 | $57.61 | 3 |
| T | 77411 | RADIATION TREATMENT DELIVERY,TWO | 1/1/2007 | $57.61 | 3 |
| T | 77412 | RADIATION TREATMENT DELIVERY,THR | 1/1/2007 | $64.10 | 3 |
| T | 77413 | RADIATION TREATMENT DELIVERY,THR | 1/1/2007 | $64.10 | 3 |
| T | 77414 | RADIATION TREATMENT DELIVERY,THR | 1/1/2007 | $64.10 | 3 |
| T | 77416 | RADIATION TREATMENT DELIVERY,THR | 1/1/2007 | $64.10 | 3 |
| T | 77417 | THERAPEUTIC RADIOLOGY PORT FILM( | 1/1/2007 | $16.35 | 3 |
| T | 77418 | INTENSITY MODULATED TREATMENT DE | 1/1/2007 | $472.29 | 3 |
| T | 77421 | STEREOSCOPIC X-RAY GUIDANCE FOR | 4/1/2006 | NC | 9 |
| T | 77422 | HIGH ENERGY NEUTRON RADIATION TR | 7/1/2006 | NC | 9 |
| T | 77423 | HIGH ENERGY NEUTRON RADIATION TR | 7/1/2006 | NC | 9 |
| T | 77470 | SPECIAL TREATMENT PROCEDURE (EG | 1/1/2007 | $305.43 | 3 |
| T | 77520 | PROTON TREATMENT DELIERY; SIMPLE | 12/1/2002 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 77522 | PROTON TREATMENT DELIVERY; SIMPL | 12/1/2002 | $0.01 | 5 |
| T | 77523 | PROTON TREATMENT DELIVERY; INTER | 12/1/2002 | $0.01 | 5 |
| T | 77525 | PROTON TREATMENT DELIVERY; COMPL | 10/1/2001 | $0.01 | 5 |
| T | 77600 | HYPERTHERMIA, EXTERNALLY GENERAT | 1/1/2007 | $83.56 | 3 |
| T | 77605 | HYPERTHERMIA, EXTERNALLY GENERAT | 1/1/2007 | $111.33 | 3 |
| T | 77610 | HYPERTHERMIA GENERATED BY INTERS | 1/1/2007 | $83.56 | 3 |
| T | 77615 | HYPERTHERMIA GENERATED BY INTERS | 1/1/2007 | $111.33 | 3 |
| T | 77620 | HYPERTHERMIA GENERATED BY INTRAC | 1/1/2007 | $83.56 | 3 |
| T | 77750 | INFUSION OR INSTILLATION OF RADI | 1/1/2007 | $36.33 | 3 |
| T | 77761 | INTRACAVITARY RADIATION SOURCE A | 1/1/2007 | $68.77 | 3 |
| T | 77762 | INTRACAVITARY RADIOELEMENT APPLI | 1/1/2007 | $98.87 | 3 |
| T | 77763 | INTRACAVITARY RADIOELEMENT APPLI | 1/1/2007 | $122.74 | 3 |
| T | 77776 | INTERSTITIAL RADIATION SOURCE AP | 1/1/2007 | $60.20 | 3 |
| T | 77777 | INTERSTITIAL RADIOELEMENT APPLIC | 1/1/2007 | $115.74 | 3 |
| T | 77778 | INTERSTITIAL RADIOELEMENT APPLIC | 1/1/2007 | $140.39 | 3 |
| T | 77781 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $555.85 | 3 |
| T | 77782 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $555.85 | 3 |
| T | 77783 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $555.85 | 3 |
| T | 77784 | REMOTE AFTERLOADING HIGH INTENSI | 1/1/2007 | $555.85 | 3 |
| T | 77789 | SURFACE APPLICATION OF RADIATION | 1/1/2007 | $12.20 | 3 |
| T | 77790 | SUPERVISION, HANDLING, LOADING O | 1/1/2007 | $13.49 | 3 |
| T | 77799 | UNLISTED PROCEDURE CLINICAL BRAC | 10/1/2005 | $0.01 | 5 |
| T | 78000 | THYROID UPTAKE; SINGLE DETERMINA | 1/1/2007 | $26.73 | 3 |
| T | 78001 | THYROID UPTAKE; MULTIPLE DETERMI | 1/1/2007 | $35.81 | 3 |
| T | 78003 | THYROID UPTAKE; STIMULATION SUPP | 1/1/2007 | $26.73 | 3 |
| T | 78006 | THYROID IMAGING WITH UPTAKE SING | 1/1/2007 | $65.39 | 3 |
| T | 78007 | THYROID IMAGING WITH UPTAKE; MUL | 1/1/2007 | $70.58 | 3 |
| T | 78010 | THYROID IMAGING; ONLY | 1/1/2007 | $50.34 | 3 |
| T | 78011 | THYROID IMAGING; WITH VASCULAR F | 1/1/2007 | $66.17 | 3 |
| T | 78015 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $70.58 | 3 |
| T | 78016 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $95.24 | 3 |
| T | 78018 | THYROID CARCINOMA METASTASES IMA | 1/1/2007 | $148.69 | 3 |
| T | 78020 | THYROID CARCINOMA METASTASES UPT | 1/1/2007 | $37.63 | 3 |
| T | 78070 | PARATHYROID IMAGING | 1/1/2007 | $113.92 | 3 |
| T | 78075 | ADRENAL IMAGING, CORTEX AND/OR M | 1/1/2007 | $148.69 | 3 |
| T | 78099 | UNLISTED ENDOCRINE PROCEDURE DIA | 10/1/2001 | $0.01 | 5 |
| T | 78102 | BONE MARROW IMAGING LIMITED AREA | 1/1/2007 | $56.31 | 3 |
| T | 78103 | BONE MARROW IMAGING; MULTIPLE AR | 1/1/2007 | $86.93 | 3 |
| T | 78104 | BONE MARROW IMAGING; WHOLE BODY | 1/1/2007 | $111.59 | 3 |
| T | 78110 | PLASMA VOLUME, RADIOPHARMACEUTIC | 1/1/2007 | $26.21 | 3 |
| T | 78111 | BLOOD OR PLASMA VOLUME RADIOISOT | 1/1/2007 | $70.58 | 3 |
| T | 78120 | RED CELL VOLUME DETERMINATION (S | 1/1/2007 | $48.01 | 3 |
| T | 78121 | RED CELL MASS DETERMINATION; MUL | 1/1/2007 | $79.41 | 3 |
| T | 78122 | WHOLE BLOOD VOLUME DETERMINATION | 1/1/2007 | $125.86 | 3 |
| T | 78130 | RED CELL SURVIVAL STUDY; | 1/1/2007 | $77.85 | 3 |
| T | 78135 | RED CELL SURVIVAL STUDY; DIFFERE | 1/1/2007 | $133.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 78140 | LABELED RED CELL SEQUESTRATION, | 1/1/2007 | $107.69 | 3 |
| T | 78160 | PLASMA RADIOIRON DISSAPPEARANCE | 1/1/2006 | INVALID | N |
| T | 78162 | RADIOIRON ORAL ABSORPTION | 1/1/2006 | INVALID | N |
| T | 78170 | RADIOIRON RED CELL UTILIZATION | 1/1/2006 | INVALID | N |
| T | 78172 | CHELATABLE IRON FOR ESTIMATION O | 1/1/2006 | INVALID | N |
| T | 78185 | SPLEEN IMAGING ONLY, WITH OR WIT | 1/1/2007 | $64.88 | 3 |
| T | 78190 | KINETICS,STUDY OF PLATELET SURVI | 1/1/2007 | $156.48 | 3 |
| T | 78191 | PLATELET SURVIVAL STUDY | 1/1/2007 | $200.59 | 3 |
| T | 78195 | LYMPHATICS AND LYMPH NODES IMAGI | 1/1/2007 | $111.59 | 3 |
| T | 78199 | UNLISTED HEMATOPOIETIC, RETICULO | 10/1/2005 | $0.01 | 5 |
| T | 78201 | LIVER IMAGING STATIC ONLY | 1/1/2007 | $64.88 | 3 |
| T | 78202 | LIVER IMAGING; WITH VASCULAR FLO | 1/1/2007 | $78.63 | 3 |
| T | 78205 | LIVER IMAGING (SPECT) | 1/1/2007 | $161.93 | 3 |
| T | 78206 | LIVER IMAGING (SPECT); WITH VASC | 1/1/2007 | $156.74 | 3 |
| T | 78215 | LIVER AND SPLEEN IMAGING STATIC | 1/1/2007 | $80.19 | 3 |
| T | 78216 | LIVER AND SPLEEN IMAGING; WITH V | 1/1/2007 | $95.24 | 3 |
| T | 78220 | LIVER FUNCTION STUDY WITH HEPATO | 1/1/2007 | $101.72 | 3 |
| T | 78223 | HEPATOBILIARY DUCTAL SYSTEM IMAG | 1/1/2007 | $100.17 | 3 |
| T | 78230 | SALIVARY GLAND IMAGING; | 1/1/2007 | $60.20 | 3 |
| T | 78231 | SALIVARY GLAND IMAGING; WITH SER | 1/1/2007 | $86.93 | 3 |
| T | 78232 | SALIVARY GLAND FUNCTION STUDY | 1/1/2007 | $96.79 | 3 |
| T | 78258 | ESOPHAGEAL MOTILITY | 1/1/2007 | $78.63 | 3 |
| T | 78261 | GASTRIC MUCOSA IMAGING | 1/1/2007 | $112.36 | 3 |
| T | 78262 | GASTROESOPHAGEAL REFLUX STUDY | 1/1/2007 | $116.26 | 3 |
| T | 78264 | GASTRIC EMPTYING STUDY | 1/1/2007 | $113.14 | 3 |
| T | 78267 | UREA BREATH TEST, C-14; ACQUISIT | 10/1/2001 | $6.53 | 3 |
| T | 78268 | UREA BREATH TEST, C-14; ANALYSIS | 10/1/2001 | $55.99 | 3 |
| T | 78270 | VITAMIN B-12 ABSORPTION STUDY (E | 1/1/2007 | $42.82 | 3 |
| T | 78271 | VITAMIN B-12 ABSORPTION STUDY (E | 1/1/2007 | $45.15 | 3 |
| T | 78272 | VITAMIN B-12 ABSORPTION STUDIES | 1/1/2007 | $63.84 | 3 |
| T | 78278 | ACUTE GASTROINTESTINAL BLOOD LOS | 1/1/2007 | $133.12 | 3 |
| T | 78282 | GASTROINTESTINAL PROTEIN LOSS | 10/1/2001 | $0.01 | 5 |
| T | 78290 | INTESTINE IMAGING (EG, ECTOPIC G | 1/1/2007 | $83.56 | 3 |
| T | 78291 | PERITONEAL-VENOUS SHUNT PATENCY | 1/1/2007 | $83.82 | 3 |
| T | 78299 | UNLISTED GASTROINTESTINAL PROCED | 10/1/2001 | $0.01 | 5 |
| T | 78300 | BONE AND/OR JOINT IMAGING; LIMIT | 1/1/2007 | $68.25 | 3 |
| T | 78305 | BONE IMAGING; MULTIPLE AREAS | 1/1/2007 | $100.17 | 3 |
| T | 78306 | BONE IMAGING; WHOLE BODY | 1/1/2007 | $116.78 | 3 |
| T | 78315 | BONE AND/OR JOINT IMAGING; THREE | 1/1/2007 | $130.79 | 3 |
| T | 78320 | BONE IMAGING; TOMOGRAPHIC (SPECT | 1/1/2007 | $161.93 | 3 |
| T | 78350 | BONE DENSITY (BONE MINERAL CONTE | 1/1/2007 | $20.76 | 3 |
| T | 78351 | BONE DENSITY (BONE MINERAL CONTE | 1/1/2007 | $52.68 | 3 |
| T | 78399 | UNLISTED MUSCULOSKELETAL PROCEDU | 10/1/2001 | $0.01 | 5 |
| T | 78428 | CARDIAC SHUNT DETECTION | 1/1/2007 | $62.02 | 3 |
| T | 78445 | NON-CARDIAC VASCULAR FLOW IMAGIN | 1/1/2007 | $51.38 | 3 |
| T | 78455 | VENOUS THROMBOSIS STUDY (EG RADI | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 78456 | ACUTE VENOUS THROMBOSIS IMAGING, | 1/1/2007 | $111.07 | 3 |
| T | 78457 | VENOUS THROMBOSIS STUDY(E.G.,VEN | 1/1/2007 | $72.92 | 3 |
| T | 78458 | VENOUS THROMBOSIS IMAGING (EG VE | 1/1/2007 | $110.03 | 3 |
| T | 78459 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| T | 78460 | MYOCARDIAL PERFUSION IMAGING; (P | 1/1/2007 | $64.88 | 3 |
| T | 78461 | MYOCARDIAL PERFUSION IMAGING; MU | 1/1/2007 | $129.23 | 3 |
| T | 78464 | MYOCARDIAL PERFUSION IMAGING; TO | 1/1/2007 | $193.59 | 3 |
| T | 78465 | MYOCARDIAL PERFUSION IMAGING; TO | 1/1/2007 | $322.82 | 3 |
| T | 78466 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $71.88 | 3 |
| T | 78468 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $100.17 | 3 |
| T | 78469 | MYOCARDIAL IMAGING, INFARCT AVID | 1/1/2007 | $143.24 | 3 |
| T | 78472 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $151.29 | 3 |
| T | 78473 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $225.77 | 3 |
| T | 78478 | MYOCARDIAL PERFUSION STUDY W/WAL | 1/1/2007 | $43.08 | 3 |
| T | 78480 | MYOCARDIAL PERFUSION STUDY W/EJE | 1/1/2007 | $43.08 | 3 |
| T | 78481 | CARDIAC BLOOD POOL IMAGING, (PLA | 1/1/2007 | $143.24 | 3 |
| T | 78483 | CARDIAC BLOOD POOL IMAGING, (PLA | 1/1/2007 | $215.39 | 3 |
| T | 78491 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| T | 78492 | MYOCARDIAL IMAGING, POSITRON EMI | 10/1/2005 | NC | 9 |
| T | 78494 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $191.77 | 3 |
| T | 78496 | CARDIAC BLOOD POOL IMAGING, GATE | 1/1/2007 | $191.77 | 3 |
| T | 78499 | UNLISTED CARDIOVASCULAR PROCEDUR | 10/1/2001 | $0.01 | 5 |
| T | 78580 | PULMONARY PERFUSION IMAGING PART | 1/1/2007 | $93.94 | 3 |
| T | 78584 | PULMONARY PERFUSION IMAGING, PAR | 1/1/2007 | $87.71 | 3 |
| T | 78585 | PULMONARY PERFUSION IMAGING PART | 1/1/2007 | $154.66 | 3 |
| T | 78586 | PULMONARY VENTILATION IMAGING AE | 1/1/2007 | $71.10 | 3 |
| T | 78587 | PULMONARY VENTILATION IMAGING AE | 1/1/2007 | $76.55 | 3 |
| T | 78588 | PULMONARY PERFUSION IMAGING, PAR | 1/1/2007 | $87.97 | 3 |
| T | 78591 | BULMONARY VENTILATION IMAGING GA | 1/1/2007 | $77.85 | 3 |
| T | 78593 | PULMONARY VENTILATION IMAGING GA | 1/1/2007 | $94.46 | 3 |
| T | 78594 | PULMONARY VENTILATION IMAGING GA | 1/1/2007 | $135.98 | 3 |
| T | 78596 | PULMONARY QUANTITATIVE DIFFERENT | 1/1/2007 | $193.59 | 3 |
| T | 78599 | UNLISTED RESPIRATORY PROCEDURE D | 10/1/2001 | $0.01 | 5 |
| T | 78600 | BRAIN IMAGING, LIMITED PROCEDURE | 1/1/2007 | $78.63 | 3 |
| T | 78601 | BRAIN IMAGING LIMITED PROCEDURE; | 1/1/2007 | $93.16 | 3 |
| T | 78605 | BRAIN IMAGING COMPLETE STUDY STA | 1/1/2007 | $93.16 | 3 |
| T | 78606 | BRAIN IMAGING COMPLETE STUDY; WI | 1/1/2007 | $106.14 | 3 |
| T | 78607 | BRAIN IMAGING, COMPLETE STUDY; T | 1/1/2007 | $179.57 | 3 |
| T | 78608 | BRAIN IMAGING, POSITRON EMISSION | 6/1/2005 | $1,152.97 | 3 |
| T | 78609 | BRAIN IMAGING, POSITRON EMISSION | 6/1/2005 | $1,152.97 | 3 |
| T | 78610 | BRAIN IMAGING, VASCULAR FLOW ONL | 1/1/2007 | $43.60 | 3 |
| T | 78615 | CEREBRAL VASCULAR FLOW | 1/1/2007 | $105.62 | 3 |
| T | 78630 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $138.05 | 3 |
| T | 78635 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $69.81 | 3 |
| T | 78645 | CEREBROSPINAL FLUID FLOW IMAGING | 1/1/2007 | $93.94 | 3 |
| T | 78647 | CEREBROSPINAL FLUID FLOW, IMAGIN | 1/1/2007 | $161.93 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 78650 | CEREBROSPINAL FLUID LEAKAGE DETE | 1/1/2007 | $126.90 | 3 |
| T | 78660 | RADIOPHARMACEUTICAL DACRYOCYSTOG | 1/1/2007 | $58.39 | 3 |
| T | 78699 | UNLISTED NERVOUS SYSTEM PROCEDUR | 10/1/2001 | $0.01 | 5 |
| T | 78700 | KIDNEY IMAGING STATIC ONLY | 1/1/2007 | $83.56 | 3 |
| T | 78701 | KIDNEY IMAGING; WITH VASCULAR FL | 1/1/2007 | $97.31 | 3 |
| T | 78704 | KIDNEY IMAGING; WITH FUNCTION ST | 1/1/2007 | INVALID | N |
| T | 78707 | KIDNEY IMAGING; WITH VASCUL;AR F | 1/1/2007 | $122.22 | 3 |
| T | 78708 | KIDNEY IMAGING WITH VASCULAR FLO | 1/1/2007 | $122.22 | 3 |
| T | 78709 | KIDNEY IMAGING WITH VASCULAR FLO | 1/1/2007 | $122.22 | 3 |
| T | 78710 | KIDNEY IMAGING; TOMOGRAPHIC (SPE | 1/1/2007 | $161.93 | 3 |
| T | 78715 | KIDNEY VASCULAR FLOW ONLY | 1/1/2007 | INVALID | N |
| T | 78725 | KIDNEY FUNCTION STUDY WITHOUT PH | 1/1/2007 | $49.31 | 3 |
| T | 78730 | URINARY BLADDER RESIDUAL STUDY | 1/1/2007 | $39.96 | 3 |
| T | 78740 | URETERAL REFLUX STUDY (RADIOPHAR | 1/1/2007 | $58.39 | 3 |
| T | 78760 | TESTICULAR IMAGING | 1/1/2007 | INVALID | N |
| T | 78761 | TESTICULAR IMAGING; WITH VASCULA | 1/1/2007 | $87.71 | 3 |
| T | 78799 | UNLISTED GENITOURINARY PROCEDURE | 10/1/2001 | $0.01 | 5 |
| T | 78800 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $93.16 | 3 |
| T | 78801 | TUMOR LOCALIZATION; MULTIPLE ARE | 1/1/2007 | $115.48 | 3 |
| T | 78802 | TUMOR LOCALIZATION; WHOLE BODY | 1/1/2007 | $151.81 | 3 |
| T | 78803 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $179.57 | 3 |
| T | 78804 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $295.57 | 3 |
| T | 78805 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $93.16 | 3 |
| T | 78806 | ABSCESS LOCALIZATION; WHOLE BODY | 1/1/2007 | $176.46 | 3 |
| T | 78807 | RADIOPHARMACEUTICAL LOCALIZATION | 1/1/2007 | $179.57 | 3 |
| T | 78810 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2005 | INVALID | N |
| T | 78811 | TUMOR IMAGING, POSITRON EMISSION | 4/1/2005 | $998.05 | 3 |
| T | 78812 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2005 | $1,171.22 | 3 |
| T | 78813 | TUMOR IMAGING, POSITRON EMISSION | 1/1/2005 | $1,301.91 | 3 |
| T | 78814 | TUMOR IMAGING, POSITRON EMISSION | 4/1/2005 | $1,152.97 | 3 |
| T | 78815 | TUMOR IMAGING, POSITRON EMISSION | 4/1/2005 | $1,365.07 | 3 |
| T | 78816 | TUMOR IMAGING, POSITRON EMISSION | 4/1/2005 | $1,463.84 | 3 |
| T | 78890 | GENERATION OF AUTOMATED DATA: IN | 1/1/2007 | $35.55 | 3 |
| T | 78891 | GENERATION OF AUTOMATED DATA INT | 1/1/2007 | $71.62 | 3 |
| T | 78990 | PROVISION OF DIAGNOSTIC RADIOPHA | 1/1/2005 | INVALID | N |
| T | 78999 | UNLISTED MISCELLANEOUS PROCEDURE | 10/1/2001 | $0.01 | 5 |
| T | 79000 | RADIOPHARMACEUTICAL THERAPY, HYP | 1/1/2005 | INVALID | N |
| T | 79001 | RADIONUCLIDE THERAPY HYPERTHYROI | 1/1/2005 | INVALID | N |
| T | 79005 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $71.88 | 3 |
| T | 79020 | RADIOPHARMACEUTICAL THERAPY, THY | 1/1/2005 | INVALID | N |
| T | 79030 | RADIOPHARMACEUTICAL ABLATION OF | 1/1/2005 | INVALID | N |
| T | 79035 | RADIOPHARMACEUTICAL THERAPY FOR | 1/1/2005 | INVALID | N |
| T | 79100 | RADIOPHARMACEUTICAL THERAPY, POL | 1/1/2005 | INVALID | N |
| T | 79101 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $71.88 | 3 |
| T | 79200 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $71.88 | 3 |
| T | 79300 | RADIOPHARMACEUTICAL THERAPY, BY | 4/1/1982 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 79400 | RADIOPHARMACEUTICAL THERAPY, NON | 1/1/2005 | INVALID | N |
| T | 79403 | RADIOPHARMACEUTICAL THERAPY, RAD | 1/1/2007 | $114.70 | 3 |
| T | 79420 | INTRAVASCULAR RADIOPHARMACEUTICA | 1/1/2005 | INVALID | N |
| T | 79440 | RADIOPHARMACEUTICAL THERAPY, BY | 1/1/2007 | $71.88 | 3 |
| T | 79445 | RADIOPHARMACEUTICAL THERAPY, BY | 10/1/2005 | $72.14 | 3 |
| T | 79900 | PROVISION OF THERAPEUTIC RADIOPH | 1/1/2005 | INVALID | N |
| T | 79999 | RADIOPHARMACEUTICAL THERAPY, UNL | 10/1/2001 | $0.01 | 5 |
| T | 80048 | BASIC METABOLIC PANEL | 11/1/2001 | $8.66 | 3 |
| T | 80050 | GENERAL HEALTH PANEL | 10/1/2001 | $36.75 | 3 |
| T | 80051 | ELECTROLYTE PANEL | 11/1/2001 | $7.17 | 3 |
| T | 80053 | COMPREHENSIVE METABOLIC PANEL | 11/1/2001 | $10.81 | 3 |
| T | 80055 | OBSTETRIC PANEL | 10/1/2001 | $40.00 | 3 |
| T | 80061 | LIPID PANEL; CHOLESTEROL, SERUM, | 11/1/2001 | $13.70 | 3 |
| T | 80069 | RENAL FUNCTION PANEL | 11/1/2001 | $8.88 | 3 |
| T | 80072 | ARTHRITIS PANEL; URIC ACID, BLOO | 4/1/2002 | INVALID | N |
| T | 80074 | ACUTE HEPATITIS PANEL | 11/1/2001 | $48.71 | 3 |
| T | 80076 | HEPATIC FUNCTION PANEL | 11/1/2001 | $8.35 | 3 |
| T | 80090 | TORCH ANTIBODY PANEL; ANTIBODY, | 7/1/2003 | INVALID | N |
| T | 80100 | DRUG SCREEN, QUALITATIVE; MULTIP | 11/1/2001 | $14.87 | 3 |
| T | 80101 | DRUG SCREEN, QUALITATIVE; SINGLE | 11/1/2001 | $14.08 | 3 |
| T | 80102 | DRUG, CONFIRMATION, EACH PROCEDU | 11/1/2001 | $13.55 | 3 |
| T | 80103 | TISSUE PREPARATION FOR DRUG ANAL | 10/1/2005 | $0.01 | 5 |
| T | 80150 | AMIKACIN | 11/1/2001 | $15.41 | 3 |
| T | 80152 | AMITRIPTYLINE | 11/1/2001 | $18.31 | 3 |
| T | 80154 | BENZODIAZEPINES | 11/1/2001 | $18.91 | 3 |
| T | 80156 | CARBAMAZEPINE; TOTAL | 11/1/2001 | $14.89 | 3 |
| T | 80157 | CARBAMAZEPINE; FREE | 11/1/2001 | $10.17 | 3 |
| T | 80158 | CYCLOSPORINE | 11/1/2001 | $18.46 | 3 |
| T | 80160 | DESIPRAMINE | 11/1/2001 | $17.60 | 3 |
| T | 80162 | DIGOXIN | 11/1/2001 | $13.58 | 3 |
| T | 80164 | DIPROPYLACETIC ACID (VALPROIC AC | 11/1/2001 | $13.85 | 3 |
| T | 80166 | DOXEPIN | 11/1/2001 | $15.85 | 3 |
| T | 80168 | ETHOSUXIMIDE | 11/1/2001 | $16.71 | 3 |
| T | 80170 | GENTAMICIN | 11/1/2001 | $16.76 | 3 |
| T | 80172 | GOLD | 11/1/2001 | $16.66 | 3 |
| T | 80173 | HALOPERIDOL | 11/1/2001 | $14.89 | 3 |
| T | 80174 | IMIPRAMINE | 11/1/2001 | $17.60 | 3 |
| T | 80176 | LIDOCAINE | 11/1/2001 | $15.02 | 3 |
| T | 80178 | LITHIUM | 11/1/2001 | $6.76 | 3 |
| T | 80182 | NORTRIPTYLINE | 11/1/2001 | $13.85 | 3 |
| T | 80184 | PHENOBARBITAL | 11/1/2001 | $11.71 | 3 |
| T | 80185 | PHENYTOIN; TOTAL | 11/1/2001 | $13.56 | 3 |
| T | 80186 | PHENYTOIN; FREE | 11/1/2001 | $14.08 | 3 |
| T | 80188 | PRIMIDONE | 11/1/2001 | $16.97 | 3 |
| T | 80190 | PROCAINAMIDE; | 11/1/2001 | $17.13 | 3 |
| T | 80192 | PROCAINAMIDE; WITH METABOLITES ( | 11/1/2001 | $17.13 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 80194 | QUINIDINE | 11/1/2001 | $14.93 | 3 |
| T | 80195 | SIROLIMUS | 1/1/2006 | $14.19 | 3 |
| T | 80196 | SALICYLATE | 11/1/2001 | $7.26 | 3 |
| T | 80197 | TACROLIMUS | 11/1/2001 | $14.04 | 3 |
| T | 80198 | THEOPHYLLINE | 11/1/2001 | $14.47 | 3 |
| T | 80200 | TOBRAMYCIN | 11/1/2001 | $16.48 | 3 |
| T | 80201 | TOPIRAMATE | 11/1/2001 | $12.20 | 3 |
| T | 80202 | VANCOMYCIN | 11/1/2001 | $13.85 | 3 |
| T | 80299 | QUANTITATION OF DRUG, NOT ELSEWH | 11/1/2001 | $14.00 | 3 |
| T | 80400 | ACTH STIMUALTION PANEL; FOR ADRE | 11/1/2001 | $33.34 | 3 |
| T | 80402 | ACTH STIMUALTION PANEL; FOR 21 H | 11/1/2001 | $88.90 | 3 |
| T | 80406 | ACTH STIMULATION PANEL; FOR 3 BE | 11/1/2001 | $80.02 | 3 |
| T | 80408 | ALDOSTERONE SUPPRESSION EVALUATI | 11/1/2001 | $128.35 | 3 |
| T | 80410 | CALCITONIN STIMULATION PANEL (EG | 11/1/2001 | $82.16 | 3 |
| T | 80412 | CORTICOTROPIC RELEASING HORMONE | 11/1/2001 | $337.04 | 3 |
| T | 80414 | CHORIONIC GONADOTROPHIN STIMULAT | 1/1/1994 | NC | 9 |
| T | 80415 | CHORIONIC GONADOTROPHIN STIMUALT | 1/1/1994 | NC | 9 |
| T | 80416 | RENAL VEIN RENIN STIMUALTION PAN | 11/1/2001 | $134.98 | 3 |
| T | 80417 | PERIPHERAL VEIN RENIN STIMUALTIO | 11/1/2001 | $44.99 | 3 |
| T | 80418 | COMBINED RAPID ANTERIOR PITUITAR | 11/1/2001 | $592.68 | 3 |
| T | 80420 | DEXAMETHASONE SUPPRESSION PANEL; | 11/1/2001 | $73.66 | 3 |
| T | 80422 | GLUCAGON TOLERANCE PANEL; FOR IN | 11/1/2001 | $47.13 | 3 |
| T | 80424 | GLUCAGON TOLERANCE PANEL; FOR PH | 11/1/2001 | $51.65 | 3 |
| T | 80426 | GONADOTROPIN RELEASING HORMONE S | 11/1/2001 | $151.82 | 3 |
| T | 80428 | GROWTH HORMONE STIMULATION PANEL | 11/1/2001 | $68.20 | 3 |
| T | 80430 | GROWTH HORMONE SUPPRESSION PANEL | 11/1/2001 | $80.23 | 3 |
| T | 80432 | INSULIN-INDUCED C-PEPTIDE SUPPRE | 11/1/2001 | $138.13 | 3 |
| T | 80434 | INSULIN TOLERANCE PANEL; FOR ACT | 11/1/2001 | $103.42 | 3 |
| T | 80435 | INSULIN TOLERANCE PANEL; FOR GRO | 11/1/2001 | $105.30 | 3 |
| T | 80436 | METYRAPONE PANEL | 11/1/2001 | $93.23 | 3 |
| T | 80438 | THYROTROPIN RELEASING HORMONE (T | 11/1/2001 | $51.53 | 3 |
| T | 80439 | THYROTROPIN RELEASING HORMONE (T | 11/1/2001 | $68.70 | 3 |
| T | 80440 | THYROTROPIN RELEASING HORMONE (T | 11/1/2001 | $59.45 | 3 |
| T | 80500 | CLINICAL PATHOLOGY CONSULTATION; | 1/1/2007 | $15.31 | 3 |
| T | 80502 | CLINICAL PATHOLOGY CONSULTATION | 1/1/2007 | $49.56 | 3 |
| T | 81000 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $3.23 | 3 |
| T | 81001 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $3.23 | 3 |
| T | 81002 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $2.62 | 3 |
| T | 81003 | URINALYSIS, BY DIP STICK OR TABL | 11/1/2001 | $2.29 | 3 |
| T | 81005 | URINALYSIS; QUALITATIVE OR SEMIQ | 11/1/2001 | $2.22 | 3 |
| T | 81007 | URINALYSIS; BACTERIURIA SCREEN, | 11/1/2001 | $2.63 | 3 |
| T | 81015 | URINALYSIS; MICROSCOPIC ONLY | 11/1/2001 | $3.11 | 3 |
| T | 81020 | URINALYSIS; TWO OR THREE GLASS T | 11/1/2001 | $3.77 | 3 |
| T | 81025 | URINE PREGNANCY TEST, BY VISUAL | 11/1/2001 | $6.47 | 3 |
| T | 81050 | VOLUME MEASUREMENT FOR TIMED COL | 11/1/2001 | $3.06 | 3 |
| T | 81099 | UNLISTED URINALYSIS PROCEDURE | 10/1/2005 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 82000 | ACETALDEHYDE BLOOD | 11/1/2001 | $12.67 | 3 |
| T | 82003 | ACETAMINOPHEN | 11/1/2001 | $20.69 | 3 |
| T | 82009 | ACETONE OR OTHER KETONE BODIES, | 11/1/2001 | $4.63 | 3 |
| T | 82010 | ACETONE; QUANTITATIVE | 11/1/2001 | $8.35 | 3 |
| T | 82013 | ACETYLCHOLINESTRASE | 11/1/2001 | $11.43 | 3 |
| T | 82016 | ACYLCARNITINES; QUALITATIVE, EAC | 11/1/2001 | $14.18 | 3 |
| T | 82017 | ACYLCARNITINES; QUANTITATIVE, EA | 11/1/2001 | $17.25 | 3 |
| T | 82024 | ADRENOCORTICOTROPIC HORMONE (ACT | 11/1/2001 | $39.50 | 3 |
| T | 82030 | ADENOSINE; 5'-MONOPHOSPHATE, CYC | 11/1/2001 | $16.38 | 3 |
| T | 82040 | ALBUMIN SERUM | 11/1/2001 | $5.07 | 3 |
| T | 82042 | ALBUMIN; URINE OR OTHER SOURCE, | 11/1/2001 | $5.29 | 3 |
| T | 82043 | ALBUMIN; URINE, MICROALBUMIN, QU | 11/1/2001 | $5.92 | 3 |
| T | 82044 | ALBUMIN; URINE, MICROALBUMIN, SE | 11/1/2001 | $4.68 | 3 |
| T | 82045 | ALBUMIN; ISCHEMIA MODIFIED | 1/1/2005 | $35.10 | 3 |
| T | 82055 | ALCOHOL (ETHANOL); ANY SPECIMAN | 11/1/2001 | $11.05 | 3 |
| T | 82075 | ALCOHOL (ETHANOL); BREATH | 11/1/2001 | $12.33 | 3 |
| T | 82085 | ALDOLASE | 11/1/2001 | $9.93 | 3 |
| T | 82088 | ALDOSTERONE | 11/1/2001 | $41.68 | 3 |
| T | 82101 | ALKALOIDS, URINE, QUANTITATIVE | 11/1/2001 | $30.70 | 3 |
| T | 82103 | ALPHA-1-ANTITRYPSIN; TOTAL | 11/1/2001 | $13.73 | 3 |
| T | 82104 | ALPHA-1-ANTITRYPSIN; PHENOTYPE | 11/1/2001 | $14.79 | 3 |
| T | 82105 | ALPHA-FETOPROTEIN; SERUM | 11/1/2001 | $16.38 | 3 |
| T | 82106 | ALPHA-FETOPROTEIN; AMNIOTIC FLUI | 11/1/2001 | $16.38 | 3 |
| T | 82107 | ALPHA-FETOPROTEIN; AFP-L3 FRACTI | 1/1/2007 | NC | 9 |
| T | 82108 | ALUMINUM | 11/1/2001 | $16.35 | 3 |
| T | 82120 | AMINES, VAGINAL FLUID, QUALITATI | 11/1/2001 | $3.23 | 3 |
| T | 82127 | AMINO ACIDS; SINGLE, QUALITATIVE | 11/1/2001 | $14.18 | 3 |
| T | 82128 | AMINO ACIDS QUALITATIVE | 11/1/2001 | $14.18 | 3 |
| T | 82131 | AMINO ACIDS, QUANTITATION, EACH | 11/1/2001 | $17.25 | 3 |
| T | 82135 | AMINOLEVULINIC ACID DELTA (ALA) | 11/1/2001 | $16.84 | 3 |
| T | 82136 | AMINO ACIDS, 2 TO 5 AMINO ACIDS, | 11/1/2001 | $17.25 | 3 |
| T | 82139 | AMINO ACIDS, 6 OR MORE AMINO ACI | 11/1/2001 | $17.25 | 3 |
| T | 82140 | AMMONIA | 11/1/2001 | $14.90 | 3 |
| T | 82143 | AMNIOTIC FLUID SCAN (SPECTROPHOT | 11/1/2001 | $7.03 | 3 |
| T | 82145 | AMPHETAMINE OR METHAMPHETAMINE | 11/1/2001 | $15.90 | 3 |
| T | 82150 | AMYLASE | 11/1/2001 | $6.63 | 3 |
| T | 82154 | ANDROSTANEDIOL GLUCURONIDE | 11/1/2001 | $29.49 | 3 |
| T | 82157 | ANDROSTENEDIONE | 11/1/2001 | $29.94 | 3 |
| T | 82160 | ANDROSTERONE | 11/1/2001 | $25.58 | 3 |
| T | 82163 | ANGIOTENSIN II | 11/1/2001 | $20.99 | 3 |
| T | 82164 | ANGIOTENSIN I - CONVERTING ENZYM | 11/1/2001 | $14.93 | 3 |
| T | 82172 | APOLIPOPROTEIN, EACH | 11/1/2001 | $15.84 | 3 |
| T | 82175 | ARSENIC | 11/1/2001 | $19.40 | 3 |
| T | 82180 | ASCORBIC ACID (VITAMIN C) BLOOD | 11/1/2001 | $10.11 | 3 |
| T | 82190 | ATOMIC ABSORPTION SPECTROSCOPY, | 11/1/2001 | $15.24 | 3 |
| T | 82205 | BARBITURATES, NOT ELSEWHERE SPEC | 11/1/2001 | $11.71 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 82232 | BETA-2 MICROGLOBULIN | 11/1/2001 | $16.55 | 3 |
| T | 82239 | BILE ACIDS; TOTAL | 11/1/2001 | $17.52 | 3 |
| T | 82240 | BILE ACIDS; CHOLYLGLYCINE | 11/1/2001 | $27.18 | 3 |
| T | 82247 | BILIRUBIN; TOTAL | 11/1/2001 | $5.14 | 3 |
| T | 82248 | BILIRUBIN; DIRECT | 11/1/2001 | $5.14 | 3 |
| T | 82252 | BILIRUBIN; FECES QUALITATIVE | 11/1/2001 | $4.65 | 3 |
| T | 82261 | BIOTINIDASE, EACH SPECIMEN | 11/1/2001 | $17.25 | 3 |
| T | 82270 | BLOOD, OCCULT, BY PEROXIDASE ACT | 11/1/2001 | $3.32 | 3 |
| T | 82271 | BLOOD, OCCULT, BY PEROXIDASE ACT | 1/1/2006 | $3.36 | 3 |
| T | 82272 | BLOOD, OCCULT, BY PEROXIDASE ACT | 1/1/2006 | $3.36 | 3 |
| T | 82273 | BLOOD, OCCULT, BY PEROXIDASE ACT | 1/1/2006 | INVALID | N |
| T | 82286 | BRADYKININ | 11/1/2001 | $7.04 | 3 |
| T | 82300 | CADMIUM | 11/1/2001 | $20.94 | 3 |
| T | 82306 | CALCIFEDIOL (25-OH VITAMIN D-3) | 1/1/2006 | $24.55 | 3 |
| T | 82307 | CALCIFEROL (VITAMIN D) | 11/1/2001 | $32.95 | 3 |
| T | 82308 | CALCITONIN | 11/1/2001 | $27.39 | 3 |
| T | 82310 | CALCIUM; TOTAL | 11/1/2001 | $5.27 | 3 |
| T | 82330 | CALCIUM; IONIZED | 11/1/2001 | $13.97 | 3 |
| T | 82331 | CALCIUM BLOOD; AFTER CALCIUM INF | 11/1/2001 | $5.29 | 3 |
| T | 82340 | CALCIUM; URINE QUANTITATIVE, TIM | 11/1/2001 | $5.33 | 3 |
| T | 82355 | CALCULUS; QUALITATIVE ANALYSIS | 11/1/2001 | $11.83 | 3 |
| T | 82360 | CALCULUS (STONE); QUANITATIVE AN | 11/1/2001 | $13.17 | 3 |
| T | 82365 | CALCULUS (STONE) QUANTITATIVE; I | 11/1/2001 | $13.19 | 3 |
| T | 82370 | CALCULUS (STONE) QUANTITATIVE; X | 11/1/2001 | $12.82 | 3 |
| T | 82373 | CARBOHYDRATE DEFICIENT TRANSFERR | 11/1/2001 | $7.36 | 3 |
| T | 82374 | CARBON DIOXIDE (BICARBONATE) | 11/1/2001 | $5.00 | 3 |
| T | 82375 | CARBON MONOXIDE (CARBOXYHEMOGLOB | 11/1/2001 | $12.60 | 3 |
| T | 82376 | CARBON MONOXIDE (CARBOXYHEMOGLOB | 11/1/2001 | $5.70 | 3 |
| T | 82378 | CARCINOEMBRYONIC ANTIGEN (CEA) | 11/1/2001 | $19.40 | 3 |
| T | 82379 | CARNITINE (TOTAL AND FREE), QUAN | 11/1/2001 | $17.25 | 3 |
| T | 82380 | CAROTENE | 11/1/2001 | $9.44 | 3 |
| T | 82382 | CATECHOLAMINES; TOTAL URINE | 11/1/2001 | $17.58 | 3 |
| T | 82383 | CATECHOLAMINES (DOPAMINE NOREPIN | 11/1/2001 | $21.42 | 3 |
| T | 82384 | CATECHOLAMINES (DOPAMINE NOREPIN | 11/1/2001 | $25.83 | 3 |
| T | 82387 | CATHEPSIN-D | 11/1/2001 | $21.28 | 3 |
| T | 82390 | CERULOPLASMIN | 11/1/2001 | $10.98 | 3 |
| T | 82397 | CHEMILUMINESCENT ASSAY | 11/1/2001 | $14.45 | 3 |
| T | 82415 | CHLORAMPHENICOL | 11/1/2001 | $12.96 | 3 |
| T | 82435 | CHLORIDE; BLOOD | 11/1/2001 | $4.70 | 3 |
| T | 82436 | CHLORIDE; URINE | 11/1/2001 | $5.14 | 3 |
| T | 82438 | CHLORIDE; OTHER SOURCE | 11/1/2001 | $5.00 | 3 |
| T | 82441 | CHLORINATED HYDROCARBONS SCREEN | 11/1/2001 | $6.14 | 3 |
| T | 82465 | CHOLESTEROL, SERUM OR WHOLE BLOO | 11/1/2001 | $4.45 | 3 |
| T | 82480 | CHOLINESTERASE SERUM | 11/1/2001 | $8.06 | 3 |
| T | 82482 | CHOLINESTERASE; RBC | 11/1/2001 | $7.86 | 3 |
| T | 82485 | CHONDROITIN B SULFATE QUANTITATI | 11/1/2001 | $21.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 82486 | CHROMATOGRAPHY, QUALITATIVE; COL | 11/1/2001 | $18.47 | 3 |
| T | 82487 | CHROMATOGRAPHY, QUALITATIVE; PAP | 11/1/2001 | $14.75 | 3 |
| T | 82488 | CHROMATOGRAPHY, QUALITATIVE; PAP | 11/1/2001 | $21.85 | 3 |
| T | 82489 | CHROMATOGRAPHY, QUALITATIVE; THI | 11/1/2001 | $18.91 | 3 |
| T | 82491 | CHROMOTOGRAPHY, QUANTITATIVE; CO | 11/1/2001 | $18.47 | 3 |
| T | 82492 | CHROMATOGRAPHY, QUANTITATIVE COL | 11/1/2001 | $18.47 | 3 |
| T | 82495 | CHROMIUM | 11/1/2001 | $20.74 | 3 |
| T | 82507 | CITRIC ACID | 11/1/2001 | $28.44 | 3 |
| T | 82520 | COCAINE OR METABOLITE | 11/1/2001 | $15.50 | 3 |
| T | 82523 | COLLAGEN CROSS LINKS, ANY METHOD | 11/1/2001 | $19.11 | 3 |
| T | 82525 | COPPER | 11/1/2001 | $12.69 | 3 |
| T | 82528 | CORTICOSTERONE | 11/1/2001 | $23.02 | 3 |
| T | 82530 | CORTISOL; FREE | 11/1/2001 | $17.09 | 3 |
| T | 82533 | CORTISOL; TOTAL | 11/1/2001 | $16.67 | 3 |
| T | 82540 | CREATINE | 11/1/2001 | $4.74 | 3 |
| T | 82541 | COLUMN CHROMATOGRAPHY/MASS SPECT | 11/1/2001 | $18.47 | 3 |
| T | 82542 | COLUMN CHROMATOGRAPHY/MASS SPECT | 11/1/2001 | $18.47 | 3 |
| T | 82543 | COLUMN CHROMATOGRAPHY/MASS SPECT | 11/1/2001 | $18.47 | 3 |
| T | 82544 | COLUMN CHROMATOGRAPHY/MASS SPECT | 11/1/2001 | $18.47 | 3 |
| T | 82550 | CREATINE KINASE (CK), (CPK); TOT | 11/1/2001 | $6.67 | 3 |
| T | 82552 | CREATINE PHOSPHOKINASE (CPK) BLO | 11/1/2001 | $13.70 | 3 |
| T | 82553 | CREATINE KINASE (CK), (CPK); MB | 11/1/2001 | $11.80 | 3 |
| T | 82554 | CREATINE KINASE (CK), (CPK); ISO | 11/1/2001 | $12.14 | 3 |
| T | 82565 | CREATININE; BLOOD | 11/1/2001 | $5.23 | 3 |
| T | 82570 | CREATININE; OTHER SOURCE | 11/1/2001 | $5.29 | 3 |
| T | 82575 | CREATININE; CLEARANCE | 11/1/2001 | $9.66 | 3 |
| T | 82585 | CRYOFIBRINOGEN | 11/1/2001 | $8.77 | 3 |
| T | 82595 | CRYOGLOBULIN, QUALITATIVE OR SEM | 11/1/2001 | $6.62 | 3 |
| T | 82600 | CYANIDE | 11/1/2001 | $19.84 | 3 |
| T | 82607 | CYANOCOBALAMIN (VITAMIN B-12) | 11/1/2001 | $15.41 | 3 |
| T | 82608 | CYANOCOBALAMIN (VITAMIN B-12); U | 11/1/2001 | $14.65 | 3 |
| T | 82615 | CYSTINE AND HOMOCYSTINE URINE QU | 11/1/2001 | $8.35 | 3 |
| T | 82626 | DEHYDROEPIANDROSTERONE (DHEA) | 11/1/2001 | $25.85 | 3 |
| T | 82627 | DEHYDROEPIANDROSTERONE-SULFATE ( | 11/1/2001 | $22.73 | 3 |
| T | 82633 | DESOXYCORTICOSTERONE, 11- | 11/1/2001 | $31.68 | 3 |
| T | 82634 | DESOXYCORTISOL, 11- | 11/1/2001 | $29.94 | 3 |
| T | 82638 | DIBUCAINE NUMBER | 11/1/2001 | $12.52 | 3 |
| T | 82646 | DIHYDROCODINONE | 11/1/2001 | $21.12 | 3 |
| T | 82649 | DIHYDROMORPHINONE | 11/1/2001 | $26.28 | 3 |
| T | 82651 | DIHYDROTESTOSTERONE (DHT) | 11/1/2001 | $26.40 | 3 |
| T | 82652 | DIHYDROXYVITAMIN D, 1, 25 | 11/1/2001 | $39.36 | 3 |
| T | 82654 | DIMETHADIONE | 11/1/2001 | $14.16 | 3 |
| T | 82656 | ELASTASE, PANCREATIC (EL-1), FEC | 1/1/2005 | $11.93 | 3 |
| T | 82657 | ENZYME ACTIVITY IN BLOOD CELLS, | 11/1/2001 | $18.47 | 3 |
| T | 82658 | ENZYME ACITIVITY IN BLOOD CELLS, | 11/1/2001 | $18.47 | 3 |
| T | 82664 | ELECTROPHORETIC TECHNIQUE NOT EL | 11/1/2001 | $35.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 82666 | EPIANDROSTERONE | 11/1/2001 | $21.97 | 3 |
| T | 82668 | ERYTHROPOIETIN | 11/1/2001 | $19.22 | 3 |
| T | 82670 | ESTRADIOL | 11/1/2001 | $28.58 | 3 |
| T | 82671 | ESTROGENS FRACTIONATED | 11/1/2001 | $33.03 | 3 |
| T | 82672 | ESTROGENS; TOTAL | 11/1/2001 | $22.18 | 3 |
| T | 82677 | ESTRIOL | 11/1/2001 | $24.74 | 3 |
| T | 82679 | ESTRONE | 11/1/2001 | $25.53 | 3 |
| T | 82690 | ETHCHLORVYNOL | 11/1/2001 | $17.68 | 3 |
| T | 82693 | ETHYLENE GLYCOL | 11/1/2001 | $15.24 | 3 |
| T | 82696 | ETIOCHOLANOLONE | 11/1/2001 | $24.12 | 3 |
| T | 82705 | FAT OR LIPIDS, FECES; QUALITATIV | 11/1/2001 | $4.51 | 3 |
| T | 82710 | FAT OR LIPIDS, FECES; QUANTITATI | 11/1/2001 | $17.18 | 3 |
| T | 82715 | FAT DIFFERENTIAL FECES QUANTITAT | 11/1/2001 | $17.60 | 3 |
| T | 82725 | FATTY ACIDS, NONESTERIFIED | 11/1/2001 | $13.62 | 3 |
| T | 82726 | VERY LONG CHAIN FATTY ACIDS | 11/1/2001 | $18.47 | 3 |
| T | 82728 | FERRITIN | 11/1/2001 | $8.95 | 3 |
| T | 82731 | FETAL FIBRONECTIN,CERVICOVAGINAL | 11/1/2001 | $65.87 | 3 |
| T | 82735 | FLOURIDE | 11/1/2001 | $18.97 | 3 |
| T | 82742 | FLURAZEPAM | 11/1/2001 | $20.25 | 3 |
| T | 82746 | FOLIC ACID; SERUM | 11/1/2001 | $15.04 | 3 |
| T | 82747 | FOLIC ACID; RBC | 11/1/2001 | $17.71 | 3 |
| T | 82757 | FRUCTOSE SEMEN | 2/22/1994 | NC | 9 |
| T | 82759 | GALACTOKINASE RBC | 11/1/2001 | $21.97 | 3 |
| T | 82760 | GALACTOSE | 11/1/2001 | $11.45 | 3 |
| T | 82775 | GALACTOSE-1-PHOSPHATE URIDYL TRA | 11/1/2001 | $21.54 | 3 |
| T | 82776 | GALACTOSE-1-PHOSPHATE URIDYL TRA | 11/1/2001 | $8.58 | 3 |
| T | 82784 | GAMMAGLOBULIN; IGA, IGD, IGG, IG | 11/1/2001 | $6.56 | 3 |
| T | 82785 | GAMMAGLOBULIN; IGE | 11/1/2001 | $16.84 | 3 |
| T | 82787 | GAMMAGLOBULIN; IMMUNOGLOBULIN SU | 11/1/2001 | $8.21 | 3 |
| T | 82800 | GASES BLOOD PH ONLY | 11/1/2001 | $8.67 | 3 |
| T | 82803 | GASES, BLOOD, ANY COMBINATION OF | 11/1/2001 | $19.79 | 3 |
| T | 82805 | GASES, BLOOD, ANY COMBINATION OF | 11/1/2001 | $29.02 | 3 |
| T | 82810 | GASES, BLOOD, 02 SATURATION ONLY | 11/1/2001 | $8.92 | 3 |
| T | 82820 | HEMOGLOBIN-OXYGEN AFFINITY (PO2 | 11/1/2001 | $10.23 | 3 |
| T | 82926 | GASTRIC ACID, FREE AND TOTAL; EA | 11/1/2001 | $4.95 | 3 |
| T | 82928 | GASTRIC ACID, FREE OR TOTAL; EAC | 11/1/2001 | $6.70 | 3 |
| T | 82938 | GASTRIN AFTER SECRETIN STIMULATI | 11/1/2001 | $18.10 | 3 |
| T | 82941 | GASTRIN | 11/1/2001 | $18.04 | 3 |
| T | 82943 | GLUCAGON | 11/1/2001 | $14.62 | 3 |
| T | 82945 | GLUCOSE, BODY FLUID, OTHER THAN | 11/1/2001 | $4.01 | 3 |
| T | 82946 | GLUCAGON TOLERANCE TEST | 11/1/2001 | $15.41 | 3 |
| T | 82947 | GLUCOSE; QUANTITATIVE, BLOOD (EX | 11/1/2001 | $4.01 | 3 |
| T | 82948 | GLUCOSE; BLOOD, REAGENT STRIP | 11/1/2001 | $3.23 | 3 |
| T | 82950 | GLUCOSE; POST GLUCOSE DOSE (INCL | 11/1/2001 | $4.85 | 3 |
| T | 82951 | GLUCOSE; TOLERANCE TEST (GTT) TH | 11/1/2001 | $7.71 | 3 |
| T | 82952 | GLUCOSE; TOLERANCE TEST EACH ADD | 11/1/2001 | $4.01 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 82953 | GLUCOSE; TOLBUTAMIDE TOLERANCE T | 11/1/2001 | $15.49 | 3 |
| T | 82955 | GLUCOSE-6-PHOSPHATE DEHYDROGENAS | 11/1/2001 | $9.92 | 3 |
| T | 82960 | GLUCOSE-6-PHOSPHATE DEHYDROGENAS | 11/1/2001 | $6.20 | 3 |
| T | 82962 | GLUCOSE, BLOOD, BY GLUCOSE MONIT | 10/1/2001 | $4.34 | 3 |
| T | 82963 | GLUCOSIDASE, BETA | 11/1/2001 | $21.97 | 3 |
| T | 82965 | GLUTAMATE DEHYDROGENASE | 11/1/2001 | $7.90 | 3 |
| T | 82975 | GLUTAMINE (GLUTAMIC ACID AMIDE) | 11/1/2001 | $16.19 | 3 |
| T | 82977 | GLUTAMYLTRANSFERASE, GAMMA (GGT) | 11/1/2001 | $7.36 | 3 |
| T | 82978 | GLUTATHIONE | 11/1/2001 | $14.58 | 3 |
| T | 82979 | GLUTATHIONE REDUCTASE RBC | 11/1/2001 | $7.04 | 3 |
| T | 82980 | GLUTETHIMIDE | 11/1/2001 | $12.28 | 3 |
| T | 82985 | GLYCATED PROTEIN | 11/1/2001 | $15.41 | 3 |
| T | 83001 | GONADOTROPIN; FOLLICLE STIMULATI | 11/1/2001 | $19.01 | 3 |
| T | 83002 | GONADOTROPIN; LUTEINIZING HORMON | 11/1/2001 | $18.94 | 3 |
| T | 83003 | GROWTH HORMONE, HUMAN (HGH) (SOM | 11/1/2001 | $17.05 | 3 |
| T | 83008 | GUANOSINE MONOPHOSPHATE (GMP), C | 11/1/2001 | $17.17 | 3 |
| T | 83009 | HELICOBACTER PYLORI, BLOOD TEST | 1/1/2005 | $69.64 | 3 |
| T | 83010 | HAPTOGLOVIN; QUANTITATIVE | 11/1/2001 | $12.86 | 3 |
| T | 83012 | HAPTOGLOBIN; PHENOTYPES | 11/1/2001 | $15.41 | 3 |
| T | 83013 | HELICOBACTER PYLORI; BREATH TEST | 11/1/2001 | $68.89 | 3 |
| T | 83014 | HELICOBACTER PYLORI; DRUG ADMINI | 11/1/2001 | $8.04 | 3 |
| T | 83015 | HEAVY METAL (ARSENIC, BARIUM, BE | 11/1/2001 | $18.56 | 3 |
| T | 83018 | HEAVY METAL (ARSENIC, BARIUM, BE | 11/1/2001 | $22.46 | 3 |
| T | 83020 | HEMOGLOBIN; ELECTROPHORESIS (EG, | 7/1/1997 | $17.67 | 3 |
| T | 83021 | HEMOGLOBIN FRACTIONATION AND QUA | 11/1/2001 | $18.47 | 3 |
| T | 83026 | HEMOGLOBIN; BY COPPER SULFATE ME | 11/1/2001 | $2.41 | 3 |
| T | 83030 | HEMOGLOBIN; F(FETAL) CHEMICAL | 11/1/2001 | $8.46 | 3 |
| T | 83033 | HEMOGLOBIN; F (FETAL), QUALITATI | 11/1/2001 | $6.10 | 3 |
| T | 83036 | HEMOGLOBIN; GLYCOSYLATED (A1C) | 11/1/2001 | $9.93 | 3 |
| T | 83037 | HEMOGLOBIN; GLYCOSYLATED (A1C) B | 4/1/2006 | NC | 9 |
| T | 83045 | HEMOGLOBIN; METHEMOGLOBIN QUALIT | 11/1/2001 | $5.07 | 3 |
| T | 83050 | HEMOGLOBIN; METHEMOGLOBIN QUANTI | 11/1/2001 | $7.49 | 3 |
| T | 83051 | HEMOGLOBIN; PLASMA | 11/1/2001 | $7.47 | 3 |
| T | 83055 | HEMOGLOBIN; SULFHEMOGLOBIN QUALI | 11/1/2001 | $5.03 | 3 |
| T | 83060 | HEMOGLOBIN; SULFHEMOGLOBIN QUANT | 11/1/2001 | $8.46 | 3 |
| T | 83065 | HEMOGLOBIN; THERMOLABILE | 11/1/2001 | $7.04 | 3 |
| T | 83068 | HEMOGLOBIN; UNSTABLE SCREEN | 11/1/2001 | $8.67 | 3 |
| T | 83069 | HEMOGLOBIN; URINE | 11/1/2001 | $2.95 | 3 |
| T | 83070 | HEMOSIDERIN; QUALITATIVE | 11/1/2001 | $4.85 | 3 |
| T | 83071 | HEMOSIDERIN; QUANTITATIVE | 11/1/2001 | $7.03 | 3 |
| T | 83080 | B-HEXOSAMINIDASE, EACH ASSAY | 11/1/2001 | $17.25 | 3 |
| T | 83088 | HISTAMINE | 11/1/2001 | $30.20 | 3 |
| T | 83090 | HOMOCYSTINE | 11/1/2001 | $17.25 | 3 |
| T | 83150 | HOMOVANILLIC ACID (HVA) | 11/1/2001 | $19.79 | 3 |
| T | 83491 | HYDROXYCORTICOSTEROIDS, 17- (17- | 11/1/2001 | $17.92 | 3 |
| T | 83497 | HYDROXYINDOLACETIC ACID 5-(HIAA) | 11/1/2001 | $13.19 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 83498 | HYDROXYPROGESTERONE, 17-D | 11/1/2001 | $27.78 | 3 |
| T | 83499 | HYDROXYPROGESTERONE 20 | 11/1/2001 | $25.77 | 3 |
| T | 83500 | HYDROXYPROLINE; FREE | 11/1/2001 | $23.16 | 3 |
| T | 83505 | HYDROXYPROLINE; TOTAL | 11/1/2001 | $24.86 | 3 |
| T | 83516 | IMMUNOASSAY FOR ANALYTE OTHER TH | 11/1/2001 | $11.80 | 3 |
| T | 83518 | IMMUNOASSAY FOR ANALYTE OTHER TH | 11/1/2001 | $8.67 | 3 |
| T | 83519 | IMMUNOASSAY, ANALYTE, QUANTITATI | 11/1/2001 | $13.82 | 3 |
| T | 83520 | IMMUNOASSAY, ANALYTE; NOT OTHERW | 11/1/2001 | $13.24 | 3 |
| T | 83525 | INSULIN; TOTAL | 11/1/2001 | $11.70 | 3 |
| T | 83527 | INSULIN; FREE | 11/1/2001 | $13.25 | 3 |
| T | 83528 | INTRINSIC FACTOR | 11/1/2001 | $16.27 | 3 |
| T | 83540 | IRON | 11/1/2001 | $6.62 | 3 |
| T | 83550 | IRON BINDING CAPACITY | 11/1/2001 | $8.94 | 3 |
| T | 83570 | ISOCITRIC DEHYDROGENASE (IDH) | 11/1/2001 | $9.04 | 3 |
| T | 83582 | KETOGENIC STEROIDS; FRACTIONATIO | 11/1/2001 | $14.50 | 3 |
| T | 83586 | KETOSTEROIDS, 17- (17-KS); TOTAL | 11/1/2001 | $13.09 | 3 |
| T | 83593 | KETOSTEROIDS, 17- (17-KS); FRACT | 11/1/2001 | $26.90 | 3 |
| T | 83605 | LACTATE (LACTIC ACID) | 11/1/2001 | $10.92 | 3 |
| T | 83615 | LACTATE DEHDROGENASE (LD), (LDH) | 11/1/2001 | $6.18 | 3 |
| T | 83625 | LACTATE DEHYDROGENASE (LD), (LDH | 11/1/2001 | $13.09 | 3 |
| T | 83630 | LACTOFERRIN, FECAL; QUALITATIVE | 1/1/2005 | $11.93 | 3 |
| T | 83631 | LACTOFERRIN, FECAL; QUANTITATIVE | 4/1/2006 | NC | 9 |
| T | 83632 | LACTOGEN, HUMAN PLACENTAL (HPL) | 11/1/2001 | $20.67 | 3 |
| T | 83633 | LACTOSE URINE QUALITATIVE | 11/1/2001 | $5.63 | 3 |
| T | 83634 | LACTOSE URINE; QUANTITATIVE | 11/1/2001 | $11.78 | 3 |
| T | 83655 | LEAD | 11/1/2001 | $12.37 | 3 |
| T | 83661 | FETAL LUNG MATURITY ASSESSMENT; | 11/1/2001 | $22.48 | 3 |
| T | 83662 | LECITHIN-SPHINGOMYELIN RATIO (L/ | 11/1/2001 | $19.34 | 3 |
| T | 83663 | FETAL LUNG MATURITY ASSESSMENT; | 11/1/2001 | $9.67 | 3 |
| T | 83664 | FETAL LUNG MATURITY ASSESSMENT; | 11/1/2001 | $4.83 | 3 |
| T | 83670 | LEUCINE AMINOPEPTIDASE (LAP) | 11/1/2001 | $9.37 | 3 |
| T | 83690 | LIPASE | 11/1/2001 | $7.04 | 3 |
| T | 83695 | LIPOPROTEIN (A) | 4/1/2006 | NC | 9 |
| T | 83698 | LIPOPROTEIN-ASSOCIATED PHOSPHOLI | 1/1/2007 | NC | 9 |
| T | 83700 | LIPOPROTEIN, BLOOD; ELECTROPHORE | 11/1/2006 | NC | 9 |
| T | 83701 | LIPOPROTEIN, BLOOD; HIGH RESOLUT | 11/1/2006 | NC | 9 |
| T | 83704 | LIPOPROTEIN, BLOOD; QUANTITATION | 11/1/2006 | NC | 9 |
| T | 83715 | LIPOPROTEIN, BLOOD; ELECTROPHORE | 1/1/2006 | INVALID | N |
| T | 83716 | LIPOPROTEIN, BLOOD; HIGH RESOLUT | 1/1/2006 | INVALID | N |
| T | 83718 | LIPOPROTEIN, DIRECT MEASUREMENT; | 11/1/2001 | $8.37 | 3 |
| T | 83719 | LIPOPROTEIN, DIRECT MEASUREMENT; | 11/1/2001 | $11.90 | 3 |
| T | 83721 | LIPOPROTEIN, DIRECT MEASUREMENT; | 11/1/2001 | $9.75 | 3 |
| T | 83727 | LUTEINIZING RELEASE FACTOR (LRH) | 11/1/2001 | $17.58 | 3 |
| T | 83735 | MAGNESIUM | 11/1/2001 | $6.85 | 3 |
| T | 83775 | MALATE DEHYDROGENASE | 11/1/2001 | $7.54 | 3 |
| T | 83785 | MANGANESE | 11/1/2001 | $25.15 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 83788 | MASS SPECTROMETRY AND TANDEM MAS | 11/1/2001 | $18.47 | 3 |
| T | 83789 | MASS SPECTROMETRY AND TANDEM MAS | 11/1/2001 | $18.47 | 3 |
| T | 83805 | MEPROBAMATE | 11/1/2001 | $18.03 | 3 |
| T | 83825 | MERCURY, QUANTITATIVE | 11/1/2001 | $16.63 | 3 |
| T | 83835 | METANEPHRINES | 11/1/2001 | $17.32 | 3 |
| T | 83840 | METHADONE | 11/1/2001 | $16.69 | 3 |
| T | 83857 | METHEMALBUMIN | 11/1/2001 | $10.98 | 3 |
| T | 83858 | METHSUXIMIDE | 11/1/2001 | $15.16 | 3 |
| T | 83864 | MUCOPOLYSACCHARIDES, ACID; QUANT | 11/1/2001 | $20.36 | 3 |
| T | 83866 | MUCOPOLYSACCHARIDES ACID URINE; | 11/1/2001 | $10.08 | 3 |
| T | 83872 | MUCIN SYNOVIAL FLUID (ROPES TEST | 11/1/2001 | $5.70 | 3 |
| T | 83873 | MYELIN BASIC PROTEIN, CEREBROSPI | 11/1/2001 | $7.38 | 3 |
| T | 83874 | MYOGLOBIN | 11/1/2001 | $13.20 | 3 |
| T | 83880 | NATRIURETIC PEPTIDE | 1/1/2003 | $25.10 | 3 |
| T | 83883 | NEPHELOMETRY, EACH ANALYTE NOT E | 11/1/2001 | $13.90 | 3 |
| T | 83885 | NICKEL | 11/1/2001 | $25.06 | 3 |
| T | 83887 | NICOTINE | 11/1/2001 | $24.22 | 3 |
| T | 83890 | MOLECULAR DIAGNOSTICS; MOLECULAR | 11/1/2001 | $4.10 | 3 |
| T | 83891 | MOLECULAR DIAGNOSTICS; ISOLATION | 11/1/2001 | $4.10 | 3 |
| T | 83892 | NUCLEAR MOLECULAR DIAGNOSTICS; E | 11/1/2001 | $4.10 | 3 |
| T | 83893 | MOLECULAR DIAGNOSTICS; DOT/SLOT | 11/1/2001 | $4.10 | 3 |
| T | 83894 | NUCLEAR NOLECULAR DIAGNOSTICS; S | 11/1/2001 | $4.10 | 3 |
| T | 83896 | NUCLEAR MOLECULAR DIAGNOSTICS; N | 11/1/2001 | $4.10 | 3 |
| T | 83897 | MOLECULAR DIAGNOSTICS; NUCLEIC A | 11/1/2001 | $4.10 | 3 |
| T | 83898 | MOLECULAR DIAGNOSTICS; AMPLIFICA | 11/1/2001 | $17.15 | 3 |
| T | 83900 | MOLECULAR DIAGNOSTICS; AMPLIFICA | 1/1/2006 | $34.66 | 3 |
| T | 83901 | MOLECULAR DIAGNOSTICS; AMPLIFICA | 11/1/2001 | $17.15 | 3 |
| T | 83902 | MOLECULAR DIAGNOSTICS; REVERSE T | 11/1/2001 | $8.79 | 3 |
| T | 83903 | MOLECULAR DIAGNOSTICS; MUTATION | 11/1/2001 | $17.15 | 3 |
| T | 83904 | MOLECULAR DIAGNOSTICS; MUTATION | 11/1/2001 | $17.15 | 3 |
| T | 83905 | MOLECULAR DIAGNOSTICS; MUTATION | 11/1/2001 | $17.15 | 3 |
| T | 83906 | MOLECULAR DIAGNOSTICS; MUTATION | 11/1/2001 | $17.15 | 3 |
| T | 83907 | MOLECULAR DIAGNOSTICS; LYSIS OF | 1/1/2006 | $13.81 | 3 |
| T | 83908 | MOLECULAR DIAGNOSTICS; SIGNAL AM | 1/1/2006 | $17.33 | 3 |
| T | 83909 | MOLECULAR DIAGNOSTICS; SEPARATIO | 1/1/2006 | $17.33 | 3 |
| T | 83913 | MOLECULAR DIAGNOSTICS; RNA STABI | 1/1/2007 | NC | 9 |
| T | 83914 | MUTATION IDENTIFICATION BY ENZYM | 1/1/2006 | $17.33 | 3 |
| T | 83915 | NUCLEOTIDASE 5 | 11/1/2001 | $11.40 | 3 |
| T | 83916 | OLIGOCLONAL IMMUNE (OLIGOCLONAL | 11/1/2001 | $20.56 | 3 |
| T | 83918 | ORGANIC ACIDS; TOTAL, QUANTITATI | 11/1/2001 | $16.84 | 3 |
| T | 83919 | ORGANIC ACIDS; QUALITATIVE, EACH | 11/1/2001 | $16.84 | 3 |
| T | 83921 | ORGANIC ACID, SINGLE, QUANTITATI | 11/1/2001 | $16.84 | 3 |
| T | 83925 | OPIATES, (EG, MORPHINE, MEPERIDI | 11/1/2001 | $19.90 | 3 |
| T | 83930 | OSMOLALITY BLOOD | 11/1/2001 | $6.76 | 3 |
| T | 83935 | OSMOLALITY; URINE | 11/1/2001 | $6.97 | 3 |
| T | 83937 | OSTEOCALCIN (BONE G1A PROTEIN) | 11/1/2001 | $30.53 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 83945 | OXALATE | 11/1/2001 | $13.17 | 3 |
| T | 83970 | PARATHORMONE (PARATHYROID HORMON | 11/1/2001 | $42.21 | 3 |
| T | 83986 | PH BODY FLUID EXCEPT BLOOD | 11/1/2001 | $3.66 | 3 |
| T | 83992 | PHENCYCLIDINE (PCP) | 11/1/2001 | $15.03 | 3 |
| T | 84022 | PHENOTHIAZINE | 11/1/2001 | $15.93 | 3 |
| T | 84030 | PHENYLALANINE (PKU), BLOOD | 3/1/1992 | NC | 9 |
| T | 84035 | PHENYLKETONES, QUALITATIVE | 11/1/2001 | $3.74 | 3 |
| T | 84060 | PHOSPHATASE, ACID; TOTAL | 11/1/2001 | $7.55 | 3 |
| T | 84061 | PHOSPHATASE, ACID; FORENSIC EXAM | 11/1/2001 | $8.10 | 3 |
| T | 84066 | PHOSPHATASE, ACID; PROSTATIC | 11/1/2001 | $9.88 | 3 |
| T | 84075 | PHOSPHATASE, ALKALINE; | 11/1/2001 | $5.29 | 3 |
| T | 84078 | PHOSPHATASE ALKALINE BLOOD; HEAT | 11/1/2001 | $7.47 | 3 |
| T | 84080 | PHOSPHATASE, ALKALINE; ISOENZYME | 11/1/2001 | $15.13 | 3 |
| T | 84081 | PHOSPHATIDYLGYCEROL | 11/1/2001 | $16.90 | 3 |
| T | 84085 | PHOSPHOGLUCONATE 6- DEHYDROGENAS | 11/1/2001 | $6.90 | 3 |
| T | 84087 | PHOSPHOHEXOSE ISOMERASE | 11/1/2001 | $10.56 | 3 |
| T | 84100 | PHOSPHORUS INORGANIC (PHOSPHATE) | 11/1/2001 | $4.85 | 3 |
| T | 84105 | PHOSPHORUS (PHOSPHATE); BLOOD UR | 11/1/2001 | $5.29 | 3 |
| T | 84106 | PORPHOBILINOGEN URINE QUALITATIV | 11/1/2001 | $4.38 | 3 |
| T | 84110 | PORPHOBILINOGEN URINE; QUANTITAT | 11/1/2001 | $8.64 | 3 |
| T | 84119 | PORPHYRINS, URINE; QUALITATIVE | 11/1/2001 | $8.81 | 3 |
| T | 84120 | PORPHYRINS, URINE; QUANTITATION | 11/1/2001 | $15.04 | 3 |
| T | 84126 | PORPHYRINS, FECES; QUANTITATIVE | 11/1/2001 | $26.05 | 3 |
| T | 84127 | PORPHYRINS, FECES; QUALITATIVE | 11/1/2001 | $11.91 | 3 |
| T | 84132 | POTASSIUM; SERUM | 11/1/2001 | $4.70 | 3 |
| T | 84133 | POTASSIUM; URINE | 11/1/2001 | $4.40 | 3 |
| T | 84134 | PREALBUMIN | 11/1/2001 | $14.92 | 3 |
| T | 84135 | PREGNANEDIOL | 11/1/2001 | $19.57 | 3 |
| T | 84138 | PREGNANETRIOL | 11/1/2001 | $19.36 | 3 |
| T | 84140 | PREGNENOLONE | 11/1/2001 | $21.15 | 3 |
| T | 84143 | 17-HYDROXYPREGNENOLONE | 11/1/2001 | $23.34 | 3 |
| T | 84144 | PROGESTERONE | 11/1/2001 | $21.33 | 3 |
| T | 84146 | PROLACTIN | 11/1/2001 | $19.82 | 3 |
| T | 84150 | PROSTAGLANDIN, EACH | 11/1/2001 | $25.53 | 3 |
| T | 84152 | PROSTATE SPECIFIC ANTIGEN (PSA); | 11/1/2001 | $18.81 | 3 |
| T | 84153 | PROSTATE SPECIFIC ANTIGEN (PSA) | 11/1/2001 | $18.81 | 3 |
| T | 84154 | PROSTATE SPECIFIC ANTIGEN (PSA); | 11/1/2001 | $18.81 | 3 |
| T | 84155 | PROTEIN; TOTAL, EXCEPT REFRACTOM | 11/1/2001 | $3.74 | 3 |
| T | 84156 | PROTEIN, TOTAL, EXCEPT BY REFRAC | 1/1/2004 | $3.79 | 3 |
| T | 84157 | PROTEIN, TOTAL, EXCEPT BY REFRAC | 1/1/2004 | $3.79 | 3 |
| T | 84160 | PROTEIN TOTAL SERUM; REFRACTOMET | 11/1/2001 | $5.29 | 3 |
| T | 84163 | PREGNANCY-ASSOCIATED PLASMA PROT | 1/1/2005 | $15.56 | 3 |
| T | 84165 | PROTEIN; ELECTROPHORETIC FRACTIO | 7/1/1997 | $15.45 | 3 |
| T | 84166 | PROTEIN; ELECTROPHORETIC FRACTIO | 10/1/2005 | $18.44 | 3 |
| T | 84181 | PROTEIN; WESTERN BLOT, WITH INTE | 7/1/1997 | $24.55 | 3 |
| T | 84182 | PROTEIN; WESTERN BLOT, WITH INTE | 7/1/1997 | $25.95 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 84202 | PROTOPORPHYRIN RBC QUANTITATIVE | 11/1/2001 | $14.67 | 3 |
| T | 84203 | PROTOPORPHYRIN RBC; SCREEN | 11/1/2001 | $8.80 | 3 |
| T | 84206 | PROINSULIN | 11/1/2001 | $18.22 | 3 |
| T | 84207 | PYRIDOXAL PHOSPHATE (VITAMIN B-6 | 11/1/2001 | $28.73 | 3 |
| T | 84210 | PYRUVATE | 11/1/2001 | $11.11 | 3 |
| T | 84220 | PYRUVATE KINASE | 11/1/2001 | $9.65 | 3 |
| T | 84228 | QUININE | 11/1/2001 | $11.90 | 3 |
| T | 84233 | RECEPTOR ASSAY; ESTROGEN | 11/1/2001 | $65.87 | 3 |
| T | 84234 | RECEPTOR ASSAY; PROGESTERONE | 11/1/2001 | $66.33 | 3 |
| T | 84235 | RECEPTOR ASSAY; ENDOCRINE OTHER | 11/1/2001 | $53.51 | 3 |
| T | 84238 | RECEPTOR ASSAY; NON-ENDOCRINE (S | 11/1/2001 | $37.39 | 3 |
| T | 84244 | RENIN | 11/1/2001 | $22.50 | 3 |
| T | 84252 | RIBOFLAVIN (VITAMIN B-2) | 11/1/2001 | $20.69 | 3 |
| T | 84255 | SELENIUM | 11/1/2001 | $26.11 | 3 |
| T | 84260 | SEROTONIN | 11/1/2001 | $31.68 | 3 |
| T | 84270 | SEX HORMONE BINDING GLOBULIN (SH | 11/1/2001 | $22.22 | 3 |
| T | 84275 | SIALIC ACID | 11/1/2001 | $13.73 | 3 |
| T | 84285 | SILICA | 11/1/2001 | $24.09 | 3 |
| T | 84295 | SODIUM; SERUM | 11/1/2001 | $4.92 | 3 |
| T | 84300 | SODIUM; URINE | 11/1/2001 | $4.97 | 3 |
| T | 84302 | SODIUM; OTHER SOURCE | 1/1/2003 | $5.02 | 3 |
| T | 84305 | SOMATOMEDIN | 11/1/2001 | $21.74 | 3 |
| T | 84307 | SOMATOSTATIN | 11/1/2001 | $18.70 | 3 |
| T | 84311 | SPECTROPHOTOMETRY, ANALYTE NOT E | 11/1/2001 | $7.15 | 3 |
| T | 84315 | SPECIFIC GRAVITY (EXCEPT URINE) | 11/1/2001 | $2.56 | 3 |
| T | 84375 | SUGARS CHROMATOGRAPHIC TLC OR PA | 11/1/2001 | $8.95 | 3 |
| T | 84376 | SUGARS (MON-, DI, AND OLIGOSACCH | 11/1/2001 | $5.63 | 3 |
| T | 84377 | SUGARS (MON-, DI, AND OLIGOSACCH | 11/1/2001 | $5.63 | 3 |
| T | 84378 | SUGARS (MON-, DI, AND OLIGOSACCH | 11/1/2001 | $11.78 | 3 |
| T | 84379 | SUGARS (MON-, DI, AND OLIGOSACCH | 11/1/2001 | $11.78 | 3 |
| T | 84392 | SULFATE, URINE | 11/1/2001 | $4.85 | 3 |
| T | 84402 | TESTOSTERONE; FREE | 11/1/2001 | $26.04 | 3 |
| T | 84403 | TESTOSTERONE; TOTAL | 11/1/2001 | $26.40 | 3 |
| T | 84425 | THIAMINE (VITAMIN B-1) | 11/1/2001 | $21.72 | 3 |
| T | 84430 | THIOCYANATE | 11/1/2001 | $8.95 | 3 |
| T | 84432 | THYROGLOBULIN | 11/1/2001 | $16.43 | 3 |
| T | 84436 | THYROXINE; TOTAL | 11/1/2001 | $7.03 | 3 |
| T | 84437 | THYROXINE; REQUIRING ELUTION (EG | 11/1/2001 | $6.62 | 3 |
| T | 84439 | THYROXINE; FREE | 11/1/2001 | $9.22 | 3 |
| T | 84442 | THYROXINE BINDING GLOBULIN (TBG) | 11/1/2001 | $15.13 | 3 |
| T | 84443 | THYROID STIMULATING HORMONE (TSH | 11/1/2001 | $17.18 | 3 |
| T | 84445 | THYROID STIMULATING IMMUNE GLOBU | 11/1/2001 | $52.01 | 3 |
| T | 84446 | TOCOPHEROL ALPHA (VITAMIN E) | 11/1/2001 | $14.50 | 3 |
| T | 84449 | TRANSCORTIN (CORTISOL BINDING GL | 11/1/2001 | $18.40 | 3 |
| T | 84450 | TRANSFERASSE; ASPARTATE AMINO (A | 11/1/2001 | $5.28 | 3 |
| T | 84460 | TRANSFERASE; ALANINE AMINO (ALT) | 11/1/2001 | $5.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 84466 | TRANSFERRIN | 11/1/2001 | $13.06 | 3 |
| T | 84478 | TRIGLYCERIDES | 11/1/2001 | $5.88 | 3 |
| T | 84479 | THYROID HORMONE (T3 OR T4) UPTAK | 11/1/2001 | $6.62 | 3 |
| T | 84480 | TRIIODOTHYRONINE T3; TOTAL (TT-3 | 11/1/2001 | $14.50 | 3 |
| T | 84481 | TRIDOTHYRONINE (T-3); FREE | 11/1/2001 | $17.32 | 3 |
| T | 84482 | TRIDOTHYRONINE (T-3); REVERSE | 11/1/2001 | $16.12 | 3 |
| T | 84484 | TROPONIN | 11/1/2001 | $10.06 | 3 |
| T | 84485 | TRYPSIN DUODENAL FLUID | 11/1/2001 | $7.67 | 3 |
| T | 84488 | TRYPSIN; FECES, QUALITATIVE | 11/1/2001 | $7.47 | 3 |
| T | 84490 | TRYPSIN; FECES, QUANTITATIVE, 24 | 11/1/2001 | $7.78 | 3 |
| T | 84510 | TYROSINE | 11/1/2001 | $10.64 | 3 |
| T | 84512 | TROPONIN, QUALITATIVE | 11/1/2001 | $7.87 | 3 |
| T | 84520 | UREA NITROGEN; QUANTITATIVE | 11/1/2001 | $4.03 | 3 |
| T | 84525 | UREA NITROGEN; SEMIQUANTITATIVE | 11/1/2001 | $3.23 | 3 |
| T | 84540 | UREA NITROGEN URINE | 11/1/2001 | $4.85 | 3 |
| T | 84545 | UREA NITROGEN CLEARANCE | 11/1/2001 | $6.75 | 3 |
| T | 84550 | URIC ACID; BLOOD | 11/1/2001 | $4.63 | 3 |
| T | 84560 | URIC ACID; OTHER SOURCE | 11/1/2001 | $4.85 | 3 |
| T | 84577 | UROBILINOGEN FECES QUANTITATIVE | 11/1/2001 | $3.90 | 3 |
| T | 84578 | UROBILINOGEN URINE QUALITATIVE | 11/1/2001 | $3.32 | 3 |
| T | 84580 | UROBILINOGEN URINE; QUANTITATIVE | 11/1/2001 | $7.26 | 3 |
| T | 84583 | UROBILINOGEN URINE; SEMIQUANTITA | 11/1/2001 | $5.14 | 3 |
| T | 84585 | VANILLYLMANDELIC ACID (VMA) URIN | 11/1/2001 | $15.85 | 3 |
| T | 84586 | VASOACTIVE INTESTINAL PEPTIDE (V | 11/1/2001 | $36.13 | 3 |
| T | 84588 | VASOPRESSIN (ANTIDIURETIC HORMON | 11/1/2001 | $34.71 | 3 |
| T | 84590 | VITAMIN A | 11/1/2001 | $11.85 | 3 |
| T | 84591 | VITAMIN, NOT OTHERWISE SPECIFIED | 11/1/2001 | $11.85 | 3 |
| T | 84597 | VITAMIN K | 11/1/2001 | $14.02 | 3 |
| T | 84600 | VOLATILES (EG, ACETIC ANHYDRIDE, | 11/1/2001 | $16.44 | 3 |
| T | 84620 | XYLOSE ABSORPTION TEST, BLOOD AN | 11/1/2001 | $12.11 | 3 |
| T | 84630 | ZINC | 11/1/2001 | $11.65 | 3 |
| T | 84681 | C-PEPTIDE | 11/1/2001 | $21.28 | 3 |
| T | 84702 | GONADOTROPIN, CHORIONIC (HCG); Q | 11/1/2001 | $15.39 | 3 |
| T | 84703 | GONADOTROPIN CHORIONIC QUALITAVE | 11/1/2001 | $7.68 | 3 |
| T | 84830 | OVULATION TESTS, BY VISUAL COLOR | 2/22/1994 | NC | 9 |
| T | 84999 | UNLISTED CHEMISTRY PROCEDURE | 12/1/1999 | $0.01 | 5 |
| T | 85002 | BLEEDING TIME | 11/1/2001 | $4.60 | 3 |
| T | 85004 | BLOOD COUNT; AUTOMATED DIFFERENT | 1/1/2003 | $6.69 | 3 |
| T | 85007 | BLOOD COUNT; BLOOD SMEAR, MICROS | 7/1/1997 | $4.06 | 3 |
| T | 85008 | BLOOD COUNT; BLOOD SMEAR, MICROS | 11/1/2001 | $3.52 | 3 |
| T | 85009 | BLOOD COUNT; MANUAL DIFFERENTIAL | 11/1/2001 | $3.80 | 3 |
| T | 85013 | BLOOD COUNT; SPUN MICROHEMATOCRI | 11/1/2001 | $2.42 | 3 |
| T | 85014 | BLOOD COUNT; HEMATOCRIT (HCT) | 11/1/2001 | $2.42 | 3 |
| T | 85018 | BLOOD COUNT; HEMOGLOBIN (HGB) | 11/1/2001 | $2.42 | 3 |
| T | 85021 | BLOOD COUNT; HEMOGRAM AUTOMATED | 7/1/2003 | INVALID | N |
| T | 85022 | BLOOD COUNT HEMOGRAM AUTOMATED A | 7/1/2003 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 85023 | BLOOD COUNT HEMOGRAM AND PLATELE | 7/1/2003 | INVALID | N |
| T | 85024 | BLOOD COUNT HEMOGRAM AND PLATELE | 7/1/2003 | INVALID | N |
| T | 85025 | BLOOD COUNT; COMPLETE (CBC), AUT | 11/1/2001 | $7.95 | 3 |
| T | 85027 | BLOOD COUNT; COMPLETE (CBC), AUT | 11/1/2001 | $6.62 | 3 |
| T | 85031 | BLOOD COUNT HEMOGRAM MANUAL COMP | 7/1/2003 | INVALID | N |
| T | 85032 | BLOOD COUNT; MANUAL CELL COUNT ( | 1/1/2003 | $4.45 | 3 |
| T | 85041 | BLOOD COUNT; RED BLOOD CELL (RBC | 11/1/2001 | $3.08 | 3 |
| T | 85044 | BLOOD COUNT; RETICULOCYTE, MANUA | 11/1/2001 | $4.40 | 3 |
| T | 85045 | BLOOD COUNT; RETICULOCYTE, AUTOM | 11/1/2001 | $4.10 | 3 |
| T | 85046 | BLOOD COUNT; RETICULOCYTES, AUTO | 11/1/2001 | $5.70 | 3 |
| T | 85048 | BLOOD COUNT; LEUKOCYTE (WBC), AU | 11/1/2001 | $2.60 | 3 |
| T | 85049 | BLOOD COUNT; PLATELET, AUTOMATED | 1/1/2003 | $4.63 | 3 |
| T | 85055 | RETICULATED PLATELET ASSAY | 1/1/2004 | $18.71 | 3 |
| T | 85060 | BLOOD SMEAR, PERIPHERAL, INTERPR | 1/1/2007 | $16.87 | 3 |
| T | 85095 | BONE MARROW; ASPIRATION ONLY | 4/1/2002 | INVALID | N |
| T | 85097 | BONE MARROW, SMEAR INTERPRETATIO | 1/1/2007 | $75.26 | 3 |
| T | 85102 | BONE MARROW BIOPSY, NEEDLE OR TR | 4/1/2002 | INVALID | N |
| T | 85130 | CHROMOGENIC SUBSTRATE ASSAY | 11/1/2001 | $12.17 | 3 |
| T | 85170 | CLOT RETRACTION | 11/1/2001 | $3.70 | 3 |
| T | 85175 | CLOT LYSIS TIME WHOLE BLOOD DILU | 11/1/2001 | $4.65 | 3 |
| T | 85210 | CLOTTING FACTOR II PROTHROMBIN S | 11/1/2001 | $13.28 | 3 |
| T | 85220 | CLOTTING; FACTOR V (ACG OR PROAC | 11/1/2001 | $16.38 | 3 |
| T | 85230 | CLOTTING; FACTOR VII (PROCONVERT | 11/1/2001 | $16.38 | 3 |
| T | 85240 | CLOTTING; FACTOR VIII (AHG) ONE | 11/1/2001 | $16.38 | 3 |
| T | 85244 | CLOTTING; FACTOR VIII RELATED AN | 11/1/2001 | $20.88 | 3 |
| T | 85245 | CLOTTING; FACTOR VIII, VW FACTOR | 11/1/2001 | $23.47 | 3 |
| T | 85246 | CLOTTING; FACTOR VIII, VW FACTOR | 11/1/2001 | $23.47 | 3 |
| T | 85247 | CLOTTING; FACTOR VIII, VON WILLE | 11/1/2001 | $23.47 | 3 |
| T | 85250 | CLOTTING; FACTOR IX (PTC OR CHRI | 11/1/2001 | $16.38 | 3 |
| T | 85260 | CLOTTING; FACTOR X (STRUART-PROW | 11/1/2001 | $16.38 | 3 |
| T | 85270 | CLOTTING; FACTOR XI (PTA) | 11/1/2001 | $16.38 | 3 |
| T | 85280 | CLOTTING; FACTOR XII (HAGEMAN) | 11/1/2001 | $19.79 | 3 |
| T | 85290 | CLOTTING; FACTOR XIII (FIBRIN ST | 11/1/2001 | $16.38 | 3 |
| T | 85291 | CLOTTING; FACTOR XIII (FIBRIN ST | 11/1/2001 | $9.09 | 3 |
| T | 85292 | CLOTTING; PREKALLIKREIN ASSAY (F | 11/1/2001 | $19.37 | 3 |
| T | 85293 | CLOTTING; HIGH MOLECULAR WEIGHT | 11/1/2001 | $19.37 | 3 |
| T | 85300 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $12.12 | 3 |
| T | 85301 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $11.06 | 3 |
| T | 85302 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $12.29 | 3 |
| T | 85303 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $14.14 | 3 |
| T | 85305 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $11.85 | 3 |
| T | 85306 | CLOTTING INHIBITORS OR ANTICOAGU | 11/1/2001 | $15.67 | 3 |
| T | 85307 | ACTIVATED PROTEIN C (APC) RESIST | 11/1/2001 | $15.67 | 3 |
| T | 85335 | FACOTR INHIBITOR TEST | 11/1/2001 | $13.14 | 3 |
| T | 85337 | THROMBOMODULIN | 11/1/2001 | $10.66 | 3 |
| T | 85345 | COAGULATION TIME LEE AND WHITE | 11/1/2001 | $4.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 85347 | COAGULATION TIME; ACTIVATED | 11/1/2001 | $3.23 | 3 |
| T | 85348 | COAGULATION TIME; OTHER METHODS | 11/1/2001 | $3.80 | 3 |
| T | 85360 | EUGLOBULIN LYSIS | 11/1/2001 | $8.59 | 3 |
| T | 85362 | FIBRIN(OGEN) DEGRADATION (SPLIT) | 11/1/2001 | $6.56 | 3 |
| T | 85366 | FIBRIN(OGEN) DEGRADATION (SPLIT) | 11/1/2001 | $8.81 | 3 |
| T | 85370 | FIBRIN(OGEN) DEGRADATION (SPLIT) | 11/1/2001 | $11.62 | 3 |
| T | 85378 | FIBRIN DEGRADATION PRODUCTS, D-D | 11/1/2001 | $7.30 | 3 |
| T | 85379 | FIBRIN DEGRADATION PRODUCTS, D-D | 11/1/2001 | $10.40 | 3 |
| T | 85380 | FIBRIN DEGRADATION PRODUCTS, D-D | 1/1/2003 | $10.52 | 3 |
| T | 85384 | FIBRINOGEN: ACTIVITY | 11/1/2001 | $8.69 | 3 |
| T | 85385 | FIBRINOGEN; ANTIGEN | 11/1/2001 | $8.69 | 3 |
| T | 85390 | FIBRINOLYSINS OR COAGULOPATHY SC | 7/1/1997 | $7.08 | 3 |
| T | 85396 | COAGULATION/FIBRINOLYSIS ASSAY, | 1/1/2007 | $14.79 | 3 |
| T | 85400 | FIBRINOLYITC FACTORS AND INHIBIT | 11/1/2001 | $9.04 | 3 |
| T | 85410 | FIBRINOLYTIC MECHANISMS ALPHA-2 | 11/1/2001 | $7.89 | 3 |
| T | 85415 | FIBRINOLYTIC FACTORS AND INHIBIT | 11/1/2001 | $17.58 | 3 |
| T | 85420 | FIBRINOLYTIC MECHANISMS; PLASMIN | 11/1/2001 | $6.69 | 3 |
| T | 85421 | FIBRINOLYTIC MECHANISMS; PLASMIN | 11/1/2001 | $10.41 | 3 |
| T | 85441 | HEINZ BODIES DIRECT | 11/1/2001 | $4.30 | 3 |
| T | 85445 | HEINZ BODIES; INDUCED ACETYL PHE | 11/1/2001 | $6.97 | 3 |
| T | 85460 | HEMOGLOBIN OR RBCS, FETAL, FOR F | 11/1/2001 | $7.91 | 3 |
| T | 85461 | HEMOGLOBIN OR RBCS, FETAL, FOR F | 11/1/2001 | $6.79 | 3 |
| T | 85475 | HEMOLYSIN, ACID | 11/1/2001 | $9.07 | 3 |
| T | 85520 | HEPARIN ASSAY | 11/1/2001 | $13.39 | 3 |
| T | 85525 | HEPARIN NEUTRALIZATION | 11/1/2001 | $12.12 | 3 |
| T | 85530 | HEPARIN-PROTAMINE TOLERANCE TEST | 11/1/2001 | $14.50 | 3 |
| T | 85535 | IRON STAIN (RBC OR BONE MARROW S | 4/1/2002 | INVALID | N |
| T | 85536 | IRON STAIN, PERIPHERAL BLOOD | 11/1/2001 | $6.62 | 3 |
| T | 85540 | LEUKOCYTE ALKALINE PHOSPHATASE W | 11/1/2001 | $8.79 | 3 |
| T | 85547 | MECHANICAL FRAGILITY RBC | 11/1/2001 | $8.79 | 3 |
| T | 85549 | MURAMIDASE | 11/1/2001 | $19.18 | 3 |
| T | 85555 | OSMOTIC FRAGILITY, RBC; UNINCUBA | 11/1/2001 | $6.84 | 3 |
| T | 85557 | OSMOTIC FRAGILITY, RBC; INCUBATE | 11/1/2001 | $6.85 | 3 |
| T | 85576 | PLATELET; AGGREGATION (IN VITRO) | 7/1/1997 | $29.50 | 3 |
| T | 85585 | PLATELET; ESTIMATION ON SMEAR ON | 7/1/2003 | INVALID | N |
| T | 85590 | PLATELET; MANUAL COUNT | 7/1/2003 | INVALID | N |
| T | 85595 | PLATELET; AUTOMATED COUNT | 7/1/2003 | INVALID | N |
| T | 85597 | PLATELET NEUTRLIZATION | 11/1/2001 | $18.38 | 3 |
| T | 85610 | PROTHROMBIN TIME | 11/1/2001 | $4.02 | 3 |
| T | 85611 | PROTHROMBIN TIME; SUBSTITUTION, | 11/1/2001 | $4.03 | 3 |
| T | 85612 | RUSSELL VIPER VENOM TIME (INCLUD | 11/1/2001 | $6.56 | 3 |
| T | 85613 | RUSSELL VIPER VENOM TIME (INCLUD | 11/1/2001 | $6.56 | 3 |
| T | 85635 | REPTILASE TEST | 11/1/2001 | $10.07 | 3 |
| T | 85651 | SEDIMENTATION RATE, ERYTHROCYTE; | 11/1/2001 | $3.63 | 3 |
| T | 85652 | SEDIMENTATION RATE, ERYTHROCYTE; | 11/1/2001 | $2.76 | 3 |
| T | 85660 | SICKLING OF RBC REDUCTION SLIDE | 11/1/2001 | $5.65 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 85670 | THROMBIN TIME PLASMA | 11/1/2001 | $5.91 | 3 |
| T | 85675 | THROMBIN TIME; TITER | 11/1/2001 | $7.01 | 3 |
| T | 85705 | THROMBOPLASTIN INHIBITION; TISSU | 11/1/2001 | $9.85 | 3 |
| T | 85730 | THROMBOPLASTIN TIME PARTIAL (PTT | 11/1/2001 | $6.14 | 3 |
| T | 85732 | THROMBOPLASTIN TIME, PARTIAL (PT | 11/1/2001 | $6.62 | 3 |
| T | 85810 | VISCOSITY | 11/1/2001 | $11.94 | 3 |
| T | 85999 | UNLISTED HEMATOLOGY PROCEDURE | 10/1/2001 | $0.01 | 5 |
| T | 86000 | AGGLUTININS, FEBRILE, EACH ANTIG | 11/1/2001 | $7.14 | 3 |
| T | 86001 | ALLERGEN SPECIFIC IGG QUANTITATI | 11/1/2001 | $5.34 | 3 |
| T | 86003 | ALLERGEN SPECIFIC IGE; QUANTITAT | 11/1/2001 | $5.34 | 3 |
| T | 86005 | ALLERGEN SPECIFIC IGE; QUALITATI | 11/1/2001 | $8.15 | 3 |
| T | 86021 | ANTIBODY IDENTIFICATION LEUKOCYT | 11/1/2001 | $15.39 | 3 |
| T | 86022 | ANTIBODY IDENTIFICATION; PLATELE | 11/1/2001 | $18.78 | 3 |
| T | 86023 | ANTIBODY IDENTIFICATION; PLATELE | 11/1/2001 | $12.74 | 3 |
| T | 86038 | ANTINUCLEAR ANTIBODIES (ANA); | 11/1/2001 | $12.36 | 3 |
| T | 86039 | ANTINUCLEAR ANTIBODIES (ANA); TI | 11/1/2001 | $11.42 | 3 |
| T | 86060 | ANTISTREPTOLYSIN O TITER | 11/1/2001 | $7.47 | 3 |
| T | 86063 | ANTISTREPTOLYSIN O; SCREEN | 11/1/2001 | $5.91 | 3 |
| T | 86064 | B CELLS, TOTAL COUNT | 1/1/2006 | INVALID | N |
| T | 86077 | BLOOD BANK PHYSYCIAN SERVICES; D | 1/1/2007 | $35.29 | 3 |
| T | 86078 | BLOOD BANK PHYSICIAN SERVICES IN | 1/1/2007 | $37.11 | 3 |
| T | 86079 | BLOOD BANK PHYSICIAN SERVICES AU | 1/1/2007 | $36.85 | 3 |
| T | 86140 | C-REACTIVE PROTEIN | 11/1/2001 | $5.29 | 3 |
| T | 86141 | C-REACTIVE PROTEIN; HIGH SENSITI | 12/1/2002 | $13.24 | 3 |
| T | 86146 | BETA 2 BLYCOPROTEIN I ANTIBODY, | 11/1/2001 | $26.02 | 3 |
| T | 86147 | CARDIOLIPIN (PHOSPHOLIPID) ANTIB | 11/1/2001 | $26.02 | 3 |
| T | 86148 | ANTI-PHOSPHATIDYLSERINE (PHOSPHO | 11/1/2001 | $16.43 | 3 |
| T | 86155 | CHEMOTAXIS ASSAY SPECIFY METHOD | 11/1/2001 | $16.34 | 3 |
| T | 86156 | COLD AGGLUTININ; SCREEN | 11/1/2001 | $6.85 | 3 |
| T | 86157 | COLD AGGLUTININ; TITER | 11/1/2001 | $8.24 | 3 |
| T | 86160 | COMPLEMENT; ANTIGEN, EACH COMPON | 11/1/2001 | $12.28 | 3 |
| T | 86161 | COMPLEMENT; FUNCTIONAL ACTIVITY, | 11/1/2001 | $12.28 | 3 |
| T | 86162 | COMPLEMENT; TOTAL HEMOLYTIC (CH5 | 11/1/2001 | $20.78 | 3 |
| T | 86171 | COMPLEMENT FIXATION TESTS, EACH | 11/1/2001 | $10.25 | 3 |
| T | 86185 | COUNTERIMMUNOELECTROPHORESIS, EA | 11/1/2001 | $9.15 | 3 |
| T | 86200 | CYCLIC CITRULLINATED PEPTIDE (CC | 1/1/2006 | $13.39 | 3 |
| T | 86215 | DEOXYRIBONUCLEASE ANTIBODY | 11/1/2001 | $13.56 | 3 |
| T | 86225 | DEOCYRIBONUCLEIC ACID (DNA) ANTI | 11/1/2001 | $14.05 | 3 |
| T | 86226 | DEOXYRIBONUCLEIC ACID (DNA) ANTI | 11/1/2001 | $12.38 | 3 |
| T | 86235 | EXTRACTABLE NUCLEAR ANTIGEN, ANT | 11/1/2001 | $16.38 | 3 |
| T | 86243 | FC RECEPTOR | 11/1/2001 | $20.99 | 3 |
| T | 86255 | FLUORESCENT ANTIBODY; SCREEN, EA | 7/1/1997 | $15.33 | 3 |
| T | 86256 | FLUORESCENT ANTIBODY; TITER, EAC | 7/1/1997 | $16.55 | 3 |
| T | 86277 | GROWTH HORMONE, HUMAN (HGH), ANT | 11/1/2001 | $16.10 | 3 |
| T | 86280 | HEMAGGLUTINATION INHIBITION TEST | 11/1/2001 | $8.37 | 3 |
| T | 86294 | IMMUNOASSAY FOR TUMOR ANTIGEN, Q | 6/1/2006 | $21.28 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 86300 | IMMUNOASSAY FOR TUMOR ANTIGEN, Q | 11/1/2001 | $21.28 | 3 |
| T | 86301 | IMMUNOASSAY FOR TUMOR ANTIGEN, Q | 11/1/2001 | $21.28 | 3 |
| T | 86304 | IMMUNOASSAY FOR TUMOR ANTIGEN, Q | 11/1/2001 | $21.28 | 3 |
| T | 86308 | HETEROPHILE ANTIBODIES; SCREENIN | 11/1/2001 | $5.29 | 3 |
| T | 86309 | HETEROPHILE ANTIBODIES; TITER | 11/1/2001 | $6.62 | 3 |
| T | 86310 | HETEROPHILE ANTIBODIES; TITERS A | 11/1/2001 | $7.54 | 3 |
| T | 86316 | IMMUNOASSAY FOR TUMOR ANTIGEN; O | 11/1/2001 | $21.28 | 3 |
| T | 86317 | IMMUNOASSAY FOR INFECTIOUS AGENT | 11/1/2001 | $15.33 | 3 |
| T | 86318 | IMMUNOASSAY FOR INFECTIOUS AGENT | 11/1/2001 | $13.24 | 3 |
| T | 86320 | IMMUNOELECTROPHORESIS; SERUM | 7/1/1997 | $30.77 | 3 |
| T | 86325 | IMMUNOELECTROPHORESIS; OTHER FLU | 7/1/1997 | $30.69 | 3 |
| T | 86327 | IMMUNOELECTROPHORESIS; CROSSED ( | 7/1/1997 | $31.15 | 3 |
| T | 86329 | IMMUNODIFFUSION, NOT ELSEWHERE S | 11/1/2001 | $14.36 | 3 |
| T | 86331 | IMMUNODIFFUSION; GEL DIFFUSION, | 11/1/2001 | $12.25 | 3 |
| T | 86332 | IMMUNE COMPLEX ASSAY | 11/1/2001 | $24.92 | 3 |
| T | 86334 | IMMUNOFIXATION ELECTROPHORESIS; | 7/1/1997 | $30.66 | 3 |
| T | 86335 | IMMUNOFIXATION ELECTROPHORESIS; | 1/1/2005 | $30.34 | 3 |
| T | 86336 | INHIBIN A | 8/1/2002 | $15.29 | 3 |
| T | 86337 | INSULIN ANTIBODIES | 11/1/2001 | $21.90 | 3 |
| T | 86340 | INTRINSIC FACTOR ANTIBODIES | 11/1/2001 | $15.41 | 3 |
| T | 86341 | ISLET CELL ANTIBODY | 11/1/2001 | $20.23 | 3 |
| T | 86343 | LEUKOCYTE HISTAMINE RELEASE TEST | 11/1/2001 | $12.74 | 3 |
| T | 86344 | LEUKOCYTE PHAGOCYTOSIS | 11/1/2001 | $8.17 | 3 |
| T | 86353 | LYMPHOCYTE TRANSFORMATION, MITOG | 11/1/2001 | $50.14 | 3 |
| T | 86355 | B CELLS, TOTAL COUNT | 1/1/2006 | $39.00 | 3 |
| T | 86357 | NATURAL KILLER (NK) CELLS, TOTAL | 1/1/2006 | $39.00 | 3 |
| T | 86359 | T CELLS; TOTAL COUNT | 11/1/2001 | $38.58 | 3 |
| T | 86360 | T CELLS; T4 AND T8, INCLUDING RA | 11/1/2001 | $48.05 | 3 |
| T | 86361 | T CELLS; ABSOLUTE CD4 COUNT | 11/1/2001 | $18.50 | 3 |
| T | 86367 | STEM CELLS (IE, CD34), TOTAL COU | 1/1/2006 | $39.00 | 3 |
| T | 86376 | MICROSOMAL ANTIBODIES (EG, THYRO | 11/1/2001 | $14.88 | 3 |
| T | 86378 | MIGRATION INHIBITORY FACTOR TEST | 11/1/2001 | $20.14 | 3 |
| T | 86379 | NATURAL KILLER (NK) CELLS, TOTAL | 1/1/2006 | INVALID | N |
| T | 86382 | NEUTRALIZATION TEST VIRAL | 11/1/2001 | $17.29 | 3 |
| T | 86384 | NITROBLUE TETRAZOLIUM DYE TEST ( | 11/1/2001 | $11.65 | 3 |
| T | 86403 | PARTICLE AGGLUTINATION; SCREEN, | 11/1/2001 | $10.42 | 3 |
| T | 86406 | PARTICLE AGGLUTINATION; TITER, E | 11/1/2001 | $10.88 | 3 |
| T | 86430 | RHEUMATOID FACTOR; QUALITATIVE | 11/1/2001 | $5.81 | 3 |
| T | 86431 | RHEUMATOID FACTOR; QUANTITATIVE | 11/1/2001 | $5.81 | 3 |
| T | 86480 | TUBERCULOSIS TEST, CELL MEDIATED | 11/1/2006 | NC | 9 |
| T | 86485 | SKIN TEST; CANDIDA | 10/1/2001 | $27.75 | 3 |
| T | 86490 | SKIN TEST; COCCIDIOIDOMYCOSIS | 1/1/2007 | $8.04 | 3 |
| T | 86510 | SKIN TEST; HISTOPLASMOSIS | 1/1/2007 | $8.82 | 3 |
| T | 86580 | SKIN TEST; TUBERCULOSIS INTRADER | 1/1/2007 | $7.01 | 3 |
| T | 86585 | SKIN TEST; TUBERCULOSIS TINE TES | 1/1/2006 | INVALID | N |
| T | 86586 | SKIN TEST; UNLISTED ANTIGEN, EAC | 10/1/2001 | $15.33 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 86587 | STEM CELLS (IE, CD34), TOTAL COU | 1/1/2006 | INVALID | N |
| T | 86590 | STREPTOKINASE ANTIBODY | 11/1/2001 | $11.28 | 3 |
| T | 86592 | SYPHILIS TEST; QUALITATIVE (EG, | 11/1/2001 | $4.37 | 3 |
| T | 86593 | SYPHILIS TEST; QUANTITATIVE | 11/1/2001 | $4.51 | 3 |
| T | 86602 | ANTIBODY; ACTINOMYCES | 11/1/2001 | $10.40 | 3 |
| T | 86603 | ANTIBODY; ADENOVIRUS | 11/1/2001 | $13.16 | 3 |
| T | 86606 | ANTIBODY; ASPIRGILLUS | 11/1/2001 | $15.39 | 3 |
| T | 86609 | ANTIBODY; BACTERIUM, NOT ELSEWHE | 11/1/2001 | $13.18 | 3 |
| T | 86611 | BARTONELLA | 11/1/2001 | $10.40 | 3 |
| T | 86612 | ANTIBODY; BLASTOMYCES | 11/1/2001 | $13.19 | 3 |
| T | 86615 | ANTIBODY; BORDETELLA | 11/1/2001 | $13.49 | 3 |
| T | 86617 | ANTIBODY; BORRELIA BURGDORFERI ( | 11/1/2001 | $15.84 | 3 |
| T | 86618 | ANTIBODY; BORELLIA BUFGDORFERI ( | 11/1/2001 | $17.42 | 3 |
| T | 86619 | ANTIBODY; BORRELIA (RELAPSING FE | 11/1/2001 | $13.68 | 3 |
| T | 86622 | ANTIBODY; BRUCELLA | 11/1/2001 | $9.14 | 3 |
| T | 86625 | ANTIBODY; CAMPYLOBACTER | 11/1/2001 | $13.42 | 3 |
| T | 86628 | ANTIBODY; CANDIDA | 11/1/2001 | $12.28 | 3 |
| T | 86631 | ANTIBODEY; CHLAMYDIA | 11/1/2001 | $12.10 | 3 |
| T | 86632 | ANTIBODY; CHLAMYDIA, IGM | 11/1/2001 | $12.99 | 3 |
| T | 86635 | ANTIBODY; COCCIDIOIDES | 11/1/2001 | $11.73 | 3 |
| T | 86638 | ANTIBODY; COXIELLA BRUNETII (Q F | 11/1/2001 | $12.40 | 3 |
| T | 86641 | ANTIODY; CRYPTOCOCCUS | 11/1/2001 | $14.74 | 3 |
| T | 86644 | ANTIBODY; CYTOMEGALOVIRUS (CMV) | 11/1/2001 | $14.72 | 3 |
| T | 86645 | ANTIBODY; CYTOMEGALOVIRUS (CMV), | 11/1/2001 | $17.23 | 3 |
| T | 86648 | ANTIBODY; DIPTHERIA | 11/1/2001 | $15.55 | 3 |
| T | 86651 | ANTIBODY; ENCEPHALITIS, CALIFORN | 11/1/2001 | $13.49 | 3 |
| T | 86652 | ANTIBODY; ENCEPHALITIS, EASTERN | 11/1/2001 | $13.49 | 3 |
| T | 86653 | ANTIBODY; ENCEPHALITIS, ST. LOUI | 11/1/2001 | $13.49 | 3 |
| T | 86654 | ANTIBODY; ENCEPHALITIS, WESTERN | 11/1/2001 | $13.49 | 3 |
| T | 86658 | ANTIBODY; ENTEROVIRUS (EG, COXSA | 11/1/2001 | $13.33 | 3 |
| T | 86663 | ANTIBODY; EPSTEIN-BARR (EB) VIRU | 11/1/2001 | $13.42 | 3 |
| T | 86664 | ANTIBODY; EPSTEIN-BARR (EB) VIRU | 11/1/2001 | $15.64 | 3 |
| T | 86665 | ANTIBODY; EPSTEIN-BARR (EB) VIRU | 11/1/2001 | $18.55 | 3 |
| T | 86666 | EHRLICHIA | 11/1/2001 | $10.40 | 3 |
| T | 86668 | ANTIBODY; FRANCISELLA TULARENSIS | 11/1/2001 | $10.64 | 3 |
| T | 86671 | ANTIBODY; FUNGUS, NOT ELSEWHERE | 11/1/2001 | $12.54 | 3 |
| T | 86674 | ANTIBODY; GIARDIA LAMBLIA | 11/1/2001 | $15.05 | 3 |
| T | 86677 | ANTIBODY; HELICOBACTER PYLORI | 11/1/2001 | $14.84 | 3 |
| T | 86682 | ANTIBODY; HELMINTH, NOT ELSEWHER | 11/1/2001 | $13.30 | 3 |
| T | 86683 | HEMOGLOBIN, FECAL | 4/1/2002 | INVALID | N |
| T | 86684 | ANTIBODY; HEMOPHILUS INFLUENZA | 11/1/2001 | $16.21 | 3 |
| T | 86687 | ANTIBODY; HTLV I | 11/1/2001 | $8.58 | 3 |
| T | 86688 | ANTIBODY; HTLV-II | 11/1/2001 | $14.33 | 3 |
| T | 86689 | ANTIBODY; HTLV OR HIV ANTIBODY, | 11/1/2001 | $19.80 | 3 |
| T | 86692 | ANTIBODY; HEPATITIS, DELTA AGENT | 11/1/2001 | $17.55 | 3 |
| T | 86694 | ANTIBODY; HERPES SIMPLEX, NON-SP | 11/1/2001 | $14.72 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 86695 | ANTIBODY; HERPES SIMPLEX, TYPE I | 11/1/2001 | $13.49 | 3 |
| T | 86696 | HERPES SIMPLEX, TYPE 2 | 3/1/2003 | $25.00 | 3 |
| T | 86698 | ANTIBODY; HISTOPLASMA | 11/1/2001 | $12.79 | 3 |
| T | 86701 | ANTIBODY; HIV-1 | 11/1/2001 | $9.09 | 3 |
| T | 86702 | ANTIBODY; HIV-2 | 11/1/2001 | $13.83 | 3 |
| T | 86703 | ANTIBODY; HIV-1 AND HIV-2, SINGL | 11/1/2001 | $14.03 | 3 |
| T | 86704 | HEPATITIS B CORE ANTIBODY (HBCAB | 11/1/2001 | $12.33 | 3 |
| T | 86705 | HEPATITIS B CORE ANTIBODY (HBCAB | 11/1/2001 | $12.04 | 3 |
| T | 86706 | HEPATITIS B SURFACE ANTIBODY (HB | 11/1/2001 | $10.98 | 3 |
| T | 86707 | HEPATITIS BE ANTIBODY (HBEAB) | 11/1/2001 | $11.83 | 3 |
| T | 86708 | HEPATITIS A ANTIBODY (HAAB), TOT | 11/1/2001 | $12.67 | 3 |
| T | 86709 | HEPATITIS A ANTIBODY (HAAB); IGM | 11/1/2001 | $11.51 | 3 |
| T | 86710 | ANTIBODY; INFLUENZA VIRUS | 11/1/2001 | $13.87 | 3 |
| T | 86713 | ANTIBODY; LEGIONELLA | 11/1/2001 | $15.65 | 3 |
| T | 86717 | ANTIBODY; LEISHMANIA | 11/1/2001 | $12.53 | 3 |
| T | 86720 | ANTIBODY; LEPTOSPIRA | 11/1/2001 | $13.49 | 3 |
| T | 86723 | ANTIBODY; LISTERIA MONOCYTOGENES | 11/1/2001 | $13.49 | 3 |
| T | 86727 | ANTIBODY; LYMPHOCYTIC CHORIOMENI | 11/1/2001 | $13.16 | 3 |
| T | 86729 | ANTIBODY; LYMPHOGRANULOMA VENERE | 11/1/2001 | $12.22 | 3 |
| T | 86732 | ANTIBODY; MUCORMYCOSIS | 11/1/2001 | $13.49 | 3 |
| T | 86735 | ANTIBODY; MUMPS | 11/1/2001 | $13.34 | 3 |
| T | 86738 | ANTIBODY; MYCOPLASMA | 11/1/2001 | $13.55 | 3 |
| T | 86741 | ANTIBODY; NEISSERIA MENINGITIS | 11/1/2001 | $13.49 | 3 |
| T | 86744 | ANTIBODY; NOCARDIA | 11/1/2001 | $13.49 | 3 |
| T | 86747 | ANTIBODY; PARVOVIRUS | 11/1/2001 | $15.37 | 3 |
| T | 86750 | ANTIBODY; PLASMODIUM (MALARIA) | 11/1/2001 | $13.49 | 3 |
| T | 86753 | ANTIBODY; PROTOZOA, NOT ELSEWHER | 11/1/2001 | $12.67 | 3 |
| T | 86756 | ANTIBODY; RESPIRATORY SYNCYTIAL | 11/1/2001 | $13.18 | 3 |
| T | 86757 | RICKETTSIA | 11/1/2001 | $19.80 | 3 |
| T | 86759 | ANTIBODY; ROTAVIRUS | 11/1/2001 | $13.49 | 3 |
| T | 86762 | ANTIBODY; RUBELLA | 11/1/2001 | $14.72 | 3 |
| T | 86765 | ANTIBODY; RUBEOLA | 11/1/2001 | $13.18 | 3 |
| T | 86768 | ANTIBODY; SALMONELLA | 11/1/2001 | $13.49 | 3 |
| T | 86771 | ANTIBODY; SHIGELLA | 11/1/2001 | $13.49 | 3 |
| T | 86774 | ANTIBODY; TETANUS | 11/1/2001 | $15.13 | 3 |
| T | 86777 | ANTIBODY; TOXOPLASMA | 11/1/2001 | $14.72 | 3 |
| T | 86778 | ANTIBODY; TOXOPLASMA, IGM | 11/1/2001 | $14.73 | 3 |
| T | 86781 | ANTIBODY; TREPONEMA PALLIDUM, CO | 11/1/2001 | $13.54 | 3 |
| T | 86784 | ANTIBODY; TRICHINELLA | 11/1/2001 | $12.85 | 3 |
| T | 86787 | ANTIBODY; VARICELLA-ZOSTER | 11/1/2001 | $13.18 | 3 |
| T | 86788 | ANTIBODY; WEST NILE VIRUS, IGM | 1/1/2007 | NC | 9 |
| T | 86789 | ANTIBODY; WEST NILE VIRUS | 1/1/2007 | NC | 9 |
| T | 86790 | ANTIBODY; VIRUS, NOT ELSEWHERE S | 11/1/2001 | $13.18 | 3 |
| T | 86793 | ANTIBODY; YERSINIA | 11/1/2001 | $13.49 | 3 |
| T | 86800 | THYROGLOBULIN ANTIBODY | 11/1/2001 | $16.27 | 3 |
| T | 86803 | HEPATITIS C ANTIBODY | 11/1/2001 | $14.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 86804 | HEPATITIS C ANTIBODY; CONFIRMATO | 11/1/2001 | $15.84 | 3 |
| T | 86805 | LYMPHOCYTOTOXICITY ASSAY, VISUAL | 11/1/2001 | $53.47 | 3 |
| T | 86806 | LYMPHOCYTOTOXICITY ASSAY, VISUAL | 11/1/2001 | $48.66 | 3 |
| T | 86807 | SERUM SCREENING FOR CYTOTOXIC PE | 11/1/2001 | $40.47 | 3 |
| T | 86808 | SERUM SCREENING FOR CYTOTOXIC PE | 11/1/2001 | $30.35 | 3 |
| T | 86812 | HLA TYPING; A, B, OR C (EG, A10, | 11/1/2001 | $26.39 | 3 |
| T | 86813 | HLA TYPING; A, B, OR C, MULTIPLE | 11/1/2001 | $59.30 | 3 |
| T | 86816 | HLA TYPING; DR/DQ, SINGLE ANTIGE | 11/1/2001 | $28.48 | 3 |
| T | 86817 | HLA TYPING; DR/DQ, MULTIPLE ANTI | 11/1/2001 | $65.85 | 3 |
| T | 86821 | TISSUE TYPING; LYMPHOCYTE CULTUR | 11/1/2001 | $57.74 | 3 |
| T | 86822 | TISSUE TYPING; LYMPHOCYTE CULTUR | 11/1/2001 | $37.38 | 3 |
| T | 86849 | UNLISTED IMMUNOLOGY PROCEDURE | 10/1/2005 | $0.01 | 5 |
| T | 86850 | ANTIBODY SCREEN, RBC, EACH SERUM | 7/1/1997 | $7.81 | 3 |
| T | 86860 | ANTIBODY ELUTION (RBC), EACH ELU | 2/15/2000 | $32.48 | 3 |
| T | 86870 | ANTIBODY IDENTIFICATION, RBC ANT | 10/1/2001 | $38.52 | 3 |
| T | 86880 | ANTIHUMAN GLOBULIN TEST (COOMBS | 11/1/2001 | $5.49 | 3 |
| T | 86885 | ANTIHUMAN GLOBULIN TEST; INDIREC | 11/1/2001 | $5.85 | 3 |
| T | 86886 | ANTIHUMAN GLOBULIN TEST (COOMBS | 11/1/2001 | $5.29 | 3 |
| T | 86890 | AUTOLOGOUS BLOOD OR COMPONENT, C | 10/1/2001 | $46.51 | 3 |
| T | 86891 | AUTOLOGOUS BLOOD OR COMPONENT, C | 7/1/2006 | NC | 9 |
| T | 86900 | BLOOD TYPING; ABO | 11/1/2001 | $3.05 | 3 |
| T | 86901 | BLOOD TYPING; RH (D) | 10/1/2001 | $6.62 | 3 |
| T | 86903 | BLOOD TYPING; ANTIGEN SCREENING | 11/1/2001 | $9.66 | 3 |
| T | 86904 | BLOOD TYPING; ANTIGEN SCREENING | 11/1/2001 | $9.72 | 3 |
| T | 86905 | BLOOD TYPING; RBC ANTIGENS, OTHE | 11/1/2001 | $3.91 | 3 |
| T | 86906 | BLOOD TYPING; RH PHENOTYPING, CO | 11/1/2001 | $7.93 | 3 |
| T | 86910 | BLOOD TYPING, FOR PATERNITY TEST | 2/22/1994 | NC | 9 |
| T | 86911 | BLOOD TYPING, FOR PATERNITY TEST | 1/1/1994 | NC | 9 |
| T | 86915 | BONE MARROW, MODIFICATION OR TRE | 7/1/2003 | INVALID | N |
| T | 86920 | COMPATIBILITY TEST EACH UNIT; IM | 10/1/2001 | $58.92 | 3 |
| T | 86921 | COMPATIBILITY TEST EAH UNIT; INC | 6/19/2006 | $58.92 | 3 |
| T | 86922 | COMPATIBILITY TEST EACH UNIT; AN | 12/5/2005 | $58.92 | 3 |
| T | 86923 | COMPATIBILITY TEST EACH UNIT; EL | 1/1/2006 | $0.01 | 5 |
| T | 86927 | FRESH FROZEN PLASMA, THAWING, EA | 9/25/2006 | $29.46 | 3 |
| T | 86930 | FROZEN BLOOD, EACH UNIT; FREEZIN | 10/1/2005 | $0.01 | 5 |
| T | 86931 | FROZEN BLOOD, EACH UNIT; THAWING | 10/1/2005 | $0.01 | 5 |
| T | 86932 | FROZEN BLOOD, EACH UNIT; FREEZIN | 10/1/2005 | $0.01 | 5 |
| T | 86940 | HEMOLYSINS AND AGGLUTININS, AUTO | 11/1/2001 | $8.38 | 3 |
| T | 86941 | HEMOLYSINS AND AGGLUTININS, AUTO | 11/1/2001 | $12.38 | 3 |
| T | 86945 | IRRADIATION OF BLOOD PRODUCT, EA | 3/23/2006 | $12.91 | 3 |
| T | 86950 | LEUKOCYTE TRANSFUSION | 11/1/2000 | $0.01 | 5 |
| T | 86960 | VOLUME REDUCTION OF BLOOD OR BLO | 1/1/2006 | NC | 9 |
| T | 86965 | POOLING OF PLATELETS OR OTHER BL | 10/1/2001 | $27.35 | 3 |
| T | 86970 | PRETREATMENT OF RBC'S FOR USE IN | 10/1/2005 | $0.01 | 5 |
| T | 86971 | PRETREATMENT OF RBC'S FOR USE IN | 10/1/2005 | $0.01 | 5 |
| T | 86972 | PRETREATMENT OF RBC'S FOR USE IN | 10/1/2005 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 86975 | PRETREATMENT OF SERUM FOR USE IN | 10/1/2005 | $0.01 | 5 |
| T | 86976 | PRETREATMENT OF SERUM FOR USE IN | 10/1/2005 | $0.01 | 5 |
| T | 86977 | PRETREATMENT OF SERUM FOR USE IN | 10/1/2005 | $0.01 | 5 |
| T | 86978 | PRETREATMENT OF SERUM FOR USE IN | 10/1/2005 | $0.01 | 5 |
| T | 86985 | SPLITTING OF BLOOD OR BLOOD PROD | 10/1/2005 | $0.01 | 5 |
| T | 86999 | UNLISTED TRANSFUSION MEDICINE PR | 10/1/2005 | $0.01 | 5 |
| T | 87001 | ANIMAL INOCULATION SMALL ANIMAL | 11/1/2001 | $13.52 | 3 |
| T | 87003 | ANIMAL INOCULATION SMALL ANIMAL; | 11/1/2001 | $17.21 | 3 |
| T | 87015 | CONCENTRATION (ANY TYPE), FOR IN | 11/1/2001 | $6.83 | 3 |
| T | 87040 | CULTURE, BACTERIAL; BLOOD, WITH | 11/1/2001 | $10.56 | 3 |
| T | 87045 | CULTURE, BACTERIAL; FECES, W/ISO | 11/1/2001 | $9.65 | 3 |
| T | 87046 | CULTURE, BACTERIAL; STOOL, AEROB | 11/1/2001 | $2.41 | 3 |
| T | 87070 | CULTURE, BACTERIAL; ANY OTHER SO | 11/1/2001 | $8.81 | 3 |
| T | 87071 | CULTURE, BACTERIAL; QUANTITATIVE | 11/1/2001 | $4.82 | 3 |
| T | 87073 | CULTURE, BACTERIAL; QUANTITATIVE | 11/1/2001 | $4.82 | 3 |
| T | 87075 | CULTURE, BACTERIAL; ANY SOURCE, | 11/1/2001 | $9.68 | 3 |
| T | 87076 | CULTURE, BACTERIAL; ANAEROBIC IS | 11/1/2001 | $8.26 | 3 |
| T | 87077 | CULTURE, BACTERIAL; AEROBIC ISOL | 11/1/2001 | $8.26 | 3 |
| T | 87081 | CULTURE, PRESUMPTIVE, PATHOGENIC | 11/1/2001 | $6.78 | 3 |
| T | 87084 | CULTURE PRESUMPTIVE PATHOGENIC O | 11/1/2001 | $8.81 | 3 |
| T | 87086 | CULTURE, BACTERIAL; QUANTITATIVE | 11/1/2001 | $8.26 | 3 |
| T | 87088 | CULTURE, BACTERIAL; WITH ISOLATI | 11/1/2001 | $8.27 | 3 |
| T | 87101 | CULTURE, FUNGI (MOLD OR YEAST) I | 11/1/2001 | $7.89 | 3 |
| T | 87102 | CULTURE, FUNGI, ISOLATION; OTHER | 11/1/2001 | $8.59 | 3 |
| T | 87103 | CULTURE, FUNGI, ISOLATION; BLOOD | 11/1/2001 | $9.22 | 3 |
| T | 87106 | CULTURE, FUNGI, DEFINITIVE IDENT | 11/1/2001 | $8.95 | 3 |
| T | 87107 | CULTURE, FUNGI, DEFINITIVE IDENT | 11/1/2001 | $8.95 | 3 |
| T | 87109 | CULTURE MYCOPLASMA ANY SOURCE | 11/1/2001 | $15.73 | 3 |
| T | 87110 | CULTURE, CHLAMYDIA, ANY SOURCE | 11/1/2001 | $20.04 | 3 |
| T | 87116 | CULTURE, TUBERCLE OR OTHER ACID- | 11/1/2001 | $11.05 | 3 |
| T | 87118 | CULTURE, MYCOBACTERIA, DEFINITIV | 11/1/2001 | $11.20 | 3 |
| T | 87140 | CULTURE, TYPING; IMMUNOFLUORESCE | 11/1/2001 | $5.71 | 3 |
| T | 87143 | CULTURE, TYPING; GAS LIQUID CHRO | 11/1/2001 | $12.82 | 3 |
| T | 87147 | CULTURE, TYPING; IMMUNOLOGIC MET | 11/1/2001 | $5.29 | 3 |
| T | 87149 | CULTURE, TYPING; IDENTIFICATION | 11/1/2001 | $20.51 | 3 |
| T | 87152 | CULTURE, TYPING; IDENTIFICATION | 11/1/2001 | $5.35 | 3 |
| T | 87158 | CULTURE TYPING; OTHER METHODS | 11/1/2001 | $5.35 | 3 |
| T | 87164 | DARK FIELD EXAMINATION ANY SOURC | 7/1/1997 | $14.74 | 3 |
| T | 87166 | DARK FIELD EXAMINATION ANY SOURC | 11/1/2001 | $11.55 | 3 |
| T | 87168 | MACROSCOPIC EXAMINATION; ARTHROP | 11/1/2001 | $4.37 | 3 |
| T | 87169 | MACROSCOPIC EXAMINATION; PARASIT | 11/1/2001 | $4.37 | 3 |
| T | 87172 | PINWORM EXAM (EG, CELLOPHANE TAP | 11/1/2001 | $4.37 | 3 |
| T | 87176 | HOMOGENIZATION, TISSUE, FOR CULT | 11/1/2001 | $6.02 | 3 |
| T | 87177 | OVA AND PARASITES DIRECT SMEARS | 11/1/2001 | $9.10 | 3 |
| T | 87181 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $0.86 | 3 |
| T | 87184 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $7.05 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 87185 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $0.86 | 3 |
| T | 87186 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $8.84 | 3 |
| T | 87187 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $10.60 | 3 |
| T | 87188 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $6.79 | 3 |
| T | 87190 | SUSCEPTIBILITY STUDIES, ANTIMICR | 11/1/2001 | $4.95 | 3 |
| T | 87197 | SERUM BACTERICIDAL TITER (SCHLIC | 11/1/2001 | $12.27 | 3 |
| T | 87205 | SMEAR, PRIMARY SOURCE WITH INTER | 11/1/2001 | $4.37 | 3 |
| T | 87206 | SMEAR, PRIMARY SOURCE WITH INTER | 11/1/2001 | $5.49 | 3 |
| T | 87207 | SMEAR, PRIMARY SOURCE WITH INTER | 7/1/1997 | $7.58 | 3 |
| T | 87209 | SMEAR, PRIMARY SOURCE W/INTERPRE | 1/1/2006 | $18.58 | 3 |
| T | 87210 | SMEAR, PRIMARY SOURCE WIHT INTER | 11/1/2001 | $4.37 | 3 |
| T | 87220 | TISSUE EXAMINATION BY KOH SLIDE | 11/1/2001 | $4.37 | 3 |
| T | 87230 | TOXIN FOE ANTITOXIN ASSAY, TISSU | 11/1/2001 | $20.19 | 3 |
| T | 87250 | VIRUS ISOLATION; INOCULATION OF | 11/1/2001 | $19.99 | 3 |
| T | 87252 | VIRUS ISOLATION; TISSUE CULTURE | 11/1/2001 | $24.54 | 3 |
| T | 87253 | VIRUS ISOLATION; TISSUE CULTURE, | 11/1/2001 | $20.65 | 3 |
| T | 87254 | VIRUS ISOLATION; CENTRIFUGE ENHA | 11/1/2001 | $5.00 | 3 |
| T | 87255 | VIRUS ISOLATION; INCLUDING IDENT | 1/1/2003 | $35.01 | 3 |
| T | 87260 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87265 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87267 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2003 | $12.40 | 3 |
| T | 87269 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2004 | $12.40 | 3 |
| T | 87270 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87271 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2003 | $12.40 | 3 |
| T | 87272 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87273 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87274 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87275 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87276 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87277 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87278 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87279 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87280 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87281 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87283 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87285 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87290 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87299 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87300 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $6.13 | 3 |
| T | 87301 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87305 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2007 | NC | 9 |
| T | 87320 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87324 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87327 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87328 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87329 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2004 | $12.40 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 87332 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87335 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87336 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87337 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87338 | HELICOBACTER PYLORI, STOOL | 1/15/2007 | $12.40 | 3 |
| T | 87339 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87340 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $10.56 | 3 |
| T | 87341 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $10.56 | 3 |
| T | 87350 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $11.78 | 3 |
| T | 87380 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $16.79 | 3 |
| T | 87385 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87390 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $18.04 | 3 |
| T | 87391 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $18.04 | 3 |
| T | 87400 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $6.13 | 3 |
| T | 87420 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87425 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87427 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87430 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87449 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $12.27 | 3 |
| T | 87450 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $9.81 | 3 |
| T | 87451 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $9.81 | 3 |
| T | 87470 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87471 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87472 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87475 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87476 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87477 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87480 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87481 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87482 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| T | 87485 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87486 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87487 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87490 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87491 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87492 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.75 | 3 |
| T | 87495 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87496 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87497 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87498 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| T | 87510 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87511 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87512 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| T | 87515 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87516 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87517 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 87520 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87521 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87522 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87525 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87526 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87527 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| T | 87528 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87529 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87530 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87531 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87532 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87533 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| T | 87534 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87535 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87536 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $87.02 | 3 |
| T | 87537 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87538 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87539 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87540 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87541 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87542 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| T | 87550 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87551 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87552 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87555 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87556 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87557 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87560 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87561 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87562 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87580 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87581 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87582 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| T | 87590 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87591 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87592 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $43.81 | 3 |
| T | 87620 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87621 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87622 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| T | 87640 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| T | 87641 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| T | 87650 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $20.51 | 3 |
| T | 87651 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $35.89 | 3 |
| T | 87652 | INFECTIOUS AGENT ANTIGEN DETECTI | 11/1/2001 | $42.69 | 3 |
| T | 87653 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2007 | NC | 9 |
| T | 87660 | INFECTIOUS AGENT DETECTION BY NU | 1/1/2004 | $20.73 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 87797 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $20.51 | 3 |
| T | 87798 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $35.89 | 3 |
| T | 87799 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $0.01 | 5 |
| T | 87800 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $20.51 | 3 |
| T | 87801 | INFECTIOUS AGENT DETECTION BY NU | 11/1/2001 | $35.89 | 3 |
| T | 87802 | INFECTIOUS AGENT ANTIGEN DETECTI | 12/1/2002 | $12.27 | 3 |
| T | 87803 | INFECTIOUS AGENT ANTIGEN DETECTI | 12/1/2002 | $12.27 | 3 |
| T | 87804 | INFECTIOUS AGENT ANTIGEN DETECTI | 12/1/2002 | $12.27 | 3 |
| T | 87807 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2005 | $12.40 | 3 |
| T | 87808 | INFECTIOUS AGENT ANTIGEN DETECTI | 1/1/2007 | NC | 9 |
| T | 87810 | INFECTIOUS AGENT DETECTION BY IM | 11/1/2001 | $12.27 | 3 |
| T | 87850 | INFECTIOUS AGENT DETECTION BY IM | 11/1/2001 | $12.27 | 3 |
| T | 87880 | INFECTIOUS AGENT DETECTION BY IM | 11/1/2001 | $12.27 | 3 |
| T | 87899 | INFECTIOUS AGENT DETECTION BY IM | 8/1/2003 | $12.27 | 3 |
| T | 87900 | INFECTIOUS AGENT DRUG SUSCEPTIBI | 1/1/2006 | $124.02 | 3 |
| T | 87901 | INFECTIOUS AGENT GENOTYPE ANALYS | 11/1/2001 | $263.28 | 3 |
| T | 87902 | INFECTIOUS AGENT GENOTYPE ANALYS | 12/1/2002 | $263.28 | 3 |
| T | 87903 | INFECTIOUS AGENT PHENOTYPE ANALY | 11/1/2001 | $499.71 | 3 |
| T | 87904 | INFECTIOUS AGENT PHENOTYPE ANALY | 11/1/2001 | $24.54 | 3 |
| T | 87999 | UNLISTED MICROBIOLOGY PROCEDURE | 10/1/2001 | $0.01 | 5 |
| T | 88000 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| T | 88005 | NECROPSY (AUTOPSY0 GROSS EXAMINA | 4/1/1982 | NC | 9 |
| T | 88007 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| T | 88012 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| T | 88014 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| T | 88016 | NECROPSY (AUTOPSY) GROSS EXAMINA | 4/1/1982 | NC | 9 |
| T | 88020 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| T | 88025 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| T | 88027 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| T | 88028 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| T | 88029 | NECROPSY (AUTOPSY) GROSS AND MIC | 4/1/1982 | NC | 9 |
| T | 88036 | NECROPSY (AUTOPSY) LIMITED GROSS | 4/1/1982 | NC | 9 |
| T | 88037 | NECROPSY (AUTOPSY) LIMITED GROSS | 4/1/1982 | NC | 9 |
| T | 88040 | NECROPSY (AUTOPSY) FORENSIC EXAM | 4/1/1982 | NC | 9 |
| T | 88045 | NECROPSY (AUTOPSY); CORONER'S CA | 4/1/1982 | NC | 9 |
| T | 88099 | UNLISTED NECROPSY (AUTOPSY) PROC | 4/1/1982 | NC | 9 |
| T | 88104 | CYTOPATHOLOGY, FLUIDS, WASHINGS | 1/1/2007 | $16.35 | 3 |
| T | 88106 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $29.32 | 3 |
| T | 88107 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $31.92 | 3 |
| T | 88108 | CYTOPATHOLOGY FLUIDS WASHINGS OR | 1/1/2007 | $25.69 | 3 |
| T | 88112 | CYTOPATHOLOGY, SELECTIVE CELLULA | 1/1/2007 | $38.41 | 3 |
| T | 88125 | CYTOPATHOLOGY, FERENSIC, (EG, SP | 1/1/1989 | NC | 9 |
| T | 88130 | SEX CHROMATIN IDENTIFICATION BAR | 10/1/2001 | $21.69 | 3 |
| T | 88140 | SEX CHROMATIN IDENTIFICATION; PE | 11/1/2001 | $8.18 | 3 |
| T | 88141 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2007 | $15.31 | 3 |
| T | 88142 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2003 | $20.95 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 88143 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2003 | $20.95 | 3 |
| T | 88144 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 7/1/2003 | INVALID | N |
| T | 88145 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 7/1/2003 | INVALID | N |
| T | 88147 | CYTOPATHOLOGY SMEARS, CERVICAL O | 1/1/2003 | $14.76 | 3 |
| T | 88148 | CYTOPATHOLOGY SMEARS, CERVICAL O | 1/1/2003 | $20.95 | 3 |
| T | 88150 | CYTOPATHOLOGY, SMEARS, CERVICAL | 1/1/2003 | $14.76 | 3 |
| T | 88152 | CYTOPATHOLOGY, SMEARS, CERVICAL | 1/1/2003 | $14.76 | 3 |
| T | 88153 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| T | 88154 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| T | 88155 | CYTOPATHOLOGY SMEARS WITH DEFINI | 1/1/2003 | $6.19 | 3 |
| T | 88160 | CYTOPATHOLOGY, SMEARS, ANY OTHER | 1/1/2007 | $16.61 | 3 |
| T | 88161 | CYTOPATHOLOGY ANY OTHER SOURCE; | 1/1/2007 | $19.46 | 3 |
| T | 88162 | CYTOPATHOLOGY ANY OTHER SOURCE; | 1/1/2007 | $18.42 | 3 |
| T | 88164 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| T | 88165 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| T | 88166 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| T | 88167 | CYTOPATHOLOGY, SLIDES, CERVICAL | 1/1/2003 | $14.76 | 3 |
| T | 88170 | FINE NEEDLE ASPIRATION; SUPERFIC | 4/1/2002 | INVALID | N |
| T | 88171 | FINE NEEDLE ASPIRATION WITH OR W | 4/1/2002 | INVALID | N |
| T | 88172 | CYTOPATHOLOGY, EVALUATION OF FIN | 1/1/2007 | $12.72 | 3 |
| T | 88173 | EVALUATION OF FINE NEEDLE ASPIRA | 1/1/2007 | $40.74 | 3 |
| T | 88174 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2003 | $22.13 | 3 |
| T | 88175 | CYTOPATHOLOGY, CERVICAL OR VAGIN | 1/1/2003 | $30.17 | 3 |
| T | 88180 | FLOW CYTOMETRY; EACH CELL SURFAC | 1/1/2005 | INVALID | N |
| T | 88182 | FLOW CYTOMETRY; CELL CYCLE OR DN | 1/1/2007 | $43.86 | 3 |
| T | 88184 | FLOW CYTOMETRY, CELL SURFACE, CY | 1/1/2007 | $34.77 | 3 |
| T | 88185 | FLOW CYTOMETRY, CELL SURFACE, CY | 1/1/2007 | $17.13 | 3 |
| T | 88187 | FLOW CYTOMETRY, INTERPRETATION; | 1/1/2007 | $47.23 | 3 |
| T | 88188 | FLOW CYTOMETRY, INTERPRETATION; | 1/1/2007 | $58.91 | 3 |
| T | 88189 | FLOW CYTOMETRY, INTERPRETATION; | 1/1/2007 | $77.59 | 3 |
| T | 88199 | UNLISTED CYTOPATHOLOGY PROCEDURE | 12/1/1999 | $0.01 | 5 |
| T | 88230 | TISSUE CULTLURE FOR CHROMOSOME A | 11/1/2001 | $78.53 | 3 |
| T | 88233 | TISSUE CULTURE FOR CHROMOSOME AN | 11/1/2001 | $143.92 | 3 |
| T | 88235 | TISSUE CULTURE FOR CHROMOSOME AN | 11/1/2001 | $82.15 | 3 |
| T | 88237 | TISSUE CULTURE FOR CHROMOSOME AN | 11/1/2001 | $129.17 | 3 |
| T | 88239 | TISSUE CULTURE FOR CHROMOSOME AN | 11/1/2001 | $144.43 | 3 |
| T | 88240 | CRYOPRESERVATION, FREEZING AND S | 11/1/2001 | $10.33 | 3 |
| T | 88241 | THAWING AND EXPANSION OF FROZEN | 11/1/2001 | $10.33 | 3 |
| T | 88245 | CHROMOSOME ANALYSIS FOR BREAKAGE | 11/1/2001 | $152.23 | 3 |
| T | 88248 | CHROMOSOME ANALYSIS FOR BREAKAGE | 11/1/2001 | $177.10 | 3 |
| T | 88249 | CHROMOSOME ANALYSIS FOR BREAKAGE | 11/1/2001 | $177.10 | 3 |
| T | 88261 | CHROMOSOME ANALYSIS; COUNT 5 CEL | 11/1/2001 | $180.74 | 3 |
| T | 88262 | CHROMOSOME ANALYSIS; COUNT 15-20 | 11/1/2001 | $127.47 | 3 |
| T | 88263 | CHROMOSOME ANALYSIS; COUNT 45 CE | 11/1/2001 | $153.68 | 3 |
| T | 88264 | CHROMOSOME ANALYSIS; ANALYZE 20 | 11/1/2001 | $127.47 | 3 |
| T | 88267 | CHROMOSOME ANALYSIS, AMNIOTIC FL | 11/1/2001 | $183.85 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 88269 | CHROMOSOME ANALYSIS IN SITU FOR | 11/1/2001 | $170.09 | 3 |
| T | 88271 | MOLECULAR CYTOGENETICS; DNA PROB | 11/1/2001 | $21.90 | 3 |
| T | 88272 | MOLECULAR CYTOGENETICS; CHROMOSO | 11/1/2001 | $27.38 | 3 |
| T | 88273 | MOLECULAR CYTOGENETICA; CHROMOSO | 11/1/2001 | $32.86 | 3 |
| T | 88274 | MOLECULAR CYTOGENETICS; INTERPHA | 11/1/2001 | $35.59 | 3 |
| T | 88275 | MOLECULAR CYTOGENETICS; INTERPHA | 11/1/2001 | $41.07 | 3 |
| T | 88280 | CHROMOSOME ANALYSIS; ADDITIONAL | 11/1/2001 | $25.66 | 3 |
| T | 88283 | CHROMESOME ANALYSIS; ADDITIONAL | 11/1/2001 | $70.14 | 3 |
| T | 88285 | CHROMOSOME ANALYSIS; ADDITIONAL | 11/1/2001 | $19.43 | 3 |
| T | 88289 | CHROMOSOME ANALYSIS; ADDITIONAL | 11/1/2001 | $22.57 | 3 |
| T | 88291 | CYTOGENETICS AND MOLECULAR CYTOG | 1/1/2007 | $18.42 | 3 |
| T | 88299 | UNLISTED CYTOGENETIC STUDY | 12/1/1999 | $0.01 | 5 |
| T | 88300 | LEVEL I - SURGICAL PATHOLOGY, GR | 1/1/2007 | $11.16 | 3 |
| T | 88302 | LEVEL II - SURGICAL PATHOLOGY, G | 1/1/2007 | $25.69 | 3 |
| T | 88304 | LEVEL III - SURGICAL PATHOLOGY, | 1/1/2007 | $32.44 | 3 |
| T | 88305 | LEVEL IV - SURGICAL PATHOLOGY, G | 1/1/2007 | $42.04 | 3 |
| T | 88307 | LEVEL V - SURGICAL PATHOLOGY, GR | 1/1/2007 | $65.91 | 3 |
| T | 88309 | LEVEL VI - SURGICAL PATHOLOGY, G | 1/1/2007 | $90.57 | 3 |
| T | 88311 | DECALCIFICATION PROCEDURE (LIST | 1/1/2007 | $3.63 | 3 |
| T | 88312 | SPECIAL STAINS (LIST SEPARATELY | 1/1/2007 | $33.74 | 3 |
| T | 88313 | SPECIAL STAINS GROUP II ALL OTHE | 1/1/2007 | $30.10 | 3 |
| T | 88314 | SPECIAL STAINS HISTOCHEMICAL STA | 1/1/2007 | $49.31 | 3 |
| T | 88318 | DETERMINATIVE HISTOCHEMISTRY TO | 1/1/2007 | $38.41 | 3 |
| T | 88319 | DETERMINATIVE HISTOCHEMISTRY OR | 1/1/2007 | $83.56 | 3 |
| T | 88323 | CONSULTATION AND REPORT ON REFER | 1/1/2007 | $31.92 | 3 |
| T | 88331 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $16.35 | 3 |
| T | 88332 | CONSULTATION DURING SURGERY; EAC | 1/1/2007 | $5.97 | 3 |
| T | 88333 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $15.31 | 3 |
| T | 88334 | PATHOLOGY CONSULTATION DURING SU | 1/1/2007 | $9.34 | 3 |
| T | 88342 | IMMUNOCYTOCHEMISTRY (INCLUDING T | 1/1/2007 | $29.06 | 3 |
| T | 88346 | IMMUNOFLUORESCENT STUDY, EACH AN | 1/1/2007 | $31.92 | 3 |
| T | 88347 | IMMUNOFLUORESCENT STUDY, EACH AN | 1/1/2007 | $24.13 | 3 |
| T | 88348 | ELECTRON MICROSCOPY DIAGNOSTIC | 1/1/2007 | $228.62 | 3 |
| T | 88349 | SCANNING | 1/1/2007 | $85.64 | 3 |
| T | 88355 | MORPHOMETRIC ANALYSIS SKELETAL M | 1/1/2007 | $209.16 | 3 |
| T | 88356 | MORPHOMETRIC ANALYSIS NERVE | 1/1/2007 | $77.85 | 3 |
| T | 88358 | MORPHOMETRIC ANALYSIS; TUMOR | 1/1/2007 | $13.23 | 3 |
| T | 88360 | MORPHOMETRIC ANALYSIS, TUMOR IMM | 1/1/2007 | $33.22 | 3 |
| T | 88361 | MORPHOMETRIC ANALYSIS; TUMOR IMM | 1/1/2007 | $67.73 | 3 |
| T | 88362 | NERVE TEASING PREPARATIONS | 1/1/2007 | $99.65 | 3 |
| T | 88365 | IN SITU HYBRIDIZATION (EG, FISH) | 1/1/2007 | $42.56 | 3 |
| T | 88367 | MORPHOMETRIC ANALYSIS, IN SITU H | 1/1/2007 | $92.38 | 3 |
| T | 88368 | MORPHOMETRIC ANALYSIS, IN SITU H | 1/1/2007 | $48.27 | 3 |
| T | 88371 | PROTEIN ANALYSIS OF TISSUE BY WE | 7/1/1997 | $30.44 | 3 |
| T | 88372 | PROTEIN ANALYSIS OF TISSUE BY WE | 7/1/1997 | $31.04 | 3 |
| T | 88384 | ARRAY-BASED EVALUATION OF MULTIP | 11/1/2006 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 88385 | ARRAY-BASED EVALUATION OF MULTIP | 11/1/2006 | NC | 9 |
| T | 88386 | ARRAY-BASED EVALUATION OF MULTIP | 11/1/2006 | NC | 9 |
| T | 88399 | UNLISTED SURGICAL PATHOLOGY PROC | 10/1/2001 | $0.01 | 5 |
| T | 88400 | BILIRUBIN, TOTAL, TRANSCUTANEOUS | 11/1/2001 | $2.57 | 3 |
| T | 89049 | CAFFEINE HALOTHANE CONTRACTURE T | 1/1/2006 | $130.27 | 3 |
| T | 89050 | CELL COUNT, MISCELLANEOUS BODY F | 11/1/2001 | $4.83 | 3 |
| T | 89051 | CELL COUNT MISCELLANEOUS BODY FL | 11/1/2001 | $5.63 | 3 |
| T | 89055 | LEUKOCYTE COUNT, FECAL | 1/1/2003 | $4.41 | 3 |
| T | 89100 | DUODENAL INTUBATION AND ASPIRATI | 1/1/2007 | $64.10 | 3 |
| T | 89105 | DUODENAL INTUBATION AND ASPIRATI | 1/1/2007 | $71.36 | 3 |
| T | 89125 | FAT STAIN, FECES, URINE, OR RESP | 11/1/2001 | $2.95 | 3 |
| T | 89130 | GASTRIC INTUBATION AND ASPIRATIO | 1/1/2007 | $57.61 | 3 |
| T | 89132 | GASTRIC INTUBATION AND ASPIRATIO | 1/1/2007 | $45.41 | 3 |
| T | 89135 | GASTRIC INTUBATION ASPIRATION AN | 1/1/2007 | $70.84 | 3 |
| T | 89136 | GASTRIC INTUBATION ASPIRATIO;N A | 1/1/2007 | $50.86 | 3 |
| T | 89140 | GASTRIC INTUBATION ASPIRATION AN | 1/1/2007 | $79.67 | 3 |
| T | 89141 | GASTRIC INTUBATION ASPIRATION AN | 1/1/2007 | $95.50 | 3 |
| T | 89160 | MEAT FIBERS FECES | 11/1/2001 | $3.77 | 3 |
| T | 89190 | NASAL SMEAR FOR EOSINOPHILS | 11/1/2001 | $4.85 | 3 |
| T | 89220 | SPUTUM, OBTAINING SPECIMEN, AERO | 1/1/2007 | $11.68 | 3 |
| T | 89225 | STARCH GRANULES, FECES | 1/1/2004 | $2.97 | 3 |
| T | 89230 | SWEAT COLLECTION BY IONTOPHORESI | 1/1/2007 | $3.37 | 3 |
| T | 89235 | WATER LOAD TEST | 1/1/2004 | NC | 9 |
| T | 89240 | UNLISTED MISCELLANEOUS PATHOLOGY | 1/1/2004 | NC | 9 |
| T | 89250 | CULTURE AND FERTILIZATION OF OOC | 1/1/1996 | NC | 9 |
| T | 89251 | CULTURE AND FERTILIZATION OF OOC | 1/1/1998 | NC | 9 |
| T | 89252 | ASSISTED OOCYTE FERTILIZATION, M | 4/1/2004 | INVALID | N |
| T | 89253 | ASSISTED EMBRYO HATCHING, MICROT | 1/1/1998 | NC | 9 |
| T | 89254 | OOCYTE IDENTIFICATION FROM FOLLI | 1/1/1998 | NC | 9 |
| T | 89255 | PREPARATION OF EMBRYO FOR TRANSF | 1/1/1998 | NC | 9 |
| T | 89256 | PREPARATION OF CRYOPRESERVED EMB | 4/1/2004 | INVALID | N |
| T | 89257 | SPERM IDENTIFICATION FROM ASPIRA | 1/1/1998 | NC | 9 |
| T | 89258 | CRYOPRESERVATION; EMBRYO | 1/1/1998 | NC | 9 |
| T | 89259 | CRYOPRESERVATION; SPERM | 1/1/1998 | NC | 9 |
| T | 89260 | SPERM ISOLATION; SIMPLE PREP FOR | 1/1/1998 | NC | 9 |
| T | 89261 | SPERM ISOLATION; COMPLEX PREP FO | 1/1/1998 | NC | 9 |
| T | 89264 | SPERM IDENTIFICATION FROM TESTS | 1/1/1999 | NC | 9 |
| T | 89268 | INSEMINATION OF OOCYTES | 1/1/2004 | NC | 9 |
| T | 89272 | EXTENDED CULTURE OF OOCYTE(S)/EM | 1/1/2004 | NC | 9 |
| T | 89280 | ASSISTED OOCYTE FERTILIZATION, M | 1/1/2004 | NC | 9 |
| T | 89281 | ASSISTED OOCYTE FERTILIZATION, M | 1/1/2004 | NC | 9 |
| T | 89290 | BIOPSY, OOCYTE POLAR BODY OR EMB | 1/1/2004 | NC | 9 |
| T | 89291 | BIOPSY, OOCYTE POLAR BODY OR EMB | 1/1/2004 | NC | 9 |
| T | 89300 | SEMEN ANALYSIS PRESENCE AND/OR M | 12/7/1993 | NC | 9 |
| T | 89310 | SEMEN ANALYSIS; MOTILITY AND COU | 4/1/1982 | NC | 9 |
| T | 89320 | SEMEN ANALYSIS; COMPLETE (AVOLUM | 4/1/1982 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 89321 | SEMEN ANALYSIS, PRESENCE AND/OR | 1/1/2001 | NC | 9 |
| T | 89325 | SPERM ANTIBODIES | 4/1/1982 | NC | 9 |
| T | 89329 | SPERM EVALUATION HAMSTER PENETRA | 3/1/1987 | NC | 9 |
| T | 89330 | SPERM EVALUATION CERVICAL MUCUS | 8/1/1986 | NC | 9 |
| T | 89335 | CRYOPRESERVATION, REPORDUCTIVE T | 1/1/2004 | NC | 9 |
| T | 89342 | STORAGE, (PER YEAR); EMBRYO(S) | 1/1/2004 | NC | 9 |
| T | 89343 | STORAGE, (PER YEAR); SPERM/SEMEN | 1/1/2004 | NC | 9 |
| T | 89344 | STORAGE, (PER YEAR); REPRODUCTIV | 1/1/2004 | NC | 9 |
| T | 89346 | STORAGE, (PER YEAR); OOCYTE(S) | 1/1/2004 | NC | 9 |
| T | 89350 | SPUTUM OBTAINING SPECIMEN AEROSO | 4/1/2004 | INVALID | N |
| T | 89352 | THAWING OF CRYOPRESERVED; EMBRYO | 1/1/2004 | NC | 9 |
| T | 89353 | THAWING OF CRYOPRESERVED; SPERM/ | 1/1/2004 | NC | 9 |
| T | 89354 | THAWING OF CRYOPRESERVED; REPROD | 1/1/2004 | NC | 9 |
| T | 89355 | STARCH GRANULES FECES | 4/1/2004 | INVALID | N |
| T | 89356 | THAWING OF CRYOPRESERVED; OOCYTE | 1/1/2004 | NC | 9 |
| T | 89360 | SWEAT COLLECTION BY IONTOPHORESI | 4/1/2004 | INVALID | N |
| T | 89365 | WATER LOAD TEST | 4/1/2004 | INVALID | N |
| T | 89399 | UNLISTED MISCELLANEOUS PATHOLOGY | 4/1/2004 | INVALID | N |
| T | 90709 | IMMUNIZATION, ACTIVE; RUBELLA & | 7/1/2003 | INVALID | N |
| T | 90710 | IMMUNIZATION, ACTIVE; MEASLES, M | 8/1/2005 | NC | 9 |
| T | 90712 | IMMUNIZATION, ACTIVE; POLIOVIRUS | 1/1/2001 | NC | 9 |
| T | 90735 | IMMUNIZATION ACTIVE; ENCEPHALITI | 2/1/2001 | NC | 9 |
| T | 90862 | PHARMACOLOGIC MANAGEMENT; CLOZAR | 10/1/2005 | $18.72 | 3 |
| T | 91000 | ESOPHAGEAL INTUBATION AND COLLEC | 1/1/2007 | $2.34 | 3 |
| T | 91010 | ESOPHAGEAL MOTILITY STUDY | 1/1/2007 | $104.84 | 3 |
| T | 91011 | ESOPHAGEAL MOTILITY STUDY; WITH | 1/1/2007 | $123.78 | 3 |
| T | 91012 | ESOPHAGEAL MOTILITY STUDY; WITH | 1/1/2007 | $138.31 | 3 |
| T | 91020 | ESOPHAGOGASTRIC MANOMETRIC STUDI | 1/1/2007 | $106.40 | 3 |
| T | 91022 | DUODENAL MOTILITY (MANOMETRIC) S | 4/1/2006 | NC | 9 |
| T | 91030 | ESOPHAGUS ACID PERFUSION (BERNST | 1/1/2007 | $55.53 | 3 |
| T | 91032 | ESOPHAGUS ACID REFLUX TEST WITH | 1/1/2005 | INVALID | N |
| T | 91033 | ESOPHAGUS ACID REFLUX TEST PROLO | 1/1/2005 | INVALID | N |
| T | 91034 | ESOPHAGUS, GASTROESOPHAGEAL REFL | 1/1/2007 | $128.97 | 3 |
| T | 91035 | ESOPHAGUS, GASTROESOPHAGEAL REFL | 1/1/2007 | $268.06 | 3 |
| T | 91037 | ESOPHAGEAL FUNCTION TEST, GASTRO | 4/1/2005 | NC | 9 |
| T | 91038 | ESOPHAGEAL FUNCTION TEST, GASTRO | 4/1/2005 | NC | 9 |
| T | 91040 | ESOPHAGEAL BALLOON DISTENSION PR | 4/1/2005 | NC | 9 |
| T | 91052 | GASTRIC ANALYSIS TEST WITH INJEC | 1/1/2007 | $57.09 | 3 |
| T | 91055 | GASTRIC INTUBATION WASHINGS AND | 1/1/2007 | $70.07 | 3 |
| T | 91060 | GASTRIC SALINE LOAD TEST | 1/1/2007 | INVALID | N |
| T | 91065 | BREATH HYDROGEN TEST (EG, FOR DE | 1/1/2007 | $36.59 | 3 |
| T | 91120 | RECTAL SENSATION, TONE, AND COMP | 4/1/2006 | NC | 9 |
| T | 91122 | ANORECTAL MANOMETRY | 1/1/2007 | $119.11 | 3 |
| T | 91299 | UNLISTED DIAGNOSTIC GASTROENTERO | 9/1/1993 | $0.01 | 5 |
| T | 92025 | COMPUTERIZED CORNEAL TOPOGRAPHY, | 1/1/2007 | $8.56 | 3 |
| T | 92060 | SENSORIMOTOR EXAM W/MULTIPLE MEA | 1/1/2007 | $11.68 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 92065 | ORTHOPTIC AND/OR PLEOPTIC TRAINI | 1/1/2007 | $10.12 | 3 |
| T | 92081 | VISUAL FIELD EXAM, UNILATERAL OR | 1/1/2007 | $20.76 | 3 |
| T | 92082 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $27.25 | 3 |
| T | 92083 | VISUAL FIELD EXAM,UNILATERAL OR | 1/1/2007 | $31.66 | 3 |
| T | 92135 | SCANNING COMPUTERIZED OPHTHALMIC | 1/1/2007 | $16.87 | 3 |
| T | 92136 | OPHTHALMIC BIOMETRY BY PARTIAL C | 1/1/2007 | $38.41 | 3 |
| T | 92235 | OPHTHALMOSCOPY WITH MEDICAL DIAG | 1/1/2007 | $59.94 | 3 |
| T | 92240 | INDOCYNAINE-GREEN ANGIOGRAPHY (I | 1/1/2007 | $147.40 | 3 |
| T | 92250 | FUNDUS PHOTOGRAPHY WITH INTERPRE | 1/1/2007 | $35.03 | 3 |
| T | 92265 | OCULOELECTROMYOGRAPHY ONE OR MOR | 1/1/2007 | $31.92 | 3 |
| T | 92270 | ELECTRO-OCULOGRAPHY WITH MEDICAL | 1/1/2007 | $31.66 | 3 |
| T | 92275 | ELECTRORETINOGRAPHY WITH MEDICAL | 1/1/2007 | $39.70 | 3 |
| T | 92283 | COLOR VISION EXAMINATION EXTENDE | 1/1/2007 | $20.24 | 3 |
| T | 92284 | DARK ADAPTATION EXAMINATION WITH | 1/1/2007 | $47.23 | 3 |
| T | 92285 | EXTERNAL OCULAR PHOTOGRAPHY W/IN | 1/1/2007 | $23.61 | 3 |
| T | 92286 | SPECIAL ANTERIOR SEGMENT PHOTOGR | 1/1/2007 | $72.40 | 3 |
| T | 92499 | UNLISTED OPHTHALMOLOGICAL SERVIC | 9/21/1993 | $0.01 | 5 |
| T | 92541 | SPONTANEOUS NYSTAGMUS TEST INCLU | 1/1/2007 | $22.32 | 3 |
| T | 92542 | POSITIONAL NYSTAGMUS TEST MINIMU | 1/1/2007 | $25.95 | 3 |
| T | 92543 | CALORIC VESTIBULAR TEST EACH IRR | 1/1/2007 | $13.75 | 3 |
| T | 92544 | OPTOKINETIC NYSTAGMUS TEST BIDIR | 1/1/2007 | $20.76 | 3 |
| T | 92545 | OSCILLATING TRACKING TEST WITH R | 1/1/2007 | $18.42 | 3 |
| T | 92546 | SINUSOIDAL VERTICAL AXIS ROTATIO | 1/1/2007 | $48.79 | 3 |
| T | 92548 | COMPUTERIZED DYNAMIC POSTUROGRAP | 1/1/2007 | $55.27 | 3 |
| T | 92585 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $51.90 | 3 |
| T | 92587 | EVOKED OTOACOUSTIC EMISSIONS; LI | 1/1/2007 | $36.85 | 3 |
| T | 92588 | EVOKED OTOACOUSTIC EMISSIONS; CO | 1/1/2007 | $41.52 | 3 |
| T | 92599 | UNLISTED OTORHYINOLARYNGOLOGICAL | 7/1/2003 | INVALID | N |
| T | 92978 | INTRAVASCULAR ULTRASOUND DURING | 1/1/2007 | $124.82 | 3 |
| T | 92979 | INTERVASCULAR ULTRASOUND DURING | 1/1/2007 | $63.06 | 3 |
| T | 93024 | ERGONOVINE PROVOCATION TEST | 1/1/2007 | $31.14 | 3 |
| T | 93025 | MICROVOLT T-WAVE ALTERNANS FOR A | 1/1/2007 | $192.81 | 3 |
| T | 93278 | SIGNAL-AVERAGED ELECTROCARDIOGRA | 1/1/2007 | $32.70 | 3 |
| T | 93303 | TRANSTHORACIC ECHOCARDIOGRAPHY F | 1/1/2007 | $106.40 | 3 |
| T | 93304 | TRANSTHORACIC ECHOCARDIOGRAPHY F | 1/1/2007 | $53.98 | 3 |
| T | 93307 | ECHOCARDIOGRAPHY, TRANSTHORACIC, | 1/1/2007 | $106.40 | 3 |
| T | 93308 | ECHOCARDIOGRAPHY, REAL-TIME W/IM | 1/1/2007 | $53.98 | 3 |
| T | 93312 | ECHOCARDIOGRAPHY, TRANSESOPHAGEA | 1/1/2007 | $105.88 | 3 |
| T | 93314 | ECHOCARDIOGRAPHY, REAL TIME WITH | 1/1/2007 | $105.88 | 3 |
| T | 93315 | TRANSESOPHAGEAL ECHOCARDIOGRAPHY | 10/1/2005 | $103.80 | 3 |
| T | 93317 | TRANSESOPHAGEAL ECHOCARDIOGRAPHY | 10/1/2005 | $103.80 | 3 |
| T | 93318 | ECHOCARDIOGRAPHY, TRANSESOPHAGEA | 10/1/2002 | $0.01 | 5 |
| T | 93320 | DOPPLER ECHOCARDIOGRAPHY, PULSED | 1/1/2007 | $47.49 | 3 |
| T | 93321 | DOPPLER ECHOCARDIOGRAPHY, PULSED | 1/1/2007 | $30.88 | 3 |
| T | 93325 | DOPPLER COLOR FLOW VELOCITY MAPP | 1/1/2007 | $80.96 | 3 |
| T | 93350 | ECHOCARDIOGRAPHY, TRANSTHORACIC, | 1/1/2007 | $49.31 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 93501 | RIGHT HEART CATHETERIZATION | 1/1/2007 | $467.10 | 3 |
| T | 93505 | ENDOMYOCARDIAL BIOPSY | 1/1/2007 | $55.79 | 3 |
| T | 93508 | CATHETER PLACEMENT IN CORONARY A | 1/1/2007 | $344.88 | 3 |
| T | 93510 | LEFT HEART CATHETERIZATION RETRO | 1/1/2007 | $1,021.65 | 3 |
| T | 93511 | LEFT HEART CATHETERIZATION RETRO | 1/1/2007 | $994.14 | 3 |
| T | 93514 | LEFT HEART CATHETERIZATION BY LE | 1/1/2007 | $991.55 | 3 |
| T | 93524 | COMBINED TRANSSEPTAL AND RETROGR | 1/1/2007 | $1,299.84 | 3 |
| T | 93526 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $1,335.65 | 3 |
| T | 93527 | COMBINED RT HEART CATH & TRANSSE | 1/1/2007 | $1,299.84 | 3 |
| T | 93528 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $1,299.84 | 3 |
| T | 93529 | COMBINED RIGHT HEART CATH/LEFT H | 1/1/2007 | $1,299.84 | 3 |
| T | 93530 | RIGHT HEART CATHETERIZATION, FOR | 1/1/2007 | $467.10 | 3 |
| T | 93531 | COMBINED RIGHT HEART CATHETERIZA | 1/1/2007 | $1,335.65 | 3 |
| T | 93532 | COMBINED RIGHT HEART CATHETERIZA | 10/1/2005 | $1,295.68 | 3 |
| T | 93533 | COMBINED RIGHT HEART CATHETERIZA | 10/1/2005 | $1,295.68 | 3 |
| T | 93555 | IMAGING SUPERVISION, INTERPRETAT | 1/1/2007 | $172.05 | 3 |
| T | 93556 | IMAGING SUPERVISION, INTERPRETAT | 1/1/2007 | $270.66 | 3 |
| T | 93561 | INDICATOR DILUTION STUDIES SUCH | 1/1/2007 | $15.05 | 3 |
| T | 93562 | INDICATOR DILUTION STUDIES SUCH | 1/1/2007 | $9.34 | 3 |
| T | 93571 | INTRAVASCULAR DOPPLER VELOCITY A | 1/1/2007 | $124.82 | 3 |
| T | 93572 | INTRAVASCULAR DOPPLER VELOCITY A | 10/1/2005 | $62.80 | 3 |
| T | 93600 | BUNDLE OF HIS RECORDING | 1/1/2007 | $54.24 | 3 |
| T | 93602 | INTRA-ATRIAL RECORDING | 1/1/2007 | $30.62 | 3 |
| T | 93603 | RIGHT VENTRICULAR RECORDING | 1/1/2007 | $46.45 | 3 |
| T | 93607 | LEFT VENTRICULAR RECORDING | 4/1/2002 | INVALID | N |
| T | 93609 | INTRAVENTRICULAR AND/OR INTRA-AT | 1/1/2007 | $75.26 | 3 |
| T | 93610 | INTRA-ATRIAL PACING | 1/1/2007 | $37.63 | 3 |
| T | 93612 | INTRAVENTRICULAR PACING | 1/1/2007 | $44.63 | 3 |
| T | 93613 | INTRACARDIAC ELECTROPHYSIOLOGIC | 1/1/2007 | $265.99 | 3 |
| T | 93615 | ESOPHAGEAL RECORDING OF ATRIAL E | 1/1/2007 | $8.82 | 3 |
| T | 93616 | ESOPHAGEAL RECORDING OF ATRIAL E | 10/1/2005 | $8.82 | 3 |
| T | 93618 | INDUCTION OF ARRHYTHMIA BY ELECT | 1/1/2007 | $109.25 | 3 |
| T | 93619 | COMPREHENSIVE ELECTROPHYSIOLOGIC | 1/1/2007 | $212.53 | 3 |
| T | 93620 | COMP ELECTROPHYSIOLOGIC EVAL W/R | 10/1/2002 | $232.25 | 3 |
| T | 93621 | COMP ELECTROPHYSIOLOGIC EVAL W/R | 1/1/1992 | $0.01 | 5 |
| T | 93622 | COMP ELECTROPHYSIOLOGIC EVAL W/R | 1/1/1992 | $0.01 | 5 |
| T | 93623 | PROGRAMMED STIMULATION AND PACIN | 1/1/2002 | $0.01 | 5 |
| T | 93624 | ELECTROPHYSIOLOGIC FOLLOW-UP STU | 1/1/2007 | $55.01 | 3 |
| T | 93631 | INTRA-OPERATIVE CARDIAC PACING A | 10/1/2005 | $175.68 | 3 |
| T | 93640 | ELECTROPHYSIOLOGIC EVALUATION OF | 1/1/2007 | $197.48 | 3 |
| T | 93641 | ELECTROPHYSIOLOGIC EVALUATION OF | 1/1/2007 | $197.48 | 3 |
| T | 93642 | ELECTROPHYSIOLOGIC EVALUATION OF | 1/1/2007 | $197.48 | 3 |
| T | 93660 | EVALUATION OF CARDIOVASCULAR FUN | 1/1/2007 | $44.12 | 3 |
| T | 93662 | INTRACARDIAC ECHOCARDIOGRAPHY DU | 10/1/2002 | $0.01 | 5 |
| T | 93701 | BIOIMPEDANCE, THORACIC, ELECTRIC | 1/1/2007 | $23.87 | 3 |
| T | 93721 | PLETHYSMOGRAPHY TOTAL BODY TRACI | 10/14/2004 | $19.98 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 93724 | ELECTRONIC ANALYSIS OF ANTITACHY | 1/1/2007 | $109.25 | 3 |
| T | 93731 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $13.75 | 3 |
| T | 93732 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $14.27 | 3 |
| T | 93733 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $20.50 | 3 |
| T | 93734 | ELECTRONIC ANALYSIS OF SINGLE-CH | 7/1/1991 | $8.83 | 3 |
| T | 93735 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $12.46 | 3 |
| T | 93736 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $17.91 | 3 |
| T | 93737 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| T | 93738 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| T | 93740 | TEMPERATURE GRADIENT STUDIES | 1/1/2007 | $4.15 | 3 |
| T | 93741 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $18.42 | 3 |
| T | 93742 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $18.42 | 3 |
| T | 93743 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $19.98 | 3 |
| T | 93744 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $18.42 | 3 |
| T | 93745 | INITIAL SET-UP AND PROGRAMMING B | 1/1/2005 | $0.01 | 5 |
| T | 93760 | THERMOGRAM CEPHALIC | 10/1/2000 | $31.35 | 3 |
| T | 93762 | THERMOGRAM; PERIPHERAL | 10/1/2000 | $40.59 | 3 |
| T | 93770 | DETERMINATION OF VENOUS PRESSURE | 1/1/2007 | $1.04 | 3 |
| T | 93799 | UNLISTED CARDIOVASCULAR SERVICE | 3/29/1993 | $0.01 | 5 |
| T | 93875 | NON-INVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $61.50 | 3 |
| T | 93880 | DUPLEX SCAN OF EXTRACRANIAL ARTE | 1/1/2007 | $148.43 | 3 |
| T | 93882 | DUPLEX SCAN OF EXTRACRANIAL ARTE | 1/1/2007 | $93.16 | 3 |
| T | 93886 | TRANSCRANIAL DOPPLER STUDY OF TH | 1/1/2007 | $175.94 | 3 |
| T | 93888 | TRANSCRANIAL DOPPLER STUDY OF TH | 1/1/2007 | $111.33 | 3 |
| T | 93890 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| T | 93892 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| T | 93893 | TRANSCRANIAL DOPPLER STUDY OF TH | 4/1/2005 | NC | 9 |
| T | 93922 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $71.10 | 3 |
| T | 93923 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $106.65 | 3 |
| T | 93924 | NONINVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $126.64 | 3 |
| T | 93925 | DUPLEX SCAN OF LOWER EXTREMITY A | 1/1/2007 | $180.35 | 3 |
| T | 93926 | DUPLEX SCAN OF LOWER EXTREMITY A | 1/1/2007 | $107.95 | 3 |
| T | 93930 | DUPLEX SCAN OF UPPER EXTREMITY A | 1/1/2007 | $144.80 | 3 |
| T | 93931 | DUPLEX SCAN OF UPPER EXTREMITY A | 1/1/2007 | $94.20 | 3 |
| T | 93965 | NON-INVASIVE PHYSIOLOGIC STUDIES | 1/1/2007 | $72.66 | 3 |
| T | 93970 | DUPLEX SCAN OF EXTREMITY VEINS I | 1/1/2007 | $140.91 | 3 |
| T | 93971 | DUPLEX SCAN OF EXTREMITY VEINS I | 1/1/2007 | $96.53 | 3 |
| T | 93975 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $194.11 | 3 |
| T | 93976 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $110.03 | 3 |
| T | 93978 | DUPLEX SCAN OF AORTA, INFERIOR V | 1/1/2007 | $121.19 | 3 |
| T | 93979 | DUPLEX SCAN OF AORTA, INFERIOR V | 1/1/2007 | $85.89 | 3 |
| T | 93980 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $72.40 | 3 |
| T | 93981 | DUPLEX SCAN OF ARTERIAL INFLOW A | 1/1/2007 | $79.15 | 3 |
| T | 93990 | DUPLEX SCAN OF HEMODIALYSIS ACCE | 1/1/2007 | $107.43 | 3 |
| T | 94010 | SPIROMETRY INCLUDING GRAPHIC REC | 1/1/2007 | $16.61 | 3 |
| T | 94060 | BRONCHOSPASM EVALUATION SPIROMET | 1/1/2007 | $26.99 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 94070 | PROLONGED POSTEXPOSURE EVALUATIO | 1/1/2007 | $19.20 | 3 |
| T | 94150 | VITAL CAPACITY TOTAL (SEPARATE P | 1/1/2007 | $11.68 | 3 |
| T | 94200 | MAXIMUM BREATHING CAPACITY MAXIM | 1/1/2007 | $11.16 | 3 |
| T | 94240 | FUNCTIONAL RESIDUAL CAPACITY OR | 1/1/2007 | $16.35 | 3 |
| T | 94250 | EXPIRED GAS COLLECTION QUANTITAT | 1/1/2007 | $16.09 | 3 |
| T | 94260 | THORACIC GAS VOLUME | 1/1/2007 | $15.05 | 3 |
| T | 94350 | DETERMINATION OF MALDISTRIBUTION | 1/1/2007 | $18.68 | 3 |
| T | 94360 | DETERMINATION OF RESISTANCE TO A | 1/1/2007 | $17.65 | 3 |
| T | 94370 | DETERMINATION OF AIRWAY CLOSING | 1/1/2007 | $17.13 | 3 |
| T | 94375 | RESPIRATORY FLOW VOLUME LOOP | 1/1/2007 | $13.75 | 3 |
| T | 94400 | BREATHING RESPONSE TO C02 (C02 R | 1/1/2007 | $20.24 | 3 |
| T | 94450 | BREATHING RESPONSE TO HYPOXIA (H | 1/1/2007 | $19.46 | 3 |
| T | 94620 | PULMONARY STRESS TESTING SIMPLE | 1/1/2007 | $62.28 | 3 |
| T | 94621 | PULMONARY STRESS TESTING; COMPLE | 1/1/2007 | $48.53 | 3 |
| T | 94680 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $48.01 | 3 |
| T | 94681 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $67.21 | 3 |
| T | 94690 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $52.42 | 3 |
| T | 94720 | CARBON MONOXIDE DIFFUSING CAPACI | 1/1/2007 | $25.43 | 3 |
| T | 94725 | MEMBRANE DIFFUSION CAPACITY | 1/1/2007 | $76.81 | 3 |
| T | 94750 | PULMONARY COMPLIANCE STUDY (EG, | 1/1/2007 | $33.99 | 3 |
| T | 94770 | CARBON DIOXIDE EXPIRED GAS DETER | 1/1/2007 | $20.24 | 3 |
| T | 94772 | CIRCADIAN RESPIRATORY PATTERN RE | 10/1/2000 | $127.02 | 3 |
| T | 94799 | UNLISTED PULMONARY SERVICE OR PR | 3/29/1993 | $0.01 | 5 |
| T | 95805 | MULTIPLE SLEEP LATENCY TESTING ( | 1/1/2007 | $440.89 | 3 |
| T | 95806 | SLEEP STUDY, SIMULTANEOUS RECORD | 1/1/2007 | $80.70 | 3 |
| T | 95807 | SLEEP STUDY, 3 OR MORE PARAMETER | 1/1/2007 | $305.43 | 3 |
| T | 95808 | POLYSOMNOGRAPHY; SLEEP STAGING W | 1/1/2007 | $330.34 | 3 |
| T | 95810 | POLYSOMNOGRAPHY; SLEEP STAGING W | 1/1/2007 | $435.44 | 3 |
| T | 95811 | POLYSOMNOGRAPHY; OF SLEEP, ATTEN | 1/1/2007 | $477.48 | 3 |
| T | 95812 | ELECTROENCEPHALOGRAM (EEG) EXTEN | 1/1/2007 | $96.02 | 3 |
| T | 95813 | ELECTROENCEPHALOGRAM (EEG) EXTEN | 1/1/2007 | $115.22 | 3 |
| T | 95816 | ELECTROENCEPHALOGRAM (EEG); INCL | 1/1/2007 | $87.19 | 3 |
| T | 95819 | ELECTROENCEPHALOGRAM (EEG); INCL | 1/1/2007 | $68.25 | 3 |
| T | 95822 | ELECTROENCEPHALOGRAM (EEG); RECO | 1/1/2007 | $111.07 | 3 |
| T | 95827 | ELECTROENCEPHALOGRAM (EEG); ALL | 1/1/2007 | $63.32 | 3 |
| T | 95829 | ELECTROCORTICOGRAM AT SURGERY (S | 1/1/2007 | $747.10 | 3 |
| T | 95858 | TENSILON TEST FOR MYASTHENIA GRA | 1/1/2006 | INVALID | N |
| T | 95860 | ELECTROMYOGRAPHY ONE EXTREMITY A | 1/1/2007 | $26.47 | 3 |
| T | 95861 | ELECTROMYOGRAPHY; TWO EXTREMITIE | 1/1/2007 | $20.50 | 3 |
| T | 95863 | ELECTROMYOGRAPHY; THREE EXTREMIT | 1/1/2007 | $25.95 | 3 |
| T | 95864 | ELECTROMYOGRAPHY; FOUR EXTREMITI | 1/1/2007 | $49.56 | 3 |
| T | 95865 | NEEDLE ELECTROMYOGRAPHY; LARYNX | 1/1/2007 | $18.42 | 3 |
| T | 95866 | NEEDLE ELECTROMYOGRAPHY; HEMIDIA | 1/1/2007 | $5.97 | 3 |
| T | 95867 | NEEDLE ELECTROMYOGRAPHY; CRANIAL | 1/1/2007 | $16.09 | 3 |
| T | 95868 | ELECTROMYOGRAPHY CRANIAL NERVE S | 1/1/2007 | $19.46 | 3 |
| T | 95869 | NEEDLE ELECTROMYOGRAPHY; THORACI | 1/1/2007 | $5.97 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 95870 | NEEDLE ELECTROMYOGRAPHY; OTHER T | 1/1/2007 | $5.97 | 3 |
| T | 95872 | NEEDLE ELECTROMYOGRAPHY USING SI | 1/1/2007 | $16.87 | 3 |
| T | 95873 | ELECTRICAL STIMULATION FOR GUIDA | 1/1/2007 | $5.71 | 3 |
| T | 95874 | NEEDLE ELECTROMYOGRAPHY FOR GUID | 1/1/2007 | $5.71 | 3 |
| T | 95875 | ISCHEMIC LIMB EXERCISE TEST WITH | 1/1/2007 | $26.99 | 3 |
| T | 95900 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $28.55 | 3 |
| T | 95903 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $24.65 | 3 |
| T | 95904 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $24.91 | 3 |
| T | 95920 | INTRAOPERATIVE NEUROPHYSIOLOGY T | 1/1/2007 | $35.81 | 3 |
| T | 95921 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $10.38 | 3 |
| T | 95922 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $10.38 | 3 |
| T | 95923 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $41.00 | 3 |
| T | 95925 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $25.17 | 3 |
| T | 95926 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $25.17 | 3 |
| T | 95927 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $25.17 | 3 |
| T | 95930 | VISUAL EVOKED POTENTIAL (VEP) TE | 1/1/2007 | $54.75 | 3 |
| T | 95933 | ORBICULARIS OCULI (BLINK) REFLEX | 1/1/2007 | $21.80 | 3 |
| T | 95934 | H-REFLEX, AMPLITUDE AND LATENCY | 1/1/2007 | $5.97 | 3 |
| T | 95936 | H-REFLEX, AMPLITUDE AND LATENCY | 1/1/2007 | $5.97 | 3 |
| T | 95937 | NEUROMUSCULAR JUNCTION TESTING ( | 1/1/2007 | $9.34 | 3 |
| T | 95950 | MONITORING FOR IDENTIFICATION AN | 1/1/2007 | $96.79 | 3 |
| T | 95951 | MONITORING FOR IDENTIFICATION OF | 10/1/2004 | $0.01 | 5 |
| T | 95953 | MONITORING FOR LOCALIZATION OF C | 1/1/2007 | $175.94 | 3 |
| T | 95954 | PHARMACOLOGICAL OR PHYSICAL ACTI | 1/1/2007 | $84.34 | 3 |
| T | 95955 | ELECTROENCEPHALOGRAM (EEG) DURIN | 1/1/2007 | $55.53 | 3 |
| T | 95956 | MONITORING FOR LOCALIZATION OF C | 1/1/2007 | $378.35 | 3 |
| T | 95957 | DIGITAL ANALYSIS OF ELECTROENCEP | 1/1/2007 | $47.23 | 3 |
| T | 95958 | WADA ACTIVATION TEST FOR HEMISPH | 1/1/2007 | $48.79 | 3 |
| T | 95961 | FUNCTIONAL CORTICAL MAPPING BY S | 1/1/2007 | $35.81 | 3 |
| T | 95962 | FUNCTIONAL CORTICAL MAPPING BY S | 1/1/2007 | $35.81 | 3 |
| T | 95966 | MAGNETOENCEPHALOGRAPHY (MEG), RE | 1/1/2003 | $0.01 | 5 |
| T | 95967 | MAGNETOENCEPHALOGRAPHY (MEG), RE | 1/1/2003 | $0.01 | 5 |
| T | 96400 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2006 | INVALID | N |
| T | 96401 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2006 | $45.41 | 3 |
| T | 96402 | CHEMOTHERAPY ADMINISTRATION, SUB | 1/1/2006 | $24.39 | 3 |
| T | 96405 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $86.41 | 3 |
| T | 96406 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2007 | $101.46 | 3 |
| T | 96408 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| T | 96409 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2006 | $83.82 | 3 |
| T | 96410 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| T | 96411 | CHEMOTHERAPY ADMINISTRATION; INT | 1/1/2006 | $48.53 | 3 |
| T | 96412 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2006 | INVALID | N |
| T | 96413 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2006 | $118.33 | 3 |
| T | 96414 | CHEMOTHERAPHY ADMINISTRATION, IN | 1/1/2006 | INVALID | N |
| T | 96415 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2006 | $26.73 | 3 |
| T | 96416 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2006 | $127.16 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | 96417 | CHEMOTHERAPY ADMIN, INTRAVENOUS | 1/1/2006 | $57.87 | 3 |
| T | 96420 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $75.51 | 3 |
| T | 96422 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $132.09 | 3 |
| T | 96423 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $53.98 | 3 |
| T | 96425 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $122.74 | 3 |
| T | 96440 | CHEMOTHERAPY ADMINISTRATION INTO | 1/1/2007 | $274.55 | 3 |
| T | 96445 | CHEMOTHERAPY ADMINISTRATION INTO | 1/1/2007 | $269.62 | 3 |
| T | 96450 | CHEMOTHERAPY ADMINISTRATION, INT | 1/1/2007 | $222.65 | 3 |
| T | 96520 | REFILLING AND MAINTENANCE OF PRO | 1/1/2006 | INVALID | N |
| T | 96521 | REFILLING AND MAINTENANCE OF POR | 1/1/2006 | $104.84 | 3 |
| T | 96522 | REFILLING AND MAINT OF IMPLANTAB | 1/1/2006 | $75.77 | 3 |
| T | 96523 | IRRIGATION OF IMPLANTED VENOUS A | 1/1/2006 | $19.20 | 3 |
| T | 96530 | REFILLING AND MAINTENANCE OF IMP | 1/1/2006 | INVALID | N |
| T | 96542 | CHEMOTHERAPY INJECTION, SUBARACH | 1/1/2007 | $131.31 | 3 |
| T | 96545 | PROVISION OF CHEMOTHERAPY AGENT | 1/1/2006 | INVALID | N |
| T | 96549 | UNLISTED CHEMOTHERAPY PROCEDURE | 1/1/1997 | $0.01 | 5 |
| T | 99082 | UNUSUAL TRAVEL (EG, TRANSPORTATI | 3/1/1987 | NC | 9 |
| T | A4641 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2001 | NC | 9 |
| T | A4642 | SUPPLY OF SATUMOMAB PENDETIDE, R | 1/1/2001 | NC | 9 |
| T | A4643 | SUPPLY OF ADDITIONAL HIGH DOSE C | 1/1/2006 | INVALID | N |
| T | A4644 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| T | A4645 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| T | A4646 | SUPPLY OF LOW OSMOLAR CONTRAST M | 1/1/2006 | INVALID | N |
| T | A4647 | SUPPLY OF PARAMAGNETIC CONTRAST | 1/1/2006 | INVALID | N |
| T | A9500 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $150.10 | 3 |
| T | A9502 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $65.00 | 3 |
| T | A9503 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $35.51 | 3 |
| T | A9504 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $343.58 | 3 |
| T | A9505 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $15.05 | 3 |
| T | A9507 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $0.01 | 5 |
| T | A9508 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $0.01 | 5 |
| T | A9510 | SUPPLY OF RADIOPHARMACEUTICAL DI | 6/1/2006 | $26.63 | 3 |
| T | A9511 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | A9512 | TECHNETIUM TC-99M PERTECHNETATE, | 6/1/2006 | $4.00 | 3 |
| T | A9513 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | A9514 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | A9515 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | A9516 | IODINE I-123 SODIUM IODIDE CAPSU | 6/1/2006 | $38.10 | 3 |
| T | A9517 | IODINE I-131 SODIUM IODIDE CAPSU | 6/1/2006 | $12.15 | 3 |
| T | A9518 | SUPPLY OF RADIOPHARMACEUTICAL TH | 4/1/2004 | INVALID | N |
| T | A9519 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | A9520 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | A9521 | TECHNETIUM TC-99M EXAMETAZIME, D | 6/1/2006 | $359.34 | 3 |
| T | A9522 | SUPPLY OF RADIPHARMACEUTICAL DIA | 1/1/2006 | INVALID | N |
| T | A9523 | SUPPLY OF RADIOPHARMACEUTICAL TH | 1/1/2006 | INVALID | N |
| T | A9524 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2003 | $200.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | A9525 | SUPPLY OF LOW OR ISO-OSMOLAR CON | 1/1/2006 | INVALID | N |
| T | A9535 | INJECTION, METHYLENE BLUE, 1 ML | 1/1/2006 | $0.01 | 5 |
| T | A9536 | TECHNETIUM TC-99M DEPREOTIDE, DI | 1/1/2006 | $0.01 | 5 |
| T | A9537 | TECHNETIUM TC-99M MEBROFENIN, DI | 6/1/2006 | $25.11 | 3 |
| T | A9538 | TECHNETIUM TC-99M PYROPHOSPHATE, | 6/1/2006 | $16.00 | 3 |
| T | A9539 | TECHNETIUNM TC-99M PENTETATE, DI | 6/1/2006 | $9.00 | 3 |
| T | A9540 | TECHNETIUM TC-99M MACROAGGREGATE | 6/1/2006 | $9.00 | 3 |
| T | A9541 | TECHNETIUM TC-99M SULFUR COLLOID | 6/1/2006 | $16.80 | 3 |
| T | A9542 | INDIUM IN-111 IBRITUMOMAB TIUXET | 1/1/2006 | $0.01 | 5 |
| T | A9543 | YTTRIUM Y-90 IBRITUMOMAB TIUXETA | 1/1/2006 | $0.01 | 5 |
| T | A9544 | IODINE I-131 TOSITUMOMAB, DIAGNO | 1/1/2006 | $0.01 | 5 |
| T | A9545 | IODINE I-131 TOSITUMOMAB, THERAP | 1/1/2006 | $0.01 | 5 |
| T | A9546 | COBALT CO-57/58, CYANOCOBALAMIN, | 6/1/2006 | $183.61 | 3 |
| T | A9547 | INDIUM IN-111 OXYQUINOLINE, DIAG | 6/1/2006 | $381.25 | 3 |
| T | A9548 | INDIUM IN-111 PENTETATE, DIAGNOS | 6/1/2006 | $673.95 | 3 |
| T | A9549 | TECHNETIUM TC-99M ARCITUMOMAB, D | 1/1/2007 | INVALID | N |
| T | A9550 | TECHNETIUM TC-99M SODIUM GLUCEPT | 6/1/2006 | $99.64 | 3 |
| T | A9551 | TECHNETIUM TC-99M SUCCIMER, DIAG | 6/1/2006 | $95.00 | 3 |
| T | A9552 | FLUORODEOXYGLUCOSE F-18 FDG, DIA | 7/1/2006 | $220.00 | 3 |
| T | A9553 | CHROMIUM CR-51 SODIUMCHROMATE, D | 6/1/2006 | $497.00 | 3 |
| T | A9554 | IODINE I-125 SODIUM IOTHALAMATE, | 1/1/2006 | $0.01 | 5 |
| T | A9555 | RUBIDIUM RB-82, DIAGNOSTIC, PER | 1/1/2006 | $0.01 | 5 |
| T | A9556 | GALLIUM GA-67 CITRATE, DIAGNOSTI | 6/1/2006 | $19.18 | 3 |
| T | A9557 | TECHNETIUM TC-99M BICISATE, DIAG | 6/1/2006 | $292.22 | 3 |
| T | A9558 | XENON XE-133 GAS, DIAGNOSTIC, PE | 6/1/2006 | $21.65 | 3 |
| T | A9559 | COBALT CO-57 CYANOCOBALAMIN, ORA | 6/1/2006 | $58.66 | 3 |
| T | A9560 | TECHNETIUM TC-99M LABELED RED BL | 6/1/2006 | $79.67 | 3 |
| T | A9561 | TECHNETIUM TC-99M OXIDRONATE, DI | 6/1/2006 | $11.97 | 3 |
| T | A9562 | TECHNETIUM TC-99M MERTIATIDE, DI | 6/1/2006 | $166.87 | 3 |
| T | A9563 | SODIUM PHOSPHATE P-32, THERAPEUT | 6/1/2006 | $669.53 | 3 |
| T | A9564 | CHROMIC PHOSPHATE P-32 SUSPENSIO | 1/1/2006 | $0.01 | 5 |
| T | A9565 | INDIUM IN-111 PENTETREOTIDE, DIA | 1/1/2006 | $0.01 | 5 |
| T | A9566 | TECHNETIUM TC-99M FANOLESOMAB, D | 1/1/2006 | $0.01 | 5 |
| T | A9567 | TECHNETIUM TC-99M PENTETATE, DIA | 1/1/2006 | $0.01 | 5 |
| T | A9600 | STRONTIUM SR-89 CHLORIDE, THERAP | 6/1/2006 | $0.01 | 5 |
| T | A9605 | SAMARIUM SM-153 LEXIDRONAMM, THE | 6/1/2006 | $0.01 | 5 |
| T | A9698 | NONRADIOACTIVE CONTRAST IMAGING | 1/1/2006 | $0.01 | 5 |
| T | G0001 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2005 | INVALID | N |
| T | G0026 | FECAL LEUKOCYTE EXAMINATION | 7/1/2003 | INVALID | N |
| T | G0027 | SEMEN ANALYSIS: PRESENCE AND/OR | 7/1/2003 | INVALID | N |
| T | G0030 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0031 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0032 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0033 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0034 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0035 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | G0036 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0037 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0038 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0039 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0040 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0041 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0042 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0043 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0044 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0045 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0046 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0047 | PET MYOCARDIAL PERFUSION IMAGING | 1/1/2006 | INVALID | N |
| T | G0050 | MEASUREMENT OF POST-VOIDING RESI | 7/1/2003 | INVALID | N |
| T | G0103 | PROSTATE CANCER SCREENING; PROST | 11/1/2001 | $18.81 | 3 |
| T | G0106 | COLORECTAL CANCER SCREENING; ALT | 1/1/2007 | $61.50 | 3 |
| T | G0107 | COLORECTAL CANCER SCREENING; FEC | 1/1/2007 | INVALID | N |
| T | G0120 | COLORECTAL CANCER SCREENING; ALT | 1/1/2007 | $61.50 | 3 |
| T | G0122 | COLORECTAL CANCER SCREENING; BAR | 1/1/2007 | $60.46 | 3 |
| T | G0123 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2003 | $20.95 | 3 |
| T | G0124 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2007 | $15.31 | 3 |
| T | G0125 | PET IMAGING REGIONAL OR WHOLE BO | 1/1/2006 | INVALID | N |
| T | G0126 | PET LUNG IMAGING OF SOLITARY PUL | 4/1/2002 | INVALID | N |
| T | G0130 | SINGLE ENERGY X-RAY ABOSRPTIOMET | 1/1/2007 | $22.06 | 3 |
| T | G0131 | COMPUTERIZED TOMOGRAPHY BONE MIN | 7/1/2003 | INVALID | N |
| T | G0132 | COMPUTERIZED TOMOGRAPHY BONE MIN | 7/1/2003 | INVALID | N |
| T | G0141 | SCREENING CYTOPATHOLOGY SMEARS, | 1/1/2007 | $15.31 | 3 |
| T | G0143 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2003 | $20.95 | 3 |
| T | G0144 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2003 | $22.13 | 3 |
| T | G0145 | SCREENING CYTOPATHOLOGY, CERVICA | 1/1/2003 | $30.17 | 3 |
| T | G0147 | SCREENING CYTOPATHOLOGY SMEARS, | 1/1/2003 | $14.76 | 3 |
| T | G0148 | SCREENING CYTOPATHOLOGY SMEARS, | 1/1/2003 | $20.95 | 3 |
| T | G0173 | LINEAR ACCELERATOR BASED STEREOT | 1/1/2001 | NC | 9 |
| T | G0174 | INTENSITY MODULATED RADIATION TH | 4/1/2002 | INVALID | N |
| T | G0188 | FULL LENGTH RADIOGRAPHY OF LOWER | 4/1/2002 | INVALID | N |
| T | G0202 | SCREENING MAMMOGRAPHY, PRODUCING | 1/1/2007 | $67.99 | 3 |
| T | G0204 | DIAGNOSTIC MAMMOGRAPHY, PRODUCIN | 1/1/2007 | $66.95 | 3 |
| T | G0206 | DIAGNOSTIC MAMMOGRAPHY, PRODUCIN | 1/1/2007 | $54.24 | 3 |
| T | G0210 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| T | G0211 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| T | G0212 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| T | G0213 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| T | G0214 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| T | G0215 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| T | G0216 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| T | G0217 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| T | G0218 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | G0219 | PET IMAGING WHOLE BODY; MELANOMA | 6/20/2005 | NC | 9 |
| T | G0220 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| T | G0221 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| T | G0222 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| T | G0223 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |
| T | G0224 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |
| T | G0225 | PET IMAGING WHOLE BODY OR REGION | 1/1/2006 | INVALID | N |
| T | G0226 | PET IMAGING WHOLE BODY; DIAGNOSI | 1/1/2006 | INVALID | N |
| T | G0227 | PET IMAGING WHOLE BODY; INITIAL | 1/1/2006 | INVALID | N |
| T | G0228 | PET IMAGING WHOLE BODY; RESTAGIN | 1/1/2006 | INVALID | N |
| T | G0229 | PET IMAGING; METABOLIC BRAIN IMA | 1/1/2006 | INVALID | N |
| T | G0230 | PET IMAGING; METABOLIC ASSESS FO | 1/1/2006 | INVALID | N |
| T | G0231 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| T | G0232 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| T | G0233 | PET, WHOLE BODY, FOR RECURRENCE | 1/1/2006 | INVALID | N |
| T | G0234 | PET, REGIONAL OR WHOLE BODY, FOR | 1/1/2006 | INVALID | N |
| T | G0235 | PET IMAGING, ANY SITE, NOT OTHER | 4/1/2005 | NC | 9 |
| T | G0236 | DIGITIZATION OF FILM RADIOGRAPHI | 4/1/2004 | INVALID | N |
| T | G0242 | MULTI-SOURCE PHOTON STEREOTACTIC | 1/1/2006 | INVALID | N |
| T | G0243 | MULTI-SOURCE PHOTON STEREOTACTIC | 1/1/2007 | INVALID | N |
| T | G0252 | PET IMAGING, FULL AND PARTIAL-RI | 1/1/2003 | NC | 9 |
| T | G0253 | PET IMAGING FOR BREAST CANCER, F | 1/1/2006 | INVALID | N |
| T | G0254 | PET IMAGING FOR BREAST CANCER, F | 1/1/2006 | INVALID | N |
| T | G0296 | PET IMAGING, FULL AND PARTIAL RI | 1/1/2006 | INVALID | N |
| T | G0306 | COMPLETE CBC, AUTOMATED (HGB, HC | 1/1/2004 | $8.04 | 3 |
| T | G0307 | COMPLETE (CBC), AUTOMATED (HGB, | 1/1/2004 | $6.69 | 3 |
| T | G0328 | COLORECTALCANCER SCREENING; FECA | 1/1/2004 | $13.39 | 3 |
| T | G0330 | PET IMAGING INITIAL DIAGNOSIS CE | 4/1/2005 | INVALID | N |
| T | G0331 | PET IMAGING RESTAGING OVARIAN | 4/1/2005 | INVALID | N |
| T | G0332 | PREADMINISTRATION-RELATED SERVIC | 1/1/2006 | $0.01 | 5 |
| T | G0336 | PET IMAGING, BRAIN IMAGING FOR T | 4/1/2005 | INVALID | N |
| T | G0365 | VESSEL MAPPING OF VESSELS FOR HE | 1/1/2007 | $107.43 | 3 |
| T | G0378 | HOSPITAL OBSERVATION SERVICE, PE | 1/1/2006 | $0.01 | 3 |
| T | G0379 | DIRECT ADMISSION OF PATIENT FOR | 1/1/2006 | $0.01 | 3 |
| T | P2028 | CEPHALIN FLOCULATION, BLOOD | 9/1/1985 | NC | 9 |
| T | P2029 | CONGO RED, BLOOD | 9/1/1985 | NC | 9 |
| T | P2031 | HAIR ANALYSIS (EXCLUDING ARSENIC | 10/1/1984 | NC | 9 |
| T | P2033 | THYMOL TURBIDITY, BLOOD | 10/1/1984 | NC | 9 |
| T | P2038 | MUCOPROTEIN, BLOOD (SEROMUCOID) | 1/1/2004 | NC | 9 |
| T | P3000 | SCREENING PAPANICOLAOU SMEAR, CE | 1/1/2003 | $14.76 | 3 |
| T | P3001 | SCREENING PAPANICOLAOU SMEAR, CE | 1/1/2007 | $15.31 | 3 |
| T | P7001 | CULTURE, BACTERIAL, URINE; QUANT | 2/15/2000 | NC | 9 |
| T | P9010 | BLOOD (WHOLE) FOR TRANSFUSION PE | 1/1/1988 | NC | 9 |
| T | P9011 | BLOOD (SPLIT UNIT) SPECIFY AMOUN | 1/1/1988 | NC | 9 |
| T | P9012 | CRYOPRECIPITATE EACH UNIT | 1/1/1988 | NC | 9 |
| T | P9016 | RED BLOOD CELLS, LEUKOCYTES REDU | 1/1/1988 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | P9017 | FRESH FROZEN PLASMA (SINGLE DONO | 1/1/1988 | NC | 9 |
| T | P9019 | PLATELETS, EACH UNIT | 10/1/2004 | NC | 9 |
| T | P9020 | PLATELET RICH PLASMA EACH UNIT | 1/1/1988 | NC | 9 |
| T | P9021 | RED BLOOD CELLS EACH UNIT | 1/1/1988 | NC | 9 |
| T | P9022 | RED BLOOD CELLS, WASHED, EACH UN | 1/1/1988 | NC | 9 |
| T | P9045 | INFUSION, ALBUMIN (HUMAN), 5%, 2 | 1/1/2002 | NC | 9 |
| T | P9046 | INFUSION, ALBUMIN (HUMAN), 25%, | 1/1/2002 | NC | 9 |
| T | P9047 | INFUSION, ALBUMIN (HUMAN), 25%, | 1/1/2002 | NC | 9 |
| T | P9048 | INFUSION, PLASMA PROTEIN FRACTIO | 1/1/2002 | NC | 9 |
| T | P9050 | GRANULOCYTES, PHERESIS, EACH UNI | 1/1/2002 | NC | 9 |
| T | P9615 | CATHETERIZATION FOR COLLECTION O | 11/1/2001 | $2.22 | 3 |
| T | Q0035 | CARDIOKYMOGRAPHY | 1/1/2004 | NC | 9 |
| T | Q0083 | CHEMOTHERAPY ADMINISTRATION BY O | 1/1/1999 | $30.00 | 3 |
| T | Q0084 | CHEMOTHERAPY ADMINISTRATION BY I | 1/1/1999 | $30.00 | 3 |
| T | Q0085 | CHEMOTHERAPY ADMINISTRATION BY B | 1/1/1999 | $30.00 | 3 |
| T | Q0091 | SCREENING PAP SMEAR; OBTAINING, | 1/1/1992 | NC | 9 |
| T | Q0092 | SET-UP PORTABLE X-RAY EQUIPMENT | 1/1/1992 | NC | 9 |
| T | Q0111 | WET MOUNTS, INCLUDING PREPARATIO | 4/1/2001 | $3.55 | 3 |
| T | Q0112 | ALL POTASSIUM HYDROXIDE (KOH) PR | 4/1/2001 | $3.55 | 3 |
| T | Q0113 | PINWORM EXAMINATIONS | 4/1/2001 | $4.49 | 3 |
| T | Q0114 | FERN TEST | 8/16/1993 | NC | 9 |
| T | Q0115 | POST-COITAL DIRECT, QUALITATIVE | 8/16/1993 | NC | 9 |
| T | Q3001 | RADIOELEMENTS FOR BRACHYTHERAPY, | 1/1/2001 | NC | 9 |
| T | Q3002 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3003 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3004 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3005 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3006 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3007 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3008 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3009 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3010 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q3011 | SUPPLY OF RADIOPHARMACEUTICAL DI | 1/1/2006 | INVALID | N |
| T | Q9941 | INJECTION, IMMUNE GLOBULIN, INTR | 1/1/2006 | INVALID | N |
| T | Q9945 | LOW OSMOLAR CONTRAST MATERIAL, U | 7/18/2005 | $0.41 | 3 |
| T | Q9946 | LOW OSMOLAR CONTRAST MATERIAL, 1 | 7/18/2005 | $0.41 | 3 |
| T | Q9947 | LOW OSMOLAR CONTRAST MATERIAL, 2 | 7/18/2005 | $0.48 | 3 |
| T | Q9948 | LOW OSMOLAR CONTRAST MATERIAL, 2 | 7/18/2005 | $0.48 | 3 |
| T | Q9949 | LOW OSMOLAR CONTRAST MATERIAL, 3 | 7/18/2005 | $0.53 | 3 |
| T | Q9950 | LOW OSMOLAR CONTRAST MATERIAL, 3 | 7/18/2005 | $0.60 | 3 |
| T | Q9951 | LOW OSMOLAR CONTRAST MATERIAL, 4 | 7/18/2005 | $0.60 | 3 |
| T | Q9952 | INJECTION, GADOLINIUM-BASED MAGN | 10/1/2005 | NC | 9 |
| T | Q9953 | INJECTION, IRON-BASED MAGNETIC R | 4/1/2005 | $0.01 | 5 |
| T | Q9954 | ORAL MAGNETIC RESONANCE CONTRAST | 4/1/2005 | $0.01 | 5 |
| T | Q9955 | INJECTION, PERFLEXANE LIPID MICR | 4/1/2005 | $0.01 | 5 |
| T | Q9956 | INJECTION, OCTAFLUOROPROPANCE MI | 4/1/2005 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| T | Q9957 | INJECTION, PERFLUTREN LIPID MICR | 4/1/2005 | $0.01 | 5 |
| T | R0070 | TRANSPORT OF PORT X-RAY EQUIP/PE | 8/1/2006 | $81.70 | 3 |
| T | R0075 | TRANSPORT OF PORT X-RAY EQUIP/PE | 8/1/2006 | $0.01 | 5 |
| T | R0076 | TRANSPORTATION OF PORTABLE EKG T | 10/1/2000 | $50.22 | 3 |
| T | S0820 | COMPUTERIZED CORNEAL TOPOGRAPHY, | 8/1/2004 | $32.55 | 3 |
| T | S0830 | ULTRASOUND PACYMETRY TO DETERMIN | 1/1/2005 | INVALID | N |
| T | S3620 | NEWBORN METABOLIC SCREENING PANE | 7/1/2004 | $27.00 | 3 |
| T | S3700 | BLADDER TUMOR-ASSOCIATED ANTIGEN | 4/1/2002 | INVALID | N |
| T | S3708 | GASTROINTESTINAL FAT ABSORPTION | 1/1/2001 | NC | 9 |
| T | S8055 | ULTRASOUND GUIDANCE FOR MULTIFET | 4/1/2002 | $0.01 | 5 |
| U | 90804 | INDIVIDUAL THERAPY, INSIGHT, 20- | 7/1/2006 | $63.82 | 1 |
| U | 90805 | INDIVIDUAL THERAPY, INSIGHT, WIT | 7/1/2006 | $63.82 | 1 |
| U | 90806 | INDIVIDUAL THERAPY, INSIGHT, 45- | 7/1/2006 | $95.67 | 1 |
| U | 90807 | INDIVIDUAL THERAPY, INSIGHT, WIT | 7/1/2006 | $95.67 | 1 |
| U | 90808 | INDIVIDUAL THERAPY,INSIGHT, 75-8 | 7/1/2006 | $159.54 | 1 |
| U | 90809 | INDIVIDUAL THERAPY, INSIGHT, WIT | 7/1/2006 | $159.54 | 1 |
| U | 90810 | INDIVIDUAL THERAPY, INTERACTIVE, | 7/1/2006 | $63.82 | 1 |
| U | 90811 | INDIVIDUAL THERAPY, INTERACTIVE, | 7/1/2006 | $63.82 | 1 |
| U | 90812 | INDIVIDUAL THERAPY, INTERACTIVE, | 7/1/2006 | $95.67 | 1 |
| U | 90813 | INDIVIDUAL THERAPY, INTERACTIVE, | 7/1/2006 | $95.67 | 1 |
| U | 90814 | INDIVIDUAL THERAPY, INTERACTIVE, | 7/1/2006 | $159.54 | 1 |
| U | 90815 | INDIVIDUAL THERAPY, INTERACTIVE, | 7/1/2006 | $159.54 | 1 |
| U | 90846 | FAMILY THERAPY WITHOUT PATIENT P | 4/1/2006 | $86.47 | 3 |
| U | 90847 | FAMILY THERAPY, WITH PATIENT PRE | 7/1/2006 | $129.70 | 1 |
| U | 90853 | GROUP THERAPY | 7/1/2006 | $43.25 | 1 |
| U | 90857 | INTERACTIVE GROUP THERAPY | 7/1/2006 | $43.25 | 1 |
| U | 90862 | PHARMACOLOGIC MGMNT, INCL PRESCR | 7/1/2006 | $63.82 | 1 |
| U | 90882 | ENVIRONMENTAL INTERVENTION WITH | 4/1/2006 | $86.47 | 3 |
| U | 90887 | INTERPRETATION OR EXPLANATION OF | 4/1/2006 | $86.47 | 3 |
| U | G0176 | ACTIVITY THERAPY RELATED TO THE | 4/1/2006 | $16.47 | 3 |
| U | G0177 | TRAINING AND EDUCATIONAL SERVICE | 4/1/2006 | $45.83 | 3 |
| U | H0004 | BEHAVIORAL HEALTH COUNSELING AND | 7/1/2006 | $21.62 | 1 |
| U | H0031 | MENTAL HEALTH ASSESSMENT, BY NON | 7/1/2006 | $86.47 | 1 |
| U | H0034 | MEDICATION TRAINING AND SUPPORT, | 4/1/2006 | $21.62 | 3 |
| U | H0036 | COMMUNITY PSYCHIATRIC SUPPORTIVE | 7/1/2006 | $7.65 | 1 |
| U | H2010 | COMPREHENSIVE MEDICATION SERVICE | 4/1/2006 | $22.78 | 3 |
| U | H2013 | PSYCHIATRIC HEALTH FACILITY SERV | 4/1/2006 | $335.97 | 3 |
| U | H2018 | PSYCHOSOCIAL REHABILITATION SERV | 7/1/2006 | $95.71 | 1 |
| U | H2020 | THERAPEUTIC BEHAVIORAL SERVICES, | 4/1/2006 | $64.38 | 3 |
| U | T1013 | SIGN LANGUAGE OR ORAL INTERPRETI | 4/1/2006 | $7.83 | 3 |
| W | 10040 | ACNE SURGERY (EG MARSUPIALIZATIO | 1/1/2007 | $58.13 | 3 |
| W | 10060 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2007 | $64.88 | 3 |
| W | 10061 | INCISION AND DRAINAGE OF ABSCESS | 1/1/2007 | $116.52 | 3 |
| W | 10080 | INCISION AND DRAINAGE OF PILONID | 1/1/2007 | $113.92 | 3 |
| W | 10081 | INCISION AND DRAINAGE OF PILONID | 1/1/2007 | $175.68 | 3 |
| W | 10120 | INCISION AND REMOVAL OF FOREIGN | 1/1/2007 | $91.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 10121 | INCISION AND REMOVAL OF FOREIGN | 1/1/2007 | $169.71 | 3 |
| W | 10140 | INCISION AND DRAINAGE OF HEMATOM | 1/1/2007 | $90.83 | 3 |
| W | 10160 | PUNCTURE ASPIRATION OF ABSCESS H | 1/1/2007 | $76.29 | 3 |
| W | 10180 | INCISION AND DRAINAGE, COMPLEX, | 1/1/2007 | $145.06 | 3 |
| W | 11000 | DEBRIDEMENT OF EXTENSIVE ECZEMAT | 1/1/2007 | $32.44 | 3 |
| W | 11001 | DEBRIDEMENT OF EXTENSIVE ECZEMAT | 1/1/2007 | $14.79 | 3 |
| W | 11010 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $60.93 | 3 |
| W | 11011 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $71.93 | 3 |
| W | 11012 | DEBRIDEMENT INCLUDING REMOVAL OF | 1/1/2007 | $104.68 | 3 |
| W | 11040 | DEBRIDEMENT; SKIN, PARTIAL THICK | 1/1/2007 | $28.03 | 3 |
| W | 11044 | DEBRIDEMENT; SKIN SUBCUTANEOUS T | 1/1/2007 | $206.30 | 3 |
| W | 11100 | BIOPSY OF SKIN SUBCUTANEOUS TISS | 1/1/2007 | $54.24 | 3 |
| W | 11101 | BIOPSY OF SKIN SUBCUTANEOUS TISS | 1/1/2007 | $19.72 | 3 |
| W | 11200 | REMOVAL OF SKIN TAGS, MULTIPLE F | 4/1/1982 | NC | 9 |
| W | 11201 | EXCISION SKIN TAGS MULTIPLE FIBR | 4/1/1982 | NC | 9 |
| W | 11400 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $75.51 | 3 |
| W | 11401 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $87.97 | 3 |
| W | 11402 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $100.43 | 3 |
| W | 11403 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $113.14 | 3 |
| W | 11404 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $129.23 | 3 |
| W | 11420 | EXCISION, BENIGN LESION INCL MAR | 1/1/2007 | $73.70 | 3 |
| W | 11421 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $93.94 | 3 |
| W | 11422 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $105.10 | 3 |
| W | 11423 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $124.56 | 3 |
| W | 11424 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $142.47 | 3 |
| W | 11426 | EXCISION, BENIGN LESION INC MARG | 1/1/2007 | $199.82 | 3 |
| W | 11440 | EXCISION, OTHER BENIGN LESION IN | 1/1/2007 | $86.93 | 3 |
| W | 11441 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $102.50 | 3 |
| W | 11442 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $114.96 | 3 |
| W | 11443 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $140.91 | 3 |
| W | 11444 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $179.57 | 3 |
| W | 11446 | EXCISION OTHER BENIGN LESION FAC | 1/1/2007 | $232.51 | 3 |
| W | 11720 | DEBRIDEMENT OF NAIL(S) BY ANY ME | 1/1/2007 | $18.17 | 3 |
| W | 11721 | DEBRIDEMENT OF NAIL(S) BY ANY ME | 1/1/2007 | $27.25 | 3 |
| W | 11730 | AVULSION OF NAIL PLATE PARTIAL O | 1/1/2007 | $59.69 | 3 |
| W | 11732 | AVULSION OF NAIL PLATE PARTIAL O | 1/1/2007 | $28.03 | 3 |
| W | 11740 | EVACUATION OF SUBUNGUAL HEMATOMA | 1/1/2007 | $24.91 | 3 |
| W | 11750 | EXCISION OF NAIL AND NAIL MATRIX | 1/1/2007 | $110.29 | 3 |
| W | 11760 | REPAIR OF NAIL BED | 1/1/2007 | $114.70 | 3 |
| W | 11900 | INJECTION INTRALESIONAL UP TO AN | 1/1/2007 | $30.88 | 3 |
| W | 11901 | INJECTION INTRALESIONAL; MORE TH | 1/1/2007 | $38.67 | 3 |
| W | 11920 | TATTOOING INTRADERMAL INTRODUCTI | 4/1/1982 | NC | 9 |
| W | 11921 | TATTOOING INTRADERMAL INTRO OF I | 4/1/1982 | NC | 9 |
| W | 11922 | TATTOOING INTRADERMAL INTRODUCTI | 4/1/1982 | NC | 9 |
| W | 11950 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| W | 11951 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 11952 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| W | 11954 | SUBCUTANEOUS INJECTION OF "FILLI | 4/1/1982 | NC | 9 |
| W | 11971 | REMOVAL OF TISSUE EXPANDER(S) WI | 1/1/2007 | $300.76 | 3 |
| W | 12001 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $99.65 | 3 |
| W | 12002 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $105.88 | 3 |
| W | 12004 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $124.04 | 3 |
| W | 12005 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $154.66 | 3 |
| W | 12006 | SIM REP OF SUPERFICIAL WOUNDS SC | 1/1/2007 | $192.29 | 3 |
| W | 12007 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $217.72 | 3 |
| W | 12011 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $105.36 | 3 |
| W | 12013 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $115.48 | 3 |
| W | 12014 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $136.76 | 3 |
| W | 12015 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $171.79 | 3 |
| W | 12016 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $203.71 | 3 |
| W | 12017 | SIM REP OF SUPERFICIAL WOUNDS OF | 1/1/2007 | $183.47 | 3 |
| W | 12018 | SIMPLE REPAIR OF SUPERFICIAL WOU | 1/1/2007 | $43.70 | 3 |
| W | 12020 | TREATMENT OF SUPERFICIAL WOUND D | 1/1/2007 | $175.16 | 3 |
| W | 12021 | TREATMENT OF SUPERFICIAL WOUND D | 1/1/2007 | $101.46 | 3 |
| W | 12031 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $119.63 | 3 |
| W | 12032 | LAYER CLOSURE OF WOUNDS OF SCALP | 1/1/2007 | $168.16 | 3 |
| W | 12041 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $132.60 | 3 |
| W | 12042 | LAYER CLOSURE OF WOUNDS OF NECK | 1/1/2007 | $160.37 | 3 |
| W | 12051 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $154.40 | 3 |
| W | 12052 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $160.11 | 3 |
| W | 12053 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $171.27 | 3 |
| W | 12054 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $189.95 | 3 |
| W | 12055 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $242.89 | 3 |
| W | 12056 | LAYER CLSOURE OF WOUNDS OF FACE | 1/1/2007 | $326.71 | 3 |
| W | 12057 | LAYER CLOSURE OF WOUNDS OF FACE | 1/1/2007 | $65.71 | 3 |
| W | 13100 | REPAIR COMPLEX TRUNK 1.1 CM TO 2 | 1/1/2007 | $193.07 | 3 |
| W | 15000 | SURGICAL PREP OF RECIP SITE BY E | 1/1/2007 | INVALID | N |
| W | 15001 | SURGICAL PREP OF RECIP SITE BY E | 1/1/2007 | INVALID | N |
| W | 15100 | SPLIT-THICKNESS AUTOGRAFT, TRUNK | 1/1/2007 | $119.06 | 3 |
| W | 15101 | SPLIT GRAFT, TRUNK, ARMS, LEGS; | 1/1/2007 | $29.58 | 3 |
| W | 15120 | SPLIT-THICKNESS AUTOGRAFT, FACE, | 1/1/2007 | $112.78 | 3 |
| W | 15121 | SPLIT GRAFT, FACE, SCALP, EYELID | 1/1/2007 | $39.13 | 3 |
| W | 15342 | APPLICATION OF BILAMINATE SKIN S | 1/1/2006 | INVALID | N |
| W | 15343 | APPLICATION OF BILAMINATE SKIN S | 1/1/2006 | INVALID | N |
| W | 15350 | HOMOGRAFT SKIN | 1/1/2006 | INVALID | N |
| W | 15732 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $196.65 | 3 |
| W | 15734 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $199.97 | 3 |
| W | 15736 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $191.93 | 3 |
| W | 15738 | MUSCLE, MYOCUTANEOUS, OR FASCIOC | 1/1/2007 | $200.13 | 3 |
| W | 15750 | FLAP; NEUROVASCULAR PEDICLE | 1/1/2007 | $113.56 | 3 |
| W | 15756 | FREE MUSCLE FLAP WITH OR WITHOUT | 1/1/2007 | $313.53 | 3 |
| W | 15757 | FREE SKIN FLAP WITH MICROVASCULA | 1/1/2007 | $315.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 15758 | FREE FASCIAL FLAP WITH MICROVASC | 1/1/2007 | $316.12 | 3 |
| W | 15770 | GRAFT; DERMA-FAT-FASCIA | 1/1/2007 | $79.20 | 3 |
| W | 15775 | PUNCH GRAFT FOR HAIR TRANSPLANT | 4/1/1982 | NC | 9 |
| W | 15776 | PUNCH GRAFT FOR HAIR TRANSPLANT; | 4/1/1982 | NC | 9 |
| W | 15780 | DERMABRASION; TOTAL FACE (EG, FO | 4/1/1982 | NC | 9 |
| W | 15781 | DERMABRASION; SEGMENTAL, FACE (E | 10/1/1984 | NC | 9 |
| W | 15782 | DERMABRASION; REGIONAL, OTHER TH | 10/1/1984 | NC | 9 |
| W | 15783 | DERMABRASION; SUPERFICIAL, ANY S | 3/1/1987 | NC | 9 |
| W | 15786 | ABRASION SINGLE LESION (EG KERAT | 4/1/1982 | NC | 9 |
| W | 15787 | ABRASION; EACH ADDITIONAL FOUR L | 4/1/1982 | NC | 9 |
| W | 15810 | SALABRASION 20 SQ CM OR LESS | 1/1/2006 | INVALID | N |
| W | 15811 | SALABRASION; OVER 20 SQ CM | 1/1/2006 | INVALID | N |
| W | 15819 | CERVICOPLASTY | 10/1/1984 | NC | 9 |
| W | 15820 | BLEPHAROPLASTY LOWER EYELIDS | 4/1/1982 | NC | 9 |
| W | 15821 | BLEPHAROPLASTY LOWER EYELID; WIT | 4/1/1982 | NC | 9 |
| W | 15824 | RHYTIDECTOMY FOREHEAD | 4/1/1982 | NC | 9 |
| W | 15825 | RHYTIDECTOMY; NECK WITH PLATYSMA | 10/1/1984 | NC | 9 |
| W | 15826 | RHYTIDECTOMY; GLABELLAR FROWN LI | 4/1/1982 | NC | 9 |
| W | 15828 | RHYTIDECTOMY; CHEEK CHIN AND NEC | 4/1/1982 | NC | 9 |
| W | 15829 | RHYTIDECTOMY; SUPERFICIAL MUSCUL | 10/1/1984 | NC | 9 |
| W | 15831 | EXCISION EXCESSIVE SKIN AND SUBC | 1/1/2007 | INVALID | N |
| W | 15832 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| W | 15833 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| W | 15834 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| W | 15835 | EXCISION EXCESSIVE SKIN AND SUBC | 4/1/1982 | NC | 9 |
| W | 15837 | EXCISION ECESSIVE SKIN AND SUBCU | 4/1/1982 | NC | 9 |
| W | 15838 | EXCISION EXCESSIVE SKIN AND SUBC | 10/1/1984 | NC | 9 |
| W | 15839 | EXCISION EXCESSIVE SKIN AND SUBC | 10/1/1984 | NC | 9 |
| W | 15841 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $211.75 | 3 |
| W | 15842 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $341.55 | 3 |
| W | 15845 | GRAFT FOR FACIAL NERVE PARALYSIS | 1/1/2007 | $117.76 | 3 |
| W | 15876 | SUCTION ASSISTED LIPECTOMY; HEAD | 3/1/1987 | NC | 9 |
| W | 15877 | SUCTION ASSISTED LIPECTOMY; TRUN | 3/1/1987 | NC | 9 |
| W | 15878 | SUCTION ASSISTED LIPECTOMY; UPPE | 3/1/1987 | NC | 9 |
| W | 15879 | SUCTION ASSISTED LIPECTOMY; LOWE | 3/1/1987 | NC | 9 |
| W | 15922 | EXCISION, COCCYGEAL PRESSURE ULC | 1/1/2007 | $96.22 | 3 |
| W | 15935 | EXCISION SACRAL PRESSURE ULCER W | 1/1/2007 | $140.08 | 3 |
| W | 15936 | EXCISION, SACRAL PRESSURE ULCER, | 1/1/2007 | $116.05 | 3 |
| W | 15937 | EXCISION SACRAL PRESSURE ULCER W | 1/1/2007 | $135.46 | 3 |
| W | 15946 | EXCISION, ISCHIAL PRESSURE ULCER | 1/1/2007 | $202.98 | 3 |
| W | 15950 | EXCISION TROCHANTERIC DECUBITUS | 1/1/2007 | $72.66 | 3 |
| W | 15951 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $104.16 | 3 |
| W | 15952 | EXCISION, TROCHANTERIC PRESSURE | 1/1/2007 | $107.64 | 3 |
| W | 15953 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $121.55 | 3 |
| W | 15956 | EXCISION, TROCHANTERIC PRESSURE | 1/1/2007 | $147.97 | 3 |
| W | 15958 | EXCISION TROCHANTERIC PRESSURE U | 1/1/2007 | $149.37 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 15999 | UNLISTED PROCEDURE, EXCISION PRE | 9/1/1985 | $0.01 | 5 |
| W | 16000 | INITIAL TREATMENT FIRST DEGREE B | 1/1/2007 | $47.49 | 3 |
| W | 16010 | DRESSINGS AND/OR DEBRIDEMENT INI | 1/1/2006 | INVALID | N |
| W | 16015 | DRESSINGS AND/OR DEBRIDEMENT INI | 1/1/2006 | INVALID | N |
| W | 16020 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $56.31 | 3 |
| W | 16025 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $98.87 | 3 |
| W | 16030 | DRESSINGS AND/OR DEBRIDEMENT OF | 1/1/2007 | $116.78 | 3 |
| W | 16036 | ESCHAROTOMY; EACH ADDITIONAL INC | 1/1/2007 | $59.69 | 3 |
| W | 17000 | DESTRUCTION BY ANY METHOD, INCLU | 1/1/2007 | $41.52 | 3 |
| W | 17003 | DESTRUCTION BY ANY METHOD, INCLU | 1/1/2007 | $7.01 | 3 |
| W | 17110 | DESTRUCTION, OF FLAT WARTS, MOLL | 1/1/2007 | $60.20 | 3 |
| W | 17250 | CHEMICAL CAUTERIZATION OF GRANUL | 1/1/2007 | $46.19 | 3 |
| W | 17340 | CRYOTHERAPY (CO2 SLUSH, LIQUID N | 1/1/2007 | $30.62 | 3 |
| W | 17380 | ELECTROLYSIS EPILATION EACH 1/2 | 8/1/1989 | NC | 9 |
| W | 17999 | UNLISTED PROCEDURE SKIN MUCOUS M | 4/1/1982 | $0.01 | 5 |
| W | 19000 | PUNCTURE ASPIRATION OF CYST OF B | 1/1/2007 | $75.51 | 3 |
| W | 19001 | PUNCTURE ASPIRATION OF CYST OF B | 1/1/2007 | $18.42 | 3 |
| W | 19030 | INJECTION PROCEDURE ONLY FOR MAM | 1/1/2007 | $116.52 | 3 |
| W | 19100 | BIOPSY OF BREAST; PERCUTANEOUS, | 1/1/2007 | $91.34 | 3 |
| W | 19140 | MASTECTOMY FOR GYNECOMASTIA | 1/1/2007 | INVALID | N |
| W | 19160 | MASTECTOMY, PARTIAL (EG, LUMPECT | 1/1/2007 | INVALID | N |
| W | 19162 | MASTECTOMY PARTIAL (QUADRECTOMY | 1/1/2007 | INVALID | N |
| W | 19180 | MASTECTOMY SIMPLE COMPLETE UNILA | 1/1/2007 | INVALID | N |
| W | 19182 | MASTECTOMY SUBCUTANEOUS | 1/1/2007 | INVALID | N |
| W | 19200 | MASTECTOMY RADICAL INCLUDING BRE | 1/1/2007 | INVALID | N |
| W | 19220 | MASTECTOMY RADICAL INCLUDING BRE | 1/1/2007 | INVALID | N |
| W | 19240 | MASTECTOMY,MODIFIED RAD,INCL AXI | 1/1/2007 | INVALID | N |
| W | 19260 | EXCISION OF CHEST WALL TUMOR INC | 1/1/2007 | $149.11 | 3 |
| W | 19271 | EXCISION OF CHEST WALL TUMOR INV | 1/1/2007 | $204.95 | 3 |
| W | 19272 | EXCISION OF CHEST WALL TUMOR INV | 1/1/2007 | $225.71 | 3 |
| W | 19316 | MASTOPEXY | 8/1/2003 | NC | 9 |
| W | 19318 | REDUCTION MAMMAPLASTY | 1/1/2007 | $154.25 | 3 |
| W | 19357 | BREAST RECONSTRUCTION, IMMEDIATE | 1/1/2007 | $190.58 | 3 |
| W | 19361 | BREAST RECONSTRUCTION W/LATISSIM | 1/1/2007 | $179.68 | 3 |
| W | 19364 | BREAST RECONSTRUCTION WITH FREE | 1/1/2007 | $367.30 | 3 |
| W | 19366 | BREAST RECONSTRUCTION WITH OTHER | 1/1/2007 | $187.36 | 3 |
| W | 19367 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $241.13 | 3 |
| W | 19368 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $295.10 | 3 |
| W | 19369 | BREAST RECONSTRUCTION WITH TRANS | 1/1/2007 | $273.67 | 3 |
| W | 19370 | OPEN PERIPROSTHETIC CAPSULOTOMY, | 10/1/1984 | NC | 9 |
| W | 19396 | PREPARATION OF MOULAGE FOR CUSTO | 10/1/1984 | NC | 9 |
| W | 19499 | UNLISTED PROCEDURE BREAST | 2/1/1994 | $0.01 | 5 |
| W | 20000 | INCISION OF SOFT TISSUE ABSCESS | 1/1/2007 | $131.57 | 3 |
| W | 20005 | INCISION OF SOFT TISSUE ABSCESS | 1/1/2007 | $191.25 | 3 |
| W | 20100 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $81.69 | 3 |
| W | 20101 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $49.82 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 20102 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $61.76 | 3 |
| W | 20103 | EXPLORATION OF PENETRATING WOUND | 1/1/2007 | $75.98 | 3 |
| W | 20200 | BIOPSY MUSCLE SUPERFICIAL | 1/1/2007 | $122.74 | 3 |
| W | 20205 | BIOPSY MUSCLE; DEEP | 1/1/2007 | $170.75 | 3 |
| W | 20206 | BIOPSY MUSCLE PERCUTANEOUS NEEDL | 1/1/2007 | $196.70 | 3 |
| W | 20220 | BIOPSY BONE TROCAR OR NEEDLE SUP | 1/1/2007 | $153.62 | 3 |
| W | 20245 | BIOPSY, BONE, OPEN; DEEP (EG, HU | 1/1/2007 | $81.33 | 3 |
| W | 20251 | BIOPSY VERTEBRAL BODY OPEN; LUMB | 1/1/2007 | $56.42 | 3 |
| W | 20500 | INJECTION OF SINUS TRACT THERAPE | 1/1/2007 | $93.94 | 3 |
| W | 20501 | INJECTION OF SINUS TRACT; DIAGNO | 1/1/2007 | $96.53 | 3 |
| W | 20520 | REMOVAL OF FOREIGN BODY IN MUSCL | 1/1/2007 | $129.23 | 3 |
| W | 20525 | REMOVAL OF FOREIGN BODY IN MUSCL | 1/1/2007 | $341.76 | 3 |
| W | 20550 | INJECTION(S); TENDON SHEATH, LIG | 1/1/2007 | $40.22 | 3 |
| W | 20600 | ARTHROCENTESIS, ASPIRATION AND/O | 1/1/2007 | $36.07 | 3 |
| W | 20605 | ARTHROCENTESIS, ASPIRATION AND/O | 1/1/2007 | $39.44 | 3 |
| W | 20610 | ARTHROCENTESIS ASPIRATION AND/OR | 1/1/2007 | $48.01 | 3 |
| W | 20615 | ASPIRATION AND INJECTION FOR TRE | 1/1/2007 | $155.70 | 3 |
| W | 20650 | INSERTION OF WIRE OR PIN WITH AP | 1/1/2007 | $25.48 | 3 |
| W | 20660 | APPLICATION OF CRANIAL TONGS, CA | 1/1/2007 | $159.85 | 3 |
| W | 20680 | REMOVAL OF INPLANT; DEEP (EG BUR | 1/1/2007 | $65.96 | 3 |
| W | 20802 | REPLANTATION ARM (INCLUDES SURGI | 1/1/2007 | $342.07 | 3 |
| W | 20805 | REPLANTATION FOREARM (INCLUDES R | 1/1/2007 | $462.84 | 3 |
| W | 20808 | REPLANTATION HAND (INCLUDES HAND | 1/1/2007 | $574.84 | 3 |
| W | 20816 | REPLANTATION DIGIT EXCL THUMB (I | 1/1/2007 | $380.48 | 3 |
| W | 20822 | REPLANTATION DIGIT EXCLUDING THU | 1/1/2007 | $334.34 | 3 |
| W | 20824 | REPLANTATION THUMB (INCLUDES CAR | 1/1/2007 | $374.46 | 3 |
| W | 20827 | REPLANTATION THUMB (INCLUDES DIS | 1/1/2007 | $345.71 | 3 |
| W | 20838 | REPLANTATION FOOT COMPLETE AMPUT | 1/1/2007 | $336.36 | 3 |
| W | 20900 | BONE GRAFT ANY DONOR AREA MINOR | 1/1/2007 | $77.64 | 3 |
| W | 20902 | BONE GRAFT ANY DONOR AREA; MAJOR | 1/1/2007 | $81.69 | 3 |
| W | 20920 | FASCIA LATA GRAFT BY STRIPPER | 1/1/2007 | $52.89 | 3 |
| W | 20922 | FASCIA LATA GRAFT; BY INCISION A | 1/1/2007 | $77.12 | 3 |
| W | 20924 | TENDON GRAFT FROM A DISTANCE (EG | 1/1/2007 | $69.60 | 3 |
| W | 20931 | ALLOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $16.45 | 3 |
| W | 20936 | AUTOGRAFT FOR SPINE SURGERY ONLY | 10/25/2004 | $24.70 | 3 |
| W | 20937 | AUTOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $24.81 | 3 |
| W | 20938 | AUTOGRAFT FOR SPINE SURGERY ONLY | 1/1/2007 | $27.09 | 3 |
| W | 20950 | MONITORING OF INTERSTITIAL FLUID | 1/1/2007 | $215.90 | 3 |
| W | 20955 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $354.89 | 3 |
| W | 20956 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $368.65 | 3 |
| W | 20957 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $345.81 | 3 |
| W | 20962 | BONE GRAFT WITH MICROVASCULAR AN | 1/1/2007 | $375.55 | 3 |
| W | 20969 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $391.07 | 3 |
| W | 20970 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $389.51 | 3 |
| W | 20972 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $357.44 | 3 |
| W | 20973 | FREE OSTEOCUTANEOUS FLAP WITH MI | 1/1/2007 | $396.83 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 20974 | ELECTRICAL STIMULATION TO AID BO | 1/1/2007 | $36.85 | 3 |
| W | 20975 | ELECTRICAL STIMULATION TO AID BO | 1/1/2007 | $25.02 | 3 |
| W | 20979 | LOW INTENSITY ULTRASOUND STIMULA | 1/1/2007 | $39.18 | 3 |
| W | 20999 | UNLISTED PROCEDURE MUSCULOSKELET | 2/1/1994 | $0.01 | 5 |
| W | 21034 | EXCISION OF MALIGNANT TUMOR OF M | 1/1/2007 | $175.58 | 3 |
| W | 21041 | EXCISION OF BENIGN CYST OR TUMOR | 7/1/2003 | INVALID | N |
| W | 21044 | EXCISION OF MALIGNANT TUMOR OF M | 1/1/2007 | $116.05 | 3 |
| W | 21045 | EXCESION OF MALIGNANT TUMOR OF M | 1/1/2007 | $156.01 | 3 |
| W | 21060 | MENISCECTOMY, PARTIAL OR COMPLET | 1/1/2007 | $104.94 | 3 |
| W | 21116 | INJECTION PROCEDURE FOR TEMPOROM | 1/1/2007 | $135.20 | 3 |
| W | 21137 | REDUCTION FOREHEAD; CONTOURING O | 1/1/2007 | $97.99 | 3 |
| W | 21138 | REDUCTION FOREHEAD; CONTOURING A | 1/1/2007 | $121.81 | 3 |
| W | 21139 | REDUCTION FOREHEAD; CONTOURING A | 1/1/2007 | $139.40 | 3 |
| W | 21141 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $177.03 | 3 |
| W | 21142 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $176.56 | 3 |
| W | 21143 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $184.56 | 3 |
| W | 21145 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $190.42 | 3 |
| W | 21146 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $203.14 | 3 |
| W | 21147 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $200.70 | 3 |
| W | 21150 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $231.27 | 3 |
| W | 21151 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $278.08 | 3 |
| W | 21154 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $291.37 | 3 |
| W | 21155 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $337.35 | 3 |
| W | 21159 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $413.44 | 3 |
| W | 21160 | RECONSTRUCTION MIDFACE, LEFORT I | 1/1/2007 | $405.08 | 3 |
| W | 21172 | RECONSTRUCTION SUPERIOR-LATERAL | 1/1/2007 | $234.07 | 3 |
| W | 21175 | RECONSTRUCTION, BIFRONTAL, SUPER | 1/1/2007 | $289.55 | 3 |
| W | 21179 | RECONSTRUCTION, ENTIRE OR MAJORI | 1/1/2007 | $203.40 | 3 |
| W | 21180 | RECONSTRUCTION, ENTIRE OR MAJORI | 1/1/2007 | $228.62 | 3 |
| W | 21182 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $280.83 | 3 |
| W | 21183 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $314.62 | 3 |
| W | 21184 | RECONSTRUCTION OF ORBITAL WALLS, | 1/1/2007 | $341.92 | 3 |
| W | 21188 | RECONSTRUCTION MIDFACE, OSTEOTOM | 1/1/2007 | $223.38 | 3 |
| W | 21193 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $166.29 | 3 |
| W | 21194 | RECONSTRUCTION FO MANDIBULAR RAM | 1/1/2007 | $184.87 | 3 |
| W | 21195 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $174.95 | 3 |
| W | 21196 | RECONSTRUCTION OF MANDIBULAR RAM | 1/1/2007 | $190.42 | 3 |
| W | 21198 | OSTEOTOMY, MANDIBLE, SEGMENTAL | 1/1/2007 | $146.98 | 3 |
| W | 21199 | OSTEOTOMY, MANDIBLE, SEGMENTAL; | 1/1/2007 | $137.59 | 3 |
| W | 21206 | OSTEOPLASTY (EG FOR PROGNATHISM | 1/1/2007 | $145.74 | 3 |
| W | 21209 | OSTEOPLASTY, FACIAL BONES; REDUC | 1/1/2007 | $95.70 | 3 |
| W | 21240 | ARTHROPLASTY, TEMPOROMANDIBULAR | 1/1/2007 | $147.14 | 3 |
| W | 21242 | ARTHROPLASTY, TEMPOROMANDIBULAR | 1/1/2007 | $136.24 | 3 |
| W | 21243 | ARTHROPLASTY, TEMPOROMANDIBULAR | 1/1/2007 | $215.33 | 3 |
| W | 21244 | RECONSTRUCTION OF MANDIBLE, EXTR | 1/1/2007 | $130.89 | 3 |
| W | 21245 | RECONSTRUCTION OF MANDIBLE OR MA | 1/1/2007 | $142.57 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 21246 | RECONSTRUCTION OF MANDIBLE OR MA | 1/1/2007 | $118.70 | 3 |
| W | 21247 | RECONSTRUCTION OF MANDIBULAR CON | 1/1/2007 | $222.29 | 3 |
| W | 21255 | RECONSTRUCTION OF ZYGOMATIC ARCH | 1/1/2007 | $182.95 | 3 |
| W | 21256 | RECONSTRUCTION OF ORBIT W/OSTEOT | 1/1/2007 | $153.21 | 3 |
| W | 21260 | ORBITAL HYPERTELORISM CORRECTION | 1/1/2007 | $157.10 | 3 |
| W | 21261 | PERIORBITAL OSTEOTOMIES FOR ORBI | 1/1/2007 | $307.04 | 3 |
| W | 21263 | PERIORBITAL OSTEOTOMIES FOR ORBI | 1/1/2007 | $260.17 | 3 |
| W | 21267 | ORBITAL REPOSITIONING PERIORBITA | 1/1/2007 | $209.68 | 3 |
| W | 21268 | ORBITAL REPOSITIONING PERIORBITA | 1/1/2007 | $250.99 | 3 |
| W | 21270 | MALAR AUGMENTATION, PROSTHETIC M | 1/1/2007 | $117.35 | 3 |
| W | 21275 | SECONDARY REVISION FOR ORBITOCRA | 1/1/2007 | $107.38 | 3 |
| W | 21300 | CLOSED TREATMENT OF SKULL FRACTU | 1/1/2007 | INVALID | N |
| W | 21339 | OPEN TREATMENT OF ANASOETHMOID F | 1/1/2007 | $119.27 | 3 |
| W | 21343 | OPEN TREATMENT OF DEPRESSED FRON | 1/1/2007 | $155.23 | 3 |
| W | 21347 | OPEN TREATMENT OF NASOMAXILLARY | 1/1/2007 | $157.67 | 3 |
| W | 21360 | OPEN TREATMENT OF DEPRESSED MALA | 1/1/2007 | $68.20 | 3 |
| W | 21365 | OPEN TREATMENT OF COMPLICATED FR | 1/1/2007 | $142.62 | 3 |
| W | 21385 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $95.60 | 3 |
| W | 21386 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $89.32 | 3 |
| W | 21387 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $102.50 | 3 |
| W | 21390 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $97.73 | 3 |
| W | 21395 | OPEN TREATMENT OF ORBITAL FLOOR | 1/1/2007 | $120.15 | 3 |
| W | 21401 | TREATMENT OF FRACTURE OF ORBIT E | 1/1/2007 | $60.46 | 3 |
| W | 21406 | OPEN TREATMENT OF FRACTURE OF OR | 1/1/2007 | $71.78 | 3 |
| W | 21407 | OPEN TREATMENT OF FRACTURE OF OR | 1/1/2007 | $85.22 | 3 |
| W | 21422 | OPEN TREATMENT OF PALATAL OR MAX | 1/1/2007 | $90.31 | 3 |
| W | 21423 | OPEN TREATMENT OF PALATAL OR MAX | 1/1/2007 | $108.99 | 3 |
| W | 21431 | CLOSED TREATMENT OF CRANIOFACIAL | 1/1/2007 | $89.74 | 3 |
| W | 21432 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $90.77 | 3 |
| W | 21433 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $231.16 | 3 |
| W | 21435 | OPEN TREATMENT OF CRANIOFACIAL S | 1/1/2007 | $165.77 | 3 |
| W | 21445 | OPEN TREATMENT OF MANDIBULAR OR | 1/1/2007 | $82.68 | 3 |
| W | 21454 | OPEN TREATMENT OF MANDIBULAR FRA | 1/1/2007 | $70.32 | 3 |
| W | 21461 | OPEN TREATMENT OF MANDIBULAR FRA | 1/1/2007 | $112.93 | 3 |
| W | 21462 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $123.52 | 3 |
| W | 21465 | OPEN TREATMENT OF MANDIBULAR CON | 1/1/2007 | $120.56 | 3 |
| W | 21470 | OPEN TREATMENT OF COMPLICATED MA | 1/1/2007 | $152.22 | 3 |
| W | 21490 | OPEN TREATMENT OF TEMPOROMANDIBU | 1/1/2007 | $122.07 | 3 |
| W | 21493 | CLOSED TREATMENT OF HYOID FRACTU | 1/1/2006 | INVALID | N |
| W | 21494 | TREATMENT OF CLOSED OR OPEN HYOI | 1/1/2006 | INVALID | N |
| W | 21495 | OPEN TREATMENT OF HYOID FRACTURE | 1/1/2007 | $75.67 | 3 |
| W | 21502 | INCISION AND DRAINAGE DEEP ABSCE | 1/1/2007 | $71.26 | 3 |
| W | 21557 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $79.51 | 3 |
| W | 21600 | EXCISION OF RIB PARTIAL | 1/1/2007 | $70.69 | 3 |
| W | 21610 | COSTOTRANSVERSECTOMY (SEPARATE P | 1/1/2007 | $137.79 | 3 |
| W | 21615 | EXCISION FIRST AND/OR CERVICAL R | 1/1/2007 | $93.47 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 21616 | EXCISION FIRST AND/OR CERVICAL R | 1/1/2007 | $113.76 | 3 |
| W | 21620 | OSTECTOMY OF STERNUM PARTIAL | 1/1/2007 | $71.36 | 3 |
| W | 21627 | STERNAL DEBRIDEMENT | 1/1/2007 | $73.39 | 3 |
| W | 21630 | RADICAL RESECTION OF STERNUM | 1/1/2007 | $165.04 | 3 |
| W | 21632 | RADICAL RESECTION OF STERNUM; WI | 1/1/2007 | $165.56 | 3 |
| W | 21700 | DIVISION OF SCALENUS ANTICUS WIT | 1/1/2007 | $56.83 | 3 |
| W | 21705 | DIVISION OF SCALENUS ANTICUS; WI | 1/1/2007 | $86.26 | 3 |
| W | 21720 | DIVISION OF STENOCLEIDOMASTOID F | 1/1/2007 | $46.97 | 3 |
| W | 21725 | DIVISION OF STERNOCLEIDOMASTOID | 1/1/2007 | $70.84 | 3 |
| W | 21740 | RECONSTRUCTIVE REPAIR OF PECTUS | 1/1/2007 | $142.10 | 3 |
| W | 21750 | CLOSURE OF MEDIAN STERNOTOMY SEP | 1/1/2007 | $96.07 | 3 |
| W | 21810 | TREATMENT OF RIB FRACTURE REQUIR | 1/1/2007 | $66.28 | 3 |
| W | 21820 | CLOSED TREATMENT OF STERNUM FRAC | 1/1/2007 | $84.86 | 3 |
| W | 21825 | OPEN TREATMENT OF STERNUM FRACTU | 1/1/2007 | $77.43 | 3 |
| W | 21920 | BIOPSY, SOFT TISSUE OF BACK OR F | 1/1/2007 | $142.47 | 3 |
| W | 22100 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $100.69 | 3 |
| W | 22101 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $101.05 | 3 |
| W | 22102 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $102.76 | 3 |
| W | 22103 | PART EXCISION OF POST VERT COMPO | 1/1/2007 | $20.71 | 3 |
| W | 22110 | PART EXCISION OF VERT BODY, CERV | 1/1/2007 | $128.04 | 3 |
| W | 22112 | PART EXCISION OF VERT BODY, THOR | 1/1/2007 | $127.73 | 3 |
| W | 22114 | PART EXCISION OF VERT BODY, LUMB | 1/1/2007 | $128.19 | 3 |
| W | 22116 | PART EXCISION OF VERT BODY, EA A | 1/1/2007 | $20.71 | 3 |
| W | 22210 | OSTEOTOMY OF SPINE, POSTERIOR OR | 1/1/2007 | $231.84 | 3 |
| W | 22214 | OSTEOTOMY OF SPINE, POSTERIOR AP | 1/1/2007 | $192.96 | 3 |
| W | 22216 | OSTEOTOMY OF SPINE, POSTERIOR OR | 1/1/2007 | $54.29 | 3 |
| W | 22220 | OSTEOTOMY OF SPINE, INCLUDING DI | 1/1/2007 | $207.91 | 3 |
| W | 22222 | OSTEOTOMY OF SPINE, ANTERIOR APP | 1/1/2007 | $190.84 | 3 |
| W | 22224 | OSTEOTOMY OF SPINE, ANTERIOR APP | 1/1/2007 | $207.24 | 3 |
| W | 22226 | OSTEOTOMY OF SPINE, INCLUDING DI | 1/1/2007 | $54.08 | 3 |
| W | 22318 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $208.48 | 3 |
| W | 22319 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $232.20 | 3 |
| W | 22325 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $177.76 | 3 |
| W | 22326 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $190.58 | 3 |
| W | 22327 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $184.50 | 3 |
| W | 22328 | OPEN TREATMENT AND/OR REDUCTION | 1/1/2007 | $40.53 | 3 |
| W | 22548 | ARTHRODESIS, ANTERIOR TRANSORAL | 1/1/2007 | $245.07 | 3 |
| W | 22554 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $183.83 | 3 |
| W | 22556 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $220.73 | 3 |
| W | 22558 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $201.01 | 3 |
| W | 22585 | ARTHRODESIS, ANTERIOR INTERBODY | 1/1/2007 | $49.67 | 3 |
| W | 22590 | ARTHRODESIS, POSTERIOR TECHNIQUE | 1/1/2007 | $200.44 | 3 |
| W | 22595 | ARTHRODESIS, POSTERIOR TECHNIQUE | 1/1/2007 | $190.11 | 3 |
| W | 22600 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $161.20 | 3 |
| W | 22610 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $160.68 | 3 |
| W | 22612 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $205.89 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 22614 | ARTHRODESIS, POSTERIOR OR POSTER | 1/1/2007 | $57.97 | 3 |
| W | 22630 | ARTHRODESIS, POSTERIOR INTERBODY | 1/1/2007 | $203.29 | 3 |
| W | 22632 | ARTHRODESIS, POSTERIOR INTERBODY | 1/1/2007 | $46.97 | 3 |
| W | 22800 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $180.51 | 3 |
| W | 22802 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $293.91 | 3 |
| W | 22804 | ARTHRODESIS, POSTERIOR, FOR SPIN | 1/1/2007 | $342.33 | 3 |
| W | 22808 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $246.53 | 3 |
| W | 22810 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $279.01 | 3 |
| W | 22812 | ARTHRODESIS, ANTERIOR, FOR SPINA | 1/1/2007 | $301.28 | 3 |
| W | 22818 | KYPHECTOMY, CIRCUMFERENTIAL EXPO | 1/1/2007 | $296.61 | 3 |
| W | 22819 | KYPHECTOMY, CIRCUMFERENTIAL EXPO | 1/1/2007 | $332.94 | 3 |
| W | 22830 | EXPLORATION OF SPINAL FUSION | 1/1/2007 | $109.51 | 3 |
| W | 22840 | POSTERIOR NON-SEGMENTAL INSTRUME | 1/1/2007 | $113.19 | 3 |
| W | 22842 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $113.25 | 3 |
| W | 22843 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $118.90 | 3 |
| W | 22844 | POSTERIOR SEGMENTAL INSTRUMENTAT | 1/1/2007 | $147.29 | 3 |
| W | 22845 | ANTERIOR INSTRUMENTATION; 2 TO 3 | 1/1/2007 | $108.37 | 3 |
| W | 22846 | ANTERIOR INSTRUMENTATION; 4 TO 7 | 1/1/2007 | $112.62 | 3 |
| W | 22847 | ANTERIOR INSTRUMENTATION; 8 OR M | 1/1/2007 | $123.57 | 3 |
| W | 22848 | PELVIC FIXATION (ATTACHMENT OF C | 1/1/2007 | $53.61 | 3 |
| W | 22849 | REINSERTION OF SPINAL FIXATION D | 1/1/2007 | $177.13 | 3 |
| W | 22850 | REMOVAL OF POSTERIOR NONSEGMENTA | 1/1/2007 | $96.33 | 3 |
| W | 22851 | APPLICATION OF PROSTHETIC DEVICE | 1/1/2007 | $60.00 | 3 |
| W | 22852 | REMOVAL OF POSTERIOR SEGMENTAL I | 1/1/2007 | $91.86 | 3 |
| W | 22855 | REMOVAL OF ANTERIOR INSTRUMENTAT | 1/1/2007 | $146.93 | 3 |
| W | 22899 | UNLISTED PROCEDURE SPINE | 2/1/1994 | $0.01 | 5 |
| W | 22900 | EXCISION ABDOMINAL WALL TUMOR SU | 1/1/2007 | $50.76 | 3 |
| W | 23000 | REMOVAL OF SUBDELTOID CALCAREOUS | 1/1/2007 | $70.48 | 3 |
| W | 23020 | CAPSULAR CONTRACTURE RELEASE (SE | 1/1/2007 | $93.63 | 3 |
| W | 23035 | INCISION DEEP WITH OPENING OF CO | 1/1/2007 | $95.29 | 3 |
| W | 23040 | ARTHROTOMY GLENOHUMERAL JOINT FO | 1/1/2007 | $96.90 | 3 |
| W | 23044 | ARTHROTOMY ACROMIOCLAVICULAR STE | 1/1/2007 | $76.81 | 3 |
| W | 23065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $128.71 | 3 |
| W | 23066 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $323.60 | 3 |
| W | 23077 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $148.64 | 3 |
| W | 23100 | ARTHROTOMY WITH BIOPSY, GLENOHUM | 1/1/2007 | $66.07 | 3 |
| W | 23101 | ARTHROTOMY WITH BIOPSY, OR W/EXC | 1/1/2007 | $61.66 | 3 |
| W | 23105 | ARTHROTOMY WITH SYNOVECTOMY; GLE | 1/1/2007 | $87.09 | 3 |
| W | 23106 | ARTHROTOMY FOR SYNOVECTOMY STERN | 1/1/2007 | $65.71 | 3 |
| W | 23107 | ARTHROTOMY, GLENOHUMERAL JOINT, | 1/1/2007 | $90.88 | 3 |
| W | 23120 | CLAVICULECTOMY PARTIAL | 1/1/2007 | $76.86 | 3 |
| W | 23125 | CLAVICULECTOMY; TOTAL | 1/1/2007 | $96.43 | 3 |
| W | 23130 | ACROMIOPLASTY OR ACROMIONECTOMY, | 1/1/2007 | $82.99 | 3 |
| W | 23145 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $93.58 | 3 |
| W | 23150 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $86.83 | 3 |
| W | 23155 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $106.29 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 23156 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $91.19 | 3 |
| W | 23170 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $72.71 | 3 |
| W | 23172 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $73.70 | 3 |
| W | 23174 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $101.36 | 3 |
| W | 23180 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $98.66 | 3 |
| W | 23182 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $93.84 | 3 |
| W | 23184 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $105.56 | 3 |
| W | 23190 | OSTECTOMY OF SCAPULA PARTIAL (EG | 1/1/2007 | $75.72 | 3 |
| W | 23195 | RESECTION HUMERAL HEAD | 1/1/2007 | $99.91 | 3 |
| W | 23200 | RADICAL RESECTION FOR TUMOR CLAV | 1/1/2007 | $118.02 | 3 |
| W | 23210 | RADICAL RESECTION FOR TUMOR; SCA | 1/1/2007 | $122.02 | 3 |
| W | 23220 | RADICAL RESECTION FOR TUMOR PROX | 1/1/2007 | $144.65 | 3 |
| W | 23221 | RADICAL RESECTION FOR TUMOR PROX | 1/1/2007 | $168.73 | 3 |
| W | 23222 | RADICAL RESECTION FOR TUMOR PROX | 1/1/2007 | $226.54 | 3 |
| W | 23330 | REMOVAL OF FOREIGN BODY SHOULDER | 1/1/2007 | $149.99 | 3 |
| W | 23332 | REMOVAL OF FOREIGN BODY; COMPLIC | 1/1/2007 | $119.21 | 3 |
| W | 23395 | MUSCLE TRANSFER, ANY TYPE, SHOUL | 1/1/2007 | $169.45 | 3 |
| W | 23397 | MUSCLE TRANSFER ANY TYPE FOR PAR | 1/1/2007 | $156.95 | 3 |
| W | 23400 | SCAPULOPEXY (EG SPRENGEL'S DEFOR | 1/1/2007 | $134.47 | 3 |
| W | 23405 | TENOMYOTOMY SINGLE | 1/1/2007 | $86.93 | 3 |
| W | 23406 | TENOMYOTOMY; MULTIPLE THROUGH SA | 1/1/2007 | $108.99 | 3 |
| W | 23410 | REPAIR OF RUPTURED MUSCULOTENDIN | 1/1/2007 | $124.66 | 3 |
| W | 23412 | REPAIR OF RUPTURED SUPRASPINATUS | 1/1/2007 | $132.45 | 3 |
| W | 23415 | CORACOACROMIAL LIGAMENT RELEASE, | 1/1/2007 | $102.24 | 3 |
| W | 23420 | REPAIR OF COMPLETE SHOULDER (ROT | 1/1/2007 | $137.33 | 3 |
| W | 23430 | TENODESIS OF LONG TENDON OF BICE | 1/1/2007 | $102.87 | 6 |
| W | 23440 | RESECTION OR TRANSPLANTATION OF | 1/1/2007 | $106.71 | 3 |
| W | 23450 | CAPSULORRHAPHY, ANTERIOR; PUTTI- | 1/1/2007 | $132.71 | 3 |
| W | 23455 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $141.74 | 3 |
| W | 23460 | CAPSULORRHAPHY, ANTERIOR, ANY TY | 1/1/2007 | $152.64 | 3 |
| W | 23462 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $148.69 | 3 |
| W | 23465 | CAPSULORRHAPHY FOR RECURRENT DIS | 1/1/2007 | $154.66 | 3 |
| W | 23466 | CAPSULORRHAPHY WITH ANY TYPE MUL | 1/1/2007 | $145.63 | 3 |
| W | 23470 | ARTHROPLASTY WITH PROXIMAL HUMER | 1/1/2007 | $168.10 | 3 |
| W | 23472 | ARTHROPLASTY WITH GLENOID AND PR | 1/1/2007 | $203.34 | 3 |
| W | 23480 | OSTEOTOMY CLAVICLE WITH OR WITHO | 1/1/2007 | $113.66 | 3 |
| W | 23485 | OSTEOTOMY CLAVICLE WITH OR WITHO | 1/1/2007 | $133.18 | 3 |
| W | 23490 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $114.34 | 3 |
| W | 23491 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $142.15 | 3 |
| W | 23500 | CLOSED TREATMENT OF CLAVICULAR F | 1/1/2007 | $136.50 | 3 |
| W | 23515 | OPEN TREATMENT OF CLAVICULAR FRA | 1/1/2007 | $79.15 | 3 |
| W | 23520 | CLOSED TREATMENT OF STERNOCLAVIC | 1/1/2007 | $139.09 | 3 |
| W | 23530 | OPEN TREATMENT OF STERNOCLAVICUL | 1/1/2007 | $75.00 | 3 |
| W | 23532 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $84.96 | 3 |
| W | 23540 | CLOSED TREATMENT OF ACROMIOCLAVI | 1/1/2007 | $139.87 | 3 |
| W | 23550 | OPEN TREATMENT OF ACROMIOCLAVICU | 1/1/2007 | $77.18 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 23552 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $89.48 | 3 |
| W | 23570 | CLOSED TREATMENT OF SCAPULAR FRA | 1/1/2007 | $145.58 | 3 |
| W | 23585 | OPEN TREATMENT OF SCAPULAR FRACT | 1/1/2007 | $94.20 | 3 |
| W | 23600 | CLOSED TREATMENT OF PROXIMAL HUM | 1/1/2007 | $206.82 | 3 |
| W | 23615 | OPEN TREATMENT OF PROXIMAL HUMER | 1/1/2007 | $102.87 | 3 |
| W | 23616 | OPEN TREATMENT OF PROXIMAL HUMER | 1/1/2007 | $202.98 | 3 |
| W | 23620 | CLOSED TREATMENT OF GREATER TUBE | 1/1/2007 | $166.60 | 3 |
| W | 23630 | OPEN TREATMENT OF GREATER TUBERO | 1/1/2007 | $79.20 | 3 |
| W | 23650 | CLOSED TREATMENT OF SHOULDER DIS | 1/1/2007 | $193.59 | 3 |
| W | 23655 | TREATMENT OF CLSOED SHOULDER DIS | 1/1/2007 | $244.71 | 3 |
| W | 23660 | OPEN TREATMENT OF ACUTE SHOULDER | 1/1/2007 | $78.73 | 3 |
| W | 23670 | OPEN TREATMENT OF SHOULDER DISLO | 1/1/2007 | $83.56 | 3 |
| W | 23680 | OPEN TREATMENT OF SHOULDER DISLO | 1/1/2007 | $103.38 | 3 |
| W | 23800 | ARTHRODESIS SHOULDER JOINT WITH | 1/1/2007 | $139.77 | 3 |
| W | 23802 | ATHRODESIS SHOULDER JOINT; WITH | 1/1/2007 | $153.00 | 3 |
| W | 23900 | INTERTHORACOSCAPULAR AMPUTATION | 1/1/2007 | $179.63 | 3 |
| W | 23920 | DISARTICULATION OF SHOULDER | 1/1/2007 | $140.13 | 3 |
| W | 23921 | DISARTICULATION OF SHOULDER; SEC | 1/1/2007 | $58.91 | 3 |
| W | 23929 | UNLISTED PROCEDURE SHOULDER | 2/1/1994 | $0.01 | 5 |
| W | 24065 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $141.95 | 3 |
| W | 24077 | RADICAL RESCTION OF TUMOR (EG, M | 1/1/2007 | $110.13 | 3 |
| W | 24100 | ARTHROTOMY, ELBOW; WITH SYNOVIAL | 1/1/2007 | $53.46 | 3 |
| W | 24101 | ARTHROTOMY, ELBOW; W/JOINT EXPLO | 1/1/2007 | $67.99 | 3 |
| W | 24102 | ARTHROTOMY, ELBOW; WITH SYNOVECT | 1/1/2007 | $84.23 | 3 |
| W | 24115 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $96.12 | 3 |
| W | 24116 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $119.06 | 3 |
| W | 24125 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $78.47 | 3 |
| W | 24126 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $85.64 | 3 |
| W | 24130 | EXCISION RADIAL HEAD | 1/1/2007 | $69.13 | 3 |
| W | 24134 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $105.05 | 3 |
| W | 24136 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $86.15 | 3 |
| W | 24138 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $89.16 | 3 |
| W | 24140 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $102.81 | 3 |
| W | 24145 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $87.71 | 3 |
| W | 24149 | RADICAL RESECTION OF CAPSULE, SO | 1/1/2007 | $146.20 | 3 |
| W | 24150 | RADICAL RESECTION FOR TUMOR SHAF | 1/1/2007 | $132.81 | 3 |
| W | 24151 | RADICAL RESECTION FOR TUMOR SHAF | 1/1/2007 | $154.09 | 3 |
| W | 24152 | RADICAL RESECTION FOR TUMOR RADI | 1/1/2007 | $100.01 | 3 |
| W | 24155 | RESECTION OF ELBOW JOINT (ARTHRE | 1/1/2007 | $114.44 | 3 |
| W | 24160 | IMPLANT REMOVAL ELBOW JOINT | 1/1/2007 | $83.20 | 3 |
| W | 24164 | IMPLANT REMOVAL; RADIAL HEAD | 1/1/2007 | $67.68 | 3 |
| W | 24200 | REMOVAL OF FOREIGN BODY SUBCUTAN | 1/1/2007 | $139.61 | 3 |
| W | 24220 | INJECTION PROCEDURE FOR ELBOW AR | 1/1/2007 | $130.53 | 3 |
| W | 24301 | MUSCLE OR TENDON TRANSFER ANY TY | 1/1/2007 | $104.01 | 3 |
| W | 24320 | TENOPLASTY WITH MUSCLE TRANSFER | 1/1/2007 | $102.87 | 3 |
| W | 24330 | FLEXOR-PLASTY ELBOW (EG STEINDLE | 1/1/2007 | $99.08 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 24331 | FLEXOR-PLASTY ELBOW (EG STEINDLE | 1/1/2007 | $109.51 | 3 |
| W | 24340 | TENODESIS OF BICEPS TENDON AT EL | 1/1/2007 | $84.29 | 3 |
| W | 24341 | REPAIR, TENDON OR MUSCLE, UPPER | 1/1/2007 | $89.22 | 3 |
| W | 24342 | REINSERTION OF RUPTURED BICEPS O | 1/1/2007 | $108.94 | 3 |
| W | 24352 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $71.21 | 3 |
| W | 24354 | FASCIOTOMY LATERAL OR MEDIAL (EG | 1/1/2007 | $71.15 | 3 |
| W | 24360 | ARTHROPLASTY ELBOW WITH MEMBRANE | 1/1/2007 | $123.89 | 3 |
| W | 24361 | ARTHROPLASTY ELBOW; WITH DISTAL | 1/1/2007 | $139.35 | 3 |
| W | 24362 | ARTHROPLASTY ELBOW; WITH IMPLANT | 1/1/2007 | $143.45 | 3 |
| W | 24363 | ATHROPLASTY ELBOW; WITH DISTAL H | 1/1/2007 | $182.79 | 3 |
| W | 24365 | ARTHROPLASTY RADIAL HEAD | 1/1/2007 | $88.28 | 3 |
| W | 24366 | ARTHROPLASTY RADIAL HEAD; WITH I | 1/1/2007 | $94.46 | 3 |
| W | 24400 | OSTEOTOMY HUMERUS WITH OR WITHOU | 1/1/2007 | $113.35 | 3 |
| W | 24410 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $143.81 | 3 |
| W | 24420 | OSTEOPLASTY HUMERUS (EG SHORTENI | 1/1/2007 | $135.77 | 3 |
| W | 24430 | REPAIR OF NONUNION OR MALUNION H | 1/1/2007 | $128.56 | 3 |
| W | 24435 | REPAIR OF NONUNION OR MALUNION H | 1/1/2007 | $136.65 | 3 |
| W | 24470 | HEMIEPIPHYSEAL ARREST (EG FOR CU | 1/1/2007 | $93.16 | 3 |
| W | 24498 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $120.67 | 3 |
| W | 24500 | CLOSED TREATMENT OF HUMERAL SHAF | 1/1/2007 | $222.39 | 3 |
| W | 24515 | OPEN TREATMENT OF HUMERAL SHAFT | 1/1/2007 | $119.68 | 3 |
| W | 24516 | TREATMENT OF HUMERAL SHAFT FRACT | 1/1/2007 | $118.28 | 3 |
| W | 24538 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $102.71 | 3 |
| W | 24545 | OPEN TREATMENT OF HUMERAL SUPRAC | 1/1/2007 | $107.59 | 3 |
| W | 24560 | CLOSED TREATMENT OF HUMERAL EPIC | 1/1/2007 | $200.59 | 3 |
| W | 24565 | TREATMENT OF CLOSED EPICONDYLAR | 1/1/2007 | $68.04 | 3 |
| W | 24575 | OPEN TREATMENT OF HUMERAL EPICON | 1/1/2007 | $108.57 | 3 |
| W | 24576 | CLOSED TREATMENT OF HUMERAL COND | 1/1/2007 | $209.94 | 3 |
| W | 24579 | OPEN TREATMENT OF HUMERAL CONDYL | 1/1/2007 | $116.57 | 3 |
| W | 24586 | OPEN TREATMENT OF PERIARTICULAR | 1/1/2007 | $150.98 | 3 |
| W | 24587 | OPEN TREATMENT OF PERIARTICULAR | 1/1/2007 | $149.00 | 3 |
| W | 24600 | TREATMENT OF CLOSED ELBOW DISLOC | 1/1/2007 | $248.86 | 3 |
| W | 24615 | OPEN TREATMENT OF ACUTE OR CHRON | 1/1/2007 | $97.83 | 3 |
| W | 24635 | OPEN TREATMENT OF MONTEGGIA TYPE | 1/1/2007 | $153.31 | 3 |
| W | 24650 | CLOSED TREATMENT OF RADIAL HEAD | 1/1/2007 | $163.49 | 3 |
| W | 24665 | OPEN TREATMENT OF RADIAL HEAD OR | 1/1/2007 | $88.59 | 3 |
| W | 24666 | OPEN TREATMENT OF RADIAL HEAD OR | 1/1/2007 | $99.60 | 3 |
| W | 24670 | CLOSED TREATMENT OF ULNAR FRACTU | 1/1/2007 | $183.47 | 3 |
| W | 24685 | OPEN TREATMENT OF ULNAR FRACTURE | 1/1/2007 | $92.64 | 3 |
| W | 24800 | ARTHRODESIS ELBOW JOINT WITH OR | 1/1/2007 | $112.00 | 3 |
| W | 24802 | ARTHRODESIS ELBOW JOINT; WITH PR | 1/1/2007 | $137.28 | 3 |
| W | 24900 | AMPUTATION ARM THROUGH HUMERUS W | 1/1/2007 | $94.46 | 3 |
| W | 24920 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $93.94 | 3 |
| W | 24925 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $74.22 | 3 |
| W | 24930 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $99.44 | 3 |
| W | 24931 | AMPUTATION ARM THROUGH HUMERUS; | 1/1/2007 | $105.51 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 24940 | CINEPLASTY UPPER EXTREMITY COMPL | 10/1/2001 | $174.31 | 3 |
| W | 25085 | CAPSULOTOMY WRIST (EG FOR CONTRA | 1/1/2007 | $69.96 | 3 |
| W | 25107 | ARTHROTOMY DISTAL RADIOULNAR JOI | 1/1/2007 | $81.85 | 3 |
| W | 25119 | SYNOVECTOMY EXTENSOR TENDON SHEA | 1/1/2007 | $75.83 | 3 |
| W | 25126 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $113.45 | 3 |
| W | 25135 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $80.08 | 3 |
| W | 25136 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $70.58 | 3 |
| W | 25145 | SEQUESTRECTOMY (EG FOR OSTEOMYEL | 1/1/2007 | $101.00 | 3 |
| W | 25151 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $110.65 | 3 |
| W | 25170 | RADICAL RESECTION FOR TUMOR RADI | 1/1/2007 | $145.48 | 3 |
| W | 25215 | CARPECTOMY; ALL BONES OR PROXIMA | 1/1/2007 | $92.64 | 3 |
| W | 25250 | REMOVAL OF WRIST PROSTHESIS (SEP | 1/1/2007 | $71.21 | 3 |
| W | 25251 | REMOVAL OF WRIST PROSTHESIS; COM | 1/1/2007 | $97.36 | 3 |
| W | 25263 | REPAIR TENDON OR MUSCLE FLEXOR; | 1/1/2007 | $115.69 | 3 |
| W | 25265 | REPAIR TENDON OR MUSCLE FLEXOR S | 1/1/2007 | $133.33 | 3 |
| W | 25300 | TENODESIS AT WRIST FLEXORS OF FI | 1/1/2007 | $96.12 | 3 |
| W | 25301 | TENODESIS AT WRIST; EXTENSORS OF | 1/1/2007 | $92.17 | 3 |
| W | 25310 | TENDON TRANSPLANTATION OR TRANSF | 1/1/2007 | $116.31 | 3 |
| W | 25312 | TENDON TRANSPLANTATION OR TRANSF | 1/1/2007 | $129.49 | 3 |
| W | 25315 | FLEXOR ORIGIN SLIDE (EG, FOR CER | 1/1/2007 | $135.98 | 3 |
| W | 25316 | FLEXOR ORIGIN SLIDE FOR CEREBRAL | 1/1/2007 | $157.36 | 3 |
| W | 25320 | CAPSULORRHAPHY OR RECONSTRUCTION | 1/1/2007 | $123.42 | 3 |
| W | 25332 | ARTHROPLASTY, WRIST, WITH OR WIT | 1/1/2007 | $116.36 | 3 |
| W | 25335 | CENTRALIZATION OF WRIST ON ULNA | 1/1/2007 | $137.02 | 3 |
| W | 25337 | RECONSTRUCTION FOR STABILIZATION | 1/1/2007 | $118.70 | 3 |
| W | 25350 | OSTEOTOMY RADIUS DISTAL THIRD | 1/1/2007 | $125.81 | 3 |
| W | 25355 | OSTEOTOMY RADIUS; MIDDLE OR PROX | 1/1/2007 | $137.69 | 3 |
| W | 25360 | OSTEOTOMY ULNA | 1/1/2007 | $123.21 | 3 |
| W | 25365 | OSTEOTOMY; RADIUS AND ULNA | 1/1/2007 | $156.84 | 3 |
| W | 25370 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $164.73 | 3 |
| W | 25375 | MULTIPLE OSTEOTOMIES WITH REALIG | 1/1/2007 | $164.78 | 3 |
| W | 25390 | OSTEOPLASTY RADIUS OR ULNA SHORT | 1/1/2007 | $138.31 | 3 |
| W | 25391 | OSTEOPLASTY RADIUS OR ULNA; LENG | 1/1/2007 | $168.36 | 3 |
| W | 25392 | OSTEOPLASTY RADIUS AND ULNA SHOR | 1/1/2007 | $166.29 | 3 |
| W | 25393 | OSTEOPLASTY RADIUS AND ULNA; LEN | 1/1/2007 | $188.09 | 3 |
| W | 25400 | REPAIR OF NONUNION OR MALUNION R | 1/1/2007 | $145.06 | 3 |
| W | 25405 | REPAIR OF NONUNION OR MALUNION, | 1/1/2007 | $176.46 | 3 |
| W | 25415 | REPAIR OF NONUNION OR MALUNION R | 1/1/2007 | $166.39 | 3 |
| W | 25420 | REPAIR OF NONUNION OR MALUNION, | 1/1/2007 | $193.28 | 3 |
| W | 25425 | REPAIR OF DEFECT WITH AUTOGENOUS | 1/1/2007 | $190.58 | 3 |
| W | 25426 | REPAIR OF DEFECT WITH AUTOGENOUS | 1/1/2007 | $181.34 | 3 |
| W | 25440 | REPAIR OF NONUNION, SCAPHOID CAR | 1/1/2007 | $111.48 | 3 |
| W | 25441 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $129.65 | 3 |
| W | 25442 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $110.39 | 3 |
| W | 25443 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $106.60 | 3 |
| W | 25444 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $113.66 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 25445 | ARTHROPLASTY WITH PROSTHETIC REP | 1/1/2007 | $99.86 | 3 |
| W | 25446 | ATHROPLASTY WITH PROSTHETIC REPL | 1/1/2007 | $160.63 | 3 |
| W | 25447 | INTERPOSITION ARTHROPLASTY INTER | 1/1/2007 | $107.12 | 3 |
| W | 25449 | REVISION OF ARTHROPLASTY INCLUDI | 1/1/2007 | $142.10 | 3 |
| W | 25450 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $100.89 | 3 |
| W | 25455 | EPIPHYSEAL ARREST BY EIPHYSIODES | 1/1/2007 | $110.70 | 3 |
| W | 25490 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $128.35 | 3 |
| W | 25491 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $135.20 | 3 |
| W | 25492 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $154.61 | 3 |
| W | 25500 | CLOSED TREATMENT OF RADIAL SHAFT | 1/1/2007 | $165.56 | 3 |
| W | 25515 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $94.67 | 3 |
| W | 25525 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $126.43 | 3 |
| W | 25526 | OPEN TREATMENT OF RADIAL SHAFT F | 1/1/2007 | $148.90 | 3 |
| W | 25530 | CLOSED TREATMENT OF ULNAR SHAFT | 1/1/2007 | $160.89 | 3 |
| W | 25545 | OPEN TREATMENT OF ULNAR SHAFT FR | 1/1/2007 | $93.94 | 3 |
| W | 25560 | CLOSED TREATMENT OF RADIAL AND U | 1/1/2007 | $168.42 | 3 |
| W | 25574 | OPEN TREATMENT OF RADIAL AND ULN | 1/1/2007 | $80.08 | 3 |
| W | 25575 | OPEN TREATMENT OF RADIAL AND ULN | 1/1/2007 | $113.04 | 3 |
| W | 25600 | CLOSED TREATMENT OF DISTAL RADIA | 1/1/2007 | $185.54 | 3 |
| W | 25611 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | INVALID | N |
| W | 25620 | OPEN TREATMENT OF DISTAL RADIAL | 1/1/2007 | INVALID | N |
| W | 25622 | CLOSED TREATMENT OF CARPAL SCAPH | 1/1/2007 | $189.44 | 3 |
| W | 25628 | OPEN TREATMENT OF CARPAL SCAPHOI | 1/1/2007 | $91.50 | 3 |
| W | 25630 | CLOSED TREATMENT OF CARPAL BONE | 1/1/2007 | $195.14 | 3 |
| W | 25645 | OPEN TREATMENT OF CARPAL BONE FR | 1/1/2007 | $78.32 | 3 |
| W | 25650 | CLOSED TREATMENT OF ULNAR STYLOI | 1/1/2007 | $202.93 | 3 |
| W | 25670 | OPEN TREATMENT OF RADIOCARPAL OR | 1/1/2007 | $84.08 | 3 |
| W | 25676 | OPEN TREATMENT OF DISTAL RADIOUL | 1/1/2007 | $86.62 | 3 |
| W | 25685 | OPEN TREATMENT OF TRANS-SCAPHOPE | 1/1/2007 | $99.60 | 3 |
| W | 25695 | OPEN TREATMENT OF LUNATE DISLOCA | 1/1/2007 | $86.98 | 3 |
| W | 25800 | ARTHRODESIS, WRIST JOINT (INCLUD | 1/1/2007 | $106.08 | 3 |
| W | 25805 | ARTHRODESIS WRIST JOINT (INCLUDI | 1/1/2007 | $121.13 | 3 |
| W | 25810 | ARTHRODESIS WRIST JOINT (INCLUDI | 1/1/2007 | $114.96 | 3 |
| W | 25820 | INTERCARPAL FUSION WITHOUT BONE | 1/1/2007 | $85.79 | 3 |
| W | 25825 | INTERCARPAL FUSION WITH AUTOGENO | 1/1/2007 | $103.44 | 3 |
| W | 25830 | DISTAL RADIOULNAR JOINT ARTHRODE | 1/1/2007 | $135.15 | 3 |
| W | 25900 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $118.85 | 3 |
| W | 25905 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $118.54 | 3 |
| W | 25907 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $107.33 | 3 |
| W | 25909 | AMPUTATION FOREARM THROUGH RADIU | 1/1/2007 | $117.81 | 3 |
| W | 25915 | KRUKENBERG PROCEDURE | 1/1/2007 | $201.94 | 3 |
| W | 25920 | DISARTICULATION THROUGH WRIST | 1/1/2007 | $92.85 | 3 |
| W | 25922 | DISARTICULATION THROUGH WRIST; S | 1/1/2007 | $80.96 | 3 |
| W | 25924 | DISARTICULATION THROUGH WRIST; R | 1/1/2007 | $92.80 | 3 |
| W | 25929 | TRANSMETACARPAL AMPUTATION; SECO | 1/1/2007 | $75.83 | 3 |
| W | 25931 | TRANSMETACARPAL AMPUTATION; REAM | 1/1/2007 | $106.08 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 26010 | DRAINAGE OF FINGER ABSCESS SIMPL | 1/1/2007 | $189.44 | 3 |
| W | 26011 | DRAINAGE OF FINGER ABSCESS; COMP | 1/1/2007 | $294.79 | 3 |
| W | 26215 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $74.74 | 3 |
| W | 26255 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $121.91 | 3 |
| W | 26260 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $73.85 | 3 |
| W | 26261 | RADICAL RESECTION (OSTECTOMY) FO | 1/1/2007 | $85.17 | 3 |
| W | 26262 | RADICAL RESECTION OSTECTOMY) FOR | 1/1/2007 | $61.71 | 3 |
| W | 26352 | FLEXOR TENDON REPAIR OR ADVANCEM | 1/1/2007 | $125.60 | 3 |
| W | 26357 | SECONDARY, EACH TENDON | 1/1/2007 | $132.76 | 3 |
| W | 26358 | FLEXOR TENDON REPAIR OR ADVANCEM | 1/1/2007 | $141.17 | 3 |
| W | 26372 | PROFUNDUS TENDON REPAIR OR ADVAN | 1/1/2007 | $138.73 | 3 |
| W | 26373 | PROFUNDUS TENDON REPAIR OR ADVAN | 1/1/2007 | $132.19 | 3 |
| W | 26390 | EXCISION FLEXOR TENDON, W/IMPLAN | 1/1/2007 | $124.04 | 3 |
| W | 26392 | REMOVAL OF SYNTHETIC ROD AND INS | 1/1/2007 | $148.33 | 3 |
| W | 26416 | REMOVAL OF SYNTHETIC ROD AND INS | 1/1/2007 | $128.61 | 3 |
| W | 26420 | EXTENSOR TENDON REPAIR DORSUM OF | 1/1/2007 | $111.59 | 3 |
| W | 26426 | REPAIR OF EXTENSOR TENDON, CENTR | 1/1/2007 | $105.31 | 3 |
| W | 26434 | EXTENSOR TENDON REPAIR OPEN PRIM | 1/1/2007 | $96.43 | 3 |
| W | 26474 | TENODESIS FOR DISTAL JOINT STABI | 1/1/2007 | $90.77 | 3 |
| W | 26476 | TENDON LENGTHENING EXTENSOR SING | 1/1/2007 | $87.81 | 3 |
| W | 26479 | TENDON SHORTENING, FLEXOR, HAND | 1/1/2007 | $94.67 | 3 |
| W | 26483 | TENDON TRANSFER OR TRANSPLANT CA | 1/1/2007 | $130.17 | 3 |
| W | 26485 | TENDON TRANSFER OR TRANSPLANT PA | 1/1/2007 | $125.81 | 3 |
| W | 26492 | OPPONENS PLASTY TENDON TRANSFER | 1/1/2007 | $127.93 | 3 |
| W | 26494 | OPPONENS PLASTY HYPOTHENAR MUSCL | 1/1/2007 | $118.07 | 3 |
| W | 26497 | TENDON TRANSFER TO RESTORE INTRI | 1/1/2007 | $127.57 | 3 |
| W | 26498 | TENDON TRANSFER TO RESTORE INTRI | 1/1/2007 | $167.59 | 3 |
| W | 26499 | CORRECTION CLAW FINGER OTHER MET | 1/1/2007 | $121.45 | 3 |
| W | 26502 | TENDON PULLEY RECONSTRUCTION WIT | 1/1/2007 | $105.41 | 3 |
| W | 26504 | TENDON PULLEY RECONSTRUCTION; WI | 1/1/2007 | INVALID | N |
| W | 26517 | CAPSULODESIS FOR M-P JOINT STABI | 1/1/2007 | $123.37 | 3 |
| W | 26518 | CAPSULODESIS FOR M-P JOINT STABI | 1/1/2007 | $123.47 | 3 |
| W | 26530 | ARTHROPLASTY METACARPOPHALANGEAL | 1/1/2007 | $72.04 | 3 |
| W | 26531 | ARTHROPLASTY METACARPOPHALANGEAL | 1/1/2007 | $84.13 | 3 |
| W | 26536 | ARTHROPLASTY INTERPHALANGEAL JOI | 1/1/2007 | $88.23 | 3 |
| W | 26541 | RECONSTRUCTION, COLLATERAL LIGAM | 1/1/2007 | $121.03 | 3 |
| W | 26546 | REPAIR NON-UNION, METACARPAL OR | 1/1/2007 | $131.93 | 3 |
| W | 26550 | POLLICIZATION OF A DIGIT | 1/1/2007 | $214.30 | 3 |
| W | 26553 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/2007 | $370.36 | 3 |
| W | 26554 | TOE-TO-HAND TRANSFER WITH MICROV | 1/1/2007 | $528.96 | 3 |
| W | 26555 | POSITIONAL CHANGE OF OTHER FINGE | 1/1/2007 | $193.69 | 3 |
| W | 26556 | FREE TOE JOINT TRANSFER WITH MIC | 1/1/2007 | $431.70 | 3 |
| W | 26560 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $83.30 | 3 |
| W | 26561 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $128.35 | 3 |
| W | 26562 | REPAIR OF SYNDACTYLY (WEB FINGER | 1/1/2007 | $178.54 | 3 |
| W | 26565 | OSTEOTOMY FOR CORRECTION OF DEFO | 1/1/2007 | $102.61 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 26568 | OSTEOPLASTY FOR LENGTHENING OF M | 1/1/2007 | $135.10 | 3 |
| W | 26580 | REPAIR CLEFT HAND | 1/1/2007 | $177.03 | 3 |
| W | 26585 | REPAIR BIFID DIGIT | 4/1/2002 | INVALID | N |
| W | 26587 | RECONSTRUCTION OF POLYDACTYLOUS | 1/1/2007 | $128.71 | 3 |
| W | 26590 | REPAIR MACRODACTYLIA, EACH DIGIT | 1/1/2007 | $179.99 | 3 |
| W | 26596 | EXCISION OF CONSTRICTING RING WI | 1/1/2007 | $99.75 | 3 |
| W | 26597 | RELEASE OF SCAR CONTRACTURE FLEX | 4/1/2002 | INVALID | N |
| W | 26600 | CLOSED TREATMENT OF METACARPAL F | 1/1/2007 | $152.59 | 3 |
| W | 26665 | OPEN TREATMENT OF CARPOMETACARPA | 1/1/2007 | $78.47 | 3 |
| W | 26670 | CLOSED TREATMENT OF CARPOMETACAR | 1/1/2007 | $216.42 | 3 |
| W | 26676 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $68.14 | 3 |
| W | 26685 | OPEN TREATMENT OF CARPOMETACARPA | 1/1/2007 | $73.80 | 3 |
| W | 26686 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $83.51 | 3 |
| W | 26700 | CLOSED TREATMENT OF METACARPOPHA | 1/1/2007 | $202.41 | 3 |
| W | 26706 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $57.19 | 3 |
| W | 26720 | CLOSED TREATMENT OF PHALANGEAL S | 1/1/2007 | $121.71 | 3 |
| W | 26725 | CLOSED TREATMENT OF PHALANGEAL S | 9/10/2002 | $234.33 | 3 |
| W | 26740 | CLOSED TX OF ARTICULAR FX, INVOL | 1/1/2007 | $139.87 | 3 |
| W | 26750 | CLOSED TREATMENT OF DISTAL PHALA | 1/1/2007 | $114.44 | 3 |
| W | 26770 | CLOSED TREATMENT OF INTERPHALANG | 1/1/2007 | $174.64 | 3 |
| W | 26820 | FUSION IN OPPOSITION THUMB WITH | 1/1/2007 | $118.54 | 3 |
| W | 26842 | ARTHRODESIS CARPOMETACARPAL JOIN | 1/1/2007 | $119.16 | 3 |
| W | 26843 | ARTHRODESIS, ARPOMETACARPAL JOIN | 1/1/2007 | $109.72 | 3 |
| W | 26844 | ARTHRODESIS CARPOMETACARPAL JOIN | 1/1/2007 | $121.71 | 3 |
| W | 26852 | ARTHRODESIS METACARPOPHALANGEAL | 1/1/2007 | $117.29 | 3 |
| W | 26862 | ARTHRODESIS INTERPHALANGEAL JOIN | 1/1/2007 | $108.16 | 3 |
| W | 26863 | ARTHRODESIS INTERPHALANGEAL JOIN | 1/1/2007 | $34.10 | 3 |
| W | 27000 | TENTOMY ADDUCTOR SUBCUTANEOUS CL | 1/1/2007 | $61.71 | 3 |
| W | 27001 | TENOTOMY, ADDUCTOR OF HIP, SUBCU | 1/1/2007 | $74.11 | 3 |
| W | 27003 | TENOTOMY, ADDUCTOR, SUBCUTANEOUS | 1/1/2007 | $77.59 | 3 |
| W | 27005 | TENOTOMY ILIOPSOAS OPEN (SEPARAT | 1/1/2007 | $99.70 | 3 |
| W | 27006 | TENOTOMY ABDUCTORS OPEN (SEPARAT | 1/1/2007 | $100.48 | 3 |
| W | 27030 | ARTHROTOMY HIP FOR INFECTION WIT | 1/1/2007 | $129.33 | 3 |
| W | 27033 | ARTHROTOMY, HIP, WITH EXPLORATIO | 1/1/2007 | $133.07 | 3 |
| W | 27035 | HIP JOINT DENERVATION INTRAPELVI | 1/1/2007 | $156.06 | 3 |
| W | 27036 | CAPSULECTOMY OR CAPSULOTOMY OF H | 1/1/2007 | $130.53 | 3 |
| W | 27048 | EXCISION, TUMOR, PELVIS AND HIP | 1/1/2007 | $62.12 | 3 |
| W | 27049 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $125.18 | 3 |
| W | 27052 | ARTHROTOMY FOR BIOPSY; HIP JOINT | 1/1/2007 | $68.51 | 3 |
| W | 27054 | ARTHROTOMY WITH SYNOVECTOMY, HIP | 1/1/2007 | $90.10 | 3 |
| W | 27060 | EXCISION ISCHIAL BURSA | 1/1/2007 | $55.01 | 3 |
| W | 27062 | EXCISION; TROCHANTERIC BURSA OR | 1/1/2007 | $59.69 | 3 |
| W | 27065 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $64.15 | 3 |
| W | 27066 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $106.71 | 3 |
| W | 27067 | EXCISION OF BONE CYST OR BENIGN | 1/1/2007 | $136.70 | 3 |
| W | 27070 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $112.10 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 27071 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $122.02 | 3 |
| W | 27075 | RADICAL RESECTION OF TUMOR OR IN | 1/1/2007 | $310.62 | 3 |
| W | 27076 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $209.36 | 3 |
| W | 27077 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $357.02 | 3 |
| W | 27078 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $132.92 | 3 |
| W | 27079 | RADICAL RESECTION FOR TUMOR OR I | 1/1/2007 | $131.00 | 3 |
| W | 27080 | COCCYGECTOMY PRIMARY | 1/1/2007 | $63.06 | 3 |
| W | 27086 | REMOVAL OF FOREIGN BODY SUBCUTAN | 1/1/2007 | $173.35 | 3 |
| W | 27087 | REMOVAL OF FOREIGN BODY; DEEP | 1/1/2007 | $85.95 | 3 |
| W | 27090 | REMOVAL OF HIP PROSTHESIS (SEPAR | 1/1/2007 | $113.56 | 3 |
| W | 27091 | REMOVAL OF HIP PROSTHESIS; COMPL | 1/1/2007 | $207.50 | 3 |
| W | 27096 | INJECTION PROCEDURE FOR SACROILI | 1/1/2007 | $151.55 | 3 |
| W | 27097 | HAMSTRING RESCESSION PROXIMAL | 1/1/2007 | $87.14 | 3 |
| W | 27098 | ADDUCTOR TRANSFER TO ISCHIUM | 1/1/2007 | $87.24 | 3 |
| W | 27100 | TRANSFER EXTERNAL OBLIQUE MUSCLE | 1/1/2007 | $112.10 | 3 |
| W | 27105 | TRANSFER PARASPINAL MUSCLE TO HI | 1/1/2007 | $117.61 | 3 |
| W | 27110 | TRANSFER ILIOPSOAS; TO GREATER T | 1/1/2007 | $127.47 | 3 |
| W | 27111 | TRANSFER ILLOPSOAS; TO FEMORAL N | 1/1/2007 | $120.56 | 3 |
| W | 27120 | ACETABULOPLASTY; (EG,WHITMAN,COL | 1/1/2007 | $170.91 | 3 |
| W | 27122 | ACETABULOPLASTY; RESECTION FEMOR | 1/1/2007 | $148.64 | 3 |
| W | 27125 | PARTIAL HIP REPLACEMENT, PROSTHE | 1/1/2007 | $144.59 | 3 |
| W | 27130 | ARTHROPLASTY, ACETABULAR & PROXI | 1/1/2007 | $191.67 | 3 |
| W | 27132 | CONVERSION OF PREVIOUS HIP SURGE | 1/1/2007 | $223.12 | 3 |
| W | 27134 | REVISION OF TOTAL HIP ARTHOPLAST | 1/1/2007 | $266.04 | 3 |
| W | 27137 | REVISION OF TOTAL HIP ATHROPLAST | 1/1/2007 | $201.27 | 3 |
| W | 27138 | REVISION OF TOTAL HIP ATHROPLAST | 1/1/2007 | $209.73 | 3 |
| W | 27140 | OSTEOTOMY AND TRANSFER OF GREATE | 1/1/2007 | $123.37 | 3 |
| W | 27146 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $168.83 | 3 |
| W | 27147 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $194.16 | 3 |
| W | 27151 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $178.33 | 3 |
| W | 27156 | OSTEOTOMY ILIAC ACETABULAR OR IN | 1/1/2007 | $233.08 | 3 |
| W | 27158 | OSTEOTOMY, PELVIS, BILATERAL (EG | 1/1/2007 | $175.79 | 3 |
| W | 27161 | OSTEOTOMY FEMORAL NECK (SEPARATE | 1/1/2007 | $164.83 | 3 |
| W | 27165 | OSTEOTOMY INTERTROCHANTERIC OR S | 1/1/2007 | $176.10 | 3 |
| W | 27170 | BONE GRAFT, FEMORAL HEAD, NECK, | 1/1/2007 | $156.69 | 3 |
| W | 27176 | TREATMENT OF SLIPPED FEMORAL EPI | 1/1/2007 | $120.88 | 3 |
| W | 27177 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $148.38 | 3 |
| W | 27178 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $116.72 | 3 |
| W | 27179 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $130.94 | 3 |
| W | 27181 | OPEN TREATMENT OF SLIPPED FEMORA | 1/1/2007 | $137.33 | 3 |
| W | 27185 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $99.13 | 3 |
| W | 27187 | PROPHYLACTIC TREATMENT WITH WITH | 1/1/2007 | $136.19 | 3 |
| W | 27193 | CLOSED TREATMENT OF PELVIC RING | 1/1/2007 | $301.28 | 3 |
| W | 27200 | CLOSED TREATMENT OF COCCYGEAL FR | 1/1/2007 | $112.88 | 3 |
| W | 27202 | OPEN TREATMENT OF COCCYGEAL FRAC | 1/1/2007 | $129.75 | 3 |
| W | 27217 | OPEN TREATMENT OF ANTERIOR RING | 1/1/2007 | $138.42 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 27218 | OPEN TREATMENT OF POSTERIOR RING | 1/1/2007 | $181.81 | 3 |
| W | 27220 | CLOSED TREATMENT OF ACETABULUM ( | 1/1/2007 | $336.83 | 3 |
| W | 27226 | OPEN TREATMENT OF POSTERIOR OR A | 1/1/2007 | $130.79 | 3 |
| W | 27227 | OPEN TREATMENT OF ACETABULAR FRA | 1/1/2007 | $222.65 | 3 |
| W | 27228 | OPEN TREATMENT OF ACETABULAR FRA | 1/1/2007 | $256.65 | 3 |
| W | 27230 | CLOSED TREATMENT OF FEMORAL FRAC | 1/1/2007 | $310.62 | 3 |
| W | 27235 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $123.16 | 3 |
| W | 27236 | OPEN TREATMENT OF FEMORAL FRACTU | 1/1/2007 | $152.43 | 3 |
| W | 27244 | TREATMENT OF INTERTROCHANTERIC, | 1/1/2007 | $155.80 | 3 |
| W | 27245 | OPEN TREATMENT OF INTERTROCHANTE | 1/1/2007 | $195.04 | 3 |
| W | 27246 | CLOSED TREATMENT OF GREATER TROC | 1/1/2007 | $258.98 | 3 |
| W | 27248 | OPEN TREATMENT OF GREATER TROCHA | 1/1/2007 | $106.24 | 3 |
| W | 27250 | CLOSED TREATMENT OF HIP DISLOCAT | 1/1/2007 | $316.33 | 3 |
| W | 27253 | OPEN TREATMENT OF HIP DISLOCATIO | 1/1/2007 | $129.49 | 3 |
| W | 27254 | OPEN TREATMENT OF HIP DISLOCATIO | 1/1/2007 | $173.61 | 3 |
| W | 27256 | TREATMETN OF SPONTANEOUS HIP DIS | 1/1/2007 | $210.20 | 3 |
| W | 27258 | OPEN TREATMENT OF SPONTANEOUS HI | 1/1/2007 | $150.25 | 3 |
| W | 27259 | OPEN TREATMENT OF CONGENITAL HIP | 1/1/2007 | $204.59 | 3 |
| W | 27265 | CLOSED TREATMENT OF POST HIP ART | 1/1/2007 | $271.70 | 3 |
| W | 27280 | ARTHRODESIS SACROILIAC JOINT (IN | 1/1/2007 | $135.93 | 3 |
| W | 27282 | ARTHRODESIS SYMPHYSIS PUBIS (INC | 1/1/2007 | $110.03 | 3 |
| W | 27284 | ARTHRODESIS HIP JOINT (INCLUDES | 1/1/2007 | $218.65 | 3 |
| W | 27286 | ARTHRODESIS HIP JOINT (INCLUDES | 1/1/2007 | $219.90 | 3 |
| W | 27290 | INTERPELVIABDOMINAL AMPUTATION ( | 1/1/2007 | $211.65 | 3 |
| W | 27295 | DISARTICULATION OF HIP | 1/1/2007 | $170.80 | 3 |
| W | 27299 | UNLISTED PROCEDURE PELVIS OR HIP | 2/1/1994 | $0.01 | 5 |
| W | 27303 | INCISION DEEP WITH OPENING OF BO | 1/1/2007 | $86.67 | 3 |
| W | 27305 | FASCIOTOMY ILIOTIBIAL (TENOTOMY) | 1/1/2007 | $62.90 | 3 |
| W | 27306 | TENOTOMY SUBCUTANEOUS CLOSED ADD | 1/1/2007 | $52.89 | 3 |
| W | 27307 | TENOTOMY SUBCUTANEOUS CLOSED ADD | 1/1/2007 | $63.47 | 3 |
| W | 27310 | ARTHROTOMY KNEE FOR INFECTION WI | 1/1/2007 | $95.86 | 3 |
| W | 27315 | NEURECTOMY HAMSTRING MUSCLE | 1/1/2007 | INVALID | N |
| W | 27320 | NEURECTOMY POPLITEAL (GASTROCNEM | 1/1/2007 | INVALID | N |
| W | 27323 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $156.74 | 3 |
| W | 27324 | BIOPSY SOFT TISSUES; DEEP | 1/1/2007 | $255.09 | 3 |
| W | 27329 | RADICAL RESECTION OF TUMOR (EG, | 1/1/2007 | $131.36 | 3 |
| W | 27330 | ARTHROTOMY, KNEE; WITH SYNOVIAL | 1/1/2007 | $53.98 | 3 |
| W | 27331 | ARTHROTOMY, KNEE; W/JOINT EXPLOR | 1/1/2007 | $64.51 | 3 |
| W | 27332 | ARTHROTOMY, KNEE, WITH EXCISION | 1/1/2007 | $87.35 | 3 |
| W | 27333 | ARTHROTOMY KNEE FOR EXCISION OF | 1/1/2007 | $79.10 | 3 |
| W | 27334 | ARTHROTOMY, KNEE, WITH SYNOVECTO | 1/1/2007 | $91.50 | 3 |
| W | 27335 | ARTHROTOMY KNEE FOR SYNOVECTOMY; | 1/1/2007 | $103.64 | 3 |
| W | 27345 | EXCISION OF SYNOVIAL CYST OF POP | 1/1/2007 | $65.13 | 3 |
| W | 27347 | EXCISION OF LESION OF MENISCUS O | 1/1/2007 | $63.27 | 3 |
| W | 27350 | PATELLECTOMY OR HEMIPATELLECTOMY | 1/1/2007 | $87.35 | 3 |
| W | 27355 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $81.74 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 27356 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $98.56 | 3 |
| W | 27357 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $109.98 | 3 |
| W | 27358 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $41.94 | 3 |
| W | 27360 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $113.61 | 3 |
| W | 27365 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $159.59 | 3 |
| W | 27380 | SUTURE OF INFRAPATELLAR TENDON P | 1/1/2007 | $81.43 | 3 |
| W | 27381 | SUTURE OF INFRAPATELLAR TENDON S | 1/1/2007 | $110.18 | 3 |
| W | 27385 | SUTURE OF QUADRICEPS OR HAMSTRIN | 1/1/2007 | $86.98 | 3 |
| W | 27386 | SUTURE OF QUADRICEPS OR HAMSTRIN | 1/1/2007 | $113.82 | 3 |
| W | 27390 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $58.96 | 3 |
| W | 27391 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $77.85 | 3 |
| W | 27392 | TENOTOMY OPEN HAMSTRING KNEE TO | 1/1/2007 | $95.34 | 3 |
| W | 27393 | LENGTHENING OF HAMSTRING TENDON | 1/1/2007 | $69.18 | 3 |
| W | 27394 | LENGTHENING OF HAMSTRING TENDON; | 1/1/2007 | $89.27 | 3 |
| W | 27395 | LENGTHENING OF HAMSTRING TENDON; | 1/1/2007 | $119.89 | 3 |
| W | 27396 | TRANSPLANT HAMSTRING TENDON TO P | 1/1/2007 | $84.13 | 3 |
| W | 27397 | TRANSPLANT HAMSTRING TENDON TO P | 1/1/2007 | $114.96 | 3 |
| W | 27400 | TENDON MUSCLE TRANSFER HAMSTRING | 1/1/2007 | $91.29 | 3 |
| W | 27403 | ARTHROTOMY WITH OPEN MENISCUS RE | 1/1/2007 | $88.02 | 3 |
| W | 27405 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $91.66 | 3 |
| W | 27407 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $105.77 | 3 |
| W | 27409 | REPAIR PRIMARY TORN LIGAMENT AND | 1/1/2007 | $130.27 | 3 |
| W | 27418 | ANTERIOR TIBIAL TUBERCLEPLASTY ( | 1/1/2007 | $112.31 | 3 |
| W | 27420 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $102.04 | 3 |
| W | 27422 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $101.78 | 3 |
| W | 27424 | RECONSTRUCTION FOR RECURRENT DIS | 1/1/2007 | $101.78 | 3 |
| W | 27425 | LATERAL RETINACULAR RELEASE OPEN | 1/1/2007 | $60.46 | 3 |
| W | 27427 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $97.57 | 3 |
| W | 27428 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $143.61 | 3 |
| W | 27429 | RECONSTRUCTION (AUGMENTATION) KN | 1/1/2007 | $159.07 | 3 |
| W | 27430 | QUADRICEPS PLASTY (BENNETT OR TH | 1/1/2007 | $100.53 | 3 |
| W | 27435 | CAPSULOTOMY KNEE POSTERIOR CAPSU | 1/1/2007 | $102.09 | 3 |
| W | 27437 | ARTHROPLASTY PATELLA WITHOUT PRO | 1/1/2007 | $89.27 | 3 |
| W | 27438 | ARTHROPLASTY PATELLA; WITH PROST | 1/1/2007 | $112.73 | 3 |
| W | 27440 | ARTHROPLASTY KNEE TIBIAL PLATEAU | 1/1/2007 | $94.61 | 3 |
| W | 27441 | ARTHROPLASTY KNEE TIBIAL PLATEAU | 1/1/2007 | $100.74 | 3 |
| W | 27442 | ARTHROPLASTY KNEE FEMORAL CONDYL | 1/1/2007 | $118.85 | 3 |
| W | 27443 | ARTHROPLASTY KNEE FEMORAL CONDYL | 1/1/2007 | $111.90 | 3 |
| W | 27445 | ARTHROPLASTY KNEE CONSTRAINED PR | 1/1/2007 | $171.89 | 3 |
| W | 27446 | ARTHROPLASTY KNEE TOTAL CONDYLE | 1/1/2007 | $155.28 | 3 |
| W | 27447 | ARTHROPLASTY, KNEE, CONDYLE & PL | 1/1/2007 | $206.98 | 3 |
| W | 27448 | OSTEOTOMY FEMUR SHAFT OR SUPRACO | 1/1/2007 | $112.10 | 3 |
| W | 27450 | OSTEOTOMY FEMUR SHAFT OR SUPRACO | 1/1/2007 | $140.08 | 3 |
| W | 27454 | OSTEOTOMY MULTIPLE FEMORAL SHAFT | 1/1/2007 | $172.26 | 3 |
| W | 27455 | OSTEOTOMY PROXIMAL TIBIA INCLUDI | 1/1/2007 | $129.49 | 3 |
| W | 27457 | OSTEOTOMY PROXIMAL TIBIA INCLUDI | 1/1/2007 | $133.49 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 27465 | OSTEOPLASTY FEMUR SHORTENING (EX | 1/1/2007 | $137.90 | 3 |
| W | 27466 | OSTEOPLASTY FEMUR; LENGTHENING | 1/1/2007 | $160.58 | 3 |
| W | 27468 | OSTEOPLASTY FEMUR; COMBINED LENG | 1/1/2007 | $179.73 | 3 |
| W | 27470 | REPAIR NONUNION OR MALUNION FEMU | 1/1/2007 | $159.13 | 3 |
| W | 27472 | REPAIR NONUNION OR MALUNION FEMU | 1/1/2007 | $173.76 | 3 |
| W | 27475 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $89.37 | 3 |
| W | 27477 | TIBIA AND FIBULA PROXIMAL | 1/1/2007 | $100.27 | 3 |
| W | 27479 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $130.94 | 3 |
| W | 27485 | ARREST HEMIEPIPHYSEAL DISTAL FEM | 1/1/2007 | $92.28 | 3 |
| W | 27486 | REVISION OF TOTAL KNEE ATHROPLAS | 1/1/2007 | $187.51 | 3 |
| W | 27487 | REVISION OF TOTAL KNEE ARTHROPLA | 1/1/2007 | $239.88 | 3 |
| W | 27488 | REMOVAL OF KNEE PROSTHESIS, INCL | 1/1/2007 | $156.69 | 3 |
| W | 27495 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $154.04 | 3 |
| W | 27500 | CLOSED TREATMENT OF FEMORAL SHAF | 1/1/2007 | $339.17 | 3 |
| W | 27501 | CLOSED TREATMENT OF SUPRACONDYLA | 1/1/2007 | $330.86 | 3 |
| W | 27502 | CLOSED TREATMENT OF FEMORAL SHAF | 1/1/2007 | $531.20 | 3 |
| W | 27506 | OPEN TREATMENT OF FEMORAL SHAFT | 1/1/2007 | $172.67 | 3 |
| W | 27507 | OPEN TREATMENT OF FEMORAL SHAFT | 1/1/2007 | $136.29 | 3 |
| W | 27508 | CLOSED TREATMENT OF FEMORAL FRAC | 1/1/2007 | $344.36 | 3 |
| W | 27511 | OPEN TREATMENT OF FEMORAL SUPRAC | 1/1/2007 | $141.27 | 3 |
| W | 27513 | OPEN TREATMENT OF FEMORAL SUPRAC | 1/1/2007 | $181.29 | 3 |
| W | 27514 | OPEN TREATMENT OF FEMORAL FRACTU | 1/1/2007 | $174.70 | 3 |
| W | 27516 | CLOSED TREATMENT OF DISTAL FEMOR | 1/1/2007 | $325.41 | 3 |
| W | 27519 | OPEN TREATMENT OF DISTAL FEMORAL | 1/1/2007 | $151.39 | 3 |
| W | 27520 | CLOSED TREATMENT OF PATELLAR FRA | 1/1/2007 | $204.49 | 3 |
| W | 27524 | OPEN TREATMENT OF PATELLAR FRACT | 1/1/2007 | $103.70 | 3 |
| W | 27530 | CLOSED TREATMENT OF TIBIAL FRACT | 1/1/2007 | $253.01 | 3 |
| W | 27535 | OPEN TREATMENT OF TIBIAL FRACTUR | 1/1/2007 | $122.59 | 3 |
| W | 27536 | OPEN TREATMENT OF TIBIAL FRACTUR | 1/1/2007 | $155.70 | 3 |
| W | 27540 | OPEN TREATMENT OF INTERCONDYLAR | 1/1/2007 | $129.18 | 3 |
| W | 27550 | CLOSED TREATMENT OF KNEE DISLOAC | 1/1/2007 | $325.41 | 3 |
| W | 27556 | OPEN TREATMENT OF KNEE DISLOCATI | 1/1/2007 | $148.28 | 3 |
| W | 27557 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $170.60 | 3 |
| W | 27558 | OPEN TREATMENT OF KNEE DISLOCATI | 1/1/2007 | $175.68 | 3 |
| W | 27560 | CLOSED TREATMENT OF PATELLAR DIS | 1/1/2007 | $235.11 | 3 |
| W | 27566 | OPEN TREATMENT OF PATELLAR DISLO | 1/1/2007 | $122.90 | 3 |
| W | 27580 | FUSION OF KNEE ANY TECHNIQUE | 1/1/2007 | $194.88 | 3 |
| W | 27590 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $106.08 | 3 |
| W | 27591 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $121.19 | 3 |
| W | 27592 | AMPUTATION THIGH THROUGH FEMUR A | 1/1/2007 | $91.55 | 3 |
| W | 27598 | DISARTICULATION AT KNEE | 1/1/2007 | $99.65 | 3 |
| W | 27599 | UNLISTED PROCEDURE FEMUR OR KNEE | 2/1/1994 | $0.01 | 5 |
| W | 27600 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $57.30 | 3 |
| W | 27601 | DECOMPRESSION FASCIOTOMY, LEG: P | 1/1/2007 | $58.60 | 3 |
| W | 27602 | DECOMPRESSION FASCIOTOMY, LEG; A | 1/1/2007 | $70.48 | 3 |
| W | 27606 | TENOTOMY ACHILLES TENDON SUBCUTA | 1/1/2007 | $42.51 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 27612 | ARTHROTOMY ANKLE POSTERIOR CAPSU | 1/1/2007 | $75.57 | 3 |
| W | 27613 | BIOPSY SOFT TISSUES SUPERFICIAL | 1/1/2007 | $145.58 | 3 |
| W | 27620 | ARTHROTOMY, ANKLE, W/JOINT EXPLO | 1/1/2007 | $64.46 | 3 |
| W | 27625 | ARTHROTOMY, ANKLE, WITH SYNOVECT | 1/1/2007 | $83.30 | 3 |
| W | 27626 | ARTHROTOMY ANKLE FOR SYNOVECTOMY | 1/1/2007 | $89.89 | 3 |
| W | 27635 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $82.21 | 3 |
| W | 27637 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $102.81 | 3 |
| W | 27638 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $107.43 | 3 |
| W | 27640 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $122.33 | 3 |
| W | 27641 | PARTIAL EXCISION (CRATERIZATION | 1/1/2007 | $98.87 | 3 |
| W | 27645 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $148.64 | 3 |
| W | 27646 | RESECTION FOR TUMOR RADICAL; FIB | 1/1/2007 | $133.64 | 3 |
| W | 27647 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $112.10 | 3 |
| W | 27650 | REPAIR PRIMARY OPEN OR PERCUTANE | 1/1/2007 | $97.57 | 3 |
| W | 27652 | SUTURE PRIMARY RUPTURED ACHILLES | 1/1/2007 | $104.16 | 3 |
| W | 27654 | REPAIR SECONDARY RUPTURED ACHILL | 1/1/2007 | $97.26 | 3 |
| W | 27656 | REPAIR FASCIAL DEFECT OF LEG | 1/1/2007 | $71.62 | 3 |
| W | 27658 | REPAIR OR SUTURE OF FLEXOR TENDO | 1/1/2007 | $53.61 | 3 |
| W | 27659 | REPAIR OR SUTURE OF FLEXOR TENDO | 1/1/2007 | $70.32 | 3 |
| W | 27665 | REPAIR OR SUTURE OF EXTENSOR TEN | 1/1/2007 | $58.44 | 3 |
| W | 27675 | REPAIR FOR DISLOCATING PERONEAL | 1/1/2007 | $72.82 | 3 |
| W | 27676 | REPAIR FOR DISLOCATING PERONEAL | 1/1/2007 | $85.89 | 3 |
| W | 27680 | TENOLYSIS INCLUDING TIBIA FIBULA | 1/1/2007 | $61.14 | 3 |
| W | 27681 | TENOLYSIS INCLUDING TIBIA FIBULA | 1/1/2007 | $72.09 | 3 |
| W | 27685 | LENGTHENING OR SHORTENING OF TEN | 1/1/2007 | $76.66 | 3 |
| W | 27686 | LENGTHENING OR SHORTENING OF TEN | 1/1/2007 | $78.89 | 3 |
| W | 27687 | GASTROCNEMIUS RECESSION (EG STRA | 1/1/2007 | $65.19 | 3 |
| W | 27690 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $85.12 | 3 |
| W | 27691 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $100.53 | 3 |
| W | 27692 | TRANSFER OR TRANSPLANT OF SINGLE | 1/1/2007 | $16.19 | 3 |
| W | 27695 | SUTURE PRIMARY TORN RUPTURED OR | 1/1/2007 | $69.75 | 3 |
| W | 27696 | SUTURE PRIMARY TORN RUPTURED OR | 1/1/2007 | $82.99 | 3 |
| W | 27698 | SUTURE SECONDARY REPAIR TORN RUP | 1/1/2007 | $92.28 | 3 |
| W | 27700 | ARTHROPLASTY ANKLE | 1/1/2007 | $84.49 | 3 |
| W | 27702 | ARTHROPLASTY ANKLE; WITH IMPLANT | 1/1/2007 | $137.59 | 3 |
| W | 27703 | ARTHOPLASTY ANKLE SECONDARY RECO | 1/1/2007 | $155.03 | 3 |
| W | 27704 | REMOVAL OF ANKLE IMPLANT | 1/1/2007 | $75.20 | 3 |
| W | 27705 | OSTEOTOMY TIBIA | 1/1/2007 | $105.62 | 3 |
| W | 27707 | OSTEOTOMY; FIBULA | 1/1/2007 | $52.26 | 3 |
| W | 27709 | OSTEOTOMY; TIBIA AND FIBULA | 1/1/2007 | $102.87 | 3 |
| W | 27712 | OSTEOTOMY; MULTIPLE WITH REALIGN | 1/1/2007 | $142.57 | 3 |
| W | 27715 | OSTEOPLASTY TIBIA AND FIBULA LEN | 1/1/2007 | $143.56 | 3 |
| W | 27720 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $120.62 | 3 |
| W | 27722 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $119.42 | 3 |
| W | 27724 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $175.06 | 3 |
| W | 27725 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $156.84 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 27727 | REPAIR OF CONGENITAL PSEUDARTHRO | 1/1/2007 | $139.04 | 3 |
| W | 27730 | ARREST, EPIPHYSEAL (EPIPHYSIODES | 1/1/2007 | $80.76 | 3 |
| W | 27732 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $57.19 | 3 |
| W | 27734 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $83.66 | 3 |
| W | 27740 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $98.19 | 3 |
| W | 27742 | EPIPHYSEAL ARREST BY EPIPHYSIODE | 1/1/2007 | $91.60 | 3 |
| W | 27745 | PROPHYLACTIC TREATMENT (NAILING | 1/1/2007 | $103.75 | 3 |
| W | 27750 | CLOSED TREATMENT OF TIBIAL SHAFT | 1/1/2007 | $220.83 | 3 |
| W | 27756 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $74.84 | 3 |
| W | 27758 | OPEN TREATMENT OF TIBIAL SHAFT F | 1/1/2007 | $118.80 | 3 |
| W | 27759 | TREATMENT OF TIBIAL SHAFT FRACTU | 1/1/2007 | $137.33 | 3 |
| W | 27760 | CLOSED TREATMENT OF MEDIAL MALLE | 1/1/2007 | $212.27 | 3 |
| W | 27766 | OPEN TREATMENT OF MEDIAL MALLEOL | 1/1/2007 | $88.39 | 3 |
| W | 27780 | CLOSED TREATMENT OF PROXIMAL FIB | 1/1/2007 | $188.14 | 3 |
| W | 27784 | OPEN TREATMENT OF PROXIMAL FIBUL | 1/1/2007 | $76.92 | 3 |
| W | 27786 | CLOSED TREATMENT OF DISTAL FIBUL | 1/1/2007 | $201.63 | 3 |
| W | 27792 | OPEN TREATMENT OF DISTAL FIBULAR | 1/1/2007 | $82.78 | 3 |
| W | 27808 | CLOSED TREATMENT OF BIMALLEOLAR | 1/1/2007 | $210.20 | 3 |
| W | 27814 | OPEN TREATMENT OF BIMALLEOLAR AN | 1/1/2007 | $109.46 | 3 |
| W | 27816 | CLOSED TREATMENT OF TRIMALLEOLAR | 1/1/2007 | $200.07 | 3 |
| W | 27822 | OPEN TREATMENT OF TRIMALLEOLAR A | 1/1/2007 | $122.33 | 3 |
| W | 27823 | OPEN TREATMENT OF TRIMALLEOLAR A | 1/1/2007 | $138.73 | 3 |
| W | 27824 | CLOSED TREATMENT OF FRACTURE OF | 1/1/2007 | $192.29 | 3 |
| W | 27826 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $97.83 | 3 |
| W | 27827 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $151.91 | 3 |
| W | 27828 | OPEN TREATMENT OF FRACTURE OF WE | 1/1/2007 | $171.22 | 3 |
| W | 27829 | OPEN TREATMENT OF DISTAL TIBIOFI | 1/1/2007 | $68.66 | 3 |
| W | 27830 | CLOSED TREATMENT OF PROXIMAL TIB | 1/1/2007 | $226.28 | 3 |
| W | 27832 | OPEN TREATMENT OF PROXIMAL TIBIO | 1/1/2007 | $71.10 | 3 |
| W | 27840 | CLOSED TREATMENT OF ANKLE DISLOC | 1/1/2007 | $228.36 | 3 |
| W | 27846 | OPEN TREATMENT OF ANKLE DISLOCAT | 1/1/2007 | $100.84 | 3 |
| W | 27848 | OPEN TREATMENT OF ANKLE DISLOCAT | 1/1/2007 | $118.64 | 3 |
| W | 27870 | ARTHRODESIS, ANKLE, OPEN | 1/1/2007 | $139.09 | 3 |
| W | 27871 | ARTHRODESIS TIBIOFIBULAR JOINT P | 1/1/2007 | $95.24 | 3 |
| W | 27880 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $107.59 | 3 |
| W | 27881 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $120.25 | 3 |
| W | 27882 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $86.78 | 3 |
| W | 27886 | AMPUTATION LEG THROUGH TIBIA AND | 1/1/2007 | $89.48 | 3 |
| W | 27888 | AMPUTATION ANKLE THROUGH MALLEOL | 1/1/2007 | $97.00 | 3 |
| W | 27889 | ANKLE DISARTICULATION | 1/1/2007 | $93.00 | 3 |
| W | 28020 | ARTHROTOMY WITH EXPLORATION DRAI | 1/1/2007 | $60.98 | 3 |
| W | 28030 | NEURECTOMY OF INTRINSIC MUSCULAT | 1/1/2007 | INVALID | N |
| W | 28035 | TARSAL TUNNEL RELEASE (POSTERIOR | 1/1/2007 | $60.46 | 3 |
| W | 28050 | ARTHROTOMY FOR SYNOVIAL BIOPSY I | 1/1/2007 | $50.55 | 3 |
| W | 28060 | FASCIECTOMY EXCISION OF PLANTAR | 1/1/2007 | $59.22 | 3 |
| W | 28062 | FASCIECTOMY EXCISION OF PLANTAR | 1/1/2007 | $71.99 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 28070 | SYNOVECTOMY INTERTARSAL OR TARSO | 1/1/2007 | $57.35 | 3 |
| W | 28072 | SYNOVECTOMY; METATARSOPHALANGEAL | 1/1/2007 | $56.00 | 3 |
| W | 28086 | SYNOVECTOMY TENDON SHEATH FLEXOR | 1/1/2007 | $70.22 | 3 |
| W | 28100 | EXCISION OR CURRETAGE OF BONE CY | 1/1/2007 | $75.00 | 3 |
| W | 28102 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $76.92 | 3 |
| W | 28103 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $62.38 | 3 |
| W | 28104 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $58.70 | 3 |
| W | 28106 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $65.19 | 3 |
| W | 28107 | EXCISION OR CURETTAGE OF BONE CY | 1/1/2007 | $66.59 | 3 |
| W | 28110 | OSTECTOMY PARTIAL EXCISION FIFTH | 1/1/2007 | $51.07 | 3 |
| W | 28111 | OSTECTOMY COMPLETE EXCISION FIRS | 1/1/2007 | $62.07 | 3 |
| W | 28112 | OSTECTOMY COMPLETE EXCISION; OTH | 1/1/2007 | $56.62 | 3 |
| W | 28114 | OSTECTOMY, COMP EXCISION; ALL ME | 1/1/2007 | $118.59 | 3 |
| W | 28118 | OSTECTOMY, CALCANEUS | 1/1/2007 | $67.73 | 3 |
| W | 28119 | OSTECTOMY CALCANEUS; FOR SPUR WI | 1/1/2007 | $59.79 | 3 |
| W | 28122 | PART EXCISION(CRATERIZATION,SAUC | 1/1/2007 | $78.42 | 3 |
| W | 28130 | TALECTOMY (ASTRAGALECTOMY) | 1/1/2007 | $83.51 | 3 |
| W | 28171 | RADICAL RESECTION OF TUMOR, BONE | 1/1/2007 | $84.91 | 3 |
| W | 28190 | REMOVE FOREIGN BODY SUBCUTANEOUS | 1/1/2007 | $144.80 | 3 |
| W | 28192 | REMOVE FOREIGN BODY; DEEP | 1/1/2007 | $278.44 | 3 |
| W | 28200 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $53.46 | 3 |
| W | 28202 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $77.69 | 3 |
| W | 28208 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $50.65 | 3 |
| W | 28210 | REPAIR OR SUTURE OF TENDON FOOT | 1/1/2007 | $69.44 | 3 |
| W | 28238 | RECONSTRUCTION, POSTERIOR TIBIAL | 1/1/2007 | $83.25 | 3 |
| W | 28250 | DIVISION OF PLANTAR FASCIA AND M | 1/1/2007 | $64.20 | 3 |
| W | 28260 | CAPSULOTOMY MIDFOOT MEDIAL RELEA | 1/1/2007 | $80.08 | 3 |
| W | 28262 | CAPSULOTOMY,MIDFOOT;EXTEN,INCL P | 1/1/2007 | $166.03 | 3 |
| W | 28264 | CAPSULOTOMY MIDTARSAL (HEYMAN TY | 1/1/2007 | $101.83 | 3 |
| W | 28285 | HAMMERTOE OPERATION; ONE TOE (EG | 1/1/2007 | $52.11 | 3 |
| W | 28292 | HALLUX VALGUS (BUNION) CORRECTIO | 10/1/2003 | NC | 9 |
| W | 28294 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $88.70 | 3 |
| W | 28296 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $96.17 | 3 |
| W | 28297 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $101.00 | 3 |
| W | 28298 | HALLUX VALGUS (BUNION) CORRECTIO | 1/1/2007 | $84.13 | 3 |
| W | 28299 | CORRECTION, HALLUX VALGUS (BUNIO | 1/1/2007 | $107.54 | 3 |
| W | 28300 | OSTEOTOMY CALCANEUS (DWYER OR CH | 1/1/2007 | $94.04 | 3 |
| W | 28302 | OSTEOTOMY; TALUS | 1/1/2007 | $92.69 | 3 |
| W | 28304 | OSTEOTOMY MIDTARSAL BONES OTHER | 1/1/2007 | $95.39 | 3 |
| W | 28305 | OSTEOTOMY MIDTARSAL BONES OTHER | 1/1/2007 | $95.96 | 3 |
| W | 28306 | OSTEOTOMY, METATARSAL, BASE/SHAF | 1/1/2007 | $70.27 | 3 |
| W | 28308 | OSTEOTOMY METATARSAL BASE OR SHA | 1/1/2007 | $60.93 | 3 |
| W | 28309 | OSTEOTOMY METATARSALS MULTIPLE F | 1/1/2007 | $118.18 | 3 |
| W | 28310 | OSTEOTOMY FOR SHORTENING ANGULAR | 1/1/2007 | $61.66 | 3 |
| W | 28312 | OSTEOTOMY FOR SHORTENING ANGULAR | 1/1/2007 | $55.12 | 3 |
| W | 28315 | SESAMOIDECTOMY FIRST TOE (SEPARA | 1/1/2007 | $53.87 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 28320 | REPAIR OF NONUNION OR MALUNION T | 1/1/2007 | $89.94 | 3 |
| W | 28322 | REPAIR OF NONUNION OR MALUNION M | 1/1/2007 | $97.57 | 3 |
| W | 28340 | RECONSTRUCTION, TOE, MACRODACTYL | 1/1/2007 | $74.06 | 3 |
| W | 28341 | RECONSTRUCTION, TOE, MACRODACTYL | 1/1/2007 | $84.91 | 3 |
| W | 28344 | RECONSTRUCTION, TOE(S); POLYDACT | 1/1/2007 | $54.60 | 3 |
| W | 28360 | RECONSTRUCTION, CLEFT FOOT | 1/1/2007 | $135.56 | 3 |
| W | 28400 | CLOSED TREATMENT OF CALCANEAL FR | 1/1/2007 | $159.59 | 3 |
| W | 28415 | OPEN TREATMENT OF CALCANEAL FRAC | 1/1/2007 | $165.72 | 3 |
| W | 28420 | OPEN TREATMENT OF CLOSED OR OPEN | 1/1/2007 | $168.00 | 3 |
| W | 28430 | CLOSED TREATMENT OF TALUS FRACTU | 1/1/2007 | $150.51 | 3 |
| W | 28436 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $59.37 | 3 |
| W | 28445 | OPEN TREATMENT OF TALUS FRACTURE | 1/1/2007 | $151.76 | 3 |
| W | 28456 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $37.78 | 3 |
| W | 28470 | CLOSED TREATMENT OF METATARSAL F | 1/1/2007 | $140.65 | 3 |
| W | 28485 | OPEN TREATMENT OF METATARSAL FRA | 1/1/2007 | $62.23 | 3 |
| W | 28490 | CLOSED TREATMENT OF FRACTURE GRE | 1/1/2007 | $84.34 | 3 |
| W | 28496 | PERCUTANEOUS SKELETAL FIXATION O | 1/1/2007 | $56.88 | 3 |
| W | 28510 | CLOSED TREATMENT OF FRACTURE, PH | 1/1/2007 | $71.62 | 3 |
| W | 28540 | CLOSED TREATMENT OF TARSAL BONE | 1/1/2007 | $122.22 | 3 |
| W | 28555 | OPEN TREATMENT OF TARSAL BONE DI | 1/1/2007 | $89.58 | 3 |
| W | 28570 | CLOSED TREATMENT OF TALOTARSAL J | 1/1/2007 | $112.10 | 3 |
| W | 28585 | OPEN TREATMENT OF TALOTARSAL JOI | 1/1/2007 | $86.00 | 3 |
| W | 28600 | CLOSED TREATMENT OF TARSOMETATAR | 1/1/2007 | $129.23 | 3 |
| W | 28615 | OPEN TREATMENT OF TARSOMETATARSA | 1/1/2007 | $88.85 | 3 |
| W | 28630 | CLOSED TREATMENT OF METATARSOPHA | 1/1/2007 | $90.05 | 3 |
| W | 28645 | OPEN TREATMENT OF METATARSOPHALA | 1/1/2007 | $50.55 | 3 |
| W | 28660 | CLOSED TREATMENT OF INTERPHALANG | 1/1/2007 | $67.99 | 3 |
| W | 28675 | OPEN TREATMENT OF INTERPHALANGEA | 1/1/2007 | $54.65 | 3 |
| W | 28705 | PANTALAR ARTHRODESIS | 1/1/2007 | $178.12 | 3 |
| W | 28715 | TRIPLE ARTHRODESIS | 1/1/2007 | $129.85 | 3 |
| W | 28725 | SUBTALAR ARTHRODESIS | 1/1/2007 | $112.67 | 3 |
| W | 28730 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $108.68 | 3 |
| W | 28735 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $105.62 | 3 |
| W | 28737 | ARTHRODESIS, WITH TENDON LENGTHE | 1/1/2007 | $93.00 | 3 |
| W | 28740 | ARTHRODESIS MIDTARSAL OR TARSOME | 1/1/2007 | $104.42 | 3 |
| W | 28755 | ARTHRODESIS GREAT TOE; INTERPHAL | 1/1/2007 | $59.69 | 3 |
| W | 28760 | ARTHRODESIS GREAT TOE INTERPHALA | 1/1/2007 | $87.09 | 3 |
| W | 28800 | AMPUTATION FOOT MIDTARSAL (CHOPA | 1/1/2007 | $78.68 | 3 |
| W | 28899 | UNLISTED PROCEDURE FOOT OR TOES | 2/1/1994 | $0.01 | 5 |
| W | 29049 | APPLICATION, CAST; FIGURE-OF-EIG | 1/1/2007 | $60.20 | 3 |
| W | 29055 | APPLICATION; SHOULDER SPICA | 1/1/2007 | $131.57 | 3 |
| W | 29058 | APPLICATION; PLASTER VELPEAU | 1/1/2007 | $78.89 | 3 |
| W | 29065 | APPLICATION; SHOULDER TO HAND (L | 1/1/2007 | $60.98 | 3 |
| W | 29075 | APPLICATION; ELBOW TO FINGER (SH | 1/1/2007 | $56.05 | 3 |
| W | 29085 | APPLICATION; HAND AND LOWER FORE | 1/1/2007 | $59.43 | 3 |
| W | 29105 | APPLICATION OF LONG ARM SPLINT ( | 1/1/2007 | $57.61 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 29125 | APPLICATION OF SHORT ARM SPLINT | 1/1/2007 | $43.60 | 3 |
| W | 29126 | APPLICATION OF SHORT ARM SPLINT | 1/1/2007 | $53.20 | 3 |
| W | 29130 | APPLICATION OF FINGER SPLINT STA | 1/1/2007 | $26.73 | 3 |
| W | 29131 | APPLICATION OF FINGER SPLINT; DY | 1/1/2007 | $34.25 | 3 |
| W | 29200 | STRAPPING THORAX | 1/1/2007 | $36.59 | 3 |
| W | 29220 | STRAPPING; LOW BACK | 1/1/2007 | $36.33 | 3 |
| W | 29240 | STRAPPING; SHOULDER (EG VELPEAU) | 1/1/2007 | $42.04 | 3 |
| W | 29260 | STRAPPING; ELBOW OR WRIST | 1/1/2007 | $34.77 | 3 |
| W | 29280 | STRAPPING; HAND OR FINGER | 1/1/2007 | $34.77 | 3 |
| W | 29305 | APPLICATION OF HIP SPICA CAST; O | 1/1/2007 | $148.69 | 3 |
| W | 29325 | APPLICATION OF HIP SPICA CAST; O | 1/1/2007 | $162.45 | 3 |
| W | 29345 | APPLICATION OF LONG LEG CAST (TH | 1/1/2007 | $88.49 | 3 |
| W | 29355 | APPLICATION OF LONG LEG CAST (TH | 1/1/2007 | $90.83 | 3 |
| W | 29358 | APPLICATION OF LONG LEG CAST BRA | 1/1/2007 | $97.31 | 3 |
| W | 29365 | APPLICATION OF CYLINDER CAST (TH | 1/1/2007 | $78.89 | 3 |
| W | 29405 | APPLICATION OF SHORT LEG CAST (B | 1/1/2007 | $57.61 | 3 |
| W | 29425 | APPLICATION OF SHORT LEG CAST (B | 1/1/2007 | $62.02 | 3 |
| W | 29435 | APPLICATION OF PATELLAR TENDON B | 1/1/2007 | $76.29 | 3 |
| W | 29440 | ADDING WALKER TO PREVIOUSLY APPL | 1/1/2007 | $34.77 | 3 |
| W | 29450 | APPLICATION OF CLUBFOOT CAST WIT | 1/1/2007 | $99.13 | 3 |
| W | 29505 | APPLICATION OF LONG LEG SPLINT ( | 1/1/2007 | $50.60 | 3 |
| W | 29515 | APPLICATION OF SHORT LEG SPLINT | 1/1/2007 | $43.86 | 3 |
| W | 29520 | STRAPPING HIP | 1/1/2007 | $36.85 | 3 |
| W | 29530 | STRAPPING; KNEE | 1/1/2007 | $36.59 | 3 |
| W | 29540 | STRAPPING; ANKLE AND/OR FOOT | 1/1/2007 | $25.69 | 3 |
| W | 29550 | STRAPPING; TOES | 1/1/2007 | $24.65 | 3 |
| W | 29580 | STRAPPING; UNNA BOOT | 1/1/2007 | $33.48 | 3 |
| W | 29590 | DENIS-BROWNE SPLINT STRAPPING | 1/1/2007 | $35.29 | 3 |
| W | 29700 | REMOVAL OR BIVALVING GAUNTLET BO | 1/1/2007 | $39.96 | 3 |
| W | 29705 | REMOVAL OR BIVALVING; FULL ARM O | 1/1/2007 | $44.37 | 3 |
| W | 29710 | REMOVAL OR BIVALVING; SHOULDER O | 1/1/2007 | $79.67 | 3 |
| W | 29715 | REMOVAL OR BIVALVING; TURNBUCKLE | 1/1/2007 | $57.09 | 3 |
| W | 29720 | REPAIR OF SPICA BODY CAST OR JAC | 1/1/2007 | $50.86 | 3 |
| W | 29730 | WINDOWING OF CAST | 1/1/2007 | $43.60 | 3 |
| W | 29740 | WEDGING OF CAST (EXCEPT CLUBFOOT | 1/1/2007 | $63.58 | 3 |
| W | 29750 | WEDGING OF CLUBFOOT CAST | 1/1/2007 | $65.65 | 3 |
| W | 29804 | ARTHROSCOPY, TEMPROMANDIBULAR JO | 1/1/2007 | $89.01 | 3 |
| W | 29815 | ARTHROSCOPY SHOULDER DIAGNOSTIC | 4/1/2002 | INVALID | N |
| W | 29819 | ARTHROSCOPY SHOULDER SURGICAL; W | 1/1/2007 | $81.69 | 3 |
| W | 29820 | ARTHROSCOPY SHOULDER SURGICAL; S | 1/1/2007 | $75.36 | 3 |
| W | 29821 | ARTHROSCOPY SHOULDER SURGICAL; S | 1/1/2007 | $82.31 | 3 |
| W | 29822 | ARTHROSCOPY SHOULDER SURGICAL; D | 1/1/2007 | $79.98 | 3 |
| W | 29823 | ARTHROSCOPY SHOULDER SURGICAL; D | 1/1/2007 | $87.24 | 3 |
| W | 29824 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $89.32 | 3 |
| W | 29825 | ARTHROSCOPY SHOULDER SURGICAL WI | 1/1/2007 | $81.53 | 3 |
| W | 29826 | ARTHROSCOPY, SHOULDER, SURGICAL; | 1/1/2007 | $93.84 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 29830 | ARTHROSCOPY ELBOW DIAGNOSTIC WIT | 1/1/2007 | $62.80 | 3 |
| W | 29834 | ARTHROSCOPY ELBOW SURGICAL; WITH | 1/1/2007 | $68.51 | 3 |
| W | 29835 | ARTHROSCOPY ELBOW SURGICAL; SYNO | 1/1/2007 | $70.07 | 3 |
| W | 29836 | ARTHROSCOPY ELBOW SURGICAL; SYNO | 1/1/2007 | $80.81 | 3 |
| W | 29837 | ARTHROSCOPY ELBOW SURGICAL; DEBR | 1/1/2007 | $73.70 | 3 |
| W | 29847 | ARTHROSCOPY, WRIST, SURGICAL; IN | 1/1/2007 | $74.53 | 3 |
| W | 29855 | ARTHROSCOPICALLY AIDED TREATMENT | 1/1/2007 | $110.18 | 3 |
| W | 29874 | ARTHROSCOPY KNEE SURGICAL FOR RE | 1/1/2007 | $73.91 | 3 |
| W | 29875 | ARTHROSCOPY, KNEE, SURGICAL; SYN | 1/1/2007 | $68.82 | 3 |
| W | 29876 | ARTHROSCOPY KNEE SURGICAL SYNOVE | 1/1/2007 | $84.70 | 3 |
| W | 29877 | ARTHROSCOPY KNEE SURGICAL; DEBRI | 1/1/2007 | $79.82 | 3 |
| W | 29879 | ARTHROSCOPY KNEE SURGICAL ABRASI | 1/1/2007 | $85.95 | 3 |
| W | 29880 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 1/1/2007 | $89.99 | 3 |
| W | 29881 | ARTHROSCOPY KNEE SURGICAL WITH M | 1/1/2007 | $83.40 | 3 |
| W | 29882 | ARTHROSCOPY KNEE SURGICAL; WITH | 1/1/2007 | $90.31 | 3 |
| W | 29883 | ARTHROSCOPY, KNEE, SURGICAL; WIT | 1/1/2007 | $114.39 | 3 |
| W | 29884 | ARTHROSCOPY KNEE SURGICAL WITH L | 1/1/2007 | $79.46 | 3 |
| W | 29885 | ARTHROSCOPY,KNEE,SURG;DRILL FOR | 1/1/2007 | $96.79 | 3 |
| W | 29886 | ARTHROSCOPY KNEE SURGICAL; DRILL | 1/1/2007 | $81.48 | 3 |
| W | 29887 | ARTHROSCOPY KNEE SURGICAL DRILLI | 1/1/2007 | $96.27 | 3 |
| W | 29888 | ARTHROSCOPICALLY AIDED INTERIOR | 1/1/2007 | $137.64 | 3 |
| W | 29889 | ARTHROSCOPICALLY AIDED POSTERIOR | 1/1/2007 | $162.08 | 3 |
| W | 29894 | ARTHROSCOPY, ANKLE (TIBIOTALAR & | 1/1/2007 | $71.83 | 3 |
| W | 29895 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $70.48 | 3 |
| W | 29897 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $73.91 | 3 |
| W | 29898 | ARTHROSCOPY, ANKLE (TIBIOTALAR A | 1/1/2007 | $82.00 | 3 |
| W | 29909 | UNLISTED PROCEDURE ARTHROSCOPY | 4/1/2002 | INVALID | N |
| W | 29999 | UNLISTED PROCEDURE, ARTHROSCOPY | 2/14/2002 | $0.01 | 5 |
| W | 30000 | DRAINAGE ABSCESS OR HEMATOMA NAS | 1/1/2007 | $146.10 | 3 |
| W | 30020 | DRAINAGE ABSCESS OR HEMATOMA NAS | 1/1/2007 | $125.34 | 3 |
| W | 30100 | BIOPSY INTRANASAL | 1/1/2007 | $77.59 | 3 |
| W | 30110 | EXCISION, NASAL POLYP(S), SIMPLE | 1/1/2007 | $130.27 | 3 |
| W | 30118 | EXCISION INTRANASAL LESION; EXTE | 1/1/2007 | $102.14 | 3 |
| W | 30120 | EXCISION OR SURGICAL PLANING OF | 4/1/1982 | NC | 9 |
| W | 30125 | EXCISION DERMOID CYST NOSE; COMP | 1/1/2007 | $83.66 | 3 |
| W | 30160 | RHINECTOMY; TOTAL | 1/1/2007 | $107.38 | 3 |
| W | 30410 | RHINOPLASTY PRIMARY COMPLETE EXT | 1/1/2007 | $170.23 | 3 |
| W | 30430 | RHINOPLASTY SECONDARY MINOR REVI | 1/1/2007 | $124.72 | 3 |
| W | 30435 | RHINOPLASTY SECONDARY; INTERMEDI | 1/1/2007 | $167.74 | 3 |
| W | 30450 | RHINOPLASTY SECONDARY; MAJOR REV | 1/1/2007 | $220.73 | 3 |
| W | 30465 | REPAIR OF NASAL VESTIBULAR STENO | 1/1/2007 | $128.09 | 3 |
| W | 30540 | REPAIR CHOANAL ATRESIA INTRANASA | 1/1/2007 | $91.91 | 3 |
| W | 30545 | REPAIR CHOANAL ATRESIA; TRANSPAL | 1/1/2007 | $129.70 | 3 |
| W | 30901 | CONTROL NASAL HEMORRHAGE,ANTERIO | 1/1/2007 | $69.55 | 3 |
| W | 30903 | CONTROL NASAL HEMORRHAGE,ANTERIO | 1/1/2007 | $113.92 | 3 |
| W | 30930 | FRACTURE NASAL INFERIOR TURBINAT | 1/1/2007 | $77.85 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 31075 | SINUSOTOMY FRONTAL TRANSORBITAL | 1/1/2007 | $102.04 | 3 |
| W | 31080 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $135.98 | 3 |
| W | 31081 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $151.70 | 3 |
| W | 31084 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $146.46 | 3 |
| W | 31085 | SINUSOTOMY FRONTAL OBLITERATIVE | 1/1/2007 | $155.18 | 3 |
| W | 31086 | SINUSOTOMY FRONTAL NONOBLITERATI | 1/1/2007 | $141.32 | 3 |
| W | 31087 | SINUSOTOMY FRONTAL NONOBLITERATI | 1/1/2007 | $140.60 | 3 |
| W | 31205 | ETHMOIDECTOMY; EXTRANASAL TOTAL | 1/1/2007 | $118.33 | 3 |
| W | 31225 | MAXILLECTOMY WITHOUT ORBITAL EXE | 1/1/2007 | $200.65 | 3 |
| W | 31230 | MAXILLECTOMY; WITH ORBITAL EXENT | 1/1/2007 | $223.69 | 3 |
| W | 31300 | LARYNGOTOMY (THYROTOMY LARYNGOFI | 1/1/2007 | $158.09 | 3 |
| W | 31360 | LARYNGECTOMY TOTAL WITHOUT RADIC | 1/1/2007 | $182.69 | 3 |
| W | 31365 | LARYNGECTOMY; TOTAL WITH RADICAL | 1/1/2007 | $241.39 | 3 |
| W | 31367 | LARYNGECTOMY; SUBTOTAL SUPRAGLOT | 1/1/2007 | $236.46 | 3 |
| W | 31368 | LARYNGECTOMY; SUBTOTAL SUPRAGLOT | 1/1/2007 | $284.46 | 3 |
| W | 31370 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $235.68 | 3 |
| W | 31375 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $219.28 | 3 |
| W | 31380 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $220.78 | 3 |
| W | 31382 | PARTIAL LARYNGECTOMY (HEMILARYNG | 1/1/2007 | $227.48 | 3 |
| W | 31390 | PHARYNGOLARYNGECTOMY WITH RADICA | 1/1/2007 | $281.14 | 3 |
| W | 31395 | PHARYNOGOLARYNGECTOMY WITH RADIC | 1/1/2007 | $321.26 | 3 |
| W | 31400 | ARYTENOIDECTOMY OR ARYTENOIDOPEX | 1/1/2007 | $129.39 | 3 |
| W | 31420 | EPIGLOTTIDECTOMY | 1/1/2007 | $106.91 | 3 |
| W | 31500 | INTUBATION ENDOTRACHEAL EMERGENC | 1/1/2007 | $79.15 | 3 |
| W | 31580 | LARYNGOPLASTY FOR LARYNGEAL WEB | 1/1/2007 | $152.17 | 3 |
| W | 31584 | LARYNGOPLASTY; WITH OPEN REDUCTI | 1/1/2007 | $205.11 | 3 |
| W | 31585 | TREATMENT OF CLOSED LARYNGEAL FR | 1/1/2006 | INVALID | N |
| W | 31586 | TREATMENT OF CLOSED LARYNGEAL FR | 1/1/2006 | INVALID | N |
| W | 31587 | LARYNGOPLASTY, CRICOID SPLIT | 1/1/2007 | $115.37 | 3 |
| W | 31588 | LARYNGOPLASTY, NOT OTHERWISE SPE | 1/1/2007 | $144.28 | 3 |
| W | 31590 | LARYNGEAL REINNERVATION BY NEURO | 1/1/2007 | $121.34 | 3 |
| W | 31595 | SECTION RECURRENT LARYNGEAL NERV | 1/1/2007 | $101.67 | 3 |
| W | 31601 | TRACHEOSTOMY PLANNED (SEPARATE P | 1/1/2007 | $37.63 | 3 |
| W | 31611 | CONSTRUCTION OF TRACHEOESOPHAGEA | 1/1/2007 | $68.35 | 3 |
| W | 31615 | TRACHEOBRONCHOSCOPY THROUGH ESTA | 1/1/2007 | $125.86 | 3 |
| W | 31700 | CATHETERIZATION TRANSGLOTTIC (SE | 1/1/2007 | INVALID | N |
| W | 31708 | INSTILLATION OF CONTRAST MATERIA | 1/1/2007 | INVALID | N |
| W | 31710 | CATHETERIZATION FOR BRONCHOGRAPH | 1/1/2007 | INVALID | N |
| W | 31750 | TRACHEOPLASTY; CERVICAL | 1/1/2007 | $164.26 | 3 |
| W | 31755 | TRACHEOPLASTY; TRACHEOPHARYNGEAL | 1/1/2007 | $216.89 | 3 |
| W | 31760 | TRACHEOPLASTY; INTRATHORACIC | 1/1/2007 | $186.84 | 3 |
| W | 31766 | CARINAL RECONSTRUCTION | 1/1/2007 | $252.18 | 3 |
| W | 31770 | BRONCHOPLASTY GRAFT REPAIR | 1/1/2007 | $184.66 | 3 |
| W | 31775 | BRONCHOPLASTY; EXCISION STENOSIS | 1/1/2007 | $198.93 | 3 |
| W | 31780 | EXCISION TRACHEAL STENOSIS AND A | 1/1/2007 | $157.88 | 3 |
| W | 31781 | EXCISION TRACHEAL STENOSIS AND A | 1/1/2007 | $196.65 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 31785 | EXCISION TRACHEAL TUMOR OR CARCI | 1/1/2007 | $150.51 | 3 |
| W | 31786 | EXCISION OF TRACHEAL TUMOR OR CA | 1/1/2007 | $209.47 | 3 |
| W | 31800 | SUTURE OF TRACHEAL WOUND OR INJU | 1/1/2007 | $453.61 | 3 |
| W | 31805 | SUTURE OF EXTERNAL TRACHEAL WOUN | 1/1/2007 | $115.01 | 3 |
| W | 32035 | THORACOSTOMY WITH RIB RESECTION | 1/1/2007 | $81.95 | 3 |
| W | 32036 | THORACOSTOMY; WITH OPEN FLAP DRA | 1/1/2007 | $91.08 | 3 |
| W | 32095 | THOROACOTOMY LIMITED FOR BIOPSY | 1/1/2007 | $77.59 | 3 |
| W | 32100 | THORACOTOMY MAJOR WITH EXPLORATI | 1/1/2007 | $131.26 | 3 |
| W | 32110 | THORACOTOMY MAJOR WITH CONTROL O | 1/1/2007 | $191.72 | 3 |
| W | 32120 | THORACOTOMY MAJOR; FOR POSTOPERA | 1/1/2007 | $105.05 | 3 |
| W | 32124 | THORACOTOMY MAJOR; WITH OPEN INT | 1/1/2007 | $113.25 | 3 |
| W | 32140 | THORACOTOMY MAJOR; WITH CYST(S) | 1/1/2007 | $122.33 | 3 |
| W | 32141 | THORACOTOMY MAJOR; WITH EXCISION | 1/1/2007 | $122.22 | 3 |
| W | 32150 | THORACOTOMY MAJOR; WITH REMOVAL | 1/1/2007 | $123.26 | 3 |
| W | 32151 | THORACOTOMY MAJOR; WITH REMOVAL | 1/1/2007 | $125.81 | 3 |
| W | 32160 | THORACOTOMY MAJOR; WITH CARDIAC | 1/1/2007 | $82.42 | 3 |
| W | 32200 | PNEUMONOSTOMY WITH OPEN DRAINAGE | 1/1/2007 | $135.10 | 3 |
| W | 32201 | PNEUMONOSTOMY; WITH PERCUTANEOUS | 1/1/2007 | $129.70 | 3 |
| W | 32215 | PLEURAL SCARIFICATION FOR REPEAT | 1/1/2007 | $103.33 | 3 |
| W | 32220 | DECORTICATION PLUMONARY (SEPARAT | 1/1/2007 | $210.25 | 3 |
| W | 32225 | DECORTICATION PULMONARY (SEPARAT | 1/1/2007 | $122.85 | 3 |
| W | 32310 | PLEURECTOMY, PARIETAL (SEPARATE | 1/1/2007 | $118.44 | 3 |
| W | 32320 | DECORTICATION AND PARIETAL PLEUR | 1/1/2007 | $205.84 | 3 |
| W | 32402 | BIOPSY PLEURA; OPEN | 1/1/2007 | $71.31 | 3 |
| W | 32440 | REMOVAL OF LUNG, TOTAL PNEUMONEC | 1/1/2007 | $215.75 | 3 |
| W | 32442 | REMOVALK OF LUNG, WITH RESECTION | 1/1/2007 | $232.72 | 3 |
| W | 32445 | REMOVAL OF LUNG, TOTAL PNEUMONEC | 1/1/2007 | $222.44 | 3 |
| W | 32480 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $203.92 | 3 |
| W | 32482 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $215.75 | 3 |
| W | 32484 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $182.17 | 3 |
| W | 32486 | REMOVAL OF LUNG, WITH CIRCUMFERE | 1/1/2007 | $211.08 | 3 |
| W | 32488 | REMOVAL OF LUNG, ALL REMAINING L | 1/1/2007 | $224.68 | 3 |
| W | 32500 | REMOVAL OF LUNG, OTHER THAN TOTA | 1/1/2007 | $195.20 | 3 |
| W | 32501 | RESECTION AND REPAIR OF PORTION | 1/1/2007 | $35.66 | 3 |
| W | 32520 | RESECTION OF LUNG WITH RESECTION | 1/1/2006 | INVALID | N |
| W | 32522 | RESECTION OF LUNG; WITH RECONSTR | 1/1/2006 | INVALID | N |
| W | 32525 | RESECTION OF LUNG; WITH MAJOR RE | 1/1/2006 | INVALID | N |
| W | 32540 | EXTRAPLEURAL ENUCLEATION OF EMPY | 1/1/2007 | $136.76 | 3 |
| W | 32650 | THORACOSCOPY, SURGICAL; WITH PLE | 1/1/2007 | $99.08 | 3 |
| W | 32651 | THORACOSCOPY, SURGICAL; WITH PAR | 1/1/2007 | $114.18 | 3 |
| W | 32652 | THORACOSCOPY, SURGICAL; WITH TOT | 1/1/2007 | $163.59 | 3 |
| W | 32653 | THORACOSCOPY, SURGICAL; WITH REM | 1/1/2007 | $112.73 | 3 |
| W | 32654 | THORACOSCOPY, SURGICAL; WITH CON | 1/1/2007 | $112.10 | 3 |
| W | 32655 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $115.37 | 3 |
| W | 32656 | THORACOSCOPY, SURGICAL; WITH PAR | 1/1/2007 | $118.02 | 3 |
| W | 32657 | THORACOSCOPY, SURGICAL; WITH WED | 1/1/2007 | $121.03 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 32658 | THORACOSCOPY, SURGICAL; WITH REM | 1/1/2007 | $107.28 | 3 |
| W | 32659 | THORACOSCOPY, SURGICAL; WITH CRE | 1/1/2007 | $107.23 | 3 |
| W | 32660 | THORACOSCOPY, SURGICAL; WITH TOT | 1/1/2007 | $150.46 | 3 |
| W | 32661 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $119.16 | 3 |
| W | 32662 | THORACOSCOPY, SURGICAL; WITH EXC | 1/1/2007 | $142.41 | 3 |
| W | 32663 | THORACOSCOPY, SURGICAL; WITH LOB | 1/1/2007 | $165.82 | 3 |
| W | 32664 | THORACOSCOPY, SURGICAL; WITH THO | 1/1/2007 | $125.34 | 3 |
| W | 32665 | THORACOSCOPY, SURGICAL; WITH ESO | 1/1/2007 | $134.01 | 3 |
| W | 32800 | REPAIR LUNG HERNIA THROUGH CHEST | 1/1/2007 | $119.79 | 3 |
| W | 32810 | CLOSURE OF CHEST WALL FOLLOWING | 1/1/2007 | $116.78 | 3 |
| W | 32815 | OPEN CLOSURE OF MAJOR BRONCHIAL | 1/1/2007 | $194.05 | 3 |
| W | 32820 | MAJOR RECONSTRUCTION CHEST WALL | 1/1/2007 | $187.72 | 3 |
| W | 32851 | LUNG TRANSPLANT, SINGLE; WITHOUT | 1/1/2007 | $373.01 | 3 |
| W | 32852 | LUNG TRANSPLANT, SINGLE; WITH CA | 1/1/2007 | $420.39 | 3 |
| W | 32853 | LUNG TRANSPLANT, DOUBLE; WITHOUT | 1/1/2007 | $449.61 | 3 |
| W | 32854 | LUNG TRANSPLANT, DOUBLE; WITH CA | 1/1/2007 | $482.31 | 3 |
| W | 32900 | RESECTION OF RIBS EXTRAPLEURAL A | 1/1/2007 | $171.69 | 3 |
| W | 32905 | THORACOPLASTY SCHEDE TYPE OR EXT | 1/1/2007 | $176.62 | 3 |
| W | 32906 | THORACOPLASTY SCHEDE TYPE OR EXT | 1/1/2007 | $222.08 | 3 |
| W | 32940 | PNEUMONOLYSIS EXTRAPERIOSTEAL IN | 1/1/2007 | $164.94 | 3 |
| W | 32999 | INLISTED PROCEDURE LUNGS AND PLE | 2/1/1994 | $0.01 | 5 |
| W | 33020 | PERICARDIOTOMY FOR REMOVAL OF CL | 1/1/2007 | $109.92 | 3 |
| W | 33025 | CREATION OF PERICADIAL WINDOW OR | 1/1/2007 | $105.05 | 3 |
| W | 33030 | PERICARDIECTOMY, SUBTOTAL OR COM | 1/1/2007 | $161.20 | 3 |
| W | 33031 | PERICARDIECTOMY, SUBTOTAL OR COM | 1/1/2007 | $181.39 | 3 |
| W | 33050 | EXCISION OF PERICARDIAL CYST OR | 1/1/2007 | $126.32 | 3 |
| W | 33120 | EXCISION OF INTRACARDIAC TUMOR R | 1/1/2007 | $206.67 | 3 |
| W | 33130 | RESECTION OF EXTERNAL CARDIAC TU | 1/1/2007 | $179.06 | 3 |
| W | 33141 | TRANSMYOCARDIAL LASER REVASCULAR | 1/1/2007 | $36.85 | 3 |
| W | 33200 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | INVALID | N |
| W | 33201 | INSERTION OF PERMANENT PACEMAKER | 1/1/2007 | INVALID | N |
| W | 33238 | REMOVAL OF PERMANENT TRANSVENOUS | 1/1/2007 | $132.03 | 3 |
| W | 33243 | REMOVAL OF IMPLANTABLE CARDIOVER | 1/1/2007 | $187.83 | 3 |
| W | 33245 | IMPLANTATION OR REPLACEMENT OF I | 1/1/2007 | INVALID | N |
| W | 33246 | IMPLANT/REPLACE. OF IMPLANT. CAR | 1/1/2007 | INVALID | N |
| W | 33250 | OPER ABLATION OF SUPRAVENTRICULA | 1/1/2007 | $187.10 | 3 |
| W | 33251 | OPER ABLATION OF SUPRAVENTRICULA | 1/1/2007 | $208.22 | 3 |
| W | 33253 | OPERATIVE INCISIONS AND RECONSTR | 1/1/2007 | INVALID | N |
| W | 33261 | OPERATIVE ABLATION OF VENTRICULA | 1/1/2007 | $208.07 | 3 |
| W | 33300 | REPAIR OF CARDIAC WOUND WITHOUT | 1/1/2007 | $154.66 | 3 |
| W | 33305 | REPAIR OF CARDIAC WOUND; WITH CA | 1/1/2007 | $182.53 | 3 |
| W | 33310 | CARDIOTOMY EXPLORATORY (INCLUDES | 1/1/2007 | $159.18 | 3 |
| W | 33315 | CARDIOTOMY EXPLORATORY (INCLUDES | 1/1/2007 | $189.54 | 3 |
| W | 33320 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $140.49 | 3 |
| W | 33321 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $170.65 | 3 |
| W | 33322 | SUTURE REPAIR OF AORTA OR GREAT | 1/1/2007 | $175.58 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 33330 | INSERTION OF GRAFT, AORTA OR GRE | 1/1/2007 | $179.06 | 3 |
| W | 33332 | INSERTION OF GRAFT, AORTA OR GRE | 1/1/2007 | $194.52 | 3 |
| W | 33335 | INSERTION OF GRAFT; WITH CARDIOP | 1/1/2007 | $247.04 | 3 |
| W | 33400 | VALVULOPLASTY, AORTIC VALVE, OPE | 1/1/2007 | $250.52 | 3 |
| W | 33401 | VALVULOPLASTY, AORTIC VALVE; OPE | 1/1/2007 | $212.63 | 3 |
| W | 33403 | VALVULOPLASTY, AORTIC VALVE; USI | 1/1/2007 | $221.77 | 3 |
| W | 33404 | CONSTRUCTION OF APICAL-AORTIC CO | 1/1/2007 | $246.01 | 3 |
| W | 33405 | REPLACEMENT, AORTIC VALVE, WITH | 1/1/2007 | $304.13 | 3 |
| W | 33406 | REPLACEMENT, AORTIC VALVE, WITH | 1/1/2007 | $322.04 | 3 |
| W | 33410 | REPLACEMENT, AORTIC VALVE, W/CAR | 1/1/2007 | $278.81 | 3 |
| W | 33411 | REPLACEMENT AORTIC VALVE WITH AO | 1/1/2007 | $313.74 | 3 |
| W | 33412 | REPLACEMENT AORTIC VALVE WITH TR | 1/1/2007 | $356.92 | 3 |
| W | 33413 | REPLACEMENT, AORTIC VALVE; BY TR | 1/1/2007 | $367.50 | 3 |
| W | 33414 | REPAIR OF LEFT VENTRICULAR OUTFL | 1/1/2007 | $254.47 | 3 |
| W | 33415 | RESECTION OR INCISION OF SUBVALV | 1/1/2007 | $224.68 | 3 |
| W | 33416 | VENTRICULOMYOTOMY (-MYECTOMY) FO | 1/1/2007 | $251.20 | 3 |
| W | 33417 | AORTOPLASTY (GUSSET) FOR SUPRAVA | 1/1/2007 | $239.93 | 3 |
| W | 33420 | VALVOTOMY MITRAL VALVE; CLOSED H | 1/1/2007 | $176.82 | 3 |
| W | 33422 | VALVOTOMY MITRAL VALVE; OPEN HEA | 1/1/2007 | $225.87 | 3 |
| W | 33425 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $228.93 | 3 |
| W | 33426 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $286.18 | 3 |
| W | 33427 | VALVULOPLASTY, MITRAL VALVE, WIT | 1/1/2007 | $339.58 | 3 |
| W | 33430 | REPLACEMENT, MITRAL VALVE, WITH | 1/1/2007 | $289.97 | 3 |
| W | 33460 | VALVECTOMY, TRICUSPID VALVE, WIT | 1/1/2007 | $198.93 | 3 |
| W | 33463 | VALVULOPLASTY, TRICUSPID VALVE; | 1/1/2007 | $220.00 | 3 |
| W | 33464 | VALVULOPLASTY, TRICUSPID VALVE; | 1/1/2007 | $233.50 | 3 |
| W | 33465 | REPLACEMENT, TRICUSPID VALVE, WI | 1/1/2007 | $239.41 | 3 |
| W | 33468 | TRICUSPID VALVE REPOSITIONING AN | 1/1/2007 | $248.19 | 3 |
| W | 33470 | VALVOTOMY, PULMONARY VALVE, CLOS | 1/1/2007 | $168.83 | 3 |
| W | 33471 | VALVOTOMY, PULMONARY VALVE, CLOS | 1/1/2007 | $183.62 | 3 |
| W | 33472 | VALVOTOMY, PULMONARY VALVE, OPEN | 1/1/2007 | $195.40 | 3 |
| W | 33474 | VALVOTOMY PULMONARY VALVE (COMMI | 1/1/2007 | $192.70 | 3 |
| W | 33475 | REPLACEMENT, PULMONARY VALVE | 1/1/2007 | $276.52 | 3 |
| W | 33476 | RIGHT VENTRICULAR RESECTION FOR | 1/1/2007 | $208.27 | 3 |
| W | 33478 | OUTFLOW TRACT AUGMENTATION (GUSS | 1/1/2007 | $226.65 | 3 |
| W | 33496 | REPAIR OF NON-STRUCTURAL PROSTHE | 1/1/2007 | $228.93 | 3 |
| W | 33500 | REPAIR OF CORONARY ARTERIOVENOUS | 1/1/2007 | $212.06 | 3 |
| W | 33501 | REPAIR OF CORONARY ARTERIOVENOUS | 1/1/2007 | $145.06 | 3 |
| W | 33502 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $182.17 | 3 |
| W | 33503 | ANOMALOUS CORONARY ARTERY; GRAFT | 1/1/2007 | $172.72 | 3 |
| W | 33504 | ANOMALOUS CORONARY ARTERY; GRAFT | 1/1/2007 | $206.61 | 3 |
| W | 33505 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $217.56 | 3 |
| W | 33506 | REPAIR OF ANOMALOUS CORONARY ART | 1/1/2007 | $283.89 | 3 |
| W | 33510 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $258.15 | 3 |
| W | 33511 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $267.96 | 3 |
| W | 33512 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $280.57 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 33513 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $283.63 | 3 |
| W | 33514 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $288.36 | 3 |
| W | 33516 | CORONARY ARTERY BYPASS, VEIN ONL | 1/1/2007 | $305.74 | 3 |
| W | 33517 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $19.72 | 3 |
| W | 33518 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $37.11 | 3 |
| W | 33519 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $54.39 | 3 |
| W | 33521 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $71.83 | 3 |
| W | 33522 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $89.48 | 3 |
| W | 33523 | CORONARY ARTERY BYPASS, USING VE | 1/1/2007 | $106.86 | 3 |
| W | 33530 | REOPERATION, CORONARY ARTERY BYP | 1/1/2007 | $44.89 | 3 |
| W | 33533 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $264.79 | 3 |
| W | 33534 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $283.37 | 3 |
| W | 33535 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $299.15 | 3 |
| W | 33536 | CORONARY ARTERY BYPASS, USING AR | 1/1/2007 | $317.63 | 3 |
| W | 33542 | MYOCARDIAL RESECTION (EG VENTRIC | 1/1/2007 | $239.83 | 3 |
| W | 33545 | REPAIR OF POSTINFARCTION VENTRIC | 1/1/2007 | $298.84 | 3 |
| W | 33572 | CORONARY ENDARTERECTOMY, OPEN, A | 1/1/2007 | $33.94 | 3 |
| W | 33600 | CLOSURE OF ATRIOVENTRICULAR VALV | 1/1/2007 | $240.97 | 3 |
| W | 33602 | CLOSURE OF SEMILUNAR VALVE (AORT | 1/1/2007 | $232.46 | 3 |
| W | 33606 | ANASTOMOSIS OF PULMONARY ARTERY | 1/1/2007 | $253.27 | 3 |
| W | 33608 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $259.03 | 3 |
| W | 33610 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $253.01 | 3 |
| W | 33611 | REPAIR OF DOUBLE OUTLET RIGHT VE | 1/1/2007 | $272.37 | 3 |
| W | 33612 | REPAIR OF DOUBLE OUTLET RIGHT VE | 1/1/2007 | $287.63 | 3 |
| W | 33615 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $266.97 | 3 |
| W | 33617 | REPAIR OF COMPLEX CARDIAC ANOMAL | 1/1/2007 | $304.24 | 3 |
| W | 33619 | REPAIR OF SINGLE VENTRICLE WITH | 1/1/2007 | $374.87 | 3 |
| W | 33641 | REPAIR ATRIAL SEPTAL DEFECT, SEC | 1/1/2007 | $177.39 | 3 |
| W | 33645 | DIRECT OR PATCH CLOSURE SINUS VE | 1/1/2007 | $209.47 | 3 |
| W | 33647 | REPAIR OF ATRIAL SEPTAL DEFECT A | 1/1/2007 | $237.75 | 3 |
| W | 33660 | REPAIR OF INCOMPLETE OR PARTIAL | 1/1/2007 | $248.91 | 3 |
| W | 33665 | REPAIR OF INTERMEDIATE OR TRANSI | 1/1/2007 | $240.92 | 3 |
| W | 33670 | REPAIR OF COMPLETE ATRIOVENTRICU | 1/1/2007 | $274.03 | 3 |
| W | 33681 | CLOSURE OF VENTRICULAR SEPTAL DE | 1/1/2007 | $258.05 | 3 |
| W | 33684 | CLOSURE VENTRICULAR SEPTAL DEFEC | 1/1/2007 | $242.11 | 3 |
| W | 33688 | CLOSURE VENTRICULAR SEPTAL DEFEC | 1/1/2007 | $237.65 | 3 |
| W | 33690 | BANDING OF PULMONARY ARTERY | 1/1/2007 | $164.37 | 3 |
| W | 33692 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $255.50 | 3 |
| W | 33694 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $277.51 | 3 |
| W | 33697 | COMPLETE REPAIR TETRALOGY OF FAL | 1/1/2007 | $285.14 | 3 |
| W | 33702 | REPAIR SINUS OF VALSALVA FISTULA | 1/1/2007 | $221.98 | 3 |
| W | 33710 | REPAIR SINUS OF VALSALVA FISTULA | 1/1/2007 | $249.59 | 3 |
| W | 33720 | REPAIR SINUS OF VALSALVA ANEURYS | 1/1/2007 | $221.46 | 3 |
| W | 33722 | CLOSURE OF AORTICO-LEFT VENTRICU | 1/1/2007 | $226.08 | 3 |
| W | 33730 | COMPLETE REPAIR OF ANOMALOUS VEN | 1/1/2007 | $276.99 | 3 |
| W | 33732 | REPAIR OF COR TRIATRIATUM OR SUP | 1/1/2007 | $234.64 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 33735 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $167.38 | 3 |
| W | 33736 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $199.50 | 3 |
| W | 33737 | ATRIAL SEPTECTOMY OR SEPTOSTOMY; | 1/1/2007 | $186.48 | 3 |
| W | 33750 | SHUNT CUBCLAVIAN TO PULMONARY AR | 1/1/2007 | $170.13 | 3 |
| W | 33755 | SHUNT; ASCENDING AORTA TO PULMON | 1/1/2007 | $175.63 | 3 |
| W | 33762 | SHUNT; DESCENDING AORTA TO PULMO | 1/1/2007 | $182.01 | 3 |
| W | 33764 | SHUNT CENTRAL WITH PROSTHETIC GR | 1/1/2007 | $181.70 | 3 |
| W | 33766 | SHUNT; SUPERIOR VENA CAVA TO PUL | 1/1/2007 | $197.84 | 3 |
| W | 33767 | SHUNT; SUPERIOR VENA CAVA TO PUL | 1/1/2007 | $207.70 | 3 |
| W | 33770 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $297.80 | 3 |
| W | 33771 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $273.41 | 3 |
| W | 33774 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $261.73 | 3 |
| W | 33775 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $270.71 | 3 |
| W | 33776 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $284.98 | 3 |
| W | 33777 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $283.06 | 3 |
| W | 33778 | REPAIR OF TRANSPOSITION OF THE G | 1/1/2007 | $327.28 | 3 |
| W | 33779 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $282.75 | 3 |
| W | 33780 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $334.76 | 3 |
| W | 33781 | REP OF TRANSPOSITION OF THE GREA | 1/1/2007 | $289.19 | 3 |
| W | 33786 | TOTAL REPAIR TRUNCUS ARTERIOSUS | 1/1/2007 | $318.61 | 3 |
| W | 33788 | REIMPLANTATION OF AN ANOMALOUS P | 1/1/2007 | $220.99 | 3 |
| W | 33800 | AORTIC SUSPENSION FOR TRACHEAL D | 1/1/2007 | $139.09 | 3 |
| W | 33802 | DIVISION OF ABERRANT VESSEL (VAS | 1/1/2007 | $151.24 | 3 |
| W | 33803 | DIVISION OF ABERRANT VESSEL (VAS | 1/1/2007 | $168.93 | 3 |
| W | 33813 | OBLITERATION OF AORTOPULMONARY S | 1/1/2007 | $179.99 | 3 |
| W | 33814 | OBLITERATION OF AORTOPULMONARY S | 1/1/2007 | $219.28 | 3 |
| W | 33820 | REPAIR OF PATENT DUCTUS ARTERIOS | 1/1/2007 | $140.08 | 3 |
| W | 33822 | PATENT DUCTUS ARTERIOSUS; DIVISI | 1/1/2007 | $150.20 | 3 |
| W | 33824 | PATENT DUCTUS ARTERIOSUS; DIVISI | 1/1/2007 | $168.05 | 3 |
| W | 33840 | EXCISION OF COARCTATION OF AORTA | 1/1/2007 | $171.63 | 3 |
| W | 33845 | EXCISION OF COARCTATION OF AORTA | 1/1/2007 | $190.37 | 3 |
| W | 33851 | EXCIS OF COARCTATION OF AORTA,W/ | 1/1/2007 | $182.27 | 3 |
| W | 33852 | REPAIR OF HYPOPLASTIC OR INTERRU | 1/1/2007 | $193.12 | 3 |
| W | 33853 | REPAIR OF HYPOPLASTIC OR INTERRU | 1/1/2007 | $264.69 | 3 |
| W | 33860 | ASCENDING AORTA GRAFT, W/CARDIOP | 1/1/2007 | $312.33 | 3 |
| W | 33861 | ASCENDING AORTA GRAFT, WITH CARD | 1/1/2007 | $342.80 | 3 |
| W | 33863 | ASCENDING AORTA GRAFT, WITH CARD | 1/1/2007 | $364.55 | 3 |
| W | 33870 | TRANSVERSE ARCH GRAFT, WITH CARD | 1/1/2007 | $357.90 | 3 |
| W | 33875 | DESCENDING THORACIC AORTA GRAFT | 1/1/2007 | $269.98 | 3 |
| W | 33877 | REPAIR OF THORACOABDOMINAL AORTI | 1/1/2007 | $336.42 | 3 |
| W | 33910 | PULMONARY ARTERY EMBOLECTOMY; WI | 1/1/2007 | $206.04 | 3 |
| W | 33915 | PULMONARY ARTERY EMBOLECTOMY; WI | 1/1/2007 | $166.55 | 3 |
| W | 33916 | PULMONARY ENDARTERECTOMY WITH OR | 1/1/2007 | $211.86 | 3 |
| W | 33917 | REPAIR OF PULMONARY ARTERY STENO | 1/1/2007 | $209.52 | 3 |
| W | 33918 | REPAIR OF PULMONARY ARESIA WITH | 1/1/2006 | INVALID | N |
| W | 33919 | REPAIR OF PULMONARY ATRESIA WITH | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 33920 | REPAIR OF PULMONARY ATRESIA WITH | 1/1/2007 | $260.17 | 3 |
| W | 33922 | TRANSECTION OF PULMONARY ARTERY | 1/1/2007 | $194.63 | 3 |
| W | 33924 | LIGATION AND TAKEDOWN OF A SYSTE | 1/1/2007 | $42.35 | 3 |
| W | 33930 | DONOR CARDIECTOMY-PNEUMONECTOMY | 8/1/1986 | NC | 9 |
| W | 33935 | HEART LUNG TRANSPLANT WITH RECIP | 1/1/2007 | $512.51 | 3 |
| W | 33940 | DONOR CARDIECTOMY (INCLUDING COL | 7/17/1987 | NC | 9 |
| W | 33945 | HEART TRANSPLANT WITH OR WITHOUT | 1/1/2007 | $361.90 | 3 |
| W | 33968 | REMOVAL OF INTGRA-AORTIC BALLOON | 1/1/2007 | $4.88 | 3 |
| W | 33970 | INSERTION OF INTRA-AORTIC BALLOO | 1/1/2007 | $51.12 | 3 |
| W | 33973 | INSERTION OF INTRA-AORTIC BALLOO | 1/1/2007 | $74.37 | 3 |
| W | 33975 | INSERTION OF VENTRICULAR ASSIST | 1/1/2007 | $157.41 | 3 |
| W | 33976 | INSERTION OF VENTRICULAR ASSIST | 1/1/2007 | $175.37 | 3 |
| W | 33977 | REMOVAL OF VENTRICULAR ASSIST DE | 1/1/2007 | $172.10 | 3 |
| W | 33978 | REMOVAL OF VENTRICULAR ASSIST DE | 1/1/2007 | $190.89 | 3 |
| W | 33999 | UNLISTED PROCEDURE CARDIAC SURGE | 4/1/1982 | $0.01 | 5 |
| W | 34001 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $111.38 | 3 |
| W | 34051 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $130.74 | 3 |
| W | 34101 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $87.04 | 3 |
| W | 34111 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $86.98 | 3 |
| W | 34151 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $202.10 | 3 |
| W | 34201 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $87.66 | 3 |
| W | 34203 | EMBOLECTOMY OR THROMBECTOMY WITH | 1/1/2007 | $139.66 | 3 |
| W | 34401 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $201.06 | 3 |
| W | 34421 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $102.97 | 3 |
| W | 34451 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $219.33 | 3 |
| W | 34471 | THROMBECTOMY DIRECT OR WITH CATH | 1/1/2007 | $86.47 | 3 |
| W | 34490 | AXILLARY AND SUBCLAVIAN VEIN BY | 1/1/2007 | $86.67 | 3 |
| W | 34501 | VALVULOPLASTY FEMORAL VEIN | 1/1/2007 | $139.25 | 3 |
| W | 34502 | RECONSTRUCTION OF VENA CAVA, ANY | 1/1/2007 | $222.44 | 3 |
| W | 34510 | VENOUS VALVE TRANSPOSITION ANY V | 1/1/2007 | $159.23 | 3 |
| W | 34520 | CROSS-OVER VEIN GRAFT TO VENOUS | 1/1/2007 | $148.80 | 3 |
| W | 34530 | SAPHENOPOPLITEAL VEIN ANASTOMOSI | 1/1/2007 | $140.03 | 3 |
| W | 34800 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $167.95 | 3 |
| W | 34802 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $182.17 | 3 |
| W | 34804 | ENDOVASCULAR REPAIR OF INTRARENA | 1/1/2007 | $182.12 | 3 |
| W | 34808 | ENDOVASCULAR PLACEMENT OF ILIAC | 1/1/2007 | $31.56 | 3 |
| W | 34812 | OPEN FEMORAL ARTERY EXPOSURE FOR | 1/1/2007 | $52.73 | 3 |
| W | 34813 | PLACEMENT OF FEMORAL-FEMORAL PRO | 1/1/2007 | $36.49 | 3 |
| W | 34820 | OPEN ILIAC ARTERY EXPOSURE FOR D | 1/1/2007 | $75.15 | 3 |
| W | 34825 | 2LACEMENT OF PROXIMAL OR DISTAL | 1/1/2007 | $100.79 | 3 |
| W | 34826 | PLACEMENT OF PROXIMAL OR DISTAL | 1/1/2007 | $30.78 | 3 |
| W | 34830 | OPEN REPAIR OF INFRARENAL AORTIC | 1/1/2007 | $263.70 | 3 |
| W | 34831 | OPEN REPAIR OF INFRARENAL AORTIC | 1/1/2007 | $269.52 | 3 |
| W | 34832 | OPEN REPAIR OF INFRARENAL AORTIC | 1/1/2007 | $284.36 | 3 |
| W | 35001 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $166.03 | 3 |
| W | 35002 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $174.80 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 35005 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $149.06 | 3 |
| W | 35011 | DIRECT REPAIR OF ANEURYSM, FALSE | 1/1/2007 | $147.97 | 3 |
| W | 35013 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $180.40 | 3 |
| W | 35021 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $165.66 | 3 |
| W | 35022 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $187.83 | 3 |
| W | 35045 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $142.73 | 3 |
| W | 35081 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $225.56 | 3 |
| W | 35082 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $307.20 | 3 |
| W | 35091 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $280.62 | 3 |
| W | 35092 | DIR. REPAIR OF ANEURYSM/EXCISION | 1/1/2007 | $358.06 | 3 |
| W | 35102 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $246.89 | 3 |
| W | 35103 | DIR. REPAIR OF ANEURYSM/EXCISION | 1/1/2007 | $322.14 | 3 |
| W | 35111 | DIRECT REPAIR OF ANEURYSM, PSEUD | 1/1/2007 | $201.94 | 3 |
| W | 35112 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $238.84 | 3 |
| W | 35121 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $242.11 | 3 |
| W | 35122 | DIRECT REPAIR OF ANEUYRSM/EXCISI | 1/1/2007 | $277.82 | 3 |
| W | 35131 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $205.11 | 3 |
| W | 35132 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $242.17 | 3 |
| W | 35141 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $165.04 | 3 |
| W | 35142 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $192.08 | 3 |
| W | 35151 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2007 | $186.06 | 3 |
| W | 35152 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2007 | $210.61 | 3 |
| W | 35161 | DIRECT REPAIR OF ANEURYSM, PSEU | 1/1/2005 | INVALID | N |
| W | 35162 | DIRECT REPAIR OF ANEURYSM OR EXC | 1/1/2005 | INVALID | N |
| W | 35180 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $111.90 | 3 |
| W | 35182 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $244.66 | 3 |
| W | 35184 | REPAIR CONGENITAL ARTERIOVENOUS | 1/1/2007 | $149.47 | 3 |
| W | 35188 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $124.87 | 3 |
| W | 35189 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $228.05 | 3 |
| W | 35190 | REPAIR ACQUIRED OR TRAUMATIC ART | 1/1/2007 | $109.04 | 3 |
| W | 35201 | REPAIR BLOOD VESSEL DIRECT NECK | 1/1/2007 | $137.33 | 3 |
| W | 35206 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $112.42 | 3 |
| W | 35207 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $98.51 | 3 |
| W | 35211 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $186.42 | 3 |
| W | 35216 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $157.57 | 3 |
| W | 35221 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $195.51 | 3 |
| W | 35226 | REPAIR BLOOD VESSELS OR A-V FIST | 1/1/2007 | $124.25 | 3 |
| W | 35231 | REPAIR BLOOD VESSEL WITH VEIN GR | 1/1/2007 | $169.40 | 3 |
| W | 35236 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $142.21 | 3 |
| W | 35241 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $195.97 | 3 |
| W | 35246 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $216.47 | 3 |
| W | 35251 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $239.21 | 3 |
| W | 35256 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $152.17 | 3 |
| W | 35261 | REPAIR BLOOD VESSEL WITH GRAFT O | 1/1/2007 | $147.40 | 3 |
| W | 35266 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $124.56 | 3 |
| W | 35271 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $185.70 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 35276 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $201.99 | 3 |
| W | 35281 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $226.54 | 3 |
| W | 35286 | REPAIR BLOOD VESSEL OR A-V FISTU | 1/1/2007 | $137.79 | 3 |
| W | 35301 | THOMBOENDARTERECTOMY WITH OR WIT | 1/1/2007 | $154.61 | 3 |
| W | 35311 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $218.71 | 3 |
| W | 35321 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $132.97 | 3 |
| W | 35331 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $214.04 | 3 |
| W | 35341 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $206.20 | 3 |
| W | 35351 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $186.48 | 3 |
| W | 35355 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $151.70 | 3 |
| W | 35361 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $228.52 | 3 |
| W | 35363 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | $244.40 | 3 |
| W | 35371 | THROMBOENDARTERECTOMY, WITH OR W | 1/1/2007 | $123.52 | 3 |
| W | 35372 | THROMBOENDARTERECTOMY, WITH OR W | 1/1/2007 | $148.69 | 3 |
| W | 35381 | THROMBOENDARTERECTOMY WITH OR WI | 1/1/2007 | INVALID | N |
| W | 35390 | REOPERATION, CAROTID, THROMBOEND | 1/1/2007 | $24.44 | 3 |
| W | 35450 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $77.18 | 3 |
| W | 35452 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $54.24 | 3 |
| W | 35454 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $47.85 | 3 |
| W | 35456 | TRANSLUMINAL ANGIOPLASTY, INTRAO | 1/1/2007 | $57.87 | 3 |
| W | 35458 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $73.80 | 3 |
| W | 35459 | TRANSLUMINAL ANGIOPLASTY, OPEN; | 1/1/2007 | $67.52 | 3 |
| W | 35460 | TRANSLUMINAL ANGIOPLASTY, OPEN; | 1/1/2007 | $47.44 | 3 |
| W | 35470 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $65.76 | 3 |
| W | 35471 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $76.19 | 3 |
| W | 35472 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $53.09 | 3 |
| W | 35473 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $46.55 | 3 |
| W | 35474 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $56.16 | 3 |
| W | 35475 | TRANSLUMINAL BALLOON ANGIOPLASTY | 1/1/2007 | $70.95 | 3 |
| W | 35476 | TRANSLUMINAL ANGIOPLASTY, PERCUT | 1/1/2007 | $45.31 | 3 |
| W | 35500 | HARVEST OF UPPER EXTREMITY VEIN, | 1/1/2007 | $48.79 | 3 |
| W | 35501 | BYPASS GRAFT VEIN CAROTID | 1/1/2007 | $157.98 | 3 |
| W | 35506 | BYPASS GRAFT VEIN; CAROTID-SUBCL | 1/1/2007 | $166.03 | 3 |
| W | 35507 | BYPASS GRAFT VEIN; SUBCLAVIAN-CA | 1/1/2007 | INVALID | N |
| W | 35508 | BYPASS GRAFT WITH VEIN CAROTID-V | 1/1/2007 | $160.16 | 3 |
| W | 35509 | BYPASS GRAFT VEIN; CAROTID-CAROT | 1/1/2007 | $152.79 | 3 |
| W | 35511 | BYPASS GRAFT VEIN; SUBCLAVIAN-SU | 1/1/2007 | $173.61 | 3 |
| W | 35515 | BYPASS GRAFT WITH VEIN SUBCLAVIA | 1/1/2007 | $159.33 | 3 |
| W | 35516 | BYPASS GRAFT VEIN; SUBCLAVIAN-AX | 1/1/2007 | $132.09 | 3 |
| W | 35518 | BYPASS GRAFT WITH VEIN AXILLARY- | 1/1/2007 | $172.26 | 3 |
| W | 35521 | BYPASS GRAFT VEIN; AXILLARY-FEMO | 1/1/2007 | $182.43 | 3 |
| W | 35526 | BYPASS GRAFT VEIN; AORTOSUBCLAVI | 1/1/2007 | $239.10 | 3 |
| W | 35531 | BYPASS GRAFT WITH VEIN AORTOCELI | 1/1/2007 | $289.71 | 3 |
| W | 35533 | BYPASS GRAFT WITH VEIN AXILLARY- | 1/1/2007 | $226.02 | 3 |
| W | 35536 | BYPASS GRAFT VEIN; SPLENORENAL | 1/1/2007 | $255.56 | 3 |
| W | 35541 | BYPASS GRAFT, WITH VEIN; AORTOIL | 1/1/2007 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 35546 | BYPASS GRAFT WITH VEIN AORTOFEMO | 1/1/2007 | INVALID | N |
| W | 35548 | BYPASS GRAFT VEIN; AORTOILIOFEMO | 1/1/2007 | $176.25 | 3 |
| W | 35549 | BYPASS GRAFT VEIN; AORTOILIOFEMO | 1/1/2007 | $192.03 | 3 |
| W | 35551 | BYPASS GRAFT VEIN; AORTOFEMORAL- | 1/1/2007 | $217.41 | 3 |
| W | 35556 | BYPASS GRAFT VEIN; FEMORAL-POPLI | 1/1/2007 | $179.42 | 3 |
| W | 35558 | BYPASS GRAFT VEIN; FEMORAL-FEMOR | 1/1/2007 | $175.06 | 3 |
| W | 35560 | BYPASS GRAFT WITH VEIN AORTORENA | 1/1/2007 | $259.71 | 3 |
| W | 35563 | BYPASS GRAFT VEIN; ILIOILAC | 1/1/2007 | $198.36 | 3 |
| W | 35565 | BYPASS GRAFT VEIN; ILIOFEMORAL | 1/1/2007 | $190.06 | 3 |
| W | 35566 | BYPASS GRAFT, W/VEIN;FEMORAL-ANT | 1/1/2007 | $218.55 | 3 |
| W | 35571 | BYPASS GRAFT, W/VEIN; POPLITEAL- | 1/1/2007 | $198.83 | 3 |
| W | 35582 | IN-SITU VEIN BYPASS; AORTOFEMORA | 1/1/2005 | INVALID | N |
| W | 35583 | IN-SITU VEIN BYPASS; FEMORAL POP | 1/1/2007 | $185.18 | 3 |
| W | 35585 | IN-SITU VEIN BYPASS; FEMORAL-ANT | 1/1/2007 | $231.53 | 3 |
| W | 35587 | IN-SITU VEIN BYPASS; POPLITEAL-T | 1/1/2007 | $206.04 | 3 |
| W | 35600 | HARVEST OF UPPER EXTREMITY ARTER | 1/1/2007 | $37.84 | 3 |
| W | 35601 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $148.43 | 3 |
| W | 35606 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $157.83 | 3 |
| W | 35612 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $133.49 | 3 |
| W | 35616 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $134.89 | 3 |
| W | 35621 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $163.90 | 3 |
| W | 35623 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $196.86 | 3 |
| W | 35626 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $227.22 | 3 |
| W | 35631 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $273.88 | 3 |
| W | 35636 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $238.12 | 3 |
| W | 35641 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | INVALID | N |
| W | 35642 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $150.15 | 3 |
| W | 35645 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $146.46 | 3 |
| W | 35646 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $251.82 | 3 |
| W | 35650 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $156.01 | 3 |
| W | 35651 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $202.93 | 3 |
| W | 35654 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $203.24 | 3 |
| W | 35656 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $160.42 | 3 |
| W | 35661 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $158.97 | 3 |
| W | 35663 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $182.01 | 3 |
| W | 35665 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $173.55 | 3 |
| W | 35666 | BYPASS GRAFT WITH OTHER THAN VEI | 1/1/2007 | $186.74 | 3 |
| W | 35671 | BYPASS GRAFT, WITH OTHER THAN VE | 1/1/2007 | $163.28 | 3 |
| W | 35681 | BYPASS GRAFT COMPOSITE | 1/1/2007 | $12.25 | 3 |
| W | 35682 | BYPASS GRAFT; AUTOGENOUS COMPOSI | 1/1/2007 | $55.07 | 3 |
| W | 35683 | BYPASS GRAFT; AUTOGENOUS COMPOSI | 1/1/2007 | $64.98 | 3 |
| W | 35691 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $150.61 | 3 |
| W | 35693 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $131.26 | 3 |
| W | 35694 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $157.98 | 3 |
| W | 35695 | TRANSPOSITION AND/OR REIMPLANTAT | 1/1/2007 | $157.93 | 3 |
| W | 35700 | REOPERATION, FEMORAL-POPLITEAL O | 1/1/2007 | $23.56 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 35701 | EXPLORATION (NOT FOLL BY SURG RE | 1/1/2007 | $76.66 | 3 |
| W | 35721 | EXPLORATION; FEMORAL ARTERY | 1/1/2007 | $65.60 | 3 |
| W | 35741 | EXPLORATION; POPLITEAL ARTERY | 1/1/2007 | $71.52 | 3 |
| W | 35761 | EXPLORATION; OTHER VESSELS | 1/1/2007 | $52.57 | 3 |
| W | 35800 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $65.50 | 3 |
| W | 35820 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $114.28 | 3 |
| W | 35840 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $85.12 | 3 |
| W | 35860 | EXPLORATION FOR POSTOPERATIVE HE | 1/1/2007 | $53.77 | 3 |
| W | 35870 | REPAIR OF GRAFT-ENTERIC FISTULA | 1/1/2007 | $181.29 | 3 |
| W | 35875 | THROMBECTOMY OF ARTERIAL OR VENO | 1/1/2007 | $86.78 | 3 |
| W | 35876 | THROMBECTOMY OF ARTERIAL OR VENO | 1/1/2007 | $139.56 | 3 |
| W | 35879 | REVISION, LOWER EXTREMITY ARTGER | 1/1/2007 | $134.73 | 3 |
| W | 35881 | REVISION, LOWER EXTREMITY ARTERI | 1/1/2007 | $151.60 | 3 |
| W | 35901 | EXCISION OF INFECTED GRAFT; NECK | 1/1/2007 | $76.03 | 3 |
| W | 35903 | EXCISION OF INFECTED GRAFT; EXTR | 1/1/2007 | $87.45 | 3 |
| W | 35905 | EXCISION OF INFECTED GRAFT; THOR | 1/1/2007 | $253.53 | 3 |
| W | 35907 | EXCISION OF INFECTED GRAFT; ABDO | 1/1/2007 | $280.57 | 3 |
| W | 36400 | VENIPUNCTURE, UNDER AGE 3 YEARS; | 1/1/2007 | $17.91 | 3 |
| W | 36405 | VENIPUNCTURE UNDER AGE 3 YEARS; | 1/1/2007 | $15.57 | 3 |
| W | 36406 | VENIPUNCTURE UNDER AGE 3 YEARS O | 1/1/2007 | $12.20 | 3 |
| W | 36410 | VENIPUNCTURE CHILD OVER AGE 3 OR | 1/1/2007 | $12.46 | 3 |
| W | 36415 | COLLECTION OF VENOUS BLOOD BY VE | 2/13/2003 | $3.00 | 3 |
| W | 36416 | COLLECTION OF CAPILLARY BLOOD SP | 1/1/2003 | $3.00 | 3 |
| W | 36420 | VENIPUNCTURE CUTDOWN UNDER AGE 1 | 1/1/2007 | $36.85 | 3 |
| W | 36425 | VENIPUNCTURE CUTDOWN; AGE 1 OR O | 1/1/2007 | $26.99 | 3 |
| W | 36430 | TRANSFUSION, BLOOD OR BLOOD COMP | 1/1/2007 | $27.77 | 3 |
| W | 36440 | PUSH TRANSFUSION BLOOD 2 YEARS O | 1/1/2007 | $36.85 | 3 |
| W | 36455 | EXCHANGE TRANSFUSION BLOOD; OTHE | 1/1/2007 | $18.63 | 3 |
| W | 36460 | TRANSFUSION INTRAUTERINE FETAL | 1/1/2007 | $49.93 | 3 |
| W | 36468 | SINGLE OR MULTIPLE INJECTIONS OF | 3/1/1987 | NC | 9 |
| W | 36469 | SINGLE OR MULTIPLE INJECTIONS OF | 3/1/1987 | NC | 9 |
| W | 36470 | INJECTION OF SCLEROSING SOLUTION | 2/1/1993 | NC | 9 |
| W | 36471 | INJECTION OF SCLEROSING SOLUTION | 2/1/1993 | NC | 9 |
| W | 36490 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| W | 36491 | PLACEMENT OF CENTRAL VENOUS CATH | 4/1/2004 | INVALID | N |
| W | 36520 | THERAPEUTIC APHERESIS (PLASMA AN | 7/1/2003 | INVALID | N |
| W | 36521 | THERAPEUTIC APHERESIS; W/EXTRACO | 7/1/2003 | INVALID | N |
| W | 36530 | INSERTION OF IMPLANTABLE INTRAVE | 4/1/2004 | INVALID | N |
| W | 36531 | REVISION OF IMPLANTABLE INTRAVEN | 4/1/2004 | INVALID | N |
| W | 36532 | REMOVAL OF IMPLANTABLE INTRAVENO | 4/1/2004 | INVALID | N |
| W | 36533 | INSERTION OF IMPLANTABLE VENOUS | 4/1/2004 | INVALID | N |
| W | 36534 | REVISION OF IMPLANTABLE VENOUS A | 4/1/2004 | INVALID | N |
| W | 36535 | REMOVAL OF IMPLANTABLE VENOUS AC | 4/1/2004 | INVALID | N |
| W | 36600 | ARTERIAL PUNCTURE WITHDRAWL OF B | 1/1/2007 | $21.54 | 3 |
| W | 36819 | ARTERIOVENOUS ANASTOMOSIS, OPEN; | 1/1/2007 | $115.84 | 3 |
| W | 36821 | ARTERIOVENOUS ANASTOMOSIS, DIREC | 1/1/2007 | $76.86 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 36825 | CREATION OF ARTERIOVENOUS FISTUL | 1/1/2007 | $84.29 | 3 |
| W | 36830 | CREATION OF ARTERIOVENOUS FISTUL | 1/1/2007 | $98.04 | 3 |
| W | 36831 | THROMBECTOMY, OPEN, ARTERIOVENOU | 1/1/2007 | $67.63 | 3 |
| W | 36832 | REVISION, OPEN, ARTERIOVENOUS FI | 1/1/2007 | $86.41 | 3 |
| W | 36833 | REVISION, ARTERIOVENOUS FISTULA; | 1/1/2007 | $97.57 | 3 |
| W | 36834 | PLASTIC REPAIR OF ARTERIOVENOUS | 1/1/2007 | $83.51 | 3 |
| W | 37145 | VENOUS ANASTOMOSIS; RENOPORTAL | 1/1/2007 | $200.90 | 3 |
| W | 37160 | VENOUS ANASTOMOSIS; CAVAL-MESENT | 1/1/2007 | $174.70 | 3 |
| W | 37180 | VENOUS ANASTOMOSIS; SPLENORENAL, | 1/1/2007 | $198.41 | 3 |
| W | 37181 | ANASTOMOSIS SPLENORENAL DISTAL ( | 1/1/2007 | $213.15 | 3 |
| W | 37600 | LIGATION EXTERNAL CAROTID ARTERY | 1/1/2007 | $100.12 | 3 |
| W | 37605 | LIGATION; INTERNAL OR COMMON CAR | 1/1/2007 | $114.13 | 3 |
| W | 37606 | LIGATION INTERNAL OR COMMON CARO | 1/1/2007 | $62.64 | 3 |
| W | 37615 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $54.60 | 3 |
| W | 37616 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $139.56 | 3 |
| W | 37617 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $177.50 | 3 |
| W | 37618 | LIGATION MAJOR ARTERY (EG POST-T | 1/1/2007 | $47.33 | 3 |
| W | 37660 | LIGATION OF COMMON ILIAC VEIN | 1/1/2007 | $168.83 | 3 |
| W | 37720 | LIGATION AND DIVISION AND COMPLE | 1/1/2006 | INVALID | N |
| W | 37730 | LIGATION AND DIVISION AND COMPLE | 1/1/2006 | INVALID | N |
| W | 37735 | LIGATION & DIV & COMP STRIP OF L | 1/1/2007 | $90.88 | 3 |
| W | 37760 | LIGATION OF PERFORATOR VEINS, SU | 1/1/2007 | $89.53 | 3 |
| W | 37785 | LIGATION, DIVISION, AND/OR EXCIS | 1/1/2007 | $49.72 | 3 |
| W | 37788 | PENILE REVASULARIZATION, ARTERY, | 3/1/1992 | NC | 9 |
| W | 38100 | SPLENECTOMY (SEPARATE PROCEDURE) | 1/1/2007 | $117.19 | 3 |
| W | 38101 | SPLENECTOMY (SEPARATE PROCEDURE) | 1/1/2007 | $123.89 | 3 |
| W | 38102 | SPLENECTOMY; TOTAL, EN BLOC FOR | 1/1/2007 | $36.64 | 3 |
| W | 38115 | REPAIR OF RUPTURED SPLEEN (SPLEN | 1/1/2007 | $127.36 | 3 |
| W | 38300 | DRAINAGE OF LYMPH NODE ABSCESS O | 1/1/2007 | $169.97 | 3 |
| W | 38308 | LYMPHANGIOTOMY OR OTHER OPERATIO | 1/1/2007 | $57.30 | 3 |
| W | 38380 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $72.09 | 3 |
| W | 38381 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $112.10 | 3 |
| W | 38382 | SUTURE AND/OR LIGATION OF THORAC | 1/1/2007 | $89.27 | 3 |
| W | 38530 | BIOPSY OR EXCISION OF LYMPH NODE | 1/1/2007 | $70.01 | 3 |
| W | 38542 | DISSECTION DEEP JUGULAR NODE(S) | 1/1/2007 | $57.04 | 3 |
| W | 38550 | EXCISION OF CYSTIC HYGROMA, AXIL | 1/1/2007 | $60.77 | 3 |
| W | 38555 | EXCISION OF CYSTIC HYGROMA, AXIL | 1/1/2007 | $126.74 | 3 |
| W | 38562 | LIMITED LYMPHADENECTOMY FOR STAG | 1/1/2007 | $90.62 | 3 |
| W | 38564 | LIMITED LYMPHADENECTOMY FOR STAG | 1/1/2007 | $90.25 | 3 |
| W | 38570 | LAPAROSCOPY, SURGICAL; W/RETROPE | 1/1/2007 | $74.48 | 3 |
| W | 38571 | LAPAROSCOPY, SURGICAL; WITH BILA | 1/1/2007 | $111.43 | 3 |
| W | 38572 | LAPAROSCOPY, SURGICAL; W/BILATER | 1/1/2007 | $132.66 | 3 |
| W | 38700 | SUPRAHYOID LYMPHADENECTOMY | 1/1/2007 | $78.89 | 3 |
| W | 38720 | CERVICAL LYMPHADENECTOMY (COMPLE | 1/1/2007 | $125.44 | 3 |
| W | 38724 | CERVICAL LYMPHADENECTOMY (MODIFI | 1/1/2007 | $133.18 | 3 |
| W | 38740 | AXILLARY LYMPHADENECTOMY SUPERFI | 1/1/2007 | $84.49 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 38745 | AXILLARY LYMPHADENECTOMY; COMPLE | 1/1/2007 | $108.47 | 3 |
| W | 38746 | THORACIC LYMPHADENECTOMY, REGION | 1/1/2007 | $37.42 | 3 |
| W | 38747 | ABDOMINAL LYMPHADENECTOMY, REGIO | 1/1/2007 | $37.32 | 3 |
| W | 38760 | INGUINOFEMORAL LYMPHADENECTOMY, | 1/1/2007 | $107.85 | 3 |
| W | 38765 | INGUINOFEMORAL LYMPHADENECTOMY,S | 1/1/2007 | $162.19 | 3 |
| W | 38770 | PELVIC LYMPHADENECTOMY, INCLUDIN | 1/1/2007 | $105.72 | 3 |
| W | 38780 | RETROPERTTONEAL TRANSABDOMINAL L | 1/1/2007 | $138.42 | 3 |
| W | 38999 | UNLISTED PROCEDURE HEMIC OR LYMP | 2/1/1989 | $0.01 | 5 |
| W | 39000 | MEDIASTINOTOMY WITH EXPLORATION, | 1/1/2007 | $60.41 | 3 |
| W | 39010 | MEDIASTINOTOMY WITH EXPLORATION, | 1/1/2007 | $109.41 | 3 |
| W | 39200 | EXCISION OF MEDIASTINAL CYST | 1/1/2007 | $120.25 | 3 |
| W | 39220 | EXCISION OF MEDIASTINAL TUMOR | 1/1/2007 | $151.70 | 3 |
| W | 39499 | UNLISTED PROCEDURE MEDIASTINUM | 2/1/1994 | $0.01 | 5 |
| W | 39501 | REPAIR, LACERATION OF DIAPHRAGM, | 1/1/2007 | $111.12 | 3 |
| W | 39502 | REPAIR PARAESOPHAGEAL HIATUS HER | 1/1/2007 | $133.02 | 3 |
| W | 39503 | REPAIR, NEONATAL DIAPHRAGMATIC H | 1/1/2007 | $722.86 | 3 |
| W | 39520 | REPAIR DIAPHRAMATIC HERNIA (ESOP | 1/1/2007 | $136.86 | 3 |
| W | 39530 | REPAIR DIAPHRAGMATIC HERNIA (ESO | 1/1/2007 | $127.88 | 3 |
| W | 39531 | REPAIR DIAPHRAGMATIC HERNIA (ESO | 1/1/2007 | $134.99 | 3 |
| W | 39540 | REPAIR DIAPHRAGMATIC HERNIA (OTH | 1/1/2007 | $110.70 | 3 |
| W | 39541 | REPAIR DIAPHRAGMATIC HERNIA (OTH | 1/1/2007 | $118.90 | 3 |
| W | 39545 | IMBRICATION OF DIAPHRAGM FOR EVE | 1/1/2007 | $118.02 | 3 |
| W | 39560 | RESECTION, DIAPHRAGM; WITH SIMPL | 1/1/2007 | $103.13 | 3 |
| W | 39561 | RESECTION, DIAPHRAGM; WITH COMPL | 1/1/2007 | $151.91 | 3 |
| W | 39599 | UNLISTED PROCEDURE DIAPHRAGM | 2/1/1994 | $0.01 | 5 |
| W | 40490 | BIOPSY LIP | 1/1/2007 | $75.26 | 3 |
| W | 40701 | PLASTIC REPAIR OF CLEFT LIP; PRI | 1/1/2007 | $149.68 | 3 |
| W | 40702 | PLASTIC REPAIR OF CLEFT LIP; PRI | 1/1/2007 | $116.88 | 3 |
| W | 40761 | PLASTIC REPAIR OF CLEFT LIP WITH | 1/1/2007 | $139.77 | 3 |
| W | 40799 | UNLISTED PROCEDURE LIPS | 4/1/1982 | $0.01 | 5 |
| W | 40800 | DRAINAGE OF ABSCESS CYST HEMATOM | 1/1/2007 | $110.81 | 3 |
| W | 40801 | DRAINAGE OF ABSCESS CYST HEMATOM | 1/1/2007 | $178.28 | 3 |
| W | 40804 | REMOVAL OF EMBEDDED FOREIGN BODY | 1/1/2007 | $123.26 | 3 |
| W | 40805 | REMOVAL OF EMBEDDED FOREIGN BODY | 1/1/2007 | $194.63 | 3 |
| W | 40806 | INCISION OF LABIAL FRENUM (FRENO | 1/1/2007 | $56.83 | 3 |
| W | 40808 | BIOPSY VESTIBULE OF MOUTH | 1/1/2007 | $96.53 | 3 |
| W | 40810 | EXCISION OF LESION OF MUCOSA AND | 1/1/2007 | $112.36 | 3 |
| W | 40830 | CLOSURE OF LACERATION 2.5 CM OR | 1/1/2007 | $147.40 | 3 |
| W | 40831 | CLOSURE OF LACERATION, VESTIBULE | 1/1/2007 | $192.81 | 3 |
| W | 40840 | VESTIBULOPLASTY ANTERIOR | 1/1/2007 | $101.78 | 3 |
| W | 40843 | VESTIBULOPLASTY; POSTERIOR BILAT | 1/1/2007 | $132.09 | 3 |
| W | 40844 | VESTIBULOPLASTY; ENTIRE ARCH | 1/1/2007 | $175.37 | 3 |
| W | 41000 | INTRAORAL INCISION AND DRAINAGE | 1/1/2007 | $97.05 | 3 |
| W | 41005 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $122.48 | 3 |
| W | 41006 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $217.72 | 3 |
| W | 41007 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $222.13 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 41008 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $219.80 | 3 |
| W | 41009 | INCISION AND DRAINAGE OF INTRAOR | 1/1/2007 | $234.33 | 3 |
| W | 41010 | INCISION OF LINGUAL FRENUM (FREN | 1/1/2007 | $118.33 | 3 |
| W | 41015 | EXTRAORAL INCISION AND DRAINAGE | 1/1/2007 | $255.09 | 3 |
| W | 41016 | INCISION AND DRAINAGE OF EXTRAOR | 1/1/2007 | $265.21 | 3 |
| W | 41017 | INCISION AND DRAINAGE OF EXTRAOR | 1/1/2007 | $265.73 | 3 |
| W | 41018 | MASTICATOR SPACE | 1/1/2007 | $309.32 | 3 |
| W | 41120 | GLOSSECTOMY LESS THAN ONE-HALF T | 1/1/2007 | $134.42 | 3 |
| W | 41130 | GLOSSECTOMY; HEMIGLOSSECTOMY | 1/1/2007 | $146.88 | 3 |
| W | 41135 | GLOSSECTOMY; PARTIAL WITH UNILAT | 1/1/2007 | $250.31 | 3 |
| W | 41140 | GLOSSECTOMY COMPLETE OR TOTAL WI | 1/1/2007 | $282.70 | 3 |
| W | 41145 | GLOSSECTOMY COMPLETE OR TOTAL WI | 1/1/2007 | $327.90 | 3 |
| W | 41150 | GLOSSECTOMY COMPOSITE PROCEDURE | 1/1/2007 | $258.10 | 3 |
| W | 41153 | GLOSSECTOMY COMPOSITE PROCEDURE | 1/1/2007 | $263.76 | 3 |
| W | 41155 | GLOSSECTOMY COMPOSITE PROCEDURE | 1/1/2007 | $295.26 | 3 |
| W | 41250 | REPAIR LACERATION 2.5 CM OR LESS | 1/1/2007 | $125.60 | 3 |
| W | 41251 | REPAIR LACERATION UP TO 2 CM; PO | 1/1/2007 | $149.73 | 3 |
| W | 41800 | DRAINAGE ABSCESS CYST HEMATOMA | 1/1/2007 | $100.95 | 3 |
| W | 41805 | REMOVAL EMBEDDED FOREIGN BODY FR | 1/1/2007 | $105.10 | 3 |
| W | 41870 | PERIODONTAL MUCOSAL GRAFTING | 6/8/1994 | NC | 9 |
| W | 41872 | GINGIVOPLASTY, EACH QUADRANT (SP | 6/8/1994 | NC | 9 |
| W | 41874 | ALVEOLOPLASTY, EACH QUADRANT (SP | 2/1/1993 | NC | 9 |
| W | 42000 | DRAINAGE OF ABSCESS OF PALATE UV | 1/1/2007 | $101.72 | 3 |
| W | 42120 | RESECTION PALATE OR EXTENSIVE RE | 1/1/2007 | $95.91 | 3 |
| W | 42180 | REPARIR LACERATION OF PALATE UP | 1/1/2007 | $150.25 | 3 |
| W | 42200 | PALATOPLASTY FOR CLEFT PALATE SO | 1/1/2007 | $121.91 | 3 |
| W | 42205 | PALATOPLASTY FOR CLEFT PALATE WI | 1/1/2007 | $129.49 | 3 |
| W | 42210 | PALATOPLASTY FOR CLEFT PALATE WI | 1/1/2007 | $145.99 | 3 |
| W | 42215 | PALATOPLASTY FOR CLEFT PALATE MA | 1/1/2007 | $99.75 | 3 |
| W | 42220 | PALATOPLASTY FOR CLEFT PALATE; S | 1/1/2007 | $75.46 | 3 |
| W | 42225 | PALATOPLASTY FOR CLEFT PALATE; A | 1/1/2007 | $142.73 | 3 |
| W | 42226 | LENGTHENING OF PALATE, AND PHARY | 1/1/2007 | $133.59 | 3 |
| W | 42227 | LENGTHENING OF PALATE, WITH ISLA | 1/1/2007 | $135.36 | 3 |
| W | 42235 | REPAIR ANTERIOR PALATE INCLUDING | 1/1/2007 | $106.24 | 3 |
| W | 42260 | REPAIR NASOLABIAL FISTULA | 1/1/2007 | $110.39 | 3 |
| W | 42299 | UNLISTED PROCEDURE PALATE UVULA | 4/1/1982 | $0.01 | 5 |
| W | 42325 | FISTULIZATION SUBLINGUAL SALIVAR | 1/1/2006 | INVALID | N |
| W | 42326 | FISTULIZATION SUBLINGUAL SALIVAR | 1/1/2006 | INVALID | N |
| W | 42409 | MARSUPIALIZATION SUBLINGUAL SALI | 1/1/2007 | $39.50 | 3 |
| W | 42410 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $85.53 | 3 |
| W | 42415 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $151.44 | 3 |
| W | 42420 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $174.49 | 3 |
| W | 42425 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $117.71 | 3 |
| W | 42426 | EXCISION PAROTID TUMOR OR PAROTI | 1/1/2007 | $187.26 | 3 |
| W | 42440 | EXCISION SUBMANDIBULAR (SUBMAXIL | 1/1/2007 | $64.10 | 3 |
| W | 42507 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $68.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 42508 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $95.96 | 3 |
| W | 42510 | PAROTID DUCT DIVERSION BILATERAL | 1/1/2007 | $86.21 | 3 |
| W | 42699 | UNLISTED PROCEDURE SALIVARY GLAN | 4/1/1982 | $0.01 | 5 |
| W | 42725 | INCISION AND DRAINAGE ABSCESS RE | 1/1/2007 | $103.02 | 3 |
| W | 42810 | EXCISION BRANCHIAL CLEFT CYST OR | 1/1/2007 | $48.11 | 3 |
| W | 42815 | EXCISION BRANCHIAL CLEFT CYST, V | 1/1/2007 | $73.18 | 3 |
| W | 42844 | RADICAL RESECTION OF TONSIL TONS | 1/1/2007 | $164.68 | 3 |
| W | 42845 | RADICAL RESECTION OF TONSIL TONS | 1/1/2007 | $256.80 | 3 |
| W | 42890 | LIMITED PHARYNGECTOMY WITHOUT RA | 1/1/2007 | $146.15 | 3 |
| W | 42892 | RESECTION OF LATERAL PHARYNGEAL | 1/1/2007 | $178.07 | 3 |
| W | 42894 | RESECTION OF PHARYNGEAL WALL REQ | 1/1/2007 | $242.84 | 3 |
| W | 42950 | PHARYNGOPLASTY (PLASTIC OR RECON | 1/1/2007 | $107.48 | 3 |
| W | 42953 | PHARYNGOESOPHAGEAL REPAIR | 1/1/2007 | $141.22 | 3 |
| W | 42955 | PHARYNGOSTOMY (FISTULIZATION OF | 1/1/2007 | $97.99 | 3 |
| W | 42960 | CONTROL OROPHARYNGEAL HEMORRHAGE | 1/1/2007 | $116.52 | 3 |
| W | 42961 | CONTROL OROPHARYNGEAL HEMORRHAGE | 1/1/2007 | $57.09 | 3 |
| W | 42962 | CONTROL OROPHARYNGEAL HEMORRHAGE | 1/1/2007 | $70.79 | 3 |
| W | 42971 | CONTROL OF NASOPHARYNGEAL HEMORR | 1/1/2007 | $61.45 | 3 |
| W | 42972 | CONTROL OF NASOPHARYNGEAL HEMORR | 1/1/2007 | $70.22 | 3 |
| W | 43020 | ESOPHAGOTOMY CERVICAL APPROACH; | 1/1/2007 | $74.63 | 3 |
| W | 43030 | CRICOPHARYNGEAL MYOTOMY | 1/1/2007 | $72.09 | 3 |
| W | 43045 | ESOPHAGOTOMY, THORACIC APPROACH, | 1/1/2007 | $173.35 | 3 |
| W | 43100 | EXCISION OF LESION, ESOPHAGUS, W | 1/1/2007 | $84.86 | 3 |
| W | 43101 | EXCISION OF LESION, ESOPHAGUS, W | 1/1/2007 | $137.17 | 3 |
| W | 43107 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $329.41 | 3 |
| W | 43108 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $272.27 | 3 |
| W | 43112 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $356.24 | 3 |
| W | 43113 | TOTAL OR NEAR TOTAL ESOPHAGECTOM | 1/1/2007 | $284.36 | 3 |
| W | 43116 | PARTIAL ESOPHAGECTOMY, CERVICAL, | 1/1/2007 | $264.48 | 3 |
| W | 43117 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $324.01 | 3 |
| W | 43118 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $265.05 | 3 |
| W | 43121 | PARTIAL ESOPHAGECTOMY, DISTAL TW | 1/1/2007 | $242.68 | 3 |
| W | 43122 | PARTIAL ESOPHAGECTOMY, THORACOAB | 1/1/2007 | $325.83 | 3 |
| W | 43123 | PARTIAL ESOPHAGECTOMY, THORACOAB | 1/1/2007 | $266.97 | 3 |
| W | 43124 | TOTAL OR PARTIAL ESOPHAGECTOMY, | 1/1/2007 | $229.03 | 3 |
| W | 43130 | DIVERTICULECTOMY HYPOPHARYNX OR | 1/1/2007 | $106.24 | 3 |
| W | 43135 | DIVERTICULECTOMY HYPOPHARYNX OR | 1/1/2007 | $137.64 | 3 |
| W | 43280 | LAPAROSCOPY, SURGICAL, ESOPHAGOG | 1/1/2007 | $138.99 | 3 |
| W | 43289 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 43300 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $86.36 | 3 |
| W | 43305 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $153.73 | 3 |
| W | 43310 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $207.81 | 3 |
| W | 43312 | ESOPHAGOPLASTY (PLASTIC REPAIR O | 1/1/2007 | $229.92 | 3 |
| W | 43320 | ESOPHAGOGASTROSTOMY (CARDIOPLAST | 1/1/2007 | $165.35 | 3 |
| W | 43324 | ESOPHAGOGASTRIC FUNDOPLASTY (EG | 1/1/2007 | $166.50 | 3 |
| W | 43325 | ESOPHAGOGASTRIC FUNDOPLASTY WITH | 1/1/2007 | $163.12 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 43326 | ESOPHAGOGASTRIC FUNDOPLASTY; WIT | 1/1/2007 | $165.41 | 3 |
| W | 43330 | ESOPHAGOMYOTOMY (HELLER TYPE); A | 1/1/2007 | $160.42 | 3 |
| W | 43331 | ESOPHAGOMYOTOMY ((HELLER TYPE) W | 1/1/2007 | $170.44 | 3 |
| W | 43340 | ESOPHAGOJEJUNOSTOMY (WITHOUT TOT | 1/1/2007 | $160.99 | 3 |
| W | 43341 | ESOPHAGOJEJUNOSTOMY (WITHOUT TOT | 1/1/2007 | $175.27 | 3 |
| W | 43350 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $133.07 | 3 |
| W | 43351 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $158.81 | 3 |
| W | 43352 | ESOPHAGOSTOMY FISTULIZATION OF E | 1/1/2007 | $133.33 | 3 |
| W | 43360 | GASTROINTESTINAL RECONSTRUCTION | 1/1/2007 | $289.19 | 3 |
| W | 43361 | GASTROINTESTINAL RECONSTRUCTION | 1/1/2007 | $321.05 | 3 |
| W | 43400 | LIGATION DIRECT ESOPHAGEAL VARIC | 1/1/2007 | $169.09 | 3 |
| W | 43401 | TRANSECTION OF ESOPHAGUS WITH RE | 1/1/2007 | $179.63 | 3 |
| W | 43405 | LIGATION OR STAPLING AT GASTROES | 1/1/2007 | $168.26 | 3 |
| W | 43410 | SUTURE ESOPHAGEAL WOUND OR INJUR | 1/1/2007 | $118.38 | 3 |
| W | 43415 | SUTURE OF ESOPHAGEAL WOUND OR IN | 1/1/2007 | $208.90 | 3 |
| W | 43425 | CLOSURE OF ESOPHAGOSTOMY OR FIST | 1/1/2007 | $176.56 | 3 |
| W | 43499 | UNLISTED PROCEDURE ESOPHAGUS | 4/1/1982 | $0.01 | 5 |
| W | 43500 | GASTROTOMY WITH EXPLORATION OR F | 1/1/2007 | $90.62 | 3 |
| W | 43501 | GASTROTOMY; WITH SUTURE REPAIR O | 1/1/2007 | $160.73 | 3 |
| W | 43502 | GASTROTOMY; WITH SUTURE REPAIR O | 1/1/2007 | $185.13 | 3 |
| W | 43510 | GASTROTOMY; WITH ESOPHAGEAL DILA | 1/1/2007 | $109.72 | 3 |
| W | 43520 | PYLOROMYOTOMY CUTTING OF PYLORIC | 1/1/2007 | $86.21 | 3 |
| W | 43605 | BIOPSY OF STOMACH; BY LAPAROTOMY | 1/1/2007 | $97.78 | 3 |
| W | 43610 | EXCISION, LOCAL; ULCER OR BENIGN | 1/1/2007 | $117.66 | 3 |
| W | 43611 | EXCISION, LOCAL; MALIGNANT TUMOR | 1/1/2007 | $143.97 | 3 |
| W | 43620 | GASTRECTOMY, TOTAL; WITH ESOPHAG | 1/1/2007 | $237.49 | 3 |
| W | 43621 | GASTRECTOMY, TOTAL; WITH ROUX-EN | 1/1/2007 | $242.42 | 3 |
| W | 43622 | GASTRECTOMY, TOTAL; WITH FORMATI | 1/1/2007 | $256.33 | 3 |
| W | 43631 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $180.20 | 3 |
| W | 43632 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $180.20 | 3 |
| W | 43633 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $184.09 | 3 |
| W | 43634 | GASTRECTOMY, PARTIAL, DISTAL; WI | 1/1/2007 | $199.87 | 3 |
| W | 43635 | VAGOTOMY W/PARTIAL DISTAL GASTRE | 1/1/2007 | $15.73 | 3 |
| W | 43638 | GASTRECTOMY, PARTIAL, PROXIMAL, | 1/1/2006 | INVALID | N |
| W | 43639 | GASTRECTOMY, PARTIAL, PROXIMAL; | 1/1/2006 | INVALID | N |
| W | 43640 | VAGOTOMY INCLUDING PYLOROPLASTY | 1/1/2007 | $137.59 | 3 |
| W | 43641 | VAGOTOMY INCLUDING PYLOROPLASTY | 1/1/2007 | $139.40 | 3 |
| W | 43651 | LAPAROSCOPY, SURGICAL; TRANSECTI | 1/1/2007 | $84.23 | 3 |
| W | 43652 | LAPAROSCOPY, SURGICAL; TRANSECTI | 1/1/2007 | $100.95 | 3 |
| W | 43653 | LAPAROSCOPY, SURGICAL; GASTROSTO | 1/1/2007 | $67.05 | 3 |
| W | 43659 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 43800 | PYLOROPLASTY | 1/1/2007 | $111.01 | 3 |
| W | 43810 | GASTRODUODENOSTOMY | 1/1/2007 | $118.07 | 3 |
| W | 43820 | GASTROJEJUNOSTOMY; WITHOUT VAGOT | 1/1/2007 | $123.52 | 3 |
| W | 43825 | GASTROJEJUNOSTOMY; WITH VAGOTOMY | 1/1/2007 | $154.40 | 3 |
| W | 43830 | GASTROSTOMY TEMPORARY (TUBE RUBB | 1/1/2007 | $81.07 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 43831 | GASTROSTOMY TEMPORARY (TUBE RUBB | 1/1/2007 | $69.44 | 3 |
| W | 43832 | GASTROSTOMY PERMANENT WITH CONST | 1/1/2007 | $126.69 | 3 |
| W | 43840 | GASTRORRHAPHY SUTURE OF PERFORAT | 1/1/2007 | $126.48 | 3 |
| W | 43842 | GASTRIC RESTRICTIVE PROCEDURE, W | 1/1/2007 | $148.90 | 3 |
| W | 43843 | GASTRIC RESTRICTIVE PROC, W/OUT | 1/1/2007 | $149.73 | 3 |
| W | 43846 | GASTRIC RESTRICTIVE PROC, W/GAST | 1/1/2007 | $193.28 | 3 |
| W | 43850 | REVISION OF GASTRODUODENAL ANAST | 1/1/2007 | $196.13 | 3 |
| W | 43855 | REVISION OF GASTRODUODENAL ANAST | 1/1/2007 | $207.24 | 3 |
| W | 43860 | REVISION OF GASTROJEJUNAL ANASTO | 1/1/2007 | $198.52 | 3 |
| W | 43865 | REVISION OF GASTROJEJUNAL ANASTO | 1/1/2007 | $210.25 | 3 |
| W | 43870 | CLOSURE OF GASTROSTOMY SURGICAL | 1/1/2007 | $80.29 | 3 |
| W | 43880 | CLOSURE OF GASTROCOLIC FISTULA | 1/1/2007 | $196.13 | 3 |
| W | 44005 | ENTEROLYSIS (FREEING OF INTESTIN | 1/1/2007 | $130.17 | 3 |
| W | 44010 | DUODENOTOMY, FOR EXPLORATION, BI | 1/1/2007 | $101.72 | 3 |
| W | 44015 | TUBE OR NEEDLE CATHETER JEJUNOST | 1/1/2007 | $19.98 | 3 |
| W | 44020 | ENTEROTOMY, SMALL INTESTINE, OTH | 1/1/2007 | $112.99 | 3 |
| W | 44021 | ENTEROTOMY SMALL BOWELL OTHER TH | 1/1/2007 | $113.66 | 3 |
| W | 44025 | COLOTOMY, FOR EXPLORATION, BIOPS | 1/1/2007 | $115.17 | 3 |
| W | 44050 | REDUCTION OF VOLVULUS INTUSSUSCE | 1/1/2007 | $113.30 | 3 |
| W | 44055 | CORRECTION OF MALROTATION BY LYS | 1/1/2007 | $174.49 | 3 |
| W | 44110 | EXCISION OF ONE OR MORE LESIONS | 1/1/2007 | $96.43 | 3 |
| W | 44111 | EXCISION OF ONE OR MORE LESIONS | 1/1/2007 | $115.48 | 3 |
| W | 44120 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $136.50 | 3 |
| W | 44121 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $33.94 | 3 |
| W | 44125 | ENTERECTOMY, RESECTION OF SMALL | 1/1/2007 | $140.34 | 3 |
| W | 44130 | ENTEROENTEROSTOMY, ANASTOMOSIS O | 1/1/2007 | $117.14 | 3 |
| W | 44139 | MOBILIZATION (TAKE-DOWN) OF SPLE | 1/1/2007 | $16.97 | 3 |
| W | 44140 | COLECTOMY PARTIAL WITH ANASTOMOS | 1/1/2007 | $167.84 | 3 |
| W | 44141 | COLLECTOMY PARTIAL; WITH SKIN LE | 1/1/2007 | $166.44 | 3 |
| W | 44143 | COLECTOMY PARTIAL; WITH END COLO | 1/1/2007 | $190.52 | 3 |
| W | 44144 | COLECTOMY PARTIAL; WITH RESECTIO | 1/1/2007 | $176.41 | 3 |
| W | 44145 | COLECTOMY PARTIAL; WITH COLOPROC | 1/1/2007 | $210.14 | 3 |
| W | 44146 | COLECTOMY PARTIAL; WITH COLOPROC | 1/1/2007 | $227.27 | 3 |
| W | 44147 | COLECTOMY PARTIAL ABDOMINAL AND | 1/1/2007 | $165.77 | 3 |
| W | 44150 | COLECTOMY TOTAL ABDOMINAL WITHOU | 1/1/2007 | $202.36 | 3 |
| W | 44151 | COLECTOMY TOTAL ABDOMINAL WITHOU | 1/1/2007 | $227.06 | 3 |
| W | 44152 | COLECTOMY,TOTAL,ABDOMINAL,W/O PR | 1/1/2007 | INVALID | N |
| W | 44153 | COLECTOMY,TOTAL,ABDOM,W/O PROCTE | 1/1/2007 | INVALID | N |
| W | 44155 | COLECTOMY TOTAL ABDOMINAL WITH P | 1/1/2007 | $230.59 | 3 |
| W | 44156 | COLECTOMY TOTAL ABDOMINAL WITH P | 1/1/2007 | $258.20 | 3 |
| W | 44160 | COLECTOMY, PARTIAL, WITH REMOVAL | 1/1/2007 | $149.00 | 3 |
| W | 44200 | LAPAROSCOPY, SURGICAL; ENTEROLYS | 1/1/2006 | INVALID | N |
| W | 44201 | LAPAROSCOPY, SURGICAL; JEJUNOSTO | 1/1/2006 | INVALID | N |
| W | 44202 | LAPAROSCOPY, SURGICAL; ENTERECTO | 1/1/2007 | $175.42 | 3 |
| W | 44209 | UNLISTED LAPAROSCOPY PROCEDURE, | 7/1/2003 | INVALID | N |
| W | 44300 | ENTEROSTOMY OR CECOSTOMY, TUBE ( | 1/1/2007 | $99.60 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 44310 | ILEOSTOMY OR JEJUNOSTOMY, NON-TU | 1/1/2007 | $127.78 | 3 |
| W | 44312 | REVISION OF ILEOSTOMY;SIMPLE (RE | 1/1/2007 | $67.11 | 3 |
| W | 44314 | REVISION OF ILEOSTOMY;COMPLICATE | 1/1/2007 | $121.13 | 3 |
| W | 44316 | CONTINENT ILEOSTOMY (KOCK PROCED | 1/1/2007 | $166.03 | 3 |
| W | 44320 | COLOSTOMY OR SKIN LEVEL CECOSTOM | 1/1/2007 | $142.88 | 3 |
| W | 44322 | COLOSTOMY OR SKIN LEVEL CECOSTOM | 1/1/2007 | $114.65 | 3 |
| W | 44340 | REVISION OF COLOSTOMY;SIMPLE (RE | 1/1/2007 | $67.31 | 3 |
| W | 44345 | REVISION OF COLOSTOMY;COMPLICATE | 1/1/2007 | $125.96 | 3 |
| W | 44346 | REVISION OF COLOSTOMY;W/REPAIR O | 1/1/2007 | $137.43 | 3 |
| W | 44500 | INTRODUCTION OF LONG GASTROINTES | 1/1/2007 | $17.65 | 3 |
| W | 44602 | SUTURE OF SMALL INTESTINE FOR PE | 1/1/2007 | $127.31 | 3 |
| W | 44603 | SUTURE OF SMALL INTESTINE FOR PE | 1/1/2007 | $147.03 | 3 |
| W | 44604 | SUTURE OF LARGE INTESTINE FOR PE | 1/1/2007 | $127.62 | 3 |
| W | 44605 | SUTURE OF INTESTINE (ENTERORRHAP | 1/1/2007 | $157.88 | 3 |
| W | 44615 | INTESTINAL STRICTUROPLASTY WITH | 1/1/2007 | $127.99 | 3 |
| W | 44620 | CLOSURE OF ENTEROSTOMY LARGE OR | 1/1/2007 | $98.77 | 3 |
| W | 44625 | CLOSURE OF ENTEROSTOMY LARGE OR | 1/1/2007 | $120.41 | 3 |
| W | 44626 | CLOSURE OF ENTEROSTOMY, LARGE OR | 1/1/2007 | $199.40 | 3 |
| W | 44640 | CLOSURE OF INTESTINAL CUTANEOUS | 1/1/2007 | $171.17 | 3 |
| W | 44650 | CLOSURE OF ENTEROENTERIC OR ENTE | 1/1/2007 | $178.38 | 3 |
| W | 44660 | CLOSURE OF ENTEROVESICAL FISTULA | 1/1/2007 | $165.15 | 3 |
| W | 44661 | CLOSURE OF ENTEROVESICAL FISTULA | 1/1/2007 | $192.81 | 3 |
| W | 44680 | INTESTINAL PLICATION (SEPARATE P | 1/1/2007 | $123.68 | 3 |
| W | 44700 | EXCLUSION OF SMALL INTESTINE FRO | 1/1/2007 | $127.67 | 3 |
| W | 44799 | UNLISTED PROCEDURE INTESTINE | 4/1/1982 | $0.01 | 5 |
| W | 44800 | EXCISION OF MECKELS DIVERTICULUM | 1/1/2007 | $93.84 | 3 |
| W | 44820 | EXCISION OF LESION OF MESENTERY | 1/1/2007 | $99.44 | 3 |
| W | 44850 | SUTURE OF MESENTERY (SEPARATE PR | 1/1/2007 | $88.85 | 3 |
| W | 44899 | UNLISTED PROCEDURE MECKELS DIVER | 2/1/1989 | $0.01 | 5 |
| W | 44900 | INCISION AND DRAINAGE OF APPENDI | 1/1/2007 | $83.82 | 3 |
| W | 44901 | INCISION AND DRAINAGE OF APPENDI | 1/1/2007 | $24.39 | 3 |
| W | 44950 | APPENDECTOMY | 1/1/2007 | $81.07 | 3 |
| W | 44955 | APPENDECTOMY WHEN DONE FOR INDIC | 1/1/2007 | $11.78 | 3 |
| W | 44960 | APPENDECTOMY FOR RUPTURED APPEND | 1/1/2007 | $100.17 | 3 |
| W | 44970 | LAPAROSCOPY, SURGICAL; APPENDECT | 1/1/2007 | $72.24 | 3 |
| W | 44979 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 45000 | TRANSRECTAL DRAINAGE OF PELVIC A | 1/1/2007 | $41.52 | 3 |
| W | 45108 | ANORECTAL MYOMECTOMY | 1/1/2007 | $42.14 | 3 |
| W | 45110 | PROCTECTOMY; COMPLETE, COMBINED | 1/1/2007 | $227.01 | 3 |
| W | 45111 | PROCTECTOMY; PARTIAL RESECTION O | 1/1/2007 | $133.38 | 3 |
| W | 45112 | PROCTECTOMY, COMBINED ABDOMINOPE | 1/1/2007 | $237.18 | 3 |
| W | 45113 | PROCTECTOMY, PARTIAL, WITH RECTA | 1/1/2007 | $242.06 | 3 |
| W | 45114 | PROCTECTOMY, PARTIAL, WITH ANAST | 1/1/2007 | $215.54 | 3 |
| W | 45116 | PROCTECTOMY PARTIAL WITH ANASTOM | 1/1/2007 | $194.42 | 3 |
| W | 45119 | PROCTECTOMY, COMBINED ABDOMINOPE | 1/1/2007 | $242.01 | 3 |
| W | 45120 | PROCTECTOMY, COMPLETE, ABDOMINAL | 1/1/2007 | $195.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 45121 | PROCTECTOMY, COMPLETE, ABDOMINAL | 1/1/2007 | $214.71 | 3 |
| W | 45123 | PROCTECTOMY, PARTIAL, WITHOUT AN | 1/1/2007 | $131.83 | 3 |
| W | 45126 | PELVIC EXENTERATION FOR COLORECT | 1/1/2007 | $356.40 | 3 |
| W | 45130 | EXCISION OF RECTAL PROCIDENTIA W | 1/1/2007 | $129.70 | 3 |
| W | 45135 | EXCISION OF RECTAL PROCIDENTIA W | 1/1/2007 | $155.86 | 3 |
| W | 45160 | EXCISION OF RECTAL TUMOR BY PROC | 1/1/2007 | $122.64 | 3 |
| W | 45170 | EXCISION OF RECTAL TUMOR, TRANSA | 1/1/2007 | $93.78 | 3 |
| W | 45300 | PROCTOSIGMOIDOSCOPY, RIGID; DIAG | 1/1/2007 | $50.60 | 3 |
| W | 45303 | PROCTOSIGMOIDOSCOPY, RIGID; WITH | 1/1/2007 | $498.76 | 3 |
| W | 45520 | PERIRECTAL INJECTION OF SCLEROSI | 1/1/2007 | $58.13 | 3 |
| W | 45540 | PROCTOPEXY (EG, FOR PROLAPSE); A | 1/1/2007 | $129.23 | 3 |
| W | 45541 | PROCTOPEXY FOR PROLAPSE; PERINEA | 1/1/2007 | $108.42 | 3 |
| W | 45550 | PROCTOPEXY (EG, FOR PROLAPSE); W | 1/1/2007 | $180.72 | 3 |
| W | 45560 | REPAIR OF RECTOCELE (SEPARATE PR | 1/1/2007 | $86.93 | 3 |
| W | 45562 | EXPLORATION, REPAIR, AND PRESACR | 1/1/2007 | $125.55 | 3 |
| W | 45563 | EXPLORATION, REPAIR, AND PRESACR | 1/1/2007 | $192.39 | 3 |
| W | 45800 | CLOSURE OF RECTOVESICAL FISTULA | 1/1/2007 | $140.29 | 3 |
| W | 45805 | CLOSURE OF RECTOVESICAL FISTULA; | 1/1/2007 | $167.64 | 3 |
| W | 45820 | CLOSURE OF RECTOURETHRAL FISTULA | 1/1/2007 | $143.61 | 3 |
| W | 45825 | CLOSURE OF RECTOURETHRAL FISTULA | 1/1/2007 | $173.19 | 3 |
| W | 45900 | REDUCTION OF PROCIDENTIA SEPARAT | 1/1/2007 | $114.44 | 3 |
| W | 46285 | FISTULECTOMY; SECOND STAGE | 1/1/2007 | $43.03 | 3 |
| W | 46600 | ANOSCOPY; DIAGNOSTIC, W/WO COLLE | 1/1/2007 | $54.75 | 3 |
| W | 46705 | ANOPLASTY PLASTIC OPERATION FOR | 1/1/2007 | $59.63 | 3 |
| W | 46715 | REPAIR OF LOW IMPERFORATE ANUS; | 1/1/2007 | $60.67 | 3 |
| W | 46716 | REPAIR OF LOW IMPERFORATE ANUS; | 1/1/2007 | $127.78 | 3 |
| W | 46730 | REPAIR OF HIGH IMPERFORATE ANUS | 1/1/2007 | $213.93 | 3 |
| W | 46735 | REPAIR OF HIGH IMPERFORATE ANUS | 1/1/2007 | $253.79 | 3 |
| W | 46740 | CONSTRUCTION OF ANUS FOR CONGENI | 1/1/2007 | $236.82 | 3 |
| W | 46742 | REPAIR OF HIGH IMPERFORATE ANUS | 1/1/2007 | $292.56 | 3 |
| W | 46744 | REPAIR OF CLOACAL ANOMALY BY ANO | 1/1/2007 | $415.72 | 3 |
| W | 46746 | REPAIR OF CLOACAL ANOMALY BY ANO | 1/1/2007 | $472.39 | 3 |
| W | 46748 | REPAIR OF CLOACAL ANOMALY WITH V | 1/1/2007 | $473.17 | 3 |
| W | 46750 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $85.06 | 3 |
| W | 46751 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $78.52 | 3 |
| W | 46760 | SPHINCTEROPLASTY ANAL FOR INCONT | 1/1/2007 | $119.89 | 3 |
| W | 46761 | SPHINCTEROPLASTY, ANAL, FOR INCO | 1/1/2007 | $110.39 | 3 |
| W | 46762 | SPHINCTEROPLASTY, ANAL, FOR INCO | 1/1/2007 | $101.00 | 3 |
| W | 46900 | DESTRUCTION OF LESION(S) ANUS (E | 1/1/2007 | $121.19 | 3 |
| W | 46910 | DESTRUCTION OF LESION(S) ANUS SI | 1/1/2007 | $128.71 | 3 |
| W | 47000 | BIOPSY OF LIVER, NEEDLE; PERCUTA | 1/1/2007 | $132.35 | 3 |
| W | 47001 | BIOPSY OF LIVER, NEEDLE; WHEN DO | 1/1/2007 | $14.53 | 3 |
| W | 47010 | HEPATOTOMY FOR DRAINAGE OF ABSCE | 1/1/2007 | $135.98 | 3 |
| W | 47011 | HEPATOTOMY; FOR PERCUTANEOUS DRA | 1/1/2007 | $26.57 | 3 |
| W | 47015 | LAPAROTOMY, WITH ASPIRATION AND/ | 1/1/2007 | $126.74 | 3 |
| W | 47120 | HEPATECTOMY RESECTION OF LIVER P | 1/1/2007 | $286.90 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 47122 | HEPATECTOMY, RESECTION OF LIVER; | 1/1/2007 | $434.61 | 3 |
| W | 47125 | HEPATECTOMY RESECTION OF LIVER; | 1/1/2007 | $389.92 | 3 |
| W | 47130 | HEPATECTOMY RESECTION OF LIVER; | 1/1/2007 | $421.58 | 3 |
| W | 47133 | DONOR HEPATECTOMY (INCLUDING COL | 7/17/1987 | NC | 9 |
| W | 47135 | LIVER ALLOTRANSPLANTATION; ORTHO | 1/1/2007 | $637.95 | 3 |
| W | 47136 | LIVER ALLOTRANSPLANTATION; METER | 1/1/2007 | $539.76 | 3 |
| W | 47300 | MARSUPIALIZATION OF CYST OR ABSC | 1/1/2007 | $126.01 | 3 |
| W | 47350 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $160.89 | 3 |
| W | 47360 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $217.20 | 3 |
| W | 47361 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $370.88 | 3 |
| W | 47362 | MANAGEMENT OF LIVER HEMORRHAGE; | 1/1/2007 | $154.25 | 3 |
| W | 47399 | UNLISTED PROCEDURE LIVER | 2/1/1994 | $0.01 | 5 |
| W | 47400 | HEPATICOTOMY OR HEPATICOSTOMY WI | 1/1/2007 | $254.21 | 3 |
| W | 47420 | CHOLEDOCHOTOMY OR CHOLEDOCHOSTOM | 1/1/2007 | $162.19 | 3 |
| W | 47425 | CHOLEDOCHOTOMY OR CHOLEDOCHOSTOM | 1/1/2007 | $162.14 | 3 |
| W | 47460 | TRANSDUODENAL SPHINCTEROTOMY OR | 1/1/2007 | $148.38 | 3 |
| W | 47480 | CHOLECYSTOTOMY OR CHOLECYSTOSTOM | 1/1/2007 | $94.15 | 3 |
| W | 47550 | BILIARY ENDOSCOPY, INTRAOPERATIV | 1/1/2007 | $23.04 | 3 |
| W | 47560 | LAPAROSCOPY, SURGICAL; WITH GUID | 1/1/2007 | $37.37 | 3 |
| W | 47561 | LAPAROSCOPY, SURGICAL; WITH GUID | 1/1/2007 | $40.22 | 3 |
| W | 47562 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $90.93 | 3 |
| W | 47563 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $97.62 | 3 |
| W | 47564 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $114.44 | 3 |
| W | 47570 | LAPAROSCOPY, SURGICAL; CHOLECYST | 1/1/2007 | $101.67 | 3 |
| W | 47579 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 47600 | CHOLECYSTECTOMY | 1/1/2007 | $111.53 | 3 |
| W | 47605 | CHOLECYSTECTOMY; WITH CHOLANGIOG | 1/1/2007 | $119.99 | 3 |
| W | 47610 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $151.60 | 3 |
| W | 47612 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $151.08 | 3 |
| W | 47620 | CHOLECYSTECTOMY WITH EXPLORATION | 1/1/2007 | $165.41 | 3 |
| W | 47630 | BILIARY DUCT STONE EXTRACTION PE | 1/1/2007 | $75.98 | 3 |
| W | 47700 | EXPLORATION FOR CONGENITAL ATRES | 1/1/2007 | $130.17 | 3 |
| W | 47701 | PORTOENTEROSTOMY (EG, KASAI PROC | 1/1/2007 | $222.86 | 3 |
| W | 47711 | EXCISION OF BILE DUCT TUMOR, WIT | 1/1/2007 | $186.74 | 3 |
| W | 47712 | EXCISION OF BILE DUCT TUMOR, WIT | 1/1/2007 | $241.59 | 3 |
| W | 47715 | EXCISION OF CHOLEDOCHAL CYST | 1/1/2007 | $154.09 | 3 |
| W | 47716 | ANASTOMOSIS, CHOLEDOCHAL CYST, W | 1/1/2007 | INVALID | N |
| W | 47720 | CHOLECYSTOENTEROSTOMY DIRECT | 1/1/2007 | $132.19 | 3 |
| W | 47721 | CHOLECYSTOENTEROSTOMY; WITH GAST | 1/1/2007 | $156.63 | 3 |
| W | 47740 | CHOLECYSTOENTEOSTOMY; ROUX-EN-Y | 1/1/2007 | $151.76 | 3 |
| W | 47741 | CHOLECYSTOENTEROSTOMY; ROUX-EN-Y | 1/1/2007 | $173.50 | 3 |
| W | 47760 | ANASTOMOSIS, OF EXTRAHEPTIC BILI | 1/1/2007 | $208.02 | 3 |
| W | 47765 | ANASTOMOSIS, OF INTRAHEPATIC DUC | 1/1/2007 | $202.10 | 3 |
| W | 47780 | ANASTOMOSIS ROUX-EN-Y OF EXTRAHE | 1/1/2007 | $213.67 | 3 |
| W | 47785 | ANASTOMOSIS, ROUX-EN-Y, OF INTRA | 1/1/2007 | $249.90 | 3 |
| W | 47800 | RECONSTRUCTION PLASTIC OF EXTRAH | 1/1/2007 | $188.97 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 47801 | PLACEMENT OF CHOLEDOCHAL STENT | 1/1/2007 | $127.00 | 3 |
| W | 47802 | U-TUBE HEPATICOENTEROSTOMY | 1/1/2007 | $176.72 | 3 |
| W | 47900 | SUTURE OF EXTRAHEPATIC BILIARY D | 1/1/2007 | $162.91 | 3 |
| W | 47999 | UNLISTED PROCEDURE BILIARY TRACT | 4/1/1982 | $0.01 | 5 |
| W | 48000 | PLACEMENT OF DRAINS, PERIPANCREA | 1/1/2007 | $223.27 | 3 |
| W | 48001 | PLACEMENT OF DRAINS, PERIPANCREA | 1/1/2007 | $280.16 | 3 |
| W | 48005 | RESECTION OR DEBRIDEMENT OF PANC | 1/1/2007 | INVALID | N |
| W | 48020 | REMOVAL OF PANCREATIC CALCULUS | 1/1/2007 | $130.32 | 3 |
| W | 48100 | BIOPSY OF PANCREAS, OPEN (EG, FI | 1/1/2007 | $100.84 | 3 |
| W | 48120 | EXCISION OF LESION OF PANCREAS ( | 1/1/2007 | $128.61 | 3 |
| W | 48140 | PANCREATECTOMY, DISTAL SUBTOTAL, | 1/1/2007 | $184.14 | 3 |
| W | 48145 | PANCREATECTOMY DISTAL SUBTOTAL W | 1/1/2007 | $191.98 | 3 |
| W | 48146 | PANCREATECTOMY, DISTAL, NEAR-TOT | 1/1/2007 | $217.20 | 3 |
| W | 48148 | EXCISION OF AMPULLA OF VATER | 1/1/2007 | $141.22 | 3 |
| W | 48150 | PANCREATECTOMY PROXIMAL SUBTOTAL | 1/1/2007 | $382.87 | 3 |
| W | 48152 | PANCREATECTOMY, PROXIMAL SUBTOTA | 1/1/2007 | $351.31 | 3 |
| W | 48153 | PANCREATECTOMY, PROXIMAL SUBTOTA | 1/1/2007 | $382.45 | 3 |
| W | 48154 | PANCREATECTOMY, PROX SUBTOTAL WI | 1/1/2007 | $353.49 | 3 |
| W | 48155 | PANCREATECTOMY TOTAL | 1/1/2007 | $205.21 | 3 |
| W | 48160 | PANCREATECTOMY, TOTAL OR SUBTOTA | 4/1/1990 | $0.01 | 5 |
| W | 48180 | PANCREATICOJEJUNOSTOMY SIDE-TO-S | 1/1/2007 | INVALID | N |
| W | 48500 | MARSUPIALIZATION OF PANCREATIC C | 1/1/2007 | $127.78 | 3 |
| W | 48510 | EXTERNAL DRAINAGE, PSEUDOCYST OF | 1/1/2007 | $122.28 | 3 |
| W | 48511 | EXTERNAL DRAINAGE, PSEUDOCYST OF | 1/1/2007 | $28.75 | 3 |
| W | 48520 | INTERNAL ANASTOMOSIS OF PANCREAT | 1/1/2007 | $126.27 | 3 |
| W | 48540 | INTERNAL ANASTOMOSIS OF PANCREAT | 1/1/2007 | $157.83 | 3 |
| W | 48545 | PANCREATORRHAPHY FOR INJURY | 1/1/2007 | $147.97 | 3 |
| W | 48547 | DUODENAL EXCLUSION WITH GASTROJE | 1/1/2007 | $206.04 | 3 |
| W | 48554 | TRANSPLANTATION OF PANCREATIC AL | 1/1/2007 | $293.75 | 3 |
| W | 48556 | REMOVAL OF TRANSPLANTED PANCREAT | 1/1/2007 | $134.11 | 3 |
| W | 48999 | UNLISTED PROCEDURE PANCREAS | 4/1/1982 | $0.01 | 5 |
| W | 49000 | EXPLORATORY LAPAROTOMY, EXPLORAT | 1/1/2007 | $96.38 | 3 |
| W | 49002 | REOPENING OF RECENT LAPAROTOMY | 1/1/2007 | $87.50 | 3 |
| W | 49010 | EXPLORATION, RETROPERITONEAL ARE | 1/1/2007 | $102.14 | 3 |
| W | 49020 | DRAINAGE OF PERITONEAL ABSCESS O | 1/1/2007 | $186.11 | 3 |
| W | 49021 | DRAINAGE OF PERITONEAL ABSCESS O | 1/1/2007 | $24.29 | 3 |
| W | 49040 | DRAINAGE OF SUBDIAPHRAGMATIC OR | 1/1/2007 | $112.21 | 3 |
| W | 49041 | DRAINAGE OF SUBDIAPHRAGMATIC OR | 1/1/2007 | $28.75 | 3 |
| W | 49060 | DRAINAGE OF RETROPERITONEAL ABSC | 1/1/2007 | $129.85 | 3 |
| W | 49061 | DRAINAGE OF RETROPERITONEAL ABSC | 1/1/2007 | $26.57 | 3 |
| W | 49062 | DRAINAGE OF EXTRAPERITONEAL LYMP | 1/1/2007 | $94.30 | 3 |
| W | 49085 | REMOVAL OF PERITIONEAL FOREIGN B | 1/1/2007 | INVALID | N |
| W | 49200 | EXCISION OR DESTRUCTION, OPEN, I | 1/1/2007 | $85.64 | 3 |
| W | 49201 | EXCISION OR DESTRUCTION BY ANY M | 1/1/2007 | $123.16 | 3 |
| W | 49215 | EXCISION OF PRESACRAL OR SACROCO | 1/1/2007 | $269.36 | 3 |
| W | 49220 | STAGING LAPAROTOMY FOR HODGKINS | 1/1/2007 | $121.34 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 49250 | UMBILECTOMY OMPHALECTOMY EXCISIO | 1/1/2007 | $71.05 | 3 |
| W | 49255 | OMENTECTOMY EPIPLOECTOMY RESECTI | 1/1/2007 | $94.30 | 3 |
| W | 49320 | LAPAROSCOPY, ABDOMEN, PERITONEUM | 1/1/2007 | $43.49 | 3 |
| W | 49321 | LAPAROSCOPY, SURGICAL; WITH BIOP | 1/1/2007 | $45.36 | 3 |
| W | 49322 | LAPAROSCOPY, SURGICAL, ABDOMEN, | 1/1/2007 | $48.79 | 3 |
| W | 49323 | LAPAROSCOPY, SURGICAL, ABDOMEN, | 1/1/2007 | $78.73 | 3 |
| W | 49329 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 49425 | INSERTION OF PERITONEAL-VENOUS S | 1/1/2007 | $96.02 | 3 |
| W | 49426 | REVISION OF PERITONEAL-VENOUS SH | 1/1/2007 | $81.33 | 3 |
| W | 49495 | REPAIR, INITIAL INGUINAL HERNIA, | 1/1/2007 | $49.72 | 3 |
| W | 49496 | REPAIR INITIAL ING. HERNIA, UNDE | 1/1/2007 | $73.33 | 3 |
| W | 49500 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $48.27 | 3 |
| W | 49501 | REPAIR INITIAL ING. HERNIA, AGE | 1/1/2007 | $73.70 | 3 |
| W | 49505 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $64.20 | 3 |
| W | 49507 | REPAIR INITIAL INGUINAL HERNIA, | 1/1/2007 | $79.36 | 3 |
| W | 49520 | REPAIR RECURRENT INGUINAL HERNIA | 1/1/2007 | $79.61 | 3 |
| W | 49521 | REPAIR RECURRENT INGUINAL HERNIA | 1/1/2007 | $97.52 | 3 |
| W | 49525 | REPAIR INGUINAL HERNIA, SLIDING, | 1/1/2007 | $71.47 | 3 |
| W | 49540 | REPAIR LUMBAR HERNIA | 1/1/2007 | $85.58 | 3 |
| W | 49550 | REPAIR INITIAL FEMORAL HERNIA, A | 1/1/2007 | $72.09 | 3 |
| W | 49553 | REPAIR INITIAL FEMORAL HERNIA, A | 1/1/2007 | $78.32 | 3 |
| W | 49555 | REPAIR RECURRENT FEMORAL HERNIA; | 1/1/2007 | $75.20 | 3 |
| W | 49557 | REPAIR RECURRENT FEMORAL HERNIA; | 1/1/2007 | $91.29 | 3 |
| W | 49560 | REPAIR INITIAL INCISIONAL HERNIA | 1/1/2007 | $94.56 | 3 |
| W | 49561 | REPAIR INITIAL INCISIONAL HERNIA | 1/1/2007 | $115.11 | 3 |
| W | 49565 | REPAIR RECURRENT INCISIONAL HERN | 1/1/2007 | $94.98 | 3 |
| W | 49566 | REPAIR RECURRENT INCISIONAL HERN | 1/1/2007 | $116.36 | 3 |
| W | 49568 | IMPLANTATION OF MESH OR OTHER PR | 1/1/2007 | $37.32 | 3 |
| W | 49570 | REPAIR EPIGASTRIC HERNIA (EG, PR | 1/1/2007 | $49.82 | 3 |
| W | 49572 | REPAIR EPIGASTRIC HERNIA; INCARC | 1/1/2007 | $57.45 | 3 |
| W | 49580 | REPAIR UMBILICAL HERNIA, UNDER A | 1/1/2007 | $37.58 | 3 |
| W | 49582 | REPAIR UMBILICAL HERNIA, UNDER A | 1/1/2007 | $57.04 | 3 |
| W | 49585 | REPAIR UMBILICAL HERNIA, AGE 5 Y | 1/1/2007 | $53.66 | 3 |
| W | 49587 | REPAIR UMBILICAL HERNIA, AGE 5 Y | 1/1/2007 | $63.73 | 3 |
| W | 49590 | REPAIR SPIGELIAN HERNIA | 1/1/2007 | $71.36 | 3 |
| W | 49600 | REPAIR OF SMALL OMPHALOCELE, WIT | 1/1/2007 | $91.34 | 3 |
| W | 49605 | REPAIR OF LARGE OMPHALOCELE OR G | 1/1/2007 | $590.78 | 3 |
| W | 49606 | REPAIR OF OMPHALOCELE WITH STAGE | 1/1/2007 | $149.06 | 3 |
| W | 49610 | REPAIR OF OMPHALOCELE (GROSS TYP | 1/1/2007 | $86.98 | 3 |
| W | 49611 | REPAIR OF OMPHALOCELE (GROSS TYP | 1/1/2007 | $86.57 | 3 |
| W | 49650 | LAPAROSCOPY, SURGICAL; REPAIR IN | 1/1/2007 | $53.92 | 3 |
| W | 49651 | LAPAROSCOPY, SURGICAL; REPAIR RE | 1/1/2007 | $69.65 | 3 |
| W | 49659 | UNLISTED LAPAROSCOPY PROCEDURE, | 10/1/2004 | $0.01 | 5 |
| W | 49900 | SUTURE SECONDARY OF ABDOMINAL WA | 1/1/2007 | $104.42 | 3 |
| W | 49905 | OMENTAL FLAP, INTRA-ABDOMINAL (L | 1/1/2007 | $49.77 | 3 |
| W | 49906 | FREE OMENTAL FLAP WITH MICROVASC | 1/1/1997 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 49999 | UNLISTED PROCEDURE ABDOMEN PERIT | 4/1/1982 | $0.01 | 5 |
| W | 50010 | RENAL EXPLORATION, NOT NECESSITA | 1/1/2007 | $88.85 | 3 |
| W | 50020 | DRAINAGE OF PERIRENAL OR RENAL A | 1/1/2007 | $123.21 | 3 |
| W | 50021 | DRAINAGE OF PERIRENAL OR RENAL A | 1/1/2007 | $24.24 | 3 |
| W | 50040 | NEPHROSTOMY NEPHROTOMY WITH DRAI | 1/1/2007 | $118.18 | 3 |
| W | 50045 | NEPHROTOMY WITH EXPLORATION | 1/1/2007 | $120.88 | 3 |
| W | 50060 | NEPHROLITHOTOMY REMOVAL OF CALCU | 1/1/2007 | $147.76 | 3 |
| W | 50065 | NEPHROLITHOTOMY; SECONDARY SURGI | 1/1/2007 | $147.60 | 3 |
| W | 50070 | NEPHROLITHOTOMY; COMPLICATED BY | 1/1/2007 | $155.49 | 3 |
| W | 50075 | HEPHROLITHOTOMY REMOVAL OF LARGE | 1/1/2007 | $192.13 | 3 |
| W | 50100 | TRANSECTION OR REPOSITIONING OF | 1/1/2007 | $134.58 | 3 |
| W | 50120 | PYELOTOMY WITH EXPLORATION | 1/1/2007 | $123.94 | 3 |
| W | 50125 | PYELOTOMY; WITH DRAINAGE PYELOST | 1/1/2007 | $129.28 | 3 |
| W | 50130 | PYELOTOMY WITH REMOVAL OF CALCUL | 1/1/2007 | $133.18 | 3 |
| W | 50135 | PYELOTOMY COMPLICATED (EG SECOND | 1/1/2007 | $146.72 | 3 |
| W | 50205 | RENAL BIOPSY PERCUTANEOUS; BY SU | 1/1/2007 | $91.40 | 3 |
| W | 50220 | NEPHRECTOMY, INCLUDING PARTIAL U | 1/1/2007 | $133.49 | 3 |
| W | 50225 | NEPHRECTOMY COMPLICATED BECAUSE | 1/1/2007 | $154.97 | 3 |
| W | 50230 | NEPHRECTOMY,INCLUDING PARTIAL UR | 1/1/2007 | $167.01 | 3 |
| W | 50234 | NEPHRECTOMY WITH TOTAL URETERECT | 1/1/2007 | $170.28 | 3 |
| W | 50236 | NEPHRECTOMY WITH TOTAL URETERECT | 1/1/2007 | $191.25 | 3 |
| W | 50240 | NEPHRECTOMY PARTIAL | 1/1/2007 | $168.93 | 3 |
| W | 50280 | EXCISION OR UNROOFING OF CYSTS O | 1/1/2007 | $122.17 | 3 |
| W | 50290 | EXCISION OF PERINEPHRIC CYST | 1/1/2007 | $117.24 | 3 |
| W | 50320 | DONOR NEPHRECTOMY (INCLUDING COL | 1/1/2007 | $182.74 | 3 |
| W | 50340 | RECIPIENT NEPHRECTOMY (SEPARATE | 1/1/2007 | $105.31 | 3 |
| W | 50360 | RENAL ALLOTRANSPLANTATION, IMPLA | 1/1/2007 | $263.65 | 3 |
| W | 50365 | RENAL HOMOTRANSPLANTATION, IMPLA | 1/1/2007 | $308.34 | 3 |
| W | 50370 | REMOVAL OF TRANSPLANTED RENAL AL | 1/1/2007 | $116.93 | 3 |
| W | 50380 | RENAL AUTOTRANSPLANTATION REIMPL | 1/1/2007 | $183.10 | 3 |
| W | 50398 | CHANGE OF NEPHROSTOMY OR PYELOST | 1/1/2007 | $53.72 | 3 |
| W | 50400 | PYELOPLASTY (FOLEY Y-PYELOPLASTY | 1/1/2007 | $149.16 | 3 |
| W | 50405 | PYELOPLASTY COMPLICATED (CONGENI | 1/1/2007 | $180.20 | 3 |
| W | 50500 | NEPHRORRHAPHY SUTURE OF KIDNEY W | 1/1/2007 | $155.44 | 3 |
| W | 50520 | CLOSURE OF NEPHROCUTANEOUS OR PY | 1/1/2007 | $135.61 | 3 |
| W | 50525 | CLOSURE OF NEPHROVISCERAL FISTUL | 1/1/2007 | $171.74 | 3 |
| W | 50526 | CLOSURE OF NEPHROVISCERAL FISTUL | 1/1/2007 | $185.91 | 3 |
| W | 50540 | SYMPHYSIOTOMY FOR HORSESHOE KIDN | 1/1/2007 | $153.62 | 3 |
| W | 50541 | LAPAROSCOPY, SURGICAL; ABLATION | 1/1/2007 | $122.54 | 3 |
| W | 50544 | LAPAROSCOPY, SURGICAL; PYELOPLAS | 1/1/2007 | $168.62 | 3 |
| W | 50545 | LAPAROSCOPY, SURGICAL; RADICAL N | 1/1/2007 | $180.98 | 3 |
| W | 50546 | LAPAROSCOPY, SURGICAL; NEPHRECTO | 1/1/2007 | $157.78 | 3 |
| W | 50547 | LAPAROSCOPY, SURGICAL; DONOR NEP | 1/1/2007 | $204.23 | 3 |
| W | 50548 | LAPAROSCOPY, SURGICAL; NEPHRECTO | 1/1/2007 | $183.10 | 3 |
| W | 50549 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 50559 | RENAL ENDOSCOPY THROUGH ESTABLIS | 1/1/2005 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 50578 | RENAL ENDOSCOPY THROUGH NEPHROTO | 1/1/2005 | INVALID | N |
| W | 50600 | URETEROTOMY WITH EXPLORATION OR | 1/1/2007 | $122.64 | 3 |
| W | 50605 | URETEROTOMY FOR INSERTION OF IND | 1/1/2007 | $122.69 | 3 |
| W | 50610 | URETEROLITHOTOMY UPPER ONE/THIRD | 1/1/2007 | $126.17 | 3 |
| W | 50620 | URETEROLITHOTOMY; MIDDLE ONE-THI | 1/1/2007 | $117.09 | 3 |
| W | 50630 | URETEROLITHOTOMY; LOWER ONE-THIR | 1/1/2007 | $115.74 | 3 |
| W | 50650 | URETERECTOMY WITH BLADDER CUFF ( | 1/1/2007 | $134.16 | 3 |
| W | 50660 | URETERECTOMY TOTAL ECTOPIC URETE | 1/1/2007 | $149.84 | 3 |
| W | 50700 | URETEROPLASTY PLASTIC OPERATION | 1/1/2007 | $122.43 | 3 |
| W | 50715 | URETEROLYSIS, WITH OR WITHOUT RE | 1/1/2007 | $154.45 | 3 |
| W | 50722 | URETEROLYSIS FOR OVARIAN VEIN SY | 1/1/2007 | $135.20 | 3 |
| W | 50725 | URETEROLYSIS FOR RETROCAVAL URET | 1/1/2007 | $145.53 | 3 |
| W | 50727 | REVISION OF URINARY-CUTANEOUS AN | 1/1/2007 | $67.78 | 3 |
| W | 50728 | REVISION OF URINARY-CUTANEOUS AN | 1/1/2007 | $96.38 | 3 |
| W | 50740 | URETEROPYELOSTOMY ANASTOMOSIS OF | 1/1/2007 | $145.84 | 3 |
| W | 50750 | URETEROCALYCOSTOMY ANASTOMOSIS O | 1/1/2007 | $149.78 | 3 |
| W | 50760 | URETEROURETEROSTOMY | 1/1/2007 | $143.40 | 3 |
| W | 50770 | TRANSURETEROURETEROSTOMY ANASTOM | 1/1/2007 | $150.09 | 3 |
| W | 50780 | URETERONEOCYSTOSTOMY; ANASTOMOSI | 1/1/2007 | $142.41 | 3 |
| W | 50782 | URETERONEOCYSTOSTOMY; ANASTOMOSI | 1/1/2007 | $155.23 | 3 |
| W | 50783 | URETERONEOCYSTOSTOMY; WITH EXTEN | 1/1/2007 | $159.49 | 3 |
| W | 50785 | URETERONEOCYSTOSTOMY; WITH VESIC | 1/1/2007 | $157.00 | 3 |
| W | 50800 | URETEROENTEROSTOMY, DIRECT ANAST | 1/1/2007 | $115.06 | 3 |
| W | 50810 | URETEROSIGMOIDOSTOMY, W/CREATION | 1/1/2007 | $163.17 | 3 |
| W | 50815 | URETEROCOLON CONDUIT, INCLUDING | 1/1/2007 | $155.18 | 3 |
| W | 50820 | URETEROILEAL CONDUIT (ILEAL BLAD | 1/1/2007 | $168.21 | 3 |
| W | 50825 | CONTINENT DIVERSION, INC INTESTI | 1/1/2007 | $214.66 | 3 |
| W | 50830 | URINARY UNDIVERSION (EG TAKING D | 1/1/2007 | $237.70 | 3 |
| W | 50840 | REPLACEMENT OF ALL OR PART OF UR | 1/1/2007 | $155.08 | 3 |
| W | 50845 | CUTANEOUS APPENDICO-VESICOSTOMY | 1/1/2007 | $162.71 | 3 |
| W | 50860 | URETEROSTOMY, TRANSPLANTATION OF | 1/1/2007 | $120.72 | 3 |
| W | 50900 | URETERORRHAPHY SUTURE OF URETER | 1/1/2007 | $108.42 | 3 |
| W | 50920 | CLOSURE OF URETEROCUTANEOUS FIST | 1/1/2007 | $113.66 | 3 |
| W | 50930 | CLOSURE OF URETEROVISCERAL FISTU | 1/1/2007 | $145.06 | 3 |
| W | 50940 | DELIGATION OF URETER | 1/1/2007 | $115.01 | 3 |
| W | 50945 | LAPAROSCOPY, SURGICAL, URETEROLI | 1/1/2007 | $131.72 | 3 |
| W | 50959 | URETERAL ENDOSCOPY THROUGH ESTAB | 1/1/2005 | INVALID | N |
| W | 50978 | URETERAL ENDOSCOPY THROUGH URETE | 1/1/2005 | INVALID | N |
| W | 51020 | CYSTOTOMY OR CYSTOSTOMY WITH FUL | 1/1/2007 | $57.25 | 3 |
| W | 51030 | CYSTOTOMY OR CYSTOSTOMY; WITH CR | 1/1/2007 | $58.75 | 3 |
| W | 51040 | CYSTOSTOMY CYSTOTOMY WITH DRAINA | 1/1/2007 | $38.77 | 3 |
| W | 51045 | CYSTOTOMY, WITH INSERTION OF URE | 1/1/2007 | $58.18 | 3 |
| W | 51050 | CYSTOLITHOTOMY CYSTOTOMY WITH RE | 1/1/2007 | $57.35 | 3 |
| W | 51060 | TRANSVESICAL URETEROLITHOTOMY | 1/1/2007 | $72.50 | 3 |
| W | 51080 | DRAINAGE OF PERIVESICAL OR PREVE | 1/1/2007 | $51.54 | 3 |
| W | 51500 | EXCISION OF URACHAL CYST OR SINU | 1/1/2007 | $83.87 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 51520 | CYSTOTOMY FOR SIMPLE EXCISION OF | 1/1/2007 | $76.03 | 3 |
| W | 51525 | CYSTOTOMY; FOR EXCISION OF BLADD | 1/1/2007 | $109.41 | 3 |
| W | 51530 | CYSTOTOMY; FOR EXCISION OF BLADD | 1/1/2007 | $99.49 | 3 |
| W | 51535 | CYSTOTOMY FOR EXCISION, INCISION | 1/1/2007 | $103.28 | 3 |
| W | 51550 | CYSTECTOMY PARTIAL SIMPLE | 1/1/2007 | $122.95 | 3 |
| W | 51555 | CYSTECTOMY PARTIAL COMPLICATED ( | 1/1/2007 | $163.85 | 3 |
| W | 51565 | CYSTECTOMY PARTIAL WITH REIMPLAN | 1/1/2007 | $167.12 | 3 |
| W | 51570 | CYSTECTOMY COMPLETE (SEPARATE PR | 1/1/2007 | $185.13 | 3 |
| W | 51575 | CYSTECTOMY COMPLETE WITH BILATER | 1/1/2007 | $231.53 | 3 |
| W | 51580 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $237.65 | 3 |
| W | 51585 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $266.71 | 3 |
| W | 51590 | CYSTECTOMY, COMPLETE, W/URETEROI | 1/1/2007 | $246.63 | 3 |
| W | 51595 | CYSTECTOMY COMPLETE WITH URETERO | 1/1/2007 | $279.38 | 3 |
| W | 51596 | CYSTECTOMY, COMPLETE, W/CONTINEN | 1/1/2007 | $298.37 | 3 |
| W | 51597 | PELVIC EXENTERATION COMPLETE FOR | 1/1/2007 | $290.43 | 3 |
| W | 51702 | INSERTION OF TEMPORARY INDWELLIN | 1/1/2007 | $68.25 | 3 |
| W | 51800 | CYSTOPLASTY OR CYSTOURETHROPLAST | 1/1/2007 | $136.45 | 3 |
| W | 51820 | CYSTOURETHROPLASTY WITH UNILATER | 1/1/2007 | $144.80 | 3 |
| W | 51840 | ANTERIOR VESICOURETHROPEXY, OR U | 1/1/2007 | $89.94 | 3 |
| W | 51841 | ANTERIOR VESICOURETHROPEXY OR UR | 1/1/2007 | $107.12 | 3 |
| W | 51845 | ABDOMINO-VAGINAL VESICAL NECK SU | 1/1/2007 | $79.20 | 3 |
| W | 51860 | CYSTORRHAPHY SUTURE OF BLADDER W | 1/1/2007 | $98.25 | 3 |
| W | 51865 | CYSTORRHAPHY SUTURE OF BLADDER W | 1/1/2007 | $119.06 | 3 |
| W | 51880 | CLOSURE OF CYSTOSTOMY (SEPARATE | 1/1/2007 | $63.99 | 3 |
| W | 51900 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $105.05 | 3 |
| W | 51920 | CLOSURE OF VESCOUTERINE FISTULA; | 1/1/2007 | $96.64 | 3 |
| W | 51925 | CLOSURE OF VESCOUTERINE FISTULA; | 1/1/2007 | $136.08 | 3 |
| W | 51940 | CLOSURE, EXSTROPHY OF BLADDER | 1/1/2007 | $221.30 | 3 |
| W | 51960 | ENTEROCYSTOPLASTY, INCLUDING INT | 1/1/2007 | $177.86 | 3 |
| W | 51980 | CUTANEOUS VESICOSTOMY | 1/1/2007 | $91.29 | 3 |
| W | 51990 | LAPAROSCOPY, SURGICAL; URETHRAL | 1/1/2007 | $103.96 | 3 |
| W | 51992 | LAPAROSCOPY, SURGICAL; SLING OPE | 1/1/2007 | $112.21 | 3 |
| W | 53060 | DRAINAGE OF SKENES GLAND ABSCESS | 1/1/2007 | $25.95 | 3 |
| W | 53080 | DRAINAGE OF PERINEAL URINARY EXT | 1/1/2007 | $66.28 | 3 |
| W | 53085 | DRAINAGE OF PERINEAL URINARY EXT | 1/1/2007 | $96.48 | 3 |
| W | 53210 | URETHRECTOMY TOTAL INCLUDING CYS | 1/1/2007 | $100.12 | 3 |
| W | 53215 | URETHRECTOMY TOTAL INCLUDING CYS | 1/1/2007 | $120.93 | 3 |
| W | 53230 | EXCISION OF URETHRAL DIVERTICULU | 1/1/2007 | $77.95 | 3 |
| W | 53235 | EXCISION OF URETHRAL DIVERTICULU | 1/1/2007 | $81.74 | 3 |
| W | 53240 | MARSUPIALIZATION OF URETHRAL DIV | 1/1/2007 | $54.44 | 3 |
| W | 53250 | EXCISION OF BULBOURETHRAL GLAND | 1/1/2007 | $50.19 | 3 |
| W | 53400 | URETHROPLASTY FIRST STAGE FOR FI | 1/1/2007 | $102.61 | 3 |
| W | 53405 | URETHROPLASTY; SECOND STAGE (FOR | 1/1/2007 | $113.61 | 3 |
| W | 53410 | URETHROPLASTY ONE-STAGE RECONSTR | 1/1/2007 | $127.93 | 3 |
| W | 53415 | URETHROPLASTY, TRANSPUBIC OR PER | 1/1/2007 | $145.84 | 3 |
| W | 53420 | URETHROPLASTY TWO-STAGE RECONSTR | 1/1/2007 | $110.65 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 53425 | URETHROPLASTY TWO-STAGE RECONSTR | 1/1/2007 | $124.51 | 3 |
| W | 53430 | URETHROPLASTY RECONSTRUCTION OF | 1/1/2007 | $127.05 | 3 |
| W | 53440 | SLING OPERATION FOR CORRECTION O | 1/1/2007 | $106.65 | 3 |
| W | 53442 | REMOVAL OR REVISION OF SLING FOR | 1/1/2007 | $92.49 | 3 |
| W | 53443 | URETHROPLASTY WITH TUBULARIZATIO | 4/1/2002 | INVALID | N |
| W | 53445 | INSERTION OF INFLATABLE URETHRAL | 1/1/2007 | $114.85 | 3 |
| W | 53447 | REMOVAL AND REPLACEMENT OF INFLA | 1/1/2007 | $108.26 | 3 |
| W | 53449 | REPAIR OF INFLATABLE URETHRAL/BL | 1/1/2007 | $78.37 | 3 |
| W | 53502 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $63.47 | 3 |
| W | 53505 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $62.44 | 3 |
| W | 53510 | URETHRORRPAPHY SUTURE OF URETHRA | 1/1/2007 | $83.04 | 3 |
| W | 53515 | URETHRORRHAPHY SUTURE OF URETHRA | 1/1/2007 | $105.25 | 3 |
| W | 53520 | CLOSURE OF URETHROSTOMY OR URETH | 1/1/2007 | $71.41 | 3 |
| W | 53670 | CATHETERIZATION, URETHRA; SIMPLE | 7/1/2003 | INVALID | N |
| W | 53675 | CATHETERIZATION; COMPLICATED (MA | 7/1/2003 | INVALID | N |
| W | 53850 | TRANSURETHRAL DESTRUCTION OF PRO | 11/1/1998 | NC | 9 |
| W | 53852 | TRANSURETHRAL DESTRUCTION OF PRO | 1/1/2007 | $516.92 | 3 |
| W | 53899 | UNLISTED PROCEDURE URINARY SYSTE | 2/1/1994 | $0.01 | 5 |
| W | 54050 | DESTRUCTION OF LESION(S) PENIS ( | 1/1/2007 | $77.33 | 3 |
| W | 54100 | BIOPSY OF PENIS CUTANEOUS (SEPAR | 1/1/2007 | $124.82 | 3 |
| W | 54110 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $80.91 | 3 |
| W | 54111 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $105.31 | 3 |
| W | 54112 | EXCISION OF PENILE PLAQUE (PEYRO | 1/1/2007 | $123.31 | 3 |
| W | 54115 | REMOVAL FOREIGN BODY FROM DEEP P | 1/1/2007 | $56.83 | 3 |
| W | 54120 | AMPUTATION OF PENIS PARTIAL | 1/1/2007 | $79.51 | 3 |
| W | 54125 | AMPUTATION OF PENIS; COMPLETE | 1/1/2007 | $105.36 | 3 |
| W | 54130 | AMPUTATION OF PENIS RADICAL WITH | 1/1/2007 | $154.77 | 3 |
| W | 54135 | AMPUTATION OF PENIS RADICAL IN C | 1/1/2007 | $199.19 | 3 |
| W | 54152 | CIRCUMCISION CLAMP PROCEDURE; EX | 1/1/2007 | INVALID | N |
| W | 54160 | CIRCUMCISION, SURGICAL EXCISION | 1/1/2007 | $35.40 | 3 |
| W | 54205 | INJECTION PROCEDURE FOR PEYRONIE | 1/1/2007 | $68.35 | 3 |
| W | 54300 | PLASTIC OPERATION OF PENIS FOR S | 1/1/2007 | $86.83 | 3 |
| W | 54304 | PLASTIC OPERATION ON PENIS FOR C | 1/1/2007 | $102.19 | 3 |
| W | 54308 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $96.64 | 3 |
| W | 54312 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $9.29 | 3 |
| W | 54316 | URETHROPLASTY FOR SECOND STAGE H | 1/1/2007 | $134.73 | 3 |
| W | 54318 | URETHROPLASTY FOR THIRD STAGE HY | 1/1/2007 | $95.60 | 3 |
| W | 54322 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $105.77 | 3 |
| W | 54324 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $131.83 | 3 |
| W | 54326 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $127.67 | 3 |
| W | 54328 | ONE STAGE DISTAL HYPOSPADIAS REP | 1/1/2007 | $123.89 | 3 |
| W | 54332 | ONE STAGE PROXIMAL PENILE OR PEN | 1/1/2007 | $134.94 | 3 |
| W | 54336 | ONE STAGE PERINEAL HYPOSPADIAS R | 1/1/2007 | $168.78 | 3 |
| W | 54340 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $75.62 | 3 |
| W | 54344 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $130.89 | 3 |
| W | 54348 | REPAIR OF HYPOSPADIAS COMPLICATI | 1/1/2007 | $138.62 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 54352 | REPAIR OF HYPOSPADIAS CRIPPLE RE | 1/1/2007 | $197.95 | 3 |
| W | 54360 | PLASTIC OPERATION ON PENIS TO CO | 1/1/2007 | $97.52 | 3 |
| W | 54380 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $107.48 | 3 |
| W | 54385 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $127.16 | 3 |
| W | 54390 | PLASTIC OPERATION ON PENIS FOR E | 1/1/2007 | $168.93 | 3 |
| W | 54400 | INSERTION OF PENILE PROSTHESIS; | 1/1/2007 | $72.50 | 3 |
| W | 54401 | INSERTION OF PENILE PROSTHESIS; | 1/1/2007 | $86.83 | 3 |
| W | 54402 | REMOVAL OR REPLACEMENT OF NON-IN | 4/1/2002 | INVALID | N |
| W | 54405 | INSERTION OF MULTI-COMPONENT, IN | 1/1/2007 | $105.31 | 3 |
| W | 54407 | REMOVAL, REPAIR, OR REPLACEMENT | 4/1/2002 | INVALID | N |
| W | 54409 | SURGICAL CORRECTION OF HYDRAULIC | 4/1/2002 | INVALID | N |
| W | 54420 | CORPORA CAVERNOSA-SAPHENOUS VEIN | 1/1/2007 | $92.33 | 3 |
| W | 54430 | CORPORA CAVERNOSA-CORPUS SPONGIO | 1/1/2007 | $82.83 | 3 |
| W | 54435 | CORPORA CAVERNOSA-GLANS PENIS FI | 1/1/2007 | $52.73 | 3 |
| W | 54440 | PLASTIC OPERATION OF PENIS FOR I | 10/1/2000 | $104.69 | 3 |
| W | 54510 | EXCISION OF LOCAL LESION OF TEST | 4/1/2002 | INVALID | N |
| W | 54530 | ORCHIECTOMY RADICAL FOR TUMOR IN | 1/1/2007 | $69.91 | 3 |
| W | 54535 | ORCHIECTOMY RADICAL FOR TUMOR; W | 1/1/2007 | $96.74 | 3 |
| W | 54550 | EXPLORATION FOR UNDESCENDED TEST | 1/1/2007 | $63.16 | 3 |
| W | 54560 | EXPLORATION FOR UNDESCENDED TEST | 1/1/2007 | $89.11 | 3 |
| W | 54600 | REDUCTION OF TORSION OF TESTIS S | 1/1/2007 | $57.40 | 3 |
| W | 54620 | FIXATION OF CONTRALATERAL TESTIS | 1/1/2007 | $39.96 | 3 |
| W | 54640 | ORCHIOPEXY, INGUINAL APPROACH, W | 1/1/2007 | $58.39 | 3 |
| W | 54650 | ORCHIOPEXY, ABDOMINAL APPROACH, | 1/1/2007 | $93.42 | 3 |
| W | 54660 | INSERTION OF TESTICULAR PROSTHES | 4/1/1982 | NC | 9 |
| W | 54680 | TRANSPLANTATION OF TESTIS(ES) TO | 1/1/2007 | $103.54 | 3 |
| W | 54690 | LAPAROSCOPY, SURGICAL; ORCHIECTO | 1/1/2007 | $87.71 | 3 |
| W | 54692 | LAPAROSCOPY, SURGICAL; ORCHIOPEX | 1/1/2007 | $101.72 | 3 |
| W | 54820 | EXPLORATION OF EPIDIDYMIS WITH O | 1/1/2007 | INVALID | N |
| W | 54900 | EPIDIDYMOVASOSTOMY ANASTOMOSIS O | 7/1/1982 | NC | 9 |
| W | 54901 | EPIDIDYMOVASOSTOMY ANASTOMOSIS O | 7/1/1982 | NC | 9 |
| W | 55120 | REMOVAL OF FOREIGN BODY IN SCROT | 1/1/2007 | $218.50 | 3 |
| W | 55150 | RESECTION OF SCROTUM | 1/1/2007 | $60.26 | 3 |
| W | 55300 | VASOTOMY FOR VASOGRAMS SEMINAL V | 7/1/1982 | NC | 9 |
| W | 55400 | VASOVASOSTOMY, VASOVASORRHAPHY | 7/1/1982 | NC | 9 |
| W | 55520 | EXCISION OF LESION OF SPERMATIC | 1/1/2007 | $52.00 | 3 |
| W | 55530 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $47.28 | 3 |
| W | 55535 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $54.08 | 3 |
| W | 55540 | EXCISION OF VARICOCELE OR LIGATI | 1/1/2007 | $64.36 | 3 |
| W | 55550 | LAPAROSCOPY, SURGICAL, WITH LIGA | 1/1/2007 | $54.13 | 3 |
| W | 55650 | VESICULECTOMY, ANY APPROACH | 1/1/2007 | $93.32 | 3 |
| W | 55720 | PROSTATOTOMY EXTERNAL DRAINAGE O | 1/1/2007 | $64.36 | 3 |
| W | 55725 | PROSTATOTOMY EXTERNAL DRAINAGE O | 1/1/2007 | $71.93 | 3 |
| W | 55801 | PROSTATECTOMY, PERINEAL, SUBTOTA | 1/1/2007 | $138.73 | 3 |
| W | 55810 | PROSTATECTOMY, PERINEAL RADICAL; | 1/1/2007 | $171.79 | 3 |
| W | 55812 | PROSTATECTOMY PERINEAL RADICAL; | 1/1/2007 | $210.20 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 55815 | PROSTATECTOMY PERINEAL RADICAL W | 1/1/2007 | $230.80 | 3 |
| W | 55821 | PROSTATECTOMY (INCLUDING CONTROL | 1/1/2007 | $111.33 | 3 |
| W | 55831 | PROSTATECTOMY RETROPUBIC SUBTOTA | 1/1/2007 | $121.24 | 3 |
| W | 55840 | PROSTATECTOMY, RETROPUBIC RADICA | 1/1/2007 | $174.18 | 3 |
| W | 55842 | PROSTATECTOMY RETROPUBIC RADICAL | 1/1/2007 | $186.37 | 3 |
| W | 55845 | PROSTATECTOMY RETROPUBIC RADICAL | 1/1/2007 | $215.23 | 3 |
| W | 55859 | TRANSPERINEAL PLACEMENT OF NEEDL | 1/1/2007 | INVALID | N |
| W | 55862 | EXPOSURE OF PROSTATE ANY APPROAC | 1/1/2007 | $143.76 | 3 |
| W | 55865 | EXPOSURE OF PROSTATE ANY APPROAC | 1/1/2007 | $175.11 | 3 |
| W | 55870 | ELECTROEJACULATION | 3/1/1992 | NC | 9 |
| W | 55899 | UNLISTED PROCEDURE MALE GENITAL | 4/1/1982 | $0.01 | 5 |
| W | 55970 | INTERSEX SURGERY MALE TO FEMALE | 4/1/1982 | NC | 9 |
| W | 55980 | INTERSEX SURGERY; FEMALE TO MALE | 4/1/1982 | NC | 9 |
| W | 56501 | DESTRUCTION OF LESION(S), VULVA; | 1/1/2007 | $90.83 | 3 |
| W | 56620 | VULVECTOMY SIMPLE; PARTIAL | 1/1/2007 | $68.30 | 3 |
| W | 56625 | VULVECTOMY SIMPLE; COMPLETE | 1/1/2007 | $76.50 | 3 |
| W | 56630 | VULVECTOMY RADICAL WITHOUT SKIN | 1/1/2007 | $107.33 | 3 |
| W | 56631 | VULVECTOMY, RADICAL, PARTIAL; WI | 1/1/2007 | $139.92 | 3 |
| W | 56632 | VULVECTOMY,RADICAL,PARTIAL;WITH | 1/1/2007 | $167.01 | 3 |
| W | 56633 | VULVECTOMY, RADICAL, COMPLETE | 1/1/2007 | $140.29 | 3 |
| W | 56634 | VULVECTOMY, RADICAL, COMPLETE; W | 1/1/2007 | $152.90 | 3 |
| W | 56637 | VULVECTOMY, RADICAL, COMPLETE; W | 1/1/2007 | $184.92 | 3 |
| W | 56640 | VULVECTOMY, RADICAL, COMPLETE, W | 1/1/2007 | $185.08 | 3 |
| W | 56700 | PARTIAL HYMENECTOMY OR REVISION | 1/1/2007 | $24.19 | 3 |
| W | 56720 | HYMENOTOMY SIMPLE INCISION | 1/1/2007 | INVALID | N |
| W | 56800 | PLASTIC REPAIR OF INTROITUS | 1/1/2007 | $33.84 | 3 |
| W | 56805 | CLITOROPLASTY FOR INTERSEX STATE | 1/1/2007 | $157.83 | 3 |
| W | 57106 | VAGINECTOMY, PARTIAL REMOVAL OF | 1/1/2007 | $58.49 | 3 |
| W | 57107 | VAGINECTOMY, PARTIAL REMOVAL OF | 1/1/2007 | $187.72 | 3 |
| W | 57109 | VAGINECTOMY, APRTIAL REMOVAL OF | 1/1/2007 | $215.07 | 3 |
| W | 57110 | COLPECTOMY OBLITERATION OF VAGIN | 1/1/2007 | $120.88 | 3 |
| W | 57111 | VAGINECTOMY, COMPLETE REMOVAL OF | 1/1/2007 | $222.03 | 3 |
| W | 57112 | VAGINECTOMY, COMPLETE REMOVAL OF | 1/1/2007 | $229.19 | 3 |
| W | 57120 | COLPOCLEISIS (LE FORT TYPE) | 1/1/2007 | $66.95 | 3 |
| W | 57130 | EXCISION OF VAGINAL SEPTUM | 1/1/2007 | $25.33 | 3 |
| W | 57150 | IRRIGATION AND/OR APPLICATION OF | 1/1/2007 | $44.63 | 3 |
| W | 57160 | FITTING AND INSERTION OF PESSARY | 1/1/2007 | $51.90 | 3 |
| W | 57170 | DIAPHRAGM OR CERVICAL CAP FITTIN | 1/1/2007 | $64.88 | 3 |
| W | 57180 | INTRODUCTION OF ANY HEMOSTATIC A | 1/1/2007 | $102.24 | 3 |
| W | 57200 | COLPORRHAPHY SUTURE OF INJURY OF | 1/1/2007 | $37.84 | 3 |
| W | 57210 | COLPOPERINEORRHAPHY SUTURE OF IN | 1/1/2007 | $47.85 | 3 |
| W | 57220 | PLASTIC OPERATION ON URETHRAL SP | 1/1/2007 | $41.10 | 3 |
| W | 57230 | PLASTIC REPAIR OF URETHROCELE | 1/1/2007 | $49.72 | 3 |
| W | 57240 | ANTERIOR COLPORRHAPHY, REPAIR OF | 1/1/2007 | $54.50 | 3 |
| W | 57250 | POSTERIOR COLPORRHAPHY, REPAIR O | 1/1/2007 | $50.60 | 3 |
| W | 57260 | COMBINED ANTEROPOSTERIOR COLPORR | 1/1/2007 | $73.02 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 57265 | COMBINED ANTEROPOSTERIOR COLPORR | 1/1/2007 | $97.00 | 3 |
| W | 57268 | REPAIR OF ENTEROCELE VAGINAL APP | 1/1/2007 | $60.93 | 3 |
| W | 57270 | REPAIR OF ENTEROCELE ABDOMINAL A | 1/1/2007 | $102.61 | 3 |
| W | 57280 | COLPOPEXY ABDOMINAL APPROACH | 1/1/2007 | $124.92 | 3 |
| W | 57282 | COLPOPEXY, VAGINAL; EXTRA-PERITO | 1/1/2007 | $64.30 | 3 |
| W | 57284 | PARAVAGINAL DEFECT REPAIR (INCL | 1/1/2007 | $110.29 | 3 |
| W | 57287 | REMOVAL OR REVISION OF SLING FOR | 1/1/2007 | $88.65 | 3 |
| W | 57288 | SLING OPERATION FOR STRESS INCON | 1/1/2007 | $104.01 | 3 |
| W | 57289 | PEREYRA PROCEDURE INCLUDING ANTE | 1/1/2007 | $97.68 | 3 |
| W | 57291 | CONSTRUCTION OF ARTIFICIAL VAGIN | 1/1/2007 | $71.62 | 3 |
| W | 57292 | CONSTRUCTION OF ARTIFICIAL VAGIN | 1/1/2007 | $112.10 | 3 |
| W | 57300 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $66.22 | 3 |
| W | 57305 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $112.88 | 3 |
| W | 57307 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $129.39 | 3 |
| W | 57308 | CLOSURE OF RECTOVAGINAL FISTULA; | 1/1/2007 | $83.92 | 3 |
| W | 57310 | CLOSURE OF URETHROVAGINAL FISTUL | 1/1/2007 | $57.87 | 3 |
| W | 57311 | CLOSURE OF URETHROVAGINAL FISTUL | 1/1/2007 | $66.12 | 3 |
| W | 57320 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $67.78 | 3 |
| W | 57330 | CLOSURE OF VESICOVAGINAL FISTULA | 1/1/2007 | $99.18 | 3 |
| W | 57335 | VAGINOPLASTY FOR INTERSEX STATE | 1/1/2007 | $153.94 | 3 |
| W | 57452 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $76.81 | 3 |
| W | 57454 | COLPOSCOPY OF THE CERVIX INCLUDI | 1/1/2007 | $110.29 | 3 |
| W | 57530 | TRACHELECTOMY (CERVICECTOMY) AMP | 1/1/2007 | $45.41 | 3 |
| W | 57531 | RADICAL TRACHELECTOMY, WITH BILA | 1/1/2007 | $230.96 | 3 |
| W | 57540 | EXCISION OF CERVICAL STUMP ABDOM | 1/1/2007 | $103.49 | 3 |
| W | 57545 | EXCISION OF CERVICAL STUMP ABDOM | 1/1/2007 | $110.13 | 3 |
| W | 57550 | EXCISION OF CERIVCAL STUMP VAGIN | 1/1/2007 | $52.00 | 3 |
| W | 57555 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2007 | $78.47 | 3 |
| W | 57556 | EXCISION OF CERVICAL STUMP VAGIN | 1/1/2007 | $73.39 | 3 |
| W | 57720 | TRACHELORRHAPHY PLASTIC REPAIR O | 1/1/2007 | $40.07 | 3 |
| W | 57820 | DILATION AND CURETTAGE OF CERVIC | 1/1/2007 | INVALID | N |
| W | 58140 | MYOMECTOMY, EXCISION OF FIBROID | 1/1/2007 | $122.02 | 3 |
| W | 58145 | MYOMECTOMY EXCISION OF FIBROID T | 1/1/2007 | $71.62 | 3 |
| W | 58150 | TOTAL ABDOMINAL HYSTERECTOMY(COR | 1/1/2007 | $127.47 | 3 |
| W | 58152 | TOT HYSTERECTOMY (CORPUS & CERVI | 1/1/2007 | $170.85 | 3 |
| W | 58180 | SUPRACERVICAL ABDOMINAL HYSTEREC | 1/1/2007 | $126.53 | 3 |
| W | 58200 | TOTAL ABDOMINAL HYSTERECTOMY, IN | 1/1/2007 | $177.08 | 3 |
| W | 58210 | RADICAL ABDOMINAL HYSTERECTOMY, | 1/1/2007 | $235.68 | 3 |
| W | 58240 | PELVIC EXENTERATION FOR GYNECOLO | 1/1/2007 | $312.49 | 3 |
| W | 58260 | VAGINAL HYSTERECTOMY, FOR UTERUS | 1/1/2007 | $110.24 | 3 |
| W | 58262 | VAGINAL HYSTERECTOMY; WITH REMOV | 1/1/2007 | $124.25 | 3 |
| W | 58263 | VAGINAL HYSTERECTOMY; WITH REMOV | 1/1/2007 | $134.32 | 3 |
| W | 58267 | VAGINAL HYSTERECTOMY; WITH COLPO | 1/1/2007 | $142.52 | 3 |
| W | 58270 | VAGINAL HYSTERECTOMY; WITH REPAI | 1/1/2007 | $119.63 | 3 |
| W | 58275 | VAGINAL HYSTERECTOMY, WITH TOTAL | 1/1/2007 | $132.03 | 3 |
| W | 58280 | VAGINAL HYSTERECTOMY WITH TOTAL | 1/1/2007 | $141.74 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 58285 | VAGINAL HYSTERCTOMY RADICAL (SCH | 1/1/2007 | $181.13 | 3 |
| W | 58300 | INSERTION OF INTRAUTERINE DEVICE | 1/1/2007 | $66.17 | 3 |
| W | 58301 | REMOVAL OF INTRAUTERINE DEVICE ( | 1/1/2007 | $71.10 | 3 |
| W | 58350 | CHROMOTUBATION OF OVIDUCT, INCLU | 4/1/1982 | NC | 9 |
| W | 58400 | UTERINE SUSPENSION WITH OR WITHO | 1/1/2007 | $57.30 | 3 |
| W | 58410 | UTERINE SUSPENSION WITH/OUT SHOR | 1/1/2007 | $106.97 | 3 |
| W | 58520 | HYSTERORRHAPHY REPAIR OF RUPTURE | 1/1/2007 | $100.79 | 3 |
| W | 58540 | HYSTEROPLASTY REPAIR OF UTERINE | 1/1/2007 | $121.29 | 3 |
| W | 58550 | LAPAROSCOPY, SURGICAL, WITH VAGI | 1/1/2007 | $120.41 | 3 |
| W | 58551 | LAPAROSCOPY, SURGICAL; WITH REMO | 7/1/2003 | INVALID | N |
| W | 58578 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 58579 | UNLISTED HYSTEROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 58600 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $49.77 | 3 |
| W | 58605 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $45.15 | 3 |
| W | 58611 | LIGATION OR TRANSECTION OF FALLO | 1/1/2007 | $11.42 | 3 |
| W | 58615 | OCCLUSION OF FALLOPIAN TUBES BY | 1/1/2007 | $36.69 | 3 |
| W | 58660 | LAPAROSCOPY, SURGICAL; WITH LYSI | 1/1/2007 | $93.11 | 3 |
| W | 58661 | LAPAROSCOPY, SURGICAL; WITH REMO | 1/1/2007 | $90.83 | 3 |
| W | 58662 | LAPAROSCOPY, SURGICAL; WITH FULG | 1/1/2007 | $98.61 | 3 |
| W | 58670 | LAPAROSCOPY, SURGICAL; WITH FULG | 1/1/2007 | $49.51 | 3 |
| W | 58671 | LAPAROSCOPY, SURGICAL; WITH OCCL | 1/1/2007 | $49.56 | 3 |
| W | 58672 | LAPAROSCOPY, SURGICAL; WITH FIMB | 1/1/2007 | $107.23 | 3 |
| W | 58673 | LAPAROSCOPY, SURGICAL; WITH SALP | 1/1/2007 | $114.18 | 3 |
| W | 58700 | SALPINGECTOMY COMPLETE OR PARTIA | 1/1/2007 | $101.41 | 3 |
| W | 58720 | SALPINGO-OOPHORECTOMY COMPLETE O | 1/1/2007 | $96.12 | 3 |
| W | 58740 | LYSIS OF ADHESIONS (SALPINGOLYSI | 4/1/1982 | NC | 9 |
| W | 58750 | TUBOTUBAL ANASTOMOSIS | 4/1/1982 | NC | 9 |
| W | 58752 | TUBOUTERINE IMPLANTATION | 10/1/1984 | NC | 9 |
| W | 58760 | FIMBRIOPLASTY | 4/1/1982 | NC | 9 |
| W | 58770 | SALPINGOSTOMY (SALPINGONEOSTOMY) | 10/1/1984 | NC | 9 |
| W | 58800 | DRAINAGE OF OVARIAN CYSTS UNILAT | 1/1/2007 | $42.61 | 3 |
| W | 58805 | DRAINAGE OF OVARIAN CYST(S) UNIL | 1/1/2007 | $52.26 | 3 |
| W | 58820 | DRAINAGE OF OVARIAN ABSCESS VAGI | 1/1/2007 | $41.68 | 3 |
| W | 58822 | DRAINAGE OF OVARIAN ABSCESS; ABD | 1/1/2007 | $85.64 | 3 |
| W | 58823 | DRAINAGE OF PELVIC ABSCESS, TRAN | 1/1/2007 | $24.55 | 3 |
| W | 58825 | TRANSPOSITION, OVARY(S) | 1/1/2007 | $93.89 | 3 |
| W | 58900 | BIOPSY OF OVARY UNILATERAL OR BI | 1/1/2007 | $53.20 | 3 |
| W | 58920 | WEDGE RESECTION OR BISECTION OF | 1/1/2007 | $95.29 | 3 |
| W | 58925 | OVARIAN CYSTECTOMY UNILATERAL OR | 1/1/2007 | $95.76 | 3 |
| W | 58940 | OOPHORECTOMY PARTIAL OR TOTAL UN | 1/1/2007 | $63.84 | 3 |
| W | 58943 | OOPHORECTOMY, PARTIAL OR TOTAL, | 1/1/2007 | $152.02 | 3 |
| W | 58950 | RESECTION OF OVARIAN, TUBAL OR P | 1/1/2007 | $142.00 | 3 |
| W | 58951 | RESECTION OF OVARIAN MALIGNANCY | 1/1/2007 | $183.99 | 3 |
| W | 58952 | RESECTION OF OVARIAN, TUBAL OR P | 1/1/2007 | $206.41 | 3 |
| W | 58960 | LAPAROTOMY, FOR STAGING OR RESTA | 1/1/2007 | $123.47 | 3 |
| W | 58999 | UNLISTED PROCEDURE FEMALE GENITA | 2/1/1994 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 59020 | FETAL CONTRACTION STRESS TEST | 1/1/2007 | $44.12 | 3 |
| W | 59025 | FETAL NON-STRESS TEST | 1/1/2007 | $29.06 | 3 |
| W | 59100 | HYSTEROTOMY, ABDOMINAL (EG, FOR | 1/1/2007 | $112.83 | 3 |
| W | 59120 | SURG TREAT OF ECTOPIC PREG;TUB O | 1/1/2007 | $106.14 | 3 |
| W | 59121 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $107.80 | 3 |
| W | 59130 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $116.15 | 3 |
| W | 59135 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $126.64 | 3 |
| W | 59136 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $118.90 | 3 |
| W | 59140 | SURGICAL TREATMENT OF ECTOPIC PR | 1/1/2007 | $46.50 | 3 |
| W | 59150 | LAPAROSCOPIC TREATMENT OF ECTOPI | 1/1/2007 | $106.08 | 3 |
| W | 59151 | LAPAROSCOPIC TREATMENT OF ECTOPI | 1/1/2007 | $105.20 | 3 |
| W | 59350 | HYSTERORRHAPHY OF RUPTURED UTERU | 1/1/2007 | $41.47 | 3 |
| W | 59400 | ROUTINE OBSTETRIC CARE INCLUDING | 1/1/2007 | $1,702.16 | 3 |
| W | 59409 | VAGINAL DELIVERY ONLY WITH OR WI | 1/1/2007 | $853.99 | 3 |
| W | 59410 | VAGINAL DELIVERY ONLY (W/WO EPIS | 1/1/2007 | $954.09 | 3 |
| W | 59425 | ANTEPARTUM CARE ONLY; 4-6 VISTS | 1/1/2007 | $393.82 | 3 |
| W | 59426 | ANTEPARTUM CARE ONLY; 7 OR MORE | 1/1/2007 | $690.64 | 3 |
| W | 59430 | POSTPARTUM CARE ONLY (SEPARATE P | 1/1/2007 | $149.77 | 3 |
| W | 59514 | CEASAREAN DELIVERY ONLY | 1/1/2007 | $201.53 | 3 |
| W | 59525 | SUBTOTAL OR TOTAL HYSTERECTOMY A | 1/1/2007 | $106.93 | 3 |
| W | 59620 | CESAREAN DELIVERY ONLY, FOLLOWIN | 1/1/2007 | $220.69 | 3 |
| W | 59870 | UTERINE EVACUATION AND CURETTAGE | 1/1/2007 | $61.81 | 3 |
| W | 59898 | UNLISTED LAPAROSCOPY PROCEDURE, | 10/1/2001 | $0.01 | 5 |
| W | 59899 | UNLISTED PROCEDURE MATERNITY CAR | 1/1/1999 | $0.01 | 5 |
| W | 60200 | EXCISION OF CYST OR ADENOMA OF T | 1/1/2007 | $85.89 | 3 |
| W | 60210 | PARTIAL THYROID LOBECTOMY, UNILA | 1/1/2007 | $92.07 | 3 |
| W | 60212 | PARTIAL THYROID LOBECTOMY, UNILA | 1/1/2007 | $133.07 | 3 |
| W | 60220 | TOTAL THYROID LOBECTOMY, UNILATE | 1/1/2007 | $100.48 | 3 |
| W | 60225 | TOTAL THYROID LOBECTOMY, UNILATE | 1/1/2007 | $120.56 | 3 |
| W | 60240 | THROIDECTOMY TOTAL OR COMPLETE | 1/1/2007 | $132.29 | 3 |
| W | 60252 | THYROIDECTOMY TOTAL OR SUBTOTAL | 1/1/2007 | $171.01 | 3 |
| W | 60254 | THYROIDECTOMY TOTAL OR SUBTOTAL | 1/1/2007 | $226.96 | 3 |
| W | 60260 | THYROIDECTOMY, REMOVAL OF ALL RE | 1/1/2007 | $145.53 | 3 |
| W | 60270 | THYROIDECTOMY, INCL SUBSTERNAL T | 1/1/2007 | $171.48 | 3 |
| W | 60271 | THYROIDECTOMY, INCLUDING SUBSTER | 1/1/2007 | $140.86 | 3 |
| W | 60280 | EXCISION OF THYROGLOSSAL DUCT CY | 1/1/2007 | $57.45 | 3 |
| W | 60281 | EXCISION OF THYROGLOSSAL DUCT CY | 1/1/2007 | $78.37 | 3 |
| W | 60500 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $133.02 | 3 |
| W | 60502 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $167.27 | 3 |
| W | 60505 | PARATHYROIDECTOMY OR EXPLORATION | 1/1/2007 | $181.91 | 3 |
| W | 60512 | PARATHYROID AUTOTRANSPLANTATION | 1/1/2007 | $34.20 | 3 |
| W | 60520 | THYMECTOMY, PARTIAL OR TOTAL; TR | 1/1/2007 | $141.58 | 3 |
| W | 60521 | THYMECTOMY, PARTIAL OR TOAL; STE | 1/1/2007 | $162.03 | 3 |
| W | 60522 | THYMECTOMY, PARTIAL OR TOTAL; ST | 1/1/2007 | $195.20 | 3 |
| W | 60540 | ADRENALECTOMY, PART OR COMP, OR | 1/1/2007 | $136.70 | 3 |
| W | 60545 | ADRENALECTOMY PARTIAL OR COMPLET | 1/1/2007 | $158.14 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 60600 | EXCISION OF CAROTID BODY TUMOR W | 1/1/2007 | $161.31 | 3 |
| W | 60605 | EXCISION OF CAROTID BODY TUMOR W | 1/1/2007 | $181.60 | 3 |
| W | 60650 | LAPAROSCOPY, SURGICAL, WITH ADRE | 1/1/2007 | $157.00 | 3 |
| W | 60659 | UNLISTED LAPAROSCOPY PROCEDURE, | 8/19/2002 | $0.01 | 5 |
| W | 60699 | UNLISTED PROCEDURE ENDOCRINE SYS | 4/1/1982 | $0.01 | 5 |
| W | 61001 | SUBDURAL TAP THROUGH FONTANELLE | 1/1/2007 | $14.06 | 3 |
| W | 61140 | BURR HOLES OR TREPHINE WITH BIOP | 1/1/2007 | $155.18 | 3 |
| W | 61150 | BURR HOLE(S) OR TREPHINE WITH DR | 1/1/2007 | $167.38 | 3 |
| W | 61151 | BURR HOLE(S) OR TREPHINE WITH SU | 1/1/2007 | $120.56 | 3 |
| W | 61154 | BURR HOLE(S) WITH EVACUATION AND | 1/1/2007 | $148.85 | 3 |
| W | 61156 | BURR HOLE(S) WITH ASPIRATION OF | 1/1/2007 | $157.67 | 3 |
| W | 61210 | BURR HOLE(S); FOR IMPLANTING VEN | 1/1/2007 | $53.20 | 3 |
| W | 61215 | INSERTION OF SUBCUTANEOUS RESERV | 1/1/2007 | $52.68 | 3 |
| W | 61250 | BURR HOLE(S) OR TREPHINE, SUPRAT | 1/1/2007 | $103.96 | 3 |
| W | 61253 | BURR HOLES OR TREPHINE INFRATENT | 1/1/2007 | $117.76 | 3 |
| W | 61304 | CRANIECTOMY OR CRANIOTOMY EXPLOR | 1/1/2007 | $209.73 | 3 |
| W | 61305 | CRANIECTOMY OR CRANIOTOMY EXPLOR | 1/1/2007 | $249.07 | 3 |
| W | 61312 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $238.48 | 3 |
| W | 61313 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $239.57 | 3 |
| W | 61314 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $225.87 | 3 |
| W | 61315 | CRANIECTOMY OR CRANIOTOMY FOR EV | 1/1/2007 | $263.86 | 3 |
| W | 61320 | CRANIECTOMY OR CRANIOTOMY DRAINA | 1/1/2007 | $243.77 | 3 |
| W | 61321 | CRANIECTOMY OR CRANIOTOMY DRAINA | 1/1/2007 | $268.58 | 3 |
| W | 61330 | DECOMPRESSION OF ORBIT ONLY, TRA | 1/1/2007 | $204.28 | 3 |
| W | 61332 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $247.56 | 3 |
| W | 61333 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $246.21 | 3 |
| W | 61334 | EXPLORATION OF ORBIT (TRANSCRANI | 1/1/2007 | $159.02 | 3 |
| W | 61340 | SUBTEMPORAL CRANIAL DECOMPRESSIO | 1/1/2007 | $179.63 | 3 |
| W | 61343 | CRANIECTOMY, SUBOCCIPITAL W/CERV | 1/1/2007 | $281.30 | 3 |
| W | 61345 | OTHER CRANIAL DECOMPRESSION POST | 1/1/2007 | $257.48 | 3 |
| W | 61440 | CRANIOTOMY FOR SECTION OF TENTOR | 1/1/2007 | $247.61 | 3 |
| W | 61450 | CRANIECTOMY, SUBTEMPORAL, FOR SE | 1/1/2007 | $238.74 | 3 |
| W | 61458 | CRANIECTOMY SUBOCCIPITAL FOR EXP | 1/1/2007 | $258.51 | 3 |
| W | 61460 | CRANIECTOMY SUBOCCIPITAL FOR SEC | 1/1/2007 | $263.81 | 3 |
| W | 61470 | CRANIECTOMY SUBOCCIPITAL; FOR ME | 1/1/2007 | $237.65 | 3 |
| W | 61480 | CRANIECTOMY SUBOCCIPITAL FOR MES | 1/1/2007 | $251.56 | 3 |
| W | 61490 | CRANIOTOMY FOR LOBOTOMY, INCLUDI | 1/1/2007 | $243.31 | 3 |
| W | 61500 | CRANIECTOMY; WITH EXCISION OF TU | 1/1/2007 | $170.34 | 3 |
| W | 61501 | CRANIECTOMY; FOR OSTEOMYELITIS | 1/1/2007 | $141.48 | 3 |
| W | 61510 | CRANIECTOMY, TREPHINATION, BONE | 1/1/2007 | $272.37 | 3 |
| W | 61512 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $331.23 | 3 |
| W | 61514 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $239.83 | 3 |
| W | 61516 | CRANIECTOY TREPHINATION BONE FLA | 1/1/2007 | $234.59 | 3 |
| W | 61518 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $353.08 | 3 |
| W | 61519 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $387.38 | 3 |
| W | 61520 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $500.06 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 61521 | CRANIECTOMY FOR EXCISION OF BRAI | 1/1/2007 | $415.46 | 3 |
| W | 61522 | CRANIECTOMY INFRATENTORIAL OR PO | 1/1/2007 | $277.51 | 3 |
| W | 61524 | CRANIECTOMY INFRATENTORIAL OR PO | 1/1/2007 | $262.98 | 3 |
| W | 61526 | CRANIECTOMY BONE FLAP CRANIOTOMY | 1/1/2007 | $460.40 | 3 |
| W | 61530 | CRANIECTOMY BONE FLAP CRANIOTOMY | 1/1/2007 | $389.46 | 3 |
| W | 61533 | CRANIOTOMY WITH ELEVATION OF BON | 1/1/2007 | $188.60 | 3 |
| W | 61534 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $199.71 | 3 |
| W | 61535 | CRANIECTOMY,TREPHINATION,BONE FL | 1/1/2007 | $114.49 | 3 |
| W | 61536 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $334.70 | 3 |
| W | 61538 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $254.52 | 3 |
| W | 61539 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $301.75 | 3 |
| W | 61541 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $268.01 | 3 |
| W | 61542 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $295.05 | 3 |
| W | 61543 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $275.85 | 3 |
| W | 61544 | CRANIECTOMY TREPHINATION BONE FL | 1/1/2007 | $234.95 | 3 |
| W | 61545 | CRANIECTOMY, TREPHINATION, BONE | 1/1/2007 | $407.99 | 3 |
| W | 61546 | CRANIOTOMY FOR HYPOPHYSECTOMY OR | 1/1/2007 | $292.92 | 3 |
| W | 61548 | HYPOPHYSECTOMY OR EXCISION OF PI | 1/1/2007 | $195.87 | 3 |
| W | 61550 | CRANIECTOMY FOR CRANIOSYNOSTOSIS | 1/1/2007 | $117.09 | 3 |
| W | 61552 | CRANIECTOMY FOR CRANIOSYNOSTOSIS | 1/1/2007 | $154.30 | 3 |
| W | 61556 | CRANIOTOMY FOR CRANIOSYNOSTOSIS; | 1/1/2007 | $198.57 | 3 |
| W | 61557 | CRANIOTOMY FOR CRANIOSYNOSTOSIS; | 1/1/2007 | $216.89 | 3 |
| W | 61558 | EXTENSIVE CRANIECTOMY FOR MULTIP | 1/1/2007 | $213.46 | 3 |
| W | 61559 | EXTENSIVE CRANIECTOMY FOR MULTIP | 1/1/2007 | $314.46 | 3 |
| W | 61563 | EXCISION, INTRA AND EXTRACRANIAL | 1/1/2007 | $245.07 | 3 |
| W | 61564 | EXCISION, INTRA AND EXTRACRANIAL | 1/1/2007 | $315.86 | 3 |
| W | 61570 | CRANIECTOMY OR CRANIOTOMY;W/EXCI | 1/1/2007 | $230.28 | 3 |
| W | 61571 | CRANIECTOMY OR CRANIOTOMY WITH T | 1/1/2007 | $250.68 | 3 |
| W | 61575 | TRANSORAL APPROACH TO SKULL BASE | 1/1/2007 | $307.87 | 3 |
| W | 61576 | TRANSORAL APP TO SKULL BASE,DECO | 1/1/2007 | $481.32 | 3 |
| W | 61580 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $307.82 | 3 |
| W | 61581 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $321.62 | 3 |
| W | 61582 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $343.47 | 3 |
| W | 61583 | CRANIOFACIAL APPROACH TO ANTERIO | 1/1/2007 | $366.00 | 3 |
| W | 61584 | ORBITOCRANIAL APPROACH TO ANTERI | 1/1/2007 | $349.55 | 3 |
| W | 61585 | ORBITOCRANIAL APPROACH TO ANTERI | 1/1/2007 | $374.35 | 3 |
| W | 61590 | INFRATEMPORAL PRE-AURICULAR APPR | 1/1/2007 | $392.93 | 3 |
| W | 61591 | INFRATEMPORAL POST_AURICULAR APP | 1/1/2007 | $409.28 | 3 |
| W | 61592 | ORBITOCRANIAL ZYGOMATIC APPROACH | 1/1/2007 | $395.48 | 3 |
| W | 61595 | TRANSTEMPORAL APPROACH TO POSTER | 1/1/2007 | $290.17 | 3 |
| W | 61596 | TRANSCOCHLEAR APPROACH TO POSTER | 1/1/2007 | $329.46 | 3 |
| W | 61597 | TRANSCONDYLAR APPROACH TO POST C | 1/1/2007 | $362.11 | 3 |
| W | 61598 | TRANSPETROSAL APPROACH TO POST C | 1/1/2007 | $323.54 | 3 |
| W | 61600 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $256.49 | 3 |
| W | 61601 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $285.50 | 3 |
| W | 61605 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $281.09 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 61606 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $378.51 | 3 |
| W | 61607 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $347.47 | 3 |
| W | 61608 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $412.19 | 3 |
| W | 61609 | TRANSECTION OR LIGATION,CAROTID | 1/1/2007 | $89.74 | 3 |
| W | 61610 | TRANSECTION OR LIGATION, CAROTID | 1/1/2007 | $261.94 | 3 |
| W | 61611 | TRANSECTION OR LIGATION, CAROTID | 1/1/2007 | $68.09 | 3 |
| W | 61612 | TRANSECTION OR LIGATION,CAROTID | 1/1/2007 | $236.09 | 3 |
| W | 61613 | OBLITERATION OF CAROTID ANEURYSM | 1/1/2007 | $392.16 | 3 |
| W | 61615 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $308.96 | 3 |
| W | 61616 | RESECTION OR EXCISION OF NEOPLAS | 1/1/2007 | $416.45 | 3 |
| W | 61618 | SECONDARY REPAIR OF DURA FOR CER | 1/1/2007 | $161.62 | 3 |
| W | 61619 | 2ND REPAIR OF DURA FOR CSF LEAK, | 1/1/2007 | $191.51 | 3 |
| W | 61680 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $291.00 | 3 |
| W | 61682 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $568.98 | 3 |
| W | 61684 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $374.15 | 3 |
| W | 61686 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $601.37 | 3 |
| W | 61690 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $274.86 | 3 |
| W | 61692 | SURGERY OF INTRACRANIAL ARTERIOV | 1/1/2007 | $481.27 | 3 |
| W | 61700 | SURGERY OF SIMPLE INTRACRANIAL A | 1/1/2007 | $473.85 | 3 |
| W | 61702 | SURGERY OF INTRACRANIAL ANEURYSM | 1/1/2007 | $442.24 | 3 |
| W | 61703 | SURGERY OF INTRACRANIAL ANEURYSM | 1/1/2007 | $165.98 | 3 |
| W | 61705 | SURGERY OF ANEURYSM VASCULAR MAL | 1/1/2007 | $333.72 | 3 |
| W | 61708 | SURGERY OF ANEURYSM VASCULAR MAL | 1/1/2007 | $274.76 | 3 |
| W | 61710 | SURGERY OF ANEURYSM VASCULAR MAL | 1/1/2007 | $1,240.93 | 3 |
| W | 61711 | ANASTOMOSIS ARTERIAL EXTRACRANIA | 1/1/2007 | $340.10 | 3 |
| W | 61850 | TWIST DRILL OR BURR HOLE(S) FOR | 1/1/2007 | $120.77 | 3 |
| W | 61860 | CRANIECTOMY OR CRANIOTOMY FOR IM | 1/1/2007 | $196.55 | 3 |
| W | 61862 | TWIST DRILL, BURR HOLE, CRANIOTO | 4/1/2004 | INVALID | N |
| W | 61870 | CRANIECTOMY FOR IMPLANTATION OF | 1/1/2007 | $147.97 | 3 |
| W | 61875 | CRANIECTOMY FOR IMPLANTATION OF | 1/1/2007 | $137.90 | 3 |
| W | 61880 | REVISION OR REMOVAL OF INTRACRAN | 1/1/2007 | $64.98 | 3 |
| W | 61886 | INSERTION OR REPLACE OF CRANIAL | 1/1/2007 | $423.50 | 3 |
| W | 62005 | ELEVATION OF DEPRESSED SKULL FRA | 1/1/2007 | $149.63 | 3 |
| W | 62010 | ELEVATION OF DEPRESSED SKULL FRA | 1/1/2007 | $190.16 | 3 |
| W | 62100 | CRANIOTOMY FOR REPAIR OF DURAL/C | 1/1/2007 | $205.78 | 3 |
| W | 62115 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $201.32 | 3 |
| W | 62116 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $223.38 | 3 |
| W | 62117 | REDUCTION OF CRANIOMEGALIC SKULL | 1/1/2007 | $241.28 | 3 |
| W | 62120 | REPAIR OF ENCEPHALOCELE,SKULL VA | 1/1/2007 | $232.67 | 3 |
| W | 62121 | CRANIOTOMY WITH REPAIR OF ENCEPH | 1/1/2007 | $213.83 | 3 |
| W | 62140 | CRANIOPLASTY FOR SKULL DEFECT UP | 1/1/2007 | $131.26 | 3 |
| W | 62141 | CRANIOPLASTY FOR SKULL DEFECT; L | 1/1/2007 | $143.81 | 3 |
| W | 62142 | REMOVAL OF BONE FLAP OR PROSTHET | 1/1/2007 | $106.40 | 3 |
| W | 62143 | REPLACEMENT OF BONE FLAP OR PROS | 1/1/2007 | $126.90 | 3 |
| W | 62145 | CRANIOPLASTY FOR SKULL DEFECT WI | 1/1/2007 | $177.50 | 3 |
| W | 62146 | CRANIOPLASTY WITH AUTOGRAFT (INC | 1/1/2007 | $152.43 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 62147 | CRANIOPLASTY WITH AUTOGRAFT (INC | 1/1/2007 | $181.39 | 3 |
| W | 62180 | VENTRICULOCISTERNOSTOMY (TORKILD | 1/1/2007 | $198.88 | 3 |
| W | 62192 | CREATION OF SHUNT; SUBARACHNOID/ | 1/1/2007 | $118.75 | 3 |
| W | 62200 | VENTRICULOCISTERNOSTOMY THIRD VE | 1/1/2007 | $175.42 | 3 |
| W | 62220 | CREATION OF SHUNT VENTRICULO-ATR | 1/1/2007 | $126.22 | 3 |
| W | 62223 | CREATION OF SHUNT; VENTRICULO-PE | 1/1/2007 | $125.81 | 3 |
| W | 62230 | REPLACEMENT OR REVISION OF CEREB | 1/1/2007 | $102.35 | 3 |
| W | 62256 | REMOVAL OF COMPLETE CEREBROSPINA | 1/1/2007 | $67.47 | 3 |
| W | 62258 | REMOVAL OF COMPLETE SHUNT SYSTEM | 1/1/2007 | $140.08 | 3 |
| W | 62351 | IMPLANTATION, REVISION OR REPOSI | 1/1/2007 | $100.53 | 3 |
| W | 63001 | LAMINECTOMY W/EXPL AND/OR DECOMP | 1/1/2007 | $151.03 | 3 |
| W | 63003 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $153.31 | 3 |
| W | 63005 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $146.57 | 3 |
| W | 63011 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $135.77 | 3 |
| W | 63012 | LAMINECTOMY WITH REMOVAL OF ABNO | 1/1/2007 | $150.56 | 3 |
| W | 63015 | LAMINECTOMY W/EXPL AND/OR DECOMP | 1/1/2007 | $186.68 | 3 |
| W | 63016 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $184.56 | 3 |
| W | 63017 | LAMINECTOMY FOR DECOMPRESSION OF | 1/1/2007 | $155.54 | 3 |
| W | 63020 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $146.36 | 3 |
| W | 63030 | LAMINOTOMY,FOR DECOMPRESSION OF | 1/1/2007 | $121.55 | 3 |
| W | 63035 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $28.70 | 3 |
| W | 63040 | LAMINOTOMY(HEMILAMINECTOMY),W/DE | 1/1/2007 | $181.55 | 3 |
| W | 63042 | LAMINOTOMY, WITH DECOMPRESSION O | 1/1/2007 | $171.58 | 3 |
| W | 63043 | LAMINOTOMY, WITH DECOMPRESSION O | 4/1/2004 | $27.77 | 3 |
| W | 63044 | LAMINOTOMY, WITH DECOMPRESSION O | 4/1/2004 | $27.77 | 3 |
| W | 63045 | LAMINECTOMY,FACETECTOMY & FORAMI | 1/1/2007 | $160.06 | 3 |
| W | 63046 | LAMINECTOMY, INC UNI/BI COMP FAC | 1/1/2007 | $153.31 | 3 |
| W | 63047 | LAMINECTOMY, INC UNI OR BI COMP | 1/1/2007 | $143.97 | 3 |
| W | 63048 | LAMINECTOMY,INC UNI/BI COMP FACE | 1/1/2007 | $29.27 | 3 |
| W | 63055 | TRANSPEDICULAR APPROACH W/DECOMP | 1/1/2007 | $209.68 | 3 |
| W | 63056 | TRANSPEDICULAR APPROACH FOR DECO | 1/1/2007 | $195.56 | 3 |
| W | 63057 | TRANSPEDICULAR APPR FOR DECOMP O | 1/1/2007 | $47.28 | 3 |
| W | 63064 | COSTOVERTEBRAL APPROACH W/DECOMP | 1/1/2007 | $232.10 | 3 |
| W | 63066 | COSTOVERTEBRAL APPROACH FOR DECO | 1/1/2007 | $29.12 | 3 |
| W | 63075 | DISKECTOMY,ANTERIOR,W/DECOMPRESS | 1/1/2007 | $187.46 | 3 |
| W | 63076 | DISKECTOMY ANTERIOR FOR DECOMPRE | 1/1/2007 | $36.64 | 3 |
| W | 63077 | DISKECTOMY, ANTR, FOR DECOMP OF | 1/1/2007 | $198.36 | 3 |
| W | 63078 | DISKECTOMY,ANT,FOR DECOMP OF SPI | 1/1/2007 | $28.96 | 3 |
| W | 63081 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $226.23 | 3 |
| W | 63082 | VERTEBRAL CORPECTOMY,PART/COMP,A | 1/1/2007 | $39.50 | 3 |
| W | 63085 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $243.26 | 3 |
| W | 63086 | VERTEBRAL CORPECTOMY,PART/COMP,T | 1/1/2007 | $27.87 | 3 |
| W | 63087 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $317.78 | 3 |
| W | 63088 | VERTEBRAL CORPECTOMY,PART/COMP,C | 1/1/2007 | $37.99 | 3 |
| W | 63090 | VERTEBRAL CORPECTOMY(VERTEBRAL B | 1/1/2007 | $251.25 | 3 |
| W | 63091 | VERTEBRAL CORPECTOMY,PART/COMP,T | 1/1/2007 | $25.79 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 63170 | LAMINECTOMY W/MYELOTOMY(EG,BISCH | 1/1/2007 | $189.69 | 3 |
| W | 63172 | LAMINECTOMY W/DRAINAGE OF INTRAM | 1/1/2007 | $170.13 | 3 |
| W | 63173 | LAMINECTOMY FOR DRAINAGE OF INTR | 1/1/2007 | $210.09 | 3 |
| W | 63180 | LAMINECTOMY AND SECTION OF DENTA | 1/1/2007 | $172.31 | 3 |
| W | 63182 | LAMINECTOMY AND SECTION OF DENTA | 1/1/2007 | $190.73 | 3 |
| W | 63185 | LAMINECTOMY W/RHIZOTOMY; ONE OR | 1/1/2007 | $134.52 | 3 |
| W | 63190 | LAMINECTOMY FOR RHIZOTOMY; MORE | 1/1/2007 | $159.96 | 3 |
| W | 63191 | LAMINECTOMY W/SECTION OF SPINAL | 1/1/2007 | $178.28 | 3 |
| W | 63194 | LAMINECTOMY W/CORDOTOMY, W/SECTI | 1/1/2007 | $177.29 | 3 |
| W | 63195 | LAMINECTOMY FOR CORDOTOMY, WITH | 1/1/2007 | $180.35 | 3 |
| W | 63196 | LAMINECTOMY W/CORDOTOMY,W/SECTIO | 1/1/2007 | $215.13 | 3 |
| W | 63197 | LAMINECTOMY FOR CORDOTOMY, WITH | 1/1/2007 | $200.75 | 3 |
| W | 63198 | LAMINECTOMY W/CORDOTOMY W/SECTIO | 1/1/2007 | $208.74 | 3 |
| W | 63199 | LAMINECTOMY FOR CORDOTOMY WITH S | 1/1/2007 | $224.83 | 3 |
| W | 63200 | LAMINECTOMY, W/RELEASE OF TETHER | 1/1/2007 | $183.88 | 3 |
| W | 63250 | LAMINECTOMY FOR EXCISION OF OCCL | 1/1/2007 | $361.69 | 3 |
| W | 63251 | LAMINECTOMY FOR EXCISION OR OCCL | 1/1/2007 | $385.10 | 3 |
| W | 63252 | LAMINECTOMY FOR EXCISION OF OCCL | 1/1/2007 | $384.37 | 3 |
| W | 63265 | LAMINECTOMY FOR EXCISION OR EVAC | 1/1/2007 | $206.35 | 3 |
| W | 63266 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $212.89 | 3 |
| W | 63267 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $173.29 | 3 |
| W | 63268 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $169.04 | 3 |
| W | 63270 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $254.73 | 3 |
| W | 63271 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $256.33 | 3 |
| W | 63272 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $239.67 | 3 |
| W | 63273 | LAMINECTOMY FOR EXCISION OF INTR | 1/1/2007 | $230.23 | 3 |
| W | 63275 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $224.42 | 3 |
| W | 63276 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $222.91 | 3 |
| W | 63277 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $199.09 | 3 |
| W | 63278 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $194.63 | 3 |
| W | 63280 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $269.52 | 3 |
| W | 63281 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $266.71 | 3 |
| W | 63282 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $251.56 | 3 |
| W | 63283 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $238.27 | 3 |
| W | 63285 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $337.97 | 3 |
| W | 63286 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $336.00 | 3 |
| W | 63287 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $345.14 | 3 |
| W | 63290 | LAMINECTOMY FOR BIOPSY/EXCISION | 1/1/2007 | $347.63 | 3 |
| W | 63300 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $231.94 | 3 |
| W | 63301 | VERT CORPECT, PART/COMP, FOR EXC | 1/1/2007 | $251.92 | 3 |
| W | 63302 | VERT CORP, PART/COMP, FOR EXCIS | 1/1/2007 | $255.30 | 3 |
| W | 63303 | VERT CORP,PART/COMP,FOR EXCIS OF | 1/1/2007 | $270.30 | 3 |
| W | 63304 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $280.26 | 3 |
| W | 63305 | VERT CORPECT, PART/COMP, FOR EXC | 1/1/2007 | $289.50 | 3 |
| W | 63306 | VERT CORP, PART/COMP, FOR EXCISI | 1/1/2007 | $302.78 | 3 |
| W | 63307 | VERT CORP,PART/COMP,FOR EXCIS OF | 1/1/2007 | $274.50 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 63308 | VERTEBRAL CORPECTOMY, PART/COMP, | 1/1/2007 | $47.44 | 3 |
| W | 63655 | LAMINECTOMY FOR IMPLANTATION OF | 1/1/2007 | $101.78 | 3 |
| W | 63685 | INSERTION OR REPLACE OF SPINAL N | 1/1/2007 | $63.47 | 3 |
| W | 63700 | REPAIR OF MENINGOCELE LESS THAN | 1/1/2007 | $157.57 | 3 |
| W | 63702 | REPAIR OF MENINGOCELE; LARGER TH | 1/1/2007 | $174.54 | 3 |
| W | 63704 | REPAIR OF MYELOMENINGOCELE LESS | 1/1/2007 | $200.70 | 3 |
| W | 63706 | REPAIR OF MYELOMENINGOCELE; LARG | 1/1/2007 | $227.89 | 3 |
| W | 63707 | REPAIR OF DURAL/CEREBROSPINAL FL | 1/1/2007 | $111.43 | 3 |
| W | 63709 | REPAIR OF DURAL/CEREBROSPINAL FL | 1/1/2007 | $139.14 | 3 |
| W | 63710 | DURAL GRAFT SPINAL | 1/1/2007 | $137.59 | 3 |
| W | 63740 | CREATION OF SHUNT,LUMBAR,SUBARAC | 1/1/2007 | $112.26 | 3 |
| W | 63741 | CREATION OF SHUNT, LUMBAR, SUBAR | 1/1/2007 | $76.09 | 3 |
| W | 63744 | REPLACEMENT IRRIGATION OR REVISI | 1/1/2007 | $79.15 | 3 |
| W | 64400 | INJECTION ANESTHETIC AGENT TRIGE | 1/1/2007 | $79.93 | 3 |
| W | 64402 | INJECTION ANESTHETIC AGENT; FACI | 1/1/2007 | $76.55 | 3 |
| W | 64405 | INJECTION ANESTHETIC AGENT; GREA | 1/1/2007 | $74.22 | 3 |
| W | 64408 | INJECTION ANESTHETIC AGENT VAGUS | 1/1/2007 | $80.19 | 3 |
| W | 64410 | INJECTION ANESTHETIC AGENT; PHRE | 1/1/2007 | $104.58 | 3 |
| W | 64412 | INJECTION ANESTHETIC AGENT; SPIN | 1/1/2007 | $101.72 | 3 |
| W | 64413 | INJECTION ANESTHETIC AGENT; CERV | 1/1/2007 | $86.41 | 3 |
| W | 64415 | INJECTION, ANESTHETIC AGENT; BRA | 1/1/2007 | $113.66 | 3 |
| W | 64417 | INJECTION ANESTHETIC AGENT; AXIL | 1/1/2007 | $119.11 | 3 |
| W | 64418 | INJECTION ANESTHETIC AGENT; SUPR | 1/1/2007 | $104.32 | 3 |
| W | 64420 | INJECTION ANESTHETIC AGENT; INTE | 1/1/2007 | $133.64 | 3 |
| W | 64421 | INJECTION ANESTHETIC AGENT; INTE | 1/1/2007 | $204.75 | 3 |
| W | 64425 | INJECTION ANESTHETIC AGENT; ILIO | 1/1/2007 | $91.60 | 3 |
| W | 64430 | INJECTION ANESTHETIC AGENT; PUDE | 1/1/2007 | $105.88 | 3 |
| W | 64435 | INJECTION ANESTHETIC AGENT; PARA | 1/1/2007 | $107.43 | 3 |
| W | 64445 | INJECTION, ANESTHETIC AGENT; SCI | 1/1/2007 | $110.55 | 3 |
| W | 64450 | INJECTION ANESTHETIC AGENT; OTHE | 1/1/2007 | $68.51 | 3 |
| W | 64505 | INJECTION ANESTHETIC AGENT SPHEN | 1/1/2007 | $70.07 | 3 |
| W | 64508 | INJECTION ANESTHETIC AGENT; CARO | 1/1/2007 | $117.29 | 3 |
| W | 64510 | INJECTION ANESTHETIC AGENT; STEL | 1/1/2007 | $123.26 | 3 |
| W | 64520 | INJECTION ANESTHETIC AGENT; LUMB | 1/1/2007 | $170.75 | 3 |
| W | 64580 | INCISION FOR IMPLANTATION OF NEU | 1/1/2007 | $41.68 | 3 |
| W | 64585 | REVISION OR REMOVAL OF PERIPHERA | 1/1/2007 | $70.43 | 3 |
| W | 64590 | INCISION & SUBCUTANEOUS PLACE OF | 1/1/2007 | $50.60 | 3 |
| W | 64704 | NEUROLYSIS; NERVE OF HAND OR FOO | 1/1/2007 | $44.06 | 3 |
| W | 64708 | NEUROPLASTY, MAJOR PERIPHERAL NE | 1/1/2007 | $61.97 | 3 |
| W | 64712 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $70.90 | 3 |
| W | 64713 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $97.00 | 3 |
| W | 64714 | NEUROLYSIS MAJOR PERIPHERAL NERV | 1/1/2007 | $81.53 | 3 |
| W | 64716 | NEUROPLASTY AND/OR TRANSPOSITION | 1/1/2007 | $67.05 | 3 |
| W | 64722 | DECOMPRESSION UNSPECIFIED NERVES | 1/1/2007 | $42.66 | 3 |
| W | 64732 | TRANSECTION OR AVULSION OF SUPRA | 1/1/2007 | $46.14 | 3 |
| W | 64736 | TRANSECTION OR AVULSION OF; MENT | 1/1/2007 | $47.44 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 64738 | TRANSECTION OR AVULSION OF; INFE | 1/1/2007 | $59.27 | 3 |
| W | 64740 | TRANSECTION OR AVULSION OF; LING | 1/1/2007 | $59.17 | 3 |
| W | 64742 | TRANSECTION OR AVULSION OF; FACI | 1/1/2007 | $60.46 | 3 |
| W | 64746 | TRANSECTION OR AVULSION OF; PHRE | 1/1/2007 | $58.39 | 3 |
| W | 64752 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $63.68 | 3 |
| W | 64755 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $108.89 | 3 |
| W | 64760 | TRANSECTION OR AVULSION OF; VAGU | 1/1/2007 | $58.23 | 3 |
| W | 64761 | TRANSECTION OR AVULSION OF; PUDE | 1/1/2007 | $54.29 | 3 |
| W | 64763 | TRANSECTION OR AVULSION OF OBTUR | 1/1/2007 | $67.83 | 3 |
| W | 64766 | TRANSECTION OR AVULSION OF OBTUR | 1/1/2007 | $77.75 | 3 |
| W | 64771 | TRANSECTION OR AVULSION OF OTHER | 1/1/2007 | $73.39 | 3 |
| W | 64772 | TRANSECTION OR AVULSION OF OTHER | 1/1/2007 | $70.22 | 3 |
| W | 64774 | EXCISION OF NEUROMA CUTANEOUS NE | 1/1/2007 | $252.75 | 3 |
| W | 64778 | EXCISION OF NEUROMA; DIGITAL NER | 1/1/2007 | $131.57 | 3 |
| W | 64784 | EXCISION OF NEUROMA; MAJOR PERIP | 1/1/2007 | $461.91 | 3 |
| W | 64786 | EXCISION OF NEUROMA; SCIATIC NER | 1/1/2007 | $144.80 | 3 |
| W | 64792 | EXCISION OF NEUROFIBROMA OR NEUR | 1/1/2007 | $136.13 | 3 |
| W | 64802 | SYMPATHECTOMY, CERVICAL | 1/1/2007 | $80.81 | 3 |
| W | 64804 | SYMPATHECTOMY, CERVICOTHORACIC | 1/1/2007 | $124.25 | 3 |
| W | 64809 | SYMPATHECTOMY, THORACOLUMBAR | 1/1/2007 | $108.63 | 3 |
| W | 64818 | SYMPATHECTOMY, LUMBAR | 1/1/2007 | $87.76 | 3 |
| W | 64835 | SUTURE OF ONE NERVE HAND OR FOOT | 1/1/2007 | $105.67 | 3 |
| W | 64836 | SUTURE OF ONE NERVE HAND OR FOOT | 1/1/2007 | $105.20 | 3 |
| W | 64837 | SUTURE OF EACH ADDITIONAL NERVE | 1/1/2007 | $54.29 | 3 |
| W | 64840 | SUTURE OF POSTERIOR TIBIAL NERVE | 1/1/2007 | $117.50 | 3 |
| W | 64857 | SUTURE OF MAJOR PERIPHERAL NERVE | 1/1/2007 | $136.70 | 3 |
| W | 64858 | SUTURE OF SCIATIC NERVE | 1/1/2007 | $158.81 | 3 |
| W | 64859 | SUTURE OF EACH ADDITIONAL MAJOR | 1/1/2007 | $36.95 | 3 |
| W | 64861 | SUTURE OF BRACHIAL PLEXUS | 1/1/2007 | $182.12 | 3 |
| W | 64862 | SUTURE OF; LUMBAR PLEXUS | 1/1/2007 | $185.18 | 3 |
| W | 64864 | SUTURE OF FACIAL NERVE EXTRACRAN | 1/1/2007 | $117.19 | 3 |
| W | 64865 | SUTURE OF FACIAL NERVE; INTRATEM | 1/1/2007 | $157.15 | 3 |
| W | 64866 | ANASTOMOSIS FACIAL-SPINAL ACCESS | 1/1/2007 | $160.68 | 3 |
| W | 64868 | ANASTOMOSIS; FACIAL-HYPOGLOSSAL | 1/1/2007 | $139.66 | 3 |
| W | 64870 | ANASTOMOSIS; FACIAL-PHRENIC | 1/1/2007 | $135.04 | 3 |
| W | 64872 | SUTURE OF NERVE REQUIRING SECOND | 1/1/2007 | $17.44 | 3 |
| W | 64874 | SUTURE OF NERVE; REQUIRING EXTEN | 1/1/2007 | $25.59 | 3 |
| W | 64876 | SUTURE OF NERVE REQUIRING SHORTE | 1/1/2007 | $29.01 | 3 |
| W | 64885 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $159.64 | 3 |
| W | 64886 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $188.81 | 3 |
| W | 64890 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $142.41 | 3 |
| W | 64891 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $131.57 | 3 |
| W | 64892 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $134.89 | 3 |
| W | 64893 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $145.74 | 3 |
| W | 64895 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $163.33 | 3 |
| W | 64896 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $179.73 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 64897 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $163.33 | 3 |
| W | 64898 | NERVE GRAFT (INCLUDES OBTAINING | 1/1/2007 | $176.77 | 3 |
| W | 64901 | NERVE GRAFT EACH ADDITIONAL NERV | 1/1/2007 | $87.45 | 3 |
| W | 64902 | NERVE GRAFT EACH ADDITIONAL NERV | 1/1/2007 | $100.37 | 3 |
| W | 64905 | NERVE PEDICLE TRANSFER FIRST STA | 1/1/2007 | $127.21 | 3 |
| W | 64907 | NERVE PEDICLE TRANSFER; SECOND S | 1/1/2007 | $179.16 | 3 |
| W | 65105 | ENUCLEATION OF EYE; WITH IMPLANT | 1/1/2007 | $100.63 | 3 |
| W | 65110 | EXENTERATION OF ORBIT (DOES NOT | 1/1/2007 | $147.66 | 3 |
| W | 65112 | EXENTERATION OF ORBIT (DOES NOT | 1/1/2007 | $175.63 | 3 |
| W | 65114 | EXENTERATION OF ORBIT, REMOVAL O | 1/1/2007 | $181.18 | 3 |
| W | 65130 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $86.57 | 3 |
| W | 65135 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $88.33 | 3 |
| W | 65140 | INSERTION OF OCULAR IMPLANT SECO | 1/1/2007 | $95.03 | 3 |
| W | 65155 | REINSERTION OF OCULAR IMPLANT WI | 1/1/2007 | $102.04 | 3 |
| W | 65175 | REMOVAL OF OCULAR IMPLANT (FOR O | 1/1/2007 | $78.27 | 3 |
| W | 65260 | REMOVAL OF FOREIGN BODY INTRAOCU | 1/1/2007 | $109.98 | 3 |
| W | 65265 | REMOVAL OF FOREIGN BODY INTRAOCU | 1/1/2007 | $123.73 | 3 |
| W | 65272 | REPAIR OF LACERATION; CONJUNCTIV | 1/1/2007 | $60.88 | 3 |
| W | 65273 | REPAIR OF LACERATION; CONJUNCTIV | 1/1/2007 | $42.35 | 3 |
| W | 65285 | REPAIR OF LACERATION; CORNEA AND | 1/1/2007 | $118.12 | 3 |
| W | 65290 | REPAIR OF WOUND, EXTRAOCULAR MUS | 1/1/2007 | $54.29 | 3 |
| W | 65710 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $125.44 | 3 |
| W | 65730 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $140.03 | 3 |
| W | 65750 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $143.87 | 3 |
| W | 65755 | KERATOPLASTY (CORNEAL TRANSPLANT | 1/1/2007 | $142.83 | 3 |
| W | 65770 | KERATOPROSTHESIS | 1/1/2007 | $164.21 | 3 |
| W | 65865 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $59.74 | 3 |
| W | 65870 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $67.47 | 3 |
| W | 65875 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $70.90 | 3 |
| W | 65880 | SEVERING ADHESIONS OF ANTERIOR S | 1/1/2007 | $75.15 | 3 |
| W | 65900 | REMOVAL OF EPITHELIAL DOWNGROWTH | 1/1/2007 | $112.78 | 3 |
| W | 65920 | REMOVAL OF IMPLANTED MATERIAL, A | 1/1/2007 | $88.18 | 3 |
| W | 66150 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $94.35 | 3 |
| W | 66160 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $108.32 | 3 |
| W | 66165 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $91.71 | 3 |
| W | 66170 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $129.75 | 3 |
| W | 66172 | FISTULIZATION OF SCLERA FOR GLAU | 1/1/2007 | $160.89 | 3 |
| W | 66180 | AQUEOUS SHUNT TO EXTRAOCULAR RES | 1/1/2007 | $135.10 | 3 |
| W | 66185 | REVISION OF AQUEOUS SHUNT TO EXT | 1/1/2007 | $82.68 | 3 |
| W | 66220 | REPAIR OF SCLERAL STAPHYLOMA; WI | 1/1/2007 | $79.30 | 3 |
| W | 66225 | FEPAIR OF SCLERAL STAPHYLOMA; WI | 1/1/2007 | $105.56 | 3 |
| W | 66250 | REVISION OR REPAIR OF OPERATIVE | 1/1/2007 | $93.37 | 3 |
| W | 66500 | IRIDOTOMY BY STAB INCISION (SEPA | 1/1/2007 | $44.27 | 3 |
| W | 66505 | IRIDOTOMY BY STAB INCISION (SEPA | 1/1/2007 | $48.11 | 3 |
| W | 66600 | IRIDECTOMY WITH CORNEOSCLERAL OR | 1/1/2007 | $449.97 | 3 |
| W | 66605 | IRIDECTOMY WITH CORNEOSCLERAL OR | 1/1/2007 | $122.43 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 66680 | REPAIR OF IRIS CILIARY BODY (AS | 1/1/2007 | $57.04 | 3 |
| W | 66682 | SUTURE OF IRIS CILIARY BODY (SEP | 1/1/2007 | $68.20 | 3 |
| W | 66986 | EXCHANGE OF INTRAOCULAR LENS | 1/1/2007 | $114.49 | 3 |
| W | 67005 | REMOVAL OF VITREOUS ANTERIOR APP | 1/1/2007 | $56.26 | 3 |
| W | 67010 | REMOVAL OF VITREOUS, ANTERIOR AP | 1/1/2007 | $65.55 | 3 |
| W | 67015 | ASPIRATION OR RELEASE OF VITREOU | 1/1/2007 | $71.21 | 3 |
| W | 67025 | INJECTION OF VITREOUS SUBSTITUTE | 1/1/2007 | $85.22 | 3 |
| W | 67030 | DISCISSION OF VITREOUS STRANDS ( | 1/1/2007 | $56.78 | 3 |
| W | 67036 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $112.10 | 3 |
| W | 67038 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $196.08 | 3 |
| W | 67039 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $142.36 | 3 |
| W | 67040 | VITRECTOMY, MECHANICAL, PARS PLA | 1/1/2007 | $164.89 | 3 |
| W | 67107 | REPAIR OF RETINAL DETACHMENT; SC | 1/1/2007 | $139.51 | 3 |
| W | 67108 | REPAIR OF RETINAL DETACHMENT; W/ | 1/1/2007 | $188.24 | 3 |
| W | 67112 | REPAIR OF RETINAL DETACHMENT; BY | 1/1/2007 | $153.11 | 3 |
| W | 67115 | RELEASE OF ENCIRCLING MATERIAL ( | 1/1/2007 | $53.56 | 3 |
| W | 67120 | REMOVAL OF IMPLANTED MATERIAL, P | 1/1/2007 | $77.12 | 3 |
| W | 67121 | REMOVAL OF IMPLANTED MATERIAL PO | 1/1/2007 | $102.40 | 3 |
| W | 67218 | DESTRUCTION OF LOCALIZED LESION | 1/1/2007 | $164.06 | 3 |
| W | 67250 | SCLERAL REINFORCEMENT (SEPARATE | 1/1/2007 | $95.08 | 3 |
| W | 67255 | SCLERAL REINFORCEMENT (SEPARATE | 1/1/2007 | $99.91 | 3 |
| W | 67314 | STRABISMUS SURGERY, RECESSION OR | 1/1/2007 | $75.10 | 3 |
| W | 67316 | STRABISMUS SURGERY, RECESSION OR | 1/1/2007 | $91.66 | 3 |
| W | 67318 | STRABISMUS SURGERY, ANY METHOD ( | 1/1/2007 | $78.89 | 3 |
| W | 67320 | TRANSPOSITION PROC(EG,FOR PARETI | 1/1/2007 | $33.74 | 3 |
| W | 67331 | STRABISMUS SURG ON PATIENT W/PRE | 1/1/2007 | $31.66 | 3 |
| W | 67332 | STRABISMUS SURG ON PATIENT W/SCA | 1/1/2007 | $34.98 | 3 |
| W | 67334 | STRABISMUS SURGERY BY POSTERIOR | 1/1/2007 | $30.98 | 3 |
| W | 67340 | STRABISMUS SURGERY INVOLVING EXP | 1/1/2007 | $38.30 | 3 |
| W | 67343 | RELEASE OF EXTENSIVE SCAR TISSUE | 1/1/2007 | $73.91 | 3 |
| W | 67350 | BIOPSY OF EXTRAOCULAR MUSCLE | 1/1/2007 | INVALID | N |
| W | 67399 | UNLISTED PROCEDURE OCULAR MUSCLE | 2/1/1994 | $0.01 | 5 |
| W | 67400 | ORBITOTOMY W/OUT BONE FLAP (FRON | 1/1/2007 | $112.10 | 3 |
| W | 67405 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $94.25 | 3 |
| W | 67412 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $108.63 | 3 |
| W | 67413 | ORBITOTOMY WITHOUT BONE FLAP (FR | 1/1/2007 | $110.50 | 3 |
| W | 67414 | ORBITOTOMY W/OUT BONE FLAP; W/RE | 1/1/2007 | $123.68 | 3 |
| W | 67420 | ORBITOTOMY WITH BONE FLAP OR WIN | 1/1/2007 | $200.44 | 3 |
| W | 67430 | ORBITOTOMY WITH BONE FLAP LATERA | 1/1/2007 | $151.34 | 3 |
| W | 67440 | ORBITOTOMY WITH BONE FLAP OR WIN | 1/1/2007 | $145.68 | 3 |
| W | 67445 | ORBITOTOMY W/BONE FLAP OR WINDOW | 1/1/2007 | $151.81 | 3 |
| W | 67450 | ORBITOTOMY WITH BONE FLAP LATERA | 1/1/2007 | $149.99 | 3 |
| W | 67550 | ORBITAL IMPLANT (IMPLANT OUTSIDE | 1/1/2007 | $115.32 | 3 |
| W | 67560 | ORBITAL IMPLANT (IMPLANT OUTSIDE | 1/1/2007 | $117.19 | 3 |
| W | 67570 | OPTIC NERVE DECOMPRESSION (EG, I | 1/1/2007 | $144.59 | 3 |
| W | 67599 | UNLISTED PROCEDURE ORBIT | 4/1/1982 | $0.01 | 5 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 67901 | REPAIR OF BLEPHAROPTOSIS; FRONTA | 1/1/2007 | $69.29 | 3 |
| W | 67902 | REPAIR OF BLEPHAROPTOSIS; FRONTA | 1/1/2007 | $80.08 | 3 |
| W | 67903 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 1/1/2007 | $85.22 | 3 |
| W | 67904 | REPAIR OF BLEPHAROPTOSIS; (TARSO | 1/1/2007 | $84.70 | 3 |
| W | 67906 | REPAIR OF BLEPHAROPTOSIS; SUPERI | 1/1/2007 | $65.55 | 3 |
| W | 67908 | REPAIR OF BLEPHAROPTOSIS; CONJUN | 1/1/2007 | $62.54 | 3 |
| W | 67950 | CANTHOPLASTY (RECONSTRUCTION OF | 1/1/2007 | $76.97 | 3 |
| W | 67961 | EXCISION & REP OF EYELID INVOLVI | 1/1/2007 | $76.40 | 3 |
| W | 67966 | EXCISION AND REPAIR OF EYELID IN | 1/1/2007 | $83.51 | 3 |
| W | 67971 | RECONSTRUCTION OF EYELID, FULL T | 1/1/2007 | $91.40 | 3 |
| W | 67973 | RECONSTRUCTION OF EYELID FULL TH | 1/1/2007 | $119.06 | 3 |
| W | 67974 | RECONSTRUCTION OF EYELID FULL TH | 1/1/2007 | $118.49 | 3 |
| W | 68320 | CONJUNCTIVOPLASTY WITH CONJUNCTI | 1/1/2007 | $87.92 | 3 |
| W | 68325 | CONJUNCTIVOPLASTY; WITH BUCCAL M | 1/1/2007 | $74.48 | 3 |
| W | 68326 | CONJUCTIVOPLASTY RECONSTRUCTION | 1/1/2007 | $72.24 | 3 |
| W | 68335 | REPAIR OF SYMBLEPHARON; WITH FRE | 1/1/2007 | $72.35 | 3 |
| W | 68362 | CONJUNCTIVAL FLAP; TOTAL (SUCH A | 1/1/2007 | $73.23 | 3 |
| W | 68500 | EXCISION OF LACRIMAL GLAND (DACR | 1/1/2007 | $110.60 | 3 |
| W | 68505 | EXCISION OF LACRIMAL GLAND (DACR | 1/1/2007 | $114.96 | 3 |
| W | 68540 | EXCISION OF LACRIMAL GLAND TUMOR | 1/1/2007 | $106.50 | 3 |
| W | 68550 | EXCISION OF LACRIMAL GLAND TUMOR | 1/1/2007 | $131.93 | 3 |
| W | 68720 | DACRYOCYSTORHINOSTOMY (FISTULIZA | 1/1/2007 | $89.63 | 3 |
| W | 68745 | CONJUNCTIVORHINOSTOMY (FISTULIZA | 1/1/2007 | $88.33 | 3 |
| W | 68750 | CONJUNCTIVORHINOSTOMY (FISTULIZA | 1/1/2007 | $90.15 | 3 |
| W | 69090 | EAR PIERCING | 4/1/1982 | NC | 9 |
| W | 69150 | RADICAL EXCISION EXTERNAL AUDITO | 1/1/2007 | $145.68 | 3 |
| W | 69155 | RADICAL EXCISION EXTERNAL AUDITO | 1/1/2007 | $219.49 | 3 |
| W | 69210 | REMOVAL IMPACTED CERUMEN (SEPARA | 1/1/2007 | $33.48 | 3 |
| W | 69320 | RECONSTRUCTION EXTERNAL AUDITORY | 1/1/2007 | $208.64 | 3 |
| W | 69410 | FOCAL APPLICATION OF PHASE CONTR | 1/1/2006 | INVALID | N |
| W | 69501 | TRANSMASTOID ANTROTOMY (SIMPLE M | 1/1/2007 | $97.68 | 3 |
| W | 69530 | PETROUS APICECTOMY INCLUDING RAD | 1/1/2007 | $220.00 | 3 |
| W | 69535 | RESECTION TEMPORAL BONE EXTERNAL | 1/1/2007 | $368.80 | 3 |
| W | 69550 | EXCISION AURAL GLOMUS TUMOR TRAN | 1/1/2007 | $138.88 | 3 |
| W | 69552 | EXCISION AURAL GLOMUS TUMOR; TRA | 1/1/2007 | $216.68 | 3 |
| W | 69554 | EXCISION AURAL GLOMUS TUMOR; EXT | 1/1/2007 | $344.82 | 3 |
| W | 69604 | REVISION MASTOIDECTOMY; RESULTIN | 1/1/2007 | $149.84 | 3 |
| W | 69605 | REVISION MASTOIDECTOMY; WITH API | 1/1/2007 | $212.63 | 3 |
| W | 69650 | STAPES MOBILIZATION | 1/1/2007 | $105.72 | 3 |
| W | 69670 | MASTOID OBLITERATION (SEPARATE P | 1/1/2007 | $125.39 | 3 |
| W | 69676 | TYMPANIC NEURECTOMY | 1/1/2007 | $109.51 | 3 |
| W | 69700 | CLOSURE POSTAURICULAR FISTULA MA | 1/1/2007 | $94.25 | 3 |
| W | 69711 | REMOVAL OR REPAIR OF ELECTROMAGN | 1/1/2007 | $114.54 | 3 |
| W | 69720 | DECOMPRESSION FACIAL NERVE INTRA | 1/1/2007 | $156.12 | 3 |
| W | 69725 | DECOMPRESSION FACIAL NERVE INTRA | 1/1/2007 | $248.96 | 3 |
| W | 69740 | SUTURE FACIAL NERVE INTRATEMPORA | 1/1/2007 | $159.13 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 69745 | SUTURE FACIAL NERVE INTRATEMPORA | 1/1/2007 | $170.28 | 3 |
| W | 69802 | LABYRINTHOTOMY WITH OR WITHOUT C | 1/1/2007 | $137.54 | 3 |
| W | 69805 | ENDOLYMPHATIC SAC OPERATION WITH | 1/1/2007 | $139.25 | 3 |
| W | 69820 | FENESTRATION SEMICIRCULAR CANAL | 1/1/2007 | $116.62 | 3 |
| W | 69840 | REVISION FENESTRATION OPERATION | 1/1/2007 | $125.81 | 3 |
| W | 69905 | LABYRINTHECTOMY TRANSCANAL | 1/1/2007 | $121.24 | 3 |
| W | 69915 | VESTIBULAR NERVE SECTION TRANSLA | 1/1/2007 | $204.49 | 3 |
| W | 69950 | VESTIBULAR NERVE SECTION TRANSCR | 1/1/2007 | $243.05 | 3 |
| W | 69955 | TOTAL FACIAL NERVE DECOMPRESSION | 1/1/2007 | $264.27 | 3 |
| W | 69960 | DECOMPRESSION INTERNAL AUDITORY | 1/1/2007 | $255.76 | 3 |
| W | 69970 | REMOVAL OF TUMOR | 1/1/2007 | $289.29 | 3 |
| W | 69990 | MICROSURGICAL TECHNIQUES, REQUIR | 1/1/2007 | $31.92 | 3 |
| W | 90385 | RHO(D) IMMUNE GLOBULIN (RHIG), H | 12/1/2004 | $53.90 | 3 |
| W | 90465 | IMMUNIZATION ADMINISTRATION UNDE | 1/1/2007 | $12.72 | 3 |
| W | 90466 | IMMUNIZATION ADMINISTRATION UNDE | 1/1/2007 | $7.53 | 3 |
| W | 90471 | IMMUNIZATION ADMIN; ONE VACCINE | 1/1/2007 | $12.72 | 3 |
| W | 90472 | IMMUNIZATION ADMIN; EACH ADDITIO | 1/1/2007 | $7.53 | 3 |
| W | 90656 | INFLUENZA VIRUS VACCINE, SPLIT V | 10/1/2005 | $14.50 | 3 |
| W | 90658 | INFLUENZA VIRUS VACCINE, SPLIT V | 10/1/2005 | $13.19 | 3 |
| W | 90659 | INFLUENZA VIRUS VACCINE, WHOLE V | 4/1/2004 | INVALID | N |
| W | 90703 | IMMUNIZATION ACTIVE; TETANUS TOX | 4/24/2006 | $23.06 | 3 |
| W | 90704 | IMMUNIZATION ACTIVE; MUMPS VIRUS | 2/20/2006 | $23.87 | 3 |
| W | 90705 | IMMUNIZATION ACTIVE; MEASLES VIR | 2/20/2006 | $20.56 | 3 |
| W | 90706 | IMMUNIZATION ACTIVE; RUBELLA VIR | 2/20/2006 | $20.55 | 3 |
| W | 90707 | IMMUNIZATION ACTIVE; MEASLES MUM | 2/20/2006 | $58.51 | 3 |
| W | 90708 | IMMUNIZATION ACTIVE; MEASLES AND | 7/1/1990 | $23.90 | 3 |
| W | 90709 | IMMUNIZATION ACTIVE; RUBELLA AND | 7/1/2003 | INVALID | N |
| W | 90710 | IMMUNIZATION, ACTIVE; MEASLES, M | 8/1/2005 | NC | 9 |
| W | 90712 | IMMUNIZATION ACTIVE; POLIOVIRUS | 5/1/2000 | NC | 9 |
| W | 90713 | POLIOVIRUS VACCINE, INACTIVATED, | 2/20/2006 | $27.06 | 3 |
| W | 90715 | TETANUS, DIPHTHERIA TOXOIDS AND | 6/1/2005 | $43.50 | 3 |
| W | 90716 | IMMUNIZATION, ACTIVE; VARICELLA | 2/20/2006 | $95.77 | 3 |
| W | 90717 | IMMUNIZATION ACTIVE; YELLOW FEVE | 10/24/1989 | NC | 9 |
| W | 90718 | TETANUS AND DIPHTHERIA TOXOIDS ( | 2/27/2006 | $22.50 | 3 |
| W | 90719 | IMMUNIZATION ACTIVE; DIPHTHERIA | 7/1/1990 | $8.32 | 3 |
| W | 90720 | IMMUNIZATION, ACTIVE; DIPHTHERIA | 2/20/2006 | $35.42 | 3 |
| W | 90725 | IMMUNIZATION ACTIVE; CHOLERA VAC | 10/24/1989 | NC | 9 |
| W | 90727 | IMMUNIZATION ACTIVE; PLAGUE VACC | 5/9/2005 | NC | 9 |
| W | 90732 | PNEUMOCOCCAL POLYSACCHARIDE VACC | 2/21/2005 | $30.24 | 3 |
| W | 90733 | IMMUNIZATION ACTIVE; MENINGOCOCC | 8/1/2005 | $107.63 | 3 |
| W | 90735 | IMMUNIZATION, ACTIVE; ENCEPHALIT | 2/1/2001 | NC | 9 |
| W | 90740 | HEPATITIS B VACCINE, DIALYSIS OR | 5/9/2005 | $207.36 | 3 |
| W | 90743 | HEPATITIS B VACCINE, ADOLESCENT | 5/9/2005 | $74.44 | 3 |
| W | 90746 | HEPATITIS B VACCINE, ADULT DOSAG | 5/9/2005 | $72.76 | 3 |
| W | 90747 | HEPATITIS B VACCINE, DIALYSIS OR | 5/9/2005 | $145.52 | 3 |
| W | 90749 | UNLISTED IMMUNIZATION PROCEDURE | 2/1/2001 | $60.00 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 90780 | IV INFUSION FOR THERAPY/DIAGNOSI | 1/1/2006 | INVALID | N |
| W | 90781 | IV INFUSION THERAPY, ADMINISTERE | 1/1/2006 | INVALID | N |
| W | 90782 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| W | 90783 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| W | 90784 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| W | 90788 | INTRAMUSCULAR INJECTION OF ANTIB | 1/1/2006 | INVALID | N |
| W | 90799 | UNLISTED THERAPEUTIC OR DIAGNOST | 1/1/2006 | INVALID | N |
| W | 90862 | PHARMACOLOGIC MGMNT, INCL PRESCR | 1/1/2007 | $35.55 | 3 |
| W | 90870 | ELECTROCONVULSIVE THERAPY (INCLU | 1/1/2007 | $100.17 | 3 |
| W | 90871 | ELECTROCONVULSIVE THERAPY (INCLU | 1/1/2006 | INVALID | N |
| W | 90999 | UNLISTED DIALYSIS PROCEDURE IN H | 4/1/1982 | $0.01 | 5 |
| W | 91000 | ESOPHAGEAL INTUBATION AND COLLEC | 1/1/2007 | $28.55 | 3 |
| W | 91010 | ESOPHAGEAL MOTILITY STUDY | 1/1/2007 | $150.25 | 3 |
| W | 91011 | ESOPHAGEAL MOTILITY STUDY; WITH | 1/1/2007 | $178.28 | 3 |
| W | 91012 | ESOPHAGEAL MOTILITY STUDY; WITH | 1/1/2007 | $190.99 | 3 |
| W | 91020 | ESOPHAGOGASTRIC MANOMETRIC STUDI | 1/1/2007 | $158.30 | 3 |
| W | 91030 | ESOPHAGUS ACID PERFUSION (BERNST | 1/1/2007 | $88.49 | 3 |
| W | 91032 | ESOPHAGUS ACID REFLUX TEST WITH | 1/1/2005 | INVALID | N |
| W | 91033 | ESOPHAGUS ACID REFLUX TEST PROLO | 1/1/2005 | INVALID | N |
| W | 91052 | GASTRIC ANALYSIS TEST WITH INJEC | 1/1/2007 | $85.64 | 3 |
| W | 91055 | GASTRIC INTUBATION WASHINGS AND | 1/1/2007 | $102.76 | 3 |
| W | 91060 | GASTRIC SALINE LOAD TEST | 1/1/2007 | INVALID | N |
| W | 91065 | BREATH HYDROGEN TEST (EG, FOR DE | 1/1/2007 | $43.86 | 3 |
| W | 91100 | INTESTINAL BLEEDING TUBE PASSAGE | 1/1/2007 | $102.50 | 3 |
| W | 91105 | GASTRIC INTUBATION, AND ASPIRATI | 1/1/2007 | $65.13 | 3 |
| W | 91122 | ANORECTAL MANOMETRY | 1/1/2007 | $183.99 | 3 |
| W | 91299 | UNLISTED DIAGNOSTIC GASTROENTERO | 4/1/1982 | $0.01 | 5 |
| W | 92330 | PRESCRIPTION FITTING AND SUPPLY | 1/1/2006 | INVALID | N |
| W | 92335 | PRESCRIPTION OF OCULAR PROSTHESI | 1/1/2006 | INVALID | N |
| W | 92354 | FITTING OF SPECTACLE MOUNTED LOW | 3/14/1989 | NC | 9 |
| W | 92355 | FITTING OF SPECTACLE MOUNTED LOW | 3/14/1989 | NC | 9 |
| W | 92390 | SUPPLY OF SPECTACLES EXCEPT PROS | 1/1/2006 | INVALID | N |
| W | 92391 | SUPPLY OF CONTACT LENSES EXCEPT | 1/1/2006 | INVALID | N |
| W | 92392 | SUPPLY OF LOW VISION AIDS (A LOW | 1/1/2006 | INVALID | N |
| W | 92393 | SUPPLY OF OCULAR PROSTHESIS (ART | 1/1/2006 | INVALID | N |
| W | 92395 | SUPPLY OF PERMANENT PROSTHESIS F | 1/1/2006 | INVALID | N |
| W | 92396 | CONTACT LENSES | 1/1/2006 | INVALID | N |
| W | 92502 | OTOLARYNGOLOGIC EXAMINATION UNDE | 1/1/2007 | $69.29 | 3 |
| W | 92504 | BINOCULAR MICROSCOPY (SEPARATE D | 1/1/2007 | $17.91 | 3 |
| W | 92506 | EVALUATION OF SPEECH, LANGUAGE, | 1/1/2007 | $90.57 | 3 |
| W | 92507 | TREATMENT OF SPEECH, LANGUAGE, V | 1/1/2007 | $42.82 | 3 |
| W | 92511 | NASOPHARYNGOSCOPY WITH ENDOSCOPE | 1/1/2007 | $108.73 | 3 |
| W | 92512 | NASAL FUNCTION STUDIES EG RHINOM | 1/1/2007 | $44.37 | 3 |
| W | 92516 | FACIAL NERVE FUNCTION STUDIES (E | 1/1/2007 | $42.56 | 3 |
| W | 92520 | LARYNGEAL FUNCTION STUDIES | 1/1/2007 | $33.48 | 3 |
| W | 92531 | SPONTANEOUS NYSTAGMUS INCLUDING | 10/1/2000 | $22.68 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 92532 | POSITIONAL NYSTAGMUS TEST | 10/1/2000 | $34.96 | 3 |
| W | 92533 | CALORIC VESTIBULAR TEST EACH IRR | 10/1/2000 | $8.78 | 3 |
| W | 92534 | OPTOKINETIC NYSTAGMUS TEST | 10/1/2000 | $16.85 | 3 |
| W | 92541 | SPONTANEOUS NYSTAGMUS TEST INCLU | 1/1/2007 | $38.15 | 3 |
| W | 92542 | POSITIONAL NYSTAGMUS TEST MINIMU | 1/1/2007 | $38.93 | 3 |
| W | 92543 | CALORIC VESTIBULAR TEST EACH IRR | 1/1/2007 | $17.91 | 3 |
| W | 92544 | OPTOKINETIC NYSTAGMUS TEST BIDIR | 1/1/2007 | $30.88 | 3 |
| W | 92545 | OSCILLATING TRACKING TEST WITH R | 1/1/2007 | $27.51 | 3 |
| W | 92546 | SINUSOIDAL VERTICAL AXIS ROTATIO | 1/1/2007 | $59.94 | 3 |
| W | 92547 | USE OF VERTICAL ELECTRODES IN AN | 1/1/2007 | $3.63 | 3 |
| W | 92551 | SCREENING TEST PURE TONE AIR ONL | 10/1/2000 | $11.71 | 3 |
| W | 92552 | PURE TONE AUDIOMETRY (THRESHOLD) | 1/1/2007 | $12.46 | 3 |
| W | 92553 | PURE TONE AUDIOMETRY (THRESHOLD) | 1/1/2007 | $18.68 | 3 |
| W | 92555 | SPEECH AUDIOMETRY THRESHOLD; | 1/1/2007 | $10.90 | 3 |
| W | 92556 | SPEECH AUDIOMETRY THRESHOLD; WIT | 1/1/2007 | $16.35 | 3 |
| W | 92557 | COMPREHENSIVE AUDIOMETRY THRESHO | 1/1/2007 | $33.99 | 3 |
| W | 92559 | AUDIOMETRIC TESTING OF GROUPS | 10/1/2005 | NC | 9 |
| W | 92561 | BEKESY AUDIOMETRY; DIAGNOSTIC | 1/1/2007 | $20.24 | 3 |
| W | 92562 | LOUDNESS BALANCE TEST ALTERNATE | 1/1/2007 | $11.68 | 3 |
| W | 92563 | TONE DECAY TEST | 1/1/2007 | $10.90 | 3 |
| W | 92564 | SHORT INCREMENT SENSITIVITY INDE | 1/1/2007 | $13.49 | 3 |
| W | 92565 | STENGER TEST PURE TONE | 1/1/2007 | $11.42 | 3 |
| W | 92567 | TYMPANOMETRY (IMPEDANCE TESTING) | 1/1/2007 | $15.05 | 3 |
| W | 92568 | ACOUSTIC REFLEX TESTING; THRESHO | 1/1/2007 | $10.90 | 3 |
| W | 92569 | ACOUSTIC REFLEX TESTING; DECAY | 1/1/2007 | $11.68 | 3 |
| W | 92571 | FILTERED SPEECH TEST | 1/1/2007 | $11.16 | 3 |
| W | 92572 | STAGGERED SPONDAIC WORD TEST | 1/1/2007 | $2.60 | 3 |
| W | 92573 | LOMBARD TEST | 1/1/2007 | INVALID | N |
| W | 92576 | SYNTHETIC SENTENCE IDENTIFICATIO | 1/1/2007 | $12.72 | 3 |
| W | 92577 | STENGER TEST SPEECH | 1/1/2007 | $20.50 | 3 |
| W | 92582 | CONDITIONING PLAY AUDIOMETRY | 1/1/2007 | $20.50 | 3 |
| W | 92583 | SELECT PICTURE AUDIOMETRY | 1/1/2007 | $25.17 | 3 |
| W | 92584 | ELECTROCOCHLEOGRAPHY | 1/1/2007 | $69.81 | 3 |
| W | 92585 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $71.10 | 3 |
| W | 92586 | AUDITORY EVOKED POTENTIALS FOR E | 1/1/2007 | $51.90 | 3 |
| W | 92587 | EVOKED OTOACOUSTIC EMISSIONS; LI | 1/1/2007 | $42.04 | 3 |
| W | 92588 | EVOKED OTOACOUSTIC EMISSIONS; CO | 1/1/2007 | $55.27 | 3 |
| W | 92589 | CENTRAL AUDITORY FUNCTION TESTS | 1/1/2005 | INVALID | N |
| W | 92590 | HEARING AID EXAMINATION AND SELE | 10/1/2000 | $80.16 | 3 |
| W | 92592 | HEARING AID CHECK MONAURAL | 1/14/2003 | NC | 9 |
| W | 92593 | HEARING AID CHECK; BINAURAL | 1/14/2003 | NC | 9 |
| W | 92599 | UNLISTED OTORHINOLARYNGOLOGICAL | 7/1/2003 | INVALID | N |
| W | 92950 | CARDIOPULMONARY RESUSCITATION (E | 1/1/2007 | $214.87 | 3 |
| W | 92960 | CARDIOVERSION ELECTIVE ELECTRICA | 1/1/2007 | $224.47 | 3 |
| W | 92970 | CARDIOASSIST-METHOD OF CIRCULATO | 1/1/2007 | $122.74 | 3 |
| W | 92971 | CARDIOASSIST-METHOD OF CIRCULATO | 1/1/2007 | $69.55 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 92987 | PERCUTANEOUS BALLOON VALVULOPLAS | 1/1/2007 | $947.43 | 3 |
| W | 93000 | ELECTROCARDIOGRAM, ROUTINE ECG W | 1/1/2007 | $18.42 | 3 |
| W | 93005 | ELECTROCARDIOGRAM WITH INTERPRET | 1/1/2007 | $12.20 | 3 |
| W | 93010 | ELECTROCARDIOGRAM WITH INTERPRET | 1/1/2007 | $6.23 | 3 |
| W | 93040 | RHYTHM ECG, ONE TO THREE LEADS; | 1/1/2007 | $9.86 | 3 |
| W | 93041 | RHYTHM ECG ONE TO THREE LEADS; T | 1/1/2007 | $4.15 | 3 |
| W | 93042 | RHYTHM ECG ONE TO THREE LEADS; I | 1/1/2007 | $5.71 | 3 |
| W | 93731 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $30.10 | 3 |
| W | 93732 | ELECTRONIC ANALYSIS OF DUAL-CHAM | 1/1/2007 | $48.01 | 3 |
| W | 93734 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $23.61 | 3 |
| W | 93735 | ELECTRONIC ANALYSIS OF SINGLE-CH | 1/1/2007 | $39.44 | 3 |
| W | 93737 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| W | 93738 | ELECTRONIC ANALYSIS OF CARDIOVER | 4/1/2002 | INVALID | N |
| W | 93741 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $48.01 | 3 |
| W | 93742 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $52.16 | 3 |
| W | 93743 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $57.87 | 3 |
| W | 93744 | ELECTRONIC ANALYSIS OF PACING CA | 1/1/2007 | $62.02 | 3 |
| W | 93799 | UNLISTED CARDIOVASCULAR SERVICE | 4/1/1982 | $0.01 | 5 |
| W | 94010 | SPIROMETRY INCLUDING GRAPHIC REC | 1/1/2007 | $22.58 | 3 |
| W | 94060 | BRONCHODILATION RESPONSIVE, SPIR | 1/1/2007 | $37.63 | 3 |
| W | 94070 | BRONCHOSPASM PROVOCATION EVAL, M | 1/1/2007 | $40.22 | 3 |
| W | 94150 | VITAL CAPACITY TOTAL (SEPARATE P | 1/1/2007 | $14.53 | 3 |
| W | 94200 | MAXIMUM BREATHING CAPACITY MAXIM | 1/1/2007 | $15.05 | 3 |
| W | 94240 | FUNCTIONAL RESIDUAL CAPACITY OR | 1/1/2007 | $25.43 | 3 |
| W | 94250 | EXPIRED GAS COLLECTION QUANTITAT | 1/1/2007 | $19.98 | 3 |
| W | 94260 | THORACIC GAS VOLUME | 1/1/2007 | $19.72 | 3 |
| W | 94350 | DETERMINATION OF MALDISTRIBUTION | 1/1/2007 | $27.77 | 3 |
| W | 94360 | DETERMINATION OF RESISTANCE TO A | 1/1/2007 | $26.73 | 3 |
| W | 94370 | DETERMINATION OF AIRWAY CLOSING | 1/1/2007 | $26.21 | 3 |
| W | 94375 | RESPIRATORY FLOW VOLUME LOOP | 1/1/2007 | $24.39 | 3 |
| W | 94400 | BREATHING RESPONSE TO CO2 (CO2 R | 1/1/2007 | $34.51 | 3 |
| W | 94450 | BREATHING RESPONSE TO HYPOXIA (H | 1/1/2007 | $33.48 | 3 |
| W | 94620 | PULMONARY STRESS TESTING SIMPLE | 1/1/2007 | $84.86 | 3 |
| W | 94640 | NONPRESSURIZED INHALATION TREATM | 1/1/2007 | $8.30 | 3 |
| W | 94650 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| W | 94651 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| W | 94652 | INTERMITTENT POSITIVE PRESSURE B | 7/1/2003 | INVALID | N |
| W | 94656 | VENTILATION ASSIST AND MANAGEMEN | 1/1/2007 | INVALID | N |
| W | 94657 | VENTILATION ASSIST AND MANAGEMEN | 1/1/2007 | INVALID | N |
| W | 94660 | CONTINUOUS POSTITIVE AIRWAY PRES | 1/1/2007 | $37.63 | 3 |
| W | 94662 | CONTINUOUS NEGATIVE PRESSURE VEN | 1/1/2007 | $26.47 | 3 |
| W | 94665 | AEROSOL OR VAPOR INHALATIONS FOR | 7/1/2003 | INVALID | N |
| W | 94667 | MANIPULATION CHEST WALL SUCH AS | 1/1/2007 | $14.79 | 3 |
| W | 94668 | MANIPULATION CHEST WALL SUCH AS | 1/1/2007 | $12.20 | 3 |
| W | 94680 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $57.09 | 3 |
| W | 94681 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $74.22 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 94690 | OXYGEN UPTAKE EXPIRED GAS ANALYS | 1/1/2007 | $55.01 | 3 |
| W | 94720 | CARBON MONOXIDE DIFFUSING CAPACI | 1/1/2007 | $34.51 | 3 |
| W | 94725 | MEMBRANE DIFFUSION CAPACITY | 1/1/2007 | $85.89 | 3 |
| W | 94750 | PULMONARY COMPLIANCE STUDY (EG, | 1/1/2007 | $42.04 | 3 |
| W | 94760 | NONINVASIVE EAR/PULSE OXIMETRY F | 1/1/2007 | $1.56 | 3 |
| W | 94761 | NONINVASIVE EAR/PULSE OXIMETRY F | 1/1/2007 | $3.37 | 3 |
| W | 94770 | CARBON DIOXIDE EXPIRED GAS DETER | 1/1/2007 | $25.43 | 3 |
| W | 94799 | UNLISTED PULMONARY SERVICE OR PR | 4/1/1982 | $0.01 | 5 |
| W | 95027 | SKIN END POINT TITRATION | 1/1/2007 | $4.15 | 3 |
| W | 95056 | PHOTO TESTS | 1/1/2007 | $4.67 | 3 |
| W | 95060 | OPHTHALMIC MUCOUS MEMBRANE TESTS | 1/1/2007 | $9.60 | 3 |
| W | 95065 | DIRECT NASAL MUCOUS MEMBRANE TES | 1/1/2007 | $5.45 | 3 |
| W | 95070 | INHALATION BRONCHIAL CHALLENGE T | 1/1/2007 | $59.94 | 3 |
| W | 95071 | INHALATION BRONCHIAL CHALLENGE T | 1/1/2007 | $76.55 | 3 |
| W | 95078 | PROVOCATIVE TESTING (EG RINKEL T | 1/1/2007 | INVALID | N |
| W | 95115 | PROF SVCS FOR ALLERGEN IMMUNOTHE | 1/1/2007 | $10.64 | 3 |
| W | 95117 | PROFESSIONAL SERVICES FOR ALLERG | 1/1/2007 | $13.49 | 3 |
| W | 95199 | UNLISTED ALLERGY/CLINICAL IMMUNO | 4/1/1982 | $0.01 | 5 |
| W | 95819 | ELECTROENCEPHALOGRAM (EEG); INCL | 1/1/2007 | $109.77 | 3 |
| W | 95822 | ELECTROENCEPHALOGRAM (EEG); RECO | 1/1/2007 | $152.59 | 3 |
| W | 95829 | ELECTROCORTICOGRAM AT SURGERY (S | 1/1/2007 | $980.65 | 3 |
| W | 95831 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $19.46 | 3 |
| W | 95832 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $16.61 | 3 |
| W | 95833 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $27.77 | 3 |
| W | 95834 | MUSCLE TESTING MANUAL (SEPARATE | 1/1/2007 | $32.70 | 3 |
| W | 95851 | RANGE OF MOTION MEASUREMENTS AND | 1/1/2007 | $13.75 | 3 |
| W | 95852 | RANGE OF MOTION MEASUREMENTS AND | 1/1/2007 | $9.86 | 3 |
| W | 95857 | TENSILON TEST FOR MYASTHENIA GRA | 1/1/2007 | $29.84 | 3 |
| W | 95858 | TENSILON TEST FOR MYASTHENIA GRA | 1/1/2006 | INVALID | N |
| W | 95860 | NEEDLE ELECTROMYOGRAPHY, ONE EXT | 1/1/2007 | $63.58 | 3 |
| W | 95861 | NEEDLE ELECTROMYOGRAPHY, TWO EXT | 1/1/2007 | $79.93 | 3 |
| W | 95863 | NEEDLE ELECTROMYOGRAPHY, THREE E | 1/1/2007 | $97.57 | 3 |
| W | 95864 | NEEDLE ELECTROMYOGRAPHY, FOR EXT | 1/1/2007 | $126.12 | 3 |
| W | 95867 | NEEDLE ELECTROMYOGRAPHY; CRANIAL | 1/1/2007 | $46.45 | 3 |
| W | 95868 | NEEDLE ELECTROMYOGRAPHY, CRANIAL | 1/1/2007 | $64.62 | 3 |
| W | 95869 | NEEDLE ELECTROMYOGRAPHY; THORACI | 1/1/2007 | $20.24 | 3 |
| W | 95872 | NEEDLE ELECTROMYOGRAPHY USING SI | 1/1/2007 | $74.22 | 3 |
| W | 95875 | ISCHEMIC LIMB EXERCISE TEST WITH | 1/1/2007 | $69.03 | 3 |
| W | 95900 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $44.63 | 3 |
| W | 95904 | NERVE CONDUCTION, AMPLITUDE AND | 1/1/2007 | $38.15 | 3 |
| W | 95921 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $43.34 | 3 |
| W | 95922 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $46.97 | 3 |
| W | 95923 | TESTING OF AUTONOMIC NERVOUS SYS | 1/1/2007 | $75.51 | 3 |
| W | 95925 | SHORT-LATENCY SOMATOSENSORY EVOK | 1/1/2007 | $45.93 | 3 |
| W | 95933 | ORBICULARIS OCULI (BLINK) REFLEX | 1/1/2007 | $44.37 | 3 |
| W | 95937 | NEUROMUSCULAR JUNCTION TESTING ( | 1/1/2007 | $35.29 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 95950 | MONITORING FOR IDENTIFICATION AN | 1/1/2007 | $154.66 | 3 |
| W | 95999 | UNLISTED NEUROLOGICAL OR NEUROMU | 4/1/1982 | $0.01 | 5 |
| W | 96520 | PORTABLE PUMP REFILLING AND MAIN | 1/1/2006 | INVALID | N |
| W | 96530 | REFILLING AND MAINTENANCE OF IMP | 1/1/2006 | INVALID | N |
| W | 96545 | PROVISION OF CHEMOTHERAPY AGENT | 1/1/2006 | INVALID | N |
| W | 96549 | UNLISTED CHEMOTHERAPY PROCEDURE | 9/1/1985 | $0.01 | 5 |
| W | 96900 | ACTINOTHERAPY (ULTRAVIOLET LIGHT | 1/1/2007 | $11.94 | 3 |
| W | 96910 | PHOTOCHEMOTHERAPY; TAR AND ULTRA | 1/1/2007 | $26.73 | 3 |
| W | 96912 | PHOTOCHEMOTHERAPY; PSORALENS AND | 1/1/2007 | $33.99 | 3 |
| W | 96999 | UNLISTED SPECIAL DERMATOLOGICAL | 4/1/1982 | $0.01 | 5 |
| W | 97010 | APPLICATION HOT OR COLD PACKS | 10/1/2004 | NC | 9 |
| W | 97012 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $10.12 | 3 |
| W | 97014 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $9.86 | 3 |
| W | 97016 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| W | 97018 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| W | 97020 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2006 | INVALID | N |
| W | 97022 | PHYSICAL MEDICINE TREATMENT TO O | 1/1/2007 | $10.12 | 3 |
| W | 97024 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| W | 97026 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| W | 97028 | PHYSICAL MEDICINE TREATMENT TO O | 4/1/2005 | NC | 9 |
| W | 97032 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $10.90 | 3 |
| W | 97033 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| W | 97034 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| W | 97035 | APPLICATION OF A MODALITY TO ONE | 4/1/2005 | NC | 9 |
| W | 97036 | APPLICATION OF A MODALITY TO ONE | 1/1/2007 | $15.83 | 3 |
| W | 97039 | UNLISTED MODALITY (SPECIFY TYPE | 4/1/2005 | NC | 9 |
| W | 97110 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.20 | 3 |
| W | 97112 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $19.98 | 3 |
| W | 97116 | THERAPEUTIC PROCEDURE, ONE OR MO | 1/1/2007 | $16.87 | 3 |
| W | 97124 | THERAPEUTIC PROC, ONE OR MORE AR | 1/1/2007 | $15.31 | 3 |
| W | 97139 | THERAPEUTIC PROC, ONE OR MORE AR | 4/1/2005 | NC | 9 |
| W | 97520 | PROSTHETIC TRAINING, UPPER AND/O | 1/1/2006 | INVALID | N |
| W | 97545 | WORK HARDENING/CONDTIONING; INIT | 1/1/1993 | NC | 9 |
| W | 97546 | WORK HARDENING/CONDITIONING; EAC | 1/1/1993 | NC | 9 |
| W | 97601 | REMOVAL OF DEVITALIZED TISSUE FR | 1/1/2005 | INVALID | N |
| W | 97602 | REMOVAL OF DEVITALIZED TISSUE FR | 5/1/2003 | $23.36 | 3 |
| W | 97750 | PHYSICAL PERFORMANCE TEST OR MEA | 1/1/2007 | $20.50 | 3 |
| W | 97799 | UNLISTED PHYSICAL MEDICINE/REHAB | 4/1/1982 | $0.01 | 5 |
| W | 99000 | HANDLING AND/OR CONVEYANCE OF SP | 5/1/1991 | NC | 9 |
| W | 99001 | HANDLING AND/OR CONVEYANCE OF SP | 5/1/1991 | NC | 9 |
| W | 99002 | HANDLING, CONVEYANCE, AND/OR ANY | 3/27/1989 | NC | 9 |
| W | 99024 | POSTOPERATIVE FOLLOWUP CARE | 4/1/1988 | NC | 9 |
| W | 99025 | INITIAL (NEW PATIENT) VISIT WHEN | 4/1/2004 | INVALID | N |
| W | 99050 | SERVICES PROVIDED IN THE OFFICE | 10/1/2000 | $11.71 | 3 |
| W | 99052 | SERVICES REQUESTED BETWEEN 10:00 | 1/1/2006 | INVALID | N |
| W | 99054 | SERVICES REQUESTED ON SUNDAYS AN | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 99056 | SVCS TYPICALLY PROVIDED IN THE O | 4/1/1982 | NC | 9 |
| W | 99058 | SVCS PROVIDED ON AN EMERGENCY BA | 10/1/2000 | $4.71 | 3 |
| W | 99070 | SUPP & MAT (EX SPECTACLES) PROVI | 10/1/2002 | NC | 9 |
| W | 99071 | EDUCATIONAL SUPPLIES SUCH AS BOO | 10/1/2004 | NC | 9 |
| W | 99075 | MEDICAL TESTIMONY | 10/1/2004 | NC | 9 |
| W | 99078 | PHYSICIAN EDUCATIONAL SERVICES R | 10/1/2005 | NC | 9 |
| W | 99082 | UNUSUAL TRAVEL (EG, TRANSPORTATI | 4/1/1982 | NC | 9 |
| W | 99090 | ANALYSIS OF CLINICAL DATA STORED | 8/1/1989 | NC | 9 |
| W | 99175 | IPECAC OR SIMILAR ADMINISTRATION | 1/1/2007 | $38.67 | 3 |
| W | 99185 | HYPOTHERMIA; TOTAL BODY | 1/1/2007 | $17.65 | 3 |
| W | 99186 | TOTAL BODY | 1/1/2007 | $58.13 | 3 |
| W | 99190 | ASSEMBLY AND OPERATION OF PUMP W | 10/1/2000 | $84.26 | 3 |
| W | 99191 | ASSEMBLY AND OPERATION OF PUMP W | 10/1/2000 | $51.12 | 3 |
| W | 99192 | ASSEMBLY AND OPERATION OF PUMP W | 10/1/2000 | $38.02 | 3 |
| W | 99195 | PHLEBOTOMY THERAPEUTIC (SEPARATE | 1/1/2007 | $11.94 | 3 |
| W | 99199 | UNLISTED SPECIAL SERVICE OR REPO | 4/1/1982 | $0.01 | 5 |
| W | 99201 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $25.17 | 3 |
| W | 99202 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $44.63 | 3 |
| W | 99203 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $66.43 | 3 |
| W | 99204 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $93.94 | 3 |
| W | 99205 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $119.37 | 3 |
| W | 99211 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $14.79 | 3 |
| W | 99212 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $26.47 | 3 |
| W | 99213 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $36.07 | 3 |
| W | 99214 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $56.57 | 3 |
| W | 99215 | OFFICE OR OTHER OP VISIT FOR THE | 1/1/2007 | $82.26 | 3 |
| W | 99221 | INITIAL HOSPITAL CARE, PER DAY, | 1/1/2007 | $46.71 | 3 |
| W | 99222 | INITIAL HOSP CARE, PER DAY, FOR | 1/1/2007 | $77.33 | 3 |
| W | 99223 | INITIAL HOSP CARE, PER DAY, FOR | 1/1/2007 | $107.69 | 3 |
| W | 99231 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $23.36 | 3 |
| W | 99232 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $38.15 | 3 |
| W | 99233 | SUBSEQUENT HOSP CARE, PER DAY, F | 1/1/2007 | $54.24 | 3 |
| W | 99238 | HOSPITAL DISCHARGE DAY MANAGEMEN | 1/1/2007 | $48.53 | 3 |
| W | 99241 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $34.51 | 3 |
| W | 99242 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $63.06 | 3 |
| W | 99243 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $84.08 | 3 |
| W | 99244 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $118.59 | 3 |
| W | 99245 | OFFICE CONS FOR NEW OR EST PT, W | 1/1/2007 | $153.36 | 3 |
| W | 99271 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| W | 99272 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| W | 99273 | CONFIRMATORY CONS FOR NEW OR EST | 1/1/2006 | INVALID | N |
| W | 99274 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| W | 99275 | CONFIRMATORY CONS FOR A PATIENT, | 1/1/2006 | INVALID | N |
| W | 99281 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $11.42 | 3 |
| W | 99282 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $18.94 | 3 |
| W | 99283 | EMERGENCY DEPT VISIT FOR THE E/M | 1/1/2007 | $42.56 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | 99284 | EMERG DEPT VISIT FOR E/M OF PT, | 1/1/2007 | $66.43 | 3 |
| W | 99285 | EMER DEPT VISIT FOR E/M OF PT, W | 1/1/2007 | $104.06 | 3 |
| W | 99311 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| W | 99312 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| W | 99313 | SUBSEQUENT NURS FACILITY CARE, P | 1/1/2006 | INVALID | N |
| W | 99321 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| W | 99322 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| W | 99323 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| W | 99331 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| W | 99332 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| W | 99333 | DOMICILIARY OR REST HOME VISIT F | 1/1/2006 | INVALID | N |
| W | 99341 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $39.96 | 3 |
| W | 99342 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $58.91 | 3 |
| W | 99343 | HOME VISIT FOR E/M OF NEW PT, WH | 1/1/2007 | $85.89 | 3 |
| W | 99371 | TELEPHONE CALL BY PHYS TO PT OR | 4/1/2001 | $10.82 | 3 |
| W | 99381 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $71.10 | 3 |
| W | 99382 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $76.55 | 3 |
| W | 99383 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $75.00 | 3 |
| W | 99384 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $81.48 | 3 |
| W | 99385 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $81.48 | 3 |
| W | 99386 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $96.02 | 3 |
| W | 99387 | INITIAL COMPREHENSIVE PREVENTIVE | 1/1/2007 | $104.06 | 3 |
| W | 99391 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $53.98 | 3 |
| W | 99392 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $60.46 | 3 |
| W | 99393 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $59.69 | 3 |
| W | 99394 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $65.91 | 3 |
| W | 99395 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $66.69 | 3 |
| W | 99396 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $73.70 | 3 |
| W | 99397 | PERIODIC REEVALUATION AND MANAGE | 1/1/2007 | $81.22 | 3 |
| W | 99401 | PREVENTIVE MEDICINE COUNSELING A | 1/1/2007 | $28.80 | 3 |
| W | 99402 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $48.53 | 3 |
| W | 99403 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $67.21 | 3 |
| W | 99404 | COUNSELING AND/OR RISK FACTOR RE | 1/1/2007 | $86.15 | 3 |
| W | 99429 | UNLISTED PREVENTIVE MEDICINE SER | 2/1/1994 | $0.01 | 5 |
| W | 99431 | HISTORY AND EXAM OF NORMAL NEWBO | 1/1/2007 | $41.52 | 3 |
| W | 99432 | NORMAL NEWBORN CARE IN OTHER THA | 1/1/2007 | $58.65 | 3 |
| W | 99433 | SUBSEQUENT HOSP CARE, FOR THE E/ | 1/1/2007 | $21.80 | 3 |
| W | 99499 | UNLISTED EVALUATION AND MANAGEME | 1/1/1992 | $0.01 | 5 |
| W | A4214 | STERILE SALINE OR WATER, 30CC VI | 4/1/2004 | INVALID | N |
| W | A4310 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $6.55 | 3 |
| W | A4311 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $12.61 | 3 |
| W | A4312 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $15.31 | 3 |
| W | A4313 | INSERTION TRAY WITHOUT DRAINAGE | 10/1/2006 | $15.72 | 3 |
| W | A4314 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $21.46 | 3 |
| W | A4315 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $22.39 | 3 |
| W | A4316 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $24.11 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | A4320 | IRRIGATION TRAY WITH BULB OR PIS | 10/1/2006 | $5.32 | 3 |
| W | A4322 | IRRIGATION SYRINGE, BULB OR PIST | 10/1/2006 | $2.73 | 3 |
| W | A4323 | STERILE SALINE IRRIGATION SOLUTI | 4/1/2004 | INVALID | N |
| W | A4326 | MALE EXTERNAL CATHETER SPECIALTY | 10/1/2006 | $10.35 | 3 |
| W | A4327 | FEMALE EXTERNAL URINARY COLLECTI | 10/1/2006 | $44.55 | 3 |
| W | A4328 | FEMALE EXTERNAL URINARY COLLECTI | 10/1/2006 | $9.86 | 3 |
| W | A4329 | EXTERNAL CATHETER STARTER SET, M | 4/1/2002 | INVALID | N |
| W | A4330 | PERIANAL FECAL COLLECTION POUCH | 10/1/2006 | $6.93 | 3 |
| W | A4335 | INCONTINENCE SUPPLY; MISCELLANEO | 10/1/2001 | $12.00 | 3 |
| W | A4338 | INDWELLING CATHETER; FOLEY TYPE; | 10/1/2006 | $12.25 | 3 |
| W | A4340 | INDWELLING CATHETER; SPECIALTY T | 10/1/2006 | $31.69 | 3 |
| W | A4344 | INDWELLING CATHETER, FOLEY TYPE, | 10/1/2006 | $15.99 | 3 |
| W | A4346 | INDWELLING CATHETER; FOLEY TYPE, | 10/1/2006 | $19.57 | 3 |
| W | A4347 | MALE EXTERNAL CATHETER WITH OR W | 1/1/2005 | INVALID | N |
| W | A4351 | INTERMITTENT URINARY CATHETER; S | 10/1/2006 | $1.81 | 3 |
| W | A4352 | INTERMITTENT URINARY CATHETER; C | 10/1/2006 | $6.41 | 3 |
| W | A4354 | INSERTION TRAY WITH DRAINAGE BAG | 10/1/2006 | $10.01 | 3 |
| W | A4355 | IRRIGATION TUBING SET FOR CONTIN | 10/1/2006 | $8.90 | 3 |
| W | A4356 | EXTERNAL URETHRAL CLAMP OR COMPR | 10/1/2006 | $42.35 | 3 |
| W | A4357 | BEDSIDE DRAINAGE BAG, DAY OR NIG | 10/1/2006 | $9.68 | 3 |
| W | A4358 | URINARY DRAINAGE BAG, LEG OR ABD | 10/1/2006 | $5.85 | 3 |
| W | A4359 | URINARY SUSPENSORY WITHOUT LEG B | 1/1/2007 | INVALID | N |
| W | A4361 | OSTOMY FACEPLATE, EACH | 10/1/2006 | $18.37 | 3 |
| W | A4362 | SKIN BARRIER; SOLID, 4 X 4 OR EQ | 10/1/2006 | $2.94 | 3 |
| W | A4367 | OSTOMY BELT, EACH | 10/1/2006 | $7.35 | 3 |
| W | A4397 | IRRIGATION SUPPLY; SLEEVE, EACH | 10/1/2006 | $4.07 | 3 |
| W | A4398 | OSTOMY IRRIGATION SUPPLY; BAG, E | 10/1/2006 | $13.81 | 3 |
| W | A4399 | OSTOMY IRRIGATION SUPPLY; CONE/C | 10/1/2006 | $12.26 | 3 |
| W | A4400 | OSTOMY IRRIGATION SET | 9/1/1996 | NC | 9 |
| W | A4402 | LUBRICANT, PER OUNCE | 10/1/2006 | $1.60 | 3 |
| W | A4404 | OSTOMY RING, EACH | 10/1/2006 | $1.44 | 3 |
| W | A4421 | OSTOMY SUPPLY; MISCELLANEOUS | 1/1/1994 | $100.00 | 3 |
| W | A4454 | TAPE, ALL TYPES, ALL SIZES | 7/1/2003 | INVALID | N |
| W | A4460 | ELASTIC BANDAGE, PER ROLL (EG; C | 7/1/2003 | INVALID | N |
| W | A4465 | NONELASTIC BINDER FOR EXREMITY | 10/1/2000 | $21.63 | 3 |
| W | A4470 | GRAVLEE JET WASHER | 10/1/2001 | NC | 9 |
| W | A4480 | VABRA ASPIRATOR | 10/1/2001 | NC | 9 |
| W | A4490 | SURGICAL STOCKING ABOVE KNEE LEN | 4/1/2003 | NC | 9 |
| W | A4495 | SURGICAL STOCKING THIGH LENGTH, | 4/1/2003 | NC | 9 |
| W | A4500 | SURGICAL STOCKING BELOW KNEE LEN | 1/1/2003 | NC | 9 |
| W | A4510 | SURGICAL STOCKING FULL-LENGTH, E | 1/1/2003 | NC | 9 |
| W | A4550 | SURGICAL TRAYS | 10/1/2000 | $27.04 | 3 |
| W | A4565 | SLINGS | 10/1/2000 | $10.82 | 3 |
| W | A4570 | SPLINT | 7/1/2002 | NC | 9 |
| W | A4572 | RIB BELT | 7/1/2003 | INVALID | N |
| W | A4580 | CAST SUPPLIES (E.G.,PLASTER) | 7/1/2002 | NC | 9 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | A4590 | SPECIAL CASTING MATERIAL (E.G.,F | 7/1/2002 | NC | 9 |
| W | A4621 | TRACHEOTOMY MASK OR COLLAR | 4/1/2004 | INVALID | N |
| W | A4622 | TRACHEOSTOMY OR LARYNGECTOMY TUB | 4/1/2004 | INVALID | N |
| W | A4649 | SURGICAL SUPPLY; MISCELLANEOUS | 12/20/2004 | $0.01 | 5 |
| W | A4712 | WATER, STERILE, FOR INJECTION, P | 4/1/2004 | INVALID | N |
| W | A5051 | OSTOMY POUCH, CLOSED; WITH BARRI | 10/1/2006 | $2.07 | 3 |
| W | A5052 | OSTOMY POUCH, CLOSED; WITHOUT BA | 10/1/2006 | $1.49 | 3 |
| W | A5053 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.74 | 3 |
| W | A5054 | OSTOMY POUCH, CLOSED; FOR USE ON | 10/1/2006 | $1.72 | 3 |
| W | A5055 | STOMA CAP | 10/1/2006 | $1.44 | 3 |
| W | A5062 | OSTOMY POUCH, DRAINABLE; WITHOUT | 10/1/2006 | $2.09 | 3 |
| W | A5063 | OSTOMY POUCH, DRAINABLE; FOR USE | 10/1/2006 | $2.21 | 3 |
| W | A5064 | POUCH, DRAINABLE; WITH FACEPLATE | 4/1/2002 | INVALID | N |
| W | A5071 | OSTOMY POUCH, URINARY; WITH BARR | 10/1/2006 | $3.77 | 3 |
| W | A5072 | OSTOMY POUCH, URINARY; WITHOUT B | 10/1/2006 | $3.50 | 3 |
| W | A5073 | OSTOMY POUCH, URINARY; FOR USE O | 10/1/2006 | $3.18 | 3 |
| W | A5074 | POUCH, URINARY; WITH FACEPLATE A | 4/1/2002 | INVALID | N |
| W | A5075 | POUCH, URINARY; FOR USE ON FACEP | 4/1/2002 | INVALID | N |
| W | A5081 | CONTINENT DEVICE; PLUG FOR CONTI | 10/1/2006 | $2.81 | 3 |
| W | A5082 | CONTINENT DEVICE; CATHETER FOR C | 10/1/2006 | $10.15 | 3 |
| W | A5093 | OSTOMY ACCESSORY; CONVEX INSERT | 10/1/2006 | $1.66 | 3 |
| W | A5102 | BEDSIDE DRAINAGE BOTTLE, WITH OR | 10/1/2006 | $22.54 | 3 |
| W | A5105 | URINARY SUSPENSORY; WITH LEG BAG | 10/1/2006 | $34.60 | 3 |
| W | A5112 | URINARY LEG BAG; LATEX | 10/1/2006 | $34.57 | 3 |
| W | A5119 | SKIN BARRIER; WIPES OR SWABS, PE | 1/1/2006 | INVALID | N |
| W | A5123 | SKIN BARRIER; WITH FLANGE (SOLID | 7/1/2003 | INVALID | N |
| W | D1203 | TOPICAL APPLICATION OF FLUORIDE | 10/1/2000 | $12.73 | 3 |
| W | D1204 | TOPICAL APPLICATION OF FLUORIDE | 10/1/2003 | $12.73 | 3 |
| W | E0100 | CANE, INCLUDES CANES OF ALL MATE | 10/1/2006 | $20.72 | 3 |
| W | E0105 | CANE, QUAD OR THREE-PRONG, INCLU | 10/1/2006 | $48.72 | 3 |
| W | E0110 | CRUTCHES, FOREARM, INC CRUTCHES | 10/1/2006 | $77.59 | 3 |
| W | E0111 | CRUTCH, FOREARM, INC CRUTCHES OF | 10/1/2006 | $53.26 | 3 |
| W | E0112 | CRUTCHES, UNDERARM, WOOD, ADJUST | 10/1/2006 | $37.00 | 3 |
| W | E0113 | CRUTCH, UNDERARM, WOOD, ADJUSTAB | 10/1/2006 | $21.13 | 3 |
| W | E0114 | CRUTCHES, UNDERARM, OTHER THAN W | 10/1/2006 | $47.19 | 3 |
| W | E0116 | CRUTCH, UNDERARM, OTHER THAN WOO | 10/1/2006 | $27.74 | 3 |
| W | E0191 | HEEL OR ELBOW PROTECTOR, EACH | 10/1/2006 | $8.49 | 3 |
| W | G0001 | ROUTINE VENIPUNCTURE FOR COLLECT | 1/1/2005 | INVALID | N |
| W | G0002 | OFFICE PROCEDURE, INSERTION OF T | 7/1/2003 | INVALID | N |
| W | G0008 | ADMINISTRATION OF INFLUENZA VIRU | 2/15/2000 | NC | 9 |
| W | G0009 | ADMINISTRATION OF PNEUMOCOCCAL V | 2/15/2000 | NC | 9 |
| W | G0010 | ADMINISTRATION OF HEPATITIS B VA | 2/15/2000 | NC | 9 |
| W | G0104 | COLORECTAL CANCER SCREENING; FLE | 1/1/2007 | $86.15 | 3 |
| W | G0345 | INTRAVENOUS INFUSION, HYDRATION; | 1/1/2006 | INVALID | N |
| W | G0346 | EACH ADDITIONAL HOUR, UP TO EIGH | 1/1/2006 | INVALID | N |
| W | G0347 | INTRAVENOUS INFUSION, FOR THERAP | 1/1/2006 | INVALID | N |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | G0351 | THERAPEUTIC OR DIAGNOSTIC INJECT | 1/1/2006 | INVALID | N |
| W | G0353 | INTRAVENOUS PUSH, SINGLE OR INIT | 1/1/2006 | INVALID | N |
| W | G0354 | EACH ADDITIONAL SEQUENTIAL INTRA | 1/1/2006 | INVALID | N |
| W | G0363 | IRRIGATION OF IMPLANTED VENOUS A | 1/1/2006 | INVALID | N |
| W | G9001 | COORDINATED CARE FEE, INITIAL RA | 4/1/2003 | $22.93 | 3 |
| W | G9002 | COORDINATED CARE FEE, MAINTENANC | 4/1/2003 | $70.00 | 3 |
| W | G9003 | COORDINATED CARE FEE, RISK ADJUS | 1/1/2003 | $0.01 | P |
| W | G9004 | COORDINATED CARE FEE, RISK ADJUS | 1/1/2003 | $0.01 | P |
| W | G9005 | COORDINATED CARE FEE, RISK ADJUS | 4/1/2003 | $120.00 | 3 |
| W | G9006 | COORDINATED CARE FEE, HOME MONIT | 4/1/2003 | $40.00 | 3 |
| W | G9009 | CASE MANAGEMENT (PARTIAL SERVICE | 4/1/2003 | $35.00 | 3 |
| W | G9010 | HIGH RISK CASE MANAGEMENT (PARTI | 4/1/2003 | $60.00 | 3 |
| W | G9011 | TELEPHONE CASE MANAGEMENT VISIT | 4/1/2003 | $10.00 | 3 |
| W | G9012 | OTHER SPECIFIED CASE MANAGEMENT | 4/1/2003 | $40.00 | 3 |
| W | G9016 | SMOKING CESSATION COUNSELING, IN | 4/1/2001 | $10.00 | 3 |
| W | J0295 | INJECTION, AMPICILLIN SODIUM/SUL | 1/1/2007 | $6.09 | 3 |
| W | J0350 | INJECTION, ANISTREPLASE, PER 30 | 7/1/2006 | $2,268.46 | 3 |
| W | J0702 | INJECTION, BETAMETHASONE ACETATE | 1/1/2007 | $5.18 | 3 |
| W | J0704 | INJECTION, BETAMETHASONE SODIUM | 7/1/2006 | $1.13 | 3 |
| W | J0715 | INJECTION, CEFTIZOXIME SODIUM, P | 1/1/2007 | $2.98 | 3 |
| W | J0835 | INJECTION, COSYNTROPIN, PER 0.25 | 1/1/2007 | $63.92 | 3 |
| W | J0850 | INJECTION, CYTOMEGALOVIRUS IMMUN | 1/1/2007 | $866.58 | 3 |
| W | J1056 | INJECTION, MEDROXYPROGESTERONE A | 7/1/2006 | $22.89 | 3 |
| W | J1362 | INJECTION, ERYTHROMYCIN GLUCEPTA | 4/1/2002 | INVALID | N |
| W | J1364 | INJECTION, ERYTHROMYCIN LACTOBIO | 1/1/2007 | $5.99 | 3 |
| W | J1610 | INJECTION, GLUCAGON HYDROCHLORID | 1/1/2007 | $68.04 | 3 |
| W | J1620 | INJECTION, GONADORELIN HYDROCHLO | 1/1/2007 | $180.30 | 3 |
| W | J1642 | INJECTION, HEPARIN SODIUM, (HEPA | 7/1/2006 | $0.05 | 3 |
| W | J1644 | INJECTION, HEPARIN SODIUM, PER 1 | 1/1/2007 | $0.23 | 3 |
| W | J1785 | INJECTION, IMIGLUCERASE, PER UNI | 1/1/2007 | $3.92 | 3 |
| W | J1830 | INTERFERON BETA-1B, PER 0.25 MG | 1/1/2007 | $90.28 | 3 |
| W | J1950 | INJECTION, LEUPROLIDE ACETATE (F | 1/1/2007 | $431.95 | 3 |
| W | J2260 | INJECTION, MILRINONE LACTATE, 5 | 1/1/2007 | $3.23 | 3 |
| W | J2512 | INJECTION, PENTAGASTRIN, PER 2 M | 4/1/2002 | INVALID | N |
| W | J2725 | INJECTION, PROTIRELIN, PER 250 M | 7/1/2006 | $21.78 | 3 |
| W | J2788 | INJECTION, RHO D IMMUNE GLOBULIN | 1/1/2007 | $26.17 | 3 |
| W | J3030 | INJECTION, SUMATRIPTAN SUCCINATE | 1/1/2007 | $58.49 | 3 |
| W | J7300 | INTRAUTERINE COPPER CONTRACEPTIV | 1/23/2006 | $475.00 | 3 |
| W | J7302 | LEVONOGESTREL-RELEASING INTRAUTE | 1/23/2006 | $515.29 | 3 |
| W | J7507 | TACROLIMUS, ORAL, PER 1 MG (PROG | 7/1/2006 | $3.54 | 3 |
| W | J7508 | TACROLIMUS, ORAL, PER 5 MG (PROG | 4/1/2004 | INVALID | N |
| W | J8499 | PRESCRIPTION DRUG, ORAL, NON CHE | 11/1/2004 | $0.01 | 5 |
| W | J8530 | CYCLOPHOSPHAMIDE; ORAL, 25 MG (C | 1/1/2007 | $0.98 | 3 |
| W | J8560 | ETOPOSIDE, ORAL, 50 MG (VEPESID) | 1/1/2007 | $30.54 | 3 |
| W | J8600 | MELPHALAN, ORAL, 2 MG (ALKERAN) | 1/30/2006 | $6.58 | 3 |
| W | J8610 | METHOTREXATE, ORAL, 2.5 MG (RHEU | 1/1/2007 | $0.22 | 3 |

# DMAP FEE FOR SERVICE FEE SCHEDULE

## March 2007

| TOS | Proc Code | Description | Eff Dt | Price | PAC |
|---|---|---|---|---|---|
| W | J9245 | INJECTION, MELPHALAN HCL, 50 MG | 1/1/2007 | $1,197.78 | 3 |
| W | L8100 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8110 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8120 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8130 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8140 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8150 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8160 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8170 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8180 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8190 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8200 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8210 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8220 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8230 | ELASTIC SUPPORT, ELASTIC STOCKIN | 1/1/2006 | INVALID | N |
| W | L8300 | TRUSS, SINGLE WITH STANDARD PAD | 10/1/2006 | $75.54 | 3 |
| W | L8310 | TRUSS, DOUBLE WITH STANDARD PADS | 10/1/2006 | $105.82 | 3 |
| W | L8320 | TRUSS, ADDITION TO STANDARD PAD, | 10/1/2006 | $40.28 | 3 |
| W | L8330 | TRUSS, ADDITION TO STANDARD PAD, | 10/1/2006 | $35.59 | 3 |
| W | M0300 | IV CHELATION THERAPY (CHEMICAL E | 2/1/1994 | NC | 9 |
| W | M0301 | FABRIC WRAPPING OF ABDOMINAL ANE | 2/1/1994 | NC | 9 |
| W | Q4001 | CAST SUPPLIES, BODY CAST ADULT, | 7/1/2001 | $34.78 | 3 |
| W | Q4002 | CAST SUPPLIES, BODY CAST ADULT, | 7/1/2001 | $131.44 | 3 |
| W | Q4003 | CAST SUPPLIES, APPLICATION OF SH | 7/1/2001 | $24.98 | 3 |
| W | Q4004 | CAST SUPPLIES, APPLICATION OF SH | 7/1/2001 | $86.48 | 3 |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |

| PA |
|---|
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES

| PA |
| --- |
| YES |
| YES |
| YES

| PA |
|---|
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES

| PA |
| --- |
| YES |
| YES |
| YES

| PA |
|---|
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |

| PA |
|---|
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |

| PA |
|---|
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |

| PA |
| --- |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |

| PA |
|---|
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |

| PA |
|---|
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |

| PA |
|---|
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |

| PA |
|---|
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
| --- |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |

| PA |
| --- |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| YES |
| YES |
| YES |
| YES |
| YES

| PA |
| --- |
| YES |
| YES |
| YES

| PA |
| --- |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO |
| YES |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| YES |
| YES |
| YES |
| YES |
| YES |
| YES |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| YES |
| NO |
| NO |
| NO |
| NO |
| NO |

| PA |
|---|
| NO |
| NO |
| NO |

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
| --- |
| NO |
| NO |
| NO

| PA |
|---|
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |
| NO |