

**TEXAS HEALTH AND HUMAN SERVICES COMMISSION  
RATE ANALYSIS DEPARTMENT**

**September 18, 2015**

**Proposed Payment Rates for  
Comprehensive Rehabilitation Services Program**

Payment rates are proposed to be effective  
December 1, 2015

## **SUMMARY OF PROPOSED PAYMENT RATES**

**Effective December 1, 2015**

The Health and Human Services Commission (HHSC) will conduct a public hearing at 8:30 a.m. on September 30, 2015, in the Public Hearing Room in the Winters Building, 701 W. 51<sup>st</sup> Street, Austin, Texas, with entrance through Security at the front of the building facing 51<sup>st</sup> Street. Public comments will be received on proposed payment rates for the Comprehensive Rehabilitation Services (CRS) program operated by the Department of Assistive and Rehabilitation Services (DARS). All payment rates are proposed to be effective December 1, 2015.

HHSC will consider concerns expressed at the hearing prior to final rate approval. This public hearing is held in compliance with Human Resources Code §32.0282 and Title 1 of the Texas Administrative Code (TAC), §355.105(g), which require public notice and hearings on proposed reimbursements before such rates are approved by HHSC.

### **PROPOSED RATES**

HHSC proposes rates for Traumatic Brain Injury (TBI) and Spinal Cord Injury (SCI) Outpatient Services, Post-Acute Brain Injury (PABI) Residential Services, PABI Ancillary Services and PABI and Post-Acute SCI Non Residential Services. The CRS program proposed rates are presented in Attachments 1 and 2.

### **METHODOLOGY AND JUSTIFICATION**

An HHSC Internal Audit of the CRS program recommended that DARS work with the HHSC to develop a defensible, transparent rate setting methodology for the CRS program. The payment rates proposed in this document were developed in response to that audit recommendation.

The proposed payment rates were determined in accordance with the proposed rate setting methodology for CRS to be codified at title 1, section 355.9040. The proposed new section as published in the August 7, 2015, issue of the *Texas Register* (40 TexReg 4971). As per the proposed rules, HHSC has modeled rates for the CRS program using a pro forma costing methodology, which involves using historical costs of delivering similar services, where appropriate data are available, and estimating the basic types and costs of products and services necessary to deliver services meeting federal and state requirements.

Should you have any questions regarding the information in this document, please contact Guerin Heckman, Rate Analyst at (512) 707-6067 or [RAD-LTSS@hhsc.state.tx.us](mailto:RAD-LTSS@hhsc.state.tx.us).

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POST-ACUTE BRAIN INJURY (PABI) RESIDENTIAL SERVICES	
Service	Rate
Base per diem	\$163.97
Core Service per diem	\$500.57
Therapy Evaluations per diem	\$3.48
Daily rate	\$668.02

PABI AND POST-ACUTE NON-RESIDENTIAL SERVICES	
Facility-based per hour	\$9.67
Community-based per hour	\$10.00

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Healthcare Common Procedure Coding System (HCPCS)	HCPCS Modifier	Disability Determination Services (DDS) Fee Schedule Code	Proposed Rate	Description 1	Description 2	Description 3
0		TTHAL	\$ 160.00		Radioactive Isotope	
0	TC	TTHAL	\$ 160.00		Radioactive Isotope	
76			\$ 200.00	00076-Service Charge for Hearing Aid, \$0-\$1000 Mfg Cost of Aid		
77			\$ 375.00	00077-Service Charge for Hearing Aid, \$1001-\$1500 Mfg Cost of Aid		
78			\$ 450.00	00078-Service Charge for Hearing Aid, \$1501+ Mfg Cost of Aid		
11042			\$ 108.35	11042-Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); first 20 sq cm or less		Deb subq tissue 20 sq cm/<
11043			\$ 231.35	11043-Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); first 20 sq cm or less		Deb musc/fascia 20 sq cm/<
11044			\$ 319.98	11044-Debridement; skin, subcutaneous tissue, muscle, and bone (per 1/2 hour)		Deb bone 20 sq cm/<
11046			\$ 71.72	11046-Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure) (Use 11046 in conjunction with 11043)		Deb musc/fascia add-on
11047			\$ 120.96	11047-Debridement, bone (includes epidermis and dermis, subcutaneous tissue, muscle and/or fascia, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)		Deb bone add-on
11750			\$ 218.28	11750-Excision of nail and nail matrix, partial or complete, (eg, ingrown or deformed nail) for permanent removal;		Removal of nail bed
13160			\$ 809.27	13160-Secondary closure of surgical wound or dehiscence, extensive or complicated		Late closure of wound

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20550			\$ 57.26	20550-Injection(s); single tendon sheath, or ligament, aponeurosis (eg, plantar "fascia")		Inj tendon sheath/ligament
20552			\$ 53.86	20552-Injection(s); single or multiple trigger point(s), one or two muscle(s)		Inj trigger point 1/2 muscl
20610			\$ 61.14	20610-Arthrocentesis, aspiration and/or injection; major joint or bursa (eg, shoulder, hip, knee joint, subacromial bursa)		Drain/inj joint/bursa w/o us
21501			\$ 454.92	21501-Incision and drainage, deep abscess or hematoma, soft tissues of neck or thorax		Drain neck/chest lesion
22010			\$ 940.62	22010-Incision and drainage, open, of deep abscess (subfascial), posterior spine; cervical, thoracic. or cervicothoracic		I&d p-spine c/t/cerv-thor
22600			\$ 1,285.86	22600-Arthrodesis, posterior or posterolateral technique, single level; cervical below C2 segment		Neck spine fusion
22610			\$ 1,257.05	22610-Arthrodesis, posterior or posterolateral technique, single level; thoracic (with lateral transverse technique when performed		Thorax spine fusion
22614			\$ 394.10	22614-Arthrodesis, posterior or posterolateral technique, single level; each additional vertebral segment (List separately in addition to code for primary procedure)		Spine fusion extra segment
24305			\$ 577.27	24305-Tendon lengthening, upper arm or elbow, each tendon		Arm tendon lengthening
25290			\$ 445.86	25290-Tenotomy, open, flexor or extensor tendon, forearm and/or wrist, single, each tendon		Incise wrist/forearm tendon
25295			\$ 409.32	25295-Tenolysis, flexor or extensor tendon, forearm and/or wrist, single, each tendon (all extensors at wrist)		Release wrist/forearm tendon

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27130			\$ 1,400.87	27130-Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft		Total hip arthroplasty
27394			\$ 648.26	27394-Lengthening of hamstring tendon; multiple tendons, one leg		Lengthening of thigh tendons
27685			\$ 654.66	27685-Lengthening or shortening of tendon, leg or ankle; single tendon (separate procedure)		Revision of lower leg tendon
27686			\$ 557.71	27686-Lengthening or shortening of tendon, leg or ankle; multiple tendons (through same incision), each		Revise lower leg tendons
29125			\$ 64.02	29125-Application of short arm splint (forearm to hand); static		Apply forearm splint
29425			\$ 79.73	29425-Application of short leg cast (below knee to toes); walking or ambulatory type		Apply short leg cast
31502			\$ 35.08	31502-Tracheostomy tube change prior to establishment of fistula tract		Change of windpipe airway
31535			\$ 194.39	31535-Laryngoscopy, direct, operative, with biopsy;		Laryngoscopy w/biopsy
31540			\$ 248.53	31540-Laryngoscopy, direct, operative, with excision of tumor and/or stripping of vocal cords or epiglottis;		Laryngoscopy w/exc of tumor
31571			\$ 256.04	31571-Laryngoscopy, direct, with injection into vocal cord(s), therapeutic; with operating microscope		Laryngoscop w/vc inj + scope
31575			\$ 116.92	31575-Laryngoscopy, flexible fiberoptic; diagnostic		Diagnostic laryngoscopy
31578			\$ 284.25	31578-Laryngoscopy, flexible fiberoptic; with removal of lesion		Removal of larynx lesion
31579			\$ 215.24	31579-Laryngoscopy, flexible fiberoptic; with stroboscopy		Diagnostic laryngoscopy
31603			\$ 225.25	31603-Tracheostomy, emergency procedure; transtracheal		Incision of windpipe
31622			\$ 318.93	31622-Bronchoscopy; (rigid or flexible), with or without fluoroscopic guidance; diagnostic, with or without cell washing (separate procedure)		Dx bronchoscope/wash

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36415		TBLDR	\$ 3.60	36415-Collection of venous blood by venipuncture	Blood Drawing Fee	Routine venipuncture
36415	TC	TBLDR	\$ 3.60		Blood Drawing Fee	
36620		TALI	\$ 51.50	36620-Arterial catheterization or cannulation for sampling, monitoring or transfusion (separate procedure); percutaneous	Arterial Line Insertion	Insertion catheter artery
36620	TC	TALI	\$ 51.50		Arterial Line Insertion	
37609			\$ 300.00	37609-Ligation or biopsy, temporal artery		Temporal artery procedure
43235			\$ 304.82	43235-Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure)		Egd diagnostic brush wash
43239			\$ 304.82	43239-Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with biopsy, single or multiple		Egd biopsy single/multiple
43760			\$ 464.36	43760-Change of gastrostomy tube		Change gastrostomy tube
51040			\$ 293.20	51040-Cystostomy, cystotomy with drainage		Incise & drain bladder
51102			\$ 230.98	51102-Aspiration of bladder; with insertion of suprapubic catheter		Drain bl w/cath insertion
51600			\$ 185.92	51600-Injection procedure for cystography or voiding urethrocytography		Injection for bladder x-ray
51705			\$ 88.99	51705-Change of cystostomy tube; simple		Change of bladder tube
51710			\$ 92.43	51710-Change of cystostomy tube; complicated		Change of bladder tube
51726	26		\$ 86.66	51726-PROF FEE Complex cystometrogram (eg, calibrated electronic equipment)		Complex cystometrogram

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51728	26		\$ 104.72	51728-PROF FEE-Complex cystometrogram (ie, calibrated electronic equipment); with voiding pressure studies (ie, bladder voiding pressure), any technique		Cystometrogram w/vp
51728			\$ 315.13	51728-TOTAL FEE-Complex cystometrogram (ie, calibrated electronic equipment); with voiding pressure studies (ie, bladder voiding pressure), any technique		Cystometrogram w/vp
51729	26		\$ 127.51	51729-PROF FEE Complex cystometrogram (ie, calibrated electronic equipment); with voiding pressure studies (ie, bladder voiding pressure) and urethral pressure profile studies (ie, urethral closure pressure profile), any technique		Cystometrogram w/vp&up
51729			\$ 127.51	51729-TOTAL FEE Complex cystometrogram (ie, calibrated electronic equipment); with voiding pressure studies (ie, bladder voiding pressure) and urethral pressure profile studies (ie, urethral closure pressure profile), any technique		Cystometrogram w/vp&up
51741	26		\$ 8.58	51741-PROF FEE Complex uroflowmetry (eg, calibrated electronic equipment)		Electro-uroflowmetry first
51784	26		\$ 77.46	51784-PROF FEE Electromyography studies (EMG) of anal or urethral sphincter, other than needle, any technique		Anal/urinary muscle study
51784			\$ 194.51	51784-TOTAL FEE Electromyography studies (EMG) of anal or urethral sphincter, other than needle, any technique		Anal/urinary muscle study
51785	26		\$ 78.48	51785-PROF FEE Needle electromyography studies (EMG) of anal or urethral sphincter, any technique		Anal/urinary muscle study

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51797			\$ 112.98	51797-TOTAL FEE Voiding pressure studies (VP); intra-abdominal voiding (AP) (rectal, gastric, intraperitoneal)		Intraabdominal pressure test
51798			\$ 18.95	51798-Measurement of post-voiding residual urine and/or bladder capacity by ultrasound, non-imaging		Us urine capacity measure
52000			\$ 207.38	52000-Cystourethroscopy (separate procedure)		Cystoscopy
52310			\$ 55.74	52310-Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); simple		Cystoscopy and treatment
61867			\$ 2,283.65	61867-Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraope		Implant neuroelectrode
61885			\$ 530.99	61885-Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to a single electrode array		Insrt/redo neurostim 1 array
62252			\$ 87.96	62252-TOTAL FEE Reprogramming of programmable cerebrospinal shunt		Csf shunt reprogram
62270			\$ 156.94	62270-Spinal puncture, lumbar, diagnostic		Spinal fluid tap diagnostic
62311			\$ 209.45	62311-Injection, single (not via indwelling catheter), not including neurolytic substances, with or without contrast (for either localization or epidurography),of diagnostic or therapeutic substance(s) (including anesthetic, antispasmodic, opioid, steroid)		Inject spine lumbar/sacral

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62368			\$ 55.30	62368-Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming		Analyze sp inf pump w/reprog
62369			\$ 122.64	62369-Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming and refill		Anal sp inf pmp w/reprg&fill
64490			\$ 193.43	64490-Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (flouroscopy or CT), cervical or thoracic; single level		Inj paravert f jnt c/t 1 lev
64491			\$ 95.82	64491-Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (flouroscopy or CT), cervical or thoracic; second level(s) (List separately in addition to code for primary)		Inj paravert f jnt c/t 2 lev
64510			\$ 129.43	64510-Injection, anesthetic agent; stellate ganglion (cervical sympathetic)		N block stellate ganglion
64612			\$ 133.72	64612-Chemodenervation of muscle(s); muscle(s) innervated by facial nerve (eg, for blepharospasm, hemifacial spasm)		Destroy nerve face muscle
64640			\$ 135.51	64640-Destruction by neurolytic agent; other peripheral nerve or branch		Injection treatment of nerve
64642			\$ 141.94	64642-Chemodenervation of one extremity; 1-4 muscles(s)		Chemodenerv 1 extremity 1-4
64643			\$ 93.44	64643-Chemodenervation of one extremity; each additional extremity, 1-4 muscles(s) (List separately in addition to code for primary procedure)		Chemodenerv 1 extrem 1-4 ea

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64644			\$ 162.09	64644-Chemodeneration of one extremity; 5 or more muscle(s)		Chemodenerv 1 extrem 5/> mus
64645			\$ 114.26	64645-Chemodeneration of one extremity; each additional extremity, 5 or more muscle(s) (List separately in addition to code for primary procedure) (Use 64645 in conjunction with 64644)		Chemodenerv 1 extrem 5/> ea
67312			\$ 719.74	67312-Strabismus surgery, recession or resection procedure (patient not previously operated on); two horizontal muscle		Revise two eye muscles
69210		TWAXR	\$ 51.46	69210-Removal impacted cerumen (separate procedure), one or both ears	Remove Impacted Ear Wax - One or Both Ears	Remove impacted ear wax uni
69210	26	TWAXR	\$ 51.46		Remove Impacted Ear Wax - One or Both Ears	
70100			\$ 32.89	70100-TOTAL FEE Radiologic examination, mandible; partial, less than four views		X-ray exam of jaw <4views
70110	26	XMAND	\$ 12.31	70110-PROF FEE	X-ray mandible	
70110	TC	XMAND	\$ 28.28	70110-TECH FEE	X-ray mandible	
70110		XMAND	\$ 40.59	70110-TOTAL FEE	X-ray mandible	
70250	26	XSKL3	\$ 11.97	70250-PROF FEE	Skull, 1-3 views	
70250	TC	XSKL3	\$ 25.89	70250-TECH FEE	Skull, 1-3 views	
70250		XSKL3	\$ 37.86	70250-TOTAL FEE	Skull, 1-3 views	
70260	26	XSKL4	\$ 16.77	70260-PROF FEE	Skull, complete, minimum 4 views	
70260	TC	XSKL4	\$ 31.69	70260-TECH FEE	Skull, complete, minimum 4 views	
70260		XSKL4	\$ 48.46	70260-TOTAL FEE	Skull, complete, minimum 4 views	
70310			\$ 38.52	70310-TOTAL FEE Radiologic examination, teeth; partial examination, less than full mouth		X-ray exam of teeth
70336	26	XMRTM	\$ 71.76		Temporomandibular joint, magnetic resonance imaging	
70336	TC	XMRTM	\$ 344.10		Temporomandibular joint, magnetic resonance imaging	
70336		XMRTM	\$ 415.86		Temporomandibular joint, magnetic resonance imaging	
70360			\$ 27.61	70360-TOTAL FEE Radiologic examination; neck, soft tissue		X-ray exam of neck

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70450	26		\$ 41.36	70450-PROF FEE Computed tomography, head or brain; without contrast material		Ct head/brain w/o dye
70450			\$ 116.20	70450-TOTAL FEE Computed tomography, head or brain; without contrast material		Ct head/brain w/o dye
70491	26		\$ 67.67	70491-PROF FEE Computerized axial tomography, soft tissue neck; with contrast material(s)		Ct soft tissue neck w/dye
70540	26	XMROF	\$ 65.93		Orbit/face/neck, magnetic resonance imaging	
70540	TC	XMROF	\$ 400.03		Orbit/face/neck, magnetic resonance imaging	
70540		XMROF	\$ 465.96		Orbit/face/neck, magnetic resonance imaging	
70544	26		\$ 58.76	70544-PROF FEE Magnetic resonance angiography, head; without contrast material(s)		Mr angiography head w/o dye
70551	26	XMRBS	\$ 72.10	70551-PROF FEE Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Brain, with stem magnetic resonance imaging	Mri brain stem w/o dye
70551	TC	XMRBS	\$ 414.02	70551-TECH FEE Magnetic resonance (eg, proton) imaging,...	Brain, with stem magnetic resonance imaging	
70551		XMRBS	\$ 486.12	70551-TOTAL FEE Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Brain, with stem magnetic resonance imaging	Mri brain stem w/o dye
70553	26		\$ 115.46	70553-PROF FEE Magnetic resonance (eg, proton) imaging, brain (including brainstem); without contrast material, followed by contrast material(s) and further sequences		Mri brain stem w/o & w/dye
71010	26	XCHFR	\$ 8.88	71010-PROF FEE Radiologic examination, chest; single view, frontal	Chest, frontal, 1 view	Chest x-ray 1 view frontal
71010	TC	XCHFR	\$ 14.98	71010-TECH FEE Radiologic examination, chest; single view, ...	Chest, frontal, 1 view	
71010		XCHFR	\$ 23.86	71010-TOTAL FEE Radiologic examination, chest; single view, frontal	Chest, frontal, 1 view	Chest x-ray 1 view frontal

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71020	26	XCHAL	\$ 10.59	71020-PROF FEE Radiologic examination, chest, two views, frontal and lateral;	Chest, PA & L, 2 views	Chest x-ray 2vw frontal&latl
71020	TC	XCHAL	\$ 20.44	71020-TECH FEE Radiologic examination, chest, two views, frontal and lateral;	Chest, PA & L, 2 views	Chest x-ray 2vw frontal&latl
71020		XCHAL	\$ 31.03	71020-TOTAL FEE Radiologic examination, chest, two views, frontal and lateral;	Chest, PA & L, 2 views	Chest x-ray 2vw frontal&latl
71100	26	XRIB	\$ 10.94	71100-PROF FEE	X-ray of rib	
71100	TC	XRIB	\$ 22.48	71100-TECH FEE	X-ray of rib	
71100		XRIB	\$ 33.42	71100-TOTAL FEE	X-ray of rib	
71120	26	XSTER	\$ 9.91	71120-PROF FEE	X-ray of sternum	
71120	TC	XSTER	\$ 22.48	71120-TECH FEE	X-ray of sternum	
71120		XSTER	\$ 32.39	71120-TOTAL FEE	X-ray of sternum	
71550	26	XMRCH	\$ 71.07	71550-PROF FEE	Chest, magnetic resonance imaging	
71550	TC	XMRCH	\$ 464.15	71550-TECH FEE	Chest, magnetic resonance imaging	
71550		XMRCH	\$ 535.22	71550-TOTAL FEE	Chest, magnetic resonance imaging	
72010	26	XSPEN	\$ 22.87	72010-PROF FEE	Spine, entire survey, AP & L, 2 views	
72010	TC	XSPEN	\$ 56.25	72010-TECH FEE	Spine, entire survey, AP & L, 2 views	
72010		XSPEN	\$ 79.12	72010-TOTAL FEE	Spine, entire survey, AP & L, 2 views	
72040	26	XSPC2	\$ 11.57	72040-PROF FEE Radiologic examination, spine, cervical; two or three views	Spine, cervical, AP & L, 2 views	X-ray exam neck spine 2-3 vw
72040	TC	XSPC2	\$ 28.96	72040-TECH FEE Radiologic examination, spine, cervical; two or three views	Spine, cervical, AP & L, 2 views	X-ray exam neck spine 2-3 vw
72040		XSPC2	\$ 40.53	72040-TOTAL FEE Radiologic examination, spine, cervical; two or three views	Spine, cervical, AP & L, 2 views	X-ray exam neck spine 2-3 vw
72050	26	XSPC4	\$ 15.68		Spine, cervical, 4 views	
72050	TC	XSPC4	\$ 38.86		Spine, cervical, 4 views	
72050		XSPC4	\$ 54.54		Spine, cervical, 4 views	
72052	26	XSPCF	\$ 18.42		Spine, cervical, complete, including oblique/flexion, extension	
72052	TC	XSPCF	\$ 51.47		Spine, cervical, complete, including oblique/flexion, extension	
72052		XSPCF	\$ 69.89		Spine, cervical, complete, including oblique/flexion, extension	

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72070	26	XSPT2	\$ 10.94	72070-PROF FEE Radiologic examination, spine; thoracic, two views	Spine, thoracic, AP & L, 2 views	X-ray exam thorac spine 2vws
72070	TC	XSPT2	\$ 23.51		Spine, thoracic, AP & L, 2 views	
72070		XSPT2	\$ 34.45		Spine, thoracic, AP & L, 2 views	
72072	26	XSPT3	\$ 10.60		Spine, thoracic, AP & L with swim view C - T junction, 3 views	
72072	TC	XSPT3	\$ 27.60		Spine, thoracic, AP & L with swim view C - T junction, 3 views	
72072		XSPT3	\$ 38.20		Spine, thoracic, AP & L with swim view C - T junction, 3 views	
72074	26	XSPT4	\$ 10.60		Spine, thoracic, complete, including obliques, 4 views	
72074	TC	XSPT4	\$ 34.76		Spine, thoracic, complete, including obliques, 4 views	
72074		XSPT4	\$ 45.36		Spine, thoracic, complete, including obliques, 4 views	
72080	26	XSPTL	\$ 11.57		Spine, thoracolumbar, AP & L, 2 views	
72080	TC	XSPTL	\$ 25.89		Spine, thoracolumbar, AP & L, 2 views	
72080		XSPTL	\$ 37.46		Spine, thoracolumbar, AP & L, 2 views	
72100	26	XSPL2	\$ 11.57	72100-PROF FEE Radiologic examination, spine, lumbosacral; two or three views	Spine, lumbosacral, AP & L, 2 views	X-ray exam l-s spine 2/3 vws
72100	26	XSPLU	\$ 11.57		Spine, lumbar, AP & L	
72100	TC	XSPL2	\$ 26.23		Spine, lumbosacral, AP & L, 2 views	
72100	TC	XSPLU	\$ 26.23		Spine, lumbar, AP & L	
72100		XSPL2	\$ 37.80		Spine, lumbosacral, AP & L, 2 views	
72100		XSPLU	\$ 37.80		Spine, lumbar, AP & L	
72110	26	XSPL4	\$ 15.68		Spine, lumbosacral, complete, with oblique, 4 views	
72110	26	XSPL5	\$ 15.68		Spine, lumbosacral, complete, with oblique views	
72110	TC	XSPL4	\$ 35.79		Spine, lumbosacral, complete, with oblique, 4 views	
72110	TC	XSPL5	\$ 35.79		Spine, lumbosacral, complete, with oblique views	
72110		XSPL4	\$ 51.47		Spine, lumbosacral, complete, with oblique, 4 views	
72110		XSPL5	\$ 51.47		Spine, lumbosacral, complete, with oblique views	

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Healthcare Common Procedure Coding System (HCPCS)	HCPCS Modifier	Disability Determination Services (DDS) Fee Schedule Code	Proposed Rate	Description 1	Description 2	Description 3
72114	26	XSPB5	\$ 17.02		Spine, lumbosacral, complete, including bending views, 5 views	
72114	TC	XSPB5	\$ 50.45		Spine, lumbosacral, complete, including bending views, 5 views	
72114		XSPB5	\$ 67.47		Spine, lumbosacral, complete, including bending views, 5 views	
72120	26	XSPB4	\$ 11.90		Spine, lumbosacral, bending only, 4 views	
72120	TC	XSPB4	\$ 33.06		Spine, lumbosacral, bending only, 4 views	
72120		XSPB4	\$ 44.96		Spine, lumbosacral, bending only, 4 views	
72128	26		\$ 49.22	72128-PROF FEE Computed tomography, thoracic spine; without contrast material		Ct chest spine w/o dye
72131	26		\$ 49.22	72131-PROF FEE Computed tomography, lumbar spine; without contrast material		Ct lumbar spine w/o dye
72141	26	XMRC5	\$ 78.55		Cervical, magnetic resonance imaging	
72141	TC	XMRC5	\$ 356.72		Cervical, magnetic resonance imaging	
72141		XMRC5	\$ 435.27		Cervical, magnetic resonance imaging	
72146	26	XMRT5	\$ 78.55		Thoracic, magnetic resonance imaging	
72146	TC	XMRT5	\$ 360.13		Thoracic, magnetic resonance imaging	
72146		XMRT5	\$ 438.68		Thoracic, magnetic resonance imaging	
72148	26	XMRL5	\$ 73.07		Lumbar, magnetic resonance imaging	
72148	TC	XMRL5	\$ 359.79		Lumbar, magnetic resonance imaging	
72148		XMRL5	\$ 432.86	72148-TOTAL FEE Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Lumbar, magnetic resonance imaging	Mri lumbar spine w/o dye
72156	26		\$ 116.56	72156-PROF FEE Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical		Mri neck spine w/o & w/dye

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72156			\$ 380.43	72156-TOTAL FEE Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical		Mri neck spine w/o & w/dye
72170	26	XPEAP	\$ 9.17	72170-PROF FEE Radiologic examination, pelvis; one or two views	Pelvis, AP only	X-ray exam of pelvis
72170	TC	XPEAP	\$ 18.05	72170-TECH FEE Radiologic examination, pelvis; one or two views	Pelvis, AP only	X-ray exam of pelvis
72170		XPEAP	\$ 27.22	72170-TOTAL FEE Radiologic examination, pelvis; one or two views	Pelvis, AP only	X-ray exam of pelvis
72190	26	XPEAF	\$ 11.22	72190-PROF FEE Radiologic examination, pelvis; complete, minimum of three views	Pelvis, AP & Frog, 2 views	X-ray exam of pelvis
72190	26	XPEC3	\$ 11.22		Pelvis, complete, 3 views	
72190	TC	XPEAF	\$ 32.72		Pelvis, AP & Frog, 2 views	
72190	TC	XPEC3	\$ 32.72		Pelvis, complete, 3 views	
72190		XPEAF	\$ 43.94		Pelvis, AP & Frog, 2 views	
72190		XPEC3	\$ 43.94		Pelvis, complete, 3 views	
72196	26	XMRPE	\$ 85.07		Pelvis, magnetic, resonance imaging	
72196	TC	XMRPE	\$ 451.53		Pelvis, magnetic, resonance imaging	
72196		XMRPE	\$ 536.60		Pelvis, magnetic, resonance imaging	
72200	26	XSAC2	\$ 8.54		Sacroiliac Joints, AP & L, 2 views	
72200	TC	XSAC2	\$ 22.14		Sacroiliac Joints, AP & L, 2 views	
72200		XSAC2	\$ 30.68		Sacroiliac Joints, AP & L, 2 views	
72202	26	XSAC3	\$ 9.23		Sacroiliac Joints, complete, 3 views	
72202	TC	XSAC3	\$ 26.23		Sacroiliac Joints, complete, 3 views	
72202		XSAC3	\$ 35.46		Sacroiliac Joints, complete, 3 views	
72220	26	XCOSA	\$ 8.54		Coccyx/Sacrum, AP & L, 2 views	
72220	TC	XCOSA	\$ 21.12		Coccyx/Sacrum, AP & L, 2 views	
72220		XCOSA	\$ 29.66		Coccyx/Sacrum, AP & L, 2 views	
73000	26	XCLLT	\$ 8.20		Clavicle, left, 2 views	
73000	26	XCLRT	\$ 8.20		Clavicle, right, 2 views	
73000	TC	XCLLT	\$ 21.46		Clavicle, left, 2 views	
73000	TC	XCLRT	\$ 21.46		Clavicle, right, 2 views	
73000		XCLLT	\$ 29.66		Clavicle, left, 2 views	
73000		XCLRT	\$ 29.66		Clavicle, right, 2 views	
73010	26	XCLSC	\$ 9.51		Clavicle/Scapula, complete	
73010	TC	XCLSC	\$ 22.82		Clavicle/Scapula, complete	

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73010		XCLSC	\$ 32.33	73010-TOTAL FEE Radiologic examination; scapula, complete	Clavicle/Scapula, complete	X-ray exam of shoulder blade
73020		XSHLT	\$ 23.24	73020-TOTAL FEE Radiologic examination, shoulder; one view		X-ray exam of shoulder
73030	26	XSHLT	\$ 9.85	73030-PROF FEE Radiologic examination, shoulder; complete, minimum of two views	Shoulder, left, complete, 2 views	X-ray exam of shoulder
73030	26	XSHMI	\$ 9.85		Shoulder, 1 most involved, complete, 2 views	
73030	26	XSHRT	\$ 9.85		Shoulder, right, complete, 2 views	
73030	TC	XSHLT	\$ 21.80		Shoulder, left, complete, 2 views	
73030	TC	XSHMI	\$ 21.80		Shoulder, 1 most involved, complete, 2 views	
73030	TC	XSHRT	\$ 21.80		Shoulder, right, complete, 2 views	
73030		XSHLT	\$ 31.65	73030-TOTAL FEE Radiologic examination, shoulder; complete, minimum of two views	Shoulder, left, complete, 2 views	X-ray exam of shoulder
73030		XSHMI	\$ 31.65		Shoulder, 1 most involved, complete, 2 views	
73030		XSHRT	\$ 31.65		Shoulder, right, complete, 2 views	
73060	26	XHULT	\$ 8.54	73060-PROF FEE Radiologic examination; humerus, minimum of two views	Humerus, left, 2 views	X-ray exam of humerus
73060	26	XHURT	\$ 8.54		Humerus, right, 2 views	
73060	TC	XHULT	\$ 21.46	73060-TECH FEE Radiologic examination; humerus, minimum of two views	Humerus, left, 2 views	X-ray exam of humerus
73060	TC	XHURT	\$ 21.46		Humerus, right, 2 views	
73060		XHULT	\$ 30.00	73060-TOTAL FEE Radiologic examination; humerus, minimum of two views	Humerus, left, 2 views	X-ray exam of humerus
73060		XHURT	\$ 30.00		Humerus, right, 2 views	
73070	26	XELL2	\$ 7.85	73070-PROF FEE Radiologic examination, elbow; two views	Elbow, left, AP & L, 2 views	X-ray exam of elbow
73070	26	XELMI	\$ 7.85		Elbow, 1 most involved, AP & L, 2 views	
73070	26	XELR2	\$ 7.85		Elbow, right, AP & L, 2 views	
73070	TC	XELL2	\$ 21.46		Elbow, left, AP & L, 2 views	
73070	TC	XELMI	\$ 21.46		Elbow, 1 most involved, AP & L, 2 views	
73070	TC	XELR2	\$ 21.46		Elbow, right, AP & L, 2 views	

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73070		XELL2	\$ 29.31	73070-TOTAL FEE Radiologic examination, elbow; two views	Elbow, left, AP & L, 2 views	X-ray exam of elbow
73070		XELMI	\$ 29.31		Elbow, 1 most involved, AP & L, 2 views	
73070		XELR2	\$ 29.31		Elbow, right, AP & L, 2 views	
73080	26	XELL3	\$ 8.54	73080-PROF FEE Radiologic examination, elbow; complete, minimum of three views	Elbow, left, complete, 3 views	X-ray exam of elbow
73080	26	XELR3	\$ 8.54		Elbow, right, complete, 3 views	
73080	TC	XELL3	\$ 26.23		Elbow, left, complete, 3 views	
73080	TC	XELR3	\$ 26.23		Elbow, right, complete, 3 views	
73080		XELL3	\$ 34.77	73080-TOTAL FEE Radiologic examination, elbow; complete, minimum of three views	Elbow, left, complete, 3 views	X-ray exam of elbow
73080		XELR3	\$ 34.77		Elbow, right, complete, 3 views	
73090	26	XFOLT	\$ 7.85		Forearm, left, AP & L, 2 views	
73090	26	XFORT	\$ 7.85		Forearm, right, AP & L, 2 views	
73090	TC	XFOLT	\$ 20.44		Forearm, left, AP & L, 2 views	
73090	TC	XFORT	\$ 20.44		Forearm, right, AP & L, 2 views	
73090		XFOLT	\$ 28.29		Forearm, left, AP & L, 2 views	
73090		XFORT	\$ 28.29		Forearm, right, AP & L, 2 views	
73100	26	XWRL2	\$ 9.16		Wrist, left, AP & L, 2 views	
73100	26	XWRR2	\$ 9.16		Wrist, right, AP & L, 2 views	
73100	TC	XWRL2	\$ 23.51		Wrist, left, AP & L, 2 views	
73100	TC	XWRR2	\$ 23.51		Wrist, right, AP & L, 2 views	
73100		XWRL2	\$ 32.67	73100-TOTAL FEE Radiologic examination, wrist; two views	Wrist, left, AP & L, 2 views	X-ray exam of wrist
73100		XWRR2	\$ 32.67		Wrist, right, AP & L, 2 views	
73110	26	XWRL3	\$ 8.54		Wrist, left, complete, 3 views	
73110	26	XWRR3	\$ 8.54		Wrist, right, complete, 3 views	
73110	TC	XWRL3	\$ 29.65		Wrist, left, complete, 3 views	
73110	TC	XWRR3	\$ 29.65		Wrist, right, complete, 3 views	
73110		XWRL3	\$ 38.19	73110-TOTAL FEE Radiologic examination, wrist; complete, minimum of three views	Wrist, left, complete, 3 views	X-ray exam of wrist
73110		XWRR3	\$ 38.19		Wrist, right, complete, 3 views	
73120	26	XHAL2	\$ 8.19		Hand, left, AP & O, 2 views	
73120	26	XHAMI	\$ 8.19		Hand, 1 most involved, 2 views	
73120	26	XHAR2	\$ 8.19		Hand, right, AP & O, 2 views	
73120	TC	XHAL2	\$ 20.44		Hand, left, AP & O, 2 views	

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73120	TC	XHAMI	\$ 20.44		Hand, 1 most involved, 2 views	
73120	TC	XHAR2	\$ 20.44		Hand, right, AP & O, 2 views	
73120		XHAL2	\$ 28.63		Hand, left, AP & O, 2 views	
73120		XHAMI	\$ 28.63		Hand, 1 most involved, 2 views	
73120		XHAR2	\$ 28.63		Hand, right, AP & O, 2 views	
73130	26	XHAL3	\$ 8.54		Hand, left, complete, 3 views	
73130	26	XHAR3	\$ 8.54		Hand, right, complete, 3 views	
73130	TC	XHAL3	\$ 24.53		Hand, left, complete, 3 views	
73130	TC	XHAR3	\$ 24.53		Hand, right, complete, 3 views	
73130		XHAL3	\$ 33.07		Hand, left, complete, 3 views	
73130		XHAR3	\$ 33.07		Hand, right, complete, 3 views	
73140	26	XFNGL	\$ 6.82		Fingers, left, AP & O, 2 views	
73140	26	XFNGR	\$ 6.82		Fingers, right, AP & O, 2 views	
73140	TC	XFNGL	\$ 26.92		Fingers, left, AP & O, 2 views	
73140	TC	XFNGR	\$ 26.92		Fingers, right, AP & O, 2 views	
73140		XFNGL	\$ 33.74		Fingers, left, AP & O, 2 views	
73140		XFNGR	\$ 33.74		Fingers, right, AP & O, 2 views	
73220	26	XMRUE	\$ 105.24		Upper extremity, magnetic resonance imaging, no joint	
73220	TC	XMRUE	\$ 567.15		Upper extremity, magnetic resonance imaging, no joint	
73220		XMRUE	\$ 672.39		Upper extremity, magnetic resonance imaging, no joint	
73221	26	XMRUJ	\$ 67.24	73221-PROF FEE Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Upper extremity, magnetic resonance imaging, any joint	Mri joint upr extrem w/o dye
73221	TC	XMRUJ	\$ 389.12	73221-TECH FEE Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Upper extremity, magnetic resonance imaging, any joint	Mri joint upr extrem w/o dye
73221		XMRUJ	\$ 456.36	73221-TOTAL FEE Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Upper extremity, magnetic resonance imaging, any joint	Mri joint upr extrem w/o dye
73500	26	XHPL1	\$ 9.17		Hip, unilateral, left, 1 view	
73500	26	XHPR1	\$ 9.17		Hip, unilateral, right, 1 view	
73500	TC	XHPL1	\$ 18.73		Hip, unilateral, left, 1 view	
73500	TC	XHPR1	\$ 18.73		Hip, unilateral, right, 1 view	
73500		XHPL1	\$ 27.90		Hip, unilateral, left, 1 view	
73500		XHPR1	\$ 27.90		Hip, unilateral, right, 1 view	
73510	26	XHPL2	\$ 11.22		Hip, unilateral, left, complete, 2 views	

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73510	26	XHPMI	\$ 11.22		Hip, 1 most involved, unilateral, complete, 2 views	
73510	26	XHPR2	\$ 11.22		Hip, unilateral, right, complete, 2 views	
73510	TC	XHPL2	\$ 28.97		Hip, unilateral, left, complete, 2 views	
73510	TC	XHPMI	\$ 28.97		Hip, 1 most involved, unilateral, complete, 2 views	
73510	TC	XHPR2	\$ 28.97		Hip, unilateral, right, complete, 2 views	
73510		XHPL2	\$ 40.19	73510-TOTAL FEE Radiologic examination, hip; unilateral, complete, minimum of two views	Hip, unilateral, left, complete, 2 views	X-ray exam of hip
73510		XHPMI	\$ 40.19		Hip, 1 most involved, unilateral, complete, 2 views	
73510		XHPR2	\$ 40.19		Hip, unilateral, right, complete, 2 views	
73520	26	XHPBL	\$ 13.62		Hips, bilateral, min 2 views each hip, w/ AP pelvis	
73520	TC	XHPBL	\$ 28.63		Hips, bilateral, min 2 views each hip, w/ AP pelvis	
73520		XHPBL	\$ 42.25	73520-TOTAL FEE Radiologic examination, hips, bilateral, minimum of two views of each hip, including anteroposterior view of pelvis	Hips, bilateral, min 2 views each hip, w/ AP pelvis	X-ray exam of hips
73550	26	XFELT	\$ 9.16	73550-PROF FEE Radiologic examination, femur, two views	Femur, left, AP & L, 2 views	X-ray exam of thigh
73550	26	XFERT	\$ 9.16		Femur, right, AP & L, 2 views	
73550	TC	XFELT	\$ 20.10		Femur, left, AP & L, 2 views	
73550	TC	XFERT	\$ 20.10		Femur, right, AP & L, 2 views	
73550		XFELT	\$ 29.26	73550-TOTAL FEE Radiologic examination, femur, two views	Femur, left, AP & L, 2 views	X-ray exam of thigh
73550		XFERT	\$ 29.26		Femur, right, AP & L, 2 views	
73560	26	XKNL2	\$ 9.51	73560-PROF FEE Radiologic examination, knee; one or two views	Knee, left, AP & L, 2 views	X-ray exam of knee 1 or 2
73560	26	XKNMI	\$ 9.51		Knee, 1 most involved, AP & L, 2 views	
73560	26	XKNR2	\$ 9.51		Knee, right, AP & L, 2 views	
73560	TC	XKNL2	\$ 22.48		Knee, left, AP & L, 2 views	
73560	TC	XKNMI	\$ 22.48		Knee, 1 most involved, AP & L, 2 views	
73560	TC	XKNR2	\$ 22.48		Knee, right, AP & L, 2 views	
73560		XKNL2	\$ 31.99	73560-TOTAL FEE Radiologic examination, knee; one or two views	Knee, left, AP & L, 2 views	X-ray exam of knee 1 or 2
73560		XKNMI	\$ 31.99		Knee, 1 most involved, AP & L, 2 views	

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73560		XKNR2	\$ 31.99		Knee, right, AP & L, 2 views	
73562	26	XKNL3	\$ 9.85		Knee, left, AP & L, w/ Oblique, 3 views	
73562	26	XKNR3	\$ 9.85		Knee, right, AP & L, with Oblique, 3 views	
73562	TC	XKNL3	\$ 28.28		Knee, left, AP & L, w/ Oblique, 3 views	
73562	TC	XKNR3	\$ 28.28		Knee, right, AP & L, with Oblique, 3 views	
73562		XKNL3	\$ 38.13	73562-TOTAL FEE Radiologic examination, knee; three views	Knee, left, AP & L, w/ Oblique, 3 views	X-ray exam of knee 3
73562		XKNR3	\$ 38.13		Knee, right, AP & L, with Oblique, 3 views	
73564	26	XKNL4	\$ 11.91		Knee, left, complete, 4 views	
73564	26	XKNR4	\$ 11.91		Knee, right, complete, 4 views	
73564	TC	XKNL4	\$ 32.71		Knee, left, complete, 4 views	
73564	TC	XKNR4	\$ 32.71		Knee, right, complete, 4 views	
73564		XKNL4	\$ 44.62	73564-TOTAL FEE Radiologic examination, knee; complete, four or more views	Knee, left, complete, 4 views	X-ray exam knee 4 or more
73564		XKNR4	\$ 44.62		Knee, right, complete, 4 views	
73565	26	XKNLR	\$ 9.85		Knees, left & right, standing, AP, 2 views	
73565	TC	XKNLR	\$ 26.58		Knees, left & right, standing, AP, 2 views	
73565		XKNLR	\$ 36.43	73565-TOTAL FEE Radiologic examination, knee; both knees, standing, anteroposterior	Knees, left & right, standing, AP, 2 views	X-ray exam of knees
73590	26	XTFLT	\$ 8.54	73590-PROF FEE Radiologic examination; tibia and fibula, two views	Tibia & Fibula, left, AP & L, 2 views	X-ray exam of lower leg
73590	26	XTFRT	\$ 8.54		Tibia & Fibula, right, AP & L, 2 views	
73590	TC	XTFLT	\$ 19.75		Tibia & Fibula, left, AP & L, 2 views	
73590	TC	XTFRT	\$ 19.75		Tibia & Fibula, right, AP & L, 2 views	
73590		XTFLT	\$ 28.29		Tibia & Fibula, left, AP & L, 2 views	
73590		XTFRT	\$ 28.29		Tibia & Fibula, right, AP & L, 2 views	
73600	26	XANL2	\$ 8.20	73600-PROF FEE Radiologic examination, ankle; two views	Ankle, left, AP&L, 2 views	X-ray exam of ankle
73600	26	XANMI	\$ 8.20		Ankle, 1 most inv, AP&L, 2 views	
73600	26	XANR2	\$ 8.20		Ankle, right, AP&L, 2 views	
73600	TC	XANL2	\$ 21.46		Ankle, left, AP&L, 2 views	
73600	TC	XANMI	\$ 21.46		Ankle, 1 most inv, AP&L, 2 views	
73600	TC	XANR2	\$ 21.46		Ankle, right, AP&L, 2 views	
73600		XANL2	\$ 29.66		Ankle, left, AP&L, 2 views	

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73600		XANMI	\$ 29.66		Ankle, 1 most inv, AP&L, 2 views	
73600		XANR2	\$ 29.66		Ankle, right, AP&L, 2 views	
73610	26	XANL3	\$ 8.54	73610-PROF FEE Radiologic examination, ankle; complete, minimum of three views	Ankle, left, complete, 3 views	X-ray exam of ankle
73610	26	XANR3	\$ 8.54		Ankle, right, complete, 3 views	
73610	TC	XANL3	\$ 25.55		Ankle, left, complete, 3 views	
73610	TC	XANR3	\$ 25.55		Ankle, right, complete, 3 views	
73610		XANL3	\$ 34.09	73610-TOTAL FEE Radiologic examination, ankle; complete, minimum of three views	Ankle, left, complete, 3 views	X-ray exam of ankle
73610		XANR3	\$ 34.09		Ankle, right, complete, 3 views	
73620	26	XFTL2	\$ 7.51	73620-PROF FEE Radiologic examination, foot; two views	Foot, left, AP & L, 2 views	X-ray exam of foot
73620	26	XFTMI	\$ 7.51		Foot, 1 most involved, AP & L, 2 views	
73620	26	XFTR2	\$ 7.51		Foot, right, AP & L, 2 views	
73620	TC	XFTL2	\$ 20.44		Foot, left, AP & L, 2 views	
73620	TC	XFTMI	\$ 20.44		Foot, 1 most involved, AP & L, 2 views	
73620	TC	XFTR2	\$ 20.44		Foot, right, AP & L, 2 views	
73620		XFTL2	\$ 27.95		Foot, left, AP & L, 2 views	
73620		XFTMI	\$ 27.95		Foot, 1 most involved, AP & L, 2 views	
73620		XFTR2	\$ 27.95		Foot, right, AP & L, 2 views	
73630	26	XFTL3	\$ 8.20	73630-PROF FEE Radiologic examination, foot; complete, minimum of three views	Foot, left, complete, 3 views	X-ray exam of foot
73630	26	XFTR3	\$ 8.20		Foot, right, complete, 3 views	
73630	TC	XFTL3	\$ 24.19	73630-TECH FEE Radiologic examination, foot; complete, minimum of three views	Foot, left, complete, 3 views	X-ray exam of foot
73630	TC	XFTR3	\$ 24.19		Foot, right, complete, 3 views	
73630		XFTL3	\$ 32.39	73630-TOTAL FEE Radiologic examination, foot; complete, minimum of three views	Foot, left, complete, 3 views	X-ray exam of foot
73630		XFTR3	\$ 32.39		Foot, right, complete, 3 views	
73650	26	XHELT	\$ 7.85		Heel, left, AP & L, 2 views	
73650	26	XHERT	\$ 7.85		Heel, right, AP & L, 2 views	
73650	TC	XHELT	\$ 21.12		Heel, left, AP & L, 2 views	
73650	TC	XHERT	\$ 21.12		Heel, right, AP & L, 2 views	
73650		XHELT	\$ 28.97		Heel, left, AP & L, 2 views	

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73650		XHERT	\$ 28.97		Heel, right, AP & L, 2 views	
73660	26	XTOLT	\$ 6.48		Toes, left, AP & O, 2 views	
73660	26	XTORT	\$ 6.48		Toes, right, AP & L, 2 views	
73660	TC	XTOLT	\$ 24.19		Toes, left, AP & O, 2 views	
73660	TC	XTORT	\$ 24.19		Toes, right, AP & L, 2 views	
73660		XTOLT	\$ 30.67		Toes, left, AP & O, 2 views	
73660		XTORT	\$ 30.67		Toes, right, AP & L, 2 views	
73702			\$ 228.00	73702-TOTAL FEE Computerized axial tomography, lower extremity; without contrast material, followed by contrast material(s) and further sections		Ct lwr extremity w/o&w/dye
73720	26	XMRLE	\$ 104.89		Lower extremity, magnetic resonance imaging, no joint	
73720	TC	XMRLE	\$ 570.57		Lower extremity, magnetic resonance imaging, no joint	
73720		XMRLE	\$ 675.46		Lower extremity, magnetic resonance imaging, no joint	
73721	26	XMRLJ	\$ 67.24	73721-PROF FEE Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Lower extremity, magnetic resonance imaging, any joint	Mri jnt of lwr extre w/o dye
73721	TC	XMRLJ	\$ 399.35		Lower extremity, magnetic resonance imaging, any joint	
73721		XMRLJ	\$ 466.59		Lower extremity, magnetic resonance imaging, any joint	
74000	26	XABD	\$ 8.88	74000-PROF FEE Radiologic examination, abdomen; single anteroposterior view	Abdomen, 1 view	X-ray exam of abdomen
74000	TC	XABD	\$ 16.35		Abdomen, 1 view	
74000		XABD	\$ 25.23		Abdomen, 1 view	
74022	26		\$ 15.40	74022-PROF FEE Radiologic examination, abdomen; complete acute abdomen series, including supine, erect, and/or decubitus views, single view chest		X-ray exam series abdomen

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74174	26		\$ 105.88	74174-PROF FEE Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing (Do not report 74174 in conjunction with 72191, 73706, 74195, 75635, 76376, 76377)		Ct angio abd&pelv w/o&w/dye
74177	26		\$ 87.48	74177-PROF FEE Computed tomography, abdomen and pelvis; with contrast material(s)(Report 74176, 74177, or 74178 only once per CT abdomen and pelvis examination		Ct abd & pelv w/contrast
74181	26	XMRAB	\$ 71.41		Abdomen, magnetic resonance imaging	
74181	TC	XMRAB	\$ 358.77		Abdomen, magnetic resonance imaging	
74181		XMRAB	\$ 430.18		Abdomen, magnetic resonance imaging	
74230	26		\$ 25.97	74230-PROF FEE Swallowing function, with cineradiography and/or video		Cine/vid x-ray throat/esoph
74230			\$ 94.15	74230-TOTAL FEE Swallowing function, with cineradiography and/or video		Cine/vid x-ray throat/esoph
74240	TC		\$ 78.30	74240-TECH FEE Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KUB		X-ray upper gi delay w/o kub
74240			\$ 82.85	74240-TOTAL FEE Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KUB		X-ray upper gi delay w/o kub
74455			\$ 81.52	74455-TOTAL FEE Urethrocytography, voiding, radiological supervision and interpretation		X-ray urethra/bladder
75557	26	XMRMY	\$ 115.91		Myocardium, magnetic resonance imaging	
75557	TC	XMRMY	\$ 300.10		Myocardium, magnetic resonance imaging	
75557		XMRMY	\$ 416.01		Myocardium, magnetic resonance imaging	

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76000			\$ 47.20	76000-TOTAL FEE Fluoroscopy (separate procedure), up to one hour physician time, other than 71023 or 71034		Fluoroscope examination
76499			\$ 250.00	76499-TOTAL FEE Unlisted diagnostic radiographic procedure		Radiographic procedure
76512			\$ 92.58	76512-TOTAL FEE Ophthalmic ultrasound, echography, diagnostic; contact B-scan (with or without simultaneous A-Scan)		Ophth us b w/non-quant a
76514			\$ 14.65	76514-TOTAL FEE Echoencephalography, B-scan and/or real time with image documentation (gray scale) (for determination of ventricular size, delineation of cerebral contents and detection of fluid masses or other intracranial abnormalities), corneal pachymet		Echo exam of eye thickness
76705	26		\$ 28.71	76705-PROF FEE Ultrasound, abdominal, B-scan and/or real time with image documentation; limited (eg, single organ, quadrant, follow-up)		Echo exam of abdomen
76770	26		\$ 36.22	76770-PROF FEE Ultrasound, retroperitoneal (eg, renal, aorta, nodes), real time with image documentation; complete		Us exam abdo back wall comp
76856	26	TECPE	\$ 33.50		Z/Echo Exam of Pelvis	
76856	TC	TECPE	\$ 94.45		Z/Echo Exam of Pelvis	
76856		TECPE	\$ 127.95		Z/Echo Exam of Pelvis	
76881			\$ 117.63	76881-TOTAL FEE Ultrasound, extremity, non-vascular, real time with image documentation; complete		Us xtr non-vasc complete
76942	26		\$ 33.13	76942-PROF FEE Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation		Echo guide for biopsy

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76942			\$ 60.78	76942-TOTAL FEE Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation		Echo guide for biopsy
77003	26		\$ 30.08	77003-PROF FEE Fluoroscopic guidance and localization of needle or catheter tip for spine or paraspinal diagnostic or therapeutic injection procedures (epidural, transforaminal epidural, subarachnoid, paravertebral facet joint, paravertebral facet joint)		Fluoroguide for spine inject
77072	26	XBALW	\$ 9.22		Bone age studies, left hand & wrist	
77072	TC	XBALW	\$ 14.30		Bone age studies, left hand & wrist	
77072		XBALW	\$ 23.52		Bone age studies, left hand & wrist	
77084	26	XMRBM	\$ 78.55		Bone marrow blood supply, magnetic resonance imaging	
77084	TC	XMRBM	\$ 414.36		Bone marrow blood supply, magnetic resonance imaging	
77084		XMRBM	\$ 492.91		Bone marrow blood supply, magnetic resonance imaging	
78300	26	XBIML	\$ 30.08		Bone imaging - limited	
78300	TC	XBIML	\$ 151.69		Bone imaging - limited	
78300		XBIML	\$ 181.77		Bone imaging - limited	
78305	26	XBIMM	\$ 39.99		Bone imaging - multiple	
78305	TC	XBIMM	\$ 199.78		Bone imaging - multiple	
78305		XBIMM	\$ 239.77		Bone imaging - multiple	
78306	26	XBIMW	\$ 41.37		Bone imaging - whole body	
78306	TC	XBIMW	\$ 216.83		Bone imaging - whole body	
78306		XBIMW	\$ 258.20		Bone imaging - whole body	
78452	26	TTHAL	\$ 76.99			
78452	TC	TTHAL	\$ 427.58			
78452		TTHAL	\$ 504.57			
78600	26	XBRIL	\$ 21.22		Brain imaging - limited	
78600	TC	XBRIL	\$ 163.97		Brain imaging - limited	
78600		XBRIL	\$ 185.19		Brain imaging - limited	

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80048			\$ 11.51	80048 Basic metabolic panel This panel must include the following: Calcium (82310) Carbon dioxide (82374) Chloride (82435)		Metabolic panel total ca
80050			\$ 48.40	80050-General Health Panel. This panel must include the following; Comprehensive metabolic panel (80053), Hemogram, automated, and manual differential WBC count (CBC) (85022) OR Hemogram and platelet count, automated, and automated complete differential W		General health panel
80053		TCMP	\$ 17.96	80053 Comprehensive metabolic panel This panel must include the following: Albumin (82040) Bilirubin, total (82247) Calcium (82310)	Comprehensive Metabolic Panel	Comprehen metabolic panel
80061			\$ 18.22	80061 Lipid panel This panel must include the following: Cholesterol, serum, total (82465) Lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718)		Lipid panel
80074			\$ 64.83	80074-Acute hepatitis panel		Acute hepatitis panel
80076			\$ 11.11	80076-Hepatic function panel		Hepatic function panel
80100			\$ 40.00	80100-Drug screen, qualitative; multiple drug classes chromatographic method, each procedure		
80101			\$ 23.66	80101-Drug screen qualitative; single drug class method (eg, immunoassay, enzymeassay), each drug class		
80102			\$ 22.51	80102-Drug confirmation, each procedure		
80154		TKLON	\$ 31.44		Klonopin (Clonazepam) serum anticonvulsant drug level	
80154		TTRAN	\$ 31.44		Tranxene (Clorazepae Dipotassium) serum anticonvulsant drug level	
80154	TC	TKLON	\$ 31.44		Klonopin (Clonazepam) serum anticonvulsant drug level	
80154	TC	TTRAN	\$ 31.44		Tranxene (Clorazepae Dipotassium) serum anticonvulsant drug level	

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80156		TTEGR	\$ 24.74		Tegretol (Carbamazepine) serum anticonvulsant drug level	
80156	TC	TTEGR	\$ 24.74		Tegretol (Carbamazepine) serum anticonvulsant drug level	
80164		TDEPN	\$ 23.03	80164-Dipropylacetic acid (valproic acid)	Depakene (Valproic Acid) Serum Anticonvulsant Drug Level	Assay dipropylacetic acid tot
80164		TDEPT	\$ 23.03		Depakote (Valproic Acid) Serum Anticonvulsant Drug Level	
80164	TC	TDEPN	\$ 23.03		Depakene (Valproic Acid) Serum Anticonvulsant Drug Level	
80164	TC	TDEPT	\$ 23.03		Depakote (Valproic Acid) Serum Anticonvulsant Drug Level	
80177			\$ 18.04	80177-Levetiracetam		Drug scrn quan levetiracetam
80184		TPHEN	\$ 19.46		Phenobarbital - serum anticonvulsant drug level	
80184	TC	TPHEN	\$ 19.46		Phenobarbital - serum anticonvulsant drug level	
80185		TDILA	\$ 22.52		Dilantin (Phenytoin) Serum Anticonvulsant Drug Level	
80185	TC	TDILA	\$ 22.52		Dilantin (Phenytoin) Serum Anticonvulsant Drug Level	
80188		TMYSO	\$ 28.21		Mysoline (Primidone) serum anticonvulsant drug level	
80188	TC	TMYSO	\$ 28.21		Mysoline (Primidone) serum anticonvulsant drug level	
80201		TTOPA	\$ 20.27		Topamax (Topiramate) serum anticonvulsant drug level	
80201	TC	TTOPA	\$ 20.27		Topamax (Topiramate) serum anticonvulsant drug level	
80299		TCERE	\$ 23.28		Cerebyx (Fosphenytoin) Serum Anticonvulsant Drug Level	
80299		TFELB	\$ 23.28		Felbatol (Felbamate) Serum Anticonvulsant Drug Level	
80299		TGABA	\$ 23.28		Gabapril (Tiagabine) Serum Anticonvulsant Drug Level	
80299		TKEPP	\$ 23.28		Keppra (Levetiracetam) serum anticonvulsant drug level	
80299		TLAMI	\$ 23.28		Lamictal (Lamotrigine) serum anticonvulsant drug level	

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80299		TNRON	\$ 23.28		Neurontin (Gabapentin) serum anticonvulsant drug level	
80299		TSABR	\$ 23.28		Sabril (Vigabatrin) serum anticonvulsant drug level	
80299		TSEBL	\$ 23.28		Serum anticonvulsant drug level	
80299		TTRIL	\$ 23.28		Trileptal (Oxcarbazepne) serum anticonvulsant drug level	
80299		TZONE	\$ 23.28		Zonegran (Zonisamide) serum anticonvulsant drug level	
80299	TC	TCERE	\$ 23.28		Cerebyx (Fosphenytoin) Serum Anticonvulsant Drug Level	
80299	TC	TFELB	\$ 23.28		Felbatol (Felbamate) Serum Anticonvulsant Drug Level	
80299	TC	TGABA	\$ 23.28		Gabapril (Tiagabine) Serum Anticonvulsant Drug Level	
80299	TC	TKEPP	\$ 23.28		Keppra (Levetiracetam) serum anticonvulsant drug level	
80299	TC	TLAMI	\$ 23.28		Lamictal (Lamotrigine) serum anticonvulsant drug level	
80299	TC	TNRON	\$ 23.28		Neurontin (Gabapentin) serum anticonvulsant drug level	
80299	TC	TSABR	\$ 23.28		Sabril (Vigabatrin) serum anticonvulsant drug level	
80299	TC	TSEBL	\$ 23.28		Serum anticonvulsant drug level	
80299	TC	TTRIL	\$ 23.28		Trileptal (Oxcarbazepne) serum anticonvulsant drug level	
80299	TC	TZONE	\$ 23.28		Zonegran (Zonisamide) serum anticonvulsant drug level	
81000		TUA	\$ 5.38		Urinalysis	
81000	TC	TUA	\$ 5.38		Urinalysis	
81001			\$ 4.31	81001 Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; automated, with microscopy		Urinalysis auto w/scope

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81002			\$ 3.48	81002-Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; without microscopy, non-automated		Urinalysis nonauto w/o scope
81003			\$ 3.06	81003-Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; without microscopy, automated		Urinalysis auto w/o scope
81005			\$ 2.95	81005-Urinalysis; qualitative or semiquantitative, except immunoassays		Urinalysis
81025		TUPT	\$ 10.75	81025-Urine pregnancy test, by visual color comparison methods	Urine pregnancy test, by visual color comparison	Urine pregnancy test
81025	TC	TUPT	\$ 10.75		Urine pregnancy test, by visual color comparison	
82024			\$ 52.56	82024 Adrenocorticotrophic hormone (ACTH)		Assay of acth
82040		TALBU	\$ 8.41	82040-Albumin; serum	Albumin, Serum	Assay of serum albumin
82040	TC	TALBU	\$ 8.41		Albumin, Serum	
82085		TALDO	\$ 16.50		Aldolase	
82085	TC	TALDO	\$ 16.50		Aldolase	
82140		TAMM	\$ 24.77		Ammonia, Serum	
82140	TC	TAMM	\$ 24.77		Ammonia, Serum	
82150			\$ 8.82	82150-Amylase		Assay of amylase
82247		TBILI	\$ 8.52	82247-Bilirubin	Bilirubin, Total	Bilirubin total
82247	TC	TBILI	\$ 8.52		Bilirubin, Total	
82248			\$ 6.83	82248-Bilirubin; direct		Bilirubin direct
82272			\$ 4.43	82272-Blood, occult, by peroxidase activity (eg, guaiac), qualitative, feces, single specimen (eg, from digital rectal exam).		Occult bld feces 1-3 tests
82306			\$ 36.98	82306-Calcifediol (25-OH Vitamin D-3)		Vitamin d 25 hydroxy
82310		TCALC	\$ 8.76	82310-Calcium; total	Calcium, Total	Assay of calcium
82310	TC	TCALC	\$ 8.76		Calcium, Total	

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82380		TCARO	\$ 15.67		Carotene	
82380	TC	TCARO	\$ 15.67		Carotene	
82435			\$ 3.67	82435-Chlorides; blood		Assay of blood chloride
82530			\$ 22.74	82530-Cortisol; free		Cortisol free
82533			\$ 22.19	82533-Corticosterone total		Total cortisol
82550		TCPK	\$ 11.08		Creatine Kinase (CK), (CPK); Total	
82550	TC	TCPK	\$ 11.08		Creatine Kinase (CK), (CPK); Total	
82565		TCREA	\$ 8.71	82565-Creatinine; blood	Creatinine Blood	Assay of creatinine
82565	TC	TCREA	\$ 8.71		Creatinine Blood	
82570			\$ 7.04	82570-Creatinine; other source		Assay of urine creatinine
82575		TCRCL	\$ 16.07		Creatinine Clearance	
82575	TC	TCRCL	\$ 16.07		Creatinine Clearance	
82607		TB12	\$ 25.62	82607-Cyanocobalamin, (Vitamin B-12);	Z/Cyanocobalamin (Vitamin B12)	Vitamin b-12
82607	TC	TB12	\$ 25.62		Z/Cyanocobalamin (Vitamin B12)	
82715		TFADI	\$ 28.94		Fat Differential, Feces, Quantitative	
82715	TC	TFADI	\$ 28.94		Fat Differential, Feces, Quantitative	
82728			\$ 17.00	82728-Ferritin		Assay of ferritin
82746		TFOLI	\$ 24.98	82746-Folic acid; serum	Z/Folic Acid	Assay of folic acid serum
82746	TC	TFOLI	\$ 24.98		Z/Folic Acid	
82803		TBGSE	\$ 65.76			
82803		TBGSR	\$ 32.88		Blood Gas Studies, resting only	
82803	TC	TBGSE	\$ 65.76			
82803	TC	TBGSR	\$ 32.88		Blood Gas Studies, resting only	
82947		TFBSG	\$ 6.67	82947-Glucose; quantitative, blood (except reagent strip)	Fasting Blood Sugar (Glucose), Quantitative	Assay glucose blood quant
82947	TC	TFBSG	\$ 6.67		Fasting Blood Sugar (Glucose), Quantitative	
82951		TGTT	\$ 21.88		Glucose Tolerance Test (GTT), including Glucose	
82951	TC	TGTT	\$ 21.88		Glucose Tolerance Test (GTT), including Glucose	
83001			\$ 25.29	83001-Gonadotropin; follicle stimulating hormone (FSH)		Assay of gonadotropin (fsh)
83002			\$ 25.20	83002-Gonadotropin;luteinizing hormone (LH)		Assay of gonadotropin (lh)
83003			\$ 22.70	83003-Growth hormone, human (HGH) (somatotropin)		Assay growth hormone (hgh)
83020		THGBE	\$ 21.88		Hemoglobin Electrophoresis	
83020	TC	THGBE	\$ 21.88		Hemoglobin Electrophoresis	

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83036			\$ 13.21	83036 Hemoglobin; glycated		Glycosylated hemoglobin test
83090			\$ 22.95	83090-Homocystine		Assay of homocystine
83540			\$ 8.81	83540-Iron		Assay of iron
83550			\$ 10.00	83550-Iron binding capacity		Iron binding test
83690			\$ 9.38	83690-Lipase		Assay of lipase
83735			\$ 9.11	83735 Magnesium		Assay of magnesium
83925			\$ 33.07	83925-Opiates, (eg, morphine, meperidine)		
83930			\$ 6.70	83930-Osmolality; blood		Assay of blood osmolality
83935			\$ 6.70	83935 Osmolality; urine		Assay of urine osmolality
84060		TPHAC	\$ 12.55		Phosphatase acid, total	
84060	TC	TPHAC	\$ 12.55		Phosphatase acid, total	
84075		TPHAL	\$ 8.80	84075-Phosphatase, alkaline;	Phosphatase alkaline	Assay alkaline phosphatase
84075	TC	TPHAL	\$ 8.80		Phosphatase alkaline	
84100			\$ 6.45	84100 Phosphorus inorganic (phosphate);		Assay of phosphorus
84132			\$ 3.67	84132-Potassium; serum		Assay of serum potassium
84134			\$ 11.49	84134 Assay Of Prealbumin		Assay of prealbumin
84144			\$ 18.00	84144-Progesterone		Assay of progesterone
84146			\$ 26.37	84146-Prolactin		Assay of prolactin
84155		TURPR	\$ 6.23	84155-Protein; total, except by refractometry; serum	24-hour urine protein	Assay of protein serum
84155	TC	TURPR	\$ 6.23		24-hour urine protein	
84165		TPREL	\$ 18.25		Protein, total electrophoresis & quantitation	
84165	TC	TPREL	\$ 18.25		Protein, total electrophoresis & quantitation	
84295			\$ 6.55	84295-Sodium; serum		Assay of serum sodium
84300			\$ 6.62	84300-Sodium; urine		Assay of urine sodium
84305			\$ 28.93	84305-Somatomedin		Assay of somatomedin
84403			\$ 35.13	84403 Testosterone; total		Assay of total testosterone
84436		TT7	\$ 11.68	84436-Thyroxine, total	Thyroxine, total (T7)	Assay of total thyroxine
84436	TC	TT7	\$ 11.68		Thyroxine, total (T7)	
84439		TT4	\$ 15.32	84439-Thyroxine, free	Thyroxine total free (T4)	Assay of free thyroxine
84439	TC	TT4	\$ 15.32		Thyroxine total free (T4)	
84443		TTSH	\$ 28.56	84443 Thyroid stimulating hormone (TSH)	Thyroid stimulation hormone (TSH)	Assay thyroid stim hormone
84443	TC	TTSH	\$ 28.56		Thyroid stimulation hormone (TSH)	

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84450		TSGOT	\$ 8.80	84450-Transferase; aspartate amino (AST) (SGOT),	Transferase: aspartate Amino (AST) (SGOT)	Transferase (ast) (sgot)
84450	TC	TSGOT	\$ 8.80		Transferase: aspartate Amino (AST) (SGOT)	
84460		TSGPT	\$ 9.00		Transferase SGPT	
84460	TC	TSGPT	\$ 9.00		Transferase SGPT	
84479		TT3/4	\$ 11.00	84479-Triiodothyronine (T-3); resin uptake	Thyroid hormone (T3 or T4) uptake or THBR	Assay of thyroid (t3 or t4)
84479	TC	TT3/4	\$ 11.00		Thyroid hormone (T3 or T4) uptake or THBR	
84480			\$ 19.29	84480 Triiodothyronine T3; total (TT-3)		Assay triiodothyronine (t3)
84481			\$ 23.05	84481-Triiodothyronine (T-3); free		Free assay (ft-3)
84520		TBUN	\$ 6.71	84520-Urea nitrogen; quantitative	Urea Nitrogen, Quantitative	Assay of urea nitrogen
84520	TC	TBUN	\$ 6.71		Urea Nitrogen, Quantitative	
84550		TURAC	\$ 7.68		Uric acid, blood	
84550	TC	TURAC	\$ 7.68		Uric acid, blood	
84600			\$ 21.88	84600-Volatiles (acetic anhydride, carbon tetrachloride, dichloroethane, dichloromethane, diethylether, isopropyl alcohol, methanol)		Assay of volatiles
84681			\$ 28.32	84681-C-peptide		Assay of c-peptide
85014		THCT	\$ 4.02	85014-Blood count; hematocrit (Hct)	Hematocrit (HCT)	Hematocrit
85014	TC	THCT	\$ 4.02		Hematocrit (HCT)	
85018		THGB	\$ 4.02	85018-Blood count; hemoglobin (Hgb)	Hemoglobin (HGB)	Hemoglobin
85018	TC	THGB	\$ 4.02		Hemoglobin (HGB)	
85025		TCBC	\$ 13.22	85025 Blood count; hemogram and platelet count, automated, and automated complete differential WBC count (CBC)	CBC, complete (Hgb, Hct, RBC, WBC & Platelet count); automated	Complete cbc w/auto diff wbc
85025	TC	TCBC	\$ 13.22		CBC, complete (Hgb, Hct, RBC, WBC & Platelet count); automated	
85027			\$ 8.81	85027-Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count)		Complete cbc automated
85044		TRETI	\$ 7.31		Reticulocyte count, manual	
85044	TC	TRETI	\$ 7.31		Reticulocyte count, manual	
85045			\$ 5.44	85045-Blood count; reticulocyte, automated		Automated reticulocyte count

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85260			\$ 24.37	85260-TOTAL FEE Clotting;factor X (Stuart-Prower)		Clot factor x stuart-power
85520			\$ 17.82	85520- Heparin assay		Heparin assay
85610		TPRTT	\$ 6.67	85610 Prothrombin time;	Prothrombin time (PT)	Prothrombin time
85610	TC	TPRTT	\$ 6.67		Prothrombin time (PT)	
85651		TSEDR	\$ 6.02	85651-Sedimentation rate; erythrocyte, non-automated	Sedimentation rate erythrocyte; non-automated	Rbc sed rate nonautomated
85651	TC	TSEDR	\$ 6.02		Sedimentation rate erythrocyte; non-automated	
85652			\$ 3.68	85652-Sedimentation rate; automated		Rbc sed rate automated
85660		TSICS	\$ 9.37		Sickling of RBC, Reduction	
85660	TC	TSICS	\$ 9.37		Sickling of RBC, Reduction	
85730		TPTT	\$ 10.20	85730 Thromboplastin time, partial (PTT); plasma or whole blood	Thromboplastin time partial (PTT)	Thromboplastin time partial
85730	TC	TPTT	\$ 10.20		Thromboplastin time partial (PTT)	
86038			\$ 16.45	86038-Antinuclear antibodies (ANA);		Antinuclear antibodies
86039		TANA	\$ 18.97		Antinuclear Antibodies (ANA); Titer	
86039	TC	TANA	\$ 18.97		Antinuclear Antibodies (ANA); Titer	
86141			\$ 13.00	86141-C-reactive protein; high sensitivity (hsCRP)		C-reactive protein hs
86225			\$ 18.69	86225-Deoxyribonucleic acid (DNA) antibody; native or double stranded		Dna antibody native
86320		TIMEL	\$ 38.10		Immunoelectrophoresis, serum	
86320	TC	TIMEL	\$ 38.10		Immunoelectrophoresis, serum	
86430		TRAF	\$ 9.65		Rheumatoid factor, qualitative	
86430	TC	TRAF	\$ 9.65		Rheumatoid factor, qualitative	
86431			\$ 7.72	86431-Rheumatoid factor; quantitative		Rheumatoid factor quant
86592		TVDRDL	\$ 7.26	86592-Syphilis test; qualitative (eg, VDRL, RPR, ART)	Syphilis test-VDRL/RPR/ART	Syphilis test non-trep qual
86592	TC	TVDRDL	\$ 7.26		Syphilis test-VDRL/RPR/ART	
86689		THTLV	\$ 32.89		Antibody; HTLV or HIV, confirmatory test	
86689	TC	THTLV	\$ 32.89		Antibody; HTLV or HIV, confirmatory test	
86703			\$ 18.66	86703-Antibody; HIV-1 and HIV-2, single assay		Hiv-1/hiv-2 1 result antbdy
86706			\$ 14.62	86706-Hepatitis B surface antibody (HBsAb)		Hep b surface antibody
86803			\$ 19.42	86803-Hepatitis C antibody;		Hepatitis c ab test

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86886			\$ 7.04	86886-Antihuman globulin test (Coombs test); indirect, titer, each antiserum		Coombs test indirect titer
86900			\$ 4.06	86900-Blood typing; ABO		Blood typing serologic abo
86901			\$ 4.06	86901-Blood typing;Rh (D)		Blood typing serologic rh(d)
86923			\$ 10.00	86923-Compatability test each unit; electronic		Compatibility test electric
87040			\$ 14.05	87040-Culture, bacterial; blood aerobic, with isolation and presumptive identification of isolates (includes anaerobic culture, if appropriate)		Blood culture for bacteria
87070			\$ 11.72	87070-Culture, bacterial; any other source except urine, blood or stool, aerobic with isolation and presumptive identification of isolates		Culture othr specimn aerobic
87075			\$ 12.88	87075-Culture, bacterial; any source, except blood, anaerobic with isolation and presumptive identification of isolates		Cultr bacteria except blood
87077			\$ 11.00	87077 Culture, bacterial; aerobic isolate, additional methods required for definitive identification, each isolate		Culture aerobic identify
87086			\$ 10.99	87086 Culture, bacterial; quantitative colony count, urine		Urine culture/colony count
87088			\$ 11.02	87088-Culture, bacterial; with isolation and presumptive identification of each isolate, urine		Urine bacteria culture
87102			\$ 11.43	87102-Culture, fungi, isolation (with or without presumptive identification); other source (except blood)		Fungus isolation culture
87103			\$ 12.27	87103-Culture, fungi, isolation (with or without presumptive identification); blood		Blood fungus culture
87147			\$ 7.04	87147-Culture, typing; immunologic method, other than immunofluorescence (eg, agglutination grouping), per antiserum		Culture type immunologic

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87186			\$ 11.77	87186 Susceptibility studies, antimicrobial agent; microdilution or agar dilution (minimum inhibitory concentration (MIC) or breakpoint), each multi-antimicrobial, per plate		Microbe susceptible mic
87205			\$ 5.81	87205-Smear, primary source with interpretation; Gram or Giemsa stain for bacteria, fungi, or cell types		Smear gram stain
87206			\$ 7.33	87206-Smear, primary source with interpretation; fluorescent and/or acid fast stain for bacteria, fungi, parasites, viruses or cell types		Smear fluorescent/acid stai
87340			\$ 14.06	87340-Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step method; hepatitis B surface antigen (HBsAg)		Hepatitis b surface ag eia
87449			\$ 16.32	87449-Infectious agent antigen detection by enzyme immunoassay technique qualitative or semiquantitative; multiple step method, not otherwise specified, each organism		Ag detect nos eia mult
87640			\$ 47.76	87640-Infectious agent detection by nucleic acid (DNA or RNA); Staphylococcus aureus amplified probe technique		Staph a dna amp probe
87641			\$ 47.76	87641-Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus aureus, methicillin resistant, amplified probe technique		Mr-staph dna amp probe
87651			\$ 47.76	87651-Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, amplified probe technique		Strep a dna amp probe
87653			\$ 47.76	87653-Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group B, amplified probe technique		Strep b dna amp probe

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87798			\$ 47.76	87798-Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism		Detect agent nos dna amp
88261		TCHRO	\$ 300.38		Chromosome Analysis/Blood/Genetic Karyotype	
88261	TC	TCHRO	\$ 300.38		Chromosome Analysis/Blood/Genetic Karyotype	
88304	26		\$ 10.94	88304-PROF FEE LEVEL III Surgical pathology, gross and microscopic examination; Abortion, Induced, Abscess, Aneurysm - Arterial/Ventricular, Anus, Tag, Appendix, other than Incidental, Artery, Atheromatous Plaque, Bartholin's Gland Cyst, Bone Fragment(s),		Tissue exam by pathologist
88305	26		\$ 36.30	88305-PROF FEE LEVEL IV-Surgical pathology, gross and microscopic examination: Abortion - Spontaneous/Missed, Artery, Biopsy, Bone Marrow, Biopsy, Bone Exostosis, Brain/Meninges, Other than for Tumor Resection, Breast, Biopsy, Not Requiring Microscopic Eva		Tissue exam by pathologist
89050			\$ 6.43	89050-Cell count, miscellaneous body fluids (eg, cerebrospinal fluid, joint fluid), except blood;		Body fluid cell count
90791			\$ 131.22	90791-Psychological diagnostic evaluation		Psych diagnostic evaluation
90792			\$ 147.31	90792-Psychiatric diagnostic evaluation with medical services		Psych diag eval w/med srvc
90801		ECIMS	\$ 153.16	90801-Psychiatric diagnostic interview examination	Clinical Interview w/ Mental Status Exam for Disability Evaluation	
90801	26	ECIMS	\$ 153.16		Clinical Interview w/ Mental Status Exam for Disability Evaluation	

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90805			\$ 75.76	90805-Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient; with medical evaluation and management services		
90806			\$ 86.57	90806-Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 45 to 50 minutes face-to-face with the patient;		
90833			\$ 41.72	90833-Psychotherapy, 30 minutes with patient and/or family member when performed with and evaluation and management service (List separately in addition to the code for primary procedure		Psytx pt&/fam w/e&m 30 min
90847			\$ 102.63	90847-Family psychotherapy (conjoint psychotherapy) (with patient present)		Family psytx w/patient
90901			\$ 38.26	90901-Biofeedback training by any modality		Biofeedback train any meth
92002			\$ 80.33	92002-Optometry Services: Medical examination and evaluation with initiation of diagnostic and treatment program; intermediate, new patient		Eye exam new patient
92004			\$ 147.72	92004-Ophthalmological services: medical examination and evaluation with initiation of diagnostic and treatment program; comprehensive, new patient, one or more visits		Eye exam new patient
92012			\$ 84.75	92012-Ophthalmological services: medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; intermediate, established patient		Eye exam establish patient

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92014			\$ 122.88	92014-Ophthalmological services: medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; comprehensive, established patient, one or more visits		Eye exam&tx estab pt 1/>vst
92015			\$ 19.74	92015-Determination of refractive state (includes prescription)		Determine refractive state
92060			\$ 64.33	92060-TOTAL FEE Sensorimotor examination with multiple measurements of ocular deviation (eg, restrictive or paretic muscle with diplopia) with interpretation and report (separate procedure)		Special eye evaluation
92065			\$ 53.78	92065-TOTAL FEE Orthoptic and/or preoptic training, with continuing medical direction and evaluation		Orthoptic/pleoptic training
92081	26	TVFSK	\$ 16.68		Visual fields SSA test kinetic	
92081	TC	TVFSK	\$ 31.65		Visual fields SSA test kinetic	
92081		TVFSK	\$ 48.33		Visual fields SSA test kinetic	
92082	26	TVFGM	\$ 22.12		Visual fields by Goldmann Perimeter	Visual field examination(s)
92082	TC	TVFGM	\$ 47.32		Visual fields by Goldmann Perimeter	Visual field examination(s)
92082		TVFGM	\$ 69.44	92082-Visual field examination, unilateral or bilateral, with interpretation and report; intermediate examination (eg, at least 2 isopters on Goldman perimeter, or semiquantitative, automated suprathreshold screening program, Humphrey supra threshold autom	Visual fields by Goldmann Perimeter	Visual field examination(s)
92083	26	TVFVT	\$ 28.25		Visual fields by Humphrey VTAP	
92083	TC	TVFVT	\$ 64.33		Visual fields by Humphrey VTAP	

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92083		TVFVT	\$ 92.58	92083-TOTAL FEE Visual field examination, unilateral or bilateral, with interpretation and report; extended examination (eg, Goldmann visual fields with at least 3 isopters plotted and static determination within the central 30°, or quantitative, automated)	Visual fields by Humphrey VTAP	Visual field examination(s)
92133			\$ 44.34	92133 TOTAL FEE-Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; optic nerve		Cmptr ophth img optic nerve
92134			\$ 45.03	92134-TOTAL FEE Scanning computerized ophthalmic diagnostic imaging (eg, scanning laser) with interpretation and report, unilateral or bilateral; retina		Cptr ophth dx img post segmt
92235			\$ 110.48	92235-TOTAL FEE Fluorescein angiography (includes multiframe imaging) with interpretation and report		Eye exam with photos
92250			\$ 77.95	92250-TOTAL FEE Fundus photography with interpretation and report		Eye exam with photos
92270			\$ 92.60	92270-TOTAL FEE Electro-oculography, with interpretation and report		Electro-oculography
92285			\$ 20.42	92285-TOTAL FEE-External ocular photography with interpretation and report for documentation of medical progress (eg, close-up photography, slit lamp photography, gonioscopy, stereo-photography)		Eye photography
92354			\$ 13.59	92354-Fitting of spectacle mounted low vision aid; single element system		Fit spectacles single system
92499		TSNEL	\$ 298.00	92499-TOTAL FEE Unlisted ophthalmological service or procedure	Snellen test	Eye service or procedure
92504			\$ 30.39	92504-Binocular microscopy (separate diagnostic procedure)		Ear microscopy examination

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92506		ELANG	\$ 165.82	92506-Evaluation of speech, language, voice, communication and/or auditory processing	Language Examination w/ Speech Evaluation for Disability Evaluation	
92506	26	ELANG	\$ 165.82		Language Examination w/ Speech Evaluation for Disability Evaluation	
92507			\$ 79.73	92507-Treatment of speech, language, voice, communication (Home Health)		Speech/hearing therapy
92521			\$108.69			Evaluation of speech fluency
92522			\$92.96			Evaluate speech production
92523			\$189.50	92523-Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthrial); with evaluation of language comprehension and expression (eg, receptive and expressive language)		Speech sound lang comprehen
92526			\$ 86.53	92526-Treatment of swallowing dysfunction and/or oral function for feeding		Oral function therapy
92540	TC	TENG	\$ 22.14			
92540	26	TENG	\$ 78.35			
92540		TENG	\$ 100.49			
92541			\$ 22.53	92541-TOTAL FEE Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording		Spontaneous nystagmus test
92542			\$ 26.46	92542-TOTAL FEE Positional nystagmus test, minimum of 4 positions, with recording		Positional nystagmus test
92543	26	TENG	\$ 21.80			
92543	TC	TENG	\$ 55.84			
92543		TENG	\$ 77.64	92543-TOTAL FEE Caloric vestibular test, each irrigation (binaural, bithermal, stimulation constitutes four tests), with recording		Caloric vestibular test
92544			\$ 15.73	92544-TOTAL FEE Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording		Optokinetic nystagmus test
92545			\$ 14.66	92545-TOTAL FEE Oscillating tracking test, with recording		Oscillating tracking test

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92546			\$ 101.65	92546-TOTAL FEE Sinusoidal vertical axis rotational testing		Sinusoidal rotational test
92547			\$ 5.77	92547-Use of vertical electrodes (List separately in addition to code for primary procedure)		Supplemental electrical test
92548			\$ 104.05	92548-TOTAL FEE Computerized dynamic posturography		Posturography
92550			\$ 20.86	92550-Tympanometry and reflex threshold measurements (Do not report 92550 in conjunction with 92567, 92568)		Tympanometry & reflex thresh
92552		TPTA	\$ 29.65		Pure Tone Audiometry - Air Only	
92552	TC	TPTA	\$ 29.65		Pure Tone Audiometry - Air Only	
92555		TSAT	\$ 21.80		Speech Audiometry Threshold	
92555	TC	TSAT	\$ 21.80		Speech Audiometry Threshold	
92556		TSPDT	\$ 34.08		Speech Discrimination test	
92556	TC	TSPDT	\$ 34.08		Speech Discrimination test	
92557		EAUDI	\$ 39.28	92557-Comprehensive audiometry, threshold evaluation and speech recognition (92553 and 92556 combined)	Audiometrics & Speech Discrimination (No MD Dx Included)	Comprehensive hearing test
92557		TAUDI	\$ 39.28		Audiometrics & Speech Discrimination	
92557	26	EAUDI	\$ 39.28		Audiometrics & Speech Discrimination (No MD Dx Included)	
92557	26	TAUDI	\$ 39.28		Audiometrics & Speech Discrimination	
92567		TTYMP	\$ 15.03	92567-Tympanometry (impedance testing)	Tympanometry (impedance testing)	Tympanometry
92567	26	TTYMP	\$ 15.03		Tympanometry (impedance testing)	
92568		TART	\$ 16.07		Acoustic Reflex Testing	
92568	26	TART	\$ 16.07		Acoustic Reflex Testing	
92570		TARDT	\$ 32.11	92570-Acoustic immittance testing, includes tympanometry (impedance testing), acoustic reflex threshold testing, and acoustic reflex decay testing (Do not report 92570 in conjunction with 92567, 92568)	Acoustic Immittance Testing	Acoustic immittance testing
92570	26	TARDT	\$ 32.11		Acoustic Immittance Testing	
92579		TVRA	\$ 43.06		Visual Reinforcement Audiometry	
92579	26	TVRA	\$ 43.06		Visual Reinforcement Audiometry	

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92582		ECPA	\$ 63.75		Conditioning Play Audiometry	
92582		TCPA	\$ 63.75		Conditioning Play Audiometry	
92582	TC	ECPA	\$ 63.75		Conditioning Play Audiometry	
92582	TC	TCPA	\$ 63.75		Conditioning Play Audiometry	
92587	TC	TEOEL	\$ 10.20		Evoked Otoacoustic Emissions, Limited	
92587	26	TEOEL	\$ 18.08		Evoked Otoacoustic Emissions, Limited	
92587		TEOEL	\$ 28.28	92587-TOTAL FEE Distortion product evoked otoacoustic emissions; limited evaluation (to confirm the presence or absence of hearing disorder, 3-6 frequencies) or transient evoked otoacoustic emissions, with interpretation and report	Evoked Otoacoustic Emissions, Limited	Evoked auditory test limited
92588	TC	TEOEC	\$ 14.64		Evoked Otoacoustic Emissions, Comprehensive	
92588	26	TEOEC	\$ 28.38		Evoked Otoacoustic Emissions, Comprehensive	
92588		TEOEC	\$ 43.02	92588-TOTAL FEE Distortion product evoked otoacoustic emissions; comprehensive diagnostic evaluation (quantitative analysis of outer hair cell function by cochlear mapping, minimum of 12 frequencies), with interpretation and report	Evoked Otoacoustic Emissions, Comprehensive	Evoked auditory tst complete
92590			\$ 76.00	92590-Hearing aid examination and selection; monaural		Hearing aid exam one ear
92591			\$ 116.00	92591-Hearing aid examination and selection; binaural		Hearing aid exam both ears
92593			\$ 38.00	92593-Hearing aid check; binaural		Hearing aid check both ears
92602		EARCI	\$ 91.87		Adjustment and Reprogramming of Cochlear Implant Under 7 Yrs of Age	
92602		TARCI	\$ 91.87		Adjustment and Reprogramming of Cochlear Implant Under 7 Yrs of Age	
92602	26	EARCI	\$ 91.87		Adjustment and Reprogramming of Cochlear Implant Under 7 Yrs of Age	
92602	26	TARCI	\$ 91.87		Adjustment and Reprogramming of Cochlear Implant Under 7 Yrs of Age	
92604		EARCO	\$ 87.47		Adjustment and Reprogramming of Cochlear Implant 7 Yrs of Age and Older	

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92604		TARCO	\$ 87.47		Adjustment and Reprogramming of Cochlear Implant 7 Yrs of Age and Older	
92604	26	EARCO	\$ 87.47		Adjustment and Reprogramming of Cochlear Implant 7 Yrs of Age and Older	
92604	26	TARCO	\$ 87.47		Adjustment and Reprogramming of Cochlear Implant 7 Yrs of Age and Older	
92608			\$ 46.10	92608-Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with patient; each additional 30 minutes(List separately addition to code for primary procedure) (Use 92608 in conjunction with 92607)		Ex for speech device rx addl
92610			\$ 85.45	92610-Evaluation of oral and pharyngeal swallowing function		Evaluate swallowing function
92611			\$ 87.24	92611-Motion fluoroscopic evaluation of swallowing function by cine or video recording		Motion fluoroscopy/swallow
92626		EEARS	\$ 88.14		Evaluation of Auditory Rehabilitation Status, First Hour (HINT)	
92626		TEARS	\$ 88.14		Evaluation of Auditory Rehabilitation Status, First Hour (HINT)	
92626	26	EEARS	\$ 88.14		Evaluation of Auditory Rehabilitation Status, First Hour (HINT)	
92626	26	TEARS	\$ 88.14		Evaluation of Auditory Rehabilitation Status, First Hour (HINT)	
92627		EEAR	\$ 21.88		Evaluation of Auditory Rehabilitation Status, Each Additional 15 Minutes (HINT)	
92627		TEAR	\$ 21.88		Evaluation of Auditory Rehabilitation Status, Each Additional 15 Minutes (HINT)	
92627	26	EEAR	\$ 21.88		Evaluation of Auditory Rehabilitation Status, Each Additional 15 Minutes (HINT)	
92627	26	TEAR	\$ 21.88		Evaluation of Auditory Rehabilitation Status, Each Additional 15 Minutes (HINT)	

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93000		TEKGR	\$ 19.09	93000-Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report	Electrocardiogram, resting, w/ Interpretation & Report	Electrocardiogram complete
93000	TC	TEKGR	\$ 12.75		Electrocardiogram, resting, w/ Interpretation & Report	
93000	26	TEKGR	\$ 6.34		Electrocardiogram, resting, w/ Interpretation & Report	
93010			\$ 8.54	93010-Electrocardiogram, routine ECG with at least 12 leads; interpretation and report only		Electrocardiogram report
93015		TBGSE	\$ 88.77			
93015		TDOLA	\$ 88.77			
93015		TETTB	\$ 88.77			
93015		TTHAL	\$ 88.77			
93015	TC	TBGSE	\$ 88.77			
93015	TC	TDOLA	\$ 88.77			
93015	TC	TETTB	\$ 88.77			
93015	TC	TTHAL	\$ 88.77			
93016		TBGSE	\$ 22.25			
93016		TDOLA	\$ 22.25			
93016		TETTB	\$ 22.25			
93016		TTHAL	\$ 22.25			
93016	26	TBGSE	\$ 22.25			
93016	26	TDOLA	\$ 22.25			
93016	26	TETTB	\$ 22.25			
93016	26	TTHAL	\$ 22.25			
93017		TBGSE	\$ 51.47			
93017		TETTB	\$ 51.47			
93017		TTHAL	\$ 51.47			
93017	TC	TBGSE	\$ 51.47			
93017	TC	TETTB	\$ 51.47			
93017	TC	TTHAL	\$ 51.47			
93018		TBGSE	\$ 15.05			
93018		TDOLA	\$ 15.05			
93018		TETTB	\$ 15.05			
93018		TTHAL	\$ 15.05			
93018	26	TBGSE	\$ 15.05			
93018	26	TDOLA	\$ 15.05			
93018	26	TETTB	\$ 15.05			

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93018	26	TTHAL	\$ 15.05			
93224		THOLT	\$ 99.29		U80/Holter Monitor, EKG for 24 Hours	
93224	26	THOLT	\$ 99.29		U80/Holter Monitor, EKG for 24 Hours	
93307	TC	TEC2D	\$ 86.60		Echocardiography, 2D, Complete	
93307	TC	TEC2M	\$ 86.60		Echocardiogram, 2D with M-Mode, Complete	
93307	26	TEC2D	\$ 46.18		Echocardiography, 2D, Complete	
93307	26	TEC2M	\$ 46.18		Echocardiogram, 2D with M-Mode, Complete	
93307		TEC2D	\$ 132.78		Echocardiography, 2D, Complete	
93307		TEC2M	\$ 132.78		Echocardiogram, 2D with M-Mode, Complete	
93320	26	TCWD	\$ 18.82		Continuous Wave Doppler (in connection with Echocardiogram)	
93320	TC	TCWD	\$ 35.44		Continuous Wave Doppler (in connection with Echocardiogram)	
93320		TCWD	\$ 54.26		Continuous Wave Doppler (in connection with Echocardiogram)	
93325	26	TCFD	\$ 3.74		Color Flow Doppler (in connection with ECHO)	
93325	TC	TCFD	\$ 24.53		Color Flow Doppler (in connection with ECHO)	
93325		TCFD	\$ 28.27		Color Flow Doppler (in connection with ECHO)	
93924	26	TDOLA	\$ 24.91			
93924	TC	TDOLA	\$ 178.69			
93924		TDOLA	\$ 203.60			
93970	26		\$ 33.74	93970-PROF FEE Duplex scan of extremity veins including responses to compression and other maneuvers; complete bilateral study		Extremity study
93970	TC		\$ 124.00	93970-TECH FEE Duplex scan of extremity veins including responses to compression and other maneuvers; complete bilateral study		Extremity study
93971	26		\$ 22.17	93971-PROF FEE-Duplex scan of extremity veins including responses to compression and other maneuvers; follow-up or limited study		Extremity study

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93971			\$ 122.64	93971-TOTAL FEE-Duplex scan of extremity veins including responses to compression and other maneuvers; follow-up or limited study		Extremity study
94010			\$ 36.14	94010-TOTAL FEE Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation		Breathing capacity test
94060	26	TPFT	\$ 25.30		Pulmonary Function - Pre and Post Bronchodilation with graphics	
94060	TC	TPFT	\$ 96.82		Pulmonary Function - Pre and Post Bronchodilation with graphics	
94060		TPFT	\$ 122.12	94060-TOTAL FEE-Bronchodilation responsiveness, spirometry as in 94010, pre- andpost- bronchodilator administration	Pulmonary Function - Pre and Post Bronchodilation with graphics	Evaluation of wheezing
94660			\$ 61.10	94660-Continuous positive airway pressure ventilation (CPAP), initiation and management		Pos airway pressure cpap
94729	26	TCMDC	\$ 8.20		Carbon Monoxide Diffusing Capacity (DLCO)	
94729	TC	TCMDC	\$ 45.33		Carbon Monoxide Diffusing Capacity (DLCO)	
94729		TCMDC	\$ 53.53		Carbon Monoxide Diffusing Capacity (DLCO)	
94760		TOXIM	\$ 3.04		Oximetry - measure blood oxygen level	
94760	26	TOXIM	\$ 3.04		Oximetry - measure blood oxygen level	
94761		TBGSE	\$ 4.75			
94761	TC	TBGSE	\$ 4.75			
95807			\$ 471.96	95807-TOTAL FEE Sleep study, simultaneous recording of ventilation, respiratory effort, ECG, or heart rate, and oxygen saturation, attended by a technologist		Sleep study attended

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95810	26		\$ 122.08	95810-PROF FEE Polysomnography; sleep staging with 4 or more additional Polysomnography; sleep staging with 4 or more additional parameters of sleep, attended by a technologist		Polysom 6/> yrs 4/> param
95810			\$ 625.71	95810-TOTAL FEE Polysomnography; sleep staging with 4 or more additional Polysomnography; sleep staging with 4 or more additional parameters of sleep, attended by a technologist		Polysom 6/> yrs 4/> param
95811	26		\$ 127.20	95811-PROF FEE Polysomnography; sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist		Polysom 6/>yrs cpap 4/> parm
95811			\$ 657.17	95811-TOTAL FEE Polysomnography; sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist		Polysom 6/>yrs cpap 4/> parm
95813			\$ 426.10	95813-TOTAL FEE Electroencephalogram (EEG) extended monitoring; greater than onehour		Eeg over 1 hour
95819	26	TEEG	\$ 54.38	95819-PROF FEE-Electroencephalogram (EEG); including recording awake and asleep	EEG, Electroencephalogram; Awake,Drowsy,& Asleep	Eeg awake and asleep
95819	TC	TEEG	\$ 329.04		EEG, Electroencephalogram; Awake,Drowsy,& Asleep	
95819		TEEG	\$ 383.42	95819-TOTAL FEE-Electroencephalogram (EEG); including recording awake and asleep	EEG, Electroencephalogram; Awake,Drowsy,& Asleep	Eeg awake and asleep
95851			\$ 18.09	95851-Range of motion measurements and report (separate procedure); each extremity (excluding hand) or each trunk section (spine)		Range of motion measurements
95860	26	TEMG1	\$ 49.60		Needle EMG; 1 Extremity w/ related paraspinal area	

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95860	TC	TEMG1	\$ 46.70		Needle EMG; 1 Extremity w/ related paraspinal area	
95860		TEMG1	\$ 96.30	95860-TOTAL FEE-Needle electromyography; one extremity with or without related paraspinal area	Needle EMG; 1 Extremity w/ related paraspinal area	Muscle test one limb
95861	26	TEMG2	\$ 79.02		Needle EMG; 2 Limbs & related paraspinal areas	
95861	26	TEMGL	\$ 79.02		EMG, Lower Extremities	
95861	26	TEMGU	\$ 79.02		EMG, Upper Extremities	
95861	TC	TEMG2	\$ 61.02		Needle EMG; 2 Limbs & related paraspinal areas	
95861	TC	TEMGL	\$ 61.02		EMG, Lower Extremities	
95861	TC	TEMGU	\$ 61.02		EMG, Upper Extremities	
95861		TEMG2	\$ 140.04		Needle EMG; 2 Limbs & related paraspinal areas	
95861		TEMGL	\$ 140.04		EMG, Lower Extremities	
95861		TEMGU	\$ 140.04		EMG, Upper Extremities	
95863	26	TEMG3	\$ 95.41		Needle EMG; 3 Limbs & related paraspinal areas	
95863	TC	TEMG3	\$ 73.98		Needle EMG; 3 Limbs & related paraspinal areas	
95863		TEMG3	\$ 169.39		Needle EMG; 3 Limbs & related paraspinal areas	
95864	26	TEMG4	\$ 101.58		Needle EMG; 4 Limbs & related paraspinal areas	
95864	TC	TEMG4	\$ 81.83		Needle EMG; 4 Limbs & related paraspinal areas	
95864		TEMG4	\$ 183.41		Needle EMG; 4 Limbs & related paraspinal areas	
95873			\$ 66.88	95873-TOTAL FEE Electrical stimulation for guidance in conjunction with chemodenervation (List separately in addition to code for primary procedure)		Guide nerv destr elec stim
95874	26		\$ 19.16	95874-PROF FEE Needle electromyography for guidance in conjunction with chemodenervation (List separately in addition to code for primary procedure)		Guide nerv destr needle emg

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95874			\$ 63.47	95874-TOTAL FEE Needle electromyography for guidance in conjunction with chemodenervation (List separately in addition to code for primary procedure)		Guide nerv destr needle emg
95886			\$ 87.76	95886-TOTAL FEE Needle electromyography, each extremity, with related paraspinal areas, when performed, done with nerve conduction, amplitude and latency/velocity study; complete, five or more muscles studied, innervated by three or more nerves or four or		Musc test done w/n test comp
95900		TNCS4	\$ 258.04		Nerve conduction test (motor) - 4 nerves	
95900		TNCS3	\$ 193.53		Nerve conduction test (motor) - 3 nerves	
95900	TC	TNCS4	\$ 171.80		Nerve conduction test (motor) - 4 nerves	
95900		TNCS2	\$ 129.02		Nerve conduction test (motor) - 2 nerves	
95900	TC	TNCS3	\$ 128.85		Nerve conduction test (motor) - 3 nerves	
95900	26	TNCS4	\$ 86.24		Nerve conduction test (motor) - 4 nerves	
95900	TC	TNCS2	\$ 85.90		Nerve conduction test (motor) - 2 nerves	
95900	26	TNCS3	\$ 64.68		Nerve conduction test (motor) - 3 nerves	
95900		TNCS	\$ 64.51	95900-TOTAL FEE Nerve conduction, amplitude and latency/velocity study, each nerve; motor, without F-wave study.	Nerve conduction test (motor) - each nerve	
95900		TNCSM	\$ 64.51		Nerve conduction test (motor) - with EMG	
95900	26	TNCS2	\$ 43.12		Nerve conduction test (motor) - 2 nerves	
95900	TC	TNCS	\$ 42.95		Nerve conduction test (motor) - each nerve	

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95900	TC	TNCSM	\$ 42.95		Nerve conduction test (motor) - with EMG	
95900	26	TNCS	\$ 21.56		Nerve conduction test (motor) - each nerve	
95900	26	TNCSM	\$ 21.56		Nerve conduction test (motor) - with EMG	
95903			\$ 75.41	95903-TOTAL FEE Nerve conduction, amplitude and latency/velocity study, each nerve, any/all site(s) along the nerve motor, with F-wave study		
95904		TNCSS	\$ 56.98	95904-TOTAL FEE-Nerve conduction, amplitude and latency/velocity study, each nerve; sensory	Nerve conduction study, sensory (with EMG)	
95904	TC	TNCSS	\$ 39.54		Nerve conduction study, sensory (with EMG)	
95904	26	TNCSS	\$ 17.44		Nerve conduction study, sensory (with EMG)	
95908	TC		\$ 51.74	95908-TECH Fee Nerve conduction studies; 3-4 studies		Nrv condj tst 3-4 studies
95910			\$ 184.59	95910-TOTAL FEE Nerve conduction studies; 7-8 studies		Nrv condj test 7-8 studies
95911			\$ 223.49	95911-TOTAL FEE Nerve conduction studies; 9-10 studies		Nrv condj test 9-10 studies
95913	26		\$ 185.35	95913-PROF Fee Nerve conduction studies; 13 or more studies		Nrv condj test 13/> studies
95930	26	TVER	\$ 17.79		Visually evoked potential test (per eye)	
95930	TC	TVER	\$ 133.67		Visually evoked potential test (per eye)	
95930		TVER	\$ 151.46	95930-TOTAL FEE Visual evoked potential (VEP) testing central nervous system, checkerboard or flash	Visually evoked potential test (per eye)	Visual evoked potential test
95956			\$ 1,181.42	95956-TOTAL FEE-Monitoring for localization of cerebral seizure focus by cable or radio, 16 or more channel telemetry, electroencephalographic (EEG) recording and interpretation, each 24 hours		Eeg monitor technol attended
95957			\$ 318.93	95957-TOTAL FEE-Digital analysis of electroencephalogram (EEG) (eg, for epileptic spike analysis)		Eeg digital analysis

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95978			\$ 231.39	95978-Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, battery status, electrode select6ability and polarity, impedance and patient compliance measurements), complex deep brainneurostimulator		Analyze neurostim brain/1h
95979			\$ 100.28	95979-Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, battery status, electrode select6ability and polarity, impedance and patient compliance measurements), complex deep brainneurostimulator		Analyz neurostim brain addon
96372			\$ 24.23	96372-Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular		Ther/proph/diag inj sc/im
97001			\$ 75.44	97001-Physical therapy evaluation (Home Health)		Pt evaluation
97002			\$ 42.19	97002-Physical therapy re-evaluation (Home Health)		Pt re-evaluation
97003			\$ 85.45	97003-Occupational therapy evaluation (Home Health)		Ot evaluation
97004			\$ 52.92	97004-Occupational therapy re-evaluation		Ot re-evaluation
97010			\$ 6.08	97010-Application of a modality to one or more areas; hot or cold packs		Hot or cold packs therapy
97014			\$ 16.09	97014-Application of a modality to one or more areas; electrical stimulation (unattended)		Electric stimulation therapy
97016			\$ 19.31	97016-Application of a modality to one or more areas; vasopneumatic devices		Vasopneumatic device therapy
97032			\$ 18.45	97032-Application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes		Electrical stimulation

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97110			\$ 32.54	97110-Therapeutic procedure, one or more areas, each 15 minutes; (Home Health)		Therapeutic exercises
97112			\$ 33.61	97112-Therapeutic procedure, one or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities		Neuromuscular reeducation
97113			\$ 43.26	97113-Therapeutic procedure, one or more areas, each 15 minutes; aquatic therapywith therapeuic exercises		Aquatic therapy/exercises
97116			\$ 28.60	97116-Therapeutic procedure, one or more areas, each 15 minutes; gait training (includes stair climbing)		Gait training therapy
97140			\$ 30.03	97140-Manual therapy techniques (eg, mobilization/manipulation, manual lymphaticdrainage, manual traction), one or more regions, each 15 minutes		Manual therapy 1/> regions
97150	PT		\$ 17.52	97150-Therapeutic procedure(s), group (2 or more individuals)		Group therapeutic procedures
97150	OT		\$ 17.52	97150-Therapeutic procedure(s), group (2 or more individuals)		Group therapeutic procedures
97530			\$ 35.04	97530-Therapeutic activites, direct (one on one), each 15 minutes (Home Health)		Therapeutic activities
97532			\$ 25.66	97532-Development of cognitive skills to improve attention, memory, problem solving, (including compensatory training), direct (one-on-one) patient contact by the provider, each 15 minutes		Cognitive skills development

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97535			\$ 35.04	97535-Self-care/home management training (eg, activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one on one contact by provider		Self care mngment training
97537			\$ 30.39	97537-Community/work reintegration training (eg, shopping, transportation, moneymangement, avocational activities and/or work environment/modification analysis, work task analysis), use of assistive technology device/adaptive equipment, direct one on one		Community/work reintegration
97597			\$ 75.36	97597-Removal of devitalized tissue from wound(s), selective debridement, without anesthesia (eg, high pressure waterjet with/without suction, sharp selective debridement with scissors, scalpel and forceps), with or without topical application(s), wound a		Rmvl devital tis 20 cm/<
97606			\$ 43.53	97606-Negative pressure wound therapy (eg, vacuum assisted drainage collection),including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area greater than 50 square centimeter		Neg press wound tx >50 cm
97750			\$ 33.25	97750-Physical performance test or measurement (eg: musculoskeletal, functional capacity) with written report, each 15 minutes		Physical performance test
97760			\$ 38.26	97760-Orthotic(s) management and training (including assessment and fitting whennot otherwise reported), upper extremity(s), lower extremity(s) and/or trunk, e ach 15 minutes		Orthotic mgmt and training

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97799			\$ 94.48	97799-Unlisted physical medicine/rehabilitation service (Home Health)		Physical medicine procedure
99000		TLABF	\$ 4.00		Lab Handling Fee	
99000	TC	TLABF	\$ 4.00		Lab Handling Fee	
99001			\$ 40.25	99001-Handling and/or conveyance of specimen for transfer from the patient in other than a physician's office to a lab (distance may be indicated)		Specimen handling pt-lab
99075		EINTE	\$ 75.00		U80 - Interrogatories - Medical Testimony	
99075	26	EINTE	\$ 75.00		U80 - Interrogatories - Medical Testimony	
99144			\$ 38.87	99144-Moderate sedation services (other than those services described by codes 00100-01999) provided by the same physician performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observ		Mod sedat phys/qhp 5yrs/>
99199			\$ 18.00	99199-Medical Records or Medical Records Research (charge for records received or research/clerical charge with no records located.)		Special service/proc/report
99202			\$ 72.68	99202-PHYSICIAN Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: an expanded problem focused history, an expanded problem focused examination, and straightforward medical decis		Office/outpatient visit new

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99203			\$ 105.35	99203-PHYSICIAN Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a detailed history, a detailed examination, and medical decision making of low complexity. Counseling and/or co		Office/outpatient visit new
99204			\$ 160.94	99204-PHYSICIAN Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a comprehensive history, a comprehensive examination, and medical decision making of moderate complexity. Couns		Office/outpatient visit new
99205			\$ 199.89	99205-PHYSICIAN Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a comprehensive history, a comprehensive examination, and medical decision making of high complexity. Counseling		Office/outpatient visit new
99211		EOFVI	\$ 19.80		Minimal Office Service for Disability Evaluation	
99211	26	EOFVI	\$ 19.80		Minimal Office Service for Disability Evaluation	
99212			\$ 42.64	99212-PHYSICIAN Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these key components: a problem focused history, a problem focused examination, straightforward medical decision m		Office/outpatient visit est

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99213			\$ 1.00	99213-PHYSICIAN Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three components: an expanded problem focused history, an expanded problem focused examination, medical deci		Office/outpatient visit est
99214			\$ 104.45	99214-PHYSICIAN Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three components: a detailed history, a detailed examination, medical decision making of moderate complexity		Office/outpatient visit est
99215			\$ 140.30	99215-PHYSICIAN Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three components: a comprehensive history, a comprehensive examination, medical decision making of high comp		Office/outpatient visit est
99221			\$ 98.54	99221-Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components: a detailed or comprehensive history, a detailed or comprehensive examination, and medical decision making that is straightforwa		Initial hospital care
99222			\$ 133.38	99222-Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components: a comprehensive history, a comprehensive examination, and medical decision making of moderate complexity. Counseling and/or co		Initial hospital care

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99223			\$ 195.91	99223-Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components: a comprehensive history, a comprehensive examination, and medical decision making of high complexity. Counseling and/or coordi		Initial hospital care
99231			\$ 38.24	99231-Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components: a problem focused interval history; a problem focused examination; medical decision making that is straight		Subsequent hospital care
99232			\$ 70.03	99232-Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components: an expandedproblem focused interval history, an expanded problem focused examination, medical decision mak		Subsequent hospital care
99233			\$ 100.42	99233-Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components: a detailed history, a detailed examination, medical decision making of high complexity. Counseling and/or c		Subsequent hospital care
99238			\$ 70.03	99238-Hospital discharge day management; 30 minutes or less		Hospital discharge day
99239			\$ 103.50	99239-Hospital discharge day management; more than 30 minutes		Hospital discharge day

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99241		TBGSE	\$ 49.35	99241-Office consultation for a new or established patient, which requires these three key components: a problem focused history, a problem focused examination, and straightforward medical decision making. Counseling and/or coordination of care with other		Office consultation
99241		TDOLA	\$ 49.35			
99241		TETTB	\$ 49.35			
99241		TTHAL	\$ 49.35			
99241	26	TBGSE	\$ 49.35			
99241	26	TDOLA	\$ 49.35			
99241	26	TETTB	\$ 49.35			
99241	26	TTHAL	\$ 49.35			
99242			\$ 91.89	99242-Office consultation for a new or established patient, which requires these three key components: an expanded problem focused history, an expanded focused examination, and straightforward medical decision making. Counseling and/or coordination of care		Office consultation
99243			\$ 125.50	99243-Office consultation for a new or established patient, which requires these three key components: a detailed history, a detailed examination, and medical decision making of low complexity. Counseling and/or coordination of care with other providers or		Office consultation
99244			\$ 185.57	99244-Office consultation for a new or established patient, which requires these three components: a comprehensive history, a comprehensive examination, and medical decision making of moderate complexity. Counseling and/or coordination of care with other pr		Office consultation

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99245			\$ 227.04	99245-Office consultation for a new or established patient, which requires these three key components: a comprehensive history, a comprehensive examination, and medical decision making of high complexity. Counseling and/or coordination of care with other		Office consultation
99251			\$ 49.70	99251-Inpatient consultation for a new or established patient, which requires three key components: a problem focused history, a problem focused examination, and straightforward medical decision making. Counseling and/or coordination of care with other pr		Inpatient consultation
99252			\$ 73.10	99252-Inpatient consultation for a new or established patient, which requires these three key components: an expanded problem focused history, an expanded problem focused examination, and straightforward medical decision making. Counseling and/or coordina		Inpatient consultation
99253			\$ 116.20	99253-Inpatient consultation for a new or established patient, which requires these three key components: a detailed history, a detailed examination, and medical decision making of low complexity. Counseling and/or coordination of care with other provider		Inpatient consultation

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99254			\$ 167.69	99254-Inpatient consultation for a new or established patient, which requires these three key components: a comprehensive history, a comprehensive examination, and medical decision making of moderate complexity. Counseling and/or coordination of care with		Inpatient consultation
99255			\$ 202.73	99255-Inpatient consultation for a new or established patient, which require these three key components: a comprehensive history, a comprehensive examination, and medical decision making of high complexity. Counseling and/or coordination of care with othe		Inpatient consultation
99291			\$ 267.89	99291-Critical care, evaluation and management of the critically ill or unstablecritically injured patient, requiring the constant attendance of the physician; first hour		Critical care first hour
99354			\$ 96.64	99354-Prolonged service in the office or other outpatient setting requiring direct patient contact beyond the usual service; first hour (List separately in addition to code for office or other outpatient Evaluation and Management service)		Prolonged service office
99356			\$ 88.79	99356-Prolonged service in the inpatient or observation setting, requiring unit/floor time beyond the usual service: first hour (List separately in addition to code for inpatient evaluation and management service)		Prolonged service inpatient
99456		EPLDF	\$ 830.86		U80 Neuropsychological Examination, Full battery, for Disability Evaluation	
99456		EPLD	\$ 575.06		U80 Neuropsychological Examination for Disability Evaluation	

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99456		EPFB	\$ 461.07		Psychological Examination, Full Battery, with IQ & MSE for Disability Evaluation	
99456		EPIQM	\$ 317.38		Psychological Examination w/ IQ and Mental Status for Disability Evaluation	
99456		ECARD	\$ 199.89		Cardiology Examination for Disability Evaluation	
99456		EDERM	\$ 199.89		Dermatology Examination for Disability Evaluation	
99456		EGAST	\$ 199.89		Gastroenterology Examination for Disability Evaluation	
99456		EINME	\$ 199.89		Internal Medicine Examination for Disability Evaluation	
99456		ENEPH	\$ 199.89		Nephrology Examination for Disability Evaluation	
99456		ENESU	\$ 199.89		Neurosurgical Examination for Disability Evaluation	
99456		ENEUR	\$ 199.89		Neurology Examination for Disability Evaluation	
99456		ENPSY	\$ 199.89		U80 - Neuro-psychiatry Examination for Disability Evaluation	
99456		EORTH	\$ 199.89		Orthopedic Examination for Disability Evaluation	
99456		EPEDI	\$ 199.89		Pediatric Examination for Disability Evaluation	
99456		EPHME	\$ 199.89		Physical Medicine Examination for Disability Evaluation	
99456		ERHEU	\$ 199.89		Rheumatology Examination for Disability Evaluation	
99456		EUROL	\$ 199.89		Urological Examination for Disability Evaluation	
99456		EPIQ	\$ 164.22		Psychological Examination w/ IQ only for Disability Evaluation	
99456		EPSOS	\$ 153.16		Psycho-Social Survey for Disability Evaluation	
99456		EOPHT	\$ 147.72		Vision Examination for Disability Evaluation	
99456		ECPD	\$ 72.68		Limited Consultation for Chest Pain Description/Disability Evaluation	

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99456		EGEME	\$ 72.68		General Medicine Examination (Basic) for Disability Evaluation	
99456		EOTOL	\$ 72.68		Otology Examination (Basic) for Disability Evaluation	
99456	26	EPLDF	\$ 830.86		U80 Neuropsychological Examination, Full battery, for Disability Evaluation	
99456	26	EPLD	\$ 575.06		U80 Neuropsychological Examination for Disability Evaluation	
99456	26	EPFB	\$ 461.07		Psychological Examination, Full Battery, with IQ & MSE for Disability Evaluation	
99456	26	EPIQM	\$ 317.38		Psychological Examination w/ IQ and Mental Status for Disability Evaluation	
99456	26	ECARD	\$ 199.89		Cardiology Examination for Disability Evaluation	
99456	26	EDERM	\$ 199.89		Dermatology Examination for Disability Evaluation	
99456	26	EGAST	\$ 199.89		Gastroenterology Examination for Disability Evaluation	
99456	26	EINME	\$ 199.89		Internal Medicine Examination for Disability Evaluation	
99456	26	ENEPH	\$ 199.89		Nephrology Examination for Disability Evaluation	
99456	26	ENESU	\$ 199.89		Neurosurgical Examination for Disability Evaluation	
99456	26	ENEUR	\$ 199.89		Neurology Examination for Disability Evaluation	
99456	26	ENPSY	\$ 199.89		U80 - Neuro-psychiatry Examination for Disability Evaluation	
99456	26	EORTH	\$ 199.89		Orthopedic Examination for Disability Evaluation	
99456	26	EPEDI	\$ 199.89		Pediatric Examination for Disability Evaluation	
99456	26	EPHME	\$ 199.89		Physical Medicine Examination for Disability Evaluation	
99456	26	ERHEU	\$ 199.89		Rheumatology Examination for Disability Evaluation	
99456	26	EUROL	\$ 199.89		Urological Examination for Disability Evaluation	

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99456	26	EPIQ	\$ 164.22		Psychological Examination w/ IQ only for Disability Evaluation	
99456	26	EPSOS	\$ 153.16		Psycho-Social Survey for Disability Evaluation	
99456	26	EOPHT	\$ 147.72		Vision Examination for Disability Evaluation	
99456	26	ECPD	\$ 72.68		Limited Consultation for Chest Pain Description/Disability Evaluation	
99456	26	EGEME	\$ 72.68		General Medicine Examination (Basic) for Disability Evaluation	
99456	26	EOTOL	\$ 72.68		Otology Examination (Basic) for Disability Evaluation	
99499			\$ 298.00	99499-Unlisted evaluation and management service		Unlisted e&m service
**76499		XSPOA	\$ 36.80		Spine, 1 most involved area, AP & L, 2 views	
**76499		XSTMP	\$ 28.34		Stump, AP & L, 2 views	
**76499		XALOA	\$ 28.29		Arm, left, 1 most inv area, AP&L, 2 views	
**76499		XAROA	\$ 28.29		Arm, right, 1 most inv area, AP&L, 2 views	
**76499		XLLOA	\$ 28.29		Leg, left, 1 most involved area, AP & L, 2 views	
**76499		XLROA	\$ 28.29		Leg, right, 1 most involved area, AP & L, 2 views	
**76499		XJTAR	\$ 28.18		Joint, 1 most involved, arthritic, AP & L, 2 views	
**76499		XJTMJ	\$ 28.18		Joint, 1 most involved, major, AP & L, 2 views	
**76499		XJTWB	\$ 28.18		Joint, 1 most involved, weight bearing, AP & L, 2 views	
**76499	TC	XALOA	\$ 20.44		Arm, left, 1 most inv area, AP&L, 2 views	
**76499	TC	XAROA	\$ 20.44		Arm, right, 1 most inv area, AP&L, 2 views	
**76499	TC	XJTAR	\$ 19.93		Joint, 1 most involved, arthritic, AP & L, 2 views	
**76499	TC	XJTMJ	\$ 19.93		Joint, 1 most involved, major, AP & L, 2 views	

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**76499	TC	XJTWB	\$ 19.93		Joint, 1 most involved, weight bearing, AP & L, 2 views	
**76499	TC	XSPOA	\$ 19.93		Spine, 1 most involved area, AP & L, 2 views	
**76499	TC	XLLOA	\$ 19.75		Leg, left, 1 most involved area, AP & L, 2 views	
**76499	TC	XLROA	\$ 19.75		Leg, right, 1 most involved area, AP & L, 2 views	
**76499	TC	XSTMP	\$ 18.99		Stump, AP & L, 2 views	
**76499	26	XSTMP	\$ 9.35		Stump, AP & L, 2 views	
**76499	26	XLLOA	\$ 8.54		Leg, left, 1 most involved area, AP & L, 2 views	
**76499	26	XLROA	\$ 8.54		Leg, right, 1 most involved area, AP & L, 2 views	
**76499	26	XJTAR	\$ 8.25		Joint, 1 most involved, arthritic, AP & L, 2 views	
**76499	26	XJTMJ	\$ 8.25		Joint, 1 most involved, major, AP & L, 2 views	
**76499	26	XJTWB	\$ 8.25		Joint, 1 most involved, weight bearing, AP & L, 2 views	
**76499	26	XSPOA	\$ 8.25		Spine, 1 most involved area, AP & L, 2 views	
**76499	26	XALOA	\$ 7.85		Arm, left, 1 most inv area, AP&L, 2 views	
**76499	26	XAROA	\$ 7.85		Arm, right, 1 most inv area, AP&L, 2 views	
*00004		TROE	\$ 45.00		Review of Exhibits	
*00004	26	TROE	\$ 45.00		Review of Exhibits	
*00004		TROEM	\$ 45.00		Review of Exhibits/Completion of Med. Assmt. Form	
*00004	26	TROEM	\$ 45.00		Review of Exhibits/Completion of Med. Assmt. Form	
A0431			\$ 8,884.00	A0431-Medical Transportation Services - Ambulance service, conventional air services, transport, one way (rotary wing)		Rotary wing air transport
A4209			\$ 0.50	A4209-Syringe with needle, sterile 5 cc or greater		5+ cc sterile syringe&needle
A4215			\$ 35.00	A4215-needles only, sterile, any size		Sterile needle

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A4550			\$150.00	A4550-Surgical Tray		Surgical trays
A4930			\$ 3.00	A4930--Gloves, sterile, per pair		Sterile, gloves per pair
A9577			\$ 2.18	A9577-Injection, gadobenate dimeglumine (MultiHance), per ml		Inj multihance
A9579			\$ 1.91	A9579-Injection, gadolinium - based magnetic resonance contrast agent, not otherwise specified (NOS), per ml		Gad-base mr contrast nos,1ml
AAAAA		TBGSE	\$ 297.40		Blood Gas Studies, resting and exercise	
AAAAA	TC	TBGSE	\$ 210.75		Blood Gas Studies, resting and exercise	
AAAAA	26	TBGSE	\$ 86.65		Blood Gas Studies, resting and exercise	
ANEST			\$ 12.50	CRNA supervised by a physician anesthesiologist and billing in addition to physician anesthesiologist supervision charges. Basic unit value points PLUS 1 point per 15 minute time period at \$12.50 per point. (QX Modifier)		
ANEST			\$ 25.00	Physician anesthesiologist directly supervising four or fewer CRNAs, immediately available for assistance, and billing for supervision charges only. Basic unit value points PLUS 1 point per 30-minute time period at \$25 per point. (QK Modifier)		
ANEST			\$ 25.00	Physician anesthesiologist performing direct, one-on-one anesthesia care. Basic unit value points PLUS 1 point per 15 minute time period at \$25 per point. (AA Modifier)		
BBBBB		TDOLA	\$ 379.02		LE Dopplers w/ABI; with exercise	
BBBBB	TC	TDOLA	\$ 267.46		LE Dopplers w/ABI; with exercise	
BBBBB	26	TDOLA	\$ 111.56		LE Dopplers w/ABI; with exercise	
CCCCC		TENG	\$ 178.13		ENG, per position minimum 4 positions with recording	
CCCCC	26	TENG	\$ 100.15		ENG, per position minimum 4 positions with recording	
CCCCC	TC	TENG	\$ 77.98		ENG, per position minimum 4 positions with recording	

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D0140			\$ 22.99	D0140-Limited oral evaluation - problem focused		Limit oral eval problm focus
D0150			\$ 43.25	D0150-Comprehensive Oral Evaluation-new or established patient		Comprehensve oral evaluation
D0220			\$ 15.38	D0220-Intraoral periapical - single, first film		Intraoral periapical first
D0230			\$ 10.00	D0230-Intraoral - periapical, each addition film (up to 18)		Intraoral periapical ea add
D0270			\$ 6.00	D0270-Bitewings - single film		Dental bitewing single image
D0272			\$ 28.63	D0272-Bitewings - two films		Dental bitewings two images
D0274			\$ 42.38	D0274-Bitewings - four films		Bitewings four images
D0330			\$ 78.10	D0330-Panoramic - maxilla and mandible, single film		Panoramic image
D6241			\$ 500.00	D6241-Pontic - porcelain fused to predominantly base metal		Bridge porcelain base metal
D6751			\$ 500.00	D6751-Crown - porcelain fused to predominantly base metal		Crown porcelain base metal
D7140			\$ 80.45	D7140-Extraction, erupted tooth or exposed root (elevation and/or forceps removal). Includes routine removal of tooth structure and closure, as necessary.		Extraction erupted tooth/exr
D9230			\$ 34.06	D9230-Analgesia		Analgesia
D9241			\$ 146.26	D9241-Intravenous conscious sedation/analgesia - first 30 minutes		Intravenous sedation
D9242			\$ 34.82	D9242-Intravenous conscious sedation/analgesia - each additional 15 minutes		Iv sedation ea ad 15 m
D9610			\$ 22.50	D9610-Therapeutic drug injection, by report		Dent therapeutic drug inject
DDDDD		TETTB	\$ 226.89		ETT, Cardiovascular Stress Test w/ interpretations and tracings	
DDDDD	TC	TETTB	\$ 140.24		ETT, Cardiovascular Stress Test w/ interpretations and tracings	
DDDDD	26	TETTB	\$ 86.65		ETT, Cardiovascular Stress Test w/ interpretations and tracings	

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DRS15			\$ 287.39	DRS15-General Diagnostic Battery: Diagnostic interview and history (see DRS02), Full Scale Intelligence Test (see DRS03), Projective Personality Test (see DRS08) OR Objective Personality Test (see DRS09), Standardized Academic Achievement Test (see DRS06)		
DRS16			\$ 513.48	DRS16-Neuropsychological Battery (DOES NOT include General Diagnostic Battery) NOTE: This battery is to be obtained from a licensed psychologist with specific training and experience in administration and interpretation of neuropsychological testing. The		
DRS16			\$ 836.39	DRS16-Neuropsychological Battery (INCLUDES General Diagnostic Battery) NOTE: This battery is to be obtained from a licensed psychologist with specific training and experience in administration and interpretation of neuropsychological testing. The State or		
DRS18			\$ 86.57	DRS18-Individual psychological counseling - per hour.		
DRS25			\$50.00	DRS25-Licensed Professional Counselor (LPC), individual counseling, per hour. Must be recommended by psychologist/psychiatrist.		
DRS27			\$ 50.00	DRS27-Marriage & Family Therapist (LMFT), individual counseling, per hour		
DRS50			\$ 29.07	DRS50-PT/OT/PE - Home Modification Assessment - Unit of 15 minutes (Time is based on portal to portal service.)		
EEEE		TTHAL	\$ 891.46		Myocardial perfusion/ETT	
EEEE	TC	TTHAL	\$ 727.82		Myocardial perfusion/ETT	
EEEE	26	TTHAL	\$ 163.64		Myocardial perfusion/ETT	
J0475			\$ 164.08	J0475-Injection, baclofen, 10 mg (Lioresal)		Baclofen 10 mg injection

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J0585			\$ 5.38	J0585-Injection, onabotulinumtoxinA, 1 unit		Injection,onabotulinumtoxinA
J0586			\$ 7.29	J0586-Injection, abobotulinumtoxinA, 5 units		AbobotulinumtoxinA
J0702			\$ 5.53	J0702-Injection, betamethasone acetate 3 mg and betamethasone sodium phosphate 3 mg		Betamethasone acet&sod phosp
J1100			\$ 0.11	J1100-Injection, dexamethasone sodium phosphate, 1 mg		Dexamethasone sodium phos
J2250			\$ 0.12	J2250-Injection, midazolam hydrochloride, per 1 mg		Inj midazolam hydrochloride
J3010			\$ 0.35	J3010-Injection, fentanyl citrate, 0.1 mg		Fentanyl citrate injeciton
J3301			\$ 1.69	J3301-Injection, triamcinolone acetonide, not otherwise specified, 10 mg		Triamcinolone acet inj nos
J7040			\$ 0.57	J7040-Infusion, normal saline solution, sterile (500ml = 1 unit)		Normal saline solution infus