

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
80047	12.50	3.15	9.35
80048	8.00	2.00	6.00
80051	6.50	1.62	4.88
80053	10.00	2.50	7.50
80055	45.23	11.31	33.92
80061	9.50	2.50	7.00
80069	8.00	2.00	6.00
80074	46.00	11.50	34.50
80076	7.50	1.88	5.62
80081	45.23	11.31	33.92
80150	15.50	3.50	12.00
80155	4.00	1.00	3.00
80156	15.00	3.50	11.50
80157	9.50	2.38	7.12
80158	15.50	3.50	12.00
80159	14.00	3.50	10.50
80162	14.00	3.50	10.50
80163	14.00	3.50	10.50
80164	14.00	3.50	10.50
80165	14.00	3.50	10.50
80168	15.50	3.50	12.00
80169	13.50	3.50	10.50
80170	16.50	4.00	12.50
80171	11.00	2.50	8.50
80173	14.00	3.50	10.50
80175	11.00	2.50	8.50
80176	10.50	2.50	8.00
80177	14.00	3.50	10.50
80178	7.00	1.50	5.50
80180	15.50	3.50	12.00
80183	11.00	2.50	8.50
80184	11.00	2.50	8.50
80185	13.50	3.00	10.50
80186	14.00	3.50	10.50
80188	15.00	3.50	11.50
80190	16.50	4.00	12.50
80192	16.50	4.00	12.50
80194	14.50	3.50	11.00
80195	13.42	3.35	10.07
80197	16.00	4.00	12.00
80198	14.50	3.50	11.00
80199	11.00	2.50	8.50
80200	16.00	4.00	12.00
80201	14.00	3.50	10.50
80202	14.00	3.50	10.50

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Procedure	FS	PC	TC
80203	11.00	2.50	8.50
80299	14.00	3.50	10.50
80300	14.88	3.72	11.16
80301	10.00	2.50	7.50
80302	15.50	3.50	12.00
80303	10.50	2.50	8.00
80304	16.50	4.13	12.37
80320	12.00	3.00	9.00
80321	12.00	3.00	9.00
80322	12.00	3.00	9.00
80323	16.50	4.12	12.37
80324	15.50	3.50	12.00
80325	15.50	3.50	12.00
80326	15.50	3.50	12.00
80327	26.50	6.50	20.00
80328	26.50	6.50	20.00
80329	12.50	3.00	9.50
80330	12.50	3.00	9.50
80331	12.50	3.00	9.50
80332	16.50	4.12	12.37
80333	16.50	4.12	12.37
80334	16.50	4.12	12.37
80335	18.00	4.50	13.50
80336	18.00	4.50	13.50
80337	18.00	4.50	13.50
80338	16.50	4.12	12.37
80339	15.00	3.50	11.50
80340	15.00	3.50	11.50
80341	15.00	3.50	11.50
80342	14.00	3.50	10.50
80343	14.00	3.50	10.50
80344	14.00	3.50	10.50
80345	12.00	3.00	9.00
80346	18.50	4.50	14.00
80347	18.50	4.50	14.00
80348	17.00	4.00	13.00
80349	16.50	4.13	12.37
80350	16.50	4.13	12.37
80351	16.50	4.13	12.37
80352	16.50	4.13	12.37
80353	15.50	3.50	12.00
80354	17.00	4.00	13.00
80356	17.00	4.00	13.00
80357	16.50	4.13	12.37
80358	16.50	4.00	12.50

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Procedure	FS	PC	TC
80359	15.50	3.50	12.00
80360	16.50	4.13	12.37
80361	17.00	4.00	13.00
80362	17.00	4.00	13.00
80363	17.00	4.00	13.00
80364	17.00	4.00	13.00
80365	17.00	4.00	13.00
80366	16.50	4.12	12.37
80367	17.00	4.00	13.00
80368	16.50	4.12	12.37
80369	16.50	4.12	12.37
80370	16.50	4.12	12.37
80371	16.50	4.12	12.37
80372	17.00	4.00	13.00
80373	17.00	4.00	13.00
80374	16.50	4.12	12.37
80375	16.50	4.12	12.37
80376	16.50	4.12	12.37
80377	17.00	4.00	13.00
80400	33.00	8.00	25.00
80402	84.50	21.00	63.50
80406	91.50	22.88	68.62
80408	133.00	33.00	100.00
80410	94.00	23.50	70.50
80412	341.50	85.00	256.50
80414	53.50	13.00	40.50
80415	57.50	14.00	43.50
80416	136.80	34.20	102.60
80417	45.60	11.40	34.20
80418	580.50	145.00	435.50
80420	72.50	18.00	54.50
80422	47.50	11.50	36.00
80424	43.50	10.50	33.00
80426	150.50	37.50	113.00
80428	70.00	17.50	52.50
80430	82.00	20.50	61.50
80432	128.00	32.00	96.00
80434	102.50	25.50	77.00
80435	107.00	26.50	80.50
80436	87.50	21.50	66.00
80438	52.00	13.00	39.00
80439	78.50	19.63	58.87
80502	36.35	27.19	9.16
81000	3.00	0.50	2.50
81001	3.27	1.00	2.27

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
81002	2.00	0.50	1.50
81003	2.50	0.50	2.00
81005	2.00	0.50	1.50
81007	1.50		1.50
81015	2.00	0.50	1.50
81025	6.50	1.50	5.00
81050	3.00	0.50	2.50
81162	1,490.02	372.51	1,117.52
81170	329.18	82.30	246.89
81200	83.20		
81201	92.25		
81202	53.50		
81203	92.25		
81205	111.02		
81206	17.78		
81207	17.78		
81208	92.25		
81209	29.31		
81210	27.48		
81211	1,438.14	359.54	1,078.61
81212	176.70	44.18	132.53
81213	582.72	145.68	437.04
81214	1,438.14	359.54	1,078.61
81215	93.24	23.31	69.93
81216	93.24	23.31	69.93
81217	93.24	23.31	69.93
81218	329.18	82.30	246.89
81220	748.11		
81221	35.96		
81222	57.96		
81223	796.33		
81224	61.94		
81225	105.92		
81226	37.50		
81227	37.50		
81228	92.25		
81229	281.65		
81235	81.14		
81240	16.36		
81241	16.36		
81242	61.54		
81243	33.75		
81244	74.48		
81245	49.15		
81246	49.15		

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
81250	87.08		
81251	92.25		
81252	92.25		
81253	45.86		
81254	25.93		
81255	84.51		
81256	25.36		
81257	135.37		
81260	67.50		
81261	96.48		
81262	24.37		
81263	92.25		
81264	83.99		
81265	92.25		
81266	92.25		
81267	92.25		
81268	92.25		
81270	38.52		
81272	330.18	82.55	247.64
81275	55.03		
81276	196.99	49.25	147.74
81280	92.25		
81281	92.25		
81282	92.25		
81290	71.77		
81291	19.96		
81292	487.50		
81293	37.50		
81294	264.60		
81295	487.50		
81296	51.96		
81297	264.60		
81298	463.21		
81299	37.50		
81300	37.50		
81301	176.25		
81302	92.25		
81303	92.25		
81304	29.84		
81310	27.51		
81313	37.50		
81314	81.14	20.29	60.86
81315	32.53		
81316	67.60		
81317	481.94		

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
81318	37.50		
81319	37.50		
81321	92.25		
81322	44.13		
81323	66.20		
81324	92.25		
81325	92.25		
81326	53.50		
81330	82.05		
81331	21.65		
81332	37.50		
81340	37.50		
81341	25.77		
81342	99.37		
81350	27.51		
81355	58.66		
81370	61.76		
81371	61.76		
81372	61.76		
81373	92.25		
81374	45.08		
81375	61.76		
81376	33.15		
81377	37.50		
81378	61.76		
81379	126.89		
81380	70.06		
81381	24.88		
81382	34.86		
81383	21.65		
81400	8.18		
81401	76.64		
81402	125.21		
81403	45.86		
81404	118.48		
81405	50.63		
81406	281.65		
81407	72.53		
81408	291.68		
81412	81.14	20.29	60.86
81420	481.64		
81432	795.95	198.99	596.96
81433	795.95	198.99	596.96
81434	795.95	198.99	596.96
81437	795.95	198.99	596.96

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Procedure	FS	PC	TC
81438	795.95	198.99	596.96
81442	795.95	198.99	596.96
81479	29.73		
81507	481.64		
81519	2,732.60		
81535	675.00	168.75	506.25
81536	36.02	9.01	27.02
81595	487.50	121.88	365.63
82009	3.50	0.50	3.00
82010	3.00	0.50	2.50
82013	11.50	2.50	9.00
82016	13.00	3.25	9.75
82017	4.50	1.13	3.37
82024	37.00	9.00	28.00
82030	9.00	2.00	7.00
82040	2.50	0.50	2.00
82042	1.00	0.50	0.50
82043	1.50	0.50	1.00
82044	1.50	0.50	1.00
82045	33.20	8.30	24.90
82085	9.50	2.00	7.50
82088	39.00	9.50	29.50
82103	13.00	3.00	10.00
82104	14.00	3.50	10.50
82105	15.50	3.50	12.00
82106	15.50	3.50	12.00
82107	62.99	15.75	47.24
82108	27.00	6.50	20.50
82127	13.00	3.25	9.75
82128	12.50	3.00	9.50
82131	5.00	1.00	4.00
82135	17.00	4.00	13.00
82136	4.50	1.13	3.37
82139	4.50	1.13	3.37
82140	12.50	3.00	9.50
82143	7.50	1.50	6.00
82150	6.00	1.50	4.50
82154	33.50	8.50	25.00
82157	27.00	6.50	20.50
82160	28.00	7.00	21.00
82163	18.50	4.50	14.00
82164	12.50	3.00	9.50
82172	11.00	2.50	8.50
82175	19.50	4.50	15.00
82180	10.00	2.50	7.50

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Procedure	FS	PC	TC
82190	11.00	2.50	8.50
82232	16.50	4.00	12.50
82239	15.50	3.50	12.00
82240	12.50	3.00	9.50
82247	4.50	1.13	3.37
82248	4.50	1.13	3.37
82252	1.00		1.00
82261	4.50	1.13	3.37
82270	2.00	0.50	1.50
82271	3.18	0.80	2.38
82272	3.18	0.80	2.38
82274	2.00	0.50	1.50
82286	5.50	1.00	4.50
82300	7.00	1.50	5.50
82306	30.00	7.50	22.50
82308	24.50	6.00	18.50
82310	4.50	1.00	3.50
82330	11.00	2.50	8.50
82340	6.00	1.50	4.50
82355	10.50	2.50	8.00
82360	6.00	1.50	4.50
82365	9.00	2.00	7.00
82370	10.50	2.50	8.00
82374	3.50	0.50	3.00
82375	9.00	2.00	7.00
82376	4.00	1.00	3.00
82378	19.50	4.50	15.00
82379	4.50	1.13	3.37
82380	9.50	2.00	7.50
82382	14.50	3.50	11.00
82383	25.50	6.00	19.50
82384	17.50	4.00	13.50
82387	14.50	3.50	11.00
82390	10.50	2.50	8.00
82397	16.50	4.13	12.37
82415	12.50	3.00	9.50
82435	4.50	1.00	3.50
82436	2.00	0.50	1.50
82438	4.00	1.00	3.00
82465	4.00	1.00	3.00
82480	7.50	1.50	6.00
82482	6.50	1.50	5.00
82485	10.50	2.50	8.00
82495	4.00	1.00	3.00
82507	28.00	7.00	21.00



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Procedure	FS	PC	TC
82523	18.00	4.50	13.50
82525	11.50	2.50	9.00
82528	22.50	5.50	17.00
82530	17.50	4.00	13.50
82533	16.50	4.00	12.50
82540	4.00	1.00	3.00
82542	16.50	4.13	12.37
82550	6.50	1.50	5.00
82552	12.50	3.00	9.50
82553	7.00	1.50	5.50
82554	7.00	1.50	5.50
82565	4.50	1.00	3.50
82570	5.00	1.00	4.00
82575	9.50	2.00	7.50
82585	8.50	2.00	6.50
82595	5.50	1.00	4.50
82600	19.00	4.50	14.50
82607	15.00	3.50	11.50
82608	15.00	3.50	11.50
82610	13.50	3.25	10.25
82615	6.00	1.50	4.50
82626	26.00	6.50	19.50
82627	26.00	6.50	19.50
82633	30.00	7.50	22.50
82634	30.00	7.50	22.50
82638	12.50	3.00	9.50
82652	1.00		
82657	16.50	4.13	12.37
82658	16.50	4.13	12.37
82664	12.50	3.00	9.50
82668	18.50	4.50	14.00
82670	26.00	6.50	19.50
82671	26.50	6.50	20.00
82672	22.00	5.50	16.50
82677	28.00	7.00	21.00
82679	26.50	6.50	20.00
82693	5.00	1.00	4.00
82696	25.50	6.00	19.50
82705	5.00	1.00	4.00
82710	11.50	2.50	9.00
82715	17.50	4.00	13.50
82725	6.00	1.50	4.50
82726	16.50	4.13	12.37
82728	14.00	3.50	10.50
82731	62.30	15.58	46.72

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Procedure	FS	PC	TC
82735	6.00	1.50	4.50
82746	15.00	3.50	11.50
82747	2.50	0.50	2.00
82757	9.00	2.00	7.00
82759	22.00	5.50	16.50
82760	3.50	0.50	3.00
82775	22.00	5.50	16.50
82776	8.00	2.00	6.00
82784	9.00	2.00	7.00
82785	16.00	4.00	12.00
82787	3.66	0.92	2.74
82800	2.00	0.50	1.50
82803	19.50	4.50	15.00
82805	28.50	7.00	21.50
82810	9.00	2.00	7.00
82820	11.50	2.88	8.62
82938	18.00	4.50	13.50
82941	17.50	4.00	13.50
82943	14.00	3.50	10.50
82945	3.50	0.88	2.62
82946	15.50	3.50	12.00
82947	3.50	0.50	3.00
82948	3.00	0.50	2.50
82950	4.00	1.00	3.00
82951	13.00	3.00	10.00
82952	4.00	1.00	3.00
82955	9.50	2.00	7.50
82960	4.00	1.00	3.00
82962	2.75	0.69	2.06
82963	22.00	5.50	16.50
82965	3.50	0.50	3.00
82977	7.00	1.50	5.50
82978	14.50	3.50	11.00
82979	5.50	1.00	4.50
82985	11.50	2.50	9.00
83001	19.00	4.50	14.50
83002	19.50	4.50	15.00
83003	16.00	4.00	12.00
83010	11.00	2.50	8.50
83012	17.50	4.00	13.50
83015	19.00	4.50	14.50
83018	22.00	5.50	16.50
83020	12.00	3.99	8.01
83021	16.50	4.13	12.37
83026	2.50	0.50	2.00

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Procedure	FS	PC	TC
83030	8.00	2.00	6.00
83033	3.50	0.50	3.00
83036	9.50	2.00	7.50
83045	2.00	0.50	1.50
83050	2.50	0.50	2.00
83051	6.00	1.50	4.50
83060	4.00	1.00	3.00
83065	3.00	0.50	2.50
83068	6.00	1.50	4.50
83069	2.50	0.50	2.00
83070	4.50	1.00	3.50
83080	4.50	1.13	3.37
83088	16.00	4.00	12.00
83090	4.50	1.13	3.37
83150	9.00	2.00	7.00
83491	16.00	4.00	12.00
83497	12.50	3.00	9.50
83498	28.00	7.00	21.00
83499	26.00	6.50	19.50
83500	22.50	5.50	17.00
83505	28.50	7.13	21.37
83516	13.50	3.38	10.12
83518	9.50	2.38	7.12
83519	14.00	3.50	10.50
83520	14.00	3.50	10.50
83525	11.50	2.50	9.00
83527	15.00	3.75	11.25
83528	16.00	4.00	12.00
83540	5.00	1.00	4.00
83550	8.50	2.00	6.50
83570	9.00	2.00	7.00
83582	14.50	3.50	11.00
83586	13.00	3.00	10.00
83593	26.50	6.50	20.00
83605	10.50	2.50	8.00
83615	5.00	1.00	4.00
83625	10.50	2.50	8.00
83630	11.28	2.82	8.46
83631	19.19	4.80	14.39
83632	20.50	5.00	15.50
83633	5.50	1.00	4.50
83655	10.50	2.50	8.00
83661	14.50	3.50	11.00
83662	18.00	4.50	13.50
83663	9.00	2.25	6.75

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Procedure	FS	PC	TC
83664	4.50	1.13	3.37
83670	9.00	2.00	7.00
83690	7.00	1.50	5.50
83695	12.66	3.16	9.50
83698	33.20	8.30	24.90
83700	11.01	2.75	8.26
83701	12.11	3.03	9.08
83718	6.00	1.50	4.50
83719	13.00	3.00	10.00
83721	11.00	3.00	8.00
83727	17.50	4.00	13.50
83735	6.50	1.50	5.00
83775	7.50	1.50	6.00
83785	24.50	6.00	18.50
83789	16.50	4.13	12.37
83825	16.00	4.00	12.00
83835	17.50	4.00	13.50
83857	10.50	2.50	8.00
83861	17.03		
83864	16.00	4.00	12.00
83872	5.50	1.00	4.50
83873	17.00	4.00	13.00
83874	13.00	3.00	10.00
83876	15.12		
83880	38.90		
83883	15.50	3.88	11.62
83885	4.00	1.00	3.00
83915	9.50	2.00	7.50
83916	14.50	3.50	11.00
83918	11.00	2.50	8.50
83919	14.50	3.63	10.87
83921	14.50	3.63	10.87
83930	6.50	1.50	5.00
83935	7.00	1.50	5.50
83937	18.50	4.50	14.00
83945	13.00	3.00	10.00
83950	62.00	15.50	46.50
83951	62.00		
83970	40.50	10.00	30.50
83986	3.50	0.50	3.00
83992	15.00	3.50	11.50
83993	19.00	4.75	14.25
84030	4.00	1.00	3.00
84035	4.00	1.00	3.00
84060	6.00	1.50	4.50

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
84066	10.00	2.50	7.50
84075	5.00	1.00	4.00
84078	7.00	1.50	5.50
84080	15.50	3.50	12.00
84085	6.50	1.50	5.00
84087	5.50	1.00	4.50
84100	4.00	1.00	3.00
84105	3.50	0.50	3.00
84106	4.00	1.00	3.00
84110	8.00	2.00	6.00
84119	8.50	2.00	6.50
84120	14.00	3.50	10.50
84126	26.50	6.50	20.00
84132	4.00	1.00	3.00
84133	4.00	1.00	3.00
84134	15.00	3.50	11.50
84135	21.50	5.00	16.50
84138	21.00	5.00	16.00
84140	15.00	3.50	11.50
84143	26.50	6.63	19.87
84144	21.50	5.00	16.50
84146	19.50	4.50	15.00
84150	24.00	6.00	18.00
84152	17.50	4.38	13.12
84153	21.50	5.38	16.12
84154	17.50	4.38	13.12
84155	4.00	1.00	3.00
84156	3.50	0.88	2.62
84157	3.50	0.88	2.62
84160	5.00	1.00	4.00
84163	17.25		
84165	10.00	3.02	6.97
84166	9.97	9.67	0.30
84181	16.00	4.84	11.16
84182	17.00	5.15	11.85
84202	5.50	1.00	4.50
84203	5.50	1.00	4.50
84206	9.50	2.00	7.50
84207	14.00	3.50	10.50
84210	11.00	2.50	8.50
84220	3.50	0.50	3.00
84228	4.00	1.00	3.00
84233	41.50	10.00	31.50
84234	13.00	3.00	10.00
84235	54.50	13.50	41.00

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
84244	18.50	4.50	14.00
84252	9.00	2.00	7.00
84255	26.50	6.50	20.00
84260	11.00	2.50	8.50
84270	7.00	1.50	5.50
84275	5.00	1.00	4.00
84285	24.50	6.00	18.50
84295	4.00	1.00	3.00
84300	4.00	1.00	3.00
84302	4.50	1.13	3.37
84305	17.50	4.00	13.50
84307	8.00	2.00	6.00
84311	6.50	1.50	5.00
84315	2.00	0.50	1.50
84375	6.00	1.50	4.50
84376	5.00	1.25	3.75
84377	5.00	1.25	3.75
84378	7.50	1.88	5.62
84379	7.50	1.88	5.62
84392	5.00	1.00	4.00
84402	27.50	6.50	21.00
84403	22.50	5.50	17.00
84425	6.00	1.50	4.50
84430	11.50	2.50	9.00
84432	14.00	3.50	10.50
84436	7.00	1.50	5.50
84437	4.00	1.00	3.00
84439	7.00	1.50	5.50
84442	11.00	2.50	8.50
84443	17.50	4.00	13.50
84445	12.50	3.00	9.50
84446	12.50	3.00	9.50
84449	13.50	3.00	10.50
84450	5.00	1.00	4.00
84460	4.00	1.00	3.00
84466	15.00	3.50	11.50
84478	6.00	1.50	4.50
84479	6.00	1.50	4.50
84480	11.50	2.50	9.00
84481	11.50	2.50	9.00
84484	10.50	3.00	7.50
84485	5.00	1.00	4.00
84488	5.00	1.00	4.00
84490	5.00	1.00	4.00
84510	6.00	1.50	4.50

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
84512	5.00	1.25	3.75
84520	3.50	0.50	3.00
84525	2.00	0.50	1.50
84540	4.00	1.00	3.00
84545	6.00	1.50	4.50
84550	4.00	1.00	3.00
84560	4.50	1.00	3.50
84577	12.50	3.00	9.50
84578	3.00	0.50	2.50
84580	7.00	1.50	5.50
84583	5.00	1.00	4.00
84585	12.50	3.00	9.50
84586	17.50	4.00	13.50
84588	26.50	6.50	20.00
84590	12.50	3.00	9.50
84597	5.00	1.00	4.00
84600	17.50	4.00	13.50
84620	11.50	2.50	9.00
84630	11.50	2.50	9.00
84681	15.00	3.50	11.50
84702	15.50	3.50	12.00
84703	7.00	1.50	5.50
84704	14.75	3.75	11.00
85002	4.50	1.00	3.50
85004	6.00	1.50	4.50
85007	3.50	0.50	3.00
85008	3.00	0.50	2.50
85009	3.50	0.50	3.00
85013	2.50	0.50	2.00
85014	2.00	0.50	1.50
85018	2.00	0.50	1.50
85025	8.00	2.00	6.00
85027	6.00	1.50	4.50
85032	4.00	1.00	3.00
85041	2.00	0.50	1.50
85044	4.00	1.00	3.00
85045	4.00	1.00	3.00
85046	5.00	1.25	3.75
85048	2.00	0.50	1.50
85049	4.00	1.00	3.00
85055	4.00	1.00	3.00
85060	13.01		
85097	47.22	37.27	9.95
85130	13.50	3.38	10.12
85170	3.50	0.50	3.00

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
85175	4.00	1.00	3.00
85210	4.00	1.00	3.00
85220	17.50	4.00	13.50
85230	17.50	4.00	13.50
85240	18.00	4.50	13.50
85244	20.50	5.00	15.50
85245	23.00	5.50	17.50
85246	23.00	5.50	17.50
85247	23.00	5.50	17.50
85250	18.50	4.50	14.00
85260	18.50	4.50	14.00
85270	18.50	4.50	14.00
85280	18.50	4.50	14.00
85290	16.50	4.00	12.50
85291	9.00	2.00	7.00
85300	4.00	1.00	3.00
85301	10.50	2.50	8.00
85302	13.00	3.00	10.00
85303	13.00	3.00	10.00
85305	12.00	3.00	9.00
85306	12.50	3.00	9.50
85307	14.50	3.63	10.87
85335	12.00	3.00	9.00
85337	10.50	2.50	8.00
85345	4.00	1.00	3.00
85347	4.00	1.00	3.00
85348	3.00	0.50	2.50
85360	5.50	1.00	4.50
85362	7.00	1.50	5.50
85366	8.00	2.00	6.00
85370	7.00	1.50	5.50
85378	7.00	1.50	5.50
85379	7.00	1.50	5.50
85380	9.50	2.38	7.12
85384	8.00	2.00	6.00
85385	8.00	2.00	6.00
85390	4.50	1.36	3.14
85396	10.97	2.40	8.57
85397	21.78		
85400	8.50	2.00	6.50
85410	8.00	2.00	6.00
85415	8.50	2.00	6.50
85420	6.50	1.50	5.00
85441	3.50	0.50	3.00
85445	7.00	1.50	5.50



## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
85460	8.00	2.00	6.00
85461	7.50	1.88	5.62
85475	9.00	2.00	7.00
85520	7.00	1.50	5.50
85525	8.50	2.00	6.50
85530	7.00	1.50	5.50
85536	6.00	1.50	4.50
85540	8.00	2.00	6.00
85547	8.50	2.00	6.50
85549	19.00	4.50	14.50
85555	5.00	1.00	4.00
85557	13.50	3.00	10.50
85576	20.50	6.20	14.30
85597	21.00	5.25	15.75
85610	3.50	0.50	3.00
85611	4.00	1.00	3.00
85612	8.50	2.00	6.50
85613	8.00	2.00	6.00
85635	10.00	2.50	7.50
85651	3.50	0.50	3.00
85652	3.00	0.75	2.25
85660	4.00	1.00	3.00
85670	4.00	1.00	3.00
85675	3.50	0.50	3.00
85705	7.00	1.50	5.50
85730	5.50	1.00	4.50
85732	5.50	1.00	4.50
85810	10.50	2.50	8.00
86000	7.00	1.50	5.50
86001	5.00	1.25	3.75
86003	6.00	1.50	4.50
86005	9.00	2.25	6.75
86021	10.50	2.50	8.00
86022	17.50	4.00	13.50
86023	9.00	2.00	7.00
86038	12.50	3.00	9.50
86039	13.00	3.00	10.00
86060	6.00	1.50	4.50
86063	5.00	1.00	4.00
86140	5.00	1.00	4.00
86141	12.50	3.13	9.37
86146	16.00	4.00	12.00
86147	15.00	3.50	11.50
86148	16.00	4.00	12.00
86155	11.50	2.50	9.00

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
86156	7.00	1.50	5.50
86157	7.00	1.50	5.50
86160	12.00	3.00	9.00
86161	12.00	3.00	9.00
86162	17.50	4.00	13.50
86171	9.50	2.00	7.50
86185	8.50	2.00	6.50
86215	13.50	3.00	10.50
86225	14.00	3.50	10.50
86226	14.00	3.50	10.50
86235	17.50	4.00	13.50
86243	21.00	5.00	16.00
86255	11.50	9.67	1.83
86256	11.50	3.49	8.01
86277	16.00	4.00	12.00
86280	8.00	2.00	6.00
86294	19.50	4.88	14.62
86300	19.50	4.88	14.62
86301	19.50	4.88	14.62
86304	19.50	4.88	14.62
86308	5.00	1.00	4.00
86309	6.50	1.50	5.00
86310	5.50	1.00	4.50
86316	16.00	4.00	12.00
86317	15.00	3.50	11.50
86318	14.00	3.50	10.50
86320	21.50	6.51	14.99
86325	21.50	6.51	14.99
86327	21.50	6.51	15.58
86329	14.50	3.50	11.00
86331	12.00	3.00	9.00
86332	14.00	3.50	10.50
86334	21.50	6.51	14.99
86335	28.70	9.67	19.03
86336	17.86		
86337	21.50	5.00	16.50
86340	15.00	3.50	11.50
86341	23.00	5.75	17.25
86343	12.50	3.00	9.50
86344	8.00	2.00	6.00
86353	51.00	12.50	38.50
86355	3.13	0.78	2.35
86356	9.00	2.25	5.14
86357	3.13	0.78	2.35
86359	2.50	0.50	2.00

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
86360	6.00	1.50	4.50
86361	4.00	1.00	3.00
86376	9.50	2.00	7.50
86378	17.50	4.00	13.50
86382	15.00	3.50	11.50
86384	11.50	2.50	9.00
86403	11.00	2.50	8.50
86406	12.50	3.13	9.37
86430	5.50	1.00	4.50
86431	5.50	1.00	4.50
86480	50.74	10.15	40.59
86481	61.32	12.26	49.06
86486	2.89		
86490	2.60	0.66	1.94
86510	3.16	0.66	2.50
86580	4.09	0.80	3.29
86590	6.00	1.50	4.50
86592	4.00	1.00	3.00
86593	4.50	1.00	3.50
86602	5.00	1.00	4.00
86603	15.00	4.00	11.00
86606	12.50	3.00	9.50
86609	12.60	3.15	9.45
86611	4.77	1.19	3.58
86612	12.50	3.00	9.50
86615	10.00	2.50	7.50
86617	18.00	4.50	13.50
86618	13.00	3.00	10.00
86619	10.00	2.50	7.50
86622	7.00	1.50	5.50
86625	15.00	3.75	11.25
86628	5.50	1.00	4.50
86631	8.50	2.00	6.50
86632	12.50	3.00	9.50
86635	10.00	2.50	7.50
86638	14.00	3.50	10.50
86641	7.50	1.50	6.00
86644	14.50	3.50	11.00
86645	12.50	3.00	9.50
86648	11.00	2.50	8.50
86651	11.00	2.50	8.50
86652	15.50	4.00	11.50
86653	15.50	4.00	11.50
86654	15.50	4.00	11.50
86658	10.00	2.50	7.50

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
86663	14.00	3.50	10.50
86664	17.50	4.38	13.12
86665	14.00	3.50	10.50
86666	4.77	1.19	3.58
86668	7.00	1.50	5.50
86674	7.00	1.50	5.50
86677	16.50	4.00	12.50
86684	16.50	4.00	12.50
86687	9.00	2.00	7.00
86688	15.50	4.00	11.50
86689	14.50	3.50	11.00
86692	12.00	3.00	9.00
86694	14.50	3.50	11.00
86695	12.50	3.00	9.50
86696	18.50	4.63	13.87
86698	10.00	2.50	7.50
86701	10.00	2.50	7.50
86702	14.50	3.50	11.00
86703	9.50	2.00	7.50
86704	11.50	2.88	8.62
86705	11.00	2.75	8.25
86706	10.00	2.50	7.50
86707	11.00	2.75	8.25
86708	11.50	2.88	8.62
86709	10.50	2.62	7.88
86710	11.00	2.50	8.50
86713	17.50	4.38	13.12
86717	9.00	2.00	7.00
86720	12.00	3.00	9.00
86723	15.50	4.00	11.50
86727	12.50	3.00	9.50
86729	14.00	3.50	10.50
86732	14.50	3.50	11.00
86735	12.50	3.00	9.50
86738	10.00	2.50	7.50
86741	15.50	4.00	11.50
86744	14.50	3.50	11.00
86747	16.00	4.00	12.00
86750	6.50	1.50	5.00
86756	12.50	3.00	9.50
86757	18.50	4.63	13.87
86759	15.50	4.00	11.50
86762	14.50	3.50	11.00
86765	13.00	3.00	10.00
86768	10.50	2.50	8.00

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
86771	10.00	2.50	7.50
86774	16.00	4.00	12.00
86777	14.50	3.50	11.00
86778	12.50	3.00	9.50
86784	5.50	1.00	4.50
86787	15.00	3.75	11.25
86788	16.48	4.12	12.36
86789	14.08	3.52	10.56
86793	10.00	2.50	7.50
86800	16.00	4.00	12.00
86803	13.50	3.38	10.12
86804	14.50	3.62	10.88
86805	54.50	13.50	41.00
86806	49.50	12.00	37.50
86807	41.00	10.00	31.00
86808	30.50	7.50	23.00
86812	21.50	5.00	16.50
86813	60.50	15.00	45.50
86816	28.00	7.00	21.00
86817	67.00	16.50	50.50
86821	58.50	14.50	44.00
86822	36.00	9.00	27.00
86850	11.50	2.50	9.00
86860	14.50	3.50	11.00
86870	7.85	1.96	5.89
86880	5.50	1.00	4.50
86885	5.50	1.00	4.50
86886	5.00	1.00	4.00
86900	3.00	0.50	2.50
86901	3.00	0.50	2.50
86904	10.00	2.50	7.50
86905	3.50	0.50	3.00
86906	7.00	1.50	5.50
86910	20.00	5.00	15.00
86920	20.00	5.00	15.00
86922	40.00	10.00	30.00
86930	18.50	4.50	14.00
86931	9.00	2.00	7.00
86932	63.50	15.50	48.00
86940	8.00	2.00	6.00
86941	8.50	2.00	6.50
86950	52.00	13.00	39.00
86965	5.00	1.00	4.00
86970	15.50	3.50	12.00
86971	12.50	3.00	9.50

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
86972	5.50	1.00	4.50
86975	6.50	1.50	5.00
86976	5.50	1.00	4.50
86977	12.50	3.00	9.50
86978	14.00	3.50	10.50
87015	6.50	1.50	5.00
87040	10.50	2.50	8.00
87045	9.50	2.00	7.50
87046	2.00	0.50	1.50
87070	8.50	2.00	6.50
87071	4.50	1.13	3.37
87073	4.50	1.13	3.37
87075	9.50	2.00	7.50
87076	9.49	2.37	7.12
87077	7.50	1.88	5.62
87081	5.50	1.00	4.50
87084	8.50	2.00	6.50
87086	8.00	2.00	6.00
87088	8.00	2.00	6.00
87101	8.00	2.00	6.00
87102	8.50	2.00	6.50
87103	9.00	2.00	7.00
87106	10.50	2.50	8.00
87107	9.50	2.38	7.12
87109	15.50	3.50	12.00
87110	14.00	3.50	10.50
87116	10.50	2.50	8.00
87118	11.00	2.50	8.50
87140	5.50	1.00	4.50
87143	12.50	3.00	9.50
87147	4.50	1.00	3.50
87149	12.00	3.00	9.00
87152	5.00	1.25	3.75
87158	5.00	1.00	4.00
87164	10.00	3.02	6.97
87166	11.50	2.50	9.00
87168	4.00	1.00	3.00
87169	4.00	1.00	3.00
87176	5.50	1.00	4.50
87177	9.00	2.00	7.00
87181	0.50		0.50
87184	7.00	1.50	5.50
87185	0.50	0.13	0.37
87186	8.50	2.00	6.50
87187	9.00	2.00	7.00

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
87188	4.00	1.00	3.00
87190	5.00	1.00	4.00
87197	15.00	3.50	11.50
87205	4.00	1.00	3.00
87206	5.00	1.00	4.00
87207	5.50	1.67	3.83
87209	17.58	4.40	13.18
87210	4.00	1.00	3.00
87220	4.00	1.00	3.00
87230	19.00	4.50	14.50
87250	20.50	5.00	15.50
87252	22.50	5.50	17.00
87253	18.50	4.50	14.00
87254	4.50	1.13	3.37
87255	33.00	8.25	24.75
87260	11.50	2.88	8.62
87265	11.50	2.88	8.62
87267	11.50	2.88	8.62
87269	12.00	3.00	9.00
87270	11.50	2.88	8.62
87271	11.50	2.88	8.62
87272	11.50	2.88	8.62
87273	11.50	2.88	8.62
87274	11.50	2.88	8.62
87275	11.50	2.88	8.62
87276	11.50	2.88	8.62
87277	11.50	2.88	8.62
87278	11.50	2.88	8.62
87279	11.50	2.88	8.62
87280	11.50	2.88	8.62
87281	11.50	2.88	8.62
87283	11.50	2.88	8.62
87285	11.50	2.88	8.62
87290	11.50	2.88	8.62
87299	11.50	2.88	8.62
87300	5.50	1.38	4.12
87301	11.50	2.88	8.62
87305	11.73	2.93	8.80
87320	11.50	2.88	8.62
87324	11.50	2.88	8.62
87327	11.50	2.88	8.62
87328	11.50	2.88	8.62
87329	12.00	3.00	9.00
87332	11.50	2.88	8.62
87335	11.50	2.88	8.62

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
87336	11.50	2.88	8.62
87337	11.50	2.88	8.62
87340	9.50	2.38	7.12
87341	9.50	2.38	7.12
87350	11.00	2.75	8.25
87380	15.50	3.88	11.62
87385	11.50	2.88	8.62
87389	10.50		
87390	10.50	2.63	7.87
87400	5.50	1.38	4.12
87420	11.50	2.88	8.62
87425	11.50	2.88	8.62
87427	11.50	2.88	8.62
87430	11.50	2.88	8.62
87449	11.50	2.88	8.62
87450	9.00	2.25	6.75
87451	9.00	2.25	6.75
87470	12.00	3.00	9.00
87471	28.50	7.13	21.37
87472	45.00	11.25	33.75
87475	12.00	3.00	9.00
87476	28.50	7.13	21.37
87477	45.00	11.25	33.75
87480	12.00	3.00	9.00
87481	28.50	7.13	21.37
87482	45.00	11.25	33.75
87485	12.00	3.00	9.00
87486	28.50	7.13	21.37
87487	45.00	11.25	33.75
87490	12.00	3.00	9.00
87491	28.50	7.13	21.37
87492	41.00	10.25	30.75
87495	12.00	3.00	9.00
87496	28.50	7.13	21.37
87497	45.00	11.25	33.75
87498	29.16	7.29	21.87
87505	12.00		
87506	12.00		
87507	12.00		
87510	12.00	3.00	9.00
87511	28.50	7.13	21.37
87512	45.00	11.25	33.75
87515	12.00	3.00	9.00
87516	28.50	7.13	21.37
87517	45.00	11.25	33.75



## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
87520	12.00	3.00	9.00
87521	28.50	7.13	21.37
87522	45.00	11.25	33.75
87525	12.00	3.00	9.00
87526	28.50	7.13	21.37
87527	45.00	11.25	33.75
87528	12.00	3.00	9.00
87529	28.50	7.13	21.37
87530	45.00	11.25	33.75
87531	12.00	3.00	9.00
87532	28.50	7.13	21.37
87533	45.00	11.25	33.75
87534	12.00	3.00	9.00
87535	28.50	7.13	21.37
87536	130.00	32.50	86.31
87539	45.00	11.25	33.75
87540	12.00	3.00	9.00
87541	28.50	7.13	21.37
87542	45.00	11.25	33.75
87550	12.00	3.00	9.00
87551	28.50	7.13	21.37
87552	45.00	11.25	33.75
87555	12.00	3.00	9.00
87556	28.50	7.13	21.37
87557	45.00	11.25	33.75
87560	12.00	3.00	9.00
87561	28.50	7.13	21.37
87562	45.00	11.25	33.75
87580	12.00	3.00	9.00
87581	28.50	7.13	21.37
87582	45.00	11.25	33.75
87590	12.00	3.00	9.00
87591	28.50	7.13	21.37
87592	45.00	11.25	33.75
87623	12.00		
87624	28.50		
87625	45.00		
87640	29.16	7.29	21.87
87641	29.16	7.29	21.87
87650	12.00	3.00	9.00
87651	28.50	7.13	21.37
87652	45.00	11.25	33.75
87653	29.16	7.29	21.87
87660	12.50	3.13	9.37
87661	28.50	7.13	21.37

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
87797	12.00	3.00	9.00
87798	28.50	7.13	21.37
87799	45.00	11.25	33.75
87800	12.00	3.00	9.00
87801	28.50	7.13	21.37
87802	11.50	2.88	8.62
87803	11.50	2.88	8.62
87804	11.50	2.88	8.62
87806	10.50		
87807	11.73	2.93	8.80
87808	11.73	2.93	8.80
87809	11.73	2.93	8.80
87810	11.50	2.88	8.62
87850	11.50	2.88	8.62
87880	11.50	2.88	8.62
87899	11.50	2.88	8.62
87900	180.29		
87901	355.78		
87902	252.00	63.00	189.00
87903	675.00		
87904	36.02		
87905	11.59		
87906	133.42		
87999	1,695.00		
88104	39.78	15.62	24.17
88106	39.23	10.60	28.63
88108	37.93	12.27	25.66
88112	49.89	26.50	23.39
88141	16.92	3.82	13.10
88142	17.00	4.25	12.75
88143	10.00	2.50	7.50
88147	10.22	2.55	7.67
88148	10.22	2.55	7.67
88150	10.00	2.50	7.50
88152	10.00	2.50	7.50
88153	10.00	2.50	7.50
88154	10.00	2.50	7.50
88155	5.50	1.00	4.50
88160	34.85	14.13	20.72
88161	33.70	13.57	20.13
88162	53.21	21.38	31.83
88164	10.00	2.50	7.50
88165	10.00	2.50	7.50
88166	10.00	2.50	7.50
88167	10.00	2.50	7.50

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
88172	30.12	19.69	10.43
88173	80.68	38.48	42.20
88174	20.50	5.13	15.37
88175	24.00	6.00	18.00
88177	15.80	7.11	8.70
88182	55.26	19.50	35.76
88184	40.44		25.28
88185	24.63		12.45
88187	37.93	34.34	3.59
88188	48.15	42.82	5.33
88189	59.28	56.40	2.88
88230	121.50	109.00	12.50
88233	148.00	133.00	15.00
88235	154.00	138.50	15.50
88237	131.50	118.00	13.50
88239	154.00	138.50	15.50
88245	107.50	96.50	11.00
88248	143.50	129.00	14.50
88249	167.50	41.88	125.62
88261	136.50	122.50	14.00
88262	129.50	116.50	13.00
88263	107.50	96.50	11.00
88264	120.50	30.13	90.37
88267	170.00	153.00	17.00
88269	107.50	96.50	11.00
88271	14.00		10.50
88272	24.50		18.38
88273	31.50		23.63
88275	47.18		35.39
88280	21.50	19.00	2.50
88283	71.50	64.00	7.50
88285	4.00	3.50	0.50
88289	28.00	25.00	3.00
88291	16.73	13.39	3.34
88300	11.06	2.42	8.64
88302	23.05	3.78	19.27
88304	24.43	6.13	18.30
88305	42.46	20.45	22.01
88307	145.21	45.36	99.85
88309	220.74	80.13	140.61
88311	11.34	6.82	4.52
88312	51.31	14.69	36.62
88313	35.88	6.51	29.37
88314	40.53	12.08	28.44
88321	49.69		

## Physician and Outpatient Laboratory Fee Schedule

Note: The fees reimbursed below are for services to recipients of all ages.

Procedure	FS	PC	TC
88323	73.06	44.76	28.30
88325	90.72	86.57	4.15
88329	26.40	23.04	3.36
88331	50.38	34.02	16.36
88332	24.24	16.73	7.51
88333	52.80	34.21	18.59
88334	32.35	21.01	11.34
88341	32.58	9.77	22.81
88342	58.36	19.33	39.03
88344	56.37	16.91	39.46
88346	49.73	19.89	29.84
88348	330.34	41.09	289.25
88350	37.55	14.87	22.68
88355	92.45	41.83	47.07
88356	126.43	64.73	61.70
88360	63.21	29.16	34.05
88361	79.19	31.60	47.59
88362	157.87	58.56	99.31
88363	25.88	7.28	18.59
88364	46.89	14.07	32.82
88365	92.58	26.50	66.09
88366	72.06	21.62	50.46
88367	117.60	27.27	90.33
88368	105.67	28.04	77.62
88369	35.51	10.65	24.86
88371	21.50	5.92	15.58
88372	22.00	6.05	15.95
88373	29.14	8.74	20.40
88374	98.61	29.58	69.03
88377	103.10	30.93	72.17
88380	79.88	36.33	43.55
88381	89.50	24.70	64.80
88740	4.76		
88741	4.76		
89050	4.50	1.00	3.50
89051	5.50	1.00	4.50
89055	4.00	1.00	3.00
89060	6.50	1.79	4.71
89125	4.00	3.50	0.50
89160	3.50	3.00	0.50
89190	4.50	4.00	0.50
89220	8.55	0.83	7.72
89230	1.68	0.90	0.78