NEW HAMPSHIRE DEPARTMENT OF EDUCATION
DIVISION OF WORKFORCE DEVELOPMENT
DISABILITY DETERMINATION SERVIES

EFFECTIVE: JANUARY 2021

MEDICAL RECORDS FEE PER PAGE: $1.00 PER PAGE- MAX $15.00

$16.00 PER NARRATIVE REPORT

CPT/DDS CODE	EXAM SERVICE DESCRIPTION	DDS FEE
90791-CPPA	COMPREHENSIVE PSYCH PROFILE ADULT/CHILD	**$ 150.00**
96101-IQ	CPPA, IQ TESTING COMBINATION	**$ 350.00**
96101-IQ ORG	CPPA, IQ,ORGANICIITY/MEMORY COMBINATION	**$ 455.00**
96101-PEREX	CPPA, PERSONALITY PROFILE COMBINATION	**$ 405.00**
96130-FAEX	CPPA, FUNCTIONAL/ADAPTIVE BEHAVIOR SCALE COM	**$ 255.00**
96101-NPSY	CPPA, IQ, NEUROPSYCHOLOGICAL TESTNG COMBO	**$ 1,030.00**
92523- SPCH	SPEECH AND ALNGUAGE EVALUATION	**$ 206.00**
99204-GPHYS	GENERAL PHYSICAL EXAM W/ REPORT	**$ 192.00**
99205-NEURO	NEUROLOGY EXAM W/ REPORT	**$ 224.00**
92004-OPHTH	OPHTHALMOLOGY EXAM W/ REPORT	**$ 160.00**
99204-ORTHO	ORTHOPEDIC EXAM W/ REPORT	**$ 192.00**
99204-ENT	OTOLARYNGOLOGY (ENT EXAM) W/ REPORT	**$ 192.00**
97750-FCE	FUNCTIONAL CAPACITY EXAM W/ REPORT	$ 200.00

CPT/DDS CODE	RADIOLOGY SERVICE	DDS FEE	NEW 26	NEW TC
73600- XAL, XAR	X-RAY ANKLE, 2 VIEWS	$ 31.34	$ 8.77	$ 22.57
71046- XC	X-RAY CHEST, 2 VIEWS	$ 32.00	$ 11.32	$ 20.69
73070- XEL. XER	X-RAY ELBOW, 2 VIEWS	$ 28.73	$ 8.41	$ 20.32
73552-XFEL, XFER	X-RAY FEMUR, 2 VIEWS	$ 34.70	$ 9.87	$ 24.83
73090- XFAL, XFAR	X-RAY FORARM (ULNA & RAD), 2 VIEWS	$ 27.21	$ 8.77	$ 18.44
73620-XFL, XFR	X-RAY FOOT, 2 VIEWS	$ 27.58	$ 8.02	$ 19.56
73120-XHAL, XHAR	X-RAY HAND, 2 VIEWS	$ 29.84	$ 8.77	$ 21.07
73501-XHL, XHR	X-RAY HIP, 1 VIEW	**$ 31.69**	$ 9.87	$ 21.82
73060-XHUL, XHUR	X-RAY HUMERUS, 2 VIEWS	**$ 30.59**	$ 8.77	$ 21.82
73565-XKL, XKR	X-RAY KNEE, 2 VIEWS	**$ 32.85**	$ 8.77	$ 24.08
73590-XTFL,XTFR	X-RAY TIBIA/FIBULA, 2 VIEWS	**$ 30.22**	$ 8.77	$ 21.44
73650-XHEL,XHER	X-RAY HEEL, 2 VIEWS	**$ 28.71**	$ 8.40	$ 20.32
72170-XP	X-RAY PELVIS, 2 VIEWS	**$ 33.59**	$ 9.13	$ 24.45
73030-XSL,XSR	X-RAY SHOULDER, 2 VIEWS	**$ 30.94**	$ 9.87	$ 21.07
73100-XWL, XWR	X-RAY WRIST, 2 VIEWS	**$ 33.23**	$ 9.15	$ 24.08
72040-XCS	X-RAY CERVICAL SPINE, 2 VIEWS	**$ 35.01**	$ 11.68	$ 23.33
72100-XLS	X-RAY LUMBOSACRAL SPINE, 2 VIEWS	**$ 36.89**	$ 11.68	$ 25.21
72070-XTHOR	X-RAY THORACIC SPINE, 2 VIEWS	**$ 35.76**	$ 11.68	$ 24.08
72200-XSAC	X-RAY SACROLILIAC JOINTS, 2 VIEWS	**$ 29.82**	$ 9.13	$ 20.69

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CPT/DDS CODE	LABORATORY SERVICES	DDS FEE		
86038-ANA	ANA (ANTINUCLEAR ANTIBODIES	$ 14.92		
82803-ABG	ARTERIAL BLOOD GASES	$ 26.07		
36600-ARTP	ARTERIAL PUNCTURE	$ 16.42		
36415-BDRAW	BLOOD DRAWING	$ 3.00		
85025-CBC	CBC W/ DIFFERENTIAL	$ 9.59		
80053-CMP	COMPREHENSIVE METABOLIC PANEL	$ 13.04		
86431-RF	RHEUMATOID FACTOR	$ 7.00		
85651-SED	SEDIMENTATION RATE	$ 4.38		
80156-TEG	TEGRETOL LEVEL (CARBAMAZEPINE TOTAL)	$ 17.98		
84443-TSH	THYROID STIMULATING HORMONE	$ 20.75		
84550-URIC	URIC ACID	$ 5.58		
90164-VAL	VALPROIC ACID, TOTAL	$ 16.72		

CPT/DDS CODE	AUDIOMETRIC SERVICES	DDS FEE		
92557-AUDIO	AUDIOMETRY	$ 97.00		
92626-HINT	HINT (HEARING IN NOISE TEST)	$ 40.00		
69210-CLEAN	CERUMEN REMOVAL, BILATERAL	$ 68.00		

CPT/DDS CODE	OPHTHALMALOGICAL SERVICES	DDS FEE		
92083-VF	VISUAL FIELDS (HUMPHREY 30-2)	$ 85.00		

CPT/DDS CODE	TESTS-FACILITY	DDS FEE		
94060-PFT	PFT'S - COMPLETE (BEFORE & AFTER BRONCHIDILATORS	$ 130.00		
94729-DLCO	CO DIFFUSION (DLCO)	$ 97.00		
94618-WALK	6 MIN WALK TEST	$ 72.00		
93922-DOPP	BILATERAL LE DOPPLER (ABI), AT REST W/ TOE	$ 188.00		
93000-EKG	EKG - COMPLETE	$ 36.00		
93307-ECHO	ECHOCARDIOGRAM, AT REST	$ 150.50		

DDS CODE	MISCELLANEOUS FEES	DDS FEE		
CE TRAV TIME	PHYSICIAN/PSYCHOLOGIST TRAVEL TIME TO CE	$ 60.00	PER HOUR	
EVREV	EVIDENCE REVIEW FEE	$ 60.00	PER CE	
INTRP	INTERPRETER SERVICES	$ 60.00	PER HR + MILEAGE	
MSS/MSSP 99075	COMPLETE OHO MEDICAL SOURCE STATEMENT	$ 60.00	EACH	
TRANS	DOCUMENT TRANSLATION	VARIABLE		
TRAV	2019 NH MILEAGE REIMBURSEMENT RATE	$ 0.54	PER MILE	