2021
Fee Schedule

NM Long Description	MC CPT	NM CPT	NM FY2021 Fee	NM FY2020 Fee
Comprehensive Internist Consultation	99204	90621	$179.00	$176.00
Comprehensive Internist Consultation - NP/PA*	99205	90621NP	$152	$150
Comprehensive Orthopedic Consultation	99204	90622	$179.00	$176.00
Comprehensive Orthopedic Consultation - NP/PA*	99205	90622NP	$152	$150
Comprehensive Neurological Consultation	99204	90623	$179.00	$176.00
Comprehensive Neurological Consultation - NP/PA*	99205	90623NP	$152	$150
Comprehensive Cardiac Consultation	99204	90625	$179.00	$176.00
Examination by Family Practitioner	99204	90626	$179.00	$176.00
Examination by Family Practitioner - NP/PA*	99205	90626NP	$152	$150
Comprehensive Ophthalmologic Consultation	99204	90627	$179.00	$176.00
Comprehensive Otolaryngology Consultation	99204	925577(26)	$160.00	$160.00
Comprehensive Pediatric Consultation	99204	90628	$179.00	$176.00
Comprehensive Pediatric Consultation - NP/PA*	99205	90628NP	$152	$150
Speech/Language Evaluation	92523	92506	$246.00	$207.00
Speech/Language Evaluation, child under 3 yoa	92523	92506<3	$246.00	$207.00
Mental Status Examination- adult	90791	90801	$193.00	$155.00
Mental Status Examination- child	90791	90801 C	$193.00	$155.00
Mental Status Examination - LISW-adult*	90791	90791 L	$145	$116
Mental Status Examination - LISW-child*	90791	90791 LC	$145	$116
*Internist/Familly Nurse Practionner (NP/PA) fee = 85% of $179				
*Mental Status Examination - LISW fee = 75% of $193				

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Comprehensive Internist Consultation	99204	90621		$179.00	$176.00
Comprehensive Internist Consultation - NP/PA*	99205	90621NP		$152	$150
Comprehensive Orthopedic Consultation	99204	90622		$179.00	$176.00
Comprehensive Orthopedic Consultation - NP/PA*	99205	90622NP		$152	$150
Comprehensive Neurological Consultation	99204	90623		$179.00	$176.00
Comprehensive Neurological Consultation - NP/PA*	99205	90623NP		$152	$150
Comprehensive Cardiac Consultation	99204	90625		$179.00	$176.00
Examination by Family Practitioner	99204	90626		$179.00	$176.00
Examination by Family Practitioner - NP/PA*	99205	90626NP		$152	$150
Comprehensive Ophthalmologic Consultation	99204	90627		$179.00	$176.00
Comprehensive Otolaryngology Consultation	99204	90620		$160.00	$160.00
Comprehensive Pediatric Consultation	99204	90628		$179.00	$176.00
Comprehensive Pediatric Consultation - NP/PA*	99205	90628NP		$152	$150
Speech/Language Evaluation	92523	92506		$246.00	$207.00
Speech/Language Evaluation, child under 3 yoa	92523	92506<3		$246.00	$207.00
Mental Status Examination*	90791	90801		$193.00	$155.00
Mental Status Examination- child*	90791	90801 C		$193.00	$155.00
Mental Status Examination - LISW-adult*	90791	90791 L		$145	$116
Mental Status Examination - LISW-child*	90791	90791 LC		$145	$116
WAIS-IV/V	96125	01311		$193.00	$201.00
WISC-IV/V	96125	01312		$189.00	$197.00
Bayley Scales II of Infant Development - Mental and Motor	96112	01315		$175.00	$186.00
WPPSI-R	96112	01316		$175.00	$186.00
Leiter-3	96112	01317		$140.00	$149.00
Wechsler Memory Scale, Revised	96116	01326		$103.00	$105.00
Wide Range Achievement Test	96116	01325		$103.00	$0.00
Trails A & B	96116	01327		$77.00	$79.00
Test of Native/Non-Verbal Intelligence III	96125	01335		$112.00	$117.00
Wide Range Assessment of Memory and Learning	96116	01351		$103.00	$105.00
Wechsler Individual Achievement Test	96125	01352		$112.00	$117.00
Vineland	96116	01353		$77.00	$79.00
Chest, AP & Lateral	71046	71020	*Total**	$33.00	$33.00
			TC	$22.00	$21.00
26 is for the doctor's interpretation			26	$11.00	$12.00
Cervical Spine, AP & Lateral	72040	72040	*Total**	$39.00	$39.00
			TC	$28.00	$27.00
			26	$11.00	$12.00
			*Total**	$32.00	$32.00

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Thoracic Spine, AP & Lateral	72070	72070	TC	$22.00	$21.00
			26	$10.00	$11.00
			*Total**	$70.00	$69.00
Scoliosis Study-supine and erect	72082	72090	TC	$54.00	$52.00
			26	$16.00	$17.00
			*Total**	$39.00	$39.00
Lumbo-sacral Spine, AP & Lateral	72100	72100	TC	$28.00	$27.00
			26	$11.00	$12.00
			*Total**	$28.00	$29.00
Pelvis, AP	72170	72170	TC	$19.00	$20.00
			26	$9.00	$9.00
			*Total**	$32.00	$33.00
Sacroiliac Joints 2 views	72200	72200	TC	$24.00	$23.00
			26	$8.00	$10.00
			*Total**	$32.00	$30.00
Right Clavicle, 2 views	73000	73000	TC	$24.00	$21.00
			26	$8.00	$9.00
Left Clavicle, 2 views		**73001**	**see above**		
			*Total**	$23.00	$28.00
Right Scapula, complete	73010	73010	TC	$14.00	$19.00
			26	$9.00	$9.00
Left Scapula, complete		**73011**	**see above**		
			*Total**	$35.00	$34.00
Right Shoulder, 2 views	73030	73030	TC	$25.00	$24.00
			26	$10.00	$10.00
Left Shoulder, 2 views		**73031**	**see above**		
			*Total**	$32.00	$32.00
Right Humerus, 2 views	73060	73060	TC	$24.00	$23.00
			26	$8.00	$9.00
Left Humerus, 2 views		**73061**	**see above**		
			*Total**	$28.00	$29.00
Right Elbow, AP and Lateral views	73070	73070	TC	$20.00	$20.00
			26	$8.00	$9.00
Left Elbow, AP and Lateral views		**73071**	**see above**		
			*Total**	$29.00	$29.00
Right Forearm, AP and Lateral views	73090	73090	TC	$21.00	$20.00
			26	$8.00	$9.00
Left Forearm, AP and Lateral views		**73091**	**see above**		

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Right Wrist, AP and Lateral views	73100	73100	*Total**	$33.00	$33.00
			TC	$25.00	$24.00
			26	$8.00	$9.00
Left Wrist, AP and Lateral views		**73101**	**see above**		
Right Hand, 2 views	73120	73120	*Total**	$30.00	$31.00
			TC	$22.00	$22.00
			26	$8.00	$9.00
Left Hand, 2 views		**73121**	**see above**		
Right Hip, 2 views	73502	73510	*Total**	$46.00	$46.00
			TC	$35.00	$34.00
			26	$11.00	$12.00
Left Hip, 2 views		**73511**	**see above**		
Right Femur, AP and Lateral views	73551	73550	*Total**	$29.00	$30.00
			TC	$21.00	$21.00
			26	$8.00	$9.00
Left Femur, AP and Lateral views		**73551**	**see above**		
Right Knee, AP and Lateral views, Standing	73560	73560	*Total**	$34.00	$34.00
			TC	$26.00	$25.00
			26	$8.00	$9.00
Left Knee, AP and Lateral views, standing		**73561**	**see above**		
Right Tibia-Fibula, AP and Lateral views	73590	73590	*Total**	$31.00	$31.00
			TC	$23.00	$22.00
			26	$8.00	$9.00
Left Tibia-Fibula, AP and Lateral views		**73591**	**see above**		
Right Ankle, AP and Lateral views	73600	73600	*Total**	$32.00	$32.00
			TC	$24.00	$23.00
			26	$8.00	$9.00
Left Ankle, AP and Lateral views		**73601**	**see above**		
Right Foot, AP and Lateral views	73620	73620	*Total**	$28.00	$28.00
			TC	$20.00	$20.00
			26	$8.00	$8.00
Left Foot, AP and lateral views		**73621**	**see above**		
Right Calcaneus, AP and Lateral views	73650	73650	*Total**	$28.00	$29.00
			TC	$20.00	$20.00
			26	$8.00	$9.00
Left Calcaneus, AP and Lateral views		**73651**	**see above**		
Bone Age Studies, with Interpretation	77072	76020	*Total**	$26.00	$26.00
			TC	$16.00	$16.00

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
			26	$10.00	$10.00
Right & Left Shoulder, AP & Lateral	73030	X3030	*Total**	$70.00	$68.00
			TC	$50.00	$48.00
			26	$20.00	$20.00
Right & Left Humerus, AP & Lateral	73060	X3060	*Total**	$64.00	$64.00
			TC	$48.00	$46.00
			26	$16.00	$18.00
Right & Left Elbow, AP & Lateral	73070	X3070	*Total**	$56.00	$58.00
			TC	$40.00	$40.00
			26	$16.00	$18.00
Right & Left Forearm, AP & Lateral	73090	X3090	*Total**	$58.00	$58.00
			TC	$42.00	$40.00
			26	$16.00	$18.00
Right & Left Wrist, AP & Lateral	73100	X3100	*Total**	$66.00	$66.00
			TC	$50.00	$48.00
			26	$16.00	$18.00
Right & Left Hands, AP & Lateral	73120	X3120	*Total**	$60.00	$62.00
			TC	$44.00	$44.00
			26	$16.00	$18.00
Right & Left Hips, AP & Lateral	73510	X3510	*Total**	$92.00	$92.00
			TC	$70.00	$68.00
			26	$22.00	$24.00
Right & Left Femurs, AP & Lateral	73550	X3550	*Total**	$58.00	$60.00
			TC	$42.00	$42.00
			26	$16.00	$18.00
Right & Left Knees, AP & Lateral	73560	X3560	*Total**	$68.00	$68.00
			TC	$52.00	$50.00
			26	$16.00	$18.00
Right & Left Tibia-Fibula, AP & Lateral	73590	X3590	*Total**	$62.00	$62.00
			TC	$46.00	$44.00
			26	$16.00	$18.00
Right & Left Ankles, AP & Lateral	73600	X3600	*Total**	$64.00	$64.00
			TC	$48.00	$46.00
			26	$16.00	$18.00
Right & Left Feet, AP & Lateral	73620	X3620	*Total**	$56.00	$56.00
			TC	$40.00	$40.00
			26	$16.00	$16.00
			*Total**	$56.00	$58.00

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Right & Left Calcaneus, AP & Lateral	73650	X3650	TC	$40.00	$40.00
			26	$16.00	$18.00
Visual Field Exam, Quantitative Perimetry, Goldmann or ARC	92082	92082		$48.00	$49.00
Humphrey VTAP	92083	92083		$65.00	$65.00
Optical Coherence Tomography - Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; optic nerve	92133	92133		$38.00	$39.00
Optical Coherence Tomography - Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; retina	92134	92134		$42.00	$42.00
Basic Comprehensive Audiometry, Aided Pure Tone, Air & Bone with Speech Recognition Bone Speech Threshold & Discrimination (Audiologist Exam)	92557	92557		$41.00	$40.00
Tympanogram	92567	92567		$17.00	$16.00
Brainstem Evoked Auditory Response Recording	92652	92585		$124.00	$138.00
Cerumen Removal	69210	69210 1		$50.00	$51.00
Cerumen Removal - Bilateral	69210	69210 2		$100.00	$102.00
HINT (Hearing in Noise Test) - diagnostic analysis of cochlear implant - less than 7 yoa, w/programming	92601	92601		$176.00	$177.00
HINT (Hearing in Noise Test) - diagnostic analysis of cochlear implant - greater than 7 yoa, w/programming	92603	92603		$143.00	$166.00
EKG,Standard 12 Lead Resting with Interpretation and Tracings	93000	93000		$15.00	$17.00
RESTING EKG WITH CLAIMANT STANDING & EXERCISE TREADMILL WITH INTERPRETATION & TRACINGS	93015	93015		$73.00	$74.00
Electrocardiographic monitoring for 24 hours by continuous ECG with report, physician review and interpretation	93224	93224		$80.00	$91.00
Echocardiography, real-time with image documentation (2D) with M-mode complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	93306	93306	*Total**	$209.00	$215.00
			TC	$134.00	$135.00
			26	$75.00	$80.00
Echocardiography, real-time with image documentation (2D) with M-mode complete	93307	93307	*Total**	$147.00	$146.00
			TC	$99.00	$97.00
			26	$48.00	$49.00
Stress Echocardiography, real-time with image documentation (2D), during rest and cardiovascular stress test, including ECG monitoring, with interpretation and report	93350	93350		$198.00	$197.00
			TC	$123.00	$119.00
			26	$75.00	$78.00
Doppler - Noninvasive physiologic studies of upper or lower extremity arteries (ankle/brachial indices)	93922	93922	*Total**	$86.00	$87.00
			TC	$72.00	$73.00
			26	$14.00	$14.00
Doppler with EXERCISE - Noninvasive physiologic studies of lower extremity arteries, at rest and following treadmill	93924	93924	*Total**	$166.00	$167.00
			TC	$140.00	$140.00

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
stress testing, complete			26	$26.00	$27.00
SPIROMETRY per attached instructions; PRE AND POST (if required) bronchodilator	94060	94060	*Total**	$46.00	$61.00
			TC	$35.00	$47.00
			26	$11.00	$14.00
Pulmonary Stress Test: 6 Minute Walk Test, including measurement of heart rate, oximetry, and oxygen titration; with tracings. CPT code 94618	94618	94620	*Total**	$35.00	$35.00
			TC	$10.00	$10.00
			26	$25.00	$25.00
Arterial Blood Gas AT REST & EXERCISE (O2 saturation, PO2,PCO2,CO2,PH	82803	82803 2		$26.00	$26.00
Diffusion Capacity (DLCO)	94729	94729	*Total**	$59.00	$57.00
			TC	$50.00	$47.00
			26	$9.00	$10.00
Pulse oximetry, noninvasive for O2 saturation	94760	94760		$2.00	$2.00
Pulse oximetry, multiple determinations (eg, during exercise)	94761	94761		$3.00	$4.00
EEG, Waking, with Interpretation	95819	95819	*Total**	$458.00	$442.00
			TC	$397.00	$379.00
			26	$61.00	$63.00
EMG, One Extremity	95860	95860	*Total**	$123.00	$125.00
			TC	$68.00	$68.00
			26	$55.00	$57.00
EMG, Two Extremities	95861	95861	*Total**	$178.00	$180.00
			TC	$91.00	$90.00
			26	$87.00	$90.00
Nerve Conduction, Velocity &/or Latency study; motor, w/o F-wave study, each nerve	95907	95907	*Total**	$99.00	$100.00
			TC	$42.00	$42.00
			26	$57.00	$58.00
Nerve Conduction, velocity &/or latency study; sensory or mixed, each nerve	95905	95905	*Total**	$47.00	$55.00
			TC	$44.00	$52.00
			26	$3.00	$3.00
Visually Evoked Potential (VEP)	95930	95930	*Total**	$67.00	$68.00
			TC	$48.00	$48.00
			26	$19.00	$20.00
Routine Venipuncture or finger/heel/ear stick for collection of specimen(s)	36415	36415		$3.00	$3.00
Arterial Puncture, withdrawal of blood for diagnosis	36600	36600		$31.00	$32.00
AMA Comprehensive, Extended Metabolic Panel (albumin, t. bilirubin, calcium, carbon dioxide, chloride, creatinine, glucose, alk phosphatase, potassium, t protein, sodium, SGPT, SGOT, BUN)	80053	80053		$10.00	$10.00
Carbamazepine (Tegratol)	80156	80156		$14.00	$14.00

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Valproic Acid (Depakene, Depacote)	80164	80164		$13.00	$13.00
Ethosuximide (Zarontin)	80168	80168		$16.00	$16.00
Phenobarbital	80184	80184		$15.00	$15.00
Phenytoin (Dilantin)	80185	80185		$13.00	$13.00
Primidone (Mysoline)	80188	80188		$16.00	$16.00
Gabapentin (Neurontin)	80171	80299		$21.00	$21.00
Keppra (Levetiracetam)	80177	80299 2		$13.00	$13.00
Urinalysis, Routine	81000	81000		$4.00	$4.00
Serum Albumin	82040	82040		$4.00	$4.00
Ammonia	82140	82140		$14.00	$14.00
Amylase, Serum	82150	82150		$6.00	$6.00
Total Bilirubin	82247	82247		$5.00	$5.00
CPK	82550	82550		$6.00	$6.00
Serum Creatinine	82565	82565		$5.00	$5.00
Creatinine Clearance	82575	82575		$9.00	$9.00
Gases, Blood, any combination of pH, pCO2, pO2, CO2, HCO2 (including calculated O2 saturation)	82803	82803		$26.00	$26.00
Gases, blood, Oxygen saturation only, by direct measurement, except pulse oximetry	82810	82810		$9.00	$9.00
Hemoglobin A1C	83036	83036		$9.00	$9.00
Acid Phosphatase, Blood	84060	84060		$7.00	$7.00
Alkaline Phosphatase	84075	84075		$5.00	$5.00
Serum Potassium	84132	84132		$4.00	$4.00
Protein, 24 hour urine	84156	84156		$3.00	$3.00
BUN	84520	84520		$3.00	$3.00
Uric Acid, Serum	84550	84550		$4.00	$4.00
Hematocrit (HCT)	85014	85014		$2.00	$2.00
Hemoglobin (Hgb)	85018	85018		$2.00	$2.00
Automated Hemogram (CBC), Platelet count, and automated complete differential WBC count	85025	85025		$7.00	$7.00
Reticulocyte count	85044	85044		$4.00	$4.00
INR/Prothrombin Time	85610	85610		$4.00	$4.00
Sedimentation rate, erythrocyte, non-automated	85651	85651		$4.00	$4.00
Partial Thromboplastin Time	85730	85730		$6.00	$6.00
Anti-nuclear Antibodies	86038	86038		$12.00	$12.00
C-Reactive Protein	86140	86140		$5.00	$5.00
Rheumatoid factor; quantitative and qualitative	86431	86431		$5.00	$5.00
Absolute CD4 Count	86361	86361		$26.00	$26.00
HIV Antibody (eg, Western Blot)	86689	86689		$19.00	$19.00
HIV-1Antigen, w/HIV-1 & HIV-2 antibodies	87389	87389		$24.00	$24.00

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Hepatic Function Panel ** (**Includes CMP 80053 and Prothrombin time 85610 and 36415 blood draw)	80076	80076		$8.00	$8.00
Claimant travel for Hearings		99999			
ODAR form completion (MSS Mental)	99080	MSS1152OHA		$15.00	$15.00
ODAR form completion (MSS Physical)		PSS1151OHA		$15.00	$15.00
Review of Records	99199	REVIEWDOCS		$0.00	$0.00
Medical Evidence of Record (MER) Fee				$18.75	$18.75
Interpreter Services DDU ONLY		00081			
Additional Fee for Administration in Spanish		00100		$50.00	$50.00
NOTES:					
*Internist/Familly Nurse Practionner (NP/PA) fee = 85% of $177					
*Mental Status Examination - LISW fee = 75% of $116					
Total* = TC + 26 fees					
Indicates new CPT code					

NM Long Description	MC CPT Code	NM CPT	NM FY2021 Fee	NM FY2020 Fee
WAIS-IV/V	96125	01311	$193.00	$201.00
WISC-IV/V	96125	01312	$189.00	$197.00
Bayley Scales II of Infant Development - Mental and Motor	96112	01315	$175.00	$186.00
WPPSI-R	96112	01316	$175.00	$186.00
Leiter-3	96112	01317	$140.00	$149.00
Wechsler Memory Scale-IV	96116	01326	$103.00	$105.00
Wide Range Achievement Test	96116	01325	$103.00	$105.00
Trails A & B	96116	01327	$77.00	$79.00
Test of Native/Non-Verbal Intelligence III	96125	01335	$112.00	$117.00
Wide Range Assessment of Memory and	96116	01351	$103.00	$105.00
Wechsler Individual Achievement Test	96125	01352	$112.00	$117.00
Vineland Adaptive Behavior Scale	96116	01353	$77.00	$79.00

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY20201 Fee	NM FY2020 Fee
Chest, AP & Lateral	71046	71020	*Total **	$33.00	$33.00
			TC	$22.00	$21.00
26 is for the doctor's			26	$11.00	$12.00
Cervical Spine, AP & Lateral	72040	72040	*Total **	$39.00	$39.00
			TC	$28.00	$27.00
			26	$11.00	$12.00
Thoracic Spine, AP & Lateral	72070	72070	*Total **	$32.00	$32.00
			TC	$22.00	$21.00
			26	$10.00	$11.00
Scoliosis Study-supine and erect	72082	72090	*Total **	$70.00	$69.00
			TC	$54.00	$52.00
			26	$16.00	$17.00
Lumbo-sacral Spine, AP & Lateral	72100	72100	*Total **	$39.00	$39.00
			TC	$28.00	$27.00
			26	$11.00	$12.00
Pelvis, AP	72170	72170	*Total **	$28.00	$29.00
			TC	$19.00	$20.00
			26	$9.00	$9.00
Sacroiliac Joints 2 views	72200	72200	*Total **	$32.00	$33.00
			TC	$24.00	$23.00
			26	$8.00	$10.00
Right Clavicle, 2 views	73000	73000	*Total **	$32.00	$30.00
			TC	$24.00	$21.00
			26	$8.00	$9.00
Left Clavicle, 2 views		73001		**see above**	
Right Scapula, complete	73010	73010	*Total **	$23.00	$28.00
			TC	$14.00	$19.00
			26	$9.00	$9.00
Left Scapula, complete		73011		**see above**	
Right Shoulder, 2 views	73030	73030	*Total **	$35.00	$34.00
			TC	$25.00	$24.00
			26	$10.00	$10.00
Left Shoulder, 2 views		73031		**see above**	
Right Humerus, 2 views	73060	73060	*Total **	$32.00	$32.00
			TC	$24.00	$23.00
			26	$8.00	$9.00
Left Humerus, 2 views		73061		**see above**	
Right Elbow, AP and Lateral views	73070	73070	*Total **	$28.00	$29.00
			TC	$20.00	$20.00
			26	$8.00	$9.00
Left Elbow, AP and Lateral views		73071		**see above**	
Right Forearm, AP and Lateral views	73090	73090	*Total **	$29.00	$29.00
			TC	$21.00	$20.00
			26	$8.00	$9.00
Left Forearm, AP and Lateral views		73091		**see above**	
Right Wrist, AP and Lateral views	73100	73100	*Total **	$33.00	$33.00
			TC	$25.00	$24.00
			26	$8.00	$9.00
Left Wrist, AP and Lateral views		73101		**see above**	
Right Hand, 2 views	73120	73120	*Total **	$30.00	$31.00
			TC	$22.00	$22.00
			26	$8.00	$9.00
Left Hand, 2 views		73121		**see above**	
Right Hip, 2 views	73502	73510	*Total **	$46.00	$46.00
			TC	$35.00	$34.00

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY20201 Fee	NM FY2020 Fee
			26	$11.00	$12.00
Left Hip, 2 views		73511		**see above**	
Right Femur, AP and Lateral views	73551	73550	*Total **	$29.00	$30.00
			TC	$21.00	$21.00
			26	$8.00	$9.00
Left Femur, AP and Lateral views		73551		**see above**	
Right Knee, AP and Lateral views, Standing	73560	73560	*Total **	$34.00	$34.00
			TC	$26.00	$25.00
			26	$8.00	$9.00
Left Knee, AP and Lateral views,		73561		**see above**	
Right Tibia-Fibula, AP and Lateral views	73590	73590	*Total **	$31.00	$31.00
			TC	$23.00	$22.00
			26	$8.00	$9.00
Left Tibia-Fibula, AP and Lateral		73591		**see above**	
Right Ankle, AP and Lateral views	73600	73600	*Total **	$32.00	$32.00
			TC	$24.00	$23.00
			26	$8.00	$9.00
Left Ankle, AP and Lateral views		73601		**see above**	
Right Foot, AP and Lateral views	73620	73620	*Total **	$28.00	$28.00
			TC	$20.00	$20.00
			26	$8.00	$8.00
Left Foot, AP and lateral views		73621		**see above**	
Right Calcaneus, AP and Lateral views	73650	73650	*Total **	$28.00	$29.00
			TC	$20.00	$20.00
			26	$8.00	$9.00
Left Calcaneus, AP and Lateral views		73651		**see above**	
Bone Age Studies, with Interpretation	77072	76020	*Total **	$26.00	$26.00
			TC	$16.00	$16.00
			26	$10.00	$10.00
Right & Left Shoulder, AP & Lateral	73030	X3030	*Total **	$70.00	$68.00
			TC	$50.00	$48.00
			26	$20.00	$20.00
Right & Left Humerus, AP & Lateral	73060	X3060	*Total **	$64.00	$64.00
			TC	$48.00	$46.00
			26	$16.00	$18.00
Right & Left Elbow, AP & Lateral	73070	X3070	*Total **	$56.00	$58.00
			TC	$40.00	$40.00
			26	$16.00	$18.00
Right & Left Forearm, AP & Lateral	73090	X3090	*Total **	$58.00	$58.00
			TC	$42.00	$40.00
			26	$16.00	$18.00
Right & Left Wrist, AP & Lateral	73100	X3100	*Total **	$66.00	$66.00
			TC	$50.00	$48.00
			26	$16.00	$18.00
Right & Left Hands, AP & Lateral	73120	X3120	*Total **	$60.00	$62.00
			TC	$44.00	$44.00
			26	$16.00	$18.00
Right & Left Hips, AP & Lateral	73510	X3510	*Total **	$92.00	$92.00
			TC	$70.00	$68.00
			26	$22.00	$24.00
Right & Left Femurs, AP & Lateral	73550	X3550	*Total **	$58.00	$60.00
			TC	$42.00	$42.00
			26	$16.00	$18.00
			*Total **	$68.00	$68.00

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY20201 Fee	NM FY2020 Fee
Right & Left Knees, AP & Lateral	73560	X3560	TC	$52.00	$50.00
			26	$16.00	$18.00
			Total *	$62.00	$62.00
Right & Left Tibia-Fibula, AP & Lateral	73590	X3590	TC	$46.00	$44.00
			26	$16.00	$18.00
			Total *	$64.00	$64.00
Right & Left Ankles, AP & Lateral	73600	X3600	TC	$48.00	$46.00
			26	$16.00	$18.00
			Total *	$56.00	$56.00
Right & Left Feet, AP & Lateral	73620	X3620	TC	$40.00	$40.00
			26	$16.00	$16.00
			Total *	$56.00	$58.00
Right & Left Calcaneus, AP & Lateral	73650	X3650	TC	$40.00	$40.00
			26	$16.00	$18.00
	new CPT				

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY2021 Fee	NM FY2020 Fee
Interpreter Services DDU ONLY		00081			
Additional Fee for Administration in Spanish		00100			
Routine Venipuncture or finger/heel/ear stick for collection of specimen(s)	36415	36415		$3.00	$3.00
Arterial Puncture, withdrawal of blood for diagnosis	36600	36600		$31.00	$32.00
Goldmann or ARC	92082	92082		$48.00	$49.00
Humphrey VTAP	92083	92083		$65.00	$65.00
Optical Coherence Tomography - Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; optic nerve	92133	92133		$38.00	$39.00
Optical Coherence Tomography - Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; retina	92134	92134		$42.00	$42.00
Basic Comprehensive Audiometry, Aided Pure Tone, Air & Bone with Speech Recognition Bone Speech Threshold & Discrimination (Audiologist Exam)	92557	92557		$41.00	$40.00
Tympanogram	92567	92567		$17.00	$16.00
Brainstem Evoked Auditory Response Recording	92652	92585		$124.00	$138.00
Cerumen Removal	69210	69210 1		$50.00	$51.00
Cerumen Removal - Bilateral	69210	69210 2		$100.00	$102.00
HINT (Hearing in Noise Test) - diagnostic analysis of cochlear implant - less than 7 yoa, w/programming	92601	92601		$176.00	$177.00
HINT (Hearing in Noise Test) - diagnostic analysis of cochlear implant - greater than 7 yoa, w/programming	92603	92603		$143.00	$166.00
EKG,Standard 12 Lead Resting with Interpretation and Tracings	93000	93000		$15.00	$17.00
RESTING EKG WITH CLAIMANT STANDING & EXERCISE TREADMILL WITH INTERPRETATION & TRACINGS	93015	93015		$73.00	$74.00
Electrocardiographic monitoring for 24 hours by continuous ECG with report, physician review and interpretation	93224	93224		$80.00	$91.00
Echocardiography, real-time with image documentation (2D) with M-mode complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	93306	93306	*Total **	$209.00	$215.00
			TC	$134.00	$135.00
			26	$75.00	$80.00
Echocardiography, real-time with image documentation (2D) with M-mode complete	93307	93307	*Total **	$147.00	$146.00
			TC	$99.00	$97.00
			26	$48.00	$49.00
Stress Echocardiography, real-time with image documentation (2D), during rest and cardiovascular stress test, including ECG monitoring, with interpretation and report	93350	93350	*Total **	$198.00	$197.00
			TC	$123.00	$119.00
			26	$75.00	$78.00
Doppler - Noninvasive physiologic studies of upper or lower extremity arteries (ankle/brachial indices)	93922	93922	*Total **	$86.00	$87.00
			TC	$72.00	$73.00
			26	$14.00	$14.00

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY2021 Fee	NM FY2020 Fee
Doppler with EXERCISE - Noninvasive physiologic studies of lower extremity arteries, at rest and following treadmill stress testing, complete	93924	93924	*Total* *	$166.00	$167.00
			TC	$140.00	$140.00
			26	$26.00	$27.00
SPIROMETRY per attached instructions; PRE AND POST (if required) bronchodilator	94060	94060	*Total* *	$46.00	$61.00
			TC	$35.00	$47.00
			26	$11.00	$14.00
Pulmonary Stress Test: 6 Minute Walk Test, including measurement of heart rate, oximetry, and oxygen titration; with tracings.	94618	94620	*Total* *	$35.00	$35.00
			TC	$10.00	$10.00
			26	$25.00	$25.00
Arterial Blood Gas AT REST & EXERCISE (O2 saturation, PO2,PCO2,CO2,PH	82803	82803 2		$26.00	$26.00
Diffusion Capacity (DLCO)	94729	94729	*Total* *	$59.00	$57.00
			TC	$50.00	$47.00
			26	$9.00	$10.00
Pulse oximetry, noninvasive for O2 saturation	94760	94760		$2.00	$2.00
Pulse oximetry, multiple determinations (eg, during exercise)	94761	94761		$3.00	$4.00
EEG, Waking, with Interpretation	95819	95819	*Total* *	$458.00	$442.00
			TC	$397.00	$379.00
			26	$61.00	$63.00
EMG, One Extremity	95860	95860	*Total* *	$123.00	$125.00
			TC	$68.00	$68.00
			26	$55.00	$57.00
EMG, Two Extremities	95861	95861	*Total* *	$178.00	$180.00
			TC	$91.00	$90.00
			26	$87.00	$90.00
Nerve Conduction, Velocity &/or Latency study; motor, w/o F-wave study, each nerve	95907	95907	*Total* *	$99.00	$100.00
			TC	$42.00	$42.00
			26	$57.00	$58.00
Nerve Conduction, velocity &/or latency study; sensory or mixed, each nerve	95905	95905	*Total* *	$47.00	$55.00
			TC	$44.00	$52.00
			26	$3.00	$3.00
Visually Evoked Potential (VEP)	95930	95930	*Total* *	$67.00	$68.00
			TC	$48.00	$48.00
			26	$19.00	$20.00
Claimant travel for Hearings		99999			
ODAR form completion (MSS Mental)	99080	MSS1152OHA		$15.00	$15.00
ODAR form completion (MSS Physical)		PSS1151OHA		$15.00	$15.00
Review of Records	99199	REVIEWDOCS		$0.00	$0.00
Medical Evidence of Record (MER) Fee				$18.75	$18.75

NM Long Description	MC CPT Code	NM CPT	NM FY2021 Fee	NM FY2020 Fee
AMA Comprehensive, Extended Metabolic Panel (albumin, t. bilirubin, calcium, carbon dioxide, chloride, creatinine, glucose, alk phosphatase, potassium, t protein, sodium, SGPT, SGOT, BUN)	80053	80053	$10.00	$10.00
Carbamazepine (Tegratol)	80156	80156	$14.00	$14.00
Valproic Acid (Depakene, Depacote)	80164	80164	$13.00	$13.00
Ethosuximide (Zarontin)	80168	80168	$16.00	$16.00
Phenobarbital	80184	80184	$15.00	$15.00
Phenytoin (Dilantin)	80185	80185	$13.00	$13.00
Primidone (Mysoline)	80188	80188	$16.00	$16.00
Gabapentin (Neurontin)	80171	80299	$21.00	$21.00
Keppra (Levetiracetam)	80177	80299 2	$13.00	$13.00
Urinalysis, Routine	81000	81000	$4.00	$4.00
Serum Albumin	82040	82040	$4.00	$4.00
Ammonia	82140	82140	$14.00	$14.00
Amylase, Serum	82150	82150	$6.00	$6.00
Total Bilirubin	82247	82247	$5.00	$5.00
CPK	82550	82550	$6.00	$6.00
Serum Creatinine	82565	82565	$5.00	$5.00
Creatinine Clearance	82575	82575	$9.00	$9.00
Gases, Blood, any combination of pH, pCO2, pO2, CO2, HCO2 (including calculated O2 saturation)	82803	82803	$26.00	$26.00
Gases, blood, Oxygen saturation only, by direct measurement, except pulse oximetry	82810	82810	$9.00	$9.00
Hemoglobin A1C	83036	83036	$9.00	$9.00
Acid Phosphatase, Blood	84060	84060	$7.00	$7.00
Alkaline Phosphatase	84075	84075	$5.00	$5.00
Serum Potassium	84132	84132	$4.00	$4.00
Protein, 24 hour urine	84156	84156	$3.00	$3.00

NM Long Description	MC CPT Code	NM CPT	NM FY2021 Fee	NM FY2020 Fee
BUN	84520	84520	$3.00	$3.00
Uric Acid, Serum	84550	84550	$4.00	$4.00
Hematocrit (HCT)	85014	85014	$2.00	$2.00
Hemoglobin (Hgb)	85018	85018	$2.00	$2.00
Automated Hemogram (CBC), Platelet count, and automated complete differential WBC count	85025	85025	$7.00	$7.00
Reticulocyte count	85044	85044	$4.00	$4.00
INR/Prothrombin Time	85610	85610	$4.00	$4.00
Sedimentation rate, erythrocyte, non-automated	85651	85651	$4.00	$4.00
Partial Thromboplastin Time	85730	85730	$6.00	$6.00
Anti-nuclear Antibodies	86038	86038	$12.00	$12.00
C-Reactive Protein	86140	86140	$5.00	$5.00
Rheumatoid factor; quantitative and qualitative	86431	86431	$5.00	$5.00
Absolute CD4 Count	86361	86361	$26.00	$26.00
HIV Antibody (eg, Western Blot)	86689	86689	$19.00	$19.00
HIV-1Antigen, w/HIV-1 & HIV-2 antibodies	87389	87389	$24.00	$24.00
Hepatic Function Panel **	80076	80053L	$8.00	$8.00
(**Includes CMP 80053 and Prothrombin time 85610 and 36415 blood draw)				