

## Annex F - List of Procedure Case Rates for Primary Care Facilities - Infirmaries/Dispensaries

Code	Description	Case Rate	Health Facility Fee	Professional Fee
10060	INCISION AND DRAINAGE OF ABSCESS (E.G., CARBUNCLE, SUPPURATIVE HIDRADENITIS, CUTANEOUS OR SUBCUTANEOUS ABSCESS, CYST, FURUNCLE, OR PARONYCHIA)	4,968.60	3,822.00	1,146.60
10080	INCISION AND DRAINAGE OF PILONIDAL CYST	4,968.60	3,822.00	1,146.60
10120	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES	4,968.60	3,822.00	1,146.60
10140	INCISION AND DRAINAGE OF HEMATOMA, SEROMA, OR FLUID COLLECTION	4,968.60	3,822.00	1,146.60
10160	PUNCTURE ASPIRATION OF ABSCESS, HEMATOMA, BULLA, OR CYST	4,968.60	3,822.00	1,146.60
10180	INCISION AND DRAINAGE, COMPLEX, POSTOPERATIVE WOUND INFECTION	7,589.40	5,869.50	1,719.90
11040	DEBRIDEMENT; SKIN, PARTIAL THICKNESS	4,968.60	3,822.00	1,146.60
11041	DEBRIDEMENT; SKIN, FULL THICKNESS	4,968.60	3,822.00	1,146.60
11042	DEBRIDEMENT; SKIN, AND SUBCUTANEOUS TISSUE	7,753.20	5,460.00	2,293.20
11043	DEBRIDEMENT; SKIN, SUBCUTANEOUS TISSUE, AND MUSCLE	10,947.30	7,507.50	3,439.80
11044	DEBRIDEMENT; SKIN, SUBCUTANEOUS TISSUE, MUSCLE, AND BONE	10,947.30	7,507.50	3,439.80
11100	BIOPSY OF SKIN, SUBCUTANEOUS TISSUE AND/OR MUCOUS MEMBRANE (INCLUDING SIMPLE CLOSURE), UNLESS OTHERWISE LISTED; SINGLE OR MULTIPLE LESION	4,968.60	3,822.00	1,146.60
11300	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS; LESION DIAMETER 0.5 CM OR LESS	7,589.40	5,869.50	1,719.90
11301	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS; LESION DIAMETER 0.6 TO 1.0 CM	5,050.50	3,215.94	1,834.56
11302	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS; LESION DIAMETER 1.1 TO 2.0 CM	10,947.30	7,507.50	3,439.80
11305	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 0.5 CM OR LESS	7,589.40	5,869.50	1,719.90
11306	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 0.6 TO 1.0 CM	5,050.50	3,215.94	1,834.56
11307	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 1.1 TO 2.0 CM	10,947.30	7,507.50	3,439.80
11310	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 0.5 CM OR LESS	5,050.50	3,215.94	1,834.56
11311	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 0.6 TO 1.0 CM	10,947.30	7,507.50	3,439.80
11400	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), TRUNK, ARMS OR LEGS; LESION DIAMETER 0.5 CM OR LESS	4,968.60	3,822.00	1,146.60
11401	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), TRUNK, ARMS OR LEGS; LESION DIAMETER 0.6 TO 1.0 CM	4,968.60	3,822.00	1,146.60
11402	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), TRUNK, ARMS OR LEGS; LESION DIAMETER 1.1 TO 2.0 CM	4,968.60	3,822.00	1,146.60
11403	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), TRUNK, ARMS OR LEGS; LESION DIAMETER 2.1 TO 3.0 CM	4,968.60	3,822.00	1,146.60
11404	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), TRUNK, ARMS OR LEGS; LESION DIAMETER 3.1 TO 4.0 CM	4,968.60	3,822.00	1,146.60
11406	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), TRUNK, ARMS OR LEGS; LESION DIAMETER OVER 4.0 CM	4,968.60	3,822.00	1,146.60

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11420	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 0.5 CM OR LESS	4,968.60	3,822.00	1,146.60
11421	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 0.6 TO 1.0 CM	4,968.60	3,822.00	1,146.60
11422	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 1.1 TO 2.0 CM	4,968.60	3,822.00	1,146.60
11423	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 2.1 TO 3.0 CM	4,968.60	3,822.00	1,146.60
11424	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 3.1 TO 4.0 CM	4,968.60	3,822.00	1,146.60
11426	EXCISION, BENIGN LESION, EXCEPT SKIN TAG (UNLESS LISTED ELSEWHERE), SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER OVER 4.0 CM	4,968.60	3,822.00	1,146.60
11440	EXCISION, OTHER BENIGN LESION (UNLESS LISTED ELSEWHERE), FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 0.5 CM OR LESS	5,607.42	4,231.50	1,375.92
11441	EXCISION, OTHER BENIGN LESION (UNLESS LISTED ELSEWHERE), FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 0.6 TO 1.0 CM	5,607.42	4,231.50	1,375.92
11442	EXCISION, OTHER BENIGN LESION (UNLESS LISTED ELSEWHERE), FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 1.1 TO 2.0 CM	5,607.42	4,231.50	1,375.92
11443	EXCISION, OTHER BENIGN LESION (UNLESS LISTED ELSEWHERE), FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 2.1 TO 3.0 CM	5,607.42	4,231.50	1,375.92
11444	EXCISION, OTHER BENIGN LESION (UNLESS LISTED ELSEWHERE), FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 3.1 TO 4.0 CM	5,607.42	4,231.50	1,375.92
11446	EXCISION, OTHER BENIGN LESION (UNLESS LISTED ELSEWHERE), FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER OVER 4.0 CM	5,607.42	4,231.50	1,375.92
11450	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, AXILLARY	10,947.30	7,507.50	3,439.80
11462	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, INGUINAL	10,947.30	7,507.50	3,439.80
11470	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, PERIANAL, PERINEAL OR UMBILICAL	10,947.30	7,507.50	3,439.80
11600	EXCISION, MALIGNANT LESION, TRUNK, ARMS, OR LEGS; LESION DIAMETER 0.5 CM OR LESS	7,589.40	5,869.50	1,719.90
11601	EXCISION, MALIGNANT LESION, TRUNK, ARMS, OR LEGS; LESION DIAMETER 0.6 TO 1.0 CM	7,589.40	5,869.50	1,719.90
11602	EXCISION, MALIGNANT LESION, TRUNK, ARMS, OR LEGS; LESION DIAMETER 1.1 TO 2.0 CM	7,589.40	5,869.50	1,719.90
11603	EXCISION, MALIGNANT LESION, TRUNK, ARMS, OR LEGS; LESION DIAMETER 2.1 TO 3.0 CM	7,589.40	5,869.50	1,719.90
11604	EXCISION, MALIGNANT LESION, TRUNK, ARMS, OR LEGS; LESION DIAMETER 3.1 TO 4.0 CM	7,589.40	5,869.50	1,719.90
11606	EXCISION, MALIGNANT LESION, TRUNK, ARMS, OR LEGS; LESION DIAMETER OVER 4.0 CM	7,589.40	5,869.50	1,719.90
11620	EXCISION, MALIGNANT LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 0.5 CM OR LESS	7,753.20	5,460.00	2,293.20

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11621	EXCISION, MALIGNANT LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 0.6 TO 1.0 CM	7,753.20	5,460.00	2,293.20
11622	EXCISION, MALIGNANT LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 1.1 TO 2.0 CM	7,753.20	5,460.00	2,293.20
11623	EXCISION, MALIGNANT LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 2.1 TO 3.0 CM	7,753.20	5,460.00	2,293.20
11624	EXCISION, MALIGNANT LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 3.1 TO 4.0 CM	7,753.20	5,460.00	2,293.20
11626	EXCISION, MALIGNANT LESION, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER OVER 4.0 CM	7,753.20	5,460.00	2,293.20
11640	EXCISION, MALIGNANT LESION, FACE, EARS, EYELIDS, NOSE, LIPS; LESION DIAMETER 0.5 CM OR LESS	7,753.20	5,460.00	2,293.20
11641	EXCISION, MALIGNANT LESION, FACE, EARS, EYELIDS, NOSE, LIPS; LESION DIAMETER 0.6 TO 1.0 CM	7,753.20	5,460.00	2,293.20
11642	EXCISION, MALIGNANT LESION, FACE, EARS, EYELIDS, NOSE, LIPS; LESION DIAMETER 1.1 TO 2.0 CM	7,753.20	5,460.00	2,293.20
11643	EXCISION, MALIGNANT LESION, FACE, EARS, EYELIDS, NOSE, LIPS; LESION DIAMETER 2.1 TO 3.0 CM	7,753.20	5,460.00	2,293.20
11644	EXCISION, MALIGNANT LESION, FACE, EARS, EYELIDS, NOSE, LIPS; LESION DIAMETER 3.1 TO 4.0 CM	7,753.20	5,460.00	2,293.20
11646	EXCISION, MALIGNANT LESION, FACE, EARS, EYELIDS, NOSE, LIPS; LESION DIAMETER OVER 4.0 CM	7,753.20	5,460.00	2,293.20
11720	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); ONE TO FIVE	4,968.60	3,822.00	1,146.60
11721	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); SIX OR MORE	7,589.40	5,869.50	1,719.90
11730	AVULSION OF NAIL PLATE, PARTIAL OR COMPLETE	4,968.60	3,822.00	1,146.60
11740	EVACUATION OF SUBUNGUAL HEMATOMA	4,968.60	3,822.00	1,146.60
11750	EXCISION OF NAIL AND NAIL MATRIX, PARTIAL OR COMPLETE (E.G., INGROWN OR DEFORMED NAIL) FOR PERMANENT REMOVAL	4,968.60	3,822.00	1,146.60
11752	EXCISION OF NAIL AND NAIL MATRIX, PARTIAL OR COMPLETE (E.G., INGROWN OR DEFORMED NAIL) FOR PERMANENT REMOVAL W/ AMPUTATION OF TUFT OF DISTAL PHALANX	12,694.50	9,828.00	2,866.50
11755	BIOPSY OF NAIL UNIT, ANY METHOD (E.G., PLATE, BED, MATRIX, HYPONYCHIIUM, PROXIMAL AND LATERAL NAIL FOLDS)	4,968.60	3,822.00	1,146.60
11760	REPAIR OF NAIL BED	7,589.40	5,869.50	1,719.90
11762	RECONSTRUCTION OF NAIL BED W/ GRAFT	12,694.50	9,828.00	2,866.50
11765	WEDGE EXCISION OF SKIN OF NAIL FOLD (E.G., FOR INGROWN TOENAIL)	4,968.60	3,822.00	1,146.60
11770	EXCISION OF PILONIDAL CYST OR SINUS	7,753.20	5,460.00	2,293.20
12001	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL GENITALIA, TRUNK AND/OR EXTREMITIES (INCLUDING HANDS AND FEET); 2.5 CM OR LESS	4,968.60	3,822.00	1,146.60
12002	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL GENITALIA, TRUNK AND/OR EXTREMITIES (INCLUDING HANDS AND FEET); 2.6 CM TO 7.5 CM	7,589.40	5,869.50	1,719.90
12004	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL GENITALIA, TRUNK AND/OR EXTREMITIES (INCLUDING HANDS AND FEET); 7.6 CM TO 12.5 CM	7,753.20	5,460.00	2,293.20

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12005	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL GENITALIA, TRUNK AND/OR EXTREMITIES (INCLUDING HANDS AND FEET); 12.6 CM TO 20.0 CM	7,753.20	5,460.00	2,293.20
12006	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL GENITALIA, TRUNK AND/OR EXTREMITIES (INCLUDING HANDS AND FEET); 20.1 CM TO 30.0 CM	7,753.20	5,460.00	2,293.20
12007	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL GENITALIA, TRUNK AND/OR EXTREMITIES (INCLUDING HANDS AND FEET); OVER 30.0 CM	7,753.20	5,460.00	2,293.20
12011	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 2.5 CM OR LESS	7,753.20	5,460.00	2,293.20
12013	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 2.6 CM TO 5.0 CM	12,694.50	9,828.00	2,866.50
12014	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 5.1 CM TO 7.5 CM	13,038.48	9,828.00	3,210.48
12015	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 7.6 CM TO 12.5 CM	10,947.30	7,507.50	3,439.80
12016	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 12.6 CM TO 20.0 CM	10,947.30	7,507.50	3,439.80
12017	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 20.1 CM TO 30.0 CM	10,947.30	7,507.50	3,439.80
12018	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; OVER 30.0 CM	10,947.30	7,507.50	3,439.80
12031	LAYER CLOSURE OF WOUNDS OF SCALP, AXILLAE, TRUNK, AND/OR EXTREMITIES (EXCLUDING HANDS AND FEET); 2.5 CM OR LESS	4,968.60	3,822.00	1,146.60
12032	LAYER CLOSURE OF WOUNDS OF SCALP, AXILLAE, TRUNK, AND/OR EXTREMITIES (EXCLUDING HANDS AND FEET); 2.6 CM TO 7.5 CM	7,589.40	5,869.50	1,719.90
12034	LAYER CLOSURE OF WOUNDS OF SCALP, AXILLAE, TRUNK, AND/OR EXTREMITIES (EXCLUDING HANDS AND FEET); 7.6 CM TO 12.5 CM	7,753.20	5,460.00	2,293.20
12035	LAYER CLOSURE OF WOUNDS OF SCALP, AXILLAE, TRUNK, AND/OR EXTREMITIES (EXCLUDING HANDS AND FEET); 12.6 CM TO 20.0 CM	7,753.20	5,460.00	2,293.20
12036	LAYER CLOSURE OF WOUNDS OF SCALP, AXILLAE, TRUNK, AND/OR EXTREMITIES (EXCLUDING HANDS AND FEET); 20.1 CM TO 30.0 CM	7,753.20	5,460.00	2,293.20
12037	LAYER CLOSURE OF WOUNDS OF SCALP, AXILLAE, TRUNK, AND/OR EXTREMITIES (EXCLUDING HANDS AND FEET); OVER 30.0 CM	7,753.20	5,460.00	2,293.20
12041	LAYER CLOSURE OF WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; 2.5 CM OR LESS	7,753.20	5,460.00	2,293.20
12042	LAYER CLOSURE OF WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; 2.6 CM TO 7.5 CM	12,694.50	9,828.00	2,866.50
12044	LAYER CLOSURE OF WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; 7.6 CM TO 12.5 CM	10,947.30	7,507.50	3,439.80
12051	LAYER CLOSURE OF WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 2.5 CM OR LESS	7,753.20	5,460.00	2,293.20
12052	LAYER CLOSURE OF WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 2.6 CM TO 5.0 CM	7,753.20	5,460.00	2,293.20
12053	LAYER CLOSURE OF WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANES; 5.1 CM TO 7.5 CM	10,947.30	7,507.50	3,439.80

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12054	LAYER CLOSURE OF WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS MEMBRANCES; 7.6 CM TO 12.5 CM	10,947.30	7,507.50	3,439.80
17000	DESTRUCTION BY ANY METHOD, INCLUDING LASER, W/ OR W/O SURGICAL CURETTEMENT, ALL BENIGN FACIAL LESIONS OR PREMALIGNANT LESIONS IN ANY LOCATION, OR BENIGN LESIONS OTHER THAN CUTANEOUS VASCULAR PROLIFERATIVE LESIONS, INCLUDING LOCAL ANESTHESIA; ANY NUMBER OF	8,190.00	5,187.00	3,003.00
17250	CHEMICAL CAUTERIZATION OF GRANULATION TISSUE (PROUD FLESH, SINUS OR FISTULA)	7,753.20	5,460.00	2,293.20
17260	DESTRUCTION, MALIGNANT LESION, ANY METHOD, TRUNK, ARMS OR LEGS; LESION DIAMETER 0.5 CM OR LESS	7,753.20	5,460.00	2,293.20
17261	DESTRUCTION, MALIGNANT LESION, ANY METHOD, TRUNK, ARMS OR LEGS; LESION DIAMETER 0.6 TO 1.0 CM	7,753.20	5,460.00	2,293.20
17262	DESTRUCTION, MALIGNANT LESION, ANY METHOD, TRUNK, ARMS OR LEGS; LESION DIAMETER 1.1 TO 2.0 CM	7,753.20	5,460.00	2,293.20
17263	DESTRUCTION, MALIGNANT LESION, ANY METHOD, TRUNK, ARMS OR LEGS; LESION DIAMETER 2.1 TO 3.0 CM	7,753.20	5,460.00	2,293.20
17264	DESTRUCTION, MALIGNANT LESION, ANY METHOD, TRUNK, ARMS OR LEGS; LESION DIAMETER 3.1 TO 4.0 CM	7,753.20	5,460.00	2,293.20
17266	DESTRUCTION, MALIGNANT LESION, ANY METHOD, TRUNK, ARMS OR LEGS; LESION DIAMETER OVER 4.0 CM	7,753.20	5,460.00	2,293.20
17270	DESTRUCTION, MALIGNANT LESION, ANY METHOD, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 0.5 CM OR LESS	7,753.20	5,460.00	2,293.20
17271	DESTRUCTION, MALIGNANT LESION, ANY METHOD, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 0.6 TO 1.0 CM	7,753.20	5,460.00	2,293.20
17272	DESTRUCTION, MALIGNANT LESION, ANY METHOD, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 1.1 TO 2.0 CM	7,753.20	5,460.00	2,293.20
17273	DESTRUCTION, MALIGNANT LESION, ANY METHOD, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 2.1 TO 3.0 CM	7,753.20	5,460.00	2,293.20
17274	DESTRUCTION, MALIGNANT LESION, ANY METHOD, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER 3.1 TO 4.0 CM	7,753.20	5,460.00	2,293.20
17276	DESTRUCTION, MALIGNANT LESION, ANY METHOD, SCALP, NECK, HANDS, FEET, GENITALIA; LESION DIAMETER OVER 4.0 CM	7,753.20	5,460.00	2,293.20
17280	DESTRUCTION, MALIGNANT LESION, ANY METHOD, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 0.5 CM OR LESS	12,694.50	9,828.00	2,866.50
17281	DESTRUCTION, MALIGNANT LESION, ANY METHOD, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 0.6 TO 1.0 CM	12,694.50	9,828.00	2,866.50
17282	DESTRUCTION, MALIGNANT LESION, ANY METHOD, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 1.1 TO 2.0 CM	12,694.50	9,828.00	2,866.50
17283	DESTRUCTION, MALIGNANT LESION, ANY METHOD, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 2.1 TO 3.0 CM	12,694.50	9,828.00	2,866.50
17284	DESTRUCTION, MALIGNANT LESION, ANY METHOD, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER 3.1 TO 4.0 CM	12,694.50	9,828.00	2,866.50

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17286	DESTRUCTION, MALIGNANT LESION, ANY METHOD, FACE, EARS, EYELIDS, NOSE, LIPS, MUCOUS MEMBRANE; LESION DIAMETER OVER 4.0 CM	12,694.50	9,828.00	2,866.50
17304	CHEMOSURGERY (MOHS MICROGRAPHIC TECHNIQUE), INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCISION OF TISSUE SPECIMENS, MAPPING, COLOR CODING OF SPECIMENS, MICROSCOPIC EXAMINATION OF SPECIMENS BY THE SURGEON, AND COMPLETE HISTOPATHOLOGIC PREPARATION; FIR	10,947.30	7,507.50	3,439.80
19000	PUNCTURE ASPIRATION OF CYST OF BREAST;	4,968.60	3,822.00	1,146.60
19100	BIOPSY OF BREAST; NEEDLE CORE	4,968.60	3,822.00	1,146.60
19101	BIOPSY OF BREAST; INCISIONAL	7,589.40	5,869.50	1,719.90
19120	EXCISION OF CYST, FIBROADENOMA, OR OTHER BENIGN OR MALIGNANT TUMOR ABERRANT BREAST TISSUE, DUCT LESION OR NIPPLE LESION (EXCEPT 19140), MALE OR FEMALE, ONE OR MORE LESIONS	10,947.30	7,507.50	3,439.80
19125	EXCISION OF BREAST LESION IDENTIFIED BY PREOPERATIVE PLACEMENT OF RADIOLOGICAL MARKER; SINGLE LESION	10,947.30	7,507.50	3,439.80
19140	MASTECTOMY FOR GYNECOMASTIA	30,030.00	18,018.00	12,012.00
20200	BIOPSY, MUSCLE	5,607.42	4,231.50	1,375.92
20206	BIOPSY, MUSCLE, PERCUTANEOUS NEEDLE	4,782.96	4,095.00	687.96
20520	REMOVAL OF FOREIGN BODY IN MUSCLE OR TENDON SHEATH	10,947.30	7,507.50	3,439.80
20600	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION; SMALL JOINT, BURSA OR GANGLION CYST (E.G., FINGERS, TOES)	7,589.40	5,869.50	1,719.90
20605	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION; INTERMEDIATE JOINT, BURSA OR GANGLION CYST (E.G., TEMPOROMANDIBULAR, ACROMIOCLAVICULAR, WRIST, ELBOW OR ANKLE, OLECRANON BURSA)	12,694.50	9,828.00	2,866.50
20610	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION; MAJOR JOINT OR BURSA (E.G., SHOULDER, HIP, KNEE JOINT, SUBACROMIAL BURSA)	12,694.50	9,828.00	2,866.50
20650	INSERTION OF WIRE OR PIN W/ APPLICATION OF SKELETAL TRACTION, INCLUDING REMOVAL	10,947.30	7,507.50	3,439.80
20802	REPLANTATION, ARM (INCLUDES SURGICAL NECK OF HUMERUS THROUGH ELBOW JOINT), COMPLETE AMPUTATION	12,694.50	9,828.00	2,866.50
21501	INCISION AND DRAINAGE, DEEP ABSCESS OR HEMATOMA, SOFT TISSUES OF NECK OR THORAX;	7,753.20	5,460.00	2,293.20
21502	INCISION AND DRAINAGE, DEEP ABSCESS OR HEMATOMA, SOFT TISSUES OF NECK OR THORAX; W/ PARTIAL RIB OSTECTOMY	10,947.30	7,507.50	3,439.80
21510	INCISION, DEEP, W/ OPENING OF BONE CORTEX (E.G., FOR OSTEOMYELITIS OR BONE ABSCESS), THORAX	5,607.42	4,231.50	1,375.92
21550	BIOPSY, SOFT TISSUE OF NECK OR THORAX	7,753.20	5,460.00	2,293.20
21555	EXCISION TUMOR, SOFT TISSUE OF NECK OR THORAX; SUBCUTANEOUS	10,947.30	7,507.50	3,439.80
21800	CLOSED TREATMENT OF RIB FRACTURE	10,947.30	7,507.50	3,439.80
21920	BIOPSY, SOFT TISSUE OF BACK OR FLANK	4,782.96	4,095.00	687.96
21930	EXCISION, TUMOR, SOFT TISSUE OF BACK OR FLANK	7,753.20	5,460.00	2,293.20
23065	BIOPSY, SOFT TISSUE OF SHOULDER AREA	4,782.96	4,095.00	687.96
23075	EXCISION, TUMOR, SHOULDER AREA; SUBCUTANEOUS	7,753.20	5,460.00	2,293.20
23076	EXCISION, TUMOR, SHOULDER AREA; DEEP, SUBFASCIAL, OR INTRAMUSCULAR	10,947.30	7,507.50	3,439.80
23330	REMOVAL OF FOREIGN BODY, SHOULDER; SUBCUTANEOUS	7,589.40	5,869.50	1,719.90
23500	CLOSED TREATMENT OF CLAVICULAR FRACTURE	10,947.30	7,507.50	3,439.80
23540	CLOSED TREATMENT OF ACROMIOCLAVICULAR DISLOCATION	10,947.30	7,507.50	3,439.80
23570	CLOSED TREATMENT OF SCAPULAR FRACTURE	10,947.30	7,507.50	3,439.80

Code	Description	Case Rate	Health Facility Fee	Professional Fee
23930	INCISION AND DRAINAGE, UPPER ARM OR ELBOW AREA; DEEP ABSCESS OR HEMATOMA	5,607.42	4,231.50	1,375.92
23931	INCISION AND DRAINAGE, UPPER ARM OR ELBOW AREA; INFECTED BURSA	7,589.40	5,869.50	1,719.90
24065	BIOPSY, SOFT TISSUE OF UPPER ARM OR ELBOW AREA	4,782.96	4,095.00	687.96
24075	EXCISION, TUMOR, UPPER ARM OR ELBOW AREA; SUBCUTANEOUS	7,753.20	5,460.00	2,293.20
24076	EXCISION, TUMOR, UPPER ARM OR ELBOW AREA; DEEP, SUBFASCIAL OR INTRAMUSCULAR	10,947.30	7,507.50	3,439.80
24640	CLOSED TREATMENT OF RADIAL HEAD SUBLUXATION IN CHILD, "NURSEMAID ELBOW"	7,753.20	5,460.00	2,293.20
25065	BIOPSY, SOFT TISSUE OF FOREARM AND/OR WRIST	4,782.96	4,095.00	687.96
25075	EXCISION, TUMOR, FOREARM AND/OR WRIST AREA; SUBCUTANEOUS	7,753.20	5,460.00	2,293.20
25076	EXCISION, TUMOR, FOREARM AND/OR WRIST AREA; DEEP, SUBFASCIAL OR INTRAMUSCULAR	10,947.30	7,507.50	3,439.80
25110	EXCISION, LESION OF TENDON SHEATH, FOREARM AND/OR WRIST	10,947.30	7,507.50	3,439.80
25210	CARPECTOMY; ONE BONE	8,097.18	5,460.00	2,637.18
26010	DRAINAGE OF FINGER ABSCESS; SIMPLE	4,782.96	4,095.00	687.96
26011	DRAINAGE OF FINGER ABSCESS; COMPLICATED (E.G., FELON)	5,607.42	4,231.50	1,375.92
26020	DRAINAGE OF TENDON SHEATH, ONE DIGIT AND/OR PALM	10,947.30	7,507.50	3,439.80
26440	TENOLYSIS, SIMPLE, FLEXOR TENDON; PALM OR FINGER, SINGLE, EACH TENDON	10,947.30	7,507.50	3,439.80
26445	TENOLYSIS, EXTENSOR TENDON, DORSUM OF HAND OR FINGER; EACH TENDON	10,947.30	7,507.50	3,439.80
26531	ARTHROPLASTY, METACARPOPHALANGEAL JOINT; W/ PROSTHETIC IMPLANT, SINGLE, EACH	10,947.30	7,507.50	3,439.80
27040	BIOPSY, SOFT TISSUE OF PELVIS AND HIP AREA	4,782.96	4,095.00	687.96
27047	EXCISION, TUMOR, PELVIS AND HIP AREA; SUBCUTANEOUS	7,753.20	5,460.00	2,293.20
27323	BIOPSY, SOFT TISSUE OF THIGH OR KNEE AREA	4,782.96	4,095.00	687.96
27327	EXCISION, TUMOR, THIGH OR KNEE AREA; SUBCUTANEOUS	7,753.20	5,460.00	2,293.20
27328	EXCISION, TUMOR, THIGH OR KNEE AREA; DEEP, SUBFASCIAL, OR INTRAMUSCULAR	10,947.30	7,507.50	3,439.80
27600	DECOMPRESSION FASCIOTOMY, LEG; ANTERIOR AND/OR LATERAL COMPARTMENTS ONLY	10,947.30	7,507.50	3,439.80
27601	DECOMPRESSION FASCIOTOMY, LEG; POSTERIOR COMPARTMENTS(S) ONLY	10,947.30	7,507.50	3,439.80
27603	INCISION AND DRAINAGE, LEG OR ANKLE; DEEP ABSCESS OR HEMATOMA	5,607.42	4,231.50	1,375.92
27604	INCISION AND DRAINAGE, LEG OR ANKLE; INFECTED BURSA	7,753.20	5,460.00	2,293.20
27613	BIOPSY, SOFT TISSUE OF LEG OR ANKLE AREA	4,782.96	4,095.00	687.96
27618	EXCISION, TUMOR, LEG OR ANKLE AREA; SUBCUTANEOUS	7,753.20	5,460.00	2,293.20
27619	EXCISION, TUMOR, LEG OR ANKLE AREA; DEEP, SUBFASCIAL OR INTRAMUSCULAR	10,947.30	7,507.50	3,439.80
27630	EXCISION OF LESION OF TENDON SHEATH OR CAPSULE (E.G., CYST OR GANGLION), LEG AND/OR ANKLE	7,753.20	5,460.00	2,293.20
27656	REPAIR, FASCIAL DEFECT OF LEG	7,753.20	5,460.00	2,293.20
28001	INCISION AND DRAINAGE, INFECTED BURSA, FOOT	7,753.20	5,460.00	2,293.20
28043	EXCISION, TUMOR, FOOT; SUBCUTANEOUS	7,753.20	5,460.00	2,293.20
28045	EXCISION, TUMOR, FOOT; DEEP, SUBFASCIAL, INTRAMUSCULAR	10,947.30	7,507.50	3,439.80
28080	EXCISION OF INTERDIGITAL (MORTON) NEUROMA, SINGLE, EACH	7,753.20	5,460.00	2,293.20
29055	APPLICATION OF BODY CAST, SHOULDER TO HIPS; SHOULDER SPICA	12,694.50	9,828.00	2,866.50
29058	APPLICATION OF BODY CAST, SHOULDER TO HIPS; PLASTER VELPEAU	7,589.40	5,869.50	1,719.90
29065	APPLICATION OF BODY CAST, SHOULDER TO HIPS; SHOULDER TO HAND (LONG ARM)	7,753.20	5,460.00	2,293.20

Code	Description	Case Rate	Health Facility Fee	Professional Fee
29075	APPLICATION OF BODY CAST, SHOULDER TO HIPS; ELBOW TO FINGER (SHORT ARM)	7,589.40	5,869.50	1,719.90
29085	APPLICATION OF BODY CAST, SHOULDER TO HIPS; HAND AND LOWER FOREARM (GAUNTLET)	7,589.40	5,869.50	1,719.90
29305	APPLICATION OF HIP SPICA CAST; ONE LEG	10,947.30	7,507.50	3,439.80
29345	APPLICATION OF LONG LEG CAST (THIGH TO TOES);	10,947.30	7,507.50	3,439.80
29365	APPLICATION OF CYLINDER CAST (THIGH TO ANKLE)	10,947.30	7,507.50	3,439.80
29405	APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES);	10,947.30	7,507.50	3,439.80
29425	APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES); WALKING OR AMBULATORY TYPE	10,947.30	7,507.50	3,439.80
29435	APPLICATION OF PATELLAR TENDON BEARING (PTB) CAST	10,947.30	7,507.50	3,439.80
29445	APPLICATION OF RIGID TOTAL CONTACT LEG CAST	7,753.20	5,460.00	2,293.20
29450	APPLICATION OF CLUBFOOT CAST W/ MOLDING OR MANIPULATION, LONG OR SHORT LEG	7,753.20	5,460.00	2,293.20
30000	DRAINAGE ABSCESS OR HEMATOMA, NASAL, INTERNAL APPROACH	7,589.40	5,869.50	1,719.90
30020	DRAINAGE ABSCESS OR HEMATOMA, NASAL SEPTUM	7,589.40	5,869.50	1,719.90
30100	BIOPSY, INTRANASAL	7,753.20	5,460.00	2,293.20
30110	EXCISION, NASAL POLYP(S), SIMPLE	10,947.30	7,507.50	3,439.80
30310	REMOVAL FOREIGN BODY, INTRANASAL; REQUIRING GENERAL ANESTHESIA	10,947.30	7,507.50	3,439.80
30320	REMOVAL FOREIGN BODY, INTRANASAL; BY LATERAL RHINOTOMY	10,947.30	7,507.50	3,439.80
30905	CONTROL NASAL HEMORRHAGE, POSTERIOR, W/ POSTERIOR NASAL PACKS AND/OR CAUTERIZATION, ANY METHOD; INITIAL	10,947.30	7,507.50	3,439.80
31000	LAVAGE BY CANNULATION; MAXILLARY SINUS (ANTRUM PUNCTURE OR NATURAL OSTIUM)	12,694.50	9,828.00	2,866.50
31002	LAVAGE BY CANNULATION; SPHENOID SINUS	10,947.30	7,507.50	3,439.80
31515	LARYNGOSCOPY DIRECT, W/ OR W/O TRACHEOSCOPY; FOR ASPIRATION	10,947.30	7,507.50	3,439.80
31525	LARYNGOSCOPY DIRECT, W/ OR W/O TRACHEOSCOPY; DIAGNOSTIC, EXCEPT NEWBORN	10,947.30	7,507.50	3,439.80
31527	LARYNGOSCOPY DIRECT, W/ OR W/O TRACHEOSCOPY; W/ INSERTION OF OBTURATOR	10,947.30	7,507.50	3,439.80
31528	LARYNGOSCOPY DIRECT, W/ OR W/O TRACHEOSCOPY; W/ DILATATION, INITIAL	10,947.30	7,507.50	3,439.80
31529	LARYNGOSCOPY DIRECT, W/ OR W/O TRACHEOSCOPY; W/ DILATATION, SUBSEQUENT	10,947.30	7,507.50	3,439.80
31710	CATHETERIZATION FOR BRONCHOGRAPHY, W/ OR W/O INSTILLATION OF CONTRAST MATERIAL	7,589.40	5,869.50	1,719.90
32000	THORACENTESIS, PUNCTURE OF PLEURAL CAVITY FOR ASPIRATION, INITIAL OR SUBSEQUENT	2,457.00	819.00	1,638.00
32400	BIOPSY, PLEURA; PERCUTANEOUS NEEDLE	7,589.40	5,869.50	1,719.90
32420	PNEUMONOCENTESIS, PUNCTURE OF LUNG FOR ASPIRATION	7,589.40	5,869.50	1,719.90
32960	PNEUMOTHORAX, THERAPEUTIC, INTRAPLEURAL INJECTION OF AIR	7,589.40	5,869.50	1,719.90
33010	PERICARDIOCENTESIS	10,947.30	7,507.50	3,439.80
36010	INTRODUCTION OF CATHETER, SUPERIOR OR INFERIOR VENA CAVA	4,968.60	3,822.00	1,146.60
36011	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM; FIRST ORDER BRANCH (E.G., RENAL VEIN, JUGULAR VEIN)	12,694.50	9,828.00	2,866.50
36012	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM; SECOND ORDER, OR MORE SELECTIVE, BRANCH (E.G., LEFT ADRENAL VEIN, PETROSAL SINUS)	10,947.30	7,507.50	3,439.80
36013	INTRODUCTION OF CATHETER, RIGHT HEART OR MAIN PULMONARY ARTERY	10,947.30	7,507.50	3,439.80
36014	SELECTIVE CATHETER PLACEMENT, LEFT OR RIGHT PULMONARY ARTERY	10,947.30	7,507.50	3,439.80
36120	INTRODUCTION OF NEEDLE OR INTRACATHETER; RETROGRADE BRACHIAL ARTERY	12,694.50	9,828.00	2,866.50



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36140	INTRODUCTION OF NEEDLE OR INTRACATHETER; EXTREMITY ARTERY	12,694.50	9,828.00	2,866.50
36200	INTRODUCTION OF CATHETER, AORTA	12,694.50	9,828.00	2,866.50
36215	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; EACH FIRST ORDER THORACIC OR BRACHIOCEPHALIC BRANCH, W/IN A VASCULAR FAMILY	12,694.50	9,828.00	2,866.50
36216	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL SECOND ORDER THORACIC OR BRACHIOCEPHALIC BRANCH, W/IN A VASCULAR FAMILY	12,694.50	9,828.00	2,866.50
36217	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL THIRD ORDER OR MORE SELECTIVE THORACIC OR BRACHIOCEPHALIC BRANCH, W/IN A VASCULAR FAMILY	10,947.30	7,507.50	3,439.80
36245	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; EACH FIRST ORDER ABDOMINAL, PELVIC, OR LOWER EXTREMITY ARTERY BRANCH, W/IN A VASCULAR FAMILY	12,694.50	9,828.00	2,866.50
36246	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL SECOND ORDER ABDOMINAL, PELVIC OR LOWER EXTREMITY ARTERY BRANCH, W/IN A VASCULAR FAMILY	12,694.50	9,828.00	2,866.50
36247	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL THIRD ORDER OR MORE SELECTIVE ABDOMINAL, PELVIC OR LOWER EXTREMITY ARTERY BRANCH, W/IN A VASCULAR FAMILY	10,947.30	7,507.50	3,439.80
36430	OUTPATIENT TRANSFUSION OF BLOOD OR BLOOD PRODUCTS; ONE OR MORE UNITS	4,968.60	3,822.00	1,146.60
36450	EXCHANGE TRANSFUSION, BLOOD	7,753.20	5,460.00	2,293.20
36481	PERCUTANEOUS PORTAL VEIN CATHETERIZATION BY ANY METHOD	12,694.50	9,828.00	2,866.50
36510	CATHETERIZATION OF UMBILICAL VEIN FOR DIAGNOSIS OR THERAPY, NEWBORN	4,968.60	3,822.00	1,146.60
36511	THERAPEUTIC APHERESIS	4,968.60	3,822.00	1,146.60
36640	ARTERIAL CATHETERIZATION FOR PROLONGED INFUSION THERAPY (CHEMOTHERAPY), CUTDOWN	4,968.60	3,822.00	1,146.60
36660	CATHETERIZATION, UMBILICAL ARTERY, NEWBORN, FOR DIAGNOSIS OR THERAPY	7,753.20	5,460.00	2,293.20
36781	PERCUTANEOUSPORTAL VEIN CATHETERIZATION BY ANY METHOD	12,694.50	9,828.00	2,866.50
36800	INSERTION OF CANNULA FOR HEMODIALYSIS, OTHER PURPOSE ; VEIN TO VEIN	12,694.50	9,828.00	2,866.50
36835	INSERTION OF THOMAS SHUNT	12,694.50	9,828.00	2,866.50
37201	TRANSCATHETER THERAPY, INFUSION FOR THROMBOLYSIS OTHER THAN CORONARY	10,947.30	7,507.50	3,439.80
37202	TRANSCATHETER THERAPY, INFUSION OTHER THAN FOR THROMBOLYSIS, ANY TYPE (E.G., SPASMOLYTIC, VASOCONSTRICTIVE)	10,947.30	7,507.50	3,439.80
37565	LIGATION, INTERNAL JUGULAR VEIN	7,753.20	5,460.00	2,293.20
37600	LIGATION; EXTERNAL CAROTID ARTERY	7,753.20	5,460.00	2,293.20
37607	LIGATION OR BANDING OF ANGIOACCESS ARTERIOVENOUS FISTULA	12,694.50	9,828.00	2,866.50
37609	LIGATION OR BIOPSY, TEMPORAL ARTERY	12,694.50	9,828.00	2,866.50
37650	LIGATION OF FEMORAL VEIN	12,694.50	9,828.00	2,866.50
37700	LIGATION AND DIVISION OF LONG SAPHENOUS VEIN AT SAPHENOFEMORAL JUNCTION, OR DISTAL INTERRUPTIONS	12,694.50	9,828.00	2,866.50
38500	BIOPSY OR EXCISION OR LYMPH NODE(S); SUPERFICIAL	7,753.20	5,460.00	2,293.20
38505	BIOPSY OR EXCISION OR LYMPH NODE(S); BY NEEDLE, SUPERFICIAL (E.G., CERVICAL, INGUINAL, AXILLARY)	7,753.20	5,460.00	2,293.20
38520	BIOPSY OR EXCISION OR LYMPH NODE(S); DEEP CERVICAL NODE(S) W/ EXCISION SCALENE FAT PAD	12,694.50	9,828.00	2,866.50
38525	BIOPSY OR EXCISION OR LYMPH NODE(S); DEEP AXILLARY NODE(S)	12,694.50	9,828.00	2,866.50

Code	Description	Case Rate	Health Facility Fee	Professional Fee
38530	BIOPSY OR EXCISION OR LYMPH NODE(S); INTERNAL MAMMARY NODE(S)	12,694.50	9,828.00	2,866.50
40490	BIOPSY OF LIP	7,589.40	5,869.50	1,719.90
40500	VERMILIONECTOMY (LIP SHAVE), W/ MUCOSAL ADVANCEMENT	10,947.30	7,507.50	3,439.80
40510	EXCISION OF LIP; TRANSVERSE WEDGE EXCISION W/ PRIMARY CLOSURE	10,947.30	7,507.50	3,439.80
40520	V-EXCISION W/ PRIMARY DEFECT LINEAR CLOSURE;	10,947.30	7,507.50	3,439.80
40800	DRAINAGE OF ABSCESS, CYST, HEMATOMA, VESTIBULE OF MOUTH	7,753.20	5,460.00	2,293.20
40808	BIOPSY, VESTIBULE OF MOUTH	7,753.20	5,460.00	2,293.20
40810	EXCISION OF LESION OF MUCOSA AND SUBMUCOSA, VESTIBULE OF MOUTH	7,753.20	5,460.00	2,293.20
40819	EXCISION OF FRENUM, LABIAL OR BUCCAL (FRENUMECTOMY, FRENULECTOMY, FRENECTOMY)	12,694.50	9,828.00	2,866.50
40830	CLOSURE OF LACERATION, VESTIBULE OF MOUTH; 2.5 CM OR LESS	7,753.20	5,460.00	2,293.20
40831	CLOSURE OF LACERATION, VESTIBULE OF MOUTH; OVER 2.5 CM OR COMPLEX	7,753.20	5,460.00	2,293.20
41000	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR FLOOR OF MOUTH; LINGUAL	7,753.20	5,460.00	2,293.20
41005	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR FLOOR OF MOUTH; SUBLINGUAL, SUPERFICIAL	7,753.20	5,460.00	2,293.20
41006	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR FLOOR OF MOUTH; SUBLINGUAL, DEEP, SUPRAMYLOHYOID	7,753.20	5,460.00	2,293.20
41007	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR FLOOR OF MOUTH; SUBMENTAL SPACE	7,753.20	5,460.00	2,293.20
41008	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR FLOOR OF MOUTH; SUBMANDIBULAR SPACE	7,753.20	5,460.00	2,293.20
41009	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR FLOOR OF MOUTH; MASTICATOR SPACE	7,753.20	5,460.00	2,293.20
41015	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS,CYST,OR HEMATOMA OF FLOOR OF MOUTH; SUBLINGUAL	7,753.20	5,460.00	2,293.20
41016	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS,CYST,OR HEMATOMA OF FLOOR OF MOUTH; SUBMENTAL	7,753.20	5,460.00	2,293.20
41017	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS,CYST,OR HEMATOMA OF FLOOR OF MOUTH; SUBMANDIBULAR	7,753.20	5,460.00	2,293.20
41018	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS,CYST,OR HEMATOMA OF FLOOR OF MOUTH; MASTICATOR SPACE	7,753.20	5,460.00	2,293.20
41100	BIOPSY OF TONGUE; ANTERIOR TWO-THIRDS	7,589.40	5,869.50	1,719.90
41105	BIOPSY OF TONGUE; POSTERIOR ONE-THIRD	7,589.40	5,869.50	1,719.90
41108	BIOPSY OF FLOOR OF MOUTH	7,589.40	5,869.50	1,719.90
41110	EXCISION OF LESION OF TONGUE W/O CLOSURE	12,694.50	9,828.00	2,866.50
41112	EXCISION OF LESION OF TONGUE W/ CLOSURE; ANTERIOR TWO-THIRDS	12,694.50	9,828.00	2,866.50
41113	EXCISION OF LESION OF TONGUE W/ CLOSURE; POSTERIOR ONE-THIRD	12,694.50	9,828.00	2,866.50
41114	EXCISION OF LESION OF TONGUE W/ CLOSURE; W/ LOCAL TONGUE FLAP	12,694.50	9,828.00	2,866.50
41115	EXCISION OF LINGUAL FRENUM (FRENECTOMY)	12,694.50	9,828.00	2,866.50
41116	EXCISION, LESION OF FLOOR OF MOUTH	12,694.50	9,828.00	2,866.50
41800	DRAINAGE OF ABSCESS, CYST, HEMATOMA FROM DENTOALVEOLAR STRUCTURES	7,753.20	5,460.00	2,293.20
41805	REMOVAL OF EMBEDDED FOREIGN BODY FROM DENTOALVEOLAR STRUCTURES; SOFT TISSUES	4,968.60	3,822.00	1,146.60
41806	REMOVAL OF EMBEDDED FOREIGN BODY FROM DENTOALVEOLAR STRUCTURES; BONE	4,968.60	3,822.00	1,146.60

Code	Description	Case Rate	Health Facility Fee	Professional Fee
41820	GINGIVECTOMY, EXCISION GINGIVA	10,947.30	7,507.50	3,439.80
41821	OPERCULECTOMY, EXCISION PERICORONAL TISSUES	10,947.30	7,507.50	3,439.80
41822	EXCISION OF FIBROUS TUBEROSITIES, DENTOALVEOLAR STRUCTURES	10,947.30	7,507.50	3,439.80
41823	EXCISION OF OSSEOUS TUBEROSITIES, DENTOALVEOLAR STRUCTURES	10,947.30	7,507.50	3,439.80
41825	EXCISION OF LESION OR OR TUMOR (EXCEPT LISTED ABOVE), DENTOALVEOLAR STRUCTURES	10,947.30	7,507.50	3,439.80
41828	EXCISION OF HYPERPLASTIC ALVEOLAR MUCOSA	10,947.30	7,507.50	3,439.80
42000	DRAINAGE OF ABSCESS OF PALATE, UVULA	10,947.30	7,507.50	3,439.80
42100	BIOPSY OF PALATE, UVULA	7,589.40	5,869.50	1,719.90
42104	EXCISION, LESION OF PALATE , UVULA; W/O CLOSURE	7,753.20	5,460.00	2,293.20
42106	EXCISION, LESION OF PALATE , UVULA; W/ SIMPLE PRIMARY CLOSURE	12,694.50	9,828.00	2,866.50
42107	EXCISION, LESION OF PALATE , UVULA; W/ LOCAL FLAP CLOSURE	12,694.50	9,828.00	2,866.50
42300	DRAINAGE OF ABSCESS; PAROTID	7,753.20	5,460.00	2,293.20
42310	DRAINAGE OF ABSCESS; SUBMAXILLARY OR SUBLINGUAL, INTRAORAL	7,753.20	5,460.00	2,293.20
42320	DRAINAGE OF ABSCESS; SUBMAXILLARY, EXTERNAL	7,753.20	5,460.00	2,293.20
42325	FISTULIZATION OF SUBLINGUAL SALIVARY CYST (RANULA);	7,753.20	5,460.00	2,293.20
42326	FISTULIZATION OF SUBLINGUAL SALIVARY CYST (RANULA); W/ PROSTHESIS	12,694.50	9,828.00	2,866.50
42330	SIALOLITHOTOMY; SUBMANDIBULAR (SUBMAXILLARY), SUBLINGUAL OR PAROTID, INTRAORAL	12,694.50	9,828.00	2,866.50
42400	BIOPSY OF SALIVARY GLAND; NEEDLE	7,589.40	5,869.50	1,719.90
42405	BIOPSY OF SALIVARY GLAND; INCISIONAL	7,589.40	5,869.50	1,719.90
42408	EXCISION OF SUBLINGUAL SALIVARY CYST (RANULA)	12,694.50	9,828.00	2,866.50
42409	MARSUPIALIZATION OF SUBLINGUAL SALIVARY CYST (RANULA)	12,694.50	9,828.00	2,866.50
42800	BIOPSY; OROPHARYNX	10,947.30	7,507.50	3,439.80
42802	BIOPSY; HYPOPHARYNX	10,947.30	7,507.50	3,439.80
42804	BIOPSY; NASOPHARYNX, VISIBLE LESION, SIMPLE	10,947.30	7,507.50	3,439.80
42806	BIOPSY; NASOPHARYNX, SURVEY FOR UNKNOWN PRIMARY LESION	10,947.30	7,507.50	3,439.80
42808	EXCISION OR DESTRUCTION OF LESION OF PHARYNX, ANY METHOD	10,947.30	7,507.50	3,439.80
42809	REMOVAL OF FOREIGN BODY FROM PHARYNX	10,947.30	7,507.50	3,439.80
42860	EXCISION OF TONSIL TAGS	10,947.30	7,507.50	3,439.80
42870	EXCISION OR DESTRUCTION LINGUAL TONSIL, ANY METHOD	10,947.30	7,507.50	3,439.80
42955	PHARYNGOSTOMY (FISTULIZATION OF PHARYNX, EXTERNAL FOR FEEDING)	10,947.30	7,507.50	3,439.80
43750	PERCUTANEOUS PLACEMENT OF GASTROSTOMY TUBE	10,947.30	7,507.50	3,439.80
43760	CHANGE OF GASTROSTOMY TUBE	7,589.40	5,869.50	1,719.90
44500	INTRODUCTION OF LONG GASTROINTESTINAL TUBE (E.G., MILLER-ABBOTT)	10,947.30	7,507.50	3,439.80
45300	PROCTOSIGMOIDOSCOPY, RIGID; DIAGNOSTIC, W/ OR W/O COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING	10,947.30	7,507.50	3,439.80
45305	PROCTOSIGMOIDOSCOPY, RIGID; W/ BIOPSY, SINGLE OR MULTIPLE	10,947.30	7,507.50	3,439.80
46083	INCISION OF THROMBOSED HEMORRHOID, EXTERNAL	10,947.30	7,507.50	3,439.80
46600	ANOSCOPY; DIAGNOSTIC, W/ OR W/O COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING	7,753.20	5,460.00	2,293.20
46604	ANOSCOPY; W/ DILATION, ANY METHOD	7,753.20	5,460.00	2,293.20
46606	ANOSCOPY; W/ BIOPSY, SINGLE OR MULTIPLE	7,753.20	5,460.00	2,293.20
46608	ANOSCOPY; W/ REMOVAL OF FOREIGN BODY	7,753.20	5,460.00	2,293.20
46610	ANOSCOPY; W/ REMOVAL OF SINGLE TUMOR, POLYP, OR OTHER LESION BY HOT BIOPSY FORCEPS OR BIPOLAR CAUTERY	10,947.30	7,507.50	3,439.80

Code	Description	Case Rate	Health Facility Fee	Professional Fee
46614	ANOSCOPY; W/ CONTROL OF BLEEDING, ANY METHOD	10,947.30	7,507.50	3,439.80
47000	BIOPSY OF LIVER, NEEDLE; PERCUTANEOUS	10,947.30	7,507.50	3,439.80
47525	CHANGE OF PERCUTANEOUS BILIARY DRAINAGE CATHETER	10,947.30	7,507.50	3,439.80
49080	PERITONEOCENTESIS, ABDOMINAL PARACENTESIS, OR PERITONEAL LAVAGE (DIAGNOSTIC OR THERAPEUTIC)	10,947.30	7,507.50	3,439.80
49320	LAPAROSCOPY, ABDOMEN, PERITONEUM, AND OMENTUM, DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING	7,753.20	5,460.00	2,293.20
50200	RENAL BIOPSY; PERCUTANEOUS, BY TROCAR OR NEEDLE	10,947.30	7,507.50	3,439.80
50390	ASPIRATION AND/OR INJECTION OF RENAL CYST OR PELVIS BY NEEDLE, PERCUTANEOUS	7,753.20	5,460.00	2,293.20
51010	ASPIRATION OF BLADDER; BY TROCAR OR INTRACATHETER W/ INSERTION OF SUPRAPUBIC CATHETER	7,753.20	5,460.00	2,293.20
51600	INJECTION PROCEDURE FOR CYSTOGRAPHY OR VOIDING URETHROCYSTOGRAPHY	10,947.30	7,507.50	3,439.80
51720	BLADDER INSTILLATION OF ANTICARCINOGENIC AGENT	10,947.30	7,507.50	3,439.80
52265	CYSTOURETHROSCOPY, W/ DILATION OF BLADDER FOR INSTERSTITIAL CYSTITIS; LOCAL ANESTHESIA	10,947.30	7,507.50	3,439.80
52281	CYSTOURETHROSCOPY, W/ CALIBRATION AND/OR DILATION OF URETHRAL STRICTURE OR STENOSIS, W/ OR W/O MEATOTOMY AND INJECTION PROCEDURE FOR CYSTOGRAPHY, MALE OR FEMALE	10,947.30	7,507.50	3,439.80
52283	CYSTOURETHROSCOPY, W/ STEROID INJECTION INTO STRICTURE	10,947.30	7,507.50	3,439.80
53000	URETHROTOMY OR URETHROSTOMY, EXTERNAL ; PENDULOUS URETHRA	7,753.20	5,460.00	2,293.20
53020	MEATOTOMY, CUTTING OF MEATUS ; EXCEPT INFANT	7,589.40	5,869.50	1,719.90
53040	DRAINAGE OF DEEP PERIURETHRAL ABSCESS	12,694.50	9,828.00	2,866.50
53060	DRAINAGE OF SKENES GLAND ABSCESS OR CYST	7,589.40	5,869.50	1,719.90
53080	DRAINAGE OF PERINEAL URINARY EXTRAVASATION	10,947.30	7,507.50	3,439.80
53200	BIOPSY OF URETHRA	7,589.40	5,869.50	1,719.90
53240	MARSUPIALIZATION OF URETHRAL DIVERTICULUM, MALE OR FEMALE	12,694.50	9,828.00	2,866.50
53260	EXCISION OR FULGURATION; URETHRAL POLYP(S), DISTAL URETHRA	7,589.40	5,869.50	1,719.90
53265	EXCISION OR FULGURATION; URETHRAL CARUNCLE	7,589.40	5,869.50	1,719.90
53270	SKENES GLANDS	7,589.40	5,869.50	1,719.90
53275	SKENES GLANDS URETHRAL PROLAPSE	12,694.50	9,828.00	2,866.50
53520	CLOSURE OF URETHROSTOMY OR URETHROCUTANEOUS FISTULA, MALE	10,947.30	7,507.50	3,439.80
53600	DILATION OF URETHRAL STRICTURE BY PASSAGE OF SOUND OR URETHRAL DILATOR, MALE	7,753.20	5,460.00	2,293.20
53605	DILATION OF URETHRAL STRICTURE OR VESICAL NECK, MALE, GENERAL OR CONDUCTION (SPINAL) ANESTHESIA	7,753.20	5,460.00	2,293.20
53665	DILATION OF FEMALE URETHRA, GENERAL OR CONDUCTION (SPINAL) ANESTHESIA	7,753.20	5,460.00	2,293.20
54015	INCISION AND DRAINAGE OF PENIS	4,968.60	3,822.00	1,146.60
54050	DESTRUCTION OF LESION(S), PENIS (E.G., CONDYLOMA, PAPILLOMA, MOLLUSCUM CONTAGIOSUM, HERPETIC VESICLE), ANY METHOD	4,968.60	3,822.00	1,146.60
54100	BIOPSY OF PENIS	4,782.96	4,095.00	687.96
54110	EXCISION OF PENILE PLAQUE (PEYRONIE DISEASE);	12,694.50	9,828.00	2,866.50
54150	CIRCUMCISION, USING CLAMP OR OTHER DEVICE; NEWBORN	2,457.00	819.00	1,638.00

Code	Description	Case Rate	Health Facility Fee	Professional Fee
54152	CIRCUMCISION, USING CLAMP OR OTHER DEVICE; EXCEPT NEWBORN	2,457.00	819.00	1,638.00
54160	CIRCUMCISION, SURGICAL EXCISION OTHER THAN CLAMP, DEVICE OR DORSAL SLIT; NEWBORN	2,457.00	819.00	1,638.00
54161	CIRCUMCISION, SURGICAL EXCISION OTHER THAN CLAMP, DEVICE OR DORSAL SLIT; EXCEPT NEWBORN	2,457.00	819.00	1,638.00
54200	INJECTION PROCEDURE FOR PEYRONIE DISEASE;	7,589.40	5,869.50	1,719.90
54205	INJECTION PROCEDURE FOR PEYRONIE DISEASE;W/ SURGICAL EXPOSURE OF PLAQUE	7,753.20	5,460.00	2,293.20
54220	IRRIGATION OF CORPORA CAVERNOSA FOR PRIAPISM	10,947.30	7,507.50	3,439.80
54500	BIOPSY OF TESTIS, NEEDLE	4,782.96	4,095.00	687.96
54505	BIOPSY OF TESTIS, INCISIONAL	7,753.20	5,460.00	2,293.20
54510	EXCISION OF LOCAL LESION OF TESTIS	7,753.20	5,460.00	2,293.20
54620	FIXATION OF CONTRALATERAL TESTIS	12,694.50	9,828.00	2,866.50
54700	INCISION AND DRAINAGE OF EPIDIDYMIS, TESTIS AND/OR SCROTAL SPACE (E.G., ABSCESS OR HEMATOMA)	5,607.42	4,231.50	1,375.92
54800	BIOPSY OF EPIDIDYMIS, NEEDLE	4,782.96	4,095.00	687.96
54820	EXPLORATION OF EPIDIDYMIS, W/ OR W/O BIOPSY	12,694.50	9,828.00	2,866.50
54830	EXCISION OF LOCAL LESION OF EPIDIDYMIS	7,753.20	5,460.00	2,293.20
54840	EXCISION OF SPERMATOCELE, W/ OR W/O EPIDIDYMECTOMY	10,947.30	7,507.50	3,439.80
54860	EPIDIDYMECTOMY; UNILATERAL	12,694.50	9,828.00	2,866.50
55000	PUNCTURE ASPIRATION OF HYDROCELE, TUNICA VAGINALIS, W/ OR W/O INJECTION OF MEDICATION	4,782.96	4,095.00	687.96
55100	DRAINAGE OF SCROTAL WALL ABSCESS	4,782.96	4,095.00	687.96
55101	DRAINAGE AND DEBRIDEMENT OF FOURNIERS GANGRENE OF THE SCROTUM	12,694.50	9,828.00	2,866.50
55110	SCROTAL EXPLORATION	12,694.50	9,828.00	2,866.50
55120	REMOVAL OF FOREIGN BODY IN SCROTUM	5,607.42	4,231.50	1,375.92
55150	RESECTION OF SCROTUM	7,589.40	5,869.50	1,719.90
55175	SCROTOPLASTY	7,753.20	5,460.00	2,293.20
55200	VASOTOMY, CANNULIZATION W/ OR W/O INCISION OF VAS, UNILATERAL OR BILATERAL	7,753.20	5,460.00	2,293.20
55250	VASECTOMY, UNILATERAL OR BILATERAL	7,800.00	5,850.00	1,950.00
55700	BIOPSY, PROSTATE; NEEDLE OR PUNCH, SINGLE OR MULTIPLE, ANY APPROACH	12,694.50	9,828.00	2,866.50
55720	PROSTATOTOMY, EXTERNAL DRAINAGE OF PROSTATIC ABSCESS, ANY APPROACH	7,753.20	5,460.00	2,293.20
56405	INCISION AND DRAINAGE OF VULVA OR PERINEAL ABSCESS	7,589.40	5,869.50	1,719.90
56420	INCISION AND DRAINAGE OF BARTHOLINS GLAND ABSCESS	12,694.50	9,828.00	2,866.50
56441	LYSIS OF LABIAL ADHESIONS	12,694.50	9,828.00	2,866.50
56501	DESTRUCTION OF LESION(S), VULVA; ANY METHOD	12,694.50	9,828.00	2,866.50
56605	BIOPSY OF VULVA OR PERINEUM ; ONE LESION	12,694.50	9,828.00	2,866.50
56720	HYMENOTOMY, SIMPLE INCISION	12,694.50	9,828.00	2,866.50
57020	COLPOCENTESIS	7,753.20	5,460.00	2,293.20
57061	DESTRUCTION OF VAGINAL LESION(S)	7,753.20	5,460.00	2,293.20
57100	BIOPSY OF VAGINAL MUCOSA	7,753.20	5,460.00	2,293.20
57130	EXCISION OF VAGINAL SEPTUM	12,694.50	9,828.00	2,866.50
57200	COLPORRHAPHY, SUTURE OF INJURY OF VAGINA (NONOBSTERICAL)	10,947.30	7,507.50	3,439.80
57452	COLPOSCOPY (VAGINOSCOPY)	10,947.30	7,507.50	3,439.80
57500	BIOPSY, SINGLE OR MULTIPLE, OR LOCAL EXCISION OF LESION, W/ OR W/O FULGURATION	7,753.20	5,460.00	2,293.20
57510	CAUTERIZATION OF CERVIX; ANY METHOD	7,753.20	5,460.00	2,293.20
58565	HYSTEROSCOPY, SURGICAL; WITH BILATERAL FALLOPIAN TUBE CANNULATION TO INDUCE OCCLUSION BY PLACEMENT OF PERMANENT IMPLANTS	7,753.20	5,460.00	2,293.20
59403	UNDELIVERED CASES (BABY DELIVERED IN REFERRAL FACILITY) IN NON-HOSPITAL FACILITIES	1,267.50	760.50	507.00

Code	Description	Case Rate	Health Facility Fee	Professional Fee
60000	INCISION AND DRAINAGE OF THYROGLOSSAL CYST, INFECTED	4,782.96	4,095.00	687.96
61000	SUBDURAL TAP THROUGH FONTANELLE, OR SUTURE, INFANT, UNILATERAL OR BILATERAL	7,753.20	5,460.00	2,293.20
61020	VENTRICULAR PUNCTURE THROUGH PREVIOUS BURR HOLE, FONTANELLE, SUTURE, OR IMPLANTED VENTRICULAR CATHETER/RESERVOIR	7,753.20	5,460.00	2,293.20
62270	SPINAL PUNCTURE, LUMBAR, DIAGNOSTIC	7,753.20	5,460.00	2,293.20
62272	SPINAL PUNCTURE , THERAPEUTIC, FOR DRAINAGE OF SPINAL FLUID (BY NEEDLE OR CATHETER)	7,589.40	5,869.50	1,719.90
63650	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; EPIDURAL	10,947.30	7,507.50	3,439.80
64774	EXCISION OF NEUROMA; CUTANEOUS NERVE, SURGICALLY IDENTIFIABLE	10,947.30	7,507.50	3,439.80
64776	EXCISION OF NEUROMA; DIGITAL NERVE, ONE OR BOTH, SAME DIGIT	10,947.30	7,507.50	3,439.80
64782	EXCISION OF NEUROMA; HAND OR FOOT, EXCEPT DIGITAL NERVE	10,947.30	7,507.50	3,439.80
64784	EXCISION OF NEUROMA; MAJOR PERIPHERAL NERVE, EXCEPT SCIATIC	10,947.30	7,507.50	3,439.80
64788	EXCISION OF NEUROFIBROMA OR NEUROLEMMOMA; CUTANEOUS NERVE	10,947.30	7,507.50	3,439.80
64790	EXCISION OF NEUROFIBROMA OR NEUROLEMMOMA; MAJOR PERIPHERAL NERVE	10,947.30	7,507.50	3,439.80
64795	BIOPSY OF NERVE	10,947.30	7,507.50	3,439.80
64832	SUTURE OF DIGITAL NERVE, HAND OR FOOT; EACH ADDITIONAL DIGITAL NERVE	10,947.30	7,507.50	3,439.80
64837	SUTURE OF EACH ADDITIONAL NERVE, HAND OR FOOT	10,947.30	7,507.50	3,439.80
64859	SUTURE OF EACH ADDITIONAL MAJOR PERIPHERAL NERVE	10,947.30	7,507.50	3,439.80
64901	NERVE GRAFT, EACH ADDITIONAL NERVE; SINGLE STRAND	10,947.30	7,507.50	3,439.80
64902	NERVE GRAFT, EACH ADDITIONAL NERVE; MULTIPLE STRANDS (CABLE)	10,947.30	7,507.50	3,439.80
65205	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; CONJUNCTIVAL, SUPERFICIAL	682.50	409.50	273.00
65210	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; SUBCONJUNCTIVAL OR SCLERAL, WITH SLIT LAMP	6,142.50	3,412.50	2,730.00
65222	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; CORNEA, WITH SLIT LAMP	5,705.70	3,412.50	2,293.20
65270	REPAIR OF LACERATION; CONJUNCTIVA, W/ OR W/O NONPERFORATING LACERATION SCLERA, DIRECT CLOSURE	10,947.30	7,507.50	3,439.80
65273	REPAIR OF LACERATION; CONJUNCTIVA, BY MOBILIZATION AND REARRANGEMENT	10,947.30	7,507.50	3,439.80
65410	BIOPSY OF CORNEA	10,947.30	7,507.50	3,439.80
65450	DESTRUCTION OF LESION OF CORNEA BY CRYOTHERAPY, PHOTOCOAGULATION OR THERMOCAUTERIZATION	10,947.30	7,507.50	3,439.80
65805	PARACENTESIS OF ANTERIOR CHAMBER OF EYE; W/ THERAPEUTIC RELEASE OF AQUEOUS	10,947.30	7,507.50	3,439.80
65930	REMOVAL OF BLOOD CLOT, ANTERIOR SEGMENT EYE	10,947.30	7,507.50	3,439.80
67700	BLEPHAROTOMY, DRAINAGE OF ABSCESS, EYELID	7,753.20	5,460.00	2,293.20
67710	SEVERING OF TARSORRHAPHY	7,753.20	5,460.00	2,293.20
67715	CANTHOTOMY	7,753.20	5,460.00	2,293.20
67800	EXCISION OF CHALAZION	7,753.20	5,460.00	2,293.20
67810	BIOPSY OF EYELID	7,753.20	5,460.00	2,293.20
67825	REPAIR OF TRICHIASIS; BY ELECTROEPILATION, ELECTROSURGERY, CRYOTHERAPY OR LASER SURGERY	7,753.20	5,460.00	2,293.20
67830	REPAIR OF TRICHIASIS; INCISION OF LID MARGIN	4,968.60	3,822.00	1,146.60
67835	REPAIR OF TRICHIASIS; INCISION OF LID MARGIN, WITH FREE MUCOUS MEMBRANE GRAFT	12,694.50	9,828.00	2,866.50

Code	Description	Case Rate	Health Facility Fee	Professional Fee
67840	EXCISION OF LESION OF EYELID (EXCEPT CHALAZION) WITHOUT CLOSURE OR WITH SIMPLE DIRECT CLOSURE	7,589.40	5,869.50	1,719.90
67875	TEMPORARY CLOSURE OF EYELIDS SUTURE (E.G., FROST SUTURE)	7,753.20	5,460.00	2,293.20
67880	CONSTRUCTION OF INTERMARGIN ADHESIONS, MEDIAN TARSORRHAPHY, OR CANTHORRHAPHY;	7,753.20	5,460.00	2,293.20
67882	CONSTRUCTION OF INTERMARGIN ADHESIONS, MEDIAN TARSORRHAPHY, OR CANTHORRHAPHY; WITH TRANSPORTATION OF TARSAL PLATE	10,947.30	7,507.50	3,439.80
67914	REPAIR OF ECTROPION; SUTURE	10,947.30	7,507.50	3,439.80
67915	REPAIR OF ECTROPION; THERMOCAUTERIZATION	10,947.30	7,507.50	3,439.80
67921	REPAIR OF ENTROPION; SUTURE	7,753.20	5,460.00	2,293.20
67922	REPAIR OF ENTROPION; THERMOCAUTERIZATION	7,753.20	5,460.00	2,293.20
68100	BIOPSY OF CONJUNCTIVA	7,753.20	5,460.00	2,293.20
68110	EXCISION OF LESION, CONJUNCTIVA; UP TO 1 CM	10,947.30	7,507.50	3,439.80
68115	EXCISION OF LESION, CONJUNCTIVA; OVER 1 CM	10,947.30	7,507.50	3,439.80
68130	EXCISION OF LESION, CONJUNCTIVA; WITH ADJACENT SCLERA	10,947.30	7,507.50	3,439.80
68400	INCISION, DRAINAGE OF LACRIMAL GLAND	7,753.20	5,460.00	2,293.20
68420	INCISION, DRAINAGE OF LACRIMAL SAC (DACRYOCYSTOSTOMY)	7,753.20	5,460.00	2,293.20
68440	SNIP INCISION OF LACRIMAL PUNCTUM	7,753.20	5,460.00	2,293.20
68510	BIOPSY OF LACRIMAL GLAND	7,753.20	5,460.00	2,293.20
68525	BIOPSY OF LACRIMAL SAC	7,753.20	5,460.00	2,293.20
68705	CORRECTION OF EVERTED PUNCTUM, CAUTERY	4,968.60	3,822.00	1,146.60
68760	CLOSURE OF THE LACRIMAL PUNCTUM; BY THERMOCAUTERIZATION, LIGATION, OR LASER SURGERY	10,947.30	7,507.50	3,439.80
68811	PROBING OF NASOLACRIMAL DUCT; REQUIRING GENERAL ANESTHESIA	10,947.30	7,507.50	3,439.80
69000	DRAINAGE EXTERNAL EAR, ABSCESS OR HEMATOMA	5,012.28	4,095.00	917.28
69020	DRAINAGE EXTERNAL AUDITORY CANAL, ABSCESS	4,739.28	4,395.30	343.98
69100	BIOPSY EXTERNAL EAR	7,753.20	5,460.00	2,293.20
69105	BIOPSY EXTERNAL AUDITORY CANAL	7,753.20	5,460.00	2,293.20
69200	REMOVAL FOREIGN BODY FROM EXTERNAL AUDITORY CANAL; W/ GENERAL ANESTHESIA	12,694.50	9,828.00	2,866.50
69220	DEBRIDEMENT, MASTOIDECTOMY CAVITY, SIMPLE (E.G., ROUTINE CLEANING)	10,947.30	7,507.50	3,439.80
69400	EUSTACHIAN TUBE INFLATION, TRANSNASAL; W/ CATHETERIZATION	7,933.38	5,869.50	2,063.88
69405	EUSTACHIAN TUBE CATHETERIZATION, TRANSTYMPANIC	7,753.20	5,460.00	2,293.20
69420	MYRINGOTOMY INCLUDING ASPIRATION AND/OR EUSTACHIAN TUBE INFLATION	7,753.20	5,460.00	2,293.20
69421	MYRINGOTOMY INCLUDING ASPIRATION AND/OR EUSTACHIAN TUBE INFLATION REQUIRING GENERAL ANESTHESIA	10,947.30	7,507.50	3,439.80
69540	EXCISION AURAL POLYP	10,947.30	7,507.50	3,439.80
70010	MYELOGRAPHY, BRAIN, INCLUDING SPINAL PUNCTURE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
70390	SIALOGRAPHY; INCLUDING DUCT CATHETERIZATION AND RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
71090	INSERTION PACEMAKER, FLUOROSCOPY AND RADIOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
72240	MYELOGRAPHY, SPINE, INCLUDING SPINAL PUNCTURE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
74300	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY, INTRAOPERATIVE, RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
74328	ENDOSCOPIC CATHETERIZATION OF THE BILIARY DUCTAL SYSTEM, RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80

Code	Description	Case Rate	Health Facility Fee	Professional Fee
74329	ENDOSCOPIC CATHETERIZATION OF THE PANCREATIC DUCTAL SYSTEM, RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
74330	COMBINED ENDOSCOPIC CATHETERIZATION OF THE BILIARY AND PANCREATIC DUCTAL SYSTEM, RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
74742	TRANSCERVICAL CATHETERIZATION OF FALLOPIAN TUBE, RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
75984	CHANGE OF PERCUTANEOUS TUBE OR DRAINAGE CATHETER WITH CONTRAST MONITORING (E.G., GASTROINTESTINAL SYSTEM, GENITOURINARY SYSTEM, ABSCESS), RADIOLOGIC SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
75989	RADIOLOGICAL GUIDANCE FOR PERCUTANEOUS DRAINAGE (ABSCESS, CYST, FLUID COLLECTION), WITH PLACEMENT OF CATHETER AND RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76003	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLACEMENT (E.G., BIOPSY, ASPIRATION, INJECTION, LOCALIZATION DEVICE)	10,947.30	7,507.50	3,439.80
76080	RADIOLOGIC EXAMINATION, ABSCESS, FISTULA OR SINUS TRACT STUDY, INCLUDING CATHETERIZATION OF LESION AND RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76086	MAMMARY DUCTOGRAM OR GALACTOGRAM, 1 OR MULTIPLE DUCT, INJECTION AND RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76095	STEREOTACTIC LOCALIZATION GUIDANCE FOR BREAST BIOPSY OR NEEDLE PLACEMENT (E.G., FOR WIRE LOCALIZATION OR FOR INJECTION), ONE OR MORE LESION, RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76096	MAMMOGRAPHIC GUIDANCE FOR NEEDLE PLACEMENT, BREAST (E.G., FOR WIRE LOCALIZATION OR FOR INJECTION), EACH LESION, RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76355	COMPUTED TOMOGRAPHY GUIDANCE FOR STEREOTACTIC LOCALIZATION	10,947.30	7,507.50	3,439.80
76360	COMPUTED TOMOGRAPHY GUIDANCE FOR NEEDLE PLACEMENT (E.G., BIOPSY, ASPIRATION, INJECTION, LOCALIZATION DEVICE), RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76362	COMPUTED TOMOGRAPHY GUIDANCE FOR VISCERAL TISSUE ABLATION	10,947.30	7,507.50	3,439.80
76393	MAGNETIC RESONANCE GUIDANCE FOR NEEDLE PLACEMENT (E.G., FOR BIOPSY, NEEDLE ASPIRATION, INJECTION, OR PLACEMENT OF LOCALIZATION DEVICE) RADIOLOGICAL SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76394	MAGNETIC RESONANCE GUIDANCE FOR VISCERAL TISSUE ABLATION	10,947.30	7,507.50	3,439.80
76930	ULTRASONIC GUIDANCE FOR PERICARDIOCENTESIS, IMAGING SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76932	ULTRASONIC GUIDANCE FOR ENDOMYOCARDIAL BIOPSY, IMAGING SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76936	ULTRASOUND GUIDED COMPRESSION REPAIR OF ARTERIAL PSEUDOANEURYSM OR ARTERIOVENOUS FISTULAE (INCLUDES DIAGNOSTIC ULTRASOUND EVALUATION, COMPRESSION OF LESION AND IMAGING)	10,947.30	7,507.50	3,439.80
76940	ULTRASONIC GUIDANCE FOR VISCERAL TISSUE ABLATION	10,947.30	7,507.50	3,439.80



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76942	ULTRASONIC GUIDANCE FOR NEEDLE PLACEMENT (E.G., BIOPSY, ASPIRATION, INJECTION, LOCALIZATION DEVICE), IMAGING SUPERVISION AND INTERPRETATION	10,947.30	7,507.50	3,439.80
76965	ULTRASONIC GUIDANCE FOR INTERSTITIAL RADIOELEMENT APPLICATION	10,947.30	7,507.50	3,439.80
76986	ULTRASONIC GUIDANCE, INTRAOPERATIVE	10,947.30	7,507.50	3,439.80
77401	RADIATION TREATMENT DELIVERY (COBALT)	3,900.00	2,340.00	1,560.00
77401	RADIATION TREATMENT DELIVERY (LINEAR ACCELERATOR)	5,850.00	4,290.00	1,560.00
77418	INTENSITY MODULATED TREATMENT DELIVERY, SINGLE OR MULTIPLE FIELDS/ARCS, VIA NARROW SPATIALLY AND TEMPORALLY MODULATED BEAMS, BINARY, DYNAMIC MLC PER SESSION	11,076.00	7,800.00	3,276.00
77750	INFUSION OR INSTILLATION OF RADIOELEMENT SOLUTION	7,753.20	5,460.00	2,293.20
77781	REMOTE AFTER LOADING HIGH INTENSITY BRACHYTHERAPY (RAHIB); 1 OR MORE SOURCE POSITION OR CATHETERS PER SESSION	7,753.20	5,460.00	2,293.20
79000	RADIOPHARMACEUTICAL (RADIOACTIVE IODINE) THERAPY	4,968.60	3,822.00	1,146.60
79005	RADIOPHARMACEUTICAL ABLATION OF GLAND FOR THYROID CARCINOMA OR METASTASES OF THYROID CARCINOMA	10,947.30	7,507.50	3,439.80
79403	RADIOPHARMACEUTICAL THERAPY, BY RADIOLABELED MONOCLONAL ANTIBODY BY INTRAVENOUS INFUSION	10,947.30	7,507.50	3,439.80
79440	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTICULAR ADMINISTRATION	10,947.30	7,507.50	3,439.80
79445	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTERIAL PARTICULATE ADMINISTRATION	10,947.30	7,507.50	3,439.80
87207	OUTPATIENT MALARIA PACKAGE	1,170.00	1,170.00	-
88174	EVALUATION OF ASPIRATE (CT-GUIDED BIOPSY) WITH OR WITHOUT PREPARATION OF SMEARS; IMMEDIATE CYTOLOGIC STUDY TO DETERMINE ADEQUACY OF SPECIMEN(S), INTERPRETATION AND REPORT	7,753.20	5,460.00	2,293.20
88331	PATHOLOGY CONSULTATION DURING SURGERY; WITH FROZEN SECTION(S), SINGLE BLOCK	7,753.20	5,460.00	2,293.20
89221	DIRECTLY OBSERVED TREATMENT SHORT-COURSE; INTENSIVE PHASE	4,875.00	4,875.00	-
89222	DIRECTLY OBSERVED TREATMENT SHORT-COURSE; MAINTENANCE PHASE	2,925.00	2,925.00	-
90375	ANIMAL BITE TREATMENT (ABT) PACKAGE	5,850.00	5,850.00	-
90945	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)	5,070.00	4,387.50	682.50
96408*	CHEMOTHERAPY ADMINISTRATION	14,196.00	10,920.00	3,276.00
96440*	CHEMOTHERAPY ADMINISTRATION INTO PLEURAL CAVITY, REQUIRING AND INCLUDING THORACENTESIS	7,589.40	5,869.50	1,719.90
96408**	CHEMOTHERAPY ADMINISTRATION	10,920.00	8,400.00	2,520.00
96440**	CHEMOTHERAPY ADMINISTRATION INTO PLEURAL CAVITY, REQUIRING AND INCLUDING THORACENTESIS	5,838.00	4,515.00	1,323.00
96445	CHEMOTHERAPY ADMINISTRATION INTO PERITONEAL CAVITY, REQUIRING AND INCLUDING PERITONEOCENTESIS	10,947.30	7,507.50	3,439.80
96450	CHEMOTHERAPY ADMINISTRATION INTO CNS, REQUIRING AND INCLUDING SPINAL PUNCTURE	7,589.40	5,869.50	1,719.90
96542	CHEMOTHERAPY INJECTION, SUBARACHNOID OR INTERVENTRICULAR VIA SUBCUTANEOUS RESERVOIR	4,968.60	3,822.00	1,146.60
96567	PHOTODYNAMIC THERAPY BY EXTERNAL APPLICATION OF LIGHT TO DESTROY PREMALIGNANT AND/OR MALIGNANT LESIONS OF THE SKIN AND ADJACENT MUCOSA (E.G., LIP) BY ACTIVATION OF PHOTSENSITIVE DRUG(S), 1 OR MORE PHOTOTHERAPY EXPOSURE SESSION	10,947.30	7,507.50	3,439.80
99460	EXPANDED NEWBORN CARE PACKAGE	5,752.50	4,774.50	978.00

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58300	INSERTION OF INTRAUTERINE DEVICE (IUD)	3,900.00	2,340.00	1,560.00
ANC01	ANTENATAL CARE PACKAGE	2,925.00	1,755.00	1,170.00
ANC02	ANTENATAL CARE SERVICES WITH INTRAPARTUM MONITORING OR LABOR WATCH (WITHOUT DELIVERY)	4,192.50	2,515.50	1,677.00
FP001	SUBDERMAL CONTRACEPTIVE IMPLANT	5,850.00	3,510.00	2,340.00
MCP01	ROUTINE OBSTETRIC CARE INCLUDING PRENATAL, DELIVERY AND NEWBORN SERVICES OF NON-HOSPITAL FACILITIES (MATERNITY CARE PACKAGE)	15,600.00	9,360.00	6,240.00
NSD01	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM CARE, VAGINAL DELIVERY AND/OR POSTPARTUM CARE (NORMAL SPONTANEOUS DELIVERY PACKAGE) FOR NON-HOSPITALS	12,675.00	7,605.00	5,070.00
P0000	RESUSCITATION PACKAGE	7,800.00	5,460.00	2,340.00

Codes with \* Rates applicable to all chemotherapy sessions except for Lung, Liver, Ovary, and Prostate cancer  
Codes with \*\* Rates applicable to all chemotherapy sessions for Lung, Liver, Ovary, and Prostate cancer