## South Dakota Medicaid Physician Services Fee Schedule

Effective July 1, 2023 Updated May 1, 2024

Providers must bill for services at their usual and customary charge. The fee listed below is the maximum allowable amount a provider may be reimbursed. Providers must append applicable modifiers to procedure codes. A list of authorized modifiers and payment effects is available at: https://dss.sd.gov/docs/medicaid/modifiers.pdf.

Providers should refer to South Dakota Medicaid's provider manual webpage for applicable coverage criteria and claim instructions: <a href="https://dss.sd.gov/medicaid/providers/billingmanuals/">https://dss.sd.gov/medicaid/providers/billingmanuals/</a>. For information regarding requesting a coverage or rate change refer to the Reconsideration, Reviews, Coverage Requests, and Fair Hearing provider manual. **Changes to current fees are indicated in red** 

The rate of payment for "Price by Report" is generally 40% of the usual and customary charge as established in ARSD 67:16:02:03.

| Code  | Description   | Fee                 |
|-------|---|---------------------|
| 1999  | Unlisted Anesthesia Procedure(S)  | Price By Report     |
| 10004 | Fine Needle Aspiration Of Additional Lesion   | \$47.03             |
| 10005 | Fine Needle Aspiration Of First Lesion Using Ultrasound Guidance  | \$145.31            |
| 10006 | Fine Needle Aspiration Of Additional Lesion Using Ultrasound Guidance   | \$62.31             |
| 10007 | Fine Needle Aspiration Of First Lesion Using Fluoroscopic Guidance  | \$290.71            |
| 10008 | Fine Needle Aspiration Of Additional Lesion Using Fluoroscopic Guidance   | \$158.55            |
|       | Fine Needle Aspiration Of First Lesion Using Ct Guidance  | \$321.99            |
| 10010 | Fine Needle Aspiration Of Additional Lesion Using Ct Guidance   | \$257.32            |
|       | Fine Needle Aspiration Of First Lesion Using Mr Guidance  | \$166.77            |
|       | Fine Needle Aspiration Of Additional Lesion Using Mr Guidance   | \$166.77            |
|       | Fine Needle Aspiration Of First Lesion  | \$106.89            |
|       | Drainage Of Fluid Collection In Soft Tissue Using Imaging Guidance  | \$679.51            |
|       | Placement Of Soft Tissue Locating Device Using X-Ray, First Growth  | \$409.48            |
|       | Placement Of Soft Tissue Locating Device Using X-Ray, Each Additional Growth  | \$308.54            |
|       | Acne Surgery (Eg., Marsupialization, Opening Or Removal Of Multiple Milia, Comedones, Cysts, Pustules)  | \$99.05             |
|       | Simple Or Single Drainage Of Skin Abscess   | \$108.19            |
|       | Complicated Or Multiple Drainage Of Skin Abscess  | \$193.46            |
|       | Simple Drainage Of Cyst Of Tailbone   | \$181.77            |
|       | Complicated Drainage Of Cyst Of Tailbone  | \$244.67            |
|       | Removal Of Foreign Body From Tissue, Accessed Beneath The Skin, Simple  | \$159.21            |
|       | Removal Of Foreign Body From Tissue, Accessed Beneath The Skin, Simple  Removal Of Foreign Body From Tissue, Accessed Beneath The Skin, Complex | \$159.21            |
|       | Drainage Of Blood Or Fluid Accumulation   | · ·                 |
|       | · ·   | \$179.25            |
|       | Aspiration Of Abscess, Blood, Or Cyst   | \$125.24            |
|       | Complex Drainage Of Wound Infection After Surgery   | \$235.90            |
|       | Removal Of Inflamed Or Infected Skin, Up To 10% Of Body Surface   | \$55.51             |
|       | Removal Of Inflamed Or Infected Skin, Each Additional 10% Of Body Surface Or Less   | \$24.98             |
|       | Removal Of Infected Skin, Tissue Or Muscle Of Genitals  | \$561.69            |
|       | Removal Of Infected Skin, Tissue Or Muscle Of Abdomen   | \$754.55            |
|       | Removal Of Infected Skin, Tissue Or Muscle Of Genitals, Perineum, Or Abdomen  | \$687.39            |
| 11008 | Removal Of Infected Artificial Material Or Mesh From Abdomen  | \$238.95            |
|       | Debridement Including Removal Of Foreign Material At The Site Of An Open Fracture And/Or An Open Dislocation (Eg, Excisional                    | 4                   |
|       | Debridement); Skin And Subcutaneous Tissues   | \$468.80            |
|       | Removal Of Foreign Material From Skin, Tissue, And Muscle At Open Fracture And/Or Dislocation   | \$519.71            |
|       | Removal Of Foreign Material From Skin, Tissue, Muscle, And Bone At Open Fracture And/Or Dislocation   | \$702.86            |
|       | Removal Of Skin And Tissue, 20.0 Sq Cm Or Less  | \$90.93             |
|       | Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less   | \$241.72            |
|       | Removal Of Bone, 20.0 Sq Cm Or Less   | \$287.75            |
|       | Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less  | \$41.83             |
|       | Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less   | \$74.47             |
| 11047 | Removal Of Bone, Each Additional 20.0 Sq Cm Or Less   | \$121.65            |
| 11055 | Removal Of Noncancer Thickened Skin Growth, 1 Growth  | \$51.18             |
| 11056 | Removal Of Noncancer Thickened Skin Growth, 2-4 Growths   | \$59.03             |
|       | Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths   | \$71.10             |
| 11102 | Tangential Biopsy Of Single Skin Lesion   | \$98.65             |
| 11103 | Tangential Biopsy Of Additional Skin Lesion   | \$35.83             |
| 11104 | Punch Biopsy Of Single Skin Lesion  | \$98.65             |
|       | Punch Biopsy Of Additional Skin Lesion  | \$41.66             |
| 11106 | Incisional Biopsy Of Single Skin Lesion   | \$110.75            |
|       | Incisional Biopsy Of Additional Skin Lesion   | \$64.22             |
|       | Removal Of Skin Tag, 1-15 Skin Tags   | \$78.14             |
|       | Removal Of Skin Tag, Each Additional 10 Skin Tags   | \$18.67             |
|       | Shaving Of 0.5 Centimeters Or Less Skin Growth Of The Trunk, Arms, Or Legs  | \$72.28             |
|       | Shaving Of 0.6 Centimeters To 1.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs   | \$92.54             |
|       | Shaving Of 1.1 To 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs   | \$97.56             |
|       | Shaving Of Over 2.0 Centimeters Skin Growth Of The Trunk, Arms, Or Legs   | \$129.55            |
|       | Shaving Of 0.5 Centimeters Or Less Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals   | \$75.73             |
|       | Shaving Of 0.6 Centimeters To 1.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals  | \$96.83             |
|       | Shaving Of 1.1 To 2.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals  | \$99.25             |
|       | Shaving Of Over 2.0 Centimeters Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals  | \$99.25<br>\$140.76 |
|       | Shaving Of 0.5 Centimeters Or Less Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth   |                     |
| 11310 | Shaving Ot 0.3 Centitricters Of Less Skill Growth Of Face, Ears, Eyelius, Nose, Elps, Of Mouth  | \$84.66             |

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| Code Description  11311 Shaving Of 0.6 Centimeters To 1.0 Centimeters Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth   | Fee \$106.05         |
| 11312 Shaving Of 1.1 To 2.0 Centimeters Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth   | \$106.05<br>\$125.16 |
| 11313 Shaving Of Over 2.0 Centimeters Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth   | \$162.53             |
| 11400 Removal Of Growth (0.5 Centimeters Or Less) Of The Trunk, Arms Or Legs   | \$126.76             |
| 11401 Removal Of Growth (0.6 To 1.0 Centimeters) Of The Trunk, Arms, Or Legs   | \$144.88             |
| 11402 Removal Of Growth (1.1 To 2.0 Centimeters) Of The Trunk, Arms, Or Legs   | \$170.09             |
| 11403 Removal Of Growth (2.1 To 3.0 Centimeters) Of The Trunk, Arms, Or Legs   | \$185.23             |
| 11404 Removal Of Growth (3.1 To 4.0 Centimeters) Of The Trunk, Arms, Or Legs   | \$155.36             |
| 11406 Removal Of Growth (4.0 Centimeters) Of The Trunk, Arms, Or Legs  | \$294.09             |
| 11420 Removal Of Growth (0.5 Centimeters Or Less) Of The Scalp, Neck, Hands, Feet, Or Genitals   | \$120.63             |
| 11421 Removal Of Growth (0.6 To 1.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals  | \$154.86             |
| 11422 Removal Of Growth (1.1 To 2.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals  | \$173.64             |
| 11423 Removal Of Growth (2.1 To 3.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals 11424 Removal Of Growth (3.1 To 4.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals  | \$143.19             |
| 11424 Removal Of Growth (3.1 10 4.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Of Genitals  | \$166.05<br>\$227.72 |
| 11440 Removal Of Growth (0.5 Centimeters Or Less) Of The Face, Ears, Eyelids, Nose, Lips, Or Mouth   | \$142.83             |
| 11441 Removal Of Growth (0.6 To 1.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, Or Mouth  | \$169.25             |
| 11442 Removal of Growth (1.1 To 2.0 Centimeters) of The Face, Ears, Eyelids, Nose, Lips, or Mouth  | \$189.80             |
| 11443 Removal Of Growth (2.1 To 3.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, Or Mouth  | \$172.33             |
| 11444 Removal (3.1 To 4.0 Centimeters) Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth   | \$195.68             |
| 11446 Removal (Over 4.0 Centimeters) Growth Of The Face, Ears, Eyelids, Nose, Lips, Or Mouth   | \$336.91             |
| 11450 Removal Of Skin And Tissue Of Underarms For Inflamed Sweat Glands With Simple Or Intermediate Repair   | \$302.89             |
| 11451 Removal Of Skin And Tissue Of Underarms For Inflamed Sweat Glands With Complex Repair  | \$366.60             |
| 11462 Removal Of Skin And Tissue Of Groin For Inflamed Sweat Glands With Simple Or Intermediate Repair   | \$402.21             |
| 11463 Removal Of Skin And Tissue Of Groin For Inflamed Sweat Glands With Complicated Repair  | \$372.91             |
| 11470 Removal Of Skin And Tissue Of Anus Or Navel For Inflamed Sweat Glands With Simple Or Intermediate Repair   | \$406.03             |
| 11471 Removal Of Skin And Tissue Of Anus Or Navel For Inflamed Sweat Glands With Complicated Repair  | \$479.48             |
| 11600 Removal Of Malignant Growth (0.5 Centimeters Or Less) Of The Trunk, Arms, Or Legs  | \$188.79             |
| 11601 Removal Of Malignant Growth (0.6 To 1.0 Centimeters) Of The Trunk, Arms, Or Legs   | \$217.37             |
| 11602 Removal Of Malignant Growth (1.1 To 2.0 Centimeters) Of The Trunk, Arms, Or Legs   | \$174.10             |
| 11603 Removal Of Malignant Growth (2.1 To 3.0 Centimeters) Of The Trunk, Arms, Or Legs   | \$192.93             |
| 11604 Removal Of Malignant Growth (3.1 To 4 Centimeters) Of The Trunk, Arms, Or Legs   | \$222.86             |
| 11606 Removal Of Malignant Growth (Over 4.0 Centimeters) Of The Trunk, Arms, Or Legs   | \$392.58             |
| 11620 Removal Of Malignant Growth (0.5 Centimeters Or Less) Of The Scalp, Neck, Hands, Feet, Or Genitals   | \$177.81             |
| 11621 Removal Of Malignant Growth (0.6 To 1.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals  | \$218.02             |
| 11622 Removal Of Malignant Growth (1.1 To 2.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals  11623 Removal Of Malignant Growth (2.1 To 3.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals                   | \$239.52             |
| 11624 Removal Of Malignant Growth (3.1 To 4 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals  | \$279.13<br>\$316.68 |
| 11626 Removal Of Malignant Growth (Over 4.0 Centimeters) Of The Scalp, Neck, Hands, Feet, Or Genitals  | \$322.17             |
| 11640 Removal Of Malignant Growth (0.5 Centimeters Or Less) Of The Face, Ears, Eyelids, Nose, Or Lips  | \$194.02             |
| 11641 Removal Of Malignant Growth (0.6 To 1.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips   | \$234.95             |
| 11642 Removal Of Malignant Growth (1.1 To 2.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips   | \$264.73             |
| 11643 Removal Of Malignant Growth (2.1 To 3.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips   | \$296.59             |
| 11644 Removal Of Malignant Growth (3.1 To 4.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips   | \$364.26             |
| 11646 Removal Of Malignant Growth (Over 4.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Or Lips   | \$442.82             |
| 11720 Debridement Of Nail(S) By Any Method(S); One To Five   | \$31.01              |
| 11721 Debridement Of Nail(S) By Any Method(S); Six Or More   | \$44.04              |
| 11730 Separation Of Single Nail Plate From Nail Bed  | \$99.63              |
| 11732 Separation Of Additional Nail Plate From Nail Bed  | \$26.88              |
| 11740 Evacuation Of Subungual Hematoma   | \$44.08              |
| 11750 Removal Of Nail  | \$170.11             |
| 11755 Biopsy Of Nail Unit (Eg., Plate, Bed, Matrix, Hyponychium, Proximal And Lateral Nail Folds) (Separate Procedure)   | \$96.13              |
| 11760 Repair Of Nail Bed   | \$195.03             |
| 11762 Reconstruction Of Nail Bed With Graft  | \$275.95             |
| 11765 Removal Of Skin Of Finger Or Toe Nail  | \$123.43             |
| 11770 Removal Of Tailbone Cyst, Simple 11771 Removal Of Tailbone Cyst, Extensive   | \$323.58             |
| 11777 Removal Of Tailbone Cyst, Extensive  | \$434.22<br>\$535.34 |
| 11900 Injection, Intralesional; Up To And Including Seven Lesions  | \$535.34<br>\$54.41  |
| 11901 Injection, Intralesional; More Than Seven Lesions  | \$68.03              |
| Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; 6.0 Sq Cm  | ψ00.00               |
| 11920 Or Less  | \$183.91             |
| 11921 Introduction Of Pigment Into Skin (6.1 To 20.0 Sq Cm) To Correct Color Defect  | \$204.11             |
| Tattooing, Intradermal Introduction Of Insoluble Opaque Pigments To Correct Color Defects Of Skin, Including Micropigmentation; Each   |                      |
| 11922 Additional 20.0 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure)   | \$60.51              |
| 11950 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 1 Cc Or Less  | \$74.52              |
| 11951 Injection Of 1.1 To 5.0 Cc Filling Material, Beneath The Skin  | \$99.30              |
| 11952 Subcutaneous Injection Of "Filling" Material (Eg, Collagen); 5.1 To 10.0 Cc  | \$132.36             |
| 11954 Injection Of Over 10.0 Cc Filling Material, Beneath The Skin   | \$145.78             |
| 11960 Insertion Of Tissue Expander(S) For Other Than Breast, Including Subsequent Expansion  | \$687.99             |
| 11970 Replacement Of Tissue Expander With Permanent Implant  | \$570.80             |
| 11071 Pamayal At Liceua Evpandare  | \$369.42             |
| 11971 Removal Of Tissue Expanders  | \$147.95             |
| 11976 Removal, Implantable Contraceptive Capsules  |                      |
| 11976 Removal, Implantable Contraceptive Capsules 11980 Subcutaneous Hormone Pellet Implantation (Implantation Of Estradiol And/Or Testosterone Pellets Beneath The Skin)  | \$87.05              |
| 11976 Removal, Implantable Contraceptive Capsules 11980 Subcutaneous Hormone Pellet Implantation (Implantation Of Estradiol And/Or Testosterone Pellets Beneath The Skin) 11981 Insertion, Non-Biodegradable Drug Delivery Implant | \$104.15             |
| 11976 Removal, Implantable Contraceptive Capsules 11980 Subcutaneous Hormone Pellet Implantation (Implantation Of Estradiol And/Or Testosterone Pellets Beneath The Skin)  |                      |

| Code Description   | Fee            |
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| 12001 Repair Of Wound (2.5 Centimeters Or Less) Of The Scalp, Neck, Underarms, Trunk, Arms And/Or Legs   | \$97.71        |
| 12002 Repair Of Wound (2.6 To 7.5 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs                                | \$117.23       |
| 12004 Repair Of Wound (7.6 To 12.5 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs                               | \$135.67       |
| 12005 Repair Of Wound (12.6 To 20.0 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs                              | \$182.61       |
| 12006 Repair Of Wound (20.1 To 30.0 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs                              | \$183.76       |
| 12007 Repair Of Wound (Over 30.0 Centimeters) Of The Scalp, Neck, Underarms, Genitals, Trunk, Arms And/Or Legs                                 | \$242.50       |
| 12011 Repair Of Wound (2.5 Centimeters Or Less) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes                                | \$116.75       |
| 12013 Repair Of Wound (2.6 To 5.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes                                 | \$121.12       |
| 12014 Repair Of Wound (5.1 To 7.5 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes                                 | \$128.91       |
| 12015 Repair Of Wound (7.6 To 12.5 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes                                | \$156.89       |
| 12016 Repair Of Wound (12.6 To 20.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes                               | \$212.11       |
| 12017 Repair Of Wound (20.1 To 30.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes                               | \$148.22       |
| 12018 Repair Of Wound (Over 30.0 Centimeters) Of The Face, Ears, Eyelids, Nose, Lips, And/Or Mucous Membranes                                  | \$150.99       |
| 12020 Simple Closure Of Surface Wound Reopening  | \$208.94       |
| 12021 Repair Of Separation Of Wound Closure With Insertion Of Packing  | \$121.78       |
| 12031 Repair Of Wound (2.5 Centimeters Or Less) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs  | \$221.32       |
| 12032 Repair Of Wound (2.6 To 7.5 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs   | \$293.85       |
| 12034 Repair Of Wound (7.6 To 12.5 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs  | \$288.52       |
| 12035 Repair Of Wound (12.6 To 20.0 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs   | \$269.37       |
| 12036 Repair Of Wound (20.1 To 30.0 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs   | \$297.59       |
| 12037 Repair Of Wound (Over 30.0 Centimeters) Of The Scalp, Underarms, Trunk, Arms, And/Or Legs  | \$331.45       |
| 12041 Repair Of Wound (2.5 Centimeters Or Less) Of Neck, Hands, Feet, And/Or Genitals  | \$223.55       |
| 12041 Repair Of Wound (2.5 Centimeters Of Less) Of Neck, Hands, Feet, And/Or Genitals  |                |
|  | \$278.59       |
| 12044 Repair Of Wound (7.6 To 12.5 Centimeters) Of Neck, Hands, Feet, And/Or Genitals  | \$266.43       |
| 12045 Repair Of Wound (12.6 To 20.0 Centimeters) Of Neck, Hands, Feet, And/Or Genitals   | \$282.41       |
| 12046 Repair Of Wound (20.1 To 30.0 Centimeters) Of Neck, Hands, Feet, And/Or Genitals   | \$437.45       |
| 12047 Repair Of Wound (Over 30.0 Centimeters) Of Neck, Hands, Feet, And/Or Genitals  | \$513.57       |
| 12051 Repair Of Wound (2.5 Centimeters Or Less) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth   | \$259.91       |
| 12052 Repair Of Wound (2.6 To 5.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth  | \$287.11       |
| 12053 Repair Of Wound (5.1 To 7.5 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth  | \$255.14       |
| 12054 Repair Of Wound (7.6 To 12.5 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth   | \$268.46       |
| 12055 Repair Of Wound (12.6 To 20.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth  | \$350.00       |
| 12056 Repair Of Wound (20.1 To 30.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth  | \$547.55       |
| 12057 Repair Of Wound (Over 30.0 Centimeters) Of Face, Ears, Eyelids, Nose, Lips, And/Or Mouth   | \$576.50       |
| 13100 Repair, Complex, Trunk; 1.0 Cm To 2.5 Cm   | \$305.74       |
| 13101 Repair, Complex, Trunk; 2.5 Cm To 7.5 Cm   | \$383.95       |
| 13102 Repair, Complex, Trunk; Each Additional 5 Cm Or Less (List Separately In Addition To Code For Primary Procedure)                         | \$109.16       |
| 13120 Repair Of Wound (1.1 To 2.5 Centimeters) Of Scalp, Arms, And/Or Legs   | \$249.06       |
| 13121 Repair Of Wound (2.6 To 7.5 Centimeters) Of Scalp, Arms, And/Or Legs   |                |
|  | \$425.40       |
| 13122 Repair Of Wound Of Scalp, Arms, And/Or Legs  | \$132.60       |
| 13131 Repair Of Wound (1.1 To 2.5 Centimeters) Of Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, And/Or Feet                 | \$353.42       |
| 13132 Repair Of Wound (2.6 To 7.5 Centimeters) Of Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, And/Or Feet                 | \$498.92       |
| 13133 Repair Of Wound Of Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, And/Or Feet  | \$176.72       |
| 13151 Repair Of Wound (1.1 To 2.5 Centimeters) Of Eyelids, Nose, Ears, And/Or Lips   | \$405.17       |
| 13152 Repair Of Wound (2.6 To 7.5 Centimeters) Of Eyelids, Nose, Ears, And/Or Lips   | \$555.44       |
| 13153 Repair Of Wound Of Eyelids, Nose, Ears, And/Or Lips  | \$191.42       |
| 13160 Extensive Or Complicated Repair Of Surface Wound Reopening   | \$817.29       |
| 14000 Adjacent Tissue Transfer Or Rearrangement, Trunk; Defect Up To 10 Sq Cm  | \$559.96       |
| 14001 Adjacent Tissue Transfer Or Rearrangement, Trunk; Defect 10 Sq Cm To 30 Sq Cm  | \$750.36       |
| 14020 Tissue Transfer Repair Of Wound (10 Sq Centimeters Or Less) Of The Scalp, Arms, And/Or Legs  | \$481.10       |
| 14021 Tissue Transfer Repair Of Wound (10.1 To 30.0 Sq Centimeters) Of The Scalp, Arms, And/Or Legs  | \$658.77       |
| Tissue Transfer Repair Of Wound (10 Sq Centimeters Or Less) Of The Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands,            |                |
| 14040 And/Or Feet  | \$579.38       |
| Tissue Transfer Repair Of Wound (10.1 To 30.0 Sq Centimeters) Of The Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands,          |                |
| 14041 And/Or Feet  | \$782.51       |
| 14060 Tissue Transfer Repair Of Wound (10 Sq Centimeters Or Less) Of Eyelids, Nose, Ears, And/Or Lips  | \$664.91       |
| 14061 Tissue Transfer Repair Of Wound (10.1 To 30.0 Sq Centimeters) Of Eyelids, Nose, Ears, And/Or Lips  | \$917.87       |
| 14301 Adjacent Tissue Transfer Or Rearrangement, Any Area: Defect 30.1 Sq Cm To 60.0 Sq Cm   | \$1,121.11     |
| 14302 Tissue Transfer Repair Of Wound (30.0 Sq Centimeters)  | \$214.95       |
| 14350 Filleted Finger Or Toe Flap, Including Preparation Of Recipient Site   | \$643.50       |
| 15002 Preparation Of Graft Site At Trunk, Arms, Or Legs (First 100 Sq Cm Or 1% Body Area Infants And Children)                                 | *              |
|  | \$335.69       |
| 15003 Preparation Of Graft Site At Trunk, Arms, Or Legs  | \$71.67        |
| Preparation Of Graft Site Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes       | <b>#070.05</b> |
| 15004 (First 100 Sq Cm Or 1% Body Area Of Infants And Children)  | \$273.05       |
| 45005 Desperation Of Craft Site Of Ecop Scale Fuelide Mouth Next For Size Paries Continued For Audio Military Size                             | 0400 (=        |
| 15005 Preparation Of Graft Site Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes | \$123.17       |
| 15040 Harvest Of Skin For Tissue Cultured Skin Autograft, 100 Sq Cm Or Less  | \$251.00       |
| 15050 Skin Graft To Tip Of Finger Or Toe, 2.0 Cm Or Less   | \$558.59       |
| 15100 Partial Thickness Skin Graft At Trunk, Arms, Or Legs (First 100 Sq Cm Or Less, Or 1% Body Are Of Infants And Children)                   | \$895.68       |
| 15101 Partial Thickness Skin Graft At Trunk, Arms, Or Legs (Additional 100 Sq Cm, Or 1% Body Are Of Infants And Children)                      | \$197.00       |
| 15110 Skin Graft At Trunk, Arms, Or Legs (First 100 Sq Cm Or Less, Or 1% Body Area Of Infants And Children), Outer Layer                       | \$863.53       |
| 15111 Skin Graft At Trunk, Arms, Or Legs (Additional 100 Sq Cm, Or 1% Body Are Of Infants And Children), Outer Layer                           | \$112.00       |
| Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (First 100 Sq Cm     | ,              |
| 15115 Or Less, Or 1% Body Area Of Infants And Children)  | \$742.93       |
| Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (Additional 100 Sq   | Ţ <b>2</b> .50 |
| 15116 Cm Or Less, Or 1% Body Area Of Infants And Children), Outer Layer  | \$148.55       |
|  | ψ1 10.00       |

| Code  | Description Control of the Control o | Fee                      |
|-------|--|--------------------------|
| 15120 | Partial Thickness Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (First 100 Sq Cm Or Less, Or 1% Body Area Of Infants And Children)   | \$675.90                 |
| 10120 | Partial Thickness Skin Graft Of Face, Scalp, Evelids, Mouth, Neck, Ears, Eve Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes  | ψ010.50                  |
| 15121 | (Additional 100 Sq Cm Or Less, Or 1% Body Area Of Infants And Children)  | \$220.88                 |
| 15130 | Skin Graft At Trunk, Arms, Or Legs (First 100 Sq Cm Or Less, Or 1% Body Area Of Infants And Children), Deep Layer  | \$674.95                 |
| 15131 | Skin Graft At Trunk, Arms, Or Legs (Additional 100 Sq Cm, Or 1% Body Area Of Infants And Children), Deep Layer   | \$88.10                  |
|       | Deep Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (First 100 Sq   |                          |
| 15135 | Cm Or Less, Or 1% Body Area Of Infants And Children)   | \$817.09                 |
| 15126 | Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (Additional 100 Sq Cm, Or 1% Body Area Of Infants And Children), Deep Layer  | \$87.11                  |
|       | Tissue Cultured Skin Graft At Trunk, Arms, Or Legs (First 25 Sq Centimeters Or Less)   | \$644.00                 |
|       | Tissue Cultured Skin Graft At Trunk, Arms, Or Legs (Additional 1 Sq Cm To 75 Sq Cm)  | \$104.87                 |
| 10101 |  | ψ.σσ.                    |
| 15152 | Tissue Cultured Skin Graft At Trunk, Arms, Or Legs (Additional 100 Sq Cm, Or Each Additional 1% Of Body Area Of Infants And Children)  | \$132.23                 |
|       | Tissue Cultured Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes  |                          |
| 15155 | (First 25 Sq Centimeters Or Less)  | \$733.80                 |
| 45450 | Tissue Cultured Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes  | £440.70                  |
| 15156 | (Additional 1 Sq Cm To 75 Sq Cm)  Tissue Cultured Skin Graft Of Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes  | \$140.72                 |
| 15157 | (Additional 100 Sq Cm, Or Each Additional 1% Of Body Area Of Infants And Children)   | \$156.45                 |
|       | Full Thickness Skin Graft To Trunk, 20.0 Sq Cm Or Less   | \$778.51                 |
|       | Full Thickness Skin Graft To Trunk, Each Additional 20.0 Sq Cm   | \$132.34                 |
|       | Full Thickness Skin Graft To Scalp, Arms, Or Legs, 20.0 Sq Cm Or Less  | \$680.46                 |
|       | Full Thickness Skin Graft To Scalp, Arms, Or Legs, Each Additional 20.0 Sq Cm  | \$137.70                 |
| 15240 | Full Thickness Skin Graft To Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, Or Feet, 20.0 Sq Cm Or Less  | \$936.90                 |
|       |  |                          |
|       | Full Thickness Skin Graft To Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, Or Feet, Each Additional 20.0 Sq Cm  | \$163.10                 |
|       | Full Thickness Skin Graft To Nose, Ears, Eyelids, Or Lips, 20.0 Sq Cm Or Less  | \$715.90                 |
|       | Full Thickness Skin Graft To Nose, Ears, Eyelids, Or Lips, Each Additional 20.0 Sq Cm  | \$193.85                 |
|       | Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Trunk, Arms, Or Legs (First 25 Sq Cm Or Less)  | \$165.85                 |
| 15272 | Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Trunk, Arms, Or Legs   | \$25.59                  |
| 15273 | Application Of Skin Substitute (Wound Surface Greater Or Equal To 100 Sq Cm) To Trunk, Arms, Or Legs (First 100 Sq Cm Or 1% Body Area Of Infants And Children)   | \$329.22                 |
|       | Application Of Skin Substitute (Wound Surface Greater Or Equal To 100 Sq Cm) To Trunk, Arms, Or Legs   | \$75.21                  |
| 10271 | Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands,  | ψ/ 0.21                  |
| 15275 | Feet, And/Or Multiple Fingers Or Toes (First 25 Sq Cm Or Less)   | \$167.85                 |
|       | Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands,  |                          |
| 15276 | Feet, And/Or Multiple Fingers Or Toes"   | \$33.35                  |
|       | Application Of Skin Substitute (Wound Surface Great Than Or Equal To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region,  |                          |
| 15277 | Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes (First 100 Sq Cm Or 1% Body Area Of Infants And Children)   | \$361.50                 |
| 15278 | Application Of Skin Substitute (Wound Surface Great Than Or Equal To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/Or Multiple Fingers Or Toes   | \$90.26                  |
|       | Formation Of Direct Or Tubed Pedicle, With Or Without Transfer; Trunk  | \$844.17                 |
|       | Creation Of Flap Graft To Scalp, Arms, Or Legs   | \$811.47                 |
|       | Creation Of Flap Graft To Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, Or Feet   | \$818.74                 |
| 15576 | Creation Of Flap Graft To Eyelids, Nose, Ears, Lips, Or Mouth  | \$735.00                 |
| 15600 | Delay Of Flap Or Sectioning Of Flap (Division And Inset); At Trunk   | \$321.74                 |
|       | Transfer Of Skin Flap To Scalp, Arms, Or Legs  | \$348.15                 |
|       | Transfer Of Skin Flap To Forehead, Cheeks, Chin, Neck, Underarms, Genitals, Hands, Or Feet   | \$421.81                 |
|       | Transfer Of Skin Flap To Eyelids, Nose, Ears, Or Lips  | \$462.25                 |
|       | Transfer, Intermediate, Of Any Pedicle Flap (Eg, Abdomen To Wrist, "Walking" Tube), Any Location   | \$480.51                 |
|       | Creation Of Flap Graft To Midface  | \$1,361.09               |
|       | Creation Of Flap Graft To Nose, Forehead, Temple, Or Scalp Creation Of Flap Graft To Head And/Or Neck  | \$1,162.98<br>\$1,085.43 |
|       | Muscle, Myocutaneous, Or Fasciocutaneous Flap Trunk  | \$1,515.80               |
|       | Muscle, Myocutaneous, Or Fasciocutaneous Flap Upper Extremity  | \$1,228.71               |
|       | Muscle, Myocutaneous, Or Fasciocutaneous Flap Lower Extremity  | \$1,283.87               |
|       | Flap; Island Pedicle Requiring Identification And Dissection Of An Anatomically Named Axial Vessel   | \$1,004.93               |
|       | Flap; Neurovascular Pedicle  | \$847.76                 |
| 15756 | Creation Of Muscle Or Muscle And Skin Graft With Reattachment Of Small Blood Vessels   | \$2,313.12               |
|       | Creation Of Skin Graft With Reattachment Of Small Blood Vessels  | \$2,302.86               |
|       | Creation Of Fibrous Muscle Covering (Fascia) Graft With Reattachment Of Small Blood Vessels  | \$2,072.42               |
|       | Graft; Composite (Full Thickness Of External Ear Or Nasal Ala), Including Primary Closure, Donor Area  | \$787.53                 |
|       | Grafting Of Patient Soft Tissue, Harvested By Direct Excision  | \$489.78                 |
|       | Creation Of Skin, Fat And Muscle Graft  Crefting Of Patient Fat Harvested By Lineaustics To Trunk Breasts, Scale Arms, And/Or Leas: F0 Cubic Continuous Or Leas  | \$600.57                 |
| 15//1 | Grafting Of Patient Fat, Harvested By Liposuction To Trunk, Breasts, Scalp, Arms, And/Or Legs; 50 Cubic Centimeters Or Less  | \$591.08                 |
| 15772 | Grafting Of Patient Fat, Harvested By Liposuction To Trunk, Breasts, Scalp, Arms, And/Or Legs; Additional 50 Cubic Centimeters Or Less   | \$184.45                 |
| .0.72 | Grafting Of Patient Fat, Harvested By Liposuction To Face, Evelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, And/Or Feet; 25 Cc Or Less  | ψ10-740                  |
| 15773 | Injectate  | \$556.66                 |
|       | Grafting Of Patient Fat, Harvested By Liposuction To Face, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, And/Or Feet; Each Additional  |                          |
| 15774 | 25 Cc Or Less Injectate  | \$170.57                 |
|       | Implantation Of Biologic Implant (Eg, Acellular Dermal Matrix) For Soft Tissue Reinforcement (Eg, Breast, Trunk) (List Separately In Addition To   |                          |
|       | Code For Primary Procedure)  | \$213.29                 |
|       | Implantation Of Artificial Material For Delayed Closure Of Defects Due To Soft Tissue Infection Or Trauma  | \$318.65                 |
|       | Scraping Of Skin Of The Entire Face  | \$797.13                 |
| 16/21 | Repair Of Detached Retina, 1 Or More Sessions  | \$508.34                 |

|  | Description Country of Country | Fee   |
|--|--|---|
|  | Scraping Of Skin Other Than The Face Scraping Of Skin Any Site (Superficial)   | \$459.01<br>\$423.03  |
|  | Abrasion; Single Lesion (Eg, Keratosis, Scar)  | \$220.84  |
|  | Abrasion; Each Additional Four Lesions Or Less (List Separately In Addition To Code For Primary Procedure)   | \$29.66   |
|  | Chemical Peel Of Skin Of Face, Outer Layer   | \$376.18  |
|  | Chemical Peel Of Skin Of Face, Deep Layer  | \$499.84  |
| 15792  | Chemical Peel Of Skin Other Than Face, Outer Layer   | \$319.60  |
| 15793  | Chemical Peel, Nonfacial; Dermal   | \$447.49  |
|  | Cervicoplasty  | \$730.36  |
|  | Blepharoplasty, Lower Eyelid;  | \$545.59  |
|  | Blepharoplasty, Lower Eyelid; With Extensive Herniated Fat Pad   | \$583.29  |
|  | Blepharoplasty, Upper Eyelid;  | \$435.51  |
|  | Blepharoplasty, Upper Eyelid; With Excessive Skin Weighting Down Lid Incision, Stretching, And Suture Of Forehead Skin   | \$591.34<br>\$710.55  |
|  | Incision, Stretching, And Suture Of Neck Skin  | \$710.55<br>Price By Report   |
|  | Incision, Stretching, And Suture Of Skin Between Eyebrows  | \$568.43  |
|  | Incision, Stretching, And Suture Of Skin   | \$2,093.08  |
|  | Removal Of Excessive Skin At Cheek, Chin, Or Neck  | Price By Report   |
|  | Excision, Excessive Skin And Subcutaneous Tissue (Includes Lipectomy); Abdomen, Infraumbilical Panniculectomy  | \$925.69  |
|  | Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Thigh   | \$816.81  |
| 15833  | Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Leg   | \$800.66  |
| 15834  | Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Hip   | \$815.29  |
| 15835  | Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Buttock   | \$848.06  |
|  | Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Arm   | \$728.40  |
|  | Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Forearm Or Hand   | \$803.20  |
|  | Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Submental Fat Pad   | \$594.88  |
|  | Excision, Excessive Skin And Subcutaneous Tissue (Including Lipectomy) Other Area  | \$604.82  |
|  | Fibrous Tissue Graft To Relieve Or Reactivate Facial Paralysis   | \$931.99  |
|  | Muscle Graft To Relieve Or Reactivate Facial Paralysis  Microsurgical Muscle Graft To Relieve Or Reactivate Facial Paralysis   | \$1,617.54  |
|  | Regional Muscle Transfer To Relieve Or Reactivate Facial Paralysis   | \$2,445.61  |
|  | Removal Of Sutures Under Anesthesia (Other Than Local), Other Surgeon  | \$968.96<br>\$75.34   |
|  | Dressing Change (For Other Than Burns) Under Anesthesia (Other Than Local)   | \$46.11   |
|  | Removal Of Sutures Or Staples  | \$10.18   |
|  | Removal Of Sutures And Staples   | \$14.25   |
|  | Intravenous Injection Of Agent (Eg, Fluorescein) To Test Vascular Flow In Flap Or Graft  | \$105.79  |
|  | Suction Assisted Lipectomy; Head And Neck  | Price By Report   |
| 15877  | Suction Assisted Lipectomy; Trunk  | Price By Report   |
| 15878  | Suction Assisted Lipectomy; Upper Extremity  | Price By Report   |
| 15879  | Suction Assisted Lipectomy; Lower Extremity  | Price By Report   |
|  | Excision, Coccygeal Pressure Ulcer, With Coccygectomy; With Primary Suture   | \$441.43  |
|  | Excision, Coccygeal Pressure Ulcer, With Coccygectomy; With Flap Closure   | \$731.55  |
|  | Excision, Sacral Pressure Ulcer, With Primary Suture;  | \$470.35  |
|  | Excision, Sacral Pressure Ulcer, With Primary Suture; With Ostectomy   | \$746.11  |
|  | Excision, Sacral Pressure Ulcer, With Skin Flap Closure;   | \$809.07  |
|  | Excision, Sacral Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Sacral Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;  | \$1,057.05  |
|  | Excision, Sacral Pressure Older, in Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;  Excision, Sacral Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  | \$928.43<br>\$1,057.19  |
|  | Excision, Sacial Pressure Ulcer, With Muscle Of Mydduaneous Plap Glosure, With Ostectomy  Excision, Ischial Pressure Ulcer, With Primary Suture;   | \$501.93  |
|  | Excision, Ischial Pressure Ulcer, With Primary Suture; With Ostectomy (Ischiectomy)  | \$946.11  |
|  | Excision, Ischial Pressure Ulcer, With Skin Flap Closure;  | \$856.09  |
|  | Excision, Ischial Pressure Ulcer, With Skin Flap Closure; With Ostectomy   | \$933.59  |
|  | Excision, Ischial Pressure Ulcer, With Ostectomy, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure   |   |
|  |  | \$1,563.31  |
| 15950  | Excision, Trochanteric Pressure Ulcer, With Primary Suture;  | \$1,563.31<br>\$429.28  |
| 15951  | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy   |   |
| 15951<br>15952   | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure;  | \$429.28<br>\$826.37<br>\$838.53  |
| 15951<br>15952<br>15953  | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32  |
| 15951<br>15952<br>15953<br>15956   | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98  |
| 15951<br>15952<br>15953<br>15956<br>15958  | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61  |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999   | Excision, Trochanteric Pressure Ulcer, With Primary Suture;  Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure;  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;  Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  Unlisted Procedure, Excision Pressure Ulcer   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000  | Excision, Trochanteric Pressure Ulcer, With Primary Suture;  Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure;  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;  Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  Unlisted Procedure, Excision Pressure Ulcer  Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000  | Excision, Trochanteric Pressure Ulcer, With Primary Suture;  Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure;  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;  Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  Unlisted Procedure, Excision Pressure Ulcer  Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required  Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface)   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020   | Excision, Trochanteric Pressure Ulcer, With Primary Suture;  Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure;  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;  Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  Unlisted Procedure, Excision Pressure Ulcer  Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required  Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface)  Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020   | Excision, Trochanteric Pressure Ulcer, With Primary Suture;  Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure;  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;  Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  Unlisted Procedure, Excision Pressure Ulcer  Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required  Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface)   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020   | Excision, Trochanteric Pressure Ulcer, With Primary Suture;  Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure;  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure;  Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  Unlisted Procedure, Excision Pressure Ulcer  Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required  Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface)  Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area)   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020   | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10%  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020<br>16025<br>16030<br>16035  | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area)   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51<br>\$108.01<br>\$134.67   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020<br>16025<br>16035<br>16036  | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51<br>\$108.01<br>\$134.67<br>\$172.81   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020<br>16025<br>16030<br>16036<br>17000                                     | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction Of Skin Growth Destruction By Any Method, Including Laser, With Or Without Surgical Curettement, All Benign Or Premalignant Lesions (Eg, Actinic Keratoses)  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51<br>\$108.01<br>\$134.67<br>\$172.81   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020<br>16025<br>16030<br>16035<br>16036<br>17000                            | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction Of Skin Growth Destruction By Any Method, Including Laser, With Or Without Surgical Curettement, All Benign Or Premalignant Lesions (Eg, Actinic Keratoses) Other Than Skin Tags Or Cutaneous Vascular Proliferative Lesions, Including Local Anesthesia; 2 - 14 Each.  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51<br>\$108.01<br>\$134.67<br>\$172.81<br>\$70.20<br>\$73.46                                   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020<br>16025<br>16030<br>16035<br>17000                                     | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Ostectomy Unlisted Procedure, Excision Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Growth Oster Than One Extremity, Or Skin Growth  Excision, Trochanteric Pressure Ulcer, With Or Without Surgical Curettement, All Benign Or Premalignant Lesions (Eg, Actinic Keratoses) Other Than Skin Tags Or Cutaneous Vascular Proliferative Lesions, Including Local Anesthesia; 2 - 14 Each.  Destruction Of 15 Or More Premalignant Skin Growths   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51<br>\$108.01<br>\$134.67<br>\$172.81<br>\$70.20<br>\$73.46                                   |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15959<br>16000<br>16020<br>16025<br>16035<br>16036<br>17000<br>17003<br>17004<br>17106          | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction By Any Method, Including Laser, With Or Without Surgical Curettement, All Benign Or Premalignant Lesions (Eg, Actinic Keratoses) Other Than Skin Tags Or Cutaneous Vascular Proliferative Lesions, Including Local Anesthesia; 2 - 14 Each. Destruction Of 5 Or More Premalignant Skin Growths Destruction Of Cutaneous Vascular Proliferative Lesions (Eg, Laser Technique); Less Than 10 Sq Cm   | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51<br>\$108.01<br>\$134.67<br>\$172.81<br>\$70.20<br>\$73.46<br>\$7.27<br>\$178.84<br>\$357.15 |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15959<br>16000<br>16020<br>16025<br>16035<br>16036<br>17000<br>17003<br>17004<br>17106<br>17107 | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction Of Skin Growth Destruction By Any Method, Including Laser, With Or Without Surgical Curettement, All Benign Or Premalignant Lesions (Eg, Actinic Keratoses) Other Than Skin Tags Or Cutaneous Vascular Proliferative Lesions, Including Local Anesthesia; 2 - 14 Each. Destruction Of Cutaneous Vascular Proliferative Lesions (Eg, Laser Technique); Less Than 10 Sq Cm Destruction Of Cutaneous Vascular Proliferative Lesions (Eg, Laser Technique); Less Than 10 Sq Cm  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51<br>\$108.01<br>\$134.67<br>\$172.81<br>\$70.20<br>\$73.46<br>\$7.27<br>\$178.84<br>\$357.15 |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15959<br>16000<br>16020<br>16025<br>16035<br>16036<br>17000<br>17003<br>17004<br>17106<br>17107 | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy Excision, Trochanteric Pressure Ulcer, In Preparation For Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Destruction Of Burn Tissue Destruction Of Skin Growth Destruction By Any Method, Including Laser, With Or Without Surgical Curettement, All Benign Or Premalignant Lesions (Eg, Actinic Keratoses) Other Than Skin Tags Or Cutaneous Vascular Proliferative Lesions, Including Local Anesthesia; 2 - 14 Each. Destruction Of Cutaneous Vascular Proliferative Lesions (Eg, Laser Technique); Less Than 10 Sq Cm Destruction Of Cutaneous Vascular Proliferative Lesions (Eg, Laser Technique); 10.0 - 50.0 Sq Cm  | \$429.28<br>\$826.37<br>\$838.53<br>\$924.32<br>\$1,065.98<br>\$1,087.61<br>Price By Report<br>\$66.84<br>\$92.51<br>\$108.01<br>\$134.67<br>\$172.81<br>\$70.20<br>\$73.46<br>\$7.27<br>\$178.84<br>\$357.15 |
| 15951<br>15952<br>15953<br>15956<br>15958<br>15999<br>16000<br>16020<br>16025<br>16036<br>17000<br>17003<br>17004<br>17106<br>17107<br>17108 | Excision, Trochanteric Pressure Ulcer, With Primary Suture; Excision, Trochanteric Pressure Ulcer, With Primary Suture; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; Excision, Trochanteric Pressure Ulcer, With Skin Flap Closure; With Ostectomy  Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Or Skin Graft Closure; Excision, Trochanteric Pressure Ulcer, With Muscle Or Myocutaneous Flap Closure; With Ostectomy  Unlisted Procedure, Excision Pressure Ulcer Initial Treatment, First Degree Burn, When No More Than Local Treatment Is Required Dressing Change And/Or Removal Of Burn Tissue (Less Than 5% Total Body Surface) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Medium (Eg, Whole Face Or Whole Extremity, Or 5% To 10% Total Body Surface Area) Dressings And/Or Debridement Of Partial-Thickness Burns, Initial Or Subsequent; Large (Eg, More Than One Extremity, Or Greater Than 10% Total Body Surface Area) Initial Incision Of Burn Tissue Additional Incision Of Burn Tissue Destruction Of Skin Growth Destruction By Any Method, Including Laser, With Or Without Surgical Curettement, All Benign Or Premalignant Lesions (Eg, Actinic Keratoses) Other Than Skin Tags Or Cutaneous Vascular Proliferative Lesions, Including Local Anesthesia; 2 - 14 Each. Destruction Of Cutaneous Vascular Proliferative Lesions (Eg, Laser Technique); Less Than 10 Sq Cm Destruction Of Cutaneous Vascular Proliferative Lesions (Eg, Laser Technique); Less Than 10 Sq Cm  | \$429.2i \$826.3i \$838.5i \$924.3. \$1,065.9i \$1,087.6 Price By Repoi \$66.8i \$92.5i \$108.0i \$134.6i \$172.8i \$70.2i \$73.4i \$77.2i \$178.8i \$357.1i \$464.5i   |

| Code   | Description   | Fee                         |
|--------|---|-----------------------------|
|        | Destruction Of 15 Or More Non-Cancerous Skin Growths  | \$117.55                    |
| 17250  | Application Of Chemical Agent To Excessive Wound Tissue   | \$72.80                     |
| 17260  | Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 0.5 Cm Or Less   | \$92.86                     |
|        | Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 0.6-1.0 Cm   | \$133.08                    |
|        | Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 1.1-2.0 Cm   | \$167.45                    |
|        | Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 2.1-3.0 Cm   | \$152.44                    |
|        | Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, 3.1-4.0 Cm   | \$196.20                    |
|        | Destruction Of Cancer Skin Growth Of Trunk, Arms, Or Legs, More Than 4.0 Cm   | \$222.81                    |
|        | Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 0.5 Cm Or Less  | \$141.33                    |
|        | Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 0.6-1.0 Cm  | \$171.80                    |
|        | Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 1.1-2.0 Cm  Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 2.1-3.0 Cm                              | \$179.08<br>\$197.95        |
|        | Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, 3.1-4.0 Cm  | \$231.11                    |
|        | Destruction Of Cancer Skin Growth Of Scalp, Neck, Hands, Feet, Or Genitals, More Than 4.0 Cm  | \$267.98                    |
|        | Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, 0.5 Cm Or Less  | \$147.82                    |
|        | Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, 0.6-1.0 Cm  | \$189.40                    |
|        | Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, 1.1-2.0 Cm  | \$216.31                    |
|        | Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, 2.1-3.0 Cm  | \$229.14                    |
|        | Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, or Mouth, 3.1-4.0 Cm  | \$260.35                    |
|        | Destruction Of Cancer Skin Growth Of Face, Ears, Eyelids, Nose, Lips, Or Mouth, More Than 4.0 Cm  | \$332.57                    |
|        |   |                             |
|        | Removal And Microscopic Examination Of Growth Of The Head, Neck, Hands, Feet, Or Genitals (First Stage, Up To 5 Tissue Blocks)  | \$488.09                    |
|        | Removal And Microscopic Examination Of Growth Of The Head, Neck, Hands, Feet, Or Genitals   | \$285.41                    |
|        | Removal And Microscopic Examination Of Growth Of The Trunk, Arms, Or Legs (First Stage, Up To 5 Tissue Blocks)  | \$627.95                    |
|        | Removal And Microscopic Examination Of Growth Of The Trunk, Arms, Or Legs (Additional Stage, Up To 5 Tissue Blocks)   | \$372.83                    |
|        | Removal And Microscopic Examination Of Growth Of The Trunk, Arms, Or Legs (Additional Stage, After First 5 Tissue Blocks)   | \$72.31                     |
|        | Cold Treatment Of Acne Chemical Treatment Of Acne   | \$52.05<br>\$114.94         |
|        | Skin, Mucus Membrane And Beneath The Skin Procedure   | \$114.84                    |
|        | Aspiration Of Cyst Of Breast, First Cyst  | Price By Report<br>\$109.55 |
|        | Aspiration Of Cyst Of Breast, First Cyst Aspiration Of Cyst Of Breast, Each Additional Cyst   | \$24.77                     |
|        | Drainage Of Abscess Of Breast   | \$325.89                    |
|        | Injection For X-Ray Imaging Of Breast Duct  | \$116.59                    |
|        | Biopsy Of Breast Accessed Through The Skin With Stereotactic Guidance, First Lesion   | \$576.09                    |
|        | Biopsy Of Breast Accessed Through The Skin With Stereotactic Guidance, Additional Lesion  | \$432.73                    |
|        | Biopsy of Breast Accessed Through The Skin With Ultrasound Guidance, First Lesion   | \$573.62                    |
|        | Biopsy Of Breast Accessed Through The Skin With Ultrasound Guidance, Additional Lesion  | \$428.72                    |
|        | Biopsy Of Breast Accessed Through The Skin With Mri Guidance, First Lesion  | \$874.24                    |
|        | Biopsy Of Breast Accessed Through The Skin With Mri Guidance, Additional Lesion   | \$605.93                    |
| 19100  | Biopsy Of Breast; Percutaneous, Needle Core, Not Using Imaging Guidance (Separate Procedure)  | \$106.66                    |
| 19101  | Biopsy Of Breast, Open Procedure  | \$310.58                    |
| 19105  | Ablation, Cryosurgical, Of Fibroadenoma, Including Ultrasound Guidance, Each Fibroadenoma   | \$2,375.09                  |
| 19110  | Nipple Exploration, With Or Without Excision Of A Solitary Lactiferous Duct Or A Papilloma Lactiferous Duct   | \$335.79                    |
| 19112  | Excision Of Lactiferous Duct Fistula  | \$436.57                    |
| 19120  | Removal Of 1 Or More Breast Growth, Open Procedure  | \$468.95                    |
| 19125  | Removal Of Breast Growth, Open Procedure  | \$385.06                    |
|        | Removal Of Growth Of Chest Wall And Ribs, Open Procedure  | \$140.41                    |
|        | Placement Of Breast Localization Devices Accessed Through The Skin With Mammographic Guidance, First Lesion   | \$207.68                    |
|        | Placement Of Breast Localization Devices Accessed Through The Skin With Mammographic Guidance, Additional Lesion  | \$165.19                    |
|        | Placement Of Breast Localization Devices Accessed Through The Skin With Stereotactic Guidance, First Lesion   | \$251.46                    |
|        | Placement Of Breast Localization Devices Accessed Through The Skin With Stereotactic Guidance, Additional Lesion  | \$188.96                    |
|        | Placement Of Breast Localization Devices Accessed Through The Skin With Ultrasound Guidance, First Lesion   | \$405.94                    |
|        | Placement Of Breast Localization Devices Accessed Through The Skin With Ultrasound Guidance, Additional Lesion  | \$307.78                    |
|        | Placement Of Breast Localization Devices Accessed Through The Skin With Mri Guidance, First Lesion  Placement Of Breast Localization Devices Accessed Through The Skin With Mri Guidance, Additional Lesion | \$644.67<br>\$502.26        |
| 19288  | Preparation Of Tumor Cavity And Placement Of Radiation Therapy Applicator Into Breast For Radiation Therapy Concurrent With Partial Breast  | φ502.26                     |
| 10204  | Removal   | \$143.90                    |
| 10204  | Placement Of Radiotherapy Afterloading Expandable Catheter (Single Or Multichannel) Into The Breast For Interstitial Radioelement Application   | ψ143.30                     |
| 19296  | Following Partial Mastectomy, Includes Imaging Guidance; On Date Separate From Partial Mastectomy   | \$3,815.40                  |
| . 3200 | U   | \$5,5.5.10                  |
|        | Placement Of Radiotherapy Afterloading Expandable Catheter (Single Or Multichannel) Into The Breast For Interstitial Radioelement Application   |                             |
| 19297  | Following Partial Mastectomy, Includes Imaging Guidance; Concurrent With Partial Mastectomy (List Sep   | \$82.27                     |
|        | Insertion Of Catheters Into Breast For Radiation Therapy With Or After Breast Removal Using Imaging Guidance  | \$857.00                    |
| 19300  | Mastectomy For Gynecomastia   | \$511.50                    |
|        | Mastectomy, Partial (Eg, Lumpectomy, Tylectomy, Quadrantectomy, Segmentectomy);   | \$434.26                    |
| 19302  | Mastectomy, Partial (Eg, Lumpectomy, Tylectomy, Quadrantectomy, Segmentectomy); With Axillary Lymphadenectomy   | \$902.51                    |
|        | Mastectomy, Simple, Complete  | \$627.71                    |
|        | Removal Of Breast, Lymph Nodes, And Muscle  | \$1,029.24                  |
| 19306  | Removal Of Breast, Skin, Lymph Nodes, And Chest Muscles   | \$1,098.04                  |
|        | Mastectomy, Modified Radical, Including Axillary Lymph Nodes, With Or Without Pectoralis Minor Muscle, But Excluding Pectoralis Major   |                             |
|        | Muscle  | \$1,176.25                  |
|        | Repair For Sagging Of The Breast  | \$799.64                    |
|        | Breast Reduction  | \$1,150.58                  |
|        | Insertion Of Breast Implant   | \$562.72                    |
|        | Removal Of Intact Breast Implant  | \$480.11                    |
|        | Removal Of Ruptured Breast Implant And Implant Material   | \$589.73                    |
|        | Immediate Insertion Of Breast Implant On Same Day As Mastectomy   | \$699.32                    |

| Code   Description   | <del></del>                            |
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|  | Fee                                    |
| 19342 Delayed Insertion Of Breast Implant After Mastectomy 19350 Nipple/Areola Reconstruction  | \$772.26<br>\$770.25                   |
| 19355 Correction Of Inverted Nipples   | \$523.51                               |
| 19357 Reconstruction Of Breast Using Tissue Expander   | \$1,237.96                             |
| 19361 Reconstruction Of Breast With Back Muscle Flap   | \$1,632.50                             |
| 19364 Reconstruction Of Breast With Free Flap  | \$2,463.54                             |
| 19367 Reconstruction Of Breast With Abdominal Muscle Flap  | \$1,606.82                             |
| 19368 Reconstruction Of Breast With Single-Based Abdominal Muscle Flap   | \$1,967.24                             |
| 19369 Reconstruction Of Breast With Double-Based Abdominal Muscle Flap   | \$1,828.47                             |
| 19370 Surgical Change To Tissue Capsule Surrounding Breast Implant   | \$589.85                               |
| 19371 Removal Of Entire Tissue Capsule Surrounding Breast Implant  | \$719.62                               |
| 19380 Surgical Change To Reconstructed Breast  | \$719.31                               |
| 19396 Preparation Of Moulage For Custom Breast Implant   | \$262.57                               |
| 19499 Unlisted Procedure, Breast   | Price By Report                        |
| 20100 Exploration Of Penetrating Wound (Separate Procedure); Neck  | \$623.06                               |
| 20101 Exploration Of Penetrating Wound (Separate Procedure); Chest   | \$420.12                               |
| 20102 Exploration Of Penetrating Wound Of Abdomen, Flank, Or Back 20103 Exploration Of Penetrating Wound (Separate Procedure); Extremity   | \$465.52                               |
| 20103 Exploration of Penetrating Wound (Separate Procedure), Extremity  20150 Excision Of Epiphyseal Bar, With Or Without Autogenous Soft Tissue Graft Obtained Through Same Fascial Incision  | \$564.04<br>\$907.88                   |
| 20100 Excision of Epiphysear Bar, With Or Without Autogenous Soft Tissue Graft Obtained Through Same Pascial Incision  20200 Biopsy Of Muscle  |  |
| 20205 Biopsy, Muscle; Deep   | \$153.76<br>\$210.92                   |
| 20206 Needle Biopsy Of Muscle  | \$164.07                               |
| 20200 Biopsy Of Bone Using Needle Or Trocar  | \$170.00                               |
| 20225 Deep Biopsy Of Bone Using Needle Or Trocar   | \$280.59                               |
| 20240 Biopsy Of Bone, Open Procedure, Superficial  | \$143.44                               |
| 20245 Biopsy Of Bone, Open Procedure, Deep   | \$304.06                               |
| 20250 Biopsy Of Middle Spine Bone  | \$385.22                               |
| 20251 Biopsy Of Upper Or Lower Spine Bone  | \$377.42                               |
| 20500 Injection Of Sinus Tract; Therapeutic (Separate Procedure)   | \$114.84                               |
| 20501 Injection Of Sinus Tract; Diagnostic (Sinogram)  | \$104.75                               |
| 20520 Removal Of Foreign Body In Muscle; Simple  | \$151.65                               |
| 20525 Removal Of Foreign Body In Muscle; Deep Or Complicated   | \$325.96                               |
| 20526 Injection, Therapeutic (Eg, Local Anesthetic, Corticosteroid), Carpal Tunnel   | \$86.74                                |
| 20527 Injection Of Enzyme In Palm Tissue   | \$80.31                                |
| 20550 Injections Of Tendon Sheath, Ligament, Or Muscle Membrane  | \$59.40                                |
| 20551   Injection(S); Single Tendon Origin/Insertion   | \$60.36                                |
| 20552 Injection(S); Single Or Multiple Trigger Point(S), One Or Two Muscle(S)  | \$55.64                                |
| 20553 Injections Of Trigger Points In 3 Or More Muscles  | \$64.12                                |
| Placement Of Needles Or Catheters Into Muscle And/Or Soft Tissue For Subsequent Interstitial Radioelement Application (At The Time Of Or   |  |
| 20555 Subsequent To The Procedure)   | \$309.35                               |
| 20600 Aspiration And/Or Injection Of Small Joint Or Joint Capsule  | \$54.92                                |
| 20604 Aspiration And/Or Injection Of Small Joint Or Joint Capsule With Recording And Reporting Using Ultrasound Guidance   | \$78.89                                |
| 20605 Aspiration And/Or Injection Of Medium Joint Or Joint Capsule   | \$56.73                                |
| 20606 Aspiration And/Or Injection Of Intermediate Joint Or Joint Capsule With Recording And Reporting Using Ultrasound Guidance  | \$86.88                                |
| 20610 Aspiration And/Or Injection Of Large Joint Or Joint Capsule 20611 Aspiration And/Or Injection Of Major Joint Or Joint Capsule With Recording And Reporting Using Ultrasound Guidance   | \$66.92                                |
| 20612 Aspiration And/Or Injection Of Major Joint Of Soint Capsule With Recording And Reporting Osing Offiasound Guidance  20612 Aspiration And/Or Injection Of Ganglion Cyst(S) Any Location   | \$99.09<br>\$57.06                     |
| 20012 Aspiration And Injection for Ganglion Cyst 20015 Aspiration And Injection For Treatment Of Bone Cyst   | \$239.52                               |
| 20019 Aspiration And injection For Treatment of Bone Cyst  20650 Insertion Of Wire Or Pin For Skeletal Traction, Including Removal (Separate Procedure)  | \$153.68                               |
| 20660 Application Of Cranial Tongs, Caliper, Or Stereotactic Frame, Including Removal (Separate Procedure)   | \$206.80                               |
| 20661 Placement Of Stabilizing Device To Skull   | \$442.08                               |
| 20662 Application Of Pelvic Halo Device (Stabilization Device For Pelvis)  | \$477.73                               |
| 20663 Placement Of Stabilizing Device To Thigh   | \$440.81                               |
| 20664 Application Of Cranial Halo (Stabilization Device For Skull)   | \$777.87                               |
| 20665 Removal Of Stabilizing Device From Head Originally Applied By Other Provider   | \$109.70                               |
| 20670 Removal Of Surface Implant From Bone   | \$386.39                               |
| 20680 Removal Of Deep Implant From Bone  | \$617.47                               |
| 20690 Placement Of Single Direction External Bone Stabilizing Device To Arm Or Leg   | \$397.38                               |
| 20692 Placement Of Multiple Direction External Bone Stabilizing Device To Arm Or Leg   | \$1,099.75                             |
| 20693 Revision Of External Bone Stabilizing Device Under Anesthesia  | \$408.03                               |
| 20694 Removal Of External Bone Stabilizing Device Under Anesthesia   | \$294.67                               |
| 20696 Placement Of Multiple Direction External Bone Stabilizing Device To Arm Or Leg Using Imaging   | \$1,075.84                             |
| 20697 Placement Of Multiple Direction External Bone Stabilizing Device To Arm Or Leg Using Imaging Guidance  | \$1,846.87                             |
| 20700 Preparation And Insertion Of Drug-Delivery Devices Beneath Fibrous Covering Of Muscle  | \$84.26                                |
| 20701 Removal Of Drug-Delivery Devices From Beneath Fibrous Covering Of Muscle   | \$63.13                                |
| 20702 Preparation And Insertion Of Drug-Delivery Devices Into Marrow Cavity Of Bone  | \$127.66                               |
| 20703 Removal Of Drug-Delivery Devices From Marrow Cavity Of Bone  | \$92.83                                |
| 20704 Preparation And Insertion Of Drug-Delivery Devices Into Joint  | \$145.80                               |
| L 2070ETRamoval Of Drug Dalivary Davisas Into Taint  | \$110.72                               |
| 20705 Removal Of Drug-Delivery Devices Into Joint  | \$2,464.05                             |
| 20802 Replantation, Arm; Complete  | @O OO 4 O 4                            |
| 20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation   | \$2,924.34<br>\$3,525.00               |
| 20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation 20808 Replantation, Hand; Complete  | \$3,525.09                             |
| 20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation 20808 Replantation, Hand; Complete 20816 Replantation, Digit; Complete  | \$3,525.09<br>\$1,844.88               |
| 20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation 20808 Replantation, Hand; Complete 20816 Replantation, Digit; Complete 20822 Replantation, Digit, Excluding Thumb (Includes Distal Tip To Sublimis Tendon Insertion); Complete Amputation | \$3,525.09<br>\$1,844.88<br>\$1,597.16 |
| 20802 Replantation, Arm; Complete 20805 Replantation, Forearm (Includes Radius And Ulna To Radial Carpal Joint); Complete Amputation 20808 Replantation, Hand; Complete 20816 Replantation, Digit; Complete  | \$3,525.09<br>\$1,844.88               |

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|-------------------------|--|--------------------------|
|                         | Description  Page Creft Any Description  Page Creft Any Description  Page Creft Any Description  | Fee                      |
|                         | Bone Graft, Any Donor Area; Minor Or Small (Eg, Dowel Or Button)  Bone Graft, Any Donor Area; Major Or Large                                       | \$333.38<br>\$276.22     |
|                         | Cartilage Graft; Costochondral   | \$415.93                 |
|                         | Cartilage Graft; Nasal Septum  | \$445.20                 |
| 20920                   | Fascia Lata Graft; By Stripper   | \$368.79                 |
|                         | Fascia Lata Graft; By Incision And Area Exposure, Complex Or Sheet   | \$442.84                 |
|                         | Tendon Graft, From A Distance (Eg, Palmaris, Toe Extensor, Plantaris)  | \$463.52                 |
|                         | Fragmented Donor Bone Graft Or Placement Of Material To Promote Bone Growth For Spine Surgery  | \$202.89                 |
|                         | Structural Donor Bone Graft For Spine Surgery  | \$105.17                 |
|                         | Donor Bone And Joint Graft To Joint Surface And Neighboring Bone Half-Cylindrical Donor Bone Graft   | \$671.72                 |
|                         | Cylindrical Donor Bone Graft   | \$616.68<br>\$671.07     |
| 20334                   | Autograft For Spine Surgery Only (Includes Harvesting The Graft); Local (Eg, Ribs, Spinous Process, Or Laminar Fragments) Obtained From            | ψ0/1.0/                  |
| 20936                   | Same Incision (List Separately In Addition To Code For Primary Procedure)  | \$250.62                 |
|                         | Autograft For Spine Surgery Only (Includes Harvesting The Graft); Morselized (Through Separate Skin Or Fascial Incision) (List Separately In       |                          |
| 20937                   | Addition To Code For Primary Procedure)  | \$160.98                 |
| 20020                   | Autograft For Spine Surgery Only (Includes Harvesting The Graft); Structural, Bicortical Or Tricortical (Through Separate Skin Or Fascial          | ¢157.70                  |
|                         | Incision) (List Separately In Addition To Code For Primary Procedure)  Harvest Of Bone Marrow For Spine Surgery Graft                              | \$157.72<br>\$68.34      |
| 20939                   | Monitoring Of Interstitial Fluid Pressure (Includes Insertion Of Device Eg, Wick Catheter Technique, Needle Manometer Technique) In Detection      | φ00.34                   |
| 20950                   | Of Muscle Compartment Syndrome   | \$188.81                 |
|                         | Bone Graft With Microvascular Anastomosis; Fibula  | \$2,495.43               |
| 20956                   | Bone Graft With Microvascular Anastomosis; Iliac Crest   | \$2,370.29               |
| 20957                   | Bone Graft With Microvascular Anastomosis; Metatarsal  | \$2,469.50               |
|                         | Bone Graft With Microvascular Anastomosis; Other Than Fibula, Iliac Crest, Or Metatarsal   | \$2,400.64               |
|                         | Free Osteocutaneous Flap With Microvascular Anastomosis; Other Than Iliac Crest, Metatarsal, Or Great Toe  | \$2,750.94               |
|                         | Free Osteocutaneous Flap With Microvascular Anastomosis; Iliac Crest   | \$2,554.93               |
|                         | Free Osteocutaneous Flap With Microvascular Anastomosis; Metatarsal  | \$2,546.96               |
|                         | Free Osteocutaneous Flap With Microvascular Anastomosis; Great Toe With Web Space  Destruction Of 1 Or More Bone Growths Accessed Through The Skin | \$2,689.82               |
|                         | Destruction Of 1 Or More Bone Growths, Accessed Through The Skin   | \$3,524.05<br>\$5,747.67 |
| 20963                   | Computer-Assisted Surgical Navigational Procedure For Musculoskeletal Procedures, Image-Less (List Separately In Addition To Code For              | \$5,747.67               |
| 20985                   | Primary Procedure)   | \$143.42                 |
|                         | Unlisted Procedure, Musculoskeletal System, General  | Price By Report          |
| 21010                   | Arthrotomy, Temporomandibular Joint  | \$692.79                 |
| 21011                   | Excision, Tumor, Soft Tissue Of Face Or Scalp, Subcutaneous; Less Than 2 Cm  | \$333.83                 |
|                         | Removal Of (2 Centimeters Or Greater) Tissue Growth Beneath The Skin Of Face And Scalp   | \$358.25                 |
|                         | Excision, Tumor, Soft Tissue Of Face And Scalp, Subfascial (Eg, Subgaleal, Intramuscular); Less Than 2 Cm  | \$519.32                 |
|                         | Excision, Tumor, Soft Tissue Of Face And Scalp, Subfascial (Eg, Subgaleal, Intramuscular); 2 Cm Or Greater   | \$553.74                 |
|                         | Removal Of (Less Than 2 Centimeters) Soft Tissue Growth Of Face Or Scalp   | \$640.65                 |
|                         | Removal Of (2 Centimeters Or Greater) Soft Tissue Growth Of Face Or Scalp  Excision Of Bone (Eg, For Osteomyelitis Or Bone Abscess) Mandible       | \$913.82<br>\$742.15     |
|                         | Excision of Bone (Eg, For Osteomyelitis Or Bone Abscess) Facial Bone(S)  | \$506.06                 |
|                         | Removal By Contouring Of Benign Tumor Of Facial Bone (Eg, Fibrous Dysplasia)   | \$718.12                 |
|                         | Excision Of Benign Tumor Or Cyst Of Maxilla Or Zygoma By Enucleation And Curettage   | \$432.96                 |
|                         | Excision Of Torus Mandibularis   | \$367.84                 |
| 21032                   | Excision Of Maxillary Torus Palatinus  | \$354.86                 |
|                         | Excision Of Malignant Tumor Of Maxilla Or Zygoma   | \$1,209.87               |
|                         | Excision Of Benign Tumor Or Cyst Of Mandible, By Enucleation And/Or Curettage  | \$326.94                 |
|                         | Excision Of Malignant Tumor Of Mandible;   | \$799.70                 |
| 21045                   | Excision Of Malignant Tumor Of Mandible; Radical Resection   | \$1,105.70               |
| 21046                   | Excision Of Benign Tumor Or Cyst Of Mandible; Requiring Intra-Oral Osteotomy (Eg, Locally Aggressive Or Destructive Lesion(S))                     | \$939.08                 |
| 21010                   | Excision Of Benign Tumor Or Cyst Of Mandible; Requiring Extra-Oral Osteotomy And Partial Mandibulectomy (Eg. Locally Aggressive Or                 | Ψ000.00                  |
| 21047                   | Destructive Lesion(S))   | \$1,157.96               |
|                         | Excision Of Benign Tumor Or Cyst Of Maxilla; Requiring Intra-Oral Osteotomy (Eg, Locally Aggressive Or Destructive Lesion(S))                      | \$946.07                 |
|                         | Excision Of Benign Tumor Or Cyst Of Maxilla; Requiring Extra-Oral Osteotomy And Partial Maxillectomy (Eg, Locally Aggressive Or Destructive        |                          |
|                         | Lesion(S))   | \$1,121.30               |
|                         | Arthrectomy, Temporomandibular Joint; Unilateral   | \$811.85                 |
|                         | Meniscectomy, Temporomandibular Joint; Unilateral  | \$735.74                 |
| ∠10/0                   | Coronoidectomy (Separate Procedure)  | \$566.86                 |
| 21073                   | Manipulation Of Temporomandibular Joint(S) (Tmj), Therapeutic, Requiring An Anesthesia Service (Ie, General Or Monitored Anesthesia Care)          | \$357.82                 |
|                         | Impression And Custom Preparation; Surgical Obturator Prosthesis   | \$888.55                 |
|                         | Impression And Custom Preparation; Orbital Prosthesis  | \$1,965.03               |
|                         | Impression And Custom Preparation; Interim Obturator Prosthesis  | \$1,348.68               |
|                         | Impression And Custom Preparation; Definitive Obturator Prosthesis   | \$1,561.58               |
|                         | Impression And Custom Preparation; Mandibular Resection Prosthesis   | \$1,433.31               |
|                         | Impression And Custom Preparation; Palatal Augmentation Prosthesis   | \$1,316.56               |
|                         | Impression And Custom Preparation; Palatal Lift Prosthesis   | \$1,258.08               |
|                         | Impression And Custom Preparation; Speech Aid Prosthesis   | \$1,435.34               |
|                         | Impression And Custom Preparation Of Oral Surgical Splint  | \$733.40                 |
| 24000                   | Impression And Custom Preparation: Auricular Prosthesis  |                          |
|                         | Impression And Custom Preparation; Auricular Prosthesis  | \$1,463.89<br>\$1,463.89 |
| 21087                   | Impression And Custom Preparation; Nasal Prosthesis  | \$1,463.89               |
| 21087<br>21088          |  | \$1,463.89<br>\$1,373.33 |
| 21087<br>21088<br>21089 | Impression And Custom Preparation; Nasal Prosthesis Impression And Custom Preparation; Facial Prosthesis   | \$1,463.89               |

| 21101 Appropriation of Interservatin Faquition Device Part Conditions Other Than Fracture Of Discossion   3842.5   | Code Description   | Fee                                   |
|--|--|---------------------------------------|
| 2011 Seminglaws, Unitered Temporarealization Antonion Segrept Vision (Section Procedure For Employance Management Managem   |  | \$842.24                              |
| 2012 Gemisphairy, Studing Obstoorburn, Study Prices 2012 Gemisphairy, Studing Obstoorburn, Tool O Mare Obstoorburnis (Eg., Wedger Excision O' Bone Wedge Reversal For Asymmetrical Chin) 2012 Internation of Studing Stone Centre of Study Or International China (1997) 2013 Applications of Studing Studies Centre of Study Provided Management (1997) 2013 Applications of Studies (1997) 2014 Applications of Studies (1997) 2014 Applications of Studies (1997) 2014 Applications of Studies (1997) 2015 Applications of Studies (1997) 2015 Applications of Studies (1997) 2015 Applications (1997) 2015 Applications (1997) 2015 Applications (1997) 2016 Applications (1997) 2016 Applications (1997) 2016 Applications (1997) 2017 Applications (1997) 2017 Applications (1997) 2017 Applications (1997) 2017 Applications (1997) 2018 Applications (1997) 2018 Applications (1997) 2018 Applications (1997) 2018 Applications (1997) 2019 Appli   |  | \$215.55                              |
| 21122 [Semipatery, Silleng Osteochouse, Two O'Riforce Osteochomes (Eg. Wedge Excision O'R Bone Wedge Reversal For Apymmetrial Chin)  | 21120 Genioplasty; Augmentation (Autograft, Allograft, Prosthetic Material)                          | \$629.52                              |
| 21122   Augmentation Manshallar Roy On Angle, Prostetted Meternal 22122   Augmentation, Manshallar Roy On Angle, Prostetted Meternal 322172   Augmentation, Manshallar Roy On Angle, Prostetted Meternal 322172   Augmentation, Manshallar Roy On Angle, Will Born Graft, Onlay O' Interpositional (Includes Obtaining Autogrant) 322173   Reduction Forenact, Community On Angle, Prostetted (1994) 322173   Reduction Forenact, Community Onlay Onlay (1994) 322173   Reduction Forenact, Community Onlay (1994) 322173   Reduction Forenact, Community Onlay (1994) 322174   Reconstruction Of Metitice Boses, Single Prece (Labort) 322174   Reconstruction Of Metitice Boses, Will Born Graft, 2 Precess in Edon't) 322174   Reconstruction Of Metitice Boses, Will Born Graft, 2 Precess in Edon't) 322174   Reconstruction Of Metitice Boses, Will Born Graft, 2 Precess in Edon't) 322174   Reconstruction Of Metitice Boses, Will Born Graft, 2 Precess in Edon't) 322174   Reconstruction Of Metitice Boses, Will Born Graft, 2 Precess in Edon't) 322174   Reconstruction Of Metitice Boses, Will Born Graft, 2 Precess in Edon't) 322174   Reconstruction Of Metitice Boses, Will Born Graft, 2 Precess in Edon't) 322175   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322176   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322176   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322177   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322177   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322178   Reconstruction Of Metitice Boses will Born Graft (1994) 322179   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322179   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322179   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322179   Reconstruction Of Metitice Boses, Will Born Graft (1994) 322179  |  | \$599.64                              |
| 21212   Augmentation, Marchalder Body, Or Angie, Will benot Carth, Chiay Or Interposebonal (Includes Obtaning Autograft   36,020.11 21127   Reduction Frontened, Connounty Orage, Will benot Carth, Chiay Or Interposebonal (Includes Obtaning Autograft   38,020.11 21128   Reduction Frontened, Connounty Orage, Will benot Carth Chiay Orage   38,020.11 21129   Reduction Frontened, Connounty Orage   School Carthy Autograft   38,020.11 21129   Reconstruction Of Michiae Boxes, Single Prote (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes, Single Prote (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes, Single Prote (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes, Single Prote (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes, Single Prote (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes, Single Prote (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes will be one Grain Protein (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes will be one Grain Protein (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,121.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,122.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,122.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,122.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,122.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,122.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,122.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Lefter II)   31,122.11 21129   Reconstruction Of Michiae Boxes will be one Grain (Left   | 1 77 0 7   | \$695.10                              |
| 21127   Augmentation, Handballania Body Of Angies Will Bore Graft, Chally Or Interpositional (Includes Obtaining Autograft)  |  |                                       |
| 21133 Reduction Formelace Connoting Only 21133 Reduction Formelace Connoting And Application Of Prosthetic Material Or Bore Graft (trichules Chianning Autograft) 21133 Reduction Formelace Connoting And Sethato Of Anterior Format Sinus Wall 21133 Reduction Formelace Connoting And Application Of Prosthetic Material 21143 Reconstruction of Medicine Bores, 5 Style Price (Labert) 21141 Reconstruction of Medicine Bores, 5 Style Price (Labert) 21141 Reconstruction Of Medicine Bores, 5 Style Price (Labert) 21142 Reconstruction Of Medicine Bores, 5 Style Price (Labert) 21143 Reconstruction Of Medicine Bores, 5 Style Price (Labert) 21144 Reconstruction Of Medicine Bores, 7 Style Bores (Labert) 21145 Reconstruction Of Medicine Bores with Born Graft, 2 Prices (Labert) 21146 Reconstruction Of Medicine Bores with Born Graft, 2 Prices (Labert) 21150 Reconstruction Of Medicine Bores with Born Graft, 2 Prices (Labert) 21150 Reconstruction Of Medicine Bores with Born Graft (Labert) 21151 Reconstruction Of Medicine Bores with Born Graft (Labert) 21151 Reconstruction Of Medicine Bores with Born Graft (Labert) 21152 Reconstruction Of Medicine Bores with Born Graft (Labert) 21153 Reconstruction Of Medicine Bores with Born Graft (Labert) 21154 Reconstruction Of Medicine Bores with Born Graft (Labert) 21155 Reconstruction Of Medicine Bores with Born Graft (Labert) 21156 Reconstruction Of Medicine Bores with Born Graft (Labert) 21156 Reconstruction Of Medicine Bores with Born Graft (Labert) 21156 Reconstruction Of Medicine Bores with Born Graft (Labert) 21157 Reconstruction Of Medicine Bores with Born Graft (Labert) 21158 Reconstruction Of Medicine Bores with Born Graft (Labert) 21158 Reconstruction Of Medicine Bores with Born Graft (Labert) 21158 Reconstruction Of Medicine Bores with Born Graft (Labert) 21159 Reconstruction Of Medicine Bores with Born Graft (Labert) 21150 Reconstruction Of Medicine Bores with Born Graft (Labert) 21150 Reconstruction Of Medicine Bores with Born Graft (Labert) 21151 Reconstruction Of Medicine Bores with   |  | . ,                                   |
| 2133 Raduction Forehead Computing And Application Of Prosthetic Mapped OF Born Griff (Includes Obsaning Autograft) 2398 Raduction Forehead Computing And Spatial Conference Formal Sinus Wal 2398 Raduction Forehead Computing And States Of Anterior Formal Sinus Wal 2314 Reconstruction Of Midnice Bornes. Single Prese (Lefort I) 231427 Reconstruction Of Midnice Bornes. 27 Horos, (Lefort I) 231427 Reconstruction Of Midnice Bornes. Will Born Graft, Single Prese (Lefort I) 231427 Reconstruction Of Midnice Bornes Will Born Graft, Single Prese (Lefort I) 231427 Reconstruction Of Midnice Bornes Will Born Graft, Single Prese (Lefort I) 231427 Reconstruction Of Midnice Bornes Will Born Graft, 3 Orl Mure Preses (Lefort I) 231428 Reconstruction Of Midnice Bornes Will Born Graft, 3 Orl Mure Preses (Lefort I) 23159 Reconstruction Of Midnice Bornes Will Born Graft, 3 Orl Mure Preses (Lefort I) 23161 Reconstruction Of Midnice Bornes Will Born Graft, 3 Orl Mure Preses (Lefort I) 23161 Reconstruction Of Midnice Bornes Will Born Graft (Lefort II) 23162 Reconstruction Of Midnice Bornes Will Born Graft Will Lefort II (Lefort II) 23162 Reconstruction Of Midnice Bornes Will Born Graft Will Lefort II (Lefort II) 23163 Reconstruction Of Midnice Bornes Will Born Graft Will Lefort II (Lefort II) 23163 Reconstruction Of Midnice Bornes Will Born Graft Will Lefort II (Lefort III) 23164 Reconstruction Of Midnice Bornes Will Born Graft Will Lefort II (Lefort III) 23176 Reconstruction Of Midnice Bornes Will Born Graft Will Lefort II (Lefort III) 23176 Reconstruction Of Midnice Bornes Will Born Graft Will Lefort II (Lefort III) 23176 Reconstruction Of Midnice Bornes Will Born Graft Villa Forehead Antonocrement, Will Lefort II (Lefort III) 231776 Reconstruction Of Midnice Bornes Will Born Graft Villa Forehead Antonocrement, Will Lefort II (Lefort III) 231777 Reconstruction Of Midnice Bornes Will Born Graft Villa Forehead Antonocrement, Will Lefort II (Lefort III) 231778 Reconstruction Of Midnice Bornes Will Born Graft Villa Forehead Antonocrement,  |  |                                       |
| 21939 Balautosin Frowheadt. Consturing And Setback Of Annetro Frontal Shrae Wall 12 Hill Reconstruction Of Middless Bornes, Spiegh Pene Left Get 1) 131417. 1714 Reconstruction Of Middless Bornes, 2 Prices (Left 1) 131417. 1714 Reconstruction Of Middless Bornes, 2 Prices (Left 1) 131417. 1714 Reconstruction Of Middless Bornes, 2 Prices (Left 1) 131417. 1714 Reconstruction Of Middless Bornes With Borne Graft (Left 1) 1714 Reconstruction Of Middless Bornes With Borne Graft, 2 Preces (Left 1) 1715 Reconstruction Of Middless Bornes With Borne Graft, 2 Preces (Left 1) 1716 Reconstruction Of Middless Bornes With Borne Graft, 2 Preces (Left 1) 1716 Reconstruction Of Middless Bornes With Borne Graft, 2 Preces (Left 1) 1716 Reconstruction Of Middless Bornes With Borne Graft, 2 Preces (Left 1) 1716 Reconstruction Of Middless Bornes With Borne Graft, 2 Preces (Left 1) 1716 Reconstruction Of Middless Bornes With Borne Graft Without Left 1 (Left 18) 1716 Reconstruction Of Middless Bornes With Borne Graft With Forthess Advancement, Without Left 1 (Left 18) 1716 Reconstruction Of Middless Bornes With Borne Graft With Forthess Advancement, Without Left 1 (Left 18) 1717 Reconstruction Of Middless Bornes With Borne Graft With Forthess Advancement, Without Left 1 (Left 18) 1718 Reconstruction Superior-Latered Orbital Rivar As Lower Forthess, Advancement, Without Left 1 (Left 18) 1719 Reconstruction Superior-Latered Orbital Rivar As Lower Forthess, Advancement Or Alteration (Egg. Psyglosophyl), Tigonocophylo, Middless Bornes With Borne Graft With Forthess Advancement With Left 1 (Left 18) 1717 Reconstruction Superior-Latered Orbital Rivar As Lower Forthess, Advancement Or Alteration (Egg. Psyglosophyl), Tigonocophylo, Without Orbital Rivar As Lower Forthess, Advancement Or Alteration (Egg. Psyglosophyl), Tigonocophylo, Without Orbital Rivar As Lower Forthess, Advancement With Left 1 (Left 18) 1717 Reconstruction Of Borny Defect Of Stuff, Forthess, And Communication, Without Defect Orbital Rivar As Lower Forthess, Advancement With E   |  | \$834.65                              |
| \$1,420.6  |  | \$999.98                              |
| 21143 (Reconstruction Of Middeas Denses, 3 of More Pieces (Lefort))   21,4147 (Reconstruction Of Middeas Dense Wiff Born Graft, 2 Pieces (Lefort))   21,4147 (Reconstruction Of Middeas Dense Wiff Born Graft, 2 Pieces (Lefort))   21,515 (Reconstruction Of Middeas Dense Wiff Born Graft, 2 Pieces (Lefort))   21,516 (Reconstruction Of Middeas Dense Wiff Born Graft, 2 Of More Pieces (Lefort))   21,516 (Reconstruction Of Middeas Dense (Lefort))   21,516 (Reconstruction Of Middeas Dense (Lefort))   21,517 (Reconstruction Of Middeas Dense (Lefort))   21,517 (Reconstruction Of Middeas Dense (Lefort))   21,517 (Reconstruction Of Middeas Dense (Lefort))   21,518 (Reconstruction Of Middeas Dense Wiff Dense Graft Wiff, Lefort (Lefort II))   21,518 (Reconstruction Of Middeas Dense Wiff Dense Graft Wiff, Lefort (Lefort II))   21,519 (Reconstruction Of Middeas Dense Wiff Dense Graft Wiff, Lefort (Lefort II))   22,577 (Reconstruction Of Middeas Dense Wiff Dense Graft Wiff Foreight Advancement, Wifford United Wiff (Lefort II)   22,577 (Reconstruction Of Middeas Dense Wiff Borne Graft Wiff Foreight Advancement, Wifford United Wiff (Lefort II)   22,577 (Reconstruction Of Middeas Dense Wiff Borne Graft Wiff Foreight Advancement, Wifford United Wiff (Lefort II)   22,577 (Reconstruction Of Middeas Dense Wiff Borne Graft Wiff Foreight Advancement Of Alterator, Wiff Orling Wiff (Lefort II)   22,570 (Reconstruction Of Midrae Borne Wiff Borne Graft Wiff Foreight Advancement Of Alterator, Wiff Orling Wiff (Lefort II)   22,570 (Reconstruction Of Refort II)   22,570 (Reconstruction  |  | \$1,411.71                            |
| 21149 Reconstruction Of Middaes Bones With Bone Clark Sprige Priese (Lefort I) 21147 Reconstruction Of Middaes Bones With Bone Clark Spreas (Lefort I) 21147 Reconstruction Of Middaes Bones With Bone Clark Spreas (Lefort I) 21149 Reconstruction Of Middaes Bones With Bone Clark J. Of More Phenes (Lefort I) 21151 Reconstruction Of Middaes Bones With Bone Clark Lefort I) 21151 Reconstruction Of Middaes Bones With Bone Clark Lefort II 21151 Reconstruction Of Middaes Bones With Bone Clark Lefort II 21152 Reconstruction Of Middaes Bones With Bone Clark With Lefort II (Lefort II) 21153 Reconstruction Of Middaes Bones With Bone Clark With Lefort II (Lefort II) 21156 Reconstruction Of Middaes Bones With Bone Clark With Lefort II (Lefort II) 21156 Reconstruction Of Middaes Bones With Bone Clark With Lefort II (Lefort II) 21157 Reconstruction Of Middaes Bones With Bone Clark With Lefort II (Lefort II) 21157 Reconstruction Of Middaes Bones With Bone Clark With Forehead Advancement, With Lefort II (Lefort II) 21157 Reconstruction Of Middaes Bones With Bone Clark With Forehead Advancement Without Lefort II (Lefort II) 21157 Reconstruction Superior-Lateral Oft-bial Res And Lower Forehead, Advancement Or Alteration, With Or Without Seals (Includes Obtaining 2117) 21157 Reconstruction, Stepfort-Lateral Oft-bial Res And Lower Forehead, Advancement Or Alteration, With Or Without Seals (Includes Obtaining 2117) 21158 Reconstruction, Stepfort-Lateral Oft-bial Res And Lower Forehead, Advancement Or Alteration (Eg., Riagocophaly, Tippocophaly, Tippocopha   |  | \$1,420.94                            |
| 11414  Reconstruction Of Midace Bones With Bone Graft, 2 Pieces (Lefort)   \$1,585.00  |  | \$1,317.19                            |
| 211415 Reconstruction Of Midace Bones (With Bones Graft, 3 Of More Places (Lefort I) 211515 Reconstruction Of Midace Bones (Lefort I) 211515 Reconstruction Of Midace Bones (Lefort II) 211515 Reconstruction Of Midace Bones With Bones Graft (Lefort II) 211515 Reconstruction Of Midace Bones With Bones Graft With Lefort I (Lefort II) 211515 Reconstruction Of Midace Bones With Bones Graft With Lefort I (Lefort II) 211519 Reconstruction Of Midace Bones With Bones Graft With Lefort I (Lefort II) 211519 Reconstruction Of Midace Bones With Bones Graft With Lefort I (Lefort II) 211519 Reconstruction Of Midace Bones With Bone Graft With Lefort I (Lefort II) 211510 Reconstruction Of Midace Bones With Bone Graft With Lefort I (Lefort II) 211510 Reconstruction Of Midace Bones With Bone Graft With Lefort I (Lefort II) 211510 Reconstruction Of Midace Bones With Bone Graft With Lefort I (Lefort II) 211510 Reconstruction Effort Of Midace Bones With Bone Graft With Lefort I (Lefort II) 21151 Reconstruction Effort Of Midace Bones With Bone Read With Forehead Advancement (Virtual Lefort I (Lefort III) 21151 Reconstruction Effort Of Reconstruction Carlos III (Lefort III) 21151 Reconstruction Effort Of Reconstruction Carlos III (Lefort III) 21151 Reconstruction Effort Of Reconstruction Carlos III (Lefort III) 21151 Reconstruction Effort Of Reconstruction Carlos III (Lefort III) 21151 Reconstruction Carlos Of Sevential Reconstruction Carlos Of Sevential Reconstruction Of Midae Administration Of Reconstruction Of Reconstruction Of Midae Administration Of Reconstruction Of Midae Administration Of Reconstruction Of Midae Administration Of Reconstruction Of Midae Admi   |  |                                       |
| 21150 B         Reconstruction Of Midrace Bones With Bone Gerial (Lefort II)         \$1,562.20           21154 B         Reconstruction Of Midrace Bones With Bone Gerial (Lefort III)         \$1,662.20           21155 B         Reconstruction Of Midrace Bones With Bone Gerial Without Lefort (Lefort III)         \$1,788.3           21158 B         Reconstruction Of Midrace Bones With Bone Gerial With Forehead Advancement, With Lefort II (Lefort III)         \$1,384.5           21159 B         Reconstruction Of Midrace Bones With Bone Gerial With Forehead Advancement (With Lefort III)         \$2,271.5           21175 B         Reconstruction Of Midrace Bones With Bone Gerial With Forehead Advancement (With Lefort III)         \$2,271.5           21175 B         Reconstruction Superior-Lateral Orbital Rims And Lower Forehead, Advancement Or Alteration, With Or Without Grafts (includes Obtaining Autorgants)         \$2,271.5           21175 B         Standywephaly, With Or Without Crafts (includes Obtaining Autorgants)         \$1,384.1           21176 B         Reconstruction, Entire Of Majority Of Forehead And/OS Supmontalial Rims, With Carths Allogrant (Or Proceime Marienia)         \$1,384.1           21180 B         Reconstruction, Entire Of Wallogrity Of Forehead And/OS Supmontalial Rims, With Autorgant (Includes Obtaining Carths)         \$1,345.2           21181 B         Reconstruction, Entire Of Wallogrity Of Forehead And/OS Supmontalial Rims, With Autorgant (Includes Obtaining Carths)         \$1,345.2           211   |  |                                       |
| 21151 Reconstruction Of Midrace Bones With Brown Graft (Lefort II) 151686. 21158 Reconstruction Of Midrace Bones With Brown Graft With Lefort I (Lefort III) 151886. 21158 Reconstruction Of Midrace Bones With Brown Graft With Lefort I (Lefort III) 151886. 21159 Reconstruction Of Midrace Bones With Brown Graft With Lefort I (Lefort III) 152371. 21160 Reconstruction Of Midrace Bones With Brown Graft With Forehead Advancement. With Lefort I (Lefort III) 152371. 21160 Reconstruction Support-Lateral Orbital R man Leven Forehead Advancement Or Alteration, With Of Without Grafts (Includes Obtaining Reconstruction. Support-Lateral Orbital R man Leven Forehead Advancement Or Alteration, With Orbital (Includes Obtaining Alteration). 21178 Reconstruction. Berind Support-Lateral Orbital R man And Lower Forehead. Advancement Or Alteration (Eg., Plagiocephaly, Trigonocephaly, 151841. 21179 Reconstruction. Entire Of Walgority Of Forehead And/O'S Supportable IRms, With Autograft (Includes Obtaining Grafts) 151,344. 21181 Reconstruction. Entire Of Walgority Of Forehead And/O'S Supportable IRms, With Autograft (Includes Obtaining Grafts) 151,344. 21181 Removal By Contouring Of Benigh Tumor Of Cramal Bones (Eg., Forotta Dyspisable, Extracranial Reconstruction Of Bony Defect Of Swall, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Less Reconstruction Of Bony Defect Of Swall, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Less Planta (Includes Obtaining Call Call Call Call Call Call Call Cal   |  |                                       |
| 21156 Reconstruction Of Midrace Bones With Brown Graft Without Lefort (Lefort ii) 51,981.6 21159 Reconstruction Of Midrace Bones With Brown Graft With Forthead Advancement, Without Lefort (Lefort ii) 52,271.6 21159 Reconstruction Of Midrace Bones With Brown Graft With Forthead Advancement, Without Lefort (Lefort ii) 52,271.6 21159 Reconstruction Of Midrace Bones With Brown Graft With Forthead Advancement, With Lefort I (Lefort ii) 52,271.6 21172 Autograft Advancement of Midrace Bones With Brown Graft With Forthead Advancement of Albertation, With Of Without Grafts (Includes Obtaining Advancement of Albertation, With Of Without Grafts (Includes Obtaining Advancement of Albertation, With Of Without Grafts Includes College Advancement of Albertation, With Of Without Grafts Includes College Advancement of Albertation, With Off Without Grafts Includes College Advancement of Albertation, With Off Without Grafts Includes College Advancement of Albertation (E.g., Plagiocephaly, Tigonocephaly, 17, 17, 17, 17, 17, 17, 17, 17, 17, 17   | , ,  | \$1,662.28                            |
| 21159 (Reconstruction Of Midnes Bones With Bone Graft With Forehead Advancement, Without Lefort (Lefort III) 25,2710. 27172 (Autograft) 27172 (Autograft) 27172 (Autograft) 27172 (Autograft) 27173 (Reconstruction Superior-Lateral Orbital Rm And Lower Forehead, Advancement Or Alteration, With Or Without Grafts (Includes Obtaining 1717) 27175 (Brachycepshap), With Or Without Grafts (Includes Obtaining Advancement Or Alteration, With Or Without Grafts (Includes Obtaining Attografts) 27179 (Reconstruction, Eirstein Of Majority Of Forehead And/Or Suparochala Rms, With Autograft (Includes Obtaining Grafts) 27179 (Reconstruction, Eirstein Of Majority Of Forehead And/Or Suparochala Rms, With Autograft (Includes Obtaining Grafts) 27181 (Reconstruction, Eirstein Of Majority Of Forehead And/Or Suparochala Rms, With Autograft (Includes Obtaining Grafts) 27181 (Removal by Contourn) Of Berny Defect Of Skull, Forehead, And Suparochala Rms, With Autograft (Includes Obtaining Grafts) 27182 (Reconstruction Of Borny Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting 27183 (Greater Than 40 Sp. Cm But Less Than 80 Sp. Cm 27183 (Greater Than 40 Sp. Cm But Less Than 80 Sp. Cm 27184 (Greater Than 80 Sp. Cm 27184 (Greater Than 80 Sp. Cm 27184 (Greater Than 80 Sp. Cm 27185 (Greater Than 80 Sp. Cm 27186 (Reconstruction Of Borny Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting 27184 (Greater Than 80 Sp. Cm 27185 (Greater Than 80 Sp. Cm 27186 (Greater Than 80 Sp. Cm 27187 (Greater Than 80 Sp. Cm 27188 (Greater Than 80 Sp. Cm 27188 (Greater Than 80 Sp. Cm 27188 (Greater Than 80 Sp. Cm 27189 (Greater Th   |  | \$1,788.33                            |
| 21102 Reconstruction Of Midiace Bones With Bone Graft With Forthead Advancement Of Alteration. With Or Without Grafts (Includes Obtaining) 21172 Autografts) 21172 Autografts) 21173 Reconstruction, Biffontal, Superior-Lateral Orbal Rims And Lower Forehead, Advancement Of Alteration (Eg., Plagiocephaly, Trigonocephaly, 2011) 21175 Reconstruction, Biffontal, Superior-Lateral Orbal Rims And Lower Forehead, Advancement Of Alteration (Eg., Plagiocephaly, Trigonocephaly), 21175 (Inchorphyshal), With Or Without Grafts (Includes Obtaining) Autografts) 21176 Reconstruction, Entire Of Magniny Of Forehead And Or Supportable Rims, With Grafts (Allograft Or Presthetic Material) 21180 Reconstruction, Entire Of Magniny Of Forehead And Or Supportable Rims, With Grafts (Allograft Or Presthetic Material) 21181 Removed Dy Continuing Of Bengin Tumor Of Condinal Brans, 2 With Autograft (Includes Obtaining Grafts) 21182 Removed Or Continuing Of Bengin Tumor Of Condinal Brans, 2 With Autograft (Includes Obtaining Grafts) 21183 Regard Or Of Stull, Forehead, And Both Upper Protries Of Eye Bones With Bone Graft, Total Area Of Bone Grafting 21184 Greater Than 40 Sq. Cm 21185 Regard Of Bony Obetec Of Stull, Forehead, And Both Upper Protries Of Eye Bones With Bone Graft, Total Area Of Bone Grafting 21184 (Braster Than 40 Sq. Cm But Lass Than 80 Sq. Cm 21185 Regard Of Bony Obetec Of Middee Through Scoip, Eyeld, And Oral Incisions With Bone Graft, Total Area Of Bone Grafting 21184 (Braster Than 80 Sq. Cm 21185 Regard Of Bony Obetec Of Middee Through Scoip, Eyeld, And Oral Incisions With Bone Graft 21184 Reconstruction Of Mondibular Rams, Horizontal, Vertical, "C", Or "C" Osteodorny, Without Bone Graft 21185 Reconstruction Of Mondibular Rams, Squales Brain, Scoil Area (To Secondary With Bone Graft 21185 Reconstruction Of Mondibular Rams, Squales Brain, Scoil Area (To Secondary With Bone Graft) 21185 Reconstruction Of Mondibular Rams, Squales Brain, Scoil Area (To Secondary With Bone Graft) 21186 Reconstruction Of Mondibular Rams, Squales Brain   | 21155 Reconstruction Of Midface Bones With Bone Graft With Lefort I (Lefort Iii)                     | \$1,981.62                            |
| Reconstruction Superior-Lateral Orbital Rim And Lover Forehead, Advancement Or Alteration, With Or Without Grafts (includes Obtaining \$1,832.88 (Reconstruction, Bifrontal, Superior-Lateral Orbital Rims And Lower Forehead, Advancement Of Alteration (Eg., Plagocephaly, Trigonocephaly, 1175) Branchycephaly, With Or Without Grafts (Includes Obtaining Autografts) \$2,010.3 (1173) Reconstruction, Entire Or Majority Of Forehead And/Or Supranothal Rims; With Vulporalt (Includes Obtaining Grafts) \$1,394.1 (1181) Reconstruction, Entire Or Majority Of Forehead And/Or Supranothal Rims; With Vulporalt (Includes Obtaining Grafts) \$1,394.1 (1181) Reconstruction, Entire Or Majority Of Forehead And/Or Supranothal Rims; With Vulporalt (Includes Obtaining Grafts) \$1,394.2 (1181) Removal By Contouring Of Benigh Tumor Of Grainal Bones (Eg., Florus Dysplesia), Extracranial Brain State (1181) Removal By Contouring Of Benigh Tumor Of Grainal Bones (Eg., Florus Dysplesia), Extracranial Brain State (1181) Removal By Contouring Of Benigh Tumor Of Grainal Bones (Eg., Florus Dysplesia), Extracranial Brain And State (1181) Removal   |  | \$2,371.52                            |
| 21122 Autografts) Reconstruction, Birtontal, Superior-Lateral Orbital Rims And Lower Forehead, Advancement Or Alteration (Eg. Plagiocephaly), Trigonocephaly), 21175 Planchycephaly), With Or Without Grafts (Includes Obtaining Autografts) 21180 Reconstruction, Entire Or Majority Of Forehead And/OF Suprachital Rims; With Grafts (Altograft Or Prosthetic Material) 21181 Removal by Contouring Of Denie Planch And/OF Suprachital Rims; With Autograft (Includes Obtaining Grafts) 21182 Timer all SQ Contouring Of Forehead And Suprachital Rims; With Autograft (Includes Obtaining Grafts) 21183 Identify Than 4D SQ Common SQ Control Blones (Eg.) Floreus Deplacible, Extracranial Removal Reconstruction Of Borny Defect Of Skuli, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Borny Defect Of Skuli, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Borny Defect Of Skuli, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Borny Defect Of Skuli, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Mandabusia Rams, Horizontal, Vertical, "Co. Or "L" Osterotomy, Without Bone Graft 21183 Reconstruction Of Mandabusia Rams, Horizontal, Vertical, "Co. Or "L" Osterotomy, Without Bone Graft 21193 Reconstruction Of Mandabusia Rams, Horizontal, Vertical, "Co. Or "L" Osterotomy, Without Bone Graft (Includes Obtaining Graft) 21193 Reconstruction Of Mandabusia Rams, Horizontal, Vertical, "Co. Or "L" Osterotomy, With Bone Graft (Includes Obtaining Graft) 21193 Reconstruction Of Mandabusia Rams, Horizontal, Vertical, "Co. Or "L" Osterotomy, With Bone Graft (Includes Obtaining Graft) 21193 Reconstruction Of Mandabusia Rams, Horizontal, Vertical, "Co. Or "L" Osterotomy, With Bone Graft (Includes Obtaining Graft) 2120 Reconstruction Of Mandabusia Rams, Horizontal, Vertical, "Co. Or "L" Osterotomy, With Bone Graft, Inc   |  | \$2,570.61                            |
| 21173 Reconstruction. Entire Of Majority of Forehead And/OF Suprandrial Rims; With Grafts (Allograft Or Prosthets Material)  21180 Reconstruction. Entire Of Majority Of Forehead And/OF Suprandrial Rims; With Autograft (Includes Obtaining Cartals)  212181 Removal SQ Contouring Of Dengin Tumor Of Clareal Bones (Eg.) Entroor Suprandrial Rims; With Autograft (Includes Obtaining Cartals)  212181 Removal SQ Contouring Of Dengin Tumor Of Clareal Bones (Eg.) Entroor Supraghasis, Extracranial Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Less Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Madace Through Scalp, Eyekid, And Oral Incisions With Bone Graft  21184 Greater Than 8D Sq Cm  21188 Repair Of Bony Defect Of Madace Through Scalp, Eyekid, And Oral Incisions With Bone Graft  21193 Reconstruction Of Mandibular Ram, Horizontal, Vertical, "C", O" "L" Osteotomy; With Bone Graft (Includes Obtaining Graft)  21194 Seconstruction Of Mandibular Ram Individed New Squall Split, Without Internal Rigid Fixation  21195 Reconstruction Of Mandibular Ram Individed New Squall Split, Without Internal Rigid Fixation  21196 Obtacotomy, Mandible, Segmental (Eg. Wassmurd Of Schuchard)  21206 Obtacotomy, Mandible, Segmental (Eg. Wassmurd Of Schuchard)  21206 Obtacotomy, Mandible, Segmental (Eg. Wassmurd Of Schuchard)  21207 Obtacotomy, Mandible, Segmental (Eg. Wassmurd Of Schuchard)  21210 Obtacotomy, Mandible, Segmental (Eg. Wassmurd Of Schuchard)  21210 Obtacotomy, Mandible, Segmental (Eg. Wassmurd Of Schuchard)  21210 Obtacotomy, Mandible, Segmental (Eg. Wassmurd Of Schuchard)  2   | 21172 Autografts)  | \$1,832.82                            |
| 21173 (Reconstruction, Entire Or Majorty) of Forehead And/OF Suprarothial Rims; With August (Includes Obtaining Graft) 21181 (Removal By Contouring Of Benigh Tumor Of Cranial Bones (Eg. Fibrous Dysplasia), Extracranial 21182 (Removal By Contouring Of Benigh Tumor Of Cranial Bones (Eg. Fibrous Dysplasia), Extracranial 21182 (Removal By Contouring Of Benigh Tumor Of Cranial Bones (Eg. Fibrous Dysplasia), Extracranial 21183 (Removal By Contouring Of Benigh Tumor Of Cranial Bones (Eg. Fibrous Dysplasia), Extracranial 21183 (Repair Of Contouring Of Benigh Tumor Of Cranial Bones (Eg. Fibrous Dysplasia), Extracranial 21183 (Repair Of Contouring Of Bone Graft, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting 21183 (Repair Of Bone) Defect Of Skulf, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting 21184 (Reconstruction Of Mandibular Bann), Hortzonial, Vertical, "Cr. Or "L" Osteotomy, Without Bone Graft, Total Area Of Bone Grafting 21184 (Reconstruction Of Mandibular Ramu, Hortzonial, Vertical, "Cr. Or "L" Osteotomy, Without Bone Graft (Includes Obtaining Graft) 21185 (Reconstruction Of Mandibular Ramu, Hortzonial, Vertical, "Cr. Or "L" Osteotomy, With Bone Graft (Includes Obtaining Graft) 311936 (Reconstruction Of Mandibular Ramu, Hortzonial, Vertical, "Cr. Or "L" Osteotomy, Without Bone Graft (Includes Obtaining Graft) 311930 (Steedomy, Mandible, Segmental 311930 (Steedomy, Mandible, Segmental (Eg. Wassmund Or Schuchard) 311930   |  | ****                                  |
| 21190 Reconstruction, Entire Ort Majority Of Forehead And/Or Supraorbital Rims, With Autograft (Includes Obtaining Grafts)  \$1,547.9  Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Less Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting State Graft Repair Of Bony Defect Of Midface Through Scalp, Eyeld, And Oral Incisions With Bone Graft 11948 Greater Braft Braft Braft State Sta  | - 7 1 777  | . ,                                   |
| 21181 Removal By Contouring Of Benign Tumor Of Craniel Bones (Eg. Fibrous Dysplasia), Extracraniel Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Less \$1,918.6 Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting \$2,088.11 21183, Greater Than 40 Sq. Cm But Less Than 80 Sq. Cm Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting \$2,2428.11 21184, Repair Clay Bones Of Sq. Cm Reconstruction Of Bony Defect Of Midface Through Scalp, Eyelid, And Oral Incisions With Bone Graft 21184, Repair Clay Bony Defect Of Midface Through Scalp, Eyelid, And Oral Incisions With Bone Graft 21184, Reconstruction Of Mandbular Ramus, Horizontal, Vertical, "Cr., Or "L", "Osteotomy, Without Bone Graft 21194, Reconstruction Of Mandbular Ramus, Horizontal, Vertical, "Cr., Or "L", "Osteotomy, With Bone Graft 21194, Reconstruction Of Mandbular Ramus, Horizontal, Vertical, "Cr., Or "L", "Osteotomy, With Bone Graft 21196, Reconstruction Of Mandbular Ramus, Sagital Spit; Without Internal Rigid Fixation 21196, Reconstruction Of Mandbular Ramus, Sagital Spit; With Internal Rigid Fixation 21196, Reconstruction Of Mandbular Ramus, Sagital Spit; With Internal Rigid Fixation 21196, Discotomy, Mandbile, Segmental 21196, Discotomy, Mandbile, Segmental With Genioglossus Advancement 21296, Osteotomy, Mandbile, Segmental With Genioglossus Advancement 21296, Clay Clay Control, Mandbile, Segmental With Genioglossus Advancement 21296, Clay Clay Clay Clay Clay Clay Clay Clay   |  |                                       |
| Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Less Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Repair Of Bony Defect Of Mcface Through Scalp, Eyeld, And Oral Incisions With Bone Graft Repair Of Bony Defect Of Mcface Through Scalp, Eyeld, And Oral Incisions With Bone Graft Repair Of Bony Defect Of Mcface Through Scalp, Eyeld, And Oral Incisions With Bone Graft Repair Of Bony Defect Of Mcface Through Scalp, Eyeld, And Oral Incisions With Bone Graft Reconstruction Of Mandbular Ram And Oral Incisions With Bone Graft Reconstruction Of Mandbular Ram And Oral Incisions With Bone Graft (Includes Obtaining Graft) Stage Reconstruction Of Mandbular Ram And Oral Repair Without Internal Rigid Fixation Stage Reconstruction Of Mandbular Ram And Oral Repair With Without Internal Rigid Fixation Stage Reconstruction Of Mandbular Ram And Oral Repair With Internal Rigid Fixation Stage Reconstruction Of Mandbular Ram And Stage Repair With Internal Rigid Fixation Stage Reconstruction Of Mandbular Ram And Stage Repair With Internal Rigid Fixation Stage Reconstruction Of Mandbular Ram And Stage Repair With Internal Rigid Fixation Stage Reconstruction Of Mandbular, Segmental With Internal Rigid Fixation Stage Reconstruction Of Mandbular, Segmental With Internal Rigid Fixation Stage Reconstruction Of Mandbular Stage Repair With Internal Rigid Fixation St   |  |                                       |
| St.1816   St.  |  | Ψ077.21                               |
| 21183 Greater Than 40 Sq. Cm But Less Than 80 Sq. Cm Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting Reconstruction Of Bony Defect Of Midface Through Scaip, Eyeld, And Oral Incisions With Bone Graft 1188 Repair Of Bony Defect Of Midface Through Scaip, Eyeld, And Oral Incisions With Bone Graft 1198 Reconstruction Of Mandbular Rami, Horizontal, Vertical, "C", "Or "L" Osteotomy, Without Bone Graft 1194 Reconstruction Of Mandbular Rami, Horizontal, Vertical, "C", "Or "L" Osteotomy, Without Bone Graft (Includes Obtaining Graft) 1195 Reconstruction Of Mandbular Rami, Horizontal, Vertical, "C", "Or "L" Osteotomy, Without Bone Graft (Includes Obtaining Graft) 1196 Reconstruction Of Mandbular Rami, Horizontal, Vertical, "C", "Or "L" Osteotomy, With Bone Graft (Includes Obtaining Graft) 1198 Reconstruction Of Mandbular Rami, Horizontal, Vertical, "C", "Or "L" Osteotomy, With Bone Graft (Includes Obtaining Graft) 1198 Osteotomy, Mandbile, Segmental: With Genioglossus Advancement 1199 Osteotomy, Mandbile, Segmental (Eg. Wassmund Or Schuchard) 1199 Osteotomy, Mandbile, Segmental (Eg. Wassmund Or Schuchard) 1190 Osteotopinsy, Facial Bones Reduction 1107 Osteotomy, Mandbile, Segmental (Eg. Wassmund Or Schuchard) 1108 Osteotopiasy, Facial Bones Reduction 1108 Osteotopiasy, Facial Bones Reduction 1108 Osteotopiasy, Facial Bones Reduction 1109 Osteotopiasy, Facial Bones   |  | \$1,918.61                            |
| Reconstruction Of Bony Defect Of Skull, Forehead, And Both Upper Portions Of Eye Bones With Bone Graft, Total Area Of Bone Grafting \$2,242.8* 21188 Repair Of Bony Defect Of Midface Through Scalp, Eyeld, And Oral Incisions With Bone Graft \$1,1948 Repair Of Bony Defect Of Midface Through Scalp, Eyeld, And Oral Incisions With Bone Graft \$1,1948 Reconstruction Of Mandbular Ramus, Horizontal, Vertical, "C", Or "L" Osteotomy, Without Bone Graft (Includes Obtaining Graft) \$1,1948 Reconstruction Of Mandbular Ramus, Horizontal, Vertical, "C", Or "L" Osteotomy, With Bone Graft (Includes Obtaining Graft) \$1,230.2* 21198 Reconstruction Of Mandbular Ramus, Horizontal, Vertical, "C", Or "L" Osteotomy, With Bone Graft (Includes Obtaining Graft) \$1,259.3* 21198 Reconstruction Of Mandbular Ramus, Sagilat Split, Without Internal Rigid Fixation \$1,259.2* 21198 Osteotomy, Mandble, Segmental \$1,259.3* 21199 Osteotomy, Mandble, Segmental With Genicoglossus Advancement \$2,960.2* 21199 Osteotomy, Mandble, Segmental With Genicoglossus Advancement \$2,960.2* 21208 Osteotomy, Mandble, Segmental With Genicoglossus Advancement \$2,960.2* 21208 Osteotomy, Mandble, Segmental With Genicoglossus Advancement \$2,960.2* 21208 Osteotomy, Mandble, Segmental With Genicoglossus Advancement \$2,960.2* 21209 Osteotoplasty, Facial Bones Augmentation (Autograft, Allograft, Or Prosthetic Implant) \$2,1208 Osteotoplasty, Facial Bones Augmentation (Autograft, Allograft, Or Prosthetic Implant) \$2,1210 Graft, Boner, Nasal, Maxillary And Malar Areas (Includes Obtaining Graft) \$2,1210 Graft, Boner, Mandble (Includes Obtaining Graft) \$2,1230 Graft, Ear Cartilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft) \$2,1230 Graft, Ear Cartilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft) \$2,1242 Anthroplasty, Temporomandibular Joini, With Droistotic Marterial (Eg., Mandbludra Staple Bone Plate) \$2,1242 Anthroplasty, Temporomandibular Joini, With Droistotic Marterial (Eg., Mandbludra Staple Bone Plate) \$2,1244 Reconstruction Of Mand  |  |                                       |
| Sezeta Than 80 Sq Cm   S   |  | \$2,086.10                            |
| 21188 Repair Of Borry Defect Of Midface Through Scalp, Eyelid, And Oral Incisions With Bone Graft 11393 Reconstruction Of Mandbular Rami, Horizontal, Vertical, "C", o" "L" Osteotomy, Withou Bone Graft 11394 Reconstruction Of Mandbular Ramis, Horizontal, Vertical, "C", o" "L" Osteotomy, With Bone Graft (Includes Obtaining Graft) 11395 Reconstruction Of Mandbular Ramis, Horizontal, Vertical, "C", o" "L" Osteotomy, With Bone Graft (Includes Obtaining Graft) 11396 Reconstruction Of Mandbular Ramis, Sagittal Split, Without Internal Rigid Fixation 11396 Reconstruction Of Mandbular Ramis, Sagittal Split, Without Internal Rigid Fixation 11396 Section, "Mandble, Segmental With Genioglossus Advancement 11399 Osteotomy, Mandble, Segmental," With Genioglossus Advancement 11399 Osteotomy, Mandble, Segmental, With Genioglossus Advancement 11390 Osteotomy, Mandble, Segmental, With Genioglossus Advancement 11390 Osteotomy, Mandble, Segmental, "With Genioglossus, Advancement 11390 Osteotomy, Mandble, Segmental, "With Genioglossus, "Advancement 11390 Osteotomy, Mandble, Gene, Nasal, Mandlar, Areas (Includes Obtaining Graft) 11390 Osteotomy, Mandble, Gene, Nasal, Mandlar, Areas (Includes Obtaining Graft) 11390 Osteotomy, Mandble, Gene, Nasal, Mandlar, Areas (Includes Obtaining Graft) 11390 Osteotomy, Mandble, Gene, Chan, Nose Or Ear (Includes Obtaining Graft) 11390 Osteotomy, Mandble, Gene, Chan, Nose Or Ear (Includes Obtaining Graft) 11390 Osteotomy, Mandble, Gene, Chan, Mandlar, Areas (In   |  | ¢2 242 97                             |
| 21193 Reconstruction Of Mandibular Rami, Horizontal, Vertical, "C", O" "L" Osteotomy, Without Bone Graft (Includes Obtaining Graft)  21198 Reconstruction Of Mandibular Ramis, Horizontal, Vertical, "C", O" "L" Osteotomy, With Bone Graft (Includes Obtaining Graft)  21198 Reconstruction Of Mandibular Ramis, Sagittal Split, With Internal Rigid Fixation  31,256.3.  21198 Reconstruction Of Mandibular Ramis, Sagittal Split, With Internal Rigid Fixation  31,260.2.  21199 Osteotomy, Mandible, Segmental (Eg. Wassmund Or Schuchard)  21206 Osteotomy, Mandible, Segmental (Eg. Wassmund Or Schuchard)  21207 Osteotomy, Mandible, Segmental (Eg. Wassmund Or Schuchard)  21208 Osteotomy, Mandible, Segmental (Eg. Wassmund Or Schuchard)  21209 Osteotomy, Mandible, Segmental (Eg. Wassmund Or Schuchard)  21209 Osteotomy, Mandible, Osteon Reduction  21209 Osteotomy, Mandible, Segmental (Eg. Wassmund Or Schuchard)  21216 Graft, Bone; Nasal, Maxillary And Malar Areas (Includes Obtaining Graft)  21220 Graft, Bone; Mandible (Includes Obtaining Graft)  21223 Graft, Rib Carillage, Aulograft, To Nose Or Ear (Includes Obtaining Graft)  212240 Arrhroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft)  212240 Arrhroplasty, Temporomandibular Joint, With To Without Autograft (Includes Obtaining Graft)  21224 Reconstruction Of Mandible, Extraoral, With Transosteal Brone Plate (Eg. Mandibular Staple Bone Plate)  21224 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete  21224 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant (Eg. Slade, Cylinder); Partial  21224 Reconstruction Of Mandible Or Maxilla   |  |                                       |
| 21194 Reconstruction Of Mandibular Ramus, Horizontal, Vertical, "C", "O" "L" Osteotomy, With Bone Graft (Includes Obtaining Graft)  \$1,250.2 21198 Reconstruction Of Mandibular Rami and/Or Body, Sagital Split; With Internal Rigid Fixation  \$1,250.2 21198 Reconstruction Of Mandibular Ramus, Sagittal Split; With Internal Rigid Fixation  \$1,200.2 21198 Osteotomy, Mandible, Segmental  \$2,960.2 21199 Osteotomy, Mandible, Segmental  \$3,200.2 21199 Osteotomy, Mandible, Segmental (Eg., Wassmund Or Schuchard)  \$3,200.2 21198 Osteotomy, Mandible, Segmental (Eg., Wassmund Or Schuchard)  \$3,000.2 21208 Osteotomy, Mandible, Segmental (Eg., Wassmund Or Schuchard)  \$3,000.3 21208 Osteotomy, Mandible, Segmental (Eg., Wassmund Or Schuchard)  \$4,000.3 21209 Osteotomy, Mandible, Segmental (Eg., Wassmund Or Schuchard)  \$4,000.3 21208 Osteotomy, Mandible, Segmental (Eg., Wassmund Or Schuchard)  \$4,000.3 21209 Osteoplasty, Facial Bones Augmentation (Autograft, Algoraft, Or Prosthetic Implant)  \$4,000.3 21209 Osteoplasty, Facial Bones Augmentation (Autograft, Algoraft, Or Prosthetic Implant)  \$4,000.3 21210 Graft, Bone; Mandible (Includes Obtaining Graft)  \$4,000.3 21210 Graft, Bone; Assal, Maxilary And Malar Areas (Includes Obtaining Graft)  \$4,000.3 21230 Graft, Era Cartilage, Autograft, To Nose Or Ear (Includes Obtaining Graft)  \$4,000.3 21240 Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft)  \$4,000.3 21242 Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement  \$4,000.3 21243 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Cartilage, Autografts (Includes Obtaining Grafts)  \$4,000.3 21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant (Eg., Blade, Cylinder); Partial  \$4,000.3 21247 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg., Blade, Cylinder); Partial  \$4,000.3 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg., Blade, Cylinder); Partial  \$4,000.3 21249 Reconstruction Of Official Hypertelorism, With Bone Grafts   |  | ·                                     |
| 21198   Seconstruction Of Mandibular Ramus, Sagittal Split; With Internal Rigid Fixation   \$1,320.2   21199   Osteotomy, Mandible, Segmental   \$960.2   21199   Osteotomy, Mandible, Segmental; With Genioglossus Advancement   \$945.7   21206   Osteotomy, Mandible, Segmental; With Genioglossus Advancement   \$945.7   21208   Osteoplasty, Facial Bones Augmentation (Autograft, Allograft, Or Prosthetic Implant)   \$1,610.3   21209   Osteoplasty, Facial Bones Reduction   \$1,530.6   21210   Graft, Bone; Nasal, Maxillary And Malar Areas (Includes Obtaining Graft)   \$1,595.6   21215   Graft, Bone; Mandible (Includes Obtaining Graft)   \$1,595.6   21215   Graft, Bone; Mandible (Includes Obtaining Graft)   \$3,006.8   21230   Graft, Rib Cartilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft)   \$3,006.8   21230   Graft, Rib Cartilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft)   \$3,006.8   21240   Arthroplasty, Temporomandibular Joint, With Prosthetic Material (Eg., Silcone)   \$975.3   21242   Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement   \$944.9   21243   Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement   \$1,493.5   21246   Reconstruction Of Mandible Orf Maxilla, Subperiosteal Implant Partial   \$1,107.7   21246   Reconstruction Of Mandible Orf Maxilla, Subperiosteal Implant Partial   \$1,107.7   21248   Reconstruction Of Mandible Orf Maxilla, Subperiosteal Implant Partial   \$1,263.8   21249   Reconstruction Of Mandible Orf Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial   \$925.2   21249   Reconstruction Of Mandible Orf Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial   \$925.2   21249   Reconstruction Of Mandible Orf Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial   \$925.2   21249   Reconstruction Of Mandible Orf Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial   \$925.2   21249   Reconstruction Of Mandible Orf Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial   \$925.2   21249   Reconstruc   |  | \$1,330.20                            |
| 21198   Osteotomy, Mandible, Segmental   \$945.77  | 21195 Reconstruction Of Mandibular Rami And/Or Body, Sagittal Split; Without Internal Rigid Fixation | \$1,259.34                            |
| 21199 Osteotomy, Mardible, Segmental (Eg. Wassmund Or Schuchard) \$905.01 21206 Osteotomy, Maxilla, Segmental (Eg. Wassmund Or Schuchard) \$905.01 21208 Osteoplasty, Facial Bones Augmentation (Autograft, Allograft, Or Prosthetic Implant) \$1,510.32 21209 Osteoplasty, Facial Bones Reduction \$733.81 21210 Graft, Bone; Nasal, Maxillary And Malar Areas (Includes Obtaining Graft) \$1,595.62 21215 Graft, Bone; Mandible (Includes Obtaining Graft) \$3,006.81 21215 Graft, Bone; Mandible (Includes Obtaining Graft) \$3,006.81 21230 Graft; Rib Cartilage, Autograft, To Nose Or Ear (Includes Obtaining Graft) \$3,006.81 21230 Graft; Rib Cartilage, Autograft, To Nose Or Ear (Includes Obtaining Graft) \$602.77 21240 Arhrivoplasty, Temporomandibular Joint, With Alloglastic Material (Eg. Silicone) \$944.97 21242 Arhrivoplasty, Temporomandibular Joint, With Alloglastic Material (Eg. Silicone) \$944.97 21243 Arhroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement \$14.44 2124 Reconstruction Of Mandible Extraoral. With Transosteal Bone Plate (Eg. Mandibluar Staple Bone Plate) \$34.04 21244 Reconstruction of Mandible Or Maxilla, Subperiosteal Implant Complete \$752.81 21247 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete \$752.81 21248 Reconstruction Of Mandibluar Condyle With Bone And Cartilage Autografts (Includes Obtaining Grafts) (Eg. For Hemifacial Microsomia) \$1,473.55 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial \$9,552.81 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial \$9,552.81 21249 Reconstruction Of Or Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial \$9,552.81 21249 Reconstruction Of Or Did Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial \$9,552.81 21256 Reconstruction Of Or Did Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial \$9,552.81 21267 Periorbial Osteotomies For Orbital Hypertelorism, With Bone Grafts; (Extraoranial Approach \$1,265.31 212   |  | \$1,320.23                            |
| 21206   Osteotomy, Maxilla, Segmental (Eg., Wassmund Or Schuchard)   \$905.01   21208   Osteoplasty, Facial Bones Augmentation (Autograft, Allograft, Or Porsthetic Implant)   \$1,610.31   212109   Osteoplasty, Facial Bones Reduction   \$733.81   21210   Graft, Bone; Nasal, Maxillary And Malar Areas (Includes Obtaining Graft)   \$1,595.61   21215   Graft, Bone; Mandible (Includes Obtaining Graft)   \$3,066.81   21230   Graft; Rib Carillage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft)   \$3,066.81   21235   Graft; Ear Cartilage, Autograft, To Nose Or Ear (Includes Obtaining Graft)   \$764.41   21235   Graft; Ear Cartilage, Autograft, To Nose Or Ear (Includes Obtaining Graft)   \$975.31   21242   Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft)   \$975.31   21242   Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft)   \$975.31   21243   Arthroplasty, Temporomandibular Joint, With Portshetic Joint Replacement   \$1435.51   21244   Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg. Mandibular Staple Bone Plate)   \$938.01   21245   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$938.01   21246   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$938.01   21247   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$938.01   21248   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$938.01   21249   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$938.01   21256   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$938.01   21269   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$938.01   21260   Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts (Includes Obtaining Autografts) (Eg. Microophthalmia)   \$1,28.61.61   21261   Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach   \$1,261.61   21262   Periorbital Os  |  |                                       |
| 21209   Osteoplasty, Facial Bones Augmentation (Autograft, Allograft, Or Prosthetic Implant)   \$733.8   21209   Osteoplasty, Facial Bones Reduction   \$733.8   21210   Graft, Bone, Nasal, Maxillary And Malar Areas (Includes Obtaining Graft)   \$1,595.6   21215   Graft, Bone, Nasal, Maxillary And Malar Areas (Includes Obtaining Graft)   \$3,006.8   21215   Graft, Bone, Mandible (Includes Obtaining Graft)   \$3,006.8   21236   Graft, Ear Cartilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft)   \$602.77   21240   Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft)   \$944.3   21242   Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement   \$944.3   21243   Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement   \$1,493.5   21244   Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg. Mandibular Staple Bone Plate)   \$948.3   21245   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$3938.0   21246   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$3938.0   21247   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$392.8   21248   Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial   \$925.2   21249   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$1,256.3   21256   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$1,256.3   21256   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$1,256.3   21256   Reconstruction Of Official Microsomia (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg. Microophthalmia)   \$1,128.3   21260   Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach   \$1,266.3   21261   Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach   \$1,267.0   21262   Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts,   |  | · · · · · · · · · · · · · · · · · · · |
| 21210   Graft, Bone; Nasal, Maxillary And Malar Areas (Includes Obtaining Graft)   \$1,595.6   21215   Graft, Bone; Masal, Maxillary And Malar Areas (Includes Obtaining Graft)   \$3,006.88   21230   Graft, Rib Carlilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft)   \$764.48   21236   Graft, Ear Carlilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft)   \$602.74   21240   Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft)   \$975.31   21242   Arthroplasty, Temporomandibular Joint, With Alloplastic Material (Eg., Bilcone)   \$975.31   21243   Arthroplasty, Temporomandibular Joint, With Alloplastic Material (Eg., Bilcone)   \$975.31   21244   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$979.28   21246   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$979.28   21247   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$979.28   21248   Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete   \$979.28   21249   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$979.28   21249   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$979.28   21249   Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete   \$979.28   21256   Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg., Microophthalmia)   \$1,28.63   21260   Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach   \$1,28.63   21261   Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach   \$1,28.63   21262   Residentified (Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement   \$2,057.01   21263   Reconstruction Of Nasail And Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach   \$1,475.84   21260   Malar Augmentation, Prosthetic Material   |  |                                       |
| \$1,555.6  |  | \$733.81                              |
| 21230 Graft; Rib Cartilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft) 21236 Graft; Ear Cartilage, Autogenous, To Face, Chin, Nose Or Ear (Includes Obtaining Graft) 3602.70 21240 Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft) 21242 Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement 21243 Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement 21244 Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg., Mandibular Staple Bone Plate) 21245 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete 21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete 21247 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial 21256 Reconstruction Of Xayilla, Endosteal Implant (Eg. Blade, Cylinder); Partial 21269 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts) 21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) 21267 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach 21268 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement 22057.0 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach 21268 Reduction Of Nassal And Eye Socket Ligament, Fas Side 21270 Malar Augmentation, Prosthetic Material 21280 Reattachment Of Nasal And Eye Socket Ligament, Rose Side 21280 Reduction Of Masseter Muscle (Eg. Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach 21   |  | \$1,595.61                            |
| 21235 Graft; Ear Cartilage, Autograft, To Nose Or Ear (Includes Obtaining Graft) 21240 Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft) 21242 Arthroplasty, Temporomandibular Joint, With Alloplastic Material (Eg., Silicone) 21243 Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement 21244 Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg., Mandibular Staple Bone Plate) 21245 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Partial 21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Partial 21247 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete 21247 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete 21256 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts) (Eg., Microophthalmia) 21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg., Microophthalmia) 21256 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach 21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach 21268 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement 21269 Reduction Of Masseter Muscle (Eg., For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach 21276 Reconstruction Of Masseter Muscle (Eg., For Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21287 Rec   | 21215 Graft, Bone; Mandible (Includes Obtaining Graft)   | \$3,006.83                            |
| 21240 Arthroplasty, Temporomandibular Joint, With Or Without Autograft (Includes Obtaining Graft) 21242 Arthroplasty, Temporomandibular Joint, With Alloplastic Material (Eg. Silicone) 3944.9. 21243 Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement \$1,493.5. 21244 Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg., Mandibular Staple Bone Plate) \$938.02 21245 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Partial \$1,107.7. 21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete \$792.82 21247 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete \$792.82 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg., Blade, Cylinder); Partial \$925.22 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg., Blade, Cylinder); Partial \$925.22 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete \$1,266.3- 21255 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete \$1,266.3- 21260 Reconstruction Of Orbit With Osteotomies (Extraoranial) And With Bone Grafts (Includes Obtaining Autografts) \$1,266.3- 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach \$1,261.62 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach \$1,261.62 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement \$2,205.02 21264 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach \$1,475.31 21265 Recondary Revision Of Orbitocraniofacial Reconstruction \$339.62 21276 Reattachment Of Nasal And Eye Socket Ligament, Res Side \$339.62 21267 Reattachment Of Nasal And Eye Socket Ligament, Res Side \$339.66 21268 Reduction Of Masseter Muscle And Bone (Eg., For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach \$331.02 21269 Reduction Of Masseter Muscle And Bone (Eg., For Treatment Of Benign Masseteric Hypertrophy)   |  | \$764.45                              |
| 21242 Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement \$1,493.5- 21243 Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement \$1,493.5- 21244 Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg. Mandibular Staple Bone Plate) \$2,938.00 21245 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Partial \$1,107.7- 21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete \$792.8: 21247 Reconstruction Of Mandibular Condyle With Bone And Cartilage Autografts (Includes Obtaining Grafts) (Eg. For Hemifacial Microsomia) \$1,473.5- 21248 Reconstruction Of Mandibular Condyle With Bone And Cartilage Autografts (Includes Obtaining Grafts) (Eg. For Hemifacial Microsomia) \$1,473.5- 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial \$925.2- 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete \$1,256.3- 21255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts) \$1,256.3- 21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg. Microophthalmia) \$1,128.9- 21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach \$1,261.6- 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach \$2,207.0- 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement \$2,057.0- 21264 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach \$1,475.3- 21260 Malar Augmentation, Prosthetic Material \$939.6- 21275 Secondary Revision Of Orbitocraniofacial Reconstruction \$772.8- 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side \$1370.4- 21289 Reduction Of Masseter Muscle (Eg. Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach \$331.0- 21269 Reduction Of Masseter Muscle (  |  | \$602.76                              |
| Arthroplasty, Temporomandibular Joint, With Prosthetic Joint Replacement  \$1,493.55 21244 Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg, Mandibular Staple Bone Plate)  \$938.01 21245 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Partial  \$1,107.72 21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete  \$792.83 21247 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete  \$1,107.73 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg, Blade, Cylinder); Partial  \$21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg, Blade, Cylinder); Partial  \$21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete  \$1,256.32 21255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts)  \$1,256.33 21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg, Microophthalmia)  \$1,128.93 21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach  \$1,261.63 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach  \$2,220.93 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach  \$2,207.03 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach  \$1,245.44 21270 Malar Augmentation, Prosthetic Material  \$393.60 21275 Secondary Revision Of Orbitocraniofacial Reconstruction  \$3772.87 21280 Reattachment Of Nasal And Eye Socket Ligament, Nose Side  \$331.04 21295 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach  \$381.00 21269 Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach  \$331.00 21269 Price Bytais Closed Treatment Of Bone Nasal Bone, Without Stabilization  |  | •                                     |
| Reconstruction Of Mandible, Extraoral, With Transosteal Bone Plate (Eg, Mandibular Staple Bone Plate)   \$938.02   |  |                                       |
| 21245 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Partial 21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete 21247 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg. Blade, Cylinder); Partial 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete 21255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts) 21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) 21256 Reconstruction Of Orbital Hypertelorism, With Bone Grafts; Extracranial Approach 21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach 21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach 21270 Malar Augmentation, Prosthetic Material 21270 Reattachment Of Nasal And Eye Socket Ligament, Rose Side 21280 Reattachment Of Nasal And Eye Socket Ligament, Rose Side 21281 Reduction Of Masseter Muscle And Bone (Eg. For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach 21299 Reduction Of Masseter Muscle (Eg. Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization  |  |                                       |
| 21246 Reconstruction Of Mandible Or Maxilla, Subperiosteal Implant Complete  21247 Reconstruction Of Mandibular Condyle With Bone And Cartilage Autografts (Includes Obtaining Grafts) (Eg, For Hemifacial Microsomia)  21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg, Blade, Cylinder); Partial  21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete  21255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts)  21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg, Microophthalmia)  21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach  21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement  21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement  21264 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach  21265 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach  21266 Reattachment Of Nasal And Eye Socket Ligament, Ear Side  21275 Secondary Revision Of Orbitocraniofacial Reconstruction  21280 Reattachment Of Nasal And Eye Socket Ligament, Nose Side  21280 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach  21280 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach  21281 Closed Treatment Of Broken Nasal Bone, Without Stabilization  21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization   |  | \$1,107.74                            |
| 21247 Reconstruction Of Mandibular Condyle With Bone And Cartilage Autografts (Includes Obtaining Grafts) (Eg, For Hemifacial Microsomia)  \$1,473.5- 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg, Blade, Cylinder); Partial  \$925.22 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete  \$1255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts)  \$1,256.3- 21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg, Microophthalmia)  \$1,128.9- 21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach  \$1,261.6- 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach  \$2,220.9- 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement  \$2,057.00- 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach  \$1,475.34- 21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach  \$1,845.44- 21270 Malar Augmentation, Prosthetic Material  \$1,289.20.9- 21280 Reattachment Of Nasal And Eye Socket Ligament, Rear Side  \$2,057.00- 21281 Reattachment Of Nasal And Eye Socket Ligament, Nose Side  \$2,057.00- 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side  \$370.4- 21295 Reduction Of Masseter Muscle (Eg, Fror Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach  \$381.00- 21299 Unlisted Craniofacial And Maxillofacial Procedure  \$381.01- 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization  |  | \$792.83                              |
| 21248 Reconstruction Of Mandible Or Maxilla, Endosteal Implant (Eg, Blade, Cylinder); Partial  \$925.23 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete  \$1,256.34 21255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts)  \$1,256.37  21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg, Microophthalmia)  \$1,128.93 21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach  \$1,261.62 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach  \$2,220.92 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement  \$2,057.02 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach  \$1,475.38 21260 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach  \$1,475.39 21270 Malar Augmentation, Prosthetic Material  \$3939.62 21275 Secondary Revision Of Orbitocraniofacial Reconstruction  \$772.83 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side  \$3370.44 21295 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach  \$3310.49 21296 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach  \$3310.50 212150 Closed Treatment Of Broken Nasal Bone, Without Stabilization  |  |                                       |
| 21249 Reconstruction Of Mandible Or Maxilla, Endosteal Implant Complete 21255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts) 21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg, Microophthalmia) 21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement 21266 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach 21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach 21270 Malar Augmentation, Prosthetic Material 21270 Malar Augmentation, Prosthetic Material 21275 Secondary Revision Of Orbitocraniofacial Reconstruction 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side 21280 Reattachment Of Nasal And Eye Socket Ligament, Nose Side 21295 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach 21296 Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21299 Unlisted Craniofacial And Maxillofacial Procedure 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21326 Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization  |  |                                       |
| 21255 Reconstruction Of Zygomatic Arch And Glenoid Fossa With Bone And Cartilage (Includes Obtaining Autografts)  21256 Reconstruction Of Orbit With Osteotomies (Extracranial) And With Bone Grafts (Includes Obtaining Autografts) (Eg. Microophthalmia)  21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach  21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach  21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement  21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach  21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach  21270 Malar Augmentation, Prosthetic Material  21273 Secondary Revision Of Orbitocraniofacial Reconstruction  21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side  21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side  21295 Reduction Of Masseter Muscle And Bone (Eg. For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach  21269 Unlisted Craniofacial And Maxillofacial Procedure  21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization  \$11,25.33  \$1,256.33  \$1,261.63  \$1,261.63  \$1,261.63  \$2,220.99  \$2,20.99  \$2,20.99  \$2,20.99  \$2,20.99  \$2,20.99  \$2,20.99  \$2,20.99  \$2,20.99  \$   |  |                                       |
| 21260 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Extracranial Approach 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement 22,057.02 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach 21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach 21269 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach 21270 Malar Augmentation, Prosthetic Material 21270 Secondary Revision Of Orbitocraniofacial Reconstruction 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side 21293 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach 21296 Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21299 Unlisted Craniofacial And Maxillofacial Procedure 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21326 Periorbital Osteodrape Advancement State  |  | \$1,256.37                            |
| 21261 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; Combined Intra- And Extracranial Approach 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement 22,057.03 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach 21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach 21270 Malar Augmentation, Prosthetic Material 21275 Secondary Revision Of Orbitocraniofacial Reconstruction 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side 21293 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach 21299 Unlisted Craniofacial And Maxillofacial Procedure 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 32,720.4  |  | \$1,128.93                            |
| 21263 Periorbital Osteotomies For Orbital Hypertelorism, With Bone Grafts; With Forehead Advancement \$2,057.03 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach \$1,475.33 21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach \$1,845.44 21270 Malar Augmentation, Prosthetic Material \$939.6 21275 Secondary Revision Of Orbitocraniofacial Reconstruction \$772.8 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side \$545.9 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side \$370.4 21295 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach \$381.04 21299 Unlisted Craniofacial And Maxillofacial Procedure Price By Repor  |  |                                       |
| 21267 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Extracranial Approach 21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach 21270 Malar Augmentation, Prosthetic Material 21275 Secondary Revision Of Orbitocraniofacial Reconstruction 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side 21295 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach 21296 Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21299 Unlisted Craniofacial And Maxillofacial Procedure 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21268 Plastic Repositioning Of Eye Socket Ligament on Pace With Bone Grafts, Extracranial Approach 21276 Schodary Revisioning Of Eye Socket Ligament, Nose Side 21277 Secondary Revision Of Nasal Bone, Without Stabilization 21289 Unlisted Craniofacial And Maxillofacial Procedure 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21290 Plastic Repositioning Of Eye Socket Ligament One Side Of The Face With Bone Grafts, Extracranial Approach 21291 Secondary Revision Of Orbitocraniofacial Procedure 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization 21296 Plastic Reposition Approach 21297 Secondary Revision Of Masseteric Hypertrophy); Intraoral Approach 21298 Plastic Reposition Of Masseteric Hypertrophy); Intraoral Approach 21299 Plastic Reposition Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21299 Plastic Reposition Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21299 Plastic Reposition Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21299 Plastic Reposition Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach 21299 Plastic Reposition Of Masseter M   |  |                                       |
| 21268 Plastic Repositioning Of Eye Socket Bones On One Side Of The Face With Bone Grafts, Combined Approach  \$1,845.44 21270 Malar Augmentation, Prosthetic Material  \$939.65 21275 Secondary Revision Of Orbitocraniofacial Reconstruction  \$772.87 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side  \$21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side  \$21292 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach  \$182.77 21299 Unlisted Craniofacial And Maxillofacial Procedure  Price By Report  21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization  \$1,845.44 \$939.66 \$9 |  | \$1,475.39                            |
| 21270 Malar Augmentation, Prosthetic Material \$939.60 21275 Secondary Revision Of Orbitocraniofacial Reconstruction \$772.80 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side \$545.90 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side \$370.40 21295 Reduction Of Masseter Muscle And Bone (Eg., For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach \$182.70 21296 Reduction Of Masseter Muscle (Eg., Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach \$381.00 21299 Unlisted Craniofacial And Maxillofacial Procedure Price By Report  |  | \$1,845.46                            |
| 21280 Reattachment Of Nasal And Eye Socket Ligament, Ear Side \$545.9 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side \$370.4 21295 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach \$182.7 21296 Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach \$381.00 21299 Unlisted Craniofacial And Maxillofacial Procedure Price By Repor  | 21270 Malar Augmentation, Prosthetic Material  | \$939.67                              |
| 21282 Reattachment Of Nasal And Eye Socket Ligament, Nose Side \$370.4 21295 Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach \$182.7 21296 Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach \$381.00 21299 Unlisted Craniofacial And Maxillofacial Procedure Price By Report 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization \$115.5  | ·  | \$772.87                              |
| 21295Reduction Of Masseter Muscle And Bone (Eg, For Treatment Of Benign Masseteric Hypertrophy); Extraoral Approach\$182.7°21296Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach\$381.0021299Unlisted Craniofacial And Maxillofacial ProcedurePrice By Report21315Closed Treatment Of Broken Nasal Bone, Without Stabilization\$115.5°  |  | \$545.91                              |
| 21296Reduction Of Masseter Muscle (Eg, Treatment Of Benign Masseteric Hypertrophy); Intraoral Approach\$381.0021299Unlisted Craniofacial And Maxillofacial ProcedurePrice By Report21315Closed Treatment Of Broken Nasal Bone, Without Stabilization\$115.50   |  |                                       |
| 21299 Unlisted Craniofacial And Maxillofacial Procedure       Price By Report         21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization       \$115.5   |  |                                       |
| 21315 Closed Treatment Of Broken Nasal Bone, Without Stabilization \$115.5   |  |                                       |
|  |  | \$115.57                              |
|  |  | \$232.31                              |

| Code Description   | Fee                                |
|--|------------------------------------|
| 21325 Open Treatment Of Nasal Fracture; Uncomplicated  | \$319.64                           |
| 21330 Open Treatment Of Nasal Fracture; Complicated, With Internal And/Or External Skeletal Fixation   | \$504.21                           |
| 21335 Open Treatment Of Nasal Fracture; With Concomitant Open Treatment Of Fractured Septum  | \$742.76                           |
| 21336 Open Treatment Of Nasal Septal Fracture, With Or Without Stabilization   | \$607.19                           |
| 21337 Closed Treatment Of Nasal Septal Fracture, With Or Without Stabilization   | \$292.59                           |
| 21338 Open Treatment Of Nasoethmoid Fracture; Without External Fixation  | \$636.07                           |
| 21339 Open Treatment Of Nasoethmoid Fracture; Without External Fixation With External Fixation  21340 Treatment Of Broken Eye Socket And Nasal Bones, Accessed Through The Skin  | \$716.40<br>\$692.94               |
| 21343 Open Treatment Of Depressed Frontal Sinus Fracture   | \$1,014.59                         |
| 21043 Open Treatment of Depressed Fortain Offices Treatment  | ψ1,014.59                          |
| 21344 Open Treatment Of Complicated (Eg, Comminuted Or Involving Posterior Wall) Frontal Sinus Fracture, Via Coronal Or Multiple Approaches  | \$1,289.75                         |
| 21345 Closed Treatment Of Nasomaxillary Complex Fracture (Lefort li Type), With Interdental Wire Fixation Or Fixation Of Denture Or Splint   | \$750.78                           |
| 21346 Open Treatment Of Nasomaxillary Complex Fracture (Lefort li Type); With Wiring And/Or Local Fixation   | \$970.15                           |
| 21347 Open Treatment Of Nasomaxillary Complex Fracture (Lefort li Type); Requiring Multiple Open Approaches  | \$973.68                           |
| 21348 Open Treatment Of Nasomaxillary Complex Fracture (Lefort li Type); With Bone Grafting (Includes Obtaining Graft)   | \$1,005.09                         |
| 21355 Treatment Of Broken Lower And Upper Cheek Bones With Manipulation, Accessed Through The Skin   | \$421.05                           |
| 21356 Open Treatment Of Broken Cheek Bone, Zygoma Fracture   | \$434.36                           |
| 21360 Open Treatment Of Broken Cheek Bone, Malar Fracture  | \$484.34                           |
| Open Treatment Of Complicated (Eg, Comminuted Or Involving Cranial Nerve Foramina) Fracture(S) Of Malar Area, Including Zygomatic Arch   | ¢4.000.00                          |
| 21365 And Malar Tripod; With Internal Fixation And Multiple Surgical Approaches  Open Treatment Of Complicated (Eq. Comminuted Or Involving Cranial Nerve Foramina) Fracture(S) Of Malar Area, Including Zygomatic Arch  | \$1,086.30                         |
| 21366 And Malar Tripod; With Bone Grafting (Includes Obtaining Graft)  | \$1,162.69                         |
| 21385 Open Treatment Of Broken Eye Socket Bone, Blowout Fracture, Transantral Approach   | \$674.90                           |
| 21386 Open Treatment of Broken Eye Socket Bone, Blowout Fracture, Periorbital Approach   | \$742.85                           |
| 21387 Open Treatment Of Broken Eye Socket Bone, Blowout Fracture, Combined Approach  | \$703.71                           |
| 21390 Open Treatment Of Broken Eye Socket Bone With Implant, Blowout Fracture  | \$826.06                           |
| 21395 Open Treatment Of Broken Eye Socket Bone With Bone Graft, Blowout Fracture   | \$920.69                           |
| 21400 Closed Treatment Of Fracture Of Orbit, Except "Blowout"; Without Manipulation  | \$199.71                           |
| 21401 Closed Treatment Of Broken Eye Socket Bone With Manipulation   | \$354.52                           |
| 21406 Open Treatment Of Broken Eye Socket Bone Without Implant, Other Than Blowout Fracture  | \$537.38                           |
| 21407 Open Treatment Of Broken Eye Socket Bone With Implant, Other Than Blowout Fracture   | \$631.95                           |
| 21408 Open Treatment Of Broken Eye Socket Bone With Bone Graft Other Than Blowout Fracture   | \$825.04                           |
| 21421 Closed Treatment Of Palatal Or Maxillary Fracture (Lefort I Type), With Interdental Wire Fixation Or Fixation Of Denture Or Splint   | \$618.00                           |
| 21422 Open Treatment Of Fracture At Roof Of Mouth Or Cheek Bone (Lefort I)   | \$645.42                           |
| 21423 Open Treatment Of Fracture At Roof Of Mouth Or Cheek Bone (Lefort I), Complicated  | \$733.55                           |
| 21431 Closed Treatment Of Broken Bones Of Cheek, Nose Or Face With Insertion Of Hardware Or Oral Splint (Lefort Iii)   | \$663.97                           |
| 21432 Open Treatment Of Broken Bones Of Face (Lefort Iii) And Head And/Or Insertion Of Hardware 21433 Open Treatment Of Broken Bones Of Face And Head (Lefort Iii), Complicated  | \$665.90<br>\$1,575.05             |
| 21435 Open Treatment of Broken Bones of Face And Head And/Or Insertion Of Hardware (Lefort Iii), Complicated   | \$1,373.03                         |
| 21436 Open Treatment Of Broken Bones Of Face And Head With Insertion Of Hardware And Bone Graft (Lefort Iii), Complicated  | \$1,850.08                         |
| 21440 Closed Treatment Of Mandibular Or Maxillary Alveolar Ridge Fracture (Separate Procedure)   | \$670.91                           |
| 21445 Open Treatment Of Mandibular Or Maxillary Alveolar Ridge Fracture (Separate Procedure)   | \$569.07                           |
| 21450 Closed Treatment Of Mandibular Fracture; Without Manipulation  | \$423.87                           |
| 21451 Closed Treatment Of Mandibular Fracture; With Manipulation   | \$748.02                           |
| 21452 Treatment Of Broken Jaw Bone With Placement Of External Hardware, Accessed Through The Skin  | \$740.39                           |
| 21453 Closed Treatment Of Mandibular Fracture With Interdental Fixation  | \$779.14                           |
| 21454 Open Treatment Of Mandibular Fracture With External Fixation   | \$454.10                           |
| 21461 Open Treatment Of Mandibular Fracture; Without Interdental Fixation  | \$1,312.30                         |
| 21462 Open Treatment Of Closed Or Open Mandibular Fracture; With Interdental Fixation  | \$1,434.43                         |
| 21465 Open Treatment Of Mandibular Condylar Fracture   | \$739.94                           |
| Open Treatment Of Complicated Mandibular Fracture By Multiple Surgical Approaches Including Internal Fixation, Interdental Fixation, And/Or  | £4.404.00                          |
| 21470 Wiring Of Dentures Or Splints 21480 Closed Treatment Of Jaw Temporomandibular Joint (Tmj) Dislocation, Uncomplicated   | \$1,191.88                         |
| 21485 Closed Treatment Of Jaw Temporomandibular Joint (Tmj) Dislocation, Oncomplicated   | \$99.48<br>\$954.36                |
| 21490 Open Treatment Of Temporomandibular Dislocation  | \$728.70                           |
| 21497 Interdental Wiring, For Condition Other Than Fracture  | \$506.95                           |
| 21499 Unlisted Orthopedic Procedure, Head  | Price By Report                    |
| 21501 Incision And Drainage, Deep Abscess Or Hematoma;   | \$337.29                           |
| 21502 Incision And Drainage, Deep Abscess Or Hematoma; With Partial Rib Ostectomy  | \$457.77                           |
| 21510 Incision, Deep, With Opening Of Bone Cortex (Eg, For Osteomyelitis Or Bone Abscess);   | \$410.42                           |
| 21550 Excisional Biopsy, Soft Tissues  | \$187.79                           |
| 21552 Biopsy, Soft Tissue Of Neck Or Thorax 3 Cm Or Greater  | \$476.09                           |
| 21554 Biopsy, Soft Tissue Of Neck Or Thorax 5 Cm Or Greater  | \$733.85                           |
| 21555 Excision, Tumor, Soft Tissue Of Neck Or Anterior Thorax, Subcutaneous; Less Than 3 Cm  | \$301.32                           |
| 21556 Excision, Tumor, Soft Tissue Of Neck Or Anterior Thorax, Subfascial (Eg, Intramuscular); Less Than 5 Cm  | \$355.74                           |
| 21557 Removal Of (Less Than 5 Centimeters) Growth Of Neck Or Front Of Chest  | \$861.77                           |
| 21558 Removal Of (5 Centimeters Or Greater) Growth Of Neck Or Front Of Chest 21600 Excision Of Rib, Partial  | \$1,204.22<br>\$510.03             |
| 21601 Removal Of Tumor From Chest Wall Including Ribs  | \$510.02<br>\$1,174.32             |
|  | \$1,174.32                         |
| 21602 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction  | \$1,509.83                         |
| 21602 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction  21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity  |                                    |
| 21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity   | \$1 041 59                         |
|  |                                    |
| 21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity 21610 Costotransversectomy (Separate Procedure)   | \$1,041.59<br>\$601.91<br>\$623.10 |
| 21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity 21610 Costotransversectomy (Separate Procedure) 21615 Excision First And/Or Cervical Rib;   | \$601.91                           |
| 21603 Removal Of Tumor From Chest Wall Including Ribs With Plastic Reconstruction And Removal Of Lymph Nodes From Chest Cavity 21610 Costotransversectomy (Separate Procedure) 21615 Excision First And/Or Cervical Rib; 21616 Excision First And/Or Cervical Rib For Outlet Compression Syndrome Or Other Cause; With Sympathectomy | \$601.91<br>\$623.10               |

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|---|--|--|
|   | Description  Radical Resection Of Sternum; With Mediastinal Lymphadenectomy  | Fee<br>\$1,075.28  |
|   | Hyoid Myotomy And Suspension   | \$1,075.26   |
|   | Division Of Scalenus Anticus; Without Resection Of Cervical Rib  | \$311.49   |
|   | Division Of Scalenus Anticus; With Resection Of Cervical Rib   | \$515.28   |
|   | Release Of Tendons Of Neck Muscle, Open Procedure  | \$446.36   |
|   | Release Of Tendons Of Neck Muscle With Cast Application, Open Procedure  | \$496.56   |
|   | Repair Of Depression Of Breast Bone, Open Procedure  | \$903.16   |
|   | Reconstructive Repair Of Pectus Excavatum Or Carinatum; Minimally Invasive Approach (Nuss Procedure), Without Thoracoscopy   | \$988.39   |
|   | Reconstructive Repair Of Pectus Excavatum Or Carinatum; Minimally Invasive Approach (Nuss Procedure), With Thoracoscopy  | \$1,060.40   |
|   | Closure Of Median Sternotomy Separation With Or Without Debridement (Separate Procedure)   | \$665.55   |
|   | Open Treatment Of Broken Ribs With Insertion Of Hardware, 1-3 Ribs   | \$593.78   |
|   | Open Treatment Of Broken Ribs With Insertion Of Hardware, 4-6 Ribs   | \$713.44   |
|   | Open Treatment Of Broken Ribs With Insertion Of Hardware, 7 Or More Ribs   | \$859.25   |
|   | Closed Treatment Of Sternum Fracture   | \$139.77   |
|   | Open Treatment Of Sternum Fracture With Or Without Skeletal Fixation   | \$496.37   |
|   | Unlisted Procedure, Neck Or Thorax   | Price By Report  |
|   | Biopsy Of Tissue Of Back Or Flank, Superficial   | \$181.56   |
|   | Biopsy Of Tissue Of Back Or Flank, Deep  | \$463.63   |
|   | Excision, Tumor, Soft Tissue Of Back Or Flank  | \$382.15   |
|   | Excision, Tumor, Soft Tissue Of Back Or Flank, Subcutaneous; 3 Cm Or Greater   | \$497.60   |
|   | Excision, Tumor, Soft Tissue Of Back Or Flank, Subfascial (Eg, Intramuscular); Less Than 5 Cm  | \$665.46   |
|   | Excision, Tumor, Soft Tissue Of Back Or Flank, Subfascial (Eg, Intramuscular); 5 Cm Or Greater   | \$738.80   |
|   | Removal (Less Than 5 Centimeters) Tissue Growth Of Back Or Flank   | \$920.97   |
|   | Removal (5 Centimeters Or Greater) Tissue Growth Of Back Or Flank  | \$1,260.22   |
|   | Drainage Of Abscess Of Upper Or Middle Spine, Open Chest Procedure   | \$939.26   |
|   | Drainage Of Abscess Of Lower Spine Or Sacrum, Open Procedure   | \$939.20   |
| 22010   | Granage Granades Grane Granadani, Open Freedad   | Ψ332.10  |
| 22100   | Partial Removal Of Rear Component Of Spine Bone With Bone Tissue Abnormality In 1 Vertebral Segment Of Neck (Cervical Spine)   | \$774.78   |
| 22101   | Partial Removal Of Rear Component Of Spine Bone With Bone Tissue Abnormality In 1 Vertebral Segment Of Upper Back (Thoracic Spine)   | \$771.48   |
|   |  |  |
|   | Partial Removal Of Rear Component Of Spine Bone With Bone Tissue Abnormality In 1 Vertebral Segment Of Lower Back (Lumber Spine)   | \$709.42   |
| 22103   | Partial Removal Of Rear Component Of Spine Bone With Bone Tissue Abnormality From Additional Vertebral Segment Of Spine  | \$118.74   |
|   | Partial Removal Of Front Component Of Spine Bone (Vertebral Body) With Bone Tissue Abnormality In 1 Vertebral Segment Of Neck (Cervical  |  |
| 22110   | Spine)   | \$932.98   |
|   | Partial Removal Of Front Component Of Spine Bone (Vertebral Body) With Bone Tissue Abnormality In 1 Vertebral Segment Of Upper Back  |  |
| 22112   | (Thoracic Spine)   | \$988.41   |
|   | Partial Removal Of Front Component Of Spine Bone (Vertebral Body) With Bone Tissue Abnormality In 1 Vertebral Segment Of Lower Back  |  |
| 22114   | (Lumbar Spine)   | \$988.41   |
| 00440   | Desiries Desiries Communication of Communication (Communication)   | <b></b>  |
|   | Partial Removal Of Front Component Of Spine Bone (Vertebral Body) With Bone Tissue Abnormality In Additional Vertebral Segment Of Spine  | \$121.11   |
| 22206   | Extensive Incision Of Spinal Column (3-Column Osteotomy) In Upper Back (Thoracic Spine) To Correct Deformity   |  |
| 22207   | Extensive Incision Of Spinal Column (3-Column Osteotomy) In 1 Vertebral Segment Of Lower Back (Lumbar Spine) To Correct Deformity  | \$2,441.71   |
|   | Extensive modern of opinior occurring to occurring the residence of the principle of the occurrence of the principle of the occurrence of  |  |
| 22208   | Extensive Incision Of Spinal Column (3-Column Osteotomy) In 1 Additional Vertebral Segment Of Spine  | \$2,104.42   |
|   | Extensive Incision Of Spinal Column (3-Column Osteotomy) In 1 Additional Vertebral Segment Of Spine  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  | \$2,104.42<br>\$560.60   |
|   | Extensive Incision Of Spinal Column (3-Column Osteotomy) In 1 Additional Vertebral Segment Of Spine  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  | \$2,104.42   |
| 22210   |  | \$2,104.42<br>\$560.60   |
| 22210   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15   |
| 22210<br>22212<br>22214   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15   |
| 22210<br>22212<br>22214<br>22216  | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71   |
| 22210<br>22212<br>22214<br>22216<br>22220   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222  | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222  | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately  | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224<br>22224  | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224<br>22226<br>22310   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224<br>22226<br>22310<br>22315  | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment, Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment, Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224<br>22226<br>22310<br>22315<br>22318   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224<br>22226<br>22310<br>22315<br>22318<br>22319  | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224<br>22226<br>22310<br>22315<br>22318<br>22319<br>22325                                     | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach  | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10   |
| 22210 22214 22214 22216 22220 22224 22226 22310 22315 22318 22319 22325 22326   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75   |
| 22210 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224<br>22226<br>22310<br>22315<br>22318<br>22319<br>22325<br>22326<br>22327<br>22328          | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93   |
| 22210<br>22212<br>22214<br>22216<br>22220<br>22222<br>22224<br>22226<br>22310<br>22315<br>22318<br>22319<br>22325<br>22326<br>22327<br>22328          | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86   |
| 22210 22214 22214 22216 22220 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Lower Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach   | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93   |
| 22210 22214 22216 22220 22222 22224 22226 22315 22315 22318 22327 22328 22505   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Lower Spine Bones With Bone Graft, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, P | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93   |
| 22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22326 22327 22328 22505 22510   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated  | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93<br>\$1,814.58   |
| 22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22326 22327 22328 22505 22510   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment, Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated William Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones Accessed Through The Skin Using Imagin | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93<br>\$1,814.58   |
| 22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22326 22327 22328 22505 22510   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones With Bone Graft, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones Accessed Through The S | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93<br>\$1,814.58   |
| 22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22505 22510 22511 22512                               | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical  Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic  Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure)  Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing  Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach  Open Tr | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93<br>\$1,920.95<br>\$723.45   |
| 22210 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22510 22511 22512   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatme | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93<br>\$1,920.95<br>\$723.45   |
| 22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22505 22511 22512                                     | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated With Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones Accessed Through The Skin Using Imaging Guidance In The Lower Spine Area Injec | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93<br>\$1,920.95<br>\$723.45<br>\$6,487.45<br>\$6,487.45<br>\$6,458.55 |
| 22210 22214 22214 22216 22220 22222 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22505 22510 22511 22512 22513 22513 22514 22515 22532 | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Upper Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Noterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Spine Bones Accessed Through The Skin Using Imaging Guidance In The Lower Spine Area Injection Of Bone Cement Into Body Of Middle Spine Bone Accessed Through The Skin Using Ima | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,431.94<br>\$1,519.73<br>\$1,421.89<br>\$312.93<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.10<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93<br>\$1,814.58<br>\$1,920.95<br>\$723.45                             |
| 22210 22212 22214 22216 22220 22224 22226 22310 22315 22318 22319 22325 22326 22327 22328 22510 22511 22513 22514 22515 22532 22533                   | Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Neck (Cervical Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Thoracic Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In 1 Vertebral Segment Of Upper Back (Lumbar Spine) To Correct Deformity  Incision Of Spinal Column (Single Column Osteotomy) In Additional Vertebral Segment Of Spine Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Cervical Osteotomy Of Spine, Anterior Approach, For Correction Of Thoracic Osteotomy Of Spine, Anterior Approach, For Correction Of Lumbar Osteotomy Of Spine, Including Diskectomy, Anterior Approach, Single Vertebral Segment; Each Additional Vertebral Segment (List Separately In Addition To Code For Primary Procedure) Closed Treatment Of Vertebral Body Fracture(S), Without Manipulation, Requiring And Including Casting Or Bracing Closed Treatment Of Broken And/Or Dislocated Spine Bones With Casting And/Or Bracing With Manipulation Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Anterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Upper Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated With Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones, Posterior Approach Open Treatment Of Broken And/Or Dislocated Middle Spine Bones Accessed Through The Skin Using Imaging Guidance In The Lower Spine Area Injec | \$2,104.42<br>\$560.60<br>\$1,574.18<br>\$1,506.15<br>\$1,419.05<br>\$348.71<br>\$1,421.85<br>\$1,519.73<br>\$1,421.85<br>\$272.44<br>\$807.06<br>\$1,421.57<br>\$1,573.16<br>\$1,220.75<br>\$1,464.10<br>\$1,416.86<br>\$266.93<br>\$116.93<br>\$1,920.95<br>\$723.45<br>\$6,487.45<br>\$6,458.55<br>\$3,006.94             |

|  | Description  | Fee  |
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|  | Fusion Of Spine Bones At Base Of Neck, Oral Approach   | \$1,686.44   |
|  | Fusion Of Spine Bones With Removal Of Disc At Upper Spinal Column, Anterior Approach, Complex  | \$1,648.26   |
|  | Fusion Of Spine Bones With Removal Of Disc In Upper Spinal Column Below Second Vertebra Of Neck , Anterior Approach  | \$377.08   |
|  | Fusion Of Spine Bones With Removal Of Disc At Upper Spinal Column, Anterior Approach, Simple Fusion Of Middle Spine Bones With Removal Of Disc, Anterior Approach  | \$1,106.47   |
|  | Fusion Of Spine Bones With Removal Of Disc, Afterior Approach  Fusion Of Spine Bones With Removal Of Disc At Lower Spinal Column, Anterior Approach  | \$1,463.58   |
|  | Fusion Of Spine Bones With Removal Of Disc At Lower Spinal Column, Anterior Approach   | \$1,499.43   |
| 22363  | Arthrodesis, Pre-Sacral Interbody Technique, Including Disc Space Preparation, Discectomy, With Posterior Instrumentation, With Image  | \$312.29   |
| 22506  | Guidance, Includes Bone Graft When Performed, L5-S1 Interspace   | ¢1 7/2 75  |
|  | Fusion Of First Two Upper Spine Bones Of Spinal Column, Posterior Approach   | \$1,743.75<br>\$1,380.26   |
|  | Fusion Of Spine Bones At Skull Base, Posterior Approach  | \$1,320.98   |
|  | Fusion Of Upper Spine Bones, Posterior Or Posterolateral Approach  | \$1,140.83   |
|  | Fusion Of Middle Spine Bones, Posterior Or Posterolateral Approach   | \$1,250.59   |
|  | Fusion Of Lower Spine Bones, Posterior Or Posterolateral Approach  | \$1,555.53   |
|  | Fusion Of Spine Bones, Posterior Or Posterolateral Approach  |  |
|  | Fusion Of Spine Bones With Removal Of Disc, Posterior Approach, Single Interspace  | \$372.93   |
|  | Fusion Of Lower Spine Bones With Removal Of Disc, Posterior Approach, Single Interspace, Each Additional Interspace  | \$1,531.96   |
|  |  | \$273.06   |
| 22633  | Fusion Of Lower Spine Bones With Removal Of Disc, Posterior Or Posterolateral Approach, Single Interspace And Segment  | \$1,799.00   |
| 22224  | Fusion Of Lower Spine Bones With Removal Of Disc, Posterior Or Posterolateral Approach, Single Interspace And Segment, Each Additional   | ¢470.00  |
|  | Interspace And Segment   | \$473.36   |
|  | Fusion Of Spine Bones For Correction Of Deformity, Posterior Approach, Up To 6 Vertebral Segments  | \$1,341.80   |
|  | Fusion Of Spine Bones For Correction Of Deformity, Posterior Approach, 7 To 12 Vertebral Segments  | \$2,072.60   |
|  | Fusion Of Spine Bones For Correction Of Deformity, Posterior Approach, 13 Or More Vertebral Segments   | \$2,512.86   |
|  | Fusion Of Spine Bones For Correction Of Deformity, Anterior Approach, 2 To 3 Vertebral Segments  | \$1,610.71   |
|  | Fusion Of Spine Bones For Correction Of Deformity, Anterior Approach, 4 To 7 Vertebral Segments  | \$1,805.06   |
|  | Fusion Of Spine Bones For Correction Of Deformity, Anterior Approach, 8 Or More Vertebral Segments   | \$1,978.63   |
|  | Fusion Of Spine Bones For Correction Of Hunchback Deformity, Single Or 2 Segments  | \$1,929.36   |
|  | Fusion Of Spine Bones For Correction Of Hunchback Deformity, 3 Or More Segments  | \$2,221.43   |
|  | Exploration Of Spinal Fusion   | \$730.16   |
| 22836  | ·  | \$1,453.65   |
| 22837  | Tethering Of 8 Or More Middle Spine Bones  | \$1,600.81   |
| 22838  | Revision, Replacement, Or Removal Of Middle Spine Tethering  | \$1,621.82   |
| 22840  | Insertion Of Posterior Spinal Instrumentation At Base Of Neck For Stabilization, 1 Interspace  | \$725.41   |
| 22841  | Internal Spinal Fixation By Wiring Of Spinous Processes (List Separately In Addition To Code For Primary Procedure)  | \$0.01   |
| 22842  | Insertion Of Posterior Spinal Instrumentation For Spinal Stabilization, 3 To 6 Vertebral Segments  | \$728.12   |
| 22843  | Insertion Of Posterior Spinal Instrumentation For Spinal Stabilization, 7 To 12 Vertebral Segments   | \$779.11   |
| 22844  | Insertion Of Posterior Spinal Instrumentation For Spinal Stabilization, 13 Or More Vertebral Segments  | \$948.90   |
| 22845  | Insertion Of Anterior Spinal Instrumentation For Spinal Stabilization, 2 To 3 Vertebral Segments   | \$692.22   |
| 22846  | Insertion Of Anterior Spinal Instrumentation For Spinal Stabilization, 4 To 7 Vertebral Segments   | \$719.55   |
| 22847  | Insertion Of Anterior Spinal Instrumentation For Spinal Stabilization, 8 Or More Vertebral Segments  | \$711.26   |
|  | Pelvic Fixation (Attachment Of Caudal End Of Instrumentation To Pelvic Bony Structures) Other Than Sacrum (List Separately In Addition To  |  |
| 22848  | Code For Primary Procedure)  | \$346.26   |
| 22849  | Reinsertion Of Spinal Fixation Device  | \$1,087.64   |
| 22850  | Removal Of Posterior Nonsegmental Spinal Instrumentation   | \$655.66   |
| 22852  | Removal Of Posterior Segmental Spinal Instrumentation  | \$700.93   |
| 22853  | Insertion Of Device Into Intervertebral Disc Space Of Spine And Fusion Of Vertebrae  | \$246.15   |
|  | Insertion Of Device Into Gap Left By Removal Of Part Of Vertebra And Fusion Of Vertebrae   | \$318.66   |
|  | Removal Of Anterior Instrumentation (Eg, Dwyer Device)   | \$976.52   |
|  |  | \$1,585.21   |
|  | Insertion Of Artificial Lower Spine Disc, Anterior Approach  | \$1,590.00   |
|  | Insertion Of Artificial Upper Spine Disc Anterior Approach   | \$437.01   |
|  | Insertion Of Device Into Gap Left By Removal Of Part Of Vertebra   | \$286.55   |
|  | Insertion Of Artificial Disc Between Bones Of Lower Spine, Additional Space  | Price By Report  |
|  | The state of the s | y nopoli   |
|  | Revision With Replacement Of Artificial Upper Spine Disc   | \$1,976.38   |
| 22861  | Revision With Replacement Of Artificial Upper Spine Disc  Revision With Replacement Of Artificial Lower Spine Disc   | \$1,976.38<br>\$1,981.17   |
| 22861<br>22862   | Revision With Replacement Of Artificial Lower Spine Disc   | \$1,981.17   |
| 22861<br>22862<br>22864  | Revision With Replacement Of Artificial Lower Spine Disc<br>Revision Of Artificial Upper Spine Disc, Cervical  | \$1,981.17<br>\$1,767.73   |
| 22861<br>22862<br>22864<br>22865   | Revision With Replacement Of Artificial Lower Spine Disc<br>Revision Of Artificial Upper Spine Disc, Cervical<br>Revision Of Artificial Lower Spine Disc, Lumbar   | \$1,981.17<br>\$1,767.73<br>\$1,934.92   |
| 22861<br>22862<br>22864<br>22865<br>22867  | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression  | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06   |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868   | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression   | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12   |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22869  | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level  | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75   |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22869<br>22870   | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level   | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75<br>\$109.34   |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22869<br>22870<br>22899  | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine   | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75<br>\$109.34<br>Price By Report  |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22869<br>22870<br>22899<br>22900   | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid)  | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75<br>\$109.34<br>Price By Report  |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22869<br>22870<br>22899<br>22900<br>22901  | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater  | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75<br>\$109.34<br>Price By Report<br>\$510.79  |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22870<br>22899<br>22900<br>22901<br>22902  | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm   | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75<br>\$109.34<br>Price By Report<br>\$510.79<br>\$601.06  |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22869<br>22870<br>22899<br>22900<br>22901<br>22902<br>22903  | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater   | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75<br>\$109.34<br>Price By Report<br>\$510.79<br>\$601.06<br>\$445.56  |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22869<br>22870<br>22899<br>22900<br>22901<br>22902<br>22903<br>22904  | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall   | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75<br>\$109.34<br>Price By Report<br>\$510.79<br>\$601.06<br>\$445.56<br>\$466.65  |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22870<br>22890<br>22900<br>22901<br>22902<br>22903<br>22904<br>22905   | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall  | \$1,981.17<br>\$1,767.73<br>\$1,934.92<br>\$946.06<br>\$208.12<br>\$448.75<br>\$109.34<br>Price By Report<br>\$510.79<br>\$601.06<br>\$445.56<br>\$466.65<br>\$943.67                            |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22869<br>22870<br>22890<br>22901<br>22902<br>22903<br>22904<br>22905<br>22999   | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subclascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone  | \$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$446.65 \$943.67 \$1,183.57 Price By Report                                     |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22869<br>22870<br>22900<br>22901<br>22902<br>22903<br>22904<br>22905<br>22909<br>22909<br>22909                                     | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure   | \$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report                                     |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22869<br>22870<br>22900<br>22901<br>22902<br>22903<br>22904<br>22905<br>22909<br>22909<br>22909<br>22900                            | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure)   | \$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report                                     |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22868<br>22869<br>22890<br>22900<br>22901<br>22902<br>22903<br>22904<br>22905<br>22909<br>23000<br>23020<br>23030                   | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Deep Abscess Or Hematoma   | \$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report                                     |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22869<br>22870<br>22890<br>22900<br>22901<br>22902<br>22903<br>22904<br>22905<br>22909<br>23000<br>23030<br>23030                   | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Infected Bursa   | \$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report \$547.08 \$632.33                   |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22869<br>22870<br>22899<br>22900<br>22901<br>22902<br>22903<br>22904<br>22905<br>22909<br>23000<br>23030<br>23030<br>23031<br>23035 | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Deep Abscess Or Hematoma Incision, Bone Cortex (Eg, Osteomyelitis Or Bone Abscess), Shoulder Area  | \$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report                                     |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22869<br>22870<br>22899<br>22900<br>22901<br>22902<br>22903<br>22904<br>22905<br>22909<br>23000<br>23030<br>23030<br>23031<br>23035 | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Infected Bursa   | \$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report \$547.08 \$632.33 \$308.16          |
| 22861<br>22862<br>22864<br>22865<br>22867<br>22869<br>22870<br>22899<br>22900<br>22901<br>22903<br>22904<br>22905<br>22909<br>23030<br>23030<br>23031<br>23035<br>23040          | Revision With Replacement Of Artificial Lower Spine Disc Revision Of Artificial Upper Spine Disc, Cervical Revision Of Artificial Lower Spine Disc, Lumbar Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Additional Level With Open Decompression Insertion Of Stabilizing Or Separating Device Into Lower Spine At Single Level Insertion Of Stabilizing Or Separating Device Into Lower Spine At Second Level Unlisted Procedure, Spine Excision, Abdominal Wall Tumor, Subfascial (Eg, Desmoid) Excision, Tumor, Soft Tissue Of Abdominal Wall, Subfascial (Eg, Intramuscular); 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Abdominal Wall, Subcutaneous; 3 Cm Or Greater Removal (Less Than 5 Centimeters) Tissue Growth In Abdominal Wall Removal (5 Centimeters Or Greater) Tissue Growth In Abdominal Wall Procedure On Abdomen, Muscle Or Bone Removal Of Calcium Deposits At Rotator Cuff Tendons, Open Procedure Capsular Contracture Release (Eg, Sever Type Procedure) Incision And Drainage; Deep Abscess Or Hematoma Incision, Bone Cortex (Eg, Osteomyelitis Or Bone Abscess), Shoulder Area  | \$1,981.17 \$1,767.73 \$1,934.92 \$946.06 \$208.12 \$448.75 \$109.34 Price By Report \$510.79 \$601.06 \$445.56 \$466.65 \$943.67 \$1,183.57 Price By Report \$547.08 \$632.33 \$308.16 \$406.42 |

| Code  | Description  | Fee                      |
|-------|--|--------------------------|
|       | Biopsy Of Tissue Of Shoulder Area, Deep  | \$534.99                 |
| 23071 | Biopsy, Soft Tissue Of Shoulder Area; 3 Cm Or Greater  | \$442.03                 |
|       | Biopsy, Soft Tissue Of Shoulder Area; 5 Cm Or Greater  | \$630.33                 |
|       | Excision, Tumor, Soft Tissue Of Shoulder Area, Subcutaneous; Less Than 3 Cm  | \$362.19                 |
|       | Excision, Tumor, Soft Tissue Of Shoulder Area, Subfascial (Eg, Intramuscular); Less Than 5 Cm  Removal (Less Than 5 Centimeters) Tissue Growth Of Shoulder Area  | \$494.76                 |
|       | Removal (5 Centimeters) Tissue Growth Of Shoulder Area   | \$1,008.82<br>\$1,280.51 |
|       | Arthrotomy, Glenohumeral Joint, Including Biopsy   | \$467.13                 |
|       | Incision To Repair Joints Between Shoulder, Chest And Collar Bones   | \$421.52                 |
|       | Arthrotomy; Glenohumeral Joint, With Synovectomy, With Or Without Biopsy   | \$587.66                 |
|       | Arthrotomy; Sternoclavicular Joint, With Synovectomy, With Or Without Biopsy   | \$463.75                 |
| 23107 | Arthrotomy, Glenohumeral Joint, With Joint Exploration, With Or Without Removal Of Loose Or Foreign Body   | \$605.90                 |
|       | Claviculectomy; Partial  | \$477.37                 |
|       | Claviculectomy; Total  | \$649.50                 |
|       | Acromioplasty Or Acromionectomy, Partial, With Or Without Coracoacromial Ligament Release  | \$632.18                 |
| 23140 | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Clavicle Or Scapula;   | \$485.06                 |
| 22115 | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Clavicle Or Scapula; With Primary Autogenous Graft (Includes Obtaining Graft)  | ¢627.40                  |
|       | Excision or Curettage of Bone Cyst or Benigh Tumor of Clavicle or Scapula; With Homogenous Or Other Nonautogenous Graft  Excision or Curettage of Bone Cyst or Benigh Tumor of Clavicle or Scapula; With Homogenous Or Other Nonautogenous Graft | \$637.48<br>\$572.82     |
|       | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal Humerus;  | \$611.23                 |
| 20100 | Exclusion of Culcutage of Sone Gyst of Sonigh Turner of Freeman Turnerat,  | ψ011.20                  |
| 23155 | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal Humerus; With Primary Autogenous Graft (Includes Obtaining Graft)   | \$729.40                 |
|       | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal Humerus; With Homogenous Or Other Nonautogenous Graft   | \$622.19                 |
|       | Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess),  | \$519.44                 |
|       | Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess),  | \$524.57                 |
|       | Removal Of Dead Upper Arm Bone For Bone Infection In The Upper Portion Or The Bone   | \$700.11                 |
|       | Partial Removal Of Collar Bone For A Bone Infection  | \$607.72                 |
|       | Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Scapula  | \$617.35                 |
|       | Partial Removal Of Upper Portion Upper Arm Bone (Humerus) For Bone Infection Ostectomy Of Scapula, Partial (Eg, Superior Medial Angle)   | \$743.15<br>\$546.03     |
|       | Resection Humeral Head   | \$755.35                 |
|       | Radical Resection Of Tumor; Clavicle   | \$1,356.86               |
|       | Radical Resection Of Tumor; Scapula  | \$1,589.14               |
|       | Radical Resection Of Tumor, Proximal Humerus   | \$1,742.46               |
| 23330 | Removal Of Foreign Body Of Shoulder Joint, Accessed Beneath The Skin   | \$288.29                 |
|       | Removal Of Foreign Body Of Shoulder Joint, Accessed Beneath The Tissue Or Muscle   | \$434.30                 |
|       | Removal Of Prosthesis Of Shoulder  | \$964.67                 |
|       | Removal Of Prosthesis Of Shoulder, Total Shoulder  | \$1,049.92               |
|       | Injection Procedure For Shoulder Arthrography Or Enhanced Ct/Mri Shoulder Arthrography   | \$120.18                 |
|       | Muscle Transfer, Any Type, Shoulder Or Upper Arm; Single   | \$1,161.92               |
|       | Muscle Transfer, Any Type For Paralysis Of Shoulder Or Upper Arm; Multiple Scapulopexy (Eg, Sprengel'S Deformity Or For Paralysis)   | \$1,030.58<br>\$884.57   |
|       | Tenotomy, Shoulder Area; Single Tendon   | \$649.96                 |
|       | Tenotomy, Shoulder Area: Multiple Tendons Through Same Incision  | \$684.42                 |
|       | Repair Of Torn Tendons Of Shoulder (Rotator Cuff), Open Procedure, Acute Or New  | \$831.55                 |
|       | Repair Of Torn Tendons Of Shoulder (Rotator Cuff), Open Procedure, Chronic Or Old  | \$863.46                 |
| 23415 | Coracoacromial Ligament Release, With Or Without Acromioplasty   | \$640.30                 |
| 23420 | Reconstruction Of Complete Shoulder (Rotator) Cuff Avulsion, Chronic (Includes Acromioplasty)  | \$985.98                 |
| 23430 | Tenodesis Of Long Tendon Of Biceps   | \$717.41                 |
|       | Resection Or Transplantation Of Long Tendon Of Biceps  | \$690.12                 |
|       | Reattachment Of Shoulder Joint Capsule Without Bone Transfer   | \$859.50                 |
|       | Reattachment Of Shoulder Joint Capsule And Cartilage Without Bone Transfer With Repair Of Shoulder Rim   | \$901.62                 |
|       | Reattachment Of Shoulder Joint Capsule And Cartilage With Bone Block  Reattachment Of Shoulder Joint Capsule With Bone Transfer (Coracoid Bone)  | \$989.42                 |
|       | Reattachment of Shoulder Joint Capsule With Borle Transfer (Coracold Borle)  Repair Of Shoulder Joint Capsule In The Back Of The Joint   | \$1,074.62<br>\$1,014.53 |
|       | Repair Of Shoulder Joint With Instability In Multiple Directions   | \$1,014.53               |
|       | Arthroplasty, Glenohumeral Joint; Hemiarthroplasty   | \$1,207.53               |
|       | Prosthetic Repair Of Shoulder Joint, Total Shoulder  | \$1,452.13               |
|       | Revision Of Total Shoulder Arthroplasty, Including Allograft When Performed; Humeral Or Glenoid Component  | \$1,616.06               |
|       | Revision Of Total Shoulder Repair, Total Shoulder  | \$1,742.83               |
| 23480 | Incision To Repair Collarbone  | \$747.66                 |
| 23485 | Osteotomy, Clavicle, With Or Without Internal Fixation; With Bone Graft For Nonunion Or Malunion (Includes Obtaining Graft And/Or Necessary Fixation)  | \$959.94                 |
|       | Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate; Clavicle   | \$783.80                 |
|       | Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methylmethacrylate; Proximal Humerus  | \$923.23                 |
|       | Closed Treatment Of Clavicular Fracture; Without Manipulation  | \$224.32                 |
|       | Treatment Of Closed Clavicular Fracture; With Manipulation   | \$337.72                 |
|       | Open Treatment Of Clavicular Fracture, Includes Internal Fixation, When Performed  | \$592.48                 |
|       | Closed Treatment Of Sternoclavicular Dislocation; Without Manipulation  Treatment Of Closed Sternoclavicular Dislocation; With Manipulation  | \$227.49                 |
|       | Treatment Of Closed Sternoclavicular Dislocation; With Manipulation  | \$373.04                 |
|       | Open Treatment Of Sternoclavicular Dislocation, Acute Or Chronic; Open Treatment Of Closed Or Open Sternoclavicular Dislocation, Acute Or Chronic; With Fascial Graft (Includes Obtaining Graft)   | \$529.61<br>\$575.35     |
|       | Closed Treatment Of Acromicclavicular Dislocation; Without Manipulation  | \$225.10                 |
|       | Treatment Of Closed Acromioclavicular Dislocation; With Manipulation   | \$330.41                 |
|       | Open Treatment Of Acromioclavicular Dislocation, Acute Or Chronic;   | \$585.39                 |
|       | ·  | ,                        |
| 23552 | Open Treatment Of Closed Or Open Acromioclavicular Dislocation, Acute Or Chronic; With Fascial Graft (Includes Obtaining Graft)  | \$642.06                 |

| 23570   | Description   | Fee  |
|---|---|--|
|   | Closed Treatment Of Scapular Fracture; Without Manipulation   | \$168.39   |
| 20070   | Global Tradition of Coopera Traditio, William Indiano   | Ψ100.55  |
| 23575   | Closed Treatment Of Scapular Fracture; With Manipulation, With Or Without Skeletal Traction (With Or Without Shoulder Joint Involvement)  | \$385.20   |
|   | Open Treatment Of Scapular Fracture (Body, Glenoid Or Acromion) Includes Internal Fixation, When Performed  | \$840.68   |
|   | Closed Treatment A Fracture Of The Upper End Of The Upper Arm Bone Without Manipulation   | \$338.28   |
|   | Closed Treatment Of A Break Of The Upper Portion Of Upper Arm Bone With Manipulation  | \$439.98   |
|   | Open Treatment Of Broken Upper Arm Bone, Upper End  | \$799.43   |
|   | Open Treatment Of Proximal Humeral (Surgical Or Anatomical Neck) Fracture, Includes Internal Fixation, When Performed, Includes Repair Of   |  |
| 23616   | Tuberosity(S), When Performed; With Proximal Humeral Prosthetic Replacement   | \$1,117.90   |
| 23620   | Closed Treatment Of Greater Humeral Tuberosity Fracture; Without Manipulation   | \$203.78   |
| 23625   | Treatment Of Closed Greater Tuberosity Fracture; With Manipulation  | \$360.43   |
| 23630   | Open Treatment Of Greater Humeral Tuberosity Fracture, Includes Internal Fixation, When Performed   | \$712.77   |
| 23650   | Closed Treatment Of Shoulder Dislocation, With Manipulation; Without Anesthesia   | \$295.01   |
| 23655   | Treatment Of Closed Shoulder Dislocation, With Manipulation; Requiring Anesthesia   | \$279.38   |
| 23660   | Open Treatment Of Acute Shoulder Dislocation  | \$537.56   |
| 23665   | Closed Treatment Of Shoulder Dislocation, With Fracture Of Greater Humeral Tuberosity, With Manipulation  | \$406.16   |
|   | Open Treatment Of Shoulder Dislocation And Broken Upper Arm Bone With A Fracture Of The Upper Arm Bone Boney Prominence Outside Of  |  |
| 23670   | The Joint   | \$793.57   |
| 23675   | Closed Treatment Of Shoulder Dislocation, With Surgical Or Anatomical Neck Fracture, With Manipulation  | \$514.54   |
| 23680   | Open Treatment Of Shoulder Dislocation And Broken Upper Arm Bone With A Fracture Of The Upper Arm Head Or Neck  | \$844.16   |
| 23700   | *Manipulation Under Anesthesia, Including Application Of Fixation Apparatus (Dislocation Excluded)  | \$172.31   |
| 23800   | Arthrodesis, Glenohumeral Joint;  | \$932.95   |
| 23802   | Arthrodesis, Glenohumeral Joint; With Autogenous Graft (Includes Obtaining Graft)   | \$1,162.21   |
| 23900   | Interthoracoscapular Amputation (Forequarter)   | \$1,250.83   |
|   | Removal Of Tendons, Ligaments, And Muscles Of Shoulder  | \$1,017.46   |
| 23921   | Removal Of Tendons, Ligaments, And Muscles Of Shoulder, Secondary Closure   | \$434.28   |
| 23929   | Unlisted Procedure, Shoulder  | Price By Report  |
| 23930   | Incision And Drainage; Deep Abscess Or Hematoma   | \$251.94   |
| 23931   | Incision And Drainage, Upper Arm Or Elbow Area; Bursa   | \$214.35   |
| 23935   | Ncision, Deep, With Opening Of (Eg, Cortex For Osteomyelitis Or Bone Abscess);  | \$470.72   |
|   | Incision Of Elbow With Exploration, Drainage, Or Removal Of Foreign Body  | \$436.25   |
|   | Arthrotomy Of The Elbow, With Capsular Excision For Capsular Release (Separate Procedure)   | \$673.09   |
|   | Biopsy Of Soft Tissue Of Upper Arm Or Elbow, Superficial  | \$249.77   |
|   | Biopsy of Soft Tissue Of Upper Arm Or Elbow, Deep   | \$584.82   |
|   | Biopsy, Soft Tissue Of Upper Arm Or Elbow Area; 3 Cm Or Greater   | \$429.09   |
|   | Biopsy, Soft Tissue Of Upper Arm Or Elbow Area; 5 Cm Or Greater   | \$736.94   |
|   | Excision, Tumor, Soft Tissue Of Upper Arm Or Elbow Area, Subcutaneous; Less Than 3 Cm   | \$474.37   |
|   | Excision, Tumor, Soft Tissue Of Upper Arm Or Elbow Area, Subfascial (Eg, Intramuscular); Less Than 5 Cm   | \$413.34   |
|   | Removal (Less Than 5 Centimeters) Tissue Growth Of Upper Arm Or Elbow   | \$929.65   |
|   | Removal (5 Centimeters Or Greater) Tissue Growth Of Upper Arm Or Elbow  | \$1,186.45   |
|   | · · · · · · · · · · · · · · · · · · ·   |  |
|   | Arthrotomy, Elbow; With Synovial Biopsy Only  Arthrotomy, Elbow; With Joint Evaluation, With Or Without Biopsy, With Or Without Bonoval Of Earnign Body   | \$388.22   |
|   | Arthrotomy, Elbow; With Joint Exploration, With Or Without Biopsy, With Or Without Removal Of Foreign Body  | \$466.13   |
|   | Arthrotomy, Elbow; With Synovectomy   | \$569.32   |
|   | Excision, Olecranon Bursa   | \$319.91   |
|   | Removal Of Upper Arm Bone Cyst Or Growth Without A Bone Graft   | \$543.12   |
|   | Excision Or Curettage Of Bone Cyst Or Benign Tumor, Humerus; With Primary Autogenous Graft (Includes Obtaining Graft)   | \$706.05   |
|   | Removal Of Upper Arm Bone Cyst Or Growth With A Bone Graft  |  |
| 24120   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process;  | \$783.27   |
|   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Primary Autogenous Graft  | \$783.27<br>\$491.90   |
|   | 1   | \$491.90   |
| 24125   | (Includes Obtaining Graft)  |  |
|   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other   | \$491.90<br>\$572.40   |
| 24126   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft   | \$491.90<br>\$572.40<br>\$597.08   |
| 24126<br>24130  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69   |
| 24126<br>24130<br>24134   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone   | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24   |
| 24126<br>24130<br>24134<br>24136  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;   | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70   |
| 24126<br>24130<br>24134<br>24136<br>24138   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;   | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection   | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Excision, Radial Head Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process   | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process   | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42<br>\$580.62   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42<br>\$580.62<br>\$1,189.23   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150<br>24152<br>24155  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42<br>\$580.62<br>\$1,189.23<br>\$1,392.14   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150<br>24152<br>24155  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck   | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42<br>\$580.62<br>\$1,189.23<br>\$1,392.14<br>\$1,212.61   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150<br>24152<br>24155<br>24160   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42<br>\$580.62<br>\$1,189.23<br>\$1,392.14<br>\$1,212.61<br>\$775.85   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150<br>24152<br>24160<br>24164   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint Hardware   | \$491.90<br>\$572.40<br>\$597.08<br>\$471.69<br>\$683.24<br>\$580.70<br>\$633.37<br>\$644.88<br>\$546.42<br>\$580.62<br>\$1,189.23<br>\$1,392.14<br>\$1,212.61<br>\$775.85<br>\$1,135.85   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150<br>24152<br>24160<br>24164<br>24200  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint Hardware  Removal Of Hardware Of Forearm Bone At Elbow Joint  | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41  |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150<br>24152<br>24155<br>24160<br>24164<br>24200<br>24201  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint (Arthrectomy)  Removal Of Hardware Of Forearm Bone At Elbow Joint  Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin  | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150<br>24152<br>24164<br>24200<br>24201<br>24220   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint Hardware  Removal Of Hardware Of Forearm Bone At Elbow Joint  Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin  Removal Of Foreign Body, Upper Arm Or Elbow Area  | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16  |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24150<br>24152<br>24150<br>24164<br>24200<br>24201<br>24200<br>24300   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg. For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint (Arthrectomy)  Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin  Removal Of Foreign Body, Upper Arm Or Elbow Area  Injection Procedure For Elbow Arthrography  Manipulation, Elbow, Under Anesthesia  | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24150<br>24152<br>24155<br>24160<br>24200<br>24201<br>24200<br>24201<br>24200<br>24300<br>24300   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck; Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process; Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure) Radical Resection Of Tumor, Shaft Or Distal Humerus Radical Resection Of Tumor, Radial Head Or Neck Resection Of Elbow Joint (Arthrectomy) Removal Of Elbow Joint (Arthrectomy) Removal Of Hardware Of Forearm Bone At Elbow Joint Removal Of Foreign Body Of Upper Arm Or Elbow Area Injection Procedure For Elbow Arm Or Elbow Area Injection Procedure For Elbow Arthrography Manipulation, Elbow, Under Anesthesia Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330)  | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68  |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24150<br>24155<br>24160<br>24164<br>24200<br>24201<br>24200<br>24301<br>24301<br>24305  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint Hardware  Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin  Removal Of Foreign Body, Upper Arm Or Elbow Area  Injection Procedure For Elbow Arthrography  Manipulation, Elbow, Under Anesthesia  Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330)  Tendon Lengthening, Upper Arm Or Elbow, Each Tendon  | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94                                     |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24150<br>24155<br>24155<br>24160<br>24200<br>24201<br>24202<br>24300<br>24301<br>24305<br>24305<br>24310  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint Hardware  Removal Of Hardware Of Forearm Bone At Elbow Joint  Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin  Removal Of Foreign Body, Upper Arm Or Elbow Area  Injection Procedure For Elbow Arthrography  Manipulation, Elbow, Under Anesthesia  Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330)  Tendon Lengthening, Upper Arm Or Elbow, Each Tendon  Incision Of Tendon Located From Elbow To Shoulder, Open Procedure  | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94 \$427.02                            |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24150<br>24152<br>24155<br>24160<br>24164<br>24200<br>24201<br>24202<br>24300<br>24301<br>24305<br>24310<br>24320   | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Shaft Or Distal Humerus  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint Hardware  Removal Of Hardware Of Forearm Bone At Elbow Joint  Removal Of Foreign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin  Removal Of Foreign Body, Upper Arm Or Elbow Area  Injection Procedure For Elbow Arthrography  Manipulation, Elbow, Under Anesthesia  Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330)  Tendon Lengthening, Upper Arm Or Elbow, Each Tendon  Incision Of Tendon Located From Elbow To Shoulder, Open Procedure  Tenoplasty, With Muscle Transfer, With Or Without Free Graft, Elbow To Shoulder, Single (Seddon-Brookes Type Procedure)   | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94 \$427.02 \$417.10                   |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24150<br>24152<br>24152<br>24155<br>24160<br>24164<br>24200<br>24201<br>24202<br>24300<br>24301<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305<br>24305 | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint Hardware  Removal Of Foreign Body of Upper Arm Or Elbow Area, Accessed Beneath The Skin  Removal Of Foreign Body, Upper Arm Or Elbow Area  Injection Procedure For Elbow Arthrography  Manipulation, Elbow, Under Anesthesia  Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330)  Tendon Lengthening, Upper Arm Or Elbow, Each Tendon  Incision Of Tendon Located From Elbow, To Shoulder, Open Procedure  Tenoplasty, With Muscle Transfer, With Or Without Free Graft, Elbow To Shoulder, Single (Seddon-Brookes Type Procedure)  Flexor-Plasty, Elbow, (Eg., Steindler Type Advancement);   | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$7775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94 \$447.10 \$7712.07                 |
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With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg, For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint (Arthrectomy)  Removal Of Hardware Of Forearm Bone At Elbow Joint  Removal Of Horeign Body Of Upper Arm Or Elbow Area, Accessed Beneath The Skin  Removal Of Foreign Body, Upper Arm Or Elbow Area  Injection Procedure For Elbow Arthrography  Manipulation, Elbow, Under Anesthesia  Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330)  Tendon Lengthening, Upper Arm Or Elbow, Each Tendon  Incision Of Tendon Located From Elbow To Shoulder, Open Procedure  Tenoplasty, With Muscle Transfer, With Or Without Free Graft, Elbow To Shoulder, Single (Seddon-Brookes Type Procedure)  Flexor-Plasty, Elbow, (Eg, Steindler Type Advancement);  Relocation Of Forearm Tendons With Advancement Of The Extensor Tendons | \$491.90 \$572.40 \$597.08 \$471.69 \$683.24 \$580.70 \$633.37 \$644.88 \$546.42 \$580.62 \$1,189.23 \$1,392.14 \$1,212.61 \$775.85 \$1,135.85 \$661.41 \$153.03 \$517.16 \$137.94 \$395.68 \$685.94 \$427.02 \$417.10 \$712.07 \$656.92 |
| 24126<br>24130<br>24134<br>24136<br>24138<br>24140<br>24145<br>24147<br>24149<br>24155<br>24155<br>24160<br>24200<br>24201<br>24200<br>24301<br>24305<br>24300<br>24301<br>24320<br>24331<br>24332  | (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Head Or Neck Of Radius Or Olecranon Process; With Homogenous Or Other Nonautogenous Graft  Excision, Radial Head  Removal Of Dead Upper Arm Bone For Bone Infection In The Main Portion And Lower Portion Or The Bone  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Radial Head Or Neck;  Sequestrectomy (Eg., For Osteomyelitis Or Bone Abscess), Olecranon Process;  Partial Removal Of Upper Arm Bone (Humerus) For Bone Infection  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Radial Head Or Neck  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis), Olecranon Process  Radical Resection Of Capsule, Soft Tissue, And Heterotopic Bone, Elbow, With Contracture Release (Separate Procedure)  Radical Resection Of Tumor, Radial Head Or Neck  Resection Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint (Arthrectomy)  Removal Of Elbow Joint Hardware  Removal Of Foreign Body of Upper Arm Or Elbow Area, Accessed Beneath The Skin  Removal Of Foreign Body, Upper Arm Or Elbow Area  Injection Procedure For Elbow Arthrography  Manipulation, Elbow, Under Anesthesia  Muscle Or Tendon Transfer, Any Type, Single (Excluding 24330)  Tendon Lengthening, Upper Arm Or Elbow, Each Tendon  Incision Of Tendon Located From Elbow, To Shoulder, Open Procedure  Tenoplasty, With Muscle Transfer, With Or Without Free Graft, Elbow To Shoulder, Single (Seddon-Brookes Type Procedure)  Flexor-Plasty, Elbow, (Eg., Steindler Type Advancement);   | \$491.90 \$572.40 \$597.08 \$471.60 \$683.24 \$580.70 \$633.37 \$644.88 \$5546.42 \$580.60 \$1,189.23 \$1,392.14 \$1,212.67 \$775.88 \$1,135.88 \$661.47 \$153.00 \$517.16 \$137.94 \$395.66 \$685.94 \$427.02 \$4417.11 \$712.07        |

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| 24343 Repair OI Flugured Biospis OT Triceps Tendon, Disald, With Or, Without Tendon Graft 24344 Repair OI Ligament On The Quiside Off The Elbow With Local Tissue 24345 Repair OI Ligament On The Quiside Off The Elbow With Local Tissue 24346 Repair OI Ligament On The Unside Off The Elbow With Local Tissue 24346 Repair OI Ligament On The Inside Off The Elbow With Local Tissue 24346 Repair OI Ligament On The Inside Off The Elbow With Local Tissue 24347 Incision Of Tendon To Repair Elbow, John Anderson Tissue 24357 Incision Off Tendon To Repair Elbow, John Anderson Tissue 24357 Incision Off Tissue And/OF Bone At Elbow With Tradon Repair, Open Procedure 24358 Removal Of Tissue And/OF Bone At Elbow With Tradon Repair, Open Procedure 24359 Removal Of Tissue And/OF Bone At Elbow With Tradon Repair, Open Procedure 24350 Repair OI Elbow Joint With Interposition Of Tissue 24350 Repair OI Elbow Joint With And Implant And Florous Tissue Reconstruction 24363 Artiroplasty, Elbow, With Delat Humerus And Provins Ultrary Prov   |
| 23434 Repair Of Ligament On The Outside Of The Ebow With A Cred Tissue   5714   23434 Repair Of Ligament On The Unside Of The Ebow With A Tendon Graft   5898   23434 Repair Of Ligament On The Inside Of The Ebow With A Tendon Graft   5704   23436 Repair Of Ligament On The Inside Of The Ebow With A Tendon Graft   5706   23436 Repair Of Tissue And Of Bone At Ebow, Open Procedure   5808   23436 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23438 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23439 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23439 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23432 Repair Of Ebow John With Replacement Of The Endo Of The Upper Arm Bone At The Ebow   5808   23432 Repair Of Tissue Bone Repair (Anthroplasty), User Arm Of Everant Components   51,309   23430 Repair Of Tissue Bone Repair (Anthroplasty), Usper Arm Of Everant Components   51,309   23431 Revision Of Tissue Bow Repair (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Vibrounity (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Normalino Of Mulpian (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Normalino Of Mulpian (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Normalino Of Mulpian (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Normalino Of Mulpian (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mu   |
| 23434 Repair Of Ligament On The Outside Of The Ebow With A Cred Tissue   5714   23434 Repair Of Ligament On The Unside Of The Ebow With A Tendon Graft   5898   23434 Repair Of Ligament On The Inside Of The Ebow With A Tendon Graft   5704   23436 Repair Of Ligament On The Inside Of The Ebow With A Tendon Graft   5706   23436 Repair Of Tissue And Of Bone At Ebow, Open Procedure   5808   23436 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23438 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23439 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23439 Removal Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23430 Repair Of Tissue And Of Bone At Ebow With Tendon Repair, Open Procedure   5808   23432 Repair Of Ebow John With Replacement Of The Endo Of The Upper Arm Bone At The Ebow   5808   23432 Repair Of Tissue Bone Repair (Anthroplasty), User Arm Of Everant Components   51,309   23430 Repair Of Tissue Bone Repair (Anthroplasty), Usper Arm Of Everant Components   51,309   23431 Revision Of Tissue Bow Repair (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Vibrounity (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Normalino Of Mulpian (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Normalino Of Mulpian (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Normalino Of Mulpian (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mulpibe Of Normalino Of Mulpian (Anthroplasty), Usper Arm Of Everant Components   51,305   234410 Mu   |
| 24346 Repair Of Ligament On The Inside Of The Ebow With Local Tissue 24346 Repair Of Ligament On The Inside Of The Ebow With Local Tissue 24346 Repair Of Ligament On The Inside Of The Ebow With Local Tissue 24367 Incision Of Tenden To Repair Ebow John, An Tenden Graft 24367 Incision Of Tenden To Repair Ebow John An Tenden Graft 24368 Removal Of Tissue And/OF Bone At Ebow Work The Ebow Open Procedure 24369 Removal Of Tissue And/OF Bone At Ebow With Tenden Repair, Open Procedure 24369 Repair Of Tissue And/OF Bone At Ebow With Tenden Repair, Open Procedure 24369 Repair Of Ebow Join With Interposition Of Tissue 24369 Repair Of Ebow Join With Interposition Of Tissue 24360 Repair Of Ebow Join With And Implant And Fibrous Tissue Reconstruction 24361 Repair Of Ebow Join With And Implant And Fibrous Tissue Reconstruction 24363 Anthropiatsy, Ebow; With Distal Humens And Proximal Ulanar Proximed Ulanar Proxi   |
| 24348   Rapair OT Ligament On The Inside Of The Elbow With A Tendon Graft   \$1,005   24347   Insisten OT Flandran To Repair Ebow John, Accessed Through The Skin   \$1,405   24348   Repair OT Flasure And OT In Inside Of The Elbow With A Tendon Repair, Open Procedure   \$2526   24358   Removal OT Tissue And/OT Bone At Ebow, Open Procedure   \$2526   24358   Removal OT Tissue And/OT Bone At Ebow, Open Procedure   \$2526   24359   Repair OT Ebow Joint With Interposition OT Tissue   \$2522   24361   Repair OT Ebow Joint With Interposition OT Tissue   \$2522   24361   Repair OT Ebow Joint With And Implant And Florous Tissue Reconstruction   \$2528   24362   Repair OT Ebow Joint With And Implant And Florous Tissue Reconstruction   \$2528   24362   Repair OT Ebow Joint With And Implant And Florous Tissue Reconstruction   \$2528   24365   Joint Repair (Antroplasty) Forearm Bone On The Thurnb Side (Radius) At The Ebow Without An Implant   \$2527   24366   Joint Repair (Antroplasty) Forearm Bone On The Thurnb Side (Radius) At The Ebow Without And Implant   \$2527   24370   Ravision OT Total Ebow Rapair (Antroplasty), Upper Arm Or Forearm Components   \$1,309   24371   Ravision OT Total Ebow Rapair (Antroplasty), Upper Arm And Forearm Components   \$1,308   24371   Ravision OT Total Ebow Rapair (Antroplasty), Upper Arm And Forearm Components   \$1,308   24400   Sabetoniny, Humerus, With Or Without Internal Fization   \$1,505   24400   Sabetoniny, Humerus, With Or Without Internal Fization   \$1,505   24400   Sabetoniny, Humerus, With District (Eg. Cobitus Varius Or Valgus, District (Eg. Cobitus Varius Or                                 |
| 24346 Repair Of Ligament On The Inside Of The Elbow With A Tendon Graft   24357 Incision Of Tendon To Repair Elbow John, Accessed Through The Skin   3447   24358 Removal Of Tissue And/OF Bone At Elbow With Tendon Repair, Open Procedure   5865   24359 Removal Of Tissue And/OF Bone At Elbow With Tendon Repair, Open Procedure   5865   24359 Repair Of Elbow Joint With Interposition Of Tissue   5862   24359 Repair Of Elbow Joint With Replacement Of The Endo Of The Upper Arm Bone At The Elbow   5816   24352 Repair Of Elbow Joint With Replacement Of The Endo Of The Upper Arm Bone At The Elbow   5816   24352 Repair Of Elbow Joint With And Implant And Fibrous Tissue Reconstruction   5863   24356 Joint Repair (Arthroplasty) Forearm Bone On The Thurnb Side (Radius) At The Elbow With And Implant   58627   24356 Joint Repair (Arthroplasty) Forearm Bone On The Thurnb Side (Radius) At The Elbow With And Implant   58627   24356 Joint Repair (Arthroplasty) Forearm Bone On The Thurnb Side (Radius) At The Elbow With And Implant   58627   24356 Joint Repair (Arthroplasty) Loper Arm And Forearm Components   51,390   24430   24350   243   |
| 24358 [Romoval Of Tesudo n To Repair Elbow Joint, Accessed Through The Skin 24368 [Romoval Of Tissue And/OF Bone At Elbow, Open Procedure 24368 [Removal Of Tissue And/OF Bone At Elbow, Open Procedure 24368 [Repair Of Tebow Joint With Interposition Of Tissue 24368 [Repair Of Elbow Joint With Interposition Of Tissue 24368 [Repair Of Elbow Joint With Interposition Of Tissue 24368 [Repair Of Elbow Joint With Interposition Of Tissue 24368 [Repair Of Elbow Joint With And Implant And Fibrous Tissue Reconstruction 24368 [Joint Repair (Anthroplasty) Foream Bone On Tine Thurnh Side (Radius) Al The Elbow Without An Implant 24368 [Joint Repair (Anthroplasty) Foream Bone On Tine Thurnh Side (Radius) Al The Elbow Without An Implant 24368 [Joint Repair (Anthroplasty) Foream Bone On Tine Thurnh Side (Radius) Al The Elbow Without An Implant 24368 [Joint Repair (Anthroplasty) Foream Bone On Tine Thurnh Side (Radius) Al The Elbow Without And Implant 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Of Foream Components 24370 [Revision Of Total Elbow Repair (Anthroplasty), Upper Am Office Anthroperous Bone Graft (Induced Sobtaining Graft) 24370 [Revision Of Nonution Of Malurinon, Humerue; With Insoft Of Other Autogenous Bone Graft (Induced Sobtaining Graft) 24470 [Revision Of  |
| 24358 Removal Of Tissue And/Or Bone At Elbow, Open Procedure 24369 Removal Of Tissue And/Or Bone At Elbow (With Tendon Repair, Open Procedure) 24369 Repair Of Elbow, John With Interposition Of Tissue 24369 Repair Of Elbow, John With Interposition Of Tissue 24361 Repair Of Elbow, John With Replacement Of The Endo Of The Upper Arm Bone At The Elbow 24363 Repair Of Elbow, John With And Implant And Fibrous Tissue Reconstruction 24363 Indropalsy, Elbow, With Disbatt Humerus And Proximal Unary Prossitetic Replacement (Eg. Total Elbow) 24363 Alfropalsy, Elbow, With Disbatt Humerus And Proximal Unary Prossitetic Replacement (Eg. Total Elbow) 24363 Indropalsy, Elbow, With Disbatt Humerus And Proximal Unary Brosshetic Replacement (Eg. Total Elbow) 24366 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Ebow Without An Implant 24366 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Ebow Without An Implant 24366 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Ebow Without An Implant 24366 Joint Repair (Arthroplasty), Upper Arm And Forearm Components 24377 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm And Forearm Components 24378 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm And Forearm Components 24410 Multiple Selectionies With Realignment On Intermedullary Red (Schield Type Procedure) 24410 Multiple Selectionies With Realignment On Intermedullary Red (Schield Type Procedure) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Gart (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Gart (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Gart (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Gart (Eg. Compression Technique, Etc) 24430 Repair Of Nonunion Or Malunion, Humerus; Without Methymethacrylate, Humeral Shaft 24450 Eccompression Fasciotumy, Forearm, With Brachial Artery Exploration 24450 Eccompression Fasciot   |
| 24398   Removal Of Tissue And/Or Bone At Elbow With Tendon Repair, Open Procedure   \$865  |
| 24368   Repair Of Elbow Joint With Interposition Of Tissue   |
| 24368   Repair Of Elbow Joint With Interposition Of Tissue   |
| Ageair Of Eibow Joint With Replacement Of The Endo Of The Upper Arm Bone At The Eibow   \$915   24968 Repair Of Eibow Joint With And Impliant And Fibrous Tissues Reconstruction   \$963   24968 John Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At the Eibow Without An Implant   \$587   24966 John Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At the Eibow With And Implant   \$587   24966 John Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At the Eibow With And Implant   \$587   24966 John Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At the Eibow With And Implant   \$587   24967 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components   \$1,598   24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components   \$1,598   24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components   \$1,598   24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components   \$1,598   24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components   \$1,598   24970 Revision Of Total Eibow Repair (Arthroplasty), Upper Arm On Forearm Components   \$1,598   24970 Multiple Osteotomies With Realignment On Intramedullary Rod (Sofield Type Procedure)   \$981   24970 Repair Of Noruminor Of Malurion, Humerus, Without Graft (Eg. Compression Technique, Etic)   \$1,093   24970 Repair Of Noruminor Of Malurion, Humerus, With Iliac Of Other Arusgenous Bone Graft (Includes Obtaining Graft)   \$1,093   24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus)   \$1,093   24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus)   \$1,093   24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus)   \$1,093   24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus   \$1,093   24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus   \$1,093   24970 Hemiepiphyseal Arrest (Eg. Cubitus Varus Of Valgus, Distal Humerus                                |
| 24932 Repair Of Elbow Joint With And Implant And Fibrous Tissue Reconstruction   \$963   24936 Althroplasty, Elbow With Distal Humens And Proximal Uniar Prosthetic Replacement (Eg., Total Elbow)   \$1,308   24936 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Elbow Without An Implant   \$587   24936 Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Elbow With And Implant   \$582   24936 Revision Of Total Elbow Repair (Arthroplasty). Upper Arm Or Forearm Components   \$1,398   24377 Revision Of Total Elbow Repair (Arthroplasty). Upper Arm And Forearm Components   \$1,398   24400 Disteotiony, Humenus, With Or Without Internal Fuscition   \$1,400   24410 Disteotiony, Humenus, With Or Without Internal Fuscition   \$1,595   24410 Disteotiony, Humenus, With Or Without Internal Fuscition   \$3,500   24420 Disteotions With Reaginment On Intramedullary Role (Sofield Type Procedure)   \$3,901   24420 Disteotions With Reaginment On Intramedullary Role (Sofield Type Procedure)   \$3,901   24420 Disteotions With Reaginment On Intramedullary Role (Sofield Type Procedure)   \$3,902   24430 Repair Of Norunion Or Malunion, Humerus, With Illica Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,065   24430 Repair Of Norunion Or Malunion, Humerus, With Illica Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,065   24430 Repair Of Norunion Or Malunion, Humerus, With Illica Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,065   24430 Repair Of Norunion Or Malunion, Humerus, With Illica Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,062   24430 Repair Of Norunion Or Malunion, Humerus, With Illica Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,062   24430 Repair Of Norunion Or Malunion, Humerus, With Illica Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,062   24430 Repair Of Norunion Or Malunion, Humerus, With Illica Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,062   24430 Repair Of Norun                              |
| 24363 Arthroplasty, Elbow With Distal Humerus And Proximal Ulnar Prosthetic Replacement (Eq. Total Elbow)         \$1,308           24365 Joint Repair (Arthroplasty) Foream Bone on The Thumb Side (Radius) At The Ebow Without An Implant         \$587           24365 Joint Repair (Arthroplasty) Foream Bone on The Thumb Side (Radius) At The Ebow With And Implant         \$587           24370 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm Or Forearm Components         \$1,390           24371 Revision Of Total Ebow Repair (Arthroplasty), Upper Arm On Forearm Components         \$1,595           24470 Obsteotomics Without Internal Fixation         \$754           24471 Oll Mulpic Deteotomics Without Internal Fixation         \$754           24420 Obsteotomics Without Internal Fixation         \$754           24420 Osteotomics Without Internal Fixation         \$754           24420 Osteotomics Without Internal Fixation         \$754           24420 Repair Of Norminon Or Makinon, Humerus: Without Graft (Eg. Compression Technique, Etc)         \$1,063           24430 Repair Of Norminon Or Makinon, Humerus: Without Graft (Eg. Compression Technique, Etc)         \$1,062           24440 Mental Polyphyseal Arras (Eg. Cubitus Various Or Valgus), Distal Humerus         \$616           24440 Mental Polyphyseal Arras (Eg. Cubitus Various Or Valgus), Distal Humerus         \$572           24450 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration         \$561           24440 Hemile  |
| 24365   Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Elbow Without An Implant   \$5257   24366   Joint Repair (Arthroplasty) Forearm Bone On The Thumb Side (Radius) At The Elbow With And Implant   \$5252   24370   Revision Of Total Elbow Repair (Arthroplasty). Upper Arm Or Forearm Components   \$1,390   24371   Revision Of Total Elbow Repair (Arthroplasty). Upper Arm And Forearm Components   \$1,390   244000 Osteotomy, Humerus, With Or Without Internal Fixation   \$754   244100   Discotomies With Realignment On Intramedullary Rod (Sofield Type Procedure)   \$981   24420   Steotomies With Realignment On Intramedullary Rod (Sofield Type Procedure)   \$980   24430   Repair Of Norunico Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc)   \$1,065   24430   Repair Of Norunico Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc)   \$1,065   24437   Repair Of Norunico Or Malunion, Humerus; With Ilac Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,093   24470   Hemiepiphyseal Arrest (Eg. Cublitus Varus Or Valgus, Distal Humerus)   \$1,065   24439   Decompression Fasotiomy, Forearm, With Brachial Artery Exploration   \$570   24498   Decompression Fasotiomy, Forearm, With Brachial Artery Exploration   \$570   24498   Prophylactic Treatment (Nalling, Pinning, Plating Or Wiring), With Or Without Methylmethacylate, Humeral Shaft   \$788   24500   Closed Treatment Of A Break Of The Mid Portion Of Upper Arm Bone With Manipulation   \$3345   24501   Open Treatment Of Broken Upper Arm Bone, Mid-Pontion   \$400   24502   Closed Treatment Of Broken Upper Arm Bone, Mid-Pontion   \$400   24503   Closed Treatment Of Humeral Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation   \$400   24503   Without Shiro / Skeletal Traction   \$400   24504   Closed Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar   \$400   24505   Closed Treatment Of H                             |
| 3436   Joint Repair (Anthroplasty) Forearm Bone On The Thumb Side (Radius) At The Elbow With And Implant   \$325   34370   Revision Of Total Elbow Repair (Anthroplasty), Upper Arm Or Forearm Components   \$1,399   34371   Revision Of Total Elbow Repair (Anthroplasty), Upper Arm Or Forearm Components   \$1,585   34400   Steotomy, Humerus, With Or Without Internal Fixation   \$525   34410   Multiple Osteotomies With Realignment On Intramedullary Rod (Sofield Type Procedure)   3981   34420   Osteoplasty, Humerus (Eg., Shortening Or Lengthening)   3981   34430   Repair Of Nonunion Or Malunion, Humerus, Withou Graft (Eg. Compression Technique, Etc)   3982   34430   Repair Of Nonunion Or Malunion, Humerus, Withou Graft (Eg. Compression Technique, Etc)   3982   34430   Repair Of Nonunion Or Malunion, Humerus, Withou Graft (Eg. Compression Technique, Etc)   3982   34440   Memberphyseal Arrest (Eg., Cubitus Varva Or Valgus, Distal Humerus)   34440   Memberphyseal Arrest (Eg., Cubitus Varva Or Valgus, Distal Humerus)   34440   Memberphyseal Arrest (Eg., Cubitus Varva Or Valgus, Distal Humerus)   34440   Memberphyseal Arrest (Radius)   34440   34440   Memberphyseal Arrest (Radius)   34440   34440   Memberphyseal Arrest (Radius)   34440   3   |
| 14370   Revision Of Total Ebow Repair (Arthroplasty), Upper Arm And Forearm Components   \$1,390   24471   Revision Of Total Ebow Repair (Arthroplasty), Upper Arm And Forearm Components   \$1,595   24400   Osteotomy, Humerus, With Or Without Internal Fixation   \$754   24410   Osteotomies With Realignment On Intramedullary Rod (Scried Type Procedure)   \$980   24420   Osteotomies With Realignment On Intramedullary Rod (Scried Type Procedure)   \$980   24430   Repair Of Norunicon Or Malunicon, Humerus, Withou Graft (Eg. Compression Technique, Etc)   \$1,065   24438   Repair Of Norunicon Or Malunicon, Humerus, Withou Graft (Eg. Compression Technique, Etc)   \$1,065   24438   Repair Of Norunicon Or Malunicon, Humerus, With Ilaco Or Other Autogenous Bone Graft (Includes Obtaining Graft)   \$1,093   24470   Hemiepiphyseal Arrest (Eg. Cublitus Varus Or Valgus, Distal Humerus)   \$1,065   24439   Decompression Fasciotomy, Forearm, With Brachal Interfex Exploration   \$570   24439   Prophylactic Treatment (Naling, Pinning, Pilating Or Wiring), With Or Without Methylmethacrylate, Humeral Shaft   \$780   24430   Closed Treatment of Alberta (Parture of The Mid Portion Of The Upper Arm Bone Without Manipulation   \$344   24505   Closed Treatment Of Broken Upper Arm Bone With Manipulation   \$395   24515   Open Treatment Of Broken Upper Arm Bone Mith Manipulation   \$395   24530   Closed Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Intercondylar Extension; With Manipulation   \$400   24536   Without Skin Or Skeletal Traction   \$400   24536   Closed Treatment Of Humeral Epicondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar   24536   Closed Treatment Of Humeral Epicondylar Fracture, Medial                            |
| 194311   Revision Of Total Ebow Repair (Anthroplasty), Upper Arm And Forearm Components   \$1,595  |
| 194311   Revision Of Total Ebow Repair (Anthroplasty), Upper Arm And Forearm Components   \$1,595  |
| 24410   Multiple Osteotomey, Humerus, With Or Without Internal Fixation   \$754  |
| Multiple Osteotomies With Realignment On Intramedullary Rod (Sofield Type Procedure)   5961  |
| Sepair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc)   \$1,085  |
| Repair Of Nonunion Or Malunion, Humerus; Without Graft (Eg. Compression Technique, Etc)  44435 Repair Of Nonunion Or Malunion, Humerus; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  5510   |
| 24470 Hemiepiphyseal Arrest (Eg. Cubitus Varus Or Valgus, Distal Humerus)  \$1.033 24480 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration  \$570 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration  \$570 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration  \$572 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration  \$572 24498 Decompression Fasciotomy, Forearm, With Brachial Artery Exploration  \$578 24498 Deportment (Naling, Pinning, Plating Or Wiring), With Or Without Methylmethacrylate, Humeral Shaft  \$578 24500 Closed Treatment of Har Facture Of The Mid Portion Of Upper Arm Bone With Manipulation  \$5385 24515 Open Treatment Of A Break Of The Mid Portion Of Upper Arm Bone With Manipulation  \$5395 24515 Open Treatment Of Stopracondylar Or Transcondylar Humeral Fracture, With Or Without Cerclage And/Or Locking Screws  \$673 24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation  Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation With Or Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation With Or Supracondylar Or Transcondylar Fracture, With Or Without Intercondylar Extension; With Manipulation With Or Present Or Browth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Supracondylar Practure, Medial Or Lateral; Without Manipulation  \$5750 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation  \$5246 Extension  \$5862 24576 Open Treatment Of Humeral Epicon                                  |
| 24496   Decompression Fasciotomy, Forearm, With Brachial Artery Exploration   \$570  |
| 24496   Decompression Fasciotomy, Forearm, With Brachial Artery Exploration   \$570  |
| 24498   Decompression Fasciotomy, Forearm, With Brachial Artery Exploration   \$570  |
| 24498 Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring), With Or Without Methylmethacrylate, Humeral Shaft 24505 Closed Treatment Of A Break Of The Mid Portion Of The Upper Arm Bone Without Manipulation \$395 24515 Open Treatment Of Broken Upper Arm Bone, Mid-Portion \$395 24515 Open Treatment Of Broken Upper Arm Bone, Mid-Portion \$873 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerciage And/Or Locking Screws \$873 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerciage And/Or Locking Screws \$873 24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction \$468 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar 24545 Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24566 (Sused Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$975 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$251 24565 (Soed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Nuthout Manipulation \$390 24576 (Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed \$750 24576 (Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed \$750 24576 (Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed \$750 24577 (Open Treatment Of Humeral Condylar Fracture, Medial                                   |
| 24500   Closed Treatment A Fracture Of The Mid Portion Of The Upper Arm Bone Without Manipulation   \$384   24505   Closed Treatment Of A Break Of The Mid Portion Of Upper Arm Bone With Manipulation   \$387   24516   Open Treatment Of Broken Upper Arm Bone, Mid-Portion   \$873   24516   Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws   \$873   24516   Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation   \$400   Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or   24535   Without Skin Or Skeletal Traction   \$488   24538   Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin   \$488   24538   Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin   \$488   24546   Extension   \$488   2  |
| 24505 Closed Treatment Of A Break Of The Mid Portion Of Upper Arm Bone With Manipulation 24515 Open Treatment Of Broken Upper Arm Bone, Mid-Portion 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws 8873 24500 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction S488 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Extension Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation S206 24566 Extension S216 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation S237 24565 Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; With Manipulation S2466 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin S662 24576 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed S750 24576 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed S750 S2476 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed S750 S2476 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed S750 S2476 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; With Manipulation S24876 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; With Man   |
| 24515 Open Treatment Of Broken Upper Arm Bone, Mid-Portion 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws 8873 24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Sketleal Traction 3488 24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar 24545 Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24546 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation 3506 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Without Manipulation 3506 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 3750 3750 3750 3750 3750 3750 3750 3750   |
| 24516 Treatment Of Humeral Shaft Fracture, With Insertion Of Intramedullary Implant, With Or Without Cerclage And/Or Locking Screws  24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation  Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or Without Skin Or Skeletal Traction  Without Skin Or Skeletal Traction  S468  24538 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar S870  24546 Extension  Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  42565 Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  5266 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation  5267 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  527 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  528 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  529 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  520 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  521 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  522 Extension  523 Den Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation  523 Den Treatment Of Closed Closed Section Sectio   |
| 24530 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation \$400 Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or Without Skin Or Skeletal Traction \$468 S4530 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin Or Skeletal Traction \$4680 Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Stetension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Sextension Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$523 Open Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 Insertion Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$506 Insertion Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$506 Insertion Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$506 Insertion Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$506 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$500 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$500 Open Treatment Of Humeral Condylar Fracture, Wedial Or Lateral; Without Manipulation \$500 Open Treatment Of Humeral Condylar Fracture, Wedial Or Lateral; Without Manipulation \$500 Open Treatment Of Humeral Condylar Fracture, Wedial Or Lateral; Without Manipulation \$500 Open Treatment Of Broken And/Or Dislocated Upper Or Lateral; Without Manipulation, Accessed Through The Skin \$500 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$500 Open Treatment                               |
| Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; Without Manipulation  Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or  Without Skin Or Skeletal Traction  \$468  24535 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar  \$870  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar  \$870  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar  \$870  24566 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; With Manipulation  \$231  24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation  \$24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin  \$24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  \$24576 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  \$24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation  \$24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  \$24580 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; With Manipulation  \$24580 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Includes Internal Fixation, When Performed  \$3775  24581 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin  \$3870  \$3 |
| Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction  24548 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Extension  Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  \$975  24566 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  \$266 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin  \$662  24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation, When Performed  \$750  24576 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  \$24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation  \$24577 Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  \$24577 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  \$24578 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  \$3399  24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed  \$775  24586 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin  \$987  24690 Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant  \$987  24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia  \$988  24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia  \$988  24690 Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocatio                                 |
| Closed Treatment Of Supracondylar Or Transcondylar Humeral Fracture, With Or Without Intercondylar Extension; With Manipulation, With Or 24535 Without Skin Or Skeletal Traction  24548 Insertion Of Hardware To Growth Plate Or Broken Upper Arm Bone At Elbow, Accessed Through The Skin  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Extension  Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Extension  Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  \$975  24566 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  \$266 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin  \$662  24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation, When Performed  \$750  24576 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation  \$24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; Without Manipulation  \$24577 Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  \$24577 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  \$24578 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  \$3399  24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed  \$775  24586 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin  \$987  24690 Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant  \$987  24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia  \$988  24690 Treatment Of Closed Elbow Dislocation; Without Anesthesia  \$988  24690 Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocatio                                 |
| 24535   Without Skin Or Skeletal Traction   \$468  |
| Same   |
| Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; Without Intercondylar Stression Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar Systemsion Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral, Without Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$375 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$256 24615 Open Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  Includes Internal Fixation, When Performed   |
| 24545 Extension Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24546 Extension 24546 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation, When Performed 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation 24577 Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; With Manipulation 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral; With Manipulation 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 24588 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 31,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24606 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed  24608 Includes Internal Fixation, When Performed  25609   |
| Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar 24566 Extension \$975  24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231  24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506  24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662  24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750  24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Without Manipulation \$244  24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral, With Manipulation \$399  24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399  24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399  24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612  24588 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097  24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$3987  24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256  24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$256  24615 Open Treatment Of Acute Or Chronic Elbow Dislocation \$766  Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689  |
| Open Treatment Of Humeral Supracondylar Or Transcondylar Fracture, Includes Internal Fixation, When Performed; With Intercondylar \$975 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Without Manipulation \$244 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral, Without Manipulation \$3399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$3775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$256 24605 Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689   |
| 24546 Extension \$975 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$622 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$244 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$3987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689   |
| 24560 Closed Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral; Without Manipulation \$231 24565 Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation \$506 24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin \$662 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$11,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$226 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Acute Or Chronic Elbow Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689   |
| Treatment Of Closed Epicondylar Fracture, Medial Or Lateral; With Manipulation  24566 Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin  24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed  24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation  24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation  24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed  24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed  24580 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin  24581 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow  24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant  24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia  24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia  24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia  24606 Open Treatment Of Acute Or Chronic Elbow Dislocation  Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  24620 Manipulation  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  8439 Includes Internal Fixation, When Performed  S506  |
| 24566   Insertion Of Hardware To Broken Upper Arm Bone At Elbow With Manipulation, Accessed Through The Skin   \$662   24575   Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed   \$750   24576   Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation   \$244   24577   Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation   \$399   24579   Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed   \$775   24582   Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin   \$612   24586   Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow   \$1,097   24587   Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant   \$987   24600   Treatment Of Closed Elbow Dislocation; Without Anesthesia   \$256   24605   Treatment Of Closed Elbow Dislocation; Requiring Anesthesia   \$326   Open Treatment Of Acute Or Chronic Elbow Dislocation   \$766   Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With   \$439   Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),   \$439   Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),   \$439   Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),   \$439   Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),   \$439   Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),   \$439   Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of U                                |
| 24575 Open Treatment Of Humeral Epicondylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$750 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$244 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689   |
| 24576 Closed Treatment Of Humeral Condylar Fracture, Medial Or Lateral; Without Manipulation \$349 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation \$399 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed \$775 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin \$612 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow \$1,097 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant \$987 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689   |
| 24577 Treatment Of Closed Condylar Fracture, Medial Or Lateral; With Manipulation 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed 2575 24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With 24620 Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689   |
| 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed  24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin  24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow  24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant  24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia  24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia  24615 Open Treatment Of Acute Or Chronic Elbow Dislocation  Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  24620 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  3439 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  3439 Includes Internal Fixation, When Performed  3589  |
| 24579 Open Treatment Of Humeral Condylar Fracture, Medial Or Lateral, Includes Internal Fixation, When Performed  24582 Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin  24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow  24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant  24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia  24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia  24615 Open Treatment Of Acute Or Chronic Elbow Dislocation  Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  24620 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  3439 Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  3439 Includes Internal Fixation, When Performed  3589  |
| 24582   Insertion Of Hardware To Broken Upper Arm Bone At Shoulder With Manipulation, Accessed Through The Skin   \$612  |
| 24586 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow  24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant  24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia  24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia  24615 Open Treatment Of Acute Or Chronic Elbow Dislocation  Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  24620 Manipulation  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  Includes Internal Fixation, When Performed  \$689  |
| 24587 Open Treatment Of Broken And/Or Dislocated Upper Or Lower Arm Bones At Elbow With Implant  24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia  24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia  24615 Open Treatment Of Acute Or Chronic Elbow Dislocation  Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  24620 Manipulation  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  [S439 Includes Internal Fixation, When Performed]  S689  |
| 24600 Treatment Of Closed Elbow Dislocation; Without Anesthesia \$256 24605 Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Uppen Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), Includes Internal Fixation, When Performed \$689  |
| Treatment Of Closed Elbow Dislocation; Requiring Anesthesia \$326  24615 Open Treatment Of Acute Or Chronic Elbow Dislocation \$766  Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  44620 Manipulation Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  Includes Internal Fixation, When Performed \$689  |
| 24615 Open Treatment Of Acute Or Chronic Elbow Dislocation  Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  Manipulation  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  24635 Includes Internal Fixation, When Performed  \$689   |
| Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  439  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  Includes Internal Fixation, When Performed  \$689  |
| Closed Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), With  439  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  Includes Internal Fixation, When Performed  \$689  |
| 24620 Manipulation \$439  Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head),  24635 Includes Internal Fixation, When Performed \$689   |
| Open Treatment Of Monteggia Type Of Fracture Dislocation At Elbow (Fracture Proximal End Of Ulna With Dislocation Of Radial Head), 24635 Includes Internal Fixation, When Performed \$\$89   |
| 24635 Includes Internal Fixation, When Performed \$689   |
|  |
| 24640 Uclosed Treatment Of Dislocated Forearm Bone Of Elbow, Child \$110   |
|  |
| 24650 Closed Treatment Of Radial Head Or Neck Fracture; Without Manipulation \$253   |
| 24655 Closed Treatment Of Broken Forearm (Radius) Bone At The Elbow Area On The Outside Part Of The Arm With Manipulation \$308  |
| 24665 Open Treatment Of The Forearm Bone On The Thumb Side Of The Forearm (Radius Bone) In The Elbow Region \$630  |
| Open Treatment Of Radial Head Or Neck Fracture, Includes Internal Fixation Or Radial Head Excision, When Performed; With Radial Head   |
| 24666 Prosthetic Replacement \$745   |
|  |
| 24670 Closed Treatment Of Ulnar Fracture, Proximal End (Eg, Olecranon Or Coronoid Process[Es]); Without Manipulation \$203   |
| 24675 Closed Treatment Of Broken Forearm (Ulna)Bone At The Elbow Area On The Inside Or Back Part Of The Arm With Manipulation \$435  |
| 24685 Open Treatment Of The Forearm Bone On The Small Finger Side Of The Forearm (Ulna Bone) In The Elbow Region \$690   |
| 24800 Fusion Of Elbow Joint Without Bone Graft From The Patient \$761  |
|  |
| 24802 Fusion Of Elbow Joint With Bone Graft From The Patient \$911   |
|  |
| 24900 Amputation, Arm Through Humerus; With Primary Closure \$703  |
| 24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$669  |
| 24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$539   |
| 24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$740  |
| 24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$539   |
| 24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$740  |
| 24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$74024931Amputation, Arm Through Humerus; With Implant\$84524935Stump Elongation\$1,120   |
| 24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$74024931Amputation, Arm Through Humerus; With Implant\$84524935Stump Elongation\$1,12024940Cineplasty, Upper Extremity, Complete Procedure\$1,567  |
| 24900       Amputation, Arm Through Humerus; With Primary Closure       \$703         24920       Amputation At Upper Arm Bone, Open Procedure       \$669         24925       Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision       \$539         24930       Amputation, Arm Through Humerus; Reamputation       \$740         24931       Amputation, Arm Through Humerus; With Implant       \$845         24935       Stump Elongation       \$1,120         24940       Cineplasty, Upper Extremity, Complete Procedure       \$1,567         24999       Unlisted Procedure, Humerus Or Elbow       Price By Rep  |
| 24900Amputation, Arm Through Humerus; With Primary Closure\$70324920Amputation At Upper Arm Bone, Open Procedure\$66924925Amputation, Arm Through Humerus; Secondary Closure Or Scar Revision\$53924930Amputation, Arm Through Humerus; Reamputation\$74024931Amputation, Arm Through Humerus; With Implant\$84524935Stump Elongation\$1,12024940Cineplasty, Upper Extremity, Complete Procedure\$1,567  |

|   | Description  | Fee  |
|---|--|--|
|   | Description Incision Of Tissue Of Forearm And/Or Wrist Muscle Compartment On One Side Of The Forearm To Relieve Pressure, Without Removal Of   | ree  |
| 25020   | ·  | \$522.93   |
|   |  | ·  |
|   | Incision Of Tissue Of Forearm And/Or Wrist Muscle Compartment On One Side Of The Forearm To Relieve Pressure, With Removal Of Tissue   | \$1,149.74   |
|   | Incision Of Tissue Of Forearm And/Or Wrist Muscle Compartment On Both Sides Of The Forearm To Relieve Pressure, Without Removal Of   |  |
| 25024   |  | \$714.99   |
|   | Incision Of Tissue Of Forearm And/Or Wrist Muscle Compartment On Both Sides Of The Forearm To Relieve Pressure, With Removal Of  | <b>0.4.000.07</b>  |
| 25025   |  | \$1,068.67   |
|   | Incision And Drainage; Deep Abscess Or Hematoma  | \$490.47   |
|   | Incision And Drainage, Forearm And/Or Wrist; Bursa Incision, Deep, Bone Cortex, Forearm And/Or Wrist (Eg, Osteomyelitis Or Bone Abscess)   | \$341.70<br>\$557.62   |
|   | Arthrotomy, Radiocarpal Or Midcarpal Joint, With Exploration, Drainage, Or Removal Of Foreign Body   | \$521.46   |
|   | Biopsy Of Tissue Of Forearm And/Or Wrist, Superficial  | \$246.49   |
|   | Biopsy Of Tissue Of Forearm And/Or Wrist, Deep   | \$338.96   |
|   | Biopsy, Soft Tissue Of Forearm And/Or Wrist; 3 Cm Or Greater   | \$449.83   |
|   | Biopsy, Soft Tissue Of Forearm And/Or Wrist; 3 Cm Or Greater   | \$490.63   |
|   | Excision, Tumor, Soft Tissue Of Forearm And/Or Wrist Area, Subcutaneous; Less Than 3 Cm  | \$365.75   |
|   | Excision, Tumor, Soft Tissue Of Forearm And/Or Wrist Area, Subfascial (Eg, Intramuscular); Less Than 3 Cm  | \$476.07   |
|   | Removal (Less Than 3 Centimeters) Tissue Growth At Forearm And/Or Wrist  | \$806.94   |
|   | Removal (3 Centimeters Or Greater) Tissue Growth At Forearm And/Or Wrist   | \$1,044.87   |
|   | Incision To Repair Or Release Wrist Joint Covering   | \$413.14   |
|   | Arthrotomy, Wrist Joint; With Biopsy   | \$325.12   |
|   | Arthrotomy, Wrist Joint; With Joint Exploration, With Or Without Biopsy, With Or Without Removal Of Foreign Body   | \$417.73   |
|   | Incision Into Wrist Joint With Removal Of Joint Lining Tissue  | \$450.92   |
| 25107   | Arthrotomy, Distal Radioulnar Joint Including Repair Of Triangular Cartilage, Complex  | \$542.86   |
| 25109   | Excision Of Tendon, Forearm And/Or Wrist, Flexor Or Extensor, Each   | \$494.82   |
| 25110   | Excision, Lesion Of Tendon Sheath  | \$373.82   |
| 25111 F   | Removal Of Cyst At Wrist, Initial Or Primary   | \$336.07   |
|   | Removal Of Cyst At Wrist, Recurrent  | \$399.17   |
|   | Removal Of Fluid-Filled Sac (Bursa) Of Wrist Joint Lining Or Forearm Tendon, On The Under Side Of The Wrist (Flexor Tendons)   | \$660.51   |
|   | Removal Of Fluid-Filled Sac (Bursa) Of Wrist Joint Lining Or Forearm Tendon, On The Top Side Of The Wrist Extensor Tendons)  | \$557.12   |
| 25118   | Synovectomy, Extensor Tendon Sheath, Wrist, Single Compartment;  | \$395.40   |
| 25119 I   | Removal Of Lining Of Tendon Covering Of Wrist With Removal Of The End Of The Forearm Bone On The Small Finger Side Of The Wrist  | \$463.86   |
| 25120   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Radius Or Ulna (Excluding Head Or Neck Of Radius And Olecranon Process);   | \$515.96   |
|   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Radius Or Ulna (Excluding Head Or Neck Of Radius And Olecranon Process); With  | Ψοισίου  |
|   | Primary Autogenous Graft (Includes Obtaining Graft)  | \$547.93   |
|   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Radius Or Ulna (Excluding Head Or Neck Of Radius And Olecranon Process); With  | •  |
| 25126 I   | Homogenous Or Other Nonautogenous Graft  | \$551.54   |
| 25130 F   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Carpal Bones;  | \$419.36   |
| 25125   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Carpal Bones; With Primary Autogenous Graft (Includes Obtaining Graft)   | ¢£47.00  |
|   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Carpal Bones; With Homogenous Or Other Nonautogenous Graft  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Carpal Bones; With Homogenous Or Other Nonautogenous Graft   | \$517.02<br>\$444.78   |
|   | Sequestrectomy (Eq. For Osteomyelitis Or Bone Abscess);  | \$480.89   |
|   | Partial Removal Of Forearm Bone On The Small Finger Side For Bone Infection  | \$523.45   |
|   | Partial Removal Of Forearm Bone On The Thumb Side For Bone Infection   | \$538.62   |
|   | Radical Resection Of Tumor, Radius Or Ulna   | \$1,324.01   |
|   | Removal Of Wrist Bone, One Wrist Bone Not Specified  | \$443.11   |
|   | Carpectomy; All Bones Or Proximal Row  | \$570.69   |
|   | Radial Styloidectomy (Separate Procedure)  | \$401.38   |
| 25240   | Partial Removal Of The Forearm Bone On The Small Finger Side At The Wrist Area   | \$398.33   |
| 25246 I   | Injection Procedure For Wrist Arthrography   | \$142.25   |
|   | Exploration With Removal Of Deep Foreign Body, Forearm Or Wrist  | \$363.72   |
|   | Removal Of Wrist Prosthesis, Simple  | \$492.37   |
|   | Removal Of Wrist Prosthesis, Complicated   | \$658.23   |
|   | Manipulation, Wrist, Under Anesthesia  | \$397.81   |
|   | Repair Of Tendon Or Muscle Of Forearm And/Or Wrist, Primary  | \$572.10   |
|   | Repair Of Tendon Or Muscle Of Forearm And/Or Wrist, Secondary  | \$584.16   |
|   | Repair Of Forearm And/Or Wrist Tendon Or Muscle On The Underside Of The Wrist (Flexor) With Graft  | \$690.01   |
|   | Removal Of Upper Arm Bone Cyst Or Growth   | \$384.80   |
|   | Repair Of Forearm And/Or Wrist Tendon Or Muscle On The Top Of The Wrist (Extensor), Secondary  | \$515.52   |
|   | Repair Of Forearm And/Or Wrist Tendon Or Muscle On The Top Of The Wrist (Extensor) With Graft  Repair, Tendon Sheath, Extensor, Forearm And/Or Wrist, With Free Graft (Includes Obtaining Graft) (Eg, For Extensor Carpi Ulnaris   | \$611.95   |
|   | Subluxation)   | \$618.51   |
|   |  |  |
| 25275   | engthening Or Shortening Of Flexor Or Extensor Tendon, Single, Each Tendon   |  |
| 25275 S<br>25280 L  | Lengthening Or Shortening Of Flexor Or Extensor Tendon, Single, Each Tendon  Incision Of Tendon Of Forearm And/Or Wrist. Open Procedure  | \$522.88<br>\$318.19   |
| 25275 S<br>25280 L<br>25290 I   | Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure   | \$318.19   |
| 25275 S<br>25280 L<br>25290 I<br>25295  | Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon  | \$318.19<br>\$395.23   |
| 25275 \$ 25280 L 25290 L 25295 7 25300 A  | Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure   | \$318.19<br>\$395.23<br>\$634.05   |
| 25275 \$ 25280 L 25290 L 25295 7 25300 A 25301 A  | Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone   | \$318.19<br>\$395.23   |
| 25275 \$ 25280 L 25290 L 25295 7 25300 A 25301 A 25310 7  | Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone Anchoring Of Extending Tendon Of Fingers To Wrist Bone  | \$318.19<br>\$395.23<br>\$634.05<br>\$591.77<br>\$636.02                         |
| 25275 \$ 25280 \$\text{L}\$ 25290 \$\text{T}\$ 25295 \$\text{T}\$ 25300 \$\text{A}\$ 25310 \$\text{T}\$ 25312 \$\text{T}\$        | Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone Anchoring Of Extending Tendon Of Fingers To Wrist Bone Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; Each Tendon  | \$318.19<br>\$395.23<br>\$634.05<br>\$591.77                                     |
| 25275 \$ 25280 \$\text{L}\$ 25290 \$\text{T}\$ 25295 \$\text{T}\$ 25300 \$\text{\$\sigma}\$ 25310 \$\text{T}\$ 25315 \$\text{F}\$ | Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure  Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon  Anchoring Of Flexing Tendon Of Fingers To Wrist Bone  Anchoring Of Extending Tendon Of Fingers To Wrist Bone  Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; Each Tendon  Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; With Tendon Graft(S) (Includes Obtaining Graft), Each Tendon  | \$318.19<br>\$395.23<br>\$634.05<br>\$591.77<br>\$636.02<br>\$656.95<br>\$702.89 |
| 25275 \$ 25280 L 25290 7 25295 7 25300 7 25310 7 25312 7 25316 6  | Incision Of Tendon Of Forearm And/Or Wrist, Open Procedure Tenolysis, Single Flexor Or Extensor Tendon, Each Tendon Anchoring Of Flexing Tendon Of Fingers To Wrist Bone Anchoring Of Extending Tendon Of Fingers To Wrist Bone Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; Each Tendon Tendon Transplantation Or Transfer, Flexor Or Extensor, Single; With Tendon Graft(S) (Includes Obtaining Graft), Each Tendon Flexor Origin Slide (Eg, For Cerebral Palsy, Volkmann Contracture), Forearm And/Or Wrist; | \$318.19<br>\$395.23<br>\$634.05<br>\$591.77<br>\$636.02<br>\$656.95             |

| Code  | Description   | Fee                  |
|-------|---|----------------------|
| 25335 | Transposition And Realignment Of Hand Over Ulna With Or Without Removal Of Bone Or Bones, And With Or Without Tendon Transfer Or Advancement (Riordon Type Operation)   | \$860.23             |
|       | Reconstruction For Stabilization Of Unstable Distal Ulna Or Distal Radioulnar Joint, Secondary By Soft Tissue Stabilization (Eg, Tendon Transfer, Tendon Graft Or Weave, Or Tenodesis) With Or Without Open Reduction Of Distal Radioulnar Joint    | \$813.41             |
|       | Incision Or Wedge Of Forearm Bone (Radius) On The Thumb Side Of The Forearm Towards The Wrist Area  | \$620.37             |
|       | Incision Or Wedge Of Forearm Bone (Radius) On The Thumb Side Of The Forearm In The Mid Forearm Region   | \$699.28             |
|       | Incision Or Wedge Of Forearm Bone (Ulna) On The Small Finger Side Of The Forearm  | \$602.81             |
|       | Incision Or Wedge Of Both Forearm Bones (Ulna And Radius)   | \$928.84             |
|       | Incisions Or Wedges Of One Or Both Forearm Bones (Ulna And Radius) With Insertion Of A Rod Inside The Bone  | \$922.54             |
|       | Multiple Osteotomies. With Realignment On Intramedullary Rod (Sofield Type Procedure); Radius And Ulna  | \$868.64             |
|       | Osteoplasty, Radius Or Ulna; Shortening   | \$795.47             |
|       | Osteoplasty, Radius Or Ulna; Lengthening With Autogenous Bone Graft  Osteoplasty, Radius Or Ulna; Lengthening With Autogenous Bone Graft  Osteoplasty, Radius Or Ulna; Lengthening With Autogenous Bone Graft                                       | \$905.99             |
|       | Osteoplasty, Radius And Ulna; Shortening  | \$921.61             |
|       | Osteoplasty, Radius And Ulna; Lengthening With Autogenous Bone Graft  | \$1,023.82           |
|       | Osteoplasty, Carpal Bone, Shortening  | \$797.07             |
|       | Repair Of Nonunion Or Malunion, Radius Or Ulna; Without Graft (Eg, Compression Technique, Etc)  | \$815.50             |
|       | Repair Of Nonunion Or Malunion, Radius Or Ulna; With Autograft (Includes Obtaining Graft)   | \$945.86             |
|       | Repair Of Nonunion Or Malunion, Radius And Ulna; Without Graft (Eg, Compression Technique, Etc)   | \$881.31             |
|       | Repair Of Norunion Or Malunion, Radius And Ulna; With Autograft (Includes Obtaining Graft)  | \$1,057.33           |
|       | Repair Of Northinon of Matchion, Nacious And Offia, With Autogrant (modules obtaining Grant)  Repair Of Defect With Autogenous Bone Graft; Radius Or Ulna   | \$877.59             |
|       |   |                      |
|       | Repair Of Defect With Autogenous Bone Graft; Radius And Ulna  | \$1,018.25           |
|       | Insertion Of Vascular Pedicle Into Carpal Bone (Eg., Harii Procedure)   | \$669.99             |
|       | Repair Of Non-Healed Wrist Bone Other Than (Scaphoid Or Navicular)  | \$719.26             |
|       | Repair Of Non-Healed Wrist Bone, Scaphoid Or Navicular At The Base Of The Thumb  Arthroplasty Or Replacement Of The End Of The Engagement On The Thumb Side At The Wrist Level  | \$808.25             |
|       | Arthroplasty Or Replacement Of The End Of The Forearm Bone On The Thumb Side At The Wrist Level   | \$854.44             |
|       | Arthroplasty Or Replacement Of The End Of The Forearm Bone On The Small Finger Side At The Wrist Level  | \$743.17             |
|       | Arthroplasty Or Replacement Of Wrist Bone, One Wrist Bone (Scaphoid Or Navicular Bone)  | \$718.37             |
|       | Arthroplasty Or Replacement Of Wrist Bone, One Wrist Bone (Lunate Bone)   | \$759.45             |
|       | Arthroplasty Or Replacement Of Wrist Bone, One Wrist Bone (Trapezium Bone)  | \$660.23             |
|       | Arthroplasty Or Replacement Of The Entire Wrist Joint   | \$1,064.95           |
|       | Arthroplasty, Interposition, Intercarpal Or Carpometacarpal Joints  | \$847.91             |
|       | Arthroplasty With Removal Of Implant  | \$943.09             |
|       | Stapling Of Growth Plate Of Either Of The Two Main Forearm Bones  | \$567.91             |
|       | Stapling Of Growth Plate Of Both Of The Two Main Forearm Bones  | \$669.99             |
|       | Stabilization Of Forearm Bone On The Thumb Side (Radius)  | \$657.90             |
|       | Stabilization Of Forearm Bone On The Small Finger Side (Ulna)   | \$675.82             |
| 25492 | Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate; Radius And Ulna   | \$826.70             |
|       | Closed Treatment Of Broken Forearm Bone (Radius) At The Mid Portion On The Thumb Side Of The Arm Without Manipulation   | \$253.34             |
| 25505 | Closed Treatment Of Broken Forearm Bone (Radius) At The Mid Portion On The Thumb Side Of The Arm With Manipulation  | \$359.68             |
| 25515 | Open Treatment Of The Shaft Of The Forearm Bone On The Thumb Side Of The Forearm (Radius Bone)  | \$690.07             |
| 25520 | Closed Treatment Of Broken Forearm And Dislocated Wrist Bones   | \$499.56             |
| 25525 | Open Treatment Of Radial Shaft Fracture, Includes Internal Fixation, When Performed, And Closed Treatment Of Distal Radioulnar Joint Dislocation (Galeazzi Fracture/ Dislocation), Includes Percutaneous Skeletal Fixation, When Performed          | \$802.98             |
|       | Open Treatment Of The Shaft Of The Forearm Bone On The Thumb Side Of The Forearm (Radius Bone) Associated With A Dislocation At The   |                      |
|       | Wrist, Includes Internal Hardware   | \$872.19             |
|       | Closed Treatment Of Broken Forearm Bone (Ulna) At The Mid Portion On The Small Finger Side Of The Arm Without Manipulation  | \$183.39             |
|       | Closed Treatment Of Broken Forearm Bone (Ulna) At The Mid Portion On The Small Finger Side Of The Arm With Manipulation   | \$359.49             |
|       | Open Treatment Of The Shaft Of The Forearm Bone On The Small Finger Side Of The Forearm, Ulna Bone  | \$675.51             |
| 25560 | Closed Treatment Of Both Forearm Bones (Ulna And Ulna) At The Mid Portion Without Manipulation  | \$276.13             |
|       | Treatment Of Closed Radial And Ulnar Shaft Fractures; With Manipulation   | \$565.78             |
| 25574 | Open Treatment Of Broken One Forearm Bone   | \$668.62             |
|       | Open Treatment Of Broken Both Forearm Bones   | \$857.88             |
| 25600 | Closed Treatment Of Broken Forearm (Radius) Bone At The Wrist Area On The Thumb Side Of The Wrist Without Manipulation  | \$303.52             |
| 2560F | Treatment Of Closed Distal Radial Fracture (Eg, Colles Or Smith Type) Or Epiphyseal Separation, With Or Without Fracture Of Ulnar Styloid; With Manipulation  | \$559.61             |
|       | Insertion Of Hardware To Lower Forearm Bone Broken Or Growth Plate Separation, Accessed Through The Skin  | \$671.11             |
|       | Open Treatment Of Distal Radial Extra-Articular Fracture Or Epiphyseal Separation, With Internal Fixation   |                      |
|       | Open Treatment Of Distal Radial Extra-Articular Fracture Or Epiphyseal Separation; With Internal Fixation Of 2 Fragments  | \$732.70<br>\$937.60 |
|       |   | \$827.60             |
|       | Open Treatment Of Distal Radial Intra-Articular Fracture Or Epiphyseal Separation; With Internal Fixation Of 3 Or More Fragments  Closed Treatment Of Broken Wrist Bone (Carpal) (Navicular) Near The Thumb Side Of The Wrist, Without Manipulation | \$1,055.88           |
|       |   | \$213.62             |
|       | Closed Treatment Of Broken Wrist Bone (Carpal) (Navicular) Near The Thumb Side Of The Wrist, With Manipulation  Once Treatment Of Broken Wrist (Carpal) Report Page 18 Thumb And Wrist (Navigular)  | \$440.69             |
| 25628 | Open Treatment Of Broken Wrist (Carpal) Bone, Between The Thumb And Wrist (Navicular)   | \$634.92             |
| 25630 | Closed Treatment Of Broken Wrist Bone (Carpal) Other Than The Navicular Bone Near The Thumb Side Of The Wrist, Without Manipulation   | \$211.71             |
| 25635 | Closed Treatment Of Broken Wrist Bone (Carpal) Other Than The Navicular Bone Near The Thumb Side Of The Wrist, With Manipulation  | \$438.21             |
|       | Open Treatment Of Broken Other Wrist (Carpal) Bone, Than The Bone Between The Thumb And Wrist (Navicular)   | \$570.94             |
|       | Closed Treatment of Ulnar Styloid Fracture  | \$229.07             |
|       | Insertion Of Hardware Broken Bone Of Forearm At Wrist, Accessed Through The Skin  | \$479.07             |
|       | Open Treatment Of Ulnar Styloid Fracture  | \$626.97             |
|       | Closed Treatment Of Dislocated Wrist Between The Forearm Bone And The Hand, With Manipulation   | \$418.40             |
|       | Open Treatment Of Radiocarpal Or Intercarpal Dislocation, One Or More Bones   | \$559.62             |
|       | Insertion Of Hardware To Dislocated Wrist, Accessed Through The Skin  | \$490.35             |
| 2001  | mountain of Fidulation to Dissource Whist, Accessed Hillough The Onlin  | φ430.33              |
| 25675 | Closed Treatment Of Dislocated Wrist Between The Thumb Side And Small Finger Side Forearm Bones At The Wrist, With Manipulation   | \$308.73             |
|       | Open Treatment Of Distal Radioulnar Dislocation, Acute Or Chronic   | \$580.76             |
| 25680 | Closed Treatment Of Dislocated Wrist Through The Mid Portion Of The Wrist (Carpus) Bones With Manipulation  | \$492.10             |
|       |   |                      |

|   | Description  | Fee  |
|---|--|--|
|   | Open Treatment Of Trans-Scaphoperilunar Type Of Fracture Dislocation  Closed Treatment Of Lunate Dislocation, With Manipulation  | \$672.32   |
|   | Open Treatment Of Dislocation Wrist Bone (Lunate)  | \$456.84<br>\$582.35   |
|   | Arthrodesis, Wrist; Complete, Without Bone Graft (Includes Radiocarpal And/ Or Intercarpal And/ Or Carpometacarpal Joints)   | \$582.35<br>\$745.96   |
|   | Arthrodesis, Wrist Joint; With Sliding Graft   | \$774.18   |
|   | Arthrodesis, Wrist Joint; With Iliac Or Other Autogenous Distant Bone Graft (Includes Obtaining Graft)   | \$774.10   |
|   | Arthrodesis, Wrist; Limited, Without Bone Graft (Eg, Intercarpal Or Radiocarpal)   | \$684.12   |
|   | Intercarpal Fusion; With Autogenous Bone Graft (Includes Obtaining Graft)  | \$736.72   |
|   | Arthrodesis, Distal Radioulnar Joint With Segmental Resection Of Ulna, With Or Without Bone Graft (Eg, Sauve-Kapandji Procedure)   | \$969.11   |
|   | Amputation, Forearm, Through Radius And Ulna;  | \$657.30   |
|   | Amputation Through Both Bones Of Forearm, Open Procedure   | \$658.46   |
|   | Amputation, Forearm, Through Radius And Ulna; Secondary Closure Or Scar Revision   | \$564.65   |
|   | Amputation, Forearm, Through Radius and Ulna: Reamputation   | \$595.16   |
|   | Krukenberg Procedure   | \$1,055.08   |
|   | Removal Of Tendons, Ligaments, And Muscles Of Wrist  | \$676.36   |
|   | Removal Of Tendons, Ligaments, And Muscles Of Wrist, Secondary Closure   | \$601.24   |
|   | Removal Of Tendons, Ligaments, And Muscles Of Wrist With Re-Amputation Of Remaining Arm  | \$661.19   |
|   | Transmetacarpal Amputation;  | \$813.82   |
|   | Transmetacarpal Amputation; Secondary Closure Or Scar Revision   | \$550.79   |
|   | Transmetacarpal Amputation; Reamputation   | \$756.17   |
|   | Unlisted Procedure, Forearm Or Wrist   | Price By Report  |
|   | Drainage Of Finger Abscess, Uncomplicated  | \$248.78   |
|   | Drainage Of Finger Abscess, Complicated  | \$346.99   |
|   | Drainage Of Tendon Sheath, Digit And/Or Palm, Each   | \$377.51   |
|   | Drainage Of Palmar Bursa; Single, Bursa  | \$389.60   |
|   | Drainage Of Palmar Bursa; Multiple Bursa   | \$472.90   |
| 26034   | Incision, Bone Cortex, Hand Or Finger (Eq. Osteomyelitis Or Bone Abscess)  | \$485.08   |
| 26035   | Decompression Fingers And/Or Hand, Injection Injury (Eg, Grease Gun, Etc)  | \$747.02   |
| 26037   | Decompressive Fasciotomy, Hand (Excludes 26035)  | \$515.49   |
| 26040   | Release Of Tissues Of Palm, Accessed Through The Skin  | \$295.16   |
| 26045   | Partial Release Of Tissues Of Palm, Open Procedure   | \$410.35   |
| 26055   | Tendon Sheath Incision (Eg, For Trigger Finger)  | \$421.08   |
| 26060   | Incision Of Finger Tendon, Accessed Through The Skin   | \$241.32   |
| 26070   | Exploration, Drainage, Or Removal Of Foreign Body Of Wrist Bone  | \$299.20   |
| 26075   | Exploration, Drainage, Or Removal Of Foreign Body Of Joint Between The Fingers And The Hand  | \$307.32   |
| 26080   | Exploration, Drainage, Or Removal Of Foreign Body Of Hand Joint Between The Finger Joints  | \$353.74   |
| 26100   | Arthrotomy With Biopsy; Carpometacarpal Joint, Each  | \$315.82   |
| 26105   | Arthrotomy With Biopsy; Metacarpophalangeal Joint, Each  | \$317.90   |
| 26110   | Arthrotomy With Synovial Biopsy; Interphalangeal Joint, Each   | \$303.68   |
| 26111   | Arthrotomy With Biopsy; 1.5 Cm Or Greater  | \$424.56   |
| 26113   | Arthrotomy With Biopsy; 1.5 Cm Or Greater  | \$575.45   |
| 26115   | Excision, Tumor Or Vascular Malformation, Soft Tissue Of Hand Or Finger, Subcutaneous; Less Than 1.5 Cm  | \$385.95   |
| 26116   | Excision, Tumor, Soft Tissue, Or Vascular Malformation, Of Hand Or Finger, Subfascial (Eg, Intramuscular); Less Than 1.5 Cm  | \$378.40   |
| 26117   | Removal (Less Than 3 Centimeters) Tissue Growth Of Hand Or Finger  | \$675.63   |
|   | Removal (3 Centimeters Or Greater) Tissue Growth Of Hand Or Finger   | \$961.68   |
| 26121   | Removal Of Tissue Of Palm Only   | \$553.21   |
| 26123   | Removal Of Tissue Of Palm And Release Of Finger  | \$855.63   |
| 26125   | Removal Of Tissue Of Palm And Release Of Finger, Additional Digit  | \$267.74   |
| 26130   | Removal Of The Lining Of The Wrist Joint   | \$434.37   |
| 26135   | Synovectomy, Metacarpophalangeal Joint Including Intrinsic Release And Extensor Hood Reconstruction, Each Digit  | \$512.51   |
|   | Removal Of The Joint Lining And Repair Of The Tendon On The Topside Of The Finger (Extensor Tendon)  | \$470.67   |
|   | Repair Of Tendon, Finger And/Or Hand   | \$530.15   |
|   | Excision Of Lesion Of Tendon Sheath Or Joint Capsule (Eg, Cyst, Mucous Cyst, Or Ganglion), Hand Or Finger  | \$437.41   |
|   | Excision Of Tendon, Palm, Flexor Or Extensor, Single, Each Tendon  | \$379.43   |
|   | Excision Of Tendon, Finger, Flexor Or Extensor, Each Tendon  | \$384.47   |
|   | Sesamoidectomy, Thumb Or Finger (Separate Procedure)   | \$514.58   |
|   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Metacarpal;  | \$413.19   |
| 26205   |  |  |
|   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Metacarpal; With Autogenous Graft (Includes Obtaining Graft)   | \$556.90   |
| 26210   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Metacarpal; With Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  | \$556.90<br>\$415.76   |
|   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  | \$415.76   |
| 26215   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  | \$415.76<br>\$522.49   |
| 26215<br>26230  | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  | \$415.76<br>\$522.49<br>\$461.97   |
| 26215<br>26230<br>26235   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99   |
| 26215<br>26230<br>26235<br>26236  | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25   |
| 26215<br>26230<br>26235<br>26236<br>26250   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92   |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260  | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92   |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$725.40<br>\$577.21   |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320  | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  Removal Of Implant From Finger Or Hand  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$725.40<br>\$577.21   |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320<br>26340   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg. Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  Removal Of Implant From Finger Or Hand  Manipulation, Finger Joint, Under Anesthesia, Each Joint  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$725.40<br>\$577.21<br>\$325.85   |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320<br>26340<br>26341  | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg., Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  Removal Of Implant From Finger Or Hand  Manipulation, Finger Joint, Under Anesthesia, Each Joint  Manipulation Of Palm Pretendinous Cord Following Enzyme Injection  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$775.40<br>\$577.21<br>\$325.85<br>\$333.26   |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320<br>26340<br>26341<br>26350                                     | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  Removal Of Implant From Finger Or Hand  Manipulation, Finger Joint, Under Anesthesia, Each Joint  Manipulation Of Palm Pretendinous Cord Following Enzyme Injection  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2   | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$7725.40<br>\$577.21<br>\$325.85<br>\$333.26<br>\$110.62                                    |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320<br>26340<br>26341<br>26350<br>26352                            | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Removal Of Implant From Finger Or Hand  Manipulation, Finger Joint, Under Anesthesia, Each Joint  Manipulation Of Palm Pretendinous Cord Following Enzyme Injection  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) With A Graft Not In Zone 2  | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$775.40<br>\$577.21<br>\$325.85<br>\$333.26   |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320<br>26340<br>26341<br>26350<br>26352                            | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  Removal Of Implant From Finger Or Hand  Manipulation, Finger Joint, Under Anesthesia, Each Joint  Manipulation Of Palm Pretendinous Cord Following Enzyme Injection  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2  Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2   | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$7725.40<br>\$577.21<br>\$325.85<br>\$333.26<br>\$110.62<br>\$654.75<br>\$795.00            |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320<br>26340<br>26341<br>26350<br>26352<br>26356                   | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  Removal Of Implant From Finger Or Hand  Manipulation, Finger Joint, Under Anesthesia, Each Joint  Manipulation Of Palm Pretendinous Cord Following Enzyme Injection  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2  Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2  Repair Of Finger Tendon (Secondary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2   | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$725.40<br>\$577.21<br>\$325.85<br>\$333.26<br>\$110.62<br>\$654.75<br>\$795.00<br>\$825.45 |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320<br>26340<br>26341<br>26350<br>26352<br>26356<br>26357<br>26358 | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  Removal Of Implant From Finger Or Hand  Manipulation, Finger Joint, Under Anesthesia, Each Joint  Manipulation Of Palm Pretendinous Cord Following Enzyme Injection  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2  Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2 | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$7725.40<br>\$577.21<br>\$325.85<br>\$333.26<br>\$110.62<br>\$654.75<br>\$795.00            |
| 26215<br>26230<br>26235<br>26236<br>26250<br>26260<br>26262<br>26320<br>26340<br>26341<br>26350<br>26352<br>26356<br>26357<br>26358 | Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx;  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Proximal, Middle Or Distal Phalanx; With Autogenous Graft (Includes Obtaining Graft)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone (Eg, Osteomyelitis); Metacarpal  Partial Removal Of Finger Bone For Bone Infection At The Middle Of Hand Side Of The Finger  Partial Removal Of Finger Bone For Bone Infection At The End Of The Finger  Radical Resection Of Tumor, Metacarpal  Radical Resection Of Tumor, Proximal Or Middle Phalanx Of Finger  Radical Resection Of Tumor, Distal Phalanx Of Finger  Removal Of Implant From Finger Or Hand  Manipulation, Finger Joint, Under Anesthesia, Each Joint  Manipulation Of Palm Pretendinous Cord Following Enzyme Injection  Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) Without A Graft Not In Zone 2  Repair Of Finger Tendon (Primary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2  Repair Of Finger Tendon (Secondary) On The Under Side Of The Hand (Flexor) Without A Graft In Zone 2   | \$415.76<br>\$522.49<br>\$461.97<br>\$424.99<br>\$375.25<br>\$965.92<br>\$725.40<br>\$577.21<br>\$325.85<br>\$333.26<br>\$110.62<br>\$654.75<br>\$795.00<br>\$825.45 |

| Code                                      | Description   | Fee                                |
|---|---|------------------------------------|
|   | Repair Of Finger Deep Tendon (Secondary) On The Under Side Of The Hand (Flexor) With An Intact Superficial Tendon)  | \$838.39                           |
|   | Repair Of Finger Tendon On The Under Side Of The Hand (Flexor) With Implanted Rod   | \$827.81                           |
|   | Removal Of Synthetic Rod And Insertion Of Flexor Tendon Graft, Hand Or Finger (Includes Obtaining Graft), Each Rod  | \$946.52                           |
| 26410                                     | Repair, Extensor Tendon, Hand, Primary Or Secondary; Without Free Graft, Each Tendon  | \$424.78                           |
| 26412                                     | Extensor Tendon Repair, Dorsum Of Hand, Single, Primary Or Secondary; With Free Graft (Includes Obtaining Graft), Each Tendon   | \$686.31                           |
|   | Excision Of Extensor Tendon, With Implantation Of Synthetic Rod For Delayed Tendon Graft, Hand Or Finger, Each Rod  | \$922.47                           |
|   | Removal Of Synthetic Rod And Insertion Of Extensor Tendon Graft (Includes Obtaining Graft), Hand Or Finger, Each Rod  | \$870.78                           |
| 26418                                     | Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) Without A Graft  | \$441.63                           |
| 26420                                     | Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) With A Graft   | \$665.05                           |
|   | Repair Of Extensor Tendon, Central Slip, Secondary (Eg, Boutonniere Deformity); Using Local Tissue(S), Including Lateral Band(S), Each  |                                    |
|   | Finger  | \$519.02                           |
|   | Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) With A Graft, Central Slip, Boutonniere Deformity  | \$758.95                           |
|   | Closed Treatment Of Distal Extensor Tendon Insertion, With Or Without Percutaneous Pinning (Eg, Mallet Finger)  Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) Without A Graft Toward The End Of The Finger (Mallet Finger) | \$385.09<br>\$516.35               |
| 20433                                     | Trepain of Finger Territori on the Top Oide of The Finance (Extension) Without A Graft Toward The Elite of The Finger (William Finger)  | ψ510.55                            |
| 26434                                     | Repair Of Finger Tendon On The Top Side Of The Hand (Extensor) Without A Graft Toward The End Of The Finger (Mallet Finger) With A Graft  | \$487.26                           |
|   | Realignment Finger Tendon On The Top Side Of The Hand (Extensor) Without A Graft  | \$598.62                           |
| 26440                                     | Removal Of Scar Tissue To Release Tendon On The Palm Of The Hand (Flexor) Or Finger   | \$587.47                           |
|   | Tenolysis, Simple, Flexor Tendon; Palm And Finger, Each Tendon  | \$937.84                           |
|   | Removal Of Scar Tissue To Release Tendon On The Top Of The Hand (Extensor) Or Finger  | \$431.39                           |
|   | Tenolysis, Complex, Extensor Tendon, Finger, Including Forearm, Each Tendon   | \$643.55                           |
|   | Incision Of Tendon Of Palm, Open Procedure  | \$445.41                           |
|   | Incision Of Tendon Of Finger, Open Procedure Incision Of Tendon Of Hand Or Finger, Open Procedure   | \$416.87                           |
|   | Tenodesis; Of Proximal Interphalangeal Joint, Each Joint  | \$434.47<br>\$632.18               |
| _   | Tenodesis; Of Distal Joint, Each Joint  | \$624.47                           |
|   | Lengthening Of Tendon Of Hand Or Finger On The Back Of The Hand (Extensor)  | \$617.16                           |
|   | Shortening Of Tendon, Extensor, Hand Or Finger, Each Tendon   | \$600.53                           |
| 26478                                     | Lengthening Of Tendon Of Hand Or Finger On The Front Of The Hand (Flexor)   | \$634.82                           |
|   | Shortening Of Tendon Of Hand Or Finger On The Front Of The Hand (Flexor)  | \$646.20                           |
|   | Transplant Of Tendon Of Hand, Without Graft   | \$694.76                           |
|   | Transplant Of Tendon Of Hand, With Graft  | \$828.94                           |
|   | Transplant Of Tendon To Palm, Without Tendon Graft Other Than Thumb   | \$585.99                           |
|   | Transplant Of Tendon To Palm, With Tendon Graft Other Than Thumb  | \$913.53                           |
|   | Transplant Of Thumb Tendon To Palm, Without Tendon Graft Other Than Thumb  Transplant Of Thumb Tendon To Palm, With Tendon Graft Other Than Thumb   | \$744.46<br>\$874.72               |
|   | Opponens Plasty; Hypothenar Muscle Transfer   | \$796.57                           |
|   | Transplant Of Tendon Thumb, Palm, Or Wrist  | \$854.44                           |
|   | Transfer Of Tendon To Restore Intrinsic Function; Ring And Small Finger   | \$853.46                           |
| 26498                                     | Transfer Of Tendon Of Hand, All Four Fingers  | \$1,100.45                         |
|   | Correction Claw Finger, Other Methods   | \$822.77                           |
|   | Reconstruction Of Tendon Pulley, Each Tendon; With Local Tissues (Separate Procedure)   | \$594.15                           |
|   | Tendon Pulley Reconstruction; With Tendon Or Fascial Graft (Includes Obtaining Graft) (Separate Procedure)  | \$718.50                           |
|   | Release Of Thenar Muscle(S) (Eg, Thumb Contracture)   | \$474.65                           |
|   | Cross Intrinsic Transfer, Each Tendon  Repair Of Joint Capsule Of Hand And Finger, One Finger   | \$614.74                           |
|   | Repair Of Joint Capsule Of Hand And Finger, One Finger  Repair Of Joint Capsule Of Hand And Finger, Two Fingers   | \$707.86<br>\$818.40               |
|   | Repair Of Joint Capsule Of Hand And Finger, 3 Or Four Fingers   | \$828.36                           |
|   | Capsulectomy Or Capsulotomy; Metacarpophalangeal Joint, Each Joint  | \$657.88                           |
|   | Repair Of Joint Capsule, Hand And Finger  | \$659.96                           |
|   | Repair Of Joint Of Hand Bone And Finger, With Implant   | \$500.06                           |
|   | Repair Of Joint Of Hand Bone And Finger, Without Implant  | \$647.54                           |
|   | Joint Replacement (Arthroplasty) Without A Prosthesis   | \$405.50                           |
|   | Joint Replacement (Arthroplasty) With A Prosthesis Between The Finger Joints  | \$653.38                           |
|   | Repair Of Ligament Of Hand To Finger Joint, Or Finger Joint Without Graft   | \$539.96                           |
|   | Repair Of Ligament Of Hand To Finger Joint With Tendon Or Graft Repair Of Ligament Of Hand To Finger Joint With Local Tissue  | \$789.21                           |
|   | Repair Of Ligament Of Finger Joint With Graft   | \$688.64<br>\$655.33               |
|   | Repair Non-Union, Metacarpal Or Phalanx, (Includes Obtaining Bone Graft With Or Without External Or Internal Fixation)  | \$655.32<br>\$981.06               |
|   | Repair And Reconstruction, Finger, Volar Plate, Interphalangeal Joint   | \$712.46                           |
|   | Pollicization Of A Digit  | \$1,529.55                         |
|   | Transfer, Toe-To-Hand With Microvascular Anastomosis; Great Toe "Wrap-Around" With Bone Graft   | \$3,305.00                         |
| 26553                                     | Transfer Of Toe To Hand, Single   | \$2,977.78                         |
|   | Transfer Of Toe To Hand, Double   | \$3,459.88                         |
|   | Transfer, Finger To Another Position Without Microvascular Anastomosis  | \$1,292.25                         |
|   | Transfer, Free Toe Joint, With Microvascular Anastomosis  | \$3,097.29                         |
|   | Repair Of Webbed Finger, With Skin Flaps  | \$608.88                           |
|   | Repair Of Webbed Finger, With Skin Flaps And Grafts  Repair Of Webbed Finger, Complex (Involving Rope Or Nails  | \$827.37                           |
|   | Repair Of Webbed Finger, Complex (Involving Bone Or Nails   | \$937.23<br>\$684.06               |
|   | IOstentomy: Metacarnal Fach   |                                    |
| 26565                                     | Osteotomy; Metacarpal, Each Osteotomy: Phalanx Of Finger, Each  |                                    |
| 26565<br>26567                            | Osteotomy; Phalanx Of Finger, Each  | \$503.09                           |
| 26565<br>26567<br>26568                   |   | \$503.09<br>\$883.29               |
| 26565<br>26567<br>26568<br>26580          | Osteotomy; Phalanx Of Finger, Each Osteoplasty, Lengthening, Metacarpal Or Phalanx  | \$503.09                           |
| 26565<br>26567<br>26568<br>26580<br>26587 | Osteotomy; Phalanx Of Finger, Each Osteoplasty, Lengthening, Metacarpal Or Phalanx Repair Cleft Hand  | \$503.09<br>\$883.29<br>\$1,424.83 |

| 00500  | Description   | Fee  |
|--|---|--|
| 26593  | Release, Intrinsic Muscles Of Hand, Each Muscle   | \$618.43   |
|  | Excision Of Constricting Ring With Multiple Z-Plasties  | \$766.85   |
|  | Closed Treatment Of Metacarpal Fracture, Single; Without Manipulation, Each Bone  | \$262.95   |
|  | Treatment Of Closed Metacarpal Fracture, Single; With Manipulation, Each Bone   | \$334.62   |
|  | Closed Treatment Of Metacarpal Fracture, With Manipulation, With External Fixation, Each Bone Insertion Of Hardware To Broken Finger, Accessed Through The Skin   | \$478.29<br>\$499.05   |
|  | Open Treatment Of Fracture Of Bone In The Midportion Of The Hand Between The Wrist And Fingers  | \$591.61   |
|  | Closed Treatment Of Carpometacarpal Dislocation, Thumb, With Manipulation   | \$394.67   |
|  | Closed Treatment Of Carpometacarpal Fracture Dislocation, Thumb (Bennett Fracture), With Manipulation   | \$406.81   |
|  | Insertion Of Hardware To Broken Thumb With Manipulation, Accessed Through The Skin  | \$402.77   |
|  |   | ·  |
| 26665  | Open Treatment Of Carpometacarpal Fracture Dislocation, Thumb (Bennett Fracture), Includes Internal Fixation, When Performed  | \$576.35   |
|  | Closed Treatment Of Carpometacarpal Dislocation, Other Than Thumb, With Manipulation, Each Joint; Without Anesthesia  | \$240.47   |
|  | Treatment Of Closed Carpometacarpal Dislocation, Other Than Bennett Fracture, Single, With Manipulation; Requiring Anesthesia   | \$433.53   |
|  | Insertion Of Hardware To Dislocated Hand Bone At Wrist Joint With Manipulation, Accessed Through The Skin   | \$546.75   |
|  | Open Treatment Of Dislocation At The Wrist To Mid Hand Bones, Except The Thumb, Single  | \$533.22   |
|  | Open Treatment Of Dislocation At The Wrist To Mid Hand Bones, Except The Thumb, Multiple  | \$585.98   |
|  | Closed Treatment Of Metacarpophalangeal Dislocation, Single, With Manipulation; Without Anesthesia  | \$232.47   |
|  | Treatment Of Closed Metacarpophalangeal Dislocation, Single, With Manipulation; Requiring Anesthesia Insertion Of Hardware To Dislocated Hand Joint With Manipulation, Accessed Through The Skin  | \$392.94<br>\$415.88   |
|  | Open Treatment Of Metacarpophalangeal Dislocation, Single, Includes Internal Fixation, When Performed   | \$504.66   |
|  | Closed Treatment Of Broken Finger Or Thumb At The Mid Portion Or Part Near The Hand Without Manipulation  | \$198.83   |
|  | Closed Treatment of Broken Finger Or Thumb At The Mid Portion Or Part Near The Hand With Manipulation   | \$367.07   |
|  | Insertion Of Hardware To Broken Finger Or Thumb With Manipulation, Accessed Through The Skin  | \$439.20   |
|  | Open Treatment Of Phalangeal Shaft Fracture, Proximal Or Middle Phalanx, Finger Or Thumb, Includes Internal Fixation, When Performed,   | Ţ.00.20  |
| 26735  |   | \$403.03   |
|  | Closed Treatment Of Articular Fracture, Involving Metacarpophalangeal Or Interphalangeal Joint; Without Manipulation, Each  | \$220.59   |
| 26742  | Treatment Of Closed Articular Fracture, Involving Metacarpophalangeal Or Proximal Interphalangeal Joint; With Manipulation, Each  | \$258.37   |
|  | Open Treatment Of Articular Fracture, Involving Metacarpophalangeal Or Interphalangeal Joint, Includes Internal Fixation, When Performed,   |  |
| 26746  |   | \$501.26   |
|  | Closed Treatment Of Broken Finger Or Thumb At The Portion Furthest Away From The Hand Without Manipulation  | \$182.19   |
|  | Closed Treatment Of Broken Finger Or Thumb At The Portion Furthest Away From The Hand With Manipulation   | \$288.91   |
|  | Insertion Of Hardware To Broken Finger Or Thumb, Accessed Through The Skin  | \$414.78   |
|  | Open Treatment Of Distal Phalangeal Fracture, Finger Or Thumb, Includes Internal Fixation, When Performed, Each Closed Treatment Of Interphalangeal Joint Dislocation, Single, With Manipulation; Without Anesthesia  | \$342.18<br>\$196.70   |
|  | Treatment Of Closed Interphalangeal Joint Dislocation, Single, With Manipulation; Requiring Anesthesia  | \$356.71   |
|  | Insertion Of Hardware To Dislocated Finger Joint With Manipulation, Accessed Through The Skin   | \$420.87   |
|  | Open Treatment Of Interphalangeal Joint Dislocation, Includes Internal Fixation, When Performed, Single   | \$371.25   |
|  | Fusion In Opposition, Thumb, With Autogenous Graft (Includes Obtaining Graft)   | \$785.86   |
|  | Arthrodesis, Carpometacarpal Joint, Thumb, With Or Without Internal Fixation;   | \$735.67   |
| 26842  | Arthrodesis, Carpometacarpal Joint, Thumb, With Or Without Internal Fixation; With Autogenous Graft (Includes Obtaining Graft)  | \$787.82   |
| 26843  | Arthrodesis, Carpometacarpal Joint, Digit, Other Than Thumb, Each;  | \$742.97   |
|  | Arthrodesis, Carpometacarpal Joint, Digits, Other Than Thumb; With Autogenous Graft (Includes Obtaining Graft)  | \$813.27   |
|  | Fusion Of The Joints Between Finger Joints  | \$513.01   |
|  | Fusion Of The Joints Between Finger Joints, With Bone Graft From The Patient  | \$788.84   |
|  | Fusion Of The Joints Between The Finger And The Hand  | \$431.50   |
|  | Fusion Of The Joints Between The Finger And The Hand, Additional Joint Fusion Of The Joints Between The Finger And The Hand, With Bone Graft From The Patient   | \$91.28<br>\$728.91  |
|  | Fusion Of Finger Joint With Bone Graft, Additional Joint  | \$203.84   |
|  | Amputation Of Hand Bone, Finger, Or Thumb   | \$722.32   |
|  | Amputation, Finger Or Thumb, Primary Or Secondary, Any Joint Or Phalanx, Single, Including Neurectomies; With Direct Closure  | \$652.97   |
|  | Amputation Of Finger Or Thumb, With Tissue Flap   | \$477.96   |
| 26989  | Unlisted Procedure, Hands Or Fingers  | Price By Report  |
| 26000  | Incision And Drainage; Deep Abscess Or Hematoma   | \$463.89   |
| 20330  |   | ψ+05.05  |
| 26991  | Incision And Drainage; Infected Bursa   | \$663.19   |
| 26991<br>26992   | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess)  | \$663.19<br>\$923.79   |
| 26991<br>26992<br>27000  | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin  | \$663.19<br>\$923.79<br>\$299.42   |
| 26991<br>26992<br>27000<br>27001   | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure   | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86   |
| 26991<br>26992<br>27000<br>27001<br>27003  | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005   | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27006  | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27006<br>27025   | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type   | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27006<br>27025<br>27027  | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis   | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27006<br>27025<br>27027<br>27030   | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection)  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27006<br>27025<br>27027<br>27030<br>27033  | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis   | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27006<br>27025<br>27027<br>27030<br>27033  | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body   | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$339.91<br>\$804.24<br>\$999.15   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27006<br>27025<br>27027<br>27030<br>27033<br>27035   | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15   |
| 26991<br>26992<br>27000<br>27001<br>27005<br>27006<br>27025<br>27027<br>27030<br>27033<br>27035<br>27036   | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves Capsulectomy Or Capsulotomy, Hip, With Or Without Excision Of Heterotopic Bone, With Release Of Hip Flexor Muscles (Ie, Gluteus Medius, Gluteus Minimus, Tensor Fascia Latae, Rectus Femoris, Sartorius, Iliopsoas) Biopsy Of Tissue Of Pelvis And Hip, Superficial  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15<br>\$882.30<br>\$1,089.63   |
| 26991<br>26992<br>27000<br>27001<br>27005<br>27006<br>27025<br>27027<br>27030<br>27033<br>27035<br>27036<br>27040  | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves Capsulectomy Or Capsulotomy, Hip, With Or Without Excision Of Heterotopic Bone, With Release Of Hip Flexor Muscles (Ie, Gluteus Medius, Gluteus Minimus, Tensor Fascia Latae, Rectus Femoris, Sartorius, Iliopsoas) Biopsy Of Tissue Of Pelvis And Hip, Superficial Biopsy Of Tissue Of Pelvis And Hip, Deep  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15<br>\$882.30<br>\$1,089.63   |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27006<br>27025<br>27027<br>27030<br>27033<br>27035<br>27036<br>27040<br>27041<br>27043                   | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves Capsulectomy Or Capsulotomy, Hip, With Or Without Excision Of Heterotopic Bone, With Release Of Hip Flexor Muscles (Ie, Gluteus Medius, Gluteus Minimus, Tensor Fascia Latae, Rectus Femoris, Sartorius, Iliopsoas) Biopsy Of Tissue Of Pelvis And Hip, Superficial Biopsy Of Tissue Of Pelvis And Hip, Deep Biopsy, Soft Tissue Of Pelvis And Hip, Area; 3 Cm Or Greater  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15<br>\$882.30<br>\$1,089.63<br>\$925.72<br>\$324.28                                     |
| 26991<br>26992<br>27000<br>27001<br>27005<br>27005<br>27005<br>27025<br>27027<br>27030<br>27033<br>27035<br>27036<br>27040<br>27041<br>27043<br>27045          | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves Capsulectomy Or Capsulotomy, Hip, With Or Without Excision Of Heterotopic Bone, With Release Of Hip Flexor Muscles (Ie, Gluteus Medius, Gluteus Minimus, Tensor Fascia Latae, Rectus Femoris, Sartorius, Iliopsoas) Biopsy Of Tissue Of Pelvis And Hip, Superficial Biopsy, Soft Tissue Of Pelvis And Hip, Deep Biopsy, Soft Tissue Of Pelvis And Hip Area; 3 Cm Or Greater Biopsy, Soft Tissue Of Pelvis And Hip Area; 5 Cm Or Greater  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15<br>\$882.30<br>\$1,089.63<br>\$925.72<br>\$324.28<br>\$645.81<br>\$496.81             |
| 26991<br>26992<br>27000<br>27001<br>27005<br>27005<br>27025<br>27027<br>27030<br>27033<br>27035<br>27036<br>27040<br>27041<br>27043<br>27045<br>27047          | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves Capsulectomy Or Capsulotomy, Hip, With Or Without Excision Of Heterotopic Bone, With Release Of Hip Flexor Muscles (Ie, Gluteus Medius, Gluteus Minimus, Tensor Fascia Latae, Rectus Femoris, Sartorius, Iliopsoas) Biopsy Of Tissue Of Pelvis And Hip, Superficial Biopsy, Soft Tissue Of Pelvis And Hip, Deep Biopsy, Soft Tissue Of Pelvis And Hip Area; 3 Cm Or Greater Biopsy, Soft Tissue Of Pelvis And Hip Area; 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Pelvis And Hip Area, Subcutaneous; Less Than 3 Cm  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15<br>\$882.30<br>\$1,089.63<br>\$925.72<br>\$324.28<br>\$645.81<br>\$496.81             |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27025<br>27027<br>27030<br>27033<br>27035<br>27036<br>27040<br>27041<br>27043<br>27045<br>27047<br>27047 | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves Capsulectomy Or Capsulotomy, Hip, With Or Without Excision Of Heterotopic Bone, With Release Of Hip Flexor Muscles (Ie, Gluteus Medius, Gluteus Minimus, Tensor Fascia Latae, Rectus Femoris, Sartorius, Iliopsoas) Biopsy Of Tissue Of Pelvis And Hip, Superficial Biopsy, Soft Tissue Of Pelvis And Hip, Area; 3 Cm Or Greater Biopsy, Soft Tissue Of Pelvis And Hip Area; 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Pelvis And Hip Area, Subcutaneous; Less Than 3 Cm Excision, Tumor, Soft Tissue Of Pelvis And Hip Area, Subcutaneous; Less Than 5 Cm | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15<br>\$882.30<br>\$1,089.63<br>\$925.72<br>\$324.28<br>\$645.81<br>\$663.73<br>\$465.74 |
| 26991<br>26992<br>27000<br>27001<br>27003<br>27005<br>27025<br>27027<br>27030<br>27035<br>27036<br>27040<br>27041<br>27043<br>27045<br>27045<br>27047<br>27048 | Incision And Drainage; Infected Bursa Incision, Bone Cortex, Pelvis And/Or Hip Joint (Eg, Osteomyelitis Or Bone Abscess) Incision Of Hip Tendon, Accessed Through The Skin Incision Of Hip Tendon, Open Procedure Incision Of Hip Tendon With Removal Of Nerve, Open Procedure Incision Of Flexor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Incision Of Abductor And/Or Extensor Tendons Of Hip, Open Procedure Fasciotomy, Hip Or Thigh, Any Type Incision Of Tissue Of Muscle Compartments Of One Side Of Pelvis Arthrotomy, Hip, With Drainage (Eg, Infection) Arthrotomy, Hip, Including Exploration Or Removal Of Loose Or Foreign Body Denervation, Hip Joint, Intrapelvic Or Extrapelvic Intra-Articular Branches Of Sciatic, Femoral, Or Obturator Nerves Capsulectomy Or Capsulotomy, Hip, With Or Without Excision Of Heterotopic Bone, With Release Of Hip Flexor Muscles (Ie, Gluteus Medius, Gluteus Minimus, Tensor Fascia Latae, Rectus Femoris, Sartorius, Iliopsoas) Biopsy Of Tissue Of Pelvis And Hip, Superficial Biopsy, Soft Tissue Of Pelvis And Hip, Deep Biopsy, Soft Tissue Of Pelvis And Hip Area; 3 Cm Or Greater Biopsy, Soft Tissue Of Pelvis And Hip Area; 5 Cm Or Greater Excision, Tumor, Soft Tissue Of Pelvis And Hip Area, Subcutaneous; Less Than 3 Cm  | \$663.19<br>\$923.79<br>\$299.42<br>\$424.86<br>\$550.35<br>\$619.92<br>\$661.86<br>\$839.91<br>\$804.24<br>\$999.15<br>\$882.30<br>\$1,089.63<br>\$925.72<br>\$324.28<br>\$645.81<br>\$496.81             |

| Code  | Description  | Fee                      |
|-------|--|--------------------------|
|       | Arthrotomy With Synovectomy, Hip Joint   | \$700.04                 |
|       | Incision Of Tissue On One Side Of Pelvic Muscle Compartment With Removal Of Muscle   | \$914.76                 |
|       | Removal (5 Centimeters Or Greater) Tissue Growth Of Pelvis Or Hip  | \$1,623.49               |
| 27060 | Excision; Ischial Bursa  | \$428.95                 |
|       | Excision; Trochanteric Bursa Or Calcification  | \$390.34                 |
|       | Removal Of Bone Cyst Or Growth Of Hip Or Pelvic Bone, Superficial  | \$484.71                 |
| 27066 | Removal Of Bone Cyst Or Growth Of Hip Or Pelvic Bone, Deep"  | \$744.15                 |
| 07007 | Excision Of Bone Cyst Or Benign Tumor, Wing Of Ilium, Symphysis Pubis, Or Greater Trochanter Of Femur; With Autograft Requiring Separate   | CO 44 42                 |
|       | Incision Partial Removal Of Hip Or Pelvic Bone, Superficial  | \$941.13<br>\$820.31     |
|       | Partial Removal Of Hip Or Pelvic Bone, Deep  | \$897.20                 |
| 27071 | Radical Removal Of Growth From Wing Of Upper Pelvic Bone (Illium), Base Of Pelvic Bone (Ischium), 1 Pubic Bone Or Joint Between Pubic  | Ψ001.20                  |
| 27075 | Bones  | \$1,869.58               |
|       | Radical Removal Of Growth From Upper Pelvic Bone (Ilium) Including Hip Socket, Base Of Pelvic Bone (Ischium) Including Hip Socket, Or Both   |                          |
|       | Pubic Bones  | \$2,256.39               |
| 27077 | Radical Resection Of Tumor; Innominate Bone, Total   | \$2,514.77               |
| 07070 | Position Demonstration County France Cit Dance Of Dataire (Josephin) And Union Ford Of Chaff Of Think Dance (County Transferration)  | £4.040.50                |
|       | Radical Removal Of Growth From Sit Bone Of Pelvis (Ischial Tuberosity) And Upper End Of Shaft Of Thigh Bone (Greater Trochanter)  Coccygectomy, Primary  | \$1,843.59<br>\$444.79   |
|       | Removal Of Foreign Body In Tissue Of Pelvis Or Hip, Accessed Beneath The Skin  | \$298.21                 |
|       | Removal Of Foreign Body, Pelvis Or Hip; Deep (Subfascial Or Intramuscular)   | \$555.87                 |
|       | Removal Of Hip Prosthesis; (Separate Procedure)  | \$756.93                 |
|       | Removal Of Hip Prosthesis, Complicated   | \$1,594.39               |
| 27093 | Injection Procedure For Hip Arthrography; Without Anesthesia   | \$171.51                 |
| 27095 | Injection Procedure For Hip Arthrography; With Anesthesia  | \$313.73                 |
|       |  |                          |
|       | Injection Procedure For Sacroiliac Joint, Anesthetic/Steroid, With Image Guidance (Fluoroscopy Or Ct) Including Arthrography When Performed  | \$173.39                 |
|       | Release Or Recession, Hamstring, Proximal  | \$625.60                 |
|       | Transfer, Adductor To Ischium  Transfer Of Musels To Think Bone Addition Initiated Subsection Musels   | \$671.32                 |
|       | Transfer Of Muscle To Thigh Bone At Hip Joint, External Oblique Muscle  Transfer Paraspinal Muscle To Hip (Includes Fascial Or Tendon Extension Graft)   | \$758.33<br>\$794.16     |
|       | Transfer of Muscle To Thigh Bone At Hip Joint, Iliopsoas Muscle  | \$883.27                 |
|       | Transfer Iliopsoas; To Femoral Neck  | \$823.32                 |
|       | Acetabuloplasty; (Eg, Whitman, Colonna, Haygroves, Or Cup Type)  | \$1,304.76               |
|       | Acetabuloplasty; Resection, Femoral Head (Eg, Girdlestone Procedure)   | \$1,000.66               |
| 27125 | Hemiarthroplasty, Hip, Partial (Eg, Femoral Stem Prosthesis, Bipolar Arthroplasty)   | \$1,137.81               |
|       |  |                          |
|       | Arthroplasty, Acetabular And Proximal Femoral Prosthetic Replacement (Total Hip Arthroplasty), With Or Without Autograft Or Allograft  | \$1,286.37               |
|       | Conversion Of Previous Replacement Of Thigh Bone And Hip Joint Prosthesis  | \$1,670.83               |
|       | Revision Of Total Hip Arthroplasty Both Components, With Or Without Autograft Or Allograft   | \$1,898.88               |
|       | Revision Of Total Hip Arthroplasty Acetabular Component Only, With Or Without Autograft Or Allograft  Revision Of Total Hip Arthroplasty Femoral Component Only, With Or Without Allograft                         | \$1,464.74<br>\$1,521.89 |
|       | Osteotomy And Transfer Of Greater Trochanter Of Femur (Separate Procedure)   | \$812.64                 |
|       | Osteotomy, Iliac, Acetabular Or Innominate Bone;   | \$1,031.56               |
|       | Incision Of Pelvic Bone With Repair Of Hip Joint Dislocation, Open Procedure   | \$1,318.99               |
|       | Osteotomy, Iliac, Acetabular Or Innominate Bone; With Femoral Osteotomy  | \$1,424.36               |
| 27156 | Incision Of Pelvic And Thigh Bone With Repair Of Hip Joint Dislocation, Open Procedure   | \$1,637.72               |
| 27158 | Osteotomy, Pelvis, Bilateral (Eg, Congenital Malformation)   | \$1,263.39               |
|       | Incision Of Neck Of Thigh Bone   | \$1,104.83               |
|       | Incision Below Neck Of Thigh Bone (Intertrochanteric Or Subtrochanteric)   | \$1,398.61               |
|       | Bone Graft, Femoral Head, Neck, Intertrochanteric Or Subtrochanteric Area (Includes Obtaining Bone Graft)  | \$1,053.34               |
|       | Treatment Of Slipped Femoral Epiphysis; By Traction, Without Reduction   | \$607.07                 |
|       | Treatment Of Slipped Femoral Epiphysis; By Single Or Multiple Pinning, In Situ   | \$904.90                 |
|       | Open Treatment Of Slipped Femoral Epiphysis; Single Or Multiple Pinning Or Bone Graft (Includes Obtaining Graft)  Open Treatment Of Slipped Femoral Epiphysis; Closed Manipulation With Single Or Multiple Pinning | \$1,124.33<br>\$897.58   |
|       | Open Treatment Of Slipped Femoral Epiphysis; Osteoplasty Of Femoral Neck (Heyman Type Procedure)   | \$889.94                 |
|       | Open Treatment Of Slipped Femoral Epiphysis; Osteotomy And Internal Fixation   | \$1,014.74               |
|       | Epiphyseal Arrest By Epiphysiodesis Or Stapling, Greater Trochanter Of Femur   | \$656.92                 |
|       |  | 7                        |
| 27187 | Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femoral Neck And Proximal Femur  | \$1,006.53               |
|       | Closed Treatment Of Fracture And/Or Dislocation Of Pelvis And/Or Sacrum  | \$123.44                 |
|       | Closed Treatment Of Fracture And/Or Dislocation Of Pelvis And/Or Sacrum With Manipulation  | \$309.96                 |
|       | Closed Treatment Of Coccygeal Fracture   | \$176.55                 |
| 27202 | Open Treatment Of Coccygeal Fracture   | \$481.73                 |
| 27215 | Open Treatment Of Iliac Spine(S), Tuberosity Avulsion, Or Iliac Wing Fracture(S) (Eg, Pelvic Fracture(S) Which Do Not Disrupt The Pelvic Ring), With Internal Fixation   | \$969.34                 |
|       | Insertion Of Hardware To Broken And/Or Dislocated Bone On One Side Of Pelvis, Accessed Through The Skin  | \$436.54                 |
|       | Open Treatment Of Fracture And/Or Dislocation Of Pelvis, Anterior  | \$1,178.88               |
|       | Open Treatment Of Fracture And/Or Dislocation Of Pelvis, Posterior   | \$1,416.27               |
|       | Closed Treatment Of Acetabulum (Hip Socket) Fracture(S); Without Manipulation  | \$385.41                 |
|       | Treatment Of Closed Acetabulum (Hip Socket) Fracture(S); With Manipulation With Or Without Skeletal Traction   | \$894.41                 |
|       | Open Treatment Of Posterior Or Anterior Acetabular Wall Fracture, With Internal Fixation   | \$1,061.77               |
|       | Open Treatment Of Fracture Of Front Or Back Column Of Hip Socket Or Across Hip Socket With Insertion Of Fixation Hardware  | \$1,493.39               |
|       | Open Treatment Of Fracture Of Front And Back Column Or Wall Of Hip Socket With Insertion Of Fixation Hardware  | \$1,608.57               |
|       | Closed Treatment Of Femoral Fracture, Proximal End, Neck; Without Manipulation   | \$451.29                 |
|       | Closed Treatment Of Fracture Of Neck Of Thigh Bone With Manipulation   | \$665.72                 |
|       | Insertion Of Hardware To Broken Thigh Bone, Accessed Through The Skin  | \$916.51                 |

| 2223G Consoft Treatment Of Femons Freedom, Promonia End, Rook, Insuran Floration Cyr Postwieck Registerement 2223G Consoft Treatment Of Frazie Lange Review Need, Cit Trajp Bose Interestory Insurance Technical World Management 2223G Consoft Treatment Of Protein Plage Bose Interestory Insurance Cyr Subtraction Service Access Consorting Conso  |   |   |   |
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| 2228   Goace Treatment O France Better New Kol Pring France Description (Control Treatment of Personal Better New York O Treight from Centrol Personal Better (Control Personal Persona  |   | Description   |   |
| 27266 Support Teratument Of Fenom Page No. 19 (Page Service Imparts 1972) 27266 Support Teratument Of Grown Things Service Imparts 1972 27266 Support Teratument Of Grown Things Service Imparts 1972 27266 Support Teratument Of Grown Things Service Imparts 1972 27266 Support Teratument Of Grown Things Service Imparts 1972 27267 Support Service Of Service Imparts 1972 27266 Support Teratument Of Service Things Service Imparts 1972 27267 Support Service Of Service Imparts 1972 27267 Support Service Of Service Imparts 1972 27268 Support Teratument Of His Discostion, Treatumatic, Willoud Indendar Passion 27269 Open Teratument Of His Discostion, Treatumatic, Willoud Indendar Passion 27269 Support Teratument Of Service Imparts 1972 27269 Support Teratument Of His Discostion, Treatumatic, Willoud Indendar Passion 27269 Support Teratument Of His Discostion, Treatumatic, Willoud Indendar Passion 27269 Support Teratument Of His Discostion, Treatumatic, Willoud Indendar Passion 27269 Support Teratument Of His Discostion, Treatumatic, Willoud Indendar Passion 27269 Support Teratument Of Support Indendar Indendary Congenitar Of Passional Passion 27269 Support Teratument Of Congenitar tip Discostion, By Adultorius, Teratumatic Willoud Indendary Indendary Support Indendary Indendary Support Indendary Indendary Support Indendary Ind  | 27220   |   | \$1,199.80  |
| 22744   Suppart Treatment Of Blocker Thip is Dever With Protection   \$1,202.07   27540   Suppart Treatment Of Broker Thip is Dever With Implant   \$1,202.07   27540   Suppart Treatment Of Broker High Treatment   \$1,202.07   27540   Suppart Treatment Of Broker High Treatment   \$1,202.07   27540   Suppart Treatment Of Broker High Treatment   \$1,202.07   27550   Subert Treatment Of Subscience   Treatment   \$1,202.07   27550   Subert Treatment Of High Discision   Treatment   \$1,202.07   27550   Subert Treatment Of High Discision   Treatment   \$1,202.07   27550   Subert Treatment Of High Discision   Treatment   \$1,202.07   27550   Subscience   Tre    |   |   |   |
| 27249 (Souper Tearment Of Encker They's Bone Will replant 27249 (Souper Tearment Of Encker They's December 27249 (Souper Tearment Of Encker They's Trocharter 27249 (Souper Tearment Of Encker They's Trocharter 27249 (Souper Tearment Of Encker They's Trocharter 27249 (Souper Tearment Of Encker They Souper Souper Soupers) 27250 (Souper Tearment Of Encher They's Souper Soupers) 27251 (Souper Tearment Of Encher They's Soupers) 27252 (Souper Tearment Of Encher They's Soupers) 27253 (Souper Tearment Of Encher They's Soupers) 27254 (Souper Tearment Of Encher They's Soupers) 27255 (Soupers) 27255 (Souper Tearment Of Encher They's Soupers) 27256 (Souper Tearment Of Encher They's Soupers) 27256 (Souper Tearment Of Encher They's Soupers) 27256 (Souper Tearment Of Encher They's Soupers) 27257 (Soupers) 27257 (  |   |   | \$872.26  |
| 27246 (Does Treatment Of Broken High. Trochamies: 27246 (Does Treatment Of Evote High Brow Living Internal Floation 27250) Closed Treatment Of Floridocation, Transmiss. (Willoud Avestmesis 27250) Treatment Of Closed Floations. Transmiss. (Willoud Avestmesis) 27252 (Appen Treatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27252 (Appen Treatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27252 (Appen Treatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27252 (Preatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27253 (Preatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27253 (Preatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27255 (Preatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27255 (Preatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27256 (Spotal Treatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27256 (Spotal Treatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27257 (Spotal Treatment Of Spotal Avestmesis) 27257 (Spotal Treatment Of Spotal State Of Transmiss.) (Willoud Avestmesis) 27257 (Spotal Treatment Of Spotal Avestmesis) 27258 (Spotal Treatment Of Spotal Avestmesis) 27258 (Spotal Avestment Of Spotal Avestmesis) 27258 (Spotal Avestment Of Spotal Avestmesis)   |   | · ·   | \$1,110.07  |
| 22725 Couse of Teatment Of Experiment Comments ("Notice National Institute Comments of Experiment Comments ("Notice National Institute Comments Comment  | 27245   | Surgical Treatment Of Broken Thigh Bone With Implant  | \$1,232.81  |
| 27250 Closed Treatment Of Hip Dislocation, Tharmonic Regional Proteins (1994) 27252 General Colour Hip Dislocation, Tharmonic Regional Proteins (1994) 27253 Closed Treatment Of Hip Dislocation, Traumatic, Without Internal Fraction (1994) 27254 General Colour Hip Dislocation, Traumatic, Without Internal Fraction (1994) 27255 Treatment Of Sportaneous Hip Dislocation (Developmental Internal Proteins (1994) 27257 Treatment Of Sportaneous Hip Dislocation (Developmental Internal Proteins (1994) 27257 Treatment Of Sportaneous Hip Dislocation (Developmental Internal Proteins (1994) 27257 Treatment Of Congratinal Hip Dislocation (Developmental Internal Proteins (1994) 27257 Treatment Of Congratinal Hip Dislocation (Developmental Internal Proteins (1994) 27258 Closed Treatment Of Sportaneous Hip Dislocation (Developmental Internal Proteins (1994) 27258 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Closed Treatment Of Post Hip Attroplasty Dislocation (1994) 27259 Clo  | 27246   | Closed Treatment Of Broken Hip, Trochanter  | \$348.81  |
| 27252 (Charlement Of Closed Hip Dislocation, Traumania; Requiring Ansenbesia 27255 (Open Treatment Of Hip Dislocation, Traumania; With Acababular Wall And Femoral Head Fracture, With Or Without Internal Of Enternal Fraction 27255 (Open Treatment Of Hip Dislocation, Traumania; Without Competition of Pred Production, 2014 (Or Without Internal Of Enternal Fraction) 27256 (Assenbesia; Without Manipulation) 27256 (Open Treatment Of Expostration) By Adhabition, Spirit Of Traction; With Manipulation Requiring Ansenbesia 27256 (Open Treatment Of Expostration) By Adhabition, Spirit Of Traction; With Manipulation Requiring Ansenbesia 27256 (Open Treatment Of Expostration) By Adhabition, With Discontinuous Hip Discon  | 27248   | Open Treatment Of Broken Thigh Bone Using Internal Fixation   | \$679.02  |
| 27253 Open Treatment Of Hip Dislocation, Traumatic, With Acetabular Wall And Ferroral Head Fracture. With Or Without Internal Flustion Part Part Part Part Part Part Part Part  | 27250   | Closed Treatment Of Hip Dislocation, Traumatic; Without Anesthesia  | \$175.16  |
| 27224 Open Treatment Of Hip Dislocation, Triumatic, With Acetabular Wall And Femoral Head Fracture, With Or Without Internal Or External Floation String Treatment of Spontaneous Hip Dislocation (Developmental, Including Congental Or Pathological), By Aboution, Sprint Or Traction, Without Managhating American His Work of Spontaneous Hip Dislocation (Developmental, Including Congental Or Pathological), By Aboution, Sprint Or Tractions, Without Managhating Americans.  27226 Fractions of Programment Or Spontaneous Hip Dislocation, Sprint Or Traction, With Anaghatinian Repailing Americans.  27236 Acetabulary (Recompany) (1994) (1  | 27252   | Treatment Of Closed Hip Dislocation, Traumatic; Requiring Anesthesia  | \$544.81  |
| 27224 Open Treatment Of Hip Dislocation, Triumatic, With Acetabular Wall And Femoral Head Fracture, With Or Without Internal Or External Floation String Treatment of Spontaneous Hip Dislocation (Developmental, Including Congental Or Pathological), By Aboution, Sprint Or Traction, Without Managhating American His Work of Spontaneous Hip Dislocation (Developmental, Including Congental Or Pathological), By Aboution, Sprint Or Tractions, Without Managhating Americans.  27226 Fractions of Programment Or Spontaneous Hip Dislocation, Sprint Or Traction, With Anaghatinian Repailing Americans.  27236 Acetabulary (Recompany) (1994) (1  | 27253   | Open Treatment Of Hip Dislocation, Traumatic, Without Internal Fixation   | \$854.47  |
| Testiment of Spontaneous Hip Delacciation (Developmental, Incubring Congenital Of Pathological), By Abacticos, Spirit Of Traction; Without Manipulation (2226) Treatment of Congenital Hip Delacciation, By Abacticos, Spirit of Traction, With Manipulation Requiring Anesthesia Septiment of Congenital Hip Delacciation, By Abacticos, Spirit of Traction, With Manipulation Requiring Anesthesia (2226) Den Treatment of Spontaneous Hip Delacciation, Developmental, Incubring Congenital Or Particological), Repiscorement of French Head In 2015 December 19 (2015) December   |   |   | *   |
| Testiment of Spontaneous Hip Delacciation (Developmental, Incubring Congenital Of Pathological), By Abacticos, Spirit Of Traction; Without Manipulation (2226) Treatment of Congenital Hip Delacciation, By Abacticos, Spirit of Traction, With Manipulation Requiring Anesthesia Septiment of Congenital Hip Delacciation, By Abacticos, Spirit of Traction, With Manipulation Requiring Anesthesia (2226) Den Treatment of Spontaneous Hip Delacciation, Developmental, Incubring Congenital Or Particological), Repiscorement of French Head In 2015 December 19 (2015) December   | 27254   | Open Treatment Of Hip Dislocation, Traumatic, With Acetabular Wall And Femoral Head Fracture, With Or Without Internal Or External Fixation   | \$1 149 94  |
| 2226 Anesthesin, Without Manipulation.  \$227.72 (277 Intentiment Congenital High Disbocation, By Abduction, Spint Or Traction; With Manipulation Requiring Anesthesia \$220.12 (279 Pero Treatment Of Spontaneous High Disbocation (Developmental), Including Congenital Or Pathological), Replacement Of Ferroral Head In 277-280 (279 Pero Treatment Of Spontaneous High Disbocation, With Shortening \$1, 1912.272 (279 Pero Treatment Of Spontaneous High Disbocation, With Shortening \$1, 1912.272 (279 Pero Treatment Of Spontaneous High Disbocation, With Shortening \$1, 1912.272 (279 Pero Treatment Of Pero High Art The Joint \$2, 1912.272 (279 Pero Treatment Of Pero High Art The Joint \$2, 1912.272 (279 Pero Pero Spontaneous High Disbocation, With Shortening \$2, 1912.272 (279 Pero Pero Spontaneous High Disbocation, High Spontaneous High Spontaneou                                  |   |   | <b>*</b> 1,110101   |
| 2255   Testiment Of Congrainal Hig Distocation, By Abduction, Splint Of Traction, With Manipulation Requiring Anesthesia  22583   Acestalutum (Including Tentotony, Etc.)  22583   Acestalutum (Including Tentotony, Etc.)  22593   Acestalutum (Including Tentotony, Etc.)  22594   Acestalutum (Including Tentotony, Etc.)  22595   Acestalutum (Including Tentotony, Etc.)  22595   Acestalutum (Including Tentotony, Etc.)  22596   Acestalutum (Including Tentotony, Etc.)  22597   Acestalutum (Including Tentotony, Etc.)  22598   Acestalutum (Including Tentotony, Etc.)  22599   Acestalutum (Including Tentotony, Etc.)  22590   Acest  | 27256   |   | \$237.26  |
| Depen Treatment Of Spontaneous Hp Disocation (Developmental, Including Congenital Or Pathological), Replacement Of Femoral Head in 272280 (Doorn Treatment Of Spontaneous Hp Disocation, With Shortening St. 139122 (2000). Treatment Of Port Hp Arthroplasty Disocation, Without Anesthesia \$433.88 (27286). Closed Treatment Of Port Hp Arthroplasty Disocation, Without Anesthesia \$433.88 (27286). Closed Treatment Of Port Hp Arthroplasty Disocation, Requiring Regional Or General Anesthesia \$433.88 (27286). Closed Treatment Of Port Hp Arthroplasty Disocation, Requiring Regional Or General Anesthesia \$516.37 (27286). Closed Treatment Of Femoral Eracture, Promate End, Head, With Narpolletin \$500.000 (27286). Closed Treatment Of Femoral Eracture, Promate End, Head, With Narpolletin \$500.000 (27286). Closed Treatment Of Femoral Eracture, Promate End, Head With Narpolletin \$500.000 (27286). Closed Treatment Of Femoral Eracture, Promate End, Head With Narpolletin \$500.000 (27286). Closed Treatment Of Femoral Eracture, Promate End, Head With Narpolletin \$500.000 (27286). Closed Treatment Of Femoral Eracture, Promate End, Head With Narpolletin \$500.000 (27286). Closed Treatment Promate End, 1500.000 (27286). Closed Treatment End, 1500.000 (27286                                |   | , l   |   |
| 27258   Open Treatment OF Poet Hop Arthropists by Observation, With Shortening   \$1,347.2755   Depart Treatment OF Poet Hop Arthropists by Observation, With Only Amerithesia   \$1,342.27256   Decord Treatment OF Poet Hop Arthropists by Observation, Requiring Regional Or General Anesthesia   \$13,383.27267   Decord Treatment OF Device Hop Arthropists by Observation, Requiring Regional Or General Anesthesia   \$13,283.27267   Decord Treatment OF Device Hop Arthropists by Observation, Requiring Regional Or General Anesthesia   \$13,27267   Decord Treatment OF Device Hop Arthropists by Observation, Requiring Regional Or General Anesthesia   \$10,2726   Decord Treatment OF Device Hop Arthropists   \$10,2           | 27207   |   | Ψ020.10   |
| 25295 (Desert Treatment Of Post Inf Arthropisky Dislocation, With Strotning 25295 (Closed Treatment Of Post Inf Arthropisky Dislocation, Without Anesthesis 25226 (Glosed Treatment Of Post Inf Arthropisky Dislocation, Without Anesthesis 25226 (Glosed Treatment Of Post Inf Arthropisky Dislocation, Requiring Regional Or General Anesthesis 25226 (Glosed Treatment Of Emoral Fracture, Proximal End, Head, With Manipulation 25226 (Glosed Treatment Of Emoral Fracture, Proximal End, Head, With Manipulation 25226 (Glosed Treatment Of Emoral Fracture, Proximal End, Head, With Manipulation 25227 (Glosed Treatment Of Emoral Fracture, Proximal End, Head, Includes Internal Fixation, When Performed 25227 (Glosed Treatment Of Emoral Fracture, Proximal End, Head, Includes Internal Fraction, When Performed 25227 (Glosed Treatment Of Emoral Fracture, Proximal End, Head, Includes Internal Fraction, When Performed 25227 (Glosed Treatment Of Emoral Fracture, Proximal End, Head, Includes Internal Fraction, When Performed 25227 (Glosed Treatment Of Emoral Fracture, Proximal End, Head, Includes Internal Fraction, When Performed 25227 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25227 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proximal Fraction, Proximal Fraction, When Performed 25222 (Glosed Treatment Of Emoral Fraction, Proxim  | 27258   |   | \$1 110 86  |
| 27206 Cosed Treatment Of Peal Hip Arthroplasty Dislocation, Without Anesthesia 27267 Cosed Treatment Of Broken Hip, At The Joint 27268 Cosed Treatment Of Broken Hip, At The Joint 27268 Cosed Treatment Of Broken Hip, At The Joint 27268 Cosed Treatment Of Forent Hip Arthroplasty Dislocation, Requiring Regional Or General Anesthesia 27269 Cosed Treatment Of Femoral Fracture, Proximal End, Head, With Manipulation 27269 Open Treatment Of Femoral Fracture, Proximal End, Head, Houdes Internal Fundion, When Performed 27276 Manipulation, Hip Joint Requiring General Anesthesia 27276 Manipulation, Hip Joint Requiring General Anesthesia 272777 Fusion Of Parke, Joint Indusing Joint Implient Using Imaging Guidance 27276 Fusion Scienciale, Lond Trovagle, The Skin Or Memorally Invasives Using Imaging Guidance 27276 Fusion Of Scienciale, Joint Industry Invasives Using Imaging Guidance 27276 Fusion Of Scienciale, Joint Invasive Library Science Company (Invasive Library Proximal   |   |   |   |
| 22686 (Sosed Treatment of Post Hip Anthropises) Dislocation, Requiring Regional Or General Anesthesia  5510.27  27686 (Colosed Treatment of Fernoral Fracture, Proximal End, Head; With Manipulation  5500.27  27786 (Sosed Treatment of Fernoral Fracture, Proximal End, Head; With Manipulation  5500.27  27787 (Sosed Treatment of Fernoral Fracture, Proximal End, Head; With Manipulation  5500.27  27787 (Fastor) Of Wed, John More (Fastor)   |   |   |   |
| 22267   Gosed Treatment Of Broken Hip. At The Joint 22268   Gosed Treatment Of Femoral Fracture, Proximal End, Head; With Manipulation 22269   Open Treatment Of Femoral Fracture, Proximal End, Head; Includes Internal Fixation, When Performed 31,203,98 222726   Fusion Of Petric Joint Including General Anaelyses   222727   Manipulation, Hip. Joint, Reguing General Anaelyses   222726   Fusion Of Petric Joint Including Joint Impient Using Imaging Guidance   222726   Fusion Of Sacroliac Joint Through The Skin Of Manipulation   222726   Fusion Of Sacroliac Joint Through The Skin Of Manipulation   22226   Fusion Of Sacroliac Joint Charles Benes   22226   Fusion Of Sacroliac Joint Charles Benes   22226   Fusion Of Petric Joint Between Public Benes   22226   Fusion Of Petric Joint Between Public Benes   22226   Fusion Of Petric Joint Will Incision Or Partial Removal Of Thigh Bone Below Neck   22226   Sacroliad Anaelysis   22227   Sacroliad Anaelysis   22228   Sacroliad Anaelysis   22229   Sacroliad Anaelysis   22220   Sacroliad Anaelysis   22221   Sacroliad Anaelysis   22221   Sacroliad Anaelysis   22222   Sacroliad Anaelysis   22222   Sacroliad Anaelysis   22223   Sacroliad Anaelysis   22224   Sacroliad Anaelysis   22225   Sacroliad Anaelysis   22226   Sacroliad Anaelysis   22226   Sacroliad Anaelysis   22227   Sacroliad Anaelysis   22228   Sacroliad Anaelysis   22229   Sacroliad Anaelysis   22229   Sacroliad Anaelysis   22220   Sacroliad Anaelysis   22221   Sacroliad Anaelysis   22222   Sacroliad Anaelysis   22222   Sacroliad Anaelysis   22223   Sacroliad Anaelysis   22224   Sacroliad Anaelysis   22224   Sacroliad Anaelysis   22224   Sacroliad Anaelysis   22225   S  |   |   | •   |
| 27289 Giber Teatment OF Femoral Fracture, Proximal End, Head, Wild Manipulation 31,262.98 27279 Manipulation, Hip Joint, Requiring General Ancesthesia 27279 Fusion OF Peter Joint Producing Joint Injent User January 1972 (1972)  |   |   |   |
| 27286 Januarion Circ Femoral Fracture, Proximal End, Hoad, Includes Internal Fixation, When Performed \$1,252,32 27276 January (1998) 1999 1999 1999 1999 1999 1999 1999  |   | · ·   |   |
| 272776   Manipulation, Hip Joint, Requiring General Ansesthesia   5169.728.64   27279   Fusion Sacrolike, Joint Through The Skin Or Minimally Invasive Using Image Guidance   510,228.64   27279   Eusion Sacrolike, Joint Through The Skin Or Minimally Invasive Using Image Guidance   511,200.05   27282   Fusion Of Joint Between Public Bones   512,000.05   27283   Fusion Of Joint Between Public Bones   512,000.05   27283   Fusion Of Joint Between Public Bones   512,000.05   27284   Fusion Of Joint Between Public Bones   512,000.05   27286   Fusion Of Joint Between Public Bones   512,000.05   27286   Fusion Of Joint Between Public Bones   512,000.05   27286   Fusion Of Joint Bones   512,000.05   27288   Fusion Of Joint Bones   512,000.05   27289   Fusion Of Joint Bones   512,000.05   27290   Fusion Of Joint Bones   512,000.05   27291   Fusion Of Joint Bones   512,000.05   27291   Fusion Of Joint Bones   512,000.05   27292   Fusion Of Joint Bones   512,000.05   27293   Fusion Of Joint Bones   512,000.05   27293   Fusion Of Joint Bones   512,000.05   27294   Fusion Of Joint Bones   512,000.05   27294   Fusion Of Joint Bones   512,000.05   27295   Fusion Of Joint Bones   512,000.05   27296   Fusion Of Joint Bones   512,000.05   27296   Fusion Of Joint B  |   |   |   |
| State of Pelvis ont Including Joset Implient Using Imaging Guidance   \$10,728.64   Zizzzz Par Fusion Scanolina John Through The Sikn Or Minimally Invasive Using Image Guidance   \$1,200.02   Zizzzz Par Fusion Or Sacrolina John Through The Sikn Or Minimally Invasive Using Image Guidance   \$1,200.02   Zizzzz Par Fusion Or Hip Joint   \$1,414.16   Zizzzz Par Fusion Or Hip Joint   \$1,414.16   Zizzzz Par Fusion Or Hip Joint   \$1,414.16   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Region   \$4,414.86   Zizzz Par Fusion Or Hip Delvis Or Kene Avas. Subcutaneous: Less Than 5 Cm   \$4,425.16   Zizzzi Par Fusion Or Hip Delvis Or Kene Avas. Subcutaneous: Less Than 5 Cm   \$4,425.16   Zizzzi Par Fusion Or Hip Delvis Or Kene Avas. Subcutaneous: Less          |   |   | \$1,263.96  |
| Section   Sacroliac Joint Through The Skin Or Minimaly Invasive Using Image Guidance   \$13.00.   27282   Fusion Of Joint Between Public Bores   \$784.55.   27286   Fusion Of Hip Joint   \$1.445.55.   27286   Fusion Of Hip Joint   \$1.455.55.   27286   Fusion Procedure, Perkis Of Hip Joint   \$1.255.55.   27280   Initiated Procedure, Perkis Of Hip Joint   \$1.255.55.   27290   Initiated Procedure, Perkis Of Hip Joint   \$1.255.55.   27290   Initiated Procedure, Perkis Of Hip Joint   \$1.255.55.   27291   Initiated Procedure, Perkis Of Hip Joint   \$1.255.55.   27291   Initiated Procedure, Perkis Of Hip Joint   \$1.255.55.   27291   Initiated Procedure, Perkis Of Hip Joint   \$1.255.55.   27292   Initiated Procedure, Perkis Of Hip Joint   \$1.255.55.   27293   Initiation Of Himpited Perkis Of Hip Joint   \$1.255.55.   27294   Initiation   \$1.255.55.   27294   Initiation   \$1.255.55.   27295   Initiation |   |   | \$168.72  |
| 27280   Fusion Of Sacroliac Joint Obtaining Bone Graft Open Procedure   \$1,200.05   27284   Fusion Of Hip Joint   \$1,200.05   27286   Fusion Of Hip Joint   \$1,200.05   27295   Destroitation Of Hip Joint   \$1,200.05   27296   Price Papers   Period Procedure, Pebris Of Hip Joint   \$1,200.05   27207   Incision And Drainage, Deap Abosess, Bursa, Or Hematoma, Thigh Or Knee Region   \$4,000.05   27208   Removal Of Tissue At Thing Or Knee Region, Deep Procedure   \$4,400.05   27208   Removal Of Tissue At Thing Or Knee Region, Deep Procedure   \$4,400.05   27209   Removal Of Tissue At Thing Or Knee Region, Deep Procedure   \$4,400.05   27200   Resistant Of Hipp Or Knee Region   \$4,000.05   27201   Resistant Of Hipp Or Knee Region   \$4,000.05   27202   Removal Of Tissue At Thing Or Knee Region   \$4,000.05   27203   Removal Of Tissue At Thing Or Knee Region   \$4,000.05   27204   Resistant   \$4,000.05   27205   Removal Of Tingh Or Knee Region   \$4,000.05   27206   Removal Of Tingh Or Knee Region   \$4,000.05   27206   Removal Of Thigh Or Knee Region   \$4,000.05   27207   Resistant   \$4,000.05   27208   Reurectomy, Popificial   \$4,000.05   27208   Reurectomy, Popificial   \$4,000.05   27209   Reurectomy, Popificial   \$4,000.05   27210   Reurectomy, Popificial   \$4,000.05   27220   Reurectomy, Popificial   \$4,000.05   27221   Reurectomy, Popificial   \$4,000.05   27222   Reurectomy, Popificial   \$4,000.05   27223   Reurectomy, Popificial   \$4,000.05   27234   Reurectomy, Popificial   \$4,000.05   27235   Reurectomy, Popificial   \$4,000.05   272     |   |   | \$10,728.64   |
| 27282   Suison Of Joint Between Public Bores   \$784.55   27282   Fuison Of Irly Joint   With Incision Or Partial Removal Of Thigh Bone Below Neck   \$1.478.55   27282   Institute Of Irly Joint   \$1.486.55   27282   Districted Bodinal Amputation   (Hand Quarter Amputation)   \$1.286.178.55   27283   Districted Procedure, Pebris Of Hip Joint   Price By Report   27301   Indission And Drainage, Deep Abscoss, Bursa, Of Hermatoma, Thigh Or Knee Region   \$1.281.17   27303   Indission, Deep, With Depening Of Bone Cortex, Fernur Or Knee (Eg. Ostnomyelitis Or Bone Abscess)   \$375.88   27303   Reinzon Of Tinsue At Thigh Or Knee Region, Open Procedure   \$444.98   27303   Indission, Or Tondon Of Thigh Or Hamstring Muscles, Accessed Through The Skin   \$382.11   27307   Indission Or Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin   \$382.22   27323   Biospoy Of Thigh Or Knee Region Tissue, Deep   \$382.23   27323   Biospoy Of Thigh Or Knee Region Tissue, Deep   \$382.23   27324   Biospoy Of Thigh Or Knee Region Tissue, Deep   \$382.23   27325   Neurectomy, Peptitiest (Gastrocemius)   \$382.24   27327   Review Common   \$382.24   27327   Review Common   \$382.24   27328   Review Common   \$382.24   27329   Review Common   \$382.24   27320   Review Common   \$382.24   27321   Review Common   \$382.24   27322   Review Common   \$382.24   27323   Review Common   \$382.24   27324   Review Common   \$382.24   27325   Review Common   \$382.24   27326   Review Common   \$382.24   27327   Review Common   \$382.24   27328   Review Common   \$382.24   27329   Review Common   \$382.24   27320   Review Common   \$382.24   27330   Review Common   \$382.24   27331   Review Common   \$382.24   27332   Review Common   \$382.24   27333   Review Common   \$382.24   27334   Removal Cleas Than 5 Centimeters)   Tissue Growth Of Thigh Or Knee   27330   Africtomy, Knee; With Synovectomy, Knee; Son Or Greater   27330   Africtomy, Knee; With Synovectomy, Knee; Son Or Greater   27333   Removal Cleas Than 5 Centimeters of Centimeters of Centimeters of            | 27279   | Fusion Sacroiliac Joint Through The Skin Or Minimally Invasive Using Image Guidance   | \$613.08  |
| 27282   Suison Of Joint Between Public Bores   \$784.55   27282   Fuison Of Irly Joint   With Incision Or Partial Removal Of Thigh Bone Below Neck   \$1.478.55   27282   Institute Of Irly Joint   \$1.486.55   27282   Districted Bodinal Amputation   (Hand Quarter Amputation)   \$1.286.178.55   27283   Districted Procedure, Pebris Of Hip Joint   Price By Report   27301   Indission And Drainage, Deep Abscoss, Bursa, Of Hermatoma, Thigh Or Knee Region   \$1.281.17   27303   Indission, Deep, With Depening Of Bone Cortex, Fernur Or Knee (Eg. Ostnomyelitis Or Bone Abscess)   \$375.88   27303   Reinzon Of Tinsue At Thigh Or Knee Region, Open Procedure   \$444.98   27303   Indission, Or Tondon Of Thigh Or Hamstring Muscles, Accessed Through The Skin   \$382.11   27307   Indission Or Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin   \$382.22   27323   Biospoy Of Thigh Or Knee Region Tissue, Deep   \$382.23   27323   Biospoy Of Thigh Or Knee Region Tissue, Deep   \$382.23   27324   Biospoy Of Thigh Or Knee Region Tissue, Deep   \$382.23   27325   Neurectomy, Peptitiest (Gastrocemius)   \$382.24   27327   Review Common   \$382.24   27327   Review Common   \$382.24   27328   Review Common   \$382.24   27329   Review Common   \$382.24   27320   Review Common   \$382.24   27321   Review Common   \$382.24   27322   Review Common   \$382.24   27323   Review Common   \$382.24   27324   Review Common   \$382.24   27325   Review Common   \$382.24   27326   Review Common   \$382.24   27327   Review Common   \$382.24   27328   Review Common   \$382.24   27329   Review Common   \$382.24   27320   Review Common   \$382.24   27330   Review Common   \$382.24   27331   Review Common   \$382.24   27332   Review Common   \$382.24   27333   Review Common   \$382.24   27334   Removal Cleas Than 5 Centimeters)   Tissue Growth Of Thigh Or Knee   27330   Africtomy, Knee; With Synovectomy, Knee; Son Or Greater   27330   Africtomy, Knee; With Synovectomy, Knee; Son Or Greater   27333   Removal Cleas Than 5 Centimeters of Centimeters of Centimeters of            | 27280   | Fusion Of Sacroiliac Joint Obtaining Bone Graft Open Procedure  | \$1,200.02  |
| 27286   Susion Of Hip Joint With Incision Or Partial Removal Of Thigh Bone Below Neck   |   |   | \$784.55  |
| 27286 F. Usion Of Hip Joint With Incision Or Partial Removal Of Thigh Bone Below Neck         \$1.486.5           27280 Interprehabdominal Amputation (Find Quarter Amputation)         \$1.866.1           27295 Districtuation Of Hip         \$1.286.1           27295 Districtuation Of Hip         \$1.286.1           27295 Districtuation Of Hip         \$1.286.1           27290 Unitsed Procedure, Pevis Or Hip Joint         \$6.878.8           27303 Incision And Drainago, Deep Abscess, Bursa, Or Hematoma, Thigh Or Knee Region         \$6.861.8           27303 Incision Or Period Of Hip Or Hematring Muscles, Accessed Through The Skin         \$6.18.8           27306 Incision Of Treadon Of Thigh Or Hematring Muscles, Accessed Through The Skin         \$2.811.1           27301 Exploration, Drainago, Or Removal Of Foreign Body in Kinee Joint         \$7.852.2           27310 Exploration, Drainago, Or Removal Of Foreign Body in Kinee Joint         \$7.852.2           27321 Exploration, Drainago, Or Removal Of Foreign Body in Kinee Joint         \$7.852.2           27323 Exploration, Drainago, Or Replay Tissue, Superficial         \$5.852.6           27324 Bloops Of Thigh Or Knee Region Tissue, Deep         \$3.722.2           27325 Neuroctory, Popilizal Giscorcentuse         \$5.852.6           27326 Neuroctory, Popilizal Giscorcentuse         \$5.852.6           27328 Neuroctory, Popilizal Giscorcentuse         \$5.852.6 <td< td=""><td></td><td></td><td>\$1,441.67</td></td<>  |   |   | \$1,441.67  |
| State   Stat  |   |   |   |
| \$1.261.11  |   | ·   |   |
| 27293 [Unisted Procedure, Pelvis Or Hip Joint         Price By Report           27301 [Incision, And Drainage, Deep Abscess, Bursa, Or Hernatoma, Thigh Or Knee Region         \$461.85           27303 [Incision, Deep, With Opening Of Bone Cortex, Femur Or Knee (Eg., Osteonyellisis Or Bone Abscess)         \$575.88           27305 [Removal Of Tissue, A Thigh Or Knee Region, Open Procedure         \$444.99           27305 [Removal Of Tissue, A Thigh Or Knee Region, Open Procedure         \$262.72           27307 [Incision Of Tissue, A Thigh Or Knee Region, Assessed Through The Skin         \$261.72           27307 [Incision Of Multiple Tendens of Unity Or Hemating Muscles, Accessed Through The Skin         \$262.72           27307 [Incision Of Multiple Tendens of Unity Or Knee Region Tissue, Superficial         \$260.52           27324 [Stopsy Of Thigh Or Knee Region Tissue, Superficial         \$260.55           27325 [Neurectorny, Popileal (Sastroonemius)         \$322.92           27326 [Neurectorny, Popileal (Sastroonemius)         \$462.41           27327 [Neurectorny, Popileal (Sastroonemius)         \$462.41           27328 [Xisosion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subclusineous; Less Than 3 Cm         \$351.62           27329 [Xisosion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subclusineous; Less Than 5 Cm         \$351.62           27320 [Xisosion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subclusineous; Less Than 5 Cm         \$351.82           27323 [Xisosion, Tumor,   |   |   | + ,   |
| \$461.83  |   | ·   |   |
| 27303 Incision, Deep, With Opening Of Bone Cortex, Fenru Or Knee (Eg., Osteomyelitis Or Bone Abscess)       \$575.88         27306 Removal Of Tissue At Thigh Or Knee Region, Open Procedure       \$444.98         27306 Incision Of Indication Of Thigh Or Hamstring Muscles, Accessed Through The Skin       \$392.25         27307 Incision Of Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin       \$392.25         27307 Incision Or Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin       \$392.25         27308 Incision Or Multiple Tendons Of Thigh Or Knee Region Tissue, Superficial       \$260.55         27324 Blopsy Of Thigh Or Knee Region Tissue, Deep       \$357.98         27325 Neurectomy, Popilized (Sastrocnemius)       \$520.00         27326 Neurectomy, Popilized (Sastrocnemius)       \$352.00         27327 Roverctomy, Popilized (Sastrocnemius)       \$351.62         27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm       \$351.62         27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subdacial (Eg., Intramuscular); Less Than 5 Cm       \$351.62         27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subdacial (Eg., Intramuscular); Less Than 5 Cm       \$351.62         27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subdacial (Eg., Intramuscular); Less Than 5 Cm       \$352.52         27330 Arthrotorny, Knee; With Synovale Blopsy Only       \$352.52         27331 Expl   |   |   |   |
| 27306   Removal Of Tissue At Thigh Or Knee Region, Open Procedure   \$444.95     27306   Incision Of Tendon Of Thigh Or Hamstring Muscles, Accessed Through The Skin   \$261.11     27307   Incision Of Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin   \$292.25     27310   Exploration, Dreinage, Or Removal Of Foreign Body in Knee Joint   \$250.55     27322   Sloppsy Of Thigh Or Knee Region Tissue, Superficial   \$250.55     27323   Sloppsy Of Thigh Or Knee Region Tissue, Superficial   \$250.55     27324   Sloppsy Of Thigh Or Knee Region Tissue, Deep   \$372.96     27325   Neurectomy, Hamstring Muscle   \$520.00     27326   Neurectomy, Hamstring Muscle   \$520.00     27326   Neurectomy, Hamstring Muscle   \$520.00     27327   Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subtascial (Eg., Intramuscular); Less Than 3 Cm   \$482.41     27327   Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subtascial (Eg., Intramuscular); Less Than 5 Cm   \$564.88     27329   Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee Area, Subtascial (Eg., Intramuscular); Less Than 5 Cm   \$564.88     27331   Exploration, Biopsy, Or Removal Of Loos Or Foreign Body Of Knee   \$488.00     27332   Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint   \$592.55     27333   Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint   \$592.55     27334   Exploration, Biopsy, Or Removal Of Loos Or Foreign Body Of Knee Joint   \$592.55     27335   Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint   \$592.55     27336   Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint   \$592.55     27337   Exploration, With Synovectomy, Knee; 3 Cm Or Greater   \$798.01     27338   Removal Of Loos Of Membrane Covering Behind Knee Joint   \$798.01     27339   Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater   \$798.01     27340   Excision Or Leventrage Of Bone Cyst Or Benign Tumor Of Femur, With Homogenous Graft (Includes Obtaining Graft)   \$                     |   |   |   |
| 27306 [Incision Of Tendon Of Thigh Of Hamstring Muscles, Accessed Through The Skin         \$392.22           27307 [Incision Of Hullple Tendons Of Thigh Of Hamstring Muscles, Accessed Through The Skin         \$758.32           27307 [Incision Of Mullple Tendons Of Thigh Of Name (Hamstring Muscles)         \$758.32           27323 [Biopsy Of Thigh Of Knee Region Tissue, Superficial         \$200.56           27324 [Slopsy Of Thigh Of Knee Region Tissue, Deep         \$372.72           27325 [Neurectorny, Popifical (Sastrocnemius)         \$520.00           27326 [Neurectorny, Popifical (Sastrocnemius)         \$520.00           27327 [Neurectorny, Popifical (Sastrocnemius)         \$520.00           27328 [Neurectorny, Neurel (Name (Name Value))         \$520.00           27328 [Neurectorny, Neurel (Name Value)         \$520.00 <td></td> <td></td> <td></td>  |   |   |   |
| 27307 Incision Of Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin  27318 Exploration, Drainage, Or Removal Of Preingin Body In Knee Joint  27328 Biopsy Of Thigh Or Knee Region Tissue, Superficial  27329 Biopsy Of Thigh Or Knee Region Tissue, Deep  27325 Neuroctomy, Hamstring Muscle  27326 Neuroctomy, Hamstring Muscle  27327 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm  27327 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm  27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm  27329 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm  27320 Existion, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm  27320 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee  27331 Exploration, Biopsy, Or Removal Of Losse Or Foreign Body Of Knee  27331 Exploration, Biopsy, Or Removal Of Losse Or Foreign Body Of Knee  27332 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint  27333 Removal Of Knee Joint Lining, Front Or Back  27334 Removal Of Knee Joint Lining, Front And Back  27336 Removal Of Knee Joint Lining, Front And Back  27336 Exploration, With Synovectomy, Knee; S Cm Or Greater  27340 Existion, Prepatellar Busa  27340 Existion, Prepatellar Busa  27340 Existion Or Cuestage Of Bone Cyst Or Benign Tumor Of Femur;  27350 Patellectomy Or Hemipatellectomy  2736 Existion Or Cuestage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft)  2736 Existion Or Cuestage Of Bone Cyst Or Benign Tumor Of Femur, With Homogenous Graft (Includes Obtaining Graft)  2736 Removal Or Cuestage Of Bone Cyst Or Benign Tumor Of Femur, With Homogenous Graft (Includes Obtaining Graft)  2736 Removal Or Cuestage Of Bone Cyst Or Benign Tumor Of Femur, With Homogenous Graft (Includes Obtaining Graft)  2736 Removal Or Cuestage Of Bone Cyst Or Benign Tumor Of Femur, Proximal Tibia And/Or Fibula (Eg. Osteomyelits O  |   | ů i   |   |
| 27313   Exploration, Drainage, Or Removal Of Foreign Body in Knee Joint   \$758.35  |   | ů ů ů   | \$261.11  |
| \$260,55  | 27307   | Incision Of Multiple Tendons Of Thigh Or Hamstring Muscles, Accessed Through The Skin   | \$392.29  |
| 197325   Biopey Of Thigh Or Knee Region Tissue, Deep   5372,95  | 27310   | Exploration, Drainage, Or Removal Of Foreign Body In Knee Joint   | \$758.35  |
| 27325 Neurectomy, Hamstring Muscle         \$520.05           27326 Neurectomy, Popileal (Gastrocnemius)         \$482.41           27326 Neurectomy, Popileal (Gastrocnemius)         \$351.62           27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subtascial (Eg. Intramuscular); Less Than 5 Cm         \$564.82           27329 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee         \$935.33           27330 Arthrotomy, Knee; With Synovala Biopsy Only         \$390.22           27331 Exploration, Biopsy, Or Removal Of Loose Or Foreign Body Of Knee         \$488.00           27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint         \$552.55           27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$552.55           27334 Removal Of Knee Joint Lining, Front Or Back         \$698.55           27335 Removal Of Knee Joint Lining, Front Or Back         \$698.55           27336 Park Throtomy, With Synovectomy, Knee; 3 Cm Or Greater         \$789.01           27335 Patriotomy, With Synovectomy, Knee; 5 Cm Or Greater         \$789.01           27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$448.04           27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$448.04           27345 Excision Of Leutage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)         \$862.22 <tr< td=""><td>27323</td><td>Biopsy Of Thigh Or Knee Region Tissue, Superficial</td><td>\$260.58</td></tr<>  | 27323   | Biopsy Of Thigh Or Knee Region Tissue, Superficial  | \$260.58  |
| \$482.41  | 27324   | Biopsy Of Thigh Or Knee Region Tissue, Deep   | \$372.98  |
| 27327 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm         \$351.62           27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm         \$564.85           27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm         \$395.32           27329 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee         \$395.32           27331 Exploration, Biopsy, Or Removal Of Lose Or Foreign Body Of Knee         \$488.00           27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint         \$522.52           27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$541.82           27334 Removal Of Knee Loint Lining, Front And Back         \$698.56           27335 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater         \$443.01           27340 Excision, Prepatellar Bursa         \$329.92           27345 Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Canglion), Knee         \$526.24           27350 Patellectomy Or Hemptalellacromy         \$667.52           27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Primary Autogenous Graft (Includes Obtaining Graft)         \$678.42           27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Primary Autogenous Graft (Includes Obtaining Graft)         \$765.42           27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Internal Fixation (List I   | 27325   | Neurectomy, Hamstring Muscle  | \$520.09  |
| 27327 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 3 Cm         \$351.62           27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm         \$564.85           27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subcutaneous; Less Than 5 Cm         \$395.32           27329 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee         \$395.32           27331 Exploration, Biopsy, Or Removal Of Lose Or Foreign Body Of Knee         \$488.00           27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint         \$522.52           27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$541.82           27334 Removal Of Knee Loint Lining, Front And Back         \$698.56           27335 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater         \$443.01           27340 Excision, Prepatellar Bursa         \$329.92           27345 Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Canglion), Knee         \$526.24           27350 Patellectomy Or Hemptalellacromy         \$667.52           27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Primary Autogenous Graft (Includes Obtaining Graft)         \$678.42           27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Primary Autogenous Graft (Includes Obtaining Graft)         \$765.42           27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Internal Fixation (List I   | 27326   | Neurectomy, Popliteal (Gastrocnemius)   | \$482.41  |
| 27328 Excision, Tumor, Soft Tissue Of Thigh Or Knee Area, Subtascial (Eg. Intramuscular); Less Than 5 Cm         \$564.88           27329 Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee         \$393.53           27331 Arhotomy, Knee; With Synovial Biopsy Only         \$390.22           27332 Exploration, Biopsy, Or Removal Of Loose Or Foreign Body Of Knee         \$488.00           27332 Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint         \$541.82           27333 Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$541.82           27334 Removal Of Knee Joint Lining, Front Or Back         \$698.62           27335 Removal Of Knee Joint Lining, Front And Back         \$699.62           27336 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater         \$443.01           27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater         \$443.01           27340 Excision, Prepatellar Bursa         \$329.93           27345 Excision Of Lesion Of Memiscus Or Capsule (Eg. Cyst, Ganglion), Knee         \$526.22           27350 Patellectomy Or Hemipatellectomy         \$667.52           27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft)         \$622.22           27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)         \$768.42           27356 Excision Or Curettage Of Bone Cyst Or   |   |   | \$351.62  |
| 27329         Removal (Less Than 5 Centimeters) Tissue Growth Of Thigh Or Knee         \$935.36           27330         Arthrotomy, Knee; With Sprovial Biopsy Only         \$390.22           27331         Exploration, Biopsy, Or Removal Of Lose Or Foreign Body Of Knee         \$488.00           27332         Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint         \$522.52           27333         Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$582.52           27334         Removal Of Knee Joint Lining, Front Or Back         \$689.55           27335         Removal Of Knee Joint Lining, Front And Back         \$699.65           27336         Removal Of Knee Joint Lining, Front And Back         \$699.62           27337         Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater         \$443.01           27334         Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater         \$798.01           27345         Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$448.04           27346         Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$448.04           27345         Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$448.04           27346         Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$448.04           27356         Exision Or Lesion Of Membrane Covering B  |   | , , , , , , , , , , , , , , , , , , ,   |   |
| 27330         Arthrotomy, Knee; With Synovial Biopsy Only         \$390.25           27331         Exploration, Biopsy, Or Removal Of Loose Or Foreign Body Of Knee         \$488.00           27332         Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint         \$592.55           27333         Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$541.82           27334         Removal Of Knee Joint Lining, Front Or Back         \$698.55           27335         Removal Of Knee Joint Lining, Front And Back         \$699.62           27337         Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater         \$443.01           27339         Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater         \$798.01           27340         Excision, Prepatellar Bursa         \$329.93           27345         Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$443.01           27346         Excision Of Cyst Of Membrane Covering Behind Knee Joint         \$442.01           27345         Excision Of Curettage Of Meniscus Or Capsule (Eg., Cyst. Ganglion), Knee         \$526.22           27355         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;         \$667.52           27355         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)         \$676.52           2   |   |   | *   |
| 27331         Exploration, Biopsy, Or Removal Of Loose Or Foreign Body Of Knee         \$488.00           27332         Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint         \$592.55           27333         Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$594.82           27333         Removal Of Knee Joint Lining, Front Or Back         \$698.55           27335         Removal Of Knee Joint Lining, Front And Back         \$699.62           27337         Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater         \$434.01           27339         Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater         \$798.01           27340         Excision, Prepatellar Bursa         \$329.93           27345         Excision Or Lesion Of Membrane Covering Behind Knee Joint         \$440.00           27340         Excision Of Lesion Of Membrane Covering Behind Knee Joint         \$440.00           27341         Excision Of Lesion Of Membrane Covering Behind Knee Joint         \$440.00           27345         Excision Of Lesion Of Membrane Covering Behind Knee Joint         \$667.52           27350         Patellectomy Or Hemipatellectomy         \$667.52           27355         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft         \$62.22           27356         Excision Or Curettage Of Bone Cyst Or   |   | · · · · · · · · · · · · · · · · · · ·   |   |
| 27332         Removal Of Knee Cartilage, Cartilage On The Inside Or Outside Of Knee Joint         \$592.59           27333         Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$541.82           27334         Removal Of Knee Joint Lining, Front Or Back         \$698.55           27335         Removal Of Knee Joint Lining, Front And Back         \$699.62           27336         Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater         \$443.01           27339         Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater         \$788.01           27340         Excision, Prepatellar Bursa         \$329.93           27345         Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$448.04           27346         Excision Of Cyst Of Membrane Covering Behind Knee Joint         \$448.04           27347         Excision Of Users of Membrane Covering Behind Knee Joint         \$467.52           27348         Patellectomy Or Hemipatellectomy         \$667.52           27355         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft         \$676.57           27356         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)         \$244.25           27366         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Pri   |   |   |   |
| 27333         Removal Of Knee Cartilage, Cartilage On The Inside And Outside Of Knee Joint         \$541.82           27334         Removal Of Knee Joint Lining, Front Or Back         \$698.55           27337         Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater         \$443.01           27339         Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater         \$443.01           27340         Excision, Prepatellar Bursa         \$329.93           27345         Removal Of Lesion Of Membrane Covering Behind Knee Joint         \$448.02           27340         Excision Of Lesion Of Membrane Covering Behind Knee Joint         \$448.02           27345         Removal Of Cyst Of Membrane Covering Behind Knee Joint         \$448.02           27345         Residenching or Hemipatellectomy         \$667.53           27350         Patellectomy Or Hemipatellectomy         \$667.53           27356         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;         \$622.22           27356         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft)         \$783.42           27358         Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)         \$244.22           27358         Excision Or Createge Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Pr   |   |   |   |
| 27334Removal Of Knee Joint Lining, Front Or Back\$698.5527335Removal Of Knee Joint Lining, Front And Back\$699.6527337Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater\$798.0127339Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater\$798.0127340Excision, Prepatellar Bursa\$329.9327345Removal Of Cyst Of Membrane Covering Behind Knee Joint\$448.0427347Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee\$526.2427350Patellectomy Or Hemipatellectomy\$667.5527355Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;\$622.2527356Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Homogenous Graft\$676.5727357Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Primary Autogenous Graft (Includes Obtaining Graft)\$783.4227358Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur, With Internal Fixation (List In Addition To Code For Primary Procedure)\$244.2527360Abscess)\$756.4427361Abscess)\$756.4427362Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee\$1,738.4227363Removal Foreign Body, Deep\$411.3327380Suture Of Tendon Below Knee, Primary\$639.9427381Suture Of Tendon Below Knee, Secondary Reconstruction\$890.2527385Suture Of Ruptured Muscle Of Thigh, Pimary\$639.9427386Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327387Repair Of  |   |   |   |
| 27335Removal Of Knee Joint Lining, Front And Back\$699.6227337Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater\$443.0127340Excision, Prepatellar Bursa\$329.9327341Excision, Prepatellar Bursa\$329.9327342Excision Of Cyst Of Membrane Covering Behind Knee Joint\$448.0427347Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee\$526.2427350Patellectomy Or Hemipatellectomy\$667.5527355Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;\$622.2527356Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft\$676.5727357Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)\$783.4227358Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)\$244.2527360Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone\$756.4427361Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee\$1,738.9427362Radical Resection Of Tumor, Femur Or Knee\$1,738.9727372Removal Foreign Body, Deep\$411.3327381Suture Of Tendon Below Knee, Primary\$628.7127382Suture Of Ruptured Muscle Of Thigh, Primary\$628.7127383Suture Of Ruptured Muscle Of Thigh, Secondary\$628.7127394Repair Of Hultiple Hamstring Tendons, Open Procedure\$3   |   | rkemoval of knee Cartilage, Cartilage on The Inside and Outside of Knee Joint   | \$592.59  |
| 27337 Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater \$443.01 27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$798.01 27340 Excision, Prepatellar Bursa \$329.93 27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint \$448.04 27347 Excision Of Lesion Of Memiscus Or Capsule (Eg, Cyst, Ganglion), Knee \$526.24 27350 Patellectomy Or Hemipatellectomy \$667.52 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft \$676.57 27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft) \$783.42 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) \$783.42 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) \$244.25 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) \$244.25 27360 Abscess) \$756.44 27361 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74 27368 Radical Resection Of Tumor, Femur Or Knee \$1,738.96 27378 Removal Foreign Body, Deep \$1,255.75 27381 Suture Of Tendon Below Knee, Primary \$839.94 27382 Suture Of Tendon Below Knee, Secondary Reconstruction \$839.94 27383 Suture Of Tendon Below Knee, Secondary Reconstruction \$839.94 27384 Suture Of Ruptured Muscle Of Thigh, Primary \$839.94 27385 Suture Of Ruptured Muscle Of Thigh, Secondary \$839.94 27386 Suture Of Hamstring Tendon, Open Procedure \$839.94 27387 Repair Of Multiple Hamstring Tendons, Open Procedure \$852.44 27388 Repair Of Multiple Hamstring Tendons, Open Procedure \$852.44 27389 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure  |   |   | \$592.59<br>\$541.82  |
| 27339 Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater \$798.01 Excision, Prepatellar Bursa \$329.93 Excision, Prepatellar Bursa \$329.93 Excision, Or Cyst Of Membrane Covering Behind Knee Joint \$448.04 \$27347 Excision Of Lesion Of Meniscus Or Capsule (Eg., Cyst, Ganglion), Knee \$526.24 \$27350 Patellectomy Or Hemipatellectomy \$667.53 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; \$622.25 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft \$676.57 \$27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) \$783.42 \$27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) \$244.25 Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg., Osteomyelitis Or Bone Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg., Osteomyelitis Or Bone Partial Excision (Craterization, Femur Or Knee \$1,554.74 \$27368 Radical Resection Of Tumor, Femur Or Knee \$1,738.90 Suture Of Tendon Below Knee, Primary \$839.94 \$27385 Suture Of Tendon Below Knee, Primary \$839.94 \$27385 Suture Of Tendon Below Knee, Secondary Reconstruction \$890.25 Suture Of Ruptured Muscle Of Thigh, Primary \$839.37 Suture Of Ruptured Muscle Of Thigh, Primary \$839.37 Repair Of Huntiple Hamstring Tendons, Open Procedure \$839.39 Repair Of Multiple Hamstring Tendons, Open Procedure \$839.29 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$27392 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$27392 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$27392 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$27392 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$250.00 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$250.00 Repair Of Multiple Hamstring Tendons, Open Procedure \$850.24 \$250.00 Repair Of   | 27334   | Removal Of Knee Joint Lining, Front Or Back   | \$592.59<br>\$541.82<br>\$698.59  |
| Excision, Prepatellar Bursa  \$329.93 27345 Removal Of Cyst Of Membrane Covering Behind Knee Joint  \$448.04 27347 Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee  \$526.24 27350 Patellectomy Or Hemipatellectomy  \$667.55 27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;  \$622.25 27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft  \$676.57 27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  \$783.42 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)  \$244.25  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone  27360 Abscess)  \$756.44 27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee  \$1,738.90 27369 Injection Of Contrast For Imaging Of Knee Joint  \$127372 Removal Foreign Body, Deep  \$341.33 27380 Suture Of Tendon Below Knee, Primary  \$27380 Suture Of Tendon Below Knee, Secondary Reconstruction  \$890.25 27385 Suture Of Ruptured Muscle Of Thigh, Primary  \$389.25 27385 Suture Of Ruptured Muscle Of Thigh, Secondary  \$391.8791.55 27397 Repair Of Humstring Tendons, Open Procedure  \$392.98 27398 Repair Of Multiple Hamstring Tendons, Open Procedure  \$352.44 27390 Repair Of Multiple Hamstring Tendons, Open Procedure   | 27334<br>27335  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62  |
| Removal Of Cyst Of Membrane Covering Behind Knee Joint   \$448.04   | 27334<br>27335<br>27337   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01  |
| Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Ganglion), Knee   \$526.24   | 27334<br>27335<br>27337<br>27339  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01  |
| Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Ganglion), Knee   \$526.24   | 27334<br>27335<br>27337<br>27339  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01  |
| Pattellectomy Or Hemipatellectomy  27355 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;  27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;  27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft (Includes Obtaining Graft)  27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)  27358 Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone  27360 Abscess)  27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee  27365 Radical Resection Of Tumor, Femur Or Knee  27369 Injection Of Contrast For Imaging Of Knee Joint  27370 Removal Foreign Body, Deep  27380 Suture Of Tendon Below Knee, Primary  27381 Suture Of Tendon Below Knee, Secondary Reconstruction  27385 Suture Of Ruptured Muscle Of Thigh, Primary  27386 Suture Of Ruptured Muscle Of Thigh, Primary  27387 Repair Of Hamstring Tendon, Open Procedure  27390 Repair Of Multiple Hamstring Tendons, Open Procedure  27392 Repair Of Multiple Hamstring Tendons, Open Procedure  27392 Repair Of Multiple Hamstring Tendons, Open Procedure   | 27334<br>27335<br>27337<br>27339<br>27340   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01  |
| Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;  27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft  27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)  27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)  27360 Abscess)  27360 Abscess)  27361 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee  27362 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee  27363 Injection Of Contrast For Imaging Of Knee Joint  27372 Removal Foreign Body, Deep  27380 Suture Of Tendon Below Knee, Primary  27381 Suture Of Tendon Below Knee, Secondary Reconstruction  27385 Suture Of Ruptured Muscle Of Thigh, Primary  27386 Suture Of Ruptured Muscle Of Thigh, Primary  27386 Suture Of Ruptured Muscle Of Thigh, Secondary  27390 Repair Of Hamstring Tendon, Open Procedure  27391 Repair Of Multiple Hamstring Tendons, Open Procedure  27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure   | 27334<br>27335<br>27337<br>27339<br>27340<br>27345  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01  |
| 27356 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft 27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) 27360 Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone 27361 Abscess) 27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee 27365 Radical Resection Of Tumor, Femur Or Knee 27366 Radical Resection Of Tumor, Femur Or Knee 27367 Injection Of Contrast For Imaging Of Knee Joint 2737 Removal Foreign Body, Deep 27380 Suture Of Tendon Below Knee, Primary 27381 Suture Of Tendon Below Knee, Secondary Reconstruction 27385 Suture Of Ruptured Muscle Of Thigh, Primary 27386 Suture Of Ruptured Muscle Of Thigh, Secondary 27386 Suture Of Ruptured Muscle Of Thigh, Secondary 27387 Repair Of Humstring Tendon, Open Procedure 27390 Repair Of Multiple Hamstring Tendons, Open Procedure 27391 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure  | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27347   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93  |
| 27357 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)  Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone  27360 Abscess)  27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee  27365 Radical Resection Of Tumor, Femur Or Knee  27366 Injection Of Contrast For Imaging Of Knee Joint  27372 Removal Foreign Body, Deep  27380 Suture Of Tendon Below Knee, Primary  27381 Suture Of Tendon Below Knee, Secondary Reconstruction  27385 Suture Of Ruptured Muscle Of Thigh, Primary  27386 Suture Of Ruptured Muscle Of Thigh, Secondary  27387 Repair Of Hamstring Tendon, Open Procedure  27390 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure  27391 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure   | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27347<br>27350  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53  |
| 27358 Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone 27360 Abscess) \$756.44 27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee 27365 Radical Resection Of Tumor, Femur Or Knee 27366 Injection Of Contrast For Imaging Of Knee Joint 27372 Removal Foreign Body, Deep 27380 Suture Of Tendon Below Knee, Primary 27380 Suture Of Tendon Below Knee, Secondary Reconstruction 27385 Suture Of Ruptured Muscle Of Thigh, Primary 27386 Suture Of Ruptured Muscle Of Thigh, Secondary 27386 Suture Of Ruptured Muscle Of Thigh, Secondary 27380 Repair Of Hamstring Tendon, Open Procedure 27391 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure  | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27347<br>27350<br>27355   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur;  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53  |
| Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone \$756.44   27364   Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74   27365   Radical Resection Of Tumor, Femur Or Knee \$1,738.96   27369   Injection Of Contrast For Imaging Of Knee Joint \$125.76   27372   Removal Foreign Body, Deep \$411.33   27380   Suture Of Tendon Below Knee, Primary \$639.94   27381   Suture Of Tendon Below Knee, Secondary Reconstruction \$890.25   27385   Suture Of Ruptured Muscle Of Thigh, Primary \$638.74   27386   Suture Of Ruptured Muscle Of Thigh, Secondary \$791.53   27390   Repair Of Hamstring Tendon, Open Procedure \$392.95   27391   Repair Of Multiple Hamstring Tendons, Open Procedure \$5512.76   27392   Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$652.44   | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27350<br>27355  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25  |
| Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone \$756.44   27364   Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee \$1,554.74   27365   Radical Resection Of Tumor, Femur Or Knee \$1,738.96   27369   Injection Of Contrast For Imaging Of Knee Joint \$125.76   27372   Removal Foreign Body, Deep \$411.33   27380   Suture Of Tendon Below Knee, Primary \$639.94   27381   Suture Of Tendon Below Knee, Secondary Reconstruction \$890.25   27385   Suture Of Ruptured Muscle Of Thigh, Primary \$638.74   27386   Suture Of Ruptured Muscle Of Thigh, Secondary \$791.53   27390   Repair Of Hamstring Tendon, Open Procedure \$392.95   27391   Repair Of Multiple Hamstring Tendons, Open Procedure \$5512.76   27392   Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$652.44   | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27350<br>27355  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53  |
| 27360 Abscess)       \$756.44         27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee       \$1,554.74         27365 Radical Resection Of Tumor, Femur Or Knee       \$1,738.90         27369 Injection Of Contrast For Imaging Of Knee Joint       \$125.76         27372 Removal Foreign Body, Deep       \$411.33         27380 Suture Of Tendon Below Knee, Primary       \$639.92         27381 Suture Of Tendon Below Knee, Secondary Reconstruction       \$890.25         27385 Suture Of Ruptured Muscle Of Thigh, Primary       \$628.71         27386 Suture Of Ruptured Muscle Of Thigh, Secondary       \$791.53         27390 Repair Of Hamstring Tendon, Open Procedure       \$392.93         27391 Repair Of Multiple Hamstring Tendons, Open Procedure       \$512.76         27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure       \$652.44  | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27350<br>27355<br>27356   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25<br>\$676.57  |
| 27364 Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee       \$1,554.74         27365 Radical Resection Of Tumor, Femur Or Knee       \$1,738.90         27369 Injection Of Contrast For Imaging Of Knee Joint       \$125.76         27372 Removal Foreign Body, Deep       \$411.33         27380 Suture Of Tendon Below Knee, Primary       \$639.94         27381 Suture Of Tendon Below Knee, Secondary Reconstruction       \$890.26         27385 Suture Of Ruptured Muscle Of Thigh, Primary       \$628.71         27386 Suture Of Ruptured Muscle Of Thigh, Secondary       \$791.52         27390 Repair Of Hamstring Tendon, Open Procedure       \$392.92         27391 Repair Of Multiple Hamstring Tendons, Open Procedure       \$512.76         27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure       \$652.44  | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27350<br>27355<br>27356   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Excision, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft) Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure)  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25  |
| 27365 Radical Resection Of Tumor, Femur Or Knee       \$1,738.90         27369 Injection Of Contrast For Imaging Of Knee Joint       \$125.76         27372 Removal Foreign Body, Deep       \$411.33         27380 Suture Of Tendon Below Knee, Primary       \$639.94         27381 Suture Of Tendon Below Knee, Secondary Reconstruction       \$890.26         27385 Suture Of Ruptured Muscle Of Thigh, Primary       \$628.71         27386 Suture Of Ruptured Muscle Of Thigh, Secondary       \$791.53         27390 Repair Of Hamstring Tendon, Open Procedure       \$392.92         27391 Repair Of Multiple Hamstring Tendons, Open Procedure       \$512.76         27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure       \$652.44   | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27355<br>27356<br>27356   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25<br>\$676.57<br>\$783.42  |
| 27369 Injection Of Contrast For Imaging Of Knee Joint       \$125.76         27372 Removal Foreign Body, Deep       \$411.33         27380 Suture Of Tendon Below Knee, Primary       \$639.94         27381 Suture Of Tendon Below Knee, Secondary Reconstruction       \$890.26         27385 Suture Of Ruptured Muscle Of Thigh, Primary       \$628.71         27386 Suture Of Ruptured Muscle Of Thigh, Secondary       \$791.53         27390 Repair Of Hamstring Tendon, Open Procedure       \$392.96         27391 Repair Of Multiple Hamstring Tendons, Open Procedure       \$512.76         27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure       \$652.44  | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27355<br>27356<br>27357<br>27358  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess)   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25<br>\$676.57<br>\$783.42<br>\$244.29  |
| 27372 Removal Foreign Body, Deep       \$411.33         27380 Suture Of Tendon Below Knee, Primary       \$639.94         27381 Suture Of Tendon Below Knee, Secondary Reconstruction       \$890.26         27385 Suture Of Ruptured Muscle Of Thigh, Primary       \$628.71         27386 Suture Of Ruptured Muscle Of Thigh, Secondary       \$791.53         27390 Repair Of Hamstring Tendon, Open Procedure       \$392.95         27391 Repair Of Multiple Hamstring Tendons, Open Procedure       \$512.76         27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure       \$652.44   | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27355<br>27356<br>27357<br>27358<br>27358   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25<br>\$676.57<br>\$783.42<br>\$244.29  |
| 27380Suture Of Tendon Below Knee, Primary\$639.9427381Suture Of Tendon Below Knee, Secondary Reconstruction\$890.2627385Suture Of Ruptured Muscle Of Thigh, Primary\$628.7127386Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327390Repair Of Hamstring Tendon, Open Procedure\$392.9927391Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44   | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27355<br>27356<br>27356<br>27358<br>27364<br>27364  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25<br>\$676.57<br>\$783.42<br>\$244.29  |
| 27381Suture Of Tendon Below Knee, Secondary Reconstruction\$890.2627385Suture Of Ruptured Muscle Of Thigh, Primary\$628.7127386Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327390Repair Of Hamstring Tendon, Open Procedure\$392.9927391Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44  | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27350<br>27355<br>27356<br>27356<br>27356<br>27366<br>27364   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint   | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25<br>\$676.57<br>\$783.42<br>\$244.29  |
| 27385Suture Of Ruptured Muscle Of Thigh, Primary\$628.7127386Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327390Repair Of Hamstring Tendon, Open Procedure\$392.9927391Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44  | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27355<br>27356<br>27356<br>27356<br>27366<br>27366<br>27369<br>27369<br>27369   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Excision, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep  | \$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$4448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33   |
| 27386 Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327390 Repair Of Hamstring Tendon, Open Procedure\$392.9927391 Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44  | 27334<br>27335<br>27337<br>27339<br>27340<br>27345<br>27355<br>27356<br>27356<br>27356<br>27366<br>27366<br>27369<br>27369<br>27369   | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Excision, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep  | \$592.59<br>\$541.82<br>\$698.59<br>\$699.62<br>\$443.01<br>\$798.01<br>\$329.93<br>\$448.04<br>\$526.24<br>\$667.53<br>\$622.25<br>\$676.57<br>\$783.42<br>\$244.29  |
| 27386 Suture Of Ruptured Muscle Of Thigh, Secondary\$791.5327390 Repair Of Hamstring Tendon, Open Procedure\$392.9927391 Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44  | 27334<br>27335<br>27337<br>27340<br>27345<br>27347<br>27350<br>27355<br>27356<br>27356<br>27364<br>27365<br>27365<br>27369<br>27362<br>27362  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Excision, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary   | \$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$4448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33   |
| 27390 Repair Of Hamstring Tendon, Open Procedure\$392.9927391 Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44   | 27334<br>27335<br>27337<br>27340<br>27345<br>27345<br>27355<br>27356<br>27356<br>27364<br>27364<br>27365<br>27362<br>27362<br>27362<br>27362<br>27362                                     | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Secondary Reconstruction   | \$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$778.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33  |
| 27391Repair Of Multiple Hamstring Tendons, Open Procedure\$512.7627392Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure\$652.44   | 27334<br>27335<br>27337<br>27340<br>27345<br>27345<br>27355<br>27356<br>27356<br>27356<br>27364<br>27365<br>27369<br>27378<br>27380<br>27381  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg. Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Secondary Reconstruction Suture Of Ruptured Muscle Of Thigh, Primary   | \$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33 \$639.94 \$890.28                                      |
| 27392 Repair Of Multiple Hamstring Tendons Of Both Legs, Open Procedure \$652.44  | 27334<br>27335<br>27337<br>27340<br>27345<br>27345<br>27355<br>27356<br>27356<br>27364<br>27365<br>27369<br>27372<br>27380<br>27385<br>27388  | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Secondary Reconstruction Suture Of Ruptured Muscle Of Thigh, Primary Suture Of Ruptured Muscle Of Thigh, Secondary   | \$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33 \$639.94 \$890.28 \$628.71                             |
|   | 27334<br>27335<br>27337<br>27340<br>27345<br>27345<br>27356<br>27356<br>27356<br>27364<br>27366<br>27369<br>27372<br>27380<br>27380<br>27380<br>27385                                     | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Primary Suture Of Tendon Below Knee, Secondary Reconstruction Suture Of Ruptured Muscle Of Thigh, Primary Suture Of Ruptured Muscle Of Thigh, Secondary Repair Of Hamstring Tendon, Open Procedure | \$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33 \$639.94 \$890.28 \$628.71 \$791.53                    |
|   | 27334<br>27335<br>27337<br>27340<br>27346<br>27345<br>27355<br>27356<br>27356<br>27364<br>27364<br>27365<br>27364<br>27369<br>27372<br>27380<br>27381<br>27385<br>27380<br>27381<br>27385 | Removal Of Knee Joint Lining, Front Or Back Removal Of Knee Joint Lining, Front And Back Arthrotomy, With Synovectomy, Knee; 3 Cm Or Greater Arthrotomy, With Synovectomy, Knee; 5 Cm Or Greater Excision, Prepatellar Bursa Removal Of Cyst Of Membrane Covering Behind Knee Joint Excision Of Lesion Of Meniscus Or Capsule (Eg, Cyst, Ganglion), Knee Patellectomy Or Hemipatellectomy Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Homogenous Graft Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Primary Autogenous Graft (Includes Obtaining Graft)  Excision Or Curettage Of Bone Cyst Or Benign Tumor Of Femur; With Internal Fixation (List In Addition To Code For Primary Procedure) Partial Excision (Craterization, Saucerization, Or Diaphysectomy) Bone, Femur, Proximal Tibia And/Or Fibula (Eg, Osteomyelitis Or Bone Abscess) Removal (5 Centimeters Or Greater) Tissue Growth Of Thigh Or Knee Radical Resection Of Tumor, Femur Or Knee Injection Of Contrast For Imaging Of Knee Joint Removal Foreign Body, Deep Suture Of Tendon Below Knee, Secondary Reconstruction Suture Of Ruptured Muscle Of Thigh, Primary Suture Of Ruptured Muscle Of Thigh, Secondary Repair Of Multiple Hamstring Tendons, Open Procedure   | \$592.59 \$541.82 \$698.59 \$699.62 \$443.01 \$798.01 \$329.93 \$4448.04 \$526.24 \$667.53 \$622.25 \$676.57 \$783.42 \$244.29 \$756.44 \$1,554.74 \$1,738.90 \$125.78 \$411.33 \$639.94 \$890.28 \$628.71 \$791.53 \$392.99 \$512.76 |

| 29361 Compleming Of Hamanistry Turnotics Multipla Translons. Biology Complete Special Compl                    | Codo    | Description  | Foo                                   |
|---|---------|--|---------------------------------------|
| 23256 Langement Of Henderich Tunder Kulliple Tendores, Bilateral 23266 Tampager Of Transfer (With Macch Reallescon Or Rerowing), Traigh (E., Estensor To Flexor); Single Tendore 23267 Trainger Of Transfer (With Macch Reallescon Or Rerowing), Traigh (E., Estensor To Flexor); Single Tendore 23267 Trainger Of Transfer (With Macch Reallescon Or Rerowing), Traigh (E., Estensor To Flexor); Single Tendore 23267 Trainger (With Macch Reallescon Or Rerowing), Traigh (E., Estensor To Flexor); Multiple Tendore 23267 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 23267 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Colusion 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernet, Will Or Willout Menisocotory, Kee, Columnal And Crucials Lapiernetis 2327 Subre, Primary, Tron. Replaced Of Severed Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal And Crucials Lapiernetis 2328 Subre, Primary, Tron. Replaced Of Severed Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal And Crucials Lapiernetis 2329 Subre, Villager Columnal Andread Severed Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal Andread Crucials Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal Andread Crucials Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal Andread Crucials Lapiernetis, Will Or Willout Menisocotory, Kee, Columnal Andread Crucials Lapiernetis, Will Or Keep Lapiernetis, Will Or Willout Menisocotory, Willout Menisoc                    |         | Description Lengthening Of Hamstring Tendon: Multiple Tendons, One Leg   | Fee<br>\$581.67                       |
| 2599   Transplant O' Transled (With Mascle Redirection O' Renoung), Tayli (E., Esterant To Flexiv), Major Transler (With Mascle Redirection O' Renoung), Tayli (E., Esterant To Flexiv), Major Transler (With Mascle In Hamilton)   2502   Transplant O' Transler (With Mascle Redirection O' Renoung), Tayli (E., Esterant To Flexiv), Major Transler (S. 2002)   2503   Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral   2504   Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral   2505   Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral   2506   Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral And Cludde Ligaments   2507   Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral And Cludde Ligaments   2508   Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral And Cludde Ligaments   2509   Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral And Cludde Ligaments   2509   Suina, Primary, Yon, Repland O' Sewered Ligament, With O' Without Meniscectory, Kose Colleteral Ligaments   2509   Suina, Primary, Yon, Repland O' Sewered Ligament, Without Meniscectory, Kose Colleteral Ligaments   2509   Suina, Without Meniscectory, Without Meniscectory, Kose Colleteral Ligaments   2509   Suina, Without Meniscectory,                     |         |  | \$909.68                              |
| 22021 Transpear Of                    |         |  | \$610.37                              |
| 27403 Suhrun, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral Sept. 27407 Suhrun, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral And Chuckie Ligaments 27407 Suhrun, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral And Chuckie Ligaments 27407 Suhrun, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral And Chuckie Ligaments 27408 Subrup, Primary, Tom, Ruptured O'Severed Ligament, With O'Without Meniocottomy, Knier, Collateral And Chuckie Ligaments 27408 Subrup Church Churc                    |         |  | \$833.25                              |
| 27266 Stutue Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral 27276 Stutue, Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral And Chucate Ligaments 27276 Stutue, Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral And Chucate Ligaments 27276 Stutue, Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral And Chucate Ligaments 27276 Stutue, Primary, Torn, Riputard O'S Severed Ligament, With O'Without Meniscoctory, Kose; Collateral And Chucate Ligaments 27276 Stutue, Primary, Torn, Riputard Stutue, Carlos, Stutue, Primary, Torn, Riputard                    | 27400   | Transfer Of Tendon Or Muscle In Hamstring  | \$637.16                              |
| 27207 Suture, Primary, Tom, Riputured Dr. Severend Ligament, With Dr. Without Merisocotomy, Kone; Chuckete Apr. 27207 Suture, Primary, Tom, Riputured Dr. Severend Ligament, With Dr. Without Merisocotomy, Kone; Chuckete Apr. 27212 Adologous Chronicopy Inspiration, Kone St. 14,865. 27212 Adologous Chronicopy Inspiration, Kone St. 14,865. 27213 Adologous Chronicopy Inspiration, Kone St. 14,865. 27213 Charles Chronicopy Inspiration, Kone St. 14,865. 27213 Charles Chronicopy Chronicopy Inspiration, Kone St. 14,865. 27213 Charles Chronicopy Chronicop                    | 27403   | Arthrotomy With Meniscus Repair, Knee  | \$657.23                              |
| 22409 Stutine Primary, Tortin, Rightursd O'S Severed Ligament, With O'Without Meniscentomy, Knee Collateral And Cruciase Ligaments   \$14.86. 22115 Implication O'D Dorn's Carillage Cells into Kines Born. Open Procedure   \$1.466. 22115 Implication O'D Dorn's Carillage Cells into Kines Born. Open Procedure   \$1.466. 22127 Implication O'D Dorn's Carillage Cells into Kines Born. Open Procedure   \$1.466. 22127 Implication O'D Hander's Kines Cells (Cells into Kines Born. Open Procedure   \$1.466. 22127 Implication O'D Hander's Kines Cells (Cells into Kines Born. Open Procedure   \$1.466. 22127 Implication O'D Hander's Kines Cells (Cells into Kines Born. Open Procedure   \$2222 Implication Cells (Cells into Kines Born. Open Procedure   \$2222 Implication Cells (Cells into Kines Born. Open Procedure   \$2222 Implication Cells (Cells into Kines Born. Open Procedure   \$2222 Implication Cells (Cells into Kines Born. Open Procedure   \$2222 Implication Cells (Cells into Kines Born. Open Procedure   \$2222 Implication Cells (Cells into Kines Born. Open Procedure   \$2222 Implication Cells (Cells into Kines Born. Open Procedure    \$2222 Implication Cells (Cells into Kines Born. Open Procedure    \$2222 Implication Cells (Cells into Kines Born. Open Procedure    \$2222 Implication Cells (Cells into Kines Born. Open Procedure  |         |  | \$689.85                              |
| 27.121 Autorogous Cincertoropte Implantation. Kree Son, Open Procedure  |         |  | \$777.84                              |
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| 27412. Revision Of Total Ebow Repair 27422. Revision Of Total Ebow Repair 27422. Revision Of Total Ebow Repair 27424. Revision Of Total Ebow Repair 27424. Shrippingsky, Knee, Hinger Postshesis (Eg., Waldius Type) 27445. Ahrhopsky, Knee, Hinger Postshesis (Eg., Waldius Type) 27446. Ahrhopsky, Knee, Hinger Postshesis (Eg., Waldius Type) 27447. Repair Of Knee John, Lower Or Upper Part Of Joint, Inside And Outside Area 27447. Repair Of Knee John, Lower Or Upper Part Of Joint, Inside And Outside Area 27447. Repair Of Knee Joint, Lower Or Upper Part Of Joint, Inside And Outside Area 27447. Repair Of Knee Joint, Lower Or Upper Part Of Joint, Inside And Outside Area 27448. Osteotomy, Femur, Shart Or Supracondylar, Without Faston: Unilateral 27459. Osteotomy, Femur, Shart Or Supracondylar, Without Faston: Unilateral 27450. Osteotomy, Premar Shart Or Supracondylar, With Faston: Unilateral 27450. Osteotomy, Premar Shart Or Supracondylar, With Faston: Unilateral 27450. Osteotomy, Premar Shart Inside Plant Faston Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 27450. Osteotomy, Premar Tibra, Including Fabura Fascision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 27450. Osteotomy, Prominar Tibra, Including Fabura Fascision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 27460. Osteotomy, Prominar Tibra, Including Fabura Fascision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 27460. Osteotomy, Premir, Lengthening 27470. Osteotomy, Premir, Lengthening 27470. Osteotomy, Femur, Lengthening 27471. Papair, Nonunion Or Malunion, Femur, Distal To Head And Neck: Without Graft (Eg. Compression Technique, Etc) 27472. Papair, Nonunion Or Malunion, Femur, Distal To Head And Neck: With Iliac Or Other Autogenous Bone Graft (Includes Ostaining Graft) 27473. Arrest, Epiphyseal, Ary Method (Eg. Epiphysiodesis), Distal Femur 27474. Arrest, Epiphyseal, Ary Method (Eg. Epiphysiodesis), Distal Femur 27475. Arrest, E                    |         |  |                                       |
| 27424 Revision Of Total Elbow Repair  27443 Repair Of Nee John Lower Or Upper Part Of John With Cleaning And Lining Removal  27443 Repair Of Knee John Lower Or Upper Part Of John Mith Cleaning And Lining Removal  27446 Repair Of Knee John Lower Or Upper Part Of John Linsde Or Outside Area  27446 Repair Of Knee John Lower Or Upper Part Of John Linsde And Outside Area  27446 Repair Of Knee John Lower Or Upper Part Of John Linsde And Outside Area  27446 Repair Of Knee John Lower Or Upper Part Of John Linsde And Outside Area  27446 Repair Of Knee John Lower Or Upper Part Of John Linsde And Outside Area  27446 Obsteodory, Fenrur, Shaft Or Supracondylar, With Fixation; Unilateral  27446 Obsteodory, Fenrur, Shaft Or Supracondylar With Fixation; Unilateral  27450 Obsteodory, Multiple, With Readingment On Intramodulary Rod, Fenroral Shaft (Eg., Sofield Type Procedure)  27450 Obsteodory, Proximal Tibia, Including Fibular Excision Or Osteotory (Includes Correction Of Genu Varius (Bowleg) Or Genu Valgus (Knock-  27450 Steeplassy, Fenrur Lengthyseal Closure  27450 Steeplassy, Fenrur Lengthening  27476 Repair, Nonunion Or Matunion, Fenrur, Distal To Head And Neck; With Illiac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  27477 Repair, Nonunion Or Matunion, Fenrur, Distal To Head And Neck; With Illiac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  27478 Repair, Nonunion Or Matunion, Fenrur, Distal To Head And Neck; With Illiac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  27479 Repair, Nonunion Or Matunion, Fenrur, Distal To Head And Neck; With Illiac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  27470 Repair, Nonunion Or Matunion, Fenrur, Distal To Head And Neck; Without Graft (Eg., Compression Technique, Etc.)  27471 Repair, Nonunion Or Matunion, Fenrur, Distal To Head And Neck; Without Graft (Eg., Compression Technique, Etc.)  27472 Repair, Nonunion Or Matunion, Fenrur, Distal To Head And Neck; Without Graft (Eg., Compression Technique, Etc.)  27473 Repair, Nonunion Or Mat                    |         |  |                                       |
| 27445 Ahrobasyk Knee, Hinge Prist Ori Joint With Cleaning And Lining Removal 27446 Ahrobasyk Knee, Hinge Prist Ori Joint With Cleaning And Lining Removal 27446 Repair Of Knee Joint, Lower Or Upper Part Of Joint, Inside And Outside Area 27447 Repair Of Knee Joint, Lower Or Upper Part Of Joint, Inside And Outside Area 27447 Repair Of Knee Joint, Lower Or Upper Part Of Joint, Inside And Outside Area 27447 Repair Of Knee Joint, Lower Or Upper Part Of Joint, Inside And Outside Area 27448 Osteotomy, Fernut, Shaft Or Supracondylar, Without Faston; Uniteleral 27450 Osteotomy, Pernut, Shaft Or Supracondylar, Without Faston; Uniteleral 27450 Osteotomy, Multiple, With Realignment On Intramedulary Rod, Fernoral Shaft (Eg., Sofield Type Procedure) 27450 Osteotomy, Multiple, With Realignment On Intramedulary Rod, Fernoral Shaft (Eg., Sofield Type Procedure) 27450 (Sheepoly, Promint) Tibia, Including Fibrular Excision Of Osteotomy (Includes Correction Of Genu Varius (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal Tibia, Including Fibrular Excision Of Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal Tibia, Including Fibrular Excision Of Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal Tibia, Including Fibrular Excision Of Osteotomy, Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal Tibia, Including Fibrular Excision Of Osteotomy, Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal Tibia Including Fibrular Excision Of Osteotomy, Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Includes Correction) Orthogenetics (Bowleg) Orthogenetic                    |         |  |                                       |
| 27446 Repair Of Knee John, Lower Or Upper Part Of Joint, Inside And Outside Area  \$1,104.12  27447 Repair Of Knee John, Lower Or Upper Part Of Joint, Inside And Outside Area  \$1,2448  27448 Ostotiony, Fenuru, Shaft Of Supracondylar, Withor Exazion; Unisideral  27450 Osteotomy, Fenuru, Shaft Of Supracondylar, With Exazion; Unisideral  27450 Osteotomy, Fenuru, Shaft Of Supracondylar, With Exazion; Unisideral  27450 Osteotomy, Fenuru, Shaft Of Supracondylar, With Exazion; Unisideral  27550 Osteotomy, Proximal Tibia, Including Fibular Excision Or Osteotomy (includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-  27457 Knee), Unisideral: After Epiphyseal Closure  27458 Osteoplasty, Femur, Shortening  27478 Epiphyseals, Femur, Combined, Lengthening And Shortening With Femoral Segment Transfer  27470 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc)  27471 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc)  27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc)  27473 Epiphyseal Arres BY Epiphysiodesis Or Stapling; Combined Distal Femur  27474 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Illian Or Or Other Autogenous Bone Graft (Includes Obtaining Graft)  27477 Epiphyseal Arres BY Epiphysiodesis Or Stapling; Combined Distal Femur  27478 Epiphyseal Arres BY Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia Or Femura,                   |         | · ·  | · · · · · · · · · · · · · · · · · · · |
| 27447 Repair Of Knee John, Lower Or Upper Part Of Joint, Inside Or Outside Area \$1,247 \$72447 Repair Of Knee John, Lower Or Upper Part Of Joint, Inside And Outside Area \$1,247 \$72447 Repair Of Knee John, Lower Or Upper Part Of Joint, Inside And Outside Area \$1,247 \$247 \$72450 Statestormy, Fermur, Shaft Of Supracondylar, Without Fixation: Unlaisteral \$1,022 \$247 \$247 \$247 \$247 \$247 \$247 \$247 \$2  |         |  |                                       |
| Sizes   Size                      |         |  |                                       |
| 27450 Steetomy, Femur, Shaft Or Supracondylar, Without Fixation, Unilateral 27450 Osteotomy, Femur, Shaft Or Supracondylar, With Existion, Unilateral 27450 Osteotomy, Pemur, Shaft Or Supracondylar, With Existion, Unilateral 27450 Osteotomy, Pemur, Shaft Or Supracondylar, With Existion For Steetomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Multiple, With Realignment On Intramedullary Rod, Femoral Shaft (Eg. Sofield Type Procedure) 27450 (Steetomy, Proximal This, Including Fishular Excision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal This, Including Fishular Excision or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal This, Including Fishular Excision or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal This, Including Fishular Excision or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Osteotomy, Proximal This, Including Fishular Correction) 27476 (Steepolary, Femur, Combined Lengthering And Shortening With Femoral Segment Transfer 27476 (Steepolary, Femur, Combined, Lengthering And Shortening With Femoral Segment Transfer 27477 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Nock: Without Graft (Eg. Compression Technique, Etc) 27475 (Arrest, Hemiepsphysolary) (Steepolary) (Steepolary                    |         |  |                                       |
| 27450 Osteolomy, Femur, Shaft Or Supracondylar, With Evaluor: Unitateral 27454 Osteolomy, Multiple, With Realignment On Intramedullary Rod, Femoral Shaft (E.g. Sofield Type Procedure) \$1,158.  27454 Osteolomy, Proximal Tibis, Including Fluliar Excision Or Osteolomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Sofield), Unitateral Before Epiphyseal Closure \$969.  27457 Knoe), Unitateral Before Epiphyseal Closure \$871.  27468 Osteolosty, Femur, Shortening \$1,214.  27460 Osteolosty, Femur, Lengthening And Shortening With Femoral Segment Transfer \$1,214.  27470 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (E.g. Compression Technique, Etc) \$1,127.  27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (E.g. Compression Technique, Etc) \$1,124.  27473 Farest, Epiphyseal Armst With Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal Tibia And Fibula \$1,244.  27474 Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal Tibia And Fibula \$2,424.  27475 Epiphyseal Armst Wy Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal Tibia And Fibula \$3,424.  27476 Epiphyseal Armst Wy Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$3,424.  27477 Epiphyseal Armst Wy Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$3,424.  27478 Epiphyseal Armst Wy Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$3,424.  27489 Revision Of Total Knee Arthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component \$1,407.  27480 Revision Of Total Knee Arthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component \$1,407.  27481 Revision Of Total Knee Arthroplasty, With Or Without Milograft; Femoral And Entire Tibial Component \$1,407.  27482 Report Of Prosthesis, Including Total Knee Prosthesis, Merklymethacryptate With Or Without Insertion Of Spacer, Knee \$1,206.  27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Add   |         | 1 , 11 ,   |                                       |
| 27455 Osteotomy, Multiple, With Realignment On Intramedullary Rod, Femoral Shaft (£g. Sofield Type Procedure)  Osteotomy, Proximal Tibis in. Inciding Fishular Excision for Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Strong), Unitateral Before Epiphyseal Closure  Osteotomy, Proximal Tibis, Inciding Fishular Excision for Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock-Strong), Unitateral After Epiphyseal Closure  S871. 27465 Osteoplasty, Femur, Engthening  \$1,1274. 27465 Osteoplasty, Femur, Engthening  \$1,1274. 27466 Osteoplasty, Femur, Combined, Lengthening And Shortening With Femoral Segment Transfer  \$1,1274. 27467 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc)  \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc)  \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc)  \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With likac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  \$1,187. 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With likac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  \$1,187. 27473 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With likac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  \$1,187. 27474 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  \$1,187. 27477 Epiphyseal Arrest By Epiphysiodesis Or Stapling, Combined Distal Femur, Proximal Tible And Flubul  \$1,24777 Epiphyseal Arrest By Epiphysiodesis Or Stapling, Combined Distal Femur, Proximal Tible And Flubul  \$1,24777 Epiphyseal Arrest By Epiphysiodesis Or Stapling, Combined Distal Femur, Proximal Tible And Flubul  \$1,2478 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component  \$1,19      |         |  | ·                                     |
| Security, Proximal Tibia, Including Fibular Excision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 27455 Knee), Unitalerate, Merc Epiphyseal Closure  Sept. Security, Proximal Tibia, Including Fibular Excision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 27457 Knee)), Unitalerate, Marc Epiphyseal Closure  \$871.  27465 Osteoplasty, Femur, Shortening  \$1,127.  27466 Osteoplasty, Femur, Lengthening \$1,214.  27468 Osteoplasty, Femur, Lengthening And Shortening With Femoral Segment Transfer  \$1,214.  27476 Pepair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc)  \$1,274.  27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  \$1,143.  27475 Arrest, Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal  \$744.  27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal  \$744.  27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal  \$745.  27466 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component  \$7467 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component  \$7467 Revision Of Total Knee Arthroplasty, With Or Without Allograft Femoral And Entire Tibial Component  \$7467 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component  \$74789 Epiphyseic Treatment (Naling, Priming, Plaining Or Wilmout Merchanter)  \$7489 Pophysiote Treatment (Naling, Priming, Plaining Or Wilmout Merchanter)  \$7490 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle  \$7491 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle  \$7492 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Norve  \$7503 Clo  |         |  |                                       |
| Septiment   Sept                      | 27 10 1 |  | ψ1,100.00                             |
| Osteotomy, Proximal Tibla, Including Fibular Excision Or Osteotomy (Includes Correction Of Genu Varus (Bowleg) Or Genu Valgus (Knock- 247457 Knee), Unilateral, After Epiphyseal Closure  \$871. 27466 Osteoplasty, Fermur; Shortening \$1,124. 27466 Osteoplasty, Fermur; Combined, Lengthening \$1,214. 27466 Osteoplasty, Fermur; Combined, Lengthening And Shortening With Femoral Segment Transfer \$1,214. 27470 (Repair, Norunino Or Maluninon, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,127. 27472 (Repair, Norunino Or Maluninon, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,127. 27472 (Repair, Norunino Or Maluninon, Fermur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,143. 27475 Arrest, Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibla And Fibula, Proximal \$1,2479 (Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibla And Fibula, Proximal \$1,2479 (Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibla And Fibula, Proximal \$1,2486 (Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,2486 (Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27487 (Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27488 (Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27489 (Pophylactic Treatment (Naling, Pinning, Pising Or Wiring) With Or Without Methyl Methacrylate, Fernur \$1,307. 27498 (Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle \$1,407. 27499 (Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle \$1,407. 27499 (Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle \$1,409. 27499 (Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compar  | 27455   |  | \$969.91                              |
| 2745 Osteoplasty, Fermur, Shortening 2746 Osteoplasty, Fermur, Shortening 2746 Osteoplasty, Fermur, Cembroad, Lengthening 27476 Paper, Nonunion Or Malunion, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 27472 Repair, Nonunion Or Malunion, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 27473 Repair, Nonunion Or Malunion, Fermur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) 27474 Repair, Nonunion Or Malunion, Fermur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) 27475 Repairs, Nonunion Or Malunion, Fermur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) 27476 Arrest, Epiphyseal, Ary Method (Eg. Epiphydiodesis); Distal Fermur 27477 Epiphyseal Arrest By Epiphysiodesis Or Stalping; Combined Distal Fermur, Proximal Tibia And Fibula, Proximal 27485 Arrest, Hemiepiphyseal, Distal Fermur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft, Fermoral And Entire Tibial Component 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft, Fermoral And Entire Tibial Component 27488 Removal Of Proximisal, Including Total Knee Proxthesias, Methylmethacrylate With Or Without Interval Or Spacer, Knee 31, 205. 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 3505. 3502. 3503. 35                    |         |  | <b>400010</b>                         |
| 27466 Osteoplasty, Femur, Shortening 27466 Osteoplasty, Femur, Lengthening 31.217. 27476 (Steoplasty, Femur, Lengthening 31.217. 27476 (Steoplasty, Femur, Combined, Lengthening And Shortening With Femoral Segment Transfer 31.217. 27477 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg., Compression Technique, Etc) 31.187. 27472 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg., Compression Technique, Etc) 31.143. 27473 (Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) 31.143. 327475 (Arrest, Epiphyseal Arrest By Epiphysiodesis) Distal Femur 3673. 37477 (Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibial. Proximal 37473 (Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibiala 37485 (Arrest) (Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibiala 37486 (Revision Of Total Knee Arthroplasty, With Or Without Allograft. Promoral And Entire Tibial Component 31.407. 31497 (Revision Of Total Knee Arthroplasty, With Or Without Allograft. Femoral And Entire Tibial Component 31.7407. 31497 (Prevision Of Total Knee Arthroplasty, With Or Without Allograft. Femoral And Entire Tibial Component 31.7407. 31497 (Prevision Of Total Knee Arthroplasty). With Or Without Allograft. Femoral And Entire Tibial Component 31.7407. 31497 (Prevision Of Total Knee Arthroplasty). With Or Without Allograft. Femoral And Entire Tibial Component 31.7407. 31497 (Prevision Of Total Knee Arthroplasty). With Or Without Allograft. Femoral Of Spacer, Knee 31.206. 31.206. 31.206. 31.206. 31.207. 31.20                    |         |  | \$871.73                              |
| 27470 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,187. 27477 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg. Compression Technique, Etc) \$1,187. 27478 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,143. 27477 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft) \$1,143. 27477 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tobia And Fibula, Proximal 27478 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tobia And Fibula, Proximal Tibia And Fibula 27488 Arrest, Hemiepiphyseal Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) 27486 Revision Ol Total Knee Arthroplasty, With Or Without Allograft One Component 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft (Pemoral And Entire Tibial Component) 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee 31,206. 27498 Prophylactic Treatment (Naling, Prinning, Plating Or Without Methyl Methacrylate, Femur 31,1373. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27497 And/Or Nerve 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27500 (Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 27501 (Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 27502 (Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation 27503 (Closed Treatment Of Broken Thigh Bone, With Manipulation) 27504 (Closed Treatment Of Broken Thigh Bone or Separated Growth Plata, Accessed Through The Skin 27505 (Open Treatment Of Broken Thigh Bon                |         |  | \$1,127.68                            |
| 27477 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg., Compression Technique, Etc)  \$1,187.  27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  \$1,143.1  27473 Arrest, Epiphyseal, Arny Method (Eg., Epiphydiodesis); Distal Femur  \$673.2  27477 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tolia And Fibula, Proximal  \$744.2  27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula  \$834.2  27485 Arrest, Hemiepiphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg., Genu Varus Or Valgus)  \$869.1  27486 Revision OT Total Knee Arthroplasty, With Or Without Allograft One Component  \$1,407.4  27487 Revision OT Total Knee Arthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component  \$1,407.4  27488 Removal Of Proximals, Including Total Knee Proximals; Methymethacrylate Withor Unsertion Of Spacer, Knee  \$1,206.  27489 Prophylactic Treatment (Nailing, Pirning, Pitaling Or Wiring) With Or Without Insertion Of Spacer, Knee  \$1,206.  27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor);  Becompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments;  27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments;  \$602.2  27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments;  \$602.2  27500 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation  \$483.2  27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation  \$772.2  27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation  \$772.2  27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation  \$772.5  27504 Open Treatment Of Broken Thigh Bone, Knee Area, Manipulation  \$772.5  27505 Open Treatment Of Broken Thigh Bone, Knee From With Manipulation  \$772.5  27506 Open Treatment Of Broken Thigh Bone, Knee From With Manipulation  \$772.5  27507 Open Treatment Of Broken T | 27466   | Osteoplasty, Femur; Lengthening  | \$1,214.21                            |
| 27472 Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)  \$1,143, 27475 Arrest, Epiphyseal, Arest By Epiphysiodesis Or Stapling; Crossing Tibula, Proximal  \$744. Special Comment of Proximal Special                   | 27468   | Osteoplasty, Femur; Combined, Lengthening And Shortening With Femoral Segment Transfer   | \$1,211.95                            |
| 27475 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal \$744. 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$834. 27495 Arrest, Hemiepiphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) \$889. 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,207. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylimethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylimethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27495 Prophylactic Treatment (Nalling, Pinning, Plating Or Winnig) With Or Without Hollery Methacrylate, Femur \$1,137. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); \$505. 27497 And/Or Nerve \$532. 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; \$602. 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27500 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$483. 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$1519. 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Wanipulation \$128. 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Wanipulation \$128. 27504 Closed Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin \$275. 27505 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$275. 27506 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$275. 27507 Closed Treatment Of Broken Thigh Bone In Th | 27470   | Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; Without Graft (Eg, Compression Technique, Etc)   | \$1,187.53                            |
| 27475 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal \$744. 27479 Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula \$834. 27495 Arrest, Hemiepiphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) \$889. 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,407. 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component \$1,207. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylimethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylimethacrylate With Or Without Insertion Of Spacer, Knee \$1,206. 27495 Prophylactic Treatment (Nalling, Pinning, Plating Or Winnig) With Or Without Hollery Methacrylate, Femur \$1,137. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); \$505. 27497 And/Or Nerve \$532. 27498 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; \$602. 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642. 27500 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$483. 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$1519. 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Wanipulation \$128. 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Wanipulation \$128. 27504 Closed Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin \$275. 27505 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$275. 27506 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$275. 27507 Closed Treatment Of Broken Thigh Bone In Th |         |  |                                       |
| 27477   Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal   \$744.  | 27472   | Repair, Nonunion Or Malunion, Femur, Distal To Head And Neck; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)   | \$1,143.04                            |
| Epiphyseal Arrest By Epiphyseidesis Or Stapling: Combined Distal Femur, Proximal Tibia And Fibula   \$834.  | 27475   | Arrest, Epiphyseal, Any Method (Eg, Epiphydiodesis); Distal Femur  | \$673.98                              |
| 27485 Arrest, Hemiepiphyseal, Distal Femur Or Proximal Tibia Or Fibula (Eg. Genu Varus Or Valgus) 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft (De Component) 31,407.4 27487 Revision Of Total Knee Arthroplasty, With Or Without Allograft, Femoral And Entire Tibial Component 31,752.2 27488 Removal Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee 31,206. 27495 Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femur 41,379. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 27497 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle 27497 And/Or Nerve 4532.0 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27500 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation 4548.3 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 5519.0 5520 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation 57502 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation 57503 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation 57503 Open Treatment With Plate/Screws Of Broken Thigh Bone 57504 Open Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion 57506 Closed Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin 57507 Open Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin 57508 Closed Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin 57509 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 57501 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee 57502 Closed Treatment Of Distal Femoral Epiphyseal                    | 27477   | Epiphyseal Arrest By Epiphysiodesis Or Stapling; Tibia And Fibula, Proximal  | \$744.72                              |
| 27486 Revision Of Total Knee Arthroplasty, With Or Without Allograft One Component 27487 Revision Of Total Knee Arthroplasty, With Dr Without Allograft; Femoral And Entire Tibial Component 31,752. 27488 Revoval Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee 31,206. 27495 Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femur 31,137. 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 3505. 3505. 3505. 3505. 3505. 3506. 3709 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 3506. 3709 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); 3501. 3709 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 3700 Closed Treatment Of Brocken Thigh And/Or Knee, Multiple Compartments; 3701 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation 3700 Closed Treatment Of Brocken Thigh Bone, Knee Area, Without Manipulation 3700 Closed Treatment Of Brocken Thigh Bone, Knee Area, Without Manipulation 3700 Closed Treatment Of Brocken Thigh Bone, Knee Area, Without Manipulation 3700 Open Treatment Of Brocken Thigh Bone, Knee Area, Without Manipulation 3700 Open Treatment With Plate/Screws Of Brocken Thigh Bone 3700 Open Treatment With Plate/Screws Of Brocken Thigh Bone 3700 Open Treatment Of Brocken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion 3700 Open Treatment Of Brocken Thigh Bone Lower End, Without Manipulation 3700 Open Treatment Of Brocken Thigh Bone Lower End, Without Manipulation 3700 Open Treatment Of Brocken Thigh Bone of The Knee With Manipulation 3700 Open Treatment Of Brocken Thigh Bone In The Area Of The Knee With Manipulation 3701 Open Treatment Of Brocken Thigh Bone In The Area Of The Knee With Manipulation 3701 Open Treatment Of Brocken Thigh Bone In The Area Of The Knee With Manipulation 3701 Open Treatment Of Brocken Th                    | 27479   | Epiphyseal Arrest By Epiphysiodesis Or Stapling; Combined Distal Femur, Proximal Tibia And Fibula  | \$834.92                              |
| 27487   Revision Of Total Knee Arthroplasty, With Or Without Allograft; Femoral And Entire Tibial Component   \$1,752.   27488   Removal Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee   \$1,206.   27498   Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femur   \$1,137.   27496   Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor);   \$505.   27497   And/Or Nerve   \$532.   27498   Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle   27497   And/Or Nerve   \$532.   27498   Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve   \$642.   27499   Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve   \$642.   27498   Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve   \$642.   27509   Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation   \$483.   27501   Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation   \$728.   27502   Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation   \$728.   27503   Open Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion   \$480.   27509   Open Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion   \$480.   27501   Closed Treatment Of Broken Thigh Bone or Separated Growth Plate, Accessed Through The Skin   \$627.   27502   Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation   \$483.   27503   Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation   \$618.   27504   Open Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation   \$483.   27507   Open Treatment Of Distal Femoral Epiphyseal Separa    |         |  | \$689.63                              |
| 27488   Removal Of Prosthesis, Including Total Knee Prosthesis, Methylmethacrylate With Or Without Insertion Of Spacer, Knee   \$1,206.   |         |  | \$1,407.64                            |
| 27495   Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Femur   \$1,137.5   |         |  | \$1,752.12                            |
| 27496 Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle And/Or Nerve  \$532.0  27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; Becompression Fasciotomy, Thigh Bone, Knee, Multiple Compartments; Becompression Fasciotomy, Thigh Bone, Multiple Compartments; Becompression                   |         |  | \$1,206.47                            |
| Decompression Fasciotomy, Thigh And/Or Knee, One Compartment (Flexor Or Extensor Or Adductor); With Debridement Of Nonviable Muscle \$532.4 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; \$602.6 27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve \$642.6 27500 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation \$483.1 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$512.2 27502 Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation \$728.1 27503 Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation \$728.1 27505 Open Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$728.1 27506 Open Treatment Of Broken Thigh Bone, With Implant \$11,344. 27507 Open Treatment With Plate/Screws Of Broken Thigh Bone \$973. 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion \$480.2 27509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$622.7 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$618. 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$618. 27512 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) \$1,238. 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) \$1,238. 27514 Open Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation \$483. 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction \$483. 27510 Closed Treatment Of Distal Femoral Epiphyseal Separation; Includes Internal Fixation, When Performed \$480.2 27510 Closed Treatment Of Patellar Fracture, Without Manipulation   |         |  | \$1,137.93                            |
| 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; 27498 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve 27500 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation 3483.3 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 3519. 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 3728. 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation 3728. 27506 Open Treatment Of Broken Thigh Bone, Knee Area, Manipulation 3728. 27507 Open Treatment Of Broken Thigh Bone, With Implant 37507 Open Treatment With Plate/Screws Of Broken Thigh Bone 373. 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion 37509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin 3627. 37510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation 3618. 37511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 3985. 37513 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 3985. 37514 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) 37516 Closed Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) 37517 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation, With Or Without Skin Or Skeletal Traction 3807. 37510 Closed Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed 3807. 37520 Closed Treatment Of Patellar Fracture, Without Manipulation 3807.  |         |  | \$505.45                              |
| Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments;  27499 Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve  \$642.0  27500 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation  \$5483.0  27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation  \$519.0  27502 Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation  \$728.0  27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation  \$728.0  27504 Open Treatment Of Broken Thigh Bone, With Implant  \$7505 Open Treatment With Plate/Screws Of Broken Thigh Bone  \$7507 Open Treatment With Plate/Screws Of Broken Thigh Bone  \$7508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion  \$7509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin  \$7510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation  \$7511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation  \$7512 Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation  \$7513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur)  \$7514 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur)  \$7515 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation  \$7516 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, When Performed  \$7515 Open Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, When Performed  \$7515 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, When Performed  \$7515 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed   |         |  | <b></b>                               |
| 27499Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve\$642.027500Closed Treatment Of Femoral Shaft Fracture, Without Manipulation\$483.327501Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation\$519.327502Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation\$728.327503Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation\$728.327504Open Treatment Of Broken Thigh Bone, With Implant\$1,344.327507Open Treatment With Plate/Screws Of Broken Thigh Bone\$973.327508Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion\$480.327509Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin\$627.327510Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation\$618.327511Open Treatment Of Broken Thigh Bone In The Area Of The Knee\$985.027513Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur)\$1,238.327514Open Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation\$971.627519Open Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027510Closed Treatment Of Distal Femoral Epiphyseal Separation; Includes Internal Fixation, When Performed\$807.327520Closed Treatment Of Patellar Fracture, Without Manipulation<  | 2/497   | ALIU/OL NEIVE  | \$532.04                              |
| 27499Decompression Fasciotomy, Thigh And/Or Knee, Multiple Compartments; With Debridement Of Nonviable Muscle And/Or Nerve\$642.027500Closed Treatment Of Femoral Shaft Fracture, Without Manipulation\$483.327501Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation\$519.327502Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation\$728.327503Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation\$728.327504Open Treatment Of Broken Thigh Bone, With Implant\$1,344.327507Open Treatment With Plate/Screws Of Broken Thigh Bone\$973.327508Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion\$480.327509Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin\$627.327510Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation\$618.327511Open Treatment Of Broken Thigh Bone In The Area Of The Knee\$985.027513Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur)\$1,238.327514Open Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation\$971.627519Open Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027510Closed Treatment Of Distal Femoral Epiphyseal Separation; Includes Internal Fixation, When Performed\$807.327520Closed Treatment Of Patellar Fracture, Without Manipulation<  | 07400   | Decempropries Facciotamy, Thigh And/Or Knoo, Multiple Compartments:  | Ф000 С 1                              |
| 27500 Closed Treatment Of Femoral Shaft Fracture, Without Manipulation \$483.3 27501 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$519.9 27502 Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation \$728.3 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$728.3 27504 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$728.3 27505 Open Treatment Of Broken Thigh Bone, With Implant \$13,344.3 27507 Open Treatment With Plate/Screws Of Broken Thigh Bone 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion \$480.3 27509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$627.3 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$618.3 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 27513 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 27514 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation \$483.4 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction \$483.4 27519 Open Treatment Of Distal Femoral Epiphyseal Separation; Includes Internal Fixation, When Performed \$8307.4 27520 Closed Treatment Of Patellar Fracture, Without Manipulation \$225.6  |         |  |                                       |
| Closed Treatment Of Broken Thigh Bone, Knee Area, Without Manipulation   \$519.9  |         |  | *                                     |
| 27502 Closed Treatment Of Broken Thigh Bone, Mid-Portion With Manipulation \$728.1 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$728.1 27506 Open Treatment Of Broken Thigh Bone, With Implant \$1,344.1 27507 Open Treatment With Plate/Screws Of Broken Thigh Bone 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion \$480.2 27509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$627.9 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$618.1 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$985.0 27513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) \$985.0 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) \$971.6 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation \$483.6 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation, With Manipulation, With Or Without Skin Or Skeletal Traction \$632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed \$807.2 27520 Closed Treatment Of Patellar Fracture, Without Manipulation \$225.6   |         |  |                                       |
| 27503 Closed Treatment Of Broken Thigh Bone, Knee Area, Manipulation \$728.1 27506 Open Treatment Of Broken Thigh Bone, With Implant \$1,344.1 27507 Open Treatment With Plate/Screws Of Broken Thigh Bone \$973.1 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion \$480.9 27509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin \$627.9 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$618.1 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$985.0 27513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) \$971.6 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) \$971.6 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation \$483.6 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation, With Manipulation, With Or Without Skin Or Skeletal Traction \$632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed \$807.2 27520 Closed Treatment Of Patellar Fracture, Without Manipulation \$225.6  |         |  |                                       |
| 27506 Open Treatment Of Broken Thigh Bone, With Implant 27507 Open Treatment With Plate/Screws Of Broken Thigh Bone 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion 27508 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 27512 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 27513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed 27520 Closed Treatment Of Patellar Fracture, Without Manipulation 27520 Closed Treatment Of Patellar Fracture, Without Manipulation 27521 Closed Treatment Of Patellar Fracture, Without Manipulation 27522 Closed Treatment Of Patellar Fracture, Without Manipulation   |         |  |                                       |
| 27507 Open Treatment With Plate/Screws Of Broken Thigh Bone 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion 3480.3 27509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin 3627.3 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation 3618.3 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee 3985.0 27513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) 37514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) 37516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation 3483.2 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction 3632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed 3807.3 27520 Closed Treatment Of Patellar Fracture, Without Manipulation 3225.6   |         | <b>o</b> , , 1   |                                       |
| 27508 Closed Treatment Of Broken Thigh Bone, Lower End, Without Manipulation, Inside Or Outside Portion  \$480.9 27509 Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin  \$627.9 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation  \$618.1 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee  \$985.0 27513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur)  \$1,238.2 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur)  \$971.6 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation  \$483.2 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction  \$632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed  \$807.2 27520 Closed Treatment Of Patellar Fracture, Without Manipulation  \$225.6   |         |  |                                       |
| 27509Insertion Of Hardware To Stabilize Broken Thigh Bone Or Separated Growth Plate, Accessed Through The Skin\$627.527510Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation\$618.527511Open Treatment Of Broken Thigh Bone In The Area Of The Knee\$985.627513Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur)\$1,238.227514Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur)\$971.627516Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation\$483.227517Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027519Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.327520Closed Treatment Of Patellar Fracture, Without Manipulation\$225.6   |         |  | \$480.99                              |
| 27510 Closed Treatment Of Broken Thigh Bone In The Area Of The Knee With Manipulation \$985.0 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee \$985.0 27513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) \$1,238.2 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) \$971.6 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation \$483.6 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction \$632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed \$807.2 27520 Closed Treatment Of Patellar Fracture, Without Manipulation \$225.6   |         |  | \$627.98                              |
| 27511 Open Treatment Of Broken Thigh Bone In The Area Of The Knee \$985.0  27513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur) \$1,238.2  27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) \$971.6  27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation \$483.6  27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction \$632.0  27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed \$807.2  27520 Closed Treatment Of Patellar Fracture, Without Manipulation \$225.6   |         |  | \$618.75                              |
| 27513 Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondylar Or Transcondylar Fracture Of Femur)  27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur)  27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation  27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction  27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed  27520 Closed Treatment Of Patellar Fracture, Without Manipulation  \$225.6   |         |  | \$985.07                              |
| 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation 483.4 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction 4632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed 4807.2 27520 Closed Treatment Of Patellar Fracture, Without Manipulation 4825.6   | 2,011   | , and the second | ψ000.01                               |
| 27514 Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur) 27516 Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation 483.4 27517 Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction 4632.0 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed 4807.2 27520 Closed Treatment Of Patellar Fracture, Without Manipulation 4825.6   | 27513   | Open Treatment Of Fracture Of Lower End Of Thigh Bone Just Above Knee Joint (Supracondvlar Or Transcondvlar Fracture Of Femur)   | \$1,238.24                            |
| 27516Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation\$483.427517Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027519Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.227520Closed Treatment Of Patellar Fracture, Without Manipulation\$225.0   |         | · · · · · · · · · · · · · · · · · · ·  | . ,                                   |
| 27516Closed Treatment Of Distal Femoral Epiphyseal Separation; Without Manipulation\$483.427517Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027519Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.227520Closed Treatment Of Patellar Fracture, Without Manipulation\$225.0   | 27514   | Open Treatment Of Fracture Of One Side Of Lower End Of Thigh Bone Just Above Knee Joint (Medial Or Lateral Condyle Fracture Of Femur)  | \$971.66                              |
| 27517Closed Treatment Of Distal Femoral Epiphyseal Separation; With Manipulation, With Or Without Skin Or Skeletal Traction\$632.027519Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.027520Closed Treatment Of Patellar Fracture, Without Manipulation\$225.0   |         |  | \$483.43                              |
| 27519 Open Treatment Of Distal Femoral Epiphyseal Separation, Includes Internal Fixation, When Performed\$807.227520 Closed Treatment Of Patellar Fracture, Without Manipulation\$225.6   |         |  | \$632.00                              |
| 27520 Closed Treatment Of Patellar Fracture, Without Manipulation \$225.0   |         |  | \$807.23                              |
|   | 27520   | Closed Treatment Of Patellar Fracture, Without Manipulation  | \$225.62                              |
|   | 27524   | Open Treatment Of Patellar Fracture, With Internal Fixation And/Or Partial Or Complete Patellectomy And Soft Tissue Repair   | \$764.97                              |

| Code Description  | Foo                    |
|---|------------------------|
| Code   Description   27530   Closed Treatment Of Tibial Fracture, Proximal (Plateau); Without Manipulation  | Fee<br>\$264.46        |
| 27532 Closed Treatment Of Tibial Fracture, Proximal (Plateau); With Or Without Manipulation, With Skeletal Traction   | \$491.28               |
| 27535 Open Treatment Of Fracture Of One Side Of Upper End Of Shinbone (Medial Or Lateral Condyle Fracture Of Tibial Plateau)  | \$937.41               |
| 27536 Open Treatment Of Fracture Of Both Sides Of Upper End Of Shinbone (Medial Or Lateral Condyle Fracture Of Tibial Plateau)  | \$1,111.94             |
| 27538 Closed Treatment Of Intercondylar Spine(S) And/Or Tuberosity Fracture(S) Of Knee, With Or Without Manipulation  | \$455.91               |
| 27540 Open Treatment Of Intercondylar Spine(S) And/Or Tuberosity Fracture(S) Of The Knee, Includes Internal Fixation, When Performed  | \$824.90               |
| 27550 Closed Treatment Of Knee Dislocation; Without Anesthesia  | \$479.10               |
| 27552 Treatment Of Closed Knee Dislocation; Requiring Anesthesia  | \$427.98               |
| Open Treatment Of Knee Dislocation, Includes Internal Fixation, When Performed; Without Primary Ligamentous Repair Or   |                        |
| 27556 Augmentation/Reconstruction   | \$794.35               |
| 27557 Open Treatment Of Knee Dislocation With Ligament Repair   | \$944.51               |
| 27558 Open Treatment Of Knee Dislocation With Ligament Repair And Augmentation/Reconstruction 27560 Closed Treatment Of Patellar Dislocation; Without Anesthesia  | \$1,072.49<br>\$253.83 |
| 27560 Closed Treatment Of Patellar Dislocation; Williodi Ariestriesia  27562 Treatment Of Closed Patellar Dislocation; Requiring Anesthesia   | \$450.63               |
| 27566 Open Treatment Of Patellar Dislocation, With Or Without Partial Or Total Patellectomy   | \$936.11               |
| 27570 Manipulation Of Knee Joint Under General Anesthesia (Includes Application Of Traction Or Other Fixation Devices)  | \$136.54               |
| 27580 Arthrodesis, Knee, Any Technique  | \$1,491.22             |
| 27590 Amputation, Thigh, Through Femur, Any Level;  | \$772.19               |
| 27591  Amputation Of Thigh Through Thigh Bone With Immediate Fitting  | \$875.44               |
| 27592 Amputation Of Thigh Through Thigh Bone, Open Procedure  | \$595.16               |
| 27594 Amputation Of Thigh Through Thigh Bone, Secondary Closure 27596 Amputation, Thigh, Through Femur, Any Level; Reamputation   | \$424.61<br>\$728.69   |
| 27598 Disarticulation At Knee   | \$694.35               |
| 27599 Unlisted Procedure, Femur Or Knee   | Price By Report        |
| 27600 Decompression Fasciotomy, Leg; Anterior And/Or Lateral Compartments Only  | \$366.40               |
| 27601 Decompression Fasciotomy, Leg; Posterior Compartment(S) Only  | \$409.98               |
| 27602 Decompression Fasciotomy, Leg; Anterior And/Or Lateral, And Posterior Compartment(S)  | \$456.08               |
| 27603 Incision And Drainage; Deep Abscess Or Hematoma   | \$366.30               |
| 27604 Incision And Drainage; Infected Bursa 27605 Incision Of Achilles Tendon, Accessed Through The Skin Using Local Anesthetic   | \$424.01               |
| 27606 Incision Of Achilles Tendon, Accessed Through The Skin Columbia Requiring General Anesthesia  | \$232.95<br>\$278.18   |
| 27607 Incision (Eg, Osteomyelitis Or Bone Abscess), Leg Or Ankle  | \$555.02               |
| 27610 Exploration, Drainage, Or Removal Of Foreign Body Of Ankle  | \$644.96               |
| 27612 Arthrotomy, Posterior Capsular Release, Ankle, With Or Without Achilles Tendon Lengthening  | \$574.10               |
| 27613 Biopsy, Soft Tissues; Superficial   | \$240.71               |
| 27614 Biopsy, Soft Tissue Of Leg Or Ankle Area; Deep (Subfascial Or Intramuscular)  | \$547.79               |
| 27615 Removal (Less Than 5 Centimeters) Tissue Growth Of Leg Or Ankle   | \$923.77               |
| 27616 Removal (5 Centimeters Or Greater) Tissue Growth Of Leg Or Ankle  27618 Excision, Tumor, Soft Tissue Of Leg Or Ankle Area, Subcutaneous; Less Than 3 Cm   | \$1,138.57<br>\$433.97 |
| 27619 Excision, Tumor, Soft Tissue Of Leg Or Ankle Area, Subcatalleous, Less Than 5 Cm  | \$470.87               |
| 27620 Arthrotomy, Ankle, With Joint Exploration, With Or Without Biopsy, With Or Without Removal Of Loose Or Foreign Body   | \$462.93               |
| 27625 Arthrotomy, Ankle, With Synovectomy;  | \$587.85               |
| 27626 Arthrotomy, Ankle, For Synovectomy; Including Tenosynovectomy   | \$555.67               |
| 27630 Excision Of Lesion Of Tendon Sheath Or Capsule (Eg, Cyst Or Ganglion)   | \$513.54               |
| 27632 Removal (3 Centimeters Or Greater) Tissue Growth Beneath The Skin Of Leg Or Ankle   | \$438.60               |
| 27634 Excision Of Lesion Of Tendon Sheath Or Capsule (Eg, Cyst Or Ganglion), Leg And/Or Ankle 5 Cm Or Greater   | \$613.42               |
| 27635 Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tibia Or Fibula;  27637 Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tibia Or Fibula; With Primary Autogenous Graft (Includes Obtaining Graft)           | \$592.26<br>\$673.65   |
| 27638 Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tibia Or Fibula; With Primary Homogenous Graft  | \$763.91               |
| 27640 Partial Excision (Craterization, Saucerization, Or Diaphysectomy), Bone (Eg, Osteomyelitis); Tibia  | \$844.84               |
| 27641 Partial Excision (Craterization, Saucerization, Or Diaphysectomy), Bone (Eg, Osteomyelitis); Fibula   | \$598.63               |
| 27645 Radical Resection Of Tumor; Tibia   | \$1,589.14             |
| 27646 Radical Resection Of Tumor; Fibula  | \$1,382.97             |
| 27647 Radical Resection Of Tumor; Talus Or Calcaneus  | \$922.40               |
| 27648 Injection Procedure For Ankle Arthrography  27650 Repair Of Ruptured Achilles Tendon, Open Or Through Skin Procedure  | \$194.99<br>\$676.21   |
| 27650 Repair Of Ruptured Achilles Tendon With Graft, Open Or Through Skin Procedure   | \$610.27               |
| 27654 Repair, Secondary, Achilles Tendon, With Or Without Graft   | \$730.54               |
| 27656 Repair, Fascial Defect Of Leg   | \$482.30               |
| 27658 Repair Of Leg Tendon On The Back Side Of The Leg (Flexor), Primary, Without Graft   | \$364.85               |
| 27659 Repair Of Leg Tendon On The Back Side Of The Leg (Flexor), Secondary With Or Without Graft  | \$483.39               |
| 27664 Repair Of Leg Tendon On The Front Of The Leg (Extensor), Primary, Without Graft   | \$338.06               |
| 27665 Repair Of Leg Tendon On The Front Of The Leg (Extensor), Secondary With Or Without Graft  27675 Repair Of Dislocating Lower Leg Tendons Without A Cut Through The Lower Leg Bone On The Outside Of The Leg (Fibula) | \$426.23<br>\$505.82   |
| 27676 Repair Of Dislocating Lower Leg Tendons With A Cut Through The Lower Leg Bone On The Outside Of The Leg (Fibula)  | \$652.94               |
| 27680 Tenolysis, Flexor Or Extensor Tendon, Leg And/Or Ankle; Single, Each Tendon   | \$401.36               |
| 27681 Tenolysis, Flexor Or Extensor Tendon, Leg And/Or Ankle; Multiple Tendons (Through Separate Incision(S))   | \$468.62               |
| 27685 Lengthening Or Shortening Of Tendon, Leg Or Ankle; Single Tendon (Separate Procedure)   | \$624.52               |
| 27686 Lengthening Or Shortening Of Tendon, Leg Or Ankle; Multiple Tendons (Through Same Incision), Each   | \$490.75               |
| 27687 Gastrocnemius Recession (Eg, Strayer Procedure)   | \$475.77               |
| 27690 Transfer Or Transplant Of Single Tendon (With Muscle Redirection Or Rerouting); Superficial (Eg, Anterior Tibial Extensors Into Midfoot)  | ¢502.40                |
| Transfer Or Transplant Of Single Tendon (With Muscle Redirection Or Rerouting), Superficial (Eg, Anterior Tibial Or Posterior Tibial Through  | \$592.10               |
| 27691 Interosseous Space, Flexor Digitorum Longus, Flexor Hallucis Longus, Or Peroneal Tendon To Midfoot Or Hindfoot)   | \$726.31               |
|   |                        |
| 27692 Transplant Of Tendon And Muscle Rerouting At Lower Leg Or Ankle, Additional Tendon  | \$100.57               |

|  | Description Primary Pageir Of Discreption Of Both Ankla Ligaments   | Fee  |
|--|---|--|
|  | Primary Repair Of Disruption Of Both Ankle Ligaments  Repair Of Disrupted Collateral Ligament Of Ankle, Secondary   | \$563.30<br>\$651.04   |
|  | Arthroplasty, Ankle;  | \$566.86   |
|  | Arthroplasty, Ankle; With Implant ("Total Ankle")   | \$975.00   |
|  | Arthroplasty, Ankle, Revision, Total Ankle  | \$1,007.98   |
|  | Removal Of Ankle Implant  | \$524.74   |
|  | Osteotomy; Tibia  | \$770.51   |
|  | Osteotomy; Fibula   | \$374.51   |
|  | Osteotomy; Tibia And Fibula   | \$1,037.51   |
|  | Osteotomy; Multiple, With Realignment On Intramedullary Rod (Eg, Sofield Type Procedure)  | \$964.05   |
|  | Osteoplasty, Tibia And Fibula, Lengthening Or Shortening  | \$973.15   |
|  | Repair Of Nonunion Or Malunion, Tibia; Without Graft, (Eg, Compression Technique, Etc)  | \$886.01   |
|  | Repair Of Nonunion Or Malunion, Tibia; With Sliding Graft   | \$815.56   |
|  | Repair Of Nonunion Or Malunion, Tibia; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)   | \$1,257.25   |
|  | Repair Of Nonunion Or Malunion, Tibia; By Synostosis, With Fibula, Any Method   | \$1,101.07   |
|  | Repair Of Fibula Nonunion And/Or Malunion With Internal Fixation  | \$977.05   |
|  | Repair Of Congenital Pseudarthrosis, Tibia  | \$954.58   |
|  | Scraping Or Stapling Of Shin Bone Growth Plate, Open Procedure  | \$512.51   |
|  | Scraping Or Stapling Of Leg Bone Growth Plate, Open Procedure   | \$419.09   |
|  | Scraping Or Stapling Of Growth Plates Of Leg Bones, Open Procedure  | \$602.97   |
|  | Arrest, Epiphyseal (Epiphysiodesis), Any Method, Combined, Proximal And Distal Tibia And Fibula;  | \$647.54   |
|  | Epiphyseal Arrest By Epiphysiodesis Or Stapling, Combined, Proximal And Distal Tibia And Fibula; And Distal Femur   | \$709.54   |
|  | Epipnyseal Arrest By Epipnyslodesis Or Stapling, Combined, Proximal And Distal Tibla And Fibula; And Distal Femur  Prophylactic Treatment (Nailing, Pinning, Plating Or Wiring) With Or Without Methyl Methacrylate, Tibla  |  |
|  |   | \$691.31   |
| 2//50  | Closed Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture); Without Manipulation  | \$360.58   |
| 27752  | Closed Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture); With Manipulation, With Or Without Skeletal Traction  | <b>¢</b> ECO 40  |
|  | Insertion Of Fixation To Broken Shin Bone, Accessed Through The Skin  | \$568.48<br>\$593.15   |
|  | Open Treatment Of Tibial Shaft Fracture, (With Or Without Fibular Fracture) With Plate/Screws, With Or Without Cerclage   |  |
|  | Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture) with Plate/Screws, With Or Without Cerciage  Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture) By Intramedullary Implant, With Or Without Interlocking Screws And/Or  | \$907.86   |
|  | Treatment Of Tibial Shatt Fracture (with Or Without Fibular Fracture) By Intramedulary Implant, With Or Without Interlocking Screws And/Or Cerclage   | \$1,005.69   |
|  | Closed Treatment Of Inside Portion Of The Leg (Tibial) Bone Of The Ankle Without Manipulation   |  |
|  |   | \$322.84   |
|  | Closed Treatment Of Inside Portion Of The Leg (Tibial) Bone Of The Ankle With Manipulation  | \$330.42   |
|  | Open Treatment Of The Inside Prominence Of Bone Of The Leg (Fibula) In The Region Of The Ankle  | \$619.07   |
|  | Closed Treatment Of Back Portion Of The Leg (Tibial) Bone Of The Ankle Without Manipulation   | \$263.08   |
|  | Closed Treatment Of Back Portion Of The Leg (Tibial) Bone Of The Ankle With Manipulation  | \$417.48   |
|  | Open Treatment Of The Prominence Of The Ankle Located In The Back Of The Ankle  | \$724.34   |
|  | Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Middle Or Upper End Without Manipulation  | \$214.99   |
| 27781  | Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Middle Or Upper End With Manipulation   | \$317.09   |
| 27784  | Open Treatment Of The Outer Bone Of The Lower Leg   | \$649.10   |
| 27786  | Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Region Of The Ankle Without Manipulation  | \$329.48   |
| 27788  | Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Region Of The Ankle With Manipulation   | \$318.71   |
| 27792  | Open Treatment Of The Outside Prominence Of Bone Of The Leg (Fibula) In The Region Of The Ankle   | \$659.35   |
|  |   |  |
| 27808  | Closed Treatment Of Both The Portion Of The Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle Without Manipulation  | \$233.29   |
|  | , , , , , , , , , , , , , , , , , , ,   | •  |
| 27810  | Closed Treatment Of Both The Portion Of The Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle With Manipulation   | \$419.06   |
|  | Open Treatment Of Prominences Of Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle Without Hardware Fixation  | \$777.65   |
|  | . , , , ,   | *  |
| 27816  | Closed Treatment Of All Three The Portions Of The Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle Without Manipulation   | \$298.61   |
|  | 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3  | <del></del>  |
| 27818  | Closed Treatment Of All Three The Portions Of The Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle With Manipulation  | \$493.32   |
|  | Open Treatment Of All Three Prominences Of The Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle   | \$899.44   |
|  | Open Treatment Of Prominences Of Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle With Hardware Fixation   | \$1,007.66   |
|  | Closed Treatment Of Fracture Of Weight Bearing Articular Portion Of Distal Tibia (Eg. Pilon Or Tibial Plafond), With Or Without Anesthesia;   | ψ.,σσσσ  |
|  | Without Manipulation  | \$265.76   |
|  | Closed Treatment Of Fracture Of Weight Bearing Articular Portion Of Distal Tibia (Eg. Pilon Or Tibial Plafond), With Or Without Anesthesia; With  | Ψ200.70  |
|  | Skeletal Traction And/Or Requiring Manipulation   | \$369.12   |
|  | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Fibula (Smaller Lower Leg Bone)   | \$773.92   |
|  |   | Ψ110.32  |
|  |   | \$Q12 FQ   |
| 27827  | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone   | \$918.58<br>\$1,259.80   |
| 27827<br>27828   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones  | \$1,259.80   |
| 27827 (<br>27828 (<br>27829 (  | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed   | \$1,259.80<br>\$537.71   |
| 27827 (<br>27828 (<br>27829 (<br>27830 (   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia   | \$1,259.80<br>\$537.71<br>\$366.86   |
| 27827 (<br>27828 (<br>27829 (<br>27830 (   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed   | \$1,259.80<br>\$537.71   |
| 27827 (<br>27828 (<br>27829 (<br>27830 (<br>27831 )  | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33   |
| 27827 (<br>27828 (<br>27829 (<br>27830 (<br>27831 -<br>27832 (   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33   |
| 27827 (27828 (27829 (27830 (27831 (27832 (27832 (27840 (27 | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96   |
| 27827 (<br>27828 (<br>27829 (<br>27831 )<br>27831 )<br>27832 (<br>27840 (<br>27842 (   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85   |
| 27827 (<br>27828 (<br>27829 (<br>27831 )<br>27831 )<br>27832 (<br>27840 (<br>27842 (<br>27846 (  | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01   |
| 27827 (<br>27828 (<br>27829 (<br>27831 )<br>27831 )<br>27832 (<br>27840 (<br>27842 (<br>27846 (<br>27848 (   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01   |
| 27827 (27828 (27829 (27831 (27831 (27842 (27842 (27848 (27848 (27846 (27 | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus)   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01<br>\$797.48   |
| 27827 ( 27828 ( 27829 ( 27830 ( 27831 ) 27831 ( 27840 ( 27842 ( 27846 ( 27848 ( 27870 )  | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01<br>\$797.48<br>\$156.50                                       |
| 27827 (<br>27828 (<br>27829 (<br>27830 (<br>27831 )<br>27831 (<br>27832 (<br>27842 (<br>27842 (<br>27846 (<br>27848 (<br>27860 )<br>27870 (<br>27871 )   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01<br>\$797.48<br>\$156.50<br>\$1,012.84                         |
| 27827 (27828 (27829 (27831 ) 27831 ) 27832 (27840 (27842 (27846 (27848 (27860 ) 27870 ) 27870 ) 27870 ) 27870 (27880 )   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal Amputation Leg, Through Tibia And Fibula;   | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01<br>\$797.48<br>\$156.50<br>\$1,012.84<br>\$692.81             |
| 27827 (27828 (27829 (27831 ) 27831 ) 27832 (27840 (27846 (27846 (27846 (27860 ) 27870 ) 27871 ) 27881 , 27880 (27881 )   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal Amputation Leg, Through Tibia And Fibula; With Immediate Fitting Technique Including Application Of First Cast  | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01<br>\$797.48<br>\$156.50<br>\$1,012.84<br>\$692.81<br>\$816.23 |
| 27827 (27828 (27829 (27831 ) 27831 ) 27832 (27840 (27842 (27846 (27846 (27846 (27860 ) 27870 ) 27871 ) 27881 (27888 (27888 (27886 ) 27881 ) 27882 (278888 (278888 (278888 (278888 (278888 (278888 (278888 (278888 (2788888 (2788888 (278888 (278888 (278888 (278888 (278888 (2788888 (2788888 (278888 (278888 (2788888 (278888888 (2788888 (2788888 (2788888 (2788888 (27888888 (2788888 (278888888 (27888888 (2788888 (27888888 (27888888 (27888888 (27888888 (278888888 (27888888 (27888888888 (27888888888 (278888888888  | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fixsion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal Amputation Leg, Through Tibia And Fibula; Amputation Leg, Through Tibia And Fibula; With Immediate Fitting Technique Including Application Of First Cast Amputation Of Leg, Open Procedure | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01<br>\$797.48<br>\$156.50<br>\$1,012.84<br>\$692.81             |
| 27827 ( 27828 ( 27829 ( 27830 ( 27831 )  27831 ( 27832 ( 27840 ( 27842 ( 27846 ( 27846 ( 27847 ) 27870 ( 27871 ) 27881 ( 27882 ( 27884 (   | Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia  Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula Closed Treatment Of Ankle Dislocation; Without Anesthesia Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus) Fusion Of Ankle Joint, Open Procedure Arthrodesis, Tibiofibular Joint, Proximal Or Distal Amputation Leg, Through Tibia And Fibula; With Immediate Fitting Technique Including Application Of First Cast  | \$1,259.80<br>\$537.71<br>\$366.86<br>\$380.33<br>\$692.49<br>\$259.96<br>\$430.85<br>\$662.01<br>\$797.48<br>\$156.50<br>\$1,012.84<br>\$692.81<br>\$816.23 |

| Code  | Description  | Fee                         |
|-------|--|-----------------------------|
| 27888 | Amputation, Ankle, Through Malleoli Of Tibia And Fibula (Eg, Syme, Pirogoff Type Procedures), With Plastic Closure And Resection Of Nerves   | \$588.43                    |
|       | Amputation Of Foot Through Ankle Joint   | \$566.51                    |
| 27892 | Decompression Fasciotomy, Leg; Anterior And/Or Lateral Compartments Only, With Debridement Of Nonviable Muscle And/Or Nerve  | \$459.35                    |
|       | Decompression Fasciotomy, Leg; Posterior Compartment(S) Only, With Debridement Of Nonviable Muscle And/Or Nerve  | \$563.33                    |
|       | Decompression Fasciotomy, Leg; Anterior And/Or Lateral, And Posterior Compartment(S), With Debridement Of Nonviable Muscle And/Or  |                             |
| 27894 | Unlisted Procedure, Leg Or Ankle   | \$542.22<br>Price By Report |
|       | Drainage Of Fluid-Filled Sac (Bursa) Of Foot, Superficial  | \$165.02                    |
|       | Drainage Of Fluid-Filled Sac (Bursa) Of Foot, Deep   | \$263.57                    |
|       | Deep Infection, Below Fascia, Requiring Deep Dissection, With Or Without Tendon Sheath Involvement; Multiple Areas   | \$398.33                    |
|       | Incision, Bone Cortex (Eg, Osteomyelitis Or Bone Abscess), Foot  | \$496.07                    |
| 28008 | Fasciotomy, Foot And/Or Toe  | \$297.43                    |
| 28010 | Repair Of Toe Tendon, Accessed Through The Skin  | \$207.42                    |
|       | Repair Of Multiple Toe Tendons, Accessed Through The Skin  | \$293.96                    |
|       | Incision Of Foot Bone At Ankle Joint With Exploration, Drainage, Or Removal Of Foreign Body  | \$519.10                    |
|       | Exploration, Drainage, Or Removal Of Foreign Body Of Foot  | \$336.98                    |
|       | Exploration, Drainage, Or Removal Of Foreign Body Of Toe Joint   | \$408.08                    |
|       | Release, Tarsal Tunnel (Posterior Tibial Nerve Decompression)  | \$468.26                    |
|       | 1.5 Cm Or Greater  | \$509.90                    |
|       | Excision, Tumor, Soft Tissue Of Foot Or Toe, Subfascial (Eg, Intramuscular); 1. 5 Cm Or Greater  | \$483.98                    |
|       | Excision, Tumor, Soft Tissue Of Foot Or Toe, Subcutaneous; Less Than 1.5 Cm  Excision, Tumor, Soft Tissue Of Foot Or Toe, Subfascial (Eg, Intramuscular); Less Than 1.5 Cm                                     | \$341.42<br>\$450.66        |
|       | Removal (Less Than 3 Centimeters) Tissue Growth Of Foot Or Toe   | \$450.66<br>\$655.34        |
|       | Removal (3 Centimeters Or Greater) Tissue Growth Of Foot Or Toe  | \$939.95                    |
|       | Biopsy Through A Joint Opening In The Midfoot  | \$394.00                    |
|       | Biopsy Through A Joint Opening In The Toe/Forefoot Joint   | \$369.69                    |
|       | Arthrotomy For Synovial Biopsy; Interphalangeal Joint  | \$348.19                    |
|       | Neurectomy, Intrinsic Musculature Of Foot  | \$354.44                    |
|       | Fasciectomy, Plantar Fascia; Partial (Separate Procedure)  | \$448.13                    |
| 28062 | Fasciectomy, Excision Of Plantar Fascia; Radical (Separate Procedure)  | \$536.92                    |
| 28070 | Synovectomy; Intertarsal Or Tarsometatarsal Joint, Each  | \$485.91                    |
| 28072 | Synovectomy; Metatarsophalangeal Joint, Each   | \$463.43                    |
|       | Excision, Interdigital (Morton) Neuroma, Single, Each  | \$368.78                    |
|       | Removal Of Lining Of The Foot Tendon On The Under Surface Of The Foot  | \$506.32                    |
|       | Removal Of Lining Of The Foot Tendon On The Upper Surface Of The Foot  | \$431.76                    |
|       | Excision Of Lesion, Tendon, Tendon Sheath, Or Capsule (Including Synovectomy) (Eg, Cyst Or Ganglion); Foot   | \$321.91                    |
|       | Excision Of Lesion, Tendon, Tendon Sheath, Or Capsule (Including Synovectomy) (Eg, Cyst Or Ganglion); Toe(S), Each   | \$375.27                    |
| 20100 | Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus;  Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining | \$554.86                    |
| 28102 |  | \$560.82                    |
|       | Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus; With Homogenous Bone Graft   | \$360.75                    |
|       | Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tarsal Or Metatarsal, Except Talus Or Calcaneus;   | \$464.03                    |
|       | Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tarsal Or Metatarsal Bones, Except Talus Or Calcaneus; With Iliac Or Other   | *                           |
| 28106 | Autogenous Bone Graft (Includes Obtaining Graft)   | \$396.29                    |
| 28107 | Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tarsal Or Metatarsal Bones, Except Talus Or Calcaneus; With Homogenous Bone Graft  | \$477.23                    |
|       | Excision Or Curettage Of Bone Cyst Or Benign Tumor, Phalanges;   | \$411.03                    |
| 28110 | Ostectomy, Partial Excision, Fifth Metatarsal Head (Bunionette) (Separate Procedure)   | \$319.34                    |
|       | Ostectomy; Complete Excision Of First Metatarsal Head  | \$478.36                    |
|       | Removal Of Bones At Second, Third, Or Fourth Toe Joints  | \$341.97                    |
| 28113 | Ostectomy; Fifth Metatarsal Head   | \$404.13                    |
| 28114 | Ostectomy, Complete Excision; All Metatarsal Heads, With Partial Proximal Phalangectomy, Excluding First Metatarsal (Eg, Clayton Type Procedure)   | \$995.58                    |
|       | Ostectomy, Excision Of Tarsal Coalition  | \$688.70                    |
|       | Ostectomy, Calcaneus; Partial (Cotton Scoop Type Procedure)  | \$622.16                    |
|       | Ostectomy, Calcaneus; For Spur, With Or Without Plantar Fascial Release  | \$475.66                    |
| 28120 | Partial Removal Of Foot Or Heel Bone For Bone Infection In The Mid Hindfoot Area   | \$463.10                    |
| 28122 | Partial Removal Of Foot Or Heel Bone For Bone Infection In The Midfoot Area  | \$469.64                    |
|       | Partial Excision (Craterization, Saucerization, Sequestrectomy, Or Diaphysectomy) Bone (Eg, Osteomyelitis Or Bossing); Phalanx Of Toe  | \$333.59                    |
|       | Resection, Partial Or Complete, Phalangeal Base, Each Toe  | \$290.02                    |
|       | Talectomy (Astragalectomy)   | \$602.31                    |
|       | Metatarsectomy  Photography Too Food Too   | \$477.46                    |
|       | Phalangectomy, Toe, Each Toe Resection, Condyle(S), Distal End Of Phalanx, Each Toe  | \$394.36<br>\$385.84        |
|       | Hemiphalangectomy Or Interphalangeal Joint Excision, Toe, Proximal End Of Phalanx, Each  | \$385.84<br>\$389.34        |
|       | Extensive Removal Of Bone Growth, Middle Portion Of Foot   | \$1,000.26                  |
|       | Radical Resection Of Tumor; Metatarsal   | \$671.66                    |
|       | Radical Resection Of Tumor; Phalanx Of Toe   | \$435.24                    |
|       | Removal Of Foreign Body Of Foot Tissue, Accessed Beneath The Skin  | \$239.35                    |
|       | Removal Of Foreign Body Of Foot Tissue, Deep   | \$319.50                    |
|       | Removal Of Foreign Body Of Foot Tissue, Complicated  | \$361.66                    |
| 28200 | Repair Of Foot Tendon On The Sole Of The Foot Without A Graft  | \$394.97                    |
|       | Repair Of Foot Tendon On The Sole Of The Foot With A Graft   | \$560.40                    |
|       | Repair Of Foot Tendon On The Top Side Of The Foot Without A Graft  | \$334.17                    |

|   | Description   | Fee   |
|---|---|---|
|   | Repair Of Foot Tendon On The Top Side Of The Foot With A Graft  Release Of Single Foot Tendon On The Bottom Side Of The Foot (Flexor Tendon)  | \$550.82<br>\$425.78                                    |
|   | Tenolysis, Flexor, Foot; Multiple Tendons   | \$490.49  |
|   | Release Of Single Foot Tendon On The Top Side Of The Foot (Extensor)  | \$443.97  |
|   | Tenolysis, Extensor, Foot; Multiple Tendons   | \$582.54  |
|   | Incision To Lengthen Foot Tendons, Open Procedure   | \$409.19  |
|   | Incision To Lengthen Toe Tendon, Open Procedure   | \$263.35  |
|   | Incision To Release Foot Tendon, Open Procedure   | \$364.37  |
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| 28238   | Reconstruction (Advancement), Posterior Tibial Tendon With Excision Of Accessory Tarsal Navicular Bone (Eg, Kidner Type Procedure)  | \$699.56  |
|   | Tenotomy Or Release, Abductor Hallucis Muscle (Mccauley Type Procedure)   | \$421.07  |
| 28250   | Division Of Plantar Fascia And Muscle (Eg, Steindler Stripping) (Separate Procedure)  | \$545.07  |
| 28260   | Capsulotomy, Midfoot; Medial Release Only (Separate Procedure)  | \$663.38  |
|   | Capsulotomy, Midfoot; With Tendon Lengthening   | \$814.60  |
|   |   | ·   |
| 28262   | Capsulotomy, Midfoot; Extensive, Including Posterior Talotibial Capsulotomy And Tendon(S) Lengthening (Eg, Resistant Clubfoot Deformity)  | \$1,009.46  |
| 28264   | Capsulotomy, Midtarsal (Eg, Heyman Type Procedure)  | \$841.20  |
| 28270   | Capsulotomy; Metatarsophalangeal Joint, With Or Without Tenorrhaphy, Each Joint (Separate Procedure)  | \$431.51  |
| 28272   | Capsulotomy; Interphalangeal Joint, Each Joint (Separate Procedure)   | \$363.69  |
| 28280   | Syndactylization, Toes (Eg, Webbing Or Kelikian Type Procedure)   | \$481.97  |
| 28285   | Correction, Hammertoe (Eg, Interphalangeal Fusion, Partial Or Total Phalangectomy)  | \$370.97  |
| 28286   | Correction, Cock-Up Fifth Toe, With Plastic Skin Closure (Eg, Ruiz-Mora Type Procedure)   | \$418.23  |
| 28288   | Ostectomy, Partial, Exostectomy Or Condylectomy, Metatarsal Head, Each Metatarsal Head  | \$418.07  |
|   | Correction Of Rigid Deformity Of First Joint Of Big Toe   | \$731.35  |
|   | Correction Of Rigid Deformity Of First Joint Of Big Toe Using Implant   | \$667.60  |
|   | Correction Of Bunion  | \$553.02  |
|   | Correction Of Bunion With Alignment Correction Of Midfoot Bone Toward Ankle   | \$1,034.65  |
| 28296   | Correction Of Bunion With Alignment Correction Of Midfoot Bone Toward Toe Area  | \$777.21  |
|   | Correction Of Bunion With Forefoot And Midfoot Bone Fusion  | \$740.37  |
| 28298   | Correction Of Bunion With Alignment Correction Of Big Toe   | \$678.10  |
| 28299   | Correction Of Bunion With 2 Areas Of Realignment  | \$857.22  |
| 28300   | Osteotomy; Calcaneus (Eg, Dwyer Or Chambers Type Procedure), With Or Without Internal Fixation  | \$655.47  |
|   | Osteotomy; Talus  | \$654.30  |
| 28304   | Osteotomy, Tarsal Bones, Other Than Calcaneus Or Talus;   | \$631.04  |
|   | Osteotomy, Tarsal Bones, Other Than Calcaneus Or Talus; With Autograft (Includes Obtaining Graft) (Eg, Fowler Type)   | \$623.87  |
| 28306   | Incision To Straighten Big Toe Bone At The First Midfoot Bone (Metatarsal) Level  | \$464.44  |
|   |   |   |
|   | Osteotomy, With Or Without Lengthening, Shortening Or Angular Correction, Metatarsal; First Metatarsal With Autograft (Other Than First Toe)  | \$737.82  |
| 28308   | Incision To Straighten Toe Bone (Other Than The Big Toe) At The Midfoot Bone (Metatarsal) Level   | \$472.10  |
|   |   |   |
|   | Osteotomy, With Or Without Lengthening, Shortening Or Angular Correction, Metatarsal; Multiple (Eg, Swanson Type Cavus Foot Procedure)  | \$815.39  |
|   | Incision To Straighten Big Toe Bone At The First Toe Bone Level   | \$481.52  |
|   | Incision To Straighten Toe Bone (Other Than The Big Toe) At Toe Bone Level  | \$489.37  |
|   | Reconstruction, Angular Deformity Of Toe, Soft Tissue Procedures Only (Eg, Overlapping Second Toe, Fifth Toe, Curly Toes)   | \$496.40  |
|   | Sesamoidectomy, First Toe (Separate Procedure)  | \$332.33  |
|   | Repair Of Non-Healed Midfoot Bone   | \$622.77  |
|   | Repair Of Non-Healed Forefoot Bone  | \$732.80  |
|   | Reconstruction Of Abnormal Toe, Without Bone Removal  | \$533.97  |
|   | Reconstruction Of Abnormal Toe, With Bone Removal   | \$617.85  |
|   | Reconstruction, Toe(S) Polydactyly  | \$322.46  |
|   | Reconstruction, Toe(S) Syndactyly, With Or Without Skin Graft(S), Each Web  | \$457.39  |
|   | Reconstruction, Cleft Foot  | \$1,002.08  |
|   | Closed Treatment Of Calcaneal Fracture; Without Manipulation  | \$223.28  |
|   | Closed Treatment Of Calcaneal Fracture; With Manipulation   | \$401.84  |
|   | Insertion Of Hardware To Broken Heel Bone With Manipulation, Accessed Through The Skin  | \$525.42  |
| 28415   | Open Treatment Of Calcaneal Fracture, Includes Internal Fixation, When Performed;   | \$944.15  |
| 20.400  | Open Treatment Of Calcaneal Fracture, Includes Internal Fixation, When Performed; With Primary Iliac Or Other Autogenous Bone Graft   | <b>64 400 00</b>  |
|   | (Includes Obtaining Graft)  | \$1,186.88  |
|   | Closed Treatment Of Talus Fracture; Without Manipulation  | \$186.10  |
|   | Treatment Of Closed Talus Fracture; With Manipulation   | \$331.58  |
|   | Insertion Of Hardware To Broken Ankle Joint With Manipulation, Accessed Through The Skin  | \$465.59  |
|   | Open Treatment Of The Bone That Connects The Foot To The Ankle  | \$898.41  |
|   | Implantation Of Donor Cartilage Cells Into Foot Joint With Grafts, Open Procedure   | \$1,109.61  |
|   | Treatment Of Broken Foot Bone Without Manipulation  | \$153.03  |
|   | Treatment Of Broken Foot Bone With Manipulation   | \$274.88  |
|   | Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin   | \$351.82  |
|   | Open Treatment Of Fracture Of The Hind Portion Of The Foot  | \$510.62  |
|   | Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation  Treatment Of Closed Metatarsal Fracture; With Manipulation, Each  | \$228.56  |
|   |   | \$228.56  |
|   | ·   | # 100 F-  |
| 28476   | Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin  | \$408.70  |
| 28476<br>28485  | Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot  | \$419.58  |
| 28476<br>28485<br>28490                                     | Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation   | \$419.58<br>\$98.06                                     |
| 28476<br>28485<br>28490<br>28495                            | Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation   | \$419.58<br>\$98.06<br>\$169.39                         |
| 28476<br>28485<br>28490<br>28495<br>28496                   | Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation Insertion Of Hardware To Broken Great Toe With Manipulation, Accessed Through The Skin  | \$419.58<br>\$98.06<br>\$169.39<br>\$408.55             |
| 28476<br>28485<br>28490<br>28495<br>28496<br>28505          | Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin  Open Treatment Of Fracture Of The Mid Portion Of The Foot  Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation  Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation  Insertion Of Hardware To Broken Great Toe With Manipulation, Accessed Through The Skin  Open Treatment Of Fracture, Great Toe, Phalanx Or Phalanges, Includes Internal Fixation, When Performed | \$419.58<br>\$98.06<br>\$169.39<br>\$408.55<br>\$454.13 |
| 28476<br>28485<br>28490<br>28495<br>28496<br>28505<br>28510 | Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin Open Treatment Of Fracture Of The Mid Portion Of The Foot Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation Insertion Of Hardware To Broken Great Toe With Manipulation, Accessed Through The Skin  | \$419.58<br>\$98.06<br>\$169.39<br>\$408.55             |

| 28525   |  | F   |
|---|--|---|
|   | Description Open Treatment Of Fracture, Phalanx Or Phalanges, Other Than Great Toe, Includes Internal Fixation, When Performed, Each   | Fee<br>\$503.96   |
| 28530   | Closed Treatment Of A Small Bone In A Tendon In The Foot   | \$107.75  |
|   | Open Treatment Of Fracture Of A Small Bone Within A Tendon In The Foot   | \$314.70  |
|   | Closed Treatment Of Tarsal Bone Dislocation, Other Than Talotarsal; Without Anesthesia   | \$184.97  |
|   | Treatment Of Closed Tarsal Bone Dislocation; Requiring Anesthesia  | \$291.08  |
|   | Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin, Other Than The Ankle (Talus) To The Midfoot  | <del></del>   |
| 28546   | (Tarsal) Bones   | \$559.97  |
|   | Open Treatment Of Dislocation Foot Joint Within The Hindfoot Bones   | \$801.91  |
| 28570   | Closed Treatment Of Dislocated Hindfoot Without Anesthesia   | \$221.77  |
| 28575   | Closed Treatment Of Dislocated Hindfoot With Anesthesia  | \$339.09  |
|   | Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin Of The Ankle (Talus) With The Midfoot (Tarsal)  | •   |
| 28576   | Bones  | \$354.49  |
| 28585   | Open Treatment Of Dislocation Foot Joint Within The Midfoot Bones  | \$827.44  |
| 28600   | Closed Treatment Of Dislocated Midfoot Without Anesthesia  | \$197.47  |
| 28605   | Closed Treatment Of Dislocated Midfoot With Anesthesia   | \$235.94  |
|   | Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin Of The Midfoot (Tarsal) Bones Joint With The  |   |
| 28606   | Forefoot (Metatarsal) Bones  | \$389.83  |
|   | Open Treatment Of Dislocation At The Connection Of The Midfoot To The Forefoot   | \$560.89  |
|   | Closed Treatment Of Metatarsophalangeal Joint Dislocation; Without Anesthesia  | \$111.90  |
|   | Treatment Of Closed Metatarsophalangeal Joint Dislocation; Requiring Anesthesia  | \$163.51  |
|   | Insertion Of Hardware To Foot Bone Dislocation With Manipulation, Accessed Through The Skin  | \$296.03  |
|   | Open Treatment Of Metatarsophalangeal Joint Dislocation, Includes Internal Fixation, When Performed  | \$574.05  |
|   | Closed Treatment Of Interphalangeal Joint Dislocation; Without Anesthesia  | \$83.94   |
|   | Treatment Of Closed Interphalangeal Joint Dislocation; Requiring Anesthesia  | \$141.26  |
|   | Insertion Of Hardware To Toe Joint Dislocation With Manipulation, Accessed Through The Skin  | \$167.53  |
|   | Open Treatment Of Interphalangeal Joint Dislocation, Includes Internal Fixation, When Performed  | \$511.42  |
|   | Fusion Of All Bones Of The Ankle And Hindfoot  | \$1,114.21  |
|   | Fusion Of Three Major Bones Of The Hindfoot  | \$956.80  |
|   | Fusion Of Foot Below The Ankle, Simple   | \$792.45  |
|   | Fusion Of Multiple Foot Joints Without A Bone Incision   | \$747.89  |
|   | Fusion Of Multiple Foot Joints With A Bone Incision  | \$718.10  |
|   | Fusion Of Foot Below The Ankle, Complex  | \$745.49  |
|   | Fusion Of Foot In The Midfoot Region   | \$580.59  |
|   | Fusion Of Great Toe At The Joint With The Foot   | \$539.34  |
|   | Fusion Of Great Toe, Between The Toe Joints  | \$447.72  |
|   | Fusion Of Great Toe, Between The Toe Joints With Tendon Transfer   | \$716.09  |
|   | Amputation Of Midfoot Bone   | \$542.06  |
|   | Amputation Of Foot Across Instep   | \$594.41  |
|   |  |   |
|   | Amputation Of Toe And Midfoot Bone   | \$408.50  |
| 28820   | Amputation Of Toe At Joint Between The Forefoot And Toes   | \$408.50<br>\$314.16  |
| 28820   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints   | \$408.50<br>\$314.16  |
| 28820<br>28825  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other   | \$408.50<br>\$314.16<br>\$235.17  |
| 28820<br>28825<br>28890   | Amputation Of Toe At Joint Between The Forefoot And Toes  Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.38  |
| 28820<br>28825<br>28890<br>28899  | Amputation Of Toe At Joint Between The Forefoot And Toes  Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.39<br>Price By Repor  |
| 28820<br>28825<br>28890<br>28899<br>29000   | Amputation Of Toe At Joint Between The Forefoot And Toes  Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia  Unlisted Procedure, Foot Or Toes  Application Of Halo Type Body Cast (See 20661-20663 For Insertion)  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.39<br>Price By Repor  |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010  | Amputation Of Toe At Joint Between The Forefoot And Toes  Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia  Unlisted Procedure, Foot Or Toes  Application Of Halo Type Body Cast (See 20661-20663 For Insertion)  Application Of Risser Jacket, Localizer, Body; Only   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.36<br>Price By Repor<br>\$318.92<br>\$243.77  |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.39<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26  |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips;   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.35<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40  |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.35<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23  |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.39<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.23<br>\$236.40<br>\$269.23  |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29046  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.33<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.46<br>\$269.23<br>\$264.10  |
| 28820<br>28825<br>28899<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29046   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes  Application Of Halo Type Body Cast (See 20661-20663 For Insertion)  Application Of Risser Jacket, Localizer, Body; Only  Application Of Risser Jacket, Localizer, Body; Including Head  Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type  Application Of Body Cast, Shoulder To Hips; Including One Thigh  Application Of Body Cast, Shoulder To Hips; Including Both Thighs  Application, Cast; Figure-Of-Eight  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.33<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.11<br>\$289.21  |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29049   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.33<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.10<br>\$289.27<br>\$91.11   |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29046<br>29049<br>29055<br>29058   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.33<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.44<br>\$269.23<br>\$264.10<br>\$289.21<br>\$91.11<br>\$204.67   |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29046<br>29049<br>29055<br>29058<br>29065   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion)  Application Of Risser Jacket, Localizer, Body; Only  Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm)  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.38<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.10<br>\$289.21<br>\$91.17<br>\$204.61<br>\$112.72   |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29058<br>29058<br>29055<br>29075  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia  Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion)  Application Of Risser Jacket, Localizer, Body; Only  Application Of Risser Jacket, Localizer, Body; Including Head  Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs  Application, Cast; Figure-Of-Eight Application; Shoulder Spica  Application; Plaster Velpeau  Application Of Cast, Shoulder To Hand (Long Arm)  Application Of Cast, Elbow To Finger (Short Arm)  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.38<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.10<br>\$289.21<br>\$91.11<br>\$204.67<br>\$112.72<br>\$99.70  |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29046<br>29055<br>29055<br>29065<br>29075<br>29085   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application; Hand And Lower Forearm (Gauntlet)  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.39<br>Price By Repor<br>\$318.92<br>\$249.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.10<br>\$289.21<br>\$91.11<br>\$99.70<br>\$91.50   |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29046<br>29049<br>29055<br>29058<br>29075<br>29075<br>29086<br>29086  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes  Application Of Halo Type Body Cast (See 20661-20663 For Insertion)  Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs  Application, Cast; Figure-Of-Eight Application; Plaster Velpeau  Application; Plaster Velpeau  Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture)   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.39<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.11<br>\$204.67<br>\$112.72<br>\$99.70<br>\$91.55  |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29058<br>29075<br>29075<br>29086<br>29086<br>29086   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes  Application Of Halo Type Body Cast (See 20661-20663 For Insertion)  Application Of Risser Jacket, Localizer, Body; Only  Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips;  Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs  Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau  Application Of Cast, Shoulder To Hand (Long Arm) Application of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet)  Application, Cast; Finger (Eg, Contracture)  Application Of Long Arm Splint (Shoulder To Hand)   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.35<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.10<br>\$289.21<br>\$91.11<br>\$204.67<br>\$112.77<br>\$99.70<br>\$91.50<br>\$97.36  |
| 28820<br>28825<br>28890<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29058<br>29075<br>29086<br>29086<br>29105<br>29125   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints  Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes  Application Of Halo Type Body Cast (See 20661-20663 For Insertion)  Application Of Risser Jacket, Localizer, Body; Only  Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips;  Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type  Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs  Application, Cast; Figure-Of-Eight  Application; Shoulder Spica  Application; Plaster Velpeau  Application Of Cast, Shoulder To Hand (Long Arm)  Application Of Cast, Elbow To Finger (Short Arm)  Application, Cast; Finger (Eg, Contracture)  Application, Cast; Finger (Eg, Contracture)  Application Of Long Arm Splint (Shoulder To Hand)  Application Of Non-Moveable, Short Arm Splint (Forearm To Hand)  | \$408.56<br>\$314.16<br>\$235.17<br>\$324.33<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.10<br>\$289.27<br>\$91.11<br>\$204.67<br>\$112.77<br>\$99.70<br>\$91.50<br>\$97.36<br>\$77.36<br>\$83.55  |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035<br>29044<br>29049<br>29055<br>29058<br>29065<br>29075<br>29085<br>29085<br>29105<br>29105<br>29125   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand)   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.33<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.44<br>\$269.23<br>\$264.10<br>\$289.21<br>\$91.11<br>\$204.67<br>\$112.72<br>\$99.76<br>\$97.35<br>\$71.21<br>\$83.55<br>\$67.63  |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29045<br>29058<br>29065<br>29075<br>29086<br>29105<br>29125<br>29126<br>29126<br>29126  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Cast; Figure-Of-Eight Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application of Cast, Elbow To Finger (Short Arm) Application, Cast; Finger (Eg, Contracture) Application, Cast; Finger (Eg, Contracture) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Finger Splint  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.38<br>Price By Repor<br>\$318.92<br>\$269.26<br>\$236.40<br>\$269.22<br>\$264.10<br>\$289.21<br>\$91.11<br>\$204.60<br>\$112.72<br>\$99.70<br>\$91.50<br>\$71.21<br>\$83.53<br>\$71.21  |
| 28820<br>28825<br>28890<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29055<br>29065<br>29075<br>29086<br>29105<br>29126<br>29126<br>29129<br>29129  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application; Cast; Finger (Eg, Contracture) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint  | \$408.56<br>\$314.16<br>\$235.17<br>\$324.38<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$289.21<br>\$91.11<br>\$204.61<br>\$112.72<br>\$99.70<br>\$91.50<br>\$97.33<br>\$71.21<br>\$83.53<br>\$67.65<br>\$52.66  |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29046<br>29058<br>29058<br>29055<br>29075<br>29085<br>29105<br>29125<br>29125<br>29125<br>29130<br>29131<br>29200  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application; Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.36<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$264.16<br>\$289.21<br>\$91.11<br>\$204.67<br>\$112.72<br>\$99.70<br>\$91.56<br>\$77.35<br>\$77.21<br>\$83.55<br>\$67.63<br>\$52.64<br>\$41.83<br>\$39.77  |
| 28820<br>28825<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29055<br>29075<br>29086<br>29105<br>29125<br>29126<br>29130<br>29130<br>29130<br>29130<br>29130<br>29240   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Hol Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application; Cast; Finger (Eg, Contracture) Application, Cast; Finger (Eg, Contracture) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Shoulder (Eg, Velpeau)  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.35<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.21<br>\$91.11<br>\$204.67<br>\$112.72<br>\$99.70<br>\$91.50<br>\$97.35<br>\$71.21<br>\$83.53<br>\$67.63<br>\$52.64<br>\$41.83   |
| 28820<br>28825<br>28890<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29058<br>29075<br>29086<br>29105<br>29125<br>29125<br>29130<br>29131<br>29200<br>29240<br>29260  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Cast; Figure-Of-Eight Application, Shoulder Spica Application, Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application, Cast; Ellow To Finger (Short Arm) Application; Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg. Contracture) Application, Cast; Finger (Eg. Contracture) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Elbow Or Wrist   | \$408.50<br>\$314.16<br>\$235.17<br>\$324.39<br>Price By Report<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.10<br>\$289.21<br>\$91.11<br>\$204.67<br>\$112.72<br>\$99.70<br>\$91.50<br>\$97.35<br>\$77.35<br>\$71.42<br>\$83.53<br>\$67.63<br>\$52.64<br>\$41.83<br>\$33.977<br>\$31.62<br>\$31.87   |
| 28820<br>28825<br>28890<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29058<br>29065<br>29075<br>29086<br>29125<br>29125<br>29130<br>29131<br>29200<br>29240<br>29260<br>29280   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Shoulder Spica Application, Plaster Velpeau Application, Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application Of Long Arm Splint (Shoulder To Hand) Application, Cast; Finger (Eg. Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Blow Of Wrist Strapping; Blow Of Wrist Strapping; Hand Or Finger  | \$408.50<br>\$314.16<br>\$235.17<br>\$324.39<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.23<br>\$264.10<br>\$204.67<br>\$112.72<br>\$99.70<br>\$91.50<br>\$97.35<br>\$77.32<br>\$83.53<br>\$67.63<br>\$32.67<br>\$31.62<br>\$31.62<br>\$31.62  |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29058<br>29065<br>29075<br>29125<br>29126<br>29130<br>29131<br>29200<br>29200<br>29200<br>29200<br>29200<br>29200<br>29200<br>29200<br>29200  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including Both Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast, Figure-Of-Eight Application; Shoulder Spica Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg. Contracture) Application, Cast; Finger (Eg. Contracture) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Horax Strapping; Horax Strapping; Horax Strapping; Horay Application Of Hip Spica Cast One Leg  | \$408.50 \$314.16 \$235.17  \$324.39 Price By Repor \$318.92 \$243.77 \$269.26 \$236.40 \$269.23 \$264.10 \$289.21 \$91.11 \$204.67 \$112.72 \$99.76 \$91.50 \$97.35 \$71.21 \$83.56 \$67.63 \$52.64 \$41.83 \$39.77 \$31.62 \$31.87 \$32.88 \$227.04   |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29055<br>29065<br>29075<br>29126<br>29126<br>29130<br>29131<br>29200<br>29240<br>29260<br>29280<br>29280<br>29325   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including Den Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Cast; Figure-Of-Eight Application, Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application, Cast; Finger (Eg. Contracture) Application, Cast; Finger (Eg. Contracture) Application, Cast; Finger (Eg. Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Shoulder (Eg. Velpeau) Strapping; Blow Or Wrist Strapping; Blow Or Wrist Strapping; Hand Or Finger Application Of Hip Spica Cast, One And One-Half Hip Spica Or Both Legs  | \$408.56 \$314.16 \$235.17 \$324.38 Price By Repor \$318.92 \$243.77 \$269.26 \$236.44 \$269.23 \$264.16 \$289.27 \$91.17 \$99.76 \$91.56 \$97.38 \$71.21 \$83.55 \$67.66 \$52.64 \$41.83 \$39.77 \$31.62 \$31.87 \$32.85 \$227.04  |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29055<br>29075<br>29086<br>29105<br>29126<br>29126<br>29120<br>29120<br>29240<br>29280<br>29280<br>29280<br>29280<br>29280<br>29280<br>29305  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Haio Type Body, Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Cast; Figure-Of-Eight Application, Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Hand And Lower Forearm (Gauntlet) Application, Cast; Finger (Eg, Contracture) Application, Cast; Finger (Eg, Contracture) Application Of Long Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Shoulder (Eg, Velpeau) Strapping; Blow Or Wrist Strapping; Hand Or Finger Application Of Hip Spica Cast, One Leg Application Of Hip Spica Cast, One And One-Half Hip Spica Or Both Legs Application Of Hip Spica Cast, One And One-Half Hip Spica Or Both Legs Application Of Long Leg Cast (Thigh To Toes);  | \$408.56<br>\$314.16<br>\$235.17<br>\$324.35<br>Price By Repor<br>\$318.92<br>\$243.77<br>\$269.26<br>\$236.40<br>\$269.21<br>\$291.11<br>\$204.67<br>\$112.72<br>\$99.70<br>\$97.35<br>\$77.22<br>\$83.55<br>\$67.60<br>\$31.62<br>\$31.87<br>\$32.87<br>\$32.87<br>\$32.87<br>\$227.00<br>\$183.76<br>\$227.00  |
| 28820<br>28825<br>28899<br>29000<br>29015<br>29035<br>29040<br>29044<br>29049<br>29055<br>29058<br>29075<br>29086<br>29105<br>29126<br>29131<br>29200<br>29240<br>29260<br>29280<br>29355<br>29355  | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Risser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Including Head Application Of Body Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head, Minerva Type Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Of-Eight Application, Shoulder Spica Application Of Cast, Shoulder To Hand (Long Arm) Application; Plaster Velpeau Application; Plaster Velpeau Application Of Cast, Shoulder To Hand (Long Arm) Application Of Cast, Shoulder To Hand (Long Arm) Application, Cast; Finger (Eg. Contracture) Application, Cast; Finger (Eg. Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Long Arm Splint (Shoulder To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Hondor Moveable, Hinged Finger Splint Strapping; Hondor Wrist Strapping; Hondor Virist Strapping; Hondor Virist Strapping; Hondor Virist Strapping; Hand Or Finger Application Of Hip Spica Cast, One And One-Half Hip Spica Or Both Legs Application Of Hip Spica Cast, One And One-Half Hip Spica Or Both Legs Application Of Long Leg Cast (Thigh To Toes); Walker Or Armbulatory Type  | \$408.56 \$314.16 \$235.17 \$324.33 Price By Repor \$318.92 \$243.77 \$269.26 \$236.40 \$269.25 \$264.11 \$289.21 \$91.11 \$204.67 \$112.77 \$99.70 \$91.56 \$97.33 \$71.21 \$83.55 \$67.66 \$52.64 \$41.83 \$33.87 \$32.87 \$32.87 \$32.87 \$32.87 \$32.87   |
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| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035<br>29040<br>29044<br>29045<br>29055<br>29058<br>29065<br>29125<br>29125<br>29130<br>29130<br>29200<br>29240<br>29260<br>29280<br>29305<br>29325<br>29325<br>29325<br>29358<br>29358<br>29358   | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Hisser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Only Application Of Bosy Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Ot-Eight Application, Plaster Velpeau Application Of Cast, Elbow To Finger (Short Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Cast; Finger (Eg., Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Shoulder (Eg., Velpeau) Strapping; Shoulder (Eg., Velpeau) Strapping; Ebow Or Wrist Application Of Hip Spica Cast One Leg Application Of Long Leg Cast (Thigh To Toes); Walker Or Ambulatory Type Application Of Cylinder Cast (Tilpid To Toes); Walker Or Ambulatory Type Application Of Cylinder Cast (Tilpid To Toes); Walker Or Ambulatory Type Application Of Cylinder Cast (Tilpid To Toes); Walker Or Ambulatory Type Application Of Cylinder Cast (Tilpid To Toes); Walker Or Ambulatory Type   | \$408.56 \$314.16 \$235.17  \$324.33  Price By Repor \$318.92 \$243.77 \$269.26 \$236.46 \$269.27 \$264.10 \$289.27 \$91.11 \$204.67 \$112.77 \$99.77 \$91.50 \$97.32 \$77.12 \$83.55 \$67.66 \$52.66 \$41.83 \$33.77 \$31.66 \$31.83 \$32.87 \$32.70 \$144.97 \$112.66   |
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Contracture) Application Of Long Arm Spint (Forearm To Hand) Application Of Non-Moveable, Short Arm Spint (Forearm To Hand) Application Of Non-Moveable, Hinged Finger Spint Strapping; Shoulder (Eg. Velpeau) Strapping; Blow Or Wrist Strapping; Blow Or Wrist Strapping; Elbow Or Wrist Strapping; Elbow Or Wrist Strapping; Elbow Or Wrist Strapping; Elbow Or Wrist Application Of Hip Spica Cast One Leg Application Of Long Leg Cast (Thigh To Toes); Walker Or Ambulatory Type Application Of Long Leg Cast (Thigh To Toes); Walker Or Ambulatory Type Application Of Long Leg Cast (Thigh To Toes); Walker Or Ambulatory Type Application Of Long Leg Cast (Thigh To Toes); Walker Or Ambulatory Type Application Of Cyinder Cast (Blow Knee To Toes);  | \$408.56 \$314.16 \$235.17 \$324.33 Price By Repor \$318.92 \$243.77 \$269.26 \$236.44 \$269.22 \$264.10 \$2204.67 \$112.77 \$99.77 \$91.56 \$97.32 \$77.12 \$83.55 \$67.63 \$52.66 \$41.83 \$33.78 \$31.83 \$32.87 \$31.83 \$32.87 \$31.83 \$32.87 \$31.83 \$32.87 \$31.83 \$32.87 \$31.83 \$32.87 \$31.83 \$32.87 \$31.83 \$32.87 \$33.88 |
| 28820<br>28825<br>28890<br>28899<br>29000<br>29010<br>29015<br>29035<br>29044<br>29049<br>29055<br>29058<br>29065<br>29075<br>29125<br>29130<br>29131<br>29200<br>29280<br>29280<br>29305<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355<br>29355 | Amputation Of Toe At Joint Between The Forefoot And Toes Amputation Of Toe At Toe Joints Extracorporeal Shock Wave, High Energy, Performed By A Physician Or Other Qualified Health Care Professional, Requiring Anesthesia Other Than Local, Including Ultrasound Guidance, Involving The Plantar Fascia Unlisted Procedure, Foot Or Toes Application Of Halo Type Body Cast (See 20661-20663 For Insertion) Application Of Hisser Jacket, Localizer, Body; Only Application Of Risser Jacket, Localizer, Body; Only Application Of Bosy Cast, Shoulder To Hips; Application Of Body Cast, Shoulder To Hips; Including Head Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including One Thigh Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application Of Body Cast, Shoulder To Hips; Including Both Thighs Application, Cast; Figure-Ot-Eight Application, Plaster Velpeau Application Of Cast, Elbow To Finger (Short Arm) Application Of Cast, Elbow To Finger (Short Arm) Application, Cast; Finger (Eg., Contracture) Application Of Long Arm Splint (Shoulder To Hand) Application Of Non-Moveable, Short Arm Splint (Forearm To Hand) Application Of Non-Moveable, Hinged Short Arm Splint (Forearm To Hand) Application Of Moveable, Hinged Finger Splint Strapping; Thorax Strapping; Shoulder (Eg., Velpeau) Strapping; Shoulder (Eg., Velpeau) Strapping; Ebow Or Wrist Application Of Hip Spica Cast One Leg Application Of Long Leg Cast (Thigh To Toes); Walker Or Ambulatory Type Application Of Cylinder Cast (Tilpid To Toes); Walker Or Ambulatory Type Application Of Cylinder Cast (Tilpid To Toes); Walker Or Ambulatory Type Application Of Cylinder Cast (Tilpid To Toes); Walker Or Ambulatory Type Application Of Cylinder Cast (Tilpid To Toes); Walker Or Ambulatory Type   | \$408.56 \$314.16 \$235.17 \$324.33 Price By Repor \$318.92 \$243.77 \$269.26 \$236.40 \$269.22 \$236.41 \$289.2 \$91.17 \$204.67 \$112.77 \$99.70 \$91.56 \$97.33 \$71.2 \$83.57 \$67.66 \$41.83 \$32.87 \$31.87 \$32.87 \$32.87 \$32.87 \$32.87 \$32.87   |

| Code  | Description   | Fee                      |
|-------|---|--------------------------|
|       | Application Of Rigid Total Contact Leg Cast   | \$132.25                 |
| 29450 | Application Of Clubfoot Cast With Molding Or Manipulation, Long Or Short Leg  | \$149.59                 |
|       | Application Of Long Leg Splint (Thigh To Ankle Or Toes)   | \$83.03                  |
|       | Application Of Short Leg Splint (Calf To Foot)  | \$72.73                  |
|       | Strapping; Hip  | \$37.33                  |
|       | Strapping; Knee Strapping; Ankle And/Or Foot  | \$28.69<br>\$29.89       |
|       | Strapping, Toes   | \$17.89                  |
|       | Strapping, Unna Boot  | \$54.99                  |
|       | Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot   | \$94.11                  |
|       | Application Of Vein Wound Compression System Upper Arm, Forearm, Hand, And Fingers  | \$80.24                  |
|       | Removal Or Bivalving Of Gauntlet, Boot, Or Body Cast  | \$41.84                  |
|       | Removal Or Bivalving; Full Arm Or Full Leg Cast   | \$42.65                  |
|       | Removal Or Bivalving Of Shoulder, Hip Spica, Or Jacket Cast Repair Of Spica, Body Cast, Or Jacket   | \$110.99                 |
|       | Windowing Of Cast   | \$78.21<br>\$42.97       |
|       | Wedging Of Cast (Except Clubfoot Casts)   | \$89.92                  |
|       | Wedging Of Clubfoot Cast  | \$97.02                  |
| 29799 | Unlisted Procedure, Casting Or Strapping  | Price By Report          |
|       | Arthroscopy, Temporomandibular Joint, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)  | \$486.48                 |
|       | Arthroscopy, Temporomandibular Joint, Surgical  | \$562.23                 |
|       | Diagnostic Examination Of Shoulder Using An Endoscope Incision Of Should Joint Capsule Using An Endoscope   | \$431.34                 |
|       | Repair Of Shoulder Socket Cartilage Using An Endoscope  | \$1,063.43<br>\$1,063.43 |
|       | Removal Of Loose Or Foreign Body Of Shoulder Using An Endoscope   | \$538.77                 |
|       | Partial Removal Of Shoulder Joint Lining Using An Endoscope   | \$492.69                 |
|       | Removal Of Entire Shoulder Joint Lining Using An Endoscope  | \$545.64                 |
|       | Limited Removal Of Abnormal Shoulder Joint Tissue Using Endoscope   | \$552.52                 |
|       | Extensive Removal Of Abnormal Shoulder Joint Tissue Using Endoscope   | \$603.72                 |
|       | Partial Removal Of Collar Bone At Shoulder Using An Endoscope   | \$686.79                 |
|       | Release Or Removal Of Shoulder Scar Tissue Using An Endoscope Shaving Of Shoulder Bone Using An Endoscope   | \$598.86<br>\$171.08     |
|       | Repair Of Shoulder Rotator Cuff Using An Endoscope  | \$1,113.98               |
|       | Release Of Shoulder Biceps Tendon Using An Endoscope  | \$940.79                 |
|       | Arthroscopy, Elbow, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)  | \$420.59                 |
| 29834 | Arthroscopy, Elbow, Surgical; With Removal Of Loose Body Or Foreign Body  | \$452.95                 |
|       | Arthroscopy, Elbow, Surgical; Synovectomy, Partial  | \$467.50                 |
|       | Arthroscopy, Elbow, Surgical; Synovectomy, Complete   | \$537.76                 |
|       | Arthroscopy, Elbow, Surgical; Debridement, Limited  Arthroscopy, Elbow, Surgical; Debridement, Extensive  | \$540.76<br>\$545.40     |
|       | Arthroscopy, Wrist, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)  | \$417.09                 |
|       | Diagnostic Examination Of The Wrist Using An Endoscope For Infection, Irrigation, And Drainage  | \$447.07                 |
|       | Arthroscopy, Wrist, Surgical Synovectomy, Partial   | \$460.76                 |
| 29845 | Arthroscopy, Wrist, Surgical Synovectomy, Complete  | \$538.93                 |
|       | Arthroscopy, Wrist, Surgical Excision Of Triangular Fibrocartilage And/Or Joint Debridement   | \$534.30                 |
|       | Arthroscopy, Wrist, Surgical Internal Fixation For Fracture Or Instability  | \$498.51                 |
| 29848 | Endoscopy, Wrist, Surgical, With Release Of Transverse Carpal Ligament  Arthroscopically Aided Treatment Of Intercondylar Spine(S) And/Or Tuberosity Fracture(S) Of The Knee, With Or Without Manipulation; Without | \$511.07                 |
| 29850 | Internal Or External Fixation (Includes Arthroscopy)  | \$570.65                 |
|       | Arthroscopically Aided Treatment Of Intercondylar Spine(S) And/Or Tuberosity Fracture(S) Of The Knee, With Or Without Manipulation; Without   | φο, σ.σσ                 |
|       | Internal Or External Fixation (Includes Arthroscopy) With Internal Or External Fixation (Includes Arthroscopy)  | \$990.02                 |
|       | Treatment Of Broken Upper Portion Of The Leg Bone (Tibia) With Assistance Of An Endoscope On One Side   | \$713.02                 |
|       | Treatment Of Broken Upper Portion Of The Leg Bone (Tibia) With Assistance Of An Endoscope On Both Sides   | \$900.43                 |
|       | Arthroscopy, Hip, Diagnostic With Or Without Synovial Biopsy (Separate Procedure)  Arthroscopy, Hip, Surgical; With Removal Of Loose Body Or Foreign Body   | \$589.50<br>\$740.52     |
| 29001 | Arthroscopy, Hip, Surgical; With Removal Of Loose Body Of Foreign Body  Arthroscopy, Hip, Surgical; With Debridement/Shaving Of Articular Cartilage (Chondroplasty), Abrasion Arthroplasty, And/Or Resection Of     | \$740.52                 |
| 29862 | Labrum  | \$830.82                 |
| 29863 | Arthroscopy, Hip, Surgical; With Synovectomy  | \$828.88                 |
|       | Arthroscopy, Knee, Surgical; Osteochondral Autograft(S) (Eg, Mosaicplasty) (Includes Harvesting Of The Autograft[S])  | \$956.82                 |
|       | Donor Cartilage Graft At Knee Joint Using An Endoscope  | \$1,158.51               |
|       | Arthroscopy, Knee, Surgical; Meniscal Transplantation (Includes Arthrotomy For Meniscal Insertion), Medial Or Lateral Arthroscopy, Knee, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)           | \$1,504.90               |
|       | Arthroscopy, Knee, Diagnostic, With Or Without Synovial Biopsy (Separate Procedure)  Arthroscopy, Knee, Surgical; For Infection, Lavage And Drainage  | \$379.82<br>\$524.88     |
|       | Arthroscopy, Knee, Surgical; With Lateral Release   | \$551.97                 |
|       | Arthroscopy, Knee, Surgical; For Removal Of Loose Body Or Foreign Body (Eg, Osteochondritis Dissecans Fragmentation, Chondral   |                          |
|       | Fragmentation)  | \$546.24                 |
|       | Arthroscopy, Knee, Surgical; Synovectomy, Limited (Eg, Plica Or Shelf Resection)  | \$506.45                 |
|       | Arthroscopy, Knee, Surgical; Synovectomy, Major, Two Or More Compartments (Eg, Medial Or Lateral)   | \$663.78                 |
|       | Arthroscopy, Knee, Surgical; Debridement/Shaving Of Articular Cartilage (Chondroplasty)  Repair Of Knee Joint With Drilling And Or Scraping Of The Joint  | \$632.00<br>\$671.56     |
| 23019 | Arthroscopy, Knee, Surgical; With Meniscectomy (Medial And Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of  | ψ0/1.30                  |
| 29880 | Articular Cartilage (Chondroplasty), Same Or Separate Compartment(S), When Performed  | \$572.80                 |
|       | Arthroscopy, Knee, Surgical; With Meniscectomy (Medial Or Lateral, Including Any Meniscal Shaving) Including Debridement/Shaving Of   |                          |
|       | Articular Cartilage (Chondroplasty), Same Or Separate Compartment(S), When Performed  | \$552.29                 |
|       | Repair Of Inside Or Outside Knee Joint Cartilage (Meniscus) Using An Endoscope (Arthroscopy)  | \$699.44                 |
|       | Repair Of Inside And Outside Knee Joint Cartilage (Meniscus) Using An Endoscope (Arthroscopy)  Arthroscopy, Knee, Surgical; With Lysis Of Adhesions With Or Without Manipulation (Separate Procedure)               | \$850.85<br>\$629.08     |
| 20004 |   | Ψυ23.00                  |

| Code   | Description  | Fee  |
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|  | Repair Of Knee Joint With Bone Graft Using An Endoscope, With Bone Graft   | \$690.43   |
|  | Repair Of Knee Joint With Bone Graft Using An Endoscope, Without Bone Graft  | \$581.79   |
|  | Arthroscopy, Knee, Surgical; Drilling For Intact Osteochondritis Dissecans Lesion With Internal Fixation  Arthroscopically Aided Anterior Cruciate Ligament Repair/Augmentation Or Reconstruction  | \$687.58   |
|  | Repair Of Posterior Cruciate Ligament Of Knee With Assistance Of An Endoscope  | \$986.96<br>\$1,051.90   |
|  | Arthroscopy, Ankle, Surgical; Excision Of Osteochondral Defect Of Talus And/Or Tibia, Including Drilling Of The Defect   | \$714.68   |
| 23031  | Arthroscopically Aided Repair Of Large Osteochondritis Dissecans Lesion, Talar Dome Fracture, Or Tibial Plafond Fracture, With Or Without  | ψ/ 14.00   |
| 29892  | Internal Fixation (Includes Arthroscopy)   | \$588.99   |
| 29893  | Endoscopic Plantar Fasciotomy  | \$602.01   |
|  | Arthroscopy, Ankle (Tibiotalar And Fibulotalar Joints), Surgical With Removal Of Loose Body Or Foreign Body  | \$515.59   |
|  | Partial Removal Of Ankle Joint Lining Using An Endoscope With Removal Of The Joint Lining  | \$479.79   |
|  | Arthroscopy, Ankle, Surgical; Debridement, Limited   | \$503.81   |
|  | Arthroscopy, Ankle, Surgical; Debridement, Extensive   | \$574.38   |
|  | Arthroscopy, Ankle (Tibiotalar And Fibulotalar Joints), Surgical; With Ankle Arthrodesis   | \$925.10   |
|  | Arthroscopy, Metacarpophalangeal Joint, Diagnostic, Includes Synovial Biopsy  Arthroscopy, Metacarpophalangeal Joint, Surgical; With Debridement   | \$464.71<br>\$497.48   |
|  | Treatment Of Displaced Ligament Of Finger Joint Using An Endoscope   | \$526.85   |
|  | Arthroscopy, Subtalar Joint, Surgical; With Removal Of Loose Body Or Foreign Body  | \$583.34   |
|  | Arthroscopy, Subtalar Joint, Surgical; With Synovectomy  | \$477.57   |
|  | Arthroscopy, Subtalar Joint, Surgical; With Debridement  | \$600.13   |
| 29907  | Arthroscopy, Subtalar Joint, Surgical; With Subtalar Arthrodesis   | \$798.53   |
|  | Arthroscopy, Hip, Surgical; With Femoroplasty (Ie, Treatment Of Cam Lesion)  | \$1,008.30   |
|  | Arthroscopy, Hip, Surgical; With Acetabuloplasty (Ie, Treatment Of Pincer Lesion)  | \$1,035.52   |
|  | Arthroscopy, Hip, Surgical; With Labral Repair   | \$1,029.43   |
|  | Unlisted Procedure, Arthroscopy  Drainage Abases Or Hamptoma, Need Interest Approach   | \$1,674.19   |
|  | Drainage Abscess Or Hematoma, Nasal, Internal Approach   | \$261.39   |
|  | Drainage Abscess Or Hematoma, Nasal Septum Biopsy, Intranasal  | \$263.80<br>\$137.08   |
|  | Removal Of Polyps In Nose, Simple  | \$239.82   |
|  | Removal Of Polyps In Nose, Extensive Or Complex  | \$420.47   |
|  | Removal Or Destruction Of Growth In Nose, Internal Approach  | \$703.46   |
|  | Removal Or Destruction Of Growth In Nose, External Approach  | \$749.73   |
| 30120  | Excision Or Surgical Planing Of Skin Of Nose For Rhinophyma  | \$479.00   |
|  | Excision Dermoid Cyst, Nose; Simple, Skin, Subcutaneous  | \$287.88   |
|  | Excision Dermoid Cyst, Nose; Complex, Under Bone Or Cartilage  | \$623.02   |
|  | Excision Inferior Turbinate, Partial Or Complete, Any Method   | \$295.05   |
|  | Removal Of Nasal Air Passage, Under The Lining Tissue  | \$312.70   |
|  | Rhinectomy; Partial  | \$759.68   |
|  | Rhinectomy; Total Injection Into Turbinate(S), Therapeutic   | \$771.44<br>\$106.23   |
|  | Displacement Therapy (Proetz Type)   | \$144.51   |
|  | Insertion, Nasal Septal Prosthesis (Button)  | \$218.72   |
|  | Removal Foreign Body, Intranasal; Office Type Procedure  | \$227.05   |
|  | Removal Foreign Body, Intranasal; Requiring General Anesthesia   | \$221.18   |
| 30320  | Removal Foreign Body, Intranasal; By Lateral Rhinotomy   | \$467.83   |
| 30400  | Rhinoplasty, Primary Lateral And Alar Cartilages And/Or Elevation Of Nasal Tip   | \$1,174.70   |
|  | Reshaping Of Bone, Cartilage, Or Tip Of Nose   | \$1,313.81   |
|  | Rhinoplasty, Primary Including Major Septal Repair   | \$1,289.99   |
|  | Rhinoplasty, Secondary Minor Revision (Small Amount Of Nasal Tip Work)   | \$1,034.08   |
|  | Rhinoplasty, Secondary Intermediate Revision (Bony Work With Osteotomies)  | \$1,275.36   |
|  | Rhinoplasty, Secondary Major Revision (Nasal Tip Work And Osteotomies)  Rhinoplasty For Nasal Deformity Secondary To Congenital Cleft Lip And/Or Palate, Including Columellar Lengthening; Tip Only  | \$1,647.33   |
| 30460  | Rhinoplasty For Nasal Deformity Secondary To Congenital Cleft Lip And/Or Palate, Including Columellar Lengthening, Tip, Chiy   | \$753.55   |
| 30462  | Osteotomies  | \$1,486.82   |
|  | Repair Of Nasal Vestibular Stenosis (Eg, Spreader Grafting, Lateral Nasal Wall Reconstruction)   | \$1,013.43   |
|  | Repair Of Collapsed Nostril Using Implant In Side Of Nose  | \$2,591.34   |
|  | Repair Of Collapsed Nasal Valve  | \$2,297.07   |
|  | Septoplasty With Or Without Cartilage Implant (Separate Procedure)   | \$714.26   |
|  | Repair Of Nasal Passage Through Nose   | \$705.24   |
|  | Repair Of Nasal Passages Through Palate  | \$954.24   |
|  | Release Of Nasal Scar Tissue   | \$233.81   |
|  | Repair Fistula; Oromaxillary (Combine With 31030 If Antrotomy Is Included)   | \$647.24   |
|  | Repair Fistula; Oronasal Septal Or Other Intranasal Dermatoplasty (Does Not Include Obtaining Graft)   | \$460.56<br>\$650.10   |
| 3U02U  |  | \$638.39   |
| 30630  |  | φυ30.39  |
| 30630  | Repair Nasal Septal Perforations  Ablation. Soft Tissue Of Inferior Turbinates. Unilateral Or Bilateral. Any Method (Eq. Electrocautery, Radiofrequency Ablation, Or Tissue Volume   |  |
|  | Repair Nasar Septar Periorations Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Superficial  | \$156.35   |
|  | Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume   | \$156.35   |
| 30801  | Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Superficial   | \$156.35<br>\$290.01   |
| 30801<br>30802<br>30901  | Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Superficial  Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal)  Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method   |  |
| 30801<br>30802<br>30901<br>30903                                     | Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Superficial  Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal)  Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method  Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method  | \$290.01<br>\$116.13<br>\$187.43                                     |
| 30801<br>30802<br>30901<br>30903<br>30905                            | Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Superficial Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs And/Or Cautery, Any Method; Initial   | \$290.01<br>\$116.13<br>\$187.43<br>\$250.33                         |
| 30801<br>30802<br>30901<br>30903<br>30905<br>30906                   | Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Superficial Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs And/Or Cautery, Any Method; Initial Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs; Initial Subsequent   | \$290.01<br>\$116.13<br>\$187.43<br>\$250.33<br>\$357.62             |
| 30801<br>30802<br>30901<br>30903<br>30905<br>30906<br>30915          | Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Superficial Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (le, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs And/Or Cautery, Any Method; Initial Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs; Initial Subsequent Tying Of Artery (Ethmoidal) For Control Of Nose Bleed | \$290.01<br>\$116.13<br>\$187.43<br>\$250.33<br>\$357.62<br>\$569.17 |
| 30801<br>30802<br>30901<br>30903<br>30905<br>30906<br>30915<br>30920 | Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Superficial Ablation, Soft Tissue Of Inferior Turbinates, Unilateral Or Bilateral, Any Method (Eg, Electrocautery, Radiofrequency Ablation, Or Tissue Volume Reduction); Intramural (Ie, Submucosal) Control Nasal Hemorrhage, Anterior, Simple (Limited Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Anterior, Complex (Extensive Cautery And/Or Packing) Any Method Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs And/Or Cautery, Any Method; Initial Control Nasal Hemorrhage, Posterior, With Posterior Nasal Packs; Initial Subsequent   | \$290.01<br>\$116.13<br>\$187.43<br>\$250.33<br>\$357.62             |

| Code   | Description   | Fee  |
|--|---|--|
|  | Irrigation Of Nasal Sinus (Maxillary)   | \$175.61   |
|  | Irrigation Of Nasal Sinus (Sphenoid)  | \$135.82   |
| 31020  | Incision Of Nasal (Maxillary) Sinus Through The Nose  | \$442.65   |
|  | Create A Window Into The Nasal (Maxillary) Sinus  | \$610.21   |
|  | Sinusotomy, Maxillary (Antrotomy) Radical (Caldwell-Luc) With Removal Of Antrochoanal Polyps  | \$563.64   |
|  | Surgery On Pterygomaxillary Fossa Contents By Transantral Approach Incision Of Nasal (Sphenoid) Sinus   | \$762.06   |
|  | Sinusotomy, Sphenoid, With Or Without Biopsy With Mucosal Stripping Or Removal Of Polyp(S)  | \$493.93<br>\$663.67                                     |
|  | Incision Of Nasal (Frontal) Sinus   | \$456.70   |
|  | Sinusotomy Frontal; Transorbital, Unilateral (For Mucocele Or Osteoma, Lynch Type)  | \$787.32   |
|  | Insertion Of Material To Stop Growth Of Nasal Sinus Lining Without A Bone Flap Done Through An Incision Below The Eyebrow   | \$1,034.65   |
| 31081  | Insertion Of Material To Stop Growth Of Nasal Sinus Lining Without A Bone Flap Done Through An Incision Through The Forehead  | \$1,105.92   |
|  | Insertion Of Material To Stop Growth Of Nasal Sinus Lining With A Bone Flap Done Through An Incision Below The Eyebrow  | \$1,143.70   |
|  | Insertion Of Material To Stop Growth Of Nasal Sinus Lining With A Bone Flap Done Through An Incision Through The Forehead   | \$1,177.64   |
|  | Incision Under The Eyebrow To Drain The Nasal (Frontal) Sinus With Placement Of Bone Graft  | \$1,114.33   |
|  | Incision Through The Forehead To Drain The Nasal (Frontal) Sinus With Placement Of Bone Graft   | \$1,055.15   |
|  | Sinusotomy, Unilateral, Three Or More Paranasal Sinuses (Frontal, Maxillary, Ethmoid, Sphenoid)   | \$1,065.15   |
|  | Ethmoidectomy; Intranasal, Anterior  Removal Of Nasal Sinus From Within The Nose Passage  | \$603.13<br>\$758.74                                     |
|  | Removal Of Nasal Sinus From Outside The Nose Passage  | \$896.13   |
|  | Maxillectomy; Without Orbital Exenteration  | \$1,674.97   |
|  | Maxillectomy; With Orbital Exenteration (En Bloc)   | \$1,860.14   |
|  | Nasal Endoscopy, Diagnostic, Unilateral Or Bilateral (Separate Procedure)   | \$193.66   |
|  | Examination Of Nasal Passage And Sinus Above Teeth (Maxillary Sinus) Using Endoscope  | \$262.86   |
|  | Examination Of Nasal Passage And Sinus Above Eyes (Sphenoid Sinus) Using Endoscope  | \$298.73   |
|  | Biopsy Or Removal Of Nasal Polyp Or Tissue Using An Endoscope   | \$268.46   |
|  | Control Of Bleeding Of Nose Using An Endoscope  | \$195.77   |
|  | Incision Of Tear Duct Using An Endoscope  | \$627.52   |
|  | Removal Of Nasal Breathing Passages Using An Endoscope  | \$160.19   |
|  | Tying Of Sphenopalatine Artery Using An Endoscope   | \$402.85   |
|  | Destruction Of Nasal Nerve By Heat Using An Endoscope  Destruction Of Nasal Nerve By Freezing Using An Endoscope  | \$2,205.31   |
|  | Complete Examination Of Nose And Sinuses Using An Endoscope   | \$2,140.47<br>\$508.48                                   |
|  | Partial Removal Of Nasal Sinus Using An Endoscope   | \$464.68   |
|  | Complete Removal Of Nasal Sinus Using An Endoscope  | \$326.59   |
|  | Incision Of Nasal (Maxillary) Sinus Using An Endoscope  | \$181.52   |
|  | Complete Examination Of Nose And Sinuses And Removal Of Nasal Sinus Using An Endoscope  | \$453.03   |
| 31259  | Removal Of Tissue From Sphenoid Sinus Using An Endoscope  | \$480.02   |
|  | Removal Of Nasal Sinus Tissue Using An Endoscope, Maxillary Sinus   | \$267.40   |
|  | Exploration Of Nasal Sinus Using An Endoscope   | \$380.79   |
|  | Incision Of Nasal (Sphenoid) Sinus Using An Endoscope   | \$203.25   |
|  | Removal Of Nasal Sinus Tissue Using An Endoscope, Sphenoid Sinus Repair Of Leak Of Brain And Spinal Fluid From Sinus Behind Bridge Of Nose Using Endoscope  | \$236.12   |
|  | Repair Of Leak Of Brain And Spinal Fluid From Sinus Behind Eyes Using Endoscope  Repair Of Leak Of Brain And Spinal Fluid From Sinus Behind Eyes Using Endoscope  | \$1,051.12<br>\$1,103.34                                 |
|  | Decompression Of Inner Side Or Floor Of Eye Socket Using Endoscope  | \$1,026.88   |
|  | Decompression Of Inner Side And Floor Of Eye Socket Using Endoscope   | \$990.38   |
|  | Decompression Of Optic Nerve Using Endoscope  | \$1,129.98   |
|  | Dilation Of Maxillary Sinus In The Nose Using An Endoscope  | \$1,874.80   |
| 31296  | Dilation Of Frontal Sinus In The Nose Using An Endoscope  | \$1,900.61   |
| 31297  | Dilation Of Sphenoid Sinus In The Nose Using An Endoscope   | \$1,674.32   |
|  | Dilation Of Sphenoid And Frontal Sinus In The Nose Using An Endoscope   | \$3,534.16   |
|  | Unlisted Procedure, Accessory Sinuses   | Price By Report  |
|  | Removal Of Vocal Cord Growth Or Cartilage Attachment  | \$1,173.19   |
|  | Removal Of Voice Box, Total   | \$1,796.74   |
|  | Removal Of Voice Box, Muscle, Lymph Nodes, And Glands, Total, With Neck Dissection  Laryngectomy; Subtotal Supraglottic, Without Radical Neck Dissection  | \$2,342.82   |
|  | Removal Of Voice Box And Lymph Nodes In Neck  | \$2,025.04<br>\$2,238.84                                 |
|  | Partial Removal Of Voice Box, Horizontal  | \$1,906.59   |
|  | Partial Removal Of Voice Box, Honzontal   | \$1,812.30   |
|  | Partial Removal Of Voice Box, Anterovertical  | \$1,787.52   |
|  | Partial Removal Of Voice Box, Antero-Latero-Vertical  | \$1,955.92   |
| 31390  | Removal Of Voice Box, Throat, Muscle, Lymph Nodes, And Glands   | \$2,591.89   |
|  | Removal Of Voice Box And Throat, Muscle, Lymph Nodes, And Glands With Reconstruction Of Defect  | \$2,726.18   |
|  | Arytenoidectomy Or Arytenoidopexy, External Approach  | \$953.91   |
|  | Epiglottidectomy  | \$775.24   |
|  | Intubation, Endotracheal, Emergency Procedure   | \$140.83   |
| 24500  | Tracheotomy Tube Change Prior To Establishment Of Fistula Tract   | \$35.29<br>\$87.36                                       |
|  | Diagnostic Evamination Of Voice Roy Lising An Endocome, With A Mirror   |  |
| 31505  | Diagnostic Examination Of Voice Box Using An Endoscope, With A Mirror  Biopsy Of Voice Box Using An Endoscope, Indirect   |  |
| 31505<br>31510   | Biopsy Of Voice Box Using An Endoscope, Indirect  | \$204.29   |
| 31505<br>31510<br>31511  | Biopsy Of Voice Box Using An Endoscope, Indirect Removal Of Foreign Body From Voice Box Using An Endoscope, Indirect  | \$204.29<br>\$200.30                                     |
| 31505<br>31510<br>31511<br>31512                                     | Biopsy Of Voice Box Using An Endoscope, Indirect  | \$204.29<br>\$200.30<br>\$204.63                         |
| 31505<br>31510<br>31511<br>31512<br>31513                            | Biopsy Of Voice Box Using An Endoscope, Indirect Removal Of Foreign Body From Voice Box Using An Endoscope, Indirect Laryngoscopy, Indirect (Separate Procedure); With Removal Of Lesion  | \$204.29<br>\$200.30                                     |
| 31505<br>31510<br>31511<br>31512<br>31513<br>31515                   | Biopsy Of Voice Box Using An Endoscope, Indirect Removal Of Foreign Body From Voice Box Using An Endoscope, Indirect Laryngoscopy, Indirect (Separate Procedure); With Removal Of Lesion Laryngoscopy, Indirect (Separate Procedure); With Vocal Cord Injection                                     | \$204.29<br>\$200.30<br>\$204.63<br>\$118.73             |
| 31505<br>31510<br>31511<br>31512<br>31513<br>31515<br>31520<br>31525 | Biopsy Of Voice Box Using An Endoscope, Indirect Removal Of Foreign Body From Voice Box Using An Endoscope, Indirect Laryngoscopy, Indirect (Separate Procedure); With Removal Of Lesion Laryngoscopy, Indirect (Separate Procedure); With Vocal Cord Injection Laryngoscopy Direct; For Aspiration | \$204.29<br>\$200.30<br>\$204.63<br>\$118.73<br>\$204.29 |

| Codo           | Description   | Eoo                  |
|----------------|---|----------------------|
|                | Description Laryngoscopy Direct; With Insertion Of Obturator  | Fee<br>\$176.47      |
|                | Dilation Of The Voice Box Using An Endoscope, Initial   | \$144.78             |
|                | Dilation Of The Voice Box Using An Endoscope, Subsequent  | \$162.26             |
| 31530          | Removal Of Foreign Body From Voice Box Using An Endoscope, Direct   | \$200.11             |
|                | Laryngoscopy, Direct, Operative, With Foreign Body Removal; With Operating Microscope Or Telescope  | \$212.46             |
|                | Biopsy Of Voice Box Using An Endoscope, Direct  | \$190.13             |
|                | Laryngoscopy, Direct, Operative, With Biopsy; With Operating Microscope Or Telescope  | \$211.73             |
|                | Removal Of Growth Of Tongue And/Or Vocal Cord Stripping Using An Endoscope  Removal Of Growth Of Tongue And/Or Vocal Cord Stripping Using An Endoscope With Operating Microscope Or Telescope   | \$243.02<br>\$264.61 |
|                | Removal Of Vocal Cord Growths With Local Tissue Flap Using An Endoscope With Operating Microscope Or Telescope  | \$363.45             |
|                | Removal Of Vocal Cord Growths With Graft Repair Using An Endoscope With Operating Microscope Or Telescope   | \$495.85             |
|                | Repair Of Narrowed Voice Box With Graft In Patient Younger Than 12 Years Of Age   | \$1,493.48           |
| 31552          | Repair Of Narrowed Voice Box With Graft In Patient Age 12 Years Or Older  | \$1,388.35           |
|                | Repair Of Narrowed Voice Box With Graft And Placement Of Indwelling Stent In Patient Younger Than 12 Years Of Age   | \$1,576.81           |
|                | Repair Of Narrowed Voice Box With Graft And Placement Of Indwelling Stent In Patient Age 12 Years Or Older  | \$1,577.78           |
|                | Laryngoscopy, Direct, Operative, With Arytenoidectomy;  | \$282.46             |
|                | Laryngoscopy, Direct, Operative, With Arytenoidectomy; With Operating Microscope Or Telescope  Laryngoscopy, Direct, With Injection Into Vocal Cord(S), Therapeutic;  | \$343.32<br>\$356.76 |
|                | Laryngoscopy, Direct, With Injection Into Vocal Cord(S), Therapeutic; With Operating Microscope Or Telescope  | \$250.29             |
|                | Destruction Of Abnormality Of One Side Of Voice Box Using A Flexible Endoscope  | \$513.94             |
|                | Injection Of Drug Into One Side Of Voice Box Using A Flexible Endoscope   | \$280.30             |
| 31574          | Injection Of Substance To Augment Voice Box Using A Flexible Endoscope  | \$946.35             |
|                | Diagnostic Examination Of Voice Box Using Flexible Endoscope  | \$132.53             |
|                | Biopsy Of Voice Box Using A Flexible Endoscope  | \$197.18             |
|                | Removal Of Foreign Body From Voice Box Using A Flexible Endoscope   | \$262.86             |
|                | Removal Of Growth From Voice Box Using A Flexible Endoscope  Examination To Assess Movement Of Vocal Cord Flaps Using An Endoscope  | \$292.70<br>\$191.79 |
|                | Repair Of Congenital Vocal Cord Defect  | \$1,213.55           |
|                | Incision Of Voice Box To Repair Thyroid Cartilage Fracture  | \$1,331.46           |
|                | Repair Of Split In The Voice Box Cartilage  | \$1,130.97           |
| 31590          | Laryngeal Reinnervation By Neuromuscular Pedicle  | \$881.52             |
|                | Repair Of One Side Of Voice Box By Moving Vocal Cord To Middle  | \$1,032.20           |
|                | Excision Of Part Of Windpipe And Cricoid Cartilage  | \$1,609.69           |
|                | Unlisted Procedure, Larynx  Trachaectery, Planned (Consists Precedure):   | Price By Report      |
|                | Tracheostomy, Planned (Separate Procedure);  Opening Of Windpipe Through Neck For Insertion Of Breathing Tube, Patient Younger Than 2 Years   | \$302.84<br>\$398.67 |
|                | Tracheostomy, Emergency Procedure; Transtracheal  | \$317.88             |
|                | Tracheostomy, Emergency Procedure; Transtracheal Cricothyroid Membrane  | \$325.30             |
|                | Tracheostomy, Fenestration Procedure With Skin Flaps  | \$845.38             |
|                | Construction Of Tracheoesophageal Fistula And Subsequent Insertion Of An Alaryngeal Speech Prosthesis (Eg, Voice Button, Blom-Singer  |                      |
|                | Prosthesis)   | \$505.88             |
|                | Puncture Of Neck And Windpipe Cartilage For Aspiration And/Or Injection, Accessed Through The Skin  | \$88.68              |
|                | Revision Of Permanent Opening Of Windpipe For Breathing, Without A Flap Of Tissue  Revision Of Permanent Opening Of Windpipe For Breathing, With A Flap Of Tissue   | \$375.75<br>\$669.24 |
|                | Tracheoscopy Through Established Tracheostomy Incision  | \$181.57             |
| 01010          | Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; Diagnostic, With Cell Washing, When Performed   | Ψ101.07              |
| 31622          | (Separate Procedure)  | \$262.61             |
|                | Bronchoscopy; With Brushing Or Protected Brushings  | \$297.47             |
| 31624          | Bronchoscopy; With Bronchial Alveolar Lavage  | \$273.61             |
| 21625          | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Bronchial Or Endobronchial Biopsy(S), Single Or Multiple Sites   | ¢270.75              |
| 31023          | Bronchoscopy, Night Of Piexible, With Of Without Pidoloscopic Guidance, With Bronchia Of Endobronchia Biopsy(3), Single Of Widnight Siles   | \$278.75             |
| 31626          | Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Placement Of Fiducial Markers, Single Or Multiple  | \$792.58             |
|                | Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Computer-Assisted, Image-Guided Navigation (List   | Ţ. 02.00             |
|                | Separately In Addition To Code For Primary Procedure[S])  | \$1,258.91           |
|                | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Single Lobe   | \$404.32             |
| 31629          | Needle Biopsy Of Windpipe Cartilage, Airway, And/Or Lung Using An Endoscope   | \$327.71             |
| 31630          | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Tracheal/Bronchial Dilation Or Closed Reduction Of Fracture  | \$200.18             |
| 31030          | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Tracheal Stent(S) (Includes Tracheal/ Bronchial   | φ∠00.18              |
| 31631          | Dilation As Required)   | \$205.07             |
|                | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Lung Biopsy(S), Each Additional Lobe (List  |                      |
| 31632          | Separately In Addition To Code For Primary Procedure)   | \$67.63              |
|                | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Transbronchial Needle Aspiration Biopsy(S), Each Additional  |                      |
| 31633          | Lobe (List Separately In Addition To Code For Primary Procedure)  Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Balloon Occlusion, With Assessment Of Air Leak,  | \$83.87              |
| 31634          | Bronchoscopy, Rigid Of Flexible, including Fluoroscopic Guidance, when Performed; with Balloon Occlusion, with Assessment Of Air Leak, With Administration Of Occlusive Substance (Eg, Fibrin Glue), If Performed   | \$1,577.76           |
|                | Bronchoscopy; With Removal Of Foreign Body  | \$311.46             |
|                | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Placement Of Bronchial Stent(S) (Includes Tracheal/ Bronchial  |                      |
| 31636          | Dilation As Required), Initial Bronchus   | \$198.48             |
| 1              | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; Each Additional Major Bronchus Stented (List Separately In Addition   |                      |
|                |   | \$70.59              |
| 31637          | To Code For Primary Procedure)  Procedure   Procedure | Ψ10.00               |
|                | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Revision Of Tracheal Or Bronchial Stent Inserted At Previous   |                      |
| 31638          | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Revision Of Tracheal Or Bronchial Stent Inserted At Previous Session (Includes Tracheal/Bronchial Dilation As Required)  | \$225.02             |
| 31638          | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Revision Of Tracheal Or Bronchial Stent Inserted At Previous   |                      |
| 31638<br>31640 | Bronchoscopy, Rigid Or Flexible, With Or Without Fluoroscopic Guidance; With Revision Of Tracheal Or Bronchial Stent Inserted At Previous Session (Includes Tracheal/Bronchial Dilation As Required) Bronchoscopy; With Excision Of Tumor   | \$225.02             |

| Code Description  Propheneous Birid Or Flevible Including Flyeroscopic Cuidosco When Performed With Placement Of Catheter(S) For Intracquitory                                      | Fee                    |
|---|------------------------|
| Bronchoscopy, Rigid Or Flexible, Including Fluoroscopic Guidance, When Performed; With Placement Of Catheter(S) For Intracavitary 31643 Radioelement Application                    | \$161.25               |
| 31645 Aspiration Of Lung Secretions From Lung Airways Using An Endoscope, Initial   | \$261.77               |
| 31646 Aspiration Of Lung Secretions From Lung Airways Using An Endoscope, Subsequent  | \$144.50               |
| 31647 Assessment Of Air Leak, Airway Sizing, And Insertion Of Bronchial Valves In Lung Airways Using An Endoscope, Initial  | \$188.86               |
| 31648 Removal Of Bronchial Valves In Lung Airways Using An Endoscope, Initial   | \$180.69               |
| 31649 Removal Of Bronchial Valves In Lung Airways Using An Endoscope, Subsequent  | \$61.75                |
| 31651 Assessment Of Air Leak, Airway Sizing, And Insertion Of Bronchial Valves In Lung Airways Using An Endoscope, Additional Lobe  | \$69.60                |
| 31652 Examination Of Lung Airways Using An Endoscope With Imaging Guidance And Ultrasound, 1 Or 2 Lymph Nodes Involved  | \$999.11               |
| 31653 Examination Of Lung Airways Using An Endoscope With Imaging Guidance And Ultrasound, 3 Or More Lymph Nodes Involved   | \$1,061.17             |
| 31654 Examination Of Lung Airways Using An Endoscope With Imaging Guidance And Ultrasound   | \$118.27               |
| 31660 Thermal Repair Of Lung Airways Using An Endoscope, 1 Lobe   | \$180.45               |
| 31661 Thermal Repair Of Lung Airways Using An Endoscope, 2 Or More Lobes  | \$189.82               |
| 31717 Catheterization With Bronchial Brush Biopsy   | \$285.79               |
| 31720 Catheter Aspiration (Separate Procedure); Nasotracheal 31725 Catheter Aspiration (Separate Procedure); Tracheobronchial With Fiberscope, Bedside                              | \$54.77                |
| 31725 Carrieter Aspiration (Separate Procedure), Hacheodronichia With Fiberscope, Bedside 31730 Insertion Into Windpipe Of Needle Wire, Dilator, Stent, Or Tube For Oxygen Delivery | \$73.30<br>\$1,092.21  |
| 31750 Tracheoplasty; Cervical   | \$1,199.78             |
| 31750 Tracheoplasty, Cervical 31755 Tracheoplasty, Tracheopharyngeal Fistulization, Each Stage  | \$1,645.09             |
| 31760 Tracheoplasty, Intrathoracic  | \$1,204.42             |
| 31766 Carinal Reconstruction  | \$1,545.62             |
| 31770 Bronchoplasty; Graft Repair   | \$1,343.02             |
| 31775 Bronchoplasty, Graft Repail 31775 Bronchoplasty; Excision Stenosis And Anastomosis  | \$1,137.11             |
| 31775 Brothchopiasty, Excision Steriosis And Ariastomosis  31780 Removal Of Narrowed Area Of Windpipe In Neck With Suture Repair  | \$1,069.48             |
| 31780 Removal Of Narrowed Area Of Windpipe In Neck And Chest With Suture Repair   | \$1,009.40             |
| 31785 Excision Of Tracheal Tumor Or Carcinoma; Cervical   | \$976.74               |
| 31786 Removal Of Windpipe Cartilage Growth, Open Chest Procedure  | \$1,257.19             |
| 31800 Suture Of Injury To Windpipe In Neck  | \$671.15               |
| 31805 Suture Of Injury To Windpipe In Chest   | \$720.78               |
| 31820 Surgical Closure Tracheostomy Or Fistula; Without Plastic Repair  | \$421.21               |
| 31825 Surgical Closure Tracheostomy Or Fistula; With Plastic Repair   | \$575.94               |
| 31830 Revision Of Tracheostomy Scar   | \$470.83               |
| 31899 Unlisted Procedure, Trachea, Bronchi  | Price By Report        |
| 32035 Thoracostomy; With Rib Resection For Empyema  | \$653.07               |
| 32036 Thoracostomy; With Open Flap Drainage For Empyema   | \$703.00               |
| 32096 Thoracotomy, With Diagnostic Biopsy(les) Of Lung Infiltrate(S) (Eg, Wedge, Incisional), Unilateral  | \$700.20               |
| 32097 Thoracotomy, With Diagnostic Biopsy(les) Of Lung Nodule(S) Or Mass(Es) (Eg, Wedge, Incisional), Unilateral  | \$701.62               |
| 32098 Thoracotomy, With Biopsy(les) Of Pleura   | \$665.54               |
| 32100 Thoracotomy; With Exploration   | \$789.38               |
| 32110 Thoracotomy; With Control Of Traumatic Hemorrhage And/Or Repair Of Lung Tear  | \$993.31               |
| 32120 Thoracotomy; For Postoperative Complications  | \$816.51               |
| 32124 Thoracotomy; With Open Intrapleural Pneumonolysis   | \$813.96               |
| 32140 Thoracotomy; With Cyst(S) Removal, Includes Pleural Procedure When Performed  | \$868.60               |
| 32141 Thoracotomy; With Resection-Plication Of Bullae, Includes Any Pleural Procedure When Performed  | \$1,324.41             |
| 32150 Thoracotomy; With Removal Of Intrapleural Foreign Body Or Fibrin Deposit  | \$976.91               |
| 32151 Thoracotomy; With Removal Of Intrapulmonary Foreign Body  | \$978.96               |
| 32160 Thoracotomy; With Cardiac Massage   | \$779.85               |
| 32200 Drainage Of Infected Lung Material Or Cyst, Open Procedure  | \$1,002.04             |
| 32215 Pleural Scarification For Repeat Pneumothorax   | \$703.51               |
| 32220 Decortication, Pulmonary, (Separate Procedure); Total   | \$1,434.00             |
| 32225 Decortication, Pulmonary, (Separate Procedure); Partial 32310 Pleurectomy, Parietal (Separate Procedure)  | \$973.26<br>\$808.50   |
| 32310 Predirectionly, Parietal (Separate Procedure)  32320 Decortication And Parietal Pleurectomy   |                        |
| 32400 Needle Biopsy Of Lining Of Lung, Accessed Through The Skin  | \$1,406.07<br>\$125.45 |
| 32400 Needle Biopsy Of Lining Of Conter Cavity Of Chest (Mediastinum), Accessed Through Skin  | \$125.45               |
| 32440 Removal Of Lung, Pneumonectomy;   | \$1,372.38             |
| Removal Of Lung, Pneumonectomy, With Resection Of Segment Of Trachea Followed By Broncho-Tracheal Anastomosis (Sleeve   | φ1,312.30              |
| 32442 Pneumonectomy)  | \$2,642.83             |
| 32445 Removal Of Lung, Pneumonectomy; Extrapleural  | \$3,062.19             |
| 32480 Removal Of Lung, Other Than Pneumonectomy; Single Lobe (Lobectomy)  | \$1,458.70             |
| 32482 Removal Of Lung, Other Than Pneumonectomy; 2 Lobes (Bilobectomy)  | \$1,384.94             |
| 32484 Removal Of Lung, Other Than Pneumonectomy; Single Segment (Segmentectomy)   | \$1,389.59             |
| Removal Of Lung, Other Than Pneumonectomy; With Circumferential Resection Of Segment Of Bronchus Followed By Broncho-Bronchial  | ÷ 1,000.00             |
| 32486 Anastomosis (Sleeve Lobectomy)  | \$2,028.53             |
| Removal Of Lung, Other Than Pneumonectomy; With All Remaining Lung Following Previous Removal Of A Portion Of Lung (Completion  |                        |
| 32488 Pneumonectomy)  | \$2,076.94             |
| 32491 Volume Reduction, Sternal Split Or Transthoracic Approach, Includes Any Pleural Procedure, When Performed   | \$1,288.00             |
| Resection And Repair Of Portion Of Bronchus (Bronchoplasty) When Performed At Time Of Lobectomy Or Segmentectomy (List Separately In  |                        |
| 32501 Addition To Code For Primary Procedure)   | \$208.71               |
| Resection Of Apical Lung Tumor (Eg, Pancoast Tumor), Including Chest Wall Resection, Rib(S) Resection(S), Neurovascular Dissection, When  |                        |
| 32503 Performed; Without Chest Wall Reconstruction(S)   | \$1,563.07             |
| Resection Of Apical Lung Tumor (Eg, Pancoast Tumor), Including Chest Wall Resection, Rib(S) Resection(S), Neurovascular Dissection, Whe   |                        |
| 32504 Performed; With Chest Wall Reconstruction   | \$1,777.89             |
| 32505 Thoracotomy; With Therapeutic Wedge Resection (Eg, Mass, Nodule), Initial   | \$907.48               |
| 32506 Opening In Chest With Partial Removal Of Lung Tissue, Additional Resection  | \$149.70               |
|   | ı                      |
| Thoracotomy; With Diagnostic Wedge Resection Followed By Anatomic Lung Resection (List Separately In Addition To Code For Primary 32507 Procedure)                                  | \$134.73               |

| Code Description   | Foo                      |
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| Code   Description   32540   Extrapleural Enucleation Of Empyema (Empyemectomy);   | Fee<br>\$1,507.22        |
| 32550 Insertion Of Indwelling Tunneled Pleural Catheter With Cuff  | \$812.07                 |
| 32551 Removal Of Fluid From Between Lung And Chest Cavity, Open Procedure  | \$154.47                 |
| 32552 Removal Of Indwelling Tunneled Pleural Catheter With Cuff  | \$195.07                 |
| 32553 Insertion Of Devices In Chest Cavity For Radiation Therapy Guidance, Accessed Through The Skin   | \$502.79                 |
| 32554 Thoracentesis, Needle Or Catheter, Aspiration Of The Pleural Space; Without Imaging Guidance   | \$257.24                 |
| 32555 Thoracentesis, Needle Or Catheter, Aspiration Of The Pleural Space; With Imaging Guidance  | \$346.27                 |
| 32556 Removal Of Fluid From Chest Cavity With Insertion Of Indwelling Catheter, Accessed Through The Skin  | \$705.79                 |
| 32557 Removal Of Fluid From Chest Cavity With Insertion Of Indwelling Catheter And Imaging Guidance, Accessed Through The Skin   | \$738.50                 |
| 32560 Instillation, Via Chest Tube/Catheter, Agent For Pleurodesis (Eg, Talc For Recurrent Or Persistent Pneumothorax)   | \$273.63                 |
| 32601 Diagnostic Examination Of Lungs, Heart Sac, Mid-Chest Cavity, Or Lung Lining Using An Endoscope  | \$297.51                 |
| 32604 Thoracoscopy, Diagnostic (Separate Procedure); Pericardial Sac, With Biopsy  | \$414.62                 |
| 32606 Thoracoscopy, Diagnostic (Separate Procedure); Mediastinal Space, With Biopsy  | \$400.30                 |
| 32607 Thoracoscopy; With Diagnostic Biopsy(les) Of Lung Infiltrate(S) (Eg, Wedge, Incisional), Unilateral  | \$267.44                 |
| 32608 Thoracoscopy; With Diagnostic Biopsy(les) Of Lung Nodule(S) Or Mass(Es) (Eg, Wedge, Incisional), Unilateral  | \$364.65                 |
| 32609 Thoracoscopy; With Biopsy(les) Of Pleura   | \$224.77                 |
| 32650 Thoracoscopy, Surgical; With Pleurodesis (Eg, Mechanical Or Chemical)  | \$655.05                 |
| 32651 Thoracoscopy, Surgical; With Partial Pulmonary Decortication   | \$1,064.82               |
| 32652 Thoracoscopy, Surgical; With Total Pulmonary Decortication, Including Intrapleural Pneumonolysis   | \$1,449.75               |
| 32653 Thoracoscopy, Surgical; With Removal Of Intrapleural Foreign Body Or Fibrin Deposit  | \$976.91                 |
| 32654 Thoracoscopy, Surgical; With Control Of Traumatic Hemorrhage   | \$993.31                 |
| 32655 Thoracoscopy, Surgical; With Resection-Plication Of Bullae, Includes Any Pleural Procedure When Performed  | \$837.93                 |
| 32656 Thoracoscopy, Surgical; With Parietal Pleurectomy  | \$706.92                 |
| 32658 Thoracoscopy, Surgical; With Removal Of Clot Or Foreign Body From Pericardial Sac  | \$698.55                 |
| 32659 Thoracoscopy, Surgical; With Creation Of Pericardial Window Or Partial Resection Of Pericardial Sac For Drainage   | \$715.67                 |
| 32661 Thoracoscopy, Surgical; With Excision Of Pericardial Cyst, Tumor, Or Mass  | \$701.15                 |
| 32662 Thoracoscopy, Surgical; With Excision Of Mediastinal Cyst, Tumor, Or Mass  | \$870.45                 |
| 32663 Thoracoscopy, Surgical; With Lobectomy (Single Lobe)   | \$1,218.83               |
| 32664 Thoracoscopy, Surgical; With Thoracic Sympathectomy  | \$743.55                 |
| 32665 Thoracoscopy, Surgical; With Esophagomyotomy (Heller Type)   | \$1,073.95               |
| 32666 Thoracoscopy, Surgical; With Therapeutic Wedge Resection (Eg, Mass, Nodule), Initial Unilateral  | \$848.12                 |
| 32667 Partial Removal Of Tissue Of One Lung Using An Endoscope, Additional Resection   | \$135.06                 |
| 32668 Biopsy Of Wedge Of Lung Tissue Followed By Partial Removal Of Lung   | \$135.18                 |
| 32669 Thoracoscopy, Surgical; With Removal Of A Single Lung Segment (Segmentectomy) 32670 Thoracoscopy, Surgical; With Removal Of Two Lobes (Bilobectomy)  | \$1,170.10               |
| 32671 Thoracoscopy, Surgical; With Removal Of Lung (Pneumonectomy)   | \$1,396.06               |
| Thoracoscopy, Surgical, With Removal of Eding (Friedmonectomy)  Thoracoscopy, Surgical; With Resection-Plication For Emphysematous Lung (Bullous Or Non-Bullous) For Lung Volume Reduction (Lvrs),   | \$1,539.32               |
| 32672 Unilateral Includes Any Pleural Procedure, When Performed  | \$1,322.20               |
| 32673 Thoracoscopy, Surgical; With Resection Of Thymus, Unilateral Or Bilateral  | \$1,060.51               |
| oze o contraction of the contrac | <b>\$1,000.01</b>        |
| 32674 Thoracoscopy, Surgical; With Mediastinal And Regional Lymphadenectomy (List Separately In Addition To Code For Primary Procedure)  | \$205.66                 |
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| 32701 Thoracic Target(S) Delineation For Stereotactic Body Radiation Therapy (Srs/Sbrt), (Photon Or Particle Beam), Entire Course Of Treatment   | \$186.46                 |
| 32800 Repair Lung Hernia Through Chest Wall  | \$829.82                 |
| 32810 Closure Of Chest Wall Following Open Flap Drainage For Empyema (Clagett Type Procedure)  | \$791.47                 |
| 32815 Closure Of Abnormal Drainage Tract From Chest Cavity To Lung Airway, Open Procedure  | \$2,438.57               |
| 32820 Major Reconstruction, Chest Wall (Post-Traumatic)  | \$1,166.82               |
| 32850 Donor Pneumonectomy (Including Cold Preservation), From Cadaver Donor  | Price By Report          |
| 32851 Lung Transplant, Single; Without Cardiopulmonary Bypass  | \$2,837.28               |
| 32852 Lung Transplant, Single; With Cardiopulmonary Bypass   | \$3,074.38               |
| 32853 Lung Transplant, Double (Bilateral Sequential Or En Bloc); Without Cardiopulmonary Bypass  | \$3,962.57               |
| 32854 Lung Transplant, Double (Bilateral Sequential Or En Bloc); With Cardiopulmonary Bypass   | \$3,648.63               |
| Backbench Standard Preparation Of Cadaver Donor Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding  | D: 5 -                   |
| 32855 Soft Tissues To Prepare Pulmonary Venous/Atrial Cuff, Pulmonary Artery, And Bronchus; Unilateral   | Price By Report          |
| Backbench Standard Preparation Of Cadaver Donor Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding  | Drice Dr. Den            |
| 32856 Soft Tissues To Prepare Pulmonary Venous/Atrial Cuff, Pulmonary Artery, And Bronchus; Bilateral  | Price By Report          |
| 32900 Resection Of Ribs, Extrapleural, All Stages 32905 Thoracoplasty, Schede Type Or Extrapleural (All Stages);   | \$1,243.11<br>\$1,164.29 |
| 32906 Thoracoplasty, Schede Type Or Extrapleural (All Stages);  32906 Thoracoplasty, Schede Type Or Extrapleural (All Stages); With Closure Of Bronchopleural Fistula  | \$1,164.29               |
| 32940 Pneumonolysis, Extraperiosteal, Including Filling Or Packing Procedures  | \$1,433.09               |
| 32960 Pneumothorax, Therapeutic, Intrapleural Injection Of Air   | \$1,077.09               |
| 32994 Destruction Of Growths In One Lung, Accessed Through The Skin With Imaging Using Extreme Cold To Destroy Tissues   | \$5,003.05               |
| 32997 Total Lung Lavage (Unilateral)   | \$313.44                 |
| 32998 Destruction Of Growths In One Lung, Accessed Through The Skin Using Radiofrequency To Destroy Tissues  | \$3,153.49               |
| 32999 Unlisted Procedure, Lungs And Pleura   | Price By Report          |
| 33016 Drainage Of Heart Sac  | \$232.53                 |
| Drainage Of Heart Sac With Insertion Of Catheter Accessed Through Skin, Using Fluoroscopy And/Or Ultrasound Guidance Imaging Guidance,   | 7 . 33                   |
| 33017 In Patient 6 Years Or Older  | \$214.97                 |
| Drainage Of Heart Sac With Insertion Of Catheter Accessed Through Skin, Using Fluoroscopy And/Or Ultrasound Guidance Imaging Guidance,   |                          |
| 33018 In Patient 5 Years Or Older Or Any Age With Congenital Heart Defect  | \$251.83                 |
| 33019 Drainage Of Heart Sac With Insertion Of Catheter Accessed Through Skin, Using Imaging Guidance, Using Ct Imaging Guidance  | \$193.55                 |
| 33020 Pericardiotomy For Removal Of Clot Or Foreign Body (Primary Procedure)   | \$725.12                 |
| 33025 Creation Of Pericardial Window Or Partial Resection For Drainage   | \$748.61                 |
| 33030 Pericardiectomy, Subtotal Or Complete Without Cardiopulmonary Bypass   | \$1,739.78               |
| 33031 Pericardiectomy, Subtotal Or Complete With Cardiopulmonary Bypass  | \$2,147.34               |
| 33050 Resection Of Pericardial Cyst Or Tumor   | \$881.72                 |
| 33120 Excision Of Intracardiac Tumor, Resection With Cardiopulmonary Bypass  | \$1,814.04               |
|  |                          |

| 1 00/   | Description  | Fee  |
|---|--|--|
|   | Resection Of External Cardiac Tumor  | \$1,192.70   |
| 33140   | Transmyocardial Laser Revascularization, By Thoracotomy (Separate Procedure)   | \$1,353.70   |
| 33141   | Transmyocardial Laser Revascularization, By Thoracotomy; Performed At The Time Of Other Open Cardiac Procedure(S) (List Separately In Addition To Code For Primary Procedure)  | \$113.42   |
|   | Insertion Of Electrodes To Outer Layer Of Heart, Open Procedure  | \$750.08   |
|   | Insertion Of Electrodes to Gutor Eayer of Fredrit, Open Frederical State (Eg., Thoracoscopy, Pericardioscopy)  | \$706.13   |
|   | Insertion Of New Or Replacement Of Permanent Pacemaker With Transvenous Electrode(S); Atrial   | \$406.47   |
|   | Insertion Of New Or Replacement Of Permanent Pacemaker With Transvenous Electrode(S); Ventricular  | \$472.17   |
|   | Insertion Of New Or Replacement Of Permanent Pacemaker With Transvenous Electrode(S); Atrial And Ventricular   | \$511.99   |
|   | Placement Of Temporary Pacemaker Leads, Single Chamber   | \$157.77   |
|   | Placement Of Temporary Pacemaker Leads, Dual Chamber  Insertion Of Pacemaker Pulse Generator Only; With Existing Single Lead   | \$148.55<br>\$319.85   |
|   | Insertion Of Pacemaker Pulse Generator Only; With Existing Dual Leads  | \$333.81   |
|   | Upgrade Of Implanted Pacemaker System, Conversion Of Single Chamber System To Dual Chamber System (Includes Removal Of Previously  | *  |
|   | Placed Pulse Generator, Testing Of Existing Lead, Insertion Of New Lead, Insertion Of New Pulse Generator)   | \$427.32   |
|   | Repositioning Of Implanted Pacemaker Or Defibrillator Device   | \$306.63   |
|   | Insertion Of Electrode For Permanent Pacemaker Or Pacing Defibrillator Device  Insertion Of Electrodes For Permanent Pacemaker Or Pacing Defibrillator Device  | \$333.17   |
|   | Repair Of Electrode For Permanent Pacemaker Or Pacing Denominator Device   | \$330.11<br>\$348.99   |
|   | Repair Of 2 Electrodes For Permanent Pacemaker Or Defibrillator Device   | \$336.15   |
|   | Insertion Of Pacemaker Pulse Generator Only; With Existing Multiple Leads  | \$322.80   |
|   | Relocation Of Pacemaker Generator Skin Pocket  | \$343.08   |
|   | Relocation Of Defibrillator Device Skin Pocket   | \$366.59   |
|   | Insertion Of Left Heart Electrode With Attachment To Pacemaker Or Pacing Defibrillator Device  | \$451.90   |
| 33225   | Insertion Of Left Heart Electrode For Pacing Defibrillator Device  | \$454.68   |
| 22226   | Repositioning Of Previously Implanted Cardiac Venous System (Left Ventricular) Electrode (Including Removal, Insertion And/Or Replacement Of Existing Generator)   | \$432.58   |
|   | Removal Of Permanent Pacemaker Pulse Generator With Replacement Of Pacemaker Pulse Generator; Single Lead System   | \$303.37   |
|   | Removal Of Permanent Pacemaker Pulse Generator With Replacement Of Pacemaker Pulse Generator; Dual Lead System   | \$352.25   |
|   | Removal Of Permanent Pacemaker Pulse Generator With Replacement Of Pacemaker Pulse Generator; Multiple Lead System   | \$335.25   |
| 33230   | Insertion Of Pacing Defibrillator Pulse Generator With Existing Dual Leads   | \$342.80   |
|   | Insertion Of Pacing Defibrillator Pulse Generator With Existing Multiple Leads   | \$356.34   |
|   | Removal Of Permanent Pacemaker Pulse Generator Only  | \$234.49   |
|   | Removal Of Transvenous Pacemaker Electrode(S); Single Lead System, Atrial Or Ventricular   | \$432.57   |
|   | Removal Of Transvenous Pacemaker Electrode(S); Dual Lead System  Removal Of Permanent Right Heart Electrodes And Pacemaker, Single Lead System   | \$568.85<br>\$691.79   |
|   | Removal Of Permanent Right Heart Electrodes And Pacemaker, Dual Lead System  | \$741.18   |
|   | Removal Of Permanent Transvenous Electrode(S) By Thoracotomy   | \$836.52   |
| 33240   | Insertion Of Pacing Defibrillator Pulse Generator With Existing Single Lead  | \$326.45   |
|   | Removal Of Defibrillator Pulse Generator   | \$208.47   |
|   | Removal Of Defibrillator Electrodes Through Incision Of Chest  | \$1,203.22   |
|   | Removal Of Defibrillator Electrodes Through Vein   | \$740.44   |
| 33249   | Insertion Or Replacement Of Single Or Dual Chamber Pacing Defibrillator Leads  Operative Ablation Of Supraventricular Arrhythmogenic Focus Or Pathway (Eg, Wolff-Parkinson-White, Atrioventricular Node Re-Entry),   | \$904.07   |
| 33250   | Tract(S) And/Or Focus (Foci); Without Cardiopulmonary Bypass   | \$1,269.62   |
|   | Operative Ablation Of Supraventricular Arrhythmogenic Focus Or Pathway (Eg, Wolff-Parkinson-White, A-V Node Re-Entry), Tract(S) And/Or   | * ,  |
|   | Focus (Foci) With Cardiopulmonary Bypass   | \$1,416.15   |
|   | Operative Tissue Ablation And Reconstruction Of Atria, Limited (Eg, Modified Maze Procedure)   | \$1,189.40   |
|   | Operative Tissue Ablation And Reconstruction Of Atria, Extensive (Eg, Maze Procedure); Without Cardiopulmonary Bypass  | \$1,417.00   |
|   | Partial Destruction And Reconstruction Of Upper Heart Chamber, Extensive, On Heart-Lung Machine  Destruction And Reconstruction Of Right Upper Heart, Limited  | \$1,676.72<br>\$567.72   |
|   | Destruction And Reconstruction Of Right Upper Heart, Extensive   | \$569.74   |
|   | Operative Tissue Ablation And Reconstruction Of Atria. Performed At The Time Of Other Cardiac Procedure(S), Extensive (Eq. Maze  | Ψ000.74  |
|   |  |  |
|   | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  | \$742.73   |
| 33261   | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  | \$1,403.58   |
| 33261<br>33262  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  | \$1,403.58<br>\$371.05   |
| 33261<br>33262<br>33263   | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)   | \$1,403.58<br>\$371.05<br>\$385.38   |
| 33261<br>33262<br>33263<br>33264  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04   |
| 33261<br>33262<br>33263<br>33264<br>33265   | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33267<br>33268  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33267<br>33268<br>33269   | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33267<br>33268<br>33269<br>33270  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Or Replacement Of Defibrillator With Electrode   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33267<br>33268<br>33269<br>33270<br>33271   | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Replacement Of Defibrillator With Electrode  Insertion Of Defibrillator Electrode   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33267<br>33268<br>33269<br>33270<br>33271<br>33272  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Or Replacement Of Defibrillator With Electrode  Removal Of Defibrillator Electrode   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74<br>\$400.19   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33267<br>33268<br>33269<br>33270<br>33271<br>33272  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Replacement Of Defibrillator With Electrode  Insertion Of Defibrillator Electrode   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33267<br>33268<br>33270<br>33271<br>33272<br>33273  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Or Replacement Of Defibrillator With Electrode  Removal Of Defibrillator Electrode   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74<br>\$400.19   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33267<br>33268<br>33279<br>33271<br>33272<br>33273  | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Or Replacement Of Defibrillator With Electrode  Insertion Of Defibrillator Electrode  Removal Of Defibrillator Electrode  Repositioning Of Previously Implanted Defibrillator Electrode  | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74<br>\$400.19<br>\$309.82<br>\$353.65   |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33266<br>33269<br>33270<br>33271<br>33272<br>33273<br>33274<br>33275<br>33285                   | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Or Replacement Of Defibrillator With Electrode  Removal Of Defibrillator Electrode  Removal Of Defibrillator Electrode  Repositioning Of Previously Implanted Defibrillator Electrode  Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Insertion Of Heart Rhythm Monitor Under Skin   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74<br>\$400.19<br>\$309.82<br>\$353.65<br>\$475.45<br>\$442.71<br>\$3,283.10                         |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33266<br>33270<br>33271<br>33272<br>33273<br>33274<br>33275<br>33285<br>33286                   | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Or Replacement Of Defibrillator With Electrode  Removal Of Defibrillator Electrode  Repositioning Of Previously Implanted Defibrillator Electrode  Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Insertion Of Heart Rhythm Monitor Under Skin  Removal Of Heart Rhythm Monitor From Under Skin  | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74<br>\$400.19<br>\$309.82<br>\$353.65<br>\$475.45<br>\$442.71<br>\$3,283.10<br>\$136.92             |
| 33261<br>33262<br>33263<br>33264<br>33265<br>33266<br>33269<br>33270<br>33271<br>33272<br>33273<br>33274<br>33275<br>33285<br>33286<br>33289          | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Of Replacement Of Defibrillator With Electrode  Removal Of Defibrillator Electrode  Repositioning Of Previously Implanted Defibrillator Electrode  Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Insertion Of Heart Rhythm Monitor Under Skin  Removal Of Heart Rhythm Monitor From Under Skin  Insertion Of Wireless Pressure Sensor Into Lung Artery Via Catheter   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74<br>\$400.19<br>\$309.82<br>\$353.65<br>\$475.45<br>\$442.71<br>\$3,283.10<br>\$136.92<br>\$324.44 |
| 33261<br>33262<br>33263<br>33264<br>33266<br>33266<br>33269<br>33270<br>33271<br>33273<br>33273<br>33273<br>33274<br>33286<br>33289<br>33300          | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Or Replacement Of Defibrillator With Electrode  Insertion Of Defibrillator Electrode  Removal Of Defibrillator Electrode  Repositioning Of Previously Implanted Defibrillator Electrode  Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Insertion Of Heart Rhythm Monitor Under Skin  Removal Of Heart Rhythm Monitor Under Skin  Insertion Of Wireless Pressure Sensor Into Lung Artery Via Catheter  Repair Of Cardiac Wound; Without Bypass | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74<br>\$400.19<br>\$309.82<br>\$353.65<br>\$475.45<br>\$442.71<br>\$3,283.10<br>\$136.92<br>\$324.44 |
| 33261<br>33262<br>33263<br>33264<br>33266<br>33267<br>33268<br>33270<br>33271<br>33272<br>33273<br>33274<br>33275<br>33285<br>33289<br>33300<br>33305 | Procedure), With Cardiopulmonary Bypass (List Separately In Addition To Code For Primary Procedure)  Operative Ablation Of Ventricular Arrhythmogenic Focus With Cardiopulmonary Bypass  Removal And Replacement Of Defibrillator Pulse Generator, Single Wire (Lead)  Removal And Replacement Of Defibrillator Pulse Generator, Two Wires (Leads)  Removal And Replacement Of Defibrillator Pulse Generator, Multiple Wires (Leads)  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Limited  Reconstruction Of Upper Heart Chamber Tissue And Alteration Of Electrical Pathway Using An Endoscope, Extensive  Exclusion Of Appendage Of Left Upper Chamber Of Heart  Exclusion Of Appendage Of Left Upper Chamber Of Heart Performed During Other Procedure On Chest  Exclusion Of Appendage Of Left Upper Chamber Of Heart Using An Endoscope  Insertion Of Replacement Of Defibrillator With Electrode  Removal Of Defibrillator Electrode  Repositioning Of Previously Implanted Defibrillator Electrode  Insertion Or Replacement Of Permanent Leadless Pacemaker Into Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Removal Of Permanent Leadless Pacemaker From Lower Right Chamber Of Heart Via Catheter Using Imaging Guidance  Insertion Of Heart Rhythm Monitor Under Skin  Removal Of Heart Rhythm Monitor From Under Skin  Insertion Of Wireless Pressure Sensor Into Lung Artery Via Catheter   | \$1,403.58<br>\$371.05<br>\$385.38<br>\$361.04<br>\$1,288.00<br>\$1,601.33<br>\$853.20<br>\$105.64<br>\$676.13<br>\$556.74<br>\$400.19<br>\$309.82<br>\$353.65<br>\$475.45<br>\$442.71<br>\$3,283.10<br>\$136.92<br>\$324.44 |

|  | Description  | Fee   |
|--|--|---|
|  | Suture Repair Of Aorta Or Great Vessels; Without Shunt Or Cardiopulmonary Bypass   | \$923.14  |
|  | Suture Repair Of Aorta Or Great Vessels; With Shunt Bypass   | \$1,038.75  |
| 33322  | Suture Repair Of Aorta Or Great Vessels; With Cardiopulmonary Bypass   | \$1,213.43  |
| 33330  | Insertion Of Graft, Aorta Or Great Vessels; Without Shunt, Or Cardiopulmonary Bypass   | \$1,242.53  |
|  | Insertion Of Graft; With Cardiopulmonary Bypass  | \$1,809.92  |
|  | Repair Of Left Upper Heart   | \$687.45  |
|  | Replacement Of Aortic Valve With Prosthetic Valve, Accessed Through The Skin   | \$1,165.85  |
|  | Replacement Of Aortic Valve With Prosthetic Valve, Open Procedure Through Femoral Artery   | \$1,143.03  |
|  | Replacement Of Aortic Valve With Prosthetic Valve, Open Procedure Through Axillary Artery  Replacement Of Aortic Valve With Prosthetic Valve, Open Procedure Through Iliac Artery  | \$1,184.77  |
|  | Replacement Of Aortic Valve With Prosthetic Valve Through Catheter By Approach Through Aorta   | \$1,181.11<br>\$1,237.18  |
|  | Transcatheter Aortic Valve Replacement (Tavr/Tavi) With Prosthetic Valve: Transapical Exposure (Eq. Left Thoracotomy)  | \$1,362.73  |
|  | Insertion Of Catheters In Peripheral Blood Vessels Accessed Through Skin For Heart-Lung Machine Support Of Replacement Of Aortic Valve With Prosthetic Valve Through Catheter  | \$527.11  |
|  | Insertion Of Catheters In Peripheral Blood Vessels, Open Procedure, For Heart-Lung Machine Support Of Replacement Of Aortic Valve With   |   |
|  | Prosthetic Valve Through Catheter Insertion Of Catheters In Central Blood Vessels For Heart-Lung Machine Support Of Replacement Of Aortic Valve With Prosthetic Valve  | \$638.78  |
|  | Through Catheter   | \$842.90  |
|  | Placement And Subsequent Removal Of Device To Protect Brain From Embolism Through Catheter Using Imaging Guidance  | \$108.69  |
|  | Simple Repair Of Aortic Valve By Open Procedure On Heart-Lung Machine  | \$1,951.43  |
|  | Complex Repair Of Aortic Valve By Open Procedure On Heart-Lung Machine  Construction Of Apical-Aortic Conduit  | \$2,312.36<br>\$1,522.66  |
|  | Replacement Of Aortic Valve Using Artificial Valve On Heart-Lung Machine, Open Procedure   | \$2,189.50  |
|  | Replacement Of Aortic Valve Using Human Donor Valve On Heart-Lung Machine, Open Procedure  | \$2,491.52  |
|  | Replacement Of Aortic Valve Using Tissue Valve On Heart-Lung Machine, Open Procedure   | \$2,202.21  |
|  | Replacement, Aortic Valve; With Aortic Annulus Enlargement, Noncoronary Sinus  | \$2,904.54  |
| 33412  | Replacement, Aortic Valve; With Transventricular Aortic Annulus Enlargement (Konno Procedure)  | \$2,373.96  |
|  | Replacement, Aortic Valve; By Translocation Of Autologous Pulmonary Valve With Allograft Replacement Of Pulmonary Valve (Ross  |   |
|  | Procedure)   | \$2,529.85  |
|  | Repair Of Left Ventricular Outflow Tract Obstruction By Patch Enlargement Of The Outflow Tract   | \$1,859.19  |
|  | Resection Or Incision Of Subvalvular Tissue For Discrete Subvalvular Aortic Stenosis   | \$1,836.66  |
|  | Ventriculomyotomy (-Myectomy) For Idiopathic Hypertrophic Subaortic Stenosis (Eg, Asymmetric Septal Hypertrophy)   | \$1,758.12  |
|  | Aortoplasty (Gusset) For Supravalvular Stenosis  Replacement Of Mitral Valve With Prosthetic Valve Accessed Through The Skin, Initial  | \$1,453.04<br>\$1,569.46  |
|  | Replacement Of Mitral Valve With Prosthetic Valve Accessed Through The Skin, Additional Prosthesis(Es)   | \$367.95  |
|  | Removal Of Scar Tissue Of Valve Between Left Heart Chambers, Closed Heart Procedure  | \$1,265.13  |
|  | Removal Of Valve Scar Tissue Between Left Heart Chambers On Heart-Lung Machine, Open Procedure   | \$1,449.78  |
|  | Valvuloplasty, Mitral Valve, With Cardiopulmonary Bypass   | \$2,368.37  |
|  | Valvuloplasty, Mitral Valve, With Cardiopulmonary Bypass With Prosthetic Ring  | \$2,067.53  |
|  | Valvuloplasty, Mitral Valve, With Cardiopulmonary Bypass Radical Reconstruction With Or Without Ring   | \$2,119.47  |
| 33430  | Replacement, Mitral Valve, With Cardiopulmonary Bypass   |   |
| 1  | Replacement Of Aortic Valve By Translocation Of Pulmonary Valve, Replacement Of Pulmonary Valve With Conduit, And Enlargement Of   | \$2,748.03  |
| 00440  |  | •   |
|  | Outflow Tract From Left Lower Chamber Of Heart   | \$2,972.82  |
| 33460  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass  | \$2,972.82<br>\$2,079.13  |
| 33460<br>33463   | Outflow Tract From Left Lower Chamber Of Heart  Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass  Valvuloplasty, Tricuspid Valve; Without Ring Insertion   | \$2,972.82<br>\$2,079.13<br>\$1,967.20  |
| 33460<br>33463<br>33464  | Outflow Tract From Left Lower Chamber Of Heart  Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass  Valvuloplasty, Tricuspid Valve; Without Ring Insertion  Valvuloplasty, Tricuspid Valve; With Ring Insertion  | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28  |
| 33460<br>33463<br>33464<br>33465   | Outflow Tract From Left Lower Chamber Of Heart  Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass  Valvuloplasty, Tricuspid Valve; Without Ring Insertion  Valvuloplasty, Tricuspid Valve; With Ring Insertion  Replacement, Tricuspid Valve, With Cardiopulmonary Bypass   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36  |
| 33460<br>33463<br>33464<br>33465<br>33468  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure  | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33477   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33477<br>33478  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33477<br>33478  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33477<br>33478<br>33496<br>33500  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure)  | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,326.81<br>\$1,371.96<br>\$1,450.55  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33477<br>33478<br>33496<br>33500<br>33501   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33475<br>33476<br>33477<br>33478<br>33496<br>33500<br>33501<br>33502   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33475<br>33476<br>33477<br>33478<br>33500<br>33500<br>33501<br>33502<br>33503<br>33504   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33476<br>33500<br>33500<br>33500<br>33503<br>33504<br>33504   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure)  | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,118.03<br>\$1,162.25<br>\$1,280.52  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33477<br>33478<br>33500<br>33501<br>33502<br>33503<br>33503<br>33505<br>33505<br>33505  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Repair Of Anomalous Coronary Artery; Graft, With Dypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; With Construction From Pulmonary Artery Tunnel (Takeuchi Procedure)  | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,162.25<br>\$1,280.15<br>\$1,280.15<br>\$1,280.15  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33477<br>33478<br>33500<br>33501<br>33502<br>33503<br>33503<br>33505<br>33505<br>33505  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly  Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous (Eg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation  | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,118.03<br>\$1,162.25<br>\$1,280.52  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33500<br>33501<br>33502<br>33503<br>33504<br>33505<br>33506<br>33507  | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly  Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous (Eg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure)   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,162.25<br>\$1,280.15<br>\$1,280.15<br>\$1,280.15  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33475<br>33476<br>33477<br>33496<br>33500<br>33501<br>33502<br>33503<br>33504<br>33505<br>33506<br>33507   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass  Valvuloplasty, Tricuspid Valve; Without Ring Insertion  Valvuloplasty, Tricuspid Valve; With Ring Insertion  Replacement, Tricuspid Valve, With Cardiopulmonary Bypass  Tricuspid Valve Repositioning And Plication For Ebstein Anomaly  Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin  Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure)  Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass  Repair Of Anomalous Coronary Artery; Graft, Without Bypass  Anomalous Coronary Artery; Graft, Without Bypass  Anomalous Coronary Artery; Graft, With Bypass  Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta  Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta  Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta  Repair Of Anomalous (Eg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation  Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure)  Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,118.03<br>\$1,175.19<br>\$1,775.19<br>\$1,491.30  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33476<br>33477<br>33478<br>33500<br>33501<br>33502<br>33503<br>33504<br>33505<br>33506<br>33507   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly  Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Arteriovarios Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Heart Artery Bypass, Single   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,162.25<br>\$1,780.15<br>\$1,775.19<br>\$1,491.30  |
| 33460<br>33463<br>33464<br>33465<br>33476<br>33474<br>33475<br>33476<br>33500<br>33501<br>33502<br>33503<br>33504<br>33505<br>33506<br>33507<br>33508<br>33509<br>33510<br>33510   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve, With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, Without Bypass Repair Of Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery By Droofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass, Single Heart Artery Bypass, 2 Grafts   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,180.10<br>\$976.05<br>\$1,118.03<br>\$1,162.25<br>\$1,280.52<br>\$1,780.15<br>\$1,775.19<br>\$1,491.30  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33476<br>33500<br>33501<br>33502<br>33503<br>33504<br>33505<br>33506<br>33507<br>33508<br>33508<br>33508<br>33508<br>33508<br>33508<br>33508<br>33510<br>33511<br>33511 | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly  Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous (Eg. Intramural) Aortic Origin Of Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass, Single Heart Artery Bypass, 2 Grafts Heart Artery Bypass, 3 Grafts  | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,180.30<br>\$1,162.25<br>\$1,780.15<br>\$1,775.19<br>\$1,491.30<br>\$1,491.30  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33476<br>33500<br>33501<br>33502<br>33503<br>33504<br>33505<br>33506<br>33507<br>33508<br>33508<br>33509<br>33510<br>33511<br>33511                                     | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly  Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Artery Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery By Dysas Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Anomalous (Eg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass, 3 Grafts Heart Artery Bypass, 3 Grafts Heart Artery Bypass, 4 Grafts                                   | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,180.10<br>\$976.05<br>\$1,118.03<br>\$1,162.25<br>\$1,280.52<br>\$1,775.19<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33500<br>33501<br>33502<br>33503<br>33504<br>33506<br>33507<br>33508<br>33509<br>33510<br>33511<br>33511<br>33511   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Ring Insertion Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Artery Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, Without Bypass Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; With Cortic Origin Of Coronary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Ceg, Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass , 3 Grafts Heart Artery Bypass , 5 Grafts                     | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,162.25<br>\$1,780.15<br>\$1,775.19<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,867.91<br>\$1,867.91<br>\$1,867.91<br>\$1,867.91<br>\$2,103.60<br>\$2,152.14<br>\$2,264.03  |
| 33460<br>33463<br>33464<br>33465<br>33468<br>33471<br>33474<br>33475<br>33476<br>33500<br>33501<br>33502<br>33503<br>33504<br>33506<br>33507<br>33508<br>33509<br>33510<br>33511<br>33511<br>33511   | Outflow Tract From Left Lower Chamber Of Heart Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery Craft, Without Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, Without Bypass Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery Tunnel (Takeuchi Procedure) Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Anomalous (Eg. Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure)  Harvest Of Artery From Arm For Heart Bypass Graft Using An Endoscope Heart Artery Bypass, 3 Grafts Heart Artery Bypass, 5 Grafts Heart Artery Bypass, 5 Grafts Heart Artery Bypass, 5 Grafts               | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,180.10<br>\$976.05<br>\$1,118.03<br>\$1,162.25<br>\$1,280.52<br>\$1,775.19<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30  |
| 33460<br>33463<br>33468<br>33468<br>33471<br>33474<br>33475<br>33476<br>33478<br>33500<br>33501<br>33502<br>33503<br>33504<br>33505<br>33506<br>33507<br>33508<br>33508<br>33510<br>33511<br>33512<br>33513<br>33514<br>33516                            | Outflow Tract From Left Lower Chamber Of Heart  Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass  Valvuloplasty, Tricuspid Valve, With Ring Insertion  Valvuloplasty, Tricuspid Valve, With Ring Insertion  Replacement, Tricuspid Valve, With Cardiopulmonary Bypass  Tricuspid Valve Repositioning And Plication For Ebstein Anomaly  Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery, Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery, Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure  Replacement, Pulmonary Valve  Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy  Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin  Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection  Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure)  Repair Of Anon-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure)  Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass  Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass  Repair Of Anomalous Coronary Artery; From Pulmonary Artery Origin; By Ligation  Anomalous Coronary Artery; Graft, With Bypass  Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery To Aorta  Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery To Aorta  Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure)  Heart Artery Bypass, 2 Grafts  Heart Artery Bypass, 3 Graf | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,118.03<br>\$1,1775.19<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491.30<br>\$1,491. |
| 33460<br>33463<br>33464<br>33468<br>33471<br>33474<br>33476<br>33476<br>33477<br>33478<br>33500<br>33501<br>33502<br>33503<br>33505<br>33506<br>33507<br>33508<br>33509<br>33510<br>33511<br>33511<br>33512<br>33513<br>33514<br>33516                   | Outflow Tract From Left Lower Chamber Of Heart Valvectorny, Tricuspid Valve, With Cardiopulmonary Bypass Valvuloplasty, Tricuspid Valve; Without Ring Insertion Replacement, Tricuspid Valve; With Cardiopulmonary Bypass Tricuspid Valve Repositioning And Plication For Ebstein Anomaly Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure Replacement, Pulmonary Valve Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure) Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; With Cardio-Pulmonary Bypass Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass Repair Of Anomalous Coronary Artery From Pulmonary Artery Origin; By Ligation Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; Graft, With Bypass Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery To Aorta Repair Of Anomalous Coronary Artery; By Translocation From Pulmonary Artery By Bypass Procedure) Repair Of Anomalous (Eg. Intramural) Aortic Origin Of Coronary Artery By Unroofing Or Translocation Endoscopy, Surgical, Including Video-Assisted Harvest Of Vein(S) For Coronary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure) Havrest Of Artery From Arm For Heart Bypass Graft Heart Artery Bypas | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,162.25<br>\$1,280.52<br>\$1,780.15<br>\$1,775.19<br>\$1,491.30<br>\$1,491.30<br>\$1,867.91<br>\$1,867.91<br>\$1,844.89<br>\$2,103.60<br>\$2,152.14<br>\$2,264.03<br>\$2,344.22  |
| 33460<br>33463<br>33464<br>33474<br>33474<br>33476<br>33476<br>33476<br>33500<br>33501<br>33502<br>33503<br>33504<br>33506<br>33507<br>33508<br>33508<br>33509<br>33510<br>33511<br>33512<br>33513<br>33514<br>33516                                     | Outflow Tract From Left Lower Chamber Of Heart  Valvectomy, Tricuspid Valve, With Cardiopulmonary Bypass  Valvuloplasty, Tricuspid Valve, With Ring Insertion  Valvuloplasty, Tricuspid Valve, With Ring Insertion  Replacement, Tricuspid Valve, With Cardiopulmonary Bypass  Tricuspid Valve Repositioning And Plication For Ebstein Anomaly  Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery, Incision Of Valve Between Lower Right Heart Chamber And Main Lung Artery, Closed Heart Procedure, Approached Through Main Lung Artery, Incision Of Valve At Right Lower Heart Chamber On Heart-Lung Machine, Open Procedure  Replacement, Pulmonary Valve  Right Ventricular Resection For Infundibular Stenosis, With Or Without Commissurotomy  Implantation Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin  Outflow Tract Augmentation (Gusset), With Or Without Commissurotomy Or Infundibular Resection  Repair Of Non-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure)  Repair Of Anon-Structural Prosthetic Valve Dysfunction With Cardiopulmonary Bypass (Separate Procedure)  Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass  Repair Of Coronary Arteriovenous Or Arteriocardiac Chamber Fistula; Without Cardio-Pulmonary Bypass  Repair Of Anomalous Coronary Artery; From Pulmonary Artery Origin; By Ligation  Anomalous Coronary Artery; Graft, With Bypass  Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery To Aorta  Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery To Aorta  Repair Of Anomalous Coronary Artery; With Construction Of Intrapulmonary Artery Bypass Procedure (List Separately In Addition To Code For Primary Procedure)  Heart Artery Bypass, 2 Grafts  Heart Artery Bypass, 3 Graf | \$2,972.82<br>\$2,079.13<br>\$1,967.20<br>\$1,915.28<br>\$2,387.36<br>\$2,119.78<br>\$1,156.51<br>\$1,890.70<br>\$2,017.89<br>\$1,328.81<br>\$1,306.89<br>\$1,371.96<br>\$1,450.55<br>\$1,360.10<br>\$976.05<br>\$1,118.03<br>\$1,175.19<br>\$1,491.30<br>\$1,544<br>\$1,391.99<br>\$1,867.91<br>\$1,867.91<br>\$1,844.89<br>\$2,103.60<br>\$2,152.14<br>\$2,264.03<br>\$2,264.03<br>\$2,264.03<br>\$2,344.22   |

| 33251 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33252 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33252 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33252 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33252 Commissed Vern And Amery Heart Artery Sparses, 5 Grafts 33253 Heart Artery Sparses, 5 Grafts 33254 Heart Artery Sparses, 5 Grafts 33255 Heart Artery Sparses, 5 Grafts 33256 Heart Artery Sparses, 5 Grafts 33257 Resourced Of Parager From Heart Artery Art Tree of Sparses Graft Proceeding 33267 Resourced Of Parager From Heart Artery Art Tree of Sparses Graft Proceeding 33267 Consum Of Starnfalture Valve (Arter) Commissed, Proceeding Proceeding 33267 Consum Of Starnfalture Valve (Arter) Commissed Proceeding 33267 Consum Of Starnfalture Valve (Arter) Commissed Proceeding 33267 American Consumer Heart Artery Art Tree of Sparses Graft Proceeding 33267 American Consumer Heart Artery Artery Sparses, 10000 Consum Of American Consumer Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Proceeding 33267 Repair Of Complex Consumer Artery Artery Sparses Sparses Proceeding 33267 Repair Of Complex Consumer Artery Spars  | <u> </u> |  |                    |
|---|----------|--|--------------------|
| 38322 Combroned Verle And Anney Heart Anney Spanses, S. Gralles  Segregation, Courtoury After My Pipesses (Proc. Mon. Grafts)  Recognition, Courtoury After Pipesses Procedure, Or Valles Procedure, Worn Tran Orie Month After Original Operation (i.e. Separative) in  Segregation, Courtoury After Pipesses Procedure, Or Valles Procedure, Worn Tran Orie Month After Original Operation (i.e. Separative) in  Segregation of Segregation (I.e. Se  |          |  | Fee<br>*F64.F3     |
| 33323 Combined Vern And Arthry Heart Army Spasse, SO Tallors Grafts Responsion Commany After Spread Procedure, Votale Procedure, More Than One Month After Original Operation (List Separately. In 32000 Addition To Coole For Phrasy Procedure) 33020 Addition To Coole For Phrasy Procedure) 33020 Addition To Coole For Phrasy Procedure) 33020 Addition To Coole For Phrasy Procedure) 33025 Heart Army Spreas. 2 Grafts 33026 Heart Army Spreas. 2 Grafts 33027 Removed of Phrasy Procedure Arms Spreadown) 32020 Closus Of Attrovertroat Procedure, Inches Provider (For Vernicular Removaling, Svr., Swer, Dor 2006-2006) 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Plato 33020 Closus Of Attrovertroat Valve (Mart Of Trovego) By Subure Or Pla  |          |  |                    |
| Separation, Corrivany Ariety Bypase Procedure)  5002 Addition 10 Celebrary Permany Procedure)  5002 Addition 10 Celebrary Permany Procedure)  5002 Addition 10 Celebrary Permany Procedure 1 Salary 2015 Additional Process of Salary 2015 Additiona  |          |  |                    |
| 33501 Heart Amy Syspass, 2 Fige Offst 33502 Heart Amy Syspass, 2 Fige Offst 33503 Heart Amy Syspass, 2 Fige Offst 33504 Heart Amy Syspass, 2 Fig Offst 33500  |          |  | ψ/ 10.10           |
| 33535 Heart Amery Sprases, Springe Great 33555 Heart Amery Sprases, 2 Greats 33556 Heart Amery Sprases, 2 Greats 33556 Heart Amery Sprases, 3 Greats 33557 Heart Amery Sprases  |          |  | \$502.26           |
| 33555   Heart Amery Bysses, 3 of Orthon Cartes 3512   Monocardial Researcion (E.g., Venticular Annurymencomy) 3522   Monocardial Researcion (E.g., Venticular Annurymencomy) 3522   Monocardial Researcion (E.g., Venticular Annurymencomy) 3525   Regular Of Perinterion Venticular Septial Defect, With Ort Wirlord Myocardial Researcion 3528   Regular Of Perinterion Venticular Septial Defect, With Ort Wirlord Myocardial Researcion 3528   Received Of Perinterion Venticular Septial Defect, With Ort Wirlord Myocardial Researcion 3528   Received Of Perinterion Venticular Remote (E.g., Venticular Remo  | 33533    | Heart Artery Bypass, Single Graft  | \$1,807.69         |
| 33286   Magrardina (Descenting (E.) Wernitzular Ansuryenectory) 33545   Agencrian (Descenting (E.) Wernitzular Ansuryenectory) 33545   Agencrian (Descenting (E.) Wernitzular Septial Delect. With O'r Without Myocardial Resection 33545   Suggiel Avenitzular Researchor Verticular Septial Delect. With O'r Without Myocardial Resection 33545   Suggiel Avenitzular Researchor Verticular Septial Delect. With O'r Without Myocardial Researchor (E.) Verticular Remodeling, Svr. Sever. Dor 33545   Surgicial Avenitzular Researchor (P.) Wernitzular Remodeling, Svr. Sever. Dor 33547   Surface (C.) Particular Researchor (P.) Wernitzular Remodeling, Svr. Sever. Dor 33560   Closure O'l Semillular Valve (Antic O'r Putronary) By Suture O'r Patch 33560   Ansatemosia O'l Putronary Afresia With Internet College (C.) Patch (C.)   | 33534    | Heart Artery Bypass, 2 Grafts  | \$1,908.48         |
| 33324 Microardial Respection (Fig. Verintorialer Annurymentormy)  33646 Repair of Potentricular Resisonation Procedure, Includes Prosibilities Patch, When Performed (Eg. Verintorial Remodeling, Svr. Saver, Do  33696 Suprial Verintorial Resisonation Procedure, Includes Prosibilities Patch, When Performed (Eg. Verintorial Remodeling, Svr. Saver, Do  33690 Suprial Verintorial Remodeling, Svr. Saver, Do  33690 Subser Of Antorverintorial Verintorial Remodeling, Svr. Saver, Do  33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subser Of Antorverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subserverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subserverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subserverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subserverintorial Valver (Minit Of Tracepell By Sulver OF Patch)  33690 Subserverintorial Valver (Minit Of Tracepell Antorial Valver (Minit Of Subser Of Antorial Valver (Minit Of Subser Of Antorial Valver (Minit Of Subser Of Natural Subserver)  3360  | 33535    | Heart Artery Bypass, 3 Grafts  | \$2,123.73         |
| 33545 Repair Of Posterfaction Ventricular Septial Defect, Win Ch Without Mycoardial Research (Eg. Ventricular Remodeling, Svr., Saver, Dor 35454) Procedures (Surpticular Remodeling, Svr., Saver, Dor 35454) Procedures (Surpticular Remodeling, Svr., Saver, Dor 35457 American Ventricular Remodeling, Svr., Saver, Dor 35457 (Procedure) (Surpticular Remodeling, Svr., Saver, Saver, Saver, Saver, Saver, Saver, Saver, Saver, Saver,  |          |  | \$2,287.49         |
| Signal Viriationals Restoration Procedure, Includes Prosphetic Prach, When Performed (Eg., Veriticular Remodeling, Svr., Saver, Dor 32,5774, 33572) Removal Of Pique From Heart Arisy At Time Of Bypass Graft Procedure, Open Procedure \$18,082, 33572 (Section 1) (1992) Procedure \$1,100 (Section 1)  |          | ,  | \$2,270.55         |
| 33646 Piccioculves) 33767 Removal Of Plaque From Heart Artery At Time Of Bypass Graft Procedure. Open Procedure 33987 Removal Of Plaque From Heart Artery At Time Of Bypass Graft Procedure. 91898 2000 Closuse Of Antroventricular Valve (Maral Of Troughpil) By Suture Of Placin 33980 Closuse Of Antroventricular Valve (Maral Of Troughpil) By Suture Of Placin 33980 Residuation of Plannary Artery To Artar (Damas-Keys-Stanel Procedure) 33980 Residuation of Plannary Artery To Artar (Damas-Keys-Stanel Procedure) 33981 Repair Of Complex Cardiac Anomales (Eg. Single Ventrole With Subspirit Obstruction) By Surgical Enlargement Of Ventricular Septal Defect By Construction Of Replacement Of Standard From Right Of Left Ventricial From Plannary Artery Ventrole With Introventicular Tromel Repair. 1997 Repair Of Plannary Artery (Standard Plannary Artery) Repair Of Repair Of Plannary Artery (Standard Plannary Artery) Repair Of Repai  |          |  | \$2,658.29         |
| 335272 Removal Of Plaquer From Heart Antray A Time Of Bypass Grish Procedure, Open Pocodure  \$1,192. 33000 Consure Of Semihurar Valve (Antro Cri Pulmonary) By Suture Of Petich \$1,453. 33000 Ansabronia Of Pulmonary Antro To Antra (Dams by Suture Of Petich \$1,453.6 33000 Ansabronia Of Pulmonary Antro To Antra (Dams and Way-Sander) Procedure) \$1,545.6 33000 Ansabronia Of Pulmonary Antro To Antra (Dams and Way-Sander) Procedure) \$1,545.6 33000 Ansabronia Of Pulmonary Antro To Antra (Dams and Way-Sander) Procedure) \$1,545.6 33000 Control From Right Octal Ventice (The Pulmonary Antres) \$1,545.6 33000 Ansabronia Of Pulmonary Antres of Antre Antrol Sander (Palmonary Antre) \$1,545.6 33010 Appair Of Complex Cardiac Anomales (Eg. Single Ventrice) With Subsorinc Obstruction By Surgical Enlargement Of Ventricial September (Palmonary Antre) With Repair Of Right Ventricial With Interventicular Tument Repair With Repair Of Right Ventricial For Trans (Palmonary Antre) With Repair Of Right Ventricial For Trans (Palmonary Antre) With Repair Of Right Ventricial With Interventicular Tument Repair With Repair Of Right Ventricial For Trans (Palmonary Antre) With Repair Of Right Ventricial For Trans (Palmonary Antre) With Repair Of Right Ventricial For Trans (Palmonary Antre) With Repair Of Right Ventricial For Trans (Palmonary Antre) With Repair Of Right Ventricial For Trans (Palmonary Antre) With Repair (Palmonary Antre) With Repair (Palmonary Antre) With Repair (Palmonary Antre) With Palmonary Antre (Palmonary Antre) With Palmonary Antre (Palmonary Antre) With Palmonary With Palmonary (Eg. Hybrid Approach Stage 1) 32.06.1 3  |          |  |                    |
| 33000 Closure Of Antowntroutral Valve (Miral Of Trouspel) By Suture Of Petich  \$1,4976 33000 Closure Of Antowntroutral Valve (Miral Of Trouspel) By Suture Of Petich  \$1,4976 33000 Closure Of Antowntroutral Valve (Demos Kaye-Stander Procedure)  \$1,547.6 33000 Closure Of Antowntroutral Valve (Demos Kaye-Stander Procedure)  \$2,547.6 33000 Closure Of Antowntroutral Valve (Demos Kaye-Stander Procedure)  \$3,547.6 33000 Repair Of Complex Cardiac Antomaly Other Than Putmonary Antesis with Vesticular Septal Defect By Construction Of Replacement Of Ventricular Septal Defect Question (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) With International Valve (Complex Cardiac Antomales (E.g., Single Ventrice) Or Hope (Complex Cardiac Antomales Cardiac Antomales (E.g., Single Ventrice) Or Hope (E.g., With Or Without Antowntrous) (E.g., Single Ventrice) Or Hope (Complex Cardiac Antomales C   |          | '  |                    |
| 33800 Anabatom C Pulmonary Valve (Antino CP Fulmonary) By Sulver Or Patch Ropager Of Compiex Cardiac Anomaly Other Than Pulmonary Atresa With Ventricular Septial Defect By Construction Or Replacement Of 31,741.2  33610 Conduit From Byte Of Let Wirestrice To Fulmonary Atresa With Ventricular Septial Defect By Construction Or Replacement Of 31,741.2  33611 Repair Of Compiex Cardiac Anomales (E.g., Single Ventricular With Sulbaotro Obstruction) by Surgical Enlargement Of Ventricular Septial Defect 31,743.2  33611 Repair Of Compiex Cardiac Anomales (E.g., Single Ventricular Septial Defect Septial Defect Obstruction) by Surgical Enlargement Of Ventricular Septial Defect 31,743.2  33611 Repair Of Compiex Cardiac Anomales (E.g., Single Ventricular Turner Repair Centricular Septial Defect Ventricular Septial Defect Obstruction Compiex Cardiac Anomales (E.g., Single Ventricular Turner Repair Centricular Septial Defect Ventricular V  |          |  |                    |
| 33000 Anastonosis Of Pulmonary Artery To Anta (Damus-Kays-Stanes) Procedure) Separati Of Complex Cardiac Anomaly Other Than Pulmonary Areasis With Ventricular Septial Defect By Construction Of Replacement Of \$1,741.2  33010 Conquis From Right O Left Ventricle To Pulmonary Areasy 33010 Repair Of Complex Cardiac Anomalies. If Eg. Single Ventricle With Subantic Obstruction in By Surgical Enlargement Of Ventricular Septial Defect 33011 Repair Of Complex Cardiac Anomalies. If Eg. Single Ventricle With Subantic Obstruction in By Surgical Enlargement Of Ventricular Septial Defect 33011 Repair Of Complex Cardiac Anomalies. If Eg. Single Ventricle With Repair Of Right Ventricular Conflow Tract Obstruction 33012 Repair Of Complex Cardiac Anomalies. If Eg. Tricusped Airesial By Closure Of Aired Septial Defect And Anastomosis Of Aired Or Ventra Cave To 33017 Repair Of Complex Cardiac Anomalies. If Eg. Tricusped Airesial By Closure Of Aired Septial Defect And Anastomosis Of Aired Or Ventra Cave To 33161 Pilmonary Artery Simple Ford Anomalies. If Eg. Single Ventricle By Modified Fortan Procedure 33161 Pilmonary Artery Simple Ford Anomalies. If Eg. Single Ventricle By Modified Fortan Procedure 33161 Pilmonary Artery Simple Ford Anomalies. If Eg. Single Ventricle By Modified Fortan Procedure 33262 Discontine Of Cardiac Anomalies. If Eg. Single Ventricle By Modified Fortan Procedure 33262 Discontine Of Cardiac Anomalies. If Eg. Single Ventricle By Modified Fortan Procedure 33262 Discontine Of Cardiac Anomalies. If Eg. Single Ventricle Discontine Anomalies. If Eg. Single Ventri   |          | 1 7 7  |                    |
| Repair Of Complex Cardiac Anomaly Other Than Pulmonary Artersis With Ventrocular Septial Defect By Construction Or Replacement Of \$1,741.2 38610 Repair Of Complex Cardiac Anomales (E.g., Single Ventricle With Subaporiic Obstruction) By Surgical Enlargement Of Ventricular Septial Defect \$1,945.5 38611 Repair Of Double Outer Right Ventricle With Introventricular Turnel Repair. With Repair Of Public Outer Right Ventricular Ventricular Turnel Repair. With Repair Of Right Ventricular Outflow Tract Obstruction And Anotic Arch Hypoplasia (Hypoplasia). Complex Cardiac Anomalis. (E.g., Single Ventricile Style Middle Fortant Procedure. Repair Of Single Ventricile With Anotic Outflow Obstruction And Anotic Arch Hypoplasia (Hypoplasia). Left Heart Syndrome). (E.g., Norwood. 38202) Discoment Of Bands Anound The Right And Left Pulmonary With Cardiner Removal And Cause (E.g., Hybrid Approach Single 1). \$8107.2 38202 Discoment Of Bands Anound The Right And Left Pulmonary With Cardiner Removal And Cause (E.g., Hybrid Approach Single 1). \$8107.3 38202 Outflow Obstruction And Anotic Arch Hypoplasia. Creation Of Caroputmonary Anastemous, And Removal Of Right And Left Pulmonary \$2,200.8 38202 Discoment Of Cardiac Anomaly (E.g., Single Ventricle Or Hypoplasias Left Heart) With Pallation Of Single Ventricle With Anotic Outflow Obstruction And Anotic Arch Hypoplasia. Creation Of Caroputmonary Anasters, with Or Without Particle Patricle P   |          | , , ,  |                    |
| 33600 Condust From Right Or Left Vertricle To Pulmonary Artary  3361 Repair Of Complex Cardiac Anomalies (Eg. Single Vertricle) With Subsortic Obstruction) By Surgical Enlargement Of Vertricular Septal Defect 31,645 S.  3361 Repair Of Double Outer Right Vertricle With Introvertricular Turnel Repair.  3361 Repair Of Double Outer Right Vertricle With Introvertricular Turnel Repair.  3361 Repair Of Double Outer Right Vertricle With Introvertricular Turnel Repair.  3361 Repair Of Double Outer Right Vertricle With Introvertricular Turnel Repair.  3361 Repair Of Complex Cardiac Anomalies (Eg. Single Vertricle) By Modified Fortan Procedure  3361 Pourmount, With y Simple Fortan Procedure  3361 Pourmount, With y Simple Fortan Anomalies (Eg. Single Vertricle) By Modified Fortan Procedure  3362 Placement Of Bands Anomalies (Eg. Single Vertricle) By Modified Fortan Procedure  3362 Placement Of Bands Anomalies (Eg. Single Vertricle) By Modified Fortan Procedure  3362 Placement Of Bands Anomalies (Eg. Single Vertricle) Pythologable Left Heart Syndrome) (Eg. Norwood  3362 Placement Of Earlies For Sister) Placement (With Catheers Removal And Closure (Eg. Hybrid Approach  3362 States (Eg. Single Vertricle) Pythologable (Left Hand) With Patients of Single Vertricl  |          |  | ψ1,547.57          |
| 33610 Repair Of Complex Cardiac Anomalies (Eg. Single Ventricle With Subaonic Obstruction) By Surgical Enlargement Of Ventricular Septal Defect 31,645.5 33611 Repair Of Double Outer Right Ventricle With Intraventricular Turnel Repair. Vith Repair Of Right Ventricular Outer States 31,683.3 33612 Repair Of Complex Cardiac Anomalies (Eg. Tricuspid Aircina) By Closure Of Airci Septal Defect An Anastomosa Of Airci O'Vena Cava To 3361.5 3  | 1        |  | \$1 741 24         |
| 33618 Repair Ol Double Outler Right Ventricia With Intraventricular Turnel Repair: With Repair Of Right Ventricular Outlew Tract Obstruction Repair Old Double Outler Right Ventricial With Intraventricular Turnel Repair: With Repair Of Right Ventricular Outlew Tract Obstruction St;733.8 Repair Of Complex Cardiac Anomalies (Eg. Tricuspid Afresia) By Closure Of Artis Septal Defect And Anastomosis Of Artis Of Vena Cava To 38161 Pulmonary Artery (Simple Fornation Procedure) \$2,086.1 Pulmonary Artery (Simple Fornation Procedure) \$2,086.1 Pulmonary (Long) Arteries (Eg. Single Ventrice) By Modified Fontan Procedure Repair Of Complex Cardiac Anomalies (Eg. Single Ventrice) By Modified Fontan Procedure Repair Of Complex Cardiac Anomalies (Eg. Single Ventrice) By Modified Fontan Procedure Repair Of Single Ventrice) May Antice Another Another Arch Hypoplasia (Hypoplasia) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) By Modified Fontan Procedure) \$2,600.0 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice)   | 00000    | onata risan ngino e zun romato ro ramota y ritary  | Ψ1,7 11.21         |
| 33618 Repair Ol Double Outler Right Ventricia With Intraventricular Turnel Repair: With Repair Of Right Ventricular Outlew Tract Obstruction Repair Old Double Outler Right Ventricial With Intraventricular Turnel Repair: With Repair Of Right Ventricular Outlew Tract Obstruction St;733.8 Repair Of Complex Cardiac Anomalies (Eg. Tricuspid Afresia) By Closure Of Artis Septal Defect And Anastomosis Of Artis Of Vena Cava To 38161 Pulmonary Artery (Simple Fornation Procedure) \$2,086.1 Pulmonary Artery (Simple Fornation Procedure) \$2,086.1 Pulmonary (Long) Arteries (Eg. Single Ventrice) By Modified Fontan Procedure Repair Of Complex Cardiac Anomalies (Eg. Single Ventrice) By Modified Fontan Procedure Repair Of Complex Cardiac Anomalies (Eg. Single Ventrice) By Modified Fontan Procedure Repair Of Single Ventrice) May Antice Another Another Arch Hypoplasia (Hypoplasia) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) By Modified Fontan Procedure) \$2,600.0 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice) (Eg. Single Ventrice) (Eg. Hybrid Approach Stage 1) \$1,672.2 (Saccontanum Complex) (Eg. Single Ventrice)   | 33610    | Repair Of Complex Cardiac Anomalies (Eg, Single Ventricle With Subaortic Obstruction) By Surgical Enlargement Of Ventricular Septal Defect   | \$1,545.92         |
| Repair Of Complex Cardiac Anomalies (Eg. Tricuspot Arresia) By Closure Of Arrial Septal Defect And Anastomosis Of Arria Or Vena Cava To 331618 (Pummany Arter) (Simple Fornian Procedure) 53,735.0 (Simple Ventrice) By Modified Fontan Procedure) 52,086.1 (Simple Ventrice) By Modified Fontan Procedure) 52,080.1 (Simple Ventrice) 52,080.1 (Simple Ventrice) By Modified Fontan Procedure) 52,080.1 (Simple Ventrice) 52,  |          |  | \$1,689.39         |
| 33817 Repair Of Complex Cardiac Anomales (Eg., Single Ventricie) By Modified Fontan Procedure  Repair Of Single Ventricie With Aortic Outflow Obstruction And Aortic Arch Hypoplasia (Hypoplasia Cleft Heart Syndrome) (Eg., Norwood 33520) Placoment Of Bands Around The Right And Left Pulmonary (Lung) Arteries, Hybrid Approach 131,672.5  33520 Placoment Of Bands Around The Right And Left Pulmonary (Lung) Arteries, Hybrid Approach Stage 1)  82,200.  82,20  | 33612    | Repair Of Double Outlet Right Ventricle With Intraventricular Tunnel Repair; With Repair Of Right Ventricular Outflow Tract Obstruction  | \$1,733.85         |
| Repair Of Compilex Cardiac Anomalies (E.g. Single Ventricies) by Modified Fontan Procedure   \$2,086.1  |          | Repair Of Complex Cardiac Anomalies (Eg, Tricuspid Atresia) By Closure Of Atrial Septal Defect And Anastomosis Of Atria Or Vena Cava To  |                    |
| Repair Of Single Ventricial With Aortic Outflow Obstruction And Aortic Arch Hypoplastic Left Heart Syndrome) (Eg. Norwood 352820) 33620 Placement Of Bands Around The Right And Left Pulmonary (Lung) Arteries, Hybrid Approach \$1,672.5 33621 Transtroncic Insertion Of Carbeter For Pulmonary (Lung) Arteries, Hybrid Approach \$1,672.5 33621 Transtroncic Insertion Of Carbeter For Pulmonary (Lung) Arteries, Hybrid Approach Stage 1) \$810.7 3622 Juliov Obstruction And Aortic Arch Hypoplassia, Creation Of Cavopulmonary Anastomosis, And Removal Of Right And Left Pulmonary 32,960.8 33622 Juliov Obstruction And Aortic Arch Hypoplassia, Creation Of Cavopulmonary Anastomosis, And Removal Of Right And Left Pulmonary 32,960.8 33641 Repair Affails Septial Defect, Secundum, With Cardiopulmonary Spapsas, With Or Withou Patch Patch Colorus (And Septial Defect And Ventricular Septial Defect, With Defect Of Patch Closure) \$1,501.9 33646 Repair Of Incomplete Or Partial Atrioventricular Canal (Ostium Primum Artial Septial Defect, With Or Without Archiventricular Valve Repair 33667 Repair Of Intermediate Or Transitional Airoventricular Canal, With Or Without Arriventricular Valve Repair 31,841.1 33677 Repair Of Multiple Ventricular Septial Defects, With Or Without Arriventricular Valve Repair 31,861.3 3678 (Desirue Of Multiple Ventricular Septial Defects, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,761.3 3677 (Desirue Of Multiple Ventricular Septial Defects, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,761.3 3678 (Desirue Of Multiple Ventricular Septial Defects, With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,863.5 3684 (Desirue Ventricular Septial Defects, With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,863.5 3684 (Desirue Ventricular Septial Defects, With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,863.5 3684 (Desirue Orthicular Septial Defects, With Removal Of Pulmonary Artery Band, With Orthicular Septial Defect Gustal Arteries Arteries Arteri   |          |  | \$1,735.09         |
| Sabeta   Proceedures   Sabeta   Sabet  |          |  | \$2,086.19         |
| Salezon Placement Of Bands Around The Right And Left Pulmonary (Lung) Afreires, Hybrid Approach   Salezon Transhbroraco Insertion Of Catheter For Stent Placement With Carleter Removal And Closure (E.g., Hybrid Approach Stage 1)   | 1        | 1 0 7 7 0  |                    |
| Reconstruction Of Cambeter For Stent Placement With Catheter Removal And Closure (Eg., Hybrid Approach Stage 1)  Reconstruction Of Complex Cardiac Anomaly (Eg., Single Ventricle Or Hypoplastic Left Heart) With Palliation Of Single Ventricle With Aortic  Reconstruction Of Complex Cardiac Anomaly (Eg., Single Ventricle Or Hypoplastic Left Heart) With Palliation Of Single Ventricle With Aortic  Repair Arrial Septial Defect. Secundum, With Cardiopulmonary Bypass, With Or Without Patch  Repair Arrial Septial Defect. Secundum, With Cardiopulmonary Bypass, With Or Without Patch  Sal466 Piter Or Patch Cossure, Sinus Venosus, With Or Without Anomabous Pulmonary Venosu Drainage  \$1,501-33  38660 Repair Of Incomplete Or Partial Arrivorentricular Canal, With Or Without Arrivorentricular Valve Repair  \$1,492.  38660 Repair Of Intermediate Or Intermediate Of Intermediate Of Intermediate Of Intermediate Of Intermediate Of Intermediate Of Multiple Ventricular Septial Defects:  \$1,803.  38676 Closure Of Multiple Ventricular Septial Defects:  \$1,803.  38677 Closure Of Multiple Ventricular Septial Defects: With Pulmonary Valvotomy Or Inturdibular Resection (Acyanotic)  \$1,751.  \$1,751.  \$3861 Closure Of Multiple Ventricular Septial Defects: With Pulmonary Valvotomy Or Inturdibular Resection (Acyanotic)  \$1,751.  \$1  |          |  | \$2,620.01         |
| Reconstruction Of Complex Cardiac Anomaly (E.g., Single Ventricle Or Hypoplastic Left Hearl With Palliation Of Single Ventricle With Aortic 38222 Outflow Obstruction And Aortic Arch Hypoplasia, Creation Of Cavopulmonary Anastomosis, And Removal Of Right And Left Pulmonary 38243641 Repair Artis Septial Defect, Scundum, With Cardiopulmonary Venous Drainage 38261 Repair Of Instruction Septial Defect And Ventricular Septial Defect, With Dr Without Anomalous Pulmonary Venous Drainage 38260 Repair Of Incomplete Or Partial Activoentricular Canal (Ostium Primum Artial Septial Defect), With Or Without Anomalous Pulmonary Venous Drainage 38260 Repair Of Incomplete Or Partial Activoentricular Canal (Ostium Primum Artial Septial Defect), With Or Without Antioventricular Valve Repair 382670 Repair Of Complete Activoventricular Canal, With Or Without Antioventricular Valve Repair 382670 Repair Of Complete Activoventricular Canal, With Or Without Antioventricular Valve Repair 382670 Repair Of Complete Activoventricular Septial Defects. 382670 Closure Of Multiple Ventricular Septial Defects. 382670 Closure Of Single Ventricular Septial Defect. 382670 Complete Repair Of Tetralogy Of Faliot Congenital Perindent Septial Defec  |          |  |                    |
| 33841 Repair Artial Septal Defect, Secundum, Winh Cardiopulmonary Anastomosis, And Removal Of Right And Left Pulmonary 33846 Direct Or Patich Closure, Sinus Venosus, With Or Without Anomalous Pulmonary Venous Drainage 31.5797 33845 Direct Or Patich Closure, Sinus Venosus, With Or Without Anomalous Pulmonary Venous Drainage 31.5798 33860 Repair Of Incomplete Or Patial Antiventricular Septal Defect, With Direct Or Patich Closure 33867 Repair Of Incomplete Or Patial Antiventricular Canal (Oatum Pilmonary Artial Septal Defect), With Or Without Antiventricular Valve Repair 33868 Repair Of Intermediate Or Transitional Artiventricular Canal (Oatum Pilmonary Artial Septal Defect), With Or Without Antiventricular Valve Repair 35867 Repair Of Oromptek Artivorentricular Canal (Nath Or Without Artiventricular Valve Repair 35867 Repair Of Intermediate Or Transitional Artiventricular Canal, With Or Without Artiventricular Valve Repair 35867 Closure Of Multiple Ventricular Septal Defects: 35867 Closure Of Multiple Ventricular Septal Defects: With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 35877 Closure Of Multiple Ventricular Septal Defects: With Removal Of Pulmonary Artery Band, With Or Without Gusset 35884 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 35885 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 35886 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 35886 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 35886 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 35886 Repair Of Pulmonary Artery Band, With Or Without Gusset 35886 Repair Of Pulmonary Artery Band, With Or Without Gusset 35886 Repair Of Pulmonary Artery Band, With Or Without Gusset 35887 Complete Repair Of Tetralogy Of Fallot Congenital Heart Defects With Partery Band, With Or Without Gusset 35888 Repa  | 33621    | I ransthoracic Insertion Of Catheter For Stent Placement With Catheter Removal And Closure (Eg, Hybrid Approach Stage 1)   | \$810.78           |
| 33841 Repair Artial Septal Defect, Secundum, Winh Cardiopulmonary Anastomosis, And Removal Of Right And Left Pulmonary 33846 Direct Or Patich Closure, Sinus Venosus, With Or Without Anomalous Pulmonary Venous Drainage 31.5797 33845 Direct Or Patich Closure, Sinus Venosus, With Or Without Anomalous Pulmonary Venous Drainage 31.5798 33860 Repair Of Incomplete Or Patial Antiventricular Septal Defect, With Direct Or Patich Closure 33867 Repair Of Incomplete Or Patial Antiventricular Canal (Oatum Pilmonary Artial Septal Defect), With Or Without Antiventricular Valve Repair 33868 Repair Of Intermediate Or Transitional Artiventricular Canal (Oatum Pilmonary Artial Septal Defect), With Or Without Antiventricular Valve Repair 35867 Repair Of Oromptek Artivorentricular Canal (Nath Or Without Artiventricular Valve Repair 35867 Repair Of Intermediate Or Transitional Artiventricular Canal, With Or Without Artiventricular Valve Repair 35867 Closure Of Multiple Ventricular Septal Defects: 35867 Closure Of Multiple Ventricular Septal Defects: With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 35877 Closure Of Multiple Ventricular Septal Defects: With Removal Of Pulmonary Artery Band, With Or Without Gusset 35884 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 35885 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 35886 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 35886 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 35886 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 35886 Repair Of Pulmonary Artery Band, With Or Without Gusset 35886 Repair Of Pulmonary Artery Band, With Or Without Gusset 35886 Repair Of Pulmonary Artery Band, With Or Without Gusset 35887 Complete Repair Of Tetralogy Of Fallot Congenital Heart Defects With Partery Band, With Or Without Gusset 35888 Repa  |          | Provided Constant Confront Associated Confront Visiting Confront Confront Visiting Confront Visiting Confront C |                    |
| Spans   Repair Atrial Septal Defect, Secundum, With Cardiopulmonary Bypass, With Or Without Platch   Spans  |          |  | ¢2 060 92          |
| 33647 Repair Of Artial Septal Defect And Ventricular Septal Defect, With Direct Or Patch Closure  \$1,501.9  33667 Repair Of Artial Septal Defect And Ventricular Septal Defect, With Direct Or Patch Closure  \$1,749.2  33660 Repair Of Intermediate Or Transitional Atrioventricular Canal, With Or Without Atrioventricular Valve Repair  \$1,841.1  33667 Repair Of Intermediate Or Transitional Atrioventricular Canal, With Or Without Atrioventricular Valve Repair  \$1,841.1  33667 Repair Of Intermediate Or Transitional Atrioventricular Canal, With Or Without Atrioventricular Valve Repair  \$1,703.3  33676 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)  \$1,761.6  33677 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)  \$1,761.6  33677 Closure Of Multiple Ventricular Septal Defects; With Removal Of Pulmonary Atrey Band, With Or Without Gusset  \$1,884.1  33681 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atrey Band, With Or Without Gusset  \$1,885.3  33688 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atrey Band, With Or Without Gusset  \$1,885.3  33690 Banding Of Pulmonary Atrey Band, With Or Without Gusset  \$1,885.3  33690 Banding Of Pulmonary Atrey Band, With Or Without Gusset  \$1,885.3  33691 Complete Repair Tetralogy Of Fallot Without Pulmonary Atrey Band, With Or Without Gusset  \$1,885.3  33691 Repair And Correction Of Four Congenital Heart Defects With Patch  \$1,877.1  33702 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass;  33710 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass;  33710 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass;  33720 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass;  33720 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary Bypass;  33730 Repair Sinus Of Valsakaya Fistula, With Cardiopulmonary With Repair Of Ventricular Septal Defect  \$1,346.8  33720 Repair Of Intermediate Partial Ano   |          |  |                    |
| Sapara   Repair Of Artial Septal Defect And Ventricular Septal Defect, With Direct Or Patch Closure   \$1,749.2   |          |  |                    |
| 33860 Repair Of Incomplete Or Partial Atrioventricular Canal (Ositum Primum Atrial Septal Defect), With Or Without Atrioventricular Valve Repair 33865 Repair Of Intermediate Or Transitional Atrioventricular Canal, With Or Without Atrioventricular Valve Repair 33676 Repair Of Complete Atrioventricular Canal, With Or Without Posthetic Valve 35770 Source Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 31,751.6 33677 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) 31,761.6 33677 Closure Of Multiple Ventricular Septal Defects; With Removal Of Pulmonary Atery Band, With Or Without Gusset 31,818.7 33681 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atery Band, With Or Without Gusset 31,828.8 33684 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atery Band, With Or Without Gusset 31,828.8 33684 Closure Ventricular Septal Defect; With Removal Of Pulmonary Atery Band, With Or Without Gusset 31,829.3 33690 Banding Of Pulmonary Atery Septal Septal Complete Repair Tetralogy Of Fallor Without Pulmonary Atery Band, With Or Without Gusset 31,829.3 33691 Complete Repair Tetralogy Of Fallor Without Pulmonary Atery Band, With Or Without Gusset 31,829.3 33692 Complete Repair Of Tetralogy Of Fallor Without Pulmonary Atery Band, With Acyanotic Gustal Repair And Correction Of Four Congenital Defects With Patch 31,879.1 33694 Repair And Correction Of Four Congenital Defect With Patch 33702 Repair Sinus Of Valsakva Fistula, With Cardiopulmonary Bypass; 33704 Repair Sinus Of Valsakva Fistula, With Cardiopulmonary Bypass; 33704 Repair Sinus Of Valsakva Fistula, With Cardiopulmonary Bypass; 33706 Repair Sinus Of Valsakva Aneurysm, With Cardiopulmonary Bypass; 33707 Repair Sinus Of Valsakva Aneurysm, With Cardiopulmonary Bypass; 33708 Repair Of Pulmonary Venous Stenosis 33708 Repair Of North Cardiopulmonary Bypass; 33708 Repair Of Valsakva Fistula, With Cardiopulmonary Bypass; 33708 Repair Of Ven  |          | , ,  |                    |
| 33668 Repair Of Intermediate Or Transitional Arioventricular Canal, With Or Without Arioventricular Valve Repair  \$1,841.1 33676 Repair Of Complete Arioventricular Canal, With Or Without Prosthetic Valve \$1,703.3 3676 Closure Of Multiple Ventricular Septal Defects, with Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,856.6 33676 Closure Of Multiple Ventricular Septal Defects, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,857.7 33687 Closure Of Multiple Ventricular Septal Defects, With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,818.7 33681 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,836.5 33688 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,836.5 33688 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 33690 Banding Of Pulmonary Artery \$1,828.6 33690 Banding Of Pulmonary Artery \$1,828.6 33690 Repair Of Pulmonary Artery \$1,828.6 33690 Repair Of Pulmonary Artery \$1,828.6 33690 Repair And Correction Of Four Congenital Heart Defects With Patch 33790 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.1 33702 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.3 33720 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.3 33720 Repair Of Pulmonary Vareous Steuro (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.3 33720 Repair Of Pulmonary Vareous Steuro (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.3 33720 Repair Of Pulmonary Vareous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.3 33720 Repair Of Pulmonary Vareous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.4 33730 Complete Repair Of Annalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.6 33731 Repair Of Or Ordinational Vareous Pulmonary Vareous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.6 33732 Rep  | 33047    | Trainin Sopial Scient rate Voluntum Scient rate Police Critical Scientific Control Con | ψ1,7 43.20         |
| 33668 Repair Of Intermediate Or Transitional Arioventricular Canal, With Or Without Arioventricular Valve Repair  \$1,841.1 33676 Repair Of Complete Arioventricular Canal, With Or Without Prosthetic Valve \$1,703.3 3676 Closure Of Multiple Ventricular Septal Defects, with Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,856.6 33676 Closure Of Multiple Ventricular Septal Defects, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,857.7 33687 Closure Of Multiple Ventricular Septal Defects, With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,818.7 33681 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,836.5 33688 Closure Ventricular Septal Defect, With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,836.5 33688 Closure Ventricular Septal Defect, With Removal Of Pulmonary Artery Band, With Or Without Gusset 33690 Banding Of Pulmonary Artery \$1,828.6 33690 Banding Of Pulmonary Artery \$1,828.6 33690 Repair Of Pulmonary Artery \$1,828.6 33690 Repair Of Pulmonary Artery \$1,828.6 33690 Repair And Correction Of Four Congenital Heart Defects With Patch 33790 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.1 33702 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.3 33720 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass: \$1,348.3 33720 Repair Of Pulmonary Vareous Steuro (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.3 33720 Repair Of Pulmonary Vareous Steuro (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.3 33720 Repair Of Pulmonary Vareous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.3 33720 Repair Of Pulmonary Vareous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.4 33730 Complete Repair Of Annalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.6 33731 Repair Of Or Ordinational Vareous Pulmonary Vareous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,338.6 33732 Rep  | 33660    | Repair Of Incomplete Or Partial Atrioventricular Canal (Ostium Primum Atrial Septal Defect). With Or Without Atrioventricular Valve Repair   | \$1,691.33         |
| \$1,896.5   Closure Of Multiple Ventricular Septal Defects: With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)   \$1,751.6  | 33665    | Repair Of Intermediate Or Transitional Atrioventricular Canal, With Or Without Atrioventricular Valve Repair   | \$1,841.16         |
| 33677 Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)  \$1,575.6 Closure Of Multiple Ventricular Septal Defects; With Removal Of Pulmonary Artery Band, With Or Without Gusset  \$1,885.7 33681 Closure Of Single Ventricular Septal Defect; With Or Without Patch;  \$1,785.8 33684 Closure Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)  \$1,635.8 33684 Closure Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)  \$1,635.8 33680 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Guston Valvotomy Or Infundibular Resection (Acyanotic)  \$1,635.8 33680 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Spanding Of Pulmonary Artery  \$1,625.8 33690 Banding Of Pulmonary Artery  \$1,625.8 Complete Repair Tetralogy Of Fallot Without Pulmonary Artersia;  \$1,625.8 Complete Repair Tetralogy Of Fallot Without Pulmonary Artersia;  \$1,627.7 Complete Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery  \$1,776.8 Repair Sinus Of Valsava Fistual, With Cardiopulmonary Bypass;  \$1,346.8 Sinus Of Valsava Fistual, With Cardiopulmonary Bypass;  \$1,347.8 Repair Sinus Of Valsava Aneurysm, With Cardiopulmonary Bypass;  \$1,348.1 Sinus Of Valsava Aneurysm, With Cardiopulmonary Bypass;  \$1,349.1 Sinus Of Valsava Aneurysm, With Cardiopulmonary Bypass;  \$1,340.1 Sinus Of Valsava Aneurysm, With Cardiopulmonary Bypass;  \$1,340.1 Sinus Of Valsava Aneurysm, Wit  | 33670    | Repair Of Complete Atrioventricular Canal, With Or Without Prosthetic Valve  | \$1,703.99         |
| Safety   Closure Of Multiple Ventricular Septal Defects: With Removal Of Pulmonary Artery Band, With Or Without Gusset   \$1,818.7  | 33675    | Closure Of Multiple Ventricular Septal Defects;  | \$1,896.39         |
| 33681 Closure Of Single Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,785.8 33688 Closure Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic) \$1,635.5 33688 Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Band, With Or Without Gusset \$1,635.5 33690 Banding Of Pulmonary Artery \$1,169.1 33692 Complete Repair Tetalogy Of Fallot Without Pulmonary Artery Band, With Or Without Gusset \$1,877.1 33692 Repair And Correction Of Four Congenital Heart Defects With Patch \$1,877.1 33697 Complete Repair Congenital Heart Defects With Patch \$1,776.7 33702 Repair Sinus Of Valsava Fistula, With Cardiopulmonary Bypass; \$1,349.0 33710 Repair Sinus Of Valsava Fistula, With Cardiopulmonary Bypass; \$1,349.0 33710 Repair Sinus Of Valsava Fistula, With Cardiopulmonary Bypass; \$1,349.0 33724 Repair Of Isolated Partial Anomalous Pulmonary Venous Pypass \$1,349.1 33726 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg., Scimitar Syndrome) \$1,349.6 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,349.6 33731 Repair Of Or Tritaritamum Or Supravalurlar Mitral Ring By Resection Of Left Artial Membrane \$1,436.6 33736 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,346.6 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,346.7 33740 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging 33741 Guidance \$33740 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging 33740 Creation Of Shunt From Bosconding Aorts To Pulmonary (Lung) Artery 33740 Placement Of Shunt From Descending Aorts To Pulmonary (Lung) Artery 33740 Placement Of Shunt From Posconding Aorts To Pulmonary (Lung) Artery 33740 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33740 Placement Of Shunt From Vena Cav   | 33676    | Closure Of Multiple Ventricular Septal Defects; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)   | \$1,751.67         |
| Sassa   Closure Ventricular Septal Defect; With Pulmonary Valvotomy Or Infundibular Resection (Acyanotic)   \$1,636.5   33688   Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Band, With Or Without Gusset   \$1,1628.1   33690   Banding Of Pulmonary Artery   \$1,168.1   33690   Banding Of Pulmonary Artery   \$1,168.1   33691   Repair Totalogy Of Fallot Without Pulmonary Artersia;   \$1,879.1   33694   Repair And Correction Of Four Congenital Heart Defects With Patch   \$1,877.1   33792   Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery   \$1,778.2   33702   Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass;   \$1,348.0   33710   Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass;   \$1,349.1   33720   Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass;   \$1,349.1   33721   Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome)   \$1,334.8   33722   Repair Of Valsalva Partial Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome)   \$1,334.8   33732   Repair Of Pulmonary Venous Stenos   \$1,954.6   33733   Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types)   \$1,935.4   33734   Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane   \$1,436.6   33735   Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure   \$1,134.6   33736   Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure   \$1,134.6   33736   Enlargement Of Wall Between Two Upper Heart Chambers (Pole Heart Pole Rev.) (Pol   |          |  | \$1,818.76         |
| 33688   Closure Ventricular Septal Defect; With Removal Of Pulmonary Artery Band, With Or Without Gusset   \$1,628.63 33690   Complete Repair Tetralogy Of Fallot Without Pulmonary Atresia;   \$1,879.1 33691   Repair And Correction Of Four Congenital Heart Defects With Patch   \$1,877.1 33697   Complete Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery   \$1,776.7 33702   Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass;   \$1,348.0 33710   Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass;   \$1,348.0 33720   Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass;   \$1,349.1 33724   Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg, Scimitar Syndrome)   \$1,334.0 33726   Repair Of Vendromary Venous Stenous Peturn (Eg, Scimitar Syndrome)   \$1,334.0 33726   Repair Of Pulmonary Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types)   \$1,935.4 33730   Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types)   \$1,935.4 33735   Balloson Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure   \$1,1366.2 33737   Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure   \$1,366.2 33736   Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance   \$1,336.6 33746   Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance   \$1,236.6 33756   Placement Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance   \$1,336.6 33746   Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance   \$1,336.6 33746   Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance   \$1,336.6 33756   Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery  |          |  | \$1,785.87         |
| 33890   Banding Of Pulmonary Artery   \$1,1631   \$1,879.   \$1,879 |          |  | \$1,635.52         |
| Standard   |          |  |                    |
| State   |          |  |                    |
| Complete Repair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery 33702 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; 33720 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; 33721 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass 33722 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass 33724 Repair Of Pulmonary Venous Peturn (Eg. Scimitar Syndrome) 33726 Repair Of Pulmonary Venous Stenosis 33730 Complete Repair Of Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) 33731 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane 33732 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane 33738 Balloon Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure 33741 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33745 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33750 Shunt; Subclavian To Pulmonary Attery (Blalock-Taussig Type Operation) 33760 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33761 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33762 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33768 Placement Of Shunt From Vena Cava To Pulmonar  |          |  |                    |
| Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass;  \$1,348.0 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; With Repair Of Ventricular Septal Defect  \$1,775.8 33720 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass  \$1,348.1 33724 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome)  \$1,334.8 33726 Repair Of Pulmonary Venous Stenosis  \$1,954.6 33730 Complete Repair Of Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome)  \$1,935.4 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types)  \$1,935.4 33730 Expair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane  \$1,346.6 33731 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane  \$1,346.6 33732 Repair Of Vall Between Two Upper Heart Chambers, Closed Heart Procedure  \$1,346.6 13733 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure  Incision Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging 33741 Guidance  \$634.7 33745 Creation Of Short For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance  \$33745 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance  \$33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance  \$33745 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery  \$1,136.4 33766 Placement Of Shunt From Poseending Aorta To Pulmonary (Lung) Artery  \$1,136.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery  \$1,136.4 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  \$33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  \$33776 Repair Of A Group O   | 33694    | Repair And Correction Or Four Congenital Heart Defects With Patch  | \$1,877.10         |
| Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass;  \$1,348.0 33710 Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; With Repair Of Ventricular Septal Defect \$1,775.8 33720 Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass \$1,349.1 33724 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) \$1,334.8 33726 Repair Of Pulmonary Venous Stenosis \$1,954.6 33730 Complete Repair Of Anomalous Pulmonary Venous Return (Eg. Scimitar Syndrome) \$1,935.4 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) \$1,935.4 33730 Expair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane \$1,436.6 33731 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane \$1,366.2 33732 Repair Of Vall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,366.2 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure Incision Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging 33741 Guidance \$634.7 33745 Creation Of Shott For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$33745 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$33745 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery \$1,132.8 33756 Placement Of Shunt From Becending Aorta To Pulmonary (Lung) Artery \$1,136.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery \$1,136.4 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,829.7 33771 Repair Of A Group Of Congenital Heart Defec   | 33697    | Complete Renair Of Tetralogy Of Fallot Congenital Defect Of Heart With Absence Of Opening From Right Lower Heart To Main Lung Artery   | \$1 778 7 <b>6</b> |
| 33710   Repair Sinus Of Valsalva Fistula, With Cardiopulmonary Bypass; With Repair Of Ventricular Septal Defect   |          |  |                    |
| Repair Sinus Of Valsalva Aneurysm, With Cardiopulmonary Bypass  \$1,349.1 33724 Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg., Scimitar Syndrome)  \$1,334.8 33736 Repair Of Pulmonary Venous Stenosis  \$1,954.6 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types)  \$1,935.4 33732 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane  \$1,436.6 33735 Balloon Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure  \$1,134.7 33736 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure  \$1,134.7 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure  \$1,366.2 33737 Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure  \$1,366.2 33741 Guidance  \$33745 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging 33746 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance  \$33755 Placement Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance  \$33762 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery  \$33764 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation)  \$33765 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery  \$33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery  \$33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs  \$33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  \$33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect  \$33771 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg. Mustard Or Senning Type) With Cardiopulmonary Bypass  \$33775 Repair Of A Group Of Congenital Heart Defects   |          |  |                    |
| 33724   Repair Of Isolated Partial Anomalous Pulmonary Venous Return (Eg, Scimitar Syndrome)   \$1,334.8   33726   Repair Of Pulmonary Venous Stenosis   \$1,954.6   33730   Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types)   \$1,935.6   33732   Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane   \$1,436.6   33735   Balloon Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure   \$1,366.2   33737   Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure   \$1,366.2   33737   Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure   \$1,366.2   33737   Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure   \$1,366.2   33741   Guidance   \$634.7   33745   Creation Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging Guidance   \$634.7   33745   Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance   \$372.9   33750   Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation)   \$1,223.8   33752   Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery   \$1,152.4   33762   Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery   \$1,118.1   33764   Shunt; Central, With Prosthetic Graft   \$1,280.5   33766   Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung   \$1,161.4   33767   Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs   \$1,376.8   33768   Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)   \$357.7   33770   Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect   \$1,879.8   33771   Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without S   |          |  | \$1,349.16         |
| Repair Of Pulmonary Venous Stenosis 3730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) 3733 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) 3733 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane \$1,436.6 37373 Balloon Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,366.2 37373 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure \$1,366.2 37374 Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure Incision Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging 3741 Guidance 3741 Guidance 3745 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 3746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 3750 Shunt; Subclavian To Pulmonary Artery (Balock-Taussig Type Operation) 3750 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery 3760 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 3761 Shunt; Central, With Prosthetic Graft 3760 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 3760 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs 3760 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs 3760 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) 3761 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect 3762 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, On Heart-Lung Machine, With Band Removal 3763 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Hea   |          |  | \$1,334.81         |
| 33730 Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types) 33732 Repair Of Cor Triatriatum Or Supravalvular Mitral Ring By Resection Of Left Atrial Membrane 31,436.6 33735 Balloon Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure 31,134.7 33736 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure 33738 Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure 33737 Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure 33741 Guidance 33745 Creation Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging 33746 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33745 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation) 33755 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33764 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Ban  | 33726    | Repair Of Pulmonary Venous Stenosis  | \$1,954.67         |
| Balloon Enlargement Of Wall Between Two Upper Heart Chambers, Closed Heart Procedure \$1,134.7 33736 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure \$1,366.2 33737 Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure Incision Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging 33741 Guidance 33745 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33750 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation) 33761 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33764 Shunt; Central, With Prosthetic Graft 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) 33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect 33776 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal 33776 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal   | 33730    | Complete Repair Of Anomalous Venous Return (Supracardiac, Intracardiac, Or Infracardiac Types)   | \$1,935.42         |
| 81,366.2 33736 Enlargement Of Wall Between Two Upper Heart Chambers, Open Heart Procedure 31,366.2 33737 Enlargement Of Wall Between Two Upper Heart Chambers With Correction Of Blood Flow, Open Heart Procedure 33741 Guidance 33741 Guidance 33742 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance 33749 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation) 33750 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery 33761 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33763 Shunt; Central, With Prosthetic Graft 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) 33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,829.7 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,879.8 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,879.8 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,879.8  |          |  | \$1,436.64         |
| Saration   |          |  | \$1,134.75         |
| Incision Of Partition Between Upper Chambers Of Heart To Allow Blood Flow For Congenital Heart Defects, Via Catheter Using Imaging 33741 Guidance \$634.7 33745 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$903.1 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$372.9 33750 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation) \$1,223.8 33761 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery \$1,118.1 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery \$1,118.1 33764 Shunt; Central, With Prosthetic Graft \$1,280.5 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung \$1,161.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs \$1,376.8 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,879.8 33774 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect \$1,879.8 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, On Heart-Lung Machine, With Band Removal \$1,612.9  |          | 0 11 7 1   | \$1,366.22         |
| 33741 Guidance \$634.7 33745 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$903.1 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$372.9 33750 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation) \$1,223.8 33752 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery \$1,152.4 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery \$1,118.1 33764 Shunt; Central, With Prosthetic Graft \$1,280.5 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung \$1,161.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs \$1,376.8 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$357.7 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,829.5 33774 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect \$1,879.8 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, On Heart-Lung Machine, With Band Removal \$1,612.9   |          |  | \$1,134.66         |
| 33745 Creation Of Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$903.1 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance \$372.9 33750 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation) \$1,223.8 33755 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery \$1,152.4 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery \$1,118.1 33764 Shunt; Central, With Prosthetic Graft \$1,280.5 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung \$1,161.4 33768 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs \$1,161.4 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$357.7 33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,829.7 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect \$1,879.8 33774 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass \$1,567.6   |          |  | <b>*</b>           |
| 33746 Creation Of Additional Shunt For Blood Flow Within Heart For Congenital Heart Defects, Via Catheter Using Imaging Guidance  \$372.9 33750 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation)  \$1,223.8 33755 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery  \$1,152.4 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery  \$1,118.1 33764 Shunt; Central, With Prosthetic Graft  \$1,280.5 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung  \$1,161.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs  \$3768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  \$33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect  \$1,879.8 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect  \$1,879.8 33772 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass  \$1,567.6 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal  \$1,612.9   |          |  | \$634.76           |
| 33750 Shunt; Subclavian To Pulmonary Artery (Blalock-Taussig Type Operation)  \$1,223.8 33751 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery \$1,152.4 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery \$1,118.1 33764 Shunt; Central, With Prosthetic Graft \$1,280.5 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung \$1,161.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs \$3768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) \$33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,879.8 33774 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect \$1,879.8 33775 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass \$1,567.6 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal \$1,612.9   |          |  |                    |
| 33755 Placement Of Shunt From Ascending Aorta To Pulmonary (Lung) Artery 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery 33764 Shunt; Central, With Prosthetic Graft 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure) 33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect \$1,879.8 33774 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect \$1,879.8 33775 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass \$1,567.6 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal \$1,612.9  |          |  |                    |
| 33762 Placement Of Shunt From Descending Aorta To Pulmonary (Lung) Artery  \$1,118.1 33764 Shunt; Central, With Prosthetic Graft  \$1,280.5 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung  \$1,161.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs  \$1,376.8 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  \$35770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect  \$1,879.8 33774 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect  \$1,879.8 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect  \$1,879.8 33776 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal  \$1,612.9   |          |  |                    |
| 33764 Shunt; Central, With Prosthetic Graft  33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung  \$1,161.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs  \$1,376.8 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  \$3770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect  \$1,829.7 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect  \$1,879.8 33774 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass  \$1,567.6 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal  \$1,612.9  | -        |  | \$1,118.10         |
| 33766 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To One Lung  \$1,161.4 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs  \$1,376.8 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  \$357.7 33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect  \$1,829.7 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect  \$1,879.8 33774 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass  \$1,567.6 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal  \$1,612.9  | -        |  |                    |
| 33767 Placement Of Shunt From Vena Cava To Pulmonary (Lung) Artery To Improve Blood Flow To Both Lungs  \$1,376.8 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  \$357.7 33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect  \$1,829.7 33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect  \$1,879.8 33774 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass  \$1,567.6 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal  \$1,612.9  |          |  | \$1,161.48         |
| 33768 Anastomosis, Cavopulmonary, Second Superior Vena Cava (List Separately In Addition To Primary Procedure)  33770 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect  33771 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect  33774 Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass  33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal  31,612.9   |          | , , , ,  | \$1,376.87         |
| 33770Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, Without Surgical Enlargement Defect\$1,829.733771Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect\$1,879.833774Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass\$1,567.633775Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal\$1,612.9   |          |  | \$357.75           |
| 33771Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow, With Surgical Enlargement Defect\$1,879.833774Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass\$1,567.633775Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal\$1,612.9   |          |  | \$1,829.72         |
| 33774Repair Of Transposition Of The Great Arteries, Atrial Baffle Procedure (Eg, Mustard Or Senning Type) With Cardiopulmonary Bypass\$1,567.633775Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal\$1,612.9  |          |  | \$1,879.82         |
| 33775 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Band Removal \$1,612.9  |          |  | \$1,567.64         |
| 33776 Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Defect Closure \$1,705.8  |          |  | \$1,612.92         |
|   | 33776    | Repair Of A Group Of Congenital Heart Defects With Reversal Of Blood Flow On Heart-Lung Machine, With Defect Closure   | \$1,705.87         |

| 33777 Repair Of A Count of Cooperhal Heart Delects With Reviews of 19 soot Few On Heart-Lung Machines, With Charleston (19 south 19 so) 32787 Repair Of A Group Of Cooperhal Heart Delects With Redirection of Book Few, With Board Reviews 32779 Repair Of A Group Of Cooperhal Heart Delects With Redirection of Book Few, With Board Reviews 32779 Repair Of A Group Of Cooperhal Heart Delects With Redirection of Book Few, With Delects on Repair 32781 Repair Of A Group Of Cooperhal Heart Delects With Redirection of Book Few, With Delects on Repair 32781 Reviews of Cooperhal Heart Delects With Redirection of Book Few, With Delects on Repair 32782 Reviews of Repair (19 south 19 sou  | C- 4-   | In contaction  | Fac   |
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| 39322   Sepair Of Congential Heart Detect From Pulmonary (Lung) Artery To Antar, Patent Younger Than 18 Years 39408   Repair Of Congential Heart Detect From Pulmonary (Lung) Artery To Antar, Patent 18 Years And Older \$1,003.33401   Sepair Of Congential Heart Detect From Pulmonary (Lung) Artery To Antar, Patent 18 Years And Older \$1,003.33401   Section Of Concretation Of Antar, With Or Without Associated Patent Ductus Arterious, With Direct Annationaries \$1,103.33401   Section Of Concretation Of Antar, With Or Without Associated Patent Ductus Arterious With Graft Concretation Of Antar, With Or Without Associated Patent Ductus Arterious With Graft Subdavian Artery Or Prosthetic Statistics (Concretation Of Antar, With Or Without Associated Patent Ductus Arterious With Graft Graft Subdavian Artery Or Prosthetic Statistics (With Concretation Of Antar, With Or Without Associated Patent Ductus Arterious With Graft Concretation Of Antar Antary Statistics (With Concretation Artery Statistics) Statistics (Concretation Of Antary With Graft Or Heart-Lung Auditorious Or Prosthetic Miteriots With Concretation Patents Statistics (Concretation Of Antary Antary Statistics) Statistics (Concretation Of Antary Antary Statistics) Statistics (Concretation Of Antary Antary Statistics) Statistics (Concretation Antary Statistics) Statistics (Concretation Of Antary Antary Statistics) Statistics (   |   |  | \$1,330.12  |
| 33828   Exement Of Congretation   Annual New York   Section   Section Of Congretation   Annual New York   Section   Section Of Congretation Of Annual New York   Section   Sec  | 33820   | Repair Of Patent Ductus Arteriosus; By Ligation  | \$939.09  |
| Sabel Excision Of Coardistant Of Anati, With Or Without Associated Patent Ductus Anterious, With Direct Anasterosis Sabel Excision Of Coardistant Of Anati, With Or Without Associated Patent Ductus Anterious, With Graft Sabel Sab  | 33822   | Repair Of Congenital Heart Defect From Pulmonary (Lung) Artery To Aorta, Patient Younger Than 18 Years   | \$746.01  |
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| Existion Of Coardstain Of Aorta, With Or Without Associated Patent Ductus Anteriosus Repair Using Either Left Succlavian Artery of Prosthetic \$1,236.8 (Material Acquiser) Exemption (19) (Psychoptatic Or Interrupted Aorta Arch Using Autogenous Or Prosthetic Material: Without Cardiopulmonary Bypass \$1,236.4 (19) (19) (19) (19) (19) (19) (19) (19)  | 33840   | Excision Of Coarctation Of Aorta, With Or Without Associated Patent Ductus Arteriosus; With Direct Anastomosis   | \$1,204.77  |
| Exission Of Coartation Of Aorta, With Or Vithout Associated Patent Ductus Anneissus Repair Using Either Left Subclavian Artery of Prosthetic S1,2304.  33567, Repair Of Hypoplastic Or Interrupted Aorta Arch Vising Autogenous Or Prosthetic Material: Without Cardiopulmonary Bypass 51,2216.  33568, Repair Of Hypoplastic Or Interrupted Aorta Arch Vising Autogenous Or Prosthetic Material: With Cardiopulmonary Bypass 51,772.6.  33569, Repair Of Assending Aorta With Graft On Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) 52,395.4.  33589, Repair Of Assending Aorta With Graft On Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) 52,395.4.  33583 [Repair Of Assending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3.  33684 [Separation Of Graft To Assending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3.  33685 [Separation Of Graft To Assending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3.  33686 [Separation Of Aorta Charles And Carles Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3.  33787 [Repair Of Transverse Acrd Or Aorta With Graft Of Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3.  33787 [Repair Of Transverse Acrd Or Aorta With Graft Of Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart 33,000.3.  33887 [Repair Of Descending Aorta In Chest With Initial Prosthesis Inserted Through Aorta Aorta Carles Aorta A  | 33845   | Excision Of Coarctation Of Aorta, With Or Without Associated Patent Ductus Arteriosus; With Graft  | \$1,167.31  |
| State   State   Chrypoplastic Of Interrupted Ancie Arch Using Autogenous OF Prostate Material, Without Cardiopulmonary Bypass   \$1,272.6   |   | Excision Of Coarctation Of Aorta, With Or Without Associated Patent Ductus Arteriosus Repair Using Either Left Subclavian Artery Or Prosthetic   |   |
| 33858 Repair Of Physpolastic Of Interrupted Annic Arch Using Autogenous OF Prostretic Material, With Cardiopulmonary Bypass 33858 Repair Of Ascending Anata With Graft Of Heart-Lung Machine, For Disease Other Than Separation Of Wall Of Anata (Dissection) 52,3935, 33859 Repair Of Ascending Anata With Graft Of Heart-Lung Machine, For Disease Other Than Separation Of Wall Of Anota (Dissection) 52,3935, 33859 Repair Of Ascending Anata With Graft Of Heart-Lung Machine, With Replacement Of Grot Of Anata And Reconstruction Of Heart 53,000-1 53,0  | 33851   | Material As Gusset For Enlargement   | \$1,236.46  |
| Sag53 Repair Of Ascending Aorta With Graft on Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection) \$2,335.4  33863 Placement Of Graft To Ascending Aorta On Heart-Lung Machine, For Bisease Other Than Separation Of Wall Of Aorta (Dissection) \$2,335.4  33863 Placement Of Graft To Ascending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart \$3,002.1  33864 Placement Of Graft To Ascending Aorta On Heart-Lung Machine, With Remodeling Of Root Of Aorta And Reconstruction Of Heart \$3,009.0  33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4  33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5  33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5  33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5  33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5  33877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,807.5  33877 Repair Of Desconding Aorta in Chest Life Mills Prosthesis Inserted Through Artery \$1,509.5  33887 Repair Of Desconding Aorta in Chest Life Mills Prosthesis Inserted Through Artery \$1,509.5  33880 Repair Of Defect Of Aorta in Chest, Irialia Extension \$3,809.5  3389.5  3389.6 Repair Of Defect Of Aorta in Chest, Irialia Extension \$3,809.5  3389.5  3389.6 Incision On One Side Of Neck To Transfet Chest Artery To Neck Artery Plus Endousscular Procedure To Repair Chest Aorta, Open Procedure \$3,809.5  3389.6 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.6  3389.7 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 Repair Of Aorta By Neck Incision \$3,809.7 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809.7 Repair Of Aorta By Insertion Of Stant Arons Stagin Side Branches \$3,809  | 33852   | Repair Of Hypoplastic Or Interrupted Aortic Arch Using Autogenous Or Prosthetic Material; Without Cardiopulmonary Bypass   | \$1,221.65  |
| 33558 Repair Of Ascending Aorta With Graft On Heart-Lung Machine, For Separation Of Wall Of Aorta (Dissection)         \$2,335.4           33580 Repair Of Ascending Aorta With Graft On Heart-Lung Machine, For Dissease Offer Than Separation Of Wall Of Aorta (Dissection)         \$2,335.4           33580 Pleament Of Graft To Ascending Aorta On Heart-Lung Machine, With Replacement Of Root Of Aorta And Reconstruction Of Heart         \$3,002.1           3360 Francis Of The Ascending Aorta On Heart-Lung Machine, With Remodeling Of Root Of Aorta And Reconstruction Of Heart         \$3,009.3           3387 Pleament Of Graft To Ascending Aorta On Heart-Lung Machine         \$2,355.1           3387 Pleament Of Graft To Ascending Aorta On Heart-Lung Machine         \$2,355.1           3387 Pleament Of Graft To Ascending Aorta On Heart-Lung Machine         \$2,355.1           3387 Pleament Of Broad Control Cont   |   |  | \$1,772.69  |
| Repair Of Ascending Aoria With Graft On Heart-Lung Machine, For Disease Other Than Separation Of Wall Of Aoria (Diseaction)   |   |  | \$2,935.41  |
| 33886 Graft To Half Ol Aroita Enterpy Arch \$3,09.0 \$38387 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,3877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,8775 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,8775 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,8377 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,83775 Repair Of Thoracoabdominal Aortic Aneuvysm With Graft, With Of Without Cardiopulmonary Bypass \$3,107.5 \$  | 33859   | Repair Of Ascending Aorta With Graft On Heart-Lung Machine, For Disease Other Than Separation Of Wall Of Aorta (Dissection)  | \$2,383.45  |
| 33886 Graft To Half Ol Aroita Enterpy Arch \$3,09.0 \$38387 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,3877 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,8775 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2,815.4 \$3,8775 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,8377 Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$3,83775 Repair Of Thoracoabdominal Aortic Aneuvysm With Graft, With Of Without Cardiopulmonary Bypass \$3,107.5 \$  |   |  |   |
| 3881 Sapar Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine \$2815. 3877 Repair Of Transverse Arch Of Aorta With Critifon Heart-Lung Machine \$2815. 3877 Repair Of Transverse Arch Of Aorta With Critifon Heart-Lung Machine \$2815. 3877 Repair Of Descending Aorta in Cheest With Initial Prosthesis Inserted Through Artery \$25.55. 3880 Repair Of Descending Aorta in Cheest With Initial Prosthesis Inserted Through Artery \$3.3877. 3881 Repair Of Descending Aorta in Cheest With Initial Prosthesis Inserted Through Artery \$3.3878. 3881 Repair Of Descending Aorta in Cheest Milling Origin Of Left Subdavian Artery With Initial Prosthesis Inserted Through Catheter \$1.324. 3883 Repair Of Defect Of Aorta in Cheest, Additional Extension \$3.384. 3884 Repair Of Defect Of Aorta in Cheest, Additional Extension \$3.389. 3884 Repair Of Defect Of Aorta in Cheest, Additional Extension \$3.389. 3884 Repair Of Defect Of Aorta in Cheest, Additional Extension \$3.389. 3885 Incision On Cone Side Of Neck To Transfer Cheest Artery To Neck Artery Plus Endovascular Procedure To Repair Chest Aorta, Open Procedure \$677.4 3889 Incision On Cone Side Of Neck To Transfer Chest Artery To Neck Artery Plus Endovascular Procedure To Repair Chest Aorta, Open Procedure \$677.4 3890 Descending Throacic Aorta, By Neck Incision \$3.3893. 3890 Repair Of Aorta By Insertion Of Sizent Arcross Major Side Branches \$9.3930. 3893 Repair Of Aorta By Insertion Of Sizent Arcross Major Side Branches \$9.3930. 3893 Repair Of Aorta By Insertion Of Sizent Arcross Major Side Branches \$9.3930. 3990 Pleasment Of Sizent in Pulmonary Artery With Normal Anatomical Connections, On One Side Of Body \$479.6 3990 Pleasment Of Sizent in Pulmonary Artery With Normal Anatomical Connections, On One Side Of Body \$479.6 3990 Pleasment Of Sizent in Pulmonary Artery With Repromative Artery With Repair Of Pulmonary Artery Stands Sizent in Pulmonary Artery With Repair Of Sizent Areham Sizent Size   |   |  | \$3,022.19  |
| Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine   \$2.815.6   | 33864   | Placement Of Graft To Ascending Aorta On Heart-Lung Machine, With Remodeling Of Root Of Aorta And Reconstruction Of Heart  | \$3,090.94  |
| \$2,355.1   | 33866   | Graft To Half Of Aortic Artery Arch  | \$881.31  |
| 33317   Repair Of Thoracoebdominal Acrice Aneurysm With Graft, With Or Without Cardiopulmonary Bypass   \$3,1075  | 33871   | Repair Of Transverse Arch Of Aorta With Graft On Heart-Lung Machine  | \$2,815.49  |
| S1,339.53     Repair Of Descending Aonta in Chest With Initial Prosthesis Inserted Through Artery   | 33875   | Descending Thoracic Aorta Graft, With Or Without Bypass  | \$2,355.19  |
| Sapar   Repair Of Desconding Aorta in Chest Including Origin Of Left Subclavian Artery With Initial Prosthesis Inserted Through Catheter   \$1,320.4  | 33877   | Repair Of Thoracoabdominal Aortic Aneurysm With Graft, With Or Without Cardiopulmonary Bypass  | \$3,107.58  |
| Sabasa   Repair Of Defect Of Aorta in Chest, Initial Extension   \$354.1  |   |  | \$1,539.51  |
| Sasat   Repair Of Defect Of Aorta in Chest, Additional Extension   Sasat   S  | 33881   | Repair Of Descending Aorta In Chest Including Origin Of Left Subclavian Artery With Initial Prosthesis Inserted Through Catheter   | \$1,320.41  |
| Sabba   Insertion Of Extension Prosthesis After Previous Repair Of Descending Aorta In Chest   \$829.4  | 33883   | Repair Of Defect Of Aorta In Chest, Initial Extension  | \$959.97  |
| Sabasa  | 33884   | Repair Of Defect Of Aorta In Chest, Additional Extension   | \$334.15  |
| Bypass Graft, With Other Than Vein, Transcervical Retropharyngeal Carotid-Carotid, Performed In Conjunction With Endovascular Repair Of \$814.7 33894   Repair Of Aorta By Insertion Of Stent Across Major Side Branches \$793.0 33895   Repair Of Aorta By Insertion Of Stent Not Crossing Major Side Branches \$793.0 33895   Repair Of Aorta By Insertion Of Stent Not Crossing Major Side Branches \$793.0 33895   Repair Of Aorta By Insertion Of Stent Not Crossing Major Side Branches \$793.0 33890   Repair Of Aorta By Insertion Of Stent Not Crossing Major Side Branches \$793.0 33890   Repair Of Aorta By Insertion Of Stent In Pulmonary Artery With Normal Anatomical Connections, On One Side Of Body \$479.6 \$30.5 33901   Repair Of Stent In Pulmonary Artery With Abnormal Anatomical Connections, On One Side Of Body \$630.5 33902   Recement Of Stent In Pulmonary Artery With Abnormal Anatomical Connections, On One Side Of Body \$603.3 3903   Recement Of Stent In Pulmonary Artery With Abnormal Anatomical Connections, On One Side Of Body \$717.7 33904   Recement Of Additional Stent In Pulmonary Artery With Abnormal Anatomical Connections, On Both Sides Of Body \$717.7 33904   Repair Of Additional Stent In Pulmonary Artery Stent S  | 33886   | Insertion Of Extension Prosthesis After Previous Repair Of Descending Aorta In Chest   | \$829.46  |
| 38398   Repair Of Aorta By Insertion Of Stent Across Major Side Branches   \$793.0  |   | Bypass Graft, With Other Than Vein, Transcervical Retropharyngeal Carotid-Carotid, Performed In Conjunction With Endovascular Repair Of  | \$677.48  |
| Sassistance   |   |  |   |
| 33890   Placement Of Stent In Pulmonary Artery With Normal Anatomical Connections, On One Side Of Body   \$479.6  |   | , ,  |   |
| Sason   Placement Of Stent In Pulmonary Artery With Normal Anatomical Connections, On Don Side Of Body   \$630.5  |   | , , ,  |   |
| Placement Of Stent In Pulmonary Arteries With Normal Anatomical Connections, On Both Sides Of Body   \$603.93902   Placement Of Stent In Pulmonary Arteries With Abnormal Anatomical Connections, On De Side Of Body   \$717.73904   \$608.9303   Placement Of Stent In Pulmonary Arteries With Abnormal Anatomical Connections, On Both Sides Of Body   \$717.73904   \$717.73904   Placement Of Additional Stent In Pulmonary Artery Embolectomy; With Abnormal Anatomical Connections, On Both Sides Of Body   \$240.73910   Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass   \$2,279.93915   Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass   \$3,510.0   \$1,98.6   \$3,916   Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass   \$3,510.0   \$1,918.6   \$3,917   Repair Of Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass   \$3,610.0   \$1,414.6   \$2,020   Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass   \$3,610.0   \$1,414.6   \$2,020   Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass   \$1,515.5   \$1,515.   |   | · ·  |   |
| Placement Of Stent In Pulmonary Artery With Abnormal Anatomical Connections, On One Side Of Body   \$608.9   \$39303   Placement Of Stent In Pulmonary Arteries With Abnormal Anatomical Connections, On Both Sides Of Body   \$717.7   \$240.7   \$240.7   \$240.7   \$3930   Placement Of Additional Stent In Pulmonary Artery & \$240.7   \$240.7   \$3930   Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass   \$2,279.9   \$39315   Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass   \$3,610.0   \$3916   Pulmonary Endarterectomy With Or Without Embolectomy, With Cardiopulmonary Bypass   \$3,610.0   \$3916   Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft   \$1,414.6   \$4,144.6   |   |  |   |
| 33903   Placement Of Stent In Pulmonary Arteries With Abnormal Anatomical Connections, On Both Sides Of Body   \$717.7  |   | ·  |   |
| Say   Placement Of Additional Stent In Pulmonary Artery   \$240.7   |   |  |   |
| 33910 Pulmonary Artery Embolectomy; With Cardiopulmonary Bypass 33918 Pulmonary Artery Embolectomy; Without Bypass 33916 Pulmonary Artery Embolectomy; Without Bypass 33916 Pulmonary Artery Embolectomy; Without Embolectomy, With Cardiopulmonary Bypass 33916 Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artery Stenosis By Reconstruction Or Replacement Of Conduit From Right Or Left Ventricle To 33020 Pulmonary Artery 33020 Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33024 Separately In Addition To Code For Primary Procedure) \$272.4 33925 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1 33926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$2,303.4 33927 Implantation Of Artificial Heart \$2,190.8 33928 Removal Of Artificial Heart \$2,190.8 33929 Removal Of Artificial Heart \$2,190.8 33930 Without Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From 33931 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo 33934 Beart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy \$4,270.6 9rice By Repo 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo 33945 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$225.3 33949 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$225.3  |   |  |   |
| 33915 Pulmonary Artery Embolectomy; Without Bypass 33916 Pulmonary Endarterectomy With Or Without Embolectomy, With Cardiopulmonary Bypass 33917 Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artery Stenosis By Reconstruction Or Replacement Of Conduit From Right Or Left Ventricle To 33920 Pulmonary Artery Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33924 Separately In Addition To Code For Primary Procedure) 33925 Repair Of Pulmonary Artery Artorization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1 33926 Repair Of Pulmonary Artery Artorization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$2,303.4 33927 Implantation Of Artificial Heart \$2,190.8 33928 Replacement Of Artificial Heart \$2,190.8 33929 Removal Of Artificial Heart Price By Repo Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From 33933 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33934 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33945 Dinor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$33047 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Us   |   | ···  |   |
| 33916 Pulmonary Endarterectomy With Or Without Embolectomy, With Cardiopulmonary Bypass 33610.0 33917 Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Arteria With Ventricular Septal Defect, By Construction Or Replacement Of Conduit From Right Or Left Ventricle To 33920 Pulmonary Artery 33922 Transection Of Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33924 Separately In Addition To Code For Primary Procedure) 33925 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1 33926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$1,652.1 33927 Implantation Of Artificial Heart \$2,190.8 33928 Replacement Of Artificial Heart \$2,190.8 33929 Removal Of Artificial Heart \$2,190.8 33929 Removal Of Artificial Heart \$2,190.8 33930 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo 33930 Donor Cardiectomy (Including Cold Preservation) 33940 Donor Cardiectomy (Including Cold Preservation) 33940 Donor Cardiectomy (Including Cold Preservation) 33945 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33949 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33949 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33949 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump  |   |  |   |
| Repair Of Pulmonary Artery Stenosis By Reconstruction With Patch Or Graft Repair Of Pulmonary Artersia With Ventricular Septal Defect, By Construction Or Replacement Of Conduit From Right Or Left Ventricle To 33920 Pulmonary Artersia With Ventricular Septal Defect, By Construction Or Replacement Of Conduit From Right Or Left Ventricle To 33921 Transection Of Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33924 Separately In Addition To Code For Primary Procedure) \$272.4 \$3925 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1 \$3926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$2,303.4 \$3927 Implantation Of Artificial Heart \$2,190.8 \$2928 Replacement Of Artificial Heart \$2,190.8 \$2,19  |   |  |   |
| Repair Of Pulmonary Atresia With Ventricular Septal Defect, By Construction Or Replacement Of Conduit From Right Or Left Ventricle To 9 Pulmonary Artery Pulmonary Artery Standard Procedure (List 133922 Transection Of Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 133924 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately In Addition To Code For Primary Procedure) \$272.4 Separately Inflamated Procedure (List Separately In Addition To Code For Primary Procedure) \$272.4 Separately Inflamated Procedure (List Separately Inflamated Procedure) \$272.7 Separately Inflamated Procedure (List Separately Inflamated Procedure) \$272.4 Separately Inflamated Procedure (List Separately Inflamated Pr  |   |  |   |
| Pulmonary Artery 33922 Transection Of Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33924 Separately In Addition To Code For Primary Procedure) 33925 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass 33926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass 33927 Implantation Of Artificial Heart 33928 Replacement Of Artificial Heart 33929 Removal Of Artificial Heart 4 Price By Repo 33929 Removal Of Artificial Heart 5 Price By Repo 33930 Removal Of Artificial Heart 5 Price By Repo 33931 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy 33935 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy 33936 Donor Cardiectomy (Including Cold Preservation) 4 Price By Repo 33940 Donor Cardiectomy (Including Cold Preservation) 5 Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33940 Donor Cardiectomy (Including Cold Preservation) 5 Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump 33948 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump 33949 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years   | 33977   |  | \$1,414.65  |
| Transection Of Pulmonary Artery With Cardiopulmonary Bypass Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33924 Separately In Addition To Code For Primary Procedure) \$272.4 \$292.4 | 33030   |  | ¢1 571 50   |
| Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List 33924 Separately In Addition To Code For Primary Procedure) \$272.4  33925 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1  33926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$2,303.4  33927 Implantation Of Artificial Heart \$2,190.8  33928 Replacement Of Artificial Heart Price By Repo Aspend Of Artificial Heart Price By Repo Aspend Of Artificial Heart Price By Repo Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo Donor Cardiectomy (Including Cold Preservation) Price By Repo Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo Backbench Standard Preparation Of Cadaver Donor Heart And Lungs Using A Pump \$300.2  33945 Heart Transplant, With Or Without Recipient Cardiectomy Aprend Pump \$300.2  33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$331.3  33948 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$225.7  Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years  |   |  |   |
| 33924 Separately In Addition To Code For Primary Procedure)  \$272.4 33925 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1 33926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$2,303.4 33927 Implantation Of Artificial Heart \$2,190.8 33928 Replacement Of Artificial Heart \$2,190.8 33929 Removal Of Artificial Heart \$2,190.8 33929 Price By Repo \$3,100.0 33929 Removal Of Artificial Heart \$2,190.8 32,190.8 32,190.8 32,190.8 32,190.8 32,190.8 32,190.8 32,190.8 32,190.8 32,19  | 3300  | Uransection Of Pulmonary Artery With Cardiopulmonary Bypass  | ا ∪.د ا ∠, ا ب  |
| Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass \$1,652.1 33926 Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass \$2,303.4 33927 Implantation Of Artificial Heart \$2,190.8 33928 Replacement Of Artificial Heart Price By Repo 33929 Removal Of Artificial Heart Price By Repo 33929 Removal Of Artificial Heart Price By Repo 33930 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Price By Repo 33935 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy \$4,270.6 33940 Donor Cardiectomy (Including Cold Preservation) Price By Repo 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump 33948 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump 33949 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump \$235.3  | 33922   | ,  | • 1   |
| Say   |   | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List  |   |
| S2,190.8  | 33924   | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  | \$272.43  |
| 33928   Replacement Of Artificial Heart   Price By Repo   | 3392 <sup>4</sup><br>33925  | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  | \$272.43<br>\$1,652.15  |
| 33929 Removal Of Artificial Heart  Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From 33933 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation 33934 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy  Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For  Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump  \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump  \$33048 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump  \$235.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump  \$227.7   | 33924<br>33925<br>33926   | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass   | \$272.43<br>\$1,652.15<br>\$2,303.44  |
| Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From 33933 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation 33935 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy 33940 Donor Cardiectomy (Including Cold Preservation)  Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For  Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$331.3 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$225.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$225.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years   | 33924<br>33925<br>33926<br>33927  | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass  Implantation Of Artificial Heart   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84  |
| 33933 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation  Price By Repo 33935 Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy  \$4,270.6 33940 Donor Cardiectomy (Including Cold Preservation)  Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For  Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump  \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump  \$33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump  \$225.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump  \$227.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years   | 33924<br>33926<br>33926<br>33928  | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass  Implantation Of Artificial Heart  Replacement Of Artificial Heart  | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report   |
| 33935   Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy   \$4,270.6  | 33924<br>33926<br>33926<br>33928  | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass  Implantation Of Artificial Heart  Replacement Of Artificial Heart  Removal Of Artificial Heart   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84  |
| 33940 Donor Cardiectomy (Including Cold Preservation)  Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For  Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy \$4,677.8 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$331.3 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$235.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7   | 33924<br>33926<br>33926<br>33927<br>33928   | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From  | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report  |
| Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Price By Repo 33945 Heart Transplant, With Or Without Recipient Cardiectomy \$4,677.8 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$330.3 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$235.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years  | 33924<br>33926<br>33927<br>33928<br>33928<br>33933  | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation  | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report  |
| 33944 Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For \$\ \text{33945}\$ Heart Transplant, With Or Without Recipient Cardiectomy \$\ \text{4,677.8}\$ 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$\ \text{330.2}\$ 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$\ \text{331.3}\$ 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$\ \text{235.3}\$ 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$\ \text{227.7}\$ Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years   | 33924<br>33925<br>33926<br>33927<br>33928<br>33933<br>33935                                     | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report<br>Price By Report<br>\$4,270.68   |
| 33945   Heart Transplant, With Or Without Recipient Cardiectomy   \$4,677.8   | 33924<br>33925<br>33926<br>33927<br>33928<br>33933<br>33935                                     | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass  Implantation Of Artificial Heart  Replacement Of Artificial Heart  Removal Of Artificial Heart  Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation  Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy  Donor Cardiectomy (Including Cold Preservation)   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report  |
| 33946 Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$300.2 33947 Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$331.3 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$235.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years  | 33924<br>33925<br>33926<br>33927<br>33928<br>33933<br>33935<br>33940                            | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass  Implantation Of Artificial Heart  Replacement Of Artificial Heart  Removal Of Artificial Heart  Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation  Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy  Donor Cardiectomy (Including Cold Preservation)  Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report<br>Price By Report<br>\$4,270.68<br>Price By Report  |
| 33947   Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump   \$331.3   | 33924<br>33925<br>33927<br>33928<br>33928<br>33933<br>33935<br>33940                            | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report<br>Price By Report<br>\$4,270.68<br>Price By Report  |
| 33948 Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump \$235.3 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump \$227.7 Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years  | 33924<br>33925<br>33926<br>33927<br>33928<br>33935<br>33935<br>33940<br>33944<br>33945          | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report<br>Price By Report<br>\$4,270.68<br>Price By Report<br>Price By Report                                       |
| 33949 Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump       \$227.7         Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years  | 33924<br>33925<br>33926<br>33927<br>33928<br>33935<br>33946<br>33946<br>33946<br>33946          | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure) Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass Implantation Of Artificial Heart Replacement Of Artificial Heart Removal Of Artificial Heart Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy Donor Cardiectomy (Including Cold Preservation) Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report<br>Price By Report<br>\$4,270.68<br>Price By Report<br>Price By Report<br>\$4,677.89<br>\$300.28             |
| Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years  | 33924<br>33925<br>33926<br>33927<br>33928<br>33935<br>33946<br>33946<br>33946<br>33946          | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass  Implantation Of Artificial Heart  Replacement Of Artificial Heart  Removal Of Artificial Heart  Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation  Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy  Donor Cardiectomy (Including Cold Preservation)  Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy  Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump   | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report<br>\$4,270.68<br>Price By Report<br>Price By Report<br>\$4,677.89<br>\$300.28<br>\$331.36                    |
|   | 33924<br>33925<br>33926<br>33927<br>33928<br>33935<br>33946<br>33946<br>33946<br>33947<br>33948 | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass  Implantation Of Artificial Heart  Replacement Of Artificial Heart  Removal Of Artificial Heart  Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation  Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy  Donor Cardiectomy (Including Cold Preservation)  Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy  Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump  Initiation Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump  Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report<br>Price By Report<br>\$4,270.68<br>Price By Report<br>Price By Report<br>\$4,677.89<br>\$300.28<br>\$331.36 |
|   | 33924<br>33925<br>33926<br>33927<br>33928<br>33935<br>33946<br>33946<br>33946<br>33947<br>33948 | Ligation And Takedown Of A Systemic-To-Pulmonary Artery Shunt, Performed In Conjunction With A Congenital Heart Procedure (List Separately In Addition To Code For Primary Procedure)  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; Without Cardiopulmonary Bypass  Repair Of Pulmonary Artery Arborization Anomalies By Unifocalization; With Cardiopulmonary Bypass  Implantation Of Artificial Heart  Replacement Of Artificial Heart  Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, And Trachea For Implantation  Heart-Lung Transplant With Recipient Cardiectomy-Pneumonectomy  Donor Cardiectomy (Including Cold Preservation)  Backbench Standard Preparation Of Cadaver Donor Heart Allograft Prior To Transplantation, Including Dissection Of Allograft From Surrounding Soft Tissues To Prepare Aorta, Superior Vena Cava, Inferior Vena Cava, Pulmonary Artery, And Left Atrium For Heart Transplant, With Or Without Recipient Cardiectomy  Initiation Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump  Daily Management Of External Vein To Vein Blood Circulation In Heart And Lungs Using A Pump  Daily Management Of External Vein To Artery Blood Circulation In Heart And Lungs Using A Pump                        | \$272.43<br>\$1,652.15<br>\$2,303.44<br>\$2,190.84<br>Price By Report<br>Price By Report<br>\$4,270.68<br>Price By Report<br>Price By Report<br>\$4,677.89<br>\$300.28                                |

| 22252   | Description   | Fee   |
|---|---|---|
| პპ952   | Insertion Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older  | \$430.15  |
| 22052   | Innerties Of Tube Open Dreedure For External Blood Circulation In Heart And Lunga Heing A Dump Detient Birth Through E Veers Of Age   | ¢452.40   |
|   | Insertion Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years Of Age Insertion Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older  | \$453.10<br>\$480.02  |
| 00001   | Insertion Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5   | Ψ100.02   |
| 33955   | Years Of Age  | \$792.18  |
| 33956   | Insertion Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older   | \$719.39  |
|   | Repositioning Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5  |   |
| 33957   | Years Of Age  Repositioning Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And  | \$159.19  |
| 33958   |   | \$176.88  |
| 33959   | Repositioning Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years Of Age  | \$201.81  |
|   | Repositioning Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older   | \$201.81  |
|   | Repositioning Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5   | *   |
| 33963   | Years Of Age  Repositioning Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And   | \$447.38  |
| 33964   | Older   | \$424.83  |
|   | Removal Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years  | <b>*</b> 470.00   |
| 33965   | Of Age  | \$176.88  |
| 33966   | Removal Of Tube Accessed Through The Skin For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older  | \$227.96  |
|   | Insertion Of Assistive Heart Blood Flow Device Into Aorta, Accessed Through The Skin  | \$249.69  |
| 33968   | Removal Of Blood Flow Assist Device In Aorta, Accessed Through The Skin   | \$32.40   |
| 33969   | Removal Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5 Years Of Age  | \$260.89  |
|   | Removal Of Blood Flow Assist Device In Aorta, Open Procedure  | \$306.57  |
|   | Removal Of Intra-Aortic Balloon Assist Device Including Repair Of Femoral Artery, With Or Without Graft   | \$620.98  |
| 33973   | Insertion Of Intra-Aortic Balloon Assist Device Through The Ascending Aorta   | \$432.37  |
| 33974   | Removal Of Intra-Aortic Balloon Assist Device From The Ascending Aorta, Including Repair Of The Ascending Aorta, With Or Without Graft  | \$781.97  |
|   | Insertion Of External Lower Heart Chamber Blood Flow Assist Device  | \$1,246.93  |
| 33976   | Insertion Of External Blood Flow Assist Device In Both Lower Heart Chambers   | \$1,364.09  |
|   | Removal Of External Assistive Blood Flow Device From One Lower Heart Chamber  | \$970.67  |
|   | Removal Of External Assistive Blood Flow Device From Both Lower Heart Chambers  Insertion Of Implanted Lower Heart Chamber Blood Flow Assist Device   | \$1,277.10<br>\$1,672.56  |
|   | Removal Of Implanted Lower Heart Chamber Assistive Blood Flow Device  | \$1,534.88  |
|   | Replacement Of External Lower Heart Chamber Assistive Blood Flow Device   | \$794.01  |
|   | Replacement Of Implanted Lower Heart Chamber Assistive Blood Flow Devices   | \$1,679.55  |
|   | Replacement Of Implanted Lower Heart Chamber Assistive Blood Flow Devices On Heart-Lung Machine  Removed Of Type Open Presedure For External Blood Circulation In Heart And Lyngs Union A Rymp Potient 6 Years And Older  | \$1,984.42  |
| 33984   | Removal Of Tube Open Procedure For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older  Removal Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient Birth Through 5  | \$271.35  |
| 33985   | Years Of Age  | \$491.33  |
| 33986   | Removal Of Tube Accessed Through The Chest For External Blood Circulation In Heart And Lungs Using A Pump Patient 6 Years And Older   | \$451.25  |
|   | Incision Of Artery For Creation Of A Channel For Blood Circulation Using A Pump   |   |
|   | Insertion Of Left Heart Vent Through Chest For Blood Oxygenation Rewarming And Return   | \$179.53  |
| 00000   |   | \$668.83  |
| 33989   | Removal Of Left Heart Vent Through Chest For Blood Oxygenation Rewarming And Return  Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And  |   |
|   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation  | \$668.83  |
| 33990   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition   | \$668.83<br>\$424.83<br>\$348.63  |
| 33990<br>33991  | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation  Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation  | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32  |
| 33990<br>33991<br>33992   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition   | \$668.83<br>\$424.83<br>\$348.63  |
| 33990<br>33991<br>33992<br>33993  | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17  |
| 33990<br>33991<br>33992<br>33993<br>33995   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation  | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17  |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997  | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78  |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>33999   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation  | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17  |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>33999<br>34001<br>34051   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>33999<br>34001<br>34051<br>34101  | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision  | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>34001<br>34051<br>34101<br>34111  | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>34001<br>34051<br>34101<br>34111<br>34151   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision  | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>34001<br>34051<br>34101<br>34111<br>34151<br>34201<br>34203   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Tor Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision  | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28<br>\$576.79<br>\$1,198.58<br>\$797.39   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>34001<br>34051<br>34101<br>34151<br>34201<br>34203<br>34401   | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28<br>\$576.79<br>\$1,198.58<br>\$797.39<br>\$906.26<br>\$1,294.27   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>33999<br>34001<br>34051<br>34101<br>34111<br>34151<br>34201<br>34201<br>34201<br>34201<br>34201           | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot To Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Leg Incision   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28<br>\$576.79<br>\$1,198.58<br>\$797.39<br>\$906.26<br>\$1,294.27   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>34001<br>34101<br>34111<br>34151<br>34201<br>34203<br>34401<br>34421<br>34421                             | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoiliac Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Abdominal And Leg Incisions  | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28<br>\$576.79<br>\$1,198.58<br>\$797.39<br>\$906.26<br>\$1,294.27<br>\$595.28   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>34001<br>34051<br>34101<br>34151<br>34201<br>34203<br>34401<br>34421<br>34451<br>34471                    | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot To Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot In Artery Via Abdominal Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Leg Incision   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28<br>\$576.79<br>\$1,198.58<br>\$797.39<br>\$906.26<br>\$1,294.27   |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>34001<br>34051<br>34101<br>34151<br>34201<br>34203<br>34401<br>34451<br>34471<br>34470<br>34490<br>34501  | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoiliac Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Leg Incision Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Valvuloplasty, Femoral Vein   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28<br>\$576.79<br>\$11,198.58<br>\$797.39<br>\$906.26<br>\$1,294.27<br>\$595.28<br>\$1,223.76<br>\$921.96<br>\$568.39            |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33997<br>34001<br>34051<br>34101<br>34151<br>34201<br>34203<br>34401<br>34421<br>34451<br>34470<br>34490<br>34502  | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoliiac Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Abdominal And Leg Incisions Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Thrombectomy, Direct Or With Catheter; Axillary And Subclavian Vein, By Arm Incision Reconstruction Of Vena Cava, Any Method | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28<br>\$576.79<br>\$1,198.58<br>\$797.39<br>\$906.26<br>\$1,294.27<br>\$595.28<br>\$1,223.76<br>\$921.96<br>\$568.39<br>\$767.03 |
| 33990<br>33991<br>33992<br>33993<br>33995<br>33999<br>34001<br>34101<br>34111<br>34151<br>34201<br>34401<br>34421<br>34451<br>34471<br>34471<br>344502<br>34502 | Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery Accessed Through Skin, Including Radiological Supervision And Interpretation Insertion Of Left Lower Heart Chamber Blood Flow Assist Device Via Artery And Vein Accessed Through Skin, With Puncture Of Partition Between Heart Chambers, Including Radiological Supervision And Interpretation Removal Of Left Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Repositioning Of Lower Heart Chamber Blood Flow Assist Device Using Imaging Guidance Insertion Of Right Lower Heart Chamber Blood Flow Assist Device Via Vein Accessed Through Skin, Including Radiological Supervision And Interpretation Removal Of Right Lower Heart Chamber Blood Flow Assist Device, Accessed Through Skin Unlisted Procedure, Cardiac Surgery Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Neck Incision Removal Of Blood Clot In Artery Via Thoracic Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Lower Arm Or Chest Via Arm Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Aortoiliac Artery Of Upper Leg Via Leg Incision Removal Of Blood Clot Or Obstructing Material (Embolus) From Peroneal Artery Of Upper Leg Via Leg Incision Thrombectomy, Direct Or With Catheter; Vena Cava, Iliac Vein, By Abdominal Incision Removal Of Blood Clot In Vena Cava, Pelvic Or Thigh Artery Via Leg Incision Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Thrombectomy, Direct Or With Catheter; Subclavian Vein, By Neck Incision Valvuloplasty, Femoral Vein   | \$668.83<br>\$424.83<br>\$348.63<br>\$411.32<br>\$181.61<br>\$145.17<br>\$316.22<br>\$140.78<br>Price By Report<br>\$781.31<br>\$871.78<br>\$573.28<br>\$576.79<br>\$11,198.58<br>\$797.39<br>\$906.26<br>\$1,294.27<br>\$595.28<br>\$1,223.76<br>\$921.96<br>\$568.39            |

| 30707 Roument Of Graft For Repart Of Anter For Other Than Rugture Including Raddological Supervision And Interpretation 51,569.12 (2) (2) (2) (2) (2) (2) (2) (2) (2) (2   | Code   | Description   | Fee                 |
|--|--------|---|---------------------|
| 31000 Pictoreran Of Graft For Separ Of Another For Routeries including Resideological Supervision And Interpretation Repair Of Non-Registrate Annua And Grain Area (P. O. Dies See W.B. Graft Inserted Through Area, Including Resideological Supervision And Interpretation Repair Of Non-Registrate Annua And Grain Area (P. O. Dies See W.B. Graft Inserted Through Area, Including Resideological Supervision And Annual Repair Of Non-Registrate Annual Annual Annual Resideological Supervision And Annual Repair Of Non-Registrate Annual Resideological Supervision And Annual Repair Of Non-Registrate Annual Resideological Supervision And Interpretation Registrate Of Registrate Annual Resideological Supervision And Interpretation Annual Resideological Supervision Annual Resideological Supervision Annual Interpretation Annual Resideo                                   |        |   | \$1,068.09          |
| Repair Of Non-Equipment Anna Arra Arra Groin Ansey On One-Side With Grait Inserted Through Antery, including Radiological Supervision And Repair Of Non-Replicated Anna And Groin Anteries On Both Sides With Grait Inserted Through Antery, including Radiological Supervision And Strong Anterior Company of the Property of Strong Anna Anna And Groin Anteries On Both Sides With Grait Inserted Through Antery, including Radiological Supervision And Strong Anterior Company of Strong Anna Anna Anna Anna Anna Anna Anna An  |        | i i i i i   | \$1,584.22          |
| APAPO Interpretation Repair Of Non-Ruptured Anta And Groin Anteres On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Stripted Interpretation Sepair Of Non-Ruptured Anta And Groin Anteres On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Stripted Interpretation Apaper Of Non-Ruptured Groin Anteres On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation Apaper Of Non-Ruptured Groin Anterios On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation Apaper Of Non-Ruptured Groin Anterios On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation Apaper Of Non-Ruptured Groin Anterios On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation Apaper Of Non-Ruptured Groin Anterios On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation Apaper Of Proteinses For Repair Of Abdominal Or Groin Antery, Including Radiological Supervision And Interpretation Apaper Of Original Stripted Stripted Anterior                                   | 34703  | Placement Of Graft For Repair Of Infrarenal Aorta And Groin Artery Including Radiological Supervision And Interpretation                  | \$1,180.48          |
| Regard Of Non-Ruptured Aorta And Gron Arteries On Both Sides With Cartil Inserted Through Artery, Including Raddosgical Supervision And \$1,513.7 (Apre) Inserted Control (Control Control Cont                                  |        | Repair Of Non-Ruptured Aorta And Groin Artery On One Side With Graft Inserted Through Artery, Including Radiological Supervision And      |                     |
| Repair CP Repaired Austin And Grein Anteries On Both Sides With Graft Inserted Through Antery, Including Radiological Supervision And June Interpretation and Interpretation and Interpretation (Interpretation of Programs of                                   | 34704  |   | \$1,951.64          |
| Proper Of Ruptured Acra And Groin Anteries On Both Sides With Graft Inserted Through Artery, Including Reddological Supervision And 1919/06.  24707 Repair Of Non-Ruptured Groin Artery On Che Side With Graft Inserted Through Artery, Including Reddological Supervision And Interpretation 24707 Repair Of Non-Ruptured Groin Artery Both Sides With Graft Inserted Through Artery, Including Reddological Supervision And Interpretation 24707 Inserted Properties of Properties of Advanced on Artery Including Additional Artery Reddological Supervision And Interpretation 24707 Inserted Protection of Proteintees For Repair Of Abstraction Of Proteintees For Repair Of Proteintees For Repai                                   | 0.4705 |   | <b>0.4.5.40.7.4</b> |
| A2000 Interpretation   \$1,950.0   34707 Regair Of Non-Ruptured Groin Antery Cn One Side With Graft Inserted Through Antey, Including Radiological Supervision And Interpretation   \$1,950.0   34707 Interaction Of Non-Ruptured Groin Antery Con Both Sides With Graft Inserted Through Antey, Including Radiological Supervision And Interpretation   \$1,950.0   34707 Interaction Of Prosthesia For Repair Of Abdominal Of Groin Antery Including Radiological Supervision And Interpretation   \$2,950.0   34707 Interaction Of Prosthesia For Repair Of Abdominal Of Groin Antery Including Radiological Supervision And Interpretation   \$3,950.0   34717 Interaction Of Prosthesia For Repair Of Abdominal Of Groin Antery Including Radiological Supervision And Interpretation   \$3,950.0   34717 Interaction Of Prosthesia For Repair Of Abdominal Of Groin Antery Including Radiological Supervision And Interpretation   \$3,950.0   34717 Interaction Of Prosthesia For Repair Of Abdominal Of Groin Antery Interaction   \$3,950.0   34718 Interaction Of Prosthesia For Repair Of Abdominal Of Groin Antery Charactery Interaction   \$3,950.0   34719 Interaction Of the Groin Antery Of The Charactery Interaction   \$3,950.0   34719 Interaction   \$3,950.0   34719 Interaction Of the Groin Antery Of The Charactery Interaction   \$3,950.0   34719 Interaction   \$3,950.0   34719 Interaction Of The Groin Antery Of Charactery Interaction   \$3,950.0   34719 Interaction   \$3,950.0   34710 Interaction   \$3,950.0   34711 Inte | 34705  |   | \$1,513.71          |
| 8981.8 Repair Of Non-Ruptured Groin Artery On One Side With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation 5988.8 Septimber 10 Proceedings of the                                    | 34706  |   | \$1 950 62          |
| 3470 Repair Of Non-Ruptured Grain Anteries On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation 5275.2 34710 Designed Insertion OF Prosthesis For Repair Of Abdominal Or Groin Artery, Including Radiological Supervision And Interpretation 5275.2 34711 Designed Insertion OF Prosthesis For Repair Of Abdominal Or Groin Artery, Including Services 1488-85.3 34712 Designed Insertion OF Prosthesis For Repair Of Abdominal Or Groin Artery, Addominal Vessel Treated 5285.3 34713 Depairs Of One Groin Artery For Delivery Of Graft Accessed Through Three Sith 54714 Depairs of One Groin Artery For Delivery Of Graft Accessed Through Three Sith 54714 Depairs Of One Groin Artery For Delivery Of Graft Accessed Through Three Sith 54714 Depairs of One Groin Artery For Delivery Of Graft Accessed Through Artery, Performed At Same Time As Repair Of Anotis 5274.4 34718 Repairs Of One Undersom Of Upper Cheek Artery With Creation Of Conduct 34714 Repairs Of Groin Artery One Site With Creation Of Conduct 34714 Repairs Of Groin Artery One Site With Creation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 24714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 24714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 24714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 24714 Repairs Of Conduct Artery One One Side With Call Internation Of Production Of Conduct 24714 Repairs Of Conduc                                   | 34700  | morpotation   | ψ1,930.02           |
| 3470 Repair Of Non-Ruptured Grain Anteries On Both Sides With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation 5275.2 34710 Designed Insertion OF Prosthesis For Repair Of Abdominal Or Groin Artery, Including Radiological Supervision And Interpretation 5275.2 34711 Designed Insertion OF Prosthesis For Repair Of Abdominal Or Groin Artery, Including Services 1488-85.3 34712 Designed Insertion OF Prosthesis For Repair Of Abdominal Or Groin Artery, Addominal Vessel Treated 5285.3 34713 Depairs Of One Groin Artery For Delivery Of Graft Accessed Through Three Sith 54714 Depairs of One Groin Artery For Delivery Of Graft Accessed Through Three Sith 54714 Depairs Of One Groin Artery For Delivery Of Graft Accessed Through Three Sith 54714 Depairs of One Groin Artery For Delivery Of Graft Accessed Through Artery, Performed At Same Time As Repair Of Anotis 5274.4 34718 Repairs Of One Undersom Of Upper Cheek Artery With Creation Of Conduct 34714 Repairs Of Groin Artery One Site With Creation Of Conduct 34714 Repairs Of Groin Artery One Site With Creation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 34714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 24714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 24714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 24714 Repairs Of Conduct Artery One One Side With Call Internation Of Conduct 24714 Repairs Of Conduct Artery One One Side With Call Internation Of Production Of Conduct 24714 Repairs Of Conduc                                   | 34707  | Repair Of Non-Ruptured Groin Artery On One Side With Graft Inserted Through Artery, Including Radiological Supervision And Interpretation | \$995.87            |
| 3270. Deligent Center on Prosthesis For Regard I Absorbania O'C Groin Arrey, India Verseal Treated 3850. 3671 Deligent Center on Prosthesis For Regard I Absorbania O'C Groin Arrey, Additional Visseal Treated 3850. 3671 Delivery O'C Fraction Center of Treated Services (Control Arrey), Additional Visseal Treated 3850. 3671 Delivery O'C Fraction Center of Treated Services (Control Arrey), Additional Visseal Treated 3850. 3671 Delivery O'C Fraction Center of Treated Services (Control Arrey), Additional Visseal Treated 3850. 3671 Delivery O'C Fraction Center of Treated Services (Control Arrey), Additional Visseal Treated 3850. 3671 Delivery O'C Fraction Center of Treated Services (Control Arrey), Additional Visseal Treated Services (Control Arrey), Additional Visseal Treated Services (Control Arrey), Additional Visseal Treated Services (Control Arrey), Additional Center of Treated Arrey), Advanced Treated Arrey Center of Treated Arrey Center of Treated Arrey, Additional Center of Treated Arrey, Additional Center of Treated Arrey, Advanced Treated Arrey, Additional Center of Treated Arrey, Center of Treated Arrey, Center of Treated Arrey, Additional Center of Treated Arrey, Center of                                   |        |   |                     |
| 34710 Delayed Insertion Of Prosthesis For Repair Of Abdominal Or Gron Artery, Johnson Versel Treated   |        |   | \$1,586.97          |
| 3211 Seleved Insention Of Prosthesis For Repair Of Aductominal Or Sron Artery, Additional Vessel Treated 525:33 34712 Seleved Or Ches Groin Artery For Delivery Of Sorth, Accessed Through The Stan 54715 Epoposer Of Ore Groin Artery For Delivery Of Sorth, Accessed Through The Stan 54716 Epoposer Of Ore Groin Artery For Delivery Of Sorth, Accessed Through The Stan 54716 Epoposer Of Ore Groin Artery For Delivery Of Sorth, Accessed Through The Stan 54716 Epoposer Of Ore Groin Artery For Delivery Of Prosthesis, Open Procedure 54726 54716 Epoposer Of Ore Undersom Of Upper Chest Artery With Creation Of Corolate 54716 Epoposer Of Ore Undersom Of Upper Chest Artery With Creation Of Corolate 54716 Epoposer Of Ore Undersom Of Upper Chest Artery With Creation Of Corolate 54717 Epoposer Of Corolate Chest Artery Octubers on Stan Artery Standard Stan 54717 Epoposer Of Corolate Chest Artery Octubers on Stan Artery Standard Stan 54717 Epoposer Of Corolate Chest Artery Octubers on Device (List Separately in Addition To Code For Primary Procedure) 54716 Epoposer Of Corolate Processed Corolate Proceedure 54716 Epoposer Of Corolate Processed Corolate Procedure 54717 Epoposer Of Corolate Procedure 54718 Epoposer Of                                   |        |   | \$275.29            |
| 34712 Sposser Of Pictation Device To Gridt Via Catheter Including Radiological Supervision And Interpretation 5565.  \$116.9 34714 Eposaure Of One Grain Artery With Creation Of Conduit, Open Procedure 5220.7  34715 Eposaure Of One Grain Artery With Creation Of Conduit, Open Procedure 5220.7  34716 Eposaure Of One Undersom Or Upper Chest Artery With Creation Of Conduit 4, 2011.  34717 Eposaure Of One Undersom Or Upper Chest Artery With Creation Of Conduit 5310.2  34718 Eposaure Of One Undersom Or Upper Chest Artery With Creation Of Conduit 5310.2  34719 Eposaure Of One Undersom Or Upper Chest Artery With Creation Of Conduit 5310.2  34719 Eposaure Of One Undersom Or Upper Chest Artery With Creation Of Conduit 5310.2  34719 Eposaure Of One Grain Artery On One Side With Grait Inserted Through Artery, Not Performed At Same Time As Repair Of Andra 5110.2  34719 Eposaure Of Creation Artery Cooksool Proceedings of Conduit 1997 Eposaure                                  |        |   | \$685.09            |
| 34712 Exposure Of One Groin Artery For Delivery Of Graft, Accessed Through The Skin  34718 Exposure Of One Groin Artery Will Creation Of Conduit, Open Procedure  \$250.7  34718 Exposure Of One Undersom Or Upper Chest Artery For Delivery Of Prosthesis, Open Procedure  \$319.2  34719 Pepaer Of Groin Artery On One Side Will Graft Incented Through Artery, Not Profit March 1997 (1997)                                 |        | · ·   |                     |
| 34716 Sposure Of One Groin Artery Will Creation Of Conduit, Open Procedure  \$250.0  34716 Exposure Of One Undersom Or Upper Chest Artery For Delevery Of Processions, Open Procedure  \$372, 34718 Repair Of Groin Artery On Chest Set Will Creat Internet Travally Artery, Performed At Same Time As Repair Of Acrts  \$372, 34718 Repair Of Groin Artery On Chest Set Will Graft Internet Through Artery, Not Performed At Same Time As Repair Of Acrts  \$372, 34718 Repair Of Groin Artery On Chest Set Will Graft Internet Through Artery, Not Performed At Same Time As Repair Of Acrts  \$372, 34718 Repair Of Groin Artery On Chest Set Will Graft Internet Through Artery, Not Performed At Same Time As Repair Of Acrts  \$372, 34718 Repair Of Groin Artery On Chest Set Artery Octubes Internet Through Artery, Not Performed At Same Time As Repair Of Acrts  \$372, 34718 Repair Of Groin Artery On Chest Set Artery Octubes Internet Through Artery on Repair (List Separately In Addition To Code For Primary 1975)  \$372, 3472 Repair Of Chest Transport Proceedings Proceedings on Artery Set  |        |   |                     |
| 34716 Exposure Of One Undersorm Of Upper Chest Artery For Delivery Of Prosthesis, Open Procedure  34717 Repair Of Groin Artery On One Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Aorta  34718 Repair Of Groin Artery On One Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Aorta  34718 Repair Of Groin Artery On One Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Aorta  34718 Repair Of Groin Artery On One Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Aorta  34718 Repair Of Groin Artery On One Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Aorta  34812 Exposure Of One Timp Artery For Insertion Of Prosthesis. Open Procedure  34912 Procedure  34912 Procedure  34912 Procedure  34913 Procedure  34913 Procedure  34914 Procedure  34914 Procedure  34914 Procedure  34915 Procedure  34914 Procedure  34915 Procedure  34916 Procedure  34915 Procedure  34916 Procedure  34917 Procedure  34917 Procedure  34917 Procedure  34917 Procedure  34918 Pr                                   |        | i i   |                     |
| 34716 Répair Of Cine Undersarm Of Upper Chest Artery Will Creation Of Conduit  34717 Repair Of Groin Artary On One Side Will Graft Inserted Through Artery, Performed At Same Time As Repair Of Anata 34718 Repair Of Groin Artary On One Side Will Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Anata 34718 Repair Of Groin Artary On One Side Will Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Anata 34718 Repair Of Groin Artary On One Side Will Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Anata 3480 Endowscand Proceedure 3482 Exposure Of Cream Thigh Artery For Insertion Of Prosthesis, Open Procedure 3482 Procedure) 3481 Procedure) 3482 Exposure Of Cream Thigh Artery For Insertion Of Prosthesis, Open Procedure 3483 Repair Of Budging (Aneusymin Of Anata Of Soin Artery For Insertion Of Prosthesis, Open Procedure 3483 Repair Of Budging (Aneusymin Of Anata Of Soin Artery For Insertion Of Prosthesis, Open Procedure 3483 Repair Of Budging (Aneusymin Of Anata Of Soin Artery For Insertion Of Prosthesis, Open Procedure 3483 Repair Of Budging (Aneusymin Of Anata Of Soin Arteries Villa Prosthesis, Open Procedure 3483 Repair Of Budging (Aneusymin Of Anata Of Soin Arteries Villa Prosthesis, Open Procedure 3483 Repair Of Anata In Alborimen Will Credit Insertion of Prosthesis, Open Procedure 3484 Supervision And Interpretation 3484 Supervision And Interpretation 3484 Supervision And Interpretation 3484 Supervision And Interpretation And Interpretation 3484 Repair Of Anata In Alborimen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 3 Repair Of Anata In Alborimen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through 3484 Repair Of Anata In Alborimen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through 3484 Repair Of Anata In Alborimen Below Michaeys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inse                                   |        |   |                     |
| 34717 Repair Of Groin Artery On Cone Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Aorta 51,061.13 34808 Enfotovascular Placement Of Itac Artery Coclusion Device (East Separately in Addition To Code For Primary Procedure) 34812 Exposure Of One Thigh Artery For Insertion Of Prosthesis, Open Procedure 34812 Exposure Of One Thigh Artery For Insertion Of Prosthesis Are Drocedure 34812 Exposure Of One Thigh Artery For Insertion Of Prosthesis, Open Procedure 34820 Repair Of Bulging (Aneuryem) Of Aorta Or Upen Procedure 34820 Repair Of Bulging (Aneuryem) Of Aorta Or Upen Procedure 34830 Repair Of Bulging (Aneuryem) Of Aorta Or Upen Procedure 34830 Repair Of Bulging (Aneuryem) Of Aorta Or Upen Procedure 34830 Repair Of Bulging (Aneuryem) Of Aorta Or Upen Procedure 34830 Repair Of Bulging (Aneuryem) Of Aorta Or Upen Procedure 34830 Exposure Of One Groin Artery With Creation Of Prosthesis, Open Procedure 34830 Exposure Of One Groin Artery For Insertion Of Prosthesis, Open Procedure 34830 Exposure Of One Groin Artery For Insertion Of Prosthesis, Open Procedure 34830 Exposure Of One Groin Artery For Insertion Of Prosthesis, Open Procedure 34830 Exposure Of One Groin Artery For Insertion Of Prosthesis, Open Procedure 34830 Exposure Of One Artery Artery For Insertion Of Prosthesis, Open Procedure 34830 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34830 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34831 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34831 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34832 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34833 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34833 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34833 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34833 Exposure Of One Artery For Insertion Of Prosthesis, Open Procedure 34834 Exposure Of One Artery For Insertion Of Pros                                   |        |   | \$319.27            |
| 34718 Repair OT Groin Artery On One Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair OT Arata 34808 Endowscaler Placement OT Bios Artery October Device (List Separately In Addition To Code For Primary 34812 (Exposure OT One Thigh Artery For Insertion OF Prosthesis, Open Procedure 34812 (Exposure OT One Thigh Artery For Insertion OF Prosthesis, Open Procedure 34812 (Exposure OT One Groin Artery For Insertion OF Prosthesis, Open Procedure 34813 (Procedure) 34813 (Procedure) 34813 (Procedure) 34831 (Repair OT Biologing (Aneuryam) OT Arata With Prosthesis, Open Procedure 34833 (Repair OT Biologing (Aneuryam) OT Arata With Prosthesis, Open Procedure 34833 (Repair OT Biologing (Aneuryam) OT Arata With Prosthesis, Open Procedure 34834 (Repair OT Biologing (Aneuryam) OT Arata With Prosthesis, Open Procedure 34832 (Exposure OT One Artery With Oration OT Code of Artery State (Aneuryam) OT Arata With Prosthesis, Open Procedure 34832 (Exposure OT One Artery With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Prosthesis, Open Procedure 34832 (Exposure OT One Artery With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Prosthesis, Open Procedure 34832 (Exposure OT One Artery With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Oration OT Code Oration Artery State (Aneuryam) OT Arata With Oration OT Arata (Aneuryam)                                    |        |   | \$379.46            |
| SIROSE   | 34718  | Repair Of Groin Artery On One Side With Graft Inserted Through Artery, Not Performed At Same Time As Repair Of Aorta                      | \$1,061.15          |
| Piecement Of Femoral-Fiermoral Prosthetic Graft During Endovascular Aonic Aneurysm Repair (List Separately) in Addition To Code For Primary 34830 Repair Of Cone Croin Artery For Insention Of Prosthesis, Open Procedure \$1,3430. Repair Of Bulging (Aneurysm) Of Aorta Vith Prosthesis, Open Procedure \$1,5433. 34832 Repair Of Bulging (Aneurysm) Of Aorta Vith Prosthesis, Open Procedure \$1,5433. 34832 Repair Of Bulging (Aneurysm) Of Aorta Vith Prosthesis, Open Procedure \$1,5433. 34832 Repair Of Bulging (Aneurysm) Of Aorta Vith Prosthesis, Open Procedure \$1,5433. 34832 Repair Of Cone Am Artery Vith Creation Of Conduit \$1,6433. 34834 Exposure Of One Croin Antery Vith Creation Of Conduit \$1,5433. 34834 Exposure Of One Am Artery For Insention Of Prosthesis, Open Procedure \$1,5433. 3484 Supervision And Interpretation \$1,122,8 3484 Supervision And Interpretation \$1,122,8 3484 Supervision And Interpretation \$1,122,8 3484 Rodological Supervision And Interpretation \$1,276,6 3484 Rodological Supervision And Interpretation \$1,276,6 3484 Rodological Supervision And Interpretation \$1,276,6 3484 Rodological Supervision And Interpretation \$1,441,9 3484 Including Radological Supervision And Interpretation \$1,470,6 3484 Shreup Andrew Rodological Supervision And Interpretation \$1,470,6 3484       |        |   | \$168.22            |
| 384020 Exposure Of One Groin Artery For Insention Of Prosthesis, Open Procedure  \$250.77 34830 Repair Of Budging (Aneurysm) Of Aron With Prosthesis, Open Procedure  \$1,495.89 34831 Repair Of Budging (Aneurysm) Of Aron Of Condon Arteries With Prosthesis, Open Procedure  \$1,495.89 34832 Repair Of Budging (Aneurysm) Of Aron Of Upper Thigh Anteries With Prosthesis, Open Procedure  \$1,612.00 34833 Exposure Of One Groin Artery With Creation Of Conduit  \$1,812.01 34833 Exposure Of One Script Artery With Creation Of Conduit  \$1,812.01 34834 Exposure Of One Arm Artery For Insention Of Prosthesis, Open Procedure  \$1,910.77 34841 Supervision Of Aron In Abdomen With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through Artery, Including 34842 Repair Of Aron In Abdomen Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 34842 Repair Of Aron In Abdomen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 34843 Repair Of Aron In Abdomen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 34844 Repair Of Aron In Abdomen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 34844 Repair Of Aron In Abdomen Below Kidneys With Graft, Including 1 Graft In Arteries To Abdominal Organs, Inserted Through Artery, Including Repair Of Aron In Abdomen Below Kidneys With Graft, Including 1 Graft In Arteries To Abdominal Organs, Inserted Through Artery, Including Repair Of Aron In Abdomen Below Kidneys With Graft, Including 1 Graft In Arteries To Abdominal Organs, Inserted Through 34844 Artery, Including Rediological Supervision And Interpretation 34845 Artery, Including Rediological Supervision And Interpretation 34846 Artery, Including Rediological Supervision And Interpretation 34847 Artery, Including Rediological Supervision And Interpretation 34848 Through Artery, Including Superv                            |        |   | \$175.84            |
| S2828.1  34830 Repair Of Dissign (Aneurysm) Of Aorta With Prosthesis, Open Procedure  \$1,493.8  34831 Repair Of Bulging (Aneurysm) Of Aorta With Prosthesis With Prosthesis, Open Procedure  \$1,493.8  34831 Repair Of Bulging (Aneurysm) Of Aorta With Prosthesis With Prosthesis, Open Procedure  \$1,643.3  34832 Repair Of Bulging (Aneurysm) Of Aorta Or Groin Arteries With Prosthesis, Open Procedure  \$1,643.3  34832 Repair Of Bulging (Aneurysm) Of Aorta Or Groin Arteries With Prosthesis, Open Procedure  \$1,643.3  34834 Exposure Of One Groin Artery With Creation Of Conduit  \$3,724.8  34834 Exposure Of One Groin Artery With Creation Of Conduit  \$1,122.8  34834 Supervision And Interpretation  \$1,122.8  34843 Supervision And Interpretation  \$1,122.8  34843 Repair Of Aorta in Abdomen With Graft, Including 3 Grafts in Arteries To Abdominal Organs, Inserted Through Artery, Including 34842 Readiological Supervision And Interpretation  \$1,122.8  34843 Repair Of Aorta in Abdomen Below Kichneys With Graft, Including 3 Grafts in Arteries To Abdominal Organs, Inserted Through Artery, Including 34843 Readiological Supervision And Interpretation  \$1,441.9  34844 Including Readiological Supervision And Interpretation  \$1,441.9  34845 Artery, Including Addiological Supervision And Interpretation  \$1,441.9  34846 Including Readiological Supervision And Interpretation  \$1,441.9  34846 Artery, Including Readiological Supervision And Interpretation  \$1,442.6  34846 Artery, Including Readiological Supervision And              | 1      |   | *                   |
| 384303 Repair Of Bulging (Aneuryam) Of Actor and Frosthesis, Open Procedure  \$1,643,33 38431 Repair Of Bulging (Aneuryam) Of Actor and Frosthesis, Open Procedure  \$1,643,33 38432 Repair Of Bulging (Aneuryam) Of Actor and Frosthesis, Open Procedure  \$1,643,33 38432 Repair Of Bulging (Aneuryam) Of Actor and Frosthesis, Open Procedure  \$1,643,33 38432 Repair Of Bulging (Aneuryam) Of Actor and Frosthesis, Open Procedure  \$1,643,33 38432 Repair Of Dead Arm Artery (With Createn Of Conduit  \$1,324,34 3843 Exposure Of One Arm Artery For Insention Of Prosthesis, Open Procedure  Repair Of Actor in Abdomen With Graft, Including 1 Graft in Arteries To Abdominal Organs, Insented Through Artery, Including Radiological  \$1,129,8 38481 Supervision And Interpretation  \$1,275,6 38482 Repair Of Actor in Abdomen Below Kitcheys With Graft, Including 3 Grafts in Arteries To Abdominal Organs, Insented Through Artery, Including 3 38481 Redological Supervision And Interpretation  \$1,441,9 38484 Including Radiological Supervision And Interpretation  \$1,441,9 38484 Including Radiological Supervision And Interpretation  \$1,441,9 38484 Including Radiological Supervision And Interpretation  \$1,422,6 38485 Artery, Including Radiological Supervision And Interpretation  \$1,422,6 38486 Artery, Including Radiological Supervision And Interpretation  \$1,422,6 38486 Artery, Including Radiological Supervision And Interpretation  \$1,470,6 38487 Artery, Including Radiological Supervision And Interpretation  \$1,539,1 3849 Artery, Including Radiological Supervision And Interpretation  \$1,690,1 3849 Artery, Including Radiological Supervision And Interpretation  \$1,690,1 3849 Artery, Including Radiological Supervision And Interpretation  \$1,690,1 38            |        | '   |                     |
| 38431 Repair Of Bulging (Aneuryam) Of Andra Or Upper Thigh Anteries With Prosthesis, Open Procedure  \$1,643.2  38432 Repair Of Bulging (Aneuryam) Of Andra Or Upper Thigh Anteries With Prosthesis, Open Procedure  \$332.4  38435 Exposure Of One Grain Artery With Creation Of Conduit  \$332.4  38435 Exposure Of One Grain Artery With Creation Of Conduit  \$332.4  38435 Exposure Of One Arm Anterior For Insention Of Prosthesis Spen Procedure  \$332.4  38445 Supervision And Interpretation  \$1,128.8  38445 Supervision And Interpretation  \$1,276.6  \$8427 Repair Of Anter In Abdomen With Creating of Graft In Arteries To Abdominal Organs, Inserted Through Artery, Including Repair Of Anteries In Abdomen Relow Kitneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Repair Of Anteries In Abdomen Below Kitneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Repair Of Anteries In Abdomen Below Kitneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Repair Of Anteries In Abdomen Below Kitneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through Artery, Including Repair Of Anteries In Abdomen Below Kitneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through Artery, Including Repair Of Anteries In Abdomen Below Kitneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through S1, 22-25  Repair Of Anta In Abdomen Belower Kitneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through S1, 22-25  Repair Of Anta In Abdomen Belower And Below Kitneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through S1, 24-25  Repair Of Anta In Abdomen Belower And Below Kitneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through S1, 24-25  Repair Of Anta In Abdomen Between And Below Kitneys With Graft, Including 3 Grafts In Arteries To Abdomina                           |        |   |                     |
| 34832   Repair Of Bulging (Aneurysm) Of Aorta Or Upper Thigh Arteries With Prosthesis, Open Procedure   \$3.124.38   |        |   |                     |
| 34835 Exposure Of One Groin Artery With Creation Of Conduit 34845 Exposure Of One Art Anthery For Insertion Of Prosthesis, Open Procedure 34841 Supervision And Interpretation 34841 Supervision And Interpretation 34842 Radiological Supervision And Interpretation 34842 Radiological Supervision And Interpretation 34843 Radiological Supervision And Interpretation 34844 Industry Radiological Supervision And Interpretation 34845 Anter, Including Radiological Supervision And Interpretation 34845 Anter, Including Radiological Supervision And Interpretation 34846 Anter, Including Radiological Supervision And Interpretation 34847 Artery, Including Radiological Supervision And Interpretation 34848 Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through 34848 Repair Of Area in Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Antery, Including Radiological Supervision And Interpretation 34848 Repair Of Area and Anterpretation Anterpretation Anterpretation Anterpretation Anterpretation Anterpretation Anter                                   |        |   |                     |
| 34841 Exposure Of One Arm Artery For Insertion Of Prosthesis, Open Procedure Repair Of Aorta in Abdomen With Graft, Including a Graft in Artery To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 2 Grafts in Arteries To Abdominal Organs, Inserted Through Artery, Including 8 31,225.6 Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 3 Grafts in Arteries To Abdominal Organs, Inserted Through Artery, Including 34,848.2 Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 3 Grafts in Arteries To Abdominal Organs, Inserted Through Artery, Including Addiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 4 Or More Grafts in Arteries To Abdominal Organs, Inserted Through Artery, Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 1 Graft in Artery To Abdominal Organs, Inserted Through Artery, Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 2 Grafts in Arteries To Abdominal Organs, Inserted Through 3444 Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 2 Grafts in Arteries To Abdominal Organs, Inserted Through 3444 Aftery, Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 3 Grafts in Arteries To Abdominal Organs, Inserted Through 3444 Aftery, Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kitcheys With Graft, Including 3 Grafts in Arteries To Abdominal Organs, Inserted Through 3444 Aftery, Including Radiological Supervision And Interpretation Pictor Repair Of Anautysms, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 3500 Shebotava Artery, By Neck Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Carolicy Heaving Proceedings of Proces                                   |        |   | \$332.41            |
| 34841 Supervision And Interpretation  Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 34842 Radiological Supervision And Interpretation  Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 34843 Radiological Supervision And Interpretation  Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Actionation And Interpretation  Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Rediological Supervision And Interpretation  Repair Of Aorta In Abdomen Belower Kidneys With Graft, Including 1 Graft In Arteries To Abdominal Organs, Inserted Through Artery, Including Rediological Supervision And Interpretation  Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Added Artery, Including Rediological Supervision And Interpretation  Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Added Artery, Including Rediological Supervision And Interpretation  Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Artery, Including Additional Artery, Including Artery, Including Artery, Including                                    |        | · · ·   | \$109.74            |
| Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 81,275,68 Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Radiological Supervision And Interpretation St. Artery, Including Radiological Supervision And Interpretation St. And Associated Occlusive Disease, Carotid, Subclavian Artery, By Neck Incision St. And Associated Occlusive Disease, Carotid, Subclavian Artery, By Neck Incision Pieter Repair Of Aneurysm, Pesudoaneurysm, Of Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Associated Occlusive Disease, Vertebral Artery St. Arm Incision St. Artery, By Neck Incision Pieter Repair Of Aneurysm, Paste Aneurysm, Of Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Inmaminate, Subclavian Artery, By Thoracic Incision St. 1, 128,                                    |        |   |                     |
| 34842 Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Addiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, 18444 Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kidneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through Artery, 18444 Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Belewen And Below Kidneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through 34845 Artery, Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through 34846 Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through 34847 Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through 34847 Artery, Including Radiological Supervision And Interpretation Repair Of Aneurysm, Pesudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Direct Repair Of Aneurysm Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Vertebral Artery, By Arm Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Speudoaneurysm, And Associated Occlusive Disease, Radial Or Unit Artery, By Thoracic Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision                                    |        |   | \$1,129.86          |
| Repair Of Andta In Abdomen Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including 4848 Radiological Supervision And Interpretation \$1,441.9 Repair Of Aorta In Abdomen Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through Aftery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Aftery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Aftery Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Aftery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Aftery, Including Radiological Supervision And Interpretation Price Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Spot Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Axiliary-Brachial Artery, By Arm Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or To                                  |        |   |                     |
| 34843 Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Below Kidneys With Graft, Including 4 Or More Grafts in Arteries To Abdominal Organs, Inserted Through Artery, 14844 Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Belower And Below Kidneys With Graft, Including 1 Graft in Artery To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Repair Of Aoreurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Spotial And Associated Occulsive Diseases, Vertebral Artery Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occulsive Diseases, Innominate, Subclavian Artery, By Thoracic Incision Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Are Deviced Aneurysm, Area Associated Occulsive Disease, Innominate, Subclavian Artery, By Tho                                   | 34842  |   | \$1,275.68          |
| Repair Of Aorta in Abdomen Betwe Küneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery,  Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through  34845 Artery, Including Radiological Supervision And Interpretation  Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through  34846 Artery, Including Radiological Supervision And Interpretation  Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through  34846 Artery, Including Radiological Supervision And Interpretation  Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through  34847 Artery, Including Radiological Supervision And Interpretation  Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts in Arteries To Abdominal Organs, Inserted Through  34848 Through Artery, Including Radiological Supervision And Interpretation  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Vertebral Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Spotaled Occlusive Disease, Vertebral Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Rupurys                                   | 3/8/3  |   | \$1 <i>11</i> 1 07  |
| 34844 Including Radiological Supervision And Interpretation Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 1 Graft In Artery To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta in Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts in Arteries To Abdominal Organs, Inserted Through After Including Radiological Supervision And Interpretation Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Carotid, Subclavian Artery, By Neck Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Seption And Associated Occlusive Disease, Vertebral Artery Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Seption Present Conference of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Availary-Brachial Artery, By Arm Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Seption Brachial Artery, By Ham Incision Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Seption Braches, Availa                                   | 34043  | ů i   | Ψ1,441.31           |
| Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 1 Graft in Artery To Abdominal Organs, Inserted Through 3484 As Inters, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through 34840 Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through 34847 Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Vertebral Artery Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Spotal Antery, By Arm Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft In                                   | 34844  |   | \$1,539.97          |
| Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 2 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Pseudoaneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Vertebral Artery, By Arm Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary-Brachial Artery, By Arm Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary-Brachial Artery, By Thoracic Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graf                                   |        |   | • '                 |
| Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Joined Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Carotid, Solo2 Subclavian Artery, By Neck Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Septudoaneurysm, And Associated Occlusive Disease, Vertebral Artery Direct Repair Of Aneurysm, Psales Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Soloiated Occlusive Disease, Vertebral Artery, By Arm Incision Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Spatch Spatchaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery Spatch Spatchaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery Direct Re                                   |        |   | \$1,322.59          |
| Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 3 Grafts In Arteries To Abdominal Organs, Inserted Through Aftery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Carotid, Sp72.3 Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Carotid, Sp72.3 Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Vertebral Artery Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Nallary-Brachial Artery, By Arm Incision Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary-Brachial Artery, By Arm Incision Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Arman Associated Occlusive Disease, Radial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp65.3 Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,                                   |        |   |                     |
| Artery, Including Radiological Supervision And Interpretation Repair Of Aorta In Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Anteries To Abdominal Organs, Inserted  34848 Through Artery, Including Radiological Supervision And Interpretation Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Carotid, Sp71.9. Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Carotid, Sp72.3. Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp82.7. Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Sp72.3. Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Sp72.3. Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary- Sp73. Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary- Sp73. Sp73. Sp74. Sp74. Sp75. Sp74. Sp75. Sp                                   | 34846  | <i>y</i> , 0 0 1  | \$1,470.61          |
| Repair Of Antra in Abdomen Between And Below Kidneys With Graft, Including 4 Or More Grafts In Arteries To Abdominal Organs, Inserted Through Artery, Including Radiological Supervision And Interpretation Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Carotid, Sp71.9. Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Carotid, Sp72.3. Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Vertebral Artery Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm Axillary- Sp71.3. Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp81.3. Direct Repair Of Aneurysm Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Direct Repair Of Aneurysm Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp81.2. Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp82. Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp86.3. Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Direct Repair Of Aneurysm Or Excision (Partial Or                                    | 24947  |   | ¢4 404 20           |
| 34848 Through Artery, Including Radiological Supervision And Interpretation  \$1,539.1:  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Carotid,  \$972.33  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Carotid,  \$972.33  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Associated Occlusive Disease, Vertebral Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Vertebral Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary-  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Axillary-  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp. 1,101.40  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp. 1,258.3  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp. 2,227.50  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Sp. 2,                                | 34047  |   | \$1,494.39          |
| Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm \$971.9  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Carotid, Subclavian Artery, By Neck Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Vertebral Artery  Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Vertebral Artery  Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary-Bseudoaneurysm, Arillary-Bseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Speedoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Speedoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Speedoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Speedoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Speedoaneurysm, Or Excision Or Excision Or                                   | 34848  |   | \$1,539,14          |
| 35001 And Associated Occlusive Disease, Carotid, Subclavian Artery, By Neck Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Carotid, 35002 Subclavian Artery, By Neck Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35005 Pseudoaneurysm, And Associated Occlusive Disease, Vertebral Artery  Direct Repair Of Aneurysm, Fase Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And 35011 Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary- 35013 Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35021 Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Innominate, 35022 Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35045 Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35081 Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patc                                   |        |   | * 1,000111          |
| Subclavian Artery, By Neck Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Birect Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Axillary- Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Birect Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm,  Direct Repair Of Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  Direct Repair Or Excis                                   |        |   | \$971.92            |
| Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35005 Pseudoaneurysm, And Associated Occlusive Disease, Vertebral Artery  Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Axillary-35013 Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35021 Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35045 Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35045 Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35082 Aorta  Direct Repair Of Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving  35092 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  35103 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Arteries  351150 Direct Repair Or Excision                                    |        |   |                     |
| Sesudoaneurysm, And Associated Occlusive Disease, Vertebral Artery   Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision   Service Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Axillary-Brachial Artery, By Arm Incision   Service Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Axillary-Brachial Artery, By Arm Incision   Service Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision   Service Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Innominate, Subclavian Artery, By Thoracic Incision   Service Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery   Seadoaneurysm, And Associated Occlusive Disease, Abdominal Aorta   Service Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta   Service Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving   Service Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries   Service Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries   Service Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery  | 35002  |   | \$972.33            |
| Direct Repair Of Aneurysm, False Aneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm And Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Axillary-Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Speudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs  35092 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery  \$1,132.83  Direct Repair Or Excision Of Blood Collection In Wall Of Ao                                  | 25005  |   | <b>#050 70</b>      |
| Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Axillary- 35013 Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35021 Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Innominate, 35022 Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35045 Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35081 Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Abdominal 35082 Aorta  Direct Repair Of Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving 35091 Arteries To Abdominal Organs  Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin 35102 Arteries 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery 351130 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of S                                   | 35005  |   | \$852.76            |
| Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Axillary-35013 Brachial Artery, By Arm Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal Aorta  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving \$1,527.3.  35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  35103 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery  \$1,132.8.  | 35011  |   | \$871.31            |
| Stock   Structure   Stock  | 20011  |   | <b>437 1.01</b>     |
| Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35021 Pseudoaneurysm, And Associated Occlusive Disease, Innominate, Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Innominate, \$1,258.33  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35045 Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35081 Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, \$1,480.85  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal State Aorta  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving \$1,527.35  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  \$1,604.55  \$1,604.55  \$1,804.55  | 35013  |   | \$1,088.65          |
| Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Innominate, 35022 Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35045 Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35081 Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal 35082 Aorta  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving 35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs  S1,527.3 35102 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin 35102 Arteries  S1,64.5 35110 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Arteries  \$1,894.4 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery  \$1,132.8   |        | Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, |                     |
| Subclavian Artery, By Thoracic Incision  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35045 Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal S1,85082 Aorta  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving S1,527.3: S1092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin S102 Arteries S1,604.5: S1103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries S1,894.4: S111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery S1,132.8:  | 35021  |   | \$1,101.46          |
| Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35045 Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery  Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35081 Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal 35082 Aorta  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving 35091 Arteries To Abdominal Organs  S1,527.3: 35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs  S2,227.5: Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin 35102 Arteries  S1,604.5: 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  S1,894.4: 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery  S1,228:  | 0.5    |   | A                   |
| 35045   Pseudoaneurysm, And Associated Occlusive Disease, Radial Or Ulnar Artery   Sp65.3  | 35022  |   | \$1,258.37          |
| Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, 35081 Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal \$1,856.6i  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving \$1,527.3i  35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs \$2,227.5i  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  35102 Arteries \$1,604.5i  35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries \$1,894.4i  35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery \$1,132.8i  | 3504F  |   | ¢065.24             |
| 35081 Pseudoaneurysm, And Associated Occlusive Disease, Abdominal Aorta  Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal 35082 Aorta  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving 35091 Arteries To Abdominal Organs 35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin 35102 Arteries 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries 35103 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery 35112 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery 35113 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery 35113 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery 35114 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery 35115 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery 35116 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Or Spleen Artery 35117 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Or Spleen Artery   | 33043  |   | ψ900.51             |
| Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Abdominal 35082 Aorta  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving 35091 Arteries To Abdominal Organs  S1,527.33 35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin 35102 Arteries  35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  31,894.43 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery  \$1,32.83  | 35081  |   | \$1,480.89          |
| Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving 35091 Arteries To Abdominal Organs 35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs 52,227.5 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries 35102 Arteries 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries 35101 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries 35110 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery \$1,32.8:   |        |   | . ,                 |
| 35091 Arteries To Abdominal Organs  \$1,527.33 35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin  Arteries  \$1,604.53 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  \$1,894.43 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery  \$1,132.83   |        | Aorta   | \$1,856.60          |
| 35092 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Arteries To Abdominal Organs  Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin  41,604.53  35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries  31,894.43  35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery  \$1,132.83  |        |   |                     |
| Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin 35102 Arteries \$1,604.53 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries \$1,894.43 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery \$1,132.83   |        |   | \$1,527.32          |
| 35102 Arteries \$1,604.5: 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries \$1,894.4: 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery \$1,132.8:   | 35092  |   | \$2,227.58          |
| 35103 Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Aorta In Abdomen Involving Groin Arteries \$1,894.4 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery \$1,132.8   | 35102  |   | \$1 604 F2          |
| 35111 Direct Repair Or Excision Of Blood Collection In Wall Of Aorta (Pseudoaneurysm) Or Bulging (Aneurysm) Of Spleen Artery \$1,132.8:  |        |   |                     |
|  |        |   | \$1,132.82          |
|  |        |   | \$1,391.10          |

| Code  | Description   | Fee                      |
|-------|---|--------------------------|
| 35121 | Direct Repair Of Bulging (Aneurysm) Of Artery To Liver, Kidneys, Stomach, And/Or Intestines (Hepatic, Celiac, Renal, Or Mesenteric Artery)  | \$1,345.75               |
| 35122 | Direct Repair Or Excision Of Ruptured Bulging (Aneurysm) Of Artery To Liver, Kidneys, Stomach, And/Or Intestines (Hepatic, Celiac, Renal, Or Mesenteric Artery)   | \$1,608.09               |
| 35131 | Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Iliac Artery (Common, Hypogastric, External)                  | \$1,171.62               |
| 35132 | Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Iliac Artery (Common, Hypogastric, External)  | \$1,391.10               |
| 35141 | Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Common Femoral Artery (Profunda Femoris, Superficial Femoral) | \$941.65                 |
|       | Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Common Femoral Artery (Profunda Femoris, Superficial Femoral)   | \$1,135.93               |
|       | Direct Repair Of Aneurysm, Pseudoaneurysm, Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Aneurysm, Pseudoaneurysm, And Associated Occlusive Disease, Popliteal Artery  | \$1,060.14               |
| 35152 | Direct Repair Of Aneurysm Or Excision (Partial Or Total) And Graft Insertion, With Or Without Patch Graft; For Ruptured Aneurysm, Popliteal   | \$1,191.39               |
| 35180 | Repair, Congenital Arteriovenous Fistula; Head And Neck   | \$672.42                 |
|       | Repair, Congenital Arteriovenous Fistula; Thorax And Abdomen  Repair, Congenital Arteriovenous Fistula; Extremities   | \$1,560.12<br>\$824.58   |
|       | Repair, Acquired Or Traumatic Arteriovenous Fistula; Head And Neck  | \$1,098.85               |
|       | Repair, Acquired Or Traumatic Arteriovenous Fistula; Thorax And Abdomen   | \$1,285.62               |
|       | Repair, Acquired Or Traumatic Arteriovenous Fistula; Extremities  | \$666.76                 |
|       | Repair Blood Vessels Or A-V Fistula, Direct; Neck  Repair Blood Vessels Or A-V Fistula, Direct; Upper Extremity   | \$816.01<br>\$760.33     |
|       | Repair Blood Vessels Or A-V Fistula, Direct; Hand, Finger   | \$687.35                 |
|       | Repair Blood Vessels Or A-V Fistula, Direct; Intrathoracic, With Bypass   | \$1,218.69               |
|       | Repair Blood Vessels Or A-V Fistula, Direct; Intrathoracic, Without Bypass  | \$1,826.54               |
|       | Repair Blood Vessels Or A-V Fistula, Direct; Intra-Abdominal  | \$1,425.18               |
|       | Repair Blood Vessels Or A-V Fistula, Direct; Lower Extremity  Repair Blood Vessel Or A-V Fistula With Vein Graft; Neck  | \$800.29<br>\$1,113.66   |
|       | Repair Blood Vessel Or A-V Fistula With Vein Graft; Neck  Repair Blood Vessel Or A-V Fistula With Vein Graft; Upper Extremity   | \$1,113.66               |
|       | Repair Blood Vessel Or A-V Fistula With Vein Graft; Intrathoracic, With Bypass  | \$1,253.02               |
| 35246 | Repair Blood Vessel Or A-V Fistula With Vein Graft; Intrathoracic, Without Bypass   | \$1,361.42               |
|       | Repair Blood Vessel Or A-V Fistula With Vein Graft; Intra-Abdominal   | \$1,503.55               |
|       | Repair Blood Vessel Or A-V Fistula With Vein Graft; Lower Extremity   | \$1,018.40               |
|       | Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Neck  Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Upper Extremity   | \$838.12<br>\$830.74     |
|       | Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Intrathoracic, With Bypass   | \$1,205.40               |
| 35276 | Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Intrathoracic, Without Bypass  | \$1,201.75               |
|       | Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Intra-Abdominal  | \$1,401.30               |
|       | Repair Blood Vessel Or A-V Fistula With Graft Other Than Vein; Lower Extremity  | \$895.49                 |
|       | Removal Of Blood Clot And Portion Of Artery, By Neck Incision  Removal Of Blood Clot And Portion Of Artery, Superficial Femoral Artery  | \$1,079.03<br>\$1.069.47 |
|       | Removal Of Blood Clot And Portion Of Artery, Popliteal Artery   | \$1,058.36               |
|       | Removal Of Blood Clot And Portion Of Artery, Tibioperoneal Trunk Artery   | \$1,091.62               |
|       | Removal Of Blood Clot And Portion Of Artery, Tibial Or Peroneal Artery, Initial Vessel  | \$1,051.82               |
|       | Removal Of Blood Clot And Portion Of Artery, Tibial Or Peroneal Artery, Each Additional Artery  Removal Of Blood Clot And Portion Of Artery, By Thoracic Incision   | \$376.79                 |
|       | Thromboendarterectomy. With Or Without Patch Graft: Axillary-Brachial   | \$1,351.88<br>\$768.95   |
| 0002. | Thromboendarterectomy, With Or Without Patch Graft: Abdominal Aorta   | \$1,244.36               |
| 35341 | Thromboendarterectomy, With Or Without Patch Graft; Mesenteric, Celiac, Or Renal  | \$1,191.07               |
|       | Thromboendarterectomy, With Or Without Patch Graft; Iliac   | \$1,104.38               |
|       | Removal Of Blood Clot And Portion Of Artery Of Upper Thigh, Iliofemoral  Thromboundartescetomy, With Or Without Batch Graft, Combined Actollice   | \$979.66                 |
|       | Thromboendarterectomy, With Or Without Patch Graft; Combined Aortoiliac  Thromboendarterectomy, With Or Without Patch Graft; Combined Aortoiliofemoral  | \$1,296.33<br>\$1,382.59 |
|       | Removal Of Blood Clot And Portion Of Artery Of Upper Thigh Artery, Common   | \$779.24                 |
| 35372 | Removal Of Blood Clot And Portion Of Artery Of Upper Thigh Artery, Deep   | \$835.76                 |
|       | Reoperation, Carotid, Thromboendarterectomy, More Than One Month After Original Operation (List Separately In Addition To Code For Primary Procedure)   | \$135.29                 |
| 35400 | Examination Of Blood Vessel Or Graft Using An Endoscope  Harvest Of Upper Extremity Vein, One Segment, For Lower Extremity Or Coronary Artery Bypass Procedure (List Separately In Addition To  | \$125.59                 |
| 35500 | Code For Primary Procedure)   | \$270.51                 |
|       | Bypass Of Diseased Or Blocked Artery (Neck To Brain Artery), With Vein  | \$1,242.03               |
|       | Bypass Of Diseased Or Blocked Artery (Neck To Chest Artery), With Vein  | \$1,084.97               |
|       | Bypass Of Diseased Or Blocked Artery (Back Of Neck To Brain Artery), With Vein  | \$1,132.14               |
|       | Bypass Of Diseased Or Blocked Artery (Neck To Opposite Neck Artery), With Vein  Bypass Of Diseased Or Blocked Artery (Neck To Arm Artery), With Vein  | \$1,202.36<br>\$1,047.36 |
|       | Bypass Of Diseased Or Blocked Artery (Neck To Arthr Artery), With Vein  | \$954.68                 |
| 35512 | Bypass Of Diseased Or Blocked Artery (Chest To Arm Artery), With Vein   | \$1,026.81               |
|       | Bypass Of Diseased Or Blocked Artery (Chest To Brain Artery), With Vein   | \$1,132.14               |
|       | Bypass Of Diseased Or Blocked Artery (Chest To Upper Arm Artery), With Vein   | \$1,039.27               |
|       | Bypass Of Diseased Or Blocked Artery (Under Arm To Opposite Arm Artery), With Vein  Bypass Of Diseased Or Blocked Artery (Arm To Upper Leg Artery), With Vein   | \$972.93<br>\$1,047.88   |
|       | Bypass Of Diseased Or Blocked Artery (Arm 10 Opper Leg Artery), With Vein   | \$996.87                 |
|       | Bypass Of Diseased Or Blocked Artery (Upper Arm To Arm Artery), With Vein   | \$1,226.37               |
| 05505 | Bypass Of Diseased Or Blocked Artery (Upper Arm To Opposite Arm Artery), With Vein  | \$971.94                 |

| Codo  | Personinting   | Foo                      |
|-------|--|--------------------------|
|       | Description  Bypass Of Diseased Or Blocked Artery (Chest To Neck Artery), With Vein  | Fee<br>\$1,504.48        |
|       | Bypass Of Diseased Or Blocked Artery (Criest To Neck Artery), With Vein  | \$1,658.15               |
|       | Bypass Of Diseased Or Blocked Artery (Arm To Upper Leg And Opposite Leg Artery), With Vein   | \$1,283.66               |
|       | Bypass Of Diseased Or Blocked Artery (Liver To Kidney Artery), With Vein   | \$1,618.58               |
|       | Bypass Of Diseased Or Blocked Artery (Spleen To Kidney Artery), With Vein  | \$1,438.77               |
| 35537 | Bypass Of Diseased Or Blocked Artery (Aorta To Groin Artery), With Vein  | \$1,771.72               |
| 35538 | Bypass Of Diseased Or Blocked Artery (Aorta To Groin And Opposite Groin Artery), With Vein   | \$1,984.74               |
| 35539 | Bypass Of Diseased Or Blocked Artery (Aorta To Upper Leg Artery), With Vein  | \$1,862.77               |
| 35540 | Bypass Of Diseased Or Blocked Artery (Aorta To Upper Leg And Opposite Upper Leg Artery), With Vein   | \$2,075.17               |
|       | Bypass Of Diseased Or Blocked Artery (Upper To Lower Leg Artery), With Vein  | \$1,197.82               |
|       | Bypass Of Diseased Or Blocked Artery (Upper Leg To Opposite Upper Leg Artery), With Vein   | \$1,058.64               |
|       | Bypass Of Diseased Or Blocked Artery (Aorta To Kidney Artery), With Vein   | \$1,451.12               |
|       | Bypass Of Diseased Or Blocked Artery (Groin To Opposite Groin Artery), With Vein   | \$1,128.66               |
|       | Bypass Of Diseased Or Blocked Artery (Groin To Upper Leg Artery), With Vein  | \$1,248.46               |
|       | Bypass Of Diseased Or Blocked Artery (Upper Leg To Lower Leg Artery), With Vein  | \$1,583.90               |
|       | Bypass Of Diseased Or Blocked Artery (Lower Leg To Opposite Lower Leg Artery), With Vein   | \$1,255.78               |
|       | Bypass Of Diseased Or Blocked Artery (Lower Leg To Lower Leg Artery), With Vein  Harvest Of Vein Segment (Upper Leg To Thigh), One Segment                                     | \$1,135.11               |
| 35572 | naivest of vein Segment (Opper Leg 10 Triign), one Segment   | \$293.76                 |
| 35583 | Bypass Of Diseased Or Blocked Artery By Insertion Of Vein Graft From Artery Of Thigh To Artery Of Knee (Femoral-Popliteal Bypass)  | \$1,232.39               |
| 00000 | Bypass of Diseased Or Blocked Artery By Insertion Of Vein Graft From Artery Of Thigh To Artery Of Lower Leg (Femoral-Anterior Tibial,  | Ψ1,202.00                |
| 35585 | Posterior Tibial, Or Peroneal Artery Bypass)   | \$1,428.36               |
|       | Bypass Of Diseased Or Blocked Artery By Insertion Of Vein Graft From Artery Of Knee To Artery Of Lower Leg (Popliteal-Tibial Or Peroneal                                       | ,,,==100                 |
| 35587 | Artery Bypass)   | \$1,157.56               |
|       | Harvest Of An Arm Artery Segment, One Segment  | \$178.35                 |
| 35601 | Bypass Of Diseased Or Blocked Artery (Neck To Brain Artery), Other Than Vein   | \$1,199.64               |
|       | Bypass Of Diseased Or Blocked Artery (Neck To Chest Artery), Other Than Vein   | \$1,005.34               |
|       | Bypass Of Diseased Or Blocked Artery (Chest To Opposite Chest Artery), Other Than Vein   | \$893.20                 |
|       | Bypass Of Diseased Or Blocked Artery (Chest To Upper Arm Artery), Other Than Vein  | \$938.71                 |
|       | Bypass Of Diseased Or Blocked Artery (Arm To Chest Artery), Other Than Vein  | \$1,045.68               |
|       | Bypass Of Diseased Or Blocked Artery (Arm To Lower Leg Artery), Other Than Vein  | \$1,120.79               |
|       | Bypass Of Diseased Or Blocked Artery (Arm To Lower Thigh Or Leg Artery), Other Than Vein   | \$1,384.69               |
|       | Bypass Of Diseased Or Blocked Artery (Aorta To Abdominal Or Kidney Artery), Other Than Vein  | \$1,578.85               |
|       | Bypass Of Diseased Or Blocked Artery (Groin To Stomach Artery, Eg Ilio-Celiac), Other Than Vein  | \$1,537.15               |
|       | Bypass Of Diseased Or Blocked Artery (Groin To Abdominal Artery), Other Than Vein  | \$1,690.49               |
|       | Bypass Of Diseased Or Blocked Artery (Groin To Stomach Artery, Eg Iliorenal), Other Than Vein  Bypass Of Diseased Or Blocked Artery (Spleen To Kidney Artery), Other Than Vein | \$1,504.46               |
|       | Bypass Of Diseased Or Blocked Artery (Aprile 11 or Kidney Artery), Other Than Vein   | \$1,358.00<br>\$1,411.87 |
|       | Bypass Of Diseased Or Blocked Artery (Aorta To Groin To Opposite Groin Artery), Other Than Vein  | \$1,485.04               |
|       | Bypass Of Diseased Or Blocked Artery (Rack Of Neck To Brain Artery), Other Than Vein   | \$845.96                 |
|       | Bypass of Diseased Or Blocked Artery (Chest To Arm Artery), Other Than Vein  | \$809.92                 |
|       | Bypass of Diseased Or Blocked Artery (Aorta To Upper Leg And Opposite Upper Leg Artery), Other Than Vein   | \$1,461.54               |
|       | Bypass Of Diseased Or Blocked Artery (Aorta To Upper Leg Artery), Other Than Vein  | \$1,328.07               |
|       | Bypass Of Diseased Or Blocked Artery (Under Arm To Opposite Arm Artery), Other Than Vein   | \$871.50                 |
|       | Bypass Of Diseased Or Blocked Artery (Arm To Both Lower Thigh Arteries), Other Than Vein   | \$1,300.20               |
|       | Bypass Of Diseased Or Blocked Artery (Upper Leg To Lower Thigh Artery), Other Than Vein  | \$1,026.35               |
| 35661 | Bypass Of Diseased Or Blocked Artery (Upper Leg To Opposite Upper Leg Artery), Other Than Vein   | \$1,035.78               |
| 35663 | Bypass Of Diseased Or Blocked Artery (Groin To Opposite Groin Artery), Other Than Vein   | \$1,039.68               |
|       | Bypass On Diseased Or Blocked Groin To Upper Leg Artery, Other Than Vein   | \$1,006.64               |
|       | Bypass Of Diseased Or Blocked Artery (Upper Leg To Lower Leg Arteries), Other Than Vein  | \$1,112.13               |
|       | Bypass Of Diseased Or Blocked Artery (Knee To Lower Leg Arteries), Other Than Vein   | \$980.89                 |
|       | Bypass Of Diseased Or Blocked Artery, Composite  | \$67.87                  |
|       | Bypass Of Diseased Or Blocked Artery, Composite, 2 Veins   | \$300.13                 |
| 35683 | Bypass Of Diseased Or Blocked Artery, Composite, 3 Or More Veins   | \$346.08                 |
| 3560F | Placement Of Vein Patch Or Cuff At Distal Anastomosis Of Bypass Graft, Synthetic Conduit (List Separately In Addition To Code For Primary Procedure)                           | \$167.99                 |
| 33005 | Creation Of Distal Arteriovenous Fistula During Lower Extremity Bypass Surgery (Non-Hemodialysis) (List Separately In Addition To Code For                                     | φισι.99                  |
| 35686 | Primary Procedure)   | \$136.21                 |
|       | Transposition And/Or Reimplantation; Vertebral To Carotid Artery   | \$809.27                 |
|       | Transposition And/Or Reimplantation; Vertebral To Subclavian Artery  | \$717.30                 |
|       | Transposition And/Or Reimplantation; Subclavian To Carotid Artery  | \$938.43                 |
|       | Transposition And/Or Reimplantation; Carotid To Subclavian Artery  | \$876.38                 |
|       | ·  |                          |
| 35697 | Reimplantation, Visceral Artery To Infrarenal Aortic Prosthesis, Each Artery (List Separately In Addition To Code For Primary Procedure)                                       | \$124.70                 |
|       | Reoperation, Femoral-Popliteal Or Femoral (Popliteal) -Anterior Tibial, Posterior Tibial, Peroneal Artery Or Other Distal Vessels, More Than One                               |                          |
|       | Month After Original Operation (List Separately In Addition To Code For Primary Procedure)   | \$143.30                 |
|       | Exploration Of Artery Of Neck  | \$393.67                 |
|       | Exploration Of Artery Of Arm   | \$356.33                 |
|       | Exploration Of Artery Of Leg   | \$408.45                 |
|       | Exploration Of Neck For Postsurgical Bleeding, Blood Clot, Or Infection  | \$484.45                 |
|       | Exploration Of Chest For Postsurgical Bleeding, Blood Clot, Or Infection   | \$1,280.59               |
|       | Exploration Of Abdomen For Postsurgical Bleeding, Blood Clot, Or Infection  Exploration Of Arm Or Leg For Postsurgical Bleeding, Blood Clot, Or Infection                      | \$793.23                 |
|       | Exploration Of Arm Or Leg For Postsurgical Bleeding, Blood Clot, Or Infection  | \$680.68                 |
|       | Repair Of Graft-Enteric Fistula Thrombectomy Of Arterial Or Venous Graft (Other Than Hemodialysis Graft Or Fistula);   | \$1,065.26<br>\$570.59   |
|       | Thrombectomy Of Arterial Or Venous Graft (Other Than Hernodialysis Graft Or Fistula),  Thrombectomy Of Arterial Or Venous Graft; With Revision Of Arterial Or Venous Graft     | \$812.86                 |
|       | Revision Of Arterial Bypass Of Leg With Placement Of Vein Patch, Open Procedure  | \$792.57                 |
| 55019 | Transist of Automat Bypaso of Log Will Flacomont of Voll Flaton, Opon Floodulo   | Ψ132.31                  |

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|---|--|---|
|   | Description Revision Of Arterial Bypass Of Leg With Placement Of Relocated Vein, Open Procedure  | Fee<br>\$876.96   |
|   | Revision of Arterial Bypass of Groin With Placement Synthetic Graft, Open Procedure  | \$1,029.44  |
|   | Revision Of Arterial Bypass Of Groin With Vein Patch Graft, Open Procedure   | \$1,055.57  |
|   | Excision of Infected Graft; Neck   | \$412.56  |
|   | Excision Of Infected Graft: Extremity  | \$495.09  |
|   | Excision of Infected Graft; Thorax   | \$1,430.58  |
|   | Excision Of Infected Graft: Abdomen  | \$1,630.65  |
|   | Introduction of Needle Or Intracatheter, Vein  | \$0.01  |
|   | Injection To Cause Blood Clot In A Diseased Or Bulging Vessel Of Arm Or Leg, Accessed Through The Skin   | \$155.18  |
|   | Injection Procedure For Extremity Venography (Including Introduction Of Needle Or Intracatheter)   | \$285.19  |
|   | Introduction Of Catheter, Superior Or Inferior Vena Cava   | \$604.47  |
|   | Insertion Of Catheter Into Vein, First Order Branch  | \$597.41  |
|   | Insertion Of Catheter Into Vein, Second Order Branch   | \$610.53  |
|   | Introduction Of Catheter, Right Heart Or Main Pulmonary Artery   | \$783.37  |
|   | Selective Catheter Placement, Left Or Right Pulmonary Artery   | \$580.27  |
|   | Selective Catheter Placement, Each Segmental Or Subsegmental Pulmonary Artery  | \$773.33  |
|   | Introduction of Needle or Intracatheter, Carotid or Vertebral Artery   | \$533.17  |
|   | Insertion Of Needle Or Catheter Into An Artery Of Arm Or Leg   | \$375.60  |
|   | Introduction of Needle Or Intracatheter, Aortic, Translumbar   | \$555.89  |
|   | Introduction Of Catheter, Aorta  | \$532.04  |
|   | Insertion Of Catheter Into Chest Or Arm Artery, Each First Order Branch  | \$757.06  |
|   | Insertion Of Catheter Into Chest Or Arm Artery, Initial Second Order Branch  | \$772.22  |
|   | Insertion Of Catheter Into Chest Or Arm Artery, Initial Third Order Branch   | \$1,284.65  |
|   | Insertion of Catheter Into Chest Or Arm Artery, Initial Thild Order Dialicit  Insertion Of Catheter Into Chest Or Arm Artery, Additional Second, Third Order And Beyond  | \$1,284.63  |
| 30210   | Non-Selective Catheter Placement, Thoracic Aorta, With Angiography Of The Extracranial Carotid, Vertebral, And/Or Intracranial Vessels,  | ψ157.01   |
| 36221   | Unilateral Or Bilateral, And All Associated Radiological Supervision And Interpretation, Includes Angiography Of The   | \$1,094.42  |
| 33221   | Insertion Of Catheter Into Extracranial Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And   | ψ1,001.72   |
| 36222   | Interpretation   | \$1,185.06  |
|   | Insertion Of Catheter Into Intracranial Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And   | <b>\$1,100100</b>   |
| 36223   | Interpretation   | \$1,748.13  |
|   | Insertion Of Catheter Into Internal Carotid Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And   | <b>\$1,110.10</b>   |
| 36224   | Interpretation   | \$2,028.06  |
|   | Coloring Catholica Discourage Catholica Octooring to Annu. United and With Americanship Of The Indiatoral Vertained Circulation And All  |   |
| 20225   | Selective Catheter Placement, Subclavian Or Innominate Artery, Unilateral, With Angiography Of The Ipsilateral Vertebral Circulation And All   | ¢4.050.05   |
|   | Associated Radiological Supervision And Interpretation, Includes Angiography Of The Cervicocerebral Arch, When P Radiological Supervision And Interpretation, Includes Angiography Of The Cervicocerebral Arch, When Performed   | \$1,656.95  |
| 30220   | Insertion Of Catheter Into External Carotid Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And   | \$2,068.11  |
| 26227   | Interpretation   | \$242.89  |
| 30227   | merpretation   | φ242.09   |
|   | Selective Catheter Placement, Each Intracranial Branch Of The Internal Carotid Or Vertebral Arteries, Unilateral, With Angiography Of The  |   |
|   | Selected Vessel Circulation And All Associated Radiological Supervision And Interpretation (Eg, Middle Cerebral Artery, Post   | \$1,419.21  |
|   | Insertion Of Catheter Into Abdominal Pelvic Or Leg Artery, Each First Order Branch   | \$909.74  |
|   | Insertion Of Catheter Into Abdominal Pelvic Or Leg Artery, Initial Second Order Branch   | \$602.44  |
|   | Insertion Of Catheter Into Abdominal Pelvic Or Leg Artery, Initial Third Order Branch  | \$1,577.88  |
| 36248   |  | \$83.41   |
|   | Selective Insertion Of Catheters Into Main And Accessory Arteries Of One Kidney For Imaging Including Radiological Supervision And   |   |
| 36251   | Interpretation   | \$1,427.62  |
|   | Colorio Colorio Diagnos (For Color) Mr. Doul Arra And Ana Anna Doul Arra (O) For Doul Ancient  |   |
| 20252   | Selective Catheter Placement (First-Order), Main Renal Artery And Any Accessory Renal Artery(S) For Renal Angiography, Including Arterial  |   |
| 36252   | Puncture And Catheter Placement(S), Fluoroscopy, Contrast Injection(S), Image Postprocessing, Permanent Recording Of Image  Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of One Kidney For Imaging Including Radiological  | Ø4 500 00   |
| 36353   | A SUBJECTIVE INSERTION FOR CONTRACTOR SECONDS FOR ENGINEERING BRANCINGS FOR ARREST FOR IMPAINATIONAL PROBLEMS IN A SOCIETA FOR ENGINEERING PROBLEM | \$1,526.63  |
|   |  | ,   |
| 30233   | Supervision And Interpretation   |   |
|   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological   | \$2,243.96  |
| 36254   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation  | \$2,243.96<br>\$1,981.42  |
| 36254<br>36260  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver)  | \$2,243.96<br>\$1,981.42<br>\$587.59  |
| 36254<br>36260<br>36261   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82  |
| 36254<br>36260<br>36261<br>36262  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump   | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54  |
| 36254<br>36260<br>36261<br>36262<br>36299   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report   |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49  |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49  |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36406  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$24.96<br>\$18.29  |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36406  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$24.96<br>\$18.29<br>\$18.42   |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36406<br>36410<br>36415  | Supervision And Interpretation  Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver)  Revision Of Implanted Infusion Pump  Removal Of Implanted Infusion Pump  Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older  Collection Of Venous Blood By Venipuncture  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$24.96<br>\$18.29<br>\$18.42<br>\$8.83   |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36406<br>36410<br>36415<br>36416   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample   | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$24.96<br>\$18.29<br>\$18.42<br>\$8.83<br>\$4.66   |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36406<br>36410<br>36415<br>36416<br>36420  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year)  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$24.96<br>\$18.29<br>\$18.42<br>\$8.83<br>\$4.66  |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36405<br>36416<br>36416<br>36416<br>36420<br>36425   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older)   | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$24.96<br>\$18.29<br>\$18.42<br>\$8.83<br>\$4.66<br>\$40.97   |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36406<br>36416<br>36416<br>36420<br>36425<br>36430   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$18.29<br>\$18.42<br>\$8.83<br>\$4.66<br>\$40.97   |
| 36254<br>36260<br>36261<br>36262<br>36293<br>36400<br>36405<br>36406<br>36415<br>36416<br>36420<br>36420<br>36430<br>36430  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger)  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$18.29<br>\$18.42<br>\$8.83<br>\$4.66<br>\$40.97<br>\$36.46  |
| 36254<br>36260<br>36261<br>36262<br>36293<br>36400<br>36405<br>36416<br>36416<br>36420<br>36425<br>36430<br>36440<br>36450  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn  | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$18.29<br>\$18.42<br>\$8.83<br>\$4.66<br>\$40.97<br>\$36.46<br>\$40.97   |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36410<br>36415<br>36416<br>36420<br>36425<br>36430<br>36450  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn   | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$18.29<br>\$18.29<br>\$18.42<br>\$8.83<br>\$4.66<br>\$40.97<br>\$36.46<br>\$40.58<br>\$47.02<br>\$159.53         |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36416<br>36415<br>36416<br>36420<br>36425<br>36430<br>36450<br>36455   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Newborn   | \$2,243.96<br>\$1,981.42<br>\$587.59<br>\$371.82<br>\$284.54<br>Price By Report<br>\$28.49<br>\$18.29<br>\$18.42<br>\$8.83<br>\$4.66<br>\$40.97<br>\$36.46<br>\$40.58<br>\$47.02<br>\$159.53<br>\$108.51        |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36416<br>36415<br>36416<br>36420<br>36425<br>36430<br>36440<br>36450<br>36456<br>36456<br>36456                            | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Newborn Intrauterine Fetal Transfusion  | \$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$198.51  |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36416<br>36416<br>36425<br>36430<br>36455<br>36456<br>36460<br>36465   | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Newborn Intrauterine Fetal Transfusion Injection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance  | \$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$24.96 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$47.02 \$159.53 \$108.51 \$90.96 \$308.76   |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36410<br>36415<br>36416<br>36450<br>36450<br>36450<br>36456<br>36460<br>36466  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Other Than Newborn Infrauterine Fetal Transfusion Injection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Multiple Incompetent Vein Of Same Leg Using Ultrasound Guidance  | \$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$24.96 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51 \$90.96 \$308.76 \$1,468.70                    |
| 36254<br>36260<br>36261<br>36262<br>36299<br>36400<br>36405<br>36410<br>36415<br>36416<br>36420<br>36450<br>36455<br>36456<br>36466<br>36466  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Removal Of Implantable Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Year) Incision Of Vein For Insertion Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Newborn Intrauterine Fetal Transfusion Ingection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Multiple Incompetent Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Arm, Leg, Or Trunk  | \$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51 \$990.96 \$308.76 \$1,459.34 Price By Report           |
| 36254<br>36260<br>36261<br>36262<br>36293<br>36400<br>36405<br>36416<br>36416<br>36420<br>36455<br>36455<br>36456<br>36456<br>36466<br>36468  | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Intra-Arterial Infusion Pump Removal Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Removal Of Implanted Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient 3 Years Or Older Collection Of Venous Blood By Venipuncture Puncture Of Skin For Collection Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Slood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Other Than Newborn Partial Exchange Transfusion, Other Than Newborn Intrauterine Fetal Transfusion Injection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Single Incompetent Vein Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Single Incompetent Vein Of Same Leg Using Ultrasound Guidance   | \$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51 \$90.96 \$308.76 \$1,468.70 \$1,459.34 Price By Report |
| 36254<br>36260<br>36261<br>36262<br>36293<br>36400<br>36405<br>36416<br>36415<br>36420<br>36455<br>36456<br>36456<br>36466<br>36466<br>36468<br>36460<br>36466<br>36468<br>36470<br>36471 | Supervision And Interpretation Superselective Insertion Of Catheters Into Second- Or Third-Order Branches Of Arteries Of Both Kidneys For Imaging Including Radiological Supervision And Interpretation Insertion Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Revision Of Implantable Intra-Arterial Infusion Pump (Eg, For Chemotherapy Of Liver) Removal Of Implantable Infusion Pump Unlisted Procedure, Vascular Injection Insertion Of Needle Into Upper Leg Or Neck Vein, Patient Younger Than 3 Years Insertion Of Needle Into Scalp Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 3 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Years Insertion Of Needle Into Vein, Patient Younger Than 1 Year) Incision Of Vein For Insertion Of Blood Sample Incision Of Vein For Insertion Of Needle Or Tube (Younger Than 1 Year) Incision Of Vein For Insertion Of Needle Or Tube (1 Year Or Older) Transfusion Of Blood Or Blood Products Push Blood Transfusion (2 Years Or Younger) Exchange Blood Transfusion, Newborn Exchange Blood Transfusion, Newborn Intrauterine Fetal Transfusion Ingection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Multiple Incompetent Veins Of Same Leg Using Ultrasound Guidance Injection Of Chemical Agent Into Spider Veins Of Arm, Leg, Or Trunk  | \$2,243.96 \$1,981.42 \$587.59 \$371.82 \$284.54 Price By Report \$28.49 \$18.29 \$18.42 \$8.83 \$4.66 \$40.97 \$36.46 \$40.58 \$47.02 \$159.53 \$108.51 \$90.96 \$308.76 \$1,459.34 Price By Report            |

| 36474  | Description  | Fee  |
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| 30474  | Mechanochemical Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance, Subsequent Vein(S)   | \$249.46   |
|  | Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin  | \$1,186.57   |
|  | Radiofrequency Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance  | \$302.24   |
| 36478  | Laser Destruction Of Incompetent Vein Of Arm Or Leg Using Imaging Guidance, Accessed Through The Skin  | \$1,081.16   |
| 36479  | Laser Destruction Of Insufficient Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance   | \$286.18   |
|  | Insertion Of Catheter Into Portal Vein Of Liver, Accessed Through The Skin   | \$1,277.34   |
|  | Chemical Destruction Of Incompetent Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance   | \$1,866.60   |
|  | Chemical Destruction Of Incompetent Vein Of Arm Or Leg, Accessed Through The Skin Using Imaging Guidance, Subsequent Vein(S)   | \$146.16   |
|  | Venous Catheterization For Selective Organ Blood Sampling  | \$149.34   |
|  | Insertion Of Catheter Into Vein Of Navel, Newborn Therapeutic Apheresis; For White Blood Cells   | \$90.04<br>\$102.89  |
|  | Therapeutic Apheresis; For Red Blood Cells  Therapeutic Apheresis; For Red Blood Cells   | \$102.89   |
|  | Therapeutic Apheresis; For Platelets   | \$97.22  |
|  | Therapeutic Apheresis: For Plasma Pheresis   | \$620.21   |
|  | Mechanical Separation Of Plasma And Abnormal Antibodies From Blood   | \$1,781.23   |
| 36522  | Photopheresis, Extracorporeal  | \$1,365.61   |
| 36555  | Insertion Of Central Venous Catheter For Infusion, Patient Younger Than 5 Years, Not Tunneled  | \$204.54   |
| 36556  | Insertion Of Central Venous Catheter For Infusion, Patient 5 Years Or Older, Not Tunneled  | \$230.97   |
| 36557  | Insertion Of Central Venous Catheter For Infusion, Patient Younger Than 5 Years, Tunneled  | \$922.33   |
|  | Insertion Of Central Venous Catheter For Infusion, Patient 5 Years Or Older, Tunneled  | \$923.74   |
|  | Insertion Of Central Venous Catheter And Implanted Device For Infusion Beneath The Skin, Patient Younger Than 5 Years  | \$1,159.02   |
|  | Insertion Of Central Venous Catheter And Implanted Device For Infusion Beneath The Skin, Patient 5 Years Or Older  | \$1,091.17   |
|  | Insertion Of Tunneled Centrally Inserted Central Venous Access Device With Subcutaneous Pump   | \$1,111.10   |
|  | Insertion Of Central Venous Catheters For Infusion, Two Catheters In Two Veins   | \$807.79   |
|  | Insertion Of Central Venous Catheters, Two Catheters In Two Veins, And Implanted Devices For Infusion Beneath The Skin   | \$4,346.10   |
|  | Insertion Of Peripherally Inserted Central Venous Catheter For Infusion (Picc), Patient Younger Than 5 Years   | \$92.03  |
|  | Insertion Of Peripherally Inserted Central Venous Catheter For Infusion (Picc), Patient 5 Years Or Older   | \$93.87<br>\$1.190.35  |
|  | Insertion Of Central Venous Catheter For Infusion With Port Beneath The Skin, Patient Younger Than 5 Years Insertion Of Central Venous Catheter For Infusion With Port Beneath The Skin, Patient 5 Years Or Older  | \$1,190.35   |
|  | Insertion of Central Venous Catheter For Infusion Using Imaging Guidance, Patient Younger Than 5 Years   | \$358.76   |
|  | Insertion Of Central Venous Catheter For Infusion Using Imaging Guidance, Patient 1 Streams Or Older   | \$393.58   |
|  | Repair Of Central Venous Catheter For Infusion Without A Port Or Pump  | \$164.87   |
|  | Repair Of Central Venous Catheter For Infusion With A Port Or Pump   | \$335.14   |
|  | Replacement Of Central Venous Catheter Device  | \$425.85   |
|  | Replacement Of Central Venous Catheter, Non-Tunneled Without Port Or Pump  | \$207.45   |
| 36581  | Replacement Of Central Venous Catheter, Tunneled Without Port Or Pump  | \$789.56   |
| 36582  | Replacement Of Central Venous Catheter, Tunneled With Port Or Pump   | \$977.39   |
| 36583  | Replacement Of Central Venous Catheter, Non-Tunneled With Port Or Pump   | \$1,150.96   |
| 36584  | Replacement Of Catheter In Peripheral Vein Accessed Through Same Vein  | \$242.17   |
|  |  |  |
|  | Replacement, Complete, Of A Peripherally Inserted Central Venous Access Device, With Subcutaneous Port, Through Same Venous Access   | \$1,168.61   |
|  | Removal Of Tunneled Central Venous Catheter, Without Subcutaneous Port Or Pump   | \$172.03   |
|  | Removal Of Tunneled Central Venous Access Device, With Subcutaneous Port Or Pump, Central Or Peripheral Insertion  Collection Of Blood Specimen From A Completely Implantable Venous Access Device   | \$230.77   |
|  | Collection Of Blood Specimen Profit A Completely Implantable Vehicus Access Device  Collection Of Blood Specimen Using Established Central Or Peripheral Catheter, Venous, Not Otherwise Specified   | \$23.12<br>\$25.44   |
|  | Declotting By Thrombolytic Agent Of Implanted Vascular Access Device Or Catheter   | \$28.15  |
| 30333  | becoming by Thiomboyate Agent of Implanted Vascular Access bevice of Galinetei   | Ψ20.13   |
| 36595  | Mechanical Removal Of Pericatheter Obstructive Material (Eg, Fibrin Sheath) From Central Venous Device Via Separate Venous Access  | \$592.54   |
|  | Mechanical Removal Of Intraluminal (Intracatheter) Obstructive Material From Central Venous Device Through Device Lumen  |  |
| 36596  |  | \$109.39   |
|  | Repositioning Of Previously Placed Central Venous Catheter Under Fluoroscopic Guidance   | 4  |
|  | Repositioning Of Previously Placed Central Venous Catheter Under Fluoroscopic Guidance  Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And   | \$109.39   |
| 36597<br>36598   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  | \$109.39<br>\$117.79<br>\$119.27   |
| 36597<br>36598<br>36600  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94  |
| 36597<br>36598<br>36600<br>36620   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis  Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74   |
| 36597<br>36598<br>36600<br>36620<br>36625  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis  Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis  Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown  Insertion Of Catheter Into Artery For Prolonged Infusion Therapy   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90  |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660<br>36680   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660<br>36680<br>36800  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660<br>36680<br>36800<br>36810   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660<br>36680<br>36800<br>36810<br>36815  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$112.84<br>\$192.93   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660<br>36680<br>36800<br>36810<br>36815<br>36818   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660<br>36680<br>36800<br>36815<br>36818<br>36818   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$112.84<br>\$192.93   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660<br>36800<br>36810<br>36815<br>36818<br>36819<br>36820  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connection Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36660<br>36800<br>36810<br>36815<br>36818<br>36819<br>36820  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis  Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown  Insertion Of Catheter Into Artery For Prolonged Infusion Therapy  Insertion Of Catheter Into An Artery In Navel, Newborn  Placement Of Needle For Intraosseous Infusion  Insertion Of Cannula Connecting Vein To Vein  Insertion Of Cannula Connecting Artery To Vein  Repositioning Or Removal Of Cannula Connecting Artery To Vein  Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein  Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein  Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44   |
| 36598<br>36600<br>36620<br>36625<br>36640<br>36680<br>36880<br>36810<br>36815<br>36818<br>36819<br>36821   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Any Site As Separate Procedure   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44   |
| 36598<br>36600<br>36620<br>36620<br>36640<br>36660<br>36800<br>36810<br>36815<br>36818<br>36819<br>36820<br>36821  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Any Site As Separate Procedure Insertion Of Arterial And Venous Cannula(S) For Isolated Extracorporeal Circulation Including Regional Chemotherapy Perfusion To An   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44<br>\$692.34   |
| 36597<br>36598<br>36600<br>36620<br>36625<br>36640<br>36680<br>36800<br>36815<br>36815<br>36818<br>36820<br>36821  | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arterial And Venous Cannula(S) For Isolated Extracorporeal Circulation Including Regional Chemotherapy Perfusion To An Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological  | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44<br>\$692.34<br>\$637.72<br>\$1,244.22<br>\$687.91   |
| 36597<br>36598<br>36600<br>36620<br>36620<br>36640<br>36660<br>36800<br>36815<br>36815<br>36815<br>36819<br>36823<br>36823<br>36823                            | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis  Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown  Insertion Of Catheter Into Artery For Prolonged Infusion Therapy  Insertion Of Catheter Into An Artery In Navel, Newborn  Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein  Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein  Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein  Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Any Site As Separate Procedure Insertion Of Arterial And Venous Cannula(S) For Isolated Extracorporeal Circulation Including Regional Chemotherapy Perfusion To An Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft)   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44<br>\$692.34<br>\$637.72<br>\$1,244.22<br>\$687.91   |
| 36597<br>36598<br>36600<br>36620<br>36620<br>36640<br>36660<br>36800<br>36815<br>36815<br>36815<br>36819<br>36821<br>36823<br>36823<br>36823                   | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn  Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arterial And Venous Cannula(S) For Isolated Extracorporeal Circulation Including Regional Chemotherapy Perfusion To An Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft) Removal Of Blood Clot From Dialysis Graft, Open Procedure   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44<br>\$692.34<br>\$637.72<br>\$1,244.22<br>\$687.91   |
| 36598<br>36600<br>36620<br>36620<br>36640<br>36660<br>36800<br>36810<br>36815<br>36818<br>36818<br>36823<br>36823<br>36823<br>36823<br>36831<br>36831          | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Any Site As Separate Procedure Insertion Of Arterial And Venous Cannula(S) For Isolated Extracorporeal Circulation Including Regional Chemotherapy Perfusion To An Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft) Removal Of Blood Clot From Dialysis Graft, Open Procedure Revision Of Dialysis Graft, Open Procedure | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44<br>\$692.34<br>\$637.72<br>\$687.91<br>\$641.73<br>\$533.40<br>\$728.39                           |
| 36598<br>36600<br>36620<br>36625<br>36640<br>36680<br>36880<br>36810<br>36815<br>36818<br>36819<br>36822<br>36823<br>36825<br>36830<br>36831<br>36832<br>36833 | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheter Into Artery For Polonged Infusion Therapy Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery, Open Procedure, Upper Arm, Cephalic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Porearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Any Site As Separate Procedure Insertion Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft) Removal Of Blood Clot From Dialysis Graft, Open Procedure Revision Of Dialysis Graft With Removal Of Blood Cot, Open Procedure   | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44<br>\$692.34<br>\$637.72<br>\$1,244.22<br>\$687.91<br>\$641.73<br>\$533.40<br>\$728.39<br>\$728.78 |
| 36597<br>36598<br>36600<br>36620<br>36640<br>36660<br>36800<br>36815<br>36818<br>36819<br>36821<br>36823<br>36823<br>36833<br>36833<br>36833<br>36833          | Contrast Injection(S) For Radiologic Evaluation Of Existing Central Venous Access Device, Including Fluoroscopy, Image Documentation And Report  Arterial Puncture, Withdrawal Of Blood For Diagnosis Insertion Of Arterial Catheter For Blood Sampling Or Infusion, Accessed Through The Skin  Arterial Catheterization Or Cannulation For Sampling, Monitoring Or Transfusion (Separate Procedure); Cutdown Insertion Of Catheter Into Artery For Prolonged Infusion Therapy Insertion Of Catheter Into An Artery In Navel, Newborn Placement Of Needle For Intraosseous Infusion Insertion Of Cannula Connecting Vein To Vein Insertion Of Cannula Connecting Artery To Vein Repositioning Or Removal Of Cannula Connecting Artery To Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Cephalic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Upper Arm, Basilic Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Forearm Vein Relocation Of Arm Vein With Connection To Arm Artery, Open Procedure, Any Site As Separate Procedure Insertion Of Arterial And Venous Cannula(S) For Isolated Extracorporeal Circulation Including Regional Chemotherapy Perfusion To An Extremity, With Or Without Hyperthermia, With Removal Of Cannula(S) And Repair Of Arteriotomy And Venotomy Sites Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Autogenous Graft Creation Of Arteriovenous Fistula By Other Than Direct Arteriovenous Anastomosis (Separate Procedure); Nonautogenous Graft (Eg, Biological Collagen, Thermoplastic Graft) Removal Of Blood Clot From Dialysis Graft, Open Procedure Revision Of Dialysis Graft, Open Procedure | \$109.39<br>\$117.79<br>\$119.27<br>\$29.94<br>\$44.74<br>\$104.58<br>\$107.55<br>\$70.90<br>\$58.00<br>\$122.84<br>\$192.93<br>\$115.63<br>\$664.04<br>\$702.44<br>\$692.34<br>\$637.72<br>\$1,244.22<br>\$687.91<br>\$641.73<br>\$533.40<br>\$728.39             |

| 38355 Seal Reconstitutation And Internal Lipton (Fight, Upper Externary Herondalpsis Access (Steal Syndrome) 38314. 38365 Cannal Coloridary With Balbon Cardiary 38365 Cannal Coloridary With Balbon Cardiary 38365 Cannal Coloridary 38365 Cannal Col                       | Code  | Description   | Fee         |
|--|-------|---|-------------|
| 1865  Sperman Cammula Deciding (Separate Procedure), Without Balson Carlmare   12186   Cammula Deciding (Separate) with Saloton Carlmare   12186   12184   1                         |       | Description  Distal Revascularization And Interval Ligation (Dril). Upper Extremity Hemodialysis Access (Steal Syndrome)                              |             |
| 89091 September of Neede Analy Carleter from Displayed Circuit. With Integring Including Radiological Supervision And Interpretation \$4,130.17. 89000 September And Interpretation And Interpretation Market September (Interpretation And Interpretation Market September (Interpretation And Interpretation And Interpretation Market September (Interpretation And Interpretation And Interp                |       |   | \$218.68    |
| Seguez Selection And Interpretation  | 36861 | Cannula Declotting; With Balloon Catheter   | \$120.41    |
| Segos Supervision And Interpretation Excision Of Book Clot And Ori Infection To Dissolve Blood Clot in Dislysis Circuit And Balloon Diston Of Dislysis Segment, Accessed Through Segol The Sun, With Imaging Including Reddological Supervision And Interpretation, Without Bloom Clother Comment of Segment Comment of Segment Clother Comment of Segment Clother Comment of Segment Clother Comment of Segment Clother Comment of Segmen                       |       |   | \$608.83    |
| Ecision Of Blood Dis And/Or Intension To Dissolve Blood Dist in Dayles Circus And Blackon Distorn Of Dispos Segment, Accessed Through Science (Control of Blood Circ And Or Intension And Interpretation And Interpretation Circus (Control of Blood Circ And Or Intension And Intension Circus (Control of Blood Circ And Or Intension Circus) (Control of Blood Circ And Circus) (Control of Blood Circus) (                       |       | ' '   | \$1,301.78  |
| Seption The Sinn, White Imaging including Radiological Supervision And Interpretation, Without Balloon Calmeter  Existion CR Blood Clot And Ord Internation To Dissolve Biographia of the Sinn, With Imaging Including Radiological Supervision And Interpretation of Dissylve Supervision And Interpretation  Septiment Committee Com                       | 36903 |   | \$4,870.31  |
| Scietor Of Blood Cits And Crimitosins To Dissolve Blood Cital In Jayles Crincal And Balloon Disson Of Disposins Segment, Accessed Through Segment, Intelligence of Section (1998) 1986 (19                       | 36904 | ,   | \$1.895.92  |
| Removal Cr Dissolving Of Blood Citx in Diaysis Circuit, With Balloon Distant Of Dailysis Segment And Placement Of Stert, Accessed Through \$8,154.77 38907 Ill Sation Oblision Of Dialysis Segment, Accessed Through The Skin, Willin Imaging Including Radiological Supervision And Interpretation \$15,809.01 38908 Permanent Blockage Of Dialysis Corput, With Imaging Including Radiological Supervision And Interpretation \$2,200.48 38909 Permanent Blockage Of Dialysis Crimit, With Imaging Including Radiological Supervision And Interpretation \$2,200.48 38900 Permanent Blockage Of Dialysis Circuit, With Imaging Including Radiological Supervision And Interpretation \$2,200.48 38900 Connection Of Viscous (With Imaging Including Radiological Supervision And Interpretation \$2,200.48 38900 Connection Of Steric Gibbon And Renal (Kidney) Vani, Cipen Procedure \$1,878.65 39900 Connection Of Splane, Splanen And Renal (Kidney) Vani, Cipen Procedure \$1,878.65 39900 Connection Of Splane, Splanen And Renal (Kidney) Vani, Cipen Procedure \$1,878.65 39900 Connection Of Splane, Splanen And Renal (Kidney) Vani, Cipen Procedure \$1,878.65 39900 Connection Of Splane, Splanen And Renal (Kidney) Vani, Cipen Procedure \$1,878.65 39910 Connection Of Splane, Splanen And Renal (Kidney) Vani, Cipen Procedure \$1,878.65 39910 Connection Of Splane Splane And Renal Kidney Vani, Cipen Procedure \$1,879.65 39910 Connection Of Splane Splane And Renal Kidney Vani, Cipen Procedure \$1,879.65 39910 Connection Of Splane Splane And Renal Kidney Vani, Cipen Procedure \$1,879.65 39910 Connection Of Splane Splane And Renal Kidney Vani, Cipen Procedure \$1,879.65 39910 Connection Of Splane Splane And Renal Kidney Vani, Cipen Procedure \$1,879.65 39910 Connection Of Splane Splane And Renal Kidney Vani, Cipen Procedure \$1,879.65 39910 Connection Of Splane Splane And Renal Kidney Vani, Cipen Procedure \$1,879.65 39910 Connection Of Splane Splane Vani And Renal Kidney Vani And Vani And Vani And    |       | Excision Of Blood Clot And/Or Infusion To Dissolve Blood Clot In Dialysis Circuit And Balloon Dilation Of Dialysis Segment, , Accessed Through        |             |
| 36000 Illustino Chi Dilysia Segment. Accessed Through The Skin. With Imaging Including Radiological Supervision And Interpretation \$15,9501 52000 Illustration of Vision In Dilysia Segment. With Imaging Including Radiological Supervision And Interpretation \$2,103.64 32,103.64                      |       | Removal Or Dissolving Of Blood Clot In Dialysis Circuit, With Balloon Dilation Of Dialysis Segment And Placement Of Stent, Accessed Through           |             |
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| 37160 Connection Of Viena Cava And Abdominal Vein, Open Procedure  51,871.68  77180 Connection Of Splenic (Splenia) And Reanal (Kidney) Vein Near Ands. Open Procedure  51,871.68  77181 Connection Of Splenic (Splenia) And Reanal (Kidney) Vein Near Ands. Open Procedure  52,043.89  77182 Proceptive With Hemodynamic Evaluation, Intrahepation Trail Formation Office Splenia (Splenia) And Reanal (Kidney) Vein Near Ands. 18,202.27  77183 Proceptive With Hemodynamic Evaluation, Intrahepation Trail Formation Office Splenia (Splenia) And Reanal (Kidney) Vein Near Ands. 18,202.27  77184 The Shift, Intital Vissell  77184 The Shift, Intital Vissell  77185 Removal Of Should all impediors To Dissolve Blood Citic From Arisey Or Arterial Graft Using Fluoroscopic Guidance, Accessed Through The Shift, Intital Vissell  77186 Removal Of Blood Citic And Impediors To Dissolve Blood Citic From Arisey Or Arterial Graft Using Fluoroscopic Guidance, Accessed Through The Skin, Visit Splenia (Splenia) And Impediors (Accessed Through The Skin) To Dissolve Blood Citic From Arisey Or Arterial Graft Using Fluoroscopic Guidance, Accessed Beneath  77186 Removal Of Blood Citic And Impediors (Accessed Through The Skin) To Dissolve Blood Citic From Veins Using Fluoroscopic Guidance, Accessed Beneath  77187 Removal Of Blood Citic And Impediors (Accessed Through The Skin) To Dissolve Blood Citic From Veins Using Fluoroscopic Guidance, Accessed Through The Skin) To Dissolve Blood Citic From Veins Using Fluoroscopic Guidance, Accessed Through The Skin) To Dissolve Blood Citic From Veins Using Fluoroscopic Guidance, Accessed Through The Skin) To Dissolve Blood Citic From Veins Using Fluoroscopic Guidance, Accessed Through The Skin) To Dissolve Blood Citic From Veins Using Fluoroscopic Guidance, Accessed Through The Skin Intitudent Readal Supervision And Interpretation  7719 Repositioning Of Versa Cusin Skin Skin Skin Skin Skin Skin Skin Sk  | 37140 | Connection Of Vena Cava And Portal Vein Of Liver, Open Procedure  | \$2,043.98  |
| 37181 Gomection Of Splenic (Splenic) And Renal (Kidney) Vien. Near Aorts. Open Procedure 37182 Gomection Of Splenic (Splenic) And Renal (Kidney) Vien. Open Procedure 37218 Grevision Of Splenic Splenic And Renal (Kidney) Vien. Open Procedure 37218 Revision Of Splenic Splenic And Renal (Kidney) Vien. Open Procedure 37218 Revision Of Splenic Splenic And Renal (Kidney) Vien. Open Procedure 37218 Revision Of Splenic Splenic Bod (Pow To Levi Using Inaging Vien. Open Procedure 37218 Revision Of Shums To Dyspase Blood Flow To Levi Using Inaging Vien. Open Procedure 37218 Revision Of Shums To Dyspase Blood Pow To Levi Using Inaging Vien. Open Procedure 37218 Revision Of Shums To Dyspase Blood Clot From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Through 37218 The Shum Vien. Open Order And Injections To Dissolve Blood Clot From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Through 37218 Shumoword Of Blood Clot And Injections To Dissolve Blood Clot From Artery Or Arterial Graft Using Fluoroscopic Guidance, Insist Splenic Shumoword Of Blood Clot And Injections (Accessed Through The Shin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Insist Splenic Shumoword Of Blood Clot And Injections (Accessed Through The Shin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Insist Splenic Shumoword Of Blood Clot And Injections (Accessed Through The Shin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Insist Splenic Shumoword Of Shood Clot And Injections (Accessed Through The Shin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Insist Splenic Shin Clother Clother Ship Shin To Dissolve Blood Clother Ship Ship Thrombolysis Certain By Endowards Approach, Including Radiological Supervision And Interpretation Splenic Ship Ship Ship Ship Ship Ship Ship Ship   | 37145 | Connection Of Renal (Kidney) Vein And Portal Vein Of Liver, Open Procedure  | \$1,897.02  |
| 37182 Portography With Hendonystamic Evaluation, Interhappatit Trac Fortoschure 3820 273783 Revision Of Shurts To Bypasa Blood Flow To Liver Using flanging Guidance 3830 273783 Revision Of Shurts To Bypasa Blood Flow To Liver Using flanging Guidance 3830 273783 Revision Of Shurts To Bypasa Blood Flow To Liver Using flanging Guidance 3830 273783 Revision Of Shurts To Bypasa Blood Flow To Liver Using flanging Guidance 3830 273783 Revision Of Shurts To Bypasa Blood Flow To Liver Using Flow To Liver Using Flow To Liver Using Flow Ship Ship Ship Ship Ship Ship Ship Ship  | 37160 | Connection Of Vena Cava And Abdominal Vein, Open Procedure  | \$2,164.61  |
| 37183 Revision Of Shunts To Bypass Blood Flow To Love Using Tanging Guidance Removal Of Blood Old And Injections To Dissolve Blood Color From Antery Or Anterial Graft Using Fluorescopic Guidance, Accessed Through 17th 17th 17th 17th 17th 17th 17th 17t  |       |   | \$1,871.68  |
| 37183 (Revision Of Shutts To Bypass Blood Flow To Liver Using Imaging Guidance Removal Of Blood Old And Impedients To Dissolve Blood Old From Antery Of Anterial Graft Using Fluoroscopic Guidance, Accessed Through The Skin, Initial Vessel Removal Of Blood Old And Impedients To Dissolve Blood Old From Antery Of Anterial Graft Using Fluoroscopic Guidance, Accessed Through The Skin, Subsequent Vessel(S) Removal Of Blood Old And Impedients To Dissolve Blood Clot From Antery Of Anterial Graft Using Fluoroscopic Guidance, Accessed Beneath 37186 The Skin Removal Of Blood Clot And Impedients Accessed Through The Skin I To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Accessed Beneath 37197 Removal Of Blood Clot And Impedients (Accessed Through The Skin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Initial 37197 Removal Of Blood Clot And Impedients (Accessed Through The Skin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Initial 37198 Removal Of Veins Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 37198 Reproduction Of Veins Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 37197 Removal Of Veins Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 37197 Retrieval Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation 37197 Retrieval Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation 37212 And Interpretation Including Padiological Supervision And Interpretation 37213 And Interpretation Propress, Venous Influsion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation 37213 And Interpretation Continued Treatment On Subsequent Day During Course Of Thrombolytic Thrompoly The Skin Or Open Procedure 37213 And Interpretation Of Central Anthropy For Drug Influsion For Thrombolysis Other Th                       |       |   | \$2,043.98  |
| Removal Of Blood Clot And Injections To Desolve Blood Clot From Antery Or Anterial Graft Using Fluorescopic Guidance, Accessed Through 3187787 Removal Of Blood Clot And Injections To Desolve Blood Clot From Antery Or Anterial Graft Using Fluorescopic Guidance, Accessed Through 37895 The Skin, Subsequent Vessel(S) 37895 The Skin, Subsequent Vessel(S) 37807 Removal Of Blood Clot And Injections To Desolve Blood Clot From Antery Or Anterial Graft Using Fluorescopic Guidance, Institut 37808 The Skin, Subsequent Vessel(S) 37808 The Skin, Or Old Blood Clot And Injections (Accessed Through The Skin) To Desolve Blood Clot From Veirs Using Fluorescopic Guidance, Institut 37808 The Skin, Or Old Blood Clot And Injections (Accessed Through The Skin) To Desolve Blood Clot From Veirs Using Fluorescopic Guidance, Institut 37819 Insertion Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 37919 Insertion Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 381,657.44 37919 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 381,657.44 37919 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 381,657.44 37919 Removal Of Foreing Bood Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation 381,657.44 37210 Transcatheter Bleapy 3721 Insertion Of Ceitheter in No Array For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation 3721 Insertion Of Ceitheter in No Array For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation 3721 Insertion Of Stems And Blood Clot Fromer Convention Removed Through The Skin 3721 Insertion Of Stems Infusion For Thrombolysis, Any Method, Including Radiological Supervision And Interpretation 3721 Insertion Of Stems In Note Artery, Open Or Accessed Through The Skin Or Open Procedure 3721 Insertion Of Stems                        |       |   |             |
| 37181 Per Skin, Initial Vessel Removal Of Blood Citck And Injections To Dissolve Blood Citcl From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Through Removal Of Blood Citch And Injections To Dissolve Blood Citch From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Beneath Brand City City City City City City City City   | 37183 |   | \$5,318.25  |
| 37185 The Skin, Subsequent Vesselt(s) Removal Of Blood Citcl And Injections To Dissolve Blood Citcl From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Beneath \$1,320.47 Removal Of Blood Citcl And Injections (Accessed Through The Skin) To Dissolve Blood Citcl From Veins Using Fluoroscopic Guidance, Initial Removal Of Blood Citcl And Injections (Accessed Through The Skin) To Dissolve Blood Citcl From Veins Using Fluoroscopic Guidance, Removal Of Blood Citcl And Injections (Accessed Through The Skin) To Dissolve Blood Citcl From Veins Using Fluoroscopic Guidance, 37188 Dissequent \$1,837.00 37191 Insertion Of Vena Cavar Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.40 37193 Removal Of Vena Cavar Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.40 37193 Removal Of Vena Cavar Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.40 37193 Removal Of Vena Cavar Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.40 37193 Removal Of Foreigh Body of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation \$1,255.41 37197 Retireval Of Foreigh Body of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation \$1,275.71 3721 Insertion Of Cathetier In Intel Artery For Drug Infusion For Blood Citcl Including Radiological Supervision And Interpretation \$1,275.71 3721 Insertion Of Cathetier In Artery For Drug Infusion For Blood Citcleriang Radiological Supervision And Interpretation \$1,275.71 3721 Insertion Of Cathetier In Artery Of Venin Including Radiological Supervision And Interpretation \$1,275.71 3721 Insertion Of Cathetier In Artery Of Venin Including Radiological Supervision And Interpretation \$1,275.71 3721 Insertion Of Salmaria Robot Of Cathetier In Artery Of Venin Including Radiological Supervision And Interpretation \$1,275.71 3721 Insertion Of Salmaria In           | 37184 | The Skin, Initial Vessel  | \$1,897.82  |
| Removal Of Blood Clor And Injections To Dissolve Blood Clot From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Beneath \$1,320.47 37187 Removal Of Blood Clor And Injections (Accessed Through The Skin) To Dissolve Blood Clot From Veris Using Fluoroscopic Guidance, 37188 Guissequent 37188 Guissequent 37188 Guissequent 37189 Reposition Of Veria Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 37292 Repositioning Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 32.294.77 37192 Repositioning Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 32.294.77 37192 Repositioning Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 32.294.77 37193 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 31.657.44 37193 Removal Of Including Body Of Blood Vissels, Accessed Through The Skin Including Radiological Supervision And Interpretation 31.758.75 37211 Insertion Of Catheter Int Arien For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation 37212 Day 37212 Transcatheter Therapy, Areinal Or Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation 37214 Removal Of Catheter in Arien For Drug Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision 37214 Removal Of Catheter in Arien For Viven Including Radiological Supervision And Interpretation 37214 Removal Of Catheter in Arien For Viven Including Radiological Supervision And Interpretation 37214 Removal Of Stents In New York Including Radiological Supervision And Interpretation 37218 Insertion Of Stents In Stent Arien, Order Of Accessed Through The Skin Or Open Procedure 37218 Insertion Of Stents In Stent Arien, Order Stent Sten                      | 37185 |   | \$513.40    |
| 37187 Removal Of Blood Clot And Injections (Accessed Through The Skin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Initial Removal Of Blood Clot And Injections (Accessed Through The Skin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, \$1,837.03 (1988). Subsequent \$1,837.03 (1988). Subsequent \$1,837.03 (1988). Subsequent \$1,837.03 (1988). Subsequent Supervision And Interpretation \$1,254.44 (1988). Subsequent Supervision Provided Supervision And Interpretation \$1,254.44 (1988). Subsequent Subsequent Supervision And Interpretation \$1,254.44 (1988). Subsequent Subsequent Supervision And Interpretation \$1,254.44 (1988). Subsequent Subsequent Subsequent Subsequent Supervision And Interpretation \$1,254.44 (1988). Subsequent Subseque              |       | Removal Of Blood Clot And Injections To Dissolve Blood Clot From Artery Or Arterial Graft Using Fluoroscopic Guidance, Accessed Beneath               | ψ313.40     |
| Removal Of Blood Clot And Injections (Accessed Through The Skin) To Dissolve Blood Clot From Vains Using Fluoroscopic Guidance, \$1,837.02 37198 [Insertion Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.44 37193 [Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.44 37193 [Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.47 37193 [Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.47 37195 [Thromoboyis, Carebral, By Intravenous Infusion \$1,255.47 37200 [Transcatheter Biopsy \$2,315.93 37211 [Insertion Of Catheter Into Artery For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation \$3,75.55 37212 [Day Transcatheter Therapy, Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision 37213 And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombolytic Therapy, Including Radiological Supervision 37213 And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombolytic Therapy, Including Radiological Supervision 37213 And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombolytic Therapy, Including Radiological Supervision 37213 And Interpretation Of Stenation Bood Clot Protection Device In Neck Artery, Open Or Accessed Through The Skin 37216 [Insertion Of Stenation Bood Clot Protection Device In Neck Artery, Open Or Accessed Through The Skin 37217 [Insertion Of Stenation In Stenation Bood Clot Protection Device In Neck Artery, Open Or Accessed Through The Skin Or Open Procedure 32,280.53 37228 [Insertion Of Stenation In Artery in Ore Stenation Processed Through The Skin Or Open Procedure 32,280.53 37229 [Insertion Of Stenation In Artery In Ore Sted Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 32,280.53 372               | 37186 | The Skin  | \$1,320.47  |
| 37188 Subsequent 37191 Insertion Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 52,294,77 37192 Repositioning Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 51,657,44 37193 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 51,657,44 37193 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 51,657,44 37193 Thrombolysis, Cerebral, By Intravenous Infusion 51,657,47 37193 Thrombolysis, Cerebral, By Intravenous Infusion 51,735,77 37200 Transcratheter Bippsy 52,158,77 37200 Transcratheter Bippsy 52,158,77 37210 Transcratheter Into Artery For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation 53,755,57 Transcratheter Therapy, Venous Infusion For Thrombolysis, Any Method, Including Radiological Supervision And Interpretation 53,755,57 Transcratheter Therapy, Arterial Or Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation, Initial Treatment 53,721 Day 52,721 Day 52,721 Day 52,721 Day 52,722 Day 52,722 Day 52,723 Day 52,723 Day 52,723 Day 52,723 Day 52,723 Day 52,724 Day 52,724 Day 52,725 Day 52                       | 37187 | Removal Of Blood Clot And Injections (Accessed Through The Skin) To Dissolve Blood Clot From Veins Using Fluoroscopic Guidance, Initial               | \$1,911.89  |
| 37919 Insertion Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.44 3793 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.44 3793 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,254.44 3793 Filtrownolopis, Cerebral By Intravenous Infusion \$3,635.55 3793 Retrieval Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation \$1,735.77 37200 Transcatheter Biopsy 37211 Insertion Of Catheter Into Artery For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation Transcatheter Therapy, Venous Infusion For Thrombolysis, Any Method, Including Radiological Supervision And Interpretation, Initial Treatment Transcatheter Therapy, Venous Infusion For Thrombolysis, Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation, Initial Treatment Transcatheter Therapy, Arterial Or Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation Transcatheter Therapy, Arterial Or Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation Transcatheter Therapy, Arterial Or Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation Supervision And Inte                  |       |   |             |
| 37193 Repositioning Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,657.44 37193 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation \$1,657.44 37193 Thrombolysis, Cerebral, By Intravenous Infusion \$1,255.47 37200 Transcatheter Biopsy (1998) Retrieved Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation \$2,15.95, 37 37201 Transcatheter Biopsy (1998) Retrieved Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation \$3,75.56, 37 37201 Transcatheter Biopsy (1998) Retrieved Of State Programment Of State Programmen                  |       |   | \$1,637.02  |
| 37193 Removal Of Vena Cava Filter By Endovascular Approach, Including Radiological Supervision And Interpretation 37217 Retrieval Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation 37217 Retrieval Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation 37218 Insertion Of Catheter Into Artery For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation 37219 Day 37211 Insertion Of Catheter Into Artery For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation 37212 Day 37212 Day 37213 And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombodytic Therapy, Including Radiological Supervision 37213 And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombodytic Therapy, Including Follow-Up Catheter 37214 Removal Of Catheter in Aftery Of Veni Including Radiological Supervision And Interpretation 37215 Insertion Of Stems And Blood Clar Policetion Device in Neck Artery, Open Of Accessed Through The Skin 37216 Insertion Of Stems In Neck Artery, University of Supervision And Interpretation 37217 Insertion Of Intravascular Stems in Neck Artery, University of Supervision And Interpretation 37218 Insertion Of Stems In Blood Vessels Of Chest Open Or Accessed Through The Skin Or Open Procedure 37218 Insertion Of Stems In Blood Vessels Of Chest Open Or Accessed Through The Skin Or Open Procedure 37228 Balloon Dilation Of Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 37228 Insertion Of Stems In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 37228 Balloon Dilation Of Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure 37228 Balloon Dilation Of Hartery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37228 Balloon Dilation Of Artery In One Leg, Endovascular, Accessed Through The Skin Or Op                       |       |   | . ,         |
| 37197 Retrieval Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation \$17.357. 37200 Transcatheter Biopsy \$215.92 37211 Insertion Of Catheter Into Artery For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation \$17.55. 37212 Insertion Of Catheter Into Artery For Drug Infusion For Blood Clot Including Radiological Supervision And Interpretation, Initial Treatment \$212.0 Day \$375.65 Transcatheter Therapy, Venous Infusion For Thrombolysis, Any Method, Including Radiological Supervision And Interpretation, Initial Treatment Transcatheter Therapy, Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombolytic Therapy, Including Follow-Up Catheter \$226.77 37214 Removal Of Catheter In Artery Or Vein Including Radiological Supervision And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombolytic Therapy, Including Follow-Up Catheter \$226.77 37214 Insertion Of Stents In Neck Artery, Open Or Accessed Through The Skin \$354.06 37216 Insertion Of Stents In Neck Artery, Open Or Accessed Through The Skin \$3112.02 37216 Insertion Of Stents In Blood Vessels Of Chest Open Or Accessed Through The Skin Or Open Procedure \$2.801.82 37221 Insertion Of Stents In Review of Skide Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure \$2.801.82 37222 Insertion Of Stents In Review of Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure \$2.801.82 37223 Insertion Of Stents In Review of Of Groin, Artery, Endovascular, Accessed Through The Skin Or Open Procedure \$3.3457.18 37224 Insertion Of Stents In Index Arteries In One Leg. Endovascular, Accessed Through The Skin Or Open Procedure \$3.3457.18 37225 Removal Of Plaque In Arteries In One Leg. Endovascular, Accessed Through The Skin Or Open Procedure \$3.3457.18 37226 Removal Of Plaque And Insertion Of Stents Into Arteries In One        |       |   |             |
| 37137 Retrieval Of Foreign Body Of Blood Vessels, Accessed Through The Skin Including Radiological Supervision And Interpretation \$215.57.8 37211 Insertion Of Catheter Into Artery For Drug Influsion For Blood Clot Including Radiological Supervision And Interpretation, Initial Treatment Transcatheter Therapy, Venous Influsion For Thrombolysis, Any Method, Including Radiological Supervision And Interpretation, Initial Treatment Transcatheter Therapy, Venous Influsion For Thrombolysis, Any Method, Including Radiological Supervision And Interpretation, Initial Treatment Transcatheter Therapy, Arterial Or Venous Influsion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision 37213 And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombolytic Therapy, Including Radiological Supervision And Interpretation \$226,77214 Removal Of Catheter In Artery Or Veni Including Radiological Supervision And Interpretation \$118,90,37215 Insertion Of Stens And Blood Clot Protection Device In Neck Artery, Open Or Accessed Through The Skin \$11,100,37217 Insertion Of Intravascular Stens In Neck Artery With Radiological Supervision And Interpretation \$292,57,37218 Insertion Of Stens In Blood Vessels Of Chest Open Or Accessed Through The Skin Or Open Procedure \$2,801,83,37221 Insertion Of Stens In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure \$2,801,83,37223 Insertion Of Stens In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure \$3,465,118,2222 Balloon Dilation Of Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure \$3,465,118,2222 Removal Of Plaque In Artery In One Side Of Procedure \$3,221,000,000,000,000,000,000,000,000,000  |       |   |             |
| 37210   Transcatheter Biopsy   37215   Array                         |       |   |             |
| Insertion Of Catheter Into Artery For Drug Infusion For Blood Cita Including Radiological Supervision And Interpretation   \$375.56  |       |   |             |
| Transcatheter Therapy, Venous Infusion For Thrombolysis, Any Method, Including Radiological Supervision And Interpretation, Initial Treatment \$330.12  Transcatheter Therapy, Arterial Or Venous Infusion For Thrombolysis Other Than Coronary, Any Method, Including Radiological Supervision 37213 And Interpretation, Continued Treatment On Subsequent Day During Course Of Thrombolytic Therapy, Including Follow-Up Catheter \$226.77 37214 Removal Of Catheter In Artery Or Vein Including Radiological Supervision And Interpretation 5716 Insertion Of Stents And Blood Clot Protection Device in Neck Artery, Open Or Accessed Through The Skin 57216 Insertion Of Stents In Neck Artery, Open Or Accessed Through The Skin 57217 Insertion Of Stents In Neck Artery, Open Or Accessed Through The Skin With Radiological Supervision And Interpretation 5711.77 57220 Balloon Dilation Of Artery in One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 58.28018. 57221 Insertion Of Stents In Blood Vessels Of Chest Open Or Accessed Through The Skin Or Open Procedure 58.29018. 57222 Balloon Dilation Of Artery in One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 58.29018. 57223 Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 58.29018. 57224 Balloon Dilation Of Arterion Stents Into Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure 58.29018. 57225 Removal Of Plaque In Artery Indovascular, Accessed Through The Skin Or Open Procedure 58.29028. 57226 Insertion Of Stents Into Arteries In One Leg. Endovascular, Accessed Through The Skin Or Open Procedure 58.2903.01.38 57227 Removal Of Plaque In Artery In One Leg. Endovascular, Accessed Through The Skin Or Open Procedure 58.2903.01.38 57228 Removal Of Plaque In Artery In One Leg. Endovascular, Accessed Through The Skin Or Open Procedure 58.2003.01.38 57229 Removal Of Plaque In Artery In One Leg. Endovascular, Accessed Through The Skin Or Open Procedure 58.2003.01.38 57231 Rem                     |       |   | \$375.56    |
| 37214 Removal Of Catheter in Artery Or Vein Including Radiological Supervision And Interpretation 37216 Insertion Of Stents And Blood Clor Protection Device in Neck Artery, Open Or Accessed Through The Skin 37216 Insertion Of Stents In Neck Artery, Open Or Accessed Through The Skin 37216 Insertion Of Istents In Neck Artery, Open Or Accessed Through The Skin 37217 Insertion Of Intravascular Stents In Neck Artery, With Radiological Supervision And Interpretation 37218 Insertion Of Istents In Neck Artery, With Radiological Supervision And Interpretation 37218 Insertion Of Istents In Blood Vessels Of Chest Open Or Accessed Through The Skin With Radiological Supervision And Interpretation 37218 Insertion Of Stents In Blood Vessels Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 32,28018, 37221 Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 32,2811, Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure 32,2813 Insertion Of Stents In Into Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure 32,2813 Insertion Of Stents Into Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure 33,2813 Insertion Of Stents Into Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure 33,2813 Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 33,2813 Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 33,2813 Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 33,2813 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 34,675.74 37229 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 310,084.55 37231 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The S                       | 37212 |   | \$330.12    |
| Removal Of Catheter In Artery Of Vein Including Radiological Supervision And Interpretation   \$118.90   | 27212 |   | \$226.77    |
| 37216   Insertion Of Stents And Blood Clot Protection Device In Neck Artery, Open Or Accessed Through The Skin   \$1,112.03  |       |   |             |
| Insertion Of Stents In Neck Artery, Open Or Accessed Through The Skin   \$1,112.02   |       |   |             |
| Insertion Of Intravascular Stents In Neck Artery With Radiological Supervision And Interpretation   \$929.57   |       | 77 1  | \$1,112.02  |
| 37220   Balloon Dilation Of Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure   \$2,801.82   37221   Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure   \$3,457.14   37223   Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure   \$1,426.94   37224   Balloon Dilation Of Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure   \$3,281.04   37225   Removal Of Plaque In Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$9,969.23   37226   Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$9,301.36   37227   Removal Of Plaque In Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$9,301.36   37228   Removal Of Plaque And Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$1,2778.54   37228   Removal Of Plaque And Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$1,084.43   37230   Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,084.43   37231   Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,145.55   37231   Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,145.55   37232   Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,145.55   37234   Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel   \$1,125.03   37235   Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel   \$1,250.34   37236   Insertion Of Intravascular          |       |   | \$929.57    |
| 37220   Balloon Dilation Of Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure   \$2,801.82   37221   Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure   \$3,457.14   37223   Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure   \$1,426.94   37224   Balloon Dilation Of Groin Artery, Endovascular, Accessed Through The Skin Or Open Procedure   \$3,281.04   37225   Removal Of Plaque In Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$9,969.23   37226   Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$9,301.36   37227   Removal Of Plaque In Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$9,301.36   37228   Removal Of Plaque And Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$1,2778.54   37228   Removal Of Plaque And Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$1,084.43   37230   Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,084.43   37231   Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,145.55   37231   Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,145.55   37232   Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,145.55   37234   Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel   \$1,125.03   37235   Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel   \$1,250.34   37236   Insertion Of Intravascular          | 37218 | Insertion Of Stents In Blood Vessels Of Chest Open Or Accessed Through The Skin With Radiological Supervision And Interpretation                      | \$711 70    |
| Insertion Of Stents In Artery In One Side Of Groin, Endovascular, Accessed Through The Skin Or Open Procedure \$3,457.18   |       |   |             |
| 37222 Balloon Dilation Of Groin Artery, Endovascular, Open, Or Percutaneous Approach   \$667.32  |       |   | \$3,457.18  |
| 37224 Balloon Dilation Of Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$3,281.06  | 37222 | Balloon Dilation Of Groin Artery, Endovascular, Open, Or Percutaneous Approach  | \$667.32    |
| 37225 Removal Of Plaque In Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 39,301.36 37226 Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 39,301.36 37227 Removal Of Plaque And Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 317228 Balloon Dilation Of Artery Of One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37229 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37230 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37231 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37232 Balloon Dilation Of Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37233 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel 37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel 37235 Additional Vessel 37236 Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation 37236 Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation 37236 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Additional Vein 37237 Occusion Of Venous Malformations (Other Than Hemorrhage) With Radiol                       |       | ,, ,  | \$1,426.94  |
| 37226   Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$12,778.54  | _     | i, , ,  | \$3,281.06  |
| Removal Of Plaque And Insertion Of Stents Into Arteries In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$12,778.52 37228 Balloon Dilation Of Artery Of One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$10,084.43 37230 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$10,084.43 37230 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$10,084.43 37231 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$13,265.93 37232 Balloon Dilation Of Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$13,265.93 37233 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$13,265.93 37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  \$1,125.03 37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  \$3,678.93 Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, Sp. 1,293.73 37236 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation  Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation  Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Addition  Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Roadmapping, And Imaging  Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supe              |       |   |             |
| 37228 Balloon Dilation Of Artery Of One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37230 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37230 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37231 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37232 Balloon Dilation Of Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37233 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel 37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel 37235 Additional Vessel 37236 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel 37236 Additional Vessel 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation 37238 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation 37239 Additional Vein 37239 Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging  |       |   | \$9,301.36  |
| 37229 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$10,084.43 37230 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$10,145.55 37231 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$13,265.93 37232 Balloon Dilation Of Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$904.21 37233 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  \$1,125.03 37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  \$3,678.95 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  \$3,678.95 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial,  \$2,451.36 Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial,  \$2,451.36 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation  \$3,677.46 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each  37239 Additional Vein  Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging   |       |   | \$12,778.54 |
| 37230   Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure   \$10,145.55  |       | 7 0 1   | \$4,675.74  |
| 37231 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$13,265.95 37232 Balloon Dilation Of Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure  \$2904.21 37233 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  \$3,678.95 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each 37235 Additional Vessel  Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, 37236 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation \$1,293.72 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation \$3,673.92 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each 37239 Additional Vein  Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging   |       |   | \$10,084.43 |
| 37232 Balloon Dilation Of Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure 37233 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel 37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel 37235 Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel 37236 Additional Vessel 37237 Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, Sp. 100 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation Sp. 100 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation Sp. 100 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation Sp. 100 Or Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Addition Sp. 100 Occlusion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Sp. 100 Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging   |       |   |             |
| 37233 Removal Of Plaque In Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel  Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each  37235 Additional Vessel  Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial,  37236 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation \$1,293.72  37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation \$1,293.72  37238 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation \$3,617.46  Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Additional Vein \$1,798.31  Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging   |       |   | \$13,265.99 |
| 37234 Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each Additional Vessel Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, 37236 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Additio 37238 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each 37239 Additional Vein Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging   |       |   | \$904.21    |
| Removal Of Plaque And Insertion Of Stents Into Artery In One Leg, Endovascular, Accessed Through The Skin Or Open Procedure, Each 37235 Additional Vessel Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, 37236 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation  Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Additio 37238 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each 37239 Additional Vein  Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging  |       | ,   |             |
| 37235 Additional Vessel  Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, 37236 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation  Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Additio 37238 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each 37239 Additional Vein  Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging  | 37234 |   | \$3,678.95  |
| 37236 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation  \$2,451.38  Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Additio 37238 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation  Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each 37239 Additional Vein  Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging  | 37235 | Additional Vessel   | \$3,937.98  |
| 37237 Or Coronary), Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each Additio  37238 Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation  Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each  37239 Additional Vein  Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging   | 37236 |   | \$2,451.38  |
| 37238   Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation \$3,617.46     Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each   37239   Additional Vein   \$1,798.31     Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging   \$1,798.31     Occlusion Of Venous Malformations (Other Than Hemorrhage)   \$1,798.31     Occlusion Of Venous Malformatical (Other Than Hemorrhage)   \$1,798.31     Occlusion Of Veno |       | Insertion Of Intravascular Stents In Artery (Except Lower Extremity, Cervical Carotid, Extracranial Vertebral Or Intrathoracic Carotid, Intracranial, |             |
| Insertion Of Intravascular Stents In Vein, Open Or Accessed Through The Skin, With Radiological Supervision And Interpretation, Each 37239 Additional Vein \$1,798.31 Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging   |       |   | \$1,293.72  |
| 37239 Additional Vein \$1,798.31 Occlusion Of Venous Malformations (Other Than Hemorrhage) With Radiological Supervision And Interpretation, Roadmapping, And Imaging  | 37238 |   | \$3,617.46  |
|  | 37239 | Additional Vein   | \$1,798.31  |
|  | 37241 |   | \$4,005.36  |

| 37242   | Description  Occlusion Of Astery (Other Than Hamershage Or Tymes) With Rediclosical Synantician And Interpretation, Readmanning, And Imaging  | Fee  |
|---|---|--|
|   | Occlusion Of Artery (Other Than Hemorrhage Or Tumor) With Radiological Supervision And Interpretation, Roadmapping, And Imaging Guidance  | \$6,764.85   |
| 37243   | Occlusion Of Tumors Or Obstructed Blood Vessel With Radiological Supervision And Interpretation, Roadmapping, And Imaging Guidance  | \$8,542.32   |
|   | Occlusion Of Arterial Or Venous Hemorrhage With Radiological Supervision And Interpretation, Roadmapping, And Imaging Guidance  | \$5,960.82   |
|   | Balloon Dilation Of Artery, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And   | * - /  |
| 37246   | Interpretation, Initial Artery  | \$2,036.31   |
| 37247   | Balloon Dilation Of Artery, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And Interpretation, Each Additional Artery  | \$595.68   |
| 31241   | Balloon Dilation Of First Vein, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And   | ψ393.00  |
| 37248   | Interpretation  | \$1,584.08   |
|   | Balloon Dilation Of Additional Vein, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And  |  |
|   | Interpretation Ultrasound Evaluation Of Blood Vessel During Diagnosis Or Treatment, Initial Vessel  | \$482.32<br>\$1,069.31   |
|   | Ultrasound Evaluation of Blood Vessel During Diagnosis Or Treatment, Initial Vessel  Ultrasound Evaluation Of Blood Vessel During Diagnosis Or Treatment, Each Additional Vessel  | \$1,069.31   |
|   | Vascular Endoscopy, Surgical, With Ligation Of Perforator Veins, Subfascial (Seps)  | \$543.63   |
|   | Unlisted Vascular Endoscopy Procedure   | Price By Report  |
|   | Ligation, Internal Jugular Vein   | \$650.71   |
|   | Ligation; External Carotid Artery   | \$664.08   |
|   | Ligation; Internal Or Common Carotid Artery Ligation; Internal Or Common Carotid Artery, With Gradual Occlusion, As With Selverstone Or Crutchfield Clamp   | \$632.00<br>\$636.81   |
|   | Ligation Or Banding Of Angioaccess Arteriovenous Fistula  | \$383.83   |
|   | Ligation Or Biopsy, Temporal Artery   | \$273.77   |
|   | Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Neck  | \$479.09   |
|   | Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Chest   | \$803.74   |
|   | Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Abdomen Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Extremity   | \$948.35<br>\$385.52   |
|   | Ligation of Inferior Vena Cava  | \$1,519.60   |
|   | Ligation Of Femoral Vein  | \$396.45   |
| 37660   | Ligation Of Common Iliac Vein   | \$1,160.84   |
|   | Tying And Incision Leg Vein, Long Saphenous Vein  | \$216.48   |
|   | Ligation, Division, And Stripping, Short Saphenous Vein Ligation, Division, And Stripping, Long (Greater) Saphenous Veins From Saphenofemoral Junction To Knee Or Below   | \$340.03   |
| 3//22   | Ligation, And Division, And Complete Stripping Of Long Or Short Saphenous Veins With Radical Excision Of Ulcer And Skin Graft And/Or  | \$408.05   |
| 37735   | Interruption Of Communicating Veins Of Lower Leg, With Excision Of Deep Fascia  | \$501.35   |
| 37760   | Tying Of Varicose Veins In One Leg, Open Procedure, Radical   | \$496.55   |
|   | Tying Of Varicose Veins In One Leg, Open Procedure, Simple  | \$469.40   |
|   | Multiple Incisions For Removal Of Varicose Veins Of Arm Or Leg, 10-20 Incisions   | \$443.47   |
|   | Multiple Incisions For Removal Of Varicose Veins Of Arm Or Leg, Greater Than 20 Incisions  Tying And Incision Leg Vein, Short Saphenous Vein  | \$514.09<br>\$205.71   |
|   | Ligation, Division, And/Or Excision Of Recurrent Or Secondary Varicose Veins (Clusters), One Leg  | \$328.00   |
| 37788   | Penile Revascularization, Artery, With Or Without Vein Graft  | \$1,146.72   |
|   | Blockage Of Penis Vein  | \$443.03   |
|   | Unlisted Procedure, Vascular Surgery  | Price By Report  |
|   | Splenectomy; Total Splenectomy; Total Partial   |  |
|   |   | \$901.11   |
| 55101   |   |  |
| 38102   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure)   | \$901.11   |
| 38102<br>38115  | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy   | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95   |
| 38102<br>38115<br>38120   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy  | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41   |
| 38102<br>38115<br>38120<br>38129  | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen   | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205  | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorthaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic   | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41   |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous  | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206<br>38220  | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow  | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206<br>38220<br>38221   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow  | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206<br>38220<br>38221<br>38222  | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow   | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206<br>38220<br>38221<br>38222<br>38230   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow  | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206<br>38220<br>38221<br>38222<br>38230<br>38232<br>38232<br>38240  | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorthaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor  | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206<br>38220<br>38221<br>38222<br>38230<br>38232<br>38240<br>38241  | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Patient-Derived Stem Cells  | \$901.11<br>\$1,030.61<br>\$229.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206<br>38220<br>38221<br>38222<br>38230<br>38232<br>38232<br>38240<br>38241<br>38241  | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Patient-Derived Stem Cells Transplantation Of Donor White Cells (Lymphocytes)   | \$901.11<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38206<br>38220<br>38221<br>38232<br>38232<br>38240<br>38241<br>38242<br>38242   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Ponor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Patient-Derived Stem Cells Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells   | \$901.11<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58<br>\$164.14  |
| 38102<br>38115<br>38120<br>38200<br>38200<br>38206<br>38220<br>38221<br>38222<br>38230<br>38232<br>38240<br>38242<br>38243<br>38243   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Patient-Derived Stem Cells Transplantation Of Donor White Cells (Lymphocytes)   | \$901.11<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58  |
| 38102<br>38115<br>38120<br>38200<br>38200<br>38205<br>38220<br>38221<br>38222<br>38230<br>38232<br>38240<br>38241<br>38242<br>38243<br>38243<br>38243   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation   | \$901.11<br>\$1,030.61<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58<br>\$164.14<br>\$115.16  |
| 38102<br>38115<br>38120<br>38120<br>38205<br>38206<br>38221<br>38222<br>38232<br>38232<br>38240<br>38241<br>38242<br>38243<br>38305<br>38305<br>38308   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Cervical  | \$901.11<br>\$1,030.61<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58<br>\$164.14<br>\$118.44<br>\$115.16<br>\$299.94<br>\$447.14  |
| 38102<br>38115<br>38120<br>38129<br>38205<br>38206<br>38221<br>38222<br>38230<br>38241<br>38242<br>38243<br>38300<br>38305<br>38308<br>38380<br>38380   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenotrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Thoracic   | \$901.11<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58<br>\$164.14<br>\$118.44<br>\$115.16<br>\$299.94<br>\$447.14<br>\$417.45<br>\$522.13  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38220<br>38221<br>38232<br>38230<br>38241<br>38242<br>38243<br>38243<br>38300<br>38305<br>38308<br>38388<br>38381                                     | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Duct, Abdominal  | \$901.11<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$190.63<br>\$177.19<br>\$210.58<br>\$164.14<br>\$118.44<br>\$115.16<br>\$299.94<br>\$447.14<br>\$417.45<br>\$522.13<br>\$706.06  |
| 38102<br>38115<br>38120<br>38129<br>38200<br>38205<br>38220<br>38221<br>38222<br>38230<br>38232<br>38241<br>38242<br>38243<br>38300<br>38305<br>38388<br>38388<br>38381<br>38382<br>38500                   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Cervical Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Nodes, Open Procedure   | \$901.11<br>\$1,030.61<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58<br>\$164.14<br>\$115.16<br>\$299.94<br>\$447.14<br>\$417.45<br>\$522.13<br>\$706.06<br>\$609.29                                    |
| 38102<br>38115<br>38120<br>38205<br>38206<br>38220<br>38221<br>38232<br>38232<br>38232<br>38240<br>38241<br>38242<br>38243<br>38305<br>38305<br>38305<br>38380<br>38380<br>38380<br>38380                   | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Duct, Abdominal  | \$901.11<br>\$1,030.61<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58<br>\$164.14<br>\$118.44<br>\$115.16<br>\$299.94<br>\$447.14<br>\$417.45<br>\$522.13<br>\$706.02<br>\$609.29                        |
| 38102<br>38115<br>38120<br>38120<br>38206<br>38206<br>38220<br>38221<br>38232<br>38232<br>38240<br>38242<br>38243<br>38300<br>38300<br>38380<br>38380<br>38380<br>38381<br>38381<br>38382<br>38500<br>38500 | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Biopsy Of Bone Marrow Biopsy Of Bone Marrow For Transplantation Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Cervical Suture And/Or Tying Chest Lymph Duct, Abdominal Biopsy Or Removal Of Lymph Nodes, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure   | \$901.11<br>\$1,030.61<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58<br>\$164.14<br>\$115.16<br>\$299.94<br>\$447.14<br>\$417.45<br>\$522.13<br>\$706.06<br>\$609.29                                    |
| 38102<br>38115<br>38120<br>38205<br>38206<br>38220<br>38221<br>38222<br>38232<br>38232<br>38240<br>38241<br>38242<br>38243<br>38300<br>38381<br>38382<br>38380<br>38381<br>38380<br>38380<br>38505<br>38505 | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy  Laparoscopy, Surgical, Splenectomy  Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography  Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic  Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow  Diagnostic Aspirations And Biopsies Of Bone Marrow Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation  Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Duct, Thoracic Suture And/Or Tying Chest Lymph Duct, Abdominal Biopsy Or Removal Of Lymph Nodes, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure | \$901.11 \$1,030.61 \$229.61 \$1,141.95 \$1,075.41 Price By Report \$120.23 \$79.95 \$78.96 \$166.47 \$173.37 \$181.46 \$180.63 \$177.19 \$210.58 \$164.14 \$118.44 \$115.16 \$299.94 \$447.14 \$417.45 \$522.13 \$706.06 \$609.29 \$229.01 \$125.63 \$359.44  |
| 38102<br>38115<br>38120<br>38129<br>38206<br>38206<br>38220<br>38221<br>38222<br>38230<br>38241<br>38242<br>38243<br>38300<br>38365<br>38380<br>38381<br>38382<br>38500<br>38505<br>38510<br>38525<br>38530 | Splenectomy; Total, En Bloc For Extensive Disease, In Conjunction With Other Procedure (List In Addition To Code For Primary Procedure) Repair Of Ruptured Spleen (Splenorrhaphy) With Or Without Partial Splenectomy Laparoscopy, Surgical, Splenectomy Unlisted Laparoscopy Procedure, Spleen Injection Procedure For Splenoportography Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Allogenic Blood-Derived Hematopoietic Progenitor Cell Harvesting For Transplantation, Per Collection; Autologous Aspiration Of Bone Marrow Biopsy Of Bone Marrow Biopsy Of Bone Marrow Biopsy Of Bone Marrow For Transplantation Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Donor Bone Marrow For Transplantation Harvesting Of Patient Bone Marrow For Transplantation Transplantation Of Donor Stem Cells, Per Donor Transplantation Of Donor White Cells (Lymphocytes) Transplantation Of Donor Stem Cells Simple Drainage Of Lymph Node Abscess Or Inflammation Extensive Drainage Of Lymph Node Abscess Or Inflammation Incision Or Other Operation On Lymphatic Channels Suture And/Or Tying Chest Lymph Duct, Cervical Suture And/Or Tying Chest Lymph Duct, Abdominal Biopsy Or Removal Of Lymph Nodes, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure Biopsy Or Removal Of Lymph Nodes Of Neck, Open Procedure   | \$901.11<br>\$1,030.61<br>\$1,030.61<br>\$1,141.95<br>\$1,075.41<br>Price By Report<br>\$120.23<br>\$79.95<br>\$78.96<br>\$166.47<br>\$173.37<br>\$181.46<br>\$180.63<br>\$177.19<br>\$210.58<br>\$164.14<br>\$118.44<br>\$115.16<br>\$29.94<br>\$447.14<br>\$417.45<br>\$522.13<br>\$706.06<br>\$609.29<br>\$229.01<br>\$125.63 |

| ode         Description           38550         Removal Of Congenital Defect Of Lymph Nodes At Underarm Or Neck Without Deep Dissection           38555         Removal Of Congenital Defect Of Lymph Nodes At Underarm Or Neck With Deep           38562         Limited Lymphadenectomy For Staging (Separate Procedure); Pelvic           38570         Laparoscopy, Surgical; With Retroperitoneal Lymph Node Sampling (Biopsy), Single Or Multiple           38571         Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy           38572         Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple           38573         Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope           38589         Unlisted Laparoscopy Procedure, Lymphatic System           38700         Suprahyoid Lymphadenectomy | \$473.36<br>\$918.87<br>\$642.39<br>\$632.72<br>\$518.89 |
|--|--|
| Removal Of Congenital Defect Of Lymph Nodes At Underarm Or Neck With Deep Limited Lymphadenectomy For Staging (Separate Procedure); Pelvic Retroperitoneal (Aortic And/Or Splenic) Laparoscopy, Surgical; With Retroperitoneal Lymph Node Sampling (Biopsy), Single Or Multiple Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System  | \$918.87<br>\$642.39<br>\$632.72                         |
| Limited Lymphadenectomy For Staging (Separate Procedure); Pelvic Limited Lymphadenectomy For Staging (Separate Procedure); Retroperitoneal (Aortic And/Or Splenic) Laparoscopy, Surgical; With Retroperitoneal Lymph Node Sampling (Biopsy), Single Or Multiple Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy  Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy  Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope  Unlisted Laparoscopy Procedure, Lymphatic System  | \$642.39<br>\$632.72                                     |
| <ul> <li>Limited Lymphadenectomy For Staging (Separate Procedure); Retroperitoneal (Aortic And/Or Splenic)</li> <li>Laparoscopy, Surgical; With Retroperitoneal Lymph Node Sampling (Biopsy), Single Or Multiple</li> <li>Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy</li> <li>Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple</li> <li>Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope</li> <li>Unlisted Laparoscopy Procedure, Lymphatic System</li> </ul>  | \$632.72   |
| Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy  Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple  Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope  Unlisted Laparoscopy Procedure, Lymphatic System   | \$518.89   |
| 28572 Laparoscopy, Surgical; With Bilateral Total Pelvic Lymphadenectomy And Peri-Aortic Lymph Node Sampling (Biopsy), Single Or Multiple 38573 Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope 38589 Unlisted Laparoscopy Procedure, Lymphatic System   | +5.00  |
| Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System   | \$669.35   |
| Removal Of All Lymph Nodes Of Both Sides Of Pelvis Using An Endoscope Unlisted Laparoscopy Procedure, Lymphatic System   |  |
| 38589 Unlisted Laparoscopy Procedure, Lymphatic System   | \$914.72   |
|  | \$1,179.14   |
| 38700   Supranyold Lymphadenectomy   | Price By Report  |
| 38720 Cervical Lymphadenectomy (Complete)  | \$723.96<br>\$1,219.28                                   |
| 38724 Removal Of Lymph Nodes, Muscle, And Tissue Of Neck   | \$1,162.73   |
| 38740 Axillary Lymphadenectomy; Superficial  | \$627.87   |
| 38745 Axillary Lymphadenectomy; Complete   | \$786.61   |
| 38746 Procedure)   | \$205.66   |
| Abdominal Lymphadenectomy, Regional, Including Celiac, Gastric, Portal, Peripancreatic, With Or Without Para-Aortic And Vena Caval Nodes (List Separately In Addition To Code For Primary Procedure)   |  |
| 38760 Removal Of Lymph Nodes At Groin  | \$750.82   |
| 38765 Removal Of Lymph Nodes At Groin And Pelvis, Superficial  | \$1,174.50   |
| 38770 Pelvic Lymphadenectomy, Including External Iliac, Hypogastric, And Obturator Nodes (Separate Procedure)  | \$729.55   |
| 38780 Retroperitoneal Lymphadenectomy, Extensive, Including Pelvic, Aortic, And Renal Nodes (Separate Procedure)   | \$938.63   |
| 38790 Injection Procedure; Lymphangiography  | \$73.56  |
| 38792 Injection Procedure; Radioactive Tracer For Identification Of Sentinel Node  | \$57.59  |
| 38794 Cannulation, Thoracic Duct   | \$272.59   |
| Intraoperative Identification (Eg, Mapping) Of Sentinel Lymph Node(S), Includes Injection Of Non-Radioactive Dye, When Performed (List 38900   Separately In Addition To Code For Primary Procedure)   | \$134.01   |
| 38999 Unlisted Procedure, Hemic Or Lymphatic System  | Price By Report  |
| 39000 Drainage, Biopsy, Or Removal Of Foreign Body Of Chest Cavity, Cervical   | \$447.99   |
| 39010 Drainage, Biopsy, Or Removal Of Foreign Body Of Chest Cavity, Transthoracic, With Sternotomy   | \$771.49   |
| 39200 Resection Of Mediastinal Cyst  | \$761.06   |
| 39220 Resection Of Mediastinal Tumor   | \$999.89   |
| 39401 Examination Of Chest Using An Endoscope With Biopsy  | \$268.41   |
| 39402 Examination Of Chest Using An Endoscope With Lymph Node Biopsy   | \$389.16   |
| 39499 Unlisted Procedure, Mediastinum  | Price By Report  |
| Repair, Laceration Of Diaphragm, Any Approach  | \$843.79   |
| 39503 Repair Of Congenital Defect Of Muscle Separating The Chest And Abdominal Cavities, Neonate 39540 Repair Of Injury To Muscle Separating The Chest And Abdominal Cavities, Acute   | \$5,591.45<br>\$763.64                                   |
| 39541 Repair Of Injury To Muscle Separating The Chest And Abdominal Cavities, Actie  Repair Of Injury To Muscle Separating The Chest And Abdominal Cavities, Chronic   | \$832.13   |
| 39545 Imbrication Of Diaphragm For Eventration, Transthoracic Or Transabdominal, Paralytic Or Nonparalytic   | \$862.39   |
| 39560 Resection, Diaphragm; With Simple Repair (Eg, Primary Suture)  | \$831.78   |
| 39561 Resection, Diaphragm; With Complex Repair (Eg, Prosthetic Material, Local Muscle Flap)   | \$1,105.91   |
| 39599 Unlisted Procedure, Diaphragm  | Price By Report  |
| 40490 Biopsy Lip   | \$85.82  |
| 40500 Vermilionectomy (Lip Shave), With Mucosal Advancement  | \$499.97   |
| 40510 Excision Lip; Transverse Wedge Excision With Primary Closure   | \$465.86   |
| 40520 Excision Lip; V-Excision With Primary Direct Linear Closure  | \$477.23   |
| 40525 Removal Of Lip With Local Skin Flap Repair   | \$508.84   |
| 40527 Removal Of Lip With Cross Skin Flap Repair   | \$578.89   |
| 40530 Resection Lip, More Than One-Fourth, Without Reconstruction  | \$528.76   |
| 40650 Repair Of Lip And Border   | \$334.15   |
| 40652 Repair Of Vertical Lip Wound Extending To Half Of Lip 40654 Repair Of Vertical Lip Wound Extending To Over Half Of Lip   | \$445.35<br>\$551.20                                     |
| 40654 Repair Of Vertical Lip Wound Extending To Over Hair Of Lip<br>40700 Plastic Repair Of Cleft Lip/Nasal Deformity; Primary, Partial Or Complete, Unilateral  | \$551.30<br>\$1,020.17                                   |
| 40701 Plastic Repair Of Deformity Present At Birth On Both Sides Of The Nose Or Lip, One Stage   | \$1,202.97   |
| 40701 Plastic Repair Of Deformity Present At Birth On Both Sides Of The Nose Or Lip, One Stage   | \$1,010.85   |
| 40720 Plastic Repair Of Nasal And Lip Deformity Present At Birth, Without A Flap   | \$962.17   |
| 40761 Plastic Repair Of Nasal And Lip Deformity Present At Birth With A Flap   | \$980.75   |
| 40799 Unlisted Procedure, Lips   | Price By Report  |
| 40800 Incision Of Abscess, Cyst, Or Blood Accumulation In Mouth, Uncomplicated   | \$144.65   |
| 40801 Incision Of Abscess, Cyst, Or Blood Accumulation In Mouth, Complicated   | \$260.30   |
| 40804 Removal Of Embedded Foreign Body Of Mouth, Simple  | \$180.47   |
| 40805 Removal Of Embedded Foreign Body Of Mouth, Complicated   | \$215.21   |
| 40806 Incision Of Labial Frenum (Frenotomy)  | \$70.84  |
| 40808 Biopsy, Vestibule Of Mouth   | \$119.39   |
| 40810 Excision Of Lesion Of Mucosa And Submucosa; Without Repair   | \$153.23   |
| 40812 Excision Of Lesion Of Mucosa And Submucosa; With Simple Repair 40814 Excision Of Lesion Of Mucosa And Submucosa; With Complex Repair   | \$201.37<br>\$270.26                                     |
| 40814 Excision Of Lesion Of Mucosa, Submucosa, And Underlying Muscle   | \$270.26<br>\$382.16                                     |
| 40818 Excision Of Mucosa As Donor Graft  | \$352.16   |
| 40819 Excision Of Frenum, Labial Or Buccal (Frenumectomy, Frenulectomy, Frenectomy)  | \$289.02   |
| 40820 Destruction Of Lesion Or Scar By Physical Methods (Eg, Thermal, Cryo, Chemical)  | \$187.58   |
| 40830 Closure Of Laceration; Up To 2 Cm  | \$225.54   |
|  | \$218.35   |
| 40831 Closure Of Laceration; Over 2 Cm Or Complex  | \$816.11   |
| 40831 Closure Of Laceration; Over 2 Cm Or Complex 40840 Repair To Increase Depth Of Mouth, Front Portion   |  |
|  | \$872.94   |

| Code                                      | Description   | Fee                      |
|---|---|--------------------------|
|   | Repair To Increase Depth Of Mouth, Entire Arch  | \$1,399.41               |
|   | Repair To Increase Depth Of Mouth, Complex  | \$1,389.56               |
|   | Unlisted Inner Mouth Procedure  | Price By Report          |
|   | Drainage Of Abscess, Cyst, Or Blood Accumulation Of Tongue  | \$144.51                 |
|   | Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue, Superficial From Within The Mouth  Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue, Deep From Within The Mouth | \$217.21                 |
|   | Drainage Of Abscess, Cyst, Of Blood Accumulation Order The Tongue, Deep From Within The Mouth  Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue Or Lower Lip From Within The Mouth | \$253.92<br>\$314.08     |
|   | Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Jaw Bone   | \$371.79                 |
| -   | Drainage Of Abscess, Cyst, Or Blood Accumulation Under Lower Teeth  | \$295.59                 |
|   | Incision Of Lingual Frenum (Frenotomy)  | \$197.45                 |
| 41015                                     | Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue, Superficial From Outside Of The Mouth  | \$381.03                 |
| 41016                                     | Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue Or Lower Lip From Outside Of The Mouth  | \$451.93                 |
| -   | Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue Or Jaw Bone   | \$445.61                 |
|   | Drainage Of Abscess, Cyst, Or Blood Accumulation Under The Tongue Or Lower Teeth  | \$497.22                 |
|   | Insertion Of Needles, Catheters, Or Devices Into Head And/Or Neck For Radiation Delivery  | \$450.50                 |
| -   | Biopsy Of Tongue, Front Two Thirds  | \$168.94                 |
|   | Biopsy Of Tongue, Back On Third Biopsy, Floor Of Mouth  | \$179.73<br>\$152.24     |
|   | Removal Of Growth Of Tongue Without Suturing  | \$162.42                 |
|   | Removal Of Growth Of Tongue With Suturing, Front Two-Thirds   | \$237.86                 |
|   | Removal Of Growth Of Tongue With Suturing, Back One-Third   | \$348.46                 |
|   | Removal Of Growth Of Tongue With Local Tissue Flap  | \$568.66                 |
|   | Excision Of Lingual Frenum (Frenectomy)   | \$185.55                 |
| 41116                                     | Excision Lesion Of Floor Of Mouth   | \$301.74                 |
|   | Removal Of Less Than Half Of Tongue   | \$941.15                 |
|   | Glossectomy; Hemiglossectomy  | \$1,230.42               |
|   | Glossectomy; Partial, With Unilateral Radical Neck Dissection   | \$2,006.48               |
|   | Glossectomy; Complete Or Total, With Or Without Tracheostomy, Without Radical Neck Dissection   | \$2,032.04               |
|   | Glossectomy; Complete Or Total, With Or Without Tracheostomy, With Unilateral Radical Neck Dissection   | \$2,557.38               |
|   | Removal Of Tongue, Floor Of Mouth, And Jaw Bone Removal Of Tongue, Floor Of Mouth, Soft Tissue, And Lymph Nodes   | \$2,041.25               |
|   | Removal Of Tongue, Floor Of Mouth, Jaw Bone, Tissue, And Lymph Nodes  | \$2,217.42<br>\$2,767.67 |
|   | Repair Of (2.5 Centimeter Or Less) Laceration To Floor Of Mouth And/Or Tongue   | \$198.78                 |
|   | Repair Of Laceration (2.5 Centimeter Or Less) Of Back Third Of Tongue   | \$296.40                 |
|   | Repair Of Laceration (More Than 2.5 Centimeter Or Complex) Of Tongue Or Floor Of Mouth  | \$228.64                 |
|   | Suture Of Tongue To Lip To Enlarge Mouth  | \$435.06                 |
| 41512                                     | Permanent Suture Suspension Of Tongue Base  | \$644.49                 |
| -   | Repair Of Tissue Connecting Tongue To Floor Of Mouth  | \$326.31                 |
|   | Destruction Of Tongue Tissue, Per Session   | \$916.78                 |
|   | Unlisted Procedure, Tongue, Floor Of Mouth  | Price By Report          |
|   | Drainage Of Abscess, Cyst, Or Blood Accumulation Of Dental Bone   | \$207.20                 |
|   | Removal Embedded Foreign Body; From Soft Tissues Removal Embedded Foreign Body; From Bone   | \$306.15<br>\$400.50     |
|   | Gingivectomy, Excision Gingiva, Each Quadrant   | \$225.36                 |
|   | Operculectomy, Excision Pericoronal Tissues   | \$127.51                 |
|   | Excision Of Fibrous Tuberosities, Dentoalveolar Structures  | \$337.68                 |
| 41823                                     | Excision Of Osseous Tuberosities, Dentoalveolar Structures  | \$501.86                 |
| 41825                                     | Excision Of Lesion Or Tumor (Except Listed Above), Dentoalveolar Structures Without Repair  | \$212.52                 |
| 41826                                     | Removal Of Growth Of Dental Bone With Repair, Simple  | \$215.20                 |
|   | Removal Of Growth Of Dental Bone With Repair, Complex   | \$416.92                 |
|   | Excision Of Hyperplastic Alveolar Mucosa, Each Quadrant (Specify)   | \$332.19                 |
|   | Alveolectomy, Including Curettage Of Osteitis Or Sequestrectomy   | \$445.90                 |
|   | Destruction Of Tissue Abnormality Of Structure Supporting Teeth   | \$56.34                  |
|   | Periodontal Mucosal Grafting Reshaping Of Gum   | \$159.04                 |
|   | Resnaping Of Tooth Socket   | \$447.20<br>\$371.22     |
|   | Unlisted Procedure, Dentoalveolar Structures  | Price By Report          |
|   | Drainage Of Abscess Of Palate, Uvula  | \$112.85                 |
|   | Biopsy Of Palate, Uvula   | \$102.70                 |
|   | Removal Of Growth Of Roof Of Mouth Without Suturing   | \$152.20                 |
|   | Removal Of Growth Of Roof Of Mouth, With Simple Suturing  | \$247.66                 |
|   | Removal Of Growth Of Roof Of Mouth, With A Local Tissue Flap  | \$437.59                 |
|   | Resection Palate Or Extensive Resection Of Lesion   | \$945.43                 |
|   | Removal Of Soft Tissue At Roof Of Mouth, Simple   | \$221.43                 |
|   | Removal Of Soft Tissue At Roof Of Mouth, Complex  | \$705.67                 |
|   | Destruction Of Lesion, Palate Or Uvula (Thermal, Cryo Or Chemical)  | \$223.46                 |
|   | Repair Of Lacerated Roof Of Mouth, 2.0 Cm Or Less Repair Laceration Of Palate; Over 2 Cm Or Complex   | \$243.36<br>\$312.46     |
| -   | Repair Caceration of Palate; over 2 cm or complex  Repair Of Defect Of Roof Of Mouth Of Soft And Hard Plate   | \$312.46<br>\$944.92     |
|   | Repair Of Defect Of Roof Of Mouth, Alveolar Ridge, Soft Tissue  | \$882.57                 |
| 42205                                     |   | \$1,095.82               |
|   | Repair Of Defect Of Roof Of Mouth, Alveolar Ridge, With Graft   |                          |
| 42210                                     | Repair Of Defect Of Roof Of Mouth, Alveolar Ridge, With Graft Repair Of Defect Of Roof Of Mouth, Major Revision   | \$718.70                 |
| 42210<br>42215                            |   |                          |
| 42210<br>42215<br>42220                   | Repair Of Defect Of Roof Of Mouth, Major Revision   | \$718.70                 |
| 42210<br>42215<br>42220<br>42225<br>42226 | Repair Of Defect Of Roof Of Mouth, Major Revision Lengthening Of Roof Of Mouth And Repair Of Cleft Palate   | \$718.70<br>\$533.75     |

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|---------|--|------------------------|
|         | Description Lengthening Of Roof Of Mouth With Flap From The Lower Interior Nasal Septal Area   | Fee<br>\$700.46        |
|         | Repair Nasolabial Fistula  | \$808.08               |
|         | Maxillary Impression For Palatal Prosthesis  | \$170.67               |
|         | Insertion Of Pin-Retained Palatal Prosthesis   | \$216.47               |
|         | Unlisted Roof Of The Mouth Procedure   | Price By Report        |
| 42300   | Drainage Of Abscess Of Salivary Gland, Uncomplicated   | \$193.53               |
| 42305   | Drainage Of Abscess Of Salivary Gland, Complicated   | \$393.71               |
|         | Drainage Of Lower Jaw Abscess From Within The Mouth  | \$164.14               |
|         | Drainage Of Lower Jaw Abscess From Outside Of The Mouth  | \$249.46               |
|         | Removal Of Salivary Gland Stone (Parotid) Uncomplicated Inside The Mouth   | \$209.50               |
|         | Removal Of Salivary Gland (Submaxillary) Or Stone, Complicated Inside The Mouth  | \$304.48               |
|         | Removal Of Salivary Gland (Parotid) Stone, Complicated Biopsy Salivary Gland; Needle   | \$509.15               |
|         | Biopsy Of Salivary Gland By Incision   | \$94.55<br>\$209.91    |
|         | Excision Sublingual Salivary Cyst (Ranula)   | \$385.37               |
|         | Marsupialization Sublingual Salivary Cyst (Ranula)   | \$279.36               |
|         | Removal Of Salivary Gland Growth Or Salivary Gland, Lateral Lobe   | \$548.85               |
|         | Excision Parotid Tumor Or Parotid Gland; Lateral Lobe, With Dissection And Preservation Of Facial Nerve  | \$970.21               |
|         | Excision Parotid Tumor Or Parotid Gland; Total, With Dissection And Preservation Of Facial Nerve   | \$1,086.35             |
| 42425   | Excision Parotid Tumor Or Parotid Gland; Total, En Bloc Removal With Sacrifice Of Facial Nerve   | \$769.71               |
| 42426   | Excision Parotid Tumor Or Parotid Gland; Total, With Unilateral Radical Neck Dissection  | \$1,232.34             |
| 42440   | Excision Submandibular (Submaxillary) Gland  | \$425.82               |
|         | Excision Sublingual Gland  | \$328.14               |
|         | Plastic Repair Of Salivary Duct, Simple  | \$427.04               |
|         | Plastic Repair Of Salivary Duct, Complicated   | \$542.18               |
|         | Parotid Duct Diversion, Bilateral (Wilke Type Procedure);  Parotid Duct Diversion, Bilateral (Wilke Type Procedure); With Excision Of Both Submandibular Glands  | \$462.71               |
|         | Parotid Duct Diversion, Bilateral (Wilke Type Procedure); With Excision Of Both Submandibular Glands Creation Of New Drainage Tracts Of Major Salivary Gland Ducts On Both Sides Of Mouth With Tying Of Salivary Gland Ducts | \$760.21               |
|         | Injection Procedure For Sialography  | \$566.07<br>\$153.86   |
|         | Closure Salivary Fistula   | \$520.73               |
|         | Dilation Salivary Duct   | \$51.77                |
|         | Dilation And Catheterization Of Salivary Duct, With Or Without Injection   | \$101.34               |
|         | Ligation Salivary Duct, Intraoral  | \$362.63               |
| 42699   | Unlisted Procedure, Salivary Glands Or Ducts   | Price By Report        |
| 42700   | Incision And Drainage Abscess; Peritonsillar   | \$189.01               |
|         | Drainage Of Throat Abscess, Through The Mouth  | \$306.46               |
|         | Drainage Of Throat Abscess, From Outside The Mouth   | \$538.60               |
|         | Biopsy; Oropharynx   | \$150.41               |
|         | Biopsy Of Throat Lesion Behind Nose, Simple  | \$207.65               |
|         | Biopsy Of Throat Lesion Behind Nose, Complex   | \$230.55               |
|         | Excision Or Destruction Of Lesion Of Pharynx, Any Method  Removal Of Foreign Body From Pharynx   | \$218.93               |
|         | Excision Branchial Cleft Cyst Or Vestige; Confined To Skin And Subcutaneous Tissues  | \$181.94<br>\$271.70   |
|         | Excision Branchial Cleft Cyst Or Vestige; Extending Beneath Subcutaneous Tissues   | \$558.05               |
|         | Tonsillectomy And Adenoidectomy; Under Age 12  | \$298.62               |
|         | Tonsillectomy And Adenoidectomy; Age 12 Or Over  | \$312.20               |
|         | Tonsillectomy, Primary Or Secondary; Under Age 12  | \$276.64               |
| 42826   | Tonsillectomy, Primary Or Secondary; Age 12 Or Over  | \$262.84               |
| 42830   | Removal Of Adenoids Patient Younger Than Age 12, Initial Procedure   | \$218.94               |
|         | Removal Of Adenoids Patient Age 12 Or Over, Initial Procedure  | \$236.13               |
|         | Removal Of Adenoids Patient Younger Than Age 12, Secondary Procedure   | \$166.87               |
|         | Removal Of Adenoids Patient Age 12 Or Over, Secondary Procedure  | \$226.72               |
|         | Removal Of Tonsils, Tissue, Muscle, And Bone, Without Closure  | \$947.89               |
|         | Removal Of Tonsils, Tissue, Muscle, And Bone, Closure With Local Flap  | \$1,285.55             |
|         | Removal Of Tonsils, Tissue, Muscle, And Bone, Closure With Other Flap  Excision Of Tonsil Tags   | \$2,043.37             |
|         | Excision Of Tonsii Tags  Excision Or Destruction Lingual Tonsil, Any Method (Separate Procedure)   | \$179.69<br>\$411.79   |
|         | Limited Pharyngectomy  | \$1,321.14             |
|         | Partial Removal Of Wall Of Throat (Pharynx) With Suture Repair   | \$1,739.31             |
|         | Removal Of Throat Tissue   | \$2,193.59             |
|         | Suture Pharynx For Wound Or Injury   | \$304.47               |
|         | Pharyngoplasty (Plastic Or Reconstructive Operation On Pharynx)  | \$732.14               |
| 42953   | Pharyngoesophageal Repair  | \$905.52               |
|         | Pharyngostomy (Fistulization Of Pharynx, External For Feeding)   | \$718.44               |
|         | Control Of Bleeding Of Throat, Uncomplicated   | \$140.74               |
|         | Control Oropharyngeal Hemorrhage (Primary Or Secondary, Eg, Posttonsillectomy); Complicated, Requiring Hospitalization   | \$369.29               |
|         | Control Of Bleeding Of Throat, Complicated   | \$527.34               |
| 42970   | Control Of Bleeding Of Throat With Insertion Of Packing, Uncomplicated   | \$361.67               |
| 42971   | Control Of Nasopharyngeal Hemorrhage (Primary Or Secondary, Eg, Postadenoidectomy); Complicated, Requiring Hospitalization   | \$419.57               |
|         | Control Of Bleeding Of Throat With Insertion Of Packing, Complicated   | \$470.67               |
|         | Evaluation Of Sleep-Disordered Breathing By Examination Of Upper Airway Using An Endoscope   | \$82.96                |
|         | Throat, Adenoids, Or Tonsils Procedure   | Price By Report        |
|         | Removal Of Foreign Body In Esophagus, Cervical Approach  | \$509.12               |
| 43030   | Incision Of Muscle At Upper Esophagus (Cricopharyngeal Muscle)   | \$481.27               |
| 400.    |  |                        |
|         | Removal Of Foreign Body In Esophagus, With Removal Of Foreign Body Removal Of Growth Of Esophagus, Cervical Approach   | \$1,146.92<br>\$585.99 |

| 4010   Sommor Of Cerem Of Esperhages, Window Copen Charle Procedure   4,2556   4,2506   4,2  | Code Description   | Fee               |
|---|--|-------------------|
| 43007   Removal OF Escaphagus, Willhout Open Chear Procedular   1,336.00  |  | \$885.23          |
| 43008 Renoval Of Espohagus, Williau Clore Chees Procedure in Maching Intensive Repair 43118 Renoval Of Espohagus, Chees Chee Procedure 531071 Renoval Of Espohagus, Chees Chee Renoval Office Renovation   |  | \$2,599.55        |
| Partial Exportage, Open Chees Procedure, Neckating Intensin Repair   Partial Exportage, Open Chees   Partial Exportage, Open  | 43108 Removal Of Esophagus, Without Open Chest Procedure, Including Intestine Repair   | \$3,849.08        |
| Frair Esphagoctomy, Cenzoli, With Free Intestinal Conf. Including Microvascular Anabamoses, Obtaining the Graft And Intestinal Formal Esphagoctomy, Distant Printing, With Trouvers Applications of Advantage Intestinal Conference on Conferenc  | 43112 Removal Of Esophagus, Open Chest Procedure   | \$3,021.09        |
| Partial Esponhagociomy, Detail Two Thrick, With Thorsectionny And Separate Abdominal Incision, With Of Without Proximal Gastroctomy; With 1, 211 Privators. Estaphagogiapatesteminy, With O. Without Private Proximal Gastroctomy; With 1, 211 Private Proximal Gastroctomy; With O. Without Private Proximal Gastroctomy; With O. Without Private Proximal Gastroctomy; With O. Without Private Pri  |  | \$3,765.93        |
| Frairal Esophageactoryn, Distall Tvor-Thiosis, With Tromoscoriny And Separate Addominal Incision. With Orl Without Protections (1974) 1311 Partal Removal Of Lower Esophagus, Green Orleant And Abdominal Procedure 1314-132 Partal Removal Of Lower Esophagus, Green Orleant And Abdominal Procedure 1314-132 Partal Removal Of Lower Esophagus, Green Orleant Abdominal Procedure 1314-132 Partal Removal Of Lower Esophagus, Green Orleant Abdominal Procedure 1314-132 Partal Removal Of Lower Esophagus, Green Orleant Abdominal Procedure 1314-132 Install Removal Of Lower Esophagus, Green Orleant Abdominal Procedure Or Open Abdominal Procedure 132 Install Removal Orleant Separate Install Removal Control of Comment of Comment of Comment of Comment (1974) Install Removal Orleant Removal Orl  |  |                   |
| 1917   Third Removal Of Lower Explangue, Open Chear Ad Advantual Procedure   1918   Parial Removal Of Lower Explangue, Open Chear Advantual Procedure   1918   19  |  | \$4,301.57        |
| ### ### ### ### ### ### ### ### ### ##  |  | ¢2 027 1 <i>1</i> |
| 43121 Partail Removal Of Louer Espotagus, Open Cheat Procedure  32,4856  32,4856  32,4856  32,4856  33,4812  Partail Espotagectomy, Thoracosbobminal Or Abdominal Procedure Or Open Abdominal Procedure  32,4814  33,4813  33,4813  33,4813  34,4815  |  |                   |
| 43122   Parial Removal O'Lower Esophagus, Open Cheel And Abdominal Procedure O'Copen Abdominal Procedure   Parial Resprapedomy, Throatopatominal Carboachominal Carboachomi  |  | + - / -           |
| Partal Esophageactomy, Thoraccabdominal Or Abdominal Approach, With Or Willhold Provall Gastractory, With Colon Interposition Or Small 1312 (Intellor Reconstruction, Propagation, An Assattomosities) 33,903 1 43124   Total Or Partal Esophageactomy, Without Reconstruction (Party Approach), With Carvical Esophageactomy 33,307 6 43136   Reminal Or Detect in Will Or Esophageactomy, Without Reconstruction (Party Approach), With Carvical Esophageactomy 33,307 6 43136   Reminal Or Detect in Will Or Esophageactomy, Without Reconstruction (Party Approach)   |  | \$2,491.89        |
| 43121 Total Or Pental Ecophaguscomy, Willhoud Reconstruction (Any Approach), With Cervical Esophaguscomy 437221 43139 Removal Of Defect in Will Of Esophagus, Cervical Approach 537221 43131 Removal Of Defect in Will Of Esophagus, Exercical Approach 53503 43191 Banaval Of Defect in Will Of Esophagus Library in Proace Approach 53503 43191 Banaval Of Defect in Will Of Esophagus Library in Proace Approach 53503 5350  |  | * ,               |
| 43130 Removal Of Defect in Wild Of Esophagus, Cervical Aptroach 43128 Removal Of Esophagus Tissue Using An Endoscope 431618 Removal Of Esophagus Tissue Using An Endoscope 431619 Diagnostic Examination Of Esophagus Using An Endoscope 431619 Diagnostic Examination Of Esophagus Using An Endoscope 431619 Diagnostic Examination Of Esophagus Using An Endoscope 431619 Removal Of Esophagus Using An Endoscope 431619 Removal Of Esophagus Using An Endoscope 43162 Removal Of Esophagus Using An Endoscope 43163 Removal Of Esophagus Using A Regist Endoscope 43163 Removal Of Esophagus Using A Regist Endoscope 43164 Removal Of Esophagus Using A Regist Endoscope 43164 Removal Of Esophagus Using A Regist Endoscope 43165 Removal Of Esophagus Using A Regist Endoscope 43165 Removal Of Esophagus Using A Regist Endoscope 43164 Removal Of Esophagus Using A Regist Endoscope 43164 Removal Of Esophagus Using A Regist Endoscope Protogh The Nose 43176 Removal Of Esophagus Using A Regist Endoscope Protogh The Nose 43176 Removal Of Esophagus Using A Regist Endoscope Protogh The Nose 43200 Removal Esophagus Using A Regist Endoscope Protogh The Nose 43200 Removal Esophagus Using A Remove Endoscope Protogh The Nose 43200 Removal Esophagus Using A Remove Endoscope Protogh The Nose 43200 Removal Of Esophagus Using An Endoscope 43204 Print Of Esophagus Using An Endoscope 43204 Print Of Esophagus Using An Endoscope 43206 Print Of Esophagus Using An Endoscope 43206 Print Of Esophagus Using An Endoscope 43210 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43210 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43211 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43212 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43213 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43213 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43214 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43216 Removal Of Esophagus Esophagus Using An Endoscope 43217 Removal Of Esophagus Esophagus Using An Endoscope 43218  | 43123 Intestine Reconstruction, Including Intestine Mobilization, Preparation, And Anastomosis(Es)   | \$3,903.19        |
| \$1,2824   18108   Removal Of Esperbagus Tisses Using An Endoscope   150,000   150,00   |  | \$3,307.04        |
| 43160   Removal Of Esophagus Tessue Using An Endoscope   4504   |  | \$722.10          |
| 43191 Dispositio Examination Of Esophagus Using An Rigid Endoscope Through The Mouth 43192 Impections of Substanse In Tissue Lining Of Esophagus Using An Rigid Endoscope 43194 Removed Of Trough Bodies of Esophagus Using An Endoscope 43193 Bidloro Dilation Of Esophagus Using An Endoscope 43194 Removed Of Trough Bodies of Esophagus Using An Endoscope 43197 Bidloro Dilation Of Esophagus Using An Endoscope 43200 Dispositio Examination Of Esophagus Using An Endoscope 43200 Examination Of Esophagus Using An Endoscope 43201 Endoscope 43202 Endoscope 43202 Endoscop  |  |                   |
| 43192 [Injections Of Substance In Tissue Lining Of Esophagus Using An Endoscope       \$1543         43198 [Botgoy Of Esophagus Using A Rigid Endoscope Through The Mouth       \$155,3         43196 [Balloon Diston Of Esophagus Using A Rigid Endoscope       \$156,7         43196 [Balloon Diston Of Esophagus Using A Rigid Endoscope       \$156,7         43197 [Disposite Estamination Of Esophagus Using A Rigid Endoscope       \$177,4         43198 [Disposite Estamination Of Esophagus Using A Rigid Endoscope       \$177,4         43198 [Botgoy Of Esophagus Using A February In Production (Production Control of Esophagus Using A February Endoscope Through The Nove       \$20,3         43198 [Botgoy Of Esophagus Using A February In Production (Production Control of Esophagus Using A February In Production Control of Esophagus Using A February In Production (Production Control of Esophagus Using A February Using A Februar   |  |                   |
| 43193 Bospay OF Escophagus Using A Rigid Endoscope Through The Mouth 43194 Removal OF Frostips Bodies of Escophagus Using A Rigid Endoscope 43194 State of Proteins Bodies of Escophagus Using A Rigid Endoscope 5187.4 43197 Diagnostic Examination Of Escophagus Using A Rigid Endoscope 5171.4 43197 Diagnostic Examination Of Escophagus Using A Rigid Endoscope 5171.4 43197 Diagnostic Examination Of Escophagus Using A Rigid Endoscope Through The Nose 5171.4 43197 Diagnostic Examination Of Escophagus Using A Rigid Endoscope Through The Nose 5203.5 43200 Diagnostic Examination Of Escophagus Using A Rigid Endoscope Through The Mouth 5204.5 5205 Privage Of Escophagus Using A Rigid Endoscope Through The Mouth 5204.5 5206 Privage Of Escophagus Using A Rigid Endoscope Through The Mouth 5205 Privage Of Escophagus Using A Rigid Endoscope 5206 Privage Of Escophagus Using A Rigid Endoscope 5206 Privage Of Escophagus Using A Rigid Endoscope 5206 Privage Of Escophagus Using A Rigid Endoscope 5307 Privage Of Escophagus Using A Rigid Endoscope 5308 Privage Of Escophagus Using A Rigid Endoscope 5319 Diagnostic Escophagus Using A Rigi  |  |                   |
| 43194 Bernovin CI Foreign Bodies Of Esophagus Using A REdoscope       \$136.         43195 Baldoon Distance OF Esophagus Using A REDoscope       \$177.         43197 Disposition CI Wire And Distance OF Esophagus Using A REDoscope       \$178.         43197 Disposition Estimation OF Esophagus Using A Piexble Endoscope Through The Nose       \$173.         43198 Biogosy OF Esophagus Using A Piexble Endoscope Through The Nose       \$203.         43200 Disposition Estimation OF Esophagus Using A Piexble Endoscope Through The Mouth       \$203.         43201 Injections Into Esophagus Using A Endoscope       \$224.         43202 Biospy OF Esophagus Using A Piexble Endoscope Through The Mouth       \$224.         43204 Injection OF Distort Esophagus Using A Endoscope       \$224.         43204 Injection OF Distort Esophagus Using A Endoscope       \$123.         43205 Trips OF Esophagus Using A Endoscope       \$123.         43206 Esophagus Using A Endoscope       \$124.         43201 Injection OF Distort Esophagus Using A Endoscope       \$124.         4321 Biomaco Contract C   |  |                   |
| 43196 Reserton OV Wire And Diston Of Esophagus Using A Rigid Endoscope  \$157.4  \$197 Vision Suprementation Of Esophagus Using A Rigid Endoscope Through The Nose  \$171.5  \$172.4  \$198 Bopsy Of Esophagus Using A Rigid Endoscope Through The Nose  \$203.3  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope Through The Nose  \$203.3  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope Through The Nose  \$203.3  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope Through The Nose  \$203.3  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$200 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$201 Deagnosts Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$202 Deagnost Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$203 Deagnost Examination Of Esophagus Using A Rigid Endoscope  \$254.4  \$204 Deagnost Of Stant On Esophagus Using A Rigid Endoscope  \$254.4  \$205 Deagnost Of Esophagus Using A Rigid Endoscope  \$254.4  \$205 Deagnost Of Esophagus Using A Rigid Endoscope  \$254.5  \$254.6  \$254.7  \$255 Deagnost Of Esophagus Using A Rigid Endoscope  \$254.7  \$255 Deagnost Deagnost Using A Rigid Endoscope  \$254.7  \$256 Deagnost Deagnost Using A Rigid Endoscope  \$255.6  \$257.5  \$257 Deagnost Deagnost Using A Rigid Endoscope  \$257.5  \$257 Deagnost Deagnost Using A Rigid Endoscope  \$257.5  \$257 Deagnost Deagnost Using A Rigid Endoscope  \$257.5  \$258 Deagnost Deagnost Using A Rigid Endoscope  \$257.5  \$258 Deagnost Deagnost Using A Rigid Endoscope  \$257.5  \$259 Deagnost Deagnost Deagnost Using A Rigid Endoscope  \$ |  |                   |
| 43195   Bagnotes Examination Of Esophagus Using An Endoscope   51784     13196   Bagnotes Examination Of Esophagus Using An Floxible Endoscope Through The Nose   3203     43200   Bagnotes Examination Of Esophagus Using An Floxible Endoscope Through The Mouth   3204     43201   Bigops Of Esophagus Using An Endoscope Through The Mouth   3204     43201   Bigops Of Esophagus Using An Endoscope Through The Mouth   3264     43201   Bigops Of Esophagus Using An Endoscope Through The Mouth   3264     43201   Bigops Of Esophagus Using An Endoscope   3123     43202   Bigops Of Esophagus Using An Endoscope   3123     43203   Bigops Of Esophagus Using An Endoscope   3123     43204   Bigops Of Esophagus Using An Endoscope   3124     43206   Trip (Of Esophagus Using An Endoscope   3124     43206   Trip (Of Esophagus Using An Endoscope   3204     43206   Bigops Of Examination Of Esophagus Using An Endoscope   3204     43210   Bigops Of Examination Of Esophagus Using An Endoscope   3204     43210   Bigops Of Esophagus Using An Endoscope   3204     43211   Bigops Of Esophagus Using An Endoscope   3204     43212   Bigops Of Esophagus Using An Endoscope   3204     43212   Bigops Of Esophagus Using An Endoscope   3204     43213   Bigops Of Esophagus Using An Endoscope   3204     43214   Bigops Of Esophagus Using An Endoscope   3204     43214   Bigops Of Esophagus Using An Endoscope   3204     43216   Baron Of Esophagus Using An Endoscope   3204     43217   Baron Of Esophagus Using An Endoscope   3204     43218   Baron Of Esophagus Using An Endoscope   3204     43218   Baron Of Esophagus Using An Endoscope   3204     43219   Baron Of Esophagus Using An Endoscope   3204     43210   Baron Of Esophagus Using An Endoscope   3204     43220   Baron Of Ciude Wire For Dilation Of Esophagus Using An Endoscope   3304     43221   Baron Of Ciude Wire For Dilation Of Esophagus Using An Endoscope   3304     43222   Baron Of Ciude Wire For Dilation Of Esophagus Using An Endoscope   3304     43223   Baron Off Using An Endoscope   3304     43224   |  | \$167.74          |
| 43197   Diagnostic Examination Of Esophagus Using An Flexible Endoscope Through The Nose   \$203, 43200     Diagnostic Examination Of Esophagus Using An Flexible Endoscope Through The Mouth   \$200, 43201     Diagnostic Diagnostic Examination Of Esophagus Using An Flexible Endoscope   \$254, 43201     Diagnostic Diagnostic Examination Of Esophagus Using An Flexible Endoscope   \$254, 43201     Diagnostic Diagnostic Examination Of Esophagus Using An Flexible Endoscope   \$254, 43202     Diagnostic Examination Of Esophagus Using An Endoscope   \$128, 743206     Microscopic Examination Of Esophagus Using An Endoscope   \$128, 743206     Diagnostic Examination Of Esophagus Using An Endoscope   \$128, 743206     Diagnostic Examination Of Esophagus Using An Endoscope   \$128, 743206     Diagnostic Examination Of Esophagus Using An Endoscope   \$128, 743206     Diagnostic Examination Of Esophagus Using An Endoscope   \$128, 74321     Diagnostic Examination Of Esophagus Using An Endoscope   \$128, 74321     Diagnostic Of Esophagus Using An Endoscope   \$128, 74321     Diagnostic Using Of Esophagus Using An Endoscope   \$128, 74321     Diagnostic Using Of Esophagus Using An Endoscope   \$128, 74321     Diagnostic Using Of Esophagus Using An Endoscope   \$128, 74321     Diagnostic Using Diagnostic Using An Endoscope   \$128, 74322     Diagnostic Using Diagnostic Using An Endoscope   \$128, 74322     Diagnostic Using Diagnostic Using An Endoscope   \$128, 74322  |  | \$178.42          |
| Sponsy OF Esophagus Using A Flexible Endoscope Through The Nose   \$203,  |  | \$171.51          |
| 43201 lipiectors Inte Esophagus Using An Endoscope 43202 libipsoy Cle Esophagus Using An Endoscope 43204 lipiection Of Diated Esophagual Viena Using An Endoscope 43205 lirying Of Esophagus Viena Using An Endoscope 43206 lirying Of Esophagus Viena Using An Endoscope 43206 lirying Of Esophagus Viena Using An Endoscope 5326.6 Disgnostic Examination Of Esophagus Using An Endoscope 5326.6 Disgnostic Examination Of Esophagus Using An Endoscope 43216 Removal Of Tesue Lining Of Esophagus Using An Endoscope 5326.6 3218 lirying Of Esophagus Viena An Endoscope 5326.7 3219 Ill Removal Of Tesue Lining Of Esophagus Using An Endoscope 5326.7 3219 Ill Removal Of Tesue Lining Of Esophagus Using An Endoscope 5321, 32  |  | \$203.96          |
| September   Sept  |  | \$200.41          |
| 19205   Tymp Of Dilated Esophageal Veins Using An Endoscope   \$123.5   | , , , , ,  | \$254.65          |
| 43205 / Ying Of Esophague Vains Using An Endoscope         \$126.7           2020 / Microscopic Examination Of Esophagus Using An Endoscope         \$295.8           2021 / Degree Examination Of Esophagus Using An Endoscope         \$386.2           42210 Endoscope         \$386.2           42211 Removal Of Tissue Lining Of Esophagus Using An Endoscope         \$124.4           42212 Pleacement Of Steron Esophagus Using An Endoscope         \$124.4           42213 Ballon Ollistion Of Esophagus Using An Endoscope         \$128.2           42214 Ballon Ollistion Of Esophagus Using An Endoscope         \$128.2           42215 Removal Of Foreign Bodes in Esophagus Using An Endoscope         \$128.2           42216 Removal Of Esophagus Using A Flexible Endoscope, Large Size         \$128.4           42216 Removal Of Esophagus Using A Flexible Endoscope With Mechanical Snare         \$189.2           42216 Removal Of Esophagus Using A Flexible Endoscope         \$405.2           42217 Removal Of Esophagus Using A Flexible Endoscope         \$407.2           4222 Removal Of Esophagus Using A Flexible Endoscope         \$407.2           4222 Removal Of Esophagus Using A Flexible Endoscope         \$574.4           4222 Removal Of Esophagus Using A Flexible Endoscope         \$574.4           4222 Removal Of Esophagus Storage A Flexible Endoscope         \$589.2           4222 Removal Of Esophagus Storage A Flexible Endoscope  |  | \$261.88          |
| S298.6     Diagnostic Examination Of Esophagus Using An Endoscope   S298.6   Diagnostic Examination Of Esophagus Stomach, And/Or Upper Small Bowel With Repair Of Muscle At Esophagus And Stomach Using An Endoscope   S284.2   S211 Removal Of Tissue Lining Of Esophagus Using An Endoscope   S163.2   S214.4   S212 Placement Of Stent On Esophagus Using An Endoscope   S163.2  |  | \$123.51          |
| Diagnostic Examination Of Esophagus Stornach, And/Or Upper Small Bowel With Repair Of Muscle At Esophagus And Stomach Using An Endoscope 43211 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43211 Removal Of Tissue Lining Of Esophagus Using An Endoscope 43212 Placement Of Stent On Esophagus Using An Endoscope 43213 Dilation Of Esophagus Using An Endoscope 43214 Balloon Dilation Of Esophagus Using An Endoscope 43214 Balloon Dilation Of Esophagus Using An Endoscope 43216 Removal Of Esophagus Using An Endoscope 43216 Removal Of Esophagus Using An Endoscope 43216 Removal Of Esophagus Using An Endoscope With Electrical Cautery 43216 Removal Of Esophagus Using An Endoscope With Electrical Cautery 43217 Removal Of Esophagus Using An Endoscope With Mechanical Snare 43217 Removal Of Esophagus Using An Endoscope With Mechanical Snare 43217 Removal Of Esophagus Using An Endoscope 43217 Removal Of Esophagus Using An Endoscope 43227 Bestention Of Gude Wire For Dilation Of Esophagus Using An Endoscope 43227 Distriction Of Esophagus Using An Endoscope 43227 Distriction Of Esophagus Using An Endoscope 43227 Distriction Of Growths Of Esophagus Using An Endoscope 43229 Destruction Of Growths Of Esophagus Using An Endoscope 43221 Ultrasound Examination Of Esophagus Using An Endoscope 43222 Distriction Of Growths Of Esophagus Using An Endoscope 43223 Distriction Of Growths Of Esophagus Using An Endoscope 53223 Distriction Of Growths Of Esophagus Using An Endoscope 53224 Distriction Of Growths Of Esophagus Using An Endoscope 53232 Distriction Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 53235 Distriction Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 53237 Distriction Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 53236 Distriction Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 53237 Distriction Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 532341 Inserioun Of Caletter Of The Esophagus Stomach, And/Or Upper Small Bowel Us  |  |                   |
| 1848-02   1849  |  | \$296.84          |
| September   Sept  |  | \$386.27          |
| 18312   Placement Of Stent On Esophagus Using An Endoscope   \$16.93.   |  |                   |
| 12412   Balloon Dilation Of Esophagus Using An Endoscope   1275   |  | \$169.32          |
| 43215 Removal Of Foreign Bodies In Esophagus Using An Endoscope 43216 Removal Of Esophageal Polyps Or Growths Using An Endoscope With Electrical Cautery 43217 Removal Of Esophageal Polyps Or Growths Using An Endoscope With Mechanical Snare 43217 Removal Of Esophageal Polyps Or Growths Using An Endoscope 43226 Insertion Of Guide Wire For Dilation Of Esophagus Using A Fisoble Endoscope 43226 Insertion Of Guide Price For Dilation Of Esophagus Using An Endoscope 43227 Control Of Esophageal Bleeding Using An Endoscope 43229 Destruction Of Growths Of Esophagus Using An Endoscope 5715.6 43231 Ultrasound Examination Of Esophagus Using An Endoscope 5716.6 43232 Ultrasound Guided Fine Needle Aspiration Or Biopsy Of Esophagus Using An Endoscope 5145.6 43232 Ultrasound Guided Fine Needle Aspiration Or Biopsy Of Esophagus Using An Endoscope 5145.7 52323 Bilaion Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 514323 Bilaion Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 514323 Bilaion Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 514323 Bilaion Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 514323 Bilaion Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 514323 Bilaion Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 514323 Bilaion Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 514324 Insertion Of Carbeter Or Upper Small Bowel Using An Endoscope 514324 Insertion Of Carbeter Or Tube In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 5144.1 5144 Insertion Of Carbeter Or Tube In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 5144.1 5145 Insertion Of Carbeter Or Tube In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 5144.1 5146 Insertion Of Upper Or Upper Small Bowel Using An Endoscope 5144.1 5146 Insertion Of Stomach Tube Using An Endoscope 5144.1 5147 Insertion Of Stomach Tube Using   |  | \$1,248.26        |
| 43216   Removal Of Esophageal Polyps Or Growths Using An Endoscope With Electrical Cautery   \$417.2  | 43214 Balloon Dilation Of Esophagus Using A Flexible Endoscope, Large Size   | \$175.37          |
| 43217 Removal Of Esophagus Using A Flexible Endoscope  \$674.3 43220 Balloon Dilation Of Esophagus Using A Flexible Endoscope  \$674.3 43220 Balloon Dilation Of Esophagus Using A Flexible Endoscope  \$897.4 43221 Dissertion Of Guide Wire For Dilation Of Esophagus Using An Endoscope  \$897.4 43222 Dissertion Of Guide Wire For Dilation Of Esophagus Using An Endoscope  \$897.4 43223 Dissertion Of Guide Wire For Dilation Of Esophagus Using An Endoscope  \$897.4 43221 Ultrasound Examination Of Esophagus Using An Endoscope  \$145.5 43231 Ultrasound Examination Of Esophagus Using An Endoscope  \$182.3 43232 Ultrasound Guided Fine Needle Aspiration Of Biopsy Of Esophagus Using An Endoscope  \$182.3 43233 Balloon Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope  \$182.3 43236 Injections Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope  \$337.2 43237 Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope  \$338.3 43238 Ultrasound Guided Needle Aspiration Or Biopsy and Esophagus Using An Endoscope  \$338.3 43238 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope  \$339.3 43230 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope  \$337.2 43240 Prainage Of Cryst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope  \$337.2 43241 Insertion Of Catheter Or Tube In Esophagus Stomach And/Or Upper Small Bowel Using An Endoscope  \$337.2 43242 Insertion Of Catheter Or Tube In Esophagus Using An Endoscope  \$34240 Prainage Of Cryst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope  \$34241 Insertion Of Isatheter Verins Of Stomach And/Or Upper Small Bowel Using An Endoscope  \$34242 Insertion Of Usitated Verins Of Stomach And/Or Upper Small Bowel Using An Endoscope  \$34243 Injection Of Dilated Verins Of Stomach And/Or Upper Small Bowel Using An Endoscope  \$34245 Insertion Of Stomach Using An Endoscope  \$34246 Insertion Of Stomach Ortal Using An Endoscope  \$34247 Removal Of Polyps                                      | 43215 Removal Of Foreign Bodies In Esophagus Using An Endoscope  | \$294.87          |
| 4322D Balloon Dilation Of Esophagus Using A Flexible Endoscope       \$674.3         4322F Insertion Of Guide Wire For Dilation Of Esophagus Using An Endoscope       \$360.8         4322F Control Of Esophagus Using An Endoscope       \$715.6         4323D Destruction Of Growths Of Esophagus Using An Endoscope       \$715.6         43231 Ultrasound Examination Of Esophagus Using An Endoscope       \$145.5         43232 Ultrasound Guided Fine Needle Aspiration Or Biopsy Of Esophagus Using An Endoscope       \$182.3         43233 Balloon Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$182.3         43233 Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$379.9         43234 Dirasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$379.9         43237 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope       \$379.9         43238 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope       \$379.2         43240 Dirainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$376.2         43241 Dirainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$375.5         43242 Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$367.2         43243 Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endo   |  | \$409.99          |
| 43226 Insertion Of Guide Wire For Dilation Of Esophagus Using An Endoscope       \$587.4         43227 Control Of Esophageal Bleeding Using An Endoscope       \$715.6         43229 Destruction Of Growths Of Esophagus Using An Endoscope       \$715.6         43231 Ultrasound Examination Of Esophagus Using An Endoscope       \$145.5         43232 Ultrasound Guided Fine Needle Aspiration Of Biopsy Of Esophagus Using An Endoscope       \$182.3         43233 Balloon Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$183.3         43235 Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$373.9         43236 Injections Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$379.9         43237 Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$379.9         43238 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope       \$375.2         43239 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope       \$376.2         43240 Drainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$376.2         43240 Drainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$357.4         43241 Insertion Of Catheter Or Tube In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$357.5         43242 Ultrasound Guided Viens Of Stomach And/Or Esophagus, S   |  | \$417.21          |
| 43222   Destruction Of Esophagus Bleeding Using An Endoscope   \$977.4  |  |                   |
| 43221   Ultrasound Examination Of Esophagus Using An Endoscope   \$145.5  |  |                   |
| 43231 Ultrasound Examination Of Esophagus Using An Endoscope   \$145.5   43232 Ultrasound Guided Fine Needle Aspiration Or Biopsy Of Esophagus Using An Endoscope   \$183.3   43233 Bildoon Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$183.3   43233 Bildoon Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$337.3   43236 Injections Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$337.3   43237 Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$338.3   43238 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope   \$323.5   43239 Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$336.4   43240 Drainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$357.5   43241 Dirasound Guided Needle Aspiration Or Biopsy Of Esophagus Stomach And/Or Upper Small Bowel Using An Endoscope   \$347.1   43242 Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$347.0   43242 Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$347.0   43242 Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$349.0   43243 Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope   \$249.0   43244 Insertion Of Stomach Outlet Using An Endoscope   \$249.0   43245 Dilation Of Stomach Outlet Using An Endoscope   \$349.0   43246 Insertion Of Stomach And/Or Esophagus Using An Endoscope   \$349.0   43247 Removal Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$349.0   43248 Insertion Of Guide Wire With Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$349.0   43250 Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$349.0   43251 Removal Of   |  |                   |
| 43232 Ultrasound Guided Fine Needle Aspiration Or Biopsy Of Esophagus Using An Endoscope       \$182.3         43233 Balloon Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$337.2         43236 Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$337.2         43237 Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$379.2         43238 Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$358.2         43238 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope       \$225.3         43239 Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope       \$376.2         43240 Drainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$376.2         43241 Insertion Of Catheter Or Tube In Esophagus Stomach And/Or Upper Small Bowel Using An Endoscope       \$347.2         43242 Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$347.2         43242 Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope       \$347.2         43243 Injection Of Stomach Tube Using An Endoscope       \$225.5         43244 Ultrasound Guided Needle Aspiration Or Biophagus Using An Endoscope       \$249.8         43245 Dilation Of Stomach Outlet Using An Endoscope       \$249.8  |  |                   |
| 43233   Balloon Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$193.8   43236   Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$337.9   43237   Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$198.9   43238   Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$235.9   43238   Ultrasound Guided Needle Aspiration Or Biopsies Of Esophagus Using An Endoscope   \$235.9   43239   Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$357.5   43240   Drainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$357.5   43241   Insertion Of Catheter Or Tube In Esophagus Stomach And/Or Upper Small Bowel Using An Endoscope   \$357.5   43242   Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$357.5   43242   Ultrasound Guided Veins Of Stomach And/Or Esophagus Using An Endoscope   \$267.0   43243   Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope   \$257.0   43244   Tying Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope   \$249.0   43245   Dilation Of Stomach Outlet Using An Endoscope   \$249.0   43246   Insertion Of Stomach And/Or Esophagus Using An Endoscope   \$249.0   43247   Removal Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$299.6   43248   Insertion Of Guide Wire With Dilation Of Esophagus Using An Endoscope   \$316.2   43249   Insertion Of Guide Wire With Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$316.2   43249   Insertion Of Guide Wire With Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$316.2   43250   Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$324.0   43251   Removal Of Teisue Lining Of Esophagus, Stomach, And/Or Upper Small Bowel Using A   |  |                   |
| 337.2   |  | \$193.92          |
| 43237 Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$198.943238 Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$376.243240 Drainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$357.543241 Insertion Of Catheter Or Tube In Esophagus Stomach And/Or Upper Small Bowel Using An Endoscope\$357.543242 Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$247.043243 Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$267.043243 Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$215.943244 Tying Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$249.043245 Dilation Of Stomach Outlet Using An Endoscope\$249.043246 Insertion Of Stomach Tube Using An Endoscope\$200.943247 Removal Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$316.243248 Insertion Of Guide Wire With Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$319.243249 Balloon Dilation Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$319.243250 Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope With Electrical Cautery\$447.843251 Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$330.543252 Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$325.043253 Injection Of Diagnostic Or Therapeut  |  | \$337.21          |
| 43237 Ultrasound Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$198.943238 Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$376.243240 Drainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$357.543241 Insertion Of Catheter Or Tube In Esophagus Stomach And/Or Upper Small Bowel Using An Endoscope\$357.543242 Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$247.043243 Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$267.043243 Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$245.043244 Tying Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$249.043245 Dilation Of Stomach Outlet Using An Endoscope\$249.043246 Insertion Of Stomach Tube Using An Endoscope\$249.043247 Removal Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$316.243248 Insertion Of Guide Wire With Dilation Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$319.243249 Balloon Dilation Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$319.243250 Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope With Electrical Cautery\$447.843251 Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$330.543252 Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$325.043253 Injection Of Diagnostic Or Therapeut  | 43236 Injections Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope  | \$379.98          |
| Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$376.2   |  | \$198.95          |
| A3240   Drainage Of Cyst Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope   \$357.5   |  | \$235.92          |
| Insertion Of Catheter Or Tube In Esophagus Stomach And/Or Upper Small Bowel Using An Endoscope   \$144.1  |  | \$376.26          |
| 43242Ultrasound Guided Needle Aspiration Or Biopsy Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$267.043243Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$215.943244Tying Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$249.043245Dilation Of Stomach Outlet Using An Endoscope\$437.243246Insertion Of Stomach Tube Using An Endoscope\$200.943247Removal Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$316.243248Insertion Of Guide Wire With Dilation Of Esophagus Using An Endoscope\$299.643249Balloon Dilation Of Esophagus, Stomach And Upper Small Bowel Using A Flexible Endoscope\$813.043250Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope With Electrical Cautery\$447.843251Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope Using A Mechanical Snare\$371.643252Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$330.543253Injection Of Diagnostic Or Therapeutic Substances Or Markers In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043254Removal Of Tissue Lining Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043257Heat Delivery To Muscle At Esophagus And/Or Stomach To Treat Gastric Reflux Using An Endoscope\$211.743259Ultrasound Examination Of Esophagus, Stomach And/Or Upper Small Bowel Using An Endoscope\$229.443260   |  | \$357.58          |
| 43243   Injection Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope   \$215.9   |  | \$144.17          |
| 43244Tying Of Dilated Veins Of Stomach And/Or Esophagus Using An Endoscope\$249.043245Dilation Of Stomach Outlet Using An Endoscope\$437.243246Insertion Of Stomach Tube Using An Endoscope\$200.943247Removal Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$316.243248Insertion Of Guide Wire With Dilation Of Esophagus Using An Endoscope\$299.643249Balloon Dilation Of Esophagus, Stomach And Upper Small Bowel Using A Flexible Endoscope\$813.043250Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope With Electrical Cautery\$447.843251Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope Using A Mechanical Snare\$371.643252Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$330.543253Injection Of Diagnostic Or Therapeutic Substances Or Markers In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043254Removal Of Tissue Lining Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043255Control Of Bleeding Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$247.043259Ultrasound Examination Of Esophagus, Stomach And/Or Upper Small Bowel Using An Endoscope\$227.043260Diagnostic Examination Of Esophagus, Stomach And/Or Upper Small Bowel Using An Endoscope\$229.443260Diagnostic Examination Of Gallbladder And Pancreatic, Liver, And Bile Ducts Using An Endoscope Via Mouth\$334.443261<   |  | \$267.09          |
| 3245   Dilation Of Stomach Outlet Using An Endoscope   \$437.2  | ·  |                   |
| 43246 Insertion Of Stomach Tube Using An Endoscope 43247 Removal Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 43248 Insertion Of Guide Wire With Dilation Of Esophagus Using An Endoscope 43249 Balloon Dilation Of Esophagus, Stomach And Upper Small Bowel Using A Flexible Endoscope 43249 Balloon Dilation Of Esophagus, Stomach And Upper Small Bowel Using A Flexible Endoscope \$813.0 43250 Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope With Electrical Cautery 43251 Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope Using A Mechanical Snare 43252 Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 43253 Injection Of Diagnostic Or Therapeutic Substances Or Markers In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 43254 Removal Of Tissue Lining Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 43255 Control Of Bleeding Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope 43257 Heat Delivery To Muscle At Esophagus And/Or Stomach To Treat Gastric Reflux Using An Endoscope 43259 Ultrasound Examination Of Esophagus, Stomach And/Or Upper Small Bowel Using An Endoscope 43260 Diagnostic Examination Of Gallbladder And Pancreatic, Liver, And Bile Ducts Using An Endoscope, Including Collection Of Specimen(S) 43261 Biopsy Of Gallbladder, Pancreatic, Liver, And Bile Ducts Using A Flexible Endoscope Via Mouth 43262 Incision Of Pancreatic Outlet Using A Flexible Endoscope Via Mouth 43262 Incision Of Pancreatic Outlet Using A Flexible Endoscope Via Mouth 43262  |  |                   |
| 43247Removal Of Foreign Bodies Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$316.243248Insertion Of Guide Wire With Dilation Of Esophagus Using An Endoscope\$299.643249Balloon Dilation Of Esophagus, Stomach And Upper Small Bowel Using A Flexible Endoscope\$813.043250Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope With Electrical Cautery\$447.843251Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope Using A Mechanical Snare\$371.643252Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$330.543253Injection Of Diagnostic Or Therapeutic Substances Or Markers In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043254Removal Of Tissue Lining Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043255Control Of Bleeding Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$260.143257Heat Delivery To Muscle At Esophagus And/Or Stomach To Treat Gastric Reflux Using An Endoscope\$211.743259Ultrasound Examination Of Esophagus, Stomach And/Or Upper Small Bowel Using An Endoscope\$229.443260Diagnostic Examination Of Gallbladder And Pancreatic, Liver, And Bile Ducts Using An Endoscope, Including Collection Of Specimen(S)\$327.243261Biopsy Of Gallbladder, Pancreatic, Liver, And Bile Ducts Using A Flexible Endoscope Via Mouth\$343.443262Incision Of Pancreatic Outlet Using A Flexible Endoscope Via Mouth\$362.7   | ů i  | \$200.96          |
| 43248Insertion Of Guide Wire With Dilation Of Esophagus Using An Endoscope\$299.643249Balloon Dilation Of Esophagus, Stomach And Upper Small Bowel Using A Flexible Endoscope\$813.043250Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope With Electrical Cautery\$447.843251Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope Using A Mechanical Snare\$371.643252Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$330.543253Injection Of Diagnostic Or Therapeutic Substances Or Markers In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043254Removal Of Tissue Lining Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$247.043255Control Of Bleeding Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$506.143257Heat Delivery To Muscle At Esophagus And/Or Stomach To Treat Gastric Reflux Using An Endoscope\$211.743259Ultrasound Examination Of Esophagus, Stomach And/Or Upper Small Bowel Using An Endoscope\$229.443260Diagnostic Examination Of Gallbladder And Pancreatic, Liver, And Bile Ducts Using An Endoscope, Including Collection Of Specimen(S)\$327.243261Biopsy Of Gallbladder, Pancreatic, Liver, And Bile Ducts Using A Flexible Endoscope Via Mouth\$343.443262Incision Of Pancreatic Outlet Using A Flexible Endoscope Via Mouth\$362.7   |  | \$316.21          |
| 43249Balloon Dilation Of Esophagus, Stomach And Upper Small Bowel Using A Flexible Endoscope\$813.043250Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope With Electrical Cautery\$447.843251Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope Using A Mechanical Snare\$371.643252Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$330.543253Injection Of Diagnostic Or Therapeutic Substances Or Markers In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043254Removal Of Tissue Lining Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$247.043255Control Of Bleeding Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$506.143257Heat Delivery To Muscle At Esophagus And/Or Stomach To Treat Gastric Reflux Using An Endoscope\$211.743259Ultrasound Examination Of Esophagus, Stomach And/Or Upper Small Bowel Using An Endoscope\$229.443260Diagnostic Examination Of Gallbladder And Pancreatic, Liver, And Bile Ducts Using An Endoscope, Including Collection Of Specimen(S)\$327.243261Biopsy Of Gallbladder, Pancreatic, Liver, And Bile Ducts Using A Flexible Endoscope Via Mouth\$343.443262Incision Of Pancreatic Outlet Using A Flexible Endoscope Via Mouth\$362.7  |  | \$299.65          |
| 43251Removal Of Polyps Or Growths Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope Using A Mechanical Snare\$371.643252Microscopic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$330.543253Injection Of Diagnostic Or Therapeutic Substances Or Markers In Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$225.043254Removal Of Tissue Lining Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$247.043255Control Of Bleeding Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope\$506.143257Heat Delivery To Muscle At Esophagus And/Or Stomach To Treat Gastric Reflux Using An Endoscope\$211.743259Ultrasound Examination Of Esophagus, Stomach And/Or Upper Small Bowel Using An Endoscope\$229.443260Diagnostic Examination Of Gallbladder And Pancreatic, Liver, And Bile Ducts Using An Endoscope, Including Collection Of Specimen(S)\$327.243261Biopsy Of Gallbladder, Pancreatic, Liver, And Bile Ducts Using A Flexible Endoscope Via Mouth\$343.443262Incision Of Pancreatic Outlet Using A Flexible Endoscope Via Mouth\$362.7  |  | \$813.03          |
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| 43262 Incision Of Pancreatic Outlet Using A Flexible Endoscope Via Mouth \$362.7  |  | \$343.47          |
| 43263 Pressure Measurement Of Pancreatic Or Bile Duct Sphincter Using A Flexible Endoscope Via Mouth \$326.4  |  | \$362.75          |
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| 43270 Laparoscopy, Surgical, Esophagopather Fundopistals (Eg. Masen, Tougher Procedures)  \$1,10.43 42281 Laparoscopy, Surgical, Rappai OP Parescophageal Hernis, Includes Fundopistary, Winne Performed. Without Implantation Of Meeth \$1,50.53 42281 Laparoscopy, Surgical, Rappai OP Parescophageal Hernis, Includes Fundopistary, Winne Performed. With implantation Of Meeth \$1,50.53 42281 Laparoscopy, Surgical, Rappai OP Parescophageal Hernis, Includes Fundopistary, Winne Performed. With Implantation Of Meeth \$1,50.53 42282 Laparoscopy, Surgical, Rappai OP Parescophageal Hernis, Includes Fundopistary, Winne Performed. With Implantation Of Meeth \$1,50.53 42282 Removal Of Lagoristation Device in Sphintest Of Ecophagua Using A Febrible Endoscope Visi Mouth \$1,50.54 42382 Removal Of Lagoristation Device From Sphintest Of Ecophagua Using A Febrible Endoscope Visi Mouth \$1,50.54 42382 Removal Of Lower Esophagua And Partial Removal Of Storman Using An Endoscope \$1,50.64 42382 Removal Of Lower Esophagua And Partial Removal Of Storman Using An Endoscope \$1,50.64 43830 Removal Of Edutor, Included Procedure Removal Company Company (Company Company Com   |       | , , ,  |                  |
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| 43228 f. Bernoval Of Augmentation Device From Splancter Of Esophagus Using A Florible Endoscope       \$2,782.8         43228 f. Bernoval Of Lower Esophagus And Parial Removal Of Stornach Using An Endoscope       \$2,782.8         43228 f. Removal Of Lower Esophagus and Parial Removal Of Stornach Using An Endoscope       \$3,206.5         43289 f. Removal Of Lower Esophagus and Parial Removal Of Stornach Using An Endoscope       \$3,206.5         43290 Flacement Of Esophagus Using An Endoscope       \$2,245.7         43290 Flacement Of Esophagus Defect Wilmout Repair Of Altonomal Dianage Tract, Convical Approach       \$5,007.2         43310 Repair Of Esophagus Defect Wilmout Repair Of Altonomal Dianage Tract, Convical Approach       \$5,007.2         43311 Repair Of Esophagus Defect Wilmout Repair Of Altonomal Dianage Tract, Thoracc Approach       \$1,328.8         43312 Repair Of Esophagus Defect Wilmout Repair Of Altonomal Dianage Tract, Thoracc Approach, Wilmout Repair Of Congenital Trachocoscophagus Pract Congenital Trachocoscophagus Pract Congenital Trachocoscophagus Pract Congenital Defect, (Plass Repair Of Reconstruction), Thoracc Approach, Wilh Repair Of Congenital Trachocoscophagus And Stornach Though The Abdomen       \$2,742.9         4331 Repair Of Musicle Al Lower Esophagus And Stornach Though The Abdomen       \$1,265.6  |       |  | \$137.46         |
| 43288 [ Removal Of Esophagus And Partial Removal Of Stomach Using An Endoscope       \$3,268.6         43287 [ Removal Of Lewer Esophagus And Partial Removal Of Stomach Using An Endoscope       \$3,269.6         43288 [ Removal Of Esophagus Using An Endoscope       \$3,269.6         43289 [ Initiated Laptanescope) Procedure, Esophagus       Price By Report         43290 [ Removal Of Esophagus Laptanescope]       \$245.5         43290 [ Removal Of Esophagus Laptanescope]       \$245.5         43290 [ Removal Of Esophagus Defect Without Repair Of Anormal Dinarge Tract, Carvelal Approach       \$27.72         43300 [ Repair Of Esophagus Defect Without Repair Of Anormal Dinarge Tract, Carvelal Approach       \$17.24         43310 [ Remover Of Esophagus Defect Without Repair Of Anormal Dinarge Tract, Carvelal Approach       \$17.24         43312 [ Remover Of Esophagus Defect With Repair Of Anormal Dinarge Tract, Carvelal Approach       \$17.24         43312 [ Remover Of Esophagus Defect With Repair Of Anormal Dinarge Tract, Dinarge Anormal Promoter Carvelanes (Approach)       \$1.22.6         43313 [ Remover Of Musicia Part Laptanescophagus Prof Compenial Defect, (Pleaste Repair Of Reconstruction), Thoracic Approach, With Repair Of Congenial Tracheosophagus Prof Compenial Defect, (Pleaste Repair Of Reconstruction), Thoracic Approach, With Repair Of Congenial Tracheosophagus Prof Compenial Defect, (Pleaste Repair Of Reconstruction), Thoracic Approach, With Repair Of Busicia Part Laptanescophagus Prof Compenial Defect, (Pleaste Repair Of Reconstruction)       \$1,22.5         43320 [ Re  | 43284 | Insertion Of Augmentation Device In Sphincter Of Esophagus Using A Flexible Endoscope Via Mouth  | \$582.93         |
| Sacrosing College   Sacr  | 43285 | Removal Of Augmentation Device From Sphincter Of Esophagus Using A Flexible Endoscope Via Mouth  | \$599.55         |
| March   Marc  | 43286 | Removal Of Esophagus And Partial Removal Of Stomach Using An Endoscope   | \$2,782.89       |
| March   Marc  |       |  | \$3,095.69       |
| Price By Report   Price By R  |       | i i  | \$3,269.97       |
| Security Comment Of Balloon in Stomach For Weight Loss Using Flexible Endoscope   \$3,245;5   |       | , ,  | Price By Report  |
| September   Sept  |       |  |                  |
| Sapar Of Esophagual Defect Without Repair Of Abnormal Dranage Tract, Cervical Approach   \$1,003.7   Sapar Of Esophagual Defect With Repair Of Abnormal Dranage Tract, Cervical Approach   \$1,003.7   Sapar Of Esophagual Defect With Repair Of Abnormal Dranage Tract, Thoracic Approach   \$1,294.7   Saja Of Esophagual Defect With Repair Of Abnormal Dranage Tract, Thoracic Approach   Sophagoplasty For Congenital Defect, (Plastic Repair Of Reconstruction), Thoracic Approach; Without Repair Of Congenital Sephagoplasty For Congenital Defect, (Plastic Repair Of Reconstruction), Thoracic Approach; With Office Property of Sephagoplasty For Congenital Defect, (Plastic Repair Of Reconstruction), Thoracic Approach; With Repair Of Congenital Tracheoesophageal Saja Office Repair Of Reconstruction), Thoracic Approach; With Repair Of Congenital Tracheoesophageal Saja Office Repair Of Reconstruction), Thoracic Approach; With Repair Of Congenital Tracheoesophageal Saja Office Repair Of Muscle At Lower Esophagua And Stomach, Thoracit Approach   Saja Office Repair Office R   |       | ů ů i  |                  |
| 43301 Repair Of Esophageal Defect With Repair Of Ahnormal Dranage Tract, Carvical Approach   43310 Repair Of Esophageal Defect Without Repair Of Ahnormal Dranage Tract, Thoracic Approach   43313 Repair Of Esophageal Defect With Repair Of Ahnormal Dranage Tract, Thoracic Approach   43313 Tracheoscophageal Fistula   43313 Tracheoscophageal Fistula   52,562.4     43314 Fistula   43324 Repair Of Muscle At Lower Esophagus And Stomach Through The Abdomen   432,742.9     43320 Repair Of Muscle At Lower Esophagus And Stomach Through The Abdomen   432,742.9     43327 Repair Of Muscle At Lower Esophagus And Stomach Through The Abdomen   432,742.9     43328 Repair Of Muscle At Lower Esophagus And Stomach University   432,742.9     43328 Repair Of Muscle At Lower Esophagus And Stomach University   432,742.9     43329 Repair Of Muscle At Lower Esophagus And Stomach University   432,742.9     43320 Repair Of Muscle At Lower Esophagus And Stomach University   432,742.9     43321 Repair Of Muscle At Lower Esophagus And Stomach University   432,742.9     43321 Repair Of Muscle At Lower Esophagus And Stomach University   432,742.9     43322 Repair Of Muscle At Lower Esophagus And Stomach University   432,742.9     43333 Repair Of Parassophageal Hernia Via Laparotomy, Without Mesh Implant   431,745.9     43334 Repair Of Parassophageal Hernia Via Laparotomy, Without Mesh Implant   431,833,4     43334 Repair Of Parassophageal Hernia Via Thoracotomy, With Mesh Implant   431,832,4     43335 Repair Of Parassophageal Hernia Via Thoracotomy, Without Mesh Implant   431,832,4     43336 Repair Of Parassophageal Hernia Via Abdominal Incision, Without Mesh Implant   431,832,4     43336 Repair Of Parassophageal Hernia Via Abdominal Incision, Without Mesh Implant   431,832,4     43336 Repair Of Parassophageal Hernia Via Abdominal Incision, Without Mesh Implant   431,832,4     43336 Repair Of Parassophageal Lengthenia Procedure   431,832,4     43337 Repair Of Parassophageal Lengthenia Procedure   431,832,4     43338 Repair Of Parassophageal H  |       | ů ů i  |                  |
| 13310   Repair Of Esophageal Defect Without Repair Of Abnormal Drainage Tract, Thoracic Approach   \$1,324.7  |       |  |                  |
| Separa of Esophagea Defect With Repair Of Abnormal Drainage Tract. Thoracic Approach; Without Repair Of Congenital  |       | 1 1  | + /              |
| Espohagoplasty For Congenital Defect, (Plastic Repair Or Reconstruction), Thoracic Approach; Without Repair Of Congenital  \$2,662.4  Espohagoplasty For Congenital Defect, (Plastic Repair Or Reconstruction), Thoracic Approach; With Repair Of Congenital Tracheosophageal  \$2,742.9  43324 Fistule  \$2,742.9  43325 Repair Of Muscle Al Lower Esophagus And Storach Through The Abdomen  \$1,262.8  43327 Repair Of Muscle Al Lower Esophagus And Storach Through The Abdomen  \$1,262.8  43328 Repair Of Muscle Al Lower Esophagus And Storach, Laparotomy  \$2,803.5  43328 Repair Of Muscle Al Lower Esophagus And Storach, Laparotomy  \$30,803.6  \$1,185.9  43330 Repair Of Esophagus. Abdominal Approach  \$1,185.9  43331 Repair Of Paraesophageal Hernia Va Laparotomy, Without Mesh Implant  \$1,130.3  43331 Repair Of Paraesophageal Hernia Va Laparotomy, Without Mesh Implant  \$1,130.3  43331 Repair Of Paraesophageal Hernia Va Laparotomy, Without Mesh Implant  \$1,130.3  43331 Repair Of Paraesophageal Hernia Va Laparotomy, Without Mesh Implant  \$1,130.3  43331 Repair Of Paraesophageal Hernia Va Laparotomy, Without Mesh Implant  \$1,130.3  43337 Repair Of Paraesophageal Hernia Va Abdominal Incision, Without Mesh Implant  \$1,130.3  43337 Repair Of Paraesophageal Hernia Va Abdominal Incision, Without Mesh Implant  \$1,264.4  43341 Repair Bernia Va Abdominal Incision, Without Mesh Implant  \$1,367.4  43357 Repair Of Paraesophageal Hernia Va Abdominal Incision, Without Mesh Implant  \$1,367.4  43341 Partial Removal Of Esophagus, And Storach, Abdominal Approach  43341 Partial Removal Of Esophagus, And Storach, Abdominal Approach  43342 Partial Removal Of Esophagus, And Storach, Thoracic Approach  43343 Partial Removal Of Esophagus, Thoracic  51,362.6  43440 Lipation Of Esophagus, To Storach After Previous Partial Removal Of Bypass Of Esophagus, With Insertion Of Portion Of Intestine  43440 Lipation Of Esophagus, Thoracic Or Addominal Approach  43450 Reconnection Of Esophagus, Thoracic Or Addominal Approach  43460 Esophagus University of Esophagus, Thorac  |       |  | . ,              |
| September   Sept  | 43312 |  | \$1,378.09       |
| Esophagoplasty For Congenital Defect, (Plastic Repair Or Reconstruction), Thoracic Approach; With Repair Of Congenital Tracheoesophageal \$2,742.9 43320 Repair Of Muscle At Lower Esophagus And Stomach, Though The Abdomen \$1,205.2 43327 Repair Of Muscle At Lower Esophagus And Stomach, Thoracid Park \$1,205.2 43327 Repair Of Muscle At Lower Esophagus And Stomach, Laparotomy \$200.5 43328 Repair Of Muscle At Lower Esophagus And Stomach, Laparotomy \$200.5 43328 Repair Of Muscle At Lower Esophagus And Stomach, Laparotomy \$200.5 43328 Repair Of Esophagus, Abdominal Approach \$31,186,9 43331 Repair Of Esophagus, Abdominal Approach \$31,186,9 43331 Repair Of Peraesophageal Hernia Via Laparotomy, Without Mesh Implant \$31,187,187 43332 Repair Of Paraesophageal Hernia Via Laparotomy, Without Mesh Implant \$31,187,187 43334 Repair Of Paraesophageal Hernia Via Thoracotomy, Without Mesh Implant \$31,187,187 43335 Repair Of Paraesophageal Hernia Via Thoracotomy, Without Mesh Implant \$31,187,187 43336 Repair Of Paraesophageal Hernia Via Abdominal Incision, Without Mesh Implant \$31,287,287 43336 Repair Of Paraesophageal Hernia Via Abdominal Incision, Without Mesh Implant \$31,287,287 43336 Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant \$31,287,287 43337 Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant \$31,287,287 43340 Partial Removal Of Esophagus And Stomach, Abdominal Incision, With Mesh Implant \$31,287,287 43341 Partial Removal Of Esophagus And Stomach, Abdominal Approach \$32,287 43341 Partial Removal Of Esophagus And Stomach, Abdominal Approach \$32,287 43342 Partial Removal Of Esophagus And Stomach, Abdominal Approach \$32,287 43343 Partial Removal Of Esophagus To Stomach Alter Previous Partial Removal Or Bypass Of Esophagus \$32,287 43440 Ligation, Direct, Esophagus To Stomach Alter Previous Partial Removal Or Bypass Of Esophagus \$32,287 43440 Ligation, Direct, Esophagus To Stomach Alter Previous Partial Removal Or Bypass Of Esophagus \$32,288 43440 Ligation Or Staphagus To Stomach  | 40046 |  | <b>00 500 44</b> |
| S2,7429   3320   Repair Of Muscle At Lower Esophagus And Stomach Through The Abdomen   \$1,238,81   3320   Repair Of Muscle At Lower Esophagus And Stomach, With Patch   \$1,208,81   3321   Repair Of Muscle At Lower Esophagus And Stomach, Laparotomy   \$800.55   3328   Repair Of Muscle At Lower Esophagus And Stomach, Laparotomy   \$800.55   3328   Repair Of Muscle At Lower Esophagus And Stomach, Toracotomy   \$811,91   3330   Repair Of Esophagus, Thoracic Approach   \$1,185.9   3331   Repair Of Esophagus, Thoracic Approach   \$1,185.9   3332   Repair Of Pranesophageal Hernia Via Laparotomy, With Mesh Implant   \$1,230.4   3333   Repair Of Pranesophageal Hernia Via Laparotomy, Without Mesh Implant   \$1,230.4   3334   Repair Of Pranesophageal Hernia Via Laparotomy, Without Mesh Implant   \$1,230.4   3335   Repair Of Pranesophageal Hernia Via Thoracotomy, Without Mesh Implant   \$1,285.4   3336   Repair Of Pranesophageal Hernia Via Thoracotomy, Without Mesh Implant   \$1,285.4   3337   Repair Of Pranesophageal Hernia Via Thoracotomy, Without Mesh Implant   \$1,285.4   3338   Repair Of Pranesophageal Hernia Via Abdominal Incision, Without Mesh Implant   \$1,285.4   3337   Repair Of Pranesophageal Hernia Via Abdominal Incision, Without Mesh Implant   \$1,285.4   3338   Repair Of Pranesophageal Hernia Via Abdominal Incision, Without Mesh Implant   \$1,285.4   3337   Repair Of Pranesophageal Hernia Via Abdominal Incision, Without Mesh Implant   \$1,285.4   3338   Repair Of Pranesophageal Hernia Via Abdominal Incision, Without Mesh Implant   \$1,285.4   3338   Repair Of Pranesophageal Hernia Via Abdominal Incision, Without Mesh Implant   \$1,285.4   3338   Repair Of Pranesophageal Hernia Via Abdominal Incision, Without Mesh Implant   \$1,285.4   3338   Repair Of Pranesophageal Hernia Via Abdominal Incision, With Mesh Implant   \$1,285.4   3339   Repair Of Pranesophageal Hernia Via Abdominal Incision, With Mesh Implant   \$1,285.4   3330   Repair Of Pranesophageal Hernia Via Abdominal Incision, With Mesh Implant   \$1,285.4   3331   Repair  | 43313 | 1 0  | \$2,562.41       |
|   | 4004  |  | 0074004          |
|   |       |  |                  |
| \$905.55  |       | ,  |                  |
| Sast   |       |  | \$1,205.26       |
| 43330 Repair Of Esophagus, Abdominal Approach   \$1,185.9     43331 Repair Of Esophagus, Thoracic Approach   \$1,174.5     43332 Repair Of Paraesophageal Hemia Via Laparotomy, Without Mesh Implant   \$1,130.3     43333 Repair Of Paraesophageal Hemia Via Laparotomy, Without Mesh Implant   \$1,283.4     43334 Repair Of Paraesophageal Hemia Via Laparotomy, Without Mesh Implant   \$1,283.4     43334 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant   \$1,283.4     43334 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant   \$1,285.4     43336 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant   \$1,285.4     43337 Repair Of Paraesophageal Hemia Via Abdominal Incision, Without Mesh Implant   \$1,285.2     43336 Repair Of Paraesophageal Hemia Via Abdominal Incision, Without Mesh Implant   \$1,285.2     43337 Repair Of Paraesophageal Hemia Via Abdominal Incision, Without Mesh Implant   \$1,285.2     43338 Repair Of Paraesophageal Hemia Via Abdominal Incision, Without Mesh Implant   \$1,285.2     43340 Partial Removal Of Esophagus And Stomach, Abdominal Approach   \$1,226.9     43341 Partial Removal Of Esophagus And Stomach, Abdominal Approach   \$1,226.9     43352 Relocation Of Esophagus, Cervical   \$1,165.4     43341 Partial Removal Of Esophagus, Cervical   \$1,160.7     43352 Relocation Of Esophagus, Cervical   \$1,160.7     43352 Relocation Of Esophagus To Stomach After Previous Partial Removal Of Bypass Of Esophagus, With Insertion Of Intestine   \$2,380.1     43400 Ligation Of Staphing At Gastroesophageal Junction For Pre-Existing Esophageal Perforation   \$2,240.5     43410 Stutre Of Wound Of Injury To Esophagus, Cervical Approach   \$2,240.5     43420 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach   \$2,240.5     43421 Stutre Of Wound Of Injury To Esophagus, Thoracic Or Abdominal Approach   \$1,181.3     43452 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach   \$1,181.3     43453 Dilation Of Esophagus Unguided   \$1,197.5   | 43327 | Repair Of Muscle At Lower Esophagus And Stomach, Laparotomy  | \$809.53         |
| 43331 Repair Of Esophagus, Thoracic Approach   \$1,174.5  | 43328 | Repair Of Muscle At Lower Esophagus And Stomach, Thoracotomy   | \$981.90         |
| 43332 Repair Of Paraesophageal Hemia Via Laparotomy, With Mesh Implant   \$1,233.4   43333 Repair Of Paraesophageal Hemia Via Laparotomy, With Mesh Implant   \$1,233.4   43334 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant   \$1,097.7   43335 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant   \$1,292.4   43336 Repair Of Paraesophageal Hemia Via Thoracotomy, With Mesh Implant   \$1,295.4   43337 Repair Of Paraesophageal Hemia Via Abdominal Incision, With Mesh Implant   \$1,295.4   43338 Repair Of Paraesophageal Hemia Via Abdominal Incision, With Mesh Implant   \$1,347.5   Esophageal Lengtheniang Procedure (Eg., Colisi Gastroplasty Or Wedge Gastroplasty) (List Separately In Addition To Code For Primary   43338 Procedure)   \$930.4   43340 Partial Removal Of Esophagus And Stomach, Abdominal Approach   \$1,145.4   43341 Partial Removal Of Esophagus And Stomach, Thoracic Approach   \$1,265.4   43351 Relocation Of Esophagus, Thoracic   \$1,265.4   43361 Relocation Of Esophagus, Cervical   \$1,265.4   43361 Reconnection Of Esophagus, Cervical   \$3,367.5   43360 Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine   \$2,380.1   43400 Ligation, Direct, Esophagus I To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine   \$2,340.5   43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach   \$3,245.5   43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach   \$3,245.5   43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach   \$3,245.5   43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach   \$3,245.5   43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach   \$3,245.5   43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach   \$3,245.5   43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach   \$3,245.5   43410 Stutre Of Wound Or Injury To Esophagus, Cervical Approach   \$3,245.5   43410 Stutre Of Wound Or Injury To  | 43330 | Repair Of Esophagus, Abdominal Approach  | \$1,185.91       |
| 43338   Repair Of Paraesophageal Hernia Via Laparotomy, With Mesh Implant   \$1,287.7   | 43331 | Repair Of Esophagus, Thoracic Approach   | \$1,174.51       |
| Repair Of Paraesophageal Hernia Via Thoracotomy, Without Mesh Implant   \$1.087.7   | 43332 | Repair Of Paraesophageal Hernia Via Laparotomy, Without Mesh Implant   | \$1,130.38       |
| 43336   Repair Of Paraesophageal Hernia Via Thoracotomy, With Mesh Implant   \$1,292.21   | 43333 | Repair Of Paraesophageal Hernia Via Laparotomy, With Mesh Implant  | \$1,233.46       |
| 43336   Repair Of Paraesophageal Hernia Via Thoracotomy, With Mesh Implant   \$1,292.21   | 43334 | Repair Of Paraesophageal Hernia Via Thoracotomy, Without Mesh Implant  | \$1.087.77       |
| 43336   Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant   \$1,265.44   4337   Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant   \$1,347.51   Esophageal Lengthening Procedure (Eg., Collis Gastroplasty) (Wedge Gastroplasty) (List Separately In Addition To Code For Primary   43338   Procedure   \$9,90   43340   Partial Removal Of Esophagus And Stomach, Abdominal Approach   \$1,145.44   43341   Partial Removal Of Esophagus And Stomach, Abdominal Approach   \$1,269.51   43351   Relocation Of Esophagus, Thoracic   \$1,160.75   43352   Relocation Of Esophagus, Cervical   \$1,345.44   43360   Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus   \$1,960.86   43361   Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine   \$2,380.1   43401   Ligation, Direct, Esophageal Varices   \$1,348.56   43402   Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation   \$1,280.54   43403   Ligation Of Vision of   |       |  | \$1,292,29       |
| Aga337   Repair Of Paraesophageal Hernia Via Abdominal Incision, With Mesh Implant   Esophageal Lengthening Procedure (Eg. Collis Gastroplasty Or Wedge Gastroplasty) (List Separately In Addition To Code For Primary   \$99.01  |       |  | \$1,265,40       |
| Esophageal Lengthening Procedure (Eg. Collis Gastroplasty Or Wedge Gastroplasty) (List Separately In Addition To Code For Primary \$99.00 43330 Procedure) \$1,45.44 97 11 11 11 11 11 11 11 11 11 11 11 11 11  |       |  |                  |
| \$99.00   | 10001 |  | ψ.,σσσ           |
| Partial Removal Of Esophagus And Stomach, Abdominal Approach   \$1,145.44   | 43338 | Procedure)   | \$99.00          |
| Partial Removal Of Esophagus And Stomach, Thoracic Approach   \$1,226.97  |       | ·  |                  |
| A3351   Relocation Of Esophagus, Thoracic   \$1,160.79  |       |  | . ,              |
| A3352   Relocation Of Esophagus, Cervical   \$939.74  |       | 1 0  |                  |
| Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus  43361 Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine  \$2,380.1- 43400 Ligation, Direct, Esophagus I Varices  \$1,348.56 Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation  \$1,280.5- 43405 Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation  \$1,280.5- 43415 Suture Of Wound Or Injury To Esophagus, Cervical Approach  \$2,240.55 Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach  \$3420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach  \$34340 Dilation Of Esophagus United  \$34345 Dilation Of Esophagus With A Guided Wire  \$43453 Dilation Of Esophagus With A Guided Wire  \$43460 Esophagogastric Tamponade, With Balloon (Sengstaken Type)  \$11,940.65 Free Jejunum Transfer With Microvascular Anastomosis  \$1,798.86 43499 Unlisted Procedure, Esophagus  \$1,998.86 43501 Gastrotomy With Exploration Or Foreign Body Removal;  \$3501 Gastrotomy With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)  \$1,197.56 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)  \$1,291.66 43605 Biopsy Of Stomach, By Laparotomy  \$43606 Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)  \$43607 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)  \$43607 Storach, By Laparotomy  \$43608 Storach, By Laparotomy  \$43609 Storach, By Laparotomy  \$43609 Storach, By Laparotomy  \$43600 Storach, Cocal; With Esophagoganterostomy  \$43600 Gastrectomy, Total; With Esophagogenterostomy  |       |  |                  |
| Reconnection Of Esophagus To Stomach After Previous Partial Removal Or Bypass Of Esophagus, With Insertion Of Portion Of Intestine \$2,380.14 43400 Ligation, Direct, Esophageal Varices \$1,348.55 43405 Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation \$1,280.55 43410 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$946.03 43410 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$9420.56 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$932.56 43425 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$932.56 43425 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach \$1,181.36 43450 Dilation Of Esophagus Unguided \$133.77 43450 Dilation Of Esophagus With A Guided Wire \$820.93 43460 Esophagogastric Tamponade, With Balloon (Sengstaken Type) \$194.06 43496 Free Jejunum Transfer With Microvascular Anastomosis \$1,788.86 43497 Incision Of Muscle Of Lower Esophagus Using An Endoscope \$679.36 43499 Unlisted Procedure, Esophagus 4360 Gastrotomy; With Exploration Or Foreign Body Removal; \$701.36 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$1,975.06 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1,351.66 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach \$1,506.07 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,506.07 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,1,506.07 43621 Gastrectomy, Total; With Esophagoenterostomy \$1,506.07 43621 Gastrectomy, Total; With Esophagoenterostomy \$1,1,506.07 43621 Gastrectomy, Total; With Esophagoenterostomy \$1,1,506.07 43621 Gastrectomy, Total; With Esophagoenterostomy \$1,1,506.07 43621 Gastrectomy, Total; With Esophagoenterostomy \$2,202.77 43621 Gastr  |       |  |                  |
| 43400Ligation, Direct, Esophageal Varices\$1,348.5043405Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation\$1,280.543410Suture Of Wound Or Injury To Esophagus, Cervical Approach\$946.0043415Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach\$2,240.5043420Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$932.5043425Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$1,181.3143450Dilation Of Esophagus Unguided\$183.7043451Dilation Of Esophagus Unguided\$183.7043452Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8043499Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3143500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3143501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5043502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143603Gastrotomy; With Suture Repair Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$848.6243604Excision, Local; Ulcer Or Benign Tumor Of Stomach\$1,360.0043610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$1,086.0043620Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72   | 43360 | reconnection of Esophagus to Stomach Alter Frevious Partial Removal of Bypass of Esophagus   | \$1,960.86       |
| 43400Ligation, Direct, Esophageal Varices\$1,348.5043405Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation\$1,280.543410Suture Of Wound Or Injury To Esophagus, Cervical Approach\$946.0043415Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach\$2,240.5043420Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$932.5043425Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$1,181.3143450Dilation Of Esophagus Unguided\$183.7043451Dilation Of Esophagus Unguided\$183.7043452Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8043499Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3143500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3143501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5043502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143603Gastrotomy; With Suture Repair Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$848.6243604Excision, Local; Ulcer Or Benign Tumor Of Stomach\$1,360.0043610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$1,086.0043620Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72   | 4000  | December of Feeblague To Chemodo Affer Proving Partial Personal Or Disease Of Feeblague Will Leading Of Partial Or Disease Of Feeblague To Chemodo Affer Proving Provi | <b>#0.000.44</b> |
| Ligation Or Stapling At Gastroesophageal Junction For Pre-Existing Esophageal Perforation  \$1,280.54 43410 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$240.56 43415 Suture Of Wound Or Injury To Esophagus, Cervical Approach \$3420.56 43420 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$3932.57 43425 Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach \$3932.57 43425 Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach \$3932.57 43425 Dilation Of Esophagus Unguided \$383.77 43450 Dilation Of Esophagus With A Guided Wire \$382.97 43490 Dilation Of Esophagus With A Guided Wire \$392.97 43491 Incision Of Hussele Of Lower Esophagus Using An Endoscope \$392.57 43492 Unlisted Procedure, Esophagus \$392.57 43501 Gastrotomy; With Exploration Or Foreign Body Removal; \$392.57 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$392.57 43502 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$392.57 43503 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$392.57 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$392.57 43503 Biopsy Of Stomach, By Laparotomy \$392.57 43605 Biopsy Of Stomach, By Laparotomy \$392.57 43606 Gastrectomy, Total; With Esophagoenterostomy \$392.57 43607 43607 Gastrectomy, Total; With Roux-En-Y Reconstruction \$392.77 43607 Gastrectomy, Total; With Roux-En-Y Reconstruction   |       |  |                  |
| 43410Suture Of Wound Or Injury To Esophagus, Cervical Approach\$946.0343415Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach\$2,240.5443420Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$32.5643425Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach\$1,181.3643450Dilation Of Esophagus Unguided\$183.7443451Dilation Of Esophagus With A Guided Wire\$820.9243460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0443496Free Jejiunum Transfer With Microvascular Anastomosis\$1,798.8643497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3443499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3543501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5643510Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.0643510Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$888.6643605Biopsy Of Stomach, By Laparotomy\$746.5743610Excision, Local; Malignant Tumor Of Stomach\$1,086.0743621Excision, Local; Malignant Tumor Of Stomach\$1,086.0743622Gastrectomy, Total; With Esophagoenterostomy\$1,750.5743621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.77   |       |  |                  |
| 43415Suture Of Wound Or Injury To Esophagus, Thoracic Or Abdominal Approach\$2,240.5643420Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$332.5143425Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach\$1,181.3343450Dilation Of Esophagus Unguided\$183.7443450Dilation Of Esophagus With A Guided Wire\$820.9343460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0643496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8143497Incision Of Muscle Of Lower EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3343501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5643502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6643510Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6643520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$847.5543605Biopsy Of Stomach, By Laparotomy\$746.5743610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$815.9643621Gastrectomy, Total; With Esophagoenterostomy\$1,750.5743622Gastrectomy, Total; With Esophagoenterostomy\$1,750.57   |       |  |                  |
| 43420Repair Of Abnormal Drainage Tract Of Esophagus, Cervical Approach\$932.5643425Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach\$1,181.3643450Dilation Of Esophagus Unguided\$183.7143453Dilation Of Esophagus With A Guided Wire\$20.9243460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8143497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3643499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy; With Esploration Or Foreign Body Removal;\$701.3143501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5643510Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5243520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6243610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$11,086.0743620Gastrectomy, Total; With Esophagoenterostomy\$1,756.0743621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72   |       | ,  | \$946.05         |
| 43425Repair Of Abnormal Drainage Tract Of Esophagus, Thoracic Or Abdominal Approach\$1,181.3443450Dilation Of Esophagus Unguided\$183.7543453Dilation Of Esophagus With A Guided Wire\$820.9743460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8643497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3043499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3143501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5043502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6043510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5143605Biopsy Of Stomach, By Laparotomy\$368.6843610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$815.9043621Excision, Local; Malignant Tumor Of Stomach\$1,766.5043620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5043621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72   |       |  | \$2,240.58       |
| 43450 Dilation Of Esophagus Unguided \$183.78 43453 Dilation Of Esophagus With A Guided Wire \$820.93 43460 Esophagogastric Tamponade, With Balloon (Sengstaken Type) \$194.00 43496 Free Jejunum Transfer With Microvascular Anastomosis \$1,798.80 43497 Incision Of Muscle Of Lower Esophagus Using An Endoscope \$679.36 43499 Unlisted Procedure, Esophagus Using An Endoscope \$679.36 43500 Gastrotomy With Exploration Or Foreign Body Removal; \$701.38 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$1,197.50 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1.351.60 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin) \$347.52 43502 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) \$688.60 43603 Biopsy Of Stomach, By Laparotomy \$746.55 43611 Excision, Local; Ulcer Or Benign Tumor Of Stomach \$1,086.00 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,750.55 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.75  |       |  | \$932.56         |
| 43453 Dilation Of Esophagus With A Guided Wire  43460 Esophagogastric Tamponade, With Balloon (Sengstaken Type)  43496 Free Jejunum Transfer With Microvascular Anastomosis  43497 Incision Of Muscle Of Lower Esophagus Using An Endoscope  43499 Unlisted Procedure, Esophagus  43499 Unlisted Procedure, Esophagus  43500 Gastrotomy With Exploration Or Foreign Body Removal;  43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer  43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)  43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)  43602 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)  43603 Biopsy Of Stomach, By Laparotomy  43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach  43620 Gastrectomy, Total; With Esophagoenterostomy  43621 Gastrectomy, Total; With Roux-En-Y Reconstruction  \$2,002.72   |       |  | \$1,181.36       |
| 43460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8043497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3143499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3243501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5143502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5243520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6143610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$1,740.6043621Excision, Local; Malignant Tumor Of Stomach\$1,750.5143622Gastrectomy, Total; With Esophagoenterostomy\$1,750.5143621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72   |       |  | \$183.75         |
| 43460Esophagogastric Tamponade, With Balloon (Sengstaken Type)\$194.0043496Free Jejunum Transfer With Microvascular Anastomosis\$1,798.8043497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3143499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3243501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5143502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5243520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6143610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$746.5143621Excision, Local; Malignant Tumor Of Stomach\$1,760.5043620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5043621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72   | 43453 | Dilation Of Esophagus With A Guided Wire   | \$820.92         |
| 43496 Free Jejunum Transfer With Microvascular Anastomosis \$1,798.80 43497 Incision Of Muscle Of Lower Esophagus Using An Endoscope \$679.30 43499 Unlisted Procedure, Esophagus Price By Report 43500 Gastrotomy With Exploration Or Foreign Body Removal; \$701.30 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$1,197.50 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1,351.60 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin) \$847.55 43520 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) \$888.60 43605 Biopsy Of Stomach, By Laparotomy \$746.55 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach \$31,086.00 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,750.55 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.75  | 43460 | Esophagogastric Tamponade, With Balloon (Sengstaken Type)  | \$194.00         |
| 43497Incision Of Muscle Of Lower Esophagus Using An Endoscope\$679.3043499Unlisted Procedure, EsophagusPrice By Report43500Gastrotomy With Exploration Or Foreign Body Removal;\$701.3243501Gastrotomy; With Suture Repair Of Bleeding Ulcer\$1,197.5143502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6143510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5243520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6243605Biopsy Of Stomach, By Laparotomy\$746.5243610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$315.9443611Excision, Local; Malignant Tumor Of Stomach\$1,086.0343620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5243621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72   |       |  | \$1,798.86       |
| 43499 Unlisted Procedure, Esophagus  43500 Gastrotomy With Exploration Or Foreign Body Removal;  43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer  43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg. Mallory-Weiss)  43510 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg. Mallory-Weiss)  43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg. Celestin Or Mousseaux-Barbin)  \$8475.55  43520 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)  \$688.69  43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach  43611 Excision, Local; Ulcer Or Benign Tumor Of Stomach  43620 Gastrectomy, Total; With Esophagoenterostomy  \$1,750.55  43621 Gastrectomy, Total; With Roux-En-Y Reconstruction  |       |  | \$679.30         |
| 43500 Gastrotomy With Exploration Or Foreign Body Removal; \$701.33 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer \$1,197.54 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) \$1,351.64 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin) \$847.55 43520 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) \$688.05 43605 Biopsy Of Stomach, By Laparotomy \$746.55 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach \$15.98 43611 Excision, Local; Malignant Tumor Of Stomach \$1,086.05 43620 Gastrectomy, Total; With Esophagoenterostomy \$1,750.55 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.75   |       | i ü ü i  |                  |
| 43501 Gastrotomy; With Suture Repair Of Bleeding Ulcer 43502 Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss) 43510 Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin) 43510 Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation) 43608 Biopsy Of Stomach, By Laparotomy 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach 43611 Excision, Local; Malignant Tumor Of Stomach 43620 Gastrectomy, Total; With Esophagoenterostomy 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$1,197.50  |       |  | \$701.35         |
| 43502Gastrotomy; With Suture Repair Of Pre-Existing Esophagogastric Laceration (Eg, Mallory-Weiss)\$1,351.6i43510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5i43520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6i43605Biopsy Of Stomach, By Laparotomy\$746.5i43610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$815.9i43611Excision, Local; Malignant Tumor Of Stomach\$1,765.5i43620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5i43621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.7i   |       | i i i  |                  |
| 43510Gastrotomy; With Esophageal Dilation And Insertion Of Permanent Intraluminal Tube (Eg, Celestin Or Mousseaux-Barbin)\$847.5243520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6343605Biopsy Of Stomach, By Laparotomy\$746.5343610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$815.9043611Excision, Local; Malignant Tumor Of Stomach\$1,086.0343620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5343621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.73   |       |  |                  |
| 43520Pyloromyotomy, Cutting Of Pyloric Muscle (Fredet-Ramstedt Type Operation)\$688.6143605Biopsy Of Stomach, By Laparotomy\$746.5143610Excision, Local; Ulcer Or Benign Tumor Of Stomach\$815.9043611Excision, Local; Malignant Tumor Of Stomach\$1,086.0143620Gastrectomy, Total; With Esophagoenterostomy\$1,750.5143621Gastrectomy, Total; With Roux-En-Y Reconstruction\$2,002.72  |       |  |                  |
| 43605 Biopsy Of Stomach, By Laparotomy       \$746.5°         43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach       \$815.90         43611 Excision, Local; Malignant Tumor Of Stomach       \$1,086.0°         43620 Gastrectomy, Total; With Esophagoenterostomy       \$1,750.5°         43621 Gastrectomy, Total; With Roux-En-Y Reconstruction       \$2,002.7°  |       |  |                  |
| 43610 Excision, Local; Ulcer Or Benign Tumor Of Stomach       \$815.90         43611 Excision, Local; Malignant Tumor Of Stomach       \$1,086.00         43620 Gastrectomy, Total; With Esophagoenterostomy       \$1,750.50         43621 Gastrectomy, Total; With Roux-En-Y Reconstruction       \$2,002.70  |       |  |                  |
| 43611 Excision, Local; Malignant Tumor Of Stomach       \$1,086.00         43620 Gastrectomy, Total; With Esophagoenterostomy       \$1,750.50         43621 Gastrectomy, Total; With Roux-En-Y Reconstruction       \$2,002.70   |       |  |                  |
| 43620 Gastrectomy, Total; With Esophagoenterostomy       \$1,750.5         43621 Gastrectomy, Total; With Roux-En-Y Reconstruction       \$2,002.7  |       |  |                  |
| 43621 Gastrectomy, Total; With Roux-En-Y Reconstruction \$2,002.72  |       |  | \$1,086.07       |
|   |       |  | \$1,750.51       |
| 43622 Gastrectomy, Total; With Formation Of Intestinal Pouch, Any Type \$2,036.49   |       |  | \$2,002.72       |
|   | 43622 | Gastrectomy, Total; With Formation Of Intestinal Pouch, Any Type   | \$2,036.45       |

| 18351 Patrial Removal O'Somant, Will Gastendamontomy 18362 Patrial Removal O'Somant, Will Gastendamontomy 18362 Patrial Removal O'Somant, Will Gastendamontomy 18362 Patrial Removal O'Somant, Will Gastendamontomy 18363 Vagotomy, Patrial Data (Vill Rou-En-Y Reconstruction 18364) Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately in Addition To Code(S) For Printing Procedure) 18369 Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately in Addition To Code(S) For Printing Procedure) 18369 Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately in Addition To Code(S) For Printing Procedure) 18369 Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately in Addition To Code(S) For Printing Procedure) 18369 Vagotomy Anne Petrome Will Train Data Gastractomy, but Separately of Agent Separately and Separately Vagotomy Anne Petrome Vill Train Data Separately Vagotomy Anne Petrome Vill Vagotomy An                   | A I .             | Ta   |                        |
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| 49325   Partial Removal Of Stamuth, Will Glassing Reproductives 49325   Arabid Removal Of Stamuth Will Consider Of Prince 49325   Parial Removal Of Stamuth Will Consider Of Prince 49325   Parial Removal Of Stamuth Will Consider Of Prince 49325   Parial Removal Of Stamuth Will Consider Of Prince 49325   Parial Removal Of Stamuth Will Consider Of Prince 49325   Parial Removal Of Stamuth Will Consider Of Prince 49325   Parial Removal Of Stamuth Prince 49325   Parial Removal Of Stamuth Prince 49325   Parial Removal Of Prince 4                   |                   |  | Fee<br>\$1,261,01      |
| 49835 Castractury, Parlad, Distal, Will Rouz-En-Y Reconstruction 49846 Parlial Remond Of Somant-Will Centation Of Possiti 49850 Vagoarry White Performed Will Parlial Distal Gastractury, List Beparately in Addition To Coale(S) For Privary Procedure) 4984 (1985) Vagoarry White Performed Will Parlial Distal Gastractury, List Beparately in Addition To Coale(S) For Privary Procedure) 4984 (1985) Vagoarry White Performed Will Parlial Distal Gastractury, Parletted Cell (Highly Selective) 4984 (1986) Vagoarry Performed Will Parlial Distal Gastractury, Parletted Cell (Highly Selective) 49844 (Lagrancopy, Surgoal, Gastra Restrictive Procedure, Will Gastra Eppsas And Row-En-Y Gastractury (Rout Limb 150 Cm Cr Less) 49845 (Lagrancopy, Surgoal, Gastra Restrictive Procedure, Will Gastra Eppsas And Forum Cell-Parlial (1986) (                   |                   | · ·  |                        |
| 49334 Position Provinced Of Stanoach Will. Cestation of Drusch  49358 Vagostory Will Performed Will Province Dates and Control                   |                   |  |                        |
| 49850   Valgoutiny (Mem Performed Will Parist Design Surrections) (East Surrections) (East Surrections) (1996)   Valgoutiny Including Pylosopiasty, Will Co Willhood Eastroations), Paristal Cell (Highly Selective) (1996)   31,078   43,954   Valgoutiny (Including Pylosopiasty, Will Co Willhood Eastroations), Paristal Cell (Highly Selective) (1996)   31,078   43,954   Laparactory, Surpical, Gaster, Eastrockine Provideur, Will Regards (Papeas And Roux En V Gasternamerosticiny (Roux Limb 150 Cm Ot Less) (1994)   43,954   Laparactory, Surpical, Gaster, Eastrockine Provideur, Will Gaster, Bepass And Small Insterna Reconstruction To Limf Absorption (1997)   43,954   Laparactory, Surpical, Reproved On Federal Control (Papeas And Small Insterna Reconstruction To Limf Absorption (1997)   43,954   Laparactory, Surpical, Provideo On Federal Control (Papeas And Small Instername Reconstruction To Limf Absorption (1997)   43,954   Laparactory, Surpical, Provideo On Federal Control (Papeas And Small Instername Reconstruction To Limf Absorption (1997)   43,954   Laparactory, Surpical, Provideo On Visiga Nerves, Collection Of Hydro (1997)   43,954   Laparactory, Surpical, Provideo On Visiga Nerves, Collection Of Hydro (1997)   43,954   Laparactory, Surpical, Provideo On Visiga Nerves, Collection Of Hydro (1997)   43,954   Laparactory, Surpical, Provideo On Visiga Nerves, Collection Of Hydro (1997)   43,954   Laparactory, Surpical, Provideo On Visiga Nerves, Collection Of Hydro (1997)   43,954   Laparactory, Surpical, Carrelation Of Visiga Nerves, Collection Of Hydro (1997)   43,954   Laparactory, Surpical, Carrelation Of Hydro (1997)   43,954   Laparactory, Surpi                     |                   |  |                        |
| 48460   Vapocromy And Princeptages, With Ci William Casteratorroy  48561   Vapocromy Linchiang Pidenipals, with Ci William Casteratorroy  48561   Vapocromy Linchiang Pidenipals, with Ci William Casteratorroy  48561   Vapocromy Linchiang Pidenipals, with Ci William                   |                   |  | \$109.14               |
| 4,9841 Laparoscopy, Surgiant, Gazlac Restrictive Procedure, Win Gazlac Bypass Ann Rouz Enr V Gestromirationtry (Roux Limb 150 Cm Of Less)  \$ 1,794 4,944 4,9                  |                   |  | \$1,059.05             |
| 43044 Laparoscopy, Surgicial, Castric Restrictive Proceedure. With Castric Bypass And Roov-En-Y Gastroenterostomy (Roux Limb 150 Cm Or Less) 43,724 43045 Laparoscopy, Surgicial, Castric Restrictive Procedure. With Gastric Bypass And Small triestine Reconstitution To Limb Absorption 51,327 43047 Laparoscopy, Surgicial, Transaction Of Replacement of Castric Neurosciental Executions, Anthron 52,427 43051 Laparoscopy, Surgicial, Transaction Of Vigual Nerves. Funcial 43051 Laparoscopy, Surgicial, Transaction Of Vigual Nerves. Funcial 43052 Laparoscopy, Surgicial, Transaction Of Vigual Nerves. Recitation of Proceedings of Proceedings (Astronomy), Surgicial Transaction Of Vigual Nerves. Recitation of Statistics of Statistics (Astronomy), Surgicial Transaction Of Vigual Nerves. Science Of Highly Societive 43052 Laparoscopy, Surgicial, Transaction Of Vigual Nerves. Science Of Highly Societive 43055 United all aparoscopy Procedure. Science Of Highly Societive 43075 United Laparoscopy Procedure. Science Of Highly Societive Castric Office (Astronomy), Societive Office (Astronomy), Using An Endoscope 43076 United Laparoscopy. Surgicial Transaction Office (Astronomy), Nation Of                   |                   |  | \$1,070.97             |
| 43956 [Laparoscoy, Surgeal, Canter Restrictive Procedure, With Gastre Bypass And Small Intensive Reconstruction To Limit Absorption 31,324 43646 [Laparoscoy, Surgeal, Revision Of Replacement Of Gastre Neurostimulator Electrodes, Anthrum 56,66 43646 [Laparoscoy, Surgeal, Revision Of Removal Of Gastre Neurostimulator Electrodes, Anthrum 56,66 43656 [Laparoscoy, Surgeal, Revision Of Vapan, Neuros, Electrodes Of Highly Selection 56, 200, 200, 200, 200, 200, 200, 200, 20   | 1001              | regionly movement in the remaining of the second se | ψ1,070.01              |
| 43956 [Laparoscoy, Surgeal, Canter Restrictive Procedure, With Gastre Bypass And Small Intensive Reconstruction To Limit Absorption 31,324 43646 [Laparoscoy, Surgeal, Revision Of Replacement Of Gastre Neurostimulator Electrodes, Anthrum 56,66 43646 [Laparoscoy, Surgeal, Revision Of Removal Of Gastre Neurostimulator Electrodes, Anthrum 56,66 43656 [Laparoscoy, Surgeal, Revision Of Vapan, Neuros, Electrodes Of Highly Selection 56, 200, 200, 200, 200, 200, 200, 200, 20   | 43644             | Laparoscopy, Surgical, Gastric Restrictive Procedure: With Gastric Bypass And Roux-En-Y Gastroenterostomy (Roux Limb 150 Cm Or Less)   | \$1,784.91             |
| 48457 Lapraroscoys, Surgical, Revision for Reports of Casterio Neurostimulator Electrodes, Antum 48568 (Alparoscoys, Surgical, Revision of Removal of Clasterio Neurostimulator Electrodes, Antum 48568 (Alparoscoys, Surgical, Transaction Of Viagua Navies, Studented Or Highly Salective 48585 (Alparoscoys, Surgical, Transaction Of Viagua Navies, Studented Or Highly Salective 48568 (Alparoscoys, Surgical, Transaction Of Viagua Navies, Studented Or Highly Salective 48569 (Alparoscoys, Surgical, Transaction Of Viagua Navies, Studented Or Highly Salective 48569 (Alparoscoys) Studented Lapracoccopy Procedure, Studented Or Highly Salective 48576 (Alparoscoys) Studented Casterio C                   |                   |  | \$1,907.51             |
| 43646 Laparoscopy, Surgiack Revision Of Removal Of Caristic Neutroinshulator Electrodes, Anturn  4365 Laparoscopy, Surgiack Transaction Of Vigus Nerves, Selective OF Highly Selective  5363  4365 Carelation Of Surgiach Conner from Storach To Selective OF Highly Selective  5363  4365 Carelation Of Surgiach Conner from Storach To Selective OF Highly Selective  7365 United Laparoscopy Procedure, Storach  7365 District Of Storach Conner Storach  7365 District Of Storach Conner Storach  7365 District Of Storach Town Adaptations Of Starter Contents  7375 Insention Of Storach Tube And Multiple Springer Contents  7375 Insention Of Storach Tube And Multiple Appriators Of Storach Contents  7376 Disgrossic Insention Of Storach Tube And Multiple Appriators Of Storach Analysis  7376 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance  7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance  7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To  7376 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance  7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To  7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To  7387 Disgrossic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance  7387 Replacement Of Storach Storach Tube Ancessed Through Storach  7387 Replacement Of Storach Storach Tube Ancessed Through Storach  7387 Replacement Of Storach Storach Tube Ancessed Through Storach  7387 Selection Development Of Storach Storach Storach Storach  7387 Laparoscopy, Surgiach, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only  7398 Disprossopy, Surgiach, Gastric Restrictive P                   |                   |  | \$1,242.70             |
| 49651 Laparoscopy, Surgical, Transaction Of Vagus Nerves, Selective Or Highly Selective  98053 490550 Centelon Of Surgical Characterion Of Vagus Nerves, Selective Or Highly Selective  98054 980550 Unified Laparoscopy Procedure, Somach  19727 Insafron Of Somach Under Trough Nose of Middle Langer Puroscopic Guidance  98054 19727 Insafron Of Somach Under Trough Nose of Middle Langer Puroscopic Guidance  98057 19747 Gastric Insafron Of Somach Under Trough Nose of Middle Langer Somach  19758 Secretions  98057 19756 Secretions Of Somach Tube And Muliple Aspirations of Stormach Comients After Administration Of Drugs To Stimulate Stormach  19756 Secretions  98057 19757 Secretions Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance  98057 19757 Secretions Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To Stimulate Participation of Collection Using Imaging Guidance After Administration Of Drugs To Stimulate Participation Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To Stimulate Participation Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To Start Secretions  98057 19807 Repositions of Science Science Through Stem Of Mouth  98057 19807 Repositions of Science Science Through Stem Of Mouth  98057 19807 Repositions of Science Science Through Stem Vita Reposition Of Storma Opening  19807 Laparoscopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device Component Only  19808 Science                   |                   |  | \$659.57               |
| 4355C Ceation Of Surgiand Copining Form Storach To Skin (Satestosmy) Usery (Satestosm  |                   |  | \$588.16               |
| 48855 Unifested Laptercoccopy Procedure, Semanth         S871           43955 Unifested Laptercoccopy Procedure, Semanth         Phile by Rev Asset           43752 Insention Of Stormach Tube And Applianch or Greater Contents         \$40           43752 Insention Of Stormach Tube And Applianch or Greater Contents         \$21           43764 Gaster Insulation And Aspiration, Disgosates, Grigle Specimen (Eg. Acid Analysis)         \$21           43764 Gaster Insulation And Aspiration, Disgosates, Grigle Specimen (Eg. Acid Analysis)         \$22           43765 Schoolson         \$22           43766 Disgosatic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance         \$22           43767 Standard Pancreatic Of Calibidader Secretions         \$32           43767 Standard Pancreatic Of Calibidader Secretions         \$32           43767 Repositioning Of Stormach Feeding Tube Insented Through Nose or Mouth         \$12           43767 Repositioning Of Stormach Feeding Tube Insented Through Nose or Mouth         \$12           43767 Repositioning Of Stormach Feeding Tube Insented Through Nose or Mouth         \$12           43770 Subcolarenceus Port Components         \$34           43771 Laparascopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device Component Only         \$1,108           43771 Laparascopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only <td></td> <td></td> <td>\$683.76</td>   |                   |  | \$683.76               |
| 48659 Unilised Laparoscopy Procedure, Stomach  Pice By Reg  18750 [Insertion Of Stomach Tube Procedure, Nose of Nouth Using Fluoroscopic Guidance  48750 [Insertion Of Stomach Tube And Aspirations Of Gastric Contents  Diagnosis (Prestrict Of Stomach Tube And Aspirations Of Gastric Contents  Diagnosis (Prestrict Of Stomach Tube And Multips Aspirations Of Stomach Contents After Administration Of Drugs To Stimulate Stomach  Diagnosis (Prestrict Of Stomach Tube And Multips Aspirations Of Stomach Contents After Administration Of Drugs To Stimulate Stomach  Diagnosis (Prestrict Of Tube Into Upper Strail Bowed And Specimen Collection Using Imaging Guidance  Diagnosis (Prestrict Of Tube Into Upper Strail Bowed And Specimen Collection Using Imaging Guidance  Diagnosis (Prestrict Of Tube Into Upper Strail Bowed And Specimen Collection Using Imaging Guidance After Administration Of Drugs To  43761 [Repositioning Of Stomach Feeding Tube Inserted Through Rose of Mount  43776 [Replacement Of Stomach Stomat Tube Accessed Through Stim With Revision Of Stoma Opening  Laparoscopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device (Eg. Gastric Band And  Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Adjustable Gastric Restrictive Device Component Only  43772 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Adjustable Gastric Restrictive Device Component Only  43772 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only  43772 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only  43773 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only  43774 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only  43775 Laparoscopy, Surgical, Gastric Restri                   |                   |  |                        |
| 43752 Insertion Of Stomach Tube Through Nose Or Mouth Using Fluorescepts Guidance 43764 Gastric Intubation And Aspirations Of Startic Contents 5376 Insertion Of Stomach Tube And Aspirations Of Startic Contents 5376 Gastric Intubation And Aspirations, Diagnostic Single Specimen (Eg. Acid Analysis) 5325 Diagnostic Insertion Of Stomach Tube And Multiple Aspirations Of Stomach Contents After Administration Of Drugs To Stimulate Stomach 5376 Diagnostic Insertion Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 5376 Strutiate Plancinstic Or Galbiaddris Searchine Reveal And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 5376 Replacement Of Stomach Stoma Tube Accessed Through Sich Work 5376 Replacement Of Stomach Stoma Tube Accessed Through Sich Work 5376 Replacement Of Stomach Stoma Tube Accessed Through Sich Work 5376 Replacement Of Stomach Stoma Tube Accessed Through Sich Will Revision Of Stomach Device (Eg. Gastric Band And 53771 Stoutions Plancins Tube Accessed Through Sich Will Revision Of Stomach Opening 5378 Replacement Of Stomach Stoma Tube Accessed Through Sich Will Revision Of Stomach Device (Eg. Gastric Band And 53771 Subcolarement Of Stomach Stoma Tube Accessed Through Sich Will Revision Of Stomach Device (Eg. Gastric Band And 53771 Subcolarement Of Stomach Stoma Tube Accessed Through Sich Will Revision Of Stomach Opening 53772 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53773 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53774 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53775 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53787 Lapanoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only 53787 Lapanoscopy,                    |                   |  |                        |
| 43755   Insertion Of Stomach Tube And Aspirations Of Gastric Contents   \$225  |                   |  |                        |
| 3225 Diagnostic insertion of Stores of Tibe And Multiple Appraishors of Stores After Administration of Drugs To Stimulate Storesch 3291 A1755 Secretions 3291 A1756 Diagnostic insertion of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 3291 A1757 Simulater Forneration of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 3291 A1757 Simulater Forneration of Storesch Storesch 3291 A1758 Diagnostic insertion of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 3292 A1759 Simulater Forneration of Storesch Storesch 3296 A1759 Repositioning of Storesch Feeding Tube Inserted Through Noise Of Mount 3296 Repositioning of Storesch Storesch 3297 Repositioning of Repositioning Office Storesch 32987 Repositioning of Repositioning Office Storesch 32987 Repositioning of Repositioning Of                   |                   |  |                        |
| Dispresite Insertion Of Stormach Tube And Multiple Aspirations Of Stormach Contents After Administration Of Drugs To Stimulate Stormach 13756 Societions Insertion Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance 2476 (Salthus Contents of Salthus Dispression Insertion Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 3276 (Salthus Parceaute Col Calibboddy Secretary 1477) (Salthus Parceaute Col Calibboddy Secretary 1477) (Salthus Parceaute Col Calibboddy Secretary 1477) (Salthus Parceaute Collection Using Imaging Guidance After Administration Of Drugs To 3376) (Salthus Parceaute Collection Using Imaging Guidance After Administration Of Drugs To 3477) (Salthus Parceaute Collection Using Imaging Guidance After Administration Of Drugs To 3477) (Salthus Collection Collection Using Imaging Guidance After Administration Of Drugs To 3477) (Salthus Collection Collection Using Imaging Guidance After Administration Of Drugs To 3477) (Salthus Collection Collection Using Imaging Guidance After Administration Of Drugs To 3477) (Salthus Collection Collection Using Imaging Guidance After Administration Of Drugs To 3477) (Salthus Collection Collection Using Imaging Guidance After Administration Of Drugs To 3477) (Salthus Collection Using Imaging Guidance After Administration Of Salthus Collection Using Col                   |                   | · ·  |                        |
| 43756         Secretations         \$201           43766         Diagnostic Insertion Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance         \$281           43767         Simulaties Pancreatio Of Sellatuder Secretions         \$326           43768         Raposationing Of Stomach Feeding Tube Inserted Through Nose Or Mouth         \$326           43762         Replacement Of Stomach Stoma Tube Accessed Through Skin Will Revision Of Stoma Opening         \$246           43763         Replacement Of Stomach Stoma Tube Accessed Through Skin Will Revision Of Stoma Opening         \$246           Lapricoscopy, Surgical, Garban Restrictive Procedure, Plecement Of Adjustable Gastric Restrictive Device (Eg., Gastric Band And         \$1,005           43771         Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           43772         Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           43773         Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           43774         Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Procedure Proce  | 43/54             |  | \$225.15               |
| 43756   Bagnostic Insertion Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To   | 4075              |  |                        |
| Dagnostic Insention Of Tube Into Upper Small Bowel And Specimen Collection Using Imaging Guidance After Administration Of Drugs To 3276 13776 Similarle Pancreatio Of Selfublader Secretions 1 5226 1376 Repositioning Of Stomach Feeding Tube Insented Through Nose Or Mouth 1 52678 Replacement Of Stomach Stomar Tube Accessed Through Skin With Revision Of Stoma Opening 3246 13763 Replacement Of Stomach Stomar Tube Accessed Through Skin With Revision Of Stoma Opening 3240 Laparoscopy, Surgical, Gastric Restrictive Procedure; Reveneror Ind. Adjustable Gastric Restrictive Device (Eg. Gastric Band And 13770 Subcutaneous Port Components) 51.005 13711 Laparoscopy, Surgical, Gastric Restrictive Procedure; Reveneval Of Adjustable Gastric Restrictive Device Component Only 51.138 13771 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 5244 143772 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 534474 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 53474 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 53474 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 53454 (1977) Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 53474 (1980) Prioritical Components 53454 (1980) Prioritical Co                   |                   |  | \$201.61               |
| 43767   Reposition Of Stimusch Feeding Tuble Insented Through Nose Or Mouth         \$126           43768   Reposition of Of Stimusch Storma Tuble Accessed Through Stim         \$24           43768   Reposition of Of Stimusch Storma Tuble Accessed Through Stim         \$24           43768   Reposition of Of Stormach Storma Tuble Accessed Through Stim Will Revision Of Storma Opening         \$340           4377   Laparoscopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device (Eg. Gastric Band And         \$1,005           4377   Laparoscopy, Surgical, Gastric Restrictive Procedure, Revision Of Adjustable Gastric Restrictive Device Component Only         \$1,138           4377   Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           4377   Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           4377   Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           4377   Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           4378   Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           4377   Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,109  | 43756             |  | \$281.61               |
| 43761         Repositioning Of Stomach Feeding Tube Inserted Through Nose Or Mouth         \$245           43762         Replacement Of Stomach Stoma Tube Accessed Through Skin With Revision Of Stoma Opening         \$246           43763         Replacement Of Stomach Stoma Tube Accessed Through Skin With Revision Of Stoma Opening         \$340           43770         Subcutameous Port Components)         \$1,050           43771         Quantification Components)         \$1,050           43772         Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           43772         Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           43774         Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,138           43775         Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,437           43776         Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,437           43777         Lapaniscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only         \$1,437           43778         Lapaniscopy, Surgical, Gastric Restrictive Procedure;         \$1,637  | 40                |  | * :-                   |
| 43762 Replacement Of Stomed Stoma Tube Accessed Through Skin Wiln Revision Of Stoma Opening 43763 Replacement Of Stomed Stoma Tube Accessed Through Skin Wiln Revision Of Stoma Opening 43763 Replacement Of Stomed Stoma Tube Accessed Through Skin Wiln Revision Of Stoma Opening 43770 Subcutaneous Port Components) 51,005 43771 Usparoscopy, Surgical, Gastric Restrictive Procedure; Revision Of Adjustable Gastric Restrictive Device Component Only 51,138 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure; Revision Of Adjustable Gastric Restrictive Device Component Only 58,144 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 58,144 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only 58,144 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only 58,144 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastric Component Only 58,1079 58,107                   |                   |  | \$376.46               |
| 43763 Aepiscement Of Stomach Stoma Tube Accessed Through Skin With Revision Of Stoma Opening Laparoscopy, Surgical, Gastric Restrictive Procedure; Resement Of Adjustable Gastric Restrictive Device (Eg., Gastric Band And \$1,005 43771 Laparoscopy, Surgical, Gastric Restrictive Procedure; Revision Of Adjustable Gastric Restrictive Device Component Only \$1,138 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43772 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138 43776 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components \$1,138 43776 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le. Sleeve Gastrectomy) \$1,007 43800 Pyloroplasty \$1,007 43810 Gastrododenostomy \$1,007 43810 Gastrododenostomy \$1,007 43810 Gastrododenostomy \$1,118 43820 Gastric Jugotomy, Amy Type \$1,118 43821 Gastric Restrictive Procedure; Without Construction Of Gastric Tube \$2,008 43831 Insention Of Stomach Feeding Tube, Open Procedure in Newborn Feeding \$3,008 43840 Suture Of Perforated Utler, Wound, Of Injury Of Stomach For Upper Small Bowel \$3,008 43840 Suture Of Perforated Utler, Wound, Of Injury Of Stomach of Upper Small Bowel \$3,008 43  |                   |  | \$126.49               |
| Laparoscopy, Surgical, Gastric Restrictive Procedure; Placement Of Adjustable Gastric Restrictive Device (Eg., Gastric Band And 3770) Subculaneous Port Components)  3710 (Japaroscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138  3772 (Japaroscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138  3773 (Japaroscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138  43774 (Japaroscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only \$1,138  43775 (Japaroscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subculaneous Port Components \$1,1078  43776 (Japaroscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastric Creative) (Inc., Selected And Subculaneous Port Components \$1,1078  43776 (Japaroscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastric Creative) (Inc., Selected And Subculaneous Port Components \$1,1078  43877 (Japaroscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastric Creative) (Inc., Selected And Subculaneous Port Components \$1,1078  43870 (Patropolary) (Inc., Selected And Subculaneous Port Components \$1,1078  43870 (Sastroic) (Sastr          |                   | i v  | \$245.76               |
| 43770 Subcutaneous Port Components)       \$1.005         43771 Laparoscopy, Surgical, Sastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only       \$1.138         43772 Laparoscopy, Surgical, Gastric Restrictive Procedure, Removal Of Adjustable Gastric Restrictive Device Component Only       \$3.44         43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only       \$1.138         43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 18, 104       \$1.04         43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (fe, Sieeve Gastrectomy)       \$1.07         43800 Pyloroplasty       \$1.01         43810 Gastrodoudenostomy       \$9.03         43820 Partial Removal Of Stomach, Wilhout Vagotomy       \$1.11         43826 Gastrolipourostomy; With Vagotomy, Any Type       \$1.11         43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newborn Feeding       \$5.55         43832 Classific Restrictive Procedure, Wilhout Gastric Bypass, For Morbid Obesity; Vertical-Banded Gastroplasty       \$1.12         43840 Suture Of Perforated Uber, Wilhout Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty       \$1.13         43841 Partial Removal Of Stomach, Wilh Bartial Gastrectomy       \$1.06         43842 Partial Removal Of Stomach, Wilh Gastric By  | 43763             |  | \$340.65               |
| 43771 Laparoscopy, Surgical. Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only  \$1.138 43772 Laparoscopy, Surgical. Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only  \$1.138 43773 Laparoscopy, Surgical. Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only  \$1.138 43774 Laparoscopy, Surgical. Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components  \$3824 43775 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)  \$1.138 43774 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)  \$1.138 43775 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)  \$1.138 43775 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)  \$1.138 43775 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)  \$1.138 43776 Laparoscopy, Surgical. Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)  \$1.138 43820 Parital Removal Of Stomach, Wilhout Vagotomy  \$1.138 43820 Parital Removal Of Stomach Pacifica, Tube. Open Procedure Procedure  \$1.138 43821 Gastric Restrictive Procedure, Wilhout Gastric Bytess, For Morbid Obesity, Vertical-Banded Gastroplasty  \$1.141 43825 Parital Removal Of Stomach, Wilh Gastroenterostomy  \$1.144 43826 Parital Removal Of Stomach, Wilh Gastroenterostomy  \$1.144 43827 Parital Removal Of Stomach, Wilh Gastroenterostomy  \$1.144 43827 Parital Removal Of Stomach, Stomach Bytess, For Morbid Obesity, Other Than Vertical-Banded Gastroplasty  \$1.144 43826 Parital Removal Of Stomach Spass, Open Procedure  \$1.14880 Parital Removal Of Stomach S |                   |  |                        |
| Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only  \$1,138 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only \$1,138 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Suboutaneous Port Components \$854 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (ie. Sleeve Gastrectomy) \$1,707 43800 Phiproplasty \$1,707 43800 Phiproplasty \$1,707 43800 Phiproplasty \$1,118 43810 Gastroicoudenostomy \$2,903 43820 Partial Removal Of Stomach, Without Vagotomy, \$1,118 43825 Gastrojejunostomy, With Vagotomy, Any Type \$1,118 43825 Gastrojejunostomy, With Vagotomy, Any Type \$1,118 43830 Insention Of Stomach Feeding Tube, Open Procedure, Without Construction Of Gastric Tube \$3505 43831 Baselino Of Stomach Feeding Tube, Open Procedure For Newborn Feeding \$3503 43832 Creation Of Stomach Feeding Tube, Open Procedure For Newborn Feeding \$3503 43840 43840 43840 43840 43841     |                   |  | \$1,005.69             |
| 43773 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) 53.079 53000 Pyloroplasty 53001 Pyloroplasty 53001 Pyloroplasty 53001 Pyloroplasty 53002 Pyloroplasty 53003 Pylorop                   |                   |  | \$1,138.56             |
| 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) 51,179 43810 Potropisch 52701 53800 Pytoropisch 53001                    | 43772             | Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device Component Only  | \$844.94               |
| 43774 Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal Of Adjustable Gastric Restrictive Device And Subcutaneous Port Components 43775 Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy) 51,179 43810 Potropisch 52701 53800 Pytoropisch 53001                    |                   |  |                        |
| 1,1775   Saproscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)   \$1,079  | 43773             | Laparoscopy, Surgical, Gastric Restrictive Procedure; Removal And Replacement Of Adjustable Gastric Restrictive Device Component Only  | \$1,138.56             |
| 1,1775   Saproscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)   \$1,079  |                   |  |                        |
| 43800 Pyloroplasty 43810 Gastroiduodenostomy 43820 Partial Removal Of Stomach, Without Vagotomy 43820 Sastroiduodenostomy 43825 Gastroiduodenostomy 43826 Gastroiduodenostomy 43826 Gastroiduodenostomy 43827 Sastroiduodenostomy 43826 Sastroiduodenostomy 43827 Sastroiduodenostomy 43827 Sastroiduodenostomy 43828 Sastroiduodenostomy 43829 Sastroiduodenostomy 43820 Sastroiduodenostomy                    |                   |  | \$854.54               |
| 43810 [Sastroduodenostomy  | 43775             | Laparoscopy, Surgical, Gastric Restrictive Procedure; Longitudinal Gastrectomy (le, Sleeve Gastrectomy)  | \$1,079.18             |
| St.118   | 43800             | Pyloroplasty   | \$701.09               |
| 43825   Gastrojejunostomy; With Vagotomy, Any Type   | 43810             | Gastroduodenostomy   | \$903.08               |
| 43830 Insertion Of Stomach Feeding Tube, Open Procedure, Without Construction Of Gastric Tube       \$505         43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newborn Feeding       \$553         43840 Suture Of Ferforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel       \$885         43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel       \$885         43840 Suture Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty       \$1,137         43841 Sarkin Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty       \$1,141         43845 Partial Removal Of Stomach, With Gartial Gastrectomy       \$2,008         43846 Partial Removal Of Stomach, With Gastroenterostomy       \$1,466         43847 Partial Removal Of Stomach, With Gastroenterostomy       \$1,609         43848 Revision Of Upper Stomach Bypass, Open Procedure       \$1,009         43848 Revision Of Hubberner Of Stomach To Small Bowel, With Vagotomy       \$1,275         43850 Closure Of Gastrocolic Fistula       \$1,420         43880 Closure Of Gastrocolic Fistula       \$1,420         43881 Replacement Of Stomach To Small Bowel, With Vagotomy       \$1,221         43882 Removal Of Stimulator Electrodes in Upper Stomach, Open Procedure       \$322         43880 Revision Of Or Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure   | 43820             | Partial Removal Of Stomach, Without Vagotomy   | \$1,118.57             |
| 43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newborn Feeding       \$553         43832 Creation Of Stomach Feeding Tube, Open Procedure       \$928         43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel       \$885         43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel       \$885         43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty       \$1,141         43846 Partial Removal Of Stomach, With Partial Gastrectomy       \$2,008         43847 Partial Removal Of Stomach, With Gastroenterostomy       \$1,603         43848 Partial Removal Of Stomach, With Small Intestine Repair       \$1,603         43848 Revision Of Atlachment Of Stomach, With Small Intestine Repair       \$1,603         43840 Revision Of Atlachment Of Stomach To Small Bowel, Without Vagotomy       \$1,275         43850 Revision Of Atlachment Of Stomach To Small Bowel, With Vagotomy       \$1,512         43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy)       \$5,22         43880 Revision Of Atlachment Of Stomach To Small Bowel, With Vagotomy       \$1,512         43881 Replacement Of Stimulator Electrodes in Upper Stomach, Open Procedure       \$1,420         43882 Removal Of Stumulator Electrodes in Upper Stomach, Open Procedure       \$3,22         43888 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding De  | 43825             | Gastrojejunostomy; With Vagotomy, Any Type   | \$1,164.18             |
| 43831 Insertion Of Stomach Feeding Tube, Open Procedure For Newborn Feeding       \$553         43832 Creation Of Stomach Feeding Tube, Open Procedure       \$928         43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel       \$885         43840 Suture Of Perforated Uicer, Wound, Or Injury Of Stomach Or Upper Small Bowel       \$885         43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty       \$1,141         43846 Partial Removal Of Stomach, With Partial Gastrectomy       \$2,008         43847 Partial Removal Of Stomach, With Gastroenterostomy       \$1,603         43848 Partial Removal Of Stomach, With Small Intestine Repair       \$1,603         43848 Revision Of Atlachment Of Stomach, With Small Intestine Repair       \$1,603         43840 Revision Of Atlachment Of Stomach To Small Bowel, Without Vagotomy       \$1,275         43850 Revision Of Atlachment Of Stomach To Small Bowel, With Vagotomy       \$1,512         43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy)       \$5,22         43880 Revision Of Atlachment Of Stomach To Small Bowel, With Vagotomy       \$1,512         43881 Replacement Of Stimulator Electrodes in Upper Stomach, Open Procedure       \$1,420         43882 Removal Of Stumulator Electrodes in Upper Stomach, Open Procedure       \$3,22         43888 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding De  | 43830             | Insertion Of Stomach Feeding Tube, Open Procedure, Without Construction Of Gastric Tube  | \$505.75               |
| 43840 Suture Of Perforated Ulcer, Wound, Or Injury Of Stomach Or Upper Small Bowel 43840 Suture Of Perforated Ulcer, Wound, Or Injury Of Stomach Or Upper Small Bowel 43841 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Vertical-Banded Gastroplasty 43842 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty 51,147 53843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty 52,008 43846 Partial Removal Of Stomach, With Partial Gastrectomy 52,008 43846 Partial Removal Of Stomach, With Small Intestine Repair 51,466 43847 Partial Removal Of Stomach, With Small Intestine Repair 51,603 53,603 5                   |                   |  | \$553.43               |
| 43840 Suture Of Perforated Ulcer, Wound, Or Injury Of Stomach or Upper Small Bowel       \$885         43842 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity, Vertical-Banded Gastroplasty       \$1,375         43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity, Other Than Vertical-Banded Gastroplasty       \$1,414         43845 Partial Removal Of Stomach, With Partial Gastrocentrostomy       \$2,008         43846 Partial Removal Of Stomach, With Bastrocentrostomy       \$1,466         43847 Partial Removal Of Stomach, With Small Intestine Repair       \$1,603         43848 Revision Of Upper Stomach Bypass, Open Procedure       \$1,710         43860 Revision Of Attachment Of Stomach Bypass, Open Procedure       \$1,275         43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy)       \$1,512         43870 Closure Of Surgically Created Opening From Stomach, Open Procedure       \$3,901         43881 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure       \$3,901         43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure       \$3,328         43887 Removal Of Stimulator Skin For Saline Injection Into Stomach Banding Device, Open Procedure       \$3,328         43887 Removal Of Stimulator Skin For Saline Injection Into Stomach Banding Device, Open Procedure       \$3,328         43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure       \$3  |                   |  | \$928.59               |
| 43842 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Vertical-Banded Gastroplasty  \$1,375 43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty  \$1,141 43845 Partial Removal Of Stomach, With Partial Gastrectomy  \$2,008 43846 Partial Removal Of Stomach, With Bastroenterostomy  \$1,460 43847 Partial Removal Of Stomach, With Gastroenterostomy  \$1,460 43848 Revision Of Upper Stomach Bypass, Open Procedure  \$1,710 43860 Revision Of Upper Stomach Bypass, Open Procedure  \$1,710 43860 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy  \$1,127 43860 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy)  \$1,275 43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy)  \$1,275 43870 Closure Of Surgically Created Opening From Stomach, Open Procedure  \$3,1420 43881 Replacement Of Stimulator Electrodes in Upper Stomach, Open Procedure  \$3,243 43887 Removal Of Stimulator Electrodes in Upper Stomach, Open Procedure  \$3,243 43888 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3,243 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3,224 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3,224 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$4,225 43,225 43,226 44,227 44,227 44,227 44,228 44,228 44,228 44,228 44,229 44,229 44,229 44,229 44,220 44,22  |                   | ů i  | \$885.40               |
| 43843 Gastric Restrictive Procedure, Without Gastric Bypass, For Morbid Obesity; Other Than Vertical-Banded Gastroplasty  \$1,141 43845 Partial Removal Of Stomach, With Partial Gastrectomy \$2,008 43846 Partial Removal Of Stomach, With Gastroenterostomy \$1,466 43847 Partial Removal Of Stomach, With Gastroenterostomy \$1,466 43847 Partial Removal Of Stomach, With Gastroenterostomy \$1,466 43847 Partial Removal Of Stomach, With Small Intestine Repair 43868 Revision Of Upper Stomach Bypass, Open Procedure 43868 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy \$1,275 43866 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy \$1,275 43866 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy \$1,275 43860 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) \$522 43860 Closure Of Gastrocolic Fistula \$1,420 43881 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure \$322 43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure \$336 43887 Removal Of Forn Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$322 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$322 43999 Unlisted Procedure, Stomach Unlisted Pro     |                   |  | \$1,375.25             |
| 43845 Partial Removal Of Stomach, With Partial Gastrectomy 43846 Partial Removal Of Stomach, With Samil Intestine Repair 51,603 43847 Partial Removal Of Stomach, With Small Intestine Repair 51,603 43848 Revision Of Upper Stomach Bypass, Open Procedure 51,775 43860 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy 51,275 43860 Revision Of Attachment Of Stomach To Small Bowel, With Vagotomy 51,512 43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) 52,93 43880 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) 52,93 43881 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure 53,129 43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure 53,129 43883 Removal Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 53,28 43887 Removal Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 53,28 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 53,28 43999 Unlisted Procedure, Stomach 44010 District Open Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 53,28 54,29 54,20 54,20 55,20 56,20 57,76 57,76 57,76 57,76 57,76 57,77 57 57,77 57 57 57 57 57 57 57 57 57 57 57 57 5   |                   |  | \$1,141.33             |
| A3846   Partial Removal Of Stomach, With Gastroenterostomy   \$1,466   |                   |  | \$2,008.36             |
| 43847 Partial Removal Of Stomach, With Small Intestine Repair 43848 Revision Of Upper Stomach Bypass, Open Procedure 51,710 43868 Revision Of Upper Stomach Bypass, Open Procedure 51,727 43867 Revision Of Attachment Of Stomach To Small Bowel, With Vagotomy 51,512 43867 Revision Of Attachment Of Stomach To Small Bowel, With Vagotomy 51,512 43867 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) 52,29 43880 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy) 53,29 43881 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure 53,29 43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure 53,29 43883 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 53,22 43888 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 53,22 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 53,22 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 53,22 43899 United Procedure, Stomach 70 Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure 54,22 54                   |                   |  | \$1,466.12             |
| 43848 Revision Of Upper Stomach Bypass, Open Procedure  \$1,710 43860 Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy  \$1,275 43865 Revision Of Attachment Of Stomach To Small Bowel, With Vagotomy  \$1,512 43870 Closure Of Gastrocolic Fistula  \$1,420 43881 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure  \$901 43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure  \$1,291 43886 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3388 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure  \$3388 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3389 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3389 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3399 Unlisted Procedure, Stomach  Price By Rep 44005 Enterotomysis (Freeing Of Intestinal Adhesion) (Separate Procedure)  \$4401 Duodenotomy  \$4401 Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)  \$4402 Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal  \$4402 Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal  \$4402 Interotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)  \$4405 Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy  \$4768  \$44010 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy  \$44010 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies  \$44010 Partial Removal Of Small Bowel, Each Additional Resection And Connection  |                   | , ,  |                        |
| 43860   Revision Of Attachment Of Stomach To Small Bowel, Without Vagotomy   \$1,275   |                   |  |                        |
| 43865Revision Of Attachment Of Stomach To Small Bowel, With Vagotomy\$1,51243870Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy)\$52943880Closure Of Gastrocolic Fistula\$1,42043881Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure\$90143882Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure\$1,29143886Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$32243887Removal Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$32243888Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$42243989Unlisted Procedure, StomachPrice By Rep44005Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)\$98544010Duodenotomy\$77644015Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)\$13744020Incision Of Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)\$86444021Enterotomy, With Exploration Or Foreign Body Removal; Large Bowel\$87744055Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus, Intussusception, Internal Hernia, By Laparotomy\$76844110Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies\$87544111Excision Of One Or More Lesions  |                   |  |                        |
| 43870 Closure Of Surgically Created Opening From Stomach To Skin (Gastrostomy)  \$529 43880 Closure Of Gastrocolic Fistula \$1,420 4381 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure \$901 43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure \$1,291 43886 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$336 8 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$322 43888 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$322 43999 Unlisted Procedure, Stomach Price By Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$342 43099 Unlisted Procedure, Stomach Price By Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure \$342 44010 Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure) \$385 44010 Duodenotomy \$386 44011 Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure) \$387 44020 Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal \$4021 Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube) \$386 44025 Enterotomy With Exploration Or Foreign Body Removal; Large Bowel \$4055 Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure) \$387 44110 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomy \$4056 44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$4056 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$4056 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection  |                   |  |                        |
| 43880 Closure Of Gastrocolic Fistula  \$1,420 43881 Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure  \$901 43882 Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure  \$3386 Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3387 Removal Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3388 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$3322 43388 Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure  \$43999 Unlisted Procedure, Stomach  44005 Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)  \$44010 Duodenotomy  \$776  44015 Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)  \$811 44020 Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal  \$44021 Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg. Baker Tube)  \$864 44025 Enterotomy With Exploration Or Foreign Body Removal; Large Bowel  \$876 44055 Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg., Ladd Procedure)  \$1,492 44110 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomy  \$762  \$44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies  \$875  \$44120 Partial Removal Of Small Bowel, Each Additional Resection And Connection  \$4121 Partial Removal Of Small Bowel, Each Additional Resection And Connection  |                   | u v  |                        |
| Replacement Of Stimulator Electrodes In Upper Stomach, Open Procedure   \$901  |                   |  |                        |
| 43882Removal Of Stimulator Electrodes In Upper Stomach, Open Procedure\$1,29143886Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$33643887Removal Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$32243888Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$42243999Unlisted Procedure, StomachPrice By Rep44005Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)\$93544010Duodenotomy\$77644015Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)\$13744020Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal\$81144021Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)\$86444025Enterotomy With Exploration Or Foreign Body Removal; Large Bowel\$87744050Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy\$76844055Correction Of Malirotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)\$1,49244110Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomy\$76244111Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies\$87544120Partial Removal Of Small Bowel, Single Resection And Connectio  |                   |  |                        |
| 43886Revision Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$33643887Removal Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$32243888Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$42243899Unlisted Procedure, StomachPrice By Reg44005Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)\$98544010Duodenotomy\$77644015Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)\$13744020Incision Of Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)\$86444025Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)\$86444025Enterotomy With Exploration Or Foreign Body Removal; Large Bowel\$87744050Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy\$76844055Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)\$1,49244100Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth\$9744111Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies\$87544120Partial Removal Of Small Bowel, Each Additional Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$234   |                   |  |                        |
| 43887Removal Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$32243888Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$42243999Unlisted Procedure, StomachPrice By Rep44005Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)\$98544010Duodenotomy\$77644015Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)\$13744021Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal\$86444021Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)\$86444025Enterotomy With Exploration Or Foreign Body Removal; Large Bowel\$87744050Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy\$76844055Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)\$1,49244100Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth\$9744110Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies\$87544121Partial Removal Of Small Bowel, Single Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$1,057  |                   | 11   |                        |
| 43888Replacement Of Port Beneath Skin For Saline Injection Into Stomach Banding Device, Open Procedure\$42243999Unlisted Procedure, StomachPrice By Rep44005Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)\$98544010Duodenotomy\$77644015Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)\$13744020Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal\$81144021Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)\$86444025Enterotomy With Exploration Or Foreign Body Removal; Large Bowel\$87744050Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy\$76844052Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)\$1,49244100Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth\$9744110Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy\$76244111Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies\$87544120Partial Removal Of Small Bowel, Single Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$234  |                   |  | \$336.05               |
| 43999 Unlisted Procedure, Stomach 44005 Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure) 44015 Duodenotomy 44015 Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure) 44015 Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal 44020 Incision Of Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube) 44021 Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube) 44025 Enterotomy With Exploration Or Foreign Body Removal; Large Bowel 44050 Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy 44050 Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure) 44060 Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth 44070 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy 44070 Partial Removal Of Small Bowel, Single Resection And Connection 44070 Partial Removal Of Small Bowel, Each Additional Resection And Connection 44070 Partial Removal Of Small Bowel, Each Additional Resection And Connection 44070 Partial Removal Of Small Bowel, Each Additional Resection And Connection 44070 Partial Removal Of Small Bowel, Each Additional Resection And Connection 44070 Partial Removal Of Small Bowel, Each Additional Resection And Connection 44070 Partial Removal Of Small Bowel, Each Additional Resection And Connection 44070 Partial Removal Of Small Bowel, Each Additional Resection And Connection 44070 Partial Removal Of Small Bowel, Each Additional Resection And Connection  |                   |  | \$322.18               |
| Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)  \$985 44010 Duodenotomy  \$776  44015 Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)  \$137 44020 Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal  \$811 Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)  \$864 44025 Enterotomy With Exploration Or Foreign Body Removal; Large Bowel  \$877 44050 Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy  \$768 44055 Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)  \$1,492 44100 Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth  \$976  \$762  \$44111 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy  \$786  \$787  \$44120 Partial Removal Of Small Bowel, Single Resection And Connection  \$1,057  \$44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection  \$234  |                   |  | \$422.05               |
| 44010 Duodenotomy \$776  44015 Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure) \$137  44020 Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal \$811  44021 Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube) \$864  44025 Enterotomy With Exploration Or Foreign Body Removal; Large Bowel \$877  44050 Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy \$768  44055 Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure) \$1,492  44100 Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth \$97  44110 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy \$762  44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875  44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057  |                   |  | Price By Report        |
| 44015 Tube Or Needle Catheter Jejunostomy For Enteral Alimentation, Intraoperative, Any Method (List Separately In Addition To Primary Procedure)  \$137 44020 Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal  \$811 44021 Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)  \$864 44025 Enterotomy With Exploration Or Foreign Body Removal; Large Bowel  \$876 84050 Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy  \$768 44055 Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)  \$1,492 44100 Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth  \$762 44111 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies  \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection  \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection  \$234  |                   |  | \$985.82               |
| 44020Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal\$81144021Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)\$86444025Enterotomy With Exploration Or Foreign Body Removal; Large Bowel\$87744050Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy\$76844055Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)\$1,49244100Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth\$9744110Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy\$76244111Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies\$87544120Partial Removal Of Small Bowel, Single Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$234  | 44010             | Duodenotomy  | \$776.34               |
| 44020Incision Of Small Bowel For Exploration, Biopsy, Or Foreign Body Removal\$81144021Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)\$86444025Enterotomy With Exploration Or Foreign Body Removal; Large Bowel\$87744050Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy\$76844055Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)\$1,49244100Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth\$9744110Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy\$76244111Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies\$87544120Partial Removal Of Small Bowel, Single Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$234  |                   |  | 4                      |
| ### 44021 Enterotomy, Small Bowel, Other Than Duodenum; For Decompression (Eg, Baker Tube)  #### 5864   ### 44025 Enterotomy With Exploration Or Foreign Body Removal; Large Bowel   |                   |  | \$137.42               |
| ### Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875  ###################################   |                   |  | \$811.22               |
| 44050 Reduction Of Volvulus, Intussusception, Internal Hernia, By Laparotomy  \$768 44055 Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)  \$1,492 44100 Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth  \$97  44110 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy  \$762  44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies  \$875  44120 Partial Removal Of Small Bowel, Single Resection And Connection  \$1,057  44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection  \$234   |                   |  | \$864.11               |
| 44055 Correction Of Malrotation By Lysis Of Duodenal Bands And/Or Reduction Of Midgut Volvulus (Eg, Ladd Procedure)  44100 Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth  597  44110 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy  44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies  44120 Partial Removal Of Small Bowel, Single Resection And Connection  44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection  5234  |                   |  | \$877.32               |
| 44100 Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth  \$97  44110 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy  \$762  44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies  \$875  44120 Partial Removal Of Small Bowel, Single Resection And Connection  \$1,057  44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection  \$234  |                   |  | \$768.22               |
| 44110 Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization; Single Enterotomy \$762  44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875  44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057  44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234  |                   |  | \$1,492.64             |
| 44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234   | 44100             | Biopsy Of Small Bowel By Capsule Attached To Tube Passed Through Mouth   | \$97.67                |
| 44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234   |                   |  |                        |
| 44111 Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies \$875 44120 Partial Removal Of Small Bowel, Single Resection And Connection \$1,057 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234   |                   | Excision Of One Or More Lesions Of Small Or Large Intestine Not Requiring Anastomosis, Exteriorization, Or Fistulization, Single Enterotomy  | \$762.13               |
| 44120Partial Removal Of Small Bowel, Single Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$234  | <u>4</u> 4110     | Exolority of the |                        |
| 44120Partial Removal Of Small Bowel, Single Resection And Connection\$1,05744121Partial Removal Of Small Bowel, Each Additional Resection And Connection\$234  | 44110             | Ended of the State of |                        |
| 44121 Partial Removal Of Small Bowel, Each Additional Resection And Connection \$234   |                   |  | \$875.86               |
|  | 4411              | Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies  | \$875.86<br>\$1,057.35 |
| <u></u>  | 4411 <sup>2</sup> | Excision Of One Or More Lesions Of Small Or Large Bowel Not Requiring Anastomosis, Exteriorization, Or Fistulization; Multiple Enterotomies  Partial Removal Of Small Bowel, Single Resection And Connection   |                        |

| Codo   | Description  | Fee                    |
|--------|--|------------------------|
|        | Partial Removal Of Small Bowel To Correct Congenital Defect, Single Resection And Connection, Without Tapering   | \$2,520.72             |
|        | Partial Removal Of Small Bowel To Correct Congenital Defect, Single Resection And Connection, With Tapering  | \$2,923.62             |
| 44127  | Fartan Nemoval of Small Bower to Confect Congenital Belect, Single Nesection And Confection, With Tapening   | φ2,923.02              |
| 11120  | Partial Removal Of Small Bowel To Correct Congenital Defect, Single Resection And Connection, Each Additional Resection And Connection   | \$211.75               |
|        | Enteroenterostomy, Anastomosis Of Intestine, With Or Without Cutaneous Enterostomy (Separate Procedure)  | \$919.31               |
|        | Partial Removal Of Donor Small Bowel For Transplantation, Open Procedure   | Price By Report        |
|        | Intestinal Allotransplantation; From Living Donor  | Price By Report        |
|        | Removal Of Transplanted Intestinal Allograft, Complete   | \$1,352.27             |
| 44137  | Mobilization (Take-Down) Of Splenic Flexure Performed In Conjunction With Partial Colectomy (List Separately In Addition To Primary  | φ1,332.21              |
| 44120  | Procedure)   | ¢117.06                |
|        | Partial Removal Of Large Bowel, With Connection  | \$117.86<br>\$1,325.64 |
|        | Colectomy, Partial; With Skin Level Cecostomy Or Colostomy   | \$1,446.47             |
|        | Colectomy, Partial; With End Colostomy And Closure Of Distal Segment (Hartmann Type Procedure)   |                        |
|        |  | \$1,315.90             |
|        | Colectomy, Partial; With Resection, With Colostomy Or Ileostomy And Creation Of Mucofistula  | \$1,393.77             |
|        | Colectomy, Partial; With Coloproctostomy (Low Pelvic Anastomosis)  | \$1,524.86             |
|        | Colectomy, Partial; With Coloproctostomy (Low Pelvic Anastomosis), With Colostomy  | \$1,755.32             |
|        | Partial Removal Of Large Bowel, Abdominal And Transanal Approach   | \$1,711.89             |
|        | Colectomy, Total, Abdominal, With Ileostomy Or Ileoproctostomy; Without Proctectomy  | \$1,562.47             |
| 44151  | Colectomy, Total, Abdominal, Without Proctectomy; With Continent Ileostomy   | \$1,912.60             |
| 44155  | Removal Of Large Bowel And Rectum And Creation Of Opening From End Of Small Intestine Through Wall Of Abdomen  | \$1,693.78             |
|        | Removal Of Large Bowel And Rectum And Creation Of Opening From End Of Small Intestine Through Wall Of Abdomen, With Small Intestinal   |                        |
| 44156  | Reservoir For Feces  | \$2,045.75             |
|        | Colectomy, Total, Abdominal, With Proctectomy; With Ileoanal Anastomosis, Includes Loop Ileostomy, And Rectal Mucosectomy, When  |                        |
| 44157  | Performed  | \$1,941.03             |
|        | Removal Of Large Bowel And Rectum With Attachment Of Small Bowel To Anus And Creation Of Small Bowel Reservoir   | \$1,988.76             |
|        | Colectomy, Partial, With Removal Of Terminal Ileum With Ileocolostomy  | \$1,228.00             |
|        | Laparoscopy, Surgical, Enterolysis (Freeing Of Intestinal Adhesion) (Separate Procedure)   | \$945.42               |
|        | Creation Of Small Bowel Opening Using An Endoscope For Decompression Or Feeding  |                        |
|        |  | \$667.83               |
|        | Creation Of Small Bowel Opening Using An Endoscope, Non-Tube   | \$1,128.38             |
|        | Laparoscopy, Surgical, Colostomy Or Skin Level Cecostomy   | \$1,248.81             |
|        | Partial Removal Of Small Bowel Using An Endoscope, Single Resection And Connection   | \$1,426.45             |
|        | Partial Removal Of Small Bowel Using An Endoscope, Each Additional Resection And Connection  | \$233.68               |
| 44204  | Laparoscopy, Surgical; Colectomy, Partial, With Anastomosis  | \$1,592.28             |
| 44205  | Laparoscopy, Surgical; Colectomy, Partial, With Removal Of Terminal Ileum With Ileocolostomy   | \$1,387.76             |
| 44206  | Laparoscopy, Surgical; Colectomy, Partial, With End Colostomy And Closure Of Distal Segment (Hartmann Type Procedure)  | \$1,810.41             |
| 44207  | Laparoscopy, Surgical; Colectomy, Partial, With Anastomosis, With Coloproctostomy (Low Pelvic Anastomosis)   | \$1,898.04             |
| 44208  | Laparoscopy, Surgical; Colectomy, Partial, With Anastomosis, With Coloproctostomy (Low Pelvic Anastomosis) With Colostomy  | \$1,763.91             |
|        | Laparoscopy, Surgical; Colectomy, Total, Abdominal, Without Proctectomy, With Ileostomy Or Ileoproctostomy   | \$1,590.83             |
|        | Laparoscopy, Surgical; Colectomy, Total, Abdominal, With Proctectomy, With Ileoanal Anastomosis, Creation Of Ileal Reservoir (S Or J), With  | ψ.,σσσ.σσ              |
| 44211  | Loop Ileostomy, Includes Rectal Mucosectomy, When Performed  | \$1,923.92             |
|        | Laparoscopy, Surgical; Colectomy, Total, Abdominal, With Proctectomy, With Ileostomy   | \$2,129.45             |
|        | Laparoscopy, Surgical, Mobilization (Take-Down) Of Splenic Flexure Performed In Conjunction With Partial Colectomy (List Separately In   | Ψ2,:20:10              |
| 44213  | Addition To Primary Procedure)   | \$183.50               |
|        | Laparoscopy, Surgical, Closure Of Enterostomy, Large Or Small Intestine, With Resection And Anastomosis  | \$1,725.79             |
|        | Unlisted Laparoscopy Procedure, Intestine (Except Rectum)  | \$4,716.58             |
|        | Insertion Of Small Bowel Tube, Open Procedure  |                        |
|        |  | \$749.63               |
|        | lleostomy Or Jejunostomy, Non-Tube   | \$959.09               |
|        | Release Of Superficial Scar Tissue From Surgically Created Opening Into Lower Small Bowel From Body Wall (Ileostomy)   | \$396.02               |
|        | Revision Of Ileostomy; Complicated (Reconstruction In-Depth) (Separate Procedure)  | \$662.53               |
|        | Continent Ileostomy (Kock Procedure) (Separate Procedure)  | \$1,254.42             |
|        | Colostomy Or Skin Level Cecostomy;   | \$785.75               |
|        | Colostomy Or Skin Level Cecostomy; With Multiple Biopsies (Eg, For Congenital Megacolon) (Separate Procedure)  | \$853.71               |
| 44340  | Release Of Superficial Scar Tissue From Surgically Created Opening Into Large Bowel From Body Wall (Colostomy), Simple   | \$415.47               |
|        | Reconstruction Of Large Bowel Opening, Complicated   | \$941.19               |
| 44346  | Revision Of Colostomy; With Repair Of Paracolostomy Hernia (Separate Procedure)  | \$1,056.56             |
| 44360  | Diagnostic Examination Of Small Bowel, Not Including Lower Small Intestine (Ileum), Using An Endoscope   | \$145.85               |
|        | Biopsy Of Small Bowel Except The Ileum Using An Endoscope  | \$161.25               |
|        | Removal Of Foreign Bodies From Small Bowel Not Including Lower Small Intestine (Ileum)   | \$194.60               |
|        | Removal Of Small Bowel Polyps Or Growths Using An Endoscope, With An Electrical Cautery  | \$186.69               |
|        | Removal Of Small Bowel Polyps Or Growths Using An Endoscope, With A Mechanical Snare   | \$166.39               |
| 74300  | Small Intestinal Endoscopy, Enteroscopy Beyond Second Portion Of Duodenum, Not Including Ileum; With Control Of Bleeding (Eg, Injection,   | φ100.39                |
| 44200  |  | <b>#040.00</b>         |
| 44366  | Bipolar Cautery, Unipolar Cautery, Laser, Heater Probe, Stapler, Plasma Coagulator)  | \$243.32               |
| 44000  | Posterioring Of Tipous Absorbatifics, Tumors, Or Polyres Of Carell Power Net Including Lawrence Could be a first the August Augu | <b>***</b>             |
|        | Destruction Of Tissue Abnormalities, Tumors, Or Polyps Of Small Bowel Not Including Lower Small Intestine (Ileum) Using An Endoscope   | \$249.39               |
|        | Insertion Of Small Bowel Stent Using An Endoscope Above The Lower Small Bowel  | \$243.65               |
|        | Insertion Of Tube Into Middle Small Intestine (Jejunum), Accessed Through The Skin, Using An Endoscope   | \$217.50               |
| 44373  | Convert Stomach Tube To Tube In Middle Small Intestine (Jejunum), Accessed Through The Skin, Using An Endoscope  | \$174.50               |
|        | Diagnostic Examination Of Small Bowel Including Lower Small Intestine (Ileum) With Collection Of Specimens By Brushing Or Washing, Using   |                        |
| 44376  | An Endoscope   | \$259.80               |
| 44377  | Biopsy Of Small Bowel Including The Ileum Using An Endoscope   | \$273.01               |
|        | Control Of Bleeding Of Small Bowel Including Lower Small Intestine (Ileum) With Biopsies, Using An Endoscope   | \$351.47               |
|        | Insertion Of Small Bowel Stent Using An Endoscope Below The Lower Small Bowel  | \$373.73               |
| 1.0.0  | Diagnostic Examination Of Small Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Lower Small Bowel From Body  | ψο. σ. το              |
| 44380  | Wall (fleostomy)   | \$214.92               |
| . 1300 | Balloon Dilation Of Small Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Lower Small Bowel From Body Wall   | Ψ£17.32                |
| 4/301  | (lleostomy)  | \$991.31               |
| 77301  | (moosing)  | 16.166ψ                |

| Description Biopsies Of Small Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Lower Small Bowel From Body Wall   | Fee  |
|--|--|
| lleostomy)   | \$219.71   |
| nsertion Of Stent Into Small Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Lower Small Bowel From Body Wall  | Ψ2.0   |
| lleostomy)   | \$140.34   |
| Diagnostic Examination Of Surgically Created Pouch Of Small Bowel Including Lower Small Intestine (Ileum) Using An Endoscope   | \$154.42   |
| Biopsy Of Small Bowel Pouch Using An Endoscope   | \$227.58   |
| Diagnostic Examination Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall   |  |
| Colostomy)   | \$339.71   |
| Rionsies Of Large Rowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Rowel From Rody Wall (Colostomy)   | \$445.90   |
|  | ψ-1-3.30   |
| Sody Wall (Colostomy)  | \$393.71   |
| Control Of Bleeding Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall  |  |
| Colostomy)   | \$635.86   |
|  |  |
|  | \$372.39   |
|  | \$473.73   |
|  | ψ473.73  |
| nto Large Bowel From Body Wall (Colostomy)   | \$2,447.91   |
| nsertion Of Stent Into Large Bowel, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall   |  |
| Colostomy)   | \$239.07   |
|  |  |
|  | \$277.59   |
|  | \$415.61   |
|  | <b>Ф415.61</b>   |
| Colostomy)   | \$555.02   |
| Ultrasound Examination Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall   | ***************************************  |
| Colostomy)   | \$209.60   |
| Fine Needle Aspirations And/Or Biopsies Of Large Bowel With Ultrasound Guidance, Using An Endoscope Inserted Through Surgically Created  |  |
| , , , ,,   | \$251.62   |
|  | <b>***</b>   |
|  | \$211.35   |
|  | \$19.76<br>\$912.51  |
|  | \$1,433.04   |
|  | \$894.50   |
| Suture Of Large Bowel Ulcer, Defect, Wound, Injury, Or Rupture With Creation Of Opening  | \$1,155.89   |
| ntestinal Stricturoplasty (Enterotomy And Enterorrhaphy) With Or Without Dilation, For Intestinal Obstruction  | \$956.51   |
|  | \$671.50   |
| losure Of Enterostomy, Large Or Small Intestine; With Resection And Anastomosis Other Than Colorectal  | \$934.87   |
| Classes Of Estandard Large On Small Intesting With Deposition And Colorada Assets Proping (F. Classes Of Ladrange Type Deposition)   | <b>#4.000.04</b>   |
|  | \$1,662.34<br>\$909.81   |
|  | \$939.91   |
|  | \$1,193.30   |
| Closure Of Enterovesical Fistula; With Intestine And/Or Bladder Resection  | \$1,374.53   |
| ntestinal Plication, Complete (Noble Type Operation) (Separate Procedure)  | \$955.22   |
| xclusion Of Small Intestine From Pelvis By Mesh Or Other Prosthesis, Or Native Tissue (Eg, Bladder Or Omentum)   | \$901.10   |
| ntraoperative Colonic Lavage (List Separately In Addition To Code For Primary Procedure)   | \$148.05   |
|  | Price By Report  |
|  | <b>047.00</b>  |
|  | \$317.89<br>\$238.76   |
|  | \$334.25   |
| Small Bowel Procedure  | Price By Report  |
| Repair Of Congenital Bowel Defect  | \$657.87   |
| xcision Of Lesion Of Mesentery (Separate Procedure)  | \$758.63   |
| Suture Of Mesentery (Separate Procedure)   | \$671.69   |
| Procedure For Congenital Bowel Defect  | Price By Report  |
| Orainage Of Abscess Of Appendix, Open Procedure  | \$700.29   |
| Appendectomy;  | \$635.95   |
| Removal Of Appendix During Other Major Procedure   | \$81.55  |
| Appendectomy; For Ruptured Appendix With Abscess Or Generalized Peritonitis  Laparoscopy, Surgical, Appendectomy   | \$850.64<br>\$599.61   |
| Jnlisted Laparoscopy Procedure, Appendix   | \$1,593.86   |
|  |  |
| Orainage Of Abscess In Pelvic Region Through Rectum  |  |
| Orainage Of Abscess In Pelvic Region Through Rectum Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining   | \$391.44<br>\$308.29   |
|  | \$391.44<br>\$308.29   |
| Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining   | \$391.44   |
| Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining Incision And Drainage Of Abscess Above Pelvic Floor Or Behind Rectum Biopsy Of Anal And/Or Rectal Wall Via Anus Removal Of Muscle In The Anus And Rectum Area   | \$391.44<br>\$308.29<br>\$521.96<br>\$224.31<br>\$338.39   |
| Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining Incision And Drainage Of Abscess Above Pelvic Floor Or Behind Rectum Biopsy Of Anal And/Or Rectal Wall Via Anus Removal Of Muscle In The Anus And Rectum Area Removal Of Rectum With Creation Of Large Bowel Opening, Open Abdominal And Rectal Procedure   | \$391.44<br>\$308.29<br>\$521.96<br>\$224.31<br>\$338.39<br>\$1,579.48   |
| Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining Incision And Drainage Of Abscess Above Pelvic Floor Or Behind Rectum Biopsy Of Anal And/Or Rectal Wall Via Anus Removal Of Muscle In The Anus And Rectum Area Removal Of Rectum With Creation Of Large Bowel Opening, Open Abdominal And Rectal Procedure Partial Removal Of Rectum, Open Abdominal Procedure | \$391.44<br>\$308.29<br>\$521.96<br>\$224.31<br>\$338.39   |
| Orainage Of Rectal Abscess, Superficial, Under The Rectal Lining Incision And Drainage Of Abscess Above Pelvic Floor Or Behind Rectum Biopsy Of Anal And/Or Rectal Wall Via Anus Removal Of Muscle In The Anus And Rectum Area Removal Of Rectum With Creation Of Large Bowel Opening, Open Abdominal And Rectal Procedure   | \$391.44<br>\$308.29<br>\$521.96<br>\$224.31<br>\$338.39<br>\$1,579.48   |
|  | iopsies Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall (Colostomy) emoval Of Foreign Bodies From Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall (Colostomy) ontrol Of Bleeding Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) emoval Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel By Hot Biopsy Forceps, Using An Endoscope Inserted Through urgically Created Opening Into Large Bowel From Body Wall (Colostomy) emoval Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel By Share, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall (Colostomy) estruction Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel Colostomy) estruction Of Stort Into Large Bowel, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) enroval Of Lining Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) elections Beneath Lining Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) elections Beneath Lining Of Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy en Needle Aspirations And/Or Biopsies Of Large Bowel With Ultrasound Guidance, Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy) into Large Bowel Using An Endoscope Inserted Through Surgically Created Opening Into Large Bowel From Body Wall Colostomy into Large Bowel Using Policy Wall Colostomy Sulface Advanced Colostomy Into Large Bowel With Ultrasound Guida |

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|----------------|--|--|
| Code           | Description Partial Removal Of Rectum, Abdominal And Transsacral Approach  | Fee<br>\$1,606.26                      |
|                | Partial Removal Of Rectum, Abdominal Approach Only   | \$1,403.93                             |
| 10110          | Removal Of Rectum With Creation Of Small Intestinal Reservoir For Feces, Via Incision Of Abdomen And Region Between Thighs (Combined   | ψ1,100.00                              |
| 45119          | Abdominoperineal Approach)   | \$1,711.14                             |
|                | Proctectomy, Complete (For Congenital Megacolon), Abdominal And Perineal Approach; With Pull-Through Procedure And Anastomosis (Eg,  |  |
|                | Swenson, Duhamel, Or Soave Type Operation)   | \$1,420.53                             |
|                | Removal Of Congenital Rectal Defect And Large Bowel With Multiple Biopsies, Open Abdominal And Rectal Procedure  | \$1,521.95                             |
|                | Partial Removal Of Rectum, Perineal Approach   | \$1,148.69                             |
|                | Removal Of Large Bowel, Rectum, Prostate, Urinary Structures And/Or Uterus And Cervix  | \$2,468.77                             |
|                | Repair Of Prolapsed Rectum, Perineal Approach  | \$979.51                               |
|                | Repair Of Prolapsed Rectum, Abdominal And Perineal Approach  | \$1,181.68                             |
|                | Excision Of Ileoanal Reservoir With Ileostomy Incision Of Stricture Of Rectum  | \$1,628.89                             |
|                | Removal Of Rectal Growth Through The Sacrum Or Tail Bone   | \$383.28<br>\$915.01                   |
|                | Removal Of Rectal Growth Through The Anus  | \$632.27                               |
|                | Removal Of Rectal Growth Through The Anus With Removal Of A Portion Of The Muscle  | \$757.48                               |
|                | Destruction Of Tumor Of Rectum Through Anus  | \$653.71                               |
|                | Diagnostic Examination Of Rectum And Lower Large Bowel Using A Rigid Endoscope   | \$91.57                                |
|                | Dilation Of Rectum And/Or Lower Large Bowel Using A Rigid Endoscope  | \$966.90                               |
|                | Biopsies Of Rectum And/Or Lower Large Bowel Using A Rigid Endoscope  | \$176.58                               |
|                | Removal Of Foreign Bodies From Rectum And/Or Lower Large Bowel Using A Rigid Endoscope   | \$206.64                               |
|                | Removal Of Polyp Or Growth Of Rectum And Large Bowel Using An Endoscope With An Electrical Cautery   | \$198.66                               |
| 45309          | Removal Of Polyp Or Growth Of Rectum And Large Bowel Using An Endoscope With A Mechanical Snare  | \$204.65                               |
|                | Removal Of Multiple Tissue Abnormalities, Tumors, Or Polyps Of Lower Large Bowel By Hot Biopsy Forceps, Electric Cautery, Or Snare, Using  |  |
|                | A Rigid Endoscope  | \$219.95                               |
|                | Control Of Bleeding Of Lower Large Bowel Using A Rigid Endoscope   | \$165.15                               |
|                | Destruction Of Multiple Tissue Abnormalities, Tumors, Or Polyps Of Lower Large Bowel Using A Rigid Endoscope   | \$216.03                               |
|                | Release Of Twisted Lower Large Bowel Using A Rigid Endoscope   | \$91.32                                |
|                | Insertion Of Stent Into Lower Large Bowel Using A Rigid Endoscope  | \$103.12                               |
|                | Diagnostic Examination Of The Lower Portion Of The Large Bowel Using An Endoscope  | \$141.00                               |
|                | Biopsy Of The Lower Large Bowel Using An Endoscope (Sigmoidoscopy)   | \$210.13                               |
|                | Removal Of Foreign Bodies In Lower Portion Of The Large Bowel (Colon) Using An Endoscope (Colonoscopy)   | \$249.59                               |
|                | Removal Of Polyps Or Growths In Upper Large Bowel Using An Endoscope (Sigmoidoscopy) Using Electric Cautery  | \$327.88                               |
|                | Control Of Bleeding In Lower Large Bowel Using An Endoscope Injections Beneath Lining Of Lower Large Bowel, Using A Flexible Endoscope   | \$365.00<br>\$291.76                   |
|                | Decompression Of Twisted Or Abnormally Dilated Lower Large Bowel, Using A Flexible Endoscope   | \$104.55                               |
| 40001          | Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And  | \$104.55                               |
| 45338          | Interpretation   | \$269.44                               |
|                | Balloon Dilation Of Lower Large Bowel, Using A Flexible Endoscope  | \$464.14                               |
|                | Ultrasound Examination Of Lower Large Bowel , Using A Flexible Endoscope   | \$113.59                               |
| 45342          | Fine Needle Aspirations And/Or Biopsies Of Lower Large Bowel With Ultrasound Guidance, Using A Flexible Endoscope  | \$155.16                               |
| 45346          | Destruction Of Tissue Abnormalities, Tumors, Or Polyps Of Lower Large Bowel Using A Flexible Endoscope   | \$2,374.38                             |
| 45347          | Insertion Of Stent Into Lower Large Bowel, Using A Flexible Endoscope  | \$140.87                               |
| 45349          | Removal Of Lower Portion Of The Large Bowel Tissue Using An Endoscope (Sigmoidoscopy)  | \$181.14                               |
| 45350          | Banding Of Hemorrhoids Using A Flexible Endoscope (Sigmoidoscope)  | \$505.29                               |
| 45378          | Diagnostic Examination Of The Colon (Large Bowel) Using An Endoscope(Colonoscopy); High Risk   | \$365.51                               |
|                | Removal Of Foreign Bodies In Large Bowel (Colon) Using An Endoscope (Colonoscopy)  | \$422.21                               |
|                | Biopsy Of The Large Bowel Using An Endoscope (Colonoscopy)   | \$473.55                               |
|                | Injections Beneath Lining Of Large Bowel, Using A Flexible Endoscope   | \$474.47                               |
|                | Control Of Bleeding In Upper Large Bowel Using An Endoscope  | \$485.33                               |
|                | Removal Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel By Hot Biopsy Forceps, Using A Flexible Endoscope  | \$511.50                               |
|                | Removal Of Polyps Or Growths In Large Bowel Using An Endoscope (Colonoscopy) Using A Mechanical Snare  | \$489.72                               |
|                | Balloon Dilation Of Large Bowel Using A Flexible Endoscope   | \$673.28                               |
|                | Destruction Of Tissue Abnormalities, Tumors, Or Polyps Of Large Bowel Using A Flexible Endoscope  Insertion Of Stent In Large Bowel Using A Flexible Endoscope   | \$2,251.79<br>\$264.51                 |
|                | Removal Of Large Bowel Cising A Flexible Endoscope (Colonoscopy)   | \$337.17                               |
|                | Ultrasound Examination Of Large Bowel Using A Flexible Endoscope   | \$261.88                               |
|                | Fine Needle Aspirations And/Or Biopsies Of Large Bowel With Ultrasound Guidance, Using A Flexible Endoscope  | \$277.38                               |
|                | Decompression Of Twisted Or Abnormally Dilated Large Bowel, Using A Flexible Endoscope   | \$254.66                               |
|                | Removal Of Rectum With Creation Of Large Bowel Opening Through Using An Endoscope, Abdominoperineal Approach   | \$1,762.56                             |
|                | Removal Of Rectum Using An Endoscope, Abdominoperineal Approach  | \$2,229.53                             |
|                | Banding Of Hemorrhoids Using A Flexible Endoscope (Colonoscope)  | \$607.90                               |
| 45399          | Large Bowel Procedure  | \$879.67                               |
| 45400          | Laparoscopy, Surgical; Proctopexy (For Prolapse)   | \$1,190.39                             |
|                | Laparoscopy, Surgical; Proctopexy (For Prolapse), With Sigmoid Resection   | \$1,359.30                             |
|                | Unlisted Laparoscopy Procedure, Rectum   | Price By Report                        |
|                | Repair Of Narrowed Rectum  | \$518.56                               |
|                | Repair Of Bulging Of Lining Of Rectum Through Anus   | \$555.42                               |
|                | Injection Of Veins In Rectum   | \$159.19                               |
|                | Fixation Of Rectum To Sacrum, Open Abdominal Procedure   | \$954.32                               |
|                | Fixation Of Rectum To Sacrum By Perineal Approach  | \$856.14                               |
|                | Fixation Of Rectum To Sacrum With Removal Of Large Bowel, Open Abdominal Procedure   | \$1,317.04                             |
|                | Repair Of Bulging Of Rectum Into Vagina  | \$631.10                               |
| 1 45562        | Exploration, Repair, And Presacral Drainage For Rectal Injury;   | \$1,027.28                             |
|                |  |  |
| 45563          | Repair Of Rectal Wound, With Surgically Created Opening Into Large Bowel From Body Wall (Colostomy)  | \$1,660.73<br>\$1,125.12               |
| 45563<br>45800 | Repair Of Rectal Wound, With Surgically Created Opening Into Large Bowel From Body Wall (Colostomy)  Closure Of Abnormal Opening From Rectum Into Bladder  Closure Of Rectovesical Fistula; With Colostomy | \$1,060.73<br>\$1,135.12<br>\$1,312.71 |

| Code  | Description  | Fee                  |
|-------|--|----------------------|
|       | Closure Of Rectourethral Fistula;  | \$1,137.96           |
|       | Closure Of Rectourethral Fistula; With Colostomy   | \$1,375.93           |
|       | Manual Replacement Of Bulging Of Rectum Through Anus Under Anesthesia  | \$191.76             |
| 45905 | Dilation Of Sphincter Of Anus Under Anesthesia   | \$147.39             |
| 45910 | Dilation Of Constricted Rectum Under Anesthesia  | \$129.82             |
|       | Removal Of Impacted Stool Or Foreign Body From Rectum Under Anesthesia   | \$247.20             |
|       | Anorecta Exam, Surgical, Requiring Anesthesia (General, Spinal, Or Epidural), Diagnostic   | \$105.28             |
|       | Unlisted Procedure, Rectum   | Price By Report      |
|       | Insertion Of Drain (Seton) In Anus   | \$116.20             |
|       | Removal Of Drain (Seton) From Anus  Drainage Of Rectal Abscess, Deep   | \$250.39             |
|       | Incision And Drainage Of Abscess Within Wall Of Rectum Under Anesthesia  | \$384.49<br>\$405.59 |
|       | Drainage Of Rectal Abscess, Superficial, Surrounding The Anus  | \$168.67             |
|       |  |                      |
|       | Incision And Drainage Of Abscess In Wall Of Rectum Or Between Rectum And Muscle With Incision Or Removal Of Abnormal Drainage Tract  | \$493.84             |
|       | Incision Of Tissue Blocking Rectum Of Infant Incision Of Sphincter Of Anus   | \$252.79<br>\$201.53 |
|       | Incision Of External Hemorrhoid With Blood Clot (Thrombosed Hemorrhoid)  | \$173.86             |
|       | Removal Of Chronic Tear (Fissure) Of Anus  | \$425.10             |
|       | Removal Of Single External Benign Growth (Papilla Or Tag) Of Anus  | \$178.21             |
|       | Removal Of External Hemorrhoids By Rubber Banding  | \$232.26             |
| 46230 | Removal Of Multiple External Benign Growths (Papillas Or Tags) Of Anus   | \$278.46             |
| 46250 | Hemorrhoidectomy, External, 2 Or More Columns/Groups   | \$335.69             |
| 46255 | Removal Of Single External And Internal Hemorrhoid Group   | \$413.21             |
|       | Removal Of Single External And Internal Hemorrhoid Group And Chronic Tear (Fissure) In Anus  | \$388.64             |
| 46258 | Removal Of Single External And Internal Hemorrhoid Group With Removal Of Abnormal Drainage Tract In Anus   | \$437.64             |
|       | Removal Of Multiple Internal And External Hemorrhoid Groups  | \$493.37             |
|       | Removal Of Multiple Internal And External Hemorrhoid Groups And Chronic Tear (Fissure) In Anus   | \$486.58             |
|       | Removal Of Multiple Internal And External Hemorrhoid Groups With Removal Of Abnormal Drainage Tract From Anus  | \$534.38             |
|       | Repair Of Abnormal Anal Drainage Tract, Under The Skin   | \$373.23             |
|       | Repair Of Anal Muscle And Abnormal Anal Drainage Tract, With The Sphincter   | \$473.47             |
|       | Repair Of Anal Muscle And Abnormal Anal Drainage Tract, Across Tissue Around The Sphincter   | \$505.49             |
|       | Repair Of Abnormal Anal Drainage Tract, Second Stage   | \$534.57             |
|       | Repair Of Abnormal Anal Drainage Tract With Rectal Tissue Flap   | \$515.76             |
|       | Removal Of External Hemorrhoid With Blood Clot (Thrombosed Hemorrhoid) Injection Of Sclerosing Solution, Hemorrhoids Or Mucosal Prolapse   | \$190.87             |
|       | Injection Of Scienosing Solution, Hemormolas of Mucosal Prolapse  Injection Of Agent To Destroy Nerves To Internal Sphincter Of Anus   | \$284.39             |
|       | Diagnostic Examination Of The Anus Using An Endoscope  | \$276.78<br>\$88.99  |
|       | Diagnostic Examination of The Vitas Gang Art Endescope  Diagnostic Examination Of Anus With Magnification And Chemical Agent Enhancement Using An Endoscope  | \$146.73             |
|       | Anoscopy; With Dilation (Eg, Balloon, Guide Wire, Bougie)  | \$680.74             |
|       | Anoscopy; With Biopsy, Single Or Multiple  | \$279.38             |
|       | Biopsies Of Anus With Magnification And Chemical Agent Enhancement Using An Endoscope  | \$223.74             |
|       | Anoscopy; With Removal Of Foreign Body   | \$290.22             |
| 46610 | Anoscopy; With Removal Of Single Tumor, Polyp, Or Other Lesion By Hot Biopsy Forceps Or Bipolar Cautery  | \$274.93             |
| 46611 | Anoscopy; With Removal Of Single Tumor, Polyp, Or Other Lesion By Snare Technique  | \$222.69             |
| 46612 | Anoscopy; With Removal Of Multiple Tumors, Polyps, Or Other Lesions By Hot Biopsy Forceps, Bipolar Cautery Or Snare Technique  | \$333.42             |
| 46614 | Anoscopy; With Control Of Bleeding (Eg, Injection, Bipolar Cautery, Unipolar Cautery, Laser, Heater Probe, Stapler, Plasma Coagulator)   | \$164.78             |
|       | Anoscopy; With Ablation Of Tumor(S), Polyp(S), Or Other Lesion(S) Not Amenable To Removal By Hot Biopsy Forceps, Bipolar Cautery Or  |                      |
|       | Snare Technique  | \$175.92             |
|       | Plastic Repair Of Anal Stricture, Adult  | \$605.26             |
|       | Plastic Repair Of Anal Stricture, Infant   | \$522.45             |
|       | Repair Of Abnormal Anal Drainage Tract With Tissue Glue  | \$161.93             |
| 46707 | Repair Of Abnormal Anal Drainage Tract With Implanted Plug   | \$461.83             |
| 46710 | Repair Of Abnormal Drainage Tract Or Pocket From Surgically Created Of Small Intestinal Reservoir For Feces, Via Incision Of Region Between Thighs (Combined Abdominoperineal Approach)              | \$996.43             |
|       | Repair Of Abnormal Drainage Tract Or Pocket From Surgically Created Of Small Intestinal Reservoir For Feces, Via Incision Of Abdomen And   |                      |
|       | Region Between Thighs (Combined Abdominoperineal Approach)   | \$1,973.16           |
|       | Repair Of Low Imperforate Anus; With Anoperineal Fistula ("Cut-Back" Procedure)  | \$506.02             |
| 46716 | Repair Of Low Imperforate Anus; With Transposition Of Anoperineal Or Anovestibular Fistula   | \$1,042.98           |
| 46730 | Repair Of Absence Of Opening In Anus, Via Incision Of Region Between Thighs Or Below Sacrum (Perineal Or Sacroperineal Approach)   | \$1,663.78           |
|       | Repair Of Absence Of Opening In Anus, Via Incision Of Abdomen And Region Between Thighs And Below Sacrum (Combined Abdominal And   | <b>V</b> 1,000110    |
| 46735 | Sacroperineal Approach)  | \$2,039.29           |
| 46740 | Repair Of Absence Of Opening In Anus And Abnormal Opening From Rectum Into Urethra Or Vagina, Approached Through Region Between Thighs Or Below Sacrum (Perineal Or Sacroperineal Approach)          | \$2,021.55           |
| 40740 | Repair Of Absence Of Opening In Anus And Abnormal Opening From Rectum Into Urethra Or Vagina, Approached Through Abdomen Or  | Ψ2,021.00            |
| 46742 | Below Sacrum (Combined Abdominal And Sacroperineal Approach)  Repair Of Defect For Single Channel Outlet Of Rectum, Vagina, And Urinary Tract, Via Incision Of Region Between Thighs Or Below Sacrum | \$2,230.28           |
| 46744 | (Perineal Or Sacroperineal Approach)   | \$3,131.19           |
| 40710 | Repair Of Defect For Single Channel Outlet Of Rectum, Vagina, And Urinary Tract, Via Incision Of Region Between Thighs Or Below Sacrum   | #0 <b>50</b> 7 55    |
| 46746 | (Combined Abdominal And Sacroperineal Approach)  Repair Of Defect For Single Channel Outlet Of Rectum, Vagina, And Urinary Tract, Via Incision Of Region Between Thighs Or Below Sacrum              | \$2,527.38           |
| 46740 | (Combined Abdominal And Sacroperineal Approach) With Lengthening Of Vagina   | \$3,731.61           |
|       | Repair Of Anal Muscle For Incontinence Or Prolapse, Adult  | \$687.19             |
|       | Repair Of Anal Muscle For Incontinence Or Prolapse, Addit  | \$608.55             |
|       | Graft (Thiersch Operation) For Rectal Incontinence And/Or Prolapse   | \$561.96             |
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|--|---|---|
|  | Description Removal Of Thiersch Wire Or Suture  | Fee<br>\$330.91   |
|  | Repair Of Anal Muscle To Correct Incontinence, Adult With Muscle Transplant   | \$1,014.92  |
|  | Repair Of Anal Muscle To Correct Incontinence, Adult With Muscle Tightening   | \$834.82  |
|  | Chemical Destruction Of Tissue Abnormalities Of Anus  | \$214.25  |
| 46910  | Destruction Of Tissue Abnormalities Of Anus   | \$186.99  |
| 46916  | Electrical Destruction Of Tissue Abnormalities Of Anus  | \$251.46  |
| 46917  | Laser Destruction Of Tissue Abnormalities Of Anus   | \$426.14  |
| 46922  | Removal Of Tissue Abnormalities Of Anus   | \$223.70  |
|  | Extensive Destruction Of Tissue Abnormalities Of Anus   | \$536.84  |
|  | Heat Destruction Of Internal Hemorrhoids  | \$207.15  |
|  | Repair Of Anal Tear With Dilation Of Anal Muscle, Initial   | \$254.57  |
|  | Repair Of Anal Tear With Dilation Of Anal Muscle, Subsequent  | \$243.21  |
|  | Tying Of Single Internal Hemorrhoid Group   | \$319.45  |
|  | Tying Of Multiple Internal Hemorrhoid Groups  | \$263.16  |
|  | Stapling Of Internal Hemorrhoid   | \$353.72  |
|  | Tying Of Arteries To Internal Hemorrhoid  | \$448.61  |
|  | Unlisted Procedure, Anus  | Price By Report   |
| 47000  | Needle Biopsy Of Liver, Accessed Through The Skin   | \$303.10  |
| 47001  | Biopsy Of Liver, Needle; When Done For Indicated Purpose At Time Of Other Major Procedure (List Separately In Addition To Code For  | ¢100 E2   |
|  | Primary Procedure) Drainage Of Liver Abscess Or Cyst, Open Procedure  | \$100.52<br>\$1,083.73  |
|  |   |   |
|  | Laparotomy, With Aspiration And/Or Injection Of Hepatic Parasitic (Eg, Amoebic Or Echinococcal) Cyst(S) Or Abscess(Es)  Biopsy Of Liver, Wedge  | \$1,041.27<br>\$559.42  |
|  | Hepatectomy, Resection Of Liver; Partial Lobectomy  | \$559.42<br>\$1,517.18  |
|  | Hepatectomy, Resection Of Liver, Partial Lobectomy  | \$3,027.82  |
|  | Hepatectomy, Resection Of Liver; Total Left Lobectomy   | \$3,027.62  |
|  | Hepatectomy, Resection Of Liver; Total Right Lobectomy  | \$2,910.48  |
|  | Donor Hepatectomy (Including Cold Preservation), From Cadaver Donor   | Price By Report   |
|  | Transplantation Of Donor Liver To Anatomic Position   | \$5,036.71  |
|  | Donor Hepatectomy (Including Cold Preservation), From Living Donor; Left Lateral Segment Only (Segments li And lii)   | \$3,152.50  |
| 47 140   | Pends repailed any (mindaing dots a reconstituting pends, but batter degindre only (degindre or main)   | ψ0,102.00   |
| 47141  | Donor Hepatectomy, With Preparation And Maintenance Of Allograft, From Living Donor; Total Left Lobectomy (Segments li, lii And Iv)   | \$3,765.96  |
| 47142  | Donor Hepatectomy, With Preparation And Maintenance Of Allograft, From Living Donor; Total Right Lobectomy (Segments V, Vi, Vii And Viii)   | \$4,139.12  |
|  |   | * /   |
|  | Backbench Standard Preparation Of Cadaver Donor Whole Liver Graft Prior To Allotransplantation, Including Cholecystectomy, If Necessary,  |   |
| 47143  | And Dissection And Removal Of Surrounding Soft Tissues To Prepare The Vena Cava, Portal Vein, Hepatic Artery, And Common B  | \$1,503.25  |
| 47144  | Preparation Of Donor Liver For Transplantation, With Trisegment Split Of Liver Graft Into 2 Partial Grafts  | \$1,290.33  |
| 47145  | Preparation Of Donor Liver For Transplantation, With Lobe Split Of Liver Graft Into 2 Partial Grafts  | \$2,500.86  |
| 47146  | Preparation Of Donor Liver For Transplantation, Venous Connection   | \$286.05  |
|  | Preparation Of Donor Liver For Transplantation, Arterial Connection   | \$332.91  |
|  | Marsupialization Of Cyst Or Abscess Of Liver  | \$1,012.18  |
|  | Suture Of Liver Wound To Control Bleeding, Simple Suture  | \$895.24  |
|  | Suturing Liver Wound To Control Bleeding, Complex Suture  | \$1,663.32  |
|  | Suture Of Liver Wound To Control Bleeding, Exploration Of Wound With Extensive Cleaning   | \$3,126.17  |
|  | Management Of Liver Hemorrhage; Re-Exploration Of Hepatic Wound For Removal Of Packing  | \$1,462.68  |
|  | Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Radiofrequency   | \$1,111.24  |
|  | Laparoscopy, Surgical, Ablation Of One Or More Liver Tumor(S); Cryosurgical   | \$1,118.07  |
|  | Unlisted Laparoscopic Procedure, Liver  | Price By Report   |
|  | Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Radiofrequency   | \$1,490.54  |
|  | Destruction Of 1 Or More Growths On Liver, Open Procedure, Using Freezing   | \$1,312.66  |
|  | Destruction Of 1 Or More Growths In Liver, Accessed Through The Skin, Using Radiofrequency  | \$4,118.82  |
|  | Destruction Of 1 Or More Liver Growths, Accessed Through The Skin, Using Freezing   |   |
| 4/399  | Holistad Procedure Liver  | \$6,048.77  |
|  | Unlisted Procedure, Liver   | Price By Report   |
| 47400  | Incision Or Creation Of Opening In Liver  | Price By Report<br>\$1,904.47   |
| 47400  | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder   | Price By Report   |
| 47400<br>47420   | Incision Or Creation Of Opening In Liver  | Price By Report<br>\$1,904.47<br>\$1,186.27   |
| 47400<br>47420   | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With  | Price By Report<br>\$1,904.47<br>\$1,186.27   |
| 47400<br>47420<br>47425  | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With  | Price By Report<br>\$1,904.47<br>\$1,186.27   |
| 47400<br>47420<br>47425<br>47460   | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy   | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53   |
| 47400<br>47420<br>47425<br>47460<br>47480  | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed,   | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56   |
| 47400<br>47420<br>47425<br>47460<br>47480  | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation   | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490                                     | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision  | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,217.86<br>\$1,132.53<br>\$788.56   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490                                     | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access  | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490                                     | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision   | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490                                     | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure)  Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access   | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,217.86<br>\$1,132.53<br>\$788.56   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490<br>47531                            | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And  | \$1,904.47<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67<br>\$410.69  |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490<br>47531                            | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, External   | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490<br>47531<br>47532                   | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, External Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, External  | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67<br>\$410.69<br>\$901.87   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490<br>47531<br>47532                   | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, External Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, Internal And External   | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67<br>\$410.69   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490<br>47531<br>47532<br>47533          | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, External Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, External  | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67<br>\$410.69<br>\$901.87   |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490<br>47531<br>47532<br>47533          | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, Internal And External Conversion Of External Biliary Drainage Catheter To Internal-External Biliary Drainage Catheter Accessed Through The Skin Using Imaging Conversion Of External Biliary Drainage Catheter To Internal-External Biliary Drainage Catheter Accessed Through The Skin Using Imaging  | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67<br>\$410.69<br>\$901.87<br>\$1,171.20                           |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490<br>47531<br>47532<br>47533<br>47534 | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, Internal And External Conversion Of External Biliary Drainage Catheter To Internal-External Biliary Drainage Catheter Accessed Through The Skin Using Imaging Conversion Of External Biliary Drainage Catheter To Internal-External Biliary Drainage Catheter Accessed Through The Skin Using Imaging  | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67<br>\$410.69<br>\$901.87<br>\$1,171.20                           |
| 47400<br>47420<br>47425<br>47460<br>47480<br>47490<br>47531<br>47532<br>47533<br>47534 | Incision Or Creation Of Opening In Liver Incision Or Creation Of Opening In Gallbladder Choledochotomy Or Choledochostomy With Exploration, Drainage, Or Removal Of Calculus, With Or Without Cholecystotomy; With Transduodenal Sphincterotomy  Transduodenal Sphincterotomy Or Sphincteroplasty, With Or Without Transduodenal Extraction Of Calculus (Separate Procedure) Drainage Or Removal Of Stones From Gallbladder, Open Procedure Cholecystostomy, Percutaneous, Complete Procedure, Including Imaging Guidance, Catheter Placement, Cholecystogram When Performed, And Radiological Supervision And Interpretation Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, Existing Access Injection Of Bile Duct For X-Ray Imaging Procedure Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation, New Access Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, External Placement Of Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, Internal And External Conversion Of External Biliary Drainage Catheter To Internal-External Biliary Drainage Catheter Accessed Through The Skin Using Imaging Guidance With Study Of Bile Ducts And Radiological Supervision And Interpretation | Price By Report<br>\$1,904.47<br>\$1,186.27<br>\$1,217.86<br>\$1,132.53<br>\$788.56<br>\$279.67<br>\$410.69<br>\$901.87<br>\$1,171.20<br>\$1,414.43<br>\$891.85 |

| Code  | Description   | Fee  |
|---|---|--|
| Code  | Placement Of Stent Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, Existing  | 166  |
| 47538   | Access Site   | \$3,868.28   |
| 47500   | Placement Of Stent Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation, New   | £4.070.44  |
| 4/539   | Access Site Placement Of Stent And Drainage Catheter Of Biliary Duct, Accessed Through The Skin With Imaging Including Radiological Supervision And   | \$4,279.44   |
| 47540   | Interpretation  | \$4,335.15   |
|   |   | ψ 1,000.10   |
| 47541   | Placement Of Access Device Into Biliary Tract, Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation   | \$1,155.24   |
|   |   |  |
| 47542   | Balloon Dilation Of Bile Duct Accessed Through The Skin Using Imaging Guidance Including Radiological Supervision And Interpretation  | \$497.31   |
| 47543   | Biopsy Of Bile Duct Or Liver Duct Accessed Through The Skin Using Imaging Guidance With Radiological Supervision And Interpretation   | \$387.42   |
| 17010   | Removal Of Biliary Duct Or Gallbladder Stone, Accessed Through The Skin Using Imaging Guidance And Radiological Supervision And   | ψοστ.12  |
| 47544   | Interpretation  | \$845.94   |
|   | Biliary Endoscopy, Intraoperative (Choledochoscopy) (List Separately In Addition To Code For Primary Procedure)   | \$160.00   |
|   | Diagnostic Examination Of Bile Ducts Using An Endoscope, Accessed Through The Skin  | \$247.83   |
|   | Biopsy Of Bile Ducts Using An Endoscope, Accessed Through The Skin  | \$248.72   |
|   | Removal Of Bile Duct Stones Using An Endoscope, Accessed Through The Skin  Dilation Of Bile Ducts Using An Endoscope, Accessed Through The Skin   | \$450.68   |
|   | Dilation Of Bile Ducts With Stent Insertion Using An Endoscope, Accessed Through The Skin   | \$295.87<br>\$335.16   |
|   | Laparoscopy, Surgical; Cholecystectomy  | \$656.08   |
|   | Laparoscopy, Surgical; Cholecystectomy With Cholangiography   | \$713.61   |
|   | Laparoscopy, Surgical; Cholecystectomy With Exploration Of Common Duct  | \$1,009.61   |
| 47570   | Laparoscopy, Surgical; Cholecystoenterostomy  | \$691.78   |
|   | Unlisted Laparoscopy Procedure, Biliary Tract   | Price By Report  |
|   | Cholecystectomy;  | \$1,059.15   |
|   | Cholecystectomy; With Cholangiography  Cholecystectomy; With Evployation Of Common Dust:  | \$1,150.57   |
|   | Cholecystectomy With Exploration Of Common Duct; Cholecystectomy With Exploration Of Common Duct; With Choledochoenterostomy  | \$1,009.61<br>\$1,257.24   |
|   | Removal Of Gallbladder And Incision Or Repair Of Gallbladder Sphincter  | \$1,237.24   |
|   | Exploration For Congenital Atresia Of Bile Ducts, Without Repair, With Or Without Liver Biopsy, With Or Without Cholangiography   | \$950.36   |
|   | Portoenterostomy (Eg, Kasai Procedure)  | \$1,544.41   |
| 47711   | Removal Of Growth From Bile Duct External To Liver  | \$1,594.26   |
|   | Removal Of Growth From Bile Duct Within Liver   | \$1,768.24   |
|   | Excision Of Choledochal Cyst  | \$1,108.99   |
|   | Cholecystoenterostomy; Direct   | \$1,033.50   |
|   | Cholecystoenterostomy; With Gastroenterostomy Cholecystoenterostomy; Roux-En-Y  | \$1,207.91<br>\$1,171.64   |
|   | Cholecystoenterostomy; Roux-En-Y With Gastroenterostomy   | \$1,171.04   |
|   | Connection of Bile Duct External To Liver To Small Intestine  | \$1,866.72   |
|   | Connection Of Bile Duct Within Liver To Small Intestine   | \$2,675.42   |
| 47780   | End-To-Side Connection Of Bile Duct External To Liver To Small Intestine  | \$1,600.96   |
|   | End-To-Side Connection Of Bile Duct Within Liver To Small Intestine   | \$2,848.02   |
|   | Reconstruction, Plastic, Of Extrahepatic Biliary Ducts With End-To-End Anastomosis  | \$1,379.62   |
|   | Placement Of Choledochal Stent  | \$998.55   |
|   | U-Tube Hepaticoenterostomy Suture Of Extrahepatic Biliary Duct For Pre-Existing Injury (Separate Procedure)   | \$1,358.56<br>\$1,214.99   |
|   | Unlisted Procedure, Biliary Tract   | Price By Report  |
|   | Insertion Of External Drains From Gallbladder, Bile Duct And Small Bowel For Acute Pancreatitis   | \$1,665.68   |
| 48001   | Insertion Of External Drains Around Pancreas For Acute Pancreatitis   | \$2,035.55   |
|   | Removal Of Pancreatic Calculus  | \$1,051.60   |
|   | Biopsy Of Pancreas, Open Procedure  | \$786.36   |
|   | Needle Biopsy Of Pancreas, Accessed Through The Skin  | \$464.11   |
|   | Debride/Resect Pancreas  Excision Of Lesion Of Pancreas (Eg, Cyst, Adenoma)   | \$2,523.13   |
|   | Pancreatectomy, Distal Subtotal, With Or Without Splenectomy; Without Pancreaticojejunostomy  | \$981.55<br>\$1,359.94   |
|   | Pancreatectomy, Distal Subtotal, With Or Without Splenectomy; With Pancreaticojejunostomy   | \$1,447.90   |
| .0.10   | y,,,,,  | ψ.,117.00  |
|   | Partial Removal Of Pancreas With Connection Of Pancreas To Small Bowel, With Preservation Of First Part Of Small Intestine (Duodenum)   | \$1,679.70   |
|   | Excision Of Ampulla Of Vater  | \$1,113.77   |
|   | Partial Removal Of Pancreas, Bile Duct And Small Bowel With Connection Of Pancreas To Small Bowel   | \$2,924.79   |
|   | Partial Removal Of Pancreas, Bile Duct And Small Bowel Without Connection Of Pancreas To Small Bowel  | \$2,558.17   |
|   | Near Total Removal Of Pancreas, Bile Duct And Small Bowel With Connection Of Pancreas To Small Bowel  Partial Removal Of Pancreas, Bile Duct, And Small Bowel   | \$2,924.79<br>\$2,569.32   |
|   | Pancreatectomy, Total;  | \$2,569.32   |
|   | Pancreatectomy, Total Or Subtotal, With Autologous Transplantation Of Pancreas Or Pancreatic Islet Cells  | Price By Report  |
|   | Injection Procedure For Intraoperative Pancreatography (List Separately In Addition To Code For Primary Procedure)  | \$93.32  |
|   | Marsupialization Of Pancreatic Cyst   | \$1,029.04   |
|   |   | \$982.47   |
| 48510   | Insertion Of Drain From Pancreatic Cyst Into Abdominal Cavity, Open Procedure   |  |
| 48510<br>48520  | Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct  | \$979.00   |
| 48510<br>48520<br>48540                                     | Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y   | \$979.00<br>\$1,160.04   |
| 48510<br>48520<br>48540<br>48545                            | Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y Pancreatorrhaphy For Injury   | \$979.00<br>\$1,160.04<br>\$1,196.50                             |
| 48510<br>48520<br>48540<br>48545<br>48547                   | Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y Pancreatorrhaphy For Injury Duodenal Exclusion With Gastrojejunostomy For Pancreatic Injury                                     | \$979.00<br>\$1,160.04<br>\$1,196.50<br>\$1,585.82               |
| 48510<br>48520<br>48540<br>48545<br>48547<br>48548          | Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y Pancreatorrhaphy For Injury   | \$979.00<br>\$1,160.04<br>\$1,196.50                             |
| 48510<br>48520<br>48540<br>48545<br>48547<br>48548<br>48550 | Creation Of Drainage Tract From Pancreatic Cyst To Small Bowel, Direct Internal Anastomosis Of Pancreatic Cyst To Gastrointestinal Tract; Roux-En-Y Pancreatorrhaphy For Injury Duodenal Exclusion With Gastrojejunostomy For Pancreatic Injury Pancreaticojejunostomy Side To Side | \$979.00<br>\$1,160.04<br>\$1,196.50<br>\$1,585.82<br>\$1,481.56 |

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|  | Description Communication Comm | Fee  |
|  | Preparation Of Donor Pancreas For Transplantation, Each Transplantation Of Pancreatic Allograft  | \$205.32   |
|  | Removal Of Transplanted Pancreatic Allograft   | \$2,334.93   |
|  | Unlisted Procedure, Pancreas   | \$1,149.53   |
|  | Exploratory Laparotomy, Exploratory Celiotomy (Separate Procedure)   | Price By Report<br>\$763.31  |
|  | Reopening Of Recent Laparotomy   |  |
|  | Exploration, Retroperitoneal Area (Separate Procedure)   | \$732.02   |
|  | Exploration, Retroperitorieal Area (Separate Procedure)  Exploration And Packing Of Wound In Pelvic Region   | \$774.72   |
|  | i i  | \$398.72   |
|  | Re-Exploration Of Wound In Pelvic Region With Removal Of Wound Packing And Repacking, If Necessary   | \$362.80   |
|  | Drainage Of Abdominal Abscess Or Infection, Open Procedure   | \$1,041.17   |
|  | Drainage Of Abscess Of Muscle Separating Chest And Abdomen (Diaphragm), Open Procedure   | \$898.04   |
|  | Drainage Of Abscess Behind Abdominal Cavity, Open Procedure  | \$718.52   |
|  | Drainage Of Accumulated Abdominal Lymph Fluid, Open Procedure  | \$685.51   |
|  | Abdominal Paracentesis (Diagnostic Or Therapeutic); Without Imaging Guidance   | \$223.84   |
|  | Abdominal Paracentesis (Diagnostic Or Therapeutic); With Imaging Guidance  | \$321.43   |
| 49084  | Peritoneal Lavage, Including Imaging Guidance, When Performed  | \$94.36  |
| 49180  | Needle Biopsy Of Abdominal Cavity Growth, Accessed Through The Skin  | \$143.28   |
|  | Injection Of Abnormal Fluid Accumulation Using Imaging Guidance With Radiological Supervision And Interpretation   | \$1,289.47   |
|  | Removal Or Destruction Of (5 Centimeters Or Less) Abdominal Cavity Growths, Cysts, Or Abnormal Tissue, Open Procedure  | \$1,240.03   |
| 49203  | Internoval of Destruction of (3 Centimeters of Less) Abdomina Cavity Growns, Cysts, of Abriofina Hissae, Open Frocedure  | \$1,240.03   |
| 40004  | Description Of Joseph et ion Of J. T. a. 4.0.0. Continue to an Abdominal Continue Co | £4.050.70  |
|  | Removal Or Destruction Of (5.1 To 10.0 Centimeters) Abdominal Cavity Growths, Cysts, Or Abnormal Tissue, Open Abdominal Procedure  | \$1,356.72   |
|  | Removal Or Destruction Of (Greater Than 10.0 Centimeters) Abdominal Cavity Growths, Cysts, Or Abnormal Tissue, Open Procedure  | \$1,553.24   |
|  | Excision Of Presacral Or Sacrococcygeal Tumor  | \$1,793.82   |
|  | Umbilectomy, Omphalectomy, Excision Of Umbilicus (Separate Procedure)  | \$534.43   |
| 49255  | Omentectomy, Epiploectomy, Resection Of Omentum (Separate Procedure)   | \$670.53   |
| 1  | Laparoscopy, Abdomen, Peritoneum, And Omentum, Diagnostic, With Or Without Collection Of Specimen(S) By Brushing Or Washing  |  |
|  | (Separate Procedure)   | \$327.74   |
| 49321  | Laparoscopy, Surgical; With Biopsy (Single Or Multiple)  | \$344.34   |
|  |  |  |
| 49322  | Laparoscopy, Surgical, Abdomen, Peritoneum, And Omentum; With Aspiration Of Cavity Or Cyst (Eg, Ovarian Cyst) (Single Or Multiple)   | \$373.74   |
| 49323  | Laparoscopy, Surgical, Abdomen, Peritoneum, And Omentum; With Drainage Of Lymphocele To Peritoneal Cavity  | \$569.38   |
| 49324  | Laparoscopy, Surgical; With Insertion Of Tunneled Intraperitoneal Catheter   | \$394.57   |
|  | Lapaorscopy Surgical; With Revision Of Previously Placed Intraperitoneal Connula Or Catheter, With Removal Of Intraluminal Material  | •  |
| 49325  | Performed  | \$368.12   |
|  | Laparoscopy, Surgical; With (Omental Tacking Procedure)(List Separately In Addition To Code For Primary Procedure)   | \$182.73   |
| 73320  |  | ψ102.73  |
|  | Laparoscopy, Surgical, With Placement Of Interstitial Device(S) For Radiation Therapy Guidance (Eg, Fiducial Markers, Dosimeter), Intra-   | <b></b>  |
|  | Abdominal, Intrapelvic, And/Or Retroperitoneum, Including Imaging Guidance, If Performed, Single Or Multiple (List Sep   | \$113.75   |
|  | Unlisted Laparoscopy Procedure, Abdomen, Peritoneum And Omentum  | Price By Report  |
|  | Injection Of Air Or Contrast Into Peritoneal Cavity (Separate Procedure)   | \$144.20   |
| 49402  | Removal Of Perit. Body From Cavity   | \$760.63   |
| 49405  | Fluid Collection Drainage By Catheter Using Imaging Guidance, Accessed Through The Skin  | \$987.68   |
| 49406  | Fluid Collection Drainage Of The Abdominal Region By Catheter Using Imaging Guidance, Accessed Through The Skin  | \$758.84   |
| 49407  | Fluid Collection Drainage By Catheter Using Imaging Guidance, Accessed Through Vagina Or Rectum  | \$638.35   |
| 49411  | Insertion Of Devices In Abdominal Cavity For Radiation Therapy Guidance, Accessed Through The Skin   | \$470.19   |
| 49412  | Insertion Of Devices For Radiation Therapy Guidance In Abdominal Cavity, Open Procedure  | \$71.79  |
|  | Insertion Of Tunneled Intraperitoneal Catheter (Eg, Dialysis, Intraperitoneal Chemotherapy Instillation, Management Of Ascites), Complete  | ·  |
| 49418  | Procedure, Including Imaging Guidance, Catheter Placement, Contrast Injection When Performed, And Radiological   | \$1,099.50   |
|  | Insertion Of Tunneled Intraperitoneal Catheter, With Subcutaneous Port (le, Totally Implantable)   | \$382.92   |
|  | Insertion Of Abdominal Cavity Catheter For Drainage Or Dialysis, Open Procedure  | \$198.62   |
| _  | Removal Of Tunneled Intraperitoneal Catheter   | \$216.43   |
|  | Exchange Of Previously Placed Abscess Or Cyst Drainage Catheter Under Radiological Guidance (Separate Procedure)   | \$577.14   |
|  |  |  |
|  | Contrast Injection For Assessment Of Abscess Or Cyst Via Previously Placed Drainage Catheter Or Tube (Separate Procedure)  | \$190.41   |
|  | Insertion Of Peritoneal-Venous Shunt   | \$654.00   |
|  | Revision Of Peritoneal-Venous Shunt  | \$600.51   |
|  | Injection Procedure (Eg, Contrast Media) For Evaluation Of Previously Placed Peritoneal-Venous Shunt   | \$35.03  |
|  | Ligation Of Peritoneal-Venous Shunt  | \$384.15   |
|  | Removal Of Peritoneal-Venous Shunt   | \$407.33   |
| 49435  | Insertion Of Abdominal Cavity Catheter Extension, Beneath The Skin   | \$103.49   |
|  |  | A  |
|  | Creation Of Exit Site For Catheter In Abdominal Cavity   | \$487.38   |
|  |  | \$487.38<br>\$926.42   |
| 49440  | Creation Of Exit Site For Catheter In Abdominal Cavity   |  |
| 49440<br>49441   | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  | \$926.42   |
| 49440<br>49441   | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast   | \$926.42<br>\$1,044.59   |
| 49440<br>49441<br>49442  | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast   | \$926.42<br>\$1,044.59   |
| 49440<br>49441<br>49442<br>49446   | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  | \$926.42<br>\$1,044.59<br>\$885.80   |
| 49440<br>49441<br>49442<br>49446<br>49450  | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast   | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83   |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451                                     | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast   | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47   |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49452                            | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95                                     |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49452<br>49460                   | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast   | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95                                     |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49452<br>49460                   | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast   | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95                                     |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49452<br>49460<br>49465          | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-  | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95<br>\$677.87<br>\$147.80             |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49452<br>49460<br>49465          | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Reducible   | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95                                     |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49452<br>49460<br>49465          | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance  Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin  Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-  Conceptual Age, With Or Without Hydrocelectomy; Reducible  Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-  | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95<br>\$677.87<br>\$147.80             |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49452<br>49460<br>49465          | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance  Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin  Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Reducible  Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Incarcerated Or Strangulated  | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95<br>\$677.87<br>\$147.80             |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49452<br>49460<br>49465<br>49491 | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Reducible Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Incarcerated Or Strangulated Repair, Initial Inguinal Hernia, Full Term Infant Under Age 6 Months, Or Preterm Infant Over 50 Weeks Postconceptual Age And Under Age 6  | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95<br>\$677.87<br>\$147.80<br>\$757.88 |
| 49440<br>49441<br>49442<br>49446<br>49450<br>49451<br>49460<br>49465<br>49491<br>49492 | Creation Of Exit Site For Catheter In Abdominal Cavity Insertion Of Stomach Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast Insertion Of Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Conversion Of Stomach Tube To Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach Or Large Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Replacement Of Stomach-To-Small Bowel Tube, Accessed Through Skin Using Fluoroscopic Guidance With Contrast  Mechanical Removal Of Obstructive Material From Stomach, Large, Or Small Bowel Tube Using Fluoroscopic Guidance  Contrast Injections For X-Ray Imaging Through Existing Tube In Stomach, Small Bowel Or Large Bowel, Accessed Through Skin  Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Reducible  Repair, Initial Inguinal Hernia, Preterm Infant (Less Than 37 Weeks Gestation At Birth), Performed From Birth Up To 50 Weeks Post-Conceptual Age, With Or Without Hydrocelectomy; Incarcerated Or Strangulated  | \$926.42<br>\$1,044.59<br>\$885.80<br>\$891.95<br>\$670.83<br>\$731.47<br>\$917.95<br>\$677.87<br>\$147.80             |

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| 98505 Repear Initial Engiand Termins. Age 5 Years O. Over, Recouncied Of Strangshated 9854 Repear Initial Engiand Termins. Age 5 Years O. Over, Incommend Of Strangshated 9854 Repear Of Green (Inguiside Hermins Type 1 No. 18 Trapped 9855 Repear Of Green (Inguiside Hermins Type 1 No. 18 Trapped 9856 Repear Of Streen (Inguiside Hermins Type 1 No. 18 Trapped 9856 Repear Lambar Hermins 9855 Repear Lambar Lambar Lambar Lambar Schmins 9855 Repear Lambar L   |   | '   | \$417.51   |
| 98007 Repair Initial Insignated Hernis, Age S Years Of Orear, Incanomisted O Strangulated 9802 Repair Of Trapped O' Strangulated Grow Hernis Insignated 9802 Repair Of Trapped O' Strangulated Grow Hernis Insignated 9802 Repair Of Trapped O' Strangulated Grow Hernis Insignated 9803 Repair User Hernis, Stiffice, Any Arg. 9803 Repair User Hernis, Stiffice, Any Arg. 9804 Repair User Hernis, Stiffice, Any Arg. 9805 Repositioning Of Healt Femoral Grow Hernis, Trapped 9805 Repositioning Of Healt Femoral Grow Hernis, Trapped 9805 Repositioning Of Healt Femoral Grow Hernis, Not Trapped 9805 Repositioning Of Healt Femoral Grow Hernis, Not Trapped 9805 Repositioning Of Healt Femoral Grow Hernis, Trapped 9805 Repositioning Of Secureties Femoral Repositioning Of Secu   |   |   | \$538.85   |
| 98020 Repair Of Cristro (Regulands) Hermis That is No.*Trappeed 98020 Repair luginant Hermis, Sisting, Any Age 98021 Repair luginant Hermis, Sisting, Any Age 98022 Repair luginant Hermis, Sisting, Any Age 98022 Repair luginant Hermis, Sisting, Any Age 98023 Repair luginant Permis and China Hermis, Nat Trappeed 98024 Repair luginant and China Hermis, Trappeed 98024 Repair luginant and China Hermis, Trappeed 98026 Repair luginant and China Hermis, Nat Trappeed 98026 Repair luginant and China Hermis, Nat Trappeed 98027 Repair luginant lugina   | 49505   | Repair Initial Inguinal Hernia, Age 5 Years Or Over; Reducible  | \$522.05   |
| 48627 Repair Carting Herma, Satiling, Any Age  \$500  \$ |   | i i   | \$540.78   |
| 9825E Repair Impaired Hennia Sidney, Any Age  \$5156 Repositioning Of Intel & Femoral Gene Hennia, Not Trapped  \$516 Repositioning Of Intel & Femoral Gene Hennia, Not Trapped  \$516 Repositioning Of Health & Femoral Gene Hennia, Not Trapped  \$516 Repositioning Of Recurrent Femoral Gene Hennia, Not Trapped  \$516 Repair Of Recurrent Femoral Gene Hennia, Trapped  \$517 Repair Of Recurrent Femoral Gene Hennia, Trapped  \$517 Repair Of Recurrent Femoral Gene Hennia, Trapped  \$518 Repair Of Sidney Hennia Of Adorson, Note Than 3 Clim Length  \$528 Repair India Repair Of Sidney Hennia Of Adorson, Lass Than 3 Clim Length  \$529 Repair India Repair Of Sidney Hennia Of Adorson, Note Than 10 Clim Length  \$520 Repair Of Recurrent Femoral Gene Hennia, Trapped  \$520 Repair Of Recurrent Femoral Gene Hennia, Trapped  \$521 Repair Of Repair Repair Of Sidney Hennia Of Adorson, Note Than 10 Clim Length  \$522 Repair Of Repair Of Repair Repair Of Adorson, Note Than 10 Clim Length  \$523 Repair Of Repair Of Repair Of Adorson, Note Than 10 Clim Length  \$524 Repair Of Repair Of Repair Accountains Of Adorson, Note Than 10 Clim Length  \$524 Repair Of Repair Of Repair Accountains Of Adorson, Note Than 10 Clim Length  \$525 Repair Of Repair Of Repair Accountains Of Adorson, Note Than 10 Clim Length  \$526 Repair Of Repair Of Repair Accountains Of Adorson, Note Than 10 Clim Length  \$527 Repair Of Repair Of Repair Accountains Of Adorson, Note Than 10 Clim Length  \$527 Repair Of Repair Of Repair Accountains Of Adorson, Note Than 10 Clim Length  \$528 Repair Of Repair Of Repair Accountains Of Adorson, Note Than 10 Clim Length  \$529 Repair Of Repair Of Repair Repair Of Repair Repair Of Repair Repair Of Repair Of Repair Of Repair Of Repair Repair Repair Of Repair Re  |   |   | \$551.50   |
| 49850 Repositioning Of Initial Femoral Groin Hermia, Net Trapped 49850 Repositioning Of Initial Femoral Groin Hermia, Net Trapped 49850 Repositioning Of Initial Femoral Groin Hermia, Net Trapped 49850 Repositioning Of Initial Femoral Groin Hermia, Net Trapped 49850 Repositioning Of Initial Femoral Groin Hermia, Net Trapped 49851 Repositioning Of Resourcer Femoral Groin Hermia, Net Trapped 49851 Repositioning Of Resourcer Femoral Groin Hermia, Net Trapped 49852 Repositioning Of Repositioning Of Reposition Hermia, Net Trapped 49852 Initial Reposit Of Siding Hermia Of Adodomen, Lists Than 3 Cm In Length 49852 Initial Reposit Of Entrapped Hermin Of Adodomen, 1910 Cm In Length 49852 Initial Reposit Of Entrapped Hermin Of Adodomen, 1910 Cm In Length 49852 Initial Reposit Of Entrapped Hermin Of Adodomen, 1910 Cm In Length 49852 Reposit Of Reposition Hermin Memoral Reposi   |   | 1 11 5 15 1   | \$601.02   |
| 49505 Repositioning Of Infailat Fernant Gron Hernin, Not Trapped 49505 Repositioning Of Reportment Fernant Gron Hernin, Not Trapped 49505 Repositioning Of Reportment Fernant Gron Hernin, Not Trapped 49505 Repositioning Of Reportment Fernant Gron Hernin, Not Trapped 49506 Repositioning Of Reportment Fernant Gron Hernin, Not Trapped 49506 Repositioning Of Reportment Fernant Gron Hernin, Not Trapped 49506 Repositioning Of Reportment Fernant Gron Hernin, Not Trapped 49506 Repositioning Of Reportment Fernant Gron Hernin, Not Trapped 49506 Repositioning Of Reportment Fernant Gron Hernin, Not Trapped 49506 Reposition Fernant Gron Hernin, Not Trapped 49506 Reposition Fernant Fernant Gron Hernin, Not Trapped 49506 Reposition Fernant Gron Hernin, Not Tran 10 Crin In Length 49506 Reposition Reposition Fernant Gron Hernin, Not Tran 10 Crin In Length 49506 Reposition Reposition Fernant Gron Hernin, Not Tran 10 Crin In Length 49506 Reposition Reposition Fernant Gron Hernin, Not Tran 10 Crin In Length 49506 Reposition Reposition Fernant Gron Hernin, Not Tran 10 Crin In Length 49507 Reposition Repositio   |   |   | \$514.86   |
| 49855 Repositioning Of Infalle Femoral Groin Herma, Trapped         \$55.           49857 Repositioning Of Recurrent Femoral Groin Herma, Not Trapped         \$44.           49857 Repositioning Of Recurrent Femoral Groin Herman, Not Trapped         \$45.           49857 Repositioning Of Recurrent Femoral Groin Herman, Trapped         \$45.           49858 Paper State Femoral Control Femoral Contr  |   | ·   | \$517.47   |
| 49655 Repositioning Of Recurrent Fernoncel Groin Hermin, Not Trapped 49657 Repositioning Of Recurrent Fernoncel Groin Hermin, Trapped 49657 Repositioning Of Recurrent Fernoncel Groin Hermin, Trapped 49657 Repositioning Of Recurrent Fernoncel Groin Hermin, Trapped 49658 India Repair Of Skiding Hermin Of Abdomen, Jan 19 Cm In Length 49658 India Repair Of Entrapped Hermin Of Abdomen, Jan 19 Cm In Length 49658 India Repair Of Skiding Hermin Of Abdomen, Jan 19 Cm In Length 49658 India Repair Of Skiding Hermin Of Abdomen, Jan 19 Cm In Length 49658 India Repair Of Skiding Hermin Of Abdomen, Jan 19 Cm In Length 49658 India Repair Of Skiding Hermin Of Abdomen, Jan 19 Cm In Length 49658 India Repair Of Skiding Hermin Of Abdomen, Jan 19 Cm In Length 49658 Repair Of Flate Accumulation Of Abdomen, Jan 19 Cm In Length 49658 Repair Of Flate Accumulation Of Abdomen Mark Deleted At Nevel, More Of Mark Deleted At Nevel, September 19 Cm In Length 49658 Repair Of Flate Accumulation Of Abdomen Nation Benefit At Nevel, September 19 Cm In Length 49658 Repair Of Flate Accumulation Of Abdomen Nation Benefit At Nevel, September 19 Cm In Length 49659 Repair Of Flate Accumulation Of Abdomen Nation Benefit At Nevel, September 19 Cm In Length 49650 Repair Of Flate Accumulation Of Abdomen Nation Benefit At Nevel, September 19 Cm In Length 49650 Repair Of Flate Accumulation Of Abdomen Nation Benefit At Nevel, September 19 Cm In Length 49650 Repair Of Repair Of Repair Of Repair Of Repair Abdomen Nation Benefit At Nevel, September 19 Cm In Length 49650 Repair Of R   |   | 1 0 11  | \$567.40   |
| 94695 Repositioning Off Recurrent Fermonia Groin Hermin, Trapped 9496 Intalia Repair Of Sicing Hermin Of Abdoment, Leas Than 3 Clim Length 9326 Pairis Repair Of Entrapped Hermin Of Abdoment, Leas Than 3 Clim Length 9326 Pairis Repair Of Sicing Hermin Off Abdoment, Leas Than 3 Clim Length 9327 94495 Intalia Repair Of Sicing Hermin Off Abdoment, Pairis Clim Length 9436 Pairis Repair Of Sicing Hermin Off Abdoment, Pairis Clim Length 9436 Pairis Repair Of Sicing Hermin Off Abdoment, Pairis Clim Length 9436 Pairis Repair Of Sicing Hermin Off Abdoment, Pairis Clim Length 9400 Repair Of Simil Companies of Abdoment, Pairis Clim Length 9400 Repair Of Simil Companies of Abdoment, Pairis Clim Length 9400 Repair Of Simil Companies of Abdoment, Pairis Clim Length 9400 Repair Of Simil Companies of Abdoment Wall Defect At Navel, Pill Significant Pairis   |   |   | \$542.29   |
| 49822 minial Repair Of String Person Of Abdornen, 14905 min Length 49804 finial Repair Of String Person Of Abdornen, 3-10 Cm in Length 49804 finial Repair Of String Person Of Abdornen, 3-10 Cm in Length 49804 finial Repair Of String Person Of Abdornen, 14905 min 10 Cm in Length 5931 49805 finial Repair Of String Person Of Abdornen, More Than 10 Cm in Length 5931 49805 finial Repair Of String Person Of Abdornen, More Than 10 Cm in Length 5931 49805 finial Repair Of String Person Of Abdornen, More Than 10 Cm in Length 5931 49805 finial Repair Of String Person Of Abdornen, More Than 10 Cm in Length 5931 49805 finial Repair Of Pair Accumulation Of Abdornen, More Than 10 Cm in Length 5931 5932 5933 5934 5935 finial Repair Abdornen March Person Of Abdornen, More Than 10 Cm in Length 5931 5934 5935 finial Repair Of Pair Accumulation Of Abdornen March 10 Cm in Length 5932 5934 5935 finial Repair Abdornen March 10 Cm in Length 5932 5934 5935 finial Repair Of Pair Accumulation Of Abdornen March 10 Cm in Length 5934 5935 finial Repair Of Repair Of Pair Accumulation Of Abdornen March 10 Cm in Length 5934 5935 finial Repair Of Repair Of Pair Accumulation Of Abdornen March 10 Cm in Length 5934 5936 finial Repair Of Repai   |   | 1 0 11  | \$647.28   |
| 49839 intial Repair Of Elitring Hernia Of Abdomen, 3-10 Cm in Length 4994 intial Repair Of Elitringhe Hernia Of Abdomen, More Than 10 Cm in Length 4995 intial Repair Of Elitringhe Hernia Of Abdomen, More Than 10 Cm in Length 5914 49600 Repair Of Entrapped Hernia Of Abdomen, More Than 10 Cm in Length 5924 49600 Repair Of Small Omphalosole, With Frimany Closure 5926 Repair Of Part Accumulation Or Abdoment Wall Debect Al Nevel, in Cyberator, Novo 5926 Repair Of Part Accumulation Or Abdoment Wall Debect Al Nevel, in Cyberator, Novo 5926 Repair Of Recurrent Statistics of Part Accumulation or Abdoment Wall Debect Al Nevel, in Cyberator, Novo 5926 Repair Of Recurrent Statistics of Part Accumulation or Abdoment Wall Debect Al Nevel, in Cyberator, Novo 5926 Repair Of Recurrent Statistics of Part Accumulation of Part Abdoment Wall Debect Al Nevel, in Cyberator, Novo 5926 Repair Of Recurrent Statistics of Part Abdoment, Least Than 3 Cm in Length 5927 Repair Of Recurrent Statistics of Part Abdoment, Least Than 3 Cm in Length 5927 Repair Of Recurrent Statistics of Part Abdoment, Least Than 3 Cm in Length 5927 Repair Of Recurrent Statistics of Part Abdoment, More Than 10 Cm in Length 5928 Repair Of Recurrent Statistics of Part Abdoment, More Than 10 Cm in Length 5929 Repair Of Recurrent Statistics of Part Abdoment, More Than 10 Cm in Length 5939 Repair Of Recurrent Statistics of Part Abdoment, More Than 10 Cm in Length 5930 Repair Of Recurrent Statistics of Part Abdoment, More Than 10 Cm in Length 5930 Repair Of Recurrent Statistics of Part Abdoment, More Than 10 Cm in Length 5930 Repair Of Recurrent Statistics of Part Abdoment Repair Repair Install Inquiried Hernia 5931 Repair Of Recurrent Statistics of Part Abdoment Repair Repair Repair Install Inquiried Hernia 5931 Repair Of Statistics Repair Repai   | 49591   | Initial Repair Of Sliding Hernia Of Abdomen, Less Than 3 Cm In Length   | \$282.96   |
| 48984 Initial Repoir Of Siming Herron Of Abdomen, Area Than 10 Cm in Length 48986 Initial Repoir Of Siming Herron Of Abdomen, More Than 10 Cm in Length 48946 Initial Repoir Of Siming Herron Of Abdomen, More Than 10 Cm in Length 48946 Repoir Of Siming Herron Of Abdomen, More Than 10 Cm in Length 48946 Repoir Of Fland Accommission Or Abdomen, More Than 10 Cm in Length 48946 Repoir Of Fland Accommission Or Abdomen Wall Delect Al Navel, With Or Without Prosthesis 48046 Repoir Of Fland Accommission Or Abdomen Wall Delect Al Navel, With Or Without Prosthesis 48046 Repoir Of Fland Accommission Or Abdomen Wall Delect Al Navel, With Or Without Prosthesis 48046 Repoir Of Fland Accommission Or Abdomen Wall Delect Al Navel, With Or Without Prosthesis 48047 Repoir Of Fland Accommission Or Abdomen, Wall Delect Al Navel, With Or Without Prosthesis 48047 Repoir Of Recurrent Entrapped Hernia Or Abdomen, Less Than 3 Cm in Length 48041 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48047 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48047 Repair Of Recurrent Entrapped Hernia Or Abdomen, 3-10 Cm in Length 48048 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48048 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48048 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48048 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48049 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48049 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48040 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48040 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48041 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48041 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48042 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48042 Repair Of Recurrent Entrapped Hernia Or Abdomen, 1-10 Cm in Length 48042 Repair Of Recurrent  |   |   | \$392.43   |
| 49859 finial Rapear Of Silding Harma Of Abdomen, More Than 10 Cm in Length 49000 Repair Of Francis Omphalocies, With Primary Closure 49000 Repair Of Small Omphalocies, With Primary Closure 49000 Repair Of Small Omphalocies, With Primary Closure 49000 Repair Of Small Omphalocies, With Primary Closure 49000 Repair Of Flad Accumulation Of Abdomen Multi Defect At Navel, in Operating Room 49000 Repair Of Plad Accumulation Of Abdomen Will Defect At Navel, in Operating Room 49000 Repair Of Plad Accumulation Of Abdomen Will Defect At Navel, in Operating Room 49000 Repair Of Plad Accumulation Of Abdomen Will Defect At Navel, in Operating Room 49000 Repair Of Plad Accumulation Of Abdomen Will Defect At Navel, in Operating Room 49000 Repair Of Repair Of Repair Accumulation Of Abdomen Will Defect At Navel, in Operating Room 49000 Repair Of Repair Of Repair Accumulation Of Room Room Room Room Room Room Room Roo  |   | 1 0   | \$473.11   |
| 49906 (Rapiar CF Residency Procedure). With Primary Coxona.  49006 (Rapiar CF Pluid Accumulation Or Abdomenal Wall Defect Al Navel, Navel, Orwithout Prostheesis.  5804 (19906). Repair CF Pluid Accumulation Or Abdomenal Wall Defect Al Navel, Hoperating Room.  5806 (1990). Repair CF Pluid Accumulation Or Abdomenal Wall Defect Al Navel, Hoperating Room.  581,008 (1990). Repair CF Pluid Accumulation Or Abdomenal Wall Defect Al Navel, First Stage.  582 (1990). Repair CF Pluid Accumulation Or Abdomenal Wall Defect Al Navel, First Stage.  582 (1990). Repair CF Pluid Accumulation Or Abdomenal Wall Defect Al Navel, First Stage.  583 (1990). Repair CF Recurrent States and Plant Or Abdomenal Wall Defect Al Navel, First Stage.  584 (1991). Repair CF Recurrent States and Plant Or Abdomenal Wall Defect Al Navel, First Stage.  585 (1994). Repair CF Recurrent States and Plant Or Abdomenal Wall Defect Al Navel, First Stage.  586 (1994). Repair CF Recurrent States and Plant Or Abdomenal Wall Defect Al Navel, First Stage.  587 (1994). Repair CF Recurrent States and Plant Or Abdomenal Wall Defect Al Navel, Stage All Wall Wall Wall Wall Wall Wall Wall   |   |   | \$614.77   |
| 96905 Repart Of Fulls Accumulation Or Abdominal Wall Defect A Navel, With O' Without Prostheeis 9504096 Repart Of Fluid Accumulation Or Abdominal Wall Defect A Navel, With O' Without Prostheeis 9504096 Repart Of Fluid Accumulation Or Abdominal Wall Defect A Navel, In Operating Room 951096 Repart Of Fluid Accumulation Or Abdominal Wall Defect A Navel, Second Stage 9524096 Repart Of Fluid Accumulation Or Abdominal Wall Defect A Navel, Second Stage 9534096 Repart Of Router Abdominal Wall Defect A Navel, Second Stage 9534096 Repart Of Routerest Stage Harma Of Abdomen, Less Than 3 Cm In Length 9534 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9534 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9535 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9536 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9537 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9537 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9537 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9537 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9538 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9538 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9539 Repart Of Routerest Stage Harma Of Abdomen, 2-10 Cm In Length 9539 Repart Of Stage Harma Of Abdomen, 2-10 Cm In Length 9539 Repart Of Stage Harma Of Routerest Stage Harma Of R   |   |   | \$635.96   |
| 19905 Repair Of Fluid Accumulation Or Abdominal Wall Defect A Navel, Nin Or Without Prosthesis   \$5,000   19905 Repair Of Fluid Accumulation Or Abdominal Wall Defect A Navel, First Stage   \$621   19905 Repair Of Fluid Accumulation Or Abdominal Wall Defect A Navel, First Stage   \$621   19905 Repair Of Ruid Accumulation Or Abdominal Wall Defect A Navel, First Stage   \$624   19911 Repair Of Recurrent Stiding Hernia Of Abdomen, Less Than 3 Cm In Length   \$344   19913 Repair Of Recurrent Stiding Hernia Of Abdomen, Less Than 3 Cm In Length   \$474   19914 Repair Of Recurrent Stiding Hernia Of Abdomen, 3-10 Cm In Length   \$474   19915 Repair Of Recurrent Stiding Hernia Of Abdomen, 3-10 Cm In Length   \$522   19916 Repair Of Recurrent Stiding Hernia Of Abdomen, 3-10 Cm In Length   \$522   19917 Repair Of Recurrent Stiding Hernia Of Abdomen, 3-10 Cm In Length   \$522   19917 Repair Of Recurrent Stiding Hernia Of Abdomen, 3-10 Cm In Length   \$522   19918 Repair Of Recurrent Stiding Hernia Of Abdomen, 3-10 Cm In Length   \$522   19918 Repair Of Recurrent Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19918 Repair Of Recurrent Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19928 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19929 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of Abdomen, More Than 10 Cm In Length   \$1,000   19920 Repair Of Stiding Hernia Of A   |   | · · · ·   | \$658.41   |
| Separar OF Fulia Accumulation Or Abdominal Wall Defect At Navel, in Operating Noom   \$1.098   |   |   | \$5,005.58   |
| 198101   Repair Of Fluid Accumulation Or Abdominal Wall Defect At Navel, First Stage   Se24   19811   Repair Of Fluid Accumulation Or Abdominal Wall Defect At Navel, First Stage   Se34   19813   Repair Of Recurrent Skinig Hemia Of Abdomina, Leas Than 3 Cm In Length   Se44   19813   Repair Of Recurrent Skinig Hemia Of Abdomina, Leas Than 3 Cm In Length   Se44   19815   Repair Of Recurrent Skinig Hemia Of Abdomina, 3-10 Cm In Length   Se22   19816   Repair Of Recurrent Skinig Hemia Of Abdomina, 3-10 Cm In Length   Se22   19817   Repair Of Recurrent Skinig Hemia Of Abdomina, 3-10 Cm In Length   Se22   19818   Repair Of Recurrent Skinig Hemia Of Abdomina, More Than 10 Cm In Length   Se22   19818   Repair Of Recurrent Skinig Hemia Of Abdomina, More Than 10 Cm In Length   Se22   19821   Repair Of Stecurrent Entrapped Hemia Repair   Se22   19822   Repair Of Entrapped Hemia Naxt To Stoma   Se11   19823   Removal Of Meel At Same Time As Hemia Repair   Se16   19823   Removal Of Meel At Same Time As Hemia Repair   Se16   19823   Removal Of Meel At Same Time As Hemia Repair   Se16   19823   Removal Of Meel At Same Time As Hemia Repair   Se16   19823   Removal Of Meel At Same Time As Hemia Repair   Se16   19823   Removal Of Meel At Same Time As Hemia Repair   Se16   19824   Removal Of Meel At Same Time As Hemia Repair   Se16   19825   Removal Of Meel At Same Time As Hemia Repair   Se16   19825   Removal Of Meel At Same Time As Hemia Repair   Se16   19825   Removal Of Meel At Same Time As Hemia Repair   Se16   19826   Removal Of Meel At Same Time As Hemia Repair   Se16   19826   Removal Of Meel At Same Time As Hemia Repair   Se16   19826   Removal Of Meel At Same Time As Hemia Repair   Se16   19826   Removal Of Meel At Same Time As Hemia Repair   Se16   19826   Removal Of Meel At Same Time As Hemia Repair   Se16   19827   Removal Of Meel At Same Time As Hemia Repair   Se16   19828   Removal Of Meel At Se16   |   |   | \$1,099.67   |
| 1991   Rapair Of Flux Accumulation Or Abdominal Wall Defect At Navel, Second Stage   5549  |   |   | \$621.60   |
| 19813 Repair Of Recurrent Siding Hernia Of Adoromen, Less Than 3 Cm In Length   \$947   Repair Of Recurrent Siding Hernia Of Adoromen, Less Than 3 Cm In Length   \$947   \$9515 Repair Of Recurrent Siding Hernia Of Adoromen, 3-10 Cm In Length   \$922   \$9516 Repair Of Recurrent Siding Hernia Of Adoromen, 3-10 Cm In Length   \$773   \$9517 Repair Of Recurrent Siding Hernia Of Adoromen, More Than 10 Cm In Length   \$733   \$9517 Repair Of Recurrent Siding Hernia Of Adoromen, More Than 10 Cm In Length   \$733   \$9518 Repair Of Siding Hernia Next To Stoma   \$9518 Repair Next To Stoma   \$9  |   | · •   | \$549.48   |
| 19815   Repair O' Recurrent Siding Hernia O' Abdomen, 3-10 Cm In Length   \$707   19816   Repair O' Recurrent Siding Hernia O' Abdomen, More Than 10 Cm In Length   \$707   19817   Repair O' Recurrent Siding Hernia O' Abdomen, More Than 10 Cm In Length   \$734   19821   Repair O' Recurrent Siding Hernia O' Abdomen, More Than 10 Cm In Length   \$1,022   19822   Repair O' Silking Hernia Next To Stoma   \$811   19822   Repair O' Silking Hernia Next To Stoma   \$812   19822   Repair O' Silking Hernia Next To Stoma   \$812   19822   Repair O' Silking Hernia Next To Stoma   \$164   19822   Repair O' Silking Hernia Next To Stoma   \$164   19822   Repair O' Silking Hernia Next To Stoma   \$164   19822   Repair O' Silking Hernia Next To Stoma   \$164   19822   Repair O' Silking Hernia Next To Stoma   \$164   19822   Repair O' Silking Hernia Next To Stoma   \$164   19822   Repair O' Silking Hernia Next To Stoma   \$164   19823   Removal O' Mesh A' Same Time A's Hernia Repair   \$164   19855   Laparoscopy, Surgiat, Repair Recurrent Inguinal Hernia   \$154   19855   Julisted Liparoscopy Procedure, Hernipolasty, Hernipolmy   \$1,232   19890   Central Figa, Letter-Abdominal (E.g. For Reconstruction O' Steman And Chest Wall Defects)   \$1,384   19890   Central Figa, Letter-Abdominal (E.g. For Reconstruction O' Steman And Chest Wall Defects)   \$1,384   19890   Fore Omerat Figa, Inter-Abdominal (E.g. For Reconstruction O' Steman And Chest Wall Defects)   \$1,394   19890   Mental Figa, Inter-Abdominal (E.g. For Reconstruction O' Steman And Chest Wall Defects)   \$1,304   19890   Mental Figa, Inter-Abdominal (E.g. For Reconstruction O' Steman And Chest Wall Defects)   \$1,304   19890   Mental Figa, Inter-Abdominal (E.g. For Reconstruction O' Steman And Chest Wall Defects)   \$1,304   19890   Mental Figa, Inter-Abdominal (E.g. For Reconstruction To Chest Primary Procedure)   \$1,304   19890   Mental Figa, Inter-Abdominal (E.g. For Reconstruction To Chest Primary Procedure)   \$1,304   19890   Mental Figa, Inter-Abdominal (E.g. For Reconstruction To Ches  | 49613   | Repair Of Recurrent Sliding Hernia Of Abdomen, Less Than 3 Cm In Length   | \$349.03   |
| 49616 Repair Of Recurrent Entrapped Hemia Of Abdomen. 3-10 Cm In Length  \$770 49617 Repair Of Recurrent Entrapped Hemia Of Abdomen, More Than 10 Cm In Length  \$811 49618 Repair Of Recurrent Entrapped Hemia Of Abdomen, More Than 10 Cm In Length  \$812 49611 Repair Of Recurrent Entrapped Hemia Of Abdomen, More Than 10 Cm In Length  \$812 49612 Repair Of Entrapped Hemia Noxt To Stoma  \$812 49622 Removal Of Mesh Af Same Time As Hemia Repair  \$166 49622 Removal Of Mesh Af Same Time As Hemia Repair  \$166 49620 Repair Of Entrapped Hemia Noxt To Stoma  \$49630 Services Appair Of Mesh Af Same Time As Hemia Repair  \$166 49650 Laparoscopy, Surgical Repair Initial Inquirial Hemia  \$453 49650 Hemia Services Appair Recurrent Inquirial Hemia  \$453 49650 Laparoscopy, Surgical Repair Recurrent Inquirial Hemia  \$454 49650 Services Appair Recurrent Inquirial Hemia  \$455 49650 Unisted Laparoscopy Procedure, Hemioplasty, Hemiorthaphy, Hemiotomy  \$12,23 49900 Stutus, Secondary, Of Abdominal Vial For Externation Of Stemal And Chest Wall Defects)  \$12,23 49900 Services Secondary, Of Abdominal Vial For Externation Of Stemal And Chest Wall Defects)  \$13,23 49900 Services Secondary, Of Abdominal (Eal, For Reconstruction Of Stemal And Chest Wall Defects)  \$1,23 49900 Services Secondary, Of Abdominal (Eal, For Reconstruction Of Stemal And Chest Wall Defects)  \$1,23 49900 Services Services Application Services Application To Code For Primary Procedure.  \$2,24 49900 Infection And Orlange Of Circump, Pertineum And Omentum  \$2,24 49900 Infection And Orlange Of Circump, Pertineum And Omentum  \$2,44 49900 Infection And Orlange Of Circump, Pertineum And Omentum  \$2,44 49000 Infection And Orlange Of Circump, And Omentum  \$2,44 49000 Infection And Orlange Of Circump Association Services Application Servi  |   |   | \$471.90   |
| 18617   Repair Of Recurrent Siding Hermis Of Abdomen, More Than 10 Cm in Length   \$1,022   18618   Repair Of Siding Hermis Abdomen, More Than 10 Cm in Length   \$1,022   18621   Repair Of Siding Hermis Abdomen, More Than 10 Cm in Length   \$1,024   18622   Repair Of Siding Hermis Abdomen, More Than 10 Cm in Length   \$1,024   18622   Repair Of Siding Hermis Abdomen, Nore Than 10 Cm in Length   \$1,024   18622   Repair Of Centrapped Hermis Next To Stoma   \$1,024   18622   Repair Of Centrapped Hermis Next To Stoma   \$1,024   18622   Repair Of Centrapped Hermis Next To Stoma   \$1,024   18623   Removal Of Mesh At Same Time As Hermis Repair   \$1,024   18655   Janiston Copy, Surgical Repair Recurrent Ingsty, Hermiorhaphy, Hermio  |   |   | \$527.88   |
| 49618 Fepair OT Recurrent Entrapped Hernia IOr Abdomen, More Than 10 Cm In Length       \$1,022         49621 Repair OT Sitting Hernia Next To Stoma       \$161         49622 Repair OT Entrapped Hernia Next To Stoma       \$166         49623 Remoral OT Entrapped Hernia Next To Stoma       \$166         49620 Remoral ON Mesh At Same Time As Hernia Repair       \$166         49650 Laparoscopy, Surgical Repair Initial Inguinal Hernia       \$433         49650 Unisted Laparoscopy Procedure, Hernioplasty, Herniorhaphy, Herniotomy       \$1,23         49800 Suture, Scondary, Of Abdominal Wall For Exteraction Or Debracence       \$983         49900 Stutrus, Scondary, Of Abdominal Wall For Exteraction Or Debracence       \$983         49900 Entrapped Insp., Extra-Abdominal (Eq. For Reconstruction Of Stemal And Or Order Primary Procedure)       \$1,33         49900 Entrapped Insp., Intra-Abdominal (Eq. Spearately in Addition To Code For Primary Procedure)       \$34         49900 Free Omental Flap With Microvascular Anastomosis       \$1,37         49900 United Or Decodure, Abdomen, Pertineum And Omentum       Price By Re         50010 Rosenia Exploration, Not Necessitating Other Speacific Procedures       \$64         50020 Incision And Orlange Of Kindry Abboses, Open Procedure       \$92         50040 Nephrositoriny, Removal Of Calculus       \$1,03         50050 Removal Or Kidney Stome With Examples of Calculus       \$1,03      <   |   | 1 0   | \$707.74   |
| 48621 Repair Of Sliding Hernia Next To Stoma \$767 489622 Repair Of Entrapped Hernia Next To Stoma \$767 489623 Repair Of Entrapped Hernia Next To Stoma \$768 489630 Agentoryop, Surgical Repair Initial Inquinal Hernia \$768 489651 Laparoscopy, Surgical Repair Initial Inquinal Hernia \$768 489651 United Laparoscopy Procedure, Hernipolasy, Herniorthapty, Herniothomy \$76950 United Laparoscopy Procedure, Hernipolasy, Herniorthapty, Herniothomy \$76980 United Laparoscopy Procedure, Hernipolasy, He   |   |   | \$731.23   |
| 48922 Removal Of Mesh At Same Time As Hernia Repair         \$161           49823 Removal Of Mesh At Same Time As Hernia Repair         \$161           49850 Laparoscopy, Surgical Repair Initial Inguinal Hernia         \$433           49851 Laparoscopy, Surgical Repair Recurrent Injunial Hernia         \$435           49851 Laparoscopy, Surgical Repair Recurrent Injunial Hernia         \$525           49855 Unlisted Laparoscopy, Surgical Repair Recurrent Injunial Hernia         \$51,23           49800 Suture, Secondary, Of Adominal Walf For Execoration Control         \$51,23           49900 Suture, Secondary, Of Adominal Walf For Execoration Control         \$51,23           49900 Comental Flag, Estra-Adominal (Lat Separately in Addition To Code For Primary Procedure)         \$13,23           49905 Comental Flag, Intra-Adominal (Lat Separately in Addition To Code For Primary Procedure)         \$1,37           49906 Free Omental Flag, With Microvascular Anastomosis         \$1,37           49906 Free Omental Flag, Uniter Addominal (Lat Separately in Addition To Code For Primary Procedure)         \$32           50010 Remail Explaintion, Not Note Security (Late Separately) in Addition To Code For Primary Procedure)         \$32           50020 Initiated Procedure, Addominal Walf Procedure         \$32           50020 Initiated Industry (Marcial Code)         \$34           50020 Initiated Industry (Marcial Code)         \$34           50040 Reparation (M  |   |   |  |
| 498232       Removal Of Mesh At Same Time As Hernia Repair       \$164         49550       Laparoscopy, Surgical: Repair Insial Inquinal Hernia       \$353         49851       Laparoscopy, Surgical: Repair Recurrent Inguinal Hernia       \$55         49852       Laparoscopy, Surgical: Repair Recurrent Inguinal Hernia       \$55         49800       Survey, Secondary, O' Abdominal Wall For Evisceration Or Dehiscence       \$62         49800       Comental Flap, Extra-Abdominal (E.F. For Reconstruction Of Sternal And Chest Wall Defects)       \$1.38         49800       Comental Flap, Intra-Abdominal (E.F. For Reconstruction Of Sternal And Chest Wall Defects)       \$3.4         49800       Comental Flap, Intra-Abdominal (E.F. For Reconstruction Of Sternal And Chest Wall Defects)       \$3.4         49900       Minister Plap, Intra-Abdominal (E.F. For Reconstruction Of Sternal And Chest Wall Defects)       \$3.4         49900       Minister Plap, Intra-Abdominal (E.F. For Reconstruction Of Sternal And Chest Wall Defects)       \$3.4         49900       Intered Procedure, Abdominal (E.F. For Reconstruction Of Sternal And Chest Wall Defects)       \$3.5         50010       Renal Exploration, Not Necessitating Other Specific Procedures       \$9.2         50020       Incision Into Kindey With Exploration       \$9.8         50040       Nephrolitotomy, Removal Of Calculus       \$1.0         50050<  |   |   | \$761.98   |
| Japansesopy, Surgical: Repair Intitial Inguinal Hernia Japansesopy, Surgical: Repair Recurrent Japansesopy, Surgical: Repair Repair Vision Memory, Surgical: Repair Vision Vision Memory, Surgical: Repair R   |   | 1 11  | \$164.01   |
| 49851 Leparoscopy, Surgical: Repair Recurrent Inguinal Hernia       \$55         49855 Unitsed Laparoscopy Procedure, Hernioplasy, Herniorrhaphy, Herniotomy       \$1,235         49805 Unitsed Laparoscopy Procedure, Hernioplasy, Herniorrhaphy, Herniotomy       \$1,235         49805 Unitsed, Secondary, Of Abdominal Walf For Evisceration Or Dehiscence       \$98         49904 Omental Flap, Intra-Abdominal (List Separately In Addition To Code For Primary Procedure)       \$34         49805 Prea Comental Flap With Microvascular Anastomosias       \$1,327         49900 Unitsed Procedure, Abdominal (List Separately In Addition To Code For Primary Procedure)       \$34         50010 Renal Exploration, Not Necessitating Other Specific Procedures       \$64         50010 Rosion And Drainage Of Kindey Abscess, Open Procedure       \$64         50040 Rephrostomy, Nephrotomy With Drainage       \$84         50040 Rephrostomy, Rephrotomy With Drainage       \$84         50040 Rosion Into Kindey With Exploration       \$1,09         50070 Nephrolithotomy; Removal Of Calculus       \$1,09         50070 Nephrolithotomy; Complicated By Congenital Kidney Abnormality       \$1,09         50078 Nephrolithotomy; Complicated By Congenital Kidney Abnormality       \$1,09         50080 Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin       \$1,32         50180 Removal Or Crushing Kidney Stone (Up T  |   | ,   | \$433.30   |
| 49900 Suture, Secondary, Of Abdominal Wall For Evisceration Or Dehissence         \$60.           49904 Omental Flap, Extra-Abdominal (Ejs Freconstruction Or Stermal And Chest Wall Defects)         \$13.83           49905 Omental Flap, Intra-Abdominal (List Separately In Addition To Code For Primary Procedure)         \$34.           49900 Prise of Procedure, Abdominal (List Separately In Addition To Code For Primary Procedure)         \$34.           49900 Prise of Procedure, Abdominal (List Separately In Addition To Code For Primary Procedure)         \$34.           50010 Renal Exploration, Not Nocessitating Other Specific Procedure         \$64.           50020 Incision And Drainage of Kidney Abscess, Open Procedure         \$92.           50040 Nephrostomy, Nephrostomy With Drainage         \$44.           5045 Spoul Incision Into Kidney With Exploration         \$34.           5045 Spoul Incision Into Kidney With Exploration         \$34.           5045 Incision Into Kidney With Exploration         \$1.03.           50507 Nephrolithotomy; Removal Of Calculus         \$1.03.           50070 Nephrolithotomy; Removal Of Large Staphom Calculus Filing Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy)         \$1.02.           50071 Nephrolithotomy; Removal Of Large Staphon Calculus Filing Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy)         \$1.32.           50072 Nephrolithotomy; Removal Of Large Staphone (Incitity States and Calculus States and Calculus States and Calculus States and Calc  | 49651   | Laparoscopy, Surgical; Repair Recurrent Inguinal Hernia   | \$551.50   |
| Memala Flap, Estra-Abdominal (Eg. For Reconstruction Of Sternal And Chest Wall Defects)   \$1,387,49905   Chemata Flap, Intra-Abdominal (List Separately in Addition To Code For Primary Procedure)   \$344,49906   Free Omental Flap With Microvascular Anastomosis   \$1,977,49999   Unisted Procedure, Abdomen, Perioneum And Omentum   Price By Res South Renal Exploration, Not Necessitating Other Specific Procedure   \$922,5000   Ronal Exploration, Not Necessitating Other Specific Procedure   \$922,5000   Ropin Exploration, Not Necessitating Other Specific Procedure   \$922,5000   Rephroscopy, Nephrotomy With Drainage   \$943,5000   Rephroscopy, Nephrotomy With Drainage   \$944,5000   Rephroscopy, Nephrotomy With Drainage   \$944,5000   Rephroscopy, Nephrotomy With Drainage   \$944,5000   Rephroscopy, Nephrotomy of Calculus   \$948,5000   Rephrolithotomy; Removal Of Calculus   \$1,033,5000   Removal Of Kidney Stone With Secondary Operation For Calculus   \$1,095,5007   Removal Of Kidney Stone With Secondary Operation For Calculus   \$1,095,5007   Rephrolithotomy; Cemoval Of Large Staphorn Calculus Filing Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy)   \$1,007,50075   Rephrolithotomy; Cemoval Of Large Staphorn Calculus Filing Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy)   \$1,007,50075   Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin   \$1,286,50100   Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure)   \$965,50120   Incision Into Renal Pelvis Of A Kidney With Exploration   \$965,50120   Incision Into Renal Pelvis Of A Kidney With Exploration   \$965,50120   Incision Into Renal Pelvis Of A Kidney With Brainage   \$965,50120   Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus   \$933,50130   Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus   \$933,50130   Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus   \$933,50130   Removal Of Kidney And Urinary Duct (Ureter) (P   | 49659   | Unlisted Laparoscopy Procedure, Hernioplasty, Herniorrhaphy, Herniotomy   | \$1,235.25   |
| Magnot Free Demontal Flap, Inter-Abdominal (List Saparately In Addition To Code For Primary Procedure)   \$343   |   |   | \$693.87   |
| 49906 Free Omental Flap With Microvascular Anastomosis  91.977  199939 Unlisted Procedure, Abdomen, Peritoneum And Omentum  91 Price By Re 50010 Renal Exploration, Not Necessitating Other Specific Procedures 50010 Renal Exploration, Not Necessitating Other Specific Procedure 50010 Renal Politic Renal  |   |   | \$1,382.69   |
| Julisted Procedure, Abdomen, Peritoneum And Omentum Price By Re 50010 Renal Exploration, Not Necessitating Other Specific Procedures 50020 Incision And Drainage Of Kidney Abseess, Open Procedure 50020 Incision And Drainage Of Kidney Abseess, Open Procedure 50040 Removal Of Kidney Abseess, Open Procedure 50040 Removal Of Kidney Abseess, Open Procedure 50040 Removal Of Kidney Stone With Secondary Operation For Calculus 50045 Incision Into Kidney With Exploration 50055 Removal Of Kidney Stone With Secondary Operation For Calculus 50070 Rephrolithotomy, Complicated By Congenital Kidney Abnormality 50075 Rephrolithotomy, Complicated By Congenital Kidney Abnormality 50076 Rephrolithotomy, Removal Of Large Staghom Calculus Filing Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) 50077 Rephrolithotomy, Removal Of Large Staghom Calculus Filing Renal Pelvis And Calyces (Including Anatrophic Pyelolithotomy) 50078 Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin 50081 Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin 50100 Transaction Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) 50120 Incision Into Renal Pelvis Of A Kidney With Exploration 50121 Incision Into Renal Pelvis Of A Kidney With Drainage 50122 Incision Into Renal Pelvis Of A Kidney With Drainage 50132 Incision Into Renal Pelvis Of A Kidney With Drainage 50133 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus 50130 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus 50130 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus 50130 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus 50130 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus 50130 Incision Of Renal Pelvis Of A Kidney With Removal Of Calculus 50130 Incision Of Renal Pelvis Of A Kidney With Removal Of Calculus 50130 Incision Of Renal Pelvis Of A Kidney With Removal Of   |   |   | \$343.75   |
| South   Service   Servic   |   | '   | \$1,971.90   |
| S0220   Incision And Drainage Of Kidney Abscess, Open Procedure   S024   |   |   |  |
| Spart   Spar   |   |   | \$924.27   |
| Spate  |   |   | \$841.79   |
| Sonos Removal Of Kidney Stone With Secondary Operation For Calculus  S1,095  Sonos Nephrolithotomy; Complicated By Congenital Kidney Abnormality  \$1,325  Sonos Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin  Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin  Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin  Sponsor Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin  Sponsor Incisent on Or Repositioning Of Aberrant Renal Vesseis (Separate Procedure)  Sponsor Incisent Into Renal Pelvis Of A Kidney With Exploration  Sponsor Incisent Into Renal Pelvis Of A Kidney With Drainage  Sponsor Incision Into Renal Pelvis Of A Kidney With Drainage  Sponsor Incisent Into Renal Pelvis Of A Kidney With Drainage  Sponsor Incisent Into Renal Pelvis Of A Kidney With Prainage  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Removal Of Calculus  Sponsor Incisent Into Renal Pelvis Of A Kidney With Pelvis Into Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure  Sponsor Incisent Into Renal Pelvis Of A Kidney Into Removal Of Into Renal Removal Of Into Re  |   |   | \$848.23   |
| Section   Septembrith   Section  | 50060   | Nephrolithotomy; Removal Of Calculus  | \$1,034.20   |
| September   Sept   | 50065   | Removal Of Kidney Stone With Secondary Operation For Calculus   | \$1,095.97   |
| Removal Or Crushing Kidney Stone (Up To 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin \$1,28t 50000 Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) \$965. 50100 Transection Or Repositioning Of Aberrant Renal Vessels (Separate Procedure) \$965. 50120 Incision Into Renal Pelvis Of A Kidney With Exploration \$865. 50125 Incision Into Renal Pelvis Of A Kidney With Exploration \$865. 50125 Incision Into Renal Pelvis Of A Kidney With Drainage \$895. 50130 Incision Into Renal Pelvis Of A Kidney With Drainage \$930310 Incision Into Renal Pelvis Of A Kidney With Exploration \$93031 Incision Into Renal Pelvis Of A Kidney With Exploration \$930310 Incision Into Renal Pelvis Of A Kidney With Exploration \$930310 Incision Into Renal Pelvis Of A Kidney With Exploration \$930310 Incision Into Renal Pelvis Of A Kidney With Exploration \$930310 Incision Into Renal Pelvis Of A Kidney With Exploration \$930310 Incision Into Renal Pelvis Of A Kidney With Exploration \$930310 Incision Into Renal Pelvis Of A Kidney With Exploration \$930310 Incision Into Renal Pelvis Of A Kidney With Exploration \$930310 Incision Into Renal Pelvis Of A Kidney More Procedure \$930320 Incision Into Renal Pelvis Of A Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure \$930320 Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure \$1,156 S0334 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,186 S0334 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,337 S0334 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,337 S0334 Removal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,337 S0334 Removal Of Exploration Of Donor Kidney Open Procedure \$1,337 S0334 Removal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,338 S0334 Removal Of Exploration Of Don  |   |   | \$1,074.92   |
| Removal Or Crushing Kidney Stone (Over 2 Centimeters) Or Insert Kidney Stent Using An Endoscope, Accessed Through The Skin   \$1,285   |   |   | \$1,320.57   |
| Transection Or Repositioning of Aberrant Renal Vessels (Separate Procedure)  [50120] Incision Into Renal Pelvis Of A Kidney With Exploration [50125] Incision Into Renal Pelvis Of A Kidney With Drainage [50130] Incision Into Renal Pelvis Of A Kidney With Drainage [50130] Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus [50130] Pyelotomy, Complicated (Eg. Secondary Operation, Congenital Kidney Abnormality) [50200] Needle Biopsy Of Kidney, Accessed Through The Skin [50200] Rendel Biopsy Of Kidney, Accessed Through The Skin [50200] Rendel Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney [50202] Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure [50202] Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same [50203] Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open [50204] Procedure [50204] Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision [50204] Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision [50204] Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision [50204] Removal Of Unroofing Of Kidney Cysts [50206] Removal Of Unroofing Of Kidney Cysts [50207] Removal Of Unroofing Of Kidney Cysts [50208] Removal Of Unroofing Of Kidney Cysts [50208] Removal Of Donor Kidney, Open Procedure [50208] Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric [50208] Preparation Of Donor Kidney, Open Procedure [50212] Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure [50213] Preparation Of Donor Kidney For Transplantation, Ureteral Connection [50212] Preparation Of Donor Kidney For Transplantation, Ureteral Connection [5022] Preparation Of Donor Kidney For Tran   |   |   | \$877.36   |
| Incision Into Renal Pelvis Of A Kidney With Exploration \$863 50125 Incision Into Renal Pelvis Of A Kidney With Drainage \$893 50130 Incision Into Renal Pelvis Of A Kidney With Drainage \$893 50130 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus \$938 50130 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus \$938 50130 Pelotomy; Complicated (Eg., Secondary Operation, Congenital Kidney Abnormality) \$1,018 50200 Needle Biopsy Of Kidney, Accessed Through The Skin 50201 Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,156 50230 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision \$1,325 50260 Destruction Of 1 Or More Growths In Kidney, Open Procedure Source Removal Of Vinder Growths In Kidney, Open Procedure Source Removal Of Unroofing Of Kidney Cysts Source Removal Of Donor Kidney, Open Procedure Source Removal Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure Source Removal Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure Source Removal Of Donor Kidney For Transplantation, Undersource Or Adrenal Gland, And Preparation Of Undersource Reparation Of Donor Kidney For Transplantation, Uneteral Connection Source Removal O   |   |   | \$1,288.44   |
| Incision Into Renal Pelvis Of A Kidney With Drainage \$938 50130 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus \$938 50130 Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus \$938 50135 Pyelotomy; Complicated (Eg., Secondary Operation, Congenital Kidney Abnormality) \$10135 Pyelotomy; Complicated (Eg., Secondary Operation, Congenital Kidney Abnormality) \$10136 Pyelotomy; Complicated (Eg., Secondary Operation, Congenital Kidney Abnormality) \$10136 Pyelotomy; Complicated (Eg., Secondary Operation, Congenital Kidney Abnormality) \$10137 Pyelotomy; Complicated (Eg., Secondary Operation, Congenital Kidney Abnormality) \$10137 Pyelotomy; Carlon (Kidney, Carlon (Kidney, Carlon (Kidney)) \$1025 Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same \$1025 Kidney \$1026 Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same \$1026 Kidney \$1026 Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open \$11,105 Procedure \$1   |   |   | \$863.29   |
| Incision Into Renal Pelvis Of A Kidney With Removal Of Calculus   \$936  |   |   | \$893.53   |
| Pyelotomy; Complicated (Eg, Secondary Operation, Congenital Kidney Abnormality)  \$1,018 50200 Needle Biopsy Of Kidney, Accessed Through The Skin \$378 50205 Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney \$672 8emoval Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same \$1,085 8672 8672 872 873 874 875 875 875 875 875 875 875 875 875 875  |   | , ,   | \$938.36   |
| Needle Biopsy Of Kidney, Accessed Through The Skin \$376 50200 Renal Biopsy, Percutaneous; By Trocar Or Needle By Surgical Exposure Of Kidney \$677 50220 Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Procedure Focus Agemoval Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Focus Agemoval Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,156 50230 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision \$1,325 50240 Nephrectomy, Partial \$1,337 50250 Destruction Of 1 Or More Growths In Kidney, Open Procedure \$1,105 50250 Destruction Of 1 Or More Growths In Kidney, Open Procedure \$1,105 50250 Excision Of Perinephric Cyst \$818 50320 Removal Or Unroofing Of Kidney Cysts \$818 50320 Removal Or Donor Kidney, Open Procedure \$1,356 50240 Removal Or Donor Kidney, Open Procedure \$255 50325 Preparation Of Donor Kidney, Open Procedure \$255 50325 Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure \$255 50326 Preparation Of Donor Kidney For Transplantation, Venous Connection \$210 50329 Preparation Of Donor Kidney For Transplantation, Venous Connection \$210 50329 Preparation Of Donor Kidney For Transplantation, Venous Connection \$316 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection \$316 50329 Reparation Of Donor Kidney For Transplantation, Ureteral Connection \$316 50329 Reparation Of Donor Kidney For Transplantation, Ureteral Connection \$316 50320 Report Nephrectomy (Separate Procedure) \$316 50321 Reparation Of Donor Kidney For Transplantation, Ureteral Connection \$316 50321 Reparation Of Donor Kidney For Transplanta  |   |   | \$1,018.16   |
| Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure Procedure Sozad Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision Sozad Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Sozad Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision Sozado Nephrectomy, Partial Sozado Destruction Of 1 Or More Growths In Kidney, Open Procedure Sozado Removal Or Unroofing Of Kidney Cysts Sozado Removal Of Donor Kidney Cysts Sozado Removal Of Donor Kidney, Open Procedure Sozado Removal Of Donor Kidney, Open Procedure Sozado Removal Of Donor Kidney And Removal Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric Sozado Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure Sozado Preparation Of Donor Kidney For Transplantation, Venous Connection Sozado Preparation Of Donor Kidney For Transplantation, Arterial Connection Sozado Recipient Nephrectomy (Separate Procedure) Sozado Recipient Nephrectomy (Separate Procedure)   | 50200   | Needle Biopsy Of Kidney, Accessed Through The Skin  | \$378.59   |
| Removal Of Kidney And Partial Removal Of Urinary Duct (Ureter), Open Procedure, Complicated Because Of Previous Surgery On Same  Kidney  Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open  Procedure  50230 Procedure  50234 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision  \$1,156  50236 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision  \$1,325  50240 Nephrectomy, Partial  50250 Destruction Of 1 Or More Growths In Kidney, Open Procedure  50280 Removal Or Unroofing Of Kidney Cysts  50290 Excision Of Perinephric Cyst  50320 Removal Of Donor Kidney, Open Procedure  Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric  50323 Freparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure  \$50325 Preparation Of Donor Kidney For Transplantation, Venous Connection  \$50326 Preparation Of Donor Kidney For Transplantation, Arterial Connection  \$1080  \$108   |   |   | \$672.66   |
| Kidney Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open Procedure  S1,156 S0234 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,186 S0236 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision \$1,325 S0240 Nephrectomy, Partial S0250 Destruction Of 1 Or More Growths In Kidney, Open Procedure S0280 Removal Or Unroofing Of Kidney Cysts S0320 Excision Of Perinephric Cyst S0320 Removal Of Donor Kidney, Open Procedure S0321 Removal Of Donor Kidney, Open Procedure S0322 Removal Of Donor Kidney, Open Procedure S0323 Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re S0325 Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure S0326 Preparation Of Donor Kidney For Transplantation, Venous Connection S0327 Preparation Of Donor Kidney For Transplantation, Arterial Connection S0328 Preparation Of Donor Kidney For Transplantation, Arterial Connection S0329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection S0329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection S0329 Preparation Nephrectomy (Separate Procedure) S0320 Recipient Nephrectomy (Separate Procedure)  | 50220   |   | \$950.64   |
| Removal Of Kidney, Lymph Nodes, And/Or Blood Clot From Major Vein (Vena Cava) With Partial Removal Of Urinary Duct (Ureter), Open 50230 Procedure \$1,156 50234 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,186 50236 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision \$1,326 50240 Nephrectomy, Partial Personal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision \$1,327 50240 Nephrectomy, Partial Personal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision \$1,328 50240 Nephrectomy, Partial Personal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision \$1,328 50240 Nephrectomy, Partial Personal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Seme Incision \$1,328 50240 Nephrectomy, Partial Personal Of Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Seme Incision \$1,328 50240 Nephrectomy of Vidney Cysts \$11,305 828 Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure \$11,358 50325 Preparation Of Donor Kidney For Transplantation, Venous Connection \$210 50328 Preparation Of Donor Kidney For Transplantation, Arterial Connection \$1157 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection \$150 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection \$150 8029 Preparation Nephrectomy (Separate Procedure) \$850 8029 Preparation Nephrectomy (Separate Procedure)   | =0  |   | A :=   |
| S1,156   S1,2524   Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision   S1,186   S1,2525   Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision   S1,325  | 50225   |   | \$1,085.47   |
| Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Same Incision \$1,180 50236 Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision \$1,325 50240 Nephrectomy, Partial \$1,337 50250 Destruction Of 1 Or More Growths In Kidney, Open Procedure \$1,105 50280 Removal Or Unroofing Of Kidney Cysts \$860 50290 Excision Of Perinephric Cyst \$812 50320 Removal Of Donor Kidney, Open Procedure \$1,356 50320 Removal Of Donor Kidney, Open Procedure \$1,356 50320 Removal Of Donor Kidney, Open Procedure \$2,356 50327 Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure \$2,50325 Preparation Of Donor Kidney For Transplantation, Venous Connection \$2,105 50326 Preparation Of Donor Kidney For Transplantation, Arterial Connection \$2,106 50327 Preparation Of Donor Kidney For Transplantation, Arterial Connection \$1,180 \$1,326 \$1,327 \$1,180 \$1,327 \$1,327 \$1,327 \$1,327 \$1,027   | E0220   |   | \$4.4E6.46   |
| Removal Of Kidney And Urinary Duct (Ureter) With Partial Removal Of Bladder, Through Separate Incision  \$1,325 50240 Nephrectomy, Partial \$1,337 50250 Destruction Of 1 Or More Growths In Kidney, Open Procedure \$1,105 50280 Removal Or Unroofing Of Kidney Cysts \$865 50290 Excision Of Perinephric Cyst \$818 50320 Removal Of Donor Kidney, Open Procedure \$1,356 8866 50290 Excision Of Perinephric Oyst \$818 50320 Removal Of Donor Kidney, Open Procedure \$1,356 8866 50290 Excision Of Perinephric Oyst \$818 50320 Removal Of Donor Kidney, Open Procedure \$1,356 8866 50320 Removal Of Donor Kidney, Open Procedure \$255 887 887 887 887 887 887 887 887 887 8   |   |   | \$1,180.34   |
| Section Of 1 Or More Growths In Kidney, Open Procedure   S1,105  |   |   | \$1,329.20   |
| Destruction Of 1 Or More Growths In Kidney, Open Procedure  \$1,105 50280 Removal Or Unroofing Of Kidney Cysts  \$869 50290 Excision Of Perinephric Cyst  \$818 50320 Removal Of Donor Kidney, Open Procedure  Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric  \$1,356 50323 Freparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure  \$255 50325 Preparation Of Donor Kidney For Transplantation, Venous Connection  \$31 50328 Preparation Of Donor Kidney For Transplantation, Arterial Connection  \$31 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection  \$31 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection  \$326 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection  \$327 50340 Recipient Nephrectomy (Separate Procedure)   |   | ,   | \$1,337.33   |
| Section Of Perinephric Cyst   Setting  |   | Destruction Of 1 Or More Growths In Kidney, Open Procedure  | \$1,105.14   |
| Removal Of Donor Kidney, Open Procedure  Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric  50323 Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re  \$255 50325 Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure  \$210 50327 Preparation Of Donor Kidney For Transplantation, Venous Connection  \$210 50328 Preparation Of Donor Kidney For Transplantation, Arterial Connection  \$150 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection  \$150 50340 Recipient Nephrectomy (Separate Procedure)   |   | Removal Or Unroofing Of Kidney Cysts  | \$869.33   |
| Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric 50323 Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re \$2550325 Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure \$511 Preparation Of Donor Kidney For Transplantation, Venous Connection \$210 Preparation Of Donor Kidney For Transplantation, Arterial Connection \$150329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection \$150329 Recipient Nephrectomy (Separate Procedure) \$850  |   |   |  |
| Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re  \$255 50325 Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure  \$517 50327 Preparation Of Donor Kidney For Transplantation, Venous Connection  \$210 50328 Preparation Of Donor Kidney For Transplantation, Arterial Connection  \$166 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection  \$157 50340 Recipient Nephrectomy (Separate Procedure)   | 50290   | Excision Of Perinephric Cyst  | \$818.00   |
| 50325       Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure       \$511         50327       Preparation Of Donor Kidney For Transplantation, Venous Connection       \$210         50328       Preparation Of Donor Kidney For Transplantation, Arterial Connection       \$160         50329       Preparation Of Donor Kidney For Transplantation, Ureteral Connection       \$157         50340       Recipient Nephrectomy (Separate Procedure)       \$858  | 50290   | Excision Of Perinephric Cyst Removal Of Donor Kidney, Open Procedure  | \$818.00<br>\$1,358.83                                     |
| 50327       Preparation Of Donor Kidney For Transplantation, Venous Connection       \$210         50328       Preparation Of Donor Kidney For Transplantation, Arterial Connection       \$166         50329       Preparation Of Donor Kidney For Transplantation, Ureteral Connection       \$157         50340       Recipient Nephrectomy (Separate Procedure)       \$858  | 50290<br>50320  | Excision Of Perinephric Cyst  Removal Of Donor Kidney, Open Procedure  Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric  | \$1,358.83   |
| 50328 Preparation Of Donor Kidney For Transplantation, Arterial Connection       \$166         50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection       \$157         50340 Recipient Nephrectomy (Separate Procedure)       \$858   | 50290<br>50320<br>50323                                     | Excision Of Perinephric Cyst  Removal Of Donor Kidney, Open Procedure  Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re  | \$1,358.83<br>\$255.62                                     |
| 50329 Preparation Of Donor Kidney For Transplantation, Ureteral Connection \$157 50340 Recipient Nephrectomy (Separate Procedure) \$858  | 50290<br>50320<br>50323<br>50325                            | Excision Of Perinephric Cyst  Removal Of Donor Kidney, Open Procedure  Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re  Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure   | \$1,358.83<br>\$255.62<br>\$511.32                         |
| 50340 Recipient Nephrectomy (Separate Procedure) \$858   | 50290<br>50320<br>50323<br>50325<br>50327                   | Excision Of Perinephric Cyst  Removal Of Donor Kidney, Open Procedure  Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re  Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure  Preparation Of Donor Kidney For Transplantation, Venous Connection   | \$1,358.83<br>\$255.62<br>\$511.32<br>\$210.38             |
|  | 50290<br>50320<br>50323<br>50325<br>50327<br>50328          | Excision Of Perinephric Cyst Removal Of Donor Kidney, Open Procedure Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure Preparation Of Donor Kidney For Transplantation, Venous Connection Preparation Of Donor Kidney For Transplantation, Arterial Connection  | \$1,358.83<br>\$255.62<br>\$511.32<br>\$210.38<br>\$166.07 |
| 421.00   | 50290<br>50320<br>50323<br>50325<br>50327<br>50328<br>50329 | Excision Of Perinephric Cyst  Removal Of Donor Kidney, Open Procedure  Backbench Standard Preparation Of Cadaver Donor Renal Allograft Prior To Transplantation, Including Dissection And Removal Of Perinephric Fat, Diaphragmatic And Retroperitoneal Attachments, Excision Of Adrenal Gland, And Preparation Of Ureter(S), Re  Preparation Of Donor Kidney For Transplantation, Open Or Endoscopic Procedure  Preparation Of Donor Kidney For Transplantation, Venous Connection  Preparation Of Donor Kidney For Transplantation, Arterial Connection  Preparation Of Donor Kidney For Transplantation, Ureteral Connection | \$1,358.83<br>\$255.62<br>\$511.32<br>\$210.38             |

| Code                             | Description  | Fee                    |
|----------------------------------|--|------------------------|
|                                  | Description  Renal Homotransplantation, Implantation Of Graft With Recipient Nephrectomy   | \$2,582.43             |
|                                  | Removal Of Transplanted Renal Allograft  | \$1,086.97             |
|                                  | Renal Autotransplantation, Reimplantation Of Kidney  | \$1,336.05             |
| 00000                            | Removal And Replacement Of Indwelling Stent In Urinary Duct (Ureter) Including Radiological Supervision And Interpretation, Accessed   | ψ1,000.00              |
| 50382                            | Through The Skin   | \$1,008.35             |
|                                  |  |                        |
| 50364                            | Removal Of Indwelling Stent In Urinary Duct (Ureter) Including Radiological Supervision And Interpretation, Accessed Through The Skin Removal (Via Snare/Capture) And Replacement Of Internally Dwelling Ureteral Stent Via Transurethral Approach, Without Use Of Cystoscopy, | \$861.48               |
| E020E                            | Including Radiological Supervision And Interpretation  | ¢1 012 55              |
| 50365                            | Removal (Via Snare/Capture) Of Internally Dwelling Ureteral Stent Via Transurethral Approach, Without Use Of Cystoscopy, Including   | \$1,013.55             |
| 50386                            | Radiological Supervision And Interpretation  | \$747.84               |
| 30300                            | Removal And Replacement Of Stent In Kidney And Urinary Duct (Ureter) Using Fluoroscopic Guidance Including Radiological Supervision And  | Ψ1+1.0+                |
| 50387                            | Interpretation   | \$564.09               |
|                                  | Removal Of Nephrostomy Tube, Requiring Fluoroscopic Guidance (Eg, With Concurrent Indwelling Ureteral Stent)   | \$349.68               |
|                                  | Aspiration And/Or Injection Kidney Cyst, Accessed Through The Skin   | \$96.15                |
|                                  | Instillations Of Drug Into Kidney And/Or Urinary Duct (Ureter)   | \$115.76               |
|                                  | Manometric Studies Through Nephrostomy Or Pyelostomy Tube, Or Indwelling Ureteral Catheter   | \$106.69               |
| 30390                            | Pyeloplasty; (Foley Y-Pyeloplasty), Plastic Operation On Renal Pelvis, With Or Without Plastic Operation On Ureter, Nephropexy, Nephrostomy,   | \$100.09               |
| 50400                            | Pyelostomy, Or Ureteral Splinting  | \$1,165.36             |
|                                  | Pyeloplasty; Complicated (Congenital Kidney Abnormality, Secondary Pyeloplasty, Solitary Kidney)   | \$1,405.56             |
| 50405                            | Injection Procedure For X-Ray Imaging Of Kidney And Urinary Duct (Ureter) Using Imaging Guidance Including Radiological Supervision And  | \$1,405.56             |
| 50420                            | Interpretation, New Access   | \$628.78               |
| 30430                            | Injection Procedure For X-Ray Imaging Of Kidney And Urinary Duct (Ureter) Using Imaging Guidance Including Radiological Supervision And  | φ020.76                |
| E0424                            | Interpretation, Existing Access  | <b>¢</b> 227 77        |
| 30431                            | Interpretation, Existing Access  | \$237.77               |
| 50422                            | Placement Of Catheter Of Kidney, Accessed Through The Skin Using Imaging Guidance With Radiological Supervision And Interpretation   | ¢024 90                |
| 50432                            | Placement Of Catheter Of Kidney, Accessed Through The Skin Osing Imaging Suidance With Radiological Supervision And Interpretation  Placement Of Catheter Of Kidney And Urinary Tube (Ureter), Accessed Through The Skin Using Imaging Guidance With Radiological              | \$931.80               |
| 50422                            | Placement of Catheter of Kloney and Orinary Tube (Oreter), Accessed Through The Skin Using Imaging Guidance With Radiological Supervision And Interpretation   | ¢4 054 00              |
| 50433                            | Conversion of Nephrostomy Catheter To Nephroureteral Catheter Accessed Through The Skin Using Imaging Guidance With Study Of Kidney  | \$1,254.98             |
| E0424                            | And Ureter And Radiological Supervision And Interpretation   | ¢010.71                |
|                                  | Replacement Of Kidney Drainage Catheter Accessed Through The Skin With Imaging And Radiological Supervision And Interpretation   | \$910.71<br>\$522.05   |
|                                  | Enlargement Of Existing Opening Into Urinary Tract Accessed Through Skin Using Imaging Guidance  | *                      |
| 50436                            |  | \$136.82               |
| E0407                            | Enlargement Of Existing Opening Into Urinary Tract Accessed Through Skin And Creation Of New Access Into Urine Collecting System Of  | <b>#</b> 000 00        |
|                                  | Kidney, Using Imaging Guidance   | \$226.29               |
|                                  | Nephrorrhaphy, Suture Of Kidney Wound Or Injury  | \$1,112.35             |
|                                  | Closure Of Nephrocutaneous Or Pyelocutaneous Fistula   | \$1,031.61             |
|                                  | Closure Of Abnormal Drainage Tract From Kidney To Other Abdominal Organ, Abdominal Approach  | \$1,305.53             |
| 50526                            | Closure Of Abnormal Drainage Tract From Kidney To Other Abdominal Organ, Thoracic Approach   | \$1,396.87             |
| F0F40                            | Sumphysiatomy For Harraghan Videay With Or Without Dyaloglophy And/Or Other Plantia Procedure, Hailateral Or Biletaral (On Operation)  | ¢4 040 05              |
|                                  | Symphysiotomy For Horseshoe Kidney With Or Without Pyeloplasty And/Or Other Plastic Procedure, Unilateral Or Bilateral (One Operation)   | \$1,040.85             |
| 50541                            | Laparoscopy, Surgical; Ablation Of Renal Cysts   | \$832.01               |
| E0E42                            | Laparoscopy, Surgical; Ablation Of Renal Mass Lesion(S), Including Intraoperative Ultrasound Guidance And Monitoring, When Performed   | \$1,058.78             |
|                                  | Laparoscopy, Surgical; Adiation of Renal Mass Lesion(5), including intraoperative officesorial dudance And Monitoring, when renormed Laparoscopy, Surgical; Partial Nephrectomy  | \$1,501.73             |
|                                  | Laparoscopy, Surgical; Pyeloplasty   | \$1,249.92             |
|                                  | Removal Of Kidney And Lymph Nodes Using An Endoscope   | \$1,343.04             |
|                                  | Laparoscopy, Surgical; Nephrectomy, Including Partial Ureterectomy   | \$1,343.04             |
|                                  | Laparoscopy, Surgical; Neprinectority, including Farital Oreterectority  Laparoscopy, Surgical; Donor Nephrectomy (Including Cold Preservation), From Living Donor   |                        |
|                                  |  | \$1,688.87             |
|                                  | Laparoscopy, Surgical; Nephrectomy With Total Ureterectomy   | \$1,350.33             |
|                                  | Unlisted Laparoscopy Procedure, Renal  Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive   | Price By Report        |
|                                  |  | <b>#222 FC</b>         |
| 50551                            | Of Radiologic Service; Office  | \$332.56               |
| E0EE2                            | Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service; With Ureteral Catheterization, Office   | ¢256 12                |
| 30333                            | Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive  | \$356.13               |
| 50555                            | Of Radiologic Service; With Biopsy, Office   | \$378.93               |
| 50555                            | Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive  | φ310.93                |
| 50557                            | Of Radiologic Service; With Fulguration, With Or Without Biopsy, Office  | \$385.59               |
| 50557                            | Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive  | φ300.09                |
| E0E61                            |  | \$426.6E               |
| 30361                            | Of Radiologic Service; With Removal Of Foreign Body Or Calculus, Office  Renal Endoscopy Through Established Nephrostomy Or Pyelostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive   | \$436.65               |
| 50562                            | Of Radiologic Service; With Resection Of Tumor   | \$521.21               |
| 50562                            | Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | φ3∠1.21                |
| 50570                            | Service;   | \$441.12               |
|                                  | Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Upper Kidney Area  | \$477.25               |
| 50572                            | Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | φ <del>4</del> 11.25   |
| 50574                            | Service; With Biopsy   | \$507.26               |
| 00014                            | Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | ψ501.20                |
| 50575                            | Service; With Endopyelotomy (Includes Cystoscopy, Ureteroscopy, Dilation Of Ureter And Ureteral Pelvic Junction, In  | \$640.85               |
| 55575                            | Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | ψο 10.00               |
| 50576                            | Service; With Fulguration, With Or Without Biopsy  | \$505.95               |
| 55570                            | Renal Endoscopy Through Nephrotomy Or Pyelotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | ψ000.30                |
| 50580                            | Service; With Removal Of Foreign Body Or Calculus  | \$545.02               |
| 00000                            | Lithotripsy, Extracorporeal Shock Wave   | \$771.28               |
| 50500                            | Emissipo), Emissorporodi onom trato  | \$2,880.41             |
|                                  | Destruction Of 1 Or More Growths In One Kidney, Accessed Through The Skin  |                        |
| 50592                            | Destruction Of 1 Or More Growths In One Kidney, Accessed Through The Skin  Destruction Of Growths In One Kidney, Accessed Through The Skin   |                        |
| 50592<br>50593                   | Destruction Of Growths In One Kidney, Accessed Through The Skin  | \$4,279.14             |
| 50592<br>50593<br>50600          | Destruction Of Growths In One Kidney, Accessed Through The Skin Ureterotomy With Exploration Or Drainage (Separate Procedure)  | \$4,279.14<br>\$851.84 |
| 50592<br>50593<br>50600<br>50605 | Destruction Of Growths In One Kidney, Accessed Through The Skin  | \$4,279.14             |

| Code  | Description  | Fee               |
|-------|--|-------------------|
|       | Ureterolithotomy; Upper One-Third Of Ureter  | \$857.84          |
|       | Ureterolithotomy; Middle One-Third Of Ureter   | \$820.73          |
| 50630 | Ureterolithotomy; Lower One-Third Of Ureter  | \$811.14          |
| 50650 | Ureterectomy, With Bladder Cuff (Separate Procedure)   | \$942.78          |
| 50660 | Ureterectomy, Total, Ectopic Ureter, Combination Abdominal, Vaginal And/Or Perineal Approach   | \$1,037.25        |
| 50684 | Injection Procedure For Ureterography Or Ureteropyelography Through Ureterostomy Or Indwelling Ureteral Catheter                               | \$123.66          |
| 50686 | Manometric Studies Through Ureterostomy Or Indwelling Ureteral Catheter  | \$134.61          |
| 50688 | Change Of Ureterostomy Tube Or Externally Accessible Ureteral Stent Via Ileal Conduit  | \$70.91           |
| 50690 | Injection Of Bladder And Urinary Duct (Ureter) For X-Ray Imaging   | \$106.55          |
|       | Placement Of Stent Of Urinary Duct (Ureter), Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation,     |                   |
| 50693 | With Existing Access Site  | \$1,169.77        |
|       | Placement Of Stent Of Urinary Duct (Ureter), Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation,     |                   |
| 50694 | With New Access Site Without Separate Catheter   | \$1,286.32        |
|       | Placement Of Stent Of Urinary Duct (Ureter), Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation,     |                   |
|       | With New Access Site And Separate Catheter   | \$1,338.80        |
|       | Ureteroplasty, Plastic Operation On Ureter (Eg, Stricture)   | \$842.44          |
| 50705 | Occlusion Of Urinary Duct (Ureter) Using Imaging Guidance With Radiological Supervision And Interpretation                                     | \$1,865.66        |
|       |  | ****              |
|       | Balloon Dilation Treatment Of Stricture Of Urinary Duct (Ureter) Using Imaging Guidance With Radiological Supervision And Interpretation       | \$841.70          |
|       | Ureterolysis, With Or Without Repositioning Of Ureter For Retroperitoneal Fibrosis   | \$1,085.33        |
|       | Ureterolysis For Ovarian Vein Syndrome   | \$925.18          |
|       | Ureterolysis For Retrocaval Ureter, With Reanastomosis Of Upper Urinary Tract Or Vena Cava   | \$1,000.03        |
|       | Revision Of Urinary-Cutaneous Anastomosis (Any Type Urostomy);   | \$468.36          |
|       | Revision Of Urinary-Cutaneous Anastomosis (Any Type Urostomy); With Repair Of Fascial Defect And Hernia  | \$662.58          |
|       | Connection Of Urinary Duct (Ureter) To Kidney To Dilated Upper End Of Urine Collecting Duct Within Kidney (Renal Pelvis)                       | \$1,088.55        |
|       | Connection Of Urinary Duct (Ureter) To Kidney To Urine-Collecting Space Within Kidney (Renal Calyx)  | \$1,046.20        |
|       | Ureteroureterostomy  | \$1,135.58        |
|       | Transureteroureterostomy, Anastomosis Of Ureter To Contralateral Ureter  | \$1,046.20        |
|       | Ureteroneocystostomy; Anastomosis Of Single Ureter To Bladder  | \$1,114.75        |
|       | Ureteroneocystostomy; Anastomosis Of Duplicated Ureter To Bladder  | \$1,084.59        |
|       | Ureteroneocystostomy; With Extensive Ureteral Tailoring  | \$1,022.85        |
|       | Ureteroneocystostomy; With Vesico-Psoas Hitch Or Bladder Flap  | \$1,099.09        |
| 50800 | Ureteroenterostomy, Direct Anastomosis Of Ureter To Intestine  | \$840.71          |
| 50040 | Connection Of Urinary Duct (Urteter) To Large Bowel With Creation Of Intestinal Reservoir For Urine And Opening From Reservoir Through Wall    | <b>04.054.74</b>  |
|       | Of Abdomen Or Region Between Thighs  | \$1,251.71        |
|       | Connection Of Urinary Duct (Ureter) To Large Bowel   | \$1,112.65        |
| 50820 | Ureteroileal Conduit (Ileal Bladder), Including Intestine Anastomosis (Bricker Operation)  | \$1,321.24        |
| FOODE | Continent Diversion, Including Intestine Anastomosis Using Any Segment Of Small And/Or Large Intestine (Kock Pouch Or Camey Enterocystoplasty) | ¢4 402 22         |
| 50825 | Urinary Undiversion (Eg, Taking Down Of Ureteroileal Conduit, Ureterosigmoidostomy Or Ureteroenterostomy With Ureteroureterostomy Or           | \$1,492.23        |
| 50020 | Ureteroneo- Cystostomy)  | \$1,631.27        |
|       | Replacement Of All Or Part Of Ureter By Intestine Segment, Including Intestine Anastomosis   | \$1,118.32        |
|       | Cutaneous Appendico-Vesicostomy  | \$1,110.32        |
|       | Ureterostomy, Transplantation Of Ureter To Skin  | \$955.45          |
|       | Ureterorrhaphy, Suture Of Ureter (Separate Procedure)  | \$768.01          |
|       | Closure Of Ureterocutaneous Fistula  | \$802.49          |
|       | Closure Of Ureterovisceral Fistula (Including Visceral Repair)   | \$999.71          |
|       | Deligation Of Ureter   | \$808.06          |
|       | Laparoscopy, Surgical, Ureterolithotomy  | \$881.11          |
|       | Laparoscopy, Surgical; Ureteroneocystostomy With Cystoscopy And Ureteral Stent Placement   | \$1,394.10        |
|       | Laparoscopy, Surgical; Ureteroneocystostomy Without Cystoscopy And Ureteral Stent Placement  | \$1,153.76        |
|       | Unlisted Laparoscopy Procedure, Ureter   | Price By Report   |
| 33010 | Ureteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | Sy report         |
| 50951 | Service: Office  | \$348.81          |
| 53001 | Urreteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic | ψο 10.01          |
| 50953 | Service; With Ureteral Catheterization, Office   | \$368.68          |
| 23000 | Ureteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | Ψ000.00           |
| 50955 | Service; With Biopsy, Office   | \$392.57          |
| 30000 | Ureteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | \$00 <b>2</b> .01 |
| 50957 | Service; With Fulguration, With Or Without Biopsy, Office  | \$396.17          |
| 22307 | Ureteral Endoscopy Through Established Ureterostomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic  | +000.11           |
| 50961 | Service; With Removal Of Foreign Body Or Calculus, Office  | \$358.21          |
|       |  | +000.21           |
| 50970 | Ureteral Endoscopy Through Ureterotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service;      | \$333.19          |
|       | Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Mid Ureter Level   | \$322.06          |
|       | Ureteral Endoscopy Through Ureterotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service; With | , ===.30          |
| 50974 | Biopsy   | \$424.75          |
|       | Ureteral Endoscopy Through Ureterotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service; With |                   |
| 50976 | Fulguration, With Or Without Biopsy  | \$418.64          |
|       | Ureteral Endoscopy Through Ureterotomy, With Or Without Irrigation, Instillation, Or Ureteropyelography, Exclusive Of Radiologic Service; With |                   |
| 50980 | Removal Of Foreign Body Or Calculus  | \$320.10          |
| 51020 | Cystotomy Or Cystostomy; With Fulguration And/Or Insertion Of Radioactive Material   | \$431.45          |
|       | Cystotomy Or Cystostomy; With Cryosurgical Destruction Of Intravesical Lesion  | \$434.49          |
| 51040 | Cystostomy, Cystotomy With Drainage  | \$297.62          |
|       | Cystotomy, With Insertion Of Ureteral Catheter (Separate Procedure)  | \$459.23          |
| 51050 | Cystolithotomy, Cystotomy With Removal Of Calculus, Without Vesical Neck Resection   | \$431.67          |
|       | Transvesical Ureterolithotomy  | \$533.37          |
|       |  |                   |

| Codo  | Description  | Foo   |
|---|--|---|
|   | Description   Cystotomy, With Calculus Basket Extraction And/Or Ultrasonic Or Electrohydraulic Fragmentation Of Ureteral Calculus  | Fee<br>\$531.08   |
|   | Drainage Of Perivesical Or Prevesical Space Abscess  | \$374.91  |
|   | Aspiration Of Bladder; By Needle   | \$69.70   |
|   | Aspiration Of Bladder; By Trocar Or Intracatheter  | \$151.35  |
|   | Aspiration Of Bladder; With Insertion Of Suprapubic Catheter   | \$168.85  |
|   | Excision Of Urachal Cyst Or Sinus, With Or Without Umbilical Hernia Repair   | \$647.44  |
|   | Cystotomy; For Simple Excision Of Vesical Neck (Separate Procedure)  | \$545.15  |
|   | Cystotomy; For Excision Of Bladder Diverticulum, Single Or Multiple (Separate Procedure)   | \$781.89  |
|   | Cystotomy; For Excision Of Bladder Tumor   | \$702.43  |
|   | Incision, Removal, Or Repair Of Abnormal Drainage Tract From Bladder Into Bowel  | \$710.71  |
|   | Partial Removal Of Bladder, Simple   | \$872.79  |
|   | Partial Removal Of Bladder, Complicated  | \$1,142.77  |
|   | Cystectomy, Partial, With Reimplantation Of Ureter(S) Into Bladder (Ureteroneocystostomy)  | \$1,170.17  |
|   | Complete Removal Of Bladder  | \$1,479.95  |
|   | Complete Removal Of Bladder And Lymph Nodes On Both Sides Of Pelvis  | \$1,647.16  |
|   | Complete Removal Of Bladder With Transplantation Of Urinary Ducts (Ureters)  | \$1,717.70  |
|   |  | . ,   |
| 51585   | Complete Removal Of Bladder With Transplantation Of Urinary Ducts (Ureters) And Removal Of Lymph Nodes On Both Sides Of Pelvis   | \$1,910.33  |
| 51590   | Cystectomy, Complete, With Ureteroileal Conduit Or Sigmoid Bladder, Including Intestine Anastomosis;   | \$1,746.06  |
|   | Cystectomy, Complete, With Ureteroileal Conduit Or Sigmoid Bladder, Including Bowel Anastomosis; With Bilateral Pelvic Lymphadenectomy,  |   |
| 51595   | Including External Iliac, Hypogastric And Obturator Nodes  | \$1,976.40  |
|   | Removal Of Bladder And Lymph Nodes On Both Sides Of Pelvis With Transplantation Of Urinary Ducts (Ureters) To Small And/Or Large Bowel   |   |
| 51596   | With Creation Of Urinary Opening, Open Procedure   | \$2,128.97  |
|   | Removal Of Bladder, Urinary Ducts (Ureters)  | \$2,306.80  |
|   | Injection Procedure For Cystography Or Voiding Urethrocystography  | \$235.14  |
| 51605   | Injection Procedure For X-Ray Imaging Of The Bladder And Bladder Canal (Urethra)   | \$35.03   |
|   | Injection Procedure For Retrograde Urethrocystography  | \$91.57   |
| 51700   | Bladder Irrigation, Simple, Lavage And/Or Instillation   | \$81.07   |
| 51701   | Insertion Of Non-Indwelling Bladder Catheter (Eg, Straight Catheterization For Residual Urine)   | \$46.43   |
| 51702   | Insertion Of Indwelling Bladder Catheter, Simple   | \$65.56   |
| 51703   | Insertion Of Indwelling Bladder Catheter, Complicated  | \$152.88  |
| 51705   | Simple Change Of Bladder Tube  | \$102.04  |
| 51710   | Complicated Change Of Bladder Tube   | \$94.71   |
| 51715   | Injection Of Implant Material Beneath Lining Of Bladder And/Or Bladder Canal (Urethra) Using Endoscope   | \$266.15  |
| 51720   | Instillation Of Anti-Cancer Drug Into Bladder  | \$77.77   |
| 51725   | Simple Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram)   | \$162.73  |
| 51726   | Complex Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram)  | \$294.51  |
| 51727   | Complex Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram) With Bladder Canal (Urethra) Pressure Studies  | \$354.82  |
| 51728   | Complex Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram) With Voiding Pressure Studies  | \$318.01  |
|   | Complex Measurement Of Pressure Of Urine Flow In Bladder (Cystometrogram) With Bladder Canal (Urethra) Pressure And Voiding Pressure   |   |
| 51729   | Studies  | \$343.13  |
| 51736   | Simple Uroflowmetry (Ufr) (Eg, Stop-Watch Flow Rate, Mechanical Uroflowmeter)  | \$13.69   |
| 51741   | Electronic Assessment Of Bladder Emptying  | \$14.19   |
| 51784   | Electromyography Studies (Emg) Of Anal Or Urethral Sphincter, Other Than Needle, Any Technique   | \$66.91   |
| 51785   | Needle Electromyography Studies (Emg) Of Anal Or Urethral Sphincter, Any Technique   | \$314.88  |
| 51792   | Assessment Of Muscle Signal Of Pelvic Nerves   | \$194.86  |
|   |  |   |
| 51797   | Voiding Pressure Studies, Intra-Abdominal (Ie, Rectal, Gastric, Intraperitoneal) (List Separately In Addition To Code For Primary Procedure)   | \$206.02  |
| 51798   | Measurement Of Post-Voiding Residual Urine And/Or Bladder Capacity By Ultrasound, Non-Imaging  | \$11.03   |
|   | Cystoplasty Or Cystourethroplasty, Plastic Operation On Bladder And/Or Vesical Neck (Anterior Y-Plasty, Vesical Fundus Resection), Any   |   |
| 51800   | Procedure, With Or Without Wedge Resection Of Posterior Vesical Neck   | \$943.60  |
| 51820   | Repair Of Bladder, Bladder Canal (Urethra) And Urinary Duct (Ureter)   | \$986.92  |
|   | Anterior Vesicourethropexy, Or Urethropexy (Eg, Marshall-Marchetti-Krantz, Burch); Simple  | \$641.09  |
|   | Anterior Vesicourethropexy, Or Urethropexy (Marshall-Marchetti-Krantz Type); Complicated (Eg, Secondary Repair)  | \$741.56  |
| 51845   | Abdomino-Vaginal Vesical Neck Suspension, With Or Without Endoscopic Control (Eg, Starney, Raz, Modified Pereyra)  | \$532.94  |
| 51860   | Suture Of Wound, Injury, Or Rupture Of The Bladder   | \$786.98  |
| 51865   | Suture Of Wound, Injury, Or Rupture Of Bladder   | \$905.98  |
| 51880   | Closure Of Cystostomy (Separate Procedure)   | \$472.04  |
| 51900   | Repair Of Abnormal Drainage Tract From Bladder Into The Vagina, Abdominal Approach   | \$751.20  |
| 51920   | Closure Of Vesicouterine Fistula;  | \$696.42  |
| 51925   | Closure Of Vesicouterine Fistula; With Hysterectomy  | \$990.22  |
| 51040   | 0.000  | \$1,652.22  |
| 01940   | Closure, Exstrophy Of Bladder  |   |
|   | Closure, Exstrophy Of Bladder Enterocystoplasty, Including Intestinal Anastomosis  | \$1,257.03  |
| 51960   |  |   |
| 51960<br>51980  | Enterocystoplasty, Including Intestinal Anastomosis  | \$1,257.03  |
| 51960<br>51980<br>51990   | Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy  | \$1,257.03<br>\$745.31  |
| 51960<br>51980<br>51990<br>51992  | Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence   | \$1,257.03<br>\$745.31<br>\$678.88  |
| 51960<br>51980<br>51990<br>51992<br>51999   | Enterocystoplasty, Including Intestinal Anastomosis Cutaneous Vesicostomy Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51  |
| 51960<br>51980<br>51990<br>51992<br>51999<br>52000  | Enterocystoplasty, Including Intestinal Anastomosis  Cutaneous Vesicostomy  Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence  Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  Unlisted Laparoscopy Procedure, Bladder  | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51<br>Price By Report   |
| 51960<br>51980<br>51990<br>51992<br>51999<br>52000<br>52001                                     | Enterocystoplasty, Including Intestinal Anastomosis  Cutaneous Vesicostomy  Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence  Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  Unlisted Laparoscopy Procedure, Bladder  Cystourethroscopy (Separate Procedure), Office;   | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51<br>Price By Report<br>\$239.24   |
| 51960<br>51980<br>51990<br>51992<br>51999<br>52000<br>52001                                     | Enterocystoplasty, Including Intestinal Anastomosis  Cutaneous Vesicostomy  Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence  Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  Unlisted Laparoscopy Procedure, Bladder  Cystourethroscopy (Separate Procedure), Office;  Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots   | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51<br>Price By Report<br>\$239.24<br>\$430.15   |
| 51960<br>51980<br>51990<br>51992<br>51999<br>52000<br>52001<br>52005                            | Enterocystoplasty, Including Intestinal Anastomosis  Cutaneous Vesicostomy  Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence  Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  Unlisted Laparoscopy Procedure, Bladder  Cystourethroscopy (Separate Procedure), Office;  Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots   | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51<br>Price By Report<br>\$239.24<br>\$430.15   |
| 51960<br>51980<br>51990<br>51992<br>51999<br>52000<br>52001<br>52005                            | Enterocystoplasty, Including Intestinal Anastomosis  Cutaneous Vesicostomy  Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence  Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  Unlisted Laparoscopy Procedure, Bladder  Cystourethroscopy (Separate Procedure), Office;  Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots  Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Bladder Area   | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51<br>Price By Report<br>\$239.24<br>\$430.15<br>\$345.59                                     |
| 51960<br>51980<br>51990<br>51992<br>51999<br>52000<br>52001<br>52005<br>52007<br>52010          | Enterocystoplasty, Including Intestinal Anastomosis  Cutaneous Vesicostomy  Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence  Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  Unlisted Laparoscopy Procedure, Bladder  Cystourethroscopy (Separate Procedure), Office;  Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots  Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Bladder Area  Cystourethroscopy (Separate Procedure), Office; With Ureteral Catheterization And Brush Biopsy Of Ureter Or Renal Pelvis For Cytology  | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51<br>Price By Report<br>\$239.24<br>\$430.15<br>\$345.59<br>\$442.09<br>\$371.23             |
| 51960<br>51980<br>51990<br>51992<br>51999<br>52000<br>52001<br>52005<br>52007<br>52010<br>52204 | Enterocystoplasty, Including Intestinal Anastomosis  Cutaneous Vesicostomy  Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence  Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  Unlisted Laparoscopy Procedure, Bladder  Cystourethroscopy (Separate Procedure), Office;  Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots  Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Bladder Area  Cystourethroscopy (Separate Procedure), Office; With Ureteral Catheterization And Brush Biopsy Of Ureter Or Renal Pelvis For Cytology  Cystourethroscopy (Separate Procedure), Office; With Ejaculatory Duct Catheterization   | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51<br>Price By Report<br>\$239.24<br>\$430.15<br>\$345.59<br>\$442.09<br>\$371.23<br>\$271.66 |
| 51960<br>51980<br>51990<br>51992<br>51999<br>52000<br>52001<br>52005<br>52007<br>52010<br>52204 | Enterocystoplasty, Including Intestinal Anastomosis  Cutaneous Vesicostomy  Laparoscopy, Surgical; Urethral Suspension For Stress Incontinence  Laparoscopy, Surgical; Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)  Unlisted Laparoscopy Procedure, Bladder  Cystourethroscopy (Separate Procedure), Office;  Cystourethroscopy With Irrigation And Evacuation Of Multiple Obstructing Clots  Insertion Of Catheter Into Urinary Duct (Ureter) Using An Endoscope Through The Bladder Area  Cystourethroscopy (Separate Procedure), Office; With Ureteral Catheterization And Brush Biopsy Of Ureter Or Renal Pelvis For Cytology  Cystourethroscopy (Separate Procedure), Office; With Ejaculatory Duct Catheterization  Cystourethroscopy, With Biopsy; Office | \$1,257.03<br>\$745.31<br>\$678.88<br>\$758.51<br>Price By Report<br>\$239.24<br>\$430.15<br>\$345.59<br>\$442.09<br>\$371.23             |

| Code Description Cystourethroscopy, With Fulguration (Including Cryosurgery Or Laser Surgery) And/Or Resection Of; Small Bladder Tumor(S) (0.5 Up To 2.0 52234 Cm)  52234 Cm) 52235 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Medium Bladder Tumor(S) (2.0 To 5.0 Cm) 52240 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Large Bladder Tumor(S) (2.0 To 5.0 Cm) 52250 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52271 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy, With Direct Vision Internal Urethrotomy Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Insertion Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Insertion Of Permanent Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureteroce | \$245.79<br>\$287.98<br>\$391.43<br>\$215.22<br>\$210.51<br>\$267.05<br>\$410.06<br>\$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62                         |
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| 52234 Cm) 52235 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Medium Bladder Tumor(S) (2.0 To 5.0 Cm) 52240 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Large Bladder Tumor(S) 52250 Cystourethroscopy With Insertion Of Radioactive Substance, With Or Without Biopsy Or Fulguration 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52265 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52276 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy; With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52200 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope  | \$287.98<br>\$391.43<br>\$215.22<br>\$210.51<br>\$267.05<br>\$410.06<br>\$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25 |
| 52235 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Medium Bladder Tumor(S) (2.0 To 5.0 Cm) 52240 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Large Bladder Tumor(S) 52250 Cystourethroscopy, With Insertion Of Radioactive Substance, With Or Without Biopsy Or Fulguration 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincter or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection (S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$287.98<br>\$391.43<br>\$215.22<br>\$210.51<br>\$267.05<br>\$410.06<br>\$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25 |
| 52240 Cystourethroscopy, With Fulguration (Including Cryosurgery) And/Or Resection Of; Large Bladder Tumor(S) 52250 Cystourethroscopy With Insertion Of Radioactive Substance, With Or Without Biopsy Or Fulguration 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52261 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52271 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52272 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Crthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$391.43<br>\$215.22<br>\$210.51<br>\$267.05<br>\$410.06<br>\$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25             |
| 52250 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52298 Cystourethroscopy, With Ureteral Meatotomy, Uniteral Of The Bladder 52299 Cystourethroscopy; With Ureteral Meatotomy, Uniteral Of The Bladder 52200 Cystourethroscopy; With Ureteral Meatotomy, Uniteral Of Bilateral 52200 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$215.22<br>\$210.51<br>\$267.05<br>\$410.06<br>\$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25                         |
| 52260 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; General Or Conduction (Spinal) Anesthesia 52265 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$210.51<br>\$267.05<br>\$410.06<br>\$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25                                     |
| 52265 Cystourethroscopy, With Dilation Of Bladder For Interstitial Cystitis; Local Anesthesia 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female 52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$267.05<br>\$410.06<br>\$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| 52270 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Female  52275 Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male  52276 Cystourethroscopy With Direct Vision Internal Urethrotomy  52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy)  Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection  52281 Procedure For Cystography, Male Or Female  52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent  52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office  52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Section Of Systourethroscopy, With Injection(S) For Chemodenervation Of The Bladder  52287 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral  52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral  52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope  52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope  52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$410.06<br>\$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| Incision Of The Bladder Canal (Urethra) Using An Endoscope, Male  52276 Cystourethroscopy With Direct Vision Internal Urethrotomy  52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy)  Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection  52281 Procedure For Cystography, Male Or Female  52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent  52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office  52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral Septal Pibrosis, Internal Urethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral Septal Pibrosis, Ureterocele(S), Using An Endoscope Septal Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope Septal Septal Pibrosis Or Multiple  | \$525.02<br>\$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| 52276 Cystourethroscopy With Direct Vision Internal Urethrotomy 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy) Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$264.10<br>\$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| 52277 Cystourethroscopy, With Resection Of External Sphincter (Sphincterotomy)  Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection  52281 Procedure For Cystography, Male Or Female  52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent  52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office  52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation,  52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral  52287 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral  52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral  52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope  52301 Removal Or Destruction Of Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$290.51<br>\$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| Cystourethroscopy, With Calibration And/Or Dilation Of Urethral Stricture Or Stenosis, With Or Without Meatotomy, With Or Without Injection 52281 Procedure For Cystography, Male Or Female 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Ureteral Meatotomy, Unilateral Or Bilateral 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Crthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$351.54<br>\$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| 52281 Procedure For Cystography, Male Or Female  52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent  52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office  52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation,  52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral  52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder  52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral  52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope  52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope  52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| 52282 Cystourethroscopy, With Insertion Of Permanent Urethral Stent 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office 52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$301.97<br>\$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| 52283 Cystourethroscopy, With Steroid Injection Into Stricture; Office  52284 Drug Delivery Using A Drug-Coated Balloon For Male Treatment Of Urethral Stricture Using An Endoscope  Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral  52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder  52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral  52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope  52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope  52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$248.92<br>\$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral  52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder  52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral  52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Crthotopic Ureterocele(S), Using An Endoscope  52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope  52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$2,358.62<br>\$272.53<br>\$406.16<br>\$219.25   |
| Cystourethroscopy For Treatment Of The Female Urethral Syndrome With Any Or All Of The Following: Urethral Meatotomy, Urethral Dilation, 52285 Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$272.53<br>\$406.16<br>\$219.25   |
| 52285   Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral     52287   Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder     52290   Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral     52300   Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope     52301   Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope     52305   Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$406.16<br>\$219.25   |
| 52285   Internal Urethrotomy, Lysis Of Urethrovaginal Septal Fibrosis, Lateral Incisions Of The Bladder Neck, And Fulguration Of Urethral     52287   Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder     52290   Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral     52300   Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope     52301   Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope     52305   Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$406.16<br>\$219.25   |
| 52287 Cystourethroscopy, With Injection(S) For Chemodenervation Of The Bladder 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$406.16<br>\$219.25   |
| 52290 Cystourethroscopy; With Ureteral Meatotomy, Unilateral Or Bilateral 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$219.25   |
| 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | \$219.25   |
| 52300 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Orthotopic Ureterocele(S), Using An Endoscope 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  |  |
| 52301 Removal Or Destruction Of Abnormal Pouches Of Urinary Duct (Ureter) At Bladder, Ectopic Ureterocele(S), Using An Endoscope 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple  | ய∠ப்⊓≏   |
| 52305 Cystourethroscopy; With Incision Or Resection Of Orifice Of Bladder Diverticulum, Single Or Multiple   | \$260.49   |
|  | \$250.49   |
| DZBTO promovar Or Foreign Dody, Stone, Or Stent From Diaducer Canal (Orethia) Or Diaducer Osing All Effective  | \$358.35   |
|  |  |
| 52315 Complicated Removal Of Foreign Body, Stone, Or Stent From Bladder Canal (Urethra) Or Bladder Using An Endoscope  | \$386.20   |
| 52317 Crushing, Fragmenting, And Removal Of (Less Than 2.5 Centimeters) Bladder Stone  | \$654.07   |
| 52318 Crushing, Fragmenting, And Removal Of Bladder Stones, Complicated Or Larger Than 2.5 Centimeters   | \$472.31   |
| 52320 Cystourethroscopy (Including Ureteral Catheterization); With Removal Of Ureteral Calculus  | \$246.15   |
| Cystourethroscopy (Including Ureteral Catheterization); With Fragmentation Of Ureteral Calculus (Eg, Ultrasonic Or Electro-Hydraulic   |  |
| 52325 Technique)   | \$319.52   |
| 52327 Cystourethroscopy (Including Ureteral Catheterization); With Subureteric Injection Of Implant Material   | \$261.71   |
| 52330 Cystourethroscopy; With Manipulation, Without Removal Of Ureteral Calculus   | \$586.96   |
| 52332 Cystourethroscopy, With Insertion Of Indwelling Ureteral Stent (Eg, Gibbons Or Double-J Type)  | \$436.33   |
| 52334 Cystourethroscopy With Insertion Of Ureteral Guide Wire Through Kidney To Establish A Percutaneous Nephrostomy, Retrograde   | \$164.46   |
| 52341 Endoscope Of The Bladder And Urethra Excluding The Ureter To Treat A Stricture Of Ureter   | \$255.15   |
| 52342 Cystourethroscopy; With Treatment Of Ureteropelvic Junction Stricture (Eg, Balloon Dilation, Laser, Electrocautery, And Incision)  | \$277.75   |
| 52343 Endoscope Of The Bladder And Urethra Excluding The Ureter To Treat A Stricture Within The Kidney   | \$309.28   |
| 52344 Endoscope Of The Bladder, Urethra And Ureter To Treat A Stricture Of Ureter  | \$332.09   |
| 52345 Endoscope Of The Bladder, Urethra And Ureter To Treat A Stricture Of The Upper Attachment Of The Ureter To The Kidney  | \$354.24   |
| 52346 Endoscope Of The Bladder, Urethra And Ureter To Treat A Stricture Within The Kidney  | \$401.16   |
| 52351 Diagnostic Examination Of The Bladder, Bladder Canal (Urethra), And Urinary Duct (Ureter) Or Kidney Using An Endoscope   | \$302.17   |
| 32331 Diagnostic Examination of the bladder, bladder canal (oretina), And officially Duck (oreter) of Nurrey Using Art Endoscope   | φ302.17  |
| FOOTO Chataurethreecony, With Hesterocopy, And/Or Displaceony, With Removal Or Manipulation Of Calculus / Iretard Catheterization In Included)   | <b>#252.70</b>   |
| 52352 Cystourethroscopy, With Ureteroscopy And/Or Pyeloscopy; With Removal Or Manipulation Of Calculus (Ureteral Catheterization Is Included)  | \$353.70   |
| 52353 Cystourethroscopy, With Ureteroscopy And/Or Pyeloscopy; With Lithotripsy (Ureteral Catheterization Is Included)  | \$391.43   |
| 52354 Cystourethroscopy, With Ureteroscopy And/Or Pyeloscopy; With Biopsy And/Or Fulguration Of Ureteral Or Renal Pelvic Lesion  | \$416.40   |
| 52355 Cystourethroscopy, With Ureteroscopy And/Or Pyeloscopy; With Resection Of Ureteral Or Renal Pelvic Tumor   | \$419.51   |
| 52356 Crushing Of Stone In Urinary Duct (Ureter) With Stent Using An Endoscope   | \$414.95   |
| 52400 Incision, Destruction, Or Removal Of Congenital Bladder And Bladder Canal (Urethra) Defects Using An Endoscope   | \$433.34   |
| 52402 Incision Or Removal Of Ejaculatory Ducts Using An Endoscope, Male  | \$238.90   |
| 52441 Insertion Of Implant In Bladder Canal (Urethra) Within Prostate Gland Using An Endoscope, Single Implant   | \$1,384.44   |
| 52442 Insertion Of Implant In Bladder Canal (Urethra) Within Prostate Gland Using An Endoscope, Each Additional Implant  | \$977.75   |
| 52450 Transurethral Incision Of Prostate   | \$434.18   |
| 52500 Transurethral Resection Of Bladder Neck (Separate Procedure)   | \$450.09   |
| Transurethral Electrosurgical Resection Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy,  |  |
| The second of th | <b>M</b> 700 cc  |
|  | \$736.83   |
| 52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  | \$736.83   |
| 52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  | \$736.83   |
| 52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete  |  |
| 52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)   | \$412.68   |
| 52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Of Postoperative Bladder Neck Contracture   |  |
| 52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral  | \$412.68<br>\$295.55   |
| 52601 Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Of Postoperative Bladder Neck Contracture   | \$412.68   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  | \$412.68<br>\$295.55   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Easer Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  | \$412.68<br>\$295.55<br>\$1,527.60   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  52630 Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  | \$412.68<br>\$295.55   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)   | \$412.68<br>\$295.55<br>\$1,527.60   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy,  | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In  | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Easer Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In  Transurethral Drainage Of Prostatic Abscess  | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04<br>\$404.28   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Easer Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Section of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Transurethral Drainage Of Prostatic Abscess)  Transurethral Drainage Of Prostatic Abscess  Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra  | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04<br>\$404.28<br>\$136.16   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  22630 (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  252640 Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral  252647 Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral  252648 Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy,  252649 Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In  252700 Transurethral Drainage Of Prostatic Abscess  3000 Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra  53010 Urethrotomy Or Urethrostomy, External (Separate Procedure); Perineal Urethra, External  | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04<br>\$404.28   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Easer Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In  52649 Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In  52700 Transurethral Drainage Of Prostatic Abscess  Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra   | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04<br>\$404.28<br>\$136.16   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  52630 (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Section of Prostate Are In Drainage Of Prostatic Abscess)  Transurethral Drainage Of Prostatic Abscess  Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra, External  | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04<br>\$404.28<br>\$136.16<br>\$272.98   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  52640 Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In Section Of Prostate Are In Urethrotomy Or Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra External  53010 Urethrotomy Or Urethrostomy, External (Separate Procedure), Except Infant; Office   | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04<br>\$404.28<br>\$136.16<br>\$272.98<br>\$97.13  |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  52640 Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In  52700 Transurethral Drainage Of Prostatic Abscess  53000 Urethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra  53010 Urethrotomy Or Urethrostomy, External (Separate Procedure); Perineal Urethra, External  53020 Meatotomy, Cutting Of Meatus (Separate Procedure), Except Infant; Office   | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04<br>\$404.28<br>\$136.16<br>\$272.98<br>\$97.13<br>\$61.86<br>\$359.31   |
| Transurethral Resection; Residual Or Regrowth Of Obstructive Prostate Tissue Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included)  Transurethral Resection; Of Postoperative Bladder Neck Contracture  Laser Coagulation Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, And Internal Urethrotomy Are Included If Performed)  Laser Vaporization Of Prostate, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are Included If Performed)  Laser Enucleation Of The Prostate With Morcellation, Including Control Of Postoperative Bleeding, Complete (Vasectomy, Meatotomy, Society Cystourethroscopy, Urethral Calibration And/Or Dilation, Internal Urethrotomy And Transurethral Resection Of Prostate Are In Society Of Prostate Are In Society Of Prostate Are In Society Of Prostatic Abscess  Transurethral Drainage Of Prostatic Abscess  Diethrotomy Or Urethrostomy, External (Separate Procedure); Pendulous Urethra  Society Of Meatotomy, Cutting Of Meatus (Separate Procedure), Except Infant; Office  Meatotomy, Cutting Of Meatus (Separate Procedure), Except Infant; Office  Diation Of Deep Periurethral Abscess   | \$412.68<br>\$295.55<br>\$1,527.60<br>\$1,573.87<br>\$753.04<br>\$404.28<br>\$136.16<br>\$272.98<br>\$97.13<br>\$61.86   |

|        | Description   | Fee             |
|--------|---|-----------------|
|        | Biopsy Of Urethra   | \$144.70        |
|        | Removal Of Bladder And Bladder Canal (Urethra), Female  | \$707.46        |
|        | Removal Of Bladder And Bladder Canal (Urethra), Male  | \$843.56        |
|        | Excision Or Fulguration Of Carcinoma Of Urethra   | \$413.44        |
|        | Excision Of Urethral Diverticulum (Separate Procedure); Female  | \$557.10        |
|        | Excision Of Urethral Diverticulum (Separate Procedure); Male  | \$598.83        |
|        | Marsupialization Of Urethral Diverticulum, Male Or Female   | \$389.45        |
|        | Removal Of Seminal Fluid Gland  | \$363.24        |
|        | Excision Or Fulguration; Urethral Polyp(S), Distal Urethra  | \$191.27        |
|        | Excision Or Fulguration; Urethral Caruncle  | \$200.08        |
|        | Removal Or Destruction Of Bladder Canal (Urethra) Mucous Glands   | \$195.85        |
|        | Excision Or Fulguration; Urethral Prolapse  | \$239.99        |
|        | Repair Of Bladder Canal (Urethra) For Abnormal Drainage Tract, Pouching, Or Narrowing   | \$728.94        |
|        | Urethroplasty; Second Stage (Formation Of Urethra), Including Urinary Diversion   | \$795.07        |
| 53410  | Reconstruction Of Bladder Canal (Urethra), Male   | \$891.57        |
| 53415  | Urethroplasty, Transpubic, One Stage, For Reconstruction Or Repair Of Prostatic Or Membranous Urethra   | \$1,026.56      |
| 53420  | Reconstruction Or Repair Of Prostatic Or Membranous Bladder Canal (Urethra), First Stage  | \$765.84        |
| 53425  | Reconstruction Or Repair Of Prostatic Or Membranous Bladder Canal (Urethra), Second Stage   | \$851.73        |
| 53430  | Reconstruction Of Bladder Canal (Urethra), Female   | \$882.40        |
| 53431  | Repair Of Bladder Canal (Urethra) And/Or Lower Bladder For Incontinence   | \$1,046.52      |
|        | Sling Operation For Correction Of Male Urinary Incontinence (Eg, Fascia Or Synthetic)   | \$686.49        |
|        | Removal Or Revision Of Sling For Male Urinary Incontinence (Eg, Fascia Or Synthetic)  | \$717.45        |
|        | Insertion Of Tandem Cuff (Dual Cuff)  | \$723.17        |
|        | Insertion Of Inflatable Urethral/Bladder Neck Sphincter, Including Placement Of Pump, Reservoir, And Cuff   | \$691.15        |
|        | Removal Of Inflatable Urethral/Bladder Neck Sphincter, Including Pump, Reservoir, And Cuff  | \$587.94        |
| 30 170 | and a comment of the | Ψ0.1.34         |
| 53447  | Removal And Replacement Of Inflatable Urethral/Bladder Neck Sphincter Including Pump, Reservoir, And Cuff At The Same Operative Session   | \$735.82        |
|        | Removal And Replacement of Inflatable Bladder Canal (Urethra) or Bladder Neck Sphincter, Through An Infected Field  | \$1,159.04      |
|        | Repair Of Inflatable Bladder Canal (Urethra) Or Bladder Neck Sphincter, Including Pump, Reservoir, And Cuff   | \$560.54        |
|        | Urethral Meatoplasty, With Mucosal Advancement  | \$352.84        |
|        | Insertion Of Adjustable Balloon Continence Device On Both Sides Of Urethra Using Imaging Guidance   | Price By Report |
|        | Insertion of Adjustable Balloon Continence Device on Both Sides of Urethra Using Imaging Guidance   |                 |
|        | ,   | Price By Report |
|        | Removal Of Adjustable Balloon Continence Device From Beside Urethra   | Price By Report |
|        | Adjustment Of Fluid Volume In Adjustable Balloon Continence Device Beside Urethra   | Price By Report |
|        | Urethral Meatoplasty, With Partial Excision Of Distal Urethral Segment (Richardson Type Procedure)  | \$419.13        |
|        | Urethrolysis, Transvaginal, Secondary, Open, Including Cystourethroscopy (Eg, Postsurgical Obstruction, Scarring)   | \$680.60        |
|        | Suture Of Bladder Canal (Urethra) Wound Or Injury, Female   | \$444.87        |
|        | Suture Of Bladder Canal (Urethra) Wound Or Injury, Penis  | \$444.55        |
|        | Urethrorrhaphy, Suture Of Urethral Wound Or Injury; Perineal  | \$578.22        |
|        | Suture Of Bladder Canal (Urethra) Wound Or Injury, Prostate   | \$724.91        |
|        | Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) To Skin, Male   | \$586.57        |
|        | Dilation Of Urethral Stricture By Passage Of Sound Or Urethral Dilator, Male; Initial   | \$82.36         |
|        | Dilation Of Urethral Stricture By Passage Of Sound Or Urethral Dilator, Male; Subsequent  | \$58.23         |
| 53605  | Dilation Of Narrowing Of Bladder Canal (Urethra) Under General Or Spinal Anesthesia, Male   | \$57.51         |
| 53620  | Dilation Of Urethral Stricture By Passage Of Filiform And Follower, Male; Initial   | \$164.48        |
| 53621  | Dilation Of Urethral Stricture By Passage Of Filiform And Follower, Male; Subsequent  | \$145.23        |
| 53660  | Dilation Of Bladder Canal (Urethra), Female, Initial  | \$66.99         |
| 53661  | Dilation Of Bladder Canal (Urethra), Female, Subsequent   | \$69.70         |
| 53665  | Dilation Of Bladder Canal (Urethra) Under General Or Spinal Anesthesia, Female  | \$34.49         |
| 53850  | Destruction Of Prostate Tissue Through Bladder Canal (Urethra); By Microwave  | \$1,411.64      |
|        | Destruction Of Prostate Tissue Through Bladder Canal (Urethra); By Radiofrequency   | \$1,375.15      |
|        | Destruction Of Prostate Tissue Accessed Through Urethra Using Radiofrequency Generated Water Vapor Heat Therapy   | \$1,856.79      |
|        | Insertion Of A Temporary Bladder Canal (Urethra) Stent, Male, Using An Endoscope  | \$659.93        |
|        | Transurethral Radiofrequency Micro-Remodeling Of The Female Bladder Neck And Proximal Urethra For Stress Urinary Incontinence   | \$2,416.94      |
|        | Unlisted Procedure, Urinary System  | Price By Report |
|        | Slitting Of Prepuce, Dorsal Or Lateral, (Separate Procedure); Newborn   | \$154.34        |
|        | Slitting Of Prepuce, Dorsal Or Lateral, (Separate Procedure); Except Newborn  | \$186.63        |
|        | Incision And Drainage Of Penis, Deep  | \$278.04        |
|        | Chemical Destruction Of Growths Of Penis  | \$98.61         |
|        | Destruction Of Condylomata, Penis, Multiple; Electrodesiccation   | \$128.57        |
|        | Destruction Of Lesion(S), Penis (Eg, Condyloma, Papilloma, Molluscum Contagiosum, Herpetic Vesicle), Simple; Cryosurgery  | \$99.09         |
|        | Destruction Of Lesion(S), Penis (Eg, Condyloma, Papilloma, Molluscum Contagiosum, Herpetic Vesicle), Simple; Laser Surgery  | \$133.71        |
|        | Destruction Of Condylomata, Penis, Multiple; Surgical Excision  |                 |
| 54060  | Destruction Of Condylomata, Penis, Multiple; Surgical Excision  Destruction Of Lesion(S), Penis (Eg, Condyloma, Papilloma, Molluscum Contagiosum, Herpetic Vesicle), Extensive (Eg, Laser Surgery,  | \$184.88        |
| E400F  |   | <b>0004.00</b>  |
|        | Electrosurgery, Cryosurgery, Chemosurgery)  Bioney Of Penis As A Sengrate Procedure   | \$201.33        |
|        | Biopsy Of Penis As A Separate Procedure   | \$192.60        |
|        | Biopsy Of The Deep Structures Of The Penis  | \$258.10        |
|        | Excision Of Penile Plaque (Peyronie Disease)  | \$572.89        |
|        | Excision Of Penile Plaque (Peyronie Disease); With Graft To 5 Cm In Length  | \$727.63        |
|        | Excision Of Penile Plaque (Peyronie Disease); With Graft Greater Than 5 Cm In Length  | \$852.81        |
|        | Removal Foreign Body From Deep Penile Tissue (Eg, Plastic Implant)  | \$421.60        |
|        | Amputation Of Penis; Partial  | \$577.58        |
|        | Amputation Of Penis; Complete   | \$746.77        |
| 54130  | Amputation Of Penis, Radical; With Bilateral Inguinofemoral Lymphadenectomy   | \$1,084.07      |
|        |   |                 |
|        | Amputation Of Penis, Radical; In Continuity With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes  | \$1,369.46      |
| 54150  | Circumcision, Using Clamp / Other   | \$154.68        |
|        |   |                 |

| Section   Removal Of Forestein, Festern Closer France 76 bays O'Age   Section   Sect  |         |  |                        |
|---|---------|--|------------------------|
| Section   Removal Of Forestein, Festern Closer France 76 bays O'Age   Section   Sect  |         |  |                        |
| 5918 (Separt Increase For Pennishers of Chromosom Africanoma  5928 (1986) (Repair Increase) (Composite Commonoma  5928 (1986) (Repair Increase) (Prenishers of Prenishers of Prenishers of Pennishers   |         |  | \$230.40               |
| Set   Separa Pricomplete Circumcision   |         |  | \$200.53               |
| Settle   Fernisatorry Of Penis  |         | ,  | \$268.12               |
| Section   Section Prepared Description of Prepared Description of Corporal Coverage Description of Coverage D  |         | · ·  | \$178.49               |
| 54200 Projection Procedure For Deprover Disease; With Surgical Exposure Of Plaques 54200 Projection Corpora Cavernoscy or Freiphor 54220 Projection Corporation Co  |         |  | \$108.63               |
| Sezo   Imperion Of Corpora Covernosa For Prappine   |         |  | \$487.53               |
| Seazo   Imperior Procedure For Corpora Covernoscopreply   |         |  | \$205.32               |
| Section   Description   Description   Section   Sectio  |         |  | \$98.41                |
| Section   Plants Operation Of Penns for Straightening Of Choridee (Eg. 1-typospadias), With Of Without Mobilization Of Urethra;   S935  |         | , , , ,  | \$131.58               |
| Plasto Operation of Pens For Straightening Of Chordree (Eg. Hypospadas), With Of Vithinout Mobilization of Unterhite  Floration of Characteristics of Control of Chronic Control of Chronic Characteristics (Chronic Characteristics)  Floration (Chronic Characteristics)  Floration (Chronic Chronic  | 54235   | Injection Of Corpora Cavernosa With Pharmacologic Agent(S) (Eg, Papaverine, Phentolamine, Etc)   | \$78.44                |
| Paisic Operation On Penes For Correction Of Chordree OF For First Stage Phopospadies Repair With Or Without Transplantation Of Prepuse 54308 Repair Of Urmary Outet of Penes At Underside Of Penis, Stage 2 Less Than 3 Cm.  \$7545 States 1 Command Character States 1 C   | 54240   | Penile Plethysmography   | \$97.86                |
| 5930 Repair Of Univary Outlet Of Penis At Underside Of Penis, Stage 2 Less Than 3 Cm 5955 59312 Repair Of Univary Outlet Of Penis At Underside Of Penis, Stage 2 Creater Than 3 Cm Viertropolisty For Second Stepp (hospeadiss Repair Or Clording) Viertropolisty For Second Stepp (hospeadiss Repair Or Repairs) 5945 594510 Viertropolisty For Third Stage Hypospadiss Repair (To Relaxes) Proposition (For Third Stage Ceol Repair) 594510 Viertropolisty For Third Stage Hypospadiss Repair (With Or Without Chordee Or Circumosion), With Urethroplasty By Local Skin Flaps (Fig. Flip-Flap, Stage Penis Peni  | 54300   | Plastic Operation Of Penis For Straightening Of Chordee (Eg, Hypospadias), With Or Without Mobilization Of Urethra;  | \$638.41               |
| 54312 Repair Of Unitrary Outet of Preins At Underside Of Preins, Stage 2 Less Than 3 Cm 54312 Repair Of Unitrary Outet of Preins At Underside Of Preins, Stage 2 Center Than 3 Cm 5474 Unterhoplasty For Second Stage Hypospadias Repair (Including Unitrary Diversion) With Free Skin Graft Obtained From Site Other Than 5474 (Seintable) 54312 Unterhoplasty For Second Stage Hypospadias Repair (Including Unitrary Diversion) With Free Skin Graft Obtained From Site Other Than 54013 (Unterhoplasty) For Third Stage (Hypospadias Repair (Including Unitrary Diversion) With Free Skin Graft Debtaired From Site Other Than 54013 (Unterhoplasty) For Third Stage (Propospadias Repair (Including Unitrary Outer At Underside Of Repair) 54024 Preputed Play) 64024 Preputed Play) 64025 Debtaired Hypospadias Repair (With O' Without Chordee Of Circumcisson); With Urethooplasty By Local Skin Flaps (Eg. Flip-Flag), 64032 Proputed Play) 64032 Repair O' Univery Outer At Underside Of Head O' Penis With Local Skin Flaps, Skin Graft Patch, And O' Island Play 64032 Repair O' Univery Outer At Underside O' Head O' Penis With Local Skin Flaps, Skin Graft Patch, And O' Island Play 64032 Repair O' Univery Outer At Underside O' Head O' Penis With Local Skin Flaps, Skin Graft Patch, And O' Island Play 64032 Prosonal Repair O' Univery Outer At Underside O' Head O' Penis With Local Skin Flaps, Skin Graft Play 64032 Prosonal Repair O' Univery Outer At Universide O' Head O' Penis With Local Skin Flaps, Skin Graft Debtair And Skin Flaps 64032 Prosonal Repair O' Univery Outer O' Penis Complication O' Skin Graft O' Flap 64033 Prosonal Charles O' Univers Outer O' Penis With Skin Graft O' Flap, Stantave 64034 Repair O' Univery Outer O' Penis With Skin Graft O' Flap, Stantave 6403 Plastic Operation O' Penis With Skin Graft O' Flap, Stantave 6403 Plastic Operation O' Penis With Skin Graft O' Flap, Stantave 6404 Plastic O' Univery Outer O' Penis With Skin Graft O' Flap, Stantave 6404 Plastic O' Univery Outer O' Penis With Skin Graft O' Flap, Stantave 6404 Plastic O' U  |         | Plastic Operation On Penis For Correction Of Chordee Or For First Stage Hypospadias Repair With Or Without Transplantation Of Prepuce  |                        |
| Seption   Common   Counted Of Penis & Hunderside Of Penis & Stage 2 Greater Than 3 Cm   Unterhypotaty For Second Stage Physopeadias Repair (Including Uniterry) Oversion / With Free Skin Graft Obtained From Ste Other Than   Seption   Control   Counter   Seption   Counter   Counter   Seption   S  |         |  | \$758.05               |
| Untertroplasty For Second Stage Hypospadias Repair (Including Urinary Diversion) With Free Skin Grill Obtained From Ste Other Than 63136 Gentiles (Vertiroplasty For Third Stage Hypospadias Repair To Reliase Penis From Scrotum (Eg., Third Stage Cecil Repair)  54322 Repair Of Urinary Quilet A Underside Of Penis Simple, Relocation, Stage 1  64322 Repair Of Urinary Outed A Underside Of Penis Simple, Relocation, Stage 1  64328 Proteinal Repair Of Urinary Outed A Underside Of Penis With Load Skin Flage Stage Stage Stage Of Penis Simple Stage Stag  |         |  | \$653.75               |
| Season  | 54312   |  | \$746.06               |
| Settle   Deterhoplesty For Timed Stage Hypospadiae Repair To Release Penis From Scrotum (Eg., Third Stage Ceal Repair)   Settle  |         |  |                        |
| Sasta   Paper of Urinary Outlet At Undersated Of Penels Simple, Relocation, Stage 1   Sasta   Paper Speak Repair (With Ort Without Chorder of Circumcision); With Urethropisety By Local Skin Flaps (Eg. Flip-Flap, 54324   Preputati Flap)   Sasta   Preputati Flap   Sasta   Preputati Flap   Sasta   Preputation   Preputation   Sasta   Preputation   Preputation   Sasta   Preputation   Preputation   Sasta   Preputation   Preputatio  |         |  | \$904.98               |
| One Stage Distal Phypospadias Repair (With Or Without Chordee Or Circumcision); With Urethroplasty By Local Skin Flaps (Ep. Flip-Flap, \$978- 54328 (Playards) (Playar   |         |  | \$649.81               |
| Section   Propulation   Prop  | 54322   |  | \$831.03               |
| on Stage Distal Phycospadias Repair (With Or Without, Chrodee Or Circumsionn); With Urethropiasty By Local Skin Flaps And Mobilization Of 54328 (Ploratin Repair Of Urinary) Outlet At Underside Of Head of Penis With Local Skin Flaps, Skin Graft Patch, And/Or Island Flap \$855. 54328 (Proximal Repair Of Urinary) Outlet Detween Thights In Male, With Skin Graft Tube And/Or Island Flap \$815. 54339 (Proximal Repair Of Urinary) Outlet Otherwen Thights In Male, With Skin Graft Tube And/Or Island Flap \$1.00. 54340 (Repair Of Urinary) Outlet Othersed Of Penis, Simple With Stuppical Revision \$825. 54340 (Repair Of Urinary) Outlet Of Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis With Skin Graft Or Flap, Secondary Revision Of Pinis Penis Without Incontinence \$722. 54306 (Plastic Operation On Penis Pro Correct Angulation \$7336) 54306 (Plastic Operation On Penis Pro Correct Angulation \$7336) 54306 (Plastic Operation On Penis Pro Correct Angulation \$7336) 54306 (Plastic Operation On Penis Pro Epopadias Obstal To External Sphincter; With Exstrophy Of Bladder \$11,225. 54400 (Insertion Of Penis Prostinesis Inflatable (Self Contained) \$460 (     | E 422.4 |  | ¢079.07                |
| 64328 (Pepair Of Urinary Outlet At Underside Of Head Of Penis With Local Skin Flaps, Skin Graft Patch, And/Or Island Flap         \$85.           64328 (Pepair Of Urinary Outlet At Underside Of Base of Penis With Skin Graft Tube And/Or Island Flap         \$91.           64336 (Proximal Repair Of Urinary Outlet At Underside Of Base of Penis With Skin Graft Tube And/Or Island Flap         \$1.08           64340 (Repair Of Urinary Outlet Of Penis Complication With Mobilization of Skin Graft for Flap         \$25.           64341 (Repair Of Urinary Outlet Of Penis With Skin Graft Or Flap, Extensive         \$91.           64342 (Repair Of Urinary Outlet Of Penis With Skin Graft Or Flap, Extensive         \$91.           64302 (Repair Of Urinary Outlet Of Penis With Skin Graft Or Flap, Extensive         \$91.           64300 (Plastic Operation On Penis To Correct Angulation         \$73.           64300 (Plastic Operation On Penis To Correct Angulation         \$73.           64300 (Plastic Operation On Penis To Correct Angulation         \$72.           64400 (Insention Of Penis Penis With Skin Graft Or Flap, Extensive With Skin Graft Penis With Introduction of Penis Penis With Introduction Penis With Introduction of Penis Penis With Introduction Penis With Introduction of Penis With Introduction of Penis With Introduction of Penis Wi   | 54324   | 1 17   | ф970.97                |
| 54322   Proximal Repair Of Urinary Outlet At Undersice Of Beao of Pens With Loral Skin Graft Patch, And/Or Island Flap   S915   54332   Proximal Repair Of Urinary Outlet Between Thighs in Male, With Skin Graft Tube And/Or Island Flap   S116   54340   Repair Of Urinary Outlet At Undersice Of Pens, Simple With Skin Graft Tube And/Or Island Flap   S16   54340   Repair Of Urinary Outlet Of Pens With Skin Graft Or Flap   S65   54344   Repair Of Urinary Outlet Of Pens With Skin Graft Or Flap   S65   54348   Repair Of Urinary Outlet Of Pens With Skin Graft Or Flap   S65   54348   Repair Of Urinary Outlet Of Pens With Skin Graft Or Flap   S65   54350   Plastic Operation On Penis To Correct Angulation   S73   54360   Plastic Operation On Penis To Correct Angulation   S73   54360   Plastic Operation On Penis To Correct Angulation   S73   54360   Plastic Operation On Penis To Correct Angulation   S73   54360   Plastic Operation On Penis Publish Internation   S74   54360   Plastic Operation On Penis Prosthesis Non-Inflatable (Gell Contained)   S60   54400   Insertion Of Plantil Prosthesis Inflatable (S61   Contained)   S60   54400   Insertion Of Plantil Prosthesis Inflatable (S61   Contained)   S60   54400   Removal Of All Components Of All Multi-Component, Inflatable Penis Prosthesis At The Same Operative Session   S727   54410   Penstruk Session, Including Irrigation And Operation   S61   S64   54410   Penstruk Session, Including Irrigation And Devilopment   Inflatable (S64   Contained)   Penis Prosthesis At The Same Operative Session   S65   54410   Removal And Replacement Of Non-Inflatable (S64   Contained)   Penis Prosthesis Through An Infected Field At The S64   54410   Penstruk Session   Penis Prosthesis   | 54326   |  | \$953.01               |
| 1.5432   Proximal Repair Of Urinary Outlet Between Trippis In Male, Whis Rior Graft Tube AnaCir Island Flap   |         |  | \$852.48               |
| E4336   Pezer Urlinary Outet Between Thighs in Male. With Skin Graft Tube And/Or Island Flap   \$1,086   54340   Repair Of Urinary Outet At Underside Of Pens. Simple With Surgical Revision   \$252   54340   Repair Of Urinary Outet Of Pens Complication With Mobilization Of Skin Graft Or Flap   \$855   54348   Repair Of Urinary Outet Of Pens With Skin Graft Or Flap. Secondary Revision Of Pens Surgical Revision Of Pens With Skin Graft Or Flap. Secondary Revision Of Pens Surgical Pension   \$1,285   54348   Repair Of Urinary Outet Of Pens With Skin Graft Or Flap. Secondary Revision Of Pens Surgical Pension   \$1,285   54350   Palsic Depetation On Pension To Correct Angulation   \$1,235   54360   Palsic Depetation On Pension To Correct Angulation   \$1,235   54350   Palsic Depetation On Pension Pe                                     |         |  | \$919.16               |
| Sadd Repair Of Urinary Outlet of Under National Office State   Sadd Repair Of Urinary Outlet of Penis Complication Off Nation Graft OF Flap   Sadd Repair Of Urinary Outlet of Penis Complication Off Nation Graft OF Flap   Sadd Repair Of Urinary Outlet of Penis With Skin Graft OF Flap, Extensive   Sadd Repair Of Urinary Outlet of Penis With Skin Graft OF Flap, Extensive   Sadd Repair Of Urinary Outlet of Penis With Skin Graft OF Flap, Extensive   Sadd Repair Of Urinary Outlet Off Penis With Incontinence   \$7272   Sadd Repair Of Urinary Outlet Off Penis With Incontinence   \$7272   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$7272   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Urinary Outlet Off Penis With Incontinence   \$728   Sadd Repair Off Penis Prosthesis Non-Indiatable (Semi-Rigid)   \$74401   Insentine Off Penis Prosthesis Indiatable (Semi-Rigid)   \$74401   Insentine Off Penis Penis Penis Insentine Penis Peni                              |         | · · · ·  | \$1,080.23             |
| September   Sept  |         |  | \$521.37               |
| S493   Repair Of Urinary Quillet Of Penis Will Skin Graft Or Flap, Secondary Revision Of Prior Surgery   \$1,255   54360   Plastic Operation On Penis To Correct Angulation   \$173   54380   Plastic Repair Of Urinary Quillet Of Penis Will Skin Graft Or Flap, Secondary Revision Of Prior Surgery   \$1,255   54360   Plastic Repair Of Urinary Quillet Of Penis Will Michael Internation   \$173   54380   Plastic Repair Of Urinary Quillet Of Penis Without Incontinence   \$174   54380   Plastic Repair Of Urinary Quillet Of Penis Without Incontinence   \$184   54390   Plastic Operation On Penis Prosthesis Not-Inflatable (Semi-Rigid)   \$1,22   54400   Insertion Of Penile Prosthesis Inflatable (Semi-Rigid)   \$1,22   54401   Insertion Of Penile Prosthesis Inflatable (Semi-Rigid)   \$1,22   54401   Insertion Of Penile Prosthesis Inflatable (Semi-Rigid)   \$1,22   54406   Repair Of Components Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session   \$728   54410   Removal And Replacement Of All Components Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session   \$728   54410   Removal And Replacement Of All Components Of A Multi-Component, Inflatable Penile Prosthesis Through An Infected Field At The Same Session   \$1,441   Operative Session        |         | 1 , 1 0  | \$859.91               |
| 54328   Repair Of Urinary Outlet Of Penis With Skin Graft Or Flap, Secondary Revision Of Prior Surgery   \$1,285   54360   Plastic Departation On Penis To Correct Angulation   \$737   54380   Plastic Repair Of Urinary Outlet Of Penis Without Incontinence   \$726   54325   Plastic Repair Of Urinary Outlet Of Penis With Incontinence   \$726   54326   Plastic Departation On Penis For Epispadias Distat To Esternal Sphinctor, With Exstrophy Of Bladder   \$1,126   54400   Insertion Of Penis Prosthessis Inflatable (Semi-Rigid)   \$487   54401   Removal Of Al Components Of A Multi-Component, Inflatable Penis Prosthesis   \$606   54408   Repair Of Components (S) Of A Multi-Component, Inflatable Penis Prosthesis   \$607   54408   Repair Of Components (S) Of A Multi-Component, Inflatable Penis Prosthesis   \$607   54408   Repair Of Components (S) Of A Multi-Component Inflatable Penis Prosthesis   \$608   54410   Removal And Replacement Of All Components (S) A Multi-Component Inflatable Penis Prosthesis   \$608   54411   Same Office of Penis Prosthesis   \$608   54411   Removal And Replacement Of All Components (S) A Multi-Component Inflatable Penis Prosthesis   \$608   54416   Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Semi-Rigid) Penis Prosthesis, Without Replacement Of Prosthesis   \$408   54416   Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Semi-Contained) Penis Prosthesis A The Same Operative Session   \$608   54417   Same Operative Session, Including Imgalon And Debridement Of Infocet Tissue   \$608   54418   Same Operative Session, Including Imgalon And Debridement Of Infocet Penis Prosthesis Without Replacement Of Repl                         |         |  | \$919.16               |
| S436  Plastic Operation On Penis To Correct Angulation   \$737  |         |  | \$1,283.67             |
| S438   Plastic Repair Of Urinary Quited (OP Penis With Incontinence   \$344   | 54360   | Plastic Operation On Penis To Correct Angulation   | \$731.00               |
| S430   Plastic Operation On Penis For Epispadias Distal To External Sphinicer, With Exstrophy Of Bladder   \$4.128  | 54380   | Plastic Repair Of Urinary Outlet Of Penis Without Incontinence   | \$729.04               |
| S440  Insertion Of Penile Prosthesis Non-Inflatable (Semi-Rigid)   S460  Insertion Of Penile Prosthesis Inflatable (Seff Contained)   S605  S4408  Repair Of Components Of A Multi-Component, Inflatable Penile Prosthesis Without Replacement Of Prosthesis   S605  S4408  Repair Of Component(S) Of A Multi-Component, Inflatable Penile Prosthesis   S605  S4408  Repair Of Component(S) Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session, Including Impation And Debridment Of Inflatable Penile Prosthesis Through An Inflatable Session   S721  Removal And Replacement Of All Components Of A Multi-Component Inflatable Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session   Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session   Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session   Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesis Through An Inflatable (Self-Contained) Penile Prosthesi  | 54385   | Plastic Repair Of Urinary Outlet Of Penis With Incontinence  | \$848.55               |
| Section   Insertion Of Penile Prosthesis Inflatable (Self Contained)   \$605  | 54390   | Plastic Operation On Penis For Epispadias Distal To External Sphincter; With Exstrophy Of Bladder  | \$1,128.27             |
| Sede   Removal Of All Components Of A Multi-Component, Inflatable Penile Prosthesis Without Replacement Of Prosthesis   \$667   | 54400   | Insertion Of Penile Prosthesis Non-Inflatable (Semi-Rigid)   | \$487.21               |
| S4410   Removal And Replacement Of All Component(S) Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session   Removal And Replacement Of All Components Of A Multi-Component Inflatable Penile Prosthesis Through An Infected Field At The Same   S4411   Operative Session, Including Irrigation And Debridement Of Infected Tissue   S4415   Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Seli-Contained) Penile Prosthesis, Without Replacement Of Prosthesis   S4416   Removal And Replacement Of Non-Inflatable (Seli-Contained) Penile Prosthesis, Without Replacement Of Prosthesis   S4416   Removal And Replacement Of Non-Inflatable (Seli-Contained) Penile Prosthesis, Without Replacement Of Replacement Of Non-Inflatable (Seli-Contained) Penile Prosthesis At The Same Operative Session   Removal And Replacement Of Non-Inflatable (Seli-Contained) Penile Prosthesis At The Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The   S4417   Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The   S4417   Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The   S4417   Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The   S4417   Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The   S4417   Same Operative Session, Including Irrigation And Debridement Of Inflatable (Seli-Contained) Penile Prosthesis Through An Infected Field At The   S4417   Same Operative Session, Including Irrigation And Debridement Of Infected Tissue   S4417   Same Operation Of Infected Tissue   S4417   Same Operative Session, Including Irrigation And Debridement Of Infected Tissue   S4417   Same   | 54401   | Insertion Of Penile Prosthesis Inflatable (Self Contained)   | \$609.05               |
| Setton Removal And Replacement Of All Component(S) Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session (an Including Irrigation And Debridement Of Infected Tissue \$937.  Setton Including Irrigation And Debridement Of Infected Tissue \$937.  Setton And Penicement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis \$486.  Setton And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session (Annual Penile Prosthesis Annual Penile Prosthesis At The Same Operation O                                       | 54406   | Removal Of All Components Of A Multi-Component, Inflatable Penile Prosthesis Without Replacement Of Prosthesis   | \$667.29               |
| Removal And Replacement Of All Components Of A Multi-Component Inditable Penile Prosthesis Through An Infected Field At The Same 54411 Operative Session, Including Irrigation And Debridement Of Infected Tissue 54418 Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis 54418 Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Including Irrigation And Debridement Of Inflected Tissue 54417 Same Operative Session, Including Irrigation And Debridement Of Inflected Tissue 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Clans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 54437 Repair Of Penis 54437 Repair Of Penis Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 54438 Replantation Of Amputated Penis 54439 Replantation Of Amputated Penis 54430 Pastic Operation Of Penis For Injury 54450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching 5450 Biopsy Of Testis, Needle (Separate Procedure) 5450 Biopsy Of Testis, Including Lysis Of Preputial Adhesions And Stretching 5450 Removal Of One Testicle 54502 Orchiectomy, Partial 54512 Excision Of Extraparenchymal Lesion Of Testis 54502 Prohiectomy, Partial 54503 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach 5572 55600 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5573 55600 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5572 55600 Laparoscopy, Surgical, With Or Without Fixation Of Contralateral Testis 5572 55600 Laparoscopy, Surgical,  | 54408   | Repair Of Component(S) Of A Multi-Component, Inflatable Penile Prosthesis  | \$721.62               |
| Removal And Replacement Of All Components Of A Multi-Component Inditable Penile Prosthesis Through An Infected Field At The Same 54411 Operative Session, Including Irrigation And Debridement Of Infected Tissue 54418 Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis 54418 Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis At The Same Operative Session Including Irrigation And Debridement Of Inflected Tissue 54417 Same Operative Session, Including Irrigation And Debridement Of Inflected Tissue 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Clans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 54437 Repair Of Penis 54437 Repair Of Penis Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 54438 Replantation Of Amputated Penis 54439 Replantation Of Amputated Penis 54430 Pastic Operation Of Penis For Injury 54450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching 5450 Biopsy Of Testis, Needle (Separate Procedure) 5450 Biopsy Of Testis, Including Lysis Of Preputial Adhesions And Stretching 5450 Removal Of One Testicle 54502 Orchiectomy, Partial 54512 Excision Of Extraparenchymal Lesion Of Testis 54502 Prohiectomy, Partial 54503 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach 5572 55600 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5573 55600 Exploration For Undescended Testis (Inguinal Or Scrotal Area) 5572 55600 Laparoscopy, Surgical, With Or Without Fixation Of Contralateral Testis 5572 55600 Laparoscopy, Surgical,  | 54410   | Removal And Replacement Of All Component(S) Of A Multi-Component, Inflatable Penile Prosthesis At The Same Operative Session   | \$787.43               |
| S4415   Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis   \$486  |         |  |                        |
| September   Sept  | 54411   | Operative Session, Including Irrigation And Debridement Of Infected Tissue   | \$937.68               |
| Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis Through An Infected Field At The 54417 Same Operative Session, Including Irrigation And Debridement Of Infected Tissue 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral 5584 54435 Corpora Cavernosa-Glans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 5573 Repair Of Penis 557437 Repair Of Penis 557437 Repair Of Penis 5574450 Pissuit Operation Of Penis For Injury 557450 Biopsy Of Testis (Protection of Penis For Injury 5773 Peristin Manipulation Including Lysis Of Preputial Adhesions And Stretching 5675 Biopsy Of Testis, Incisional (Separate Procedure) 5675 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Removal Of Testicic 5676 Removal Of Testicic 5677 Removal Of One Testis (Testicle) For Tumor, Groin Approach 5677 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach 5678 Exploration For Undescended Testis With Abdominal Exploration 5677 Repair Of Procedure (Procedure) 5776 Removal Of One Testis, Surgical, With Or Without Fixation Of Contralateral Testis 5776 Repositioning And Fixation Of Misplaced Testicle 5776 Repositioning And Fixation Of Misplaced Testicle 5776 Repositioning And Fixation Of Misplaced Testicle 5777 Repair (Procedure) 5778 Repair (Procedure) 5778 Repair (Procedure) 5779 Repair (Procedure) 5770 Repair (Procedure) 5770 Repair (Procedure) 5771 Repair (Procedure) 5771 Repair (Procedure) 5772 Repair (Procedure) 5772 Repair (Procedure) 5772 Repair (Procedure) 5772 Repair (Procedure) 5773 Repair (Procedure) 5774 Repair (Procedure) 5775 Repair (Procedure) 5776 Repair (Procedure) 5776 Repair (Procedure) 5776 Repair (Procedure)   | 54415   | Removal Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis, Without Replacement Of Prosthesis   | \$486.87               |
| Removal And Replacement Of Non-Inflatable (Semi-Rigid) Or Inflatable (Self-Contained) Penile Prosthesis Through An Infected Field At The 54417 Same Operative Session, Including Irrigation And Debridement Of Infected Tissue 54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral 54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral 5584 54435 Corpora Cavernosa-Glans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) 5573 Repair Of Penis 557437 Repair Of Penis 557437 Repair Of Penis 5574450 Pissuit Operation Of Penis For Injury 557450 Biopsy Of Testis (Protection of Penis For Injury 5773 Peristin Manipulation Including Lysis Of Preputial Adhesions And Stretching 5675 Biopsy Of Testis, Incisional (Separate Procedure) 5675 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Biopsy Of Testis, Incisional (Separate Procedure) 5676 Removal Of Testicic 5676 Removal Of Testicic 5677 Removal Of One Testis (Testicle) For Tumor, Groin Approach 5677 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach 5678 Exploration For Undescended Testis With Abdominal Exploration 5677 Repair Of Procedure (Procedure) 5776 Removal Of One Testis, Surgical, With Or Without Fixation Of Contralateral Testis 5776 Repositioning And Fixation Of Misplaced Testicle 5776 Repositioning And Fixation Of Misplaced Testicle 5776 Repositioning And Fixation Of Misplaced Testicle 5777 Repair (Procedure) 5778 Repair (Procedure) 5778 Repair (Procedure) 5779 Repair (Procedure) 5770 Repair (Procedure) 5770 Repair (Procedure) 5771 Repair (Procedure) 5771 Repair (Procedure) 5772 Repair (Procedure) 5772 Repair (Procedure) 5772 Repair (Procedure) 5772 Repair (Procedure) 5773 Repair (Procedure) 5774 Repair (Procedure) 5775 Repair (Procedure) 5776 Repair (Procedure) 5776 Repair (Procedure) 5776 Repair (Procedure)   |         |  |                        |
| 54417 Same Operative Session, Including Irrigation And Debridement Of Infected Tissue       \$815         54420 Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral       \$641         54430 Corpora Cavernosa-Corpus Spongiosum Shunt Or Corpora Cavernosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral       \$584         54435 Corpora Cavernosa-Glans Penis Fistulization (Eg, Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation)       \$375         54437 Repair Of Penis       \$615         54438 Replantation Of Amputated Penis       \$151         54430 Plastic Operation Of Penis For Injury       \$373         54430 Plastic Operation Of Penis For Injury       \$373         54450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching       \$66         54500 Biopsy Of Testis, Needle (Separate Procedure)       \$67         54505 Biopsy Of Testis, Incisional (Separate Procedure)       \$67         54512 Excision Of Extraparenchymal Lesion Of Testis       \$490         54522 Orchiectomy, Partial       \$533         54523 Removal Of One Testis (Testicle) For Tumor, Groin Approach       \$517         54535 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach       \$676         54505 Exploration For Undescended Testis With Abdominal Exploration       \$627         54500 Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis<   | 54416   |  | \$655.37               |
| Setable   Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral   Setable  |         | · · · · · · · · · · · · · · · · · · ·  |                        |
| \$54430 Corpora Cavermosa-Corpus Spongiosum Shunt Or Corpora Cavermosa-Glans Penis Shunt (Priapism Operation), Unilateral Or Bilateral \$58435 Corpora Cavermosa-Glans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) \$375 \$4437 Repair Of Penis \$438 Replantation Of Amputated Penis \$438 Replantation Of Amputated Penis \$439 Replantation Of Penis For Injury \$733 \$4450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching \$65 \$4500 Biopsy Of Testis, Needle (Separate Procedure) \$67 \$4505 Biopsy Of Testis, Needle (Separate Procedure) \$68 \$4505 Biopsy Of Testis, Incisional (Separate Procedure) \$69 \$4512 Excision Of Extraparenchymal Lesion Of Testis \$490 \$4512 Excision Of Extraparenchymal Lesion Of Testis \$490 \$490 \$490 \$490 \$490 \$490 \$490 \$490  |         |  | \$818.87               |
| 54435 Corpora Cavernosa-Glans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) \$375 54437 Repair Of Penis \$4438 Replantation Of Amputated Penis \$1,214 54440 Plastic Operation Of Penis For Injury \$1,214 54440 Plastic Operation Of Penis For Injury \$450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching \$65 54500 Biopsy Of Testis, Needle (Separate Procedure) \$67 54505 Biopsy Of Testis, Incisional (Separate Procedure) \$67 54505 Biopsy Of Testis, Incisional (Separate Procedure) \$68 54502 Removal Of Testicle \$68 54502 Removal Of Testicle \$68 54503 Removal Of Testis (Testicle) For Tumor, Groin Approach \$68 54503 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach \$69 54505 Exploration For Undescended Testis (Inguinal Or Scrotal Area) \$69 54506 Exploration For Undescended Testis (Inguinal Or Scrotal Area) \$60 54600 Reduction Of Torsion Of Testis (Separate Procedure) \$60 54600 Reduction Of Torsion Of Testis (Separate Procedure) \$60 54600 Reduction Of Torsion Of Testis (Separate Procedure) \$60 54600 Reduction Of Torsion Of Testis (Separate Procedure) \$60 54600 Repositioning And Fixation Of Misplaced Testicle \$60 54600 Testis (Separate Procedure) \$60 54600 Testis (Separate Procedure) \$60 54600 Repositioning And Fixation Of Misplaced Testicle \$60 54600 Testis (Separate Procedure) \$61 54600 Testis (Separate | 54420   | Corpora Cavernosa-Saphenous Vein Shunt (Priapism Operation), Unilateral Or Bilateral   | \$641.63               |
| 54435 Corpora Cavernosa-Glans Penis Fistulization (Eg. Biopsy Needle, Winter Procedure, Rongeur, Or Punch) (Priapism Operation) \$375 54437 Repair Of Penis \$4438 Replantation Of Amputated Penis \$1,214 54440 Plastic Operation Of Penis For Injury \$1,214 54440 Plastic Operation Of Penis For Injury \$450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching \$65 54500 Biopsy Of Testis, Needle (Separate Procedure) \$67 54505 Biopsy Of Testis, Incisional (Separate Procedure) \$67 54505 Biopsy Of Testis, Incisional (Separate Procedure) \$68 54502 Removal Of Testicle \$68 54502 Removal Of Testicle \$68 54503 Removal Of Testis (Testicle) For Tumor, Groin Approach \$68 54503 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach \$69 54505 Exploration For Undescended Testis (Inguinal Or Scrotal Area) \$69 54506 Exploration For Undescended Testis (Inguinal Or Scrotal Area) \$60 54600 Reduction Of Torsion Of Testis (Separate Procedure) \$60 54600 Reduction Of Torsion Of Testis (Separate Procedure) \$60 54600 Reduction Of Torsion Of Testis (Separate Procedure) \$60 54600 Reduction Of Torsion Of Testis (Separate Procedure) \$60 54600 Repositioning And Fixation Of Misplaced Testicle \$60 54600 Testis (Separate Procedure) \$60 54600 Testis (Separate Procedure) \$60 54600 Repositioning And Fixation Of Misplaced Testicle \$60 54600 Testis (Separate Procedure) \$61 54600 Testis (Separate | 54400   | Company Company Company Charles Company Company Company Charles Company Compan | <b>A</b> =0.4.04       |
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| 54438Replantation Of Amputated Penis\$1,21454440Plastic Operation Of Penis For Injury\$7354450Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching\$6554500Biopsy Of Testis, Needle (Separate Procedure)\$6754505Biopsy Of Testis, Incisional (Separate Procedure)\$19154512Excision Of Extraparenchymal Lesion Of Testis\$49054520Removal Of Testicle\$33354520Orchiectomy, Partial\$53354530Removal Of One Testis (Testicle) For Tumor, Groin Approach\$51754535Removal Of One Testis (Testicle) For Tumor, Abdominal Approach\$67254550Exploration For Undescended Testis (Inguinal Or Scrotal Area)\$52754560Exploration For Undescended Testis With Abdominal Exploration\$62754600Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis\$46754620Fixation Of Contralateral Testis (Separate Procedure)\$30254630Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)\$37254680Caparoscopy, Surgical; Orchiocation Injury\$37554680Laparoscopy, Surgical; Orchiocatomy\$53654692Laparoscopy, Surgical; Orchiocatomy\$53654700Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17554800Biopsy Of Epididymis, Needle\$113  |         |  | \$379.82               |
| 54440 Plastic Operation Of Penis For Injury  54450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching  54500 Biopsy Of Testis, Needle (Separate Procedure)  54505 Biopsy Of Testis, Incisional (Separate Procedure)  54512 Excision Of Extraparenchymal Lesion Of Testis  54520 Removal Of Testic, Incisional (Separate Procedure)  54520 Removal Of Testicle  54530 Removal Of One Testis (Testicle) For Tumor, Groin Approach  54530 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach  54530 Exploration For Undescended Testis (Inguinal Or Scrotal Area)  54550 Exploration For Undescended Testis (Inguinal Or Scrotal Area)  54600 Exploration For Undescended Testis (With Abdominal Exploration  54600 Fixation Of Contralateral Testis (Separate Procedure)  54600 Fixation Of Contralateral Testis (Separate Procedure)  54600 Fixation Of Contralateral Testis (Separate Procedure)  54600 Repositioning And Fixation Of Misplaced Testicle  54600 Transplantation Of Testicular Injury  54600 Transplantation Of Testicular Injury  54600 Laparoscopy, Surgical; Orchiectomy  54600 Laparoscopy, Surgical; Orchiectomy  54600 Unisted Laparoscopy Froedure, Testis  54600 Biopsy Of Epididymis, Needle  54700 Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area  |         | · ·  | \$619.89               |
| 54450 Foreskin Manipulation Including Lysis Of Preputial Adhesions And Stretching  54500 Biopsy Of Testis, Needle (Separate Procedure)  54500 Biopsy Of Testis, Incisional (Separate Procedure)  54512 Excision Of Extraparenchymal Lesion Of Testis  54512 Excision Of Extraparenchymal Lesion Of Testis  54520 Removal Of Testicle  54522 Orchiectomy, Partial  54533 Removal Of One Testis (Testicle) For Tumor, Groin Approach  54533 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach  54535 Removal Of One Testis (Testicle) For Tumor, Abdominal Approach  54550 Exploration For Undescended Testis (Inguinal Or Scrotal Area)  54500 Exploration For Undescended Testis With Abdominal Exploration  54600 Exploration For Undescended Testis With Abdominal Exploration  54600 Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis  54600 Fixation Of Contralateral Testis (Separate Procedure)  54600 Repositioning And Fixation Of Misplaced Testicle  54600 Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)  5722  54680 Transplantation Of Testicular Injury  54680 Transplantation Of Testic(Es) To Thigh (Because Of Scrotal Destruction)  5764  54690 Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis  5764  5764  5764  5764  5764  5764  5764  5764  5764  5764  5764  5760 Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area   |         | · ·  | \$1,214.37<br>\$739.59 |
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| 54512Excision Of Extraparenchymal Lesion Of Testis\$49054520Removal Of Testicle\$33354522Orchiectomy, Partial\$53754530Removal Of One Testis (Testicle) For Tumor, Groin Approach\$51754535Removal Of One Testis (Testicle) For Tumor, Abdominal Approach\$67654550Exploration For Undescended Testis (Inguinal Or Scrotal Area)\$52754560Exploration For Undescended Testis With Abdominal Exploration\$62754600Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis\$46754620Fixation Of Contralateral Testis (Separate Procedure)\$30254640Repositioning And Fixation Of Misplaced Testicle\$43754650Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)\$72254670Suture Or Repair Of Testiscular Injury\$37554680Transplantation Of Testis(Es) To Thigh (Because Of Scrotal Destruction)\$71654690Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$59654690Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$76454690Unlisted Laparoscopy Procedure, TestisPrice By Re54700Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17554800Biopsy Of Epididymis, Needle\$113   |         |  | \$191.71               |
| 54520Removal Of Testicle\$33354522Orchiectomy, Partial\$53754530Removal Of One Testis (Testicle) For Tumor, Groin Approach\$51754535Removal Of One Testis (Testicle) For Tumor, Abdominal Approach\$67854550Exploration For Undescended Testis (Inguinal Or Scrotal Area)\$52754560Exploration For Undescended Testis With Abdominal Exploration\$62754600Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis\$46754620Fixation Of Contralateral Testis (Separate Procedure)\$30254640Repositioning And Fixation Of Misplaced Testicle\$43754650Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)\$72254670Suture Or Repair Of Testicular Injury\$37554680Transplantation Of Testis(Es) To Thigh (Because Of Scrotal Destruction)\$71854690Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$76454690Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$76454690Unlisted Laparoscopy Procedure, TestisPrice By Re54700Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17554800Biopsy Of Epididymis, Needle\$113   |         |  | \$490.82               |
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| 54530Removal Of One Testis (Testicle) For Tumor, Groin Approach\$51754535Removal Of One Testis (Testicle) For Tumor, Abdominal Approach\$67854550Exploration For Undescended Testis (Inguinal Or Scrotal Area)\$52754560Exploration For Undescended Testis With Abdominal Exploration\$62754600Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis\$46754620Fixation Of Contralateral Testis (Separate Procedure)\$30254640Repositioning And Fixation Of Misplaced Testicle\$43754650Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)\$72254670Suture Or Repair Of Testicular Injury\$37554680Transplantation Of Testis(Es) To Thigh (Because Of Scrotal Destruction)\$71654690Laparoscopy, Surgical; Orchicotomy\$59854692Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$76454690Unlisted Laparoscopy Procedure, TestisPrice By Re54700Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17254800Biopsy Of Epididymis, Needle\$113  |         |  | \$537.31               |
| 54535Removal Of One Testis (Testicle) For Tumor, Abdominal Approach\$67854550Exploration For Undescended Testis (Inguinal Or Scrotal Area)\$52754560Exploration For Undescended Testis With Abdominal Exploration\$62754600Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis\$46754620Fixation Of Contralateral Testis (Separate Procedure)\$30254640Repositioning And Fixation Of Misplaced Testicle\$43754650Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)\$72254670Suture Or Repair Of Testicular Injury\$37554680Transplantation Of Testis(Es) To Thigh (Because Of Scrotal Destruction)\$71654690Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$59854692Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$76454690Unlisted Laparoscopy Procedure, TestisPrice By Re54700Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17554800Biopsy Of Epididymis, Needle\$113  |         |  | \$517.10               |
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| 54560Exploration For Undescended Testis With Abdominal Exploration\$62754600Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis\$46754620Fixation Of Contralateral Testis (Separate Procedure)\$30254640Repositioning And Fixation Of Misplaced Testicle\$43754650Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)\$72254670Suture Or Repair Of Testicular Injury\$37554680Transplantation Of Testis(Es) To Thigh (Because Of Scrotal Destruction)\$71854690Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$59654699Unlisted Laparoscopy Procedure, TestisPrice By Re54700Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17554800Biopsy Of Epididymis, Needle\$113   |         |  | \$527.89               |
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| 54640Repositioning And Fixation Of Misplaced Testicle\$43754650Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)\$72254670Suture Or Repair Of Testicular Injury\$37554680Transplantation Of Testis(Es) To Thigh (Because Of Scrotal Destruction)\$71654690Laparoscopy, Surgical; Orchiectomy\$59854692Laparoscopy, Surgical; Orchieptomy\$76454699Unlisted Laparoscopy Procedure, TestisPrice By Re54700Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17554800Biopsy Of Epididymis, Needle\$113   | 54600   | Reduction Of Torsion Of Testis, Surgical, With Or Without Fixation Of Contralateral Testis   | \$467.43               |
| 54650Orchiopexy, Abdominal Approach, For Intra-Abdominal Testis (Eg, Fowler-Stephens)\$72254670Suture Or Repair Of Testicular Injury\$37554680Transplantation Of Testis(Es) To Thigh (Because Of Scrotal Destruction)\$71854690Laparoscopy, Surgical; Orchiectomy\$59854692Laparoscopy, Surgical; Orchiopexy For Intra-Abdominal Testis\$76454699Unlisted Laparoscopy Procedure, TestisPrice By Re54700Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17554800Biopsy Of Epididymis, Needle\$113   |         |  | \$302.75               |
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| 54699 Unlisted Laparoscopy Procedure, TestisPrice By Re54700 Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area\$17554800 Biopsy Of Epididymis, Needle\$113  |         |  | \$598.00               |
| 54700 Incision And Drainage Of Sperm Reservoir, Testis, And/Or Scrotal Area \$175 54800 Biopsy Of Epididymis, Needle \$113  |         | 1 17 0   | \$764.85               |
| 54800 Biopsy Of Epididymis, Needle \$113  |         |  | Price By Report        |
|   |         |  | \$179.93               |
| 54830 Excision Ut Local Lesion Ut Epididymis \$358  |         |  | \$113.27               |
|   | 54830   | Excision Of Local Lesion Of Epididymis   | \$358.65               |

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| SORIO Visionario, Complexiant Germanic Procedure) 1988.  SORIO Visionario, Complexia C  |       |  |                                       |
| Seazol   Vascotorry, Clarenduzianon With Or Without Incision Of Vas, Unitarian Or Bilateral (Separate Procedure)   \$2434.   Seazol   Vascotorry, Per Vascograms, Seminal Vesia. Logarnary, Or Epide/programs, Unitarianal Or Bilateral   \$168.   Seazol   Vascotorry, Per Vascograms, Seminal Vesia. Logarnary, Or Epide/programs, Unitarianal Or Bilateral   \$40.   Seazol   Vascotorry, Per Vascograms, Seminal Vesia. Logarnary, Or Epide/programs, Unitarianal Or Bilateral   \$40.   Seazol   Vascotorry, Per Vascograms, Seminal Vesia. Logarnary, Or Epide/programs, Unitarianal Or Bilateral   \$40.   Seazol   Vascotorry, Vascograms, Seminal Vesia. Logarnary, Procedury   \$40.   Seazol   Vascotorry, Vascograms,   |       |  |                                       |
| Section   Vaseoromy, Unisitateral Or Bilateral (Separate Procedure)   Including Postioperainty Semen Examination(S)   \$138.   Section Of Hydrocock Of Spermatic Cont. Unisitateral (Exparate Procedure)   \$411.   \$15500   Excision Of Hydrocock Of Spermatic Cont. Unisitateral (Exparate Procedure)   \$411.   \$15500   Excision Of Hydrocock Of Spermatic Cont. Unisitateral (Exparate Procedure)   \$411.   \$15500   Excision Of Variocock Of Unisitate Out (Spermate Procedure)   \$451.   \$15500   Excision Of Variocock Of Unisitate Of Unisitate (Procedure)   \$350.   \$15500   Excision Of Variocock Of Unisitate (Procedure)   \$350.   \$15500   Exparate (Procedure)   \$350.   |       |  |                                       |
| Session   Vascotamy For Vascograms, Seminal Vesculograms, Or Epitochymograms, Unitered 10 Pilatered   Session Of Lesion Of Hydrocee of Spermate Cond. Inflation (Reparate Procedure)   3401.  |       |  |                                       |
| Session Christian Of Hydroceae Of Spermatic Cond, Unitatienal (Separate Procedure)  Session Carolian Of Variocoae Cort (Separate Procedure)  Session Circlamor Of Variocoae Cort (Separate Verins For Variocoae)  Session Circlamor Of Variocoae Cort (Separate Verins For Variocoae)  Session Circlamor Of Variocoae Cort (Separate Verins For Variocoae)  Session Cort (Separate Verins)  Session (Separate (Separate Verins)  Session (Separate (Separate Verins)  Session (Separate (Separate   |       |  |                                       |
| Session Circision Of Lesion Of Spermatic Corti (Separatie Procedure)  Session Revision (Virancoele Citylation Of Spermatic Veris For Variacoele), Abdominal Approach  Session Citylary Variance (Virancoele) Citylation Of Spermatic Veris For Variacoele, Abdominal Approach  Session (Virancoele) Citylation Of Spermatic Veris For Variacoele, Abdominal Approach  Session (Virancoele) Citylation Of Spermatic Veris For Variacoele, Abdominal Approach  Session (Virancoele) Citylation Of Spermatic Veris For Variacoele  Price By Rape  Session (Virancoele) Citylation Of Spermatic Veris For Variacoele  Price By Rape  Session (Virancoele) Citylation Of Spermatic Veris For Variacoele  Price By Rape  Session (Virancoele) Citylation Of Spermatic Veris For Variacoele  Price By Rape  Session (Virancoele) Citylation (Virancoele) Session (V  |       |  |                                       |
| Sisson Sexision Of Variancele Or Ligation Of Spermatic Veins For Varianceles (Separate Pricedure) Sisson (Sexision Of Variancele Or Ligation Of Spermatic Veins For Varianceles (Audominal Approach) Sisson (Sexision Of Variancele Or Ligation Of Spermatic Veins For Varianceles Addinated) Sisson (Pricedure) Varianceles Or Ligation Of Spermatic Veins For Varianceles Sisson (Vesticulation) Varianceles Or Ligation Of Spermatic Veins For Varianceles Sisson (Vesticulation) Varianceles Or Ligation Of Spermatic Veins For Varianceles Sisson (Vesticulation) Varianceles Or Variancele  |       |  |                                       |
| 56550 Exission Of Varianceleo Citylation Of Spermatic Veins For Varianceles, With Hernia Repair 56500 Exission Of Varianceleo Citylation Of Spermatic Veins For Varianceles, With Hernia Repair 56500 Experimental Paperson, William Commission of Spermatic Veins For Varianceles 65500 Institution Of Varianceleo Citylation Of Spermatic Veins For Varianceles 65500 Veinclutorium, Complicated 65500 Veinclutorium, External Disriance, Sterenarce, Veinclutorium, External Disriance, Sterenarce, Veinclutorium, External Disriance, Veinclutorium,  |       |  | · · · · · · · · · · · · · · · · · · · |
| Session   Variancesion of Variancesion of Variancesion   Session   Session   Ligation of Spermatic Veins For Variancesie   Session   S  |       |  |                                       |
| Sassa   Sass  |       |  |                                       |
| Distance Laparoscopy Procedure, Spermatic Cord  |       | v i  | \$498.56                              |
| Section   Sect  |       |  | \$393.80                              |
| Seption   Sept  |       |  |                                       |
| Seption   Sept  |       | ,  | \$387.03                              |
| Scriego   Excision Of Mulerian Dutt Cyst  |       |  | \$480.11                              |
| Space   Space   Prostate   Needle Or Purch, Single Or Multiple, Any Approach   \$184.55705   Blopsy, Prostate   Incisional, Any Approach   \$344.55705   Blopsy, Prostate   Needle, Transperineal, Stereotactic Template Guided Saturation Sampling, Including Imaging Guidance   \$344.55720   Prostationny, Esternal Drainage Of Prostate   Assess. Any Approach   \$745.5720   Prostationny, Esternal Drainage Of Prostate   Assess. Any Approach   \$745.5720   Prostationny, Esternal Drainage Of Prostate   Assess. Any Approach   \$745.5720   Prostationny   \$745.5720   Pros  |       |  |                                       |
| Sport   Sport   Prostate   Incisional, Any Approach   Spart   |       | ,  |                                       |
| Seption   Size   Prostate   Needle, Transperineal, Sterotactic Template Guided Saturation Sampling, Including Imaging Guidance   \$441.   Seption   |       |  |                                       |
| Seption   Prostatotomy, Esternal Drainage of Prostatic Abscess, Any Approach; Simple   Seption  |       |  | · · · · · · · · · · · · · · · · · · · |
| Seption   Prostatectomy, Returnal Drainage of Prostatic Absosss, Any Approach; Complicated   Seption   Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Mealotomy, Urethral   Seption  |       |  |                                       |
| Prostatectomy, Including Control Of Postoperative Biedering During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral \$996. 58810 Removal Of Prostate Gland, Glands For Sperm Movement (Semen), And Sperm Duct \$1.186. 58812 Prostatectomy, Perineal Radical; With Lymph Node Biopsy(S) \$1.457. 58815 Prostatectomy, Perineal Radical; With Lymph Node Biopsy(S) \$1.457. 58816 Prostatectomy, Perineal Radical; With Lymph Node Biopsy(S) \$1.457. 58816 Prostatectomy, Including Control Of Postoperative Biedering During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral Section), And Internal Urethrotomy, Are Included); Suprapubic, Subtotal, One Or Two Station, And Orbitalistion, And Internal Urethrotomy, Are Included); Suprapubic, Subtotal, One Or Two Station And/Or Dilation, And Internal Urethrotomy, Are Included); Suprapubic, Subtotal, One Or Two Station And/Or Dilation, And Internal Urethrotomy, Are Included); Suprapubic, Subtotal \$853. 58810 Calibration And/Or Dilation, And Internal Urethrotomy, Are Included); Retropubic, Subtotal \$853. 58840 Prostatectomy, Retropubic Radical, With Or Without Nerve Sparing; \$1.062. 588412 Prostatectomy, Retropubic Radical, With Dilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes \$1.234. 58860 Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) System Perine Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) System Perine Of Prostate (Includes Ultrasonic Guidance And Moni   |       |  | •                                     |
| Calibration And/Or Dilation, And Internal Urethrotomy Are Included), Perineal, Subtotal   | 55725 |  | \$545.03                              |
| Sample   Septiment   Septime  | 55004 |  | <b>#</b> 000 40                       |
| Fostatectomy, Perineal Radical; With Lymph Node Biopsy(S)   \$1,457.7   |       |  |                                       |
| Frostatectomy, Perineal Radical; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes   \$1,595.8   |       |  |                                       |
| Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral 58221 Calibration And/Or Dilation, And Internal Urethrotomy Are Included; Suprapubic, Subtotal, One Or Two Stages 9 Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral 58831 Calibration And Or Dilation, And Internal Urethrotomy Are Included); Retropubic, Subtotal 5849 Prostatectomy, Retropubic Radical, With Lymph Node Biopsy(S) \$1,061.1 55849 Prostatectomy, Retropubic Radical, With Lymph Node Biopsy(S) \$1,062.1 55860 Prostatectomy, Retropubic Radical, With Lymph Node Biopsy(S) \$1,062.1 55860 Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.5 55862 Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.5 55862 Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.5 55864 Phyospatric And Obturator Nodes \$1,234.5 55866 Laparoscopy, Surgical Prostatectomy, Retropubic Radical, Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1,451.5 55867 Samples Surgical Subtotal Removal Of Prostate Using Laparoscope \$8995.5 55873 Cryosurgical Ablation Of The Prostate (Includes Ultrasonic Guidance And Monitoring) \$5,786.5 55876 Imperion Of Biodegradable Material Next To Prostate \$3,222.1 Placement Of Intersitial Device(S) For Radiation Therapy Guidance (Eg. Fiducial Markers, Dosimeter), Prostate (Via Needle, Any Approach), \$142.5 55876 Tarasparineal Place Needles/Cath. Prostate \$3,222.5 558776 Developed Control Control Control of  | 55812 | Prostatectomy, Perineal Radical; With Lymph Node Biopsy(5)   | \$1,457.74                            |
| Seast   Calibration And/Or Dilation, And Internal Urethrotomy Are Included); Suprapubic, Subtotal, One Or Two Stages   \$794.5  | 55815 | Prostatectomy, Perineal Radical; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes      | \$1,595.58                            |
| Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral S5831 Calibration And/Or Dilation, And Internal Urethrotomy Are Included); Retropubic, Subtotal \$859.755840 Prostatectomy, Retropubic Radical, With Or Without Nerve Sparing; \$1,061.155842 Prostatectomy, Retropubic Radical, With Dilater Plevic Lymph Node Biopsy(S) \$1,062.155860 Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.55862 Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.55865 Hypogastric And Obturator Nodes \$1.2134. \$1.212.55866 Laparoscopy, Surgical Prostatectomy, Retropubic Radical, Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1.451.55867 Simple Surgical Subtotal Removal Of Prostate Using Laparoscope \$896.55873 Cryosurgical Ablation Of The Prostate (Includes Ultrasonic Guidance And Monitoring) \$5.786.55871 Insparineal Place Needles/Cath. Prostate (Includes Ultrasonic Guidance And Monitoring) \$5.786.55872 Insparineal Place Needles/Cath. Prostate (Palacement Of Interstalial Device(S) For Radiation Therapy Guidance (Eg. Fiducial Markers, Dosimeter), Prostate (Via Needle, Any Approach), \$5.876.55870 Insparineal Place Needles/Cath. Prostate \$91.42.45.45880 High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance \$891.45.45.45880 High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance \$891.45.65880 Incision And Drainage Of Vultva Or Perineal Abscess \$142.65890 United Procedure, Male Genital System Price By Report Placement Of Needles Or Catheters Into Pelvic Cryans And/Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement \$40.000 Prostate Genital System Price By Report Placement Of Designes Of Vultva Or Perineal Absce   |       | Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral    |                                       |
| Sessa   Calibration And/Or Dilation, And Internal Urethrotomy Are Included); Retropubic, Subtotal   Sessa   Prostatectomy, Retropubic Radical, With Lymph Node Biopsy(S)   \$1,062.*   Fostatectomy, Retropubic Radical, With Lymph Node Biopsy(S)   \$1,062.*   Sessa   Prostatectomy, Retropubic Radical; With Lymph Node Biopsy(S)   \$1,062.*   Sessa   Prostatectomy, Retropubic Radical; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes   \$1,234.*   Sessa   Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy)   \$995.*   Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy)   \$995.*   Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes   \$1,212.*   Sessa   Simple Surgical Subtotal Removal Of Prostate Using Laparoscope   \$995.*   Sessa   Simple Surgical Subtotal Removal Of Prostate Using Laparoscope   \$995.*   Sessa   Hypogastric And Obturator Nodes   \$1,212.*   Ses  | 55821 | Calibration And/Or Dilation, And Internal Urethrotomy Are Included); Suprapubic, Subtotal, One Or Two Stages                           | \$794.52                              |
| Prostatectomy, Retropubic Radical, With Dr Without Nerve Sparing; Prostatectomy, Retropubic Radical, With Lymph Node Biopsy(S) \$1,061. \$5842 Prostatectomy, Retropubic Radical, With Dilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes \$1,234. \$5860 Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; \$796.5 \$5862 Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.5 \$5865 Hypogastric And Obturator Nodes \$1,212.5 \$5866 Laparoscopy, Surgical Prostatectomy, Retropubic Radical, Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1,451.5 \$5867 Simple Surgical Substotal Removal Of Prostate Using Laparoscope \$3986.5 \$5873 Cryosurgical Ablation Of The Prostate (Includes Ultrasonic Guidance And Monitoring) \$5,786.5 \$5873 Cryosurgical Ablation Of The Prostate (Includes Ultrasonic Guidance And Monitoring) \$5,786.5 \$5873 Transparineal Place Needles/Cath. Prostate Placement Of Interstitial Device(S) For Radiation Therapy Guidance (Eg, Fiducial Markers, Dosimeter), Prostate (Via Needle, Any Approach), \$142.4 \$5880 High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance \$891.4 \$5890 Unlisted Procedure, Male Genital System Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement \$470.1 \$6420 Incision And Drainage Of Vulva Or Perineal Abscess \$110.2 \$142.4 \$180.1  |       | Prostatectomy, Including Control Of Postoperative Bleeding During Initial Hospitalization, Complete (Vasectomy, Meatotomy, Urethral    |                                       |
| Fostatectomy, Retropubic Radical; With Lymph Node Biopsy(S)  \$1,062.*  \$1,062.*  \$1,062.*  \$1,062.*  \$2,062.*  \$2,062.*  \$2,062.*  \$3,062.*  \$4,06             |       |  | \$859.71                              |
| Fossas Prostatectomy, Retropubic Radical; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes \$1,234.  Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.3  Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) \$995.3  Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, \$1,212.7  Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, \$1,212.7  Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, \$1,212.7  Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, \$1,212.7  Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, \$1,212.7  Exposure Of Dispassion Of The Prostate (Includes Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, \$1,212.7  Exposure Of Insertion Of Endoderal Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1,451.7  Exposure Of Insertion Of The Prostate (Includes Robotic Assistance, When Performed \$1,451.7  Exposure Of Insertion Of Exposure Includes Calculateral Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1,451.7  Exposure Of Insertion Of Exposure Includes Calculateral Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1,451.7  Exposure Of Insertion Of Exposure Insertion Of Calculateral Including Nerve Sparing, Includes Robotic Assistance, When Performed \$1,451.7  Exposure Of Insertion Of Exposure Insertion Of Exposure Insertion Of Exposure Insertion Of Exposure Insert  |       | 7, 1 0,  | \$1,061.81                            |
| Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance;   \$796.2   | 55842 | Prostatectomy, Retropubic Radical; With Lymph Node Biopsy(S)   | \$1,062.14                            |
| Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance;   \$796.2   | 55845 | Prostatectomy, Retropubic Radical; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, Hypogastric And Obturator Nodes    | \$1,234.14                            |
| Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy)  Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac,  55866   Laparoscopy, Surgical Prostatectomy, Retropubic Radical, Including Nerve Sparing, Includes Robotic Assistance, When Performed  \$1,451.  55866   Laparoscopy, Surgical Prostatectomy, Retropubic Radical, Including Nerve Sparing, Includes Robotic Assistance, When Performed  \$1,451.  55867   Simple Surgical Subtotal Removal Of Prostate Using Laparoscope  \$2,886.  55873   Cryosurgical Ablation Of The Prostate (Includes Ultrasonic Guidance And Monitoring)  \$5,786.  55875   Transparineal Place Needles/Cath. Prostate  \$3,222.  \$791.  Placement Of Interstitial Device(S) For Radiation Therapy Guidance (Eg, Fiducial Markers, Dosimeter), Prostate (Via Needle, Any Approach),  \$1,422.  \$1,422.  \$1,423.   |       |  | \$796.28                              |
| Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, hypogastric And Obturator Nodes \$1,212.  \$   |       |  | *                                     |
| Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Bilateral Pelvic Lymphadenectomy, Including External Iliac, hypogastric And Obturator Nodes \$1,212.  \$   | 55862 | Exposure Of Prostate, Any Approach, For Insertion Of Radioactive Substance; With Lymph Node Biopsy(S) (Limited Pelvic Lymphadenectomy) | \$995.34                              |
| Space   Hypogastric And Obturator Nodes   \$1,212.1.  |       |  | *                                     |
| Especial Comment of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement (Procedure, Male Genital System)   Procedure, Male Genital Gland Abscess   Site Organs and Drainage Of Vulva Or Perinaal Abscess   Site Organs and Drainage Of Female Genital Gland Or Cyst   Usis Of Labial Adhesions   Site Organs Substated (Procedure)   Site Organs Site Organs   Site Organs Site Organs Site Organs   Site Organs Site Organs Site Organs Site Organs Site Organs   Site Organs Site  | 55865 | Hypogastric And Obturator Nodes  | \$1,212.19                            |
| Simple Surgical Subtotal Removal Of Prostate Using Laparoscope   \$896.55873  | 55866 | Lanarrascony Surgical Prostatectomy Retropulsic Radical Including Nerve Sparing Includes Robotic Assistance When Performed             |                                       |
| S5873   Cryosurgical Ablation Of The Prostate (Includes Ultrasonic Guidance And Monitoring)   \$5,786.*   S5874   Injection Of Biodegradable Material Next To Prostate   \$3,222.7   Transparineal Place Needles/Cath. Prostate   \$791.2   Placement Of Interstitial Device(S) For Radiation Therapy Guidance (Eg, Fiducial Markers, Dosimeter), Prostate (Via Needle, Any Approach), Single Or Multiple   \$142.4   S5880   High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance   \$891.4   S5890   Unlisted Procedure, Male Genital System   Price By Rept Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement   \$470.5   S6405   Incision And Drainage Of Vulva Or Perineal Abscess   \$127.4   S6405   Incision And Drainage Of Female Genital Gland Abscess   \$140.5   S6406   Creation Of Drainage Tract For Female Genital Gland Or Cyst   \$183.5   S6407   University of Labial Adhesions   \$152.5   S6408   Hymenotomy, Simple Incision   \$42.5   S6501   Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)   \$243.7   S6605   Biopsy Of External Female Genitals, Each Additional Lesion   \$383.5   S6606   Removal Of External Female Genitals, Partial   \$383.5   S6607   Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy   \$1,084.5  |       |  | \$896.90                              |
| Sacration   Injection Of Biodegradable Material Next To Prostate   \$3,222.55875  |       | , , ,  |                                       |
| Fire State Placement Of Interstitial Device(S) For Radiation Therapy Guidance (Eg, Fiducial Markers, Dosimeter), Prostate (Via Needle, Any Approach), Single Or Multiple \$142.4 \$15880 High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance \$891.4 \$15880 Unlisted Procedure, Male Genital System Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement \$470.5 \$15920 Incision And Drainage Of Vulva Or Perineal Abscess \$127.4 \$15920 Incision And Drainage Of Female Genital Gland Abscess \$140.2 \$150.5 \$150. |       | , ,  |                                       |
| Placement Of Interstitial Device(S) For Radiation Therapy Guidance (Eg, Fiducial Markers, Dosimeter), Prostate (Via Needle, Any Approach), Single Or Multiple  55880 High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance  \$891.4  55890 Unlisted Procedure, Male Genital System Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement  55920 Application Sidus Incision And Drainage Of Vulva Or Perineal Abscess Sidus Incision And Drainage Of Female Genital Gland Abscess Sidus Oreation Of Drainage Tract For Female Genital Gland Or Cyst Sidus Indianage Of Labial Adhesions Sidus Inguine Incision Sidus Inguine Incision Sidus Inguine Incision Sidus Inguine Incision Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery) Sidus Inguine Incision Sidus Inguine Incisio   |       | , ,  |                                       |
| 55876Single Or Multiple\$142.455880High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance\$891.455899Unlisted Procedure, Male Genital SystemPrice By Report Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement\$470.755920Application\$470.756405Incision And Drainage Of Vulva Or Perineal Abscess\$127.756420Incision And Drainage Of Female Genital Gland Abscess\$140.256440Creation Of Drainage Tract For Female Genital Gland Or Cyst\$183.756441Lysis Of Labial Adhesions\$152.556442Hymenotomy, Simple Incision\$42.756501Destruction Of Lesion(S), Vulva; Simple (Eg. Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$150.256515Destruction Of Lesion(S), Vulva; Extensive (Eg. Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.756605Biopsy Of External Female Genitals, 1 Lesion\$98.656606Biopsy Of External Female Genitals, Each Additional Lesion\$35.356620Removal Of External Female Genitals, Simple\$662.856623Removal Of External Female Genitals, Partial\$883.356630Partial Removal Of External Female Genitals, Partial\$883.356631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.5  | 33373 | · ·  | Ψ/ 31.20                              |
| High-Intensity Ultrasound Destruction Of Cancerous Tissue In Prostate Gland, Accessed Through Rectum Using Ultrasound Guidance  \$891.4    Frice By Report Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement   Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement   Application  | 55876 |  | \$142.45                              |
| Price By Report   |       |  |                                       |
| Placement Of Needles Or Catheters Into Pelvic Organs And/ Or Genitalia (Except Prostate) For Subsequent Interstitial Radioelement  \$470.7  \$6405 Incision And Drainage Of Vulva Or Perineal Abscess \$127.4  \$6420 Incision And Drainage Of Female Genital Gland Abscess \$140.2  \$6440 Creation Of Drainage Tract For Female Genital Gland Or Cyst \$183.7  \$56441 Lysis Of Labial Adhesions \$152.5  \$6442 Hymenotomy, Simple Incision \$42.7  \$6551 Destruction Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery) \$150.6  \$6615 Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery) \$243.7  \$6606 Biopsy Of External Female Genitals, 1 Lesion \$383.6  \$6602 Partial Removal Of External Female Genitals, Simple \$6625 Removal Of External Female Genitals, Simple \$6630 Partial Removal Of External Female Genitals, Partial \$6631 Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy \$1,084.5  |       |  | \$891.47                              |
| 55920Application\$470.756405Incision And Drainage Of Vulva Or Perineal Abscess\$127.456420Incision And Drainage Of Female Genital Gland Abscess\$140.256440Creation Of Drainage Tract For Female Genital Gland Or Cyst\$183.756441Lysis Of Labial Adhesions\$152.856442Hymenotomy, Simple Incision\$42.756501Destruction Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$150.756515Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.756605Biopsy Of External Female Genitals, 1 Lesion\$98.656600Partial Removal Of External Female Genitals, Each Additional Lesion\$35.256620Partial Removal Of External Female Genitals, Simple\$606.856620Partial Removal Of External Female Genitals, Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.5  | 55899 |  | Price By Report                       |
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| Incision And Drainage Of Female Genital Gland Abscess \$140.2  56440 Creation Of Drainage Tract For Female Genital Gland Or Cyst \$183.7  56441 Lysis Of Labial Adhesions \$152.5  56442 Hymenotomy, Simple Incision \$42.7  56501 Destruction Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery) \$150.7  56515 Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery) \$243.7  56605 Biopsy Of External Female Genitals, 1 Lesion \$98.4  56606 Biopsy Of External Female Genitals, Each Additional Lesion \$35.3  56620 Partial Removal Of External Female Genitals, Simple \$606.8  56630 Partial Removal Of External Female Genitals, Partial \$883.7  56631 Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy \$1,084.5   |       |  |                                       |
| 56440Creation Of Drainage Tract For Female Genital Gland Or Cyst\$183.756441Lysis Of Labial Adhesions\$152.556442Hymenotomy, Simple Incision\$42.756501Destruction Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$150.756515Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.756608Biopsy Of External Female Genitals, 1 Lesion\$98.456609Partial Removal Of External Female Genitals, Simple\$606.856620Partial Removal Of External Female Genitals, Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.5  |       | ů  | · · · · · · · · · · · · · · · · · · · |
| 56441Lysis Of Labial Adhesions\$152.556442Hymenotomy, Simple Incision\$42.756501Destruction Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$150.756515Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.756608Biopsy Of External Female Genitals, 1 Lesion\$98.456609Partial Removal Genitals, Each Additional Lesion\$35.556620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals, Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.5  |       | · ·  | \$140.21                              |
| 56442Hymenotomy, Simple Incision\$42.756501Destruction Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$150.756515Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.756606Biopsy Of External Female Genitals, 1 Lesion\$98.656600Partial Removal Of External Female Genitals, Simple\$606.856620Removal Of External Female Genitals, Simple\$606.856630Partial Removal Of External Female Genitals, Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.5   |       | ·  |                                       |
| 56501Destruction Of Lesion(S), Vulva; Simple (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$150.756515Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.756605Biopsy Of External Female Genitals, 1 Lesion\$98.656600Partial Removal Of External Female Genitals, Each Additional Lesion\$35.356620Partial Removal Of External Female Genitals, Simple\$601.256625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.5  |       |  |                                       |
| 56515Destruction Of Lesion(S), Vulva; Extensive (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery)\$243.756605Biopsy Of External Female Genitals, 1 Lesion\$98.456606Biopsy Of External Female Genitals, Each Additional Lesion\$35.356620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.8   |       |  | \$42.78                               |
| 56605Biopsy Of External Female Genitals, 1 Lesion\$98.456606Biopsy Of External Female Genitals, Each Additional Lesion\$35.356620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.8  |       |  | \$150.17                              |
| 56606Biopsy Of External Female Genitals, Each Additional Lesion\$35.356620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.8   |       |  | \$243.72                              |
| 56620Partial Removal Of External Female Genitals, Simple\$606.856625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.8  |       |  | \$98.43                               |
| 56625Removal Of External Female Genitals. Complete\$617.256630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.8   |       |  | \$35.36                               |
| 56630Partial Removal Of External Female Genitals, Partial\$883.756631Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy\$1,084.8  |       |  | \$606.83                              |
| 56631 Vulvectomy, Radical, Partial; With Unilateral Inguinofemoral Lymphadenectomy \$1,084.5  |       | ,  | \$617.27                              |
|   |       |  | \$883.72                              |
| 56632 vulvectomy, kadical, Partial; With Bilateral Inguinotemoral Lymphadenectomy \$1,318.8   |       |  | \$1,084.51                            |
|   | 56632 | vuivectorny, radical, Partial; vvitn Bilateral Inguinoremoral Lymphadenectomy  | \$1,318.87                            |

| 59833 Winderdomy, Stanfact, Compilete, Will Unitained Impandemoral Lymphadementary  51.18.7.  59827 Winderdomy, Marcial, Compilete, Will Unitained Impandemoral Lymphadementary  51.18.7.  59827 Winderdom, Wandrad, Compilete, Will Biolated Impandemoral Lymphadementary  51.58.2.  59827 Winderdom, Wandrad, Compilete, Will Biolated Impandemoral Lymphadementary  51.58.2.  59828 Winderdom, Wandrad, Compilete, Will Biolated Impandemoral Lymphadementary  51.58.2.  59829 Place Reprod Of Hernitian of Hunter Operang, Open Processine  51.59.2.  59820 Place Reprod Of Intendual  50.59.2.  59820 Calpaceage, Of The Valvar,  50.59.2.  59820 Calpaceage, Of The Valvar,  50.59.2.  59820 Calpaceage, Of The Valvar,  59820 Calpaceag  | Cada  | Description   | Faa                  |
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| Seption   Venerous products   Computer Will Disabased Injuriodencous   Junphadenceous   Seption   Septio  |       | Description Vulvestamy Padical Complete:  | Fee                  |
| 98937 Victoricony, Radical Compate, Will Blatenia Inguinotencoal Lymphademectory 91,3850 (1994) (Vehectory, Radical Compate, Will Pagardemont Lills, And Public Lymphademectory 91,3850 (1994) (Patri Retroval CM Merithams Al Userian Cherria, Open Procedure 91,1910) (1994) (199  |       |   |                      |
| Seption   Discretative   Raticals Compiler. With Program/composit Risk And Policis Lynghusbenectomy   \$1,836,000   Policis Report of Fernace Gental Gland Or Cyst   \$277.5   Seption Policis Report of Tennace   \$277.5   Seption Policis Report Of The Vulva:   \$277.5   Seption Policis Report Of The Vulva:   \$277.5   Seption Composition   \$277.5   Seption Compos   |       |   |                      |
| 58700   Partial Removal Of Membrane & Ularine Opening, Open Proceeding  58700   Removal Of Frende Gendrich Growth of Ordy:  58700   Septial Regard Of Introbus  58700   Septial Regard Of The Vulvia:  58700   Septial Regard Of The  |       |   |                      |
| Serzio   Control of Fennie Central Cland Of Cyst   September   Serzio   S  |       |   |                      |
| 58600 (Disropissor Frienders States)  58600 (Disropissor Frienders States)  58600 (Disropissor Frienders States)  58600 (Disposor Frienders Frienders States)  58600 (Disposor Frienders Frienders States)  58600 (Disposor Friend  |       |   | •                    |
| Section   Principatings, Repair Of Perincipan, Non-Obsterical (Separate Procedure)   \$15.05.05   |       | ,   |                      |
| 5800 Cubescays Of The Vulvas With Biopsy (5) 5802 Cubescays With Education 5700 Cubescays With E  |       | '   |                      |
| S8800 Colposcopy O'The Vulva: With Elispopy (5)  S18162 Colposcopy O'The Vulva: With Elispopy (5)  S18162 Colposcopy With Exploration  S18163 Colposcopy With Exploration  S18  |       |   |                      |
| 56821 Colposacry Of The Vuka, With Bopay (S) 51692 Colposacry With Exploration 57010 Colposacry College (Separate Proceeding) 57010 Colposacry College (Separate Proceding) 57010 Colposacry Of Viginal Lesion(S), Sampe (SE, Laser Surgery, Exercisosurgery, Crossurgery, Chemosurgery) 57010 Colposacry Of Viginal Lesion(S), Extensive (Separate Procedure) 5710 Colposacry Of Viginal Separate (Separate Procedure) 5710 Colposacry Of Viginal Separate (Separate Procedure) 5711 Viginate Colposacry Complexes Removal Of Viginal Visit, With Removal Of Peravagnal Tissue (Redical Viginactory) 5711 Viginate Colposacry Complexes Removal Of Viginal Visit, With Removal Of Peravagnal Tissue (Redical Viginactory) 5712 Colposatry Of Viginal Separate 5712 Colposatry Of Viginal Separate 5713 Colposatry Of Viginal Separate (Separate Procedure) 5713 Colposatry Of Viginal Separate (Separate Procedure) 5713 Colposatry Of Viginal Separate (Separate Procedure) 5714 Colposatry Of Viginal Separate (Viginal Separate Procedure) 5715 Colposatry Of Viginal Separate (Viginal Separate (Viginal Separate (Vigi  |       |   | •                    |
| 57000 Cobotomy: With Enrique Of Pelvic Abscess 57000 Cobotomy: With Enrique Of Pelvic Abscess 57000 Cobocomesis (Separate Procedure) 57100 Cobocomesis (Separate Procedure) 57100 Cobocomesis (Separate Procedure) 57100 Cobocomesis (Separate Procedure) 57000 Colocomesis (Separate Procedure) 57100 Colocomesis (Separate Procedure) 5710 Colocomesis (Separate Procedure) 5711 Colocomesis (Separate Procedure) 5711 Colocomesis (Separate Procedure) 5711 Colocomesis (Separate Procedure) 5711 Colocomesis (Separate Procedure) 5712 Colocomesis (Separate Procedure) 5713 Colocomesis (Separate Procedure) 5714 Colocomesis (Separate Procedure) 5715 Colocomesis (Separate Procedure) 5716 Colocomesis (Separate Procedure) 5717 Colocomesis (Separate Procedure) 5718 Colocomesis (Separate Procedure) 5719 Colocomesis (Separate Procedure) 5719 Colocomesis (Separate Procedure) 5719 Colocomesis (Separate Procedure) 5719 Colocomesis (Separate Procedure) 5710 Colocomesis (Separate Procedure) 5710 Colocomesis (Separate Procedu  |       |   |                      |
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| S1020   Colocomises (Separate Procedure)   S11020   |       |   |                      |
| 57022 [Incision And Drianage Of Vaginal Heranstonic, Obserbical/Posphartum 57023 [Incision And Drianage Of Vaginal Heranstonic, Non-Dissertical (Eg., Post-Traums, Spontaneous Bleeding) 5303.6 57061 [Dissruction Of Vaginal Lesion(S)]. Serpise (Eg.) Laser Surgery, Eutocrosurgery, Cryposurgery, Chemosurgery) 5214-9 57100 [Bostruction Of Vaginal Lesion(S)]. Serpise (Eg.) Laser Surgery, Eutocrosurgery, Cryposurgery, Chemosurgery) 521-9 5710 [Dissruction Of Vaginal Lesion(S)]. Serpise (Eg.) Laser Surgery, Eutocrosurgery, Cryposurgery, Chemosurgery) 521-9 5710 [Dissruction Of Vaginal Lesion(S)]. Serpise (Eg.) Laser Surgery, Eutocrosurgery, Cryposurgery, Chemosurgery) 521-9 5710 [Dissruction Of Vaginal Lesion(S)]. Serpise (Eg.) Lesion England Chemosurgery, Cryposurgery,  |       |   |                      |
| S2222 Section And Drainage Of Vaginal Hernatoms, Non-Obsetterial (Eg. Post-Traums, Sprontaneous Beeding) \$131.0 \$7060 Destruction Of Vaginal Lesion(S); Extensive Kigupt, Electrosurgery, Cryonurgery, Chemosurgery) \$131.0 \$7060 Destruction Of Vaginal Lesion(S); Extensive Kigupt, Electrosurgery, Chyonurgery, Chemosurgery) \$23.4 \$7100 Descript Of Vaginal Microsis; Emple (Separate Procedure) \$710 Descript Of Vaginal Microsis; Emple (Separate Procedure) \$710 Vaginal Microsis; Charles Vaginal Valle (Will Removal Of Vaginal Walle) \$710 Vaginal Microsis; Vaginal Valle (Will Removal Of Vaginal Valle) \$710 Vaginal Content Cort (Vaginal Valle) \$711 Vaginacetomy, Partial Removal Of Vaginal Walle, Will Removal Of Paravaginal Tissue (Radical Vaginectomy) \$11,570 \$711 Vaginectomy, Complete Removal Of Vaginal Walle, Will Removal Of Paravaginal Tissue (Radical Vaginectomy) \$11,570 \$11,570 \$11 Vaginectomy, Complete Removal Of Vaginal Walle, Will Removal Of Paravaginal Tissue (Radical Vaginectomy) \$11,570 \$11,5   |       |   |                      |
| Sertuction Of Vagnat Leson(S). Simple (Eg., Laser Surgery, Ebertosurgery, Chemosurgery)  \$13.10. \$7000 Bostruction Of Vagnat Leson(S). Extensive (Eg., Laser Surgery, Ebertosurgery, Chemosurgery)  \$23.20. \$7100 Biopsy Of Vagnatal Mucoas. Simple (Separate Procedure)  \$15.10. \$15. |       |   |                      |
| \$23.49 \$7006 Bloops Of Vagania Mucosa: Extensive (Eg. Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery) \$7107 Bloops Of Vagania Mucosa: Extensive, Requiring Suture (Including Cyes) \$7107 Of Vagania Mucosa: Extensive, Requiring Suture (Including Cyes) \$7108 Vaganectory, Partial Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vaganectory, Partial Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Partial Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Partial Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Partial Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Complete Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Complete Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Complete Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Complete Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Complete Removal Of Vagania Walt, Will Removal Of Parawagnia Tissue (Radical Vagnectory) \$7109 Vagnectory, Complete Removal Of Vagania Walt, Will Walt, Will Walt, Will Walt, Will  |       |   |                      |
| 57100 Sapesy Of Vaganel Muonas, Simple (Separate Procedure) 57106 Sapesy Of Vaganel Autonas, Exchesive, Requiring Statute (Including Cysts) 57106 Naginectomy, Partial Ramoval Of Vagania Wast, 57107 Vaganectomy, Partial Ramoval Of Vagania Wast, Wilk Removal Of Paravagnial Tissue (Radical Vaginectomy) 57107 Vaganectomy, Partial Ramoval Of Vagania Wast, Wilk Removal Of Paravagnial Tissue (Radical Vaginectomy) With Bilaterial Total Pelvic 57107 Vaganectomy, Partial Ramoval Of Vagania Wast, Wilk Removal Of Paravagnial Tissue (Radical Vaginectomy) 57107 Vaganectomy, Partial Ramoval Of Vagania Wast, Wilk Removal Of Paravagnial Tissue (Radical Vaginectomy) 57107 Vaganectomy, Partial Ramoval Of Vagania Wast, Wilk Removal Of Paravagnial Tissue (Radical Vaginectomy) 57107 Vaganectomy, Partial Ramoval Of Vagania Wast, Wilk Removal Of Paravagnial Tissue (Radical Vaginectomy) 57107 Vaganectomy, Competer Ramoval Of Vagania Wast (Wilk Wilk Removal Of Paravagnial Tissue (Radical Vaginectomy) 57108 Statucio Cluvagnia (Vagania Vagania Vagania) 57109 Statucio Cluvagnia (Vagania Vagania Vagania Vagania) 57109 Statucio Cluvagnia (Vagania Vagania Vagania) 57109 Statucio Cluvagnia (Vagania Vagania Vagania Vagania) 57109 Statucio Cluvagnia (Vagania Vagania Vagania Vagania) 5710 Vagania (Vagania Vagania Vag  |       |   |                      |
| Strips   Or Vaginard Microsa: Estenative, Requiring Sutrue (including Cysis)   Strips   Str  |       |   |                      |
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| Vagnectomy, Parlial Removal Of Vaginal Wall. With Removal Of Paravaginal Tissue (Radical Vaginectomy) With Bilateral Total Pelvic 571109 (Imphaenectomy, Acon Park-Ancite Lymph Nobes Sampling (Biospo).  \$1,5710 (Vaginectomy, Complete Removal Of Vaginal Wall. With Removal Of Paravaginal Tissue (Radical Vaginectomy).  \$1,5710 (Vaginectomy, Complete Removal Of Vaginal Wall. With Removal Of Paravaginal Tissue (Radical Vaginectomy).  \$1,5710 (Vaginal Control, Complete Removal Of Vaginal Wall. With Removal Of Paravaginal Tissue (Radical Vaginectomy).  \$1,5710 (Vaginal Control, Vaginal Approach).  \$2,1715 (Vaginal Control, Vaginal Control, Vaginal Covado, For Cinical Brachythropy).  \$3,1715 (Vaginal Control, Vaginal Approach).  \$3,1715 (Vaginal Control, Vaginal Control, Vaginal Covado, For Cinical Brachythropy).  \$3,1715 (Vaginal Control, Vaginal Control, Vaginal Covado, For Cinical Brachythropy).  \$3,1715 (Vaginal Control, Vaginal Control, Vaginal Covado, For Cinical Brachythropy).  \$3,1715 (Vaginal Control, Vaginal Control, Vaginal Covado, For Cinical Brachythropy).  \$3,1715 (Vaginal Control, Vaginal Control, Vaginal Covado, For Cinical Brachythropy).  \$3,1715 (Vaginal Control, Vaginal Control, Vag   |       |   |                      |
| ST-1016   Umphademectomy, And Para-Aortic Lymph Node Sampling (Biopsy)   S1,579.0   S1  | 0.107 |   | ψ1,002.02            |
| Spitol   Saginectomy, Complete Removal Of Vaginal Wall; With Removal Of Paravaginal Tissue (Radical Vaginectomy)   \$1,575.0   \$1,575.0   Statiston (Court Of Vaginal Sputin)   \$1,975.0  | 57109 |   | \$1 579 01           |
| ST110   Surre Course Of The Vaginar Walt, With Removal Of Paravaginal Tissue (Radical Vaginectomy)   S1,5710   States Course Of The Vaginar And Vaginal Opening   S4904   S1158   Excision Of Vaginar (Syst Of V  |       |   | \$920.49             |
| Surue Closure OT The Vagnia And Vagnial Opening \$217.57108 (Excision OT Vagnial Suptum) \$227.57108 (Excision OT Vagnial Suptum) \$227.57108 (Excision OT Vagnial Approach Cyapinal Ovagnia (Potential Processing Survey) \$227.57108 (Impation OT Vagnian And Or Vagnial Ovagnia (Potential Brachytherapy) \$412.28 (Excision OT Vagnian And Or Vagnial Ovagnia (Potential Brachytherapy) \$412.29 (Excision OT Vagnian And Or Vagnial And Or Vagnial Approach (Potential Brachytherapy) \$412.29 (Excision OT A Vagnial Radion Afterbasidin Apportative For Circlical Brachytherapy) \$412.20 (Excision OT A Vagnial Radion Afterbasidin Apportative For Circlical Brachytherapy) \$412.20 (Excision OT A Vagnial Radion Afterbasidin Apportative For Circlical Brachytherapy) \$412.20 (Excision OT Ary Hemostatic Agent Or Pack For Sportaneous Or Traumatic Non-Obstatrical Hemorrhage (Separate Procedure) \$419.25 (Excision OT Ary Hemostatic Agent Or Pack For Sportaneous Or Traumatic Non-Obstatrical Hemorrhage (Separate Procedure) \$419.25 (Excision OT Ary Hemostatic Agent Or Pack For Sportaneous Or Traumatic Non-Obstatrical Hemorrhage (Separate Procedure) \$419.25 (Excision OT Ary Hemostatic Agent Or Pack For Sportaneous Or Traumatic Non-Obstatrical) \$419.25 (Excision OT Ary Hemostatic Agent Or Pack For Sportaneous Or Traumatic Non-Obstatrical Hemorrhage (Separate Procedure) \$419.25 (Excision OT Ary Hemostatic Agent Or Pack For Sportaneous Or Traumatic Non-Obstatrical Hemorrhage (Separate Procedure) \$419.25 (Excision OT Hemostation OT Blackber Into Vagnial Wall Sportaneous Or Pack For Spo  |       |   |                      |
| \$217.55   Excision Of Vaginal Septum   \$227.55  |       |   |                      |
| 57158 Excision Of Vaginal ADOC Application Of Drug To Treat Infection       \$52.6         57150 Irrigation Of Vagina And/Or Application Of Drug To Treat Infection       \$58.6         57151 Isriarion Of Ularine Tandem And/Or Vaginal Ovoids For Clinical Brachytherapy       \$227.5         57160 Ilrigation Of N. Algoinal Radiation Afteridating Apparatus For Clinical Brachytherapy       \$237.5         57160 Pilling And Insertion Of Pessary Or Other Intravaginal Support Device       \$51.3         57180 Introduction Of Any Hemostatic Agent Or Pack For Spontaneous Or Traumatic Non-Obstetrical Hemorrhage (Separate Procedure)       \$19.2.5         57200 Colpornhaghty, Suture Of Injury Of Vagina (Monobisterical)       \$276.1         57210 Colporementraphy, Suture Of Injury Of Vagina AndOr Perineum (Nonobeterical)       \$276.1         57220 Plastic Operation On Ularitari Sphinciar, Vaginal Approach (Eg. Kally Urethral Plication)       \$323.3         57220 Plastic Operation On Ularitari Sphinciar, Vaginal Approach (Eg. Kally Urethral Plication)       \$323.0         57220 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$324.8         57220 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$324.8         57220 Plastic Colpornabyth, Repair Of Neghor Of Vagina And Tissue Separating Vagina, Rectum, And Bladder Into Vaginal Wall       \$324.2         57220 Plastic Colpornabyth, Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder Into Vaginal Wall Deviation of Vaginal Approach<   |       |   |                      |
| STATES   Tripation Of Vagina And/Or Application Of Drug To Treat Infection   State  |       |   |                      |
| 57155 (Insertion Of Ubreine Tandem And/Or Vaginal Oviotis For Clinical Brachytherapy       \$212.5         57166 (Insertion Of A Vaginal Ration Alterhacidary Apparatus For Clinical Brachytherapy       \$237.5         57160 (Institution of D. A. Vaginal Ration Alterhacidary Apparatus For Clinical Brachytherapy       \$513.5         57170 (Dephragm Or Cervical Cap Filting With Instructions       \$72.5         57180 (Introduction Of Amy Hemostatic Agent Or Peak For Spontaneous Or Traumatic Non-Obstetrical Hemorrhage (Separate Procedure)       \$192.5         57210 (Colopperation Of Dray Hemostatic Agent Or Peak For Spontaneous Or Traumatic Non-Obstetrical Hemorrhage (Separate Procedure)       \$192.5         57220 (Plastic Operation On Urethral Sphincter, Vaginal Approach (Eg., Kelly Urethral Plication)       \$333.0         57230 (Plastic Repair Of Urethrocole       \$337.0         57240 (Papara Of Hemiston Of Bladder Into Vaginal Approach (Eg., Kelly Urethral Plication)       \$343.6         57250 (Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$344.5         57250 (Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$344.5         57250 (Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$341.4         57252 (Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$341.4         57252 (Plastic Repair Of Hemiston Of Repair Of Rectocole With Or Wilhout Perineorrhaphy       \$321.5         57252  |       | 0 ,   |                      |
| 57156 Insertion Of A Vaginal Radiation Atterloading Apparatus For Clinical Brackytherapy       \$237.5         57160 Eiting And Insertion Of Pessay Of Other Intravaginal Support Device       \$513.2         57170 Diaphragm Or Cenvical Cap Fitting With Instructions       \$72.5         57210 Diaphragm Or Cenvical Cap Fitting With Instructions       \$72.5         57210 Diaphragm Or Cenvical Cap Fitting With Instructions       \$192.5         57210 Diaphragm Or Cenvical Cap Fitting With Instructions       \$278.1         57210 Diaphragm Or Cenvical Cap Fitting With Instructions       \$278.1         57210 Diaphragm Or Cenvical Cap Fitting With Instructions       \$278.1         57210 Diaphragm Or Cenvical Cap Fitting With Instructions       \$323.6         57210 Diaphragm Or Cap Diaphragm Or Cap With Instruction Or Sapport (Vaginal Approach (Eg. Kelly Urefural Pleation)       \$323.6         57220 Plastic Cap Departation Or Urefurits Sphricter, Yaginal Approach (Eg. Kelly Urefural Pleation)       \$387.5         57250 Plastic Repair Of Urefurits Sphricter, Yaginal Approach (Eg. Kelly Urefural Pleation)       \$387.5         57260 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$373.4         57260 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$373.4         57260 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$373.4         57260 Plastic Repair Of Plastics and And Tissue Separati   |       |   |                      |
| S7100   Introduction Of Pessary Or Other Intravaginal Support Device   S7135  |       | ů , i,  |                      |
| S7780   Diaphragm Or Cervical Cap Fitting With Instructions   \$725.  |       | , , , ,   |                      |
| ST180   Introduction Of Any Hemostatic Agent Or Pack For Spontaneous Or Traumatic Non-Obstetrical Hemorrhage (Separate Procedure)   \$192.5   \$7270   Colopornaphy, Suture Of Injury Of Vagina (Nonobstetrical)   \$276.1   \$7271   Colopornaphy (Suture Of Injury Of Vagina And Or Perineum (Nonobstetrical)   \$2383.5   \$7272   Plastic Operation On Urethral Sphinicer, Vaginal Approach (E.g. Kelly Urethral Pilication)   \$232.0   \$252.0   Plastic Operation On Urethral Sphinicer, Vaginal Approach (E.g. Kelly Urethral Pilication)   \$232.0   \$252.0   Plastic Repair Of Urethrocele   \$252.0   \$252.0   Plastic Repair Of Uragina And Tissus Separating Vagina, Rectum, And Bladder   \$252.0   \$252.0   Plastic Repair Of Uragina And Tissus Separating Vagina, Rectum, And Bladder   \$252.0   \$252.0   Plastic Repair Of Uragina And Tissus Separating Vagina, Rectum, And Bladder   \$252.0   \$252.0   Separating Vagina   \$252.0   |       |   |                      |
| 57200 Colporthaphy, Suture Of Injury Of Vagina (Nonobestetrical)         \$276.1           57210 Colpoprineoricalphy, Suture Of Injury Of Vagina And/Or Perineum (Nonobestetrical)         \$348.8           57220 Plastic Operation On Urethral Sphincler, Vaginal Approach (Eg. Kelly Urethral Plication)         \$323.0           57230 Plastic Operation On Urethral Sphincler, Vaginal Approach (Eg. Kelly Urethral Plication)         \$325.0           57230 Plastic Repair Of Hermation Of Bladder Into Vaginal Wall         \$353.5           57250 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder         \$353.0           57260 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder         \$353.0           57260 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder         \$321.4           57260 Plastic Repair Of Vagina And Bladder Into Vaginal Wall         \$821.4           Insertion Of Nesh Or Other Prosthesis For Repair Of Perbevic Floor Defect, Each Site (Anterior, Posterior Compartment), Vaginal Approach (List           57268 Repair Of Portusion Of Intestine Into Rectum Or Vagina, Through Vagina         \$226.0           57280 Colpopesy, Abdominal Approach         \$345.8           57282 Colpopesy, Vaginal: Extra-Pertinosal Approach (Herosacral, Levator Myorrhaphy)         \$745.8           57283 Colpopesy, Vaginal: Intra-Peritoneal Approach (Herosacral, Levator Myorrhaphy)         \$712.5           57284 Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure <td></td> <td></td> <td></td>   |       |   |                      |
| 57210 Colpoperineorthaphy, Suture Of Injury Of Vagina And/Or Perineum (Nonobstertical)       \$343.8         57220 Plastic Operation On Uerbrit Sphincter, Vaginal Approach (Eg. Kelly Urethral Plication)       \$323.0         57230 Plastic Repair Of Uerbritocele       \$364.5         57240 Repair Of Hermistion Of Bladder Into Vaginal Wall       \$534.5         57250 Posterior Colporthaphy, Repair Of Rectocele With Or Without Perineorrhaphy       \$534.5         57260 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$731.4         57268 Repair Of Hermistion Of Rectum And Bladder Into Vaginal Wall       \$321.4         Insertion Of Mesh Or Other Prosthesis For Repair Of Pelvic Floor Defect, Each Site (Anterior, Posterior Compartment), Vaginal Approach (List       \$226.0         57268 Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Vagina       \$221.7         57270 Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal       \$324.5         57280 Colpopexy, Addominal Approach       \$327.6         57281 Colpopexy, Vaginal, Extra-Peritoneal Approach (Userosacral, Levator Myormaphy)       \$373.6         57282 Repair Of Trotrusion Of Intestine Into Rectum Or Vagina, Userator Myormaphy       \$735.0         57283 Colpopexy, Vaginal, Extra-Peritoneal Approach (Userosacral, Levator Myormaphy)       \$375.6         57284 Colpopexy, Vaginal, Extra-Peritoneal Approach (Userosacral, Levator Myormaphy)       \$736.0 <td< td=""><td></td><td></td><td></td></td<>  |       |   |                      |
| 57220 Plastic Operation On Urethral Sphincter, Vaginal Approach (Eg. Kelly Urethral Plication)       \$323.0         57230 Plastic Repair Of Hemiation Of Bladder Into Vaginal Wall       \$345.7         57240 Repair Of Hemiation Of Bladder Into Vaginal Wall       \$503.4         57260 Plastic Repair Of Jebrahy, Repair of Nectocole With Or Without Perineorrhaphy       \$530.4         57260 Plastic Repair Of Jepinal And Tissue Separating Vagina, Rectum, And Bladder       \$731.4         57260 Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder       \$521.4         Insertion Of Mesh Or Other Prosthesis For Repair Of Pelvic Floor Defect, Each Site (Anterior, Posterior Compartment), Vaginal Approach (List       \$226.0         57268 Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal       \$745.8         57280 Colopoewy, Vaginal; Extra-Perifoneal Approach (Sacrospinous, Iliococcygeus)       \$537.6         57282 Colopoewy, Vaginal; Extra-Perifoneal Approach (Sacrospinous, Iliococcygeus)       \$572.5         57283 Repair Of Protrusion Of Intestine Into Rectum Or Vagina Proceedure       \$784.0         57284 Repair Through Abdomen Or Vaginal Hulta-Perifoneal Approach (Sacrospinous, Iliococcygeus)       \$537.2         57282 Colopoewy, Vaginal; Extra-Perifoneal Approach (Sacrospinous, Iliococcygeus)       \$772.5         57283 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach       \$772.5         57284 Repair Through Abdomen Of Vagina   |       |   |                      |
| Sasta   Sast  |       |   |                      |
| Spatial Spatial Posterior Colporthaphy, Repair Of Rectocele With Or Without Perineorrhaphy   Spatial Spatial Repair Of Neghand Posterior Colporthaphy, Repair Of Rectocele With Or Without Perineorrhaphy   Spatial Repair Of Vagina And Tissue Separating Vagina Rectum, And Bladder   Spatial Repair Of Vagina And Tissue Separating Vagina Rectum, And Bladder   Spatial Repair Of Vagina And Tissue Separating Vagina Rectum, And Bladder   Spatial Repair Of Vagina And Tissue Separating Vagina Rectum, And Bladder   Spatial Repair Of Herbitson Of Mesh Or Other Prosthesis For Repair Of Pelvic Floor Defect, Each Site (Anterior, Posterior Compartment), Vaginal Approach (List Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Vagina   Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   Spatial Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   Spatial Repair Of Protrusion Of Vaginal Wall Defect, Open Procedure   Spatial Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure   Spatial Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure   Spatial Repair Of Protrusion Of Sing For Stress Incontinence (Eg. Fascia Or Synthetic)   Spatial Repair Of Protrusion Of Artificial Vagina, With Graft   Spatial Repair Of Protrusion Of Artificial Vagina, With Graft   Spatial Repair Of Protrusion Of Artificial Vagina, With Graft   Spatial Repair Of Rectovaginal Fistula; Vaginal Approach   Spatial Repair Of Rectovaginal Fistula; Vaginal Approach   Sp  |       |   |                      |
| S250   Pasteiror Colpormaphy, Repair Of Rectocele With Or Without Perineorrhaphy   \$300   \$721   \$7260   Plastic Repair Of Vagina And Tissue Separating Vagina, Rectum, And Bladder   \$731.4   \$721.4                      |       | ·   |                      |
| S7250   Plastic Repair Of Vagina And Tissue Separating Vagina Rectum, And Biadder   \$731.4   |       | · ·   |                      |
| Septiment   Sept  |       |   |                      |
| Insertion Of Mesh Or Other Prosthesis For Repair Of Pelvic Floor Defect, Each Site (Anterior, Posterior Compartment), Vaginal Approach (List Separately In Addition To Code For Primary Procedure)  57268 Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Vagina  572780 Colpopexy, Potrusion Of Intestine Into Rectum Or Vagina, Through Abdominal  57280 Colpopexy, Vaginal; Intra-Peritoneal Approach (Sacrospinous, Iliococcygeus)  57282 Colpopexy, Vaginal; Intra-Peritoneal Approach (Sacrospinous, Iliococcygeus)  57283 Colpopexy, Vaginal; Intra-Peritoneal Approach (Uterosacrai, Levator Myorrhaphy)  57284 Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure  57285 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach  57286 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach  57287 Removal Or Revision Of Sling For Stress Incontinence (Eg. Fascia Or Synthetic)  57288 Pereya Procedure, Including Anterior Colporrhaphy  57291 Construction Of Artificial Vagina; With Graft  57292 Construction Of Artificial Vagina; With Graft  57298 Revision (Including Removal) Of Prosthetic Vaginal Graft, Open Procedure  57298 Revision (Including Removal) Of Prosthetic Vaginal Graft, Open Procedure  57298 Revision (Including Removal) Of Prosthetic Vaginal Graft, Open Procedure  57290 Closure Of Abnormal Drainage Tract From Abdomen  57291 Construction Of Artificial Vagina; With Graft  57303 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure  57305 Closure Of Abnormal Drainage Tract From Medica Canal (Urethra) Into Vagina  57306 Closure Of Abnormal Drainage Tract From Medica Canal (Urethra) Into Vagina  57307 Closure Of Abnormal Drainage Tract From Bidder Into Vagina  57308 Closure Of Abnormal Drainage Tract From Bidder Into Vagina  57309 Closure Of Abnormal Drainage Tract From Bidder Into Vagina  57300 Closure Of Abnormal Drainage Tract From Bidder Into Vagina  57300 Closure Of A  |       |   | •                    |
| 57268Separately In Addition To Code For Primary Procedure)\$226.057268Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Vagina\$521.757270Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal\$745.857280Colpopexy, Abdominal Approach\$884.857282Colpopexy, Vaginal; Extra-Peritoneal Approach (Sacrospinous, Iliococcygeus)\$637.657283Colpopexy, Vaginal; Intra-Peritoneal Approach (Uterosacral, Levator Myorrhaphy)\$712.557284Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure\$764.057285Paravaginal Defect Repair (Including Repair Of Cytoscole, If Performed); Vaginal Approach\$736.057287Removal Or Revision Of Sling For Stress Incontinence (Eg, Fascia Or Synthetic)\$751.457288Sing Operation For Stress Incontinence (Eg, Fascia Or Synthetic)\$751.457289Pereya Procedure, Including Anterior Colporrhaphy\$731.057291Construction Of Artificial Vagina; Without Graft\$506.857292Construction Of Artificial Vagina; With Graft\$506.857293Revision And Removal Of Prosthetic Vaginal Graft, Vaginal Approach\$367.657300Closure Of Abnormal Drainage Tract From Abdomen\$507.657301Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$10.3.757310Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$612.857320Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$16.2 <td>57265</td> <td></td> <td>\$821.40</td>  | 57265 |   | \$821.40             |
| 57258Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Nadominal\$521.757270Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal575.857280Colopopexy, Abdominal Approach\$848.857282Colopopexy, Vaginal; Extra-Peritoneal Approach (Sacrospinous, Iliococcygeus)\$637.657283Colopopexy, Vaginal; Intra-Peritoneal Approach (Uterosacral, Levator Myorrhaphy)\$712.557284Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure\$764.057285Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach\$730.557287Removal Or Revision Of Sling For Stress Incontinence (Eg. Fascia Or Synthetic)\$751.457288Sling Operation For Stress Incontinence (Eg. Fascia Or Synthetic)\$760.057291Construction Of Artificial Vagina; Without Graft\$760.057292Construction Of Artificial Vagina; With Graft\$758.857293Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach\$758.857295Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure\$875.757300Closure Of Rectovaginal Fistula; Vaginal Approach\$875.757305Closure Of Abnormal Drainage Tract From Medum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$1,003.757301Closure Of Abnormal Drainage Tract From Bedder Canal (Urethra) Into Vagina\$457.957330Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$524.857330Closure Of Abnormal Drainage Tract From Bladder Into Vag   | 57007 |   | <b>#</b> 000.00      |
| S7250   Repair Of Protrusion Of Intestine Into Rectum Or Vagina, Through Abdominal   S745.8   S7280 Colpopexy, Abdominal Approach   S884.8   S7282 Colpopexy, Vaginal: Extra-Peritoneal Approach (Sacrospinous, Iliococcygeus)   S877.5   S7282 Colpopexy, Vaginal: Intra-Peritoneal Approach (Uterosacral, Levator Myorrhaphy)   S712.5   S7284   Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure   S764.0   S7285   Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach   S730.5   S7287   Removal Or Revision Of Sling For Stress Incontinence (Eg., Fascia Or Synthetic)   S751.4   S7288   Sing Operation For Stress Incontinence (Eg., Fascia Or Synthetic)   S760.0   S76289   Pereyra Procedure, Including Anterior Colporrhaphy   S731.0   S7292   Construction Of Artificial Vagina; With Our Graft   S7522   S7292   Construction Of Artificial Vagina; With Graft   S7528, Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach   S7530   S7292   Revision And Removal Of Prosthetic Vaginal Graft, Vaginal Approach   S7530   S7300   Closure Of Abnormal Drainage Tract From Abdomen   S901.4   S7300   Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure   S1003.7   S7300   Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina   S148.8   S7301   Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina   S145.8   S7302   Closure Of Abnormal Drainage Tract From Bladder Into Vagina   S145.8   S7303   Closure Of Abnormal Drainage Tract From Bladder Into Vagina   S165.8   S7304   Closure Of Abnormal Drainage Tract From Bladder Into Vagina   S165.8   S7305   Closure Of Abnormal Drainage Tract From Bladder Into Vagina   S165.9   S7306   Closure Of Abnormal Drainage Tract From Bladder Into Vagina   S165.9   S7307   Closure Of Abnormal Drainage Tract From Bladder Into Vagina   S165.9   S7308   Closure Of Abnormal Drainage Tract From Bladder Into Vagina   S165.9   S7309   Closure  |       |   |                      |
| September   Sept  |       |   |                      |
| 57282 Colpopexy, Vaginal; Extra-Peritoneal Approach (Sacrospinous, Iliococcygeus) 57283 Colpopexy, Vaginal; Intra-Peritoneal Approach (Sacrospinous, Iliococcygeus) 57284 Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure 57286 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach 57287 Removal Or Revision Of Sling For Stress Incontinence (Eg. Fascia Or Synthetic) 57288 Sling Operation For Stress Incontinence (Eg. Fascia Or Synthetic) 57289 Pereyra Procedure, Including Anterior Colporthaphy 5731.0 57281 Construction Of Artificial Vagina; With Graft 57292 Construction Of Artificial Vagina; With Graft 57292 Construction Of Artificial Vagina; With Graft 57292 Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach 57293 Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach 57294 Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure 57300 Closure Of Abnormal Drainage Tract From Abdomen 57300 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure 57300 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure 57300 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina 57310 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57330 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57330 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant 57330 Closure Of Abnormal Drainage Tract From Urinary Bladder Into Vagina  |       |   |                      |
| 57283 Colpopexy, Vaginal; Intra-Peritoneal Approach (Uterosacral, Levator Myorrhaphy) 57286 Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure 57285 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach 57287 Removal Or Revision Of Sling For Stress Incontinence (Eg., Fascia Or Synthetic) 57287 Removal Or Revision Of Sling For Stress Incontinence (Eg., Fascia Or Synthetic) 57288 Sling Operation For Stress Incontinence (Eg., Fascia Or Synthetic) 57289 Perper Procedure, Including Anterior Colporrhaphy 57291 Construction Of Artificial Vagina; Without Graft 57292 Construction Of Artificial Vagina; With Graft 57293 Construction Of Artificial Vagina; With Graft 57296 Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach 57296 Revision And Removal Of Prosthetic Vaginal Graft, Vaginal Approach 57297 Removal Of Rectovaginal Fistula; Vaginal Approach 57305 Closure Of Rectovaginal Fistula; Vaginal Approach 57307 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure 57308 Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication 57310 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina 57311 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57321 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina 57322 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina 57323 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina 57324 Device Examination Under Anesthesia 57325 Closure Of Abnormal Drainage Tract From Urinary Bladder Into Vagina 57326 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina 57327 Closure Of Abnormal Drainage Tract From Urinary Bladder Into Vagina 57328 Personal Of Impacted Vaginal Foreign Body (Separate Proc  |       |   |                      |
| 57284Repair Through Abdomen Of Vaginal Wall Defect, Open Procedure\$764.0057285Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach\$730.557287Removal Or Revision Of Sling For Stress Incontinence (Eg. Fascia Or Synthetic)\$751.457288Sling Operation For Stress Incontinence (Eg. Fascia Or Synthetic)\$760.057289Pereyra Procedure, Including Anterior Colporrhaphy\$731.057291Construction Of Artificial Vagina; Without Graft\$506.857292Construction Of Artificial Vagina; With Graft\$758.857293Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach\$464.057296Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure\$875.757300Closure Of Rectovaginal Fistula; Vaginal Approach\$567.657301Closure Of Abnormal Drainage Tract From Abdomen\$901.457302Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$1,003.757303Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$457.957311Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina, With Transplant\$1457.957332Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$502.957333Vaginoplasty For Intersex State\$1,078.157401Dilation Of Vagina Under Anesthesia\$118.757415Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)\$153.3 <t< td=""><td></td><td></td><td></td></t<>   |       |   |                      |
| 57285Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed); Vaginal Approach\$730.557287Removal Or Revision Of Sling For Stress Incontinence (Eg, Fascia Or Synthetic)\$751.457288Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)\$750.057289Pereyra Procedure, Including Anterior Colporrhaphy\$731.057291Construction Of Artificial Vagina; Without Graft\$506.857292Construction Of Artificial Vagina; Without Graft\$506.857293Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach\$464.057296Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure\$875.757300Closure Of Rectovaginal Fistula; Vaginal Approach\$567.657307Closure Of Abnormal Drainage Tract From Abdomen\$901.457307Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$1,003.757310Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication\$612.757310Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$457.957311Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$520.957332Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$520.957333Vaginoplasty For Intersex State\$1.078.157410Delvic Examination Under Anesthesia\$118.757410Delvic Examination Under Anesthesia\$118.757420 <t< td=""><td></td><td></td><td></td></t<>  |       |   |                      |
| S75287   Removal Or Revision Of Sling For Stress Incontinence (Eg, Fascia Or Synthetic)   \$751.43  |       |   |                      |
| 57288Sling Operation For Stress Incontinence (Eg, Fascia Or Synthetic)\$760.0057289Pereyra Procedure, Including Anterior Colporrhaphy\$731.0057291Construction Of Artificial Vagina; Without Graft\$506.8157292Construction Of Artificial Vagina; Without Graft\$758.8157293Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach\$464.0057296Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure\$875.7157300Closure Of Rectovaginal Fistula; Vaginal Approach\$567.6157305Closure Of Abnormal Drainage Tract From Abdomen\$901.4357307Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$1,003.7257308Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$612.7257310Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$457.9257320Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$520.9357330Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$520.9357330Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$520.9357335Vaginoplasty For Intersex State\$1,078.1157410Dilation Of Vagina Under Anesthesia\$116.6657415Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)\$153.3357420Colposcopy Of The Entire Vagina, With Cervix If Present\$134.657423Paravaginal Defect Repair (Including R   |       |   |                      |
| 57289Pereyra Procedure, Including Anterior Colporrhaphy\$731.057291Construction Of Artificial Vagina; Without Graft\$506.857292Construction Of Artificial Vagina; With Graft\$758.857293Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach\$464.057296Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure\$875.7557300Closure Of Rectovaginal Fistula; Vaginal Approach\$567.657305Closure Of Abnormal Drainage Tract From Abdomen\$901.457307Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$1,003.757308Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication\$612.757310Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$457.957311Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant\$514.857320Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$520.957330Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina\$706.557335Vaginoplasty For Intersex State\$1,078.157410Pelvic Examination Under Anesthesia\$116.657411Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)\$153.357420Colposcopy Of The Entire Vagina, With Cervix If Present\$134.657421Colposcopy Of The Entire Vagina, With Cervix If Present\$134.6 <td></td> <td></td> <td></td>  |       |   |                      |
| 57291Construction Of Artificial Vagina; Without Graft\$506.857292Construction Of Artificial Vagina; With Graft\$758.857295Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach\$464.057296Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure\$875.757300Closure Of Rectovaginal Fistula; Vaginal Approach\$567.657305Closure Of Abnormal Drainage Tract From Abdomen\$901.457307Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$1,003.757308Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication\$612.757310Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication\$467.757311Closure Of Roctovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication\$467.757311Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$452.757320Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant\$514.857320Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$520.957335Vaginoplasty For Intersex State\$118.757400Dilation Of Vagina Under Anesthesia\$118.757410Pelvic Examination Under Anesthesia\$118.757421Colposcopy Of The Entire Vagina, With Cervix If Present\$134.657423Paravagina  |       | 0 1   |                      |
| 57292 Construction Of Artificial Vagina; With Graft 57295 Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach 57296 Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure 57300 Closure Of Rectovaginal Fistula; Vaginal Approach 57301 Closure Of Rectovaginal Fistula; Vaginal Approach 57302 Closure Of Abnormal Drainage Tract From Abdomen 57303 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure 57306 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure 57307 Closure Of Abnormal Drainage Tract From Bedder Canal (Urethra) Into Vagina 57310 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina 57311 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57330 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57330 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57331 Vaginoplasty For Intersex State 57335 Vaginoplasty For Intersex State 57400 Dilation Of Vagina Under Anesthesia 57410 Pelvic Examination Under Anesthesia 57410 Pelvic Examination Under Anesthesia 57411 Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) 57422 Cloposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix 57423 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach 58403.  |       |   |                      |
| 57295Revision (Including Removal) Of Prosthetic Vaginal Graft, Vaginal Approach\$464.057296Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure\$875.757300Closure Of Rectovaginal Fistula; Vaginal Approach\$567.657305Closure Of Abnormal Drainage Tract From Abdomen\$901.457307Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$1,003.757308Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication\$612.757310Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$457.957311Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina\$514.857320Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$520.957330Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina\$706.557335Vaginoplasty For Intersex State\$1,078.157400Dilation Of Vagina Under Anesthesia\$118.757410Pelvic Examination Under Anesthesia\$106.657415Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)\$153.357420Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix\$186.857423Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach\$849.857425Surgical Vaginal Defect Repair Using An Endoscope\$890.2   |       | -   |                      |
| 57296Revision And Removal Of Prosthetic Vaginal Graft, Open Procedure\$875.7557300Closure Of Rectovaginal Fistula; Vaginal Approach\$567.6657305Closure Of Abnormal Drainage Tract From Abdomen\$901.457307Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure\$1,003.757308Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Perineal Body Reconstruction, With Or Without Levator Plication\$612.757310Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina\$457.957311Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina\$14.857320Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$520.957330Closure Of Abnormal Drainage Tract From Bladder Into Vagina\$706.557335Vaginoplasty For Intersex State\$1,078.157400Dilation Of Vagina Under Anesthesia\$118.757410Pelvic Examination Under Anesthesia\$106.657415Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)\$153.357420Colposcopy Of The Entire Vagina, With Cervix If Present\$134.657421Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix\$136.857425Surgical Vaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach\$899.2   |       |   |                      |
| 57300 Closure Of Rectovaginal Fistula; Vaginal Approach 57305 Closure Of Abnormal Drainage Tract From Abdomen 57307 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure 57307 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure 57308 Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication 57310 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina 57311 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57330 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57330 Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina 57330 Vaginoplasty For Intersex State 57400 Dilation Of Vagina Under Anesthesia 57410 Pelvic Examination Under Anesthesia 57415 Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) 57421 Colposcopy Of The Entire Vagina, With Cervix If Present 57422 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix 57423 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach 5849.8   |       | ,   |                      |
| 57305 Closure Of Abnormal Drainage Tract From Abdomen  57307 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure  \$1,003.75 57308 Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication  \$612.75 57310 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina  \$457.95 57311 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina  \$57312 Closure Of Abnormal Drainage Tract From Bladder Into Vagina  \$514.85 57330 Closure Of Abnormal Drainage Tract From Bladder Into Vagina  \$520.95 57330 Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina  \$706.55 57335 Vaginoplasty For Intersex State  \$1,078.19 57410 Pelvic Examination Under Anesthesia  \$118.76 57410 Pelvic Examination Under Anesthesia  \$106.60 57421 Colposcopy Of The Entire Vagina, With Cervix If Present  \$134.66 57421 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix  \$134.68 57425 Surgical Vaginal Defect Repair Using An Endoscope  \$890.25  |       |   |                      |
| 57307 Closure Of Abnormal Drainage Tract From Rectum Into Vagina With Creation Of Large Bowel Opening, Open Abdominal Procedure  \$1,003.79 57308 Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication  \$612.79 57310 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina  \$457.91 57311 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant  \$514.89 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina  \$520.99 57330 Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina  \$706.55 57335 Vaginoplasty For Intersex State  \$1,078.19 57410 Pelvic Examination Under Anesthesia  \$118.79 57410 Pelvic Examination Under Anesthesia  \$106.60 57415 Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)  \$133.30 57420 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix  \$134.68 57423 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach  \$890.25  |       | 0 , 0 11  |                      |
| 57308 Closure Of Rectovaginal Fistula; Transperineal Approach, With Perineal Body Reconstruction, With Or Without Levator Plication 57310 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina 57311 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57330 Closure Of Abnormal Drainage Tract From Bladder Into Vagina 57330 Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina 57330 Vaginoplasty For Intersex State 57400 Dilation Of Vagina Under Anesthesia 57410 Pelvic Examination Under Anesthesia 57411 Pelvic Examination Under Anesthesia 57412 Colposcopy Of The Entire Vagina, With Cervix If Present 57421 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix 57422 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach 5889.2   |       |   |                      |
| 57310 Closure Of Abnormal Drainage Tract From Bladder Canal (Urethra) Into Vagina \$457.9. 57311 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant \$514.80 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina \$520.90 57330 Closure Of Abnormal Drainage Tract From Bladder Into Vagina \$706.50 57335 Vaginoplasty For Intersex State \$1,078.10 57400 Dilation Of Vagina Under Anesthesia \$1,078.10 57410 Pelvic Examination Under Anesthesia \$1106.60 57415 Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) \$153.30 57420 Colposcopy Of The Entire Vagina, With Cervix If Present \$134.60 57421 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix \$186.80 57423 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach \$849.80 5890.20  |       |   |                      |
| 57311 Closure Of Abnormal Drainage Tract From Urinary Canal (Urethra) Into Vagina, With Transplant  57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina  57330 Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina  57335 Vaginoplasty For Intersex State  57400 Dilation Of Vagina Under Anesthesia  57410 Pelvic Examination Under Anesthesia  57415 Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)  57420 Colposcopy Of The Entire Vagina, With Cervix If Present  57421 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix  57423 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach  5849.8  5890.2   |       |   |                      |
| 57320 Closure Of Abnormal Drainage Tract From Bladder Into Vagina \$520.95 57330 Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina \$706.55 57335 Vaginoplasty For Intersex State \$1,078.15 57400 Dilation Of Vagina Under Anesthesia \$1,078.15 57410 Pelvic Examination Under Anesthesia \$1106.65 57415 Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) \$153.35 57420 Colposcopy Of The Entire Vagina, With Cervix If Present \$134.65 57421 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix \$186.85 57423 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach \$849.85 57425 Surgical Vaginal Defect Repair Using An Endoscope   |       | · , ,   |                      |
| 57330 Closure Of Abnormal Drainage Tract From The Urinary Bladder Into Vagina \$706.55 57335 Vaginoplasty For Intersex State \$1,078.15 57400 Dilation Of Vagina Under Anesthesia \$118.75 57410 Pelvic Examination Under Anesthesia \$106.65 57415 Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) \$153.31 57420 Colposcopy Of The Entire Vagina, With Cervix If Present \$134.65 57421 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix \$136.85 57422 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach \$849.85 57425 Surgical Vaginal Defect Repair Using An Endoscope \$890.25  |       |   |                      |
| 57335Vaginoplasty For Intersex State\$1,078.1957400Dilation Of Vagina Under Anesthesia\$118.7057410Pelvic Examination Under Anesthesia\$106.6057415Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)\$153.3057420Colposcopy Of The Entire Vagina, With Cervix If Present\$134.6057421Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix\$186.8057423Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach\$849.8057425Surgical Vaginal Defect Repair Using An Endoscope\$890.20  |       | ů ů   |                      |
| 57400 Dilation Of Vagina Under Anesthesia \$118.70 57410 Pelvic Examination Under Anesthesia \$106.60 57415 Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local) \$153.30 57420 Colposcopy Of The Entire Vagina, With Cervix If Present \$134.60 57421 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix \$186.80 57423 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach \$849.80 57425 Surgical Vaginal Defect Repair Using An Endoscope \$890.20  |       | · · · · · · · · · · · · · · · · · · ·   |                      |
| 57410Pelvic Examination Under Anesthesia\$106.657415Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)\$153.357420Colposcopy Of The Entire Vagina, With Cervix If Present\$134.657421Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix\$186.857423Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach\$849.857425Surgical Vaginal Defect Repair Using An Endoscope\$890.2  |       | · , ,   |                      |
| 57415Removal Of Impacted Vaginal Foreign Body (Separate Procedure) Under Anesthesia (Other Than Local)\$153.357420Colposcopy Of The Entire Vagina, With Cervix If Present\$134.657421Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix\$186.857423Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach\$849.857425Surgical Vaginal Defect Repair Using An Endoscope\$890.2   |       | ů .   |                      |
| 57420Colposcopy Of The Entire Vagina, With Cervix If Present\$134.657421Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix\$186.857423Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach\$849.857425Surgical Vaginal Defect Repair Using An Endoscope\$890.2  |       |   |                      |
| 57421 Colposcopy Of The Entire Vagina, With Cervix If Present; With Biopsy(S) Of Vagina/Cervix \$186.8 57423 Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach \$849.8 57425 Surgical Vaginal Defect Repair Using An Endoscope \$890.2   |       |   |                      |
| 57423Paravaginal Defect Repair (Including Repair Of Cystocele, If Performed), Laparoscopic Approach\$849.857425Surgical Vaginal Defect Repair Using An Endoscope\$890.2   |       |   |                      |
| 57425 Surgical Vaginal Defect Repair Using An Endoscope \$890.2   |       | 1 17  |                      |
|   |       |   |                      |
|   |       | Revision (Including Removal) Of Prosthetic Vaginal Graft, Laparoscopic Approach | \$890.24<br>\$802.52 |

|   | Description  | Fee         |
|---|--|-------------|
| 57452                                     | Colposcopy Of The Cervix Including Upper/Adjacent Vagina;  | \$12        |
| 57454                                     | Colposcopy Of The Cervix Including Upper/Adjacent Vagina; With Biopsy(S) Of The Cervix And Endocervical Curettage  | \$18        |
| 57455                                     | Colposcopy Of The Cervix Including Upper/Adjacent Vagina; With Biopsy(S) Of The Cervix   | \$17        |
| 57456                                     | Colposcopy Of The Cervix Including Upper/Adjacent Vagina; With Endocervical Curettage  | \$15        |
| 57460                                     | Biopsy Of Cervix Using An Endoscope With A Loop Electrode  | \$33        |
| 7461                                      | Colposcopy Of The Cervix Including Upper/Adjacent Vagina; With Loop Electrode Conization Of The Cervix   | \$37        |
|   | Computer-Aided Mapping Of Cervix During Examination Of Vagina And Cervix Using Endoscope   | \$4         |
|   | Biopsy Of Cervix, Single Or Multiple, Or Local Excision Of Lesion, With Or Without Fulguration (Separate Procedure)  | \$15        |
|   | Endocervical Curettage (Not Done As Part Of A Dilation And Curettage)  | \$10        |
|   | Cautery Of Cervix; Electro Or Thermal  | \$15        |
|   | Cauterization Of Cervix; Cryocautery, Initial Or Repeat  | \$17        |
|   | Cauterization Of Cervix, Cryocautery, Initial Of Repeat  Cauterization Of Cervix; Laser Ablation   |             |
|   | ,  | \$19        |
|   | Removal Or Destruction Of Cervix With Knife Or Laser   | \$36        |
|   | Removal Or Destruction Of Cervix With Electrical Cautery   | \$29        |
| 57530                                     | Trachelectomy (Cervicectomy), Amputation Of Cervix (Separate Procedure)  | \$34        |
|   | Radical Trachelectomy, With Bilateral Total Pelvic Lymphadenectomy And Para-Aortic Lymph Node Sampling Biopsy, With Or Without   |             |
|   | Removal Of Tube(S), With Or Without Removal Of Ovary(S)  | \$1,59      |
|   | Removal Of Remaining Cervix Through The Abdomen  | \$72        |
| 57545                                     | Excision Of Cervical Stump, Abdominal Approach; With Pelvic Floor Repair   | \$76        |
| 57550                                     | Removal Of Remaining Cervix Through The Vagina   | \$39        |
| 57555                                     | Excision Of Cervical Stump, Vaginal Approach; With Anterior And/Or Posterior Repair  | \$56        |
| 57556                                     | Excision Of Cervical Stump, Vaginal Approach; With Repair Of Enterocele  | \$54        |
|   | Dilation/Curettage Cervical Stump  | \$14        |
|   | Cerclage Of Uterine Cervix, Nonobstetrical   | \$33        |
|   | Trachelorrhaphy, Plastic Repair Of Uterine Cervix, Vaginal Approach  | \$28        |
|   | Dilation Of Cervical Canal, Instrumental (Separate Procedure)  | \$20<br>\$5 |
| 77 000                                    | Bilation of Cervical Cariat, institutiental (Separate 1 rocedure)  | φυ          |
| 58100                                     | Endometrial Sampling (Biopsy) With Or Without Endocervical Sampling (Biopsy), Without Cervical Dilation, Any Method (Separate Procedure)   | \$10        |
| 0110                                      | Endometrial Sampling (Biopsy) Performed In Conjunction With Colposcopy (List Separately In Addition To Code For Primary Procedure)   | ψr          |
|   |  | \$5         |
|   | Dilation And Curettage, Diagnostic And/Or Therapeutic (Nonobstetrical)   | \$31        |
|   | Abdominal Removal Of Fibroid Tumors (250 Grams Or Less) Of Uterus  | \$85        |
| 58145                                     | Vaginal Removal Of Fibroid Tumors (250 Grams Or Less) Of Uterus  | \$52        |
| 58146                                     | Myomectomy, Excision Of Fibroid Tumor(S) Of Uterus, 5 Or More Intramural Myomas And/Or Intramural Myomas With Total Weight Greater Than 250 Grams, Abdominal Approach  | \$1,05      |
| 58150                                     | Total Abdominal Hysterectomy (Corpus And Cervix), With Or Without Removal Of Tube(S), With Or Without Removal Of Ovary(S);   | \$1,02      |
|   | Total Abdominal Hysterectomy (Corpus And Cervix), With Or Without Removal Of Tube(S), With Or Without Removal Of Ovary(S); With Colpo-<br>Urethrocystopexy (Eg, Marshall-Marchetti-Krantz, Burch)                | \$1,12      |
| 58180                                     | Supracervical Abdominal Hysterectomy (Subtotal Hysterectomy), With Or Without Removal Of Tube(S), With Or Without Removal Of Ovary(S)  | \$81        |
|   | Total Abdominal Hysterectomy, Including Partial Vaginectomy, With Para-Aortic And Pelvic Lymph Node Sampling, With Or Without Removal  |             |
| 8200                                      | Of Tube(S), With Or Without Removal Of Ovary(S)  | \$1,22      |
| 58210                                     | Abdominal Removal Of Uterus, Cervix, And Lymph Nodes On Both Sides Of Pelvis And Aortic Lymph Node Biopsy  | \$1,65      |
|   | Removal Of Malignant Uterus, Cervix, Lymph Nodes, Bladder, With Transplantation Of Urinary Ducts (Ureters), And Bowel  | \$2,67      |
|   | Vaginal Removal Of Uterus (250 Grams Or Less)  | \$85        |
|   | Vaginal Removal Of Uterus (250 Grams Or Less), Tubes, And/Or Ovaries   | \$96        |
|   | Vaginal Removal Of Uterus (250 Grams Or Less), Tubes, And/Or Ovaries With Repair Of Herniated Bowel  | \$90        |
| 00203                                     | vaginal Kemoval of Otelus (250 Ofams of Less), Tubes, Ana/of Ovanes with Kepail of Hemateu Bowel   | φ90         |
| -0007                                     | Variant United at any With Color Heather control on (Marshall Marshall Variant Tura Days on Tura With On Without Tura Castral)   | 0.7         |
|   | Vaginal Hysterectomy With Colpo-Urethrocystopexy (Marshall-Marchetti-Krantz Type, Pereyra Type, With Or Without Endoscopic Control)  | \$97        |
|   | Vaginal Hysterectomy With Repair Of Enterocele   | \$81        |
|   | Vaginal Hysterectomy, With Total Or Partial Vaginectomy;   | \$90        |
|   | Vaginal Hysterectomy, With Total Or Partial Colpectomy With Repair Of Enterocele   | \$96        |
|   | Vaginal Removal Of Uterus, Vagina, And Pelvic Lymph Nodes  | \$1,29      |
|   | Vaginal Hysterectomy, For Uterus Greater Than 250 Grams;   | \$1,05      |
|   | Vaginal Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries  | \$1,13      |
|   | Vaginal Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries With Repair Of Herniated Bowel   | \$1,19      |
| 8294                                      | Vaginal Hysterectomy, For Uterus Greater Than 250 Grams; With Repair Of Enterocele   | \$1,11      |
| 8300                                      | Insertion Of Intrauterine Device (Iud)   | \$12        |
|   | Removal Of Intrauterine Device (Iud)   | \$11        |
|   | ` '  |             |
|   | Catheterization And Introduction Of Saline Or Contrast Material For Saline Infusion Sonohysterography (Sis) Or Hysterosalpingography   | \$17        |
|   | Insertion Of Heyman Capsules For Clinical Brachytherapy  | \$46        |
|   | Endometrial Ablation, Thermal, Without Hysteroscopic Guidance  | \$1,04      |
| 8356                                      | Endometrial Cryoablation With Ultrasonic Guidance, Including Endometrial Curettage, When Performed   | \$1,68      |
|   | Uterine Suspension, With Or Without Shortening Of Round Ligaments, With Or Without Shortening Of Sacrouterine Ligaments; (Separate   |             |
|   | Procedure)   | \$47        |
| 8410                                      | Anatomic Repositioning Of Uterus, With Removal Of Nerve  | \$74        |
|   | Hysterorrhaphy, Repair Of Ruptured Uterus (Nonobstetrical)   | \$73        |
| 8520                                      | Hysteroplasty, Repair Of Uterine Anomaly (Strassman Type)  | \$83        |
|   | Laparoscopy, Surgical, Supracervical Hysterectomy, For Uterus 250G Or Less   | \$67        |
| 58540                                     | -1   | \$84        |
| 58540<br>58541                            | Partial Removal Of Uterus (250 Grams Or Less), Tubes And/Or Ovaries With Retention Of Cervix Using An Endoscope  |             |
| 58540<br>58541<br>58542                   | Partial Removal Of Uterus (250 Grams Or Less), Tubes And/Or Ovaries With Retention Of Cervix Using An Endoscope  Partial Removal Of Literus (Greater Than 250 Grams) With Retention Of Cervix Using An Endoscope |             |
| 58540<br>58541<br>58542<br>58543          | Partial Removal Of Uterus (Greater Than 250 Grams) With Retention Of Cervix Using An Endoscope   | \$77        |
| 58540<br>58541<br>58542<br>58543          | Partial Removal Of Uterus (Greater Than 250 Grams) With Retention Of Cervix Using An Endoscope Partial Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries Using An Endoscope                      |             |
| 58540<br>58541<br>58542<br>58543<br>58544 | Partial Removal Of Uterus (Greater Than 250 Grams) With Retention Of Cervix Using An Endoscope   | \$77        |

| 0-4-  | Provided to  | F                                     |
|-------|--|---------------------------------------|
|       | Description  Removal Of Uterus, Cervix, And Lymph Nodes On Both Sides Of Pelvis And Aortic Lymph Node Biopsy Using An Endoscope  | Fee<br>\$1,714.09                     |
|       | Laparoscopy Surgical, With Vaginal Hysterectomy, For Uterus 250 Grams Or Less;   | \$894.14                              |
|       | Vaginal Removal Of Uterus (250 Grams Or Less), Tubes, And/Or Ovaries Using An Endoscope  | \$993.00                              |
|       | Vaginal Removal Of Uterus (Greater Than 250 Grams) Using An Endoscope  | \$1,131.94                            |
|       | Vaginal Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries With Assistance Of Endoscope   | \$1,186.51                            |
| 58555 | Hysteroscopy, Diagnostic (Separate Procedure)  | \$259.62                              |
| 58558 | Hysteroscopy, Surgical; With Sampling (Biopsy) Of Endometrium And/Or Polypectomy, With Or Without D & C  | \$986.44                              |
| 58559 | Hysteroscopy, Surgical; With Lysis Of Intrauterine Adhesions (Any Method)  | \$256.34                              |
|       | Hysteroscopy, Surgical; With Division Or Resection Of Intrauterine Septum (Any Method)   | \$316.79                              |
|       | Hysteroscopy, Surgical; With Removal Of Leiomyomata  | \$357.97                              |
|       | Hysteroscopy, Surgical; With Removal Of Impacted Foreign Body  | \$306.15                              |
|       | Hysteroscopy, Surgical; With Endometrial Ablation (Eg., Endometrial Resection, Electrosurgical Ablation, Thermoablation)   | \$2,393.24                            |
|       | Laparoscopy, Surgical, With Total Hysterectomy, For Uterus 250 G Or Less;  | \$819.14                              |
|       | Laparoscopy, Surgical, With Total Hysterectomy, For Uterus 250 G Or Less; With Removal Of Tube(S) And/Or Ovary(S)  | \$922.35                              |
|       | Abdominal Removal Of Uterus (Greater Than 250 Grams) Using An Endoscope  | \$1,051.54                            |
|       | Abdominal Removal Of Uterus (Greater Than 250 Grams), Tubes, And/Or Ovaries Using An Endoscope   | \$1,233.13                            |
|       | Removal Of Uterus For Tumor Debulking Using A Laparoscope  | \$1,893.43                            |
|       | Unlisted Laparoscopy Of Uterus Procedure   | \$1,776.20                            |
|       | Unlisted Hysteroscopy Of Uterus Procedure  | Price By Report                       |
|       | Destruction Of Uterine Fibroid(S) Using Heat With Ultrasound Guidance And Monitoring   | \$2,729.86                            |
| 58600 | Ligation Or Transection Of Fallopian Tube(S), Abdominal Or Vaginal Approach, Unilateral Or Bilateral   | \$378.74                              |
| 50005 | Ligation Or Transection Of Fallopian Tube(S), Abdominal Or Vaginal Approach, Postpartum, Unilateral Or Bilateral, During Same Hospitalization  | 004540                                |
| 58605 | (Separate Procedure)   | \$345.16                              |
| E0044 | Ligation Or Transection Of Fallopian Tube(S) When Done At The Time Of Cesarean Delivery Or Intra-Abdominal Surgery (Not A Separate   | <b>Ф7</b> Е 00                        |
|       | Procedure) (List Separately In Addition To Code For Primary Procedure)  Occlusion Of Fallopian Tube(S) By Device (Eg, Band, Clip, Falope Ring) Vaginal Or Suprapubic Approach                                    | \$75.69<br>\$234.33                   |
|       |  | · · · · · · · · · · · · · · · · · · · |
|       | Laparoscopy, Surgical; With Lysis Of Adhesions (Salpingolysis, Ovariolysis) (Separate Procedure)  Laparoscopy, Surgical; With Removal Of Adnexal Structures (Partial Or Total Oophorectomy And/Or Salpingectomy) | \$686.86                              |
|       |  | \$660.07                              |
|       | Laparoscopy, Surgical; With Fulguration Or Excision Of Lesions Of The Ovary, Pelvic Viscera, Or Peritoneal Surface By Any Method   | \$720.83                              |
|       | Laparoscopy, Surgical; With Fulguration Of Oviducts (With Or Without Transection)  | \$380.19                              |
|       | Laparoscopy, Surgical; With Occlusion Of Oviducts By Device (Eg, Band, Clip, Or Falope Ring)   | \$379.47                              |
|       | Destruction Of Fibroid Tumor Of Uterus Using A Laparoscope And Ultrasound Guidance And Monitoring  | \$742.41                              |
|       | Unlisted Laparoscopy Procedure, Oviduct, Ovary   | \$2,918.04                            |
|       | Salpingectomy, Complete Or Partial, Unilateral Or Bilateral (Separate Procedure)   | \$567.50                              |
|       | Salpingo-Oophorectomy, Complete Or Partial, Unilateral Or Bilateral (Separate Procedure)   | \$640.49                              |
|       | Lysis Of Adhesions (Salpingolysis, Ovariolysis)  | \$820.51                              |
|       | Salpingostomy (Salpingoneostomy)   | \$789.54                              |
|       | Drainage Of Cysts Of Ovaries By Vaginal Approach   | \$341.21                              |
|       | Drainage Of Cysts Of Ovaries By Abdominal Approach   | \$440.43                              |
|       | Drainage Of Cysts Of Ovaries By Vaginal Approach, Open Procedure   | \$315.82                              |
|       | Drainage Of Ovarian Abscess; Abdominal Approach  | \$617.78                              |
|       | Biopsy Of Ovaries  | \$404.58                              |
|       | Ovarian Cystectomy, Unilateral Or Bilateral  Removed Of Ovarian Portici Or Total   | \$618.99                              |
|       | Removal Of Ovaries, Partial Or Total  Removal Of Ovaries, Partial Or Total, For Ovarian Cancer   | \$574.57                              |
|       | Resection Of Ovarian, Tubal Or Primary Peritoneal Malignancy With Bilateral Salpingo-Oophorectomy And Omentectomy;   | \$1,066.67                            |
|       | Removal Of Abdominal Lining, Uterus, Both Ovaries And Fallopian Tubes, And Pelvic And Aortic Lymph Nodes   | \$1,056.12                            |
| 58951 | Resection Of Ovarian, Tubal Or Primary Peritoneal Malignancy With Bilateral Salpingo-Oophorectomy And Omentectomy; With Radical  | \$1,313.50                            |
| 59052 | Dissection For Debulking (le, Radical Excision Or Destruction, Intra-Abdominal Or Retroperitoneal Tumors)  | ¢1 500 69                             |
|       | Removal Of Abdominal Lining, Uterus, Both Ovaries And Fallopian Tubes With Tumor Reduction   | \$1,500.68<br>\$1,818.51              |
|       | · · · · · · · · · · · · · · · · · · ·  |                                       |
|       | Removal Of Abdominal Lining, Uterus, Both Ovaries And Fallopian Tubes, And Pelvic And Aortic Lymph Nodes With Tumor Reduction  | \$1,966.55                            |
|       | Removal Of Abdominal Lining, Uterus, And Both Ovaries And Fallopian Tubes  | \$1,236.22                            |
|       | Removal Of Tubes, Ovaries, Uterus, And Lymph Nodes For Uterine Malignancy  | \$1,555.30                            |
| 58958 | Removal Of Tubes, Ovaries, Uterus, And Lymph Nodes For Uterine Malignancy, With Lymph Node Dissection  | \$1,511.04                            |
|       | Laparotomy, For Staging Or Restaging Of Ovarian, Tubal Or Primary Peritoneal Malignancy (Second Look), With Or Without Omentectomy,  |                                       |
| 58960 | Peritoneal Washing, Biopsy Of Abdominal And Pelvic Peritoneum, Diaphragmatic Assessment With Pelvic And Limited Para-Aortic Lymp   | \$910.84                              |
|       | Unlisted Procedure, Female Genital System Nonobstetrical   | Price By Report                       |
|       | Amniocentesis; Diagnostic  | \$116.95                              |
|       | Amniocentesis; Diagnostic  Amniocentesis; Therapeutic Amniotic Fluid Reduction (Includes Ultrasound Guidance)  | \$170.12                              |
|       | Cordocentesis (Intrauterine), Any Method   | \$172.46                              |
|       | Chorionic Villus Sampling, Any Method  | \$140.87                              |
|       | Fetal Contraction Stress Test  | \$88.43                               |
|       | Fetal Non-Stress Test  | \$53.30                               |
|       | Fetal Scalp Blood Sampling   | \$150.10                              |
|       | Fetal Monitoring During Labor By Consulting Physician (Ie, Non-Attending Physician) With Written Report; Supervision And Interpretation  | \$51.70                               |
|       | Fetal Monitoring During Labor By Consulting Physician (le, Non-Attending Physician) With Written Report (Separate Procedure); Interpretation   | · · · ·                               |
| 59051 |  | \$51.70                               |
|       | Transabdominal Amnioinfusion, Including Ultrasound Guidance  | \$430.24                              |
|       | Fetal Umbilical Cord Occlusion, Including Ultrasound Guidance  | \$550.76                              |
|       | Fetal Fluid Drainage (Eg, Vesicocentesis, Thoracocentesis, Paracentesis), Including Ultrasound Guidance  | \$416.66                              |
|       | Fetal Shunt Placement, Including Ultrasound Guidance   | \$542.62                              |
|       | Hysterotomy, Abdominal (Eg., For Hydatidiform Mole, Abortion)  | \$751.60                              |
|       | Removal Of Ovarian Or Tubal Pregnancy, With Removal Of Ovaries   | \$717.72                              |
|       | Removal Of Ovarian Or Tubal Pregnancy, Without Removal Of Ovaries  | \$717.95                              |
|       | <u> </u>   | ,                                     |

|       | Description   | Fee                  |
|-------|---|----------------------|
|       | Surgical Treatment Of Ectopic Pregnancy Abdominal Pregnancy   | \$830.95             |
|       | Surgical Treatment Of Ectopic Pregnancy Interstitial, Uterine Pregnancy With Partial Resection Of Uterus                                | \$788.88             |
|       | Surgical Treatment Of Ectopic Pregnancy Cervical, With Evacuation   | \$371.83             |
|       | Laparoscopic Treatment Of Ectopic Pregnancy Without Salpingectomy And/Or Oophorectomy   | \$511.01             |
|       | Laparoscopic Treatment Of Ectopic Pregnancy With Salpingectomy And/Or Oophorectomy  | \$958.05             |
|       | Currettage, Postpartum  | \$278.62             |
|       | Insertion Of Cervical Dilator (Eg, Laminaria, Prostaglandin) (Separate Procedure)   | \$89.78              |
|       | Episiotomy Or Vaginal Repair, By Other Than Attending   | \$156.26             |
|       | Cerclage Of Cervix, During Pregnancy Vaginal  | \$430.38             |
|       | Cerclage Of Cervix, During Pregnancy Abdominal  | \$289.95             |
| 59350 | Hysterorrhaphy Of Ruptured Uterus   | \$367.63             |
|       |   |                      |
|       | Routine Obstetric Care Including Antepartum Care, Vaginal Delivery (With Or Without Episiotomy, And/Or Forceps) And Postpartum Care     | \$2,183.92           |
|       | Vaginal Delivery Only (With Or Without Episiotomy And/Or Forceps);  | \$707.07             |
|       | Vaginal Delivery Only (With Or Without Episiotomy And/Or Forceps); Including Postpartum Care  | \$960.30             |
|       | Turning Of Fetus From Abnormal Position By External Manipulation  | \$90.66              |
|       | Delivery Of Placenta  | \$79.15              |
|       | Antepartum Care Only; 4-6 Visits  | \$513.14             |
|       | Antepartum Care Only; 7 Or More Visits  | \$937.81             |
|       | Postpartum Care Only (Separate Procedure)   | \$243.41             |
|       | Cesarean Delivery With Pre- And Post-Delivery Care  | \$2,405.10           |
|       | Caesarean Delivery Only;  | \$794.90             |
|       | Caesarean Delivery Only; Including Postpartum Care  | \$1,182.46           |
|       | Subtotal Or Total Hysterectomy After Cesarean Delivery (List Separately In Addition To Code For Primary Procedure)                      | \$419.81             |
|       | Routine Obstetric Care With Vaginal Delivery After Prior Cesarean Delivery  | \$2,265.11           |
| 59612 | Vaginal Delivery Only, After Previous Cesarean Delivery (With Or Without Episiotomy And/Or Forceps);                                    | \$791.41             |
| 59614 | Vaginal Delivery Only, After Previous Cesarean Delivery (With Or Without Episiotomy And/Or Forceps); Including Postpartum Care          | \$1,024.08           |
|       | Routine Obstetric Care Including Antepartum Care, Cesarean Delivery, And Postpartum Care, Following Attempted Vaginal Delivery After    | * /*                 |
| 59618 | Previous Cesarean Delivery  | \$2,427.72           |
|       | Cesarean Delivery After Vaginal Delivery Attempt Due To Prior Cesarean Delivery   | \$819.65             |
|       | Cesarean Delivery Only, Following Attempted Vaginal Delivery After Previous Cesarean Delivery; Including Postpartum Care                | \$1,225.25           |
|       | Treatment Of Incomplete Abortion, Any Trimester, Completed Surgically   | \$332.80             |
| 59820 | Treatment Of Missed Abortion, Completed Surgically First Trimester  | \$416.07             |
| 59821 | Treatment Of Missed Abortion, Completed Surgically Second Trimester   | \$301.71             |
| 59830 | Treatment Of Septic Abortion, Completed Surgically  | \$413.02             |
|       | Induced Abortion, By One Or More Vaginal Suppositories (Eg, Prostaglandin) With Or Without Cervical Dilation (Eg, Laminaria), Including |                      |
| 59855 | Hospital Admission And Visits, Delivery Of Fetus And Secundines;  | \$452.47             |
| 59870 | Uterine Evacuation And Curettage For Hydatidiform Mole  | \$484.94             |
| 59871 | Removal Of Cerclage Suture Under Anesthesia (Other Than Local)  | \$127.48             |
|       | Unlisted Fetal Invasive Procedure, Including Ultrasound Guidance, When Performed  | \$516.40             |
|       | Unlisted Laparoscopy Procedure, Maternity Care And Delivery   | Price By Report      |
|       | Unlisted Procedure, Maternity Care And Delivery   | Price By Report      |
|       | Incision And Drainage Of Thyroglossal Duct Cyst, Infected   | \$174.21             |
|       | Needle Biopsy Of Thyroid, Accessed Through The Skin   | \$98.63              |
|       | Excision Of Cyst Or Adenoma Of Thyroid, Or Transection Of Isthmus   | \$607.83             |
|       | Partial Thyroid Lobectomy, Unilateral; With Or Without Isthmusectomy  | \$732.83             |
|       | Partial Thyroid Lobectomy, Unilateral; With Contralateral Subtotal Lobectomy, Including Isthmusectomy                                   | \$915.80             |
|       | Total Thyroid Lobectomy, Unilateral; With Or Without Isthmusectomy  | \$713.00             |
|       | Total Thyroid Lobectomy, Unilateral; With Contralateral Subtotal Lobectomy, Including Isthmusectomy                                     | \$852.69             |
|       | Removal of Thyroid, Complete  | \$919.72             |
|       | Removal Of Thyroid And Surrounding Lymph Nodes, With Limited Neck Dissection  | \$1,244.21           |
|       | Removal Of Thyroid And Surrounding Lymph Nodes, With Radical Neck Dissection  | \$1,501.85           |
|       | Thyroidectomy, Removal Of All Remaining Thyroid Tissue Following Previous Removal Of A Portion Of Thyroid                               | \$983.17             |
|       | Removal Of Thyroid, Sternal Or Transthoracic Approach   | \$1,223.82           |
|       | Removal Of Thyroid, Sternal Or Cervical Approach  Expiring Of Thyrodoscal Dust Cycl Or Sinus  | \$952.17             |
|       | Excision Of Thyroglossal Duct Cyst Or Sinus  Excision Of Thyroglossal Duct Cyst Or Sinus: Recurrent                                     | \$467.64             |
|       | Excision Of Thyroglossal Duct Cyst Or Sinus; Recurrent Aspiration And/Or Injection, Thyroid Cyst  | \$550.62<br>\$103.16 |
|       | Parathyroidectomy Or Exploration Of Parathyroid(S);   | \$103.16<br>\$968.70 |
|       | Parathyroidectomy Or Exploration Of Parathyroid(S); Re-Exploration  | \$1,314.03           |
|       | Parathyroidectomy Or Exploration Of Parathyroid(S); With Mediastinal Exploration, Sternal Split Or Transthoracic Approach               | \$1,314.03           |
|       | Parathyroid Autotransplantation (List Separately In Addition To Code For Primary Procedure)   | \$237.72             |
|       | Thymectomy, Partial Or Total: Transcervical Approach (Separate Procedure)   | \$936.65             |
|       | Removal Of Thymus Gland, Sternal Or Chest Approach  | \$984.65             |
|       | Removal Of Thymus Gland Surrounding Lymph Nodes, Sternal Or Chest Approach  | \$1,199.28           |
| OOOZZ | Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal, Lumbar Or Dorsal (Separate  | Ψ1,100.20            |
| 60540 | Procedure)  | \$1,069.98           |
|       | Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal, Lumbar Or Dorsal (Separate  |                      |
| 60545 | Procedure), Unilateral; With Excision Of Adjacent Retroperitoneal Tumor   | \$1,110.55           |
| 60600 | Excision Of Carotid Body Tumor Without Excision Of Carotid Artery   | \$1,192.45           |
| 60605 | Excision Of Carotid Body Tumor With Excision Of Carotid Artery  | \$1,415.46           |
|       | Laparoscopy, Surgical, With Adrenalectomy, Partial Or Complete, Or Exploration Of Adrenal Gland With Or Without Biopsy, Transabdominal, |                      |
|       | Lumbar Or Dorsal  | \$1,059.96           |
|       | Unlisted Laparoscopy Procedure, Endocrine System  | Price By Report      |
|       | Unlisted Procedure, Endocrine System  | Price By Report      |
| 61000 | Aspiration Of Spinal Fluid From Infant Skull Soft Spot, Initial   | \$87.44              |
|       |   |                      |

| Code   Description  |  |
|---|--|
| 61001   Aspiration Of Spinal Fluid From Infant Skull Soft Spot, Subsequent  | Fee<br>\$101.45  |
| 61020 Aspiration of Spinal Fluid From Infant Skull Soft Spot, Subsequent 61020 Aspiration Of Spinal Fluid For Diagnosis From Skull Soft Spot, Burr Hole, Or Catheter In Brain   | \$101.45   |
| 61026 Aspiration Of Spinal Fluid And Injection Into Skull Soft Spot, Burr Hole, Or Catheter In Ventricle Of Brain   | \$94.69  |
| 61050 Cisternal Or Lateral Cervical (C1-C2) Puncture; Without Injection (Separate Procedure)  | \$74.29  |
| 61055 Spinal Puncture In Upper Spine With Injection Of Substance  | \$105.99   |
| 61070 Puncture Of Shunt Tubing Or Reservoir For Aspiration Or Injection Procedure   | \$48.71  |
| 61105 Twist Drill Hole For Aspiration Of Fluid From Brain   | \$452.46   |
| 61107 Twist Drill Hole For Insertion Of Brain Drainage Catheter Or Fluid Pressure Recording Or Monitoring Device  | \$290.89   |
| 61108 Twist Drill Hole For Aspiration And/Or Drainage Of Blood Accumulation In Brain  | \$877.82   |
| 61120 Burr Hole(S) For Injection Into Ventricle Of Brain  | \$653.09   |
| 61140 Burr Hole(S), With Drainage Or Biopsy Of Brain Or Lesion 61150 Burr Hole(S), With Drainage Of Brain Abscess Or Cyst   | \$1,096.96<br>\$1,159.39   |
| 61151 Burr Hole(S), With Subsequent Aspiration Of Brain Abscess Or Cyst   | \$857.92   |
| 61154   Burr Hole(S), With Aspiration Of Blood Accumulation In Brain, Extradural Or Subdural  | \$1,227.78   |
| 61156 Burr Hole(S), With Aspiration Of Blood Accumulation Or Cyst In Brain  | \$1,066.26   |
| 61210 Burr Hole(S), Implantation Of Brain Catheter, Reservoir, Eeg Electrodes, Pressure Or Other Monitoring Device  | \$340.60   |
| 61215 Insertion Of Subcutaneous Reservoir, Pump Or Continuous Infusion System For Connection To Ventricular Catheter  | \$454.04   |
| 61250 Burr Hole(S) For Exploration Of The Upper Brain   | \$752.62   |
| 61253 Burr Hole(S) For Exploration Of The Lower Brain   | \$857.92   |
| 61304 Removal Of Bone From Skull For Exploration Of Upper Brain   | \$1,564.20   |
| 61305 Removal Of Bone From Skull For Exploration Of Lower Brain   | \$1,905.98   |
| 61312 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Upper Brain, Extradural Or Subdural  | \$2,031.37   |
| 61313 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Upper Brain, Intracerebral 61314 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Lower Brain, Extradural Or Subdural  | \$1,953.13<br>\$1,569.56   |
| 61315 Removal Of Bone From Skull For Aspiration Of Blood Accumulation In Lower Brain, Extradudia Of Subdular  | \$1,764.57   |
| 61316 Incision And Subcutaneous Placement Of Cranial Bone Graft (List Separately In Addition To Code For Primary Procedure)   | \$1,764.57   |
| 61320 Removal Of Bone From Skull For Drainage Of Upper Brain Abscess  | \$1,820.44   |
| 61321 Removal Of Bone From Skull For Drainage Of Lower Brain Abscess  | \$1,814.79   |
| Craniectomy Or Craniotomy, Decompressive, With Or Without Duraplasty, For Treatment Of Intracranial Hypertension, Without Evacua  |  |
| 61322 Associated Intraparenchymal Hematoma; Without Lobectomy   | \$2,334.22   |
| Craniectomy Or Craniotomy, Decompressive, With Or Without Duraplasty, For Treatment Of Intracranial Hypertension, Without Evacua  |  |
| 61323 Associated Intraparenchymal Hematoma; With Lobectomy  | \$2,361.79   |
| 61330 Decompression Of Orbit Only, Transcranial Approach  | \$1,537.35   |
| 61333 Exploration And Removal Of Lesion From Bone Of Eye Socket Accessed Through Skull 61340 Subtemporal Cranial Decompression (Pseudotumor Cerebri, Slit Ventricle Syndrome)   | \$1,719.19   |
| Craniectomy, Suboccipital With Cervical Laminectomy For Decompression Of Medulla And Spinal Cord, With Or Without Dural Graft (E  | \$1,236.34   |
| 61343 Arnold-Chiari Malformation)   | \$2,086.22   |
| 61345 Other Cranial Decompression, Posterior Fossa  | \$1,746.22   |
| 61450 Craniectomy For Section, Compression, Or Decompression Of Sensory Root Of Gasserian Ganglion  | \$1,638.69   |
| 61458 Craniectomy, Suboccipital; For Exploration Or Decompression Of Cranial Nerves   | \$1,914.70   |
| 61460 Craniectomy, Suboccipital; For Section Of One Or More Cranial Nerves  | \$1,799.81   |
| 61500 Craniectomy, Trephination, Bone Flap Craniotomy; For Tumor Of Skull   | \$1,275.84   |
| 61501 Craniectomy; For Osteomyelitis  | \$1,002.58   |
| 61510 Removal Of Bone From Skull For Removal Of Upper Brain Tumor   | \$2,160.38   |
| 61512 Removal Of Bone From Skull For Removal Of Upper Membrane Tumor 61514 Removal Of Bone From Skull For Removal Of Upper Brain Abscess  | \$2,283.84<br>\$1,640.01   |
| 61516 Removal Of Bone From Skull For Removal Or Drainage Of Upper Brain Cyst  | \$1,781.48   |
| 61517 Implantation Of Brain Intracavitary Chemotherapy Agent (List Separately In Addition To Code For Primary Procedure)  | \$72.84  |
| 61518 Removal Of Bone From Skull For Removal Of Lower Brain Tumor   | \$2,664.54   |
| 61519 Removal Of Bone From Skull For Removal Of Lower Membrane Tumor  | \$2,500.90   |
| 61520 Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor  | \$3,205.91   |
| 61521 Removal Of Bone From Skull For Removal Of Skull Base Tumor  | \$3,092.48   |
| 61522 Removal Of Bone From Skull For Removal Of Brain Abscess   | \$1,868.28   |
| 61524 Removal Of Bone From Skull For Removal Of Brain Cyst Or Creation Of Drainage Tract  | \$1,781.21   |
| · · ·   | \$2,932.64   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor  | \$2,607.02   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal   | \$1,059.54   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring   |  |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring   | \$1,310.27   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring  | \$1,419.11   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain   | \$1,419.11<br>\$872.48   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring   | \$1,419.11<br>\$872.48<br>\$2,193.85   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring   | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring   | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring  | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring  | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring   | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85<br>\$1,857.78   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring   | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85<br>\$1,857.78<br>\$2,001.52   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Excision Of Brain Tissue 61543 Removal Of Bone From Skull For Excision Of Brain Tissue 61544 Removal Of Bone From Skull For Excision Of Clotting Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap  | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85<br>\$1,857.78<br>\$2,001.52<br>\$1,856.02   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61544 Removal Of Bone From Skull For Excision Of Brain Tissue 61545 Removal Of Bone From Skull For Excision Of Partial Excision Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61546 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor   | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85<br>\$1,857.78<br>\$2,001.52<br>\$1,856.02<br>\$1,620.97<br>\$2,712.27   |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61543 Removal Of Bone From Skull For Incision Of Brain Tissue 61544 Removal Of Bone From Skull For Excision Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61548 Hypophysectomy Or Excision Of Pituitary Tumor, Transnasal Or Transseptal Approach, Nonstereotactic   | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85<br>\$1,857.78<br>\$2,001.52<br>\$1,856.02<br>\$1,620.97<br>\$2,712.27<br>\$1,968.23<br>\$1,512.53                             |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61543 Removal Of Bone From Skull For Partial Excision Of Cerebrospinal Fluid Site 61544 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61548 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61548 Hypophysectomy Or Excision Of Pituitary Tumor, Transnasal Or Transseptal Approach, Nonstereotactic 61550 Craniectomy For Craniosynostosis; Single Cranial Suture   | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85<br>\$1,857.78<br>\$2,001.52<br>\$1,856.02<br>\$1,620.97<br>\$2,712.27<br>\$1,968.23<br>\$1,512.53<br>\$1,038.70               |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61542 Removal Of Bone From Skull For Excision Of Clobe Of Brain Tissue 61543 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61546 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61547 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61548 Hypophysectomy Or Excision Of Pituitary Tumor, Transnasal Or Transseptal Approach, Nonstereotactic 61550 Craniectomy For Craniosynostosis; Multiple Cranial Sutures | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85<br>\$1,857.78<br>\$2,001.52<br>\$1,856.02<br>\$1,620.97<br>\$2,712.27<br>\$1,968.23<br>\$1,512.53<br>\$1,038.70<br>\$1,281.64 |
| 61526 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor 61530 Bone Flap Removal Of Bone From Skull For Removal Of Eighth Cranial Nerve Brain Tumor, Combined With Middle/Posterior Removal 61531 Subdural Implantation Of Strip Electrodes Through One Or More Burr Or Trephine Hole(S) For Long Term Seizure Monitoring 61533 Removal Of Bone From Skull For Implantation Of Brain Electrode For Seizure Monitoring 61534 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, Without Monitoring 61535 Removal Of Bone From Skull For Removal Of Electrode From Brain 61536 Removal Of Bone From Skull For Excision Of Brain Tissue To Halt Seizure Activity, With Monitoring 61537 Removal Of Bone From Skull For Excision Of Lobe Of Brain Without Monitoring 61538 Removal Of Bone From Skull For Excision Of Lobe Of Brain With Monitoring 61539 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) With Monitoring 61540 Removal Of Bone From Skull For Excision Of Lobe Of Brain (Other Than Temporal) Without Monitoring 61541 Removal Of Bone From Skull For Incision Of Brain Tissue 61543 Removal Of Bone From Skull For Partial Excision Of Brain Tissue 61544 Removal Of Bone From Skull For Partial Excision Of Cerebrospinal Fluid Site 61545 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor, With Elevation Of Bone Flap 61548 Removal Of Bone From Skull For Excision Of Pituitary Gland Tumor 61540 Craniectomy For Craniosynostosis; Single Cranial Suture  | \$1,419.11<br>\$872.48<br>\$2,193.85<br>\$2,087.01<br>\$2,258.03<br>\$2,012.85<br>\$1,857.78<br>\$2,001.52<br>\$1,856.02<br>\$1,620.97<br>\$2,712.27<br>\$1,968.23<br>\$1,512.53<br>\$1,038.70               |

| Code Description      |   | Fee                      |
|-----------------------|---|--------------------------|
| Extensive Cra         | niectomy For Multiple Cranial Suture Craniosynostosis (Eg, Cloverleaf Skull); Recontouring With Multiple Osteotomies And Bone   |                          |
|                       | , Barrel-Stave Procedure) (Includes Obtaining Grafts)   | \$2,184.16               |
|                       | - And Extracranial, Benign Tumor Of Cranial Bone (Eg, Fibrous Dysplasia); Without Optic Nerve Decompression   | \$1,695.07               |
|                       | - And Extracranial, Benign Tumor Of Cranial Bone (Eg, Fibrous Dysplasia); With Optic Nerve Decompression  | \$2,053.38               |
|                       | ith Elevation Of Bone Flap; For Selective Amygdalohippocampectomy   | \$1,911.69               |
|                       | ith Elevation Of Bone Flap; For Multiple Subpial Transections, With Electrocorticography During Surgery  Or Craniotomy; With Excision Of Foreign Body From Brain  | \$2,176.18               |
|                       | Dr Craniotomy; For Penetrating Wound Of Brain   | \$1,682.61<br>\$1,826.83 |
|                       | roach To Skull Base, Brain Stem Or Upper Spinal Cord For Biopsy, Decompression Or Excision Of Lesion;   | \$2,132.72               |
|                       | in Stem Or Upper Spinal Cord, Requiring Splitting Of Tongue And/Or Mandible   | \$3,616.82               |
|                       | asal Sinuses To Approach Brain Lesion Without The Removal Of The Maxilla Or Eyeball   | \$2,287.46               |
|                       | asal Sinuses To Approach Brain Lesion With The Removal Of The Maxilla Or Eyeball  | \$2,627.07               |
|                       | acial Bone To Approach Brain Lesion, Extradural   | \$2,697.19               |
|                       | acial Bone To Approach Brain Lesion, Intradural   | \$2,559.96               |
|                       | acial Bone To Approach Brain Lesion, Without Removal Of The Eyeball   | \$2,435.40               |
| 61585 Removal Of F    | acial Bone To Approach Brain Lesion, With Removal Of The Eyeball  | \$2,867.49               |
| 61586 Removal Of F    | acial Bone To Approach Brain Lesion, Without Bone Graft   | \$2,273.63               |
| Infratemporal         | Pre-Auricular Approach To Middle Cranial Fossa (Parapharyngeal Space, Infratemporal And Midline Skull Base, Nasopharynx),   |                          |
| 61590 With Or Witho   | ut Disarticulation Of The Mandible, Including Parotidectomy, Craniotomy, Decompression And/Or Mobiliz   | \$2,764.86               |
| 61591 Removal Of S    | kull Bone Behind Ear To Approach Brain Lesion, Infratemporal Post-Auricular Approach  | \$2,769.95               |
|                       | Zygomatic Approach To Middle Cranial Fossa (Cavernous Sinus And Carotid Artery, Clivus, Basilar Artery Or Petrous Apex)   |                          |
|                       | otomy Of Zygoma, Craniotomy, Extra- Or Intradural Elevation Of Temporal Lobe  | \$2,770.72               |
|                       | kull Bone Behind Ear To Approach Brain Lesion Through The Temporal Lobe   | \$2,165.01               |
| 61596 Removal Of S    | kull Bone Behind Ear To Approach Brain Lesion Through The Ear   | \$2,251.25               |
|                       |   |                          |
|                       | (Far Lateral) Approach To Posterior Cranial Fossa, Jugular Foramen Or Midline Skull Base, Including Occipital Condylectomy,   | <b>#0.070.00</b>         |
|                       | y, Resection Of C1-C3 Vertebral Body(S), Decompression Of Vertebral Artery, With Or Without Mobilization  | \$2,673.99               |
| 61598 Sigmoid Sinus   | Approach To Posterior Cranial Fossa, Clivus Or Foramen Magnum, Including Ligation Of Superior Petrosal Sinus And/Or   | \$2,497.89               |
|                       | umor Or Tissue Abnormality Of Front Of Skull Base (Anterior Fossa) Outside Membranes Covering Brain   | \$1.947.05               |
|                       | umor Or Tissue Abnormality Of Front Of Skull Base (Anterior Fossa) Within Membranes Covering Brain  | \$1,937.15               |
|                       | umor Or Tissue Ahormality Of Lower Skull Base (Infratemporal Fossa, Parapharyngeal Space, Petrous Apex) External To   | ψ1,007.10                |
|                       | overing Brain, Extradural   | \$2,001.47               |
|                       | umor Or Tissue Abnormality Of Lower Skull Base (Infratemporal Fossa, Parapharyngeal Space, Petrous Apex) Within   | <del></del>              |
|                       | overing Brain, Intradural   | \$2,561.50               |
| Removal Of T          | umor Or Tissue Abnormality Of Middle Of Skull Base (Infratemporal Fossa, Parapharyngeal Space, Petrous Apex) External To  |                          |
| 61607 Membranes C     | overing Brain, Extradural   | \$2,384.81               |
| Removal Of T          | umor Or Tissue Abnormality Of Middle Of Skull Base (Infratemporal Fossa, Parapharyngeal Space, Petrous Apex) Within   |                          |
| 61608 Membranes C     | overing Brain, Intradural   | \$2,832.83               |
| 61611 Transection C   | r Ligation, Carotid Artery In Petrous Canal; Without Repair (List Separately In Addition To Code For Primary Procedure)   | \$390.77                 |
|                       |   | <b>#0.040.00</b>         |
|                       | Carotid Aneurysm, Arteriovenous Malformation, Or Carotid-Cavernous Fistula By Dissection Within Cavernous Sinus onormal Blood Vessel At Skull Base Or Upper Spine Bones, Extradural   | \$2,842.30               |
|                       | onormal Blood Vessel At Skull Base Or Upper Spine Bones, Extradural   | \$2,467.13<br>\$3,057.16 |
|                       |   | \$3,037.16               |
|                       | pair Of Dura For Cerebrospinal Fluid Leak, Anterior, Middle Or Posterior Cranial Fossa Following Surgery Of The Skull Base; By raft (Eg, Pericranium, Fascia, Tensor Fascia Lata, Adipose Tissue, Homologous Or Synthetic Grafts) | \$1,126.63               |
| Secondary Re          | pair Of Dura For Csf Leak, Anterior, Middle Or Posterior Cranial Fossa Following Surgery Of The Skull Base; By Local Or   |                          |
|                       | /ascularized Pedicle Flap Or Myocutaneous Flap (Including Galea, Temporalis, Frontalis Or Occipitalis Mus   | \$1,259.25               |
| •                     | Temporary Balloon Arterial Occlusion, Head Or Neck (Extracranial/Intracranial) Including Selective Catheterization Of Vessel To   | <b>V</b> 1,200.20        |
|                       | Positioning And Inflation Of Occlusion Balloon, Concomitant Neurological Monitoring, And  | \$495.38                 |
| 61624 Occlusion Of    | Abnormal Artery, Accessed Through The Skin  | \$1,101.58               |
| 61626 Occlusion Of    | Head Or Neck Artery, Accessed Through The Skin  | \$870.17                 |
| 61630 Balloon Dilatio | n Of Blood Vessel In Head, Accessed Through The Skin  | \$1,184.22               |
|                       |   |                          |
|                       | Placement Of Intravascular Stent(S), Intracranial (Eg, Atherosclerotic Stenosis), Including Balloon Angioplasty, If Performed   | \$1,493.17               |
|                       | n Of Blood Vessel Spasm In Head, Accessed Through The Skin  | \$523.71                 |
|                       | n Of Additional Blood Vessel Spasm In Head In Same Blood Vessel Family, Accessed Through The Skin   | \$227.06                 |
|                       | n Of Additional Blood Vessel Spasm In Head In Different Blood Vessel Family, Accessed Through The Skin  | \$437.30                 |
|                       | lood Clot And Injection To Dissolve Blood Clot From Head Artery Using Fluoroscopic Guidance, Accessed Through Skin  | \$814.53                 |
|                       | emical Agent Into The Artery Of Brain With Insertion Of Catheter And Imaging, Initial Territory  emical Agent Into The Artery Of Brain With Insertion Of Catheter And Imaging, Each Additional Territory                          | \$554.97<br>\$336.17     |
|                       | ormal Artery-Vein Connection In Brain, Supratentorial, Simple   | \$236.17<br>\$2,147.21   |
|                       | ormal Artery-Vein Connection in Brain, Supratentorial, Simple   | \$3,512.27               |
|                       | ormal Artery-Vein Connection In Brain, Supratentorial, Simple   | \$2,416.80               |
|                       | ormal Artery-Vein Connection In Brain, Infratentorial, Complex  | \$3,794.42               |
|                       | ormal Artery-Vein Connection In Brain, Dural, Simple  | \$1,861.37               |
|                       | ormal Artery-Vein Connection In Brain, Dural, Complex   | \$3,086.48               |
|                       | nplex Bulging Of Blood Vessel (Aneurysm) Of Carotid Artery Circulation In Brain By Incision Of Skull  | \$3,572.68               |
|                       | nplex Bulging Of Blood Vessel (Aneurysm) Of Vertebrobasilar Circulation In Brain By Incision Of Skull   | \$3,906.74               |
| 61700 Repair Of Sim   | ple Bulging Of Blood Vessel (Aneurysm) Of Carotid Artery Circulation In Brain By Incision Of Skull  | \$2,890.60               |
| 61702 Repair Of Sim   | ple Bulging Of Blood Vessel (Aneurysm) Of Vertebrobasilar Circulation In Brain By Incision Of Skull   | \$3,401.69               |
|                       |   |                          |
|                       | ulging Of Blood Vessel (Aneurysm) Of Carotid Artery Circulation In Brain By Clamping Of Carotid Artery Via Incision Of Neck   | \$1,170.06               |
| • ,                   | bnormal Blood Vessel In Brain By Clamping Of Carotid Artery Via Incision Of Neck And Tying Of Abnormal Blood Vessel Via   | <u>.</u>                 |
| 61705 Incision Of Sk  |   | \$2,214.20               |
| 61708 Creation Of C   | ot In Abnormal Blood Vessel In Brain Using Electricity, Via Incision Of Skull   | \$2,166.62               |

| Code Description 61710 Surgical Creation Of Obstruction In Abnormal Blood Vessel In Brain 61711 Anastomosis, Arterial, Extracranial-Intracranial (Eg, Middle Cerebral/Cortical) Arteries 61720 Creation Of Brain Lesion By Stereotactic Method, Globus Pallidus Or Thalamus 61735 Creation Of Brain Lesion By Stereotactic Method, Other Than Globus Pallidus Or Thalamus 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance | \$1,828.10<br>\$2,196.98 |
|---|--------------------------|
| 61711 Anastomosis, Arterial, Extracranial-Intracranial (Eg, Middle Cerebral/Cortical) Arteries 61720 Creation Of Brain Lesion By Stereotactic Method, Globus Pallidus Or Thalamus 61735 Creation Of Brain Lesion By Stereotactic Method, Other Than Globus Pallidus Or Thalamus 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance   | \$2,196.98               |
| 61720 Creation Of Brain Lesion By Stereotactic Method, Globus Pallidus Or Thalamus 61735 Creation Of Brain Lesion By Stereotactic Method, Other Than Globus Pallidus Or Thalamus 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance  |                          |
| 61735 Creation Of Brain Lesion By Stereotactic Method, Other Than Globus Pallidus Or Thalamus 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance   | \$1,094.75               |
| 61736 Laser Interstitial Thermal Therapy (Litt) Of Single, Simple Growth Within Skull 61737 Laser Interstitial Thermal Therapy (Litt) Of Multiple Or Complex Growth Within Skull 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance   | \$1,371.03               |
| 61750 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance  | \$765.12                 |
| 61751 Stereotactic Biopsy, Aspiration, Or Excision Of Brain Lesion Using Ct And/Or Mri Guidance   | \$909.94                 |
|   | \$1,344.93               |
| 04700 Ctavastastia Insulantatian Of Danth Flastradas Into The Carabanna Factor of Tarres October Manifester   | \$1,329.85               |
| 61760 Stereotactic Implantation Of Depth Electrodes Into The Cerebrum For Long Term Seizure Monitoring  | \$1,512.71               |
| 61770 Stereotactic Localization, Including Burr Hole(S), With Insertion Of Catheter(S) Or Probe(S) For Placement Of Radiation Source  | \$1,388.29               |
| 61781 Stereotactic Computer-Assisted (Navigational) Procedure; Cranial, Intradural (List Separately In Addition To Code For Primary Procedure)  | \$218.72                 |
| 61782 Stereotactic Computer-Assisted (Navigational) Procedure; Cranial, Extradural (List Separately In Addition To Code For Primary Procedure)  | \$173.91                 |
| 61783 Stereotactic Computer-Assisted (Navigational) Procedure; Spinal (List Separately In Addition To Code For Primary Procedure)   | \$218.54                 |
| 61790 Stereotactic Creation Of Lesion Of Cranial Nerve, Accessed Through The Skin   | \$768.84                 |
| 61791 Stereotactic Creation Of Brainstem Lesion, Accessed Through The Skin  | \$972.83                 |
| 61796 Stereotactic Treatment Of Brain Growth, 1 Simple Lesion   | \$891.73                 |
| 61797 Stereotactic Treatment Of Brain Growth, Each Additional Simple Lesion   | \$183.19                 |
| 61798 Stereotactic Treatment Of Brain Growth, 1 Complex Lesion  | \$1,168.41               |
| 61799 Stereotactic Treatment Of Brain Growth, Each Additional Complex Lesion  | \$252.96                 |
| 61800 Application Of Stereotactic Headframe For Stereotactic Radiosurgery (List Separately In Addition To Code For Primary Procedure)   | \$142.41                 |
| 61850 Twist Drill Or Burr Hole(S) For Implantation Of Neurostimulator Electrodes Cortical 61860 Removal Of Bone Of Skull For Implantation Of Neurostimulator Electrodes In Brain  | \$852.88                 |
| 61863 Removal Of Bone Of Skull For Implantation Of Neurostimulator Electrodes in Brain, First Array   | \$1,339.40<br>\$1,483.08 |
| 61864 Removal Of Bone Of Skull For Implantation Of Neurostimulator Electrodes In Brain, Each Additional Array   | \$262.34                 |
| Twist Drill, Burr Hole, Craniotomy, Or Craniectomy With Stereotactic Implantation Of Neurostimulator Electrode Array In Subcortical Site (Eg, 61867 Thalamus, Globus Pallidus, Subthalamic Nucleus, Periventricular, Periaqueductal Gray), With Use Of Intraoper  | \$1,943.40               |
| Twist Drill, Burr Hole, Craniotomy, Or Craniectomy With Stereotactic Implantation Of Neurostimulator Electrode Array In Subcortical Site (Eg,   |                          |
| 61868 Thalamus. Globus Pallidus, Subthalamic Nucleus, Periventricular, Periaqueductal Gray), With Use Of Intraoper  | \$416.57                 |
| 61880 Revision Or Removal Of Intracranial Neurostimulator Electrodes  | \$515.50                 |
| 61885 Insertion Or Replacement Of Brain Neurostimulator Generator Or Receiver With Connection To A Single Electrode   | \$341.59                 |
| 61886 Insertion Or Replacement Of Brain Neurostimulator Generator Or Receiver With Connection To Multiple Electrodes  | \$807.32                 |
| 61888 Revision Or Removal Of Cranial Neurostimulator Pulse Generator Or Receiver  | \$347.73                 |
| 62000 Elevation Of Depressed Skull Fracture, Simple   | \$847.65                 |
| 62005 Elevation Of Depressed Skull Fractures, Compound Or Comminuted  | \$1,095.40               |
| 62010 Elevation Of Depressed Skull Fracture, With Repair And/Or Debridement Of Brain  | \$1,469.66               |
| 62100 Craniotomy For Repair Of Dural/Cerebrospinal Fluid Leak, Including Surgery For Rhinorrhea/Otorrhea  | \$1,501.69               |
| 62115 Reduction Of Craniomegalic Skull (Eg, Treated Hydrocephalus); Not Requiring Bone Grafts Or Cranioplasty   | \$1,454.41               |
| Reduction Of Craniomegalic Skull (Eg, Treated Hydrocephalus); Requiring Craniotomy And Reconstruction With Or Without Bone Autograft  | <b>0.4.070.00</b>        |
| 62117 (Includes Obtaining Grafts)   | \$1,679.03               |
| 62120 Repair Of Encephalocele, Skull Vault, Including Cranioplasty  62121 Craniotomy With Repair Of Encephalocele, Skull Base   | \$1,834.92<br>\$1,405.29 |
| 62140 Repair Of Skull Bone Defect, 5 Cm Or Less   | \$991.15                 |
| 62141 Repair Of Skull Bone Defect, More Than 5.0 Cm   | \$1,102.05               |
| 62142 Removal Of Skull Bone Flap Or Skull Plate   | \$864.29                 |
| 62143 Replacement Of Skull Bone Flap Or Skull Plate   | \$908.05                 |
| 62145 Cranioplasty For Skull Defect With Reparative Brain Surgery   | \$1,210.85               |
| 62146 Repair Of Skull Bone With Graft, 5.0 Cm Or Less   | \$1,076.81               |
| 62147 Repair Of Skull Bone With Graft, More Than 5.0 Cm   | \$1,342.19               |
| 62148 Removal Of Skull Bone Graft, Accessed Beneath The Skin  | \$117.26                 |
| Neuroendoscopy, Intracranial, For Placement Or Replacement Of Ventricular Catheter And Attachment To Shunt System Or External Drainage (List Separately In Addition To Code For Primary Procedure)  | \$158.05                 |
| Neuroendoscopy, Intracranial; With Dissection Of Adhesions, Fenestration Of Septum Pellucidum Or Intraventricular Cysts (Including 62161 Placement, Replacement, Or Removal Of Ventricular Catheter)  Neuroendoscopy, Intracranial; With Fenestration Or Excision Of Colloid Cyst, Including Placement Of External Ventricular Catheter For   | \$1,498.82               |
| 62162 Drainage  | \$1,617.71               |
| 62164 Neuroendoscopy, Intracranial; With Excision Of Brain Tumor, Including Placement Of External Ventricular Catheter For Drainage   | \$1,795.96               |
| 62165 Neuroendoscopy, Intracranial; With Excision Of Pituitary Tumor, Transnasal Or Trans-Sphenoidal Approach   | \$1,336.66               |
| 62180 Ventriculocisternostomy (Torkildsen Type Operation)   | \$1,371.28               |
| 62190 Creation Of Brain Fluid Drainage Shunt, Sub-Atrial, -Jugular, -Auricular  | \$807.78                 |
| 62192 Creation Of Brain Fluid Drainage Shunt, Sub-Peritoneal, -Pleural, Other Terminus  | \$857.26                 |
| 62194 Replacement Or Irrigation, Subdural Catheter  | \$435.06                 |
| 62200 Creation Of An Opening For Brain Fluid Drainage, Third Ventricle  | \$1,182.79               |
| 62201 Ventriculocisternostomy, Third Ventricle; Stereotactic, Neuroendoscopic Method  | \$1,050.32               |
| 62220 Creation Of Brain Fluid Drainage Shunt, Ventriculo-Atrial, -Jugular, -Auricular   | \$939.45                 |
| 62223 Creation Of Brain Fluid Drainage Shunt, Ventriculo-Peritoneal, -Pleural, Other Terminus   | \$1,027.70               |
| 62225 Replacement Or Irrigation, Ventricular Catheter   | \$398.10                 |
| 62230 Replacement Or Revision Of Cerebrospinal Fluid Shunt, Obstructed Valve, Or Distal Catheter In Shunt System  | \$813.70                 |
| 62252 Reprogramming Of Programmable Cerebrospinal Shunt 62256 Removal Of Complete Cerebrospinal Fluid Shunt System; Without Replacement   | \$82.49                  |
| 62258 Removal Of Complete Cerebrospinal Fluid Shunt System; Without Replacement 62258 Removal Of Complete Shunt System; With Replacement By Similar Or Other Shunt At Same Operation  | \$532.55<br>\$1.072.19   |
| Injection Or Mechanical Removal Of Spinal Canal Scar Tissue, Percutaneous Procedure, Accessed Through The Skin, Multiple Sessions Over 62263   2 Or More Days   | \$1,072.19<br>\$610.68   |
| Injection Or Mechanical Removal Of Spinal Canal Scar Tissue, Percutaneous Procedure, Accessed Through The Skin, Multiple Sessions In 1 62264 Day  | \$424.90                 |

|              | Description   | Fee                      |
|--------------|---|--------------------------|
|              | Diagnostic Aspiration Of Spinal Disc Or Tissue, Accessed Through The Skin   | \$271.22                 |
|              | Aspiration Of Spinal Cord Cyst Or Fluid-Filled Cavity, Accessed Through The Skin  Needle Biopsy Of Spinal Cord, Accessed Beneath The Skin   | \$234.60<br>\$240.11     |
|              | Spinal Tap For Diagnosis  | \$132.25                 |
|              | Spinal Tap With Drainage Of Spinal Fluid  | \$177.51                 |
|              | Injection, Epidural, Of Blood Or Clot Patch   | \$177.06                 |
| 62280        | Injection/Infusion Of Neurolytic Substance (Eg, Alcohol, Phenol, Iced Saline Solutions), With Or Without Other Therapeutic Substance;<br>Subarachnoid   | \$316.14                 |
|              | Injection Of Spinal Canal To Destroy Nerve In The Upper Spine Area  | \$227.18                 |
| 62282        | Injection Of Spinal Canal To Destroy Nerve In The Lower Spine Area  | \$312.62                 |
| 62284        | Injection Of Dye For X-Ray Imaging And/Or Ct Of Lower Spinal Canal  | \$207.57                 |
|              | Aspiration Of Lower Spine Disc, Accessed Through The Skin   | \$534.36                 |
|              | Injection Of Dye For X-Ray Imaging Of Spine Disc, Each Level, Lumbar  | \$387.11                 |
|              | Injection Of Dye For X-Ray Imaging Of Spine Disc, Each Level, Cervical Or Thoracic  | \$315.80                 |
|              | Injection Of Chemical Enzyme Into Herniated Spinal Disc   | \$533.07                 |
|              | Injection Procedure, Arterial, For Occlusion Of Arteriovenous Malformation, Spinal X-Ray Of Upper Spinal Canal With Radiological Supervision And Interpretation   | \$822.17<br>\$269.73     |
|              | X-Ray Of Middle Spinal Canal With Radiological Supervision And Interpretation   | \$256.70                 |
|              | X-Ray Of Lower Spinal Canal With Radiological Supervision And Interpretation  | \$265.74                 |
|              | X-Ray Of Lower Spinal Canal With Radiological Supervision And Interpretation, Two Or More Regions   | \$290.47                 |
|              | Injection Of Substance Into Spinal Canal Of Upper Or Middle Back  | \$155.44                 |
| 62321        | Injection Of Substance Into Spinal Canal Of Upper Or Middle Back Using Imaging Guidance   | \$264.86                 |
|              | Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum  | \$147.01                 |
|              | Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance   | \$260.81                 |
|              | Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Upper Or Middle Back  | \$153.41                 |
|              | Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Upper Or Middle Back Using Imaging Guidance   | \$246.34                 |
| 62326        | Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Lower Back  | \$147.49                 |
| 62327        | Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Lower Back Lower Back Using Imaging Guidance  | \$239.04                 |
|              | Diagnostic Spinal Tap Of Lower Spine Using Imaging Guidance   | \$272.04                 |
|              | Therapeutic Spinal Tap Of Lower Spine Using Imaging Guidance  | \$334.80                 |
|              | Implantation, Revision, Or Repositioning Of Spinal Canal Medication Catheter  | \$402.02                 |
|              | Implantation, Revision, Or Repositioning Of Catheter In Spinal Canal For Medication Administration  | \$801.03                 |
|              | Removal Of Previously Implanted Intrathecal Or Epidural Catheter  Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Subcutaneous Reservoir   | \$247.46<br>\$304.57     |
|              | Implantation or Replacement of Device For Intrathecal or Epidural Drug Infusion; Non-Programmable Pump  | \$381.63                 |
|              | Implantation Or Replacement Of Device For Intrathecal Or Epidural Drug Infusion; Programmable Pump, Including Preparation Of Pump, With Or Without Programming  | \$383.97                 |
|              | Removal Of Spinal Canal Drug Infusion Pump Or Device, Accessed Beneath The Skin   | \$296.13                 |
|              | Electronic Analysis Of Programmable, Implanted Pump For Intrathecal Or Epidural Drug Infusion (Includes Evaluation Of Reservoir Status, Alarm Status, Drug Prescription Status); Without Reprogramming Or Refill  | \$30.33                  |
|              | Electronic Analysis Of Programmable, Implanted Pump For Intrathecal Or Epidural Drug Infusion (Includes Evaluation Of Reservoir Status, Alarm Status, Drug Prescription Status); With Reprogramming   |                          |
|              | Electronic Analysis Of Programmable, Implanted Pump For Intrathecal Or Epidural Drug Infusion (Includes Evaluation Of Reservoir Status,   | \$45.47                  |
| 62369        | Alarm Status, Drug Prescription Status); With Reprogramming And Refill  Electronic Analysis Of Programmable, Implanted Pump For Intrathecal Or Epidural Drug Infusion (Includes Evaluation Of Reservoir Status,   | \$98.15                  |
|              | Alarm Status, Drug Prescription Status); With Reprogramming And Refill (Requiring Skill Of A Physician Or Other Qualified   | \$98.65                  |
| 62380        | Decompression Of Spinal Cord And/Or Nerve Root In Lower Back Using Endoscope  | Price By Report          |
| 63001        | Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetectomy, Foraminotomy Or Diskectomy, (Eg, Spinal Stenosis), One Or Two Vertebral Segments; Cervical   | \$1,189.40               |
|              | Partial Removal Of Spinal Bone With Exploration And/Or Decompression Of Spinal Cord In Upper Back   | \$1,072.48               |
|              | Partial Removal Of Spinal Bone With Exploration And/Or Decompression Of Spinal Cord In Lower Back   | \$1,161.78               |
| 63011        | Laminectomy For Decompression Of Spinal Cord And/Or Cauda Equina, One Or Two Segments; Sacral   | \$974.79                 |
| 63012        | Laminectomy With Removal Of Abnormal Facets And/Or Pars Inter-Articularis With Decompression Of Cauda Equina And Nerve Roots For Spondylolisthesis, Lumbar (Gill Type Procedure)  | \$1,162.43               |
|              | Laminectomy With Exploration And/Or Decompression Of Spinal Cord And/Or Cauda Equina, Without Facetectomy, Foraminotomy Or  |                          |
|              | Diskectomy, (Eg, Spinal Stenosis), More Than 2 Vertebral Segments; Cervical   | \$1,282.70               |
|              | Partial Removal Of Bone And/Or Release Of Middle Spinal Cord Or Spinal Nerves, More Than 2 Vertebral Segments  Partial Removal Of Bone And/Or Release Of Lower Spinal Cord Or Spinal Nerves, More Than 2 Vertebral Segments                                     | \$1,469.29<br>\$1,008.58 |
|              | Herniated Intervertebral Disc; 1 Interspace, Cervical   | \$1,098.58<br>\$1,020.05 |
|              | Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetectomy, Foraminotomy And/Or Excision Of   |                          |
| 63030        | Herniated Intervertebral Disc; 1 Interspace, Lumbar   | \$957.42                 |
| 63035        | Laminotomy (Hemilaminectomy), With Decompression Of Nerve Root(S), Including Partial Facetectomy, Foraminotomy And/Or Excision Of Hemiated Intervertebral Disc; Each Additional Interspace, Cervical Or Lumbar (List Separately In Addition To Code For Primary | \$182.40                 |
|              | Re-Exploration Of Spine Repair With Release Of Upper Spinal Cord Or Nerves, Single Interspace   | \$1,213.15               |
|              | Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Single Interspace   | \$1,270.54               |
|              | Re-Exploration Of Spine Repair With Release Of Upper Spinal Cord Or Nerves, Each Additional Cervical Interspace   | \$299.07                 |
| 63044        | Re-Exploration Of Spine Repair With Release Of Lower Spinal Cord Or Nerves, Each Additional Lumbar Interspace  Laminectomy, Facetectomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve                  | \$355.11                 |
| 63045        | Root(S), (Eg, Spinal Or Lateral Recess Stenosis), Single Vertebral Segment; Cervical  | \$1,123.31               |
|              | Partial Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Mid Back (Thoracic) Area  | \$1,077.05               |
|              | Partial Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Lower Back (Lumbar) Area  | \$1,082.72               |
| 000:         | Laminectomy, Facetectomy And Foraminotomy (Unilateral Or Bilateral With Decompression Of Spinal Cord, Cauda Equina And/Or Nerve   | *                        |
|              | Root(S), (Eg, Spinal Or Lateral Recess Stenosis)), Single Vertebral Segment; Each Additional Segment, Cervical, Thoracic, Or Lumba  | \$200.97                 |
| <b>63050</b> | Laminoplasty, Cervical, With Decompression Of The Spinal Cord, Two Or More Vertebral Segments;  | \$1,307.69               |

| Codo                    | Description  | Foo                      |
|-------------------------|--|--------------------------|
|                         | Description   Reconstruction Of Bone Around Spinal Canal With Release Of Spinal Cord, With Bone Reconstruction   | Fee<br>\$1,490.70        |
| 03031                   | Partial Removal Of Bone Of Single Segment Of Spine In Lower Back With Release Of Spinal Cord And/Or Nerves During Fusion Of Spine In   | ψ1,430.70                |
| 63052                   | Lower Back   | \$208.93                 |
|                         | Partial Removal Of Bone Of Additional Segment Of Spine In Lower Back With Release Of Spinal Cord And/Or Nerves During Fusion Of Spine  | *                        |
| 63053                   | In Lower Back  | \$185.39                 |
| 63055                   | Release Of Middle Spinal Cord And/Or Nerves  | \$1,405.69               |
|                         | Transpedicular Approach With Decompression Of Spinal Cord, Equina And/Or Nerve Root(S) (Eg, Herniated Intervertebral Disk), Single   |                          |
| 63056                   | Segment; Lumbar (Including Transfacet, Or Lateral Extraforaminal Approach) (Eg, Far Lateral Herniated Intervertebral Disk)   | \$1,447.67               |
|                         | Transpedicular Approach With Decompression Of Spinal Cord, Equina And/Or Nerve Root(S) (Eg, Herniated Intervertebral Disk), Single   |                          |
| 63057                   | Segment; Each Additional Segment, Thoracic Or Lumbar (List Separately In Addition To Code For Primary Procedure)   | \$274.46                 |
| 63064                   | Release Of Middle Spinal Cord Or Nerves, Costovertebral Approach, Single Segment   | \$1,540.09               |
|                         | Release Of Middle Spinal Cord Or Nerves, Costovertebral Approach, Each Additional Segment  | \$171.49                 |
| 63075                   | Removal Of Upper Spine Disc And Release Of Spinal Cord And/Or Nerves, Single Interspace  | \$1,190.58               |
|                         | Removal Of Upper Spine Disc And Release Of Spinal Cord And/Or Nerves, Each Additional Interspace   | \$210.03                 |
|                         | Removal Of Middle Spine Disc And Release Of Spinal Cord And/Or Nerves, Single Interspace   | \$1,316.09               |
|                         | Removal Of Middle Spine Disc And Release Of Spinal Cord And/Or Nerves, Each Additional Interspace  | \$172.58                 |
|                         | Removal Of Upper Spine Bone With Release Of Spinal Cord And/Or Nerves, Anterior Approach, Single Segment   | \$1,533.56               |
|                         | Removal Of Upper Spine Bone With Release Of Spinal Cord And/Or Nerves, Anterior Approach, Each Additional Segment  | \$227.23                 |
|                         | Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Transthoracic Approach, Single Segment   | \$1,865.70               |
| 63086                   | Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Transthoracic Approach, Each Additional Segment  | \$163.93                 |
|                         |  |                          |
| 63087                   | Removal Of Middle Or Lower Spine Bone With Release Of Spinal Cord Or Nerves, Combined Thoracolumbar Approach, Single Segment   | \$2,096.70               |
|                         | Removal Of Middle Or Lower Spine Bone With Release Of Spinal Cord Or Nerves, Combined Thoracolumbar Approach, Each Additional  |                          |
| 63088                   | Segment  Removed Of Middle Legype On Search Seine Bone With Balance Of Seinel Cond On Name Transportance On Batter eitensel Annach   | \$221.18                 |
| 00000                   | Removal Of Middle, Lower, Or Sacral Spine Bone With Release Of Spinal Cord Or Nerves, Transperitoneal Or Retroperitoneal Approach,   | <b>#4 700 00</b>         |
| 63090                   | Single Segment  Remarks Of Middle Lower Or Search Spine Rope With Release Of Spinel Cord Or Newson Transportances Or Detroportional Approach Foob  | \$1,722.98               |
| 00004                   | Removal Of Middle, Lower, Or Sacral Spine Bone With Release Of Spinal Cord Or Nerves, Transperitoneal Or Retroperitoneal Approach, Each  | ¢45447                   |
|                         | Additional Segment  Removal Of Middle Spine Bone With Release Of Spinal Cord And/Or Nerves, Lateral Extracavitary Approach   | \$154.17<br>\$2,333.52   |
|                         | Removal Of Lower Spine Bone With Release Of Spinal Cord And/Or Nerves, Lateral Extracavitary Approach  Removal Of Lower Spine Bone With Release Of Spinal Cord And/Or Nerves, Lateral Extracavitary Approach   |                          |
|                         | Removal Of Middle Or Lower Spine Bone With Release Of Spinal Cord And/Or Nerves, Lateral Extracavitary Approach  | \$2,297.59               |
|                         | Laminectomy With Myelotomy (Eq. Bischof Or Drez Type), Cervical, Thoracci Or Thoracolumbar   | \$251.17                 |
|                         | Laminectomy With Myelolomy (Eg, Bischol of Drez Type), Cervical, Thoracci of T | \$1,369.81               |
|                         | Laminectomy With Drainage Of Intramedullary Cyst/Syrinx; To Subaractifiolic Space  | \$1,213.72               |
|                         | Removal Of Spine Bone With Severing Of Nerve Roots, 1 Or 2 Segments  | \$1,480.38               |
|                         | Removal Of Spine Bone With Severing Of Nerve Roots, Nore Than 2 Segments   | \$1,009.65<br>\$1,243.79 |
|                         | Laminectomy With Section Of Spinal Accessory Nerve   | \$1,190.90               |
|                         | Removal Of Spine Bone With Incision Of Both Middle Spinal Cord Tracts  | \$1,468.12               |
|                         | Laminectomy, With Release Of Tethered Spinal Cord, Lumbar  | \$1,273.69               |
|                         | Laminectomy, With release of retriefed Spirital Cold, Editional  Laminectomy For Excision Or Occlusion Of Arteriovenous Malformation Of Cord; Cervical   | \$2,517.35               |
|                         | Removal Of Middle Spine Bone And Arteriovenous Malformation  | \$2,575.04               |
|                         | Removal Of Middle And Lower Spine Bone And Arteriovenous Malformation  | \$2,574.39               |
|                         | Removal Of Upper Spine Bone And Growth Other Than A Tumor Extradural   | \$1,443.12               |
|                         | Removal Of Middle Spine Bone And Growth Other Than A Tumor, Extradural   | \$1,443.12               |
|                         | Removal Of Lower Spine Bone And Growth Other Than A Tumor, Extradural  | \$1,332.82               |
|                         | Removal Of Sacral Spine Bone And Growth Other Than A Tumor, Extradural   | \$1,237.10               |
|                         | Removal Of Upper Spine Bone And Growth Other Than A Tumor, Intradural  | \$1,776.74               |
|                         | Removal Of Middle Spine Bone And Growth Other Than A Tumor, Intradural   | \$1,774.98               |
|                         | Removal Of Lower Spine Bone And Growth Other Than A Tumor, Intradural  | \$1,805.51               |
|                         | Removal Of Sacral Spine Bone And Growth Other Than A Tumor, Intradural   | \$1,601.20               |
|                         | Removal Or Biopsy Of Upper Spine Bone Tumor, Extradural  | \$1,556.75               |
|                         | Removal Or Biopsy Of Middle Spine Bone Tumor, Extradural   | \$1,714.56               |
|                         | Removal Or Biopsy Of Lower Spine Bone Tumor, Extradural  | \$1,357.24               |
|                         | Removal Or Biopsy Of Sacral Spine Bone Tumor, Extradural   | \$1,372.09               |
|                         | Removal Or Biopsy Of Upper Spine Bone Tumor, Intradural  | \$1,815.56               |
|                         | Removal Or Biopsy Of Middle Spine Bone Tumor, Intradural   | \$1,797.93               |
|                         | Removal Or Biopsy Of Lower Spine Bone Tumor, Intradural  | \$1,698.96               |
|                         | Removal Or Biopsy Of Sacral Spine Bone Tumor, Intradural   | \$1,632.87               |
|                         | Removal Or Biopsy Of Upper Spine Bone Tumor, Intramedullary, Intradural  | \$2,227.60               |
|                         | Removal Or Biopsy Of Middle Spine Bone Tumor, Intramedullary, Intradural   | \$2,445.59               |
|                         | Removal Or Biopsy Of Lower Spine Bone Tumor, Intramedullary, Intradural  | \$2,564.15               |
|                         | Removal Or Biopsy Of Spine Bone Tumor, Combined Extradural-Intradural  | \$2,373.26               |
| 30200                   | Osteoplastic Reconstruction Of Dorsal Spinal Elements, Following Primary Intraspinal Procedure (List Separately In Addition To Code For  | ΨΞ,010.20                |
| 63295                   | Primary Procedure)   | \$306.42                 |
|                         | Removal Of Upper Spine Bone Growth, Extradural   | \$1,577.19               |
|                         | Removal Of Middle Spine Bone Growth, Transthoracic Approach, Extradural  | \$1,886.04               |
|                         | Removal Of Middle Spine Bone Growth, Thoracolumbar Approach, Extradural  | \$1,863.96               |
|                         | Removal Of Lower Or Sacral Spine Bone Growth, Transperitoneal Or Retroperitoneal Approach, Extradural  | \$1,974.46               |
|                         | Removal Of Upper Spine Bone Growth, Intradural   | \$2,006.12               |
|                         | Removal Of Middle Spine Bone Growth, Transthoracic Approach, Intradural  | \$2,132.00               |
|                         | Removal Of Middle Spine Bone Growth, Thoracolumbar Approach, Intradural  | \$2,095.59               |
| 03300                   | Removal Of Lower Or Sacral Spine Bone Growth, Transperitoneal Or Retroperitoneal Approach, Intradural  | \$2,051.67               |
|                         |  |                          |
|                         | Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, For Excision Of Intraspinal Lesion, Single Segment; Each Additional  |                          |
| 63307                   | Vertebral Corpectomy (Vertebral Body Resection), Partial Or Complete, For Excision Of Intraspinal Lesion, Single Segment; Each Additional Segment (List Separately In Addition To Codes For Single Segment)  | \$271.85                 |
| 63307                   |  | \$271.85<br>\$941.06     |
| 63307<br>63308<br>63600 | Segment (List Separately In Addition To Codes For Single Segment)  |                          |

| Code   | I  |   |
|--|--|---|
|  | Description  | Fee   |
|  | Stereotactic Treatment Of Each Additional Spine Growth  Implantation Of Spinal Neurostimulator Electrodes, Accessed Through The Skin   | \$210.64<br>\$1,685.08  |
|  | Laminectomy For Implantation Of Neurostimulator Electrodes, Plate/Paddle, Epidural   | \$820.20  |
|  | Removal Or Revision Of Spinal Neurostimulator Electrodes, Accessed Through The Skin  | \$593.20  |
|  | Removal Of Spinal Neurostimulator Electrode Plate/Paddle(S) Placed Via Laminotomy Or Laminectomy, Including Fluoroscopy, When  | *****   |
| 63662  | Performed  | \$755.90  |
|  | Revision And Replacement Of Spinal Neurostimulator Electrodes, On The Skin   | \$864.29  |
|  | Revision And Replacement Of Spinal Neurostimulator Electrodes, Implanted   | \$776.23  |
|  | Insertion Or Replacement Of Spinal Neurostimulator Generator Or Receiver   | \$363.30  |
|  | Removal Or Revision Of Spinal Neurostimulator Generator Or Receiver  | \$373.26  |
|  | Repair Of Meningocele; Less Than 5 Cm Diameter   | \$1,136.69  |
|  | Repair Of Meningocele; Larger Than 5 Cm Diameter  Repair Of (Less Than 5 Centimeter Diameter) Spinal Cord Defect (Spina Bifida)  | \$1,239.17<br>\$1,441.46  |
|  | Repair Of (Less Than 5 Centimeter) Spinal Cord Defect (Spina Bifida)   | \$1,509.93  |
|  | Repair Of Dural/Cerebrospinal Fluid Leak, Not Requiring Laminectomy  | \$707.97  |
|  | Repair Of Spinal Fluid Leak, With Removal Of Part Of Vertebra  | \$1,092.13  |
|  | Dural Graft, Spinal  | \$960.93  |
|  | Creation Of Shunt, Lumbar, Subarachnoid-Peritoneal, -Pleural, Or Other; Including Laminectomy  | \$858.76  |
|  | Creation Of Spinal Fluid Shunt, Accessed Through The Skin  | \$662.34  |
| 63744  | Replacement, Irrigation, Or Revision Of Lower Spinal Canal Shunt   | \$604.38  |
| 63746  | Removal Of Entire Lumbosubarachnoid Shunt System Without Replacement   | \$508.94  |
| 64400  | Injection Of Anesthetic Agent And/Or Steroid Into Trigeminal Nerve Of Face   | \$121.67  |
| 64405  | Injection Of Anesthetic Agent And/Or Steroid Into Greater Occipital Nerve Of Upper Neck And Back Of Head   | \$76.41   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Vagus Nerve  | \$77.45   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Brachial Nerve Bundle Of Arm   | \$78.62   |
|  | Injection By Continuous Infusion Of Anesthetic Agent And/Or Steroid Into Brachial Nerve Bundle Of Arm  | \$64.97   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Axillary Nerve Of Upper Arm And Shoulder   | \$98.52   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Suprascapular Nerve Of Shoulder  | \$84.88   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Single Intercostal Nerve Of Rib  | \$71.22   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Multiple Intercostal Nerves Of Ribs For Regional Nerve Block   | \$34.42   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Ilioinguinal And Iliohypogastric Nerves Of Lower Abdomen And Groin Injection Of Anesthetic Agent And/Or Steroid Into Pudendal Nerve Of External Genitals And Area Around Anus  | \$88.82   |
|  | Injection of Anesthetic Agent And/Or Steroid Into Paracervical Nerve Of Uterus   | \$91.91<br>\$76.79  |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Sciatic Nerve Of Lower Back And Leg  | \$88.61   |
|  | Injection By Continuous Infusion Of Anesthetic Agent And/Or Steroid Into Sciatic Nerve Of Lower Back And Leg   | \$59.89   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Femoral Nerve Of Thigh   | \$93.43   |
|  | Injection By Continuous Infusion Of Anesthetic Agent And/Or Steroid Into Femoral Nerve Of Thigh  | \$61.71   |
|  | Injection By Continuous Infusion Of Anesthetic Agent Into Lumbar Nerve Bundle Of Lower Back By Posterior Approach  | \$62.80   |
|  | Injection Of Anesthetic Agent And/Or Steroid Into Other Peripheral Nerve Or Branch   | \$79.99   |
| 64451  | Injection Of Anesthetic Agent And/Or Steroid Into Nerves Supplying Joint Between Spine And Pelvis Using Imaging Guidance   | \$221.14  |
| 64454  | Injection Of Anesthetic Agent And/Or Steroid Into Genicular Nerve Branches Of Knee Using Imaging Guidance  | \$223.40  |
|  | Injections Of Anesthetic And/Or Steroid Drug Into Nerve Of Foot  | \$53.87   |
|  | Injection Of Anesthetic Agent, Thoracic Vertebra Through A Single Incision   | \$129.14  |
|  | Injection Of Anesthetic Agent, Thoracic Vertebra Through Additional Incisions  | \$68.72   |
|  | Injection Of Anesthetic Agent, Thoracic Vertebra Through A Inserted Catheter   | \$228.24  |
| 64479  | Injections Of Anesthetic And/Or Steroid Drug Into Upper Or Middle Spine Nerve Root Using Imaging Guidance, Single Level  | \$188.41  |
|  | Injections Of Anesthetic And/Or Steroid Drug Into Upper Or Middle Spine Nerve Root Using Imaging Guidance, Each Additional Level   | \$109.77  |
|  | Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging Guidance, Single Level  | \$265.84  |
|  | Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging Guidance, Each Additional Level   | \$109.77  |
|  | Injections Of Local Anesthetic For Pain Control And Abdominal Wall Analgesia On One Side   | \$119.48  |
|  | Continuous Infusions Of Local Anesthetic For Pain Control And Abdominal Wall Analgesia On One Side   | \$213.50  |
|  | Injections Of Local Anesthetic For Pain Control And Abdominal Wall Analgesia On Both Sides  Continuous Infusions Of Local Anesthetic For Pain Control And Abdominal Wall Analgesia On Both Sides   | \$148.31<br>\$350.86  |
|  | Injections Of Upper Or Middle Spine Facet Joint Using Imaging Guidance, Single Level   | \$199.33  |
|  | Injections Of Opper Or Middle Spine Facet Joint Using Imaging Guidance, Second Level   | \$100.91  |
|  | Injections Of Opper Or Middle Spine Facet Joint Using Imaging Guidance, Second Level  Injections Of Upper Or Middle Spine Facet Joint Using Imaging Guidance, Third And Any Additional Level(S)  | \$100.91  |
|  | Injections Of Lower Or Sacral Spine Facet Joint Using Imaging Guidance, Single Level   | \$178.28  |
|  | Injections Of Lower Or Sacral Spine Facet Joint Using Imaging Guidance, Second Level   | \$91.82   |
| 01101  |  |   |
|  | Injections Of Lower Or Sacral Spine Facet Joint Using Imaging Guidance, Third And Any Additional Level(S)  | \$92.99   |
| 64495  | Injections Of Lower Or Sacral Spine Facet Joint Using Imaging Guidance, Third And Any Additional Level(S) Injection Of Anesthetic Agent, Trigeminal Nerve Bundle   | \$92.99<br>\$96.60  |
| 64495<br>64505<br>64510  | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle   | \$96.60<br>\$157.27   |
| 64495<br>64505<br>64510<br>64517   | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle  | \$96.60<br>\$157.27<br>\$184.10   |
| 64495<br>64505<br>64510<br>64517<br>64520  | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69   |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530   | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92   |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553  | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70   |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553  | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin   | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29   |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553<br>64555<br>64561  | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin   | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29<br>\$803.03   |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553<br>64561<br>64566  | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Addominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29<br>\$803.03<br>\$115.15                                     |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553<br>64561<br>64566  | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29<br>\$803.03   |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553<br>64555<br>64561<br>64568                                     | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29<br>\$803.03<br>\$115.15<br>\$609.79                         |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553<br>64555<br>64561<br>64566<br>64568                            | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29<br>\$803.03<br>\$115.15<br>\$609.79                         |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553<br>64555<br>64561<br>64568<br>64568<br>64569<br>64570          | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator Removal Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29<br>\$803.03<br>\$115.15<br>\$609.79                         |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553<br>64566<br>64568<br>64568<br>64569<br>64570<br>64575          | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator  | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29<br>\$803.03<br>\$115.15<br>\$609.79                         |
| 64495<br>64505<br>64510<br>64517<br>64520<br>64530<br>64553<br>64566<br>64568<br>64568<br>64569<br>64570<br>64575<br>64580 | Injection Of Anesthetic Agent, Trigeminal Nerve Bundle Injection Of Anesthetic Agent, Sympathetic Nerve Bundle Injection Of Anesthetic Agent, Sacral Nerve Bundle Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Middle Or Lower Spine Sympathetic Nerves Injection Of Anesthetic Agent, Abdominal Sympathetic Nerve Bundle Implantation Of Cranial Nerve Neurostimulator Electrodes, Accessed Through The Skin Implantation Of Peripheral Nerve Neurostimulator Electrodes, Accessed Through The Skin Insertion Of Sacral Nerve Neurostimulator Electrode, Accessed Through The Skin Implantation Of Lower Leg Neurostimulator Electrode, Accessed Through The Skin Incision For Implantation Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Revision Or Replacement Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array, Including Connection To Existing Pulse Generator Removal Of Cranial Nerve (Eg, Vagus Nerve) Neurostimulator Electrode Array And Pulse Generator Incision For Implantation Of Neurostimulator Electrode Array; Peripheral Nerve (Excludes Sacral Nerve) | \$96.60<br>\$157.27<br>\$184.10<br>\$249.69<br>\$165.92<br>\$2,492.70<br>\$2,184.29<br>\$803.03<br>\$115.15<br>\$609.79<br>\$674.77<br>\$713.33 |

| Codo   | Description  | Foo  |
|--|--|--|
| Code   | Description   Revision Or Replacement Of Hypoglossal Nerve Neurostimulator Electrode And Breathing Sensor Electrode With Connection To Existing  | Fee  |
| 64583  | Generator Canada | \$747.62   |
|  | Removal Of Hypoglossal Nerve Neurostimulator Electrode And Generator And Breathing Sensor Electrode  | \$631.48   |
| 64585  | Revision Of Peripheral Neurostimulator Electrodes  | \$215.49   |
|  | Revision Of Peripheral Neurostimulator Electrodes  | \$184.14   |
|  | Insertion Or Replacement Of Peripheral, Sacral, Or Gastric Neurostimulator Generator Or Receiver   | \$163.00   |
|  | Removal Or Revision Of A Peripheral, Sacral, Or Gastric Neurostimulator Pulse Generator Or Receiver  | Price By Report  |
|  | Insertion Or Replacement Of A Peripheral Integrated Neurostimulator Each Additional Electrode Array  | Price By Report  |
|  | Revision Or Removal Of A Electrode Array With An Integrated Neurostimulator  | Price By Report  |
|  | Destruction Of The First Division Of The Trigeminal (Facial) Nerve Branch  Destruction Of The Second And Third Division Of The Trigeminal (Facial) Nerve Branch  | \$441.24<br>\$607.74   |
| 04003  | Destruction of the decord And Third Division of the Higelinian (Lacial) Notice Didnot  | ψ007.74  |
| 64610  | Destruction By Neurolytic Agent, Trigeminal Nerve Second And Third Division Branches At Foramen Ovale Under Radiologic Monitoring  | \$735.77   |
|  | Chemodenervation Of Parotid And Submandibular Salivary Glands, Bilateral   | \$136.73   |
| 64612  | Chemodenervation Of Muscle(S); Muscle(S) Innervated By Facial Nerve, Unilateral (Eg, For Blepharospasm, Hemifacial Spasm)  | \$139.80   |
|  | Chemodenervation Of Muscle(S); Muscle(S) Innervated By Facial, Trigeminal, Cervical Spinal And Accessory Nerves, Bilateral (Eg, For Chronic  |  |
|  | Migraine)  | \$152.54   |
|  | Injection Of Chemical For Destruction Of Nerve Muscles On One Side Of Neck Excluding Voice Box Accessed Through The Skin   | \$90.50  |
|  | Injection Of Chemical For Destruction Of Nerve Muscles On One Side Of Voice Box Accessed Through The Skin  Destruction By Neurolytic Agent Intercostal Nerve   | \$152.94<br>\$143.52   |
|  | Destruction By Neurolytic Agent Intercostal Nerve  Destruction Of Genicular Nerve Branches Of Knee By Injection Using Imaging Guidance   | \$428.76   |
|  | Radiofrequency Destruction Of Nerves Supplying Joint Between Spine And Pelvis Using Imaging Guidance   | \$523.04   |
|  | Heat Destruction Of Intraosseous Basivertebral Nerve In Bones Of Spine In Lower Back, First Two Bones  | \$384.27   |
|  | Heat Destruction Of Intraosseous Basivertebral Nerve In Additional Bone Of Spine In Lower Back   | \$176.27   |
| 64630  | Destruction By Neurolytic Agent; Pudendal Nerve  | \$242.25   |
| 64632  | Destruction By Neurolytic Agent; Plantar Common Digital Nerve  | \$84.85  |
|  | Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Single   |  |
| 64633  | Facet Joint  | \$473.99   |
|  | Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Cervical Or Thoracic, Each   |  |
| 64634  | Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)   | \$235.43   |
| 64625  | Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Lumbar Or Sacral, Single Facet Joint   | \$503.02   |
| 04033  | Destruction By Neurolytic Agent, Paravertebral Facet Joint Nerve(S), With Imaging Guidance (Fluoroscopy Or Ct); Lumbar Or Sacral, Each   | φ503.02  |
| 64636  | Additional Facet Joint (List Separately In Addition To Code For Primary Procedure)   | \$212.07   |
|  | Destruction By Neurolytic Agent Other Peripheral Nerve Or Branch   | \$175.06   |
|  | Injection Of Chemical For Destruction Of Nerve Muscles On One Arm Or Leg, 1-4 Muscles  | \$115.15   |
| 64643  | Injection Of Chemical For Destruction Of Nerve Muscles On Arm Or Leg, 1-4 Muscles, Each Additional Extremity   | \$75.33  |
|  | Injection Of Chemical For Destruction Of Nerve Muscles On One Arm Or Leg, 5 Or More Muscles  | \$132.05   |
|  | Injection Of Chemical For Destruction Of Nerve Muscles On Arm Or Leg, 5 Or More Muscles, Each Additional Extremity   | \$92.45  |
|  | Injection Of Chemical For Destruction Of Nerve Muscles On Trunk, 5 Or More Muscles   | \$123.95   |
|  | Injection Of Chemical For Destruction Of Nerve Muscles On Trunk, 6 Or More Muscles   | \$164.42   |
|  | Chemodenervation Of Eccrine Glands; Both Axillae  Chemodenervation Of Eccrine Glands; Other Area(S) (Eg, Scalp, Face, Neck), Per Day   | \$70.56<br>\$83.78   |
|  | Destruction By Neurolytic Agent, With Or Without Radiologic Monitoring; Celiac Plexus  | \$312.44   |
|  | Destruction By Neurolytic Agent, With Or Without Radiologic Monitoring; Superior Hypogastric Plexus  | \$456.58   |
|  | Neurolysis; Digital, One Or Both, Same Digit   | \$350.77   |
| 64704  | Neurolysis; Nerve Of Hand Or Foot  | \$301.33   |
| 64708  | Release Of Nerve Of Arm Or Leg, Open Procedure   | \$514.98   |
|  | Release Of Sciatic Nerve, Open Procedure   | \$603.40   |
|  | Release Of Major Nerve Of Arm Or Leg, Open Procedure   | \$713.08   |
|  | Release Of Nerve Of Upper Leg, Open Procedure  | \$685.61   |
|  | Neurolysis And/Or Transposition; Cranial Nerve (Specify)   | \$472.84   |
|  | Neurolysis And/Or Transposition; Ulnar Nerve At Elbow  | \$557.92   |
|  | Neurolysis And/Or Transposition; Ulnar Nerve At Wrist  Neurolysis And/Or Transposition; Median Nerve At Carpal Tunnel  | \$417.86<br>\$456.88   |
|  | Decompression; Unspecified Nerve(S) (Specify)  | \$456.88<br>\$365.31   |
|  | Decompression; Plantar Digital Nerve   | \$250.79   |
|  | Internal Neurolysis By Dissection, With Or Without Microdissection (List Separately In Addition To Code For Primary Neuroplasty)   | \$161.79   |
|  | Transection Or Avulsion Of; Supraorbital Nerve   | \$402.10   |
|  | Transection Or Avulsion Of; Infraorbital Nerve   | \$453.67   |
|  | Transection Or Avulsion Of; Mental Nerve   | \$307.83   |
|  | Transection Or Avulsion Of; Inferior Alveolar Nerve By Osteotomy   | \$421.16   |
|  | Transection Or Avulsion Of; Lingual Nerve  | \$431.95   |
| 64742  | Transection Or Avulsion Of; Facial Nerve, Differential Or Complete   | \$459.06   |
|  |  | P 4 4 F O C  |
| 64744  | Transection Or Avulsion Of; Greater Occipital Nerve  |  |
| 64744  | Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve  | \$445.96<br>\$386.81   |
| 64744<br>64746   | Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal   | \$386.81   |
| 64744<br>64746<br>64755  | Transection Or Avulsion Of; Greater Occipital Nerve  Transection Or Avulsion Of; Phrenic Nerve  Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy)   | \$386.81<br>\$820.14   |
| 64744<br>64746<br>64755<br>64760   | Transection Or Avulsion Of; Greater Occipital Nerve  Transection Or Avulsion Of; Phrenic Nerve  Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy)  Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal  | \$386.81<br>\$820.14<br>\$469.28   |
| 64744<br>64746<br>64755<br>64760<br>64763  | Transection Or Avulsion Of; Greater Occipital Nerve  Transection Or Avulsion Of; Phrenic Nerve  Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy)   | \$386.81<br>\$820.14<br>\$469.28<br>\$464.14   |
| 64744<br>64746<br>64755<br>64760<br>64763<br>64766                                     | Transection Or Avulsion Of; Greater Occipital Nerve  Transection Or Avulsion Of; Phrenic Nerve  Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy)  Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal  Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together   | \$386.81<br>\$820.14<br>\$469.28   |
| 64744<br>64746<br>64755<br>64760<br>64763<br>64766<br>64771                            | Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together Incision Or Removal Of Nerve (Obturator) Inside Of The Pelvis That Control The Muscles That Pull The Thighs Together  | \$386.81<br>\$820.14<br>\$469.28<br>\$464.14<br>\$572.17   |
| 64744<br>64746<br>64755<br>64760<br>64763<br>64766<br>64771<br>64772                   | Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Yagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together Incision Or Removal Of Nerve (Obturator) Inside Of The Pelvis That Control The Muscles That Pull The Thighs Together Transection Or Avulsion Of Other Cranial Nerve, Extradural Transection Or Avulsion Of Other Spinal Nerve, Extradural Excision Of Neuroma; Cutaneous Nerve, Surgically Identifiable   | \$386.81<br>\$820.14<br>\$469.28<br>\$464.14<br>\$572.17<br>\$531.50                                     |
| 64744<br>64746<br>64755<br>64760<br>64763<br>64766<br>64771<br>64772<br>64774          | Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Vagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together Incision Or Removal Of Nerve (Obturator) Inside Of The Pelvis That Control The Muscles That Pull The Thighs Together Transection Or Avulsion Of Other Cranial Nerve, Extradural Transection Or Avulsion Of Other Spinal Nerve, Extradural Excision Of Neuroma; Cutaneous Nerve, Surgically Identifiable Removal Of Growth Of Finger Or Toe Nerve, Same Digit  | \$386.81<br>\$820.14<br>\$469.28<br>\$464.14<br>\$572.17<br>\$531.50<br>\$582.73<br>\$382.98<br>\$362.74 |
| 64744<br>64746<br>64755<br>64760<br>64763<br>64766<br>64771<br>64772<br>64774<br>64776 | Transection Or Avulsion Of; Greater Occipital Nerve Transection Or Avulsion Of; Phrenic Nerve Transection Or Avulsion Of; Yagus Nerves Limited To Proximal Stomach (Selective Proximal Vagotomy, Proximal Gastric Vagotomy, Parietal Cell Vagotomy, Supra- Or Highly Selective Vagotomy) Transection Or Avulsion Of; Vagus Nerve (Vagotomy), Abdominal Incision Or Removal Of Nerve (Obturator) Outside Of The Pelvis That Control The Muscles That Pull The Thighs Together Incision Or Removal Of Nerve (Obturator) Inside Of The Pelvis That Control The Muscles That Pull The Thighs Together Transection Or Avulsion Of Other Cranial Nerve, Extradural Transection Or Avulsion Of Other Spinal Nerve, Extradural Excision Of Neuroma; Cutaneous Nerve, Surgically Identifiable   | \$386.81<br>\$820.14<br>\$469.28<br>\$464.14<br>\$572.17<br>\$531.50<br>\$582.73<br>\$382.98             |

| 1972   Grazion Ci Forence D'Inverdo Prior Mone, Ench Additional Nerve   1972   Grazion Ci Forence Ci Naturani, Saprier Nerve   1982   1972   | Code  | Description  | Fee             |
|--|-------|--|-----------------|
| Section Comment   Section   Section Comment   Section Comment   Section Comment   Section   Section Comment   Section Comment   Section Comment   Section   Section Comment  |       | Description  Removal Of Growth Of Hand Or Foot Nerve, Each Additional Nerve  |                 |
| 1978   Discission Of Neutratine Script Name   1978   Institute Of Neutratine Name   1978  |       | · · · · · · · · · · · · · · · · · · ·  | \$662.80        |
| 64780 Excision Of Neuroliforuma On Neuroliforuma Cutamenas Nerve         38300           64700 Removal Of Coyneth Of Peripheral Nerve Or Nerve Lining, Estensiva Including Maligrancy         3964.3           64700 Removal Of Coyneth Of Peripheral Nerve Or Nerve Lining, Estensiva Including Maligrancy         3964.3           64800 Sympathic Connection Control         3964.3           64801 Sympathic Connection, Control         31,931.7           64810 Sympathic Connection, Control         31,931.7           64811 Sympathic Connection, Control         31,931.7           64812 Sympathic Connection, Control         31,931.7           64813 Sympathic Connection, Control         37,00.8           64813 Sympathic Connection, Control         37,00.8           64821 Sympathic Connection, Control         37,00.8           64822 Sympathic Connection, State Connection, Control         372.1           64823 Sympathic Connection, State Co  |       |  | \$896.14        |
| 64700   Removal Cif Compt Of Perspectal News Or News Liming, Major   97816.  | 64787 | Insertion Of Plastic Cap On Nerve End  | \$213.65        |
| 67728   Richard Of Norwer   1989  |       |  | \$350.91        |
| \$1926   Symposite corrections   \$193.07  |       | · ,  | \$768.01        |
| 54900   Sympathecistomy, Cerebroalmonics   \$730.00  |       | , ,  | •               |
| 68000 Symoshiectomy, Convoluntery         \$1,010.17           64810 Symoshiectomy, Tomorountery         \$2,076.5           64810 Symoshiectomy, Tomorountery         \$2,076.5           64810 Symoshiectomy, Diplar America, Each Digit         \$2,076.5           64820 Symoshiectomy, Diplar America, Such Digit         \$2,076.5           64820 Symoshiectomy, User Araby         \$3,067.3           64820 Symoshiectomy, User Araby         \$4,068.5           64821 Symoshiectomy, User Araby         \$4,069.5           64822 Symoshiectomy, Superficial Parker Araby         \$4,069.5           64832 Symoshiectomy, Superficial Parker Araby         \$4,069.5           64843 Symoshiectomy, Symos  |       | 1 7  |                 |
| Season Sympathecisterry, Umbard   Season S   |       |  |                 |
| 64810 Sympathectomy, Unitaria  64820 Sympathectomy, Dipilal Arteries, Each Digit  64820 Sympathectomy, Braid Artery  64821 Sympathectomy, Braid Artery  64822 Sympathectomy, Braid Artery  64823 Systan C Cline Hund of Proof Digital Nerve  64823 Systan C Cline Hund of Proof Digital Nerve  64823 Systan C Cline Hund of Proof Digital Nerve  64823 Systan C Cline Nerve, Hand OF Proof, Common Sensory Nerve  64823 Systan C Cline Nerve, Hand OF Proof, Common Sensory Nerve  64823 Systan C Cline Nerve, Hand OF Proof, Common Sensory Nerve  64823 Systan C Cline Nerve, Hand OF Proof, Common Sensory Nerve  64823 Systan C Cline Nerve, Hand OF Proof, Cline Hund Cline Nerve, Hand OF Proof (List Separately) in Addition To Code For Primary Procedure)  64823 Systan C Cline Nerve, Hand OF Proof (List Separately) in Addition To Code For Primary Procedure)  64824 Systan C Cline Nerve, Mark To Cling Systan Systa   |       |  | \$941.52        |
| 6922 Sympathentomy, Risard Artery 59393. 69422 Sympathentomy, Stand Artery 59393. 69422 Sympathentomy, Stand Artery 59393. 69423 Sympathentomy, Stand Artery 59393. 69423 Sympathentomy, Stand Artery 59493. 69423 Sturte OC For Stand C Frood Digital Nerve 59404. 69423 Sturte OC For Stand C Frood Digital Nerve 59404. 69423 Sturte OC For Stand C Frood Digital Nerve 59404. 69423 Sturte OC For Stand C Frood Digital Nerve 59404. 69433 Sturte OC For Nerve; Natural Or Frood Common Standary Nerve 59404. 69433 Sturte OC For Nerve; Natural Or Frood Common Standary Nerve 59404. 69433 Sturte OC For Nerve; Natural Or Frood Common Standary Nerve 59404. 69437 Sturte OC For Nerve; Natural Or Frood Common Standary Nerve 59405. 69409 Sturte OC Forsteron Table Nerve 69405. 69400 Sturte OC Forsteron Table Norve 69405. 69400 Sturte OC Forsteron Table Norve 69405. 69400 Sturte OC Nerves To Restore Function To The Face (Facial-Hypoglossal) 69400 Sturte OC Nerves To Restore Function To The Face (Facial-Hypoglossal) 69400 Sturte OC Nerves To Restore Function To The Face (Facial-Hypoglossal) 69400 Sturte OC Nerves To Restore Function To The Face (Facial-Hypoglossal) 69400 Sturte OC Nerves To Restore Function To The Face (Facial-Hypoglossal) 69400 Sturte OC Nerves To Restore Function To The Face (Facial-Hypoglossal) 69400 Sturte OC Nerves To Restore Function To The Face (Facial-   | 64818 | Sympathectomy, Lumbar  | \$705.68        |
| 68203 Sympathectomy, Upenficial Patient Archy   \$363.1   68203 Sympathectomy, Superficial Patient Arch   \$721.1   68203 Stature Of Diver Isrand Or Foot Digital Nerve   \$322.0   68204 Stature Of Circle Nerve; Visind Circle Common Sensory Nerve   \$22.0   68205 Stature Of Circle Nerve; Visind Circle Common Sensory Nerve   \$32.0   68205 Stature Of Circle Nerve; Visind Circle Common Sensory Nerve   \$32.0   68205 Stature Of Circle Nerve; Visind Circle Common Sensory Nerve   \$32.0   68205 Stature Of Circle Nerve; Visind Circle Common Sensory Nerve   \$32.0   68205 Stature Of Prosheror Table Nerve   \$32.0   68205 Stature Of   |       |  | \$667.39        |
| 54835   Suture O'D net Hand O'F ood plant Nerve   54645   54835   Suture O'D net Hand O'F ood plant Nerve   54230   54835   Suture O'D net Hand O'F ood plant Nerve   54230   54835   Suture O'D ne Nerve; Hand O'F ood Quant Nerve   54230   54835   Suture O'D ne Nerve; Hand O'F ood Quant Nerve   54230   54835   Suture O'D ne Nerve; Median Motor Theran   5741   54835   Suture O'D ne Nerve; Median Motor Theran   5741   54837   Suture O'D Penterra Rever, Median Motor Theran   5741   54837   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54837   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Penterra Rever, Arm O't Log, With Relocation To New Ste   5825   54836   Suture O'D Rever, Required Rever (List Separately In Addition To Code For Pirmary Procedure)   51230   54836   Suture O'D Rever, Required Rever (List Separately In Addition To Code For Pirmary Procedure)   51230   54836   Suture O'D Nerve To Resoure Function To The Face (Facial-Spranta)   51230   54836   Suture O'D Nerve, Requiring Secondary O'D released Suture (List Separately In Addition To Code For Nerve Suture)   51230   54837   Suture O'D Nerve, Requiring Secondary O'D released Suture (List Separately In Addition To Code For Nerve Suture)   51230   54836   Suture O'D Nerve, Requiring Secondary O'D released Suture (List Separately In Addition To Code For Nerve Suture)   51230   54837   Suture O'D Nerve,   |       |  | \$633.77        |
| 54830 Surure OT One Hand OF Foot Digital Nerve 54823 Duture OT One Norw, Medical part And OF Foot Digital Nerve 54823 Duture OT One Norw, Medical Plant And OF Foot Common Sensory Nerve 54843 Surure OT One Norw, Medical Motor Therang 5474.1. 54850 Surure OT One Norw, Medical Motor Therang 5474.1. 54850 Surure OT One Norw, Charles Motor 5474.1. 54850 Surure OT One Norw, Medical Norw, Hand OF Foot (Lat Separately in Addition To Code For Primary Procedure) 5474.1. 54850 Surure OT Persphrenal Nerve, Arm OT Leg, With Receasion To New Site 54850 Surure OT Persphrenal Nerve, Arm OT Leg, With Receasion To New Site 54850 Surure OT Persphrenal Nerve, Arm OT Leg, With Receasion To New Site 54850 Surure OT Persphrenal Nerve, Arm OT Leg, With Receasion To New Site 54850 Surure OT Persphrenal Nerve, Arm OT Leg, With Receasion To New Site 54850 Surure OT Persphrenal Nerve, Arm OT Leg, With Receasion To New Site 54850 Surure OT Persphrenal Nerve, Arm OT Leg, With Receasion To New Site 54850 Surure OT Fersphrenal Nerve, Arm OT Leg, With Receasion To Code For Primary Procedure) 55750 Surure OT Fersphrenal Nerve, Legisland Nerve (Lat Separately In Addition To Code For Primary Procedure) 55750 Surure OT Fersphrenal Nerve, Legisland Nerve (Lat Separately In Addition To Code For Primary Procedure) 55750 Surure OT Fersphrenal Nerve, Legisland Nerve (Lat Separately In Addition To Code For Primary Procedure) 55750 Surure OT Fersphrenal Nerve, Legisland Nerve (Lat Separately In Addition To Code For Primary Nerverthaphy) 5760 Surure OT Fersphrenal Nerve, Legisland Nerve (Lat Separately In Addition To Code For Nerve Suture) 57750 Surure OT Nerve: Requiring Secondary OT Delayed Suture (Lat Separately In Addition To Code For Nerve Suture) 57750 Surure OT Nerve: Requiring Secondary OT Delayed Suture (Lat Separately In Addition To Code For Nerve Suture) 57750 Surure OT Nerve: Requiring Secondary OT Delayed Suture (Lat Separately In Addition To Code For Nerve Suture) 57750 Surure OT Nerve: Requiring Secondary OT Delayed Suture (Lat Separately I   |       |  | \$638.14        |
| 54835   Suture O' To Ne Nerve; Hand To Proct Digital Nerve   |       |  |                 |
| Season   Surure Of One Nerver, Hand Of Foot, Common Sensory Nerve   Season   Seaso   |       | · ·  |                 |
| Season   Suture Of One Narvey Median Motor Therare   \$741.11  |       | · · ·  | \$634.86        |
| S4227.  Sturre OT Each Additional Nerve, Hand OF Foot (List Separately in Addition To Code For Primary Procedure)  \$371.7  64690. Sturre OT Petipheral Nerve, Amr Or Leg \$387.5  64690. Sturre OT Petipheral Nerve, Amr Or Leg \$371.7  64690. Sturre OT Petipheral Nerve, Amr Or Leg \$371.7  64690. Sturre OT Petipheral Nerve, Amr Or Leg \$1,059.6  64690. Sturre OT Scalato Nerve \$1,059.6  64690. Sturre OT Scalato Nerve \$1,100.6  64690. Sturre OT Scalato Nerve \$1,100.6  64690. Sturre OT Facial Nervite International Major Peripheral Nerve (List Separately in Addition To Code For Primary Procedure) \$1,230.0  64690. Sturre OT Facial Nervite International \$1,230.0  64690. Sturre OT Facial Nervite International \$1,230.0  64690. Sturre OT Facial Nervite International \$1,100.6  64690. Sturre OT Facial Nervite International To The Face (Facial-Spinal) \$1,100.6  64690. Sturre OT Nerves To Resistor Function To The Face (Facial-Spinal) \$1,100.6  64690. Sturre OT Nerves To Resistor Function To The Face (Facial-Spinal) \$1,100.6  64690. Sturre OT Nerves Requiring Secondary Or Delayed Subrer (List Separately in Addition To Code For Primary Neurorinaphy) \$1,100.6  64690. Sturre OT Nerves Requiring Stendering OT Bone Of Extremity (List Separately in Addition To Code For Primary Neurorinaphy) \$1,100.6  64690. Sturre OT Nerves Requiring Stendering OT Bone Of Extremity (List Separately in Addition To Code For Nerve Suture) \$1,500.6  64690. Sturre OT Nerves Requiring Stendering OT Bone Of Extremity (List Separately in Addition To Code For Nerve Suture) \$1,500.6  64690. Sturre OT Nerves Requiring Stendering OT Bone Of Extremity (List Separately in Addition To Code For Nerve Suture) \$1,500.6  64690. Sturre OT Nerves Requiring Stendering OT Bone Of Extremity (List Separately in Addition To Code For Primary Neurorinaphy) \$1,500.6  64690. Sturre OT Nerves Requiring Stendering OT Bone Of Extremity (List Separately in Addition To Code For Primary Procedure) \$1,500.6  64690. Start OT Nerves Requiring Stendering OT Bone Of Extremity (List Separately i   |       |  | \$741.13        |
| SATURE OF Posterior Thial Nerve SASS Suture Of Peripheral Nerve, Arm Or Log. With Relocation To New Site SASS Suture Of Peripheral Nerve, Arm Or Log SASS Suture Of Statich Nerve SASS Suture Of Sacial Nerve: Extracranial SASS Suture Of Pacial Nerve: Extracranial SASS Suture Of Nerve SASS Sass Sass Sass Sass Sass Sass Sass   | 64836 | Suture Of One Nerve; Ulnar Motor   | \$741.13        |
| S895.5 Suture Of Peripheral Nerve, Amr Or Leg. With Relocation To New Site 64875 Suture Of Peripheral Nerve, Amr Or Leg 875.64875 Suture Of Stadic Nerve 81.6589 84859 Suture Of Stadic Nerve 81.6589 84859 Suture Of Stadic Nerve 81.1390.0 848695 Suture Of Stadic Nerve 81.1390.0 848695 Suture Of Stank Additional Major Peripheral Nerve (List Separately in Addition To Code For Primary Procedure) 81.1390.0 848695 Suture Of Facial Nerve, Entracrainal 878.28.8 848695 Suture Of Pacial Nerve, Entracrainal 878.28.8 848695 Suture Of Nerve Sequence Section Function To The Face Facial-Spirinal) 878.28.8 848695 Suture Of Nerve Sequence Section Function To The Face Facial-Spirinal) 878.28.8 848745 Suture Of Nerve Requiring Secondary Of Delayed Stutre (List Separately in Addition To Code For Primary Neurorhaphy) 878.7 848745 Suture Of Nerve, Requiring Secondary Of Delayed Stutre (List Separately in Addition To Code For Nerve Suture) 878.7 848745 Suture Of Nerve, Requiring Stontening Of Bone Of Estimentity (List Separately in Addition To Code For Nerve Suture) 878.7 84875 Stutre Of Nerve, Requiring Stontening Of Bone Of Estimentity (List Separately in Addition To Code For Nerve Suture) 878.7 84876 Stutre Of Nerve, Requiring Stontening Of Bone Of Estimentity (List Separately in Addition To Code For Nerve Suture) 878.7 84876 Stutre Of Nerve, Requiring Stontening Gratit, Head Or Nock More Than 4 Cm in Length 84895 Grant Of Marko Of Food Nerve, 4 Com Or Less 878.7 84895 Grant Of Marko Of Food Nerve, 4 Com Or Less 878.7 84895 Grant Of Marko Of Food Nerve, 4 Com Or Less 878.7 84895 Grant Of Marko Of Food Nerve, 4 Com Or Less 878.7 84895 Grant Of Marko Of Food Nerve, 4 Com Or Less 878.7 84895 Grant Of Markophe Hand Or Food Nerve, 4 Com Or Less 878.7 84895 Grant Of Markophe Hand Or Food Nerve, 8 Com Or Less 878.7 84895 Grant Of Markophe Hand Or Food Nerve, 4 Com Or Less 878.7 8489   |       |  | \$322.70        |
| Season   Suture Of Peripheral Nerve, Arm Or Leg   \$1,059.8   \$1, |       |  | \$871.73        |
| Sample   Survive Of Sciotic Nerve   Science   Sample  |       |  | \$895.52        |
| \$219.4  |       |  | •               |
| 64862 Stutze Of Lumbar Piexus  64862 Stutze Of Facial Nerve: Extracranial  64865 Stutze Of Facial Nerve: Extracranial  64866 Connection Of Nerves To Restore Function To The Face (Facial-Sprinal)  64866 Connection Of Nerves To Restore Function To The Face (Facial-Sprinal)  64876 Stutze Of Nerve: Requiring Secondary Or Delayed Stutze (List Separately in Addition To Code For Primary Neurorrhaphy)  64876 Stutze Of Nerve: Requiring Secondary Or Delayed Stutze (List Separately in Addition To Code For Primary Neurorrhaphy)  64876 Stutze Of Nerve: Requiring Secondary Proximal Mobilization, Or Transposition Of Nerver (List Separately in Addition To Code For Nerve Stutzer)  64876 Stutze Of Nerve: Requiring Shortening Of Bone Of Extremty (List Separately in Addition To Code For Nerve Stutzer)  64876 Stutzer Of Nerve: Requiring Shortening Or Bone Of Extremty (List Separately in Addition To Code For Nerve Stutzer)  64876 Stutzer Of Nerve: Requiring Shortening Or Bone Of Extremty (List Separately in Addition To Code For Nerve Stutzer)  8515.75  64885 Graft Of Head Of Heack Nerve, 4.0 Cm Or Less  65164886 Nerve Critic (Includes Orbitating) Graft), Head Or Heack Nerve, 4.0 Cm Or Less  65895 Graft Of Hand Of Foot Nerve, 4.0 Cm Or Less  65895 Graft Of Hand Of Foot Nerve, 4.0 Cm Or Less  65895 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm Or Less  65896 Graft Of Muripic Hand Or Foot Nerve, 4.0 Cm   |       |  |                 |
| 58486  Stuture Of Facial Nerve; Extracranial   5728.0  |       | ,  |                 |
| 64866 Suture Of Facial Haves, Intratemporal, With Or Wilmout Grating         \$1.005.8           64866 Connection Of Nerves To Restore Function To The Face (Facial-Spinal)         \$1.144.6           64866 Connection Of Nerves To Restore Function To The Face (Facial-Spinal)         \$22.5           64872 Suture Of Nerve; Requiring Extensive Proximal Mobilization, Or Transposition Of Nerve (List Separately in Addition To Code For Primary Neurorrhaphy)         \$102.6           84874 Suture Of Nerve; Requiring Extensive Proximal Mobilization, Or Transposition Of Nerve (List Separately in Addition To Code For Nerve Suture)         \$15.37           84874 Suture Of Nerve; Requiring Stortening Of Bone Of Extremity (List Separately in Addition To Code For Nerve Suture)         \$15.27           84874 Suture Of Nerve; Requiring Stortening Of Bone Of Extremity (List Separately in Addition To Code For Nerve Suture)         \$15.27           84875 Suture Of Nerve; Requiring Stortening Of Bone Of Extremity (List Separately in Addition To Code For Nerve Suture)         \$15.27           84885 Graff Of Hadde Of Rock Rerve, 4.0 Cm Or Less         \$1.008.4           84886 Nerve Graft (Includes Cobtaining Graft), Head Or Neck; More Than 4.0 Cm         \$1.266.4           84887 Graff Of Hand Or Foot Nerve, More Than 4.0 Cm         \$1.286.4           84888 Graff Of Hand Or Foot Nerve, More Than 4.0 Cm         \$1.286.4           84889 Graff Of Mulpipe Amore Of Nerve, More Than 4.0 Cm         \$1.286.4           84889 Graff Of Mulpipe Amore Of Nerve Supplies (Nerve More T  |       |  | \$1,236.04      |
| 64866 Connection Of Nerves To Restore Function To The Face (Facial-Spinal)   \$1,144.6   | 64864 | Suture Of Facial Nerve; Extracranial   | \$782.85        |
| 64886 Connection Of Nerves To Restore Function To The Face (Facial-Hypoglossal)   \$222.5  |       | ·  | \$1,005.98      |
| Suture Of Nerve, Requiring Excensive Proximal Molilization, Or Transposition Of Nerve (List Separately in Addition To Code For Primary Neurorrhaphy)  \$152.6  64876 Suture Of Nerve, Requiring Extensive Proximal Molilization, Or Transposition Of Nerve (List Separately in Addition To Code For Nerve Suture)  \$152.7  84885 Glaft Of Head Of Neck Nerve, 4 Or Or Less  \$252.6  84886 Nerve Graft (Includes Obtaining Graft), Head Of Neck, More Than 4 Cm In Length  \$152.7  84885 Glaft Of Head Of Neck Nerve, 4.0 Cm Or Less  \$252.7  84885 Glaft Of Head Of Poot Nerve, 4.0 Cm Or Less  \$252.7  84886 Nerve Graft (Includes Obtaining Graft), Head Of Neck, More Than 4 Cm In Length  \$252.7  84886 Graft Of Hand Of Foot Nerve, 4.0 Cm Or Less  \$252.7  84886 Graft Of Hand Of Foot Nerve, More Than 4.0 Cm  \$252.7  84885 Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less  \$252.7  84885 Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm  \$252.7  84885 Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm  \$252.7  84887 Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm  \$252.8  84890 Flat Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm  \$252.8  84890 Placement Of Nerve Foot Grafting, Single Strand  84900 Placement Of Nerve Foot Prival Nerve, Second Stage  84910 Nerve Graft, Each Additional Nerve, Second Stage  84910 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve  84910 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve  84911 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve  84910 Nerve Graft, Each Additional Strand  84910 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve  84911 Repair Of Nerve Using Nerve Graft, Frist Strand  84910 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve  84910 Nerve  |       | 1 /  |                 |
| 64874 Suture Of Nerve: Requiring Extensive Proximal Mobilization, Or Transposition Of Nerve (List Separately in Addition To Code For Nerve Suture)  5152.7  64876 Suture Of Nerve: Requiring Shortening Of Bone Of Extremity (List Separately in Addition To Code For Nerve Suture)  5172.7  64886 March Of Head Of Neck Nerve, 4 Or Chr. Class  64886 Nerve Graft (Includes Obtaining Graft), Head Or Neck; More Than 4 Cm In Length  5172.4  64898 Orati Of Hand Of Foot Nerve, 4.0 Cm Or Less  64898 Orati Of Hand Of Foot Nerve, More Than 4 Oration  5172.4  64899 Graft Of Hand Of Foot Nerve, More Than 4 Oration  64893 Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less  64893 Graft Of Arm Or Leg Nerve, More Than 4.0 Cm  64895 Graft Of Multiple Hand Or Foot Nerves, 4.0 Cm Or Less  64896 Graft Of Multiple Hand Or Foot Nerves, 4.0 Cm Or Less  64896 Graft Of Multiple Hand Or Foot Nerves, 4.0 Cm Or Less  64896 Graft Of Multiple Hand Or Foot Nerves, 4.0 Cm Or Less  64896 Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm  64896 Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm  64896 Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm  64896 Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm  64896 Graft Of Multiple Hand Or Leg Nerves, More Than 4.0 Cm  64896 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm  64980 Graft Of Multiple Arm Or Leg Nerves More Than 1.0 Cm  64980 Graft Graft Charles Control or Code Nerves More Than 1.0 Cm  64980 Graft Graft Charles Char   |       |  |                 |
| 64876 Stuture Of Nerve: Requiring Shortening Of Bone Of Extremity (List Separately In Addition To Code For Nerve Suture)   \$17.37.     4885 Graft Of Head Of Neck Nerve, 4.0 Cm Or Less   \$1.0024.     48880 Nerve Graft (Includes Obtaining Graft), Head Of Neck; More Than 4.0 Cm In Length   \$1.174.4     48890 Graft Of Hand Of Foot Nerve, 4.0 Cm Or Less   \$974.4     48891 Graft Of Hand Of Foot Nerve, More Than 4.0 Cm   \$948.1     48893 Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less   \$948.1     48893 Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less   \$948.1     48893 Graft Of Arm Or Leg Nerve, More Than 4.0 Cm   \$1.1014.     48895 Graft Of Multiple Hand Of Foot Nerves, 4.0 Cm Or Less   \$1.1024.     48896 Graft Of Multiple Hand Of Foot Nerves, 4.0 Cm Or Less   \$1.128.6     48896 Graft Of Multiple Hand Of Foot Nerves, 4.0 Cm Or Less   \$1.128.6     48996 Graft Of Multiple Hand Of Foot Nerves, 4.0 Cm Or Less   \$1.128.6     48996 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.128.6     48996 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48998 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48998 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48998 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48998 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48990 Francisch Of Multiple Arm Or Leg Nerves More Than 4.0 Cm   \$1.286.4     48990 Francisch Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48990 Francisch Of Nerve For Grafting, Single Strand   \$2.265.5     48990 Francisch Of Nerve To Injured Nerve, First Stage   \$1.102.6     48990 Francisch Of Nerve To Injured Nerve, First Stage   \$1.102.6     48910 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$1.102.6     48910 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$1.102.6     489910 Milster Paparity With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$   | 64872 | Suture Of Nerve, Requiring Secondary Of Delayed Suture (List Separately III Addition To Code For Primary Neurormaphy)                        | \$102.00        |
| 64876 Stuture Of Nerve: Requiring Shortening Of Bone Of Extremity (List Separately In Addition To Code For Nerve Suture)   \$17.37.     4885 Graft Of Head Of Neck Nerve, 4.0 Cm Or Less   \$1.0024.     48880 Nerve Graft (Includes Obtaining Graft), Head Of Neck; More Than 4.0 Cm In Length   \$1.174.4     48890 Graft Of Hand Of Foot Nerve, 4.0 Cm Or Less   \$974.4     48891 Graft Of Hand Of Foot Nerve, More Than 4.0 Cm   \$948.1     48893 Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less   \$948.1     48893 Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less   \$948.1     48893 Graft Of Arm Or Leg Nerve, More Than 4.0 Cm   \$1.1014.     48895 Graft Of Multiple Hand Of Foot Nerves, 4.0 Cm Or Less   \$1.1024.     48896 Graft Of Multiple Hand Of Foot Nerves, 4.0 Cm Or Less   \$1.128.6     48896 Graft Of Multiple Hand Of Foot Nerves, 4.0 Cm Or Less   \$1.128.6     48996 Graft Of Multiple Hand Of Foot Nerves, 4.0 Cm Or Less   \$1.128.6     48996 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.128.6     48996 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48998 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48998 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48998 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48998 Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48990 Francisch Of Multiple Arm Or Leg Nerves More Than 4.0 Cm   \$1.286.4     48990 Francisch Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1.286.4     48990 Francisch Of Nerve For Grafting, Single Strand   \$2.265.5     48990 Francisch Of Nerve To Injured Nerve, First Stage   \$1.102.6     48990 Francisch Of Nerve To Injured Nerve, First Stage   \$1.102.6     48910 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$1.102.6     48910 Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$1.102.6     489910 Milster Paparity With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$   | 64874 | Suture Of Nerve; Requiring Extensive Proximal Mobilization, Or Transposition Of Nerve (List Separately In Addition To Code For Nerve Suture) | \$153.76        |
| 64896   Nerve Graft (Includes Obtaining Graft), Head Or Neck; More Than 4 Cm In Length   \$1,174.4   64890   Graft Of Hand Or Foot Nerve, 4.0 Cm Or Less   \$1,035.4   64891   Graft Of Hand Or Foot Nerve, More Than 4.0 Cm   \$1,035.4   64892   Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less   \$3,045.4   64893   Graft Of Arm Or Leg Nerve, 4.0 Cm Or Less   \$1,191.4   64895   Graft Of Arm Or Leg Nerve, More Than 4.0 Cm   \$1,285.6   64896   Graft Of Multiple Hand Or Foot Nerves, 4.0 Cm Or Less   \$1,192.8   64896   Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm   \$1,285.6   64896   Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1,285.6   64896   Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1,285.6   64897   Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1,285.6   64898   Graft Of Multiple Arm Or Leg Nerves, More Than 4.0 Cm   \$1,285.6   64990   Placement Of Nerve For Grafting, Single Strand   \$2,283.7   64901   Placement Of Nerve For Grafting, Single Strand   \$2,283.7   64901   Placement Of Nerve For Grafting, Single Strand   \$2,283.7   64901   Placement Of Nerve To Injured Nerve, First Stage   \$9,313.2   64907   Transfer Of Nerve To Injured Nerve, First Stage   \$9,313.2   64907   Transfer Of Nerve To Injured Nerve, First Stage   \$1,169.8   64910   Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$3,11.1   64911   Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$3,11.1   64912   Repair Of Nerve Using Nerve Graft, First Strand   \$3,000.9   64913   Repear Of Nerve To Injured Nerve, First Brade   \$3,14.6   64913   Repear Of Nerve Using Nerve Graft, First Strand   \$3,000.9   64913   Repear Of Nerve Vein Strand   \$3,000.9   64913   Repear Of Nerve Using Nerve Graft, First Strand   \$3,000.9   64913   Repear Of Nerve Using Nerve Graft, First Strand   \$3,000.9   64913   Repear Of Nerve Using Nerve Graft, First Strand   \$3,000.9   64913   Repear Of Nerve Vein Strand   \$3,000.9   64913   Repear Of Nerve Vein Strand  |       |  | \$173.74        |
| 64890   Graft Of Hand Or Foot Nerve, 4.0 Cm Or Less   \$1,035.4     64891   Graft Of Hand Or Foot Nerve, More Than 4.0 Cm   \$1,035.4     64892   Graft Of Am Or Leg Nerve, 4.0 Cm Or Less   \$3,946.1     64893   Graft Of Am Or Leg Nerve, 4.0 Cm Or Less   \$1,101.6     64895   Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm   \$1,102.6     64895   Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm   \$1,285.6     64896   Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm   \$1,285.6     64897   Graft Of Multiple Am Or Leg Nerves, 4.0 Cm Or Less   \$1,286.0     64898   Graft Of Multiple Am Or Leg Nerves, 4.0 Cm Or Less   \$1,286.0     64899   Graft Of Multiple Am Or Leg Nerves, 4.0 Cm Or Less   \$1,286.0     64890   Parcement Of Nerve For Grafting, Single Strand   \$1,285.4     64901   Placement Of Nerve For Grafting, Single Strand   \$2,265.5     64902   Nerve Graft Leach Additional Nerve: Multiple Strands (Cable) (List Separately In Addition To Code For Primary Procedure)   \$609.8     64905   Transfer Of Nerve To Injured Nerve, First Stage   \$9,132.6     64907   Transfer Of Nerve To Injured Nerve, First Stage   \$1,169.8     64910   Nerve Repair; With Autogenous Velor Graft (Includes Harvest Of Vein Graft), Each Nerve   \$3,210.4     64911   Nerve Repair; With Judgenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$3,931.1     64912   Repair Of Nerve Using Nerve Graft, Each Additional Strand   \$3,009.9     64913   Repair Of Nerve Using Nerve Graft, Each Additional Strand   \$3,009.9     64913   Repair Of Nerve Using Nerve Graft, Reach Additional Strand   \$3,009.9     64910   Repair Of Nerve Using Nerve Graft, Reach Additional Strand   \$3,009.9     64910   Repair Of Nerve Using Nerve Graft, Reach Additional Strand   \$3,009.9     64910   Repair Of Nerve Using Nerve Graft, Reach Additional Strand   \$3,009.9     64910   Repair Of Nerve Using Nerve Graft, Reach Additional Strand   \$3,009.9     64910   Repair Of Nerve Using Nerve Graft, Reach Additional Strand   \$3,009.9     64910   Repair Of Nerve U  |       | ·  | \$1,008.44      |
| 64891   Graft Of Hand O'F Foot Nerve, More Than 4.0 Cm   \$1.035.4   64893   Graft Of Arm O'Leg Nerve, 4.0 Cm O'Less   \$1.010.4   64895   Graft Of Arm O'Leg Nerve, 4.0 Cm O'Less   \$1.192.8   64896   Graft Of Multiple Hand O'F Foot Nerves, 4.0 Cm O'Less   \$1.192.8   64896   Graft Of Multiple Hand O'F Foot Nerves, More Than 4.0 Cm   \$1.285.0   64897   Graft Of Multiple Hand O'F Foot Nerves, More Than 4.0 Cm   \$1.285.0   64898   Graft Of Multiple Arm O'Leg Nerves, More Than 4.0 Cm   \$1.285.0   64898   Graft Of Multiple Arm O'Leg Nerves, More Than 4.0 Cm   \$1.233.7   64901   Placement Of Nerve For Gratting, Single Strand   \$1.286.4   64890   Placement Of Nerve For Gratting, Single Strand   \$528.5   64890   Placement Of Nerve For Gratting, Single Strand   \$528.5   64890   Placement Of Nerve For Injured Nerve, First Stage   \$81.286.4   64890   Transfer O'Nerve To Injured Nerve, First Stage   \$81.286.4   64891   Nerve Repair, With Synthetic Conduit O'Y vien Allograft (Eg. Nerve Tube), Each Nerve   \$7.21.0   64911   Nerve Repair, With Synthetic Conduit O'Y vien Allograft (Eg. Nerve Tube), Each Nerve   \$9.31.1   64912   Repair O'Nerve Using Nerve Graft, Each Additional Strand   \$9.00.9   64913   Repair O'Nerve Using Nerve Graft, Each Additional Strand   \$1.57.0   64919   Repair O'Nerve Using Nerve Graft, Each Additional Strand   \$1.57.0   64919   Repair O'Nerve Using Nerve Graft, Each Additional Strand   \$1.57.0   65091   Removal O'Nerve Using Nerve Graft, Each Additional Strand   \$1.57.0   65091   Removal O'Nerve Using Nerve Graft, Each Additional Strand   \$1.57.0   65101   Enceleation Eye; With Implant, Muscles Not Attached To Implant   \$9.61.8   65102   Enceleation Eye; With Implant, Muscles Not Attached To Implant   \$9.61.8   65103   Enceleation Eye; With Implant, Muscles Nin Graft, Removal O'rbital Contents; With Therapeutic Removal O'Repe Contents, With Bone   \$1.24.5   65112   Exenteration O'rbit(Does Not Include Skin Graft), Removal O'rbital Contents; With Muscle O'r Myocutaneous Flap   \$1.48.5   65112   Exente  |       |  | \$1,174.41      |
| Sed8.1   |       | · · · · · · · · · · · · · · · · · · ·  | •               |
| Season   |       | ' '  |                 |
| S4192.8  |       | · · ·  |                 |
| S4898   Graft Of Multiple Hand Or Foot Nerves, More Than 4.0 Cm   \$1,285.0  |       |  | \$1,192.82      |
| State  |       |  | \$1,285.06      |
| Placement Of Nerve For Grafting, Single Strand   \$526.59  |       |  | \$1,286.44      |
| Review Graft, Each Additional Nerve; Multiple Strands (Cable) (List Separately In Addition To Code For Primary Procedure)   \$609.89   |       | •  | \$1,233.74      |
| 64905 Transfer Of Nerve To Injured Nerve, First Stage 64907 Transfer Of Nerve To Injured Nerve, Second Stage 64907 Transfer Of Nerve To Injured Nerve, Second Stage 872.0 64910 Nerve Repair, With Synthetic Conduit Or Vein Allograft (Eg, Nerve Tube), Each Nerve 872.1 64911 Nerve Repair, With Autogenous Vein Graft, (Includes Harvest Of Vein Graft), Each Nerve 8931.1 64912 Repair Of Nerve Using Nerve Graft, First Strand 8800.9 64913 Repair Of Nerve Using Nerve Graft, Each Additional Strand 8157.0 64999 Unlisted Procedure, Nervous System Price By Repoil 65091 Removal Of Eye Contents, Without Bone 8712.7 65093 Evisceration Octual Contents; With Implant 86101 Enucleation Eye; With Implant, Muscles Not Attached To Implant 8712.7 65101 Enucleation Eye; With Implant, Muscles Not Attached To Implant 8812.7 65102 Exenteration Of Eye Contents, With Bone 65101 Removal Of Eye Contents, With Bone 65101 Removal Of Eye Contents, With Bone 65101 Removal Of Eye Contents, With Bone 65102 Exenteration Or Orbit (Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone 65114 Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Dribtal Contents; With Muscle Or Myocutaneous Flap 65125 Procedure) 65130 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell 65131 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell 65135 Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye 65145 Reinsertion Of Coular Implant With Or Without Graft From The Outer Eye 65155 Reinsertion Of Coular Implant With Or Without Graft From The Outer Eye 65167 Removal Of Foreign Body In External Eye, Conjunctiva 65202 Removal Of Foreign Body External Eye, Conjunctiva 65202 Removal Of Foreign Body, External Eye, Conjunctiva 65203 Removal Of Foreign Body (External Eye, Comea With Slit Lamp Examination 65204 Removal Of Foreign Body, External Eye, Comea With Slit Lamp Examination   |       |  | \$526.59        |
| Transfer Of Nerve To Injured Nerve, Second Stage   \$1,169.8i  |       |  |                 |
| Nerve Repair; With Synthetic Conduit Or Vein Allograft (Eg, Nerve Tube), Each Nerve   \$721.00   |       | •  |                 |
| Nerve Repair, With Autogenous Vein Graft (Includes Harvest Of Vein Graft), Each Nerve   \$931.11   |       | , ,  |                 |
| Repair Of Nerve Using Nerve Graft, First Strand \$800.96 48913 Repair Of Nerve Using Nerve Graft, Each Additional Strand \$157.0 48999 Unlisted Procedure, Nervous System Price By Report 85091 Removal Of Eye Contents, Without Bone \$712.7 65093 Evisceration Ocular Contents; With Implant \$661.8 65101 Enucleation Eye; Without Implant \$812.7 65103 Enucleation Eye; With Implant, Muscles Not Attached To Implant \$999.0 65110 Removal Of Eye Contents, With Sone \$110 Removal Of Eye Contents, With Sone \$110 Removal Of Eye Contents, With Bone \$11,246.5 65112 Exenteration Orbit (Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone \$1,424.5 65114 Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Focedure) \$436.1: 65130 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell 65130 Insertion Of Demananent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant \$824.6 65140 Insertion Of Ocular Implant With Foreign Material 65155 Reinsertion Of Ocular Implant With Foreign Material 65165 Reinsertion Of Ocular Implant With Foreign Material 65176 Removal Of Foreign Body In External Eye, Conjunctiva 65220 Removal Of Foreign Body, External Eye, Conjunctiva S432.7 65222 Removal Of Foreign Body, External Eye, Conjunctiva S432.7 65222 Removal Of Foreign Body, External Eye, Conjunctiva S432.7 65222 Removal Of Foreign Body, External Eye, Connea   |       |  | \$931.15        |
| 64999 Unlisted Procedure, Nervous System Price By Repot 65091 Removal Of Eye Contents, With out Bone \$712.7   65093 Evisceration Ocular Contents; With Implant \$661.8   65101 Enucleation Eye; With Implant, Muscles Not Attached To Implant \$797.5   65103 Enucleation Eye; With Implant, Muscles Not Attached To Implant \$909.0   65110 Removal Of Eye Contents, With Bone \$11.24.6.5   65112 Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Muscle Or Myocutaneous Flap \$1.424.5   65114 Exenteration Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap \$1.424.5   65125 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell Insertion Orbit (Does Not Include Skin Graft), Removal Orbital Contents; With Muscle Orbital Contents (Sandard) Insertion Orbital Cont  | 64912 | Repair Of Nerve Using Nerve Graft, First Strand  | \$800.95        |
| Removal Of Eye Contents, Without Bone \$712.74 65093 Evisceration Ocular Contents; With Implant \$661.8 65101 Enucleation Eye; Without Implant \$321.75 65103 Enucleation Eye; With Implant, Muscles Not Attached To Implant \$797.55 65105 Enucleation Eye; With Implant, Muscles Not Attached To Implant \$909.05 65110 Removal Of Eye Contents, With Bone \$11,246.55 65112 Exenteration Oribit(Does Not Include Skin Graft), Removal Oribital Contents; With Therapeutic Removal Of Bone \$1,424.55 65112 Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap Modification Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap \$1,486.18 65125 Procedure) \$436.18 65130 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell \$815.18 65131 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, Muscles Not Attached To Implant \$824.68 65130 Insertion Ocular Implant With Placement Or Replacement Or Implant \$824.68 65130 Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye \$674.11 65155 Reinsertion Of Ocular Implant With Foreign Material \$918.57 65156 Removal Of Foreign Body In External Eye, Conjunctiva \$22.98 65220 Removal Of Foreign Body, External Eye, Conjunctiva \$430.48 65220 Removal Of Foreign Body, External Eye, Conjunctiva \$430.48 65222 Removal Of Foreign Body, External Eye, Conjunctiva \$430.48 65222 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination \$70.76  |       |  | \$157.01        |
| Section   Evisceration Ocular Contents; With Implant   Section   |       |  | Price By Report |
| Enucleation Eye; Without Implant   Satisfactor   Satisfa   |       |  |                 |
| Enucleation Eye; With Implant, Muscles Not Attached To Implant \$797.55 Enucleation Eye; With Implant, Muscles Attached To Implant \$909.05 Enucleation Eye; With Implant, Muscles Attached To Implant \$909.05 Enucleation Eye; With Implant, Muscles Attached To Implant \$909.05 Exenteration Orbit (Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone \$1,246.55 Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap \$1,486.15  Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Forcedure) \$436.15 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell \$815.15 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant \$824.65 Insertion Of Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant \$824.65 Enucleation Of Ocular Implant With Or Without Graft From The Outer Eye \$674.15 Reinsertion Of Ocular Implant With Foreign Material \$918.55 Reinsertion Of Ocular Implant With Foreign Material \$918.55 Removal Of Foreign Body In External Eye, Conjunctiva \$29.95 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination \$70.76   |       | , ,  |                 |
| 65105 Enucleation Eye; With Implant, Muscles Attached To Implant \$909.00 65110 Removal Of Eye Contents, With Bone \$1,246.5 65112 Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone \$1,424.5 65114 Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap \$1,486.19 Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate 65125 Procedure) \$436.19 65130 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell \$315.10 65135 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant \$824.60 65140 Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant \$824.60 65150 Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye \$674.10 65151 Removal Ocular Implant With Foreign Material \$918.50 65175 Removal Ocular Implant With Foreign Material \$918.50 65200 Removal Of Foreign Body In External Eye, Conjunctiva \$29.90 65210 Removal Of Foreign Body, External Eye, Conjunctiva Or Sclera \$43.20 65222 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination \$70.76   |       |  | \$797.59        |
| Exenteration Orbit(Does Not Include Skin Graft), Removal Orbital Contents; With Therapeutic Removal Of Bone  \$1,424.5  65114 Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap  Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate  65125 Procedure)  65130 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell  65131 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant  65140 Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant  65150 Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye  65151 Removal Ocular Implant With Foreign Material  65105 Removal Ocular Implant With Foreign Material  65205 Removal Of Foreign Body In External Eye, Conjunctiva  65210 Removal Of Foreign Body, External Eye, Cornea  65220 Removal Of Foreign Body, External Eye, Cornea  65222 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination  \$70.70  |       |  | \$909.05        |
| Exenteration Of Orbit (Does Not Include Skin Graft), Removal Of Orbital Contents; With Muscle Or Myocutaneous Flap  Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate Procedure)  S1,486.19  Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate  S125  Frocedure)  S1,486.19  S15.10  Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell  S15.11  S11.11   |       | •  | \$1,246.51      |
| Modification Of Ocular Implant With Placement Or Replacement Of Pegs (Eg, Drilling Receptacle For Prosthesis Appendage) (Separate 65125 Procedure)  \$436.1: 65130 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell  \$815.1: 65135 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant  \$824.6: 65140 Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant  \$884.7: 65150 Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye  \$674.1: 65155 Reinsertion Of Ocular Implant With Foreign Material  \$918.5: 65175 Removal Ocular Implant  \$746.2 65205 Removal Of Foreign Body In External Eye, Conjunctiva  \$29.9 65210 Removal Of Foreign Body, External Eye, Cornea  \$40.4: 65222 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination  \$70.70  |       |  | \$1,424.51      |
| 65125 Procedure) \$436.19 65130 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell \$815.19 65135 Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant \$824.69 65140 Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant \$884.79 65150 Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye \$674.10 65155 Reinsertion Of Ocular Implant With Foreign Material \$918.57 65175 Removal Ocular Implant \$918.57 65205 Removal Of Foreign Body In External Eye, Conjunctiva \$929.9 65210 Removal Of Foreign Body, External Eye, Cornea \$40.40 65220 Removal Of Foreign Body, External Eye, Cornea \$43.20 65222 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination \$91.70 \$91.70 \$92.70 \$93.61  | 65114 |  | \$1,486.15      |
| 65130   Insertion Of Permanent Ocular Prosthesis Into Orbit, After Evisceration, In Scleral Shell   \$815.14     65135   Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant   \$824.65     65140   Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant   \$884.75     65150   Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye   \$674.15     65155   Reinsertion Of Ocular Implant With Foreign Material   \$918.55     65175   Removal Ocular Implant With Foreign Material   \$746.55     65205   Removal Of Foreign Body In External Eye, Conjunctiva   \$22.9.9     65210   Removal Of Foreign Body, External Eye, Cornea   \$40.45     65222   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.76     65222   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.76     65232   \$65222   \$65222   \$65222   \$65222   \$65222   \$65223   \$65222   \$65223   \$65222   \$65223   \$6522   | 65125 |  | \$136.15        |
| Insertion Of Permanent Ocular Prosthesis Into Orbit, After Nucleation, Muscles Not Attached To Implant   \$824.60  |       | ,  | \$815.14        |
| 65140   Insertion Ocular Implant Secondary; After Enucleation, Muscles Attached To Implant   \$884.73     65150   Reinsertion Of Ocular Implant With Or Without Graft From The Outer Eye   \$674.13     65155   Reinsertion Of Ocular Implant With Foreign Material   \$918.5     65175   Removal Ocular Implant   \$746.2     65205   Removal Of Foreign Body In External Eye, Conjunctiva   \$299.6     65210   Removal Of Foreign Body In External Eye, Conjunctiva Or Sclera   \$40.4     65220   Removal Of Foreign Body, External Eye, Cornea   \$43.2     65222   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65240   Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination   \$70.70     65  |       |  | \$824.62        |
| 65155Reinsertion Of Ocular Implant With Foreign Material\$918.565175Removal Ocular Implant\$746.265205Removal Of Foreign Body In External Eye, Conjunctiva\$29.965210Removal Of Foreign Body In External Eye, Conjunctiva Or Sclera\$40.465220Removal Of Foreign Body, External Eye, Cornea\$43.265222Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination\$70.7   |       |  | \$884.72        |
| 65175 Removal Ocular Implant  65205 Removal Of Foreign Body In External Eye, Conjunctiva  65210 Removal Of Foreign Body In External Eye, Conjunctiva Or Sclera  65210 Removal Of Foreign Body, External Eye, Conjunctiva Or Sclera  65220 Removal Of Foreign Body, External Eye, Cornea  65222 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination  \$70.50   |       | •  | \$674.12        |
| 65205Removal Of Foreign Body In External Eye, Conjunctiva\$29.965210Removal Of Foreign Body In External Eye, Conjunctiva Or Sclera\$40.465220Removal Of Foreign Body, External Eye, Cornea\$43.265222Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination\$70.7  |       | ·  | \$918.53        |
| 65210 Removal Of Foreign Body In External Eye, Conjunctiva Or Sclera \$40.4 65220 Removal Of Foreign Body, External Eye, Cornea \$43.2 65222 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination \$70.76  |       |  | \$746.21        |
| 65220 Removal Of Foreign Body, External Eye, Cornea \$43.20 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination \$70.70   |       | ų , , ,  |                 |
| 65222 Removal Of Foreign Body, External Eye, Cornea With Slit Lamp Examination \$70.70   |       | ų , , ,  | \$40.48         |
|  |       |  | \$70.76         |
|  |       |  | \$679.98        |

| 66000 Removal CF Trongs Body From Inside Syw Willing A Magnet  67070 Report Locardion, Conjunke, Will Of Willing A Magnet  67070 Report Locardion, Conjunke, Will Of Willing A Magnet  67070 Report Locardion, Conjunke, Will Of Willing A Magnet  67070 Report Locardion, Conjunke, Willing Conference and Conjunkers (1997) Report Locardion, Conjunkers (1997) Report   | Code  | Description   | Fee                      |
|--|-------|---|--------------------------|
| 82027 Regard Locardon Conjunctiva (With Orbitation And perforance Journal Conjunctiva (Scot) Requiring Internation Scotes, Dispetit Characteristic Conjunctiva Using Play Or Graft, Requiring Propilabilization (Scot) Regard Conjunctiva Using Play Or Graft, Requiring Propilabilization (Scot) Regard Conjunctiva Using Play Or Graft, Requiring Propilabilization (Scot) Regard Conjunctiva Using Play Or Graft, Requiring Propilabilization (Scot) Regard Conjunctiva Using Play Orbitation (Scot) Regard Conjunctiva (Scot) Regard (Scot) Rega   |       |   | \$914.15                 |
| 82527 Repair Claseration Continuotos (p. Whoblistation And Rearrangement, Without Hospitalization) \$55 55277 Repair Licentation Comma, Nonperforating, With CW Without Renoval Foreign Body \$55 55278 Repair Licentation Comma, Nonperforating, With CW Without Renoval Foreign Body \$55 55278 Repair Licentation Comma, Nonperforating, With CW Without Renoval Foreign Body \$55 55278 Repair CM Petropartia, Caracterion of Chroma And CS denies With Investigation (American Without Command Without Comman   | 65265 | Removal Of Foreign Body From Inside Eye Without A Magnet  | \$903.54                 |
| 82572 Regard Locareate Conjunctiva Using Flap Or Graft, Roquiring Hospitalization 82582 Regard Company Company Company (1997) 82582 Regard Company Company Company (1997) 82582 Regard Company Company Company (1997) 82582 Regard Company Company (1997) 82582 Regard Company (1997) 8258   |       |   | \$201.41                 |
| 82572 Regard Lord Charles Andrew Common Common Comm   |       |   | \$503.35                 |
| 18-200 Regard OF Perforating Laceration OF Comes And/OF Soleta Not involving Useal Tasius  28-2028 Regard OF Laceration Application OF Tissus Obs., Wounds Of Comes And/OF Soleta  28-2028 Regard OF Laceration Application OF Tissus Obs., Wounds Of Comes And/OF Soleta  28-2028 Regard OF Laceration Application OF Tissus Obs., Wounds Of Comes And/OF Soleta  28-2028 Regard OF Laceration Application OF Tissus Obs., Wounds Of Comes And/OF Soleta  28-2028 Regard OF Laceration Application OF Tissus Obs., Wounds Of Comes And/OF Soleta  28-2028 Regard OF Reconscion OF Comes Conjunctiva, With Grait  28-2028 Removal OF Reconscion OF Comes Conjunctiva, With Grait  28-2028 Removal OF Reconscion OF Comes Conjunctiva, With Grait  28-2038 Removal OF Columburg OF Comes, Chemical Causarian  28-2039 Removal OF Columburg Of Comes, Chemical Causarian  28-2039 Removal OF Columburg Of Comes, Chemical Causarian  28-2039 Removal OF Columburg Of Comes, Chemical Causarian  28-2030 Removal OF Columburg Of Comes, Chemical Causarian  28-2030 Removal OF Columburg Of Comes, Center Of Comes, Anterior Lamburg  28-2030 Removal OF Columburg Of Comes Comes, Center Of Comes, Anterior Lamburg  28-2030 Removal OF Comes From One Comes a To Other Comes, Anterior Lamburg  28-2030 Removal OF Comes From One Comes a To Other Comes, Denotrating (Except In Aphabia) OF Soleta Causarian  28-2030 Removal OF Removal OF Comes Endothelial Allografi Pror To Transplantation (Lat Separately in Addition To Code For Primary Procedure)  28-2030 Removal OF Removal OF Comes Endothelial Allografi Pror To Transplantation (Lat Separately in Addition To Code For Primary Pro   |       |   | \$351.84                 |
| Segon (Peper Of Perforanting Locaration Of Cornea And/Or Schera Involving Uveal Tissue \$66,000 (Pepisina Locaration Of Tissue Glav, Duranti Of Cornea And/Or Schera \$40,000 (Pesisina Locaration Of Tissue Glav, Duranti Of Cornea And/Or Schera \$40,000 (Pesisina Locaration Cornea (Resistantion), Lancellar, Partial), Except Perrypium \$40,000 (Pesisina Locaration Cornea (Resistantion), Lancellar, Partial), Except Perrypium \$40,000 (Pesisina Locaration Cornea (Resistantion), Lancellar, Partial), Except Perrypium \$41,000 (Pesistantia Cornea), Control Cornea, Chemical Carlot (Pesistantia Cornea), Lancellar, Partial), Except Perrypium \$41,000 (Pesistantia Cornea), Control Carlot (Pesistantia Cornea), Lancellar, Partial, Except Perrypium \$41,000 (Pesistantia Cornea), Control Carlot (Pesistantia Cornea), Lancellar, Partial, Partial   |       |   | \$554.43<br>\$620.47     |
| 8,986 8,980 of Chauter Chruned Spe Massed Or Trendon 9,454 8,000 of Repair Of Luned Spe Massed Or Trendon 9,454 8,000 of Repair Of Luned Spe Massed Or Trendon 9,454 8,000 of Repair Of Luned Special Special Computers of Massed Special Spec   |       | i v   | \$992.75                 |
| 82800 (Existent Conson Compas (Resistationny, Lamellar, Parisal), Except Perrypium  \$40 85410 (Existent Conson Compas (Resistationny, Lamellar, Parisal), Except Perrypium  \$41 85410 (Revision Conson Compas (Resistationny, Lamellar, Parisal), Except Perrypium  \$41 85420 (Reminvol Control Reliacionnic Of Commal Conjunctiva, Without Graft  \$41 85420 (Reminvol Control, Bulgarosis, F.S. Stensor And/Of Control  \$47 85430 (Schapper Connes, Bulgarosis, F.S. Stensor And/Of Control  \$47 85430 (Schapper Connes, Bulgarosis, F.S. Stensor And/Of Control  \$43 85430 (Schapper Connes, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Connes, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Connes, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Control, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Control, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Control, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Control, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Control, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Control, Bulgarosis, F.S. Stensor And/Of Control  \$45 85430 (Schapper Control  \$4           |       |   | \$663.12                 |
| Section   Biopsy Commea   Section  |       |   | \$453.71                 |
| Sestion Removal Or Relocation Of Corneal Conjunctiva, Without Graft  Sestion Removal Or Relocation Of Corneal Conjunctiva, With Graft  Sestion Removal Or Relocation Of Corneal Conjunctiva, With Graft  Sestion Removal Or Duter Layer Of Cornea, Chemical Counteration  Sestion Removal Or Outer Layer Of Cornea, Chemical Counteration  Sestion Removal Or Outer Layer Of Cornea, Chemical Counteration  Sestion Removal Or Outer Layer Of Cornea, Chemical Counteration  Sestion Removal Or Outer Layer Of Cornea, Chemical Counteration  Sestion Removal Or Outer Layer Of Cornea, Chemical Counteration  Sestion Removal Or Leavier Or Leavier Of Cornea, Cornea, Chemical Counteration  Sestion Removal Or Leavier Or Leavier Or Leavier Or Deter Cornea, Removal   | 65400 | Excision Lesion Cornea (Keratectomy, Lamellar, Partial), Except Pterygium   | \$491.79                 |
| Sextop General Corneal Conjunctiva With Graft  571 58439 Scanppa Cornea, Dignostic F. For Smear Anaboty Culture  572 58439 Scanppa Cornea, Dignostic F. For Smear Anaboty Culture  573 58439 Removal CO Luter Layer Of Cornea, Challering Agent  574 58439 Removal CO Luter Layer Of Cornea, Challering Agent  575 58439 Removal CO Luter Layer Of Cornea, Challering Agent  575 58549 Destruction Of Lesion Of Cornea By Cryptherapy, Photocoagulation Or Themocauterization  575 585 585 58600 Multiple Purchures Of Anterior Cornea (E. For Cornea Erosion, Tatlot)  581 5871 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5873 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5873 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5875 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5876 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5877 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5877 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5877 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5877 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5877 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5877 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5878 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5878 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5878 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5879 Transplantation Of Tissue Priorn One Cornea To Other Cornea, Pentertaing (Except In Aphaka)  5879 Transplantation   |       | 1 ?   | \$134.35                 |
| Saraping Cornea, Diagnostic, For Smeart And-SOY Culture  \$35 \$4548, Removal Of Outer Layer Of Cornea, Chemical Cauterization  \$35 \$4548, Removal Of Outer Layer Of Cornea, Chemical Cauterization  \$36 \$35 \$4548, Removal Of Outer Layer Of Cornea, Chemical Cauterization  \$36 \$36 \$36 \$36 \$36 \$36 \$36 \$36 \$36 \$3  |       | ,   | \$514.03                 |
| Service Seminary Of Outer Layer Of Comea, Chemical Cauterization  \$30 84548 Removal Of Outer Layer Of Comea, Chemical Agent \$30 84549 Removal Of User Layer Of Comea, Chemical Agent \$30 85450 Removal Of Outer Layer Of Comea, Chemical Agent \$30 85450 Removal Of Outer Layer Of Comea, Chemical Agent \$40 8550 Removal Of Lesion Of Lesion Of Comea By Cryotherary, Photocoagulation Of Themocauterization \$41 85710 Transplantation Of Tissue From One Comea To Other Cornea, Anterior Lamellar \$41 85720 Transplantation Of Tissue From One Comea To Other Cornea, Penetrating (Except In Aphakia Or Pseudophakia) \$41 85720 Transplantation Of Tissue From One Comea To Other Cornea, Penetrating (Except In Aphakia Or Pseudophakia) \$41 85726 Transplantation Of Tissue From One Comea To Other Cornea, Penetrating (Except In Aphakia Or Pseudophakia) \$41 85726 Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (Except In Aphakia Or Pseudophakia) \$41 85726 Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (Except In Aphakia Or Pseudophakia) \$41 85726 Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (In Pseudophakia) \$41 85726 Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (In Pseudophakia) \$42 85727 Research Pseudophakia \$42 85727 Research Pseudophakia \$42 85727 Research Pseudophakia \$42 85727 Research Order Research Pseudophakia \$43 85737 Research Order Research Pseudophakia \$43 85737 Research Order Research Pseudophakia \$43 85737 Research Order Research Pseudophakia \$44 85738 Research Pseudophakia \$45 8574 Research Order Research Pseudophakia \$45 8575 Research Pseudophakia \$45 8576 Research Pseudophakia \$45 8578 Research                     |       |   | \$715.84                 |
| Section   Sect   |       |   | \$78.62<br>\$71.30       |
| Session   Multiple Nucleurs of Anterior Corneal Eg. (Scriptine Injection of Temporal Interior (Scriptine Interior Corneal Eg. (Scriptine Interior Eg   |       | ·   | \$360.00                 |
| Settle   S   |       | , , ,   | \$306.33                 |
| Section   Sect   |       | , , , , , ,   | \$414.06                 |
| S1-175   Section   Comment   Comme   |       |   | \$1,062.89               |
| 65755 Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (In Pseudophakia)         \$1.16           65756 Kestoplasty (Corneal Transplant); Endothelial Allograft Prior To Transplantation (List Separately in Addition To Code For Primary Procedure)         \$2.1           65757 Zorneal Relaxing Incision For Correction Of Surgically Induced Astigmatism         \$42           65775 Corneal Relaxing Incision For Correction Of Surgically Induced Astigmatism         \$42           65775 Insertion Of Amnotic Membrane To Eye Surface         \$5.3           65779 Insertion Of Amnotic Membrane To Eye Surface         \$1.18           65779 Insertion Of Amnotic Membrane To Eye Surface With Sutures         \$1.16           65770 Joular Surface Reconstruction: Amnotic Membrane To Eye Surface With Sutures         \$6.2           65781 Coular Surface Reconstruction: Imbal Stem Cell Allograft (Eg., Cadwareir Of Living Bonor)         \$1.2           65782 Incision Of Eye Fluid, Complex         \$2.6           65785 Implantation Of Corne Ring Segments         \$2.1           65785 Implantation Of Eye Fluid, Complex         \$1.2           65810 Aspiration Of Eye Fluid, Complex         \$1.2           65810 Aspiration Of Eye Fluid, Complex         \$1.2           65820 Aspiration Of Eye Fluid, Complex         \$1.2           65851 David Control Of Eye Fluid, Complex         \$1.2           65852 David Control Of Eye Fluid, Complex         \$1.2 <td>65730</td> <td>Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (Except In Aphakia Or Pseudophakia)</td> <td>\$1,293.12</td>   | 65730 | Transplantation Of Tissue From One Cornea To Other Cornea, Penetrating (Except In Aphakia Or Pseudophakia)                                  | \$1,293.12               |
| Section   Sect   |       | 1   | \$1,172.65               |
| Section   Sect   |       |   | \$1,167.09               |
| Sept   | 65756 | Keratopiasty (Corneal Transplant); Endothelial  | \$1,086.32               |
| Sept   | 65757 | Backhanch Preparation Of Corneal Endothelial Allograft Prior To Transplantation /List Separately In Addition To Code For Primary Precedure) | \$210.53                 |
| Seption   Sept   |       |   | \$427.28                 |
| Service   Serv   |       | ů , ů   | \$534.93                 |
| Section   Sect   |       |   | \$1,482.08               |
| 65781   Ocular Surface Reconstruction: Limbal Stem Cell Allograft (Eg., Cadaveric Or Living Donor)   \$1.22   65782   Ocular Surface Reconstruction: Limbal Conjunctival Autograft (Includes Obtaining Graft)   \$1.05   65785   Implantation Of Carneal Ring Segments   \$2.14   65800   Aspiration Of Eye Fluid, Complex   \$12   65810   Aspiration Of Eye Fluid, Complex   \$12   65820   Gonitorium   \$18   65820   Gonitorium   \$18   65820   Gonitorium   \$18   65820   Gonitorium   \$18   65820   Aspiration Of Eye Fluid, Complex   \$12   65820   Gonitorium   \$12   65 | 65779 | Insertion Of Amniotic Membrane To Eye Surface With Sutures  | \$1,152.76               |
| September   Sept   | 65780 | Ocular Surface Reconstruction; Amniotic Membrane Transplantation, Multiple Layers   | \$620.63                 |
| 65785   Implantation Of Corneal Ring Segments   \$2,14   |       |   | \$1,225.25               |
| S12  |       |   | \$1,058.57               |
| September   Sept   |       | ,   | \$2,141.45               |
| Session   Paracentesis Anterior Chamber Eye (Separate Procedure); With Removal Of Blood, With Or Without Irrigation And/Or Air Injection   \$69  |       |   | \$123.48<br>\$429.69     |
| Septiment   Sept   |       |   | \$573.37                 |
| S78   S855   Laser Repair To Improve Eye Fluid Flow, 1 Or More Sessions   \$25   S65600   Severing Adhesions Of Anterior Segment, Laser Technique (Separate Procedure)   \$28   S8660   Removal Of Scar Tissue In Eye, Anterior Synechiae   \$44   S870   Removal Of Scar Tissue In Eye, Anterior Synechiae   \$55   S6875   Removal Of Scar Tissue In Eye, Posterior Synechiae   \$55   S6876   Removal Of Scar Tissue In Eye, Posterior Synechiae   \$55   S6876   Removal Of Scar Tissue In Eye, Posterior Synechiae   \$50   Severing Adhesions Anterior Segment Eye (With Or Without Injection Air Or Liquid) (Separate Procedure); Comeovitreal Adhesions   \$61   S6900   Removal Of Implanted Material, Anterior Segment Of Eye   \$92   Removal Of Implanted Material, Anterior Segment Of Eye   \$73   S6930   Removal Of Blood Cid. Anterior Segment Of Eye   \$79   S6930   Removal Of Blood Cid. Anterior Segment Of Eye   \$99   S6930   Removal Of Blood Cid. Anterior Segment Of Eye   \$99   S6020   Injection, Anterior Chamber Of Eye (Separate Procedure); Air Or Liquid   \$18   S6130   Exosion Lesion Sciera   \$16   S6150   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary   \$1,01   S6172   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary   \$1,01   S6172   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary   \$1,01   S6173   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary   \$1,01   S6174   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary   \$1,01   S6175   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary   \$1,01   S6176   Treatment For Glaucoma With Creation Of Eye Fluid Flow   \$1,00   S6187   Revision Of Shunt To Improve Eye Fluid Flow With Retention Of Device Or Stent   \$1,00   S6180   Creation Of Shunt To                                |       |   | \$697.74                 |
| Severing Adhesions Of Anterior Segment, Laser Technique (Separate Procedure)   \$44  |       |   | \$782.22                 |
| Session   Removal Of Scar Tissue In Eye, Goniosynechiae   \$44   | 65855 | Laser Repair To Improve Eye Fluid Flow, 1 Or More Sessions  | \$255.44                 |
| Session   Removal Of Scar Tissue In Eye, Anterior Synechiae   Session   Se   |       |   | \$287.58                 |
| September   Sept   |       |   | \$445.05                 |
| Severing Adhesions Anterior Segment Eye (With Or Without Injection Air Or Liquid) (Separate Procedure); Corneovitreal Adhesions  |       |   | \$552.93                 |
| 65900       Removal Of Epithelial Downgrowth, Anterior Chamber Of Eye       \$92         65920       Removal Of Implanted Material, Anterior Segment Of Eye       \$73         65930       Removal Of Illodo Clot, Anterior Segment Of Eye       \$58         66020       Injection, Anterior Chamber Of Eye (Separate Procedure); Air Or Liquid       \$18         66030       Injection, Anterior Chamber (Separate Procedure); Medication       \$16         66130       Excision Lesion Sclera       \$66         66150       Treatment For Glaucoma By Creating A Hole For Drainage And Excision Of Part Of The Iris       \$81         66150       Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris       \$81         66150       Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris       \$81         66150       Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris       \$81         66170       Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary       \$1,01         66170       Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary       \$1,10         66172       Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary       \$1,10         66174       Transluminal Dilation Of Aqueous Outflow Canal; With Out Retain Of Device Or Stent       \$73         66175       Transluminal Dilation Of Aqueous Outflow Canal; With   |       |   | \$507.26                 |
| 65920       Removal Of Implanted Material, Anterior Segment Of Eye       \$73         65930       Removal Of Blood Clot, Anterior Segment Of Eye       \$59         66020       Injection, Anterior Chamber Of Eye (Separate Procedure); Medication       \$16         66030       Injection, Anterior Chamber (Separate Procedure); Medication       \$16         66130       Excision Lesion Sclera       \$66         66150       Treatment For Glaucoma By Creating A Hole For Drainage And Excision Of Part Of The Iris       \$81         66160       Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris       \$81         66160       Fistulization Sclera For Glaucoma With Creation Of Eye Fluid Drainage, Primary       \$91         66170       Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary       \$1,10         66172       Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary       \$1,10         66174       Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent       \$78         66175       Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent       \$73         66179       Creation Of Shunt To Improve Eye Fluid Flow       \$1,00         66180       Creation Of Shunt To Improve Eye Fluid Flow       \$1,00         66181       Insertion Of Shunt To Improve Eye Fluid Flow       \$71 </td <td></td> <td></td> <td>\$619.25</td>  |       |   | \$619.25                 |
| Removal Of Blood Clot, Anterior Segment Of Eye \$59 66020 Injection, Anterior Chamber Of Eye (Separate Procedure); Air Or Liquid \$18 66030 Injection, Anterior Chamber (Separate Procedure); Medication \$16 66130 Excision Lesion Sclera \$66 66150 Treatment For Glaucoma By Creating A Hole For Drainage And Excision Of Part Of The Iris \$81 66155 Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris \$81 66150 Flistulization Sclera For Glaucoma, Sclerectomy With Punch Or Scissors, With Iridectomy \$81 66170 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary \$1,01 66172 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary \$1,10 66173 Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent \$78 66175 Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent \$79 66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft \$1,00 66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft \$1,00 66181 Insertion Of Eye Fluid Drainage Device, External Approach \$80 66183 Revision Of Shunt To Improve Eye Fluid Flow \$73 66185 Revision Of Shunt To Improve Eye Fluid Flow \$74 66256 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft \$86 66256 Follow-Up Surgery Of Eyeball \$87 665050 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion \$86 66606 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion \$85 666250 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body \$85 66626 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris \$84 66630 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris  |       |   | \$735.07                 |
| fe6020   Injection, Anterior Chamber Of Eye (Separate Procedure); Air Or Liquid   \$18   fe6030   Injection, Anterior Chamber (Separate Procedure); Medication   \$16   fe6130   Excision Lesion Sclera   \$66   fe6150   Treatment For Glaucoma By Creating A Hole For Drainage And Excision Of Part Of The Iris   \$81   fe6155   Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris   \$81   fe6155   Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris   \$81   fe6156   Fistulization Sclera For Glaucoma With Creation Of Eye Fluid Drainage, Secondary   \$91   fe6170   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary   \$1,01   fe6171   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary   \$1,10   fe6172   Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary   \$1,10   fe6174   Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent   \$78   fe6175   Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent   \$78   fe6176   Creation Of Shunt To Improve Eye Fluid Flow   \$1,00   fe6180   Creation Of Shunt To Improve Eye Fluid Flow With Graft   \$1,20   fe6181   Revision Of Eye Fluid Drainage Device, External Approach   \$35   fe6182   Revision Of Eye Fluid Drainage Device, External Approach   \$35   fe6183   Revision Of Eye Fluid Drainage Shunt With Graft   \$36   fe6255   Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft   \$36   fe6500   Iridotomy By Stab Incision (Separate Procedure); Except Transfixion   \$37   fe6605   Removal Of Iris Not Deparate Procedure); Except Transfixion   \$36   fe6606   Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris   \$45   fe6630   Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris   \$45   fe6630   Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris   \$45   fe6630   Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris   \$45   fe6630   Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris   \$45   fe6630                                  |       | · · · · · · · · · · · · · · · · · · ·   | \$596.03                 |
| Injection, Anterior Chamber (Separate Procedure); Medication   \$16  |       |   | \$181.02                 |
| 66150 Treatment For Glaucoma By Creating A Hole For Drainage And Excision Of Part Of The Iris 66155 Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris 66166 Fistulization Sclera For Glaucoma; Sclerectomy With Punch Or Scissors, With Iridectomy 891. 66170 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary 81,101 66171 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary 81,101 66172 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary 81,100 66174 Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent 878 66175 Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent 879 66170 Creation Of Shunt To Improve Eye Fluid Flow 81,200 66180 Creation Of Shunt To Improve Eye Fluid Flow 81,200 66181 Insertion Of Eye Fluid Drainage Device, External Approach 895 66184 Revision Of Shunt To Improve Eye Fluid Flow 873 66185 Revision Of Eye Fluid Drainage Shunt With Graft 66225 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft 66250 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion 86500 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion As For Iris Bombe 86600 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion 870 66625 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body 870 670 670 670 670 670 670 670 670 670 6  | 66030 | Injection, Anterior Chamber (Separate Procedure); Medication  | \$169.55                 |
| 66155Treatment For Glaucoma With Cautery And Excision Of Part Of The Iris\$8166160Fistulization Sclera For Glaucoma; Sclerectomy With Punch Or Scissors, With Iridectomy\$9166170Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary\$1,0166172Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary\$1,1066174Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent\$7866175Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent\$7366179Creation Of Shunt To Improve Eye Fluid Flow\$1,0066180Creation Of Shunt To Improve Eye Fluid Flow With Graft\$1,2066181Insertion Of Eye Fluid Drainage Device, External Approach\$9566182Revision Of Shunt To Improve Eye Fluid Flow\$7366185Revision Of Eye Fluid Drainage Shunt With Graft\$7166225Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft\$8666250Follow-Up Surgery Of Eyeball\$6766500Iridotomy By Stab Incision (Separate Procedure); Except Transfixion\$3766600Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe\$4066600Iridotomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion\$8566605Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body\$1,0166625Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris\$44   | 66130 | Excision Lesion Sclera  | \$666.10                 |
| 66160 Fistulization Sclera For Glaucoma; Sclerectomy With Punch Or Scissors, With Iridectomy 66170 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary 66172 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary 66174 Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent 66175 Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent 66175 Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent 66179 Creation Of Shunt To Improve Eye Fluid Flow 66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft 66181 Insertion Of Eye Fluid Drainage Device, External Approach 66183 Insertion Of Eye Fluid Drainage Device, External Approach 66185 Revision Of Shunt To Improve Eye Fluid Flow 6713 Revision Of Eye Fluid Drainage Shunt With Graft 66185 Revision Of Eye Fluid Drainage Shunt With Graft 66185 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft 66226 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft 66250 Follow-Up Surgery Of Eyeball 66500 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion 66505 Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe 66600 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion 66605 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body 552  |       | , c   | \$814.76                 |
| 66170 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Primary  66172 Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary  66174 Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent  66175 Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent  66176 Creation Of Shunt To Improve Eye Fluid Flow  66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft  66181 Insertion Of Eye Fluid Drainage Device, External Approach  66182 Revision Of Shunt To Improve Eye Fluid Flow  66183 Revision Of Shunt To Improve Eye Fluid Flow  66184 Revision Of Shunt To Improve Eye Fluid Flow  66185 Revision Of Eye Fluid Drainage Shunt With Graft  66225 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft  66250 Follow-Up Surgery Of Eyeball  66250 Follow-Up Surgery Of Eyeball  6630 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion As For Iris Bombe  66400 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion  66505 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body  51,01  66605 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris  552   |       | ,   | \$814.44                 |
| Feeting Treatment For Glaucoma With Creation Of Eye Fluid Drainage, Secondary  \$1,10 66174 Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent  \$78 66175 Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent  \$73 66176 Creation Of Shunt To Improve Eye Fluid Flow  \$1,00 66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft  \$6183 Insertion Of Shunt To Improve Eye Fluid Flow  \$6184 Revision Of Shunt To Improve Eye Fluid Flow  \$6185 Revision Of Shunt To Improve Eye Fluid Flow  \$6186 Revision Of Eye Fluid Drainage Shunt With Graft  \$6225 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft  \$6250 Follow-Up Surgery Of Eyeball  \$6500 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion  \$6600 Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe  \$6600 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion  \$8600 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body  \$1,01 66625 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris  \$44 66630 Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris  |       |   | \$914.69<br>\$1,012.85   |
| 66174 Transluminal Dilation Of Aqueous Outflow Canal; Without Retention Of Device Or Stent  66175 Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent  66179 Creation Of Shunt To Improve Eye Fluid Flow  66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft  66183 Insertion Of Eye Fluid Drainage Device, External Approach  66184 Revision Of Shunt To Improve Eye Fluid Flow  66185 Revision Of Shunt To Improve Eye Fluid Flow  66186 Revision Of Eye Fluid Drainage Shunt With Graft  66225 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft  66250 Follow-Up Surgery Of Eyeball  66500 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion  66500 Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe  66600 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion  66605 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body  \$1,01  66625 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris  \$44  66630 Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris  |       | <u> </u>  | \$1,012.85<br>\$1,106.09 |
| 66175 Transluminal Dilation Of Aqueous Outflow Canal; With Retention Of Device Or Stent  \$73 66179 Creation Of Shunt To Improve Eye Fluid Flow \$1,00 66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft \$1,20 66183 Insertion Of Eye Fluid Drainage Device, External Approach \$95 66184 Revision Of Synt To Improve Eye Fluid Flow \$73 66185 Revision Of Eye Fluid Drainage Shunt With Graft \$71 66225 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft \$86 66250 Follow-Up Surgery Of Eyeball \$670 66500 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion \$37 66500 Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe \$40 66600 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion \$86 66625 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body \$1,01 66625 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris \$44 66630 Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris  |       | , , ,   | \$7,106.09               |
| 66179 Creation Of Shunt To Improve Eye Fluid Flow 66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft 51,20 66183 Insertion Of Eye Fluid Drainage Device, External Approach 66184 Revision Of Shunt To Improve Eye Fluid Flow 66185 Revision Of Shunt To Improve Eye Fluid Flow 66186 Revision Of Eye Fluid Drainage Shunt With Graft 66186 Revision Of Eye Fluid Drainage Shunt With Graft 66225 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft 66226 Follow-Up Surgery Of Eyeball 66250 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion 66300 Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe 66300 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion 66305 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body 66306 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris 552   |       | ·   | \$739.52                 |
| 66180 Creation Of Shunt To Improve Eye Fluid Flow With Graft 66183 Insertion Of Eye Fluid Drainage Device, External Approach 66184 Revision Of Shunt To Improve Eye Fluid Flow 66185 Revision Of Eye Fluid Drainage Shunt With Graft 66186 Revision Of Eye Fluid Drainage Shunt With Graft 66225 Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft 6625 Follow-Up Surgery Of Eyeball 66500 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion 66505 Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe 66600 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion 66605 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body 51,01: 66625 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris 522   |       |   | \$1,000.74               |
| 66184Revision Of Shunt To Improve Eye Fluid Flow\$7366185Revision Of Eye Fluid Drainage Shunt With Graft\$7166225Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft\$8666250Follow-Up Surgery Of Eyeball\$6766500Iridotomy By Stab Incision (Separate Procedure); Except Transfixion As For Iris Bombe\$3766505Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe\$4066600Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion\$8566605Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body\$1,0166625Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris\$4466630Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris\$52  |       | 1 ,   | \$1,206.19               |
| 66185Revision Of Eye Fluid Drainage Shunt With Graft\$7166225Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft\$8666250Follow-Up Surgery Of Eyeball\$6766500Iridotomy By Stab Incision (Separate Procedure); Except Transfixion\$3766505Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe\$4066600Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion\$8566605Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body\$1,0166625Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris\$4466630Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris\$52  |       | , , , , , ,   | \$953.31                 |
| 66225Repair Of Protrusion Of Inner Tissue Through Eyeball With Graft\$8666250Follow-Up Surgery Of Eyeball\$6766500Iridotomy By Stab Incision (Separate Procedure); Except Transfixion\$3766505Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe\$4066600Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion\$8566605Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body\$1,0166625Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris\$4466630Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris\$52  |       |   | \$734.29                 |
| 66250Follow-Up Surgery Of Eyeball\$67066500Iridotomy By Stab Incision (Separate Procedure); Except Transfixion\$37066505Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe\$40066600Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion\$85066605Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body\$1,0166625Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris\$4466630Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris\$52  |       | , ,   | \$719.04                 |
| 66500 Iridotomy By Stab Incision (Separate Procedure); Except Transfixion\$3766505 Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe\$4066600 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion\$8566605 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body\$1,0166625 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris\$4466630 Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris\$52   |       | i v   | \$865.97<br>\$670.98     |
| 66505Iridotomy By Stab Incision (Separate Procedure); With Transfixion As For Iris Bombe\$4066600Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion\$8566605Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body\$1,0166625Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris\$4466630Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris\$52   |       | , , ,   | \$373.49                 |
| 66600 Iridectomy, With Corneoscleral Or Corneal Section; For Removal Of Lesion  \$85 66605 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body  \$1,01 66625 Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris  \$44 66630 Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris  \$52  |       |   | \$405.66                 |
| 66605Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Ciliary Muscle Or Body\$1,0166625Removal Of Iris To Improve Eye Fluid Flow, Margin Of The Iris\$4466630Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris\$52  |       |   | \$853.45                 |
| 66630 Removal Of Iris To Improve Eye Fluid Flow, Section Of The Iris \$52.   |       |   | \$1,015.70               |
|  |       | , ,   | \$441.44                 |
| 66635 Removal Of Iris And Eyelid Border To Improve Eye Fluid Flow, With Removal Of Part Of The Iris \$52   |       |   | \$524.37                 |
|  |       |   | \$529.39                 |
|  |       |   | \$484.77                 |
|  |       | <u>'</u>  | \$560.52<br>\$422.48     |
|  |       |   | \$422.48<br>\$463.69     |

| Codo  | Description  | Foo  |
|-------|--|--|
|       | Description Destruction Of Tissue Encircling Lens Using Endoscope  | Fee<br>\$469.80                              |
|       | Cyclocryotherapy; Initial  | \$436.85                                     |
|       | Cyclodialysis; Initial   | \$410.38                                     |
|       | Creation Of Eye Fluid Drainage Tracts In Iris Using Laser, Per Session   | \$281.89                                     |
|       | Creation Of Openings In Iris For Eye Fluid Drainage Using Laser, 1 Or More Sessions  | \$446.15                                     |
| 66770 | Destruction Of Cyst Or Lesion Iris Or Ciliary Body (Nonexcisional Procedure)   | \$494.34                                     |
| 66820 | Removal Of Recurring Cataract In Lens Capsule With A Stab Incision   | \$449.59                                     |
|       | Discission Of Secondary Membraneous Cataract (Opacified Posterior Lens Capsule And/Or Anterior Hyaloid; Laser Surgery (Eg, Yag Laser)  |  |
|       | (One Or More Stages)   | \$348.35                                     |
|       | Repositioning Of Intraocular Lens Prosthesis, Requiring An Incision (Separate Procedure)   | \$786.60                                     |
|       | Removal Of Recurring Cataract In Lens Capsule With A Sectioning Of The Cornea And Scleral Areas  | \$656.12                                     |
|       | Removal Of Lens Material; Aspiration Technique, One Or More Stages   | \$640.65                                     |
|       | Fragmenting, Aspiration, And Removal Of Lens Material  | \$809.36                                     |
|       | Removal Of Lens Material; Pars Plana Approach, With Or Without Vitrectomy  | \$861.14                                     |
|       | Removal Of Lens Material; Intracapsular  Extraction Lens With Or Without Iridectomy; Intracapsular, For Dislocated Lens  | \$691.57<br>\$792.47                         |
|       | Removal Of Lens Material; Extracapsular (Other Than 66840, 66850, 66852)   | \$725.81                                     |
|       | Removal Of Cataract With Insertion Of Lens, Complex  | \$765.15                                     |
|       | Removal Of Cataract With Insertion Of Lens, 1 Stage  | \$795.22                                     |
|       | Removal Of Cataract With Insertion Of Lens, Simple   | \$558.65                                     |
|       | Insertion Of Intraocular Lens Prosthesis (Secondary Implant) Not Associated With Concurrent Cataract Removal   | \$790.94                                     |
| 66986 | Exchange Of Intraocular Lens   | \$834.57                                     |
|       | Complex Removal Of Cataract With Insertion Of Lens And Laser Treatment To Decrease Fluid Production In Eye   | Price By Report                              |
|       | Removal Of Cataract With Insertion Of Lens And Laser Treatment To Decrease Fluid Production In Eye   | Price By Report                              |
|       |  |  |
|       | Complex Extracapsular Removal Of Cataract With Insertion Of Artificial Lens And Insertion Of Drainage Device In Front Chamber Of Eye   | \$747.86                                     |
|       | Use Of Ophthalmic Endoscope (List Separately In Addition To Code For Primary Procedure)  | \$81.04                                      |
|       | Extracapsular Removal Of Cataract With Insertion Of Artificial Lens And Insertion Of Drainage Device In Front Chamber Of Eye   | \$598.81                                     |
|       | Unlisted Procedure, Anterior Segment Of Eye  | Price By Report                              |
|       | Partial Removal Of Eye Fluid Between The Lens And Retina With Mechanical Vitrectomy  | \$488.09                                     |
|       | Partial Removal Of Eye Fluid Between The Lens And Retina, Subtotal Removal With Mechanical Vitrectomy  | \$502.34                                     |
| 67015 | Aspiration Or Release Of Vitreous, Subretinal Or Choroidal Fluid, Pars Plana Approach (Posterior Sclerotomy)   | \$538.55                                     |
| 67025 | Injection Of Vitreous Substitute, Pars Plana Or Limbal Approach, (Fluid-Gas Exchange), With Or Without Aspiration (Separate Procedure)   | \$696.41                                     |
|       | Implantation of Intravitreal Drug Delivery System (Eg, Ganciclovir Implant), Includes Concomitant Removal of Vitreous  | \$782.66                                     |
|       | Intravitreal Injection Of A Pharmacologic Agent (Separate Procedure)   | \$117.30                                     |
|       | Discission Of Vitreous Strands (Without Removal), Pars Plana Approach  | \$521.49                                     |
|       | Severing Of Vitreous Strands, Vitreous Face Adhesions, Sheets, Membranes Or Opacities, Laser Surgery (One Or More Stages)  | \$364.57                                     |
|       | Vitrectomy, Mechanical, Pars Plana Approach  | \$919.66                                     |
|       | Laser Destruction Of Eye Fluid (Vitreous) Between The Lens And Retina, Focal   | \$983.28                                     |
| 67040 | Laser Destruction Of Eye Fluid (Vitreous) Between The Lens And Retina, All Of The Retina   | \$1,061.21                                   |
| 67041 | Vitrectomy, Mechanical, Pars Plana Approach; With Removal Of Preretinal Cellular Membrane (Eg, Macular Pucker)   | \$1,170.30                                   |
| 67042 | Removal Of Membrane From The Retina, Pars Plana Approach With Removal Of Internal Limiting Membrane Of Retina  | \$1,170.30                                   |
|       | Removal Of Membrane From The Retina, Pars Plana Approach, With Removal Of Subretinal Membrane  | \$1,110.64                                   |
|       | Repair Of Detached Retina, 1 Or More Sessions, With Cold Treatment   | \$313.18                                     |
|       | Repair Of Detached Retina, 1 Or More Sessions, With A Lazer  | \$276.23                                     |
|       | Repair Of Detached Retina And Drainage Of Eye Fluid Between Lens And Retina, Without Removal Of Vitreous Fluid   | \$1,150.79                                   |
|       | Repair Of Detached Retina And Drainage Of Eye Fluid Between Lens And Retina, With Removal Of Vitreous Fluid  | \$1,217.93                                   |
|       | Repair Of Retinal Detachment, One Or More Sessions; By Injection Of Air Or Other Gas (Eg, Pneumatic Retinopexy)  | \$961.59                                     |
|       | Repair Of Detached Retina And Drainage Of Eye Fluid Between Lens And Retina, Complex  Release Of Engireling Metarial (Pactoriar Segment)   | \$1,361.54                                   |
|       | Release Of Encircling Material (Posterior Segment)   | \$461.31                                     |
|       | Removal Implanted Material, Posterior Segment Eye Removal Of Implanted Material, Posterior Segment; Intraocular  | \$631.31<br>\$800.58                         |
|       | Preventive Retinal Detachment Treatment By Heat Or Freezing, 1 Or More Sessions  | \$281.59                                     |
|       | Preventive Retinal Detachment Treatment By Heat Or Laser, 1 Or More Sessions   | \$251.79                                     |
|       | Destruction Of Retinal Growth By Heat Or Freezing, 1 Or More Sessions  | \$559.49                                     |
|       | Laser Destruction Of Retinal Growth, 1 Or More Sessions  | \$532.82                                     |
|       | Destruction Of Retinal Growth With Implantation Of Radiation Source, 1 Or More Sessions  | \$1,287.77                                   |
|       | Destruction Of Vascular Growth Between Retina And Sclera, 1 Or More Sessions   | \$494.26                                     |
| 67221 | Destruction Of Localized Lesion Of Choroid (Eg, Choroidal Neovascularization); Photodynamic Therapy (Includes Intravenous Infusion)  | \$254.32                                     |
|       | Destruction of Vascular Growth Between Retina And Sclera, At Single Session  | \$254.32<br>\$26.94                          |
|       | Destruction Of Leaking Retinal Blood Vessels, 1 Or More Sessions   | \$275.25                                     |
|       | Laser Destruction Of Leaking Retinal Blood Vessels, 1 Or More Sessions   | \$350.57                                     |
|       | Laser Destruction Or Freezing Of Extensive Leaking Retinal Blood Vessels, Preterm Infant, 1 Or More Sessions   | \$1,054.61                                   |
|       | Scleral Reinforcement (Separate Procedure); Without Graft  | \$861.18                                     |
|       | Scleral Reinforcement (Separate Procedure); With Graft   | \$638.55                                     |
|       | Unlisted Procedure, Posterior Segment  | Price By Report                              |
| 67311 | Strabismus Surgery, Recession Or Resection Procedure; One Horizontal Muscle  | \$497.54                                     |
| 67312 | Strabismus Surgery, Recession Or Resection Procedure (Patient Not Previously Operated On); Two Horizontal Muscles  | \$718.07                                     |
|       | Strabismus Surgery, Recession Or Resection Procedure (Patient Not Previously Operated On); One Vertical Muscle (Excluding Superior   |  |
| 67314 | Oblique)   | \$570.95                                     |
| 07015 | Strabismus Surgery, Recession Or Resection Procedure (Patient Not Previously Operated On); Two Or More Vertical Muscles (Excluding   | <b>***</b> ********************************* |
|       | Superior Oblique) Strakiemus Surgan, Any Procedura, Superior Oblique Musela  | \$729.06                                     |
| 0/318 | Strabismus Surgery, Any Procedure, Superior Oblique Muscle Transposition Procedure (Eg, For Paretic Extraocular Muscle), Any Extraocular Muscle (Specify) (List Separately In Addition To Code For | \$635.09                                     |
| 1     | Primary Procedure)   | \$263.07                                     |
| 67320 |  |  |

| Code  | Description  | Fee                      |
|-------|--|--------------------------|
| Coue  | Description Strabismus Surgery On Patient With Previous Eye Surgery Or Injury That Did Not Involve The Extraocular Muscles (List Separately In Addition  | гее                      |
| 67331 | To Code For Primary Procedure)   | \$225.94                 |
|       | Strabismus Surgery On Patient With Scarring Of Extraocular Muscles (Eg, Prior Ocular Injury, Strabismus Or Retinal Detachment Surgery) Or  | *                        |
| 67332 | Restrictive Myopathy (Eg, Dysthyroid Ophthalmopathy) (List Separately In Addition To Code For Primary Procedure)  Strabismus Surgery By Posterior Fixation Suture Technique, With Or Without Muscle Recession (List Separately In Addition To Code For | \$270.59                 |
| 67334 | Primary Procedure)   | \$222.67                 |
| 07004 | Placement Of Adjustable Suture(S) During Strabismus Surgery, Including Postoperative Adjustment(S) Of Suture(S) (List Separately In Addition   | ΨΖΖΖ.01                  |
| 67335 | To Code For Specific Strabismus Surgery)   | \$191.74                 |
|       | Strabismus Surgery Involving Exploration And/Or Repair Of Detached Extraocular Muscle(S) (List Separately In Addition To Code For Primary  |                          |
|       | Procedure)   | \$268.66                 |
|       | Release Of Extensive Scar Tissue Without Detaching Extraocular Muscle (Separate Procedure)   | \$620.78                 |
|       | Chemodenervation Of Extraocular Muscle Biopsy Of Extraocular Muscle  | \$223.64<br>\$175.16     |
|       | Eye Muscle Procedure   | Price By Report          |
|       | Exploration Of Cavity Behind Eye, Frontal Or Transconjunctival Approach  | \$820.33                 |
|       | Orbitotomy Without Bone Flap (Frontal Approach); Drainage Only   | \$858.07                 |
| 67412 | Orbitotomy Without Bone Flap (Frontal Approach); With Removal Lesion   | \$1,052.01               |
|       | Orbitotomy Without Bone Flap (Frontal Approach); With Removal Foreign Body   | \$916.95                 |
|       | Removal Of Bone From Cavity Behind Eye, Without Bone Flap  | \$1,377.05               |
|       | Fine Needle Aspiration Of Orbital Contents  Othitaday With Bons Fine On Window Lateral Aspessal (For Koonlain) With Bons (Of Logica  | \$94.24                  |
|       | Orbitotomy With Bone Flap Or Window, Lateral Approach (Eg, Kroenlein); With Removal Of Lesion  Orbitotomy With Bone Flap, Lateral Approach (Eg, Kroenlein); With Removal Foreign Body  | \$1,543.58<br>\$1,314.97 |
|       | Orbitotomy With Bone Flap Or Window, Lateral Approach (Eg, Kroenlein); With Drainage   | \$1,276.47               |
|       | Removal Of Bone From Cavity Behind Eye, With Bone Flap   | \$1,439.74               |
|       | Exploration Of Cavity Behind Eye With Bone Flap, Lateral Approach  | \$1,240.97               |
| 67500 | Retrobulbar Injection; Medication (Separate Procedure, Does Not Include Supply Of Medication)  | \$70.68                  |
|       | Retrobulbar Injection; Alcohol   | \$80.82                  |
|       | Injection Of Medication Or Substance Into Membrane Covering Eyeball  | \$48.11                  |
|       | Injection Of Drug Into The Space Between The Cornea And Retina In The Eye  | \$103.32                 |
|       | Orbital Implant (Implant Outside Muscle Cone); Insertion   | \$1,028.40               |
|       | Orbital Implant (Implant Outside Muscle Cone); Removal Or Revision  Optic Nerve Decompression (Eq., Incision Or Fenestration Of Optic Nerve Sheath)  | \$1,050.64<br>\$1,274.32 |
|       | Unlisted Procedure, Orbit  | Price By Report          |
|       | Blepharotomy, Drainage Abscess Eyelid  | \$203.81                 |
|       | Severing Tarsorrhaphy  | \$237.46                 |
| 67715 | Canthotomy (Separate Procedure)  | \$256.36                 |
|       | Removal Of Eyelid Growth, Chalazion (Chronic Inflammation Of The Meibomian Gland For The Eyelid)   | \$121.10                 |
|       | Excision Chalazion; Multiple, Same Lid   | \$152.36                 |
|       | Excision Chalazion; Multiple, Different Lids   | \$139.48                 |
|       | Excision Chalazion; Under General Anesthesia And/Or Requiring Hospitalization, Single Or Multiple Incisional Biopsy Of Eyelid Skin Including Lid Margin  | \$249.38<br>\$131.38     |
|       | Correction Trichiasis; Epilation, Forceps Only   | \$19.88                  |
|       | Correction Of Trichiasis; Epilation By Other Than Forceps (Eg, By Electrosurgery, Cryotherapy, Laser Surgery)  | \$120.47                 |
|       | Correction Trichiasis; Incision Lid Margin   | \$261.02                 |
| 67835 | Correction Trichiasis; Incision Lid Margin, With Free Mucous Membrane Graft  | \$408.31                 |
|       | Removal Of Eyelid Growth, Other Than Chalazion (Chronic Inflammation Of The Meibomian Gland For The Eyelid)  | \$281.34                 |
|       | Destruction Of Growth Of Eyelid Margin, 1.0 Cm Or Less   | \$151.84                 |
|       | Temporary Closure Of Eyelids By Suture (Eg, Frost Suture)  | \$130.39                 |
|       | Construction Intermarginal Adhesions, Median Tarsorrhaphy, Or Canthorrhaphy;   | \$324.20                 |
|       | Construction Intermarginal Adhesions, Median Tarsorrhaphy, Or Canthorrhaphy; With Transposition Of Tarsal Plate  Repair Of Brow Ptosis (Supraciliary, Mid-Forehead Or Coronal Approach)  | \$538.71<br>\$612.26     |
|       | Repair Of Upper Evelid Muscle To Correct Drooping Or Paralysis, With External Material   | \$654.93                 |
|       | Repair Of Upper Eyelid Muscle To Correct Drooping Or Paralysis, With Internal Tissues  | \$671.62                 |
| 67903 | Repair Of Blepharoptosis; (Tarso)Levator Resection Or Advancement, Internal Approach   | \$632.89                 |
|       | Repair Of Blepharoptosis; (Tarso)Levator Resection Or Advancement, External Approach   | \$775.75                 |
|       | Repair Of Blepharoptosis Superior Rectus Technique With Fascial Sling (Includes Obtaining Fascia)  | \$466.04                 |
|       | Removal Of Tissue, Muscle, And Membrane To Correct Eyelid Drooping Or Paralysis  | \$513.72                 |
|       | Reduction Of Overcorrection Of Ptosis  | \$519.11                 |
|       | Correction Of Lid Retraction  Correction Of Lagophthalmos, With Implantation Of Upper Eyelid Lid Load (Eq. Gold Weight)  | \$515.99<br>\$874.11     |
|       | Repair Ectropion; Suture   | \$468.02                 |
|       | Repair Ectropion; Thermocauterization  | \$305.09                 |
|       | Repair Of Ectropion; Excision Tarsal Wedge   | \$582.53                 |
|       | Repair Of Ectropion; Extensive (Eg, Tarsal Strip Operations)   | \$594.00                 |
|       | Repair Entropion; Suture   | \$459.36                 |
|       | Repair Entropion; Thermocauterization  | \$295.27                 |
|       | Repair Of Turning-Inward Eyelid Defect, Simple   | \$582.63                 |
|       | Repair Of Turning-Inward Eyelid Defect, Complex Suture Recent Wound, Eyelid, Involving Lid Margin, Tarsus, And/Or Palpebral Conjunctiva) Direct Closure; Partial Thickness   | \$529.98<br>\$330.89     |
|       | Suture Recent Wound, Eyelid, Involving Lid Margin, Tarsus, And/Or Palpebral Conjunctiva) Direct Closure, Partial Thickness  Suture Recent Wound, Eyelid, Involving Lid Margin, Tarsus, And/Or Palpebral Conjunctiva) Direct Closure; Full Thickness    | \$535.16                 |
|       | Removal Embedded Foreign Body, Eyelid  | \$195.25                 |
|       | Canthoplasty (Reconstruction Of Canthus)   | \$606.17                 |
|       | Excision And Repair Eyelid, Involving Lid Margin, Tarsus, Conjunctiva, Or Full Thickness, May Include Preparation For Skin Graft Or Pedicle  |                          |
| 67961 | Flap With Adjacent Tissue Transfer Or Rearrangement; Up To One-Fourth Of Lid Margin  | \$617.47                 |
|       | Excision And Repair Eyelid, Involving Lid Margin, Tarsus, Conjunctiva, Or Full Thickness, May Include Preparation For Skin Graft Or Pedicle  | *                        |
|       | Flap With Adjacent Tissue Transfer Or Rearrangement; Over One-Fourth Of Lid Margin   | \$730.70                 |

| Code Description   | Fee                         |
|--|-----------------------------|
| Reconstruction Eyelid Full Thickness By Transfer Of Tarsoconjunctival Flap From Opposing Eyelid; Up To Two-Thirds Of Eyelid, One Stage Or 67971 First Stage  | \$662.94                    |
| Reconstruction Eyelid Full Thickness By Transfer Of Tarsoconjunctival Flap From Opposing Eyelid; Total Eyelid, Lower, One Stage Or First Stage   | \$851.73                    |
| Reconstruction Eyelid Full Thickness By Transfer Of Tarsoconjunctival Flap From Opposing Eyelid; Total Eyelid, Upper, One Stage Or First 67974 Stage   | \$849.99                    |
| 67975 Reconstruction Eyelid Full Thickness By Transfer Of Tarsoconjunctival Flap From Opposing Eyelid; Second Stage  | \$627.91                    |
| 67999 Unlisted Procedure, Eyelids 68020 Incision Conjunctiva, Drainage Cyst  | Price By Report<br>\$107.86 |
| 68040 Expression Conjunctival Follicles, Eg, For Trachoma  | \$58.34                     |
| 68100 Biopsy Conjunctiva   | \$173.60                    |
| 68110 Excision Lesion Conjunctiva; Up To 1 Cm  | \$212.61                    |
| 68115 Excision Lesion Conjunctiva; Over 1 Cm 68130 Removal Of Growth Of Sclera And Conjunctive   | \$235.01<br>\$525.05        |
| 68135 Destruction Lesion Conjunctiva   | \$146.56                    |
| 68200 Subconjunctival Injection  | \$41.62                     |
| 68320 Repair Of Conjunctiva With Graft From External Eye   | \$705.97                    |
| 68325 Repair Of Conjunctiva With Graft From Cheek Tissue 68326 Reconstruction Of Conjunctiva, With Graft From The Outer Eye  | \$605.30<br>\$626.83        |
| 68328 Reconstruction Of Conjunctiva, With Graft From The Cheek   | \$649.86                    |
| 68330 Repair Symblepharon; Conjunctivoplasty, Without Graft  | \$591.57                    |
| 68335 Release Of Scar Tissue From Eyelids With A Graft   | \$596.03                    |
| 68340 Release Of Scar Tissue From Eyelids Without A Graft  | \$577.49                    |
| 68360 Relocation Of Conjunctival Flap, Partial  68362 Relocation Of Conjunctival Flap, Total   | \$515.04<br>\$609.07        |
| 68371 Harvesting Conjunctival Allograft, Living Donor  | \$382.14                    |
| 68399 Unlisted Procedure, Conjunctiva  | Price By Report             |
| 68400 Incision, Drainage Lacrimal Gland  | \$287.52                    |
| 68420 Incision, Drainage Lacrimal Sac (Dacryocystotomy Or Dacryocystostomy)  68440 Snip Incision Lacrimal Punctum  | \$320.80                    |
| 68500 Excision Of Lacrimal Gland (Dacryoadenectomy), Except For Tumor; Total   | \$97.49<br>\$996.90         |
| 68505 Excision of Lacrimal Gland (Dacryoadenectomy), Except For Tumor; Partial   | \$992.53                    |
| 68510 Biopsy Lacrimal Gland  | \$430.00                    |
| 68520 Excision Of Lacrimal Sac (Dacryocystectomy)  | \$691.98                    |
| 68525 Biopsy Of Lacrimal Sac 68530 Removal Of Foreign Body Or Dacryolith, Lacrimal Passages  | \$236.62<br>\$415.57        |
| 68540 Excision Of Lacrimal Gland Tumor; Frontal Approach   | \$920.58                    |
| 68550 Excision Of Lacrimal Gland Tumor; Involving Osteotomy  | \$1,147.41                  |
| 68700 Plastic Repair Canaliculi  | \$527.88                    |
| 68705 Correction Everted Punctum, Cautery  | \$251.90                    |
| 68720 Dacryocystorhinostomy (Fistulization Of Lacrimal Sac To Nasal Cavity) 68745 Conjunctivorhinostomy (Fistulization Of Conjunctiva To Nasal Cavity); Without Tube   | \$780.85<br>\$763.41        |
| 68750 Conjunctivorhinostomy (Fistulization Of Conjunctiva To Nasal Cavity); With Insertion Of Tube Or Stent  | \$869.47                    |
| 68760 Closure Of The Lacrimal Punctum; By Thermocauterization, Ligation, Or Laser Surgery  | \$211.31                    |
| 68761 Closure Of The Lacrimal Punctum; By Plug, Each   | \$143.61                    |
| 68770 Closure Lacrimal Fistula (Separate Procedure)  | \$579.24                    |
| 68801 Dilation Of Lacrimal Punctum, With Or Without Irrigation 68810 Probing Of Nasolacrimal Duct, With Or Without Irrigation;   | \$101.65<br>\$169.63        |
| 68811 Probing Of Nasolacrimal Duct, With Or Without Irrigation; Requiring General Anesthesia   | \$138.14                    |
| 68815 Probing Of Nasolacrimal Duct, With Or Without Irrigation; With Insertion Of Tube Or Stent  | \$402.48                    |
| 68816 Probing Of Nasolacrimal Duct, With Or Without Irrigation; With Transluminal Balloon Catheter Dilation  | \$655.98                    |
| 68840 Probing Lacrimal Canaliculi, With Or Without Irrigation 68841 Insertion Of Drug Delivery Implant Into Tear Duct Of Eye   | \$91.96<br>\$33.69          |
| 68850 Injection Contrast Medium For Dacryocystography  | \$55.52                     |
| 68899 Unlisted Procedure, Lacrimal System  | Price By Report             |
| 69000 Incision And Drainage Of External Ear Abscess Or Blood Accumulation, Simple  | \$130.70                    |
| 69005 Incision And Drainage Of External Ear Abscess Or Blood Accumulation, Complicated 69020 Drainage External Auditory Canal, Abscess   | \$152.55<br>\$212.27        |
| 69100 Biopsy External Ear  | \$67.66                     |
| 69105 Biopsy External Auditory Canal   | \$103.56                    |
| 69110 Excision External Ear; Partial, Simple Repair  | \$423.79                    |
| 69120 Excision External Ear; Complete Amputation 69140 Excision Exostosis(Es), External Auditory Canal   | \$369.81                    |
| 69140 Excision Exostosis(Es), External Auditory Canal 69145 Excision Soft Tissue Lesion, External Auditory Canal   | \$810.50<br>\$291.98        |
| 69150 Removal Of Growth Of Ear Canal, Without Neck Dissection  | \$945.37                    |
| 69155 Removal Of Growth Of Ear Canal, With Neck Dissection   | \$1,514.22                  |
| 69200 Removal Foreign Body From External Auditory Canal; Without General Anesthesia  | \$83.87                     |
| 69205 Removal Foreign Body From External Auditory Canal; With General Anesthesia 69209 Removal Of Impacted Ear Wax By Washing  | \$97.71                     |
| 69210 Removal Of Impacted Ear Wax, One Ear   | \$13.90<br>\$48.73          |
| 69220 Removal Of Skin Debris And Drainage Of Mastoid Cavity, Simple  | \$53.19                     |
| 69222 Removal Of Skin Debris And Drainage Of Mastoid Cavity, Complex   | \$152.60                    |
| 69300 Otoplasty, Protruding Ear, With Or Without Size Reduction  | \$614.25                    |
| 69310 Reconstruction Of External Auditory Canal (Meatoplasty) (Eg, For Stenosis Due To Injury, Infection) (Separate Procedure) 69320 Reconstruction External Auditory Canal For Congenital Atresia, Single Stage | \$817.08<br>\$1,484.06      |
|  |                             |
| 69399 Unlisted Procedure, External Ear   | Price By Report             |

| Code  | Description   | Fee   |
|---|---|---|
| -   | Incision, Aspiration, And Inflation Of Eardrum Under Anesthesia   | \$108.09  |
|   | Ventilating Tube Removal Requiring General Anesthesia   | \$131.66  |
| -   | Tympanostomy (Requiring Insertion Of Ventilating Tube), Local Or Topical Anesthesia   | \$141.40  |
| 69436   | Tympanostomy (Requiring Insertion Of Ventilating Tube), General Anesthesia  | \$164.86  |
|   | Middle Ear Exploration Through Postauricular Or Ear Canal Incision  | \$655.63  |
|   | Tympanolysis, Transcanal  | \$579.99  |
|   | Transmastoid Antrotomy ("Simple" Mastoidectomy)   | \$668.16  |
|   | Mastoidectomy; Complete  Mastoidectomy: Madified Redired  | \$982.82  |
|   | Mastoidectomy; Modified Radical  Mastoidectomy; Radical   | \$1,170.61<br>\$1,196.71  |
|   | Petrous Apicectomy Including Radical Mastoidectomy  | \$1,480.55  |
|   | Resection Temporal Bone, External Approach  | \$2,493.34  |
|   | Excision Aural Polyp  | \$204.58  |
| 69550   | Excision Aural Glomus Tumor; Transcanal   | \$1,013.85  |
| 69552   | Excision Aural Glomus Tumor; Transmastoid   | \$1,497.74  |
| 69554   | Excision Aural Glomus Tumor; Extended (Extratemporal)   | \$2,362.12  |
|   | Revision Mastoidectomy; Resulting In Complete Mastoidectomy   | \$956.22  |
|   | Revision Of Previous Mastoid Surgery, Modified Radical Procedure  | \$1,139.75  |
|   | Revision Of Previous Mastoid Surgery, Radical Procedure   | \$1,221.37  |
|   | Revision Mastoidectomy; Resulting In Tympanoplasty  Tympanic Membrane Repair, With Or Without Site Preparation Or Perforation For Closure With Or Without Patch   | \$1,047.40  |
|   | Myringoplasty (Surgery Confined To Drumhead And Donor Area)   | \$400.14<br>\$747.67  |
|   | Tympanoplasty Without Mastoidectomy (Including Canalplasty, Atticotomy And/Or Middle Ear Surgery), Initial Or Revision; Without Ossicular   | \$141.01  |
|   | Chain Reconstruction  | \$936.85  |
|   | Repair Of Eardrum, Ear Canal, And Bones   | \$1,025.21  |
|   | Repair Of Eardrum, Ear Canal, And Bones With Insertion Of Prosthesis, Without Mastoidectomy   | \$1,104.08  |
|   | Tympanoplasty With Antrotomy Or Mastoidotomy (Including Canalplasty, Atticotomy, Middle Ear Surgery, And/Or Tympanic Membrane Repair);  |   |
| 69635   | Without Ossicular Chain Reconstruction  | \$1,202.26  |
|   | Repair Of Eardrum, Ear Canal, And Bones With Incision Of Mastoid Bone   | \$1,340.38  |
|   | Repair Of Eardrum, Ear Canal, And Bones With Insertion Of Prosthesis With Opening Of Mastoid  | \$1,420.13  |
|   | Repair Of Eardrum And Ear Canal With Removal Of Mastoid Bone, Complex   | \$1,092.95  |
|   | Repair Of Eardrum, Ear Canal And Bones With Removal Of Mastoid Bone, Simple   | \$1,400.52  |
|   | Repair Of Eardrum And Ear Canal With Removal Of Mastoid Bone, Simple Repair Of Eardrum, Ear Canal And Bones With Removal Of Mastoid Bone, With Intact Canal Wall  | \$1,281.37<br>\$1,429.24  |
|   | Repair Of Eardrum And Ear Canal With Removal Of Mastoid Bone, Extensive Or Radical  | \$1,510.12  |
|   | Repair Of Eardrum, Ear Canal And Bones With Removal Of Mastoid Bone, Extensive Or Radical   | \$1,486.44  |
|   | Stapes Mobilization   | \$758.57  |
|   | Stapedectomy Or Stapedotomy With Reestablishment Of Ossicular Continuity, With Or Without Use Of Foreign Material   | \$869.14  |
| 69661   | Stapedectomy With Reestablishment Of Ossicular Continuity, With Or Without Use Of Foreign Material; With Footplate Drill Out  | \$1,129.68  |
| 69662   | Revision Of Stapedectomy Or Stapedotomy   | \$1,084.15  |
|   | Repair Oval Window Fistula  | \$762.83  |
|   | Repair Round Window Fistula   | \$763.14  |
|   | Mastoid Obliteration (Separate Procedure)   | \$891.81  |
|   | Tympanic Neurectomy  Clause Parteurisular Fintula Magteid (Congrete Procedure)  | \$789.74  |
| 69700   | Closure Postauricular Fistula, Mastoid (Separate Procedure)   | \$626.58  |
| 69705   | Dilation Of Canal Between Middle Ear And Throat (Eustachian Tube) On One Side Of Body, Using Endoscope Inserted Through Nose  | \$2,771.10  |
|   |   |   |
|   | Dilation Of Canal Between Middle Ear And Throat (Eustachian Tube) On Both Sides Of Body, Using Endoscope Inserted Through Nose  | \$3,162.15  |
|   | Implantation Or Replacement Of Electromagnetic Bone Conduction Hearing Device In Temporal Bone  Removal Or Repair Of Electromagnetic Bone Conduction Hearing Device In Temporal Bone  | \$515.74<br>\$789.46  |
|   | Temporal Bone Implantation Of Cochlear Stimulating System, Accessed Through The Skin  | \$789.46<br>\$669.33  |
|   | Implantation Of Cochlear Stimulating System Into Skull With Magnetic Attachment To External Speech Processor  | \$543.36  |
|   | Temporal Bone Replacement Of Cochlear Stimulating System, Accessed Through The Skin   | \$675.27  |
|   | Revision Or Replacement Of Cochlear Stimulating System Into Skull With Magnetic Attachment To External Speech Processor   | \$563.13  |
| 69720   | Release Of Facial Nerve, Lateral  | \$1,116.57  |
|   | Release Of Facial Nerve, Medial   | \$1,736.31  |
|   | Removal Of Cochlear Stimulating System From Skull With Attachment Through Skin To External Speech Processor   | \$419.39  |
| 69727   | Removal Of Cochlear Stimulating System From Skull With Magnetic Attachment To External Speech Processor   | \$466.80  |
| 00700   | Demousl Of Entire Cooklear Stimulating System From Outside Masteid Base Of Shull With Masset's Attack was To Establish Co. 1. 5   | <b>0=10:</b>  |
|   | Removal Of Entire Cochlear Stimulating System From Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor  | \$519.13  |
| 60700   | Implantation Of Cooklear Stimulating System Outside Mactaid Rone Of Skull With Magnetic Attachment To External Space Branches   | ФE07 00   |
| 69729   | Implantation Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor   | \$587.22  |
|   |   |   |
| 69730   | Implantation Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor  Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor  Repair Of Facial Nerve, External To The Geniculate Ganglion  | \$600.39  |
| 69730<br>69740  | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor  | \$600.39<br>\$1,083.82  |
| 69730<br>69740<br>69745   | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion  | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report   |
| 69730<br>69740<br>69745<br>69799<br>69801   | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach   | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report   |
| 69730<br>69740<br>69745<br>69799<br>69801<br>69805  | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt  | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report<br>\$241.53<br>\$958.25   |
| 69730<br>69740<br>69745<br>69799<br>69801<br>69805<br>69806                                     | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt  | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report<br>\$241.53<br>\$958.25<br>\$862.85   |
| 69730<br>69740<br>69745<br>69799<br>69801<br>69805<br>69806<br>69905                            | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal  | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report<br>\$241.53<br>\$958.25<br>\$862.85   |
| 69730<br>69740<br>69745<br>69799<br>69801<br>69805<br>69806<br>69905                            | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal Labyrinthectomy; With Mastoidectomy  | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report<br>\$241.53<br>\$958.25<br>\$862.85<br>\$866.80<br>\$925.72                             |
| 69730<br>69740<br>69745<br>69799<br>69801<br>69805<br>69806<br>69905<br>69910                   | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal Labyrinthectomy; With Mastoidectomy Vestibular Nerve Section, Translabyrinthine Approach   | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report<br>\$241.53<br>\$958.25<br>\$862.85<br>\$866.80<br>\$925.72                             |
| 69730<br>69740<br>69745<br>69799<br>69801<br>69805<br>69806<br>69905<br>69910<br>69915<br>69930 | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal Labyrinthectomy; With Mastoidectomy Vestibular Nerve Section, Translabyrinthine Approach Cochlear Device Implantation, With Or Without Mastoidectomy | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report<br>\$241.53<br>\$958.25<br>\$862.85<br>\$866.80<br>\$925.72<br>\$1,394.48<br>\$1,259.10 |
| 69730<br>69740<br>69745<br>69799<br>69801<br>69805<br>69905<br>69910<br>69915<br>69930<br>69949 | Replacement Of Cochlear Stimulating System Outside Mastoid Bone Of Skull With Magnetic Attachment To External Speech Processor Repair Of Facial Nerve, External To The Geniculate Ganglion Repair Of Facial Nerve, Internal To The Geniculate Ganglion Unlisted Procedure, Middle Ear Incision Of Fluid Canals Of Inner Ear With Infusion Of Drugs, Transcanal Approach Endolymphatic Sac Operation; Without Shunt Endolymphatic Sac Operation; With Shunt Labyrinthectomy; Transcanal Labyrinthectomy; With Mastoidectomy Vestibular Nerve Section, Translabyrinthine Approach   | \$600.39<br>\$1,083.82<br>\$1,157.11<br>Price By Report<br>\$241.53<br>\$958.25<br>\$862.85<br>\$866.80<br>\$925.72                             |

| Code   | Description   | Fee  |
|--|---|--|
|  | Decompression Internal Auditory Canal   | \$1,741.88   |
| 69970  | Removal Of Tumor  | \$1,970.87   |
| 69979  | Unlisted Procedure, Temporal Bone, Middle Fossa Approach  | Price By Report  |
|  | Microsurgical Techniques, Requiring Use Of Operating Microscope (List Separately In Addition To Code For Primary Procedure)   | \$201.95   |
|  | Myelography, Posterior Fossa, Radiological Supervision And Interpretation   | \$54.11  |
|  | Cisternography, Positive Contrast, Radiological Supervision And Interpretation  | \$165.73   |
|  | Radiologic Examination, Eye, For Detection Of Foreign Body  | \$24.61  |
|  | X-Ray Of Mandible, Less Than 4 Views  | \$32.99  |
|  | X-Ray Of Mandible, Minimum Of 4 Views   | \$41.76  |
|  | X-Ray Of Mastoid, Less Than 3 Views Per Side  | \$34.99  |
|  | X-Ray Of Mastoid, Minimum Of 3 Views Per Side   | \$60.84  |
|  | Radiologic Examination, Internal Auditory Meati, Complete   | \$59.75  |
|  | X-Ray Of Bones Of Face, Less Than 3 Views   | \$34.41  |
|  | X-Ray Of Bones Of Face, Minimum Of 3 Views  | \$49.86  |
|  | X-Ray Of Bones Of Nose, Minimum Of 3 Views  | \$32.52  |
|  | Dacryocystography, Nasolacrimal Duct, Radiological Supervision And Interpretation   | \$50.84  |
|  | Radiologic Examination Optic Foramina   | \$36.86  |
|  | X-Ray Of Eye Bones, Minimum Of 4 Views  | \$50.81  |
|  | X-Ray Of Paranasal Sinus, Less Than 3 Views   | \$34.78  |
|  | X-Ray Of Paranasal Sinus, Complete, Minimum Of 3 Views  | \$40.58  |
|  | Radiologic Examination, Sella Turcica   | \$31.95  |
|  | X-Ray Of Skull, Less Than 4 Views   | \$38.41  |
|  | X-Ray Of Skull, Complete, Minimum Of 4 Views  | \$48.22  |
|  | X-Ray Of Teeth, Single View   | \$12.00  |
|  | X-Ray Of Teeth, Less Than Full Mouth  | \$36.86  |
|  | X-Ray Of Teeth, Full Mouth  | \$52.88  |
|  | Radiologic Examination, Temporomandibular Joint, Open And Closed Mouth Unilateral   | \$31.33  |
|  | Radiologic Examination, Temporomandibular Joint, Open And Closed Mouth Bilateral  | \$48.11  |
|  | Temporomandibular Joint Arthrography, Radiological Supervision And Interpretation   | \$83.31  |
|  | Magnetic Resonance (Eg, Proton) Imaging, Temporomandibular Joint(S)   | \$303.58   |
|  | Cephalogram, Orthodontic  | \$15.27  |
|  | Orthopantogram (Eg, Panoramic X-Ray)  | \$18.78  |
|  | Radiologic Examination Neck, Soft Tissue  | \$28.02  |
|  | X-Ray Of Voice Box Or Throat  | \$64.49  |
|  | Imaging Of Voice Box With Speech Evaluation   | \$101.29   |
|  | Radiologic Examination, Salivary Gland For Calculus   | \$36.53  |
|  | Sialography, Radiological Supervision And Interpretation  | \$117.42   |
|  | Computed Tomography, Head Or Brain; Without Contrast Material   | \$117.63   |
|  | Computerized Axial Tomography, Head Or Brain; With Contrast Material(S)   | \$165.72   |
|  | Computerized Axial Tomography, Head Or Brain; Without Contrast Material, Followed By Contrast Material(S) And Further Sections  | \$194.68   |
|  | Computed Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or Inner Ear; Without Contrast Material   | \$176.87   |
| 70481  | Computerized Axial Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or Inner Ear; With Contrast Material(S)   | \$202.79   |
|  | Computerized Axial Tomography, Orbit, Sella, Or Posterior Fossa Or Outer, Middle, Or Inner Ear; Without Contrast Material, Followed By  |  |
|  | Contrast Material(S) And Further Sections   | \$238.05   |
|  | Computed Tomography, Maxillofacial Area; Without Contrast Material  | \$142.71   |
| 70487  | Computerized Axial Tomography, Maxillofacial Area; With Contrast Material(S)  | \$170.09   |
| 70488  | Computerized Axial Tomography, Maxillofacial Area; Without Contrast Material, Followed By Contrast Material(S) And Further Sections   | \$207.76   |
|  | Computed Tomography, Soft Tissue Neck; Without Contrast Material  | \$167.43   |
|  | Computerized Axial Tomography, Soft Tissue Neck; With Contrast Material(S)  | \$207.04   |
|  | Computerized Axial Tomography, Soft Tissue Neck; Without Contrast Material Followed By Contrast Material(S) And Further Sections  | \$248.84   |
|  | Computed Tomographic Angiography, Head, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image  | ·  |
| 70496  | Postprocessing  | \$466.88   |
|  | Computed Tomographic Angiography, Neck, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image  | ,  |
| 70498  | Postprocessing  | \$467.09   |
|  | Mri Scan Bones Of The Eye, Face, And/Or Neck  | \$257.30   |
|  |   | \$275.18   |
|  | Mri Scan Bones Of The Eye, Face, And/Or Neck With Contrast  | φ213.10  |
| 70542  | Mri Scan Bones Of The Eye, Face, And/Or Neck With Contrast  Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  | \$385.48   |
| 70542<br>70543   |   |  |
| 70542<br>70543<br>70544  | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  | \$385.48<br>\$243.14   |
| 70542<br>70543<br>70544<br>70545   | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S)   | \$385.48<br>\$243.14   |
| 70542<br>70543<br>70544<br>70545<br>70546  | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  Magnetic Resonance Angiography, Head; Without Contrast Material(S)  Magnetic Resonance Angiography, Head; With Contrast Material(S)   | \$385.48<br>\$243.14<br>\$256.58   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547   | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  Magnetic Resonance Angiography, Head; Without Contrast Material(S)  Magnetic Resonance Angiography, Head; With Contrast Material(S)  Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences   | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548  | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  Magnetic Resonance Angiography, Head; Without Contrast Material(S)  Magnetic Resonance Angiography, Head; With Contrast Material(S)  Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Neck; Without Contrast Material(S)   | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70549   | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  Magnetic Resonance Angiography, Head; Without Contrast Material(S)  Magnetic Resonance Angiography, Head; With Contrast Material(S)  Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Neck; Without Contrast Material(S)  Magnetic Resonance Angiography, Neck; With Contrast Material(S)  | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70549<br>70551  | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  Magnetic Resonance Angiography, Head; Without Contrast Material(S)  Magnetic Resonance Angiography, Head; With Contrast Material(S)  Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Neck; Without Contrast Material(S)  Magnetic Resonance Angiography, Neck; With Contrast Material(S)  Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  | \$385.48<br>\$243.14<br>\$266.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70549<br>70551  | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material  | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70549<br>70551<br>70552                                     | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  Magnetic Resonance Angiography, Head; Without Contrast Material(S)  Magnetic Resonance Angiography, Head; With Contrast Material(S)  Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Neck; Without Contrast Material(S)  Magnetic Resonance Angiography, Neck; With Contrast Material(S)  Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging;  Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences  | \$385.48<br>\$243.14<br>\$266.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70549<br>70551<br>70552                                     | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast  Magnetic Resonance Angiography, Head; Without Contrast Material(S)  Magnetic Resonance Angiography, Head; With Contrast Material(S)  Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Neck; Without Contrast Material(S)  Magnetic Resonance Angiography, Neck; With Contrast Material(S)  Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging;  Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences  | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44<br>\$220.37<br>\$305.52   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70549<br>70551<br>70552                                     | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And  | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44<br>\$220.37<br>\$305.52   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70549<br>70551<br>70552                                     | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging; Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences  | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44<br>\$220.37<br>\$305.52   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70551<br>70552<br>70553                                     | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging; Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration  | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44<br>\$220.37<br>\$305.52   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70551<br>70552<br>70553<br>70554                            | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S), Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S), Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg, Proton) Imaging; Magnetic Resonance (Eg, Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or  | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44<br>\$220.37<br>\$305.52<br>\$360.17   |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70551<br>70553<br>70554<br>70555<br>70557                   | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration Of Entire Neurofuntional Testing   | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44<br>\$220.37<br>\$305.52<br>\$360.17<br>\$387.92                                     |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70551<br>70552<br>70553<br>70554<br>70555<br>70557<br>70558 | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg. Proton) Imaging; Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Requiring Physician Or Psychologist Administration Of Entire Neurofuntional Testing Mri Scan Of Brain, During Open Brain Procedure   | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44<br>\$220.37<br>\$305.52<br>\$360.17<br>\$387.92                                     |
| 70542<br>70543<br>70544<br>70545<br>70546<br>70547<br>70548<br>70551<br>70552<br>70553<br>70554<br>70555<br>70558<br>70558 | Mri Scan Bones Of The Eye, Face, And/Or Neck Before And After Contrast Magnetic Resonance Angiography, Head; Without Contrast Material(S) Magnetic Resonance Angiography, Head; With Contrast Material(S) Magnetic Resonance Angiography, Head; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Angiography, Neck; Without Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S) Magnetic Resonance Angiography, Neck; With Contrast Material(S), Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance (Eg., Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast Material(S) And Further Sequences Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Not Requiring Physician Or Psychologist Administration Magnetic Resonance Imaging, Brain, Functional Mri; Including Test Selection And Administration Of Repetitive Body Part Movement And/Or Visual Stimulation, Requiring Physician Or Psychologist Administration Of Entire Neurofuntional Testing Mri Scan Of Brain, During Open Brain Procedure | \$385.48<br>\$243.14<br>\$256.58<br>\$372.51<br>\$243.86<br>\$277.78<br>\$390.44<br>\$220.37<br>\$305.52<br>\$360.17<br>\$387.92<br>\$134.99<br>\$154.37<br>\$173.08 |

| Code   | Description   | Fee   |
|--|---|---|
|  | X-Ray Of Chest, 3 Views   | \$41.38   |
|  | X-Ray Of Chest, Minimum Of 4 Views  | \$45.68   |
|  | X-Ray Of Ribs Of One Side Of Body, 2 Views  | \$37.89   |
|  | X-Ray Of Ribs On One Side Of Body Including The Chest, Minimum Of 3 Views   | \$45.13   |
| 71110  | X-Ray Of Both Sides Of The Ribs, 3 Views  | \$47.12   |
| 71111  | X-Ray Of Both Sides Of The Ribs Including The Chest, Minimum Of 4 Views   | \$50.22   |
|  | X-Ray Of Breast Bone, Minimum Of 2 Views  | \$36.23   |
| 71130  | X-Ray Of Junction Of Breast And Collar Bones, Minimum Of 2 Views  | \$37.40   |
|  | Diagnostic Ct Scan Of Chest   | \$147.92  |
|  | Diagnostic Ct Scan Of Chest With Contrast   | \$186.44  |
|  | Diagnostic Ct Scan Of Chest Before And After Contrast   | \$221.33  |
| 71271  | Low Dose Ct Scan Of Chest For Lung Cancer Screening   | \$139.19  |
|  | Computed Tomographic Angiography, Chest (Noncoronary), With Contrast Material(S), Including Noncontrast Images, If Performed, And Image   |   |
|  | Postprocessing  | \$636.94  |
|  | Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, For Evaluation Of Hilar And Mediastinal Lymphadenopathy); Without Contrast  | <b>#</b> 500.00   |
| 71550  | Material(S)   | \$562.26  |
| 71551  | Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, For Evaluation Of Hilar And Mediastinal Lymphadenopathy); With Contrast Material(S)   | ¢207.04   |
|  | Magnetic Resonance (Eg, Proton) Imaging, Chest (Eg, Por Evaluation Of Filiar And Mediastinal Lymphadenopathy); Without Contrast Material (3)  | \$387.04  |
|  | Material(S), Followed By Contrast Material(S) And Further Sequences   | \$705.19  |
|  | Magnetic Resonance Angiography, Chest (Excluding Myocardium), With Or Without Contrast Material(S)  | \$379.90  |
|  | X-Ray Of Spine, 1 View  | \$26.69   |
|  | X-Ray Of Spine Of Neck, 2 Or 3 Views  | \$39.11   |
|  | X-Ray Of Upper Spine, 4 Or 5 Views  | \$57.29   |
|  | X-Ray Of Upper Spine, 1 Or Wore Views   | \$70.26   |
|  | X-Ray Of Middle Spine, 2 Views  | \$35.13   |
|  | X-Ray of Middle Spine, 3 Views  | \$42.04   |
|  | X-Ray Of Middle Spine, Minimum Of 4 Views   | \$44.97   |
|  | X-Ray Of Middle And Lower Spine, 2 Views  | \$37.32   |
|  | X-Ray Of Spine, Entire Middle And Lower Spine, 1 View   | \$42.11   |
| 72082  | X-Ray Of Spine, Entire Middle And Lower Spine, 2 Or 3 Views   | \$72.16   |
| 72083  | X-Ray Of Spine, Entire Middle And Lower Spine, 4 Or 5 Views   | \$73.91   |
| 72084  | X-Ray Of Spine, Minimum Of 6 Views  | \$88.04   |
| 72100  | X-Ray Of Lower And Sacral Spine, 2 Or 3 Views   | \$42.28   |
| 72110  | X-Ray Of Lower And Sacral Spine, Minimum Of 4 Views   | \$58.09   |
| 72114  | Radiologic Examination, Spine, Lumbosacral; Complete, Including Bending Views, Minimum Of 6 Views   | \$62.58   |
| 72120  | Radiologic Examination, Spine, Lumbosacral; Bending Views Only, 2 Or 3 Views  | \$44.27   |
| 72125  | Computed Tomography, Cervical Spine; Without Contrast Material  | \$145.02  |
| 72126  | Computerized Axial Tomography, Cervical Spine; With Contrast Material   | \$188.86  |
| 72127  | Computerized Axial Tomography, Cervical Spine; Without Contrast Material, Followed By Contrast Material(S) And Further Sections   | \$222.19  |
|  | Computed Tomography, Thoracic Spine; Without Contrast Material  | \$144.65  |
|  | Computerized Axial Tomography, Thoracic Spine; With Contrast Material   | \$190.32  |
|  |   |   |
|  | Computerized Axial Tomography, Thoracic Spine; Without Contrast Material, Followed By Contrast Material(S) And Further Sections   | \$200.83  |
|  | Computed Tomography, Lumbar Spine; Without Contrast Material  | \$144.28  |
| 72132  | Computerized Axial Tomography, Lumbar Spine; With Contrast Material   | \$188.86  |
| 72133  | Computerized Axial Tomography, Lumbar Spine; Without Contrast Material, Followed By Contrast Material(S) And Further Sections   | \$221.82  |
| 72141  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Cervical Without Contrast Material  | \$215.28  |
| 72142  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Cervical With Contrast Material(S)  | \$312.80  |
|  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Thoracic Without Contrast Material  | \$214.92  |
|  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Thoracic With Contrast Material(S)  | \$309.52  |
| 72148  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Lumbar Without Contrast Material  | \$215.65  |
| -  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Lumbar With Contrast Material(S)  | \$306.98  |
|  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without Contrast Material, Followed By Contrast Material(S) And   | _   |
| 72156  | Further Sequences; Cervical   | \$362.83  |
|  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without Contrast Material, Followed By Contrast Material(S) And   |   |
|  | Further Sequences; Thoracic   | \$363.18  |
|  | Magnetic Resonance (Eg, Proton) Imaging, Spinal Canal And Contents, Without Contrast Material, Followed By Contrast Material(S) And   | <b>#004</b> 74  |
|  | Further Sequences; Lumbar  Magnetic Recognition Angiography, Spiral Conel And Contents, With Or Without Contract Material(S)  | \$361.74  |
|  | Magnetic Resonance Angiography, Spinal Canal And Contents, With Or Without Contrast Material(S)   | \$353.36  |
| 1/1/11   |   | ቀሳስ ሰሳ  |
|  | X-Ray Of Pelvis, 1 Or 2 Views   |   |
|  | X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views   |   |
| 72190  | X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image  | \$41.52   |
| 72190<br>72191   | X-Ray Of Pelvis, 1 Or 2 Views X-Ray Of Pelvis, Minimum Of 3 Views Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing   | \$41.52<br>\$470.40   |
| 72190<br>72191<br>72192  | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material   | \$41.52<br>\$470.40<br>\$148.28   |
| 72190<br>72191<br>72192<br>72193   | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)   | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01   |
| 72190<br>72191<br>72192<br>72193<br>72194  | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)  Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections   | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01<br>\$436.19   |
| 72190<br>72191<br>72192<br>72193<br>72194<br>72195   | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)   | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01<br>\$436.19<br>\$261.43   |
| 72190<br>72191<br>72192<br>72193<br>72194<br>72195   | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)  Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)   | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01<br>\$436.19<br>\$261.43   |
| 72190<br>72191<br>72192<br>72193<br>72194<br>72195<br>72196  | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)  Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)   | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01<br>\$436.19<br>\$261.43<br>\$275.63   |
| 72190<br>72191<br>72192<br>72193<br>72194<br>72195<br>72196<br>72197                                     | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)  Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; With Contrast Material(S)   | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01<br>\$436.19<br>\$261.43<br>\$275.63   |
| 72190<br>72191<br>72192<br>72193<br>72194<br>72195<br>72196<br>72197<br>72198                            | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)  Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; With Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01<br>\$436.19<br>\$261.43<br>\$275.63<br>\$384.75                                   |
| 72190<br>72191<br>72192<br>72193<br>72194<br>72195<br>72196<br>72197<br>72198<br>72200                   | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)  Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S)   | \$148.28  |
| 72190<br>72191<br>72192<br>72193<br>72194<br>72195<br>72196<br>72197<br>72198<br>72200<br>72202          | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)  Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Pelvis, Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S)  X-Ray Of Sacroiliac Joints, Less Than 3 Views  | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01<br>\$436.19<br>\$261.43<br>\$275.63<br>\$384.75<br>\$343.55                       |
| 72190<br>72191<br>72192<br>72193<br>72194<br>72195<br>72196<br>72197<br>72198<br>72200<br>72202<br>72220 | X-Ray Of Pelvis, 1 Or 2 Views  X-Ray Of Pelvis, Minimum Of 3 Views  Computed Tomographic Angiography, Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing  Computed Tomography, Pelvis; Without Contrast Material  Computerized Axial Tomography, Pelvis; With Contrast Material(S)  Computerized Axial Tomography, Pelvis; Without Contrast Material, Followed By Contrast Material(S) And Further Sections  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; With Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Pelvis; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Pelvis, With Or Without Contrast Material(S)  X-Ray Of Sacroiliac Joints, Less Than 3 Views  X-Ray Of Sacroiliac Joints, Jor More Views | \$41.52<br>\$470.40<br>\$148.28<br>\$363.01<br>\$436.19<br>\$261.43<br>\$275.63<br>\$384.75<br>\$343.55<br>\$28.47<br>\$33.06 |

| Codo  | Description  | Foo  |
|---|--|--|
|   | Description Myelography, Lumbosacral, Radiological Supervision And Interpretation  | Fee<br>\$106.20  |
|   | Radiological Supervision And Interpretation X-Ray Of Spinal Canal, 2 Or More Spinal Regions  | \$161.71   |
|   | Radiological Supervision And Interpretation X-Ray Of Disc Of Vertebra, Upper Or Middle Spine   | \$122.66   |
|   | Radiological Supervision And Interpretation X-Ray Of Disc Of Vertebra, Lower Spine   | \$120.67   |
| 73000   | Radiologic Examination Clavicle, Complete  | \$31.65  |
| 73010   | Radiologic Examination Scapula, Complete   | \$25.33  |
|   | X-Ray Of Shoulder, 1 View  | \$22.79  |
|   | X-Ray Of Shoulder, Minimum Of 2 Views  | \$35.62  |
|   | Radiologic Examination, Shoulder, Arthrography, Radiological Supervision And Interpretation  | \$94.67  |
|   | Radiologic Examination Acromioclavicular Joints, Bilateral, With Or Without Weighted Distraction   | \$30.41  |
|   | X-Ray Of Upper Arm, Minimum Of 2 Views   | \$35.18  |
|   | X-Ray Of Elbow, 2 Views  | \$31.19  |
|   | X-Ray Of Elbow, Minimum Of 3 Views   | \$35.18  |
|   | Radiologic Examination, Elbow, Arthrography, Radiological Supervision And Interpretation   | \$110.24   |
|   | X-Ray Of Forearm, 2 Views  | \$31.65  |
|   | Radiologic Examination Upper Extremity, Infant, Minimum Of Two Views   | \$30.43  |
|   | X-Ray Of Wrist, 2 Views  | \$31.14  |
|   | X-Ray Of Wrist, Minimum Of 3 Views Radiologic Examination, Wrist, Arthrography, Radiological Supervision And Interpretation  | \$32.94  |
|   | X-Ray Of Hand, 2 Views   | \$123.46<br>\$30.43  |
|   | X-Ray Of Hand, Minimum Of 3 Views  | \$32.94  |
|   | X-Ray Of Fingers, Minimum Of 2 Views   | \$26.54  |
|   | Computed Tomography, Upper Extremity; Without Contrast Material  | \$277.92   |
|   | Computerized Axial Tomography, Upper Extremity; With Contrast Material(S)  | \$277.92   |
|   | Computerized Axial Tomography, Opper Extremity; Without Contrast Material, Followed By Contrast Material(S) And Further Sections   | \$333.40   |
| , 5202  | Computed Tomographic Angiography, Upper Extremity, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image  | ψ555.40  |
| 73206   | Postprocessing   | \$470.42   |
|   | Magnetic Resonance (Eg, Proton) Imaging, Upper Extremity, Other Than Joint; Without Contrast Material(S)   | \$452.69   |
|   | Magnetic Resonance (Eg, Proton) Imaging, Upper Extremity, Other Than Joint; With Contrast Material(S)  | \$341.68   |
|   | Magnetic Resonance (Eq. Proton) Imaging, Upper Extremity, Other Than Joint; Without Contrast Material(S), Followed By Contrast Material(S)   | *  |
| 73220   | And Further Sequences  | \$483.41   |
| 73221   | Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; Without Contrast Material(S)  | \$228.00   |
| 73222   | Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; With Contrast Material(S)   | \$359.67   |
|   | Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Upper Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And  |  |
| 73223   | Further Sequences  | \$445.07   |
|   | Magnetic Resonance Angiography, Upper Extremity, With Or Without Contrast Material(S)  | \$389.35   |
| 73501   | X-Ray Of Hip With Pelvis, 1 View   | \$32.51  |
|   | X-Ray Of Hip With Pelvis, 2-3 Views  | \$45.09  |
|   | X-Ray Of Hip With Pelvis, Minimum Of 4 Views   | \$56.25  |
|   | X-Ray Of Both Hips With Pelvis, 2 Views  | \$43.51  |
|   | X-Ray Of Both Hips With Pelvis, 3-4 Views  | \$53.10  |
|   | X-Ray Of Both Hips With Pelvis, Minimum Of 5 Views   | \$61.73  |
|   | Radiologic Examination, Hip, Arthrography, Radiological Supervision And Interpretation   | \$105.97   |
|   | X-Ray Of Femur, 1 View   | \$30.18  |
|   | X-Ray Of Femur, Minimum 2 Views  | \$35.26  |
|   | X-Ray Of Knee, 1 Or 2 Views X-Ray Of Knee, 3 Views   | \$32.82  |
|   |  | \$35.92  |
|   | X-Ray Of Knee, 4 Or More Views X-Ray Of Both Knees, Standing, Front To Back View   | \$40.66  |
|   | Radiologic Examination, Knee, Arthrography, Radiological Supervision And Interpretation  | \$31.58<br>\$144.47  |
|   | X-Ray Of Lower Leg, 2 Views  | \$32.52  |
|   | Radiologic Examination Lower Extremity, Infant, Minimum Of Two Views   | \$30.83  |
|   | X-Ray Of Ankle, 2 Views  | \$30.43  |
|   | X-Ray Of Ankle, Minimum Of 3 Views   | \$32.94  |
|   | Radiologic Examination, Ankle, Arthrography, Radiological Supervision And Interpretation   | \$117.97   |
|   | X-Ray Of Foot, 2 Views   | \$30.43  |
|   | X-Ray Of Foot, Minimum Of 3 Views  | \$32.94  |
|   | X-Ray Of Heel, Minimum Of 2 Views  | \$29.61  |
|   | X-Ray Of Toes, Minimum Of 2 Views  | \$25.36  |
|   | Computed Tomography, Lower Extremity; Without Contrast Material  | \$144.28   |
|   | Computerized Axial Tomography, Lower Extremity; With Contrast Material(S)  | \$186.80   |
|   | Computerized Axial Tomography, Lower Extremity; Without Contrast Material, Followed By Contrast Material(S) And Further Sections   | \$218.79   |
|   | Computed Tomographic Angiography, Lower Extremity, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image  |  |
|   | Postprocessing   | \$475.78   |
|   | Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint; Without Contrast Material(S)  | \$254.04   |
| 73719   | Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint; With Contrast Material(S)   | \$298.99   |
|   | Magnetic Resonance (Eg, Proton) Imaging, Lower Extremity Other Than Joint; Without Contrast Material(S), Followed By Contrast Material(S)  |  |
|   |  |  |
|   | And Further Sequences  | \$384.75   |
| 73721   | And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material  | \$227.64   |
| 73721   | And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S)  |  |
| 73721<br>73722  | And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And   | \$227.64<br>\$360.39   |
| 73721<br>73722<br>73723                                     | And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences   | \$227.64<br>\$360.39<br>\$443.61                                   |
| 73721<br>73722<br>73723<br>73725                            | And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast Material(S)  | \$227.64<br>\$360.39<br>\$443.61<br>\$380.27                       |
| 73721<br>73722<br>73723<br>73725<br>74018                   | And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast Material(S)  X-Ray Of Abdomen, 1 View                            | \$227.64<br>\$360.39<br>\$443.61<br>\$380.27<br>\$32.99            |
| 73721<br>73722<br>73723<br>73725<br>74018<br>74019          | And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast Material(S)  X-Ray Of Abdomen, 1 View  X-Ray Of Abdomen, 2 Views | \$227.64<br>\$360.39<br>\$443.61<br>\$380.27<br>\$32.99<br>\$35.30 |
| 73721<br>73722<br>73723<br>73725<br>74018<br>74019<br>74021 | And Further Sequences  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; With Contrast Material(S)  Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences  Magnetic Resonance Angiography, Lower Extremity, With Or Without Contrast Material(S)  X-Ray Of Abdomen, 1 View                            | \$227.64<br>\$360.39<br>\$443.61<br>\$380.27<br>\$32.99            |

| 7.160 Computerted Anal Tomography, Aborean With Contrast Material (S) And Further Sections S449 Computed Tomographic Applications And Perkey, Will Contrast Material (S) And Further Sections And Prography Aborean With Contrast Material (S), Including Nanocomes Images, I Performed, And Image Performed, And Image Performed, And Image Performed, And Image Performed Performance Performed Performance Perf  |        | Description   | Fee                                   |
|---|--------|---|---------------------------------------|
| SAME   Computed Tomographic Applography, Abdorners Without Contrast Misserials (S), noted private Sections   SAME   Computed Tomographic Applography, Abdorners With Contrast Misserials (S), including Nancontrast Intages, it Performed, And Image   SAME   Performed   Pe  |        |   | \$152.53                              |
| Computed Tomographic Angiography, Adomen, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image  Computed Tomographic Angiography, Adomen, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image  Computed Tomography, Adomen And Palvis, Without Contrast Material  S19  Art 17 Computed Tomography, Adomen And Palvis, Without Contrast Material  Computed Tomography, Adomen And Palvis, Without Contrast Material  Computed Tomography, Adomen And Palvis, Without Contrast Material (S)  Computed Tomography, Adomen And Palvis, Without Contrast Material (S)  And Magnetic Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material (S)  And Magnetic Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  And Magnetic Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  Angeric Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  Angeric Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  Angeric Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  Angeric Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  Angeric Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  Angeric Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  Angeric Resonance (Sp. Palvis) Images, Adomen. Without Contrast Material(S)  Angeric Resonance (Sp. Palvis) Images, Adomen. Angeric Resonance Angerical Sp. Palvis Angerical Sp. Palvis Sp. Adomen. Angerical   |        |   | \$369.66                              |
| Auto-   Compact Diseasopsing Angiography, Abdomen, With Contrast Material(S), Including Nancornast Images, if Performed, And Image   Auto-   Compact Diseasopsing, Addomen And Peaks, Without Contrast Material   Support   | 74170  |   | \$446.91                              |
| Computed Tomographic Angolography, Abdomen And Pexis, Without Contrast Material(S) Including Noncontrast Images. If Performed, And Image 3477 1716 Computed Tomography, Abdomen And Pexis, Without Contrast Material 350 1717 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1717 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1718 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1718 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1718 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1718 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1718 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1718 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1719 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1719 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1719 Computed Tomography, Abdomen And Pexis, Without Contrast Material(S) 1719 Computed Tomography, Abdomen And Pexis Material(S) 1719 Computed Tomography Contrast Material(S) 1719 Contrast Material(S) 1719 Contrast Material(S) 1719 Contrast Mater  | 7/17/  |   | ¢420.02                               |
| 74176   Composed Tomography, Abdomen And Pelvis; Without Commiss Material 741717   Composed Tomography, Abdomen And Pelvis; With Contrast Material 741717   Composed Tomography, Abdomen And Pelvis; With Contrast Material 741717   Composed Tomography, Abdomen And Pelvis; With Contrast Material 741717   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 74181   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 7419   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Without Contrast Material(S) 7429   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Magnetic Resonance (Eg. Proton) 7429   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Magnetic Resonance (Eg. Proton) 7429   Magnetic Resonance (Eg. Proton) imaging, Abdomen; Magnetic Resonance (Eg. Proton) 7429   Magnetic Resonance (Eg. Proton) Despote Original Magnetic Resonance (Eg. Proton) 7429   Magnetic Resonance (Eg. Proton) Despote Original Magnetic Resonance (Eg. Proton) 7429   | 74174  |   | <b>Ф429.93</b>                        |
| 7.1712 Computed Tomography, Abdomen And Pelaxis, Without Contrate Material In One O' Both Body Regions, Followed By Contrast Material(S) And Computed Tomography, Abdomen And Pelaxis, With Contrast Material In One O' Both Body Regions, Followed By Contrast Material(S) And Contrast Material(S) And Contrast Material(S) And Contrast Material(S) And Pelaxis Material In One O' Both Body Regions, Followed By Contrast Material(S) And Pelaxis Material(S) Follows (S) And Pelaxis Material(S) Follows (S) And Pelaxis Magnetic Resonance (Eg. Proton) Imaging, Abcoment, With Contrast Material(S) Followed By With Contrast Material(S) And Further Science (S) And Pelaxis Magnetic Resonance (Eg. Proton) Imaging, Abcoment, With Contrast Material(S) Followed By With Contrast Material(S) And Further Science (S) And Pelaxis Magnetic Resonance (Eg. Proton) Imaging, Abcoment, Without Contrast Material(S) Followed By With Contrast Material(S) And Further Science (S) And Pelaxis Magnetic Resonance Anglography, Abcoment, With Or Without Contrast Material(S) And Pelaxis Magnetic Resonance Anglography, Abcoment, With Or Without Contrast Material(S) Followed By With Contrast Material(S) And Further Science (S) And Pelaxis Magnetic Resonance Anglography, Abcoment With Order Magnetic Resonance Anglography, Abcoment Magnetic Resonance Anglography, Abcoment Magnetic Resonance Anglography, Abcoment Magnetic Resonance Anglography Abcoment Magnetic Resonance Anglography Abcoment Magnetic Resonance Anglography Andlography Andlography Andlography Anglography Anglograph  | 74175  |   | \$475.17                              |
| 74177 Computed Tromography, Automar And Pelves, William Contraits Materials In One O' Both Body Regions, Followed By Contrated Material(S) And 74178 [Further Sections in One O' Both Body Regions (Sections in O') Both Body Regions (Sections   |        | i v   | \$190.87                              |
| Computed Tomography, Autoriment And Peksis, Wilmoud Contrast Material in One Of Bath Body Regions, Followed By Contrast Material(S) And 17415 Platther Section in One OF Bath Body Regions Section 17415 Magnetic Resonance (Eg. Protoc) Imaging, Addoment, Wilmoud Contrast Material(S) 5324 Platt Magnetic Resonance (Eg. Protoc) Imaging, Addoment, Wilmoud Contrast Material(S) 5324 Platt Magnetic Resonance (Eg. Protoc) Imaging, Addoment, Wilmoud Contrast Material(S) 5324 Platt Magnetic Resonance (Eg. Protoc) Imaging, Addoment, Wilmoud Contrast Material(S) 5324 Platt Magnetic Resonance Regional Platt Magnetic Resonance Regional Platt Magnetic Resonance Regional Platt Magnetic Resonance Angeography, Addoment, Wilmoud Contrast Material(S) And Further Science (Eg. Protoc) Imaging, Addoment, Wilmoud Contrast Material(S) And Imaging Resonance Regional Platt Magnetic Resonance Regional Platt Magnetic Resonance Regional Platt Magnetic Resonance Regional Platt Resonance Reg  |        |   | \$301.19                              |
| Yaste  Mappretic Resonance (Eg. Potton) Imaging, Authories (Win Contrast Material(S)   \$345  |        |   | *                                     |
| 74161 Magnetic Resonance (E., Proton) Imaging, Abdormer, Wehn Contrast Material(S), Followed By With Contrast Material(S) And Futher 74161 Sequences 74161 Seq  |        |   | \$381.77                              |
| Magnetic Resonance (Eg. Proton) Imaging, Abdorneri, Without Contrast Material(S). Followed By With Contrast Material(S) And Further 74:1818 Sequences Analysis (Magnetic Resonance Angiography, Abdorner, With Or Without Contrast Material(S) \$352 74:182 Perintengengm IEg, Alter Impeted OA of the Contrast, Readological Supervision And Interpretation \$352 74:292 (Park) Of Votor Box And/OT Ecochapas in NeoX-With Contrast \$352 74:292 (Park) Of Votor Box And/OT Ecochapas in NeoX-With Contrast \$352 74:292 (Park) Of Economics (Park) Of Votor Box And/OT Ecochapas in NeoX-With Contrast \$352 74:292 (Park) Of Economics (Park) Of Park (Park) Of Park) Of Park (Park) Of Park (Park) Of Park) Of Park (Park) Of Park (Park) Of Park) Of Park) Of Park (Park) Of Park) Of Park) Of Park (Park) Of Park) Of Park) Of Park) Of Park) Of Park (Park) Of Park) O   |        |   | \$221.33                              |
| 1818 Sequences 1821 Sequences 1822 Sequences 1822 Art Sequences 1823 Sequences 1824 Sequences 1824 Sequences 1825 Sequences 1825 Sequences 1826 Sequences 18  | 74182  | Magnetic Resonance (Eg, Proton) Imaging, Abdomen; With Contrast Material(S)   | \$345.14                              |
| Magnetic Resonance Anglography, Abdomen, Will Of Without Contrast Material(S)   |        |   |                                       |
| 74190   Perignorgam (Eg., After Injection Of Air O' Contrast), Radiological Supervision And Interpretation   \$369   74220   C-Ray O' C Esophagus With Single Contrast   \$173   74220   C-Ray O' C Esophagus With Single Contrast   \$173   74220   Perignorgam (Eg., Sephagus With Single Contrast   \$173   74220   Perignorgam (Eg., Sephagus With Single Contrast   \$174   74220   Removal O' Foreign Body) Esphagus With Deuble Contrast   \$174   74220   Removal O' Foreign Body) Esphagus With Single Contrast   \$174   74220   Removal O' Foreign Body) Esphagus With Use O' Balbon Catheter, Radiological Supervision And Interpretation   \$174   74220   Removal O' Logoe Dispassive Tract With Single Contrast   \$174   74220   Removal O' Logoe Dispassive Tract With Single Contrast   \$174   74230   Removal O' Logoe Dispassive Tract With Single Contrast   \$174   74250   Removal O' Logoe Dispassive Tract With Single Contrast And Mulpile Serial Films   \$174   74251   Removal O' Logoe Dispassive Tract With Single Contrast And Mulpile Serial Films   \$175   74261   Removal O' Logoe Dispassive Tract With Dispassive Contrast And Mulpile Serial Films   \$175   74261   Removal O' Logoe Dispassive Tract With Dispassive Contrast And Mulpile Serial Films   \$175   74261   Removal O' Logoe Dispassive Tract With Dispassive Logoe Serial Films   \$175   74261   Removal O' Logoe Dispassive Tract With Dispassive Logoe Serial Films   \$175   74261   Removal O' Logoe Dispassive Tract With Dispassive Logoe Serial Films   \$175   74262   Removal O' Logoe Dispassive Tract With Dispassive Logoe Serial Films   \$175   74262   Removal O' Logoe Dispassive Tract With Dispassive Logoe Serial Films   \$175   74270   Removal O' Logoe Dispassive Area With Dispassive Logoe Serial Films   \$175   74280   Removal O' Logoe Dispassive Area With Dispassive Logoe Serial Films   \$175   74290   Removal O' Logoe Dispassive Area With Dispassive Logoe Serial Films   \$175   74290   Removal Contrast Serial Films   \$175   74290   Removal Contrast Serial Films   \$175   74290   Removal Contr   |        |   | \$385.48                              |
| 174210   Ray Of Voice Box And/OF Esophagus with Spingle Contrast   \$787  |        |   | \$382.44                              |
| 7/222   Kary Of Espohagus With Single Controls         \$131           7/223   Kary Of Espohagus With Double Controls         \$131           7/233   Removal Of Proeing Body/Sp. (Sepohagus) With Use Of Balboon Catheter, Radiological Supervision And Interpretation         \$192           7/235   Removal Of Proeing Body/Sp. (Sepohagus) With Use Of Balboon Catheter, Radiological Supervision And Interpretation         \$191           7/240   Carbon Of Proeing Body/Sp. (Sepohagus) With Use Of Balboon Catheter, Radiological Supervision And Interpretation         \$191           7/240   Carbon Of Proeing Body/Sp. (Sepohagus) With Use Of Balboon Catheter, Radiological Supervision And Interpretation         \$191           7/240   Carbon Through X-Ray Of Upper Digester Tract With Multiple Serial Films         \$365           7/240   Carbon Through X-Ray Of Upper Digester Tract With Multiple Serial Films         \$365           7/240   Carbon Through X-Ray Of Upper Digester Tract With Multiple Serial Films         \$365           7/250   Carbon Tract With Multiple Serial Films         \$365           7/250   Carbon Tract Malerial Serial   |        |   | \$63.77                               |
| 7/220 (Imaging For Evaluation OF Savolamy Discoverage (Processing Control of Savolament (Processing BodylS). Esophageal With Use Of Balkon Catheter, Radiological Supervision And Interpretation         \$32           7/220 (Imaging For Evaluation OF Savolament OF Savolament (Processing BodylS). Esophageal With Use Of Balkon Catheter, Radiological Supervision And Interpretation         \$161           7/240 (Rang Of Upper Digestive Tract With Disploy Contrast And Multiple Serial Films         \$36           7/250 (Rang Of Upper Digestive Tract With Single Contrast And Multiple Serial Films         \$36           7/250 (Rang Of Upper Digestive Tract With Disploy Exercise Transition)         \$37           7/250 (Computed Tomographic CO) Colonography, Dispressite, Including Image Prostprocessing, With Contrast Material (S) Including Non-Contrast         \$37           7/250 (Computed Tomographic CO) Colonography, Dispressite, Including Image Postprocessing With Contrast Material (S) Including Non-Contrast         \$45           7/250 (Rang Of Large Bowel With Air Contrast         \$45           7/250 (Rang Of Colonography) And Contrast         \$15           7/250 (Rang Of Colonography) And Colonography And Colonography A   |        | , i i   | \$96.39                               |
| 7423D         Imaging For Evaluation Of Swallowing Function         \$124           7423E         Removed OF Foreigh Bodylds, Espohageau Wim Use Of Balloon Catheter, Radiological Supervision And Interpretation         \$16           7424D         KRay Of Ubper Digestive Tract With Single Contrast         \$17           7424B         KRay Of Ubper Digestive Tract With Double Contrast And Multiple Serial Films         \$58           7425D         KRay Of Upper Digestive Tract With Double Contrast And Multiple Serial Films         \$78           74261         Computed Tomographic CGI Colonography, Diagnostic, Including Image Postprocessing, Without Contrast Material SJ Including Non-Contrast And Multiple Serial Films         \$73           74261         Computed Tomographic CGI Colonography, Diagnostic, Including Image Postprocessing, With Contrast Material SJ Including Non-Contrast Material Computed Tomographic CGI Colonography, Biognostic, Including Image Postprocessing         With Contrast Material SJ Including Non-Contrast Material SJ Including Non-Contrast Material Computed Tomography and Colonography, Screening, Including Image Postprocessing         Price By Remove Material SJ Including Non-Contrast Material SJ Including No  |        |   | \$78.60                               |
| 74235 Removal Of Foreign Body(S), Esophageal, With Use Of Balkon Carbeter, Radiological Supervision And Interpretation         \$154           74240 N.Ray Of Upper Digestive Tract Will Double Contrast         \$174           74248 Follow-Trundy N. Ray Of Upper Digestive Tract Will Double Contrast         \$88           74248 Follow-Trundy N. Ray Of Upper Digestive Tract Will Single Contrast And Multiple Serial Films         \$88           74250 N. Ray Of Upper Digestive Tract Will Single Contrast And Multiple Serial Films         \$87           74261 N. Ray Of Upper Digestive Tract Will Single Contrast And Multiple Serial Films         \$77           74261 N. Ray Of Upper Digestive Tract Will Single Contrast And Multiple Serial Films         \$77           74261 N. Ray Of Upper Digestive Tract Will Single Contrast And Multiple Serial Films         \$78           74262 N. Ray Of Large Board Will And Tract And Multiple Serial Films         \$45           74263 Computed Tomographic (CI) Colonography Screening, Including Image Postprocessing Will Contrast Material(S) Including Non-Contrast         \$45           74270 N. Ray Of Large Bowel With And Contrast         \$15           74280 N. Ray Of Large Bowel With A Contrast         \$15           7429 Diagnong Of Colon Using Enrana         \$15           7429 Diagnong Of Colon Using Enrana         \$15           7429 Diagnong Of Colon Using Enrana         \$15           7420 Diagnong Of Colon Using Enrana         \$15   |        | , , ,   | \$113.91                              |
| 174240   K-Ray Of Upper Digestive Tract Will Single Contrast   \$104   24246   K-Ray Of Upper Digestive Tract Will Double Contrast   \$113   74248   K-Ray Of Upper Digestive Tract Will Double Contrast   \$135   74250   K-Ray Of Upper Digestive Tract Will Double Contrast And Multiple Serial Films   \$88   74251   K-Ray Of Upper Digestive Tract Will Double Contrast And Multiple Serial Films   \$73   74261   Computed Tomographic (Ci) Colonography, Diagnosis, Including Image Postprocessing, Will Contrast Material   \$335   Computed Tomographic (Ci) Colonography, Diagnosis, Including Image Postprocessing, Will Contrast Material   \$355   Computed Tomographic (Ci) Colonography, Diagnosis, Including Image Postprocessing, Will Contrast Material   \$365   Computed Tomographic (Ci) Colonography, Diagnosis, Including Image Postprocessing   Will Contrast   \$466   Computed Tomographic (Ci) Colonography, Screening, Including Image Postprocessing   Will Contrast   \$466   Computed Tomographic (Ci) Colonography, Screening, Including Image Postprocessing   \$466   Colonography And Processing   \$466   Colonography And Processing   \$466   Colonography And Processor   \$466   Colonography And  |        |   | \$92.75                               |
| 17424B   Follow-Through X-Ray of Upper Digestive Tract With Multiple Serial Films   \$88   174250   K-Ray Of Upper Digestive Tract With Single Contrast And Multiple Serial Films   \$88   174250   K-Ray Of Upper Digestive Tract With Single Contrast And Multiple Serial Films   \$73   174251   K-Ray Of Upper Digestive Tract With Single Contrast And Multiple Serial Films   \$73   174251   K-Ray Of Upper Digestive Tract With Single Contrast And Multiple Serial Films   \$73   174261   Computed Tomographic (Ci) Colonography, Diagnoste, Including Image Postprocessing, With Contrast Material (S) Including Non-Contrast And Multiple Serial Films   \$74   174262   Computed Tomographic (Ci) Colonography, Diagnoste, Including Image Postprocessing With Contrast Material (S) Including Non-Contrast And Multiple Serial Films   \$74   174263   Computed Tomographic (Ci) Colonography, Screening, Including Image Postprocessing With Contrast Material (S) Including Image Postprocessing With Contrast   \$74   174260   K-Ray Of Large Bowell With Art Contrast   \$74   174270   K-Ray Of Large Bowell With Art Contrast   \$74   174280   Managro (G) Galibladder With Contrast   \$74   174290   Managro (G) Galibladder With Contrast   \$74   17420  |        |   | · · · · · · · · · · · · · · · · · · · |
| 74246         Floorw-Through X-Ray Of Upper Depestive Tract With Sugles Contrast And Multiple Serial Films         \$89           74250         K-Ray Of Upper Depestive Tract With Double Contrast And Multiple Serial Films         \$73           74261         Computed Tomographic (CI) Colonography, Deports, Including Image Postprocessing; Without Contrast Material (S) Including Non-Contrast Table Tomographic (CI) Colonography, Deports, Including Image Postprocessing; With Contrast Material (S) Including Non-Contrast Table Tomographic (CI) Colonography, Deports, Including Image Postprocessing         \$456           74282         Images, IP Performed         \$456           74282         Images, IP Performed         \$456           74282         Images, IP Performed         \$456           74283         Images, IP Performed         \$456           74280         Images, IP Performed         \$456           74280         Images, IP Performed         \$162           74280         Images, IP Performed         \$162           74280         Images, IP Performed         \$162           74281         Images, IP Performed         \$162           74282         Images, IP Performed         \$152           74283         Images, IP Performed         \$152           74283         Images, IP Performed         \$152           74283         Images, IP Performed  |        | 7 11 0  | \$104.79<br>\$113.16                  |
| 7425) KRay Of Upper Digestive Tract With Duble Centrals And Multiple Serial Films 7426) KRay Of Upper Digestive Tract With Duble Centrals And Multiple Serial Films 7427 74281 Computed Tomographic (Cit) Colonography, Diagnostic, Including Image Postprocessing, Without Contrast Material 3335 74261 Computed Tomographic (Cit) Colonography, Diagnostic, Including Image Postprocessing, Without Contrast Material(S) Including Non-Contrast 74262 Computed Tomographic (Cit) Colonography, Diagnostic, Including Image Postprocessing With Contrast Material(S) Including Non-Contrast 74263 Computed Tomographic (Cit) Colonography, Diagnostic, Including Image Postprocessing 74270 KRay Of Large Bowel With Contrast 74280 KRay Of Large Bowel With Contrast 74280 KRay Of Large Bowel With Contrast 74290 Imaging Of Colono Using Enema 74290 Imaging Of Colono Using Enema 7430 Cholangography And/Or Pancreatography, Introoperative, Radiological Supervision And Interpretation 7430 Imaging Of Colono Using Enema 7430 Imaging Of Using Pract Using Industry Enemant Dublation Of Enemant Dublation Of The Enemant Dublation Of Enemant Dublation   |        |   | \$113.16<br>\$86.23                   |
| 74291         Kräny Of Upper Digestive Tract With Double Contrast And Multiple Serial Films         \$73           74281         Computed Tomographic (City Colonography, Diagnostic, Including Image Postprocessing; With Contrast Material)         \$35           4222         Images, IP Performed         \$456           74230         Computed Tomographic (City Colonography, Screening, Including Image Postprocessing)         Price By Reg           74270         KRay Of Large Bowell With Contrast         \$115           74281         Computed Tomographic (City Colonography, Screening, Including Image Postprocessing)         \$15           74290         KRay Of Large Bowell With Contrast         \$15           74281         Imaging Of Colon Using Enema         \$182           74392         Imaging Of Colon Using Enema         \$185           74390         Cholangiography And/Or Pancreatography; Intraoperative, Radiological Supervision And Interpretation         \$22           74300         Cholangiography And/Or Pancreatography; Addition of Set Intraoperative, Radiological Supervision And Interpretation         \$12           74328         Imaging Or Conference Training Procedure)         \$12           74329         Endoscopic Cathetierization Of The Billary Ductal System, Radiological Supervision And Interpretation         \$152           74329         Endoscopic Cathetierization Of The Billary Ductal System, Radiological Systemion An  |        | 0 7 11 0  | \$89.39                               |
| Computed Tomographic (Ci) Colonography, Diagnostic, Including Image Postprocessing, With Contrast Material (S) Including Non-Contrast Acta Computed Tomographic (Ci) Colonography, Diagnostic, Including Image Postprocessing: With Contrast Material (S) Including Non-Contrast 74283 Computed Tomographic (Ci) Colonography, Screening, Including Image Postprocessing Processing Pr  |        |   | \$73.10                               |
| Computed Tomographic (CI) Colonography, Diagnostic, Including Image Postprocessing: With Contrast Material(S) Including Non-Contrast 74202 Images, I Performed PAPATO X-Ray Ol Large Bowle With Contrast \$1515 (2007)   174200 X-Ray Ol Large Bowle With Contrast \$1516 (2007)   174201 X-Ray Ol Large Bowle With Contrast \$1516 (2007)   174201 May Ol Large Bowle With Contrast \$1516 (2007)   174201 May Ol Large Bowle With Contrast \$1516 (2007)   174203 Imaging Of Colon Using Enema \$1516 (2007)   174201 May Ol Colon Using Enema \$1516 (2007)   174201 May Old Diagnography And/Or Pancrestography; Intraoperative, Radiological Supervision And Interpretation \$252 (2007)   174201 Addition to Code For Primary Procedure \$152 (2007)   174301 Addition to Code For Primary Procedure \$152 (2007)   174302 Floridoscopic Catheterization Of The Billary Ductal System, Radiological Supervision And Interpretation \$152 (2007)   174303 Floridoscopic Catheterization Of The Billary And Pancreatic Ductal System, Radiological Supervision And Interpretation \$152 (2007)   174304 Radiological Supervision Of The Pancreatic Ductal System, Radiological Supervision And Interpretation \$152 (2007)   174305 Radiological Supervision Of The Billary And Pancreatic Ductal Systems, Radiological Supervision And Interpretation \$152 (2007)   174306 Radiological Supervision And Interpretation \$152 (2007)   174307 Radiological Supervision And Interpretation \$152 (2007)   174308 Percutaneous Placement Of Enterceynis Tube, Radiological Supervision And Interpretation \$152 (2007)   174309 Percutaneous Transhepate Dilation Of Billary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation \$152 (2007)   174400 Radiological Supervision And Interpretation Of Stricture With Incident With Inc  |        |   |                                       |
| 74828 [Janages, II Performed         \$456           74283 [Computed Tomography (CI) Colonography, Screening, Including Image Postprocessing         Price By Ref.           74270 [X-Ray Of Large Bowel With Contrast         \$115           74280 [X-Ray Of Large Bowel With Contrast         \$156           74280 [X-Ray Of Large Bowel With Air Contrast         \$156           74280 [X-Ray Of Clarge Bowel With Contrast         \$158           74290 [Inageng Of Colon Using Enema         \$158           7420 [Inageng Of Gallbalder With Contrast         \$188           7430 [Orlolanggraphy And/OF Pancreatography; Intraoperative, Radiological Supervision And Interpretation (List Separately In Addition In Code For Primary Toeldurie)         \$22           7430 [Addition In Code For Primary Toeldurie)         \$151           7432 [Addition In Code For Primary Toeldurie)         \$152           7434 [Addition In Code For Primary Toeldurie)         \$152           7434 [Addition In Code F  | 74201  |   | ψ000.10                               |
| 7420 K.Ray O'L Large Bowel With Contrast 5157 7420 K.Ray O'L Large Bowel With Contrast 5157 7420 K.Ray O'L Large Bowel With Contrast 5156 7420 Ilmaging Of Colon Using Enoma 5156 7420 Cholengography And/Or Pancreatography; Intraoperative, Radiological Supervision And Interpretation (List Separately In 7430) Cholengography And/Or Pancreatography; Additional Set Intraoperative, Radiological Supervision And Interpretation (List Separately In 7430) Intraoperative of Colon Co  | 74262  |   | \$456.91                              |
| 1420  X-Ray OL Large Bowel With Contrast   5162   |        |   | Price By Report                       |
| 14293   Ray Of Loring Bowel With Air Contrast   5162   1428   Imaging Of Colon Using Enema   5165   1428   Imaging Of Colon Using Enema   5165   1428   Imaging Of Colon Using Enema   5165   1428   1428   Imaging Of Colon Using Enema   5165   1429   1428   1429   142  |        |   | \$115.88                              |
| 74290 [Inaging Of Gallbalder With Contrast]         \$86           74300 [Cholangiography And/Or Pancreatography, Intraoperative, Radiological Supervision And Interpretation (List Separately in And/Or Pancreatography, Additional Set Intraoperative, Radiological Supervision And Interpretation (List Separately in And/Or Pancreatography, Additional Set Intraoperative, Radiological Supervision And Interpretation (List Separately in State Pancy Proceeding)           74320 [Endoscopic Catheterization Of The Billary And State Pancy Proceeding (Primary Proceeding)         \$152           74320 [Contine of Endoscopic Catheterization Of The Pancreatic Ductal Systems, Radiological Supervision And Interpretation (Primary Proceeding)         \$152           74330 [Combined Endoscopic Catheterization Of The Billary And Pancreatic Ductal Systems, Radiological Supervision And Interpretation (Primary Primary Primar   | 74280  | X-Ray Of Large Bowel With Air Contrast  | \$162.31                              |
| 74300 Cholangiography And/Or Pancreatography, Intraoperative, Radiological Supervision And Interpretation (List Separately in Addition To Code For Primary Procedure) \$122 Cholangiography And/Or Pancreatography, Additional Set Intraoperative, Radiological Supervision And Interpretation (List Separately in Addition To Code For Primary Procedure) \$152 Endoscopic Catheterization Of The Biliary Ductal System, Radiological Supervision And Interpretation \$152 74328 Endoscopic Catheterization Of The Pancreatic Ductal System, Radiological Supervision And Interpretation \$152 74340 Radiological Supervision And Interpretation Of The Pancreatic Ductal Systems, Radiological Supervision And Interpretation \$152 74340 Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure \$157 74340 Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure \$157 74340 Radiological Supervision And Interpretation \$1543 74340 Radiological Supervision And Interpretation Placement Of States and Placement Of States a  | 74283  | Imaging Of Colon Using Enema  | \$185.58                              |
| Cholangiography And/Or Pancreatography; Additional Set Intraoperative, Radiological Supervision And Interpretation (List Separately in 14301 Addition To Code For Primary Procedure)  \$12 74328 Endoscopic Catheterization Of The Biliary Ductal System, Radiological Supervision And Interpretation  \$152 74329 Endoscopic Catheterization Of The Pancreatic Ductal System, Radiological Supervision And Interpretation  \$152 74340 Radiological Supervision And Interpretation Of The Biliary And Pancreatic Ductal Systems, Radiological Supervision And Interpretation  \$152 74340 Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure  \$153 74350 Intraluminal Diation Of Strictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation  \$143 74363 Percutaneous Transhepatic Diation Of Biliary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation  \$143 74363 Percutaneous Transhepatic Diation Of Biliary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation  \$267 74400 Imaging Of Urinary Tract Using Infusion Technique  \$152 74401 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming  \$153 74420 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming  \$153 74420 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming  \$154 74420 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming  \$154 74420 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming  \$155 74420 Imaging Of Urinary Tract  \$27 74420 Imaging Of Urinary Tract  \$28 74420 Imaging Of Urinary Tract  \$38 74420 Imaging Of Urinary Tract  \$48 74420  | 74290  | Imaging Of Gallbladder With Contrast  | \$86.24                               |
| 74301 Addition To Code For Primary Procedure)         \$12           74328 Endoscopic Catheterization Of The Billary Ductal System, Radiological Supervision And Interpretation         \$152           74329 Endoscopic Catheterization Of The Pancreatic Ductal System, Radiological Supervision And Interpretation         \$152           74320 Combined Endoscopic Catheterization Of The Billary And Pancreatic Ductal Systems, Radiological Supervision And Interpretation         \$152           74340 Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure         \$152           74340 Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure         \$137           74350 Intraluminal Dilation Of Stictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation         \$137           74400 Imaging Of Urinary Tract With Injection Of Billary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation         \$267           74400 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming         \$133           74415 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming         \$135           74425 Radiological Supervision And Interpretation Of X-Ray Imaging Of Urinary Tract         \$12           74430 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming         \$135           74430 Imaging Of Urinary Tract Using Infusion And Interpretation X-Ray Of Urinary Bladder And Interpretation         \$1   | 74300  | Cholangiography And/Or Pancreatography; Intraoperative, Radiological Supervision And Interpretation   | \$22.23                               |
| 74328 Endoscopic Catheterization Of The Biliary Ductal System, Radiological Supervision And Interpretation         \$152           74329 Endoscopic Catheterization Of The Pancreatic Ductal System, Radiological Supervision And Interpretation         \$152           74330 Combined Endoscopic Catheterization Of The Biliary And Pancreatic Ductal Systems, Radiological Supervision And Interpretation         \$152           74330 Combined Endoscopic Catheterization Of Placement Of Long Small Bowel Tube Procedure         \$152           74355 Porcutaneous Placement Of Enterocysis Tube, Radiological Supervision And Interpretation         \$137           74363 Intraluminal Dilation Of Strictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation         \$143           74363 Percutaneous Transhepatic Dilation Of Biliary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation         \$267           74400 Imaging Of Urinary Tract With Injection Of Contrast Into A Vein         \$152           74415 Imaging Of Urinary Tract Using Infusion Technique         \$133           74420 Imaging Of Urinary Tract Using Infusion Technique         \$133           74420 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming         \$152           74420 Imaging Of Urinary Tract         \$82           74420 Imaging Of Urinary Tract         \$152           74430 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder, Minimum Of 3 Views         \$143 <tr< td=""><td></td><td>Cholangiography And/Or Pancreatography; Additional Set Intraoperative, Radiological Supervision And Interpretation (List Separately In</td><td></td></tr<>   |        | Cholangiography And/Or Pancreatography; Additional Set Intraoperative, Radiological Supervision And Interpretation (List Separately In        |                                       |
| 74329 Endoscopic Cartheterization Of The Pancreatic Ductal System, Radiological Supervision And Interpretation         \$152           74330 Combined Endoscopic Catheterization Of The Biliary And Pancreatic Ductal Systems, Radiological Supervision And Interpretation         \$152           74340 Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure         \$125           74340 Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure         \$127           74360 Intrauminal Diation Of Strictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation         \$143           74363 Percutaneous Transhepatic Dilation Of Billiary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation         \$102           74400 Imaging Of Urinary Tract With Injection Of Contrast Into A Vein         \$102           74410 Imaging Of Urinary Tract Using Infusion Technique         \$133           74415 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming         \$153           74425 Radiological Supervision And Interpretation Of X-Ray Imaging Of Urinary Tract         \$82           74425 Radiological Supervision And Interpretation Of X-Ray Imaging Of Urinary Tract         \$125           74440 Vascegraphy, Vesiculography, Certain Agrical Supervision And Interpretation         \$96           7445 Corpora Cavernosography, Radiological Supervision And Interpretation Or Sapport Agrical Supervision And Interpretation Or Sapport Agrical Supervision And In   |        | ·   | \$12.00                               |
| 7.4330 Combined Endoscopic Catheterization Of The Billiary And Pancreatic Ductal Systems, Radiological Supervision And Interpretation         \$125           7.4340 Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure         \$125           7.4355 Percutaneous Placement Of Enterochysis Tube, Radiological Supervision And Interpretation         \$137           7.4360 Intraluminal Dilation Of Strictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation         \$143           7.4360 Intraluminal Dilation Of Strictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation         \$267           7.4400 Imaging Of Urinary Tract With Injection Of Contrast Into A Vein         \$102           7.4410 Imaging Of Urinary Tract Using Influsion Technique         \$133           7.4420 Imaging Of Urinary Tract Using Influsion Technique With Kidney Section Filming         \$152           7.4420 Imaging Of Urinary Tract Using Influsion Technique With Kidney Section Filming         \$152           7.4420 Imaging Of Urinary Tract Using Influsion Technique With Kidney Section Filming         \$152           7.4420 Imaging Of Urinary Tract Using Influsion Technique With Kidney Section Filming         \$152           7.4420 Imaging Of Urinary Tract Using Influsion Technique With Kidney Section Filming         \$152           7.4420 Imaging Of Urinary Tract Using Influsion Technique With Kidney Section Filming         \$152           7.4430 Radiological Supervision And Interpretat   |        |   | \$152.11                              |
| 7.4306         Radiological Supervision And Interpretation Of Placement Of Long Small Bowel Tube Procedure         \$125           7.4355         Percutaneous Placement Of Enteroclysis Tube, Radiological Supervision And Interpretation         \$137           7.4360         Intraluminal Dilation Of Strictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation         \$137           7.4363         Percutaneous Transhepatic Dilation Of Billary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation         \$267           7.4400         Imaging Of Uninary Tract With Injection Of Contrast Into A Vein         \$139           7.4415         Imaging Of Uninary Tract Using Infusion Technique         \$139           7.4415         Imaging Of Uninary Tract         \$125           7.4425         Radiological Supervision And Interpretation Of X-Ray Imaging Of Uninary Tract         \$82           7.4425         Radiological Supervision And Interpretation X-Ray Of Uninary Bladder, Minimum Of 3 Views         \$43           7.4440         Vasography, Vesiculography, Or Radiological Supervision And Interpretation         \$86           7.4450         Radiological Supervision And Interpretation X-Ray Of Uninary Bladder And Urethra, Emptying         \$88           7.4450         Radiological Supervision And Interpretation X-Ray Of Uninary Bladder And Urethra, Emptying         \$88           7.4450         Radiological Super  |        |   | \$152.11                              |
| Fercutaneous Placement Of Enteroclysis Tube, Radiological Supervision And Interpretation   \$137  |        |   | \$152.11                              |
| Additional Dilation Of Strictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation  |        |   | \$125.01                              |
| Percutaneous Transhepatic Dilation Of Biliary Duct Stricture With Or Without Placement Of Stent, Radiological Supervision And Interpretation \$267 74400 Imaging Of Urinary Tract With Injection Of Contrast Into A Vein \$139 74415 Imaging Of Urinary Tract Using Infusion Technique \$139 74415 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming \$153 74420 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming \$153 744210 Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming \$153 744220 Imaging Of Urinary Tract Using Infusion Of X-Ray Imaging Of Urinary Tract \$82 744420 Imaging Of Urinary Tract Using Infusion Of X-Ray Imaging Of Urinary Tract \$125 74430 Radiological Supervision And Interpretation Of X-Ray Imaging Of Urinary Tract \$124 74430 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder, Minimum Of 3 Views \$43 74440 Vasography, Vesiculography, Or Epididymography, Radiological Supervision And Interpretation \$100 74455 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection \$70 74455 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying \$88 74470 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying \$88 744713 Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy \$463 74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy \$463 74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy \$145 74715 Perineogram (Eg., Vaginogram, For Sex Determination Or Extent Of Anomalies) \$70 74740 Hysterosalpingography, Radiological Supervision And Interpretation \$71 75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging \$386 74775 Perineogram (Eg., Vaginogram, For Sex Determination Or Extent Of Anomalies) \$71 75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  |        |   | \$137.39                              |
| Manging Of Urinary Tract With Injection Of Contrast Into A Vein   \$102   | 74360  | Intraluminal Dilation Of Strictures And/Or Obstructions (Eg. Esophagus), Radiological Supervision And Interpretation                          | \$143.14                              |
| Manging Of Urinary Tract With Injection Of Contrast Into A Vein   \$102   | 74262  | Parautanagus Transhanatis Dilation of Biliany Dust Stricture With Or Without Blacoment of Start, Padialogical Supposition, And Interpretation | ¢267.00                               |
| Imaging Of Urinary Tract Using Infusion Technique   \$139   |        |   |                                       |
| Table   Imaging Of Urinary Tract Using Infusion Technique With Kidney Section Filming   \$153   |        |   |                                       |
| Taylog   Imaging Of Urinary Tract   \$82   Radiological Supervision And Interpretation Of X-Ray Imaging Of Urinary Tract   \$125   Radiological Supervision And Interpretation X-Ray Of Urinary Bladder, Minimum Of 3 Views   \$43   \$4440   Vasography, Vesiculography, Or Epididymography, Radiological Supervision And Interpretation   \$96   \$44450   Corpora Cavernosography, Radiological Supervision And Interpretation   \$105   \$105   \$4450   Radiological Supervision And Interpretation   \$105   \$105   \$4450   Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection   \$70   \$74450   Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying   \$88   \$4470   Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying   \$88   \$4470   Radiological Supervision And Interpretation X-Ray Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)   \$175 |        |   | \$153.71                              |
| 74425 Radiological Supervision And Interpretation Of X-Ray Imaging Of Urinary Tract       \$125         74430 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder, Minimum Of 3 Views       \$43         74440 Vasography, Vesiculography, Or Epididymography, Radiological Supervision And Interpretation       \$105         74445 Corpora Cavernosography, Radiological Supervision And Interpretation       \$105         74450 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection       \$70         74455 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying       \$88         74470 Radiological Supervision And Interpretation X-Ray Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)       \$116         74712 Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy       \$463         74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy       \$202         74740 Hysterosalpingography, Radiological Supervision And Interpretation       \$70         74775 Perineogram (Eg., Vaginogram, For Sex Determination Or Extent Of Anomalies)       \$87         75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging       \$386         Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging       \$386         75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast M   |        | , , , , , ,   | \$82.50                               |
| Radiological Supervision And Interpretation X-Ray Of Urinary Bladder, Minimum Of 3 Views  \$43 74440 Vasography, Vesiculography, Or Epididymography, Radiological Supervision And Interpretation  \$56 74455 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection  \$70 74455 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection  \$70 74455 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying  \$88 74470 Radiological Supervision And Interpretation X-Ray Of Kidney Cyst, Lower Back Contrast Injection  \$75 74455 Radiological Supervision And Interpretation X-Ray Of Kidney Cyst, Lower Back Contrast Injection  \$76 74456 Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)  \$76 74456 Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)  \$77 74712 Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy  \$77 74740 Hysterosalpingography, Radiological Supervision And Interpretation  \$77 74740 Hysterosalpingography, Radiological Supervision And Interpretation  \$77 74741 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  \$78 74757 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies)  \$78 75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;  \$78 267 267 267 267 267 267 267 267 267 267  |        |   | \$125.07                              |
| 744440       Vasography, Vesiculography, Or Epididymography, Radiological Supervision And Interpretation       \$96         74445       Corpora Cavernosography, Radiological Supervision And Interpretation       \$105         74450       Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection       \$70         74455       Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying       \$88         74470       Radiological Supervision And Interpretation X-Ray Of Kidney Cyst, Lower Back Contrast Injection       \$75         74485       Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)       \$116         74712       Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy       \$463         74713       Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy       \$202         74740       Hysterosalpingography, Radiological Supervision And Interpretation       \$70         74742       Transcervical Catheterization Of Fallopian Tuche, Radiological Supervision And Interpretation       \$70         74775       Perineogram (Eg., Vaginogram, For Sex Determination Or Extent Of Anomalies)       \$87         75557       Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging       \$348         Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contra   |        |   | \$43.49                               |
| 74445 Corpora Cavernosography, Radiological Supervision And Interpretation \$105 74450 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection \$70 74455 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying \$88 8480 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying \$875 74470 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying \$75 74485 Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra) \$116 74712 Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy \$463 74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy \$202 Hysterosalpingography, Radiological Supervision And Interpretation \$770 74740 Hysterosalpingography, Radiological Supervision And Interpretation \$770 74741 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation \$145 74775 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies) \$87 75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging \$386 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences; Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences; With Stress Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences; With Stress Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences; With Stress Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And Further Sequences; With Stress Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S)  |        |   | \$96.37                               |
| Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Before And After Dye Injection  \$70 74455 Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying  \$88 74470 Radiological Supervision And Interpretation X-Ray Of Kidney Cyst, Lower Back Contrast Injection  \$75 74485 Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)  \$116 74712 Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy  \$463 74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy  \$4740 Hysterosalpingography, Radiological Supervision And Interpretation  \$74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  \$74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  \$75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;  \$318 75559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;  \$318 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  Further Sequences;  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  Further Sequences; With Stress Imaging  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  \$4418  Computed Tomography, Heart, With Contrast Material, With Quantitative Evaluation Of Coronary Calcium  Computed Tomography, Heart, With Contrast Material, With Quantitative Evaluation Of Coronary Calcium  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   |        |   | \$105.26                              |
| Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying  \$88 74470 Radiological Supervision And Interpretation X-Ray Of Kidney Cyst, Lower Back Contrast Injection  \$75 74485 Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)  \$116 74712 Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy  \$463 74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy  \$202 74740 Hysterosalpingography, Radiological Supervision And Interpretation  \$70 74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  \$145 74775 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies)  \$316 74776 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies)  \$317 75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;  \$318 75559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  \$386 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75561 Further Sequences;  \$418 75565 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75567 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75568 Further Sequences; With Stress Imaging  \$441 75565 Cardiac Magnetic Resonance Imaging For Worphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium  \$80 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Venous Structure And Morphology (Including 3D Image)  \$252 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Conge   |        |   | \$70.76                               |
| Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)  Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy  463  74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy  5202  74740 Hysterosalpingography, Radiological Supervision And Interpretation  570  74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  570  74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  5870  74775 Perineogram (Eg. Vaginogram, For Sex Determination Or Extent Of Anomalies)  5877  75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  5886  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  5886  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75561 Further Sequences; With Stress Imaging  5880  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75563 Further Sequences; With Stress Imaging  5890  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75565 Cardiac Magnetic Resonance Imaging For Worphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure)  5890  580  5870  5870  5871 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image)  75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structure And Morphology In The Setting Of Congenital Heart   | 74455  | Radiological Supervision And Interpretation X-Ray Of Urinary Bladder And Urethra, Emptying  | \$88.01                               |
| 74712 Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy  74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy  74740 Hysterosalpingography, Radiological Supervision And Interpretation  74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  74745 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies)  75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;  75559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75561 Further Sequences;  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75563 Further Sequences; With Stress Imaging  \$4418  75565 Cardiac Magnetic Resonance Imaging For Worphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75563 Further Sequences; With Stress Imaging  \$441  75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure)  \$52  75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Venous Structure And Morphology (Including 3D Image)  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  | 74470  | Radiological Supervision And Interpretation X-Ray Of Kidney Cyst, Lower Back Contrast Injection   | \$75.76                               |
| 74713 Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy  74740 Hysterosalpingography, Radiological Supervision And Interpretation  74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  74745 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies)  75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;  75559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75561 Further Sequences;  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75563 Further Sequences; With Stress Imaging  S441  75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure)  \$52  75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Venous Structure And Morphology (Including 3D Image  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  | 74485  | Radiological Supervision And Interpretation Of Dilation Of Urinary Ducts (Ureters) Or Bladder Canal (Urethra)                                 | \$116.43                              |
| 74740 Hysterosalpingography, Radiological Supervision And Interpretation 74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation 74745 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies) 74775 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies) 857 75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; 8518 75559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75561 Further Sequences; Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75563 Further Sequences; With Stress Imaging 8441 75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure) 852 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium Computed Tomography, Heart, With Contrast Material, For Evaluation Of Venous Structure And Morphology (Including 3D Image 75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structure, If Performed)  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   | 74712  | Magnetic Resonance Imaging Of Fetus, Single Or First Pregnancy  | \$463.23                              |
| 74742 Transcervical Catheterization Of Fallopian Tube, Radiological Supervision And Interpretation  \$145 74775 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies)  \$87 75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;  \$318 75559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  Further Sequences;  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  Formal Further Sequences; With Stress Imaging  \$441 75565 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75561 Further Sequences; With Stress Imaging  \$441 75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure)  \$52 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Venous Structure And Morphology (Including 3D Image  75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structure, If Performed)  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  | 74713  | Magnetic Resonance Imaging Of Fetus, Each Additional Pregnancy  | \$202.91                              |
| 74775 Perineogram (Eg, Vaginogram, For Sex Determination Or Extent Of Anomalies)  75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material;  75559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging  Further Sequences;  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75563 Further Sequences; With Stress Imaging  Sample Structure Sequences; With Stress Imaging  Sample Structure Sequences; With Stress Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure)  Sample Structure Structure Structure And Morphology (Including 3D Image)  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  | 74740  | Hysterosalpingography, Radiological Supervision And Interpretation  | \$70.04                               |
| 75557 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; 7559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging 2386 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging 3866 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75561 Further Sequences; Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75563 Further Sequences; With Stress Imaging 75562 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure) \$52 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium \$80 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Venous Structure And Morphology (Including 3D Image 75572 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  |        |   | \$145.86                              |
| 75559 Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material; With Stress Imaging Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75561 Further Sequences; Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75563 Further Sequences; With Stress Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75565 Further Sequences; With Stress Imaging 75562 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure) \$52 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image 75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed) \$252 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   |        |   | \$87.94                               |
| Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75561 Further Sequences; Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  75563 Further Sequences; With Stress Imaging For Wolphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  \$441  75563 Cardiac Magnetic Resonance Imaging For Wolphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And  \$441  75563 Cardiac Magnetic Resonance Imaging For Morphology (Inst Separately In Addition To Code For Primary Procedure)  \$52  75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium  \$80  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Venous Structure And Morphology (Including 3D Image)  \$252  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   |        |   | \$318.48                              |
| 75561 Further Sequences;  Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75563 Further Sequences; With Stress Imaging 75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure) \$52 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium \$80 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Venous Structure And Morphology (Including 3D Image Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed) \$252 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  | 75559  |   | \$386.94                              |
| Cardiac Magnetic Resonance Imaging For Morphology And Function Without Contrast Material(S), Followed By Contrast Material(S) And 75563 Further Sequences; With Stress Imaging 75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure) \$52 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium \$80 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image 75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed) \$252 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   | 75504  |   | <b>*</b> 440 00                       |
| 75563 Further Sequences; With Stress Imaging  \$441 75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure)  \$52 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image  75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed)  \$252  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  | /5561  |   | \$418.29                              |
| 75565 Cardiac Magnetic Resonance Imaging For Velocity Flow Mapping (List Separately In Addition To Code For Primary Procedure)  75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image  75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed)  \$252  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   | 75560  |   | ¢444 22                               |
| 75571 Computed Tomography, Heart, Without Contrast Material, With Quantitative Evaluation Of Coronary Calcium  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed)  \$252  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart  |        |   | \$441.33<br>\$52.82                   |
| Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology (Including 3D Image 75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed) \$252 Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   |        |   | \$80.28                               |
| 75572 Postprocessing, Assessment Of Cardiac Function, And Evaluation Of Venous Structures, If Performed) \$252  Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   | 13311  |   | φου.28                                |
| Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart   | 75572  |   | \$252.97                              |
|   | . 5572 | ,   | <del>4202.01</del>                    |
|   |        | Computed Tomography, Heart, With Contrast Material, For Evaluation Of Cardiac Structure And Morphology In The Setting Of Congenital Heart     |                                       |
|   | 75573  |   | \$410.11                              |

| Code    | Description   | Fee                  |
|---------|---|----------------------|
|         | Computed Tomographic Angiography, Heart, Coronary Arteries And Bypass Grafts (When Present), With Contrast Material, Including 3D Image   |                      |
| 75574   | Postprocessing (Including Evaluation Of Cardiac Structure And Morphology, Assessment Of Cardiac Function, And Evalua  | \$422.19             |
| 75580   | Analysis Of Data From CT Study Of Heart Blood Vessels To Assess Severity Of Heart Artery Disease, With Interpretation And Report  | \$797.58             |
|         | Aortography, Thoracic, Without Serialography, Radiological Supervision And Interpretation   | \$182.96             |
|         | Radiological Supervision And Interpretation X-Ray Of Chest Aorta, Using Rapid Sequence  | \$128.46             |
| 75625   | Aortography, Abdominal, By Serialography, Radiological Supervision And Interpretation   | \$133.82             |
| 75630   | Aortography, Abdominal Plus Bilateral Iliofemoral Lower Extremity, Catheter, By Serialography, Radiological Supervision And Interpretation  | \$166.66             |
|         | Computed Tomographic Angiography, Abdominal Aorta And Bilateral Iliofemoral Lower Extremity Runoff, With Contrast Material(S), Including  |                      |
|         | Noncontrast Images, If Performed, And Image Postprocessing  | \$505.09             |
|         | Angiography, Spinal, Selective, Radiological Supervision And Interpretation  Angiography, Extremity, Unilateral, Radiological Supervision And Interpretation  | \$228.67<br>\$158.78 |
|         | Angiography, Extremity, Bilateral, Radiological Supervision And Interpretation  | \$171.86             |
| 75726   | Angiography, Visceral, Selective Or Supraselective, (With Or Without Flush Aortogram), Radiological Supervision And Interpretation  | \$180.90             |
|         | Radiological Supervision And Interpretation Of Imaging Of Artery Of One Adrenal Gland   | \$145.68             |
|         | Angiography, Adrenal, Bilateral, Selective, Radiological Supervision And Interpretation   | \$161.81             |
|         | Angiography, Pelvic, Selective Or Supraselective, Radiological Supervision And Interpretation   | \$150.00             |
|         | Angiography, Pulmonary, Unilateral, Selective, Radiological Supervision And Interpretation  | \$138.98             |
|         | Angiography, Pulmonary, Bilateral, Selective, Radiological Supervision And Interpretation  Radiological Supervision And Interpretation Of Imaging Of Lung Artery, Contrast Inserted By Catheter Or Injection Into Vein        | \$157.52<br>\$128.35 |
|         | Angiography, Internal Mammary, Radiological Supervision And Interpretation  | \$168.06             |
|         | Angiography, Selective, Each Additional Vessel Studied After Basic Examination, Radiological Supervision And Interpretation (List Separately In   | ·                    |
|         | Addition To Code For Primary Procedure)   | \$103.36             |
|         | Lymphangiography, Extremity Only, Unilateral, Radiological Supervision And Interpretation  Radiological Supervision And Interpretation Of Imaging Of Lymphatic System Of Both Arms Or Legs                                    | \$239.04<br>\$259.20 |
|         | Radiological Supervision And Interpretation of Imaging of Lymphatic System of One Side of Pelvis And Abdomen  | \$263.03             |
|         | Lymphangiography, Pelvic/Abdominal, Bilateral, Radiological Supervision And Interpretation  | \$283.14             |
|         | Shuntogram For Investigation Of Previously Placed Indwelling Nonvascular Shunt (Eg, Leveen Shunt, Ventriculoperitoneal Shunt, Indwelling  |                      |
|         | Infusion Pump), Radiological Supervision And Interpretation  Radiological Supervision And Interpretation X-Ray Of Vein Of Spleen And Liver  | \$58.21<br>\$512.89  |
|         | Venography, Extremity, Unilateral, Radiological Supervision And Interpretation  | \$83.79              |
|         | Radiological Supervision And Interpretation Of Imaging Of Veins Of Both Arms Or Legs  | \$142.14             |
|         | Venography, Caval, Inferior, With Serialography, Radiological Supervision And Interpretation  | \$120.46             |
|         | Venography, Caval, Superior, With Serialography, Radiological Supervision And Interpretation  | \$127.00             |
|         | Venography, Renal, Unilateral, Selective, Radiological Supervision And Interpretation  Venography, Renal, Bilateral, Selective, Radiological Supervision And Interpretation   | \$126.99<br>\$139.94 |
|         | Venography, Nenal, Unilateral, Selective, Radiological Supervision And Interpretation  Venography, Adrenal, Unilateral, Selective, Radiological Supervision And Interpretation  | \$138.11             |
|         | Venography, Adrenal, Bilateral, Selective, Radiological Supervision And Interpretation  | \$152.22             |
|         | Venography, Venous Sinus (Eg, Petrosal And Inferior Sagittal) Or Jugular, Catheter, Radiological Supervision And Interpretation   | \$134.25             |
|         | Radiological Supervision And Interpretation Of Imaging Of Vein System Of Head   | \$170.51             |
|         | Venography, Epidural, Radiological Supervision And Interpretation  Venography, Orbital, Radiological Supervision And Interpretation   | \$124.30<br>\$104.23 |
| 73000   | Radiological Supervision And Interpretation Of Imaging Of Liver Vein With Assessment Of Blood Flow, Injection Of Contrast (Accessed Through   | ψ104.20              |
|         | The Skin)   | \$144.43             |
|         | Radiological Supervision And Interpretation Of Imaging Of Liver Vein, Injection Of Contrast (Accessed Through The Skin)   | \$146.97             |
|         | Hepatic Venography, Wedged Or Free, With Hemodynamic Evaluation, Radiological Supervision And Interpretation  Hepatic Venography, Wedged Or Free, Without Hemodynamic Evaluation, Radiological Supervision And Interpretation | \$131.82<br>\$132.55 |
| 73031   | Venous Sampling Through Catheter, With Or Without Angiography (Eg, For Parathyroid Hormone, Renin), Radiological Supervision And  | ψ132.33              |
| 75893   | Interpretation  | \$110.73             |
|         | Transcatheter Therapy, Embolization, Any Method, Radiological Supervision And Interpretation  | \$955.00             |
|         | Imaging Of Blood Vessel Radiologic Supervision And Interpretation   | \$135.11<br>\$233.53 |
| 73301   | Mechanical Removal Of Intraluminal (Intracatheter) Obstructive Material From Central Venous Device Through Device Lumen, Radiologic   | Ψ233.33              |
| 75902   | Supervision And Interpretation  | \$90.83              |
| 75956   | Radiological Supervision And Interpretation Of Repair Of Chest Aorta With Graft, Involving Coverage Of Artery Origin  | \$370.27             |
|         | Endovascular Repair Of Descending Thoracic Aorta (Eg, Aneurysm, Pseudoaneurysm, Dissection, Penetrating Ulcer, Intramural Hematoma,   |                      |
| 75957   | Or Traumatic Disruption); Not Involving Coverage Of Left Subclavian Artery Origin, Initial Endoprosthesis Plus Descending Thoracic Aor  | \$278.41             |
| 75958   | Radiological Supervision And Interpretation Of Placement Of Blood Vessel Central Extension Prosthesis Procedure   | \$185.47             |
|         | Radiological Supervision And Interpretation Of Placement Of Blood Vessel Outer Extension Prosthesis Procedure   | \$162.62             |
| 75970   | Transcatheter Biopsy, Radiological Supervision And Interpretation  Change Of Percutaneous Tube Or Drainage Catheter With Contrast Monitoring (Eq. Genitourinary System, Abscess), Radiological Supervision                    | \$468.97             |
| 75984   | And Interpretation  | \$104.55             |
| 2201    | Radiological Guidance (le, Fluoroscopy, Ultrasound, Or Computed Tomography), For Percutaneous Drainage (Eg, Abscess, Specimen   | ţ.c30                |
|         | Collection), With Placement Of Catheter, Radiological Supervision And Interpretation  | \$122.14             |
|         | Imaging Guidance For Procedure, Up To 1 Hour  | \$45.33              |
|         | Imaging From Nose To Rectum, Single View, Child Radiologic Examination, Abscess, Fistula Or Sinus Tract Study, Radiological Supervision And Interpretation  | \$32.99<br>\$64.59   |
|         | Imaging Of Surgical Specimen  | \$28.55              |
| 76100   | Radiologic Examination, Single Plane Body Section (Eg, Tomography), Other Than With Urography   | \$86.90              |
|         | Imaging Of Organ  | \$112.74             |
|         | Imaging Of Organ, Complimenting Routine Exam  Consultation On X-Ray Examination Made Elsewhere, Written Report  | \$43.41<br>\$17.19   |
|         | Medical Physics Dose Evaluation For Radiation Exposure, Including Report  | \$822.72             |
| . 51 10 |   | Ψ022.12              |

| Code  | Description  | Fee                       |
|-------|--|---------------------------|
| 76376 | 3D Rendering With Interpretation And Reporting Of Computed Tomography, Magnetic Resonance Imaging, Ultrasound, Or Other Tomographic Modality With Image Postprocessing Under Concurrent Supervision; Not Requiring Image Postprocessing On An Independent Workstatio | \$24.23                   |
| 76377 | 3D Rendering With Interpretation And Reporting Of Computed Tomography, Magnetic Resonance Imaging, Ultrasound, Or Other Tomographic Modality With Image Postprocessing Under Concurrent Supervision; Requiring Image Postprocessing On An Independent Workstation    | \$76.58                   |
|       | Computed Tomography, Limited Or Localized Follow-Up Study  | \$209.46                  |
|       | Magnetic Resonance Spectroscopy  | \$428.45                  |
|       | Magnetic Resonance (Eg, Vibration) Elastography  | \$229.80                  |
|       | Fluoroscopic Procedure Unlisted Computed Tomography Procedure (Eg, Diagnostic, Interventional)   | \$42.07<br>Price By Repor |
|       | Unlisted Computed Torriography Trocedure (Eg, Diagnostic, Interventional)  | Price By Repor            |
|       | Unlisted Diagnostic Radiographic Procedure   | Price By Repor            |
|       | Ultrasound Of Brain  | \$101.58                  |
|       | Ultrasound Of Eye Tissue And Structures  | \$66.6                    |
|       | Ultrasound Of Eye Disease Or Growth Ultrasound Of Eye Disease, Growth, Or Structure  | \$54.19<br>\$50.76        |
|       | Ultrasound Of Eye Using Water Bath Method  | \$80.92                   |
|       | Ophthalmic Ultrasound, Echography, Diagnostic; Corneal Pachymetry, Unilateral Or Bilateral (Determination Of Corneal Thickness)  | \$11.88                   |
|       | Ophthalmic Biometry By Ultrasound Echography, A-Scan;  | \$44.37                   |
|       | Ophthalmic Biometry By Ultrasound Echography, A-Scan; With Intraocular Lens Power Calculation  | \$60.63                   |
|       | Ultrasound Of Eye Foreign Body Localization  | \$82.65                   |
|       | Ultrasound Of Head And Neck Ultrasound Of Chest  | \$95.29<br>\$62.00        |
|       | Ultrasound Of One Breast, Complete   | \$111.46                  |
|       | Ultrasound Of One Breast, Limited  | \$91.1                    |
|       | Ultrasound Of Abdomen, Complete  | \$134.44                  |
|       | Ultrasound Of Abdomen, Limited   | \$97.68                   |
|       | Ultrasound Evaluation Of Abdominal Aorta To Detect Bulging (Aneurysm)  Ultrasound, Retroperitoneal (Eg, Renal, Aorta, Nodes), B-Scan And/Or Real Time With Image Documentation; Complete   | \$100.97<br>\$117.63      |
|       | Ultrasound Behind Abdominal Cavity, Limited  | \$61.68                   |
|       | Ultrasound Transplated Kidney  | \$143.0                   |
| 76800 | Ultrasound, Spinal Canal And Contents  | \$129.19                  |
|       | Ultrasound, Pregnant Uterus, Real Time With Image Documentation, Fetal And Maternal Evaluation, First Trimester (14 Weeks 0 Days),   | *                         |
| 76801 | Transabdominal Approach; Single Or First Gestation  Ultrasound, Pregnant Uterus, Real Time With Image Documentation, Fetal And Maternal Evaluation, First Trimester (14 Weeks 0 Days),   | \$151.31                  |
| 76802 | Transabdominal Approach; Each Additional Gestation (List Separately In Addition To Code For Primary Procedure)   | \$76.49                   |
|       | Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First Fetus  | \$151.3                   |
| 76810 | Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days)  | \$112.10                  |
| 76811 | Ultrasound, Pregnant Uterus, Real Time With Image Documentation, Fetal And Maternal Evaluation Plus Detailed Fetal Anatomic Examination, Transabdominal Approach; Single Or First Gestation  | \$278.1                   |
| 76812 | Ultrasound, Pregnant Uterus, Real Time With Image Documentation, Fetal And Maternal Evaluation Plus Detailed Fetal Anatomic Examination, Transabdominal Approach; Each Additional Gestation (List Separately In Addition To Code For Primary Procedure)              | \$168.08                  |
|       | Ultrasound Of Pregnant Uterus (First Trimester) Single Or First Fetus  | \$138.5                   |
|       | Ultrasound Of Pregnant Uterus (First Trimester), Abdominal Or Vaginal Approach   | \$91.2                    |
|       | Ultrasound Of Pregnant Uterus, 1 Or More Fetus(Es)   | \$101.1                   |
|       | Ultrasound Re-Evaluation Of Pregnant Uterus, Per Fetus  Vaginal Ultrasound Of Pregnant Uterus  | \$100.8<br>\$110.9        |
|       | Fetal Biophysical Profile; With Non-Stress Testing   | \$130.1                   |
|       | Fetal Biophysical Profile; Without Non-Stress Testing  | \$117.09                  |
| 76820 | Doppler Velocimetry, Fetal; Umbilical Artery   | \$53.0°                   |
| 76821 | Doppler Velocimetry, Fetal; Middle Cerebral Artery   | \$101.65                  |
| 76825 | Echocardiography, Fetal, Cardiovascular System, Real Time With Image Documentation (2D) With Or Without M-Mode Recording;  | \$188.5                   |
| 70000 | Echocardiography, Fetal, Cardiovascular System, Real Time With Image Documentation (2D) With Or Without M-Mode Recording; Follow-Up  | ¢442.44                   |
|       | Or Repeat Study  Doppler Echocardiography, Fetal, Pulsed Wave And/Or Continuous Wave With Spectral Display; Complete   | \$113.46<br>\$110.9       |
| 10021 | Doppler Echocardiography, Fetal, Cardiovascular System, Pulsed Wave And/Or Continuous Wave With Spectral Display; Follow-Up Or Repeat  | ψ110.5                    |
|       | Study  | \$83.8                    |
|       | Ultrasound, Transvaginal   | \$107.8                   |
|       | Saline Infusion Sonohysterography (Sis), Including Color Flow Doppler, When Performed  Ultrasound Of Pelvis, Complete, Not Pregnancy Related   | \$128.1<br>\$107.8        |
|       | Ultrasound Of Pelvis, Limited, Not Pregnancy Related   | \$50.8                    |
|       | Ultrasound Of Scrotum  | \$104.6                   |
|       | Ultrasound Of Pelvic Region Through Rectum   | \$107.5                   |
|       | Ultrasound Of Prostate Through Rectum For Radiation Therapy Planning   | \$190.4                   |
|       | Complete Ultrasound Of Arm Or Leg Partial Ultrasound Of Joint Or Other Non-Blood Vessel Structure Of Arm Or Leg  | \$62.5<br>\$43.1          |
|       | Comprehensive Ultrasound Scan Of Entire Length Of Nerves In Extremity  | \$64.2                    |
|       | Ultrasound Of Hips With Manipulation, Infant   | \$110.9                   |
|       | Ultrasound Of Hips, Infant   | \$101.9                   |
|       | Ultrasonic Guidance For Endomyocardial Biopsy, Imaging Supervision And Interpretation  | \$93.25                   |
| 16936 | Ultrasound Guided Compression Repair Of Blood Vessel   | \$250.8                   |
|       | Ultrasound Guidance For Vascular Access Requiring Ultrasound Evaluation Of Potential Access Sites, Documentation Of Selected Vessel Patency, Concurrent Realtime Ultrasound Visualization Of Vascular Needle Entry, With Permanent Recording And Reporting (Lis      | \$36.5                    |
| 76940 | Ultrasound Guidance For, And Monitoring Of, Visceral Tissue Ablation   | \$100.6                   |

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|---|--|--|
| Code  | Description  Ultracopia Guidance For Intrautorine Fotal Transfusion Or Cordeceptoric Imaging Supervision And Interpretation  | Fee  |
| 76941   | Ultrasonic Guidance For Intrauterine Fetal Transfusion Or Cordocentesis, Imaging Supervision And Interpretation  | \$67.55  |
| 76942   | Ultrasonic Guidance For Needle Placement (Eg, Biopsy, Aspiration, Injection, Localization Device), Imaging Supervision And Interpretation  | \$61.31  |
|   | Ultrasonic Guidance For Chorionic Villus Sampling, Imaging Supervision And Interpretation  | \$106.72   |
|   | Ultrasonic Guidance For Amniocentesis, Imaging Supervision And Interpretation  | \$34.04  |
| 76948   | Ultrasonic Guidance For Aspiration Of Ova, Imaging Supervision And Interpretation  | \$77.52  |
|   | Ultrasonic Guidance For Interstitial Radioelement Application  | \$98.02  |
| 76975   | Gastrointestinal Endoscopic Ultrasound, Supervision And Interpretation   | \$99.79  |
| 76977   | Ultrasound Measurement Of Bone Density   | \$7.16   |
|   | Ultrasound Using Targeted Microbubble Contrast Of First Lesion   | \$290.01   |
| 76979   | Ultrasound Using Targeted Microbubble Contrast Of Additional Lesion  | \$192.54   |
| 76981   | Elastography Ultrasound Of Organ Tissue  | \$116.34   |
| 76982   | Elastography Ultrasound Of First Lesion  | \$91.15  |
| 76983   | Elastography Ultrasound Of Additional Lesion   | \$59.21  |
| 76984   | Ultrasound Of Chest Aorta During Surgery   | Price By Report  |
|   | Ultrasound Of Heart During Surgery To Evaluate For Congenital Heart Disease, Including Placement And Manipulation Of Transducer, Image   |  |
| 76987   | Acquisition, And Interpretation And Report Of Results  | Price By Report  |
|   | Ultrasound Of Heart During Surgery To Evaluate For Congenital Heart Disease, Including Placement And Manipulation Of Transducer And  |  |
| 76988   | Image Acquisition  | Price By Report  |
| 76989   | Ultrasound Of Heart During Surgery To Evaluate For Congenital Heart Disease, Interpretation And Report Of Results Only   | Price By Report  |
| 76998   | Ultrasonic Guidance Interoperative   | \$162.07   |
|   | Unlisted Ultrasound Procedure (Eg, Diagnostic, Interventional)   | Price By Report  |
|   | Fluoroscopic Guidance For Insertion, Replacement Or Removal Of Central Venous Access Device  | \$112.98   |
|   | Fluoroscopic Guidance For Insertion Of Needle  | \$88.91  |
|   | Fluoroscopic Guidance For Injection Into Spine Or Muscle Next To Spine   | \$91.29  |
|   | Ct Guidance Stereotactic Localization  | \$243.50   |
|   | Ct Needle Placement  | \$152.06   |
|   | Ct Tissue Ablation   | \$191.14   |
| 77014   | Ct Radiation Therapy Fields  | \$128.90   |
|   | Radiological Supervision And Interpretation Of Mri Guidance For Insertion Of Needle  | \$418.09   |
|   | Mri Guidance For Destruction Of Tissue   | \$217.12   |
| 77046   | Mri Of One Breast  | \$217.31   |
| 77047   | Mri Of Both Breasts  | \$247.99   |
| 77048   | Mri Of One Breast With And Without Contrast  | \$344.75   |
| 77049   | Mri Of Both Breasts With And Without Contrast  | \$390.80   |
| 77053   | Mammary Ductogram Single Duct  | \$57.07  |
| 77054   | Mammary Ductogram Multiple Ducts   | \$66.39  |
| 77061   | Digital Tomography Of One Breast   | Price By Report  |
|   | Digital Tomography Of Both Breasts   | Price By Report  |
| 77063   | Screening Digital Tomography Of Both Breasts   | \$55.73  |
| 77065   | Diagnostic Mammography Of One Breast   | \$89.39  |
| 77066   | Diagnostic Mammography Of Both Breasts   | \$115.48   |
| 77067   | Screening Mammography Of Both Breasts  | \$95.52  |
|   | Contralateral Joint If Indicated   | \$38.31  |
|   | Bone Age Studies   | \$27.87  |
|   | Bone Length Studies  | \$51.21  |
|   | Radiologic Exam Osseous Survey Limited   | \$70.35  |
|   | X-Ray Survey Of Forearm Or Wrist Bone Density  | \$94.35  |
|   | X-Ray Survey Of Bones, Infant  | \$75.96  |
|   | Imaging Of 2 Or More Joints, Single View   | \$50.16  |
|   | Ct Scan Bone Mineral Density Study 1 Or More Sites   | \$141.05   |
|   | Bone Density Measurement Of The Core Or Central Skeleton (E.G., Hips, Pelvis, Spine)   | \$39.49  |
|   | Bone Density Measurement Of The Core Or Extremities (E.G., Radius, Wrist, Heel)  | \$29.66  |
| 77084   | Mri Bone Marrow Blood Supply   |  |
|   |  | \$490.48   |
|   | Bone Density Measurement Of The Core Or Central Skeleton (E.G., Hips, Pelvis, Spine), Including Assessment Of Vertebral Fracture   | \$490.48<br>\$54.39  |
| 77086   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  | \$54.39<br>\$31.30   |
| 77086<br>77089  | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  | \$54.39<br>\$31.30<br>\$36.32  |
| 77086<br>77089<br>77090   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere   | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25  |
| 77086<br>77089<br>77090<br>77091  | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere Technical Calculation Of Trabecular Bone Score (Tbs)  | \$54.39<br>\$31.30<br>\$36.32  |
| 77086<br>77089<br>77090<br>77091<br>77092   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere  Technical Calculation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261  | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere  Technical Calculation Of Trabecular Bone Score (Tbs)  Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  Management Of Radiation Therapy, Simple   | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$73.45  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere  Technical Calculation Of Trabecular Bone Score (Tbs)  Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  Management Of Radiation Therapy, Simple  Management Of Radiation Therapy, Intermediate  | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$73.45  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263  | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere Technical Calculation Of Trabecular Bone Score (Tbs) Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy, Complex   | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$73.45<br>\$100.45  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263<br>77280   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere  Technical Calculation Of Trabecular Bone Score (Tbs)  Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  Management Of Radiation Therapy, Simple  Management Of Radiation Therapy, Intermediate  Management Of Radiation Therapy, Complex  Management Of Radiation Therapy Simulation, Simple  | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$73.45<br>\$100.45<br>\$173.31  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263<br>77280<br>77285  | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere  Technical Calculation Of Trabecular Bone Score (Tbs)  Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  Management Of Radiation Therapy, Simple  Management Of Radiation Therapy, Intermediate  Management Of Radiation Therapy, Complex  Management Of Radiation Therapy Simulation, Simple  Management Of Radiation Therapy, Simulation, Intermediate   | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$73.45<br>\$100.45<br>\$173.31<br>\$190.45  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263<br>77280<br>77285<br>77290                                     | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere  Technical Calculation Of Trabecular Bone Score (Tbs)  Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  Management Of Radiation Therapy, Simple  Management Of Radiation Therapy, Intermediate  Management Of Radiation Therapy, Complex  Management Of Radiation Therapy Simulation, Simple  Management Of Radiation Therapy, Simulation, Intermediate  Management Of Radiation Therapy, Simulation, Intermediate  Management Of Radiation Therapy, Simulation, Complex  | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$73.45<br>\$100.45<br>\$173.31<br>\$190.45<br>\$429.08  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263<br>77280<br>77285<br>77290<br>77293                            | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere  Technical Calculation Of Trabecular Bone Score (Tbs)  Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  Management Of Radiation Therapy, Simple  Management Of Radiation Therapy, Intermediate  Management Of Radiation Therapy Simulation, Simple  Management Of Radiation Therapy Simulation, Intermediate  Management Of Radiation Therapy, Simulation, Intermediate  Management Of Radiation Therapy, Simulation, Complex  Respiratory Motion Management Simulation   | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$73.45<br>\$100.45<br>\$173.31<br>\$190.45  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263<br>77280<br>77285<br>77290<br>77293<br>77295                   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere Technical Calculation Of Trabecular Bone Score (Tbs) Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex Respiratory Motion Management Simulation Management Of Radiation Therapy, 3D  | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$2.543<br>\$8.65<br>\$100.45<br>\$173.31<br>\$190.45<br>\$429.08<br>\$372.18   |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263<br>77280<br>77285<br>77290<br>77293<br>77295                   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement  Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk  Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere  Technical Calculation Of Trabecular Bone Score (Tbs)  Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk  Management Of Radiation Therapy, Simple  Management Of Radiation Therapy, Intermediate  Management Of Radiation Therapy Simulation, Simple  Management Of Radiation Therapy Simulation, Intermediate  Management Of Radiation Therapy, Simulation, Intermediate  Management Of Radiation Therapy, Simulation, Complex  Respiratory Motion Management Simulation   | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$73.45<br>\$100.45<br>\$173.31<br>\$190.45<br>\$429.08<br>\$372.18                                  |
| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263<br>77280<br>77285<br>77290<br>77293<br>77299                   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere Technical Calculation Of Trabecular Bone Score (Tbs) Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex Respiratory Motion Management Simulation Management Of Radiation Therapy, 3D  | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$2.543<br>\$8.65<br>\$100.45<br>\$173.31<br>\$190.45<br>\$429.08<br>\$372.18   |
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| 77086<br>77089<br>77090<br>77091<br>77092<br>77261<br>77262<br>77263<br>77280<br>77295<br>77299<br>77300<br>77300                   | Fracture Assessment Of Spine Bones Using Dedicated X-Ray Machine For Bone Density Measurement Calculation Of Trabecular Bone Score (Tbs) Using Imaging Data With Interpretation And Report On Fracture Risk Technical Preparation And Transmission Of Imaging Data For Analysis Of Trabecular Bone Score (Tbs) Performed Elsewhere Technical Calculation Of Trabecular Bone Score (Tbs) Interpretation Of Trabecular Bone Score (Tbs) And Report On Fracture Risk Management Of Trabecular Bone Score (Tbs) And Report On Fracture Risk Management Of Radiation Therapy, Simple Management Of Radiation Therapy, Intermediate Management Of Radiation Therapy Simulation, Simple Management Of Radiation Therapy, Simulation, Intermediate Management Of Radiation Therapy, Simulation, Complex Respiratory Motion Management Simulation Management Of Radiation Therapy, 3D Management Of Radiation Therapy, Therapeutic Radiology Basic Radiation Dosimetry Calculation, Central Axis Depth Dose Calculation, Tdf, Nsd, Gap Calculation, Off Axis Factor, Tissue Inhomogeneity Factors, Calculation Of Non-Ionizing Radiation Surface And Depth Dose, As Required During Course Of Treatment, Intensity Modulated Radiotherapy Plan, Including Dose-Volume Histograms For Target And Critical Structure Partial Tolerance Specifications | \$54.39<br>\$31.30<br>\$36.32<br>\$2.25<br>\$25.43<br>\$8.65<br>\$100.45<br>\$173.31<br>\$190.45<br>\$429.08<br>\$372.18<br>\$374.63<br>\$501.20<br>Price By Report  |
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| 7315 Radiation Therapy Part No. Complex For Insention Of Radiatories Impaired 7321 Special Dischargery For Part Part Parts (1964). Horizontal Polystein 7321 Special Dischargery For Parts (1964). Here Index (1964). Here Ind  |       | Description Radiation Therapy Plan Intermediate For Insertion Of Radioactive Implant                          | Fee \$200.07    |
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| 77333 Radiation Treatment Devices, Design And Contraction, Intermediate 77336 And Relation Treatment Devices, Design And Construction, Complex 7736 Part Treatment Devices, Design And Construction, Complex 77376 Radiation Treatment Devices, Design And Construction Complex 77377 Radiation Treatment Devices, Design And Construction Fee Intern Plan 77377 Radiation Treatment Devices, Design And Construction Residence of Part Medical Relations (Part Medical Residence) 77377 Radiation Treatment Devices, Supercontact Radiatiouspray (Str.) For Craimal Growths, Part Session, Using Multi-Source Radiationspray 77377 Radiation Treatment Devices, Supercontact Radiatiouspray (Str.) For Craimal Growths, Part Session, Using A Linear Accelerator 77377 Supercontact Body Residence Radiatiouspray (Str.) For Craimal Growths, Part Session, Using A Linear Accelerator 77377 Supercontact Body Residence Radiatiouspray (Str.) For Craimal Growths, Part Session, Using A Linear Accelerator 77377 Supercontact Body Residence Radiatiouspray (Str.) For Craimal Growths, Part Session, Using A Linear Accelerator 77377 Supercontact Body Residence Radiations (Part Part Medical Radiation Part Part Part Residence (Part Part Part Residence Part Part Part Part Part Residence Part Part Part Part Part Part Residence Part Part Part Part Part Part Part Part  |       |   | \$60.74         |
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| . 17338 Mish Land Colimator (Mich.) Device(S) For Intensity Mobilished Radiation Therapy Chery, Street Consistation . 17373 (Special Medical Radiation Therapy Chery, Street Consistation . 17373 (Special Medical Radiation (Privacy Consistation . 17373) (Radiation Therapy Chery, Street Consistance Radiations) (Radiation Chery) (Radiation Therapy Chery, Street Consistance Radiation) (Radiation Chery) (Radiation Therapy Chery, Street Consistance Radiation) (Radiation Chery) (Radiation Chery) (Radiation Therapy Chery) (Radiation Chery) (Radiation Chery) (Radiation Chery) (Radiation Therapy Chery) (Radiati  |       | · ·   | \$131.08        |
| 17370 Special Medical Rodiation Physics Consultation 17373 Radiation Therapy Debtey, Strendson Radiationsprey (Sir) For Cranial Growths, Per Session, Using Multi-Source Radiatherapy 1324 (1772) Radiation Trenspy Debtey, Strendson Radiationsprey (Sir) For Cranial Growths, Per Session, Using Multi-Source Radiatherapy 1327, 201 17372 Special Radiation Trenspy Debtey, Strendson Radiation Strengs (1772) Research (17  |       |   | \$77.76         |
| 77371 Radiation Therapy Delwey, Stereotacke Radiosurgery (Ste) For Cranial Growths, Per Season, Using Allines Survey Radiotherapy       1924.6         77372 Stereotactic Body Radiotion Therapy 1 Or Mont Lesions Using Impaging Giustinon       3972.2         77373 Stereotactic Body Radiotion Therapy 1 Or Mont Lesions Using Impaging Giustinon       3530.0         77377 Stereotactic Body Radiotion Therapy Chelwey, Stereotactic Radiosurgery (Stereotactic Body Radiotion Therapy Chelwey, Stereotactic Radiotion Therapy Chelwey, Stereotactic Radiotion Therapy Chelwey (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Montagement Chelwey), Stereotactic Radiotion Therapy (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Radiotion Therapy Chelwey) (Stereotactic Radiotion Therapy Radiotion Therapy Radiotion Therapy Radiotion Therapy Radiotion Therapy Radiotion Therapy (Stereotactic Radiotion Therapy (Stereotactic Radiotion Therapy Radiotion Radiotion Radiotion Therapy Radiotion Radiotion Radiotion Radiotion Radiotion Radiotion Radi  |       |   | \$483.28        |
| 77372   Sierrotische Soly Radiation Therapy Delivery, Serope (1975) For Canal Growths, Per Session, Using A Linear Accelerator (1972) Sierrotische Soly Radiation Therapy 10 Moter Lessons Using Imaging Guidatione (1972)   |       | · · · · · · · · · · · · · · · · · · ·   |                 |
| 77373 Silementanch Booly Residuation Therapy of Delivery, Simple         3310.00           77380 Internety Modulated Radiation Therapy Delivery, Simple         3310.00           77380 Internety Modulated Radiation Therapy Delivery, Complex         310.00           77390 Indiance For Localization Of Tamery Delivery, Complex         Pitch 69, 180.00           77390 Internety Modulated Radiation Therapy Delivery (Registration of Propriety).         Pitch 69, 180.00           7740 Radiation Treatment Delivery, Simple         \$2.00           77417 Radiation Treatment Delivery, Simple         \$314.20           77417 Radiation Treatment Delivery, Infamendate         \$3.22           77417 Radiation Treatment Delivery, High Energy         \$32.20           77417 Radiation Treatment Delivery, High Energy         \$3.22           77417 Radiation Treatment Delivery, High Energy         \$32.00           77418 Radiation Treatment Delivery, High Energy         \$32.00           7742 Internet Radiation Treatment Delivery, Nature Property Complex         \$3.20           7743 Radiation Treatment Relivery, High Energy         \$3.20           7744 Radiation Treatment Relivery, High Energy         \$3.20           7745 Radiation Treatment Relivery, Simple William Complex Relivery Relive  |       |   |                 |
| 77339       Intensity Muchalacide Radiation Therapy Delivery, Complex       \$310.0         77389       Intensity Muchalacide Radiation Treating Delivery, Complex       \$310.0         77387       Guidance For Localization Of Target Delivery Of Radiation Physics       Price By Report         77401       Radiation Treatment Chelvery, Superficial       \$34.0         77401       Radiation Treatment Delivery, Superficial       \$30.0         77417       Radiation Treatment Delivery, Superficial       \$30.0         77417       Radiation Treatment Delivery, Complex       \$62.3         77417       Treatment Radiation Presented Pelvery, Superficial       \$12.2         77417       Treatment Radiation Presented Pelvery, Superficial       \$12.3         77417       Treatment Radiation Presented Delivery, Complex       \$2.0         77420       Intraception Rediation Treatment Delivery, Karp, Single Treatment Season       Price By Report         77420       Price Delivery of Single Season Of Intraception Rediation Treatment Delivery, Single Season of Intraception Treatment Rediation   |       |   |                 |
| 77380 Indiance For Localization Of Targatp Delivery Of England Treatment       \$315.0         77380 Management Of Radiation Therapy, Medical Radiation Physics       Prote by Report Protection (1997)         77380 Management Of Radiation Therapy, Medical Radiation Physics       Prote by Report Protection (1997)         77480 Radiation Treatment Delivery, Simple       \$38.6         77481 Radiation Treatment Delivery, Simple       \$86.1         77481 Radiation Treatment Delivery, Complex       \$9.2         77441 Interpretation Radiation (1997) Port Films       \$12.3         77441 Radiation Treatment Delivery, Complex       \$12.3         77442 Radiation Treatment Delivery, X-Ray, Single Treatment Session       Protect Protection (1997)         77442 Radiation Treatment Delivery, X-Ray, Single Treatment Session       Protection (1997)         77442 Radiation Treatment Relation Treatment Protection (1997)       Protection (1998)         77442 Radiation Treatment Relation (1998)       \$2.0         77442 Radiation Treatment Management (1998)       \$2.0         77443 Radiation Treatment Management (1998)       \$2.0         77445 Radiation Treatment Management (1998)       \$2.0         7745 Radiation Treatment Management (1998)       \$2.0         7745 Radiation Treatment Management (1998)       \$2.0         7746 Radiation Treatment Management (1998)       \$2.0         7747  |       | ,   |                 |
| 773737 (Subdance For Localization Of Target Delivery Of Radiation Treatment (Pagelation Treatment Delivery, Superficial 1972)         Price By Report           77407 (Radiation Treatment Delivery, Superficial 1974)         \$33.85           77407 (Radiation Treatment Delivery, Superficial 1974)         \$53.85           77407 (Radiation Treatment Delivery, Visipre)         \$53.87           77407 (Radiation Treatment Delivery, Intermediation         \$74.22           77407 (Radiation Treatment Delivery, Kray, Single Treatment (Pagelation)         \$52.23           77407 (Radiation Treatment Delivery, Kray, Single Treatment (Pagelation)         \$52.23           77408 (Radiation Treatment Delivery, Kray, Single Treatment Session         Price By Report           77409 (Radiation Treatment Radiation)         \$1.23           77410 (Radiation Treatment Radiation Treatment (Pagelation Treatme   |       | 7 17 7 1  | \$310.08        |
| 77401 Radiation Treatment Delivery, Simple  \$9.82 77402 Radiation Treatment Delivery, Intermediate  \$742 77402 Radiation Treatment Delivery, Intermediate  \$742 77413 Radiation Treatment Delivery, Compix  \$742 77417 Radiation Treatment Delivery, Compix  \$742 77417 Radiation Treatment Delivery, High Energy  \$742 77417 Radiation Treatment Delivery, High Energy  \$742 7742 Radiation Treatment Delivery, High Energy  \$742 7742 Radiation Treatment Management, 17 Carl Treatment Sension  \$742 7742 Radiation Treatment Management, 17 Carl Treatments  \$742 7743 7744 Radiation Treatment Management, 17 Carl Treatments  \$744 7745 Radiation Treatment Management, 17 Carl Treatments  \$744 7745 Radiation Treatment Management, 17 Carl Treatments  \$745 80 Restoration Radiation Treatment Management Of Treatment Management Of Radiation Treatment Participation Radiation Treatment Participation Radiation Treatment Radiation Treatment Management Of Radiation Treatment Radiation Tr   | 77387 | Guidance For Localization Of Target Delivery Of Radiation Treatment   | \$116.72        |
| Section   Sect  | 77399 | Management Of Radiation Therapy, Medical Radiation Physics  | Price By Report |
| 7740   Radation Treatment Delivery, Intermediate 7742   Radation Treatment Delivery, Compix 7742   Radation Treatment Delivery, Compix 7742   Radation Treatment Delivery, September 1974   Radation Treatment Delivery, High Energy 7742   Radation Treatment Delivery, High Energy 7742   Radation Treatment Delivery, High Energy 7742   Radation Treatment Delivery, Assay, Single Treatment Session 7742   Radation Treatment Management, S. Treatment Will Execute Beam Price By Report 7742   Radation Treatment Management, S. Treatment Will Execute Beam Price By Report 7743   Sterostack, Radation Treatment Management Of Radation Service 77443   Sterostack, Radation Treatment Management Of Radation Treatment Pairs of Radation Treatment Management of Radation Treatment Pairs of Radation Treatment Rad  | 77401 | Radiation Treatment Delivery, Superficial   | \$39.68         |
| Trial   Teachgrout Radiology Port   Pilms   \$12.3  |       |   | \$63.18         |
| \$123   Triangement Radiology Port Films   \$24600   \$24600   \$2460   \$24600   \$24600   \$24600   \$24600   \$24600   \$24600   \$24600   \$24600 |       |   | \$74.27         |
| 77428         Radiation Treatment Delivery, High Energy         \$246.0           77428         Introperative Radiation Treatment Delivery, X-Ray, Single Treatment Session         Price By Report           77427         Radiation Treatment Management, 3 Treatments         \$2019           77437         Standard Radiation Treatment Management of David Lesions, Complete Course Of Treatment Consisting Of 1 Session         \$4374           77438         Steroclacitic Radiation Treatment Management Of 1 Or More Lesions Using Imaging Guidance, Per Treatment Course         \$660.1           77440         Britan Steroclacitic Radiation Treatment Management Of 1 Or More Lesions Using Imaging Guidance, Per Treatment Course         \$660.1           77440         Britan Steroclacitic Radiation Treatment Management Of Steroclacitic Radiation Treatment Delivery, Simple         \$162.2           77450         Initiated Management Of Radiation Therapy         Price By Report           77520         Priction Treatment Delivery, Simple Vith Compensation         Price By Report           77522         Priction Treatment Delivery, Simple Vith Compensation         Price By Report           77523         Priction Treatment Delivery, Simple Vith Compensation         \$162.4           77524         Priction Treatment Delivery, Simple Vith Complex Complex         \$162.6           77525         Priction Treatment Delivery, Simple Vith Complex Complex         \$162.6  |       |   | \$82.92         |
| 77422 Interportative Radiation Treatment Delivery, X-Ray, Single Treatment Session         Price By Repo           77425 Delevary O'Single Session O'Intraoperative Radiation Treatment Will Electron Beam         Price By Repo           77427 Radiation Treatment Management, 1 o' Tareatments         \$2019           87431 Radiation Treatment Management of D' Frain Lesions, Complete Course O' Treatment Consisting O' I Session         \$382           77432 Stereotockic Radiation Treatment Management O' I o' More Lesions Using Imaging Gudance, Per Treatment Course         \$660.1           77440 Intraoperative Radiation Treatment Management O' I o' More Lesions Using Imaging Gudance, Per Treatment Course         \$660.1           77450 Special Treatment Delivery, Strain (E.), Total Book Jirradiation, Hernbody Radiation, Per Oral O' Endocavitary Irradiation)         \$1422           77490 Special Treatment Delivery, Simple         \$262.5           77502 Proton Treatment Delivery, Simple Will Compensation         \$262.3           77503 Proton Treatment Delivery, Complex         \$262.3           77504 Pyperthermia, Estreating Generated Superficial (Re. Heating To Depth Greater Than 4 Cm)         \$663.6           77505 Pyperthermia, Estreating Generated Deep (Re. Heating To Depth Greater Than 4 Cm)         \$663.6           77510 Pyperthermia Terrainer, Sort Frewer Probe Applications         \$15,043.3           77760 Intriaon O' Trial Strain Treatment, Sort Frewer Probe Applications         \$16,043.3           77761 Intrian   |       | , ,,  |                 |
| Price By Repo 77428 Radiation Treatment Management, 1 Total Treatments 92019 77431 Radiation Treatment Management, 1 Total Treatments 9862 77432 Sheredacite Radiation Treatment Management Of 1 or 7 Treatments 9862 77432 Sheredacite Radiation Treatment Management Of 1 or More Lesions Using Imaging Guidance, Per Treatment Course 9862 774749 Intraperative Radiation Treatment Management 974769 Intraperative Radiation Treatment Management 97479 United Management Of Ladiation Treatment 97479 United Management   |       | , , , , ,   |                 |
| 7/42/I.         Radiation Treatment Management, 1 or 2 treatments         \$80.5           7/43/I.         Statistion Treatment Management, 1 or 2 treatments         \$82.7           7/43/I.         Steroclacic Radiation Treatment Management of 1 or More Learners         \$60.7           7/45/I.         Steroclacic Radiation Treatment Management of 1 or More Learners         \$60.7           7/47/I.         Special reatment Developer (Eg. Total Body Treatment)         \$142.2           7/49/I.         Post Treatment Developer (Eg. Total Body Treatment)         \$142.2           7/49/I.         Post Treatment Developer (Simple With Compensation)         Price By Report Treatment Developer (Simple With Compensation)           7/552/Potion Treatment Developer (Simple With Compensation)         Price By Report Treatment Developer (Simple With Compensation)         Price By Report Treatment Developer (Simple With Compensation)           7/552/Potion Treatment Developer (International Compensation)         Price By Reportmentia, Externally Generated Deep (Ie., Heating To A Depth C/I 4 Cm Or Less)         Price By Reportmentia, Externally Generated Deep (Ie., Heating To Depths Greater Than 4 Cm)         \$393.4           7/560/Pyperthermia, Externally Generated Superincial (Ie., Heating To A Depth C/I 4 Cm Or Less)         \$49.13           7/561/Pyperthermia Treatment, 5 Or More Probe Applications         \$1.04           7/561/Pyperthermia Treatment, 5 Or More Probe Applications         \$1.04 <td< td=""><td></td><td></td><td></td></td<>  |       |   |                 |
| 77431         Radiation Treatment Management, 1 or 2 Treatments         \$852.7           77432         Stereotic Radiation Treatment Management of 1 or More Lesions Using Imaging Guidance, Per Treatment Course         \$660.1           77435         Stereotic Radiation Treatment Management of 1 or More Lesions Using Imaging Guidance, Per Treatment Course         \$660.1           774769         Intracerusive Radiation Treatment Management of Carlos Body Irradiation, Hembody Radiation, Per Oral Or Endocavitary Irradiation         Price By Report Price By Report Price By Report Price By Report Prices Dy Report P  |       | , , ,   | \$201.93        |
| 77432       Sheredraciic Radiation Treatment Management Of 10 r More Lesions, Complete Course Of Treatment Course       \$680.1         77458       Birescaciic Radiation Treatment Management       \$295.1         77470       Special Treatment Proceeding (Eg. Total Body) Underline (Hanagement)       \$1412.2         77490       Picilis Treatment Potewing (Eg. Total Body) Underline (Hanagement)       Price By Repo         77520       Proton Treatment Dekwey, Simple With Compensation       Price By Repo         77522       Proton Treatment Dekwey, Intermediate       \$2324.2         77523       Proton Treatment Dekwey, Intermediate       \$2324.7         77523       Proton Treatment Dekwey, Intermediate       \$2824.7         77523       Proton Treatment Dekwey, Intermediate       \$2824.7         77520       Pryce Proton Treatment Dekwey, Intermediate       \$2824.7         77520       Pryce Proton Treatment Dekwey, Intermediate       \$4913.3         77520       Pryce Proton Treatment Dekwey, Intermediate       \$4913.3         77520       Pryce Proton Treatment Dekwey, Complex       Price By Reportmentia, Externally Generated Deep (le, Heating To A Paph) Of 4 Cm Or Less)       \$4913.3         77520       Pryce Pryce Proton Treatment Treatment, Scannally Generated Deep (le, Heating To A Paph) Of 4 Cm Or Less)       \$4913.3         77520       Pryce Pryce Proton Treatmen   |       |   | \$86.24         |
| Tr458  Intraperative Radiation Treatment Management Of 1 of More Lesions Using Imaging Guidance, Per Treatment Course   \$285.  |       |   | \$437.43        |
| 77470 Special Treatment Procedure (Eg. Total Body Irradiation, Hembody Radiation, Per Onal Or Endocavitary Irradiation) Process Per Proces  | 77435 | Stereotactic Radiation Treatment Management Of 1 Or More Lesions Using Imaging Guidance, Per Treatment Course | \$660.19        |
| Price By Report   Price By R  | 77469 | Intraoperative Radiation Treatment Management   | \$295.18        |
| Prizos   Proton Treatment Delivery, Simple   \$323.7   Prizos   Pricos Treatment Delivery, Simple With Compensation   Price By Repo   \$329.7   Prizos   Pricos Treatment Delivery, Intermediate   \$329.7   Prizos   Prizos Treatment Delivery, Intermediate   Price By Repo   \$329.7   Prizos   Prizos Treatment Delivery, Complex   Price By Repo   \$329.7   Prizos   Pri   |       |   | \$142.24        |
| 77522 Proton Treatment Delivery, Simple With Compensation         \$329.4           77523 Proton Treatment Delivery, Complex         \$329.4           77505 Proton Treatment Delivery, Complex         \$491.5           77600 Hyperthermia, Externally Generated Superficial (le, Heating To A Depth Of 4 Cm Or Less)         \$491.3           77601 Hyperthermia, Externally Generated Superficial (le, Heating To Depths Greater Than 4 Cm)         \$963.5           777610 Hyperthermia Treatment, S. Of wher Probe Applications         \$176.0           777615 Hyperthermia Treatment, S. Of Wore Probe Applications         \$1,045.3           77762 Hyperthermia Treatment, S. Of Wore Probe Applications         \$262.6           77761 Hyperthermia Treatment, S. Of Wore Probe Applications         \$262.6           77762 Hyperthermia Treatment, S. Of Wore Probe Applications         \$262.6           77761 Hyperthermia Treatment Teacherment, S. Of Wore Probe Applications         \$262.6           77761 Hyperthermia Treatment Teacherment, S. Of Wore Probe Applications         \$262.6           77761 Hyperthermia Treatment Teacherment, S. Of Wore Though Six  |       |   | Price By Report |
| 77523 Proton Treatment Delivery, Intermediate         \$329.4           77526 Proton Treatment Delivery, Complex         Price By Repo           77605 Hyperthermia, Externally Generated Deep (le, Heating To A Depth Of 4 Cm Or Less)         \$491.3           77605 Hyperthermia, Externally Generated Deep (le, Heating To Depths Greater Than 4 Cm)         \$635.5           77605 Hyperthermia Treatment, 5 Or Fower Probe Applications         \$104.3           77620 Hyperthermia Generated By Intracavitary Probe(S)         \$104.3           77761 Hyperthermia Generated By Intracavitary Probe(S)         \$262.6           77760 Hyperthermia Generated By Intracavitary Probe(S)         \$366.7           77761 Indiation Of Instillation Of Radioelement Solution, Includes 3-Month Follow-Up Care         \$386.7           77761 Application Of Organ Cavity Radiation Source, Simple         \$381.6           77776 Application Of Organ Cavity Radiation Source, Complex         \$140.7           77778 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm         \$236.6           77777 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm         \$387.7           77777 High Dose Brachytherapy, 1 Channel         \$352.5           77777 High Dose Brachytherapy, 2-1 2 Channels         \$352.2           77777 High Dose Brachytherapy, More Than 12 Channels         \$387.7           7778 By Unifised Application Of Radiation Source, Comp  |       | r. I  |                 |
| 77526 Proton Treatment Delivery, Complex         Price By Repo           77500 Hyperthermia, Externally Generated Superficial (le, Heating To A Depth Of 4 Cm Or Less)         \$413.7           77506 Hyperthermia, Externally Generated Deep (le, Heating To Depths Greater Than 4 Cm)         \$963.5           77610 Hyperthermia Treatment, 5 Or Fewer Probe Applications         \$10.2           77610 Hyperthermia Treatment, 5 Or More Probe Applications         \$10.2           77610 Hyperthermia Generated By Intracavitary Probe(S)         \$20.2           77761 Application Of Gran Cavity Radiation Source, Simple         \$383.7           77761 Application Of Organ Cavity Radiation Source, Intermediate         \$391.6           77762 Application Of Organ Cavity Radiation Source, Intermediate         \$51.40.2           7776 High Dose Brachytherapy Through Skin Surface, 2 Channel Or Up To 2.0 Cm         \$230.6           7777 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm         \$387.7           7777 High Dose Brachytherapy, 2- 12 Channels         \$365.5           77777 High Dose Brachytherapy, 2- 12 Channels         \$365.5           77777 High Dose Brachytherapy, 2- 12 Channels         \$365.5           77777 High Dose Brachytherapy, 2- 12 Channels         \$365.5           77778 Julia Dose Brachytherapy, 2- 12 Channels         \$365.6           77777 High Dose Brachytherapy, 2- 12 Channels         \$365.6 <td></td> <td></td> <td></td>  |       |   |                 |
| 77600 Hyperthermia, Externally Generated Superficial (ie., Heating To A Depth Of Crin Or Less)       \$9613         77605 Hyperthermia, Externally Generated Depth (e. Heating To Depths Greater Than 4 Cm)       \$963.5         77616 Hyperthermia Treatment, 5 Or Fewer Probe Applications       \$673.0         777616 Hyperthermia Treatment, 5 Or More Probe Applications       \$1,048.3         77762 Hyperthermia Generated By Intracavitary Probed(S)       \$265.6         77761 Hyperthermia Generated By Intracavitary Probed(S)       \$265.6         77761 Hyperthermia Generated By Intracavitary Probed(S)       \$286.7         77761 Hyperthermia Generated By Intracavitary Probed(S)       \$286.7         77762 Hyperthermia Generated By Intracavitary Probed(S)       \$286.7         77763 Hyperton Of Organ Cavity Radiation Source, Simple       \$381.6         77764 Application Of Organ Cavity Radiation Source, Complex       \$723.4         77765 Hyperton Of Organ Cavity Radiation Source, Complex       \$723.4         77767 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$325.6         77778 By Lipid Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$337.0         77771 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$337.0         77771 High Dose Brachytherapy Through Skin Surface, 2 Channels       \$365.6         77772 High Dose Brachytherapy Through Skin Sur   |       |   |                 |
| 77605 Hyperthermia, Externally Generated Deep (Ie. Heating To Dephis Greater Than 4 Cm)       \$63.5         77610 Hyperthermia Treatment, 5 Or Fower Probe Applications       \$673.0         77610 Hyperthermia Treatment, 5 Or More Probe Applications       \$1,048.3         77761 Hyperthermia Generated By Intracavitary Probe(S)       \$262.6         77761 Introduction of Organ Cavity Radiation Source, Simple       \$388.6         77762 Application Of Organ Cavity Radiation Source, Intermediate       \$514.0         77763 Introduction Of Organ Cavity Radiation Source, Intermediate       \$514.0         77764 Introduction Of Organ Cavity Radiation Source, Complex       \$723.4         77767 High Dose Brachytherapy Through Skin Surface, 1 Channel Or Up To 2.0 Cm       \$232.6         77776 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$387.3         77777 High Dose Brachytherapy 1. 1 Channel       \$352.5         77777 High Dose Brachytherapy, 2. 12 Channels       \$352.5         77778 High Dose Brachytherapy, More Than 12 Channels       \$352.5         77779 Suprevision of Radiation Source, Complex       \$393.0         7778 Suprevision of Radiation Source, Complex       \$323.6         7778 Surface Application Of Radiation Source, Complex       \$324.8         7778 Surface Application Of Radiation Source, Complex       \$324.7         7780 Suprevision, Handling, Loading Or Radia   |       | r   |                 |
| 77610 Hyperthermia Treatment, 5 Or Fewer Probe Applications       \$1,048.3         77615 Hyperthermia Treatment, 5 Or More Probe Applications       \$1,048.3         77620 Hyperthermia Generated By Intracavitary Probe(S)       \$262.6         77751 Institution Of Institution Of Radiolement Solution, Includes 3-Month Follow-Up Care       \$389.7         77761 Application Of Organ Cavity Radiation Source, Intermediate       \$514.0         77763 Application Of Organ Cavity Radiation Source, Intermediate       \$723.4         77767 High Dose Brachytherapy Through Skin Surface, 1 Channel Or Up To 2.0 Cm       \$236.6         77767 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$387.3         77770 High Dose Brachytherapy, 1 Channel       \$352.5         77771 High Dose Brachytherapy, 2.1 Channel       \$352.5         77772 High Dose Brachytherapy, 1.2 Channels       \$565.6         77772 High Dose Brachytherapy, 1.2 Channels       \$357.7         77772 High Dose Brachytherapy, 1.2 Channels       \$357.7         77772 High Dose Brachytherapy, More Than 1.2 Channels       \$357.7         77773 By Surface Application Of Radiation Source, Complex       \$324.3         77789 Supervision, Handling, Loading Of Radiation       \$152.4         77789 Supervision, Handling, Loading Of Radiation       \$15.4         77789 Supervision, Handling, Loading Of Radiation       \$35.5  |       |   | \$963.50        |
| 77615 I Hyperthermia Teatment, 5 Or More Probe Applications       \$1,043.3         77620 I Hyperthermia Generated By Intracavitary Probe(S)       \$26.6         77750 Infusion Or Instillation Of Radioelement Solution, Includes 3-Month Follow-Up Care       \$381.6         77761 Infusion Or Instillation Of Radioelement Solution, Includes 3-Month Follow-Up Care       \$391.6         77762 Application Of Organ Cavity Radiation Source, Intermediate       \$51.40         77767 High Dose Brachytherapy Through Skin Surface, 2 Channel Or Up To 2.0 Cm       \$236.6         77778 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$387.7         77771 High Dose Brachytherapy, 1 Channel       \$35.7         77771 High Dose Brachytherapy, 2 - 12 Channels       \$656.6         77772 High Dose Brachytherapy, 2 - 12 Channels       \$387.7         77778 Application OF Radiation Source, Complex       \$387.7         7778 Suprevision, Handling, Loading Of Radiation       \$15.2         7779 Suprevision, Handling, Loading Of Radiation       \$15.4         7779 Suprevision, Handling, Loading Of Radiation       \$15.4         78011 Thyroid Uptake Measurements       \$85.6         78012 Thyroid Uptake Measurements       \$85.6         78013 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)       \$241.7         78016 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Which   |       |   | \$673.08        |
| 77756 Infusion Or Instillation Of Radioelement Solution, Includes 3-Month Follow-Up Care     \$361.7       77761 Application Of Organ Cavity Radiation Source, Simple     \$31.6       77762 Application Of Organ Cavity Radiation Source, Intermediate     \$31.4       77763 Application Of Organ Cavity Radiation Source, Complex     \$722.4       77767 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm     \$387.7       77770 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm     \$387.7       77771 High Dose Brachytherapy, 1 Channels     \$352.5       77777 High Dose Brachytherapy, 2-2 12 Channels     \$352.5       77777 High Dose Brachytherapy, Where Than 1.2 Channels     \$352.5       77777 High Dose Brachytherapy, More Than 1.2 Channels     \$352.5       77778 Application Of Radiation     \$352.5       77778 Application Of Radiation     \$1262.       77789 Unisted Procedure, Clinical Brachytherapy     Price By Repo       78011 Thyroid Uptake Measurements     \$85.6       8013 Thyroid Unaging (Including Vascular Flow, When Performed);     \$178.7       78014 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg. Neck And Chest Only)     \$241.7       78015 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg. With Additional Studies (Eg. Urinary Recovery)     \$247.2       78071 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed     \$39.7 <tr< td=""><td>77615</td><td>Hyperthermia Treatment, 5 Or More Probe Applications</td><td>\$1,048.32</td></tr<>   | 77615 | Hyperthermia Treatment, 5 Or More Probe Applications  | \$1,048.32      |
| 777761       Application Of Organ Cavity Radiation Source, Intermediate       \$514.0         77762       Application Of Organ Cavity Radiation Source, Intermediate       \$514.0         77763       Application Of Organ Cavity Radiation Source, Complex       \$723.4         77766       High Dose Brachytherapy Through Skin Surface, 1 Channel Or Up To 2.0 Cm       \$236.6         77776       High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$387.3         77777       High Dose Brachytherapy, 1.2 Channels       \$352.5         77777       High Dose Brachytherapy, 2.1 2 Channels       \$352.5         77777       High Dose Brachytherapy, 4.1 2 Channels       \$357.0         77778       Application Of Radiation Source, Complex       \$320.0         77778       Surface Application Of Radiation       \$152.6         77789       Surface Application Of Radiation       \$152.6         77799       United Procedure, Clinical Brachytherapy       Price By Repo         78013       Thyroid Uptake Measurements       \$85.6         78013       Thyroid Imaging (Including Vascular Flow, When Performed);       \$176.7         78014       Thyroid Imaging With Vascular Flow       \$242.3         78015       Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body       \$242.3   | 77620 | Hyperthermia Generated By Intracavitary Probe(S)  | \$626.66        |
| 777722 Application Of Organ Cavity Radiation Source, Complex       \$723.4         777763 Application Of Organ Cavity Radiation Source, Complex       \$723.4         777767 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$383.7         77776 High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm       \$383.7         77777 High Dose Brachytherapy, 1 Channels       \$362.5         77777 High Dose Brachytherapy, 2-12 Channels       \$656.6         77777 High Dose Brachytherapy, 2-12 Channels       \$820.6         77777 High Dose Brachytherapy, More Than 12 Channels       \$937.0         77778 Application Of Radiation Source, Complex       \$820.8         7778 Supression, Handling, Loading Of Radiation       \$156.7         7779 Supression, Handling, Loading Of Radiation       \$156.7         7779 Supression, Handling, Loading Of Radiation       \$157.8         78012 Thyroid Imaging (Including Vascular Flow, When Performed);       \$178.7         78012 Thyroid Imaging (Including Vascular Flow, When Performed);       \$243.8         78013 Thyroid Imaging (Including Vascular Flow       \$243.8         78014 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg., With Additional Studies (Eg., Urinary Recovery)       \$260.3         78017 Parathyroid Planar Imaging (Including Subtraction, When Performed);       \$347.2         78071 Parathyroid Planar Imaging (In   |       | ·   | \$368.79        |
| 77763Application Of Organ Cavity Radiation Source, Complex\$723.477767High Dose Brachytherapy Through Skin Surface, 1 Channel Or Up To 2.0 Cm\$387.377776High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm\$387.377777High Dose Brachytherapy, 1 Channel\$352.577771High Dose Brachytherapy, 2.1 Channels\$352.577771High Dose Brachytherapy, 2.1 Channels\$352.577772High Dose Brachytherapy, 2.2 To Lannels\$352.677772High Dose Brachytherapy, 2.2 To Lonnels\$352.677772High Dose Brachytherapy, 2.2 To Lonnels\$352.677778Surface Application Of Radiation\$1262.677789Surface Application Of Radiation\$152.777799Unlisted Procedure, Clinical Brachytherapy\$15.477790Vinited Procedure, Clinical Brachytherapy\$15.477791Thyroid Unaging (Including Vascular Flow, When Performed);\$15.778012Thyroid Unaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$221.178015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$247.278020Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$395.7  |       |   | \$391.66        |
| 77776High Dose Brachytherapy Through Skin Surface, 1 Channel Or Up To 2.0 Cm\$336.677768High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm\$387.377771High Dose Brachytherapy, 1 Channel\$352.577771High Dose Brachytherapy, 2- 12 Channels\$656.677772High Dose Brachytherapy, 2- 12 Channels\$937.077778Application Of Radiation Source, Complex\$937.077778Application Of Radiation Source, Complex\$820.877793Surface Application Of Radiation\$156.277793Unlisted Procedure, Clinical BrachytherapyPrice By Repo78013Thyroid Uptake Measurements\$85.68013Thyroid Uptake Measurements\$85.68013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging (Including Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg., With Additional Studies (Eg., Urinary Recovery)\$243.878016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg., Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$34.878070Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed78071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed78072Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomography (C) For Anatomical Localiza  |       |   | \$514.02        |
| 777768High Dose Brachytherapy Through Skin Surface, 2 Channels Or More Than 2.0 Cm\$387.377770High Dose Brachytherapy, 1 Channel\$565.677771High Dose Brachytherapy, 2. 12 Channels\$656.677772High Dose Brachytherapy, More Than 12 Channels\$937.077778Surface Application Of Radiation Source, Complex\$920.877789Surface Application Of Radiation\$126.277799Surface Application Of Radiation\$154.777799United Procedure, Clinical BrachytherapyPrice By Repo78012Thyroid Uptake Measurements\$85.678013Thyroid Unglanging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging (Including Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$241.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$84.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$357.778071Parathyroid Planar Imaging (Including Subtraction, When Performed);\$357.778072Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$296.978072Tomography (C.) For Anatomical Localization\$369.778099Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine\$369.778101Nuclear Medicine Study Of Pada Body <td< td=""><td></td><td></td><td></td></td<>  |       |   |                 |
| 77770 High Dose Brachytherapy, 1 Channel\$352.577771 High Dose Brachytherapy, 2- 12 Channels\$656.677771 High Dose Brachytherapy, More Than 12 Channels\$937.077778 High Dose Brachytherapy, More Than 12 Channels\$937.077778 Japication Of Radiation Source, Complex\$20.877789 Surface Application Of Radiation\$154.277799 Unlisted Procedure, Clinical BrachytherapyPrice By Repo78012 Thyroid Uptake Measurements\$85.678013 Thyroid Imaging (Including Vascular Flow, When Performed);\$1787.78014 Thyroid Imaging (Including Vascular Flow\$243.878015 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg. Neck And Chest Only)\$211.178016 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg. Whole Body\$247.278020 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg. Whole Body\$247.278070 Parathyroid Planar Imaging (Including Subtraction, When Performed);\$35.778071 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$35.778072 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$35.778073 Bone Marrow Imaging; Limited Area\$296.978074 Den Marrow Imaging; Limited Area\$35.778075 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$35.778071 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$35.778072 Den Marrow Imaging; Limited Area\$340.378090 Pulisted Endoccine Trocadure, Diagnostic Nuclear Medicine<  |       |   |                 |
| 77771High Dose Brachytherapy , 2-12 Channels\$656.677772High Dose Brachytherapy , More Than 12 Channels\$937.077778Application Of Radiation Source, Complex\$820.877789Surface Application Of Radiation\$15.477799Unisted Procedure, Clinical BrachytherapyPrice By Repo78012Thyroid Uptake Measurements\$15.478013Thyroid Uptake Measurements\$85.678013Thyroid Ungaing (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging With Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg., Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg., With Additional Studies (Eg., Urinary Recovery)\$260.378017Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$357.778071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778072Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$357.778073Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$357.778074Bone Marrow Imaging; Limited Area\$147.078075Bone Marrow Imaging; With Ed. Area\$147.078103Bone Marrow Imaging; With Ed. Area<  |       |   |                 |
| 77772High Dose Brachytherapy , More Than 12 Channels\$937.077778Application Of Radiation Source, Complex\$20.877789Surface Application Of Radiation\$126.277790Supervision, Handling, Loading Of Radiation\$15.477799Unlisted Procedure, Clinical BrachytherapyPrice By Repo8012Thyroid Unlisted Procedure, Clinical Brachytherapy\$85.678012Thyroid Undake Measurements\$85.678013Thyroid Unaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging (Including Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378017Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Addition To Code For Primary Procedure)\$484.878010Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578011Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed78072Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed78073Adrenal Imaging; Cortex And/Or Medulla\$296.978074Bone Marrow Imaging; Limited Areas\$147.078103Bone Marrow Imaging; Whole Body\$199.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678121Nuclear Medicine St   |       | ů , i,  | \$656.68        |
| 77778Application Of Radiation Source, Complex\$820.877778Surface Application Of Radiation\$126.277790Supervision, Handling, Loading Of Radiation\$15.477799Unlisted Procedure, Clinical BrachytherapyPrice By Repo78012Thyroid Uptake Measurements\$85.678013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging With Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$241.878016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378017Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$48.878070Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$296.978072Tomography (Ct) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778093Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine\$174.878104Bone Marrow Imaging; Withje Area\$147.08111Nuclear Medicine Study Of Plasma, Multiple Area\$174.88112Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$74.878120 </td <td></td> <td></td> <td>\$937.04</td>   |       |   | \$937.04        |
| 77789Surface Application Of Radiation\$126.277790Supervision, Handling, Loading Of Radiation\$15.477790Unlisted Procedure, Clinical BrachytherapyPrice By Repo78012Thyroid Uptake Measurements\$85.678013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging (Including Vascular Flow, When Performed);\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378017Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$84.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778072Tomography (Cl) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778103Bone Marrow Imaging; Limited Area\$147.078110Nuclear Medicine Study Of Plasma, Multiple Areas\$174.878121Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878122Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.878122Dilution Technique)\$93.4   |       |   | \$820.80        |
| 77799Unlisted Procedure, Člinical BrachytherapyPrice By Repo78012Thyroid Uptake Measurements\$85.678013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging With Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.38018Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$34.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778072Tomography (Ct) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778099Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine\$147.078102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$70.878121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Dilution Technique)\$93.4   | 77789 | Surface Application Of Radiation  | \$126.26        |
| 78012Thyroid Uptake Measurements\$85.678013Thyroid Imaging (Including Vascular Flow, When Performed);\$178.778014Thyroid Imaging With Vascular Flow\$243.878015Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)\$211.178016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378018Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$4.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.778072Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$296.978072Tomography (Ct) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778099Unlisted Endocrine Procedure, Diagnostic Nuclear MedicinePrice By Repo78102Bone Marrow Imaging; Whitiple Area\$147.078103Bone Marrow Imaging; Whole Body\$190.778104Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$66.678120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.878122Dilution Technique)\$93.4<   |       | 1 7 07 0  | \$15.47         |
| Thyroid Imaging (Including Vascular Flow, When Performed); Thyroid Imaging With Vascular Flow \$243.8 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only) \$211.1 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery) \$260.3 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body \$247.2 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body \$247.2 Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 Thyroid Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect) Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Thyroid Planar Imaging, Cortex And/Or Medulla \$296.9 Thyroid Carcinoma Metastases Uptake (List Separately In Addition Tomographic (Spect), And Concurrently Acquired Computed Thyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Thyroid Planar Imaging, (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Thyroid Planar Imaging, Cortex And/Or Medulla Thyroid Planar Imaging, Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Thyroid Planar Imaging, Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Thyroid Planar Imaging, Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Thyroid Planar Imaging, Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Thyroid Planar Imaging, Unlisted Endocrine Thyroid Pl   |       |   | Price By Report |
| Thyroid Imaging With Vascular Flow  R8015 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)  R8016 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)  R8018 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)  R8018 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body  R8020 Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)  R8030 Parathyroid Planar Imaging (Including Subtraction, When Performed);  R8041 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)  R8051 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed  R8052 Tomography (Ct) For Anatomical Localization  R8053 Adrenal Imaging, Cortex And/Or Medulla  R8054 Adrenal Imaging, Cortex And/Or Medulla  R8055 Adrenal Imaging, Cortex And/Or Medulla  R8056 Bone Marrow Imaging; Limited Area  R8103 Bone Marrow Imaging; Limited Area  R8104 Bone Marrow Imaging; Multiple Areas  R8105 Bone Marrow Imaging; Whole Body  R8106 Nuclear Medicine Study Of Plasma, Single Samplings  R8107 Nuclear Medicine Study Of Plasma, Single Samplings  R8108 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample  Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-  R8102 Dilution Technique)   |       |   | \$85.66         |
| T8015 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Neck And Chest Only)  \$211.1 78016 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)  \$260.3 78018 Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body  Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)  \$84.8 78070 Parathyroid Planar Imaging (Including Subtraction, When Performed);  \$197.5 78071 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)  Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed  Tomography (Ct) For Anatomical Localization  \$296.9 78072 Tomography (Ct) For Anatomical Localization  \$409.7 78099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine  Price By Repo 78102 Bone Marrow Imaging; Limited Area  \$1147.0 78103 Bone Marrow Imaging; Whole Body  \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings  \$190.7 78111 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample  Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-  \$293.4   |       |   | \$178.79        |
| 78016Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, With Additional Studies (Eg, Urinary Recovery)\$260.378018Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body\$247.278020Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)\$84.878070Parathyroid Planar Imaging (Including Subtraction, When Performed);\$197.578071Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)\$357.7Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed\$296.978072Tomography (Ct) For Anatomical Localization\$296.978073Adrenal Imaging, Cortex And/Or Medulla\$409.778099Unlisted Endocrine Procedure, Diagnostic Nuclear MedicinePrice By Repo78102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.2Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-\$93.4  |       | , , ,   |                 |
| Thyroid Carcinoma Metastases Imaging; Limited Area (Eg, Whole Body Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure) \$84.8 T8070 Parathyroid Planar Imaging (Including Subtraction, When Performed); \$197.5 T8071 Parathyroid Planar Imaging (Including Subtraction, When Performed); Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect) Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed Tomography (Ct) For Anatomical Localization T8072 Tomography (Ct) For Anatomical Localization T8093 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Price By Repo T8102 Bone Marrow Imaging; Limited Area T8103 Bone Marrow Imaging; Multiple Areas T8104 Bone Marrow Imaging; Whole Body T8101 Nuclear Medicine Study Of Plasma, Single Samplings T8110 Nuclear Medicine Study Of Plasma, Multiple Samplings T8121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-T8122) Dilution Technique)  \$247.2  \$2   |       |   |                 |
| Thyroid Carcinoma Metastases Uptake (List Separately In Addition To Code For Primary Procedure)  \$84.8 78070 Parathyroid Planar Imaging (Including Subtraction, When Performed);  \$197.5 78071 Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)  Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed  Tomography (Ct) For Anatomical Localization  \$296.9 78075 Adrenal Imaging, Cortex And/Or Medulla  \$409.7 78099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine  Price By Repo  78102 Bone Marrow Imaging; Limited Area  \$147.0 78103 Bone Marrow Imaging; Multiple Areas  \$1174.8 78104 Bone Marrow Imaging; Whole Body  \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings  \$266.6 78111 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample  Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122)  Dilution Technique)  |       |   |                 |
| Rand   Parathyroid Planar Imaging (Including Subtraction, When Performed);   \$197.5  |       |   | \$84.81         |
| Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect)   \$357.7     Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed   \$296.9     78072   Tomography (Ct) For Anatomical Localization   \$296.9     78075   Adrenal Imaging, Cortex And/Or Medulla   \$409.7     78099   Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine   Price By Reporation   Price By Reporation   \$147.0     78102   Bone Marrow Imaging; Limited Area   \$147.0     78103   Bone Marrow Imaging; Multiple Areas   \$174.8     78104   Bone Marrow Imaging; Whole Body   \$190.7     78110   Nuclear Medicine Study Of Plasma, Single Samplings   \$66.6     78111   Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample   \$68.2     78121   Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples   \$74.8     Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Palaceutical Volume-Pal   |       | ,   | \$197.56        |
| Parathyroid Planar Imaging (Including Subtraction, When Performed); With Tomographic (Spect), And Concurrently Acquired Computed 78072 Tomography (Ct) For Anatomical Localization \$296.9 78075 Adrenal Imaging, Cortex And/Or Medulla \$409.7 78099 Unlisted Endocrine Procedure, Diagnostic Nuclear Medicine Price By Repo 8009 Ender of Marrow Imaging; Limited Area \$147.0 78102 Bone Marrow Imaging; Multiple Areas \$147.0 78103 Bone Marrow Imaging; Whole Body \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings \$66.6 78111 Nuclear Medicine Study Of Plasma, Multiple Samplings \$70.8 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122) Dilution Technique)  |       |   | \$357.72        |
| 78075Adrenal Imaging, Cortex And/Or Medulla\$409.778099Unlisted Endocrine Procedure, Diagnostic Nuclear MedicinePrice By Repo78102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Multiple Areas\$174.878104Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.278121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$68.2Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Patria)\$93.4  |       |   |                 |
| 78099Unlisted Endocrine Procedure, Diagnostic Nuclear MedicinePrice By Repo78102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Multiple Areas\$174.878104Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.278121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Palaceutical Volume-Palace   |       |   | \$296.94        |
| 78102Bone Marrow Imaging; Limited Area\$147.078103Bone Marrow Imaging; Multiple Areas\$174.878104Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.278121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Dilution Technique)\$93.4   |       | \$ \$\tau_{\text{\color}}\$   | \$409.71        |
| 78103 Bone Marrow Imaging; Multiple Areas \$174.8 78104 Bone Marrow Imaging; Whole Body \$190.7 78110 Nuclear Medicine Study Of Plasma, Single Samplings \$66.6 78111 Nuclear Medicine Study Of Plasma, Multiple Samplings \$70.8 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume- 78122 Dilution Technique) \$93.4  |       |   | Price By Report |
| 78104Bone Marrow Imaging; Whole Body\$190.778110Nuclear Medicine Study Of Plasma, Single Samplings\$66.678111Nuclear Medicine Study Of Plasma, Multiple Samplings\$70.878120Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample\$68.278121Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples\$74.8Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-Dilution Technique)\$93.4   |       |   | \$147.06        |
| 78110 Nuclear Medicine Study Of Plasma, Single Samplings \$66.6 78111 Nuclear Medicine Study Of Plasma, Multiple Samplings \$70.8 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4   |       |   |                 |
| 78111 Nuclear Medicine Study Of Plasma, Multiple Samplings \$70.8 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4   |       |   |                 |
| 78120 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Single Sample \$68.2 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8 Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4   |       |   | \$70.88         |
| 78121 Nuclear Medicine Study Of Red Blood Cell, Volume Determination, Multiple Samples \$74.8  Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4   |       |   | \$68.27         |
| Whole Blood Volume Determination, Including Separate Measurement Of Plasma Volume And Red Cell Volume (Radiopharmaceutical Volume-78122 Dilution Technique) \$93.4  |       | ,   | \$74.80         |
|   |       |   |                 |
| 78130 Nuclear Medicine Study Of Red Blood Cell, Red Cell Survival \$120.0   |       | 1 /   | \$93.44         |
|   | 78130 | Nuclear Medicine Study Of Red Blood Cell, Red Cell Survival   | \$120.05        |

| 78140  |  |  |
|--|--|--|
|  | Description  | Fee  |
|  | Nuclear Medicine Study Of Red Blood Cell, Sequestration  Spleen Imaging Only, With Or Without Vascular Flow  | \$106.52   |
|  |  | \$158.84   |
|  | Platelet Survival Study Lymphatics And Lymph Nodes Imaging   | \$120.05   |
|  | Nuclear Medicine Study Of Blood And Lymphatic Systems  | \$238.73<br>Price By Report  |
|  | Liver Imaging; Only  | \$175.63   |
|  | Liver Imaging; With Vascular Flow  | \$173.03   |
|  | Liver And Spleen Imaging;  | \$180.87   |
|  | Liver And Spleen Imaging; With Vascular Flow   | \$123.00   |
|  | Hepatobiliary System Imaging, Including Gallbladder When Present;  | \$332.52   |
| TOLLO  | Hepatobiliary System Imaging, Including Gallbladder When Present; With Pharmacologic Intervention, Including Quantitative Measurement(S)   | Ψ002.02  |
| 78227  | When Performed   | \$447.60   |
|  | Imaging Of Salivary Gland, Simple  | \$162.24   |
|  | Imaging Of Salivary Gland, Complex   | \$100.97   |
|  | Salivary Gland Function Study  | \$99.33  |
| 78258  | Esophageal Motility  | \$196.90   |
| 78261  | Gastric Mucosa Imaging   | \$189.26   |
| 78262  | Gastroesophageal Reflux Study  | \$225.91   |
| 78264  | Stomach Emptying Study   | \$224.41   |
| 78265  | Stomach Emptying And Small Bowel Transit Study   | \$360.00   |
| 78266  | Stomach Emptying And Small Bowel With Colon Transit Study  | \$403.94   |
| 78267  | Nuclear Medicine Study Of Digestive Tract, Acquisition   | \$11.06  |
|  | Nuclear Medicine Study Of Digestive Tract, Analysis  | \$94.41  |
|  | Acute Gastrointestinal Blood Loss Imaging  | \$235.05   |
|  | Nuclear Medicine Study To Assess Protein Loss Into The Digestive Tract   | Price By Report  |
| 78290  | Intestine Imaging  | \$222.34   |
| 78291  | Peritoneal-Venous Shunt Patency Test (Eg, For Leveen, Denver Shunt)  | \$241.28   |
| 78299  | Unlisted Gastrointestinal Procedure, Diagnostic Nuclear Medicine   | Price By Report  |
|  | Bone And/Or Joint Imaging; Limited Area  | \$192.11   |
| 78305  | Bone And/Or Joint Imaging, Multiple Areas  | \$207.43   |
| 78306  | Bone And/Or Joint Imaging, Whole Body  | \$235.39   |
| 78315  | Bone And/Or Joint Imaging, 3 Phase Study   | \$267.00   |
| 78350  | Bone Density (Bone Mineral Content) Study Single Photon Absorptiometry   | \$39.70  |
| 78351  | Bone Density (Bone Mineral Content) Study  | \$80.45  |
| 78399  | Unlisted Musculoskeletal Procedure, Diagnostic Nuclear Medicine  | Price By Report  |
|  | Determination Of Central C-V Hemodynamics (Non-Imaging) (Eg, Ejection Fraction With Probe Technique) With Or Without Pharmacologic   |  |
| 78414  | Intervention Or Exercise, Single Or Multiple Determinations  | \$24.50  |
| 78428  | Cardiac Shunt Detection  | \$173.26   |
|  | Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation And Concurrently Acquired Ct Transmission Scan   | \$86.39  |
| 78430  | Single Nuclear Medicine Study Of Blood Flow In Heart Muscle With Concurrently Acquired Ct Transmission Scan  | \$81.95  |
|  |  |  |
|  | Multiple Nuclear Medicine Studies Of Blood Flow In Heart Muscle At Rest And With Stress, With Concurrently Acquired Ct Transmission Scan   | \$95.22  |
| 78432  | Combined Nuclear Medicine Study Of Blood Flow In Heart Muscle With Metabolic Evaluation  | \$101.48   |
| 70.400   | Control Note to Marking State Of Plant Florida Hand Mark With Mark II. For hard Advanced Advanced Of Transition Con  | φ101. <del>4</del> 8   |
| T 78433  |  |  |
|  | Combined Nuclear Medicine Study Of Blood Flow In Heart Muscle With Metabolic Evaluation And Concurrently Acquired Ct Transmission Scan   | \$110.87   |
| 78434  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle   | \$110.87<br>\$32.15  |
| 78434  |  | \$110.87   |
| 78434  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle   | \$110.87<br>\$32.15  |
| 78434<br>78445   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle  Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  | \$110.87<br>\$32.15  |
| 78434<br>78445   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction  | \$110.87<br>\$32.15<br>\$193.32  |
| 78434<br>78445<br>78451  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre  | \$110.87<br>\$32.15<br>\$193.32  |
| 78434<br>78445<br>78451<br>78452   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle  Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre  Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique,  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24  |
| 78434<br>78445<br>78451<br>78452<br>78453  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle  Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre  Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic)  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69  |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle  Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre  Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic)  Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise   | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94  |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle  Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre  Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic)  Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise  Acute Venous Thrombosis Imaging, Peptide   | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81  |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38  |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26  |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78459   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78459<br>78466  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78466<br>78468  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique   | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78466<br>78468  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78466<br>78468  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique   | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78466<br>78468  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78466<br>78469<br>78472   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, Suth Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Function Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99   |
| 78434<br>78445<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78456<br>78468<br>78469<br>78462<br>78472  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arms Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass   | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99   |
| 78434<br>78445<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78466<br>78468<br>78469<br>78472<br>78473  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique   | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99   |
| 78434<br>78445<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78466<br>78468<br>78469<br>78472<br>78473  | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arms Venography For Blood Clot In Vein, One Leg Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass   | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78468<br>78469<br>78472<br>78473<br>78481<br>78483<br>78491                            | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99<br>\$233.56<br>\$266.56   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78468<br>78469<br>78472<br>78473<br>78481<br>78483<br>78491                            | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle  Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre  Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic)  Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise  Acute Venous Thrombosis Imaging, Peptide  Venography For Blood Clot In Vein, One Leg Or Arm  Venography For Blood Clot In Veins, Both Legs Or Arms  Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation  Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative  Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique  Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  Nuclear Medicine Study Of Blood Flow In Heart Muscle  Multiple Nuclear Medicine Study Of Blood Flow In Heart Muscle  Multiple Nuclear Medicine Study Of Blood Flow In Heart Muscle At Rest  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99<br>\$233.56<br>\$266.56   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78466<br>78469<br>78472<br>78473<br>78481<br>78491<br>78492                            | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle  Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic)  Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise  Acute Venous Thrombosis Imaging, Peptide  Venography For Blood Clot In Vein, One Leg Or Arm  Venography For Blood Clot In Veins, Both Legs Or Arms  Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation  Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative  Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique  Nuclear Medicine Study Of Heart Muscle Following Heart Attack, With Computer Tomography  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium  Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  Single Nuclear Medicine Study Of Blood Flow In Heart Muscle At Rest And With Stress  Cardiac Blood Pool Imaging, Gated Equilibrium, Spect, At Rest, Wall Motion Study Plus Ejection Fraction,  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99<br>\$233.56<br>\$266.56<br>\$164.10<br>\$224.06<br>\$74.78<br>\$94.54   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78466<br>78469<br>78472<br>78473<br>78481<br>78491<br>78492                            | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle  Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre  Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic)  Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise  Acute Venous Thrombosis Imaging, Peptide  Venography For Blood Clot In Vein, One Leg Or Arm  Venography For Blood Clot In Vein, One Leg Or Arms  Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation  Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative  Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies  Single Nuclear Medicine Stu | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99<br>\$233.56<br>\$266.56<br>\$164.10<br>\$224.06<br>\$74.78  |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78469<br>78468<br>78469<br>78472<br>78473<br>78481<br>78483<br>78491<br>78494 | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (Ie, Angiography, Venography) Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, Gated Equilibrium Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Single Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine St | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99<br>\$233.56<br>\$266.56<br>\$164.10<br>\$224.06<br>\$74.78<br>\$94.54   |
| 78434<br>78445<br>78452<br>78453<br>78454<br>78456<br>78457<br>78458<br>78469<br>78469<br>78473<br>78481<br>78483<br>78491<br>78494<br>78494                   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple S | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99<br>\$233.56<br>\$266.56<br>\$164.10<br>\$224.06<br>\$74.78<br>\$94.54   |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78468<br>78469<br>78473<br>78481<br>78483<br>78491<br>78492<br>78494                   | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Mulscle Following Heart Attack, With Computer Tomography  Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Blood Flow In Heart Muscle Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine Study Of Blood Flow In Heart Muscle Nuclear Medicine Study Of Blood Flow In Heart Muscle Multiple Nuclear Medicine Study Of Blood  | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99<br>\$233.56<br>\$266.56<br>\$164.10<br>\$224.06<br>\$74.78<br>\$94.54<br>\$211.51<br>\$40.57<br>Price By Report |
| 78434<br>78445<br>78451<br>78452<br>78453<br>78454<br>78456<br>78457<br>78466<br>78469<br>78473<br>78481<br>78491<br>78494<br>78494<br>78496<br>78499<br>78579 | Nuclear Medicine Absolute Quantification Of Blood Flow In Heart Muscle Non-Cardiac Vascular Flow Imaging (le, Angiography, Venography)  Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Ex Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stre Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Myocardial Perfusion Imaging, Planar (Including Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Single Study, At Rest Or Stress (Exercise Or Pharmacologic) Nuclear Medicine Multiple Studies Of Vessels Of Heart At Rest, Using Drugs, Or Exercise Acute Venous Thrombosis Imaging, Peptide Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Vein, One Leg Or Arm Venography For Blood Clot In Veins, Both Legs Or Arms Single Nuclear Medicine Study Of Heart Muscle With Metabolic Evaluation Myocardial Imaging, Infarct Avid, Planar; Qualitative Or Quantitative Myocardial Imaging, Infarct Avid, Planar; With Ejection Fraction By First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest Or Stress With Evaluation Of Blood Ejection From Heart, Multiple Studies Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Single Study, First Pass Technique Nuclear Medicine Study Of Heart Wall Motion At Rest And Stress With Evaluation Of Blood Ejection From Heart, Multiple S | \$110.87<br>\$32.15<br>\$193.32<br>\$243.26<br>\$413.24<br>\$271.69<br>\$398.94<br>\$288.81<br>\$166.38<br>\$190.26<br>\$74.41<br>\$179.13<br>\$181.10<br>\$203.99<br>\$233.56<br>\$266.56<br>\$164.10<br>\$224.06<br>\$74.78<br>\$94.54   |

| Code  | Description  | Fee  |
|---|--|--|
|   | Pulmonary Ventilation (Eg, Aerosol Or Gas) And Perfusion Imaging   | \$339.79   |
|   | Quantitative Differential Pulmonary Perfusion, Including Imaging When Performed  | \$206.06   |
|   | Quantitative Differential Pulmonary Perfusion And Ventilation (Eg, Aerosol Or Gas), Including Imaging When Performed   | \$279.54   |
|   | Unlisted Respiratory Procedure, Diagnostic Nuclear Medicine  | Price By Report  |
|   | Imaging Of Brain, Less Than 4 Static Views   | \$169.43   |
|   | Imaging Of Brain With Blood Flow, Less Than 4 Static Views   | \$162.60   |
|   | Imaging Of Brain With Blood Flow, Minimum Of 4 Static Views Without Vascular Flow Measurement  Imaging Of Brain With Blood Flow, Minimum Of 4 Static Views With Vascular Flow Measurement  | \$184.47<br>\$221.14   |
|   | Brain Imaging, Positron Emission Tomography (Pet); Metabolic Evaluation  | \$72.24  |
|   | Brain Imaging, Positron Emission Tomography (Fet); Perfusion Evaluation  | \$69.01  |
|   | Imaging Of Brain, Blood Flow   | \$161.14   |
|   | Cerebrospinal Fluid Flow, Imaging; Cisternography (Not Including Introduction Of Material)   | \$311.05   |
|   | Cerebrospinal Fluid Flow, Imaging; Ventriculography (Not Including Introduction Of Material)   | \$310.39   |
|   | Cerebrospinal Fluid Flow, Imaging; Shunt Evaluation  | \$297.41   |
| 78650   | Cerebrospinal Fluid Leakage Detection And Localization   | \$255.77   |
|   | Radiopharmaceutical Dacryocystography  | \$171.38   |
|   | Unlisted Nervous System Procedure, Diagnostic Nuclear Medicine   | Price By Report  |
|   | Kidney Imaging; Only   | \$157.59   |
|   | Kidney Imaging; With Vascular Flow   | \$203.77   |
|   | Nuclear Medicine Study Of Kidney With Assessment Of Blood Flow And Function, Without Drugs, Single Study  Nuclear Medicine Study Of Kidney With Assessment Of Blood Flow And Function, With Drugs, Single Study  | \$249.73   |
|   | Nuclear Medicine Study Of Kidney With Assessment Of Blood Flow And Function, With Or Without Drugs, Multiple Studies  Nuclear Medicine Study Of Kidney With Assessment Of Blood Flow And Function, With Or Without Drugs, Multiple Studies   | \$185.85<br>\$249.22   |
|   | Kidney Function Study, Non-Imaging Radioisotopic Study   | \$116.17   |
|   | Urinary Bladder Residual Study   | \$69.77  |
|   | Ureteral Reflux Study (Radiopharmaceutical Voiding Cystogram)  | \$200.71   |
|   | Testicular Imaging   | \$195.49   |
| 78799   | Unlisted Genitourinary Procedure, Diagnostic Nuclear Medicine  | Price By Report  |
|   |  |  |
| 78800   | Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Single Area, 1 Day Of Imaging   | \$233.21   |
|   | Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Multiple Areas, Or In Single Area   | ****   |
| 78801   | With Imaging Over Multiple Days  | \$231.76   |
| 70002   | Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Whole Body, Single Day Imaging  | \$246.13   |
| 70002   | Nacieal Medicine Eccalization of Tunior of minamination of Study of Distribution of Nacionative Tracer in Whole Body, Single Bay imaging   | \$240.13   |
| 78803   | Spect Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Single Area, 1 Day Of Imaging   | \$295.06   |
|   | Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Whole Body, 2 Or More Days  | <del></del>  |
| 78804   | Imaging  | \$585.12   |
| 78808   | Injection Procedure For Radiopharmaceutical Localization By Non-Imaging Probe Study, Intravenous (Eg, Parathyroid Adenoma)   | \$38.49  |
|   | Positron Emission Tomography (Pet) Imaging; Limited Area (Eg, Chest, Head/Neck)  | \$75.54  |
|   | Positron Emission Tomography (Pet) Imaging; Skull Base To Mid-Thigh  | \$93.25  |
| 78813   | Positron Emission Tomography (Pet) Imaging; Whole Body   | \$94.07  |
| 70044   | Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomography (Ct) For Attenuation Correction And Anatomical   | ¢400.70  |
| 78814   | Localization Imaging; Limited Area (Eg, Chest, Head/Neck)  Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomography (Ct) For Attenuation Correction And Anatomical  | \$106.76   |
| 78815   | Localization Imaging; Skull Base To Mid-Thigh  | \$4,972.87   |
| 70010   | Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomography (Ct) For Attenuation Correction And Anatomical   | ψ 1,01 2.01  |
| 78816   | Localization Imaging; Whole Body   | \$4,972.87   |
|   | Spect Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Single Area, With   |  |
| 78830   | Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging   | \$495.80   |
|   | Spect Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Multiple Areas, Or In Single  | <u>.</u>   |
| 78831   | Area With Imaging Over Multiple Days   | \$650.11   |
|   | Spect Nuclear Medicine Localization Of Tumor Or Inflammation Or Study Of Distribution Of Radioactive Tracer In Multiple Areas, Or In Single  |  |
| 70000   |  | <b>0000 40</b>   |
|   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging  | \$993.48<br>\$91.91  |
| 78835   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer   | \$91.91  |
| 78835<br>78999  | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine   | \$91.91<br>Price By Report   |
| 78835<br>78999<br>79005   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration   | \$91.91<br>Price By Report<br>\$142.98   |
| 78835<br>78999<br>79005<br>79101  | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine   | \$91.91<br>Price By Report   |
| 78835<br>78999<br>79005<br>79101<br>79200   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled  | \$91.91<br>Price By Report<br>\$142.98<br>\$139.68   |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300  | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration   | \$91.91<br>Price By Report<br>\$142.98<br>\$139.68<br>\$128.66   |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration   | \$91.91<br>Price By Report<br>\$142.98<br>\$139.68<br>\$128.66<br>\$87.99  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer  Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration   | \$91.91<br>Price By Report<br>\$142.98<br>\$139.68<br>\$128.66<br>\$87.99<br>\$179.14<br>\$115.90<br>\$114.62                                  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer  Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radioactive Material Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure   | \$91.91<br>Price By Report<br>\$142.98<br>\$139.68<br>\$128.66<br>\$87.99<br>\$179.14<br>\$115.90  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445<br>79999  | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer  Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified   | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445<br>79999  | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer  Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radioactive Material Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure   | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445<br>79999  | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administered  | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445<br>79999  | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radioactive Material Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified   | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445<br>79999  | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administered  | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445<br>79999<br>90460                                     | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radioactive Material Therapy, By Interstitial Radioactive Colloid Administration Radioactive Material Therapy Into Vein, Radiolabeled Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co  | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report  |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445<br>79999<br>90460                                     | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Or Intramuscular Injections); One Vaccine (Single Or   | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$17.17                                 |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79403<br>79440<br>79445<br>79999<br>90460                                     | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer  Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Or Intramuscular Injections); One Vaccine (Single Or Combination Vaccine/Toxoid)  | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$17.17                                 |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79440<br>79445<br>79999<br>90460<br>90461<br>90471                            | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy Into Vein, Not Radiolabeled Radiopharmaceutical Therapy, By Intracavitary Administration Radioactive Material Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine (Single Or Combination Vaccine/Toxoid) (List Separately In Addition To Co Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$17.17                                 |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79440<br>79445<br>79999<br>90460<br>90471<br>90472<br>90473                   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer  Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy, By Oral Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administered  Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Intramuscular Injections); One Vaccine (Single Or Combination Vaccine/Toxoid)  Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Intramuscular And Jet Injections And/Or Intranasal Or Oral Administration); Each Additional Vaccine (Single Or Combination Vaccine/Toxoid) (List Separately In Addition To Co Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid)  Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid)  Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid)                       | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$179.14 \$115.90 \$114.62 Price By Report \$17.17 \$15.58 \$11.59 \$11.59          |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79440<br>79445<br>79999<br>90460<br>90471<br>90472<br>90473                   | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer  Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy, By Oral Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Radiopharmaceutical Therapy, By Intra-Arterial Particulate Administration Unlisted Radiopharmaceutical Therapy and Intra-Arterial Particulate Administration (Intra-Arterial Particulate Administration (Intra-Arterial Particulate Administration Vaccine (Single Or Combination Vaccine) (Intra-Arterial Particulate Administration Parti | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$17.17 \$15.58 \$11.59 \$11.37 \$11.59 |
| 78835<br>78999<br>79005<br>79101<br>79200<br>79300<br>79440<br>79445<br>79999<br>90460<br>90471<br>90472<br>90473<br>90480<br>90480 | Area With Imaging Over Multiple Days, With Concurrently Acquired Ct Transmission Scan, 1 Day Of Imaging Quantification Of Radioactive Tracer  Unlisted Miscellaneous Procedure, Diagnostic Nuclear Medicine Radiopharmaceutical Therapy, By Oral Administration Radioactive Material Therapy, By Oral Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Intracavitary Administration Radiopharmaceutical Therapy, By Interstitial Radioactive Colloid Administration Radiopharmaceutical Therapy, By Intra-Articular Administration Unlisted Radiopharmaceutical Therapeutic Procedure Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; First Or Only Component Of Each Vaccine Or Toxoid Administered  Immunization Administration Through 18 Years Of Age Via Any Route Of Administration, With Counseling By Physician Or Other Qualified Health Care Professional; Each Additional Vaccine Or Toxoid Component Administered (List Separately In Addition To Co Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Intramuscular Injections); One Vaccine (Single Or Combination Vaccine/Toxoid)  Immunization Administration (Includes Percutaneous, Intradermal, Subcutaneous, Intramuscular And Jet Injections And/Or Intranasal Or Oral Administration); Each Additional Vaccine (Single Or Combination Vaccine/Toxoid) (List Separately In Addition To Co Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid)  Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid)  Immunization Administration By Intranasal Or Oral Route; One Vaccine (Single Or Combination Vaccine/Toxoid)                       | \$91.91 Price By Report \$142.98 \$139.68 \$128.66 \$87.99 \$1179.14 \$115.90 \$114.62 Price By Report \$177.17 \$15.58 \$11.59 \$11.59        |

| Cada  | Description  | Faa  |
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|   | Description  Pagainstone Supportial Virgo Vaccina Prof. Pagambinant, Subunit, Adjuvanted, Ear Introduceular Llea   | Fee  |
|   | Respiratory Syncytial Virus Vaccine, Pref, Recombinant, Subunit, Adjuvanted, For Intramuscular Use Respiratory Syncytial Virus Vaccine Mrna Lipid Nanoparticles  | Price By Report Price By Report  |
|   | Psychiatric Diagnostic Evaluation  | \$131.91   |
|   | Psychiatric Diagnostic Evaluation With Medical Services  | \$136.20   |
|   | Psychotherapy, 30 Minutes  | \$64.17  |
|   | Psychotherapy Performed With Evaluation And Management Visit, 30 Minutes   | \$50.14  |
|   | Psychotherapy, 45 Minutes  | \$85.44  |
|   | Psychotherapy With Evaluation And Management Visit, 45 Minutes   | \$75.14  |
|   | Psychotherapy, 60 Minutes  | \$127.97   |
|   | Psychotherapy With Evaluation And Management Visit, 60 Minutes   | \$100.28   |
|   | Psychotherapy For Crisis, First 60 Minutes   | \$113.91   |
| 90840   | Psychotherapy For Crisis; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Service)   | \$56.95  |
|   | Psychoanalysis   | \$89.97  |
|   | Family Psychotherapy, 50 Minutes   | \$96.11  |
|   | Family Psychotherapy Including Patient, 50 Minutes   | \$69.10  |
|   | Multiple Family Group Psychotherapy (With Patient Present); Trtmt Limited To Pymt For 40 Hrs Of Individual Psychotherapy In Combination  |  |
| 90849   | W/All Other Trtmt Codes For Indep Mh Practitioners Only. Equal To 260 Units In 365-Days For Adults Only.   | \$58.72  |
|   | Group Psychotherapy (Other Than Of A Multiple-Family Group); Trtmt Limited To Pymt For 40 Hrs Of Individual Psychotherapy In Combination   |  |
| 90853   | W/All Other Trtmt Codes For Indep Mh Practitioners Only. Equal To 260 Units In 365-Days Adults Only.   | \$58.72  |
|   | Pharmacologic Management, Including Prescription And Review Of Medication, When Performed With Psychotherapy Services (List Separately   |  |
| 90863   | In Addition To The Code For Primary Procedure)   | \$56.97  |
| 90865   | Narcosynthesis For Psychiatric Diagnostic And Therapeutic Purposes (Eg, Sodium Amobarbital (Amytal) Interview)   | \$156.92   |
|   | Transcranial Magnetic Stimulation Treatment (Stimulates Nerve Cells In Brain To Improve Symptoms Of Depression), Initial Delivery And  |  |
| 90867   | Management   | \$177.09   |
| 1 7   | Transcranial Magnetic Stimulation Treatment (Stimulates Nerve Cells In Brain To Improve Symptoms Of Depression), Subsequent Delivery And   |  |
| 90868   | Management, Per Session  | \$117.23   |
|   | Transcranial Magnetic Stimulation Treatment (Stimulates Nerve Cells In Brain To Improve Symptoms Of Depression), Subsequent Motor  |  |
|   | Threshold Re-Determination With Delivery And Management  | \$254.79   |
|   | Electroconvulsive Therapy (Includes Necessary Monitoring)  | \$121.14   |
|   | Environmental Intervention For Management Of Medical Conditions  | \$15.89  |
| 90887   | Explanation Of Psychiatric, Medical Examinations, Procedures, And Data To Responsible Person   | \$0.01   |
|   | Unlisted Psychiatric Service Or Procedure. For 655-657 Diagnostic Assessment With Significant Others With Below Svc. Limits. Also Used For   |  |
|   | School Districts Rate X 15 Min UnitsNo Service Limit.  | \$32.39  |
|   | Hemodialysis Procedure With Single Evaluation By A Physician Or Other Qualified Health Care Professional   | \$74.54  |
|   | Hemodialysis Procedure Requiring Repeated Evaluation(S) With Or Without Substantial Revision Of Dialysis Prescription  | \$106.89   |
| 90940   | Hemodialysis Access Flow Study To Determine Blood Flow In Grafts And Arteriovenous Fistulae By An Indicator Method   | Price By Report  |
|   | Dialysis Procedure Other Than Hemodialysis (Eg, Peritoneal Dialysis, Hemofiltration, Or Other Continuous Renal Replacement Therapies), With  |  |
| 90945   | Single Evaluation By A Physician Or Other Qualified Health Care Professional   |  |
|   |  | \$88.83  |
| 90947   | Dialysis Procedure Requiring Repeat Evaluation   | \$127.63   |
| 90947<br>90951  | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age   | \$127.63<br>\$1,101.61   |
| 90947<br>90951<br>90952   | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age   | \$127.63<br>\$1,101.61<br>\$582.61   |
| 90947<br>90951<br>90952<br>90953  | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51   |
| 90947<br>90951<br>90952<br>90953<br>90954   | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955  | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age   | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956   | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age   | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957  | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90958   | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90958<br>90959  | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age   | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90958<br>90959<br>90960   | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90958<br>90959<br>90960   | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$778.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90958<br>90960<br>90961<br>90962  | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90960<br>90961<br>90962<br>90963  | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services Per Month, Patient Younger Than 2 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90960<br>90961<br>90962<br>90963  | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services Per Month, Patient Younger Than 2 Years Of Age  Home Dialysis Services Per Month, Patient 2-11 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90960<br>90961<br>90963<br>90964<br>90965   | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services Per Month, Patient 2-11 Years Of Age  Home Dialysis Services Per Month, Patient 12-19 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90956<br>90957<br>90958<br>90960<br>90961<br>90962<br>90963<br>90964<br>90965<br>90966   | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services Per Month, Patient Younger Than 2 Years Of Age Home Dialysis Services Per Month, Patient 12-11 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age Older  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90956<br>90957<br>90958<br>90960<br>90961<br>90962<br>90963<br>90966<br>90966<br>90966   | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services Per Month, Patient Younger Than 2 Years Of Age  Home Dialysis Services Per Month, Patient 12-19 Years Of Age  Home Dialysis Services Per Month, Patient 20 Years Of Age  Home Dialysis Services Per Month, Patient 20 Years Of Age  Home Dialysis Services Per Month, Patient 20 Years Of Age  Home Dialysis Services, Per Day (Less Than Full Month Service), Patient Younger Than 2 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46   |
| 90947<br>90951<br>90952<br>90953<br>90954<br>90955<br>90956<br>90957<br>90960<br>90961<br>90962<br>90963<br>90966<br>90966<br>90966<br>90967  | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Home Dialysis Services Per Month, Patient Younger Than 2 Years Of Age  Home Dialysis Services Per Month, Patient 2-11 Years Of Age  Home Dialysis Services Per Month, Patient 20 Years Of Age  Home Dialysis Services Per Month, Patient 20 Years Of Age  Home Dialysis Services Per Month, Patient 20 Years Of Age  Home Dialysis Services Per Month, Patient 20 Years Of Age  Dialysis Services, Per Day (Less Than Full Month Service), Patient Younger Than 2 Years Of Age  Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age   | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46   |
| 90947<br>90951<br>90952<br>90953<br>90955<br>90956<br>90957<br>90958<br>90969<br>90961<br>90962<br>90963<br>90964<br>90965<br>90966<br>90967<br>90968   | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (2-3 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services Per Month, Patient Younger Than 2 Years Of Age  Home Dialysis Services Per Month, Patient 2-11 Years Of Age  Home Dialysis Services Per Month, Patient 20 Years Of Age  Dialysis Services, Per Day (Less Than Full Month Service), Patient Younger Than 2 Years Of Age  Dialysis Services, Per Day (Less Than Full Month Service), Patient 12-19 Years Of Age  Dialysis Services, Per Day (Less Than Full Month Service), Patient 12-19 Years Of Age  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46<br>\$116.25<br>\$116.25   |
| 90947<br>90951<br>90952<br>90953<br>90956<br>90956<br>90957<br>90960<br>90961<br>90962<br>90963<br>90966<br>90966<br>90968<br>90968<br>90969<br>90969   | Dialysis Procedure Requiring Repeat Evaluation  Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient Younger Than 2 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age  Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visits Per Month), Patient 20 Years Of Age And Older  Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older  Dialysis Services Per Month, Patient Younger Than 2 Years Of Age  Home Dialysis Services Per Month, Patient 2-11 Years Of Age  Home Dialysis Services Per Month, Patient 12-19 Years Of Age  Home Dialysis Services Per Month, Patient 12-19 Years Of Age  Home Dialysis Services Per Month, Patient 12-19 Years Of Age  Dialysis Services, Per Day (Less Than Full Month Service), Patient Younger Than 2 Years Of Age  Dialysis Services, Per Day (Less Than Full Month Service), Patient 12-19 Years Of Age  Dialysis Services, Per Day (Less Than Full Month Service), Patient 20 Years Of Age Or Older  | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46<br>\$16.58<br>\$16.25<br>\$116.58   |
| 90947<br>90951<br>90952<br>90953<br>90955<br>90956<br>90957<br>90958<br>90960<br>90961<br>90962<br>90963<br>90964<br>90965<br>90966<br>90967<br>90969<br>90969  | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services Per Month, Patient 2-11 Years Of Age Home Dialysis Services Per Month, Patient 2-11 Years Of Age Home Dialysis Services Per Month, Patient 2-19 Years Of Age Home Dialysis Services Per Month, Patient 20 Years Of Age Or Older Dialysis Services, Per Day (Less Than Full Month Service), Patient Younger Than 2 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Ye | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46<br>\$16.58<br>\$16.25<br>\$15.25<br>\$8.55  |
| 90947<br>90951<br>90952<br>90953<br>90955<br>90956<br>90957<br>90960<br>90961<br>90962<br>90963<br>90964<br>90965<br>90966<br>90967<br>90968<br>90969<br>90969<br>90969   | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services Per Month, Patient 20 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient Younger Than 2 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 20 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 20 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service) | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46<br>\$16.58<br>\$16.25<br>\$15.93<br>\$8.55<br>\$82.68   |
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| 90947<br>90951<br>90952<br>90953<br>90954<br>90956<br>90956<br>90957<br>90960<br>90961<br>90962<br>90963<br>90964<br>90965<br>90966<br>90967<br>90968<br>90969<br>90970<br>90997<br>91010<br>91010<br>91022<br>91030<br>91034   | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (3-2 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (2-3 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services Per Month, Patient 12-11 Years Of Age Home Dialysis Services Per Month, Patient 12-11 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age Dialysis Services Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Mon | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46<br>\$16.25<br>\$15.93<br>\$8.55<br>\$82.68<br>\$160.95<br>\$274.85<br>\$167.46<br>\$141.62                      |
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| 90947<br>90951<br>90952<br>90953<br>90956<br>90956<br>90957<br>90960<br>90961<br>90961<br>90963<br>90964<br>90965<br>90968<br>90966<br>90967<br>90968<br>90969<br>90970<br>91010<br>91013<br>91020<br>91034<br>91035<br>91037   | Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1-4 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1-4 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1-4 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1-4 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1-4 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1-4 Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (1-4 Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (1-4 Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (1-4 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1-4 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1-4 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (1-4 Physician Visit Per Month), Patient 20 Years Of Age Home Dialysis Services Per Month, Patient Younger Than 2 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Ag | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46<br>\$16.58<br>\$16.25<br>\$15.93<br>\$8.55<br>\$82.68<br>\$162.95<br>\$274.85<br>\$141.62<br>\$204.95           |
| 90947<br>90951<br>90952<br>90953<br>90955<br>90955<br>90956<br>90957<br>90960<br>90961<br>90962<br>90963<br>90964<br>90965<br>90966<br>90967<br>90997<br>91010<br>91013<br>91020<br>91030<br>91035<br>91037<br>91038<br>91040   | Dialysis Services (2 or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2 or Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Drivation Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (1 Physician Visit Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2 or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2 or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (2 or More Physician Visits Per Month), Patient 20 Years Of Age Dialysis Services (2 or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (2 or Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (1 Physician Visit Per Month), Patient 20 Years Of Age And Older Dialysis Services (2 or Month, Patient 2-11 Years Of Age Home Dialysis Services Per Month, Patient 2-11 Years Of Age Home Dialysis Services Per Month, Patient 2-11 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-11 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 2-19 Years Of Age Dialysis Services, Per Da | \$127.63<br>\$1,101.61<br>\$582.61<br>\$333.51<br>\$946.82<br>\$490.60<br>\$325.13<br>\$708.13<br>\$475.56<br>\$310.33<br>\$312.44<br>\$251.58<br>\$181.27<br>\$569.59<br>\$488.76<br>\$480.88<br>\$250.46<br>\$16.58<br>\$16.25<br>\$16.25<br>\$15.93<br>\$8.55<br>\$82.68<br>\$160.95<br>\$25.29<br>\$274.85<br>\$141.62 |
| 90947<br>90951<br>90952<br>90953<br>90955<br>90956<br>90956<br>90957<br>90960<br>90961<br>90962<br>90963<br>90964<br>90965<br>90966<br>90967<br>90968<br>90969<br>90970<br>91010<br>91013<br>91020<br>91030<br>91034<br>91035<br>91037<br>91038<br>91040<br>91065   | Dialysis Procedure Requiring Repeat Evaluation Dialysis Services (4 Or More Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (1 Physician Visits Per Month), Patient Younger Than 2 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (2-3 Physician Visits Per Month), Patient 2-11 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 2-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 12-19 Years Of Age Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (4 Or More Physician Visits Per Month), Patient 20 Years Of Age And Older Dialysis Services (5 Per Month), Patient 12 Years Of Age And Older Dialysis Services (6 Yensice Per Month), Patient 12 Years Of Age And Older Dialysis Services Per Month, Patient 12-19 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age Home Dialysis Services Per Month, Patient 12-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient Younger Than 2 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 12-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 12-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 12-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Patient 12-19 Years Of Age Dialysis Services, Per Day (Less Than Full Month Service), Pati | \$127.63 \$1,101.61 \$582.61 \$333.51 \$946.82 \$440.60 \$325.13 \$708.13 \$475.56 \$310.33 \$312.44 \$251.58 \$181.27 \$569.59 \$488.76 \$480.88 \$250.46 \$16.58 \$16.25 \$15.93 \$8.55 \$82.68 \$160.95 \$25.29 \$274.85 \$167.46 \$141.62 \$204.95   |
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|   | Description  | Fee   |
|---|--|---|
|   | Description Imaging Of Colon Using Capsule Endoscope, With Interpretation And Report   | \$832.50  |
|   | Measurement Of Colon Movement, Minimum 6 Hours Continuous Recording  | \$126.86  |
| 91120   | Rectal Sensation, Tone, And Compliance Test (le, Response To Graded Balloon Distention)  | \$405.92  |
|   | Anorectal Manometry  | \$195.65  |
|   | Electrogastrography, Diagnostic, Transcutaneous;   | \$458.50  |
|   | Electrogastrography, Diagnostic, Transcutaneous; With Provocative Testing  | \$479.44  |
|   | Measuring The Stiffness In The Liver Via Elastography  | \$34.01   |
|   | Unlisted Diagnostic Gastroenterology Procedure  New Patient Problem Focused Exam Of Visual System  | Price By Report   |
|   | New Patient Problem Focused Exam Of Visual System  New Patient Complete Exam Of Visual System  | \$76.52<br>\$143.94   |
|   | Established Patient Problem Focused Exam Of Visual System  | \$80.46   |
|   | Established Patient Complete Exam Of Visual System   | \$117.24  |
|   | Assessment For Prescription Eye Wear Using A Range Of Lens Powers  | \$13.29   |
|   | Complete Exam Of Visual System Under General Anesthesia  | \$143.70  |
| 92019   | Limited Exam Of Visual System Under General Anesthesia   | \$69.16   |
|   | Exam Of The Internal Drainage System Of Eye  | \$28.99   |
|   | Ct Scan Of Cornea  | \$35.29   |
|   | Exam To Measure Eye Deviation And Range Of Motion  | \$43.82   |
|   | Orthoptic And/Or Pleoptic Training, With Continuing Medical Direction And Evaluation   | \$44.52   |
|   | Eye Training Exercise Under Supervision Of Health Care Professional  Fitting Of Contact Lens For Treatment Of Ocular Surface Disease   | \$23.29<br>\$32.62  |
|   | Fitting Of Contact Lens For Management Of Corneal Condition  | \$88.83   |
|   | Exam Of Visual Field With Limited Testing  | \$34.78   |
|   | Exam Of Visual Field With Intermediate Testing   | \$48.94   |
|   | Exam Of Visual Field With Extended Testing   | \$66.38   |
|   | Multiple Measurements Of Eye Fluid Pressure Over An Extended Time Period   | \$81.32   |
| 92132   | Scanning Computerized Ophthalmic Diagnostic Imaging, Anterior Segment, With Interpretation And Report, Unilateral Or Bilateral   | \$32.96   |
|   |  |   |
| 92133   | Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment, With Interpretation And Report, Unilateral Or Bilateral; Optic Nerve   | \$38.77   |
| 00404   | Consider Constant of Orbitales in Discussive Instant of Constant With Interreptation And Donot United and Orbitales Delicated in Delicated in Constant of Constant | <b>#</b> 40.77  |
|   | Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment, With Interpretation And Report, Unilateral Or Bilateral; Retina  Ophthalmic Biometry By Partial Coherence Interferometry With Intraocular Lens Power Calculation   | \$42.77   |
|   | Corneal Hysteresis Determination   | \$52.57<br>\$12.97  |
|   | Extended Examination Of Eye With Drawing Of Retina   | \$25.96   |
|   | Extended Examination Of Eye With Drawing Of Optic Nerve And Surrounding Area (Macula)  | \$16.51   |
|   | Imaging Of Retina For Disease Detection, With Review And Report By Remote Clinical Staff   | \$15.16   |
| 92228   | Imaging Of Retina For Disease Detection, With Review And Report By Remote Healthcare Professional  | \$29.00   |
| 92229   | Imaging Of Retina For Disease Detection, With Automated Review And Report At Point Of Care   | \$44.76   |
|   | Exam Of Retinal Blood Vessels Using An Endoscope After Injection Of A Dye  | \$93.32   |
|   | Exam Of Retinal Blood Vessels Using A Special Camera After Injection Of A Dye  | \$140.99  |
| 92240   | Exam Of Blood Vessels Between The White Part Of Eye And Retina Using A Special Camera After Injection Of A Dye   | \$208.88  |
| 92242   | Exam Of Retinal Blood Vessels And Blood Vessels Between The White Part Of Eye And Retina Using A Special Camera After Injection Of A   | \$240.27  |
|   | Photography Of The Retina  | \$39.13   |
|   | Measurement Of Eye Artery Pressure   | \$18.76   |
|   | Measurement Of Eye Muscle Electrical Activity And Their Nerve Cells With Needle Electrode  | \$82.31   |
|   | Measurement Of Eye Movement  | \$104.00  |
| 92273   | Full Field Recording Of Retinal Electrical Responses To External Stimuli With Interpretation And Report  | \$134.82  |
|   | Multifocal Recording Of Retinal Electrical Responses To External Stimuli With Interpretation And Report  | \$82.96   |
|   | Extended exam involving color vision testing   | \$37.82   |
|   | Dark Adaptation Examination With Interpretation And Report   | \$54.96   |
|   | Photography Of Content Of Eyes   | \$24.23   |
|   | Imaging Of Front Third Of Eye Using A Special Microscope Imaging Of Front Third Of Eye Using A Special Camera After Injection Of A Dye   | \$41.32<br>\$131.06   |
| 32201   | imaging of Frenchilla of Eyo Obing A opecial outriola Alter Injection of A Dyc   | 00.IC و   |
| 92310   | Contact Lens Services Both Eves  |   |
|   | Contact Lens Services Both Eyes Contact Lens Services 1 Eye Where Natural Lens Is Absent   | \$30.95   |
| 92311   | Contact Lens Services Both Eyes  Contact Lens Services 1 Eye Where Natural Lens Is Absent  Contact Lens Services Both Eyes Where Natural Lens Is Absent  |   |
| 92311<br>92312  | Contact Lens Services 1 Eye Where Natural Lens Is Absent   | \$30.95<br>\$101.93   |
| 92311<br>92312<br>92313   | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent  | \$30.95<br>\$101.93<br>\$91.46  |
| 92311<br>92312<br>92313<br>92315<br>92316   | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317  | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician   | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51  |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326   | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens   | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.53<br>\$98.23<br>\$83.51<br>\$41.92   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370  | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51<br>\$41.92   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>92499   | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services 9 Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure   | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>92499<br>92502  | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia   | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>92499<br>92502<br>92504   | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure)  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>92499<br>92502<br>92504<br>92507  | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report<br>\$102.73<br>\$30.49  |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>92499<br>92502<br>92504<br>92507<br>92508   | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure)  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>92499<br>92502<br>92504<br>92507<br>92508<br>92511  | Contact Lens Services 1 Eye Where Natural Lens Is Absent  Contact Lens Services Both Eyes Where Natural Lens Is Absent  Contact Lens Services For Lens Covering Entire Cornea  Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician  Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician  Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician  Replacement Of Contact Lens  Repair And Refitting Of Spectacles  Unlisted Ophthalmological Service Or Procedure  Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia  Binocular Microscopy (Separate Diagnostic Procedure)  Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder  Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$33.51<br>\$41.92<br>\$31.14<br>Price By Report<br>\$102.73<br>\$30.49<br>\$22.62<br>\$17.42  |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>9249<br>92502<br>92504<br>92507<br>92508<br>92511   | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure)  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$77.58<br>\$98.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report<br>\$102.73<br>\$30.49<br>\$22.62<br>\$17.42  |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92316<br>92370<br>92499<br>92502<br>92504<br>92507<br>92508<br>92511<br>92512<br>92516<br>92520                            | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services 5 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing)  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report<br>\$102.73<br>\$30.49<br>\$22.62<br>\$17.42<br>\$127.32<br>\$43.50   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92316<br>92326<br>92326<br>92502<br>92504<br>92507<br>92508<br>92511<br>92512<br>92516<br>92520                            | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing) Evaluation Of Speech Fluency   | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.58<br>\$98.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report<br>\$102.73<br>\$30.49<br>\$22.62<br>\$17.42<br>\$127.32<br>\$43.50<br>\$66.19  |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92316<br>92317<br>92326<br>92320<br>92502<br>92504<br>92507<br>92508<br>92511<br>92512<br>92516<br>92520<br>92521          | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing) Evaluation Of Speech Sound Production  | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$79.38<br>\$88.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report<br>\$102.73<br>\$30.49<br>\$22.62<br>\$17.42<br>\$127.32<br>\$43.50<br>\$66.19<br>\$78.61   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>92499<br>92502<br>92504<br>92507<br>92508<br>92511<br>92512<br>92516<br>92520<br>92522<br>92522 | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing) Evaluation Of Speech Sound Production Evaluation Of Speech Sound Production With Evaluation Of Language Comprehension And Expression   | \$30.95<br>\$101.93<br>\$91.46<br>\$90.39<br>\$77.86<br>\$88.23<br>\$83.51<br>\$41.92<br>\$31.14<br>Price By Report<br>\$102.73<br>\$30.49<br>\$22.62<br>\$17.42<br>\$127.32<br>\$43.50<br>\$66.19<br>\$78.61<br>\$96.23<br>\$82.80   |
| 92311<br>92312<br>92313<br>92315<br>92316<br>92317<br>92326<br>92370<br>92499<br>92502<br>92504<br>92507<br>92511<br>92512<br>92520<br>92521<br>92523<br>92523          | Contact Lens Services 1 Eye Where Natural Lens Is Absent Contact Lens Services Both Eyes Where Natural Lens Is Absent Contact Lens Services For Lens Covering Entire Cornea Contact Lens Services 1 Eye Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services Both Eyes Where Natural Lens Is Absent With Fitting By Independent Technician Contact Lens Services For Lens Covering Entire Cornea With Fitting By Independent Technician Replacement Of Contact Lens Replacement Of Contact Lens Repair And Refitting Of Spectacles Unlisted Ophthalmological Service Or Procedure Examination Of Head, Neck, Including Ears, Nose And Throat Under General Anesthesia Binocular Microscopy (Separate Diagnostic Procedure) Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Group Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder Nasopharyngoscopy With Endoscope (Separate Procedure) Nasal Function Studies, Eg, Rhinomanometry Facial Nerve Function Studies (Eg, Electroneuronography) Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing) Evaluation Of Speech Sound Production  | \$30.9<br>\$101.9<br>\$91.4<br>\$90.3<br>\$79.5<br>\$98.2<br>\$83.5<br>\$41.9<br>\$102.7<br>\$30.4<br>\$22.6<br>\$17.4<br>\$127.3<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43.5<br>\$43 |

| Code   | Description  | Fee  |
|--|--|--|
|  | Spontaneous Nystagmus, Including Gaze  | \$0.01   |
|  | Positional Nystagmus Test  | \$0.01   |
| 92533  | Caloric Vestibular Test, Each Irrigation (Binaural, Bithermal Stimulation Constitutes Four Tests)  | \$21.06  |
| 92534  | Optokinetic Nystagmus Test   | \$0.01   |
| 92537  | Assessment And Recording Of Balance System During Hot And Cold Irrigation Of Both Ears   | \$44.08  |
| 92538  | Assessment And Recording Of Balance System During Irrigation Of Both Ears  | \$21.48  |
| 92540  | Observation, Testing, And Recording Of Abnormal Eye Movement   | \$106.61   |
| 92541  | Spontaneous Nystagmus Test, Including Gaze And Fixation Nystagmus, With Recording  | \$26.78  |
| 92542  | Positional Nystagmus Test, Minimum Of 4 Positions, With Recording  | \$30.78  |
| 92544  | Optokinetic Nystagmus Test, Bidirectional, Foveal Or Peripheral Stimulation, With Recording  | \$16.91  |
| 92545  | Oscillating Tracking Test, With Recording  | \$17.69  |
| 92546  | Sinusoidal Vertical Axis Rotational Testing  | \$120.36   |
| 92547  | Use Of Vertical Electrodes (List Separately In Addition To Code For Primary Procedure)   | \$10.14  |
| 92548  | Computerized Dynamic Assessment Of Balance And Postural Instability  | \$46.45  |
| 92550  | Tympanometry And Reflex Threshold Measurements   | \$23.17  |
| 92551  | Screening Test, Pure Tone, Air Only  | \$14.89  |
| 92552  | Pure Tone Audiometry (Threshold) Air Only  | \$23.58  |
| 92553  | Pure Tone Audiometry (Threshold) Air And Bone  | \$30.43  |
| 92555  | Speech Audiometry Threshold;   | \$17.83  |
| 92556  | Speech Audiometry Threshold; With Speech Recognition   | \$28.14  |
| 92557  | Comprehensive Audiometry Threshold Evaluation And Speech Recognition (92553 And 92556 Combined)  | \$39.39  |
|  | Evoked Otoacoustic Emissions, Screening (Qualitative Measurement Of Distortion Product Or Transient Evoked Otoacoustic Emissions),   |  |
| 92558  | Automated Analysis   | \$12.55  |
|  | Loudness Balance Test, Alternate Binaural Or Monaural  | \$44.27  |
|  | Tone Decay Test  | \$22.39  |
|  | Stenger Test, Pure Tone  | \$18.10  |
| 92567  | Tympanometry (Impedance Testing)   | \$17.57  |
|  | Acoustic Reflex Testing; Threshold   | \$16.24  |
|  | Acoustic Immittance Testing, Includes Tympanometry (Impedance Testing), Acoustic Reflex Threshold Testing, And Acoustic Reflex Decay   | ·  |
| 92570  | Testing  | \$35.30  |
|  | Filtered Speech Test   | \$27.26  |
| 92572  | Assessment Of Hearing Using (Ssw) Word Test  | \$42.81  |
|  | Sensorineural Acuity Level Test  | \$67.63  |
|  | Synthetic Sentence Identification Test   | \$36.41  |
|  | Stenger Test, Speech   | \$19.75  |
|  | Visual Reinforcement Audiometry (Vra)  | \$34.74  |
|  | Conditioning Play Audiometry   | \$54.37  |
|  | Select Picture Audiometry  | \$35.57  |
|  | Electrocochleography   | \$110.12   |
| 02001  | Distortion Product Evoked Otoacoustic Emissions; Limited Evaluation (To Confirm The Presence Or Absence Of Hearing Disorder, 3-6   | Ψ110.12  |
| 92587  | Frequencies) Or Transient Evoked Otoacoustic Emissions, With Interpretation And Report   | \$23.14  |
| 0200.  | Distortion Product Evoked Otoacoustic Emissions; Comprehensive Diagnostic Evaluation (Quantitative Analysis Of Outer Hair Cell Function By   | Ψ20  |
| 92588  | Cochlear Mapping, Minimum Of 12 Frequencies), With Interpretation And Report   | \$35.86  |
|  | Hearing Aid Examination And Selection; Monaural  |  |
|  |  |  |
|  | Hearing Aid Examination And Selection: Binaural  | \$304.20   |
| 92591  | Hearing Aid Examination And Selection; Binaural Hearing Aid Check: Monaural  | \$304.20<br>\$286.90   |
| 92591<br>92592   | Hearing Aid Check; Monaural  | \$304.20<br>\$286.90<br>\$20.19  |
| 92591<br>92592<br>92593  | Hearing Aid Check; Monaural<br>Hearing Aid Check; Binaural   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52   |
| 92591<br>92592<br>92593<br>92594   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18  |
| 92591<br>92592<br>92593<br>92594<br>92595  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62   |
| 92591<br>92592<br>92593<br>92594<br>92595  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603   | Hearing Aid Check; Monaural  Hearing Aid Check; Binaural  Electroacoustic Evaluation For Hearing Aid; Monaural  Electroacoustic Evaluation For Hearing Aid; Binaural  Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech  Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92596<br>92601<br>92602<br>92603<br>92604  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient;  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$668.32   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92596<br>92601<br>92602<br>92603<br>92604  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92596<br>92601<br>92602<br>92603<br>92604  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$668.32   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92602<br>92603<br>92604<br>92605<br>92606   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient;   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92602<br>92603<br>92604<br>92605<br>92606   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603<br>92604<br>92605<br>92607  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient;  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603<br>92604<br>92605<br>92606  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure)   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603<br>92604<br>92605<br>92607<br>92608   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification  Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92602<br>92603<br>92604<br>92605<br>92607<br>92608<br>92608<br>92609<br>92610   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92603<br>92604<br>92605<br>92606<br>92607<br>92608<br>92609<br>92610<br>92611  | Hearing Aid Check; Monaural  Hearing Aid Check; Binaural  Electroacoustic Evaluation For Hearing Aid; Monaural  Electroacoustic Evaluation For Hearing Aid; Binaural  Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech  Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure)  Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification  Evaluation Of Oral And Pharyngeal Swallowing Function  Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92601<br>92602<br>92603<br>92604<br>92605<br>92606<br>92607<br>92608<br>92609<br>92610<br>92611  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Using An Endoscope  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$86.71  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92602<br>92603<br>92604<br>92606<br>92606<br>92607<br>92608<br>92609<br>92611<br>92611<br>92612  | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modificati | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$86.71<br>\$171.24  |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92596<br>92602<br>92603<br>92604<br>92605<br>92606<br>92607<br>92608<br>92610<br>92611<br>92611<br>92613<br>92613                            | Hearing Aid Check; Binaural  Electroacoustic Evaluation For Hearing Aid; Monaural  Electroacoustic Evaluation For Hearing Aid; Binaural  Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech  Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure)  Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification  Evaluation Of Oral And Pharyngeal Swallowing Function By Cine Or Video Recording  Evaluation And Recording Of Swallowing Using An Endoscope  Evaluation And Recording Of Voice Box Sensory Function Using An Endoscope   | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$86.71<br>\$171.24<br>\$37.93   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603<br>92604<br>92605<br>92607<br>92608<br>92609<br>92610<br>92611<br>92612<br>92613<br>92614                   | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient, First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Fach Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation Of Oral And Pharyngeal Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Using An Endoscope Evaluation, Recording, And Interpretation Of Voice Box Sensory Function Using An Endoscope  | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$86.71<br>\$171.24<br>\$37.93<br>\$139.57                                   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603<br>92604<br>92605<br>92607<br>92608<br>92609<br>92610<br>92611<br>92612<br>92613<br>92614<br>92615<br>92616 | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient, First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure) Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification Evaluation For Face Vital And Pharyngeal Swallowing Function Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording Evaluation And Recording Of Swallowing Using An Endoscope Evaluation, Recording, And Interpretation Of Voice Box Sensory Function Using An Endoscope Evaluation And Recording Of Swallowing And Voice Box Sensory Function Using An Endoscope              | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$17.24<br>\$37.93<br>\$139.57<br>\$30.54                                    |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603<br>92604<br>92605<br>92607<br>92608<br>92609<br>92610<br>92611<br>92612<br>92613<br>92614<br>92615<br>92616 | Hearing Aid Check; Monaural Hearing Aid Check; Binaural Electroacoustic Evaluation For Hearing Aid; Monaural Electroacoustic Evaluation For Hearing Aid; Binaural Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation For Prescription For Speech-Generating Device, Including Programming And Modification Evaluation And Recording Of Swallowing Using An Endoscope Evaluation And Recording Of Swallowing Using An Endoscope Evaluation And Recording Of Swallowing And Voice Box Sensory Function Using An Endoscope Evaluation And Recording Of Swallowing And Voice Box Sensory Function Using An Endoscope Evaluation And Recording Of Swallowing And Voice Box Sensory Function Using An En | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$86.71<br>\$171.24<br>\$37.93<br>\$139.57                                   |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92603<br>92604<br>92605<br>92606<br>92607<br>92610<br>92611<br>92612<br>92613<br>92614<br>92615<br>92617                   | Hearing Aid Check; Binaural  Hearing Aid Check; Binaural  Electroacoustic Evaluation For Hearing Aid; Monaural  Electroacoustic Evaluation For Hearing Aid; Binaural  Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech  Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Ider  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Or Older  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure)  Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification  Evaluation Of Oral And Paryngeal Swallowing Function By Cine Or Video Recording  Evaluation And Recording Of Swallowing Using An Endoscope  Evaluation, Recording, And Interpretation Of Swallowing Using An Endoscope  Evaluation And Recording Of Voice Box Sensory Function Using An Endoscope  Evaluation, Recording, And Interpretation Of Swallowing And Voice Box Sensory Function Using An Endoscope  Evaluation For Prescri | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$86.71<br>\$171.24<br>\$37.93<br>\$139.57<br>\$30.54<br>\$206.63<br>\$38.18 |
| 92591<br>92592<br>92593<br>92596<br>92596<br>92596<br>92597<br>92601<br>92602<br>92603<br>92606<br>92607<br>92607<br>92610<br>92611<br>92612<br>92613<br>92614<br>92615<br>92617                   | Hearing Aid Check; Binaural  Hearing Aid Check; Binaural  Electroacoustic Evaluation For Hearing Aid; Monaural  Electroacoustic Evaluation For Hearing Aid; Binaural  Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Fach Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure)  Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification  Evaluation Of Oral And Pharyngeal Swallowing Function Motion Fluoroscopic Evaluation Of Swallowing Using An Endoscope  Evaluation And Recording Of Swallowing Using An Endoscope  Evaluation, Recording, And Interpretation Of Swallowing Using An Endoscope  Evaluation And Recording, And Interpretation Of Swallowing Swallowing And Voice Box Sensory Function Using An Endoscope  Evaluation And Recording, And Interpretation Of Swallowing And Voice | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$86.71<br>\$171.24<br>\$37.93<br>\$139.57<br>\$30.54<br>\$206.63<br>\$38.18             |
| 92591<br>92592<br>92593<br>92596<br>92596<br>92596<br>92601<br>92602<br>92603<br>92606<br>92607<br>92607<br>92610<br>92611<br>92612<br>92613<br>92614<br>92615<br>92617<br>92618                   | Hearing Aid Check; Binaural  Hearing Aid Check; Binaural  Electroacoustic Evaluation For Hearing Aid; Monaural  Electroacoustic Evaluation For Hearing Aid; Binaural  Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech  Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Ider  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Or Older  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older  Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure)  Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification  Evaluation Of Oral And Paryngeal Swallowing Function By Cine Or Video Recording  Evaluation And Recording Of Swallowing Using An Endoscope  Evaluation, Recording, And Interpretation Of Swallowing Using An Endoscope  Evaluation And Recording Of Voice Box Sensory Function Using An Endoscope  Evaluation, Recording, And Interpretation Of Swallowing And Voice Box Sensory Function Using An Endoscope  Evaluation For Prescri | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$171.24<br>\$37.93<br>\$139.57<br>\$30.54<br>\$206.63<br>\$38.18            |
| 92591<br>92592<br>92593<br>92594<br>92595<br>92596<br>92597<br>92601<br>92602<br>92603<br>92604<br>92607<br>92606<br>92607<br>92610<br>92611<br>92612<br>92613<br>92614<br>92615<br>92616<br>92617 | Hearing Aid Check; Binaural  Hearing Aid Check; Binaural  Electroacoustic Evaluation For Hearing Aid; Monaural  Electroacoustic Evaluation For Hearing Aid; Binaural  Ear Protector Attenuation Measurements  Evaluation For Use And/Or Fitting Of Voice Prosthetic Or Augmentative/Alternative Communication Device To Supplement Oral Speech Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Programming Of Inner Ear (Cochlear) Implant, Patient Younger Than 7 Years Of Age Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Analysis And Reprogramming Of Inner Ear (Cochlear) Implant, Patient Age 7 Years Or Older Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification  Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; Fach Additional 30 Minutes (List Separately In Addition To Code For Primary Procedure)  Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification  Evaluation Of Oral And Pharyngeal Swallowing Function Motion Fluoroscopic Evaluation Of Swallowing Using An Endoscope  Evaluation And Recording Of Swallowing Using An Endoscope  Evaluation, Recording, And Interpretation Of Swallowing Using An Endoscope  Evaluation And Recording, And Interpretation Of Swallowing Swallowing And Voice Box Sensory Function Using An Endoscope  Evaluation And Recording, And Interpretation Of Swallowing And Voice | \$304.20<br>\$286.90<br>\$20.19<br>\$25.52<br>\$47.18<br>\$28.62<br>\$66.60<br>\$68.17<br>\$168.61<br>\$103.58<br>\$155.62<br>\$68.32<br>\$0.01<br>\$0.01<br>\$117.99<br>\$46.57<br>\$91.83<br>\$89.91<br>\$86.71<br>\$171.24<br>\$37.93<br>\$139.57<br>\$30.54<br>\$20.63             |

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|---------|---|---------------------|
|         | Description Analysis, Programming, And Verification Of Sound Processor For Bone-Anchored Inner Ear Implant, First Hour  | Fee<br>\$69.30      |
|         | Analysis, Programming, And Verification Of Sound Processor For Bone-Anchored Inner Ear Implant, First Hour  | \$17.79             |
|         | Assessment Of Tinnitus (Includes Pitch, Loudness Matching, And Masking)   | \$67.69             |
|         | Evaluation Of Hearing Function To Determine Candidacy For, Or Postoperative Status Of, Surgically Implanted Hearing Device; First Hour  | \$90.91             |
|         | Evaluation Of Hearing Function To Determine Candidacy For, Or Postoperative Status Of, Surgically Implanted Hearing Device; Additional 15   | *                   |
| 92627   | Minutes   | \$19.73             |
|         | Auditory Rehabilitation; Pre-Lingual Hearing Loss   | Price By Report     |
|         | Auditory Rehabilitation; Post-Lingual Hearing Loss  | Price By Report     |
|         | Analysis With Programming Of Auditory Brainstem Implant, Per Hour   | \$105.78            |
|         | Screening Evaluation Of Brain Response To Sound With Automated Analysis   | \$29.80             |
|         | Evaluation Of Brain Response To Sound For Determination Of Hearing Status With Interpretation And Report  | \$91.57             |
|         | Evaluation Of Brain Response To Sound For Determination Of Hearing Threshold With Interpretation And Report  Evaluation Of Brain Response To Sound For Diagnosis Of Nervous System Disorders With Interpretation And Report | \$119.88<br>\$87.73 |
|         | Ear, Nose, Or Throat Procedure  | \$87.73<br>\$16.24  |
| 32700   | Ear, Nose, of filloat Focusio   | ψ10.24              |
| 92920   | Balloon Dilation Of Narrowed Or Blocked Major Coronary Artery Or Branch (Accessed Through The Skin), Each Additional Artery Or Branch   | \$510.92            |
|         | Balloon Dilation Of Narrowed Or Blocked Major Coronary Artery Or Branch (Accessed Through The Skin), Single Artery Or Branch  | \$0.01              |
| 92924   | Removal Of Plaque Of Major Coronary Artery Or Branch, Accessed Through The Skin, Single Artery Or Branch  | \$608.76            |
| 92928   | Catheter Placement Of Stents In Major Coronary Artery Or Branch, Accessed Through The Skin, Each Additional Artery Or Branch  | \$568.33            |
|         | Catheter Placement Of Stents In Major Coronary Artery Or Branch, Accessed Through The Skin, Single Artery Or Branch   | \$0.01              |
|         | Removal Of Plaque And Insertion Of Stent In Major Coronary Artery Or Branch, Accessed Through The Skin, Single Artery Or Branch   | \$637.06            |
|         | Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel, Accessed Through The Skin, Single Vessel, Including Distal  | *                   |
| 92937   | Protection When Performed   | \$567.61            |
| 92938   | Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel, Accessed Through The Skin, Each Additional Branch   | \$0.01              |
|         | Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel During Heart Attack, Accessed Through The Skin   | \$638.51            |
| 92943   | Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel, Accessed Through The Skin, Single Vessel  | \$638.26            |
|         | Insertion Of Stent, Removal Of Plaque And/Or Balloon Dilation Of Coronary Vessel, Accessed Through The Skin, Each Additional Artery,  |                     |
|         | Branch Or Graft   | \$0.01              |
|         | Cardiopulmonary Resuscitation (Eg, In Cardiac Arrest)   | \$357.86            |
|         | Temporary Transcutaneous Pacing   | \$0.85              |
|         | Cardioversion, Electrical Conversion Of Arrhythmia, External  | \$163.82            |
|         | Cardioversion, Electrive, Electrical Conversion Of Arrhythmia; Internal (Separate Procedure)  | \$215.29            |
|         | Cardioassist-Method Of Circulatory Assist; Internal   | \$164.10            |
|         | Cardioassist-Method Of Circulatory Assist; External  Shockwave Destruction Of Calcified Plaque In Coronary Artery Accessed Through Skin Using Catheter  | \$87.07<br>\$121.58 |
|         | Removal Of Blood Clot In Heart Artery, Accessed Through The Skin  | \$170.43            |
| 32313   | Transcatheter Placement Of Radiation Delivery Device For Subsequent Coronary Intravascular Brachytherapy (List Separately In Addition To  | ψ170.43             |
| 92974   | Code For Primary Procedure)   | \$140.16            |
| 92975   | Thrombolysis, Coronary; By Intracoronary Infusion, Including Selective Coronary Angiography   | \$326.01            |
| 92977   | Thrombolysis, Coronary; By Intravenous Infusion   | \$52.98             |
| 92978   | Ultrasound Evaluation Of Heart Blood Vessel Or Graft, Initial Vessel  | \$96.90             |
|         | Ultrasound Evaluation Of Heart Blood Vessel Or Graft, Each Additional Vessel  | \$73.72             |
|         | Catheter Based Repair Of Left Lower Heart (Aortic) Valve, Accessed Through The Skin   | \$1,159.45          |
|         | Catheter Based Repair Of Heart Valve (Mitral) Between Left Upper And Lower Chambers, Accessed Through The Skin  | \$1,198.79          |
|         | Catheter Based Repair Of Heart Valve (Pulmonary) To Lungs, Accessed Through The Skin  | \$1,000.38          |
|         | Balloon Catheter Opening Of Major Lung Artery (Pulmonary), Accessed Through The Skin, Single Vessel   | \$620.14            |
|         | Balloon Catheter Opening Of Major Lung Artery (Pulmonary), Accessed Through The Skin, Each Additional Vessel  | \$307.32            |
|         | Electrocardiogram, Routine Ecg With At Least 12 Leads; With Interpretation And Report   | \$14.78             |
|         | Electrocardiogram, Routine Ecg With At Least 12 Leads; Tracing Only, Without Interpretation And Report  Electrocardiogram, Routine Ecg With At Least 12 Leads; Interpretation And Report Only                               | \$6.30<br>\$8.48    |
|         |   |                     |
| 93015   | Exercise Or Drug-Induced Heart And Blood Vessel Stress Test With Ekg Monitoring, Physician Supervision, Interpretation, And Report  | \$74.76             |
| 93016   | Cardiovascular Stress Test Using Maximal Or Submaximal Treadmill Or Bicycle Exercise, Continuous Electrocardiographic Monitoring, And/Or Pharmacological Stress; Supervision Only, Without Interpretation And Report        | \$22.42             |
| 93017   | Cardiovascular Stress Test Using Maximal Or Submaximal Treadmill Or Bicycle Exercise; Tracing Only, Without Interpretation And Report   | \$37.32             |
|         | Exercise Or Drug-Induced Heart And Blood Vessel Stress Test With Ekg Monitoring, Physician Interpretation And Report  | \$15.03             |
|         | Ergonovine Provocation Test   | \$103.59            |
|         | Microvolt T-Wave Alternans For Assessment Of Ventricular Arrhythmias  | \$115.56            |
|         | Rhythm Ecg, One To Three Leads; With Interpretation And Report  | \$12.97             |
|         | Rhythm Ecg, One To Three Leads; Tracing Only Without Interpretation And Report  | \$5.34              |
|         | Rhythm Ecg, One To Three Leads; Interpretation And Report Only  | \$7.04              |
|         | Analysis Of Pressure Of Upper Limb Artery With Interpretation And Report  | \$14.94             |
|         | Activation Of Implanted Phrenic Nerve Stimulator  | \$87.02             |
|         | Evaluation And Programming Of Implanted Phrenic Nerve Stimulator System  Evaluation And Programming Of Implanted Phrenic Nerve Stimulator System During Sleep Study   | \$75.83             |
|         | Evaluation And Programming Of Implanted Phrenic Nerve Stimulator System During Sleep Study  Evaluation Of Implanted Phrenic Nerve Stimulator System   | \$136.73<br>\$44.95 |
|         | Heart Rhythm Tracing, Analysis, And Interpretation Of 48-Hour EKG, Includes Recording, Scanning Analysis With Report  | \$80.31             |
| 93224   | External Electrocardiographic Recording Up To 48 Hours By Continuous Rhythm Recording And Storage; Recording (Includes Connection,  | \$80.31             |
| 93225   | Recording, And Disconnection)   | \$20.48             |
|         | Heart Rhythm Analysis, Interpretation And Report Of 48-Hour EKG   | \$40.46             |
|         | Heart Rhythm Tracing, Analysis, And Interpretation Of 48-Hour EKG, Includes Recording, Scanning Analysis With Report  | \$19.38             |
|         | Heart Rhythm Tracing, Computer Analysis, And Interpretation Of Patient-Triggered Events Greater Than 24-Hour EKG Up To 30 Days  | \$26.30             |
|         | Heart Rhythm Tracing, Computer Analysis, Physician Prescribed Transmission Of Patient-Triggered Events Greater Than 24-Hour EKG Up To   |                     |
| 93229   | 30 Days   | \$922.38            |
|         |   |                     |

| Code          | Description   | Fee                  |
|---------------|---|----------------------|
| 93241         | Heart Rhythm Recording, Analysis, Report, Review, And Interpretation Of Continous External Ekg Over More Than 48 Hours Up To 7 Days   | \$239.86             |
|               | Heart Rhythm Recording Continous External EKG Over More Than 48 Hours Up To 7 Days  | \$14.40              |
|               | Heart Rhythm Analysis And Report Of Continous External EKG Over More Than 48 Hours Up To 7 Days  Heart Rhythm Review, And Interpretation Of Continous External EKG Over More Than 48 Hours Up To 7 Days   | \$208.41             |
|               |   | \$22.16              |
|               | Heart Rhythm Recording, Analysis, Interpretation And Report Of Continous External EKG Over More Than 1 Week Up To 1 Weeks  Heart Rhythm Recording Of Continous External EKG Over 8-15 Days  | \$252.67             |
|               | Heart Rhythm Analysis And Report Of Continous External EKG Over 8-15 Days   | \$14.40<br>\$219.09  |
|               | Heart Rhythm Review And Interpretation Of Continous External EKG Over 8-15 Days   | \$24.35              |
|               |   | •                    |
|               | Programming Device Evaluation Of Heart Monitoring System With Adjustment Of Programmed Values With Analysis, Review And Report  | \$72.83              |
|               | Evaluation Of Defibrillator With Analysis, Review, And Report   | \$66.44              |
| 93264         | Remote Monitoring Of Wireless Pressure Sensor In Lung Artery With Qualified Health Care Professional Analysis, Review, And Report   | \$39.03              |
| 93268         | External Patient And, When Performed, Auto Activated Electrocardiographic Rhythm Derived Event Recording With Symptom-Related Memory Loop With Remote Download Capability Up To 30 Days, 24-Hour Attended Monitoring; Includes Transmission, Review And Int   | \$197.81             |
| 93270         | External Patient And, When Performed, Auto Activated Electrocardiographic Rhythm Derived Event Recording With Symptom-Related Memory Loop With Remote Download Capability Up To 30 Days, 24-Hour Attended Monitoring; Recording (Includes Connection, Record  | \$8.85               |
| 93271         | External Patient And, When Performed, Auto Activated Electrocardiographic Rhythm Derived Event Recording With Symptom-Related Memory Loop With Remote Download Capability Up To 30 Days, 24-Hour Attended Monitoring; Transmission Download And Analysis      | \$163.28             |
|               | External Patient And, When Performed, Auto Activated Electrocardiographic Rhythm Derived Event Recording With Symptom-Related Memory Loop With Remote Download Capability Up To 30 Days, 24-Hour Attended Monitoring; Review And Interpretation By A Physicia | \$25.68              |
| 93278         | Signal-Averaged Electrocardiography (Saecg), With Or Without Ecg  | \$27.36              |
| 93279         | Evaluation, Testing, And Programming Adjustment Of Permanent Single Lead Pacemaker System In One Chamber Of Heart With Qualified Health Care Professional Analysis, Review, And Report  | \$59.16              |
| 93280         | Evaluation, Testing, And Programming Adjustment Of Permanent Dual Lead Pacemaker System With Physician Analysis, Review, And Report   | \$70.09              |
| 93281         | Evaluation, Testing, And Programming Adjustment Of Permanent Multiple Lead Pacemaker System With Physician Analysis, Review, And Report   | \$81.59              |
| 93282         | Evaluation, Testing And Programming Adjustment Of Defibrillator With Analysis, Review And Report, Single Lead Defibrillator System  | \$74.99              |
| 93283         | Evaluation, Testing And Programming Adjustment Of Defibrillator With Analysis, Review And Report, Dual Lead Defibrillator System  | \$96.46              |
| 93284         | Evaluation, Testing And Programming Adjustment Of Defibrillator With Analysis, Review And Report, Multiple Lead Defibrillator System  | \$108.27             |
| 02205         | Evaluation, Testing, And Programming Adjustment Of Heart Rhythm Monitor System Implanted Under Skin With Qualified Health Care  | ¢40.00               |
| 93285         | Professional Analysis, Review, And Report  Evaluation, Testing, And Programming Adjustment Of Single, Dual, Or Multiple Lead Pacemaker System Before Or After Surgery, Procedure,   | \$49.98              |
| 93286         | Or Test With Qualified Health Care Professional Analysis, Review, And Report  | \$33.75              |
| 93287         | Evaluation And Programming Adjustment Of Defibrillator With Analysis, Review And Report   | \$39.25              |
|               | Evaluation Of Parameters Of Leadless, Single, Dual, Or Multiple Lead Pacemaker System With Qualified Health Care Professional Analysis,   | <b>*</b> 4 4 00      |
|               | Review, And Report  Evaluation Of Defibrillator Including Connection, Recording And Disconnection   | \$44.63<br>\$76.81   |
| 93209         | Evaluation Of Parameters Of Implantable Heart And Blood Vessel Monitor System With Qualified Health Care Professional Analysis, Review,   | \$70.01              |
| 93290         | And Report  | \$39.10              |
| 93291         | Evaluation Of Heart Rhythm Monitor System Implanted Under Skin With Qualified Health Care Professional Analysis, Review, And Report   | \$43.04              |
|               | Evaluation Of Wearable Defibrillator System Including Connection, Disconnection, Recording, Physician Analysis, Review, And Report  | \$49.73              |
| 93293         | Telephonic Evaluation Of Single, Dual, Or Multiple Lead Pacemaker Heart Rhythm Strips Up To 90 Days   | \$50.76              |
| 93294         | Remote Evaluations Of Single, Dual, Or Multiple Lead Pacemaker System With Qualified Health Care Professional Analysis, Review, And Report, Up To 90 Days   | \$31.03              |
|               | Remote Evaluations Of Defibrillator Up To 90 Days With Analysis, Review And Report  | \$38.42              |
|               | Remote Evaluations Of Single, Dual, Or Multiple Lead Pacemaker System Or Implantable Defibrillator System With Technician Review, Support   | *                    |
| 93296         | And Distribution Of Results, Up To 90 Days  Remote Evaluations Of Implantable Heart And Blood Vessel Monitor System With Qualified Health Care Professional Analysis, Review, And   | \$24.83              |
| 93297         | Report, Up To 30 Days   | \$27.03              |
|               | Remote Evaluations Of Heart Rhythm Monitor System Implanted Under Skin With Qualified Health Care Professional Analysis, Review, And Report, Up To 30 Days  | \$27.03              |
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|               | Echocardiography, Transesophageal, Real Time With Image Documentation (2D) (With Or Without M-Mode Recording); Including Probe Placement, Image Acquisition, Interpretation And Report  | \$256.83             |
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| 39451 [insertion Of Catheter for Dagnosite Evaluation Of Right Heart Structures 39452 [insertion Of Catheter into Right And Left Heart For Dagnosis 39453 [insertion Of Catheter fine Right And Left Heart For Dagnosis 39456 [insertion Of Catheter for Imaging Of Heart Including Imaging Interpretation And Supervision And Injection 39456 [insertion Of Catheter for Imaging Of Heart Including Imaging Interpretation And Supervision And Injection 31203. 39456 [insertion Of Catheter for Imaging Of Heart Including Imaging Interpretation And Supervision And Injection 31203. 39457 [insertion Of Catheter for Imaging Of Heart Including Imaging Interpretation And Supervision And Injection 31203. 39456 [insertion Of Catheter in Right Heart For Imaging Of Blood Vessels And Of Grafts And Left Lower Heart Including Imaging Interpretation And Supervision  |       |  | \$232.72            |
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| 39454 Insertion Of Catheter for Imaging Of Heart Inciding imaging Interpretation And Supervision And Injection \$980. 39455 Insertion Of Catheter for Imaging Of Heart Inciding imaging Interpretation And Supervision And Injection \$11.02.5 39456 Insertion Of Catheter for Imaging Of Heart Inciding imaging of Heart Incident Incidence in Section 1998 (Catheter Incidence Interpretation And Supervision And Injection \$1.10.25 39457 Insertion Of Catheter in Eight Heart For Kramping of Blood Vessels And/Or Grafts Insertion Of Catheter in Eight Heart For Imaging Of Blood Vessels Or Grafts Insertion Of Catheter in Left Heart For Imaging Of Blood Vessels And/Or Grafts And Left Lower Heart Incidency Imaging Interpretation And Supervision And Injection Of Catheter in Left Heart And Left Lower Heart Incidency Imaging Interpretation And Supervision And Injection Of Catheter in Regist And Left Heart And Left Lower Heart Incidence Imaging Interpretation And Supervision And Injection Of Catheter in Regist And Left Heart And Left Lower Heart Incidence Imaging Interpretation And Supervision And Injection State Interpretation And Injection Of Catheter in Regist And Left Heart And Left Lower Heart Incidence Imaging Interpretation And Supervision And Injection State Injection Of Catheter in Regist And Left Heart And Left Lower Heart Incidence Imaging Interpretation And Supervision And Injection State Injection Of Catheter Interpretation And Injection State Injection Of Catheter Interpretation And Injection State Injection Of Catheter Interpretation And Injection State Injection Proceedings Injection Proce  |       |  |                     |
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| 33450 Insertion Of Catheter in Right Heart For X-Ray Imaging Of Blood Vessels Or Grafts Insertion Of Catheter in Leth Heart For Imaging of Blood Vessels And Leth Lower Heart Including Imaging Interpretation And Supervision And Injection 33450 Injection Insertion Of Catheter in Leth Heart For Imaging Of Blood Vessels And Leth Lower Heart Including Imaging Interpretation And Supervision And Injection 33450 Injection Insertion Of Catheter in Leth Heart For Imaging Of Blood Vessels And/Or Grafts And Leth Lower Heart Including Imaging Interpretation And Supervision And Injection 33460 Insertion Of Catheter in Right And Leth Heart And Leth Lower Heart For Imaging of Interpretation And Supervision And Injection 33460 Insertion Of Catheter in Right And Leth Heart And Leth Lower Heart For Imaging Of Blood Vessels And/Or Grafts Including Imaging Interpretation And Supervision And Injection 33461 Interpretation And Supervision And Leth Heart And Leth Lower Heart For Imaging Of Blood Vessels And/Or Grafts Including Imaging Interpretation And Supervision And Injection 33461 Interpretation And Supervision And Leth Heart And Leth Lower Heart For Imaging Of Blood Vessels And/Or Grafts Including Imaging Supervision And Injection Catheter In Right And Leth Heart And Leth Lower Heart For Imaging Of Blood Vessels And/Or Grafts Including Imaging Supervision And Supervision And Injection Catheter Insertion Place And Alter Index Supervision And Supervision And Supervision And Supervision And Supervision Membrane Supervision And Sup   |       | · · ·  | \$996.08            |
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| Search of Catheter Into Left Heart Through The Septum Or Apical Area Of The Heart   Search  |       |  | * 1,000101          |
| Pharmacologic Agent Administration (Eq. Inhaled Niric Oxide, Intravenous Infusion Of Niroprusside, Dobutamine, Milrinone, Or Other Agent) 3486, Including Assessing Hemodynamic Measurements Before August (Eg. Bicycle Or Arm Ergometry) Including Assessing Hemodynamic Measurements Before And After (List 3486, Separately In Addition To Code For Primary Procedure) 359350, Insertion And Placement Of Flow Directed Catheter (Eg. Swan-Ganz), For Monitoring Purposes 359350, Insertion And Placement Of Flow Directed Catheter (Eg. Swan-Ganz), For Monitoring Purposes 35935, Insertion And Placement Of Flow Directed Catheter (Eg. Swan-Ganz), For Monitoring Purposes 35936, Principle Procedure During Cardiac Catheterization (List Separately In Addition To Code For Primary Procedure) 35936, Advancement Of Procedure During Cardiac Catheterization (List Separately In Addition To Code For Primary Procedure) 35936, Advancement Procedure During Cardiac Catheterization (List Separately In Addition To Code For Primary Procedure) 35936, Advancement Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Opacification Of Separately In Addition To Code For Primary Procedure) 35936, Right Adria, Angiography (List Separately In Addition To Code For Primary Procedure) 35936, Right Adria, Angiography (List Separately In Addition To Code For Primary Procedure) 35936, Right Adria, Angiography (List Separately In Addition To Code For Primary Procedure) 35936, Right Adria, Angiography (List Separately In Addition To Code For Primary Procedure) 35936, Separately In Addition To Code For Primary Procedure) 35936, Separately In Addition To Code For Primary Procedure) 35936, Separately In Addition To Code For Primary Procedure) 35936, Separately In Addition To Code For Primary Procedure) 35936, Separately In Addition To Code For Primary Procedure) 35936, Separately In Addition To Code For Primary Procedure) 35936, Separately In Addition To Code For Primary Procedure) 35936, Separately In Additio   |       |  | \$1,349.91          |
| Including Assessing Hemodynamic Measurements Before, During, Alter And Repeal Pharmacologic Agent Administ Physiologic Exercise Study (E.g. Bicycle Or Am Ergometry) Including Assessing Hemodynamic Measurements Before And After (List S215.5 Saparately in Addition To Code For Primary Procedure) S215.5 Singention And Placement OF Flow Directed Catheter (E.g. Swen-Ganz) For Monitoring Purposes S3503. Insention And Placement OF Flow Directed Catheter (E.g. Swen-Ganz) For Monitoring Purposes S3503. Insention Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Coronary Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Coronary Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Catheterization Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Left Ventricular Or Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Left Ventricular Or Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Right Ventricular Or Injection Procedure During Cardiac Catheterization Induding Imaging Supervision, Interpretation, And Report, For Supravahular Antorgraphy Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Pulmonary Angiography (List Injection For Selective Imaging Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report, For Pulmonary Angiography (List Injection For Selective Imaging Or Pulmonary Antery During Heart Catheterization And Report, For Pulmonary Angiography (List Injection For Selective Imaging Or Pulmonary Venture Pulmonary Angiography (Li   | 93462 |  | \$203.55            |
| 3216.5 Separately In Addition To Code For Primary Procedure) 3216.5 Indomycoardial Biopsy 32503 Insertion And Placement Of Flow Directed Catheter (Eg., Swan-Ganz) For Monitoring Purposes 32503 Insertion And Placement Of Flow Directed Catheter (Eg., Swan-Ganz) For Monitoring Purposes 32503 Indigoraphy During Congenital Heart Catheterization Including Imaging Supervision, Interpretation, And Report, For Selective Coronary 32504 Androzonary Venous Or Arterial Bypass Graft(S) (Eg., Androzonary Suphenous Vein, Free Radial Artery). 32505 Indigoraphy During Congenital Heart Catheterization (List Separately in Addition To Code For Primary Procedure) 32506 Indigoraphy Common Venous Or Arterial Bypass Graft(S) (Eg., Androzonary Suphenous Vein, Free Radial Artery). 32505 Indigoraphy Clust Separately in Addition To Code For Primary Procedure) 32506 Indigoraphy Clust Separately in Addition To Code For Primary Procedure) 32506 Right Artial Angiography (List Separately in Addition To Code For Primary Procedure) 32506 Right Artial Angiography (List Separately in Addition To Code For Primary Procedure) 32507 Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Right Ventricular Or 193506 Right Artial Angiography (List Separately in Addition To Code For Primary Procedure) 32507 Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Supravalvular Aortography 32508 (List Separately in Addition To Code For Primary Procedure) 32507 Injection For Selective Ingaing Of Pulmonary Artery During Heart Catheterization, And Report; For Pulmonary Angiography (List Separately In Addition To Code For Primary Procedure) 32507 Injection For Selective Imaging Of Pulmonary Artery During Heart Catheterization, And Report; For Pulmonary Artery During Heart Catheterization, And Report; For Pulmonary Artery During Heart Catheterization (Pulmonary Artery During Heart Catheterization (Pulmonary Artery During Heart Catheteriza   | 93463 | Including Assessing Hemodynamic Measurements Before, During, After And Repeat Pharmacologic Agent Administ                                       | \$100.61            |
| Sample   S   | 93464 |  | \$215.57            |
| S465.1   |       |  | \$89.24             |
| \$57.2   |       |  | \$465.12            |
| Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Opacification Of 935664 Androcoronary Venous Or Arterial Bypass Gard(S) (Eq. Anotocoronary Saphenous Veni, Free Radial Artery, Or 93666 Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Left Ventricular Or 193666 Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Left Ventricular Or 193666 Right Atrial Angiography (List Separately In Addition To Code For Primary Procedure) Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Supravalvular Aortography 193667 (List Separately In Addition To Code For Primary Procedure) Supervision, Interpretation, And Report; For Supravalvular Aortography 193667 (List Separately In Addition To Code For Primary Procedure) Supervision, Interpretation, And Report; For Pulmonary Antiography (List 193689 Injection For Selective Imaging Or Pulmonary Artery During Heart Catheterization, On One Side Of Body 19369 Injection For Selective Imaging Or Pulmonary Artery During Heart Catheterization, On One Side Of Body 193672 (Utrasound Evaluation Of Heart Blood Vessel During Diagnosis Or Treatment, Initial Vessel 193673 (Injection For Selective Imaging Of Pulmonary Artery During Heart Catheterization 19369) (Pulmonary Meritang Pulmonary Collateral Arteries During Heart Catheterization 19369) (Pulmonary Meritang Pulmonary Vein During Heart Catheterization 19369) (Pulmonary Vein During Heart Catheterization   | 93563 |  | \$57.27             |
| Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Left Ventricular Or 33565. Left Afrida Angiography (List Separately in Addition To Code For Primary Procedure) Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Right Ventricular Or Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Supravalvular Aortography Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Supravalvular Aortography Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Pulmonary Angiography (List Separately In Addition To Code For Primary Procedure) Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Pulmonary Angiography (List Separately In Addition To Code For Primary Procedure) Injection Procedure During Cardiac Catheterization Procedure During Catheterization Procedure During Diagnosis Or Treatment, Initial Vessel Sizes Supervision of Procedure During Diagnosis Or Treatment, Initial Vessel Sizes Supervision For Selective Imaging Of Pulmonary Artery During Heart Catheterization, Don Both Sides Of Body Sizes Injection For Selective Imaging Of Pulmonary Vein During Heart Catheterization Sizes Closure Or Selective Imaging Of Pulmonary Vein During Heart Catheterization Sizes Closure Or Selective Imaging Of Pulmonary Vein During Heart Catheterization Sizes Closure Or Congenital Heart Defect With Implant, Accessed Through The Skin Sizes Closure Or Congenital Heart Defect With Implant, Accessed Through The Skin Sizes Procedure During Procedure During Procedure Vein Accessed Through The Skin Sizes Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Superior Veina Cava Sizes Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Ne   |       | Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Opacification Of     |                     |
| Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Right Ventricular Of \$137.0 (page 54) (list Separately In Addition To Code For Primary Procedure) [14.14] (list Separately In Addition To Code For Primary Procedure) [14.14] (list Separately In Addition To Code For Primary Procedure) [14.14] (list Separately In Addition To Code For Primary Procedure) [14.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary Procedure) [15.14] (list Separately In Addition To Code For Primary  |       | Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Left Ventricular Or  |                     |
| Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Supravalvular Aortography (List Separately In Addition To Code For Primary Procedure) Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Pulmonary Angiography (List Separately In Addition To Code For Primary Procedure) Spasses Injection For Selective Imaging Of Pulmonary Attery During Heart Catheterization, On One Side Of Body Spasses Ultrasound Evaluation Of Heart Blood Vessel During Diagnosis Or Treatment, Initial Vessel Spasses Ultrasound Evaluation Of Heart Blood Vessel During Diagnosis Or Treatment, Each Additional Vessel Spasses Spasses Ultrasound Evaluation Of Heart Blood Vessel During Diagnosis Or Treatment, Each Additional Vessel Spasses Spasse   |       | Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Selective Right Ventricular Or |                     |
| Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Pulmonary Angiography (List \$128.9 \$3568   Separately In Addition To Code For Primary Procedure) \$32.68 \$26.69   Separately In Addition To Code For Primary Procedure) \$32.69   Separately In Addition To Code For Primary Procedure) \$32.69   Separately In Addition To Code For Primary Procedure) \$32.69   Separately In Addition To Code For Primary Procedure) \$32.69   Separately In Indication of Primary Procedure) \$32.69   Separately Indication For Selective Imaging Of Pulmonary Artery During Diagnosis Or Treatment, Each Additional Vessel \$51.21   Separately Injection For Selective Imaging Of Pulmonary Vein During Heart Catheterization, On Both Sides Of Body \$54.41   Separately Injection For Selective Imaging Of Pulmonary Vein During Heart Catheterization, On Both Sides Of Body \$64.42   Separately Injection For Selective Imaging Of Major Aortopulmonary Collateral Atteries During Heart Catheterization \$60.29   Separately Injection For Selective Imaging Of Major Aortopulmonary Collateral Atteries During Heart Catheterization \$60.29   Separately Injection For Selective Imaging Of Major Aortopulmonary Collateral Atteries During Heart Catheterization \$60.29   Separately Injection For Selective Imaging Of Major Aortopulmonary Collateral Atteries During Heart Catheterization \$60.29   Separately Injection For Selective Imaging Of Major Aortopulmonary Collateral Atteries During Heart Catheterization \$60.29   Separately Injection For Selective Imaging Of Major Aortopulmonary Clung) Artery To Aorta Via Catheter Accessed Through The Skin \$60.20   Separately Injection For Selective Imaging For Congenital Heart Defect Of Superior Vena Cava Separately Injection For Selective Imaging For Congenital Heart Defect Of Superior Vena Cava Separately Sepa                             |       | Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Supravalvular Aortography      |                     |
| Injection For Selective Imaging Of Pulmonary Artery During Heart Catheterization, On One Side Of Body   \$32.68  |       | Injection Procedure During Cardiac Catheterization Including Imaging Supervision, Interpretation, And Report; For Pulmonary Angiography (List    |                     |
| Strict   S   |       |  |                     |
| St.22   Ultrasound Evaluation Of Heart Blood Vessel During Diagnosis Or Treatment, Each Additional Vessel   \$51.2   |       |  |                     |
| Injection For Selective Imaging Of Pulmonary Artery During Heart Catheterization, On Both Sides Of Body   \$54.49  |       |  |                     |
| Injection For Selective Imaging Of Pulmonary Vein During Heart Catheterization   \$60.2  |       |  |                     |
| Injection For Selective Imaging Of Major Aortopulmonary Collateral Arteries During Heart Catheterization   \$80.55   |       | ,  |                     |
| System   S   |       | , · · · · · · · · · · · · · · · · · · ·  |                     |
| Sast   Catheter Based Closure Of Congenital Heart Defect With Implant, Accessed Through The Skin   \$1,149.00  |       | , , , , ,  | \$942.85            |
| 35883   Therapy For Reduction Of Lower Heart Chamber Defect Via Catheter Accessed Through The Skin   \$642.85  | 93581 | Catheter Based Closure Of Congenital Heart Defect With Implant, Accessed Through The Skin  | \$1,149.00          |
| S49.19   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Superior Vena Cava   S49.19   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of The Azygos/Hemiazygos Venous System   S46.29   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Coronary Sinus   S58.59   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Above The Heart   S86.39   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   S86.39   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   S87.19   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   S87.19   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   S87.19   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   S87.19   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   S87.19   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   S87.19   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect In Heart With Normal Native Blood Vessel   S87.19   Sassa   | 93582 | Closure Of Congenital Heart Defect From Pulmonary (Lung) Artery To Aorta Via Catheter Accessed Through The Skin                                  | \$541.17            |
| Sassass   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of The Azygos/Hemiazygos Venous System   Sassasses   Sassass   | 93583 |  | \$642.83            |
| Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Coronary Sinus   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Above The Heart   Sassa   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   Sassa   Sassa   Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart   Sassa   Sass   |       |  | \$49.16             |
| 93588Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Below The Heart\$87.1993590Transcatheter Closure Of Leak Adjacent To Mitral Valve Using First Closure Device\$987.8993591Transcatheter Closure Of Leak Adjacent To Aortic Valve Using First Closure Device\$816.2993592Transcatheter Closure Of Leak Adjacent To Heart Valve Using Additional Closure Device\$359.51Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood VesselPrice By Report93593Connections, Using Imaging GuidancePrice By Report93594Connections, Using Imaging GuidancePrice By Report93595Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging GuidancePrice By Report93596Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood VesselPrice By Report93596Connections, Using Imaging GuidancePrice By ReportInsertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood VesselPrice By Report93597Connections, Using Imaging GuidancePrice By Report   |       |  | \$46.22<br>\$58.52  |
| 93590 Transcatheter Closure Of Leak Adjacent To Mitral Valve Using First Closure Device \$987.8 93591 Transcatheter Closure Of Leak Adjacent To Aortic Valve Using First Closure Device \$816.2 93592 Transcatheter Closure Of Leak Adjacent To Heart Valve Using Additional Closure Device \$359.5 Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel Price By Report Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Price By Report Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Connections, Using Imaging Guidance Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Connections, Using Imaging Guidance Price By Report Connections, Using Imaging Guidance   | 93587 | Review By Radiologist Of Vein Imaging For Congenital Heart Defect Of Venovenous Collaterals Above The Heart                                      | \$86.31             |
| 93591 Transcatheter Closure Of Leak Adjacent To Aortic Valve Using First Closure Device \$816.2: 93592 Transcatheter Closure Of Leak Adjacent To Heart Valve Using Additional Closure Device \$359.5i Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93593 Connections, Using Imaging Guidance Price By Repoi 93594 Connections, Using Imaging Guidance Price By Repoi 93595 Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Price By Repoi Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Price By Repoi Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Price By Repoi Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Repoi   |       |  | \$87.19<br>\$987.85 |
| 93592   Transcatheter Closure Of Leak Adjacent To Heart Valve Using Additional Closure Device   \$359.5i   |       | , v  |                     |
| Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93593 Connections, Using Imaging Guidance Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93594 Connections, Using Imaging Guidance Price By Report 1 Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Price By Report 1 Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Report   |       | , ,  | \$359.58            |
| Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel  93594 Connections, Using Imaging Guidance  93595 Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance  Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel  93596 Connections, Using Imaging Guidance  Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel  93597 Connections, Using Imaging Guidance  Price By Report  Price By Report  Price By Report  Price By Report   |       | Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel                |                     |
| 93595 Insertion Of Catheter Into Left Side Of Heart For Evaluation Of Congenital Heart Defect, Using Maging Guidance Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel Price By Report Connections, Using Imaging Guidance Pri   |       | Insertion Of Catheter Into Right Side Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel              |                     |
| Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Abnormal Native Blood Vessel 93596 Connections, Using Imaging Guidance Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Report  |       |  | Price By Report     |
| 93596 Connections, Using Imaging Guidance Price By Report Insertion Of Catheter Into Right And Left Sides Of Heart For Evaluation Of Congenital Heart Defect In Heart With Normal Native Blood Vessel 93597 Connections, Using Imaging Guidance Price By Report  | 93595 |  | Price By Report     |
| 93597 Connections, Using Imaging Guidance Price By Report  | 93596 | Connections, Using Imaging Guidance  | Price By Report     |
| 93598 Measurement Of Output Of Blood From Heart, Performed During Cardiac Catheterization For Evaluation Of Congenital Heart Defects  Price By Repo  | 93597 | · · · · · · · · · · · · · · · · · · ·  | Price By Report     |
|  | 93598 | Measurement Of Output Of Blood From Heart, Performed During Cardiac Catheterization For Evaluation Of Congenital Heart Defects                   | Price By Report     |

| Cada   | Description  | F   |
|--|--|---|
|  | Description Insertion Of Catheter For Recording Upper Heart Rhythm (Bundle Of His)   | Fee<br>\$265.58   |
|  | Insertion Of Catheter For Recording Upper Heart Rhythm (Intra-Atrial)  | \$190.08  |
|  | Right Ventricular Recording  | \$225.87  |
| 33003  | Intraventricular And/Or Intra-Atrial Mapping Of Tachycardia Site(S) With Catheter Manipulation To Record From Multiple Sites To Identify Origin  | Ψ223.01   |
| 93609  | Of Tachycardia (List Separately In Addition To Code For Primary Procedure)   | \$638.43  |
|  | Intra-Atrial Pacing  | \$254.37  |
|  | Intraventricular Pacing  | \$265.11  |
|  | Intracardiac Electrophysiologic 3-Dimensional Mapping (List Separately In Addition To Code For Primary Procedure)  | \$286.92  |
|  | Esophageal Recording Of Atrial Electrogram With Or Without Ventricular Electrogram(S)  | \$62.96   |
|  | Esophageal Recording of Atrial Electrogram With Or Without Ventricular Electrogram(S) With Pacing  | \$120.71  |
|  | Induction Of Arrhythmia By Electrical Pacing   | \$522.39  |
| 93010  |  | ψ0ZZ.39   |
| 00040  | Comprehensive Electrophysiologic Evaluation With Right Atrial Pacing And Recording, Right Ventricular Pacing And Recording, His Bundle   | 00000   |
|  | Recording, Including Insertion And Repositioning Of Multiple Electrode Catheters, Without Induction Or Attempted Induc   | \$969.97  |
|  | Insertion Of Catheters For Recording, Pacing, And Attempted Induction Of Abnormal Rhythm In Right Upper And Lower Heart  | \$1,284.91  |
|  | Insertion Of Catheters For Recording, Pacing, And Attempted Induction Of Abnormal Rhythm In Left Upper Heart   | \$4,978.87  |
|  | Insertion Of Catheters For Recording, Pacing, And Attempted Induction Of Abnormal Rhythm In Left Lower Heart   | \$189.29  |
|  | Programmed Stimulation And Pacing After Intravenous Drug Infusion (List Separately In Addition To Code For Primary Procedure)  | \$173.82  |
| 93624  | Insertion Of Catheters For Assessment Of Heart Pacing, Recording, Or Attempted Induction Of Abnormal Rhythm  | \$372.50  |
|  | Intra-Operative Epicardial And Endocardial Pacing And Mapping To Localize The Site Of Tachycardia Or Zone Of Slow Conduction For Surgical  |   |
| 93631  | Correction   | \$751.35  |
|  | Electrophysiologic Evaluation Of Single Or Dual Chamber Pacing Cardioverter-Defibrillator Leads Including Defibrillation Threshold Evaluation  |   |
| 93640  | (Induction Of Arrhythmia, Evaluation Of Sensing And Pacing For Arrhythmia Termination) At Time Of Init   | \$660.48  |
|  | Electrophysiologic Evaluation Of Single Or Dual Chamber Pacing Cardioverter-Defibrillator Leads Including Defibrillation Threshold Evaluation  |   |
|  | (Induction Of Arrhythmia, Evaluation Of Sensing And Pacing For Arrhythmia Termination) At Time Of Init   | \$754.88  |
| 93642  | Evaluation Of Single Or Dual Chamber Pacing Cardioverter-Defibrillator With Programming Or Reprogramming   | \$303.12  |
| 93644  | Evaluation Implantable Defibrillator   | \$184.71  |
|  | Intracardiac Catheter Ablation Of Atrioventricular Node Function, Atrioventricular Conduction For Creation Of Complete Heart Block, With Or  |   |
| 93650  | Without Temporary Pacemaker Placement  | \$573.35  |
| 93653  | Evaluation And Insertion Of Catheters For Creation Of Complete Heart Block   | \$808.97  |
|  | Evaluation And Insertion Of Catheters For Recording, Pacing, And Attempted Induction Of Abnormal Heart Rhythm  | \$1,081.95  |
|  | Insertion Of Catheters And Destruction Of Tissue To Treat Abnormal Heart Rhythm  | \$302.11  |
|  | Evaluation And Insertion Of Catheters For Recording, Pacing, And Treatment Of Abnormal Heart Rhythm  | \$1,085.34  |
| 00000  | Additional Linear Or Focal Intracardiac Catheter Ablation Of The Left Or Right Atrium For Treatment Of Atrial Fibrillation Remaining After   | ψ1,000.01   |
| 93657  | Completion Of Pulmonary Vein Isolation (List Separately In Addition To Code For Primary Procedure)   | \$301.75  |
| 00001  | Evaluation Of Cardiovascular Function With Tilt Table Evaluation, With Continuous Ecg Monitoring And Intermittent Blood Pressure Monitoring,   | φοσττο  |
| 03660  | With Or Without Pharmacological Intervention   | \$167.81  |
| 93000  | Intracardiac Echocardiography During Therapeutic/Diagnostic Intervention, Including Imaging Supervision And Interpretation (List Separately In   | \$107.01  |
| 02662  | Addition To Code For Primary Procedure)  | ¢152.46   |
|  | Peripheral Arterial Disease (Pad) Rehabilitation Per Session   | \$153.46<br>\$13.19   |
|  | reliptieral Attelial Disease (Fau) Reliabilitation Fel Session   | \$13.19   |
|  | Pigimpadanas Dariyad Physiologia Cardioyagaylar Analysia   | ተባር ባር  |
| 93701  | Bioimpedance-Derived Physiologic Cardiovascular Analysis   | \$26.28   |
|  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And   |   |
| 93724  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)   | \$300.35  |
| 93724  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies   |   |
| 93724<br>93740   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes  | \$300.35<br>\$0.01  |
| 93724<br>93740   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies   | \$300.35  |
| 93724<br>93740   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  | \$300.35<br>\$0.01  |
| 93724<br>93740<br>93745  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device  | \$300.35<br>\$0.01<br>Price By Report   |
| 93724<br>93740<br>93745<br>93750   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17  |
| 93724<br>93740<br>93745<br>93750<br>93770  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status  Determination Of Venous Pressure  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34   |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per   | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03   |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status  Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per   | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03   |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790<br>93797   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790<br>93797   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93798<br>93797<br>93798<br>93799<br>93880   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790<br>93797<br>93798<br>93798<br>93880<br>93880   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study   | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790<br>93797<br>93798<br>93799<br>93880<br>93882   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status)  Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Transcranial Doppler Study Of The Intracranial Arteries; Complete Study  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93798<br>93799<br>93892<br>93880<br>93882<br>93886<br>93888   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status)  Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Limited Study  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790<br>93797<br>93798<br>93890<br>93882<br>93886<br>93888  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status) Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session) Unlisted Cardiovascular Service Or Procedure Duplex Scan Of Extracranial Arteries; Complete Bilateral Study Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study Transcranial Doppler Study Of The Intracranial Arteries; Limited Study Transcranial Doppler Study Of The Intracranial Arteries; Vasoreactivity Study   | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$171.77<br>\$268.09  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93790<br>93797<br>93799<br>93880<br>93882<br>93886<br>93888<br>93890  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Complete Study  Transcranial Doppler Study Of The Intracranial Arteries; Wasoreactivity Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06  |
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| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93798<br>93799<br>93892<br>93886<br>93886<br>93886<br>93888<br>93890<br>93892<br>93892<br>93923   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg., Drivelines, Alarms, Power Surges), Review Of Device Function (Eg., Flow And Volume Status, Septum Status  Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Transcranial Doppler Study Of The Intracranial Arteries; Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Ultrasound Study Of Arteries Of Both Arms And Legs, Complete  Noninvasive Physiologic Studies Of Lower Extremity Arteries, At Rest And Following Treadmill  | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06<br>\$169.06  |
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| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93799<br>93797<br>93799<br>93880<br>93882<br>93886<br>93888<br>93890<br>93892<br>93893<br>93922   | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat  Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status  Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Unilateral Study  Duplex Scan Of Extracranial Arteries; Unilateral Study  Transcranial Doppler Study Of The Intracranial Arteries; Complete Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection With Intravenous Microbubble Injection  Ultrasound Study Of Arteries Of Both Arms And Legs, Complete  Noninvasive Physiologic Studies Of Lower Extremi | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06<br>\$169.47<br>\$87.84<br>\$137.39   |
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| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790<br>93797<br>93880<br>93882<br>93886<br>93888<br>93890<br>93892<br>93893<br>93922<br>93923  | Electronic Analysis Of Antitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg. Drivelines, Alarms, Power Surges), Review Of Device Function (Eg. Flow And Volume Status, Septum Status)  Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Transcranial Doppler Study Of The Intracranial Arteries; Complete Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Ultrasound Study Of Arteries Of Both Arms And Legs, Limited  Ultrasound Study Of Arteries Of Both Arms And Legs, Limited  Ultrasound Study Of Arteries Of Both Arms And Legs, Limited  Unplex Scan Of Lower Extremity Arteries Or Arterial Bypass Graft | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06<br>\$169.47<br>\$87.84<br>\$137.39   |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93798<br>93797<br>93798<br>93892<br>93886<br>93892<br>93893<br>93892<br>93893<br>93922<br>93923<br>93924<br>93926<br>93930                            | Electronic Analysis Of Antitiachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation of Recordings)  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Transcranial Doppler Study Of The Intracranial Arteries; Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Ultrasound Study Of Arteries Of Both Arms And Legs, Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection With Intravenous Microbubble Injection  Ultras | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06<br>\$169.06<br>\$169.07<br>\$173.10<br>\$19.53<br>\$173.10<br>\$149.72<br>\$163.46   |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93798<br>93799<br>93892<br>93882<br>93886<br>93888<br>93890<br>93892<br>93892<br>93923<br>93923<br>93923<br>93931<br>93931                            | Electronic Analysis Of Antitiachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; With Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection With Intravenous Microbubble Injection  Ultrasound Study Of Arteries Of Both Arms And Legs, Complete  Ultrasound Study Of Arteries Of Both Arms And Legs, Complete  Sulvas Arterial Bypass Grafts; | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06<br>\$169.07<br>\$134.92<br>\$134.92<br>\$134.92<br>\$134.92<br>\$134.92<br>\$134.93  |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93788<br>93790<br>93797<br>93880<br>93882<br>93886<br>93888<br>93890<br>93892<br>93893<br>93922<br>93923<br>93924<br>93925<br>93931<br>93931<br>93970 | Electronic Analysis Of Anitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status)  Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Unliateral Or Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Complete Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Ultrasound Study Of Arteries Of Both Arms And Legs, Limited  Ultrasound Study Of Arteries Of Both Arms And Legs, Limited  Ultrasound Study O | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06<br>\$169.06<br>\$169.47<br>\$87.84<br>\$137.39<br>\$119.53<br>\$173.10<br>\$149.72<br>\$163.46<br>\$134.24<br>\$177.72             |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93790<br>93797<br>93799<br>93880<br>93886<br>93886<br>93886<br>93892<br>93892<br>93923<br>93924<br>93925<br>93926<br>93930<br>93971<br>93970          | Electronic Analysis Of Anitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg., Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg., Drivelines, Alarms, Power Surges), Review Of Device Function (Eg., Flow And Volume Status, Septum Status, Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording Only  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Unilateral Or Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Complete Study  Transcranial Doppler Study Of The Intracranial Arteries; Complete Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection With Intravenous Microbubble Injection  Transcranial Doppler Study Of The Intracranial Arteries, Emboli Detec | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06<br>\$169.47<br>\$87.84<br>\$137.39<br>\$119.53<br>\$173.10<br>\$149.72<br>\$163.46<br>\$134.24<br>\$177.72<br>\$129.02<br>\$232.34 |
| 93724<br>93740<br>93745<br>93750<br>93770<br>93784<br>93786<br>93799<br>93797<br>93799<br>93880<br>93882<br>93886<br>93892<br>93893<br>93922<br>93923<br>93924<br>93925<br>93930<br>93931<br>93971<br>93975          | Electronic Analysis Of Anitachycardia Pacemaker System (Includes Electrocardiographic Recording, Programming Of Device, Induction And Termination Of Tachycardia Via Implanted Pacemaker, And Interpretation Of Recordings)  Temperature Gradient Studies  Initial Set-Up And Programming By A Physician Or Other Qualified Health Care Professional Of Wearable Cardioverter-Defibrillator Includes Initial Programming Of System, Establishing Baseline Electronic Ecg, Transmission Of Data To Data Repository, Pat Interrogation Of Ventricular Assist Device (Vad), In Person, With Physician Or Other Qualified Health Care Professional Analysis Of Device Parameters (Eg, Drivelines, Alarms, Power Surges), Review Of Device Function (Eg, Flow And Volume Status, Septum Status)  Determination Of Venous Pressure  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Recording, Scanning Analysis, Interpretation, And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, With Scanning Analysis And Report  Ambulatory Blood Pressure Monitoring, 24 Hours Or Longer, Review With Interpretation And Report  Physician Or Other Qualified Health Care Professional Services For Outpatient Cardiac Rehabilitation; Without Continuous Ecg Monitoring (Per Session)  Unlisted Cardiovascular Service Or Procedure  Duplex Scan Of Extracranial Arteries; Complete Bilateral Study  Duplex Scan Of Extracranial Arteries; Unliateral Or Limited Study  Transcranial Doppler Study Of The Intracranial Arteries; Complete Study  Transcranial Doppler Study Of The Intracranial Arteries; Emboli Detection Without Intravenous Microbubble Injection  Ultrasound Study Of Arteries Of Both Arms And Legs, Limited  Ultrasound Study Of Arteries Of Both Arms And Legs, Limited  Ultrasound Study O | \$300.35<br>\$0.01<br>Price By Report<br>\$51.17<br>\$0.01<br>\$48.34<br>\$24.11<br>\$5.21<br>\$19.03<br>\$15.60<br>\$24.43<br>Price By Report<br>\$206.92<br>\$134.62<br>\$192.60<br>\$171.77<br>\$268.09<br>\$169.06<br>\$169.06<br>\$169.47<br>\$87.84<br>\$137.39<br>\$119.53<br>\$173.10<br>\$149.72<br>\$163.46<br>\$134.24<br>\$177.72             |

| Code           | Description  | Fee                  |
|----------------|--|----------------------|
|                | Ultrasound Scan Of Blood Flow Of Aorta, Vena Cava, Bypass Graphs, Or One Side Of The Groin Or Limited Scan   | \$126.61             |
|                | Duplex Scan Of Arterial Inflow And Venous Outflow Of Penile Vessels; Complete Study  | \$111.10             |
| 93981          | Duplex Scan Of Arterial Inflow And Venous Outflow Of Penile Vessels; Follow-Up Or Limited Study  | \$67.05              |
| 00005          | Illuserant Con Of Diand Flaville Fatters in On Dath Cides Of Dady For December 10 Accordance Of Diand Vessel For District  | <b>#000.00</b>       |
|                | Ultrasound Scan Of Blood Flow In Extremity On Both Sides Of Body For Preoperative Assessment Of Blood Vessel For Dialysis Access  Ultrasound Scan Of Blood Flow In Extremity On One Side For Preoperative Assessment Of Blood Vessel For Dialysis Access | \$280.69             |
|                | Duplex Scan Of Hemodialysis Access (Including Arterial Inflow, Body Of Access And Venous Outflow)  | \$141.37<br>\$118.55 |
|                | Unlisted Noninvasive Vascular Diagnostic Study   | Price By Report      |
|                | Ventilation Assistance And Management, Hospital Inpatient Or Observation, Initial Day  | \$94.20              |
|                | Ventilation Assistance And Management, Hospital Inpatient Or Observation, Each Subsequent Day  | \$66.43              |
|                | Evaluation Of Home Ventilator Management Care Plan, 30 Minutes Or More   | \$80.71              |
|                | Spirometry, Including Graphic Record, Total And Timed Vital Capacity, Expiratory Flow Rate Measurement(S), With Or Without Maximal   | *                    |
| 94010          | Voluntary Ventilation  | \$28.23              |
| 94011          | Measurement And Graphic Recording Of Total And Timed Exhaled Air Capacity, Infant Or Child Through 2 Years Of Age  | \$79.74              |
|                | Measurement And Graphic Recording Of Total And Timed Exhaled Air Capacity Before And After Medication Administration, Infant Or Child  |                      |
|                | Through 2 Years Of Age   | \$130.14             |
| 94013          | Measurement Of Remaining Air Or Lung Capacity After Exhalation, Infant Or Child Through 2 Years Of Age   | \$17.79              |
|                | Measurement And Graphic Recording Of Amount And Speed Of Breathed Air Including Transmission Of Tracing, Analysis, Recalibration Of  |                      |
| 94014          | Device, Physician Review And Interpretation Over 30 Days   | \$52.33              |
| 0.4045         | Patient Initiated Spirometric Recording Per 30 Day Period Of Time; Recording (Includes Hook-Up, Reinforced Education, Data Transmission,   | 400.00               |
| 94015          | Data Capture, Trend Analysis, And Periodic Recalibration)  | \$29.22              |
| 04016          | Patient-Initiated Spirometric Recording Per 30-Day Period Of Time; Review And Interpretation Only By A Physician Or Other Qualified Health Care Professional   | ¢22 11               |
|                | Measurement And Graphic Recording Of The Amount And Speed Of Breathed Air, Before And Following Medication Administration  | \$23.11<br>\$41.32   |
| 34000          | The desired the stability of the Annual Canada Speed of Desauled All, Delute And Following Medication Authinistiation  | φ41.32               |
| 94070          | Multiple Measurements And Graphic Recordings Of The Amount And Speed Of Breathed Air, Before And Following Medication Administration   | \$65.43              |
|                | Vital Capacity, Total (Separate Procedure)   | \$0.01               |
|                | Maximum Breathing Capacity, Maximal Voluntary Ventilation  | \$14.29              |
|                | Respiratory Diagnostic Testing (Flow Volume Loop)  | \$37.16              |
| 94450          | Breathing Response To Hypoxia (Hypoxia Response Curve)   | \$73.94              |
| 94452          | High Altitude Simulation Test (Hast), With Interpretation And Report By A Physician Or Other Qualified Health Care Professional;   | \$47.00              |
|                | High Altitude Simulation Test (Hast), With Interpretation And Report By A Physician Or Other Qualified Health Care Professional; With  |                      |
|                | Supplemental Oxygen Titration  | \$63.79              |
|                | Intrapulmonary Surfactant Administration By A Physician Or Other Qualified Health Care Professional Through Endotracheal Tube  | \$56.73              |
|                | Exercise Test For Spasm Of Lung Airways With Ekg   | \$93.77              |
|                | Test For Exercise-Induced Lung Stress  | \$35.86              |
|                | Exercise Test For Spasm Of Lung Airways  | \$68.76              |
|                | Test For Exercise-Induced Heart And Lung Stress  | \$172.54             |
|                | Professional Services For Outpatient Pulmonary Rehabilitation, Per Session   | \$51.98              |
|                | Professional Services For Outpatient Pulmonary Rehabilitation With Continuous Monitoring Of Blood Oxygen, Per Session  | \$69.37              |
|                | Respiratory Inhaled Pressure Or Nonpressure Treatment To Relieve Airway Obstruction Or For Sputum Specimen  Aerosol Inhalation Of Pentamidine For Pneumocystis Carinii Pneumonia Treatment Or Prophylaxis  | \$11.75              |
|                | Respiratory Inhaled Aerosol Treatment To Relieve Airway Obstruction, First Hour  | \$25.81<br>\$59.30   |
|                | Continuous Inhalation Treatment With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour   | \$15.16              |
|                | Continuous Positive Airway Pressure Ventilation (Cpap), Initiation And Management  | \$59.99              |
|                | Continuous Negative Pressure Ventilation (Crp), Initiation And Management  | \$32.84              |
| 0.002          | Demonstration And/Or Evaluation Of Patient Use Of Aerosol Generator, Nebulizer, Metered Dose Inhaler Or Intermittent Positive Pressure   | ψ0 <u>2.</u> 0 1     |
| 94664          | Breathing (lppb) Device  | \$15.62              |
|                |  |                      |
|                | Manipulation Chest Wall, Such As Cupping, Percussing, And Vibration To Facilitate Lung Function Initial Demonstration And/Or Evaluation  | \$21.08              |
| 94668          | Manipulation Chest Wall, Such As Cupping, Percussing, And Vibration To Facilitate Lung Function Subsequent   | \$33.59              |
|                | Mechanical Chest Wall Manipulation For Improvement In Lung Function  | \$17.56              |
|                | Oxygen Uptake, Expired Gas Analysis Rest And Exercise, Direct, Simple  | \$42.12              |
|                | Oxygen Uptake, Expired Gas Analysis Including Co2 Output, Percentage Oxygen Extracted  | \$51.48              |
|                | Oxygen Uptake, Expired Gas Analysis Rest, Indirect (Separate Procedure)  | \$30.38              |
|                | Plethysmography For Determination Of Lung Volumes And, When Performed, Airway Resistance   | \$57.79              |
|                | Gas Dilution Or Washout For Determination Of Lung Volumes And, When Performed, Distribution Of Ventilation And Closing Volumes   | \$46.40              |
|                | Measurement Of Airway Resistance By Impulse Oscillometry   | \$37.84              |
|                | Diffusing Capacity (Eg, Carbon Monoxide, Membrane) (List Separately In Addition To Code For Primary Procedure)   | \$62.39              |
|                | Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation Single Determination   | \$2.42               |
|                | Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation Multiple Determinations (Eg, During Exercise)  | \$3.39               |
|                | Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation By Continuous Overnight Monitoring (Separate Procedure)  | \$28.11              |
| 94/12          | Measurement And Recording Of Breathing Pattern Over 12-24 Hours, Infant  Pediatric Home Monitoring Of Breathing Pauses During Sleep, Including Breathing And Heart Rate, 30-Day Time Period, With Physician  | \$74.35              |
| 94774          | Interpretation And Report  | Price By Report      |
| 34774          | interpretation with respect  | Trice by Report      |
| 94775          | Attachment And Disconnection Of Pediatric Home Monitoring Device For Detection Of Breathing Pauses During Sleep, 30-Day Time Period  | Price By Report      |
|                | Pediatric Home Monitoring Of Breathing Pauses During Sleep, Including Breathing And Heart Rate, Receipt Of Transmissions And Computer  | = )                  |
| 94776          | Analysis, 30-Day Time Period   | Price By Report      |
|                | Pediatric Home Monitoring Of Breathing Pauses During Sleep, Including Breathing And Heart Rate, Physician Review And Interpretation, 30-   | , .,                 |
| 94777          | Day Time Period  | \$29.99              |
|                | Unlisted Pulmonary Service Or Procedure  | Price By Report      |
|                | Injection Of Allergenic Extracts Into Skin, Accessed Through The Skin  | \$4.13               |
| 95004          |  |                      |
|                | Nitric Oxideexpired Gas Determanation  | \$20.02              |
| 95012          | , ,  | \$20.02<br>\$9.21    |
| 95012<br>95017 | Nitric Oxideexpired Gas Determanation  |                      |

| Code  | Description  Introduction Control of Mith Allorage is Extracts. Immediate Type Praction, Including Test Interpretation and Preset Specify.   | Fee                  |
|-------|--|----------------------|
| 95024 | Intracutaneous (Intradermal) Tests With Allergenic Extracts, Immediate Type Reaction, Including Test Interpretation And Report, Specify Number Of Tests  | \$7.27               |
| 95027 | Intracutaneous (Intradermal) Tests, Sequential And Incremental, With Allergenic Extracts For Airborne Allergens, Immediate Type Reaction, Including Test Interpretation And Report, Specify Number Of Tests  | \$4.68               |
|       | Intracutaneous (Intradermal) Tests With Allergenic Extracts, Delayed Type Reaction, Including Reading, Specify Number Of Tests   | \$8.96               |
|       | Patch Or Application Test(S) (Specify Number Of Tests)   | \$5.21               |
|       | Application Of Allergenic Extract Skin Patch, Exposure To Ultraviolet Light, And Reaction Analysis   | \$6.01               |
| 95056 | Photo Tests  | \$47.21              |
|       | Ophthalmic Mucous Membrane Tests   | \$35.11              |
|       | Direct Nasal Mucous Membrane Test  | \$25.95              |
|       | Inhalation Of Medications With Allergic Reaction Analysis  | \$37.67              |
| 95076 | Ingestion Of Test Items For Allergies, 120 Minutes Ingestion Challenge Test (Seguential And Incremental Ingestion Of Test Items, Eq. Food, Drug Or Other Substance); Each Additional 60  | \$125.88             |
| 95079 | Minutes Of Testing (List Separately In Addition To Code For Primary Procedure)   | \$88.57              |
|       | Professional Services For Allergen Immunotherapy Not Including Provision Of Allergenic Extracts Single Injection   | \$9.93               |
|       | Injection Of Incremental Dosages Of Allergen, 2 Or More Injections   | \$12.12              |
|       | Professional Services For The Supervision Of Preparation And Provision Of Antigens For Allergen Immunotherapy; Single Dose Vial(S)   |                      |
| 95144 | (Specify Number Of Vials)  | \$16.14              |
| 05445 | Professional Services For The Supervision Of Preparation And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses);   | <b>#22.44</b>        |
| 95145 | Single Stinging Insect Venom  Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses); Two Single   | \$33.14              |
| 95146 | Stinging Insect Venoms   | \$44.69              |
|       | Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses); Three Single   |                      |
| 95147 | Stinging Insect Venoms  Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses); Four Single  | \$58.65              |
| 95148 | Stinging Insect Venoms   | \$87.10              |
| 33140 | Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy (Specify Number Of Doses); Five Single  | ψ07.10               |
| 95149 | Stinging Insect Venoms   | \$104.72             |
|       | Professional Services For The Supervision Of Preparation And Provision Of Antigens For Allergen Immunotherapy; Single Or Multiple Antigens   |                      |
| 95165 | (Specify Number Of Doses)  | \$12.03              |
| 05170 | Professional Services For The Supervision And Provision Of Antigens For Allergen Immunotherapy; Whole Body Extract Of Biting Insect Or Other Arthropod (Specify Number Of Doses)   | \$10.91              |
|       | Rapid Desensitization Procedure, Each Hour   | \$128.56             |
|       | Unlisted Allergy/Clinical Immunologic Service Or Procedure   | Price By Report      |
|       | Continuous Monitoring Of Glucose In Tissue Fluid Using Sensor Under Skin   | \$55.71              |
| 95250 | Ambulatory Continuous Glucose (Sugar) Monitoring For A Minimum Of 72 Hours   | \$140.40             |
|       | Ambulatory Continuous Glucose (Sugar) Including Interpretation And Report For A Minimum Of 72 Hours  | \$36.11              |
|       | Measurement Of Brain Wave Activity (Eeg), Continuous   | \$246.99             |
|       | Measurement Of Brain Wave Activity (Eeg), 2-12 Hours, Unmonitored  | \$222.24             |
|       | Measurement Of Brain Wave Activity (Eeg), 2-12 Hours, With Intermittent Monitoring And Maintenance   | \$361.43             |
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|       | Measurement Of Brain Wave Activity (Eeg), 12-26 Hours, With Intermittent Monitoring And Maintenance  | \$694.92             |
|       | Measurement Of Brain Wave Activity (Eeg), 12-26 Hours, With Continuous, Real-Time Monitoring And Maintenance   | \$882.22             |
|       | Measurement Of Brain Wave Activity With Video (Veeg), 2-12 Hours, Unmonitored  | \$222.24             |
| 95712 | Measurement Of Brain Wave Activity With Video (Veeg), 2-12 Hours With Intermittent Monitoring And Maintenance  | \$417.06             |
|       | Measurement Of Brain Wave Activity With Video (Veeg), 2-12 Hours With Continuous, Real-Time Monitoring And Maintenance   | \$504.05             |
|       | Measurement Of Brain Wave Activity With Video (Veeg), 12-26 Hours, Unmonitored   | \$277.88             |
|       | Measurement Of Brain Wave Activity With Video (Veeg), 12-26 Hours, With Intermittent Monitoring And Maintenance  | \$778.00             |
| 95716 | Measurement Of Brain Wave Activity With Video (Veeg), 12-26 Hours, With Continuous, Real-Time Monitoring And Maintenance   | \$1,071.02           |
| 95717 | Continuous Measurement Of Brain Wave Activity (Eeg), 2-12 Hours, With Health Care Professional Analysis, Interpretation And Report   | \$106.26             |
|       | Continuous Measurement Of Brain Wave Activity With Video (Veeg), 2-12 Hours, With Health Care Professional Analysis, Interpretation And  |                      |
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| 95719 | Continuous Measurement Of Brain Wave Activity (Eeg), 12-26 Hours, With Health Care Professional Analysis, Interpretation And Report  | \$163.95             |
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| 95720 | Report   | \$215.82             |
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| 95722 | Report   | \$263.96             |
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| l     | Multiple Sleep Latency Or Maintenance Of Wakefulness Testing, Recording, Analysis And Interpretation Of Physiological Measurements Of  |                      |
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| 95868 Needle Electromyography, Canala Neve Supplied Muscles (Excluding 11 of 112) 95870 Needle Measurement And Recording of Electrical Activity Of Muscles in Arm Or Leg Or Muscles in Trunk Or Head, Limited Study 95871 Needle Electromyography Lipids Signife Fiber Electrode, With Quantitative Measurement Of Jitter, Blocking And/Or Fiber Density, Anny/Al Sites 95872 OF Electrical Simulation For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95875 Electrical Simulation For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95876 Electrical Simulation For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95877 Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95878 Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 95879 Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Separately in Addition To Code For Primary Procedure) 95886 Electromyography, Ron-Extremity (Cranial Nerve Supplied Cri. Avid Muscles (S) Done With Nerve Conduction, Amplitude And Separately in Addition To Code For Primary Procedure) 95871 Electromyography, Non-Extremity (Cranial Nerve Supplied Cri. Avid Muscles (S) Done With Nerve Conduction, Amplitude And Separately in Addition To Code For Primary Procedure) 95872 Electromyography, Non-Extremity (Cranial Nerve Supplied Cri. Avid Muscles (S) Done With Nerve Conduction, Amplitude And Separately in Addition To Code For Primary Procedure)   | 95866 | Needle Electromyography; Hemidiaphragm  | \$114.32                              |
| Seed   Section   Seed   Section   Seed   Section   Seed   |       |   | \$104.57                              |
| 98870 Needle Measurement And Recording Of Electrical Activity Of Muscles in Arm Or Leg Of Muscles in Trunk Of Head, Limited Study Needle Electromyography Using Single Fiber Electrode, With Quantitative Measurement Of Jitter, Blocking And/Or Fiber Density, Any/All Sites 98872 Of Each Muscle Studied \$20,26 98873 Electrical Stimulation For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) \$55.1,5 98874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) \$57.1 98875 Ischmeit Limb Exercise a Tesming (3) Aquisition For Muscle (S) Madebolite (S) Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 98886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or Four Or More Spinal Levels ( Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 98886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or Four Or More Spinal Levels ( Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 98887 Latency/Velocity Study, Literal Nerve Supplied Or Axiall Muscles (S) Done With Nerve Conduction, Amplitude And 98888 Latency/Velocity Study (List Separately in Addition To Code For Primary Procedure) 98989 Nerve Transmission Studies, 3-4 Studies 98990 Nerve Transmission Studies, 3-4 Studies 98990 Nerve Transmission Studies, 5-4 Studies 98910 Nerve Transmission Studies, 7-8 Studies 98910 Nerve Transmission Studies,   |       |   | \$131.63                              |
| Needle Electromyography Using Single Fiber Electrode, With Quantitative Measurement Of Jitter, Blocking And/Or Fiber Density, Any/All Sites 9872 of Each Mixole Studied 9873 (Electrical Stimulation For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure) \$5.4.5.  95873 (Electrical Stimulation For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure) \$5.7.1  95875 (Ischemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S) \$132.4  Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 95886 (Latency/Velocity) Study; Limited (List Separately In Addition To Code For Primary Procedure) \$80.5.  Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 95886 (Latency/Velocity) Study; Limited (List Separately In Addition To Code For Primary Procedure) \$80.5.  Needle Electromyography, Non-Extremity (Cranial Nerve Supplied Or Araa) Muscle(S) Done With Nerve Conduction, Amplitude And 95886 (Latency/Velocity) Study; List Separately In Addition To Code For Primary Procedure) \$80.5.  95807 (Nerve Transmission Studies (Saparately) and Addition To Code For Primary Procedure) \$80.5.  95807 (Nerve Transmission Studies, 3-4 Studies \$93.57.6.  95809 (Nerve Transmission Studies, 5-6 Studies \$93.57.6.  95809 (Nerve Transmission Studies, 5-6 Studies \$93.57.6.  95809 (Nerve Transmission Studies, 5-7   |       |   | \$96.48                               |
| Section   Sect  | 95870 |   | \$61.16                               |
| 98873 Electrical Stimulation For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure)  98874 Needle Electromyography For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure)  98875 Isohemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S)  98885 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure)  98885 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure)  98886 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure)  98886 Latency/Velocity, Study: Complete, Five Or More Muscles Studied, Innevated By Three Or More Nerve Conduction, Amplitude And Separately In Addition To Code For Primary Procedure)  98886 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure)  98886 Latency/Velocity, Study: Limited (List Separately) In Addition To Code For Primary Procedure)  98886 Latency/Velocity, Study: Limited (List Separately In Addition To Code For Primary Procedure)  98887 Latency/Velocity, Study: Limited (Primary Procedure)  98887 Latency/Velocity, Study: Limited (Separately In Addition To Code For Primary Procedure)  98897 Lever Transmission Studies 1-12 Studies  98997 Nerve Transmission Studies, 5-16 Studies  98991 Nerve Transmission Studies, 5-16 Studies  98991 Nerve Transmission Studies, 5-10 Studies  98991   | 05070 |   | ¢202.00                               |
| 99874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 98875 Sischemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98886 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Of More Nevers Or For Ordination, Amplitude And 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nevers Or For Ordination, Amplitude And 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nevers Or For Ordination, Amplitude And 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98987 Needle Measurement And Recording Of Movement And/Or Feeling Of Arm Or Leg With Interpretation And Report 98987 Needle Measurement And Recording Of Movement And/Or Feeling Of Arm Or Leg With Interpretation And Report 98997 Neeve Transmission Studies, 3-13 Studies 98910 Neeve Transmission Studies, 5-6 Studies 98911 Neeve Transmission Studies, 5-6 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98912 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studi  | 95072 | Or Each Muscle Studied  | \$202.00                              |
| 99874 Needle Electromyography For Guidance in Conjunction With Chemodenervation (List Separately in Addition To Code For Primary Procedure) 98875 Sischemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98885 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98886 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Of More Nevers Or For Ordination, Amplitude And 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nevers Or For Ordination, Amplitude And 98886 Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nevers Or For Ordination, Amplitude And 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98887 Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure) 98987 Needle Measurement And Recording Of Movement And/Or Feeling Of Arm Or Leg With Interpretation And Report 98987 Needle Measurement And Recording Of Movement And/Or Feeling Of Arm Or Leg With Interpretation And Report 98997 Neeve Transmission Studies, 3-13 Studies 98910 Neeve Transmission Studies, 5-6 Studies 98911 Neeve Transmission Studies, 5-6 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98911 Neeve Transmission Studies, 9-10 Studies 98912 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studies 98913 Neeve Transmission Studies, 13-0 More Studi  | 95873 | Flectrical Stimulation For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure)  | \$54.51                               |
| 98875 (Schemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S)  Needde Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Report Serial Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Response Areas, When Performed, Done With Nerve Conduction, Amplitude And Response Areas, When Performed, Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Nerve Conduction, Amplitude And Serial Electromyography, Non-Extremity (Cranial Nerve Suppled Or Axia) Muscle(S) Done With Interpretation And Report Serial Electromyography, Non-Extremity (Cranial Nerve Serial Electromyography, Non-Extremity (Cranial Nerve Serial Electromyography, Non-Extremity) Proceedings (Serial Electromy  | 33073 | Ziodinda diminalani i di danama in donjandian vini dinimadanovanon (ziot doparato) in radiano i deda i di rimidi fi riddado)          | ψ04.01                                |
| 98875 (Schemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S) Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Sesses Latency/Velocity Study; Limited (List Separately in Addition To Code For Primary Procedure)  869.5 Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Sesses (Season) Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or For Orthor Spinal Levels (Season) Complete, Five Orthore Muscles Studied, Innervated By Three Orthore Nerves Or For Orthor Spinal Levels (Season) Complete, Five Orthore Muscles Studied, Innervated By Three Orthore Nerves Orthore  | 95874 | Needle Electromyography For Guidance In Conjunction With Chemodenervation (List Separately In Addition To Code For Primary Procedure) | \$57.16                               |
| Needle Electromyography, Each Extremity, Wills Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And 95886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More News Or Four Or More Spinal Levels (\$105,44   95886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More News Or Four Or More Spinal Levels (\$105,44   95886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More News Or Four Or More Spinal Levels (\$105,44   95887 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More News Or Four Or More Spinal Levels (\$105,44   95887 Latency/Velocity Study, Usia Spearately In Addition To Code Fire Primary Procedure) 95887 Latency/Velocity Study, Usia Spearately In Addition To Code Fire Primary Procedure) 95887 Latency/Velocity Study, Usia Spearately In Addition To Code Fire Primary Procedure) 95898 News Transmission Studies, 3-4 Studies 95908 News Transmission Studies, 3-4 Studies 95910 Nerve Transmission Studies, 7-8 Studies 95910 Nerve Transmission Studies, 7-8 Studies 95910 Nerve Transmission Studies, 7-9 Studies 95912 Nerve Transmission Studies, 1-1-12 Studies 95913 Primary Transmission Studies, 1-1-12 Studies 95914 Nerve Transmission Studies, 1-1-12 Studies 95915 Nerve Transmission Studies, 1-1-12 Studies 95916 Nerve Transmission Studies, 1-1-12 Studies 95917 Nerve Transmission Studies, 1-1-12 Studies 95918 Nerve Transmission Studies, 1-1-12 Studies 95919 Nerve Transmission Studies, 1-1-12 Studies 95910 Nerve Transmission Studies, 1-1-12 Studies 95910 Nerve Transmission Studies, 1-1-12 Studies 95910 Nerve Transmission Studies, 1-1-12 Studies 95911 Nerve Transmission Studies, 1-1-12 Studies 95911 Nerv  | 95875 | Ischemic Limb Exercise Test With Serial Specimen(S) Acquisition For Muscle(S) Metabolite(S)   | \$132.47                              |
| Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And Se886 Latency/Velocity Study, Complete, Five Or More Muscles Studied, Innevated By Three Or More Nerves Of Four Or More Spinal Levels (\$105.44   Needle Electromyography, Non-Extremity (Cranial Nerve Supplied Or Asial) Muscle (\$) Done With Nerve Conduction, Amplitude And Septiment And Report Septiment And Recording Of Movement And Or Feeling Of Arm Or Leg With Interpretation And Report Septiment And Recording Of Movement And Or Feeling Of Arm Or Leg With Interpretation And Report Septiment Report Sept  |       | Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done With Nerve Conduction, Amplitude And     |                                       |
| Sease   Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or Four Or More Spinal Levels  | 95885 | Latency/Velocity Study; Limited (List Separately In Addition To Code For Primary Procedure)   | \$69.53                               |
| Sease   Latency/Velocity Study; Complete, Five Or More Muscles Studied, Innervated By Three Or More Nerves Or Four Or More Spinal Levels  |       |   |                                       |
| Needle Electromycarphy, Non-Extremity (Cranial Nerve Supplied Or Axial) Muscle(S) Done With Nerve Conduction, Amplitude And   |       |   |                                       |
| S881   Latency/Velocity Study (List Separately in Addition To Code For Primary Procedure)   \$89.1  | 95886 |   | \$105.48                              |
| Seption   Sept  | 05007 |   | 000.44                                |
| Seption   Sept  |       |   |                                       |
| Seption   Nerve Transmission Studies, 3-4 Studies   \$141.77  |       |   |                                       |
| Seyon   Nerve Transmission Studies, 5-6 Studies   \$145.99  |       |   |                                       |
| Septo   Nerve Transmission Studies, 7-8 Studies   \$190.9   |       | , ,   |                                       |
| Septil   Nerve Transmission Studies, 9-10 Studies   \$229.9   |       |   | \$190.94                              |
| Sept   Nerve Transmission Studies, 13 Or More Studies   \$309.4   | 95911 | Nerve Transmission Studies, 9-10 Studies  | \$229.94                              |
| Measurement Of Pupil With Healthcare Professional Interpretation And Report   S\$3.6  | 95912 | Nerve Transmission Studies, 11-12 Studies   | \$267.62                              |
| Testing Of Autonomic For Heart Rate Response To Deep Breathing Testing Of Autonomic Nervous System Function; Vasomotor Adrenergic Innervation (Sympathetic Adrenergic Function), Including Beat-To-Beat 195922 Blood Pressure And R-R Interval Changes During Valsabya Maneuver And At Least Five Minutes Of Passive Tilt Testing Of Autonomic Nervous System Function; Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex Test (Qsart), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential \$135.5 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 Testing Of Autonomic (Sympathetic) Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic (Sympathetic) Nervous System; In Lower Limbs \$177.8 Testing Of Autonomic (Sympathetic) Nervous System; In Upper Limbs \$177.8 Testing Of Autonomic (Sympathetic) Nervous System; In Lower Limbs \$177.8 Testing Of Autonomic (Sympathetic) Nervous System; In Lower Limbs \$159.2 Testing Of Autonomic (Sympathetic) Nervous System; In Upper Limbs \$159.3 Testing Of Autonomic Nervous System; In Upper Limbs \$159.3 Testing Of Autonomic Nervous System; In Upper Limbs \$159.3 Testing Of Autonomic Nervous System; In Upper And Testing (Repetitive Stimulation); Lower Limbs \$159.3 Testing Of Autonomic Nervous System; In Upper And Lower Limbs \$159.3 Testing Of Nervous System; In Upper And Lower Limbs \$159.3 Testing Of Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor Standard) Stimulation) Standard Stimulation Of Nervous System During Operation, Per Hour Pharmacological Or Physicial Activation Requiring Physi  |       |   | \$309.42                              |
| Testing Of Autonomic Nervous System Function; Vasomotor Adrenergic Innervation (Sympathetic Adrenergic Function), Including Beat-To-Beat Blood Pressure And R-R Interval Changes During Valsalva Maneuver And At Least Five Minutes Of Passive Tit \$97.11  Testing Of Autonomic Nervous System Function; Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex Testing Of Autonomic System Function; Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex Test (Qsart), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential \$135.5  95924 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4  95925 Nervous System; In Upper Limbs \$177.8  95926 Nervous System; In Lower Limbs \$154.0  95927 Nervous System; In The Trunk Or Head \$150.1  95928 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Upper Limbs \$228.4  95929 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Lower Limbs \$235.1  95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$770.0  95933 Orbicularis Oculi (Blink) Reflex, By Electrodiagnostic Testing \$81.6  95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method \$75.77  95938 Nervous System; In Upper And Lower Limbs \$389.8  Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$9593) Stimulation Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$9593) Stimulation Phase (Eg., Thiopental Activation Test) Price By Report Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of Price By Report Pharmacological Or Physical Activation Test) System During Operation, For Epileptic Spike Analysis Oligial Analysis Of Electrical Brain Wave Activity   |       |   | \$13.64                               |
| Sport   Blood Pressure And R-R Interval Changes During Valsalva Maneuver And At Least Five Minutes Of Passive Tilt   Testing Of Autonomic Nervous System Function; Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex   Sport (Spart), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential   \$135.55   \$155.54   \$155.55   \$159.45   \$   | 95921 |   | \$85.27                               |
| Testing Of Autonomic Nervous System Function, Sudomotor, Including One Or More Of The Following: Quantitative Sudomotor Axon Reflex Test (Osant), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential \$135.5 95924 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4 95925 Nervous System; In Upper Limbs \$177.8 95926 Nervous System; In Lower Limbs \$154.0 95927 Nervous System; In The Trunk Or Head \$150.1 95928 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Upper Limbs \$228.4 95929 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Lower Limbs \$228.1 95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$70.0 95931 Nervous System; Detertorial Study (Transcranial Motor Stimulation); Lower Limbs \$235.1 95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$70.0 95931 Nervous Couli (Blink) Reflex, By Electrodiagnostic Testing \$81.6 95937 Nervous System; In Upper And Lower Limbs \$36937 Nervous System; In Upper And Lower Limbs \$389.8 10sertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) \$389.8 10sertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) \$389.8 10sertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes 95941 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes 95955 Electroencephalogram (Eeg) (Eg, Carotid Surgery) 95956 Mada Activation Phase (Eg, Thiopental Activation Test) 95956 Mada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring 100 Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Prov   |       |   |                                       |
| Test (Ösart), Silastic Sweat Imprint, Thermoregulatory Sweat Test, And Changes In Sympathetic Skin Potential \$135.5  95924 Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt \$159.4  95925 Nervous System; In Upper Limbs \$177.8  95927 Nervous System; In Lower Limbs \$150.1  95928 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Upper Limbs \$228.4  95929 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Upper Limbs \$228.4  95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$9530 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$9530 Noicularis Oculi (Blink) Reflex, By Electrodiagnostic Testing \$181.6  95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method \$75.7  \$100 Noit-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central  95938 Nervous System; In Upper And Lower Limbs \$389.8  Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor  95939 Stimulation)  \$338.8  95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5  95941 Continuous Monitoring Of Nervous System During Operation, Per Hour  Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of  95954 Activation Phase (Eg, Thiopental Activation Test)  95956 Wada Activation Test For Hemispheric Function, Including Electroencephalogram (Eeg) Using Electroencephalogram (Eeg) Using Electroencephalographic (Eeg) Monitoring  Mapping Of Electrical Brain Wave Activity (Eeg) Using Electroencephalographic (Eeg) Using Electroencephalographic (Eeg) Using Electroencephalogram Function, First  | 95922 | i i   | \$97.16                               |
| Testing Of Autonomic (Sympathetic) Nervous System Function, At Least 5 Minutes Of Tilt   \$159.49   | 05022 |   | ¢125 57                               |
| September   Sept  |       |   |                                       |
| State   |       |   |                                       |
| Stot   Specified   Stot   Specified   Stot   Specified   Stot   Specified   Stot   Specified   Speci  |       | ·   |                                       |
| September   Sept  |       |   | \$150.11                              |
| 95929 Central Motor Evoked Potential Study (Transcranial Motor Stimulation); Lower Limbs \$235.1 95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$70.0 95933 Orbicularis Oculi (Blink) Reflex, By Electrodiagnostic Testing 95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method \$75.7:  Short-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$389.8 Simulation) \$389.8 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 Oction Phase (Eg., Thiopental Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eg. Recording Of Samples Electroencephalogram (Eeg.) During Nonintracranial Surgery (Eg., Carotid Surgery) \$389.6 Siguil Analysis Of Electroencephalogram (Eeg.) (Eg., For Epileptic Spike Analysis) \$249.6 Mapping Of Electrical Brain Wave Activity (Eeg.) Using Electroencephalographic (Eeg.) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg.) Using Electroencephalographic (Eeg.) Monitoring   |       |   | \$228.42                              |
| 95930 Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation \$70.0 95933 Orbicularis Oculi (Blink) Reflex, By Electrodiagnostic Testing 95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method \$75.77 Short-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central 95938 Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$388.3 95930 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of Activation Phase (Eg, Thiopental Activation Test) \$389.65 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) \$249.65 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First   |       | 7. 11   | \$235.17                              |
| 95937 Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli), Each Nerve, Any One Method Short-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central 95938 Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First  | 95930 | Measurement And Recording Of Nerve Conduction Patterns Using Visually-Evoked Stimulation  | \$70.01                               |
| Short-Latency Somatosensory Evoked Potential Study, Stimulation Of Any/All Peripheral Nerves Or Skin Sites, Recording From The Central 95938 Nervous System; In Upper And Lower Limbs \$389.8 Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) \$588.3 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First   |       |   | \$81.67                               |
| 95938 Nervous System; In Upper And Lower Limbs Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor 95939 Stimulation) 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First   | 95937 |   | \$75.72                               |
| Insertion Of Needles And Skin Electrodes For Measurement And Recording Of Stimulated Sites In The Arms And Legs (Brain Motor \$588.3 Stimulation) \$588.3 Stimulation) \$588.3 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes \$33.5 Ontinuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of \$389.6 Activation Phase (Eg, Thiopental Activation Test) \$389.6 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) \$389.6 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) \$249.6 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring \$605.3 Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First   |       |   | *                                     |
| 95939 Stimulation) 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First   | 95938 |   | \$389.81                              |
| 95940 Continuous Monitoring Of Nervous System During Operation, Each 15 Minutes  \$33.5 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First  | 05000 |   | <b>¢</b> 500.07                       |
| 95941 Continuous Monitoring Of Nervous System During Operation, Per Hour Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 95954 Activation Phase (Eg, Thiopental Activation Test) 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First  |       | '   |                                       |
| Pharmacological Or Physical Activation Requiring Physician Or Other Qualified Health Care Professional Attendance During Eeg Recording Of 4 Activation Phase (Eg, Thiopental Activation Test)  Sass.6   |       | , , , , ,   |                                       |
| 95954Activation Phase (Eg, Thiopental Activation Test)\$389.6095955Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery)\$174.3095957Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis)\$249.6095958Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring\$605.30Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First   | 000-1 |   | Thoo by Report                        |
| 95955 Electroencephalogram (Eeg) During Nonintracranial Surgery (Eg, Carotid Surgery) 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First   | 95954 |   | \$389.69                              |
| 95957 Digital Analysis Of Electroencephalogram (Eeg) (Eg, For Epileptic Spike Analysis) 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First   |       |   | \$174.39                              |
| 95958 Wada Activation Test For Hemispheric Function, Including Electroencephalographic (Eeg) Monitoring  Mapping Of Electrical Brain Wave Activity (Eeg) Using Electrodes On Brain Surface To Provoke Seizure Activity Or Assess Brain Function, First  |       |   | \$249.69                              |
|   |       |   | \$605.34                              |
| 95961 Hour \$308.3  |       |   |                                       |
|   | 95961 | Hour  | \$308.31                              |

| 95962 Provoke Seizures Or Identif  95965 Magnetoencephalography ( 95966 Measurement And Recordir 95967 Measurement And Recordir 95970 Electronic Analysis Of Impla 95971 Programming Electronic Analysis Of Impla 95972 Programming  95976 Electronic Analysis Of Impla 95977 Electronic Analysis Of Impla 95976 Electronic Analysis Of Impla 95980 Form, Battery Status, Electr Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Q Refilling And Maintenance O 95990 Includes Electronic Analysis  Refilling And Maintenance O 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers F 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electronic Review And Interpretation E 96004 Dynamic Fine Wire Electronic Review And Interpretation E 96004 Dynamic Fine Wire Electronic 96005 Dynamic Fine Wire Electronic P6006 Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Test Admini 96111 Developmental Test Admini 96112 Developmental Test Admini 96113 Developmental Test Admini 96110 Psychological Testing Evalu 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu   | ubcortical Mapping By Stimulation And/Or Recording Of Electrodes On Brain Surface, Or Of Depth Electrodes, To tify Vital Brain Structures; Each Additional Hour Of Attendance By A Physician Or Other Qualified   |                   |
|--|---|-------------------|
| 95966 Measurement And Recordir 95967 Measurement And Recordir 95970 Electronic Analysis Of Implated Electronic Analysis Of Implated Programming Electronic Analysis Of Implated Programming 95971 Electronic Analysis Of Implated Programming 95972 Electronic Analysis Of Implated Programming 95976 Electronic Analysis Of Implated Electronic Analysis Of I |   | \$252.91          |
| 95967 Measurement And Recordir 95970 Electronic Analysis Of Implate Electronic Analysis Of Implate Programming 95971 Programming 95972 Programming 95976 Electronic Analysis Of Implate Programming 95977 Electronic Analysis Of Implate Programming 95977 Electronic Analysis Of Implate Programming 95978 Electronic Analysis Of Implate Programming 95980 Form, Battery Status, Electronic Analysis Of Implate Program, Battery Sta | (Meg), Recording And Analysis; For Spontaneous Brain Magnetic Activity (Eg, Epileptic Cerebral Cortex Localization)   | \$426.17          |
| 95970 Electronic Analysis Of Implate Electronic Analysis Of Implate Programming Electronic Analysis Of Implate Programming 95972 Programming 95976 Electronic Analysis Of Implate Programming 95977 Electronic Analysis Of Implate Programming 95980 Form, Battery Status, Electronic Analysis Of Implate Program, Battery Status, Electronic Analysis Of Implatery Includes Electronic Analysis Of Implat | ling Of Externally Evoked Brain Processing Function Using Magnetic Fields, Single Method  | \$216.05          |
| Electronic Analysis Of Impla 95971 Programming Electronic Analysis Of Impla 95972 Programming  95976 Electronic Analysis Of Impla 95977 Electronic Analysis Of Impla 95980 Form, Battery Status, Electr  Electronic Analysis Of Impla 95981 Form, Battery Status, Electr  Electronic Analysis Of Impla 95982 Form, Battery Status, Electr  Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95985 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95986 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95987 Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Willisted Neurological Or Neuropa 96000 Three-Dimensional, Video-To-Pace Time With Electronic Analysis 96000 Three-Dimensional, Video-To-Pace Time Wire Electronic Analysis 96000 Three-Dimensional, Video-To-Pace Time Wire Electronic Analysis 96000 Dynamic Surface Electronic Pace Time Wire Electronic Analysis 96000 Dynamic Plantar Pressure Nouropamic Plantar Pla | ling Of Externally Evoked Brain Processing Function Using Magnetic Fields, Each Additional Method   | \$188.90          |
| 95971 Programming Electronic Analysis Of Implated Programming 95976 Electronic Analysis Of Implated Programming 95976 Electronic Analysis Of Implated Programming 95976 Electronic Analysis Of Implated Programming 95980 Form, Battery Status, Electronic Analysis Of Implated Programming 95980 Form, Battery Status, Electronic Analysis Of Implated Programming 95981 Form, Battery Status, Electronic Analysis Of Implated Programming 95982 Form, Battery Status, Electronic Analysis Of Implated Programming 95983 To-Face Time With Qualified Electronic Analysis Of Implated Programming 95984 Face-To-Face Time With Qualified Electronic Analysis Of Implated Programming 95989 Includes Electronic Analysis Of Implated Programming Manaeuvers F. 95999 Unlisted Neurological Or Neuropsympson Office of Includes Electronic Analysis Of Implated Neurological Testing Selection Office of Includes Electronic Analysis Office of Includes Elect | lanted Brain, Spinal Cord Or Peripheral Stimulation Device  | \$19.40           |
| Electronic Analysis Of Impla 95976 Electronic Analysis Of Impla 95976 Electronic Analysis Of Impla 95977 Electronic Analysis Of Impla 95980 Form, Battery Status, Electr Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95980 Includes Electronic Analysis Refilling And Maintenance Of 95990 Includes Electronic Analysis 95991 Repositioning Maneuvers F 95992 Repositioning Maneuvers F 95993 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-1 96001 Three-Dimensional, Video-1 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electron Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (Im 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96134 Psychological Or Neuropsych 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 1007 Intravenous Infusio | lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Simple Spinal Cord Or Peripheral Nerve Stimulator   | ·                 |
| 95976 Electronic Analysis Of Implated Programming 95977 Electronic Analysis Of Implated Programming 95977 Electronic Analysis Of Implated Programming 95980 Form, Battery Status, Electronic Analysis Of Implated Programming 95981 Form, Battery Status, Electronic Analysis Of Implated Programming 95982 Form, Battery Status, Electronic Analysis Of Implated Programming 95983 To-Face Time With Qualifier Electronic Analysis Of Implated Programming 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Implated Programming 95990 Includes Electronic Analysis 95991 Refilling And Maintenance Of Includes Electronic Analysis 95992 Repositioning Maneuvers From Programming 95999 Unlisted Neurological Or Neuropsymanic Plantar Pressure Maler Programming 96000 Three-Dimensional, Video-196002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electromy 96004 Dynamic Plantar Pressure Maler Programming 96005 Review And Interpretation Electronic Programming 96006 Production Ability, From Programming 96110 Developmental Test Adminitive Programming 961110 Developmental Test Adminitive Programming 96112 Developmental Test Adminitive Programming 96113 Developmental Test Adminitive Programming 96114 Neurobehavioral Status Examing 96130 Psychological Testing Evaluation Programming 96131 Psychological Testing Evaluation Programming 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96134 Psychological Or Neuropsyched 96165 Infusion Into A Vein For The 96365 Infusion Into A Vein For The  |   | \$50.43           |
| 95977 Electronic Analysis Of Impla Electronic Analysis Of Impla 95980 Form, Battery Status, Electr Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95985 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95986 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95990 Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96000 Three-Dimensional, Video-T 96000 Dynamic Surface Electromy 96000 Dynamic Fine Wire Electron Neurofunctional Testing Sel 96020 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96160 Administration And Interpret 96361 Infusion Into A Vein For The 96365 Infusion Into A Vein For The   | lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Complex Spinal Cord Or Peripheral Nerve Stimulator  | \$57.82           |
| Electronic Analysis Of Impla 95980 Form, Battery Status, Electronic Analysis Of Impla 95981 Form, Battery Status, Electronic Analysis Of Impla 95981 Form, Battery Status, Electronic Analysis Of Impla 95982 Form, Battery Status, Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Repositioning Maneuvers F. 95999 Unlisted Neurological Or Neurological Three-Dimensional, Video-196001 Three-Dimensional, Video-196002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electronic Review And Interpretation Electronic Physician Or Other Qualifier Surface Electronic Physician Or Other Qualifier Physician Or Other | lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Simple Cranial Nerve Stimulator Programming   | \$41.34           |
| Electronic Analysis Of Impla 95981 Form, Battery Status, Electr Electronic Analysis Of Impla 95982 Form, Battery Status, Electr Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifier Electronic Analysis Of Impla 95985 Face-To-Face Time With Qualifier Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers F 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electronic Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96160 Administration And Interpret 96361 Infusion Into A Vein For The  | lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Complex Cranial Nerve Stimulator Programming  | \$54.67           |
| Electronic Analysis Of Impla Form, Battery Status, Electronic Analysis Of Impla 95981 Form, Battery Status, Electronic Analysis Of Impla 95982 Form, Battery Status, Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla Face-To-Face Time With Qualifier Electronic Analysis Of Impla Posses of Includes Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers Fosses Unlisted Neurological Or Neurological Or Neurological Or Neurological Or Neurological Or Neurological Or Neurological Dynamic Surface Electromy 96000 Three-Dimensional, Video-196001 Three-Dimensional, Video-196002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electronic Review And Interpretation Electronic Posses Production Ability, Fosses Posses Production Ability, Fosses Production Posses Production Posses Production Posses Production Posses Posses Production Ability, Fosses Posses Production Ability, Fosses Production Posses Production Posses Production Posses Production Posses Production Posses Posses Production Posses Production Posses Posses Production Poss | lanted Neurostimulator Pulse Generator System (Eg, Rate, Pulse Amplitude And Duration, Configuration Of Wave trode Selectability, Output Modulation, Cycling, Impedance And Patient Measurements) Gastric Neuros  | \$39.76           |
| 95982 Form, Battery Status, Electronic Electronic Analysis Of Impla 95983 To-Face Time With Qualifier Electronic Analysis Of Impla Face-To-Face Time With Qualifier Electronic Analysis Of Impla Face-To-Face Time With Qualifier Electronic Analysis of Impla Face-To-Face Time With Qualifier Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95991 Includes Electronic Analysis 95992 Includes Electronic Analysis 95999 Unlisted Neurological Or Neurological Three-Dimensional, Video-To-96001 Three-Dimensional, Video-To-96002 Dynamic Surface Electronic Polynamic Fine Wire Electronic Review And Interpretation Electronic Polynamic Plantar Pressure Neurofunctional Testing Sel 96020 By A Physician Or Other Qualification Polynamic Plantar Pressure Neurofunctional Testing Sel 96100 Developmental Screening 96112 Developmental Test Adminic 96113 Developmental Test Adminic 96113 Developmental Test Adminic 96114 Neurobehavioral Status Execution Polynamic Plantar Pressure Neuropsychological Testing 96130 Psychological Testing Evaluation Psychological Testing Psychological Testing Psychological Testing Psychological Testing Psychological Or Neuropsychological Psychological Testing Psychological Or Neuropsychological Intravenous Infusion, Hydra Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   | lanted Neurostimulator Pulse Generator System (Eg, Rate, Pulse Amplitude And Duration, Configuration Of Wave strode Selectability, Output Modulation, Cycling, Impedance And Patient Measurements) Gastric Neuros | \$35.89           |
| Electronic Analysis Of Impla 95983 To-Face Time With Qualifie Electronic Analysis Of Impla 95984 Face-To-Face Time With Qualifie Refilling And Maintenance Of Includes Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95990 Includes Electronic Analysis Refilling And Maintenance Of Includes Electronic Analysis 95992 Repositioning Maneuvers F. 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T. 96001 Three-Dimensional, Video-T. 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electronic Review And Interpretation E. 96004 Dynamic Plantar Pressure N. Neurofunctional Testing Sel 96020 By A Physician Or Other Qu. Assessment Of Aphasia (In. 96105 Speech Production Ability, F. 96110 Developmental Screening 96112 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 1000 Intravenous Infusion, Hydra | lanted Neurostimulator Pulse Generator System (Eg, Rate, Pulse Amplitude And Duration, Configuration Of Wave trode Selectability, Output Modulation, Cycling, Impedance And Patient Measurements) Gastric Neuros  | \$54.22           |
| Electronic Analysis Of Impla 95984 Face-To-Face Time With Q Refilling And Maintenance O 95990 Includes Electronic Analysis Refilling And Maintenance O 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers F 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electrom Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The   | lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Brain Stimulator Programming, First 15 Minutes Face-  | 7-11-             |
| Refilling And Maintenance Concludes Electronic Analysis Refilling And Maintenance Concludes Electronic Analysis Refilling And Maintenance Concludes Electronic Analysis Psy91 Includes Electronic Analysis Sy92 Repositioning Maneuvers For Sy99 Unlisted Neurological Or Other Outological Or Other Outological Or Neurological Intravenous Infusion, Hydra Infusion Into A Vein For The  | ed Health Care Professional lanted Brain, Spinal Cord Or Peripheral Stimulation Device With Brain Stimulator Programming, Additional 15 Minutes   | \$52.13           |
| Refilling And Maintenance On Includes Electronic Analysis Sp5992 Repositioning Maneuvers F Sp599 Unlisted Neurological Or Other  | Qualified Health Care Professional  Of Implantable Pump Or Reservoir For Drug Delivery, Spinal (Intrathecal, Epidural) Or Brain (Intraventricular),   | \$37.79           |
| 95991 Includes Electronic Analysis 95992 Repositioning Maneuvers F 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-T 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electrom Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The   | is Of Pump, When Performed;   | \$87.12           |
| 95999 Unlisted Neurological Or Ne 96000 Three-Dimensional, Video-1 96001 Three-Dimensional, Video-1 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electrom Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The  | Of Implantable Pump Or Reservoir For Drug Delivery, Spinal (Intrathecal, Epidural) Or Brain (Intraventricular), is Of Pump, When Performed; Requiring Skill Of A Physician Or Other Qualified Health Care Profes  | \$104.69          |
| 96000 Three-Dimensional, Video-1 96001 Three-Dimensional, Video-1 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electrom Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Ex 96121 Neurobehavioral Status Ex 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The  |   | \$45.56           |
| 96001 Three-Dimensional, Video-T 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electromy Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The  | ū   | Price By Report   |
| 96002 Dynamic Surface Electromy 96003 Dynamic Fine Wire Electromy 96003 Dynamic Fine Wire Electromy Review And Interpretation E 96004 Dynamic Plantar Pressure B Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In- 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Infusion Into A Vein For The  |   | \$80.17           |
| 96003 Dynamic Fine Wire Electron Review And Interpretation E 96004 Dynamic Plantar Pressure N Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In- 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96131 Psychological Testing Evalu 96131 Neuropsychological Testing 96136 Psychological Or Neuropsych 96137 Psychological Or Neuropsych 96160 Administration And Interpret 96361 Infusion Into A Vein For The   | -Taped, Computer-Based Gait Analysis During Walking   | \$103.64          |
| Review And Interpretation E 96004 Dynamic Plantar Pressure M Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Developmental Screening 96110 Developmental Screening 96111 Developmental Test Admini 96113 Developmental Test Admini 96114 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   | nyography, During Walking Or Other Functional Activities, 1-12 Muscles  | \$20.08           |
| 96004 Dynamic Plantar Pressure Neurofunctional Testing Sel 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   | omyography, During Walking Or Other Functional Activities, 1 Muscle   | \$15.81           |
| 96020 By A Physician Or Other Qu Assessment Of Aphasia (In 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96140 Administration And Interpret 96161 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The  | By Physician Or Other Qualified Health Care Professional Of Comprehensive Computer-Based Motion Analysis, Measurements, Dynamic Surface Electromyography During Walking Or Other Functional Activities, And D     | \$113.46          |
| 96105 Speech Production Ability, F 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exe 96121 Neurobehavioral Status Exe 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96136 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   | election And Administration During Noninvasive Imaging Functional Brain Mapping, With Test Administered Entirely Qualified Health Care Professional (Ie, Psychologist), With Review Of Test Results And Report    | \$172.40          |
| 96110 Developmental Screening 96112 Developmental Test Admini 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra 196365 Infusion Into A Vein For The  | ncludes Assessment Of Expressive And Receptive Speech And Language Function, Language Comprehension, Reading, Spelling, Writing, Eg, By Boston Diagnostic Aphasia Examination) With Interpretation And Report, P  | \$92.38           |
| 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   |   | \$13.63           |
| 96113 Developmental Test Admini 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   | nistration By Qualified Health Care Professional With Interpretation And Report, First 60 Minutes   | \$146.58          |
| 96116 Neurobehavioral Status Exa 96121 Neurobehavioral Status Exa 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   | nistration By Qualified Health Care Professional With Interpretation And Report, Additional 30 Minutes  | \$65.46           |
| 96125 Standardized Thought Proc 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu 96131 Psychological Testing Evalu 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsych 96137 Psychological Or Neuropsych 96160 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The  | xamination By Qualified Health Care Professional With Interpretation And Report, First 60 Minutes   | \$112.22          |
| 96127 Brief Emotional Or Behavior 96130 Psychological Testing Evalu. 96131 Psychological Testing Evalu. 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   | xamination By Qualified Health Care Professional With Interpretation And Report, Additional 60 Minutes  | \$88.80           |
| 96130 Psychological Testing Evalu-<br>96131 Psychological Testing Evalu-<br>96132 Neuropsychological Testing<br>96133 Neuropsychological Testing<br>96136 Psychological Or Neuropsyc<br>96137 Psychological Or Neuropsyc<br>96160 Administration And Interpret<br>96161 Administration And Interpret<br>96361 Intravenous Infusion, Hydra<br>Intravenous Infusion, Hydra<br>96365 Infusion Into A Vein For The   | cessing Testing, Interpretation, And Report Per Hour  | \$105.93          |
| 96131 Psychological Testing Evalu-<br>96132 Neuropsychological Testing<br>96133 Neuropsychological Testing<br>96136 Psychological Or Neuropsyc<br>96137 Psychological Or Neuropsyc<br>96160 Administration And Interpret<br>96161 Administration And Interpret<br>96361 Intravenous Infusion, Hydra<br>Intravenous Infusion, Hydra<br>96365 Infusion Into A Vein For The   |   | \$6.24            |
| 96132 Neuropsychological Testing 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The   | luation By Qualified Health Care Professional, First 60 Minutes   | \$112.22          |
| 96133 Neuropsychological Testing 96136 Psychological Or Neuropsyc 96137 Psychological Or Neuropsyc 96160 Administration And Interpret 96161 Administration And Interpret 96361 Intravenous Infusion, Hydra Intravenous Infusion, Hydra 96365 Infusion Into A Vein For The  | luation By Qualified Health Care Professional, Additional 60 Minutes  | \$112.22          |
| 96136 Psychological Or Neuropsyc<br>96137 Psychological Or Neuropsyc<br>96160 Administration And Interpret<br>96161 Administration And Interpret<br>96361 Intravenous Infusion, Hydra<br>Intravenous Infusion, Hydra<br>96365 Infusion Into A Vein For The   | g Evaluation By Qualified Health Care Professional, First 60 Minutes  | \$112.22          |
| 96137 Psychological Or Neuropsyc<br>96160 Administration And Interpret<br>96161 Administration And Interpret<br>96361 Intravenous Infusion, Hydra<br>Intravenous Infusion, Hydra<br>96365 Infusion Into A Vein For The   | g Evaluation By Qualified Health Care Professional, Additional 60 Minutes   | \$112.22          |
| 96160 Administration And Interpret<br>96161 Administration And Interpret<br>96361 Intravenous Infusion, Hydra<br>Intravenous Infusion, Hydra<br>96365 Infusion Into A Vein For The   | ychological Test Administration And Scoring By Qualified Health Care Professional, First 30 Minutes   | \$56.12           |
| 96161 Administration And Interpret<br>96361 Intravenous Infusion, Hydra<br>Intravenous Infusion, Hydra<br>96365 Infusion Into A Vein For The   | ychological Test Administration And Scoring By Qualified Health Care Professional, Additional 30 Minutes  etation Of Patient-Focused Health Risk Assessment   | \$56.12<br>\$2.66 |
| 96361 Intravenous Infusion, Hydra<br>Intravenous Infusion, Hydra<br>96365 Infusion Into A Vein For The   | etation Of Caregiver-Focused Health Risk Assessment   | \$11.71           |
| Intravenous Infusion, Hydra<br>96365 Infusion Into A Vein For The  | ů .   | \$36.23           |
| 96365 Infusion Into A Vein For The   | ration; Each Additional Hour (List Separately In Addition To Code For Primary Procedure)  | \$13.57           |
| 96366 Infusion Into A Vein For The   | nerapy, Prevention, Or Diagnosis Up To 1 Hour   | \$72.00           |
|  | erapy, Prevention, Or Diagnosis   | \$22.59           |
|  | Hour (List Separately In Addition To Code For Primary Procedure)  | \$31.87           |
|  | nerapy, Prevention, Or Diagnosis, Concurrent With Another Infusion  | \$20.97           |
|  | or Therapy Or Prophylaxis (Specify Substance Or Drug); Initial, Up To 1 Hour, Including Pump Set-Up And   | Ф420 <u>20</u>    |
| 96369 Establishment Of Subcutan  | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   | \$139.22          |
|  | nerapy Or Prevention, Beneath The Skin  | \$14.51           |
| 96371 Infusion For Therapy Or Pre  | · · · · · · · · · · · · · · · · · · ·   | \$56.57           |
| 96372 Injection Beneath The Skin   |   | \$11.14           |
|  | 177   | \$17.13           |
| 96374 Injection Of Drug Or Substa<br>96375 Injection Of Different Drug O   | nerapy, Diagnosis, Or Prevention  | \$41.67           |

| 96376  | Description  | Foo   |
|--|--|---|
|  | Description Injection Of Drug Or Substance Into A Vein For Therapy, Diagnosis, Or Prevention, In A Facility  | Fee<br>Price By Report  |
| - 20.3//   | Application Of On-Body Injector For Injection Under Skin   | \$20.01   |
|  | Injection Or Infusion Into A Vein Or Artery For Therapy, Prevention, Or Diagnosis  | Price By Report   |
|  | Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by intramuscular injection, with counseling by physician or  | , , , ,   |
| 96380  | other qualified health care professional   | \$19.85   |
|  | Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by intramuscular injection   | \$17.21   |
|  | Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic   | \$72.39   |
|  | Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic   | \$35.13   |
|  | Chemotherapy Into A Lesion, Up To And Including 7 Lesions  | \$59.57   |
|  | Chemotherapy Into A Lesion, More Than 7 Lesions  Chemotherapy Administration Introduced Publications Single Or Initial Substance/Drug  | \$94.11   |
| 96409  | Chemotherapy Administration; Intravenous, Push Technique, Single Or Initial Substance/Drug  Chemotherapy Administration; Intravenous, Push Technique, Each Additional Substance/ Drug (List Separately In Addition To Code For   | \$111.47  |
| 96411  | Primary Procedure)   | \$60.83   |
|  | Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour, Single Or Initial Substance/Drug  | \$145.03  |
| 00110  | Chemotherapy Administration, Intravenous Infusion Technique; Each Additional Hour, 1 To 8 Hours (List Separately In Addition To Code For   | ψ110.00   |
| 96415  | Primary Procedure)   | \$30.78   |
|  | Chemotherapy Administration, Intravenous Infusion Technique; Initiation Of Prolonged Chemotherapy Infusion (More Than 8 Hours), Requiring  |   |
| 96416  | Use Of A Portable Or Implantable Pump  | \$142.36  |
|  | Chemotherapy Administration, Intravenous Infusion Technique; Each Additional Sequential Infusion (Different Substance/ Drug), Up To 1 Hour   |   |
|  | (List Separately In Addition To Code For Primary Procedure)  | \$70.63   |
|  | Chemotherapy Administration, Intra-Arterial Push Technique   | \$102.94  |
| 96422  | Chemotherapy Administration, Intra-Arterial; Infusion Technique, Up To One Hour  | \$157.12  |
| 00.405   | Chemotherapy Administration, Intra-Arterial; Infusion Technique, Each Additional Hour Up To 8 Hours (List Separately In Addition To Code For   | <b>^-</b>   |
|  | Primary Procedure) Prolonged Chemotherapy Infusion Into Artery By Portable Or Implanted Pump, More Than 8 Hours  | \$72.51   |
|  | Administration Of Chemotherapy Into Chest Cavity   | \$169.02<br>\$758.43  |
|  | Administration Of Chemotherapy Into Criest Cavity  Administration Of Chemotherapy Into Abdominal Cavity  | \$758.43<br>\$188.13  |
|  | Chemotherapy Administration, Into Cns (Eg, Intrathecal), Requiring And Including Spinal Puncture   | \$179.56  |
|  | Refilling And Maintenance Of Portable Pump   | \$179.30  |
|  | Refilling And Maintenance Of Implantable Pump Or Reservoir For Drug Delivery, Systemic (Eg, Intravenous, Intra-Arterial)   | \$116.47  |
|  | Irrigation Of Implanted Venous Access Device For Drug Delivery Systems   | \$26.32   |
|  | Chemotherapy Injection, Subarachnoid Or Intraventricular Via Subcutaneous Reservoir, Single Or Multiple Agents   | \$127.03  |
| 96547  | Intraoperative Heated Intraperitoneal Chemotherapy, First 60 Minutes   | Price By Report   |
| 96548  | Intraoperative Heated Intraperitoneal Chemotherapy, Each Additional 30 Minutes   | Price By Report   |
| 96549  | Unlisted Chemotherapy Procedure  | \$31.14   |
| 96567  | Application Of Light And Light-Sensitive Drugs To Aid Destruction Of Premalignant Skin Growths, Per Session  | \$128.21  |
|  | Photodynamic Therapy By Endoscopic Application Of Light To Ablate Abnormal Tissue Via Activation Of Photosensitive Drug(S); First 30   |   |
| 96570  | Minutes (List Separately In Addition To Code For Endoscopy Or Bronchoscopy Procedures Of Lung And Gastrointestinal Tract)  | \$47.46   |
|  | Photodynamic Therapy By Endoscopic Application Of Light To Ablate Abnormal Tissue Via Activation Of Photosensitive Drug(S); Each   |   |
| 96571  | Additional 15 Minutes (List Separately In Addition To Code For Endoscopy Or Bronchoscopy Procedures Of Lung And Gastrointestinal   | \$23.68   |
| 96573  | Application Of Light And Light-Sensitive Drugs To Aid Destruction Of Premalignant Skin Growths, Per Day  | \$227.51  |
| 96574  | Application Of Light And Light-Sensitive Drugs Following Removal Of Premalignant Thickened Skin Growth, Per Day  | \$263.19  |
| 96900  | Actinotherapy (Ultraviolet Light)  | \$16.86   |
|  | Microscopic Examination Of Hairs Plucked Or Clipped By The Examiner (Excluding Hair Collected By The Patient) To Determine Telogen And   |   |
| 96902  | Anagen Counts, Or Structural Hair Shaft Abnormality  | \$0.01  |
| 00004  | Whole Body Integumentary Photography, For Monitoring Of High Risk Patients With Dysplastic Nevus Syndrome Or A History Of Dysplastic   |   |
|  | Nevi, Or Patients With A Personal Or Familial History Of Melonoma  Photochemotherapy Tar And Ultraviolet B (Goeckerman Treatment) Or Petrolatum And Ultraviolet B  | ¢co.40  |
| 90910  | Filotochemotherapy far And Ottraviolet B (Gueckenhan freathlent) Of Fetiolatum And Ottraviolet B   | \$69.12   |
|  |  | \$83.62   |
| 96912  | Photochemotherapy Psoralens And Ultraviolet A (Puva)   |   |
| 96912  |  | \$83.62<br>\$97.89  |
| 96912<br>96913   | Photochemotherapy Psoralens And Ultraviolet A (Puva)  Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care  | \$83.62   |
| 96912<br>96913<br>96920  | Photochemotherapy Psoralens And Ultraviolet A (Puva)  Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)   | \$83.62<br>\$97.89<br>\$146.74  |
| 96912<br>96913<br>96920<br>96921   | Photochemotherapy Psoralens And Ultraviolet A (Puva)  Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42  |
| 96912<br>96913<br>96920<br>96921<br>96922  | Photochemotherapy Psoralens And Ultraviolet A (Puva)  Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm   | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60  |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932  | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion   | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04  |
| 96912<br>96913<br>96920<br>96921<br>96931<br>96932<br>96933  | Photochemotherapy Psoralens And Ultraviolet A (Puva)  Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 520.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin - First Lesion  Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion   | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34   |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933   | Photochemotherapy Psoralens And Ultraviolet A (Puva)  Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin - First Lesion  Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34   |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96934  | Photochemotherapy Psoralens And Ultraviolet A (Puva)  Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin - First Lesion  Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56   |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96934<br>96935<br>96936  | Photochemotherapy Psoralens And Ultraviolet A (Puva)  Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin - First Lesion  Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin  Interpretation And Report Of Microscopy Of Lesion Of Skin   | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87  |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96934<br>96935<br>96936  | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure  | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report  |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96934<br>96935<br>96936<br>96999<br>97012  | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Ultraviolation And Report Of Microscopy Of Lesion Of Skin Ultraviolation And Report Of Microscopy Of Lesion Of Skin Ultraviolation And Report Of Microscopy Of Lesion Of Skin Ultraviolation And Report Of Microscopy Of Lesion Of Skin Ultraviolation And Report Of Microscopy Of Lesion Of Skin Ultraviolation And Report Of Microscopy Of Lesion Of Skin Ultraviolation And Report Of Microscopy Of Lesion Of Skin Ultraviolation And Report Of Microscopy Of Lesion Of Skin Ultraviolation Treatment To One Area Traction, Mechanical  | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report  |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96934<br>96936<br>96999<br>97012   | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure Physical Medicine Treatment To One Area Traction, Mechanical Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist  | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report  |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96935<br>96936<br>96999<br>97012<br>97014<br>97016   | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Of Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure Physical Medicine Treatment To One Area Traction, Mechanical Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist Physical Medicine Treatment To One Area; Vasopneumatic Devices  | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$18.60<br>\$225.04<br>\$166.05<br>\$1124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96   |
| 96912<br>96913<br>96920<br>96921<br>96932<br>96933<br>96934<br>96935<br>96936<br>96999<br>97012<br>97014   | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, Sco.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin - First Lesion  Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Microscopy Of Lesion Of Skin  Unlisted Special Dermatological Service Or Procedure  Physical Medicine Treatment To One Area Traction, Mechanical  Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist  Physical Medicine Treatment To One Area; Vasopneumatic Devices  Physical Medicine Treatment To One Area Paraffin Bath   | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96   |
| 96912<br>96913<br>96920<br>96921<br>96932<br>96933<br>96934<br>96935<br>96936<br>96999<br>97012<br>97014<br>97016  | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Rep | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96   |
| 96912<br>96913<br>96920<br>96921<br>96932<br>96933<br>96934<br>96935<br>96936<br>96999<br>97012<br>97014<br>97016<br>97018   | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Rep | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$13.13  |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96936<br>96936<br>97012<br>97014<br>97016<br>97018<br>97022<br>97024   | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpre | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$13.13<br>\$9.96  |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96934<br>96936<br>96936<br>96936<br>97014<br>97016<br>97018<br>97022<br>97024<br>97026<br>97028   | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Rep | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$9.96<br>\$13.13<br>\$9.96<br>\$9.96  |
| 96912<br>96913<br>96920<br>96921<br>96932<br>96931<br>96932<br>96934<br>96935<br>96936<br>97012<br>97014<br>97016<br>97018<br>97022<br>97024<br>97024<br>97028<br>97028  | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin Of Skin Of Skin - First Lesion  Microscopy Of Lesion Of Skin Of S | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$9.96<br>\$13.13<br>\$9.96<br>\$15.38<br>\$15.59                                  |
| 96912<br>96913<br>96920<br>96921<br>96932<br>96931<br>96932<br>96933<br>96934<br>96935<br>96936<br>97014<br>97016<br>97018<br>97022<br>97024<br>97026<br>97028<br>97032<br>97032                                     | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, Abore Than 500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin Unlisted Special Dermatological Service Or Procedure Physical Medicine Treatment To One Area Traction, Mechanical Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist Physical Medicine Treatment To One Area Paraffin Bath Physical Medicine Treatment To One Area Paraffin Bath Physical Medicine Treatment To One Area Spiathermy (Eg, Microwave) Physical Medicine Treatment To One Area Infrared Physical Medicine Treatment To One Area Ultraviolet Application Of Electrical Stimulation With Therapist Present, Each 15 Minutes   | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$13.13<br>\$9.96<br>\$15.58<br>\$15.58  |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96934<br>96935<br>96936<br>97014<br>97016<br>97018<br>97022<br>97024<br>97026<br>97032<br>97033<br>97033  | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$18.60<br>\$225.04<br>\$166.05<br>\$1124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$9.96<br>\$13.13<br>\$9.96<br>\$13.13<br>\$15.59<br>\$15.59<br>\$14.90<br>\$17.24 |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96936<br>96936<br>96939<br>97014<br>97016<br>97018<br>97022<br>97024<br>97026<br>97032<br>97032<br>97034<br>97034                            | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of Hot And Cold Baths, Each 15 Minutes Application Of Hot And Cold Baths, Each 15 Minutes   | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$9.96<br>\$13.13<br>\$9.96<br>\$9.96  |
| 96912<br>96913<br>96920<br>96921<br>96931<br>96932<br>96933<br>96935<br>96936<br>96939<br>97014<br>97016<br>97018<br>97022<br>97024<br>97028<br>97032<br>97033<br>97034<br>97035<br>97036                            | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings) Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin Vith Interpretation And Report - First Lesion Microscopy Of Lesion Of Skin With Interpretation And Report Microscopy Of Lesion Of  | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$13.13<br>\$9.96<br>\$15.38<br>\$15.59<br>\$14.90<br>\$17.24                      |
| 96912<br>96913<br>96920<br>96921<br>96922<br>96931<br>96932<br>96933<br>96934<br>96935<br>96936<br>96939<br>97012<br>97014<br>97016<br>97022<br>97024<br>97024<br>97033<br>97034<br>97035<br>97036<br>97039<br>97039 | Photochemotherapy Psoralens And Ultraviolet A (Puva) Photochemotherapy (Goeckerman And/Or Puva) For Severe Photoresponsive Dermatoses Requiring At Least Four To Eight Hours Of Care Under Direct Supervision Of The Physician (Includes Application Of Medication And Dressings)  Treatment Of Inflammatory Skin Disease Using Laser, Less Than 250.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, 250.0-500.0 Sq Cm  Treatment Of Inflammatory Skin Disease Using Laser, More Than 500.0 Sq Cm  Microscopy Of Lesion Of Skin With Interpretation And Report - First Lesion  Microscopy Of Lesion Of Skin - First Lesion Interpretation And Report Of Microscopy Of Lesion Of Skin - First Lesion  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin With Interpretation And Report  Microscopy Of Lesion Of Skin  Unlisted Special Dermatological Service Or Procedure  Physical Medicine Treatment To One Area Traction, Mechanical  Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist  Physical Medicine Treatment To One Area Paraffin Bath  Physical Medicine Treatment To One Area Paraffin Bath  Physical Medicine Treatment To One Area Paraffin Bath  Physical Medicine Treatment To One Area Ultraviolet  Application Of A Modality To One Or More Areas; Diathermy (Eg, Microwave)  Physical Medicine Treatment To One Area Ultraviolet  Application Of Hodication Using Electrical Current, Each 15 Minutes  Application Of Hodication Using Electrical Current, Each 15 Minutes  Application Of Ultrasound, Each 15 Minutes  Application Of Ultrasound, Each 15 Minutes  Application Of Ultrasound, Each 15 Minutes  Application Of Water Therapy Using A Special Tank, Each 15 Minutes   | \$83.62<br>\$97.89<br>\$146.74<br>\$177.42<br>\$188.60<br>\$225.04<br>\$166.05<br>\$124.71<br>\$41.34<br>\$115.56<br>\$75.87<br>\$39.70<br>Price By Report<br>\$10.86<br>\$9.96<br>\$9.96<br>\$13.13<br>\$9.96<br>\$13.13<br>\$9.96<br>\$15.38<br>\$15.59<br>\$14.90<br>\$17.24 |

| Code    | Description  | Fee                 |
|---------|--|---------------------|
| 97113   | Water Pool Therapy With Therapeutic Exercises To 1 Or More Areas, Each 15 Minutes  | \$27.76             |
| 97116   | Walking Training To 1 Or More Areas, Each 15 Minutes   | \$21.97             |
|         | Therapeutic Procedure, One Or More Areas, Each 15 Minutes; Unlisted Therapeutic Procedure (Specify)  | \$31.76             |
|         | Manual (Physical) Therapy Techniques To 1 Or More Regions, Each 15 Minutes   | \$20.19             |
|         | Therapeutic Procedure(S), Group (2 Or More Individuals)  | \$14.91             |
|         |  |                     |
|         | Evaluation Of Physical Therapy, Typically 20 Minutes   | \$73.71             |
|         | Evaluation Of Physical Therapy, Typically 30 Minutes   | \$73.71             |
|         | Evaluation Of Physical Therapy, Typically 45 Minutes   | \$73.71             |
| 97164   | Re-Evaluation Of Physical Therapy, Typically 20 Minutes  | \$57.74             |
| 97165   | Evaluation Of Occupational Therapy, Typically 30 Minutes   | \$73.71             |
| 97166   | Evaluation Of Occupational Therapy, Typically 45 Minutes   | \$73.71             |
| 97167   | Evaluation Of Occupational Therapy Established Plan Of Care, Typically 60 Minutes  | \$73.71             |
| 97168   | Re-Evaluation Of Occupational Therapy Established Plan Of Care, Typically 30 Minutes   | \$54.53             |
|         | Therapeutic Activities To Improve Function, With One-On-One Contact Between Patient And Provider, Each 15 Minutes  | \$28.53             |
|         | Sensory Technique To Enhance Processing And Adaptation To Environmental Demands, Each 15 Minutes   | \$45.50             |
|         | Training For Self-Care Or Home Management, Each 15 Minutes   | \$24.28             |
|         |  |                     |
|         | Wheelchair Management, Each 15 Minutes   | \$22.23             |
|         | Removal Of Tissue From Wound, 20.0 Sq Cm Or Less   | \$71.57             |
|         | Removal Of Tissue From Wound, Each Additional 20.0 Sq Cm   | \$47.40             |
|         | Removal Of Tissue From Wounds Per Session  | \$43.35             |
| 97605   | Therapy Procedure Using A Special Bandage And Vacuum Pump, Surface Area 50.0 Sq Cm Or Less   | \$44.95             |
| 97606   | Therapy Procedure Using A Special Bandage And Vacuum Pump, Surface Area More Than 50.0 Sq Cm   | \$51.50             |
|         | Therapy Procedure Using A Special Bandage, Vacuum Pump And Disposable Medical Equipment, Surface Area 50.0 Sq Cm Or Less   | \$273.83            |
|         |  |                     |
| 97608   | Therapy Procedure Using A Special Bandage, Vacuum Pump And Disposable Medical Equipment, Surface Area More Than 50.0 Sq Cm   | \$270.07            |
|         | Low Frequency, Non-Contact, Non-Thermal Ultrasound Wound Assessment, And Instructions For Ongoing Care, Per Day  | \$442.91            |
|         | Physical Performance Test Or Measurement With Report, Each 15 Minutes  |                     |
|         | Assistive Technology Assessment To Enhance Functional Performance, Each 15 Minutes   | \$24.99<br>\$38.29  |
|         |  |                     |
|         | Training In Use Of Orthotics (Supports, Braces, Or Splints) For Arms, Legs And/Or Trunk, Per 15 Minutes  | \$36.35             |
|         | Management And/Or Training In Use Of Orthotics (Supports, Braces, Or Splints) For Arms, Legs, And/Or Trunk, Per 15 Minutes   | \$39.88             |
|         | Unlisted Physical Medicine/Rehabilitation Service Or Procedure   | \$37.39             |
| 97802   | Medical Nutrition Therapy, Assessment And Intervention, Each 15 Minutes  | \$37.46             |
| 97803   | Medical Nutrition Therapy Re-Assessment And Intervention, Each 15 Minutes  | \$32.49             |
| 97804   | Medical Nutrition Therapy Performed In A Group Setting, Each 30 Minutes  | \$17.21             |
| 98925   | Osteopathic Manipulative Treatment (Omt); One To Two Body Regions Involved   | \$27.14             |
|         | Osteopathic Manipulative Treatment (Omt); Three To Four Body Regions Involved  | \$48.50             |
|         | Osteopathic Manipulative Treatment (Omt); Five To Six Body Regions Involved  | \$48.50             |
|         | Osteopathic Manipulative Treatment (Omt); Seven To Eight Body Regions Involved   | \$56.42             |
|         | Osteopathic Manipulative Treatment (Omt); Nine To Ten Body Regions Involved  | \$61.33             |
|         |  |                     |
|         | Telephone Assessment And Management Service, 5-10 Minutes Of Medical Discussion  | \$16.71             |
|         | Telephone Assessment And Management Service, 11-20 Minutes Of Medical Discussion   | \$30.84             |
| 98968   | Telephone Assessment And Management Service, 21-30 Minutes Of Medical Discussion   | \$45.42             |
|         | Supplies And Materials (Except Spectacles), Provided By The Physician Or Other Qualified Health Care Professional Over And Above Those   |                     |
| 99070   | Usually Included With The Office Visit Or Other Services Rendered (List Drugs, Trays, Supplies, Or Materials Provided)   | \$0.01              |
|         | Special Reports Such As Insurance Forms, More Than The Information Conveyed In The Usual Medical Communications Or Standard  |                     |
| 99080   | Reporting Form   | \$0.01              |
|         | Collection And Interpretation Of Physical Parameters Stored In Computers And/Or Transmitted By The Patient And/Or Caregiver To Qualified   |                     |
| 99091   | Health Care Professional, Requiring 30 Minutes Or More, Per 30 Days  | \$48.80             |
|         | Moderate Sedation Services By Physician Also Performing A Procedure, Patient Younger Than 5 Years Of Age, First 15 Minutes   | \$73.90             |
|         | Moderate Sedation Services By Physician Also Performing A Procedure, Patient 5 Years Of Age Or Older, First 15 Minutes   | \$55.07             |
|         | Moderate Sedation Services By Physician Also Performing A Procedure, Additional 15 Minutes   | \$11.66             |
|         | Moderate Sedation Services By Physician Not Performing A Procedure, Patient Younger Than 5 Years Of Age, First 15 Minutes  | \$83.32             |
|         | Moderate Sedation Services By Physician Not Performing A Procedure, Patient Founger Than 3 Years Of Age, First 15 Minutes  Moderate Sedation Services By Physician Not Performing A Procedure, Patient 5 Years Of Age Or Older, First 15 Minutes |                     |
|         |  | \$78.87<br>\$50.99  |
|         | Moderate Sedation Services By Physician Not Performing A Procedure, Each Additional 15 Minutes   | \$59.88             |
| 99170   | Examination Of Genital And Anal Region Of Child Using An Endoscope, Suspected Trauma   | \$156.21            |
|         | Visual Function Screening, Automated Or Semi-Automated Bilateral Quantitative Determination Of Visual Acuity, Ocular Alignment, Color Vision   |                     |
| 99172   | By Pseudoisochromatic Plates, And Field Of Vision (May Include All Or Some Screening Of The Determinati  | \$15.58             |
|         | Screening Test Of Visual Acuity, Quantitative, Bilateral (The Screening Test Used Must Employ Graduated Visual Acuity Stimuli That Allow A   |                     |
| 99173   | Quantitative Estimate Of Visual Acuity (Eg, Snellen Chart). Other Identifiable Services Unrelated To This Screening  | \$15.11             |
|         | Ipecac Or Similar Administration For Individual Emesis And Continued Observation Until Stomach Adequately Emptied Of Poison  | \$27.58             |
|         | Instrument Based Eye Screening Of Both Eyes With Analysis  | Price By Report     |
|         | Physician Or Other Qualified Health Care Professional Attendance And Supervision Of Hyperbaric Oxygen Therapy, Per Session   | \$108.16            |
|         | Initiation Of Lowering Head Or Total Body Temperature In Neonate   | \$223.74            |
|         | Application Of Topical Fluoride  | \$32.20             |
|         | Application of replical Fluoride Assembly And Operation Of Heart-Lung Machine, Each Hour   | \$32.20<br>\$123.88 |
|         |  |                     |
|         | Assembly And Operation Of Heart-Lung Machine, 45 Minutes   | \$70.28             |
|         | Assembly And Operation Of Heart-Lung Machine, 30 Minutes   | \$51.90             |
|         | Phlebotomy, Therapeutic (Separate Procedure)   | \$87.28             |
|         | New Patient Office Or Other Outpatient Visit With Straightforward Medical Decision Making, If Using Time, 15 Minutes Or More   | \$63.63             |
| 99203   | New Patient Office Or Other Outpatient Visit With Low Level Of Medical Decision Making, If Using Time, 30 Minutes Or More  | \$94.58             |
| 99204   | New Patient Office Or Other Outpatient Visit With Moderate Level Of Medical Decision Making, If Using Time, 45 Minutes Or More   | \$134.32            |
|         | New Patient Office Or Other Outpatient Visit With A High Level Of Medical Decision Making, If Using Time, 60 Minutes Or More   | \$171.32            |
|         | Established Patient Outpatient Visit, Minimal Presenting Problem   | \$20.48             |
|         | Established Patient Office Or Other Outpatient Visit With Straightforward Medical Decision Making, If Using Time, 10 Minutes Or More   | \$38.71             |
|         | Established Patient Office Or Other Outpatient Visit With Low Level Od Decision Making, If Using Time, 20 Minutes Or More  | \$62.22             |
|         | Established Patient Office Or Other Outpatient Visit With Moderate Level Of Decision Making, If Using Time, 30 Minutes Or More   | \$88.05             |
| 1 22414 | Established Fallon Onlog Of Other Outpation, visit vitil Moderate Level Of Decision Making, Il Osling Time, 30 Milliates Of More   | CU.00¢              |

| Section   Proceedings   Section   |                |   |                      |
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| 96222 Maid Hospital Inpatient Cam. Typically 30 Minutes Per Day 9722 Maid Hospital Inpatient Cam. Typically 30 Minutes Per Day 9725 Maid Hospital Inpatient Cam. Typically 30 Minutes Per Day 9726 Maid Hospital Inpatient Cam. Typically 30 Minutes Per Day 9727 Maid Hospital Inpatient Cam. Typically 30 Minutes Per Day 9728 Margareth Trospital Inpatient Cam. Typically 35 Minutes Per Day 9728 Margareth Trospital Inpatient Cam. Typically 35 Minutes Per Day 9728 Margareth Cam. Typically 35 Minutes Per Day 9728 Margareth Trospital Inpatient Cam. Typically 35 Minutes Per Day 9728 Margareth Cam. Propiet Inpatient Cam. Typically 35 Minutes Per Day 9728 Margareth Cam. Propiet Inpatient Cam. Typically 35 Minutes Per Day 9728 Margareth Cam. Propiet Inpatient Cam. Typically 35 Minutes Per Day 9728 Margareth Cam. Propiet Inpatient Cam. Margareth Minutes Per Day 9728 Margareth Cam. Propiet Margareth Month Tan. 30 Minutes 9728 Margareth Cam. Propiet Margareth Month Margareth Month Margareth Margareth Month Margareth Margareth Month Margareth Margare  |                | Description  Established Deticat Office Or Other Outsetient Visit With High Level Of Medical Decision Making If Heing Time 40 Minutes Or Mare | Fee                  |
| 19222 Install Hoppital Ingeland Care, Typically 20 Minutes Per Day 19223 Install Hoppital Ingeland Care, Typically 75 Minutes Per Day 19224 Subsequent Hoppital Ingeland Care, Typically 15 Minutes Per Day 19224 Subsequent Hoppital Ingeland Care, Typically 15 Minutes Per Day 19224 Subsequent Hoppital Ingeland Care, Typically 15 Minutes Per Day 19224 Subsequent Hoppital Ingeland Care, Typically 15 Minutes Per Day 19224 Subsequent Hoppital Ingeland Care Low Severity, 40 Minutes Per Day 19224 Subsequent Hoppital Ingeland Care Low Severity, 40 Minutes Per Day 19225 Subsequent Hoppital Construction, 19224   |                |   | \$87.41              |
| Sezza   Subsequent Hospial Implacent Care. Typically 10 Minutes Par Day  Sezza   Subsequent Hospial Implacent Care. Typically 25 Minutes Par Day  Sezza   Subsequent Hospial Implacent Care. Typically 25 Minutes Par Day  Sezza   Subsequent Hospial Implacent Care. Typically 25 Minutes Par Day  Sezza   Subsequent Hospial Implacent Care. Typically 25 Minutes Par Day  Sezza   Subsequent Hospial Implacent Care. Sezza   |                |   | \$121.57             |
| Babes Judesquart Hospital Impatient Care. Typosal y St Minutes Per Day  \$622 Studesquart Hospital Impatent Care. Typosal y St Minutes Per Day  \$623 Studesquart Hospital Impatent Care. Typosal y St Minutes Per Day  \$626 Studesquart Hospital Impatent Care. Typosal y St Minutes Per Day  \$626 Studesquart Hospital Impatent Care. Hospital Propriet Care. Low Colleging, 2016 Student Care. Day  \$626 Studesquart Hospital Impatent Care. Hospital Propriet Care. Low Colleging, 2016 Student Care. Student Care. Hospital Care. Low Colleging, 2016 Student Care. Low Care. Low Colleging, 2016 Student Care. Low Colleging, 2016  |                |   | \$157.06             |
| Sabbesquent Hospatia Ingalatien Care. Typically 35 Minutes Per Day \$13223 Hospatia Cheanvation Chi Ingalatien Care Low Soverey Minutes Per Day \$13223 Hospatia Cheanvation Chi Ingalatien Care Low Soverey Minutes Per Day \$13223 Hospatia Cheanvation Chi Ingalatien Care Mosterian Servisity, 50 Minutes Per Day \$13223 Hospatia Cheanvation Chi Ingalatien Care Hug Seelenis, 50 Minutes Per Day \$13223 Hospatia Cheanvation Chi Ingalatien Care Hug Seelenis, 50 Minutes Per Day \$13223 Hospatia Cheanvation Chi Ingalatien Care Hug Seelenis, 50 Minutes Per Day \$13223 Hospatia Cheanvation Chi Ingalatien Chief Cheanvation Chief Chief Cheanvation Chief Cheanvation Chief C   |                |   | \$39.04              |
| Sezzal Repatrol Chesenation Or Inpatient Case Low Severity, 40 Minuses Per Day  \$157 99239 Hospital Observation Or Inpatient Case Moderate Service, 50 Minuses Per Day  \$157 99239 Hospital Observation Or Inpatient Case Moderate Service, 50 Minuses Per Day  \$157 99239 Hospital Observation Or Inpatient Case Hugh Severity, 55 Minuses  \$159 99240 Patient Office Consultation, Typically 50 Minuses  \$159 99242 Patient Office Consultation, Typically 40 Minuses  \$159 99242 Patient Office Consultation, Typically 40 Minuses  \$159 99244 Patient Office Consultation, Typically 40 Minuses  \$159 99244 Patient Office Consultation, Typically 40 Minuses  \$159 99245 Patient Office Consultation, Typically 40 Minuses  \$159 99245 Patient Office Consultation, Typically 40 Minuses  \$159 99246 Patient Office Consultation, Typically 40 Minuses  \$159 99247 Patient Office Consultation, Typically 40 Minuses  \$159 99256 Impatient Hospital Consultation, Typically 40 Minuses  \$159 99257 Patient Patient Office Consultation, Typically 40 Minuses  \$159 99256 Impatient Hospital Consultation, Typically 40 Minuses  \$150 99257 Patient Patient Office Consultation, Typically 40 Minuses  \$150 99258 Impatient Hospital Consultation, Typically 40 Minuses  \$150 99258 Impatient Huspital Consultation, Typically 40 Minuses  \$150 99259 Impatient Husp  | 99232          | Subsequent Hospital Inpatient Care, Typically 25 Minutes Per Day  | \$62.75              |
| Soziale Conservation Or Impatient Care Moderate Seventy, 50 Marutes Per Day  3215 92281 Pospital Discharge Day Management, 30 Minutes Or Leas 92281 Pospital Discharge Day Management, 30 Minutes Or Leas 92282 Pospital Discharge Day Management, 50 Minutes Or Leas 92282 Pospital Discharge Day Management, 50 Minutes Or Leas 92292 Pospital Discharge Day Management, 50 Minutes Or Leas 92292 Pospital Discharge Day Management, 50 Minutes Or Leas 92292 Pospital Discharge Day Management, 50 Minutes 92292 Pospital Order Consultation, Typically 60 Minutes 92292 Pospital Pospital Consultation, Typically 60 Minutes 92202 Pospital Pospital Consultation, Typically 60 Minutes 92203 Pospital Pospital Consultation, Typically 60 Minutes 92204 Pospital Pospital Consultation, Typically 60 Minutes 92205 Pospital Pospital Consultation, Typically 60 Minutes 92205 Pospital Pospital Consultation, Typically 60 Minutes 92206 Pospital Pospital Consultation, Typically 60 Minutes 92206 Pospital Pospital Consultation, Typically 60 Minutes 92207 Pospital Pospital Consultation, Typically 60 Minutes 92208 Pospital Pospital Consultation, Typically 60 Minutes 92209 Pospital Pos  | 99233          | Subsequent Hospital Inpatient Care, Typically 35 Minutes Per Day  | \$83.97              |
| 18228   Rospital Observation O' Ingestient Care High Swerty, 55 Minutes Per Day 18228   Rospital Discharge Day Management, 30 Minutes 18229   Pestient Office Consultation, Typically 40 Minutes 18220   Pestient Office   | 99234          | Hospital Observation Or Inpatient Care Low Severity, 40 Minutes Per Day   | \$138.96             |
| Sycologia Pospital Decharge Day Management, 30 Minutes O'L Less 90249 Pospital Decharge Day Management, More Than Shuruses 90240 Partent Office Consultation, Typically 30 Minutes 90240 Partent Office Consultation, Typically 30 Minutes 90241 Partent Office Consultation, Typically 40 Minutes 90241 Partent Office Consultation, Typically 60 Minutes 90242 Partent Office Consultation, Typically 60 Minutes 90243 Partent Office Consultation, Typically 60 Minutes 90244 Partent Office Consultation, Typically 60 Minutes 90245 Partent Office Consultation, Typically 60 Minutes 90255 Partent Office Consultation, Typically 60 Minutes 90256 Partent Office Consultation, Typically 60 Minutes 90256 Partent Office Consultation, Typically 60 Minutes 90257 Partent Office Consultation, Typically 60 Minutes 90258 Partent Office Consultation, Typically 60 Minutes 90258 Partent Office Part  | 99235          | Hospital Observation Or Inpatient Care Moderate Severity, 50 Minutes Per Day  | \$167.99             |
| Segon Declaracy Department Visi, Florical Political Triangle Triangle Computation Typically An International Computation And International Computational Computat  |                |   | \$215.02             |
| Jacob Commission Typically of Minutes 9242   Fatent Office Consulation Typically of Minutes 9244   Patent Office Consulation Typically of Minutes 9245   Patent Office Consulation Typically of Minutes 9257   Patent Office Consulation Typically of Minutes 9257   Patent Office Consulation Typically of Minutes 9258   Patent Office Consulation Typically of Minutes 9258   Patent Office Consulation Typically of Minutes 9259   Patent Office Consulation Typically 10 Minutes 9259   Patent Office Consulation Typically 11 Minutes 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typically 11 Minutes Per Doy 9250   Patent Office Consulation Typic  |                |   | \$70.48              |
| Service Description Consultation Typically 40 Minutes  \$199242 Pleatert Office Consultation Typically 50 Minutes  \$199242 Pleatert Office Consultation Typically 50 Minutes  \$2925 Pleatert Office Consultation Typically 50 Minutes  \$2925 Pleatert Office Consultation Typically 40 Minutes  \$2926 Pleatert Office Consultation Typically 40 Minutes  \$2926 Pleatert Office Consultation Typically 40 Minutes  \$2927 Pleatert Office Consultation Typically 40 Minutes  \$2928 Pleatert Office Consultation Typically 40 Minutes  \$2929 Pleatert Office Consultation Typically 40 Minutes  \$2929 Pleater Office Consultation Typically 40 Minutes  \$2920 Pleater Office Consultation Typically 40 Minutes  \$2920 Pleater Office Consultation Typically 40 Pleater Office Pleater Office Consultation Pleater Office Consultation Pleater Office Pleater Office Consultation Pleater Office Pleater Of   |                |   | \$96.22              |
| Patent Office Consultation, Typically 90 Minutes   \$259   Spatial Foliation Chine Consultation, Typically 90 Minutes   \$259   Spatial Foliation Chine Consultation, Typically 40 Minutes   \$359   Spatial Foliation Chine Consultation, Typically 40 Minutes   \$159   \$2525   Inpatient Hospital Consultation, Typically 80 Minutes   \$159   \$2525   Inmagency Department Visit, Self Limited Of Minor Problem   \$129   \$2525   Inmagency Department Visit, Self Limited Of Minor Problem   \$129   \$2525   Inmagency Department Visit, Self Limited Of Minor Problem   \$129   \$2525   Inmagency Department Visit, Self Limited Of Minor Problem   \$129   \$2525   Inmagency Department Visit, Self Limited Of Minor Problem   \$129   \$2525   Inmagency Department Visit, Self Limited Of Minor Problem   \$150   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$150   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$150   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$150   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$150   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$150   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$150   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$2525   Inmagency Department Visit, Problem VISI Simple Of Minutes   \$2525   Inmagency Department Visit, Prob   |                |   | \$90.11              |
| 92252 [Insperior Hospital Consultation, Typically 80 Minutes 959 22252 [Insperior Hospital Consultation, Typically 95 Minutes 959 22252 [Insperior Hospital Consultation, Typically 95 Minutes 959 2225 [Insperior Hospital Consultation, Typically 95 Minutes 959 2225 [Insperior Hospital Consultation, Typically 95 Minutes 959 2225 [Insperior Hospital Consultation, Typically 91 Minutes 959 2225 [Insperior Hospital Consultation, Typically 91 Minutes 959 2225 [Insperior Department Visit, Lov To Moderately Severe Problem 952 2226 [Insperior Department Visit, Lov To Moderately Severe Problem 952 2226 [Insperior Department Visit, Lov To Moderately Severe Problem 952 2226 [Insperior Department Visit, Moderately Severe Problem 952 2227 [Insperior Department Visit, Moderately Severe Problem 952 2228 [Insperior Department Visit, Moderately Severe Problem 952 2229 [Insperior Or Other Qualified Health Care Professional Direction Of Emergency Medical Systems (Ems) Emergency Care, Advanced Life 92 2229 [Insperior Or Other Qualified Health Care Professional Direction Of Emergency Medical Systems (Ems) Emergency Care, Advanced Life 92 2229 [Insperior Or Other Qualified Health Care Professional Direction Of Emergency Medical Systems (Ems) Emergency Care, Advanced Life 92 2230 [Institution of Other Qualified Health Care Professional Direction Of Emergency Medical Systems (Ems) Emergency Care, Advanced Life 92 2231 [Institution of Other Qualified Health Care Professional Direction Of Emergency Medical Systems (Ems) Emergency Care, Advanced Life 92 2232 [Institution of Other Qualified Health Care Professional Direction Of Emergency Medical Professional Direction Of Emergency Medical Professional Direction Of Emergency Med  |                |   | \$119.09             |
| gester in Hospital Consultation, Typically 50 Minutes  \$150  92521 Inpatient Hospital Consultation, Typically 50 Minutes  \$150  92525 Inpatient Hospital Consultation, Typically 50 Minutes  \$250  9255 Inpatient Hospital Consultation, Typically 10 Minutes  \$260  9255 Inpatient Hospital Consultation, Typically 10 Minutes  \$270  9255 Inpatient Hospital Consultation, Typically 10 Minutes  \$280  9252 Interruption Department Visit, Evil Limited Of Minor Problem  \$280  9252 Interruption Department Visit, Livo To Moderally Severe Problem  \$280  9252 Interruption Department Visit, Livo To Moderally Severe Problem  \$280  9252 Interruption Department Visit, Livo To Moderally Severe Problem  \$280  9252 Interruption Department Visit, Livo To Moderally Severe Problem  \$280  9252 Interruption Department Visit, Livo To Moderally Severe Problem  \$280  9252 Interruption Department Visit, Livo To Moderally Severe Problem  \$280  9252 Interruption Department Visit, Livo To Moderally Severe Problem  9253 Interruption Department Visit, Livo To Moderally Severe Problem  9264 Interruption Department Visit, Livo To Moderally Severe Problem  9265 Interruption Department Visit, Evolution Of Interruption Visit Interruption Of Interruption O   |                |   | \$169.29             |
| 98256   Imperior Hospital Consultation, Typically 95 Minutes   \$124   98256   Imperior Hospital Consultation, Typically 91 Minutes   \$290   98256   Imperior Hospital Consultation, Typically 91 Minutes   \$290   98256   Imperior Hospital Consultation, Typically 91 Minutes   \$292   98256   Imperior Department Visit, Low To Moderately Severe Problem   \$380   98256   Imperior Department Visit, Low To Moderately Severe Problem   \$72   98256   Imperior Department Visit, Moderately Severe Problem   \$73   98256   Imperior Department Visit, Moderately Severe Problem   \$73   98256   Imperior Department Visit, Moderately Severe Problem   \$74   98257   Official Gare Delivery Critically 10 of Injurited Patient Trial \$74 of Minutes Per Department Visit, Moderately Severe Problem   \$74   98257   Official Gare Delivery Critically 10 of Injurited Patient First 30-74 Minutes Per Department Visit, Projecally 55 Minutes Per Department Visit, Projecally 50 Minutes Per Department  |                |   | \$219.15             |
| September   Hospital Consultation, Typically 13 Minutes   \$209   |                |   | \$95.25              |
| Section   |                |   | \$124.40             |
| Section   |                |   |                      |
| S282 Emergency Department Visit, Low To Moderately Severe Problem  \$72 Several Emergency Department Visit, Moderately Severe Problem  \$73 Several Emergency Department Visit, Moderately Severe Problem  \$74 Several Emergency Department Visit, Problem With Signaplicant Treats To Life Or Function  Physician Or Other Qualified Health Care Professional Direction Of Emergency Medical Systems (Ems) Emergency Care, Advanced Life  Physician Or Other Qualified Health Care Professional Direction Of Emergency Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Several Care Delivery Oricially III Or Injuried Patient, First 30-74 Minutes  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Emergency Care, Advanced Life  \$75 Several Medical Systems (Ems) Ems (Ems) Emergency Care, Advanced Life  \$75 Several Medical System  |                |   |                      |
| S223 Emergency Department Visit, Problem Of Pips Severity  \$1199285 Emergency Department Visit, Problem Of Pips Severity  \$1528 Emergency Department Visit, Problem Of Visit Synchrolis Syn  |                |   | •                    |
| S116  |                | ů i i   | \$38.62              |
| 98285 Emergency Department Visit, Problem With Significant Threat To Life Or Function Physician Crit Or Cher Qualified Health Care Professional Direction OF Emergency Medical Systems (Ems) Emergency Care, Advanced Life 92288 Support 92921 Critical Care Delivery Critically III Or Injured Patient, First 30-74 Minutes 929221 Critical Care Delivery Critically III Or Injured Patient, First 30-74 Minutes 92923 China Care Delivery Critically III Or Injured Patient, First 30-74 Minutes 92924 China Care Delivery Critically III Or Injured Patient, First 30-74 Minutes 939304 Initial Nursing Facility Visit, Typically 25 Minutes Per Day 939305 Initial Nursing Facility Visit, Typically 25 Minutes Per Day 939306 Initial Nursing Facility Visit, Typically 25 Minutes Per Day 939306 Initial Nursing Facility Visit, Typically 25 Minutes Per Day 939308 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day 939308 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day 93931 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day 93931 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day 93931 Subsequent Nursing Facility Visit, Typically 26 Minutes Or Less 93931 Subsequent Nursing Facility Visit, Typically 26 Minutes Or Less 93931 Subsequent Nursing Facility Visit, Typically 26 Minutes Or Less 93931 Subsequent Nursing Facility Visit, Typically 26 Minutes 93932 Nursing Facility Deckarage Day Minutes Or Less 93934 Nursing Facility Deckarage Day Minutes 93934 Subsequent Nursing Facility Deckarage Day Minutes 93934 Subsequent Marie Paties Home Visit, Typically 36 Minutes 93934 Subsequent Marie Ma  |                | ů , ,   | \$72.40<br>\$116.48  |
| Physician Or Other Qualified Health Care Professional Direction Of Emergency Medical Systems (Ems) Emergency Care, Advanced Life  928288 Support  928281 Cifficial Care Delivery Critically III O'l Injured Patient, First 30-74 Minutes  929224 Internation Coff The Physician, Each Additional 30 Minutes (List Separately in Addition To Code For Primary Service)  \$109305 Initial Nursing Facility Visit, Typically 25 Minutes Per Day  93905 Initial Nursing Facility Visit, Typically 25 Minutes Per Day  93905 Initial Nursing Facility Visit, Typically 25 Minutes Per Day  93907 Subsequent Nursing Facility Visit, Typically 19 Minutes Per Day  93907 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day  93908 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day  93909 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day  93915 Nursing Facility Discharge by Management, 30 Minutes Or Less  93915 Nursing Facility Discharge Del Management, 30 Minutes Or Less  93915 Nursing Facility Discharge Del Management, 40 Minutes  93934 New Patient Home Visit, Typically 26 Minutes  93934 New Patient Home Visit, Typically 30 Minutes  93934 New Patient Home Visit, Typically 30 Minutes  93934 New Patient Home Visit, Typically 30 Minutes  93936 Subsequent Home Visit, Typically 30 Minutes  93936 Subsequent Home Visit, Typically 40 Minutes  93936 Minutes Per Day  93937 Subsequent Home Visit, Typically 40 Minutes  93938 Proincepted Patient Home Visit, Typically 40 Minutes  93938 Proincepted Patient Home Visit, Typically 40 Minutes  93939 Subsequent Home Visit, Typically 40 Minutes  93930 Subsequent Home Visit, Typical   |                |   | \$116.48<br>\$174.97 |
| 9.9282   Critical Care Delivery Critically III O'l Injured Patient, First 30-74 Minutes   | 33 <b>2</b> 05 |   | φ1/4.9/              |
| S243     S222   Attendence Of The Physicanin Each Additional 30 Minutes (List Separately in Addition To Code For Primary Service)   \$98     S243   S222   Attendence Of The Physicanin Each Additional 30 Minutes (List Separately in Addition To Code For Primary Service)   \$98     S283   S183   S184   S184   S184   S284   S2  | 99288          |   | \$0.01               |
| 198222 Attendance Of The Physician; Each Additional 30 Minutes (List Separately in Addition To Code For Primary Service)   \$109   39304 Initial Nursing Facility Vist, Typically 35 Minutes Per Day   \$98   39305 Initial Nursing Facility Vist, Typically 35 Minutes Per Day   \$98   39306 Initial Nursing Facility Care Visit Typically 35 Minutes Per Day   \$98   39306 Initial Nursing Facility Vist, Typically 35 Minutes Per Day   \$98   39306 Initial Nursing Facility Vist, Typically 10 Minutes Per Day   \$38   39306 Initial Nursing Facility Vist, Typically 10 Minutes Per Day   \$39   39306 Initial Nursing Facility Vist, Typically 25 Minutes Per Day   \$38   39306 Initial Nursing Facility Vist, Typically 25 Minutes Per Day   \$39   39307 Subsequent Nursing Facility Vist, Typically 25 Minutes Per Day   \$39   39310 Subsequent Nursing Facility Vist, Typically 25 Minutes Per Day   \$39   39310 Subsequent Nursing Facility Vist, Typically 25 Minutes Per Day   \$39   39311 Nursing Facility Discharge Management, More Than 30 Minutes   \$39   39311 Nursing Facility Discharge Management, More Than 30 Minutes   \$39   39341 New Patient Home Vist, Typically 30 Minutes   \$39   39344 New Patient Home Vist, Typically 30 Minutes   \$39   39344 New Patient Home Vist, Typically 30 Minutes   \$30   39345 Nursing Facility Discharge Management, More Than 30 Minutes   \$30   39346 New Patient Home Vist, Typically 30 Minutes   \$30   39347 Established Patient Home Vist, Typically 30 Minutes   \$30   39348 New Patient Home Vist, Typically 30 Minutes   \$30   39348 New Patient Home Vist, Typically 40 Minutes   \$30   39348 New Patient Home Vist, Typically 40 Minutes   \$30   39349 Established Patient Home Vist, Typically 50 Minutes   \$30   39340 Established Patient Home Vist, Typically 50 Minutes   \$30   39340 Established Patient Home Vist, Typically 40 Minutes   \$30   39340 Established Patient Home Vist, Typically 40 Minutes   \$30   39340 Established Patient Home Vist, Typically 40 Minutes   \$30   39340 Established Patient Home Vist, Typically 40 Minutes   \$3   |                |   | \$243.14             |
| 93936 Initial Nursing Facility Visit, Typically 25 Minutes Per Day 93056 Initial Nursing Facility Care With High Lavel Of Medical Decision Making, Per Day, If Using Time, 50 Minutes Or More 93107 Subsequent Nursing Facility Visit, Typically 35 Minutes Per Day 93107 Subsequent Nursing Facility Visit, Typically 10 Minutes Per Day 93107 Subsequent Nursing Facility Visit, Typically 26 Minutes Per Day 93108 Subsequent Nursing Facility Visit, Typically 26 Minutes Per Day 93108 Subsequent Nursing Facility Visit, Typically 26 Minutes Per Day 93108 Subsequent Nursing Facility Visit, Typically 26 Minutes Per Day 93108 Subsequent Nursing Facility Visit, Typically 26 Minutes Per Day 93115 Nursing Facility Discharge Day Management, 30 Minutes Or Less 9312 Nursing Facility Discharge Day Management, More Than 30 Minutes 9314 New Patient Home Visit, Typically 20 Minutes 9315 Nursing Facility Discharge Management, More Than 30 Minutes 9316 Nursing Facility Discharge Management, More Than 30 Minutes 9317 Nursing Facility Discharge Management, More Than 30 Minutes 9318 New Patient Home Visit, Typically 20 Minutes 9318 New Patient Home Visit, Typically 25 Minutes 9319 Nursing Facility Discharge Management Minutes 9319 Nursing Facility Discharge Management Minutes 9310 Nursing Facility Discharge Management Minutes 9310 Nursing Facility Discharge Management Minutes 9311 Nursing Facility Discharge Management Minutes 9312 Nursing Facility Discharge Management State Minutes 9313 Nursing Facility Discharge Management Or Nursing Minutes 9314 New Patient Home Visit, Typically 25 Minutes 9315 Nursing Facility Discharge Management Or Nursing Minutes 9316 Nursing Facility Discharge Management Or Nursing Minutes (List Separately In 1903) 9316 Patient Home Visit, Typically 40 Minutes 9318 Nursing Facility Patient Facility Patient Facility And Nursing Minutes 9318 Nursing Patient Home Visit, Typically 40 Minutes 9318 Nursing Patient Home Visit, Typically 40 Minutes 9319 Nursing Patient Nursing Patient And/Or Fariny, And Nursing Patient And Nurs  |                |   | \$109.02             |
| 93056 Initial Nursing Facility Visit. Typically 35 Minutes Per Day 93066 Initial Nursing Facility Cent With High Level Of Medical Decision Making, Per Day, If Using Time, 50 Minutes Or More \$117 93307 Subsequent Nursing Facility Visit. Typically 10 Minutes Per Day 9308 Subsequent Nursing Facility Cent With Straightforward Level Of Medical Decision Making, Per Day, If Using Time, 20 Minutes Or More \$61 9309 Subsequent Nursing Facility Visit. Typically 25 Minutes Per Day 9310 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day 9313 Nursing Facility Discharge Day Management, 30 Minutes Or Less 9315 Nursing Facility Discharge Management, More Then 30 Minutes 93215 Nursing Facility Discharge Management, More Then 30 Minutes 93216 Nursing Facility Discharge Management, More Then 30 Minutes 93217 Nursing Facility Discharge Management, More Then 30 Minutes 93218 Nursing Facility Discharge Management, More Then 30 Minutes 93219 New Pattern Home Visit, Typically 30 Minutes 9322 New Pattern Home Visit, Typically 30 Minutes 93234 New Pattern Home Visit, Typically 37 Minutes 93234 New Pattern Home Visit, Typically 37 Minutes 93236 New Pattern Home Visit, Typically 37 Minutes 93236 Established Pattern Home Visit, Typically 40 Minutes 93237 Established Pattern Home Visit, Typically 40 Minutes 93238 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Erist Hour 93236 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Each Additional 30 Minutes (List Separately in 93259 Addition To Code for Prolonged Service, Each 30 Minutes 9326 Direct Patient More Visit, Typically 40 Minutes 9326 Direct Patient More Visit, Typically 40 Minutes 9326 Direct Patient More Visit, Typically 40 Minutes 9327 Nursing Pattern More Visit, Typically 40 Minutes 9328 Direct Patient More Visit, Typically 40 Minutes 9328 Direct Patient Pattern Visit Pattern Management Or After Direct Patient Care; Each Additional 30 Minutes (List Separately in 93259 Addition To Code for Prolonge  |                |   | \$69.76              |
| 93037 Usbezquent Nursing Facility Visit. Typically 10 Minutes Per Day 93037 Usbezquent Nursing Facility Visit. Typically 25 Minutes Per Day 93037 Subsequent Nursing Facility Visit. Typically 25 Minutes Per Day 9305 Subsequent Nursing Facility Visit. Typically 25 Minutes Per Day 9305 Subsequent Nursing Facility Visit. Typically 25 Minutes Per Day 9310 Subsequent Nursing Facility Visit. Typically 35 Minutes Per Day 93110 Subsequent Nursing Facility Visit. Typically 35 Minutes Per Day 93116 Nursing Facility Discharge Day Minutes Per Day 93116 Nursing Facility Discharge Day Minutes 93116 Nursing Facility Discharge Management. 30 Minutes Or Less 93116 Nursing Facility Discharge Management. 30 Minutes Or Less 93216 Nursing Facility Discharge Management. 30 Minutes 93216 Nursing Facility Discharge Management. 30 Minutes 93217 Nursing Facility Discharge Management. 30 Minutes 93218 Nursing Facility Discharge Management. 30 Minutes 93219 Nursing Facility Discharge Management. 30 Minutes 9322 Nursing Facility Discharge Management. 30 Minutes 93234 New Patient Home Visit. Typically 50 Minutes 93234 New Patient Home Visit. Typically 25 Minutes 93234 New Patient Home Visit. Typically 25 Minutes 93234 New Patient Home Visit. Typically 25 Minutes 93236 Established Patient Home Visit. Typically 40 Minutes 93236 Established Patient Home Visit. Typically 40 Minutes 93236 Established Patient Home Visit. Typically 50 Minutes 93236 Established Patient Home Visit. Typically 50 Minutes 93256 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Erist Hour 93256 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Each Additional 30 Minutes (List Separately in Minutes) 93256 Minutes All Patient Home Visit. Typically 40 Minutes 93266 Minutes All Patient Patient Home Visit. Typically 50 Minutes 93266 Minutes All Patient Service, Each 30 Minutes Or More Per Month 1018 Nursing Facility Distance Evaluation And Management Or An Individual Including An Age And Gender Appropriat  |                |   | \$95.15              |
| 93030 Subsequent Nursing Facility Circle Will Straightforward Level Of Medical Decision Making, Per Day, If Using Time, 20 Minutes Or More 9816 93030 Subsequent Nursing Facility Circle Will Straightforward Level Of Medical Decision Making, Per Day, If Using Time, 20 Minutes Or More 9818 93030 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day 9836 93031 Subsequent Nursing Facility Usist, Typically 25 Minutes Per Day 9836 93031 Nursing Facility Discharge Day Management, 30 Minutes Or Less 970 930316 Nursing Facility Discharge Management, More Than 30 Minutes 989 93031 Nursing Facility Discharge Management, More Than 30 Minutes 989 930341 New Patient Home Visit, Typically 30 Minutes 989 930342 New Patient Home Visit, Typically 30 Minutes 980 930344 New Patient Home Visit, Typically 30 Minutes 980 93044 New Patient Home Visit, Typically 15 Minutes 980 93044 New Patient Home Visit, Typically 15 Minutes 980 93045 New Patient Home Visit, Typically 15 Minutes 980 93046 Established Patient Home Visit, Typically 25 Minutes 980 93046 Established Patient Home Visit, Typically 26 Minutes 980 93046 Established Patient Home Visit, Typically 26 Minutes 980 93046 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; First Hour 980 93050 Established Patient Home Visit, Typically 40 Minutes 980 93050 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In 980 93050 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In 980 93050 Prolonged Physicians Takandty Service, Each 30 Minutes 07 More Per Month 980  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 980 93050 Prolonged Physicians Takandty Service, Submituse Or More Per Month 1980  Initial Comprehensive Preventive Medicine Evaluation, Age 15 Through 17 Years 980 93050 Prolonged Physicians Takandu  |                |   | \$117.80             |
| 99309 Subsequent Nursing Facility Care With Straightforward Level Of Medical Decision Making, Per Day, If Using Time, 20 Minutes Or More 9309 Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day 9309 Subsequent Nursing Facility Visit, Typically 35 Minutes Per Day 93015 Nursing Facility Distcharge Day Management, 30 Minutes Or Less 93016 Nursing Facility Distcharge Day Management, 30 Minutes Or Less 93016 Nursing Facility Distcharge Management, More Than 30 Minutes 9309311 Nursing Facility Distcharge Management, More Than 30 Minutes 9309312 New Patient Home Visit, Typically 20 Minutes 9509312 New Patient Home Visit, Typically 60 Minutes 9509312 New Patient Home Visit, Typically 60 Minutes 9509312 New Patient Home Visit, Typically 75 Minutes 9509315 New Patient Home Visit, Typically 75 Minutes 9509315 New Patient Home Visit, Typically 75 Minutes 9509316 Stabilished Patient Home Visit, Typically 75 Minutes 9509316 Stabilished Patient Home Visit, Typically 76 Minutes 9509316 Stabilished Patient Home Visit, Typically 76 Minutes 9509309316 Minutes 9509309310 Ninutes 9509309310 Ninutes 950930930930930930930930930930930930930930  |                |   | \$39.30              |
| 93310 Subsequent Nursing Facility Visit, Typically 35 Minutes Per Day 9316 Subsequent Nursing Facility Visit, Typically 35 Minutes Or Less 9316 Nursing Facility Discharge Day Management, 30 Minutes 9317 Nursing Facility Discharge Management, More Than 30 Minutes 9324 Nursing Facility Discharge Management, More Than 30 Minutes 9324 Nursing Facility Discharge Management, More Than 30 Minutes 9324 Nursing Facility Discharge Management, More Than 30 Minutes 9324 Nursing Facility Discharge Management, More Than 30 Minutes 9324 Nursing Facility Discharge Management, More Than 30 Minutes 9324 Nursing Management More Visit, Typically 30 Minutes 9324 Nursing Management More Visit, Typically 30 Minutes 9324 Nursing Management More Visit, Typically 51 Minutes 9325 Nursing Management More Visit, Typically 52 Minutes 9326 Established Patient Home Visit, Typically 52 Minutes 9326 Established Patient Home Visit, Typically 50 Minutes 9328 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; First Hour 9329 Addition To Code For Prolonged Service) 9326 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In 93259 Addition To Code For Prolonged Service) 9326 Prolonged Physician Standby Service, Each 30 Minutes 9326 Prolonged Physician Standby Service, Each 30 Minutes 9328 Objective Office Prolonged Physician Standby Service, Each 30 Minutes Or More Per Month 103 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 10328 Initial New Patient Preventive Medicine Evaluation, Age 1 Through 1 Years 11938 Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years 11938 Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years 11939 Initial New Patient Preventive Medicine Evaluation, Age 6 Through 11 Years 11939 Initial New Patient Preventive Medicine Evaluation, Age 6 Through 11 Years 11939 Established Patient Period  |                |   | \$61.20              |
| 99315 Nursing Facility Discharge Day Management, 30 Minutes Or Less 9316 Nursing Facility Discharge Management, More Than 30 Minutes 93317 New Patient Home Visit, Typically 20 Minutes 93341 New Patient Home Visit, Typically 20 Minutes 93342 New Patient Home Visit, Typically 20 Minutes 93343 New Patient Home Visit, Typically 75 Minutes 93444 New Patient Home Visit, Typically 75 Minutes 93454 New Patient Home Visit, Typically 75 Minutes 93454 September Visit, Typically 75 Minutes 9346 September Visit, Typically 75 Minutes 93476 Established Patient Home Visit, Typically 15 Minutes 934876 Established Patient Home Visit, Typically 26 Minutes 93489 Established Patient Home Visit, Typically 26 Minutes 9359 Established Patient Home Visit, Typically 40 Minutes 9359 Prolonged Evaluation And Management Service Before And/Or After Direct Patient Care; First Hour 93596 Prolonged Evaluation And Management Service Before And/Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In Prolonged Evaluation And Management Service Before And/Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In Prolonged Evaluation And Management Service Before And/Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In Prolonged Evaluation And Management Service Before And/Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In Prolonged Evaluation And Management Or And Individual Including An Age And Gender Appropriate History, Indianal Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, Indianal New Patient Preventive Medicine Evaluation Age 1 Through 1 Years 93381 Indianal New Patient Preventive Medicine Evaluation Age 1 Through 1 Years 93382 Indianal New Patient Preventive Medicine Evaluation Age 1 Through 1 Years 93385 Indianal New Patient Preventive Medicine Evaluation Age 1 Through 1 Years 93386 Indianal New Patient Preventive Medicine Evaluation Age 1 Through 1 Years 93387 Indianal Ne  | 99309          | Subsequent Nursing Facility Visit, Typically 25 Minutes Per Day   | \$83.91              |
| Superior   Suraing Facility Discharge Management, More Than 30 Minutes   \$39   | 99310          | Subsequent Nursing Facility Visit, Typically 35 Minutes Per Day   | \$90.38              |
| Separation   Sep  | 99315          | Nursing Facility Discharge Day Management, 30 Minutes Or Less   | \$70.14              |
| Seption   Sept  | 99316          | Nursing Facility Discharge Management, More Than 30 Minutes   | \$89.68              |
| Section   Sect  | 99341          | New Patient Home Visit, Typically 20 Minutes  | \$58.17              |
| 99347 Established Patient Home Visit, Typically 75 Minutes 99348 Established Patient Home Visit, Typically 15 Minutes 99348 Established Patient Home Visit, Typically 40 Minutes 99349 Established Patient Home Visit, Typically 40 Minutes 99349 Established Patient Home Visit, Typically 40 Minutes \$138 99349 Established Patient Home Visit, Typically 40 Minutes \$138 99350 Established Patient Home Visit, Typically 40 Minutes \$138 99350 Established Patient Home Visit, Typically 40 Minutes 99350 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; First Hour Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In 99350 Addition To Code For Prolonged Service) 99360 Prolonged Physician Standby Service, Each 30 Minutes 99360 Prolonged Physician Standby Service, Each 30 Minutes 99360 Medical Team Conference With Patient And/Or Family, And Nonphysician Health Care Professionals, 30 Minutes Or More 99360 Supervision Of Nursing Facility Patient Services, 30 Minutes Or More Per Month 1018 Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 1018 Services And The Ordering Of Laboratory/ Diag 1018 Services And Services Servic   |                |   | \$70.90              |
| Satablished Patient Home Visit, Typically 15 Minutes   \$42   | 99344          | New Patient Home Visit, Typically 60 Minutes  | \$165.35             |
| Bistablished Patient Home Visit, Typically 25 Minutes   \$58  | 99345          | New Patient Home Visit, Typically 75 Minutes  | \$200.05             |
| Stablished Patient Home Visit, Typically 40 Minutes   \$93  |                | · · ·   | \$42.91              |
| Stablished Patient Home Visit, Typically 60 Minutes   \$186   |                |   | \$58.24              |
| 99358 Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; First Hour Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In 99359 Addition To Code For Prolonged Service) \$54 99360 Prolonged Physician Standby Service, Each 30 Minutes 99366 Medical Team Conference With Patient And/Or Family, And Nonphysician Health Care Professionals, 30 Minutes Or More \$99380 Supervision Of Nursing Facility Patient Services, 30 Minutes Or More Per Month Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99381 Initial New Patient Preventive Medicine Evaluation, Age 1 Through 4 Years \$119 99382 Initial New Patient Preventive Medicine Evaluation, Age 17 Through 11 Years \$119 99381 Initial New Patient Preventive Medicine Evaluation, Age 17 Through 11 Years \$119 99385 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99385 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  \$99381 Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older  99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Years  99392 Establis  |                |   | \$93.83              |
| Prolonged Evaluation And Management Service Before And/ Or After Direct Patient Care; Each Additional 30 Minutes (List Separately In 99359 Addition To Code For Prolonged Service)  \$549 Addition To Code For Prolonged Service)  \$599360 Prolonged Physician Standby Service, Each 30 Minutes  \$599360 Medical Team Conference With Patient And/Or Family, And Nonphysician Health Care Professionals, 30 Minutes Or More  \$599360 Supervision Of Nursing Facility Patient Services, 30 Minutes Or More Per Month  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  \$509311 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory Diag  \$5119  \$5119  \$5119  \$5119  \$5119  \$5110 Initial New Patient Preventive Medicine Evaluation, Age 1 Through 17 Years  \$5119  \$5119  \$5110 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  \$5119  \$5110 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  \$5119  \$5110 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  \$5119  \$5110 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  \$5119 |                |   | \$186.60             |
| 99359   Addition To Code For Prolonged Service) 99360   Prolonged Physician Standby Service, Each 30 Minutes 99360   Prolonged Physician Standby Service, Each 30 Minutes 99360   Supervision Of Nursing Facility Patient And/Or Family, And Nonphysician Health Care Professionals, 30 Minutes Or More 99380   Supervision Of Nursing Facility Patient Services, 30 Minutes Or More Per Month   Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99381   Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 99382   Initial New Patient Preventive Medicine Evaluation, Age 17 Through 4 Years 99383   Initial New Patient Preventive Medicine Evaluation, Age 17 Through 17 Years 99384   Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99385   Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 119   Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386   Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 119   Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386   Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 119   Separation And Management Of An Individual Including An Age And Gender Appropriate History, 110   Separation And Management Of An Individual Including An Age And Gender Appropriate History, 111   Separation And Management Of An Individual Including An Age And Gender Appropriate History, 111   Separation And Management Of An Individual Including An Age And Gender Appropriate History, 111   Separation And Management Of  | 99358          | -   | \$112.96             |
| Prolonged Physician Standby Service, Each 30 Minutes  99366 Medical Team Conference With Patient And/Or Family, And Nonphysician Health Care Professionals, 30 Minutes Or More  99380 Supervision Of Nursing Facility Patient Services, 30 Minutes Or More Per Month  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  99381 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  99382 Initial New Patient Preventive Medicine Evaluation, Age 1 Through 4 Years  99381 Initial New Patient Preventive Medicine Evaluation, Age 12 Through 11 Years  99384 Initial New Patient Preventive Medicine Evaluation, Age 12 Through 17 Years  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  89385 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  89386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  89386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  899381 Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older  99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year  99392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 1 Years  99393 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 1 Years  99393 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years  99393 Established Patient Periodic P  |                |   |                      |
| 99366 Medical Team Conference With Patient And/Or Family, And Nonphysician Health Care Professionals, 30 Minutes Or More 99380 Supervision Of Nursing Facility Patient Services, 30 Minutes Or More Per Month 99381 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99382 Initial New Patient Preventive Medicine Evaluation, Age 1 Through 4 Years 99383 Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years 99384 Initial New Patient Preventive Medicine Evaluation, Age 5 Through 17 Years 99385 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 99387 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 99387 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99388 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 99389 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99389 Established Patient Preventive Medicine Evaluation Infant Younger Than 1 Year 99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year 99392 Established Patient Periodic Preventive Medicine Examination Age 1 Through 4 Years 99393 Established Patient Periodic Preventive Medicine Examination Age 1 Through 17 Years 99393 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99394 Preventive Medicine Counseling, Typically 15 Minutes 99395 Preventive Medicine  |                |   | \$54.55              |
| 99380 Supervision Of Nursing Facility Patient Services, 30 Minutes Or More Per Month Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 99381 Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years 99382 Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years 99383 Initial New Patient Preventive Medicine Evaluation, Age 12 Through 17 Years 1199384 Initial New Patient Preventive Medicine Evaluation, Age 12 Through 17 Years 1199385 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 1 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 1 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 99386 Established Patient Periodic Preventive Medicine Evaluation Infant Younger Than 1 Year 99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year 99392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 17 Years 99393 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 99394 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99395 Established Patient Periodic Preventive Medicine Examination Age 65 Years And Older 99397 Preventive Medicine Counseling, Typically 30 Minutes 99400 Preventive Medicine Counseling, Typically 15 Minutes 99400 Preventive Medicine Counseling, Typically 1 Hour  |                |   | \$90.72              |
| Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  9381 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  \$119  9382 Initial New Patient Preventive Medicine Evaluation, Age 1 Through 4 Years  9383 Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years  9384 Initial New Patient Preventive Medicine Evaluation, Age 12 Through 17 Years  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  9385 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  9386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory Diag  9387 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  9386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  9387 Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older  9388 Examination Preventive Medicine Evaluation, Age 65 Years And Older  93981 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years  93982 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 17 Years  9381 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years  9382 Established Patient Periodic Preventive Medicine Examination Age 12 Through 17 Years  9383 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years  9384 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years  9385 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years  9386 Preventive Medicine Counseling, Typically 30 Minutes  94000 Preventive Medicine Counseling, Typically 15 Minutes   |                |   | \$0.01               |
| 9381 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 9382 Initial New Patient Preventive Medicine Evaluation, Age 1 Through 4 Years 9383 Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years 9384 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 9385 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 9386 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 9386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag 9387 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History, 9386 Established Patient Preventive Medicine Evaluation, Age 65 Years And Older 9391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year 9392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years 9393 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 1 Years 9393 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 9393 Established Patient Periodic Preventive Medicine Examination, Age 18-39 Years 9393 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 9393 Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older 93939 Preventive Medicine Counseling, Typically 15 Minutes 93940 Preventive Medicine Counseling, Typically 30 Minutes 93940 Preventive Medicine Counseling, Typically 45 Minutes 93940 Preventive Medicine Counseling, Typically 45 Minutes 93940 Preventive Medicine Counseling, Typically 1 Hour  | 99380          |   | \$0.01               |
| 119382   Initial New Patient Preventive Medicine Evaluation, Age 1 Through 4 Years   \$119     19383   Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years   \$119     19384   Initial New Patient Preventive Medicine Evaluation, Age 12 Through 17 Years   \$119     10  |                |   | _                    |
| 119383   Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years   1199384   Initial New Patient Preventive Medicine Evaluation, Age 12 Through 17 Years   1199384   Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,   119386   Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag   119386   Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,   119386   Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,   119386   Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag   119386   11  |                |   | \$119.83             |
| Initial New Patient Preventive Medicine Evaluation, Age 12 Through 17 Years  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  10 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  11 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  11 Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  12 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  13 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  13 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  14 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  15 Initial New Patient Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  16 Initial New Patient Preventive Medicine Evaluation And Dider  18 Initial New Patient Preventive Medicine Evaluation Age 10 Individual Including An Age And Gender Appropriate History,  18 Individual Including An Age And Gender Appropriate History,  18 Individual Including An Age And Gender Appropriate History,  18 Individual Including An Age And Gender Appropriate History,  19 Individual Including An Age And Gender Appropriate History,  18 Individual Including An Age And Gender Appropriate History,  18 Individual Including An Age And Gender Appropriate History,  18 Individual Including An Age And Gender Appropriate History  18 Individual Including An Age And Gender Appropriate History  18 Individual Including An Age And Gender A  |                |   | \$119.83             |
| Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  9385 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,  9386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag  \$69  9387 Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older  \$69  9389 Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older  \$69  9391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year  9392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years  9393 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years  \$81  93936 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years  \$81  93937 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years  \$81  99398 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years  \$89  99399 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years  \$89  99300 Preventive Medicine Counseling, Typically 15 Minutes  \$80  99402 Preventive Medicine Counseling, Typically 30 Minutes  \$85  99408 Preventive Medicine Counseling, Typically 45 Minutes  \$85  99409 Preventive Medicine Counseling, Typically 45 Minutes  \$85   |                |   | \$119.83             |
| Stamination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag   Initial Comprehensive Preventive Medicine Evaluation And Management Of An Individual Including An Age And Gender Appropriate History,   19386   Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag   S69   19387   Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older   S67  | 99384          |   | \$119.83             |
| 99386 Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag \$69 99387 Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older \$67 99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year \$81 99392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years \$81 99393 Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years \$81 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years \$81 99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years \$81 99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years \$89 99397 Established Patient Periodic Preventive Medicine Examination Age 65 Years And Older \$69 99401 Preventive Medicine Counseling, Typically 15 Minutes \$69 99402 Preventive Medicine Counseling, Typically 30 Minutes \$5 99408 Preventive Medicine Counseling, Typically 45 Minutes \$5 99408 Preventive Medicine Counseling, Typically 45 Minutes \$5 99409 Preventive Medicine Counseling, Typically 1 Hour  | 99385          | Examination, Counseling/Anticipatory Guidance/Risk Factor Reduction Interventions, And The Ordering Of Laboratory/ Diag                       | \$119.83             |
| 99387 Initial New Patient Preventive Medicine Evaluation, Age 65 Years And Older 99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year 99392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years 99393 Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99396 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99397 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99397 Established Patient Periodic Preventive Medicine Examination Age 65 Years And Older 99401 Preventive Medicine Counseling, Typically 15 Minutes 99402 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 1 Hour \$55  |                |   |                      |
| 99391 Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year \$81 99392 Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years \$81 99393 Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years \$81 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years \$81 99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years \$81 99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years \$69 99397 Established Patient Periodic Preventive Medicine Examination Age 65 Years And Older \$69 99401 Preventive Medicine Counseling, Typically 15 Minutes \$69 99402 Preventive Medicine Counseling, Typically 30 Minutes \$59 99403 Preventive Medicine Counseling, Typically 45 Minutes \$59 99406 Preventive Medicine Counseling, Typically 45 Minutes \$59 99406 Preventive Medicine Counseling, Typically 1 Hour \$15   |                |   | \$69.76              |
| 99392Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years\$8199393Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years\$8199394Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years\$8199395Established Patient Periodic Preventive Medicine Examination Age 18-39 Years\$8199396Established Patient Periodic Preventive Medicine Examination Age 40-64 Years\$6999397Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older\$6999401Preventive Medicine Counseling, Typically 15 Minutes\$699402Preventive Medicine Counseling, Typically 30 Minutes\$599408Preventive Medicine Counseling, Typically 45 Minutes\$599400Preventive Medicine Counseling, Typically 45 Minutes\$599400Preventive Medicine Counseling, Typically 1 Hour\$15   |                |   | \$67.06              |
| 99393 Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years 99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years 99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years 99397 Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older 99397 Everentive Medicine Counseling, Typically 15 Minutes 99402 Preventive Medicine Counseling, Typically 30 Minutes 99403 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 45 Minutes 99406 Preventive Medicine Counseling, Typically 1 Hour \$5  |                | ů .   | \$81.59              |
| 99394 Established Patient Periodic Preventive Medicine Examination, Age 12 Through 17 Years  99395 Established Patient Periodic Preventive Medicine Examination Age 18-39 Years  99396 Established Patient Periodic Preventive Medicine Examination Age 40-64 Years  99397 Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older  99397 Preventive Medicine Counseling, Typically 15 Minutes  99401 Preventive Medicine Counseling, Typically 30 Minutes  99403 Preventive Medicine Counseling, Typically 45 Minutes  99406 Preventive Medicine Counseling, Typically 1 Hour  \$55   |                |   | \$81.59              |
| 99395Established Patient Periodic Preventive Medicine Examination Age 18-39 Years\$8199396Established Patient Periodic Preventive Medicine Examination Age 40-64 Years\$6999397Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older\$6999401Preventive Medicine Counseling, Typically 15 Minutes\$699402Preventive Medicine Counseling, Typically 30 Minutes\$599403Preventive Medicine Counseling, Typically 45 Minutes\$599406Preventive Medicine Counseling, Typically 1 Hour\$15  |                |   | \$81.59              |
| 99396Established Patient Periodic Preventive Medicine Examination Age 40-64 Years\$6999397Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older\$6999401Preventive Medicine Counseling, Typically 15 Minutes\$699402Preventive Medicine Counseling, Typically 30 Minutes\$599403Preventive Medicine Counseling, Typically 45 Minutes\$599406Preventive Medicine Counseling, Typically 1 Hour\$15   |                |   | \$81.59              |
| 99397       Established Patient Periodic Preventive Medicine Examination, Age 65 Years And Older       \$69         99401       Preventive Medicine Counseling, Typically 15 Minutes       \$6         99402       Preventive Medicine Counseling, Typically 30 Minutes       \$5         99403       Preventive Medicine Counseling, Typically 45 Minutes       \$5         99406       Preventive Medicine Counseling, Typically 1 Hour       \$15  |                |   | \$81.59              |
| 99401     Preventive Medicine Counseling, Typically 15 Minutes     \$6       99402     Preventive Medicine Counseling, Typically 30 Minutes     \$5       99403     Preventive Medicine Counseling, Typically 45 Minutes     \$5       99406     Preventive Medicine Counseling, Typically 1 Hour     \$15  |                |   | \$69.76              |
| 99402 Preventive Medicine Counseling, Typically 30 Minutes       \$5         99403 Preventive Medicine Counseling, Typically 45 Minutes       \$5         99406 Preventive Medicine Counseling, Typically 1 Hour       \$15   |                |   | \$69.76              |
| 99403     Preventive Medicine Counseling, Typically 45 Minutes     \$5       99406     Preventive Medicine Counseling, Typically 1 Hour     \$15  |                |   | \$6.56               |
| 99406 Preventive Medicine Counseling, Typically 1 Hour \$15   |                |   | \$5.79               |
|   |                |   | \$5.79<br>\$15.91    |
| . 00407 I Smoking And Tohacco I Isa Intensive Counsaling Greater Than 10 Minutes  |                |   | \$15.81<br>\$20.64   |
|   |                | -   | \$30.64              |
|   |                |   | \$18.21<br>\$8.51    |

| Codo  | Description   | Foo                    |
|-------|---|------------------------|
|       | Description Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time   | Fee<br>Price By Report |
|       | Prolonged Inpatient Or Observation Service, Each 15 Minutes Of Total Time Beyond Required Time Of Primary Service   | Price By Report        |
|       | Remote Monitoring Of Physiologic Parameters, Initial Set-Up And Patient Education On Use Of Equipment   | \$17.39                |
| 99454 | Remote Monitoring Of Physiologic Parameters, Initial Supply Of Devices With Daily Recordings Or Programmed Alerts Transmission, Each 30   | \$45.14                |
| 99457 | Remote Physiologic Monitoring Treatment Management Services, Health Care Professional Time In A Calendar Month Requiring Interactive Communication With The Patient/Caregiver; First 20 Minutes   | \$43.92                |
|       | Remote Physiologic Monitoring Treatment Management Services, Health Care Professional Time in A Calendar Month Requiring Interactive  Communication With The Patient/Caregiver; Each Additional 20 Minute   | \$35.69                |
| 99459 | Pelvic exam   | \$20.04                |
| 99460 | Initial Hospital Or Birthing Center Care, Per Day, For Evaluation And Management Of Normal Newborn Infant   | \$98.54                |
| 99461 | Initial Care, Per Day, For Evaluation And Management Of Normal Newborn Infant Seen In Other Than Hospital Or Birthing Center  | \$63.34                |
| 99462 | Subsequent Hospital Care, Per Day, For Evaluation And Management Of Normal Newborn  | \$42.30                |
| 99463 | Initial Hospital Or Birthing Center Care, Per Day, For Evaluation And Management Of Normal Newborn Infant Admitted And Discharged On The Same Date  | \$104.59               |
| 99464 | Attendance At Delivery (When Requested By The Delivering Physician Or Other Qualified Health Care Professional) And Initial Stabilization Of Newborn  | \$81.73                |
|       | Delivery/Birthing Room Resuscitation, Provision Of Positive Pressure Ventilation And/Or Chest Compressions In The Presence Of Acute Inadequate Ventilation And/Or Cardiac Output  | \$166.13               |
|       | Critical Care Of III Or Injured Pediatric Patient, 24 Months Or Younger, First 30-74 Minutes  | \$266.41               |
|       | Critical Care Of III Or Injured Pediatric Patient, 24 Months Or Younger   | \$133.80               |
|       | Initial Inpatient Hospital Critical Care Of Newborn, 28 Days Of Age Or Younger, Per Day   | \$987.09               |
|       | Subsequent Inpatient Hospital Critical Care Of Newborn, 28 Days Of Age Or Younger, Per Day  | \$520.15               |
|       | Initial Inpatient Hospital Critical Care Of Infant Or Young Child, 29 Days Through 24 Months Of Age, Per Day  | \$929.83               |
|       | Subsequent Inpatient Hospital Critical Care Of Infant Or Young Child, 29 Days Through 24 Months Of Age, Per Day   | \$486.32               |
|       | Initial Inpatient Hospital Critical Care Of Infant Or Young Child, 2 Through 5 Years Of Age, Per Day  | \$604.81               |
|       | Subsequent Inpatient Hospital Critical Care Of Infant Or Young Child, 2 Through 5 Years Of Age, Per Day   | \$362.92               |
|       | Initial Intensive Care Of Newborn, 28 Days Of Age Or Younger, Per Day   | \$384.99               |
|       | Subsequent Intensive Care Of Recovering Very Low Birth Weight Infant, Per Day   | \$227.30               |
|       | Subsequent Intensive Care Of Recovering Low Birth Weight Infant, Per Day (1500-2500 Grams)  | \$167.06               |
|       | Subsequent Intensive Care Of Recovering Low Birth Weight Infant, Per Day (2501-5000 Grams)  | \$229.43               |
|       | Supervision Of Interfacility Transport Care Of The Critical Patient, 24 Months Of Age Or Younger, First 30 Minutes  | \$0.01                 |
|       | Supervision Of Interfacility Transport Care Of The Critical Patient, 24 Months Of Age Or Younger  | \$0.01                 |
|       | Advance Care Planning, First 30 Minutes   | \$76.93                |
|       | Advance Care Planning, Each Additional 30 Minutes   | \$66.65                |
|       | Child Advocacy Program Forensic Interview   | \$309.40               |
|       | Home Visit For Assessment And Monitoring Of Pregnancy, Fetal Heart Rate, And Diabetes Status  | \$78.58                |
| 99502 | Home Visit For Newborn Care And Assessment  | \$78.58                |
|       | Other Home Visit Service Or Procedure   | \$27.85                |
|       | Home Infusion Or Specialty Drug Administration, Per Visit, 2 Hours Or Less  | Price By Report        |
| 99602 | Home Infusion Or Specialty Drug Administration, Per Visit, Each Additional Hour   | Price By Report        |
| 05005 | Initial Prenatal Care Visit (Report At First Prenatal Encounter With Health Care Professional Providing Obstetrical Care. Report Also Date Of   | <b>#</b> 40.50         |
| 0500F | Visit And, In A Separate Field, The Date Of The Last Menstrual Period YImp") (Prenatal)   | \$10.50                |
| 3074F | Most Recent Systolic Blood Pressure Less Than 130 Mm Hg (Dm), (Htn, Ckd Cad)  Most Recent Systolic Blood Pressure 130, 130 Mm Hg (Dm),  | \$0.01                 |
|       | Most Recent Systolic Blood Pressure 130 - 139 Mm Hg (Dm)  Most Recent Systolic Blood Pressure Creates Theo Or Favel To 440 Mm Hz (Ute. Circl. Cert) (Pm)  | \$0.01                 |
| 3077F | Most Recent Systolic Blood Pressure Greater Than Or Equal To 140 Mm Hg (Htn, Ckd, Cad) (Dm)   | \$0.01                 |
| 3078F | Most Recent Diastolic Blood Pressure Less Than 80 Mm Hg (Htn, Ckd, Cad) (Dm)  Most Recent Diastolic Blood Pressure 80 90 Mm Hg (Htn, Ckd, Cad) (Dm)   | \$0.01                 |
| 3079F | Most Recent Diastolic Blood Pressure 80-89 Mm Hg (Htn, Ckd, Cad) (Dm)  Most Recent Diastolic Blood Pressure Create Theo Or Favel To 60 Mer Ha (Htn, Ckd, Cad) (Dec)   | \$0.01                 |
| 3080F | Most Recent Diastolic Blood Pressure Greater Than Or Equal To 90 Mm Hg (Htn, Ckd, Cad) (Dm)  Cathoda Pamarel Of Diagra From Kidney Arton, Accessed Through The Skip Or Open Presedure Including Redicing Supervision And                                    | \$0.01                 |
| 0234T | Catheter Removal Of Plaque From Kidney Artery, Accessed Through The Skin Or Open Procedure Including Radiological Supervision And Interpretation  | Price By Report        |
| 0235T | Catheter Removal Of Plaque From Organ Artery, Accessed Through The Skin Or Open Procedure Including Radiological Supervision And Interpretation   | Price By Report        |
| 0236T | Transluminal Peripheral Atherectomy, Open Or Percutaneous, Including Radiological Supervision And Interpretation; Abdominal Aorta   | Price By Report        |
| 0237T | Catheter Removal Of Plaque From Upper Arm Artery, Accessed Through The Skin Or Open Procedure Including Radiological Supervision And Interpretation   | Price By Report        |
| 0237T | Catheter Removal Of Plaque From Groin Artery, Accessed Through The Skin Or Open Procedure Including Radiological Supervision And Interpretation   | Price By Report        |
| 0253T | Insertion Of Eye Fluid Drainage Device, Internal Approach   | Price By Report        |
| 0263T | Guidance, If Performed; Complete Procedure Including Unilateral Or Bilateral Bone Marrow Harvest  | Price By Report        |
|       | Intramuscular Autologous Bone Marrow Cell Therapy, With Preparation Of Harvested Cells, Multiple Injections, One Leg, Including Ultrasound  | ,                      |
| 0264T | Guidance, If Performed; Complete Procedure Excluding Bone Marrow Harvest  Intramuscular Autologous Bone Marrow Cell Therapy, With Preparation Of Harvested Cells, Multiple Injections, One Leg, Including Ultrasound  | Price By Report        |
| 0265T | Guidance, If Performed; Unilateral Or Bilateral Bone Marrow Harvest Only For Intramuscular Autologous Bon Implantation Or Replacement Of Carotid Sinus Baroreflex Activation Device; Total System (Includes Generator Placement, Unilateral Or              | Price By Report        |
| 0266T | Bilateral Lead Placement, Intra-Operative Interrogation, Programming, And Repositioning, When Performed)  | Price By Report        |
| 0267T | Programming, And Repositioning, When Performed)   | Price By Report        |
| 0268T | Implantation Or Replacement Of Carotid Sinus Baroreflex Activation Device; Pulse Generator Only (Includes Intra-Operative Interrogation, Programming, And Repositioning, When Performed)  | Price By Report        |
| 0269T | Revision Or Removal Of Carotid Sinus Baroreflex Activation Device; Total System (Includes Generator Placement, Unilateral Or Bilateral Lead Placement, Intra-Operative Interrogation, Programming, And Repositioning, When Performed)                       | Price By Report        |
| 0270T | Revision Or Removal Of Carotid Sinus Baroreflex Activation Device; Lead Only, Unilateral (Includes Intra-Operative Interrogation, Programming, And Repositioning, When Performed)   | Price By Report        |
| 0271T | Revision Or Removal Of Carotid Sinus Baroreflex Activation Device; Pulse Generator Only (Includes Intra-Operative Interrogation, Programming, And Repositioning, When Performed)  | Price By Report        |
| 0272T | Interrogation Device Evaluation (In Person), Carotid Sinus Baroreflex Activation System, Including Telemetric Iterative Communication With The Implantable Device To Monitor Device Diagnostics And Programmed Therapy Values, With Interpretation And Repo | Price By Report        |
| V6161 | implantable beviet to informer beviet biagnosites had i togrammed therapy values, vital interpretation And Nepo   | i noe by Nepoll        |

| Code   | Description.   | F  |
|--|--|--|
| 0273T  | Description   Interrogation Device Evaluation (In Person) Carotid Sinus Baroreflex Activation System, With Programming   | Fee<br>Price By Report   |
| 02701  | interrogation betwee Evaluation (in 1 closh) calcula birde barbonows cavalion by down, which regulariting  | Thee by Report   |
| 0274T  | Removal Of Bone From Upper Or Middle Spine For Decompression Of Nerve Tissue Using Imaging Guidance, Accessed Through The Skin   | Price By Report  |
| 0275T  | Removal Of Bone From Lower Spine For Decompression Of Nerve Tissue Using Imaging Guidance, Accessed Through The Skin   | Price By Report  |
| 00707  | Transcutaneous Electrical Modulation Pain Reprocessing (Eg, Scrambler Therapy), Each Treatment Session (Includes Placement Of Electrodes)  | Dries D. Dement  |
| 0278T<br>0394T   | High Dose Rate Electronic Brachytherapy, External  | Price By Report Price By Report  |
| 0395T  | High Dose Rate Electronic Brachytherapy, Internal  | Price By Report  |
| 0402T  | Collagen Cross-Linking Treatment Of Disease Of Cornea  | Price By Report  |
| 0479T  | Laser Destruction Of Scar Tissue, First 100 Cm2, Or 1% Of Body Surface Area Of Infants And Children  | \$437.35   |
| 0480T  | Laser Destruction Of Scar Tissue, Each Additional 100 Cm2, Or 1% Of Body Surface Area Of Infants And Children  | \$92.09  |
| 0537T  | Blood Dry T Lymphcyt Cat-T Cell  | Price By Report  |
| 0538T<br>0539T   | Blood Drv T Lymphcyt Prep Trns Receipt&Prep Car-T Cell Admn  | \$0.01<br>\$0.01   |
| 05391<br>0540T   | Car-T Cell Admn Autologous   | Price By Report  |
| 00.01  | Repair Of Valve Between Upper Left And Lower Left Chambers Of Heart (Mitral Valve) With Insertion Of Artificial Supporting Tendons,  | 2)po   |
| 0543T  | Accessed Through Apex Of Heart   | Price By Report  |
|  | Reconstruction Of Junction Between Upper Left And Lower Left Chambers Of Heart (Annulus Of Mitral Valve) With Implantation Of Adjustable   |  |
| 0544T  | Reconstruction Device, Via Catheter, Accessed Through Skin   | Price By Report  |
| 0545T  | Reconstruction Of Junction Between Upper Right And Lower Right Chambers Of Heart (Annulus Of Tricuspid Valve) With Implantation Of Adjustable Reconstruction Device, Via Catheter, Accessed Through Skin   | Price By Report  |
| 0546T  | Radiofrequency Spectroscopy Evaluation Of Surgical Margins During Partial Mastectomy, With Report  | Price By Report  |
| 0547T  | Bone Material Quality Testing By Microindentations Of Shin Bone  | Price By Report  |
|  | Insertion Of Implant Connecting Groin Artery And Groin Vein, With Radiological Supervision And Interpretation And Imaging Guidance, Via  |  |
| 0553T  | Catheter, Accessed Through Skin  | Price By Report  |
| 0564T  | Evaluation Of Toxicity Of Chemotherapy Drugs On Cancer Stem Cells  | Price By Report  |
| 0565T  | Harvesting Of Fatty Tissue And Creation Of Cellular Implant For Treatment Of Osteoarthritis  Injection Of Fatty Tissue Cellular Implant For Treatment Of Osteoarthritis In Knee, Using Ultrasound Guidance   | Price By Report  |
| 0566T<br>0568T   | Introduction Of Saline And Air Into Fallopian Tubes To Test For Blockage   | Price By Report<br>Price By Report   |
| 03001  | Repair Of Valve Between Upper Right And Lower Right Chambers Of Heart (Tricuspid Valve) Using Prosthesis Delivered Via Catheter,   | Trice by Report  |
| 0569T  | Accessed Through Skin; Initial Prosthesis  | Price By Report  |
|  | Repair Of Valve Between Upper Right And Lower Right Chambers Of Heart (Tricuspid Valve) Using Prosthesis Delivered Via Catheter,   | , ,  |
| 0570T  | Accessed Through Skin; Each Additional Prosthesis  | Price By Report  |
| 0571T  | Insertion Or Replacement Of Implantable Cardioverter-Defibrillator System With Electrodes Under Breastbone   | Price By Report  |
| 0572T  | Insertion Of Implantable Defibrillator Electrode Under Breastbone  | Price By Report  |
| 0573T<br>0574T   | Removal Of Implantable Defibrillator Electrode From Under Breastbone  Repositioning Of Previously Implanted Defibrillator Electrode Under Breastbone   | Price By Report  |
| 05741  | In-Person Programming Device Evaluation Of Implantable Cardioverter-Defibrillator System With Electrode Under Breastbone, With Analysis,   | Price By Report  |
| 0575T  | Review And Report  | Price By Report  |
|  | In-Person Interrogation Device Evaluation Of Implantable Cardioverter-Defibrillator System With Electrode Under Breastbone, With Analysis,   |  |
| 0576T  | Review And Report  | Price By Report  |
| 0577T  | Electrophysiological Evaluation Of Implantable Cardioverter-Defibrillator System With Electrode Under Breastbone, With Analysis, Review And  | Delay De Damant  |
| 0577T  | Report Remote Interrogation Device Evaluation Of Implantable Cardioverter-Defibrillator System With Lead Under Breastbone, With Analysis, Review   | Price By Report  |
| 0578T  | And Report By Healthcare Professional  |  |
| 00701  | Remote Interrogation Device Evaluation Of Implantable Cardioverter-Defibrillator System With Lead Under Breastbone, With Remote Data   | Price By Report  |
| 0579T  |  | Price By Report  |
|  | Acquisitions, Receipt Of Transmissions And Technician Review, Technical Support And Distribution Of Results  | Price By Report Price By Report  |
| 0580T  | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone   | -  |
| 0581T  | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin  | Price By Report Price By Report Price By Report  |
| 0581T<br>0582T   | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance   | Price By Report Price By Report Price By Report Price By Report  |
| 0581T<br>0582T<br>0583T  | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia   | Price By Report \$1,813.10   |
| 0581T<br>0582T<br>0583T<br>0584T   | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance   | Price By Report \$1,813.10 Price By Report   |
| 0581T<br>0582T<br>0583T  | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia   | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report Price By Report   |
| 0581T<br>0582T<br>0583T<br>0584T<br>0585T  | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone  Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin  High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance  Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia  Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance  Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen  | Price By Report \$1,813.10 Price By Report   |
| 0581T<br>0582T<br>0583T<br>0584T<br>0585T<br>0586T   | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone  Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin  High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance  Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia  Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance  Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen  Transplantation Of Insulin-Producing Cells, Open Procedure  | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
| 0581T<br>0582T<br>0583T<br>0584T<br>0585T<br>0586T<br>0587T<br>0588T<br>0589T  | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction  | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
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| 0581T<br>0582T<br>0583T<br>0584T<br>0585T<br>0586T<br>0586T<br>0587T<br>0588T<br>0589T<br>0590T<br>0594T   | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity Initial Insertion Of Temporary Valve-Pump In Female Urethra   | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
| 0581T<br>0582T<br>0583T<br>0584T<br>0585T<br>0586T<br>0586T<br>0587T<br>0588T<br>0589T<br>0590T<br>0594T<br>0596T  | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity Initial Insertion Of Temporary Valve-Pump In Female Urethra   | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
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| 0581T<br>0582T<br>0583T<br>0584T<br>0584T<br>0586T<br>0586T<br>0586T<br>0589T<br>0590T<br>0594T<br>0596T<br>0599T<br>0690T<br>0600T<br>0601T   | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Of Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity Initial Insertion Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Fluorescence Wound Imaging For Bacteria, First Anatomic Site Fluorescence Wound Imaging For Bacteria, Each Additional Anatomic Site Irreversible Electroporation Destruction Of Growths Of Internal Organ, Accessed Through Skin Irreversible Electroporation Destruction Of Growths Of Internal Organ, Open Procedure Measurement Of Kidney Filtration Rate Using Skin Sensor And Single Dose Of Fluorescent Agent   | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
| 0581T<br>0582T<br>0583T<br>0584T<br>0585T<br>0586T<br>0586T<br>0588T<br>0590T<br>0590T<br>0594T<br>0597T<br>0599T<br>0599T<br>0600T<br>0601T<br>0602T  | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity Initial Insertion Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Fluorescence Wound Imaging For Bacteria, First Anatomic Site Irreversible Electroporation Destruction Of Growths Of Internal Organ, Accessed Through Skin Irreversible Electroporation Destruction Of Growths Of Internal Organ, Open Procedure Measurement Of Kidney Filtration Rate Using Skin Sensor And Single Dose Of Fluorescent Agent Monitoring Of Kidney Filtration Rate Using Skin Sensor And Multiple Doses Of Fluorescent Agent   | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
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| 0581T<br>0582T<br>0583T<br>0583T<br>0584T<br>0586T<br>0586T<br>0588T<br>0590T<br>0594T<br>0599T<br>0600T<br>0601T<br>0602T<br>0603T<br>0606T<br>0606T<br>0606T                                     | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Of Insulin-Producing Cells, Open Procedure Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity Initial Insertion Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Fluorescence Wound Imaging For Bacteria, First Anatomic Site Irreversible Electroporation Destruction Of Growths Of Internal Organ, Accessed Through Skin Irreversible Electroporation Destruction Of Growths Of Internal Organ, Accessed Through Skin Irreversible Electroporation Destruction Of Growths Of Internal Organ, Open Procedure Measurement Of Kidney Filtration Rate Using Skin Sensor And Single Dose Of Fluorescent Agent Monitoring Of Kidney Filtration Rate Using Skin Sensor And Multiple Doses Of Fluorescent Agent Provision Of Device And Patient Education For Rem | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
| 0581T<br>0582T<br>0583T<br>0583T<br>0584T<br>0586T<br>0586T<br>0586T<br>0590T<br>0590T<br>0594T<br>0599T<br>0600T<br>0601T<br>0602T<br>0604T<br>0605T<br>0606T                                     | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Of Insulin-Producing Cells, Open Procedure Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity Initial Insertion Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Fluorescence Wound Imaging For Bacteria, First Anatomic Site Fluorescence Wound Imaging For Bacteria, Each Additional Anatomic Site Fluorescence Wound Imaging For Bacteria, Bach Additional Anatomic Site Irreversible Electroporation Destruction Of Growths Of Internal Organ, Open Procedure Measurement Of Kidney Filtration Rate Using Skin Sensor And Single Dose Of Fluorescent Agent Monitoring Of Kidney Filtration Rate Using Skin Sensor And Multiple Doses Of Fluorescent Agent Provision Of Device And Patient Education For Remote Oct Imaging Of Retina Physician Review, Interpretation And Report Of Remote Oct Imaging Of Retina Set-Up And Patient Education Fo | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
| 0581T<br>0582T<br>0583T<br>0584T<br>0585T<br>0586T<br>0586T<br>0586T<br>0589T<br>0590T<br>0594T<br>0596T<br>0599T<br>0600T<br>0601T<br>0602T<br>0605T<br>0606T<br>0606T<br>0606T<br>0608T          | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Electronic Analysis With Simple Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity Initial Insertion Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Fluorescence Wound Imaging For Bacteria, Each Additional Anatomic Site Irreversible Electroporation Destruction Of Growths Of Internal Organ, Accessed Through Skin Irreversible Electroporation Destruction Of Growths Of Internal Organ, Appen Procedure  Measurement Of Kidney Filtration Rate Using Skin Sensor And Single Dose Of Fluorescent Agent Monitoring Of Kidney Filtration Rate Using Skin Sensor And Multiple Doses Of Fluorescent Agent Provision Of Device And Patient Education For Remote Oct Imaging Of Retina Physician Review, Interpretation And Report Of Remote Oct Imaging Of Retina Ph | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report   |
| 0581T<br>0582T<br>0583T<br>0583T<br>0586T<br>0586T<br>0586T<br>0586T<br>0589T<br>0590T<br>0596T<br>0596T<br>0599T<br>0600T<br>0602T<br>0603T<br>0605T<br>0606T<br>0606T<br>0608T<br>0609T<br>0609T | Removal Of Implantable Defibrillator Pulse Generator From Under Breastbone Freezing Destruction Of Malignant Breast Tumors In One Breast, Accessed Through Skin High-Energy Water Vapor Heat Destruction Of Malignant Prostate Tissue, Including Imaging And Needle Guidance Insertion Of Ventilating Tube In Eardrum Using An Automated Tube Delivery System Under Local Anesthesia Transplantation Of Insulin-Producing Cells, Via Catheter Accessed Through Skin Using Imaging Guidance Transplantation Of Insulin-Producing Cells Using Endoscope Inserted Through Wall Of Abdomen Transplantation Of Insulin-Producing Cells, Open Procedure Implantation Of Insulin-Producing Cells, Open Procedure Implantation Or Replacement Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Revision Or Removal Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction, Accessed Through Skin Electronic Analysis With Complex Programming Of Posterior Nerve Stimulating System For Bladder Dysfunction Electronic Analysis With Complex Programming Of Posterior Tibial Nerve Stimulating System For Bladder Dysfunction Incision Of Upper Arm Bone And Insertion Of Bone-Lengthening Device In Marrow Cavity Initial Insertion Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Replacement Of Temporary Valve-Pump In Female Urethra Fluorescence Wound Imaging For Bacteria, First Anatomic Site Irreversible Electroporation Destruction Of Growths Of Internal Organ, Accessed Through Skin Irreversible Electroporation Destruction Of Growths Of Internal Organ, Open Procedure Measurement Of Kidney Filtration Rate Using Skin Sensor And Single Dose Of Fluorescent Agent Monitoring Of Kidney Filtration Rate Using Skin Sensor And Multiple Doses Of Fluorescent Agent Monitoring Of Kidney Filtration Rate Using Skin Sensor And Single Dose Of Fluorescent Agent Provision Of Device And Patient Education For Remote Oct Imaging Of Retina Physician Review, Interpretation And Report Of Remote Oct Imagi | Price By Report Price By Report Price By Report Price By Report \$1,813.10 Price By Report |

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| Code  | Description  | Fee   |
| 0614T   | Removal And Replacement Of Substernal Implantable Defibrillator Pulse Generator  | Price By Report   |
| 0615T   | Eye-Movement Analysis With Interpretation And Report   | Price By Report   |
| 0616T   | Insertion Of Iris Prosthesis Into Eye  | Price By Report   |
| 0617T   | Insertion Of Iris Prosthesis Into Eye With Removal Of Lens And Insertion Of Artificial Lens  | Price By Report   |
| 0618T   | Insertion Of Iris Prosthesis Into Eye With Insertion Or Replacementof Artificial Lens  | Price By Report   |
|   |  |   |
| 0619T   | Examination Of Urethra And Bladder With Incision Of Opening Of Prostate Gland And Drug Delivery Using Endoscope  | Price By Report   |
| 0620T   | Insertion Of Stent To Shunt Arterial Blood To Deep Vein Of Lower Leg Via Catheter Using Imaging Guidance   | Price By Report   |
| 0621T   | Laser Incision Of Drainage Tissue Within Eye (Trabecular Meshwork)   | Price By Report   |
| 0622T   | Laser Incision Of Drainage Tissue Within Eye (Trabecular Meshwork) Using Ocular Endoscope  | Price By Report   |
|   | Preparation, Transmission And Computerized Analysis Of Ct Angiography Data On Plague In Heart Arteries, With Review, Interpretation, And   |   |
| 0623T   | Report   | Price By Report   |
| 0624T   | Preparation And Transmission Of Ct Angiography Data On Plaque In Heart Arteries  | Price By Report   |
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| 0625T   | Computerized Analysis Of Ct Angiography Data On Plaque In Heart Arteries   | Price By Report   |
| 0626T   | Review Of Computerized Analysis Of Ct Angiography Data On Plaque In Heart Arteries, With Interpretation, And Report  | Price By Report   |
| 0627T   | Injection Of Cell Or Tissue-Based Material Into Spinal Disc Of Lower Back Accessed Through Skin, First Level   | Price By Report   |
| 0628T   | Injection Of Cell Or Tissue-Based Material Into Spinal Disc Of Lower Back Accessed Through Skin, Each Additional Level   | Price By Report   |
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| 0629T   | Injection Of Cell Or Tissue-Based Material Into Spinal Disc Of Lower Back Accessed Through Skin Using Ct Imaging Guidance, First Level   | Price By Report   |
| 00201   | Injection Of Cell Or Tissue-Based Material Into Spinal Disc Of Lower Back Accessed Through Skin Using Ct Imaging Guidance, Each Additional   | 1 1100 B) 110pon  |
| 0000  |  | Date - De Desert  |
| 0630T   | Level  | Price By Report   |
| 0631T   | Measurement Of Oxygenation Of Limb Using Visible Light Imaging, With Interpretation And Report   | Price By Report   |
| 0632T   | Destruction Of Nerves To Main Arteries Of Lung, Accessed Through Skin Via Catheter Using Imaging Guidance  | Price By Report   |
| 0633T   | Ct Of One Breast With 3D Rendering   | Price By Report   |
| 0634T   | Ct Of One Breast With Contrast And 3D Rendering  | Price By Report   |
| 0635T   | Ct Of One Breast Before And After Contrast With 3D Rendering   | Price By Report   |
|   |  |   |
|   | Ct Of Both Breasts With 3D Rendering   | Price By Report   |
| 0637T   | Ct Of Both Breasts With Contrast And 3D Rendering  | Price By Report   |
| 0638T   | Ct Of Both Breasts Before And After Contrast With 3D Rendering   | Price By Report   |
| 0639T   | Wireless Skin Sensor Evaluation Of Flow In Cerebrospinal Fluid Shunt Using Ultrasound Guidance   | Price By Report   |
| 0643T   | Implantation Of Restoration Device Into Left Lower Chamber Of Heart Through Catheter   | Price By Report   |
|   | · ·  | , ,   |
| 0644T   | Removal Or Reduction Of Mass Within Heart By Suction Through Catheter  | Price By Report   |
| 0645T   | Implantation Of Coronary Sinus Reduction Device In Heart Through Catheter  | Price By Report   |
| 0646T   | Implantation Of Artificial Valve Between Right Upper And Lower Chambers Of Heart Through Catheter  | Price By Report   |
| 0647T   | Insertion Of Tube Into Stomach Through Skin Using Ultrasound Guidance  | Price By Report   |
| 0652T   | Diagnostic Inspection Of Esophagus, Stomach, And Upper Small Intestine Using A Flexible Endoscope Through Nose   | Price By Report   |
| 0653T   | Inspection Of Esophagus, Stomach, And Upper Small Intestine With Biopsy Using A Flexible Endoscope Through Nose  | , ,   |
| 06531   | inspection of Esophagus, Stoffacti, And Opper Small mestine with biopsy Osing A Plexible Endoscope Through Nose  | Price By Report   |
|   |  |   |
| 0654T   | Inspection Of Esophagus, Stomach, And Upper Small Intestine With Insertion Of Tube Or Catheter Using A Flexible Endoscope Through Nose   | Price By Report   |
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| 0655T   | Destruction Of Prostate Cancer Tissue By Laser Using Ultrasound Guidance   | Price By Report   |
| 0655T   | Destruction Of Prostate Cancer Tissue By Laser Using Ultrasound Guidance Tethering Of 7 Or Fewer Lower Spine Bones   | Price By Report   |
| 0655T<br>0656T  | Tethering Of 7 Or Fewer Lower Spine Bones  | Price By Report<br>Price By Report  |
| 0655T<br>0656T<br>0657T   | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones   | Price By Report Price By Report Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T  | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist   | Price By Report Price By Report Price By Report Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T   | Tethering Of 7 Or Fewer Lower Spine Bones  Tethering Of 8 Or More Lower Spine Bones  Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist  Implantation Of Drug-Releasing Device In Front Chamber Of Eye  | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T  | Tethering Of 7 Or Fewer Lower Spine Bones  Tethering Of 8 Or More Lower Spine Bones  Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist  Implantation Of Drug-Releasing Device In Front Chamber Of Eye  Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye   | Price By Report Price By Report Price By Report Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T   | Tethering Of 7 Or Fewer Lower Spine Bones  Tethering Of 8 Or More Lower Spine Bones  Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist  Implantation Of Drug-Releasing Device In Front Chamber Of Eye  | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T<br>0661T<br>0662T   | Tethering Of 7 Or Fewer Lower Spine Bones  Tethering Of 8 Or More Lower Spine Bones  Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist  Implantation Of Drug-Releasing Device In Front Chamber Of Eye  Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye  Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp   | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T  | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp   | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T<br>0671T   | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork)  | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T<br>0671T<br>0714T  | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance   | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T<br>0671T   | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score   | Price By Report   |
| 0655T<br>0656T<br>0659T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T<br>0671T<br>0714T  | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For   | Price By Report   |
| 0655T<br>0656T<br>0659T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T<br>0671T<br>0714T  | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score   | Price By Report   |
| 0655T<br>0656T<br>0659T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T<br>0671T<br>0714T  | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For   | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0669T<br>0660T<br>0661T<br>0662T<br>0663T<br>0714T<br>0716T   | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound   | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T<br>0714T<br>0716T<br>0717T   | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear   | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0660T<br>0661T<br>0662T<br>0663T<br>0714T<br>0716T<br>0717T<br>0718T  | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance   | Price By Report   |
| 0655T<br>0656T<br>0657T<br>0659T<br>0669T<br>0660T<br>0662T<br>0663T<br>0714T<br>0714T<br>0716T<br>0717T<br>0718T<br>0719T  | Tethering Of 7 Or Fewer Lower Spine Bones Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin   | Price By Report   |
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| 0655T 0656T 0656T 0657T 0660T 0669T 0660T 0661T 0661T 0714T 0716T 0718T 0719T 0722T 0722T 0723T 0724T 0744T 0744T 0780T 0782T   | Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report  Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Conrep), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Res | Price By Report   |
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| 0655T 0656T 0656T 0656T 0659T 0660T 0661T 0661T 0661T 0714T 0714T 0716T 0719T 0722T 0722T 0723T 0724T 0744T 0744T 0780T 0781T 0782T 0784T 0785T                         | Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Insertion Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy For Partial Thickness Rotator Cuff Tear Injection Of Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Gallbladder, Bile Ducts, Pancreas And Pancreatic Duct Cholangiopancreatography (Qmrcp), With Data Preparation And Transmission, Interpretation And Report And With Diagnostic Magnetic Resonance Imaging Spect Measurement Of Blood Flow To Heart Muscle Insertion Of Protection Device In Esophagus And Radiofrequency Destruction Of Nerves To Lung In Mainstem Airway On One Side Of Bo | Price By Report   |
| 0655T 0656T 0656T 0656T 0659T 0660T 0660T 0661T 0714T 0714T 0716T 0717T 0720T 0722T 0722T 0723T 0724T 0744T 0744T 0748T 0748T 0748T 0748T 0780T 0781T                   | Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Galibladder, Bile Ducts, Panc | Price By Report                 |
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| 0655T 0656T 0656T 0656T 0659T 0660T 0660T 0661T 0714T 0714T 0716T 0717T 0720T 0722T 0722T 0723T 0724T 0744T 0744T 0748T 0748T 0748T 0748T 0780T 0781T                   | Tethering Of 8 Or More Lower Spine Bones Infusion Of Supersaturated Oxygen Into Heart During Heart Attack With Review By Radiologist Implantation Of Drug-Releasing Device In Front Chamber Of Eye Removal And Reimplantation Of Drug-Releasing Device In Front Chamber Of Eye Initial Measurement And Calibration Of Cap For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement, Monitoring, And Removal Of Device For Mechanical Cooling Of Scalp Placement Of Drainage Device Into Drainage Tissue Within Eye (Trabecular Meshwork) Transperineal Laser Destruction Of Benign Prostatic Enlargement Using Imaging Guidance Acoustic Waveform Recording Of Heart With Automated Analysis And Generation Of Coronary Artery Disease Risk Score Harvesting Of Patient'S Own Fatty Tissue And Preparation Of Cells For Autologous Adipose-Derived Regenerative Cell (Adrc) Therapy Into Supraspinatus Tendon Of One Shoulder Using Ultrasound Guidance, For Partial Thickness Rotator Cuff Tear Replacement Of Posterior Joint In Single Segment Of Spine In Lower Back (Lumbar) Using Imaging Guidance Electrical Nerve Field Stimulation Of Cranial Nerves Through Skin Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report Quantitative Computed Tomography (Ct Scan) Tissue Characterization With Interpretation And Report And Concurrent Ct Examination Of Any Structure Contained In The Concurrently Acquired Diagnostic Imaging Dataset Quantitative Magnetic Resonance (Mr Scan) Imaging Of Galibladder, Bile Ducts, Panc | Price By Report                 |
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|----------------|---|---------------------------------|
| 0791T          | Description Semi-Immersive Virtual Reality-Facilitated, Motor-Cognitive Training For Walking, Each 15 Minutes   | Price By Report                 |
|                | Appl styr diamn fluoride 38%  | Price by Report                 |
|                | Percutaneous Transcatheter Thermal Ablation Of Pulmonary Artery Nerves, Including Right Heart Catheterization, Pulmonary Artery   | , ,                             |
| 0793T          | Angiography, And All Imaging Guidance   | Price By Report                 |
|                |   |                                 |
| 0794T          | Patient-Specific, Assistive, Rules-Based Algorithm For Ranking Cancer Drug Treatment Options Based On The Patient'S Tumor-Specific Cancer Marker Information Obtained From Previous Laboratory Testing Which Have Been Previously Interpreted And Reported Separately | Price By Report                 |
| 07941          | Transcatheter Insertion Of Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of Right Atrial And   | Filice by Report                |
| 0795T          | Right Ventricular Pacemaker Components  | Price By Report                 |
|                | Transcatheter Insertion Of Permanent Dual-Chamber Pacemaker Using Fluoroscopy And Device Interrogation Of Right Atrial Pacemaker  |                                 |
| 0796T          | Component   | Price By Report                 |
|                | Transcatheter Insertion Of A Permanent Dual Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of Right Ventricular  | D: D D .                        |
| 0797T          | Pacemaker Component  Transcatheter Removal Of The Right Atrial And Right Ventricular Components Of A Permanent Dual-Chamber Leadless Pacemaker Using  | Price By Report                 |
| 0798T          | Fluoroscopy   | Price By Report                 |
| 0799T          | Transcatheter Removal Of The Right Atrial Component Of A Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy  | Price By Report                 |
| T0080          | Transcatheter Removal Of The Right Ventricular Component Of A Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy   | Price By Report                 |
|                | Transcatheter Removal And Replacement Of Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of  | , , ,                           |
| 0801T          | Right Atrial And Right Ventricular Components   | Price By Report                 |
|                | Transcatheter Removal And Replacement Of Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of  |                                 |
| 0802T          | Right Atrial Component  | Price By Report                 |
| 0803T          | Transcatheter Removal And Replacement Of Permanent Dual-Chamber Leadless Pacemaker Using Fluoroscopy And Device Interrogation Of Right Ventricular Component  | Drice By Deport                 |
| 06031          | ngir vermadiai Component  | Price By Report                 |
|                | In-Person Programming Device Evaluation Of Dual-Chamber Leadless Pacemaker With Adjustment Of The Device To Test Function And To  |                                 |
| 0804T          | Select Optimal Permanent Values, With Analysis, Review And Report By A Physician Or Other Qualified Health Care Professional  | Price By Report                 |
| 0805T          | Implantation Of A Superior And Inferior Vena Cava Artificial Valve Using The Femoral Vein Through The Skin  | Price By Report                 |
| 0806T          | Open Implantation Of A Superior And Inferior Vena Cava Artificial Valve Using The Femoral Vein  | Price By Report                 |
| Í              | Analysis Of Lung Tissue Ventilation Using Software-Based Processing Of Cinefluorography Images And Previously Acquired Ct Images,   |                                 |
| 0807T          | Including Data Preparation And Transmission, Evaluation Of Lung Tissue Ventilation Data, Review, Interpretation, And Report   | Price By Report                 |
|                | Analysis Of Lung Tissue Ventilation Using Software-Based Processing Of Cinefluorography Images And Ct Images Taken For The Purpose Of   |                                 |
| 0808T          | Lung Tissue Ventilation Analysis, Including Data Preparation And Transmission, Evaluation Of Lung Tissue Ventilation Data, Review, Interpretation, And Report   | Price By Report                 |
| 0810T          | Subretinal Injection Of A Drug, Including Vitrectomy And Retinotomy   | Price By Report                 |
| 0811T          | Set-Up And Education On Use Of Equipment For Remoted Electronic Assessment Of Bladder Emptying  | Price By Report                 |
| 0812T          | Device Supply And Report Generation For Remote Electronic Assessment Of Bladder Emptying For Up To 10 Days  | Price By Report                 |
| 0813T          | Volume Adjustment Of Intragastric Bariatric Balloon Using A Flexible Endoscope Through The Mouth  | Price By Report                 |
| 0814T          | Injection Through The Skin Of Calcium-Based Osteoconductive Material To Repair Upper Thigh Bone   | Price By Report                 |
| 0815T          | Ultrasound-Based Radiofrequency Echographic Multi-Spectrometry Scan For Measuring Bone Loss In Hips, Pelvis, Or Spine   | Price By Report                 |
| 0816T<br>0817T | Insertion Or Replacement Of Integrated Posterior Tibial Nerve Stimulating System Under The Skin, For Bladder Dysfunction Insertion Or Replacement Of Integrated Posterior Tibial Nerve Stimulating System Under Muscle, For Bladder Dysfunction                       | Price By Report Price By Report |
| 0818T          | Revision Or Removal Of Integrated Posterior Nerve Stimulating System Under Skin, For Bladder Dysfunction  | Price By Report                 |
| 0819T          | Revision Or Removal Of Integrated Posterior Nerve Stimulating System Under Muscle, For Bladder Dysfunction  | Price By Report                 |
|                | Continuous In-Person Monitoring And Intervention During Psychedelic Medication Therapy, First Physician Or Other Qualified Health Care  | ,                               |
| 0820T          | Professional, Each Hour   | Price By Report                 |
|                | Continuous In-Person Monitoring And Intervention During Psychedelic Medication Therapy, Second Physician Or Other Qualified Health Care   | D: D D :                        |
| 0821T          | Professional Working With The First Physician Or Other Qualified Health Care Professional, Each Hour  Continuous In-Person Monitoring And Intervention During Psychedelic Medication Therapy Clinical Staff Working With The First Physician Or                       | Price By Report                 |
| 0822T          | Other Qualified Health Care Professional, Each Hour   | Price By Report                 |
|                | ·   |                                 |
| 0823T          | Insertion Of Permanent Single-Chamber Leadless Pacemaker For Pacing The Right Upper Heart Chamber Using Imaging Guidance  | Price By Report                 |
| 0824T          | Removal Of Permanent Single-Chamber Leadless Pacemaker For Pacing The Right Upper Chamber Of The Heart Using Imaging Guidance   | Price By Report                 |
|                | Removal And Replacement Of Single-Chamber Permanent Leadless Pacemaker For Pacing The Right Upper Chamber Of The Heart Using  | ,                               |
| 0825T          | Imaging Guidance  | Price By Report                 |
| 0826T          | In-Person Device Evaluation Of Single-Chamber Leadless Pacemaker System   | Price By Report                 |
| 0827T          | Digitization Of Glass Microscope Slides For Cytopathology Of Fluids, Washings, Or Brushings, Smears   | Price By Report                 |
| 0828T<br>0829T | Digitization Of Glass Microscope Slides For Cytopathology Of Fluids, Washings, Or Brushings, Simple Filter Method Digitization Of Glass Microscope Slides For Cytopathology, Concentration Technique  | Price By Report                 |
| 0830T          | Digitization Of Glass Microscope Slides For Cytopathology, Concentration Technique  Digitization Of Glass Microscope Slides For Cytopathology, Selective-Cellular Enhancement Technique   | Price By Report Price By Report |
| 0831T          | Digitization Of Glass Microscope Slides For Cytopathology Of Cervical Or Vaginal Specimen   | Price By Report                 |
| 0832T          | Digitization Of Glass Microscope Slides For Cytopathology, Smears Requiring Screening And Interpretation  | Price By Report                 |
| 0833T          | Digitization Of Glass Microscope Slides For Cytopathology, Smears Requiring Preparation, Screening And Interpretation   | Price By Report                 |
| 0834T          | Digitization Of Glass Microscope Slides For Cytopathology, Smears Requiring Extended Study Of Over 5 Slides And/Or Multiple Stains  | Price By Report                 |
| 0835T          | Digitization Of Glass Microscope Slides For Cytopathology Evaluation Of Fine Needle Aspirate, First Evaluation  | Price By Report                 |
| 0836T          | Digitization Of Glass Microscope Slides For Cytopathology Evaluation Of Fine Needle Aspirate, Each Additional Evaluation  | Price By Report                 |
| 0837T          | Digitization Of Glass Microscope Slides For Cytopathology Evaluation Of Fine Needle Aspirate  Digitization Of Glass Microscope Slides For Consultation And Report On Slides Proposed Elevathors   | Price By Report                 |
| 0838T<br>0839T | Digitization Of Glass Microscope Slides For Consultation And Report On Slides Prepared Elsewhere  Digitization Of Glass Microscope Slides For Consultation And Report Requiring Preparation Of Slides Using Referred Material   | Price By Report Price By Report |
| 08391<br>0840T | Digitization of Glass Microscope Slides For Consultation, Comprehensive Review  | Price By Report                 |
| 0841T          | Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, First Tissue Block   | Price By Report                 |
| 0842T          | Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, Each Additional Tissue Block   | Price By Report                 |
| 0843T          | Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, Cytologic Examination Of Initial Site  | Price By Report                 |
| 0844T          | Digitization Of Glass Microscope Slides For Pathology Consultation During Surgery, Cytologic Examination Of Each Additional Site  | Price By Report                 |
| 0845T          | Digitization Of Glass Microscope Slides For Immunofluorescence, Initial Single Antibody Stain Procedure   | Price By Report                 |
| 0846T          | Digitization Of Glass Microscope Slides For Immunofluorescence, Each Additional Antibody Stain Procedure  Digitization Of Glass Microscope Slides For Examination And Selection Of Patriough Archivel Tissue(S) For Melecular Applying                                | Price By Report                 |
| 0847T          | Digitization Of Glass Microscope Slides For Examination And Selection Of Retrieved Archival Tissue(S) For Molecular Analysis  | Price By Report                 |

| Code   | Description Distriction Of Close Microscope Stides For In Situ Hubridization Initial Single Probe Stain Procedure   | Fee  |
|--|---|--|
| 0848T<br>0849T                                     | Digitization Of Glass Microscope Slides For In Situ Hybridization, Initial Single Probe Stain Procedure  Digitization Of Glass Microscope Slides For In Situ Hybridization, Each Additional Single Probe Stain Procedure  | Price By Report Price By Report                        |
| 0850T  | Digitization Of Glass Microscope Slides For In Situ Hybridization, Each Multiplex Probe Stain Procedure   | Price By Report  |
| 0851T  | Digitization Of Glass Microscope Slides For Morphometric Analysis, In Situ Hybridization, Initial Manual Single Probe Stain Procedure   | Price By Report  |
| 00011  |   | · ned by respon  |
| 0852T  | Digitization Of Glass Microscope Slides For Morphometric Analysis, In Situ Hybridization, Each Additional Manual Single Probe Stain Procedure   | Price By Report  |
| 0853T  | Digitization Of Glass Microscope Slides For Morphometric Analysis, In Situ Hybridization, Each Manual Multiplex Probe Stain Procedure   | Price By Report  |
| 0854T  | Digitization Of Glass Microscope Slides For Peripheral Blood Smear  Digitization Of Glass Microscope Slides For Bone Marrow Smear   | Price By Report  |
| 0855T<br>0856T                                     | Digitization Of Glass Microscope Slides For Diagnostic Electron Microscopy  | Price By Report Price By Report                        |
| 0857T  | Opto-Acoustic Imaging Of The Breast Using Software Processing Of Imaging Data   | Price By Report  |
| 0858T  | External Application Of Magnetic Field To Stimulate Nerve Cells In The Brain With Measurement Of Electrical Activity In The Brain   | Price By Report  |
| 0859T  | Noncontact Near-Infrared Spectroscopy With Image Acquisition, Interpretation And Report, Each Additional Anatomic Site  | Price By Report  |
| 0860T  | Noncontact Near-Infrared Spectroscopy With Provocative Maneuvers, Image Acquisition, Interpretation And Report For Screening For Peripheral Arterial Disease  | Price By Report  |
| 0861T  | Removal Of Battery And Transmitter Of Wireless Cardiac Stimulator For Pacing Of Left Lower Chamber Of Heart   | Price By Report  |
| 0862T  | Relocation Of Battery Of Wireless Cardiac Stimulator For Pacing Of Left Lower Chamber Of Heart  | Price By Report  |
| 0863T  | Relocation Of Transmitter Of Wireless Cardiac Stimulator For Pacing Of Left Lower Chamber Of Heart  | Price By Report  |
| 0864T  | Low Energy Shockwave Therapy Of Penis   | Price By Report  |
| 0865T  | Quantitative Mri Of The Brain With Comparison To Previous Mri Scan Without Mri Scan Performed During The Same Visit   | Price By Report  |
| 0866T  | Quantitative Mri Of The Brain With Comparison To Previous Mri Scan With Mri Scan Performed During The Same Visit  | Price By Report  |
|  | Innovamatrix Ac, Per Square Centimeter  Mirragen Advanced Wound Matrix, Per Square Centimeter   | Price By Report  |
|  | Xcellistem, 1 Mg  | Price By Report Price By Report                        |
|  | Microlyte Matrix, Per Square Centimeter   | Price By Report  |
|  | Novosorb Synpath Dermal Matrix, Per Square Centimeter   | Price By Report  |
|  | Restrata, Per Square Centimeter   | Price By Report  |
|  | Theragenesis, Per Square Centimeter   | Price By Report  |
| A2009  | Symphony, Per Square Centimeter   | Price By Report  |
|  | Apis, Per Square Centimeter   | Price By Report  |
|  | Supra Sdrm, Per Square Centimeter   | Price By Report  |
|  | Suprathel, Per Square Centimeter  | Price By Report  |
|  | Innovamatrix Fs, Per Square Centimeter  | Price By Report  |
|  | Omeza Collagen Matrix, Per 100 Mg Phoenix Wound Matrix, Per Square Centimeter   | Price By Report Price By Report                        |
|  | Permeaderm B, Per Square Centimeter   | Price By Report  |
|  | Permeaderm Glove, Each  | Price By Report  |
| A2018  | Permeaderm C, Per Square Centimeter   | Price By Report  |
| A2019  | Kerecis Omega3 Marigen Shield, Per Square Centimeter  | Price By Report  |
|  | Ac5 Advanced Wound System (Ac5)   | Price By Report  |
|  | Neomatrix, Per Square Centimeter  | Price By Report  |
| A2022  | Innovaburn Or Innovamatrix XI, Per Square Centimeter  | Price By Report  |
| A2023<br>A2024                                     | Innovamatrix Pd, 1 Mg Resolve Matrix, Per Square Centimeter   | Price By Report Price By Report                        |
|  | Miro3D, Per Cubic Centimeter  | Price By Report  |
|  | Restrata Minimatrix, 5 Mg   | Price By Report  |
|  | Skin Substitute, Fda Cleared As A Device, Not Otherwise Specified   | Price By Report  |
| A4261  | Cervical Cap For Contraceptive Use  | \$50.27  |
|  | Diaphragm For Contraceptive Use   | \$45.11  |
| A4267  |   | \$1.95   |
| A4268  |   | \$3.72   |
| A4269<br>A9156                                     | Contraceptive Supply, Spermicide (E.G., Foam, Gel), Each  Oral Mucoadhesive, Any Type (Liquid, Gel, Paste, Etc.), Per 1 MI  | \$13.55<br>Price By Report                             |
| A9156<br>A9292                                     | Prescription Digital Visual Therapy, Software-Only, Fda Cleared, Per Course Of Treatment  | Price By Report  |
| A9601  | Flortaucipir F 18 Injection, Diagnostic, 1 Millicurie   | Price By Report  |
| A9603  | Injection, Pafolacianine, 0.1 Mg  | Price By Report  |
| A9609  | Fludeoxyglucose F18 Up To 15 Millicuries  | Price By Report  |
| A9697  | Injection, Carboxydextran-Coated Superparamagnetic Iron Oxide, Per Study Dose   | Price By Report  |
|  | Radiopharmaceutical, Therapeutic, Not Otherwise Classified  | \$30.45  |
| A9700  |   | \$275.63   |
| D9222  |   | \$117.26   |
| D9223<br>D9239                                     | Deep Sedation/General Anesthesia - Each Subsequent 15 Minute Increment Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes   | \$117.26<br>\$89.70                                    |
| D9239  | Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes  Intravenous Moderate (Conscious) Sedation/Analgesia - Each Subsequent 15 Minute Increment   | \$89.70  |
| G0101  | Cervical Or Vaginal Cancer Screening; Pelvic And Clinical Breast Examination  | \$47.06  |
|  | Prostate Cancer Screening; Digital Rectal Examination   | \$22.03  |
|  | Colorectal Cancer Screening; Flexible Sigmoidoscopy   | \$178.74   |
| G0104  | 0 17  | *  |
| G0105  | Colorectal Cancer Screening; Colonoscopy On Individual At High Risk   |  |
| G0105<br>G0106                                     | Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema  | \$281.83   |
| G0105<br>G0106<br>G0117                            | Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist   | \$500.58<br>\$281.83<br>\$60.07                        |
| G0105<br>G0106<br>G0117<br>G0118                   | Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist Glaucoma Screening For High Risk Patient Furnished Under The Direct Supervision Of An Optometrist Or Ophthalomologist   | \$281.83<br>\$60.07<br>\$40.34                         |
| G0105<br>G0106<br>G0117<br>G0118<br>G0120          | Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist Glaucoma Screening For High Risk Patient Furnished Under The Direct Supervision Of An Optometrist Or Ophthalomologist Colorectal Cancer Screening; Alternative To G0105, Screening Colonoscopy, Barium Enema.   | \$281.83<br>\$60.07<br>\$40.34<br>\$221.33             |
| G0105<br>G0106<br>G0117<br>G0118<br>G0120<br>G0121 | Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist Glaucoma Screening For High Risk Patient Furnished Under The Direct Supervision Of An Optometrist Or Ophthalomologist Colorectal Cancer Screening; Alternative To G0105, Screening Colonoscopy, Barium Enema. Colorectal Cancer Screening; Colonoscopy On Individual Not Meeting Criteria For High Risk | \$281.83<br>\$60.07<br>\$40.34<br>\$221.33<br>\$365.63 |
| G0105<br>G0106<br>G0117<br>G0118<br>G0120<br>G0121 | Colorectal Cancer Screening; Alternative To G0104, Screening Sigmoidoscopy, Barium Enema Glaucoma Screening For High Risk Patients Furnished By An Optometrist Or Ophthalmologist Glaucoma Screening For High Risk Patient Furnished Under The Direct Supervision Of An Optometrist Or Ophthalomologist Colorectal Cancer Screening; Alternative To G0105, Screening Colonoscopy, Barium Enema.   | \$281.83<br>\$60.07<br>\$40.34<br>\$221.33             |

| Code  | Description   | Fee             |
|-------|---|-----------------|
|       | Single Energy X-Ray Absorptiometry (Sexa) Bone Density Study, One Or More Sites; Appendicular Skeleton (Peripheral) (Eg, Radius, Wrist,   |                 |
| G0130 |   | \$34.57         |
| G0151 | Services Performed By A Qualified Physical Therapist In The Home Health Or Hospice Setting, Each 15 Minutes   | \$28.53         |
| G0152 | Services Performed By A Qualified Occupational Therapist In The Home Health Or Hospice Setting, Each 15 Minutes   | \$28.53         |
| G0153 | Services Performed By A Qualified Speech-Language Pathologist In The Home Health Or Hospice Setting, Each 15 Minutes  | \$22.62         |
| G0155 | Services Of Clinical Social Worker In Home Health Or Hospice Settings, Each 15 Minutes  | \$31.32         |
| G0156 | Services Of Home Health/Hospice Aide In Home Health Or Hospice Settings, Each 15 Minutes  | \$8.92          |
| G0157 | Services Performed By A Qualified Physical Therapist Assistant In The Home Health Or Hospice Setting, Each 15 Minutes   | \$25.68         |
| G0158 | Services Performed By A Qualified Occupational Therapist Assistant In The Home Health Or Hospice Setting, Each 15 Minutes   | \$25.68         |
|       | Services Performed By A Qualified Physical Therapist, In The Home Health Settin, In Establishment/Delivery Of Safe P.E. Maintenance   |                 |
| G0159 | Program, Each 15 Min  | Price By Report |
|       | Services Performed By A Qualified Occupational Therapist, In The Home Health Setting, In Establishment/Delivery Of O.T. Maintenance   |                 |
| G0160 | Program, Each 15 Min  | Price By Report |
|       | External Counterpulsation, Per Treatment Session  | \$104.12        |
| G0175 | Scheduled Interdisciplinary Team Conference (Minimum Of Three Exclusive Of Patient Care Nursing Staff) With Patient Present   | Price By Report |
|       | Destruction Of Localized Lesion Of Choroid (For Example, Choroidal Neovascularization); Photocoagulation, Feeder Vessel Technique (One Or   |                 |
| G0186 | More Sessions)  | Price By Report |
|       | Therapeutic Procedures To Increase Strength Or Endurance Of Respiratory Muscles, Face To Face, One On One, Each 15 Minutes (Includes  |                 |
| G0237 | Monitoring)   | \$9.60          |
|       | Therapeutic Procedures To Improve Respiratory Function, Other Than Described By G0237, One On One, Face To Face, Per 15 Minutes   |                 |
| G0238 | (Includes Monitoring)   | \$9.60          |
|       | Therapeutic Procedures To Improve Respiratory Function Or Increase Strength Or Endurance Of Respiratory Muscles, Two Or More Individuals  |                 |
| G0239 | (Includes Monitoring)   | \$12.21         |
| 00    | Prostate Brachytherapy Using Permanently Implanted Palladium Seeds, Including Transperitoneal Placement Of Needles Or Catheters Into  | B . B =         |
| G0256 | The Prostate, Cystoscopy And Application Of Permanent Interstitial Radiation Source   | Price By Report |
| 000   | Unscheduled Or Emergency Dialysis Treatment For An Esrd Patient In A Hospital Outpatient Department That Is Not Certified As An Esrd  | D: 5 -          |
| G0257 |   | Price By Report |
|       | Injection Procedure For Sacroiliac Joint; Arthrograpy   | Price By Report |
| G0260 | Injection Procedure For Sacroiliac Joint; Provision Of Anesthetic, Steroid And/Or Other Therapeutic Agent And Arthrography  | Price By Report |
| G0268 |   | \$52.79         |
| 00000 | Placement Of Occlusive Device Into Either A Venous Or Arterial Access Site, Post Surgical Or Interventional Procedure (E.G. Angioseal Plug,   | Delay Dy Dynast |
|       | Vascular Plug)  | Price By Report |
| G0277 | Hyperbaric Oxygen Under Pressure, Full Body Chamber, Per 30 Minute Interval   | \$170.28        |
| C0070 | Iliac Artery Angiography Performed At The Same Time Of Cardiac Catheterization, Includes Catheter Placement, Injection Of Dye, Radiologic   | ¢44.00          |
| G0278 | Supervision And Interpretation And Production Of Images (List Separately In Addition To Primary Procedure)  | \$11.92         |
|       | Diagnostic Digital Breast Tomosynthesis, Unilateral Or Bilateral (List Separately In Addition To 77065 Or 77066)  | \$47.50         |
| G0288 | Reconstruction, Computed Tomographic Angiography Of Aorta For Surgical Planning For Vascular Surgery  | \$34.66         |
| Cococ | Noncovered Surgical Procedure(S) Using Conscious Sedation, Regional, General Or Spinal Anesthesia In A Medicare Qualifying Clinical Trial,  | Drice By Benert |
| G0293 | Per Day   | Price By Report |
| G0294 | Noncovered Procedure(S) Using Either No Anesthesia Or Local Anesthesia Only, In A Medicare Qualifying Clinical Trial, Per Day   | Price By Report |
| G0298 | Insertion Of Dual Chamber Pacing Cardioverter Defibrillator Pulse Generator  Direct Skilled Nursing Services Of A Registered Nurse (Re) In The Home Health Or Hopping Serting Feet 15 Minutes   | Price By Report |
|       | Direct Skilled Nursing Services Of A Registered Nurse (Rn) In The Home Health Or Hospice Setting, Each 15 Minutes  Direct Skilled Nursing Services Of A Licensed Prectical Nurse (Log) In The Home Health Or Hospice Setting, Each 15 Minutes                       | \$21.42         |
| G0300 | Direct Skilled Nursing Services Of A Licensed Practical Nurse (Lpn) In The Home Health Or Hospice Setting, Each 15 Minutes  | \$17.82         |
| Cusus | Pre-Operative Pulmonary Surgery Services For Preparation For Lvrs, Complete Course Of Services, To Include A Minimum Of 16 Days Of Services   | Drice By Report |
|       | Pre-Operative Pulmonary Surgery Services For Preparation For Lvrs, 10 To 15 Days Of Services  | Price By Report |
|       | Pre-Operative Pulmonary Surgery Services For Preparation For Lvrs, 1 To 9 Days Of Services  | Price By Report |
|       | Post-Discharge Pulmonary Surgery Services After Lvrs, Minimum Of 6 Days Of Services   | Price By Report |
| G0305 |   | Price By Report |
|       | Immunization Counseling By A Physician Or Other Qualify Ed Health Care Professional When The Vaccine(S) Is Not Administered On The  |                 |
| G0312 | Same Date Of Service For Ages Under 21, 5 To 15 Mins Time (This Code Is Used For Medicaid Billing Purposes)   | \$5.79          |
|       | Immunization Counseling By A Physician Or Other Qualified Health Care Professional When The Vaccine(S) Is Not Administered On The   |                 |
| G0313 | Same Date Of Service For Ages Under 21, 16-30 Mins Time (This Code Is Used For Medicaid Billing Purposes)   | \$11.57         |
|       | Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 16-30 Mins Time (This   |                 |
| G0314 | Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt)   | \$11.57         |
| 00015 | Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This  | <b>0</b> = =4   |
| G0315 | Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt)   | \$5.51          |
|       | Prolonged Nursing Facility Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary   |                 |
|       | Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified  |                 |
|       | Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99306, 99310 For Nursing Facility   |                 |
|       | Evaluation And Management Services). (Do Not Report G0317 On The Same Date Of Service As Other Prolonged Services For Evaluation  |                 |
| G0317 | And Management 99358, 99359, 99418). (Do Not Report G0317 For Any Time Unit Less Than 15 Minutes)   | \$27.89         |
|       | Prolonged Home Or Decidence Evaluation And Management Continue (S) Depend The Total Time For The Drimany Continue (Mhon The Drimany   |                 |
|       | Prolonged Home Or Residence Evaluation And Management Service(S) Beyond The Total Time For The Primary Service (When The Primary Service Has Been Selected Using Time On The Date Of The Primary Service); Each Additional 15 Minutes By The Physician Or Qualified |                 |
|       | Healthcare Professional, With Or Without Direct Patient Contact (List Separately In Addition To Cpt Codes 99345, 99350 For Home Or  |                 |
|       | Residence Evaluation And Management Services). (Do Not Report G0318 On The Same Date Of Service As Other Prolonged Services For   |                 |
| G0318 | Evaluation And Management 99358, 99359, 99417). (Do Not Report G0318 For Any Time Unit Less Than 15 Minutes)  | \$27.28         |
|       | Facility Services For Dental Rehabilitation Procedure(S) Performed On A Patient Who Requires Monitored Anesthesia (E.G., General,   | Ψ220            |
| G0330 | Intravenous Sedation (Monitored Anesthesia Care) And Use Of An Operating Room   | Price By Report |
| G0339 | Fractionated Treatment  | Price By Report |
| G0340 | Fractionated Treatment, All Lesions, Per Session, Second Through Fifth Sessions, Maximum Five Sessions Per Course Of  | Price By Report |
| G0341 | Percutaneous Islet Cell Transplant, Includes Portal Vein Catheterization And Infusion   | \$1,654.43      |
| G0342 | Laparoscopy For Islet Cell Transplant, Includes Portal Vein Catheterization And Infusion  | \$672.51        |
| G0343 | Laparotomy For Islet Cell Transplant, Includes Portal Vein Catheterization And Infusion   | \$1,102.92      |
| G0378 | Hospital Observation Service, Per Hour  | Price By Report |
| G0379 | Direct Admission Of Patient For Hospital Observation Care   | Price By Report |
| G0398 | Respiratory Effort And Oxygen Saturation  | Price By Report |
|       |   |                 |

| Cada  | Percentation   | F                           |
|-------|--|-----------------------------|
|       | Description Home Sleep Test (Hst) With Type Iv Portable Monitor, Unattended; Minimum Of 3 Channels   | Fee<br>Price By Report      |
| G0400 | Electrocardiogram, Routine Ecg With 12 Leads; Tracing Only, Without Interpretation And Report, Performed As A Screening For The Initial  | File by Report              |
| G0404 | Preventive Physical Examination  | \$5.67                      |
|       | Electrocardiogram, Routine Ecg With 12 Leads; Interpretation And Report Only, Performed As A Screening For The Initial Preventive Physical   |                             |
| G0405 | Examination  | \$7.63                      |
|       | Group Psychotherapy Other Than Of A Multiple-Family Group, In A Partial Hospitalization Or Intensive Outpatient Setting, Approximately 45 To   |                             |
|       | 50 Minutes   | Price By Report             |
| G0411 | Interactive Group Psychotherapy, In A Partial Hospitalization Or Intensive Outpatient Setting, Approximately 45 To 50 Minutes  Open Treatment Of Iliac Spine(S), Tuberosity Avulsion, Or Iliac Wing Fracture(S), Unilateral Or Bilateral For Pelvic Bone Fracture Patterns   | Price By Report             |
| G0412 | Which Do Not Disrupt The Pelvic Ring Includes Internal Fixation, When Performed  | \$658.41                    |
| 002   | Percutaneous Skeletal Fixation Of Posterior Pelvic Bone Fracture And/Or Dislocation, For Fracture Patterns Which Disrupt The Pelvic Ring,  | Ψοσοιτι                     |
| G0413 | Unilateral Or Bilateral, (Includes Ilium, Sacroiliac Joint And/Or Sacrum)  | \$1,070.51                  |
|       | Bilateral, Includes Internal Fixation When Performed (Includes Pubic Symphysis And/Or Superior/Inferior Rami)  | \$1,010.92                  |
|       | Bilateral, Includes Internal Fixation, When Performed (Includes Ilium, Sacroiliac Joint And/Or Sacrum)   | \$1,236.59                  |
| G0416 | Surgical Pathology, Gross And Microscopic Examinations, For Prostate Needle Biopsy, Any Method   | \$336.45                    |
| G0420 | Dermal Filler Injection(S) For The Treatment Of Facial Lipodystrophy Syndrome (Lds) (E.G., As A Result Of Highly Active Antiretroviral Therapy)  | \$91.18                     |
|       | And Guidance On How To Change Sexual Behavior; Performed Semi-Annually, 30 Minutes   | \$25.31                     |
|       | Annual Face-To-Face Obesity Screening, 15 Minutes  | Price By Report             |
|       | Collection Of Venous Blood By Venipuncture Or Urine Sample By Catheterization From An Individual In A Skilled Nursing Facility (Snf) Or By A   | , , ,                       |
| G0471 | Laboratory On Behalf Of A Home Health Agency (Hha)   | \$10.83                     |
| G0498 | Pump/Supplies, With Continuation Of The Infusion In The Community Setting (E.G., Home, Domiciliary, Rest Home Or Assisted Living   | Price By Report             |
|       | Services Performed By A Physical Therapist Assistant In The Home Health Setting In The Delivery Of A Safe And Effective Physical Therapy   |                             |
| G2168 | Maintenance Program, Each 15 Minutes   | Price By Report             |
| 00400 | Services Performed By An Occupational Therapist Assistant In The Home Health Setting In The Delivery Of A Safe And Effective Occupational  | Daire De Descrit            |
|       | Therapy Maintenance Program, Each 15 Minutes  Ultrasonic Guidance For Placement Of Radiation Therapy Fields  | Price By Report<br>\$126.63 |
|       | Stereoscopic X-Ray Guidance For Localization Of Target Volume For The Delivery Of Radiation Therapy  | \$82.90                     |
|       | Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 5 mev  | \$142.04                    |
|       | Radiation Treatment Delivery, Single Treatment Area, Single Port Or Parallel Opposed Ports, Simple Blocks Or No Blocks: 6-10 Mev   | \$127.65                    |
| G6005 | Radiation Treatment Delivery, Single Treatment Area, Single Port Or Parallel Opposed Ports, Simple Blocks Or No Blocks: 11-19 Mev  | \$127.65                    |
|       |  |                             |
| G6006 | Radiation Treatment Delivery, Single Treatment Area, Single Port Or Parallel Opposed Ports, Simple Blocks Or No Blocks: 20 Mev Or Greater  | \$127.65                    |
| 00007 | Padiation Treatment Delivery 2 Separate Treatment Area 2 Or Mare Ports On A Single Treatment Area Use Of Multiple Blocks Up To 5 May   | <b>#</b> 00F 0F             |
| G6007 | Radiation Treatment Delivery, 2 Separate Treatment Areas, 3 Or More Ports On A Single Treatment Area, Use Of Multiple Blocks: Up To 5 Mev  | \$235.25                    |
| G6008 | Radiation Treatment Delivery, 2 Separate Treatment Areas, 3 Or More Ports On A Single Treatment Area, Use Of Multiple Blocks: 6-10 Mev   | \$175.73                    |
|       |  | *                           |
| G6009 | Radiation Treatment Delivery, 2 Separate Treatment Areas, 3 Or More Ports On A Single Treatment Area, Use Of Multiple Blocks: 11-19 Mev  | \$175.40                    |
|       | Radiation Treatment Delivery, 2 Separate Treatment Areas, 3 Or More Ports On A Single Treatment Area, Use Of Multiple Blocks: 20 Mev Or  |                             |
| G6010 |  | \$174.42                    |
| G6011 | Radiation Treatment Delivery,3 Or More Separate Treatment Areas, Custom Blocking, Tangential Ports, Wedges, Rotational Beam, Compensators, Electron Beam; Up To 5 Mev  | \$232.74                    |
| GOOTT | Radiation Treatment Delivery,3 Or More Separate Treatment Areas, Custom Blocking, Tangential Ports, Wedges, Rotational Beam,   | φ232.74                     |
| G6012 | Compensators, Electron Beam; 6-10 Mev  | \$253.87                    |
|       | Radiation Treatment Delivery,3 Or More Separate Treatment Areas, Custom Blocking, Tangential Ports, Wedges, Rotational Beam,   | ·                           |
| G6013 | Compensators, Electron Beam; 11-19 Mev   | \$233.08                    |
|       | Radiation Treatment Delivery,3 Or More Separate Treatment Areas, Custom Blocking, Tangential Ports, Wedges, Rotational Beam,   | ****                        |
| G6014 | Compensators, Electron Beam; 20 Mev Or Greater  Intensity Modulated Treatment Delivery, Single Or Multiple Fields/Arcs, Via Narrow Spatially And Temporally Modulated Beams, Binary, Dynamic   | \$231.77                    |
| G6015 | Intensity Modulated Treatment Delivery, Single Or Multiple Fields/Arcs, via Narrow Spatially And Temporally Modulated Beams, Binary, Dynamic   Mic. Per Treatment Session  | \$353.43                    |
| 00013 | Compensator-Based Beam Modulation Treatment Delivery Of Inverse Planned Treatment Using 3 Or More High Resolution (Milled Or Cast)   | ψ000.40                     |
| G6016 | Compensator, Convergent Beam Modulated Fields, Per Treatment Session   | \$352.98                    |
|       | Intra-Fraction Localization And Tracking Of Target Or Patient Motion During Delivery Of Radiation Therapy (Eg,3D Positional Tracking, Gating,  | ·                           |
|       | 3D Surface Tracking), Each Fraction Of Treatment   | Price By Report             |
|       | Screening For Depression Is Documented As Being Positive And A Follow-Up Plan Is Documented  | \$0.01                      |
| G8510 | Screening For Depression Is Documented As Negative, A Follow-Up Plan Is Not Required  Risk-Adjusted Functional Status Change Residual Score For The Shoulder Impairment Successfully Calculated And The Score Was Less Than  | \$0.01                      |
| G8664 | Risk-Adjusted Functional Status Change Residual Score For The Shoulder Impairment Successfully Calculated And The Score was Less Than [ Zero (< 0)   | Price By Report             |
| G9151 | MAPCP Demonstration - State Provided Services  | \$200.00                    |
|       | MAPCP Demonstration - Community Health Teams   | \$100.00                    |
|       |  |                             |
| K1034 | Provision Of Covid-19 Test, Nonprescription Self-Administered And Self-Collected Use, Fda Approved, Authorized Or Cleared, One Test Count  | Price By Report             |
|       | Administration Of Pneumococcal, Influenza, Hepatitis B, And/Or Covid-19 Vaccine Inside A Patient'S Home; Reported Only Once Per Individual   | <b>*</b> 05.00              |
| M0201 | Home Per Date Of Service When Such Vaccine Administration(S) Are Performed At The Patient'S Home Childrens Care Robot Development Only (Lifercane)   | \$35.86                     |
|       | Childrens Care Rehab Development Only (Lifescape)  Cardiokymography  | \$41.86<br>\$16.25          |
|       | Chemotherapy Administration By Other Than Infusion Technique Only (Eg Subcutaneous, Intramuscular, Push), Per Visit  | Price By Report             |
| Q0084 | Chemotherapy Administration By Infusion Technique Only, Per Visit  | Price By Report             |
|       | Chemotherapy Administration By Both Infusion Technique And Other Techique(S) (Eg Subcutaneous, Intramuscular, Push), Per Visit   | Price By Report             |
| Q0091 | Screening Papanicolaou Smear; Obtaining, Preparing And Conveyance Of Cervical Or Vaginal Smear To Laboratory   | \$29.83                     |
|       | Power Pack Base For Use With Electric Ventricular Assist Device, Replacement Only  | Price By Report             |
|       | Miscellaneous Supply Or Accessory For Use With An External Ventricular Assist Device   | Price By Report             |
| Q0508 | Miscellaneous Supply Or Accessory For Use With An Implanted Ventricular Assist Device  Miscellaneous Supply Or Accessory For Use With Any Implanted Ventricular Assist Device  For Which Devent Was Not Made Under Medicare  | Price By Report             |
| Q0509 | Miscellaneous Supply Or Accessory For Use With Any Implanted Ventricular Assist Device For Which Payment Was Not Made Under Medicare Part A  | Price By Report             |
|       | New Technology Intraocular Lens Category 4 As Defined In Federal Register Notice   | Price By Report             |
| Q1004 | New Technology Intraocular Lens Category 5 As Defined In Federal Register Notice   | Price By Report             |
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| C-4-           | Personalists   | Fac               |
|----------------|--|-------------------|
| Code           | Description Irrigation Solution For Treatment Of Bladder Calculi, For Example Renacidin Per 500Ml                                  | Fee               |
|                | Services, Supplies And Accessories Used In The Home For The Administration Of Intravenous Immune Globulin (Ivig)                   | Price By Report   |
|                | Radioelements For Brachytherapy, Any Type  | Price By Report   |
|                | Telehealth Originating Site Facility Fee   | Price By Report   |
|                | Collagen Skin Test   | \$30.49<br>\$0.01 |
|                | · ·  |                   |
|                | Casting Supplies, Body Cast Adult, With Or Without Head, Plaster   | \$52.38           |
| Q4002          | Cast Supplies, Body Cast Adult, With Or Without Head, Fiberglass   | \$197.90          |
|                | Cast Supplies, Shoulder Cast, Adult (11 Yrs+), Plaster   | \$37.60           |
| Q4004          | Cast Supplies, Shoulder, Adult (11 Years+ ), Fiberglass  | \$130.20          |
|                | Cast Supplies, Long Arm Cast, Adult ( 11 Years+ ), Plaster   | \$13.87           |
| Q4006          | Cast Supplies, Long Arm Cast, Adult (11 Years +), Fiberglass.  | \$32.68           |
| Q4007          | Cast Supplies, Long Arm Cast, Pediatric ( 0-10 Years ), Plaster  | \$6.98            |
|                | Cast Supplies, Long Arm Cast, Pediatric (0 - 10 Years), Fiberglass   | \$41.23           |
|                | Cast Supplies, Short Arm Cast, Adult ( 11 Years +), Plaster  | \$9.32            |
| Q4010          | Cast Supplies, Short Arm Cast, Adult (11 Years +), Fiberglass  | \$22.16           |
| Q4011          | Cast Supplies, Short Arm Cast, Pediatric ( 0-10 Years ), Plaster   | \$4.62            |
| Q4012          | Cast Supplies, Short Arm Cast, Pediatric (0 - 10 Years), Fiberglass  | \$26.42           |
| Q4013          | Cast Supplies, Gauntlet Cast ( Includes Lower Forearm And Hand), Adult ( 11 Years +), Plaster                                      | \$16.86           |
|                | Cast Supplies, Gauntlet Cast (Inculdes Lower Forearm And Hand), Adult (11 Years +), Fiberglass                                     | \$28.59           |
|                | Cast Supplies, Gauntlet Cast (Includes Lower Forearm And Hand ), Pediatric ( 0 -10 Years), Plaster                                 | \$8.44            |
|                | Cast Supplies, Gauntlet Cast (Inculdes Lower Forearm And Hand), Pediatric (0-10 Years), Fiberglass                                 | \$14.30           |
|                | Cast Supplies, Long Arm Splint, Adult (11 Years+), Plaster   | \$9.47            |
|                | Cast Supplies, Long Arm Splint, Adult (11 Years+), Flaster  Cast Supplies, Long Arm Splint, Adult (11 Years+), Fiberglass          | \$15.63           |
|                | Cast Supplies, Long Arm Splint, Addit (11 Tears+), Floerglass  Cast Supplies, Long Arm Splint, Pediatric (0-10 Years), Plaster     |                   |
|                | 11 2 9 1 2 7   | \$4.90            |
|                | Cast Supplies, Long Arm Splint, Pediatric (0-10 Years), Fiberglass   | \$7.82            |
|                | Cast Supplies, Short Arm Splint, Adult (11 Years+), Plaster  | \$7.27            |
|                | Cast Supplies, Short Arm Splint, Adult (11 Years+), Fiberglass   | \$13.10           |
|                | Cast Supplies, Short Arm Splint, Pediatric (0-10 Years), Plaster   | \$3.65            |
|                | Cast Supplies, Short Arm Splint, Pediatric (0-10 Years), Fiberglass  | \$6.55            |
| Q4025          | Cast Supplies, Hip Spica ( One Or Both Legs), Adult (11 Years+), Plaster   | \$40.41           |
| Q4026          | Cast Supplies, Hip Spica (One Or Both Legs), Adult (11 Years+), Fiberglass   | \$126.24          |
| Q4027          | Cast Supplies, Hip Spica (One Or Both Legs), Pediatric (0-10 Years), Plaster   | \$20.23           |
| Q4028          | Cast Supplies, Hip Spica (One Or Both Legs), Pediatric (0-10 Years), Fiberglass  | \$63.16           |
| Q4029          | Cast Supplies, Long Leg Cast, Adult (11 Years+), Plaster   | \$30.92           |
| Q4030          | Cast Supplies, Long Leg Cast, Adult (11 Years+), Fiberglass  | \$81.93           |
|                | Cast Supplies, Long Leg Cast, Pediatric (0-10 Years), Plaster  | \$15.55           |
| Q4032          | Cast Supplies, Long Leg Cast, Pediatric (0-10 Years) Fiberglass  | \$40.96           |
|                | Cast Supplies, Long Leg Cylinder Cast, Adult (11 Years+), Plaster  | \$28.85           |
|                | Cast Supplies, Lond Leg Cylinder Cast, Adult (11 Years+), Fiberglass   | \$69.73           |
|                | Cast Supplies, Long Leg Cylinder Cast, Pediatric (0-10 Years), Plaster   | \$14.42           |
|                | Cast Supplies, Long Leg Cylinder Cast, Pediatric (0-10 Years), Fiberglass  | \$38.52           |
| Q4030          | Cast Supplies Short Leg Cast, Adult (11 Years+), Plaster   |                   |
|                | Cast Supplies Short Leg Cast, Adult (11 Tears+), Flaster  Cast Supplies, Short Leg Cast, Adult (11 Years+), Fiberglass             | \$17.08           |
|                |  | \$44.34           |
| Q4039          | Cast Supplies, Short Leg Cast, Pediatric (0-10 Years), Plaster   | \$8.87            |
|                | Cast Supplies, Short Leg Cast, Pediatric (0-10 Years), Fiberglass  | \$22.19           |
| Q4041          | Cast Supplies, Long Leg Splint, Adult (11 Years+), Plaster   | \$21.53           |
| Q4042          | Cast Supplies, Long Leg Splint, Adult (11 Years+), Fiberglass  | \$36.75           |
| Q4043          | Cast Supplies, Long Leg Splint, Pediatric (0-10 Years), Plaster  | \$10.41           |
| Q4044          | Cast Supplies, Long Leg Splint, Pediatric (0-10 Years), Fiberglass   | \$18.40           |
| Q4045          | Cast Supplies, Short Leg Splint, Adult (11 Years+), Plaster  | \$12.51           |
| Q4046          | Cast Supplies, Short Leg Splint, Adult (11 Years+), Fiberglass   | \$20.10           |
| Q4047          | Cast Supplies, Short Leg Splint, Pediatric (0-10 Years), Plaster   | \$6.24            |
| Q4048          | Cast Supplies, Short Leg Splint, Pediatric (0-10 Years), Fiberglass)   | \$10.05           |
| Q4049          | Finger Splint, Static  | \$2.27            |
| Q4051          | Splint Supplies, Miscellaneous (Includes Thermoplastics, Strapping, Fasteners, Padding And Other Supplies)                         | Price By Report   |
| Q4260          | Signature Apatch, Per Square Centimeter  | Price By Report   |
| Q4261          | Tag, Per Square Centimeter   | Price By Report   |
| Q4305          | American Amnion Ac Tri-Layer, Per Square Centimeter  | Price By Report   |
| Q4306          | American Amnion Ac, Per Square Centimeter  | Price By Report   |
| Q4307          | American Amnion, Per Square Centimeter  American Amnion, Per Square Centimeter   | Price By Report   |
|                | Sanopellis, Per Square Centimeter  |                   |
| Q4308<br>Q4309 | Via Matrix, Per Square Centimeter  | Price By Report   |
|                |  | Price By Report   |
| Q4310          | Procenta, Per 100 Mg   | Price By Report   |
| S0280          | Medical Home Program, Comprehensive Care Coordination And Planning, Initial Plan   | \$100.00          |
| S0281          | Medical Home Program, Comprehensive Care Coordination And Planning, Maintenance Of Plan  | \$50.00           |
| S2083          | Adjustment Of Gastric Band Diameter Via Subcutaneous Port By Injection Or Aspiration Of Saline                                     | Price By Report   |
| S2402          | Repair, Congenital Cystic Adenomatoid Malformation In The Fetus, Procedure Performed In Utero                                      | Price By Report   |
| S5160          | Emergency Response System, Installation And Testing  | \$37.75           |
| S5170          | Home Delivered Meals, Including Preparation Per Meal   | \$10.78           |
|                | Home Infusion Therapy, Catheter Care / Maintenance, Simple (Single Lumen), Includes Administrative Services, Professional Pharmacy |                   |
| S5498          | Services, Care Coordination And All Necessary Supplies And Equipment, (Drugs And Nursing Visits Coded Separately), Pe              | \$73.23           |
|                | 2  | 7. 5.20           |
|                | Home Infusion Therapy, Catheter Care / Maintenance, Complex (More Than One Lumen), Includes Administrative Services, Professional  |                   |
| S5501          | Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe     | \$49.35           |
| S8999          | Resuscitation Bag (For Use By Patient On Artificial Respiration During Power Failure Or Other Catastrophic Event)                  | Price By Report   |
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| Code           | Description   | Fee                  |
|----------------|---|----------------------|
|                | Home Infusion Therapy, Total Parenteral Nutrition (Tpn); Administrative Services, Professional Pharmacy Services, Care Coordination, And All  |                      |
| S9364          | Necessary Supplies And Equipment (Includes Standard Tpn Formula - Lipids, Specialty Amino Acid Formulas, Drugs, And Nu  | Price By Report      |
|                | Medical Foods For Non-Inborn Errors Of Metabolism   | Price By Report      |
| S9433          | Medical Food Nutritionally Complete, Administered Orally, Providing 100% Of Nutritional Intake  | Price By Report      |
| S9434          | Modified Solid Food Supplements For Inborn Errors Of Metabolism   | Price By Report      |
| S9435          | Medical Foods For Inborn Errors Of Metabolism   | \$8.20               |
| S9484          | Crisis Intervention Mental Health Services, Per Hour  | \$31.31              |
| S9500          | Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 24 Hours; Administrative Services, Professional Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe            | \$284.06             |
| S9501          | Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 12 Hours; Administrative Services, Professional Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe            | \$301.82             |
| S9502          | Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 8 Hours, Administrative Services, Professional Pharmacy Services, Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe             | \$346.64             |
|                | Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal; Once Every 6 Hours; Administrative Services, Professional Pharmacy Services,   |                      |
| S9503          | Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal; Once Every 4 Hours; Administrative Services, Professional Pharmacy Services,                     | \$538.62             |
|                | Care Coordination, And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe   | \$505.73             |
|                | Nursing Evaluation Or Assessment  | \$10.00              |
|                | Administration Of Oral, Intramuscular And/Or Subcutaneous Medication By Health Care Agency/Professional, Per Visit  | Price By Report      |
|                | Administration Of Medication, Other Than Oral And/Or Injectable, By A Health Care Agency/Professional, Per Visit  | Price By Report      |
|                | Nonemergency Transportation; Encounter/Trip   | \$525.00             |
|                | Targeted Case Management; Per Month   | Price By Report      |
|                | Frames, Complete  Not Otherwise Classified, Single Vision Lens  | \$72.58              |
| V2199<br>V2221 | Lenticular Lens, Per Lens, Bifocal  | \$39.86<br>\$93.67   |
|                | Specialty Bifocal (By Report)   | \$59.81              |
|                | Specialty Trifocal (By Report)  | \$80.83              |
| V2410          | Variable Asphericity Lens, Single Vision, Full Field, Glass Or Plastic, Per Lens  | \$128.30             |
| V2430          | Variable Asphericity Lens, Bifocal, Full Field, Glass Or Plastic, Per Lens  | \$132.00             |
|                | Contact Lens, Gas Permeable, Spherical, Per Lens  | \$124.25             |
|                | Contact Lens Hydrophilic, Spherical, Per Lens   | \$104.60             |
|                | Contact Lens Hydrophilic, Toric, Or Prism Ballast, Per Lens   | \$202.58             |
| V2524          | Contact Lens, Hydrophilic, Spherical, Photochromic Additive, Per Lens   | \$124.09             |
| V2530          | Contact Lens, Scleral, Per Lens (For Contact Lens Modification, See 92325)  | \$249.56             |
| V2531          | Contact Lens, Scleral, Gas Permeable, Per Lens (For Contact Lens Modification, See 92325)   | \$568.96             |
|                | Contact Lens, Other Type  | \$25.86              |
|                | Prosthetic Eye, Plastic, Custom   | \$1,184.70           |
|                | Polishing/Resurfacing Of Ocular Prosthesis  | \$75.94              |
|                | Enlargement Of Ocular Prosthesis  | \$526.01             |
|                | Reduction Of Ocular Prosthesis  | \$242.70             |
|                | Scleral Cover Shell   | \$1,641.70           |
|                | Fabrication And Fitting Of Ocular Conformer   | \$397.76             |
|                | Anterior Chamber Intraocular Lens   | \$122.38             |
|                | Iris Supported Intraocular Lens Posterior Chamber Intraocular Lens  | \$122.38<br>\$164.99 |
|                | Slab Off Prism, Glass Or Plastic. Per Lens  | \$82.97              |
|                | Prism, Per Lens   | \$82.97<br>\$11.25   |
|                | Press-On Lens, Fresnell Prism, Per Lens   | \$25.98              |
|                | Tint, Photochromatic, Per Lens  | \$17.49              |
|                | Addition To Lens; Tint, Any Color, Solid, Gradient Or Equal, Excludes Photochromatic, Any Lens Material, Per Lens   | \$10.80              |
|                | Anti-Reflective Coating, Per Lens   | \$19.76              |
| V2781          | Progressive Lens, Per Lens  | \$78.36              |
| V2784          | Lens, Polycarbonate Or Equal, Any Index, Per Lens   | \$36.03              |
| V2785          | Processing, Preserving And Transporting Corneal Tissue  | Price By Report      |
| V2799          | Vision Item Or Service, Miscellaneous   | Price By Report      |
|                | Basic Audiologic Asmnt - Hearing Asmnt Including The Measuring Of Hearing Acuit &Tests Relating To Air Conduction, Bone Conduction, Reception Threshold, Speech Discrim, &Acoustic Emittance Tests (Excludes Hearing Aid Asmnt) Childrencare Rehab Develop Only Lifescape | \$167.84             |
|                | Hearing Aid, Monaural, Body Worn, Bone Conduction   | Price By Report      |
|                | Semi-Implantable Middle Ear Hearing Prosthesis  | Price By Report      |
|                | Repair/Modification Of Augmentative Communicative System Or Device (Excludes Adaptive Hearing Aid) See 67:16:29:02.10   | Price By Report      |
| V5362          | Speech Screening  | Price By Report      |
| V5363          | Language Screening  Dynahadia Saraging  | Price By Report      |
| V5364          | Dysphagia Screening   | Price By Report      |