

## South Dakota Medicaid Podiatry Services Fee Schedule

Effective July 1, 2024  
Updated April 1, 2025

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: <https://dss.sd.gov/medicaid/providers/billingmanuals/>. 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**.

Note: The following list of services is not exhaustive. Absence of a specific service on the fee schedule does not mean that service is not covered.

Code	Description	Fee
0240U	Respiratory Infectious Agent Detection By Rna For Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19), Influenza A, And Influenza B) In Upper Respiratory Specimen, Each Reported As Detected Or Not Detected	\$ 142.63
0241U	Respiratory Infectious Agent Detection By Rna For Severe Acute Respiratory Syndrome Coronavirus 2 (Covid 19), Influenza A, Influenza B, And Respiratory Syncytial Virus, Upper Respiratory Specimen, Each Reported As Detected Or Not Detected	\$ 142.63
10060	Simple Or Single Drainage Of Skin Abscess	\$ 112.34
10061	Complicated Or Multiple Drainage Of Skin Abscess	\$ 193.46
10120	Removal Of Foreign Body From Tissue, Accessed Beneath The Skin, Simple	\$ 149.70
10121	Removal Of Foreign Body From Tissue, Accessed Beneath The Skin, Complex	\$ 257.07
10140	Drainage Of Blood Or Fluid Accumulation	\$ 166.11
10160	Aspiration Of Abscess, Blood, Or Cyst	\$ 125.24
10180	Complex Drainage Of Wound Infection After Surgery	\$ 235.90
11010	Debride Skin, Fx	\$ 432.16
11011	Debride Skin/Muscle, Fx	\$ 479.69
11012	Debride Skin/Muscle/Bone, Fx	\$ 700.73
11042	Removal Of Skin And Tissue, 20.0 Sq Cm Or Less	\$ 114.44
11043	Removal Of Muscle And/Or Tissue, 20.0 Sq Cm Or Less	\$ 224.45
11044	Removal Of Bone, 20.0 Sq Cm Or Less	\$ 287.75
11045	Removal Of Skin And Tissue, Each Additional 20.0 Sq Cm Or Less	\$ 38.30
11046	Removal Of Muscle And/Or Tissue, Each Additional 20.0 Sq Cm Or Less	\$ 68.99
11047	Removal Of Bone, Each Additional 20.0 Sq Cm Or Less	\$ 113.30
11055	Removal Of Noncancer Thickened Skin Growth, 1 Growth	\$ 63.56
11056	Removal Of Noncancer Thickened Skin Growth, 2-4 Growths	\$ 73.56
11057	Removal Of Noncancer Thickened Skin Growth, More Than 4 Growths	\$ 80.26
11102	Tangential Biopsy of Single Skin Lesion	\$ 98.65
11103	Tangential Biopsy of Additional Skin Lesion	\$ 44.50
11104	Punch Biopsy of Single Skin Lesion	\$ 110.79
11105	Punch Biopsy of Additional Skin Lesion	\$ 52.52
11106	Incisional Biopsy of Single Skin Lesion	\$ 137.50
11107	Incisional Biopsy of Additional Skin Lesion	\$ 64.22
11400	Removal Of Noncancer Skin Growth Of Body, Arms, Or Legs, 0.5 Cm Or Less	\$ 126.35
11401	Removal Of Noncancer Skin Growth Of Body, Arms, Or Legs, 0.6-1.0 Cm	\$ 144.88
11402	Removal Of Noncancer Skin Growth Of Body, Arms, Or Legs, 1.1-2.0 Cm	\$ 168.85
11403	Removal Of Noncancer Skin Growth Of Body, Arms, Or Legs, 2.1-3.0 Cm	\$ 185.23
11404	Removal Of Noncancer Skin Growth Of Body, Arms, Or Legs, 3.1-4.0 Cm	\$ 196.34
11406	Removal Of Noncancer Skin Growth Of Body, Arms, Or Legs, More Than 4.0 Cm	\$ 294.09
11420	Exc H-F-Nk-Sp B9+Marg 0.5/<	\$ 120.63
11421	Removal Of Skin Lesion 0.5-1.0 Cm	\$ 154.86
11422	Removal Of Skin Lesion 1.0-2.0 Cm	\$ 173.64
11423	Excision Benign Lesion,2.0-3.0 Cm	\$ 180.75
11424	Excision Benign Lesion,3.0-4.0 Cm	\$ 208.25

Code	Description	Fee
11426	Exc H-F-Nk-Sp B9+Marg >4 Cm	\$ 284.63
11720	Debride Nail 1-5	\$ 31.01
11721	Debride Nail 6 Or More	\$ 43.78
11730	Removal Of Nail, Single	\$ 101.99
11732	Remove Nail Plate Add-On	\$ 29.11
11740	Drain Blood From Under Nail	\$ 51.57
11750	Removal Of Nail Bed	\$ 158.44
11755	Biopsy Nail Unit	\$ 108.10
11760	Repair Of Nail Bed	\$ 181.17
11765	Excision Of Nail Fold Toe	\$ 147.94
11900	Inject Skin Lesions </W 7	\$ 54.41
11960	Insertion Of Tissue Expander	\$ 879.04
11971	Removal Of Tissue Expander(S) Without Insertion Of Pros	\$ 475.95
11981	Insert Drug Implant Device	\$ 96.54
11982	Remove Drug Implant Device	\$ 106.24
11983	Remove/Insert Drug Implant	\$ 135.14
12001	Repair Of Wound (2.5 Cm Or Less) Of Legs	\$ 91.25
12020	Simple Closure Of Surface Wound Reopening	\$ 262.76
13131	Repair Complex, Forehead, Cheeks, Chin, Mouth, Neck, Axillae, Genetalia, Hands And/Or Feet; 1.1 cm to 2.5 cm	\$ 353.42
13132	Repair Complex, Forehead, Cheeks, Chin, Mouth, Neck, Axillae, Genetalia, Hands And/Or Feet; 2.6 cm to 7.5 cm	\$ 458.71
13133	Repair Complex, Forehead, Cheeks, Chin, Mouth, Neck, Axillae, Genetalia, Hands And/Or Feet; Each Additional 5 cm Or Less	\$ 161.80
13160	Extensive Or Complicated Repair Of Surface Wound Reopening	\$ 752.66
14040	Adjacent Tissue Transfer Or Rearrangement, Forehead, Cheeks, Chin, Mouth, Neck, Axillae, Genitalia, Hands And/Or Feet; 10 sq cm Or Less	\$ 665.92
14041	Adjacent Tissue Transfer Or Rearrangement, Forehead, Cheeks, Chin, Mouth, Neck, Axillae, Genitalia, Hands And/Or Feet; 10.1 sq cm To 30.0 sq cm	\$ 808.64
14301	Adjacent Tissue Transfer Or Rearrangement, Any Area; Defect 30.1 sq cm To 60.0 sq cm	\$ 1,042.67
14302	Tissue Transfer Repair Of Wound (30.0 Sq Centimeters)	\$ 199.05
14350	Filleted Finger/Toe Flap	\$ 643.50
15002	Wound Prep Trk/Arm/Leg	\$ 329.28
15003	Preparation Of Graft Site At Trunk, Arms, Or Legs	\$ 65.54
15004	Surgical Wound Prep Face, Scalp, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, Feet And/Or Multiple Digits First 100 sq cm Or 1% Of Body Area Of Infants And Children	\$ 340.84
15005	Surgical Wound Prep Face, Scalp, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, Feet And/Or Multiple Digits Each Additional 100 sq cm Or Each Additional 1% Of Body Area Of Infants And Children	\$ 122.68
15011	Harvest Of Skin For Skin Cell Suspension Self Skin Graft, First 25 Sq Cm Or Less	Price by Report
15012	Harvest Of Skin For Skin Cell Suspension Self Skin Graft, Each Additional 25 Sq Cm	Price by Report
15013	Preparation Of Skin Cell Suspension Self Skin Graft, First 25 Sq Cm Or Less Of Harvested Skin	Price by Report
15014	Preparation Of Skin Cell Suspension Self Skin Graft, Each Additional 25 Sq Cm Or Less Of Harvested Skin	Price by Report
15015	Application Of Skin Cell Suspension Self Skin Graft To Wound And Donor Sites To Trunk, Arms, Legs, First 480 Sq Cm Or Less	Price by Report
15016	Application Of Skin Cell Suspension Self Skin Graft To Wound And Donor Sites To Trunk, Arms, Legs, Each Additional 480 Sq Cm	Price by Report
15017	Application Of Skin Cell Suspension Self Skin Graft To Wound And Donor Sites To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Sockets, Genitalia, Hands, Feet, And/Or Multiple Fingers/Toes, First 480 Sq Cm Or Less	Price by Report
15018	Application Of Skin Cell Suspension Self Skin Graft To Wound And Donor Sites To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Sockets, Genitalia, Hands, Feet, And/Or Multiple Fingers/Toes, Each Additional 480 Sq Cm	Price by Report
15120	Partial Thickness Self Skin Graft To Face, Scalp, Eyelids, Mouth, Neck, Ears, Around Eyes, Genitals, Hands, Feet, Fingers, Or Toes, 100.0 Sq Cm Or 1% Body Area For Infants And Children, Or Less	\$ 731.84
15135	Derm Autograft Face, Scalp, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, Feet, And/Or Multiple Digits; First 100 sq cm Or Less, Or 1% Of Body Area Of Infants And Children	\$ 817.09

Code	Description	Fee
15136	Derm Autograft Face, Scalp, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, Feet, And/OR Multiple Digits; Each Additional 100 sq cm, Or Each Additional 1% Of Body Area Of Infants And Children	\$ 87.11
15155	Cultured Skin Autograft, Face, Scalp, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, Feet, And/OR Multiple Digits; First 25 sq cm Or Less	\$ 733.80
15156	Cultured Skin Autograft, Face, Scalp, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, Feet, And/OR Multiple Digits; Additional 1 sq cm To 75 sq cm	\$ 140.72
15157	Cultured Skin Autograft, Face, Scalp, Eyelids, Mouth, Neck, Ears, Orbits, Genitalia, Hands, Feet, And/OR Multiple Digits; Each Additional 100 cm Or Each Additional 1% Of Body Area Of Infants And Children	\$ 156.45
15240	Full Thickness Skin Graft To Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, Or Feet, 20.0 Sq Cm Or Less	\$ 902.76
15271	Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Trunk, Arms, Or Legs (First 25 Sq Cm Or Less)	\$ 149.60
15272	Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Trunk, Arms, Or Legs	\$ 23.60
15275	Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/OR Multiple Fingers Or Toes (First 25 Sq Cm Or Less)	\$ 154.87
15276	Application Of Skin Substitute (Wound Surface Up To 100 Sq Cm) To Face, Scalp, Eyelids, Mouth, Neck, Ears, Eye Region, Genitals, Hands, Feet, And/OR Multiple Fingers Or Toes"	\$ 30.85
15277	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 (First 100 Sq Cm Or 1% Body Area Of Infants And Children)	\$ 325.39
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
15574	Creation Of Flap Graft To Forehead, Cheeks, Chin, Mouth, Neck, Underarms, Genitals, Hands, Or Feet	\$ 818.74
15620	Transfer Of Skin Flap To Forehead, Cheeks, Chin, Neck, Underarms, Genitals, Hands, Or Feet	\$ 421.81
17000	Destroy Benign/PremIlg Lesion	\$ 66.67
17003	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.	\$ 6.66
17110	Destruction (Eg, Laser Surgery, Electrosurgery, Cryosurgery, Chemosurgery, Surgical Curettement), Of Benign Lesions Other Than Skin Tags Or Cutaneous Vascular Proliferative Lesions; Up To 14 Lesions	\$ 101.47
17111	Destruction Of 15 Or More Non-Cancerous Skin Growths	\$ 118.29
17250	Application Of Chemical Agent To Excessive Wound Tissue	\$ 77.01
20220	Biopsy Of Bone Using Needle Or Trocar	\$ 204.65
20240	Biopsy Of Bone, Open Procedure, Superficial	\$ 132.97
20550	Injections Of Tendon Sheath, Ligament, Or Muscle Membrane	\$ 55.86
20551	Injection(S); Single Tendon Origin/Insertion	\$ 55.74
20552	Injection(S); Single Or Multiple Trigger Point(S), One Or Two Muscle(S)	\$ 50.95
20600	Aspiration And/OR Injection Of Small Joint Or Joint Capsule	\$ 52.07
20605	Aspiration And/OR Injection Of Medium Joint Or Joint Capsule	\$ 53.41
20612	Aspiration And/OR Injection Of Ganglion Cyst(S) Any Location	\$ 57.06
20615	Aspiration And Injection For Treatment Of Bone Cyst	\$ 239.52
20670	Removal Of Surface Implant From Bone	\$ 349.96
20680	Removal Of Deep Implant From Bone	\$ 581.03
20690	Placement Of Single Direction External Bone Stabilizing Device To Arm Or Leg	\$ 508.61
20692	Placement Of Multiple Direction External Bone Stabilizing Device To Arm Or Leg	\$ 1,075.52
20693	Revision Of External Bone Stabilizing Device Under Anesthesia	\$ 408.03
20694	Removal Of External Bone Stabilizing Device Under Anesthesia	\$ 378.02
27603	Incision And Drainage; Deep Abscess Or Hematoma	\$ 456.96
27604	Incision And Drainage; Infected Bursa	\$ 424.01
27605	Incision Of Achilles Tendon, Accessed Through The Skin Using Local Anesthetic	\$ 290.93
27606	Incision Of Achilles Tendon, Accessed Through The Skin Requiring General Anesthesia	\$ 258.00
27607	Incision (Eg, Osteomyelitis Or Bone Abscess), Leg Or Ankle	\$ 555.02
27610	Exploration, Drainage, Or Removal Of Foreign Body Of Ankle	\$ 618.24

Code	Description	Fee
27612	Arthrotomy, Posterior Capsular Release, Ankle, With Or Without Achilles Tendon Lengthening	\$ 552.49
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	\$ 1,138.57
27618	Excision, Tumor, Soft Tissue Of Leg Or Ankle Area, Subcutaneous; Less Than 3 Cm	\$ 433.97
27619	Excision, Tumor, Soft Tissue Of Leg Or Ankle Area, Subfascial (Eg, Intramuscular); Less Than 5 Cm	\$ 451.20
27620	Arthrotomy, Ankle, With Joint Exploration, With Or Without Biopsy, With Or Without Removal Of Loose Or Foreign Body	\$ 434.70
27625	Arthrotomy, Ankle, With Synovectomy;	\$ 552.82
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	\$ 435.52
27634	Excision Of Lesion Of Tendon Sheath Or Capsule (Eg, Cyst Or Ganglion), Leg And/Or Ankle 5 Cm Or Greater	\$ 613.42
27638	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tibia Or Fibula; With Primary Homogenous Graft	\$ 709.55
27640	Partial Excision (Craterization, Saucerization, Or Diaphysectomy), Bone (Eg, Osteomyelitis); Tibia	\$ 791.84
27641	Partial Excision (Craterization, Saucerization, Or Diaphysectomy), Bone (Eg, Osteomyelitis); Fibula	\$ 598.63
27647	Radical Resection Of Tumor; Talus Or Calcaneus	\$ 922.40
27648	Injection Procedure For Ankle Arthrography	\$ 194.99
27650	Repair Of Ruptured Achilles Tendon, Open Or Through Skin Procedure	\$ 634.34
27652	Repair Of Ruptured Achilles Tendon With Graft, Open Or Through Skin Procedure	\$ 610.27
27654	Repair, Secondary, Achilles Tendon, With Or Without Graft	\$ 689.71
27658	Repair Of Leg Tendon On The Back Side Of The Leg (Flexor), Primary, Without Graft	\$ 359.13
27659	Repair Of Leg Tendon On The Back Side Of The Leg (Flexor), Secondary With Or Without Graft	\$ 457.93
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)	\$ 440.16
27691	Transfer Or Transplant Of Single Tendon (With Muscle Redirection Or Rerouting); Deep (Eg, Anterior Tibial Or Posterior Tibial Through Interosseous Space, Flexor Digitorum Longus, Flexor Hallucis Longus, Or Peroneal Tendon To Midfoot Or Hindfoot)	\$ 713.63
27692	Transplant Of Tendon And Muscle Rerouting At Lower Leg Or Ankle, Additional Tendon	\$ 94.07
27695	Repair Of Disrupted Collateral Ligament Of Ankle, Primary	\$ 470.52
27696	Primary Repair Of Disruption Of Both Ankle Ligaments	\$ 530.07
27698	Repair Of Disrupted Collateral Ligament Of Ankle, Secondary	\$ 612.13
27700	Arthroplasty, Ankle;	\$ 611.58
27702	Arthroplasty, Ankle; With Implant ("Total Ankle")	\$ 912.36
27703	Arthroplasty, Ankle; Revision, Total Ankle	\$ 1,007.98
27704	Removal Of Ankle Implant	\$ 524.74
27750	Closed Treatment Of Tibial Shaft Fracture (With Or Without Fibular Fracture); Without Manipulation	\$ 348.38
27758	Open Treatment Of Tibial Shaft Fracture, (With Or Without Fibular Fracture) With Plate/Screws, With Or Without Cerclage	\$ 851.76
27760	Closed Treatment Of Inside Portion Of The Leg (Tibial) Bone Of The Ankle Without Manipulation	\$ 322.84
27762	Closed Treatment Of Inside Portion Of The Leg (Tibial) Bone Of The Ankle With Manipulation	\$ 433.56
27766	Open Treatment Of The Inside Prominence Of Bone Of The Leg (Fibula) In The Region Of The Ankle	\$ 582.50
27767	Closed Treatment Of Back Portion Of The Leg (Tibial) Bone Of The Ankle Without Manipulation	\$ 263.08

Code	Description	Fee
27768	Closed Treatment Of Back Portion Of The Leg (Tibial) Bone Of The Ankle With Manipulation	\$ 417.48
27769	Open Treatment Of The Prominence Of The Ankle Located In The Back Of The Ankle	\$ 693.26
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	\$ 315.11
27788	Closed Treatment Of The Outside Bone Of The Leg (Fibula) In The Region Of The Ankle With Manipulation	\$ 379.50
27792	Open Treatment Of The Outside Prominence Of Bone Of The Leg (Fibula) In The Region Of The Ankle	\$ 619.77
27808	Treatment Of Ankle Fracture	\$ 304.61
27810	Repair Of Ankle Fracture	\$ 421.82
27814	Open Treatment Of Prominences Of Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle Without Hardware Fixation	\$ 729.97
27816	Treatment Of Ankle Fracture	\$ 300.05
27818	Repair Of Ankle Fracture	\$ 485.56
27822	Open Treatment Of All Three Prominences Of The Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle	\$ 837.43
27823	Open Treatment Of Prominences Of Both Bones Of The Leg (Tibia And Fibula) In The Region Of The Ankle With Hardware Fixation	\$ 940.05
27824	Closed Treatment Of Fracture Of Weight Bearing Articular Portion Of Distal Tibia (Eg, Pilon Or Tibial Plafond), With Or Without Anesthesia; Without Manipulation	\$ 283.80
27825	Closed Treatment Of Fracture Of Weight Bearing Articular Portion Of Distal Tibia (Eg, Pilon Or Tibial Plafond), With Or Without Anesthesia; With Skeletal Traction And/Or Requiring Manipulation	\$ 479.47
27826	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Fibula (Smaller Lower Leg Bone)	\$ 773.92
27827	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Shin Bone	\$ 961.61
27828	Open Treatment Of Fracture Of Lower Weight Bearing Joint Of Both Lower Leg Bones	\$ 1,258.69
27829	Open Treatment Of Distal Tibiofibular Joint (Syndesmosis) Disruption, Includes Internal Fixation, When Performed	\$ 613.15
27830	Closed Treatment Of Proximal Tibiofibular Joint Dislocation; Without Anesthesia	\$ 366.86
27831	Treatment Of Proximal Tibiofibular Joint Dislocation; Requiring Anesthesia	\$ 380.33
27832	Open Treatment Of Proximal Tibiofibular Joint Dislocation, Includes Internal Fixation, When Performed, Or With Excision Of Proximal Fibula	\$ 692.49
27840	Closed Treatment Of Ankle Dislocation; Without Anesthesia	\$ 341.55
27842	Closed Treatment Of Ankle Dislocation; Requiring Anesthesia, With Or Without Percutaneous Skeletal Fixation	\$ 430.85
27846	Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; Without Repair Or Internal Fixation	\$ 662.01
27848	Open Treatment Of Ankle Dislocation, With Or Without Percutaneous Skeletal Fixation; With Repair Or Internal Or External Fixation	\$ 752.78
27860	Manipulation Of Ankle Under General Anesthesia (Includes Application Of Traction Or Other Fixation Apparatus)	\$ 156.50
27870	Fusion Of Ankle Joint, Open Procedure	\$ 957.81
27871	Arthrodesis, Tibiofibular Joint, Proximal Or Distal	\$ 660.73
27888	Amputation, Ankle, Through Malleoli Of Tibia And Fibula (Eg, Syme, Pirogoff Type Procedures), With Plastic Closure And Resection Of Nerves	\$ 581.41
27889	Amputation Of Foot Through Ankle Joint	\$ 566.51
28001	Drainage Of Fluid-Filled Sac (Bursa) Of Foot, Superficial	\$ 165.02
28002	Drainage Of Fluid-Filled Sac (Bursa) Of Foot, Deep	\$ 239.85
28003	Deep Infection, Below Fascia, Requiring Deep Dissection, With Or Without Tendon Sheath Involvement; Multiple Areas	\$ 364.76
28005	Incision, Bone Cortex (Eg, Osteomyelitis Or Bone Abscess), Foot	\$ 499.34
28008	Fasciotomy, Foot And/Or Toe	\$ 376.78
28010	Repair Of Toe Tendon, Accessed Through The Skin	\$ 207.78
28011	Repair Of Multiple Toe Tendons, Accessed Through The Skin	\$ 293.96
28020	Incision Of Foot Bone At Ankle Joint With Exploration, Drainage, Or Removal Of Foreign Body	\$ 519.10
28022	Exploration, Drainage, Or Removal Of Foreign Body Of Foot	\$ 428.30
28024	Exploration, Drainage, Or Removal Of Foreign Body Of Toe Joint	\$ 408.08
28035	Release, Tarsal Tunnel (Posterior Tibial Nerve Decompression)	\$ 468.26

Code	Description	Fee
28039	1.5 Cm Or Greater	\$ 464.46
28041	Excision, Tumor, Soft Tissue Of Foot Or Toe, Subfascial (Eg, Intramuscular); 1. 5 Cm Or Greater	\$ 436.22
28043	Excision, Tumor, Soft Tissue Of Foot Or Toe, Subcutaneous; Less Than 1.5 Cm	\$ 341.42
28045	Excision, Tumor, Soft Tissue Of Foot Or Toe, Subfascial (Eg, Intramuscular); Less Than 1.5 Cm	\$ 450.66
28046	Removal (Less Than 3 Centimeters) Tissue Growth Of Foot Or Toe	\$ 655.34
28050	Biopsy Through A Joint Opening In The Midfoot	\$ 394.00
28052	Biopsy Through A Joint Opening In The Toe/Forefoot Joint	\$ 369.69
28054	Arthrotomy For Synovial Biopsy; Interphalangeal Joint	\$ 348.19
28055	Neurectomy, Intrinsic Musculature Of Foot	\$ 354.44
28060	Fasciectomy, Plantar Fascia; Partial (Separate Procedure)	\$ 455.72
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
28080	Excision, Interdigital (Morton) Neuroma, Single, Each	\$ 471.10
28086	Removal Of Lining Of The Foot Tendon On The Under Surface Of The Foot	\$ 506.32
28088	Removal Of Lining Of The Foot Tendon On The Upper Surface Of The Foot	\$ 431.76
28090	Excision Of Lesion, Tendon, Tendon Sheath, Or Capsule (Including Synovectomy) (Eg, Cyst Or Ganglion); Foot	\$ 410.72
28092	Excision Of Lesion, Tendon, Tendon Sheath, Or Capsule (Including Synovectomy) (Eg, Cyst Or Ganglion); Toe(S), Each	\$ 375.27
28100	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus;	\$ 554.86
28102	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus; With Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)	\$ 560.82
28103	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Talus Or Calcaneus; With Homogenous Bone Graft	\$ 360.75
28104	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tarsal Or Metatarsal, Except Talus Or Calcaneus;	\$ 464.03
28106	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Tarsal Or Metatarsal Bones, Except Talus Or Calcaneus; With Iliac Or Other 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
28108	Excision Or Curettage Of Bone Cyst Or Benign Tumor, Phalanges;	\$ 411.03
28110	Ostectomy, Partial Excision, Fifth Metatarsal Head (Bunionette) (Separate Procedure)	\$ 408.28
28111	Ostectomy; Complete Excision Of First Metatarsal Head	\$ 463.65
28112	Removal Of Bones At Second, Third, Or Fourth Toe Joints	\$ 424.24
28113	Ostectomy; Fifth Metatarsal Head	\$ 515.15
28114	Ostectomy, Complete Excision; All Metatarsal Heads, With Partial Proximal Phalangectomy, Excluding First Metatarsal (Eg, Clayton Type Procedure)	\$ 995.58
28116	Ostectomy, Excision Of Tarsal Coalition	\$ 688.70
28118	Ostectomy, Calcaneus; Partial (Cotton Scoop Type Procedure)	\$ 588.96
28119	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	\$ 585.89
28122	Partial Removal Of Foot Or Heel Bone For Bone Infection In The Midfoot Area	\$ 519.75
28124	Partial Excision (Craterization, Saucerization, Sequestrectomy, Or Diaphysectomy) Bone (Eg, Osteomyelitis Or Bossing); Phalanx Of Toe	\$ 421.28
28126	Resection, Partial Or Complete, Phalangeal Base, Each Toe	\$ 344.73
28130	Talectomy (Astragalectomy)	\$ 598.33
28140	Metatarsectomy	\$ 493.88
28150	Phalangectomy, Toe, Each Toe	\$ 394.36
28153	Resection, Condyle(S), Distal End Of Phalanx, Each Toe	\$ 385.84
28160	Hemiphalangectomy Or Interphalangeal Joint Excision, Toe, Proximal End Of Phalanx, Each	\$ 389.34
28171	Extensive Removal Of Bone Growth, Middle Portion Of Foot	\$ 1,000.26
28173	Radical Resection Of Tumor; Metatarsal	\$ 671.66
28175	Radical Resection Of Tumor; Phalanx Of Toe	\$ 435.24
28190	Removal Of Foreign Body Of Foot Tissue, Accessed Beneath The Skin	\$ 236.22
28192	Removal Of Foreign Body Of Foot Tissue, Deep	\$ 403.90
28193	Removal Of Foreign Body Of Foot Tissue, Complicated	\$ 458.03
28200	Repair Of Foot Tendon On The Sole Of The Foot Without A Graft	\$ 434.59

Code	Description	Fee
28202	Repair Of Foot Tendon On The Sole Of The Foot With A Graft	\$ 560.40
28208	Repair Of Foot Tendon On The Top Side Of The Foot Without A Graft	\$ 426.50
28210	Repair Of Foot Tendon On The Top Side Of The Foot With A Graft	\$ 550.82
28220	Release Of Single Foot Tendon On The Bottom Side Of The Foot (Flexor Tendon)	\$ 425.78
28222	Tenolysis, Flexor, Foot; Multiple Tendons	\$ 490.49
28225	Release Of Single Foot Tendon On The Top Side Of The Foot (Extensor)	\$ 404.87
28226	Tenolysis, Extensor, Foot; Multiple Tendons	\$ 582.54
28230	Incision To Lengthen Foot Tendons, Open Procedure	\$ 409.19
28232	Incision To Lengthen Toe Tendon, Open Procedure	\$ 333.21
28234	Incision To Release Foot Tendon, Open Procedure	\$ 364.37
28238	Reconstruction (Advancement), Posterior Tibial Tendon With Excision Of Accessory Tarsal Navicular Bone (Eg, Kidner Type Procedure)	\$ 652.69
28240	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
28261	Capsulotomy, Midfoot; With Tendon Lengthening	\$ 929.60
28262	Capsulotomy, Midfoot; Extensive, Including Posterior Talotibial Capsulotomy And Tendon(S) Lengthening (Eg, Resistant Clubfoot Deformity)	\$ 1,182.35
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)	\$ 475.31
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	\$ 531.53
28289	Correction Of Rigid Deformity Of First Joint Of Big Toe	\$ 671.93
28292	Correction Of Bunion	\$ 616.03
28296	Correction Of Bunion With Alignment Correction Of Midfoot Bone Toward Toe Area	\$ 780.25
28297	Correction Of Bunion With Forefoot And Midfoot Bone Fusion	\$ 897.91
28298	Correction Of Bunion With Alignment Correction Of Big Toe	\$ 733.96
28299	Correction Of Bunion With 2 Areas Of Realignment	\$ 889.85
28300	Osteotomy; Calcaneus (Eg, Dwyer Or Chambers Type Procedure), With Or Without Internal Fixation	\$ 623.67
28302	Osteotomy; Talus	\$ 654.30
28304	Osteotomy, Tarsal Bones, Other Than Calcaneus Or Talus;	\$ 720.72
28305	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	\$ 535.05
28307	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	\$ 502.59
28309	Osteotomy, With Or Without Lengthening, Shortening Or Angular Correction, Metatarsal; Multiple (Eg, Swanson Type Cavus Foot Procedure)	\$ 815.39
28310	Incision To Straighten Big Toe Bone At The First Toe Bone Level	\$ 481.52
28312	Incision To Straighten Toe Bone (Other Than The Big Toe) At Toe Bone Level	\$ 489.37
28313	Reconstruction, Angular Deformity Of Toe, Soft Tissue Procedures Only (Eg, Overlapping Second Toe, Fifth Toe, Curly Toes)	\$ 496.40
28315	Sesamoidectomy, First Toe (Separate Procedure)	\$ 420.46
28320	Repair Of Non-Healed Midfoot Bone	\$ 592.39
28322	Repair Of Non-Healed Forefoot Bone	\$ 732.80
28340	Reconstruction Of Abnormal Toe, Without Bone Removal	\$ 533.97
28341	Reconstruction Of Abnormal Toe, With Bone Removal	\$ 617.85
28344	Reconstruction, Toe(S) Polydactyly	\$ 370.40
28345	Reconstruction, Toe(S) Syndactyly, With Or Without Skin Graft(S), Each Web	\$ 457.39
28360	Reconstruction, Cleft Foot	\$ 1,002.08
28400	Closed Treatment Of Calcaneal Fracture; Without Manipulation	\$ 224.02
28405	Closed Treatment Of Calcaneal Fracture; With Manipulation	\$ 401.84
28406	Insertion Of Hardware To Broken Heel Bone With Manipulation, Accessed Through The Skin	\$ 525.42

Code	Description	Fee
28415	Open Treatment Of Calcaneal Fracture, Includes Internal Fixation, When Performed;	\$ 965.09
28420	Open Treatment Of Calcaneal Fracture, Includes Internal Fixation, When Performed; With Primary Iliac Or Other Autogenous Bone Graft (Includes Obtaining Graft)	\$ 1,186.88
28430	Closed Treatment Of Talus Fracture; Without Manipulation	\$ 216.83
28435	Treatment Of Closed Talus Fracture; With Manipulation	\$ 331.58
28436	Insertion Of Hardware To Broken Ankle Joint With Manipulation, Accessed Through The Skin	\$ 465.59
28445	Open Treatment Of The Bone That Connects The Foot To The Ankle	\$ 899.51
28446	Implantation Of Donor Cartilage Cells Into Foot Joint With Grafts, Open Procedure	\$ 1,109.61
28450	Treatment Of Broken Foot Bone Without Manipulation	\$ 191.53
28455	Treatment Of Broken Foot Bone With Manipulation	\$ 255.83
28456	Insertion Of Hardware To Broken Foot Joint With Manipulation, Accessed Through The Skin	\$ 351.82
28465	Open Treatment Of Fracture Of The Hind Portion Of The Foot	\$ 559.53
28470	Closed Treatment Of Broken Foot Bone In The Fore Or Midfoot Without Manipulation	\$ 219.39
28475	Treatment Of Closed Metatarsal Fracture; With Manipulation, Each	\$ 234.02
28476	Insertion Of Hardware To Broken Foot Bone With Manipulation, Accessed Through The Skin	\$ 383.14
28485	Open Treatment Of Fracture Of The Mid Portion Of The Foot	\$ 495.35
28490	Closed Treatment Of Fracture Great Toe, Phalanx Or Phalanges; Without Manipulation	\$ 128.85
28495	Treatment Of Closed Fracture Great Toe, Phalanx Or Phalanges; With Manipulation	\$ 169.39
28496	Insertion Of Hardware To Broken Great Toe With Manipulation, Accessed Through The Skin	\$ 448.21
28505	Open Treatment Of Fracture, Great Toe, Phalanx Or Phalanges, Includes Internal Fixation, When Performed	\$ 571.06
28510	Closed Treatment Of Fracture, Phalanx Or Phalanges, Other Than Great Toe; Without Manipulation, Each	\$ 110.05
28515	Treatment Of Closed Fracture, Phalanx Or Phalanges, Other Than Great Toe; With Manipulation, Each	\$ 149.64
28525	Open Treatment Of Fracture, Phalanx Or Phalanges, Other Than Great Toe, Includes Internal Fixation, When Performed, Each	\$ 503.96
28530	Closed Treatment Of A Small Bone In A Tendon In The Foot	\$ 107.75
28531	Open Treatment Of Fracture Of Fracture Of A Small Bone Within A Tendon In The Foot	\$ 314.70
28540	Closed Treatment Of Tarsal Bone Dislocation, Other Than Talotarsal; Without Anesthesia	\$ 184.97
28545	Treatment Of Closed Tarsal Bone Dislocation; Requiring Anesthesia	\$ 291.08
28546	Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin, Other Than The Ankle (Talus) To The Midfoot (Tarsal) Bones	\$ 559.97
28555	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
28576	Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin Of The Ankle (Talus) With The Midfoot (Tarsal) Bones	\$ 354.49
28585	Open Treatment Of Dislocation Foot Joint Within The Midfoot Bones	\$ 827.44
28600	Closed Treatment Of Dislocated Midfoot Without Anesthesia	\$ 188.78
28605	Closed Treatment Of Dislocated Midfoot With Anesthesia	\$ 308.13
28606	Insertion Of Hardware To Foot Joint Dislocation With Manipulation, Accessed Through The Skin Of The Midfoot (Tarsal) Bones Joint With The Forefoot (Metatarsal) Bones	\$ 381.14
28615	Open Treatment Of Dislocation At The Connection Of The Midfoot To The Forefoot	\$ 720.40
28630	Closed Treatment Of Metatarsophalangeal Joint Dislocation; Without Anesthesia	\$ 136.71
28635	Treatment Of Closed Metatarsophalangeal Joint Dislocation; Requiring Anesthesia	\$ 163.51
28636	Insertion Of Hardware To Foot Bone Dislocation With Manipulation, Accessed Through The Skin	\$ 311.09
28645	Open Treatment Of Metatarsophalangeal Joint Dislocation, Includes Internal Fixation, When Performed	\$ 574.05
28660	Closed Treatment Of Interphalangeal Joint Dislocation; Without Anesthesia	\$ 111.20
28665	Treatment Of Closed Interphalangeal Joint Dislocation; Requiring Anesthesia	\$ 141.26
28666	Insertion Of Hardware To Toe Joint Dislocation With Manipulation, Accessed Through The Skin	\$ 167.53
28675	Open Treatment Of Interphalangeal Joint Dislocation, Includes Internal Fixation, When Performed	\$ 511.42
28705	Fusion Of All Bones Of The Ankle And Hindfoot	\$ 1,114.21
28715	Fusion Of Three Major Bones Of The Hindfoot	\$ 897.72
28725	Fusion Of Foot Below The Ankle, Simple	\$ 746.40
28730	Fusion Of Multiple Foot Joints Without A Bone Incision	\$ 697.08



Code	Description	Fee
28737	Fusion Of Foot Below The Ankle, Complex	\$ 664.31
28740	Fusion Of Foot In The Midfoot Region	\$ 720.67
28750	Fusion Of Great Toe At The Joint With The Foot	\$ 680.76
28755	Fusion Of Great Toe, Between The Toe Joints	\$ 447.72
28760	Fusion Of Great Toe, Between The Toe Joints With Tendon Transfer	\$ 716.09
28800	Amputation Of Midfoot Bone	\$ 508.24
28805	Amputation Of Foot Across Instep	\$ 604.79
28810	Amputation Of Toe And Midfoot Bone	\$ 403.72
28820	Amputation Of Toe At Joint Between The Forefoot And Toes	\$ 287.49
28825	Amputation Of Toe At Toe Joints	\$ 254.74
28890	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	\$ 307.06
28899	Unlisted Procedure, Foot Or Toes	Price by Report
29345	Application Of Long Leg Cast (Thigh To Toes);	\$ 132.13
29405	Application Of Short Leg Cast (Below Knee To Toes);	\$ 79.21
29425	Application Of Short Leg Cast (Below Knee To Toes), Walking Or Ambulatory Type	\$ 74.50
29445	Application Of Rigid Total Contact Leg Cast	\$ 125.04
29450	Application Of Clubfoot Cast With Molding Or Manipulation, Long Or Short Leg	\$ 142.07
29515	Application Of Short Leg Splint (Calf To Foot)	\$ 71.30
29540	Strapping; Ankle And/Or Foot	\$ 27.34
29550	Strapping; Toes	\$ 17.89
29580	Strapping, Unna Boot	\$ 56.22
29730	Windowing Of Cast	\$ 56.91
29799	Unlisted Procedure, Casting Or Strapping	Price by Report
29893	Endoscopic Plantar Fasciotomy	\$ 602.01
29895	Partial Removal Of Ankle Joint Lining Using An Endoscope With Removal Of The Joint Lining	\$ 446.04
29897	Arthroscopy, Ankle, Surgical; Debridement, Limited	\$ 475.91
29898	Arthroscopy, Ankle, Surgical; Debridement, Extensive	\$ 539.05
35860	Exploration Of Arm Or Leg For Postsurgical Bleeding, Blood Clot, Or Infection	\$ 680.68
36415	Collection Of Venous Blood By Venipuncture	\$ 8.83
36416	Puncture Of Skin For Collection Of Blood Sample	\$ 4.85
37618	Ligation, Major Artery (Eg, Post-Traumatic, Rupture); Extremity	\$ 360.84
64450	Injection Of Anesthetic Agent And/Or Steroid Into Other Peripheral Nerve Or Branch	\$ 73.38
64455	Injections Of Anesthetic And/Or Steroid Drug Into Nerve Of Foot	\$ 48.70
64632	Destruction By Neurolytic Agent; Plantar Common Digital Nerve	\$ 84.85
64640	Destruction By Neurolytic Agent Other Peripheral Nerve Or Branch	\$ 219.60
64708	Release Of Arm Or Leg Nerve	\$ 493.77
73590	X-Ray Of Lower Leg, 2 Views	\$ 31.21
73600	X-Ray Of Ankle, 2 Views	\$ 30.43
73610	X-Ray Of Ankle, Minimum Of 3 Views	\$ 32.94
73620	X-Ray Of Foot, 2 Views	\$ 28.22
73630	X-Ray Of Foot, Minimum Of 3 Views	\$ 32.94
73650	X-Ray Of Heel, Minimum Of 2 Views	\$ 28.22
73660	X-Ray Of Toes, Minimum Of 2 Views	\$ 25.99
73700	Computed Tomography, Lower Extremity; Without Contrast Material	\$ 131.25
73701	Computerized Axial Tomography, Lower Extremity; With Contrast Material(S)	\$ 169.12
73702	Computerized Axial Tomography, Lower Extremity; Without Contrast Material, Followed By Contrast Material(S) And Further Sections	\$ 198.41
73721	Magnetic Resonance (Eg, Proton) Imaging, Any Joint Of Lower Extremity; Without Contrast Material	\$ 206.20
76882	Limited Ultrasound Scan Of Joint Or Other Extremity Structure Except Blood Vessels	\$ 56.00
76942	Ultrasonic Guidance For Needle Placement (Eg, Biopsy, Aspiration, Injection, Localization Device), Imaging Supervision And Interpretation	\$ 57.10
77071	Manual Application Of Stress Performed By Physician Or Other Qualified Health Care Professional For Joint Radiography, Including Contralateral Joint If Indicated	\$ 48.13
81025	Urine Pregnancy Test, By Visual Color Comparison Method	\$ 8.61
82948	Glucose,Blood,Stick Test	\$ 5.04
83036	Hemoglobin, Glycosylated	\$ 9.71
84134	Assay Of Prealbumin	\$ 14.59

Code	Description	Fee
86140	C-Reactive Protein	\$ 5.18
86328	Test For Detection Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Antibody, Qualitative Or Semiquantitative	\$ 45.28
86408	Screening Test For Detection Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Neutralizing Antibody	\$ 42.13
86409	Measurement Of Neutralizing Antibody To Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19)	\$ 86.93
86413	Quantitative Measurement Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Antibody	\$ 56.16
87101	Culture,Fungi,Isolation;Skin	\$ 7.71
87102	Culture,Fungi,Isolation;Other Source	\$ 8.41
87426	Detection Test By Immunoassay Technique For Severe Acute Respiratory Syndrome Coronavirus	\$ 35.33
87428	Detection Test By Immunoassay Technique For Severe Acute Respiratory Syndrome Coronavirus And Influenza	\$ 33.79
87635	Amplified Dna Or Rna Probe Detection Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Antigen	\$ 51.31
87636	Detection Test By Multiplex Amplified Probe Technique For Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Covid-19) And Influenza Virus Types A And B	\$ 142.63
87637	Detection Test By Multiplex Amplified Probe Technique For Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Covid-19), Influenza Virus Types A And B, And Respiratory Syncytial Virus	\$ 142.63
87811	Detection Test By Immunoassay With Direct Visual Observation For Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19)	\$ 41.38
91304	Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Vaccine, Recombinant Spike Protein Nanoparticle, Saponin-Based Adjuvant, 5 Mcg/0.5MI Dosage, For Intramuscular Use	\$ 148.20
91318	Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Vaccine, Mrna-Lnp, Spike Protein, 3 Mcg/0.3 MI Dosage, Tris-Sucrose Formulation, For Intramuscular Use	\$ 65.55
91319	Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Vaccine, Mrna-Lnp, Spike Protein, 10 Mcg/0.3 MI Dosage, Tris-Sucrose Formulation, For Intramuscular Use	\$ 87.78
91320	Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Vaccine, Mrna-Lnp, Spike Protein, 30 Mcg/0.3 MI Dosage, Tris-Sucrose Formulation, For Intramuscular Use	\$ 131.10
91321	Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Vaccine, Mrna-Lnp, 25 Mcg/0.25 MI Dosage, For Intramuscular Use	\$ 145.92
91322	Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Vaccine, Mrna-Lnp, 50 Mcg/0.5 MI Dosage, For Intramuscular Use	\$ 145.92
93922	Ultrasound Study Of Arm And Leg Arteries	\$ 81.19
93923	Ultrasound Study Of Arteries Of Both Arms And Legs, Complete	\$ 128.30
96372	Injection Beneath The Skin Or Into Muscle For Therapy, Diagnosis, Or Prevention	\$ 12.70
97014	Application Of Electrical Stimulation To 1 Or More Areas, Unattended By Physical Therapist	\$ 10.36
97022	Physical Medicine Treatment To One Area Whirlpool	\$ 15.09
97026	Physical Medicine Treatment To One Area Infrared	\$ 8.06
97032	Application Of Electrical Stimulation With Therapist Present, Each 15 Minutes	\$ 14.11
97035	Application Of Ultrasound, Each 15 Minutes	\$ 15.50
97597	Removal Of Tissue From Wound, 20.0 Sq Cm Or Less	\$ 89.67
97598	Removal Of Tissue From Wound, Each Additional 20.0 Sq Cm	\$ 43.70
97605	Therapy Procedure Using A Special Bandage And Vacuum Pump, Surface Area 50.0 Sq Cm Or Less	\$ 42.74
97606	Therapy Procedure Using A Special Bandage And Vacuum Pump, Surface Area More Than 50.0 Sq Cm	\$ 50.72
97607	Therapy Procedure Using A Special Bandage, Vacuum Pump And Disposable Medical Equipment, Surface Area 50.0 Sq Cm Or Less	\$ 311.96
98966	Telephone Discussion Provided To An Established Patient By Nonphysician Professional, 5-10 Minutes	\$ 49.71
98967	Telephone Discussion Provided To An Established Patient By Nonphysician Professional, 11-20 Minutes	\$ 79.82
98968	Telephone Discussion Provided To An Established Patient By Nonphysician Professional, 21-30 Minutes	\$ 112.75
99070	Supplies And Materials (Except Spectacles), Provided By The Physician Or Other Qualified Health Care Professional Over And Above Those Usually Included With The Office Visit Or Other Services Rendered (List Drugs, Trays, Supplies, Or Materials Provided)	\$ 0.01

Code	Description	Fee
99202	New Patient Office Or Other Outpatient Visit With Straightforward Medical Decision Making, If Using Time, 15 Minutes Or More	\$ 63.53
99203	New Patient Office Or Other Outpatient Visit With Low Level Of Medical Decision Making, If Using Time, 30 Minutes Or More	\$ 97.40
99204	New Patient Office Or Other Outpatient Visit With Moderate Level Of Medical Decision Making, If Using Time, 45 Minutes Or More	\$ 145.95
99205	New Patient Office Or Other Outpatient Visit With A High Level Of Medical Decision Making, If Using Time, 60 Minutes Or More	\$ 192.21
99211	Established Patient Outpatient Visit, Minimal Presenting Problem	\$ 20.79
99212	Established Patient Office Or Other Outpatient Visit With Straightforward Medical Decision Making, If Using Time, 10 Minutes Or More	\$ 49.82
99213	Established Patient Office Or Other Outpatient Visit With Low Level Od Decision Making, If Using Time, 20 Minutes Or More	\$ 79.94
99214	Established Patient Office Or Other Outpatient Visit With Moderate Level Of Decision Making, If Using Time, 30 Minutes Or More	\$ 112.75
99215	Established Patient Office Or Other Outpatient Visit With High Level Of Medical Decision Making, If Using Time, 40 Minutes Or More	\$ 158.30
99221	Initial Hospital Inpatient Care, Typically 30 Minutes Per Day	\$ 78.18
99222	Initial Hospital Inpatient Or Observation Care With Moderate Level Of Medical Decision Making. If Using Time, 55 Minutes Or More	\$ 121.57
99223	Initial Hospital Inpatient Care, Typically 70 Minutes Per Day	\$ 157.06
99231	Subsequent Hospital Inpatient Care, Typically 15 Minutes Per Day	\$ 42.37
99232	Subsequent Hospital Inpatient Or Observation Care With Moderate Level Of Medical Decision Making, If Using Time, 35 Minutes Or More	\$ 67.88
99233	Subsequent Hospital Inpatient Care, Typically 35 Minutes Per Day	\$ 102.12
99242	Patient Office Consultation, Typically 30 Minutes	\$ 93.71
99243	Patient Office Consultation, Typically 40 Minutes	\$ 123.85
99244	Patient Office Consultation, Typically 60 Minutes	\$ 176.06
99252	Inpatient Hospital Consultation, Typically 40 Minutes	\$ 99.06
99253	Inpatient Hospital Consultation, Typically 55 Minutes	\$ 129.38
99254	Inpatient Hospital Consultation, Typically 80 Minutes	\$ 175.83
99255	Inpatient Hospital Consultation, Typically 110 Minutes	\$ 217.39
99281	Emergency Department Visit, Self Limited Or Minor Problem	\$ 13.38
99282	Emergency Department Visit, Low To Moderately Severe Problem	\$ 38.62
99283	Emergency Department Visit, Moderately Severe Problem	\$ 66.74
99284	Emergency Department Visit, Problem Of High Severity	\$ 113.54
99285	Emergency Department Visit, Problem With Significant Threat To Life Or Function	\$ 164.45
99307	Subsequent Nursing Facility Care With Straightforward Level Of Medical Decision Making, Per Day, If Using Time, At Least 10 Minutes	\$ 38.92
99308	Subsequent Nursing Facility Care With Straightforward Level Of Medical Decision Making, Per Day, If Using Time, 20 Minutes Or More	\$ 64.85
99309	Subsequent Nursing Facility Care With Moderate Level Of Medical Decision Making, Per Day, If Using Time, At Least 30 Minutes	\$ 93.76
99402	Pediatric Vaccine Counseling	\$ 6.02
99417	Prolonged Office Or Other Outpatient Service By Clinical Staff, Each 15 Minutes Of Total Time	Price by Report
A2022	Innovaburn Or Innovamatrix XI, Per Square Centimeter	Price by Report
A2023	Innovamatrix Pd, 1 Mg	Price by Report
A2024	Resolve Matrix Or Xenopatch, Per Square Centimeter	Price by Report
A2025	Miro3D, Per Cubic Centimeter	Price by Report
A2027	Matriderm, Per Square Centimeter	Price by Report
A2028	Micromatrix Flex, Per Mg	Price by Report
A2029	Mirotract Wound Matrix Sheet, Per Cubic Centimeter	Price by Report
A2030	Miro3D Fibers, Per Milligram	Price by Report
A2031	Mirodry Wound Matrix, Per Square Centimeter	Price by Report
A2032	Myriad Matrix, Per Square Centimeter	Price by Report
A2033	Myriad Morcells, 4 Milligrams	Price by Report
A2034	Foundation Drs Solo, Per Square Centimeter	Price by Report
A2035	Corplex P Or Theracor P Or Allacor P, Per Milligram	Price by Report
A4580	Cast Supplies	\$ 35.84
A5500	Diab Shoe For Density Insert	\$ 78.09

Code	Description	Fee
A5503	Diabetic Shoe W/Roller/Rockr	\$ 39.83
A5510	Compression Form Shoe Insert	Price by Report
A5512	Multi Den Insert Direct Form	\$ 31.85
A5513	Multi Den Insert Custom Mold	\$ 47.53
E0114	Crutches Underarm, Other Than Wood, Adjustable Or Fixed, Pair, With Pads, Tips And Handgrips	\$ 57.95
E0116	Crutch, Underarm, Other Than Wood, Adjustable Or Fixed, With Pad, Tip, Handgrip, With Or Without Shock Absorber, Each	\$ 34.07
E0667	Pneumatic Appliance For Use With Segmental Pneumatic Compressor, Full Leg	\$ 337.95
E0668	Pneumatic Appliance For Use With Segmental Pneumatic Compressor, Full Arm	\$ 461.23
G0314	Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 16-30 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt)	\$ 12.03
G0315	Immunization Counseling By A Physician Or Other Qualified Health Care Professional For Covid-19, Ages Under 21, 5-15 Mins Time (This Code Is Used For The Medicaid Early And Periodic Screening, Diagnostic, And Treatment Benefit (Epsdt)	\$ 5.73
J0702	Betamethasone Acet&Sod Phosp	\$ 7.28
J1100	Injection, Dexamethosone, Up to 4Mg/MI	\$ 0.11
J3301	Injection Triamcinolone Acetonide, Per 10Mg	\$ 1.03
L1902	Ankle Orthosis, Ankle Gauntlet Or Similar, With Or Without Joints, Prefabricated, Off-The-Shelf	\$ 79.05
L1930	Afo, Custom Fitted, Plastic	\$ 255.65
L1933	Ankle Foot Orthosis, Rigid Anterior Tibial Section, Total Carbon Fiber Or Equal Material, Prefabricated, Off-The-Shelf	Price by Report
L1952	Ankle Foot Orthosis, Spiral, (Institute Of Rehabilitative Medicine Type), Plastic Or Other Material, Prefabricated, Off-The-Shelf	Price by Report
L2112	Afo, Fracture Orthosis, Tibial Fracture Orthosis, Soft	\$ 461.97
L3000	Foot, Insert, Removable, Molded To Patient Model, "Ucb"	\$ 336.27
L3001	Foot Insert, Removable-Molded To Patient Model, Spenco,	\$ 141.60
L3002	Foot Insert, Removable-Molded To Patient Model, Plastaz	\$ 172.88
L3003	Foot Insert, Removable-Molded To Patient Model, Silicon	\$ 186.53
L3010	Foot, Insert, Removable, Molded To Patient Model, Longitudinal Arch Support	\$ 186.53
L3020	Foot, Insert, Removable, Molded To Patient Model, Longitudinal/Metatarsal Support	\$ 212.39
L3030	Foot, Insert, Removable, Formed To Patient Foot	\$ 81.67
L3031	Foot Lamin/Prepreg Composite	\$ 131.14
L3040	Foot, Arch Support, Removable, Premolded, Longitudinal,	\$ 50.40
L3050	Foot, Arch Support, Removable, Premolded, Metatarsal	\$ 50.40
L3060	Foot, Arch Support, Removable, Premolded, Longitudinal/Metatarsal	\$ 78.98
L3070	Foot, Arch Support, Nonremovable Attached To Shoe, Longitudinal	\$ 34.04
L3080	Foot, Arch Support, Nonremovable Attached To Shoe, Metatarsal	\$ 34.04
L3090	Foot, Arch Support, Nonremovable Attached To Shoe, Longitudinal/Metatarsal	\$ 43.53
L3100	Hallus-Valgus Night Dynamic Splint	\$ 46.28
L3140	Foot, Abduction Rotation Bars (Dennis Browne Type), Including Shoes	\$ 95.31
L3150	Foot, Abduction Rotation Bars, (Dennis Browne Type), Without Shoes	\$ 87.13
L3160	Foot, Adjustable Positioning Device	Price by Report
L3161	Foot, Adductus Positioning Device, Adjustable	Price by Report
L3170	Foot-Plastic Heel Stabilzer	\$ 54.47
L3201	Orthopedic Shoe, Oxford With Supinator Or Pronator-Infant	\$ 85.78
L3202	Orthopedic Shoe, Oxford With Supinator Or Pronator-Child	\$ 106.88
L3203	Orthopedic Shoe, Oxford With Supinator Or Pronator-Junior	Price by Report
L3204	Orthopedic Shoe, Hightop With Supinator Or Pronator-Infant	\$ 110.81
L3206	Orthopedic Shoe, Hightop With Supinator Or Pronator-Child	\$ 74.96
L3207	Orthopedic Shoe, Hightop With Supinator Or Pronator-Junior	Price by Report
L3208	Surgical Boot, Each-Infant	\$ 65.46
L3209	Surgical Boot, Each-Child	\$ 39.94
L3211	Surgical Boot, Each-Junior	Price by Report
L3212	Benesch Boot, Pair-Infant	\$ 102.95
L3213	Benesch Boot, Pair-Child	\$ 102.95
L3214	Benesch Boot, Pair-Junior	\$ 102.95
L3215	Orthropedic Footwear, Ladies Shoes, Oxford	\$ 102.71
L3216	Orthropedic Footwear, Ladies Shoes, Depth Inlay	\$ 112.48

Code	Description	Fee
L3217	Orthopedic Footwear, Ladies Shoes, Hightop-Depth Inlay	Price by Report
L3219	Orthopedic Footwear, Mens Shoes-Oxford	\$ 137.11
L3221	Orthopedic Footwear, Mens Shoes-Depth Inlay	\$ 142.97
L3222	Orthopedic Footwear, Mens Shoes-Hightop-Depth Inlay	\$ 148.60
L3224	Woman's Shoe Oxford Brace	\$ 60.54
L3225	Man's Shoe Oxford Brace	\$ 80.80
L3230	Orthopedic Footwear, Custom Shoes Depth Inlay	\$ 118.27
L3250	Orthopedic Footwear, Custom Molded Shoe, Removable Inner Mold, Prosthetic Shoe, Each	Price by Report
L3251	Foot-Shoe Molded To Patient Model-Silicone Shoe, Each	Price by Report
L3252	Foot-Shoe Molded To Patient Model-Plastazote (Or Similar), Custom Fabricated, Each	\$ 447.12
L3253	Foot-Molded Shoe Plastazote(Or Similar) Custom Fitted, Each	\$ 64.36
L3254	Non-Standard Size Or Width	Price by Report
L3255	Non-Standard Size Or Length	Price by Report
L3257	Orthopedic Footwear, Additional Charge For Split Size	\$ 235.18
L3260	Ambulatory Surgical Boot-Each	\$ 21.76
L3265	Plastazote Sandal-Each	\$ 40.52
L3300	Lifts-Elevation, Heel, Tapered To Metatarsals, Per Inch	\$ 55.83
L3310	Lifts-Elevation, Heel And Sole, Neoprene, Per Inch	\$ 87.13
L3320	Lifts-Elevation, Heel And Sole, Cork, Per Inch	\$ 123.16
L3330	Lifts-Elevation, Metal Extension *Skate*	\$ 605.86
L3332	Lifts-Elevation, Inside Shoe, Tapered, Up To One-Half Inch	\$ 78.98
L3334	Lifts-Elevation, Heel, Per Inch	\$ 40.87
L3340	Heel Wedge, Sach	\$ 91.22
L3350	Heel Wedge	\$ 24.47
L3360	Sole Wedge-Outside Sole	\$ 38.11
L3370	Sole Wedge-Between Sole	\$ 53.11
L3380	Clubfoot Wedge	\$ 53.11
L3390	Outflare Wedge	\$ 53.11
L3400	Metatarsal Bar Wedge-Rocker	\$ 43.53
L3410	Metatarsal Bar Wedge-Between Sole	\$ 99.43
L3420	Full Sole And Heel Wedge *Between Sole*	\$ 58.54
L3430	Heel, Counter, Plastic Reinforced	\$ 171.57
L3440	Heel-Counter, Leather Reinforced	\$ 81.67
L3450	Heel-Sach Cushion Type	\$ 112.98
L3455	Heel-New Leather, Standard	\$ 43.53
L3460	Heel-New Rubber, Standard	\$ 36.79
L3465	Heel-Thomas With Wedge	\$ 62.64
L3470	Heel-Thomas Extended To Ball	\$ 66.75
L3480	Heel-Pad And Depression For Spur	\$ 66.75
L3485	Heel-Pad, Removable For Spur	\$ 13.92
L3500	Orthopedic Shoe Additions, Insole-Leather	\$ 31.29
L3510	Orthopedic Shoe Additions, Insole Rubber	\$ 31.29
L3520	Orthopedic Shoe Additions, Insole-Felt Covered With	\$ 34.04
L3530	Orthopedic Shoe Additions, Sole-Half	\$ 34.04
L3540	Orthopedic Shoe Additions, Sole-Full	\$ 54.47
L3550	Orthopedic Shoe Additions, Toe Tap-Standard	\$ 9.56
L3560	Orthopedic Shoe Additions, Toe Tap-Horseshoe	\$ 24.47
L3570	Orthopedic Shoe Additions, Special Extension To Instep (Leather With Eyelets)	\$ 91.22
L3580	Orthopedic Shoe Additions, Convert Instep To Velcro Closure	\$ 69.43
L3590	Orthopedic Shoe Additions, Convert Firm Shoe Counter To Soft Counter	\$ 57.19
L3595	Orthopedic Shoe Additions, March Bar	\$ 44.90
L3600	Transfers Of An Orthosis From One Shoe To Another, Cali	\$ 81.67
L3610	Transfers Of An Orthosis From One Shoe To Another, Cali	\$ 107.57
L3620	Transfers Of An Orthosis From One Shoe To Another, Soli	\$ 81.67
L3630	Transfers Of An Orthosis From One Shoe To Another, Soli	\$ 107.57
L3640	Transfers Of An Orthosis From One Shoe To Another, Denn	\$ 46.28
L3649	Unlisted Procedures For Foot Orthopedic Shoes, Shoe Mod	Price by Report
L4350	Pneumatic Ankle Control Splint (Aircast Or Equal)	\$ 88.51
L4360	Pneumatic Walking Splint (Aircast Or Equal)	\$ 295.86
L4361	Pneuma/Vac Walk Boot Pre Ots	\$ 295.86

Code	Description	Fee
L4386	Non-Pneumatic Walking Splint	\$ 169.73
L4387	Non-Pneum Walk Boot Pre Ots	\$ 169.73
L4396	Ankle Contracture Splint	\$ 176.43
L4397	Static Or Dynami Afo Pre Ots	\$ 176.43
L5000	Partial Foot, Shoe Insert With Longitudinal Arch, Toe F	\$ 533.00
L5010	Partial Foot, Molded Socket, Ankle Height, With Toe Fil	\$ 1,408.92
L5020	Partial Foot, Molded Socket, Tibial Tubercle Height, Wi	\$ 2,472.00
L8641	Metatarsal Joint	\$ 492.35
L8642	Hallux Implant	\$ 322.27
L8721	Receptor Sole For Use With L8720, Replacement, Each	Price by Report
Q4029	Cast Supplies, Long Leg Cast, Adult (11 Years+), Plaster	\$ 31.73
Q4030	Cast Supplies, Long Leg Cast, Adult (11 Years+), Fiberglass	\$ 83.51
Q4031	Cast Supplies, Long Leg, 0-10 Yrs, Plaster	\$ 15.85
Q4032	Cast Supplies, Long Leg, 0-10 Yrs, Fiberglass	\$ 41.76
Q4037	Cast Supplies Short Leg Cast, Adult (11 Years+), Plaster	\$ 18.03
Q4038	Cast Supplies, Short Leg, 11 Yrs+, Fiberglass	\$ 45.22
Q4039	Cast Supplies, Short Leg, 0-10 Yrs, Plaster	\$ 9.05
Q4040	Cast Supplies, Short Leg, 0-10 Yrs, Fiberglass	\$ 22.61
Q4045	Cast Supplies, Short Leg, LI Yrs+, Plaster	\$ 12.74
Q4046	Cast Supplies, Short Leg, 11 Yrs+, Fiberglass	\$ 20.49
Q4047	Cast Supplies, Short Leg Splint, Pediatric (0-10 Years), Plaster	\$ 6.35
Q4048	Cast Supplies, Short Leg, 0-10 Yrs, Fiberglass	\$ 10.26
Q4100	Skin Substitute, Nos	Price by Report
Q4101	Apligraf Skin Sub	\$ 30.63
Q4102	Oasis Wound Matrix Skin Sub	\$ 11.79
Q4103	Oasis Burn Matrix Skin Sub	\$ 12.36
Q4104	Integra Bmwd Skin Sub	\$ 49.53
Q4105	Integra Drt Or Omnigraft	\$ 25.17
Q4106	Dermagraft Skin Sub	\$ 44.94
Q4107	Graftjacket Skin Sub	\$ 104.00
Q4108	Integra Matrix Skin Sub	\$ 51.92
Q4110	Primatrix Skin Sub	\$ 44.16
Q4111	Gammagraft Skin Sub	\$ 7.14
Q4115	Alloskin Skin Sub	\$ 15.54
Q4116	Alloderm Skin Sub	\$ 35.24
Q4117	Hyalomatrix	\$ 16.91
Q4118	Matristem Micromatrix	\$ 2.56
Q4121	Theraskin	\$ 46.29
Q4122	Dermacell, Awm, Porous Sq Cm	Price By Report
Q4123	Alloskin	\$ 37.60
Q4124	Oasis Tri-Layer Wound Matrix	\$ 7.84
Q4125	Arthroflex	Price By Report
Q4126	Memoderm	\$ 80.92
Q4127	Talymed	\$ 67.32
Q4128	Flexhd Or Allopatch Hd	\$ 30.87
Q4130	Strattice Tm	Price By Report
Q4132	Grafix Core, Grafixpl Core	\$ 97.32
Q4133	Grafix Stravix Prime PI Sqcm	\$ 141.66
Q4134	Hmatrix	\$ 162.08
Q4135	Mediskin	Price By Report
Q4136	Ezderm	Price By Report
Q4137	Amnioexcel Biodexcel 1Sq Cm	\$ 104.67
Q4138	Biodfence Dryflex, 1Cm	Price By Report
Q4140	Biodfence 1Cm	Price By Report
Q4141	Alloskin Ac, 1 Cm	\$ 42.74
Q4142	Xcm Biologic Tiss Matrix 1Cm	Price By Report
Q4143	Repriza, 1Cm	\$ 33.92
Q4146	Tensix, 1Cm	Price By Report
Q4147	Architect Ecm Px Fx 1 Sq Cm	\$ 147.22
Q4148	Neox Neox Rt Or Clarix Cord	\$ 129.93

Code	Description	Fee
Q4150	Allowrap Ds Or Dry 1 Sq Cm	\$ 79.00
Q4151	Amnioband, Guardian 1 Sq Cm	\$ 144.44
Q4152	Dermapure 1 Square Cm	\$ 43.45
Q4153	DermaVest, Plurivest Sq Cm	\$ 44.23
Q4154	Biovance 1 Square Cm	\$ 148.97
Q4156	Neox 100 Or Clarix 100	\$ 68.43
Q4157	Revitalon 1 Square Cm	Price By Report
Q4158	Kerecis Omega3, Per Sq Cm	Price By Report
Q4159	Affinity1 Square Cm	\$ 305.58
Q4160	Nushield 1 Square Cm	\$ 97.64
Q4161	Bio-Connekt Per Square Cm	\$ 68.41
Q4163	Woundex, Bioskin, Per Sq Cm	\$ 13.08
Q4164	Helicoll, Per Square Cm	\$ 1,552.70
Q4165	Keramatrix, Kerasorb Sq Cm	Price By Report
Q4166	Cytal, Per Square Centimeter	\$ 18.98
Q4167	Truskin, Per Sq Centimeter	Price By Report
Q4169	Artacent Wound, Per Sq Cm	\$ 176.06
Q4170	Cygnus, Per Sq Cm	\$ 52.79
Q4173	Palingen Or Palingen Xplus	\$ 402.51
Q4175	Miroderm	\$ 62.86
Q4186	Epifix, Per Square Cm	\$ 154.67
Q4187	Epicord 1 Sq Cm	\$ 244.49
Q4262	Dual Layer Impax, Per Sq Cm	\$ 706.77
Q4263	Surgraft TI, Per Sq Cm	\$ 529.16
Q4264	Cocoon Membrane, Per Sq Cm	Price By Report
Q4265	Neostim TI Per Sq Cm	\$ 2,114.70
Q4266	Neostim Per Sq Cm	\$ 1,584.70
Q4267	Neostim DI Per Sq Cm	\$ 729.25
Q4268	Surgraft Ft Per Sq Cm	\$ 1,209.66
Q4269	Surgraft Xt Per Sq Cm	Price By Report
Q4270	Complete SI Per Sq Cm	Price By Report
Q4271	Complete Ft Per Sq Cm	\$ 75.73
Q4272	Esano A, Per Sq Cm	Price By Report
Q4273	Esano Aaa, Per Sq Cm	Price By Report
Q4274	Esano Ac, Per Sq Cm	Price By Report
Q4275	Esano Aca, Per Sq Cm	Price By Report
Q4276	Orion, Per Sq Cm	Price By Report
Q4278	Epieffect, Per Sq Cm	\$ 404.71
Q4279	Vendaje Ac, Per Square Centimeter	Price By Report
Q4280	Xcell Amnio Matrix Per Sq Cm	Price By Report
Q4281	Barrera Slor DI Per Sq Cm	\$ 57.03
Q4282	Cygnus Dual Per Sq Cm	\$ 669.82
Q4283	Biovance Tri Or 3L, Sq Cm	\$ 1,059.21
Q4284	Dermabind SI, Per Sq Cm	Price By Report
Q4285	Nudyn DI Or Nudyn DI Mesh, Per Square Centimeter	Price By Report
Q4286	Nudyn SI Or Nudyn Slw, Per Square Centimeter	Price By Report
Q4287	Dermabind DI, Per Square Centimeter	Price by Report
Q4288	Dermabind Ch, Per Square Centimeter	Price By Report
Q4289	Revoshield + Amniotic Barrier, Per Square Centimeter	Price By Report
Q4290	Membrane Wrap-Hydro, Per Square Centimeter	Price by Report
Q4291	Lamellas Xt, Per Square Centimeter	Price by Report
Q4292	Lamellas, Per Square Centimeter	Price by Report
Q4293	Acesso DI, Per Square Centimeter	Price by Report
Q4294	Amnio Quad-Core, Per Square Centimeter	\$ 2,279.00
Q4295	Amnio Tri-Core Amniotic, Per Square Centimeter	\$ 2,067.00
Q4296	Rebound Matrix, Per Square Centimeter	Price by Report
Q4297	Emerge Matrix, Per Square Centimeter	Price by Report
Q4298	Amnicore Pro, Per Square Centimeter	\$ 2,173.00
Q4299	Amnicore Pro+, Per Square Centimeter	\$ 2,385.00
Q4300	Acesso TI, Per Square Centimeter	Price by Report

<b>Code</b>	<b>Description</b>	<b>Fee</b>
Q4301	Activate Matrix, Per Square Centimeter	Price by Report
Q4302	Complete Aca, Per Square Centimeter	Price by Report
Q4303	Complete Aa, Per Square Centimeter	Price by Report
Q4304	Grafix Plus, Per Square Centimeter	Price by Report
Q4336	Artacent C, Per Square Centimeter	Price by Report
Q4337	Artacent Trident, Per Square Centimeter	Price by Report
Q4338	Artacent Velos, Per Square Centimeter	Price by Report
Q4339	Artacent Vericlen, Per Square Centimeter	Price by Report
Q4340	Simpligraft, Per Square Centimeter	Price by Report
Q4341	Simplimax, Per Square Centimeter	Price by Report
Q4342	Theramend, Per Square Centimeter	Price by Report
Q4343	Dermacyte Ac Matrix Amniotic Membrane Allograft, Per Square Centimeter	Price by Report
Q4344	Tri-Membrane Wrap, Per Square Centimeter	Price by Report
Q4345	Matrix Hd Allograft Dermis, Per Square Centimeter	Price by Report
Q4346	Shelter Dm Matrix, Per Square Centimeter	Price By Report
Q4347	Rampart DI Matrix, Per Square Centimeter	Price By Report
Q4348	Sentry SI Matrix, Per Square Centimeter	Price By Report
Q4349	Mantle DI Matrix, Per Square Centimeter	Price By Report
Q4350	Palisade Dm Matrix, Per Square Centimeter	Price By Report
Q4351	Enclose TI Matrix, Per Square Centimeter	Price By Report
Q4352	Overlay SI Matrix, Per Square Centimeter	Price By Report
Q4353	Xceed TI Matrix, Per Square Centimeter	Price By Report
U0001	CDC 2019 Novel Coronavirus (2019-Ncov) Real-Time Rt-Pcr Diagnostic Panel	\$ 35.92
U0002	2019-Ncov Coronavirus, Sars-Cov-2/2019-Ncov (Covid-19), Any Technique, Multiple Types Or Subtypes (Includes All Targets), Non-Cdc	\$ 51.31