

CPT		
Code	CPT Code Description	Standard Fee
0191T	INSERT ANT SEGMENT DRAIN INT	\$ 1,177.00
0184T	EXC RECTAL TUMOR ENDOSCOPIC	\$ 2,669.00
0165T	REVISE LUMB ARTIF DISC ADDL	\$ 1,412.00
0102T	EXTRACORP SHOCKWV TX ANESTH	\$ 1,016.00
0101T	EXTRA CORP SHOCKWV TX HI ENERGY	\$ 1,016.00
99496	TRANSITIONAL CARE MANAGE SERVICE 7	\$ 571.00
99495	TRANSITIONAL CARE MANAGE SERVICE 14	\$ 431.00
99490	CHRON CARE MANAGEMENT SRVC 20 MIN P	\$ 115.00
99480	Ic inf pbw 2501-5000 g subsq	\$ 420.00
99479	Ic lbw inf 1500-2500 g subsq	\$ 438.00
99478	Ic, lbw inf < 1500 gm subsq	\$ 483.00
99477	INIT DAY HOSP NEONATE CARE	\$ 1,229.00
99476	Ped crit care age 2-5, subsq	\$ 1,228.00
99475	Ped crit care age 2-5, init	\$ 1,968.00
99472	Ped critical care, subsq	\$ 1,423.00
99471	Ped critical care, initial	\$ 2,797.00
99469	Neonate crit care, subsq	\$ 1,398.00
99468	Neonate crit care, initial	\$ 3,230.00
99467	Ped crit care transport addl	\$ 420.00
99466	Ped crit care transport	\$ 838.00
99465	Nb resuscitation	\$ 514.00
99464	Attendance at delivery	\$ 262.00
99463	Same day nb discharge	\$ 388.00
99462	Sbsq nb em per day, hosp	\$ 149.00
99461	Init nb em per day, non-fac	\$ 223.00
99460	Init nb em per day, hosp	\$ 335.00
99407	BEHAV CHNG SMOKING < 10 MIN	\$ 95.00
99406	BEHAV CHNG SMOKING 3-10 MIN	\$ 44.00
99359	PROLONGED SERV, W/O CONTACT, ADD'L	\$ 194.00
99358	PROLONGED SERV, W/O CONTACT, 1ST HR	\$ 392.00
99357	PROLONGED SERV, INPATIENT, ADD'L 30	\$ 329.00
99356	PROLONGED SERV, INPATIENT, 1ST HR	\$ 326.00
99355	PROLONGED SERV, OFFICE, ADD'L 30MIN	\$ 322.00
99354	PROLONGED SERVICE, OFFICE, 1ST HR	\$ 429.00
99350	HOME VISIT, EST PT, MOD-HIGH 60 MIN	\$ 634.00
99349	HOME VISIT, EST PT, MOD-HIGH 40 MIN	\$ 451.00
99348	HOME VISIT, EST PATIENT, LOW TO MOD	\$ 295.00
99347	HOME VISIT, EST PATIENT, MINOR	\$ 193.00
99345	HOME VISIT, NEW PATIENT, EMERGENCY	\$ 786.00
99344	HOME VISIT, NEW PATIENT, HIGH	\$ 644.00
99343	HOME VISIT, NEW PATIENT, MOD-HIGH	\$ 452.00
99342	HOME VISIT, NEW PATIENT, MODERATE	\$ 277.00
99341	HOME VISIT, NEW PATIENT, LOW	\$ 192.00
99337	DOMICLRY, ESTB PAT, 60 MIN, HI SEVR	\$ 683.00
99336	DOMICLRY, ESTB PAT, MOD-HIGH-SEVER	\$ 471.00
99335	DOMICLRY, ESTB PAT, LOW-MOD SEVERIT	\$ 334.00
99334	DOMILRY, EST PAT,	\$ 212.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
99328	DOMICLRY/REST HME E/M NEW PAT,	\$ 772.00
99327	DOMICLRY/REST HME, NEW PAT, HIGH SE	\$ 650.00
99326	DOMICLRY/REST HME, MOD-HIGH-SEVERTY	\$ 481.00
99325	DOMICILRY/REST HME, NEW PAT, MOD SE	\$ 278.00
99324	DOMICILIARY, REST HO/CUSTDIAL SERV	\$ 192.00
99318	E/M, NURSI ASSMNT, STABLE RECOVERIN	\$ 339.00
99316	NURSING FACIL DISCH, 31+ MIN	\$ 370.00
99315	NURSING FACIL DISCH, 30 MIN OR LESS	\$ 260.00
99310	SUBSQNT NURS FACLTY, IMM PHY ATTENT	\$ 472.00
99309	SUBSQNT NURS FACLTY, COMPL NEW PRBS	\$ 321.00
99308	SUBSQNT NURS FACLTY, COMPL MINOR	\$ 245.00
99307	SUBSEQNT NURS FACLTY, RECOVERING	\$ 156.00
99306	INIT. NURS FACLTY CARE, HIGH SEVERY	\$ 588.00
99305	INIT. NURS FACLTY, MOD SEVERITY	\$ 454.00
99304	INIT. NURS CARE, LOW SEVERITY	\$ 319.00
99292	CRITICAL CARE, ADD'L 30 MIN	\$ 401.00
99291	CRITICAL CARE, FIRST HOUR	\$ 795.00
99285	EMERGENCY DEPT VISIT, HIGH	\$ 628.00
99284	EMERGENCY DEPT VISIT, HIGH	\$ 432.00
99283	EMERGENCY DEPT VISIT, MODERATE	\$ 233.00
99282	EMERGENCY DEPT VISIT, LOW-MODERATE	\$ 156.00
99281	EMERGENCY DEPT VISIT, MINOR	\$ 82.00
99239	HOSPITAL DISCHARGE DAY CARE,30+ MIN	\$ 378.00
99238	HOSPITAL DISCHARGE DAY CARE	\$ 259.00
99236	OBSERV OR INPATIENT HOSP CARE, HIGH	\$ 769.00
99235	OBSERV OR INPATIENT HOSP CARE, MOD	\$ 597.00
99234	OBSERV OR INPATIENT HOSP CARE, LOW	\$ 476.00
99233	FOLLOWUP HOSPITAL CARE, EXTENSIVE	\$ 367.00
99232	FOLLOWUP HOSPITAL CARE, MODERATE	\$ 254.00
99231	FOLLOWUP HOSPITAL CARE, BRIEF	\$ 140.00
99226	SUBSEQUENT OBSERVATION CARE	\$ 368.00
99225	SUBSEQUENT OBSERVATION CARE	\$ 256.00
99224	SUBSEQUENT OBSERVATION CARE	\$ 141.00
99223	INITIAL HOSPITAL CARE, HIGH	\$ 716.00
99222	INITIAL HOSPITAL CARE, MODERATE	\$ 492.00
99221	INITIAL HOSPITAL CARE, LOW	\$ 368.00
99220	INITIAL OBSERVATION CARE, HIGH	\$ 655.00
99219	INITIAL OBSERVATION CARE, MODERATE	\$ 479.00
99218	INITIAL OBSERVATION CARE, LOW	\$ 356.00
99217	OBSERVATION CARE DISCHARGE DAY MGT	\$ 258.00
99215	OFFICE/OUTPATIENT VISIT, EST, HIGH	\$ 395.00
99214	OFFICE/OUTPATIENT VISIT, EST, MOD	\$ 280.00
99213	OFFICE/OUTPATIENT VISIT, EST, MOD	\$ 183.00
99212	OFFICE/OUTPATIENT VISIT, EST, LOW	\$ 94.00
99211	OFFICE/OUTPATIENT VISIT, EST, MIN	\$ 32.00
99205	OFFICE/OUTPATIENT VISIT, NEW, HIGH	\$ 607.00
99204	OFFICE/OUTPATIENT VISIT, NEW, MOD	\$ 465.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
99203	OFFICE/OUTPATIENT VISIT, NEW, MOD	\$ 272.00
99202	OFFICE/OUTPATIENT VISIT, NEW, LOW	\$ 183.00
99195	PHLEBOTOMY	\$ 382.00
99184	INITIAT SELECTIVE HEAD/BODY HYPOTHE	\$ 789.00
99183	HYPERBARIC OXYGEN THERAPY	\$ 412.00
99175	INDUCTION OF VOMITING	\$ 96.00
99170	NULL	\$ 306.00
98942	CMT, SPINAL, 5 REGIONS	\$ 160.00
98941	CMT, SPINAL, 3-4 REGIONS	\$ 117.00
98940	CMT, SPINAL, 1-2 REGIONS	\$ 77.00
98929	OSTEOPATHIC MANIP, 9-10 BODY REGION	\$ 257.00
98928	OSTEOPATHIC MANIP, 7-8 BODY REGIONS	\$ 208.00
98927	OSTEOPATHIC MANIP, 5-6 BODY REGIONS	\$ 166.00
98926	OSTEOPATHIC MANIP, 3-4 BODY REGIONS	\$ 129.00
98925	OSTEOPATHIC MANIP, 1-2 BODY REGIONS	\$ 85.00
97804	MEDICAL NUTRITION TX GROUP EACH 30M	\$ 56.00
97803	MEDICAL NUTRTN TX RE-ASSMNT & INTRV	\$ 101.00
97802	MEDICAL NUTRTN TX INTL ASMNT INDVID	\$ 119.00
97761	prosth train;U.E & L.E-each 15 MIN	\$ 150.00
97760	ortho man & tr;U.E,L.E,Tr-EACH 15 m	\$ 177.00
97755	ASSISTIVE TECH	\$ 134.00
97750	PHYSICAL PERFORMANCE TEST,EA 15 MIN	\$ 124.00
97610	LOW FREQUENCY NON-THERMAL ULTRASOUN	\$ 64.00
97606	-VE PRES WOUND THERAP TSA >50 SQCM	\$ 97.00
97605	-VE PRESS WOUND THERAP TSA <=50SQCM	\$ 90.00
97598	REM DEVITA TISS WOUND TSA > 20 SQCM	\$ 96.00
97597	REM DEVITA TISS WOUND TSA <=20 SQCM	\$ 132.00
97542	WHEELCHAIR MANAGEMENT TRAINING	\$ 117.00
97537	COMMUNITY/WORK REINTEGRATION TRNG	\$ 116.00
97535	SELF CARE MANAGEMENT TRAINING	\$ 122.00
97533	SENSORY INTERGRATIVE TECHNIQUES	\$ 187.00
97530	THERAPEUTIC ACTIVITIES (ONE ON ONE)	\$ 142.00
97150	GROUP THERAPEUTIC PROCEDURE(S)	\$ 64.00
97140	MANUAL THERAPY 1+ REGIONS, EA 15 MN	\$ 100.00
97124	MASSAGE THERAPY	\$ 104.00
97116	GAIT TRAINING THERAPY	\$ 107.00
97113	AQUATIC THERAPY W/EXERCISES	\$ 138.00
97112	NEUROMUSCULAR REEDUCATION	\$ 125.00
97110	PHYSICAL THERAPY EXERCISES	\$ 109.00
97036	HUBBARD TANK, EACH 15 MINUTES	\$ 128.00
97035	ULTRASOUND, EACH 15 MINUTES	\$ 51.00
97034	CONTRAST BATHS, EACH 15 MINUTES	\$ 54.00
97033	IONTOPHORESIS, EACH 15 MINUTES	\$ 74.00
97032	ELECTRICAL STIMULATION, EA 15 MINS	\$ 52.00
97028	PHYSICAL THERAPY, UV LIGHT	\$ 30.00
97026	INFRARED THERAPY	\$ 24.00
97024	DIATHERMY TREATMENT	\$ 26.00

CPT		Standard Fee
Code	CPT Code Description	
97022	WHIRLPOOL THERAPY	\$ 65.00
97018	PARAFFIN BATH THERAPY	\$ 26.00
97016	VASOPNEUMATIC DEVICE THERAPY	\$ 45.00
97012	MECHANICAL TRACTION THERAPY	\$ 53.00
96922	LASER TX INF SKIN DIS;OVER 500 SQCM	\$ 421.00
96921	LASER TX INF SKIN DIS;250-500 SQ CM	\$ 263.00
96920	LASER TX-INF SKIN DIS;WITHIN 250 SQ	\$ 233.00
96913	ULTRAVIOLET LIGHT THERAPY,EXTENSIVE	\$ 536.00
96912	ULTRAVIOLET LIGHT THERAPY W/PUVA	\$ 369.00
96910	ULTRAVIOLET LIGHT THERAPY W/UV-B	\$ 434.00
96904	WHOLE BODY INTGMNTRY PHOTOGRAPHY	\$ 256.00
96900	ULTRAVIOLET LIGHT THERAPY	\$ 84.00
96571	NULL	\$ 102.00
96570	NULL	\$ 219.00
96567	PHOTODYN THER-DIST MAL LES;EACH SES	\$ 497.00
96542	CHEMOTHERAPY INJECTION	\$ 156.00
96523	IRRIG IMPL VENOUS ACC DEV DRG DELV	\$ 104.00
96522	REFIL & MAINT IMPL PUMP/RESERV SYST	\$ 461.00
96521	REFIL AND MAINT PORTABLE PUMP	\$ 551.00
96446	CHEMOTX ADMN PRTL CAVITY	\$ 120.00
96440	PLEURAL CAVITY CHEMOTHERAPY	\$ 493.00
96425	IA CHEMOTHERAPY, INFUSION METHOD	\$ 682.00
96423	IA CHEMOTHERAPY, INFUSION METHOD	\$ 298.00
96422	IA CHEMOTHERAPY, INFUSION METHOD	\$ 644.00
96420	IA CHEMOTHERAPY, PUSH TECHNIQUE	\$ 394.00
96417	CHEM ADM IV INFU ADD SEQ INF UP 1HR	\$ 255.00
96416	CHEM ADM IV INFUS TEC > 8HRS	\$ 527.00
96406	CHEMOTHERAPY ADMIN, 8+ LESIONS	\$ 165.00
96405	CHEMOTHERAPY ADMIN, UP TO 7 LESIONS	\$ 105.00
96402	CHEM ADM SUB/IM HORM ANTI-NEOPLASTI	\$ 116.00
96401	CHEMO ADM SUBC/IM NON HORM ANTI-NEO	\$ 294.00
96375	Tx/pro/dx inj new drug addon	\$ 60.00
96374	Ther/proph/diag inj, iv push	\$ 145.00
96373	Ther/proph/diag inj, ia	\$ 67.00
96372	Ther/proph/diag inj, sc/im	\$ 59.00
96371	Sc ther infusion, reset pump	\$ 240.00
96370	Sc ther infusion, addl hr	\$ 55.00
96369	Sc ther infusion, up to 1 hr	\$ 609.00
96368	Ther/diag concurrent inf	\$ 76.00
96367	Tx/proph/dg addl seq iv inf	\$ 113.00
96366	Ther/proph/diag iv inf addon	\$ 78.00
96365	Ther/proph/diag iv inf, init	\$ 266.00
96361	Hydrate iv infusion, add-on	\$ 50.00
96360	Hydration iv infusion, init	\$ 138.00
96127	BEHAV ASSMT W/SCORE & DOCD/STAND IN	\$ 21.00
96125	COGNITIVE TEST BY HC PRO	\$ 387.00
96116	NEUROBEHA STAT EXAM/HR PSY/PHYS TIM	\$ 293.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
96105	ASSESSMENT OF APHASIA	\$ 365.00
96004	PHYSN RVW INTRPRTN OF MOTION ANLYS	\$ 411.00
96003	DYN FINE WIRE EMG,WALK/FUN ACT,1MUS	\$ 59.00
96002	DYN SURF EMG-WALK/FUNC ACT,1-12 MUS	\$ 79.00
96001	MOTION ANALYSIS VT & 3D DURNG WALKNG	\$ 481.00
96000	COMP CMPUTR MOTION ANALYSIS, VT & 3D	\$ 337.00
95992	CANALITH REPOSITIONING PROC	\$ 135.00
95991	REFILLING AND MAIN IMPLANT PUMP	\$ 150.00
95990	REFIL PUMP/RES DRG DEL,SPINE/BRAIN	\$ 344.00
95982	IO GA N-STIM SUBSQ W/REPROG	\$ 142.00
95981	IO ANAL GAST N-STIM SUBSQ	\$ 68.00
95980	IO ANAL GAST N-STIM INIT	\$ 182.00
95972	NEUROSTIM ANALYSIS, COMPLEX, 1ST HR	\$ 153.00
95971	NEUROSTIM ANALYSIS, SIMPLE	\$ 150.00
95970	NEUROSTIM ANALYSIS, W/O REPROGRAM	\$ 68.00
95967	,26 MEG RCDNG & ANLYSIS FOR EVKD MAG	\$ 4,044.00
95966	,26 MEG FOR EVOKED MAGNTC FIELD SNGL MO	\$ 6,151.00
95965	,26 MEG RECORDNG & ANLYSIS SPNTNS BRAIN	\$ 9,908.00
95962	,26 ELECTRODE STIMULATION OF BRAIN	\$ 945.00
95961	,26 ELECTRODE STIMULATION OF BRAIN	\$ 1,136.00
95958	,26 EEG MONITORING/FUNCTION TEST	\$ 2,142.00
95957	,26 EEG DIGITAL ANALYSIS	\$ 931.00
95955	,26 EEG MONITORING DURING SURGERY	\$ 770.00
95954	,26 EEG MONITORING W/DRUGS	\$ 1,427.00
95943	,26 PARASYMP & SYMP NRV FUNCJ HRT RATE	\$ 520.00
95940	IONM 1 ON 1 IN OR W/ATTENDANCE EACH	\$ 119.00
95939	,26 NULL	\$ 1,928.00
95938	,26 NULL	\$ 1,296.00
95937	,26 NEUROMUSCULAR JUNCTION TEST	\$ 343.00
95933	,26 BLINK REFLEX TEST	\$ 301.00
95930	,26 VISUAL EVOKED POTENTIAL (VEP) TEST	\$ 243.00
95929	,26 CENTR EVOK POT STUD LOWER LIMBS	\$ 845.00
95928	,26 CENT MOTOR EVOK POT STUD UPP LIMB	\$ 820.00
95927	,26 SOMATOSENSORY TESTING, TRUNK/HEAD	\$ 490.00
95926	,26 SOMATOSENSORY TESTING, LOWER LIMBS	\$ 490.00
95925	,26 SOMATOSENSORY TESTING, UPPER LIMBS	\$ 516.00
95924	,26 TSTG ANS FUNCJ PARASYMP&SYMP W/5 MI	\$ 543.00
95923	,26 AUTONOMIC NERV SYS TEST, SUDOMOTOR	\$ 470.00
95922	,26 AUTONOMIC NERV SYS TEST, VASOMOTOR	\$ 358.00
95921	,26 AUTONOMIC NERV SYS TEST CARDIOVAGAL	\$ 308.00
95913	,26 MOTOR &/SENS 13/> NRV CNDJ PRECONF	\$ 1,085.00
95912	,26 MOTOR &/SENS 11-12 NRV CNDJ PRECONF	\$ 938.00
95911	,26 MOTOR &/SENS 9-10 NRV CNDJ PRECONF	\$ 820.00
95910	,26 MOTOR &/SENS 7-8 NRV CNDJ PRECONF E	\$ 689.00
95909	,26 MOTOR &/SENS 5-6 NRV CNDJ PRECONF E	\$ 523.00
95908	,26 MOTOR &/SENS 3-4 NRV CNDJ PRECONF E	\$ 437.00
95907	,26 MOTOR &/SENS 1-2 NRV CNDJ PRECONF E	\$ 346.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
95905	,26 MOTOR AND SENSORY NERVE COND PRECON	\$ 203.00
95887	,26 MUSC TST DONE W/N TST NONEXT	\$ 306.00
95886	,26 NULL	\$ 350.00
95885	,26 NULL	\$ 228.00
95875	,26 LIMB EXERCISE TEST W/EMG, LACTIC	\$ 484.00
95874	,26 needl electromyogr-guid w/chemoden	\$ 288.00
95873	,26 electric stimul-guid w/chemodenerva	\$ 280.00
95872	,26 MUSCLE TEST, ONE FIBER	\$ 709.00
95870	,26 MUSCLE TEST, LMTD, OTH THAN PARASPI	\$ 334.00
95869	,26 MUSCLE TEST, LMTD, THORAC PARASPINE	\$ 353.00
95868	,26 MUSCLE TEST, HEAD/NECK, BOTH SIDES	\$ 512.00
95867	,26 MUSCLE TEST, HEAD/NECK, ONE SIDE	\$ 394.00
95866	,26 needle electromyography;hemidiaphra	\$ 488.00
95865	,26 needle electromyography;larynx	\$ 553.00
95864	,26 MUSCLE TEST, FOUR LIMBS	\$ 906.00
95863	,26 MUSCLE TEST, THREE LIMBS	\$ 769.00
95861	,26 MUSCLE TEST, TWO LIMBS	\$ 624.00
95860	,26 MUSCLE TEST, ONE LIMB	\$ 437.00
95857	TENSILON TEST	\$ 110.00
95852	RANGE OF MOTION TEST, HAND	\$ 22.00
95851	RANGE OF MOTION TEST, TRUNK/LIMB	\$ 29.00
95830	INSERTION OF ELECTRODES FOR EEG	\$ 334.00
95829	,26 ELECTROCORTICOGRAM DURING SURGERY	\$ 6,915.00
95824	,26 CEREBRAL DEATH EVALUATION EEG	\$ 451.00
95822	,26 SLEEP EEG	\$ 1,451.00
95819	,26 ELECTROENCEPHALOGRAM (EEG)	\$ 1,601.00
95816	,26 ELECTROENCEPHALOGRAM (EEG)	\$ 1,344.00
95813	,26 EEG MONITORING, GREATER THAN 1 HOUR	\$ 1,505.00
95812	,26 EEG MONITORING, UP TO 1 HOUR	\$ 1,212.00
95811	,26 POLYSONOGRPH 4+ ADD'L PARAMS W/CPAP	\$ 2,342.00
95810	,26 POLYSOMNOGRAPHY, 4+ ADD'L PARAMS	\$ 2,242.00
95808	,26 POLYSOMNOGRAPHY, 1-3 ADD'L PARAMS	\$ 2,409.00
95807	,26 SLEEP STUDY, ATTENDED	\$ 1,505.00
95806	,26 SLEEP STUDY, UNATTENDED	\$ 422.00
95805	,26 MULTIPLE SLEEP LATENCY TEST	\$ 1,535.00
95803	,26 ACTIGRAPHY TESTING	\$ 543.00
95801	,26 SLP STDY UNATND W/ANAL	\$ 321.00
95800	,26 SLP STDY UNATTENDED	\$ 605.00
95783	,26 POLYSOM <6 YRS SLEEP W/CPAP/BILVL V	\$ 3,551.00
95782	,26 POLYSOM <6 YRS SLEEP STAGE 4/> ADDL	\$ 3,339.00
95251	amb.gl.mont,subcut-72hr;phy int-rep	\$ 128.00
95250	amb.gl.mont,subcut-72 hr;sensor pla	\$ 563.00
95180	RAPID DESENSITIZATION, EACH HOUR	\$ 363.00
95170	ANTIGEN THERAPY SERV, BITING INSECT	\$ 12.00
95165	ANTIGEN THERAPY SERVICES	\$ 12.00
95149	ANTIGEN THERAPY SERVICES, INS VENOM	\$ 12.00
95148	ANTIGEN THERAPY SERVICES, INS VENOM	\$ 12.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
95147	ANTIGEN THERAPY SERVICES, INS VENOM	\$ 12.00
95146	ANTIGEN THERAPY SERVICES, INS VENOM	\$ 12.00
95145	ANTIGEN THERAPY SERVICES, INS VENOM	\$ 12.00
95144	ANTIGEN THERAPY SERVICES,	\$ 12.00
95079	INGESTION CHALLENGE TEST EACH ADDL	\$ 239.00
95076	INGESTION CHALLENGE TEST INITIAL 12	\$ 260.00
95070	BRONCHIAL ALLERGY TESTS	\$ 125.00
95065	NOSE ALLERGY TEST	\$ 97.00
95060	EYE ALLERGY TESTS	\$ 131.00
95056	PHOTOSENSITIVITY TESTS	\$ 173.00
95052	PHOTOSENSITIVITY PATCH TESTS	\$ 26.00
95044	ALLERGY PATCH TESTS	\$ 22.00
95028	ALLERGY SKIN TESTS, INTRADERMAL	\$ 49.00
95027	SKIN END POINT TITRATION	\$ 20.00
95024	ALLERGY SKIN TESTS, INTRADERMAL	\$ 5.00
95018	ALLG TEST PERQ & IC DRUG/BIOL IMMED	\$ 26.00
95017	ALLG TSTG PERQ & IC VENOMS IMMED RE	\$ 14.00
95012	NITRIC OXIDE EXPIRED GAS DETERMINA	\$ 75.00
95004	ALLERGY SKIN TESTS, PERCUTANEOUS	\$ 17.00
94781	CAR SEAT/BED TEST + 30 MIN	\$ 30.00
94780	CAR SEAT/BED TEST 60 MIN	\$ 84.00
94777	PED HOME APNEA REC, REPORT	\$ 105.00
94776	PED HOME APNEA REC, DOWNLD	\$ 841.00
94775	PED HOME APNEA REC, HK-UP	\$ 177.00
94774	PED HOME APNEA REC, COMPL	\$ 1,123.00
94762	MEASURE BLOOD OXYGEN LEVEL,OVERNITE	\$ 99.00
94761	MEASURE BLOOD OXYGEN LEVEL,MULTIPLE	\$ 17.00
94760	MEASURE BLOOD OXYGEN LEVEL, SINGLE	\$ 11.00
94729	,26 NULL	\$ 208.00
94728	,26 NULL	\$ 149.00
94727	,26 NULL	\$ 160.00
94726	,26 NULL	\$ 196.00
94690	,26 EXHALED AIR ANALYSIS, REST,INDIRECT	\$ 189.00
94681	,26 EXHALED AIR ANALYSIS, O2, CO2	\$ 195.00
94680	,26 EXHALED AIR ANALYSIS, O2	\$ 196.00
94669	MECHANICAL CHEST WALL OSCILLATION L	\$ 120.00
94668	CHEST WALL MANIPULATION, ADDED	\$ 122.00
94667	CHEST WALL MANIPULATION, INITIAL	\$ 95.00
94664	AEROSOL/VAPOR INHALATIONS, INITIAL	\$ 64.00
94662	NEGATIVE PRESSURE VENTILATION (CNP)	\$ 129.00
94660	POSITIVE AIRWAY PRESSURE (CPAP)	\$ 137.00
94645	CONT TX AROSOL MDCTN 4 AIRWAY OBS	\$ 63.00
94644	CONTNS INHLTN TX W AROSOL MEDICATN	\$ 200.00
94642	AEROSOL INHALATION TREATMENT	\$ 227.00
94640	AIRWAY INHALATION TREATMENT	\$ 67.00
94621	,26 PULMONARY STRESS TESTING, COMPLEX	\$ 580.00
94618	Pulmonary stress testing	\$ 121.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
94618	,TC Pulmonary stress testing	\$ 121.00
94618	,26 Pulmonary stress testing	\$ 121.00
94610	INTRAPULMNRY SURFCTANT ADMIN BY MD	\$ 199.00
94453	,26 HAST W/PHYS I & R WITH SUPPL O2 TIT	\$ 263.00
94452	,26 HAST WITH PHYS INTERPRET AND REPORT	\$ 191.00
94450	,26 HYPOXIA RESPONSE CURVE	\$ 245.00
94375	,26 RESPIRATORY FLOW VOLUME LOOP	\$ 142.00
94200	,26 LUNG FUNCTION TEST (MBC/MVV)	\$ 85.00
94070	,26 EVALUATION OF WHEEZING, PROLONGED	\$ 212.00
94060	,26 EVALUATION OF WHEEZING	\$ 218.00
94016	SPIROMETRY, PT RECORDED PHY REVIEW	\$ 88.00
94015	SPIROMETRY, PATIENT RECORDED	\$ 114.00
94014	SPIROMETRY, PAT RECORDED, PHYS REV	\$ 202.00
94013	MEASUREMENT OF LUNG VOLUME	\$ 69.00
94012	MEASUR SPIROMETIC BEFORE AND AFTER	\$ 498.00
94011	MEASUREMENT OF SPIROMETIC EXPITRATO	\$ 306.00
94010	,26 BREATHING CAPACITY TEST	\$ 131.00
94004	VENTILATR A&M NURSNG FACILTY PERDAY	\$ 179.00
94003	VENTILATN A&M HOSPITAL IP/OBSRVTN	\$ 239.00
94002	VENTILATION ASSIST AND MANAGEMENT	\$ 329.00
93990	,26 DUPLEX SCAN, HEMODIALYSIS ACCESS	\$ 507.00
93981	,26 PENILE VASCULAR STUDY, LIMITED	\$ 269.00
93980	,26 PENILE VASCULAR STUDY, COMPLETE	\$ 440.00
93979	,26 VISCERAL VASCULAR STUDY, LIMITED	\$ 451.00
93978	,26 VISCERAL VASCULAR STUDY, COMPLETE	\$ 699.00
93976	,26 VISCERAL VASCULAR STUDY, LIMITED	\$ 552.00
93975	,26 VISCERAL VASCULAR STUDY, COMPLETE	\$ 1,024.00
93971	,26 EXTREMITY VEINS STUDY, LIMITED	\$ 449.00
93970	,26 EXTREMITY VEINS STUDY, COMPLETE	\$ 722.00
93931	UPPER EXTREMITY ARTERY STUDY, LTD	\$ 478.00
93931	,26 UPPER EXTREMITY ARTERY STUDY, LTD	\$ 478.00
93930	UPPER EXTREMITY ARTERY STUDY, COMPL	\$ 766.00
93930	,26 UPPER EXTREMITY ARTERY STUDY, COMPL	\$ 766.00
93926	,26 LOWER EXTREMITY ARTERY STUDY, LTD	\$ 499.00
93925	,26 LOWER EXTREMITY ARTERY STUDY, COMPL	\$ 939.00
93924	,26 PHYSIOLOGIC EXTREMITY STUDY	\$ 607.00
93923	,26 PHYSIOLOGIC EXTREMITY STUDY	\$ 492.00
93922	,26 PHYSIOLOGIC EXTREMITY STUDY	\$ 316.00
93893	,26 T/CRAN DOPP STU EMBOL DET W/IV INJ	\$ 620.00
93892	,26 T/CRAN DOPP STU EBOLI DET W/O IVINJ	\$ 623.00
93890	,26 T/CRANIAL DOPP STU INTRACRA ART COM	\$ 1,019.00
93888	,26 INTRACRANIAL ARTERIES STUDY, LTD	\$ 507.00
93886	,26 INTRACRANIAL ARTERIES STUDY, COMPL	\$ 1,006.00
93882	,26 EXTRACRANIAL ARTERIES STUDY, LTD	\$ 482.00
93880	,26 EXTRACRANIAL ARTERIES STUDY, COMPL	\$ 737.00
93798	CARDIAC REHAB W/ECG MONITORING	\$ 50.00
93797	CARDIAC REHABILITATION	\$ 31.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
93790	REVIEW/REPORT BP RECORDING	\$ 64.00
93788	AMBULATORY BP ANALYSIS, 24+ HRS	\$ 21.00
93786	AMBULATORY BP RECORDING, 24+ HRS	\$ 109.00
93784	AMBULATORY BP MONITORING, 24+ HRS	\$ 193.00
93750	INTERROG OF VENTRICULAR ASSIT DEVICE	\$ 179.00
93745	,26 INITI SETUP & PRGRAM CARDIO-DEFIBRI	\$ 290.00
93724	,26 ANALYSIS OF PACEMAKER SYSTEM	\$ 989.00
93702	BIS EXTRACELLULAR FLUID ALYS LYPHPE	\$ 515.00
93701	BIOIMPEDANCE, THORACIC; ELECTRICAL	\$ 99.00
93662	,26 INTRACARDIAC EKG-THER/DIAG INT,S&I	\$ 1,020.00
93660	,26 TILT TABLE EVALUATION	\$ 569.00
93657	ABLATE L/R ATRIAL FIBRIL W/ ISOLATE	\$ 1,709.00
93656	EPHYS EVL TRNSPTL TX ATRIAL FIB ISO	\$ 4,498.00
93655	ICAR CATHETER ABLATION ARRHYTHMIA A	\$ 1,711.00
93654	EPHYS EVAL W/ ABLATION VENTRICULAR	\$ 4,486.00
93653	EPHYS EVAL W/ ABLATION SUPRAVENT AR	\$ 3,349.00
93650	ABLATE HEART DYSRHYTHM FOCUS	\$ 2,366.00
93644	,26 EPHYS EVAL SUBQ IMPLANTABLE DEFIBRI	\$ 697.00
93642	,26 ELECTROPHYSIOLOGY EVALUATION	\$ 1,306.00
93641	,26 ELECTROPHYSIOLOGY EVALUATION	\$ 2,431.00
93640	,26 ELECTROPHYSIOLOGY EVALUATION	\$ 1,906.00
93631	,26 OPERATIVE HEART PACING & MAPPING	\$ 2,507.00
93624	,26 ELECTROPHYSIOLOGIC FOLLOWUP STUDY	\$ 1,292.00
93623	,26 STIMULATION AND PACING OF HEART	\$ 2,980.00
93622	,26 ELECTROPHYS EVALUATION, LEFT VENTRL	\$ 7,455.00
93621	,26 ELECTROPHYS EVALUATION, LFT ATRIAL	\$ 7,133.00
93620	,26 ELECTROPHYS EVALUATION W/ARRHYTHMIA	\$ 3,847.00
93619	,26 ELECTROPHYS EVALUATION, W/O ARRHYTH	\$ 2,831.00
93618	,26 HEART RHYTHM PACING	\$ 1,535.00
93616	,26 ESOPHAGEAL RECORDING W/PACING	\$ 280.00
93615	,26 ESOPHAGEAL RECORDING OF ELECTROGRAM	\$ 186.00
93613	INTRACARDIAC ELECTROPHYSIO 3-D MPNG	\$ 1,190.00
93612	,26 INTRAVENTRICULAR PACING	\$ 902.00
93610	,26 INTRA-ATRIAL PACING	\$ 870.00
93609	,26 MAPPING OF TACHYCARDIA SITE(S)	\$ 1,549.00
93603	,26 RIGHT VENTRICULAR RECORDING	\$ 741.00
93602	,26 INTRA-ATRIAL RECORDING	\$ 644.00
93600	,26 BUNDLE OF HIS RECORDING	\$ 799.00
93583	PERCUTANEOUS TRANSCATHETER SEPTAL R	\$ 2,979.00
93582	PERCUTAN TRANSCATH CLOSURE PAT DUCT	\$ 2,672.00
93581	PERC TRCATH CL-CONG VEN SEP DEF-IMP	\$ 5,335.00
93580	PERCUT TRANCATH CLOS-CONG INTERATRI	\$ 3,885.00
93572	,26 DOPPLER INTRAVASC, EA ADD'L VESSEL	\$ 518.00
93571	,26 DOPPLER INTRAVASC, INITIAL VESSEL	\$ 1,049.00
93568	INJECT PULM ART HRT CATH	\$ 187.00
93567	INJECT SUPRVLV AORTOGRAPHY	\$ 212.00
93566	INJECT R VENTR/ATRIAL ANGIO	\$ 184.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
93565	INJECT L VENTR/ATRIAL ANGIO	\$ 171.00
93564	INJECT HRT CONGNL ART/GRFT	\$ 247.00
93563	INJECT CONGENITAL CARD CATH	\$ 223.00
93562	,26 ADDED CARDIAC OUTPUT MEASUREMENT	\$ 188.00
93561	,26 CARDIAC OUTPUT MEASUREMENT	\$ 252.00
93533	,26 CATHZATION, COMB RIGHT/LEFT HEART	\$ 7,923.00
93532	,26 CATHZATION, COMB RIGHT/LFT HEART	\$ 8,705.00
93531	,26 CATHZATION, COMB RIGHT/LEFT HEART	\$ 9,774.00
93530	,26 CATHETERIZATION, RIGHT HEART	\$ 3,633.00
93505	,26 BIOPSY OF HEART LINING	\$ 2,676.00
93503	PLACE FLOW DIRECTED HEART CATHETER	\$ 322.00
93464	,26 EXERCISE W/HEMODYNAMIC MEAS	\$ 886.00
93463	DRUG ADMIN & HEMODYNMIC MEAS	\$ 351.00
93462	L HRT CATH TRNSPTL PUNCTURE	\$ 839.00
93461	,26 R&L HRT ART/VENTRICLE ANGIO	\$ 5,440.00
93460	,26 R&L HRT ART/VENTRICLE ANGIO	\$ 4,861.00
93459	,26 L HRT ART/GRFT ANGIO	\$ 4,394.00
93458	,26 L HRT ARTERY/VENTRICLE ANGIO	\$ 4,036.00
93457	,26 R HRT ART/GRFT ANGIO	\$ 4,831.00
93456	,26 R HRT CORONARY ARTERY ANGIO	\$ 4,359.00
93455	,26 CORONARY ART/GRFT ANGIO S&I	\$ 3,914.00
93454	,26 CORONARY ARTERY ANGIO S&I	\$ 3,444.00
93453	,26 R&L HRT CATH W/VENTRICLGRPHY	\$ 4,428.00
93452	,26 LEFT HRT CATH W/VENTRCLGRPHY	\$ 3,433.00
93451	,26 RIGHT HEART CATH	\$ 3,163.00
93451	,TC RIGHT HEART CATH	\$ 3,163.00
93451	RIGHT HEART CATH	\$ 3,163.00
93355	ECHO TEE GUID TCAT ICAR/VESSEL STRU	\$ 821.00
93352	Admin ecg contrast agent	\$ 124.00
93351	,26 Stress tte complete	\$ 851.00
93350	,26 ECHO EXAM OF HEART/ECG MONITORING	\$ 687.00
93325	,26 DOPPLER COLOR FLOW MAPPING	\$ 91.00
93321	,26 DOPPLER ECHO EXAM OF HEART, LIMITED	\$ 97.00
93320	,26 DOPPLER ECHO EXAM OF HEART, COMPL	\$ 194.00
93318	,26 EKG,TEE-ASSESS CARDIAC PUMP FUNC	\$ 705.00
93317	,26 ECG, TRANSESOPHAGEAL, CNG HRT RPRT	\$ 925.00
93316	ECG, TRANSESOPHAGEAL, CNG HRT PROBE	\$ 98.00
93315	,26 ECG, TRANSESOPHAGEAL, CONG HEART	\$ 1,047.00
93314	,26 ECG, TRANSESOPHAGEAL HEART RPT ONLY	\$ 866.00
93313	ECG, TRANSESOPHAGEAL HEART, LIMITED	\$ 41.00
93312	,26 ECG, TRANSESOPHAGEAL, HEART, COMPL	\$ 887.00
93308	,26 ECG, TRANSTHORACIC, HEART, LIMITED	\$ 361.00
93307	,26 ECG, TRANSTHORACIC, HEART, COMPLETE	\$ 514.00
93306	,26 Tte w/doppler, complete	\$ 752.00
93304	,26 ECG, TRANSTHORACIC FOLLOWUP/LIMITED	\$ 587.00
93303	,26 ECG, TRANSTHORACIC, COMPLETE	\$ 850.00
93298	llr device interrogat remote	\$ 100.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
93297	Icm device interrogat remote	\$ 98.00
93296	Pm/icd remote tech serv	\$ 96.00
93295	Icd device interrogat remote	\$ 156.00
93294	Pm device interrogate remote	\$ 113.00
93293	,26 Pm phone r-strip device eval	\$ 189.00
93292	,26 Wcd device interrogate	\$ 163.00
93291	,26 llr device interrogate	\$ 156.00
93290	,26 Icm device eval	\$ 172.00
93289	,26 Icd device interrogate	\$ 237.00
93288	,26 Pm device eval in person	\$ 177.00
93287	,26 Pre-op icd device eval	\$ 174.00
93286	,26 Pre-op pm device eval	\$ 147.00
93285	,26 llr device eval progr	\$ 194.00
93284	,26 Icd device progr eval, mult	\$ 354.00
93283	,26 Icd device progr eval, dual	\$ 328.00
93282	,26 Icd device prog eval, 1 sngl	\$ 263.00
93281	,26 Pm device progr eval, multi	\$ 275.00
93280	,26 Pm device progr eval, dual	\$ 258.00
93279	,26 Pm device progr eval, sngl	\$ 218.00
93278	,26 SIGNAL-AVERAGED ECG	\$ 110.00
93272	ECG RECORDING, PHYS INTERPRETATION	\$ 88.00
93271	ECG RECORDING, MONITORING/ANALYSIS	\$ 616.00
93270	ECG RECORDING, RECORDING ONLY	\$ 35.00
93268	ECG RECORDING, XMIT/REVIEW/INTRPRET	\$ 737.00
93261	,26 INTERROGATION EVAL F2F IMPLANT SUBQ	\$ 236.00
93260	,26 PRGRMG DEV EVAL IMPLANTABLE SUBQ LE	\$ 258.00
93229	REMOTE 30 DAY ECG TECH SUPP	\$ 2,617.00
93228	Remote 30 day ecg rev/report	\$ 97.00
93227	ECG MONITOR/24 HRS, REVIEW/INTERP	\$ 92.00
93226	ECG MONITOR/24 HRS, ANALYSIS/REPORT	\$ 135.00
93225	ECG MONITOR/24 HRS, RECORDING	\$ 96.00
93224	ECG MONITOR/24 HRS, COMPLETE	\$ 323.00
93042	RHYTHM ECG, REPORT ONLY	\$ 25.00
93041	RHYTHM ECG, TRACING ONLY	\$ 22.00
93040	RHYTHM ECG WITH REPORT	\$ 47.00
93025	,26 MICROVOLT T-WAVE-ASSESSMENT VEN ARR	\$ 515.00
93024	,26 CARDIAC DRUG STRESS TEST	\$ 395.00
93018	CARDIOVASCULAR STRESS TEST REPORT	\$ 51.00
93017	CARDIOVASCULAR STRESS TEST TRACING	\$ 126.00
93016	CARDIOVASCULAR STRESS TEST	\$ 77.00
93015	CARDIOVASCULAR STRESS TEST	\$ 254.00
93010	ELECTROCARDIOGRAM REPORT	\$ 30.00
93005	ELECTROCARDIOGRAM, TRACING ONLY	\$ 33.00
93000	ELECTROCARDIOGRAM, COMPLETE (ECG)	\$ 63.00
92998	ANGPLSTY, PERCUT TRANS PUL, ADD'L	\$ 1,296.00
92997	ANGPLSTY, PERCUT TRANS PUL, 1ST VSL	\$ 2,565.00
92990	REVISION OF PULMONARY VALVE,BALLOON	\$ 4,339.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
92987	REVISION OF MITRAL VALVE, BALLOON	\$ 5,414.00
92986	REVISION OF AORTIC VALVE, BALLOON	\$ 5,255.00
92979	,26 ULTRASOUND, INTRAVASC, HEART ADD'L	\$ 685.00
92978	,26 ULTRASND, INTRAVAS, HEART, INT VESL	\$ 1,131.00
92977	DISSOLVE HEART VESSEL CLOT	\$ 213.00
92975	DISSOLVE HEART VESSEL CLOT	\$ 1,509.00
92974	TRANCATH PLAC RAD DEL DEV-BRACHYTHE	\$ 644.00
92973	PERCU TRNSLMNL CORNARY THROMBECTOMY	\$ 707.00
92971	CARDIOASSIST, EXTERNAL	\$ 400.00
92970	CARDIOASSIST, INTERNAL	\$ 761.00
92961	NULL	\$ 984.00
92960	HEART ELECTROCONVERSION, EXTERNAL	\$ 390.00
92953	TEMPORARY EXTERNAL PACING	\$ 5.00
92950	HEART/LUNG RESUSCITATION (CPR)	\$ 682.00
92943	PRQ TRLUML CORONRY CHRONIC OCCLUS R	\$ 2,663.00
92941	PRQ TRLUML CORONRY TOT OCCLUS REVAS	\$ 2,663.00
92937	PRQ TRLUML CORONARY BYP GRFT REVASC	\$ 2,365.00
92933	PRQ TRLUML CORONRY STENT/ATH/ANGIO	\$ 2,661.00
92928	PRQ TRLUML CORONARY STENT W/ANGIO O	\$ 2,367.00
92924	PRQ TRLUML CORONARY ANGIO/ATHERECT	\$ 2,538.00
92920	PRQ TRLUML CORONARY ANGIOPLASTY ONE	\$ 2,127.00
92640	DX ANALYSIS W PROGRMNG AUDTORY BRNST	\$ 336.00
92627	EVAL AUDIT REHAB STAT EAC ADD 15MIN	\$ 62.00
92626	EVAL AUDIT REHAB STATUS FIRST HOUR	\$ 266.00
92625	ASSESS TINNITUS	\$ 219.00
92621	EVAL CENTR AUDIT FUN W/REP ;EAC 15M	\$ 66.00
92620	EVAL CENTR AUDIT FUN W/REP INIT 60M	\$ 287.00
92617	FLX FIB ENDSC-SWAL LAR SEN TEST,REP	\$ 147.00
92616	FLX FIB ENDSC-SWAL,LAR SEN TEST;REC	\$ 354.00
92615	FLEX FIB ENDOSC,LAR SEN TEST;REPORT	\$ 120.00
92614	FLEX FIB ENDOSC EV-LAR SEN TEST;REC	\$ 239.00
92613	FLEX FIB ENDOSC EVAL-SWAL;INT-REPO	\$ 135.00
92612	FLEX FIB ENDOSC EVAL-SWA;VID RECORD	\$ 243.00
92611	MOT FLUO EVAL-SWALLOW FUNC-RECORDIN	\$ 332.00
92610	EVAL-ORAL PHARYNGEAL SWALLOW FUNC.	\$ 256.00
92609	THERAPEUTIC SER-SPEECH GEN DEVICE	\$ 385.00
92608	EVAL SPEECH GEN-COMM DEV,ADD 30 MIN	\$ 184.00
92607	EVAL SPEECH GEN AUG-COMM DEV,1ST Hr	\$ 458.00
92604	DIAG ANA COCH IMPL,7YRS/OLDER;REPRO	\$ 239.00
92603	DIAG ANA COCH IMPL 7YRS/OLDER W/PRO	\$ 428.00
92602	DIAG ANA COCH IMPL UNDER 7YRS;REPRO	\$ 249.00
92601	DIAG ANA COCH IMPL,UNDER 7 YR;W/PRO	\$ 441.00
92597	ORAL SPEECH DEVICE EVALUATION	\$ 258.00
92596	EAR PROTECTOR EVALUATION	\$ 247.00
92588	,26 EVOKED AUDITORY EXAM, COMPREHENSIVE	\$ 119.00
92587	,26 EVOKED AUDITORY EXAM, LIMITED	\$ 79.00
92584	ELECTROCOCHLEOGRAPHY	\$ 276.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
92583	SELECT PICTURE AUDIOMETRY	\$ 180.00
92582	CONDITIONING PLAY AUDIOMETRY	\$ 275.00
92579	VISUAL REINFORCEMENT AUDIOMETRY	\$ 134.00
92577	STENGER SPEECH TEST	\$ 53.00
92576	SYNTHETIC SENTENCE TEST	\$ 135.00
92575	SENSORINEURAL ACUITY TEST	\$ 244.00
92572	STAGGERED SPONDAIC WORD TEST	\$ 160.00
92571	FILTERED SPEECH HEARING TEST	\$ 101.00
92570	ACOUSTIC IMMITTANCE TEST INC TYMPAN	\$ 106.00
92568	ACOUSTIC REFLEX TESTING	\$ 55.00
92567	TYMPANOMETRY	\$ 38.00
92565	STENGER TEST, PURE TONE	\$ 59.00
92564	SISI HEARING TEST	\$ 94.00
92563	TONE DECAY HEARING TEST	\$ 114.00
92562	LOUDNESS BALANCE TEST	\$ 168.00
92561	BEKESY AUDIOMETRY, DIAGNOSIS	\$ 147.00
92557	COMPREHENSIVE HEARING TEST	\$ 115.00
92556	SPEECH AUDIOMETRY, W/SPEECH RECOG	\$ 142.00
92555	SPEECH THRESHOLD AUDIOMETRY	\$ 90.00
92553	AUDIOMETRY, AIR & BONE	\$ 143.00
92552	PURE TONE AUDIOMETRY, AIR	\$ 118.00
92550	TYMPANOMETRY AND REFLEX THRESHOLD	\$ 79.00
92548	,26 POSTUROGRAPHY, COMPUTERIZED DYNAMIC	\$ 177.00
92547	VERTICAL ELECTRODES	\$ 32.00
92546	,26 SINUSOIDAL ROTATIONAL TEST	\$ 413.00
92545	,26 OSCILLATING TRACKING TEST	\$ 60.00
92544	,26 3PTOKINETIC NYSTAGMUS TEST	\$ 63.00
92542	,26 POSITIONAL NYSTAGMUS TEST	\$ 104.00
92541	,26 SPONTANEOUS NYSTAGMUS TEST	\$ 90.00
92540	,26 BASIC VESTIBULAR EVA INC SPONT NYST	\$ 380.00
92526	SWALLOWING/ORAL FUNCTION TREATMENT	\$ 308.00
92524	BEHAVIORAL & QUALIT ANALYSIS VOICE	\$ 319.00
92523	EVAL SPEECH SOUND PRODUCT LANGUAGE	\$ 682.00
92522	EVALUATION OF SPEECH SOUND PRODUCTI	\$ 327.00
92521	EVALUATION OF SPEECH FLUENCY (STUTT	\$ 400.00
92520	LARYNGEAL FUNCTION STUDIES	\$ 147.00
92516	FACIAL NERVE FUNCTION TEST	\$ 81.00
92512	NASAL FUNCTION STUDIES	\$ 103.00
92511	NASOPHARYNGOSCOPY W/ENDOSCOPY	\$ 137.00
92508	SPEECH/HEARING THERAPY, GROUP	\$ 85.00
92507	SPEECH/HEARING THERAPY, INDIVIDUAL	\$ 278.00
92504	EAR MICROSCOPY EXAM	\$ 33.00
92502	EAR & THROAT EXAM, GEN'L ANESTHESIA	\$ 340.00
92326	REPLACE CONTACT LENS	\$ 141.00
92325	MODIFY CONTACT LENS	\$ 166.00
92317	PRESCRIBE CORNEOSCLERA CONTACT LENS	\$ 75.00
92316	PRESCRIBE CONTACT LENSES, APHAKIA	\$ 111.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
92315	PRESCRIBE CONTACT LENS FOR APHAKIA	\$ 75.00
92313	CONTACT LENS FITTING, CORNEOSCLERAL	\$ 157.00
92312	FIT CONTACT LENSES FOR APHAKIA	\$ 218.00
92311	FIT CONTACT LENS FOR APHAKIA	\$ 189.00
92287	,26 INTERNAL EYE PHOTOGRAPHY	\$ 559.00
92286	,26 INTERNAL EYE PHOTOGRAPHY	\$ 140.00
92285	,26 EXTERNAL EYE PHOTOGRAPHY	\$ 83.00
92284	,26 DARK ADAPTATION EYE EXAM	\$ 220.00
92283	,26 COLOR VISION EYE EXAM, EXTENDED	\$ 195.00
92270	,26 ELECTRO-OCULOGRAPHY	\$ 349.00
92265	,26 EYE MUSCLE EVALUATION, NEEDLE	\$ 310.00
92260	OPHTHALMODYNAMOMETRY	\$ 38.00
92250	,26 FUNDUS PHOTOGRAPHY	\$ 283.00
92250	FUNDUS PHOTOGRAPHY	\$ 283.00
92240	,26 ANGIOGRAPHY, INDOCYANINE-GREEN	\$ 741.00
92235	,26 FLUORESCEIN ANGIOSCOPY, MULTIFRAME	\$ 389.00
92235	FLUORESCEIN ANGIOSCOPY, MULTIFRAME	\$ 389.00
92230	FLUORESCEIN ANGIOSCOPY	\$ 118.00
92228	,26 REMOTE RETINAL IMAGING MGMT	\$ 122.00
92227	REMOTE DX RETINAL IMAGING	\$ 53.00
92145	,26 CORNEA HYSTERESIS DETERMIN IMPULSE	\$ 56.00
92136	,26 OPHTHALMIC BIO W/INTRAOCULAR LENS PO	\$ 224.00
92134	CPTR OPHTH DX IMG POST SEGMENT	\$ 158.00
92134	,26 CPTR OPHTH DX IMG POST SEGMENT	\$ 158.00
92133	,26 CMPTR OPHTH IMG OPTIC NERVE	\$ 154.00
92133	CMPTTR OPHTH IMG OPTIC NERVE	\$ 154.00
92132	,26 CMPTR OPHTH DX IMG ANT SEGMENT	\$ 114.00
92100	SERIAL TONOMETRY EVALUATION(S)	\$ 116.00
92083	,26 VISUAL FIELD EXAM(S), EXTENDED	\$ 227.00
92082	,26 VISUAL FIELD EXAM(S), INTERMEDIATE	\$ 171.00
92081	,26 VISUAL FIELD EXAM(S), LIMITED	\$ 122.00
92072	FIT CONTACT LENS FOR MANAGMENT	\$ 342.00
92071	CONTACT LENS FITTING FOR TX	\$ 115.00
92065	,26 ORTHOPTIC/PLEOPTIC TRAINING	\$ 192.00
92060	,26 SPECIAL EYE EVALUATION,SENSORIMOTOR	\$ 225.00
92025	,26 COMPUTERIZED CORNEAL TOPOGRAPHY	\$ 133.00
92020	GONIOSCOPY	\$ 73.00
92019	LIMITED EYE EXAM/TREATMENT, ANESTH	\$ 255.00
92018	COMPLETE EYE EXAM/TREATMENT, ANESTH	\$ 505.00
92014	COMP EYE EXAMINATION, ESTAB PATIENT	\$ 274.00
92012	INTERMED EYE EXAM, ESTAB PATIENT	\$ 182.00
92004	COMPREHENSIVE EYE EXAM, NEW PATIENT	\$ 341.00
92002	INTERMEDIATE EYE EXAM, NEW PATIENT	\$ 165.00
91200	,26 LIVER ELASTOGRAPHY W/O IMAG W/I&R	\$ 136.00
91133	,26 ELCTROGSTRGRPHY DGNSTC TRNSCU W PT	\$ 1,283.00
91132	,26 ELECTROGASTROGRPHY, DGNSTC TRSCUTNS	\$ 1,198.00
91122	,26 ANAL PRESSURE RECORDING	\$ 919.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
91120	,26 GASTRIC MOTILITY STUDIES	\$ 1,803.00
91117	COLON MOTILITY 6 HR STUDY	\$ 490.00
91112	,26 GI TRANSIT & PRES MEAS WIRELESS CAP	\$ 5,361.00
91111	,26 GI TRACT IMAGING INTRALUMNL ESOPHGS	\$ 3,047.00
91110	,26 GASTRO TRACT IMAG INTRA	\$ 3,170.00
91065	,26 BREATH HYDROGEN TEST	\$ 296.00
91040	,26 ESOPHAG BALLOON DISTENS PROVOC STUD	\$ 1,887.00
91038	,26 EFT GERT W/NAS CATH ELEC PL;PROLONG	\$ 1,624.00
91037	,26 EFT GERT W/NASAL CATH ELECTRODE S&I	\$ 609.00
91035	,26 ESOPHAG GER TEST; W/TELEMETRY ELEC	\$ 1,788.00
91034	,26 ESOPHAG,GER TEST; W NASAL CATH S&I	\$ 702.00
91030	,26 ACID PERFUSION TEST OF ESOPHAGUS	\$ 508.00
91022	,26 DEODENAL MOTILITY(MANOMETRIC) STUDY	\$ 610.00
91020	,26 GASTRIC MOTILITY STUDY	\$ 949.00
91013	,26 ESOPHGL MOTIL W/STIM/PERFUS	\$ 94.00
91010	,26 ESOPHAGUS MOTILITY STUDY	\$ 736.00
90997	HEMOPERFUSION	\$ 317.00
90970	Esrdr home pt serv p day, 20+	\$ 29.00
90969	Esrdr home pt srv p day 12-19	\$ 54.00
90968	Esrdr home pt srv p day, 2-11	\$ 56.00
90967	Esrdr home pt serv p day, <2	\$ 63.00
90966	Esrdr home pt, serv p mo, 20+	\$ 846.00
90965	Esrdr home pt serv p mo 12-19	\$ 1,608.00
90964	Esrdr home pt serv p mo, 2-11	\$ 1,682.00
90963	Esrdr home pt, serv p mo, <2	\$ 1,922.00
90962	Esrdr serv, 1 visit p mo, 20+	\$ 654.00
90961	Esrdr srv, 2-3 vsts p mo, 20+	\$ 847.00
90960	Esrdr srv, 4 visits p mo, 20+	\$ 1,006.00
90959	Esrdr serv, 1 vst p mo, 12-19	\$ 1,049.00
90958	Esrdr srv 2-3 vsts p mo 12-19	\$ 1,547.00
90957	Esrdr srv, 4 vsts p mo, 12-19	\$ 2,277.00
90956	Esrdr srv, 1 visit p mo, 2-11	\$ 1,129.00
90955	Esrdr srv 2-3 vsts p mo, 2-11	\$ 1,615.00
90954	Esrdr serv, 4 vsts p mo, 2-11	\$ 2,868.00
90951	Esrdr serv, 4 visits p mo, <2	\$ 3,311.00
90947	DIALYSIS, REPEATED EVALUATION	\$ 439.00
90945	DIALYSIS, ONE EVALUATION	\$ 304.00
90937	HEMODIALYSIS, REPEATED EVALUATION	\$ 367.00
90935	HEMODIALYSIS, ONE EVALUATION	\$ 258.00
90901	BIOFEEDBACK TRAINING	\$ 70.00
90880	HYPNOTHERAPY	\$ 313.00
90870	ELECTROCONVULSIVE THERAPY (ECT)	\$ 375.00
90869	TCRAN MAGN STIM REDETERMINE	\$ 924.00
90868	TCRANIAL MAGN STIM TX DELI	\$ 641.00
90867	TCRANIAL MAGN STIM TX PLAN	\$ 1,103.00
90865	NARCOSYNTHESIS FOR DX & THERAPY	\$ 437.00
90853	PSYCHOTHERAPY, GROUP (NO MULTI-FAM)	\$ 84.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
90849	MULT-FAMILY PSYCHOTHERAPY, GROUP	\$ 105.00
90847	FAMILY PSYCHOTHERAPY, W/PT PRESENT	\$ 355.00
90846	FAMILY PSYCHOTHERAPY, W/O PATIENT	\$ 342.00
90845	PSYCHOANALYSIS	\$ 306.00
90840	PSYCHOTHERAPY FOR CRISIS EACH ADDL	\$ 213.00
90839	PSYCHOTHERAPY FOR CRISIS INITIAL 60	\$ 442.00
90838	PSYCHOTHERAPY PT&/FAMILY W/E&M SRVC	\$ 368.00
90837	PSYCHOTHERAPY PATIENT &/ FAMILY 60	\$ 423.00
90836	PSYCHOTHERAPY PT&/FAMILY W/E&M SRVC	\$ 282.00
90834	PSYCHOTHERAPY PATIENT &/ FAMILY 45	\$ 284.00
90833	PSYCHOTHERAPY PT&/FAMILY W/E&M SRVC	\$ 222.00
90832	PSYCHOTHERAPY PATIENT &/ FAMILY 30	\$ 213.00
90792	PSYCHIATRIC DIAGNOSTIC EVAL W/MEDIC	\$ 481.00
90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	\$ 425.00
90785	PSYCHOTHERAPY COMPLEX INTERACTIVE	\$ 47.00
89230	SWEAT COLL BY IONTOPHORESIS %	\$ 11.00
89220	SPUTUM OBTAINING SPECIMEN %	\$ 62.00
89060	,26 EXAM, SYNOVIAL FLUID CRYSTALS %	\$ 24.00
89049	CHCT FOR MLG HYPERTHERMIA SUS I&R	\$ 229.00
88388	,26 MACRO EXAM DISSEC CONJ W/TOUCH IMPR	\$ 131.00
88387	,26 MACROSCOPIC EXAM DISSEC & PREP TISS	\$ 123.00
88381	,26 MICRODISSECTION, MANUAL	\$ 662.00
88380	,26 MICRODISSECTION, LASER	\$ 486.00
88377	,26 M/PHMTRC ALYS ISH QUANT/SEMIQ MNL E	\$ 1,479.00
88375	OPTICAL ENDOMICROSCOPIC IMAGE INTER	\$ 176.00
88374	,26 M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR	\$ 1,254.00
88373	,26 M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR	\$ 264.00
88372	,26 PROTEIN ANALYSIS W/IMMUNOL PROBE %	\$ 79.00
88371	,26 PROTEIN ANALYSIS/WESTERN BLOT %	\$ 74.00
88369	,26 M/PHMTRC ALYS ISH QUANT/SEMIQ MNL P	\$ 414.00
88368	,26 MORPHOMET STUD IN SITY HYBRID, MANU	\$ 475.00
88367	,26 MORPHOMET STUD IN SITU HYBRID,COMP	\$ 408.00
88366	,26 IN SITU HYBRIDIZATION EA MULTIPLEX	\$ 1,008.00
88365	,26 TISSUE HYBRIDIZATION %	\$ 659.00
88364	,26 IN SITU HYBRIDIZATION EA ADDL PROBE	\$ 501.00
88363	XM ARCHIVE TISSUE MOLEC ANAL	\$ 71.00
88362	,26 NERVE TEASING PREPARATIONS %	\$ 817.00
88361	,26 MORPHOM STUD, TUMR CHEM, COMP ASSTD	\$ 456.00
88360	,26 MORPHOMET STUD, TUMR CHEM, MANUAL %	\$ 451.00
88358	,26 ANALYSIS, TUMOR %	\$ 482.00
88356	,26 ANALYSIS, NERVE %	\$ 837.00
88355	,26 ANALYSIS, SKELETAL MUSCLE %	\$ 479.00
88348	,26 ELECTRON MICROSCOPY, DIAGNOSTIC %	\$ 1,418.00
88346	,26 IMMUNOFLUORESCENT STUDY, DIRECT %	\$ 457.00
88344	,26 IMHISTOCHEM/CYTCHM EA MULTIPLEX ANT	\$ 627.00
88342	,26 IMMUNOCYTOCHEMISTRY, EACH %	\$ 380.00
88341	,26 IMHISTOCHEM/CYTCHM EA ADDL ANTIBODY	\$ 334.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
88334	,26 PATH CONS SURG CYTOLO EXAM ADD SITE	\$ 198.00
88333	,26 PATH CONS SURG CYTOLOG EXAM INI SIT	\$ 317.00
88332	,26 PATHOLOGY CONSULTATION IN SURGERY %	\$ 194.00
88331	,26 PATHOLOGY CONSULTATION IN SURGERY %	\$ 347.00
88329	PATHOLOGY CONSULTATION IN SURGERY %	\$ 132.00
88325	COMPREHENSIVE REVIEW OF DATA %	\$ 523.00
88323	,26 MICROSLIDE PREPARATION/CONSULTATIO%	\$ 399.00
88321	MICROSLIDE CONSULTATION %	\$ 303.00
88319	,26 ENZYME CONSTITUENT HISTOCHEMISTRY %	\$ 407.00
88314	,26 HISTOCHEMICAL STAIN %	\$ 353.00
88313	,26 SPECIAL STAINS, GROUP II %	\$ 279.00
88312	,26 SPECIAL STAINS, GROUP I %	\$ 383.00
88311	,26 DECALCIFICATION OF TISSUE %	\$ 78.00
88309	,26 TISSUE EXAM BY PATHOLOGIST, LVL VI%	\$ 1,517.00
88307	,26 TISSUE EXAM BY PATHOLOGIST, LEVEL %	\$ 1,004.00
88305	,26 TISSUE EXAM BY PATHOLOGIST, LVL IV%	\$ 249.00
88304	,26 TISSUE EXAM BY PATHOLOGIST, LVL III%	\$ 151.00
88302	,26 TISSUE EXAM BY PATHOLOGIST, LVL II%	\$ 115.00
88300	,26 TISSUE EXAM BY PATHOLOGIST, LEVEL %	\$ 59.00
88291	CYTOGENETICS/MOLECULAR INTERP/REPT%	\$ 121.00
88189	FLOW CYTOMETRY, INTERPRET; >=16 MAR	\$ 304.00
88188	FLOW CYTOMETRY INTERPRET;9-15 MARKE	\$ 226.00
88187	FLOW CYTOMETRY INTERPRET 2-8 MARKER	\$ 136.00
88185	FLOW CYTOMETRY TC EACH ADD MARKER	\$ 90.00
88184	FLOW CYTOMETRY, TC 1ST MARKER	\$ 251.00
88182	,26 CELL MARKER STUDY, CELL CYCLE/DNA %	\$ 502.00
88177	,26 CYTP C/V AUTO THIN LYN ADDL	\$ 104.00
88173	,26 INTERPRETATION OF SMEAR %	\$ 554.00
88172	,26 EVALUATION OF SMEAR %	\$ 198.00
88162	,26 CYTOPATHOLOGY, EXTENSIVE STUDY %	\$ 358.00
88161	,26 CYTOPATHOLOGY,PREP/SCREEN/INTERPRE%	\$ 247.00
88160	,26 CYTOPATHOLOGY, SCREEN/INTERPRET %	\$ 258.00
88141	CYTOPATH, CERV/VAG, PHY INTERP %	\$ 112.00
88125	,26 FORENSIC CYTOPATHOLOGY %	\$ 96.00
88121	,26 CYTP URINE 3-5 PROBES CMPTR	\$ 1,626.00
88120	,26 CYTP URNE 3-5 PROBES EA SPEC	\$ 2,130.00
88112	,26 CYTOPATHOLOGY CELL ENHANCEMENT %	\$ 242.00
88108	,26 MICROSCOPIC CELL EXAM (SACCOMANNO)%	\$ 225.00
88106	,26 MICROSCOPIC EXAM OF CELLS, FILTER %	\$ 236.00
88104	,26 MICROSCOPIC EXAM OF CELLS, SMEARS %	\$ 246.00
87207	,26 SMEAR, STAIN & INTERPRET, SPECIAL %	\$ 20.00
87164	,26 DARK FIELD EXAMINATION,W/COLLECTIO%	\$ 36.00
86580	TB INTRADERMAL TEST %	\$ 35.00
86510	HISTOPLASMOSIS SKIN TEST %	\$ 26.00
86490	COCCIDIOIDOMYCOSIS SKIN TEST %	\$ 327.00
86486	SKIN TEST, NOS ANTIGEN	\$ 21.00
86485	CANDIDA SKIN TEST %	\$ 26.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
86335	,26 IMMUNFIX E-PHORSIS/URINE/CSF	\$ 98.00
86334	,26 IMMUNOFIXATION ELECTROPHORESIS %	\$ 74.00
86327	,26 IMMUNOELECTROPHORESIS ASSAY (2-D) %	\$ 90.00
86325	,26 IMMUNOELECTROPHORESIS, OTHER FLUID%	\$ 75.00
86320	,26 SERUM IMMUNOELECTROPHORESIS %	\$ 90.00
86256	,26 FLUORESCENT ANTIBODY TITER, EACH %	\$ 40.00
86255	,26 FLUOR ANTIBODY SCRIN, NON-INFECT, E%	\$ 40.00
86079	PHYSICIAN BLOOD BANK SERVICE %	\$ 180.00
86078	PHYSICIAN BLOOD BANK SERVICE %	\$ 181.00
86077	PHYSICIAN BLOOD BANK SERVICE %	\$ 181.00
85576	,26 BLOOD PLATELET AGGREGATION,IN VITR%	\$ 75.00
85576	,QW BLOOD PLATELET AGGREGATION,IN VITR%	\$ 75.00
85396	COAGULATION/FIBRINOLYSIS WHOLE BLO%	\$ 72.00
85390	,26 FIBRINOLYSINS/COAGULOPATHY SCREEN %	\$ 46.00
85097	BONE MARROW INTERPRETATION %	\$ 176.00
85060	BLOOD SMEAR INTERPRETATION %	\$ 88.00
84182	,26 WESTERN BLOT W/IMMUNOLOGIC PROBE %	\$ 88.00
84181	,26 WESTERN BLOT TEST %	\$ 57.00
84166	,26 PROTEIN E-PHORESIS/URINE/CSF %	\$ 59.00
84165	,26 ASSAY SERUM PROTEIN,ELECTROPHORETI%	\$ 36.00
83020	,26 ASSAY HEMOGLOBIN, ELECTROPHORESIS %	\$ 43.00
80502	LAB PATHOLOGY CONSULT,COMPREHENSIV%	\$ 252.00
80500	LAB PATHOLOGY CONSULTATION,LIMITED%	\$ 69.00
79445	,26 RADIOTHERAPY INTRA-ARTERIAL ADM	\$ 780.00
79440	,26 INTRA-ARTICULAR RADIOTHERAPY	\$ 426.00
79403	,26 MONOCLONAL ANTIBODY BY INTRAVENOUS	\$ 681.00
79300	,26 INTERSTITIAL RADIOTHERAPY	\$ 1,111.00
79200	,26 INTRACAVITARY RADIOTHERAPY	\$ 476.00
79101	,26 RADIOPHARMACEUTICAL THERP, IV ADM	\$ 533.00
79005	,26 RADIOPHARMACEUTICAL THERP, ORAL ADM	\$ 495.00
78816	,26 TUMOR IMG, PET W/CT; WHOLE BODY	\$ 5,669.00
78815	,26 TUMOR IMG, PET W/CT; SKULL-MIDTHIGH	\$ 5,666.00
78814	,26 TUMOR IMG,PET W/ CT; LTD AREA	\$ 5,623.00
78813	,26 TUMOR IMG, PET; WHOLE BODY	\$ 5,574.00
78812	,26 TUMOR IMG, PET; SKULL BASE-MID THIG	\$ 5,577.00
78811	,26 TUMOR IMG, PET; LTD AREA CHT,HED,NK	\$ 4,898.00
78808	Iv inj ra drug dx study	\$ 149.00
78804	,26 RADIOPHARM LOCAL TUMOR/WHOLE BODY	\$ 2,480.00
78803	,26 NUCLEAR SCAN OF TUMOR (SPECT)	\$ 1,455.00
78802	,26 NUCLEAR EXAM OF TUMORS, WHOLE BODY	\$ 1,170.00
78801	,26 NUCLEAR EXAM OF TUMORS	\$ 1,068.00
78800	,26 NUCLEAR EXAM OF TUMOR, LIMITED	\$ 971.00
78761	,26 NUCLEAR SCAN OF TESTES/BLOOD FLOW	\$ 794.00
78740	,26 NUCLEAR EXAM OF URETER	\$ 815.00
78730	,26 NUCLEAR EXAM OF BLADDER	\$ 284.00
78725	,26 NUCLEAR EXAM OF KIDNEY	\$ 406.00
78709	,26 KIDNEY IMAGE, MULT W/& W/O DRUG INT	\$ 1,367.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
78708	,26 KIDNEY IMAGE, SINGL W/DRUG INTERV	\$ 656.00
78707	,26 KIDNEY IMAGE, SINGL W/O DRUG INTERV	\$ 871.00
78701	,26 NUCLEAR SCAN OF KIDNEY/BLOOD FLOW	\$ 822.00
78700	,26 NUCLEAR SCAN OF KIDNEY	\$ 641.00
78660	,26 NUCLEAR EXAM OF TEAR FLOW	\$ 689.00
78650	,26 CEREBROSPINAL FLUID FLOW SCAN	\$ 1,034.00
78645	,26 CEREBROSPINAL FLUID FLOW SCAN	\$ 1,218.00
78635	,26 CEREBROSPINAL FLUID FLOW SCAN	\$ 1,269.00
78630	,26 CEREBROSPINAL FLUID FLOW SCAN	\$ 1,268.00
78610	,26 NUCLEAR SCAN OF BRAIN/BLOOD FLOW	\$ 653.00
78608	,26 BRAIN IMAGING, PET, METABOLIC EVAL	\$ 5,502.00
78606	,26 BRAIN IMAGING, COMPLETE W/BLOOD FLW	\$ 1,241.00
78605	,26 BRAIN IMAGING, COMPLETE, STATIC	\$ 750.00
78601	,26 BRAIN IMAGING, LIMITED W/BLOOD FLOW	\$ 815.00
78600	,26 BRAIN IMAGING, LIMITED, STATIC	\$ 692.00
78598	,26 NULL	\$ 1,138.00
78597	,26 NULL	\$ 747.00
78582	,26 NULL	\$ 1,247.00
78580	,26 NUCLEAR SCAN OF LUNG, PARTICULATE	\$ 884.00
78579	,26 NULL	\$ 702.00
78496	,26 NUCLEAR BLOOD POOL IMAGING, SINGLE	\$ 156.00
78494	,26 NUCLEAR BLOOD POOL IMAGING	\$ 842.00
78492	,26 MYOCARDIAL PET, MULTIPLE	\$ 5,554.00
78491	,26 MYOCARDIAL PET, SINGLE	\$ 3,395.00
78483	,26 NUCLEAR SCANS, CARDIAC BLOOD POOL	\$ 889.00
78481	,26 NUCLEAR SCAN, CARDIAC BLOOD POOL	\$ 654.00
78473	,26 NUCLEAR SCAN, CARDIAC MUGA	\$ 1,072.00
78472	,26 NUCLEAR SCAN, CARDIAC BLOOD POOL	\$ 848.00
78469	,26 NUCLEAR SCAN OF HEART MUSCLE (3D)	\$ 833.00
78468	,26 NUCLEAR SCAN OF HEART MUSCLE	\$ 720.00
78466	,26 NUCLEAR SCAN OF HEART MUSCLE	\$ 747.00
78459	,26 MYOCARDIAL PET METABOLIC EVALUATION	\$ 4,894.00
78458	,26 NUCLEAR SCAN VEIN CLOT, BOTH SIDES	\$ 767.00
78457	,26 NUCLEAR SCAN VEIN CLOT, ONE SIDE	\$ 654.00
78456	,26 NULL	\$ 1,151.00
78454	,26 NULL	\$ 1,624.00
78453	,26 MYOCARDIAL PERFUSION IMAG PLANAR	\$ 1,133.00
78452	,26 MULTIPLE STUDIES AT REST AND STRESS	\$ 1,754.00
78451	,26 MYOCARDIAL PERFUSION IMAGING	\$ 1,253.00
78445	,26 NUCLEAR SCAN, BLOOD FLOW, NON-CARD	\$ 738.00
78428	,26 NUCLEAR EXAM OF HEART SHUNT	\$ 690.00
78414	,26 NUCLEAR EXAM OF HEART CIRCULATION	\$ 1,112.00
78315	,26 NUCLEAR SCAN OF BONE, 3-PHASE	\$ 1,297.00
78306	,26 NUCLEAR SCAN OF SKELETON	\$ 1,130.00
78305	,26 NUCLEAR SCAN OF BONES, MULTIPLE	\$ 1,040.00
78300	,26 NUCLEAR SCAN OF BONE, LIMITED	\$ 859.00
78291	,26 TEST ABDOMINAL VENOUS DRAIN	\$ 956.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
78290	,26 NUCLEAR SCAN OF BOWEL	\$ 1,239.00
78282	,26 NUCLEAR EXAM OF GI PROTEIN LOSS	\$ 248.00
78278	,26 NUCLEAR SCAN FOR GI BLOOD LOSS	\$ 1,305.00
78266	,26 Gastric emptying imaging study (eg,	\$ 1,610.00
78265	,26 Gastric emptying imaging study (eg,	\$ 1,476.00
78264	,26 NUCLEAR EXAM OF STOMACH EMPTYING	\$ 1,247.00
78262	,26 NUCLEAR EXAM OF GULLET REFLUX	\$ 900.00
78261	,26 NUCLEAR SCAN OF GASTRIC MUCOSA	\$ 763.00
78258	,26 NUCLEAR IMAGING OF ESOPHAGUS	\$ 809.00
78232	,26 NUCLEAR EXAM, SALIVARY GLAND FUNCT	\$ 388.00
78231	,26 NUCLEAR SCANS OF SALIVARY GLAND	\$ 395.00
78230	,26 NUCLEAR SCAN OF SALIVARY GLAND	\$ 654.00
78227	,26 NULL	\$ 1,663.00
78226	,26 NULL	\$ 1,230.00
78216	,26 NUCLEAR SCAN OF LIVER & SPLEEN	\$ 484.00
78215	,26 NUCLEAR SCAN OF LIVER & SPLEEN	\$ 735.00
78202	,26 NUCLEAR SCAN OF LIVER/BLOOD FLOW	\$ 773.00
78201	,26 NUCLEAR SCAN OF LIVER, STATIC	\$ 719.00
78195	,26 NUCLEAR SCAN OF LYMPH SYSTEM	\$ 1,325.00
78191	,26 NUCLEAR EXAM OF PLATELET SURVIVAL	\$ 469.00
78185	,26 10CLEAR SCAN OF SPLEEN	\$ 642.00
78140	,26 NUCLEAR EXAM OF RED BLOOD CELLS	\$ 416.00
78130	,26 RED CELL SURVIVAL EXAM	\$ 469.00
78122	,26 NUCLEAR EXAM, WHOLE BLOOD VOLUME	\$ 358.00
78121	,26 NUCLEAR EXAMS OF RBC VOLUME	\$ 292.00
78120	,26 NUCLEAR EXAM OF RBC VOLUME	\$ 269.00
78111	,26 NUCLEAR EXAMS OF PLASMA VOLUME	\$ 279.00
78110	,26 NUCLEAR EXAM OF PLASMA VOLUME	\$ 263.00
78104	,26 NUCLEAR SCAN, BONE MARROW, COMPLETE	\$ 934.00
78103	,26 NUCLEAR SCANS OF BONE MARROW	\$ 810.00
78102	,26 NUCLEAR SCAN, BONE MARROW, LIMITED	\$ 637.00
78075	,26 NUCLEAR SCAN OF ADRENAL GLAND(S)	\$ 1,683.00
78072	,26 PARATHYROID IMAGING W/TOMOGRAPHIC S	\$ 1,662.00
78071	,26 PARATHYROID PLANAR IMAGING W/WO SUB	\$ 1,321.00
78070	,26 NUCLEAR SCAN OF PARATHYROID	\$ 1,110.00
78020	,26 CARCINOMA METAST UPTAKE, THYROID	\$ 306.00
78018	,26 WHOLE BODY NUCLEAR SCANS, THYROID	\$ 1,172.00
78016	,26 EXTENSIVE THYROID SCAN FOR TUMOR	\$ 1,055.00
78015	,26 NUCLEAR SCAN OF THYROID FOR TUMOR	\$ 843.00
78014	,26 THYROID UPTAKE W/BLOOD FLOW SNGLE/M	\$ 902.00
78013	,26 THYROID IMAGING WITH VASCULAR FLOW	\$ 720.00
78012	,26 THYROID UPTAKE SINGLE/MULTIPLE QUAN	\$ 308.00
77789	,26 RADIOELEMENT SURFACE APPLICATION	\$ 465.00
77778	,26 IMPLANT INTERSTITIAL RADIOELEMENT	\$ 3,126.00
77772	,26 over 12 channels	\$ 3,302.00
77771	,26 2-12 channels	\$ 2,189.00
77770	,26 Remote afterloading high dose rate	\$ 1,231.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
77768	,26 lesion diameter over 2.0 cm and 2 o	\$ 1,324.00
77767	,26 Remote afterloading high dose rate	\$ 885.00
77763	,26 IMPLANT INTRACAVITARY RADIOELEMENT	\$ 2,710.00
77762	,26 IMPLANT INTRACAVITARY RADIOELEMENT	\$ 1,926.00
77761	,26 IMPLANT INTRACAVITARY RADIOELEMENT	\$ 1,458.00
77750	,26 INFUSION OF RADIOACTIVE SOLUTION	\$ 1,371.00
77620	,26 HYPERTHERMIA TREATMENT BY PROBE	\$ 2,295.00
77615	,26 HYPERTHERMIA TREATMENT BY PROBE	\$ 3,958.00
77610	,26 HYPERTHERMIA TREATMENT BY PROBE	\$ 2,524.00
77605	,26 HYPERTHERMIA TREATMENT, DEEP	\$ 3,168.00
77600	,26 HYPERTHERMIA TREATMENT, SUPERFICIAL	\$ 1,721.00
77470	,26 SPECIAL RADIATION TREATMENT	\$ 474.00
77469	IO RADIATION TX MANAGEMENT	\$ 1,145.00
77435	STEREOTACTIC BODY RADIATION TX	\$ 2,306.00
77432	STEREOTACTIC RADIATION TREATMENT	\$ 1,526.00
77431	RADIATION THERAPY MANAGEMENT	\$ 381.00
77427	Radiation treatment mngmnt 5 trtmnt	\$ 686.00
77417	RADIOLOGY PORT FILM(S)	\$ 43.00
77401	RADIATION TREATMENT DELIVERY	\$ 92.00
77373	STEREOTACTIC BODY RADIATION TX	\$ 4,790.00
77372	RADTN TX DLVRY SRS LINEAR ACCLRTR	\$ 3,956.00
77370	SPECIAL RADIATION PHYSICS CONSULT	\$ 476.00
77338	,26 ANGIOGRAPHY, ARTERIO SHUNT COMPL	\$ 1,762.00
77336	CONT'D MEDICAL PHYSICS CONSULT	\$ 304.00
77334	,26 RADIATION TREATMENT AID(S), COMPLEX	\$ 461.00
77333	,26 RADIATION TREATMENT AID(S),INTERMED	\$ 440.00
77332	,26 RADIATION TREATMENT AID(S), SIMPLE	\$ 172.00
77331	,26 SPECIAL RADIATION DOSIMETRY	\$ 231.00
77321	,26 SPECIAL RADIATION THERAPY PORT PLAN	\$ 343.00
77318	,26 BRACHYTX ISODOSE PLN CPLX W/DOSIMET	\$ 1,492.00
77317	,26 BRACHYTX ISODOSE PLN INTERMED W/DOS	\$ 1,047.00
77316	,26 BRACHYTX ISODOSE PLN SMPL W/DOSIMET	\$ 798.00
77307	,26 TELETHX ISODOSE PLN CPLX W/BASIC DO	\$ 1,045.00
77306	,26 TELETHX ISODOSE PLN SMPL W/DOSIMETR	\$ 539.00
77301	,26 INTENSITY MODULATED RAD PLAN	\$ 7,025.00
77300	,26 RADIATION THERAPY DOSE PLAN	\$ 240.00
77295	,26 SET RADIATION THERAPY FIELD, 3D	\$ 1,762.00
77293	,26 RESPIRATORY MOTION MANAGEMENT SIMU	\$ 1,657.00
77290	,26 SET RADIATION THERAPY FIELD,COMPLEX	\$ 1,832.00
77285	,26 SET RADIATION THERAPY FIELD, INTERM	\$ 1,718.00
77280	,26 SET RADIATION THERAPY FIELD, SIMPLE	\$ 1,024.00
77263	RADIATION THERAPY PLANNING, COMPLEX	\$ 607.00
77262	RADIATION THERAPY PLANNING,INTERMED	\$ 386.00
77261	RADIATION THERAPY PLANNING, SIMPLE	\$ 256.00
77086	,26 VERTEBRAL FRACTURE ASSESSMENT VIA D	\$ 127.00
77085	,26 DXA BONE DENSITY STUDY AXIAL SKELET	\$ 194.00
77084	,26 MRI BONE MARROW BLOOD SUPPLY	\$ 1,132.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
77081	,26 DXA APPENDICULAR SKLTN	\$ 119.00
77080	,26 DXA BONE DENSITY STUDY 1>MORE AXIAL	\$ 145.00
77078	,26 CT BONE MINERAL DENSITY STUDY AXIAL	\$ 335.00
77077	,26 JOINT SURVY SINGL VIEW 2/MORE JOINT	\$ 167.00
77076	,26 RADIOLOGICAL EXAM OSSEUS SRVY INFNT	\$ 374.00
77075	,26 RADIOLOGIC EXAM OSSEOUS SRVY COMPLT	\$ 347.00
77074	,26 RADIOLOGICAL EXM OSSEUS SURVY LIMTD	\$ 230.00
77073	,26 BONE LENGTH STUDIES	\$ 162.00
77072	,26 BONE AGE STUDIES	\$ 92.00
77071	MANUL APPLCTN STRES BY MD JOINT XRY	\$ 200.00
77063	,26 SCREENING DIGITAL BREAST TOMOSYNTH	\$ 197.00
77054	,26 MAMRY DUCTOGRM/GLCTOGRAM MULTPL DCT	\$ 268.00
77053	,26 MAMMARY DUCTOGRAM OR GLACTOGRM SNGL	\$ 208.00
77022	,26 MR GUDNCE FOR PARNCHYML TISSU ABLTN	\$ 2,834.00
77021	,26 MR GUIDNCE FOR NEEDLE PLCMNT S&I	\$ 1,705.00
77014	,26 CT GUDNCE FOR PLCMNT RADTN TX FIELD	\$ 443.00
77013	,26 CT GUDNCE FOR MONTRNG TISSUE ABLTN	\$ 2,269.00
77012	,26 CT GUDNCE FOR NEEDLE PLCMNT S&I	\$ 545.00
77011	,26 CT GUIDANCE FOR STEREOTACTC LOCLZTN	\$ 854.00
77003	,26 FLRSCPC GUDNC & LOCLZTN DX/TX INJC	\$ 369.00
77002	,26 OLRSCPC GUIDANCE NEEDL PLACEMENT	\$ 396.00
77001	,26 FLRSCPIC GUIDANCE CVAD PLACMNT S&I	\$ 354.00
76998	,26 ULTRASONIC GUIDANCE INTRAOPERATIVE	\$ 681.00
76977	,26 ULTRASOUND BONE DENSITY, PERIPHERAL	\$ 28.00
76975	,26 GI ENDOSCOPIC ULTRASOUND	\$ 401.00
76965	,26 ULTRASOUND GUIDE FOR RADIOTHERAPY	\$ 330.00
76948	,26 ULTRASOUND GUIDE FOR OVA ASPIRATION	\$ 274.00
76946	,26 ULTRASOUND GUIDE FOR AMNIOCENTESIS	\$ 115.00
76945	,26 CHORIONIC VILLUS SAMPLING GUIDANCE	\$ 369.00
76942	,26 ULTRASOUND GUIDE FOR NEEDLE BIOPSY	\$ 206.00
76941	,26 ULTRASOUND GUIDE, FETAL TRANSFUSION	\$ 487.00
76940	,26 ULTRASOUND GUID MON VISCERAL ABLAT	\$ 677.00
76937	ULTRA GUID VASCULAR ACCESS	\$ 132.00
76937	,26 ULTRA GUID VASCULAR ACCESS	\$ 132.00
76936	,26 ULTRASOUND GUIDE FOR ARTERY REPAIR	\$ 995.00
76932	,26 ULTRASOUND GUIDE FOR HEART BIOPSY	\$ 381.00
76886	,26 ECHO EXAM, INFANT HIPS, LIMITED	\$ 384.00
76885	,26 ECHO EXAM, INFANT HIPS, DYNAMIC	\$ 420.00
76882	,26 US XTR NON-VASC LMTD	\$ 207.00
76881	,26 US XTR NON-VASC COMPLETE	\$ 280.00
76873	,26 NULL	\$ 631.00
76872	,26 ECHO EXAM OF PROSTATE	\$ 525.00
76870	,26 ECHO EXAM OF SCROTUM AND TESTES	\$ 383.00
76857	,26 ECHO EXAM OF PELVIS, LIMITED	\$ 175.00
76856	,26 ECHO EXAM OF PELVIS, COMPLETE	\$ 399.00
76831	,26 UTERUS ECHO EXAM	\$ 434.00
76830	,26 TRANSVAGINAL ECHO EXAM	\$ 449.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
76828	,26 DOPPLER ECHO RE-EXAM OF FETAL HEART	\$ 187.00
76827	,26 DOPPLER ECHO EXAM OF FETAL HEART	\$ 265.00
76826	,26 ECHO RE-EXAM OF FETAL HEART	\$ 593.00
76825	,26 ECHO EXAM OF FETAL HEART	\$ 992.00
76821	,26 DOPP VELOCIMETRY FETAL MID CEREB AR	\$ 326.00
76820	,26 DOPP VELOCIMETRY FETAL; UMBL ARTERY	\$ 168.00
76819	,26 FETAL BIOPHYSL PROF, NONSTRESS TST	\$ 313.00
76818	,26 ECHO EXAM, FETAL PROFILE	\$ 425.00
76817	,26 US PRGNANT UTERUS TRANSVAGINAL	\$ 346.00
76816	,26 ECHO EXAM FOLLOWUP OR REPEAT	\$ 409.00
76815	,26 ECHO EXAM OF PREG UTERUS, LIMITED	\$ 305.00
76814	,26 US PREG UTRS IST TRMST EACH +NL GES	\$ 279.00
76813	,26 US PREG UTRS IST TRMST TRNSABD/VAGN	\$ 436.00
76812	,26 U/S PREGNT UTERUS, EACH ADD GESTION	\$ 715.00
76811	,26 U/S PREGNT UTERUS, FET& MAT EVALTIO	\$ 634.00
76810	,26 ECHO EXAM OF PREG UTERUS, COMPLETE	\$ 330.00
76805	,26 ECHO EXAM OF PREG UTERUS, COMPLETE	\$ 509.00
76802	,26 U/S PRGNT UTERUS, EACH GESTATION	\$ 223.00
76801	,26 U/S PREGNANT UTERUS. FIRST TRIMESTE	\$ 443.00
76800	,26 ECHO EXAM SPINAL CANAL AND CORD	\$ 529.00
76776	,26 US TRANSPLNTD KIDNEY DUPLX & DOPPLR	\$ 575.00
76775	,26 ECHO EXAM, RETROPERITONEUM,LIMITED	\$ 213.00
76770	,26 ECHO EXAM, RETROPERITONEUM,COMPLETE	\$ 411.00
76705	,26 ECHO EXAM OF ABDOMEN, LIMITED	\$ 332.00
76700	,26 ECHO EXAM OF ABDOMEN, COMPLETE	\$ 449.00
76642	,26 US BREAST UNI REAL TIME WITH IMAGE	\$ 317.00
76641	,26 US BREAST UNI REAL TIME WITH IMAGE	\$ 389.00
76604	,26 ECHO EXAM OF CHEST	\$ 287.00
76536	,26 ECHO EXAM OF HEAD AND NECK TISSUES	\$ 425.00
76529	,26 ECHO EXAM OF EYE FOR FOREIGN BODY	\$ 301.00
76519	,26 ECHO EXAM OF EYE, CALC LENS POWER	\$ 300.00
76519	ECHO EXAM OF EYE, CALC LENS POWER	\$ 300.00
76516	,26 ECHO EXAM OF EYE (1D)	\$ 174.00
76514	,26 OPHTH SONO CORNEAL PACHYMETRY UN/BI	\$ 55.00
76514	OPHTH SONO CORNEAL PACHYMETRY UN/BI	\$ 55.00
76513	,26 ECHO EXAM OF EYE, WATER BATH (2D)	\$ 360.00
76512	ECHO EXAM OF EYE (2D)	\$ 326.00
76512	,26 ECHO EXAM OF EYE (2D)	\$ 326.00
76511	,26 ECHO EXAM OF EYE (1D)	\$ 221.00
76510	,26 OPHTHALM U/S DIAG; B&A SCAN SAME ENC	\$ 326.00
76506	,26 ECHO EXAM OF HEAD/BRAIN	\$ 423.00
76380	,26 CAT SCAN FOLLOWUP STUDY, LIMITED	\$ 460.00
76377	,26 3-D CT/MRI N/REQ ING PROC INDP W/ST	\$ 260.00
76376	,26 3-D CT/MRI REQ IMG PROCE INDEP W/ST	\$ 84.00
76125	,26 CINEMATIC X-RAYS W/ROUTINE EXAM	\$ 178.00
76120	,26 CINEMATIC X-RAYS	\$ 400.00
76102	,26 COMPLEX MOTION BODY SECTION X-RAYS	\$ 522.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
76101	,26 COMPLEX MOTION BODY SECTION X-RAY	\$ 370.00
76100	,26 X-RAY EXAM OF BODY SECTION	\$ 359.00
76098	,26 X-RAY EXAM OF SURGICAL SPECIMEN	\$ 157.00
76080	,26 X-RAY EXAM ABSCESS/FISTULA/SINUS	\$ 215.00
76010	,26 X-RAY FOR OBJECT, NOSE TO RECTUM	\$ 106.00
76000	,26 FLUOROSCOPE EXAM	\$ 155.00
75989	,26 X-RAY GUIDE FOR DRAINAGE/SPECIMEN	\$ 441.00
75984	,26 X-RAY FOR DRAINAGE CATHETER CHANGE	\$ 361.00
75970	,26 X-RAY FOR TRANSCATHETER BIOPSY	\$ 2,067.00
75959	,26 PLAC DIS EXT PROS E/VAS REP DESC TH	\$ 1,807.00
75958	,26 PLAC PROX EXT PROS T E/VAS REP DES T	\$ 2,058.00
75957	,26 ENDOVAS REP D-AOR,NOT INV SUBCL ART	\$ 3,101.00
75956	,26 ENDOVAS REP DES T-AOR,INV SUBCL ART	\$ 3,621.00
75902	,26 MEC REMVL INTRALUMNL THRU cvd	\$ 314.00
75901	,26 MECH REMVL PERICATH OBSTRIVE MATERL	\$ 806.00
75898	,26 FOLLOWUP ANGIOGRAM THRU CATHETER	\$ 518.00
75894	,26 X-RAY FOR CATHETER EMBOLIZE THERAPY	\$ 4,307.00
75893	,26 X-RAY FOR VENOUS SAMPLE BY CATHETER	\$ 425.00
75891	,26 X-RAY EXAM OF LIVER VEINS	\$ 497.00
75889	,26 X-RAY EXAM OF LIVER VEINS	\$ 489.00
75887	,26 X-RAY EXAM OF LIVER VEINS	\$ 544.00
75885	,26 X-RAY EXAM OF LIVER VEINS	\$ 540.00
75880	,26 X-RAY EXAM OF EYE SOCKET VEINS	\$ 431.00
75872	,26 X-RAY EXAM OF SKULL VEINS	\$ 509.00
75870	,26 X-RAY EXAM OF SKULL VEINS	\$ 689.00
75860	,26 X-RAY EXAM OF NECK VEINS	\$ 503.00
75842	,26 X-RAY EXAM OF ADRENAL VEINS	\$ 622.00
75840	,26 X-RAY EXAM OF ADRENAL VEINS	\$ 509.00
75833	,26 X-RAY EXAM OF KIDNEY VEINS	\$ 584.00
75831	,26 X-RAY EXAM OF KIDNEY VEINS	\$ 478.00
75827	,26 X-RAY EXAM OF CHEST VEINS	\$ 482.00
75825	,26 X-RAY EXAM OF TRUNK VEINS	\$ 463.00
75822	,26 X-RAY EXAM OF ARMS/LEGS VEINS	\$ 462.00
75820	,26 X-RAY EXAM OF ARM/LEG VEINS	\$ 396.00
75810	,26 X-RAY EXAM OF SPLEEN/LIVER VEINS	\$ 2,279.00
75809	,26 X-RAY EXAM OF NONVASCULAR SHUNT	\$ 334.00
75807	,26 X-RAY EXAM OF TRUNK LYMPH VESSELS	\$ 1,042.00
75805	,26 X-RAY EXAM OF TRUNK LYMPH VESSEL	\$ 1,166.00
75803	,26 X-RAY EXAM OF ARM/LEG LYMPH VESSELS	\$ 1,109.00
75801	,26 X-RAY EXAM OF ARM/LEG LYMPH VESSEL	\$ 1,067.00
75774	,26 X-RAY OF ARTERIES, ADD'L VESSEL(S)	\$ 394.00
75756	,26 X-RAY EXAM OF BREAST ARTERIES	\$ 605.00
75746	,26 X-RAY EXAM OF LUNG ARTERIES	\$ 524.00
75743	X-RAY EXAM OF LUNG ARTERIES	\$ 583.00
75743	,26 X-RAY EXAM OF LUNG ARTERIES	\$ 583.00
75741	,26 X-RAY EXAM OF LUNG ARTERY	\$ 519.00
75736	,26 X-RAY EXAM OF PELVIC ARTERIES	\$ 552.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
75733	,26 X-RAY EXAM OF ADRENAL ARTERIES	\$ 640.00
75731	,26 X-RAY EXAM OF ADRENAL ARTERY	\$ 593.00
75726	,26 X-RAY EXAM OF VISCERAL ARTERIES	\$ 663.00
75716	,26 X-RAY EXAM OF ARM/LEG ARTERIES	\$ 641.00
75710	,26 X-RAY EXAM OF ARM/LEG ARTERY	\$ 607.00
75705	,26 X-RAY EXAM OF SPINAL ARTERIES	\$ 939.00
75635	,26 CTA ABDOMINAL AORTA & BIL ILEOFE RU	\$ 1,077.00
75630	,26 X-RAY ABDOMINAL AORTA, LEG ARTERIES	\$ 622.00
75625	,26 X-RAY OF ABDOMINAL AORTA	\$ 514.00
75605	,26 XRAY, THORACIC AORTA W/SERIALOGRAPH	\$ 475.00
75600	,26 5ORAY OF THORACIC AORTA	\$ 745.00
75574	,26 CTA HEART,CORONARY ARTERIES W/CONT	\$ 1,074.00
75573	,26 CT HEART W/CONTRAST CONGEN HRT DIS	\$ 1,107.00
75572	,26 CT CARDIAC W/CONTRAST EVAL STRUCTUR	\$ 902.00
75571	,26 CT HEART W/O CONTRAST	\$ 382.00
75565	,26 CARDIAC MRI FOR VELOCITY FLOW	\$ 191.00
75563	,26 CARD MRI W/STRESS IMG & DYE	\$ 1,802.00
75561	,26 CARDIAC MRI FOR MORPH W/DYE	\$ 1,520.00
75559	,26 CARDIAC MRI W/STRESS IMG	\$ 1,604.00
75557	,26 CARDIAC MRI FOR MORPH	\$ 1,154.00
74775	,26 X-RAY EXAM OF PERINEUM	\$ 352.00
74742	,26 X-RAY GUIDE FOR OVIDUCT CATHETER	\$ 545.00
74740	,26 X-RAY EXAM OF FEMALE GENITAL TRACT	\$ 331.00
74713	,26 each additional gestation (List sep	\$ 828.00
74710	,26 X-RAY FOR MEASUREMENT OF PELVIS	\$ 145.00
74485	,26 X-RAY FOR DILATION OF GU TRACT	\$ 409.00
74470	,26 X-RAY EXAM OF KIDNEY LESION	\$ 302.00
74455	,26 VOIDING X-RAY EXAM, URETHRA/BLADDER	\$ 357.00
74450	,26 X-RAY EXAM OF URETHRA/BLADDER	\$ 300.00
74445	,26 X-RAY EXAM OF PENIS	\$ 377.00
74440	,26 X-RAY EXAM OF MALE GENITAL TRACT	\$ 336.00
74430	,26 X-RAY OF BLADDER, MINIMUM 3 VIEWS	\$ 145.00
74425	,26 X-RAY OF URINARY TRACT	\$ 476.00
74420	,26 X-RAY OF URINARY TRACT	\$ 268.00
74415	,26 CONTRAST X-RAY OF URINARY TRACT	\$ 557.00
74410	,26 CONTRAST X-RAY OF URINARY TRACT	\$ 476.00
74400	,26 X-RAY OF URINARY TRACT	\$ 468.00
74363	,26 X-RAY FOR DILATION OF BILE DUCT(S)	\$ 999.00
74360	,26 X-RAY FOR DILATION OF GI TRACT	\$ 629.00
74355	,26 X-RAY FOR INTESTINAL TUBE INSERTION	\$ 575.00
74340	,26 X-RAY FOR INSERTION OF GI TUBE	\$ 534.00
74330	,26 X-RAY, BILE DUCT/PANCREAS ENDOSCOPY	\$ 688.00
74329	,26 X-RAY FOR PANCREAS ENDOSCOPY	\$ 560.00
74328	,26 X-RAY FOR BILE DUCT ENDOSCOPY	\$ 651.00
74301	,26 BILE DUCT/PANCREAS X-RAY, ADD'L	\$ 132.00
74300	,26 BILE DUCT/PANCREAS X-RAY, DURING OP	\$ 235.00
74290	,26 CONTRAST X-RAY, GALLBLADDER	\$ 300.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
74283	,26 THERAPEUTIC ENEMA, CONTRAST OR AIR	\$ 896.00
74280	,26 CONTRAST X-RAY OF COLON, AIR/BARIUM	\$ 806.00
74270	,26 CONTRAST X-RAY OF COLON, BARIUM	\$ 559.00
74262	,26 CT COLONOGRAPHY W/CONTRAST	\$ 1,099.00
74261	,26 CT COLONGRAPHY W/O CONTRAST	\$ 827.00
74251	,26 X-RAY EXAM OF SMALL BOWEL	\$ 870.00
74250	,26 X-RAY EXAM OF SMALL BOWEL	\$ 441.00
74246	,26 CONTRAST X-RAY OF UPPER GI TRACT	\$ 504.00
74240	,26 X-RAY EXAM OF UPPER GI TRACT	\$ 439.00
74235	,26 X-RAY, REMOVE OBJECT FROM ESOPHAGUS	\$ 573.00
74230	,26 CINEMA X-RAY OF THROAT/ESOPHAGUS	\$ 473.00
74220	,26 X-RAY EXAM OF ESOPHAGUS	\$ 350.00
74210	,26 X-RAY EXAM OF THROAT	\$ 344.00
74190	,26 X-RAY EXAM OF PERITONEUM	\$ 300.00
74185	,26 MRA OF ABDOMEN	\$ 1,417.00
74183	,26 MRI ABDOMEN, W/O & W CONTRAST	\$ 1,421.00
74182	,26 MRI ABDOMEN, W/O CONTRAST	\$ 1,284.00
74181	,26 MRI OF ABDOMEN	\$ 818.00
74178	,26 CT ABD&PELV 1+ SECTION/REGNS	\$ 1,338.00
74177	,26 CT ABDOMEN&PELVIS W/CONTRAST	\$ 1,191.00
74176	,26 CT ABD & PELVIS W/O CONTRAST	\$ 721.00
74175	,26 CTA ABDOMEN, W/WO CONTRAST	\$ 982.00
74174	,26 NULL	\$ 1,476.00
74170	,26 CAT SCANS OF ABDOMEN	\$ 913.00
74160	,26 CONTRAST CAT SCAN OF ABDOMEN	\$ 887.00
74150	,26 CAT SCAN OF ABDOMEN	\$ 539.00
74022	,26 X-RAY EXAM SERIES, ABDOMEN	\$ 176.00
74021	,26 Radiologic exam abdomen 3+ views	\$ 151.00
74018	,26 Radiologic exam abdomen 1 view	\$ 107.00
73725	,26 MRA OF LOWER EXTREMITY	\$ 1,412.00
73723	,26 MRI LOWER EXTRMTY W&W/O CONTRAST	\$ 1,644.00
73722	,26 MRI JOINT LOWER EXTRMTY W CONTRAST	\$ 1,340.00
73721	,26 MRI OF LEG/FOOT JOINT	\$ 832.00
73720	,26 MRI OF LEG/FOOT	\$ 1,418.00
73719	,26 MRI LOWER EXTRMTY, W CONTRAST	\$ 1,112.00
73718	,26 MRI LOWER EXTRMTY, OTHER THAN JNT	\$ 939.00
73706	,26 CTA LOWER EXTRMTY W/O& W CONTRAST	\$ 993.00
73702	,26 CAT SCANS OF LEG	\$ 849.00
73701	,26 CONTRAST CAT SCAN OF LEG	\$ 703.00
73700	,26 CAT SCAN OF LEG	\$ 563.00
73660	,26 X-RAY EXAM OF TOE(S), 2+ VIEWS	\$ 104.00
73650	,26 X-RAY EXAM OF HEEL, 2+ VIEWS	\$ 104.00
73630	,26 X-RAY EXAM OF FOOT, COMPLETE	\$ 120.00
73620	,26 X-RAY EXAM OF FOOT	\$ 102.00
73615	,26 CONTRAST X-RAY OF ANKLE JOINT	\$ 472.00
73610	,26 X-RAY EXAM OF ANKLE, COMPLETE	\$ 128.00
73600	,26 X-RAY EXAM OF ANKLE	\$ 117.00

CPT		Standard Fee
Code	CPT Code Description	
73592	,26 X-RAY EXAM OF LEG, INFANT, 2+ VIEWS	\$ 111.00
73590	,26 X-RAY EXAM OF LOWER LEG	\$ 113.00
73580	,26 CONTRAST X-RAY OF KNEE JOINT	\$ 503.00
73565	,26 X-RAY EXAM OF BOTH KNEES, STANDING	\$ 143.00
73564	,26 X-RAY EXAM OF KNEE, 4+ VIEWS	\$ 160.00
73562	,26 X-RAY EXAM OF KNEE, 3 VIEWS	\$ 144.00
73560	,26 X-RAY EXAM OF KNEE, 1 OR 2 VIEWS	\$ 123.00
73552	,26 minimum 2 views	\$ 127.00
73525	,26 CONTRAST X-RAY OF HIP JOINT	\$ 454.00
73522	,26 3-4 views	\$ 189.00
73521	,26 Radiologic examination, hips, bilat	\$ 146.00
73502	,26 2-3 views	\$ 166.00
73501	,26 Radiologic examination, hip, unilat	\$ 116.00
73225	,26 MRA OF UPPER EXTREMITY	\$ 1,447.00
73223	,26 MRI, ANY JOINT UPPER EXTRMT, W/W/O	\$ 1,647.00
73222	,26 MRI ANY JNT UPPR EXTRMTY, W CONTRST	\$ 1,337.00
73221	,26 MRI OF ARM/HAND JOINT	\$ 839.00
73220	,26 MRI OF ARM/HAND	\$ 1,748.00
73219	,26 MRI UPPER EXTRMT, W CONTRAST	\$ 1,428.00
73218	,26 MRI UPPER EXTRMTY, OTHER THAN JNYT	\$ 1,087.00
73206	,26 CTA UPPPER EXTMY, W/CON, W.O CONTR	\$ 979.00
73202	,26 CAT SCANS OF ARM	\$ 879.00
73201	,26 CONTRAST CAT SCAN OF ARM	\$ 809.00
73200	,26 CAT SCAN OF ARM	\$ 585.00
73140	,26 X-RAY EXAM OF FINGER(S), 2+ VIEWS	\$ 132.00
73130	,26 X-RAY EXAM OF HAND, 3+ VIEWS	\$ 128.00
73120	,26 X-RAY EXAM OF HAND, 2 VIEWS	\$ 111.00
73115	,26 CONTRAST X-RAY OF WRIST JOINT	\$ 463.00
73110	,26 X-RAY EXAM OF WRIST, COMPLETE	\$ 143.00
73100	,26 X-RAY EXAM OF WRIST	\$ 121.00
73092	,26 X-RAY EXAM OF ARM, INFANT, 2+ VIEWS	\$ 111.00
73090	,26 X-RAY EXAM OF FOREARM	\$ 106.00
73085	,26 CONTRAST X-RAY OF ELBOW JOINT	\$ 416.00
73080	,26 X-RAY EXAM OF ELBOW, COMPLETE	\$ 114.00
73070	,26 X-RAY EXAM OF ELBOW	\$ 105.00
73060	,26 X-RAY EXAM OF HUMERUS, 2+ VIEWS	\$ 115.00
73050	,26 X-RAY EXAM OF SHOULDER JOINTS	\$ 115.00
73040	,26 CONTRAST X-RAY OF SHOULDER JOINT	\$ 441.00
73030	,26 X-RAY EXAM OF SHOULDER, COMPLETE	\$ 122.00
73020	,26 X-RAY EXAM OF SHOULDER, ONE VIEW	\$ 79.00
73010	,26 X-RAY OF SHOULDER BLADE, COMPLETE	\$ 102.00
73000	,26 X-RAY EXAM OF COLLARBONE, COMPLETE	\$ 115.00
72295	,26 X-RAY OF LOWER SPINE DISK	\$ 390.00
72285	,26 X-RAY OF NECK SPINE DISK	\$ 441.00
72275	,26 NULL	\$ 479.00
72270	,26 MYELOGRAM OF TOTAL SPINE	\$ 510.00
72265	,26 MYELOGRAM OF LOWER SPINE	\$ 374.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
72255	,26 MYELOGRAM OF THORACIC SPINE	\$ 414.00
72240	,26 MYELOGRAM OF NECK SPINE	\$ 404.00
72220	,26 X-RAY EXAM OF TAILBONE, 2+ VIEWS	\$ 115.00
72202	,26 X-RAY EXAM OF SACROILIAC JOINTS	\$ 139.00
72200	,26 X-RAY EXAM OF SACROILIAC JOINTS	\$ 118.00
72198	,26 MRA OF PELVIS	\$ 1,410.00
72197	,26 MRI PELVIS, W CONTRAST MATERIAL	\$ 1,418.00
72196	,26 MRI OF PELVIS	\$ 1,131.00
72195	,26 MRI PELVIS, W/O CONTRAST	\$ 971.00
72194	,26 CAT SCANS OF PELVIS	\$ 879.00
72193	,26 CONTRAST CAT SCAN OF PELVIS	\$ 866.00
72192	,26 CAT SCAN OF PELVIS	\$ 525.00
72191	,26 CTA pelvis, w/o contrast w contrast	\$ 979.00
72190	,26 X-RAY EXAM OF PELVIS, COMPLETE	\$ 148.00
72170	,26 X-RAY EXAM OF PELVIS	\$ 105.00
72159	,26 MRA OF SPINAL CANAL/CONTENTS	\$ 1,457.00
72158	,26 MRI OF LUMBAR SPINE	\$ 1,333.00
72157	,26 MRI OF THORACIC SPINE	\$ 1,338.00
72156	,26 MRI OF CERVICAL SPINE	\$ 1,335.00
72149	,26 CONTRAST MRI OF LUMBAR SPINE	\$ 1,130.00
72148	,26 MRI OF LUMBAR SPINE	\$ 789.00
72147	,26 CONTRAST MRI OF THORACIC SPINE	\$ 1,141.00
72146	,26 MRI OF THORACIC SPINE	\$ 788.00
72142	,26 CONTRAST MRI OF CERVICAL SPINE	\$ 1,149.00
72141	,26 MRI OF CERVICAL SPINE	\$ 788.00
72133	,26 CAT SCAN OF LUMBAR SPINE	\$ 834.00
72132	,26 CONTRAST CAT SCAN OF LUMBAR SPINE	\$ 711.00
72131	,26 CAT SCAN OF LOWER SPINE	\$ 563.00
72130	,26 CAT SCAN, THORACIC SPINE	\$ 839.00
72129	,26 CONTRAST CAT SCAN OF THORACIC SPINE	\$ 715.00
72128	,26 CAT SCAN OF THORACIC SPINE	\$ 565.00
72127	,26 CAT SCAN OF CERVICAL SPINE	\$ 838.00
72126	,26 CONTRAST CAT SCAN OF CERVICAL SPINE	\$ 710.00
72125	,26 CAT SCAN OF NECK SPINE	\$ 565.00
72120	,26 X-RAY EXAM OF LOWER SPINE, BENDING	\$ 144.00
72114	,26 X-RAY EXAM OF LOWER SPINE, COMPLETE	\$ 217.00
72110	,26 X-RAY EXAM OF LOWER SPINE, COMPLETE	\$ 177.00
72100	,26 X-RAY EXAM OF LOWER SPINE	\$ 139.00
72082	,26 2 or 3 views	\$ 248.00
72080	,26 X-RAY EXAM OF TRUNK SPINE	\$ 125.00
72074	,26 X-RAY OF THORACIC SPINE, COMPLETE	\$ 157.00
72072	,26 X-RAY EXAM OF THORACIC SPINE	\$ 140.00
72070	,26 X-RAY EXAM OF THORACIC SPINE	\$ 116.00
72052	,26 X-RAY EXAM OF NECK SPINE, COMPLETE	\$ 217.00
72050	,26 X-RAY EXAM OF NECK SPINE, 4+ VIEWS	\$ 184.00
72040	,26 X-RAY EXAM OF NECK SPINE	\$ 139.00
72020	,26 X-RAY EXAM OF SPINE, SINGLE VIEW	\$ 89.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
71555	,26 MRA OF CHEST (EXCLUDE MYOCARDIUM)	\$ 1,403.00
71552	,26 MRA chest, w/o contrast & w kontras	\$ 1,783.00
71551	,26 MRA Chest, w contrast	\$ 1,601.00
71550	,26 MRI OF CHEST	\$ 1,106.00
71275	,26 CTA chest w/o contrast & w contrast	\$ 984.00
71270	,26 CAT SCANS OF CHEST	\$ 842.00
71260	,26 CONTRAST CAT SCAN OF CHEST	\$ 712.00
71250	,26 CAT SCAN OF CHEST	\$ 571.00
71130	,26 X-RAY EXAM OF STERNOCLAV JOINT(S)	\$ 146.00
71120	,26 X-RAY EXAM OF BREASTBONE, 2+ VIEWS	\$ 120.00
71111	,26 X-RAY EXAM OF RIBS,CHEST,BOTH SIDES	\$ 186.00
71110	,26 X-RAY EXAM OF RIBS, BOTH SIDES	\$ 156.00
71101	,26 X-RAY EXAM OF RIBS, CHEST, ONE SIDE	\$ 149.00
71100	,26 X-RAY EXAM OF RIBS, ONE SIDE	\$ 130.00
71046	,26 Radiologic exam chest 2 views	\$ 119.00
71045	,26 Radiologic exam chest single view	\$ 94.00
70559	,26 MRI BRAIN WO CONT FOLLOWED BY CONT	\$ 1,253.00
70558	,26 MRI BRAIN DUR OPEN PROCEDURE W/CON	\$ 1,263.00
70557	,26 MRI BRAIN DUR INTRACRANIAL WO CONT	\$ 2,368.00
70555	,26 MRI BRAIN RQRNG MD/PSYCHOLOGIST	\$ 2,506.00
70554	,26 MRI BRAIN NOT RQRNG MD/PSYCHOLOGIST	\$ 1,575.00
70553	,26 MRI OF BRAIN AND FURTHER SEQUENCES	\$ 1,325.00
70552	,26 CONTRAST MRI OF BRAIN	\$ 1,124.00
70551	,26 MRI OF BRAIN	\$ 811.00
70549	,26 MRA NECK, w/o contrats & w contrast	\$ 1,424.00
70548	,26 MRA NECK, w contrast	\$ 1,003.00
70547	,26 MRA NECK, w/o contrast	\$ 899.00
70546	,26 MRA head, w/o contrast & w contrast	\$ 1,362.00
70545	,26 MRA head, w contrast	\$ 936.00
70544	,26 MRA head, w/o contrast	\$ 895.00
70543	,26 MRI orbit, face, neck, w contrast	\$ 1,415.00
70542	,26 MRI face, neck, obit w/o contrast	\$ 1,131.00
70540	,26 MRI OF ORBIT, FACE, NECK	\$ 950.00
70498	,26 CTA neck w contrats, w/o contrast	\$ 972.00
70496	,26 CT Scan head w contrast, w/o contra	\$ 972.00
70492	,26 CAT SCANS OF NECK TISSUE	\$ 889.00
70491	,26 CONTRAST CAT SCAN OF NECK TISSUE	\$ 733.00
70490	,26 CAT SCAN OF NECK TISSUE	\$ 594.00
70488	,26 CAT SCANS OF FACE, JAW	\$ 739.00
70487	,26 CONTRAST CAT SCAN OF FACE, JAW	\$ 605.00
70486	,26 CAT SCAN OF FACE, JAW	\$ 507.00
70482	,26 CAT SCANS OF SKULL	\$ 886.00
70481	,26 CONTRAST CAT SCAN OF SKULL	\$ 814.00
70480	,26 CAT SCAN OF SKULL	\$ 632.00
70470	,26 CAT SCANS OF HEAD/BRAIN	\$ 693.00
70460	,26 CONTRAST CAT SCAN OF HEAD/BRAIN	\$ 590.00
70450	,26 CAT SCAN OF HEAD/BRAIN	\$ 419.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
70390	,26 X-RAY EXAM OF SALIVARY DUCT	\$ 412.00
70380	,26 X-RAY EXAM OF SALIVARY GLAND	\$ 132.00
70371	,26 SPEECH EVALUATION, COMPLEX	\$ 392.00
70370	,26 THROAT X-RAY/FLUOROSCOPY	\$ 324.00
70360	,26 X-RAY EXAM OF NECK TISSUE	\$ 112.00
70355	,26 PANORAMIC X-RAY OF JAWS	\$ 70.00
70350	,26 X-RAY HEAD FOR ORTHODONTIA	\$ 64.00
70336	,26 MRI OF JAW JOINT	\$ 1,111.00
70332	,26 X-RAY EXAM OF JAW JOINT	\$ 296.00
70330	,26 X-RAY EXAM OF JAW JOINTS	\$ 189.00
70328	,26 X-RAY EXAM OF JAW JOINT	\$ 123.00
70320	,26 FULL MOUTH X-RAY OF TEETH	\$ 204.00
70310	,26 X-RAY EXAM OF TEETH, PARTIAL	\$ 144.00
70300	,26 X-RAY EXAM OF TEETH, SINGLE VIEW	\$ 52.00
70260	,26 X-RAY EXAM OF SKULL, COMPLETE	\$ 160.00
70250	,26 X-RAY EXAM OF SKULL, PARTIAL	\$ 131.00
70240	,26 X-RAY EXAM PITUITARY SADDLE	\$ 123.00
70220	,26 X-RAY EXAM OF SINUSES, COMPLETE	\$ 134.00
70210	,26 X-RAY EXAM OF SINUSES	\$ 114.00
70200	,26 X-RAY EXAM OF EYE SOCKETS, COMPLETE	\$ 170.00
70190	,26 X-RAY EXAM OF EYE SOCKETS	\$ 141.00
70170	,26 X-RAY EXAM OF TEAR DUCT	\$ 212.00
70160	,26 X-RAY EXAM OF NASAL BONES, COMPLETE	\$ 134.00
70150	,26 X-RAY EXAM OF FACIAL BONES, COMPLETE	\$ 167.00
70140	,26 X-RAY EXAM OF FACIAL BONES, PARTIAL	\$ 115.00
70134	,26 X-RAY EXAM OF MIDDLE EAR, COMPLETE	\$ 205.00
70130	,26 X-RAY EXAM OF MASTOIDS, COMPLETE	\$ 218.00
70120	,26 X-RAY EXAM OF MASTOIDS, PARTIAL	\$ 135.00
70110	,26 X-RAY EXAM OF JAW, COMPLETE	\$ 154.00
70100	,26 X-RAY EXAM OF JAW, PARTIAL	\$ 135.00
70030	,26 X-RAY EXAM OF EYE FOR FOREIGN BODY	\$ 114.00
70015	,26 CONTRAST X-RAY OF BRAIN	\$ 592.00
70010	CONTRAST X-RAY OF BRAIN	\$ 216.00
70010	,26 CONTRAST X-RAY OF BRAIN	\$ 216.00
69990	OPERATING MICROSCOPE	\$ 928.00
69970	REMOVE TEMPORAL BONE TUMOR	\$ 7,982.00
69960	DECOMPRESS INNER EAR CANAL	\$ 7,108.00
69955	REPAIR/DECOMPRESS FACIAL NERVE	\$ 7,368.00
69950	SEVER INNER EAR NERVE, TRANSCRANIAL	\$ 6,591.00
69930	IMPLANT COCHLEAR DEVICE	\$ 4,558.00
69915	SEVER INNER EAR NERVE	\$ 5,671.00
69910	REMOVE INNER EAR, MASTOID	\$ 3,735.00
69905	REMOVE INNER EAR	\$ 3,413.00
69806	INNER EAR FLUID SAC SURGERY W/SHUNT	\$ 3,471.00
69805	INNER EAR FLUID SAC SURGERY	\$ 3,872.00
69801	TRANSCANAL INCISION OF INNER EAR	\$ 465.00
69745	REPAIR FACIAL NERVE	\$ 4,628.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
69740	REPAIR FACIAL NERVE	\$ 4,340.00
69725	DECOMPRESS FACIAL NERVE	\$ 7,003.00
69720	DECOMPRESS FACIAL NERVE	\$ 4,448.00
69718	RPLCMNT OSSEINT IMPLNT, W MASTOECTM	\$ 4,941.00
69717	RPLCMNT OSSEINTEG IMPLNT, W/O MASTO	\$ 4,146.00
69715	IMPLANT TEMPORAL BONE, WITH MASTOID	\$ 4,891.00
69714	IMPLANT OSSEINTE TEMPORAL BONE W MA	\$ 3,953.00
69711	REMOVE/REPAIR HEARING AID	\$ 3,150.00
69700	CLOSE MASTOID FISTULA	\$ 2,507.00
69676	REMOVE MIDDLE EAR NERVE	\$ 3,091.00
69670	REMOVE MASTOID AIR CELLS	\$ 3,528.00
69667	REPAIR MIDDLE EAR FISTULA	\$ 3,007.00
69666	REPAIR MIDDLE EAR FISTULA	\$ 3,008.00
69662	REVISION OF MIDDLE EAR BONE SURGERY	\$ 4,292.00
69661	REVISION OF MIDDLE EAR BONE	\$ 4,499.00
69660	REVISION OF MIDDLE EAR BONE	\$ 3,448.00
69650	RELEASE OF MIDDLE EAR BONE	\$ 2,984.00
69646	RADICAL MIDDLE EAR & MASTOID SURG	\$ 5,755.00
69645	RADICAL MIDDLE EAR & MASTOID SURG	\$ 5,434.00
69644	RECONSTRUCT MIDDLE EAR & MASTOID	\$ 5,515.00
69643	RECONSTRUCT MIDDLE EAR & MASTOID	\$ 4,552.00
69642	RECONSTRUCT MIDDLE EAR & MASTOID	\$ 4,985.00
69641	REVISE MIDDLE EAR & MASTOID	\$ 3,878.00
69637	REBUILD EARDRUM STRUCTURES W/PROSTH	\$ 5,178.00
69636	REBUILD EARDRUM STRUCTURES	\$ 5,150.00
69635	REVISE EARDRUM STRUCTURES	\$ 4,619.00
69633	REBUILD EARDRUM STRUCTURES W/PROSTH	\$ 3,888.00
69632	REBUILD EARDRUM STRUCTURES	\$ 4,012.00
69631	REVISE EARDRUM STRUCTURES	\$ 3,292.00
69620	REVISION OF EARDRUM	\$ 1,824.00
69610	REPAIR OF EARDRUM	\$ 1,082.00
69604	MASTOID SURG REVISION,TYMPANOPLASTY	\$ 4,143.00
69603	MASTOID SURGERY REVISION, RADICAL	\$ 4,702.00
69602	MASTOID SURG REVISION, MOD RADICAL	\$ 4,055.00
69601	MASTOID SURGERY REVISION, COMPLETE	\$ 3,833.00
69554	REMOVAL OF EAR LESION, EXTENDED	\$ 9,391.00
69552	REMOVAL OF EAR LESION, TRANSMASTOID	\$ 5,861.00
69550	REMOVAL OF EAR LESION, TRANSCANAL	\$ 3,879.00
69540	REMOVAL OF EAR POLYP	\$ 471.00
69535	PARTIAL REMOVAL OF TEMPORAL BONE	\$ 9,920.00
69530	RADICAL REMOVAL,MASTOID/PETROUS APX	\$ 6,172.00
69511	RADICAL MASTOID SURGERY	\$ 4,603.00
69505	MODIFIED RADICAL SURGERY, MASTOID	\$ 4,491.00
69502	REMOVE MASTOID STRUCTURES, COMPLETE	\$ 3,558.00
69501	REMOVE MASTOID STRUCTURES, SIMPLE	\$ 2,674.00
69450	REVISION OF EARDRUM	\$ 2,027.00
69440	EXPLORATION OF MIDDLE EAR	\$ 2,560.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
69436	CREATE EARDRUM OPENING,GEN'L ANESTH	\$ 589.00
69433	CREATE EARDRUM OPENING,LOCAL ANESTH	\$ 489.00
69424	REMOVE VENTILATING TUBE, OTHER PHYS	\$ 226.00
69421	INCISION OF EARDRUM, GEN'L ANESTH	\$ 553.00
69420	INCISION OF EARDRUM	\$ 445.00
69320	RECONSTRUCT ABSENT OUTER EAR CANAL	\$ 5,706.00
69310	REBUILD OUTER EAR CANAL	\$ 4,072.00
69300	REVISE PROTRUDING EXTERNAL EAR	\$ 1,788.00
69222	SURGICAL CLEANSING, MASTOID CAVITY	\$ 502.00
69220	SURGICAL CLEANSING, MASTOID CAVITY	\$ 191.00
69210	REMOVE IMPACTED EAR WAX	\$ 127.00
69209	Removal impacted cerumen using irri	\$ 54.00
69205	REMOVE OBJECT FROM OUTER EAR CANAL	\$ 363.00
69200	REMOVE OBJECT FROM OUTER EAR CANAL	\$ 178.00
69155	EXTENSIVE EAR/NECK SURGERY	\$ 6,119.00
69150	EXTENSIVE EAR CANAL SURGERY	\$ 3,855.00
69145	REMOVE EAR CANAL LESION(S)	\$ 939.00
69140	REMOVE BONY EAR CANAL LESION(S)	\$ 3,266.00
69120	REMOVAL OF EXTERNAL EAR	\$ 1,479.00
69110	PARTIAL REMOVAL EXTERNAL EAR	\$ 1,222.00
69105	BIOPSY OF EXTERNAL EAR CANAL	\$ 233.00
69100	BIOPSY OF EXTERNAL EAR	\$ 179.00
69020	DRAIN OUTER EAR CANAL LESION	\$ 528.00
69005	DRAIN EXTERNAL EAR LESION, COMPLIC	\$ 592.00
69000	DRAIN EXTERNAL EAR LESION, SIMPLE	\$ 459.00
68850	INJECTION FOR TEAR SAC X-RAY	\$ 205.00
68840	EXPLORATION OF TEAR DUCTS	\$ 418.00
68816	PROBE NL DUCT W/BALLOON	\$ 567.00
68815	PROBE NASOLACRIMAL DUCT W/TUBE	\$ 803.00
68811	PROBE NASOLACRIMAL DUCT W/ANESTH	\$ 488.00
68810	PROBE NASOLACRIMAL DUCT	\$ 459.00
68801	DILATION OF LACRIMAL PUNCTUM	\$ 280.00
68770	CLOSE TEAR SYSTEM FISTULA	\$ 2,263.00
68761	PLUG TEAR DUCT OPENING	\$ 422.00
68760	CLOSE TEAR DUCT OPENING	\$ 524.00
68750	CREATE TEAR DUCT DRAIN, W/TUBE	\$ 2,963.00
68745	CREATION OF TEAR DUCT DRAIN	\$ 2,833.00
68720	CREATION OF TEAR SAC DRAIN	\$ 2,829.00
68705	REVISION OF TEAR DUCT OPENING	\$ 597.00
68700	REVISION OF TEAR DUCTS	\$ 2,177.00
68550	REMOVAL OF TEAR GLAND TUMOR	\$ 4,253.00
68540	REMOVAL OF TEAR GLAND TUMOR	\$ 3,444.00
68530	REMOVAL OF OBJECT FROM TEAR DUCT(S)	\$ 919.00
68525	BIOPSY OF TEAR SAC	\$ 950.00
68520	REMOVAL OF TEAR SAC	\$ 2,567.00
68510	BIOPSY OF TEAR GLAND	\$ 1,053.00
68505	PARTIAL REMOVAL OF TEAR GLAND	\$ 3,641.00



<b>CPT</b>		
<b>Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
68500	REMOVAL OF TEAR GLAND	\$ 3,657.00
68440	INCISION OF TEAR DUCT OPENING	\$ 362.00
68420	INCISION/DRAINAGE OF TEAR SAC	\$ 606.00
68400	INCISION/DRAINAGE OF TEAR GLAND	\$ 473.00
68371	HARVEST CONJUNCT ALLOGRAFT LIVE DON	\$ 1,490.00
68362	REVISION OF EYELID LINING, W/FLAP	\$ 2,358.00
68360	PARTIAL REVISION OF EYELID LINING	\$ 1,481.00
68340	SEPARATE EYELID ADHESIONS	\$ 1,436.00
68335	REVISE/GRAFT EYELID LINING	\$ 2,330.00
68330	REVISE EYELID LINING	\$ 1,661.00
68328	REVISION/GRAFT OF EYELID LINING	\$ 2,564.00
68326	REVISION/GRAFT OF EYELID LINING	\$ 2,322.00
68325	REVISION/GRAFT OF EYELID LINING	\$ 2,363.00
68320	REVISION/GRAFT OF EYELID LINING	\$ 1,949.00
68200	TREAT EYELID LINING BY INJECTION	\$ 128.00
68135	DESTROY EYELID LINING LESION	\$ 540.00
68130	REMOVE EYELID LINING LESION, SCLERA	\$ 1,486.00
68115	REMOVE EYELID LINING LESION	\$ 660.00
68110	REMOVE EYELID LINING LESION	\$ 533.00
68100	BIOPSY OF EYELID LINING	\$ 347.00
68040	TREATMENT OF EYELID LINING LESION	\$ 175.00
68020	INCISE/DRAIN EYELID LINING CYST	\$ 395.00
67975	RECONSTRUCT EYELID, TRANSFER FLAP	\$ 2,476.00
67974	RECONSTRUCT EYELID, TRANSFER FLAP	\$ 3,340.00
67973	RECONSTRUCT EYELID, TRANSFER FLAP	\$ 3,352.00
67971	RECONSTRUCT EYELID, TRANSFER FLAP	\$ 2,607.00
67966	REVISION OF MORE THAN 1/4 OF EYELID	\$ 2,370.00
67961	REVISION OF UP TO 1/4 OF EYELID	\$ 1,644.00
67950	REVISION OF EYELID CANTHUS	\$ 1,678.00
67938	REMOVE EMBEDDED OBJECT FROM EYELID	\$ 418.00
67935	REPAIR EYELID WOUND, FULL THICKNESS	\$ 1,599.00
67930	REPAIR EYELID WOUND, PARTIAL	\$ 861.00
67924	EYELID SURGERY FOR ENTROPION	\$ 1,652.00
67923	EYELID SURGERY FOR ENTROPION	\$ 1,555.00
67922	CAUTERIZATION OF ENTROPION	\$ 709.00
67921	SUTURE REPAIR OF ENTROPION	\$ 1,123.00
67917	EYELID SURGERY FOR ECTROPION	\$ 1,653.00
67916	EYELID SURGERY FOR ECTROPION	\$ 1,554.00
67915	CAUTERIZATION OF ECTROPION	\$ 713.00
67914	SUTURE REPAIR OF ECTROPION	\$ 1,185.00
67912	CORRECT LAGOPHTHALMOS W IMPLANT	\$ 1,775.00
67911	REVISE RETRACTED EYELID	\$ 2,023.00
67909	RE-REPAIR EYELID DEFECT	\$ 1,592.00
67908	REPAIR DROOPING EYELID	\$ 1,548.00
67906	REPAIR DROOPING EYELID	\$ 1,823.00
67904	REPAIR DROOPING EYELID	\$ 2,155.00
67903	REPAIR DROOPING EYELID	\$ 1,744.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
67902	REPAIR DROOPING EYELID	\$ 2,617.00
67901	REPAIR DROOPING EYELID	\$ 2,116.00
67900	REPAIR DROOPING EYEBROW	\$ 1,843.00
67882	REVISE EYELID,TRANSFER TARSAL PLATE	\$ 1,704.00
67880	REVISION OF EYELID	\$ 1,327.00
67875	CLOSE EYELID BY SUTURE	\$ 347.00
67850	DESTROY EYELID MARGIN LESION	\$ 488.00
67840	REMOVAL OF EYELID LESION	\$ 569.00
67835	CORRECT INVERSION OF EYELASHES	\$ 1,585.00
67830	CORRECT INVERSION OF EYELASHES	\$ 495.00
67825	CORRECT INVERSION OF EYELASHES	\$ 439.00
67820	CORRECT INVERSION OF EYELASHES	\$ 125.00
67810	BIOPSY OF EYELID	\$ 258.00
67808	REMOVE CHALAZION, HOSP/ANESTHESIA	\$ 1,335.00
67805	REMOVAL OF CHALAZIONS, DIFFER LIDS	\$ 588.00
67801	REMOVAL OF CHALAZIONS, SAME LID	\$ 474.00
67800	REMOVAL OF CHALAZION	\$ 371.00
67715	INCISE EYELID FOLD	\$ 393.00
67710	SEVER EYELID SEAMS	\$ 354.00
67700	DRAINAGE OF EYELID ABSCESS	\$ 420.00
67570	DECOMPRESS OPTIC NERVE	\$ 4,716.00
67560	REVISE/REMOVE EYE SOCKET IMPLANT	\$ 3,815.00
67550	INSERT EYE SOCKET IMPLANT	\$ 3,722.00
67515	INJECTION INTO TENON'S CAPSULE	\$ 260.00
67505	INJECT ALCOHOL IN EYE SOCKET	\$ 253.00
67500	INJECT MEDICATION IN EYE SOCKET	\$ 219.00
67450	EXPLORE/BIOPSY EYE SOCKET	\$ 4,799.00
67445	DECOMPRESS EYE SOCKET	\$ 5,330.00
67440	DRAIN EYE SOCKET	\$ 4,621.00
67430	REMOVE OBJECT FROM EYE SOCKET	\$ 4,773.00
67420	REMOVE EYE SOCKET LESION	\$ 6,089.00
67415	NEEDLE BIOPSY OF EYE	\$ 374.00
67414	EXPLORE/DECOMPRESS EYESOCKET	\$ 5,070.00
67413	EXPLORE EYE SOCKET, REMOVE OBJECT	\$ 3,314.00
67412	EXPLORE EYE SOCKET, REMOVE LESION	\$ 3,348.00
67405	EXPLORE/DRAIN EYE SOCKET	\$ 3,084.00
67400	EXPLORE/BIOPSY EYE SOCKET	\$ 3,569.00
67346	BX OF EXTRAOCULAR ADNEXA	\$ 692.00
67345	DESTRUCTION OF EYE MUSCLE NERVE	\$ 811.00
67343	RELEASE EYE SCAR TISSUE	\$ 2,373.00
67340	EXPLORE/REPAIR DETACHED EYE MUSCLE	\$ 1,277.00
67335	EYE SUTURE(S) DURING SURGERY	\$ 526.00
67334	REVISE EYE MUSCLE W/SUTURE	\$ 1,077.00
67332	EYE MUSCLE SURGERY FOR SCARRING	\$ 1,184.00
67331	EYE MUSCLE SURGERY FOLLOWUP	\$ 1,094.00
67320	EXTRAOCULAR EYE MUSCLE TRANSFER	\$ 1,150.00
67318	REVISE OBLIQUE EYE MUSCLE(S)	\$ 2,549.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
67316	REVISE TWO VERTICAL EYE MUSCLES	\$ 2,894.00
67314	REVISE VERTICAL EYE MUSCLE	\$ 2,443.00
67312	REVISE TWO HORIZONTAL EYE MUSCLES	\$ 2,585.00
67311	REVISE HORIZONTAL EYE MUSCLE	\$ 2,152.00
67255	REINFORCE/GRAFT EYE WALL	\$ 2,470.00
67250	REINFORCE EYE WALL	\$ 3,047.00
67229	NULL	\$ 4,191.00
67228	TREAT EXTENSIVE RETINA LESION	\$ 1,097.00
67227	TREAT EXTENSIVE RETINA LESION	\$ 923.00
67225	DESTRUCTION LESION, PHOTOCOAG 2 EYE	\$ 104.00
67221	DEST LOCALIZED LESION, PHOTODYNAMIC	\$ 763.00
67220	TREAT LOCALIZED CHOROID LESION	\$ 1,802.00
67218	TREAT LOCALIZED RETINA LESION	\$ 5,002.00
67210	TREAT LOCALIZED RETINA LESION	\$ 1,802.00
67208	TREAT LOCALIZED RETINA LESION	\$ 2,076.00
67145	RETINA TREATMENT, PHOTOCOAGULATION	\$ 1,793.00
67141	RETINA TREATMENT, HEAT/COLD	\$ 1,754.00
67121	REMOVE INTRAOC EYE IMPLANT MATERIAL	\$ 3,261.00
67120	REMOVE EXTRAOC EYE IMPLANT MATERIAL	\$ 2,004.00
67115	RELEASE ENCIRCLING MATERIAL	\$ 1,801.00
67113	REPAIR RETINAL DETACH, CPLX	\$ 4,811.00
67110	REPAIR DETACHED RETINA, INJECTION	\$ 2,934.00
67108	REPAIR DETACHED RETINA, VITRECTOMY	\$ 4,302.00
67107	REPAIR DETACHED RETINA,SCLER BUCKLE	\$ 4,062.00
67105	REPAIR DETACHED RETINA, COAGULATION	\$ 993.00
67101	REPAIR DETACHED RETINA, HEAT/COLD	\$ 1,029.00
67043	VIT FOR MEMBRANE DISSECT	\$ 4,360.00
67042	VIT FOR MACULAR HOLE	\$ 4,135.00
67041	VIT FOR MACULAR PUCKER	\$ 4,136.00
67040	VITRECTOMY/LASER COAGULATION	\$ 3,743.00
67039	VITRECTOMY/LASER COAGULATION	\$ 3,465.00
67036	REMOVAL OF INNER EYE FLUID	\$ 3,239.00
67031	LASER SURGERY OF INNER EYE STRANDS	\$ 1,282.00
67030	INCISION OF INNER EYE STRANDS	\$ 1,969.00
67028	INJECTION OF EYE DRUG	\$ 355.00
67027	IMPLANT EYE DRUG DELV SYST	\$ 3,063.00
67025	INJECT EYE FLUID REPLACEMENT	\$ 2,277.00
67015	DRAINAGE OF EYE FLUID, PARS PLANA	\$ 2,140.00
67010	PARTIAL REMOVAL OF EYE FLUID	\$ 1,952.00
67005	PARTIAL REMOVAL OF EYE FLUID	\$ 1,705.00
66990	USE OF OPHTHALMIC ENDOSCOPE	\$ 322.00
66986	EXCHANGE LENS PROSTHESIS	\$ 3,262.00
66985	INSERTION OF LENS PROSTHESIS	\$ 2,766.00
66984	REMOVE CATARACT, INSERT LENS PROSTH	\$ 2,276.00
66982	EXTRACAP CATRCT REMO W IOLP	\$ 2,823.00
66940	EXTRACAPSULAR LENS EXTRACTION	\$ 2,824.00
66930	INTRACAPSULAR LENS EXTRACTION	\$ 3,086.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
66920	INTRACAPSULAR LENS EXTRACTION	\$ 2,710.00
66852	LENS EXTRACTION, PARS PLANA	\$ 3,035.00
66850	LENS EXTRACTION, PHACOFRAGMENTATION	\$ 2,851.00
66840	LENS EXTRACTION BY ASPIRATION	\$ 2,499.00
66830	REMOVAL OF SECONDARY CATARACT	\$ 2,553.00
66825	REPOSITION INTRAOCULAR LENS IMPLANT	\$ 2,874.00
66821	LASERING OF SECONDARY CATARACT	\$ 1,129.00
66820	RUPTURING OF SECONDARY CATARACT	\$ 1,566.00
66770	REMOVAL OF INNER EYE LESION	\$ 1,739.00
66762	REVISE IRIS BY PHOTOCOAGULATION	\$ 1,532.00
66761	LASER REVISION OF IRIS	\$ 853.00
66740	DESTROY CILIARY BODY, CYCLODIALYSIS	\$ 1,414.00
66720	DESTROY CILIARY BODY, CRYOSURGERY	\$ 1,474.00
66711	DES CILIA BODY CYCLOPHOTOCOAG ENDOS	\$ 2,299.00
66710	DEST CILIA BODY,CYCLOPHOTOCOAG T/SC	\$ 1,414.00
66700	DESTROY CILIARY BODY, DIATHERMY	\$ 1,414.00
66682	REPAIR IRIS & CILIARY BODY	\$ 2,444.00
66680	REPAIR IRIS & CILIARY BODY,	\$ 1,876.00
66635	REMOVAL OF IRIS, 'OPTICAL'	\$ 2,064.00
66630	REMOVAL OF IRIS SECTOR FOR GLAUCOMA	\$ 2,048.00
66625	REMOVAL OF PERIPH IRIS FOR GLAUCOMA	\$ 1,549.00
66605	REMOVAL OF IRIS, CILIARY BODY	\$ 3,890.00
66600	REMOVAL OF IRIS, LESION	\$ 3,148.00
66505	INCISION OF IRIS W/TRANSFIXION	\$ 1,480.00
66500	INCISION OF IRIS	\$ 1,354.00
66250	FOLLOWUP SURGERY OF ANTERIOR EYE	\$ 2,008.00
66225	REPAIR/GRAFT SCLERAL LESION	\$ 3,358.00
66185	REVISE EYE FLUID SHUNT	\$ 3,058.00
66184	REVISE EYE FLUID SHUNT	\$ 2,840.00
66183	REVISE EYE FLUID SHUNT	\$ 3,712.00
66180	IMPLANT EYE FLUID SHUNT	\$ 4,107.00
66179	IMPLANT EYE FLUID SHUNT	\$ 3,891.00
66175	TRNSLUM DIL EYE CANAL W/STNT	\$ 3,568.00
66174	TRANSLUM DIL EYE CANAL	\$ 3,407.00
66172	INCISION OF EYE FOR GLAUCOMA	\$ 4,299.00
66170	INCISION OF EYE FOR GLAUCOMA	\$ 3,945.00
66160	INCISION OF EYE FOR GLAUCOMA	\$ 3,562.00
66155	INCISION OF EYE FOR GLAUCOMA	\$ 3,170.00
66150	INCISION OF EYE FOR GLAUCOMA	\$ 3,172.00
66130	REMOVAL OF SCLERAL LESION	\$ 2,036.00
66030	INJECT/TREAT EYE W/MEDICATION	\$ 399.00
66020	INJECT/TREAT EYE W/ AIR/LIQUID	\$ 472.00
65930	REMOVE BLOOD CLOT FROM ANTERIOR EYE	\$ 2,307.00
65920	REMOVE IMPLANT FROM ANTERIOR EYE	\$ 2,853.00
65900	REMOVAL OF EYE LESION	\$ 3,536.00
65880	SEVER INNER EYE ADHESIONS,CORN-VITR	\$ 2,400.00
65875	SEVER INNER EYE ADHESIONS,POSTERIOR	\$ 2,280.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
65870	SEVER INNER EYE ADHESIONS, ANTERIOR	\$ 2,139.00
65865	SEVER INNER EYE ADHESIONS,IRIS-CORN	\$ 1,718.00
65860	SEVER INNER EYE ADHESIONS, LASER	\$ 904.00
65855	LASER SURGERY OF EYE	\$ 746.00
65850	INCISION OF EYE	\$ 3,038.00
65820	RELIEVE INNER EYE PRESSURE	\$ 2,839.00
65815	DRAINAGE OF EYE FLUID/BLOOD	\$ 1,719.00
65810	DRAINAGE OF EYE FLUID	\$ 1,678.00
65800	DRAINAGE OF EYE FLUID	\$ 325.00
65785	Implantation of intrastromal cornea	\$ 1,599.00
65782	OCULAR SURFACE REC STEM CELL ALLO	\$ 4,141.00
65781	OCULAR SURFACE RECON IIMBAL STEM	\$ 4,792.00
65780	OCULAR SURFACE RECON AMNIOTIC MEM	\$ 2,407.00
65779	COVER EYE W/MEMBRANE STENT	\$ 539.00
65778	COVER EYE W/MEMBRANE	\$ 194.00
65775	CORRECT ASTIGMATISM DUE TO SURGERY	\$ 2,033.00
65772	CORRECT ASTIGMATISM DUE TO SURGERY	\$ 1,461.00
65770	REVISION OF CORNEA W/IMPLANT	\$ 5,021.00
65757	PREP CORNEAL ENDO ALLOGRAFT	\$ 321.00
65756	NULL	\$ 4,249.00
65755	CORNEAL TRANSPLANT, PSEUDOPHAKIA	\$ 4,489.00
65750	CORNEAL TRANSPLANT, APHAKIA	\$ 4,508.00
65730	CORNEAL TRANSPLANT, PENETRATING	\$ 4,490.00
65710	CORNEAL TRANSPLANT, LAMELLAR	\$ 4,058.00
65600	MULTIPLE PUNCTURES, ANTERIOR CORNEA	\$ 1,225.00
65450	DESTRUCTION OF CORNEAL LESION	\$ 1,164.00
65436	CURETTE CORNEA, APPLY CHELAT AGENT	\$ 1,332.00
65435	CURETTE/TREAT CORNEA	\$ 254.00
65430	SCRAPE CORNEA FOR SMEAR	\$ 369.00
65426	REMOVE/TRANSFER PTERYGIUM, W/GRAFT	\$ 1,727.00
65420	REMOVE/TRANSFER PTERYGIUM	\$ 1,363.00
65410	BIOPSY OF CORNEA	\$ 371.00
65400	REMOVAL OF CORNEA LESION	\$ 2,174.00
65290	REPAIR OF EYE SOCKET WOUND	\$ 1,770.00
65286	REPAIR EYE WOUND, APPLY TISSUE GLUE	\$ 1,789.00
65285	REPAIR OF EYE WOUND, CORNEA/SCLERA	\$ 3,997.00
65280	REPAIR OF EYE WOUND, CORNEA/SCLERA	\$ 2,415.00
65275	REPAIR OF EYE WOUND, CORNEA	\$ 1,670.00
65273	REPAIR OF EYE WOUND, CONJUNCTIVA	\$ 1,376.00
65272	REPAIR OF EYE WOUND, CONJUNCTIVA	\$ 1,275.00
65270	REPAIR OF EYE WOUND, CONJUNCTIVA	\$ 506.00
65265	REMOVE OBJECT FROM INTERNAL EYE	\$ 3,935.00
65260	REMOVE OBJECT FROM INTERNAL EYE	\$ 3,507.00
65235	REMOVE OBJECT FROM INTERNAL EYE	\$ 2,594.00
65222	REMOVE OBJECT FROM EXTERNAL EYE	\$ 183.00
65220	REMOVE OBJECT FROM EXTERNAL EYE	\$ 155.00
65210	REMOVE OBJECT FROM EXTERNAL EYE	\$ 152.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
65205	REMOVE OBJECT FROM EXTERNAL EYE	\$ 127.00
65175	REMOVAL OF OCULAR IMPLANT	\$ 2,601.00
65155	REINSERT/REINFORCE OCULAR IMPLANT	\$ 3,279.00
65150	REINSERT OCULAR IMPLANT	\$ 2,317.00
65140	FOLLOWUP ATTACHMNT, OCULAR IMPLANT	\$ 3,134.00
65135	FOLLOWUP INSERTION, OCULAR IMPLANT	\$ 2,901.00
65130	FOLLOWUP INSERTION, OCULAR IMPLANT	\$ 2,867.00
65125	REVISION OF OCULAR IMPLANT	\$ 1,058.00
65114	REMOVE EYE, REVISE SOCKET	\$ 5,541.00
65112	REMOVE EYE, REVISE SOCKET BONE	\$ 5,299.00
65110	REMOVAL OF EYE	\$ 4,599.00
65105	REMOVE EYE, ATTACH IMPLANT	\$ 3,276.00
65103	REMOVE EYE, INSERT IMPLANT	\$ 2,985.00
65101	REMOVAL OF EYE	\$ 2,883.00
65093	REMOVAL OF EYE CONTENTS, W/IMPLANT	\$ 2,482.00
65091	REMOVE/REVISE EYE CONTENTS	\$ 2,503.00
64911	NERV RPR W AUTOGENS VEIN GRFT	\$ 3,995.00
64910	NERVE RPR W SYNTHTC CONDUIT EACH NRV	\$ 3,027.00
64907	NERVE PEDICLE TRANSFER, 2ND STAGE	\$ 5,104.00
64905	NERVE PEDICLE TRANSFER, 1ST STAGE	\$ 3,978.00
64902	ADDITIONAL NERVE GRAFT, CABLE	\$ 2,730.00
64901	ADDITIONAL NERVE GRAFT, SINGLE	\$ 2,351.00
64898	NERVE GRAFT, ARM/LEG, CABLE, 4CM+	\$ 5,380.00
64897	NERVE GRAFT, ARM/LEG, CABLE	\$ 4,968.00
64896	NERVE GRAFT, HAND/FOOT, CABLE, 4CM+	\$ 5,610.00
64895	NERVE GRAFT, HAND/FOOT, CABLE	\$ 5,202.00
64893	NERVE GRAFT, ARM/LEG, SINGLE, 4CM+	\$ 4,387.00
64892	NERVE GRAFT, ARM/LEG, SINGLE	\$ 4,109.00
64891	NERVE GRAFT, HAND/FOOT, SINGLE,4CM+	\$ 4,499.00
64890	NERVE GRAFT, HAND/FOOT, SINGLE	\$ 4,229.00
64886	NERVE GRAFT, HEAD/NECK, SINGLE,4CM+	\$ 4,839.00
64885	NERVE GRAFT, HEAD/NECK, SINGLE	\$ 4,201.00
64876	REPAIR NERVE, SHORTEN ARM/LEG BONE	\$ 774.00
64874	REPAIR & REVISE NERVE, EXTENSIVE	\$ 685.00
64872	FOLLOWUP REPAIR OF NERVE	\$ 461.00
64868	FUSION OF FACIAL/TONGUE NERVE	\$ 3,758.00
64866	FUSION OF FACIAL/SPINAL ACCES NERVE	\$ 4,906.00
64865	REPAIR OF INTRACRANIAL FACIAL NERVE	\$ 4,105.00
64864	REPAIR OF EXTRACRANIAL FACIAL NERVE	\$ 3,282.00
64862	REPAIR OF LUMBAR PLEXUS	\$ 5,390.00
64861	REPAIR OF BRACHIAL PLEXUS	\$ 6,372.00
64859	REPAIR ADDED MAJOR PERIPHERAL NERVE	\$ 984.00
64858	REPAIR OF SCIATIC NERVE	\$ 4,608.00
64857	REPAIR OF MAJOR PERIPHERAL NERVE	\$ 4,082.00
64856	REPAIR/TRANSPPOSE MAJOR PERIPH NERVE	\$ 3,932.00
64840	REPAIR OF POSTERIOR TIBIAL NERVE	\$ 3,760.00
64837	REPAIR OF ADDED NERVE, HAND/FOOT	\$ 1,447.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
64836	REPAIR HAND/FOOT NERVE, ULNAR MOTOR	\$ 3,192.00
64835	REPAIR HAND/FOOT NERVE, MED MOTOR	\$ 3,192.00
64834	REPAIR HAND/FOOT NERVE, COM SENSORY	\$ 2,863.00
64832	REPAIR OF ADDED DIGIT NERVE	\$ 1,307.00
64831	REPAIR OF DIGIT NERVE	\$ 2,655.00
64823	SYMPATHECTOMY, SUPERFICIAL PALMAR	\$ 3,079.00
64822	SYMPATHECTOMY, ULNAR ARTERY	\$ 2,706.00
64821	SYMPATHECTOMY, RADIAL ARTERIES	\$ 2,706.00
64820	REMOVE SYMPATHETIC NERVES, EA DIGIT	\$ 2,796.00
64818	REMOVE SYMPATHETIC NERVES, LUMBAR	\$ 3,049.00
64809	REMOVE SYMPATHETIC NERVES, LOW BACK	\$ 4,555.00
64804	REMOVE SYMPATHETIC NERVES, BACK	\$ 4,964.00
64802	REMOVE SYMPATHETIC NERVES, NECK	\$ 3,470.00
64795	BIOPSY OF NERVE	\$ 778.00
64792	REMOVAL OF EXTENSIVE NERVE LESION	\$ 4,246.00
64790	REMOVE MAJOR PERIPH NERVE LESION	\$ 3,316.00
64788	REMOVAL OF SKIN NERVE LESION	\$ 1,566.00
64787	IMPLANT NERVE END INTO BONE/MUSCLE	\$ 924.00
64786	REMOVAL OF SCIATIC NERVE LESION	\$ 4,058.00
64784	REMOVE MAJOR PERIPH NERVE LESION	\$ 2,827.00
64783	REMOVE ADD'L HAND/FOOT NERVE LESION	\$ 858.00
64782	REMOVAL OF HAND/FOOT NERVE LESION	\$ 1,720.00
64778	REMOVAL OF NERVE LESION,ADDED DIGIT	\$ 719.00
64776	REMOVAL OF NERVE LESION, SAME DIGIT	\$ 1,481.00
64774	REMOVAL OF SKIN NERVE LESION	\$ 1,571.00
64772	SEVER EXTRADURAL SPINAL NERVE	\$ 2,191.00
64771	SEVER EXTRADURAL CRANIAL NERVE	\$ 2,339.00
64766	SEVER INTRAPELVIC OBTURATOR NERVE	\$ 2,539.00
64763	SEVER EXTRAPELVIC OBTURATOR NERVE	\$ 2,057.00
64760	SEVER VAGUS NERVE, ABDOMINAL	\$ 2,077.00
64755	SEVER STOMACH NERVES	\$ 3,727.00
64746	SEVER PHRENIC NERVE	\$ 1,712.00
64744	SEVER GREATER OCCIPITAL NERVE	\$ 2,047.00
64742	SEVER FACIAL NERVE	\$ 1,787.00
64740	SEVER LINGUAL NERVE	\$ 1,823.00
64738	SEVER INFERIOR ALVEOLAR NERVE	\$ 1,739.00
64736	SEVER MENTAL NERVE	\$ 1,391.00
64734	SEVER INFRAORBITAL NERVE	\$ 2,058.00
64732	SEVER SUPRAORBITAL NERVE	\$ 1,823.00
64727	REVISION OF INTERNAL NERVE(S)	\$ 717.00
64726	RELIEVE PRESSURE ON FOOT/TOE NERVE	\$ 987.00
64722	RELIEVE PRESSURE ON NERVE(S)	\$ 1,383.00
64721	CARPAL TUNNEL SURGERY	\$ 1,660.00
64719	REVISION OF ULNAR NERVE AT WRIST	\$ 1,550.00
64718	REVISION OF ULNAR NERVE AT ELBOW	\$ 2,305.00
64716	REVISION OF CRANIAL NERVE	\$ 1,967.00
64714	REVISION OF LOW BACK NERVE(S)	\$ 2,849.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
64713	REVISION OF ARM NERVE(S)	\$ 3,067.00
64712	REVISION OF SCIATIC NERVE	\$ 2,287.00
64708	REVISION OF ARM/LEG NERVE	\$ 1,946.00
64704	REVISION OF HAND/FOOT NERVE	\$ 1,200.00
64702	REVISION OF DIGITAL NERVE(S)	\$ 1,927.00
64681	DEST BY NEUROLYTIC AGENT HYPO PLEX	\$ 1,073.00
64680	DESTRUCTION OF CELIAC PLEXUS	\$ 597.00
64653	CHEMODENER OF ENDO GLD,OTH AREA/DAY	\$ 210.00
64650	CHEMODENER OF ECCRINE GLDS,BOTH AXI	\$ 158.00
64647	CHEMODENERVATION OF TRUNK 6 OR MOR	\$ 546.00
64646	CHEMODENER OF ECCRINE GLDS,BOTH AXI	\$ 457.00
64645	CHEMODENER OF ECCRINE GLDS,BOTH AXI	\$ 323.00
64644	CHEMODENERVTION 1 EXTRMITY 5 OR MOR	\$ 458.00
64643	CHEMODENERVTION 1 EXTRMITY 5 OR MOR	\$ 277.00
64642	CHEMODENERVTION 1 EXTREMTY 1-4 MSCL	\$ 422.00
64640	DESTROY PERIPHERAL NERVE OR BRANCH	\$ 431.00
64636	DESTROY L/S FACET JNT ADDL	\$ 219.00
64635	DESTROY LUMB/SAC FACET JNT	\$ 814.00
64634	DESTROY C/TH FACET JNT ADDL	\$ 249.00
64633	DESTROY CERV/THOR FACET JNT	\$ 827.00
64632	NULL	\$ 244.00
64630	DESTRUCTION OF PUDENDAL NERVE	\$ 713.00
64620	DESTRUCTION OF INTERCOSTAL NERVE	\$ 645.00
64617	CHEMODENERVATION MSCLE LARYNX UNILT	\$ 412.00
64616	DESTRUCTION OF INTERCOSTAL NERVE	\$ 447.00
64615	DESTRUCTION OF INTERCOSTAL NERVE	\$ 509.00
64612	DESTRUCTION OF FACE MUSCLE NERVE	\$ 450.00
64611	CHEMODENERV SALIV GLANDS	\$ 424.00
64610	DESTRUCTION OF TRIGEMINAL NERVE	\$ 1,991.00
64605	DESTRUCTION OF TRIGEMINAL NERVE	\$ 1,376.00
64600	DESTRUCTION OF TRIGEMINAL NERVE	\$ 891.00
64595	REVISE/REMOVE PERIPH NEURORECEIVER	\$ 478.00
64590	INS/REPL PERIPHER NEUROSTIM PULSGEN	\$ 608.00
64585	REVISE/REMOVE PERIPH NEUROELECTRODE	\$ 542.00
64581	INCSN IMPLNTN NEUROSTMLTR ELCTRD SN	\$ 2,501.00
64580	IMPLANT NEUROELECTRODES, NEUROMUSC	\$ 1,236.00
64575	IMPLANT NEUROELECTRODES, PERIPHERAL	\$ 1,347.00
64570	REMOVE VAGUS N ELTRD	\$ 3,044.00
64569	REVISE/REPL VAGUS N ELTRD	\$ 3,102.00
64568	INC FOR VAGUS N ELECT IMPL	\$ 2,514.00
64566	NEUROELTRD STIM POST TIBIAL	\$ 119.00
64561	PERCU IMPLANT NEURO ELECTR, SACRAL	\$ 1,139.00
64555	IMPLANT NEUROELECTRODES, PERIPHERAL	\$ 1,295.00
64553	IMPLANT NEUROELECTRODES, CRANIAL	\$ 1,358.00
64530	INJECT NERVE BLOCK, CELIAC PLEXUS	\$ 338.00
64520	INJECT NERVE BLOCK,VERT SYMPATHETIC	\$ 305.00
64517	ANES AGENT SUPE HUPOGASTRIC PLEXUS	\$ 458.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
64510	INJECT NERVE BLOCK,CERV SYMPATHETIC	\$ 276.00
64505	INJECT NERVE BLOCK, SPHEN GANGLION	\$ 378.00
64495	INJECT DX THERA PARAVERTE 3&ADD LVL	\$ 192.00
64494	INJECT DX THERAP PARAVERTE SEC LVL	\$ 189.00
64493	INJECT DX OR THERAP AGENT PARAVERTE	\$ 328.00
64492	INJECT DX OR THERAP AGENT 3&ADD LVL	\$ 223.00
64491	INJECT DX OR THERA AGENT SECOND LVL	\$ 220.00
64490	INJECT DX OR THERAPEUTIC AGENT	\$ 390.00
64489	TAP BLOCK BILATERAL BY CONTINUOUS I	\$ 280.00
64488	TAP BLOCK BILATERAL BY INJECTION(S)	\$ 249.00
64487	INJECT DX OR THERAPEUTIC AGENT	\$ 230.00
64486	INJECT DX OR THERAPEUTIC AGENT	\$ 204.00
64484	NULL	\$ 191.00
64483	NULL	\$ 411.00
64480	NULL	\$ 230.00
64479	NULL	\$ 482.00
64463	continuous infusion by catheter (in	\$ 299.00
64461	Paravertebral block (PVB) (paraspin	\$ 287.00
64455	NULL	\$ 125.00
64450	INJECT NERVE BLOCK, PERIPHERAL	\$ 161.00
64449	ANES AGENT LUMBAR PLEX POST INJ	\$ 304.00
64448	INJ ANES AGNT, TRIGEM, FEM NERV CON	\$ 251.00
64447	INJ, ANES AGNT, TRIGEM, FEMORAL NER	\$ 234.00
64446	INJ ANESTH, SCIATIC NERVE, TRIGEMNL	\$ 279.00
64445	INJECT NERVE BLOCK, SCIATIC	\$ 261.00
64435	INJECT NERVE BLOCK, UTERINE	\$ 298.00
64430	INJECT NERVE BLOCK, PUDENDAL	\$ 288.00
64425	INJECT NERVE BLOCK, ILIOINGUINAL	\$ 341.00
64421	INJECT NERVE BLOCK, INTERCOSTALS	\$ 328.00
64420	INJECT NERVE BLOCK, INTERCOSTAL	\$ 240.00
64418	INJECT NERVE BLOCK, SUPRASCAPULAR	\$ 211.00
64417	INJECT NERVE BLOCK, AXILLARY	\$ 250.00
64416	INJ, ANES AGNT, TRIGEM, BRACH PLEX	\$ 279.00
64415	INJECT NERVE BLOCK, BRACHIAL PLEXUS	\$ 230.00
64408	INJECT NERVE BLOCK, VAGUS	\$ 304.00
64405	INJECT NERVE BLOCK, GRTR OCCIPITAL	\$ 214.00
64400	INJECT NERVE BLOCK, TRIGEMINAL	\$ 277.00
63746	REMOVAL OF SPINAL SHUNT SYSTEM	\$ 2,509.00
63744	REVISE/REPLACE SPINAL SHUNT	\$ 2,819.00
63741	CREATE SPINAL SHUNT THRU SKIN	\$ 2,768.00
63740	CREATE SPINAL SHUNT, W/LAMINECTOMY	\$ 4,077.00
63710	GRAFT REPAIR OF SPINE	\$ 4,411.00
63709	REPAIR SPINAL FLUID LEAK,W/LAMINECT	\$ 4,521.00
63707	REPAIR SPINAL FLUID LEAKAGE	\$ 3,791.00
63706	REPAIR SPINAL HERNIA, MORE THAN 5CM	\$ 7,748.00
63704	REPAIR SPINAL HERNIA, LESS THAN 5CM	\$ 6,948.00
63702	REPAIR SPINAL HERNIA, MORE THAN 5CM	\$ 5,990.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
63700	REPAIR SPINAL HERNIA, LESS THAN 5CM	\$ 5,468.00
63688	REVISE/REMOVE SPINAL NEURORECEIVER	\$ 1,456.00
63685	INS/REPL NEUROSTIMULATOR SP PUL GEN	\$ 1,403.00
63664	REVISION INCL REPLMNT SPINAL NEUROS	\$ 3,601.00
63663	REVISION INC REPLCMNT SPINAL NEURO	\$ 1,702.00
63662	REM OF SPINAL NEUROSTIM ELECTRODE	\$ 3,452.00
63661	REMOVAL OF SPINAL NEUROSTIMULATOR	\$ 1,244.00
63655	IMPLANT EPIDURAL NEUROELECTRODES	\$ 3,407.00
63650	IMPLANT EPIDURAL NEUROELECTRODES	\$ 1,537.00
63621	NULL	\$ 1,077.00
63620	NULL	\$ 4,702.00
63610	STIMULATE SPINAL CORD/STEREOTAXIS	\$ 2,461.00
63600	CREATE SPINAL CORD LESION/STEREOTAX	\$ 4,590.00
63308	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 1,357.00
63307	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 10,205.00
63306	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 10,418.00
63305	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 10,601.00
63304	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 9,946.00
63303	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 9,811.00
63302	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 9,212.00
63301	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 9,327.00
63300	REMOVE VERTEBR SEG FOR SPINE TUMOR	\$ 7,656.00
63295	OSTEOPLASTIC RECON DORS SPINAL ELMT	\$ 1,402.00
63290	BIOPSY/REMOVE SPINAL TUMOR,COMBINED	\$ 11,866.00
63287	BIOPSY/REMOVE SPINAL TUMOR, TRUNK	\$ 11,663.00
63286	BIOPSY/REMOVE SPINAL TUMOR, THORAX	\$ 10,956.00
63285	BIOPSY/REMOVE SPINAL TUMOR, NECK	\$ 11,102.00
63283	BIOPSY/REMOVE SPINAL TUMOR, SACRAL	\$ 8,015.00
63282	BIOPSY/REMOVE SPINAL TUMOR, LUMBAR	\$ 8,318.00
63281	BIOPSY/REMOVE SPINAL TUMOR, THORAX	\$ 8,834.00
63280	BIOPSY/REMOVE SPINAL TUMOR, NECK	\$ 8,946.00
63278	BIOPSY/REMOVE SPINAL TUMOR, SACRAL	\$ 6,696.00
63277	BIOPSY/REMOVE SPINAL TUMOR, LUMBAR	\$ 6,460.00
63276	BIOPSY/REMOVE SPINAL TUMOR, THORAX	\$ 7,495.00
63275	BIOPSY/REMOVE SPINAL TUMOR, NECK	\$ 7,561.00
63273	REMOVE INTRASPINAL LESION, SACRAL	\$ 7,876.00
63272	REMOVE INTRASPINAL LESION, TRUNK	\$ 7,867.00
63271	REMOVE INTRASPINAL LESION, THORACIC	\$ 8,725.00
63270	REMOVE INTRASPINAL LESION, CERVICAL	\$ 8,787.00
63268	REMOVE INTRASPINAL LESION, SACRAL	\$ 5,874.00
63267	REMOVE INTRASPINAL LESION, LUMBAR	\$ 5,665.00
63266	REMOVE INTRASPINAL LESION, THORACIC	\$ 7,191.00
63265	REMOVE INTRASPINAL LESION, CERVICAL	\$ 6,983.00
63252	REVISE SPINAL CORD VESSELS,LOW BACK	\$ 12,928.00
63251	REVISE SPINAL CORD VESSELS, THORAX	\$ 12,931.00
63250	REVISE SPINAL CORD VESSELS, NECK	\$ 12,656.00
63200	RELEASE LUMBAR SPINAL CORD	\$ 6,410.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
63199	INCISE SPINAL COLUMN & CORD, THORAX	\$ 9,263.00
63198	INCISE SPINAL COLUMN & CORD, NECK	\$ 8,835.00
63197	INCISE SPINAL COLUMN & CORD, THORAX	\$ 7,211.00
63196	INCISE SPINAL COLUMN & CORD, NECK	\$ 7,511.00
63195	INCISE SPINAL COLUMN & CORD, THORAX	\$ 6,468.00
63194	INCISE SPINAL COLUMN & CORD, NECK	\$ 6,716.00
63191	INCISE SPINAL COLUMN/NERVE	\$ 5,793.00
63190	INCISE SPINAL COLUMN/NERVE ROOTS	\$ 4,880.00
63185	INCISE SPINAL COLUMN/NERVE ROOT(S)	\$ 4,641.00
63173	INCISE SPINAL COLUMN, DRAIN LESION	\$ 7,273.00
63172	INCISE SPINAL COLUMN, DRAIN LESION	\$ 5,766.00
63170	INCISE SPINAL CORD TRACT(S)	\$ 6,705.00
63103	VERTEBRAL CORPECTOMY	\$ 1,219.00
63102	VERTEBRAL CORPECTOMY	\$ 9,246.00
63101	VERTEBRAL CORPECTOMY	\$ 9,654.00
63091	REMOVE ADDED VERTEBR SEG, LOW BACK	\$ 722.00
63090	REMOVE VERTEBRAL BODY, LOW BACK	\$ 7,906.00
63088	REMOVE ADDED VERTEBR SEG, LOW BACK	\$ 1,049.00
63087	REMOVE VERTEBRAL BODY, LOW BACK	\$ 9,894.00
63086	REMOVE ADDED VERTEBRAL SEG, THORAX	\$ 784.00
63085	REMOVE VERTEBR BODY, THORAX, SINGLE	\$ 7,892.00
63082	REMOVE ADDED VERTEBRAL SEG, NECK	\$ 1,102.00
63081	REMOVE VERTEBRAL BODY, NECK, SINGLE	\$ 7,238.00
63078	REMOVE ADDED THORACIC SPINE DISK	\$ 890.00
63077	REMOVE THORACIC SPINE DISK, SINGLE	\$ 6,129.00
63076	REMOVE ADDED NECK SPINE DISK	\$ 1,018.00
63075	REMOVE NECK SPINE DISK, SINGLE	\$ 5,530.00
63066	DECOMPRESS ADDED SPINAL CORD SEGMNT	\$ 883.00
63064	DECOMPRESS THORACIC SPINAL CORD SEG	\$ 7,397.00
63057	DECOMPRESS ADDED SPINAL CORD SEGMNT	\$ 1,322.00
63056	DECOMPRESS LUMBAR SPINAL CORD SEG	\$ 6,114.00
63055	DECOMPRESS THORACIC SPINAL CORD SEG	\$ 6,771.00
63051	LAMINOPLASTY CERV W/RECON POST ELMT	\$ 6,956.00
63050	LAMINOPLASTY CERV W/DECOMP SPIN COR	\$ 6,159.00
63048	REMOVE ADDED SPINE LAMINA, 1 SEG	\$ 873.00
63047	REMOVE LUMBAR SPINE LAMINA, 1 SEG	\$ 4,501.00
63046	REMOVE THORACIC SPINE LAMINA, 1 SEG	\$ 5,037.00
63045	REMOVE NECK SPINE LAMINA, 1 SEG	\$ 5,322.00
63044	LAMINOTOMY, ADDTN LUMBAR INTERSPACE	\$ 990.00
63043	LAMINOTOMY, EACH ADDL CERV INTERSPC	\$ 930.00
63042	LOW BACK DISK SURGERY, RE-EXPLORE	\$ 5,272.00
63040	NECK SPINE DISK SURGERY, RE-EXPLORE	\$ 5,705.00
63035	ADDED SPINE DISK SURGERY/DECOMPRESS	\$ 790.00
63030	LOW BACK DISK SURGERY/DECOMPRESS	\$ 3,966.00
63020	NECK SPINE DISK SURGERY/DECOMPRESS	\$ 4,741.00
63017	REMOVE LUMBAR SPINE LAMINA, 3+ SEGS	\$ 5,230.00
63016	REMOVE THORACIC SPINE LAMINA, 3+	\$ 6,313.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
63015	REMOVE NECK SPINE LAMINA, 3+ SEGS	\$ 6,162.00
63012	REMOVAL OF SPINE LAMINA (GILL TYPE)	\$ 4,919.00
63011	REMOVE SACRAL SPINE LAMINA, 1-2	\$ 4,351.00
63005	REMOVE LUMBAR SPINE LAMINA, 1-2	\$ 4,921.00
63003	REMOVE THORACIC SPINE LAMINA, 1-2	\$ 5,120.00
63001	REMOVE NECK SPINE LAMINA, 1-2 SEGS	\$ 5,137.00
62370	ANL SP INF PMP W/MDREPRG&FIL	\$ 171.00
62369	ANAL SP INF PMP W/REPRG&FILL	\$ 135.00
62368	ANALYZE SP INF PUMP W/REPROG	\$ 135.00
62367	ANALYZE SPINAL INFUSION PUMP PRGM	\$ 95.00
62365	REMOVE SPINAL INFUSION PUMP	\$ 1,160.00
62362	IMPLANT/REPLACE SPINE INFUSION PUMP	\$ 1,500.00
62361	IMPLANT/REPLACE SPINE INFUSION PUMP	\$ 1,770.00
62360	IMPLANT SPINAL INFUSION PUMP	\$ 1,228.00
62355	REMOVE SPINAL CANAL CATHETER	\$ 1,061.00
62351	IMPLANT SPINAL CANAL CATH W/LAMINEC	\$ 3,532.00
62350	IMPLANT SPINAL CANAL CATHETER	\$ 1,540.00
62305	MYELOGRAPHY VIA LUMBAR INJECTION RS	\$ 454.00
62304	MYELOGRAPHY VIA LUMBAR INJECT RS&I	\$ 437.00
62294	INJECTION INTO SPINAL ARTERY	\$ 3,982.00
62292	INJECTION INTO DISK LESION, LUMBAR	\$ 2,151.00
62291	INJECT FOR SPINE DISK X-RAY, NECK	\$ 583.00
62290	INJECT FOR SPINE DISK X-RAY, LUMBAR	\$ 611.00
62287	PERCUTANEOUS DISCECTOMY, LUMBAR	\$ 2,187.00
62284	INJECTION FOR MYELOGRAM/CAT SCAN	\$ 325.00
62282	INJECT/TREAT SPINAL CANAL LESION	\$ 529.00
62281	INJECT/TREAT SPINAL CORD LESION	\$ 587.00
62280	INJECT/TREAT SPINAL CORD LESION	\$ 664.00
62273	INJECT/TREAT LUMBAR SPINE LESION	\$ 414.00
62272	SPINAL FLUID TAP FOR DRAINAGE	\$ 347.00
62270	DIAGNOSTIC SPINAL FLUID TAP, LUMBAR	\$ 285.00
62269	NEEDLE BIOPSY OF SPINAL CORD	\$ 967.00
62268	DRAINAGE OF SPINAL CORD LESION	\$ 958.00
62267	NULL	\$ 577.00
62264	PERCU LYSIS ADHESIONS W INJECT,1DAY	\$ 898.00
62263	NULL	\$ 1,139.00
62258	REPLACEMENT OF CSF SHUNT SYSTEM	\$ 4,630.00
62256	REMOVAL OF CSF SHUNT SYSTEM	\$ 2,501.00
62252	,26 REPROGRAM OF PROGRAMMABLE CFS	\$ 324.00
62230	REPLACE/REVISE CSF SHUNT/VALVE/CATH	\$ 3,504.00
62225	REPLACE/IRRIGATE VENTRICLE CATHETER	\$ 2,175.00
62223	CREATE BRAIN CAVITY SHUNT	\$ 4,317.00
62220	CREATE BRAIN CAVITY SHUNT	\$ 4,105.00
62201	CREATE BRAIN CAV SHUNT,STEREOTACTIC	\$ 5,048.00
62200	CREATE BRAIN CAVITY SHUNT	\$ 5,799.00
62194	REPLACE/IRRIGATE INTRACRAN CATHETER	\$ 2,021.00
62192	CREATE BRAIN CAVITY SHUNT	\$ 4,098.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
62190	CREATE BRAIN CAVITY SHUNT	\$ 3,871.00
62180	CREATE BRAIN CAVITY SHUNT	\$ 6,744.00
62165	NEUROENDO INTRACRNL, EXC PIT TUMOR	\$ 6,159.00
62164	NEUROENDO, INTRACRNL, EXC BRAIN TUM	\$ 8,824.00
62162	NEUROENDO, INTRACRN, FENETRITION CAT	\$ 7,972.00
62161	NEUROENDOSCOPY, INTRACRNI, DISS ADH	\$ 6,355.00
62160	NEUROENDOSCOPY, INTRACRANIAL CATH	\$ 807.00
62148	INC & RETVAL CRANIAL BONE, CRAIPLST	\$ 543.00
62147	REPAIR SKULL W/AUTOGRAFT, 5CM+	\$ 5,890.00
62146	REPAIR SKULL W/AUTOGRAFT, UP TO 5CM	\$ 4,719.00
62145	REPAIR OF SKULL AND BRAIN	\$ 5,988.00
62143	REPLACE SKULL PLATE/BONE FLAP	\$ 4,350.00
62142	REMOVAL OF SKULL PLATE/BONE FLAP	\$ 3,675.00
62141	REPAIR OF SKULL DEFECT, 5CM+	\$ 4,731.00
62140	REPAIR OF SKULL DEFECT, UP TO 5CM	\$ 4,227.00
62121	REPAIR SKULL CAVITY LESION, BASE	\$ 6,178.00
62120	REPAIR SKULL CAVITY LESION, VAULT	\$ 8,707.00
62117	REPAIR/RECONSTRUCT SKULL FOR DEFECT	\$ 8,317.00
62115	REPAIR SKULL DEFECT	\$ 7,048.00
62100	REPAIR OF BRAIN FLUID LEAKAGE	\$ 6,522.00
62010	TREATMENT OF HEAD INJURY	\$ 6,461.00
62005	REPAIR OF SKULL FRACTURE	\$ 5,345.00
62000	REPAIR OF CLOSED SKULL FRACTURE	\$ 4,327.00
61888	REVISE/REMOVE NEURORECEIVER	\$ 1,639.00
61886	NULL	\$ 3,540.00
61885	INS/REPL CRAN NEUROSTIM GEN; 1 ELEC	\$ 2,129.00
61880	REVISE/REMOVE NEUROELECTRODES	\$ 2,391.00
61868	TWIST DRILL BURR HOLE CRANIOTOMY	\$ 2,135.00
61867	TWIST DRILL BURR HOLE CRAINIOTOMY	\$ 9,656.00
61864	TWIST DRILL BURR HOLE CRAINIOTOMY	\$ 1,211.00
61863	TWIST DRILL BURR HOLE CRANIOTOMY	\$ 6,317.00
61860	IMPLANT NEUROELECTRODES, CEREBRUM	\$ 6,601.00
61850	IMPLANT NEUROELECTRODES, CORTEX	\$ 4,128.00
61800	NULL	\$ 643.00
61799	NULL	\$ 1,296.00
61798	NULL	\$ 5,798.00
61797	NULL	\$ 937.00
61796	NULL	\$ 4,253.00
61791	TREAT TRIGEMINAL TRACT/STEREOTACTIS	\$ 4,724.00
61790	TREAT TRIGEMINAL NERVE/STEREOTACTIC	\$ 3,663.00
61783	SCAN PROC SPINAL	\$ 983.00
61782	SCAN PROC CRANIAL EXTRA	\$ 660.00
61781	SCAN PROC CRANIAL INTRA	\$ 1,002.00
61770	INSERT CATHETER, STEREOTACTIC	\$ 6,849.00
61760	IMPLANT ELECTRODES, STEREOTACTIC	\$ 6,659.00
61751	STEREOTACTIC BIOPSY W/CAT SCAN	\$ 5,782.00
61750	STEREOTACTIC BIOPSY/SURGERY	\$ 5,931.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
61735	STEREOTACTIC SURGERY	\$ 6,707.00
61720	STEREOTACTIC SURGERY	\$ 5,344.00
61711	FUSION OF SKULL ARTERIES	\$ 10,954.00
61710	REVISION OF CIRCULATION TO HEAD	\$ 9,105.00
61708	REVISION OF CIRCULATION TO HEAD	\$ 10,808.00
61705	REVISION OF CIRCULATION TO HEAD	\$ 11,055.00
61703	CLAMP NECK ARTERY FOR ANEURYSM	\$ 5,715.00
61702	REPAIR INTRACRANIAL ANEURYSM	\$ 17,312.00
61700	REPAIR INTRACRANIAL ANEURYSM	\$ 14,517.00
61698	SURG Cmplx INTRACRNL ANEU, VERBASIL	\$ 20,797.00
61697	SURGERY COMPLEX INTRACRANIAL, CAROT	\$ 18,124.00
61692	REPAIR INTRACRANIAL VESSEL DEFECT	\$ 15,659.00
61690	REPAIR INTRACRANIAL VESSEL DEFECT	\$ 9,233.00
61686	REPAIR INTRACRANIAL VESSEL DEFECT	\$ 20,226.00
61684	REPAIR INTRACRANIAL VESSEL DEFECT	\$ 12,099.00
61682	REPAIR INTRACRANIAL VESSEL DEFECT	\$ 18,547.00
61680	REPAIR INTRACRANIAL VESSEL DEFECT	\$ 9,519.00
61650	Endovascular intracranial prolonged	\$ 2,326.00
61635	T/CATH PLACMT INTRAVASC ST INTRACRA	\$ 5,831.00
61630	BALLO ANGIOPL INTRACRAN PERCUTA	\$ 5,599.00
61626	CATHETER OCCLUSION/EMBOLIZATION	\$ 3,451.00
61624	CATHETER OCCLUSION/EMBOLIZATION,CNS	\$ 4,688.00
61623	ENDOVASC BALLON OCCLSION, HEAD	\$ 2,333.00
61619	SECONDARY REPAIR OF DURA CSF LEAK	\$ 5,601.00
61618	SECONDARY REPAIR OF DURA CSF LEAK	\$ 5,221.00
61616	EXCISE SKULL LESION, INTRADURAL	\$ 13,734.00
61615	EXCISE SKULL LESION, EXTRADURAL	\$ 11,771.00
61613	REMOVE CAROTID ANEURYSM IN SINUS	\$ 13,925.00
61611	TRANSECT ARTERY IN PETROUS CANAL	\$ 2,005.00
61608	EXCISE CRANIAL LESION, INTRADURAL	\$ 13,648.00
61607	EXCISE CRANIAL LESION, EXTRADURAL	\$ 10,679.00
61606	EXCISE CRANIAL LESION, INTRADURAL	\$ 12,095.00
61605	EXCISE CRANIAL LESION, EXTRADURAL	\$ 8,232.00
61601	EXCISE CRANIAL LESION, INTRADURAL	\$ 9,963.00
61600	EXCISE CRANIAL LESION, EXTRADURAL	\$ 8,315.00
61598	TRANSPETROSAL APPROACH	\$ 11,945.00
61597	TRANSCONDYLAR APPROACH	\$ 12,283.00
61596	TRANSCOCHLEAR APPROACH	\$ 9,193.00
61595	TRANSTEMPORAL APPROACH	\$ 9,350.00
61592	ORBITOCRANIAL ZYGOMATIC APPROACH	\$ 13,215.00
61591	INFRATEMPORAL APPROACH	\$ 12,052.00
61590	INFRATEMPORAL APPROACH	\$ 11,802.00
61586	RESECT, NASOPHARYNX W/O BONE GRAFT	\$ 10,189.00
61585	ORBITOCRANIAL APPROACH, W/EXENTER	\$ 13,672.00
61584	ORBITOCRANIAL APPROACH	\$ 11,930.00
61583	CRANIOFACIAL APPROACH, INTRADURAL	\$ 11,981.00
61582	CRANIOFACIAL APPROACH, EXTRADURAL	\$ 12,727.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
61581	CRANIOFACIAL APPROACH, EXTRADURAL	\$ 10,049.00
61580	CRANIOFACIAL APPROACH, EXTRADURAL	\$ 9,501.00
61576	SKULL BASE/BRAIN STEM SURGERY	\$ 17,691.00
61575	SKULL BASE/BRAIN STEM SURGERY	\$ 10,633.00
61571	TREAT BRAIN WOUND, REMOVE OBJECT	\$ 8,413.00
61570	REMOVE BRAIN FOREIGN BODY	\$ 7,888.00
61567	CRANIOTOMY WITH ELEVAT BONE FLAP	\$ 10,844.00
61566	CRANIOTOMY W ELEVAT OF BONE FLAP	\$ 9,505.00
61564	REMOVAL OF BENIGN SKULL TUMOR	\$ 10,192.00
61563	REMOVAL OF BENIGN SKULL TUMOR	\$ 8,382.00
61559	REOPEN SKULL SUTURES, W/BONE GRAFTS	\$ 10,123.00
61558	REOPEN SKULL SUTURES, EXTENSIVE	\$ 7,924.00
61557	INCISE SKULL, REOPEN SUTURE(S)	\$ 7,081.00
61556	INCISE SKULL, REOPEN SUTURE(S)	\$ 7,201.00
61552	REOPEN SKULL SUTURES	\$ 6,231.00
61550	REOPEN SKULL SUTURE	\$ 4,966.00
61548	REMOVAL OF PITUITARY GLAND OR TUMOR	\$ 6,469.00
61546	REMOVAL OF PITUITARY GLAND OR TUMOR	\$ 9,776.00
61545	REMOVAL OF BRAIN TUMOR	\$ 13,572.00
61544	REMOVAL/COAGULATION OF BRAIN LESION	\$ 8,037.00
61543	REMOVAL OF BRAIN TISSUE	\$ 9,199.00
61541	INCISION OF BRAIN TISSUE	\$ 9,095.00
61540	CRANIOTOMY W ELEVAT OF BONE FLAP	\$ 9,223.00
61539	REMOVE PART OR ALL OF BRAIN LOBE	\$ 10,009.00
61538	REMOVAL OF TEMPORAL LOBE	\$ 11,342.00
61537	CRANIOTOMY W ELEVAT BONE FLAP	\$ 10,483.00
61536	REMOVAL OF EPILEPTIC LESION	\$ 10,953.00
61535	REMOVAL OF BRAIN ELECTRODES	\$ 4,181.00
61534	REMOVAL OF EPILEPTIC LESION	\$ 6,934.00
61533	INCISE SKULL, INSERT ELECTRODES	\$ 6,435.00
61531	IMPLANT BRAIN ELECTRODES THRU HOLES	\$ 5,119.00
61530	INCISE BONE FLAP,REMOVE BRAIN TUMOR	\$ 13,130.00
61526	INCISE BONE FLAP,REMOVE BRAIN TUMOR	\$ 13,616.00
61524	REMOVAL OF BRAIN CYST	\$ 8,809.00
61522	REMOVAL OF BRAIN ABSCESS	\$ 9,260.00
61521	REMOVAL OF BRAIN MIDLINE TUMOR	\$ 13,584.00
61520	REMOVE CEREBELLUM-BRAIN STEM TUMOR	\$ 15,739.00
61519	REMOVAL OF BRAIN LINING TUMOR	\$ 12,552.00
61518	REMOVAL OF BRAIN TUMOR	\$ 11,711.00
61517	IMPLNTATION BRAIN INTRACAVTY AGENT	\$ 374.00
61516	REMOVE SUPRATENTORIAL BRAIN CYST	\$ 7,896.00
61514	REMOVE SUPRATENTORIAL BRAIN ABSCESS	\$ 8,052.00
61512	REMOVAL OF BRAIN LINING TUMOR	\$ 10,819.00
61510	REMOVE SUPRATENTORIAL BRAIN TUMOR	\$ 9,253.00
61501	REMOVAL OF INFECTED SKULL BONE	\$ 4,607.00
61500	REMOVAL OF SKULL LESION	\$ 5,347.00
61460	REMOVE CRANIAL NERVE(S)	\$ 8,909.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
61458	EXPLORE/DECOMPRESS CRANIAL NERVES	\$ 8,490.00
61450	INCISION OF SKULL FOR SURGERY	\$ 8,125.00
61345	RELIEVE CRANIAL PRESSURE	\$ 8,628.00
61343	INCISE SKULL TO RELIEVE PRESSURE	\$ 9,269.00
61340	RELIEVE CRANIAL PRESSURE	\$ 6,068.00
61333	EXPLORE EYE SOCKET, REMOVE LESION	\$ 8,557.00
61330	DECOMPRESSION OF EYE SOCKET	\$ 7,561.00
61323	CRANIECTMY DECOMPRESSVE, W LOBECTOM	\$ 10,167.00
61322	CRAINECTOMY, DECOMPRESSIVE W/O LOBE	\$ 10,058.00
61321	OPEN SKULL FOR DRAINAGE OF ABSCESS	\$ 8,997.00
61320	OPEN SKULL FOR DRAINAGE OF ABSCESS	\$ 8,016.00
61316	INCISION & PLCMNT OF RANL BONE GRFT	\$ 375.00
61315	OPEN SKULL FOR REMOVAL OF HEMATOMA	\$ 8,728.00
61314	OPEN SKULL FOR REMOVAL OF HEMATOMA	\$ 7,700.00
61313	OPEN SKULL FOR REMOVAL OF HEMATOMA	\$ 8,360.00
61312	OPEN SKULL FOR REMOVAL OF HEMATOMA	\$ 8,781.00
61305	OPEN SKULL FOR EXPLORATION	\$ 8,477.00
61304	OPEN SKULL FOR EXPLORATION	\$ 6,912.00
61253	PIERCE SKULL, EXPLORATORY	\$ 4,165.00
61250	PIERCE SKULL, EXPLORATORY	\$ 3,629.00
61215	INSERT BRAIN-FLUID DEVICE	\$ 2,088.00
61210	PIERCE SKULL TO IMPLANT DEVICE	\$ 1,572.00
61156	PIERCE SKULL TO DRAIN LESION	\$ 5,230.00
61154	PIERCE SKULL TO REMOVE HEMATOMA	\$ 5,325.00
61151	RE-PIERCE SKULL FOR DRAINAGE	\$ 4,165.00
61150	PIERCE SKULL FOR DRAINAGE	\$ 5,693.00
61140	PIERCE SKULL FOR BIOPSY	\$ 5,316.00
61120	PIERCE SKULL FOR EXAMINATION	\$ 3,115.00
61108	DRILL SKULL FOR REMOVAL OF HEMATOMA	\$ 3,712.00
61107	DRILL SKULL FOR IMPLANT OF DEVICE	\$ 1,338.00
61105	DRILL SKULL FOR EXAMINATION	\$ 1,902.00
61070	BRAIN CANAL SHUNT FOR DRAIN/INJECT	\$ 218.00
61055	INJECTION INTO BRAIN CANAL	\$ 482.00
61050	REMOVAL OF BRAIN CANAL FLUID	\$ 313.00
61026	INJECTION INTO BRAIN CAVITY	\$ 420.00
61020	REMOVAL OF BRAIN CAVITY FLUID	\$ 435.00
61001	REMOVE BRAIN CAVITY FLUID, INFANT	\$ 450.00
61000	REMOVE BRAIN CAVITY FLUID, INFANT	\$ 474.00
60650	LAPSCPY SURG W ADRENECTMY	\$ 4,713.00
60605	REMOVE CAROTID BODY TUMOR/ARTERY	\$ 6,758.00
60600	REMOVE CAROTID BODY TUMOR	\$ 5,470.00
60545	EXPLORE/REMOVE ADRENAL GLAND/TUMOR	\$ 4,866.00
60540	EXPLORE/REMOVE ADRENAL GLAND	\$ 4,206.00
60522	REMOVAL OF THYMUS GLAND	\$ 5,449.00
60521	REMOVAL OF THYMUS GLAND	\$ 4,477.00
60520	REMOVAL OF THYMUS GLAND	\$ 4,194.00
60512	PARATHYROID AUTOTRANSPLANTATION	\$ 959.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
60505	EXPLORE PARATHYROIDS/MEDIASTINUM	\$ 5,418.00
60502	RE-EXPLORE PARATHYROIDS	\$ 5,127.00
60500	EXPLORE PARATHYROID GLANDS	\$ 3,807.00
60300	ASPIR/INJ THYROID CYST	\$ 182.00
60281	RE-REMOVE THYROID DUCT LESION	\$ 2,212.00
60280	REMOVE THYROID DUCT LESION	\$ 1,680.00
60271	REMOVAL OF THYROID GLAND	\$ 4,109.00
60270	REMOVAL OF THYROID GLAND	\$ 5,347.00
60260	FOLLOWUP THYROID SURGERY	\$ 4,229.00
60254	RADICAL THYROID SURGERY FOR TUMOR	\$ 6,481.00
60252	REMOVAL OF THYROID FOR TUMOR	\$ 5,152.00
60240	REMOVAL OF THYROID GLAND	\$ 3,592.00
60225	REMOVAL OF THYROID LOBE, TOTAL	\$ 3,612.00
60220	REMOVAL OF THYROID LOBE, TOTAL	\$ 2,732.00
60212	PARTIAL REMOVAL OF THYROID LOBE	\$ 4,143.00
60210	PARTIAL REMOVAL OF THYROID LOBE	\$ 2,759.00
60200	REMOVAL OF THYROID LESION	\$ 2,580.00
60100	NEEDLE BIOPSY OF THYROID GLAND	\$ 284.00
60000	DRAIN INFECTED THYROID/TONGUE CYST	\$ 575.00
59871	REMOVE CERCLAGE SUTURE W/ANESTHESIA	\$ 543.00
59870	EVACUATE MOLE OF UTERUS	\$ 2,050.00
59866	MULTIFETAL PREGNANCY REDUCTION	\$ 984.00
59857	ABORTION, SUPPOSITORY W/HYSTEROTOMY	\$ 2,376.00
59856	ABORTION, BY SUPPOSITORY W/D&C/D&E	\$ 2,027.00
59855	ABORTION, BY SUPPOSITORY	\$ 1,723.00
59852	ABORTION, BY INJECT W/HYSTEROTOMY	\$ 2,327.00
59851	ABORTION, BY INJECTION W/D&C/D&E	\$ 1,687.00
59850	ABORTION, INDUCED BY INJECTION	\$ 1,581.00
59841	ABORTION, INDUCED BY D&E	\$ 1,504.00
59840	ABORTION, INDUCED BY D&C	\$ 879.00
59830	TREAT SEPTIC ABORTION	\$ 1,841.00
59821	TREAT MISSED ABORTION, 2ND TRIMEST	\$ 1,492.00
59820	TREAT MISSED ABORTION, 1ST TRIMEST	\$ 1,498.00
59812	TREATMENT OF INCOMPLETE ABORTION	\$ 1,234.00
59622	ATTEMPT VBAC DELIV W/POSTPART CARE	\$ 5,401.00
59620	ATTEMPTED VBAC, CESAREAN DELIV ONLY	\$ 3,919.00
59618	ATTEMPTED VBAC DEL, ROUTINE OBSTET	\$ 9,732.00
59614	VBAC DELIVERY W/POSTPARTUM CARE	\$ 4,695.00
59612	VBAC, VAGINAL DELIVERY ONLY	\$ 3,780.00
59610	VBAC DELIV, ROUTINE OBSTETRIC CARE	\$ 9,113.00
59525	REMOVE UTERUS AFTER CESAREAN DELIV	\$ 2,004.00
59515	CESAREAN DELIVERY ONLY W/POSTPARTUM	\$ 5,219.00
59514	CESAREAN DELIVERY ONLY	\$ 3,762.00
59510	ROUTINE CARE AND CESAREAN DELIVERY	\$ 9,590.00
59430	CARE AFTER DELIVERY	\$ 568.00
59426	ANTEPARTUM CARE ONLY, 7+ VISITS	\$ 2,547.00
59425	ANTEPARTUM CARE ONLY, 4-6 VISITS	\$ 1,450.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
59414	DELIVERY OF PLACENTA	\$ 378.00
59412	ANTEPARTUM MANIPULATION	\$ 426.00
59410	VAGINAL DELIVERY & POSTPARTUM CARE	\$ 4,241.00
59409	VAGINAL DELIVERY ONLY	\$ 3,299.00
59400	ROUTINE OBSTETRIC CARE	\$ 8,561.00
59350	REPAIR OF UTERUS RUPTURE	\$ 1,160.00
59325	REVISION OF CERVIX DURING PREGNANCY	\$ 997.00
59320	REVISION OF CERVIX DURING PREGNANCY	\$ 617.00
59300	EPISIOTOMY/VAGINAL REPAIR BY OTHER	\$ 599.00
59200	INSERT CERVICAL DILATOR	\$ 184.00
59160	D&C AFTER DELIVERY	\$ 742.00
59151	TREAT ECTOPIC PREGNANCY/LAPAROSCOPY	\$ 3,140.00
59150	TREAT ECTOPIC PREGNANCY/LAPAROSCOPY	\$ 3,214.00
59140	TREAT ECTOPIC PREGNANCY, CERVICAL	\$ 1,674.00
59136	TREAT ECTOPIC PREG, INTERSTITIAL	\$ 3,666.00
59135	TREAT ECTOPIC PREGNANCY,INTERSTICES	\$ 3,825.00
59130	TREAT ECTOPIC PREGNANCY, ABDOMINAL	\$ 3,867.00
59121	TREAT ECTOPIC PREGNANCY, TUBE/OVARY	\$ 3,317.00
59120	TREAT ECTOPIC PREGNANCY, TUBE/OVARY	\$ 3,312.00
59100	REMOVAL OF UTERUS LESION	\$ 3,480.00
59076	FETAL SHUNT PLACEMENT INC GUIDENCE	\$ 2,158.00
59074	FETAL FLUID DRAINAGE	\$ 1,274.00
59072	FETAL UMBILICAL CORD INC GUIDENCE	\$ 2,158.00
59070	TRANSABDOMINAL AMINO INC GUID	\$ 1,274.00
59051	FETAL MONITOR, REPORT ONLY	\$ 176.00
59050	FETAL MONITOR, SUPERVISE/REPORT	\$ 214.00
59030	FETAL SCALP BLOOD SAMPLING	\$ 465.00
59025	,26 FETAL NON-STRESS TEST	\$ 186.00
59020	,26 FETAL CONTRACTION STRESS TEST	\$ 273.00
59015	CHORION SAMPLING	\$ 540.00
59012	FETAL CORD PUNCTURE	\$ 833.00
59001	AMINOCENTESIS, THERA AMNIOTIC FLUID	\$ 733.00
59000	AMNIOCENTESIS	\$ 328.00
58976	TRANSFER OF GAMETE/ZYGOTE	\$ 823.00
58970	PUNCTURE RETRIEVAL OF OOCYTE	\$ 763.00
58960	EXPLORE ABDOMEN FOR OVARIAN TUMOR	\$ 3,738.00
58958	TUMR DBLKNG OVRY W PLVC LYMPADNCTMY	\$ 6,799.00
58957	TUMR DBLKNG OVARY, TUBL W OMNCTMY	\$ 6,138.00
58956	BILAT SALPINGO-OOPHORECTOMY FOR MAL	\$ 5,279.00
58954	TAH-BSO W OMENTEMY, W LYMADECTMY	\$ 8,480.00
58953	BSO W OMENTECTMY, TAH & RAD DISSECT	\$ 7,800.00
58952	REMOVE OVARIAN TUMOR W/DISSECTION	\$ 6,329.00
58951	REMOVE OVARIAN TUMOR W/HYSTERECTOMY	\$ 5,570.00
58950	REMOVAL OF OVARIAN TUMOR	\$ 4,355.00
58943	REMOVAL OF OVARY(S) FOR TUMOR	\$ 4,516.00
58940	REMOVAL OF OVARY(S)	\$ 2,098.00
58925	REMOVAL OF OVARIAN CYST(S)	\$ 2,945.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
58920	PARTIAL REMOVAL OF OVARY(S)	\$ 2,737.00
58900	BIOPSY OF OVARY(S)	\$ 1,642.00
58825	TRANSPOSITION OF OVARY(S)	\$ 2,714.00
58822	DRAIN OVARIAN ABSCESS, ABDOM APPRO	\$ 2,732.00
58820	DRAIN OVARIAN ABSCESS, VAG APP, OPN	\$ 1,255.00
58805	DRAINAGE OF OVARIAN CYST(S)	\$ 1,606.00
58800	DRAINAGE OF OVARIAN CYST(S)	\$ 1,183.00
58770	CREATE NEW TUBAL OPENING	\$ 3,317.00
58760	REMOVE TUBAL OBSTRUCTION	\$ 3,151.00
58752	IMPLANT OVIDUCT(S) IN UTERUS	\$ 3,490.00
58750	FUSION OF OVIDUCT(S)	\$ 3,499.00
58740	LYSIS OF OVARY/OVIDUCT ADHESIONS	\$ 3,476.00
58720	REMOVAL OF OVARY/OVIDUCT(S)	\$ 2,874.00
58700	REMOVAL OF OVIDUCT	\$ 3,067.00
58673	NULL	\$ 3,073.00
58672	NULL	\$ 2,828.00
58671	NULL	\$ 1,414.00
58670	LAPAROSCOPY TUBAL CAUTERY	\$ 1,418.00
58662	NULL	\$ 2,745.00
58661	NULL	\$ 2,506.00
58660	NULL	\$ 2,629.00
58615	OCCLUDE OVIDUCT(S)	\$ 960.00
58611	LIGATE/CUT OVIDUCT(S) AT SURGERY	\$ 299.00
58605	LIGATE/CUT OVIDUCT(S), POSTPARTUM	\$ 1,279.00
58600	LIGATE/CUT OVIDUCT(S)	\$ 1,413.00
58573	TLH W/T/O UTERUS OVER 250 G	\$ 4,649.00
58572	TLH, UTERUS OVER 250 G	\$ 3,965.00
58571	TLH W/T/O 250 G OR LESS	\$ 3,440.00
58570	TLH, UTERUS 250 G OR LESS	\$ 3,049.00
58565	HYSTEROSCOY, SURG; W/ BIL FALLO TUB	\$ 1,722.00
58563	HYSTEROSCOPY ABLATION	\$ 951.00
58562	NULL	\$ 858.00
58561	NULL	\$ 1,392.00
58560	NULL	\$ 1,216.00
58559	NULL	\$ 1,105.00
58558	HYSTEROSCOPY BIOPSY	\$ 893.00
58555	NULL	\$ 587.00
58554	LAP SUG, VAG HYSTREMY, REMOVAL TUBE	\$ 5,064.00
58553	LAP SURW VAG HYSTREMY, UTRS 250GMS	\$ 4,339.00
58552	LAPSCPY SURG, VAG HYSTREMY,REM TUB	\$ 3,787.00
58550	NULL	\$ 3,396.00
58548	LAP SURGCL W RADCL HYSTERCTOMY	\$ 7,280.00
58546	LAPRSCPY SURG, MYOMECTMY, >5 MYOMAS	\$ 4,314.00
58545	LAPRSCPY, SURG MYOECTMY, 1-4 INTRAM	\$ 3,466.00
58544	LAPSRGCL HYSTRCTMY>250G W RMVL TUBE	\$ 3,479.00
58543	LAP SURGCL HYSTRCTMY UTERUS > 250G	\$ 3,235.00
58542	LAP SURGCL HYSTRCTMY W RMVL TUBE	\$ 3,174.00

<b>CPT</b>		<b>Standard Fee</b>
<b>Code</b>	<b>CPT Code Description</b>	
58541	LAP SURGCL SUPRACRVCL HYSTRCTMY	\$ 2,786.00
58540	REVISION OF UTERUS	\$ 3,526.00
58520	REPAIR OF RUPTURED UTERUS	\$ 3,066.00
58410	SUSPENSION OF UTERUS, EXCISE NERVES	\$ 3,130.00
58400	SUSPENSION OF UTERUS	\$ 1,732.00
58356	ENDOMET CRYOABL W/ US GUID,ENDM CUR	\$ 1,362.00
58353	ENDOMETRIAL ABLTION, THERMAL	\$ 867.00
58350	CHROMOTUBATION OF OVIDUCT	\$ 331.00
58346	INSERT HEYMAN CAPSULE FOR BRACHYTHR	\$ 1,726.00
58345	REOPEN OVIDUCT W/CATHETER	\$ 1,098.00
58340	CATH/INTRO FOR UTERUS/OVIDUCT X-RAY	\$ 216.00
58323	SPERM WASHING FOR ARTIFICIAL INSEM	\$ 51.00
58322	ARTIFICIAL INSEMINATION	\$ 227.00
58321	ARTIFICIAL INSEMINATION	\$ 184.00
58301	REMOVE INTRAUTERINE DEVICE (IUD)	\$ 258.00
58294	VAG HYSTRCTMY UTRS>250G W RPR ENTRC	\$ 4,706.00
58292	VAG HYSTRCTM UTRS>250G W RPR ENTRCL	\$ 5,075.00
58291	VAG HYSTRCTMY UTRS>250G W RMVL TUBE	\$ 4,803.00
58290	VAG HYSTERECTMY FOR UTERUS > 250 GM	\$ 4,442.00
58285	RADICAL VAGINAL HYSTERECTOMY	\$ 5,618.00
58280	VAGINAL HYSTERECTOMY, REVISE VAGINA	\$ 4,079.00
58275	VAGINAL HYSTERECTOMY, REVISE VAGINA	\$ 3,797.00
58270	VAGINAL HYSTERECTOMY, HERNIA REPAIR	\$ 3,428.00
58267	VAGINAL HYSTERECTOMY, W/SUSPENSION	\$ 4,100.00
58263	VAGINAL HYSTERECTOMY, W/TUBE/OVARY	\$ 3,833.00
58262	VAGINAL HYSTERECTOMY, W/TUBE/OVARY	\$ 3,564.00
58260	VAGINAL HYSTERECTOMY	\$ 3,209.00
58240	REMOVE PELVIS CONTENTS FOR TUMOR	\$ 11,169.00
58210	RADICAL HYSTERECTOMY	\$ 7,066.00
58200	TOTAL HYSTERECTOMY	\$ 5,233.00
58180	PARTIAL HYSTERECTOMY	\$ 3,696.00
58152	TOTAL HYSTERECTOMY, W/SUSPENSION	\$ 4,834.00
58150	TOTAL HYSTERECTOMY	\$ 3,885.00
58146	MYOMECTMY, EXCI FIBROID UTRS,	\$ 4,458.00
58145	REMOVAL OF FIBROID UTERUS TUMOR	\$ 2,153.00
58140	REMOVAL OF FIBROID UTERUS TUMOR	\$ 3,589.00
58120	DILATION AND CURETTAGE (D&C)	\$ 870.00
58110	ENDOMET SAMPL PERFORMED W/COLOSCOPY	\$ 158.00
58100	BIOPSY OF UTERUS LINING	\$ 256.00
57800	DILATION OF CERVIX CANAL	\$ 184.00
57720	REVISION OF CERVIX	\$ 1,236.00
57700	REVISION OF CERVIX	\$ 1,279.00
57558	DILATION AND CURETAGE CERVICAL STMP	\$ 468.00
57556	REMOVE CERVIX STUMP, REPAIR BOWEL	\$ 2,229.00
57555	REMOVE CERVIX STUMP, REPAIR VAGINA	\$ 2,356.00
57550	REMOVAL OF CERVIX STUMP	\$ 1,617.00
57545	REMOVE CERVIX STUMP, REPAIR PELVIS	\$ 3,195.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
57540	REMOVAL OF CERVIX STUMP	\$ 3,030.00
57531	TRACHELECTOMY, RADICAL	\$ 7,489.00
57530	REMOVAL OF CERVIX	\$ 1,380.00
57522	REMOVE CERVIX CONE W/LOOP ELECTRODE	\$ 955.00
57520	REMOVAL OF CERVIX CONE	\$ 1,089.00
57513	LASER SURGERY OF CERVIX	\$ 537.00
57511	CRYOCAUTERY OF CERVIX	\$ 538.00
57510	ELECTRO-/THERMOCAUTERY OF CERVIX	\$ 437.00
57505	SCRAPING OF CERVICAL CANAL LINING	\$ 383.00
57500	BIOPSY/REMOVAL OF CERVIX LESION	\$ 288.00
57461	COLPSCPY CERV, LOOP ELCTRDE CONIZTN	\$ 716.00
57460	VAGINOSCOPY WITH LEEP	\$ 618.00
57456	COLPOSCPY CERVIX, WITH ENDCERV CURR	\$ 390.00
57455	COLPOSCOPY CERVIX, W BIOPSY CERVIX	\$ 423.00
57454	VAGINOSCOPY W/CERVICAL BIOPSY	\$ 517.00
57452	VAGINOSCOPY	\$ 351.00
57426	REVISION OF PROSTHETIC VAGINAL GRAF	\$ 3,281.00
57425	LAPAROSCOPY SURGICAL COLPOPEXY	\$ 3,733.00
57423	REPAIR PARAVAG DEFECT, LAP	\$ 3,548.00
57421	COLPOSCOPY VAG W/CERVIX W/BX	\$ 472.00
57420	COLPOSCOPY VAGINA, WITH CERVIX	\$ 349.00
57415	REMOVE OBJECT FROM VAGINA, W/ANESTH	\$ 645.00
57410	PELVIC EXAMINATION W/ANESTHESIA	\$ 407.00
57400	DILATION OF VAGINA, W/ANESTHESIA	\$ 505.00
57335	REVISE VAGINA FOR INTERSEX STATE	\$ 4,506.00
57330	REPAIR BLADDER-VAGINA FISTULA	\$ 2,828.00
57320	REPAIR BLADDER-VAGINA FISTULA	\$ 2,072.00
57311	REPAIR URETHRA-VAGINA FISTULA	\$ 2,031.00
57310	REPAIR URETHRA-VAGINA FISTULA	\$ 1,794.00
57308	REPAIR RECTOVAGIN FISTULA, TRANSPER	\$ 2,477.00
57307	FISTULA REPAIR AND COLOSTOMY	\$ 3,963.00
57305	REPAIR RECTUM-VAGINA FISTULA	\$ 3,767.00
57300	REPAIR RECTUM-VAGINA FISTULA	\$ 2,272.00
57296	RVSN PROSTHETC VAG GRAFT OPN ABDMNL	\$ 3,609.00
57295	REVIS OF PROSTH VAGIN GRFT VAG APPR	\$ 1,875.00
57292	CONSTRUCTION OF VAGINA WITH GRAFT	\$ 3,176.00
57291	CONSTRUCTION OF VAGINA	\$ 2,078.00
57289	REPAIR BLADDER AND VAGINA	\$ 3,004.00
57288	REPAIR BLADDER DEFECT	\$ 2,783.00
57287	REMOVL SLING FOR STRESS INCONTINENCE	\$ 2,711.00
57285	REPAIR PARAVAG DEFECT, VAG	\$ 2,621.00
57284	REPAIR PARAVAGINAL DEFECT	\$ 3,136.00
57283	COLPOPEXY,VAGINAL;INTRA-PERITO APPR	\$ 2,680.00
57282	COLPOPEXY,VAGINAL;EXTRA-PERITO APPR	\$ 2,003.00
57280	SUSPENSION OF VAGINA	\$ 3,675.00
57270	REPAIR OF BOWEL POUCH	\$ 3,105.00
57268	REPAIR OF BOWEL BULGE	\$ 1,899.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
57267	INS PROSTH,REP PELV FLR DEF EAC SIT	\$ 964.00
57265	EXTENSIVE REPAIR OF VAGINA	\$ 3,338.00
57260	REPAIR OF VAGINA	\$ 2,967.00
57250	REPAIR RECTUM & VAGINA, RECTOCELE	\$ 2,327.00
57240	REPAIR BLADDER & VAGINA, CYSTOCELE	\$ 2,303.00
57230	REPAIR OF URETHROCELE	\$ 1,571.00
57220	REVISION OF URETHRAL SPHINCTER	\$ 1,279.00
57210	REPAIR VAGINA/PERINEUM INJURY	\$ 1,467.00
57200	REPAIR OF VAGINA INJURY	\$ 1,213.00
57180	TREATMENT OF VAGINAL BLEEDING	\$ 440.00
57170	FITTING OF DIAPHRAGM/CERVICAL CAP	\$ 182.00
57160	FIT/INSRT PESSARY/OTH SUPPORT DEV	\$ 178.00
57156	INS VAG BRACHYTX DEVICE	\$ 541.00
57155	INSERTION UTERINE TANDEM, BRACHTHRP	\$ 1,029.00
57150	TREATMENT OF VAGINAL INFECTION	\$ 105.00
57135	REMOVAL OF VAGINAL LESION	\$ 694.00
57130	REMOVAL OF VAGINAL SEPTUM	\$ 641.00
57120	CLOSURE OF VAGINA	\$ 1,998.00
57111	VAGINECTOMY, COMPLETE, RADICAL	\$ 6,825.00
57110	VAGINECTOMY, COMPLETE	\$ 3,462.00
57109	VAGINECTOMY, PARTL, RADCL W/BIOPSY	\$ 6,804.00
57107	VAGINECTOMY, PARTIAL, RADICAL	\$ 5,484.00
57106	VAGINECTOMY, PARTIAL	\$ 1,970.00
57105	BIOPSY OF VAGINA, EXTENSIVE	\$ 520.00
57100	BIOPSY OF VAGINA, SIMPLE	\$ 251.00
57065	DESTRUCTION OF VAGINA LESION(S)	\$ 690.00
57061	DESTRUCTION OF VAGINA LESION(S)	\$ 410.00
57023	I&D VAGINAL HEMATOMA, NON-OBSTRETIC	\$ 1,215.00
57022	I&D VAGINAL HEMATOMA;OBSTRETICAL PP	\$ 678.00
57020	DRAINAGE OF PELVIC FLUID	\$ 314.00
57010	DRAINAGE OF PELVIC ABSCESS	\$ 1,717.00
57000	EXPLORATION OF VAGINA	\$ 755.00
56821	COLPSCPY VULVA, WITH BIOPSY	\$ 438.00
56820	COLPSCPY OF VULVA	\$ 329.00
56810	REPAIR/REVISION OF PERINEUM	\$ 1,020.00
56805	REVISION OF CLITORIS	\$ 4,462.00
56800	REPAIR OF VAGINA	\$ 949.00
56740	REMOVE VULVA GLAND/LESION	\$ 1,186.00
56700	PARTIAL REMOVAL/REVISION OF HYMEN	\$ 755.00
56640	RADICAL REMOVAL OF VULVA & NODES	\$ 5,756.00
56637	RADICAL REMOVAL OF VULVA, COMPLETE	\$ 5,830.00
56634	RADICAL REMOVAL OF VULVA, COMPLETE	\$ 5,053.00
56633	RADICAL REMOVAL OF VULVA, COMPLETE	\$ 4,674.00
56632	RADICAL REMOVAL OF VULVA, PARTIAL	\$ 5,390.00
56631	RADICAL REMOVAL OF VULVA, PARTIAL	\$ 4,568.00
56630	RADICAL REMOVAL OF VULVA, PARTIAL	\$ 3,605.00
56625	REMOVAL OF VULVA, COMPLETE	\$ 2,467.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
56620	REMOVAL OF VULVA, PARTIAL	\$ 2,109.00
56606	BIOPSY, VULVA/PERINEUM, EA ADDL LES	\$ 115.00
56605	BIOPSY OF VULVA/PERINEUM, 1 LESION	\$ 233.00
56515	DESTRUCTION, VULVA LESION(S),EXTENS	\$ 791.00
56501	DESTRUCTION, VULVA LESION(S),SIMPLE	\$ 476.00
56442	HYMENOTOMY SIMPLE INCISION	\$ 181.00
56441	LYSIS OF LABIAL LESIONS	\$ 557.00
56440	REPAIR OF VULVA LESION	\$ 698.00
56420	DRAINAGE OF VULVA GLAND ABSCESS	\$ 397.00
56405	DRAINAGE OF VULVA/PERINEUM ABSCESS	\$ 458.00
55920	PLACE NEEDLES PELVIC FOR RT	\$ 1,652.00
55876	PLCMNT INTRSTL DEVICE RADIATION TX	\$ 374.00
55875	TRANSPRNL PLCMNT NEDLE/CATH PROSTAT	\$ 2,852.00
55873	CRYOSURG ABLATION PROSTATE	\$ 2,854.00
55870	ELECTROEJACULATION	\$ 529.00
55866	LAPRSCPY, SURG PROSTECTRMY, RETRPUB	\$ 5,392.00
55865	EXPOSE PROSTATE FOR RADIOACTIVE SUB	\$ 4,987.00
55862	EXPOSE PROSTATE FOR RADIOACTIVE SUB	\$ 4,095.00
55860	EXPOSE PROSTATE FOR RADIOACTIVE SUB	\$ 3,269.00
55845	RADICAL PROSTATE REMOVAL, W/NODES	\$ 5,095.00
55842	RADICAL PROSTATE REMOVAL, W/BIOPSY	\$ 4,380.00
55840	RADICAL PROSTATE REMOVAL	\$ 4,375.00
55831	REMOVAL OF PROSTATE, RETROPUBIC	\$ 3,534.00
55821	REMOVAL OF PROSTATE, SUPRAPUBIC	\$ 3,266.00
55815	RADICAL REMOVAL OF PROSTATE/NODES	\$ 6,582.00
55812	RADICAL REMOVAL, PROSTATE W/BIOPSY	\$ 6,009.00
55810	RADICAL REMOVAL OF PROSTATE	\$ 4,899.00
55801	REMOVAL OF PROSTATE, PERINEAL	\$ 4,089.00
55725	DRAINAGE OF PROSTATE ABSCESS, COMPL	\$ 2,219.00
55720	DRAINAGE OF PROSTATE ABSCESS,SIMPLE	\$ 1,688.00
55706	NULL	\$ 1,385.00
55705	BIOPSY OF PROSTATE	\$ 993.00
55700	NEEDLE/PUNCH BIOPSY OF PROSTATE	\$ 486.00
55680	REMOVAL OF SPERM POUCH CYST	\$ 1,293.00
55650	REMOVAL OF SPERM DUCT POUCH	\$ 2,679.00
55605	INCISION OF SPERM DUCT POUCH, COMPL	\$ 1,951.00
55600	INCISION OF SPERM DUCT POUCH	\$ 1,572.00
55550	NULL	\$ 1,601.00
55540	REPAIR SPERM CORD VEINS & HERNIA	\$ 2,220.00
55535	REVISION OF SPERMATIC CORD VEINS	\$ 1,606.00
55530	REVISION OF SPERMATIC CORD VEINS	\$ 1,311.00
55520	REMOVAL OF SPERM CORD LESION	\$ 1,810.00
55500	REMOVAL OF HYDROCELE	\$ 1,495.00
55400	REPAIR OF SPERM DUCT	\$ 1,867.00
55300	INCISION OF SPERM DUCT FOR X-RAY	\$ 698.00
55250	VASECTOMY	\$ 850.00
55200	INCISION OF SPERM DUCT	\$ 1,036.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
55180	REVISION OF SCROTUM, COMPLICATED	\$ 2,601.00
55175	REVISION OF SCROTUM, SIMPLE	\$ 1,355.00
55150	REMOVAL OF SCROTUM	\$ 1,846.00
55120	REMOVAL OF SCROTUM FOREIGN BODY	\$ 1,318.00
55110	EXPLORATION OF SCROTUM	\$ 1,457.00
55100	DRAINAGE OF SCROTUM ABSCESS	\$ 632.00
55060	REPAIR OF HYDROCELE	\$ 1,426.00
55041	REMOVAL OF HYDROCELE, BILATERAL	\$ 1,915.00
55040	REMOVAL OF HYDROCELE, UNILATERAL	\$ 1,261.00
55000	PUNCTURE DRAINAGE OF HYDROCELE	\$ 318.00
54901	FUSION OF SPERMATIC DUCTS, BILAT	\$ 3,951.00
54900	FUSION OF SPERMATIC DUCTS, UNILAT	\$ 2,993.00
54865	EXPLORATION OF EPIDIDYMIS W/W/O BX	\$ 1,335.00
54861	REMOVAL OF EPIDIDYMIS, BILATERAL	\$ 2,121.00
54860	REMOVAL OF EPIDIDYMIS, UNILATERAL	\$ 1,562.00
54840	REMOVAL OF SPERMATOCELE	\$ 1,200.00
54830	REMOVAL OF EPIDIDYMIS LESION	\$ 1,388.00
54800	NEEDLE BIOPSY OF EPIDIDYMIS	\$ 470.00
54700	DRAINAGE OF SCROTUM	\$ 810.00
54692	NULL	\$ 2,833.00
54690	NULL	\$ 2,447.00
54680	RELOCATION OF TESTIS(ES) TO THIGH	\$ 2,943.00
54670	REPAIR OF TESTIS INJURY	\$ 1,523.00
54660	INSERTION OF TESTIS PROSTHESIS	\$ 1,331.00
54650	ORCHIOPEXY (FOWLER-STEPHENS)	\$ 2,659.00
54640	ORCHIOPEXY, INGUINAL APPROACH	\$ 1,763.00
54620	FIXATION OF CONTRALATERAL TESTIS	\$ 1,118.00
54600	REDUCTION OF TESTIS TORSION	\$ 1,691.00
54560	EXPLORATION FOR UNDESCENDED TESTIS	\$ 2,566.00
54550	EXPLORATION FOR UNDESCENDED TESTIS	\$ 1,838.00
54535	RADICAL REMOVAL OF TESTIS/TUMOR	\$ 2,779.00
54530	RADICAL REMOVAL OF TESTIS/TUMOR	\$ 1,898.00
54522	ORCHIECTOMY, PARTIAL	\$ 2,201.00
54520	REMOVAL OF TESTIS, SIMPLE	\$ 1,223.00
54512	EXC EXTRAPARENCHYMAL LESION TESTIS	\$ 2,019.00
54505	BIOPSY OF TESTIS	\$ 786.00
54500	NEEDLE BIOPSY OF TESTIS	\$ 277.00
54450	FORESKIN MANIPULATION/STRETCHING	\$ 215.00
54438	Replantation, penis, complete amput	\$ 4,998.00
54437	Repair of traumatic corporeal tear(	\$ 2,519.00
54435	CREATE PENIS FISTULA	\$ 1,553.00
54430	REVISION OF PENIS W/VEIN SHUNT	\$ 2,387.00
54420	REVISION OF PENIS W/VEIN SHUNT	\$ 2,630.00
54417	REM NONINFLAT /INFL PEN PROS INF FL	\$ 3,358.00
54416	REMOVAL NON-INFLAT, PENILE PROS SESS	\$ 2,658.00
54415	REMOVAL NON-INFLAT PENILE PROS SAME SE	\$ 1,977.00
54411	REMOVAL INFILTRATED PENILE PROS, INFCT FLD	\$ 3,847.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
54410	REMOVAL COMPONT, INFLAT PENILE PROS	\$ 3,214.00
54408	REPR COMPNT, INFLAT PENILE PROSTHES	\$ 2,956.00
54406	REMOVAL COMPONENT INFLAT PENILE PRO	\$ 2,731.00
54405	INSERT MULTI-COMP PROSTHESIS, PENIS	\$ 3,023.00
54401	INSERT SELF-CONTD PROSTHESIS, PENIS	\$ 2,459.00
54400	INSERT SEMI-RIGID PROSTHESIS, PENIS	\$ 1,984.00
54390	REPAIR EPISPADIAS, PENIS & BLADDER	\$ 4,635.00
54385	REPAIR EPISPADIAS, PENIS	\$ 3,471.00
54380	REPAIR EPISPADIAS, PENIS	\$ 2,988.00
54360	CORRECTION OF PENIS ANGULATION	\$ 2,693.00
54352	RECONSTRUCTION OF PENIS AND URETHRA	\$ 5,290.00
54348	FOLLOWUP HYPOSPADIAS SURGERY	\$ 3,776.00
54344	FOLLOWUP HYPOSPADIAS SURGERY	\$ 3,534.00
54340	FOLLOWUP HYPOSPADIAS SURGERY	\$ 2,129.00
54336	REVISION OF PENIS AND URETHRA	\$ 4,442.00
54332	REVISION OF PENIS AND URETHRA	\$ 3,780.00
54328	REVISION OF PENIS AND URETHRA	\$ 3,503.00
54326	HYPOSPADIAS REPAIR W/SKIN FLAPS	\$ 3,527.00
54324	HYPOSPADIAS REPAIR W/SKIN FLAPS	\$ 3,613.00
54322	HYPOSPADIAS REPAIR W/MEATUS ADVANCE	\$ 2,922.00
54318	REVISE URETHRA, REPAIR HYPOSPADIAS	\$ 2,657.00
54316	REVISE URETHRA, REPAIR HYPOSPADIAS	\$ 3,719.00
54312	REVISE URETHRA, REPAIR HYPOSPADIAS	\$ 3,059.00
54308	REVISE URETHRA, REPAIR HYPOSPADIAS	\$ 2,671.00
54304	REVISE PENIS FOR CHORDEE/HYPOSPADIA	\$ 2,797.00
54300	CORRECTION OF CHORDEE	\$ 2,410.00
54250	,26 TEST PENILE ERECTION/RIGIDITY	\$ 445.00
54240	,26 PENIS PRESSURE STUDY	\$ 381.00
54235	INJECTION OF PENIS	\$ 271.00
54231	DYNAMIC CAVERNOMETRY	\$ 433.00
54230	INJECTION FOR PENIS X-RAY	\$ 295.00
54220	IRRIGATION TREATMENT, PENIS LESION	\$ 509.00
54205	INJECTION TREATMENT OF PENIS LESION	\$ 1,989.00
54200	INJECTION TREATMENT OF PENIS LESION	\$ 312.00
54164	FRENULOTOMY PENIS	\$ 718.00
54163	REPAIR INCOMPLETE CIRCUMCISION.	\$ 814.00
54162	LYSIS PENILE POST CIRCUMCISION ADHE	\$ 746.00
54161	CIRCUMCISION, SURGICAL, NOT NEWBORN	\$ 737.00
54160	CIRCUMCISION, SURGICAL, NEWBORN	\$ 538.00
54150	CIRCUMCISION, NEWBORN	\$ 371.00
54135	RADICAL REMOVAL OF PENIS AND NODES	\$ 5,648.00
54130	RADICAL REMOVAL OF PENIS AND NODES	\$ 4,455.00
54125	REMOVAL OF PENIS	\$ 3,052.00
54120	PARTIAL REMOVAL OF PENIS	\$ 2,360.00
54115	REMOVE OBJECT FROM PENIS TISSUE	\$ 1,584.00
54112	REMOVE PENIS LESION, W/GRAFT 5CM+	\$ 3,500.00
54111	REMOVE PENIS LESION, W/GRAFT TO 5CM	\$ 2,988.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
54110	REMOVE PENIS LESION	\$ 2,331.00
54105	BIOPSY OF PENIS, DEEP	\$ 794.00
54100	BIOPSY OF PENIS, SKIN	\$ 460.00
54065	DESTRUCTION, PENIS LESION,EXTENSIVE	\$ 637.00
54060	REMOVAL OF PENIS LESION(S)	\$ 487.00
54057	LASER SURGERY, PENIS LESION(S)	\$ 352.00
54056	CRYOSURGERY, PENIS LESION(S)	\$ 410.00
54055	ELECTRO-DESTRUCTION, PENIS LESION	\$ 345.00
54050	CHEMICAL DESTRUCTION, PENIS LESION	\$ 392.00
54015	DRAINAGE OF DEEP PENIS LESION	\$ 1,143.00
54001	SLITTING OF PREPUCE	\$ 523.00
54000	SLITTING OF PREPUCE, NEWBORN	\$ 404.00
53860	TRANSURETHRAL RF TREATMENT	\$ 835.00
53855	INSERTION OF TEMP PROSTATIC URETHRA	\$ 309.00
53852	DESTROY PROSTATE TISSUE, RADIOFREQ	\$ 1,400.00
53850	DESTROY PROSTATE TISSUE, MICROWAVE	\$ 1,309.00
53665	DILATION OF FEMALE URETHRA	\$ 144.00
53661	RE-DILATE FEMALE URETHRA	\$ 152.00
53660	DILATION OF FEMALE URETHRA	\$ 156.00
53621	DILATE MALE URETHRA STRICTURE	\$ 267.00
53620	DILATE MALE URETHRA STRICTURE	\$ 324.00
53605	DILATE MALE URETHRA STRICTURE	\$ 242.00
53601	RE-DILATE MALE URETHRA STRICTURE	\$ 199.00
53600	DILATE MALE URETHRA STRICTURE	\$ 235.00
53520	REPAIR OF MALE URETHRA DEFECT	\$ 2,081.00
53515	REPAIR OF MALE URETHRA INJURY	\$ 2,972.00
53510	REPAIR OF MALE URETHRA INJURY	\$ 2,358.00
53505	REPAIR OF MALE URETHRA INJURY	\$ 1,810.00
53502	REPAIR OF FEMALE URETHRA INJURY	\$ 1,811.00
53500	URETHROLYSIS TRANSVAGINAL	\$ 2,828.00
53460	REVISION OF URINARY MEATUS	\$ 1,708.00
53450	REVISION OF URINARY MEATUS	\$ 1,530.00
53449	CORRECT ARTIFICIAL SPHINCTER	\$ 2,288.00
53448	REM & REPLC INFLAT URETHRA DEBRIDMN	\$ 4,778.00
53447	REMOVE/REVISE ARTIFICIAL SPHINCTER	\$ 3,019.00
53446	REM INFLAT URETHA SPHINCTER, CUFF	\$ 2,398.00
53445	CORRECT URINE FLOW CONTROL	\$ 2,816.00
53444	INSERTION ON TANDEM CUFF	\$ 2,965.00
53442	REMOVAL OF PERINEAL PROSTHESIS	\$ 2,928.00
53440	CORRECT BLADDER FUNCTION, MALE	\$ 2,812.00
53431	URETHROPLASTY W TUBLIZATION POS URE	\$ 4,307.00
53430	RECONSTRUCTION OF FEMALE URETHRA	\$ 3,661.00
53425	RECONSTRUCTION OF URETHRA, STAGE 2	\$ 3,497.00
53420	RECONSTRUCTION OF URETHRA, STAGE 1	\$ 3,142.00
53415	RECONSTRUCTION OF URETHRA	\$ 4,220.00
53410	RECONSTRUCTION OF URETHRA	\$ 3,654.00
53405	REVISION OF URETHRA, 2ND STAGE	\$ 3,263.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
53400	REVISION OF URETHRA, 1ST STAGE	\$ 2,999.00
53275	REPAIR OF URETHRA PROLAPSE	\$ 983.00
53270	REMOVAL OF URETHRAL GLANDS	\$ 685.00
53265	DESTRUCTION OF URETHRAL CARUNCLE	\$ 708.00
53260	DESTRUCTION OF URETHRAL POLYP(S)	\$ 681.00
53250	REMOVAL OF URETHRAL GLAND	\$ 1,481.00
53240	SURGERY FOR URETHRA POUCH	\$ 1,579.00
53235	REMOVAL OF URETHRA LESION, MALE	\$ 2,363.00
53230	REMOVAL OF URETHRA LESION, FEMALE	\$ 2,286.00
53220	DESTRUCTION OF URETHRA LESION	\$ 1,686.00
53215	REMOVAL OF MALE URETHRA	\$ 3,472.00
53210	REMOVAL OF FEMALE URETHRA	\$ 2,933.00
53200	BIOPSY OF URETHRA	\$ 532.00
53085	DRAINAGE OF URINARY LEAKAGE, COMPL	\$ 2,423.00
53080	DRAINAGE OF URINARY LEAKAGE,UNCOMPL	\$ 1,568.00
53060	DRAINAGE OF URETHRA ABSCESS/CYST	\$ 638.00
53040	DRAINAGE OF DEEP URETHRA ABSCESS	\$ 1,467.00
53025	INCISION OF URINARY MEATUS, INFANT	\$ 251.00
53020	INCISION OF URINARY MEATUS	\$ 363.00
53010	INCISION OF PERINEAL URETHRA	\$ 1,101.00
53000	INCISION OF PENDULOUS URETHRA	\$ 554.00
52700	DRAINAGE OF PROSTATE ABSCESS	\$ 1,647.00
52649	PROSTATE LASER ENUCLEATION	\$ 3,084.00
52648	PROSTATE LASER SURGERY, CONTACT	\$ 2,579.00
52647	PROSTATE LASER SURGERY, NON-CONTACT	\$ 2,416.00
52640	RELIEVE BLADDER NECK CONTRACTURE	\$ 1,181.00
52630	REMOVE PROSTATE TISSUE REGROWTH	\$ 1,504.00
52601	REMOVAL OF PROSTATE (TURP)	\$ 2,721.00
52500	REVISION OF BLADDER NECK	\$ 1,824.00
52450	INCISION OF PROSTATE	\$ 1,760.00
52442	INCISION OF PROSTATE	\$ 220.00
52441	INCISION OF PROSTATE	\$ 824.00
52402	CYSTOURETHROSCOPOY WITH T/URETH RES	\$ 994.00
52400	CYSTOURTSCPY, INCISION URETHR VALVE	\$ 1,782.00
52356	CYSTO/URETERO W/LITHOTRIPSY &INDWEL	\$ 1,545.00
52355	CYSTOURTHSCPY, RESCT PELVIC TUMOR	\$ 1,741.00
52354	CYSTOURTHSCPY, W BIOPSY & FULGRATIO	\$ 1,553.00
52353	CYCTOURETHROSCPY, LITHOTRIPSY	\$ 1,461.00
52352	CYSTOYRSCPY, REMOVAL CALCULUS	\$ 1,324.00
52351	CYSTOURETHSCPY W URETRSCPY, DIAGNOS	\$ 1,123.00
52346	CYSTOURSCPY, TRTMNT INTRARENA STRIC	\$ 1,658.00
52345	CYSTOURSCPY, TRTMNT URETRPEL STRICT	\$ 1,468.00
52344	CYSURSCPY W URESCPY, TRTMNT URE STR	\$ 1,371.00
52343	CYSTOURSCPY, TRTMNT INTRARENAL STRI	\$ 1,284.00
52342	CYSTOURETSCPY, TRTMNT URETRPEL STRI	\$ 1,146.00
52341	CUSTOURETHROSCOPY, TRTMNT URT STRIC	\$ 1,059.00
52334	CREATION OF PASSAGE TO KIDNEY	\$ 682.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
52332	CYSTOSCOPY/INSERTION OF STENT	\$ 576.00
52330	CYSTOSCOPY/MANIPULATION	\$ 981.00
52327	CYSTOSCOPY W/MATERIAL INJECTION	\$ 984.00
52325	CYSTOSCOPY/STONE FRAGMENTATION	\$ 1,188.00
52320	CYSTOSCOPY/STONE REMOVAL	\$ 919.00
52318	REMOVE LARGE BLADDER STONE, COMPLIC	\$ 1,764.00
52317	REMOVE SMALL BLADDER STONE, SIMPLE	\$ 1,298.00
52315	CYSTOSCOPY/REMOVE OBJECT, COMPLIC	\$ 1,023.00
52310	CYSTOSCOPY/REMOVE OBJECT, SIMPLE	\$ 562.00
52305	CYSTOSCOPY/TREAT BLADDER LESION	\$ 1,040.00
52301	CYSTOSCOPY, ECTOPIC URETEROCELE	\$ 1,078.00
52300	CYSTOSCOPY, ORTHOTOPIC URETEROCELE	\$ 1,041.00
52290	CYSTOSCOPY/URETERAL MEATOTOMY	\$ 909.00
52287	CYSTOSCOPY/URETERAL MEATOTOMY	\$ 635.00
52285	CYSTOSCOPY/TREATMENT	\$ 733.00
52283	CYSTOSCOPY/STEROID INJECTION	\$ 753.00
52282	CYSTOSCOPY W/INSERTION OF STENT	\$ 1,266.00
52281	CYSTOSCOPY/TREATMENT OF STRICTURE	\$ 566.00
52277	CYSTOSCOPY/SPHINCTER SURGERY	\$ 1,198.00
52276	CYSTOSCOPY/URETHRA SURGERY	\$ 984.00
52275	CYSTOSCOPY/REVISE MALE URETHRA	\$ 926.00
52270	CYSTOSCOPY/REVISE FEMALE URETHRA	\$ 677.00
52265	CYSTOSCOPY/DILATE BLADDER	\$ 615.00
52260	CYSTOSCOPY/DILATE BLADDER	\$ 790.00
52250	CYSTOSCOPY/RADIOTRACER	\$ 892.00
52240	CYSTOSCOPY/TREAT LGE BLADDER TUMOR	\$ 1,461.00
52235	CYSTOSCOPY/TREAT MED BLADDER TUMOR	\$ 1,073.00
52234	CYSTOSCOPY/TREAT SML BLADDER TUMOR	\$ 915.00
52224	CYSTOSCOPY/TREAT MINOR LESION(S)	\$ 761.00
52214	CYSTOSCOPY/TREATMENT	\$ 658.00
52204	CYSTOSCOPY/BIOPSY	\$ 527.00
52010	CYSTOSCOPY/EJACULAT DUCT CATHETER	\$ 616.00
52007	CYSTOSCOPY/BIOPSY	\$ 616.00
52005	CYSTOSCOPY/URETERAL CATHETER	\$ 493.00
52001	CYSTOURETHROSCOPY	\$ 1,068.00
52000	CYSTOSCOPY	\$ 302.00
51992	NULL	\$ 3,198.00
51990	NULL	\$ 2,803.00
51980	CONSTRUCT BLADDER OPENING TO SKIN	\$ 2,662.00
51960	REVISE BLADDER & BOWEL, W/FUSION	\$ 5,173.00
51940	CORRECTION OF BLADDER DEFECT	\$ 6,123.00
51925	REPAIR BLADDER FISTULA/HYSTERECTOMY	\$ 4,077.00
51920	REPAIR OF BLADDER-UTERUS FISTULA	\$ 2,849.00
51900	REPAIR OF BLADDER-VAGINA FISTULA	\$ 3,079.00
51880	REPAIR OF BLADDER OPENING	\$ 1,754.00
51865	REPAIR OF BLADDER WOUND,COMPLICATED	\$ 3,401.00
51860	REPAIR OF BLADDER WOUND, SIMPLE	\$ 2,844.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
51845	REPAIR OF BLADDER NECK	\$ 2,173.00
51841	ATTACH BLADDER/URETHRA, COMPLICATED	\$ 2,952.00
51840	ATTACH BLADDER/URETHRA, SIMPLE	\$ 2,573.00
51820	REVISION OF URINARY TRACT	\$ 4,046.00
51800	REVISION OF BLADDER/URETHRA	\$ 3,906.00
51798	MEASURMNT OF POST VOIDING URINE	\$ 48.00
51797	,26 INTRA-ABDOM VOIDING PRESSURE TEST	\$ 602.00
51792	,26 URINARY REFLEX STUDY	\$ 920.00
51785	,26 ANAL/URINARY MUSCLE STUDY, NEEDLE	\$ 1,431.00
51784	,26 EMG STUDY, ANAL/URETHRAL SPHINCTER	\$ 250.00
51741	,26 URINE FLOW MEASUREMENT, COMPLEX	\$ 55.00
51736	,26 URINE FLOW MEASUREMENT, SIMPLE	\$ 51.00
51729	,26 URODYNAMIC W/VOIDING PRESSURE STUDY	\$ 1,392.00
51728	,26 URODYNAMIC W/VOIDING PRESSURE STUDY	\$ 1,302.00
51727	,26 URODYNAMICS WITH URETHRAL PRESSURE	\$ 1,290.00
51726	,26 COMPLEX CYSTOMETROGRAM	\$ 1,070.00
51725	,26 SIMPLE CYSTOMETROGRAM	\$ 786.00
51720	TREATMENT OF BLADDER LESION	\$ 161.00
51715	ENDOSCOPIC INJECT, IMPLANT MATERIAL	\$ 755.00
51710	CHANGE OF BLADDER TUBE, COMPLICATED	\$ 295.00
51705	CHANGE OF BLADDER TUBE, SIMPLE	\$ 195.00
51703	INSERTION TEMP INDWELLING CATH, COM	\$ 290.00
51702	INSRTION TEMP INDWLNG BLADER CATHTR	\$ 96.00
51701	INSRTN NON-INDWELLING BLADER CATHTR	\$ 101.00
51700	IRRIGATION OF BLADDER, SIMPLE	\$ 119.00
51610	INJECTION FOR BLADDER X-RAY	\$ 238.00
51605	PREPARATION FOR BLADDER X-RAY	\$ 147.00
51600	INJECTION FOR BLADDER X-RAY	\$ 164.00
51597	REMOVAL OF PELVIC STRUCTURES	\$ 8,599.00
51596	REMOVE BLADDER,CREATE BLADDER POUCH	\$ 8,794.00
51595	REMOVE BLADDER,REVISE URINARY TRACT	\$ 8,177.00
51590	REMOVE BLADDER,REVISE URINARY TRACT	\$ 7,245.00
51585	REMOVAL OF BLADDER & NODES	\$ 7,877.00
51580	REMOVE BLADDER, REVISE TRACT	\$ 7,076.00
51575	REMOVAL OF BLADDER AND NODES	\$ 6,813.00
51570	REMOVAL OF BLADDER	\$ 5,523.00
51565	REVISE BLADDER & URETER(S)	\$ 4,893.00
51555	PARTIAL REMOVAL OF BLADDER, COMPLIC	\$ 4,759.00
51550	PARTIAL REMOVAL OF BLADDER, SIMPLE	\$ 3,632.00
51535	REPAIR/REMOVE URETEROCELE	\$ 2,918.00
51530	REMOVAL OF BLADDER TUMOR	\$ 2,877.00
51525	REMOVAL OF BLADDER DIVERTICULUM	\$ 3,214.00
51520	REMOVAL OF BLADDER LESION	\$ 2,222.00
51500	REMOVAL OF BLADDER CYST	\$ 2,376.00
51102	DRAIN BL W/CATH INSERTION	\$ 542.00
51101	DRAIN BLADDER BY TROCAR/CATH	\$ 193.00
51100	DRAIN BLADDER BY NEEDLE	\$ 145.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
51080	DRAINAGE OF BLADDER ABSCESS	\$ 1,528.00
51065	REMOVAL OF URETER STONE	\$ 2,164.00
51060	REMOVAL OF URETER STONE	\$ 2,176.00
51050	REMOVAL OF BLADDER STONE	\$ 1,760.00
51045	INSERT BLADDER DRAIN	\$ 1,922.00
51040	SURGICAL DRAINAGE OF BLADDER	\$ 1,082.00
51030	BLADDER SURGERY, W/CRYOSURGERY	\$ 1,762.00
51020	BLADDER SURGERY, W/FULGURAT/TRACER	\$ 1,750.00
50980	URETER ENDOSCOPY/REMOVE OBJECT	\$ 1,330.00
50976	URETER ENDOSCOPY/TREATMENT	\$ 1,739.00
50974	URETER ENDOSCOPY/BIOPSY	\$ 1,761.00
50972	URETER ENDOSCOPY/CATHETERIZATION	\$ 1,336.00
50970	URETER ENDOSCOPY	\$ 1,380.00
50961	URETER ENDOSCOPY/REMOVE OBJECT	\$ 1,179.00
50957	URETER ENDOSCOPY/TREATMENT	\$ 1,325.00
50955	URETER ENDOSCOPY/BIOPSY	\$ 1,316.00
50953	URETER ENDOSCOPY/CATHETERIZATION	\$ 1,214.00
50951	URETER ENDOSCOPY	\$ 1,139.00
50948	LAPROSCPY, URETEROLITHO W STENT	\$ 4,756.00
50947	LAPROSCOPY, SURG, URETEROLITHOTOMY	\$ 5,183.00
50945	NULL	\$ 3,628.00
50940	RELEASE OF URETER	\$ 3,312.00
50930	REPAIR OF URETER-BOWEL FISTULA	\$ 4,118.00
50920	REPAIR OF URETER-SKIN FISTULA	\$ 3,287.00
50900	REPAIR OF URETER	\$ 3,141.00
50860	TRANSPLANT URETER TO SKIN	\$ 3,531.00
50845	CUTANEOUS APPENDICO-VESICOSTOMY	\$ 4,674.00
50840	REPLACE URETER BY BOWEL SEGMENT	\$ 4,591.00
50830	REVISION OF URINE FLOW	\$ 6,726.00
50825	CONSTRUCTION OF BOWEL BLADDER	\$ 6,212.00
50820	CONSTRUCTION OF BOWEL BLADDER	\$ 4,928.00
50815	CREATION OF URINE SHUNT TO BOWEL	\$ 4,571.00
50810	FUSION OF URETER AND BOWEL	\$ 5,666.00
50800	FUSION OF URETER AND BOWEL	\$ 3,476.00
50785	FUSION OF URETER AND BLADDER	\$ 4,553.00
50783	FUSION OF URETER AND BLADDER	\$ 4,207.00
50782	FUSION OF DUPL URETER TO BLADDER	\$ 4,013.00
50780	FUSION OF URETER AND BLADDER	\$ 4,185.00
50770	SPLICING OF URETERS	\$ 4,306.00
50760	FUSION OF URETERS	\$ 4,321.00
50750	FUSION OF URETER AND KIDNEY	\$ 4,306.00
50740	FUSION OF URETER AND KIDNEY	\$ 4,954.00
50728	REVISION OF URETER-SKIN FUSION	\$ 2,827.00
50727	REVISION OF URETER-SKIN FUSION	\$ 1,915.00
50725	RELEASE/REVISE URETER W/FUSION	\$ 4,120.00
50722	RELEASE OF URETER FOR OVARIAN VEINS	\$ 3,960.00
50715	RELEASE OF URETER	\$ 4,627.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
50705	Ureteral embolization or occlusion,	\$ 708.00
50700	REVISION OF URETER	\$ 3,455.00
50695	new access, with separate nephrosto	\$ 1,261.00
50693	Placement of ureteral stent, percut	\$ 750.00
50690	INJECTION FOR URETER X-RAY	\$ 259.00
50688	CHANGE OF URETER TUBE	\$ 287.00
50686	MEASURE URETER PRESSURE	\$ 330.00
50684	INJECTION FOR URETER X-RAY	\$ 188.00
50660	REMOVAL OF URETER	\$ 4,268.00
50650	REMOVAL OF URETER, BLADDER CUFF	\$ 3,896.00
50630	REMOVE URETER STONE FROM LOWER 1/3	\$ 3,333.00
50620	REMOVE URETER STONE FROM MIDDLE 1/3	\$ 3,376.00
50610	REMOVE URETER STONE FROM UPPER 1/3	\$ 3,529.00
50606	Endoluminal biopsy of ureter and/or	\$ 558.00
50605	INSERT URETERAL SUPPORT	\$ 3,933.00
50600	EXPLORATION/DRAINAGE OF URETER	\$ 3,504.00
50593	PERC CRYO ABLATE RENAL TUM	\$ 1,690.00
50592	ABLAT 1& MORE REN TUMR PERCU UNILAT	\$ 1,257.00
50590	FRAGMENT KIDNEY STONE BY SHOCK WAVE	\$ 2,127.00
50580	KIDNEY ENDOSCOPY/REMOVE OBJECT	\$ 2,262.00
50576	KIDNEY ENDOSCOPY/TREATMENT	\$ 2,100.00
50575	KIDNEY ENDOSCOPY/ENDOPYELOTOMY	\$ 2,667.00
50574	KIDNEY ENDOSCOPY/BIOPSY	\$ 2,105.00
50572	KIDNEY ENDOSCOPY/CATHETERIZATION	\$ 1,981.00
50570	KIDNEY ENDOSCOPY	\$ 1,831.00
50562	Renal endscp via stomy w rsecn tumo	\$ 2,162.00
50561	KIDNEY ENDOSCOPY/REMOVE OBJECT	\$ 1,466.00
50557	KIDNEY ENDOSCOPY/TREATMENT	\$ 1,292.00
50555	KIDNEY ENDOSCOPY/BIOPSY	\$ 1,276.00
50553	KIDNEY ENDOSCOPY/CATHETERIZATION	\$ 1,165.00
50551	KIDNEY ENDOSCOPY	\$ 1,094.00
50548	NULL	\$ 5,030.00
50547	LAPAROSCOPY, SURG DON NEPHRECTOMY	\$ 6,374.00
50546	NULL	\$ 4,528.00
50545	Laprsncpy,surg,radial nephrectomy	\$ 5,004.00
50544	NULL	\$ 4,652.00
50543	Laprsncpy,surg,partial nephrectomy	\$ 5,562.00
50542	Laprsncpy,surg,ablation renal mass	\$ 4,352.00
50541	NULL	\$ 3,430.00
50540	REVISION OF HORSESHOE KIDNEY	\$ 4,282.00
50526	REPAIR OF RENAL-ABDOMEN FISTULA	\$ 6,391.00
50525	REPAIR OF RENAL-ABDOMEN FISTULA	\$ 5,958.00
50520	REPAIR OF KIDNEY-SKIN FISTULA	\$ 4,689.00
50500	REPAIR OF KIDNEY WOUND	\$ 5,010.00
50435	Exchange nephrostomy catheter, perc	\$ 365.00
50434	Convert nephrostomy catheter to nep	\$ 704.00
50433	Placement of nephroureteral cathete	\$ 937.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
50432	Placement of nephrostomy catheter,	\$ 756.00
50430	Injection procedure for antegrade n	\$ 568.00
50405	REVISION OF KIDNEY/URETER, COMPLIC	\$ 5,210.00
50400	REVISION OF KIDNEY/URETER, SIMPLE	\$ 4,368.00
50396	MEASURE KIDNEY PRESSURE THRU TUBE	\$ 424.00
50391	INSTI THERAP AGT REN PELV &/OR URET	\$ 369.00
50390	NEEDLE DRAINAGE OF KIDNEY LESION	\$ 349.00
50389	REM NEPHROST TUBE REQ FLURO GUID	\$ 195.00
50387	REM/REPL EXTR T/NEPH URET ST S&I	\$ 307.00
50386	REMOVE STENT VIA TRANSURETH	\$ 604.00
50385	CHANGE STENT VIA TRANSURETH	\$ 810.00
50384	REMOV INTER URETER ST PERCU APP S&I	\$ 844.00
50382	REM/REPL INTER URET ST PERC APP S&I	\$ 943.00
50380	REIMPLANTATION OF KIDNEY	\$ 8,091.00
50370	REMOVE TRANSPLANTED RENAL ALLOGRAFT	\$ 4,822.00
50365	REMOVAL & TRANSPLANTATION OF KIDNEY	\$ 11,532.00
50360	ALLOTRANSPLANT KIDN W/O RECPT NEPRE	\$ 9,716.00
50340	REMOVAL OF KIDNEY FROM RECIPIENT	\$ 3,814.00
50329	BKBEN RECON CADA/LIV DON REN URETER	\$ 726.00
50328	BKBEN RECON CADA/LIV DON REN ART AN	\$ 766.00
50327	BKBEN RECON CADA/LIV DONOR VEN ANA	\$ 874.00
50325	BKBEN STD PREP LIVING DONOR RENAL	\$ 601.00
50323	BKBEN STD PREP CADAVER RENAL	\$ 601.00
50320	REMOVAL OF DONOR KIDNEY, OPEN LIVING	\$ 6,048.00
50290	REMOVAL OF KIDNEY CYST	\$ 3,355.00
50280	REMOVAL OF KIDNEY CYST(S)	\$ 3,617.00
50250	ABL, OPE, 1/MOR REN MASS LES, CRYOSURG	\$ 4,545.00
50240	PARTIAL REMOVAL OF KIDNEY	\$ 4,961.00
50236	REMOVE KIDNEY/URETER, SEPAR INCISION	\$ 5,470.00
50234	REMOVE KIDNEY/URETER, SAME INCISION	\$ 4,886.00
50230	REMOVAL OF KIDNEY, RADICAL, W/LYMPH	\$ 4,817.00
50225	REMOVAL OF KIDNEY, COMPLICATED	\$ 4,538.00
50220	REMOVAL OF KIDNEY	\$ 3,986.00
50205	BIOPSY OF KIDNEY	\$ 3,018.00
50200	NEEDLE BIOPSY OF KIDNEY	\$ 471.00
50135	EXPLORATION OF RENAL PELVIS, COMPL	\$ 4,186.00
50130	REMOVAL OF STONE FROM RENAL PELVIS	\$ 3,858.00
50125	EXPLORE AND DRAIN RENAL PELVIS	\$ 3,663.00
50120	EXPLORATION OF RENAL PELVIS	\$ 3,544.00
50100	REVISE KIDNEY BLOOD VESSELS	\$ 4,371.00
50081	REMOVAL OF KIDNEY STONE, OVER 2CM	\$ 4,773.00
50080	REMOVAL OF KIDNEY STONE, UP TO 2CM	\$ 3,244.00
50075	REMOVAL OF LARGE STONE FROM KIDNEY	\$ 5,441.00
50070	KIDNEY SURGERY, CONGENITAL DEFECT	\$ 4,423.00
50065	FOLLOWUP KIDNEY SURGERY FOR STONE	\$ 4,513.00
50060	REMOVAL OF KIDNEY STONE	\$ 4,256.00
50045	EXPLORATION OF KIDNEY	\$ 3,479.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
50040	DRAINAGE OF KIDNEY	\$ 3,445.00
50020	DRAINAGE OF KIDNEY ABSCESS, OPEN	\$ 3,781.00
50010	EXPLORATION OF KIDNEY	\$ 2,825.00
49905	CREATE OMENTAL FLAP	\$ 1,418.00
49904	OMENTAL FLAP,EXTRA-ABDOMINAL	\$ 5,524.00
49900	FOLLOWUP REPAIR OF ABDOMINAL WALL	\$ 3,263.00
49657	NULL	\$ 5,348.00
49656	NULL	\$ 3,705.00
49655	NULL	\$ 4,175.00
49654	NULL	\$ 3,411.00
49653	NULL	\$ 3,751.00
49652	LAP VENT/ABD HERNIA REPAIR	\$ 3,004.00
49651	NULL	\$ 2,245.00
49650	NULL	\$ 1,724.00
49611	REPAIR UMBILICAL LESION, 2ND STAGE	\$ 2,455.00
49610	REPAIR UMBILICAL LESION, 1ST STAGE	\$ 2,792.00
49606	REPAIR UMBILICAL LESION, W/PROSTH	\$ 4,607.00
49605	REPAIR UMBILICAL LESION, LARGE	\$ 20,267.00
49600	REPAIR UMBILICAL LESION, SMALL	\$ 2,966.00
49590	REPAIR SPIGELIAN HERNIA	\$ 2,308.00
49587	REPAIR UMBILICAL HERNIA, AGE 5+ YR	\$ 1,912.00
49585	REPAIR UMBILICAL HERNIA, AGE 5+ YR	\$ 1,785.00
49582	REPAIR UMBILICAL HERNIA, UNDER 5 YR	\$ 1,941.00
49580	REPAIR UMBILICAL HERNIA, UNDER 5 YR	\$ 1,333.00
49572	REPAIR EPIGASTRIC HERNIA	\$ 2,082.00
49570	REPAIR EPIGASTRIC HERNIA	\$ 1,669.00
49568	REP INCISION/VENTRAL HERNIA W/MESH	\$ 1,086.00
49566	REP RECURRENT INCISION/VENT HERNIA	\$ 3,788.00
49565	REP RECURRENT INCISION/VENT HERNIA	\$ 3,093.00
49561	REP INITL INCISION/VENTRAL HERNIA	\$ 3,755.00
49560	REP INITIAL INCISION/VENTRAL HERNIA	\$ 2,974.00
49557	REPAIR RECURRENT FEMORAL HERNIA	\$ 2,917.00
49555	REPAIR RECURRENT FEMORAL HERNIA	\$ 2,428.00
49553	REPAIR INITIAL FEMORAL HERNIA	\$ 2,541.00
49550	REPAIR INITIAL FEMORAL HERNIA	\$ 2,319.00
49540	REPAIR LUMBAR HERNIA	\$ 2,714.00
49525	REPAIR SLIDING HERNIA	\$ 2,311.00
49521	REPAIR RECURRENT INGUINAL HERNIA	\$ 2,894.00
49520	REPAIR RECURRENT INGUINAL HERNIA	\$ 2,545.00
49507	REPAIR INGUINAL HERNIA, AGE 5+	\$ 2,361.00
49505	REPAIR INGUINAL HERNIA, AGE 5+	\$ 2,095.00
49501	REPAIR INGUINAL HERNIA, UNDER AGE 5	\$ 2,444.00
49500	REPAIR INGUINAL HERNIA, UNDER AGE 5	\$ 1,655.00
49496	REPAIR INGUINAL HERNIA, UNDER 6 MO	\$ 2,477.00
49495	REPAIR INGUINAL HERNIA, UNDER 6 MO	\$ 1,645.00
49492	REP,ING HER,PRETERM,50WK,INCARCERAT	\$ 3,879.00
49491	REP,ING HER,PRETERM,50WK PO-CON;RED	\$ 3,220.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
49465	FLUORO EXAM OF G/COLON TUBE	\$ 112.00
49460	FIX G/COLON TUBE W/DEVICE	\$ 182.00
49452	REPLACE G-J TUBE PERC	\$ 510.00
49451	REPLACE DUOD/JEJ TUBE PERC	\$ 333.00
49450	REPLACE G/C TUBE PERC	\$ 242.00
49446	CHANGE G-TUBE TO G-J PERC	\$ 544.00
49442	PLACE CECOSTOMY TUBE PERC	\$ 759.00
49441	PLACE DUOD/JEJ TUBE PERC	\$ 909.00
49440	PLACE GASTROSTOMY TUBE PERC	\$ 756.00
49436	DELYD CRTN EXIT SITE INTRPRTNL CATH	\$ 746.00
49435	INSRT SUBCU EXTNSN INTRAPERTNL CATH	\$ 489.00
49429	REMOVAL OF PERITONEAL-VENOUS SHUNT	\$ 1,855.00
49428	LIGATION OF PERITONEAL-VENOUS SHUNT	\$ 1,747.00
49427	INJECTION FOR ABDOMINAL SHUNT	\$ 168.00
49426	REVISE PERITONEAL-VENOUS SHUNT	\$ 2,699.00
49425	INSERT PERITONEAL-VENOUS SHUNT	\$ 2,783.00
49424	CONTRAST INJECT VIA PREV CATHETER	\$ 142.00
49423	EXCHANGE PREV DRAINAGE CATHETER	\$ 258.00
49422	REMOVE PERMANENT ABDOMINAL DRAIN	\$ 892.00
49421	INSERT PERMANENT ABDOMINAL DRAIN	\$ 921.00
49419	INS-INTRAPER CANN/CATH W/SUBDUT,PER	\$ 1,686.00
49418	INSERT TUN IP CATH PERC	\$ 751.00
49412	INS DEVICE FOR RT GUIDE OPEN	\$ 338.00
49411	PLCMNT INTERSTITIAL DEVICE RAD THERP	\$ 674.00
49407	IMG FLUID COLLXN DRAINAG CATH TRANS	\$ 771.00
49406	IMG-GUIDE FLUID COLLXN DRAINAG PERT	\$ 720.00
49405	IMG-GUIDE FLUID COLLXN DRAINAGE CAT	\$ 723.00
49402	REMOVAL OF PERITONEAL FOREIGN BODY	\$ 3,440.00
49400	INJECT AIR/CONTRAST INTO ABDOMEN	\$ 345.00
49327	LAP INS DEVICE FOR RT	\$ 532.00
49326	LAPAROSCOPY SURGICAL W OMENTOPEXY	\$ 771.00
49325	LAP SURGCL W RVSN PRVSLY PLCED CATH	\$ 1,679.00
49324	LAP SURGCL W INSRTN INTRPRTNL CATH	\$ 1,571.00
49323	NULL	\$ 2,561.00
49322	LAPAROSCOPY ASPIRATION	\$ 1,485.00
49321	NULL	\$ 1,372.00
49320	NULL	\$ 1,309.00
49255	REMOVAL OF OMENTUM	\$ 3,112.00
49250	REMOVAL OF UMBILICUS	\$ 2,341.00
49215	EXCISION OF SACRAL SPINE TUMOR	\$ 8,827.00
49205	EXC ABD TUM OVER 10 CM	\$ 6,904.00
49204	EXC ABD TUM OVER 5 CM	\$ 6,029.00
49203	EXC ABD TUM 5 CM OR LESS	\$ 4,735.00
49185	Sclerotherapy of a fluid collection	\$ 442.00
49180	NEEDLE BIOPSY OF ABDOMINAL MASS	\$ 305.00
49084	PERITONEAL LAVAGE	\$ 435.00
49083	ABD PARACENTESIS W/IMAGING	\$ 396.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
49082	ABD PARACENTESIS	\$ 282.00
49062	DRAIN ABDOMINAL LYMPHOCELE, OPEN	\$ 3,107.00
49060	DRAINAGE, ABDOMINAL ABSCESS, OPEN	\$ 4,396.00
49040	DRAIN ABDOMINAL ABSCESS, OPEN	\$ 4,018.00
49020	DRAINAGE OF PERITONEAL ABSCESS, OPN	\$ 6,383.00
49010	EXPLORATION BEHIND ABDOMEN	\$ 3,692.00
49002	REOPENING OF ABDOMEN	\$ 4,201.00
49000	EXPLORATION OF ABDOMEN	\$ 3,082.00
48556	REMOVE TRANSPLNT PANCREAS ALLOGRAFT	\$ 5,142.00
48554	TRANSPLANT PANCREATIC ALLOGRAFT	\$ 10,261.00
48552	BKBEN RECON OF CADAVER PANCR VEN AN	\$ 963.00
48551	BKBEN STD PREP CADAVER PANCRE ARTER	\$ 655.00
48548	PANCREATICOJEJUNOSTOMY S2S ANSTMSIS	\$ 6,739.00
48547	DUODENAL EXCLUSION, PANCREAS TRAUMA	\$ 7,292.00
48545	PANCREATORRHAPHY FOR TRAUMA	\$ 5,460.00
48540	FUSE PANCREAS CYST/BOWEL, ROUX-EN-Y	\$ 5,321.00
48520	FUSE PANCREAS CYST/BOWEL, DIRECT	\$ 4,412.00
48510	DRAIN PANCREATIC PSEUDOCYST, OPEN	\$ 4,438.00
48500	MARSUPIALIZE PANCREATIC CYST	\$ 4,658.00
48400	INJECTION, INTRAOP PANCREATOGRAPHY	\$ 440.00
48155	REMOVAL OF PANCREAS, TOTAL	\$ 7,304.00
48154	REMOVE PANCREAS, PARTIAL (WHIPPLE)	\$ 11,812.00
48153	REMOVE PANCREAS, PARTIAL (WHIPPLE)	\$ 12,573.00
48152	REMOVE PANCREAS, PARTIAL (WHIPPLE)	\$ 11,762.00
48150	REMOVE PANCREAS, PARTIAL (WHIPPLE)	\$ 12,627.00
48148	EXCISION OF AMPULLA OF VATER	\$ 5,065.00
48146	PANCREATECTOMY (CHILD PROCEDURE)	\$ 7,635.00
48145	PARTIAL REMOVAL OF PANCREAS	\$ 6,636.00
48140	PARTIAL REMOVAL OF PANCREAS	\$ 6,315.00
48120	REMOVE PANCREATIC LESION	\$ 4,440.00
48105	RESECTN/DEBRDMNT NCRTZNG PNCREATITIS	\$ 11,403.00
48102	BIOPSY OF PANCREAS, NEEDLE	\$ 877.00
48100	BIOPSY OF PANCREAS, OPEN	\$ 3,552.00
48020	REMOVE PANCREATIC STONE	\$ 4,775.00
48001	DRAIN PLACEMENT, ACUTE PANCREATITIS	\$ 9,396.00
48000	DRAIN PLACEMENT, ACUTE PANCREATITIS	\$ 7,666.00
47900	SUTURE BILE DUCT INJURY	\$ 5,512.00
47802	U-TUBE HEPATICOENTEROSTOMY	\$ 6,193.00
47801	PLACE BILE DUCT SUPPORT STENT	\$ 4,512.00
47800	RECONSTRUCT BILE DUCTS W/FUSION	\$ 6,366.00
47785	FUSE BILE DUCTS/BOWEL, ROUX-EN-Y	\$ 13,191.00
47780	FUSE BILE DUCTS/BOWEL, ROUX-EN-Y	\$ 10,013.00
47765	FUSE LIVER DUCTS/BOWEL	\$ 12,383.00
47760	FUSE BILE DUCTS/BOWEL	\$ 9,113.00
47741	FUSE GALLBLADDER/BOWEL, ROUX-EN-Y	\$ 5,989.00
47740	FUSE GALLBLADDER/BOWEL, ROUX-EN-Y	\$ 5,326.00
47721	FUSE UPPER GI STRUCTURES	\$ 5,494.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
47720	FUSE GALLBLADDER/BOWEL, DIRECT	\$ 4,678.00
47715	EXCISE BILE DUCT CYST	\$ 5,399.00
47712	EXCISE BILE DUCT TUMOR,INTRAHEPATIC	\$ 8,123.00
47711	EXCISE BILE DUCT TUMOR,EXTRAHEPATIC	\$ 6,289.00
47701	BILE DUCT REVISION (KASAI)	\$ 7,052.00
47700	EXPLORE BILE DUCTS FOR ATRESIA	\$ 4,270.00
47620	REMOVE GALLBLADDER, EXPLORE DUCT	\$ 5,591.00
47612	REMOVE GALLBLADDER, EXPLORE DUCT	\$ 5,180.00
47610	REMOVE GALLBLADDER, EXPLORE DUCT	\$ 5,084.00
47605	REMOVE GALLBLADDER, W/XRAY EXAM	\$ 4,547.00
47600	REMOVE GALLBLADDER	\$ 4,317.00
47570	NULL	\$ 3,143.00
47564	NULL	\$ 4,500.00
47563	NULL	\$ 2,894.00
47562	LAPAROSCOPY SURGICAL W/CHOLECYSTEC	\$ 2,657.00
47556	BILIARY ENDOSCOPY THRU SKIN, DILATE	\$ 1,376.00
47555	BILIARY ENDOSCOPY THRU SKIN, DILATE	\$ 1,215.00
47554	BILIARY ENDOSCOPY THRU SKIN, STONE	\$ 2,097.00
47553	BILIARY ENDOSCOPY THRU SKIN, BIOPSY	\$ 1,108.00
47552	BILIARY ENDOSCOPY THRU SKIN, DIAG	\$ 1,127.00
47550	BILE DUCT ENDOSCOPY	\$ 668.00
47543	Endoluminal biopsy(ies) of biliary	\$ 534.00
47541	Placement of access through the bil	\$ 1,222.00
47539	new access, without placement of se	\$ 1,562.00
47537	Removal of biliary drainage cathete	\$ 354.00
47535	Conversion of external biliary drai	\$ 718.00
47533	Placement of biliary drainage cathe	\$ 979.00
47531	Injection procedure for cholangiogr	\$ 259.00
47490	INCISION OF GALLBLADDER	\$ 1,227.00
47480	INCISION OF GALLBLADDER	\$ 3,530.00
47460	INCISION OF BILE DUCT SPHINCTER	\$ 5,150.00
47425	INCISION OF BILE DUCT/SPHINCTER	\$ 5,544.00
47420	INCISION OF BILE DUCT	\$ 5,413.00
47400	INCISION OF LIVER DUCT	\$ 8,760.00
47383	LIVER SURGERY PROCEDURE NEC	\$ 1,680.00
47382	ABLATION-1-MOR LIVER TUM,PERCUT,RF	\$ 2,718.00
47381	ABLATION,OP-1-MOR LIV TUM;CRYOSURGI	\$ 6,013.00
47380	ABL,OP,1-MORE LIVER TUMOR;RAD-FREQU	\$ 5,810.00
47371	LAPROSC,SUR,ABL-1-MOR LIV TUM;CRYOS	\$ 5,099.00
47370	LAPAROSC,SUR,ABL-1/MOR LIVER TUM;RF	\$ 5,048.00
47362	REPAIR LIVER WOUND, RE-EXPLORATION	\$ 5,879.00
47361	REPAIR LIVER WOUND, EXPLORATION	\$ 12,230.00
47360	REPAIR LIVER WOUND, COMPLEX	\$ 7,624.00
47350	REPAIR LIVER WOUND, SIMPLE	\$ 5,507.00
47300	SURGERY FOR LIVER ABSCESS/CYST	\$ 4,553.00
47147	BKBEN RECON CADAVER ARTER ANAS EACH	\$ 1,553.00
47146	BKBEN RECON CADAVER VENOUS ASAS EAC	\$ 1,332.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
47145	BKBEN STD PREP CADAVER W/ LOBE SPLT	\$ 1,409.00
47144	BKBEN STD PREP CADAVER W/TRISEG SPT	\$ 1,409.00
47143	BKBEN ST PREP CADAVER W/O TRISEG SP	\$ 1,409.00
47142	DONOR HEPATECTOMY W/PREP AND MAIN	\$ 19,201.00
47141	DONOR HEPATECTOMY W/PREP AND MAIN	\$ 17,383.00
47140	DONOR HEPATECTOMY LIV DONOR LAT SEG	\$ 14,485.00
47135	LIVER TRANSPLANT, ORTHOTOPIC	\$ 21,877.00
47130	REMOVAL OF PARTIAL LIVER,RIGHT LOBE	\$ 13,412.00
47125	REMOVAL OF PARTIAL LIVER, LEFT LOBE	\$ 12,484.00
47122	EXTENSIVE REMOVAL OF LIVER	\$ 13,908.00
47120	PARTIAL REMOVAL OF LIVER/LOBE	\$ 9,425.00
47100	WEDGE BIOPSY OF LIVER	\$ 3,397.00
47015	INJECT/ASPIRATE LIVER CYST/ABSCESS	\$ 4,714.00
47010	HEPATOTOMY, OPEN DRAIN, 1/2 STAGES	\$ 4,864.00
47001	NEEDLE BIOPSY OF LIVER W/OTHER PROC	\$ 425.00
47000	NEEDLE BIOPSY OF LIVER	\$ 323.00
46947	HEMORRHOIDOPEXY BY STAPLING	\$ 1,515.00
46946	LIGATION OF INTERNAL HEMORRHOIDS	\$ 1,442.00
46945	LIGATION OF INTERNAL HEMORRHOIDS	\$ 1,280.00
46942	RETREATMENT OF ANAL FISSURE	\$ 490.00
46940	TREATMENT OF ANAL FISSURE	\$ 545.00
46930	NULL	\$ 568.00
46924	DESTRUCTION OF ANAL LESION(S)	\$ 687.00
46922	SURGICAL REMOVAL OF ANAL LESION(S)	\$ 527.00
46917	LASER DESTRUCTION OF ANAL LESION(S)	\$ 488.00
46916	CRYOSURG REMOVAL OF ANAL LESION(S)	\$ 532.00
46910	ELECTR DESTRUCTION, ANAL LESION(S)	\$ 509.00
46900	CHEM DESTRUCTION OF ANAL LESION(S)	\$ 515.00
46761	REVISION OF ANAL SPHINCTER, ADULT	\$ 3,535.00
46760	REVISION OF ANAL SPHINCTER, ADULT	\$ 4,121.00
46754	REMOVAL OF SUTURE FROM ANUS	\$ 884.00
46753	RECONSTRUCT ANUS W/GRAFT	\$ 2,479.00
46751	REPAIR OF ANAL SPHINCTER, CHILD	\$ 2,651.00
46750	REPAIR OF ANAL SPHINCTER, ADULT	\$ 2,878.00
46748	REPAIR, CLOACAL ANOMALY	\$ 17,235.00
46746	REPAIR, CLOACAL ANOMALY	\$ 15,863.00
46744	REPAIR, CLOACAL ANOMALY	\$ 14,360.00
46742	REPAIR, HIGH IMPERFORATE ANUS	\$ 10,098.00
46740	REPAIR, HIGH IMPERFORATE ANUS	\$ 8,704.00
46735	REPAIR, HIGH IMPERFORATE ANUS	\$ 9,200.00
46730	REPAIR, HIGH IMPERFORATE ANUS	\$ 7,970.00
46716	REPAIR, LOW IMPERFORATE ANUS	\$ 4,893.00
46715	REPAIR, LOW IMPERFORATE ANUS	\$ 2,205.00
46712	REP ILEOAN FIST/SIN T/PERI T/ABD AP	\$ 9,038.00
46710	REP ILEOANAL FIST/SIN T/PERIN APPRO	\$ 4,479.00
46707	REPAIR OF ANORECTAL FISTULA W/PLUG	\$ 1,981.00
46706	REPAIR OF ANAL FISTULA W/FIBRIN GLU	\$ 709.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
46705	REPAIR OF ANAL STRICTURE, INFANT	\$ 2,247.00
46700	REPAIR OF ANAL STRICTURE, ADULT	\$ 2,517.00
46615	ANOSCOPY, REMOVE LESION	\$ 347.00
46614	ANOSCOPY, W/BLEEDING CONTROL	\$ 244.00
46612	ANOSCOPY, REMOVE LESIONS	\$ 384.00
46611	ANOSCOPY, REMOVE LESION, W/SNARE	\$ 305.00
46610	ANOSCOPY, REMOVE LESION	\$ 317.00
46608	ANOSCOPY, W/FOREIGN BODY REMOVAL	\$ 339.00
46607	ANOSCOPY, W/FOREIGN BODY REMOVAL	\$ 476.00
46606	ANOSCOPY, W/BIOPSY	\$ 288.00
46604	ANOSCOPY, W/DILATION	\$ 249.00
46601	ANOSCOPY, W/DILATION	\$ 352.00
46600	ANOSCOPY, DIAGNOSTIC	\$ 155.00
46505	CHEMODENERVATION ON INTER ANAL SPHI	\$ 931.00
46500	INJECT HEMORRHOIDS W/SCLEROSING	\$ 687.00
46320	REMOVE HEMORRHOID CLOT	\$ 430.00
46288	CLOSE ANAL FISSURE W/RECTAL ADVANCE	\$ 2,117.00
46285	REMOVE ANAL FISTULA, SECOND STAGE	\$ 1,597.00
46280	REMOVE ANAL FISTULA, COMPLEX/MULT	\$ 1,825.00
46275	REMOVE ANAL FISTULA, SUBMUSCULAR	\$ 1,602.00
46270	REMOVE ANAL FISTULA, SUBCUTANEOUS	\$ 1,536.00
46262	REMOVAL OF HEMORRHOIDS & FISTULA	\$ 2,136.00
46261	REMOVAL OF HEMORRHOIDS & FISSURE	\$ 2,023.00
46260	REMOVAL OF HEMORRHOIDS, COMPLEX	\$ 1,867.00
46258	REMOVAL OF HEMORRHOIDS & FISTULA	\$ 1,890.00
46257	REMOVAL OF HEMORRHOIDS & FISSURE	\$ 1,658.00
46255	REMOVAL OF HEMORRHOIDS, SIMPLE	\$ 1,384.00
46250	REMOVAL OF EXTERNAL HEMORRHOIDS	\$ 1,233.00
46230	REMOVAL OF ANAL TAGS	\$ 669.00
46221	LIGATION OF HEMORRHOID(S)	\$ 724.00
46220	REMOVAL OF ANAL TAG	\$ 458.00
46200	REMOVAL OF ANAL FISSURE	\$ 1,269.00
46083	INCISION OF EXTERNAL HEMORRHOID	\$ 420.00
46080	INCISION OF ANAL SPHINCTER	\$ 625.00
46070	INCISION OF ANAL SEPTUM, INFANT	\$ 1,041.00
46060	DRAINAGE OF RECTAL ABSCESS	\$ 1,862.00
46050	DRAINAGE OF ANAL ABSCESS	\$ 385.00
46045	DRAINAGE OF RECTAL ABSCESS	\$ 1,709.00
46040	DRAINAGE OF RECTAL ABSCESS	\$ 1,648.00
46030	REMOVAL OF RECTAL MARKER	\$ 346.00
46020	PLACEMENT OF SETON	\$ 911.00
45990	ANORECTAL EXAM,SURG,REQ ANESTH DIAG	\$ 411.00
45915	REMOVE RECTAL OBSTRUCTION	\$ 886.00
45910	DILATION OF RECTAL NARROWING	\$ 736.00
45905	DILATION OF ANAL SPHINCTER	\$ 649.00
45900	REDUCTION OF RECTAL PROLAPSE	\$ 848.00
45825	REPAIR RECTUM FISTULA, W/COLOSTOMY	\$ 6,204.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
45820	REPAIR RECTAL-URETHRA FISTULA	\$ 5,143.00
45805	REPAIR RECTUM FISTULA, W/COLOSTOMY	\$ 5,938.00
45800	REPAIR RECTAL-BLADDER FISTULA	\$ 5,128.00
45563	EXPLORE/REPAIR/DRAIN RECTAL INJURY	\$ 6,703.00
45562	EXPLORE/REPAIR/DRAIN RECTAL INJURY	\$ 4,452.00
45560	REPAIR RECTOCELE	\$ 2,643.00
45550	REPAIR RECTUM, REMOVE SIGMOID	\$ 5,688.00
45541	CORRECT RECTAL PROLAPSE	\$ 3,691.00
45540	CORRECT RECTAL PROLAPSE	\$ 4,098.00
45520	TREATMENT OF RECTAL PROLAPSE	\$ 152.00
45505	REPAIR RECTAL MEMBRANE PROLAPSE	\$ 2,300.00
45500	REPAIR RECTAL/ANAL STRICTURE	\$ 2,256.00
45402	LAPAROSCO SURG PROCTOPEX W/SIGM RES	\$ 5,874.00
45400	LAPAROSCO SURG PROCTOPEXY	\$ 4,381.00
45398	LAPAROSCO SURG PROCTOPEXY	\$ 902.00
45397	LAPAROSC SURG PROTECTOM W/ENTEROSTO	\$ 8,223.00
45395	LAPARSCO SURG PROTECTOM W/COLOSTOMY	\$ 7,610.00
45393	LAPARSCO SURG PROTECTOM W/COLOSTOMY	\$ 951.00
45392	COLONOSCOPY FLEXIBLE, W/ TRANSEND	\$ 1,135.00
45391	COLONOSCOPY FLEXIBLE, W ENDOSCOPI	\$ 962.00
45388	COLONOSCOPY FLEXIBLE, W ENDOSCOPI	\$ 1,018.00
45386	COLNSCPY FLXBL PRXML TO SF W DILT	\$ 793.00
45385	COLONOSCOPY/REMOVE LESION W/SNARE	\$ 952.00
45384	COLONOSCOPY/REMOVE LESION W/CAUTERY	\$ 866.00
45382	COLONOSCOPY, W/BLEEDING CONTROL	\$ 966.00
45381	COLONOSCPY FLXBL W DIRECTD SUMU INJ	\$ 750.00
45380	COLONOSCOPY/BIOPSY	\$ 750.00
45379	COLONOSCOPY/REMOVE FOREIGN BODY	\$ 896.00
45378	,53 COLONOSCOPY, DIAGNOSTIC	\$ 1,232.00
45378	COLONOSCOPY, DIAGNOSTIC	\$ 1,232.00
45347	DEL2015RADIATION THERAPY DOSE PLAN,	\$ 577.00
45346	SIGMOIDOSCOPY FLX ABLATION TUMOR PO	\$ 601.00
45342	SIGMOIDOSC,FLEX;TRANSEND US-GUI FNA	\$ 631.00
45341	SIGMOIDOSC,FLEX;W/ENDOSCOPI EXAM	\$ 462.00
45340	SIGMOIDOSC,FLEX;W/DIL-BALLO,1/MOR S	\$ 292.00
45338	SIGMOIDOSCOPY/REMOVE LESION W/SNARE	\$ 452.00
45337	SIGMOIDOSCOPY/DECOMPRESSION	\$ 436.00
45335	SIGMOIDOSC,FLEX;W/SUBMUC INJ,ANY SU	\$ 249.00
45334	SIGMOIDOSCOPY W/BLEEDING CONTROL	\$ 440.00
45333	SIGMOIDOSCOPY/REMOVE LESION	\$ 357.00
45332	SIGMOIDOSCOPY/REMOVE FOREIGN BODY	\$ 399.00
45331	SIGMOIDOSCOPY/BIOPSY	\$ 267.00
45330	SIGMOIDOSCOPY/DIAGNOSTIC	\$ 211.00
45327	PRO-SIG-SCOP,RIGID W/TRANSEND ST PL	\$ 475.00
45321	PROCTOSIGMOIDOSCOPY/DECOMPRESSION	\$ 419.00
45320	PROCTOSIGMOIDOSCOPY/REMOVE TUMOR	\$ 424.00
45317	PROCTOSIGMOIDOSCOPY/BLEEDING CONTRL	\$ 424.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
45315	PROCTOSIGMOIDOSCOPY/REMOVE LESIONS	\$ 429.00
45309	PROCTOSIGMOIDOSCOPY/REMOVE LESION	\$ 361.00
45308	PROCTOSIGMOIDOSCOPY/REMOVE LESION	\$ 339.00
45307	PROCTOSIGMOIDOSCOPY/REMOVE OBJECT	\$ 374.00
45305	PROCTOSIGMOIDOSCOPY/BIOPSY	\$ 280.00
45303	PROCTOSIGMOIDOSCOPY/DILATION	\$ 324.00
45300	PROCTOSIGMOIDOSCOPY/DIAGNOSTIC	\$ 183.00
45190	DESTROY RECTAL TUMOR, ANY METHOD	\$ 2,673.00
45172	EXC RECTAL TUMOR INC MUSCUL PROPRIA	\$ 3,132.00
45171	EXCISION OR RECTAL TUMOR, TRANSANAL	\$ 2,349.00
45160	REMOVAL OF RECTAL TUMOR	\$ 4,142.00
45150	REMOVAL OF RECTAL STRICTURE	\$ 1,675.00
45136	EXCISION-ILEOANAL RESERV W/ILEOSTOM	\$ 6,948.00
45135	EXCISION OF RECTAL PROLAPSE, FUSION	\$ 4,875.00
45130	EXCISION OF RECTAL PROLAPSE, FUSION	\$ 4,176.00
45126	REMOVE ORGANS FOR COLORECTAL MALIG	\$ 10,668.00
45123	PARTIAL REMOVAL OF RECTUM	\$ 4,297.00
45121	REMOVAL OF RECTUM AND COLON	\$ 7,078.00
45120	REMOVAL OF RECTUM (PULL THROUGH)	\$ 6,473.00
45119	PROCTECTOMY, COMB PULL-THRU W/RESV	\$ 7,416.00
45116	PARTIAL REMOVAL OF RECTUM W/FUSION	\$ 5,821.00
45114	PARTIAL REMOVAL OF RECTUM W/FUSION	\$ 7,385.00
45113	PARTIAL REMOVAL OF RECTUM	\$ 7,065.00
45112	REMOVAL OF RECTUM (PULL-THROUGH)	\$ 7,209.00
45111	PARTIAL REMOVAL OF RECTUM	\$ 4,269.00
45110	REMOVAL OF RECTUM/COLOSTOMY	\$ 7,149.00
45108	REMOVAL OF ANORECTAL LESION	\$ 1,485.00
45100	BIOPSY OF RECTUM	\$ 1,158.00
45020	DRAINAGE OF RECTAL ABSCESS, DEEP	\$ 2,250.00
45005	DRAINAGE OF RECTAL ABSCESS	\$ 637.00
45000	DRAINAGE OF PELVIC ABSCESS	\$ 1,655.00
44970	Laparoscopic Appendix	\$ 2,416.00
44960	REMOVAL OF RUPTURED APPENDIX	\$ 3,544.00
44955	APPENDECTOMY W/OTHER PROCEDURE	\$ 333.00
44950	REMOVAL OF APPENDIX	\$ 2,592.00
44900	DRAINAGE OF APPENDIX ABSCESS, OPEN	\$ 3,172.00
44850	REPAIR OF MESENTERY	\$ 2,986.00
44820	REMOVAL OF MESENTERY LESION	\$ 3,340.00
44800	REMOVAL OF BOWEL POUCH	\$ 3,076.00
44721	BKBEN RECON CADAVER INT ART ANAS EA	\$ 1,566.00
44720	BKBEN RECON CADAVER INT VEN ANAS EA	\$ 1,122.00
44715	BKBEN STD PREP CADAVER INTES SMA/MV	\$ 1,017.00
44701	INTRAOPERATIVE COLONIC LAVAGE	\$ 696.00
44700	EXCLUSION, SMALL BOWEL FROM PELVIS	\$ 3,879.00
44680	SURGICAL REVISION OF BOWEL	\$ 4,251.00
44661	REPAIR BOWEL-BLADDER FISTULA	\$ 6,147.00
44660	REPAIR BOWEL-BLADDER FISTULA	\$ 5,189.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
44650	REPAIR BOWEL FISTULA	\$ 5,761.00
44640	REPAIR BOWEL-SKIN FISTULA	\$ 5,587.00
44626	CLOSE ENTEROSTOMY, W/RESEC COLORECT	\$ 6,394.00
44625	CLOSE ENTEROSTOMY, W/RESEC	\$ 3,980.00
44620	CLOSE ENTEROSTOMY	\$ 3,436.00
44615	INTESTINAL STRICTUROPLASTY	\$ 4,327.00
44605	SUTURE, LARGE INTESTINE W/COLOSTOMY	\$ 5,216.00
44604	SUTURE, LARGE INTESTINE	\$ 4,238.00
44603	SUTURE, SMALL INTESTINE, MULT PERFS	\$ 6,492.00
44602	SUTURE, SMALL INTESTINE, ONE PERF	\$ 5,679.00
44500	INTRODUCE GI TUBE (MILLER-ABBOTT)	\$ 70.00
44401	INTRODUCE GI TUBE (MILLER-ABBOTT)	\$ 911.00
44394	COLONOSCOPY, REMOVE LESION, W/SNARE	\$ 850.00
44392	COLONOSCOPY, REMOVE LESION, CAUTERY	\$ 764.00
44391	COLONOSCOPY, W/BLEEDING CONTROL	\$ 859.00
44390	COLONOSCOPY, W/FOREIGN BODY REMOVAL	\$ 787.00
44389	COLONOSCOPY, W/BIOPSY	\$ 649.00
44388	,53 COLONOSCOPY, DIAGNOSTIC	\$ 1,145.00
44388	COLONOSCOPY, DIAGNOSTIC	\$ 1,145.00
44386	ENDOSCOPY OF BOWEL POUCH/BIOPSY	\$ 334.00
44385	ENDOSCOPY OF BOWEL POUCH/DIAGNOSTIC	\$ 271.00
44384	ENDOSCOPY OF BOWEL POUCH/DIAGNOSTIC	\$ 576.00
44382	SMALL BOWEL ENDOSCOPY, THRU STOMA	\$ 274.00
44381	SMALL BOWEL ENDOSCOPY, THRU STOMA	\$ 313.00
44380	SMALL BOWEL ENDOSCOPY, THRU STOMA	\$ 209.00
44379	INT ENDOSC,ENTEROSC -DEO,ILE;CON BL	\$ 1,529.00
44378	SMALL BOWEL ENDOSCOPY/BLEED CONTROL	\$ 1,435.00
44377	SMALL BOWEL ENDOSCOPY/BIOPSY	\$ 1,119.00
44376	SMALL BOWEL ENDOSCOPY/DIAGNOSTIC	\$ 1,062.00
44373	SMALL BOWEL ENDOSCOPY/REPLACE TUBE	\$ 723.00
44372	SMALL BOWEL ENDOSCOPY/PLACE TUBE	\$ 901.00
44370	SMALL INTSTNL ENDO W TRNSENDO STENT	\$ 999.00
44369	SMALL BOWEL ENDOSCOPY/REMOVE LESION	\$ 915.00
44366	SMALL BOWEL ENDOSCOPY FOR BLEEDING	\$ 893.00
44365	SMALL BOWEL ENDOSCOPY/REMOVE LESION	\$ 677.00
44364	SMALL BOWEL ENDOSCOPY/REMOVE LESION	\$ 763.00
44363	SMALL BOWEL ENDOSCOPY/REMOVE OBJECT	\$ 719.00
44361	SMALL BOWEL ENDOSCOPY/BIOPSY	\$ 593.00
44360	SMALL BOWEL ENDOSCOPY/DIAGNOSTIC	\$ 536.00
44346	REVISION OF COLOSTOMY/HERNIA REPAIR	\$ 4,699.00
44345	REVISION OF COLOSTOMY, COMPLICATED	\$ 4,155.00
44340	REVISION OF COLOSTOMY, SIMPLE	\$ 2,460.00
44322	COLOSTOMY/BIOPSIES	\$ 4,024.00
44320	COLOSTOMY	\$ 4,790.00
44316	CONSTRUCT BOWEL POUCH	\$ 5,739.00
44314	REVISION OF ILEOSTOMY, COMPLICATED	\$ 3,955.00
44312	REVISION OF ILEOSTOMY, SIMPLE	\$ 2,331.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
44310	ILEOSTOMY/JEJUNOSTOMY, NON-TUBE	\$ 4,131.00
44300	OPEN BOWEL TO SKIN, TUBE	\$ 3,397.00
44227	LAPROSCPY, CLOSURE ENTEROSTOMY	\$ 6,640.00
44213	LAPROSCPY, MOBILIZATION	\$ 737.00
44212	LAPROSCPY, COLECTOMY, ABDOMINAL	\$ 7,880.00
44211	LAP,SUR;COL,TOT,ABD,W/PRO,ILE ANAST	\$ 8,202.00
44210	LAP,SUR;COL,TOT ABD W/O PROT,W/ILEO	\$ 6,888.00
44208	LAP,SURG;COL,PAR W/ANA,COLPR,COLSTO	\$ 7,759.00
44207	LAPAROSCOPY, COLECTOMY, PART W ANAS	\$ 7,146.00
44206	LAPAROSCOPY, COLECTOMY, PARTIAL	\$ 6,944.00
44205	LAPAROSCOPY, COLECTOMY, PARTIAL	\$ 5,292.00
44204	LAPAROSCOPY, SURG, COLECTOMY	\$ 6,114.00
44203	LAPAROSCOPY, ENTERECTOMY, ADDTINAL	\$ 964.00
44202	LAPAROSCOPY, SURG, ENTEROSTOMY,	\$ 5,564.00
44188	LAPAROSCOPY, SURG, COLOSTOMY SKIN	\$ 4,830.00
44187	LAPAROSCOPY, SURG, ILEOSTOMY	\$ 4,287.00
44186	LAPAROSCOPY, JEJUNOSTOMY, SURGICAL	\$ 2,626.00
44180	LAPAROSCOPY, ENTEROLYSIS	\$ 3,702.00
44160	REMOVAL OF COLON/ILEOCOLOSTOMY	\$ 4,973.00
44158	COLECTMY W PROCTECTOM W IAA W ILEAL	\$ 9,107.00
44157	COLECTMY W PROCTECTOMY W IA ANSTMSS	\$ 8,884.00
44156	REMOVAL OF COLON/PROCTECT/ILEOSTOMY	\$ 9,365.00
44155	REMOVAL OF COLON/PROCTECTOMY	\$ 8,139.00
44151	REMOVAL OF COLON/ILEOSTOMY	\$ 8,746.00
44150	REMOVAL OF COLON/ILEOSTOMY	\$ 7,414.00
44147	PARTIAL REMOVAL OF COLON	\$ 7,751.00
44146	PARTIAL REMOVAL OF COLON/COLOSTOMY	\$ 8,353.00
44145	PARTIAL REMOVAL OF COLON/COLOSTOMY	\$ 6,567.00
44144	PARTIAL REMOVAL OF COLON	\$ 7,081.00
44143	PARTIAL REMOVAL OF COLON/COLOSTOMY	\$ 6,672.00
44141	PARTIAL REMOVAL OF COLON/COLOSTOMY	\$ 7,306.00
44140	PARTIAL REMOVAL OF COLON, W/FUSION	\$ 5,388.00
44139	MOBILIZATION OF SPLENIC FLEXURE	\$ 485.00
44137	REMOVAL OF TRANPLNTED INTES ALLOGRA	\$ 4,583.00
44130	BOWEL TO BOWEL FUSION	\$ 5,280.00
44128	ENTERECTOMY, ADDTINAL RESECT & ANAS	\$ 993.00
44127	ENTERECTOMY, RESC SMALL INTES, TAPR	\$ 11,628.00
44126	ENTERECTOMY, RESEC OF SMALL INTESIN	\$ 10,047.00
44125	REMOVAL OF SMALL INTESTINE	\$ 4,722.00
44121	REMOVAL OF SMALL INTESTINE, EA ADDL	\$ 975.00
44120	REMOVAL OF SMALL INTESTINE W/FUSION	\$ 4,927.00
44111	REMOVAL OF BOWEL LESION(S)	\$ 3,867.00
44110	REMOVAL OF BOWEL LESION(S)	\$ 3,339.00
44100	BIOPSY OF BOWEL	\$ 402.00
44055	CORRECTION OF MALROTATION OF BOWEL	\$ 6,014.00
44050	REDUCTION OF BOWEL OBSTRUCTION	\$ 3,769.00
44025	INCISION OF COLON	\$ 3,936.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
44021	DECOMPRESSION OF SMALL BOWEL	\$ 3,915.00
44020	INCISION OF SMALL BOWEL	\$ 3,930.00
44015	TUBE JEJUNOSTOMY FOR FEEDING	\$ 579.00
44010	INCISION OF DUODENUM	\$ 3,368.00
44005	FREEING OF BOWEL ADHESION	\$ 4,404.00
43888	GATRIC RESTRICTIVE, REMOV &REPL POR	\$ 1,856.00
43887	GATRIC RSTRICTIVE, REMOVAL PORT	\$ 1,308.00
43886	GASTRIC RESTRICTIVE PROC, REVIS POR	\$ 1,453.00
43882	REVISE REMOVE ELECTRD ANTRUM	\$ 2,965.00
43881	IMPL REDO ELECTRO, ANTRUM	\$ 2,965.00
43880	REPAIR STOMACH-BOWEL FISTULA	\$ 6,417.00
43870	REPAIR STOMACH OPENING	\$ 2,846.00
43865	REVISE STOMACH-BOWEL FUSION	\$ 6,952.00
43860	REVISE STOMACH-BOWEL FUSION	\$ 6,603.00
43855	REVISE STOMACH-BOWEL FUSION	\$ 6,871.00
43850	REVISE STOMACH-BOWEL FUSION	\$ 6,622.00
43848	GASTRIC BYPASS REVISION	\$ 7,844.00
43847	GASTRIC BYPASS FOR OBESITY	\$ 7,333.00
43846	GASTRIC REVISION FOR OBESITY	\$ 6,570.00
43845	GASTRIC RESTRICTIVE PROCD, W GASTRE	\$ 7,872.00
43843	GASTRIC REVISION FOR OBESITY	\$ 5,203.00
43840	REPAIR STOMACH LESION	\$ 5,501.00
43832	PLACE PERMANENT GASTROSTOMY TUBE	\$ 4,198.00
43831	PLACE GASTROSTOMY TUBE, NEWBORN	\$ 2,417.00
43830	PLACE TEMPORARY GASTROSTOMY TUBE	\$ 2,820.00
43825	FUSION OF STOMACH AND BOWEL	\$ 5,318.00
43820	FUSION OF STOMACH AND BOWEL	\$ 5,434.00
43810	FUSION OF STOMACH AND BOWEL	\$ 4,132.00
43800	RECONSTRUCTION OF PYLORUS	\$ 3,776.00
43775	LAP LONGITUDINAL GASTRECTOMY	\$ 4,544.00
43774	LAPSCPY, REMOVL GAST BAND & PORTS	\$ 3,887.00
43773	LAPROSCPY, REM&REPLCMNT GASTIC BAND	\$ 5,178.00
43772	LAPROSCPY, REMOVAL OF ADJ GASTR BAN	\$ 3,857.00
43771	LAPARSCPY, REVISION OF GASTRIC BAND	\$ 5,178.00
43770	LAPARSCPY, GASTR PLCMNT GASTIC BAND	\$ 4,555.00
43761	REPOSITION GASTROSTOMY TUBE	\$ 394.00
43757	DX DUOD INTUB W/ASP SPECS	\$ 285.00
43756	DX DUOD INTUB W/ASP SPEC	\$ 190.00
43755	DX GASTR INTUB W/ASP SPECS	\$ 222.00
43754	DX GASTR INTUB W/ASP SPEC	\$ 139.00
43753	TX GASTRO INTUB W/ASP	\$ 89.00
43752	NASOGASTRIC TUBE PLCMNT, W FLURO GU	\$ 152.00
43653	LAPROSCPY, GASTROSTOMY, W/O G-TUBE	\$ 2,304.00
43652	LAPROSCPY, TRANSECTION VAGUS NERVE	\$ 3,093.00
43651	LAPROSCOPY, TRANSECTION VAGUS NERVE	\$ 2,644.00
43648	LAP REVISE/REMV ELTRD ANTRUM	\$ 3,336.00
43647	LAP IMPL ELECTRODE, ANTRUM	\$ 3,336.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
43645	LAPROSCY W GASTRIC BYPASS	\$ 7,501.00
43644	LAPRSCPY, SURG, R-EN-Y GASTROENTERY	\$ 7,048.00
43641	VAGOTOMY/PYLORUS REPAIR, PARIETAL	\$ 4,882.00
43640	VAGOTOMY/PYLORUS REPAIR, TRUNCAL	\$ 4,755.00
43635	VAGOTOMY PERFORM W/PRT STOMACH REMV	\$ 459.00
43634	REMOVE STOMACH, PARTIAL, W/POUCH	\$ 8,656.00
43633	REMOVE STOMACH, PARTIAL W/ROUX-EN-Y	\$ 7,800.00
43632	REMOVE STOMACH, PARTIAL	\$ 8,246.00
43631	REMOVE STOMACH, PARTIAL	\$ 5,864.00
43622	REMOVE STOMACH, TOTAL, W/POUCH	\$ 9,416.00
43621	REMOVE STOMACH, TOTAL, W/ROUX-EN-Y	\$ 9,205.00
43620	REMOVE STOMACH, TOTAL	\$ 8,064.00
43611	REMOVE MALIGNANT STOMACH TUMOR	\$ 4,930.00
43610	REMOVE BENIGN STOMACH ULCER/TUMOR	\$ 3,954.00
43605	BIOPSY OF STOMACH, BY LAPAROTOMY	\$ 3,386.00
43520	PYLOROMYOTOMY (FREDET-RAMSTEDT)	\$ 2,736.00
43510	GASTROTOMY W/ESOPHAGEAL DILATION	\$ 3,839.00
43502	GASTROTOMY, REPAIR ESOPHAGUS LACER	\$ 6,194.00
43501	GASTROTOMY, SUTURE BLEEDING ULCER	\$ 5,444.00
43500	GASTROTOMY, REMOVE FOREIGN OBJECT	\$ 3,149.00
43496	MICROVASCULAR FREE JEJUNUM TRANSFER	\$ 3,556.00
43460	ESOPHAGOGASTRIC TAMPONADE W/BALLOON	\$ 792.00
43453	DILATE ESOPHAGUS, GUIDEWIRE	\$ 320.00
43450	DILATE ESOPHAGUS, UNGUIDED	\$ 296.00
43425	REPAIR ESOPHAGUS OPENING, THORACIC	\$ 5,773.00
43420	REPAIR ESOPHAGUS OPENING, CERVICAL	\$ 3,816.00
43415	SUTURE ESOPHAGUS WOUND, THORACIC	\$ 10,322.00
43410	SUTURE ESOPHAGUS WOUND, CERVICAL	\$ 3,851.00
43405	LIGATION/STAPLING GI JUNCTION	\$ 5,818.00
43400	LIGATION OF ESOPHAGUS VEINS	\$ 6,180.00
43361	GI REPAIR W/PREV ESOPHAGUS REMOVAL	\$ 10,955.00
43360	GI REPAIR W/PREV ESOPHAGUS REMOVAL	\$ 9,035.00
43352	SURGICAL OPENING OF ESOPHAGUS	\$ 4,254.00
43351	SURGICAL OPENING OF ESOPHAGUS	\$ 5,258.00
43341	FUSE ESOPHAGUS & INTESTINE	\$ 5,606.00
43340	FUSE ESOPHAGUS & INTESTINE	\$ 5,595.00
43338	ESOPH LENGTHENING	\$ 469.00
43337	THORABD DIAPHR HERN REPAIR	\$ 6,216.00
43336	THORABD DIAPHR HERN REPAIR	\$ 5,878.00
43335	TRANSTHOR DIAPHRAG HERN RPR	\$ 5,369.00
43334	TRANSTHOR DIAPHRAG HERN RPR	\$ 5,016.00
43333	TRANSAB ESOPH HIAT HERN RPR	\$ 5,109.00
43332	TRANSAB ESOPH HIAT HERN RPR	\$ 4,678.00
43331	REPAIR OF ESOPHAGUS	\$ 5,360.00
43330	REPAIR ESOPHAGUS (HELLER TYPE)	\$ 5,419.00
43328	ESOPH FUNDOPLASTY THOR	\$ 4,512.00
43327	ESOPH FUNDOPLASTY LAP	\$ 3,313.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
43325	REVISE ESOPHAGUS & STOMACH, W/PATCH	\$ 5,511.00
43320	FUSE ESOPHAGUS & STOMACH	\$ 5,668.00
43314	ESOPHGOPLSTY CNGNTL DFCT W RPR TEF	\$ 11,833.00
43313	ESOPHGPLSTY CNGNTL DFCT W/O RPR TEF	\$ 10,963.00
43312	REVISE ESOPHAGUS, REPAIR FISTULA	\$ 6,407.00
43310	REVISION OF ESOPHAGUS	\$ 5,941.00
43305	REVISE ESOPHAGUS, REPAIR FISTULA	\$ 4,102.00
43300	REVISION OF ESOPHAGUS	\$ 2,320.00
43283	LAP ESOPH LENGTHENING	\$ 638.00
43282	LAPAROSCOPY WITH IMPLANTATION MESH	\$ 7,041.00
43281	LAPAROSCOPY SX REPAIR PARAES HERNIA	\$ 6,259.00
43280	NULL	\$ 4,367.00
43279	NULL	\$ 5,211.00
43278	NULLcal Services	\$ 1,614.00
43277	NULLcal Services	\$ 1,411.00
43276	ERCP BILIARY/PANC DUCT STENT EXCHAN	\$ 1,797.00
43275	ERCP REMOVE FOREIGN BODY/STENT BILI	\$ 1,406.00
43274	ERCP STENT PLACEMENT BILIARY/PANCRE	\$ 1,726.00
43273	NULL	\$ 448.00
43270	DEL2014ENDOSCOPY, ERCP, W/BALLOON D	\$ 837.00
43266	DEL2014ENDOSCOPY, ERCP, W/DRAIN INS	\$ 820.00
43265	ENDOSCOPY, ERCP, STONE LITHOTRIPSY	\$ 1,615.00
43264	ENDOSCOPY, ERCP, W/STONE REMOVAL	\$ 1,356.00
43263	ENDOSCOPY, ERCP, SPHINCTER OF ODDI	\$ 1,334.00
43262	ENDOSCOPY, ERCP, REPAIR SPHINCTER	\$ 1,330.00
43261	ENDOSCOPY, ERCP, W/BIOPSY	\$ 1,263.00
43260	ENDOSCOPY, ERCP, DIAGNOSTIC	\$ 1,203.00
43259	UPPER GI ENDOSCOPY W/ULTRASOUND	\$ 842.00
43257	UGI ENDOSCPY W DELVRY OF THRML ENRG	\$ 879.00
43255	UPPER GI ENDOSCOPY, BLEED CONTROL	\$ 748.00
43254	EDG TRANSORAL ENDOSCPIC MUCOSAL RES	\$ 1,007.00
43253	UPPER GI ENDOSCOPY, BLEED CONTROL	\$ 981.00
43252	UPPER GI ENDOSCOPY, BLEED CONTROL	\$ 635.00
43251	UPPER GI ENDOSCOPY W/LESION REMOVAL	\$ 733.00
43250	UPPER GI ENDOSCOPY W/LESION REMOVAL	\$ 652.00
43249	UPPER GI ENDOSCOPY W/ESOPHAG DILATE	\$ 574.00
43248	UPPER GI ENDOSCOPY W/GUIDE WIRE	\$ 620.00
43247	UPPER GI ENDOSCOPY, REMOVE OBJECT	\$ 664.00
43246	UPPER GI ENDOSCOPY, W/GASTRIC TUBE	\$ 764.00
43245	UPPER GI ENDOSCOPY, W/DILATION	\$ 665.00
43244	UPPER GI ENDOSCOPY W/LIGATION	\$ 912.00
43243	UPPER GI ENDOSCOPY/INJECT VARICES	\$ 886.00
43242	UGI ENDOSC-ESO,STO;ULT INT-MUR FNA	\$ 978.00
43241	UPPER GI ENDOSCOPY,PLACE TUBE/CATH	\$ 535.00
43240	Upper GI endosc. w/transmural drain	\$ 1,465.00
43239	UPPER GI ENDOSCOPY, W/BIOPSY	\$ 518.00
43238	UPPER GASTRO ENDOSCOPY	\$ 868.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
43237	UPPER GASTRO ENDOSCOPY	\$ 730.00
43236	UGI ENDOSCOPY W DIRCTD SUBMUCSL INJ	\$ 518.00
43235	UPPER GI ENDOSCOPY/DIAGNOSTIC	\$ 461.00
43233	**DNU**UPPER GI ENDOSCOPY/EXAM	\$ 870.00
43232	Esophagoscopy w/transendoscopic US	\$ 737.00
43231	Esophagoscopy w/Endosc US exam	\$ 590.00
43229	Esophagoscopy w/Endosc US exam	\$ 740.00
43227	ESOPHAGUS ENDOSCOPY, BLEED CONTROL	\$ 619.00
43226	ESOPHAGUS ENDOSCOPY/INSERT WIRE	\$ 494.00
43220	ESOPHAGUS ENDOSCOPY/DILATION	\$ 444.00
43217	ESOPHAGUS ENDOSCOPY/REMOVE LESION	\$ 603.00
43216	ESOPHAGUS ENDOSCOPY/REMOVE LESION	\$ 500.00
43215	ESOPHAGUS ENDOSCOPY/REMOVE OBJECT	\$ 537.00
43214	ESOPHAGOSCPY DILATE ESOPHAGUS BALLN	\$ 722.00
43213	ESOPHAGOSCPY RETROGRADE DILATE BALN	\$ 982.00
43212	ESOPHAGUS ENDOSCOPY/REMOVE OBJECT	\$ 731.00
43211	ESOPHAGUS ENDOSCOPY/REMOVE OBJECT	\$ 881.00
43206	with esophagogastric fundoplasty, p	\$ 498.00
43205	ESOPHAGUS ENDOSCOPY W/LIGATION	\$ 527.00
43204	ESOPHAGUS ENDOSCOPY/INJECT VARICES	\$ 505.00
43202	ESOPHAGUS ENDOSCOPY W/BIOPSY	\$ 389.00
43201	ESOPHAGOSC,RIGID/FLEX;W/SUBMUC INJ	\$ 392.00
43200	ESOPHAGUS ENDOSCOPY, DIAGNOSTIC	\$ 333.00
43198	ESOPHAGOSCPY FLEXBLE TRANSNASAL BPS	\$ 377.00
43197	ESOPHAGOSCOPY FLEXIBLE TRANSNASAL	\$ 320.00
43196	ESOPHAGOSCOPY RIG TRANSORAL GUIDE W	\$ 737.00
43195	ESOPHAGOSCOPY RIGID TRANSORAL BALLO	\$ 694.00
43194	ESOPHAGOSCPY RIG TRANSORL RMV FORGN	\$ 736.00
43193	ESOPHAGOSCOPY RIGID TRANSORAL BIOPS	\$ 637.00
43192	ESOPHAGOSCOPY RIGID TRANSORAL INJ	\$ 639.00
43191	ESOPHAGUS ENDOSCOPY, DIAGNOSTIC	\$ 582.00
43180	ESOPHAGUS ENDOSCOPY, DIAGNOSTIC	\$ 2,060.00
43135	REMOVAL OF ESOPHAGUS POUCH,THORACIC	\$ 5,899.00
43130	REMOVAL OF ESOPHAGUS POUCH,CERVICAL	\$ 3,032.00
43124	REMOVE ESOPHAGUS W/O RECONSTRUCTION	\$ 15,358.00
43123	PARTIAL ESOPHAGUS REMOVAL, ABDOMEN	\$ 18,266.00
43122	PARTIAL ESOPHAGUS REMOVAL, ABDOMEN	\$ 10,312.00
43121	PARTIAL ESOPHAGUS REMOVAL, DISTAL	\$ 11,485.00
43118	PARTIAL ESOPHAGUS REMOVAL, DISTAL	\$ 14,655.00
43117	PARTIAL ESOPHAGUS REMOVAL, DISTAL	\$ 13,104.00
43116	PARTIAL ESOPHAGUS REMOVAL, CERVICAL	\$ 20,229.00
43113	REMOVE ESOPHAGUS W/BOWEL RECONSTRCT	\$ 17,604.00
43112	REMOVE ESOPHAGUS W/THORACOTOMY	\$ 14,068.00
43108	REMOVE ESOPHAGUS W/BOWEL RECONSTRCT	\$ 18,050.00
43107	TOTAL ESOPHAGUS REMOVAL	\$ 12,010.00
43101	REMOVE ESOPHAGUS LESION, THORACIC	\$ 4,021.00
43100	REMOVE ESOPHAGUS LESION, CERVICAL	\$ 2,361.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
43045	INCISE ESOPHAGUS, REMOVE OBJECT	\$ 5,200.00
43030	THROAT MUSCLE SURGERY	\$ 1,963.00
43020	INCISE ESOPHAGUS, REMOVE OBJECT	\$ 2,247.00
42972	CONTROL NOSE/THROAT BLEEDING	\$ 1,904.00
42971	CONTROL NOSE/THROAT BLEEDING, COMPL	\$ 1,699.00
42970	CONTROL NOSE/THROAT BLEEDING,SIMPLE	\$ 1,538.00
42962	CONTROL THROAT BLEEDING, ADDED SURG	\$ 1,926.00
42961	CONTROL THROAT BLEEDING, COMPLIC	\$ 1,564.00
42960	CONTROL THROAT BLEEDING, SIMPLE	\$ 624.00
42955	SURGICAL OPENING OF PHARYNX	\$ 2,849.00
42953	REPAIR THROAT AND ESOPHAGUS	\$ 3,614.00
42950	RECONSTRUCTION OF THROAT	\$ 3,009.00
42900	REPAIR PHARYNX WOUND	\$ 1,254.00
42894	REVISE PHARYNGEAL WALLS, FLAP CLOSE	\$ 8,888.00
42892	REVISE PHARYNGEAL WALLS,DIRECT CLOS	\$ 7,030.00
42890	PARTIAL REMOVAL OF PHARYNX	\$ 5,358.00
42870	REMOVAL OF LINGUAL TONSIL	\$ 2,205.00
42860	REMOVAL OF TONSIL TAGS	\$ 709.00
42845	EXTENSIVE SURGERY OF THROAT/TONSILS	\$ 8,377.00
42844	EXTENSIVE SURGERY OF THROAT/TONSILS	\$ 5,209.00
42842	EXTENSIVE SURGERY OF THROAT/TONSILS	\$ 3,779.00
42836	REMOVAL OF ADENOIDS, AGE 12+	\$ 903.00
42835	REMOVAL OF ADENOIDS, UNDER AGE 12	\$ 722.00
42831	REMOVAL OF ADENOIDS, AGE 12+	\$ 846.00
42830	REMOVAL OF ADENOIDS, UNDER AGE 12	\$ 782.00
42826	REMOVAL OF TONSILS, AGE 12+	\$ 946.00
42825	REMOVAL OF TONSILS, UNDER AGE 12	\$ 987.00
42821	REMOVE TONSILS & ADENOIDS, AGE 12+	\$ 1,131.00
42820	REMOVE TONSILS & ADENOIDS, UNDER 12	\$ 1,083.00
42815	EXCISION OF NECK CYST, DEEP	\$ 2,055.00
42810	EXCISION OF NECK CYST, SUPERFICIAL	\$ 1,064.00
42809	REMOVE PHARYNX FOREIGN BODY	\$ 470.00
42808	REMOVAL OF PHARYNX LESION	\$ 611.00
42806	BIOPSY OF UPPER NOSE/THROAT	\$ 501.00
42804	BIOPSY OF UPPER NOSE/THROAT	\$ 430.00
42800	BIOPSY OF THROAT, OROPHARYNX	\$ 422.00
42725	DRAINAGE OF THROAT ABSCESS	\$ 3,046.00
42720	DRAINAGE OF THROAT ABSCESS	\$ 1,461.00
42700	DRAINAGE OF TONSIL ABSCESS	\$ 509.00
42665	LIGATION OF SALIVARY DUCT	\$ 782.00
42660	DILATE/CATHETERIZE SALIVARY DUCT	\$ 350.00
42650	DILATE SALIVARY DUCT	\$ 217.00
42600	CLOSURE OF SALIVARY FISTULA	\$ 1,307.00
42550	INJECTION FOR SALIVARY GLAND X-RAY	\$ 232.00
42510	PAROTID DUCT DIVERSION, W/LIGATION	\$ 2,304.00
42509	DIVERT PAROTID DUCT, REMOVE GLANDS	\$ 3,107.00
42507	PAROTID DUCT DIVERSION (WILKE)	\$ 1,871.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
42505	REPAIR SALIVARY DUCT, COMPLICATED	\$ 1,693.00
42500	REPAIR SALIVARY DUCT, SIMPLE	\$ 1,270.00
42450	REMOVAL OF SUBLINGUAL GLAND	\$ 1,349.00
42440	REMOVAL OF SUBMAXILLARY GLAND	\$ 1,549.00
42426	REMOVAL OF PAROTID GLAND/TUMOR	\$ 5,106.00
42425	REMOVAL OF PAROTID GLAND/TUMOR	\$ 3,151.00
42420	REMOVAL OF PAROTID GLAND/TUMOR	\$ 4,467.00
42415	REMOVAL OF PAROTID GLAND/TUMOR	\$ 3,975.00
42410	REMOVAL OF PAROTID GLAND/TUMOR	\$ 2,365.00
42409	DRAINAGE OF SALIVARY CYST	\$ 843.00
42408	REMOVAL OF SALIVARY CYST	\$ 1,331.00
42405	BIOPSY OF SALIVARY GLAND	\$ 851.00
42400	NEEDLE BIOPSY OF SALIVARY GLAND	\$ 200.00
42340	REMOVAL OF SALIVARY STONE, COMPLIC	\$ 1,264.00
42335	REMOVAL OF SALIVARY STONE, COMPLIC	\$ 966.00
42330	REMOVAL OF SALIVARY STONE, SIMPLE	\$ 614.00
42320	DRAINAGE OF SALIVARY GLAND ABSCESS	\$ 659.00
42310	DRAINAGE OF SALIVARY GLAND ABSCESS	\$ 510.00
42305	DRAINAGE OF SALIVARY GLAND ABSCESS	\$ 1,605.00
42300	DRAINAGE OF SALIVARY GLAND ABSCESS	\$ 577.00
42281	INSERTION OF PALATE PROSTHESIS	\$ 618.00
42280	PREPARATION OF PALATE MOLD	\$ 418.00
42260	REPAIR NOSE TO LIP FISTULA	\$ 2,489.00
42235	REPAIR ANTERIOR PALATE, VOMER FLAP	\$ 2,716.00
42227	LENGTHENING OF PALATE, ISLAND FLAP	\$ 3,102.00
42226	LENGTHENING OF PALATE, PHARYNG FLAP	\$ 3,320.00
42225	RECONSTRUCT CLEFT PALATE W/FLAP	\$ 3,755.00
42220	RECONSTRUCT CLEFT PALATE W/LENGTHEN	\$ 2,265.00
42215	RECONSTRUCT CLEFT PALATE	\$ 2,759.00
42210	RECONSTRUCT/GRAFT CLEFT PALATE	\$ 4,236.00
42205	RECONSTRUCT CLEFT PALATE	\$ 3,799.00
42200	RECONSTRUCT CLEFT PALATE	\$ 3,641.00
42182	REPAIR MOUTH ROOF LACERATION	\$ 963.00
42180	REPAIR MOUTH ROOF LACERATION	\$ 693.00
42160	TREAT MOUTH ROOF LESION	\$ 543.00
42145	REVISION OF PALATE, PHARYNX/UVULA	\$ 2,596.00
42140	REMOVAL OF UVULA	\$ 586.00
42120	REMOVE LESION/PART REMOVAL PALATE	\$ 3,770.00
42107	REMOVE MOUTH ROOF LESION,FLAP CLOSE	\$ 1,286.00
42106	REMOVE MOUTH ROOF LESION W/CLOSURE	\$ 657.00
42104	REMOVE MOUTH ROOF LESION,NO CLOSURE	\$ 515.00
42100	BIOPSY OF ROOF OF MOUTH	\$ 406.00
42000	DRAINAGE OF MOUTH ROOF LESION	\$ 392.00
41874	ALVEOLOPLASTY, EACH QUADRANT	\$ 962.00
41872	GINGIVOPLASTY, EACH QUADRANT	\$ 1,137.00
41830	REMOVAL OF GUM TISSUE	\$ 1,186.00
41828	EXCISE HYPERPLASTIC ALVEOLAR MUCOSA	\$ 858.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
41827	REMOVE GUM LESION, COMPLEX REPAIR	\$ 1,147.00
41826	REMOVE GUM LESION, SIMPLE REPAIR	\$ 793.00
41825	REMOVAL OF GUM LESION, NO REPAIR	\$ 458.00
41823	REMOVE BONY LESIONS FROM GUM	\$ 1,364.00
41822	REMOVE FIBROUS LESIONS FROM GUM	\$ 763.00
41806	REMOVE FOREIGN BODY FROM JAWBONE	\$ 1,023.00
41805	REMOVE FOREIGN BODY FROM GUM	\$ 706.00
41800	DRAINAGE OF GUM LESION	\$ 580.00
41530	NULL	\$ 1,401.00
41520	RECONSTRUCT TONGUE FOLD	\$ 930.00
41512	NULL	\$ 2,469.00
41510	SUTURE TONGUE TO LIP	\$ 1,684.00
41252	REPAIR TONGUE/MOUTH LACERATION	\$ 797.00
41251	REPAIR TONGUE/MOUTH LACERATION	\$ 713.00
41250	REPAIR TONGUE/MOUTH LACERATION	\$ 592.00
41155	TONGUE REMOVAL, JAW, NECK SURGERY	\$ 11,288.00
41153	TONGUE REMOVAL, MOUTH, NECK SURGERY	\$ 8,983.00
41150	TONGUE REMOVAL, MOUTH, JAW SURGERY	\$ 8,251.00
41145	TONGUE REMOVAL, NECK SURGERY	\$ 10,359.00
41140	REMOVAL OF TONGUE	\$ 8,183.00
41135	PARTIAL REMOVAL OF TONGUE,NECK SURG	\$ 8,148.00
41130	PARTIAL REMOVAL OF TONGUE	\$ 4,934.00
41120	PARTIAL REMOVAL OF TONGUE	\$ 3,990.00
41116	EXCISION OF MOUTH FLOOR LESION	\$ 817.00
41115	EXCISION OF TONGUE FOLD	\$ 547.00
41114	EXCISION OF TONGUE LESION W/CLOSURE	\$ 2,338.00
41113	EXCISION OF TONGUE LESION W/CLOSURE	\$ 1,034.00
41112	EXCISION OF TONGUE LESION W/CLOSURE	\$ 935.00
41110	EXCISION OF TONGUE LESION	\$ 489.00
41108	BIOPSY OF FLOOR OF MOUTH	\$ 334.00
41105	BIOPSY OF POSTERIOR TONGUE	\$ 413.00
41100	BIOPSY OF ANTERIOR TONGUE	\$ 396.00
41019	PLACE NEEDLES H&N FOR RT	\$ 1,746.00
41018	DRAIN MOUTH LESION,MASTICATOR SPACE	\$ 1,541.00
41017	DRAIN MOUTH LESION, SUBMANDIBULAR	\$ 1,321.00
41016	DRAIN MOUTH LESION, SUBMENTAL	\$ 1,306.00
41015	DRAIN MOUTH LESION, SUBLINGUAL	\$ 1,240.00
41010	INCISION OF TONGUE FOLD	\$ 405.00
41009	DRAIN MOUTH LESION,MASTICATOR SPACE	\$ 1,099.00
41008	DRAIN MOUTH LESION, SUBMANDIB SPACE	\$ 1,004.00
41007	DRAIN MOUTH LESION, SUBMENTAL SPACE	\$ 926.00
41006	DRAIN MOUTH LESION, SUBLING, DEEP	\$ 957.00
41005	DRAIN MOUTH LESION,SUBLING,SUPERFIC	\$ 460.00
41000	DRAIN MOUTH LESION, LINGUAL	\$ 417.00
40845	RECONSTRUCTION OF MOUTH, COMPLEX	\$ 4,565.00
40844	RECONSTRUCTION OF MOUTH	\$ 4,574.00
40843	RECONSTRUCTION OF POSTERIOR MOUTH	\$ 3,398.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
40842	RECONSTRUCTION OF POSTERIOR MOUTH	\$ 2,616.00
40840	RECONSTRUCTION OF ANTERIOR MOUTH	\$ 2,364.00
40831	REPAIR MOUTH LACERATION	\$ 882.00
40830	REPAIR MOUTH LACERATION	\$ 645.00
40820	TREATMENT OF MOUTH LESION/SCAR	\$ 637.00
40819	EXCISE LIP OR CHEEK FOLD	\$ 882.00
40818	EXCISE ORAL MUCOSA FOR GRAFT, DONOR	\$ 1,016.00
40816	EXCISE/REPAIR MOUTH LESION, COMPLX	\$ 1,169.00
40814	EXCISE/REPAIR MOUTH LESION, COMPLX	\$ 1,131.00
40812	EXCISE/REPAIR MOUTH LESION, SIMPLE	\$ 731.00
40810	EXCISION OF MOUTH LESION	\$ 472.00
40808	BIOPSY OF MOUTH	\$ 397.00
40806	INCISION OF LIP FOLD	\$ 123.00
40805	REMOVE FOREIGN BODY, MOUTH, COMPL	\$ 836.00
40804	REMOVE FOREIGN BODY, MOUTH, SIMPLE	\$ 445.00
40801	DRAIN MOUTH LESION, COMPLICATED	\$ 813.00
40800	DRAINAGE OF MOUTH LESION, SIMPLE	\$ 483.00
40761	REPAIR CLEFT LIP/NASAL DEFORMITY	\$ 4,211.00
40720	REPAIR CLEFT LIP/NASAL DEFORMITY	\$ 3,989.00
40702	REPAIR CLEFT LIP/NASAL DEFORMITY	\$ 3,886.00
40701	REPAIR CLEFT LIP/NASAL DEFORMITY	\$ 4,632.00
40700	REPAIR CLEFT LIP/NASAL DEFORMITY	\$ 3,908.00
40654	REPAIR LIP, OVER 1/2 OR COMPLEX	\$ 1,601.00
40652	REPAIR LIP, UP TO 1/2	\$ 1,357.00
40650	REPAIR LIP VERMILION	\$ 1,175.00
40530	PARTIAL REMOVAL OF LIP	\$ 1,512.00
40527	RECONSTRUCT LIP W/CROSS LIP FLAP	\$ 2,324.00
40525	RECONSTRUCT LIP W/LOCAL FLAP	\$ 2,099.00
40520	PARTIAL EXCISION OF LIP, V-EXCISION	\$ 1,340.00
40510	PARTIAL EXCISION OF LIP, WEDGE	\$ 1,320.00
40500	LIP SHAVE, VERMILION	\$ 1,359.00
40490	BIOPSY OF LIP	\$ 268.00
39561	NULL	\$ 4,937.00
39560	NULL	\$ 3,175.00
39545	REVISION OF DIAPHRAGM, EVENTRATION	\$ 3,563.00
39541	REPAIR TRAUMATIC DIAPHRAGM HERNIA	\$ 3,782.00
39540	REPAIR TRAUMATIC DIAPHRAGM HERNIA	\$ 3,496.00
39503	REPAIR DIAPHRAGM HERNIA, NEWBORN	\$ 24,585.00
39501	REPAIR DIAPHRAGM LACERATION	\$ 3,413.00
39402	with lymph node biopsy(ies) (eg, lu	\$ 1,618.00
39401	Mediastinoscopy;includes biopsy(ies)	\$ 1,238.00
39220	RESECT MEDIASTINAL TUMOR	\$ 4,511.00
39200	RESECT MEDIASTINAL CYST	\$ 3,487.00
39010	EXPLORATION OF CHEST, TRANSTHORACIC	\$ 3,138.00
39000	EXPLORATION OF CHEST, CERVICAL	\$ 1,959.00
38900	IO MAP OF SENT LYMPH NODE	\$ 562.00
38794	ACCESS THORACIC LYMPH DUCT, CANNULA	\$ 1,083.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
38792	RA TRACER ID OF SENTINL NODE	\$ 127.00
38790	INJECTION FOR LYMPHATIC X-RAY	\$ 311.00
38780	REMOVAL OF ABDOMEN LYMPH NODES	\$ 3,986.00
38770	REMOVAL OF PELVIS LYMPH NODES	\$ 3,049.00
38765	REMOVAL OF GROIN LYMPH NODES	\$ 5,135.00
38760	REMOVAL OF GROIN LYMPH NODES	\$ 3,312.00
38747	REMOVE ABDOMINAL LYMPH NODES	\$ 1,080.00
38746	REMOVE THORACIC LYMPH NODES	\$ 864.00
38745	REMOVE ARMPIT LYMPH NODES, COMPLETE	\$ 3,533.00
38740	REMOVE ARMPIT LYMPH NODES, SUPERFIC	\$ 2,806.00
38724	REMOVAL OF NECK LYMPH NODES	\$ 5,473.00
38720	REMOVAL OF NECK LYMPH NODES	\$ 5,122.00
38700	REMOVAL OF NECK LYMPH NODES	\$ 3,042.00
38572	NULL	\$ 3,487.00
38571	LAP SURG; W/ BIL TOT PELV LYMPADEN	\$ 2,490.00
38570	NULL	\$ 1,974.00
38564	REMOVE ABDOMEN LYMPH NODES	\$ 2,784.00
38562	REMOVE PELVIC LYMPH NODES	\$ 2,736.00
38555	REMOVE NECK/ARMPIT LESION, COMPLEX	\$ 4,095.00
38550	REMOVE NECK/ARMPIT LESION, SIMPLE	\$ 2,054.00
38542	EXPLORE DEEP NODE(S), NECK	\$ 1,976.00
38530	BIOPSY/REMOVE LYMPH NODE(S),MAMMARY	\$ 2,222.00
38525	BIOPSY/REMOVE LYMPH NODE(S), ARMPIT	\$ 1,750.00
38520	BIOPSY/REMOVE LYMPH NODE(S), NECK	\$ 1,825.00
38510	BIOPSY/REMOVE LYMPH NODE(S), NECK	\$ 1,629.00
38505	NEEDLE BIOPSY/REMOVE LYMPH NODE(S)	\$ 259.00
38500	BIOPSY/REMOVE LYMPH NODE(S)	\$ 1,013.00
38382	THORACIC DUCT SURGERY, ABDOMINAL	\$ 2,703.00
38381	THORACIC DUCT SURGERY, THORACIC	\$ 3,208.00
38380	THORACIC DUCT SURGERY, CERVICAL	\$ 2,174.00
38308	LYMPH CHANNEL SURGERY	\$ 1,802.00
38305	DRAIN LYMPH NODE LESION, EXTENSIVE	\$ 1,948.00
38300	DRAIN LYMPH NODE LESION, SIMPLE	\$ 808.00
38243	DRAIN LYMPH NODE LESION, SIMPLE	\$ 437.00
38242	Bone marrow; allogeneic	\$ 455.00
38241	BONE MARROW/STEMCELL XPLNT, AUTOLOG	\$ 632.00
38240	BONE MARROW/STEM CELL XPLANT, ALLOG	\$ 853.00
38232	BONE MARROW HARVEST AUTOLOG	\$ 766.00
38230	BONE MARROW HARVEST ALLOGEN	\$ 802.00
38221	BONE MARROW BIOPSY	\$ 251.00
38220	BONE MARROW ASPIRATION	\$ 266.00
38206	Blood-derived hematop; autologous	\$ 304.00
38205	Blood-derived hemato.;allogenic	\$ 305.00
38200	INJECTION FOR SPLEEN X-RAY	\$ 486.00
38120	Laparoscopy, surgical, splenectomy	\$ 4,247.00
38115	REPAIR OF RUPTURED SPLEEN	\$ 5,128.00
38102	REMOVAL OF SPLEEN, TOTAL, EN BLOC	\$ 1,051.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
38101	REMOVAL OF SPLEEN, PARTIAL	\$ 4,725.00
38100	REMOVAL OF SPLEEN, TOTAL	\$ 4,650.00
37790	PENILE VENOUS OCCLUSIVE PROCEDURE	\$ 1,815.00
37788	REVASCULARIZE PENIS	\$ 4,723.00
37785	FOLLOWUP SURGERY, VARICOSE VEINS	\$ 1,025.00
37780	REVISION OF LEG VEIN	\$ 939.00
37766	STAB PHLEBECTOMY OF VARICOSE VEINS	\$ 2,089.00
37765	STAB PHLEBECTOMY OF VARICOSE VEINS	\$ 1,712.00
37761	LIGATE LEG VEINS OPEN	\$ 2,175.00
37760	REVISION OF LEG VEINS	\$ 2,515.00
37735	REMOVAL OF LEG VEINS/ULCER	\$ 2,356.00
37722	LIGA DIV & STRIP LONG SAPH VEIN	\$ 1,904.00
37718	LIGAT, DIVI & STRIP SHOR SAPHE VEIN	\$ 1,693.00
37700	REVISION OF LEG VEIN	\$ 978.00
37660	LIGATION OF COMMON ILIAC VEINS	\$ 5,336.00
37650	LIGATION OF FEMORAL VEIN	\$ 1,855.00
37619	LIGATION OF INF VENA CAVA	\$ 7,026.00
37618	LIGATION OF EXTREMITY ARTERY	\$ 1,543.00
37617	LIGATION OF ABDOMEN ARTERY	\$ 5,315.00
37616	LIGATION OF CHEST ARTERY	\$ 4,421.00
37615	LIGATION OF NECK ARTERY	\$ 2,118.00
37609	LIGATION/BIOPSY OF TEMPORAL ARTERY	\$ 806.00
37607	LIGATION OF ANGIOACCESS FISTULA	\$ 1,502.00
37606	LIGATION OF INTERNAL CAROTID ARTERY	\$ 2,986.00
37605	LIGATION OF INTERNAL CAROTID ARTERY	\$ 3,004.00
37600	LIGATION OF EXTERNAL CAROTID ARTERY	\$ 2,831.00
37565	LIGATION OF INTERNAL JUGULAR VEIN	\$ 2,840.00
37500	Vascular endoscopy, surgical, w/lig	\$ 2,569.00
37252	Intravascular ultrasound (noncorona	\$ 361.00
37244	VASCULAR EMBOLIZATION OR OCCLUSION	\$ 2,448.00
37243	VASCULAR EMBOLIZE/OCCLUDE ORGAN TUM	\$ 2,063.00
37242	VASCULAR EMBOLIZATION OR OCCLUSION	\$ 1,818.00
37241	VASCULAR EMBOLIZATION OR OCCLUSION	\$ 1,684.00
37239	OPEN/PERQ PLCEMNT INTRAVASC SAME EA	\$ 606.00
37238	OPEN/PERQ PLCEMNT INTRAVASC SAME1ST	\$ 1,198.00
37237	VASCULAR EMBOLIZATION OR OCCLUSION	\$ 852.00
37236	VASCULAR EMBOLIZATION OR OCCLUSION	\$ 1,774.00
37235	TIB/PER REVASC STNT & ATHER	\$ 1,605.00
37234	REVSC OPN/PRQ TIB/PERO STENT	\$ 1,144.00
37233	TIBPER REVASC W/ATHER ADD-ON	\$ 1,298.00
37232	TIB/PER REVASC ADD-ON	\$ 796.00
37231	TIB/PER REVASC STENT & ATHER	\$ 3,024.00
37230	TIB/PER REVASC W/STENT	\$ 2,802.00
37229	TIB/PER REVASC W/ATHER	\$ 2,806.00
37228	TIB/PER REVASC W/TLA	\$ 2,175.00
37227	FEM/POPL REVASC STNT & ATHER	\$ 2,910.00
37226	FEM/POPL REVASC W/STENT	\$ 2,090.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
37225	FEM/POPL REVAS W/ATHER	\$ 2,417.00
37224	FEM/POPL REVAS W/TLA	\$ 1,785.00
37223	ILIAC REVASC W/STENT ADD-ON	\$ 855.00
37222	ILIAC REVASC ADD-ON	\$ 750.00
37221	ILIAC REVASC W/STENT	\$ 1,985.00
37220	ILIAC REVASC	\$ 1,610.00
37218	ILIAC REVASCices	\$ 3,274.00
37217	ILIAC REVASCices	\$ 4,363.00
37215	TRANCATH PLCMNT STENT CER ARTRY,DEP	\$ 4,036.00
37214	CESSATION THROMBOLYTIC THRPY W/CATH	\$ 476.00
37213	THROMBOLYSIS ART/VENOUS INFSN W/IMA	\$ 896.00
37212	TRANCATH PLCMNT STENT CER ARTRY,DEP	\$ 1,304.00
37211	TRANCATH PLCMNT STENT CER ARTRY,DEP	\$ 1,506.00
37200	TRANSCATHETER BIOPSY	\$ 798.00
37197	PRQ TRANSCATHETER RTRVL INTRVAS FB	\$ 1,156.00
37195	THROMBOLYSIS, CEREBRAL, IV INFUSION	\$ 1,339.00
37193	REM ENDOVAS VENA CAVA FILTER	\$ 1,325.00
37192	REDO ENDOVAS VENA CAVA FILTR	\$ 1,408.00
37191	INS ENDOVAS VENA CAVA FILTR	\$ 848.00
37188	PERC TRANSLUM MECH THROMBE VEIN REP	\$ 1,077.00
37187	PERCU TRANSLUMIN MECH THROMBEC VEIN	\$ 1,506.00
37186	SEC PERCUT TRANSLUMINAL THROMBECTOM	\$ 963.00
37185	PRIMARY MECANICAL THROMBECTOMY, II	\$ 650.00
37184	PRIMARY PERCU TRANS MEC THRM BECTOMY	\$ 1,722.00
37183	Revision of transvenous intrahepat.	\$ 1,364.00
37182	Insert of transvenous intrahepatic	\$ 2,999.00
37181	SPLICE DISTAL SPLEEN/KIDNEY VEINS	\$ 9,439.00
37180	SPLICE PROXIMAL SPLEEN/KIDNEY VEINS	\$ 8,642.00
37160	SPLICE CAVAL/MESENTERIC VEINS	\$ 8,987.00
37145	SPLICE KIDNEY/LIVER VEINS	\$ 8,748.00
37140	SPLICE PORTAL/CAVAL VEINS	\$ 9,439.00
36901	Intro cath dialysis ciru	\$ 645.00
36861	EXTRN CANNULA DECLOT W/BALLOON CATH	\$ 567.00
36860	EXTRN CANNULA DECLOT, W/O BALLOON	\$ 452.00
36838	DIST REVASCULAR INTER	\$ 4,654.00
36835	INSERT OF THOMAS SHUNT	\$ 1,905.00
36833	REVISE, ARTERIOVEN FISTULA W/GRAFT	\$ 3,282.00
36832	REVISE, ARTERIOVEN FISTULA W/O GRFT	\$ 3,057.00
36831	REMOVE ARTERIOVENOUS FISTULA	\$ 2,494.00
36830	ARTERY-VEIN GRAFT, NONAUTOGENOUS	\$ 2,706.00
36825	ARTERY-VEIN GRAFT, AUTOGENOUS	\$ 3,219.00
36823	INSERTION CANNULA, ISOL REG CHEMO	\$ 5,658.00
36821	ARTERY-VEIN FUSION, DIRECT (CIMINO)	\$ 2,690.00
36820	ART-VEN ANAS,OP;UPP ARM BAS VEIN TR	\$ 2,951.00
36819	AV ANASTOMOSIS, UPPER ARM BAS VEIN	\$ 2,964.00
36818	AV ANASTOMOSIS, UPPER ARM CEPH VEIN	\$ 2,801.00
36815	INSERT CANNULA, ARTERY-VEIN, EXTERN	\$ 548.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
36810	INSERT CANNULA, ARTERY-VEIN, EXTERN	\$ 797.00
36800	INSERT CANNULA, VEIN-VEIN	\$ 463.00
36680	INSERT NEEDLE INTO BONE CAVITY	\$ 237.00
36660	INSERT UMBILICAL ARTERY CATHETER	\$ 245.00
36640	INSERT ARTERY CATHETER, CUTDOWN	\$ 416.00
36625	INSERT ARTERY CATHETER, CUTDOWN	\$ 405.00
36620	INSERT ARTERY CATHETER THRU SKIN	\$ 162.00
36600	WITHDRAW ARTERIAL BLOOD, DIAGNOSTIC	\$ 57.00
36598	CONTRAST INJECTION, EXIST CVAD	\$ 138.00
36597	REPOSIT OF PREV CEN VEN CATH	\$ 223.00
36596	MECHANICAL REMOVAL INTRACATH	\$ 164.00
36595	MECHANICL REMOVAL PREICATH OBSTR	\$ 675.00
36593	DELOT VASCULAR DEVICE	\$ 120.00
36592	COLLECT BLOOD FROM PICC	\$ 105.00
36591	DRAW BLOOD OFF VENOUS DEVICE	\$ 93.00
36590	REMOVAL VENOUS DEVICE	\$ 738.00
36589	REMOVAL CENTRAL CATH	\$ 522.00
36585	REPLACE COMPLEE PERIPH CENT VENOUS	\$ 1,052.00
36584	REPLACE PERIPHERALLY INSERT	\$ 220.00
36583	REPLACE COMPLETE VENOUS ACCESS	\$ 1,320.00
36582	REPLACE COMPLETE VENOUS ACCESS DEVI	\$ 1,120.00
36581	REPLACE COMPLETE VENOUS CATH	\$ 688.00
36580	REPLACE COMPLETE VENOUS CATH	\$ 247.00
36578	REPLACE CATH VENOUS ACCESS DEVICE	\$ 787.00
36576	REPAIR VENOUS ACCESS DEVICE	\$ 722.00
36575	REPAIR VENOUS ACCESS CATH	\$ 132.00
36571	INSERT PERIP VENOUS DEVICE 5Y PLUS	\$ 1,220.00
36570	INSERT PERIP VENOUS DEVICE 5Y PLUS	\$ 1,333.00
36569	INSERT PERIPH VENOUS CATH 5Y PLUS	\$ 347.00
36568	INSERT PERIPHERALLY VEN CATH UN 5Y	\$ 341.00
36566	INSERT VENOUS ACCESS DEVICE TWO SEP	\$ 1,416.00
36565	INSERT VENOUS DEVICE	\$ 1,332.00
36563	INSERT VENOUS ACCESS DEVICE W/PUMP	\$ 1,463.00
36561	INSERT VENOUS ACCESS DEVICE 5Y PLUS	\$ 1,296.00
36560	INSERT VENOUS ACCESS DEVICE UNDER 5	\$ 1,537.00
36558	INSERT VENOUS CATH 5 YEARS OR OLDER	\$ 987.00
36557	INSERT VENOUS CATH UNDER 5 YEARS OL	\$ 1,282.00
36556	INSERT CENT VENOUS CATH 5 YEARS PLU	\$ 320.00
36555	INSERT NON TUNNEL CENT VENOUS CATH	\$ 305.00
36522	PHOTOPHERESIS	\$ 353.00
36516	THER AP;W/EXTRACOR SEL ABS/SEL FIL	\$ 325.00
36514	THERAPEUTIC APHERESIS;PLASMA PHERES	\$ 348.00
36513	THERAPEUTIC APHERESIS;FOR PLATELETS	\$ 409.00
36512	THERAPEUTIC APHERESIS;FOR RBC	\$ 390.00
36511	THERAPEUTIC APHERESIS;FOR WBC	\$ 394.00
36510	INSERT CATHETER, UMBILICAL VEIN	\$ 194.00
36500	INSERTION OF CATHETER, VEIN	\$ 709.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
36481	INSERTION OF CATHETER, PORTAL VEIN	\$ 1,221.00
36479	ENDOVENOUS ABLATION, LASER, 2ND VEI	\$ 540.00
36478	ENDOVENOUS ABLATION , LASER VEIN	\$ 1,094.00
36476	ENDOVEN ABLATION, 2ND VEIN TREATED	\$ 537.00
36475	ENDOVEN ABLATION THERPY, 1ST VEIN	\$ 1,106.00
36471	INJECTION THERAPY OF VEINS	\$ 301.00
36470	INJECTION THERAPY OF VEIN	\$ 148.00
36460	TRANSFUSION SERVICE, FETAL	\$ 1,343.00
36455	EXCHANGE TRANSFUSION SERVICE	\$ 512.00
36450	EXCHANGE TRANSFUSION SERV, NEWBORN	\$ 614.00
36440	BLOOD TRANSFUSION SERVICE, PUSH	\$ 185.00
36430	BLOOD TRANSFUSION SERVICE	\$ 133.00
36425	DRAWING BLOOD, CUTDOWN, AGE 1+	\$ 149.00
36420	DRAWING BLOOD, CUTDOWN, UNDER AGE 1	\$ 192.00
36410	DRAWING BLOOD, OVER AGE 3	\$ 35.00
36406	DRAWING BLOOD, UNDER AGE 3	\$ 31.00
36405	DRAWING BLOOD, UNDER AGE 3	\$ 55.00
36400	DRAWING BLOOD, UNDER AGE 3	\$ 68.00
36262	REMOVAL OF ARTERY INFUSION PUMP	\$ 1,233.00
36261	REVISION OF ARTERY INFUSION PUMP	\$ 1,619.00
36260	INSERTION OF ARTERY INFUSION PUMP	\$ 2,620.00
36254	INS CATH REN ART 2ND+ BILAT	\$ 1,642.00
36253	INS CATH REN ART 2ND+ UNILAT	\$ 1,330.00
36252	INS CATH REN ART 1ST BILAT	\$ 1,433.00
36251	INS CATH REN ART 1ST UNILAT	\$ 1,007.00
36248	INS CATH ABD/L-EXT ART ADDL	\$ 181.00
36247	INS CATH ABD/L-EXT ART 3RD	\$ 1,173.00
36246	INS CATH ABD/L-EXT ART 2ND	\$ 1,000.00
36245	PLACE CATHETER IN ARTERIES	\$ 922.00
36228	SLCTV CATH INTRCRNL BRNCH ANGIO INT	\$ 980.00
36227	SLCTV CATH XTRNL CAROTID ANGIO XTRN	\$ 477.00
36226	SLCTV CATH VERTEBRAL ART ANGIO VERT	\$ 1,433.00
36225	SLCTV CATH SUBCLAVIAN ART ANGIO VER	\$ 1,271.00
36224	SLCTV CATH INTRNL CAROTID ART ANGIO	\$ 1,462.00
36223	SLCTV CATH CAROTID/INNOM ART ANGIO	\$ 1,271.00
36222	PLACE CATHETER IN ARTERIES	\$ 1,131.00
36221	PLACE CATHETER IN ARTERIES	\$ 802.00
36218	PLACE CATHETER IN ARTERIES	\$ 202.00
36217	PLACE CATHETER IN ARTERIES	\$ 1,294.00
36216	PLACE CATHETER IN ARTERIES	\$ 1,066.00
36215	PLACE CATHETER IN ARTERIES	\$ 800.00
36200	PLACE NEEDLE/CATHETER IN AORTA	\$ 561.00
36160	PLACE NEEDLE/CATHETER IN AORTA	\$ 470.00
36140	PLACE NEEDLE/CATHETER IN ARTERY	\$ 355.00
36100	PLACE NEEDLE/CATHETER IN ARTERY	\$ 615.00
36015	PLACE CATHETER IN ARTERY	\$ 645.00
36014	PLACE CATHETER IN ARTERY	\$ 582.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
36013	PLACE CATHETER IN ARTERY	\$ 454.00
36012	PLACE CATHETER IN VEIN	\$ 669.00
36011	PLACE CATHETER IN VEIN	\$ 606.00
36010	PLACE CATHETER IN VENA CAVA	\$ 429.00
36005	INJECTION FOR VENOGRAPHY	\$ 181.00
36002	INJ PROCEEDS PERC TREAT EXTR PSEUDO	\$ 400.00
35907	EXCISE INFECTED GRAFT, ABDOMEN	\$ 7,759.00
35905	EXCISE INFECTED GRAFT, THORAX	\$ 7,172.00
35903	EXCISE INFECTED GRAFT, EXTREMITY	\$ 2,279.00
35901	EXCISE INFECTED GRAFT, NECK	\$ 1,902.00
35884	RVSN FMRL ANSTMSIS AUTOGENS VEN GRF	\$ 5,057.00
35883	RVSN FEMRL ANASTMSIS OF SYNTHC BYPS	\$ 4,886.00
35881	REVISION LOW EXT BYPASS, W SEG VEIN	\$ 4,152.00
35879	REVISION LOW EXT ART BYPASS, ANGIO	\$ 3,761.00
35876	REMOVE CLOT IN GRAFT W/REVISION	\$ 3,839.00
35875	REMOVE CLOT IN GRAFT	\$ 2,412.00
35870	REPAIR VESSEL GRAFT DEFECT	\$ 5,073.00
35860	EXPLORE EXTREMITY VESSELS, POST-OP	\$ 3,385.00
35840	EXPLORE ABDOMINAL VESSELS, POST-OP	\$ 4,820.00
35820	EXPLORE CHEST VESSELS, POST-OP	\$ 8,073.00
35800	EXPLORE NECK VESSELS, POST-OP	\$ 2,826.00
35701	EXPLORATION OF CAROTID ARTERY	\$ 2,137.00
35700	REOPERATION, ARTERY BYPASS GRAFT	\$ 623.00
35697	REIMPLANT VISCERAL TO INFRARENAL AO	\$ 600.00
35695	TRANSPOSE, CAROTID-SUBCLAVIAN	\$ 4,176.00
35694	TRANSPOSE, VERTEBRAL-CAROTID	\$ 4,022.00
35693	TRANSPOSE, VERTEBRAL-SUBCLAVIAN	\$ 3,386.00
35691	TRANSPOSE, VERTEBRAL-CAROTID	\$ 3,849.00
35686	CREATION OF AV FISTULA LWR EXT SURG	\$ 657.00
35685	PLCMNT VEIN PATCH GRAFT, CONDUIT	\$ 811.00
35683	BYPASS GRAFT, AUTOGENOUS COMPOSITE	\$ 1,671.00
35682	BYPASS GRAFT, AUTOGENOUS COMPOSITE	\$ 1,443.00
35681	BYPASS GRAFT COMPOSITE PROST & VEIN	\$ 331.00
35671	BYPASS GRAFT, LEG ARTERIES	\$ 4,557.00
35666	BYPASS GRAFT, LEG ARTERIES	\$ 5,166.00
35665	ARTERY BYPASS GRAFT, ILIOFEMORAL	\$ 4,770.00
35663	ARTERY BYPASS GRAFT, ILIOILIAC	\$ 4,956.00
35661	ARTERY BYPASS GRAFT,FEMORAL-FEMORAL	\$ 4,399.00
35656	ARTERY BYPASS GRAFT,FEMOR-POPLITEAL	\$ 4,386.00
35654	ARTERY BYPASS GRAFT, AXILL-FEM-FEM	\$ 5,570.00
35650	ARTERY BYPASS GRAFT, AXILL-AXILLARY	\$ 4,200.00
35647	BYPASS GRAFT,OTH THAN VEIN;AORTOFEM	\$ 6,291.00
35646	ARTERY BYPASS GRAFT, AORTOFEM-BIFEM	\$ 6,976.00
35645	ARTERY BYPASS GRAFT, SUBCLAV-VERTEB	\$ 3,852.00
35642	ARTERY BYPASS GRAFT, CAROTID-VERTEB	\$ 4,007.00
35638	BYPAS GRFT OTHR THAN VEN AORTOBI-IL	\$ 7,085.00
35637	BYPAS GRFT W OTHR THN VEIN AORTOILC	\$ 6,772.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
35636	ARTERY BYPASS GRAFT, SPLENORENAL	\$ 6,506.00
35634	NULL	\$ 7,220.00
35633	NULL	\$ 8,087.00
35632	NULL	\$ 7,379.00
35631	ARTERY BYPASS GRAFT,AORTCEL/MES/REN	\$ 7,542.00
35626	ARTERY BYPASS GRAFT,AORTSUBCL/CAROT	\$ 6,404.00
35623	ARTERY BYPASS GRAFT, AXILL-POPLIT	\$ 5,352.00
35621	ARTERY BYPASS GRAFT, AXILL-FEMORAL	\$ 4,460.00
35616	ARTERY BYPASS GRAFT, SUBCLAV-AXILLA	\$ 4,495.00
35612	ARTERY BYPASS GRAFT,SUBCLAV-SUBCLAV	\$ 4,245.00
35606	ARTERY BYPASS GRAFT,CAROTID-SUBCLAV	\$ 4,762.00
35601	ARTERY BYPASS GRAFT, CAROTID	\$ 5,695.00
35600	HARVEST OF UPPER EXTREMITY ARTERY	\$ 1,034.00
35587	VEIN BYPASS GRAFT, POPLIT-TIB/PERON	\$ 5,555.00
35585	VEIN BYPASS GRAFT, FEM-TIBIAL/PERON	\$ 6,823.00
35583	VEIN BYPASS GRAFT,FEMORAL-POPLITEAL	\$ 5,880.00
35572	HARVEST OF FEMPOP VEIN, ONE SEGMENT	\$ 1,401.00
35571	ARTERY BYPASS GRAFT, DISTAL VESSELS	\$ 5,394.00
35570	NULL	\$ 6,008.00
35566	ARTERY BYPASS GRAFT, DISTAL VESSELS	\$ 6,803.00
35565	ARTERY BYPASS GRAFT, ILIOFEMORAL	\$ 5,318.00
35563	ARTERY BYPASS GRAFT, ILIOILIAC	\$ 5,391.00
35560	ARTERY BYPASS GRAFT, AORTORENAL	\$ 6,955.00
35558	ARTERY BYPASS GRAFT, FEMOR-FEMORAL	\$ 4,988.00
35556	ARTERY BYPASS GRAFT,FEMOR-POPLITEAL	\$ 5,694.00
35540	BYPASS GRFT W VEIN AORTOBIFEMORAL	\$ 9,996.00
35539	BYPASS GRFT W VEIN AORTOFEMORAL	\$ 8,964.00
35538	BYPASS GRAFT AORTOBI-ILIAX	\$ 9,552.00
35537	BYPASS GRFT AUTOILIAC	\$ 8,520.00
35536	ARTERY BYPASS GRAFT, SPLENORENAL	\$ 6,899.00
35535	NULL	\$ 7,776.00
35533	ARTERY BYPASS GRAFT, AXILL-FEM-FEM	\$ 6,146.00
35531	ARTERY BYPASS GRAFT,AORTCEL/AORTMES	\$ 7,955.00
35526	ARTERY BYPASS GRAFT,AORTSUBCL/CAROT	\$ 6,942.00
35525	BYPASS GRAFT VEIN BRACHIAL BRACHIAL	\$ 4,613.00
35523	ARTERY BYPASS GRAFT	\$ 5,201.00
35522	BYPASS GRAFT VEIN AXILLARY BRACHIAL	\$ 4,951.00
35521	ARTERY BYPASS GRAFT, AXILLARY-FEMOR	\$ 4,996.00
35518	ARTERY BYPASS GRAFT,AXILLARY-AXILLA	\$ 4,658.00
35516	ARTERY BYPASS GRAFT, SUBCLAV-AXILLA	\$ 4,972.00
35515	ARTERY BYPASS GRAFT, SUBCLAV-VERTEB	\$ 5,405.00
35512	BYPASS GRAFT VEIN SUBCLAV BRACHIAL	\$ 4,915.00
35511	ARTERY BYPASS GRAFT,SUBCLAV-SUBCLAV	\$ 4,569.00
35510	BYPASS GRAFT VEIN CAROTID BRACHIAL	\$ 5,009.00
35509	ARTERY BYPASS GRAFT,CAROTID-CAROTID	\$ 5,765.00
35508	ARTERY BYPASS GRAFT, CAROTID-VERTEB	\$ 5,405.00
35506	ARTERY BYPASS GRAFT,CAROTID-SUBCLAV	\$ 5,195.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
35501	ARTERY BYPASS GRAFT, CAROTID	\$ 5,958.00
35500	HARVEST UPPER EXTREMITY VEIN, 1 SEG	\$ 1,302.00
35400	ANGIOSCOPY DURING INTERVENTION	\$ 604.00
35390	REOPERATION, CAROTID	\$ 652.00
35372	RECHANNEL ARTERY, DEEP FEMORAL	\$ 3,977.00
35371	RECHANNEL ARTERY, COMMON FEMORAL	\$ 3,317.00
35363	RECHANNEL ARTERY, AORTOFEMORAL	\$ 6,629.00
35361	RECHANNEL ARTERY, AORTOILIAC	\$ 6,211.00
35355	RECHANNEL ARTERY, ILIOFEMORAL	\$ 4,198.00
35351	RECHANNEL ARTERY, ILIAC	\$ 5,215.00
35341	RECHANNEL ARTERY,MESEN/CELIAC/RENAL	\$ 5,593.00
35331	RECHANNEL ARTERY, ABDOMINAL AORTA	\$ 5,904.00
35321	RECHANNEL ARTERY, AXILLARY-BRACHIAL	\$ 3,621.00
35311	RECHANNEL ARTERY, SUBCLAV/INNOMINAT	\$ 6,248.00
35306	THRMBENDARTRECTMY +NL TBL/PERNL ARTR	\$ 1,823.00
35305	THRMOENDARTRECTMY TBL/PERONAL ARTR	\$ 4,978.00
35304	THRMOENDARTRECTMY TBIOPERONAL ARTR	\$ 5,187.00
35303	THRMOENDARTRECTOMY(PATCH GRFT) PA	\$ 5,029.00
35302	THRMOENDARTRECTOMY(PATCH GRFT) SFA	\$ 4,557.00
35301	RECHANNEL ARTERY,CAROTID/VERT/SUBCL	\$ 4,600.00
35286	REPAIR/GRAFT BLOOD VESSEL, LOW EXTR	\$ 3,783.00
35281	REPAIR/GRAFT BLOOD VESSEL, BELLY	\$ 6,593.00
35276	REPAIR/GRAFT BLOOD VESSEL, CHEST	\$ 5,825.00
35271	REPAIR/GRAFT BLOOD VESSEL, CHEST	\$ 5,524.00
35266	REPAIR/GRAFT BLOOD VESSEL, UPP EXTR	\$ 3,489.00
35261	REPAIR/GRAFT BLOOD VESSEL, NECK	\$ 3,984.00
35256	REPAIR/GRAFT BLOOD VESSEL, LOW EXTR	\$ 4,148.00
35251	REPAIR/GRAFT BLOOD VESSEL, BELLY	\$ 7,047.00
35246	REPAIR/GRAFT BLOOD VESSEL, CHEST	\$ 6,266.00
35241	REPAIR/GRAFT BLOOD VESSEL, CHEST	\$ 5,739.00
35236	REPAIR/GRAFT BLOOD VESSEL, UPP EXTR	\$ 4,035.00
35231	REPAIR/GRAFT BLOOD VESSEL, NECK	\$ 4,915.00
35226	REPAIR BLOOD VESSEL, LOWER EXTREM	\$ 3,362.00
35221	REPAIR BLOOD VESSEL, BELLY	\$ 5,930.00
35216	REPAIR BLOOD VESSEL, CHEST	\$ 8,303.00
35211	REPAIR BLOOD VESSEL, CHEST W/BYPASS	\$ 5,564.00
35207	REPAIR BLOOD VESSEL, HAND/FINGER	\$ 2,916.00
35206	REPAIR BLOOD VESSEL, UPPER EXTREM	\$ 3,135.00
35201	REPAIR BLOOD VESSEL, NECK	\$ 3,787.00
35190	REPAIR ACQUIRED BLOOD VESSEL LESION	\$ 3,077.00
35189	REPAIR ACQUIRED BLOOD VESSEL LESION	\$ 6,157.00
35188	REPAIR ACQUIRED BLOOD VESSEL LESION	\$ 5,400.00
35184	REPAIR CONGEN BLOOD VESSEL LESION	\$ 3,924.00
35182	REPAIR CONGEN BLOOD VESSEL LESION	\$ 7,173.00
35180	REPAIR CONGEN BLOOD VESSEL LESION	\$ 3,516.00
35152	REPAIR ARTERY RUPTURE, KNEE	\$ 5,698.00
35151	REPAIR ARTERY DEFECT, KNEE	\$ 5,031.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
35142	REPAIR ARTERY RUPTURE, THIGH	\$ 5,398.00
35141	REPAIR ARTERY DEFECT, THIGH	\$ 4,474.00
35132	REPAIR ARTERY RUPTURE, GROIN	\$ 6,669.00
35131	REPAIR ARTERY DEFECT, GROIN	\$ 5,602.00
35122	REPAIR ARTERY RUPTURE, BELLY	\$ 7,720.00
35121	REPAIR ARTERY DEFECT, BELLY	\$ 6,468.00
35112	REPAIR ARTERY RUPTURE, SPLEEN	\$ 6,669.00
35111	REPAIR ARTERY DEFECT, SPLEEN	\$ 5,418.00
35103	REPAIR ARTERY RUPTURE, GROIN	\$ 9,116.00
35102	REPAIR ARTERY DEFECT, GROIN	\$ 7,650.00
35092	REPAIR ARTERY RUPTURE, ABDOM AORTA	\$ 10,615.00
35091	REPAIR ARTERY DEFECT, ABDOMEN AORTA	\$ 7,291.00
35082	REPAIR ARTERY RUPTURE, ABDOM AORTA	\$ 8,876.00
35081	REPAIR ARTERY DEFECT, ABDOMEN AORTA	\$ 7,040.00
35045	REPAIR ARM ARTERY DEFECT	\$ 3,953.00
35022	REPAIR ARTERY RUPTURE, CHEST	\$ 5,764.00
35021	REPAIR ARTERY DEFECT, CHEST	\$ 5,037.00
35013	REPAIR ARTERY RUPTURE, ARM	\$ 5,117.00
35011	REPAIR ARTERY DEFECT, ARM	\$ 4,068.00
35005	REPAIR ARTERY DEFECT, BACK	\$ 4,048.00
35002	REPAIR ARTERY RUPTURE, NECK	\$ 4,627.00
35001	REPAIR ARTERY DEFECT, NECK	\$ 4,551.00
34848	VISCER AND INFRARENAL ABDOM AORTA 4	\$ 11,062.00
34847	VISCER AND INFRARENAL ABDOM AORTA 3	\$ 9,964.00
34846	VISCER AND INFRARENAL ABDOM AORTA 2	\$ 8,866.00
34845	VISCER AND INFRARENAL ABDOM AORTA 1	\$ 7,771.00
34844	ENDOVASC VISCER AORTA REPR FENEST4+	\$ 7,533.00
34843	ENDOVASC VISCER AORTA REPAIR FENST3	\$ 6,435.00
34842	ENDOVASC VISCER AORTA REPAIR FENST2	\$ 5,337.00
34841	ENDOVASC VISCER AORTA REPIR FENEST1	\$ 4,239.00
34834	BRACHIAL ARTERY EXPOSURE, PROSTHESI	\$ 528.00
34833	ILIIAC ARTERY EXPOSURE , PROSTHESIS	\$ 1,645.00
34832	REPAIR, AORTIC ANEURY, BIFEMO PROS	\$ 7,739.00
34831	REPAIR ANEURYSM, AORTO PROSTHESIS	\$ 7,856.00
34830	REPIR INFRARENAL ANEURYSM, TUBE	\$ 7,192.00
34820	OPEN ILIAC ARTRY FOR DELIVERY	\$ 1,426.00
34813	PLACEMENT OF FEM-FEM PROSTHETIC GRF	\$ 968.00
34812	OPEN FEMORAL ARTERY EXPOSURE	\$ 840.00
34808	ENDOVASC PLCMNT ILIAC ARTERY DEVICE	\$ 827.00
34716	Open axillary/subclavian	\$ 1,501.00
34715	Open axillary/subclavian	\$ 1,221.00
34714	Open femoral artery expo	\$ 1,096.00
34713	Percutaneous access and	\$ 505.00
34712	Transcatheter delivery o	\$ 2,658.00
34711	Delayed placement of dis	\$ 1,211.00
34710	Delayed placement of dis	\$ 3,234.00
34709	Placement of extension p	\$ 1,315.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
34708	Endovascular repair of i	\$ 7,479.00
34707	Endovascular repair of i	\$ 4,689.00
34706	Endovasc rpr of infraren	\$ 9,355.00
34705	Endovascular repair of i	\$ 6,197.00
34704	Endovascular repair of i	\$ 9,271.00
34703	Endovascular repair of i	\$ 5,553.00
34702	Endovascular repair of i	\$ 7,523.00
34701	Endovascular repair of i	\$ 5,031.00
34530	FUSION OF LEG VEINS	\$ 3,815.00
34520	CROSS-OVER VEIN GRAFT	\$ 4,025.00
34510	TRANSPOSITION OF VEIN VALVE	\$ 4,156.00
34502	RECONSTRUCT VENA CAVA	\$ 6,161.00
34501	REVISE FEMORAL VEIN VALVE	\$ 3,619.00
34490	REMOVAL OF VEIN CLOT, ARM	\$ 2,568.00
34471	REMOVAL OF VEIN CLOT, NECK	\$ 4,390.00
34451	REMOVAL OF VEIN CLOT, ABDOMEN/LEG	\$ 5,855.00
34421	REMOVAL OF VEIN CLOT, LEG	\$ 2,994.00
34401	REMOVAL OF VEIN CLOT, ABDOMEN	\$ 5,805.00
34203	REMOVAL OF ARTERY CLOT, LEG	\$ 3,859.00
34201	REMOVAL OF ARTERY CLOT, LEG	\$ 4,168.00
34151	REMOVAL OF ARTERY CLOT, ABDOMEN	\$ 5,638.00
34111	REMOVAL OF ARTERY CLOT, ARM	\$ 2,431.00
34101	REMOVAL OF ARTERY CLOT, ARM	\$ 2,424.00
34051	REMOVAL OF ARTERY CLOT, CHEST	\$ 3,955.00
34001	REMOVAL OF ARTERY CLOT, NECK	\$ 3,729.00
33993	REPOSITION VAD W/IMAGING DIFFERENT	\$ 689.00
33992	REMOVAL PERCUTANEOUS VAD DIFFERENT	\$ 798.00
33991	INSJ PERQ VAD TRNSPTAL W/IMAGE ART&	\$ 2,497.00
33990	INSJ PERQ VAD W/IMAGING ARTERY ACCE	\$ 1,701.00
33989	RMVL LEFT HEART VENT BY THORACIC IN	\$ 1,987.00
33988	INSERT LEFT HEART VENT BY THORACIC	\$ 3,131.00
33987	ARTERY EXPOS/GRAFT ARTERY PERFUSION	\$ 838.00
33986	ECMO/ECLS RMVL OF CENTRAL CANNULA 6	\$ 2,110.00
33985	ENDOVAS GRFT PLCMNT, REPR ILIAC ART	\$ 2,066.00
33984	CARDIAC SURGERY PROCEDURE NEC	\$ 1,148.00
33983	REPLACE VAD INTRA W/BP	\$ 9,319.00
33982	REPLACE VAD INTRA W/O BP	\$ 7,875.00
33981	REPLACE VAD PUMP EXT	\$ 3,352.00
33980	REM-VEN ASS DEV,IMPL INTRACOR,SIN V	\$ 7,152.00
33979	INSER-VEN ASS DEV,IMPL INTRACOR,SIN	\$ 7,851.00
33978	REMOVE VENTRICULAR ASSIST DEVICE	\$ 5,341.00
33977	REMOVE VENTRICULAR ASSIST DEVICE	\$ 4,524.00
33976	IMPLANT VENTRICULAR ASSIST DEVICE	\$ 6,394.00
33975	IMPLANT VENTRICULAR ASSIST DEVICE	\$ 5,249.00
33974	REMOVE INTRA-AORTIC BALLOON ASSIST	\$ 3,545.00
33973	INSERT INTRA-AORTIC BALLOON ASSIST	\$ 2,053.00
33971	REMOVE AORTIC CIRCULATION ASSIST	\$ 2,809.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
33970	INSERT AORTIC CIRCULATION ASSIST	\$ 1,422.00
33969	INSERT AORTIC CIRCULATION ASSIST	\$ 1,097.00
33968	NULL	\$ 134.00
33967	INSER-INTRA AOR BALL ASS DEV,PERCUT	\$ 1,036.00
33966	ECMO/ECLS RMVL OF PRPH CANNULA PRQ	\$ 946.00
33965	ECMO/ECLS RMVL OF PERPH CANNULA PER	\$ 743.00
33964	ECMO/ECLS ECLS REPOS CENTRAL CNULA	\$ 1,987.00
33963	INSER-INTRA AOR BALL ASS DEV,PERCUT	\$ 1,883.00
33962	INSER-INTRA AOR BALL ASS DEV,PERCUT	\$ 943.00
33959	ECMO/ECLS REPOS PERPH CANNULA OPEN	\$ 943.00
33958	ECMO/ECLS REPOS PERPH CANNULA PRQ 6	\$ 743.00
33957	ECMO/ECLS REPOS PERIPH CANNULA PERQ	\$ 743.00
33956	ECMO/ECLS INSJ OF CENTRAL CANNULA 6	\$ 3,366.00
33955	ECMO/ECLS INSJ OF CENTRAL CANNULA B	\$ 3,343.00
33954	ECMO/ECLS INSJ OF PRPH CANNULA 6 YR	\$ 1,915.00
33953	ECMO/ECLS INSJ OF PRPH CANNULA BIRT	\$ 1,902.00
33952	ECMO/ECLS INSJ OF PRPH CANNULA 6 YR	\$ 1,715.00
33951	ECMO/ECLS INSJ OF PRPH CANNULA BIRT	\$ 1,709.00
33949	ECMO/ECLS DAILY MANAGEMENT EA DAY V	\$ 900.00
33948	ECMO/ECLS DAILY MANAGEMENT EACH DAY	\$ 921.00
33947	DEL2015INFLATE MIDDLE EAR CANAL24HR	\$ 1,367.00
33946	DEL2015INFLATE MIDDLE EAR CANAL24HR	\$ 1,222.00
33944	CADAVER DONOR HEART ALLOGRFT TRAPLA	\$ 1,192.00
33933	CADAVER DONOR, DISS ALLOGRT TRANSPL	\$ 1,192.00
33926	REPR PUL ARTY ARBOZATION, W CAR BYP	\$ 9,724.00
33925	REPIR PULMO ARTY ARBZTION, W/O BYPA	\$ 6,898.00
33924	REMOVE PULMONARY ARTERY SHUNT	\$ 1,152.00
33922	TRANSECT PULMONARY ARTERY W/BYPASS	\$ 5,562.00
33920	REPAIR PULMONARY ATRESIA	\$ 7,272.00
33917	REPAIR PULMONARY ARTERY STENOSIS	\$ 5,823.00
33916	PULMONARY ENDARTERECTOMY W/BYPASS	\$ 17,054.00
33915	PULMONARY ARTERY EMBOLECTOMY	\$ 5,514.00
33910	PULMONARY ARTERY EMBOLECTOMY	\$ 10,731.00
33891	BYPASS GRFT, OTHER THAN VEIN, REPR	\$ 3,952.00
33889	OPEN SUB-CAR ARTRY TRANSPOSITION	\$ 3,211.00
33886	PLCMNT DIST PROSTHESIS, DELAYED	\$ 3,855.00
33884	PLCMNT ADDTIONAL PROXIMAL EXTNSION	\$ 1,619.00
33883	PLCMNT PROSTHS ENDOVASC RPR DES AOR	\$ 4,485.00
33881	ENDOVASC REPR, NOT COVR LT SUB ARTY	\$ 6,217.00
33880	ENDOVASCULAR REPAIR, THORACIC AORTA	\$ 7,238.00
33877	REPAIR AORTIC ANEURYSM W/GRAFT	\$ 14,698.00
33875	DESCENDING THORACIC AORTA GRAFT	\$ 11,050.00
33864	ASCENDING AORTIC GRAFT	\$ 12,968.00
33863	ASCENDING AORTA GRAFT W/REPLACEMENT	\$ 12,692.00
33853	REPAIR SEPTAL DEFECT W/CP BYPASS	\$ 7,345.00
33852	REPAIR SEPTAL DEFECT	\$ 5,600.00
33851	REPAIR AORTA CONSTRICTION,W/GUSSET	\$ 5,089.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
33845	REPAIR AORTA CONSTRICTION, W/GRAFT	\$ 5,331.00
33840	REMOVE AORTA CONSTRICTION	\$ 4,951.00
33824	REPAIR PATENT DUCTUS ARTERIOSUS	\$ 4,721.00
33822	REPAIR PATENT DUCTUS ARTERIOSUS	\$ 4,081.00
33820	REPAIR PATENT DUCTUS ARTERIOSUS	\$ 3,870.00
33814	REPAIR SEPTAL DEFECT, W/BYPASS	\$ 6,095.00
33813	REPAIR SEPTAL DEFECT	\$ 4,957.00
33803	DIVIDE/RECONNECT ABNORMAL VESSEL	\$ 4,614.00
33802	DIVISION OF ABNORMAL VESSEL	\$ 4,329.00
33800	AORTIC SUSPENSION	\$ 3,951.00
33788	REVISE/REIMPLANT PULMONARY ARTERY	\$ 6,148.00
33786	REPAIR ARTERIAL TRUNK	\$ 9,159.00
33783	AORTIC ROOT TRANS W/REIMPLANTATION	\$ 14,085.00
33782	AORTIC ROOT TRANSLOC W/VENT SEPTAL	\$ 13,017.00
33781	REPAIR GREAT VESSELS DEFECT	\$ 9,313.00
33780	REPAIR GREAT VESSELS/SEPTAL DEFECTS	\$ 9,526.00
33779	REPAIR GREAT VESSELS DEFECT	\$ 9,359.00
33778	REPAIR GREAT VESSELS DEFECT	\$ 9,439.00
33777	REPAIR GREAT VESSELS DEFECT	\$ 7,595.00
33776	REPAIR GREAT VESSELS/SEPTAL DEFECTS	\$ 7,854.00
33775	REPAIR GREAT VESSELS DEFECT	\$ 7,429.00
33774	REPAIR GREAT VESSELS DEFECT	\$ 7,208.00
33771	REPAIR GREAT VESSEL TRANSPOSITION	\$ 8,771.00
33770	REPAIR GREAT VESSEL TRANSPOSITION	\$ 8,517.00
33768	ANASTOMOSIS, CAVOPULMONARY, 2ND SVC	\$ 1,679.00
33767	MAJOR VESSEL SHUNT (BIDIRECT GLENN)	\$ 5,698.00
33766	MAJOR VESSEL SHUNT (CLASSIC GLENN)	\$ 5,348.00
33764	MAJOR VESSEL SHUNT, CENTRAL W/GRAFT	\$ 5,263.00
33762	MAJOR VESSEL SHUNT (POTTS-SMITH)	\$ 5,138.00
33755	MAJOR VESSEL SHUNT (WATERSON)	\$ 5,263.00
33750	MAJOR VESSEL SHUNT (BLALOCK-TAUSSIG)	\$ 5,059.00
33737	REVISION OF HEART CHAMBER, OPEN	\$ 5,191.00
33736	REVISION OF HEART CHAMBER, W/BYPASS	\$ 5,626.00
33735	REVISION OF HEART CHAMBER, CLOSED	\$ 5,179.00
33732	REPAIR HEART-VEIN DEFECT	\$ 6,603.00
33730	REPAIR HEART-VEIN DEFECT(S)	\$ 8,045.00
33726	REPAIR OF PULMONARY VENOUS STENOSIS	\$ 8,162.00
33724	REPAIR OF Scimitar Syndrome	\$ 6,173.00
33722	AORTA-LEFT VENTRICLE TUNNEL REPAIR	\$ 6,528.00
33720	REPAIR OF HEART ANEURYSM, W/BYPASS	\$ 6,197.00
33710	REPAIR HEART FISTULA/SEPTAL DEFECT	\$ 8,237.00
33702	REPAIR HEART FISTULA, W/BYPASS	\$ 6,192.00
33697	COMPLETE REPAIR TETRALOGY OF FALLOT	\$ 8,258.00
33694	REPAIR TETRALOGY OF FALLOT W/PATCH	\$ 7,838.00
33692	REPAIR TETRALOGY OF FALLOT	\$ 7,865.00
33690	REINFORCE PULMONARY ARTERY	\$ 4,793.00
33688	REPAIR HEART SEPTUM DEFECT	\$ 7,577.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
33684	REPAIR HEART SEPTUM DEFECT	\$ 7,586.00
33681	REPAIR HEART SEPTUM DEFECT	\$ 7,373.00
33677	CLSR MULTI VSD W REMVL PULMNRV ARTR	\$ 8,449.00
33676	CLSR MULT VSD W PLMNRV VALVOTOMY	\$ 8,126.00
33675	CLOSURE OF MULTIPLE VSD	\$ 7,919.00
33670	REPAIR COMPLETE CARDIAC AV CANAL	\$ 7,936.00
33665	REPAIR INTERMED CARDIAC AV CANAL	\$ 7,687.00
33660	REPAIR INCOMPLETE CARDIAC AV CANAL	\$ 7,054.00
33647	REPAIR HEART SEPTUM DEFECTS	\$ 7,296.00
33645	REVISE HEART VEINS	\$ 6,949.00
33641	REPAIR HEART SEPTUM DEFECT,W/BYPASS	\$ 6,579.00
33622	REDO COMPL CARDIAC ANOMALY	\$ 13,854.00
33621	TRANSTHOR CATH FOR STENT	\$ 3,724.00
33620	APPLY R&L PULM ART BANDS	\$ 6,623.00
33619	REPAIR SINGLE VENTRICAL (NORWOOD)	\$ 10,988.00
33617	REPAIR HEART (MODIFIED FONTAN)	\$ 8,686.00
33615	REPAIR HEART (SIMPLE FONTAN)	\$ 8,010.00
33612	REPAIR DOUBLE OUTLET RT VENTRICLE	\$ 8,045.00
33611	REPAIR DOUBLE OUTLET RT VENTRICLE	\$ 7,838.00
33610	REPAIR HEART ANOMALY BY ENLARGEMENT	\$ 7,112.00
33608	REPAIR CARDIAC ANOMALY W/CONDUIT	\$ 7,216.00
33606	ANASTOMOSIS, PULMONARY ARTERY-AORTA	\$ 7,126.00
33602	CLOSURE OF SEMILUNAR VALVE	\$ 6,679.00
33600	CLOSURE OF ATRIOVENTRICULAR VALVE	\$ 6,879.00
33572	CORONARY ENDARTERECTOMY, OPEN	\$ 929.00
33548	SURG VENTRICUALR RESTORATION	\$ 11,903.00
33545	REPAIR OF DAMAGED HEART SEPTUM	\$ 12,356.00
33542	REMOVAL OF HEART LESION	\$ 10,561.00
33536	CABG, ARTERIAL, FOUR OR MORE	\$ 10,605.00
33535	CABG, ARTERIAL, THREE	\$ 9,843.00
33534	CABG, ARTERIAL, TWO	\$ 8,823.00
33533	CABG, ARTERIAL, SINGLE	\$ 7,506.00
33530	CORONARY ARTERY BYPASS, REOPERATE	\$ 2,120.00
33523	CABG, ARTERY-VEIN, SIX OR MORE	\$ 3,357.00
33522	CABG, ARTERY-VEIN, FIVE	\$ 2,952.00
33521	CABG, ARTERY-VEIN, FOUR	\$ 2,637.00
33519	CABG, ARTERY-VEIN, THREE	\$ 2,193.00
33518	CABG, ARTERY-VEIN, TWO	\$ 1,661.00
33517	CABG, ARTERY-VEIN, SINGLE	\$ 755.00
33516	CORONARY ARTERIES BYPASS, SIX/MORE	\$ 10,865.00
33514	CORONARY ARTERIES BYPASS, FIVE	\$ 10,499.00
33513	CORONARY ARTERIES BYPASS, FOUR	\$ 9,959.00
33512	CORONARY ARTERIES BYPASS, THREE	\$ 9,705.00
33511	CORONARY ARTERIES BYPASS, TWO	\$ 8,520.00
33510	CORONARY ARTERY BYPASS, SINGLE	\$ 7,762.00
33508	Endoscopy, surg.incl video-assisted	\$ 68.00
33507	REPAIR ANOMALOUS, AORTIC ORIGIN	\$ 6,918.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
33506	REPAIR CORONARY ARTERY, TRANSLOCATE	\$ 8,259.00
33505	REPAIR CORONARY ARTERY (TAKEUCHI)	\$ 8,304.00
33504	REPAIR CORONARY ARTERY, GRAFT/BYPAS	\$ 5,861.00
33503	REPAIR CORONARY ARTERY, GRAFT	\$ 5,296.00
33502	REPAIR CORONARY ARTERY, LIGATION	\$ 5,101.00
33501	REPAIR HEART VESSEL FISTULA	\$ 4,459.00
33500	REPAIR HEART VESSEL FISTULA/BYPASS	\$ 6,253.00
33496	REPAIR PROSTH VALVE DYSFUNC	\$ 6,663.00
33478	OUTFLOW TRACT AUGMENTATION (GUSSET)	\$ 6,294.00
33477	Transcatheter pulmonary valve impla	\$ 5,454.00
33476	RIGHT VENTRICULAR RESECTION	\$ 6,090.00
33475	REPLACE PULMONARY VALVE	\$ 9,345.00
33474	VALVOTOMY, PULMONARY, OPEN HEART	\$ 8,743.00
33471	VALVOTOMY, PULMONARY, CLOSED HEART	\$ 5,299.00
33470	VALVOTOMY, PULMONARY, CLOSED HEART	\$ 4,954.00
33468	REPOSITION TRICUSPID VALVE	\$ 9,860.00
33465	REPLACE TRICUSPID VALVE, W/BYPASS	\$ 11,058.00
33464	REPAIR TRICUSPID VALVE, W/RING	\$ 9,783.00
33463	REPAIR TRICUSPID VALVE	\$ 12,353.00
33460	VALVECTOMY, TRICUSPID, W/BYPASS	\$ 9,660.00
33430	REPLACE MITRAL VALVE W/BYPASS	\$ 11,247.00
33427	RECONSTRUCT MITRAL VALVE, RADICAL	\$ 9,793.00
33426	RECONSTRUCT MITRAL VALVE W/RING	\$ 9,555.00
33425	RECONSTRUCT MITRAL VALVE W/BYPASS	\$ 10,977.00
33422	VALVOTOMY, MITRAL, OPEN HEART	\$ 6,661.00
33420	VALVOTOMY, MITRAL, CLOSED HEART	\$ 5,801.00
33419	TCAT MITRAL VALVE REPAIR ADDL PROST	\$ 1,695.00
33418	VALVOTOMY, MITRAL, CLOSED HEART	\$ 7,184.00
33417	REPAIR AORTIC VALVE STRICTURE	\$ 6,677.00
33416	REVISE VENTRICLE MUSCLE	\$ 8,102.00
33415	REVISE SUBVALVULAR TISSUE	\$ 8,118.00
33414	REPAIR AORTIC VALVE, PATCH ENLARGE	\$ 8,633.00
33413	REPLACEMENT OF AORTIC VALVE (ROSS)	\$ 12,985.00
33412	REPLACEMENT OF AORTIC VALVE (KONNO)	\$ 12,690.00
33411	REPLACEMENT OF AORTIC VALVE	\$ 13,520.00
33410	NULL	\$ 10,215.00
33406	REPLACE AORTIC VALVE, W/BYPASS	\$ 11,583.00
33405	REPLACE AORTIC VALVE, W/BYPASS	\$ 9,110.00
33404	CONSTRUCT HEART-AORTA CONDUIT	\$ 7,002.00
33369	REPLACE AORTA VALVE W/BYP CNTRL ART	\$ 3,954.00
33368	REPLACE AORTIC VALVE W/BYP OPEN ART	\$ 2,996.00
33367	REPLACE AORTIC VALVE W/BYP PRQ ART/	\$ 2,542.00
33366	TRANSCATHETER TRANSAPICAL REPLACEMT	\$ 7,520.00
33365	REPLACE AORTIC VALVE OPEN TRANSAORT	\$ 6,957.00
33364	REPLACE AORTIC VALVE OPEN ILIAC ART	\$ 6,202.00
33363	REPLACE AORTIC VALVE OPEN AXILLRY A	\$ 5,992.00
33362	REPLACE AORTIC VALVE OPENFEMORAL AR	\$ 5,781.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
33361	Valvuloplasty aortic valv	\$ 5,294.00
33335	INSERT AORTA GRAFT W/CARDIO BYPASS	\$ 7,494.00
33330	INSERT AORTA GRAFT W/O SHUNT/BYPASS	\$ 5,696.00
33322	AORTA SUTURE REPAIR W/BYPASS	\$ 5,555.00
33321	AORTA SUTURE REPAIR W/SHUNT BYPASS	\$ 4,743.00
33320	AORTA SUTURE REPAIR W/O SHUNT	\$ 4,206.00
33315	EXPLORATORY HEART SURGERY W/BYPASS	\$ 7,675.00
33310	EXPLORATORY HEART SURGERY	\$ 4,665.00
33305	REPAIR HEART WOUND, W/BYPASS	\$ 16,549.00
33300	REPAIR HEART WOUND	\$ 9,859.00
33273	REPOS PREVIOUSLY IMPLANTED SUBQ IMP	\$ 1,594.00
33272	RMVL OF SUBQ IMPLANTABLE DEFIBRILLA	\$ 1,380.00
33271	VALVOTOMY, MITRAL, CLOSED HEART	\$ 1,815.00
33270	Tcat insj/rpl perm leadless pacema	\$ 2,253.00
33266	MAZE PROCEDURE W CARDIOPLMNRY BYPAS	\$ 7,397.00
33265	ENDSCPY MODFIED MAZE PRCDR W/O BYPS	\$ 5,436.00
33264	REMV&REPLC CVD GEN MULT LEAD	\$ 1,616.00
33263	REMV&REPLC CVD GEN DUAL LEAD	\$ 1,542.00
33262	REMV&REPLC CVD GEN SING LEAD	\$ 1,484.00
33261	ABLATE HEART DYSRHYTHM FOCUS/BYPASS	\$ 6,452.00
33259	ABLATE ATRIA W/BYPASS ADD-ON	\$ 3,359.00
33258	ABLATE ATRIA, X10SV, ADD-ON	\$ 2,590.00
33257	ABLATE ATRIA, LMTD, ADD-ON	\$ 2,315.00
33256	MAZE PROCDR W CARDIOPLMNRY BYPASS	\$ 7,751.00
33255	MAZE PROCDR W/O CARDIOPULMNRY BYPAS	\$ 6,508.00
33254	MODIFIED MAZE PROCEDURE	\$ 5,400.00
33251	ABLATE HEART DYSRHYTHM FOCUS/BYPASS	\$ 6,519.00
33250	ABLATE HEART DYSRHYTHM FOCUS	\$ 5,823.00
33249	NSERT PACE-DEFIB W/LEAD	\$ 3,656.00
33244	REMOVE ICD PULSE GENERATOR	\$ 3,451.00
33243	REMOVE ICD PULSE GEN BY THORACOTOMY	\$ 5,470.00
33241	REMOVE ICD PULSE GENERATOR ONLY	\$ 844.00
33240	INSRT PULSE GEN W/SINGL LEAD	\$ 1,454.00
33238	REMOVE ELECTRODE BY THORACOTOMY	\$ 3,739.00
33237	REMOVE ELECTRODE/THORACOTOMY, DUAL	\$ 3,331.00
33236	REMOVE ELECTRODE/THORACOTOMY, SNGL	\$ 3,106.00
33235	REMOVE PACEMAKER ELECTRODE, DUAL	\$ 2,537.00
33234	REMOVE PACEMAKER ELECTRODE, SINGLE	\$ 1,933.00
33233	REMOVE PACEMAKER PULSE GEN ONLY	\$ 909.00
33231	INSRT PULSE GEN W/MULT LEADS	\$ 1,601.00
33230	INSRT PULSE GEN W/DUAL LEADS	\$ 1,519.00
33229	REMV&REPLC PM GEN MULT LEADS	\$ 1,490.00
33228	REMV&REPLC PM GEN DUAL LEAD	\$ 1,412.00
33227	REMOVE&REPLACE PM GEN SINGL	\$ 1,348.00
33226	REPOS-PREV PL IMPL CAR VEN SYS ELEC	\$ 1,986.00
33225	Insert of pacing electrode, cardiac	\$ 1,883.00
33224	Insert of pacing electrode, cardiac	\$ 2,062.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
33223	REVISE/RELOCATE PACEMAKER POCKET	\$ 1,628.00
33222	REVISE/RELOCATE PACEMAKER POCKET	\$ 1,344.00
33221	INSERT PULSE GEN MULT LEADS	\$ 1,439.00
33220	REPAIR PACEMAKER ELECTRODE, DUAL CH	\$ 1,508.00
33218	REPAIR PACEMAKER ELECTRODE, SNGL CH	\$ 1,532.00
33217	INSERT/REVISE ELECTRODE, DUAL CHMBR	\$ 1,457.00
33216	INSERT/REVISE ELECTRODE, SNGL CHMBR	\$ 1,479.00
33215	REPOSITIONING PREV IMPLAN PACEMAKER	\$ 1,237.00
33214	IMPLANTED PACEMAKER SYSTEM UPGRADE	\$ 1,906.00
33213	INSERT/REPLACE PULSE GEN ONLY, DUAL	\$ 1,335.00
33212	INSERT PULSE GEN SNGL LEAD	\$ 1,278.00
33211	INSERT HEART ELECTRODE, DUAL CHAMBR	\$ 670.00
33210	INSERT ELECTRD/PM CATH SNGL	\$ 648.00
33208	INSRT HEART PM ATRIAL & VENT	\$ 2,080.00
33207	INSERT HEART PM VENTRICULAR	\$ 1,912.00
33206	INSERT HEART PM ATRIAL	\$ 1,808.00
33203	INSRTN EPICARDL ELCTRND ENDOSCPC APR	\$ 3,222.00
33202	INSRTN EPICARDIAL ELCTRND OPEN INCSN	\$ 3,079.00
33141	TRANMYOCARDIAL LASER, W OPEN CARDIA	\$ 530.00
33140	TRANMYOCARDIAL LASER/ THORACOTOMY.	\$ 6,247.00
33130	REMOVAL OF EXTERNAL CARDIAC TUMOR	\$ 5,465.00
33120	REMOVAL OF INTRACARDIAC TUMOR	\$ 8,409.00
33050	RESECT HEART SAC LESION	\$ 4,007.00
33031	PARTIAL REMOVAL HEART SAC, W/BYPASS	\$ 9,940.00
33030	PARTIAL REMOVAL OF HEART SAC	\$ 8,015.00
33025	INCISION OF HEART SAC FOR DRAINAGE	\$ 3,076.00
33020	INCISE HEART SAC, REMOVE OBJECT	\$ 3,388.00
32998	ABLTN TX RDCTN OF 1/>1 PULMONRY TMR	\$ 1,616.00
32997	NULL	\$ 1,228.00
32960	THERAPEUTIC PNEUMOTHORAX	\$ 328.00
32940	REVISION OF LUNG W/FILLING/PACKING	\$ 4,924.00
32906	REVISE/REPAIR CHEST, CLOSE FISTULA	\$ 6,602.00
32905	REVISE/REPAIR CHEST WALL	\$ 5,334.00
32900	PARTIAL REMOVAL OF RIB(S)	\$ 5,671.00
32856	CADAVER DONOR, LUNG TRANSPLNT, BILA	\$ 788.00
32855	CADAVER DONOR LUNG ALLOGRFT, BRONCH	\$ 788.00
32854	LUNG TRANSPLANT, DOUBLE W/BYPASS	\$ 19,672.00
32853	LUNG TRANSPLANT, DOUBLE	\$ 18,520.00
32852	LUNG TRANSPLANT, SINGLE W/BYPASS	\$ 14,297.00
32851	LUNG TRANSPLANT, SINGLE	\$ 13,164.00
32820	RECONSTRUCT CHEST WALL AFTER INJURY	\$ 5,304.00
32815	CLOSE BRONCHIAL FISTULA	\$ 11,210.00
32810	CLOSE CHEST AFTER DRAINAGE	\$ 3,587.00
32800	REPAIR LUNG HERNIA	\$ 3,759.00
32701	REPAIR LUNG HERNIA	\$ 838.00
32674	THORACOSCOPY LYMPH NODE EXC	\$ 865.00
32673	THORACOSCOPY W/THYMUS RESECT	\$ 4,864.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
32672	THORACOSCOPY FOR LVRS	\$ 6,091.00
32671	THORACOSCOPY PNEUMONECTOMY	\$ 7,115.00
32670	THORACOSCOPY BILOBECTOMY	\$ 6,414.00
32669	THORACOSCOPY REMOVE SEGMENT	\$ 5,377.00
32668	THORACOSCOPY W/W RESECT DIAG	\$ 627.00
32667	THORACOSCOPY W/W RESECT ADDL	\$ 627.00
32666	THORACOSCOPY W/WEDGE RESECT	\$ 3,461.00
32665	THORACOSCOPY W/ESOPH MUSC EXC	\$ 4,925.00
32664	THORACOSCOPY W/ TH NRV EXC	\$ 3,380.00
32663	THORACOSCOPY W/LOBECTOMY	\$ 5,592.00
32662	THORACOSCOPY W/MEDIAST EXC	\$ 3,556.00
32661	THORACOSCOPY W/PERICARD EXC	\$ 3,180.00
32659	THORACOSCOPY W/SAC DRAINAGE	\$ 2,913.00
32658	THORACOSCOPY W/SAC FB REMOVE	\$ 2,845.00
32656	THORACOSCOPY W/PLEURECTOMY	\$ 3,193.00
32655	THORACOSCOPY RESECT BULLAE	\$ 3,814.00
32654	THORACOSCOPY CONTRL BLEEDING	\$ 4,574.00
32653	THORACOSCOPY REMOV FB/FIBRIN	\$ 4,236.00
32652	THORACOSCOPY REM TOTL CORTEX	\$ 6,643.00
32651	THORACOSCOPY REMOVE CORTEX	\$ 4,373.00
32650	THORACOSCOPY W/PLEURODESIS	\$ 2,643.00
32609	THORACOSCOPY W/BX PLEURA	\$ 1,017.00
32608	THORACOSCOPY W/BX NODULE	\$ 1,519.00
32607	THORACOSCOPY W/BX INFILTRATE	\$ 1,235.00
32606	THORACOSCOPY W/BX MED SPACE	\$ 1,855.00
32604	THORACOSCOPY WBX SAC	\$ 1,921.00
32601	THORACOSCOPY, DX, LUNGS	\$ 1,236.00
32562	DESTRUCT SUBSEQUENT DAY	\$ 224.00
32561	DESTR INSTILL VIA CHEST TUBE	\$ 248.00
32560	TREAT LUNG LINING CHEMICALLY	\$ 299.00
32557	TREAT LUNG LINING CHEMICALLY	\$ 556.00
32556	TREAT LUNG LINING CHEMICALLY	\$ 459.00
32555	THORACENTESIS NEEDLE/CATH PLEURA W/	\$ 406.00
32554	THORACENTESIS NEEDLE/CATH PLEURA W/	\$ 332.00
32553	PLACE INTERSTITIAL DEV RAD THERAPY	\$ 656.00
32552	REM OF INDWELLING TUNNELED PLEURAL	\$ 597.00
32551	INSERTION OF CHEST TUBE	\$ 613.00
32550	INSERT PLEURAL CATH	\$ 782.00
32540	REMOVE LUNG LESION (EMPYEMECTOMY)	\$ 6,930.00
32507	WEDGE RESECT OF LUNG DIAG	\$ 625.00
32506	WEDGE RESECT OF LUNG ADD-ON	\$ 625.00
32505	WEDGE RESECT OF LUNG INITIAL	\$ 3,715.00
32504	RESECTION LUNG TUMOR, W CHEST WALL R	\$ 8,197.00
32503	RESECTION LUN TUMOR, W/O CHEST REC	\$ 7,188.00
32501	RESECT/REPAIR LUNG W/LOBECTOMY	\$ 977.00
32491	EXCISE EMPHYSEMATOUS LUNG, VOL RED	\$ 5,872.00
32488	LUNG COMPLETION PNEUMONECTOMY	\$ 9,592.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
32486	LUNG SLEEVE LOBECTOMY	\$ 9,439.00
32484	LUNG SEGMENTECTOMY	\$ 5,738.00
32482	LUNG BILOBECTOMY	\$ 6,337.00
32480	LUNG LOBECTOMY	\$ 5,912.00
32445	REMOVAL OF LUNG, EXTRAPLEURAL	\$ 14,200.00
32442	LUNG REMOVAL W/SLEEVE PNEUMONECTOMY	\$ 12,309.00
32440	REMOVE LUNG PNEUMONECTOMY	\$ 6,257.00
32400	NEEDLE BIOPSY OF CHEST LINING	\$ 313.00
32320	RELEASE/REMOVE CHEST LINING	\$ 6,379.00
32310	REMOVAL OF CHEST LINING	\$ 3,633.00
32225	PARTIAL RELEASE OF LUNG	\$ 3,965.00
32220	RELEASE OF LUNG	\$ 6,338.00
32215	TREAT CHEST LINING FOR PNEUMOTHORAX	\$ 3,170.00
32200	OPEN DRAINAGE OF LUNG ABSCESS/CYST	\$ 4,523.00
32160	OPEN CHEST HEART MASSAGE	\$ 3,162.00
32151	REMOVE LUNG FOREIGN BODY	\$ 4,007.00
32150	REMOVE OBJECT FROM CHEST LINING	\$ 3,989.00
32141	REMOVE/TREAT LUNG LESIONS	\$ 6,097.00
32140	REMOVAL OF LUNG CYST(S)	\$ 3,949.00
32124	EXPLORE CHEST, FREE ADHESIONS	\$ 3,692.00
32120	EXPLORATION/REPAIR OF CHEST,POST-OP	\$ 3,475.00
32110	EXPLORATION/REPAIR OF CHEST	\$ 5,848.00
32100	EXPLORATION/BIOPSY OF CHEST	\$ 3,228.00
32098	OPEN BIOPSY OF LUNG PLEURA	\$ 3,034.00
32097	OPEN WEDGE/BX LUNG NODULE	\$ 3,199.00
32096	OPEN WEDGE/BX LUNG INFILTR	\$ 3,196.00
32036	PERCUT BX LUNG/MEDIASTINUM	\$ 3,098.00
32035	THORACOSTOMY W/RIB RESECTION	\$ 2,891.00
31830	REVISE WINDPIPE SCAR	\$ 1,341.00
31825	CLOSURE/REPAIR OF WINDPIPE OPENING	\$ 1,798.00
31820	CLOSURE OF WINDPIPE OPENING	\$ 1,229.00
31805	REPAIR WINDPIPE INJURY, THORACIC	\$ 3,252.00
31800	REPAIR WINDPIPE INJURY, CERVICAL	\$ 2,672.00
31786	REMOVE WINDPIPE LESION, THORACIC	\$ 5,764.00
31785	REMOVE WINDPIPE LESION, CERVICAL	\$ 4,045.00
31781	RECONSTRUCTION OF WINDPIPE	\$ 5,548.00
31780	RECONSTRUCTION OF WINDPIPE	\$ 4,492.00
31775	RECONSTRUCTION OF BRONCHUS	\$ 5,587.00
31770	REPAIR/GRAFT OF BRONCHUS	\$ 5,323.00
31766	RECONSTRUCTION OF WINDPIPE	\$ 7,117.00
31760	REPAIR OF WINDPIPE, INTRATHORACIC	\$ 5,480.00
31755	REPAIR OF WINDPIPE/FISTULIZATION	\$ 6,459.00
31750	REPAIR OF WINDPIPE, CERVICAL	\$ 5,168.00
31730	INTRODUCE WINDPIPE WIRE/STENT/TUBE	\$ 586.00
31725	CLEAR AIRWAYS, TRACHEA-BRONCHUS	\$ 288.00
31720	CLEAR AIRWAYS, NOSE/TRACHEA	\$ 204.00
31717	CATHETERIZATION/BRONCH BRUSH BIOPSY	\$ 394.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
31661	BRONCHOSCOPIC THERMOPLASTY 2/> LOBE	\$ 746.00
31660	INSERTION OF AIRWAY CATHETER	\$ 703.00
31653	with endobronchial ultrasound (EBUS	\$ 897.00
31651	BRNCHSC REMOVAL BRONCHIAL VALVE EA	\$ 265.00
31649	BRNCHSC OCCLUSION&INSERT BRONCH VAL	\$ 244.00
31648	INSERTION OF AIRWAY CATHETER	\$ 743.00
31647	with endobronchial ultrasound (EBUS	\$ 779.00
31646	BRONCHOSCOPY/RE-CLEAR AIRWAYS	\$ 517.00
31645	BRONCHOSCOPY/CLEAR AIRWAYS	\$ 537.00
31643	BRONCHOSCOPY W/CATHETER PLACEMENT	\$ 635.00
31641	BRONCHOSCOPY/TREAT TUMOR/STRICTURE	\$ 943.00
31640	BRONCHOSCOPY/REMOVE TUMOR	\$ 921.00
31638	BRONCOSCPY, REVISION OF STENTS	\$ 921.00
31637	BRONCOSCPY, RIGID, ADD MAJOR STENTS	\$ 280.00
31636	BRONCOSCOPY RIGID, PLCMNT STENT	\$ 814.00
31635	BRONCHOSCOPY/REMOVE FOREIGN BODY	\$ 647.00
31634	BRONCH W/BALLOON OCCLUSION	\$ 706.00
31633	BRONCHOSCOPY RIGID/FLEX W/WO GUID	\$ 227.00
31632	BRONCHOSCOPY RIGID/FLEX W/WO GUID	\$ 181.00
31631	BRONCHOSCOPY/DILATION, INSERT STENT	\$ 851.00
31630	BRONCHOSCOPY/REPAIR TRACHEA/BRONCHI	\$ 738.00
31629	BRONCHOSCOPY/NEEDLE BIOPSY	\$ 677.00
31628	BRONCHOSCOPY/LUNG BIOPSY	\$ 635.00
31627	BRONCHO W/COMP-ASSIT IMAGE GUIDED	\$ 352.00
31626	BRONCH W/PLCMNT FIDUCIAL MARKER	\$ 732.00
31625	ENDOSCPY W/BRONCHIAL BIOPSY	\$ 570.00
31624	BRONCHOSCOPY W/BRONCHIAL ALV LAVAGE	\$ 490.00
31623	BRONCHOSCOPY, W/BRUSHING	\$ 483.00
31622	BRONCHOSCOPY, DIAGNOSTIC	\$ 487.00
31615	VISUALIZE WINDPIPE THRU EST OPENING	\$ 430.00
31614	REPAIR WINDPIPE OPENING, COMPLEX	\$ 2,731.00
31613	REPAIR WINDPIPE OPENING, SIMPLE	\$ 1,646.00
31612	PUNCTURE TRACHEA TO CLEAR WINDPIPE	\$ 179.00
31611	SURGERY TO INSERT SPEECH PROSTHESIS	\$ 1,987.00
31610	INCISION OF WINDPIPE, FENESTRATION	\$ 3,596.00
31605	INCISION OF WINDPIPE, EMERGENCY	\$ 1,319.00
31603	INCISION OF WINDPIPE, EMERGENCY	\$ 1,244.00
31601	INCISION OF WINDPIPE, PLANNED	\$ 1,694.00
31600	INCISION OF WINDPIPE, PLANNED	\$ 1,199.00
31590	REINNERVATION OF LARYNX	\$ 3,275.00
31587	REVISION OF LARYNX, CRICOID SPLIT	\$ 4,438.00
31584	REPAIR OF LARYNX FRACTURE	\$ 5,270.00
31580	REVISION OF LARYNX FOR WEB	\$ 4,758.00
31579	LARYNGOSCOPY/STROBOSCOPY	\$ 448.00
31578	LARYNGOSCOPY/REMOVE LARYNX LESION	\$ 551.00
31577	LARYNGOSCOPY/REMOVE FOREIGN BODY	\$ 504.00
31576	LARYNGOSCOPY WITH BIOPSY	\$ 444.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
31575	DIAGNOSTIC LARYNGOSCOPY	\$ 248.00
31571	LARYNGOSCOPY WITH INJECTION	\$ 931.00
31570	LARYNGOSCOPY WITH INJECTION	\$ 861.00
31561	OPERATIVE LARYNGOSCOPY/ARYTENOIDECT	\$ 1,274.00
31560	OPERATIVE LARYNGOSCOPY/ARYTENOIDECT	\$ 1,170.00
31546	LARYNGOSCOPY, GRAFT W RECONSTRUCTIO	\$ 2,058.00
31545	LARYNGOSCOPY, DIRECT, W OPERA MSCOP	\$ 1,353.00
31541	OPERATIVE LARYNGOSCOPY/REMOVE TUMOR	\$ 987.00
31540	OPERATIVE LARYNGOSCOPY/REMOVE TUMOR	\$ 903.00
31536	OPERATIVE LARYNGOSCOPY/BIOPSY	\$ 788.00
31535	OPERATIVE LARYNGOSCOPY/BIOPSY	\$ 708.00
31531	OPERATIVE LARYNGOSCOPY/REMOV OBJECT	\$ 792.00
31530	OPERATIVE LARYNGOSCOPY/REMOV OBJECT	\$ 750.00
31529	LARYNGOSCOPY/ADDED DILATATION	\$ 602.00
31528	LARYNGOSCOPY/DILATION	\$ 536.00
31527	LARYNGOSCOPY/INSERTION OF OBTURATOR	\$ 727.00
31526	DIAGNOSTIC LARYNGOSCOPY/MICROSCOPE	\$ 585.00
31525	DIAGNOSTIC LARYNGOSCOPY,NOT NEWBORN	\$ 599.00
31520	DIAGNOSTIC LARYNGOSCOPY, NEWBORN	\$ 582.00
31515	LARYNGOSCOPY FOR ASPIRATION	\$ 411.00
31513	LARYNGOSCOPY/INJECTION VOCAL CORD	\$ 487.00
31512	LARYNGOSCOPY/REMOVAL OF LESION	\$ 481.00
31511	LARYNGOSCOPY/REMOVAL OF OBJECT	\$ 500.00
31510	LARYNGOSCOPY/BIOPSY	\$ 454.00
31505	LARYNGOSCOPY, DIAGNOSTIC	\$ 183.00
31502	CHANGE OF WINDPIPE AIRWAY	\$ 133.00
31500	INSERTION OF EMERGENCY AIRWAY	\$ 545.00
31420	REMOVAL OF EPIGLOTTIS	\$ 3,082.00
31400	REVISION OF LARYNX	\$ 3,678.00
31395	RECONSTRUCTION OF LARYNX & PHARYNX	\$ 11,208.00
31390	REMOVAL OF LARYNX & PHARYNX	\$ 10,634.00
31382	PARTIAL REMOVAL OF LARYNX, VERTICAL	\$ 7,923.00
31380	PARTIAL REMOVAL OF LARYNX, VERTICAL	\$ 7,224.00
31375	PARTIAL REMOVAL OF LARYNX, VERTICAL	\$ 7,326.00
31370	PARTIAL REMOVAL OF LARYNX, HORIZ	\$ 7,719.00
31368	PART REMOV LARYNX, NECK DISSECTION	\$ 9,111.00
31367	PARTIAL REMOVAL OF LARYNX	\$ 8,215.00
31365	REMOVAL OF LARYNX, NECK DISSECTION	\$ 9,626.00
31360	REMOVAL OF LARYNX	\$ 7,780.00
31300	REMOVAL OF LARYNX TUMOR	\$ 4,741.00
31297	SINUS ENDO W/BALLOON DIL	\$ 541.00
31296	SINUS ENDO W/BALLOON DIL	\$ 676.00
31295	SINUS ENDO W/BALLOON DIL	\$ 593.00
31294	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 4,613.00
31293	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 4,026.00
31292	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 3,726.00
31291	NASAL/SINUS ENDOSCOPY, W/CSF LEAK	\$ 4,656.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
31290	NASAL/SINUS ENDOSCOPY, W/CSF LEAK	\$ 4,303.00
31288	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 880.00
31287	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 758.00
31276	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 1,423.00
31267	MAXIL SINUS ENDOSCOPY W/TISS REMOVE	\$ 997.00
31256	NASAL ENDOSCOPY/EXPLOR MAXIL SINUS	\$ 679.00
31255	NASAL ENDOSCOPY,TOTAL ETHMOIDECTOMY	\$ 1,221.00
31254	NASAL ENDOSCOPY, PART ETHMOIDECTOMY	\$ 915.00
31240	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 592.00
31239	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 2,241.00
31238	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 626.00
31237	NASAL/SINUS ENDOSCOPY, SURGICAL	\$ 595.00
31235	NASAL ENDOSCOPY, DX W/SINUSOSCOPY	\$ 590.00
31233	NASAL ENDOSCOPY, DX W/SINUSOSCOPY	\$ 504.00
31231	NASAL ENDOSCOPY, DIAGNOSTIC	\$ 239.00
31230	REMOVE UPPER JAW, ORBITAL CONTENTS	\$ 7,592.00
31225	REMOVAL OF UPPER JAW	\$ 6,839.00
31205	REMOVAL OF ETHMOID SINUS,EXTRANASAL	\$ 3,388.00
31201	REMOVAL OF ETHMOID SINUS,INTRANASAL	\$ 2,895.00
31200	REMOVAL OF ETHMOID SINUS,INTRANASAL	\$ 2,208.00
31090	EXPLORATION OF 3+ SINUSES, UNILAT	\$ 3,976.00
31087	REMOVE FRONTAL SINUS, NONOBLIT,FLAP	\$ 4,100.00
31086	REMOVE FRONTAL SINUS, NONOBLIT,FLAP	\$ 4,283.00
31085	REMOVE FRONTAL SINUS, OBLIT,W/FLAP	\$ 4,543.00
31084	REMOVE FRONTAL SINUS, OBLIT,W/FLAP	\$ 4,397.00
31081	REMOVE FRONTAL SINUS, OBLITERATIVE	\$ 4,248.00
31080	REMOVE FRONTAL SINUS, OBLITERATIVE	\$ 3,947.00
31075	EXPLORATION OF FRONTAL SINUS	\$ 2,996.00
31070	EXPLORATION OF FRONTAL SINUS	\$ 1,696.00
31051	SPHENOID SINUS SURGERY	\$ 2,494.00
31050	EXPLORATION OF SPHENOID SINUS	\$ 1,861.00
31040	EXPLORATION BEHIND UPPER JAW	\$ 2,953.00
31032	EXPLORE MAXIL SINUS, REMOVE POLYPS	\$ 2,160.00
31030	EXPLORE MAXILLARY SINUS, RADICAL	\$ 1,944.00
31020	EXPLORATION OF MAXILLARY SINUS	\$ 1,391.00
31002	IRRIGATION OF SPHENOID SINUS	\$ 697.00
31000	IRRIGATION OF MAXILLARY SINUS	\$ 396.00
30930	THERAPEUTIC FRACTURE OF NOSE	\$ 442.00
30920	LIGATION OF UPPER JAW ARTERY	\$ 3,191.00
30915	LIGATION OF NASAL SINUS ARTERY	\$ 2,201.00
30906	REPEAT CONTROL OF NOSEBLEED, POSTER	\$ 519.00
30905	CONTROL OF NOSEBLEED, POSTERIOR	\$ 412.00
30903	CONTROL OF NOSEBLEED, COMPLEX	\$ 307.00
30901	CONTROL OF NOSEBLEED, SIMPLE	\$ 219.00
30802	CAUTERIZE INNER NOSE, INTRAMURAL	\$ 732.00
30801	CAUTERIZE INNER NOSE, SUPERFICIAL	\$ 538.00
30630	REPAIR NASAL SEPTUM DEFECT	\$ 2,423.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
30620	RECONSTRUCT INNER NOSE	\$ 2,397.00
30600	REPAIR MOUTH/NOSE FISTULA	\$ 1,621.00
30580	REPAIR UPPER JAW FISTULA	\$ 1,856.00
30560	RELEASE OF NASAL ADHESIONS	\$ 528.00
30545	REPAIR NASAL DEFECT, TRANSPALATINE	\$ 3,629.00
30540	REPAIR NASAL DEFECT, INTRANASAL	\$ 2,656.00
30520	REPAIR OF NASAL SEPTUM	\$ 2,421.00
30465	REPAIR NASAL VESTIBULAR STENOSIS	\$ 3,747.00
30462	REVISE NOSE FOR CLEFT LIP/PALATE	\$ 6,130.00
30460	REVISE NOSE FOR CLEFT LIP/PALATE	\$ 3,186.00
30450	FOLLOWUP REVISION OF NOSE, MAJOR	\$ 6,637.00
30435	FOLLOWUP REVISION OF NOSE,INTERMED	\$ 5,004.00
30430	FOLLOWUP REVISION OF NOSE, MINOR	\$ 3,945.00
30420	RECONSTRUCTION OF NOSE/SEPTUM	\$ 5,302.00
30410	RECONSTRUCTION OF NOSE, COMPLETE	\$ 5,304.00
30400	RECONSTRUCTION OF NOSE	\$ 4,564.00
30320	INCISION/REMOVAL NASAL FOREIGN BODY	\$ 1,740.00
30310	REMOVE OBJECT FROM NOSE, GEN ANESTH	\$ 762.00
30300	REMOVE OBJECT FROM NOSE	\$ 422.00
30220	INSERT NASAL SEPTAL BUTTON	\$ 470.00
30210	NASAL SINUS THERAPY	\$ 370.00
30200	INJECTION TREATMENT OF NOSE	\$ 218.00
30160	REMOVAL OF NOSE	\$ 2,966.00
30150	PARTIAL REMOVAL OF NOSE	\$ 2,963.00
30140	RESECTION OF TURBINATE BONES	\$ 671.00
30130	REMOVAL OF TURBINATE BONES	\$ 1,480.00
30125	REMOVAL OF NOSE LESION, COMPLEX	\$ 2,357.00
30124	REMOVAL OF NOSE LESION, SIMPLE	\$ 1,094.00
30120	REMOVAL/ABRASION OF SKIN OF NOSE	\$ 1,604.00
30118	REMOVE INTRANASAL LESION	\$ 2,897.00
30117	REMOVE INTRANASAL LESION	\$ 1,242.00
30115	REMOVAL OF NOSE POLYP(S), EXTENSIVE	\$ 1,666.00
30110	REMOVAL OF NOSE POLYP(S), SIMPLE	\$ 487.00
30100	INTRANASAL BIOPSY	\$ 249.00
30020	DRAINAGE OF NASAL SEPTUM LESION	\$ 449.00
30000	DRAINAGE OF NOSE ABSCESS/HEMATOMA	\$ 446.00
29916	HIP ARTHRO W/LABRAL REPAIR	\$ 3,987.00
29915	HIP ARTHRO ACETABULOPLASTY	\$ 3,988.00
29914	HIP ARTHRO W/FEMOROPLASTY	\$ 3,864.00
29907	SUBTALAR ATHRO W/FUSION	\$ 3,417.00
29906	SUBTALAR ARTHRO W/DEB	\$ 2,535.00
29905	SUBTALAR ARTHRO W/EXC	\$ 1,884.00
29904	SUBTALAR ARTHRO W/FB RMVL	\$ 2,478.00
29902	ARTH,METCARPHA JT,SURG;W/RED DIS COL	\$ 2,211.00
29901	ARTH METACARPOPHA JT,SURG;W/DEBRIME	\$ 2,080.00
29900	ARTH,METACARPOPHAL JT,DIAG,SYNO BIO	\$ 1,930.00
29899	ARTH ANKLE,SURG;W/ANKLE ARTHRODESIS	\$ 3,990.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
29898	ANKLE ARTHROSCOPY/DEBRIDEMENT	\$ 2,141.00
29897	ANKLE ARTHROSCOPY/DEBRIDEMENT	\$ 1,907.00
29895	ANKLE ARTHROSCOPY/SYNOVECTOMY	\$ 1,752.00
29894	ANKLE ARTHROSCOPY/REMOVE OBJECT	\$ 1,903.00
29893	ENDOSCOPIC PLANTAR FASCIOTOMY	\$ 1,579.00
29892	ARTHROSCOPY, ANKLE SURG	\$ 2,443.00
29891	ARTHROSCOPY, ANKLE, EXCISE DEFECT	\$ 2,558.00
29889	KNEE ARTHROSCOPY/REPAIR LIGAMENT	\$ 4,774.00
29888	KNEE ARTHROSCOPY/REPAIR LIGAMENT	\$ 3,816.00
29887	KNEE ARTHROSCOPY/SURGERY	\$ 2,924.00
29886	KNEE ARTHROSCOPY/SURGERY	\$ 2,476.00
29885	KNEE ARTHROSCOPY/SURGERY	\$ 2,938.00
29884	KNEE ARTHROSCOPY/RELEASE ADHESIONS	\$ 2,405.00
29883	KNEE ARTHROSCOPY/MENISCUS REPAIR	\$ 3,275.00
29882	KNEE ARTHROSCOPY/MENISCUS REPAIR	\$ 2,691.00
29881	KNEE ARTHROSCOPY/MENISCECTOMY	\$ 2,099.00
29880	KNEE ARTHROSCOPY/MENISCECTOMY	\$ 2,178.00
29879	KNEE ARTHROSCOPY/ARTHROPLASTY	\$ 2,572.00
29877	KNEE ARTHROSCOPY/DEBRIDEMENT	\$ 2,412.00
29876	KNEE ARTHROSCOPY/SYNOVECTOMY, MAJOR	\$ 2,537.00
29875	KNEE ARTHROSCOPY/SYNOVECTOMY, LTD	\$ 1,926.00
29874	KNEE ARTHROSCOPY/REMOVE OBJECT	\$ 2,089.00
29873	ARTH,KNEE,SURG;WITH LATERAL RELEASE	\$ 2,048.00
29871	KNEE ARTHROSCOPY/DRAIN INFECTION	\$ 1,994.00
29870	KNEE ARTHROSCOPY, DIAGNOSTIC	\$ 1,584.00
29868	ARTHROSCOPY, KNEE MENISCAL TRANPLAN	\$ 6,545.00
29867	ARTHROSCOPY KNEE, ALLOGRFT OSTEOCHR	\$ 4,991.00
29866	ARTHROSCOPY, KNEE SURGICAL	\$ 4,099.00
29863	HIP ARTHROSCOPY, SURG W/SYNOVECTOMY	\$ 3,169.00
29862	HIP ARTHROSCOPY, SURG DEBRID/SHAVE	\$ 3,156.00
29861	HIP ARTHROSCOPY, SURG REM LB/FB	\$ 2,804.00
29860	HIP ARTHROSCOPY, DIAGNOSTIC	\$ 2,599.00
29856	TIBIAL ARTHROSCOPY/SURGERY,BICONDYL	\$ 3,863.00
29855	TIBIAL ARTHROSCOPY/SURGERY, UNICOND	\$ 3,040.00
29851	KNEE ARTHROSCOPY/SURGERY,W/FIXATION	\$ 3,631.00
29850	KNEE ARTHROSCOPY/SURGERY	\$ 2,426.00
29848	WRIST ENDOSCOPY/REL TRANS CARP LIG	\$ 1,965.00
29847	WRIST ARTHROSCOPY/INTERNAL FIXATION	\$ 2,114.00
29846	WRIST ARTHROSCOPY/SURGERY	\$ 2,015.00
29845	WRIST ARTHROSCOPY/SYNOVECTOMY	\$ 2,250.00
29844	WRIST ARTHROSCOPY/SYNOVECTOMY	\$ 1,925.00
29843	WRIST ARTHROSCOPY/DRAIN INFECTION	\$ 1,890.00
29840	WRIST ARTHROSCOPY, DIAGNOSTIC	\$ 1,737.00
29838	ELBOW ARTHROSCOPY/DEBRIDEMENT	\$ 2,290.00
29837	ELBOW ARTHROSCOPY/DEBRIDEMENT	\$ 2,041.00
29836	ELBOW ARTHROSCOPY/SYNOVECTOMY	\$ 2,263.00
29835	ELBOW ARTHROSCOPY/SYNOVECTOMY	\$ 1,978.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
29834	ELBOW ARTHROSCOPY/REMOVE OBJECT	\$ 1,907.00
29830	ELBOW ARTHROSCOPY, DIAGNOSTIC	\$ 1,774.00
29828	ARTHOSCOPY BICEPS TENODESIS	\$ 3,574.00
29827	ARTH,DIS CLAV-DIS ART SUR /W ROT CU	\$ 4,167.00
29826	SHOULDER ARTHROSCOPY/DECOMPRESSION	\$ 683.00
29825	SHOULDER ARTHROSCOPY/SURGERY	\$ 2,276.00
29824	ARTH,DIS CLAVICULECTOMY-DIS ART SUR	\$ 2,615.00
29823	SHOULDER ARTHROSCOPY/DEBRIDEMENT	\$ 2,436.00
29822	SHOULDER ARTHROSCOPY/DEBRIDEMENT	\$ 2,237.00
29821	SHOULDER ARTHROSCOPY/SYNOVECTOMY	\$ 2,300.00
29820	SHOULDER ARTHROSCOPY/SYNOVECTOMY	\$ 2,082.00
29819	SHOULDER ARTHROSCOPY/REMOVE OBJECT	\$ 2,276.00
29807	ARTHROSCOPY,SHO,SURG;REP-SLAP LESIO	\$ 4,028.00
29806	ARTHROSCOPY,SHO,SURGICAL;CAPSULORRH	\$ 4,117.00
29805	ARTHROSCOPY,SHO,DIAG,W/WO SINO BIOP	\$ 1,822.00
29804	JAW ARTHROSCOPY/SURGERY	\$ 2,397.00
29800	JAW ARTHROSCOPY, DIAGNOSTIC	\$ 2,052.00
29750	WEDGING OF CLUBFOOT CAST	\$ 308.00
29740	WEDGING OF CAST	\$ 275.00
29730	WINDOWING OF CAST	\$ 165.00
29720	REPAIR OF BODY CAST SPICA	\$ 170.00
29710	REMOVE/REVISE CAST, SHOULDER/HIP	\$ 328.00
29705	REMOVE/REVISE CAST, FULL ARM/LEG	\$ 173.00
29700	REMOVE/REVISE CAST, BOOT/BODY	\$ 128.00
29584	APPL MULTLAY COMPRS ARM/HAND	\$ 57.00
29581	APPL MULTI-LYR VENOUS WND COMP, BK	\$ 97.00
29580	APPLICATION OF PASTE BOOT	\$ 104.00
29550	STRAPPING OF TOES	\$ 41.00
29540	STRAPPING OF ANKLE	\$ 64.00
29530	STRAPPING OF KNEE	\$ 66.00
29520	STRAPPING OF HIP	\$ 68.00
29515	APPLICATION OF LOWER LEG SPLINT	\$ 188.00
29505	APPLICATION OF LONG LEG SPLINT	\$ 192.00
29450	APPLICATION OF LEG CAST, CLUBFOOT	\$ 419.00
29445	APPLY RIGID TOTAL CONTACT LEG CAST	\$ 383.00
29440	ADDITION OF WALKER TO CAST	\$ 105.00
29435	APPLY SHORT LEG CAST (PTB)	\$ 315.00
29425	APPLY SHORT LEG CAST, WALKER	\$ 209.00
29405	APPLY SHORT LEG CAST	\$ 223.00
29365	APPLY LONG LEG CAST, CYLINDER	\$ 337.00
29358	APPLY LONG LEG CAST BRACE	\$ 399.00
29355	APPLICATION OF LONG LEG CAST,WALKER	\$ 412.00
29345	APPLICATION OF LONG LEG CAST	\$ 387.00
29325	APPLICATION OF HIP CASTS	\$ 688.00
29305	APPLICATION OF HIP CAST	\$ 612.00
29280	STRAPPING OF HAND/FINGER	\$ 78.00
29260	STRAPPING OF ELBOW/WRIST	\$ 70.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
29240	STRAPPING OF SHOULDER	\$ 66.00
29200	STRAPPING OF CHEST	\$ 66.00
29131	APPLY FINGER SPLINT, DYNAMIC	\$ 131.00
29130	APPLY FINGER SPLINT, STATIC	\$ 114.00
29126	APPLY FOREARM SPLINT, DYNAMIC	\$ 183.00
29125	APPLY FOREARM SPLINT, STATIC	\$ 151.00
29105	APPLICATION OF LONG ARM SPLINT	\$ 177.00
29086	APPLICATION,CAST;FINGER(eg.CONTRACT	\$ 194.00
29085	APPLICATION OF HAND/WRIST CAST	\$ 256.00
29075	APPLICATION OF FOREARM CAST	\$ 234.00
29065	APPLICATION OF LONG ARM CAST	\$ 261.00
29058	APPLY SHOULDER CAST, VELPEAU	\$ 368.00
29055	APPLY SHOULDER CAST, SHOULDER SPICA	\$ 530.00
29049	APPLY SHOULDER CAST, FIGURE-EIGHT	\$ 270.00
29046	APPLY BODY CAST, SHOULDER TO HIPS	\$ 724.00
29044	APPLY BODY CAST, SHOULDER TO HIPS	\$ 646.00
29040	APPLY BODY CAST, SHOULDER TO HIPS	\$ 667.00
29035	APPLY BODY CAST, SHOULDER TO HIPS	\$ 550.00
29015	APPLY BODY/HEAD CAST, RISSER JACKET	\$ 699.00
29010	APPLY BODY CAST, RISSER JACKET	\$ 618.00
29000	APPLICATION OF BODY CAST, HALO TYPE	\$ 798.00
28890	EXTRACORPOR SHOCK WAVE PLANTAR FASC	\$ 814.00
28825	PARTIAL AMPUTATION OF TOE	\$ 1,378.00
28820	AMPUTATION OF TOE	\$ 1,476.00
28810	AMPUTATION OF TOE & METATARSAL	\$ 1,645.00
28805	AMPUTATION, FOOT, TRANSMETATARSAL	\$ 2,735.00
28800	AMPUTATION, FOOT, MIDTARSAL	\$ 2,012.00
28760	FUSION OF GREAT TOE JOINT	\$ 2,146.00
28755	FUSION OF GREAT TOE JOINT	\$ 1,240.00
28750	FUSION OF GREAT TOE JOINT	\$ 2,203.00
28740	FUSION OF MIDFOOT JOINT	\$ 2,346.00
28737	REVISION OF FOOT BONES/TENDONS	\$ 2,587.00
28735	FUSION OF MIDFOOT BONES W/OSTEOTOMY	\$ 2,937.00
28730	FUSION OF MIDFOOT BONES	\$ 2,805.00
28725	ARTHRODESIS, SUBTALAR	\$ 2,983.00
28715	ARTHRODESIS, TRIPLE	\$ 3,613.00
28705	ARTHRODESIS, PANTALAR	\$ 4,675.00
28675	REPAIR OF TOE DISLOCATION	\$ 1,509.00
28666	SKELETAL FIXATION, TOE DISLOCATION	\$ 608.00
28665	TREAT TOE DISLOCATION W/ANESTHESIA	\$ 480.00
28660	TREAT TOE DISLOCATION	\$ 351.00
28645	REPAIR TOE DISLOCATION	\$ 1,813.00
28636	SKELETAL FIXATION, TOE DISLOCATION	\$ 766.00
28635	TREAT TOE DISLOCATION W/ANESTHESIA	\$ 495.00
28630	TREAT TOE DISLOCATION	\$ 424.00
28615	REPAIR FOOT JOINT DISLOCATION	\$ 3,108.00
28606	SKELETAL FIXATION,FOOT JOINT DISLOC	\$ 1,487.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
28605	TREAT FOOT JOINT DISLOC, W/ANESTH	\$ 1,148.00
28600	TREAT FOOT JOINT DISLOCATION	\$ 695.00
28585	REPAIR FOOT JOINT DISLOCATION	\$ 2,533.00
28576	SKELETAL FIXATION,FOOT JOINT DISLOC	\$ 1,498.00
28575	TREAT FOOT JOINT DISLOC, W/ANESTH	\$ 1,281.00
28570	TREAT FOOT JOINT DISLOCATION	\$ 739.00
28555	REPAIR FOOT DISLOCATION	\$ 2,473.00
28546	SKELETAL FIXATION, FOOT DISLOCATION	\$ 1,317.00
28545	TREAT FOOT DISLOCATION W/ANESTHESIA	\$ 1,022.00
28540	TREAT FOOT DISLOCATION	\$ 642.00
28531	REPAIR SESAMOID BONE FRACTURE	\$ 666.00
28530	TREAT SESAMOID BONE FRACTURE	\$ 376.00
28525	REPAIR OF TOE FRACTURE	\$ 1,509.00
28515	TREATMENT OF TOE FX W/MANIPULATION	\$ 531.00
28510	TREATMENT OF TOE FRACTURE	\$ 444.00
28505	REPAIR GREAT TOE FRACTURE	\$ 1,863.00
28496	SKELETAL FIXATION, GREAT TOE FX	\$ 916.00
28495	TREAT GREAT TOE FX W/MANIPULATION	\$ 553.00
28490	TREAT GREAT TOE FRACTURE	\$ 466.00
28485	REPAIR METATARSAL FRACTURE	\$ 2,072.00
28476	SKELETAL FIXATION, METATARSAL FX	\$ 1,396.00
28475	TREAT METATARSAL FX W/MANIPULATION	\$ 850.00
28470	TREAT METATARSAL FRACTURE	\$ 771.00
28465	REPAIR MIDFOOT FRACTURE, EACH	\$ 2,390.00
28456	SKELETAL FIXATION, MIDFOOT FRACTURE	\$ 1,301.00
28455	TREAT MIDFOOT FX W/MANIPUL, EACH	\$ 963.00
28450	TREAT MIDFOOT FRACTURE, EACH	\$ 718.00
28446	OSTEOCHONDRAL TALUS AUTOGRFT	\$ 4,777.00
28445	REPAIR OF ANKLE FRACTURE	\$ 3,976.00
28436	SKELETAL FIXATION OF ANKLE FRACTURE	\$ 1,804.00
28435	TREAT ANKLE FX W/MANIPULATION	\$ 1,248.00
28430	TREATMENT OF ANKLE FRACTURE	\$ 798.00
28420	REPAIR OF HEEL FRACTURE W/AUTOGRAFT	\$ 5,008.00
28415	REPAIR OF HEEL FRACTURE	\$ 4,288.00
28406	SKELETAL FIXATION OF HEEL FRACTURE	\$ 2,079.00
28405	TREATMENT OF HEEL FX W/MANIPULATION	\$ 1,322.00
28400	TREATMENT OF HEEL FRACTURE	\$ 867.00
28360	REVISION OF CLEFT FOOT	\$ 4,258.00
28345	REVISION OF WEBBED TOE(S)	\$ 1,331.00
28344	REVISION OF EXTRA TOE(S)	\$ 1,020.00
28341	RESECTION OF ENLARGED TOE BONE	\$ 1,782.00
28340	RESECTION OF ENLARGED TOE TISSUE	\$ 1,498.00
28322	REPAIR NON/MALUNION, METATARSALS	\$ 2,182.00
28320	REPAIR NON/MALUNION, TARSAL BONES	\$ 2,321.00
28315	REMOVAL OF SESAMOID BONE, GREAT TOE	\$ 1,208.00
28313	REPAIR ANGULAR DEFORMITY OF TOE	\$ 1,331.00
28312	REVISION OF TOE	\$ 1,177.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
28310	REVISION OF GREAT TOE	\$ 1,334.00
28309	INCISE METATARSAL, MULTIPLE	\$ 3,348.00
28308	INCISION OF METATARSAL, EACH	\$ 1,422.00
28307	INCISION/GRAFT OF 1ST METATARSAL	\$ 1,563.00
28306	INCISION OF 1ST METATARSAL	\$ 1,507.00
28305	INCISION/GRAFT OF TARSAL BONES	\$ 2,512.00
28304	INCISION OF TARSAL BONES	\$ 2,278.00
28302	INCISION OF ANKLE BONE	\$ 2,789.00
28300	INCISION OF HEEL BONE	\$ 2,486.00
28299	BUNION SURGERY	\$ 2,163.00
28298	BUNION SURGERY, INCISE PHALANX	\$ 1,854.00
28297	BUNION SURGERY, LAPIDUS TYPE	\$ 2,259.00
28296	BUNION SURGERY, INCISE METATARSAL	\$ 1,894.00
28292	BUNION SURGERY, KELLER/MCBRIDE/MAYO	\$ 1,788.00
28289	BUNION SURGERY	\$ 1,713.00
28288	PARTIAL REMOVAL OF FOOT BONE	\$ 1,611.00
28286	REPAIR, COCK-UP 5TH TOE	\$ 1,090.00
28285	REPAIR OF HAMMERTOE, ONE TOE	\$ 1,408.00
28280	WEBBING PROCEDURE ON TOES	\$ 1,294.00
28272	RELEASE OF TOE JOINT CONTRACTURE	\$ 921.00
28270	RELEASE OF FOOT JOINT CONTRACTURE	\$ 1,243.00
28264	RELEASE OF MIDFOOT JOINT	\$ 3,002.00
28262	REVISION OF FOOT AND ANKLE	\$ 4,372.00
28261	LENGTHENING OF MIDFOOT TENDON	\$ 3,656.00
28260	RELEASE OF MIDFOOT JOINT	\$ 1,951.00
28250	REVISION OF FOOT FASCIA/MUSCLE	\$ 1,522.00
28240	LENGTHEN/RELEASE BIG TOE	\$ 1,087.00
28238	REVISION OF FOOT TENDON	\$ 1,800.00
28234	INCISE FOOT/TOE EXTENSOR TENDON	\$ 982.00
28232	INCISION OF TOE FLEXOR TENDON	\$ 891.00
28230	INCISION OF FOOT FLEXOR TENDON(S)	\$ 1,046.00
28226	RELEASE OF FOOT EXTENSOR TENDONS	\$ 1,525.00
28225	RELEASE OF FOOT EXTENSOR TENDON	\$ 980.00
28222	RELEASE OF FOOT FLEXOR TENDONS	\$ 1,317.00
28220	RELEASE OF FOOT FLEXOR TENDON	\$ 1,118.00
28210	FOLLOWUP REPAIR/GRAFT, FOOT TENDON	\$ 1,558.00
28208	REPAIR OF FOOT EXTENSOR TENDON	\$ 1,183.00
28202	FOLLOWUP REPAIR/GRAFT, FOOT TENDON	\$ 1,593.00
28200	REPAIR OF FOOT FLEXOR TENDON	\$ 1,207.00
28193	REMOVE OBJECT FROM FOOT, COMPLICATED	\$ 1,359.00
28192	REMOVE OBJECT FROM FOOT, DEEP	\$ 1,159.00
28190	REMOVE OBJECT FROM FOOT, SUBCUTAN	\$ 497.00
28175	RADICAL RESECTION OF TOE TUMOR	\$ 1,722.00
28173	RADICAL RESECTION OF FOOT TUMOR	\$ 2,674.00
28171	RADICAL RESECTION OF FOOT TUMOR	\$ 4,346.00
28160	PARTIAL REMOVAL OF TOE	\$ 988.00
28153	PARTIAL REMOVAL OF TOE, EACH	\$ 983.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
28150	REMOVAL OF TOE, EACH	\$ 1,031.00
28140	REMOVAL OF METATARSAL BONE	\$ 1,639.00
28130	REMOVAL OF ANKLE BONE	\$ 2,384.00
28126	PARTIAL REMOVAL OF TOE, EACH	\$ 912.00
28124	PARTIAL REMOVAL OF TOE	\$ 1,221.00
28122	PARTIAL REMOVAL OF FOOT BONE	\$ 1,626.00
28120	PARTIAL REMOVAL OF ANKLE/HEEL BONE	\$ 1,874.00
28119	REMOVAL OF HEEL SPUR	\$ 1,334.00
28118	REMOVAL OF HEEL BONE	\$ 1,573.00
28116	REVISION OF FOOT BONES	\$ 2,153.00
28114	REMOVAL OF ALL METATARSAL HEADS	\$ 3,116.00
28113	REMOVAL OF 5TH METATARSAL HEAD	\$ 1,567.00
28112	REMOVAL OF METATARSAL HEAD	\$ 1,165.00
28111	REMOVAL OF 1ST METATARSAL HEAD	\$ 1,205.00
28110	PARTIAL REMOVAL,5TH METATARSAL HEAD	\$ 1,076.00
28108	REMOVAL OF TOE LESION(S)	\$ 1,063.00
28107	REMOVE FOOT LESION W/ALLOGRAFT	\$ 1,268.00
28106	REMOVE FOOT LESION W/AUTOGRAFT	\$ 1,560.00
28104	REMOVAL OF FOOT LESION	\$ 1,323.00
28103	REMOVE ANKLE/HEEL LESION, ALLOGRAFT	\$ 1,421.00
28102	REMOVE ANKLE/HEEL LESION, AUTOGRAFT	\$ 2,366.00
28100	REMOVAL OF ANKLE/HEEL LESION	\$ 1,571.00
28092	REMOVE TENDON LESION, TOE(S)	\$ 999.00
28090	REMOVE FOOT TENDON LESION	\$ 1,138.00
28088	REMOVE FOOT EXTENSOR TENDON SHEATH	\$ 1,049.00
28086	REMOVE FOOT FLEXOR TENDON SHEATH	\$ 1,337.00
28080	REMOVE FOOT NERVE LESION (MORTON)	\$ 1,371.00
28072	REMOVAL OF FOOT JOINT LINING	\$ 1,193.00
28070	REMOVAL OF FOOT JOINT LINING	\$ 1,322.00
28062	RADICAL REMOVAL OF FOOT FASCIA	\$ 1,493.00
28060	PARTIAL REMOVAL FOOT FASCIA	\$ 1,337.00
28055	NURECTMY INTRNSC MUSCULATR OF FOOT	\$ 1,427.00
28054	BIOPSY, INTERPHALANGEAL JOINT	\$ 858.00
28052	BIOPSY, METATARSOPHALANGEAL JOINT	\$ 1,062.00
28050	BIOPSY, INTERTARSAL/TARSOMET JOINT	\$ 1,019.00
28047	RESECT FOOT/TOE TUMOR 3 CM/>	\$ 3,962.00
28046	RADICAL RESECTION OF FOOT TUMOR	\$ 2,662.00
28045	REMOVE FOOT TUMOR, DEEP/MUSCL	\$ 1,277.00
28043	REMOVE FOOT TUMOR, SUBCUTANEOUS TIS	\$ 965.00
28041	EXC FOOT/TOE TUM DEP 1.5CM/>	\$ 1,693.00
28039	EXC FOOT/TOE TUM SC 1.5 CM/>	\$ 1,291.00
28035	DECOMPRESS POSTERIOR TIBIAL NERVE	\$ 1,324.00
28024	EXPLORATION OF TOE JOINT	\$ 1,119.00
28022	EXPLORATION OF FOOT JOINT	\$ 1,210.00
28020	EXPLORATION OF FOOT JOINT	\$ 1,351.00
28011	INCISE TOE TENDON, MULTIPLE	\$ 1,038.00
28010	INCISE TOE TENDON, SINGLE	\$ 768.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
28008	INCISION OF FOOT/TOE FASCIA	\$ 1,087.00
28005	DRAIN FOOT BONE LESION	\$ 2,131.00
28003	TREAT FOOT INFECTIONS	\$ 2,077.00
28002	DRAIN FOOT, MULTIPLE AREAS	\$ 1,186.00
28001	DRAIN FOOT BURSA, SINGLE SPACE	\$ 634.00
27894	DECOMPRESSION OF LEG FASCIA	\$ 3,302.00
27893	DECOMPRESSION OF LEG FASCIA	\$ 2,376.00
27892	DECOMPRESSION OF LEG FASCIA	\$ 2,148.00
27889	AMPUTATION OF ANKLE	\$ 2,562.00
27888	AMPUTATION OF FOOT AT ANKLE	\$ 2,559.00
27886	RE-AMPUTATION OF LOWER LEG	\$ 2,599.00
27884	FOLLOWUP AMPUTATION OF LOWER LEG	\$ 2,272.00
27882	AMPUTATION OF LOWER LEG, GUILLOTINE	\$ 2,394.00
27881	AMPUTATION OF LOWER LEG, FIRST CAST	\$ 3,401.00
27880	AMPUTATION OF LOWER LEG	\$ 3,638.00
27871	FUSION OF TIBIOFIBULAR JOINT	\$ 2,669.00
27870	FUSION OF ANKLE JOINT	\$ 3,945.00
27860	MANIPULATE ANKLE JOINT, GENL ANESTH	\$ 651.00
27848	REPAIR ANKLE DISLOCATION W/FIXATION	\$ 3,087.00
27846	REPAIR ANKLE DISLOCATION	\$ 2,756.00
27842	TREAT ANKLE DISLOCATION W/ANESTH	\$ 1,906.00
27840	TREAT ANKLE DISLOCATION	\$ 1,456.00
27832	REPAIR LOWER LEG DISLOCATION	\$ 2,943.00
27831	TREAT LOWER LEG JOINT DISLOCATION	\$ 1,564.00
27830	TREAT LOWER LEG JOINT DISLOCATION	\$ 1,382.00
27829	TREAT LOWER LEG JOINT DISLOCATION	\$ 2,704.00
27828	TREAT LOWER LEG FX W/FIXATION	\$ 5,129.00
27827	TREAT LOWER LEG FX W/FIXATION	\$ 4,313.00
27826	TREAT LOWER LEG FX W/FIXATION	\$ 3,285.00
27825	TREAT LOWER LEG FX W/MANIP/TRACTION	\$ 1,916.00
27824	TREAT LOWER LEG FRACTURE	\$ 1,168.00
27823	REPAIR ANKLE FRACTURE W/FIXATION	\$ 3,796.00
27822	REPAIR ANKLE FRACTURE	\$ 3,350.00
27818	TREAT ANKLE FRACTURE W/MANIPULATION	\$ 1,686.00
27816	TREAT ANKLE FRACTURE	\$ 1,116.00
27814	REPAIR ANKLE FRACTURE	\$ 2,973.00
27810	TREAT ANKLE FRACTURE W/MANIPULATION	\$ 1,641.00
27808	TREAT ANKLE FRACTURE	\$ 1,161.00
27792	REPAIR ANKLE FRACTURE	\$ 2,500.00
27788	TREAT ANKLE FRACTURE W/MANIPULATION	\$ 1,488.00
27786	TREAT ANKLE FRACTURE	\$ 1,100.00
27784	REPAIR FIBULA FRACTURE	\$ 2,754.00
27781	TREAT FIBULA FX W/MANIPULATION	\$ 1,540.00
27780	TREAT FIBULA FRACTURE	\$ 1,079.00
27769	OPTX POST ANKLE FX	\$ 2,834.00
27768	CLTX POST ANKLE FX W/MNPJ	\$ 1,716.00
27767	CLTX POST ANKLE/FX	\$ 1,092.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
27766	REPAIR ANKLE FRACTURE	\$ 2,332.00
27762	TREAT ANKLE FRACTURE W/MANIPULATION	\$ 1,677.00
27760	TREAT ANKLE FRACTURE	\$ 1,172.00
27759	REPAIR TIBIA SHAFT FX W/IMPLANT	\$ 3,898.00
27758	REPAIR TIBIA SHAFT FRACTURE	\$ 3,487.00
27756	SKELETAL FIXATION, TIBIA SHAFT FX	\$ 2,227.00
27752	TREAT TIBIA SHAFT FX W/MANIPULATION	\$ 1,912.00
27750	TREAT TIBIA SHAFT FRACTURE	\$ 1,227.00
27745	REINFORCEMENT OF TIBIA	\$ 2,962.00
27742	SURG TO STOP LEG GROWTH,FEM/TIB/FIB	\$ 3,029.00
27740	SURGERY TO STOP LEG GROWTH, TIB/FIB	\$ 2,758.00
27734	SURGERY TO STOP LEG GROWTH, TIB/FIB	\$ 2,556.00
27732	SURGERY TO STOP LEG GROWTH, FIBULA	\$ 1,746.00
27730	SURGERY TO STOP LEG GROWTH, TIBIA	\$ 2,283.00
27727	REPAIR CONGENITAL TIBIA DEFECT	\$ 4,052.00
27726	REPAIR FIBULA NONUNION	\$ 3,719.00
27725	REPAIR TIBIA UNION BY SYNOSTOSIS	\$ 4,748.00
27724	REPAIR TIBIA UNION W/AUTOGRAFT	\$ 4,926.00
27722	REPAIR TIBIA UNION W/SLIDING GRAFT	\$ 3,483.00
27720	REPAIR TIBIA UNION W/O GRAFT	\$ 3,405.00
27715	LENGTHEN/SHORTEN LOWER LEG	\$ 4,189.00
27712	REALIGNMENT OF LOWER LEG	\$ 4,301.00
27709	INCISION OF TIBIA/FIBULA	\$ 4,544.00
27707	INCISION OF FIBULA	\$ 1,534.00
27705	INCISION OF TIBIA	\$ 2,933.00
27704	REMOVAL ANKLE IMPLANT	\$ 2,207.00
27703	REVISE ARTHROPLASTY, TOTAL ANKLE	\$ 4,320.00
27702	RECONSTRUCT ANKLE JOINT W/IMPLANT	\$ 3,731.00
27700	REVISION OF ANKLE JOINT	\$ 2,314.00
27698	FOLLOWUP REPAIR OF ANKLE LIGAMENT	\$ 2,426.00
27696	REPAIR OF DISRUPTED ANKLE LIGAMENTS	\$ 2,104.00
27695	REPAIR OF DISRUPTED ANKLE LIGAMENT	\$ 1,797.00
27692	ADDED LOWER LEG TENDON TRANSFER	\$ 403.00
27691	LOWER LEG TENDON TRANSFER, DEEP	\$ 2,850.00
27690	LOWER LEG TENDON TRANSFER, SUPERFIC	\$ 2,420.00
27687	REVISION OF CALF TENDON	\$ 1,723.00
27686	LENGT/SHORT LOWER LEG TENDONS, EACH	\$ 2,072.00
27685	LENGTHEN/SHORTEN LOWER LEG TENDON	\$ 1,750.00
27681	RELEASE OF LOWER LEG TENDONS	\$ 2,078.00
27680	RELEASE OF LOWER LEG TENDON	\$ 1,616.00
27676	REPAIR LOWER LEG TENDON DISLOCATION	\$ 2,282.00
27675	REPAIR LOWER LEG TENDON DISLOCATION	\$ 1,850.00
27665	FOLLOWUP REPAIR OF LEG TENDON, EACH	\$ 1,577.00
27664	REPAIR OF LEG EXTENSOR TENDON, EACH	\$ 1,372.00
27659	FOLLOWUP REPAIR OF LEG TENDON, EACH	\$ 1,767.00
27658	REPAIR OF LEG FLEXOR TENDON, EACH	\$ 1,395.00
27656	REPAIR OF LEG FASCIA DEFECT	\$ 1,535.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
27654	REPAIR, SECONDARY, ACHILLES TENDON	\$ 2,703.00
27652	REPAIR/GRAFT ACHILLES TENDON	\$ 2,489.00
27650	REPAIR RUPTURED ACHILLES TENDON	\$ 2,506.00
27648	INJECTION FOR ANKLE X-RAY	\$ 199.00
27647	RADICAL RESECTION, ANKLE/HEEL	\$ 3,687.00
27646	RADICAL RESECTION, FIBULA	\$ 6,028.00
27645	RADICAL TUMOR RESECTION, TIBIA	\$ 6,947.00
27641	PARTIAL REMOVAL OF FIBULA	\$ 2,537.00
27640	PARTIAL REMOVAL OF TIBIA	\$ 3,211.00
27638	REMOVE/GRAFT LOWER LEG BONE LESION	\$ 2,962.00
27637	REMOVE/GRAFT LOWER LEG BONE LESION	\$ 2,897.00
27635	REMOVE LOWER LEG BONE LESION	\$ 2,237.00
27634	EXC LEG/ANKLE TUM DEP 5 CM/>	\$ 2,668.00
27632	EXC LEG/ANKLE LES SC 3 CM/>	\$ 1,621.00
27630	REMOVE LOWER LEG TENDON LESION	\$ 1,363.00
27626	REMOVE ANKLE JOINT TENDON SHEATH	\$ 2,297.00
27625	REMOVE ANKLE JOINT LINING	\$ 2,196.00
27620	EXPLORE, TREAT ANKLE JOINT	\$ 1,703.00
27619	REMOVE LOWER LEG TUMOR, DEEP	\$ 1,760.00
27618	REMOVE LOWER LEG TUMOR,SUBCUTANEOUS	\$ 1,181.00
27616	RADICAL RESECT LEG ANKLE 5CM GREAT	\$ 5,018.00
27615	RADICAL RESECTION, LOWER LEG TUMOR	\$ 4,022.00
27614	BIOPSY OF LOWER LEG TISSUE, DEEP	\$ 1,550.00
27613	BIOPSY OF LOWER LEG TISSUE,SUPERFIC	\$ 600.00
27612	INCISE ANKLE JOINT, RELEASE CAPSULE	\$ 2,113.00
27610	EXPLORE/TREAT ANKLE JOINT	\$ 2,498.00
27607	INCISION, LEG OR ANKLE	\$ 2,328.00
27606	INCISE ACHILL TEND, GENL ANES, PERC	\$ 1,057.00
27605	INCISE ACHILL TEND, LOCAL ANES PERC	\$ 687.00
27604	DRAIN LOWER LEG/ANKLE BURSA	\$ 1,268.00
27603	DRAIN LOWER LEG ABSCESS/HEMATOMA	\$ 1,507.00
27602	DECOMPRESSION OF LOWER LEG	\$ 1,934.00
27601	DECOMPRESSION OF LOWER LEG	\$ 1,735.00
27600	DECOMPRESSION OF LOWER LEG	\$ 1,591.00
27598	AMPUTATE LOWER LEG AT KNEE	\$ 2,832.00
27596	RE-AMPUTATION OF LEG AT THIGH	\$ 2,846.00
27594	FOLLOWUP AMPUTATION, LEG AT THIGH	\$ 2,021.00
27592	AMPUTATE LEG AT THIGH, GUILLOTINE	\$ 2,698.00
27591	AMPUTATE LEG AT THIGH, FIRST CAST	\$ 3,774.00
27590	AMPUTATE LEG AT THIGH	\$ 3,184.00
27580	FUSION OF KNEE	\$ 5,697.00
27570	MANIPULATE KNEE JOINT, GEN'L ANESTH	\$ 583.00
27566	REPAIR KNEECAP DISLOCATION	\$ 3,493.00
27562	TREAT KNEECAP DISLOCATION W/ANESTH	\$ 1,886.00
27560	TREAT KNEECAP DISLOCATION	\$ 1,329.00
27558	REPAIR KNEE DISLOCATION, LIGAMENTS	\$ 4,677.00
27557	REPAIR KNEE DISLOCATION, LIGAMENTS	\$ 4,099.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
27556	REPAIR KNEE DISLOCATION	\$ 3,435.00
27552	TREAT KNEE DISLOCATION W/ANESTHESIA	\$ 2,445.00
27550	TREAT KNEE DISLOCATION	\$ 1,880.00
27540	REPAIR KNEE FRACTURE	\$ 3,155.00
27538	TREAT KNEE FRACTURE(S)	\$ 1,715.00
27536	REPAIR BICONDYLAR KNEE FRACTURE	\$ 4,643.00
27535	REPAIR UNICONDYLAR KNEE FRACTURE	\$ 3,509.00
27532	TREAT KNEE FRACTURE W/TRACTION	\$ 2,240.00
27530	TREAT KNEE FRACTURE	\$ 1,089.00
27524	REPAIR KNEECAP FRACTURE W/FIXATION	\$ 2,930.00
27520	TREAT KNEECAP FRACTURE	\$ 1,141.00
27519	REPAIR THIGH GROWTH PLATE	\$ 3,489.00
27517	TREAT THIGH GROWTH PLATE, W/MANIPUL	\$ 2,673.00
27516	TREAT THIGH GROWTH PLATE SEPARATION	\$ 1,860.00
27514	REPAIR FEMUR FRACTURE	\$ 3,785.00
27513	REPAIR THIGH FRACTURE	\$ 4,864.00
27511	REPAIR THIGH FRACTURE	\$ 3,910.00
27510	TREAT FEMUR FX W/MANIPULATION	\$ 2,651.00
27509	SKELETAL FIXATION OF THIGH FRACTURE	\$ 2,568.00
27508	TREAT FEMUR FRACTURE	\$ 1,921.00
27507	REPAIR FEMUR SHAFT FX W/PLATE/SCREW	\$ 3,797.00
27506	REPAIR FEMUR SHAFT FRACTURE	\$ 5,222.00
27503	TREAT THIGH FRACTURE W/MANIPULATION	\$ 3,121.00
27502	TREAT FEMUR SHAFT FX W/MANIPULATION	\$ 2,967.00
27501	TREAT THIGH FRACTURE	\$ 1,930.00
27500	TREAT FEMUR SHAFT FRACTURE	\$ 1,867.00
27499	DECOMPRESS THIGH/KNEE W/DEBRIDEMENT	\$ 2,732.00
27498	DECOMPRESS THIGH/KNEE, MULT COMPART	\$ 2,546.00
27497	DECOMPRESS THIGH/KNEE W/DEBRIDEMENT	\$ 2,265.00
27496	DECOMPRESS THIGH/KNEE, 1 COMPART	\$ 2,114.00
27495	REINFORCEMENT OF THIGH	\$ 4,408.00
27488	REMOVAL OF KNEE PROSTHESIS	\$ 4,691.00
27487	REVISE KNEE JOINT REPLACEMENT	\$ 6,890.00
27486	REVISE KNEE JOINT REPLACEMENT	\$ 5,504.00
27485	SURGERY TO STOP LEG GROWTH	\$ 2,614.00
27479	SURGERY TO STOP LEG GROWTH	\$ 3,588.00
27477	SURGERY TO STOP LEG GROWTH, TIB/FIB	\$ 2,856.00
27475	SURGERY TO STOP LEG GROWTH, FEMUR	\$ 2,581.00
27472	REPAIR NON/MALUNION OF THIGH BONE	\$ 4,935.00
27470	REPAIR NON/MALUNION OF THIGH BONE	\$ 4,602.00
27468	SHORTEN/LENGTHEN THIGH BONES	\$ 5,251.00
27466	LENGTHENING OF THIGH BONE	\$ 4,631.00
27465	SHORTENING OF THIGH BONE	\$ 4,897.00
27457	REALIGNMENT OF KNEE	\$ 3,760.00
27455	REALIGNMENT OF KNEE	\$ 3,716.00
27454	REALIGNMENT OF THIGH BONES	\$ 5,069.00
27450	INCISION OF THIGH BONE W/FIXATION	\$ 3,960.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
27448	INCISION OF THIGH BONE	\$ 3,203.00
27447	TOTAL KNEE REPLACEMENT	\$ 5,302.00
27446	REVISION OF KNEE JOINT, MED/LATERAL	\$ 4,531.00
27445	REVISE KNEE JOINT, HINGE PROSTHE	\$ 4,912.00
27443	REVISION OF KNEE JOINT & LINING	\$ 3,167.00
27442	REVISION OF KNEE JOINT	\$ 3,404.00
27441	REVISION OF KNEE JOINT & LINING	\$ 3,216.00
27440	REVISION OF KNEE JOINT	\$ 3,113.00
27438	REVISION OF KNEECAP W/IMPLANT	\$ 3,283.00
27437	REVISION OF KNEECAP	\$ 2,564.00
27435	RELEASE OF KNEE JOINT	\$ 3,155.00
27430	REVISION OF THIGH MUSCLES	\$ 2,887.00
27429	RECONSTRUCTION OF KNEE LIGAMENTS	\$ 4,894.00
27428	RECONSTRUCTION OF KNEE LIGAMENTS	\$ 4,351.00
27427	RECONSTRUCTION OF KNEE LIGAMENTS	\$ 2,762.00
27425	RELEASE OF KNEE RETINACULUM	\$ 1,742.00
27424	REVISE/REMOVE UNSTABLE KNEECAP	\$ 2,914.00
27422	REVISE RECURR DISLOC KNCP W/REALIGN	\$ 2,896.00
27420	REVISE RECURR DISLOCATING KNEECAP	\$ 2,893.00
27418	REVISION OF DEGENERATED KNEECAP	\$ 3,218.00
27416	OSTEOCHONDRAL KNEE AUTOGRAFT	\$ 3,833.00
27415	OSTEOCHONDRAL ALLOGRAFT, KNEE OPEN	\$ 5,367.00
27412	AUTOLOGUS CHONDROCYTE IMPLANTATION	\$ 6,454.00
27409	REPAIR OF KNEE LIGAMENTS	\$ 3,777.00
27407	REPAIR OF KNEE LIGAMENT/CAPSULE	\$ 3,100.00
27405	REPAIR OF KNEE LIGAMENT/CAPSULE	\$ 2,627.00
27403	REPAIR OF KNEE CARTILAGE	\$ 2,502.00
27400	REVISE THIGH MUSCLES/TENDONS	\$ 2,706.00
27397	TRANSPL THIGH TENDONS TO KNEE 1 LEG	\$ 3,569.00
27396	TRANSPL THIGH TENDON TO KNEE, SINGL	\$ 2,399.00
27395	LENGTHEN THIGH TENDON MLT BOTH LEGS	\$ 3,432.00
27394	LENGTHEN THIGH TENDON, MLT, ONE LEG	\$ 2,547.00
27393	LENGTHENING OF THIGH TENDON, SINGLE	\$ 1,980.00
27392	INCISE THIGH TENDON, MLT, BOTH LEGS	\$ 2,776.00
27391	INCISE THIGH TENDON, MULT, ONE LEG	\$ 2,184.00
27390	INCISION OF THIGH TENDON, SINGLE	\$ 1,739.00
27386	REPAIR/GRAFT OF THIGH MUSCLE	\$ 3,284.00
27385	REPAIR OF THIGH MUSCLE	\$ 2,277.00
27381	REPAIR/GRAFT OF KNEECAP TENDON	\$ 3,142.00
27380	REPAIR OF KNEECAP TENDON	\$ 2,356.00
27372	REMOVE DEEP THIGH/KNEE FOREIGN BODY	\$ 1,563.00
27365	RADICAL TUMOR RESECTION, FEMUR/KNEE	\$ 8,087.00
27364	RESECT THIGH/KNEE TUM 5 CM/>	\$ 6,162.00
27360	PARTIAL REMOVAL OF LEG BONE(S)	\$ 3,413.00
27358	REMOVE FEMUR LESION, W/FIXATION	\$ 1,090.00
27357	REMOVE FEMUR LESION, W/AUTOGRAFT	\$ 3,178.00
27356	REMOVE FEMUR LESION, W/ALLOGRAFT	\$ 2,877.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
27355	REMOVAL OF FEMUR LESION	\$ 2,352.00
27350	REMOVAL OF KNEECAP	\$ 2,537.00
27347	REMOVE KNEE LESION	\$ 2,043.00
27345	REMOVAL OF KNEE CYST	\$ 1,876.00
27340	REMOVAL OF KNEECAP BURSA	\$ 1,438.00
27339	EXC THIGH/KNEE TUM DEP 5CM/>	\$ 2,980.00
27337	EXCISION THIGH KNEE AREA 3CM GREATER	\$ 1,656.00
27335	REMOVE KNEE JNT LINING ANT AND POST	\$ 2,981.00
27334	REMOVE KNEE JNT LINING, ANT OR POST	\$ 2,664.00
27333	REMOV KNEE CART, MED AND LATERAL	\$ 2,282.00
27332	REMOVE KNEE CART, MED OR LATERAL	\$ 2,507.00
27331	EXPLORATION/TREATMENT OF KNEE JOINT	\$ 1,841.00
27330	BIOPSY OF KNEE JOINT LINING	\$ 1,591.00
27329	RADICAL RESECTION, THIGH/KNEE TUMOR	\$ 4,111.00
27328	REMOVE DEEP/MUSCULAR THIGH TUMOR	\$ 2,448.00
27327	REMOVE SUBCUTANEOUS THIGH TUMOR	\$ 1,222.00
27326	NURECTOMY POPLITEAL (GASTROCNEMIUS)	\$ 2,010.00
27325	NEURECTOMY HAMSTRING MUSCLE	\$ 2,180.00
27324	BIOPSY THIGH/KNEE SFT TISSUE, DEEP	\$ 1,584.00
27323	BIOPSY THIGH/KNEE TISSUE, SUPERFIC	\$ 671.00
27310	INCISE KNEE JOINT FOR INFECTION	\$ 2,848.00
27307	INCISE THIGH TENDONS, PERCUT, MULT	\$ 1,866.00
27306	INCISE THIGH TENDON, PERCUTAN, SNGL	\$ 1,277.00
27305	INCISION OF THIGH TENDON & FASCIA	\$ 1,868.00
27303	INCISE THIGH/KNEE BONE LESION, DEEP	\$ 2,497.00
27301	DRAINAGE OF THIGH/KNEE LESION	\$ 1,969.00
27295	AMPUTATION OF LEG AT HIP	\$ 4,951.00
27290	HINDQUARTER AMPUTATION	\$ 6,360.00
27286	FUSION/GRAFT OF HIP JOINT	\$ 6,458.00
27284	FUSION/GRAFT OF HIP JOINT	\$ 6,317.00
27282	FUSION/GRAFT OF PUBIC BONES	\$ 3,343.00
27280	FUSION/GRAFT OF SACROILIAC JOINT	\$ 5,478.00
27279	FUSION/GRAFT OF SACROILIAC JOINT	\$ 3,533.00
27275	MANIPULATE HIP JOINT, GEN'L ANESTH	\$ 704.00
27269	OPTX THIGH FX	\$ 4,872.00
27268	CLTX THIGH FX W/MNPJ	\$ 2,108.00
27267	CLTX THIGH FX	\$ 1,690.00
27266	TREAT POSTSURGERY HIP DISLOCATION	\$ 2,263.00
27265	TREAT POSTSURGERY HIP DISLOCATION	\$ 1,572.00
27259	REPAIR SPONTANEOUS HIP DISLOCATION	\$ 6,058.00
27258	REPAIR SPONTANEOUS HIP DISLOCATION	\$ 4,341.00
27257	TREAT HIP DISLOC, W/MANIP & ANESTH	\$ 1,411.00
27256	TREAT SPONTANEOUS HIP DISLOCATION	\$ 942.00
27254	REPAIR TRAUMATIC HIP DISLOCATION	\$ 4,983.00
27253	REPAIR TRAUMATIC HIP DISLOCATION	\$ 3,683.00
27252	TREAT HIP DISLOCATION, W/ANESTHESIA	\$ 2,949.00
27250	TREAT TRAUMATIC HIP DISLOCATION	\$ 731.00

CPT		Standard Fee
Code	CPT Code Description	
27248	REPAIR THIGH FRACTURE	\$ 2,916.00
27246	TREAT THIGH FRACTURE	\$ 1,495.00
27245	REPAIR THIGH FRACTURE, W/IMPLANT	\$ 4,797.00
27244	REPAIR THIGH FRACTURE, W/IMPLANT	\$ 4,806.00
27240	TREAT THIGH FRACTURE W/MANIPULATION	\$ 3,721.00
27238	TREAT THIGH FRACTURE	\$ 1,801.00
27236	REPAIR THIGH FRACTURE	\$ 4,667.00
27235	SKELETAL FIXATION OF THIGH FRACTURE	\$ 3,544.00
27232	TREAT THIGH FRACTURE W/MANIPULATION	\$ 2,931.00
27230	TREAT THIGH FRACTURE	\$ 1,839.00
27228	REPAIR HIP FRACTURE(S), W/FIXATION	\$ 7,358.00
27227	REPAIR HIP FRACTURE(S), W/FIXATION	\$ 6,477.00
27226	REPAIR HIP WALL FRACTURE W/FIXATION	\$ 4,130.00
27222	TREAT HIP SOCKET FRACTURE, W/MANIP	\$ 3,797.00
27220	TREAT HIP SOCKET FRACTURE(S)	\$ 1,981.00
27202	REPAIR TAIL BONE FRACTURE	\$ 2,064.00
27200	TREAT TAIL BONE FRACTURE	\$ 723.00
27187	REINFORCEMENT OF HIP BONES	\$ 3,888.00
27185	REVISION OF FEMUR EPIPHYSIS	\$ 2,798.00
27181	REPAIR SLIPPED EPIPHYSIS W/FIXATION	\$ 4,376.00
27179	REVISE SLIPPED EPIPHYSIS/FEMUR NECK	\$ 3,819.00
27178	REPAIR SLIPPED EPIPHYSIS, MANIP/PIN	\$ 3,590.00
27177	REPAIR SLIPPED EPIPHYSIS, PIN/GRAFT	\$ 4,352.00
27176	TREAT SLIPPED EPIPHYSIS W/PINNING	\$ 3,590.00
27175	TREAT SLIPPED EPIPHYSIS W/TRACTION	\$ 2,600.00
27170	REPAIR/GRAFT FEMUR HEAD/NECK	\$ 4,598.00
27165	INCISION OF FEMUR W/FIXATION/CAST	\$ 5,361.00
27161	INCISION OF NECK OF FEMUR	\$ 4,769.00
27158	OSTEOTOMY, PELVIS, BILATERAL	\$ 5,484.00
27156	REVISION OF HIP BONES	\$ 6,703.00
27151	INCISION OF HIP BONES	\$ 6,214.00
27147	REVISION OF HIP BONE	\$ 5,741.00
27146	INCISION OF HIP BONE	\$ 5,001.00
27140	TRANSPLANT THIGH BONE	\$ 3,493.00
27138	REVISION OF TOTAL HIP JOINT SURGERY	\$ 5,992.00
27137	REVISION OF TOTAL HIP JOINT SURGERY	\$ 5,766.00
27134	REVISION OF TOTAL HIP JOINT SURGERY	\$ 7,504.00
27132	REVISE HIP SURGERY TO TOTAL REPLACE	\$ 6,560.00
27130	TOTAL HIP REPLACEMENT & PROSTHESIS	\$ 5,311.00
27125	PARTIAL HIP REPLACEMENT & PROSTH	\$ 4,422.00
27122	RECONSTRUCTION OF HIP SOCKET	\$ 4,301.00
27120	RECONSTRUCTION OF HIP SOCKET	\$ 5,083.00
27111	TRANSFER ILIOPSOAS MUSCLE TO HIP	\$ 3,517.00
27110	TRANSFER ILIOPSOAS MUSCLE TO HIP	\$ 3,790.00
27105	TRANSFER OF SPINAL MUSCLE TO HIP	\$ 3,383.00
27100	TRANSFER OF ABDOMINAL MUSCLE TO HIP	\$ 3,227.00
27098	TRANSFER HIP TENDON TO PELVIS	\$ 2,705.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
27097	REVISION, HAMSTRING, PROXIMAL	\$ 2,660.00
27096	NULL	\$ 304.00
27095	INJECTION FOR HIP X-RAY, W/ANESTH	\$ 322.00
27093	INJECTION FOR HIP X-RAY	\$ 256.00
27091	REMOVAL OF HIP PROSTHESIS, COMPLIC	\$ 6,252.00
27090	REMOVAL OF HIP PROSTHESIS	\$ 3,245.00
27087	REMOVE PELVIS/HIP OBJECT, DEEP	\$ 2,413.00
27086	REMOVE PELVIS/HIP OBJECT, SUPERFIC	\$ 649.00
27080	REMOVAL OF TAIL BONE	\$ 2,023.00
27078	RADICAL RESECTION OF HIP TUMOR	\$ 8,088.00
27077	RADICAL RESECTION OF HIP TUMOR	\$ 11,097.00
27076	RADICAL RESECTION OF HIP TUMOR	\$ 9,942.00
27075	RADICAL RESECTION OF HIP TUMOR	\$ 8,207.00
27071	PARTIAL REMOVAL OF HIP BONE, DEEP	\$ 3,679.00
27070	PARTIAL REMOVAL HIP BONE, SUPERFIC	\$ 3,413.00
27067	REMOVE HIP BONE LESION, W/AUTOGRAFT	\$ 4,042.00
27066	REMOVAL OF HIP BONE LESION, DEEP	\$ 3,153.00
27065	REMOVAL OF HIP BONE LESION,SUPERFIC	\$ 2,019.00
27062	REMOVAL OF FEMUR BURSA/LESION	\$ 1,762.00
27060	REMOVAL OF ISCHIAL BURSA	\$ 1,805.00
27059	RESECT HIP/PELV TUM 5 CM/>	\$ 7,101.00
27057	NULL	\$ 3,962.00
27054	REMOVAL OF HIP JOINT LINING	\$ 2,672.00
27052	BIOPSY OF HIP JOINT	\$ 2,243.00
27050	BIOPSY OF SACROILIAC JOINT	\$ 1,557.00
27049	RADICAL RESECTION, HIP/PELVIS TUMOR	\$ 5,298.00
27048	REMOVE HIP/PELVIS TUMOR, DEEP	\$ 2,401.00
27047	REMOVE HIP/PELVIS TUMOR, SUBCU TISS	\$ 1,412.00
27045	EXC HIP/PELV TUM DEEP 5 CM/>	\$ 2,906.00
27043	EXCISION PELVIS AND HIP 3CM GREATER	\$ 1,863.00
27041	BIOPSY PELVIS/HIP SFT TISSUE, DEEP	\$ 2,709.00
27040	BIOPSY PELVIS/HIP TISSUES, SUPERFIC	\$ 756.00
27036	RELEASE OF HIP FLEXION CONTRACTURE	\$ 3,946.00
27035	DENERVATION OF HIP JOINT	\$ 4,132.00
27033	EXPLORE/REMOVE OBJECT, HIP JOINT	\$ 3,801.00
27030	DRAINAGE OF HIP JOINT	\$ 3,669.00
27027	NULL	\$ 3,471.00
27025	INCISION OF HIP/THIGH FASCIA	\$ 3,588.00
27006	TENOTOMY, HIP FLEX/EXTEN, OPEN	\$ 2,748.00
27005	TENOTOMY, HIP FLEXOR(S), OPEN	\$ 2,807.00
27003	INCISION OF HIP TENDON, NERVE(S)	\$ 2,324.00
27001	INCISION OF HIP TENDON, OPEN	\$ 2,108.00
27000	INCISION OF HIP TENDON, CLSD, PERCU	\$ 1,513.00
26992	INCISE BONE CORTEX PELVIS/HIP JOINT	\$ 3,858.00
26991	DRAIN PELVIS/HIP JOINT BURSA	\$ 2,048.00
26990	DRAIN PELVIS/HIP JOINT LESION	\$ 2,545.00
26952	AMPUTATION OF FINGER/THUMB W/FLAPS	\$ 2,520.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
26951	AMPUTATION OF FINGER/THUMB	\$ 2,555.00
26910	AMPUTATION OF METACARPAL BONE	\$ 2,825.00
26863	FUSION/GRAFT OF ADD'L FINGER JOINT	\$ 901.00
26862	FUSION OF FINGER JOINT W/AUTOGRAFT	\$ 2,819.00
26861	FUSION OF ADDED FINGER JOINT	\$ 400.00
26860	FUSION OF FINGER JOINT	\$ 2,211.00
26852	FUSION OF KNUCKLE W/AUTOGRAFT	\$ 3,094.00
26850	FUSION OF KNUCKLE	\$ 2,701.00
26844	FUSION/GRAFT OF HAND JOINT/FINGERS	\$ 3,217.00
26843	FUSION OF HAND JOINT/FINGERS	\$ 2,903.00
26842	FUSION OF THUMB W/AUTOGRAFT	\$ 3,049.00
26841	FUSION OF THUMB	\$ 2,833.00
26820	THUMB FUSION W/AUTOGRAFT	\$ 3,096.00
26785	REPAIR FINGER DISLOCATION, SINGLE	\$ 2,102.00
26776	PIN FINGER DISLOCATION, W/MANIP	\$ 1,714.00
26775	TREAT FINGER DISLOCATION, W/MANIP	\$ 1,325.00
26770	TREAT FINGER DISLOCATION, SINGLE	\$ 995.00
26765	REPAIR DISTAL FINGER FRACTURE, EACH	\$ 1,925.00
26756	PIN DISTAL FINGER FRACTURE, EACH	\$ 1,616.00
26755	TREAT FINGER FRACTURE, W/MANIP, EA	\$ 1,054.00
26750	TREAT DISTAL FINGER FRACTURE, EACH	\$ 715.00
26746	REPAIR FINGER FRACTURE, EACH	\$ 2,861.00
26742	TREAT FINGER FRACTURE, W/MANIP, EA	\$ 1,289.00
26740	TREAT FINGER FRACTURE, EACH	\$ 833.00
26735	REPAIR FINGER FRACTURE, EACH	\$ 2,288.00
26727	PIN FINGER FRACTURE, EACH	\$ 1,810.00
26725	TREAT FINGER FRACTURE,W/MANIP,EACH	\$ 1,167.00
26720	TREAT FINGER FRACTURE, EACH	\$ 709.00
26715	REPAIR KNUCKLE DISLOCATION, SINGLE	\$ 2,201.00
26706	PIN KNUCKLE DISLOCATION, SINGLE	\$ 1,699.00
26705	TREAT KNUCKLE DISLOCATION, W/ANESTH	\$ 1,471.00
26700	TREAT KNUCKLE DISLOCATION, SINGLE	\$ 1,190.00
26686	REPAIR HAND DISLOCATION, Cmplx/Mult	\$ 2,429.00
26685	REPAIR HAND DISLOCATION, SINGLE	\$ 2,213.00
26676	PIN HAND DISLOCATION	\$ 1,942.00
26675	TREAT HAND DISLOCATION, W/ANESTH	\$ 1,625.00
26670	TREAT HAND DISLOCATION	\$ 1,187.00
26665	REPAIR THUMB FX/DISLOC (BENNETT)	\$ 2,410.00
26650	PIN THUMB FX/DISLOCATION (BENNETT)	\$ 1,841.00
26645	TREAT THUMB FX/DISLOC (BENNETT)	\$ 1,522.00
26641	TREAT THUMB DISLOCATION	\$ 1,338.00
26615	REPAIR METACARPAL FRACTURE	\$ 2,214.00
26608	SKELETAL FIXATION OF METACARPAL FX	\$ 1,845.00
26607	TREAT METACARPAL FX, W/MANIP/FIXATN	\$ 1,877.00
26605	TREAT METACARPAL FX, W/MANIPULATION	\$ 1,128.00
26600	TREAT METACARPAL FRACTURE, EACH	\$ 1,074.00
26596	EXCISE CONSTRICTING FINGER TISSUE	\$ 3,026.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
26593	RELEASE INTRINSIC MUSCLES, HAND, EA	\$ 2,345.00
26591	REPAIR INTRINSIC MUSCLES, HAND, EA	\$ 1,730.00
26590	REPAIR FINGER DEFORMITY	\$ 5,503.00
26587	RECONSTRUCT EXTRA FINGER	\$ 4,060.00
26580	REPAIR CLEFT HAND	\$ 5,904.00
26568	LENGTHEN METACARPAL/FINGER	\$ 3,512.00
26567	CORRECT FINGER DEFORMITY, EACH	\$ 2,660.00
26565	CORRECT METACARPAL DEFORMITY, EACH	\$ 2,646.00
26562	REPAIR OF WEB FINGER, COMPLEX	\$ 5,233.00
26561	REPAIR OF WEB FINGER W/FLAP/GRAFT	\$ 3,705.00
26560	REPAIR OF WEB FINGER W/FLAP	\$ 2,330.00
26556	MICROVASC FREE TOE JOINT TRANSFER	\$ 13,291.00
26555	POSITIONAL CHANGE OF FINGER	\$ 5,335.00
26554	MICROVASC TOE/HAND XFER NOT GRT DBL	\$ 14,935.00
26553	MICROVASC TOE/HAND XFER NOT GRT SNG	\$ 12,798.00
26551	MICROVASC TOE-TO-HAND TRANS GRT TOE	\$ 12,881.00
26550	CONSTRUCT THUMB REPLACEMENT	\$ 6,398.00
26548	RECONSTRUCT FINGER JOINT, EACH	\$ 2,961.00
26546	REPAIR NONUNION, METACARPAL/PHALYNX	\$ 3,860.00
26545	RECONSTRUCT FINGER JOINT, EACH	\$ 2,787.00
26542	RECON HAND JOINT W/GRAFT, LOCAL TIS	\$ 2,656.00
26541	RECONSTRUCT HAND JOINT W/GRAFT	\$ 3,119.00
26540	REPAIR HAND JOINT	\$ 2,574.00
26536	REVISE FINGER JOINT W/PROSTH, EACH	\$ 2,771.00
26535	REVISION OF FINGER JOINT, EACH	\$ 1,660.00
26531	REVISE KNUCKLE JOINT W/PROSTH, EACH	\$ 2,414.00
26530	REVISION OF KNUCKLE JOINT, EACH	\$ 2,077.00
26525	RELEASE FINGER CONTRACTURE, EACH	\$ 2,522.00
26520	RELEASE KNUCKLE CONTRACTURE, EACH	\$ 2,515.00
26518	FUSION OF KNUCKLE JOINTS,3-4 DIGITS	\$ 3,284.00
26517	FUSION OF KNUCKLE JOINTS, 2 DIGITS	\$ 3,240.00
26516	FUSION OF KNUCKLE JOINT, 1 DIGIT	\$ 2,742.00
26510	THUMB TENDON TRANSFER	\$ 2,349.00
26508	RELEASE THUMB MUSCLE CONTRACTURE	\$ 2,480.00
26502	HAND TENDON RECONSTRUCTION/GRAFT	\$ 2,796.00
26500	HAND TENDON RECONSTRUCTION	\$ 2,429.00
26499	CORRECT CLAW FINGER, OTHER METHODS	\$ 3,259.00
26498	TENDON TRANSFER, ALL FOUR FINGERS	\$ 4,481.00
26497	TENDON TRANSFER, RING/SMALL FINGER	\$ 3,396.00
26496	REVISE THUMB TENDON, OTHER METHODS	\$ 3,321.00
26494	HAND TENDON/MUSCLE TRANSFER, THUMB	\$ 3,138.00
26492	TENDON TRANSFER WITH GRAFT, THUMB	\$ 3,471.00
26490	REVISE THUMB TENDON SUPERFICIALIS	\$ 3,125.00
26489	TRANSPLANT/GRAFT PALM TENDON, EACH	\$ 3,645.00
26485	TRANSPLANT PALM TENDON, EACH	\$ 3,121.00
26483	TRANSPLANT/GRAFT HAND TENDON, EACH	\$ 3,254.00
26480	TRANSPLANT HAND TENDON, EACH	\$ 2,915.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
26479	TENDON SHORTENING, HAND/FINGER	\$ 2,475.00
26478	TENDON LENGTHENING, HAND/FINGER	\$ 2,427.00
26477	TENDON SHORTENING, HAND/FINGER	\$ 2,268.00
26476	TENDON LENGTHENING, HAND/FINGER	\$ 2,343.00
26474	FINGER TENDON FUSION, DISTAL JOINT	\$ 2,376.00
26471	FINGER TENDON FUSION,PROXIMAL JOINT	\$ 2,405.00
26460	INCISE HAND/FINGER TENDON, OPEN, EA	\$ 1,573.00
26455	INCISION FINGER TENDON, OPEN, EACH	\$ 1,609.00
26450	INCISION PALM TENDON, OPEN, EACH	\$ 1,620.00
26449	RELEASE FRARM/HAND TEND, COMPLEX EA	\$ 2,670.00
26445	RELEASE HAND/FINGER TENDON, EACH	\$ 2,231.00
26442	RELEASE PALM & FINGER TENDON, EACH	\$ 3,693.00
26440	RELEASE PALM/FINGER TENDON, EACH	\$ 2,394.00
26437	REALIGNMENT OF HAND TENDONS, EACH	\$ 2,435.00
26434	REPAIR FINGER TENDON W/GRAFT	\$ 2,559.00
26433	REPAIR FINGER TENDON W/O GRAFT	\$ 2,078.00
26432	REPAIR FINGER TENDON, CLOSED	\$ 1,953.00
26428	SECONDARY REP/GRFT FINGER TENDON EA	\$ 2,964.00
26426	SECONDARY FINGER/HAND TENDON REP EA	\$ 1,935.00
26420	REPAIR FINGER TENDON W/GRAFT, EACH	\$ 2,753.00
26418	REPAIR FINGER TENDON, EACH	\$ 2,262.00
26416	REMOVE HAND/FINGER TENDON IMPLANT	\$ 3,462.00
26415	REMOVE HAND TENDON, ADD IMPLANT	\$ 3,191.00
26412	REPAIR HAND TENDON W/FREE GRAFT, EA	\$ 2,629.00
26410	REPAIR HAND TENDON, EACH	\$ 2,202.00
26392	REMOVE IMPLNT, INSERT GRAFT EA TEND	\$ 3,791.00
26390	REVISE HAND/FINGER TENDON, EA	\$ 3,291.00
26373	SECONDARY PROFUNDUS TENDON REP, EA	\$ 3,312.00
26372	SECOND PROFUNDUS TENDON REP/GRFT EA	\$ 3,453.00
26370	REPAIR PROFUNDUS TENDON, PRIMARY EA	\$ 2,927.00
26358	SECOND REP FNGR/HAND TEND W/GRFT EA	\$ 3,823.00
26357	SECONDARY REP FNGR/HAND TENDON, EA	\$ 3,449.00
26356	REPAIR FINGER/HAND TENDON, EACH	\$ 3,052.00
26352	SECONDARY REP/GRFT HAND TENDON, EA	\$ 3,105.00
26350	REPAIR FINGER/HAND TENDON, EACH	\$ 2,770.00
26341	MANIPULAT PALM CORD POST INJ	\$ 292.00
26340	MANIPULATE FINGER W/ANESTH	\$ 1,298.00
26320	REMOVE IMPLANT FROM HAND/FINGER	\$ 1,336.00
26262	RADICAL RESECTION, FINGER	\$ 2,453.00
26260	RADICAL RESECTION, FINGER	\$ 3,115.00
26250	RADICAL RESECTION, HAND	\$ 4,164.00
26236	PARTIAL REMOVAL OF FINGER BONE	\$ 1,699.00
26235	PARTIAL REMOVAL OF FINGER BONE	\$ 1,899.00
26230	PARTIAL REMOVAL OF HAND BONE	\$ 1,924.00
26215	REMOVE FINGER LESION W/ AUTOGRAFT	\$ 2,195.00
26210	REMOVE FINGER LESION	\$ 1,704.00
26205	REMOVE HAND BONE LESION W/AUTOGRAFT	\$ 2,352.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
26200	REMOVE HAND BONE LESION	\$ 1,742.00
26185	THUMB OR FINGER SESAMOIDECTOMY	\$ 2,135.00
26180	REMOVAL OF FINGER TENDON, EA TENDON	\$ 1,711.00
26170	REMOVAL OF PALM TENDON, EACH	\$ 1,562.00
26160	REMOVE TENDON SHEATH LESION, HAND	\$ 1,252.00
26145	EXCISE TENDON, PALM/FINGER, EA TEND	\$ 1,981.00
26140	REVISE FINGER JOINT, EACH	\$ 1,947.00
26135	REVISE FINGER JOINT, EACH	\$ 2,128.00
26130	REMOVE WRIST JOINT LINING	\$ 1,805.00
26125	FASCIECTOMY, PRT PALMAR EA ADD DIG	\$ 1,057.00
26123	FASCIECTOMY, PRT PALMER, SNGL DIGIT	\$ 3,215.00
26121	RELEASE CONTRACTURE, PALM ONLY	\$ 2,305.00
26118	RADICAL RESEC HAND/FINGER 3CM GREAT	\$ 4,089.00
26117	RADICAL RESECTION,HAND/FINGER TUMOR	\$ 2,883.00
26116	REMOVAL OF HAND/FINGER LESION, DEEP	\$ 2,023.00
26115	REMOVAL OF HAND/FINGER LESION	\$ 1,269.00
26113	EXC HAND TUM DEEP 1.5 CM/>	\$ 2,107.00
26111	EXC HAND LES SC 1.5 CM/>	\$ 1,607.00
26110	BIOPSY OF FINGER JOINT LINING	\$ 1,236.00
26105	BIOPSY OF FINGER JOINT LINING	\$ 1,316.00
26100	BIOPSY OF HAND JOINT LINING	\$ 1,306.00
26080	EXPLORE/TREAT FINGER JOINT	\$ 1,508.00
26075	EXPLORE/TREAT FINGER JOINT	\$ 1,284.00
26070	EXPLORE/TREAT HAND JOINT	\$ 1,227.00
26060	INCISION OF FINGER TENDON, PERCUTAN	\$ 981.00
26055	TENDON SHEATH INCISION, FINGER	\$ 1,165.00
26045	RELEASE PALM CONTRACTURE, OPEN PRTL	\$ 1,809.00
26040	RELEASE PALM CONTRACTURE, PERCUT	\$ 1,198.00
26037	DECOMPRESSION OF HAND	\$ 2,188.00
26035	DECOMPRESS HAND/DIGIT,INJECT INJURY	\$ 3,339.00
26034	INCISE BONE CORTEX, HAND OR FINGER	\$ 2,104.00
26030	DRAINAGE OF PALMER BURSA, MULTIPLE	\$ 1,898.00
26025	DRAINAGE OF PALMER BURSA, SINGLE	\$ 1,624.00
26020	DRAIN HAND/DIGIT TENDON SHEATH, EA	\$ 2,136.00
26011	DRAINAGE OF FINGER ABSCESS, COMPLIC	\$ 712.00
26010	DRAINAGE OF FINGER ABSCESS, SIMPLE	\$ 528.00
25931	RE-AMPUTATION OF HAND	\$ 2,971.00
25929	FOLLOWUP AMPUTATION OF HAND	\$ 2,324.00
25927	AMPUTATION OF HAND	\$ 3,223.00
25924	RE-AMPUTATION OF HAND AT WRIST	\$ 2,707.00
25922	FOLLOWUP AMPUTATION, HAND AT WRIST	\$ 2,439.00
25920	AMPUTATION OF HAND AT WRIST	\$ 2,776.00
25915	AMPUTATION OF FOREARM (KRUKENBERG)	\$ 4,572.00
25909	RE-AMPUTATION OF FOREARM	\$ 2,671.00
25907	FOLLOWUP AMPUTATION, FOREARM	\$ 2,390.00
25905	AMPUTATION OF FOREARM (GUILLOTINE)	\$ 2,734.00
25900	AMPUTATION OF FOREARM	\$ 2,764.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
25830	DISTAL RADIOULNAR JOINT FUSION	\$ 3,758.00
25825	FUSION OF WRIST BONES W/AUTOGRAFT	\$ 2,978.00
25820	FUSION OF WRIST BONES	\$ 2,430.00
25810	FUSE WRIST JOINT W/AUTOGRAFT	\$ 3,347.00
25805	FUSE WRIST JOINT W/SLIDING GRAFT	\$ 3,305.00
25800	FUSION OF WRIST JOINT W/O GRAFT	\$ 2,825.00
25695	REPAIR LUNATE DISLOCATION	\$ 2,470.00
25690	TREAT LUNATE DISLOCATION, W/MANIP	\$ 1,884.00
25685	REPAIR WRIST FRACTURE/DISLOCATION	\$ 2,863.00
25680	TREAT WRIST FX/DISLOCATION, W/MANIP	\$ 2,035.00
25676	REPAIR WRIST DISLOCATION	\$ 2,448.00
25675	TREAT WRIST DISLOCATION, W/MANIPUL	\$ 1,551.00
25671	Perc. Skel.Fix. of distal radioulna	\$ 2,055.00
25670	REPAIR WRIST DISLOCATION	\$ 2,360.00
25660	TREAT WRIST DISLOCATION, W/MANIPUL	\$ 1,602.00
25652	Open Tx of ulnar styloid Fx	\$ 2,406.00
25651	Percut.Skeletal Fix. Ulnar styloid	\$ 1,883.00
25650	TREAT ULNAR STYLOID FRACTURE	\$ 1,163.00
25645	REPAIR WRIST BONE FX, EACH BONE	\$ 2,216.00
25635	TREAT WRIST BONE FX, W/MANIPUL, EA	\$ 1,614.00
25630	TREAT WRIST BONE FX, EACH BONE	\$ 1,086.00
25628	REPAIR NAVICULAR FRACTURE	\$ 2,774.00
25624	TREAT NAVICULAR FRACTURE, W/MANIPUL	\$ 1,694.00
25622	TREAT NAVICULAR FRACTURE	\$ 1,078.00
25609	OPN TX DISTL RADIAL FX W INT FXTN 3	\$ 4,065.00
25608	OPN TX DISTL RADIAL FX W INT FXTN 2	\$ 3,195.00
25607	OPEN TX OF DSTL EXTRA-ARTICULAR FX	\$ 2,847.00
25606	PERCU SKLTL FXTN OF DISTL RADIAL FX	\$ 2,570.00
25605	TREAT RADIUS/ULNA FX,W/MANIPULATION	\$ 1,984.00
25600	TREAT RADIUS/ULNA FRACTURE	\$ 1,208.00
25575	REPAIR RADIUS & ULNA FX, W/FIXATION	\$ 3,499.00
25574	REPAIR RADIUS/ULNA FX, W/FIXATION	\$ 2,612.00
25565	TREAT RADIUS & ULNA FX, W/MANIPUL	\$ 1,799.00
25560	TREAT RADIUS & ULNA FRACTURES	\$ 976.00
25545	REPAIR ULNA FRACTURE	\$ 2,409.00
25535	TREAT ULNA FRACTURE, W/MANIPULATION	\$ 1,748.00
25530	TREAT ULNA FRACTURE	\$ 919.00
25526	REPAIR RADIUS FX/DISLOC (GALEAZZI)	\$ 3,721.00
25525	REPAIR RADIUS FX/DISLOC (GALEAZZI)	\$ 3,060.00
25520	TREAT RADIUS FX/DISLOC (GALEAZZI)	\$ 2,095.00
25515	REPAIR RADIUS FRACTURE	\$ 2,595.00
25505	TREAT RADIUS FRACTURE, W/MANIPUL	\$ 1,774.00
25500	TREAT RADIUS FRACTURE	\$ 968.00
25492	REINFORCE RADIUS AND ULNA	\$ 3,535.00
25491	REINFORCE ULNA	\$ 2,876.00
25490	REINFORCE RADIUS	\$ 2,800.00
25455	SURGERY TO STOP ARM GROWTH	\$ 2,833.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
25450	SURGERY TO STOP ARM GROWTH	\$ 2,401.00
25449	REMOVE WRIST JOINT IMPLANT	\$ 4,009.00
25447	REPAIR/REVISE WRIST JOINT(S)	\$ 3,193.00
25446	TOTAL WRIST REPLACEMENT	\$ 4,542.00
25445	RECONSTRUCT WRIST JOINT, TRAPEZIUM	\$ 2,793.00
25444	RECONSTRUCT WRIST JOINT, LUNATE	\$ 3,229.00
25443	RECONSTRUCT WRIST JOINT, SCAPHOID	\$ 3,054.00
25442	RECONSTRUCT WRIST JOINT, DIST ULNA	\$ 3,114.00
25441	RECONSTRUCT WRIST JOINT, DIST RADIUS	\$ 3,657.00
25440	REPAIR/GRAFT NONUNION, WRIST BONE	\$ 2,960.00
25431	Repair of nonunion of carpal bone	\$ 3,077.00
25430	Insertion of vascular pedicle carpa	\$ 2,842.00
25426	REPAIR/GRAFT RADIUS & ULNA DEFECT	\$ 4,392.00
25425	REPAIR/GRAFT RADIUS/ULNA DEFECT	\$ 3,765.00
25420	REPAIR/GRAFT NONUNION RADIUS & ULNA	\$ 4,559.00
25415	REPAIR NONUNION, RADIUS & ULNA	\$ 3,782.00
25405	REPAIR/GRAFT NONUNION, RADIUS/ULNA	\$ 4,025.00
25400	REPAIR NONUNION, RADIUS/ULNA	\$ 3,111.00
25394	Osteoplay, carpal bone, shortening	\$ 3,061.00
25393	LENGTHEN RADIUS AND ULNA	\$ 4,417.00
25392	SHORTEN RADIUS AND ULNA	\$ 3,966.00
25391	LENGTHEN RADIUS/ULNA W/AUTOGRAFT	\$ 3,894.00
25390	SHORTEN RADIUS/ULNA	\$ 2,967.00
25375	REVISION OF RADIUS AND ULNA, MULT	\$ 3,730.00
25370	REVISION OF RADIUS/ULNA, MULTIPLE	\$ 3,940.00
25365	REVISION OF RADIUS AND ULNA	\$ 3,575.00
25360	REVISION OF ULNA	\$ 2,529.00
25355	REVISION OF RADIUS, MID/PROX 1/3	\$ 2,980.00
25350	REVISION OF RADIUS, DISTAL 1/3	\$ 2,608.00
25337	RECONSTRUCT UNSTABLE RADIOULNAR JT	\$ 3,411.00
25335	REALIGNMENT OF HAND	\$ 3,684.00
25332	ARTHROPLASTY, WRIST	\$ 3,261.00
25320	REPAIR/REVISE WRIST JOINT	\$ 3,792.00
25316	REVISE PALSY FOREARM/WRIST TENDON	\$ 3,572.00
25315	FLEXOR ORIGIN SLIDE, CEREBRAL PALSY	\$ 3,005.00
25312	TRANSPLANT/GRAFT FOREARM/WRIST TEND	\$ 2,772.00
25310	TRANSPLANT FOREARM/WRIST TENDON	\$ 2,385.00
25301	FUSE FINGER TENDONS AT WRIST, EXTENS	\$ 2,483.00
25300	FUSE FINGER TENDONS AT WRIST, FLEX	\$ 2,636.00
25295	RELEASE WRIST/FOREARM TENDON	\$ 2,026.00
25290	INCISE WRIST/FOREARM TENDON	\$ 1,673.00
25280	LENGTH/SHORTEN FOREARM/WRIST TENDON	\$ 2,178.00
25275	Repair, Tendon sheath, extensor, F/A	\$ 2,592.00
25274	REPAIR FOREARM/WRIST TENDON/MUSCLE	\$ 2,569.00
25272	REPAIR FOREARM/WRIST TENDON/MUSCLE	\$ 2,168.00
25270	REPAIR FOREARM/WRIST TENDON/MUSCLE	\$ 1,900.00
25265	REPAIR FOREARM/WRIST TENDON/MUSCLE	\$ 2,889.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
25263	REPAIR FOREARM/WRIST TENDON/MUSCLE	\$ 2,454.00
25260	REPAIR FOREARM/WRIST TENDON/MUSCLE	\$ 2,430.00
25259	MANIPULATION,WRIST,UNDER ANESTHESIA	\$ 1,610.00
25251	REMOVE WRIST PROSTHESIS,COMPLICATED	\$ 2,805.00
25250	REMOVE WRIST PROSTHESIS	\$ 2,065.00
25248	REMOVE OBJECT FROM FOREARM/WRIST	\$ 1,613.00
25246	INJECTION FOR WRIST X-RAY	\$ 270.00
25240	REMOVAL OF DISTAL ULNA	\$ 1,650.00
25230	REMOVAL OF RADIAL STYLOID	\$ 1,662.00
25215	REMOVAL OF WRIST BONES	\$ 2,381.00
25210	REMOVAL OF WRIST BONE	\$ 1,885.00
25170	RADICAL RESECTION, FOREARM TUMOR	\$ 5,766.00
25151	PARTIAL REMOVAL OF RADIUS	\$ 2,250.00
25150	PARTIAL REMOVAL OF ULNA	\$ 2,180.00
25145	REMOVE FOREARM/WRIST BONE LESION	\$ 2,015.00
25136	REMOVE WRIST LESION, W/ALLOGRAFT	\$ 1,929.00
25135	REMOVE WRIST LESION, W/AUTOGRAFT	\$ 2,173.00
25130	REMOVAL OF WRIST LESION	\$ 1,721.00
25126	REMOVE FOREARM LESION, W/ALLOGRAFT	\$ 2,324.00
25125	REMOVE FOREARM LESION, W/AUTOGRAFT	\$ 2,306.00
25120	REMOVAL OF FOREARM LESION	\$ 1,931.00
25119	REMOVE WRIST TEND SHEATH, PART ULNA	\$ 1,907.00
25118	REMOVE WRIST TENDON SHEATH	\$ 1,461.00
25116	REMOVE WRIST/FOREARM LESION,EXTENSO	\$ 2,310.00
25115	REMOVE WRIST/FOREARM LESION,FLEXORS	\$ 2,917.00
25112	RE-REMOVE WRIST GANGLION	\$ 1,494.00
25111	REMOVE WRIST GANGLION	\$ 1,233.00
25110	REMOVE FOREARM/WRIST TENDON LESION	\$ 1,319.00
25109	EXCSN TENDN FORARM/WRIST FLXR/EXTNS	\$ 2,070.00
25107	REMOVE WRIST JOINT CARTILAGE	\$ 2,370.00
25105	REMOVE WRIST JOINT LINING	\$ 1,867.00
25101	EXPLORE/TREAT WRIST JOINT	\$ 1,558.00
25100	BIOPSY OF WRIST JOINT	\$ 1,344.00
25085	INCISION OF WRIST CAPSULE	\$ 1,731.00
25078	RESECT FORARM/WRIST TUM 3CM>	\$ 4,582.00
25077	RADICAL RESECT TUMOR, FOREARM/WRIST	\$ 3,476.00
25076	REMOVE DEEP FOREARM/WRIST LESION	\$ 2,000.00
25075	REMOVE SUBCUT FOREARM/WRIST LESION	\$ 1,225.00
25073	EXC FOREARM TUM DEEP 3 CM/>	\$ 2,082.00
25071	EXC FOREARM LES SC 3 CM/>	\$ 1,665.00
25066	BIOPSY FOREARM SOFT TISSUE, DEEP	\$ 1,379.00
25065	BIOPSY FOREARM SOFT TISSUE,SUPERFIC	\$ 601.00
25040	EXPLORE/TREAT WRIST JOINT	\$ 2,168.00
25035	INCISE/DRAIN BONE CORTEX FRARM/WRST	\$ 2,259.00
25031	INCISE/DRAIN FOREARM/WRIST BURSA	\$ 1,347.00
25028	DRAINAGE OF FOREARM/WRIST LESION	\$ 2,281.00
25025	Decomp. fasciotomoy, F/A &/or wrist	\$ 4,690.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
25024	Decompressoin Fasciotomy, forearm..	\$ 3,037.00
25023	DECOMPRESS FOREARM/WRIST W/DEBRIDE	\$ 4,625.00
25020	DECOMPRESSION OF FOREARM/WRIST	\$ 2,445.00
25001	Inc, Flexor tendon sheath, wrist	\$ 1,315.00
25000	INCISION OF TENDON SHEATH, WRIST	\$ 1,297.00
24940	REVISION OF UPPER ARM	\$ 2,315.00
24935	REVISE UPPER ARM AMPUTATION	\$ 4,632.00
24931	AMPUTATE UPPER ARM, W/IMPLANT	\$ 3,642.00
24930	RE-AMPUTATE UPPER ARM	\$ 3,022.00
24925	UPPER ARM AMPUTATION FOLLOW-UP SURG	\$ 2,203.00
24920	AMPUTATE UPPER ARM, OPEN, CIRCULAR	\$ 2,854.00
24900	AMPUTATE UPPER ARM, PRIMARY CLOSURE	\$ 2,872.00
24802	FUSION OF ELBOW JOINT, W/AUTOGRAFT	\$ 3,914.00
24800	FUSION OF ELBOW JOINT, LOCAL	\$ 3,238.00
24685	REPAIR ULNAR FRACTURE	\$ 2,533.00
24675	TREAT ULNAR FX W/MANIPULATION	\$ 1,611.00
24670	TREAT ULNAR FRACTURE	\$ 1,020.00
24666	REPAIR RADIUS HEAD/NECK FX W/PROSTH	\$ 2,845.00
24665	REPAIR RADIUS HEAD/NECK FRACTURE	\$ 2,534.00
24655	TREAT RADIUS FX W/MANIPULATION	\$ 1,541.00
24650	TREAT RADIUS FRACTURE	\$ 930.00
24640	TREAT NURSEMAID ELBOW	\$ 286.00
24635	REPAIR ELBOW FX/DISLOC, MONTEGGIA	\$ 2,613.00
24620	TREAT ELBOW FX/DISLOC, MONTEGGIA	\$ 2,151.00
24615	REPAIR ELBOW DISLOCATION	\$ 2,773.00
24605	TREAT ELBOW DISLOCATION, W/ANESTH	\$ 1,832.00
24600	TREAT ELBOW DISLOCATION	\$ 1,307.00
24587	REPAIR ELBOW FX/DISLOCAT W/IMPLANT	\$ 4,248.00
24586	REPAIR ELBOW FRACTURE/DISLOCATION	\$ 4,237.00
24582	TREAT HUMERAL CONDYLAR FX W/FIX	\$ 3,145.00
24579	REPAIR HUMERAL CONDYLAR FRACTURE	\$ 3,228.00
24577	TREAT HUMERAL CONDYLAR FX W/MANIP	\$ 1,957.00
24576	TREAT HUMERAL CONDYLAR FX	\$ 1,187.00
24575	REPAIR HUMERAL EPICONDYLAR FX	\$ 2,842.00
24566	TREAT HUMERAL EPICOND FX W/FIXATION	\$ 2,791.00
24565	TREAT HUMERAL EPICOND FX W/MANIPUL	\$ 1,904.00
24560	TREAT HUMERAL EPICONDYLAR FX	\$ 1,125.00
24546	REPAIR HUMERUS FX W/CONDYLAR EXTEN	\$ 4,044.00
24545	REPAIR HUMERUS FRACTURE	\$ 3,621.00
24538	SKELETAL FIXATION OF HUMERAL FX	\$ 2,967.00
24535	TREAT HUMERAL FRACTURE W/MANIPUL	\$ 2,198.00
24530	TREAT HUMERAL FRACTURE	\$ 1,333.00
24516	REPAIR HUMERAL SHAFT FX W/IMPLANT	\$ 3,346.00
24515	REPAIR HUMERAL SHAFT FX W/PLATE	\$ 3,420.00
24505	TREAT HUMERAL SHAFT FX W/MANIPUL	\$ 1,739.00
24500	TREAT HUMERAL SHAFT FRACTURE	\$ 1,265.00
24498	PROPHYLACTIC TREAT, HUMERAL SHAFT	\$ 3,379.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
24495	DECOMPRESS FOREARM W/EXPLORATION	\$ 3,142.00
24470	REVISION OF ELBOW JOINT	\$ 2,614.00
24435	REPAIR HUMERUS NON/MALUNION W/GRAFT	\$ 4,185.00
24430	REPAIR HUMERUS NONUNION/MALUNION	\$ 4,116.00
24420	SHORTEN/LENGTHEN HUMERUS	\$ 3,979.00
24410	REVISE HUMERUS W/REALIGN (SOFIELD)	\$ 4,129.00
24400	REVISE HUMERUS	\$ 3,203.00
24371	REVISE HUMERUSes	\$ 6,942.00
24370	REVISE HUMERUSes	\$ 6,013.00
24366	RECONSTRUCT RADIUS HEAD W/IMPLANT	\$ 2,654.00
24365	RECONSTRUCT RADIUS HEAD	\$ 2,489.00
24363	REPLACE TOTAL ELBOW JOINT	\$ 5,656.00
24362	RECONSTRUCT ELBOW W/IMPLANT	\$ 4,144.00
24361	RECONSTRUCT ELBOW W/HUMERAL REPLACE	\$ 3,935.00
24360	RECONSTRUCT ELBOW JOINT W/MEMBRANE	\$ 3,519.00
24359	REPAIR ELBOW DEB/ATTCH OPEN	\$ 2,564.00
24358	REPAIR ELBOW W/DEB, OPEN	\$ 2,035.00
24357	REPAIR ELBOW, PERC	\$ 1,569.00
24346	Reconstruction medial collateral li	\$ 4,292.00
24345	Rep.Medial Collateral ligament	\$ 2,713.00
24344	Reconstruction lateral collateral	\$ 4,241.00
24343	Repair lateral collateral ligament	\$ 2,737.00
24342	REINSERT RUPT BICEPS/TRICEPS TENDON	\$ 3,009.00
24341	REPAIR TENDON/MUSCLE UPPERARM/ELBOW	\$ 2,883.00
24340	REPAIR BICEPS TENDON RUPTURE	\$ 2,385.00
24332	Tenolysis, triceps	\$ 2,385.00
24331	FLEXOR-PLASTY, ELBOW W/EXTENSOR ADV	\$ 3,067.00
24330	FLEXOR-PLASTY, ELBOW (STEINDLER)	\$ 2,798.00
24320	REPAIR UPPER ARM TENDON W/MUSC XFER	\$ 3,047.00
24310	REVISE UPPER ARM TENDON, EA TENDON	\$ 1,820.00
24305	LENGTHEN UPPER ARM TENDON EA TENDON	\$ 2,236.00
24301	MUSCLE/TENDON XFER, UPPER ARM/ELBOW	\$ 2,913.00
24300	MANIPULATE ELBOW W/ANESTH	\$ 1,631.00
24220	INJECTION FOR ELBOW X-RAY	\$ 248.00
24201	REMOVE DEEP FOREIGN BODY, ARM	\$ 1,418.00
24200	REMOVE SUBCUTAN FOREIGN BODY, ARM	\$ 540.00
24164	REMOVE RADIUS HEAD IMPLANT	\$ 2,795.00
24160	REMOVE ELBOW JOINT IMPLANT	\$ 4,891.00
24155	REMOVE ELBOW JOINT	\$ 3,324.00
24152	RADICAL RESECTION, RADIUS TUMOR	\$ 5,267.00
24150	RADICAL RESECTION, HUMERUS TUMOR	\$ 6,066.00
24149	RADICAL RESECT/RELEASE ELBOW JOINT	\$ 4,548.00
24147	PARTIAL OLECRANON PROCESS BONE REMV	\$ 2,414.00
24145	PARTIAL RADIAL HEAD/NECK BONE REMVL	\$ 2,310.00
24140	PARTIAL HUMERAL BONE REMOVAL	\$ 2,728.00
24138	REMOVE ELBOW BONE LESION	\$ 2,643.00
24136	REMOVE RADIAL HEAD/NECK LESION	\$ 2,460.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
24134	REMOVE SHAFT/DISTAL HUMERUS LESION	\$ 2,912.00
24130	REMOVE HEAD OF RADIUS	\$ 1,971.00
24126	REMOVE ELBOW LESION W/ALLOGRAFT	\$ 2,523.00
24125	REMOVE ELBOW LESION W/AUTOGRAFT	\$ 2,417.00
24120	REMOVE ELBOW LESION	\$ 2,061.00
24116	REMOVE HUMERUS LESION W/ALLOGRAFT	\$ 3,361.00
24115	REMOVE HUMERUS LESION W/AUTOGRAFT	\$ 2,872.00
24110	REMOVE HUMERUS LESION	\$ 2,278.00
24105	REMOVE ELBOW BURSA	\$ 1,364.00
24102	REMOVE ELBOW JOINT LINING	\$ 2,386.00
24101	EXPLORE/TREAT ELBOW JOINT	\$ 1,939.00
24100	BIOPSY ELBOW JOINT LINING	\$ 1,623.00
24079	RESECT ARM/ELBOW TUM 5 CM/>	\$ 5,241.00
24077	REMOVE TUMOR OF ARM/ELBOW	\$ 4,108.00
24076	REMOVE DEEP ARM/ELBOW TUMOR	\$ 2,123.00
24075	REMOVE SUBCUTANEOUS ARM/ELBOW TUMOR	\$ 1,281.00
24073	EX ARM/ELBOW TUM DEEP 5 CM/>	\$ 2,741.00
24071	EXC ARM/ELBOW LES SC 3 CM/>	\$ 1,601.00
24066	BIOPSY SFT TISSUE ARM/ELBOW, DEEP	\$ 1,622.00
24065	BIOPSY SFT TISS ARM/ELBOW, SUPERFIC	\$ 619.00
24006	RELEASE ELBOW JOINT	\$ 2,755.00
24000	EXPLORATORY ELBOW SURGERY	\$ 1,851.00
23935	DRAIN ARM/ELBOW BONE LESION	\$ 1,983.00
23931	DRAIN INFECTED ARM/ELBOW BURSA	\$ 596.00
23930	DRAIN ARM/ELBOW ABSCESS/HEMATOMA	\$ 824.00
23921	SHOULDER AMPUTATION FOLLOWUP SURG	\$ 1,820.00
23920	AMPUTATION AT SHOULDER JOINT	\$ 4,391.00
23900	INTERTHORACOSCAPULAR AMPUTATION	\$ 5,427.00
23802	FUSION OF SHOULDER JOINT W/GRAFT	\$ 5,007.00
23800	FUSION OF SHOULDER JOINT	\$ 4,012.00
23700	SHOULDER MANIPUL W/ANESTH/FIXATION	\$ 757.00
23680	REPAIR SHOULDER DISLOCATION W/FX	\$ 3,623.00
23675	TREAT SHOULDER DISLOC W/FX W/MANIP	\$ 1,948.00
23670	REPAIR SHOULDER DISLOC W/GT FX	\$ 3,397.00
23665	TREAT SHOULDER DISLOC W/FX W/MANIP	\$ 1,532.00
23660	REPAIR ACUTE SHOULDER DISLOCATION	\$ 2,268.00
23655	TREAT SHOULDER DISLOC W/ANESTHESIA	\$ 1,562.00
23650	TREAT SHOULDER DISLOCATION	\$ 1,122.00
23630	REPAIR GREAT HUMERAL TUBEROSITY FX	\$ 3,026.00
23625	TREAT GREAT HUMRL TUBER FX W/MANIP	\$ 1,357.00
23620	TREAT GREAT HUMERAL TUBEROSITY FX	\$ 990.00
23616	REPAIR HUMERAL FX, W/PROSTHESIS	\$ 4,829.00
23615	REPAIR HUMERAL FRACTURE	\$ 3,437.00
23605	TREAT HUMERAL FX, W/MANIPULATION	\$ 1,649.00
23600	TREAT HUMERAL FRACTURE	\$ 1,192.00
23585	REPAIR SCAPULAR FRACTURE	\$ 3,814.00
23575	TREAT SCAPULAR FX, W/MANIPULATION	\$ 1,457.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
23570	TREAT SCAPULAR FRACTURE	\$ 922.00
23552	REPAIR CLAVICLE DISLOCATION W/GRAFT	\$ 2,533.00
23550	REPAIR CLAVICLE DISLOCATION	\$ 2,218.00
23545	TREAT CLAVICLE DISLOCATION W/MANIP	\$ 1,198.00
23540	TREAT CLAVICLE DISLOCATION	\$ 890.00
23532	REPAIR CLAVICLE DISLOCATION W/GRAFT	\$ 2,433.00
23530	REPAIR CLAVICLE DISLOCATION	\$ 2,230.00
23525	TREAT CLAVICLE DISLOCATION, W/MANIP	\$ 1,386.00
23520	TREAT CLAVICLE DISLOCATION	\$ 908.00
23515	REPAIR CLAVICLE FRACTURE	\$ 2,798.00
23505	TREAT CLAVICLE FX W/MANIPULATION	\$ 1,292.00
23500	TREAT CLAVICLE FRACTURE	\$ 863.00
23491	REINFORCE PROXIMAL HUMERUS	\$ 3,968.00
23490	REINFORCE CLAVICLE	\$ 3,362.00
23485	REVISE CLAVICLE W/BONE GRAFT	\$ 3,731.00
23480	REVISE CLAVICLE (COLLARBONE)	\$ 3,203.00
23474	REVISE CLAVICLE (COLLARBONE)	\$ 6,833.00
23473	REVISE CLAVICLE (COLLARBONE)	\$ 6,323.00
23472	RECONSTRUCT/REPLACE SHOULDER JOINT	\$ 5,665.00
23470	RECONSTRUCT SHOULDER JOINT, IMPLANT	\$ 4,684.00
23466	REPAIR SHLDR CAPSULE ANY MULTI-DIR	\$ 4,314.00
23465	REPAIR SHOULDER CAPSULE	\$ 4,374.00
23462	REPAIR SHOULDER CAP W/CORACOID XFER	\$ 4,179.00
23460	REPAIR SHOULDER CAP W/BONE BLOCK	\$ 4,254.00
23455	REPAIR SHOULDER CAPSULE, W/LABRAL	\$ 3,868.00
23450	REPAIR SHOULDER CAPSULE,PUTTI-PLATT	\$ 3,706.00
23440	REMOVE/TRANSPLNT LONG BICEPS TENDON	\$ 2,944.00
23430	REPAIR BICEPS LONG TENDON RUPTURE	\$ 2,892.00
23420	RECONSTRUCT SHOULDER CUFF AVULSION	\$ 3,790.00
23415	RELEASE SHOULDER LIGAMENT	\$ 2,711.00
23412	REPAIR RUPTURED ROTATOR CUFF, CHRON	\$ 3,323.00
23410	REPAIR RUPTURED ROTATOR CUFF, ACUTE	\$ 3,193.00
23406	TENOMYOTOMY, SHOULDER AREA, MULT	\$ 2,974.00
23405	TENOMYOTOMY, SHOULDER AREA, SINGLE	\$ 2,396.00
23400	FIXATION OF SCAPULA	\$ 3,795.00
23397	MUSCLE TRANSFERS, SHOULDER/UPPERARM	\$ 4,458.00
23395	MUSCLE TRANSFER, SHOULDER/UPPER ARM	\$ 5,003.00
23350	INJECTION FOR SHOULDER X-RAY	\$ 187.00
23335	PROSTHESIS REMOVAL HUMERAL AND GLEN	\$ 4,957.00
23334	INJECTION FOR SHOULDER X-RAY	\$ 4,151.00
23333	INJECTION FOR SHOULDER X-RAY	\$ 1,806.00
23330	REMOVE SHOULDER FOREIGN BODY, SUBCU	\$ 643.00
23220	RADICAL RESECT, PROX HUMERUS TUMOR	\$ 7,639.00
23210	RADICAL RESECTION, SCAPULA TUMOR	\$ 6,947.00
23200	RADICAL RESECTION, CLAVICLE TUMOR	\$ 5,909.00
23195	REMOVE HEAD OF HUMERUS	\$ 2,905.00
23190	PARTIAL REMOVAL, SCAPULA	\$ 2,229.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
23184	PARTIAL REMOVAL, PROXIMAL HUMERUS	\$ 2,870.00
23182	PARTIAL REMOVAL, SCAPULA BONE	\$ 2,560.00
23180	PARTIAL REMOVAL, CLAVICLE BONE	\$ 2,599.00
23174	REMOVE HUMERUS ABSCESS/LESION	\$ 2,957.00
23172	REMOVE SCAPULA ABSCESS/LESION	\$ 2,206.00
23170	REMOVE CLAVICLE ABSCESS/LESION	\$ 2,183.00
23156	REMOVE HUMERUS LESION W/ALLOGRAFT	\$ 2,641.00
23155	REMOVE HUMERUS LESION W/AUTOGRAFT	\$ 3,102.00
23150	REMOVE HUMERUS LESION	\$ 2,597.00
23146	REMOVE CLAVICLE LESION W/ALLOGRAFT	\$ 2,420.00
23145	REMOVE CLAVICLE LESION W/AUTOGRAFT	\$ 2,709.00
23140	REMOVE CLAVICLE/SCAPULA BONE LESION	\$ 2,153.00
23130	PARTIAL REMOVAL OF SHOULDER BONE	\$ 2,380.00
23125	REMOVAL OF COLLARBONE	\$ 2,765.00
23120	PARTIAL REMOVAL OF COLLARBONE	\$ 2,268.00
23107	EXPLORE/TREAT GLENOHUMERAL JOINT	\$ 2,561.00
23106	REMOVE COLLARBONE JOINT LINING	\$ 1,937.00
23105	REMOVE GLENOHUMERAL JOINT LINING	\$ 2,471.00
23101	SHOULDER JOINT ARTHROTOMY W/BIOPSY	\$ 1,774.00
23100	GLENOHUMERAL JT ARTHROTOMY W/BIOP	\$ 1,954.00
23078	RESECT SHOULDER TUM 5 CM/>	\$ 5,683.00
23077	RADICAL RESECTION, SHOULDER TUMOR	\$ 4,500.00
23076	REMOVE DEEP SHOULDER LESION	\$ 2,123.00
23075	REMOVE SUBCUTANEOUS SHOULDER LESION	\$ 1,279.00
23073	EXC SHOULDER TUM DEEP 5 CM/>	\$ 2,743.00
23071	EXC SHOULDER LES SC 3 CM/>	\$ 1,661.00
23066	BIOPSY SHOULDER TISSUE, DEEP	\$ 1,401.00
23065	BIOPSY SHOULDER TISSUE, SUPERFICIAL	\$ 623.00
23044	ACROMIO/STERNOCLAVICULAR JOINT SURG	\$ 2,206.00
23040	GLENOHUMERAL JOINT SURGERY	\$ 2,790.00
23035	DRAIN SHOULDER BONE LESION	\$ 2,649.00
23031	DRAIN INFECTED SHOULDER BURSA	\$ 800.00
23030	DRAIN SHOULDER LESION, DEEP	\$ 962.00
23020	RELEASE SHOULDER JOINT	\$ 2,685.00
23000	REMOVE CALCIUM DEPOSITS, OPEN	\$ 1,413.00
22905	RADICAL RESECTION ABD WALL 5CM GREA	\$ 5,295.00
22904	RADICAL RESECTION ABD WALL 5CM LESS	\$ 4,186.00
22903	EXC ABD LES SC 3 CM/>	\$ 1,747.00
22902	EXCISION ABD WALL LESS THAN 3CM	\$ 1,309.00
22901	EXC ABDL TUM DEEP 5 CM/>	\$ 2,663.00
22900	REMOVE ABDOMINAL WALL LESION	\$ 2,233.00
22865	REMOVAL TOTL DISC ARTHRPLSTY, LUMBR	\$ 9,527.00
22864	NULL	\$ 8,740.00
22862	REVSN TOTAL DISC ARTHRPLSTY LUMBR	\$ 9,767.00
22861	NULL	\$ 9,813.00
22858	Insj biomchn dev ntrvrt d	\$ 2,117.00
22857	TOTL DISC ARTRPLSTY ANTR APRCH LUMB	\$ 6,950.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
22856	NULL	\$ 6,721.00
22855	REMOVE SPINE FIXATION DEV, ANTERIOR	\$ 4,536.00
22852	REMOVE SPINE SEG FIXATION DEV, POST	\$ 2,825.00
22850	REMOVE SPINE FIXATION DEVICE, POST	\$ 2,948.00
22849	REINSERT SPINAL FIXATION DEVICE	\$ 5,297.00
22848	INSERT PELVIC FIXATION DEVICE	\$ 1,470.00
22847	INSERT SPINE FIX DEV, ANT, 8+ SEG	\$ 3,185.00
22846	INSERT SPINE FIX DEV, ANT, 4-7 SEG	\$ 3,151.00
22845	INSERT SPINE FIX DEV, ANT, 2-3 SEG	\$ 3,030.00
22844	INSERT SPINE SEG FIX, POST, 13+ SEG	\$ 4,017.00
22843	INSERT SPINE SEG FIX, POST,7-12 SEG	\$ 3,366.00
22842	INSERT SPINE SEG FIX, POST, 3-6 SEG	\$ 3,156.00
22840	INSERT SPINE FIXATION, POSTERIOR	\$ 3,137.00
22830	EXPLORATION OF SPINAL FUSION	\$ 3,305.00
22819	KYPHECTOMY, 3 OR MORE SEGMENTS	\$ 9,773.00
22818	KYPHECTOMY, 1-2 SEGMENTS	\$ 8,497.00
22812	SPINAL FUSION, 8+ VERT, ANTERIOR	\$ 8,661.00
22810	SPINAL FUSION, 4-7 VERT, ANTERIOR	\$ 8,366.00
22808	SPINAL FUSION, ANTERIOR, 2-3 VERT	\$ 7,451.00
22804	SPINAL FUSION, POSTERIOR, 13+ VERT	\$ 9,771.00
22802	SPINAL FUSION, 7-12 VERT, POST	\$ 8,482.00
22800	SPINAL FUSION, 6 OR LESS VERT, POST	\$ 5,478.00
22634	SPINE FUSION EXTRA SEGMENT	\$ 2,052.00
22633	LUMBAR SPINE FUSION COMBINED	\$ 7,579.00
22632	SPINE FUSION, EACH ADD'L INTERSPACE	\$ 1,353.00
22630	LUMBAR SPINE FUSION, POST INTERBODY	\$ 6,519.00
22614	SPINE FUSION, EACH ADD'L VERTEBRA	\$ 1,621.00
22612	LUMBAR SPINE FUSION, POSTEROLATERAL	\$ 6,435.00
22610	THORAX SPINE FUSION, POSTEROLATERAL	\$ 5,173.00
22600	NECK SPINE FUSION (CERV, BELOW C2)	\$ 5,297.00
22595	NECK SPINE FUSION (C1-C2) W/GRAFT	\$ 6,227.00
22590	SPINE/SKULL FUSION (OCCIPUT-C2)	\$ 6,546.00
22586	SPINE/SKULL FUSION (OCCIPUT-C2)	\$ 8,533.00
22585	SPINAL FUSION, EA ADD'L INTERSPACE	\$ 1,341.00
22558	LUMBAR SPINE FUSION W/BONE GRAFT	\$ 6,182.00
22556	THORACIC SPINE FUSION W/RIB GRAFT	\$ 6,774.00
22554	NECK SPINE FUSION (CERV, BELOW C2)	\$ 5,138.00
22552	ADDL NECK SPINE FUSION	\$ 1,655.00
22551	NECK SPINE FUSE&REMOV BEL C2	\$ 7,035.00
22548	NECK SPINE FUSION (ATLAS-AXIS)	\$ 8,238.00
22534	ARTH LAT EXTRA TECH THORACIC/LUMBAR	\$ 1,478.00
22533	ARTHRODESIS LAT EXTRA TECH LUMBAR	\$ 6,633.00
22532	ARTH LATERAL EXTRA TECH MIN DISKECT	\$ 7,403.00
22515	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI	\$ 862.00
22514	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI	\$ 1,852.00
22513	PERQ VERT AGMNTJ CAVITY CRTJ UNI/BI	\$ 1,984.00
22512	VERTEBROPLASTY EACH ADDL CERVICOTHO	\$ 781.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
22511	DEL2015Percu vertebroplsty,1, uni/b	\$ 1,517.00
22510	DEL2015Percu vertebroplsty,1, uni/b	\$ 1,616.00
22505	MANIPULATE SPINE, ANESTHESIA NEEDED	\$ 508.00
22328	TREAT ADD'L FRACTURED VERTEBRAE	\$ 1,169.00
22327	REPAIR THORACIC SPINE FX/DISLOC	\$ 6,192.00
22326	REPAIR NECK SPINE FX/DISLOCATION	\$ 6,176.00
22325	REPAIR LUMBAR SPINE FX/DISLOCATION	\$ 5,928.00
22319	NULL	\$ 7,680.00
22318	NULL	\$ 6,856.00
22315	TREAT SPINE FRACTURE/DISLOCATION	\$ 3,041.00
22310	TREAT SPINE BODY FRACTURE(S)	\$ 1,134.00
22226	REVISE ADD'L VERTEBRAL SEGMENT	\$ 1,491.00
22224	REVISE LUMBAR SPINE, ANTERIOR	\$ 6,372.00
22222	REVISE THORACIC SPINE, ANTERIOR	\$ 7,298.00
22220	REVISE CERVICAL SPINE, ANTERIOR	\$ 6,702.00
22216	REVISE ADD'L VERTEBRAL SEGMENT	\$ 1,488.00
22214	REVISE LUMBAR SPINE, POSTERIOR	\$ 6,061.00
22212	REVISE THORACIC SPINE, POSTERIOR	\$ 6,025.00
22210	REVISE CERVICAL SPINE, POSTERIOR	\$ 7,306.00
22208	CUT SPINE 3 COL, ADDL SEG	\$ 2,447.00
22207	CUT SPINE 3 COL, LUMB	\$ 9,726.00
22206	CUT CPINE 3 COL, THOR	\$ 10,025.00
22116	REMOVE ADD'L VERTEBRAL SEGMENT	\$ 580.00
22114	REMOVE PART OF LUMBAR VERTEBRA	\$ 4,670.00
22112	REMOVE PART OF THORACIC VERTEBRA	\$ 4,670.00
22110	REMOVE PART OF NECK VERTEBRA	\$ 4,238.00
22103	REMOVE ADD'L VERTEBRAL SEGMENT	\$ 578.00
22102	REMOVE PART OF LUMBAR VERTEBRA	\$ 3,240.00
22101	REMOVE PART OF THORACIC VERTEBRA	\$ 3,525.00
22100	REMOVE PART OF NECK VERTEBRA	\$ 3,436.00
22015	I&D, OPEN DEEP ABSCESS, LUMBAR SPIN	\$ 3,787.00
22010	I&D, OPEN, ABSCESS POSTR SPINE	\$ 3,878.00
21936	RADICAL RESECTION BACK 5CM GREATER	\$ 5,632.00
21935	RADICAL RESECTION, BACK/FLANK TUMOR	\$ 4,063.00
21933	EXCISION SOFT TISSUE BACK 5CM GREAT	\$ 2,932.00
21932	EXCISION SOFT TISSUE BACK LESS 5CM	\$ 2,625.00
21931	EXCISION SOFT TISSUE BACK 3CM GREAT	\$ 1,869.00
21930	REMOVE BACK/FLANK TUMOR	\$ 1,419.00
21925	BIOPSY BACK/FLANK, DEEP	\$ 1,410.00
21920	BIOPSY BACK/FLANK, SUPERFICIAL	\$ 589.00
21825	REPAIR STERNUM FRACTURE	\$ 2,140.00
21820	TREAT STERNUM FRACTURE	\$ 556.00
21813	OPEN TX RIB FX W/FIXJ THORACOSCOPIC	\$ 4,016.00
21812	TREAT STERNUM FRACTURE	\$ 2,902.00
21811	TREAT STERNUM FRACTURE	\$ 2,378.00
21750	REPAIR STERNUM SEPARATION	\$ 2,710.00
21743	RECONSTRUCTIVE REPAIR, PECTUS EXCAV	\$ 3,317.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
21742	RECONSTRUCTIVE REPAIR, PECTUS EXCAV	\$ 2,635.00
21740	RECONSTRUCT PECTUS EXCAVATUM	\$ 4,114.00
21725	REVISE NECK MUSCLE, OPEN, W/CAST	\$ 2,104.00
21720	REVISE NECK MUSCLE, OPEN, W/O CAST	\$ 2,144.00
21705	REVISE NECK MUSCLE W/RIB RESECTION	\$ 2,171.00
21700	REVISE NECK MUSCLE W/O RIB RESECT	\$ 1,444.00
21685	HYOID MYOTOMY AND SUSPENSION	\$ 3,687.00
21632	RADICAL RESECTION, STERNUM/LYMPHS	\$ 4,820.00
21630	RADICAL STERNUM RESECTION	\$ 4,785.00
21627	STERNAL DEBRIDEMENT	\$ 2,119.00
21620	PARTIAL REMOVAL OF STERNUM	\$ 1,997.00
21616	REMOVE RIB W/NERVE REMOVAL	\$ 2,890.00
21615	REMOVAL OF CERVICAL RIB	\$ 2,479.00
21610	PARTIAL REMOVAL OF RIB	\$ 5,009.00
21600	PARTIAL REMOVAL OF RIB	\$ 2,167.00
21558	RESECT NECK TUM 5 CM/>	\$ 5,285.00
21557	RADICAL RESECTION, NECK/CHEST TUMOR	\$ 3,731.00
21556	REMOVE LESION NECK/CHEST, DEEP	\$ 2,046.00
21555	REMOVE LESION NECK/CHEST, SUBCUTAN	\$ 1,186.00
21554	EXC NECK TUM DEEP 5 CM/>	\$ 2,877.00
21552	EXC NECK LES SC 3 CM/>	\$ 1,762.00
21550	BIOPSY OF NECK/CHEST	\$ 585.00
21510	DRAIN BONE LESION, DEEP, THORAX	\$ 1,770.00
21502	DRAIN CHEST LESION, REMOVE PART RIB	\$ 2,004.00
21501	DRAIN NECK/CHEST ABSCESS/HEMATOMA	\$ 1,261.00
21497	INTERDENTAL WIRING, OTHER THAN FX	\$ 2,149.00
21490	REPAIR DISLOCATED JAW	\$ 3,325.00
21485	RESET DISLOCATED JAW, COMPLICATED	\$ 2,679.00
21480	RESET DISLOCATED JAW	\$ 124.00
21470	REPAIR MANDIBULAR FX, COMPLICATED	\$ 4,485.00
21465	REPAIR MANDIBULAR CONDYLAR FX	\$ 3,361.00
21462	REPAIR LOWER JAW FX, W/INT FIXATION	\$ 4,163.00
21461	REPAIR LOWER JAW FX, W/O FIXATION	\$ 3,781.00
21454	REPAIR LOWER JAW FX, W/EXT FIXATION	\$ 2,041.00
21453	TREAT LOWER JAW FX, W/INTERDENT FIX	\$ 3,207.00
21452	TREAT LOWER JAW FX, W/EXT FIXATION	\$ 1,571.00
21451	TREAT LOWER JAW FX W/MANIPULATION	\$ 2,379.00
21450	TREAT LOWER JAW FX W/O MANIPULATION	\$ 1,752.00
21445	REPAIR DENTAL RIDGE FRACTURE	\$ 2,350.00
21440	TREAT DENTAL RIDGE FRACTURE	\$ 1,882.00
21436	REPAIR/GRAFT COMPL CRANIOFACIAL FX	\$ 7,925.00
21435	REPAIR COMPL CRANIOFACIAL FX W/FIX	\$ 5,453.00
21433	REPAIR CRANIOFACIAL FX, COMPLICATED	\$ 6,762.00
21432	REPAIR CRANIOFACIAL FX, W/FIXATION	\$ 2,771.00
21431	TREAT CRANIOFACIAL FX, W/FIXATION	\$ 2,680.00
21423	REPAIR MOUTH ROOF FX, COMPLICATED	\$ 2,898.00
21422	REPAIR MOUTH ROOF FRACTURE	\$ 2,461.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
21421	TREAT MOUTH ROOF FX, W/FIXATION	\$ 2,240.00
21408	REPAIR EYE SOCKET FX W/BONE GRAFT	\$ 3,500.00
21407	REPAIR EYE SOCKET FX W/IMPLANT	\$ 2,415.00
21406	REPAIR EYE SOCKET FX W/O IMPLANT	\$ 2,234.00
21401	TREAT EYE SOCKET FX W/MANIPULATION	\$ 1,237.00
21400	TREAT EYE SOCKET FX W/O MANIPUL	\$ 611.00
21395	REPAIR EYE SOCKET FX, PERIORBITAL	\$ 3,924.00
21390	REPAIR EYE SOCKET FX, PERIORBITAL	\$ 2,997.00
21387	REPAIR EYE SOCKET FX, COMBINED	\$ 3,009.00
21386	REPAIR EYE SOCKET FX, PERIORBITAL	\$ 2,598.00
21385	REPAIR EYE SOCKET FX, TRANSANTRAL	\$ 2,881.00
21366	REPAIR COMPLIC MALAR FX W/GRAFT	\$ 4,952.00
21365	REPAIR COMPLIC MALAR FX W/FIXATION	\$ 4,158.00
21360	REPAIR DEPRESSED MALAR FX	\$ 1,919.00
21356	REPAIR DEPRESSED ZYGOMATIC ARCH FX	\$ 1,412.00
21355	REPAIR CHEEK BONE FX W/MANIPULATION	\$ 1,203.00
21348	REPAIR NASOMAXILLARY COMPLEX FX	\$ 4,073.00
21347	REPAIR NASOMAXILLARY COMPLEX FX	\$ 3,814.00
21346	REPAIR NASOMAXILLARY COMPLEX FX	\$ 3,597.00
21345	TREAT NASOMAXILLARY COMPLEX FX	\$ 2,358.00
21344	REPAIR COMPLICATED FRONTAL SINUS FX	\$ 5,204.00
21343	REPAIR DEPRESSED FRONTAL SINUS FX	\$ 4,029.00
21340	TREAT NASOETHMOID COMPLEX FX W/FIX	\$ 2,798.00
21339	REPAIR NASOETHMOID FX W/FIXATION	\$ 2,795.00
21338	REPAIR NASOETHMOID FX W/O FIXATION	\$ 2,459.00
21337	TREAT NASAL SEPTAL FRACTURE	\$ 1,107.00
21336	REPAIR NASAL SEPTAL FRACTURE	\$ 2,393.00
21335	REPAIR NOSE/SEPTUM FRACTURE	\$ 2,673.00
21330	REPAIR NOSE FX, COMPLIC, W/FIXATION	\$ 2,112.00
21325	REPAIR NOSE FX, UNCOMPLICATED	\$ 1,737.00
21320	TREAT NOSE FX W/STABILIZATION	\$ 503.00
21315	TREAT NOSE FX W/O STABILIZATION	\$ 570.00
21310	TREAT NOSE FX W/O MANIPULATION	\$ 109.00
21296	REVISE JAW MUSCLE/BONE, INTRAORAL	\$ 1,522.00
21295	REVISE JAW MUSCLE/BONE, EXTRAORAL	\$ 709.00
21282	REVISION OF EYELID, LATERAL	\$ 1,446.00
21280	REVISION OF EYELID, MEDIAL	\$ 2,117.00
21275	FOLLOWUP REVISION, ORBIT-FACE BONES	\$ 3,261.00
21270	AUGMENT CHEEK BONES W/PROSTHESIS	\$ 2,911.00
21268	REPOSITIONING OF EYE SOCKETS	\$ 7,858.00
21267	REPOSITIONING OF EYE SOCKETS	\$ 6,260.00
21263	REVISE EYE SOCKETS,FOREHEAD ADVANCE	\$ 8,790.00
21261	REVISE EYE SOCKETS, INTRA/EXTRACRAN	\$ 9,504.00
21260	REVISE EYE SOCKETS, EXTRACRANIAL	\$ 5,352.00
21256	RECONSTRUCT ORBIT W/BONE GRAFTS	\$ 4,811.00
21255	RECONSTRUCT ZYGOMATIC ARCH	\$ 5,293.00
21249	RECONSTRUCTION OF JAW, COMPLETE	\$ 4,775.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
21248	RECONSTRUCTION OF JAW, PARTIAL	\$ 3,299.00
21247	RECONSTRUCT/GRAFT LOWER JAW BONE	\$ 6,089.00
21246	COMPLETE RECONSTRUCTION OF JAW	\$ 3,310.00
21245	PARTIAL RECONSTRUCTION OF JAW	\$ 3,572.00
21244	RECONSTRUCT LOWER JAW W/BONE PLATE	\$ 3,888.00
21243	RECONSTRUCT JAW JOINT W/PROSTHESIS	\$ 6,363.00
21242	RECONSTRUCT JAW JOINT W/ALLOGRAFT	\$ 3,883.00
21240	RECONSTRUCTION OF JAW JOINT	\$ 4,182.00
21235	GRAFT EAR CARTILAGE TO NOSE/EAR	\$ 2,107.00
21230	GRAFT RIB CARTILAGE TO FACE/EAR/NOS	\$ 2,825.00
21215	LOWER JAW BONE GRAFT	\$ 3,241.00
21210	FACE BONE GRAFT, NASAL/MAXILL/MALAR	\$ 3,107.00
21209	REDUCTION OF FACIAL BONES	\$ 2,507.00
21208	AUGMENTATION OF FACIAL BONES	\$ 3,024.00
21206	REVISE UPPER JAW BONE	\$ 4,438.00
21199	Osteotomy, Mandible, segmental;	\$ 4,020.00
21198	REVISE LOWER JAW BONE	\$ 4,287.00
21196	RECONSTRUCT LOWER JAW BONE W/FIX	\$ 5,468.00
21195	RECONSTRUCT LOWER JAW BONE	\$ 5,337.00
21194	RECONSTRUCT LOWER JAW BONE W/GRAFT	\$ 5,514.00
21193	RECONSTRUCT LOWER JAW BONE	\$ 4,774.00
21188	RECONSTRUCT MIDFACE, NOT LEFORT	\$ 6,232.00
21184	RECONSTRUCT CRANIAL BONE, 80+ SQCM	\$ 9,686.00
21183	RECONSTRUCT CRANIAL BONE,40-79 SQCM	\$ 9,000.00
21182	RECONSTRUCT CRANIAL BONE, 0-39 SQCM	\$ 8,260.00
21181	CONTOUR BENIGN CRANIAL BONE TUMOR	\$ 2,866.00
21180	RECONSTRUCT ENTIRE ORBIT/FOREHEAD	\$ 6,617.00
21179	RECONSTRUCT ENTIRE ORBIT/FOREHEAD	\$ 5,915.00
21175	RECONSTRUCT ORBIT/FOREHEAD, PARTIAL	\$ 8,621.00
21172	RECONSTRUCT ORBIT/FOREHEAD, PARTIAL	\$ 8,768.00
21160	RECONSTRUCT MIDFACE, LEFORT III & I	\$ 10,612.00
21159	RECONSTRUCT MIDFACE, LEFORT III	\$ 9,784.00
21155	RECONSTRUCT MIDFACE, LEFORT III & I	\$ 8,159.00
21154	RECONSTRUCT MIDFACE, LEFORT III	\$ 7,351.00
21151	RECONSTRUCT MIDFACE, LEFORT II	\$ 6,830.00
21150	RECONSTRUCT MIDFACE, LEFORT II	\$ 6,203.00
21147	RECONSTRUCT MIDFACE, LEFORT I	\$ 6,614.00
21146	RECONSTRUCT MIDFACE, LEFORT I	\$ 6,242.00
21145	RECONSTRUCT MIDFACE, LEFORT I	\$ 6,015.00
21143	RECONSTRUCT MIDFACE, LEFORT I, 3+PC	\$ 5,506.00
21142	RECONSTRUCT MIDFACE, LEFORT I, 2PC	\$ 5,278.00
21141	RECONSTRUCT MIDFACE, LEFORT I, 1PC	\$ 5,135.00
21139	REDUCE/CONTOUR FOREHEAD, SINUS WALL	\$ 4,286.00
21138	REDUCE/CONTOUR FOREHEAD, PROS/GRAFT	\$ 3,553.00
21137	REDUCE/CONTOUR FOREHEAD	\$ 2,906.00
21127	AUGMENT LOWER JAW, W/BONE GRAFT	\$ 3,209.00
21125	AUGMENT LOWER JAW, W/PROSTHESIS	\$ 2,766.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
21123	REVISE CHIN, SLIDING W/BONE GRAFTS	\$ 3,398.00
21122	REVISE CHIN, SLIDING OSTEOTOMIES	\$ 2,949.00
21121	REVISE CHIN, SLIDING OSTEOTOMY	\$ 2,326.00
21120	REVISE/AUGMENT CHIN	\$ 1,996.00
21116	INJECTION FOR JAW JOINT X-RAY	\$ 180.00
21110	APPLY/REMOVE INTERDENTAL FIXATION	\$ 2,549.00
21100	APPLY/REMOVE MAXILLOFACIAL FIXATION	\$ 1,476.00
21088	PREPARE FACIAL PROSTHESIS	\$ 3,529.00
21087	PREPARE NASAL PROSTHESIS	\$ 5,563.00
21086	PREPARE EAR PROSTHESIS	\$ 5,563.00
21085	PREPARE ORAL SURGICAL SPLINT	\$ 2,039.00
21084	PREPARE SPEECH AID PROSTHESIS	\$ 5,152.00
21083	PREPARE PALATAL PROSTHESIS	\$ 4,463.00
21082	PREPARE PALATAL PROSTHESIS	\$ 4,794.00
21081	PREPARE MANDIBLE PROSTHESIS	\$ 5,174.00
21080	PREPARE CLEFT PALATE PROSTHESIS	\$ 5,633.00
21079	PREPARE CLEFT PALATE PROSTHESIS	\$ 5,052.00
21077	PREPARE ORBITAL PROSTHESIS	\$ 7,541.00
21076	PREP SURGERY OBTURATOR PROSTHESIS	\$ 3,009.00
21073	MNPJ OF TMJ W/ANESTH	\$ 948.00
21070	REMOVAL OF CORONOID PROCESS	\$ 2,375.00
21060	REMOVAL OF JAW JOINT CARTILAGE	\$ 3,068.00
21050	REMOVAL OF TEMPOROMANDIBULAR JOINT	\$ 3,373.00
21049	Exc.of Benign tumor of Maxilla; ext	\$ 4,550.00
21048	Exc.of benign tumor of Maxilla;	\$ 4,169.00
21047	Exc of Benign tumor; extra oral-ost	\$ 4,884.00
21046	Excision of benign tumor or cyst	\$ 4,106.00
21045	RADICAL RESECTION, MALIG JAW TUMOR	\$ 4,543.00
21044	REMOVE MALIGNANT LOWER JAW TUMOR	\$ 3,244.00
21040	REMOVE BENIGN LOWER JAW LESION	\$ 1,525.00
21034	EXCISE MAX/ZYGOMA MAL TUMOR	\$ 4,276.00
21032	REMOVE EXOSTOSIS OF UPPER JAW	\$ 1,067.00
21031	REMOVE EXOSTOSIS OF LOWER JAW	\$ 1,084.00
21030	REMOVE BENIGN FACE BONE LESION	\$ 1,521.00
21029	CONTOUR BENIGN FACE BONE LESION	\$ 2,364.00
21026	REMOVAL OF FACIAL BONE(S)	\$ 1,799.00
21025	REMOVAL OF LOWER JAW BONE	\$ 2,738.00
21016	RESECT FACE TUM 2 CM/>	\$ 3,899.00
21015	RADICAL RESECTION, FACE/SCALP TUMOR	\$ 2,704.00
21014	EXC FACE TUM DEEP 2 CM/>	\$ 2,009.00
21013	EXCISION, TUMOR SUBFACIAL LESS 2CM	\$ 1,535.00
21012	EXC FACE LES SBQ 2 CM/>	\$ 1,310.00
21011	EXCISION, TUMOR, SOFT TISSUE FACE	\$ 982.00
21010	INCISION OF TEMPOROMANDIBULAR JOINT	\$ 2,850.00
20985	CPTR-ASST DIR MS PX	\$ 576.00
20983	CPTR-ASST DIR MS PX	\$ 1,272.00
20982	ABLATION BONE TUMOR(S) INC CT GUID	\$ 1,366.00



<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
20979	NULL	\$ 123.00
20975	ELECTR BONE STIMULATION, OPERATIVE	\$ 709.00
20974	ELECTRICAL BONE STIMULATION	\$ 199.00
20973	BONE-SKIN GRAFT, GREAT TOE	\$ 11,805.00
20972	MICROVASCULAR BONE-SKIN GRAFT, TOE	\$ 11,177.00
20970	MICROVASC BONE-SKIN GRFT ILIAC CRST	\$ 11,208.00
20969	MICROVASC GRFT NOT ILIAC/MET/GRTTOE	\$ 10,347.00
20962	MICROVASC BONE GRFT OTH THAN FIBULA	\$ 10,407.00
20957	MICROVASCULAR METATARSAL BONE GRAFT	\$ 10,789.00
20956	MICROVASCULAR ILIAC CREST BONE GRFT	\$ 10,370.00
20955	MICROVASCULAR FIBULA BONE GRAFT	\$ 9,376.00
20950	RECORD INTERCELLULAR FLUID PRESSURE	\$ 343.00
20938	AUTOGRAFT, SPINE SURG, STRUCTURAL	\$ 762.00
20937	AUTOGRAFT, SPINE SURG, MORSELIZED	\$ 678.00
20931	ALLOGRAFT, SPINE SURG, STRUCTURAL	\$ 461.00
20924	REMOVE TENDON FOR GRAFT	\$ 1,956.00
20922	FASCIA LATA FOR GRAFT, BY INCISION	\$ 1,891.00
20920	FASCIA LATA FOR GRAFT, BY STRIPPER	\$ 1,505.00
20912	NASAL SEPTUM CARTILAGE FOR GRAFT	\$ 1,797.00
20910	REMOVE RIB CARTILAGE FOR GRAFT	\$ 1,816.00
20902	REMOVE BONE FOR GRAFT, LARGE/MAJOR	\$ 1,101.00
20900	REMOVE BONE FOR GRAFT, SMALL/MINOR	\$ 712.00
20838	REPLANTATION OF FOOT, COMPLETE	\$ 10,926.00
20827	REPLANTATION OF THUMB, COMPLETE	\$ 7,128.00
20824	REPLANTATION OF THUMB, COMPLETE	\$ 8,087.00
20822	REPLANTATION OF DIGIT, COMPLETE	\$ 6,938.00
20816	REPLANTATION OF DIGIT, COMPLETE	\$ 8,074.00
20808	REPLANTATION OF HAND, COMPLETE	\$ 15,542.00
20805	REPLANTATION OF FOREARM, COMPLETE	\$ 12,844.00
20802	REPLANTATION OF ARM, COMPLETE	\$ 10,778.00
20697	NULL	\$ 7,677.00
20696	NULL	\$ 4,602.00
20694	REMOVE BONE FIXATION DEVICE	\$ 1,300.00
20693	ADJUST/REVISE BONE FIXATION DEVICE	\$ 1,693.00
20692	APPLY BONE FIXATION DEVICE, MULTI-	\$ 4,310.00
20690	APPLY BONE FIXATION DEVICE,UNIPLANE	\$ 2,318.00
20680	REMOVAL OF DEEP SUPPORT IMPLANT	\$ 1,616.00
20670	REMOVE SUPERFICIAL SUPPORT IMPLANT	\$ 553.00
20665	REMOVE TONGS/HALO, OTHER PHYSICIAN	\$ 339.00
20664	APPLY/REMOVE HALO, THIN SKULL	\$ 3,592.00
20663	APPLY/REMOVE THIGH BRACE (HALO)	\$ 1,833.00
20662	APPLY/REMOVE PELVIC BRACE (HALO)	\$ 1,993.00
20661	APPLY/REMOVE HEAD BRACE (HALO)	\$ 2,016.00
20660	APPLY/REMOVE BONE FIXATION DEVICE	\$ 997.00
20650	INSERT/REMOVE BONE WIRE/PIN	\$ 597.00
20615	TREATMENT OF BONE CYST	\$ 598.00
20612	Aspiration &/or injection of gangli	\$ 155.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
20611	Aspiration &/or injection of gangli	\$ 224.00
20610	DRAIN/INJECT MAJOR JOINT OR BURSA	\$ 175.00
20606	DRAIN/INJECT MAJOR JOINT OR BURSA	\$ 196.00
20605	DRAIN/INJECT INTERMED JOINT/BURSA	\$ 141.00
20604	DRAIN/INJECT INTERMED JOINT/BURSA	\$ 169.00
20600	DRAIN/INJECT SMALL JOINT OR BURSA	\$ 136.00
20555	PLACE NDL MUSC/TIS FOR RT	\$ 1,223.00
20553	Injection(s);Single or Mult trigger	\$ 162.00
20552	single or mutiple trigger pts	\$ 146.00
20551	Injection(S);Tendon origin/insertio	\$ 149.00
20550	INJECT TENDON/LIGAMENT/GANGL CYST	\$ 147.00
20527	INJ DUPUYTREN CORD W/ENZYME	\$ 255.00
20526	Injection, therapeutic, Carpal tunn	\$ 221.00
20525	REMOVE OBJECT, MUSCLE/TENDON, DEEP	\$ 951.00
20520	REMOVE OBJECT, MUSCLE/TENDON,SIMPLE	\$ 556.00
20501	SINUS TRACT INJECTION FOR X-RAY	\$ 141.00
20500	SINUS TRACT INJECTION, THERAPEUTIC	\$ 321.00
20251	OPEN BONE BIOPSY, LUMBAR/CERVICAL	\$ 1,726.00
20250	OPEN BONE BIOPSY, THORACIC	\$ 1,586.00
20245	BONE BIOPSY, EXCISIONAL, DEEP	\$ 1,340.00
20240	BONE BIOPSY, EXCISIONAL,SUPERFICIAL	\$ 551.00
20225	BONE BIOPSY, TROCAR/NEEDLE, DEEP	\$ 485.00
20220	BONE BIOPSY, TROCAR/NEEDLE,SUPERFIC	\$ 322.00
20206	NEEDLE BIOPSY, MUSCLE	\$ 213.00
20205	MUSCLE BIOPSY, DEEP	\$ 619.00
20200	MUSCLE BIOPSY, SUPERFICIAL	\$ 378.00
20150	EXCISION OF EPIPHYSEAL BAR	\$ 3,932.00
20103	EXPLORE PENETRATING WND, ARM/LEG	\$ 1,343.00
20102	EXPLORE PENETRATING WND, ABDMN/BACK	\$ 1,021.00
20101	EXPLORE PENETRATING WOUND, CHEST	\$ 846.00
20100	EXPLORE PENETRATING WOUND, NECK	\$ 2,375.00
19396	DESIGN CUSTOM BREAST IMPLANT	\$ 561.00
19380	REVISION OF BREAST RECONSTRUCTION	\$ 3,004.00
19371	REMOVAL OF BREAST CAPSULE	\$ 3,044.00
19370	SURGERY OF BREAST CAPSULE	\$ 2,662.00
19369	BREAST RECON W/TRAM, DOUBLE PEDICLE	\$ 7,904.00
19368	BREAST RECON W/TRAM MICROVASC ANAST	\$ 8,508.00
19367	BREAST RECONSTRUCTION W/TRAM	\$ 6,904.00
19364	BREAST RECONSTRUCTION W/FREE FLAP	\$ 10,686.00
19361	BREAST RECONSTRUCTION W/LD FLAP	\$ 6,091.00
19357	BREAST RECONSTRUCTION W/EXPANDER	\$ 5,787.00
19355	CORRECTION OF INVERTED NIPPLES	\$ 2,391.00
19350	NIPPLE/AREOLA RECONSTRUCTION	\$ 2,597.00
19342	DELAYED BREAST PROSTHESIS	\$ 3,579.00
19340	IMMEDIATE BREAST PROSTHESIS	\$ 3,839.00
19330	REMOVAL OF BREAST IMPLANT MATERIAL	\$ 2,453.00
19328	REMOVAL OF BREAST IMPLANT	\$ 1,932.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
19325	ENLARGEMENT OF BREAST W/IMPLANT	\$ 2,497.00
19318	REDUCTION OF BREAST	\$ 4,250.00
19316	SUSPENSION OF BREAST	\$ 3,008.00
19307	MASTCTMY MODIFIED RADICAL	\$ 4,835.00
19306	MASTECTOMY RADCL URBAN TYPE OPERATN	\$ 4,855.00
19305	MASTECTMY RADCAL INCLDNG PCTRL MUSL	\$ 4,571.00
19303	MASTECTOMY SIMPLE COMPLETE	\$ 3,853.00
19302	MASTECTMY PARTIAL W AXLRY LYMPNCTMY	\$ 3,627.00
19301	MASTECTOMY PARTIAL	\$ 2,636.00
19300	MASTECTOMY FOR GYNECOMASTIA	\$ 1,654.00
19298	PLCMNT RADTHRP AFTER BRCHTHR CATH	\$ 1,210.00
19297	PLCMNT RADIOTHRPY WITH MASTECTOMY	\$ 387.00
19296	PLCMNT RADTHRY BALLON CATH IN BRST	\$ 846.00
19288	PERQ BREAST LOC DEVICE PLACEMT ADD	\$ 237.00
19287	DEL2014PLACE NEEDLE LOC WIRE, BREAS	\$ 471.00
19286	DEL2014PLACE NEEDLE LOC WIRE, BREAS	\$ 162.00
19285	PERQ BREST LOC DEVICE PLACMT 1ST LE	\$ 317.00
19284	PERQ BREAST LOC DEVICE PLACEMT EA	\$ 193.00
19283	PERQ BREST LOC DEVICE PLACMT 1ST LE	\$ 373.00
19282	PERQ BREST LOC DEVICE PLACMT 1ST LE	\$ 185.00
19281	PERQ DEVICE PLACEMT BREAST LOC 1ST	\$ 365.00
19126	EXCISE ADDL BRST LESN (MARK), ADD'L	\$ 650.00
19125	EXCISE BREAST LESION (MARKER USED)	\$ 1,840.00
19120	REMOVAL OF BREAST LESION	\$ 1,651.00
19112	REMOVAL OF BREAST DUCT FISTULA	\$ 1,248.00
19110	EXPLORATION OF NIPPLE	\$ 1,372.00
19105	ABLTN CRYO OF FIBROADNMA + USG EACH	\$ 856.00
19101	SURGICAL BIOPSY OF BREAST	\$ 885.00
19100	NEEDLE BIOPSY OF BREAST	\$ 284.00
19086	BX BREAST W DEVICE ADDL LESION MAGN	\$ 329.00
19085	NEEDLE BIOPSY OF BREAST	\$ 666.00
19084	NEEDLE BIOPSY OF BREAST	\$ 286.00
19083	BX BREAST W DEVICE 1ST LESION ULTRA	\$ 584.00
19082	BX BREAST W DEVICE 1ST LESION ULTRA	\$ 309.00
19081	BX BREAST W DEVICE 1ST LESION STERO	\$ 615.00
19030	INJECTION FOR BREAST DUCT X-RAY	\$ 279.00
19020	INCISION OF BREAST LESION, DEEP	\$ 1,216.00
19001	PUNCTURE DRAIN OF BREAST CYST, ADDL	\$ 82.00
19000	PUNCTURE DRAINAGE OF BREAST CYST	\$ 165.00
17360	CHEMICAL SKIN PEEL FOR ACNE	\$ 356.00
17340	CRYOTHERAPY OF SKIN	\$ 183.00
17315	MOHS EACH +NL BLCK +IST 5 TSU BLOCK	\$ 196.00
17314	MOH trnk/arm/leg +nl IST STG<=5 tsu	\$ 687.00
17313	MOHS trunk/arms/legs IST STG<=5 tsu	\$ 1,249.00
17312	MOHS HEAD/NECK/HANDS +NL STG-IST ST	\$ 742.00
17311	MOHS SURGRY HEAD/NECK/HANDS.IST STG	\$ 1,395.00
17286	DESTROY MALIG LESION, FACE/EAR/NOSE	\$ 1,031.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
17284	DESTROY MALIG LESION, FACE/EAR/NOSE	\$ 767.00
17283	DESTROY MALIG LESION, FACE/EAR/NOSE	\$ 660.00
17282	DESTROY MALIG LESION, FACE/EAR/NOSE	\$ 528.00
17281	DESTROY MALIG LESION, FACE/EAR/NOSE	\$ 456.00
17280	DESTROY MALIG LESION, FACE/EAR/NOSE	\$ 333.00
17276	DESTROY MALIG LESION,NECK/HAND/FOOT	\$ 773.00
17274	DESTROY MALIG LESION,NECK/HAND/FOOT	\$ 649.00
17273	DESTROY MALIG LESION,NECK/HAND/FOOT	\$ 529.00
17272	DESTROY MALIG LESION,NECK/HAND/FOOT	\$ 467.00
17271	DESTROY MALIG LESION,NECK/HAND/FOOT	\$ 404.00
17270	DESTROY MALIG LESION,NECK/HAND/FOOT	\$ 366.00
17266	DESTROY MALIG LESION, TRUNK/ARM/LEG	\$ 592.00
17264	DESTROY MALIG LESION, TRUNK/ARM/LEG	\$ 500.00
17263	DESTROY MALIG LESION, TRUNK/ARM/LEG	\$ 471.00
17262	DESTROY MALIG LESION, TRUNK/ARM/LEG	\$ 425.00
17261	DESTROY MALIG LESION, TRUNK/ARM/LEG	\$ 332.00
17260	DESTROY MALIG LESION, TRUNK/ARM/LEG	\$ 262.00
17250	CHEMICAL CAUTERY, GRANULATED TISSUE	\$ 143.00
17111	DESTROY FLAT WART, 15+ LESIONS	\$ 310.00
17110	DESTROY FLAT WART, UP TO 14 LESIONS	\$ 252.00
17108	DESTROY VASCULAR SKIN LESIONS	\$ 1,963.00
17107	DESTROY VASCULAR SKIN LESIONS	\$ 1,327.00
17106	DESTROY VASCULAR SKIN LESIONS	\$ 1,020.00
17004	DESTROY BENIGN/PREMALIG LESION, 15+	\$ 366.00
17003	DESTROY BENIGN/PREMALIG LESION,2-14	\$ 9.00
17000	DESTROY BENIGN/PREMALIG LESION, 1	\$ 198.00
16036	Escharotomy, each addition incisio	\$ 321.00
16035	REMOVAL OF BURN SCAB	\$ 755.00
16030	BURN TREATMENT W/O ANESTH, LARGE	\$ 515.00
16025	BURN TREATMENT W/O ANESTH, MEDIUM	\$ 423.00
16020	BURN TREATMENT W/O ANESTH, SMALL	\$ 206.00
16000	LOCAL BURN TREATMENT, 1ST DEGREE	\$ 174.00
15958	REMOVE THIGH PRESSURE ULCER/BONE	\$ 4,578.00
15956	REMOVE THIGH PRESSURE ULCER	\$ 4,565.00
15953	REMOVE THIGH PRESSURE ULCER/BONE	\$ 3,867.00
15952	REMOVE THIGH PRESSURE ULCER	\$ 3,516.00
15951	REMOVE THIGH PRESSURE ULCER/BONE	\$ 3,430.00
15950	REMOVE THIGH PRESSURE ULCER	\$ 2,388.00
15946	REMOVE ISCHIAL PRESSURE ULCER/BONE	\$ 6,346.00
15945	REMOVE ISCHIAL PRESSURE ULCER/BONE	\$ 3,915.00
15944	REMOVE ISCHIAL PRESSURE ULCER	\$ 3,532.00
15941	REMOVE ISCHIAL PRESSURE ULCER/BONE	\$ 3,561.00
15940	REMOVE ISCHIAL PRESSURE ULCER	\$ 2,762.00
15937	REMOVE SACRAL PRESSURE ULCER/BONE	\$ 4,066.00
15936	REMOVE SACRAL PRESSURE ULCER	\$ 3,534.00
15935	REMOVE SACRAL PRESSURE ULCER/BONE	\$ 4,440.00
15934	REMOVE SACRAL PRESSURE ULCER	\$ 3,701.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
15933	REMOVE SACRAL PRESSURE ULCER/BONE	\$ 3,397.00
15931	REMOVE SACRAL PRESSURE ULCER	\$ 2,765.00
15922	REMOVE TAILBONE ULCER W/CLOSURE	\$ 3,044.00
15920	REMOVE TAILBONE ULCER W/SUTURE	\$ 2,456.00
15860	TEST FOR BLOOD FLOW IN FLAP/GRAFT	\$ 421.00
15852	DRESSING CHANGE W/ANESTHESIA	\$ 177.00
15851	REMOVAL OF SUTURES, OTHER SURGEON	\$ 168.00
15847	EXC SKIN ABD ADD ON	\$ 1,018.00
15845	MUSCLE TRANSFER/GRAFT, FACIAL PALSY	\$ 3,755.00
15842	GRAFT FOR FACE NERVE PALSY, MUSCLE	\$ 10,518.00
15841	GRAFT FOR FACE NERVE PALSY, MUSCLE	\$ 6,898.00
15840	GRAFT FOR FACE NERVE PALSY, FASCIA	\$ 3,811.00
15839	REMOVE EXCESSIVE SKIN, OTHER AREA	\$ 2,848.00
15838	REMOVE EXCESS SKIN/TISSUE, FAT PAD	\$ 2,473.00
15837	REMOVE EXCESSIVE SKIN, FOREARM/HAND	\$ 2,769.00
15836	REMOVE EXCESSIVE SKIN/TISSUE, ARM	\$ 2,943.00
15835	REMOVE EXCESS SKIN/TISSUE, BUTTOCK	\$ 3,607.00
15834	REMOVE EXCESSIVE SKIN/TISSUE, HIP	\$ 3,440.00
15833	REMOVE EXCESSIVE SKIN/TISSUE, LEG	\$ 3,370.00
15832	REMOVE EXCESSIVE SKIN/TISSUE, THIGH	\$ 3,567.00
15830	EXCSN, EXCSV SKIN & SUBCU TISU, ABD	\$ 4,577.00
15823	REVISE UPPER EYELID/EXCESS SKIN	\$ 1,992.00
15822	REVISE UPPER EYELID	\$ 1,457.00
15821	REVISE LOWER EYELID/FAT PAD HERNIA	\$ 1,997.00
15820	REVISE LOWER EYELID	\$ 1,856.00
15819	REVISION/RECONSTRUCTION OF NECK	\$ 3,068.00
15793	CHEMICAL PEEL, NONFACIAL, DERMAL	\$ 1,360.00
15792	CHEMICAL PEEL, NONFACIAL, EPIDERMAL	\$ 914.00
15789	CHEMICAL PEEL, FACIAL, DERMAL	\$ 1,554.00
15788	CHEMICAL PEEL, FACIAL, EPIDERMAL	\$ 883.00
15787	ABRASION TREAT EA ADD'L 4 LESIONS	\$ 62.00
15786	ABRASION TREATMENT, SINGLE LESION	\$ 498.00
15783	DERMABRASION, SUPERFICIAL, ANY SITE	\$ 1,373.00
15782	DERMABRASION, OTHER THAN FACE	\$ 1,540.00
15781	DERMABRASION, SEGMENTAL, FACE	\$ 1,629.00
15780	DERMABRASION, TOTAL FACE	\$ 2,601.00
15777	ACELLULAR DERM MATRIX IMPLT	\$ 838.00
15776	HAIR TRANSPLANT PUNCH GRAFTS, 16+	\$ 1,367.00
15775	HAIR TRANSPLANT PUNCH GRAFTS, 1-15	\$ 993.00
15770	DERMA-FAT-FASCIA GRAFT	\$ 2,508.00
15760	COMPOSITE SKIN GRAFT	\$ 2,628.00
15758	MICROVASCULAR FREE FASCIAL FLAP	\$ 8,742.00
15757	MICROVASCULAR FREE SKIN FLAP	\$ 8,674.00
15756	MICROVASCULAR FREE MUSCLE FLAP	\$ 8,750.00
15750	NEUROVASCULAR PEDICLE FLAP	\$ 3,525.00
15740	ISLAND PEDICLE FLAP	\$ 3,150.00
15738	MUSCLE-SKIN FLAP, LEG	\$ 5,031.00

CPT		Standard Fee
Code	CPT Code Description	
15736	MUSCLE-SKIN FLAP, ARM	\$ 4,743.00
15734	MUSCLE-SKIN FLAP, TRUNK	\$ 5,926.00
15731	FOREHEAD FLAP W PRSRVTN VASCLR PDCL	\$ 3,776.00
15650	TRANSFER OF SKIN PEDICLE FLAP	\$ 1,443.00
15630	DELAY FLAP AT NOSE/EARS/LIDS/LIPS	\$ 1,279.00
15620	DELAY FLAP AT FACE/NECK/HANDS/FEET	\$ 1,222.00
15610	DELAY SKIN FLAP AT SCALP/ARMS/LEGS	\$ 917.00
15600	DELAY SKIN FLAP AT TRUNK	\$ 792.00
15576	FORM SKIN PEDICLE, NOSE/EAR/LID/LIP	\$ 2,468.00
15574	FORM SKIN PEDICLE, FACE/HANDS/FEET	\$ 2,853.00
15572	FORM SKIN PEDICLE, SCALP/ARMS/LEGS	\$ 2,831.00
15570	FORM SKIN PEDICLE, TRUNK	\$ 2,839.00
15278	SKN SUB GRFT F/N/HF/G CH ADD	\$ 229.00
15277	SKN SUB GRFT F/N/HF/G CHILD	\$ 886.00
15276	SKIN SUB GRAFT F/N/HF/G ADDL	\$ 100.00
15275	SKIN SUB GRAFT FACE/NK/HF/G	\$ 353.00
15274	SKN SUB GRFT T/A/L CHILD ADD	\$ 180.00
15273	SKIN SUB GRFT T/ARM/LG CHILD	\$ 783.00
15272	SKIN SUB GRAFT T/A/L ADD-ON	\$ 69.00
15271	SKIN SUB GRAFT TRNK/ARM/LEG	\$ 325.00
15261	SKIN FULL GRAFT, NOSE/EAR/LIDS/LIPS	\$ 519.00
15260	SKIN FULL GRAFT, NOSE/EAR/LIDS/LIPS	\$ 3,178.00
15241	SKIN FULL GRAFT, FACE/HANDS/FEET	\$ 417.00
15240	SKIN FULL GRAFT, FACE/HANDS/FEET	\$ 2,981.00
15221	SKIN FULL GRAFT, SCALP/ARMS/LEGS	\$ 270.00
15220	SKIN FULL GRAFT, SCALP/ARMS/LEGS	\$ 2,294.00
15201	SKIN FULL THICKNESS GRAFT, TRUNK	\$ 306.00
15200	SKIN FULL THICKNESS GRAFT, TRUNK	\$ 2,561.00
15157	TISSU CULT, FACE, ADDTIONL 100 SQCM	\$ 674.00
15156	CULT SKIN GRFT F/N/HFG ADD	\$ 612.00
15155	CULT SKIN GRAFT F/N/HF/G	\$ 2,833.00
15152	CULT SKIN GRAFT T/A/L +%	\$ 577.00
15151	CULT SKIN GRFT T/A/L ADDL	\$ 449.00
15150	CULT SKIN GRFT T/ARM/LEG	\$ 2,550.00
15136	DERMAL AUTGRFT, ADDTNAL 100 SQ CM	\$ 356.00
15135	DERMAL AUTGRFT, FACE 100 SQCM	\$ 2,863.00
15131	DERML AUTGRFT, ADDINL 100 SQ CM	\$ 356.00
15130	DERMAL AUTOGRFT TRUNK LEG, 100 SQCM	\$ 2,287.00
15121	SKIN SPLIT GRAFT, FACE/NECK/EARS	\$ 527.00
15120	SKIN SPLIT GRAFT, FACE/NECK/EARS	\$ 2,646.00
15116	EPIDRML, AUTOGRFT, ADDTIONL 100 SQCM	\$ 589.00
15115	EPIDRMAL AUTOGRFT, FACE 100 SQ CM	\$ 2,578.00
15111	EPIDERMAL, AUTOGRFT ADDNL 100 SQ CM	\$ 419.00
15110	EPIDERMAL AUTOGRFT, TRNK ARM 100 SQ	\$ 2,676.00
15101	SKIN SPLIT GRAFT, TRUNK/ARMS/LEGS	\$ 440.00
15100	SKIN SPLIT GRAFT, TRUNK/ARMS/LEGS	\$ 2,771.00
15050	SKIN PINCH GRAFT, UP TO 2 CM	\$ 1,743.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
15040	HARVST SKIN FOR TISSUE, 100 SQ CM	\$ 489.00
15005	SRGCL PRP +NL 100 SQCM/1% FACE,HAND	\$ 362.00
15004	SRGCL PRP IST 100 SQCM/1% FACE,HAND	\$ 1,003.00
15003	SRGCL PRP +NL 100 SQCM/1% TRUNK/ARM	\$ 180.00
15002	SRGCL PRP IST 100 SQCM/1% TRUNK/ARM	\$ 865.00
14350	FILLETED FINGER/TOE FLAP W/PREP	\$ 2,543.00
14302	ADJACENT TISSUE, EACH ADDTNL 30.0SQ	\$ 842.00
14301	ADJACENT TISSUE TRANSFER, REARRANGE	\$ 3,298.00
14061	TISSUE TRANSFER, NOSE/EAR/LIDS/LIPS	\$ 3,083.00
14060	TISSUE TRANSFER, NOSE/EAR/LIDS/LIPS	\$ 2,488.00
14041	TISSUE TRANSFER, FACE/HANDS/FEET	\$ 2,882.00
14040	TISSUE TRANSFER, FACE/HANDS/FEET	\$ 2,335.00
14021	TISSUE TRANSFER, SCALP/ARMS/LEGS	\$ 2,665.00
14020	TISSUE TRANSFER, SCALP/ARMS/LEGS	\$ 2,108.00
14001	ADJACENT TISSUE TRANSFER, TRUNK	\$ 2,485.00
14000	ADJACENT TISSUE TRANSFER, TRUNK	\$ 1,897.00
13160	LATE CLOSURE OF WOUND, EXTENSIVE	\$ 3,070.00
13153	NULL	\$ 529.00
13152	REPAIR COMPLEX WOUND, NOSE/EAR/LIPS	\$ 1,288.00
13151	REPAIR COMPLEX WOUND, NOSE/EAR/LIPS	\$ 1,064.00
13133	NULL	\$ 487.00
13132	REPAIR COMPLEX WOUND,FACE/HAND/FOOT	\$ 1,164.00
13131	REPAIR COMPLEX WOUND,FACE/HAND/FOOT	\$ 924.00
13122	NULL	\$ 321.00
13121	REPAIR COMPLEX WOUND, SCALP/ARM/LEG	\$ 989.00
13120	REPAIR COMPLEX WOUND, SCALP/ARM/LEG	\$ 875.00
13102	NULL	\$ 278.00
13101	REPAIR COMPLEX WOUND, TRUNK	\$ 938.00
13100	REPAIR COMPLEX WOUND, TRUNK	\$ 760.00
12057	LAYER CLOSURE OF WOUNDS, FACE/EARS	\$ 1,641.00
12056	LAYER CLOSURE OF WOUNDS, FACE/EARS	\$ 1,482.00
12055	LAYER CLOSURE OF WOUNDS, FACE/EARS	\$ 1,159.00
12054	LAYER CLOSURE OF WOUNDS, FACE/EARS	\$ 841.00
12053	LAYER CLOSURE OF WOUNDS, FACE/EARS	\$ 810.00
12052	LAYER CLOSURE OF WOUNDS, FACE/EARS	\$ 754.00
12051	LAYER CLOSURE OF WOUNDS, FACE/EARS	\$ 635.00
12047	LAYER CLOSURE OF WOUNDS, HANDS/FEET	\$ 1,399.00
12046	LAYER CLOSURE OF WOUNDS, HANDS/FEET	\$ 1,251.00
12045	LAYER CLOSURE OF WOUNDS, HANDS/FEET	\$ 1,035.00
12044	LAYER CLOSURE OF WOUNDS, HANDS/FEET	\$ 811.00
12042	LAYER CLOSURE OF WOUNDS, HANDS/FEET	\$ 741.00
12041	LAYER CLOSURE OF WOUNDS, HANDS/FEET	\$ 552.00
12037	LAYER CLOSURE OF WOUNDS, TRUNK	\$ 1,294.00
12036	INTMD WND REPAIR S/A/T/EXTRUNK	\$ 1,103.00
12035	INTMD WND REPAIR S/A/T/EXT	\$ 929.00
12034	LAYER CLOSURE OF WOUNDS, TRUNK	\$ 776.00
12032	INTMD WND REPAIR S/A/T/EXT	\$ 721.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
12031	INTMD WND REPAIR S/A/T/EXT	\$ 570.00
12021	CLOSURE OF SPLIT WOUND, W/PACKING	\$ 534.00
12020	CLOSURE OF SPLIT WOUND, SIMPLE	\$ 721.00
12018	REPAIR SUPERFICIAL WOUNDS, FACE	\$ 697.00
12017	REPAIR SUPERFICIAL WOUNDS, FACE	\$ 613.00
12016	REPAIR SUPERFICIAL WOUNDS, FACE	\$ 514.00
12015	REPAIR SUPERFICIAL WOUNDS, FACE	\$ 379.00
12014	REPAIR SUPERFICIAL WOUNDS, FACE	\$ 300.00
12013	REPAIR SUPERFICIAL WOUNDS, FACE	\$ 235.00
12011	REPAIR SUPERFICIAL WOUNDS, FACE	\$ 222.00
12007	REPAIR SUPERFICIAL WOUNDS, TRUNK	\$ 573.00
12006	REPAIR SUPERFICIAL WOUNDS, TRUNK	\$ 467.00
12005	REPAIR SUPERFICIAL WOUNDS, TRUNK	\$ 382.00
12004	REPAIR SUPERFICIAL WOUNDS, TRUNK	\$ 291.00
12002	REPAIR SUPERFICIAL WOUNDS, TRUNK	\$ 235.00
12001	REPAIR SUPERFICIAL WOUNDS, TRUNK	\$ 175.00
11983	REMOVL W INSERT, IMPLANT	\$ 656.00
11982	REMOVAL, NONBIOGRADBLE DRU IMPLANT	\$ 373.00
11981	INSRT, NONBIOGRADBLE DRUG IMPLANT	\$ 313.00
11980	IMPLANT HORMONE PELLE(S)	\$ 208.00
11976	REMOVE CONTRACEPTIVE CAPSULES	\$ 363.00
11971	REMOVE TISSUE EXPANDER(S)	\$ 1,240.00
11970	REPLACE TISSUE EXPANDER	\$ 2,355.00
11960	INSERT TISSUE EXPANDER(S)	\$ 3,748.00
11954	CONTOUR DEFECT THERAPY, OVER 10 CC	\$ 440.00
11952	CONTOUR DEFECT THERAPY, 5.1-10.0 CC	\$ 407.00
11951	CONTOUR DEFECT THERAPY, 1.1-5.0 CC	\$ 290.00
11950	CONTOUR DEFECT THERAPY, 1CC OR LESS	\$ 200.00
11922	FIX SKIN COLOR DEFECT ADD'L 10 SQCM	\$ 116.00
11921	FIX SKIN COLOR DEFECT, 6.1-20 SQCM	\$ 510.00
11920	FIX SKIN COLOR DEFECT, UP TO 6 SQCM	\$ 432.00
11901	INJECT SKIN LESIONS, 8 OR MORE	\$ 178.00
11900	INJECT SKIN LESIONS, 7 MAX	\$ 115.00
11772	REMOVE PILONIDAL CYST, COMPLEX	\$ 2,268.00
11771	REMOVE PILONIDAL CYST, EXTENSIVE	\$ 1,741.00
11770	EXCISION OF PILONIDAL CYST OR SINUS	\$ 726.00
11765	EXCISE SKIN WEDGE, INGROWN TOENAIL	\$ 336.00
11762	NAILBED RECONSTRUCTION W/GRAFT	\$ 708.00
11760	REPAIR OF NAIL BED	\$ 430.00
11755	BIOPSY OF NAIL UNIT, ANY METHOD	\$ 223.00
11750	PERMANENT REMOVAL OF NAIL BED	\$ 369.00
11740	DRAIN BLOOD FROM UNDER NAIL	\$ 116.00
11732	REMOVAL, EA ADD NAIL PLATE PRTL/CMP	\$ 63.00
11730	REMOVAL OF SINGLE NAIL PLATE	\$ 199.00
11721	DEBRIDE 6+ NAILS, ANY METHOD	\$ 91.00
11720	DEBRIDE 1-5 NAILS, ANY METHOD	\$ 53.00
11719	TRIM NONDYSTROPHIC NAIL, ANY NUMBER	\$ 27.00



CPT Code	CPT Code Description	Standard Fee
11646	EXC F/E/E/N/L MAL+MRG > 4 CM	\$ 1,487.00
11644	EXC F/E/E/N/L MAL+MRG 3.1-4	\$ 1,069.00
11643	EXC F/E/E/N/L MAL+MRG 2.1-3	\$ 856.00
11642	EXC F/E/E/N/L MAL+MRG 1.1-2	\$ 686.00
11641	EXC F/E/E/N/L MAL+MRG 0.6-1	\$ 581.00
11640	EXC F/E/E/N/L MAL+MRG 0.5CM<	\$ 469.00
11626	EXC S/N/H/F/G MAL+MRG > 4 CM	\$ 1,122.00
11624	EXC S/N/H/F/G MAL+MRG 3.1-4	\$ 898.00
11623	REMOVE MALIG LESION, HEAD/HAND/FOOT	\$ 789.00
11622	EXC S/N/H/F/G MAL+MRG 1.1-2	\$ 637.00
11621	EXC S/N/H/F/G MAL+MRG 0.6-1	\$ 559.00
11620	EXC H-F-NK-SP MAL+MARG 0.5 <	\$ 459.00
11606	EXC TR-EXT MAL+MARG > 4 CM	\$ 1,214.00
11604	EXC TR-EXT MAL+MARG 3.1-4 CM	\$ 801.00
11603	EXC TR-EXT MAL+MARG 2.1-3 CM	\$ 727.00
11602	EXC TR-EXT MAL+MARG 1.1-2 CM	\$ 607.00
11601	EXC TR-EXT MAL+MARG 0.6-1 CM	\$ 554.00
11600	EXC TR-EXT MAL+MARG 0.5 < CM	\$ 452.00
11471	REMOVE SWEAT GLAND LESION, PERIANAL	\$ 1,346.00
11470	REMOVE SWEAT GLAND LESION, PERIANAL	\$ 1,093.00
11463	REMOVE SWEAT GLAND LESION, INGUINAL	\$ 1,286.00
11462	REMOVE SWEAT GLAND LESION, INGUINAL	\$ 949.00
11451	REMOVE SWEAT GLAND LESION, AXILLARY	\$ 1,275.00
11450	REMOVE SWEAT GLAND LESION, AXILLARY	\$ 1,000.00
11446	REMOVE LESION,FACE/LID/EAR/NOSE/LIP	\$ 1,218.00
11444	REMOVE LESION,FACE/LID/EAR/NOSE/LIP	\$ 855.00
11443	REMOVE LESION,FACE/LID/EAR/NOSE/LIP	\$ 667.00
11442	REMOVE LESION,FACE/LID/EAR/NOSE/LIP	\$ 543.00
11441	REMOVE LESION,FACE/LID/EAR/NOSE/LIP	\$ 487.00
11440	REMOVE LESION,FACE/LID/EAR/NOSE/LIP	\$ 382.00
11426	REMOVE LESION, SCALP/NECK/HAND/FOOT	\$ 1,051.00
11424	REMOVE LESION, SCALP/NECK/HAND/FOOT	\$ 675.00
11423	REMOVE LESION, SCALP/NECK/HAND/FOOT	\$ 584.00
11422	REMOVE LESION, SCALP/NECK/HAND/FOOT	\$ 509.00
11421	REMOVE LESION, SCALP/NECK/HAND/FOOT	\$ 408.00
11420	REMOVE LESION, SCALP/NECK/HAND/FOOT	\$ 303.00
11406	REMOVE LESION, TRUNK/ARM/LEG	\$ 951.00
11404	REMOVE LESION, TRUNK/ARM/LEG	\$ 620.00
11403	REMOVE LESION, TRUNK/ARM/LEG	\$ 559.00
11402	REMOVE LESION, TRUNK/ARM/LEG	\$ 428.00
11401	REMOVE LESION, TRUNK/ARM/LEG	\$ 386.00
11400	REMOVE LESION, TRUNK/ARM/LEG	\$ 304.00
11313	SHAVE LESION, FACE/LID/EAR/NOSE/LIP	\$ 372.00
11312	SHAVE LESION, FACE/LID/EAR/NOSE/LIP	\$ 287.00
11311	SHAVE LESION, FACE/LID/EAR/NOSE/LIP	\$ 241.00
11310	SHAVE LESION, FACE/LID/EAR/NOSE/LIP	\$ 174.00
11308	SHAVE LESION, SCALP/NECK/HAND/FOOT	\$ 268.00

<b>CPT Code</b>	<b>CPT Code Description</b>	<b>Standard Fee</b>
11307	SHAVE LESION, SCALP/NECK/HAND/FOOT	\$ 244.00
11306	SHAVE LESION, SCALP/NECK/HAND/FOOT	\$ 188.00
11305	SHAVE LESION, SCALP/NECK/HAND/FOOT	\$ 144.00
11303	SHAVE SKIN LESION, TRUNK/ARM/LEG	\$ 274.00
11302	SHAVE SKIN LESION, TRUNK/ARM/LEG	\$ 231.00
11301	SHAVE SKIN LESION, TRUNK/ARM/LEG	\$ 196.00
11300	SHAVE SKIN LESION, TRUNK/ARM/LEG	\$ 129.00
11201	REMOVAL OF EACH ADD'L 10 SKIN TAGS	\$ 61.00
11200	REMOVAL OF SKIN TAGS, UP TO 15	\$ 273.00
11057	PARING/CUT BENIGN SKIN LESION, 4+	\$ 106.00
11056	PARING/CUT BENIGN SKIN LESION, 2-4	\$ 85.00
11055	PARING/CUT BENIGN SKIN LESION, 1	\$ 58.00
11047	DEB BONE ADD-ON	\$ 389.00
11046	DEB MUSC/FASCIA ADD-ON	\$ 219.00
11045	DEB SUBQ TISSUE ADD-ON	\$ 104.00
11044	SURG CLEANSING, TISSUE/MUSCLE/BONE	\$ 871.00
11043	SURGICAL CLEANSING OF TISSUE/MUSCLE	\$ 593.00
11042	SURGICAL CLEANSING OF SKIN/TISSUE	\$ 227.00
11012	DEBRIDE SKIN/MUSCLE/BONE, FX	\$ 1,628.00
11011	DEBRIDE SKIN/MUSCLE, FX	\$ 1,176.00
11010	DEBRIDE SKIN/TISSUE, FX	\$ 1,064.00
11008	REM PROSTH MAT/MESH, ABD WALL INFEC	\$ 1,110.00
11006	DEBRMNT SKIN, EXT GENT, W/WO FAS CL	\$ 2,796.00
11005	DEBRIMNT, ABD WALL, W/WO FAS CLOSUR	\$ 3,149.00
11004	OEB SKIN, SUBCU TISS, EXT GEN/PERI	\$ 2,253.00
11001	SURGICAL SKIN CLEANSING, ADD'L 10%	\$ 52.00
11000	SURGICAL SKIN CLEANSING, UP TO 10%	\$ 105.00
10180	DRAIN COMPL POSTOP WOUND INFECTION	\$ 694.00
10160	PUNCTURE DRAINAGE OF SKIN LESION	\$ 353.00
10140	DRAINAGE OF SKIN LESION	\$ 448.00
10121	REMOVE SKIN FOREIGN BODY, COMPLIC	\$ 704.00
10120	REMOVE SKIN FOREIGN BODY, SIMPLE	\$ 381.00
10081	DRAINAGE OF PILONIDAL CYST, COMPLIC	\$ 653.00
10080	DRAINAGE OF PILONIDAL CYST, SIMPLE	\$ 390.00
10061	DRAIN SKIN ABSCESS, COMPLIC/MULT	\$ 682.00
10060	DRAIN SKIN ABSCESS, SIMPLE/SINGLE	\$ 372.00
10040	ACNE SURGERY	\$ 213.00
10036	Each additional lesion (List separa	\$ 160.00
10030	Placement of soft tissue localizati	\$ 507.00
10021	Ine needle aspiration;W/O image gui	\$ 208.00