

Procedure ID	Description	Effective Date	Charge
23840075	METRONIDAZOLE 0.75% CREAM	01/01/18	140.60
23882027	MULTIVITA W FLOURIDE DROP 50ML	01/01/18	13.81
330110100	LTC Custodial R&B	01/01/18	2189.25
330110101	LTC ROOM & BOARD VENT	01/01/18	2189.25
330110183	LTC Therapeutic Leave	01/01/18	1751.40
330110185	LTC Hospital Bedhold	01/01/18	1751.40
330110190	LTC SNF R&B	01/01/18	2189.25
330199998	CASH ASSESSMENT R&B-OTHER	01/01/18	93.34
330199999	CASH ASSESSMENT R&B	01/01/18	93.34
360100001	BANDAGE PLASTER 2INX-FAST 7372	01/01/18	113.56
360100002	BANDAGE PLASTER 4INX-FAST 7367	01/01/18	183.59
360100003	BANDAGE PLASTER 6INX-FAST 7368	01/01/18	154.35
360100004	BIVONA TRACH FLEX EXT 4.0	01/01/18	374.85
360100005	BIVONA TRACH FLEX EXT 4.5	01/01/18	867.14
360100006	BLADE STD MAC2 CRVED 008602200	01/01/18	135.08
360100007	BLADE STD MAC3 CRVED 008603300	01/01/18	131.20
360100008	BLADE STD MAC4 CRVED 008604400	01/01/18	131.20
360100009	BLADE STR MIL 00 STR 008600000	01/01/18	135.08
360100010	BLADE STR MIL 1 STR 008616100	01/01/18	131.20
360100011	BLADE STR MIL 2 STR 008617200	01/01/18	131.20
360100012	DEMA GRIP D	01/01/18	165.38
360100013	DEMA GRIP A	01/01/18	129.57
360100014	DEMA GRIP B	01/01/18	133.98
360100015	DEMA GRIP C	01/01/18	152.15
360100016	DEMA GRIP E	01/01/18	187.43
360100017	DEMA GRIP F	01/01/18	205.64
360100018	DEMA GRIP G	01/01/18	218.87
360100019	DEMA GRIP J	01/01/18	357.21
360100020	DEMA GRIP K	01/01/18	415.64
360100021	DRESSING ACTICOAT ABSORB 20381	01/01/18	232.10
360100022	ELECTRODE GEL 10-30	01/01/18	103.11
360100023	KIT BROVIAC REPAIR 2.7 FR	01/01/18	603.07
360100024	KIT BROVIAC REPAIR 4.2 FR	01/01/18	585.43
360100025	KIT BROVIAC REPAIR 6.6 FR	01/01/18	585.43
360100026	LARYNGOSCOPE MIL S 1 68041	01/01/18	291.64
360100027	LARYNGOSCOPE MIL S 2 68041 6042	01/01/18	305.97
360100028	MIC KEY BUTTON 14F 0.5CM	01/01/18	428.87
360100029	PADZ PEDI ADULT 8900-4003	01/01/18	139.49
360100030	PADZ PEDI PEDIATRIC 8900-2065	01/01/18	145.01
360100031	SET SUBCUTANEOUS INFUSION	01/01/18	114.66
360100032	TRACH SHILEY 6.OPDL	01/01/18	136.19

Procedure ID	Description	Effective Date	Charge
360100033	TRACH BIVONA 2.5 PED CUFFED	01/01/18	260.19
360100034	TRACH BIVONA 3.5 NEO CFLSS VFL	01/01/18	868.25
360100035	TRACH BIVONA 3.5 PED CFLSS VFL	01/01/18	868.25
360100036	TRCH BIV 4.0NEO AIRECF VFL 65N	01/01/18	868.25
360100037	TRCH BIV 4.5 PED CFLSS V FL	01/01/18	868.25
360100038	TRACH BIV CFLS 3.5 PED 60P03.5	01/01/18	294.95
360100039	TRACH BIVONA CFLS 5.0 PED	01/01/18	260.19
360100040	TRACH BIVONA CAN CUFF 6DCFS	01/01/18	152.15
360100041	TRACH DISP CAN CUFF 4DCFS	01/01/18	152.15
360100042	TRACH DISP CAN W/O CUFF 8DFS	01/01/18	152.15
360100043	TRACH SHILEY 5.0 PLC	01/01/18	183.59
360100044	TUBE TRACH BIV 3.0 NE 60N030	01/01/18	294.95
360100045	TUBE TRACH BIV 3.0 PED 60P030	01/01/18	294.95
360100046	TUBE TRACH BIV 3.5 NEO 60N035	01/01/18	260.19
360100047	TUBE TRACH BIV 4.0 NEO 60N040	01/01/18	259.67
360100048	TUBE TRACH BIV 4.0 PED 60P040	01/01/18	294.95
360100049	TUBE TRACH BIV 4.5 PED 60P045	01/01/18	260.19
360100050	TUBE TRCH SHILEY 4.0 PDC 40PDC	01/01/18	183.59
360100051	TUBE TRACH SHILEY 4CFN	01/01/18	185.80
360100052	TUBE TRACH SHILEY 4CFS	01/01/18	192.41
360100053	TUBE TRACH SHILEY 4LPC	01/01/18	210.05
360100054	TUBE TRACH SHILEY 5.0 PDC	01/01/18	183.59
360100055	TUBE TRCH SHLEY 5.5 PDL 55 PDL	01/01/18	136.19
360100056	TUBE TRACH SHILEY 5.5PLC	01/01/18	183.59
360100057	TUBE TRACH SHILEY 6.0PLC	01/01/18	183.59
360100058	TUBE TRACH SHILEY 6.5 PDL	01/01/18	136.19
360100059	TUBE TRACH SHILEY 6CFS	01/01/18	175.30
360100060	TUBE TRACH SHILEY 6LPC	01/01/18	210.05
360100061	TUBE TRACH SHILEY 8CFS	01/01/18	175.30
360100062	TUBE TRACH SHILEY 8LPC	01/01/18	167.58
360100063	TUBE TRACH SHILEY NEO 3.5 NE	01/01/18	136.19
360100064	TUBE TRACH SHILETY NEO 3.0 NE	01/01/18	136.19
360100065	TUBE TRACH SHILEY NEO 4.0 NE	01/01/18	136.19
360100066	TUBE TRCH SHLEY NEO 4.5 4.5NEO	01/01/18	136.19
360100067	TUBE TRACH SHILEY PED 3.0 PE	01/01/18	136.19
360100068	TUBE TRACH SHILEY PED 3.5 PE	01/01/18	136.19
360100069	TUBE TRACH SHILEY PED 4.0 PE	01/01/18	136.19
360100070	TUBE TRACH SHILEY PED 4.5 PE	01/01/18	136.19
360100071	TUBE TRACH SHILEY PED 4.5PDC	01/01/18	183.59
360100072	TUBE TRACH SHILEY PED 4.0 DCT	01/01/18	160.44
360100073	TUBE TRACH SHILEY PED 5.0 PE	01/01/18	136.19

Procedure ID	Description	Effective Date	Charge
360100074	TUBE TRCH SHLEY PED 5.5 5.5PED	01/01/18	136.19
360100075	TUBE TRACH SHILEY PED 5.5 PD	01/01/18	183.59
360100076	TUBE TRACH SHILEY PED 6.0 PDL	01/01/18	136.19
360100077	TUBE TRACH SHILEY PED 6.0DCT	01/01/18	156.56
360100078	VALVE PASSI-MUIR TRACH CLEA	01/01/18	282.82
360100079	VALVE PASSY-MUIR TRACH AQU	01/01/18	282.82
360100080	VALVE PASSY-MUIR TRACH PURP	01/01/18	282.82
360100081	POSITIONERS DCP7010D	01/01/18	65.63
360100082	POSITIONERS DCP20030D	01/01/18	457.54
360100083	POSITIONERS 12 X 20	01/01/18	242.55
360100084	POSITIONERS DCPK 1200	01/01/18	294.37
360100085	POSITIONERS Z-1 15 X 20	01/01/18	529.20
360100086	PROTECTORS HEELBO LARGE	01/01/18	27.56
360100087	PROTECTORS HEELBO MEDIUM	01/01/18	27.56
360100088	PROTECTORS HEELBO SMALL	01/01/18	27.56
360100089	TRACH BIV CFLS5.5 PED 60PFPS55	01/01/18	614.09
360100090	TRACH BIV 6.0 PED 60PFPS60	01/01/18	614.09
360100091	TRACH BIV CFLS PED5.5 60P055	01/01/18	247.54
360100092	TRACH SHILEY 5.0 PDL	01/01/18	125.69
360100093	TRACH BIV CUFFED 4.0PED 65P040	01/01/18	826.88
360100094	BREASTPUMP HARMONY 61786S	01/01/18	68.93
360100095	CPAP CANNULA INF NASAL #2 1692	01/01/18	39.69
360100096	CPAP CANNULA INF NASAL #5 1695	01/01/18	39.69
360100097	CPAP CANNULA INF NASAL #0 1690	01/01/18	39.69
360100098	CPAP CANNULA INF NASAL #1 1691	01/01/18	39.69
360100099	BREASTPUMP DUET SYSTEM 67114S	01/01/18	128.99
360100100	KIT BREAST PMP SYMPHONY 67305S	01/01/18	162.65
360110000	BCH 1 INFANT TODDLER ALC	01/01/18	2731.47
360110100	BCH 1 INFANT TODDLER RESPITE	01/01/18	1502.71
360110193	BCH 1 INF SUB ACUTE L3 FEEDING	01/01/18	1956.94
360110194	BCH 1 INF TDLR RHB LVL OF CR 2	01/01/18	2976.75
360110200	BCH 1 INFANT TODDLER REHAB	01/01/18	3268.91
360110300	BCH 1 INFANT TODDLER MEDCOMP	01/01/18	3390.19
360110400	BCH 1 INFANT TODDLER TBI	01/01/18	3390.19
360110500	BCH 1 INFANT TODDLER VENT	01/01/18	3459.12
360110600	BCH 1 INF TDLR RHB LVL OF CARE	01/01/18	1956.94
360200001	BANDAGE PLASTER 2INX-FAST 7367	01/01/18	113.56
360200002	BANDAGE PLASTER 4INX-FAST 7367	01/01/18	183.59
360200003	BANDAGE PLASTER 6INX-FAST 7368	01/01/18	154.35
360200004	BIVONA TRACH FLEX EXT 4.0	01/01/18	374.85
360200005	BIVONA TRACH FLEX EXT 4.5	01/01/18	867.14

Procedure ID	Description	Effective Date	Charge
360200006	BLADE STD MAC2 CRVED 008602200	01/01/18	135.08
360200007	BLADE STD MAC3 CRVED 008603300	01/01/18	131.20
360200008	BLADE STD MAC4 CRVED 008604400	01/01/18	131.20
360200009	BLADE STR MIL 00 STR 008600000	01/01/18	135.08
360200010	BLADE STR MIL 1 STR 008616100	01/01/18	131.20
360200011	BLADE STR MIL 2 STR 008617200	01/01/18	131.20
360200012	DEMA GRIP D	01/01/18	165.38
360200013	DEMA GRIP A	01/01/18	129.57
360200014	DEMA GRIP B	01/01/18	133.98
360200015	DEMA GRIP C	01/01/18	152.15
360200016	DEMA GRIP E	01/01/18	187.43
360200017	DEMA GRIP F	01/01/18	205.64
360200018	DEMA GRIP G	01/01/18	218.87
360200019	DEMA GRIP J	01/01/18	357.21
360200020	DEMA GRIP K	01/01/18	415.64
360200021	DRESSING ACTICOAT ABSORB 20381	01/01/18	232.10
360200022	ELECTRODE GEL 10-30	01/01/18	103.11
360200023	KIT BROVIAC REPAIR 2.7 FR	01/01/18	603.07
360200024	KIT BROVIAC REPAIR 4.2 FR	01/01/18	585.43
360200025	KIT BROVIAC REPAIR 6.6 FR	01/01/18	585.43
360200026	LARYNGOSCOPE MIL S 1 68041	01/01/18	291.64
360200027	LARYNGOSCOPE MIL S 2 68041 6042	01/01/18	305.97
360200028	MIC KEY BUTTON 14F 0.5CM	01/01/18	428.87
360200029	PADZ PEDI ADULT 8900-4003	01/01/18	139.49
360200030	PADZ PEDI PEDIATRIC 8900-2065	01/01/18	145.01
360200031	SET SUBCUTANEOUS INFUSION	01/01/18	114.66
360200032	TRACH SHILEY 6.0PDL	01/01/18	136.19
360200033	TRACH BIVONA 2.5 PED CUFFED	01/01/18	260.19
360200034	TRACH BIVONA 3.5 NEO CFLSS VFL	01/01/18	868.25
360200035	TRACH BIVONA 3.5 PED CFLSS VFL	01/01/18	868.25
360200036	TRCH BIV 4.0NEO AIRECF VFL 65N	01/01/18	868.25
360200037	TRCH BIV 4.5 PED CFLSS V FL	01/01/18	868.25
360200038	TRACH BIV CFLS 3.5 PED 60P03.5	01/01/18	294.95
360200039	TRACH BIVONA CFLS 5.0 PED	01/01/18	260.19
360200040	TRACH DISP CAN CUFF 6DCFS	01/01/18	152.15
360200041	TRACH DISP CAN CUFF 4DCFS	01/01/18	152.15
360200042	TRACH DISP CAN W/O CUFF 8DFS	01/01/18	152.15
360200043	TRACH SHILEY 5.0 PLC	01/01/18	183.59
360200044	TUBE TRACH BIV 3.0 NE 60N030	01/01/18	294.95
360200045	TUBE TRACH BIV 3.0 PED 60P030	01/01/18	294.95
360200046	TUBE TRACH BIV 3.5 NEO 60N035	01/01/18	260.19

Procedure ID	Description	Effective Date	Charge
360200047	TUBE TRACH BIV 4.0 NEO 60N040	01/01/18	259.67
360200048	TUBE TRACH BIV 4.0 PED 60P040	01/01/18	294.95
360200049	TUBE TRACH BIV 4.5 PED 60P045	01/01/18	260.19
360200050	TUBE TRCH SHILEY 4.0 PDC 40PDC	01/01/18	183.59
360200051	TUBE TRACH SHILEY 4CFN	01/01/18	185.80
360200052	TUBE TRACH SHILEY 4CFS	01/01/18	192.41
360200053	TUBE TRACH SHILEY 4LPC	01/01/18	210.05
360200054	TUBE TRACH SHILEY 5.0 PDC	01/01/18	183.59
360200055	TUBE TRCH SHLEY 5.5 PDL 55 PDL	01/01/18	136.19
360200056	TUBE TRACH SHILEY 5.5PLC	01/01/18	183.59
360200057	TUBE TRACH SHILEY 6.0PLC	01/01/18	183.59
360200058	TUBE TRACH SHILEY 6.5 PDL	01/01/18	136.19
360200059	TUBE TRACH SHILEY 6CFS	01/01/18	175.30
360200060	TUBE TRACH SHILEY 6LPC	01/01/18	210.05
360200061	TUBE TRACH SHILEY 8CFS	01/01/18	175.30
360200062	TUBE TRACH SHILEY 8LPC	01/01/18	167.58
360200063	TUBE TRACH SHILEY NEO 3.5 NE	01/01/18	136.19
360200064	TUBE TRACH SHILEY NEO 3.0 NE	01/01/18	136.19
360200065	TUBE TRACH SHILEY NEO 4.0 NE	01/01/18	136.19
360200066	TUBE TRCH SHLEY NEO 4.5 4.5NEO	01/01/18	136.19
360200067	TUBE TRACH SHILEY PED 3.0 PE	01/01/18	136.19
360200068	TUBE TRACH SHILEY PED 3.5 PE	01/01/18	136.19
360200069	TUBE TRACH SHILEY PED 4.0 PE	01/01/18	136.19
360200070	TUBE TRACH SHILEY PED 4.5 PE	01/01/18	136.19
360200071	TUBE TRACH SHILEY PED 4.5PDC	01/01/18	183.59
360200072	TUBE TRACH SHILEY PED 4.0 DCT	01/01/18	160.44
360200073	TUBE TRACH SHILEY PED 5.0 PE	01/01/18	136.19
360200074	TUBE TRCH SHLEY PED 5.5 5.5PED	01/01/18	136.19
360200075	TUBE TRACH SHILEY PED 5.5PD	01/01/18	183.59
360200076	TUBE TRACH SHILEY PED 6.0 PDL	01/01/18	136.19
360200077	TUBE TRACH SHILEY PED 6.0DCT	01/01/18	156.56
360200078	VALVE PASSI-MUIR TRACH CLEA	01/01/18	282.82
360200079	VALVE PASSY-MUIR TRACH AQU	01/01/18	282.82
360200080	VALVE PASSY-MUIR TRACH PURP	01/01/18	282.82
360200081	POSITIONER DCP7010D	01/01/18	65.63
360200082	POSITIONERS DCP20030D	01/01/18	457.54
360200083	POSITIONERS 12 X 20	01/01/18	242.55
360200084	POSITIONERS DCPK 1200	01/01/18	294.37
360200085	POSITIONERS Z-1 15 X 20	01/01/18	529.20
360200086	PROTECTORS HEELBO LARGE	01/01/18	27.56
360200087	PROTECTORS HEELBO MEDIUM	01/01/18	27.56

Procedure ID	Description	Effective Date	Charge
360200088	PROTECTORS HEELBO SMALL	01/01/18	27.56
360200089	TRACH BIV CFLS5.5 PED 60PFPS55	01/01/18	614.09
360200090	TRACH BIV 6.0 PED 60PFPS60	01/01/18	614.09
360200091	TRACH BIV CFLS PED5.5 60P055	01/01/18	247.54
360200092	TRACH SHILEY 5.0 PDL	01/01/18	129.57
360200093	TRACH BIV CUFFED 4.0PED 65P040	01/01/18	826.88
360200094	BREASTPUMP HARMONY 61786S	01/01/18	68.93
360200095	CPAP CANNULA INF NASAL #2 169	01/01/18	39.69
360200096	CPAP CANNULA INF NASAL #5 1695	01/01/18	39.69
360200097	CPAP CANNULA INF NASAL #0 1690	01/01/18	39.69
360200098	CPAP CANNULA INF NASAL #1 1691	01/01/18	39.69
360200099	BREASTPUMP DUET SYSTEM 67114S	01/01/18	128.99
360200100	KIT BREAST PMP SYMPHONY	01/01/18	162.65
360210000	BCH 2 ADOLESCENT ALC	01/01/18	2860.46
360210100	BCH 2 ADOLESCENT RESPITE	01/01/18	1573.85
360210193	BCH 2 ADL'NT SUB ACUTE L3 FEED	01/01/18	1956.94
360210194	BCH 2 ADLES'NT RHB LVL OF CR 2	01/01/18	2976.75
360210200	BCH 2 ADOLESCENT REHAB	01/01/18	3295.37
360210300	BCH 2 ADOLESCENT MEDCOMP	01/01/18	3454.13
360210400	BCH 2 ADOLESCENT TBI	01/01/18	3454.13
360210500	BCH 2 ADOLESCENT VENT	01/01/18	3586.43
360210600	BCH 2 ADLES'NT RHB LVL OF CARE	01/01/18	1956.94
360610000	BLUE UNIT CENSUS ALTERNATE LEVEL OF CARE	01/01/18	2860.46
360610100	BLUE UNIT CENSUS RESPITE CARE	01/01/18	1573.85
360610200	BLUE UNIT CENSUS REHABILITATION	01/01/18	3295.37
360610300	BLUE UNIT CENSUS MEDICAL COMPLEX	01/01/18	3454.13
360610400	BLUE UNIT CENSUS TRAUMATIC BRAIN INJURY	01/01/18	3454.13
360610500	BLUE UNIT CENSUS VENTILATOR WEANING	01/01/18	3586.43
360620000	BLUE UNIT 1:1 STAFFING	01/01/18	1950.32
360710000	YELLOW UNIT CENSUS ALTERNATE LEVEL OF CARE	01/01/18	2790.43
360710100	YELLOW UNIT CENSUS RESPITE CARE	01/01/18	1535.78
360710200	YELLOW UNIT CENSUS REHABILITATION	01/01/18	3402.89
360710300	YELLOW UNIT CENSUS MEDICAL COMPLEX	01/01/18	3367.04
360710400	YELLOW UNIT CENSUS TRAUMATIC BRAIN INJURY	01/01/18	3367.04
360710500	YELLOW UNIT CENSUS VENTILATOR	01/01/18	3479.49
360720000	YELLOW UNIT 1:1 STAFFING	01/01/18	1950.32
360810000	GREEN UNIT CENSUS ALTERNATE LEVEL OF CARE	01/01/18	2731.47
360810100	GREEN UNIT CENSUS RESPITE CARE	01/01/18	1502.71
360810200	GREEN UNIT CENSUS REHABILITATION	01/01/18	3268.91
360810300	GREEN UNIT CENSUS MEDICAL COMPLEX	01/01/18	3390.19
360810400	GREEN UNIT CENSUS TRAUMATIC BRAIN INJURY	01/01/18	3390.19

Procedure ID	Description	Effective Date	Charge
360810500	GREEN UNIT CENSUS VENTILATOR WEANING	01/01/18	3459.12
360820000	GREEN UNIT 1:1 STAFFING	01/01/18	1950.32
360911200	EARLY INTERVENTION PROGRAM ATT	01/01/18	896.33
360911300	AUTISM PROGRAM ATTENDANCE	01/01/18	896.33
360911400	CPSE PROGRAM ATTENDANCE	01/01/18	1197.32
360911500	1:1 AIDE	01/01/18	551.25
360911600	EARLY INTERVENTION PROGRAM LTC	01/01/18	853.65
361111000	DAY HOSPITAL ATTENDANCE >5YRS	01/01/18	1197.32
361111100	DAY HOSPITAL ATTENDANCE PRESCH	01/01/18	1197.32
361200510	OPD VISIT-REGISTRATION	01/01/18	77.18
36153641572	VENPUNCTURE	01/01/18	15.05
361580048	BASIC METABOLIC PANEL	01/01/18	28.14
3615800487	BASIC MET PANEL	01/01/18	22.40
361580051	ELECTROLYTES	01/01/18	28.14
36158005133	ELECTROLYTES	01/01/18	22.42
361580053	COMP METABOLIC PANEL	01/01/18	41.37
36158005320	COMP MET PANEL	01/01/18	33.48
361580061	LIPID PROFILE	01/01/18	57.91
361580074	HEPATITIS PROFILE	01/01/18	212.26
361580076	LIVER FUNCTION TEST	01/01/18	30.87
36158007643	LIVER FUNCTION ADULT	01/01/18	24.62
361580092	THYROID PROFILE	01/01/18	104.74
361580101	DRUG SCREEN	01/01/18	63.63
361580150	AMIKACIN PEAK	01/01/18	90.98
361580150A	AMIKACIN TROUGH	01/01/18	90.98
361580154	CLOZAPINE	01/01/18	158.76
361580155	CAFFEINE LEVEL	01/01/18	60.27
361580156	CARBAMAZAPINE (TEGRETOL)	01/01/18	55.13
36158015614	CARBAMAZEPINE TEGRET	01/01/18	45.19
361580158	CYCLOSPORINE A TROUGH	01/01/18	408.50
361580162	DIGOXIN	01/01/18	63.95
361580164	VALPROIC ACID	01/01/18	35.86
36158016470	VALPROIC AC DEPAKOTE	01/01/18	29.28
361580170	GENTAMICIN PEAK	01/01/18	119.07
361580170A	GENTAMICIN RANDOM	01/01/18	83.27
361580170B	GENTAMICIN TROUGH	01/01/18	153.25
361580175	LAMOTRIGINE	01/01/18	52.50
361580177	LEVETIRACETAM	01/01/18	52.50
361580178	LITHIUM	01/01/18	35.86
361580182	NORTRIPTYLINE	01/01/18	86.84
361580184	PHENOBARBITAL	01/01/18	48.51

Procedure ID	Description	Effective Date	Charge
36158018447	PHENOBARBITAL	01/01/18	40.13
361580185	PHENYTOIN (DILANTIN)	01/01/18	67.83
36158018548	PHENYTOIN DILANTIN	01/01/18	55.69
361580186	PHENYTOIN,FREE P/S	01/01/18	51.29
36158018636	FREE PHENYTOIN	01/01/18	40.13
361580196	SALICYLATE	01/01/18	38.33
361580197	TACROLIMUS	01/01/18	207.27
361580198	THEOPHYLLINE	01/01/18	72.77
36158019863	THEOPHYLLINE	01/01/18	59.45
361580200	TOBRAMYCIN PEAK	01/01/18	90.98
361580200A	TOBRAMYCIN RANDOM	01/01/18	90.98
361580200B	TOBRAMYCIN TROUGH	01/01/18	90.98
361580201	TOPIRAMATE	01/01/18	574.40
36158020164	TOPIRAMATE	01/01/18	476.09
361580202	VANCOMYCIN PEAK	01/01/18	69.46
361580202A	VANCOMYCIN TROUGH	01/01/18	69.46
361580299	DIGOXIN	01/01/18	67.83
36158029931	DIGOXIN	01/01/18	55.79
36158029974	ZONISAMIDE	01/01/18	232.80
361580299A	OXYCARBAZEPINE	01/01/18	228.80
361580299C	LAMOTRIGINE, S	01/01/18	87.10
361580299D	FELBAMATE(FELBATOL)	09/01/18	191.60
361581000	URINALYSIS	01/01/18	11.03
361581001	URINE MICROSCOPIC	01/01/18	11.60
36158100168	URINALYSIS W/MICRO-BILL	01/01/18	9.46
361581002	URINE REDUCING SUBSTAN	01/01/18	18.22
36158100254	REDUCING SUBSTANCE (UR)	01/01/18	35.09
361581002A	URINE SPECIFIC GRAVITY	01/01/18	33.65
36158100369	URINE MACRO-BILL ONLY	01/01/18	9.46
361581240	PROTHROMBIN GENE ANALYSIS	01/01/18	55.13
361581241	FAC V LEIDEN SCR (A PR C R)	01/01/18	55.13
361582003	ACETAMINOPHEN	01/01/18	97.60
361582024	Andrenocorticotropic Hormone	01/01/18	146.32
361582040	ALBUMIN	01/01/18	25.94
3615820402	ALDOLASE	01/01/18	37.87
361582040A	ALDOLASE, SERUM	01/01/18	46.31
361582043	MICROALBUMIN URINE	01/01/18	35.54
361582088	ALDOSTERONE, SERUM	01/01/18	136.76
361582128	AMINO ACIDS, PLASMA	01/01/18	231.00
361582139	AMINO ACIDS, URINE	01/01/18	2393.53
361582140	AMMONIA	01/01/18	74.45

Procedure ID	Description	Effective Date	Charge
361582150	AMYLASE	01/01/18	30.87
3615821503	AMYLASE	01/01/18	24.97
361582157	ANDROSTENEDIONE, S	01/01/18	52.50
361582164	ANGIOTENSIN CONV ENZYME	01/01/18	52.50
361582172	LIPOPROTEIN (A)	01/01/18	149.52
361582247	TOTAL BILIRUBIN	01/01/18	47.41
361582248	DIRECT BILIRUBIN	01/01/18	25.94
361582270	FECAL OCCULT BLOOD	01/01/18	66.73
361582273	GASTRIC OCCULT BLOOD	01/01/18	16.01
361582306	VITAMIN D 25-HYDROXY	01/01/18	191.84
361582310	CALCIUM	01/01/18	18.22
36158231013	CALCIUM	01/01/18	14.40
361582310A	CALCIUM (UR) RANDOM	01/01/18	18.22
361582330	CALCIUM, IONIZED	01/01/18	35.86
361582374	CARBON DIOXIDE	01/01/18	17.64
361582379	CARNITINE, P/S	01/01/18	144.43
361582384	CATECHOLAMINES; FRACTIONATED	01/01/18	210.00
361582384A	CATECHOLAMINES,FRAC,PLASMA	01/01/18	210.00
361582390	CERULOPLASMIN, S	01/01/18	92.35
361582435	CHOLRIDE	01/01/18	22.63
361582436	CHLORIDE RANDOM UR)	01/01/18	27.56
361582465	CHOLESTEROL	01/01/18	20.95
36158246519	CHOLESTEROL	01/01/18	16.75
361582491	LEVETIRACETAM,SERUM	01/01/18	56.23
36158249141	LEVETIRACETAM SERUM	01/01/18	46.47
361582525	COPPER, SERUM	01/01/18	98.44
361582533	CORTISOL AM	01/01/18	69.46
36158253321	CORTISOL AM	01/01/18	57.09
361582550	CK TOTAL	01/01/18	25.94
36158255022	CPK TOTAL	01/01/18	20.31
361582565	CREATININE	01/01/18	19.32
36158256523	CREATININE	01/01/18	15.45
361582570	CREATININE (UR) RANDOM	01/01/18	19.32
36158257024	CREATININE (UR)	01/01/18	15.45
361582570A	CREATININE 24HR URINE	01/01/18	19.32
361582607	VITAMIN B12	01/01/18	75.55
36158260773	VITAMIN B12	01/01/18	61.77
361582627	DHEAS	01/01/18	98.12
361582652	VITAMIN D,1,25-DIHYDROXY	01/01/18	122.96
361582670	ESTRADIOL	01/01/18	105.00
361582671	ESTROGENS,FRACT,SERUM	01/01/18	1083.23

Procedure ID	Description	Effective Date	Charge
361582728	FERRITIN	01/01/18	69.46
361582746	FOLATE	01/01/18	75.55
36158274635	FOLATE	01/01/18	61.77
361582784	IMMUNOGLOBULIN IGA	01/01/18	41.37
361582784A	IMMUNOGLOBULIN IGG	01/01/18	41.37
361582784B	IMMUNOGLOBULIN IGM	01/01/18	45.20
361582784C	CELIAC PANEL	01/01/18	663.71
361582785	IMMUNOGLOBULINS	01/01/18	127.37
361582785A	IGE	01/01/18	127.37
361582945	GLUCOSE (CSF)	01/01/18	20.95
361582947	GLUCOSE	01/01/18	20.95
361582977	GAMMA GLUTAMYL TRANSFERASE	01/01/18	28.14
361582985	B2 GLYCOPROTEIN	01/01/18	278.93
361583001	FOLLICLE STIMULATING HORMONE	01/01/18	87.10
361583002	LEUTINIZING HORMONE	01/01/18	94.82
361583003	GROWTH HORMONE	01/01/18	52.40
361583010	HAPTOGLOBIN	01/01/18	28.44
361583020	HEMOGLOBIN ELECTROPHORESIS	01/01/18	331.85
361583036	GLYCOHEMOGLOBIN	01/01/18	128.99
361583090	HOMOCYSTEINE	02/01/18	70.70
361583150	HOMOVANILLIC,ACID(HVA),U	01/01/18	107.63
361583497	5-HIAA,24HR URINE	01/01/18	106.32
361583498	17-HYDROXYPROGESTERONE	01/01/18	192.15
361583516	TISSUE TRANSGLUTAMINASE IGA AB	01/01/18	52.50
361583519	THYROID PANEL 2	01/01/18	161.54
361583520	C1 ESTERASE INHIBITOR AG, S	01/01/18	116.87
361583520A	GANGLIOSIDE AB (IGG,M) PANEL	01/01/18	500.72
361583525	INSULIN	04/17/18	47.95
361583540	IRON	01/01/18	76.65
361583550	TOTAL IRON BINDING CAPACITY	01/01/18	78.28
361583605	LACTIC ACID VENOUS	01/01/18	41.37
361583615	LACTATE DEHYDROGENASE	01/01/18	21.53
361583655	LEAD,BLOOD	01/01/18	45.78
361583690	LIPASE	01/01/18	30.87
36158369042	LIPASE	01/01/18	24.42
361583718	HDL CHOLESTEROL	01/01/18	42.47
361583721	LDL CHOLESTEROL DIRECT	01/01/18	46.31
361583735	MAGNESIUM	01/01/18	29.77
36158373544	MAGNESIUM	01/01/18	23.46
361583835	METANEPHRINES, FRACT.24H U	01/01/18	105.53
361583880	NATRIURETIC PEPTIDE	01/01/18	128.99

Procedure ID	Description	Effective Date	Charge
361583919	ORGANIC ACIDS,QL,URINE	01/01/18	619.08
361583930	OSMOLALITY(SERUM)	01/01/18	31.97
361583935	URINE OMSOLALITY	01/01/18	30.35
361583970	INTACT PTH	01/01/18	223.28
361584075	ALKALINE PHOSPHATASE	01/01/18	25.36
361584100	PHOSPHOROUS	01/01/18	19.32
36158410049	PHOSPHORUS INORGANIC	01/01/18	15.62
361584120	PORPHYRINS, QN U	01/01/18	141.73
361584132	POTASSIUM	01/01/18	20.95
36158413251	POTASSIUM	01/01/18	16.10
361584133	POTASSIUM URINE	01/01/18	27.56
361584134	PREALBUMIN	01/01/18	27.20
361584146	PROLACTIN	01/01/18	98.70
361584155	TOTAL PROTEIN	01/01/18	17.64
361584156	PROTEIN, TOTAL (UR)	01/01/18	19.32
36158415652	PROTEIN TOTAL 24H (UR)	01/01/18	16.17
361584156A	PROTEIN TOTAL 24HR URINE	01/01/18	16.54
361584156B	PROTEIN,TOT 24HR UR W/CREAT	01/01/18	123.90
361584157	PROTEIN TOTAL (CSF)	01/01/18	19.32
361584165	PROTEIN ELECTR SERUM,WITH INTF	01/01/18	61.74
361584238	ACETYLCHOLINE REC BINDING	01/01/18	142.88
361584244	RENIN ACTIVITY, PLASMA	01/01/18	124.06
361584252	RIBOFLAVIN(VIT B2), P/S	01/01/18	52.50
361584255	SELENIUM	01/01/18	72.87
361584270	SEX HORMONE BINDING GLOBULIN	01/01/18	52.50
361584295	SODIUM	01/01/18	45.20
361584300	SODIUM URINE	01/01/18	21.53
361584305	IGF-1 INSULIN LIKE GROWTH FACT	01/01/18	52.50
361584402	FREE TESTOSTERONE	01/01/18	52.50
361584403	TESTOSTERONE	01/01/18	131.78
361584425	VITAMIN B1	01/01/18	52.50
361584425A	VITAMIN B6	01/01/18	52.50
361584436	T4 THYROXINE	01/01/18	30.87
36158443662	T4 THYROXINE	01/01/18	26.49
361584439	FREE THYROXINE FT4	01/01/18	31.97
361584443	THYROID STIMULATING HORMONE	01/01/18	79.38
36158444367	TSH	01/01/18	64.68
361584446	VITAMIN E, S	01/01/18	115.24
361584450	AST	01/01/18	25.36
361584460	ALANINI TRANSFERASE	01/01/18	23.73
361584465	ANTI THYROID AB GROUP	01/01/18	134.51

Procedure ID	Description	Effective Date	Charge
361584478	TRIGLYCERIDE	01/01/18	29.77
36158447866	TRIGLYCERIDES	01/01/18	24.97
361584479	T3 UPTAKE	01/01/18	262.50
361584480	FREE T3	01/01/18	127.89
36158448061	T3	01/01/18	105.76
361584484	TROPONIN	01/01/18	31.45
361584520	BLOOD UREA NITROGEN	01/01/18	20.95
361584550	URIC ACID	01/01/18	23.15
361584585	VMA, 24HR URINE	01/01/18	91.01
361584590	VITAMIN A,S	01/01/18	115.24
361584630	ZINC	01/01/18	92.96
361584702	TOTAL HCG, QUANTITATIVE	01/01/18	76.65
361584703	HCG QUALITATIVE	01/01/18	75.55
36158470365	TOTAL HCG, QUAL	01/01/18	31.55
361584703A	URINE PREGNANCY TEST	01/01/18	33.65
361585007	MANUAL DIFFERENTIAL	01/01/18	18.22
36158500745	MANUAL DIFF	01/01/18	14.47
361585014	HEMATOCRIT	01/01/18	50.19
361585018	HEMOGLOBIN	01/01/18	10.50
361585025	HEMOGLOBIN AND HEMATOCRIT	01/01/18	23.15
36158502517	CBC & AUTO DIFF BILL ONLY	01/01/18	24.72
361585027	CBC	01/01/18	30.87
36158502718	CBC HEMOGRAM	01/01/18	24.42
361585027A	COMPLETE BLOOD COUNT	01/01/18	30.87
361585045	RETICULOCYTE COUNT	01/01/18	56.23
361585049	PLATELET COUNT	01/01/18	14.33
361585240	FACTOR VIII, ACTIVITY (8)	01/01/18	55.13
361585260	FACTOR X ASSAY,P	01/01/18	317.00
361585280	FACTOR XII, ACTIVITY	01/01/18	55.13
361585300	ANTITHROMBIN ACTIVITY	01/01/18	52.50
361585303	PROTEIN C ACTIVITY	01/01/18	52.50
361585306	PROTEIN S,FREE ANTIGEN	01/01/18	52.50
361585379	D DIMER QUANTITATIVE	01/01/18	272.32
36158537930	D DIMER QUANTITATIVE	01/01/18	225.53
361585384	FIBRINOGEN	01/01/18	43.58
36158538434	FIBRINOGEN	01/01/18	35.69
361585520	HEPARIN ANTI-XA ASSAY,PL	01/01/18	574.98
36158552039	HEPARIN ANTI-XA	01/01/18	501.45
361585610	PT WITH INR	01/01/18	20.95
36158561053	PT WITH INR	01/01/18	16.55
361585652	SEDIMENTATION RATE	01/01/18	14.33

Procedure ID	Description	Effective Date	Charge
36158565258	SED RATE	01/01/18	11.33
361585670	THROMBIN TIME	01/01/18	33.18
361585730	ACT. PART. THROMBOPLASTIN TIME	01/01/18	28.14
3615857304	APTT	01/01/18	23.11
361586003	WHEAT IGE F4	01/01/18	65.05
361586003A	MILK IGE F2	01/01/18	65.05
361586003B	SOYBEAN IGE F14	01/01/18	65.05
361586003C	EGG WHITE IGE F1	01/01/18	65.05
361586003D	PEANUT IGE F13	01/01/18	65.05
361586022	PLATELET AB HEPARIN INDUCED	01/01/18	422.84
36158602250	PLATELET AB -HEPARIN INDUCED	01/01/18	368.85
361586038	ANA SCREEN	01/01/18	56.23
361586100	C1Q, SERUM	01/01/18	114.66
361586140	C REACTIVE PROTEIN	01/01/18	27.04
3615861409	C REACTIVE PROTEIN SCREEN	01/01/18	21.77
361586147	ANTICARDIOLIPIN IgM	01/01/18	205.64
36158614715	CARDIOLIPIN AB IGG	01/01/18	170.40
36158614716	CARDIOLIPIN AB IGM	01/01/18	170.40
361586147A	ANTICARDIOLIPIN AB	01/01/18	205.64
361586160	C3	01/01/18	61.74
36158616011	C3	01/01/18	50.47
36158616012	C4	01/01/18	50.47
361586160A	C4	01/01/18	61.74
361586161	FUNCTIONAL C1 ESTERASE	01/01/18	116.87
361586162	COMPLEMENT,TOTAL (CH50)	01/01/18	107.52
361586225	DOUBLE STRANDED DNA	01/01/18	70.56
36158622532	DNA AB DOUBLE STRAND	01/01/18	57.74
361586235	SS-A & SS-B(SJORGEN'S)	01/01/18	121.85
361586255	ANTI SMOOTH MUSCLE AB	01/01/18	94.82
361586256	ENDOMYSIAL	01/01/18	52.50
361586359	LYMPHOCYTE SUBSET PANEL 3	01/01/18	193.52
361586376	ANTI THYROID PEROXIDASE AB	01/01/18	64.52
361586378	M.PNEUMONIAE (IGG,M),EIA	01/01/18	98.18
361586382	POLIOVIRUS(TYPES1-3)AB,CF,S	01/01/18	345.92
361586431	RHEIMATOID FACTOR QUANT	01/01/18	27.56
361586480	QUANTIFERON-TB GOLD	01/01/18	170.63
361586602	Brucellosis IgG and IgM	01/01/18	138.92
361586603	ADENOVIRUS AB IGG AND IGM	01/01/18	55.13
361586609	Babesia IgG and IgM	01/01/18	138.92
361586617	LYME WESTERN BLOT IGM	01/01/18	82.69
361586617A	LYME WESTERN BLOT IGG	01/01/18	133.98

Procedure ID	Description	Effective Date	Charge
361586618	LYME SCREEN	01/01/18	133.98
361586644	CMV IgG	01/01/18	61.74
361586645	CMV IgM	01/01/18	138.92
361586658	COXSACKIE B1-B6 AB	01/01/18	108.62
361586663	EBV IgG and IgM	01/01/18	138.92
361586666	HUM GRAN EHRLICHIA AB (IGG/M)	01/01/18	121.85
361586677	H.PYLORI IgG	01/01/18	383.15
361586694	HSV-1/2 IGM AB	01/01/18	74.45
361586695	HSV-1 IGG AB	01/01/18	67.83
361586696	HSV-2 IGG AB	01/01/18	98.70
361586701	VIRAL ISOLATION	01/01/18	138.39
361586701A	MISC CHEM LAB	01/01/18	191.84
361586704	HEP B CORE AB TOTAL	01/01/18	56.23
361586705	HEP B CORE AB IgM	01/01/18	56.23
361586706	HEPATITIS B SURFACE AB QUANT	01/01/18	55.13
361586706A	HEP SURF AB POST	01/01/18	51.82
361586708	HEP A AB TOTAL	01/01/18	52.40
361586709	HEP A AB IgM	01/01/18	52.40
361586720	Leptospirosis	01/01/18	138.92
361586735	MUMPS AB IGG	01/01/18	28.14
36158673546	MUMPS AB IGG	01/01/18	22.40
361586747	PARVOVIRUS B19 IGM AB	01/01/18	153.25
361586757	Rocky mountain spotted fever I	01/01/18	138.92
361586762	RUBELLA IGG	01/01/18	67.83
36158676256	RUBELLA IGG	01/01/18	55.43
361586765	RUBEOLA MEAS IgG AB	01/01/18	60.11
36158676557	RUBEOLA MEASLES IGG	01/01/18	49.62
361586777	Toxoplasma IgG	01/01/18	66.52
361586778	TOXOPLASMA IgM AB	01/01/18	59.06
361586780	SYPHILIS TEST W/RFLX RPR & FTA	01/01/18	69.46
361586787	VARICELLA IgG AB	01/01/18	114.14
36158678771	VARICELLA ZOSTER IGG	01/01/18	22.40
361586800	ANTI THYROGLOBULIN	01/01/18	70.56
361586803	HEP C AB	01/01/18	63.95
361586978	REFLEX DIFFERENTIAL	01/01/18	17.12
361587010	CULT (NASAL)	01/01/18	43.58
361587040	CULT (BLOOD)	01/01/18	45.20
36158704025	CULT (BLOOD)	01/01/18	36.75
361587045	CULT (STOOL)	01/01/18	45.20
36158704527	CULT (STOOL)	01/01/18	36.34
361587046	EXTRA STOOL PLATE CAMPY	01/01/18	69.46

Procedure ID	Description	Effective Date	Charge
3615870461	ADDITIONAL STOOL PLATE 1	01/01/18	60.15
361587070	CULT (CSF)	01/01/18	43.58
36158707026	CULT (SPUTUM)	01/01/18	30.16
36158707029	CULT (WOUND)	01/01/18	36.19
361587070A	CULT (SPUTUM)	01/01/18	37.49
361587070B	CULT (THROAT)	01/01/18	41.37
361587070C	CULT (WOUND)	01/01/18	45.20
361587070D	CATHETER TIP CULTURE	01/01/18	41.90
361587070E	EYE CULT AND GRAM STAIN	01/01/18	62.32
361587070F	CULT (FLUID)	01/01/18	63.95
361587077	BACT IDENTIFICATION #1	01/01/18	38.59
3615870775	BACT ID1 (BILL)	01/01/18	31.13
3615870776	BACT ID2 (BILL)	01/01/18	31.13
361587077A	BACT IDENTIFICATION #2	01/01/18	38.59
361587077B	BACT IDENTIFICATION #3	01/01/18	38.59
361587081	GC CULTURE	01/01/18	33.65
361587086	CULT (UR)	01/01/18	35.86
36158708628	CULT (UR)	01/01/18	29.28
361587101	CULT FUNGUS (SKIN)	01/01/18	39.69
361587102	CULT FUNGUS (NOT SKIN)	01/01/18	41.37
361587106	YEAST IDENTIFICATION #1	01/01/18	95.92
361587106A	YEAST IDENTIFICATION #2	01/01/18	45.78
361587106B	YEAST IDENTIFICATION #3	01/01/18	45.78
361587116	AFB CULTURE	01/01/18	147.00
361587168	ARTHROPOD/INSECT IDENT	01/01/18	36.96
361587172	PIN WORM EXAM	01/01/18	20.95
361587177	OVA AND PARASITE DIRECT EXAM	01/01/18	46.31
361587185	BETA LACTAMASE	01/01/18	24.26
3615871858	BETA LACTAMASE TEST	01/01/18	19.98
36158718659	SENSITIVITY MIC (WP)	01/01/18	22.06
36158718660	SENSITIVITY VITEK (WP)	01/01/18	22.06
361587205	STOOL FOR WBCS	01/01/18	39.69
361587205A	GRAM STAIN AEROBIC BLOOD	01/01/18	20.95
361587205B	GRAM STAIN ANAREOBIC BLOOD	01/01/18	20.95
361587206	GRAM STAIN	01/01/18	28.14
36158720637	GRAM STAIN	01/01/18	22.55
361587206A	AFB DIRECT SMEAR	01/01/18	210.00
361587207	Malaria	01/01/18	138.92
361587255	CULT HERPES	01/01/18	244.23
361587324	CLOSTRIDIUM DIFFICILE TOXIN AB	01/01/18	39.17
36158732410	C. DIFF TOXIN	01/01/18	33.69

Procedure ID	Description	Effective Date	Charge
361587328	GIARDIA ANTIGEN	01/01/18	45.20
361587328A	OVA AND PARASITE SCREEN	01/01/18	85.47
361587338	H.PYLORI AG	01/01/18	69.46
361587340	HEP B SURFACE AG	01/01/18	51.82
36158734038	HEP B SURF AB PV	01/01/18	45.14
361587400	INFLUENZA A&B ANTIGEN(IMMUNO)	01/01/18	77.75
361587420	RSV AG DIRECT	01/01/18	45.20
36158742055	RSV AG DIRECT	01/01/18	36.73
361587425	ROTAVIRUS AG DIRECT	01/01/18	41.37
361587491	AMPLIFIED CHLAMYDIA/GC ASSAY	01/01/18	328.02
361587496	CMV DNA,QN,REAL-TIME PCR	01/01/18	484.00
361587502	Influenza A and B Virus W/PCR	01/01/18	379.97
361587517	HBV DNA,QN,PCR	01/01/18	105.00
361587522	HCV RNA bDNA	01/01/18	218.30
361587529	HERPES PCR	01/01/18	171.47
36158753640	HIV-1 RNA, QN B DNA	01/01/18	357.47
361587641	MRSA RT PCR ASSAY	01/01/18	186.90
361587797	BORDETELLA PERTUSSIS PCR	01/01/18	103.11
361587899	INFLUENZA B AG (IMMUNO)	01/01/18	82.16
361587899A	INFLUENZA A AG(IMMUNO)	01/01/18	39.17
361589051	CSF DIFFERENTIAL	01/01/18	23.15
361589051A	FLUID CELL COUNT WITH DIFF	01/01/18	31.45
361590707	MEASLES,MUMPS,RUBELLA PANEL	01/01/18	146.11
362020000	HUMERUS RIGHT	01/01/18	224.91
362020001	HUMERUS LEFT	01/01/18	224.91
362020002	ELBOW RIGHT	01/01/18	172.57
362020003	ELBOW LEFT	01/01/18	172.57
362020004	FOREARM RIGHT	01/01/18	224.91
362020005	FOREARM LEFT	01/01/18	224.91
362020006	WRIST RIGHT (LIMITED)	01/01/18	172.57
362020007	WRIST RIGHT (COMPLETE)	01/01/18	224.91
362020008	WRIST LEFT (LIMITED)	01/01/18	172.57
362020009	WRIST LEFT (COMPLETE)	01/01/18	224.91
362020010	HAND RIGHT (LIMITED)	01/01/18	172.57
362020011	HAND RIGHT (COMPLETE)	01/01/18	224.91
362020012	HAND LEFT (LIMITED)	01/01/18	172.57
362020013	HAND LEFT (COMPLETE)	01/01/18	224.91
362020015	HAND & WRIST RIGHT COMPLETE	01/01/18	192.94
362020016	HAND & WRIST LEFT LTD	01/01/18	172.57
362020017	HAND & WRIST LEFT COMP	01/01/18	224.91
362020018	FINGER	01/01/18	172.57

Procedure ID	Description	Effective Date	Charge
362020019	CERVICAL SPINE (A.P.)	01/01/18	172.57
362020020	CERVICAL SPINE (LATERAL)	01/01/18	172.57
362020021	CERVICAL SPINE(A.P.& LAT)	01/01/18	224.91
362020022	CERVICAL SPINE (OBLIQUES)	01/01/18	224.91
362020023	LATERAL IN FLEX OR EXT.	01/01/18	224.91
362020025	THORACIC SPINE(A.P.)	01/01/18	172.57
362020026	THORACIC SPINE (LATERAL)	01/01/18	172.57
362020027	THORACIC SPINE(AP & LAT)	01/01/18	197.35
362020029	THORACIC&LUMBAR SPINE(AP)	01/01/18	274.52
362020030	THOR & LUM SPINE(AP&LAT)	01/01/18	345.08
362020031	SCOLIOSIS STUDY	01/01/18	366.61
362020032	T/L SPN AP W/JACKT ON/OFF	01/01/18	345.08
362020033	T/L STAND SHOES ON/OFF	01/01/18	345.08
362020034	LUMBAR SPN ANY SNGLE VIEW	01/01/18	172.57
362020035	LUMBAR SPINE(AP & LAT)	01/01/18	256.88
362020036	LUMBAR SPINE(OBLIQUES)	01/01/18	256.88
362020038	ENTIRE SPINE INCL HIPS(AP	01/01/18	262.97
362020039	PELVIS (A.P.)	01/01/18	189.11
362020040	HIP RIGHT (AP & LATERAL)	01/01/18	224.91
362020041	HIP LEFT (AP & LATERAL)	01/01/18	224.91
362020042	HIP R/L COMP AP & PELVIS	01/01/18	224.91
362020043	HIP BILAT(AP & ABDUCTED)	01/01/18	216.09
362020045	SACRUM AND COCCYX	01/01/18	241.45
362020046	FEMUR RIGHT(AP & LATERAL)	01/01/18	224.91
362020047	FEMUR LEFT (AP & LATERAL)	01/01/18	224.91
362020048	KNEES RIGHT/LEFT AP ONLY	01/01/18	181.39
362020051	KNEE LEFT (AP & LATERAL)	01/01/18	189.11
362020055	TIBIA/FIBULA RT(AP & LAT)	01/01/18	224.91
362020056	TIBIA/FIBULA LT (AP&LAT)	01/01/18	224.91
362020057	ANKLE RIGHT (LIMITED)	01/01/18	157.66
362020058	ANKLE RIGHT (COMPLETE)	01/01/18	224.91
362020059	ANKLE LEFT (LIMITED)	01/01/18	165.95
362020060	ANKLE LEFT (COMPLETE)	01/01/18	224.91
362020061	FOOT RIGHT (LIMITED)	01/01/18	172.57
362020062	FOOT RIGHT (COMPLETE)	01/01/18	224.91
362020063	FOOT RIGHT (ANY ONE VIEW)	01/01/18	153.25
362020064	FOOT LEFT (LIMITED)	01/01/18	172.57
362020065	FOOT LEFT (COMPLETE)	01/01/18	224.91
362020066	FOOT LEFT (ANY ONE VIEW)	01/01/18	153.25
362020067	FOOT RT&LT(LATERALS ONLY)	01/01/18	172.57
362020072	OS CALCIS (HEEL) RIGHT	01/01/18	172.57

Procedure ID	Description	Effective Date	Charge
362020073	OS CALCIS (HEEL) LEFT	01/01/18	172.57
362020074	TOE	01/01/18	172.57
362020075	SKULL (AP)	01/01/18	172.57
362020076	SKULL (AP & LATERAL)	01/01/18	224.91
362020077	SKULL (COMPLETE)	01/01/18	256.88
362020078	FACIAL BONES (LIMITED)	01/01/18	224.91
362020079	FACIAL BONES (COMPLETE)	01/01/18	256.88
362020080	ORBITS	01/01/18	224.91
362020081	NASAL BONES	01/01/18	224.91
362020082	PARA NASAL SINUSES	01/01/18	256.88
362020083	MASTOIDS COMP.& BILATERAL	01/01/18	256.88
362020084	MANDIBLE	01/01/18	256.88
362020085	NECK FOR SOFT TISSUE	01/01/18	172.57
362020086	CHEST (SINGLE VIEW)	01/01/18	172.57
362020087	CHEST (TWO VIEWS)	01/01/18	205.64
362020088	CHEST (THREE VIEWS)	01/01/18	237.62
362020089	CHEST(COMP. MIN. 4 VIEWS)	01/01/18	260.77
362020090	RIBS ( UNILATERAL)	01/01/18	224.91
362020091	RIBS (BILATERAL)	01/01/18	256.88
362020092	STERNUM	01/01/18	224.91
362020093	STERNOCLAVICULAR JOINTS	01/01/18	224.91
362020094	CLAVICLE RIGHT	01/01/18	189.11
362020095	CLAVICLE LEFT	01/01/18	189.11
362020096	SCAPULA RIGHT	01/01/18	224.91
362020097	SCAPULA LEFT	01/01/18	224.91
362020098	SHOULDER RIGHT (LIMITED)	01/01/18	189.11
362020099	SHOULDER LEFT (LIMITED)	01/01/18	189.11
362020100	LOWER EXT AP R&L 14X17	01/01/18	172.57
362020101	LOW EXT AP R&L SCOLI CASS	01/01/18	224.91
362020102	L EXT AP&LAT R or L 14x17	01/01/18	224.91
362020103	L.EXT AP&LAT R/L SCOLI CA	01/01/18	274.52
362020104	ABDOMEN (SINGLE VIEW)	01/01/18	172.57
362020105	ABDOMEN (COMPLETE)	01/01/18	224.91
362020106	BARIUM SWALLOW	01/01/18	274.52
362020107	IVP INTRAVENOUS PYELOGRAM	01/01/18	445.99
362020108	CYSTOGRAM	01/01/18	274.52
362020109	BONE AGE STUDY	01/01/18	153.25
362020110	SCANOGRAM BONE LENGTH STU	01/01/18	371.54
362020111	BONE SURVEY	01/01/18	414.02
362020112	SHUNT SERIES	01/01/18	325.82
362020116	ULTRASOUND RENAL BLADDER	01/01/18	975.19

Procedure ID	Description	Effective Date	Charge
362020117	ULTRASOUND (FONTANEL)	01/01/18	488.99
362020118	ULTRASOUND ABDOMINAL LTD	01/01/18	651.05
362020119	RIGHT SHOULDER (COMPLETE)	01/01/18	224.91
362020120	LEFT SHOULDER (COMPLETE)	01/01/18	224.91
362020121	RIGHT KNEE (COMPLETE)	01/01/18	256.88
362020122	LEFT KNEE (COMPLETE)	01/01/18	256.88
362020123	RT TIBIA/FIBULA COMPLETE	01/01/18	256.88
362020124	LT TIBIA/FIBULA COMPLETE	01/01/18	256.88
362020125	MANDIBLE,COMP MIN 4 VIEWS	01/01/18	293.84
362020126	SKELETAL SURVEY	01/01/18	447.09
362020128	TIBIA & FIBULA 2 VIEWS	01/01/18	256.88
362020129	TIBIA & FIBULA 2 VIEWS	01/01/18	256.88
362020131	OSSEOUS SURVEY INFANT	01/01/18	472.45
362020133	OSSEOUS SURVEY LIMITED	01/01/18	447.09
362020134	STRESS VWS ANY JOINT RT	01/01/18	224.91
362020135	STRESS VWS ANY JOINTS LT	01/01/18	224.91
362020136	LWR EXTR INF MIN 2 VWS RT	01/01/18	224.91
362020137	LWR EXT INF MIN 2 VWS LT	01/01/18	224.91
362020138	KNEE MINIMUM 4 VWS RT	01/01/18	274.52
362020139	KNEE MINIMUM 4 VWS LT	01/01/18	274.52
362020140	KNEE MINIMUM 3 VWS RT	01/01/18	224.91
362020141	KNEE MINIMUM 3 VWS LT	01/01/18	224.91
362020142	HIP UNILATERAL 1 VIEW	01/01/18	203.44
362020143	UPPER EXT INF 2 VWS RT	01/01/18	224.91
362020144	UPPER EXTREM INF 2 VWS LT	01/01/18	224.91
362020145	ELBOW MIN 3 VIEWS RT	01/01/18	224.91
362020146	ELBOW MIN 3 VIEWS LT	01/01/18	224.91
362020147	ACROMIOCLAVICULAR JT BILT	01/01/18	224.91
362020148	PELVIS COMPLETE 3 VIEWS	01/01/18	285.02
362020149	SP LUMBOSAC BEND > 4VWS	01/01/18	514.87
362020150	SPINE THORACIC MIN 4 VWS	01/01/18	407.40
362020151	SPINE THORACIC 3 VIEWS	01/01/18	301.56
362020152	SPINE CERVICAL 4 VIEWS	01/01/18	447.09
362020153	RIBS UNI AP CHST 3 VWS RT	01/01/18	455.91
362020154	RIBS UNI CHST 3 VWS LT	01/01/18	455.91
362020155	TMJ OPN/CLD MOUTH BILAT	01/01/18	366.61
362020156	TMJ OPEN/CLOSED MOUTH LT	01/01/18	256.88
362020157	TMJ OPEN/CLOSED MOUTH RT	01/01/18	256.88
362020158	SELLA TURCICA	01/01/18	203.44
362020159	PARANASAL SINUS LTD <3 VW	01/01/18	203.44
362020513	COPY	01/01/18	25.94

Procedure ID	Description	Effective Date	Charge
362020514	COPIES	01/01/18	9.40
362020516	ULTRASOUND RENAL BLADDER	01/01/18	651.05
362020527	X-Ray Reading, Only-Fee	01/01/18	203.44
362020530	RIBS RT (UNILATERAL)	01/01/18	139.49
362020541	KNEE MIN 3 VWS LT(PROF)	01/01/18	188.00
362020542	HIP UNILATERAL 1 VIEW(PROF)	01/01/18	140.60
362020544	UPPER EXTREM 2 VWS LT(PROF)	01/01/18	139.49
362020560	G.I. TUBE CHECK	01/01/18	397.48
362020561	ULTRASOUND ABDOMINAL COMPLETE	01/01/18	975.19
362020562	ULTRASOUND PELVIS	01/01/18	651.05
362020563	KNEE AP & LAT- RIGHT	01/01/18	274.52
363000001	PT EVAL EACH ADD'L HOUR	01/01/18	318.10
363000002	PT RE-EVAL EACH ADD'L HOUR	01/01/18	318.10
363000003	THERAPY AIDE TREATMENT 15 MIN	01/01/18	69.46
363016001	PHYSICAL THERAPY EVAL	01/01/18	937.70
363016002	PT EQUIPMENT/SPLINT	01/01/18	127.89
363016003	PT GROUP AIDE SESS 15 MIN	01/01/18	127.89
363016004	PT SPLINT 15 MIN	01/01/18	78.86
363016005	THERAPEUTIC PROC GRP2+IND	01/01/18	86.00
363016006	PT CONSULTATIVE 15 MIN	01/01/18	55.13
363016007	PT HOME VISIT 15 MIN	01/01/18	86.00
363016010	WHEELCHAIR EVAL 15 MINS	01/01/18	78.86
363016011	THERP EXERCISE 15 MINS	01/01/18	86.00
363016012	PT THRPY AIDE SESS 15MIN	01/01/18	127.89
363016013	PT PRELIMINARY EVAL	01/01/18	156.56
363016014	THERAPY COOR.CONF. 15MIN	01/01/18	127.89
363016015	PT EIP SUPPLEMENTAL EVAL	01/01/18	262.97
363016016	PT EIP TREATMENT	01/01/18	64.52
363016019	PT EIP OFF-SITE TREATMENT	01/01/18	113.03
363016020	PT EIP OFF-SITE EXT.TREAT	01/01/18	157.13
363016022	PT EIP SPLINTING/EQUIPMEN	01/01/18	64.52
363016024	PT EIP CORE EVALUATION	01/01/18	310.91
363016025	PT EIP ASSESSMENT	01/01/18	64.52
363016026	PT EIP AIDE BIKING 15 MIN	01/01/18	127.89
363016027	PT EIP BIKING 30 MIN	01/01/18	127.89
363016028	PT EIP AIDE WALKING 15MIN	01/01/18	127.89
363016029	PT EIP AIDE WALKING 30MIN	01/01/18	127.89
363016030	PT EIP TREATMENT 60 MIN	01/01/18	64.52
363016031	PT EIP TREATMENT 45 MIN	01/01/18	64.52
363016032	PT EIP TREATMENT 15 MIN	01/01/18	64.52
363016033	PT EIP COLLABROTIVE VISIT	01/01/18	64.52

Procedure ID	Description	Effective Date	Charge
363016037	PT/EIP ASST.TECH S.VISIT	01/01/18	64.52
363016038	ASSIST.TECH.ASSEMT 15MIN	01/01/18	98.12
363016070	SPLINT ADJUST 15 MINS	01/01/18	87.10
363016073	PT/EIP ASST.TECH EVAL	01/01/18	262.97
363016074	PT RS INDIVIDUAL 15 MIN	01/01/18	32.55
363016075	PT RS COORDINATION 15 MIN	01/01/18	27.04
363016076	PT RS CONSULTATION 15MIN	01/01/18	27.04
363016077	PT RS GROUP 15MIN	01/01/18	19.32
363016078	PT RS A/R MEETING 15 MIN	01/01/18	27.04
363016079	PT CPSE EVAL.MEETNG 15MIN	01/01/18	127.89
363016080	CPSE PT EVAL	01/01/18	262.97
363016083	PROFESSIONAL CONTACT 15MI	01/01/18	127.89
363016086	CLINIC PARTCIPATION 15MIN	01/01/18	127.89
363016088	PT ED TREATMENT 15MINS	01/01/18	86.00
363016093	PT RS ASSESSMENT	01/01/18	127.89
363016094	PT TRT BIOFEEDBACK	01/01/18	109.73
363016219	EXTRE.TEST STRENGTH ISOK	01/01/18	195.14
363016222	CONTRAST BATHS 15 MIN	01/01/18	47.41
363016223	ULTRASOUND THERAPY 15 MIN	01/01/18	47.41
363016224	HUBBARD TANK 15 MINS	01/01/18	62.84
363016225	CHKOUT ORTH/PROSTH 15 MIN	01/01/18	39.17
363016226	PROSTHETIC TRAINING 15MIN	01/01/18	78.86
363016227	PROSTHETIC F/UP-15 MIN	01/01/18	47.41
363016228	THERAPEUTIC ACTIV 15 MINS	01/01/18	70.56
363016233	ELEC STIM (ATTEN) 15 MINS	01/01/18	47.41
363016235	PARAFFIN BATH	01/01/18	47.41
363016241	NEUROM/COORD/BAL 15 MIN	01/01/18	81.59
363016242	AQUATIC TX INDIV/15 MIN	01/01/18	94.29
363016243	GAIT TRAINING 15 MINS	01/01/18	47.41
363016244	TRACTION MANUAL 15 MIN	01/01/18	89.30
363016245	MASSAGE THERAPY 15 MINS	01/01/18	39.17
363016247	MYOFACIAL RELEASE	01/01/18	94.29
363016248	MANUAL THERAPY 15 MINS	01/01/18	94.29
363016249	ORTHO MGMT/TRAINING 15MIN	01/01/18	78.86
363016253	WHIRLPOOL THERAPY	01/01/18	70.56
363016254	PT W/C TRAIN/ADJUST 15MIN	01/01/18	75.55
363016255	PT COMM.REINTEG 15 MIN	01/01/18	86.00
363016411	PT POS NEG MOLD	01/01/18	156.56
363016413	PT EQUIP/SPLINT COST 150	01/01/18	201.23
363016415	PT KNEE EXTENSION SPLT	01/01/18	312.59
363016417	PT EQUIP/SPLINT COST 250	01/01/18	335.16

Procedure ID	Description	Effective Date	Charge
363016423	PT SMO IMO	01/01/18	625.70
363016427	PT SAO BILAT	01/01/18	781.67
363016431	PT ARTIC ANKLE ORTHOSIS	01/01/18	937.70
363090901	BIOFEEDBACK TRAINING ANY MODAL	01/01/18	172.57
363097001	PHYSICAL THERAPY EVALUATION 1H	01/01/18	318.10
363097001H	PHYSICAL THPY HOMECARE EVAL	01/01/18	499.43
363097002	PHYSICAL THERAPY RE-EVALUATION	01/01/18	172.57
363097010	HOT/COLD PACKS	01/01/18	13.23
363097014	ELECTRICAL STIMULATION	01/01/18	42.47
363097018	PARAFFIN BATH	01/01/18	35.86
363097022	WHIRLPOOL	01/01/18	79.38
363097032	TENS UNIT	01/01/18	69.46
363097110	PHYSICAL THERAPY TREATMENT 15	01/01/18	125.16
363097110E	PT EDUCATION TREATMENT 15MINS	01/01/18	125.16
363097110H	PHYSICAL THPY HOMECARE	01/01/18	178.08
363097110X	PHYSICAL THPY HOMECARE EXT>59	01/01/18	249.74
363097112	NEUROMUSCULAR REEDUCTION OF MO	01/01/18	136.71
363097113	AQUATIC THERAPY WITH THERAPEUT	01/01/18	136.71
363097116	GAIT TRAINING (INCLUDING STAIR	01/01/18	136.71
363097139	UNLISTED THERAPEUTIC PROCEDURE	01/01/18	136.71
363097140	MANUAL THERAPY TECHNIQUE ONE M	01/01/18	136.71
363097150	PHYSICAL THERAPY TREATMENT GRO	01/01/18	136.71
363097504	ORTHOTICS FITTING	01/01/18	136.71
363097520	PROSTHETICS TRAINING	01/01/18	136.71
363097535	SELF CARE HOME MGMT TRAINING,A	01/01/18	135.61
363097542	WHEELCHAIR MANAGEMENT 15 MIN	01/01/18	69.46
363097760	ORTHOTICS MANAGEMENT TRAINING	01/01/18	136.71
363097761	PROSTHETIC TRAINING UE,LE 15	01/01/18	69.46
363098960	PT/FAMILY ED SELF TRAINING 1:1	01/01/18	250.27
363099999	PT HOMECARE VISIT	01/01/18	231.53
3630L1830	KO IMMOBILIZER CANVAS LONGIT	01/01/18	136.71
3630L1834	KO W/O JOINT RIGID CUST FAB	01/01/18	805.40
3630L1907	AFO SUPRAMALLEOLAR CUSTOM	01/01/18	539.12
3630L1940	AFO PLASTIC/OTHER CUSTOM FAB	01/01/18	576.08
3630L1970	AFO PLASTIC W/ANKLE JNT CUST	01/01/18	865.46
363500001	OT EVAL EACH ADD'L HOUR	01/01/18	298.78
363500002	OT RE-EVAL EACH ADD'L HOUR	01/01/18	298.78
363500003	THERAPY AIDE TREATMENT 15 MIN	01/01/18	69.46
363515001	OT THERAPY EVALUATION	01/01/18	937.70
363515004	OT EQUIP/SPLINT COST	01/01/18	127.89
363515007	OT EQUIP/SPLINT 15 MIN	01/01/18	82.69

Procedure ID	Description	Effective Date	Charge
363515008	OT THRPY JOINT EVAL	01/01/18	390.86
363515009	OT JOINT TREATMENT 15MIN	01/01/18	86.00
363515010	WHEELCHAIR EVAL 15 MINS	01/01/18	78.86
363515011	THERAPEUTIC GRP 2+IND	01/01/18	86.00
363515012	OT CONSULTATIVE 15MIN	01/01/18	55.13
363515013	THERAPEUTIC ACTIV 15 MINS	01/01/18	86.00
363515015	OT PRELIMINARY EVAL	01/01/18	156.56
363515016	THERAPY COORD.CONF. 15MIN	01/01/18	127.89
363515017	OT EIP SUPPLEMENTAL EVAL	01/01/18	262.97
363515018	OT EIP TREATMENT 30MIN	01/01/18	64.52
363515026	OT/EIP ASST.TECH S.VISIT	01/01/18	64.52
363515028	OT EIP CORE EVAL	01/01/18	310.91
363515029	OT EIP ASSESSMENT	01/01/18	127.89
363515030	OT EIP TREATMENT 45 MIN	01/01/18	64.52
363515031	OT EIP TREATMENT 60 MIN	01/01/18	64.52
363515032	OT EIP TREATMENT 15MIN	01/01/18	64.52
363515037	OT SELF CARE MGT 15 MIN	01/01/18	86.00
363515038	A.TECH EVAL NOT W/C 15MIN	01/01/18	98.12
363515039	THERAPEUTIC EXERCISE 15MN	01/01/18	86.00
363515040	OT EIP COLLABROTIVE VISIT	01/01/18	64.52
363515060	OT H/S/C VISIT 30 MIN	01/01/18	102.01
363515061	OT EIP OFFSITE TRT	01/01/18	113.03
363515062	OT EIP OFFSITE EXT'D TRT	01/01/18	157.13
363515070	SPLINT ADJUST 15 MIN	01/01/18	87.10
363515073	OT/EIP ASST.TECH EVAL	01/01/18	262.97
363515074	OT RS INDIVIDUAL 15 MIN	01/01/18	32.55
363515075	OT RS COORDINATION 15 MIN	01/01/18	27.04
363515076	OT RS GROUP 15 MIN	01/01/18	19.32
363515077	OT RS CONSULTATION 15 MIN	01/01/18	27.04
363515078	OT RS A/R MEETING 15MIN	01/01/18	27.04
363515079	OT CPSE EVAL.MEETNG 15MIN	01/01/18	127.89
363515080	CPSE OT EVALUATION	01/01/18	262.97
363515082	PROFESSIONAL CONTACT 15MN	01/01/18	127.89
363515084	EVALUATION CONT'D 15MIN	01/01/18	127.89
363515085	CLINIC PARTICIPATION 15M1	01/01/18	127.89
363515088	OT-FEEDING TRT	01/01/18	78.86
363515089	OT-FEEDING PRELIM EVAL	01/01/18	242.03
363515090	OT-FEEDING EVAL	01/01/18	469.14
363515093	OT RS ASSESSMENT	01/01/18	127.89
363515095	OT COMMUNITY IADL/15 MIN	01/01/18	86.00
363515096	OT ED TREATMENT 15MINS	01/01/18	86.00

Procedure ID	Description	Effective Date	Charge
363515100	COGNITIVE SKILL DEV 15MIN	01/01/18	72.24
363515102	SENSORY INTEGR.TECH 15MIN	01/01/18	55.13
363515200	OT EQUIP/SPLINT COST 5	01/01/18	8.30
363515201	OT EQUIP/SPLINT COST 10	01/01/18	15.44
363515202	OT EQUIP/SPLINT COST 15	01/01/18	23.73
363515203	OT EQUIP/SPLINT COST 20	01/01/18	31.97
363515204	OT EQUIP/SPLINT COST 25	01/01/18	39.17
363515205	OT EQUIP/SPLINT COST 30	01/01/18	47.41
363515206	OT EQUIP/SPLINT COST 35	01/01/18	55.13
363515207	OT EQUIP/SPLINT COST 40	01/01/18	62.84
363515208	OT EQUIP/SPLINT COST 45	01/01/18	70.56
363515209	OT EQUIP/SPLINT COST 50	01/01/18	78.86
363515210	OT EQUIP/SPLINT COST 75	01/01/18	117.44
363515211	OT EQUIP/SPLINT COST 100	01/01/18	156.56
363515212	OT EQUIP/SPLINT COST 125	01/01/18	195.14
363515213	OT ELBOW CUST RIGID SPLINT	01/01/18	672.53
363515214	OT EQUIP/SPLINT COST 175	01/01/18	273.42
363515215	OT EQUIP/SPLINT COST 200	01/01/18	312.59
363515216	OT EQUIP/SPLINT COST 225	01/01/18	352.28
363515217	OT CUSTOM RIGID WHO	01/01/18	390.86
363515218	OT EQUIP/SPLINT COST 275	01/01/18	429.98
363515219	OT EQUIP/SPLINT COST 300	01/01/18	469.14
363515220	OT EQUIP/SPLINT COST 325	01/01/18	508.25
363515221	OT EQUIP/SPLINT COST 350	01/01/18	546.84
363515222	OT EQUIP/SPLINT COST 375	01/01/18	586.01
363515223	OT EQUIP/SPLINT COST 400	01/01/18	625.70
363515224	OT EQUIP/SPLINT COST 425	01/01/18	664.28
363515225	OT EQUIP/SPLINT COST 450	01/01/18	703.40
363515226	OT EQUIP/SPLINT COST 475	01/01/18	742.56
363515227	OT EQUIP/SPLINT COST 500	01/01/18	781.67
363515228	OT PROSTH TRNING 15MINS	01/01/18	78.86
363515229	CHK/ORTHOT PROSTH 15MIN	01/01/18	106.42
363515231	ULTRASOUND THERAPY 15 MIN	01/01/18	47.41
363515232	CONTRAST BATH 15 MINS	01/01/18	47.41
363515233	ELEC.STIM(ATTEN)15 MINS	01/01/18	47.41
363515234	HUBBARD TANK 15 MINS	01/01/18	62.84
363515235	PARAFFIN BATH THERAPY	01/01/18	47.41
363515241	NEUROM/COORD/BAL 15 MIN	01/01/18	81.59
363515253	WHIRLPOOL THERAPY	01/01/18	70.56
363515254	OT W/C TRAIN/ADJUST 15MIN	01/01/18	75.55
363590901	BIOFEEDBACK TRAINING	01/01/18	149.42

Procedure ID	Description	Effective Date	Charge
363592526	TREATMENT OF SWALLOWING DYSFUN	01/01/18	407.40
363592610	EVALUATION OF ORAL AND PHARYNG	01/01/18	518.18
363592611	MOTION FLOUROSCOPIC EVALUATION	01/01/18	542.43
363597003	OCCUPATIONAL THERAPY EVALUATIO	01/01/18	298.78
363597003H	OT HOMECARE EVALUATION 1 HR	01/01/18	499.43
363597004	OCCUPATIONAL THERAPY RE-EVALUA	01/01/18	298.78
363597010	HOT OR COLD PACKS	01/01/18	13.23
363597018	PARAFFIN BATH	01/01/18	35.86
363597032	E-STIM	01/01/18	72.77
363597034	CONTRAST BATHS	01/01/18	65.63
363597039	FLUIDOTHERAPY	01/01/18	83.27
363597112	NEUROMUSCULAR RE-EDUCATION	01/01/18	149.42
363597150	GROUP SESSION 30 MIN	01/01/18	149.42
363597504	ORTHOTICS FITTING AND TRAINING	01/01/18	149.42
363597520	PROSTHETIC TRAINING	01/01/18	149.42
363597530	OCCUPATIONAL THERAPY TREATMENT	01/01/18	134.51
363597530E	OT EDUCATION TREATMENT 15MIN	01/01/18	134.51
363597530H	OT HOMECARE	01/01/18	178.08
363597530X	OT HOMECARE EXT >59 MINS	01/01/18	249.74
363597532	DEVELOPMENT OF COGNITIVE SKILL	01/01/18	106.42
363597533	SENSORY INTEGRATIVE TECHNIQUES	01/01/18	114.14
363597535	SELF CARE HOME MGMT TRAINING,A	01/01/18	135.61
363597537	COMMUNITY WORK RE INTEGRATION	01/01/18	120.17
363597542	WHEELCHAIR MANAGEMENT 15 MIN	01/01/18	121.28
363597750	PHYSICAL PERFORMANCE TEST OR M	01/01/18	149.42
363597755	ASSITIVE TECHNOLOGY ASSESSMENT	01/01/18	148.31
363597760	ORTHOTICS MANAGEMENT TRAINING	01/01/18	145.53
363597761	PROSTHETIC TRAINING UE,LE 15	01/01/18	127.89
363597762	CHECKOUT ORTHOTIC/PROSTHETIC U	01/01/18	153.25
363597799	UNLISTED PHYSICAL MEDICINE/REH	01/01/18	149.42
363599999	OT HOMECARE VISIT	01/01/18	231.53
3635A4565	SLING	01/01/18	132.88
3635L3650	SHLDER FIG 8 ABDUCT RESTRAINER	01/01/18	61.74
3635L3670	PREFABRICATED ELASTIC SHOULDER	01/01/18	132.88
3635L3672	SHLDR AIRPLANE DSGN W/O JOINTS	01/01/18	977.92
3635L3702	ELBOW ORTHOSIS WITHOUT JOINTS	01/01/18	253.05
3635L3760	ELBOW ORTHOSIS WITH JOINTS	01/01/18	436.59
3635L3762	PREFABRICATED ELBOW SPLINT	01/01/18	132.88
3635L3806	WRST HND FNGR ORTHO W JOINTS	01/01/18	397.48
3635L3807	WRST HND FNGR ORTHO W/O JOINTS	01/01/18	218.30
3635L3808	WRST HND FNGR ORTHO RIGID W/O	01/01/18	246.44

Procedure ID	Description	Effective Date	Charge
3635L3906	CUSTOM WRIST HAND SPLINT	01/01/18	132.88
3635L3908	PREFABRICATED WRIST SPLINT	01/01/18	132.88
3635L3913	CUSTOM HAND FINGER SPLINT	01/01/18	132.88
3635L3927	PREFABRICATED FINGER SPLINTS	01/01/18	132.88
3635L3933	CUSTOM FINGER SPLINT	01/01/18	132.88
3635L3976	SEWHFO AIRPLANE W/O JOINTS	01/01/18	1466.90
3635L3999	UPPER LIMB ORTHOSIS NOS	01/01/18	149.42
3635L4205	ORTHO DEVICE REPAIR PER 15 MIN	01/01/18	47.41
364000001	ST EVAL EACH ADD'L HOUR	01/01/18	725.45
364000002	ST RE-EVAL EACH ADD'L HOUR	01/01/18	725.45
364000003	THERAPY AIDE TREATMENT 15 MIN	01/01/18	51.29
364010002	HEARING AID EVALUATION	01/01/18	242.03
364010003	AUDIO SITE LESION TESTING	01/01/18	106.42
364010004	HEARING AID CHECK ONE EAR	01/01/18	109.73
364010005	AUDIO EAR MOLD IMPRESSION	01/01/18	94.29
364010006	AIR&BONE THRESHOLD ONLY	01/01/18	239.24
364010009	AIR THRESHOLD ONLY	01/01/18	70.56
364010011	ELECTRO HEARING TEST ONE	01/01/18	62.84
364010012	OAE DIAGNOSTIC	01/01/18	265.70
364010013	OAE SCREENING	01/01/18	172.57
364010017	AUDIOLOGY CONSULTATION 15MIN	01/01/18	55.13
364010018	BRAINSTEM EVOKED RESPONSE	01/01/18	625.70
364010019	EIP ABR EVALUATION	01/01/18	262.97
364010020	EIP ABR SCREENING	01/01/18	262.97
364010023	CPSE OAE EVALUATION	01/01/18	254.68
364010024	STENGER TEST, SPEECH	01/01/18	355.01
364010026	CPSE OAE SCREENING	01/01/18	254.68
364010027	AUDIOLOGY SWIM MOLDS	01/01/18	70.56
364010030	HOME/SCH/CLINIC 15 MIN	01/01/18	86.00
364010031	AUDIOLOGY EIP EVALUATION	01/01/18	262.97
364010032	AUDIOLOGY EIP COUNSELING	01/01/18	64.52
364010034	EIP PARENT/CAREGIVE GROUP	01/01/18	30.87
364010036	EIP SCREENING	01/01/18	262.97
364010037	ABR SCREENING	01/01/18	312.59
364010039	EIP TREATMENT	01/01/18	64.52
364010040	AUDIO EIP ASST.TECH EVAL	01/01/18	262.97
364010041	EIP AUD/ASST.TECH S.VISIT	01/01/18	64.52
364010042	CPSE AUDIO EVAL	01/01/18	262.97
364010047	HEARING AID SAVER	01/01/18	5.51
364010058	EIP CORE AUDIO EVAL	01/01/18	621.81
364010059	EI OAE EVALUATION	01/01/18	262.97

Procedure ID	Description	Effective Date	Charge
364010060	EI OAE SCREENING	01/01/18	262.97
364010090	ACOUSTIC REFLEX DECAY	01/01/18	55.13
364010091	SPEECH AUDIOMETRY, THRES.	01/01/18	55.13
364010092	FILTERED SPEECH TEST	01/01/18	78.86
364010093	STAGGERED SPONDAIC WORD T	01/01/18	109.73
364010094	SYNTHETIC SENTENCE ID TES	01/01/18	55.13
364010095	CENTRAL TEST(SPECIFY)	01/01/18	437.69
364010128	EAR MOLD/INSERT,NOT DISP	01/01/18	47.41
364010130	BATTERY-HEARING AID	01/01/18	1.68
364010134	BATTERY-IMPLANT	01/01/18	1.68
364010500	EVAL OF AUD REH STAT 1HR	01/01/18	469.14
364010501	EVAL OF AUD REH 15MIN	01/01/18	70.56
364010502	AUD REH PRE LING POST IMP	01/01/18	148.84
364010503	AUD REH POST LING PST IMP	01/01/18	148.84
364010504	HEARING AID CHK BOTH EARS	01/01/18	218.87
364010505	ELEC HEARING AID TST BOTH	01/01/18	125.69
364010905	DIAG ANALY OF CI<7YRS AGE	01/01/18	546.84
364010906	REPROGRAM COCHLEAR IMP <7	01/01/18	297.15
364010907	DIAG ANALY OF CI>7YRS AGE	01/01/18	546.84
364010908	REPROGRAM COCHLEAR IMP 7>	01/01/18	297.15
364010909	AURAL REHAB STATUS	01/01/18	136.19
364010910	TRT SPEECH/VOICE/COMMUNIC	01/01/18	136.19
364010914	CPSE ASST TECH	01/01/18	56.81
364017001	SPEECH THERAPY EVALUATION	01/01/18	937.70
364017002	SPEECH THRPY EQUIP 15MIN	01/01/18	55.13
364017003	ST COMMUN. DEVICE COST	01/01/18	127.89
364017004	SPEECH SUPPLIES	01/01/18	127.89
364017005	ST GRP THERAPY TRT 15MIN	01/01/18	70.56
364017006	ST GRP AIDE SESSION 15MIN	01/01/18	127.89
364017007	ST JOINT EVAL 30 MIN	01/01/18	390.86
364017008	ST JOINT TREATMENT 15MIN	01/01/18	127.89
364017009	EVAL SPEECH AAC RX 1 HR	01/01/18	781.67
364017010	SPEECH THERAPY TRT 15MIN	01/01/18	55.13
364017011	FEEDING SUPPORT DAILY CHARTING	01/01/18	127.89
364017012	ST AIDE AUDIO TEST 15 MIN	01/01/18	127.89
364017013	ST THRPY SCREENING 15 MIN	01/01/18	55.13
364017014	THERAPY COORD.CONF. 15MIN	01/01/18	127.89
364017015	SPEECH AIDE TECHNOLOGY	01/01/18	127.89
364017016	ST EIP SUPPLEMENTAL EVAL	01/01/18	262.97
364017018	SPCH EIP TREATMENT 30MINS	01/01/18	64.52
364017019	ST EIP COLLABROTIVE VISIT	01/01/18	64.52

Procedure ID	Description	Effective Date	Charge
364017020	ST EIP OFF-SITE SCREENING	01/01/18	262.97
364017021	ST EIP OFF-SITE TREATMENT	01/01/18	113.03
364017022	ST EIP OFF-SITE EXT. TRT	01/01/18	157.13
364017023	ST EIP FEEDING SCREENING	01/01/18	64.52
364017024	ST EIP FEEDING EVALUATION	01/01/18	262.97
364017025	ST EIP FEEDING TREATMENT	01/01/18	64.52
364017026	ST/EIP ASST. TECH S. VISIT	01/01/18	64.52
364017028	ST EIP CORE EVALUATION	01/01/18	310.91
364017029	ST EIP ASSESSMENT	01/01/18	64.52
364017030	ST EIP TREATMENT 1 HOUR	01/01/18	64.52
364017031	ST EIP TREATMENT 45 MIN	01/01/18	64.52
364017032	ST EIP TREATMENT 15 MIN	01/01/18	64.52
364017033	ST EIP FEEDING TRT 1HR	01/01/18	64.52
364017034	ST EIP FEEDING TRT 45MIN	01/01/18	64.52
364017035	ST EIP FEEDING TRT 15MIN	01/01/18	64.52
364017036	ST EIP AIDE AUDIO TEST	01/01/18	64.52
364017037	SPEECH AIDE FEEDING GROUP	01/01/18	127.89
364017041	SPEECH AIDE MATERIALS	01/01/18	127.89
364017042	ST CONSULTATIVE 15 MIN	01/01/18	55.13
364017043	ST HOME/SCH/CLINIC 30 MIN	01/01/18	109.73
364017044	EIP AIDE SESSION 30 MIN	01/01/18	127.89
364017045	ST EIP AIDE EQUIP 30 MIN	01/01/18	127.89
364017046	AIDE AUDIO TEST 30MIN	01/01/18	127.89
364017047	AIDE AUDIO TEST 45MIN	01/01/18	127.89
364017048	ST EIP AIDE SESSION 45MIN	01/01/18	127.89
364017049	EIP GRP AIDE SESS. 45 MIN	01/01/18	127.89
364017053	ST EVAL CONT'D 30 MIN	01/01/18	127.89
364017054	ST EVAL CONT'D 45 MIN.	01/01/18	127.89
364017055	ST EVAL CONT'D 60MIN	01/01/18	127.89
364017056	ST FEEDING ASSESSMENT	01/01/18	127.89
364017057	ST EIP SCREENING 15 MIN	01/01/18	47.41
364017058	ST EIP SCREENING 30 MIN	01/01/18	47.41
364017059	ST EIP SCREENING 45 MIN	01/01/18	47.41
364017060	ST EIP SCREENING 60 MIN	01/01/18	47.41
364017061	ST EIP H/S/C VISIT 30 MIN	01/01/18	47.41
364017062	ST EIP H/S/C VISIT 60 MIN	01/01/18	47.41
364017063	ST EIP H/S/C VISIT 90 MIN	01/01/18	47.41
364017064	ST EIP H/S/C VISIT 120 MN	01/01/18	47.41
364017065	ST EIP TREATMENT 90 MIN	01/01/18	50.41
364017066	ST EIP FEEDING TRT 90 MIN	01/01/18	64.52
364017073	ST/EIP ASST. TECH EVAL	01/01/18	262.97

Procedure ID	Description	Effective Date	Charge
364017074	ST RS INDIVIDUAL 15 MIN	01/01/18	32.55
364017075	ST RS COORDINATION 15 MIN	01/01/18	27.04
364017076	ST RS GROUP 15MIN	01/01/18	19.32
364017077	ST RS CONSULTATION 15 MIN	01/01/18	27.04
364017078	ST RS A/R MEETING 15MIN	01/01/18	27.04
364017079	ST CPSE EVAL.MEETNG 15MIN	01/01/18	127.89
364017080	CPSE ST EVALUATION	01/01/18	262.97
364017082	ST ED TREATMENT 15MINS	01/01/18	47.41
364017083	PROFESSIONAL CONTACT 15MN	01/01/18	127.89
364017084	TRAVEL CODE 15MIN	01/01/18	127.89
364017085	EVALUATION CONT'D 15MIN	01/01/18	127.89
364017086	CLINIC PARTICIPATION 15MIN	01/01/18	127.89
364017088	FEED/ORAL MOTORFUNC 15MIN	01/01/18	62.84
364017089	ST-FEEDING SCREENING 15MI	01/01/18	55.13
364017090	FEEDING/ORAL MTR FUNC EVA	01/01/18	781.67
364017091	CPSE FEEDING SCR. 15 MIN	01/01/18	127.89
364017092	ST CPSE FEEDING EVAL	01/01/18	127.89
364017093	ST RS ASSESSMENT	01/01/18	64.52
364017094	ST CHART REVIEW	01/01/18	127.89
364017096	NON SPEECH DEVICE THERAPY	01/01/18	55.13
364017097	EVAL SPCH DEVICE RX+30MIN	01/01/18	390.86
364017099	COGNITIVE LINGUISTIC EVAL	01/01/18	781.67
364017100	COGNITIVE SKILL DEV 15MIN	01/01/18	55.13
364017101	ST EVAL CONT'D 90 MINS	01/01/18	127.89
364017102	ST EVAL CONT'D 120 MINS	01/01/18	127.89
364017103	Augmentative Comm.Eval	01/01/18	1705.04
364092506	EVALUATION OF SPEECH, LANG, CO	01/01/18	725.45
364092506H	SPEECH HOMECARE EVAL	01/01/18	499.43
364092507	TREATMENT OF SPEECH, LANG, COM	01/01/18	307.60
364092507E	ST EDUCATION TREATMENT 15MIN	01/01/18	151.04
364092507H	SPEECH THERAPY HOMECARE	01/01/18	178.08
364092507X	ST HOMECARE EXTENDED	01/01/18	249.74
364092508	GROUP TREATMENT OF SPEECH, LAN	01/01/18	143.33
364092521	EVALUATION OF SPEECH FLUENCY	01/01/18	724.97
364092522	EVALUATION OF SPCH SOUND PROD	01/01/18	724.97
364092523	EVAL OF SPCH SOUND PROD/LANG	01/01/18	724.97
364092524	BEHAVIOR AND QUALITATIVE ANALY	01/01/18	724.97
364092526	TREATMENT OF SWALLOWING DYSFUN	01/01/18	408.50
364092550	TYMPANOMETRY AND REFLEX	01/01/18	634.52
364092551	SCREENING AIR ONLY	01/01/18	212.26
364092552	AUDIO (THRESHOLD) AIR ONLY	01/01/18	159.86

Procedure ID	Description	Effective Date	Charge
364092553	AUDIO (THRESHOLD) AIR & BONE	01/01/18	159.86
364092555	SPEECH AUDIOMETRY THRESHOLD	01/01/18	159.86
364092556	SRT W/ SPEECH RECOGNITION	01/01/18	212.26
364092557	AUDIO EVAL, SPEECH RECOGNITION	01/01/18	370.44
364092562	LB BINAURAL OR MONONARAL	01/01/18	159.86
364092563	TONE DECAY TEST	01/01/18	106.42
364092565	STRENGER TEST PURE TONE	01/01/18	159.86
364092567	TYMPANANOMETRY TESTING	01/01/18	212.26
364092568	ACOUSTIC REFLEX TESTING	01/01/18	106.42
364092569	ACOUSTIC REFLEX DECAY	01/01/18	212.26
364092570	IMMITTANCE; TYMP, REFLEX +RD	01/01/18	634.52
364092571	FILTERED SPEECH TEST	01/01/18	148.31
364092572	SSW TEST	01/01/18	212.26
364092576	SSI TEST	01/01/18	212.26
364092577	STENGER TEST SPEECH	01/01/18	159.86
364092579	VRA TEST	01/01/18	370.44
364092582	CONDITIONING PLAY TEST	01/01/18	370.44
364092583	SELECT PICTURE AUDIOMETRY	01/01/18	159.86
364092585	ABR COMPREHENSIVE	01/01/18	1900.71
364092586	ABR LIMITED	01/01/18	950.93
364092587	OAE LIMITED	01/01/18	159.86
364092588	OAE COMPREHENSIVE	01/01/18	264.60
364092590	HEARING AID EXAM MONAURAL	01/01/18	318.10
364092591	HEARING AID EXAM BINAURAL	01/01/18	476.28
364092592	HEARING AID CHECK MONONAURAL	01/01/18	318.10
364092593	HEARING AID CHECK BINAURAL	01/01/18	476.28
364092594	ELECTOACOUSTIC MONONAURAL	01/01/18	106.42
364092595	ELECTOACOUSTIC BINAURAL	01/01/18	212.26
364092601	CI PROGRAM < 7YRS OLD	01/01/18	1267.88
364092602	SUB PROGRAM < 7 YRS OLD	01/01/18	634.52
364092603	CI PROGRAM ? 7YRS OLD	01/01/18	1267.88
364092604	SUB PROGRAM ? 7 YRS OLD	01/01/18	634.52
364092605	EVALUATION FOR PX NON SPEECH G	01/01/18	296.57
364092606	THERAPY SERVICES USE OF NON SP	01/01/18	296.57
364092607	EVALUATION FOR PX SPEECH GENER	01/01/18	766.24
364092608	EACH ADD 30 MINS SPEECH DEVIC	01/01/18	148.31
364092609	THERAPY SERVICES SPEECH GENERA	01/01/18	404.62
364092610	EVALUATION OF ORAL AND PHARYNG	01/01/18	520.96
364092612	FLEXIBIL FIBEROPTIC ENDOSCOPIC	04/01/18	779.04
364092613	FEES REPORT	04/01/18	155.52
364092620	CAPE WITH REPORT INITIAL 60 MI	01/01/18	634.52

Procedure ID	Description	Effective Date	Charge
364092621	CAPE, EACH ADDITIONAL 15 MINS	01/01/18	159.86
364092627	EVAL AUDITORY REHAB ADD. 15 MI	01/01/18	159.86
364092630	AUDITORY REHAB PRELINGUAL HEAR	01/01/18	148.31
364092633	AUDITORY REHAB POSTLINGUAL HEA	01/01/18	148.31
364092921	CAPE, EACH ADDITIONAL 15 MIN.	01/01/18	159.86
364092926	EVAL AUDITORY REHAB; 1ST HOUR	01/01/18	634.52
364092933	AUDITORY REHAB; POSTLINGUAL HL	01/01/18	634.52
364096105	ASSESSMENT FOR APHASIA WITH IN	01/01/18	375.43
364096110	DEVELOPMENTAL TESTING ; LIMITE	01/01/18	148.31
364096111	DEVELOPMENTAL TESTING ; EXTEND	01/01/18	577.19
364096125	STANDARDIZED CONGNITIVE TESTIN	01/01/18	425.04
364097532	DEVELOPMENT OF COGNITIVE SKILL	01/01/18	106.42
364097533	SENSORY INTEGRATIVE TECHNIQUES	01/01/18	296.57
364098960	PT/FAMILY ED SELF TRAINING 1:1	01/01/18	301.56
364099999	ST HOMECARE VISIT	01/01/18	231.53
3640L7510	REPAIR OF PROSTHETIC DEVICE	01/01/18	606.38
3640L8621	BATTERY- CI	01/01/18	1.68
3640L8624	REPLACEMENT RCHRGABLE BATTERY	01/01/18	260.19
3640L8699	PROSTATIC IMPLANT ACCESSORY	01/01/18	269.33
3640L9900	CL SUPPLY ACCESSORY	01/01/18	302.03
3640V5014	REPAIR/MODIFICATION OF HA	01/01/18	531.41
3640V5030	BODY MONAURAL AIR	01/01/18	531.41
3640V5040	BODY MONAURAL BONE	01/01/18	531.41
3640V5050	ITE MONAURAL	01/01/18	531.41
3640V5060	BTE MONAURAL	01/01/18	531.41
3640V5120	BODY-WRN, BINAURAL	01/01/18	531.41
3640V5130	ITE BINAURAL	01/01/18	531.41
3640V5140	BTE BINAURAL	01/01/18	531.41
3640V5170	CROS ITE	01/01/18	531.41
3640V5180	BTE CROS	01/01/18	531.41
3640V5210	ITE BICROS	01/01/18	531.41
3640V5220	BTE BICROS	01/01/18	531.41
3640V5242	CIC ANALOG MONAURAL *	01/01/18	531.41
3640V5243	ITC ANALOG MONAURAL *	01/01/18	531.41
3640V5244	CIC ANA DIG PRG MON *	01/01/18	531.41
3640V5245	ITC ANA DIG PRG MON *	01/01/18	531.41
3640V5246	ITE ANA DIG PRG MON	01/01/18	531.41
3640V5247	BTE ANA DIG PRG MON	01/01/18	531.41
3640V5248	CIC, ANA DIGITAL BINAURAL	01/01/18	531.41
3640V5249	ITC ANALOG BINAURAL *	01/01/18	531.41
3640V5250	CIC ANA DIG PRG BIN *	01/01/18	531.41

Procedure ID	Description	Effective Date	Charge
3640V5251	ITC ANA DIG PRG BIN *	01/01/18	531.41
3640V5252	ITE ANA DIG PRG BIN	01/01/18	531.41
3640V5253	BTE DIG, PRG, BINAURAL	01/01/18	531.41
3640V5254	CIC DIGITAL MONAURAL *	01/01/18	531.41
3640V5255	ITC DIGITAL MONAURAL *	01/01/18	531.41
3640V5256	ITE DIGITAL MONAURAL	01/01/18	531.41
3640V5257	BTE DIGITAL MONAURAL	01/01/18	531.41
3640V5258	CIC DIGITAL BINAURAL *	01/01/18	531.41
3640V5259	ITC DIGITAL BINAURAL *	01/01/18	531.41
3640V5260	ITE DIGITAL BINAURAL	01/01/18	531.41
3640V5261	BTE DIGITAL BINAURAL	01/01/18	531.41
3640V5262	HA,DISPOSABLE,MONO	01/01/18	531.41
3640V5263	HA,DISPOSABLE,BINAURAL	01/01/18	531.41
3640V5264	EARMOLD/INSERT NOT DISP	01/01/18	47.41
3640V5265	EAR MOLD/INSERT, DISP	01/01/18	132.88
3640V5266	BATTERY FOR HEARING AID	01/01/18	1.68
3640V5267	HA SUPPLIES/ACCESSORIES	01/01/18	132.88
3640V52671	OTO CLIP II	01/01/18	6.62
3640V52672	CRITLER CLIP II	01/01/18	11.60
3640V52673	CRITLER CLIP I	01/01/18	10.50
3640V52674	HEARING AID SAVER	01/01/18	6.62
3640V52675	OTO CLIP	01/01/18	3.89
3640V52677	AIR BLOWER	01/01/18	5.51
3640V52678	BATTERY TESTER	01/01/18	5.51
3640V5270	ASSIST DEVICE TV AMPLIFIER	01/01/18	341.25
3640V5273	ASST DEVICE FOR COCHLEAR IMPLN	01/01/18	414.75
3640V5274	ASSITIVE DEVICE NOS	01/01/18	531.41
3640V5275	EAR MOLD IMPRESSION	01/01/18	506.05
3640V5298	HEARING AID NOC	01/01/18	531.41
3640V5299	HEARING SERVICE, MISC.	01/01/18	531.41
364192550	TYMPANOMETRY AND REFLEX	01/01/18	634.52
364192551	SCREENING AIR ONLY	01/01/18	212.26
364192552	AUDIO (tHRESHOLD) AIR ONLY	01/01/18	159.86
364192553	AUDIO (THRESHOLD) AIR & BONE	01/01/18	159.86
364192555	SPEECH AUDIOMETRY THRESHOLD	01/01/18	159.86
364192556	SRT W/SPEECH RECOGNITION	01/01/18	212.26
364192557	AUDIO EVAL,SPEECH RECOGNITION	01/01/18	370.44
364192563	TONE DECAY TEST	01/01/18	106.42
364192567	TYMPANANOMETRY TESTING	01/01/18	212.26
364192579	VRA TEST	01/01/18	370.44
364192582	CONDITIONING PLAY TEST	01/01/18	370.44

Procedure ID	Description	Effective Date	Charge
364192583	SELECT PICTURE AUDIOMETRY	01/01/18	159.86
364192585	ABR COMPREHENSIVE	01/01/18	1900.71
364192588	OAE COMPREHENSIVE	01/01/18	264.60
364192590	HEARING AID EXAM MONOAUURAL	01/01/18	318.10
364192591	HEARING AID EXAM BIAURAL	01/01/18	476.28
364192592	HEARING AID CHECK MONOAUURAL	01/01/18	318.10
364192593	HEARING AID CHECK BIAURAL	01/01/18	476.28
364192594	ELECTOACOUSTIC MONOAUURAL	01/01/18	106.42
364192595	ELECTOACOUSTIC BINAURAL	01/01/18	212.26
364192601	CI PROGRAM < 7YRS OLD	01/01/18	1267.88
364192602	SUB PROGRAM < 7 YRS OLD	01/01/18	634.52
364192604	SUB PROGRAM 7 YRS OLD	01/01/18	634.52
364192620	CAPE WITH REPORT INITIAL 60MN	01/01/18	634.52
364192921	CAPE, EACH ADDITIONAL 15 MIN.	01/01/18	159.86
3641L8624	REPLACEMENT RECHRGABLE BATTERY	01/01/18	260.19
3641V5014	REPAIR/MODIFICATION OF HA	01/01/18	531.41
3641V5140	BTE BINAURAL	01/01/18	531.41
3641V5257	BTE DIGITAL MONOAUURAL	01/01/18	531.41
3641V5261	BTE DIGITAL BIAURAL	01/01/18	531.41
3641V5264	EARMOLD/INSERT NOT DISP	01/01/18	47.41
3641V5299	HEARING SERVICE, MISC	01/01/18	531.41
364525085	ECC EIP SI COLLABORATIVE	01/01/18	86.00
364526001	CPSE EDUCATIONAL EVAL	01/01/18	287.23
364526002	TR INTERVENTION 15MIN	01/01/18	149.42
364526082	TR PROFESSIONAL CONTACT 15 MIN	01/01/18	132.88
365018008	DIFFUSION	01/01/18	164.27
365018010	ENDTIDAL CO2	01/01/18	90.98
365018011	EXERCISE STUDY	01/01/18	127.89
365018013	FRC	01/01/18	137.81
365018015	PASSY MUIR EVAL	01/01/18	151.62
365018016	PEAK FLOW	01/01/18	69.46
365018018	PULSE OX.READ	01/01/18	55.13
365018019	SPIROMETRY	01/01/18	108.05
365018027	BIPAP SETUP	01/01/18	303.77
365018028	BIPAP	01/01/18	234.83
365018029	CHEST P.T.	01/01/18	156.56
365018030	CPAP SETUP	01/01/18	303.77
365018031	CPAP CHECK	01/01/18	234.83
365018032	CPR	01/01/18	625.70
365018042	MDI WITH SPACER	01/01/18	78.86
365018043	MEDICATION NEB. SETUP	01/01/18	78.86

Procedure ID	Description	Effective Date	Charge
365018044	MEDICATION NEB.	01/01/18	78.86
365018045	ASSESSMENT/EXT.THERAPY	01/01/18	154.93
365018046	O2/AIR DELIVERY SERV	01/01/18	127.89
365018048	VENTILATOR SETUP	01/01/18	127.89
365018049	VENTILATOR CHECK	01/01/18	127.89
365018050	CYLINDER CHECKS	01/01/18	127.89
365018051	CYLINDER CHANGE	01/01/18	127.89
365018056	SUCTIONING	01/01/18	127.89
365018058	EQUIPMENT TUBING 1=VENTS	01/01/18	127.89
365018059	EQUIPMENT TUBING 2=LVN	01/01/18	127.89
365018060	EQUIP. TUBING 3=MED/NEB	01/01/18	127.89
365018061	P.OXIMETRY SETUP	01/01/18	154.93
365018062	EQUIP.TUBING 4 LVN ONLY	01/01/18	127.89
365018064	VENT. WEANING	01/01/18	127.89
365018066	INCENTIVE SPIROMETRY	01/01/18	76.65
365018067	INITIAL VENT EVALUATION	01/01/18	127.89
365094002	VENTILATOR SETUP 1 HR	01/01/18	242.55
365094003	VENTILATOR CHECK	01/01/18	82.16
365094010	SPIROMETRY	01/01/18	121.28
365094644	NEBULIZER SETUP INITIAL 1 HR	01/01/18	242.55
365094660	BIPAP SETUP	01/01/18	242.55
365094660A	BIPAP TREATMENT DAILY	01/01/18	121.28
365094662	CPAP SETUP	01/01/18	242.55
365094662A	CPAP TREATMENT DAILY	01/01/18	121.28
365094664	NEBULIZER TREATMENT ADD I HR	01/01/18	121.28
365094664A	AERSOL INITIAL 1 HRS	01/01/18	61.74
365094664B	AERSOL EACH ADD'L 1 HR	01/01/18	61.74
365094667	CHEST P.T. INITIAL	01/01/18	242.55
365094668	VENTILATOR WEANING THERAPY	01/01/18	121.28
365094668A	CHEST P.T. DAILY	01/01/18	121.28
365094680	O2 SETUP	01/01/18	121.28
365094680A	O2 DAILY	01/01/18	61.74
365094760	PULSE OXIMETER READ	01/01/18	61.74
365094760A	PULSE OXIMETRY SETUP	01/01/18	121.28
365094770	CO2 MONITORING	01/01/18	61.74
365094799	PASSY MUIR EVALUATION	01/01/18	121.28
365094799A	TRACHEOSTOMY CHANGE	01/01/18	121.28
365094799B	TRACHEOSTOMY CARE	01/01/18	61.74
365094799C	RAPID RESPONSE	01/01/18	61.74
365094799D	CODE BLUE	01/01/18	61.74
365094799E	CYLINDER CHECKS	01/01/18	61.74

Procedure ID	Description	Effective Date	Charge
365094799F	CYLINDER CHANGE	01/01/18	61.74
365094799G	SUCTIONING	01/01/18	61.74
365094799H	VENTILATOR CURCUIT CHANGE	01/01/18	121.28
365094799I	NEBULIZER CHANGE	01/01/18	61.74
365094799J	AERSOL TUBING CHANGE	01/01/18	61.74
365094799K	O2 WEANING THERAPY	01/01/18	121.28
365094799L	O2 CYLINDER CHANGE	01/01/18	61.74
365511050	INDIVIDUAL THERAPY 30 MIN	01/01/18	78.86
365511052	GROUP THERAPY	01/01/18	78.86
365511053	FAMILY THERAPY	01/01/18	132.88
365511054	HOME VISIT THERAPY	01/01/18	132.88
365511055	OUT OF OFFICE CONSULTATIO	01/01/18	132.88
365511056	INTAKE EVALUATION	01/01/18	127.89
365511057	WEEKLY THERAPY SESSIONS	01/01/18	132.88
365511058	EIP SERVICE COORDINATION	01/01/18	23.15
365511059	EIP SOC.WK COUNSL(PARENT)	01/01/18	64.52
365511060	EIP FAMILY/CAREGIVER GRP	01/01/18	30.87
365511061	EIP PARENT/CHILD GROUP	01/01/18	61.74
365511062	EIP OFF-SITE TREATMENT	01/01/18	113.03
365511063	EIP OFF-SITE EXT EVAL	01/01/18	157.13
365511074	SOC.SER.RELATED SER.15MIN	01/01/18	28.67
365511075	SOC.SER.REL.SERV COOR 15M	01/01/18	28.67
365511080	CPSE SOCIAL HISTORY EVAL	01/01/18	228.22
365521094	EIP PHYSICIAN SUPPLEMENTAL	01/01/18	304.87
365525084	ECC EIP CORE EVALUATION	01/01/18	506.05
365540534	CPSE SOCIAL HISTORY EVAL	01/01/18	237.62
365599241	CPSE SOCIAL HISTORY EVAL	01/01/18	237.62
366490801	PSYCHIATRIC DIAG INTERVIEW	01/01/18	651.05
366490802	INTERACTIVE PSYCH DX INTERVIEW	01/01/18	683.55
366490804	INDIVIDUAL PSYCHOTHERAPY	01/01/18	717.73
366490805	INDIV PSYCHOTHPY WITH MED.EVAL	01/01/18	753.59
366490806	INDIVIDUAL PSYCHOTHERAPY	01/01/18	656.57
366490846	FAMILY PSYCHTHPY W/O PATIENT	01/01/18	651.05
366490847	FAMILY PSYCHOTHPY /PATIENT PRE	01/01/18	651.05
366490853	GRP PSYCHOTHPY /NON MULTI FAM	01/01/18	184.12
366490887	INTERPRETATION WITH PSYCH EXAM	01/01/18	132.88
366496101	PSYCHOLOGICAL TESTING	01/01/18	422.84
366496102	PSYCHOLOGICAL TESTING WITH INT	01/01/18	132.88
366496118	NEUROPSYCHOLOGICAL TESTING	01/01/18	422.84
366496119	NEUROPSYCHOLOGICAL TESTING	01/01/18	422.84
366496150	HEALTH AND BEHAVIOR ASSESSMENT	01/01/18	285.02

Procedure ID	Description	Effective Date	Charge
366496151	HEALTH AND BEHAVIOR RE-ASSESSM	01/01/18	285.02
366499201	OP PROF NEW PT E&M LVL I 10 MN	01/01/18	226.59
366499201N	OP PRO NW PT E&M LVL I 10M NC	01/01/18	226.59
366499202	OP PROF NEW PT E&M LVL II 20MN	01/01/18	453.13
366499202N	OP PR NW PT E&M LVL II 20M NC	01/01/18	453.13
366499203	OP PROF NEW PT E&M LVL III 30M	01/01/18	679.72
366499203N	OP PRO NW PT E&M LVL111 30M NC	01/01/18	679.72
366499204	OP PROF NEW PT E&M LVL IV 45M	01/01/18	1019.29
366499205	OP PROF NEW PT E&M LVL V 60+M	01/01/18	1359.38
366499211	OP PROF ESTB PT E&M LVL I 15M	01/01/18	113.56
366499211N	OP PRO ESTB PT LVL I 15M NC	01/01/18	113.56
366499212	OP PROF ESTB PT E&M LVL II 10M	01/01/18	226.59
366499212N	OP PRO EST PT E&M LVLII 10M NC	01/01/18	226.59
366499213	OP PRO ESTB PT E&M LVL III 15M	01/01/18	340.15
366499213N	OP PRO EST PT E&M LVL111 15M N	01/01/18	340.15
366499214	OP PRO ESTB PT E&M LVL IV 25M	01/01/18	566.69
366499215	OP PRO ESTB PT E&M LVL V 40+M	01/01/18	906.26
366499221	INP ESTB PT E&M LVL 15 MN	01/01/18	114.14
366499221N	INP ESTB PT E&M LVL 15MIN N/C	01/01/18	113.72
366499222	INP ESTB PT E&M LVL II 10MN	01/01/18	227.69
366499222N	IP EST PT E&M LVL 2 10MN NC	01/01/18	227.38
366499223	INP ESTB PT E&M LVL III 15 MN	01/01/18	341.25
366499223N	IP ESTB PT E&M LVL 3 15MN NC	01/01/18	341.04
366499224	INP ESTB PT E&M LVL IV 25 MN	01/01/18	568.89
366499225	INP ESTB PT E&M LVL V 40+MN	01/01/18	909.56
366499231	SUBSEQUENT HOSPITAL CARE LVL 1	01/01/18	114.14
366499231N	SUBSEQUENT HOSP CARE LVL 1 NC	01/01/18	113.72
366499232	SUBSEQUENT HOSPITAL CARE LVL 2	01/01/18	227.69
366499232N	SUBSEQUENT HOSP CARE LVL 2 NC	01/01/18	227.38
366499233	SUBSEQUENT HOSPITAL CARE LVL 3	01/01/18	341.25
366499233N	SUBSEQUENT HOSP CARE LVL 3 NC	01/01/18	341.04
366499238	HOSPITAL DISCH SUMMARY 30MINS	01/01/18	568.89
366499238N	DISCHARGE SUMMARY < 30MIN	01/01/18	568.89
366499239	HOSPITAL DISCH SUMMARY >30 MIN	01/01/18	584.33
366499239N	DISCHARGE SUMMARY >30MIN	01/01/18	584.33
366499241	OP PRO CONSULT LVL I 15M	01/01/18	340.15
366499241N	OP PRO CONSLT LVL I 15M NC	01/01/18	340.15
366499242	OP PRO CONSULT LVL II 30M	01/01/18	679.72
366499242N	OP PRO CONSLT LVL II 30M NC	01/01/18	679.72
366499243	OP PRO CONSULT LVL III 40M	01/01/18	906.26
366499243N	OP PRO CONSLT LVL III 40M NC	01/01/18	906.26

Procedure ID	Description	Effective Date	Charge
366499244	OP PRO CONSULT LVL IV 60M	01/01/18	1359.38
366499245	OP PRO CONSULT LVL V 80+M	01/01/18	1811.99
366499251	INP CONSULT LVL I 15 MN	01/01/18	341.25
366499251N	INP CONSULT LVL 1 15 MN NC	01/01/18	341.04
366499252	INP CONSULT LVL II 30 MN	01/01/18	682.45
366499252N	INP CONSULT LVL 2 30 MN NC	01/01/18	682.08
366499253	INP CONSULT LVL III 40 MN	01/01/18	909.56
366499253N	INP CONSULT LVL 3 40 MN NC	01/01/18	909.46
366499254	INP CONSULT LVL IV 60 MN	01/01/18	1364.37
366499255	INP CONSULT LVL V 80+MN	01/01/18	1819.13
366499401	PREVENTIVE MEDICINE COUNSELING	01/01/18	203.44
366499441	TELEPHONE EVAL AND MGMT	01/01/18	140.60
366551001	TAXI TRANSPORT ONE WAY-1	01/01/18	44.10
366551002	TAXI TRANSPORT ONE WAY-2	01/01/18	132.30
366551003	TAXI TRANSPORT ONE WAY-3	01/01/18	214.99
366552001	AMBULETTE TRANSPORT ONE WAY-1	01/01/18	187.43
366552002	AMBULETTE TRANSPORT ONE WAY-2	01/01/18	237.04
366552003	AMBULETTE TRANSPORT ONE WAY-3	01/01/18	214.99
366553001	AMBULANCE TRANSPORT ONE WAY-1	01/01/18	826.88
366553002	AMBULANCE TRANSPORT ONE WAY-2	01/01/18	1515.94
366553003	AMBULANCE TRANSPORT ONE WAY-3	01/01/18	1929.38
366554000	TRANSPORTATION COORDINATION	01/01/18	55.13
366562367	ELECT ANALYSIS IMP PUMP	01/01/18	422.84
366562368	ELECT ANAL OF PUMPW REPRO	01/01/18	422.84
366595990	REFILL/MAINT IMPLANT PUMP	01/01/18	462.53
366599201	OPD NEW PT E&M LEVEL 1 10 MNS	01/01/18	186.90
366599202	OPD NEW PT E&M LEVEL II 20 MN	01/01/18	317.00
366599203	OPD NEW PT E&M LEVEL III 30 MN	01/01/18	462.53
366599204	OPD NEW PT E&M LEVEL IV 45 MN	01/01/18	694.58
366599205	OPD NEW PT E&M LEVEL V 60+MN	01/01/18	870.98
366599211	OPD ESTB PT E&M LEVEL I 5 MN	01/01/18	165.95
366599212	OPD ESTB PT E&M LEVEL II 10 MN	01/01/18	192.94
366599213	OPD ESTB PT E&M LVL III 15 MN	01/01/18	302.66
366599214	OPD ESTB PT E&M LVL IV 25 MN	01/01/18	453.13
366599215	OPD ESTB PT E&M LVL V 40+MN	01/01/18	610.26
366599241	OPD CONSULT LVL I 15 MN	01/01/18	248.06
366599242	OPD CONSULT LVL II 30 MN	01/01/18	453.13
366599243	OPD CONSULT LVL III 40 MN	01/01/18	619.08
366599244	OPD CONSULT LVL IV 60 MN	01/01/18	896.33
366599245	OPD CONSULT LVL V 80+ MN	01/01/18	1105.81
368529003	EEG- AWAKE	01/01/18	426.67

Procedure ID	Description	Effective Date	Charge
368529004	EEG-AWAKE & ASLEEP	01/01/18	442.10
369013001	PSYCHOLOGICAL EVAL/60 MIN	01/01/18	422.84
369013008	PSYCH EVAL INITIAL	01/01/18	651.05
369013026	PREPARATION OF REP 1/2	01/01/18	325.82
369013031	ENVIRONMETAL INTERV 30MIN	01/01/18	285.02
369013040	NEUROPSYCH TESTING IP/HR	01/01/18	422.84
369013090	TCC CONFERENCE 15 MIN N/C	01/01/18	132.88
369013105	PSYCH INTER TX20-30M IP	01/01/18	203.44
369013112	PSYCH SCREEN PER HOUR	01/01/18	285.02
369013113	DEVELOPTL TESTING	01/01/18	285.02
369013116	GROUPTX	01/01/18	147.21
369013119	PARENT INFORMING/CONF	01/01/18	285.02
369013152	INITIAL HOSP.CARE LEVEL 1	01/01/18	278.41
369013153	INITIAL HOSP.CARE LEVEL 2	01/01/18	462.53
369013154	INITIAL HOSP.CARE LEVEL 3	01/01/18	643.34
369013155	F/UP HOSP.CARE LEVEL 1	01/01/18	140.60
369013156	F/UP HOSP.CARE LEVEL 2	01/01/18	229.90
369013157	F/UP HOSP.CARE LEVEL 3	01/01/18	325.82
369013162	RECORD REVIEW 30 MIN	01/01/18	132.88
369513004	LEVEL IV OPD NEW PT 45 MIN:ORTHOPEDICS	01/01/18	730.43
375097802	MEDICAL NUTRITION THERAPY ASSE	01/01/18	125.16
375097803	MEDICAL NUTRITION THERAPY RE -	01/01/18	112.46
375097804	MEDICAL NUTRITION THERAPY GROU	01/01/18	63.95