

Description	Charge
HC INCISION & DRAINAGE OF ABSCESS	\$222.00
HC SKIN BIOPSY	\$247.00
HC CHEMICAL CAUTERIZATION, GRAN TISSUE	\$120.00
HC INJECTION;SINGLE TENDON OR LIGAMENT	\$247.00
HC INJECTION- 1-2 MUSCLES	\$269.00
HC INJECTION- 3+ MUSCLES	\$269.00
HC ARTHROCENTESIS SMALL JOINT OR BURSA	\$106.00
HC ARTHROCENTESIS SMALL JOINT W/US	\$788.00
HC ARTHROCENTESIS INTERMED JOINT/BURSA	\$188.00
HC ARTHROCENTESIS INTERMED JOINT W/US	\$913.00
HC ARTHROCENTESIS MAJOR JOINT OR BURSA	\$260.00
HC ARTHROCENTESIS MAJOR JOINT W/US	\$974.00
HC CAST- LONG ARM- 15 MIN	\$172.00
HC CAST- SHORT ARM- 15 MIN	\$155.00
HC SPLINTING - LONG ARM	\$172.00
HC SPLINT- SHORT ARM- 15 MIN	\$155.00
HC SPLINTING - FINGER	\$114.00
HC STRAPPING/TAPING THORAX	\$114.00
HC STRAPPING/TAPING ELBOW/WRIST 15M	\$111.00
HC STRAPPING/TAPING HAND/FINGER 15M	\$111.00
HC LONG LEG CAST	\$154.00
HC CYLINDER CAST 15 MIN	\$134.00
HC SHORT LEG CAST 15 MIN	\$125.00
HC SHORT LEG CAST 15 MIN BILATERAL	\$252.00
HC CAST/ SHORT LEG FIBERGLASS	\$359.00
HC SHORT LEG CAST WALKING TYPE	\$125.00
HC SPLINTING LONG LEG 15 MIN	\$134.00
HC SPLINTING SHORT LEG 15 MIN	\$114.00
HC STRAPPING/TAPING HIP 15 MIN	\$114.00
HC STRAPPING/TAPING KNEE 15 MIN	\$114.00
HC STRAPPING/TAPING ANKLE 15 MIN	\$111.00
HC STRAPPING/TAPING TOES 15 MIN	\$111.00
HC UNLISTED CASTING/STRAPPING 15 MIN	\$114.00
HC INTRACATHETER BLOOD DRAWS	\$282.00
HC VENIPUNCTURE- NON ROUTINE	\$96.00
HC VENIPUNCTURE	\$82.00
HC GASTROSTOMY, CHANGE OF TUBE	\$255.00
HC REMOVAL OF GASTROSTOMY TUBE	\$225.00
HC CATHERIZATION- INSERTION OF SPT	\$161.00
HC CATHERIZATION- SIMPLE	\$99.00
HC CATHERIZATION- COMPLEX	\$161.00
HC VOIDING PRESSURE STUDIES COMBINED	\$1,156.00
HC UROFLOW- CALIBRATED	\$369.00
HC EMG- ANAL OR URETHRAL SPHINTER	\$654.00
HC INTRA ABDOMINAL VOIDING	\$738.00
HC LUMBAR PUNCTURE	\$540.00
PR LUMBAR PUNCTURE (PRO FEE)	\$301.00
HC IMPLANTED PUMP-W/O REPROGRAMMING	\$540.00
PR IMPLANTED PUMP-W/O REPROGR (PROFEE)	\$540.00
HC IMPLANTED PUMP- W/ REPROGRAMMING	\$842.00
HC PUMP W/ REPROGRAMMING, BOLUS	\$1,388.00
PR IMPLANTED PUMP- W/REPROGR (PROFEE)	\$842.00
HC IMPLANTED PUMP-W/REPROGRAM & REFILL	\$970.00

Description	Charge
HC IMPLANT PUMP-W/REPROGRAM,REFILL MD	\$970.00
HC PUMP W/ REPROGRAMMING, REFILL BOLUS	\$1,516.00
PR IMPLANT PUMP-W/REPROGR/REFLL(PRFEE)	\$970.00
HC INJECTION, ANESTHETIC; OCCIPITAL NV	\$632.00
HC INJECT ANESTHETIC PERIPHERAL NERVE	\$269.00
HC BOTULINUM TOXIN PROC PAROTID, BILAT	\$406.00
HC BOTULINUM TOXIN PROC PAROTID,SINGLE	\$287.00
HC BOTULINUM TOXIN PROC BILAT FACE	\$562.00
HC BOTULINUM TOXIN PROC FACIAL	\$311.00
HC BOTULINUM TOXIN PROC TRIGEM BILAT	\$562.00
HC CHEMODENERVATION NECK UNILATERAL	\$311.00
HC CHEMODENERVATION NECK BILATERAL	\$562.00
HC SOMATIC NERVE DESTRUCTION	\$269.00
HC CHEMODENERVATION 1 EXRMTY; 1-4 MSCL	\$311.00
HC CHEMODENERVATION ADD'L EXTRMTY;1-4	\$250.00
HC CHEMODENERVATION 1 EXRMTY; 5+ MSCLS	\$337.00
HC CHEMODENERVATION ADD'L EXTRMTY;5+	\$250.00
HC CHEMODENERVATION TRUNK 1-5 MUSCLES	\$311.00
HC CHEMODENERVATION TRUNK 6+ MUSCLES	\$562.00
HC FACIAL BONES; < 3 VIEWS	\$231.00
HC NASAL	\$224.00
HC SKULL X-RAY	\$206.00
HC MRI; BRAIN W/CONTRAST	\$2,708.00
HC RADIOLOGIC EXAM, CHEST; SINGLE VIEW	\$302.00
HC RADIOLOGIC EXAM, CHEST; TWO VIEWS	\$302.00
HC RADIOLOGIC EXAM, CHEST, 3 VIEWS	\$391.00
HC RADIOLOGIC EXAM, CHEST, 4 OR MORE	\$480.00
HC RIBS UNILATERAL, 2 VIEWS	\$318.00
HC RIBS BILATERAL, 3 VIEWS	\$350.00
HC SPINE ENTIRE, AP/LATERAL	\$383.00
HC SPINE SINGLE VIEW	\$350.00
HC CERVICAL SPINE, 2-3 VIEWS	\$318.00
HC CERVICAL SPINE, MINIMUM 4 VIEWS	\$350.00
HC CERVICAL SPINE, 6 OR MORE VIEWS	\$350.00
HC RADIOLOGIC EXAM, T-SPINE;2 VIEWS	\$359.00
HC RADIOLOGIC EXAM, T-SPINE;3 VIEWS	\$359.00
HC RADIOLOGIC EXAM, T-SPINE;4+ VIEWS	\$614.00
HC THORACOLUMBAR 2 VIEWS	\$350.00
HC ENTIRE SPINE (SCOLIOSIS EVAL); 1 VIEW; AP ONLY	\$243.00
HC ENTIRE SPINE; 2-3 VIEWS	\$297.00
HC ENTIRE SPINE; 4-5 VIEWS	\$350.00
HC ENTIRE SPINE; MINIMUM 6 VIEWS	\$404.00
HC LUMBAR SPINE, 2-3 VIEWS	\$350.00
HC LUMBAR SPINE, 4 VIEW MINIMUM	\$601.00
HC RADIOLOGIC EXAM, PELVIS 1-2 VIEWS	\$350.00
HC SACRUM AND COCCYX; TWO VIEWS	\$350.00
HC CLAVICLE	\$224.00
HC SCAPULA	\$318.00
HC SHOULDER; COMPLETE MINIMUM 2 VIEWS	\$318.00
HC BILAT SHOULDER; COMPLETE MINIMUM 2 VIEWS	\$437.00
HC RADIOLOGIC EXAM, HUMERUS; TWO VIEWS LT	\$318.00
HC ELBOW; 2 VIEWS	\$312.00
HC BILAT ELBOW; 2 VIEWS	\$437.00

Description	Charge
HC RADIOLOGIC EXAM, ELBOW; 3+ VIEWS LT	\$318.00
HC RADIOLOGIC EXAM, ELBOW; 3+ VIEWS RT	\$318.00
HC RADIOLOGIC EXAM, FOREARM; TWO VIEWS LT	\$224.00
HC RADIOLOGIC EXAM, FOREARM; TWO VIEWS RT	\$224.00
HC WRIST; 2 VIEWS	\$318.00
HC RADIOLOGIC EXAM, WRIST 3+ VIEWS LT	\$376.00
HC RADIOLOGIC EXAM, WRIST 3+ VIEWS RT	\$376.00
HC HAND; 2 VIEWS	\$224.00
HC HAND 3+ VIEWS LT	\$376.00
HC HAND 3+ VIEWS RT	\$376.00
HC BILAT HAND 3+ VIEWS	\$492.00
HC RADIOLOGIC EXAM,FINGER(S);2 VIEWS LT	\$224.00
HC RADIOLOGIC EXAM,FINGER(S);2 VIEWS RT	\$224.00
HC RADIOLOGIC EXAM, HIP; ONE VIEW	\$224.00
HC HIP W/PELVIS 2-3 VIEWS	\$376.00
HC HIPS, BILATERAL WITH PELVIS; 2 VIEWS	\$614.00
HC HIPS, BILATERAL WITH PELVIS; 3-4 VIEWS	\$819.00
HC FEMUR, 1 VIEW	\$318.00
HC FEMUR - 2 VIEWS	\$383.00
HC BILAT FEMUR - 2 VIEWS	\$601.00
HC RADIOLOGIC EXAM,KNEE; 1 OR 2 VIEWS LT	\$318.00
HC RADIOLOGIC EXAM,KNEE; 1 OR 2 VIEWS RT	\$318.00
HC RADIOLOGIC EXAM,KNEE; 1 OR 2 VIEWS BILATERAL	\$437.00
HC KNEE - 3 VIEWS	\$399.00
HC BILAT KNEE - 3 VIEWS	\$518.00
HC BILAT KNEE, COMPLETE, 4 OR MORE VIEWS	\$601.00
HC TIBIA & FIBULA, 2 VIEWS	\$224.00
HC BILATERAL - TIBIA & FIBULA, 2 VIEWS	\$300.00
HC LOWER EXTREMITY, INFANT, 2 VIEWS	\$318.00
HC ANKLE, 2 VIEWS	\$318.00
HC BILAT ANKLE, 2 VIEWS	\$437.00
HC ANKLE, 1 VIEW	\$196.00
HC RADIOLOGIC EXAM,ANKLE 3+ VIEWS LT	\$376.00
HC RADIOLOGIC EXAM,ANKLE 3+ VIEWS RT	\$376.00
HC BILAT ANKLE, MINIMUM 3 VIEWS	\$546.00
HC FOOT, 2 VIEWS	\$318.00
HC BILAT FOOT, 2 VIEWS	\$437.00
HC FOOT, COMPLETE, MINIMUM 3 VIEWS	\$224.00
HC BILAT FOOT, COMPLETE, MINIMUM 3 VIEWS	\$376.00
HC HEEL, 2 VIEWS	\$318.00
HC TOE(S) MINIMUM OF 2 VIEWS	\$318.00
HC RADIOLOGIC EXAM, ABDOMEN, 1 VIEW	\$302.00
HC RADIOLOGIC EXAM, ABDOMEN, 2 VIEWS	\$318.00
HC RADIOLOGIC EXAM, COMPLETE DECUB/ERE	\$318.00
HC RADIOLOGIC EXAM, ABDOMEN, 3 OR MORE	\$318.00
HC RADIOLOGIC EXAM, ABDOMEN COM SERIES	\$427.00
HC CARDIAC MRI FOR MORPH AND FUNCTION	\$1,959.00
HC SHUNTOGRAM; NONVASCULAR SHUNT	\$350.00
HC INTRAVASCULAR ULTRASOUND;1ST VESSEL	\$225.00
HC INTRAVASCULAR ULTRASOUND;EA VESSEL	\$112.00
HC ULTRASOUND, RENAL, COMPLETE	\$579.00
HC ULTRASOUND, EXTREMITY, COMPLETE	\$465.00
HC ULTRASOUND LIMITED ANATOMIC SPCIFIC	\$134.00

Description	Charge
HC ULTRASOUND, ULTRASONIC GUIDANCE	\$779.00
HC ULTRASOUND GUIDANCE 2ND PHYSICIAN	\$779.00
HC ULTRASOUND STUDY FOLLOW UP	\$385.00
HC BONE AGE STUDIES	\$224.00
HC BONE LENGTH STUDY, SCANOGRAM	\$360.00
HC COMPLETE OSSEOUS SURVEY; AXIAL SKEL	\$350.00
HC DEXA SCAN BONE DENSITY;AXIAL SKELET	\$659.00
HC DEXA SCAN BONE DENSITY;APPENDICULAR	\$410.00
HC BONE DENSITY STUDY; WHOLE BODY	\$816.00
HC RSV, ANTIBODY IM 50 MG EACH	\$2,811.00
HC IMMUNIZATION ADMIN, 1 VACCINE	\$27.00
HC PNEUMOCOCCAL VACCINE, 13 VALENTS	\$163.00
HC FLU VACCINE,PF, INFLUENZA <3YRS	\$32.00
HC FLU VACCINE,PF, INFLUENZA VIRUS	\$32.00
HC DTAP, PT OVER 7, IM	\$70.00
HC PNEUMOCOCCAL VACCINE, 23 VALENTS	\$82.00
HC ZOSTER VACCINE (LIVE)	\$197.00
HC INTERACTIVE COMPLEXITY	\$193.00
HC DIAGNOSTIC EVALUATION 120 MINUTES	\$1,396.00
HC DIAGNOSTIC EVALUATION 90 MINUTES	\$1,048.00
HC DIAGNOSTIC EVALUATION 60 MINUTES	\$699.00
HC DIAGNOSTIC EVALUATION 30 MINUTES	\$349.00
HC DIAGNOSTIC EVAL W/MED ASSESS 120	\$1,460.00
HC DIAGNOSTIC EVAL W/MED ASSESS 90 MIN	\$1,111.00
HC DIAGNOSTIC EVAL W/MED ASSESS 60MIN	\$761.00
HC PSYCHOTHERAPY 30 MINUTES	\$229.00
PR PSYCHOTHERAPY 30 MINUTES (PRO FEE)	\$138.00
HC PSYCHOTHERAPY W/E&M 30 MINUTES	\$193.00
HC PSYCHOTHERAPY 45 MINUTES	\$359.00
PR PSYCHOTHERAPY 45 MINUTES (PRO FEE)	\$215.00
HC PSYCHOTHERAPY W/E&M 45 MINUTES	\$257.00
HC PSYCHOTHERAPY 60 MINUTES	\$460.00
PR PSYCHOTHERAPY 60 MINUTES (PRO FEE)	\$276.00
HC PSYCHOTHERAPY W/E&M 60 MINUTES	\$352.00
HC PSYCHOTHERAPY FOR CRISIS 1ST 60 MIN	\$668.00
HC PSYCHOTHERAPY FOR CRISIS ADD'L 30M	\$335.00
HC FAMILY THERAPY W/O PT 50 MIN	\$461.00
PR FAMILY THERAPY W/O PATIENT 50 MIN (PRO FEE)	\$276.00
HC FAMILY THERAPY W/PT 50 MIN	\$461.00
PR FAMILY THERAPY W /PATIENT 50 MIN (PRO FEE)	\$294.00
HC MULTI FAMILY THERAPY 60 MINUTES	\$302.00
HC MULTI FAMILY THERAPY 90 MINUTES	\$454.00
HC MULTI FAMILY THERAPY 120 MINUTES	\$601.00
HC GROUP THERAPY - 30 MIN	\$151.00
HC GROUP THERAPY - 60 MIN	\$302.00
HC GROUP THERAPY - 90 MIN	\$454.00
HC EVALUATION OF RECORDS & REPORTS	\$172.00
PR MEDICAL RECORD REVIEW	\$399.00
PR GASTROESOPHAGEAL REFLUX TEST	\$434.00
HC ENEMA ADMIN & TRAINING	\$260.00
HC SPEECH & LANGUAGE TREATMENT- 15 MIN	\$111.00
HC SPEECH & LANGUAGE GROUP TX 15 MIN	\$92.00
HC LARYNGEAL FUNCTION STUDIES 15 MIN	\$166.00

Description	Charge
HC SPEECH FLUENCY EVALUATION 15 MIN	\$201.00
HC SPEECH SOUND PRODUCTION EVAL 15 MIN	\$201.00
HC SPEECH PRODUCTION W/LANG EVAL 15MIN	\$201.00
HC QUALITATIVE ANALYSIS OF VOICE	\$201.00
HC OT TX OF SWALLOWING DYSFUNCTION	\$111.00
HC TYMPANOMETRY & REFLEX THRESHOLD MEASUREME	\$86.00
HC AUDIOLOGY SCREEN	\$182.00
HC SPEECH AUDIOMETRY THRESHOLD	\$86.00
HC SPEECH AUDIOMETRY THRESHOLD, W/SPEECH RECC	\$159.00
HC AUDIOLOGY EVAL	\$557.00
HC EVOKED OTOACOUSTIC EMISSIONS,SCREEN	\$66.00
HC TYMPANOMETRY	\$78.00
HC ACOUSTIC REFLEX TESTING THRESHOLD	\$78.00
HC VISUAL REINFORCEMENT AUDIOMETRY	\$175.00
HC CONDITIONING PLAY AUDIOMETRY	\$261.00
HC AEP	\$1,241.00
HC EVOKED OTOACOUSTIC EMISSIONS, LIMITED	\$92.00
HC EVOKED OTOACOUSTIC EMISSIONS, COMP	\$182.00
HC HEARING AID EXAM - MONAURAL	\$218.00
HC HEARING AID EXAM - BINAURAL	\$218.00
HC HEARING AID CHECK;MONAURAL	\$383.00
HC HEARING AID CHECK;BINAURAL	\$383.00
HC ELECTROACOUSTIC ANALYSIS- MONAURAL	\$130.00
HC ELECTROACOUSTIC ANALYSIS- BINAURAL	\$193.00
HC DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, PT <	\$620.00
HC SUBSEQUENT REPROGRAM, COCHLEAR IMPLANT, PT	\$371.00
HC DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, PT >=	\$557.00
HC SUBSEQUENT REPROGRAMMING, COCHLEAR IMPLAN	\$318.00
HC EVAL NON SPEECH DEVICE;FIRST HR	\$866.00
HC NSGD TX SVC INCL PROGRAMMING 15 MIN	\$114.00
HC AUG COMM SPCH GEN DEV, EVAL 1ST HR	\$866.00
HC EVAL SPEECH DEVICE;ADD'L 1/2 HOUR	\$432.00
HC SGD TX SVC INCL PROGRAMMING 15 MIN	\$104.00
HC EVAL ORAL SWALLOW FUNCTION 15 MIN	\$166.00
HC EVAL NON SPEECH DEVICE;ADD'L 1/2 HR	\$432.00
HC CENTRAL AUDITORY EVALUATION; 60 MIN	\$667.00
HC CENTRAL AUDITORY EVAL (BRIEF)	\$233.00
HC CENTRAL AUDITORY EVAL; ADD'L 15 MIN	\$142.00
HC EVAL OF AURAL REHAB, FIRST HOUR	\$671.00
HC AURAL REHAB EVAL EA ADD'L 15 MIN	\$158.00
HC AURAL REHABILITATION	\$226.00
HC AURAL REHAB, PRELINGUAL HEAR LOSS	\$111.00
HC AURAL REHAB, POSTLINGUAL HEAR LOSS	\$111.00
HC ELECTROCARDIOGRAM W/AT LEAST 12 LDS	\$160.00
HC ECG; INTERPRETATION & REPORT ONLY	\$83.00
HC HOLTER MONITOR UP TO 48 CONTININOUS	\$604.00
HC HOLTER MONITOR <12HR-HOLTER MONITOR	\$604.00
HC ECG HR-HOLTER PHYSICIAN REVIEW ONLY	\$159.00
HC ECHOCARDIOGRAPHY CONGENITAL;COMPLET	\$677.00
HC ECHOCARDIOGRAPHY CONGENITAL;LIMITED	\$473.00
HC ECHO TTE/DOPPLER/COLOR FLOW	\$1,214.00
PR ECHO TTE/DOPPLER/COLOR FLOW PRO FEE	\$357.00
HC ECHO TTE/NO DOPPLER/NO COLOR	\$810.00

Description	Charge
HC ECHOCARDIOGRAPHY DOPPLER	\$269.00
HC ECHOCARDIOGRAPHY DOPPLER COLOR FLOW	\$269.00
HC SPIROMETRY	\$210.00
HC REST/EXERCISE METABOLIC ASSESSMENT	\$297.00
HC RESTING METABOLIC ASSESSMENT	\$237.00
HC POLYSOMNOGRAM 4+ PARMS;<6	\$4,005.00
HC POLYSOMNOGRAM 4+ PARMS CPAP; <6	\$4,330.00
HC ACTIGRAPHY TESTING	\$422.00
HC MULTIPLE SLEEP LATENCY	\$1,848.00
HC POLYSOMNOGRAM 1-3 PARMS	\$3,094.00
HC POLYSOMNOGRAM 1-3 PARMS REDUCED SVC	\$836.00
HC POLYSOMNOGRAM 4+ PARMS;6 +	\$4,004.00
HC POLYSOMNOGRAM 4+ PARMS;6 + REDUCED	\$2,374.00
HC POLYSOMNOGRAM 4+ PARMS CPAP; 6 +	\$4,330.00
HC EEG - EXTENDED MONITORING UP TO 60M	\$1,235.00
PR EEG - EXT MONITORING 60 MIN PRO FEE	\$282.00
HC EEG - EXTENDED MONITORING (>60 MIN)	\$2,598.00
PR EEG - EXT MONITORING >60 MN PRO FEE	\$487.00
HC EEG RECORDING - AWAKE & DROWSY	\$1,060.00
PR EEG - AWAKE & DROWSY PRO FEE	\$253.00
HC EEG RECORDING - AWAKE & ASLEEP	\$1,223.00
PR EEG - AWAKE & SLEEP >60 MIN PRO FEE	\$253.00
HC EEG - COMA OR SLEEP	\$1,182.00
PR EEG - COMA OR SLEEP PRO FEE	\$224.00
HC EEG - ALL NIGHT SLEEP ONLY	\$3,614.00
PR EEG - ALL NIGHT SLEEP ONLY PRO FEE	\$562.00
HC MANUAL MUSCLE TEST W/O HANDS	\$247.00
HC MANUAL MUSCLE TEST W/HANDS	\$282.00
HC EMG - 1 EXTREMITY	\$497.00
HC EMG - 2 EXTREMITIES	\$579.00
HC EMG - 3 EXTREMITIES	\$671.00
HC EMG - 4 EXTREMITIES	\$779.00
HC EMG-CRANIAL NERVE MUSCLES UNILATERL	\$378.00
HC EMG-CRANIAL NERVE MUSCLES BILATERAL	\$497.00
HC EMG - THORACIC PARASPINAL MUSCLES	\$378.00
HC EMG - OTHER THAN PARASPINAL	\$378.00
HC EMG-QUANTITATIVE MEASUREMENT	\$497.00
HC E-STIM GUIDANCE OF INJECTION	\$105.00
HC EMG GUIDANCE OF INJECTION	\$105.00
HC EMG, W/PARASPINAL AREAS LIMITED	\$378.00
HC EMG, W/PARASPINAL AREAS COMPLETE	\$675.00
HC EMG, NON EXTREMITY	\$497.00
HC NERVE CONDUCTION STUDIES; 1-2	\$205.00
HC NERVE CONDUCTION STUDIES; 3-4	\$226.00
HC NERVE CONDUCTION STUDIES; 5-6	\$245.00
HC NERVE CONDUCTION STUDIES; 7-8	\$263.00
HC NERVE CONDUCTION STUDIES; 9-10	\$284.00
HC NERVE CONDUCTION STUDIES; 11-12	\$301.00
HC NERVE CONDUCTION STUDIES;>12	\$322.00
HC SOMATOSENSORY EVOKED POTENTIAL UL	\$562.00
HC SOMATOSENSORY EVOKED POTENTIAL LL	\$562.00
HC SOMATOSENSORY EVOKED POTENTIAL TR	\$562.00
HC TRANSCRANIAL MOTOR STIMULATION UL	\$1,124.00

Description	Charge
HC TRANSCRANIAL MOTOR STIMULATION LL	\$1,124.00
HC VISUAL EVOKED POTENTIAL	\$527.00
HC ORBICULARIS OCULI REFLEX	\$331.00
HC NEUROMUSCULAR JUNCTN TEST EACH NERVE	\$331.00
PR EEG - CEREBRAL SEIZURE 8 CHANNEL	\$610.00
HC EEG FOR CEREBRAL SEIZURE (VIDEO)	\$4,386.00
HC EEG CEREBRAL SEIZURE (VIDEO) <12HR	\$2,374.00
PR EEG - CEREBRAL SEIZURE VIDEO PRO FEE	\$1,035.00
PR EEG - CEREBRAL SEIZURE PRO FEE	\$527.00
HC EEG - DIGITAL ANALYSIS	\$781.00
PR EEG - DIGITAL ANALYSIS PRO FEE	\$422.00
HC VNS;ELECTRONIC ANALYSIS;PROGRAMMING	\$137.00
HC VNS;COMPLEX CRANIAL NEUROSTIM<1HR	\$137.00
HC ELEC ANALYSIS W/ COMPLEX PROG OF IMP. CRANIAL	\$246.00
HC REFILL-IMPLANTABLE PUMP	\$134.00
HC REFILL-IMPLANTABLE PUMP/ PHYSICIAN	\$134.00
PR REFILL-IMPLANTABLE PUMP/ (PROFEE)	\$134.00
HC MOTION ANALYSIS BY VIDEO AND 3D	\$142.00
HC MOTION ANALYSIS W/PRESSURE MEASURE	\$177.00
HC GENETIC COUNSELING SERVICES	\$398.00
HC EVALUATION APHASIA 60 MINUTES	\$563.00
HC DEVELOPMENTAL TEST ADMIN; 1ST HOUR	\$354.00
HC DEVELOPMENTAL TEST ADMIN; ADD'L 30 MIN	\$177.00
HC NEUROBEHAVIORAL STATUS EXAM PER HR	\$719.00
HC NEUROBEHAVIORAL STATUS; EACH ADD'L HOUR	\$719.00
HC STANDARD COGNITIVE PERF TEST 60 MIN	\$563.00
HC BRIEF EMOTIONAL/BEHAVIORAL ASSESS	\$122.00
HC PSYCHOLOGICAL TESTING EVAL; 1ST HOUR	\$448.00
HC PSYCHOLOGICAL TESTING EVAL; ADD'L HOUR	\$448.00
HC NEUROPSYCH TEST EVAL; 1ST HOUR	\$448.00
HC NEUROPSYCH TEST EVAL; EACH ADD'L HOUR	\$448.00
HC PSYCH/NEUROPSYCH TEST ADMIN; 1ST 30 MIN	\$224.00
HC PSYCH/NEUROPSYCH TEST ADMIN; ADD'L 30 MIN	\$224.00
HC PSYCH/NEURO TEST TECH 1ST 30 MINUTES	\$448.00
HC PSYCH/NEURO TEST TECH ADD'L 30 MINUTES	\$224.00
HC PSYCH/NEURO TEST; SINGLE AUTOMATED	\$159.00
HC HEALTH & BEHAVIOR ASSESSMENT 15 MIN	\$176.00
HC HEALTH & BEHAVIOR REASSESS 15 MIN	\$176.00
HC HLTH & BEHAVIOR MGMT;INDIVIDUAL TX	\$113.00
HC HLTH & BEHAVIOR MGMT;GROUP	\$78.00
HC HEALTH INTERVENTION FAMILY W/PT 15	\$122.00
HC HEALTH INTERVENTION FAM W/OUT PT 15	\$113.00
HC HLTH & BEHAVIOR MGMT;PT ASSESSMENT	\$84.00
HC HLTH & BEHAVIOR MGMT;CAREGVR ASSESS	\$84.00
HC INFUSION ADMINISTRATION 1ST HR	\$320.00
HC INFUSION ADMINISTRATION EA ADD'L HR	\$280.00
HC INFUSION ADMIN ADD'L SEQUENTIAL	\$134.00
HC INJECTION;THERAPEUTIC IM OR SUBQ	\$40.00
HC IV PUSH, SINGLE OR INITIAL DRUG	\$138.00
HC APPLICATION OF HOT/COLD PACKS	\$87.00
HC PT E-STIM UNATTENDED 15 MIN	\$112.00
HC PT- E-STIM, WOUND CARE UNATTENDED	\$140.00
HC PT- PARAFIN BATH	\$87.00

Description	Charge
HC PT- E-STIM, DIRECT 15 MIN	\$140.00
HC PT- IONTOPHORESIS, 15 MIN	\$140.00
HC PT- ULTRASOUND, 15 MIN	\$140.00
HC PT- UNLISTED MODALITY, 15 MIN	\$140.00
HC PT- THERAPEUTIC PROCEDURE, 15 MIN	\$111.00
HC PT NEUROMUSCULAR REEDUCATION 15 MIN	\$111.00
HC PT AQUATIC THERAPY, EA 15 MINUTES	\$160.00
HC GAIT TRAINING 15 MIN	\$140.00
HC LOCOMOTOR TRAINING	\$160.00
HC PT MASSAGE 15 MINUTES	\$111.00
HC OT THERAPEUTIC COGNITIVE SKILLS	\$111.00
HC UNLISTED PROCEDURE 15 MIN	\$111.00
HC PT MANUAL THERAPY, 15 MIN	\$111.00
HC PT THERAPEUTIC PROC, GROUP 15 MIN	\$92.00
HC PT AQUATIC THERAPY, GROUP 15 MIN	\$143.00
HC PT EVAL; LOW COMPLEXITY	\$389.00
HC PT EVAL; MOD COMPLEXITY	\$722.00
HC PT EVAL; HIGH COMPLEXITY	\$1,055.00
HC PT REEVALUATION	\$722.00
HC OT EVAL; LOW COMPLEXITY	\$389.00
HC OT EVAL; MOD COMPLEXITY	\$722.00
HC OT EVAL; HIGH COMPLEXITY	\$1,055.00
HC OT REEVALUATION	\$722.00
HC THERAPEUTIC ACTIVITIES, 15 MIN	\$111.00
HC OT COGNITIVE SKILLS	\$111.00
HC COMMUNITY/ WORK REINT, 15 MIN	\$111.00
HC PT WHEELCHAIR MGMT 15 MIN	\$111.00
HC PT WHEELCHAIR EVALUATION/ASSESSMENT	\$166.00
HC DEBRIDEMENT SKIN,20 SQ CM OR LESS	\$116.00
HC DEBRIDEMENT;SKIN,SUBQ ADDL 20 SQ CM	\$57.00
HC ACTIVE WOUND CARE MANAGEMENT	\$116.00
HC ULTRASOUND WOUND ASSESSMENT	\$134.00
HC PT PHYSICAL PERFORMANCE TEST 15 MIN	\$166.00
HC PT ASSISTIVE TECH ASSESSMENT 15 MIN	\$166.00
HC PT ORTHOTIC MGMT/TRAIN INITIAL 15M	\$142.00
HC H/S OT ORTHOTIC MGMT/TRAIN INITIAL	\$142.00
HC PT PROSTHETIC MGMT/TRAIN INITIAL	\$111.00
HC PT ORTHO/PROSTHETIC MGMT/TRAIN F/U	\$111.00
HC PT- SPLINTING	\$155.00
HC NUTRITION EVALUATION (15 MINUTES)	\$146.00
HC NUTRITION ASSESSMENT (15 MINUTES)	\$109.00
HC NUTRITION THERAPY; GROUP (15 MIN)	\$89.00
HC ACUPUNCTURE, INITIAL 15 MINUTES	\$100.00
HC ACUPUNCTURE, ADD'L 15 MINUTES	\$69.00
HC ACUPUNCTURE, INITIAL 15 MIN E-STIM	\$105.00
HC ACUPUNCTURE, ADD'L 15 MIN W/E-STIM	\$77.00
PR VIDEO TAPE REVIEW/30 MIN PHONE CONS	\$399.00
HC MODERATE SEDATION; < 5 YRS ; 15 MIN	\$449.00
HC MODERATE SEDATION; >=5 YRS ; 15 MIN	\$449.00
HC MODERATE SEDATION; EA ADD'L 15 MIN	\$170.00
HC NEW PATIENT LEVEL 1	\$211.00
HC NEW PATIENT LEVEL 2	\$343.00
HC NEW PATIENT LEVEL 3	\$522.00

Description	Charge
HC NEW PATIENT LEVEL 4	\$752.00
HC NEW PATIENT LEVEL 5	\$1,069.00
HC ESTABLISHED LEVEL 1	\$172.00
HC ESTABLISHED LEVEL 2	\$211.00
HC ESTABLISHED LEVEL 3	\$344.00
HC ESTABLISHED LEVEL 4	\$522.00
HC ESTABLISHED LEVEL 5	\$752.00
PR ADMISSION INITIAL LEVEL 1	\$458.00
PR ADMISSION INITIAL LEVEL 2	\$590.00
PR ADMISSION INITIAL LEVEL 3	\$702.00
PR SUBSEQUENT HOSPITAL CARE - LEVEL 1	\$219.00
PR SUBSEQUENT HOSPITAL CARE - LEVEL 2	\$296.00
PR SUBSEQUENT HOSPITAL CARE - LEVEL 3	\$383.00
PR DISCHARGE DAY MANAGEMENT < 30 MIN	\$350.00
PR DISCHARGE DAY MANAGEMENT > 30 MIN	\$461.00
HC O/P CONSULT- LEVEL 1	\$263.00
HC O/P CONSULT- LEVEL 2	\$409.00
HC O/P CONSULT- LEVEL 3	\$539.00
HC O/P CONSULT- LEVEL 4	\$790.00
HC O/P CONSULT- LEVEL 5	\$1,119.00
PR INPATIENT CONSULT LEVEL 1	\$230.00
PR INPATIENT CONSULT LEVEL 2	\$331.00
PR INPATIENT CONSULT LEVEL 3	\$395.00
PR INPATIENT CONSULT LEVEL 4	\$508.00
PR INPATIENT CONSULT LEVEL 5	\$691.00
HC PROLONGED PHYSICIAN SVC 1ST HOUR	\$472.00
PR PROLONGED PHYSICIAN SVC 1ST HOUR	\$143.00
HC PROLONGED PHYS SVC EA ADD'L 30 MIN	\$196.00
PR PROLONGED PHYS SVC EA ADD'L 30 MIN	\$106.00
PR PROLONGED I/P SVC 1ST HR	\$615.00
HC DAY HOSPITAL RATE-FEEDING DISORDERS	\$2,229.00
HC 1/2 DAY RATE - FEEDING DISORDERS	\$1,119.00
HC LEUKOTAPE, PER ROLL	\$7.00
HC KINESIO TAPE, PER ROLL	\$12.00
HC OT KINESIOTAPE	\$11.00
HC GASTROSTOMY TUBE	\$133.00
HC ADD'L TUBE/BUTTON - GASTROSTOMY/JEJUNOSTOMY	\$176.00
HC PASSIVE MOTION DEVICE;EACH	\$31.00
HC CPM MACHINE KNEE ONLY	\$47.00
HC H/S PT ABDUCTION WEDGE	\$68.00
HC PT ABDUCTION WEDGE	\$68.00
HC ABDUCTION WEDGE	\$68.00
HC BACLOFEN IT (500 MCG/ML) PREFILLED SYRINGE 20ML	\$350.00
HC BACLOFEN IT (500 MCG/ML) PREFILLED SYRINGE 40ML	\$700.00
HC BACLOFEN IT (1000 MCG/ML) PREFILLED SYRINGE 20M	\$700.00
HC BACLOFEN IT (1000 MCG/ML) PREFILLED SYRINGE 40M	\$1,400.00
HC BACLOFEN IT (2000 MCG/ML) PREFILLED SYRINGE 20M	\$1,400.00
HC BACLOFEN IT (2000 MCG/ML) PREFILLED SYRINGE 40M	\$2,800.00
HC BOTULINUM TOXIN, PER UNIT	\$8.00
HC DYSPORT, PER 5 UNITS	\$9.00
HC MYOBLOC INJ, 5000/1ML	\$870.00
HC MYOBLOC INJ, 10000/2ML	\$1,324.00
HC INCOBOTULINUM TOXIN A, PER UNIT	\$6.00

Description	Charge
HC COSYNOTROPIN .25MG	\$120.00
HC FILGRASTIM INJECTION	\$246.00
HC GAMUNEX-C 5GM	\$85.00
HC GAMUNEX-C 10GM	\$85.00
HC GAMUNEX-C 20GM	\$43.00
HC IMMUNE GLOBULIN (VIVAGLOBIN)	\$273.00
HC GLUCAGON - 1MG	\$93.00
HC IBANDRONATE, 1 MG (BONIVA)	\$186.00
HC PAMIDRONATE PER 30 MG	\$63.00
HC TESTOSTERONE ENANTHATE,200MG PER ML	\$20.00
HC RECLAST, PER MG	\$340.00
HC ZOLEDRONIC ACID, PER MG	\$50.00
HC ORAL GLUCOSE SOLUTION	\$30.00
HC PHENOL CRYSTAL USP, PER 15 ML	\$105.00
HC ARGININE 10% - 500CC	\$17.00
HC DEHYDRATED ALCOHOL INJECTION (ETOH)	\$6.00
HC LEUPROLIDE - 1MG/.2ML	\$134.00
HC ASPEN COLLAR	\$225.00
HC MIAMI J COLLAR	\$225.00
HC SPINAL ORTHOTIC CUSHION	\$180.00
HC KNEE IMMOBILIZER, EACH	\$62.00
HC PT CAST BOOT, PER FOOT	\$21.00
HC UPPER LIMB ORTHOSIS NOS	\$155.00
HC PLATELETS, PHERESIS, EACH UNIT	\$619.00
HC SPLINT THUMB	\$12.00
PR MEDICAL CONFERENCE W/O FACE-TO-FACE	\$305.00
PR MEDICAL DAILY CHILD CARE	\$80.00
PR SERVICE COORD - INITIAL	\$500.00
PR SERVICE COORD - PERIODIC REV	\$275.00
PR SERVICE COORD - ONGOING	\$150.00
HC ISSUANCE/ORIENTATION	\$432.00
HC HEARING AID PERFORM ASSESS	\$383.00
HC REAL EAR MEASURES	\$218.00
HC HEARING AID DISPENSING FEE-BINAURAL	\$1,013.00
HC HEARING AID DISPENSING FEE-BI CROS	\$631.00
HC HEARING AID DISP FEE- MONAURAL	\$648.00
HC HEARING AID SERVICE	\$242.00
HC INT'L SELF-PAY DAY RATE 1 HOUR	\$761.00
HC STP DAY HOSPITAL RATE LEVEL 1	\$1,360.00
HC STP DAY HOSPITAL RATE LEVEL 2	\$1,896.00
HC STP DAY HOSPITAL RATE LEVEL 3	\$2,354.00
HC EDUCATION CONSULT	\$752.00
HC EDUCATIONAL TESTING, PER HOUR	\$312.00
HC EDUCATIONAL EVAL	\$1,870.00
HC EARLY INTERVENTION (PER HR)	\$210.00
HC DYAD EARLY INTERVENTION PER HOUR	\$105.00
HC PRE ADOPTION PARENT CONSULT 15 MIN	\$48.00
PR TELEPHONE - PSYCHIATRY CONSULT	\$159.00