

DESCRIPTION	Fee @ 01/01/2019
INCISION & DRAINAGE OF ABSCESS	\$209.00
NEEDLE ASPIRATION OF ABCESS,CYST	\$116.00
DEBRIDEMENT;INFCTD SKIN 10% OF BODY	\$83.00
DEBRIDEMENT;SKIN ADD'L 10% OF BODY	\$83.00
DEBRIDEMENT;SKIN,SUBQ 1ST 20 SQ CM	\$116.00
DEBRIDEMENT;SUBQ/MUSCLE 1ST 20 CM	\$152.00
DEBRIDEMENT;SKIN,SUBQ ADD'L 20 CM	\$116.00
DEBRIDEMENT;SKIN/SUBQ/MSCL ADD'L 20	\$152.00
PARING BENIGN HYPERKERATOTIC LESION	\$152.00
SKIN BIOPSY	\$233.00
DEBRIDEMENT OF NAIL- ONE-FIVE	\$85.00
DEBRIDEMENT OF NAIL- >=6	\$99.00
AVULSION OF NAIL PLATE;SINGLE	\$85.00
AVULSION OF NAIL PLATE;EA ADD'L	\$5.00
SUTURES - SIMPLE 2.5 CM OR LESS	\$116.00
DESTRUCTION OF LESION- FIRST	\$85.00
DESTRUCTION OF LESION- 2-14 (EACH)	\$5.00
DESTRUCTION OF LESION- >=15	\$171.00
DESTRUCTION BENIGN LESIONS UP TO 14	\$221.00
CHEMICAL CAUTERIZATION, GRAN TISSUE	\$113.00
INJECTION;SINGLE TENDON OR LIGAMENT	\$233.00
INJECTION- 1-2 MUSCLES	\$254.00
INJECTION- 3+ MUSCLES	\$254.00
ARTHROCENTESIS SMALL JOINT OR BURSA	\$100.00
ARTHROCENTESIS SMALL JOINT W/US	\$743.00
ARTHROCENTESIS INTERMED JOINT/BURSA	\$177.00
ARTHROCENTESIS INTERMED JOINT W/US	\$861.00
ARTHROCENTESIS MAJOR JOINT OR BURSA	\$245.00
ARTHROCENTESIS MAJOR JOINT W/US	\$919.00
TENOTOMY, ACHILLES TENDON	\$608.00
LONG BILATERAL ARM CAST- 15 MIN	\$322.00
CAST- LONG LEFT ARM- 15 MIN	\$162.00
OT LONG RIGHT ARM CAST- 15 MIN	\$162.00
OT SHORT BILATERAL ARM CAST- 15 MIN	\$294.00
CAST- SHORT LEFT ARM- 15 MIN	\$146.00
CAST- SHORT RIGHT ARM- 15 MIN	\$146.00
CAST; HAND & LOWER FOREARM (WRIST)	\$272.00
SPLINTING: LONG ARM, LT ARM	\$162.00
SPLINT- LONG RIGHT ARM- 15 MIN	\$162.00
SPLINT-SHORT LEFT ARM- 15 MIN	\$146.00
SPLINT- SHORT RIGHT ARM- 15 MIN	\$146.00
SPLINTING - FINGER	\$108.00
STRAPPING/TAPING THORAX 15 MIN	\$108.00

STRAPPING/TAPING LOW BACK	\$108.00
STRAPPING/TAPING LEFT SHOULDER- 15M	\$108.00
STRAPPING/TAPING SHOULDER, RT	\$108.00
OT STRAP/TAPE ELB/WRIST LT	\$105.00
STRAPPING/TAPING R ELBOW WRIST- 15M	\$105.00
STRAP/TAPE HAND/FINGER LEFT 15 MIN	\$105.00
STRAPPING/TAPING RT HAND/FINGER 15M	\$105.00
CAST/ LONG LEG FIBERGLASS	\$454.00
LONG LEG CAST, BILATERAL	\$291.00
LONG LEG CAST, LT LEG	\$145.00
LONG LEG CAST, RT LEG	\$145.00
CYLINDER CAST-LT 15 MIN	\$126.00
CYLINDER CAST-RT 15 MIN	\$126.00
CAST/ SHORT LEG FIBERGLASS	\$339.00
PT- SHORT LEG CAST, BILATERAL	\$238.00
SHORT LEG CAST-LT 15 MIN	\$118.00
SHORT LEG CAST-RT 15 MIN	\$118.00
CAST/ SHORT LEG; WALKING TYPE	\$324.00
SHORT LEG CAST WALKING-LT 15 MIN	\$118.00
SHORT LEG CAST WALKING-RT 15 MIN	\$118.00
CAST/ CLUBFOOT	\$239.00
SPLINTING LONG LEG-LT 15 MIN	\$126.00
SPLINTING LONG LEG-RT 15MIN	\$126.00
SHORT LEG SPLINT, LT LEG	\$108.00
SHORT LEG SPLINT, RT LEG	\$108.00
STRAPPING/TAPING LT HIP 15 MIN	\$108.00
STRAPPING/TAPING RIGHT HIP- 15 MIN	\$108.00
STRAPPING/TAPING LT KNEE 15 MIN	\$108.00
STRAPPING/TAPING RT KNEE 15 MIN	\$108.00
STRAPPING/TAPING LT ANKLE 15 MIN	\$105.00
STRAPPING/TAPING RT ANKLE 15 MIN	\$105.00
STRAPPING/TAPING TOES 15 MIN	\$105.00
CAST/ WINDOWING	\$192.00
STRAPPING/TAPING LOW BACK 15 MIN	\$108.00
INTRACATHETER BLOOD DRAWS	\$266.00
VENIPUNCTURE- ROUTINE	\$82.00
GASTROSTOMY, CHANGE OF BUTTON	\$241.00
REMOVAL OF GASTROSTOMY TUBE	\$212.00
CATHERIZATION- INSERTION OF SPT	\$152.00
BLADDER CATHETERIZATION	\$93.00
VOIDING PRESSURE STUDIES COMBINED	\$1,091.00
UROFLOW- CALIBRATED	\$348.00
EMG- ANAL OR URETHRAL SPHINTER	\$617.00
INTRA ABDOMINAL VOIDING	\$696.00
LUMBAR PUNCTURE	\$509.00
IMPLANTED PUMP-W/O REPROGRAMMING	\$509.00
IMPLANTED PUMP- W/ REPROGRAMMING	\$794.00

PUMP- W/ REPROGRAMMING, BOLUS MD	\$1,309.00
IMPLANTED PUMP-W/REPROGRAM & REFILL	\$915.00
IMPLANT PUMP-W/REPROGRAM,REFILL MD	\$915.00
PUMP-W/REPROGRAM,REFILL BOLUS MD	\$1,430.00
INJECTION, ANESTHETIC; OCCIPITAL NV	\$596.00
INJECT ANESTHETIC PERIPHERAL NERVE	\$254.00
BOTULINUM TOXIN PROC PAROTID, BILAT	\$383.00
BOTULINUM TOXIN PROC PAROTID,SINGLE	\$271.00
BOTULINUM TOXIN PROC FACIAL	\$293.00
BOTULINUM TOXIN PROC BILAT FACE	\$530.00
BOTULINUM TOXIN PROC TRIGEM BILAT	\$530.00
CHEMODENERVATION NECK UNILATERAL	\$293.00
CHEMODENERVATION NECK BILATERAL	\$530.00
SOMATIC NERVE DESTRUCTION	\$254.00
CHEMODENERVATION 1 EXRMTY; 1-4 MSCL	\$293.00
CHEMODENERVATION ADD'L EXTRMTY;1-4	\$236.00
CHEMODENERVATION 1 EXRMTY; 5+ MSCLS	\$318.00
CHEMODENERVATION ADD'L EXTRMTY;5+	\$236.00
CHEMODENERVATION TRUNK 1-5 MUSCLES	\$293.00
CHEMODENERVATION TRUNK 6+ MUSCLES	\$530.00
FACIAL BONES; < 3 VIEWS	\$218.00
NASAL	\$211.00
SKULL X-RAY	\$194.00
I/P MRI - BRAIN	\$2,555.00
RADIOLOGIC EXAM, CHEST, SINGLE VIEW	\$285.00
RADIOLOGIC EXAM, CHEST, 2 VIEWS	\$285.00
RADIOLOGIC EXAM, CHEST, 3 VIEWS	\$369.00
RADIOLOGIC EXAM, CHEST, 4 OR MORE	\$453.00
RIBS UNILATERAL	\$300.00
RIBS BILATERAL	\$330.00
SPINE ENTIRE, AP/LATERAL	\$361.00
SPINE SINGLE VIEW	\$330.00
CERVICAL SPINE, 3 VIEWS OR LESS	\$300.00
CERVICAL SPINE, 4-5 VIEWS	\$330.00
CERVICAL SPINE, 6 OR MORE VIEWS	\$330.00
SPINE SCOLIOSIS STANDING	\$355.00
THORACIC SPINE, 2 VIEWS	\$339.00
THORACIC SPINE, 3 VIEWS	\$339.00
THORACIC SPINE, MINIMUM 4 VIEWS	\$579.00
THORACOLUMBAR 2 VIEWS	\$330.00
ENTIRE SPINE; 1 VIEW	\$229.00
ENTIRE SPINE; 2-3 VIEWS	\$280.00
ENTIRE SPINE; 4-5 VIEWS	\$330.00
ENTIRE SPINE; MINIMUM 6 VIEWS	\$381.00
LUMBAR SPINE, 2-3 VIEWS	\$330.00
LUMBAR SPINE 4 VIEW MINIMUM	\$567.00
PELVIS	\$330.00

SACRUM AND COCCYX; TWO VIEWS	\$330.00
CLAVICLE-LEFT	\$211.00
CLAVICLE-RIGHT	\$211.00
SCAPULA-LEFT	\$300.00
SCAPULA-RIGHT	\$300.00
SHOULDER; COMPLETE MINIMUM 2 VIEWS	\$300.00
SHOULDER-LEFT	\$300.00
SHOULDER-RIGHT	\$300.00
HUMERUS-LEFT	\$300.00
HUMERUS-RIGHT	\$300.00
ELBOW 2 VIEWS LEFT	\$294.00
ELBOW 2 VIEWS RIGHT	\$294.00
ELBOW 3 VIEWS-LEFT	\$300.00
ELBOW 3 VIEWS-RIGHT	\$300.00
FOREARM-LEFT	\$211.00
FOREARM-RIGHT	\$211.00
WRIST-LEFT	\$300.00
WRIST-RIGHT	\$300.00
WRIST W/OBLIQUE-LEFT	\$355.00
WRIST W/OBLIQUE-RIGHT	\$355.00
HAND-LEFT	\$211.00
HAND-RIGHT	\$211.00
HAND W/OBLIQUE-LEFT	\$355.00
HAND W/OBLIQUE-RIGHT	\$355.00
FINGER-LEFT	\$211.00
FINGER-RIGHT	\$211.00
HIP 2 VIEW-LEFT	\$355.00
HIP 2 VIEW-RIGHT	\$355.00
HIP BILATERAL	\$579.00
FEMUR-LEFT	\$300.00
FEMUR-RIGHT	\$300.00
KNEE-LEFT	\$300.00
KNEE-RIGHT	\$300.00
KNEE W/3RD VIEWS-LEFT	\$376.00
KNEE W/3RD VIEWS-RIGHT	\$376.00
TIBIA/FIBULA-LEFT	\$211.00
TIBIA/FIBULA-RIGHT	\$211.00
ANKLE-LEFT	\$300.00
ANKLE-RIGHT	\$300.00
ANKLE W/OBLIQUE-LEFT	\$355.00
ANKLE W/OBLIQUE-RIGHT	\$355.00
FOOT-LEFT	\$300.00
FOOT-RIGHT	\$300.00
FOOT W/OBLIQUE-LEFT	\$355.00
FOOT W/OBLIQUE-RIGHT	\$355.00
HEEL-LEFT	\$300.00
HEEL-RIGHT	\$300.00

TOE(S) MINIMUM OF 2 VIEWS	\$300.00
RADIOLOGIC EXAM, ABDOMEN, 1 VIEW	\$285.00
RADIOLOGIC EXAM, ABDOMEN, 2 VIEWS	\$300.00
RADIOLOGIC EXAM, ABDOMEN, 3 OR MORE	\$300.00
RADIOLOGIC EXAM, ABDOMEN COM SERIES	\$403.00
CARDIAC MRI FOR MORPH AND FUNCTION	\$1,848.00
SHUNTOGRAM; NONVASCULAR SHUNT	\$330.00
ULTRASOUND, RENAL, COMPLETE	\$546.00
ULTRASOUND, EXTREMITY, COMPLETE	\$439.00
ULTRASOUND LIMITED ANATOMIC SPECIFIC	\$126.00
ULTRASOUND GUIDANCE	\$735.00
ULTRASOUND GUIDANCE 2ND PHYSICIAN	\$735.00
ULTRASOUND STUDY FOLLOW UP	\$363.00
BONE AGE STUDY	\$211.00
BONE LENGTH STUDY, SCANOGRAM	\$340.00
COMPLETE OSSEOUS SURVEY; AXIAL SKEL	\$330.00
DEXA SCAN AXIAL SKELETON	\$622.00
DEXA APPENDICULAR SKELETON	\$387.00
BONE DENSITY STUDY; WHOLE BODY	\$770.00
IMMUNIZATION ADMIN, 1 VACCINE	\$25.00
FLU VACCINE, INFLUENZA <3YRS	\$30.00
FLU VACCINE, INFLUENZA VIRUS	\$30.00
PNEUMOCOCCAL VACCINE, 13 VALENTS	\$154.00
FLU VACCINE,PF, INFLUENZA <3YRS	\$30.00
FLU VACCINE,PF, INFLUENZA VIRUS	\$30.00
DTAP, PT OVER 7, IM	\$64.00
PNEUMOCOCCAL VACCINE, 23 VALENTS	\$77.00
ZOSTER VACCINE (LIVE)	\$181.00
INTERACTIVE COMPLEXITY	\$182.00
DIAGNOSTIC EVALUATION 60 MINUTES	\$659.00
DIAGNOSTIC EVALUATION 90 MINUTES	\$989.00
DIAGNOSTIC EVALUATION 30 MINUTES	\$329.00
DIAGNOSTIC EVALUATION 120 MIN	\$1,317.00
DIAGNOSTIC EVAL W/MED ASSESS 60MIN	\$718.00
DIAGNOSTIC EVAL W/MED ASSESS 120MIN	\$1,377.00
DIAGNOSTIC EVAL W/MED ASSESS 90MIN	\$1,048.00
PSYCHOTHERAPY 30 MINUTES	\$216.00
PSYCHOTHERAPY W/E&M 30 MIN	\$182.00
PSYCHOTHERAPY 45 MINUTES	\$339.00
PSYCHOTHERAPY W/E&M 45 MINUTES	\$242.00
PSYCHOTHERAPY 60 MINUTES	\$434.00
PSYCHOTHERAPY W/E&M 60 MINUTES	\$332.00
PSYCHOTHERAPY FOR CRISIS 1ST 60 MIN	\$630.00
PSYCHOTHERAPY FOR CRISIS ADD'L 30M	\$316.00
FAMILY THERAPY W/OUT PT 60 MIN	\$434.00
FAMILY THERAPY W/PT 60 MIN	\$461.00
MULTI FAMILY THERAPY 60 MINUTES	\$285.00

GROUP THERAPY - 60 MIN	\$285.00
ENVIRONMENTAL INTERVENTION	\$717.00
MEDICAL RECORD REVIEW	\$376.00
GASTROESOPHAGEAL REFLUX TEST	\$409.00
ENEMA ADMIN & TRAINING	\$245.00
SPEECH & LANGUAGE TREATMENT- 15 MIN	\$105.00
SPEECH & LANGUAGE GROUP TX 15 MIN	\$87.00
LARYNGEAL FUNCTION STUDIES 15 MIN	\$157.00
SPEECH FLUENCY EVALUATION 15 MIN	\$190.00
SPEECH SOUND PRODUCTION EVAL 15 MIN	\$190.00
SPEECH PRODUCTION W/LANG EVAL 15MIN	\$190.00
RECEPTIVE/EXPRESSIVE LANGUAGE EVAL	\$190.00
QUALITATIVE ANALYSIS OF VOICE	\$190.00
TREATMENT SWALLOW & ORAL FUNCT 15M	\$105.00
AUDIOLOGY SCREEN	\$172.00
SPEECH AUDIOMETRY THRESHOLD	\$81.00
AUDIOLOGY EVAL	\$525.00
EVOKED OTOACOUSTIC EMISSIONS,SCREEN	\$62.00
TYMPANOMETRY	\$74.00
ACOUSTIC REFLEX TESTING THRESHOLD	\$74.00
CONDITIONING PLAY AUDIOMETRY	\$246.00
AEP	\$1,171.00
EVOKED OTOACOUSTIC EMISSIONS, BRIEF	\$87.00
EVOKED OTOACOUSTIC EMISSIONS, COMP	\$172.00
HEARING AID EXAM - MONAURAL	\$206.00
HEARING AID EXAM - BINAURAL	\$206.00
HEARING AID CHECK;MONAURAL	\$361.00
HEARING AID CHECK;BINAURAL	\$361.00
ELECTROACOUSTIC ANALYSIS- MONAURAL	\$123.00
ELECTROACOUSTIC ANALYSIS- BINAURAL	\$182.00
EVAL NON SPEECH DEVICE;FIRST HR	\$817.00
NSGD TX SVC INCL PROGRAM 60 MIN	\$437.00
EVAL SPEECH DEVICE; FIRST HOUR	\$817.00
EVAL SPEECH DEV;ADD'L 1/2	\$408.00
SGD TX SVC INCL PROGRAMMING 15 MIN	\$98.00
EVAL OF ORAL SWALLOW FUNCTION-15MIN	\$157.00
EVAL NON SPEECH DEVICE;ADD'L 1/2 HR	\$408.00
CENTRAL AUDITORY EVALUATION; 60 MIN	\$629.00
CENTRAL AUDITORY EVAL (BRIEF)	\$220.00
CENTRAL AUDITORY EVAL; ADD'L 15 MIN	\$134.00
EVAL OF AURAL REHAB, FIRST HOUR	\$633.00
AURAL REHAB, ADD'L 15 MIN	\$149.00
AURAL REHAB, PRELINGUAL HEAR LOSS	\$105.00
ELECTROCARDIOGRAM W/AT LEAST 12 LDS	\$151.00
ECG; INTERPRETATION & REPORT ONLY	\$78.00
HOLTER MONITOR UP TO 48 CONTININOUS	\$570.00
HOLTER MONITOR <12HR-HOLTER MONITOR	\$570.00

ECG HR-HOLTER PHYSICIAN REVIEW ONLY	\$150.00
ECHOCARDIOGRAPHY CONGENITAL;COMPLET	\$639.00
ECHOCARDIOGRAPHY CONGENITAL;LIMITED	\$446.00
ECHO TTE/DOPPLER/COLOR FLOW	\$1,145.00
ECHO TTE/NO DOPPLER/NO COLOR	\$764.00
ECHOCARDIOGRAPHY DOPPLER	\$254.00
ECHOCARDIOGRAPHY DOPPLER COLOR FLOW	\$254.00
SPIROMETRY	\$198.00
REST/EXERCISE METABOLIC ASSESSMENT	\$280.00
RESTING METABOLIC ASSESSMENT	\$224.00
PULSE OXIMETRY	\$62.00
POLYSOMNOGRAM 4+ PARMS;<6	\$3,778.00
POLYSOMNOGRAM 4+ PARMS CPAP; <6	\$4,085.00
ACTIGRAPHY TESTING	\$398.00
MULTIPLE SLEEP LATENCY	\$1,743.00
POLYSOMNOGRAM 1-3 PARMS	\$2,919.00
POLYSOMNOGRAM 1-3 PARMS REDUCED SVC	\$789.00
POLYSOMNOGRAM 4+ PARMS;6 +	\$3,777.00
POLYSOMNOGRAM 4+ PARMS;6 + REDUCED	\$2,240.00
POLYSOMNOGRAM 4+ PARMS CPAP; 6 +	\$4,085.00
EEG - EXTENDED MONITORING UP TO 60M	\$1,165.00
EEG - EXTENDED MONITORING (>60 MIN)	\$2,451.00
EEG - AWAKE & DROWSY	\$1,000.00
EEG - AWAKE & SLEEP	\$1,154.00
EEG - COMA OR SLEEP	\$1,115.00
EEG - ALL NIGHT SLEEP ONLY	\$3,409.00
MANUAL MUSCLE TEST W/O HANDS	\$233.00
MANUAL MUSCLE TEST W/HANDS	\$266.00
EMG- ONE EXTREMITY	\$469.00
EMG - 2 EXTREMITY	\$546.00
EMG- THREE EXTREMITIES	\$633.00
EMG- FOUR EXTREMITIES	\$735.00
EMG-CRANIAL NERVE MUSCLES UNILATERL	\$357.00
EMG-CRANIAL NERVE MUSCLES BILATERAL	\$469.00
EMG- THORACIC PARASPINAL MUSCLES	\$357.00
EMG- LIMITED STUDY	\$357.00
EMG-QUANTITATIVE MEASUREMENT	\$469.00
E-STIM GUIDANCE OF INJECTION	\$99.00
EMG GUIDANCE OF INJECTION	\$99.00
EMG, W/PARASPINAL AREAS COMPLETE	\$637.00
EMG, NON EXTREMITY	\$469.00
NERVE CONDUCTION STUDIES; 1-2	\$193.00
NERVE CONDUCTION STUDIES; 3-4	\$213.00
NERVE CONDUCTION STUDIES; 5-6	\$231.00
NERVE CONDUCTION STUDIES; 7-8	\$248.00
NERVE CONDUCTION STUDIES; 9-10	\$268.00
NERVE CONDUCTION STUDIES; 11-12	\$284.00

NERVE CONDUCTION STUDIES;>12	\$304.00
SOMATOSENSORY EVOKED POTENTIAL UL	\$530.00
SOMATOSENSORY EVOKED POTENTIAL LL	\$530.00
SOMATOSENSORY EVOKED POTENTIAL TR	\$530.00
TRANSCRANIAL MOTOR STIMULATION UL	\$1,060.00
TRANSCRANIAL MOTOR STIMULATION LL	\$1,060.00
VISUAL EVOKED POTENTIAL	\$497.00
ORBICULARIS OCULI REFLEX	\$312.00
NEUROMUSCULAR JUNCTN TEST EACH NERVE	\$312.00
EEG - CEREBRAL SEIZURE 8 CHANNEL	\$575.00
EEG FOR CEREBRAL SEIZURE (VIDEO)	\$4,138.00
EEG CEREBRAL SEIZURE (VIDEO) <12HR	\$2,240.00
EEG - DIGITAL ANALYSIS	\$737.00
VNS;ANALYSIS;SIMPLE PRGM;SPINALCORD	\$129.00
VNS;ANALYSIS;COMPLEX PRGRM;CRANIAL	\$225.00
REFILL-IMPLANTABLE PUMP	\$126.00
REFILL-IMPLANTABLE PUMP/ PHYSICIAN	\$126.00
MOTION ANALYSIS BY VIDEO AND 3D	\$134.00
MOTION ANALYSIS W/PRESSURE MEASURE	\$167.00
GENETIC COUNSELING SERVICES	\$375.00
EVALUATION APHASIA 60 MINUTES	\$531.00
DEVELOPMENTAL TESTING	\$334.00
DEVELOPMENTAL TEST ADMIN;1ST HOUR	\$334.00
DEVELOPMNTL TEST ADMIN;ADD'L 30MIN	\$167.00
NEUROBEHAVIORAL STATUS EXAM 1ST HR	\$678.00
NEUROPSYCH TESTING PSYCHOLOGIST	\$423.00
NEUROPSYCH TESTING NON PSYCHOLOGIST	\$423.00
NEUROBEHAVIORAL STATUS;EA ADD'L HR	\$678.00
STANDARD COGNITIVE PERF TEST 60 MIN	\$531.00
BRIEF EMOTIONAL/BEHAVIORAL ASSESS	\$115.00
PSYCHOLOGICAL TESTING EVAL;1ST HOUR	\$423.00
PSYCHOLOGICAL TESTING EVAL;ADD'L HR	\$423.00
NEUROPSYCH TEST EVAL; 1ST HOUR	\$423.00
NEUROPSYCH TEST EVAL; EA ADD'L HR	\$423.00
PSYCH/NEUROPSYCH TEST ADMIN 1ST 30M	\$211.00
PSYCH/NEUROPSYCH TEST ADD'L 30 MIN	\$211.00
PSYCH/NEURO TEST TECH 1ST 30MIN	\$211.00
PSYCH/NEURO TEST TECH ADD'L 30 MIN	\$211.00
PSYCH/NEURO TEST; SINGLE AUTOMATED	\$150.00
HLTH & BEHAVIOR MGMT;ASSESS 15 MIN	\$166.00
HLTH & BEHAVIOR MGMT;RE-ASSESSMENT	\$166.00
HLTH & BEHAVIOR MGMT;INDIVIDUAL TX	\$107.00
HEALTH & BEH GROUP INTERVENTION	\$74.00
HEALTH INTERVENTION FAMILY W/PT 15	\$115.00
HEALTH INTERVENTION FAM W/OUT PT 15	\$107.00
HLTH & BEHAVIOR MGMT;PT ASSESSMENT	\$79.00
INFUSION ADMINISTRATION 1ST HR	\$302.00

INFUSION ADMINISTRATION EA ADD'L HR	\$264.00
INFUSION ADMIN ADD'L SEQUENTIAL	\$126.00
INJECTION;THERAPEUTIC IM OR SUBQ	\$38.00
IV PUSH, SINGLE OR INITIAL DRUG	\$130.00
APPLICATION OF HOLD/COLD PACKS	\$82.00
E-STIM UNATTENDED 15 MIN	\$106.00
PARAFIN BATH	\$82.00
E-STIM,DIRECT 15 MIN	\$132.00
IONTOPHORESIS, 15 MIN	\$132.00
ULTRASOUND, 15 MINUTES	\$132.00
UNLISTED, 15 MIN	\$132.00
THERAPEUTIC PROCEDURES 15 MIN	\$105.00
NEUROMUSCULAR REEDUCATION 15 MIN	\$105.00
AQUATIC THERAPY 15 MINUTES	\$151.00
GAIT TRAINING 15 MIN	\$132.00
MASSAGE 15 MIN	\$105.00
THERAPEUTIC COGNITIVE SKILLS	\$105.00
UNLISTED PROCEDURE 15 MIN	\$105.00
MANUAL THERAPY, 15 MIN	\$105.00
THERAPEUTIC PROCEDURE, GROUP 15 MIN	\$87.00
PT EVAL; LOW COMPLEXITY	\$367.00
PT EVAL; MOD COMPLEXITY	\$681.00
PT EVAL; HIGH COMPLEXITY	\$995.00
PT REEVALUATION	\$681.00
OT EVAL; LOW COMPLEXITY	\$367.00
OT EVAL; MOD COMPLEXITY	\$681.00
OT EVAL; HIGH COMPLEXITY	\$995.00
OT REEVALUATION	\$681.00
THERAPEUTIC ACTIVITIES 15 MIN	\$105.00
COGNITIVE SKILLS	\$105.00
SENSORY INTEGRATION TX	\$105.00
SELF CARE/HOME MANAGEMENT	\$105.00
COMMUNITY/ WORK REINT, 15 MIN	\$105.00
WHEELCHAIR EVALUATION/ASSESSMENT	\$157.00
DEBRIDEMENT SKIN,20 SQ CM OR LESS	\$109.00
DEBRIDEMENT;SKIN,SUBQ ADDL 20 SQ CM	\$54.00
ACTIVE WOUND CARE MANAGEMENT	\$109.00
ULTRASOUND WOUND ASSESSMENT	\$126.00
PHYSICAL PERFORMANCE TEST 15 MIN	\$157.00
ASSISTIVE TECH ASSESSMENT 15 MIN	\$157.00
ORTHOTIC MGMT/TRAIN INITIAL 15 MIN	\$134.00
OT PROSTHETIC MGMT/TRAIN INITIAL	\$105.00
ORTHO/PROSTHETIC MGMT/TRAIN F/U	\$105.00
SPLINTING/CASTING	\$146.00
NUTRITION EVALUATION (15 MINUTES)	\$138.00
NUTRITION ASSESSMENT (15 MINUTES)	\$103.00
NUTRITION THERAPY; GROUP (15 MIN)	\$84.00

ACUPUNCTURE, INITIAL 15 MINUTES	\$94.00
ACUPUNCTURE, ADD'L 15 MINUTES	\$65.00
ACUPUNCTURE, INITIAL 15 MIN E-STIM	\$99.00
ACUPUNCTURE, ADD'L 15 MIN W/E-STIM	\$73.00
VIDEO TAPE REVIEW/30 MIN PHONE CONS	\$376.00
MODERATE SEDATION; < 5 YRS ; 15 MIN	\$424.00
MODERATE SEDATION; >=5 YRS ; 15 MIN	\$424.00
MODERATE SEDATION; EA ADD'L 15 MIN	\$160.00
REHAB NURSE CONFERENCE	\$515.00
NEW PATIENT LEVEL 1	\$199.00
NEW PATIENT LEVEL 2	\$324.00
NEW PATIENT LEVEL 3	\$493.00
NEW PATIENT LEVEL 4	\$709.00
NEW PATIENT LEVEL 5	\$1,009.00
ESTABLISHED LEVEL 1	\$162.00
ESTABLISHED LEVEL 2	\$199.00
ESTABLISHED LEVEL 3	\$324.00
ESTABLISHED LEVEL 4	\$493.00
ESTABLISHED LEVEL 5	\$709.00
O/P CONSULT- LEVEL 1	\$248.00
O/P CONSULT- LEVEL 2	\$386.00
O/P CONSULT- LEVEL 3	\$509.00
O/P CONSULT- LEVEL 4	\$745.00
O/P CONSULT- LEVEL 5	\$1,056.00
PROLONGED E&M SVC 1ST HR SOM	\$580.00
PROLONGED PHYS SVC EA ADD'L 30 MIN	\$285.00
MEDICAL CONFERENCE	\$305.00
PHYSICIAN SUPER HH <30 MIN	\$199.00
PHYS SUPERVISION HOME HLTH > 30MIN	\$396.00
PHYS SUPERVISION NURS FACILITY <30M	\$199.00
PHYS SUPERVISION NURS FAC >30 MIN	\$396.00
PHONE E/M BY PHYS 5-10 MIN	\$102.00
PHONE E/M BY PHYS 11-20 MIN	\$137.00
PHONE E/M BY PHYS 21-30 MIN	\$171.00
KINESIO TAPE, PER ROLL	\$11.00
ADDITIONAL BUTTON(S) - GASTROSTOMY	\$166.00
ABDUCTION WEDGE	\$64.00
BACLOFEN 10 MG	\$702.00
BACLOFEN 40 MG	\$1,780.00
BACLOFEN 5 MG	\$300.00
BACLOFEN 20 MG	\$1,137.00
BACLOFEN 80 MG	\$2,714.00
BOTULINUM TOXIN, PER UNIT	\$8.00
DYSPORT, PER 5 UNITS	\$9.00
MYOBLOC INJ, 10000/2ML	\$1,249.00
MYOBLOC INJ, 5000/1ML	\$821.00
INCOBOTULINUM TOXIN A, PER UNIT	\$6.00

COSYNOTROPIN .25MG	\$113.00
GLUCAGON - 1MG	\$88.00
IBANDRONATE, 1 MG (BONIVA)	\$175.00
PAMIDRONATE - 30MG	\$59.00
TESTOSTERONE ENANTHATE,200MG PER ML	\$20.00
ZOLEDRONIC ACID, PER MG	\$47.00
RECLAST, PER MG	\$321.00
ARGININE 10% - 500CC	\$16.00
ORAL GLUCOSE SOLUTION	\$28.00
PHENOL CRYSTAL USP, PER 15 ML	\$99.00
DEHYDRATED ALCOHOL INJECTION (ETOH)	\$6.00
LEUPROLIDE - 1MG/.2ML	\$126.00
KNEE IMMOBILIZER, EACH	\$62.00
KNEE ORTHOSIS	\$221.00
AFO, POSTERIOR PREFABRICATIED	\$309.00
AFO, SPIRAL CUSTOM FABRICATED	\$1,610.00
ADDITION TO LE ORTHOSIS HIGH STRENG	\$280.00
ADDITION TO LE ORTHOSIS KNEE CONTRO	\$64.00
ADDITION TO LE ORTHOSIS SOFT INTERF	\$299.00
PT CAST BOOT, PER FOOT	\$21.00
FINGER ORTHOSIS W/O JOINTS	\$105.00
UPPER LIMB ORTHOSIS NOS	\$146.00
REPAIR OF ORTHOTIC DEVICE	\$68.00
MEDICAL CONFERENCE W/O FACE-TO-FACE	\$305.00
ISSUANCE/ORIENTATION	\$408.00
HEARING AID PERFORM ASSESS	\$361.00
REAL EAR MEASURES	\$206.00
HEARING AID DISPENSING FEE-BINAURAL	\$956.00
HEARING AID DISPENSING FEE-BI CROS	\$595.00
HEARING AID DISP FEE- MONAURAL	\$611.00
HEARING AID SERVICE	\$228.00
PER DIEM, POST ORTHO	\$3,289.00
PER DIEM, POST ORTHO W/RESPIRATORY	\$4,085.00
PER DIEM, OTHER MEDICAL	\$2,918.00
PER DIEM, OTHER MEDICAL	\$3,024.00
PER DIEM, OTHER MEDICAL W/RESPIRATO	\$3,713.00
PER DIEM, EPILEPSY MONITORING UNIT	\$7,210.00
PER DIEM, EMU W/RESPIRATORY	\$7,313.00
PER DIEM, REHABILITATION PAIN MGMT	\$3,183.00
PER DIEM, BRAIN INJURY	\$3,713.00
PER DIEM, BRAIN INJURY W/RESP	\$4,509.00
PER DIEM, COMPREHENSIVE REHAB	\$2,575.00
PER DIEM, COMP REHAB W/RESPIRATORY	\$3,193.00
PER DIEM, FEEDING	\$3,979.00
PER DIEM, FEEDING W/RESPIRATORY	\$4,774.00
PER DIEM, SPINE W/RESPIRATORY	\$4,934.00
PER DIEM, SPINE	\$4,138.00

PER DIEM, NBU	\$4,138.00
PARENT CONFERENCE	\$254.00
MEDICAL RECORD REVIEW	\$376.00
PYRIMIDINES	\$300.00
DAY HOSPITAL RATE-FEEDING DISORDERS	\$2,103.00
1/2 DAY RATE - FEEDING DISORDERS	\$1,056.00
SCHOOL VISIT/OBSERVATION	\$434.00
EDUCATIONAL TESTING	\$424.00
TENSO WRAP, PER ROLL	\$34.00
PT RELATED SUPPLIES	\$74.00
SPLINT THUMB	\$12.00
HEARING AID COUNSELING-GROUP	\$182.00
TELEPHONE CONFERENCE > 30 MINUTES	\$93.00
MEDICAL RECORD REVIEW	\$376.00
PRE ADOPTION PARENT CONSULT 15 MIN	\$45.00
TELEPHONE - PSYCHIATRY CONSULT	\$150.00
PSYCHOLOGICAL EVAL- ADULT	\$1,286.00
SPECIAL ED CONSULTATION	\$709.00
TELEPHONE CONFERENCE/MEETING	\$93.00
DYAD EARLY INTERVENTION PER HOUR	\$99.00
EARLY INTERVENTION (PER HR)	\$198.00
STP DAY HOSPITAL RATE LEVEL 1	\$1,283.00
STP DAY HOSPITAL RATE LEVEL 2	\$1,789.00
STP DAY HOSPITAL RATE LEVEL 3	\$2,221.00
SEATING ADJUSTMENT	\$231.00
EDUCATIONAL EVAL	\$1,764.00
EDUCATIONAL TESTING, PER HOUR	\$294.00
EDUCATION CONSULT	\$709.00
ALBRIGHT HEREDITARY OSTEODYSTROPHY	\$1,440.00