

2021
Fee Schedule

NM Long Description	MC CPT	NM CPT	NM FY2021 Fee	NM FY2020 Fee
Comprehensive Internist Consultation	99204	90621	\$179.00	\$176.00
Comprehensive Internist Consultation - NP/PA*	99205	90621NP	\$152	\$150
Comprehensive Orthopedic Consultation	99204	90622	\$179.00	\$176.00
Comprehensive Orthopedic Consultation - NP/PA*	99205	90622NP	\$152	\$150
Comprehensive Neurological Consultation	99204	90623	\$179.00	\$176.00
Comprehensive Neurological Consultation - NP/PA*	99205	90623NP	\$152	\$150
Comprehensive Cardiac Consultation	99204	90625	\$179.00	\$176.00
Examination by Family Practitioner	99204	90626	\$179.00	\$176.00
Examination by Family Practitioner - NP/PA*	99205	90626NP	\$152	\$150
Comprehensive Ophthalmologic Consultation	99204	90627	\$179.00	\$176.00
Comprehensive Otolaryngology Consultation	99204	925577(26)	\$160.00	\$160.00
Comprehensive Pediatric Consultation	99204	90628	\$179.00	\$176.00
Comprehensive Pediatric Consultation - NP/PA*	99205	90628NP	\$152	\$150
Speech/Language Evaluation	92523	92506	\$246.00	\$207.00
Speech/Language Evaluation, child under 3 yoa	92523	92506<3	\$246.00	\$207.00
Mental Status Examination- adult	90791	90801	\$193.00	\$155.00
Mental Status Examination- child	90791	90801 C	\$193.00	\$155.00
Mental Status Examination - LISW-adult*	90791	90791 L	\$145	\$116
Mental Status Examination - LISW-child*	90791	90791 LC	\$145	\$116
*Internist/Family Nurse Practitioner (NP/PA) fee = 85% of \$179				
*Mental Status Examination - LISW fee = 75% of \$193				

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NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Comprehensive Internist Consultation	99204	90621		\$179.00	\$176.00
Comprehensive Internist Consultation - NP/PA*	99205	90621NP		\$152	\$150
Comprehensive Orthopedic Consultation	99204	90622		\$179.00	\$176.00
Comprehensive Orthopedic Consultation - NP/PA*	99205	90622NP		\$152	\$150
Comprehensive Neurological Consultation	99204	90623		\$179.00	\$176.00
Comprehensive Neurological Consultation - NP/PA*	99205	90623NP		\$152	\$150
Comprehensive Cardiac Consultation	99204	90625		\$179.00	\$176.00
Examination by Family Practitioner	99204	90626		\$179.00	\$176.00
Examination by Family Practitioner - NP/PA*	99205	90626NP		\$152	\$150
Comprehensive Ophthalmologic Consultation	99204	90627		\$179.00	\$176.00
Comprehensive Otolaryngology Consultation	99204	90620		\$160.00	\$160.00
Comprehensive Pediatric Consultation	99204	90628		\$179.00	\$176.00
Comprehensive Pediatric Consultation - NP/PA*	99205	90628NP		\$152	\$150
Speech/Language Evaluation	92523	92506		\$246.00	\$207.00
Speech/Language Evaluation, child under 3 yoa	92523	92506<3		\$246.00	\$207.00
Mental Status Examination*	90791	90801		\$193.00	\$155.00
Mental Status Examination- child*	90791	90801 C		\$193.00	\$155.00
Mental Status Examination - LISW-adult*	90791	90791 L		\$145	\$116
Mental Status Examination - LISW-child*	90791	90791 LC		\$145	\$116
WAIS-IV/V	96125	01311		\$193.00	\$201.00
WISC-IV/V	96125	01312		\$189.00	\$197.00
Bayley Scales II of Infant Development - Mental and Motor	96112	01315		\$175.00	\$186.00
WPPSI-R	96112	01316		\$175.00	\$186.00
Leiter-3	96112	01317		\$140.00	\$149.00
Wechsler Memory Scale, Revised	96116	01326		\$103.00	\$105.00
Wide Range Achievement Test	96116	01325		\$103.00	\$0.00
Trails A & B	96116	01327		\$77.00	\$79.00
Test of Native/Non-Verbal Intelligence III	96125	01335		\$112.00	\$117.00
Wide Range Assessment of Memory and Learning	96116	01351		\$103.00	\$105.00
Wechsler Individual Achievement Test	96125	01352		\$112.00	\$117.00
Vineland	96116	01353		\$77.00	\$79.00
Chest, AP & Lateral	71046	71020	Total*	\$33.00	\$33.00
26 is for the doctor's interpretation			TC	\$22.00	\$21.00
			26	\$11.00	\$12.00
Cervical Spine, AP & Lateral	72040	72040	Total*	\$39.00	\$39.00
			TC	\$28.00	\$27.00
			26	\$11.00	\$12.00
			Total*	\$32.00	\$32.00

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NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Thoracic Spine, AP & Lateral	72070	72070	TC	\$22.00	\$21.00
			26	\$10.00	\$11.00
Scoliosis Study-supine and erect	72082	72090	<i>Total*</i>	\$70.00	\$69.00
			TC	\$54.00	\$52.00
			26	\$16.00	\$17.00
Lumbo-sacral Spine, AP & Lateral	72100	72100	<i>Total*</i>	\$39.00	\$39.00
			TC	\$28.00	\$27.00
			26	\$11.00	\$12.00
Pelvis, AP	72170	72170	<i>Total*</i>	\$28.00	\$29.00
			TC	\$19.00	\$20.00
			26	\$9.00	\$9.00
Sacroiliac Joints 2 views	72200	72200	<i>Total*</i>	\$32.00	\$33.00
			TC	\$24.00	\$23.00
			26	\$8.00	\$10.00
Right Clavicle, 2 views	73000	73000	<i>Total*</i>	\$32.00	\$30.00
			TC	\$24.00	\$21.00
			26	\$8.00	\$9.00
Left Clavicle, 2 views		73001	see above		
Right Scapula, complete	73010	73010	<i>Total*</i>	\$23.00	\$28.00
			TC	\$14.00	\$19.00
			26	\$9.00	\$9.00
Left Scapula, complete		73011	see above		
Right Shoulder, 2 views	73030	73030	<i>Total*</i>	\$35.00	\$34.00
			TC	\$25.00	\$24.00
			26	\$10.00	\$10.00
Left Shoulder, 2 views		73031	see above		
Right Humerus, 2 views	73060	73060	<i>Total*</i>	\$32.00	\$32.00
			TC	\$24.00	\$23.00
			26	\$8.00	\$9.00
Left Humerus, 2 views		73061	see above		
Right Elbow, AP and Lateral views	73070	73070	<i>Total*</i>	\$28.00	\$29.00
			TC	\$20.00	\$20.00
			26	\$8.00	\$9.00
Left Elbow, AP and Lateral views		73071	see above		
Right Forearm, AP and Lateral views	73090	73090	<i>Total*</i>	\$29.00	\$29.00
			TC	\$21.00	\$20.00
			26	\$8.00	\$9.00
Left Forearm, AP and Lateral views		73091	see above		

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Right Wrist, AP and Lateral views	73100	73100	Total*	\$33.00	\$33.00
			TC	\$25.00	\$24.00
			26	\$8.00	\$9.00
Left Wrist, AP and Lateral views		73101	see above		
Right Hand, 2 views	73120	73120	Total*	\$30.00	\$31.00
			TC	\$22.00	\$22.00
			26	\$8.00	\$9.00
Left Hand, 2 views		73121	see above		
Right Hip, 2 views	73502	73510	Total*	\$46.00	\$46.00
			TC	\$35.00	\$34.00
			26	\$11.00	\$12.00
Left Hip, 2 views		73511	see above		
Right Femur, AP and Lateral views	73551	73550	Total*	\$29.00	\$30.00
			TC	\$21.00	\$21.00
			26	\$8.00	\$9.00
Left Femur, AP and Lateral views		73551	see above		
Right Knee, AP and Lateral views, Standing	73560	73560	Total*	\$34.00	\$34.00
			TC	\$26.00	\$25.00
			26	\$8.00	\$9.00
Left Knee, AP and Lateral views, standing		73561	see above		
Right Tibia-Fibula, AP and Lateral views	73590	73590	Total*	\$31.00	\$31.00
			TC	\$23.00	\$22.00
			26	\$8.00	\$9.00
Left Tibia-Fibula, AP and Lateral views		73591	see above		
Right Ankle, AP and Lateral views	73600	73600	Total*	\$32.00	\$32.00
			TC	\$24.00	\$23.00
			26	\$8.00	\$9.00
Left Ankle, AP and Lateral views		73601	see above		
Right Foot, AP and Lateral views	73620	73620	Total*	\$28.00	\$28.00
			TC	\$20.00	\$20.00
			26	\$8.00	\$8.00
Left Foot, AP and lateral views		73621	see above		
Right Calcaneus, AP and Lateral views	73650	73650	Total*	\$28.00	\$29.00
			TC	\$20.00	\$20.00
			26	\$8.00	\$9.00
Left Calcaneus, AP and Lateral views		73651	see above		
Bone Age Studies, with Interpretation	77072	76020	Total*	\$26.00	\$26.00
			TC	\$16.00	\$16.00

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			26	\$10.00	\$10.00
Right & Left Shoulder, AP & Lateral	73030	X3030	<i>Total*</i>	\$70.00	\$68.00
			TC	\$50.00	\$48.00
			26	\$20.00	\$20.00
Right & Left Humerus, AP & Lateral	73060	X3060	<i>Total*</i>	\$64.00	\$64.00
			TC	\$48.00	\$46.00
			26	\$16.00	\$18.00
Right & Left Elbow, AP & Lateral	73070	X3070	<i>Total*</i>	\$56.00	\$58.00
			TC	\$40.00	\$40.00
			26	\$16.00	\$18.00
Right & Left Forearm, AP & Lateral	73090	X3090	<i>Total*</i>	\$58.00	\$58.00
			TC	\$42.00	\$40.00
			26	\$16.00	\$18.00
Right & Left Wrist, AP & Lateral	73100	X3100	<i>Total*</i>	\$66.00	\$66.00
			TC	\$50.00	\$48.00
			26	\$16.00	\$18.00
Right & Left Hands, AP & Lateral	73120	X3120	<i>Total*</i>	\$60.00	\$62.00
			TC	\$44.00	\$44.00
			26	\$16.00	\$18.00
Right & Left Hips, AP & Lateral	73510	X3510	<i>Total*</i>	\$92.00	\$92.00
			TC	\$70.00	\$68.00
			26	\$22.00	\$24.00
Right & Left Femurs, AP & Lateral	73550	X3550	<i>Total*</i>	\$58.00	\$60.00
			TC	\$42.00	\$42.00
			26	\$16.00	\$18.00
Right & Left Knees, AP & Lateral	73560	X3560	<i>Total*</i>	\$68.00	\$68.00
			TC	\$52.00	\$50.00
			26	\$16.00	\$18.00
Right & Left Tibia-Fibula, AP & Lateral	73590	X3590	<i>Total*</i>	\$62.00	\$62.00
			TC	\$46.00	\$44.00
			26	\$16.00	\$18.00
Right & Left Ankles, AP & Lateral	73600	X3600	<i>Total*</i>	\$64.00	\$64.00
			TC	\$48.00	\$46.00
			26	\$16.00	\$18.00
Right & Left Feet, AP & Lateral	73620	X3620	<i>Total*</i>	\$56.00	\$56.00
			TC	\$40.00	\$40.00
			26	\$16.00	\$16.00
			<i>Total*</i>	\$56.00	\$58.00

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NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Right & Left Calcaneus, AP & Lateral	73650	X3650	TC	\$40.00	\$40.00
			26	\$16.00	\$18.00
Visual Field Exam, Quantitative Perimetry, Goldmann or ARC	92082	92082		\$48.00	\$49.00
Humphrey VTAP	92083	92083		\$65.00	\$65.00
Optical Coherence Tomography - Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; optic nerve	92133	92133		\$38.00	\$39.00
Optical Coherence Tomography - Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; retina	92134	92134		\$42.00	\$42.00
Basic Comprehensive Audiometry, Aided Pure Tone, Air & Bone with Speech Recognition Bone Speech Threshold & Discrimination (Audiologist Exam)	92557	92557		\$41.00	\$40.00
Tympanogram	92567	92567		\$17.00	\$16.00
Brainstem Evoked Auditory Response Recording	92652	92585		\$124.00	\$138.00
Cerumen Removal	69210	69210 1		\$50.00	\$51.00
Cerumen Removal - Bilateral	69210	69210 2		\$100.00	\$102.00
HINT (Hearing in Noise Test) - diagnostic analysis of cochlear implant - less than 7 yoa, w/programming	92601	92601		\$176.00	\$177.00
HINT (Hearing in Noise Test) - diagnostic analysis of cochlear implant - greater than 7 yoa, w/programming	92603	92603		\$143.00	\$166.00
EKG, Standard 12 Lead Resting with Interpretation and Tracings	93000	93000		\$15.00	\$17.00
RESTING EKG WITH CLAIMANT STANDING & EXERCISE TREADMILL WITH INTERPRETATION & TRACINGS	93015	93015		\$73.00	\$74.00
Electrocardiographic monitoring for 24 hours by continuous ECG with report, physician review and interpretation	93224	93224		\$80.00	\$91.00
Echocardiography, real-time with image documentation (2D) with M-mode complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	93306	93306	Total*	\$209.00	\$215.00
			TC	\$134.00	\$135.00
			26	\$75.00	\$80.00
Echocardiography, real-time with image documentation (2D) with M-mode complete	93307	93307	Total*	\$147.00	\$146.00
			TC	\$99.00	\$97.00
			26	\$48.00	\$49.00
Stress Echocardiography, real-time with image documentation (2D), during rest and cardiovascular stress test, including ECG monitoring, with interpretation and report	93350	93350		\$198.00	\$197.00
			TC	\$123.00	\$119.00
			26	\$75.00	\$78.00
Doppler - Noninvasive physiologic studies of upper or lower extremity arteries (ankle/brachial indices)	93922	93922	Total*	\$86.00	\$87.00
			TC	\$72.00	\$73.00
			26	\$14.00	\$14.00
Doppler with EXERCISE - Noninvasive physiologic studies of lower extremity arteries, at rest and following treadmill	93924	93924	Total*	\$166.00	\$167.00
			TC	\$140.00	\$140.00

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NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
stress testing, complete			26	\$26.00	\$27.00
SPIROMETRY per attached instructions; PRE AND POST (if required) bronchodilator	94060	94060	Total*	\$46.00	\$61.00
			TC	\$35.00	\$47.00
			26	\$11.00	\$14.00
Pulmonary Stress Test: 6 Minute Walk Test, including measurement of heart rate, oximetry, and oxygen titration; with tracings. CPT code 94618	94618	94620	Total*	\$35.00	\$35.00
			TC	\$10.00	\$10.00
			26	\$25.00	\$25.00
Arterial Blood Gas AT REST & EXERCISE (O2 saturation, PO2,PCO2,CO2,PH	82803	82803 2		\$26.00	\$26.00
Diffusion Capacity (DLCO)	94729	94729	Total*	\$59.00	\$57.00
			TC	\$50.00	\$47.00
			26	\$9.00	\$10.00
Pulse oximetry, noninvasive for O2 saturation	94760	94760		\$2.00	\$2.00
Pulse oximetry, multiple determinations (eg, during exercise)	94761	94761		\$3.00	\$4.00
EEG, Waking, with Interpretation	95819	95819	Total*	\$458.00	\$442.00
			TC	\$397.00	\$379.00
			26	\$61.00	\$63.00
EMG, One Extremity	95860	95860	Total*	\$123.00	\$125.00
			TC	\$68.00	\$68.00
			26	\$55.00	\$57.00
EMG, Two Extremities	95861	95861	Total*	\$178.00	\$180.00
			TC	\$91.00	\$90.00
			26	\$87.00	\$90.00
Nerve Conduction, Velocity &/or Latency study; motor, w/o F-wave study, each nerve	95907	95907	Total*	\$99.00	\$100.00
			TC	\$42.00	\$42.00
			26	\$57.00	\$58.00
Nerve Conduction, velocity &/or latency study; sensory or mixed, each nerve	95905	95905	Total*	\$47.00	\$55.00
			TC	\$44.00	\$52.00
			26	\$3.00	\$3.00
Visually Evoked Potential (VEP)	95930	95930	Total*	\$67.00	\$68.00
			TC	\$48.00	\$48.00
			26	\$19.00	\$20.00
Routine Venipuncture or finger/heel/ear stick for collection of specimen(s)	36415	36415		\$3.00	\$3.00
Arterial Puncture, withdrawal of blood for diagnosis	36600	36600		\$31.00	\$32.00
AMA Comprehensive, Extended Metabolic Panel (albumin, t. bilirubin, calcium, carbon dioxide, chloride, creatinine, glucose, alk phosphatase, potassium, t protein, sodium, SGPT, SGOT, BUN)	80053	80053		\$10.00	\$10.00
Carbamazepine (Tegratol)	80156	80156		\$14.00	\$14.00

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	FY2021 NM Fee	FY2020 NM Fee
Valproic Acid (Depakene, Depacote)	80164	80164		\$13.00	\$13.00
Ethosuximide (Zarontin)	80168	80168		\$16.00	\$16.00
Phenobarbital	80184	80184		\$15.00	\$15.00
Phenytoin (Dilantin)	80185	80185		\$13.00	\$13.00
Primidone (Mysoline)	80188	80188		\$16.00	\$16.00
Gabapentin (Neurontin)	80171	80299		\$21.00	\$21.00
Keppra (Levetiracetam)	80177	80299 2		\$13.00	\$13.00
Urinalysis, Routine	81000	81000		\$4.00	\$4.00
Serum Albumin	82040	82040		\$4.00	\$4.00
Ammonia	82140	82140		\$14.00	\$14.00
Amylase, Serum	82150	82150		\$6.00	\$6.00
Total Bilirubin	82247	82247		\$5.00	\$5.00
CPK	82550	82550		\$6.00	\$6.00
Serum Creatinine	82565	82565		\$5.00	\$5.00
Creatinine Clearance	82575	82575		\$9.00	\$9.00
Gases, Blood, any combination of pH, pCO ₂ , pO ₂ , CO ₂ , HCO ₂ (including calculated O ₂ saturation)	82803	82803		\$26.00	\$26.00
Gases, blood, Oxygen saturation only, by direct measurement, except pulse oximetry	82810	82810		\$9.00	\$9.00
Hemoglobin A1C	83036	83036		\$9.00	\$9.00
Acid Phosphatase, Blood	84060	84060		\$7.00	\$7.00
Alkaline Phosphatase	84075	84075		\$5.00	\$5.00
Serum Potassium	84132	84132		\$4.00	\$4.00
Protein, 24 hour urine	84156	84156		\$3.00	\$3.00
BUN	84520	84520		\$3.00	\$3.00
Uric Acid, Serum	84550	84550		\$4.00	\$4.00
Hematocrit (HCT)	85014	85014		\$2.00	\$2.00
Hemoglobin (Hgb)	85018	85018		\$2.00	\$2.00
Automated Hemogram (CBC), Platelet count, and automated complete differential WBC count	85025	85025		\$7.00	\$7.00
Reticulocyte count	85044	85044		\$4.00	\$4.00
INR/Prothrombin Time	85610	85610		\$4.00	\$4.00
Sedimentation rate, erythrocyte, non-automated	85651	85651		\$4.00	\$4.00
Partial Thromboplastin Time	85730	85730		\$6.00	\$6.00
Anti-nuclear Antibodies	86038	86038		\$12.00	\$12.00
C-Reactive Protein	86140	86140		\$5.00	\$5.00
Rheumatoid factor; quantitative and qualitative	86431	86431		\$5.00	\$5.00
Absolute CD4 Count	86361	86361		\$26.00	\$26.00
HIV Antibody (eg, Western Blot)	86689	86689		\$19.00	\$19.00
HIV-1Antigen, w/HIV-1 & HIV-2 antibodies	87389	87389		\$24.00	\$24.00

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Hepatic Function Panel ** (**Includes CMP 80053 and Prothrombin time 85610 and 36415 blood draw)	80076	80076		\$8.00	\$8.00
Claimant travel for Hearings		99999			
ODAR form completion (MSS Mental)	99080	MSS1152OHA		\$15.00	\$15.00
ODAR form completion (MSS Physical)		PSS1151OHA		\$15.00	\$15.00
Review of Records	99199	REVIEWDOCS		\$0.00	\$0.00
Medical Evidence of Record (MER) Fee				\$18.75	\$18.75
Interpreter Services DDU ONLY		00081			
Additional Fee for Administration in Spanish		00100		\$50.00	\$50.00
NOTES:					
*Internist/Family Nurse Practitioner (NP/PA) fee = 85% of \$177					
*Mental Status Examination - LISW fee = 75% of \$116					
Total* = TC + 26 fees					
Indicates new CPT code					

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WAIS-IV/V	96125	01311	\$193.00	\$201.00
WISC-IV/V	96125	01312	\$189.00	\$197.00
Bayley Scales II of Infant Development - Mental and Motor	96112	01315	\$175.00	\$186.00
WPPSI-R	96112	01316	\$175.00	\$186.00
Leiter-3	96112	01317	\$140.00	\$149.00
Wechsler Memory Scale-IV	96116	01326	\$103.00	\$105.00
Wide Range Achievement Test	96116	01325	\$103.00	\$105.00
Trails A & B	96116	01327	\$77.00	\$79.00
Test of Native/Non-Verbal Intelligence III	96125	01335	\$112.00	\$117.00
Wide Range Assessment of Memory and	96116	01351	\$103.00	\$105.00
Wechsler Individual Achievement Test	96125	01352	\$112.00	\$117.00
Vineland Adaptive Behavior Scale	96116	01353	\$77.00	\$79.00

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Chest, AP & Lateral <i>26 is for the doctor's</i>	71046	71020	Total *	\$33.00	\$33.00
			TC	\$22.00	\$21.00
			26	\$11.00	\$12.00
Cervical Spine, AP & Lateral	72040	72040	Total *	\$39.00	\$39.00
			TC	\$28.00	\$27.00
			26	\$11.00	\$12.00
Thoracic Spine, AP & Lateral	72070	72070	Total *	\$32.00	\$32.00
			TC	\$22.00	\$21.00
			26	\$10.00	\$11.00
Scoliosis Study-supine and erect	72082	72090	Total *	\$70.00	\$69.00
			TC	\$54.00	\$52.00
			26	\$16.00	\$17.00
Lumbo-sacral Spine, AP & Lateral	72100	72100	Total *	\$39.00	\$39.00
			TC	\$28.00	\$27.00
			26	\$11.00	\$12.00
Pelvis, AP	72170	72170	Total *	\$28.00	\$29.00
			TC	\$19.00	\$20.00
			26	\$9.00	\$9.00
Sacroiliac Joints 2 views	72200	72200	Total *	\$32.00	\$33.00
			TC	\$24.00	\$23.00
			26	\$8.00	\$10.00
Right Clavicle, 2 views	73000	73000	Total *	\$32.00	\$30.00
			TC	\$24.00	\$21.00
			26	\$8.00	\$9.00
Left Clavicle, 2 views		73001		see above	
Right Scapula, complete	73010	73010	Total *	\$23.00	\$28.00
			TC	\$14.00	\$19.00
			26	\$9.00	\$9.00
Left Scapula, complete		73011		see above	
Right Shoulder, 2 views	73030	73030	Total *	\$35.00	\$34.00
			TC	\$25.00	\$24.00
			26	\$10.00	\$10.00
Left Shoulder, 2 views		73031		see above	
Right Humerus, 2 views	73060	73060	Total *	\$32.00	\$32.00
			TC	\$24.00	\$23.00
			26	\$8.00	\$9.00
Left Humerus, 2 views		73061		see above	
Right Elbow, AP and Lateral views	73070	73070	Total *	\$28.00	\$29.00
			TC	\$20.00	\$20.00
			26	\$8.00	\$9.00
Left Elbow, AP and Lateral views		73071		see above	
Right Forearm, AP and Lateral views	73090	73090	Total *	\$29.00	\$29.00
			TC	\$21.00	\$20.00
			26	\$8.00	\$9.00
Left Forearm, AP and Lateral views		73091		see above	
Right Wrist, AP and Lateral views	73100	73100	Total *	\$33.00	\$33.00
			TC	\$25.00	\$24.00
			26	\$8.00	\$9.00
Left Wrist, AP and Lateral views		73101		see above	
Right Hand, 2 views	73120	73120	Total *	\$30.00	\$31.00
			TC	\$22.00	\$22.00
			26	\$8.00	\$9.00
Left Hand, 2 views		73121		see above	
Right Hip, 2 views	73502	73510	Total *	\$46.00	\$46.00
			TC	\$35.00	\$34.00

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY20201 Fee	NM FY2020 Fee
			26	\$11.00	\$12.00
Left Hip, 2 views		73511		see above	
Right Femur, AP and Lateral views	73551	73550	Total *	\$29.00	\$30.00
			TC	\$21.00	\$21.00
			26	\$8.00	\$9.00
Left Femur, AP and Lateral views		73551		see above	
Right Knee, AP and Lateral views, Standing	73560	73560	Total *	\$34.00	\$34.00
			TC	\$26.00	\$25.00
			26	\$8.00	\$9.00
Left Knee, AP and Lateral views,		73561		see above	
Right Tibia-Fibula, AP and Lateral views	73590	73590	Total *	\$31.00	\$31.00
			TC	\$23.00	\$22.00
			26	\$8.00	\$9.00
Left Tibia-Fibula, AP and Lateral		73591		see above	
Right Ankle, AP and Lateral views	73600	73600	Total *	\$32.00	\$32.00
			TC	\$24.00	\$23.00
			26	\$8.00	\$9.00
Left Ankle, AP and Lateral views		73601		see above	
Right Foot, AP and Lateral views	73620	73620	Total *	\$28.00	\$28.00
			TC	\$20.00	\$20.00
			26	\$8.00	\$8.00
Left Foot, AP and lateral views		73621		see above	
Right Calcaneus, AP and Lateral views	73650	73650	Total *	\$28.00	\$29.00
			TC	\$20.00	\$20.00
			26	\$8.00	\$9.00
Left Calcaneus, AP and Lateral views		73651		see above	
Bone Age Studies, with Interpretation	77072	76020	Total *	\$26.00	\$26.00
			TC	\$16.00	\$16.00
			26	\$10.00	\$10.00
Right & Left Shoulder, AP & Lateral	73030	X3030	Total *	\$70.00	\$68.00
			TC	\$50.00	\$48.00
			26	\$20.00	\$20.00
Right & Left Humerus, AP & Lateral	73060	X3060	Total *	\$64.00	\$64.00
			TC	\$48.00	\$46.00
			26	\$16.00	\$18.00
Right & Left Elbow, AP & Lateral	73070	X3070	Total *	\$56.00	\$58.00
			TC	\$40.00	\$40.00
			26	\$16.00	\$18.00
Right & Left Forearm, AP & Lateral	73090	X3090	Total *	\$58.00	\$58.00
			TC	\$42.00	\$40.00
			26	\$16.00	\$18.00
Right & Left Wrist, AP & Lateral	73100	X3100	Total *	\$66.00	\$66.00
			TC	\$50.00	\$48.00
			26	\$16.00	\$18.00
Right & Left Hands, AP & Lateral	73120	X3120	Total *	\$60.00	\$62.00
			TC	\$44.00	\$44.00
			26	\$16.00	\$18.00
Right & Left Hips, AP & Lateral	73510	X3510	Total *	\$92.00	\$92.00
			TC	\$70.00	\$68.00
			26	\$22.00	\$24.00
Right & Left Femurs, AP & Lateral	73550	X3550	Total *	\$58.00	\$60.00
			TC	\$42.00	\$42.00
			26	\$16.00	\$18.00
			Total *	\$68.00	\$68.00

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY20201 Fee	NM FY2020 Fee
Right & Left Knees, AP & Lateral	73560	X3560	TC	\$52.00	\$50.00
			26	\$16.00	\$18.00
			<i>Total *</i>	\$62.00	\$62.00
Right & Left Tibia-Fibula, AP & Lateral	73590	X3590	TC	\$46.00	\$44.00
			26	\$16.00	\$18.00
			<i>Total *</i>	\$64.00	\$64.00
Right & Left Ankles, AP & Lateral	73600	X3600	TC	\$48.00	\$46.00
			26	\$16.00	\$18.00
			<i>Total *</i>	\$56.00	\$56.00
Right & Left Feet, AP & Lateral	73620	X3620	TC	\$40.00	\$40.00
			26	\$16.00	\$16.00
			<i>Total *</i>	\$56.00	\$58.00
Right & Left Calcaneus, AP & Lateral	73650	X3650	TC	\$40.00	\$40.00
			26	\$16.00	\$18.00
	new CPT				

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY2021 Fee	NM FY2020 Fee
Interpreter Services DDU ONLY		00081			
Additional Fee for Administration in Spanish		00100			
Routine Venipuncture or finger/heel/ear stick for collection of specimen(s)	36415	36415		\$3.00	\$3.00
Arterial Puncture, withdrawal of blood for diagnosis	36600	36600		\$31.00	\$32.00
Goldmann or ARC	92082	92082		\$48.00	\$49.00
Humphrey VTAP	92083	92083		\$65.00	\$65.00
Optical Coherence Tomography - Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; optic nerve	92133	92133		\$38.00	\$39.00
Optical Coherence Tomography - Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; retina	92134	92134		\$42.00	\$42.00
Basic Comprehensive Audiometry, Aided Pure Tone, Air & Bone with Speech Recognition Bone Speech Threshold & Discrimination (Audiologist Exam)	92557	92557		\$41.00	\$40.00
Tympanogram	92567	92567		\$17.00	\$16.00
Brainstem Evoked Auditory Response Recording	92652	92585		\$124.00	\$138.00
Cerumen Removal	69210	69210 1		\$50.00	\$51.00
Cerumen Removal - Bilateral	69210	69210 2		\$100.00	\$102.00
HINT (Hearing in Noise Test) - diagnostic analysis of cochlear implant - less than 7 yoa, w/programming	92601	92601		\$176.00	\$177.00
HINT (Hearing in Noise Test) - diagnostic analysis of cochlear implant - greater than 7 yoa, w/programming	92603	92603		\$143.00	\$166.00
EKG, Standard 12 Lead Resting with Interpretation and Tracings	93000	93000		\$15.00	\$17.00
RESTING EKG WITH CLAIMANT STANDING & EXERCISE TREADMILL WITH INTERPRETATION & TRACINGS	93015	93015		\$73.00	\$74.00
Electrocardiographic monitoring for 24 hours by continuous ECG with report, physician review and interpretation	93224	93224		\$80.00	\$91.00
Echocardiography, real-time with image documentation (2D) with M-mode complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	93306	93306	Total *	\$209.00	\$215.00
			TC	\$134.00	\$135.00
			26	\$75.00	\$80.00
Echocardiography, real-time with image documentation (2D) with M-mode complete	93307	93307	Total *	\$147.00	\$146.00
			TC	\$99.00	\$97.00
			26	\$48.00	\$49.00
Stress Echocardiography, real-time with image documentation (2D), during rest and cardiovascular stress test, including ECG monitoring, with interpretation and report	93350	93350	Total *	\$198.00	\$197.00
			TC	\$123.00	\$119.00
			26	\$75.00	\$78.00
Doppler - Noninvasive physiologic studies of upper or lower extremity arteries (ankle/brachial indices)	93922	93922	Total *	\$86.00	\$87.00
			TC	\$72.00	\$73.00
			26	\$14.00	\$14.00

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	Modifier	NM FY2021 Fee	NM FY2020 Fee
Doppler with EXERCISE - Noninvasive physiologic studies of lower extremity arteries, at rest and following treadmill stress testing, complete	93924	93924	Total *	\$166.00	\$167.00
			TC	\$140.00	\$140.00
			26	\$26.00	\$27.00
SPIROMETRY per attached instructions; PRE AND POST (if required) bronchodilator	94060	94060	Total *	\$46.00	\$61.00
			TC	\$35.00	\$47.00
			26	\$11.00	\$14.00
Pulmonary Stress Test: 6 Minute Walk Test, including measurement of heart rate, oximetry, and oxygen titration; with tracings.	94618	94620	Total *	\$35.00	\$35.00
			TC	\$10.00	\$10.00
			26	\$25.00	\$25.00
Arterial Blood Gas AT REST & EXERCISE (O2 saturation, PO2,PCO2,CO2,PH	82803	82803 2		\$26.00	\$26.00
Diffusion Capacity (DLCO)	94729	94729	Total *	\$59.00	\$57.00
			TC	\$50.00	\$47.00
			26	\$9.00	\$10.00
Pulse oximetry, noninvasive for O2 saturation	94760	94760		\$2.00	\$2.00
Pulse oximetry, multiple determinations (eg, during exercise)	94761	94761		\$3.00	\$4.00
EEG, Waking, with Interpretation	95819	95819	Total *	\$458.00	\$442.00
			TC	\$397.00	\$379.00
			26	\$61.00	\$63.00
EMG, One Extremity	95860	95860	Total *	\$123.00	\$125.00
			TC	\$68.00	\$68.00
			26	\$55.00	\$57.00
EMG, Two Extremities	95861	95861	Total *	\$178.00	\$180.00
			TC	\$91.00	\$90.00
			26	\$87.00	\$90.00
Nerve Conduction, Velocity &/or Latency study; motor, w/o F-wave study, each nerve	95907	95907	Total *	\$99.00	\$100.00
			TC	\$42.00	\$42.00
			26	\$57.00	\$58.00
Nerve Conduction, velocity &/or latency study; sensory or mixed, each nerve	95905	95905	Total *	\$47.00	\$55.00
			TC	\$44.00	\$52.00
			26	\$3.00	\$3.00
Visually Evoked Potential (VEP)	95930	95930	Total *	\$67.00	\$68.00
			TC	\$48.00	\$48.00
			26	\$19.00	\$20.00
Claimant travel for Hearings		99999			
ODAR form completion (MSS Mental)	99080	MSS1152OHA		\$15.00	\$15.00
ODAR form completion (MSS Physical)		PSS1151OHA		\$15.00	\$15.00
Review of Records	99199	REVIEWDOCS		\$0.00	\$0.00
Medical Evidence of Record (MER) Fee				\$18.75	\$18.75

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	NM FY2021 Fee	NM FY2020 Fee
AMA Comprehensive, Extended Metabolic Panel (albumin, t. bilirubin, calcium, carbon dioxide, chloride, creatinine, glucose, alk phosphatase, potassium, t protein, sodium, SGPT, SGOT, BUN)	80053	80053	\$10.00	\$10.00
Carbamazepine (Tegratol)	80156	80156	\$14.00	\$14.00
Valproic Acid (Depakene, Depacote)	80164	80164	\$13.00	\$13.00
Ethosuximide (Zarontin)	80168	80168	\$16.00	\$16.00
Phenobarbital	80184	80184	\$15.00	\$15.00
Phenytoin (Dilantin)	80185	80185	\$13.00	\$13.00
Primidone (Mysoline)	80188	80188	\$16.00	\$16.00
Gabapentin (Neurontin)	80171	80299	\$21.00	\$21.00
Keppra (Levetiracetam)	80177	80299 2	\$13.00	\$13.00
Urinalysis, Routine	81000	81000	\$4.00	\$4.00
Serum Albumin	82040	82040	\$4.00	\$4.00
Ammonia	82140	82140	\$14.00	\$14.00
Amylase, Serum	82150	82150	\$6.00	\$6.00
Total Bilirubin	82247	82247	\$5.00	\$5.00
CPK	82550	82550	\$6.00	\$6.00
Serum Creatinine	82565	82565	\$5.00	\$5.00
Creatinine Clearance	82575	82575	\$9.00	\$9.00
Gases, Blood, any combination of pH, pCO ₂ , pO ₂ , CO ₂ , HCO ₂ (including calculated O ₂ saturation)	82803	82803	\$26.00	\$26.00
Gases, blood, Oxygen saturation only, by direct measurement, except pulse oximetry	82810	82810	\$9.00	\$9.00
Hemoglobin A1C	83036	83036	\$9.00	\$9.00
Acid Phosphatase, Blood	84060	84060	\$7.00	\$7.00
Alkaline Phosphatase	84075	84075	\$5.00	\$5.00
Serum Potassium	84132	84132	\$4.00	\$4.00
Protein, 24 hour urine	84156	84156	\$3.00	\$3.00

2021 Fee Schedule

NM Long Description	MC CPT Code	NM CPT	NM FY2021 Fee	NM FY2020 Fee
BUN	84520	84520	\$3.00	\$3.00
Uric Acid, Serum	84550	84550	\$4.00	\$4.00
Hematocrit (HCT)	85014	85014	\$2.00	\$2.00
Hemoglobin (Hgb)	85018	85018	\$2.00	\$2.00
Automated Hemogram (CBC), Platelet count, and automated complete differential WBC count	85025	85025	\$7.00	\$7.00
Reticulocyte count	85044	85044	\$4.00	\$4.00
INR/Prothrombin Time	85610	85610	\$4.00	\$4.00
Sedimentation rate, erythrocyte, non-automated	85651	85651	\$4.00	\$4.00
Partial Thromboplastin Time	85730	85730	\$6.00	\$6.00
Anti-nuclear Antibodies	86038	86038	\$12.00	\$12.00
C-Reactive Protein	86140	86140	\$5.00	\$5.00
Rheumatoid factor; quantitative and qualitative	86431	86431	\$5.00	\$5.00
Absolute CD4 Count	86361	86361	\$26.00	\$26.00
HIV Antibody (eg, Western Blot)	86689	86689	\$19.00	\$19.00
HIV-1Antigen, w/HIV-1 & HIV-2 antibodies	87389	87389	\$24.00	\$24.00
Hepatic Function Panel **	80076	80053L	\$8.00	\$8.00
(**Includes CMP 80053 and Prothrombin time 85610 and 36415 blood draw)				