

## LOUISIANA MEDICAID LABORATORY AND RADIOLOGY (NON-HOSPITAL) FEE SCHEDULE

FEES EFFECTIVE FOR AUGUST 01, 2010 - DECEMBER 31, 2010

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
TS	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	G0202	SCREENING MAMMOGRAPH,DIGITAL,BILATER	102.16	40 99			F		X		
05	G0202	SCREENING MAMMOGRAPHY,DIGITAL,BILATE	40.87	40 99			F		X		
03	G0204	DIAGNOSTIC MAMMOGRAPHY,DIGITAL,BILAT	115.86				F				
05	G0204	DIAGNOSTIC MAMMOGRAPHY,DIGITAL,BILAT	46.35				F				
03	G0206	DIAGNOSTIC MAMMOGRAPHY DIGITAL UNILA	92.54				F				
05	G0206	DIAGNOSTIC MAMMOGRAPHY,DIGITAL UNILA	37.02				F				
03	70010	MYELOGRAPHY; INTERPRETATION ONLY	140.51								
05	70010	MYELOGRAPHY; INTERPRETATION ONLY	56.20								
03	70015	CISTERNOGRAPHY; INTERPRET ONLY	92.41								
05	70015	CISTERNOGRAPHY; INTERPRET ONLY	36.97								
03	70030	X-RAY EYE; DETECT FOREIGN BODY	18.54								X
05	70030	X-RAY EYE; DETECT FOREIGN BODY	7.41								X
03	70100	X-RAY MANDIBLE; PARTIAL	20.57								
05	70100	X-RAY MANDIBLE; PARTIAL	8.22								
03	70110	X-RAY MANDIBLE; COMPLETE	26.31								
05	70110	X-RAY MANDIBLE; COMPLETE	10.52								
03	70120	X-RAY MASTOIDS;L3 VIEWS PER SIDE	23.11								X
05	70120	X-RAY MASTOIDS;L3 VIEWS PER SIDE	9.23								X
03	70130	COMPLETE X-RAY,MASTOIDS-3 VIEWS/SIDE	35.87								X
05	70130	COMPLETE X-RAY,MASTOIDS-3 VIEWS/SIDE	14.34								X
03	70134	X-RAY INTERNAL AUDITORY MEATI	32.14								X
05	70134	X-RAY INTERNAL AUDITORY MEATI	12.85								X
03	70140	X-RAY FACIAL BONES; L3 VIEWS	21.88								
05	70140	X-RAY FACIAL BONES; L3 VIEWS	8.75								
03	70150	X-RAY FACIAL BONES; COMPLETE	29.35								
05	70150	X-RAY FACIAL BONES; COMPLETE	11.74								
03	70160	X-RAY NASAL BONES; COMPLETE	21.02								
05	70160	X-RAY NASAL BONES; COMPLETE	8.41								
03	70170	DACRYOCYSTOGRAPHY; INTERPRET ONLY	36.32								
05	70170	DACRYOCYSTOGRAPHY; INTERPRET ONLY	14.52								
03	70190	X-RAY OPTIC FORAMINA	24.17								X
05	70190	X-RAY OPTIC FORAMINA	9.67								X
03	70200	X-RAY ORBITS,COMPLETE,4+ VIEWS	30.43								X
05	70200	X-RAY ORBITS,COMPLETE,4+ VIEWS	12.17								X
03	70210	X-RAY SINUSES; PARANASAL; L3 VIEWS	21.55								
05	70210	X-RAY SINUSES; PARANASAL; L3 VIEWS	8.61								
03	70220	X-RAY SINUSES; PARANASAL; COMPLETE	27.96								
05	70220	X-RAY SINUSES; PARANASAL; COMPLETE	11.19								
03	70240	X-RAY SELLA TURCICA	19.12								
05	70240	X-RAY SELLA TURCICA	7.65								
03	70250	X-RAY SKULL; LESS THAN 4 VIEWS	24.77								
05	70250	X-RAY SKULL; LESS THAN 4 VIEWS	9.90								
03	70260	X-RAY SKULL; COMPLETE	34.53								
05	70260	X-RAY SKULL; COMPLETE	13.80								
03	70300	X-RAY TEETH; SINGLE VIEW	10.75								
05	70300	X-RAY TEETH; SINGLE VIEW	4.30								

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1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	70310	X-RAY TEETH; PARTIAL EXAM	20.98								
05	70310	X-RAY TEETH; PARTIAL EXAM	8.40								
03	70320	X-RAY TEETH; COMPLETE; FULL MOUTH	31.19								
05	70320	X-RAY TEETH; COMPLETE; FULL MOUTH	12.48								
03	70328	X-RAY TEMPOROMAN DIBULAR JNT; UNIL	20.06								
05	70328	X-RAY TEMPOROMAN DIBULAR JNT;UNIL	8.03								
03	70330	ARTHROTOMOGRAPHY;TEMPOROMAND.-COMPLT	31.51								
05	70330	X-RAY TEMPOROMANDIBULAR JNT; BIL	12.60								
03	70332	TEMPOROMAND.ARTHROGRAPHY;SUPER/INTER	68.64								
05	70332	TEMPOROMAND.ARTHROGRAPHY;SUPER/INTER	27.46								
03	70336	MRI,TEMPOROMANDIBULAR JOINT	263.00								
05	70336	MRI,TEMPOROMANDIBULAR JOINT	105.21								
03	70350	CEPHALOGRAM; ORTHODONTIC	15.37								
05	70350	CEPHALOGRAM; ORTHODONTIC	6.14								
03	70355	ORTHO PANTOGRAM	20.22								
05	70355	ORTHO PANTOGRAM	8.08								
03	70360	X-RAY NECK; SOFT TISSUE	18.05								
05	70360	X-RAY NECK; SOFT TISSUE	7.22								
03	70370	X-RAY PHARYNX/LARYNX W/FLUROSCPY	48.22								
05	70370	X-RAY PHARYNX/LARYNX W/FLUROSCPY	19.29								
03	70373	LARYNGOGRAPHY; INTERPRET ONLY	59.70								
05	70373	LARYNGOGRAPHY; INTERPTRY ONLY	23.88								
03	70380	X-RAY SALIVARY GLANDFOR CALCULUS	25.05								
05	70380	X-RAY SALIVARY GLANDFOR CALCULUS	10.02								
03	70390	SIALOGRAPHY; INTERPRETATION ONLY	65.92								
05	70390	SIALOGRAPHY; INTERPRETATION ONLY	26.37								
03	70450	CAT,HEAD/BRAIN;W/OUT CONTRAST MATER	152.64								
05	70450	CAT,HEAD/BRAIN;W/OUT CONTRAST MATER.	61.06								
03	70460	CAT,HEAD/BRAIN;W/ CONTRAST MATERIAL	194.22								
05	70460	CAT,HEAD/BRAIN;W/CONTRAST MATERIAL	77.69								
03	70470	CAT,HEAD/BRAIN;W/OUT-W/ CONTRAST	235.38								
05	70470	CAT,HEAD/BRAIN;W/OUT-W/ CONTRAST	94.16								
03	70480	TOMOGRAPHY;ORBIT, SELLA, POSTERIOR FOS	170.39								
05	70480	TOMOGRAPHY;ORBIT, SELLA, POSTERIOR FOS	68.16								
03	70481	TOMOGRAPHY;ORBIT, ETC, WITH/CONTRAST M	230.06								
05	70481	TOMOGRAPHY;ORBIT, ETC WITH/CONTRAS MA	92.02								
03	70482	CAT, ORBIT, ETC., W/OUT-W/ CONTRAST MAT	263.70								
05	70482	CAT, ORBIT, ETC.; W/OUT-W/ CONTRAST MAT	105.48								
03	70486	TOMOGRAPHY;MAXILLOFACIAL W/OUT CONTR	165.22								
05	70486	TOMOGRAPHY;MAXILLOFACIAL AREA	66.10								
03	70487	TOMOGRAPHY;MAXILLOFAC, WITH CONTRAST	222.10								
05	70487	TOMOGRAPHY, MAXILLOFAC; WITH CONTRAS M	88.84								
03	70488	CAT; MAXILL.; W/OUT-W/ CONTRAST MATER.	262.66								
05	70488	CAT; MAXILL.; W/OUT-W/ CONTRAST MATER	105.06								
03	70490	CAT, SOFT TISSUE NECK; W/OUT CONTRAST	170.48								
05	70490	CAT, SOFT TISSUE NECK, W/OUT CONTRAST	68.18								

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TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	70491	CAT.SOFT TISSUE NECK;W/ CONTRAST MAT	220.68								
05	70491	CAT,SOFT TISSUE NECK;W/ CONTRAST MAT	88.28								
03	70492	CAT,NECK;W/OUT-W/ CONTRAST MATERIAL	263.75								
05	70492	CAT,NECK;W/OUT-W/CONTRAST MATERIAL	105.51								
03	70496	CT ANGIOGRAPHY HEAD	289.31								X
05	70496	CT ANGIOGRAPHY HEAD	76.09								X
03	70498	CT ANGIOGRAPHY NECK	289.31								X
05	70498	CT ANGIOGRAPHY NECK	76.09								X
03	70540	MRI-ORBIT,FACE AND NECK	280.63								
05	70540	MRI-ORBIT,FACE AND NECK	112.25								
03	70542	MR IMAGING ORBIT, FACE, AND NECK	398.50								X
05	70542	MR IMAGING ORBIT, FACE, AND NECK	159.40								X
03	70543	MR IMAGING ORBIT, FACE, AND NECK	528.85								
05	70543	MR IMAGING ORBIT, FACE, AND NECK	211.54								
03	70544	MR ANGIOGRAPHY HEAD	355.86								X
05	70544	MR ANGIOGRAPHY, HEAD	142.35								X
03	70545	MR ANGIOGRAPHY	380.04								X
05	70545	MR ANGIOGRAPHY	152.02								X
03	70546	MR ANGIOGRAPHY NECK	511.48								X
05	70546	MR ANGIOGRAPHY NECK	204.59								X
03	70547	MR ANGIOGRAPHY NECK; WITHOUT CONTRAS	355.53								X
05	70547	MR ANGIOGRAPHY NECK WITHOUT CON	142.21								X
03	70548	MR ANGIOGRAPHY NECK WITH CONSTRAST	379.97								X
05	70548	MR ANGIOGRAPHY NECK WITH CONSTRAST	151.99								X
03	70549	MR ANGIOGRAPHY NECK WITHOUT CONTRAS	511.48								X
05	70549	MR ANGIOGRAPHY NECK WITHOUT CONTRAS	204.59								X
03	70551	MRI-BRAIN/INCLUDING BRAIN STEM	280.63								
05	70551	MRI-BRAIN/INCLUDING BRAIN STEM	112.25								
03	70552	MRI,BRAIN W CONTRAST MATERIAL	336.67								
05	70552	MRI,BRAIN W CONTRAST MATERIAL	134.67								
03	70553	MAGNETIC RESONANCE (EG, PROTON) IMAG	539.95								
05	70553	MAGNETIC RESONANCE I, BRAIN	215.99								
05	70555	MAGNETIC RESONANCE IMAGING, BRAIN, F	76.40								
05	70557	MRI BRAIN W/O DYE	MP								X
05	70558	MRI BRAIN W/ DYE	MP								X
05	70559	MRI BRAIN W/O & W/ DYE	MP								X
03	71010	X-RAY CHEST; POSTEROANTERIOR	17.61								X
05	71010	X-RAY CHEST; POSTEROANTERIOR	7.05								X
03	71015	X-RAY CHEST; STEREO;POSTEROANTER	20.40								
05	71015	X-RAY CHEST; STEREO;POSTEROANTER	8.16								
03	71020	X-RAY CHEST; TWO VIEWS	23.45								X
05	71020	X-RAY CHEST; TWO VIEWS	9.39								X
03	71021	X-RAY CHEST; APICAL LORDOTIC	27.82								
05	71021	X-RAY CHEST; APICAL LORDOTIC	11.13								
03	71022	X-RAY CHEST; OBLIQUE PROJECTIONS	30.77								X
05	71022	X-RAY CHEST; OBLIQUE PROJECTIONS	12.30								X

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TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	71023	X-RAY CHEST,2 VIEWS,FRONT,LAT.FLUORO	41.66								X
05	71023	X-RAY CHEST,2 VIEWS,FRONT,LAT.FLUORO	16.66								
03	71030	X-RAY CHEST; MINIMUM OF 4 VIEWS	31.74								
05	71030	X-RAY CHEST; MINIMUM OF 4 VIEWS	12.69								
03	71034	X-RAY CHEST W/FLUOROSCOPY	60.45								
05	71034	X-RAY CHEST W/FLUOROSCOPY	24.18								
03	71035	X-RAY CHEST; SPECIAL VIEWS	22.30								
05	71035	X-RAY CHEST; SPECIAL VIEWS	8.93								
03	71040	CONTRAST X-RAY OF BRONCHI	63.61								
05	71040	CONTRAST X-RAY OF BRONCHI	25.44								
03	71060	CONTRAST X-RAY OF BRONCHI	92.09								
05	71060	CONTRAST X-RAY OF BRONCHI	36.82								
03	71090	X-RAY & PACEMAKER INSERTION	65.49								
05	71090	X-RAY & PACEMAKER INSERTION	26.20								
03	71100	X-RAY EXAM OF RIBS	22.49								
05	71100	X-RAY EXAM OF RIBS	8.99								
03	71101	X-RAY EXAM RIBS-POSTEROANTER CHEST	27.13								
05	71101	X-RAY EXAM RIBS;POSTERANTERIOR CHEST	10.85								
03	71110	X-RAY EXAM OF RIBS	29.02								
05	71110	X-RAY EXAM OF RIBS	11.61								
03	71111	X-RAY RIBS,BILAT;POSTEROANTERI CHEST	35.55								
05	71111	X-RAY RIBS;BILAT/POSTEROANTER CHEST	14.21								
03	71120	X-RAY EXAM OF BREASTBONE	23.42								
05	71120	X-RAY EXAM OF BREASTBONE	9.38								
03	71130	X-RAY EXAM OF BREASTBONE	25.89								
05	71130	X-RAY EXAM OF BREASTBONE	10.36								
03	71250	CAT,THORAX;W.OUT CONTRAST MATERIAL	172.86								
05	71250	CAT,THORAX W/OUT CONTRAST MATERIAL	69.14								
03	71260	CAT,THORAX, W/ CONTRAST MATERIAL	224.75								
05	71260	CAT,THORAX,W/ CONTRAST MATERIAL	89.90								
03	71270	CAT,THORAX;W/OUT-W/ CONTRAST MATER.	261.69								
05	71270	CAT,THORAX;W/OUT-W/ CONTRAST MATER.	104.68								
03	71275	CT ANGIOGRAPHY, CHEST	310.03								
05	71275	CT ANGIOGRAPHY, CHEST	124.01								
03	71550	MRI-CHEST/LYPHADENOPATHY EVAL	284.76								
05	71550	MRI-CHEST/LYMPHADENOPATHY EVAL	113.91								
03	71551	MRI CHEST W/DYE	404.15								
05	71551	MRI CHEST W/DYE	161.66								
03	71552	MRI CHEST W/O&W DYE	532.89								
05	71552	MRI CHEST W/O&W DYE	213.15								
03	71555	MAGNETIC RESONANCE ANGIOGRAPHY, CHES	370.23								
05	71555	MAGNETIC RESONANCE ANGIOGRAPHY, CHES	148.09								
03	72010	X-RAY EXAM OF SPINE	44.71								
05	72010	X-RAY EXAM OF SPINE	17.88								
03	72020	X-RAY SPINE,SINGLE VIEW	16.22								
05	72020	X-RAY SPINE,SINGLE VIEW	6.50								

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TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	72040	X-RAY EXAM OF NECK SPINE	24.71								
05	72040	X-RAY EXAM OF NECK SPINE	9.89								
03	72050	X-RAY EXAM OF NECK SPINE	35.25								
05	72050	X-RAY EXAM OF NECK SPINE	14.11								
03	72052	X-RAY EXAM OF NECK SPINE	44.17								
05	72052	X-RAY EXAM OF NECK SPINE	17.66								
03	72069	RADIOLOGIC EXAM SPINE,THORACOLUMBAR	24.52								
05	72069	RADIOLOGIC EXAM SPINE THORACOLUMBAR	9.81								
03	72070	X-RAY EXAM OF THORAX SPINE	23.95								
05	72070	X-RAY EXAM OF THORAX SPINE	9.58								
03	72072	X-RAY SPINE;THORACIC,ANTEROPOS;LATER	26.48								
05	72072	X-RAY SPINE;THORACIC,ANTEROPOS/LATER	10.60								
03	72074	X-RAY COMPLETE THORACIC SPINE 4 VIEW	31.21								
05	72074	X-RAY COMPLETE THORACIC SPINE 4 VIEW	12.48								
03	72080	X-RAY EXAM OF TRUNK SPINE	24.67								
05	72080	X-RAY EXAM OF TRUNK SPINE	9.87								
03	72090	X-RAY EXAM OF TRUNK SPINE	30.64								
05	72090	X-RAY EXAM OF TRUNK SPINE	12.27								
03	72100	X-RAY EXAM OF LOWER SPINE	25.95								
05	72100	X-RAY EXAM OF LOWER SPINE	10.39								
03	72110	X-RAY EXAM OF LOWER SPINE	36.25								
05	72110	X-RAY EXAM OF LOWER SPINE	14.50								
03	72114	X-RAY EXAM OF LOWER SPINE	46.89								
05	72114	X-RAY EXAM OF LOWER SPINE	18.77								
03	72120	X-RAY EXAM OF LOWER SPINE	32.46								
05	72120	X-RAY EXAM OF LOWER SPINE	12.98								
03	72125	CAT SCAN,CERVICAL SPINE W/OUT C M	172.86								
05	72125	CAT SCAN CERVICAL SPINE W/OUT C M	69.14								
03	72126	CAT SCAN CERVICAL SPINE W/CONT MATER	223.93								
05	72126	CAT SCAN;CERVICAL SPINE/CONTRAS MATE	89.58								
03	72127	CAT-CERVICAL SPINE;W/O,W/ CONTRAST	257.83								
05	72127	CAT-CERVICAL SPINE;W/OUT,W/ CONTRAST	103.13								
03	72128	CAT SCAN,THORACIC SPINE W/OUT C MATE	172.86								
05	72128	CAT SCAN THORACIC SPINE W/OUT C M	69.14								
03	72129	CAT SCAN,THORACIC SPINE W/CON MATERI	224.17								
05	72129	CAT SCAN,THORACIC SPINE W/CON MATERI	89.68								
03	72130	CAT-THORACIC SPINE;W/OUT,W/CONTRAST	257.83								
05	72130	CAT-THORACIC SPINE;W/OUT,W/ CONTRAST	103.13								
03	72131	CAT SCAN LUMBAR W/OUT CONTRAST	172.86								
05	72131	CAT SCAN LUMBAR W/OUT CONTRAST	69.14								
03	72132	CAT SCAN LUMBAR SPINE W/CONT MATERIA	223.93								
05	72132	CAT SCAN LUMBAR SPINE W/CONT MATERIA	89.58								
03	72133	CAT-LUMBAR SPINE;W/OUT,W/CONTRAST	257.83								
05	72133	CAT-LUMBAR SPINE;W/OUT,W/ CONTRAST	103.13								
03	72141	MRI,SPINAL CANAL...;CERVICAL	284.76								
05	72141	MRI,SPINAL CANAL...;CERVICAL	113.91								

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TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	72142	MRI,SPINAL CANAL & CONTENTD,CERVICAL	341.65								
05	72142	MRI,SPINAL CANAL&CONTENTS,CERVICAL	136.67								
03	72146	MRI,SPINAL CANAL W/O CONTRAST MATERI	310.35								
05	72146	MRI,SPINAL CANAL W/O CONTRAST MATERI	124.14								
03	72147	MRI,SPINAL CANAL, THORACIC W CONTRAS	341.65								
05	72147	MRI,SPINAL CANAL, THORACIC W CONTRAS	136.67								
03	72148	MRI,SPINAL CANAL, LUMBAR W/O CONTRAS	306.21								
05	72148	MRI,SPINAL CANAL, LUMBAR W/O CONTRAS	122.48								
03	72149	MRI,SPINAL CANAL, LUMBAR W CONTRAST	336.67								
05	72149	MRI,SPINAL CANAL,LUMBAR W CONTRAST	134.67								
03	72156	MAGNETIC RESONANCE (EG, PROTON) IMAG	549.87								
05	72156	MAGNETIC RESONANCE I, SPINAL CANAL	219.94								
03	72157	MAGNETIC RESONANCE (EG, PROTON) IMAG	549.61								
05	72157	MAGNETIC RESONANCE I, SPINAL CANAL	219.84								
03	72158	MAGNETIC RESONANCE (EG, PROTON) IMAG	539.95								
05	72158	MAGNETIC RESONANCE I, SPINAL CANAL	215.99								
03	72159	MAGNETIC RESONANCE ANGIOGRAPHY, SPIN	319.21								
05	72159	MAGNETIC RESONANCE ANGIOGRAPHY, SPIN	127.67								
03	72170	X-RAY EXAM OF PELVIS	18.77								
05	72170	X-RAY EXAM OF PELVIS	7.51								
03	72190	X-RAY EXAM OF PELVIS	26.16								
05	72190	X-RAY EXAM OF PELVIS	10.46								
03	72191	CT ANGIOGRAPH PELV W/O&W DYE	300.20								
05	72191	CT ANGIOGRAPH PELV W/O&W DYE	120.09								
03	72192	CAT,PELVIS;W/OUT CONTRAST MATERIAL	164.45								
05	72192	CAT,PELVIS;W/OUT CONTRAST MATERIAL	65.77								
03	72193	CAT,PELVIS;W/ CONTRAST MATERIAL	222.52								
05	72193	CAT,PELVIS;W/ CONTRAST MATERIAL	89.02								
03	72194	CAT,PELVIS;W/OUT-W/ CONTRAST MATER.	255.55								
05	72194	CAT,PELVIS;W/OUT-W/ CONTRAST MATER.	102.22								
03	72195	MRI PELVIS W/O DYE	367.42								
05	72195	MRI PELVIS W/O DYE	146.97								
03	72196	MRI,PELVIS	320.36								
05	72196	MRI, PELVIS	128.15								
03	72197	MRI PELVIS W/O & W DYE	534.00								
05	72197	MRI PELVIS W/O & W DYE	213.60								
03	72198	MAGNETIC RESONANCE ANGIOGRAPHY, PELV	367.28								
05	72198	MAGNETIC RESONANCE ANGIOGRAPHY, PELV	146.92								
03	72200	X-RAY EXAM SACROILIAC JOINTS	19.78								
05	72200	X-RAY EXAM SACROILIAC JOINTS	7.92								
03	72202	X-RAY EXAM SACROILIAC JOINTS	23.89								
05	72202	X-RAY EXAM SACROILIA504	9.56								
03	72220	X-RAY EXAM OF TAILBONE	20.83								
05	72220	X-RAY EXAM OF TAILBONE	8.34								
03	72240	CONTRAST X-RAY OF NECK SPINE	133.17								
05	72240	CONTRAST X-RAY OF NECK SPINE	53.27								

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TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X- OVERS	UVS >001
03	72255	CONTRAST X-RAY THORAX SPINE	127.73								
05	72255	CONTRAST X-RAY THORAX SPINE	51.10								
03	72265	CONTRAST X-RAY LOWER SPINE	122.08								
05	72265	CONTRAST X-RAY LOWER SPINE	48.84								
03	72270	CONTRAST X-RAY OF SPINE	175.18								
05	72270	CONTRAST X-RAY OF SPINE	70.07								
03	72275	EPIDUROGRAPHY	84.52								
05	72275	EPIDUROGRAPHY	33.81								
03	72285	X-RAY OF NECK SPINE DISK	211.97								
05	72285	X-RAY OF NECK SPINE DISK	84.79								
05	72291	RADIOLOGICAL SUPERVISION AND INTERPR	42.57								
05	72292	RADIOLOGICAL SUPERVISION AND INTERPR	43.29								
03	72295	X-RAY OF LOWER SPINE DISK	191.34								
05	72295	X-RAY OF LOWER SPINE DISK	76.54								
03	73000	X-RAY EXAM OF COLLARBONE	18.76								X
05	73000	X-RAY EXAM OF COLLARBONE	7.50								X
03	73010	X-RAY EXAM OF SHOULDER BLADE	19.52								X
05	73010	X-RAY EXAM OF SHOULDER BLADE	7.81								X
03	73020	X-RAY EXAM OF SHOULDER	16.73								X
05	73020	X-RAY EXAM OF SHOULDER	6.70								X
03	73030	X-RAY EXAM OF SHOULDER	20.87								X
05	73030	X-RAY EXAM OF SHOULDER	8.36								X
03	73040	X-RAY SHOULDER, ARTHROGRAPH, SUPR/INTP	73.99								X
05	73040	X-RAY SHOULDER, ARTHROGRAPH, SUPR/INTP	29.60								X
03	73050	X-RAY EXAM OF SHOULDERS	24.67								
05	73050	X-RAY EXAM OF SHOULDERS	9.87								
03	73060	X-RAY EXAM OF HUMERUS	20.58								X
05	73060	X-RAY EXAM OF HUMERUS	8.23								X
03	73070	X-RAY EXAM OF ELBOW	18.46								X
05	73070	X-RAY EXAM OF ELBOW	7.37								X
03	73080	X-RAY EXAM OF ELBOW	22.82								X
05	73080	X-RAY EXAM OF ELBOW	9.13								X
03	73085	X-RAY, ELBOW, ARTHROGRAPHY; SUPER/INTER	70.33								X
05	73085	X-RAY ELBOW, ARTHROGRAPHY; SUPER/INTER	28.14								X
03	73090	X-RAY EXAM OF FOREARM	18.76								X
05	73090	X-RAY EXAM OF FOREARM	7.50								X
03	73092	X-RAY EXAM OF ARM, INFANT	18.76								X
05	73092	X-RAY EXAM OF ARM, INFANT	7.50								X
03	73100	X-RAY EXAM OF WRIST	18.99								X
05	73100	X-RAY EXAM OF WRIST	7.59								X
03	73110	X-RAY EXAM OF WRIST	22.01								X
05	73110	X-RAY EXAM OF WRIST	8.80								X
03	73115	X-RAY, WRIST, ARTHROGRAPHY, SUPER/INTER	67.74								X
05	73115	X-RAY, WRIST, ARTHROGRAPHY, SUPER/INTER	27.09								X
03	73120	X-RAY EXAM OF HAND	18.50								X
05	73120	X-RAY EXAM OF HAND	7.39								X

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	73130	X-RAY EXAM OF HAND	20.77								X
05	73130	X-RAY EXAM OF HAND	8.31								X
03	73140	X-RAY EXAM OF FINGER(S)	18.14								X
05	73140	X-RAY EXAM OF FINGER(S)	7.26								X
03	73200	CAT,UPPER EXTREMITY;W/OUT CONTRAST	163.83								
05	73200	CAT,UPPER EXTREMITY;W/OUT CONTRAST	65.53								
03	73201	CAT,UPPER EXTREMITY;W/ CONTRAST MAT.	215.44								
05	73201	CAT,UPPER EXTREMITY;W/CONTRAST MAT.	86.17								
03	73202	CAT,UPPER EXT.;W/OUT-W/ CONTRAST	255.47								
05	73202	CAT,UPPER EXT.;W/OUT-W/ CONTRAST MAT	102.18								
03	73206	CT ANGIO UPR EXTRM W/O&W DYE	278.79								
05	73206	CT ANGIO UPR EXTRM W/O&W DYE	111.51								
03	73218	MRI UPPER EXTREMITY W/O DYE	362.08								
05	73218	MRI UPPER EXTREMITY W/O DYE	144.84								
03	73219	MRI UPPER EXTREMITY W/DYE	398.83								
05	73219	MRI UPPER EXTREMITY W/DYE	159.53								
03	73220	MRI-UPPER EXTREMITY	418.83								
05	73220	MRI-UPPER EXTREMITY	167.53								
03	73221	MRE, ANY JOINT OF UPPER EXTREMITY	271.61								X
05	73221	MRI, ANY JOINT OF UPPER EXTREMITY	108.64								X
03	73222	MRI JOINT UPR EXTREM W/ DYE	398.90								
05	73222	MRI JOINT UPR EXTREM W/ DYE	159.57								
03	73223	MRI JOINT UPR EXTR W/O&W DYE	529.57								
05	73223	MRI JOINT UPR EXTR W/O&W DYE	211.83								
03	73225	MAGNETIC RESONANCE ANGIOGRAPHY, UPPE	291.70								
05	73225	MAGNETIC RESONANCE ANGIOGRAPHY, UPPE	116.68								
03	73500	X-RAY EXAM OF HIP	17.80								X
05	73500	X-RAY EXAM OF HIP	7.12								X
03	73510	X-RAY EXAM OF HIP	24.17								X
05	73510	X-RAY EXAM OF HIP	9.67								X
03	73520	X-RAY EXAM OF HIPS	27.10								
05	73520	X-RAY EXAM OF HIPS	10.84								
03	73525	CONTRAST X-RAY OF HIP	70.62								X
05	73525	CONTRAST X-RAY OF HIP	28.25								X
03	73530	X-RAY HIP,DURING OPERATIVE PROCEDURE	24.34								X
05	73530	X-RAY HIP,DURING OPERATIVE PROCEDURE	9.73								X
03	73540	X-RAY EXAM OF PELVIS & HIPS	24.42								
05	73540	X-RAY EXAM OF PELVIS & HIPS	9.77								
03	73542	X-RAY EXAM, SACROILLIAC JOINT	81.62								
05	73542	X-RAY EXAM, SACROILLIAC JOINT	32.68								
03	73550	X-RAY EXAM OF THIGH	20.57								X
05	73550	X-RAY EXAM OF THIGH	8.22								X
03	73560	X-RAY EXAM OF KNEE	19.52								X
05	73560	X-RAY EXAM OF KNEE	7.81								X
03	73562	X-RAY KNEE A/P.OBLIQUES,3+VIEWS	22.85								X
05	73562	X-RAY KNEE A/P,OBLIQUES,3+ VIEWS	9.15								X

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	73564	X-RAY KNEE, COMPLETE, W/OBLIQUES.....	25.95								X
05	73564	X-RAY KNEE, COMPLETE, W/OBLIQUES.....	10.39								X
03	73565	RADIO EXAM, KNEES, STANDING, ANTEROPOST	21.48								
05	73565	RADIOLOGIC EXAM	8.60								
03	73580	CONTRAST X-RAY OF KNEE JOINT	84.99								X
05	73580	CONTRAST X-RAY OF KNEE JOINT	33.99								X
03	73590	X-RAY EXAM OF LOWER LEG	19.04								X
05	73590	X-RAY EXAM OF LOWER LEG	7.61								X
03	73592	X-RAY EXAM OF LEG, INFANT	18.76								X
05	73592	X-RAY EXAM OF LEG, INFANT	7.50								X
03	73600	X-RAY EXAM OF ANKLE	18.50								X
05	73600	X-RAY EXAM OF ANKLE	7.39								X
03	73610	X-RAY EXAM OF ANKLE	20.77								X
05	73610	X-RAY EXAM OF ANKLE	8.31								X
03	73615	X-RAY ANKLE, ARTHROGRAPHY; SUPER/INTER	71.10								X
05	73615	X-RAY ANKLE, ARTHROGRAPHY; SUPER/INTER	28.44								X
03	73620	X-RAY EXAM OF FOOT	18.25								X
05	73620	X-RAY EXAM OF FOOT	7.31								X
03	73630	X-RAY EXAM OF FOOT	20.77								X
05	73630	X-RAY EXAM OF FOOT	8.31								X
03	73650	X-RAY EXAM OF HEEL	18.01								X
05	73650	X-RAY EXAM OF HEEL	7.20								X
03	73660	X-RAY EXAM OF TOE(S)	17.64								X
05	73660	X-RAY EXAM OF TOE(S)	7.06								X
03	73700	CAT, LOWER EXTREMITY; W/OUT CONTRAST	163.83								
05	73700	CAT, LOWER EXTREMITY; W/OUT CONTRAST	65.53								
03	73701	CAT, LOWER EXTREMITY; W/ CONTRAST MAT.	216.42								
05	73701	CAT, LOWER EXTREMITY; W/ CONTRAST MAT	86.58								
03	73702	CAT, LOWER EXT.; W/OUT-W/CONTRAST	255.71								
05	73702	CAT, LOWER EXT.; W/OUT-W/CONTRAST MAT	102.29								
03	73706	CT ANGIO LWR EXTR W/O&W DYE	282.02								
05	73706	CT ANGIO LWR EXTR W/O&W DYE	112.80								
03	73718	MRI LOWER EXTREMITY W/O DYE	362.08								
05	73718	MRI LOWER EXTREMITY W/O DYE	144.84								
03	73719	MRI LOWER EXTREMITY W/DYE	398.50								
05	73719	MRI LOWER EXTREMITY W/DYE	159.40								
03	73720	MRI-LIWER EXTREMITY	418.57								
05	73720	MRI-LOWER EXTREMITY	167.42								
03	73721	MRI, ANY JOINT, LOWER EXTREMITY	271.61								X
05	73721	MRI, ANY JOINT, LOWER EXTREMITY	108.64								X
03	73722	MRI JOINT OF LWR EXTR W/DYE	398.90								
05	73722	MRI JOINT OF LWR EXTR W/DYE	159.57								
03	73723	MRI JOINT LWR EXTR W/O&W DYE	528.91								
05	73723	MRI JOINT LWR EXTR W/O&W DYE	211.57								
03	73725	MAGNETIC RESONANCE ANGIOGRAPHY, LOWE	368.57								
05	73725	MAGNETIC RESONANCE ANGIOGRAPHY, LOWE	147.43								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	74000	X-RAY EXAM OF ABDOMEN	18.80								X
05	74000	X-RAY EXAM OF ABDOMEN	7.53								X
03	74010	X-RAY EXAM OF ABDOMEN	25.00								X
05	74010	X-RAY EXAM OF ABDOMEN	10.00								X
03	74020	X-RAY EXAM OF ABDOMEN	27.13								X
05	74020	X-RAY EXAM OF ABDOMEN	10.85								X
03	74022	X-RAY ACUTE ABDOMEN SERIES,SUPINE,ER	32.28								
05	74022	X-RAY ACUTE ABDOMEN SERIES,SUPINE	12.91								
03	74150	CAT,ABDOMEN,W/OUT CONTRAST MATERIAL	168.43								
05	74150	CAT,ABDOMEN,W/OUT CONTRAST MATERIAL	67.37								
03	74160	CAT,ABDOMEN;W/ CONTRAST MATERIAL	226.58								
05	74160	CAT,ABDOMEN;W/ CONTRAST MATERIAL	90.64								
03	74170	CAT,ABDOMEN;W/OUT-W/CONTRAST MATER.	262.05								
05	74170	CAT,ABDOMEN;W/OUT-W/CONTRAST MATER.	104.83								
03	74175	CT ANGIO ABDOM W/O&W DYE	300.20								
05	74175	CT ANGIO ABDOM W/O&W DYE	120.09								
03	74181	MRI-ABDOMEN	284.76								
05	74181	MRI-ABDOMEN	113.91								
03	74182	MRI ABDOMEN W/DYE	404.15								
05	74182	MRI ABDOMEN W/DYE	161.66								
03	74183	MRI ABDOMEN W/O&W DYE	534.00								
05	74183	MRI ABDOMEN W/O&W DYE	213.60								
03	74185	MAGNETIC RESONANCE ANGIOGRAPHY, ABDO	367.52								
05	74185	MAGNETIC RESONANCE ANGIOGRAPHY, ABDO	147.00								
03	74190	PERITONEOGRAM (EG, AFTER INJECTION O	52.33								
05	74190	PERITONEOGRAM (EG, AFTER INJECTION O	20.94								
03	74210	CONTRAST XRAY EXAM OF THROAT	49.63								
05	74210	CONTRAST XRAY EXAM OF THROAT	19.85								
03	74220	CONTRAST XRAY EXAM,ESOPHAGUS	55.68								
05	74220	CONTRAST XRAY EXAM,ESOPHAGUS	22.28								
03	74230	CINEMA XRAY THROAT/ESOPHAGUS	58.68								
05	74230	CINEMA XRAY THROAT/ESOPHAGUS	23.47								
03	74235	REMOVE FOREIGN BODY(S),ESOPHAGEAL	99.94								
05	74235	REMOVE FOREIGN BODY(S),ESOPHAGEAL	39.97								
03	74240	X-RAY EXAM UPPER GI TRACT	70.20								
05	74240	X-RAY EXAM UPPER GI TRACT	28.08								
03	74241	X-RAY EXAM UPPER GI TRACT	73.68								
05	74241	X-RAY EXAM UPPER GI TRACT	29.47								
03	74245	X-RAY EXAM UPPER GI TRACT	110.07								
05	74245	X-RAY EXAM UPPER GI TRACT	44.03								
03	74246	X-RAY GASTROINTESTINAL TRACT	79.18								
05	74246	X-RAY GASTROINTESTINAL TRACT	31.67								
03	74247	X-RAY-GASTROINTESTINAL TRACT	81.92								
05	74247	X-RAY GASTROINTESTINAL TRACT	32.77								
03	74249	X-RAY/GASTROINTESTINAL TRACT....	117.53								
05	74249	X-RAY GASTROINTESTINAL TRACT....	47.02								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	74250	X-RAY EXAM OF SMALL BOWEL	63.15								
05	74250	X-RAY EXAM OF SMALL BOWEL	25.26								
03	74251	RADIOLOGIC EXAMINATION, SMALL BOWEL,	116.75								
05	74251	RADIOLOGIC EXAMINATION, SMALL BOWEL,	46.70								
03	74260	X-RAY EXAM OF SMALL BOWEL	75.09								
05	74260	X-RAY EXAM OF SMALL BOWEL	30.04								
03	74261	COMPUTED TOMOGRAPHIC (CT) COLONOGRAP	267.50								
05	74261	COMPUTED TOMOGRAPHIC (CT) COLONOGRAP	106.99								
03	74262	COMPUTED TOMOGRAPHIC (CT) COLONOGRAP	300.39								
05	74262	COMPUTED TOMOGRAPHIC (CT) COLONOGRAP	120.16								
03	74263	COMPUTED TOMOGRAPHIC (CT) COLONOGRAP	457.39								
05	74263	COMPUTED TOMOGRAPHIC(CT) COLONOGRAP	182.95								
03	74270	CONTRAST X-RAY EXAM OF COLON	82.17								
05	74270	CONTRAST X-RAY EXAM OF COLON	32.87								
03	74280	CONTRAST X-RAY EXAM OF COLON	122.75								
05	74280	CONTRAST X-RAY EXAM OF COLON	49.09								
03	74283	BARIUM ENEMA, THERAPEUTIC	129.02								
05	74283	BARIUM ENEMA, THERAPEUTIC	51.61								
03	74290	CONTRAST X-RAY, GALLBLADDER	39.72								
05	74290	CONTRAST X-RAY, GALLBLADDER	15.89								
03	74291	CONTRAST X-RAYS, GALLBLADDER	31.30								
05	74291	CONTRAST X-RAYS, GALLBLADDER	12.52								
03	74300	CONTRAST X-RAY OF BILE DUCTS	56.28								
05	74300	CONTRAST X-RAY OF BILE DUCTS	22.50								
03	74301	CHOLANGIOGRA; ADDITIONAL SET/SURGERY	36.19								
05	74301	CHOLANGIOGRA; ADDIT SET DURING SURGER	14.48								
03	74305	CONTRAST X-RAY OF BILE DUCTS	36.60								
05	74305	CONTRAST X-RAY OF BILE DUCTS	14.64								
03	74320	CONTRAST X-RAY OF BILE DUCTS	92.43								
05	74320	CONTRAST X-RAY OF BILE DUCTS	36.98								
03	74327	X-RAY FOR BILE STONE REMOVAL	83.23								
05	74327	X-RAY FOR BILE STONE REMOVAL	33.29								
03	74328	XRAY FOR BILE DUCT ENDOSCOPY	108.74								
05	74328	XRAY FOR BILE DUCT ENDOSCOPY	43.49								
03	74329	X-RAY FOR PANCREAS ENDOSCOPY	95.16								
05	74329	X-RAY FOR PANCREAS ENDOSCOPY	38.06								
03	74330	XRAY, BILE/PANCREAS ENDOSCOPY	116.25								
05	74330	XRAY, BILE/PANCREAS ENDOSCOPY	46.51								
03	74340	X-RAY GUIDE FOR GI TUBE	88.81								
05	74340	X-RAY GUIDE FOR GI TUBE	35.53								
03	74355	PERC. PLACE ENTEROLYSIS TUBE; GUIDANCE	97.14								
05	74355	PERC. PLACE. ENTEROLYSIS TUBE; GUIDANCE	38.86								
03	74360	INTRALUMINAL DILATION; GUIDANCE ONLY	102.87								
05	74360	INTRALUMINAL DILATION; GUIDANCE ONLY	41.15								
03	74363	PERCUT TRANS DILAT BIL DUCT W-W/O ST	313.63								
05	74363	DILATION OF BILIARY DUCT STRICTURE	125.45								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	74400	CONTRAST X-RAY URINARY TRACT	71.04								
05	74400	CONTRAST X-RAY URINARY TRACT	28.40								
03	74410	CONTRAST X-RAY URINARY TRACT	75.51								
05	74410	CONTRAST X-RAY URINARY TRACT	30.21								
03	74415	CONTRAST X-RAY URINARY TRACT	85.20								
05	74415	CONTRAST X-RAY URINARY TRACT	34.09								
03	74420	CONTRAST X-RAY URINARY TRACT	82.17								
05	74420	CONTRAST X-RAY URINARY TRACT	32.87								
03	74425	CONTRAST X-RAY URINARY TRACT	47.90								
05	74425	CONTRAST X-RAY URINARY TRACT	19.16								
03	74430	CONTRAST X-RAY OF BLADDER	48.97								
05	74430	CONTRAST X-RAY OF BLADDER	19.59								
03	74440	XRAY EXAM MALE GENITAL TRACT	53.38								
05	74440	XRAY EXAM MALE GENITAL TRACT	21.35								
03	74445	COPORA CAVERNOSOGRAPHY;SUPER/INTERP	73.24								
05	74445	CORPORA CAVERNOSOGRAPHY;SUPER/INTERP	29.31								
03	74450	X-RAY EXAM URETHRA/BLADDER	50.75								
05	74450	X-RAY EXAM URETHRA/BLADDER	20.30								
03	74455	X-RAY EXAM URETHRA/BLADDER	59.79								
05	74455	X-RAY EXAM URETHRA/BLADDER	23.92								
03	74470	X-RAY-RENAL CYST STUDY	53.08								
05	74470	X-RAY-RENAL CYST STUDY	21.23								X
03	74475	CATH RENAL PELVIS;SUPER/INTERP	110.66								
05	74475	CATH RENAL PELVIS;SUPER/INTERP	44.26								
03	74480	CATH/STENT RENAL PELVIS;SUPER/INTERP	110.66								
05	74480	CATH/STENT-RENAL PELVIS;SUPER/INTERP	44.26								
03	74485	DILATE NEPHROL./URETERS;SUPER/INTERP	93.46								
05	74485	DILATE NEPHRO/URETERS;SUPER/INTERP	37.39								
03	74710	X-RAY MEASUREMENT OF PELVIS	36.23								
05	74710	X-RAY MEASUREMENT OF PELVIS	14.50								
05	74740	HYSTEOSALPINGOGRAPHY	8.70	21	59	X			F		
03	74775	PERINEOGRAM-DET.SEX/EXTENT ANOMOLIES	61.83								
05	74775	PERINEOGRAM-DET.SEX/EXTENT ANOMOLIES	24.73								
03	75557	CARDIAC MAGNETIC RESONANCE IMAGING F	311.40								
05	75557	CARDIAC MAGNETIC RESONANCE IMAGING F	124.55								
03	75559	CARDIAC MAGNETIC RESONANCE IMAGING F	334.15								
05	75559	CARDIAC MAGNETIC RESONANCE IMAGING F	133.66								
03	75561	CARDIAC MAGNETIC RESONANCE IMAGING F	439.20								
05	75561	CARDIAC MAGNETIC RESONANCE IMAGING F	175.68								
03	75563	CARDIAC MAGNETIC RESONANCE IMAGING F	457.50								
05	75563	CARDIAC MAGNETIC RESONANCE IMAGING F	183.00								
03	75565	CARDIAC MAGNETIC RESONANCE IMAGING F	59.31								
05	75565	CARDIAC MAGNETIC RESONANCE IMAGING F	23.73								
03	75571	COMPUTED TOMOGRAPHY, HEART, WITHOUT	58.93								
05	75571	COMPUTED TOMOGRAPHY, HEART, WITHOUT	23.57								
03	75572	COMPUTED TOMOGRAPHY, HEART, WITH CON	172.98								

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
05	75572	COMPUTED TOMOGRAPHY, HEART, WITH CON	69.19								
03	75573	COMPUTED TOMOGRAPHY, HEART, WITH CON	245.86								
05	75573	COMPUTED TOMOGRAPHY, HEART, WITH CON	98.35								
03	75574	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HE	377.50								
05	75574	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HE	151.00								
03	75600	CONTRAST X-RAY EXAM OF AORTA	304.18								
05	75600	CONTRAST X-RAY EXAM OF AORTA	121.67								
03	75605	CONTRAST X-RAY EXAM OF AORTA	308.11								
05	75605	CONTRAST X-RAY EXAM OF AORTA	123.26								
03	75625	CONTRAST X-RAY EXAM OF AORTA	306.47								
05	75625	CONTRAST X-RAY EXAM OF AORTA	122.59								
03	75630	AORTOGRAPH; ABDOMEN-BILAT	342.50								
05	75630	AORTOGRAPH; ABDOMEN/ILIOFEMORAL; BILAT	136.99								
03	75635	CT ANGIO ABDOMINAL ARTERIES	329.52								
05	75635	CT ANGIO ABDOMINAL ARTERIES	131.80								
03	75650	ARTERY X-RAYS, HEAD & NECK	318.30								
05	75650	ARTERY X-RAYS, HEAD & NECK	127.33								
03	75658	X-RAY EXAM OF ARM ARTERIES	315.68								
05	75658	X-RAY EXAM OF ARM ARTERIES	126.27								
03	75660	ARTERY X-RAYS, HEAD & NECK	303.60								
05	75660	ARTERY X-RAYS, HEAD & NECK	121.43								
03	75662	ARTERY X-RAYS, HEAD & NECK	333.94								
05	75662	ARTERY X-RAYS, HEAD & NECK	133.58								
03	75665	ARTERY X-RAYS, HEAD & NECK	316.77								
05	75665	ARTERY X-RAYS, HEAD & NECK	126.71								
03	75671	ARTERY X-RAYS, HEAD & NECK	332.79								
05	75671	ARTERY X-RAYS, HEAD & NECK	133.11								
03	75676	ARTERY X-RAYS, NECK	314.94								
05	75676	ARTERY X-RAYS, NECK	125.98								
03	75680	ARTERY X-RAYS, NECK	329.87								
05	75680	ARTERY X-RAYS, NECK	131.94								
03	75685	ARTERY X-RAYS, SPINE	314.41								
05	75685	ARTERY X-RAYS, SPINE	125.77								
03	75705	ARTERY X-RAYS, SPINE	332.32								
05	75705	ARTERY X-RAYS, SPINE	132.93								
03	75710	ARTERY X-RAYS, ARM/LEG	310.90								
05	75710	ARTERY X-RAYS, ARM/LEG	124.35								
03	75716	ARTERY X-RAYS, ARMS/LEGS	321.02								
05	75716	ARTERY X-RAYS, ARMS/LEGS	128.41								
03	75722	ARTERY X-RAYS, KIDNEY	309.82								
05	75722	ARTERY X-RAYS, KIDNEY	123.93								
03	75724	ARTERY X-RAYS, KIDNEYS	329.60								
05	75724	ARTERY X-RAYS, KIDNEYS	131.84								
03	75726	ARTERY X-RAYS, ABDOMEN	307.64								
05	75726	ARTERY X-RAYS, ABDOMEN	123.05								
03	75731	ARTERY X-RAYS, ADRENAL GLAND	309.15								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
05	75731	ARTERY X-RAYS, ADRENAL GLAND	123.67								
03	75733	ARTERY X-RAYS,ADRENAL GLANDS	303.60								
05	75733	ARTERY X-RAYS,ADRENAL GLANDS	121.43								
03	75736	ARTERY X-RAYS, PELVIS	309.15								
05	75736	ARTERY X-RAYS, PELVIS	123.67								
03	75741	ARTERY X-RAYS, LUNG	310.04								
05	75741	ARTERY X-RAYS, LUNG	124.01								
03	75743	ARTERY X-RAYS, LUNGS	323.09								
05	75743	ARTERY X-RAYS, LUNGS	129.25								
03	75746	ARTERY X-RAYS, LUNG	306.43								
05	75746	ARTERY X-RAYS, LUNG	122.57								
03	75756	ARTERY X-RAYS, CHEST	313.89								
05	75756	ARTERY X-RAYS, CHEST	125.56								
03	75791	ANGIOGRAPHY ARTERIOVENOUS SHUNT COMP	200.05								
05	75791	ANGIOGRAPHY ARTERIOVENOUS SHUNT COMP	80.02								
03	75801	LYMPH VESSEL X-RAY, ARM/LEG	173.32								
05	75801	LYMPH VESSEL X-RAY, ARM/LEG	69.33								
03	75803	LYMPH VESSEL X-RAY, ARMS/LEGS	185.42								
05	75803	LYMPH VESSEL X-RAY, ARMS/LEGS	74.16								
03	75805	LYMPH VESSEL X-RAY, TRUNK	190.42								
05	75805	LYMPH VESSEL X-RAY, TRUNK	76.17								
03	75807	LYMPH VESSEL X-RAY, TRUNK	164.49								
05	75807	LYMPH VESSEL X-RAY, TRUNK	65.79								
03	75809	SHUNTOGRAM FOR INVESTIGATION OF PREV	51.93								
05	75809	SHUNTOGRAM FOR INVESTIGATION OF PREV	20.77								
03	75810	VEIN X-RAY, SPLEEN/LIVER	370.80								
05	75810	VEIN X-RAY, SPLEEN/LIVER	148.33								
03	75820	VEIN X-RAY, ARM/LEG	72.17								
05	75820	VEIN X-RAY, ARM/LEG	28.87								
03	75822	VEIN X-RAY, ARMS/LEGS	92.35								
05	75822	VEIN X-RAY, ARMS/LEGS	36.94								
03	75825	VEIN X-RAY, TRUNK	303.63								
05	75825	VEIN X-RAY, TRUNK	121.44								
03	75827	VEIN X-RAY, CHEST	303.28								
05	75827	VEIN X-RAY, CHEST	121.31								
03	75831	VEIN X-RAY, KIDNEY	304.05								
05	75831	VEIN X-RAY, KIDNEY	121.62								
03	75833	VEIN X-RAY, KIDNEYS	319.88								
05	75833	VEIN X-RAY, KIDNEYS	127.95								
03	75840	VEIN X-RAY, ADRENAL GLAND	306.29								
05	75840	VEIN X-RAY, ADRENAL GLAND	122.51								
03	75842	VEIN X-RAY, ADRENAL GLANDS	318.55								
05	75842	VEIN X-RAY, ADRENAL GLANDS	127.42								
03	75860	VEIN X-RAY, NECK	297.97								
05	75860	VEIN X-RAY, NECK	119.19								
03	75870	VEIN X-RAY, SKULL	297.97								

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
05	75870	VEIN X-RAY, SKULL	119.19								
03	75872	VENOGRAPH, EPIDURAL; SUPER/INTERP	312.50								
05	75872	VENOGRAPH, EPIDURAL; SUPER/INTERP	124.99								
03	75880	VEIN X-RAY, EYE SOCKET	74.89								
05	75880	VEIN X-RAY, EYE SOCKET	29.96								
03	75885	VEIN X-RAY, LIVER	313.96								
05	75885	VEIN X-RAY, LIVER	125.58								
03	75887	VEIN X-RAY, LIVER	315.42								
05	75887	VEIN X-RAY, LIVER	126.17								
03	75889	VEIN X-RAY, LIVER	303.51								
05	75889	VEIN X-RAY, LIVER	121.41								
03	75891	VEIN X-RAY, LIVER	303.51								
05	75891	VEIN X-RAY, LIVER	121.41								
03	75893	VENOUS SAMPLING BY CATHETER	268.04								
05	75893	VENOUS SAMPLING BY CATHETER	107.21								
03	75894	XRAYS, TRANSCATHETER THERAPY	678.38								
05	75894	XRAYS, TRANSCATHETER THERAPY	271.35								
03	75896	XRAYS, TRANSCATHETER THERAPY	596.09								
05	75896	XRAYS, TRANSCATHETER THERAPY	238.43								
03	75898	FOLLOW-UP ANGIOGRAM	90.33								
05	75898	FOLLOW-UP ANGIOGRAM	36.14								
03	75900	ARTERIAL CATHETER EXCHANGE	470.88								
05	75900	ARTERIAL CATHETER EXCHANGE	188.35								
03	75901	REMOVE CVA DEVICE OBSTRUCT	105.65								
05	75901	REMOVE CVA DEVICE OBSTRUCT	42.25								
03	75902	REMOVE CVA LUMEN OBSTRUCT	73.52								
05	75902	REMOVE CVA LUMEN OBSTRUCT	29.40								
03	75940	PERC.PLACE IVC FILTER; SUPER/INTERP	348.63								
05	75940	PERC.PLACE IVC FILTER; SUPER/INTERP	139.46								
03	75945	INTRAVASCULAR US	115.37								
05	75945	INTRAVASCULAR US	46.14								
03	75946	INTRAVASCULAR US	63.88								X
05	75946	INTRAVASCULAR US	25.55								X
03	75952	ENDOVASC REPAIR ABDOM AORTA	192.27								
03	75953	ABDOM ANEURYSM ENDOVAS RPR	80.39								
03	75954	ILIAC ANEURYSM ENDOVAS RPR	76.01								
05	75954	ILIAC ANEURYSM ENDOVAS RPR	30.40								
05	75956	TRANSCATH OCCLUSION; COMPLETE PROC	254.88								
05	75957	XRAY, ENDOVASC THOR AO REPR	218.37								
05	75958	XRAY, PLACE PROX THOR AO	145.55								
05	75959	XRAY, PLACE DIST EXT THOR AO	127.41								
03	75960	TRANSCATHETER INTRODUCTION OF INTRAV	328.04								
05	75960	TRANSCATHETER INTRODUCTION OF INTRAV	131.21								
03	75961	TRANSCATH RETRIEVAL/FRACTURED CATH	413.11								
05	75961	TRANSCATH RETRIEVAL/FRACTURED CATH	165.24								
03	75962	PTA-PERIPHERAL ARTERY; SUPER/ENTERP	343.43								

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
05	75962	PTA-PERIPHERAL ARTERY;SUPER/INTERP	137.37								
03	75964	PTA;EACH ADD.PERIPH.ART.;SUPER/INTER	191.66								X
05	75964	PTA,EACH ADD.PERIPH.ART;SUPER/INTERP	76.65								X
03	75966	PTA--VISCERAL ARTERY;SUPER/INTERP	368.62								
05	75966	PTA-VISCERAL ARTERY;SUPER/INTERP	147.45								
03	75968	PTA-EACH ADD VISC.ART;SUPER/INTERP	192.09								X
05	75968	PTA-EACH ADD VISC ART;SUPER/INTERP	76.84								X
03	75970	TRANSCATH BXX;SUPER/INTERP	331.83								
05	75970	TRANSCATH BX;SUPER/INTERP	132.73								
03	75978	VENOUS PTA;SUPERVISE/INTERPRET ONLY	275.52								
05	75978	VENOUS PTA;SUPERVISE/INTERPRET ONLY	110.21								
03	75980	PERC TRANSHEPATIC BILIARY DRAIN	195.67								
05	75980	PERC TRANSHEPATIC BILIARY DRAINAGE	78.28								
03	75989	RAD.GUIDE...SUPERVISION/INTERP ONLY	114.29								
05	75989	RAD GUIDE...SUPERVISION/INTERP ONLY	45.72								
03	75992	TRANSLUMINAL ATHERECTOMY, PERIPHERAL	430.73								
05	75992	TRANSLUMINAL ATHERECTOMY, PERIPHERAL	172.29								
03	75993	TRANSLUMINAL ATHERECTOMY, EACH ADDIT	181.44								
05	75993	TRANSLUMINAL ATHERECTOMY, EACH ADDIT	72.57								
03	75994	TRANSLUMINAL ATHERECTOMY, RENAL, RAD	361.15								
05	75994	TRANSLUMINAL ATHERECTOMY, RENAL, RAD	144.46								
03	75995	TRANSLUMINAL ATHERECTOMY, VISCERAL,	361.15								
05	75995	TRANSLUMINAL ATHERECTOMY, VISCERAL,	144.46								
03	75996	TRANSLUMINAL ATHERECTOMY, EACH ADDIT	181.44								
05	75996	TRANSLUMINAL ATHERECTOMY, EACH ADDIT	72.57								
03	76000	FLUOROSCOPY,MD TIME TO 1 HR	57.62								
05	76000	FLUOROSCOPY,MD TIME TO 1 HR	23.05								
03	76001	FLUOROSCOPY,ME ASST NON-RAD,+1 HOUR	94.42								
05	76001	FLUOROSCOPY,MD ASST NON-RAD,+1 HOUR	37.77								
03	76010	X-RAY,NOWE-RECTUM,SINGLE FILM,CHILD	19.32								
05	76010	W-RAY,NOSE-RECTUM,SINGLE,FILM,CHILD	7.74								
03	76080	X-RAY EXAM OF FISTULA	45.02								
05	76080	X-RAY EXAM OF FISTULA	18.02								
03	76098	RADIO.EXAM.,BREAST SURGICAL SPECIMEN	15.33								X
05	76098	RADIO EXAM,BREAST SURGICAL SPECIMEN	6.12								X
03	76100	X-RAY EXAM OF BODY SECTION	68.75								
05	76100	X-RAY EXAM OF BODY SECTION	27.50								
03	76101	X-RAY,COMPLEX MOTION ,BODY SECT UNIL	105.52								
05	76101	X-RAY,COMPLEX MOTION,BODY SECT UNIL	42.21								
03	76102	X-RAY,COMPLEX MOTION,BODY SECT BILAT	131.38								
05	76102	X-RAY,COMPLEX MOTION,BODY SECT,BILAT	52.56								
03	76120	CINEMATIC X-RAYS	49.66								
05	76120	CINEMATIC X-RAYS	19.87								
03	76125	CINEMATIC X-RAYS	30.77								
05	76125	CINEMATIC X-RAYS	12.30								
03	76350	SUBTRACTION W/CONTRAST STUDIES	18.18								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE MIN-MAX	MED REV	PA	SEX	PSR	SL	X- OVERS	UVS >001
05	76350	SUBTRACTION W/CONTRAST STUDIES	7.28								
03	76376	3D RENDER W/O POSTPROCESS	68.72								
05	76376	3D RENDER W/O POSTPROCESS	27.48								
03	76377	3D RENDERING W/POSTPROCESS	110.25								
05	76377	3D RENDERING W/POSTPROCESS	44.09								
03	76380	COMPUTERIZED TOMOGRAPHY, LIMITED OR	104.80								
05	76380	COMPUTERIZED TOMOGRAPHY, LIMITED OR	41.92								
03	76390	MR SPECTROSCOPY	366.91								
05	76390	MR SPECTROSCOPY	146.76								
03	76496	FLUOROSCOPIC PROCEDURE	MP		X						
05	76496	FLUOROSCOPIC PROCEDURE	MP		X						
03	76497	CT PROCEDURE	MP		X						
05	76497	CT PROCEDURE	MP		X						
03	76498	MRI PROCEDURE	MP		X						
05	76498	MRI PROCEDURE	MP		X						
03	76499	RADIOGRAPHIC PROCEDURE	MP		X						
05	76499	RADIOGRAPHIC PROCEDURE	MP		X						
03	76506	ECHO EXAM OF HEAD B-MODE COMPLETE	63.11								
05	76506	ECHO EXAM OF HEAD,B-MODE COMPLETE	25.24								
03	76510	OPHTH US, B & QUANT A	108.95								
05	76510	OPHTH US, B & QUANT A	43.58								
03	76511	ECHO EXAM OF EYE	79.93								X
05	76511	ECHO EXAM OF EYE	31.97								X
03	76512	ECHO EXAM OF EYE	75.66								
05	76512	ECHO EXAM OF EYE	30.26								
03	76513	OPHTH.ULTRASOUND,ECHOGRAPHY;H2O-B-SC	62.90								
05	76513	OPHTH.ULTRASOUND ECHOGRAPHY;H2O-B-SC	25.16								
03	76514	ECHO EXAM OF EYE, THICKNESS	8.59								
05	76514	ECHO EXAM OF EYE, THICKNESS	3.43								
03	76516	ECHO EXAM OF EYE	50.11								
05	76516	ECHO EXAM OF EYE	20.04								
03	76519	OPHTHALMIC BIOMETRY,A-MODE;W/LENS CA	52.54								
05	76519	OPHTHALMIC BIOMETRY,A-MODE;W/LENS CA	21.01								
03	76529	ECHO EXAM OF EYE	50.68								
05	76529	ECHO EXAM OF EYE	20.26								
03	76536	ECHOGRAPHY,B-SCAN/REAL TIME W/IMAGE	69.95								
05	76536	ECHOGRAPHY,B-SCAN/REAL TIME W/ IMAGE	27.97								
03	76604	ECHO EXAM OF CHEST	57.47								
05	76604	ECHO EXAM OF CHEST	23.00								
03	76645	ECHO EXAM OF BREAST	57.44								
05	76645	ECHO EXAM OF BREAST	22.98								
03	76700	ECHO EXAM OF ABDOMEN	89.81								
05	76700	ECHO EXAM OF ABDOMEN	35.93								
03	76705	ECHO EXAM OF ABDOMEN	67.12								
05	76705	ECHO EXAM OF ABDOMEN	26.86								
03	76770	ECHO EXAM ABDOMEN BACK WALL	86.33								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X- OVERS	UVS >001
05	76770	ECHO EXAM ABDOMEN BACK WALL	34.53								
03	76775	ECHO EXAM ABDOMEN BACK WALL	67.57								
05	76775	ECHO EXAM ABDOMEN BACK WALL	27.03								
03	76776	ULTRASOUND, TRANSPLANTED KIDNEY, REA	93.34								
05	76776	ULTRASOUND, TRANSPLANTED KIDNEY, REA	37.33								
03	76800	ECHOGRAPHY, SPINAL CANAL & CONTENTS	82.71								
05	76800	ECHOGRAPHY, SPINAL CANAL & CONTENTS	33.08								
03	76801	ULTRASOUND,PREG UTER,TRANSAB;FIRST	90.23				F				
05	76801	ULTRASOUND,PREG UTER,TRANSAB;FIRST	36.09				F				
03	76802	ULTRASOUND, PREGNANT UTERUS, REAL TI	56.51				F				X
05	76802	ULTRASOUND, PREGNANT UTERUS, REAL TI	22.61				F				X
03	76805	ULTRASOUND, PREGNANT UTERUS	96.92	10	59		F				
05	76805	ULTRASOUND, PREGNANT UTERUS	38.76	10	59		F				
03	76810	EACH ADDITIONAL GESTATION	90.45	10	59		F				X
05	76810	EACH ADDITIONAL GESTATION	36.18	10	59		F				X
03	76811	ULTRASOUND,PREG UTER, TRNSAB; FIRST	186.06				F	X			
05	76811	ULTRASOUND,PREG UTER,TRNSAB;FIRST	74.41				F	X			
03	76812	ULTRASOUND,PREG UTER,TRNSAB;EACH ADD	113.74				F	X			X
05	76812	ULTRASOUND,PREG UTER,TRNSAB;EACH ADD	45.49				F	X			X
03	76813	ULTRASOUND, PREGNANT UTERUS, REAL TI	89.98	10	60		F				
05	76813	ULTRASOUND, PREGNANT UTERUS, REAL TI	35.99	10	60		F				
03	76814	ULTRASOUND, PREGNANT UTERUS, REAL +	58.81	10	60		F				X
05	76814	ULTRASOUND, PREGNANT UTERUS, REAL +	23.53	10	60		F				X
03	76815	ECHO EXAM FOR FETAL GROWTH	62.11				F				
05	76815	ECHO EXAM FOR FETAL GROWTH	24.84				F				
03	76816	ECHOGRAPHY..PG UTERUS;FOLLOW-UP/REPE	69.47				F				X
05	76816	ECHOGRAPHY..PG UTERUS;FOLLOW-UP/REPE	27.79				F				X
03	76817	ULTRASOUND, PREG UTER, TRANSVAGINAL	72.75				F				
05	76817	ULTRASOUND, PREG UTER, TRANSVAGINAL	29.11				F				
03	76818	FETAL BIOPHYSICAL PROFILE	82.95								
05	76818	FETAL BIOPHYSICAL PROFILE	33.19				F				
03	76819	FETL BIOPHYS PROFIL W/O STRS	75.00								
05	76819	FETL BIOPHYS PROFIL W/O STRS	30.01								
03	76820	UMBILICAL ARTERY ECHO	56.01	10	59		F				
05	76820	UMBILICAL ARTERY ECHO	22.40	10	59		F				
03	76821	MIDDLE CEREBRAL ARTERY ECHO	68.62	10	59		F				
05	76821	MIDDLE CEREBRAL ARTERY ECHO	27.45	10	59		F				
03	76825	ECHOCARDIOGRAPHY, FETAL HEART-UTERO	121.01	00	60		F				
05	76825	ECHOCARDIOGRAPHY,FETAL HEART-UTERO	48.41	00	60		F				
03	76826	ECHOCARDIOGRAPHY, FETAL, CARDIOVASCU	68.35								
05	76826	ECHOCARDIOGRAPHY, FETAL, CARDIOVASCU	27.33								
03	76827	DOPPLER ECHOCARDIOGRAPHY, FETAL, CAR	63.36								
05	76827	DOPPLER ECHOCARDIOGRAPHY, FETAL, CAR	25.35								
03	76828	DOPPLER ECHOCARDIOGRAPHY, FETAL, CAR	45.71								
05	76828	DOPPLER ECHOCARDIOGRAPHY, FETAL, CAR	18.28								
03	76830	ECHOGRAPHY, TRANSVAGINAL	77.21								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X- OVERS	UVS >001
05	76830	ECHOGRAPHY,TRANSVAGINAL	30.88								
03	76831	ECHO EXAM, UTERUS	77.53				F				
05	76831	ECHO EXAM, UTERUS	31.01								
03	76856	ECHOGRAPHY, PELVIC, REAL TIME	77.46								
05	76856	ECHOGRAPHY, PELVIC, REAL TIME	30.98								
03	76857	ECHOGRAPHY, PELVIC,LIMITED OR FOLLOW	53.10								
05	76857	ECHOGRAPHY,PELVIC,LIMITED OR FOLLOW-	21.24								
03	76870	ECHOGRAPHY,SCROTUM AND CONTENTS	76.26				M				
05	76870	ECHOGRAPHY,SCROTUM AND CONTENTS	30.51				M				
03	76872	ECHOGRAPHY, TRANSRECTAL	87.37								
05	76872	ECHOGRAPHY, TRANSRECTAL	34.95								
03	76873	ECHOGRAP TRANS R, PROS STUDY	117.45				M				
05	76873	ECHOGRAP TRANS R, PROS STUDY	46.97				M				
03	76880	ECHOGRAPHY, EXTREMITY, B-SCAN	77.53								
05	76880	ECHOGRAPHY, EXTREMITY, B-SCAN	31.01								
03	76885	ECHO EXAM, INFANT HIPS	72.42								
05	76885	ECHO EXAM, INFANT HIPS	28.96								
03	76886	ECHO EXAM, INFANT HIPS	64.49								
05	76886	ECHO EXAM, INFANT HIPS	25.80								
03	76930	ECHO GUIDE FOR HEART SAC TAP	67.92								
05	76930	ECHO GUIDE FOR HEART SAC TAP	27.17								
03	76932	ULTRA GUIDANCE ENDOMYOCARD BIOPSY	66.01								
05	76932	ULTRASONIC GUIDANCE ENDOMYOCARBIO	26.40								
03	76936	ECHO GUIDE FOR ARTERY REPAIR	225.82								
05	76936	ECHO GUIDE FOR ARTERY REPAIR	90.32								
03	76937	US GUIDE, VASCULAR ACCESS	24.72								
05	76937	US GUIDE, VASCULAR ACCESS	9.89								
03	76940	US GUIDE, TISSUE ABLATION	128.57								
05	76940	US GUIDE, TISSUE ABLATION	51.43								
03	76941	ECHO GUIDE FOR TRANSFUSION	91.78								
05	76941	ECHO GUIDE FOR TRANSFUSION	36.71								
03	76942	ECHO GUIDE FOR BIOPSY	117.55								X
05	76942	ECHO GUIDE FOR BIOPSY	47.03								X
03	76945	ULTRASONIC GUIDE/COLL/DRAIN;COM.PROC	65.22								
05	76945	ULTRASONIC GUODE/COLL/DRAIN;COM PROC	26.09								
03	76946	ECHO GUIDE FOR AMNIOCENTESIS	46.04								X
05	76946	ECHO GUIDE FOR AMNIOCENTESIS	18.41								X
03	76950	ECHO GUIDANCE RADIOTHERAPY	52.54								X
05	76950	ECHO GUIDANCE RADIOTHERAPY	21.01								X
03	76965	ECHO GUIDANCE RADIOTHERAPY	175.70								
05	76965	ECHO GUIDANCE RADIOTHERAPY	70.28								
03	76970	ULTRASOUND EXAM FOLLOW-UP	51.47								
05	76970	ULTRASOUND EXAM FOLLOW-UP	20.59								
03	76975	GASTROINTESTINAL ENDOSCOPIC ULTRASOU	71.36								
05	76975	GASTROINTESTINAL ENDOSCOPIC ULTRASOU	28.55								
03	76977	US BONE DENSITY MEASURE	19.63								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
05	76977	US BONE DENSITY MEASURE	7.85								
03	76998	ULTRASONIC GUIDANCE, INTRAOPERATIVE	100.57								
03	76999	ECHO EXAMINATION PROCEDURE	MP		X						
05	76999	ECHO EXAMINATION PROCEDURE	MP		X						
03	77001	FLUOROSCOPIC GUIDANCE FOR CENTRAL VE	64.13								
05	77001	FLUOROSCOPIC GUIDANCE FOR CENTRAL VE	25.65								
03	77002	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLA	50.65								
05	77002	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLA	20.25								
03	77003	FLUOROSCOPIC GUIDANCE AND LOCALIZATI	49.47								
05	77003	FLUOROSCOPIC GUIDANCE AND LOCALIZATI	19.79								
03	77011	COMPUTED TOMOGRAPHY GUIDANCE FOR STE	402.75								
05	77011	COMPUTED TOMOGRAPHY GUIDANCE FOR STE	161.10								
03	77012	COMPUTED TOMOGRAPHY GUIDANCE FOR NEE	202.92								
05	77012	COMPUTED TOMOGRAPHY GUIDANCE FOR NEE	81.18								
03	77013	COMPUTERIZED TOMOGRAPHY GUIDANCE FOR	406.50								
03	77014	COMPUTED TOMOGRAPHY GUIDANCE FOR PLA	122.86								
05	77014	COMPUTED TOMOGRAPHY GUIDANCE FOR PLA	49.14								
03	77021	MAGNETIC RESONANCE GUIDANCE FOR NEED	321.38								
05	77021	MAGNETIC RESONANCE GUIDANCE FOR NEED	128.55								
03	77022	MAGNETIC RESONANCE GUIDANCE FOR, AND	491.80								
03	77031	STEREOTACTIC LOCALIZATION GUIDANCE F	181.99								
05	77031	STEREOTACTIC LOCALIZATION GUIDANCE F	72.78								
03	77032	MAMMOGRAPHIC GUIDANCE FOR NEEDLE PLA	47.55								
05	77032	MAMMOGRAPHIC GUIDANCE FOR NEEDLE PLA	19.02								
03	77051	COMPUTER-AIDED DETECTION (COMPUTER A	11.25								
05	77051	COMPUTER-AIDED DETECTION (COMPUTER A	4.49								
03	77052	COMPUTER-AIDED DETECTION (COMPUTER A	11.25	40	99		F			X	
05	77052	COMPUTER-AIDED DETECTION (COMPUTER A	4.49	40	99		F			X	
03	77053	MAMMARY DUCTOGRAM OR GALACTOGRAM, SI	67.51								
05	77053	MAMMARY DUCTOGRAM OR GALACTOGRAM, SI	27.00								
03	77054	MAMMARY DUCTOGRAM OR GALACTOGRAM, MU	85.79								
05	77054	MAMMARY DUCTOGRAM OR GALACTOGRAM, MU	34.32								
03	77055	MAMMOGRAPHY; UNILATERAL	56.53								
05	77055	MAMMOGRAPHY; UNILATERAL	22.62								
03	77056	MAMMOGRAPHY; BILATERAL	71.32								
05	77056	MAMMOGRAPHY; BILATERAL	28.53								
03	77057	SCREENING MAMMOGRAPHY, BILATERAL (2-	56.82	40	99		F			X	
05	77057	SCREENING MAMMOGRAPHY, BILATERAL (2-	22.72	40	99		F			X	
03	77058	MAGNETIC RESONANCE IMAGING, BREAST,	562.75								
05	77058	MAGNETIC RESONANCE IMAGING, BREAST,	225.11								
03	77059	MAGNETIC RESONANCE IMAGING, BREAST,	650.06								
05	77059	MAGNETIC RESONANCE IMAGING, BREAST,	260.03								
03	77071	MANUAL APPLICATION OF STRESS PERFORM	23.92								
03	77072	BONE AGE STUDIES	16.14								
05	77072	BONE AGE STUDIES	6.46								
03	77073	BONE LENGTH STUDIES (ORTHOROENTGENOG	28.30								

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
05	77073	BONE LENGTH STUDIES (ORTHOROENTGENOG	11.32								
03	77074	RADIOLOGIC EXAMINATION, OSSEOUS SURV	45.95								
05	77074	RADIOLOGIC EXAMINATION, OSSEOUS SURV	18.38								
03	77075	RADIOLOGIC EXAMINATION, OSSEOUS SURV	65.19								
05	77075	RADIOLOGIC EXAMINATION, OSSEOUS SURV	26.08								
03	77076	RADIOLOGIC EXAMINATION, OSSEOUS SURV	53.25								
05	77076	RADIOLOGIC EXAMINATION, OSSEOUS SURV	21.30								
03	77077	JOINT SURVEY, SINGLE VIEW, 2 OR MORE	36.34								
05	77077	JOINT SURVEY, SINGLE VIEW, 2 OR MORE	14.54								
03	77078	COMPUTED TOMOGRAPHY, BONE MINERAL DE	73.80								
05	77078	COMPUTED TOMOGRAPHY, BONE MINERAL DE	29.52								
03	77079	COMPUTED TOMOGRAPHY, BONE MINERAL DE	66.93								
05	77079	COMPUTED TOMOGRAPHY, BONE MINERAL DE	26.76								
03	77080	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DX	65.18								
05	77080	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DX	26.07								
03	77081	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DX	26.91								
05	77081	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DX	10.77								
03	77082	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DX	23.30								
05	77082	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DX	9.32								
03	77083	RADIOGRAPHIC ABSORPTIOMETRY (EG, PHO	24.16								
05	77083	RADIOGRAPHIC ABSORPTIOMETRY (EG, PHO	9.66								
03	77084	MAGNETIC RESONANCE (EG, PROTON) IMAG	315.42								
05	77084	MAGNETIC RESONANCE (EG, PROTON) IMAG	126.17								
03	77261	SIMPLE TREAT PLAN-THERA RADIOL	54.31								
03	77262	INTER TREAT PLAN-THERA RADIOLO	81.81								
03	77263	COMPLEX TREAT PLAN-THERA RADIO	121.94								
03	77280	SIMPLE,RAD SIMU-AIDED FIELDSET	124.90								
05	77280	SIMPLE,RAD SIMU-AIDED FIELD	49.96								
03	77285	INTER,RAD SIMU-AIDED FIELD SET	209.05								
05	77285	INTER,RAD SIMU-AIDED FIELD SET	83.63								
03	77290	COMP,RAD SIMU-AIDED FIELD SET	304.83								
05	77290	COMP,RAD SIMU-AIDED FIELD SET	121.93								
03	77295	THERAPEUTIC RADIOLOGY SIMULATION-AID	748.35								X
05	77295	THERAPEUTIC RADIOLOGY SIMULATION-AID	299.34								X
03	77299	UNLISTED CLINICAL TREAT.PLAN	139.37		X						
05	77299	UNLISTED CLINICAL TREAT.PLAN	139.37		X						
03	77300	BASIC RAD DOSIMETRY CALCULATIO	54.16								X
05	77300	BASIC RAD DOSIMETRY CALCULATION	21.67								X
03	77301	RADIOLTHERAPY DOS PLAN, IMRT	1,345.75								
05	77301	RADIOLTHERAPY DOS PLAN, IMRT	538.30								
03	77305	TELETHRAPHY ISODOSE PLAN-SIMPLE	65.91								
05	77305	TELETHERAPY ISODOSE PLAN SIMPLE	26.36								
03	77310	TELETHERAPY ISODOSE PLAN-INTER	88.51								
05	77310	TELETHERAPY ISODOSE PLAN-INTER	35.40								
03	77315	TELETHERAPY ISODOSE PLAN-COMPL	116.93								
05	77315	TELETHERAPY ISODOSE PLAN-COMPL	46.77								

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1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	77321	SPEC TELETHERAPY PLAN TOTALBOD	120.35								
05	77321	SPEC TELETHERAPY PLAN TOTAL BODY	48.14								
03	77326	BRACHYTHERAPY ISODOSE CALCULAT SIMPL	98.52								
05	77326	BRACHYTHERAPY ISODOSE CALC SIM	39.42								
03	77327	BRACHYTHERAPY ISODOSE CALCULA INTERM	141.48								
05	77327	BRACHYTHERAPY ISODOSE CAL INTE	56.59								
03	77328	BRACHYTHERAPY ISODOSE CALCULAT COMPL	198.85								
05	77328	BRACHYTHERAPY ISODOSE CAL COMP	79.54								
03	77331	SPECIAL DOSIMETRY (SPECIFY)	50.50								X
05	77331	SPECIAL DOSIMETRY (SPECIFY)	17.12								X
03	77332	TREATMENT DEVICES,DESIGN/CONSTR;SIMP	54.53								
05	77332	TREATMENT DEVICES,DESIGN/SIMPLE	21.81								
03	77333	TREATMENT DEVICES/DESIGN;INTERMEDIAT	68.64								
05	77333	TREATMENT DEVICES/DESIGN-INTER	27.46								
03	77334	TREATMENT DEVICES/DESIGN;COMPLEX	122.07								X
05	77334	TREATMENT DEVICES/DESIGN;COMPL	48.83								X
03	77336	CONTINUING RADIATION PHYSICS CONSULT	65.89								
03	77338	MULTI-LEAF COLLIMATOR (MLC) DEVICE(S	316.68								
05	77338	MULTI-LEAF COLLIMATOR (MLC) DEVICE(S	126.67								
03	77370	SPECIAL MED RAD PHYSICS CONSULTATION	87.34								
03	77371	RADIATION TREATMENT DELIVERY, STEREO	750.53								
03	77372	RADIATION TREATMENT DELIVERY, STEREO	569.93								
03	77373	STEREOTACTIC BODY RADIATION THERAPY,	1,062.10								
03	77399	UNLISTED RAD THER/PHYSICS CONS	219.73								X
05	77399	UNLISTED RAD THER/PHYSICS CONS	219.73								X
03	77401	RADIAT TRTMNT DELIVERY SUPFCL/ORTHO	38.46								X
03	77402	RADIAT TRTMNT DELIVER-SING AREA/PORT	78.95								X
03	77403	RADIAT TRTMNT DELIVERY-6-10 MEV	71.76								X
03	77404	RADIAT TRTMNT DELIVERY-11-19 MEV	77.23								X
03	77406	RADIAT TRTMNT DELIVERY-20 MEV OR >	77.72								X
03	77407	RADIAT TRTMNT DELIVERY-2AREAS,3PORTS	101.06								X
03	77408	RADIAT TRTMNT DELIVERY-2AR,3PT-6-10	93.63								X
03	77409	RADIAT TRTMNT DELIVERY,2AR,3PR-11-19	100.82								X
03	77411	RADIATION TREATMENT DELIVERY TWO SEP	100.57								X
03	77412	RADIAT TRTMNT DELIV UP TO 5 MEV	116.72								X
03	77413	RADIAT TRTMNT DELIV 6-10 MEV	117.71								X
03	77414	RADIAT TRTMNT DELIV 11-19 MEV	128.39								X
03	77416	RADIAT TRTMNT DELIV 20 MEV OR MORE	128.39								X
03	77417	THERAPEUTIC RADIOLOGY PORT FILMS	14.04								X
05	77417	THERAPEUTIC RADIOLOGY PORT FILMS	5.63								X
03	77418	RADIATION TX DELIVERY, IMRT	427.97								X
05	77418	RADIATION TX DELIVERY, IMRT	171.19								X
03	77421	STEREOSCOPIC X-RAY GUIDANCE	85.78								
05	77421	STEREOSCOPIC X-RAY GUIDANCE	34.32								
03	77422	NEUTRON BEAM TX, SIMPLE	91.17								
03	77423	NEUTRON BEAM TX, COMPLEX	124.16								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	77427	RADIATION TX MANAGEMENT, X5	131.18								
03	77431	RADIATION THERAPY MANAGEMENT W COMPL	66.52								X
03	77432	STEREOTACTIC RADIATION TREATMENT MAN	293.56								
03	77435	STEREOTACTIC BODY RADIATION THERAPY,	466.59								
03	77470	SPECIAL TREATMENT PROCEDURE	356.80		X						
05	77470	SPECIAL TREATMENT PROCEDURE	142.72		X						
03	77499	UNLISTED,CLINICAL TREAT. MNGT	MP		X						X
05	77499	UNLISTED,CLINICAL TREAT./MNGT	MP		X						X
03	77520	PROTON BEAM DELIVERY	36.93								
05	77520	PROTON BEAM DELIVERY	14.76								
03	77522	PROTON TRMT, SIMPLE W/COMP	39.84								
05	77522	PROTON TRMT, SIMPLE W/COMP	15.94								
03	77523	PROTON BEAM DELIVERY	43.57								
05	77523	PROTON BEAM DELIVERY	17.43								
03	77525	PROTON TREATMENT, COMPLEX	45.64								
05	77525	PROTON TREATMENT, COMPLEX	18.25								
03	77600	HYPERTHERMIA,EXT GEN, SUPERFICIAL	217.20								
05	77600	HYPERTHERMIA,EXT GEN,SUPERFICIAL	86.88								
03	77605	HYPERTHERMIA,EXT GEN/DEEP	351.20								X
05	77605	HYPERTHERMIA,EXT GEN/DEEP	140.48								
03	77610	HYPERTHERMIA;INTERSTITIAL/5 OR <	312.71								X
05	77610	HYPERTHERMIA/INTERSTITIAL/5 OR <	125.08								
03	77615	HYPERTHERMIA/INTERSTITIAL/>5	442.07								X
05	77615	HYPERTHERMIA/INTERSTITIAL/>5	176.83								
03	77620	HYPERTHERMIA...INTRACAVITARY PROBE	224.00								
05	77620	HYPERTHERMIA...INTRACAVITARY PROBE	89.60								
03	77750	INFUSE/INSTILL RADIOELEMENT	226.44								
05	77750	INFUSE/INSTILL RADIOELEMENT	90.58								
03	77761	SIMPLE INTRACAV RADIOELEMENT	229.02								
05	77761	SIMPLE INTRACAV. RADIOELEMENT	91.61								
03	77762	INTERM,INTRACAV RADIOELEMENT	320.71								
05	77762	INTER. INTRACAV.RADIOELEMENT	128.28								
03	77763	COMPLEX,INTRACAV RADIOELEMENT	453.96								
05	77763	COMPLEX-INTRACAV RADIOLOGY	181.58								
03	77776	INTERSTITIAL RADIOELEMENT-SIMPLE	265.41								
05	77776	INTERSTITIAL RADIOELEMENT	106.17								
03	77777	INTERSTITIAL RADIOELEMENT-INTERMEDIA	386.72								
05	77777	INTERSTITIAL RAD-ELEMENT-INTER	154.68								
03	77778	INTERSTITIAL RADIOELEMENT-COMPLEX	555.89								
05	77778	INTERSTITIAL RAD-ELEMENT-COMPL	222.35								
03	77785	REMOTE AFTERLOADING HIGH DOSE RATE R	128.11								
05	77785	REMOTE AFTERLOADING HIGH DOSE RATE R	51.25								
03	77786	REMOTE AFTERLOADING HIGH DOSE RATE R	380.68								
05	77786	REMOTE AFTERLOADING HIGH DOSE RATE R	152.27								
03	77787	REMOTE AFTERLOADING HIGH DOSE RATE R	565.94								
05	77787	REMOTE AFTERLOADING HIGH DOSE RATE R	226.38								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
TS	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	77789	SURFACE APPLICATION OF RADIOELEMENT	58.87		X						
05	77789	SURFACE APPLICATION RADIOELEMENT	23.55		X						
03	77790	SUPERVISE/HANDLE/LOAD RADIOELEMENT	56.91								
05	77790	SUPERVISE/HANDLE/LOAD RADIOELEMENT	22.77								
03	77799	UNLISTED CLINICAL BRACHY THERAPY	MP		X						
05	77799	RADIUM/RADIOISOTOPE THERAPY	MP		X						
03	78000	NUCLEAR EXAM OF THYROID	42.55								
05	78000	NUCLEAR EXAM OF THYROID	17.02								
03	78001	NUCLEAR EXAMS OF THYROID	63.36								
05	78001	NUCLEAR EXAMS OF THYROID	25.34								
03	78003	TREATMENT OF THYROID	47.49								
05	78003	TREATMENT OF THYROID	18.99								
03	78006	THYROID IMAGING, WITH UPTAKE	125.17								
05	78006	THYROID IMAGING, WITH UPTAKE	50.07								
03	78007	THYROID IMAGING, WITH UPTAKE	89.02								
05	78007	THYROID IMAGING, WITH UPTAKE	35.59								
03	78010	NUCLEAR SCAN OF THYROID	89.54								
05	78010	NUCLEAR SCAN OF THYROID	35.81								
03	78011	THYROID IMAGING W/VASCULAR FLOW	101.24								
05	78011	THYROID IMAGING W/VASCULAR FLOW	40.51								
03	78015	NUCLEAR SCAN OF THYROID	122.88								
05	78015	NUCLEAR SCAN OF THYROID	49.16								
03	78016	EXTENSIVE THYROID SCAN	179.08								
05	78016	EXTENSIVE THYROID SCAN	71.64								
03	78018	THYROID CA IMAGING;WHOLE BODY Y	200.42								
05	78018	THYROID CA IMAGING;WHOLE BODY	80.16								
03	78020	THYROID MET UPTAKE	60.86								
03	78070	PARATHROID IMAGING	127.74								
05	78070	PARATHROID IMAGING	51.10								
03	78075	NUCLEAR SCAN OF ADRENALS	242.13								
05	78075	NUCLEAR SCAN OF ADRENALS	96.86								
03	78099	ENDOCRINE NUCLEAR PROCEDURE	MP		X						
05	78099	ENDOCRINE NUCLEAR PROCEDURE	MP		X						
03	78102	NUCLEAR SCAN OF BONE MARROW	97.32								
05	78102	NUCLEAR SCAN OF BONE MARROW	38.92								
03	78103	NUCLEAR SCAN OF BONE MARROW	141.21								
05	78103	NUCLEAR SCAN OF BONE MARROW	56.48								
03	78104	NUCLEAR SCAN OF BONE MARROW	158.29								
05	78104	NUCLEAR SCAN OF BONE MARROW	63.32								
03	78110	NUCLEAR EXAM, PLASMA VOLUME	46.02								
05	78110	NUCLEAR EXAM, PLASMA VOLUME	18.40								
03	78111	NUCLEAR EXAM, PLASMA VOLUME	70.82								
05	78111	NUCLEAR EXAM, PLASMA VOLUME	28.33								
03	78120	NUCLEAR EXAM OF RBC MASS	57.70								
05	78120	NUCLEAR EXAM OF RBC MASS	23.08								
03	78121	NUCLEAR EXAM OF RBC MASS	80.42								

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1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
05	78121	NUCLEAR EXAM OF RBC MASS	32.17								
03	78122	WHOLE BLOOD VOLUME DETERMINATION	120.90								
05	78122	WHOLE BLOOD VOLUME DETERMINATION	48.36								
03	78130	RED CELL SURVIVAL EXAM	101.60								
05	78130	RED CELL SURVIVAL EXAM	40.64								
03	78135	RED CELL SURVIVAL EXAM	194.78								
05	78135	RED CELL SURVIVAL EXAM	77.91								
03	78140	NUCLEAR EXAM,RED BLOOD CELLS	114.32								
05	78140	NUCLEAR EXAM,RED BLOOD CELLS	45.73								
03	78185	NUCLEAR SCAN OF SPLEEN	109.73								
05	78185	NUCLEAR SCAN OF SPLEEN	43.89								
03	78190	KINETICS STUDY F PLATELET SURVIVAL	158.97								
03	78195	NUCLEAR SCAN OF LYMPH SYSTEM	201.46								
05	78195	NUCLEAR SCAN OF LYMPH SYSTEM	80.58								
03	78199	NUCLEAR EXAM BLOOD/LYMPH	MP							X	
05	78199	NUCLEAR EXAM BLOOD/LYMPH	MP							X	
03	78201	NUCLEAR SCAN OF LIVER	105.67								
05	78201	NUCLEAR SCAN OF LIVER	42.27								
03	78202	NUCLEAR SCAN OF LIVER	121.57								
05	78202	NUCLEAR SCAN OF LIVER	48.62								
03	78205	LIVER IMAGING (SPECT)	170.31								
05	78205	LIVER IMAGING (SPECT)	68.13								
03	78206	LIVER IMAGE (3-D) W/FLOW	212.66								
05	78206	LIVER IMAGE (3-D) W/FLOW	85.07								
03	78215	NUCLEAR SCAN, LIVER & SPLEEN	115.28								
05	78215	NUCLEAR SCAN, LIVER & SPLEEN	46.12								
03	78216	NUCLEAR SCAN, LIVER/SPLEEN	103.25								
05	78216	NUCLEAR SCAN, LIVER/SPLEEN	41.31								
03	78220	NUCLEAR SCAN, LIVER FUNCTION	106.89								
05	78220	NUCLEAR SCAN, LIVER FUNCTION	42.76								
03	78223	HEPATOBLILARY DUCTAL SYS IMAG,GALLBLA	182.20								
05	78223	HEPATOBLILARY DUC SYSTEM,GALLBLADDER	72.89								
03	78230	NUCLEAR SCAN, SALIVARY GLAND	96.27								
05	78230	NUCLEAR SCAN, SALIVARY GLAND	38.50								
03	78231	NUCLEAR SCANS,SALIVARY GLAND	95.98								
05	78231	NUCLEAR SCANS,SALIVARY GLAND	38.39								
03	78264	GASTRIC EMPTYING STUDY	175.15								
05	78264	GASTRIC EMPTYING STUDY	70.06								
03	78267	BREATH TST ATTAIN/ANAL C-14	9.11								
05	78267	BREATH TST ATTAIN/ANAL C-14	3.63								
03	78268	BREATH TEST ANALYSIS, C-14	33.54								
05	78268	BREATH TEST ANALYSIS, C-14	13.41								
03	78270	VIT B-12 ABSORPTION EXAMS	52.38								
05	78270	VIT B-12 ABSORPTION EXAMS	20.96								
03	78271	VIT B-12 ABSORPTION EXAMS	52.87								
05	78271	VIT B-12 ABSORPTION EXAMS	21.15								

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1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
TS	CODE	DESCRIPTION									
03	78272	VIT B-12 ABSORPTION EXAMS	66.82								
05	78272	VIT B-12 ABSORPTION EXAMS	26.71								
03	78278	ACUTE GI BLOOD LOSS IMAGING	192.50								
05	78278	ACUTE GI BLOOD LOSS IMAGING	77.01								
03	78290	INTESTINE IMAGING (EG, ECTOPIC GASTR	169.12								
05	78290	INTESTINE IMAGING (EG, ECTOPIC GASTR	67.65								
03	78299	G.I. NUCLEAR PROCEDURE	MP		X						
05	78299	G.I. NUCLEAR PROCEDURE	MP		X						
03	78300	NUCLEAR SCAN OF BONE	111.85								
05	78300	NUCLEAR SCAN OF BONE	44.73								
03	78305	NUCLEAR SCAN OF BONES	144.20								
05	78305	NUCLEAR SCAN OF BONES	57.67								
03	78306	NUCLEAR SCAN OF SKELETON	161.03								
05	78306	NUCLEAR SCAN OF SKELETON	64.41								
03	78315	BONE IMAGING;BY THREE PHASE TECHNIQ	194.39								
05	78315	BONE IMAGING; BY THREE PHASE TECHNIQ	77.74								
03	78320	BONE IMAGING;TOMOGRAPHIC (SPECT)	181.63								
05	78320	BONE IMAGING;TOMOGRAPHIC (SPECT)	72.66								
03	78399	MUSCULOSKELETAL NUCLEAR EXAM	MP		X						
05	78399	MUSCULOSKELETAL NUCLEAR EXAM	MP		X						
03	78414	DETERMINE VENTRIC.EJECT FRACTION	58.45								
05	78414	DETERMINE VENTRIC EJECT FRACTION	23.37								
03	78445	NUCLEAR SCAN OF BLOOD FLOW	96.84								
05	78445	NUCLEAR SCAN OF BLOOD FLOW	38.73								
03	78451	MYOCARDIAL PERFUSION IMAGING TOMOGRA	145.95								
05	78451	MYOCARDIAL PERFUSION IMAGING TOMOGRA	58.38								
03	78452	MYOCARDIAL PERFUSION IMAGING TOMOGRA	247.31								X
05	78452	MYOCARDIAL PERFUSION IMAGING TOMOGRA	98.92								X
03	78453	MYOCARDIAL PERFUSION IMAGING PLANAR	126.55								
05	78453	MYOCARDIAL PERFUSION IMAGING PLANAR	50.62								
03	78454	MYOCARDIAL PERFUSION IMAGING PLANAR	122.75								X
05	78454	MYOCARDIAL PERFUSION IMAGING PLANAR	49.10								X
03	78456	ACUTE VENOUS THROMBUS IMAGE	166.24								
05	78456	ACUTE VENOUS THROMBUS IMAGE	66.49								
03	78466	MYOCARD IMAGING..;AT REST,QUAL.	134.85								
05	78466	MYOCARD IMAGING...AT REST;QUAL.	53.94								
03	78468	MYOCARD IMAGING..AT REST;FIRST PASS	165.57								
05	78468	MYOCARD IMAGING..AT REST;FIRST PASS	66.23								
03	78469	MYOCARD IMAGING..REST;EMISS COMP TOM	178.74								
05	78469	MYOCARD IMAGING..REST;EMISS COMP TOM	71.49								
03	78472	CARD BLD POOL IMAG,AT REST,WALL MOT	181.49								
05	78472	CARD BLD POOL IMAG,AT REST,WALL MOT	72.60								
03	78473	CARDIAC BLOOD POOL IMAGING, GATED EQ	255.54								
05	78473	CARDIAC BLOOD POOL IMAGING GATED EQU	102.22								
03	78481	CARD BLD POOL IMAG-FRST PASS TECH...	166.84								
05	78481	CARD BLD POOL IMAG-FIRST PASS TECH	66.73								

## LOUISIANA MEDICAID LABORATORY AND RADIOLOGY (NON-HOSPITAL) FEE SCHEDULE

FEES EFFECTIVE FOR AUGUST 01, 2010 - DECEMBER 31, 2010

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
TS	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	78483	CARDIAC BLOOD POOL IMAGING, FIRST PA	245.97								
05	78483	CARDIAC BLOOD POOL IMAGING, FIRST PA	98.39								
03	78494	HEART IMAGE, SPECT	210.07								
05	78494	HEART IMAGE, SPECT	84.03								
03	78496	HEART FIRST PASS ADD-ON	122.24								
05	78496	HEART FIRST PASS ADD-ON	48.90								
03	78499	CARDIOVASCULAR NUCLEAR EXAM	MP								X
05	78499	CARDIOVASCULAR NUCLEAR EXAM	MP								X
03	78580	NUCLEAR SCAN OF LUNG	133.91								
05	78580	NUCLEAR SCAN OF LUNG	53.56								
03	78584	NUCLEAR SCAN OF LUNG;W/VENT;1 BREATH	113.23								
05	78584	NUCLEAR SCAN OF LUNG W/VENT;1 BREATH	45.29								
03	78585	NUCLEAR LUNG SCAN,REBREATHE/WASHOUTO	218.89								
05	78585	NUCLEAR LUNG SCAN,REBREATHE/WASHOUTU	87.56								
03	78586	NUCLEAR SCAN OF LUNG	105.71								
05	78586	NUCLEAR SCAN OF LUNG	42.28								
03	78587	NUCLEAR SCAN OF LUNG	121.23								
05	78587	NUCLEAR SCAN OF LUNG	48.50								
03	78588	PERFUSION LUNG IMAGE	185.55								
05	78588	PERFUSION LUNG IMAGE	74.22								
03	78591	NUCLEAR SCAN OF LUNG	103.30								
05	78591	NUCLEAR SCAN OF LUNG	41.33								
03	78593	NUCLEAR SCAN OF LUNG	122.34								
05	78593	NUCLEAR SCAN OF LUNG	48.94								
03	78594	NUCLEAR SCAN OF LUNG	150.74								
05	78594	NUCLEAR SCAN OF LUNG	60.29								
03	78596	PULMONARY QUANTITATIVE DIFFERENTIAL	244.52								
03	78599	RESPIRATORY NUCLEAR EXAM	MP								X
05	78599	RESPIRATORY NUCLEAR EXAM	MP								X
03	78600	NUCLEAR SCAN OF BRAIN	126.19								
05	78600	NUCLEAR SCAN OF BRAIN	50.48								
03	78601	NUCLEAR SCAN OF BRAIN	129.36								
05	78601	NUCLEAR SCAN OF BRAIN	51.74								
03	78605	NUCLEAR SCAN OF BRAIN	123.74								
05	78605	NUCLEAR SCAN OF BRAIN	49.48								
03	78606	NUCLEAR SCAN OF BRAIN	181.64								
05	78606	NUCLEAR SCAN OF BRAIN	72.66								
03	78607	BRAIN IMAGING,COMP.;TOMOGRAPHIC(ECT)	235.88								
05	78607	BRAIN IMAGING,COMP.;TOMOGRAPHIC(ECT)	94.36								
03	78610	NUCLEAR SCAN OF BRAIN	115.70								
05	78610	NUCLEAR SCAN OF BRAIN	46.29								
03	78630	CEREBROSPINAL FLUID SCAN	198.23								
05	78630	CEREBROSPINAL FLUID SCAN	79.30								
03	78635	CEREBROSPINAL FLUID SCAN	163.58								
05	78635	CEREBROSPINAL FLUID SCAN	65.43								
03	78645	CEREBROSPINAL FLUID SCAN	154.07								

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
05	78645	CEREBROSPINAL FLUID SCAN	61.63								
03	78647	CEREBROSPINAL FLUID SCAN	215.49								
05	78647	CEREBROSPINAL FLUID SCAN	86.19								
03	78650	CEREBROSPINAL FLUID SCAN	189.46								
05	78650	CEREBROSPINAL FLUID SCAN	75.80								
03	78660	NUCLEAR EXAM OF TEAR FLOW	98.76								
05	78660	NUCLEAR EXAM OF TEAR FLOW	39.51								
03	78699	NERVOUS SYSTEM NUCLEAR EXAM	MP		X						
05	78699	NERVOUS SYSTEM NUCLEAR EXAM	MP		X						
03	78700	NUCLEAR SCAN OF KIDNEY	110.76								
05	78700	NUCLEAR SCAN OF KIDNEY	44.29								
03	78701	NUCLEAR SCAN OF KIDNEY	131.02								
05	78701	NUCLEAR SCAN OF KIDNEY	52.41								
03	78707	NUCLEAR SCAN OF KIDNEY	159.43								
05	78707	NUCLEAR SCAN OF KIDNEY	63.77								
03	78708	KIDNEY FLOW & FUNCTION IMAGE	169.07								
05	78708	KIDNEY FLOW & FUNCTION IMAGE	67.63								
03	78709	KIDNEY FLOW & FUNCTION IMAGE	215.10								
05	78709	KIDNEY FLOW & FUNCTION IMAGE	86.04								
03	78710	KIDNEY IMAGING (SPECT)	167.75								
05	78710	KIDNEY IMAGING (SPECT)	67.10								
03	78725	NUCLEAR EXAM OF KIDNEY	72.48								
05	78725	NUCLEAR EXAM OF KIDNEY	28.99								
03	78730	NUCLEAR EXAM OF BLADDER	50.67								
05	78730	NUCLEAR EXAM OF BLADDER	20.26								
03	78740	NUCLEAR EXAM OF URETER	117.28								
05	78740	NUCLEAR EXAM OF URETER	46.91								
03	78761	TESTICULAR IMAGING,W/VASCULAR	128.83								X
05	78761	TESTICULAR IMAGING,W/VASCULAR	51.54								
03	78799	GENITOURINARY NUCLEAR EXAM	MP		X						
05	78799	GENITOURINARY NUCLEAR EXAM	MP		X						
03	78800	NUCLEAR EXAM OF LESION	121.75								
05	78800	NUCLEAR EXAM OF LESION	48.71								
03	78801	NUCLEAR EXAM OF LESIONS	158.34								
05	78801	NUCLEAR EXAM OF LESIONS	63.34								
03	78802	NUCLEAR EXAM OF LESIONS	204.42								
05	78802	NUCLEAR EXAM OF LESIONS	81.78								
03	78803	TUMOR LOCALIZATION (SPECT)	230.69								
05	78803	TUMOR LOCALIZATION SPECT)	92.28								
03	78804	TUMOR IMAGING, WHOLE BODY	362.41								
05	78804	TUMOR IMAGING, WHOLE BODY	144.96								
03	78805	ABSCESS LOCALIZATION;LIMITED AREA	121.96								
05	78805	ABSCESS LOCALIZATION;LIMITED AREA	48.79								
03	78807	RADIONUCLIDE LOCALIZATION OF ABSCESS	230.16								
05	78807	RADIONUCLIDE LOCALIZATION OF ABSCESS	92.07								
03	78999	NUCLEAR DIAGNOSTIC EXAM	MP		X						

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
TS	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
05	78999	NUCLEAR DIAGNOSTIC EXAM	MP		X						
03	79005	NUCLEAR RX, ORAL ADMIN	122.01								
05	79005	NUCLEAR RX, ORAL ADMIN	48.80								
03	79101	NUCLEAR RX, IV ADMIN	129.17								
05	79101	NUCLEAR RX, IV ADMIN	51.68								
03	79200	RADIONUCLIDE THERAPY	131.05								
03	79300	RADIONUCLIDE THERAPY	42.67								
03	79403	HEMATOPOETIC NUCLEAR THERAPY	175.87								
05	79403	HEMATOPOETIC NUCLEAR THERAPY	70.34								
03	79440	RADIONUCLIDE THERAPY	128.57								
03	79445	NUCLEAR RX, INTRA-ARTERIAL	143.59								
05	79445	NUCLEAR RX, INTRA-ARTERIAL	57.43								
03	79999	NUCLEAR MEDICINE THERAPY	MP		X						
05	79999	NUCLEAR MEDICINE THERAPY	MP		X						
03	80047	BASIC METABOLIC PANEL (CALCIUM, IONI	10.37								
03	80048	BASIC METABOLIC PANEL	9.81								
03	80050	GENERAL HEALTH SCREEN PANEL	34.86								
03	80051	ELECTROLYTE PANEL	8.00								
03	80053	EXECUTIVE PROFILE	12.26								
03	80055	OBSTETRIC PANEL	12.50	10 59			F		X		
03	80061	LIPID PROFILE	12.59								
03	80069	RENAL FUNCTION PANEL	10.06								
03	80074	ACUTE HEPATITIS PANEL	55.19								
03	80076	HEPATIC FUNCTION PANEL	9.46								
03	80100	DRUG, SCREEN;	15.34								X
03	80101	DRUG, SCREEN;	13.26								X
03	80102	DRUG, CONFIRMATION, EACH PROCEDURE	13.08								X
03	80150	AMIKACIN	12.28								
03	80152	AMITRIPTYLINE	18.88								
03	80154	BENZODIAZEPINES	19.50								
03	80156	CARBAMAZEPINE	12.28								
03	80157	ASSAY, CARBAMAZEPINE, FREE	13.98								
03	80158	CYCLOSPORINE	19.05								
03	80160	DESIPRAMINE	18.15								
03	80162	DIGOXIN	14.00								
03	80164	DIPROPYLACETIC ACID (VALPROIC ACID)	14.29								
03	80166	DOXEPIN	13.44								
03	80168	ETHOSUXIMIDE	17.23								
03	80170	GENTAMICIN	12.28								
03	80172	GOLD	17.17								
03	80173	ASSAY OF HALOPERIDOL	13.49								
03	80174	IMIPRAMINE	18.15								
03	80176	LIDOCAINE	13.44								
03	80178	LITHIUM	6.97								
03	80182	NORTRIPTYLINE	14.29								
03	80184	PHENOBARBITAL	12.09								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	80185	PHENYTOIN;	13.98								
03	80186	PHENYTOIN;	14.52								
03	80188	PRIMIDONE	17.49								
03	80190	PROCAINAMIDE;	17.66								
03	80192	PROCAINAMIDE;	17.66								
03	80194	QUINIDINE	15.39								
03	80195	ASSAY OF SIROLIMUS	16.07								
03	80196	SALICYLATE	7.49								
03	80197	ASSAY FOR TACROLIMUS	15.91								
03	80198	THEOPHYLLINE	14.92								
03	80200	TOBRAMYCIN	12.28								
03	80201	ASSAY FOR TOPIRAMATE	13.81								
03	80202	VANCOMYCIN	14.29								
03	80299	QUANTITATION OF DRUG, NOT ELSEWHERE	14.44								
03	80400	ACTH STIMULATION PANEL;	34.38								
03	80402	ACTH STIMULATION PANEL;	91.66								
03	80406	ACTH STIMULATION PANEL;	82.53								
03	80408	ALDOSTERONE SUPPRESSION EVALUATION P	132.34								
03	80410	CALCIUM-PENTAGASTRIN STIMULATION PAN	84.70								
03	80412	CORTICOTROPIC RELEASING HORMONE (CRH	347.53								
03	80414	CHORIONIC GONADOTROPHIN STIMULATION	54.45								
03	80415	CHORIONIC GONADOTROPHIN STIMULATION	58.92								
03	80416	RENIN STIMULATION PANEL	139.15								
03	80417	RENIN STIMULATION PANEL	46.37								
03	80418	COMBINED RAPID ANTERIOR PITUITARY EV	611.13								
03	80420	DEXAMETHASONE SUPPRESSION PANEL, 48	75.96								
03	80422	GLUCAGON TOLERANCE PANEL;	48.59								
03	80424	GLUCAGON TOLERANCE PANEL;	53.25								
03	80426	GONADOTROPIN RELEASING HORMONE STIMU	156.52								
03	80428	GROWTH HORMONE STIMULATION PANEL (EG	70.31								
03	80430	GROWTH HORMONE SUPPRESSION PANEL (GL	82.72								
03	80432	INSULIN-INDUCED C-PEPTIDE SUPPRESSIO	142.44								
03	80434	INSULIN TOLERANCE PANEL;	106.64								
03	80435	INSULIN TOLERANCE PANEL;	108.57								
03	80436	METYRAPONE PANEL	96.12								
03	80438	THYROTROPIN RELEASING HORMONE (TRH)	53.14								
03	80439	THYROTROPIN RELEASING HORMONE (TRH)	70.85								
03	80440	THYROTROPIN RELEASING HORMONE (TRH)	61.31								
03	80500	CLINICAL PATH CONSULT;LIMITED	18.18							X	
03	80502	CLINICAL PATH CONSULT;COMPREHENSIVE	47.15							X	
03	81000	URINALYSIS WITH MICROSCOPY	3.35								X
03	81001	URINALYSIS, AUTO, W/SCOPE	3.35								X
03	81002	ROUTINE URINE ANALYSIS	2.69								X
03	81003	URINALYSIS, BY DIP STICK OR TABLET R	2.38								X
03	81005	URINALYSIS	2.29								X
03	81007	BACTERIA SCREEN B NON-CULT TECH COMM	2.71								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE MIN-MAX	MED REV	PA	SEX	PSR	SL	X- OVERS	UVS >001
03	81015	MICROSCOPIC EXAM OF URINE	3.21								X
03	81020	URINALYSIS, GLASS TEST	3.89								
03	81025	URINE PREGNANCY TEST, BY VISUAL COLO	6.68				F				X
03	81050	VOLUME MEASUREMENT FOR TIMED COLLECT	3.17								X
03	81099	URINALYSIS TEST PROCEDURE	MP		X						
03	82000	ASSAY BLOOD ACETALDEHYDE	13.06								X
03	82003	ASSAY URINE ACETAMINOPHEN	21.35								X
03	82009	TEST FOR ACETONE	4.76								X
03	82010	ACETONE ASSAY	8.61								X
03	82013	ACETYLCHOLINESTERASE ASSAY	11.78								X
03	82016	ACYLCARNITINES, QUAL	16.07								X
03	82017	ACYLCARNITINES, QUANT	19.54								X
03	82024	ACTH RADIOIMMUNE ASSAY	40.74								
03	82030	RIA ASSAY, BLOOD ADP & AMP	14.91								
03	82040	ASSAY SERUM ALBUMIN	5.23								
03	82042	ASSAY URINE ALBUMIN	5.46								
03	82043	ALBUMIN;	6.11								
03	82044	ALBUMIN;	3.21								
03	82045	ALBUMIN, ISCHEMIA MODIFIED	39.77								
03	82055	ASSAY BLOOD ETHANOL	11.39								X
03	82075	ASSAY BREATH ETHANOL	12.71								X
03	82085	ASSAY OF BLOOD ALDOLASE	10.23								
03	82088	RIA ASSAY, BLOOD ALDOSTERONE	42.99								
03	82101	ASSAY OF URINE ALKALOIDS	31.66								
03	82103	ALPHA-1-ANTITRYPSIN;	14.16								
03	82104	ALPHA-1-ANTITRYPSIN;	15.24								
03	82105	ALPHA-FETOPROTEIN;	17.69								
03	82106	ALPHA-FETOPROTEIN;	17.69								
03	82107	ALPHA-FETOPROTEIN (AFP); AFP-L3 FRAC	75.46								
03	82108	ALUMINUM,BLOOD (SERUM)	8.94								
03	82120	AMINES, VAGINAL FLUID QUAL	3.97								
03	82127	AMINO ACID, SINGLE QUAL	16.07								X
03	82128	TEST FOR AMINO ACIDS	14.62								
03	82131	AMINO ACIDS, FRACTIONATION AND QUANT	17.79								X
03	82135	ASSAY, AMINOLEVULINIC ACID	17.36								
03	82136	AMINO ACIDS, 2-5 QUANT	19.54								X
03	82139	AMINO ACIDS, 6+ QUANT	19.54								X
03	82140	ASSAY OF BLOOD AMMONIA	15.37								X
03	82143	AMNIOTIC FLUID SCAN	7.26								
03	82145	ASSAY OF AMPHETAMINES	16.40								
03	82150	ASSAY OF SERUM AMYLASE	6.83								X
03	82154	ANDROSTANEDIOL GLUCURONIDE	30.41								
03	82157	RIA ASSAY OF ANDROSTENEDIONE	30.86								
03	82160	ANDROSTERONE; RIA	26.37								
03	82163	RIA ASSAY OF ANGIOTENSIN II	21.65								
03	82164	ANGIOTENSIN-CONVERTING ENZYME	15.39								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	82175	ASSAY OF ARSENIC	20.01								
03	82180	ASSAY OF ASCORBIC ACID	8.94								
03	82190	ATOMIC ABSORPTION SPECTROSCOPY, EACH	8.60								X
03	82205	ASSAY OF BARBITURATES	12.09								X
03	82232	BETA-2 MICROGLOBULIN,RIA;SERUM	17.07								
03	82239	BILE ACIDS;	18.07								
03	82240	ASSAY BILE ACIDS IN BLOOD	28.02								
03	82247	BILIRUBIN TOTAL	4.04								
03	82248	BILIRUBIN DIRECT	4.04								
03	82252	FECAL BILIRUBIN TEST	4.80								
03	82261	ASSAY BIOTINIDASE	19.54								X
03	82270	TEST FECES FOR BLOOD	3.42								
03	82271	OCCULT BLOOD, FECES, SINGLE	3.81								
03	82272	BLOOD OCCULT PEROXIDASE	3.81								
03	82274	ASSAY TEST FOR BLOOD, FECAL	18.63								
03	82286	ASSAY OF BRADYKININ	7.27								
03	82300	ASSAY CADMIUM IN URINE	24.40								
03	82306	VITAMIN D; 25 HYDROXY, INCLUDES FRAC	31.21								
03	82308	RIA ASSAY OF CALCITONIN	28.23								
03	82310	ASSAY CALCIUM IN BLOOD	5.44								X
03	82330	ASSAY CALCIUM IN BLOOD	14.41								
03	82331	ASSAY CALCIUM IN BLD;AFT CAL INF TST	5.46								
03	82340	ASSAY CALCIUM IN URINE	6.36								
03	82355	CALCULUS (STONE) ANALYSIS	12.20								
03	82360	CALCULUS (STONE) ASSAY	13.58								
03	82365	CALCULUS (STONE) ASSAY	13.58								
03	82370	X-RAY ASSAY,CALCULUS (STONE)	13.22								
03	82373	ASSAY, C-D TRANSFER MEASURE	19.05								
03	82374	ASSAY BLOOD CARBON DIOXIDE	5.15								X
03	82375	ASSAY BLOOD CARBON MONOXIDE	13.00								X
03	82376	TEST FOR CARBON MONOXIDE	6.32								X
03	82378	CARCINOEMBRYONIC ANTIGEN (CEA)	20.01								
03	82379	ASSAY CARNITINE	19.54								X
03	82380	ASSAY BLOOD CAROTENE	9.72								
03	82382	ASSAY URINE CATECHOLAMINES	18.13								
03	82383	ASSAY BLOOD CATECHOLAMINES	26.43								
03	82384	ASSAY THREE CATECHOLAMINES	26.63								
03	82387	CATHEPSIN-D	8.12								
03	82390	ASSAY BLOOD CERULOPLASMIN	11.33								
03	82397	CHEMILUMINESCENT ASSAY	4.89								
03	82415	ASSAY BLOOD CHLORAMPHENICOL	13.36								
03	82435	ASSAY BLOOD CHLORIDES	4.85								X
03	82436	ASSAY URINE CHLORIDES	5.29								
03	82438	ASSAY SPINAL FLUID CHLORIDES	5.15								
03	82441	TEST FOR CHLOROHYDROCARBONS	6.33								
03	82465	ASSAY SERUM CHOLESTEROL	4.59								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	82480	ASSAY SERUM CHOLINESTERASE	8.31								
03	82482	ASSAY RBC CHOLINESTERASE	8.11								X
03	82485	ASSAY CHONDROITIN SULFATE	21.77								
03	82486	GAS/LIQUID CHROMATOGRAPHY	19.05								
03	82487	PAPER CHROMATOGRAPHY	16.83								
03	82488	PAPER CHROMATOGRAPHY	22.53								
03	82489	THIN LAYER CHROMATOGRAPHY	19.50								
03	82491	CHROMOTOGRAPHY, QUANTITATIVE;	19.05								
03	82492	CHROMOTOGRAPHY, QUANT, MULT	20.94								
03	82495	ASSAY URINE CHROMIUM	21.39								
03	82507	ASSAY CITRIC ACID	29.33								
03	82520	COCAINE,QUANTITATIVE	15.98								
03	82523	COLLAGEN CROSSLINKS	21.67								
03	82525	ASSAY BLOOD COPPER	13.09								
03	82528	RIA ASSAY CORTICOSTERONE	23.75								
03	82530	CORTISOL;	17.63								
03	82533	RIA ASSAY PLASMA CORTISOL	17.19								X
03	82540	CREATINE BLOOD	4.89								
03	82541	COLUMN CHROMATOGRAPHY QUAL	20.94								
03	82542	COLUMN CHROMATOGRAPHY QUANT	20.94								
03	82543	COLUMN CHROMOTOGRAPH/ISOTOPE	20.94								
03	82544	COLUMN CHROMATOGRAPHY QUANT	20.94								
03	82550	ASSAY CPK IN BLOOD	6.87								X
03	82552	ASSAY CPK IN BLOOD	14.13								X
03	82553	CREATINE KINASE (CK), (CPK);	12.17								
03	82554	CREATINE KINASE (CK), (CPK);	12.51								
03	82565	ASSAY BLOOD CREATININE	5.40								X
03	82570	ASSAY URINE CREATININE	5.46								
03	82575	CREATININE CLEARANCE TEST	9.96								
03	82585	ASSAY BLOOD CRYOFIBRINOGEN	9.03								X
03	82595	ASSAY BLOOD CRYOGLOBULIN	6.83								
03	82600	ASSAY BLOOD CYANIDE	20.46								
03	82607	RIA ASSAY FOR VITAMIN B-12	15.89								
03	82608	CYANOCOBALAMIN;UNSAT.BIND CAPACITY	15.10								
03	82610	CYSTATIN C	5.45								
03	82615	TEST FOR URINE CYSTINES	8.61								
03	82626	DEHYDROEPIANDROSTERONE, RIA	26.65								
03	82627	DEHYDROEPIANDROSTERONE-SULFATE (DHEA	23.44								
03	82633	DESOXYCORTICOSTERONE, RIA	32.66								
03	82634	DESOXYCORTISOL, RIA	30.86								
03	82638	ASSAY DIBUCAINE NUMBER	12.91								
03	82646	ASSAY OF DIHYDROCODINONE	21.77								
03	82649	ASSAY OF DIHYDROMORPHINONE	27.10								
03	82651	DIHYDROTTESTOSTERONE ASSAY	27.22								
03	82652	DIHYDROTTESTOSTERONE (DHT) 1, 25 DIHY	40.58								X
03	82657	ENZYME CELL ACTIVITY	20.94								

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	82658	ENZYME CELL ACTIVITY RA	20.94								
03	82664	ELECTROPHORETIC TEST	36.22								
03	82666	EPIANDROSTERONE ASSAY	22.65								
03	82668	ERYTHROPOIETIN BIOASSAY	19.81								
03	82670	RIA ASSAY OF ESTRADIOL	29.47								
03	82671	ESTROGENS ASSAY	34.07								
03	82672	ESTROGEN ASSAY	22.87								
03	82677	RIA ASSAY OF ESTRIOL	25.50								
03	82679	RIA ASSAY OF ESTRONE	26.32								
03	82690	ASSAY BLOOD ETHCHLORVYNOL	18.23								
03	82693	ETHYLENE GLYCOL	15.71								
03	82696	ASSAY OF ETIOCHOLANOLONE, RIA	24.86								
03	82705	FATS/LIPIDS,FECES,SCREENING	5.37								
03	82710	FATS/LIPIDS, FECES, ASSAY	17.71								
03	82715	FECAL FAT ASSAY	18.15								
03	82725	ASSAY BLOOD FATTY ACIDS	14.03								
03	82726	LONG CHAIN FATTY ACIDS	20.94								
03	82728	FERRITIN, SPECIFY METHOD	14.36								
03	82731	FETAL FIBRONECTIN	67.92								
03	82735	ASSAY BLOOD FLUROIDE	19.55								
03	82742	ASSAY OF FLURAZEPAM	20.87								
03	82746	BLOOD FOLIC ACID RIA	15.50								
03	82747	FOLIC ACID;	18.15								
03	82757	ASSAY SEMEN FRUCTOSE	18.30								
03	82759	RBC GALACTOKINASE ASSAY	22.65								
03	82760	ASSAY BLOOD GALACTOSE	11.81								X
03	82775	ASSAY GALACTOSE TRANSFERASE	22.21								
03	82776	GALACTOSE TRANSFERASE TEST	8.83								
03	82784	GAMMAGLOBULIN (IMMUNOGLOBULIN); IGA,	9.80								X
03	82785	GAMMAGLOBULIN (IMMUNOGLOBULIN); IGE	17.37								
03	82787	GAMMAGLOBULIN (IMMUNOGLOBULIN); IMMUN	5.69								
03	82800	BLOOD PH	8.94								X
03	82803	BLOOD GASES: PH, PO2 & PCO2	5.49								X
03	82805	BLOOD GASES W/O2 SATURATION	9.54								
03	82810	GASES, BLOOD, O2 SATURATION ONLY, BY	4.04								
03	82820	HEMOGLOBIN-OXYGEN AFFINITY (PO2 FOR	10.53								
03	82926	ASSAY GASTRIC ACID	4.88								
03	82928	ASSAY GASTRIC ACID	6.91								
03	82938	GASTRIN (SERUM) AFTER SECRETIN STIMU	18.66								
03	82941	RIA ASSAY OF GASTRIN	18.59								X
03	82943	RIA ASSAY OF GLUCAGON	15.07								
03	82945	GLUCOSE OTHER FLUID	4.54								
03	82946	GLUCAGON TOLERANCE TEST	12.28								
03	82947	ASSAY BODY FLUID, GLUCOSE	4.14								X
03	82948	STICK ASSAY OF BLOOD GLUCOSE	3.35								X
03	82950	GLUCOSE TEST	5.02								

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	82951	GLUCOSE TOLERANCE TEST (GTT)	13.58								
03	82952	GTT-ADDED SAMPLES	4.14								X
03	82953	GLUCOSE-TOLBUTAMIDE TEST	15.97								
03	82955	ASSAY G6PD ENZYME	10.23								
03	82960	TEST FOR G6PD ENZYME	6.38								
03	82962	GLUCOSE, BLOOD, BY GLUCOSE MONITORIN	2.86								X
03	82963	GLUCOSIDASE,BETA	22.65								
03	82965	ASSAY BLOOD GDH ENZYME	8.15								
03	82975	ASSAY SPINAL FLUID GLUTAMINE	16.70								
03	82977	ASSAY OF GGT ENZYME	7.58								
03	82978	GLUTATHIONE ASSAY	15.03								
03	82979	ASSAY RBC GLUTATHIONE ENZYME	7.27								
03	82980	ASSAY OF GLUTETHIMIDE	19.32								
03	82985	GLYCOPROTEIN ELECTROPHORESIS	15.89								
03	83001	PITUITARY GONADOTROPIN RIA	19.60								
03	83002	PITUITARY GONADOTROPINS RIA	19.52								
03	83003	RIA ASSAY GROWTH HORMONE	17.58								
03	83008	RIA ASSAY GUANOSINE	17.70								
03	83009	H PYLORI (C-13), BLOOD	33.91								
03	83010	CHEM ASSAY HAPTOGLOBIN	13.27								
03	83012	ELP ASSAY HAPTOGLOBINS	18.13								
03	83013	H PYLORI BREATH TEST ANAL	33.54								
03	83014	H PYLORI DRUG ADMIN/COLLECT	9.11								
03	83015	HEAVY METAL SCREENING	11.96								
03	83018	CHROMATOGRAPH SCREEN, METALS	8.97								
03	83020	ASSAY HEMOGLOBIN	13.58								X
03	83021	HEMOGLOBIN CHROMOTOGRAPHY	20.94								
03	83026	HEMOGLOBIN;	2.50								
03	83030	FETAL HEMOGLOBIN ASSAY	3.64								
03	83033	FETAL FECAL HEMOGLOBIN ASSAY	6.30								
03	83036	GLYCOSYLATED HEMOGLOBIN ASSAY	10.23								
03	83045	BLOOD METHEMOGLOBIN TEST	5.24								
03	83050	BLOOD METHEMOGLOBIN ASSAY	7.73								
03	83051	ASSAY PLASMA HEMOGLOBIN	7.71								
03	83055	BLOOD SULFHEMOGLOBIN TEST	5.18								
03	83060	BLOOD SULFHEMOGLOBIN ASSAY	8.73								
03	83065	HEMOGLOBIN HEAT ASSAY	7.27								
03	83068	HEMOGLOBIN STABILITY SCREEN	8.94								
03	83069	ASSAY URINE HEMOGLOBIN	4.16								
03	83070	ASSAY URINE HEMOSIDERIN	5.02								
03	83071	HEMOSIDERIN,RIA	7.26								
03	83080	B HEXOSAMINIDASE ASSAY	19.54								X
03	83088	ASSAY HISTAMINE	31.14								
03	83090	ASSAY OF HOMOCYSTINE	19.54								
03	83150	ASSAY URINE FOR HVA	20.42								
03	83491	HYDROXYCORTICOSTEROIDS,17-RIA	18.46								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	83497	ASSAY URINE 5-HIAA	13.58								
03	83498	RIA ASSAY OF PROGESTERONE	28.64								
03	83499	ASSAY OF PROGESTERONE	26.58								
03	83500	ASSAY URINE HYDROXYPROLINE	23.89								
03	83505	ASSAY URINE HYDROXYPROLINE	25.62								
03	83516	IMMUNOASSAY FOR ANALYTE OTHER THAN I	12.16								
03	83518	IMMUNOASSAY FOR ANALYTE OTHER THAN I	4.89								
03	83519	IMMUNOASSAY FOR ANALYTE OTHER THAN I	4.90								
03	83520	IMMUNOASSAY FOR ANALYTE OTHER THAN I	13.65								
03	83525	RIA ASSAY OF INSULIN	12.07								X
03	83527	INSULIN;	13.65								
03	83528	INTRINSIC FACTOR LEVEL	16.77								
03	83540	ASSAY SERUM IRON	5.65								
03	83550	SERUM IRON BINDING TEST	9.22								
03	83570	UV-ASSAY BLOOD IDH ENZYME	9.33								
03	83582	ASSAY URINE 17-KGS	14.95								
03	83586	ASSAY BLOOD 17-KETOSTEROIDS	13.51								
03	83593	CHROMATOGRAPH KETOSTEROIDS	8.97								
03	83605	LACTIC ACID ASSAY	11.26								X
03	83615	UV-ASSAY BLOOD LDH ENZYME	6.37								X
03	83625	ASSAY BLOOD LDH ENZYMES	9.76								X
03	83630	LACTOFERRIN, FECAL (QUAL)	20.70								
03	83632	RIA PLACENTAL LACTOGEN	21.32								
03	83633	TEST URINE FOR LACTOSE	5.81								
03	83634	ASSAY URINE FOR LACTOSE	8.54								
03	83655	ASSAY BLOOD FOR LEAD	12.76								
03	83661	ASSAY AMNIOTIC L/S RATIO	23.18								
03	83662	LECITHIN-SPHINGOMYELIN RATIO (L/S RA	19.95								
03	83663	FLUORO POLARIZE, FETAL LUNG	19.95								
03	83664	LAMELLAR BDY, FETAL LUNG	19.95								
03	83670	UV-ASSAY BLOOD LAP ENZYME	9.66								
03	83690	ASSAY BLOOD LIPASE	7.27								
03	83695	ASSAY OF LIPOPROTEIN(A)	15.17								
03	83698	LIPOPROTEIN-ASSOCIATED PHOSPHOLIPASE	39.77								
03	83701	LIPOPROTEIN BLD, HR FRACTION	29.09								
03	83704	LIPOPROTEIN, BLD, BY NMR	36.97								
03	83718	BLOOD LIPOPROTEIN ASSAY	8.63								
03	83719	LIPOPROTEIN,VLDL CHOLESTEROL	12.28								
03	83721	LIPOPROTEIN, DIRECT MEASUREMENT;	9.01								
03	83727	LUTEINIZING RELEASING FACTOR, RIA	18.13								
03	83735	ASSAY BLOOD MAGNESIUM	7.07								X
03	83775	UV-ASSAY OF MD ENZYME	7.78								
03	83785	ASSAY OF MANGANESE	22.47								
03	83788	MASS SPECTROMETRY QUAL	20.94								X
03	83789	MASS SPECTROMETRY QUANT	20.94								X
03	83805	ASSAY OF MEPROBAMATE	18.58								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	83825	ASSAY BLOOD MERCURY	17.14								
03	83835	ASSAY URINE METANEPHRINES	17.85								
03	83840	ASSAY METHADONE	17.22								
03	83857	ASSAY METHEMALBUMIN	11.33								
03	83858	ASSAY SERUM METHSUXIMIDE	15.63								
03	83864	BLOOD MUCOPOLYSACCHARIDES	20.99								
03	83866	MUCOPOLYSACCHARIDES SCREEN	10.39								
03	83872	ASSAY SYNOVIAL FLUID MUCIN	5.19								
03	83873	MYELIN BASIC PROTEIN,CSF,RIA	18.15								
03	83874	MYOGLOBIN ELECTROPHORESIS	13.61								
03	83876	MYELOPEROXIDASE (MPO)	15.86								
03	83880	NATRIURETIC PEPTIDE	39.77								
03	83883	NEPHELOMETRY, EACH ANALYTE NOT ELSEW	4.89								X
03	83885	ASSAY URINE FOR NICKEL	25.83								
03	83887	ASSAY NICOTINE	24.98								
03	83890	NUCLEAR MOLECULAR DIAGNOSTICS;	4.23								X
03	83891	MOLECULE ISOLATE NUCLEIC	4.65								
03	83892	NUCLEAR MOLECULAR DIAGNOSTICS;	4.23								X
03	83893	MOLECULE DOT/SLOT/BLOT	4.65								
03	83894	NUCLEAR MOLECULAR DIAGNOSTICS;	4.23								X
03	83896	NUCLEAR MOLECULAR DIAGNOSTICS;	4.23								X
03	83897	MOLECULE NUCLEIC TRANSFER	4.65								
03	83898	NUCLEAR MOLECULAR DIAGNOSTICS;	17.67								X
03	83900	MOLECULAR NUCLEIC AMP, FIRST TWO	20.00								X
03	83901	MOLECULE NUCLEIC AMP	19.43								
03	83902	MOLECULAR DIAGNOSTICS	16.44								
03	83903	MOLECULE MUTATION SCAN	19.43								
03	83904	MOLECULE MUTATION IDENTIFY	19.43								
03	83905	MOLECULE MUTATION IDENTIFY	19.43								
03	83906	MOLECULE MUTATION IDENTIFY	19.43								
03	83907	LYSE CELLS FOR NUCLEIC EXT	15.65								
03	83908	NUCLEIC ACID, SIGNAL AMPLI	19.64								
03	83909	NUCLEIC ACID, HIGH RESOLUTE	19.64								
03	83912	NUCLEIC ACID PROBE,ELECTROPHOR,EXAM.	4.23								
03	83913	MOLECULAR DIAGNOSTICS;RNA STABILIZ	15.65								
03	83914	MUTATION IDENT OLA/SBCE/ASPE	19.64								
03	83915	ASSAY NUCLEOTIDASE	11.75								
03	83916	OLIGOCLONAL IMMUNE GLOBULIN,CSF	21.20								
03	83918	ASSAY ORGANIC ACIDS	17.36								
03	83919	ASSAY ORGANIC ACIDS QUAL	19.08								
03	83921	ORGANIC ACID, SINGLE, QUANT	19.08								
03	83925	OPIATES, (EG, MORPHINE, MEPERIDINE)	20.52								
03	83930	ASSAY BLOOD OSMOLALITY	6.97								X
03	83935	ASSAY URINE OSMOLALITY	7.18								X
03	83937	OSTEOCALCIN (BONE G1A PROTEIN)	31.48								
03	83945	ASSAY URINE OXALATE	13.58								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	83950	ONCORPROTEIN, HER-2/NEU	74.63								
03	83951	ONCOPROTEIN; DES-GAMMA-CARBOXY-PROTH	78.86								
03	83970	RIA ASSAY OF PARATHORMONE	43.52								
03	83986	PH; BODY FLUID, NOT OTHERWISE SPECIF	3.78								X
03	83987	PH; EXHALED BREATH CONDENSATE	16.59								
03	83992	ASSAY FOR PHENCYCLIDINE	15.50								
03	83993	CALPROTECTIN, FECAL	23.00								
03	84022	ASSAY URINE PHENOTHIAZINE	16.41								
03	84030	ASSAY BLOOD PKU	5.81								X
03	84035	ASSAY BLOOD PHENYLKETONES	3.85								X
03	84060	ASSAY BLOOD ACID PHOSPHATASE	7.78								
03	84061	PHOSPHATASE, ACID;	8.35								
03	84066	ASSAY PROSTATE PHOSPHATASE, RIA	10.19								
03	84075	ASSAY ALKALINE PHOSPHATASE	5.46								
03	84078	ASSAY ALKALINE PHOSPHATASE	6.09								
03	84080	ASSAY ALKALINE PHOSPHATASES	15.59								
03	84081	PHOSPHATYDYLGLYCEROL	17.43								
03	84085	ASSAY RBC PG6D ENZYME	7.12								X
03	84087	ASSAY PHOSPHOHEXOSE ENZYMES	10.89								
03	84100	ASSAY BLOOD PHOSPHORUS	5.01								
03	84105	ASSAY URINE PHOSPHORUS	5.46								
03	84106	TEST FOR PORPHOBILINOGEN	4.52								
03	84110	ASSAY PORPHOBILINOGEN	5.19								
03	84119	TEST URINE FOR PORPHYRINS	9.08								
03	84120	ASSAY URINE PORPHYRINS	15.51								
03	84126	ASSAY FECES PORPHYRINS	26.86								
03	84127	PORPHYRINS, FECES;	10.52								
03	84132	ASSAY BLOOD POTASSIUM	4.85								X
03	84133	ASSAY URINE POTASSIUM	4.53								X
03	84134	PREALBUMIN	5.88								
03	84135	PREGNANEDIOL; RIA	20.18								
03	84138	PREGNANETRIOL;RIA	19.97								
03	84140	PREGNENOLONE	21.80								
03	84143	17-HYDROXYPREGNENOLONE	24.07								
03	84144	ASSAY PROGESTERONE	22.00								
03	84145	PROCALCITONIN (PCT)	20.25								
03	84146	RIA ASSAY FOR PROLACTIN	20.43								
03	84150	RIA ASSAY OF PROSTAGLANDIN	26.32								
03	84152	ASSAY OF PSA, COMPLEXED	21.32							M	
03	84153	PROSTATE SPECIFIC ANTIGEN (PSA)	19.39								
03	84154	PSA FREE	21.32								
03	84155	ASSAY SERUM PROTEIN	3.86								
03	84156	ASSAY OF PROTEIN, URINE	4.29								
03	84157	ASSAY OF PROTEIN, OTHER	4.29								
03	84160	ASSAY SERUM PROTEIN	5.19								
03	84163	PAPPA, SERUM	17.64	10	59					F	

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	84165	ASSAY SERUM PROTEINS	11.33								
03	84166	PROTEIN E-PHORESIS/URINE/CSF	20.90								
03	84182	PROTEIN;	18.98								X
03	84202	ASSAY RBC PROTOPORPHYRIN	15.14								
03	84203	TEST RBC PROTOPORPHYRIN	9.08								
03	84206	RIA ASSAY OF PROINSULIN	18.78								
03	84207	ASSAY VITAMIN B-6	14.91								
03	84210	ASSAY BLOOD PYRUVATE	11.45								
03	84220	ASSAY RBC PYRUVIC KINASE	9.94								
03	84228	ASSAY QUININE	12.28								
03	84233	RECEPTOR ASSAY; ESTROGEN(ESTRADIOL)	67.92								
03	84234	RECEPTOR ASSAY; PROGESTERONE	68.40								
03	84235	RECEPTOR ASSAY;ENDOCRINE;OTHER	55.19								
03	84238	RECEPTOR ASSAY;	38.55								
03	84244	RIA ASSAY OF RENIN	23.20								X
03	84252	ASSAY VITAMIN B-2	21.35								
03	84255	ASSAY SELENIUM	26.92								
03	84260	ASSAY BLOOD SEROTONIN	32.66								
03	84270	SEX HORMONE BINDING GLOBULIN (SHBG)	22.91								
03	84275	ASSAY BLOOD SIALIC ACID	14.16								
03	84285	ASSAY SILICA	24.83								
03	84295	ASSAY BLOOD SODIUM	5.08								X
03	84300	ASSAY URINE SODIUM	5.12								X
03	84302	ASSAY OF SWEAT SODIUM	5.69								X
03	84305	SOMATOMEDIN	20.71								
03	84307	SOMATOSTATIN	19.29								
03	84311	SPECTROPHOTOMETRY, ANALYTE NOT ELSEW	7.36								
03	84315	BODY FLUID SPECIFIC GRAVITY	2.64								
03	84375	CHROMATOGRAM ASSAY, SUGARS	20.67								
03	84376	SUGARS SINGLE QUAL	6.38								X
03	84377	SUGARS MULTIPLE QUAL	6.38								X
03	84378	SUGARS SINGLE QUANT	9.39								X
03	84379	SUGARS MULTIPLE QUANT	9.39								X
03	84392	SULFATE, URINE	5.02								X
03	84402	TESTOSTERONE;	26.85								
03	84403	RIA ASSAY BLOOD TESTOSTERONE	27.23								
03	84425	ASSAY VITAMIN B-1	22.39								
03	84430	ASSAY BLOOD THIOCYANATE	11.19								
03	84431	THROMBOXANE METABOLITE(S), INCLUDING	13.52								
03	84432	THYROGLOBULIN	16.93								
03	84436	THYROXINE, TRUE, RIA	5.09								
03	84437	THYROXINE, NEONATAL	6.83								
03	84439	THYROID PANEL	9.51								
03	84442	THYROID ACTIVITY (TBG) ASSAY	13.83								
03	84443	RIA ASSAY OF TS HORMONE	17.71								
03	84445	RIA THYROTROPIN FACTOR	19.40								

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	84446	ASSAY VITAMIN E	14.96								
03	84449	TRANSCORTIN (CORTISOL BINDING GLOBUL	18.98								
03	84450	UV-ASSAY TRANSAMINASE (SGOT)	5.46								X
03	84460	UV-ASSAY TRANSAMINASE (SGPT)	5.59								X
03	84466	TRANSFERRIN	13.47								
03	84478	ASSAY BLOOD TRIGLYCERIDES	6.08								
03	84479	TRIIODOTHYRONINE, RESIN UPTAKE	4.90								
03	84480	RIA ASSAY, T-3	6.76								
03	84481	TRIIODOTHYRONINE, FREE RIA	10.41								
03	84482	TRIDOTHYRONINE (T-3);	4.90								
03	84484	TROPONIN	11.40								
03	84485	ASSAY DUODENAL FLUID TRYPSIN	7.92								
03	84488	TEST FECES FOR TRYPSIN	7.70								
03	84490	ASSAY FECES FOR TRYPSIN	7.46								
03	84510	ASSAY BLOOD TYROSINE	10.97								
03	84512	TROPONIN, QUAL	8.93								
03	84520	ASSAY BUN	4.16								X
03	84525	STICK-ASSAY BUN	3.97								X
03	84540	ASSAY URINE UREA-N	4.90								X
03	84545	UREA-N CLEARANCE TEST	6.96								
03	84550	ASSAY BLOOD URIC ACID	4.76								
03	84560	ASSAY URINE URIC ACID	5.02								
03	84577	ASSAY FECES UROBILINOGEN	13.16								
03	84578	TEST URINE UROBILINOGEN	3.42								
03	84580	ASSAY URINE UROBILINOGEN	7.49								
03	84583	ASSAY URINE UROBILINOGEN	5.29								
03	84585	ASSAY URINE VMA	16.35								
03	84586	VASOACTIVE INTESTINAL PEPTIDE (VIP)	37.25								
03	84588	RIA ASSAY VASOPRESSIN	35.79								
03	84590	ASSAY BLOOD VITAMIN-A	12.23								
03	84591	ASSAY OF NOS VITAMIN	13.43								
03	84597	ASSAY VITAMIN-K	14.46								
03	84600	ASSAY FOR VOLATILES	16.94								
03	84620	XYLOSE TOLERANCE TEST, BLOOD	12.49								
03	84630	ASSAY BLOOD ZINC	12.01								
03	84681	C-PEPTIDE	20.96								
03	84702	GONADOTROPIN, CHORIONIC; QUANTITATIVE	15.87								
03	84703	GONADOTROPIN, CHORIONIC; QUALITATIVE	7.92								
03	84704	GONADOTROPIN, CHORIONIC (HCG); FREE	17.64								
03	84830	OVULATION TESTS, BY VISUAL COLOR COM	10.59								
03	84999	UNLISTED CHEMISTRY /TOXICOLOGY	MP								X
03	85002	BLEEDING TIME TEST	4.74								X
03	85004	AUTOMATED DIFF WBC COUNT	7.57								
03	85007	DIFFERENTIAL WBC COUNT	2.64								X
03	85008	BLOOD COUNT;	3.63								
03	85009	DIFFERENTIAL WBC COUNT	3.92								X



COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	85013	BLOOD COUNT;	2.50								
03	85014	BLOOD COUNT OTHER THAN SPUN HEMATOCR	2.50								X
03	85018	HEMOGLOBIN, COLORIMETRIC	2.50								X
03	85025	BLOOD COUNT;HEMO.PLAT.COUNT,AUTO/AUT	8.19								
03	85027	HEMOGRAM,AUTOMATED W/PLATELET COUNT	6.83								X
03	85032	MANUAL CELL COUNT, EACH	5.05								X
03	85041	RED BLOOD CELL (RBC) COUNT	3.18								X
03	85044	RETICULOCYTE COUNT	4.53								
03	85045	RETICULOCYTE COUNT FLOW CYTOMETRY	4.22								
03	85046	RETICYTE, HGB CONCENTRATE	6.48								
03	85048	WHITE BLOOD CELL (WBC) COUNT	2.68								
03	85049	AUTOMATED PLATELET COUNT	4.81								
03	85055	RETICULATED PLATELET ASSAY	23.59								
03	85097	BONE MARROW SMEAR INTERPRET	68.18								X
03	85130	CHROMOGENIC SUBSTRATE ASSAY	12.55								
03	85170	BLOOD CLOT RETRACTION SCREEN	3.82								X
03	85175	BLOOD CLOT LYSIS TIME	4.80								X
03	85210	BLOOD CLOT FACTOR II TEST	6.09								X
03	85220	BLOOD CLOT FACTOR V TEST	14.91								X
03	85230	BLOOD CLOT FACTOR VII TEST	14.91								X
03	85240	BLOOD CLOT FACTOR VIII TEST	18.88								X
03	85244	FACTOR VIII RELATED ANTIGEN QUAN	21.54						X		X
03	85245	CLOTTING;	24.19								
03	85246	CLOTTING;	24.19								
03	85247	CLOTTING;	24.19								
03	85250	BLOOD CLOT FACTOR IX TEST	20.07								X
03	85260	BLOOD CLOT FACTOR X TEST	14.91								X
03	85270	BLOOD CLOT FACTOR XI TEST	14.91								X
03	85280	BLOOD CLOT FACTOR XII TEST	14.91								X
03	85290	BLOOD CLOT FACTOR XIII TEST	14.91								X
03	85291	BLOOD CLOT FACTOR XIII TEST	9.38								X
03	85292	CLOTTING; PREKALLIKRIEW ASSAY	19.97								
03	85293	CLOTTING;H-M-W KINNINOGEN ASSA	19.97								
03	85300	ANTITHROMBIN III TEST	12.49								X
03	85301	CLOT. INHIB/ANTICOAG/ANTITHROM	11.40								X
03	85302	CLOT INHIBIT/ANTICOAC/PROTEIN C	12.68								X
03	85303	CLOTTING INHIBITORS OR ANTICOAGULANT	13.45								
03	85305	CLOTTING INHIBITORS OR ANTICOAGULANT	12.23								
03	85306	CLOTTING INHIBITORS OR ANTICOAGULANT	16.17								
03	85307	ASSAY ACTIVATED PROTEIN C	17.76								
03	85335	FACTOR INHIBITOR TEST	13.58								
03	85337	THROMBOMODULIN	10.99								
03	85345	COAGULATION TIME	4.53								X
03	85347	COAGULATION TIME	3.03								X
03	85348	COAGULATION TIME	3.93								X
03	85360	EUGLOBULIN LYSIS	8.86								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	85362	FIBRIN DEGRADATION PRODUCTS	6.00								X
03	85366	FIBRIN(OGEN) DEGRADATION (SPLIT) PRO	9.08								
03	85370	FIBRIN(OGEN) DEGRADATION (SPLIT) PRO	10.78								
03	85378	FIBRIN DEGRADATION PRODUCTS, D-DIMER	5.98								
03	85379	FIBRIN DEGRADATION PRODUCTS, D-DIMER	10.73								
03	85380	FIBRIN DEGRADATION, VTE	11.93								
03	85384	FIBRINOGEN;	8.97								
03	85385	FIBRINOGEN;	8.97								
03	85390	FIBRINOLYSINS SCREEN	5.46								
03	85397	COAGULATION AND FIBRINOLYSIS, FUNCTI	28.10								
03	85400	FIBRINOLYTIC PLASMIN	9.33								
03	85410	FIBRINOLYTIC ANTIPLASMIN	8.13								
03	85415	FIBRINOLYTIC FACTORS AND INHIBITORS;	18.13								
03	85420	FIBRINOLYTIC PLASMINOGEN	6.90								
03	85421	FIBRO MECH;PLASM.ANTIGENIC ASS	10.74								
03	85441	HEINZ BODIES; DIRECT	4.44								
03	85445	HEINZ BODIES; INDUCED	7.18								
03	85460	HEMOGLOBIN, FETAL	4.90								
03	85461	HEMOGLOBIN, FETAL	3.26								
03	85475	HEMOLYSIN, ACID	9.36								
03	85520	HEPARIN ASSAY	8.94								
03	85525	HEPARIN NEUTRALIZATION	8.94								
03	85530	HEPARIN-PROTAMINE TOLERANCE	14.96								
03	85536	IRON STAIN PERIPHERAL BLOOD	7.51								
03	85540	WBC ALKALINE PHOSPHATASE	9.07								
03	85547	RBC MECHANICAL FRAGILITY	9.07								
03	85549	SERUM MURAMIDASE	19.78								
03	85555	RBC OSMOTIC FRAGILITY	4.90								
03	85557	RBC OSMOTIC FRAGILITY	14.08								
03	85576	PLATELET;AGGREGATION (IN VITRO)	22.65								X
03	85590	PLATELET PHASE MICROSCOPY	4.23								X
03	85597	PLATELET NEUTRALIZATION	14.14								
03	85610	PROTHROMBIN TIME	4.15								X
03	85611	PROTHROMBIN TIME;	4.16								X
03	85612	VIPER VENOM PROTHROMBIN TIME	10.08								
03	85613	RUSSELL VIPER VENOM TIME (INCLUDES V	10.08								
03	85635	REPTILASE TEST	10.39								
03	85651	RBC SEDIMENTATION RATE	3.74								
03	85652	RBC SED RATE, AUTO	2.84								
03	85660	RBC SICKLE CELL TEST	5.83								X
03	85670	THROMBIN TIME; PLASMA	6.09								
03	85675	THROMBIN TIME; TITER	7.23								
03	85705	THROMBOPLASTIN INHIBITION;	7.25								
03	85730	THROMBOPLASTIN TIME, PARTIAL	6.33								X
03	85732	THROMBOPLASTIN TIME, PARTIAL	6.83								X
03	85810	BLOOD VISCOSITY EXAMINATION	12.32								X

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X- OVERS	UVS >001
03	85999	HEMATOLOGY PROCEDURE			MP						
03	86000	AGGLUTININS; FEBRILE	7.36								
03	86001	ALLERGEN SPECIFIC IGG	6.06								X
03	86003	ALLERGEN SPECIFIC IGE;	5.50								X
03	86005	ALLERGEN SPECIFIC IGE;	8.41								
03	86021	WBC ANTIBODY IDENTIFICATION	15.87								
03	86022	PLATELET ANTIBODIES	19.36								
03	86023	ANTIBODY ID,PLAT.ASS. IMMUNOBLO	13.13								
03	86038	ANTINUCLEAR ANTIBODIES (ANA), RIA	12.75								
03	86039	ANTINUCLEAR ANTIBODIES (ANA);	11.77								
03	86060	ANTISTREPTOLYSIN O TITER	7.70								
03	86063	ANTISTREPTOLYSIN O SCREEN	6.09								
03	86140	C-REACTIVE PROTEIN	5.46								
03	86141	C-REACTIVE PROTEIN, HS	15.00								
03	86146	GLYCOPROTEIN ANTIBODY	13.47								
03	86147	CARDIOLIPIN (PHOSPHOLIPID) ANTIBODY	12.27								
03	86148	PHOSPHOLIPID ANTIBODY	13.47								
03	86155	CHEMOTAXIS ASSAY	16.86								
03	86156	COLD AGGLUTININ;	7.07								
03	86157	COLD AGGLUTININ;	8.51								
03	86160	COMPLEMENT;	12.67								X
03	86161	COMPLEMENT;	12.67								X
03	86162	COMPLEMENT; TOTAL (CH 50)	20.11								
03	86171	COMPLEMENT FIXATION, EACH	10.57								
03	86185	COUNTERELECTROPHORESIS, EACH	9.44								
03	86200	CCP ANTIBODY	15.17								
03	86215	DEOXYRIBONUCLEASE, ANTIBODY	13.97								
03	86225	DNA ANTIBODY	14.50								
03	86226	DEOXYRIBONUCLEIC ACID (DNA) ANTIBODY	12.77								
03	86235	ENA ANTIBODY	12.28								
03	86243	FC RECEPTOR ASSAY	21.65								
03	86255	FLUORESCENT ANTIBODY; SCREEN	11.96								
03	86256	FLUORESCENT ANTIBODY; TITER	12.71								
03	86277	GROWTH HORMONE,HUMAN,ANTIBODY, RIA	16.60								
03	86280	HEMAGGLUTINATION INHIBITION	8.63								
03	86300	IMMUNOASSAY FOR TUMOR ANTIGEN QUANTI	24.12								
03	86301	IMMUNOASSAY, TUMOR, CA 19-9	24.12								
03	86304	IMMUNOASSAY, TUMOR CA 125	24.12								
03	86305	HUMAN EPIDIDYMIS PROTEIN 4 (HE4)	21.75							F	
03	86308	HETEROPHILE ANTIBODIES;	5.46								
03	86309	HETEROPHILE ANTIBODIES;	6.83								
03	86310	HETEROPHILE ANTIBODIES	7.78								
03	86316	IMMUNOASSAY FOR TUMOR ANTIGEN	21.93								X
03	86317	IMMUNOASSAY/INFECTIOUS AGENT	15.81								
03	86318	IMMUNOASSAY FOR CHEM. CONSTITUENT	13.65								
03	86320	SERUM IMMUNOELECTROPHORESIS	23.63								

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	86325	OTHER IMMUNOELECTROPHORESIS	23.58								
03	86327	IMMUNOELECTROPHORESIS;	23.93								
03	86329	IMMUNODIFFUSION, EACH	14.81								X
03	86331	IMMUNODIFFUSION OUCHTERLONY	12.65								
03	86332	IMMUNE COMPLEX ASSAY;C1G BINDING CEL	25.70								
03	86334	IMMUNOFIXATION ELECTROPHORESIS	23.56								
05	86334	IMMUNOFIXATION ELECTROPHORESIS	9.43								
03	86336	INHIBIN A	16.42								
03	86337	INSULIN ANTIBODIES, RIA	11.03								
03	86340	INTRINSIC FACTOR ANTIBODIES, RIA	15.89								
03	86341	ISLET CELL ANTIBODY	20.87								
03	86344	LEUKOCYTE PHAGOCYTOSIS	8.41								
03	86352	CELLULAR FUNCTION ASSAY INVOLVING ST	70.98								
03	86353	LYMPHOCYTE TRANSFORMATION	51.68								
03	86355	B CELLS, TOTAL COUNT	44.20								
03	86356	MONONUCLEAR CELL ANTIGEN, QUANTITATI	23.59								X
03	86357	NATURAL KILLER (NK) CELLS, TOTAL CT	44.20								
03	86359	T CELLS;	39.77								
03	86360	T CELLS;	42.45								
03	86361	T CELL ABSOLUTE COUNT	23.33								
03	86367	STEM CELLS, TOTAL COUNT	44.20								
03	86376	MICROSOMAL ANTIBODY (THYROID); RIA	15.35								
03	86378	MIGRATION INHIBITORY FACTOR	20.76								
03	86382	NEUTRALIZATION TEST, VIRAL	17.84								
03	86384	NITROBLUE TETRAZOLIUM DYE	12.01								
03	86403	PRECIPITIN (EG, LATEX BEAD) OR AGGLU	10.75								
03	86406	PARTICLE AGGLUTINATION TEST	11.22								
03	86430	RHEUMATOID FACTOR LATEX FIXATION	5.99								
03	86431	RHEUMATOID FACTOR;	5.99								
03	86480	TB TEST, CELL IMMUN MEASURE	72.61								
03	86485	SKIN TEST;	6.14								
03	86486	SKIN TEST; UNLISTED ANTIGEN, EACH	3.79								
03	86490	COCCIDIOIDOMYCOSIS SKIN TEST	6.66								
03	86510	HISTOPLASMOSIS SKIN TEST	7.38								
03	86580	TB PATCH OR INTRADERMAL TEST	6.17								
03	86590	STREPTOKINASE, ANTIBODY	6.00								
03	86592	SYPHILIS TEST, NON-TREPONEMAL ANTIBO	4.49								
03	86593	SYPHILIS TEST, NON-TREPONEMAL ANTIBO	4.65								
03	86602	ANTIBODY;	10.73								
03	86603	ANTIBODY;	13.57								
03	86606	ANTIBODY;	15.87								
03	86609	ANTIBODY;	13.58								
03	86611	BARTONELLA ANTIBODY	11.79								
03	86612	ANTIBODY;	13.60								
03	86615	ANTIBODY;	13.92								
03	86617	LYME DISEASE ANTIBODY	16.34								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	86618	ANTIBODY;	17.96								
03	86619	ANTIBODY;	14.11								
03	86622	ANTIBODY;	9.42								
03	86625	ANTIBODY;	13.83								
03	86628	ANTIBODY;	12.67								
03	86631	ANTIBODY;	12.48								
03	86632	ANTIBODY;	13.39								
03	86635	ANTIBODY;	12.10								
03	86638	ANTIBODY;	12.79								
03	86641	ANTIBODY;	15.21								
03	86644	ANTIBODY;	15.18								
03	86645	ANTIBODY;	17.77								
03	86648	ANTIBODY;	16.04								
03	86651	ANTIBODY;	13.92								
03	86652	ANTIBODY;	13.92								
03	86653	ANTIBODY;	13.92								
03	86654	ANTIBODY;	13.92								
03	86658	ANTIBODY;	13.74								
03	86663	ANTIBODY;	13.83								
03	86664	ANTIBODY;	16.14								
03	86665	ANTIBODY;	18.79								
03	86666	EHRlichia ANTIBODY	11.79								
03	86668	ANTIBODY;	10.97								
03	86671	ANTIBODY;	12.93								
03	86674	ANTIBODY;	12.27								
03	86677	ANTIBODY;	12.27								
03	86682	ANTIBODY;	13.72								
03	86684	ANTIBODY;	16.71								
03	86687	HTLVI, ANTIBODY DETECTION;IMMUNOASSA	8.84								
03	86688	ANTIBODY;	11.14								
03	86689	CONFIRMATORY TEST	20.43								
03	86692	ANTIBODY;	13.45								
03	86694	ANTIBODY;	15.18								
03	86695	ANTIBODY;	13.92								
03	86696	HERPES SIMPLEX TYPE 2	22.43								
03	86698	ANTIBODY;	13.17								
03	86701	ANTIBODY;	9.37								
03	86702	ANTIBODY;	11.14								
03	86703	ANTIBODY;	11.14								
03	86704	HEP B CORE AB TEST, IGG & M	13.97								
03	86705	HEP B CORE AB TEST, IGM	13.64								
03	86706	HEPATITIS B SURFACE AB TEST	12.45								
03	86707	HEPATITIS BE AB TEST	13.40								
03	86708	HEP A AB TEST, IGG & M	13.49								
03	86709	HEP A AB TEST, IGM	13.04								
03	86710	ANTIBODY;	14.30								

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	86713	ANTIBODY;	16.15								
03	86717	ANTIBODY;	12.92								
03	86720	ANTIBODY;	13.92								
03	86723	ANTIBODY;	13.92								
03	86727	ANTIBODY;	13.57								
03	86729	ANTIBODY;	12.59								
03	86732	ANTIBODY;	13.92								
03	86735	ANTIBODY;	13.77								
03	86738	ANTIBODY;	13.97								
03	86741	ANTIBODY;	13.92								
03	86744	ANTIBODY;	13.92								
03	86747	ANTIBODY;	15.85								
03	86750	ANTIBODY;	13.92								
03	86753	ANTIBODY;	13.07								
03	86756	ANTIBODY;	13.58								
03	86757	RICKETTSIA ANTIBODY	22.43								
03	86759	ANTIBODY;	13.92								
03	86762	ANTIBODY;	15.18								
03	86765	ANTIBODY;	13.58								
03	86768	ANTIBODY;	13.92								
03	86771	ANTIBODY;	13.92								
03	86774	ANTIBODY;	10.31								
03	86777	ANTIBODY;	15.18								
03	86778	ANTIBODY;	15.19								
03	86780	ANTIBODY; TREPONEMA PALLIDUM	13.84								
03	86784	ANTIBODY;	4.90								
03	86787	ANTIBODY;	11.83								
03	86788	ANTIBODY; WEST NILE VIRUS, IGM	19.74								
03	86789	ANTIBODY; WEST NILE VIRUS	16.87								
03	86790	ANTIBODY;	11.83								
03	86793	ANTIBODY;	11.83								
03	86800	THYROGLOBULIN ANTIBODY, RIA	16.77								
03	86803	HEPATITIS C AB TEST	16.55								
03	86804	HEP C AB TEST, CONFIRM	17.94								
03	86805	LYMPHOCYTOTOXICITY ASSAY;W/TITRATION	55.14								
03	86806	SEE 86805; WITHOUT TITRATION	50.19								
03	86807	SERUM SCREEN.-PRA;STANDARD METHOD	37.37								
03	86808	SERUM SCREEN.-PRA; QUICK METHOD	31.29								
03	86812	TISSUE TYPING;	27.21								
03	86813	TISSUE TYPING;	61.15								
03	86816	TISSUE TYPING;	29.37								
03	86817	TISSUE TYPING;	67.90								
03	86821	TISSUE TYPING;	59.53								
03	86822	TISSUE TYPING;	38.54								
03	86825	HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSM	63.12								
03	86826	HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSM	21.04								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X- OVERS	UVS >001
03	86849	UNLISTED IMMUNOLOGY PROCEDURE	MP		X						
03	86850	ANTIBODY SCREEN, RBC, EACH SERUM TEC	12.55								X
03	86860	ANTIBODY ELUTION (RBC), EACH ELUTION	11.13								X
03	86870	ANTIBODY IDENTIFICATION, RBC ANTIBOD	33.57								X
03	86880	ANTI HUMAN GLOBULIN TEST (COOMBS TEST	5.66								X
03	86885	ANTI HUMAN GLOBULIN TEST (COOMBS TEST	6.03								X
03	86886	ANTI HUMAN GLOBULIN TEST (COOMBS TEST	5.46								X
03	86890	AUTOLOGOUS BLOOD OR COMPONENT, COLLE	10.63								
03	86891	AUTOLOGOUS BLOOD OR COMPONENT, COLLE	10.28								
03	86900	BLOOD TYPING;	3.15								
03	86901	BLOOD TYPING;	3.49								
03	86903	BLOOD TYPING;	9.95								X
03	86904	BLOOD TYPING;	10.02								X
03	86905	BLOOD TYPING;	4.03								X
03	86906	BLOOD TYPING;	8.18								
03	86910	BLOOD TYPING;	16.59								X
03	86911	BLOOD TYPING, FOR PATERNITY TESTING,	5.15								
03	86920	COMPATIBILITY TEST EACH UNIT;	39.32								
03	86921	COMPATIBILITY TEST EACH UNIT;	39.32								
03	86922	COMPATIBILITY TEST EACH UNIT;	37.46								
03	86923	COMPATIBILITY TEST, ELECTRIC	MP		X						
03	86927	FRESH FROZEN PLASMA, THAWING, EACH U	8.46								X
03	86930	FROZEN BLOOD, PREPARATION FOR FREEZI	9.95								X
03	86931	FROZEN BLOOD, PREPARATION FOR FREEZI	9.95								X
03	86932	FROZEN BLOOD, PREPARATION FOR FREEZI	9.95								X
03	86940	HEMOLYSINS AND AGGLUTININS, AUTO, SC	8.64								X
03	86941	HEMOLYSINS AND AGGLUTININS, AUTO, SC	12.77								X
03	86945	IRRADIATION OF BLOOD PRODUCT, EACH U	36.22								X
03	86950	LEUKOCYTE TRANSFUSION	33.24								
03	86960	VOL REDUCTION OF BLOOD/PROD	MP		X						
03	86965	POOLING OF PLATELETS OR OTHER BLOOD	11.58								
03	86970	PRETREATMENT OF RBC'S FOR USE IN RBC	2.12								X
03	86971	PRETREATMENT OF RBC'S FOR USE IN RBC	6.33								X
03	86972	PRETREATMENT OF RBC'S FOR USE IN RBC	2.12								
03	86975	PRETREATMENT OF SERUM FOR USE IN RBC	2.12								X
03	86976	PRETREATMENT OF SERUM FOR USE IN RBC	2.12								
03	86977	PRETREATMENT OF SERUM FOR USE IN RBC	6.33								X
03	86978	PRETREATMENT OF SERUM FOR USE IN RBC	8.08								X
03	86985	SPLITTING OF BLOOD OR BLOOD PRODUCTS	11.62								X
03	86999	IMMUNOLOGY PROCEDURE	45.90		X						
03	87001	SMALL ANIMAL INOCULATION	13.94								
03	87003	SMALL ANIMAL INOCULATION	17.75								
03	87015	SPECIMEN CONCENTRATION	7.05								X
03	87040	BLOOD CULTURE FOR BACTERIA	10.89								X
03	87045	STOOL CULTURE FOR BACTERIA	9.94								X
03	87046	STOOL CULTR, BACTERIA, EACH	9.94								X

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	87070	CULTURE SPECIMEN, BACTERIA	9.08								X
03	87071	CULTURE BACTERI AEROBIC OTHR	9.94								
03	87073	CULTURE BACTERIA ANAEROBIC	9.94								
03	87075	CULTURE SPECIMEN, BACTERIA	9.98								X
03	87076	BACTERIA IDENTIFICATION	9.36								
03	87077	CULTURE AEROBIC IDENTIFY	9.36								X
03	87081	BACTERIA CULTURE SCREEN	6.98								
03	87084	PRESUM PATHOG CUL SCR;W/COLONY ESTIM	9.08								
03	87086	URINE CULTURE, COLONY COUNT	8.51								
03	87088	URINE BACTERIA CULTURE	8.54								
03	87101	SKIN FUNGUS CULTURE	7.46								
03	87102	FUNGUS ISOLATION CULTURE	8.86								
03	87103	CULTURE,FUNGI,ISOLATION BLOOD	8.94								
03	87106	FUNGUS IDENTIFICATION	10.89								
03	87107	FUNGI IDENTIFICATION, MOLD	11.96								
03	87109	MYCOPLASMA CULTURE	16.22								
03	87110	CULTURE,CHLAMYDIA	20.65								
03	87116	MYCOBACTERIA CULTURE	11.39								
03	87118	MYCOBACTERIA IDENTIFICATION	4.33								
03	87140	CULTURE TYPING, FLUORESCENT	5.88								
03	87143	CULTURE TYPING, GLC METHOD	13.22								
03	87147	CULTURE TYPING, SEROLOGIC	4.53								
03	87149	CULTURE, TYPING; IDENTIFICATION BY N	23.23								
03	87150	CULTURE, TYPING; IDENTIFICATION BY N	36.67								
03	87152	CULTURE TYPE PULSE FIELD GEL	6.07								
03	87153	CULTURE, TYPING; IDENTIFICATION BY N	120.53								
03	87158	CULTURE TYPING, ADDED METHOD	5.51								
03	87164	DARK FIELD EXAMINATION	11.33								
03	87166	DARK FIELD EXAMINATION	9.23								
03	87168	MACROSCOPIC EXAM ARTHROPOD	4.94								
03	87169	MACACROSCOPIC EXAM PARASITE	4.94								
03	87172	PINWORM EXAM	4.94								
03	87176	ENDOTOXIN, BACTERIAL	6.20								
03	87177	OVA AND PARASITES SMEARS	9.23								X
03	87181	ANTIBIOTIC SENSITIVITY, EACH	5.02								
03	87184	ANTIBIOTIC SENSITIVITY, EACH	7.28								X
03	87185	MICROBE SUSCEPTIBLE, ENZYME	5.50								X
03	87186	ANTIBIOTIC SENSITIVITY, MIC	9.12								
03	87187	SENSITIVITY STUDIES,ANTIBIOTIC; MCB	10.92								
03	87188	ANTIBIOTIC SENSITIVITY, EACH	6.99								
03	87190	TB ANTIBIOTIC SENSITIVITY	5.96								
03	87197	SERUM BACTERICIDAL TITER	15.29								
03	87198	CYTOMEGALOVIRUS ANTIBODY DFA	13.91								
03	87205	SMEAR, STAIN & INTERPRET	4.49								X
03	87206	SMEAR, STAIN & INTERPRET	5.66								X
03	87207	SMEAR, STAIN & INTERPRET	6.32								X

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	87209	SMEAR, COMPLEX STAIN	21.05								
03	87210	SMEAR, STAIN & INTERPRET	4.49								X
03	87220	TISSUE EXAMINATION FOR FUNGI	4.49								
03	87230	TOXIN/ANTITOXIN ASSAY, TISSUE CULTURE	20.82								X
03	87250	VIRUS INOCULATION FOR TEST	20.62								X
03	87252	VIRUS ID; TISSUE CULT. INOCULATION/OBS	27.48								
03	87253	VIRUS ID; TISS CULT, ADD STDY, @ ISOLAT	21.30								X
03	87254	VIRUS INOCULATION, SHELL VIA	20.62								X
03	87255	GENET VIRUS ISOLATE, HSV	39.67								X
03	87260	ADENOVIRUS AG, DFA	13.91								
03	87265	PERTUSSIS AG, DFA	13.91								
03	87267	ENTEROVIRUS ANTIBODY, DFA	14.05								
03	87269	GIARDIA AG, IF	14.05								
03	87270	CHYLMD TRACH AG, DFA	13.91								
03	87271	CYTOMEGALOVIRUS DFA	14.05								
03	87272	CRYPTOSPORIDUM AG, DFA	13.91								
03	87273	HERPES SIMPLEX 2, AG, IF	13.91								
03	87274	HERPES SIMPLEX AG, DFA	13.91								
03	87275	INFLUENZA B, AG, IF	13.91								
03	87276	INFLUENZA AG, DFA	13.91								
03	87277	LEGIONELLA MICDADEI, AG, IF	13.91								
03	87278	LEGION PNEUMO AG, DFA	13.91								
03	87279	PARAINFLUENZA, AG, IF	13.91								
03	87280	RESP SYNCYTIAL AG, DFA	13.91								
03	87281	PNEUMOCYSTIS CARINII, AG, IF	13.91								
03	87283	RUBEOLA, AG, IF	13.91								
03	87285	TREPON PALLIDUM AG, DFA	13.91								
03	87290	VARICELLA AG, DFA	13.91								
03	87299	AG DETECTION NOS, DFA	13.91								
03	87300	AG DETECTION, POLYVAL, IF	12.65								X
03	87301	ADENOVIRUS AG, EIA	13.91								
03	87305	INFECTIOUS AGENT ANTIGEN DETECTION B	14.05								
03	87320	CHYLMD TRACH AG, EIA	13.91								
03	87324	CLOSTRIDIUM AG, EIA	13.91								
03	87327	CRYPTOCOCCUS NEOFORM AG, EIA	13.91								
03	87328	CRYPTOSPOR AG, EIA	13.91								
03	87329	GIARDIA AG, EIA	14.05								
03	87332	CYTOMEGALOVIRUS AG, EIA	13.91								
03	87335	E COLI 0157 AG, EIA	13.91								
03	87336	ENTAMOEB HIST DISPR, AG, EIA	13.91								
03	87337	ENTAMOEB HIST GROUP, AG, EIA	13.91								
03	87338	HPYLORI, STOOL, EIA	5.39								
03	87339	HPYLORI AG, EIA	13.91								
03	87340	HEPATITIS B SURFACE AG, EIA	11.96								
03	87341	HEPATITIS B SURFACE, AG, EIA	11.96								
03	87350	HEPATITIS B AG, EIA	13.35								

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## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	87380	HEPATITIS DELTA AG, EIA	14.33								
03	87385	HISTOPLASMA CAPSUL AG, EIA	13.91								
03	87390	HIV-1 AG, EIA	20.44								
03	87391	HIV-2 AG, EIA	20.44								
03	87400	INFLUENZA A/B, AG, EIA	12.65								X
03	87420	RESP SYNCYTIAL AG, EIA	13.91								
03	87425	ROTAVIRUS AG, EIA	13.91								
03	87427	SHIGA-LIKE TOXIN AG, EIA	13.91								
03	87430	STREP A AG, EIA	13.91								
03	87449	AG DETECT NOS, EIA, MULT	13.91								
03	87450	AG DETECT NOS, EIA, SINGLE	5.39								
03	87451	AG DETECT POLYVAL, EIA, MULT	5.39								
03	87470	BARTONELLA, DNA, DIR PROBE	23.23								
03	87471	BARTONELLA, DNA, AMP PROBE	40.67								
03	87472	BARTONELLA, DNA, QUANT	50.20								
03	87475	LYME DIS, DNA, DIR PROBE	23.23								
03	87476	LYME DIS, DNA, AMP PROBE	40.67								
03	87477	LYME DIS, DNA, QUANT	45.17								
03	87480	CANDIDA, DNA, DIR PROBE	23.23								
03	87481	CANDIDA, DNA, AMP PROBE	40.67								
03	87482	CANDIDA, DNA, QUANT	44.03								
03	87485	CHYLMD PNEUM, DNA, DIR PROBE	23.23								
03	87486	CHYLMD PNEUM, DNA, AMP PROBE	40.67								
03	87487	CHYLMD PNEUM, DNA, QUANT	50.20								
03	87490	CHYLMD TRACH, DNA, DIR PROBE	23.23								
03	87491	CHYLMD TRACH, DNA, AMP PROBE	40.67								
03	87492	CHYLMD TRACH, DNA, QUANT	36.86								
03	87493	CLOSTRIDIUM DIFFICILE, TOXIN GENE(S)	36.67								
03	87495	CYTOMEG, DNA, DIR PROBE	23.23								
03	87496	CYTOMEG, DNA, AMP PROBE	40.67								
03	87497	CYTOMEG, DNA, QUANT	49.64								
03	87498	INFECTIOUS AGENT DETECTION BY NUCLEI	41.13								
03	87500	INFECTIOUS AGENT DETECTION BY NUCLEI	41.13								
03	87510	GARDNER VAG, DNA, DIR PROBE	23.23								
03	87511	GARDNER VAG, DNA, AMP PROBE	40.67								
03	87512	GARDNER VAG, DNA, QUANT	44.03								
03	87515	HEPATITIS B, DNA, DIR PROBE	23.23								
03	87516	HEPATITIS B, DNA, AMP PROBE	40.67								
03	87517	HEPATITIS B, DNA, QUANT	49.64								
03	87520	HEPATITIS C, RNA, DIR PROBE	23.23								
03	87521	HEPATITIS C, RNA, AMP PROBE	40.67								
03	87522	HEPATITIS C, RNA, QUANT	49.64								
03	87525	HEPATITIS G, DNA, DIR PROBE	23.23								
03	87526	HEPATITIS G, DNA, AMP PROBE	40.67								
03	87527	HEPATITIS G, DNA, QUANT	44.03								
03	87528	HSV, DNA, DIR PROBE	23.23								

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	87529	HSV, DNA, AMP PROBE	40.67								
03	87530	HSV, DNA, QUANT	49.64								
03	87531	HHV-6, DNA, DIR PROBE	23.23								
03	87532	HHV-6, DNA, AMP PROBE	40.67								
03	87533	HHV-6, DNA, QUANT	44.03								
03	87534	HIV-1, DNA, DIR PROBE	23.23								
03	87535	HIV-1, DNA, AMP PROBE	40.67								
03	87536	HIV-1, DNA, QUANT	89.73								
03	87537	HIV-2, DNA, DIR PROBE	23.23								
03	87538	HIV-2, DNA, AMP PROBE	40.67								
03	87539	HIV-2, DNA, QUANT	45.17								
03	87540	LEGION PNEUMO, DNA, DIR PROB	23.23								
03	87541	LEGION PNEUMO, DNA, AMP PROB	40.67								
03	87542	LEGION PNEUMO, DNA, QUANT	44.03								
03	87550	MYCOBACTERIA, DNA, DIR PROBE	23.23								
03	87551	MYCOBACTERIA, DNA, AMP PROBE	40.67								
03	87552	MYCOBACTERIA, DNA, QUANT	49.64								
03	87555	M.TUBERCULO, DNA, DIR PROBE	23.23								
03	87556	M.TUBERCULO, DNA, AMP PROBE	40.67								
03	87557	M.TUBERCULO, DNA, QUANT	50.20								
03	87560	M.AVIUM-INTRA, DNA, DIR PROB	23.23								
03	87561	M.AVIUM-INTRA, DNA, AMP PROB	40.67								
03	87562	M.AVIUM-INTRA, DNA, QUANT	50.20								
03	87580	M.PNEUMON, DNA, DIR PROBE	23.23								
03	87581	M.PNEUMON, DNA, AMP PROBE	40.67								
03	87582	M.PNEUMON, DNA, QUANT	44.03								
03	87590	N.GONORRHOEAE, DNA, DIR PROB	23.23								
03	87591	N.GONORRHOEAE, DNA, AMP PROB	40.67								
03	87592	N.GONORRHOEAE, DNA, QUANT	45.17								
03	87620	HPV, DNA, DIR PROBE	23.23								
03	87621	HPV, DNA, AMP PROBE	40.67								
03	87622	HPV, DNA, QUANT	44.03								
03	87640	INFECTIOUS AGENT DETECTION BY NUCLEI	41.13								
03	87641	INFECTIOUS AGENT DETECTION BY NUCLEI	41.13								
03	87650	STREP A, DNA, DIR PROBE	23.23								
03	87651	STREP A, DNA, AMP PROBE	40.67								
03	87652	STREP A, DNA, QUANT	44.03								
03	87653	INFECTIOUS AGENT DETECTION BY NUCLEI	41.13								
03	87660	TRICHOMONAS VAGIN, DIR PROBE	23.50							F	
03	87797	DETECT AGENT NOS, DNA, DIR	23.23								
03	87798	DETECT AGENT NOS, DNA, AMP	40.67								
03	87799	DETECT AGENT NOS, DNA, QUANT	MP							X	
03	87800	DETECT AGNT MULT, DNA, DIREC	42.28								
03	87801	DETECT AGNT MULT, DNA, AMPLI	74.01								
03	87802	STREP B ASSAY W/OPTIC	13.91								
03	87803	CLOSTRIDIUM TOXIN A W/OPTIC	13.91								

COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE MIN-MAX	MED REV	PA	SEX	PSR	SL	X- OVERS	UVS >001
03	87804	AGENT NOS ASSAY W/OPTIC	13.91								
03	87807	RSV ASSAY W/OPTIC	14.05								
03	87808	INFECTIOUS AGENT ANTIGEN DETECTION B	14.05				F				
03	87809	INFECTIOUS AGENT ANTIGEN DETECTION B	14.05								
03	87810	CHYLM D TRACH ASSAY W/OPTIC	13.91								
03	87850	N. GONORRHOEAE ASSAY W/OPTIC	13.91								
03	87880	STREP A ASSAY W/OPTIC	13.91								
03	87899	AGENT NOS ASSAY W/OPTIC	13.91								
03	87900	PHENOTYPE, INFECT AGENT DRUG	152.72		X				X		
03	87901	GENOTYPE, DNA, HIV REVERSE T	271.46		X				X		
03	87902	GENOTYPE, DNA, HEPATITIS C	298.34								
03	87903	PHENOTYPE, DNA HIV W/CULTURE	515.25		X				X		
03	87904	PHENOTYPE, DNA HIV W/CLT ADD	30.55		X				X		
03	87905	INFECTIOUS AGENT ENZYMATIC ACTIVITY	14.96								
03	87999	MICROBIOLOGY PROCEDURE	MP		X						
03	88104	CYTOPATHOLOGY	40.50								
05	88104	CYTOPATHOLOGY	16.20								
03	88106	CYTOPATHOLOGY	50.91								
05	88106	CYTOPATHOLOGY	20.36								
03	88107	CYTOPATHOLOGY	64.56								
05	88107	CYTOPATHOLOGY	25.82								
03	88108	CYTOPATHOLOGY, FLUIDS, WASHINGS OR B	48.43								
05	88108	CYTOPATHOLOGY, FLUIDS, WASHINGS	19.37								
03	88112	CYTOPATHOLOGY, SELECT CELL ENHANCEMNT	82.96								
05	88112	CYTOPATHOLOGY, SELECTIVE CELLULAR EN	33.18								
03	88125	FORENSIC CYTOPATHOLOGY	13.72								
05	88125	FORENSIC CYTOPATHOLOGY	5.48								
03	88130	SEX CHROMATIN IDENTIFICATION	15.87								
03	88140	SEX CHROMATIN IDENTIFICATION	8.42								
03	88141	CYTOPATH CERV/VAG INTERPRET	21.30	10 99			F				
03	88142	CYTOPATH CERV/VAG THIN LAYER	15.93	10 99			F				
03	88143	CYTPATH C/VAG T/LAYER REDO	14.50	10 99			F				
03	88147	CYTPATH C/VAG AUTOMATED	11.14	10 99			F				
03	88148	CYTPATH C/VAG AUTO RESCREEN	11.14	10 99			F				
03	88150	CYTOPATHOLOGY, PAP SMEAR	11.14	10 99			F	X			
03	88152	CYTOPATH CERV/VAG AUTO	11.14	10 99			F				
03	88153	CYTPATH C/VAG REDO	11.14	10 99			F				
03	88154	CYTPATH C/VAG SELECT	11.14	10 99			F				
03	88155	CYTOPATH, (PAP); W/ DEF.HORMONAL EVAL	6.32	10 99			F	X			
03	88160	CYTOPATHOLOGY	35.35								
05	88160	CYTOPATHOLOGY	14.14								
03	88161	CYTOPATH...;PREP,SCREEN,INTERP.	38.56								
05	88161	CYTOPATH...;PREP,SCREEN,INTERP.	15.44								
03	88162	CYTOPATH...;EXT.STUDY,+5 SLIDES,MULTI	52.90								
05	88162	CYTOPATH...;EXT.STUDY.+5 SLIDES,MULTI	21.16								
03	88164	CYTPATH TBS C/VAG MANUAL	11.14	10 99			F				

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COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
TS	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	88165	CYTPATH TBS C/VAG REDO	11.14	10 99			F				
03	88166	CYTPATH TBS C/VAG AUTO REDO	11.14	10 99			F				
03	88167	CYTPATH TBS C/VAG SELECT	11.14	10 99			F				
03	88172	IMMEDIATE EVAL/ASPIRATE,SPEC ADEQUAC	35.44								
05	88172	IMMEDIATE EVAL/ASPIRATE,SPEC ADEQUAC	14.18								
03	88173	FINE NEEDLE ASPIRATE..;INTERP/REPORT	90.70								
05	88173	FINE NEEDLE ASPIRATE..;INTERP/REPORT	36.29								
03	88174	CYTOPATHOLOGY,CERVIAL OR VAGINAL COL	17.11	10 99			F				
03	88175	CYTOPATHOLOGY WITH SCREENING	21.55	10 99			F				
03	88182	FLOW CYTOMETRY;	70.85								
05	88182	FLOW CYTOMETRY	28.35								X
03	88184	FLOWCYTOMETRY/ TC, 1 MARKER	47.43								
03	88185	FLOWCYTOMETRY/TC, ADD-ON	27.09								X
03	88187	FLOWCYTOMETRY/READ, 2-8	45.87								
03	88188	FLOWCYTOMETRY/READ, 9-15	56.87								
03	88189	FLOWCYTOMETRY/READ, 16 & >	74.28								
03	88199	CYTOPATHOLOGY PROCEDURE	MP								X
05	88199	CYTOPATHOLOGY PROCEDURE	MP								X
03	88230	TISS CULT-CHROMOSOME ANAL;LYMPHOCYTE	67.39								
03	88233	TISS CULT,CHROM.ANAL;SKIN/OTHER BX	67.39								
03	88235	TISS CULT,CHROM ANAL;AMNIOTIC/CHORIO	67.39								
03	88237	TISS CULT,CHROM ANAL;BONE MARROW ...	67.39								
03	88239	TISS CULT,CHROM ANAL; OTHER TISSUE	67.39								
03	88240	CELL CRYOPRESERVE/STORAGE	11.71								
03	88241	FROZEN CELL PREPARATION	11.71								
03	88245	CHROM ANAL/BREAKAGE SYND;25 CELLS...	67.39								
03	88248	CHROM ANAL/BREAKAGE SYND;100 CELLS..	182.61								
03	88249	CHROMOSOME ANALYSIS, 100	200.68								
03	88261	CHROMOSOME COUNT: 1-4 CELLS	186.36								
03	88262	CHROMOSOME COUNT: 1-20 CELLS	131.42								
03	88263	CHROM ANAL;45 CELL-MOSAICISM,.....	67.39								
03	88264	CHROMOSOME ANALYSIS, 20-25	144.45								
03	88267	CHROMOSOME COUNT: AMNIOTIC	189.56								
03	88269	CHROM ANALY;IN SITU AMNIOTIC FLUID..	175.37								
03	88271	CYTOGENETICS, DNA PROBE	24.82								
03	88272	CYTOGENETICS, 3-5	31.03								
03	88273	CYTOGENETICS, 10-30	37.23								
03	88274	CYTOGENETICS, 25-99	40.34								
03	88275	CYTOGENETICS, 100-300	46.54								
03	88280	CHROMOSOME COUNT: ADDITIONAL	26.47								
03	88283	CHROM ANAL;ADD SPEC BANDING TECH.	29.42								
03	88285	CHROMOSOME COUNT: ADDITIONAL	20.03								
03	88289	CHROM ANAL;ADD HI RESOLUTION STUDY	36.31								
05	88289	CHROM ANAL;ADD.HI RESOLUTION STUDY	14.52								
03	88291	CYTO/MOLECULAR REPORT	19.24								
03	88299	CYTOGENETIC STUDY	5.28								X

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
03	88300	SURGICAL PATHOLOGY, GROSS	15.22								X
05	88300	SURGICAL PATHOLOGY, GROSS	6.09								X
03	88302	SURGICAL PATHOLOGY, COMPLETE	32.77								X
05	88302	SURGICAL PATHOLOGY, COMPLETE	13.10								X
03	88304	SURGICAL PATHOLOGY, COMPLETE	40.77								X
05	88304	SURGICAL PATHOLOGY, COMPLETE	16.31								X
03	88305	SURGICAL PATHOLOGY, COMPLETE	69.79								X
05	88305	SURGICAL PATHOLOGY, COMPLETE	27.91								X
03	88307	SURGICAL PATHOLOGY, COMPLETE	137.60								
05	88307	SURGICAL PATHOLOGY, COMPLETE	55.03								
03	88309	SURGICAL PATHOLOGY, COMPLETE	205.86								
05	88309	SURGICAL PATHOLOGY, COMPLETE	82.35								
03	88311	SURGICAL PATHOLOGY; DECALCIFICATION	12.48								
05	88311	SURGICAL PATHOLOGY; DECALCIFICATION	4.99								
03	88312	SPECIAL STAINS; GROUP I FOR MICROORA	61.77								
05	88312	SPECIAL STAINS	24.70								
03	88313	SPECIAL STAINS; GROUP II, ALL OTHER	46.29								
05	88313	SPECIAL STAINS	18.52								
03	88314	SPECIAL STAINS; HISTOCHEMICAL STAINI	62.46								
05	88314	GROSS & MICROSCOPIC EXAM 3 SPECIMENS	24.99								
03	88321	MICROSLIDE CONSULTATION	62.45								
03	88323	MICROSLIDE CONSULTATION	97.84								
05	88323	MICROSLIDE CONSULTATION	39.13								
03	88325	COMPREHENSIVE REVIEW OF DATA	133.38								
03	88329	CONSULTATION DURING SURGERY	33.90								X
03	88331	CONSULTATION DURING SURGERY	61.17								X
05	88331	CONSULTATION DURING SURGERY	24.47								X
03	88332	PATHOLOGY CONSULTATION DURING SURGER	27.71								
05	88332	PATHOLOGY CONSULTATION DURING SURGER	11.09								
03	88333	INTRAOP CYTO PATH CONSULT, 1	62.45								
05	88333	INTRAOP CYTO PATH CONSULT, 1	24.99							X	
03	88334	INTRAOP CYTO PATH CONSULT, 2	36.62								X
05	88334	INTRAOP CYTO PATH CONSULT, 2	14.65							X	X
03	88342	IMMUNOCYTOCHEMISTRY (INCLUDING TISSU	65.62								
05	88342	IMMUNOCYTOCHEMISTRY	26.24								
03	88346	AUTO-ANTIBODY PROFILE	66.40								X
05	88346	AUTO-ANTIBODY PROFILE	26.55								X
03	88347	INDIRECT METHOD	55.22								
05	88347	INDIRECT METHOD	22.09								
03	88348	ELECTRON MICROSCOPY	384.42								
05	88348	ELECTRON MICROSCOPY	153.77								
03	88349	SCANNING ELECTRON MICROSCOPY	182.50								
05	88349	SCANNING ELECTRON MICROSCOPY	73.00								
03	88358	MORPHOMETRIC ANALYSIS TUMOR	68.59								X
05	88358	ANALYSIS, TUMOR	27.44								
03	88360	TUMOR IMMUNOHISTOCHEM/MANUAL	79.22								

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## LOUISIANA MEDICAID LABORATORY AND RADIOLOGY (NON-HOSPITAL) FEE SCHEDULE

FEES EFFECTIVE FOR AUGUST 01, 2010 - DECEMBER 31, 2010

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
			FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
TS	CODE	DESCRIPTION		MIN-MAX	REV					OVERS	>001
05	88360	TUMOR IMMUNOHISTOCHEM/MANUAL	31.69		X						
03	88361	IMMUNOHISTOCHEMISTRY, TUMOR	113.44								
03	88365	TISSUE IN SITU HYBRID.;INTERP/REPORT	99.57								X
05	88365	TISSUE HYBRIDATION	39.84								
03	88367	INSITU HYBRIDIZATION, AUTO	153.22								
05	88367	INSITU HYBRIDIZATION, AUTO	61.28								
03	88368	INSITU HYBRIDIZATION, MANUAL	135.64								
05	88368	INSITU HYBRIDIZATION, MANUAL	54.25								
03	88371	PROTEIN ANALYSIS OF TISSUE BY WESTER	23.43								
03	88372	PROTEIN ANALYSIS OF TISSUE BY WESTER	23.99								X
03	88384	EVAL MOLECULAR PROBES, 11-50	MP		X						
03	88385	EVAL MOLECUL PROBES, 51-250	322.08		X						
05	88385	EVAL MOLECUL PROBES, 51-250	128.83		X						
03	88386	EVAL MOLECUL PROBES, 251-500	MP		X						
05	88386	EVAL MOLECUL PROBES, 251-500	MP		X						
03	88387	MACROSCOPIC EXAMINATION, DISSECTION,	26.70								
05	88387	MACROSCOPIC EXAMINATION, DISSECTION,	10.68								
03	88388	MACROSCOPIC EXAMINATION, DISSECTION,	16.12								
05	88388	MACROSCOPIC EXAMINATION, DISSECTION,	6.45								
03	88399	SURGICAL PATHOLOGY PROCEDURE	MP		X						
05	88399	SURGICAL PATHOLOGY PROCEDURE	MP		X						
03	88720	BILIRUBIN, TOTAL, TRANSCUTANEOUS	3.67								
03	88738	HEMOGLOBIN (HGB), QUANTITATIVE, TRAN	3.63								
03	88740	HEMOGLOBIN, QUANTITATIVE, TRANSCUTAN	4.26								
03	88741	HEMOGLOBIN, QUANTITATIVE, TRANSCUTAN	4.26								
03	89049	CHCT FOR MAL HYPERTHERMIA	125.33								
03	89050	BODY FLUID CELL COUNT	4.99								X
03	89051	BODY FLUID CELL COUNT	5.82								X
03	89055	LEUKOCYTE ASSESSMENT, FECAL	5.00								
03	89060	CRYSTAL IDENTIFICATION BY COMPENSATE	7.54								
03	89100	SAMPLE INTESTINAL CONTENTS	136.88								
03	89105	SAMPLE INTESTINAL CONTENTS	138.23								
03	89125	SPECIMEN FAT STAIN	4.55								X
03	89130	SAMPLE STOMACH CONTENTS	115.00								X
03	89132	SAMPLE STOMACH CONTENTS	128.45								X
03	89135	SAMPLE STOMACH CONTENTS	154.20								
03	89136	SAMPLE STOMACH CONTENTS	100.71								
03	89140	SAMPLE STOMACH CONTENTS	127.91								
03	89141	SAMPLE STOMACH CONTENTS	136.00								
03	89160	EXAM FECES FOR MEAT FIBERS	3.89								
03	89190	NASAL SMEAR FOR EOSINOPHILS	5.02								
03	89220	SPUTUM SPECIMEN COLLECTION	12.61								
03	89225	STARCH GRANULES, FECES	3.92								
03	89230	COLLECT SWEAT FOR TEST	3.71								
03	89235	WATER LOAD TEST	6.45								
03	89240	PATHOLOGY LAB PROCEDURE	MP		X						

NOTE: ALL CPT CODES AND DESCRIPTIONS ARE COPYRIGHTED BY THE AMERICAN MEDICAL ASSOCIATION.

LOUISIANA MEDICAID MANAGEMENT INFORMATION SYSTEM  
 DEPARTMENT OF HEALTH AND HOSPITALS - BUREAU OF HEALTH SERVICES - FINANCING  
 LOUISIANA MEDICAID LABORATORY AND RADIOLOGY (NON-HOSPITAL) FEE SCHEDULE  
 FEES EFFECTIVE FOR AUGUST 01, 2010 - DECEMBER 31, 2010

## COLUMN:

1	2	3	4	5	6	7	8	9	10	11	12
TS	CODE	DESCRIPTION	FEE	AGE	MED	PA	SEX	PSR	SL	X-	UVS
				MIN-MAX	REV					OVERS	>001
03	89300	SEMEN ANALYSIS	9.40					X			
03	89310	SEMEN ANALYSIS	9.08								
03	89320	SEMEN ANALYSIS	12.71								
03	89321	SEMEN ANALYSIS	13.97				M				
03	89322	SEMEN ANALYSIS; VOLUME, COUNT, MOTIL	18.15				M				
03	89398	UNLISTED REPRODUCTIVE MEDICINE LABOR	MP				X				



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LOUISIANA MEDICAID MANAGEMENT INFORMATION SYSTEM  
DEPARTMENT OF HEALTH AND HOSPITALS - BUREAU OF HEALTH SERVICES - FINANCING

REPORT NO: RF-0-76LAB

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LOUISIANA MEDICAID LABORATORY AND RADIOLOGY (NON-HOSPITAL) FEE SCHEDULE  
LEGEND

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Listed below are some aids we hope will help you understand this fee schedule. If, after reading the information below, you need further clarification of an item, please call Unisys Provider Relations at 1-800-473-2783.

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COLUMN 1. TS (Type Service): Definition: Files on which codes are loaded and from which claims are paid. The file to which a claim goes for pricing is determined by, among other things, the type of provider who is billing and by the modifier appended to the procedure code.

Listed below is an explanation of the types of service found on this schedule.

03 - Full Service. The file from which physician, physician-owned lab and independent lab services are paid. Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse Specialists, Certified Nurse Midwives, and Physician Assistants are paid at 80% of this fee.

05 - Professional component. Claims with modifier -26 are priced from this file.

COLUMNS 2, 3 and 4. CODE, DESCRIPTION and FEE.

COLUMN 5. AGE MIN and MAX: Codes with minimum or maximum age restrictions. If the recipient's age on the date of service is outside the minimum or maximum age, claims will deny.

COLUMN 6. MED REV (Medical Review): Claims with some codes pend to Medical Review for review of the attachments or for manual pricing.

COLUMN 7. PA (Prior Authorization): Some services must be prior authorized before they are rendered. If a PA request is approved, a PA number will be issued for inclusion on the claim. If a PA request is not approved, no payment for the service will be made.

COLUMN 8. SEX (Restriction): Some procedure codes are indicated for only one sex.

COLUMN 9. PSR (Provider Specialty Restriction): If a code has a provider specialty restriction, reimbursement for its performance will not be made to other specialties.

COLUMN 10. SL (Service Limitation): Codes with frequency limitations.

COLUMN 11. X-OVERS (Only): These codes are payable for Medicare/Medicaid recipients only.

COLUMN 12. UVS>001: An 'X' in this column means more than one unit of service per day may be billed.