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CODE DESCRIPTION	UB-04 UNIT	Status Code (if other than "A")	FINAL FEE SCHEDULE AMOUNT (1)	Payment under 50% MPPR for Always Therapy Codes (3)
SURGERY - MUSCULOSKELETAL SYSTEM - APPLICATION OF CASTS AND STRAPPING				
BODY AND UPPER EXTREMITY - CASTS:				
29065 APPLICATION; SHOULDER TO HAND (LONG ARM)	1 per procedure		\$ 92.13	
29075 APPLICATION; ELBOW TO FINGER (SHORT ARM)	1 per procedure		83.88	
29085 APPLICATION; HAND AND LOWER FOREARM (GAUNTLET)	1 per procedure		91.83	
29086 APPLY FINGER CAST	1 per procedure		73.00	
BODY AND UPPER EXTREMITY - SPLINTS:				
29105 APPLICATION OF LONG ARM SPLINT (SHOULDER TO HAND)	1 per procedure		78.67	
29125 APPLICATION OF SHORT ARM SPLINT (FOREARM TO HAND); STATIC	1 per procedure		63.05	
29126 APPLICATION OF SHORT ARM SPLINT (FOREARM TO HAND); DYNAMIC	1 per procedure		74.55	
29130 APPLICATION OF FINGER SPLINT; STATIC	1 per procedure		40.06	
29131 APPLICATION OF FINGER SPLINT; DYNAMIC	1 per procedure		51.70	
BODY AND UPPER EXTREMITY - STRAPPING-ANY AGE:				
29200 STRAPPING; THORAX	1 per procedure		28.86	
29240 STRAPPING; SHOULDER (EG, VELPEAU)	1 per procedure		27.09	
29260 STRAPPING; ELBOW OR WRIST	1 per procedure		26.88	
29280 STRAPPING; HAND OR FINGER	1 per procedure		27.51	
LOWER EXTREMITY - CASTS:	4		420.00	
29345 APPLICATION OF LONG LEG CAST (THIGH TO TOES)	1 per procedure		128.86	
29365 APPLICATION OF CYLINDER CAST (THIGH TO ANKLE) 29405 APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES)	1 per procedure		118.05	
29405 APPLICATION OF STORT LEG CAST (BELOW RIVEE TO TOES) 29445 APPLICATION OF RIGID TOTAL CONTACT LEG CAST	1 per procedure		76.49	
LOWER EXTREMITY - SPLINTS:	1 per procedure		120.46	
29505 APPLICATION OF LONG LEG SPLINT (THIGH TO ANKLE OR TOES)	1 per procedure		85.89	
29515 APPLICATION OF SHORT LEG SPLINT (CALF TO FOOT)	1 per procedure		69.17	
LOWER EXTREMITY - STRAPPING-ANY AGE:	i per procedure		05.17	
29520 STRAPPING; HIP	1 per procedure		31.55	
29530 STRAPPING; KNEE	1 per procedure		27.13	
29540 STRAPPING; ANKLE	1 per procedure		26.29	
29550 STRAPPING; TOES	1 per procedure		18.18	
29580 STRAPPING UNNA BOOT	1 per procedure		57.51	
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MEDICINE - BIOFEEDBACK				
90901 BIOFEEDBACK TRAINING BY ANY MODALITY	1 per procedure		37.21	
90912 BIOFEEDBACK TRAINING, PERINEAL MUSCLES, ANORECTAL OR URETHRAL SPHINCTER, INCLUDING ELECTROMYOGRAPHY (EMG) AND/OR MANOMETRY, WHEN PERFORMED; INITIAL 15 MINUTES OF ONE-ON-ONE PHYSICIAN OR OTHER				
QUALIFIED HEALTH CARE PROFESSIONAL CONTACT WITH THE PATIENT	1 per procedure		73.47	
90913 BIOFEEDBACK TRAINING, PERINEAL MUSCLES, ANORECTAL OR URETHRAL SPHINCTER, INCLUDING EMG AND/OR				
MANOMETRY, WHEN PERFORMED; EACH ADDITIONAL 15 MINUTES OF ONE-ON-ONE PHYSICIAN OR OTHER QUALIFIED				
HEALTH CARE PROFESSIONAL CONTACT WITH THE PATIENT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY	1 par procedure		30.14	
PROCEDURE)	1 per procedure		50.14	
MEDICINE - SPECIAL OTORHINOLARYNGOLOGIC SERVICES				
92507 TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER (INCLUDES				
AURAL REHABILITATION); INDIVIDUAL	1 per procedure		72.23	57.63
92508 TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER (INCLUDES				
AURAL REHABILITATION); GROUP, TWO OR MORE INDIVIDUALS	1 per procedure		22.50	16.75
92520 LARYNGEAL FUNCTION STUDIES (I.E., AERODYNAMIC TESTING AND ACOUSTIC TESTING)	1 per procedure		82.13	
92521 EVALUATION OF SPEECH FLUENCY (E.G., STUTTERING, CLUTTERING)	1 per procedure		125.70	99.92
92522 EVALUATION OF SPEECH SOUND PRODUCTION (E.G., ARTICULATION, PHONOLOGICAL PROCESS, APRAXIA, DYSARTHRIA)	1 per procedure		104.78	84.45
92523 EVALUATION OF SPEECH SOUND PRODUCTION (E.G., ARTICULATION, PHONOLOGICAL PROCESS, APRAXIA, DYSARTHRIA); WITH EVALUATION OF LANGUAGE COMPREHENSION AND EXPRESSION (E.G., RECEPTIVE AND EXPRESSIVE LANGUAGE)				
	1 per procedure		215.07	171.31
92524 BEHAVIORAL AND QUALITATIVE ANALYSIS OF VOICE AND RESONANCE	1 per procedure		102.97	83.38
92526 TREATMENT OF SWALLOWING DYSFUNCTION AND/OR ORAL FUNCTION FOR FEEDING	1 per procedure		79.41	61.87
AUDIOLOGIC FUNCTION TESTS WITH MEDICAL DIAGNOSTIC EVALUATION				
92552 PURE TONE AUDIOMETRY (THRESHOLD); AIR ONLY	1 per procedure		35.40	



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0255	3 PURE TONE AUDIOMETRY (THRESHOLD); AIR AND BONE	1 por procedure		42.77	
	5 SPEECH AUDIOMETRY THRESHOLD	1 per procedure 1 per procedure		26.86	
	6 SPEECH AUDIOMETRY THRESHOLD; WITH SPEECH RECOGNITION	1 per procedure		41.59	
	7 COMPREHENSIVE AUDIOMETRY THRESHOLD EVALUATION AND SPEECH RECOGNITION (92553 AND 92556 COMBINED)	1 per procedure		33.93	
	2 LOUDNESS BALANCE TEST, ALTERNATE BINAURAL OR MONAURAL	1 per procedure		43.95	
9256	3 TONE DECAY TEST	1 per procedure		31.57	
9256	5 STENGER TEST, PURE TONE	1 per procedure		19.49	
9256	7 TYMPANOMETRY (IMPEDANCE TESTING)	1 per procedure		14.76	
9256	8 ACOUSTIC REFLEX TESTING	1 per procedure		14.13	
9257	1 FILTERED SPEECH TEST	1 per procedure		28.03	
9257	2 STAGGERED SPONDAIC WORD TEST	1 per procedure		50.43	
9257	5 SENSORINEURAL ACUITY LEVEL TEST	1 per procedure		65.50	
9257	6 SYNTHETIC SENTENCE INDENTIFICATION TEST	1 per procedure		40.12	
	7 STENGER TEST, SPEECH	1 per procedure		20.37	
9257	9 VISUAL REINFORCEMENT AUDIOMETRY (VRA)	1 per procedure		40.99	
	2 CONDITIONING PLAY AUDIOMETRY	1 per procedure		79.01	
	3 SELECT PICTURE AUDIOMETRY	1 per procedure		52.49	
	4 ELECTROCOCHLEOGRAPHY	1 per procedure		98.51	
	7 EVOKED OTOACOUSTIC EMISSIONS; LIMITED (SINGLE STIMULUS LEVEL, EITHER TRANSIENT OR DISTORTION PRODUCTS)	1 per procedure		20.24	
9230	8 EVOKED OTOACOUSTIC EMISSIONS; COMPREHENSIVE OR DIAGNOSTIC EVALUATION (COMPARISON OF TRANSIENT AND/OR DISTORTION PRODUCT OTOACOUSTIC EMISSIONS AT MULTIPLE LEVELS AND FREQUENCIES)	1 per procedure		31.13	
9259	0 HEARING AID EXAM, ONE EAR	1 per procedure	(N)	-	
	1 HEARING AID EXAM, BOTH EARS	1 per procedure	(N)	-	
9259	6 EAR PROTECTOR ATTENUATION MEASUREMENTS	1 per procedure		70.76	
9259	7 ORAL SPEECH DEVICE EVALUATION	1 per procedure		68.61	55.36
9260	1 COCHLEAR IMPLT F/UP EXAM <7	1 per procedure		145.61	
9260	2 REPROGRAM COCHLEAR IMPLT <7	1 per procedure		91.09	
9260	3 COCHLEAR IMPLT F/UP EXAM 7/>	1 per procedure		137.22	
9260	4 REPROGRAM COCHLEAR IMPLT 7/>	1 per procedure		82.40	
9260	7 EVALUATION OF PATIENT FOR PRESCRIPTION OF SPEECH GENERATING DEVICES	1 per procedure		115.69	88.44
9260	8 RE-EVALUATION OF PATIENT USING SPEECH GENERATING DEVICES, EACH ADD'L 30 MIN	1 for each 30 MIN		45.41	
9260	9 PATIENT ADAPTATION AND TRAINING FOR USE OF SPEECH GENERATING DEVICES	1 per procedure		96.42	73.14
9261	0 CLINICAL EVALUATION OF SWALLOWING FUNCTION (NOT INVOLVING INTERPRETATION OF DYNAMIC RADIOLOGICAL				
0201	STUDIES OR ENDOSCOPIC STUDY OF SWALLOWING)	1 per procedure		79.93	
	<ol> <li>EVALUATION OF SWALLOWING INVOLVING SWALLOWING OF RADIO-OPAQUE MATERIALS</li> <li>ENDOSCOPIC STUDY OF SWALLOWING FUNCTION (ALSO FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING)</li> </ol>	1 per procedure		85.09	
	3 ENDOSCOPIC STOLETOR SWALLOWING FORCTION (ALSO FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING)	1 per procedure		180.07	
	4 SENSORY TESTING DURING ENDOSCOPIC STUDY OF SWALLOWING (ADD ON CODE) REFERRED TO AS FIBEROPTIC	1 per procedure		34.32	
9201	ENDOSCOPIC EVALUATION OF SWALLOWING WITH SENSORY TESTING	1 per procedure		136.79	
9261	5 LARYNGOSCOPIC SENSORY I&R	1 per procedure		30.56	
9261	6 FEES W/LARYNGEAL SENSE TEST	1 per procedure		210.31	
9261	8 EVALUATION FOR PRESCRIPTION OF NON-SPEECH-GENERATING AUGMENTATIVE AND ALTERNATIVE COMMUNICATION DEVICE; FACE-TO-FACE WITH THE PATIENT	1 for each 30 MIN	(B)	-	
	- NEUROLOGY AND NEUROMUSCULAR PROCEDURES				
	F MOTION:				
	1 RANGE OF MOTION MEASUREMENTS AND REPORT (SEPARATE PROCEDURE); EACH EXTREMITY (EXCLUDING HAND) OR				
	EACH TRUNK SECTION (SPINE)	1 per procedure		22.01	
9585	2 RANGE OF MOTION MEASUREMENTS AND REPORT (SEPARATE PROCEDURE); HAND, WITH OR WITHOUT COMPARISON WITH NORMAL SIDE	1 per procedure		18.63	
MEDICINE · TESTING)	- CENTRAL NERVOUS SYSTEM ASSESSMENTS/TESTS (EG, NEURO-COGNITIVE, MENTAL STATUS, SPEECH				
· · · · ·	5 ASSESSMENT OF APHASIA (INCLUDES ASSESSMENT OF EXPRESSIVE AND RECEPTIVE SPEECH AND LANGUAGE FUNCTION, LANGUAGE COMPREHENSION, SPEECH PRODUCTION ABILITY, READING, SPELLING, WRITING, EG, BY BOSTON DIAGNOSTIC APHASIA EXAMINATION) WITH INTERPRETATION AND REPORT PER HOUR				
		1 per procedure		90.73	
9611	0 DEVELOPMENTAL TESTING; LIMITED (EG, DEVELOPMENTAL SCREENING TEST II, EARLY LANGUAGE MILESTONE SCREEN), WITH INTERPRETATION AND REPORT	1 per procedure	(N)	-	



Note         Description         Use of the second s				OHIO	
CONNETY LEVEL, SOLAL, MANOY ANDORE RECURPT RUNCINGS BY STANDARDZED DEVELOPMENTAL         1 per proodur         12.31           98123         STANDARDZED DEVELOPMENTAL         1 per proodur         2.32           99123         STANDARDZE COSTING PER CURLINE BURK CORE FOR MINARY MORECEDURE I         1 per proodure         78.33           99123         STANDARDZE COSTING PER CURLING PER CURLING PER CONTROL         1 per proodure         78.33           99120         STANDARDZE COSTING PER CURLING PER	CODE DESCRIPTION	UB-04 UNIT	Code (if other	SCHEDULE	under 50% MPPR for Always Therapy Codes
CONNETY LEVEL, SOLAL, MANOY ANDORE RECURPT RUNCINGS BY STANDARDZED DEVELOPMENTAL         1 per proodur         12.31           98123         STANDARDZED DEVELOPMENTAL         1 per proodur         2.32           99123         STANDARDZE COSTING PER CURLINE BURK CORE FOR MINARY MORECEDURE I         1 per proodure         78.33           99123         STANDARDZE COSTING PER CURLING PER CURLING PER CONTROL         1 per proodure         78.33           99120         STANDARDZE COSTING PER CURLING PER					
INSTRUMENTS WITH PERCENTION 1995 AND DESCRIPTION TO ODE OF INFRAMARY PROCESSIONAL         1 for proceeding         1.21.21           99132 SEAR ADDITIONAL 30 MINISTING PERCENTIANAMIC STISTING PER ADJUNT TO CORE FOR MARKARY PROCESSIONAL         1 for proceeding         75.35           PEOLONE - PERSONAL MICENTIAN PERSONAL STISTING PER ADJUNT CORE FOR PERSONAL         1 for proceeding         75.35           9000 MOTION ALALYSKY, VIEOGOD         1 for proceeding         10.31           9000 MOTION ALALYSKY, VIEOGOD         1 for proceeding         10.32           9000 MOTION ALALYSKY, VIEOGOD         1 for proceeding         10.32           9000 MOTION ALALYSKY, VIEOGOD         1 for proceeding         10.22           97010 APPRILED OF A MANDARY TO ONE ON MORE AREAS, HETCION COLLO PACK         1 for proceeding         10.17           97010 APPRILED OF A MANDARY TO ONE ON MORE AREAS, HETCION COLLO PACK         1 for proceeding         1.17           97010 APPRILED OF A MANDARY TO ONE ON MORE AREAS, HETCION COLLO PACK         1 for proceeding         1.17           97010 APPRILED OF A MANDARY TO ONE ON MORE AREAS, HETCION COLLO PACK         1 for proceeding         1.17           9702 APPRILED OF A MANDARY TO ONE ON MORE AREAS, INTERNEM         1 for proceeding         1.17           9702 APPRILED OF A MANDARY TO ONE ON MORE AREAS, INTERNEM         1 for proceeding         1.38           9702 APPRILED OF A MANDARY TO ONE ON MORE AR					
98225 2TMDARPD COOKITIVE PERFORMANCE TESTING PA GUALIFED HEALTH CARE PROFESSIONAL         1 for each low         92.65         72.26           MEDICINE - PHYSICAL MEDICINE AND REHABILITATION         1 per procedure         20.60         100.13           98000 ATTORIAN TIST WIT PAILS MADE         1 per procedure         20.64           9000 ATTORIAN TIST WIT PAILS MADE         1 per procedure         20.64           9000 ATTORIAN OF A MODALITY DONE ON ONE PATIENT CONTACT         1 per procedure         10.7           9000 ATTORIAN OF A MODALITY DONE ON ONE PATIENT CONTACT         1 per procedure         10.7           9000 ATTORIAN OF A MODALITY DONE ON ONE ARASE, INCIDENT CONTACT         1 per procedure         1.06           9000 ATTORIAN OF A MODALITY DONE OF MODE ARASE, INCIDENT CONTACT         1 per procedure         1.07           9000 ATTORIAN OF A MODALITY DONE OF MODE ARASE, INCIDENT CONTACT         1 per procedure         1.06           9000 ATTORIAN OF A MODALITY DONE OF MODE ARASE, INCIDENT CONTACT         1 per procedure         1.06           9000 ATTORIAN OF A MODALITY DONE OF MODE ARASE, INCIDENT CONTACT         1 per procedure         7.64         3.30           9000 AFPLICATION OF A MODALITY DONE OF MODE ARASE, INCIDENT CONTACT         1 per procedure         1.06         4.33           9000 AFPLICATION OF A MODALITY DONE ON MODE ARASE, INCIDENT CONTACT         1 per procedure         1.00		1 per procedure		123.81	
MEDICINE - PHYSICAL MEDICINE AND REPABLITATION         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         1000         10000         1000         1000	96113 EACH ADDITIONAL 30 MINUTES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE.)			52.12	
9000         MOTION AUALISA, VADE/202         10 pc procedure         78.39           9000         MOTION AUALISA, VADE/202         1 pc procedure         20.16           9000         MOTION TAUALISA, VADE/202         1 pc procedure         20.16           9000         MOTION CALLISA, VADE/202         1 pc procedure         20.16           9000         MOTION CALLISA, VADE/202         1 pc procedure         20.16           9000         MOTION CALLISA, VADE/202         1 pc procedure         10.17           9000         APRIL ATMON OF A MODULTY TO ONE ON ROME AREAS, TRACTION MOTION CONTROL TO ONE ON ROME AREAS, VADE/202         1 pc procedure         10.7           9700         APRIL ATMON OF A MODULTY TO ONE ON ROME AREAS, VADE/202         1 pc procedure         5.8         4.04           97012         APRIL ATMON OF A MODULTY TO ONE ON ROME AREAS, VADE/202         1 pc procedure         6.70         4.48           97024         APRIL ATMON OF A MODULTY TO ONE ON ROME AREAS, NERASED         1 pc procedure         7.64         5.29           97034         APRIL ATMON OF A MODULTY TO ONE ON ROME AREAS, INFERMEND         1 pc procedure         7.64         5.29           97034         APRIL ATMON OF A MODULTY TO ONE ON ROME AREAS, INTERAMINE, SCH SI MINUTS         1 pc reach 3 MIN         1.38         1.31           97034 </td <td>96125 STANDARD COGNITIVE PERFORMANCE TESTING BY A QUALIFIED HEALTH CARE PROFESSIONAL</td> <td>1 for each hour</td> <td></td> <td>95.85</td> <td>76.26</td>	96125 STANDARD COGNITIVE PERFORMANCE TESTING BY A QUALIFIED HEALTH CARE PROFESSIONAL	1 for each hour		95.85	76.26
90001         MOTION HEST WIT PRESS MEAS         1 per procedure         2015           90002         PREVENDED - DOES NOT REQUIRE DIRECT ONE ON ONE PATIENT CONTACT         1 per procedure         [1]         -           90001         MURICINING OF A MODALITY TO ONE ON MORE AREAS, HIGT COLD PACIS         1 per procedure         [1]         -           9001         APPLICATION OF A MODALITY TO ONE MORE AREAS, LECTICIN, MICHANICAL         1 per procedure         [1]         -           9001         APPLICATION OF A MODALITY TO ONE MORE AREAS, LECTICIN, SCHONTINUATTO INUINATION INITATION OF A MODALITY TO ONE MORE AREAS, MARTINA DATI         1 per procedure         [1]         -           9001         APPLICATION OF A MODALITY TO ONE MORE AREAS, MARTINA DATI         1 per procedure         [1]         6.00         4.33           9002         APPLICATION OF A MODALITY TO ONE MORE AREAS, MARTINA DATI         1 per procedure         [1]         6.00         4.33           9002         APPLICATION OF A MODALITY TO ONE MORE AREAS, MERTENA         1 per procedure         [1]         6.00         4.33           9002         APPLICATION OF A MODALITY TO ONE MORE AREAS, MERTENA         1 per procedure         [1]         6.00         4.33           9002         APPLICATION OF A MODALITY TO ONE MORE AREAS, LECTICIN STIMULTOS         1 per procedure         [1]         6.00         1.3	MEDICINE - PHYSICAL MEDICINE AND REHABILITATION				
9002. DIVAMIC SUMPLE INST. ONE ON ONE PATIENT CONTACT         1 per procedure         819           9702. APPLICATION OF A MODALITY TO ON ON MERABIS, THAT ON MERINANCA.         1 per procedure         813.72         11.88           9702. APPLICATION OF A MODALITY TO ON MORE AREAS, THACTION MERINANCA.         1 per procedure         0.1         -           9702. APPLICATION OF A MODALITY TO ON MORE AREAS, TACTION MERINANCA.         1 per procedure         0.1         -           9702. APPLICATION OF A MODALITY TO ON MORE AREAS, SUSCENTILIATE ENVICES         1 per procedure         6.43         4.45           9702. APPLICATION OF A MODALITY TO ON MORE AREAS, WHENTOOL         1 per procedure         6.43         4.43           9702. APPLICATION OF A MODALITY TO ON MORE AREAS, WHENTOOL         1 per procedure         6.40         4.33           9702. APPLICATION OF A MODALITY TO ON MORE AREAS, WHENTOOL         1 per procedure         6.40         4.33           9702. APPLICATION OF A MODALITY TO ON MORE AREAS, MINITRON         1 per procedure         7.42         5.32           0000. APPLICATION OF A MODALITY TO ON MORE AREAS, MINITRON TO MANUAL, EACH 15 MINITES         1 per procedure         1.62         1.52           0000. APPLICATION OF A MODALITY TO ON MORE AREAS, CONTAST BATHS, FACH 15 MINITES         1 for each 15 MIN         1.32         1.32           0000. APPLICATION OF A MODALITY TO ON ON MORE AREAS, CONTAST BATHS, F	96000 MOTION ANALYSIS, VIDEO/3D	- 1 per procedure		78.50	
SUPERVISED - DOES NOT REQUIRE DIRECT ONE ON ONE PATIENT CONTACT         Notation         Notation         Notation           9700 APPLICATION OF A MODALITY TO ONE ON MORE AREAS, HATCION MECHANICAL         1 per procedure         13.72         11.08           9700 APPLICATION OF A MODALITY TO ONE MORE AREAS, HATCION MECHANICAL         1 per procedure         10         -           9701 APPLICATION OF A MODALITY TO ONE MORE AREAS, USAGONELINATIC DIVICES         1 per procedure         14.67         13.25           9702 APPLICATION OF A MODALITY TO ONE ON MORE AREAS, VARIENDALINATIC DIVICES         1 per procedure         6.70         4.48           9702 APPLICATION OF A MODALITY TO ONE ON MORE AREAS, VARIENDAL         1 per procedure         6.70         4.48           9702 APPLICATION OF A MODALITY TO ONE ON MORE AREAS, VARIENDAL         1 per procedure         6.70         4.48           9702 APPLICATION OF A MODALITY TO ONE ON MORE AREAS, VARIENDAL         1 per procedure         7.64         5.39           9702 APPLICATION OF A MODALITY TO ONE ON MORE AREAS, VIRIANDED         1 per procedure         7.64         5.39           9702 APPLICATION OF A MODALITY TO ONE ON MORE AREAS, VIRIANDED         1 per procedure         7.64         5.39           9703 APPLICATION OF A MODALITY TO ONE ON MORE AREAS, VIRIANDED         1 per procedure         7.64         5.39           9703 APPLICATION OF A MODALITY TO ONE ON MORE A	96001 MOTION TEST W/FT PRESS MEAS	1 per procedure		100.19	
9701         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; TRACTION MECHANICA.         1 per procedure         13, 27         10.8           9701         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; TRACTION MECHANICA.         1 per procedure         01         -           9701         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; SHAPATINE MATTE PROCESS         1 per procedure         11,37         8.66           97016         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; WIRKINGTONIC DEVICES         1 per procedure         16,67         4.48           9702         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; WIRKINGTONIC DEVICES         1 per procedure         16,67         4.48           9703         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; WIRKINGTONI         1 per procedure         18,67         5.29           0703         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; WIRKINGTONI TANUNAL, EACH 55 MINUTES         1 per procedure         18,37         1108           9703         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; SILTIRANOLIT         1 per procedure         12,32         1102           07933         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; SILTIRANOLIT         1 per procedure         13,32         1102           07933         APPLICATION OF A MODALITY TO OHE OR MORE AREAS; SILTIRANOLITS         1 per procedure         13,22         1102	96002 DYNAMIC SURFACE EMG	1 per procedure		20.16	
97012         APPLICATION OF A MODALITY TO ORE ON MORE AREAS, ESECTIONAL STIMULITON UNATTROBED)         1 per procedure         (1)           97014         APPLICATION OF A MODALITY TO ORE ON MORE AREAS, SECTIONAL STIMULITON UNATTROBED)         1 per procedure         1.1.1         8.66           97014         APPLICATION OF A MODALITY TO ORE ON MORE AREAS, VASOPRELIMATIC DEVICES         1 per procedure         5.81         4.66           97015         APPLICATION OF A MODALITY TO ORE ON MORE AREAS, VASOPRELIMATIC DEVICES         1 per procedure         6.70         4.68           97024         APPLICATION OF A MODALITY TO ORE OF MORE AREAS, INTRAMED         1 per procedure         7.64         3.23           97024         APPLICATION OF A MODALITY TO ORE OF MORE AREAS, INTRAMED         1 per procedure         7.64         3.23           97024         APPLICATION OF A MODALITY TO ORE OF MORE AREAS, INTRAMED         1 per procedure         7.64         3.23           97024         APPLICATION OF A MODALITY TO ORE OF MORE AREAS, INTRAMED         1 per procedure         7.64         3.20           97024         APPLICATION OF A MODALITY TO ORE OF MORE AREAS, INTRAMED         1 per procedure         1.72         1.108           97024         APPLICATION OF A MODALITY TO ORE OF MORE AREAS, INTRAMED         1 per procedure         1 per procedure         1.32           97034         APP	SUPERVISED - DOES NOT REQUIRE DIRECT ONE ON ONE PATIENT CONTACT				
97014         APPLICATION OF A MODALITY TO ORE ON MORE AREAS, SUCREMENTICE PROJECTS         1 per procedure         (1)           97014         APPLICATION OF A MODALITY TO ORE ON MORE AREAS, SVAPAFINE BATH         1 per procedure         5.81         4.04           97014         APPLICATION OF A MODALITY TO ORE ON MORE AREAS, SVAPAFINE BATH         1 per procedure         5.81         4.04           97024         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, UNTHENDY         1 per procedure         6.70         4.88           97024         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, UNTHENDY         1 per procedure         6.70         4.88           97024         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, UNTHENDY         1 per procedure         7.64         5.29           CONSTANT ATENDANCE         REQUISION OF A MODALITY TO ONE ON MORE AREAS, UNTRANOLT         1 per procedure         7.64         5.29           97023         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, UNTRANOLT         1 per procedure         7.64         5.29           97023         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, UNTRANOLT         1 per procedure         7.64         3.032           97033         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, UNTRANOLT         1 per procedure         1 per procedure         7.62         2.123           97033         APPLICATION OF A M			(B)		
97016         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, VASOPREUMATIC EXPLICES         1 per procedure         5.1         4.66           97016         APPLICATION OF A MODALITY TO ONE NO MORE AREAS, VASOPREVMATIC EXPLICES         1 per procedure         5.6         1.021           97020         APPLICATION OF A MODALITY TO ONE NO MORE AREAS, VANARDEN         1 per procedure         6.70         4.48           97025         APPLICATION OF A MODALITY TO ONE NO MORE AREAS, INTERNET         1 per procedure         6.70         4.48           97026         APPLICATION OF A MODALITY TO ONE NO MORE AREAS, INTERNET         1 per procedure         7.64         5.39           97032         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, INTERNET         1 per procedure         7.64         8.39           97033         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, INTERNET         1 for each 15 MIN         1.3.22         1 1.08           97033         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, INTERNET         1 for each 15 MIN         1.3.22         1 0.07           97034         APPLICATION OF A MODALITY TO ONE ON MORE AREAS, INTERNATIONALITY, INTERNATIONALITY ON ONE ON MORE AREAS, INTERNATIONALITY, INTERNATIONALITY ON ONE ON MORE AREAS, INTERNATIONALITY ON ONE ON MORE AREAS, INTERNATIONALITY, INTERNATIONALITY ON ONE ON MORE AREAS, INTERNATIONALITY, INTERNATIONALITY ON ONE ON MORE AREAS, INTERNATIONALITY ON ONE ON MORE AREAS, INTERNATIONALITY ON ONE ON MORE AREAS, INTERNATIONALITY ON ONE					11.08
97013         APPLICATION OF A MODALITY TO DONE OM DRE AREAS, PRAFEN PATH         1 per procedure         5.41         4.04           97012         APPLICATION OF A MODALITY TO DONE OM DRE AREAS, UNTERNOL         1 per procedure         6.70         4.48           97012         APPLICATION OF A MODALITY TO DONE OM MORE AREAS, DIATHERMY         1 per procedure         6.60         4.33           97025         APPLICATION OF A MODALITY TO DONE OM MORE AREAS, DIATHERMY         1 per procedure         7.64         5.39           00005         APPLICATION OF A MODALITY TO DONE OM MORE AREAS, ULTAVIOLET         1 per procedure         7.64         5.39           00005         APPLICATION OF A MODALITY TO DONE OM MORE AREAS, ULTAVIOLET         1 for each 15 MIN         1.32         1.08           97035         APPLICATION OF A MODALITY TO DONE OM MORE AREAS, ULTAVIOLET         1 for each 15 MIN         1.32         1.02           97035         APPLICATION OF A MODALITY TO DONE OM MORE AREAS, ULTAVIOLITA MARTINES, TO LIS MINUTES         1 for each 15 MIN         1.32         1.02           97035         APPLICATION OF A MODALITY TO DONE OM MORE AREAS, ULTAVIOLITA MARTINES, MINUTES         1 for each 15 MIN         1.32         1.02           97035         APPLICATION OF A MODALITY TO DONE OM MORE AREAS, ULTAVIOLITIS MINUTES         1 for each 15 MIN         2.25         1.02           970			(1)		
97022         APPLICATION OF A MODELINY TO ON IG MORE AREAS, WIRIERPOL         1 per procedure         6.70         4.467         10.25           97024         APPLICATION OF A MODELINY TO ON IG MORE AREAS, UNFAVADED         1 per procedure         7.64         4.33           97025         APPLICATION OF A MODALINY TO ON IG MORE AREAS, UNFAVADEF         1 per procedure         7.64         4.33           97035         APPLICATION OF A MODALINY TO ONE ON MORE AREAS, UNTAVIOLET         1 for each 15 MIN         13.72         11.08           97035         APPLICATION OF A MODALINY TO ONE ON MORE AREAS, INFORMEDSIS, ACH 15 MINUTES         1 for each 15 MIN         1 3.22         10.02           97035         APPLICATION OF A MODALINY TO ONE OR MORE AREAS, INFORMEDSIS, ACH 15 MINUTES         1 for each 15 MIN         1 3.22         10.02           97035         APPLICATION OF A MODALINY TO ONE OR MORE AREAS, INFORMEDIS, ACH 15 MINUTES         1 for each 15 MIN         1 3.22         10.02           97035         APPLICATION OF A MODALINY TO ONE OR MORE AREAS, INFORMANTES         1 for each 15 MIN         2 .23         1 .02           97035         APPLICATION OF A MODALINY TO ONE OR MORE AREAS, INFORMANTES         1 for each 15 MIN         2 .23         1 .02         1 .02         1 .02         1 .02         1 .02         1 .02         1 .02         1 .02         1 .02         2 .23<					
97024         APPLICATION OF A MODALITY TO ONE OR MORE ARAS, UNTHERMY         1 per procedure         6.70         4.43           97025         APPLICATION OF A MODALITY TO ONE OR MORE ARAS, UITAVIOLET         1 per procedure         7.64         5.29           CONSTANT ATTENDANCE - REQUIRES DIRECT ONE ON MORE ARAS, SUITAVIOLET         1 for each 15 MIN         13.22         11.08           97023         APPLICATION OF A MODALITY TO ONE OR MORE ARAS, SUITAVIOLET         1 for each 15 MIN         13.22         10.07           97033         APPLICATION OF A MODALITY TO ONE OR MORE ARAS, SUITAVIATION (MANUAL), EACH 15 MINUTES         1 for each 15 MIN         13.22         10.07           97035         APPLICATION OF A MODALITY TO ONE OR MORE ARAS, SUITASOUND, EACH 15 MINUTES         1 for each 15 MIN         13.22         10.07           97035         APPLICATION OF A MODALITY TO ONE OR MORE ARAS, ULTASOUND, EACH 15 MINUTES         1 for each 15 MIN         13.22         10.07           97035         APPLICATION OF A MODALITY TO ONE OR MORE ARAS, ULTASOUND, EACH 15 MINUTES         1 for each 15 MIN         13.28         10.07           97035         APPLICATION OF A MODALITY TO ONE OR MORE ARAS, ULTASOUND, EACH 15 MINUTES, MELANDANCE, MELANDANCE, MELANDANCE         1 for each 15 MIN         1 3.20         10.07           97131         THERAPEUTIC PROCEDURES, NEGOLINEE ARCE, ACH 15 MINUTES, MELANDANCE, MELANDANCE, MELANDANCE         1					
97026       APPLICATION OF A MODALITY TO ONE OR MORE AREAS, INTRARED       1 per procedure       7.64       5.29         97028       APPLICATION OF A MODALITY TO ONE OR MORE AREAS, SUTRAVIOLET       1 for each 15 MIN       13.22       11.08         97032       APPLICATION OF A MODALITY TO ONE OR MORE AREAS, SUTRAVIOLETS       1 for each 15 MIN       13.22       11.08         97033       APPLICATION OF A MODALITY TO ONE OR MORE AREAS, SUTRAVIONESS, LACIT IS MINUTES       1 for each 15 MIN       13.22       10.07         97034       APPLICATION OF A MODALITY TO ONE OR MORE AREAS, CONTRAST BATHS, EACH 15 MINUTES       1 for each 15 MIN       13.22       10.02         97035       APPLICATION OF A MODALITY TO ONE OR MORE AREAS, CONTRAST BATHS, EACH 15 MINUTES       1 for each 15 MIN       32.08       20.74         97035       APPLICATION OF A MODALITY TO ONE OR MORE AREAS, LEVENSOUND, EACH 15 MINUTES       1 for each 15 MIN       32.08       20.74         97039       UNISTED MODALITY TO EN OR MORE AREAS, EACH 15 MINUTES, THEAPEUTIC EXECUSES TO DEVELOP STRENGTH       1       10.2       20.22         97031       MURISTED MODALITY TO EN OR ONE ONE AREAS, EACH 15 MINUTES, NUTES, MURISTED MODALITY TO EN OR MORE AREAS, EACH 15 MINUTES, MURISTED MODALITY TO ENCOREDURE, ONE ON MORE AREAS, EACH 15 MINUTES, MURISTED MODALITY 100 FOR MODE AREAS, EACH 15 MINUTES, ALUATIC THERAPEUTIC EXERCISES TO EXECUTE THEAPEUTIC EXERCISES TO EXECUTE THEAPEUTIC EXERCISES TO EXECUTE THEAPEUTIC EXERCISES TO EXECUTE THEA					
97028         APPLICATION OF A MODALITY TO ONE ON MORE ARAES, ULTRAVIOLET         1 per procedure         7.64         5.29           CONSTANT ATTERDANCE - REQUIRES DIRECT ONE ON ONE PATIENT CONTACT         97032         APPLICATION OF A MODALITY TO ONE ON MORE ARAES, ELECTRICAL STIMULATION (MANUAL), EACH 15 MINUTES         1 for each 15 MIN         13.72         11.08           97033         APPLICATION OF A MODALITY TO ONE ON MORE ARAES, SELECTRICAL STIMULATION (MANUAL), EACH 15 MINUTES         1 for each 15 MIN         13.02         10.07           97035         APPLICATION OF A MODALITY TO ONE ON MORE ARAES, OLITASID NUN, EACH 15 MINUTES         1 for each 15 MIN         3.20         20.24           97036         APPLICATION OF A MODALITY TO ONE ON MORE ARAES, OLITASID NUN, EACH 15 MINUTES         1 for each 15 MIN         3.20         20.24           97038         UNLISTED MODALITY TO ENE ON MORE ARAES, OLITASID NUN, EACH 15 MINUTES         1 for each 15 MIN         3.20         20.24           97030         UNLISTED MODALITY TO ENE ON MORE ARAES, OLITASID NUN, EACH 15 MINUTES         1 for each 15 MIN         3.20         2.22           97110         THESPAPUIC PROCEDUMES, ONE ON MODE AREAS, EACH 15 MINUTES, NUNDAUGURA REDUCATION OF MOVEMENT, INTERCE ON MOTON MORE AREAS, EACH 15 MINUTES, NUNDAUGURA REDUCATION OF MOVEMENT, INTERCE ON MOTON MORE AREAS, EACH 15 MINUTES, NUNDAUGURA REDUCATION OF MOVEMENT, INTERCE ON MOTON MORE AREAS, EACH 15 MINUTES, AUD FORMEDIATE MUNCHANDA REAS AND MORE AREAS, EACH 15 MINUTES, AUD FORMEDIATE MUNCHANDA REAS A			(R)		
CONSTANT ATTENDANCE - REQUIRES DIRECT ONE ON ONE PATIENT CONTACT           97032         APPLICATION OF A MODALITY TO ONE ON MORE AREAS; ELECTICAL STIMULATION (MANUAL), EACH 15 MINUTES         1 for each 15 MIN         13.22           97033         APPLICATION OF A MODALITY TO ONE ON MORE AREAS; ELECTICAL STIMULATION (MANUAL), EACH 15 MINUTES         1 for each 15 MIN         13.02           97034         APPLICATION OF A MODALITY TO ONE ON MORE AREAS; LICETINGSUIDIN, EACH 15 MINUTES         1 for each 15 MIN         13.02           97035         APPLICATION OF A MODALITY TO ONE ON MORE AREAS; HUBBAND TANK, EACH 15 MINUTES         1 for each 15 MIN         32.08           97036         APPLICATION OF A MODALITY TO ONE ON MORE AREAS; HUBBAND TANK, EACH 15 MINUTES         1 for each 15 MIN         32.08           97036         APPLICATION OF A MODALITY TO ONE ON MORE AREAS; HUBBAND TANK, EACH 15 MINUTES         1 for each 15 MIN         32.08           97101         THERAPEUTIC PROCEDURE, ONE ON MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR         1 for each 15 MIN         27.56         21.23           97112         THERAPEUTIC ROCEDURE, ONE ON MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR         1 for each 15 MIN         34.72         25.30           97113         THERAPEUTIC RECOLURE, ONE ON MORE AREAS, EACH 15 MINUTES; MUSCUMUSCULAR         1 for each 15 MIN         24.25           97121         THERAPEUTIC INFORCEDURE, ONE ON MORE AREAS, EACH 15 MINUTES; MUSC			(11)		
97033       APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CONTRAST BATHS, EACH 15 MINUTES       1 for each 15 MIN       17.88       13.31         97034       APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CONTRAST BATHS, EACH 15 MINUTES       1 for each 15 MIN       13.32       10.07         97035       APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HUBBAD TANK, EACH 15 MINUTES       1 for each 15 MIN       32.08       20.74         97035       APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HUBBAD TANK, EACH 15 MINUTES       1 for each 15 MIN       32.08       20.74         97035       APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CALL 15 MINUTES       1 for each 15 MIN       32.08       20.74         97035       APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CALL 15 MINUTES       1 for each 15 MIN       32.08       20.74         97131       THERAPEUTIC ENCODURE; ONE OR MORE AREAS; CALL 15 MINUTES; THERAPEUTIC ENCODURE;       1 for each 15 MIN       32.05       23.57         97131       THERAPEUTIC ENCODURE; ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THEMAPY WITH THERAPEUTIC ENCODUR;       1 for each 15 MIN       34.72       25.30         97131       THERAPEUTIC ENCEDURE; ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THEMAPY WITH THERAPEUTIC ENCEST       1 for each 15 MIN       24.23         97131       THERAPEUTIC ENCEDURE; ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THEMAPY WITH THERAPEUTIC ENCEST       1 for each 1					
97034 APPLCATION OF A MODALITY TO ONE OR MORE AREAS, CONTRAST BATHS, EACH 5 MINUTES 1 for each 15 MIN 13.02 10.07 97035 APPLCATION OF A MODALITY TO ONE OR MORE AREAS, ULTRASOUND, EACH 15 MINUTES 1 for each 15 MIN 13.02 10.27 97038 APPLCATION OF A MODALITY TO ONE OR MORE AREAS, ULTRASOUND, EACH 15 MINUTES 1 for each 15 MIN 13.02 10.27 97039 UNLISTED MODALITY (SPECIF YPE AND TIME IF CONSTANT ATTENDANCE) 1 for each 15 MIN (C) - <b>THERAPEUTC PROCEDURES, TOME ON MORE AREAS, ACH 15 MINUTES, THERAPEUTC EXERCISES TO DEVELOP STRENGTH</b> AND ENDURANCE, RANGE OF MOTION AND FLEXIBULITY 1 FEARPEUTC EXERCISES TO DEVELOP STRENGTH AND ENDURANCE, RANGE OF MOTION AND FLEXIBULITY BRIANCE, COORDINATON, KINSTHETIC SINK, FOSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR REEDUCATION OF MOVEMENT, BRIANCE, COORDINATON, KINSTHETIC SINK, FOSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR REEDUCATION OF MOVEMENT, BRIANCE, COORDINATON, KINSTHETIC SINK, FOSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR REEDUCATION OF MOVEMENT, BRIANCE, COORDINATON, KINSTHETIC SINK, FOSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR 97113 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES, GAIT TRAINING (INCLUDES STAIR CLIMBING) 97123 THERAPEUTIC ROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES, GAIT TRAINING (INCLUDES STAIR CLIMBING) 97124 THERAPEUTIC ROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES, GAIT TRAINING (INCLUDES STAIR CLIMBING) 97125 THERAPEUTIC ROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES, GAIT TRAINING (INCLUDES STAIR CLIMBING) 97126 THERAPEUTIC ROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES, GAIT TRAINING (INCLUDES STAIR CLIMBING) 97127 THERAPEUTIC ROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES, GAIT TRAINING (INCLUDES STAIR CLIMBING) 97129 THERAPEUTIC ROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES, MASAGE, INCLUDING EFFLEURAGE, PETRISAGE MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGINE THERAPEUTIC EXERCISES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGINE TIME OR SCHEDULES, INITIATING, ORGANIZING AND 97120 THERAPEUTIC ROCEDURE, OR OR MORE AREAS, EACH 1	97032 APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (MANUAL), EACH 15 MINUTES	1 for each 15 MIN		13.72	11.08
97035       APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ULTRASOUND, EACH 15 MINUTES       1 for each 15 MIN       13.32       10.22         97036       APPLICATION OF A MODALITY CONE OR MORE AREAS; HUBBARD TAWK, EACH 15 MINUTES       1 for each 15 MIN       22.08       20.74         97035       APPLICATION OF A MODALITY CONE OR MORE AREAS; HUBBARD TAWK, EACH 15 MINUTES       1 for each 15 MIN       (C)	97033 APPLICATION OF A MODALITY TO ONE OR MORE AREAS; IONTOPHORESIS, EACH 15 MINUTES	1 for each 15 MIN		17.88	13.31
97336       APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HUBBARD TANK, EACH 15 MINUTES       1 for each 15 MIN       32.08       20.74         97338       UNISITED MODALITY (SECIPT YTPE AND TIME IF CONSTANT ATTENDANCE)       1 for each 15 MIN       (C)       -         97110       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC EXERCISES TO DEVELOP STRENGTH       1 for each 15 MIN       27.55       21.23         97112       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC EXERCISES TO DEVELOP STRENGTH       1 for each 15 MIN       36.65       23.57         97112       THERAPEUTIC EXECUBLE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, KINESTHETIC SENSE, POSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, KINESTHETIC SENSE, POSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR REEDUCATION NEUROMUSCULAR REEDUCATION NEUROMUSCULAR REEDUCATION NEUROMUSCULAR READUTIC EXERCISES       1 for each 15 MIN       34.72       25.30         97113       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAIT TRAINING (INCLUDES STAIR CLIMBING)       1 for each 15 MIN       24.23       1 for each 15 MIN       24.24       1 for each 15 MIN       28.16       1 990         97124       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRISSAGE       1 for each 15 MIN       21.22       1 for each 15 MIN       21.23         97124       THERAPEUTIC PROCED	97034 APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CONTRAST BATHS, EACH 15 MINUTES	1 for each 15 MIN		13.02	10.07
97039 UNLISTED MODALITY (SPECIFY TYPE AND TIME IF CONSTANT ATTENDANCE) 1 for each 15 MIN (c)	97035 APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ULTRASOUND, EACH 15 MINUTES	1 for each 15 MIN		13.32	10.22
THERAPEUTIC PROCEDURES - REQUIRES DIRECT ONE ON ONE PATIENT CONTACT         97110       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC EXERCISES TO DEVELOP STRENGTH         11       for each 15 MIN       27.56       21.23         97112       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REDUCATION OF MOVEMINT, BALANCE, CORDINATION, NINSTHIETIC SINSE, POPRICEPTION-NEUROMUSCULAR REDUCATION OF MOVEMINT, BALANCE, CORDINATION, NINSTHIETIC SINSE, POPRICEPTION-NEUROMUSCULAR REDUCATION OF MOVEMENT, BALANCE, CORDINATION, NINSTHIETIC SINSE, POPRICEPTION, NEUROMUSCULAR REDUCTION SING BALANCE, CORDENSING, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKING, COMPERSISTON), ATTENTION, MEMORY, REASONING, EVECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONIN, EAG, ATTENTION, MEMORY, REASONING, EVECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING, AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       11 nitial 15 MIN       21.22         97130       THERAPEUTIC REVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       10 for each 15 MIN       20.28		1 for each 15 MIN		32.08	20.74
97110       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC EXERCISES TO DEVELOP STRENGTH AND ENDURANCE, RANGE OF MOTION AND FEXBILITY       1 for each 15 MIN       27.56       21.23         97112       THERAPEUTIC ROCEDURE, ONE OR MORE RAES, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, KINESTHETIC SENSE, POSTURE, AND PROPRIOCEPTION. NEUROMUSCULAR       1 for each 15 MIN       30.65       23.57         97113       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THERAPEUTIC EXERCISES       1 for each 15 MIN       34.72       25.30         97116       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASAGE, MICULIONS STAIR CLIMBING)       1 for each 15 MIN       24.75       21.23         97123       THERAPEUTIC ROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASAGE, MICULIONS GFFLEURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKINS, COMPRESSION, PERCUSSION)       1 for each 15 MIN       28.16       19.90         97123       THERAPEUTIC INTERVENTIONS THAT FOCUS ON COMITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING, AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       1 initial 15 MIN       21.22         97130       THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, REAGENER PRAGMATIC FUNCTIONING, INCOMPARTAET GURAR DA SEQUENCING TASKS)       1 for each 15 MIN	97039 UNLISTED MODALITY (SPECIFY TYPE AND TIME IF CONSTANT ATTENDANCE)	1 for each 15 MIN	(C)	-	
AND ENDURANCE, RANGE OF MOTION AND FLEXIBILITY 1010 (27.56 21.23 97112 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, KINESTHETIC SENES, POSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR 97113 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AUJATIC THERAPY WITH THERAPEUTIC EXERCISES 97113 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AUJATIC THERAPY WITH THERAPEUTIC EXERCISES 97114 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASTAGE, INCLUDING EFFLURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKING, COMPRESSION, PERCUSSION) 11 for each 15 MIN 27.56 21.23 97124 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASTAGE, INCLUDING EFFLURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKING, COMPRESSION, PERCUSSION) 11 for each 15 MIN 28.16 19.90 97129 THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., CATENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., CATENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., CATENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTION (E.G., ATTENTION, MEMORY, REAS	•				
97112 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, KINESTHETIC SENSE, POSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR 97113 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAUT THERAPEUTIC EXERCISES 97116 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAUT THAINING (INCLUDES STAIR CLIMBING) 1 for each 15 MIN 34.72 25.30 97124 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAUT THAINING (INCLUDES STAIR CLIMBING) 1 for each 15 MIN 27.56 21.23 97124 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKING, COMPRESSION, PERCUSSION) 97129 THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) 0115 THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) 02.08 97139 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY) 1 for each 15 MIN 20.28 97140 MANUAL THERAPY TECHNIQUES (E.G., MOBILIZATION/MANUAL LYMPHATIC DRAINAGE, MANUAL TTRACTION), ORO OR REGINS, EACH 15 MINUTES 1 per procedure 93.88 72.51 97161 PHYSICAL THERAPY EVALUATION NODERATE COMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97163 PHYSICAL THERAPY EVALUATION NODERATE COMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97164 PHYSICAL THERAPY EVALUATION NODERATE COMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97165 OCCUPATIONAL THERAPY EVALUATION HIGH COMPLEXITY 20 MINUTES 1 per procedure 96.24 73.69 97167 OCCUPATIONAL THERAPY EVALUATI		1 for each 15 MIN		27 56	21 23
BALANCE, COORDINATION, KINSTHETIC SENSE, POSTURE, AND PROPRIOCEPTION-NEUROMUSCULAR       1 for each 15 MIN       30.65       23.57         97113       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THERAPY WITH THERAPEUTIC EXERCISES       1 for each 15 MIN       34.72       25.30         97116       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAT TRAINING (INCLUDING EFFLUERAGE, PETRISSAGE       1 for each 15 MIN       27.56       21.23         97124       THERAPEUTIC INCREMENT, OCMPRESSION, PERCUSSION)       1 for each 15 MIN       28.16       19.90         97129       THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, ROBING PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       1 for each 15 MIN       21.22         97139       THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, ROBANGT FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, ROBANGT FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       20.28         97139       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECICIY)       1 for each 15 MIN       20.28         97130       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECICIY)				27100	21120
1 for each 15 MIN34.7225.3097112THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKING, COMPRESSION, PERCUSSION)1 for each 15 MIN28.1619.9097129THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASSK)Initial 15 MIN21.2297130THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASSK)1 for each 15 MIN21.2297130THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)20.2897130THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES1 for each 15 MIN20.2897131THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES1 per procedure93.8872.5197150THERAPEUTIC PROCEDURE (SIG OND! (2 OR MORE INDIVIDUALS)1 per procedure93.8872.51971510THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS)1 per procedure93.8872.51971520THERAPE				30.65	23.57
97116 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAIT TRAINING (INCLUDES STAIR CLIMBING) 1 for each 15 MIN 27.56 21.23 97124 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKING, COMPRESSION, PERCUSSION) 97129 THERAPEUTIC INTERVISIONS THAT FOLUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) Initial 15 MIN 21.22 97130 THERAPEUTIC INTERVISIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCITON, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPRISATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY) 1 for each 15 MIN 20.28 97130 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY) 1 for each 15 MIN 26.03 20.14 TRACTION), ONE OR MORE REGIONS, EACH 15 MINUTES 1 per procedure 16.79 13.325 97161 PHYSICAL THERAPY EVALUATION NORE INDEX INTES 1 per procedure 93.88 72.51 97162 PHYSICAL THERAPY EVALUATION MORE RECOMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97163 PHYSICAL THERAPY EVALUATION NORE RATE COMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97164 PHYSICAL THERAPY EVALUATION MORE RATE COMPLEXITY 20 MINUTES 1 per procedure 96.24 73.69 97165 OCCUPATIONAL THERAPY EVALUATION HIGH COMPLEXITY 20 MINUTES 1 per procedure 96.24 73.69 97166 OCCUPATIONAL THERAPY EVALUATION HIGH COMPLEXITY 20 MINUTES 1 per procedure 96.24 73.69 97166 OCCUPATIONAL THERAPY EVALUATION HIGH COMPLEXITY 20 MINUTES 1	97113 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THERAPY WITH THERAPEUTIC EXERCISES				25.00
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AND/OR TAPOTEMENT (STROKING, COMPRESSION, PERCUSSION) 1 for each 15 MIN 28.16 19.90 97129 THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) 1 Initial 15 MIN 21.22 97130 THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) EACH AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) EACH ON MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY) 1 for each 15 MIN 20.28 97139 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY) 1 for each 15 MIN 26.03 20.14 97150 THERAPEUTIC PROCEDURES, ONO RORE AREAS, EACH 15 MINUTES 1 for each 15 MIN 26.03 20.14 97150 THERAPEUTIC PROCEDURES, EACH 15 MINUTES 1 for each 15 MIN 26.03 20.14 97161 PHYSICAL THERAPY EVALUATION LOW COMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97163 PHYSICAL THERAPY EVALUATION NODERATE COMPLEXITY 30 MINUTES 1 per procedure 93.88 72.51 97164 PHYSICAL THERAPY EVALUATION NODER STABLISHED PLAN OF CARE 1 per procedure 93.88 72.51 97165 OCCUPATIONAL THERAPY EVALUATION MORE RESTABLISHED PLAN OF CARE 1 per procedure 96.24 73.69 97166 OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97166 OCCUPATIONAL THERAPY REVALUATION MORE ARE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97167 OCCUPATIONAL THERAPY REVALUATION MORE RATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97168 OCCUPATIONAL THERAPY REVALUATION MORE ARE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97169 OCCUPATIONAL		1 IOI Each 15 Milly		27.50	21.25
EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       Initial 15 MIN       21.22         97130       THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       Each additional 15 MIN       20.28         97139       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY)       1 for each 15 MIN       20.32         97140       MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL       1 for each 15 MIN       26.03       20.14         97150       THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALIS)       1 per procedure       93.88       72.51         97161       PHYSICAL THERAPY EVALUATION NODERATE COMPLEXITY 20 MINUTES       1 per procedure       93.88       72.51         97162       PHYSICAL THERAPY EVALUATION NOBERATE COMPLEXITY 20 MINUTES       1 per procedure       93.88       72.51         97163       PHYSICAL THERAPY EVALUATION MOBERATE COMPLEXITY 20 MINUTES       1 per procedure       93.88       72.51         97164       PHYSICAL THERAPY EVALUATION NOR ERABISHED PLAN OF CARE       1 per procedure		1 for each 15 MIN		28.16	19.90
MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) Initial 15 MIN 21.22 97130 THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) Each additional 15 MIN 20.28 97139 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIPY) 1 for each 15 MIN (C) - 97140 MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACTION), ONE OR MORE REGIONS, EACH 15 MINUTES 1 LYMPHATIC DRAINAGE, MANUAL TRACTION, ONE OR MORE REGIONS, EACH 15 MINUTES 1 for each 15 MIN 26.03 20.14 97150 THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS) 1 per procedure 16.79 13.25 97161 PHYSICAL THERAPY EVALUATION LOW COMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97162 PHYSICAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 93.88 72.51 97163 PHYSICAL THERAPY EVALUATION HIGH COMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97164 PHYSICAL THERAPY EVALUATION NODERATE COMPLEXITY 30 MINUTES 1 per procedure 93.88 72.51 97165 OCCUPATIONAL THERAPY EVALUATION NODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97165 OCCUPATIONAL THERAPY EVALUATION NODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97167 OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97167 OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97168 OCCUPATIONAL THERAPY EVALUATION HIGH COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97167 OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97168 OCCUPATIONAL THERAPY EVALUATION FOR ESTABLISHED PLAN OF CARE 1 per procedure 96.24 73.69 97169 OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEX	97129 THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (E.G., ATTENTION, MEMORY, REASONING,				
SEQUENCING TASKS)       Initial 15 MIN       21.22         97130       THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       Each additional 15 MIN       20.28         97139       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY)       1 for each 15 MIN       (C)       -         97140       MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL       1 for each 15 MIN       26.03       20.14         97150       THERAPEUTIC PROCEDURE (SO, SEACH 15 MINUTES)       1 per procedure       93.88       72.51         97161       PHYSICAL THERAPY EVALUATION LOW COMPLEXITY 20 MINUTES       1 per procedure       93.88       72.51         97162       PHYSICAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES       1 per procedure       93.88       72.51         97163       PHYSICAL THERAPY EVALUATION HIGH COMPLEXITY 20 MINUTES       1 per procedure       93.88       72.51         97164       PHYSICAL THERAPY EVALUATION HOR OSTABLISHED PLAN OF CARE       1 per procedure       93.88       72.51         97164       PHYSICAL THERAPY EVALUATION HOR COMPLEXITY 20 MINUTES       1 per procedure       96.24					
97130 THERAPEUTIC INTERVENTIONS THAT FOCUS ON COGNITIVE FUNCTION (EG, ATTENTION, MEMORY, REASONING, EXECUTIVE FUNCTION, PROBLEM SOLVING, AND/OR PRAGMATIC FUNCTIONING) AND COMPENSATORY STRATEGIES TO MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS) Each additional 15 MIN 20.28 97139 THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY) 1 for each 15 MIN (C) - 97140 MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACTION), ONE OR MORE REGIONS, EACH 15 MINUTES 97150 THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS) 1 per procedure 16.79 13.25 97161 PHYSICAL THERAPY EVALUATION LOW COMPLEXITY 20 MINUTES 1 per procedure 93.88 72.51 97162 PHYSICAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 93.88 72.51 97163 PHYSICAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 93.88 72.51 97164 PHYSICAL THERAPY EVALUATION FOR ESTABLISHED PLAN OF CARE 1 per procedure 93.88 72.51 97165 OCCUPATIONAL THERAPY EVALUATION NODERATE COMPLEXITY 30 MINUTES 1 per procedure 93.88 72.51 97166 OCCUPATIONAL THERAPY EVALUATION NODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97166 OCCUPATIONAL THERAPY EVALUATION NODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97166 OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97166 OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97168 OCCUPATIONAL THERAPY EVALUATION HIGH COMPLEXITY 30 MINUTES 1 per procedure 96.24 73.69 97168 OCCUPATIONAL THERAPY EVALUATION FOR ESTABLISHED PLAN OF CARE 1 per procedure 96.24 73.69 97168 OCCUPATIONAL THERAPY REEVALULATION FOR ESTABLISHED PLAN OF CARE 1 per procedure 96.24 73.69 97168 OCCUPATIONAL THERAPY REEVALULATION FOR ESTABLISHED PLAN OF CARE 1 per procedure 96.24 73.69		Initial 15 MIN		21.22	
MANAGE THE PERFORMANCE OF AN ACTIVITY (E.G., MANAGING TIME OR SCHEDULES, INITIATING, ORGANIZING AND SEQUENCING TASKS)       Each additional 15 MIN       20.28         97139       THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC PROCEDURE (SPECIFY)       1 for each 15 MIN       (C)         97140       MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACTION), ONE OR MORE REGIONS, EACH 15 MINUTES       1 for each 15 MIN       26.03       20.14         97150       THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS)       1 per procedure       16.79       13.25         97161       PHYSICAL THERAPY EVALUATION NODERATE COMPLEXITY 20 MINUTES       1 per procedure       93.88       72.51         97163       PHYSICAL THERAPY EVALUATION HIGH COMPLEXITY 30 MINUTES       1 per procedure       93.88       72.51         97164       PHYSICAL THERAPY EVALUATION FOR ESTABLISHED PLAN OF CARE       1 per procedure       93.88       72.51         97165       OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEXITY 20 MINUTES       1 per procedure       93.48       72.51         97164       PHYSICAL THERAPY EVALUATION HIGH COMPLEXITY 20 MINUTES       1 per procedure       96.24       73.69         97165       OCCUPATIONAL THERAPY EVALUATION MODERATE COMPLEXITY 30 MINUTES       1 per procedure       96.24       73.69         97166       OC					
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97168 OCCUPATIONAL THERAPY REEVALULATION FOR ESTABLISHED PLAN OF CARE       1 per procedure       66.24       49.15         97530 THERAPEUTIC ACTIVITIES, DIRECT (ONE ON ONE) PATIENT CONTACT BY THE PROVIDER (USE OF DYNAMIC ACTIVITIES TO       66.24       49.15					
97530 THERAPEUTIC ACTIVITIES, DIRECT (ONE ON ONE) PATIENT CONTACT BY THE PROVIDER (USE OF DYNAMIC ACTIVITIES TO					
		Thei hioreanie		00.24	49.15
	IMPROVE FUNCTIONAL PERFORMANCE), EACH 15 MINUTES	1 for each 15 MIN		32.84	23.70



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CODE	DESCRIPTION	UB-04 UNIT	Status Code (if other than "A")	FINAL FEE SCHEDULE AMOUNT (1)	Payment under 50% MPPR for Always Therapy Codes (3)
97533	SENSORY INTERGRATIVE TECHNIQUES TO ENHANCE SENSORY PROCESSING AND PROMOTE ADAPTIVE RESPONSES TO				
	ENVIRONMENTAL DEMANDS, DIRECT (ONE-ON-ONE) PATIENT CONTACT BY THE PROVIDER, EACH 15 MINUTES	1 for each 15 MIN		56.53	26.20
97535	SELF CARE/HOME MANAGEMENT TRAINING (EG, ACTIVITIES OF DAILY LIVING (ADL) AND COMPENSATORY TRAINING, MEAL PREPARATION, SAFETY PROCEDURES, AND INSTRUCTIONS IN USE OF ADAPTIVE EQUIPMENT) DIRECT ONE ON ONE CONTACT BY PROVIDER, EACH 15 MINUTES	1 for each 15 MIN		56.53	36.20
		1 for each 15 MIN		30.51	22.70
97537	COMMUNITY/WORK REINTEGRATION TRAINING (EG, SHOPPING, TRANSPORTATION, MONEY MANAGEMENT, AVOCATIONAL ACTIVITIES AND/OR WORK ENVIRONMENT/ MODIFICATION ANALYSIS, WORK TASK ANALYSIS), DIRECT ONE ON ONE CONTACT BY PROVIDER, EACH 15 MINUTES	1 for each 15 MIN		30.30	23.09
97542	WHEELCHAIR MANAGEMENT/PROPULSION TRAINING, EACH 15 MINUTES	1 for each 15 MIN		29.42	22.64
97750	PHYSICAL PERFORMANCE TEST OR MEASUREMENT (EG, MUSCULOSKELETAL, FUNCTIONAL CAPACITY), WITH WRITTEN				
	REPORT, EACH 15 MINUTES	1 for each 15 MIN		31.69	23.29
	ORTHOTIC MANAGEMENT AND TRAINING, INITIAL ENCOUNTER	1 for each 15 MIN		43.32	29.91
	PROSTHETIC TRAINING, INITIAL ENCOUNTER	1 for each 15 MIN		38.31	27.41
	ORTHOTIC/PROSTHETIC MANAGEMENT AND TRAINING, SUBSEQUENT ENCOUNTERS	1 for each 15 MIN		47.10	31.48
	OCEDURES ASSISTIVE TECHNOLOGY ASSESS	1 for each 15 MIN		26.05	20.20
	ACTIVE WOUND CARE/20 CM OR <	1 for each 15 MIN 1 per procedure		36.05 90.52	28.38
	ACTIVE WOUND CARE >20 CM	1 per procedure		90.52 41.12	
	WOUND(S) CARE NON-SELECTIVE	1 per procedure	(B)	41.12	
	NEG PRESS WOUND TX, < 50 CM	1 per procedure	(0)	39.93	
	NEG PRESS WOUND TX, > 50 CM	1 per procedure		47.44	
		i per procedure			
ONLINE DIG	ITAL EVALUATION AND MANAGEMENT				
98970	ONLINE DIGITAL E/M FOR ESTABLISHED PATIENT, UP TO 7 DAYS; 5-10 CUMULATIVE MINUTES	1 per procedure		11.07	
	ONLINE DIGITAL E/M FOR ESTABLISHED PATIENT, UP TO 7 DAYS; 11-20 CUMULATIVE MINUTES	1 per procedure		20.83	
98972	ONLINE DIGITAL E/M FOR ESTABLISHED PATIENT, UP TO 7 DAYS; 21 OR MORE CUM. MINUTES REMOTE ASSESSMENT OF RECORDED VIDEO AND/OR IMAGES SUBMITTED BY ESTABLISHED PATIENT INCLUDING INTERPRETATION AND FOLLOW-UP WITHIN 24 BUSINESS HOURS, NOT ORIGINATING FROM A RELATED SERVICE	1 per procedure		31.57	
G2250	PROVIDEDWITH THE PREVIOUS 7 DAYS NOR LEADING TO A SERVICE OR PROCEDURE WITHIN THE NEXT 24 HOURS	1 per procedure		11.46	
G2251	BRIEF COMMUNICATOIN TECHNOLOGY BASED SERVICE, ESTABLISHED PATIENT, NOT ORIGINATING FROM A RELATED E/M SERVICE PROVIDED WITHIN PREVIOUS 7 DAYS	1 per procedure		13.47	
DROCEDUR					
	S/PROFESSIONAL SERVICES (TEMPORARY) THERAPEUTIC PROCEEDURE STRENGTH ENDURANCE	1 per procedure		10.35	
	OTH RESP PROCEEDURE INDIVIDUAL	1 per procedure		9.17	
	OTH RESP PROCEEDURE GROUP	1 per procedure		11.83	
	ELECTRICAL STIMULATION FOR PRESSURE ULCERS, UNATTENDED	1 per procedure		10.87	8.51
	ELECTRICAL STIMULATION FOR OTHER THAN PRESSURE ULCERS, UNATTENDED	1 per procedure		11.76	8.96
	ELECTROMAGNETIC THERAPY FOR ULCERS	1 per procedure		9.64	5.96
"SOMETIME	S" THERAPY CODES				
	NEG PRES WOUND <=50 SQ CM			295.76	
	NEG PRES WOUND >50 SQ CM			308.69	
98966	TELEPHONE ASSESSMENT AND MANAGEMENT PROVIDED BY QUALIFIED NONPHYSICIAN PROFESSIONAL TO ESTABLISHED PATIENT, PARENT OR GUARDIAN FROM A RELATED ASSESSMENT PROVIDED WITHIN PREVIOUS 7 DAYS NO LEADIN TO AN				
98967	ASSESSMENT WITH THE NEXT 24 HOURS; 5-10 MINUTES OF MEDICAL DISCUSSION TELEPHONE ASSESSMENT AND MANAGEMENT PROVIDED BY QUALIFIED NONPHYSICIAN PROFESSIONAL TO ESTABLISHED PATIENT, PARENT OR GUARDIAN FROM A RELATED ASSESSMENT PROVIDED WITHIN PREVIOUS 7 DAYS NO LEADIN TO AN			12.55	
98968	ASSESSMENT WITH THE NEXT 24 HOURS; 11-20 MINUTES OF MEDICAL DISCUSSION TELEPHONE ASSESSMENT AND MANAGEMENT PROVIDED BY QUALIFIED NONPHYSICIAN PROFESSIONAL TO ESTABLISHED			23.32	
98975	PATIENT, PARENT OR GUARDIAN FROM A RELATED ASSESSMENT PROVIDED WITHIN PREVIOUS 7 DAYS NO LEADIN TO AN ASSESSMENT WITH THE NEXT 24 HOURS; 21-30 MINUTES OF MEDICAL DISCUSSION REMOTE THERAPEUTIC MONITORING (E.G., RESPIRATORY SYSTEM STATUS, MUSCULOSKELETAL SYSTEM STATUS,			32.30	
98976	THERAPY ADHERENCE, THERAPY RESPONSE); INITIAL SET-UP AND PATIENT EDUCATION ON USE OF EQUIPMENT REMOTE THERAPEUTIC MONITORING (E.G., RESPIRATORY SYSTEM STATUS, MUSCULOSKELETAL SYSTEM STATUS, THERAPY ADHERENCE, THERAPY RESPONSE); DEVICE(S) SUPPLY WITH SCHEDULED (E.G., DAILY) RECORDING(S) AND/OR			18.05	
	PROGRAMMED ALERT(S) TRANSMISSION TO MONITOR RESPIRATORY SYSTEM, EACH 30 DAYS			39.23	
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				OHIO	
CODE	DESCRIPTION	UB-04 UNIT	Status Code (if other than "A")	FINAL FEE SCHEDULE AMOUNT (1)	Payment under 50% MPPR for Always Therapy Codes (3)
0807	7 REMOTE THERAPEUTIC MONITORING (E.G., RESPIRATORY SYSTEM STATUS, MUSCULOSKELETAL SYSTEM STATUS,				
98980	THERAPY ADHERENCE, THERAPY RESPONSE); DEVICE(S) SUPPLY WITH SCHEDULED (E.G., DAILY) RECORDING(S) AND/OR PROGRAMMED ALERT(S) TRANSMISSION TO MONITOR MUSCULOSKELETAL SYSTEM, EACH 30 DAYS ) REMOTE THERAPEUTIC MONITORING TREATMENT MANAGEMENT SERVICES, PHYSICIAN/OTHER QUALIFIED HEALTH CARE PROFESSIONAL TIME IN A CALENDAR MONTH REQUIRING AT LEAST ONE INTERACTIVE COMMUNICATION WITH THE PATIENT/CAREGIVER DURING THE CALENDAR MONTH; FIRST 20 MINUTES L REMOTE THERAPEUTIC MONITORING TREATMENT MANAGEMENT SERVICES, PHYSICIAN/OTHER QUALIFIED HEALTH CARE			39.23 47.62	
	PROFESSIONAL TIME IN A CALENDAR MONTH REQUIRING AT LEAST ONE INTERACTIVE COMMUNICATION WITH THE PATIENT/CAREGIVER DURING THE CALENDAR MONTH; EACH ADDITIONAL 20 MINUTES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)			37.57	
	(b) - DUINDLED CODE. PATIMENT FOR COVERED SERVICES IS ALWATS DUINDLED INTO PATIMENT FOR OTHER SERVICES NOT SPECIFIED. IF RVUS ARE SHOWN, THEY ARE NOT USED FOR MEDICARE PAYMENT. IF THESE SERVICES ARE COVERED, PAYMENT FOR THEM IS SUBSUMED BY THE PAYMENT FOR THE SERVICES TO WHICH THEY ARE INCIDENT. (AN EXAMPLE IS A TELEPHONE CALL FROM A HOSPITAL NURSE REGARDING CARE OF A PATIENT.)				
	(C) - CARRIER-PRICED CODE. CARRIERS WILL ESTABLISH RVUS AND PAYMENT AMOUNTS FOR THESE SERVICES, GENERALLY ON A CASE- BY-CASE BASIS FOLLOWING REVIEW OF DOCUMENTATION, SUCH AS AN OPERATIVE REPORT.				
	(N) - THESE SERVICES ARE NOT COVERED BY MEDICARE.				
	(I) - NOT VALID FOR MEDICARE PURPOSES. MEDICARE USES ANOTHER CODE FOR THE REPORTING OF, AND THE PAYMENT FOR THESE SERVICES. (CODE NOT SUBJECT TO A 90-DAY GRACE PERIOD).				
	(Q) - THERAPY FUNCTIONAL INFORMATION CODE - USED FOR REQUIRED REPORTING PURPOSES ONLY				
	(R) - RESTRICTED COVERAGE. SPECIAL COVERAGE INSTRUCTIONS APPLY. IF THE SERVICE IS COVERED AND NO RVUS ARE SHOWN, IT IS CARRIER-PRICED.				
	(X) - EXCLUSION BY LAW. THESE CODES REPRESENT AN ITEM OR SERVICE THAT IS NOT WITHIN THE DEFINITION OF "PHYSICIANS' SERVICES" FOR PHYSICIAN FEE SCHEDULE PAYMENT PURPOSES.				
	(1) THE FEE SCHEDULE WAS CALCULATED USING THE RELATIVE VALUE UNITS (RVUS) AND GEOGRAPHIC PRACTICE UNITS FROM THE DECEMBER 9, 2024 FEDERAL REGISTER.				
	(2) LWS ASSIGNS TEMPORART & LODES TO PROLEDURES AND SERVICES WHICH ARE BEING REVIEWED PRIOR TO INCLUSION IN THE AMERICAN MEDICAL ASSOCIATION 'S CURRENT PROCEDURAL TERMINOLOGY (CPT). ONCE THE CPT CODES FOR THESE SERVICES AND PROCEDURES ARE ASSIGNED, THE G CODES ARE REMOVED FROM THIS SECTION.				
	EFFECTIVE JANUARY 1, 2011. IF TWO OR MORE OF THESE CODES, INCLUDING MULTIPLE UNITS OF A SINGLE CODE, ARE FURNISHED TO A SINGLE PATIENT BY A SINGLE PROVIDER ON ONE DATE, THE PRACTICE COMPONENT OF ALL PROCEDURES SUBSEQUENT TO THE FIRST PROCEDURE WILL BE REDUCED BY 20% FOR SERVICES PROVIDED IN AN OFFICE SETTING AND 25% FOR SERVICES PROVIDED IN AN INSTITUATIONAL SETTING. CMS CONSIDERS THE PROCEDURE WITH THE HIGHEST PRACTICE COMPONENT TO BE THE FIRST PROCEDURE PERFORMED AND WILL PAY THAT PROCEDURE IN FULL. PAYMENT SHOWN ABOVE ASSUMES SERVICES PROVIDED IN AN INSTITUTIONAL SETTING. EFFECTIVE APRIL 1, 2013, THE REDUCTION WAS INCREASED TO 50% FOR ALL "ALWAYS THERAPY" CODES, REGARDLESS OF THE SETTING.				
NOTE:	The CPT codes listed above represent therapies billed with revenue codes 42x (physical therapy), 43x (occupational therapy), 44x				
	(speech-language pathology) as outlined in PM A-02-118 dated 11/8/02 and subsequent CMS transmittals.				