

PODIATRY MAXIMUM ALLOWABLE FEE SCHEDULE

THIS IS YOUR WISCONSIN MEDICAID MAXIMUM ALLOWABLE FEE SCHEDULE, WHICH IS IN EFFECT AS OF THE DATE OF THIS REPORT. WISCONSIN MEDICAID CERTIFIED PROVIDERS WILL BE REIMBURSED FOR SERVICES PROVIDED TO PROGRAM RECIPIENTS AT THE LOWER OF THEIR USUAL AND CUSTOMARY CHARGE, OR THE MAXIMUM ALLOWABLE FEE.

SERVICES REIMBURSED BASED ON PROVIDER SPECIFIC (CONTRACTED RATES) AND REGIONAL OR SPECIALTY BASED RATES ARE NOT INCLUDED IN THIS FEE SCHEDULE.

NOTE: BADGERCARE PLUS BENCHMARK PLAN MEMBERS WILL BE RESPONSIBLE FOR A \$15.00 COPAYMENT PER VISIT, REGARDLESS OF THE NUMBER OF SERVICES PROVIDED DURING THAT VISIT. THIS COPAYMENT WILL APPLY TO ANY SURGERY CODE OR EVALUATION AND MANAGEMENT CODE.

UNDER THE BADGERCARE PLUS BENCHMARK PLAN, COPAYMENT DOES NOT APPLY TO RADIOLOGY, PATHOLOGY, LABORATORY, NOR MEDICINE CODES.

ALTHOUGH THE FEE SCHEDULE DOES NOT ADDRESS THE VARIOUS COVERAGE LIMITATIONS ROUTINELY APPLIED BY WISCONSIN MEDICAID BEFORE FINAL PAYMENT IS DETERMINED (E.G., RECIPIENT AND PROVIDER ELIGIBILITY, BILLING INSTRUCTIONS, FREQUENCY OF SERVICES, THIRD PARTY LIABILITY, COPAYMENTS, AGE RESTRICTIONS, PRIOR AUTHORIZATION, ETC.), IT DOES CONTAIN THE FOLLOWING INFORMATION:

PROC/M1/M2/TM

PROC - THE PROCEDURE CODE RECOGNIZED BY WISCONSIN MEDICAID TO IDENTIFY THE SERVICES PROVIDED.  
 M1/M2 - ONE OR TWO APPLICABLE MODIFIERS(S) AFFECTING REIMBURSEMENT AMOUNT.  
 TM - DESCRIPTIVE MODIFIER USED TO CONVEY INFORMATION FORMERLY CONVEYED BY TOS.  
 NOTE: IN CERTAIN INSTANCES THE MODIFIER LISTED IS BEING USED BOTH TO CONVEY INFORMATION FORMERLY CONVEYED BY TOS AND TO AFFECT THE REIMBURSEMENT AMOUNT. IN THESE INSTANCES THE MODIFIER WILL BE DISPLAYED TWICE, ONCE IN THE M1 OR M2 COLUMN AND ONCE IN THE TM COLUMN, EVEN THOUGH IT WILL ONLY BE BILLED ONCE ON THE CLAIM DETAIL.

DESCRIPTION - AN ABBREVIATED DESCRIPTION OF THE PROCEDURE CODE

PROVIDER TYPE - ALL APPLICABLE PERFORMING PROVIDER TYPES FOR THE PROCEDURE CODE. SEE TABLE I FOR A LISTING OF PROVIDER TYPES APPLICABLE TO THIS SCHEDULE.

PAC - THE PRICING ACTION CODE IDENTIFIES NON-COVERED SERVICES OR THE SOURCE AND METHOD OF PRICING THE PROCEDURE (REFER TO TABLE II).

EFFECTIVE DATE - THE EFFECTIVE DATE OF SERVICE ON OR AFTER WHICH THE MAXIMUM ALLOWABLE FEE APPLIES.

MAX FEE - MAXIMUM ALLOWABLE FEES FOR THE PROCEDURE CODES LISTED. IF A MAX FEE IS NOT INDICATED, USE THE PAC AND TABLE II TO DETERMINE THE REASON (E.G., PAC 220 INDICATES SERVICE NOT COVERED; PAC 21J INDICATES INDIVIDUAL CONSIDERATION, ETC.).

THIS INFORMATION IS INTENDED TO HELP YOU UNDERSTAND THE WISCONSIN MEDICAID MAXIMUM ALLOWABLE FEE SCHEDULE. IF YOU HAVE QUESTIONS, PLEASE CONTACT WISCONSIN MEDICAID PROVIDER SERVICES AT: (608) 221-9883 OR (800) 947-9627\*

\*WHEN REQUESTING INFORMATION, PLEASE BE SPECIFIC AS TO WHICH PROVIDER TYPE YOU ARE REFERRING (I.E., PODIATRY CLINIC OR GORUP, OR PODIATRIST).

TABLE I  
PROVIDER TYPE

32 - PODIATRIST

TABLE II  
PRICING ACTION CODES (PAC)

11J, 21J -INDIVIDUAL CONSIDERATION, MEDICAL CONSULTANT  
 120, 220 -NON-COVERED SERVICES, NOT A WISCONSIN MEDICAID BENEFIT  
 170, 270 -PAID AT THE LOWER OF THE BILLED AMOUNT OR MAXIMUM ALLOWABLE FEE ACCORDING TO PROVIDER TYPE

TABLE III  
MODIFIERS

MODIFIER	DESCRIPTION
TC	TECHNICAL COMPONENT
UA	ROUTINE FOOT CARE
U1	NEW PATIENT
U2	ESTABLISHED PATIENT
U3	FIRST PATIENT, NURSING HOME
26	PROFESSIONAL COMPONENT
50	BILATERAL SURGERY RATE
80	ASSISTANT SURGEON

PROC	DESCRIPTION	PAC	EFFECT DATE	MAX FEE
10060	INCISION AND DRAINAGE OF ABSCESS;			
10060	32	270	07/01/08	40.42
10061	INCISION AND DRAINAGE OF ABSCESS;			
10061	32	270	07/01/08	91.47
10120	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES;			
10120	32	270	07/01/08	41.63
10121	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES;			
10121	32	270	07/01/08	76.22
10140	INCISION AND DRAINAGE OF HEMATOMA, SEROMA OR FLUID COLLECTION			
10140	32	270	07/01/08	44.46
10160	PUNCTURE ASPIRATION OF ABSCESS, HEMATOMA, BULLA, OR CYST			
10160	32	270	07/01/08	30.17
10180	INCISION AND DRAINAGE/ COMPLEX/ POSTOPERATIVE WOUND INFECTION			
10180	32	270	07/01/08	108.95
11000	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS OR INFECTED SKIN;			
11000	32	270	07/01/08	32.34
11001	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS/INFECTED SKIN; EACH ADDITIONAL 10% OF BODY SURFACE			
11001	32	270	07/01/08	47.40
11040	DEBRIDEMENT; SKIN/ PARTIAL THICKNESS			
11040	32	270	07/01/08	26.97
11041	SKIN/ FULL THICKNESS			
11041	32	270	07/01/08	37.37
11042	SKIN AND SUBCUTANEOUS TISSUE			
11042	32	270	07/01/08	155.83
11043	SKIN/ SUBCUTANEOUS TISSUE AND MUSCLE			
11043	32	270	07/01/08	335.19
11055	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); SINGLE LESION			
11055	32	270	07/01/08	25.81
11055	50	270	07/01/08	38.72
11056	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); 2 TO 4 LESIONS			
11056	32	270	07/01/08	36.12
11056	50	270	07/01/08	54.18
11057	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS);MORE THAN 4 LESIONS			
11057	32	270	07/01/08	46.44
11057	50	270	07/01/08	69.66
11100	BIOPSY OF SKIN, SUBCUT TISSUE &/OR MUCOUS MEMBRANE, UNLESS OTHERWISE LISTED;SINGL LESION			
11100	32	270	07/01/08	44.46
11101	BIOPSY OF SKIN, SUBCUTANEOUS TISSUE/MUCOUS MEMBRANE;EACH SEPARATE/ADDITIONAL LESION			
11101	32	270	07/01/08	22.59
11200	REMOVAL OF SKIN TAGS, MULTIPLE FIBROCUTANEOUS TAGS, ANY AREA; UP TO AND INCL 15 LESIONS			
11200	32	270	07/01/08	39.71
11201	REMOVAL OF SKIN TAGS, MULTIPLE FIBROCUTANEOUS TAGS, ANY AREA; EACH ADDITIONAL TEN LESIONS			
11201	32	270	07/01/08	15.06
11300	SHAVING OF EPIDERMAL/DERMAL LESION, SINGLE, TRNK, ARM OR LEG; DIAMETER 0.5 CM OR LESS			
11300	32	270	07/01/08	49.41
11301	SHAVING OF EPIDERMAL/DERMAL LESION, SINGLE, TRNK, ARMS OR LEGS; DIAMETER 0.6 TO 1.0 CM			
11301	32	270	07/01/08	60.91
11302	SHAVING OF EPIDERMAL/DERMAL LESION, SINGLE, TRNK, ARMS OR LEGS; DIAMETER 1.1 TO 2.0 CM			
11302	32	270	07/01/08	60.91
11303	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE, TRUNK, ARMS OR LEGS; DIAMETER OVER 2.0 CM			
11303	32	270	07/01/08	113.51
11305	SHAVING OF EPIDERMAL/DERMAL LESION, SNGL; SCLP, NCK, HANDS, FT, GNTLS; DIAM 0.5 CM/LESS			
11305	32	270	07/01/08	45.48
11306	SHAVING OF EPIDERMAL/DERMAL LESION, SNGL, SCLP, NCK, HANDS, FT, GNTLS; DIAM 0.6-1.0 CM			
11306	32	270	07/01/08	56.97
11307	SHAVING OF EPIDERMAL/DERMAL LESION, SNGL, SCLP, NCK, HANDS, FT, GNTLS; DIAM 1.1-2.0 CM			
11307	32	270	07/01/08	56.97
11308	SHAVING OF EPIDERMAL/DERMAL LESION, SINGLE, SCLP, NCK, HANDS, FT, GNTLS, DIAM OVR 2.0 CM			
11308	32	270	07/01/08	131.26
11310	SHAVING OF EPIDERM/DERMAL LESION, SGL; FACE/EAR/EYELID/NSE/LIP/MUC MEM; DIAM 0.5 CM/LESS			
11310	32	270	07/01/08	51.44
11311	SHAVING OF EPIDERM/DERMAL LESION, SGL; FACE/EAR/EYELID/NSE/LIP/MUC MEM; DIAM 0.6-1.0 CM			
11311	32	270	07/01/08	73.34
11400	EXCISION, BENIGN LESION INCL MARGINS, EXC SKIN TAG, TRNK/ARM/LEG; DIAM 0.5 CM OR LESS			
11400	32	270	07/01/08	47.18
11401	EXCISION, BENIGN LESION INCL MARGINS, EXC SKIN TAG, TRNK/ARM/LEG; DIAM 0.6 - 1.0 CM			
11401	32	270	07/01/08	81.31
11402	EXCISION, BENIGN LESION INCL MARGINS, EXC SKIN TAG, TRNK/ARM/LEG; DIAM 1.1 - 2.0 CM			
11402	32	270	07/01/08	148.24
11403	EXCISION, BENIGN LESION INCL MARGINS, EXC SKIN TAG, TRNK/ARM/LEG; DIAM 2.1 - 3.0 CM			
11403	32	270	07/01/08	212.92
11404	EXCISION, BENIGN LESION INCL MARGINS, EXC SKIN TAG, TRNK/ARM/LEG; DIAM 3.1 - 4.0 CM			
11404	32	270	07/01/08	289.34
11406	EXCISION, BENIGN LESION INCL MARGINS, EXC SKIN TAG, TRNK/ARM/LEG; DIAM OVER 4.0 CM			
11406	32	270	07/01/08	373.61
11420	EXCISION, BENIGN LESION W/ MARGIN, EXC SKIN TAG, SCLP/NCK/HAND/FEET/GENIT;DI 0.5 CM/LESS			
11420	32	270	07/01/08	68.95
11421	EXCISION, BENIGN LESION W/ MARGIN, EXC SKIN TAG, SCLP/NCK/HAND/FEET/GENIT;DI 0.6-1.0 CM			
11421	32	270	07/01/08	91.47

11422	EXCISION, BENIGN LESION W/ MARGIN, EXC SKIN TAG, SCLP/NCK/HAND/FEET/GENIT;DI 1.1-2.0 CM		
11422	32	270 07/01/08	177.86
11423	EXCISION, BENIGN LESION W/ MARGIN, EXC SKIN TAG, SCLP/NCK/HAND/FEET/GENIT;DI 2.1-3.0 CM		
11423	32	270 07/01/08	231.21
11424	EXCISION, BENIGN LESION W/ MARGIN, EXC SKIN TAG, SCLP/NCK/HAND/FEET/GENIT;DI 3.1-4.0 CM		
11424	32	270 07/01/08	288.03
11426	EXCISION, BENIGN LESION W/ MARGIN, EXC SKIN TAG, SCLP/NCK/HAND/FEET/GENIT;DI OVER 4.0 CM		
11426	32	270 07/01/08	392.53
11620	EXCISION,MALIG LESION INCLUD MARGINS,SCALP,NECK,HANDS,FEET,GENITAL;EXCISED DIAM 0.5 CM <		
11620	32	270 07/01/08	119.23
11621	EXCISION,MALIG LESION INCLUD MARGINS,SCALP,NECK,HANDS,FEET,GENITAL;EXCISED DM 0.6-1.0 CM		
11621	32	270 07/01/08	201.40
11622	EXCISION,MALIG LESION INCLUD MARGINS,SCALP,NECK,HANDS,FEET,GENITAL;EXCISED DM 1.1-2.0 CM		
11622	32	270 07/01/08	247.94
11623	EXCISION,MALIG LESION INCLUD MARGINS,SCALP,NECK,HANDS,FEET,GENITAL;EXCISED DM 2.1-3.0 CM		
11623	32	270 07/01/08	283.02
11624	EXCISION,MALIG LESION INCLUD MARGINS,SCALP,NECK,HANDS,FEET,GENITAL;EXCISED DM 3.1-4.0 CM		
11624	32	270 07/01/08	382.71
11626	EXCISION,MALIG LESION INCLUD MARGINS,SCALP,NECK,HANDS,FT,GENITAL;EXCISED DM OVER 4.0 CM		
11626	32	270 07/01/08	448.16
11719	TRIMMING OF NONDYSTROPHIC NAILS, ANY NUMBER		
11719	32	270 07/01/08	16.41
11719	50	270 07/01/08	24.62
11720	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); ONE TO FIVE		
11720	32	270 07/01/08	18.67
11721	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); SIX OR MORE		
11721	32	270 07/01/08	33.05
11730	AVULSION OF NAIL PLATE, PARTIAL OR COMPLETE, SIMPLE;		
11730	32	270 07/01/08	42.00
11732	AVULSION OF NAIL PLATE,PARTIAL OR COMPLETE,SIMPLE;EACH ADDITIONAL NAIL PLATE		
11732	32	270 07/01/08	20.31
11740	EVACUATION OF SUBUNGUAL HEMATOMA		
11740	32	270 07/01/08	36.27
11750	EXCISION OF NAIL AND NAIL MATRIX, PARTIAL OR COMPLETE		
11750	32	270 07/01/08	109.27
11752	WITH AMPUTATION OF TUFT OF DISTAL PHALANX		
11752	32	270 07/01/08	109.27
11755	BIOPSY OF NAIL UNIT (EG, PLATE, BED, MATRIX, HYPONYCHIUM, PROXIMAL & LATERAL NAIL FOLDS)		
11755	32	270 07/01/08	98.86
11760	RECONSTRUCTION OF NAIL BED;		
11760	32	270 07/01/08	41.87
11762	RECONSTRUCTION OF NAIL BED;		
11762	32	270 07/01/08	323.22
11765	WEDGE EXCISION OF SKIN OF NAIL FOLD (EG, FOR INGROWN TOENAIL)		
11765	32	270 07/01/08	108.94
11900	INJECTION, INTRALESIONAL;		
11900	32	270 07/01/08	23.69
11901	INJECTION, INTRALESIONAL;		
11901	32	270 07/01/08	19.92
12001	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE,		
12001	32	270 07/01/08	51.36
12002	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE,		
12002	32	270 07/01/08	66.04
12004	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE,		
12004	32	270 07/01/08	87.57
12005	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE,		
12005	32	270 07/01/08	139.71
12020	TREATMENT OF SUPERFICIAL WOUND DEHISCENCE; SIMPLE CLOSURE		
12020	32	270 07/01/08	31.75
12041	LAYER CLOSURE OF WOUNDS OF NECK, HANDS, FEET AND/OR		
12041	32	270 07/01/08	70.05
12042	LAYER CLOSURE OF WOUNDS OF NECK, HANDS, FEET AND/OR		
12042	32	270 07/01/08	101.06
12044	LAYER CLOSURE OF WOUNDS OF NECK, HANDS, FEET AND/OR		
12044	32	270 07/01/08	135.57
13160	SECONDARY CLOSURE OF SURGICAL WOUND OR DEHISCENCE, EXTNESIVE OR COMPLICATED		
13160	32	270 07/01/08	186.81
15050	PINCH GRAFT; SINGLE OR MULTIPLE; TO COVER SMALL		
15050	32	270 07/01/08	311.35
15100	SPLIT-THICK AUTOGRAFT, TRNK, ARMS, LEGS; 1ST 100 SQ CM/LESS, OR 1% BODY OF INFANT/CHILD		
15100	32	270 07/01/08	512.11
15101	SPLIT GRAFT, TRUNK, ARMS, LEGS; EA ADD 100 SQ CM OR 1% BODY AREA, INFANTS & CHILDREN		
15101	32	270 07/01/08	214.58
15120	SPLIT-THICK AUTOGRFT, FACE, SCALP, ORBITS, GENIT; 1ST 100 SQ CM/LESS, OR 1% BODY INFANTS/CHILD		
15120	32	270 07/01/08	851.14
15121	SPLIT GRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, . . . ; EACH ADD. 100 SQ CM, OR 1% BODY AREA,		
15121	32	270 07/01/08	356.73
15200	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE		
15200	32	270 07/01/08	363.86
15201	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, TRUNK; EA ADD 20 SQ CM		
15201	32	270 07/01/08	212.57
15220	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE		
15220	32	270 07/01/08	452.00
15221	FULL THICKNESS GRAFT, FREE, INC DIRECT CLOSURE DONOR SITE, SCALP, ARMS, LEGS; EA ADD 20 SQ CM		
15221	32	270 07/01/08	212.92

15240	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE		
15240	32	270 07/01/08	835.27
15241	FULL THICKNESS GRAFT, FREE, INC DIRECT CLOSURE DONOR SITE, FOREHEAD, ...; EA ADD 20 SQ CM		
15241	32	270 07/01/08	309.94
15260	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR		
15260	32	270 07/01/08	753.31
15261	FULL THICKNESS GRAFT, FREE, INC DIRECT CLOSURE DONOR SITE, NOSE, EARS, ...; EA ADD 20 SQ CM		
15261	32	270 07/01/08	361.18
15400	XENOGRAFT, SKIN, FOR TEMP WOUND CLOSURE; 1ST 100 SQ CM OR <, OR 1% BODY AREA OF INFNTS/CHILD		
15400	32	270 07/01/08	175.02
15786	ABRASION;		
15786	32	270 07/01/08	40.42
15787	ABRASION, EACH ADDITIONAL FOUR LESIONS OR LESS (LIST IN ADDITION TO PRIMARY PROCEDURE)		
15787	32	270 07/01/08	31.41
16000	INITIAL TREATMENT, FIRST DEGREE BURN, WHEN NO MORE THAN LOCAL		
16000	32	270 07/01/08	28.68
17000	DESTRUCTION, PREMALIGNANT LESIONS; FIRST LESION		
17000	32	270 07/01/08	47.40
17003	DESTRUCTION BY ANY METHOD, ALL BENIGN/PREMALIGNANT LESIONS; 2ND THROUGH 14 LESIONS, EACH		
17003	32	270 07/01/08	10.94
17004	DESTRUCTION, PREMALIGNANT LESIONS, 15 OR MORE LESIONS		
17004	32	270 07/01/08	175.02
17106	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS		
17106	32	270 07/01/08	264.67
17107	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS		
17107	32	270 07/01/08	529.33
17108	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS		
17108	32	270 07/01/08	759.48
17110	DESTRUCTION, OF BENIGN LESIONS OTHER THEN SKIN TABS/CUTANEOUS VASCULAR LESIONS; UP TO 14		
17110	32	270 07/01/08	25.56
17111	DESTRUCTION BY ANY METHOD OF FLAT WARTS, MOLLUSCUM CONTAGIOSUM, OR MILIA; 15 OR MORE LES		
17111	32	270 07/01/08	54.69
17250	CHEMICAL CAUTERIZATION OF GRANULATION TISSUE (PROUD FLESH, SINUS OR FISTULA)		
17250	32	270 07/01/08	24.26
20000	INCISION OF SOFT TISSUE ABSCESS, SECONDARY TO		
20000	32	270 07/01/08	57.46
20005	INCISION OF SOFT TISSUE ABSCESS, SECONDARY TO		
20005	32	270 07/01/08	208.82
20103	EXPLORATION OF PENETRATING WOUND (SEPARATE PROCEDURE) EXTREMITY		
20103	32	270 07/01/08	329.12
20200	BIOPSY, MUSCLE;		
20200	32	270 07/01/08	131.43
20205	BIOPSY, MUSCLE;		
20205	32	270 07/01/08	150.66
20520	REMOVAL OF FOREIGN BODY IN MUSCLE OR TENDON SHEATH; SIMPLE		
20520	32	270 07/01/08	62.28
20525	REMOVAL OF FOREIGN BODY IN MUSCLE;		
20525	32	270 07/01/08	299.28
20550	INJECTION(S); SINGLE TENDON SHEATH, OR LIGAMENT, APONEUROSIS (EG, PLANTAR "FASCIA")		
20550	32	270 07/01/08	26.97
20600	ARTHROCENTESIS/ ASPIRATION AND/OR INJECTION; SMALL JOINT OR BURSA (E.G. FINGERS, TOES)		
20600	32	270 07/01/08	38.73
20600	50	270 07/01/08	58.10
20605	ARTHROCENTESIS, ASPIRATION/INJECTION, INTERMEDIATE JOINT/BURSA (E.G. WRIST, ELBOW)		
20605	32	270 07/01/08	49.56
20605	50	270 07/01/08	74.34
20670	REMOVAL OF IMPLANT;		
20670	32	270 07/01/08	53.15
20680	REMOVAL OF IMPLANT;		
20680	32	270 07/01/08	229.09
20816	REPLANTATION/ DIGIT/ EXCLUDING THUMB; COMPLETE AMPUTATION		
20816	32	270 07/01/08	1531.38
20924	TENDON GRAFT, FROM A DISTANCE (EG, PALMARIS, TOE EXTENSOR, PLANTARIS)		
20924	32	270 07/01/08	209.35
27603	INCISION AND DRAINAGE;		
27603	32	270 07/01/08	196.26
27604	INCISION AND DRAINAGE;		
27604	32	270 07/01/08	45.18
27605	TENOTOMY, PERCUTANEOUS, ACHILLES TENDON (SEPARATE PROCEDURE); LOCAL ANESTHESIA		
27605	32	270 07/01/08	75.33
27606	TENOTOMY, ACHILLES TENDON, SUBCUTANEOUS (SEPARATE		
27606	32	270 07/01/08	165.73
27607	INCISION (EG, OSTEOMYELITIS OR BONE ABSCESS), LEG OR ANKLE		
27607	32	270 07/01/08	622.68
27610	ARTHROTOMY, ANKLE, INCLUDING EXPLORATION, DRAINAGE, OR REMOVAL OF FOREIGN BODY		
27610	32	270 07/01/08	753.31
27612	ARTHROTOMY, POSTERIOR CAPSULAR RELEASE, ANKLE, W/NO ACHILLES TENDON LENGTHENING		
27612	32	270 07/01/08	753.31
27613	BIOPSY, SOFT TISSUES;		
27613	32	270 07/01/08	41.87
27614	BIOPSY, SOFT TISSUE OF LEG OR ANKLE AREA; DEEP (SUBFASCIAL OR INTRAMUSCULAR)		
27614	32	270 07/01/08	209.35
27615	RADICAL RESECTION OF TUMOR (EG, MALIGNANT NEOPLASM),		
27615	32	270 07/01/08	1304.93
27618	EXCISION, TUMOR, LEG OR ANKLE AREA; SUBCUTANEOUS TISSUE		

27618		32	270 07/01/08	209.35
27619	EXCISION, BENIGN TUMOR;	32	270 07/01/08	366.34
27620	ARTHROTOMY, ANKLE, WITH JOINT EXPLORATION, WITH OR WITHOUT BIOPSY, WITH OR WITHOUT REMOV	32	270 07/01/08	490.89
27625	ARTHROTOMY, ANKLE, WITH SYNOVECTOMY;	32	270 07/01/08	753.31
27626	ARTHROTOMY, ANKLE, FOR SYNOVECTOMY;	32	270 07/01/08	879.25
27630	EXCISION OF LESION OF TENDON SHEATH OR CAPSULE	32	270 07/01/08	318.60
27637	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR,	32	270 07/01/08	753.31
27637	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR,	80 32	270 07/01/08	150.66
27638	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR,	32	270 07/01/08	753.31
27647	RADICAL RESECTION OF TUMOR, BONE; TALUS OR CALCANEUS	32	270 07/01/08	984.47
27648	INJECTION PROCEDURE FOR ANKLE ARTHROGRAPHY	32	270 07/01/08	45.18
27650	REPAIR/ PRIMARY/ OPEN OR PERCUTANEOUS/ RUPTURED ACHILLES TENDON;	32	270 07/01/08	677.97
27652	SUTURE, PRIMARY, RUPTURED ACHILLES TENDON;	32	270 07/01/08	772.26
27654	REPAIR, SECONDARY, ACHILLES TENDON, WITH OR WITHOUT GRAFT	32	270 07/01/08	828.65
27656	REPAIR, FASCIAL DEFECT OF LEG	32	270 07/01/08	376.66
27658	REPAIR, FLEXOR TENDON, LEG; PRIMARY, WITHOUT GRAFT, EACH TENDON	32	270 07/01/08	452.00
27659	REPAIR, FLEXOR TENDON, LEG; SECONDARY, WITH OR WITHOUT GRAFT, EACH TENDON	32	270 07/01/08	540.73
27664	REPAIR, EXTENSOR TENDON, LEG; PRIMARY, WITHOUT GRAFT, EACH TENDON	32	270 07/01/08	271.17
27665	REPAIR, EXTENSOR TENDON, LEG; SECONDARY, WITH OR WITHOUT GRAFT, EACH TENDON	32	270 07/01/08	271.17
27675	REPAIR, DISLOCATING PERONEAL TENDONS; WITHOUT FIBULAR OSTEOTOMY	32	270 07/01/08	452.00
27676	REPAIR FOR DISLOCATING PERONEAL TENDONS;	32	270 07/01/08	452.00
27680	TENOLYSIS, FLEXOR OR EXTENSOR TENDON, LEG AND/OR ANKLE; EACH TENDON	32	270 07/01/08	376.66
27681	TENOLYSIS, FLEXOR OR EXTENSOR TENDON, LEG AND/OR ANKLE; MULTIPLE TENDONS-SEPARATE INCISI	32	270 07/01/08	452.00
27685	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; SINGLE TENDON (SEPARATE PROCEDURE)	32	270 07/01/08	404.31
27686	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; MULTI TENDONS-SAME INCISION/EACH	32	270 07/01/08	527.35
27687	GASTROCNEMIUS RECESSON (EG, STRAYER PROCEDURE)	32	270 07/01/08	452.00
27690	TRANSFER OR TRANSPLANT OF SINGLE TENDON (WITH MUSCLE	32	270 07/01/08	602.65
27691	TRANSF OR TRANSP OF SING TEND (W/MUSCLE REDIRECT OR REROUTE); DEEP (EG ANTERIOR TIBIAL	32	270 07/01/08	602.65
27692	TRANSFER OR TRANSPLANT OF SINGLE TENDON (WITH MUSCLE REDIRECTION); EA ADDITIONAL TENDON	32	270 07/01/08	218.78
27695	REPAIR, PRIMARY, DISRUPTED LIGAMENT, ANKLE; COLLATERAL	32	270 07/01/08	677.97
27696	SUTURE, PRIMARY, TORN, RUPTURED OR SEVERED LIGAMENT,	32	270 07/01/08	903.98
27698	REPAIR, SECONDARY DISRUPTED LIGAMENT, ANKLE, COLLATERAL (EG, WATSON-JONES PROCEDURE)	32	270 07/01/08	903.98
27700	ARTHROPLASTY, ANKLE;	32	270 07/01/08	1129.98
27702	ARTHROPLASTY, ANKLE;	32	270 07/01/08	1506.67
27703	ARTHROPLASTY, ANKLE; REVISION, TOTAL ANKLE	32	270 07/01/08	677.71
27707	OSTEOTOMY;	32	270 07/01/08	452.00
27767	CLOSED TREATMENT OF POSTERIOR MALLEOLUS FRACTURE; WITHOUT MANIPULATION	32	270 07/01/08	177.53
27767	50	32	270 07/01/08	266.30
27767	CLOSED TREATMENT OF POSTERIOR MALLEOLUS FRACTURE; WITHOUT MANIPULATION	80 32	220 01/01/08	
27768	CLOSED TREATMENT OF POSTERIOR MALLEOLUS FRACTURE; WITH MANIPULATION	32	270 07/01/08	271.55
27768	50	32	270 07/01/08	407.33
27768	CLOSED TREATMENT OF POSTERIOR MALLEOLUS FRACTURE; WITH MANIPULATION	80 32	220 01/01/08	
27769	OPEN TREATMENT OF POSTERIOR MALLEOLUS FRACTURE, INCL INTERNAL FIXATION, WHEN PERFORMED	32	270 07/01/08	469.23
27769	50	32	270 07/01/08	703.85
27769	OPEN TREATMENT OF POSTERIOR MALLEOLUS FRACTURE, INCL INTERNAL FIXATION, WHEN PERFORMED			

27769	80 32	220 01/01/08	
27808	CLOSED TREATMENT OF BIMALLEOLAR ANKLE FRACTURE(EG, LAT & MED MALLEOLI);w/OUT MANIPULATIO		
27808	32	270 07/01/08	186.81
27810	CLOSED TREATMENT OF BIMALLEOLAR ANKLE FRACTURE (EG, LAT & MED MALLEOLI); w/MANIPULATION		
27810	32	270 07/01/08	781.25
27814	OPEN TREATMENT OF BIMALLEOLAR ANKLE FRACTURE INCLUDES INTERNAL FIXATION,WHEN PERFORMED		
27814	32	270 07/01/08	753.31
27816	CLOSED TREATMENT OF TRIMALLEOLAR ANKLE FRACTURE; WITHOUT MANIPULATION		
27816	32	270 07/01/08	376.66
27818	TREATMENT OF CLOSED TRIMALLEOLAR ANKLE FRACTURE;		
27818	32	270 07/01/08	452.00
27822	OPEN TREAT TRIMALLEOLAR ANKLE FX,INCL INTERNAL FIXATION,WHEN PERFORMD;w/OUT FIX OF POST		
27822	32	270 07/01/08	903.98
27823	OPEN TREAT TRIMALLEOLAR ANKLE FX, INCL INTERNAL FIXATION,WHEN PERFORMD;w/FIX OF POST OF		
27823	32	270 07/01/08	979.33
27830	CLOSED TREATMENT OF PROXIMAL TIBIOFIBULAR JOINT DISLOCATION; WITHOUT ANESTHESIA		
27830	32	270 07/01/08	226.00
27831	TREATMENT OF PROXIMAL TIBIOFIBULAR JOINT		
27831	32	270 07/01/08	164.07
27832	OPEN TREAT OF PROXIMAL TIBIOFIBULAR JOINT DISLOCATION,INCL INTERNAL FIX,OR W/EXCISION OF		
27832	32	270 07/01/08	527.35
27840	CLOSED TREATMENT OF ANKLE DISLOCATION; WITHOUT ANESTHESIA		
27840	32	270 07/01/08	150.66
27842	CLOSED TREATMENT OF ANKLE DISLOCATION; REQ ANESTHESIA,W/WITHOUT PERCUT SKELETAL FIXATION		
27842	32	270 07/01/08	150.66
27846	OPEN TREAT OF ANKLE DISLOCATION, W/W/O PERCUT SKELETAL FIX; W/O REPAIR OR INTERNAL FIX		
27846	32	270 07/01/08	753.31
27848	OPEN TREATMENT OF ANKLE DISLOCATION; WITH REPAIR OR INTERNAL OR EXTERNAL FIXATION		
27848	32	270 07/01/08	677.97
27860	MANIPULATION OF ANKLE UNDER GENERAL ANESTHESIA		
27860	32	270 07/01/08	147.86
27870	ARTHRODESIS, ANKLE, OPEN		
27870	32	270 07/01/08	1054.65
27871	ARTHRODESIS, TIBIOFIBULAR JOINT, PROXIMAL OR DISTAL		
27871	32	270 07/01/08	418.69
28001	INCISION AND DRAINAGE, BURSA, FOOT		
28001	32	270 07/01/08	45.18
28002	INCISION AND DRAINAGE BELOW FASCIA, W/WO TENDON SHEATH INVOLVEMENT, FOOT; SINGLE BURSAL		
28002	32	270 07/01/08	141.34
28003	DEEP INFECTION, BELOW FASCIA, REQUIRING DEEP		
28003	32	270 07/01/08	486.72
28005	INCISION, BONE CORTEX (EG, OSTEOMYELITIS OR BONE ABSCESS), FOOT		
28005	32	270 07/01/08	406.97
28008	FASCIOTOMY, PLANTAR AND/OR TOE, SUBCUTANEOUS		
28008	32	270 07/01/08	150.66
28010	TENOTOMY, PERCUTANEOUS, TOE; SINGLE TENDON		
28010	32	270 07/01/08	75.33
28011	TENOTOMY, PERCUTANEOUS, TOE; MULTIPLE TENDONS		
28011	32	270 07/01/08	112.98
28020	ARTHROTOMY,INC EXPLOR/DRAINAGE/REMOVAL LOOSE/FOREIGN BODY;INTERTARSAL/TARSOMETATARSAL JO		
28020	32	270 07/01/08	452.00
28022	ARTHROTOMY, WITH EXPLORATION, DRAINAGE OR REMOVAL		
28022	32	270 07/01/08	271.17
28024	ARTHROTOMY, WITH EXPLORATION, DRAINAGE OR REMOVAL		
28024	32	270 07/01/08	195.86
28035	RELEASE, TARSAL TUNNEL (POSTERIOR TIBIAL NERVE DECOMPRESSION)		
28035	32	270 07/01/08	452.00
28043	EXCISION, TUMOR, FOOT; SUBCUTANEOUS TISSUE		
28043	32	270 07/01/08	78.52
28045	EXCISION, BENIGN TUMOR;		
28045	32	270 07/01/08	204.12
28046	RADICAL RESECTION OF TUMOR (EG, MALIGNANT NEOPLASM),		
28046	32	270 07/01/08	656.31
28050	ARTHROTOMY WITH BIOPSY; INTERTARSAL OR TARSOMETATARSAL JOINT		
28050	32	270 07/01/08	452.00
28052	ARTHROTOMY FOR SYNOVIAL BIOPSY;		
28052	32	270 07/01/08	271.17
28054	ARTHROTOMY FOR SYNOVIAL BIOPSY;		
28054	32	270 07/01/08	226.00
28060	FASCIECTOMY, PLANTAR FASCIA; PARTIAL (SEPARATE PROCEDURE)		
28060	32	270 07/01/08	376.66
28062	FASCIECTOMY, EXCISION OF PLANTAR FASCIA;		
28062	32	270 07/01/08	530.54
28070	SYNOVECTOMY;		
28070	32	270 07/01/08	452.00
28072	SYNOVECTOMY;		
28072	32	270 07/01/08	271.17
28080	EXCISION, INTERDIGITAL (MORTON) NEUROMA, SINGLE, EACH		
28080	32	270 07/01/08	261.69
28086	SYNOVECTOMY, TENDON SHEATH;		
28086	32	270 07/01/08	421.85
28088	SYNOVECTOMY, TENDON SHEATH;		
28088	32	270 07/01/08	301.31
28090	EXCISION OF LESION, TENDON, TENDON SHEATH, OR CAPSULE (INCLUDING SYNOVECTOMY); FOOT		
28090	32	270 07/01/08	359.49

28092	EXCISION OF LESION, TENDON, TENDON SHEATH, OR CAPSULE (INCLUDING SYNOVECTOMY); TOE(S) EA			
28092	32	270	07/01/08	150.66
28100	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN			
28100	32	270	07/01/08	376.66
28102	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN			
28102	32	270	07/01/08	527.35
28103	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN			
28103	32	270	07/01/08	527.35
28104	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR, TARSAL/METATARSAL, EXCEPT TALUS/CALCAN			
28104	32	270	07/01/08	376.66
28106	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN			
28106	32	270	07/01/08	527.35
28107	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN			
28107	32	270	07/01/08	527.35
28108	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN			
28108	32	270	07/01/08	271.17
28110	OSTECTOMY, PARTIAL EXCISION, FIFTH METATARSAL			
28110	32	270	07/01/08	274.92
28111	OSTECTOMY/ COMPLETE EXCISION; FIRST METATARSAL HEAD			
28111	32	270	07/01/08	243.35
28112	OSTECTOMY;			
28112	32	270	07/01/08	271.17
28113	OSTECTOMY;			
28113	32	270	07/01/08	90.38
28114	OSTECTOMY, COMPLETE EXCISION; ALL METATARSAL HEADS, WITH PARTIAL PROXIMAL PHALANGECTOMY			
28114	32	270	07/01/08	753.31
28116	OSTECTOMY, EXCISION OF TARSAL COALITION			
28116	32	270	07/01/08	452.00
28118	OSTECTOMY, CALCANEUS;			
28118	32	270	07/01/08	376.66
28119	OSTECTOMY, CALCANEUS;			
28119	32	270	07/01/08	376.66
28120	PARTIAL EXCISION BONE (EG, OSTEOMYELITIS OR BOSSING); TALUS OR CALCANEUS			
28120	32	270	07/01/08	376.66
28122	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) OF BONE (EG, FOR OSTEO			
28122	32	270	07/01/08	376.66
28124	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) OF BONE (EG, FOR OSTEO			
28124	32	270	07/01/08	226.00
28126	RESECTION, PARTIAL OR COMPLETE, PHALANGEAL BASE, EACH TOE			
28126	32	270	07/01/08	269.52
28130	TALECTOMY (ASTRAGALECTOMY)			
28130	32	270	07/01/08	828.65
28140	METATARSECTOMY			
28140	32	270	07/01/08	376.66
28150	PHALANGECTOMY, TOE, EACH TOE			
28150	32	270	07/01/08	150.66
28153	RESECTION, CONDYLE(S), DISTAL END OF PHALANX, EACH TOE			
28153	32	270	07/01/08	103.57
28160	HEMIPHALANGECTOMY OR INTERPHALANGEAL JOINT EXCISION, TOE, PROXIMAL END OF PHALANX, EACH			
28160	32	270	07/01/08	179.61
28171	RADICAL RESECTION OF TUMOR, BONE; TARSAL (EXCEPT TALUS OR CALCANEUS)			
28171	32	270	07/01/08	546.93
28173	RADICAL RESECTION OF TUMOR, BONE; METATARSAL			
28173	32	270	07/01/08	546.93
28175	RADICAL RESECTION OF TUMOR, BONE; PHALANX OF TOE			
28175	32	270	07/01/08	447.78
28190	REMOVE FOREIGN BODY;			
28190	32	270	07/01/08	41.87
28192	REMOVE FOREIGN BODY;			
28192	32	270	07/01/08	186.81
28193	REMOVE FOREIGN BODY;			
28193	32	270	07/01/08	210.24
28200	REPAIR, TENDON, FLEXOR, FOOT; PRIMARY OR SECONDARY, WITHOUT FREE GRAFT, EACH TENDON			
28200	32	270	07/01/08	452.00
28202	REPAIR OR SUTURE OF TENDON, FOOT, FLEXOR, SINGLE;			
28202	32	270	07/01/08	602.65
28208	REPAIR, TENDON, EXTENSOR, FOOT; PRIMARY OR SECONDARY, EACH TENDON			
28208	32	270	07/01/08	180.80
28210	REPAIR OR SUTURE OF TENDON, FOOT, EXTENSOR, SINGLE;			
28210	32	270	07/01/08	271.17
28220	TENOLYSIS, FLEXOR, FOOT; SINGLE TENDON			
28220	32	270	07/01/08	376.66
28222	TENOLYSIS, FLEXOR, FOOT; MULTIPLE TENDONS			
28222	32	270	07/01/08	452.00
28225	TENOLYSIS, EXTENSOR, FOOT; SINGLE TENDON			
28225	32	270	07/01/08	110.44
28226	TENOLYSIS, EXTENSOR, FOOT; MULTIPLE TENDONS			
28226	32	270	07/01/08	130.85
28230	TENOTOMY, OPEN, TENDON FLEXOR; FOOT, SINGLE OR MULTIPLE TENDON(S) (SEPARATE PROCEDURE)			
28230	32	270	07/01/08	180.80
28232	SENOTOMY, OPEN, TENDON FLEXOR; TOE, SINGLE TENDON (SEPARATE PROCEDURE)			
28232	32	270	07/01/08	90.38
28234	TENOTOMY, OPEN, EXTENSOR, FOOT OR TOE, EACH TENDON			
28234	32	270	07/01/08	60.27
28238	RECONSTRUCTION, POSTERIOR TIBIAL TENDON W/EXCISION OF ACCESSORY TARSAL NAVICULAR BONE			

28238	32	270 07/01/08	452.00
28240	TENOTOMY LENGTHENING, OR RELEASE, ABDUCTOR BALLUCIS MUSCLE		
28240	32	270 07/01/08	226.00
28250	DIVISION OF PLANTAR FASCIA AND MUSCLE (EG, STEINDLER STRIPPING) (SEPARATE PROCEDURE)		
28250	32	270 07/01/08	376.66
28260	CAPSULOTOMY, MIDFOOT;		
28260	32	270 07/01/08	452.00
28261	CAPSULOTOMY, MIDFOOT;		
28261	32	270 07/01/08	572.52
28262	CAPSULOTOMY, MIDFOOT; EXTENSIVE, INC POSTERIOR TALOTIBIAL CAPSULOTOMY/TENDON(S) LENGTHEN		
28262	32	270 07/01/08	903.98
28264	CAPSULOTOMY, MIDTARSAL (EG, HEYMAN TYPE PROCEDURE)		
28264	32	270 07/01/08	903.98
28270	CAPSULOTOMY; METATARSOPHALANGEAL JOINT, W/O TENORRHAPHY, EACH JOINT (SEPARATE PROCEDURE)		
28270	32	270 07/01/08	538.00
28272	CAPSULOTOMY; INTERPHALANGEAL JOINT, EACH JOINT (SEPARATE PROCEDURE)		
28272	32	270 07/01/08	235.52
28280	SYNDACTYLIZATION, TOES (EG, WEBBING OR KELIKIAN TYPE PROCEDURE)		
28280	32	270 07/01/08	226.00
28285	CORRECTION, HAMMERTOE (EG, INTERPHALANGEAL FUSION, PARTIAL OR TOTAL PHALANGECTOMY)		
28285	32	270 07/01/08	274.92
28286	CORRECTION, COCK-UP FIFTH TOE, WITH PLASTIC SKIN CLOSURE (EG, RUIZ-MORA TYPE PROCEDURE)		
28286	32	270 07/01/08	226.00
28288	OSTECTOMY, PARTIAL, EXOSTECTOMY/CONDYLECTOMY, METATARSAL HEAD, EACH METATARSAL HEAD		
28288	32	270 07/01/08	266.83
28289	HALLUX RIGIDUS CORRECTION W CHEILECTOMY, DEBRIDEMENT & CAPSULAR RELEASE OF 1ST METATARSO		
28289	32	270 07/01/08	321.01
28289	50	270 07/01/08	481.52
28290	CORRECTION, HALLUX VALGUS (BUNION), W/WO SESAMOIDECTOMY; SIMPLE EXOSTECTOMY (SILVER TYPE		
28290	32	270 07/01/08	399.69
28290	50	270 07/01/08	599.54
28292	HALLUX VALGUS (BUNION), CORRECTION BY EXOSTECTOMY;		
28292	32	270 07/01/08	486.72
28292	50	270 07/01/08	730.08
28293	HALLUX VALGUS (BUNION), CORRECTION BY EXOSTECTOMY;		
28293	32	270 07/01/08	527.35
28293	50	270 07/01/08	791.03
28294	CORRECTION, HALLUX VALGUS (BUNION), W/WO SESAMOIDECTOMY; WITH TENDON TRANSPLANTS (JOPLIN		
28294	32	270 07/01/08	527.35
28294	50	270 07/01/08	791.03
28296	HALLUX VALGUS (BUNION), CORRECTION BY EXOSTECTOMY;		
28296	32	270 07/01/08	679.61
28296	50	270 07/01/08	1019.42
28297	LAPIDUS TYPE PROCEDURE		
28297	32	270 07/01/08	679.61
28297	50	270 07/01/08	1019.42
28298	HALLUX VALGUS (BUNION) CORRECTION; BY PHALANX OSTEOTOMY		
28298	32	270 07/01/08	452.00
28298	50	270 07/01/08	678.00
28299	CORRECTION, HALLUX VALGUS (BUNION); WITH OR WITHOUT SESAMOIDECTOMY; BY DOUBLE OSTEOTOMY		
28299	32	270 07/01/08	680.16
28299	50	270 07/01/08	1020.24
28300	OSTEOTOMY; CALCANEUS (EG, DWYER OR CHAMBERS TYPE PROCEDURE), W/WO INTERNAL FIXATION		
28300	32	270 07/01/08	602.65
28302	OSTEOTOMY;		
28302	32	270 07/01/08	572.52
28304	OSTEOTOMY, TARSAL BONES, OTHER THAN CALCANEUS OR TALUS;		
28304	32	270 07/01/08	452.00
28305	OSTEOTOMY, TARSAL BONES, OTHER THAN CALCANEUS OR TALUS; WITH AUTOGRAFT		
28305	32	270 07/01/08	572.52
28306	OSTEOTOMY, W/WO LENGTHENING, SHORTENING OR ANGULAR CORRECTION, METATARSAL; FIRST METATAR		
28306	32	270 07/01/08	350.65
28307	OSTEOTOMY, W/WO LENGTHENING, SHORTENING OR ANGULAR CORRECTION, METATARSAL; WITH AUTOGRAF		
28307	32	270 07/01/08	603.35
28308	OSTEOTOMY, W/WO LENGTHENING, SHORTENING, ANGULAR CORRECTION, METATARSAL; OTHER THAN 1ST, EACH		
28308	32	270 07/01/08	278.56
28309	OSTEOTOMY, W/WO LENGTHENING, SHORTENING OR ANGULAR CORRECTION, METATARSAL; MULTIPLE		
28309	32	270 07/01/08	864.60
28310	OSTEOTOMY, SHORTENING, ANGULAR OR ROTATIONAL CORRECTION; PROXIMAL PHALANX, FIRST TOE		
28310	32	270 07/01/08	180.80
28312	OSTEOTOMY FOR SHORTENING, ANGULAR OR ROTATIONAL		
28312	32	270 07/01/08	277.39
28313	RECONSTRUCTION, ANGULAR DEFORMITY OF TOE, SOFT TISSUE PROCEDURES ONLY		
28313	32	270 07/01/08	603.35
28315	SESAMOIDECTOMY FIRST TOE (SEPARATE PROCEDURE)		
28315	32	270 07/01/08	202.15
28320	REPAIR, NONUNION OR MALUNION; TARSAL BONES		
28320	32	270 07/01/08	437.54
28322	REPAIR OF NONUNION OR MALUNION;		
28322	32	270 07/01/08	376.66
28340	RECONSTRUCTION, TOE, MACRODACTYLY; SOFT TISSUE RESECTION		
28340	32	270 07/01/08	603.35
28341	RECONSTRUCTION, TOE, REQUIRING BONE RESECTION		
28341	32	270 07/01/08	603.35
28344	RECONSTRUCTION, TOE(S); POLYDACTYLY		



28344	32	270 07/01/08	603.35
28345	RECONSTRUCTION, TOE(S); SYNDACTYLY,WITH ORWITHOUT SKIN GRAFT(S) EACH WEB		
28345	32	270 07/01/08	603.35
28360	RECONSTRUCTION, CLEFT FOOT		
28360	32	270 07/01/08	603.35
28400	CLOSED TREATMENT OF CALCANEAL FRACTURE; WITHOUT MANIPULATION		
28400	32	270 07/01/08	226.00
28400	50	270 07/01/08	339.00
28405	CLOSED TREATMENT OF CALCANEAL FRACTURE; WITH MANIPULATION		
28405	32	270 07/01/08	301.31
28406	PERCUTANEOUS SKELETAL FIXATION OF CALCANEAL FRACTURE, WITH MANIPULATION		
28406	32	270 07/01/08	602.65
28415	OPEN TREATMENT OF CALCANEAL FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED;		
28415	32	270 07/01/08	753.31
28420	OPEN TREAT OF CALCANEAL FX,INCL INTNL FIX,W/PRIMARY ILIAC OR OTHER AUTOGENOUS BONE GRAFT		
28420	32	270 07/01/08	903.98
28430	CLOSED TREATMENT OF TALUS FRACTURE; WITHOUT MANIPULATION		
28430	32	270 07/01/08	226.00
28435	TREATMENT OF CLOSED TALUS FRACTURE;		
28435	32	270 07/01/08	301.31
28436	PERCUTANEOUS SKELETAL FIXATION OF TALUS FRACTURE, WITH MANIPULATION		
28436	32	270 07/01/08	454.55
28445	OPEN TREATMENT OF TALUS FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED		
28445	32	270 07/01/08	828.65
28446	OPEN OSTEOCHONDRAL AUTOGRAFT, TALUS (INCLUDES OBTAINING GRAFT{S})		
28446	32	270 07/01/08	811.33
28446	50	270 07/01/08	1217.00
28446	OPEN OSTEOCHONDRAL AUTOGRAFT, TALUS (INCLUDES OBTAINING GRAFT{S})		
28446	80 32	220 01/01/08	
28450	TREATMENT OF TARSAL BONE FRACTURE (EXCEPT TALUS & CALCANEUS); WITHOUT MANIPULATION, EACH		
28450	32	270 07/01/08	141.34
28455	TREATMENT OF CLOSED TARSAL BONE FRACTURE (EXCEPT		
28455	32	270 07/01/08	150.66
28456	PERCUT SKELETAL FIXATION OF TARSAL BONE FX (EXCEPT TALUS & CALCANEUS), W MANIP, EACH		
28456	32	270 07/01/08	225.43
28465	OPEN TREATMT TARSAL BONE FX (EXCEPT TALUS & CALCANEUS), INCLUDES INTERNAL FIXATION, EACH		
28465	32	270 07/01/08	452.00
28470	CLOSED TREATMENT OF METATARSAL FRACTURE; WITHOUT MANIPULATION, EACH		
28470	32	270 07/01/08	152.29
28475	TREATMENT OF CLOSED METATARSAL FRACTURE;		
28475	32	270 07/01/08	150.66
28476	PERCUTANEOUS SKELETAL FIXATION OF METATARSAL FRACTURE, WITH MANIPULATION, EACH		
28476	32	270 07/01/08	225.42
28485	OPEN TREATMENT OF METATARSAL FRACTURE,INCLUDES INTERNAL FIXATION, WHEN PERFORMED, EACH		
28485	32	270 07/01/08	376.66
28490	CLOSED TREATMENT OF FRACTURE GREAT TOE, PHALANX OR PHALANGES; WITHOUT MANIPULATION		
28490	32	270 07/01/08	83.74
28495	TREATMENT OF CLOSED FRACTURE GREAT TOE, PHALANX		
28495	32	270 07/01/08	139.23
28496	PERCUTANEOUS SKELETAL FIXATION OF FRACTURE GREAT TOE, PHALANX OR PHALANGES, WITH MANIP		
28496	32	270 07/01/08	207.99
28505	OPEN TREATMT OF FX,GREAT TOE,PHALANX OR PHALANGES, INCL INTERNAL FIXATION,WHEN PERFORMED		
28505	32	270 07/01/08	226.00
28510	CLOSED TREAT OF FX, PHALANX OR PHALANGES, OTHER THAN GREAT TOE; W/O MANIPULATION, EACH		
28510	32	270 07/01/08	60.27
28515	TREATMENT OF CLOSED FRACTURE, PHALANX OR PHALANGES,		
28515	32	270 07/01/08	75.33
28525	OPEN TREAT OF FRAC,PHALANX OR PHALANGES,OTHER THAN GREAT TOE,INCL INTERNAL FIXATION,EACH		
28525	32	270 07/01/08	188.32
28530	CLOSED TREATMENT OF SESAMOID FRACTURE		
28530	32	270 07/01/08	59.85
28540	CLOSED TREATMENT OF TARSAL BONE DISLOCATION, OTHER THAN TALOTARSAL; WITHOUT ANESTHESIA		
28540	32	270 07/01/08	150.66
28545	TREATMENT OF CLOSED TARSAL BONE DISLOCATION;		
28545	32	270 07/01/08	150.66
28546	PERCUTANEOUS SKELETAL FIXATION OF TARSAL BONE DISLOCATION, OTHER THAN TALOTARSAL,W MANIP		
28546	32	270 07/01/08	180.80
28555	OPEN TREATMENT OF TARSAL BONE DISLOCATION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED		
28555	32	270 07/01/08	677.97
28570	CLOSED TREATMENT OF TALOTARSAL JOINT DISLOCATION; WITHOUT ANESTHESIA		
28570	32	270 07/01/08	150.66
28575	TREATMENT OF CLOSED TALOTARSAL JOINT DISLOCATION;		
28575	32	270 07/01/08	150.66
28585	OPEN TREATMENT OF TALOTARSAL JOINT DISLOCATION,INCLUDES INTERNAL FIXATION,WHEN PERFORMED		
28585	32	270 07/01/08	677.97
28600	CLOSED TREATMENT OF TARSOMETATARSAL JOINT DISLOCATION; WITHOUT ANESTHESIA		
28600	32	270 07/01/08	105.45
28605	TREATMENT OF CLOSED TARSOMETATARSAL JOINT		
28605	32	270 07/01/08	105.45
28606	PERCUTANEOUS SKELETAL FIXATION OF TARSOMETATARSAL JOINT DISLOCATION, WITH MANIPULATION		
28606	32	270 07/01/08	180.80
28615	OPEN TREATMENT TARSOMETATARSAL JOINT DISLOCATION, INCL INTERNAL FIXATION, WHEN PERFORMED		
28615	32	270 07/01/08	376.66
28630	CLOSED TREATMENT OF METATARSOPHALANGEAL JOINT DISLOCATION; WITHOUT ANESTHESIA		
28630	32	270 07/01/08	132.31

28635	TREATMENT OF CLOSED METATARSOPHALANGEAL JOINT			
28635	32	270	07/01/08	105.45
28645	OPEN TREAT METATARSOPHALANGEAL JOINT DISLOCATION, INCL			INTERNAL FIXATION, WHEN PERFORMED
28645	32	270	07/01/08	376.66
28660	CLOSED TREATMENT OF INTERPHALANGEAL JOINT DISLOCATION; WITHOUT ANESTHESIA			
28660	32	270	07/01/08	68.02
28665	TREATMENT OF CLOSED INTERPHALANGEAL JOINT			
28665	32	270	07/01/08	75.33
28675	OPEN TREAT INTERPHALANGEAL JOINT DISLOCATION, INCLUDES			INTERNAL FIXATION, WHEN PERFORMED
28675	32	270	07/01/08	226.00
28705	ARTHRODESIS; PANTALAR			
28705	32	270	07/01/08	602.65
28715	ARTHRODESIS; TRIPLE			
28715	32	270	07/01/08	967.01
28725	ARTHRODESIS; SUBTALAR			
28725	32	270	07/01/08	753.31
28730	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL,			
28730	32	270	07/01/08	602.65
28735	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, MULTIPLE OR TRANSVERSE; WITH OSTEOTOMY			
28735	32	270	07/01/08	753.31
28737	ARTHRODESIS, W/TENDON LENGTHENING & ADVANCEMENT, MIDTARSAL, TARSAL NAVICULAR-CUNEIFORM			
28737	32	270	07/01/08	527.35
28740	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, SINGLE JOINT			
28740	32	270	07/01/08	301.31
28750	ARTHRODESIS, GREAT TOE;			
28750	32	270	07/01/08	267.97
28755	ARTHRODESIS, GREAT TOE;			
28755	32	270	07/01/08	226.00
28760	ARTHRODESIS, WITH EXTENSOR HALLUCIS LONGUS TRANSFER TO FIRST METATARSAL NECK, GREAT TOE			
28760	32	270	07/01/08	376.66
28810	AMPUTATION, METATARSAL, WITH TOE, SINGLE			
28810	32	270	07/01/08	376.66
28820	AMPUTATION, TOE;			
28820	32	270	07/01/08	180.80
28825	AMPUTATION, TOE;			
28825	32	270	07/01/08	150.66
29305	APPLICATION OF HIP SPICA CAST;			
29305	32	270	07/01/08	278.43
29325	APPLICATION OF HIP SPICA CAST;			
29325	32	270	07/01/08	285.82
29345	APPLICATION OF LONG LEG CAST (THIGH TO TOES);			
29345	32	270	07/01/08	114.34
29355	APPLICATION OF LONG LEG CAST (THIGH TO TOES);			
29355	32	270	07/01/08	91.33
29358	APPLICATION OF LONG LEG CAST BRACE			
29358	32	270	07/01/08	139.23
29365	APPLICATION OF CYLINDER CAST (THIGH TO ANKLE)			
29365	32	270	07/01/08	135.30
29405	APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES);			
29405	32	270	07/01/08	94.33
29425	APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES);			
29425	32	270	07/01/08	74.10
29425	50	270	07/01/08	111.15
29435	APPLICATION OF PATELLAR TENDON BEARING (PTB) CAST			
29435	32	270	07/01/08	82.21
29440	ADDING WALKER TO PREVIOUSLY APPLIED CAST			
29440	32	270	07/01/08	15.06
29445	APPLICATION OF RIGID TOTAL CONTACT LEG CAST			
29445	32	270	07/01/08	151.57
29450	APPLICATION OF CLUBFOOT CAST WITH MOLDING OR			
29450	32	270	07/01/08	55.24
29450	50	270	07/01/08	82.86
29505	APPLICATION OF LONG LEG SPLINT (THIGH TO ANKLE OR TOES)			
29505	32	270	07/01/08	45.18
29515	APPLICATION OF SHORT LEG SPLINT (CALF TO FOOT)			
29515	32	270	07/01/08	30.42
29540	STRAPPING; ANKLE AND/OR FOOT			
29540	32	270	07/01/08	26.97
29550	STRAPPING;			
29550	32	270	07/01/08	29.52
29580	STRAPPING;			
29580	32	270	07/01/08	20.21
29700	REMOVAL OR BIVALVING;			
29700	32	270	07/01/08	22.22
29705	REMOVAL OR BIVALVING;			
29705	32	270	07/01/08	24.91
29710	REMOVAL OR BIVALVING;			
29710	32	270	07/01/08	30.11
29715	REMOVAL OR BIVALVING;			
29715	32	270	07/01/08	30.11
29720	REPAIR OF SPICA, BODY CAST OR JACKET			
29720	32	270	07/01/08	25.40
29730	WINDOWING OF CAST			
29730	32	270	07/01/08	22.18
29740	WEDGING OF CAST (EXCEPT CLUBFOOT CASTS)			

29740		32	270	07/01/08	15.06
29750	WEDGING OF CLUBFOOT CAST;				
29750		32	270	07/01/08	15.06
29750	50	32	270	07/01/08	22.59
29799	UNLISTED PROCEDURE, CASTING OR STRAPPING				
29799		32	21J	02/01/80	
29891	ARTHROSCOPY, ANKLE, SURG; EXCISION OF OSTEOCHONDRAL DEFECT OF TALUS &/OR TIBIA, INCL DR				
29891		80 32	270	07/01/08	125.90
29891	50	80 32	270	07/01/08	188.85
29892	ARTHROSCOPICALLY AIDED REPAIR OF LARGE OSTEOCHONDRITIS DISSECANS LESION, TALAR DOME FRAC				
29892		80 32	270	07/01/08	120.32
29892	50	80 32	270	07/01/08	180.48
29893	ENDOSCOPIC PLANTAR FASCIOTOMY				
29893		32	270	07/01/08	328.16
29893	50	32	270	07/01/08	492.24
29893	ENDOSCOPIC PLANTAR FASCIOTOMY				
29893		80 32	270	07/01/08	65.63
29893	50	80 32	270	07/01/08	98.45
29904	ARTHROSCOPY, SUBTALAR JOINT, SURGICAL; WITH REMOVAL OF LOOSE BODY OR FOREIGN BODY				
29904		32	270	07/01/08	419.78
29904	50	32	270	07/01/08	629.67
29904	ARTHROSCOPY, SUBTALAR JOINT, SURGICAL; WITH REMOVAL OF LOOSE BODY OR FOREIGN BODY				
29904		80 32	220	01/01/08	
29905	ARTHROSCOPY, SUBTALAR JOINT, SURGICAL; WITH SYNOVECTOMY				
29905		32	270	07/01/08	452.46
29905	50	32	270	07/01/08	678.69
29905	ARTHROSCOPY, SUBTALAR JOINT, SURGICAL; WITH SYNOVECTOMY				
29905		80 32	220	01/01/08	
29906	ARTHROSCOPY, SUBTALAR JOINT, SURGICAL; WITH DEBRIDEMENT				
29906		32	270	07/01/08	476.55
29906	50	32	270	07/01/08	714.83
29906	ARTHROSCOPY, SUBTALAR JOINT, SURGICAL; WITH DEBRIDEMENT				
29906		80 32	220	01/01/08	
29907	ARTHROSCOPY, SUBTALAR JOINT, SURGICAL; WITH SUBTALAR ARTHRODESIS				
29907		32	270	07/01/08	582.28
29907	50	32	270	07/01/08	873.42
64450	INJECTION, ANESTHETIC AGENT;				
64450		32	270	07/01/08	74.37
73600	RADIOLOGIC EXAMINATION, ANKLE; TWO VIEWS				
73600		32	270	07/01/08	27.58
73600	RADIOLOGIC EXAMINATION, ANKLE; TWO VIEWS				
73600		26 32	270	07/01/08	9.03
73600	RADIOLOGIC EXAMINATION, ANKLE; TWO VIEWS				
73600		TC 32	270	07/01/08	18.56
73610	RADIOLOGIC EXAMINATION, ANKLE;				
73610		32	270	07/01/08	29.81
73610	RADIOLOGIC EXAMINATION, ANKLE;				
73610		26 32	270	07/01/08	9.75
73610	RADIOLOGIC EXAMINATION, ANKLE;				
73610		TC 32	270	07/01/08	20.04
73615	RADIOLOGIC EXAM, ANKLE, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION				
73615		32	270	07/01/08	110.34
73615	RADIOLOGIC EXAM, ANKLE, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION				
73615		26 32	270	07/01/08	31.22
73620	RADIOLOGIC EXAMINATION, FOOT; TWO VIEWS				
73620		32	270	07/01/08	27.58
73620	RADIOLOGIC EXAMINATION, FOOT; TWO VIEWS				
73620		26 32	270	07/01/08	9.03
73620	RADIOLOGIC EXAMINATION, FOOT; TWO VIEWS				
73620		TC 32	270	07/01/08	18.56
73630	RADIOLOGIC EXAMINATION, FOOT;				
73630		32	270	07/01/08	29.81
73630	RADIOLOGIC EXAMINATION, FOOT;				
73630		26 32	270	07/01/08	9.75
73630	RADIOLOGIC EXAMINATION, FOOT;				
73630		TC 32	270	07/01/08	20.04
73650	RADIOLOGIC EXAMINATION;				
73650		32	270	07/01/08	26.87
73650	RADIOLOGIC EXAMINATION;				
73650		26 32	270	07/01/08	9.03
73650	RADIOLOGIC EXAMINATION;				
73650		TC 32	270	07/01/08	17.84
73660	RADIOLOGIC EXAMINATION;				
73660		32	270	07/01/08	23.51
73660	RADIOLOGIC EXAMINATION;				
73660		26 32	270	07/01/08	7.52
73660	RADIOLOGIC EXAMINATION;				
73660		TC 32	270	07/01/08	16.00
81000	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES				
81000		32	270	07/01/08	4.41
81001	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN GLUCOSE, HEMOGLOBIN KETONES				
81001		32	270	07/01/08	4.41
81002	URINALYSIS, BY DIP STICK OR TABLET REAGENT; WITHOUT MICROSCOPY, NON-AUTOMATED				
81002		32	270	07/01/08	3.57
81003	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, ETC. AUTOMATED				

81003		32	270	07/01/08	3.13
81005	URINALYSIS; QUALITATIVE OR SEMIQUANTITATIVE, EXCEPT IMMUNOASSAYS				
81005		32	270	07/01/08	3.03
81007	URINALYSIS; BACTERIURIA SCREEN, EXCEPT BY CULTURE OR DIPSTICK				
81007		32	270	07/01/08	3.59
81015	URINALYSIS;				
81015		32	270	07/01/08	4.24
81025	URINE PREGNANCY TEST, BY VISUAL COLOR COMPARISON METHODS				
81025		32	270	07/01/08	8.83
81050	VOLUME MEASUREMENT FOR TIMED COLLECTION, EACH				
81050		32	270	07/01/08	4.18
81099	UNLISTED URINALYSIS PROCEDURE				
81099		32	21J	07/01/92	
82108	ALUMINUM				
82108		32	270	07/01/08	35.57
82310	CALCIUM; TOTAL				
82310		32	270	07/01/08	7.19
82330	CALCIUM; IONIZED				
82330		32	270	07/01/08	19.07
82728	FERRITIN				
82728		32	270	07/01/08	19.02
83015	HEAVY METAL (ARSENIC, BARIUM, BERYLLIUM, BISMUTH, ANTIMONY, MERCURY); SCREEN				
83015		32	270	07/01/08	26.29
83912	NUCLEAR MOLECULAR DIAGNOSTICS; INTEPRETATION AND REPORT				
83912		32	270	01/01/05	5.60
83912	NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT				
83912		26 32	270	07/01/08	18.71
84100	SHOSPHORUS INORGANIC (PHOSPHATE)				
84100		32	270	07/01/08	6.63
84550	URIC ACID; BLOOD				
84550		32	270	07/01/08	6.31
85004	BLOOD COUNT; AUTOMATED DIFFERENTIAL WBC COUNT				
85004		32	270	01/01/03	9.04
85007	BLOOD COUNT; BLOOD SMEAR, MICROSCOPIC EXAMINATION WITH MANUAL DIFFERENTIAL WBC COUNT				
85007		32	270	07/01/08	4.81
85009	BLOOD COUNT; MANUAL DIFFERENTIAL WBC COUNT, BUFFY COAT				
85009		32	270	07/01/08	5.19
85014	BLOOD COUNT; HEMATOCRIT (HCT)				
85014		32	270	07/01/08	3.30
85018	BLOOD COUNT; HEMOGLOBIN (HGB)				
85018		32	270	07/01/08	3.30
85025	BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB/HCT/RBC/WBC/PLATELET COUNT) DIFFERENTIAL WBC				
85025		32	270	07/01/08	10.85
85027	BLOOD COUNT; COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, WBC AND PLATELET COUNT)				
85027		32	270	07/01/08	9.04
85032	BLOOD COUNT, MANUAL CELL COUNT (ERYTHROCYTE, LEUKOCYTE, OR PLATELET) EACH				
85032		32	270	01/01/03	6.01
85041	BLOOD COUNT; RED BLOOD CELL(RBC), AUTOMATED				
85041		32	270	07/01/08	4.20
85049	BLOOD COUNT; PLATELET, AUTOMATED				
85049		32	270	01/01/03	6.25
86316	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE (EG, CA 50, 72-4, 549), EACH				
86316		32	270	07/01/08	29.05
86317	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUANTITATIVE, NOT OTHERWISE SPECIFIED				
86317		32	270	07/01/08	20.93
86318	IMMUNOASSAY FOR INFECTIOUS AGENT ANITBODY, QUALITATIVE OR SEMIQUANTITATIVE, SINGLE STEP				
86318		32	270	07/01/08	18.07
86332	IMMUNE COMPLEX ASSAY				
86332		32	270	07/01/08	34.02
86580	SKIN TEST; TUBERCULOSIS/ INTRADERMAL				
86580		32	270	07/01/08	9.30
87001	ANIMAL INOCULATION, SMALL ANIMAL;				
87001		32	270	07/01/08	18.45
87003	ANIMAL INOCULATION, SMALL ANIMAL;				
87003		32	270	07/01/08	23.49
87015	CONCENTRATION (ANY TYPE), FOR INFECTIOUS AGENTS				
87015		32	270	07/01/08	5.21
87040	CULTURE, BACTERIAL; BLOOD, AEROBIC WITH ISOLATION AND PRESUMPTIVE IDENTIF. OF ISOLATES				
87040		32	270	07/01/08	14.41
87045	CULTURE, BACTERIAL; STOOL, AEROBIC W/ISOLATION PRELIMINARY EXAM(EG, KIA, LIA) SALMONELLA/SHIGL				
87045		32	270	07/01/08	13.17
87070	CULTURE, BACTERIAL; ANY OTHER SOURCE EXCPT URINE, BLOOD OR STOOL, AEROBIC, W/ISOLATION/PRESU				
87070		32	270	07/01/08	12.02
87075	CULTURE, BACTERIAL; ANY SOURCE EXCPT BLOOD, ANAEROBIC W/ISOLATION PRESUMPTIVE ID OF ISOLATE				
87075		32	270	07/01/08	13.21
87076	CULTURE, BACTERIAL; ANAEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR DEFINITIVE IDENTI				
87076		32	270	07/01/08	11.27
87081	CULTURE, PRESUMPTIVE, PATHOGENIC ORGANISMS, SCREENING ONLY;				
87081		32	270	07/01/08	9.25
87084	CULT, PRESUMP, PATHOGENIC ORGANIS, SCREEN ONLY, COMMER KIT; COLONY ESTIMAT DENSITY CHART				
87084		32	270	07/01/08	10.52
87086	CULTURE, BACTERIAL; QUANTITATIVE COLONY COUNT, URINE				
87086		32	270	07/01/08	11.27
87088	CULTURE, BACTERIAL; WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF EACH ISOLATE, URINE				
87088		32	270	07/01/08	11.29

87101	CULTURE, FUNGI ISOLATION, WITH PRESUMPTIVE IDENTIFICATION OF ISOLATES; SKIN, HAIR, NAIL		
87101	32	270 07/01/08	10.77
87102	CULTURE, FUNGI, ISOLATION; OTHER SOURCE (EXCEPT BLOOD)		
87102	32	270 07/01/08	11.73
87103	CULTURE, FUNGI, ISOLATION		
87103	32	270 07/01/08	12.58
87106	CULTURE, FUNGI, DEFINITIVE IDENTIFICATION OF EACH ORGANISM; YEAST		
87106	32	270 07/01/08	14.41
87109	CULTURE, MYCOPLASMA, ANY SOURCE		
87109	32	270 07/01/08	13.91
87110	CULTURE, CHLAMYDIA, ANY SOURCE		
87110	32	270 07/01/08	27.35
87116	CULTURE, TUBERCLE OR OTHER ACID-FAST BACILLI W/ ISOLATION & PRESUMPTIVE IDENT OF ISOLATE		
87116	32	270 07/01/08	15.08
87118	CULTURE, MYCOBACTERIAL, DEFINITIVE IDENTIFICATION, EACH ISOLATE		
87118	32	270 07/01/08	15.28
87140	CULTURE, TYPING; IMMUNOFLUORESCENT METHOD, EACH ANTISERUM		
87140	32	270 07/01/08	6.36
87143	CULTURE, TYPING; GAS LIQUID CHROMATOGRAPHY OR HIGH PRESSURE LIQUID CHROMATOGRAPHY METHOD		
87143	32	270 07/01/08	17.49
87147	CULTURE, TYPING; IMMUNOLOGIC METHOD, OTHER THAN IMMUNOFLUORESCENCE, PER ANTISERUM		
87147	32	270 07/01/08	7.22
87158	CULTURE, TYPING;		
87158	32	270 07/01/08	7.30
87164	DARK FIELD EXAMINATION, ANY SOURCE (EG, PENILE, VAGINAL,		
87164	32	270 07/01/08	12.45
87164	DARK FIELD EXAMINATION, ANY SOURCE (EG, PENILE, VAGINAL,		
87164	26 32	270 07/01/08	18.71
87166	DARK FIELD EXAMINATION, ANY SOURCE (EG, PENILE, VAGINAL,		
87166	32	270 07/01/08	15.77
87176	HOMOGENIZATION, TISSUE, FOR CULTURE		
87176	32	270 07/01/08	8.21
87177	OVA AND PARASITES, DIRECT SMEARS, CONCENTRATION AND IDENTIFICATION		
87177	32	270 07/01/08	12.42
87181	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; AGAR DILUTION METHOD, PER AGENT		
87181	32	270 07/01/08	6.63
87184	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; DISK METHOD, PER PLATE (12 OR FEWER AGENTS)		
87184	32	270 07/01/08	9.63
87186	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MICRODILUTION OR AGAR DILUTION, EACH MULTI-		
87186	32	270 07/01/08	12.06
87187	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MICRODILUTION OR AGAR DILUTION, MIN LETHAL		
87187	32	270 07/01/08	14.47
87188	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT, MACROBROTH DILUTION METHOD, EACH AGENT		
87188	32	270 07/01/08	9.26
87190	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MYCOBACTERIA, PROPORTION METHOD, EACH AGENT		
87190	32	270 07/01/08	4.02
87197	SERUM BACTERICIDAL TITER (SCHLICHTER TEST)		
87197	32	270 07/01/08	20.97
87205	SMEAR, PRIMARY SOURCE W/ INTERPRETATION; GRAM/GIEMSA STAIN FOR BACTERIA, FUNGI, OR CELL TYP		
87205	32	270 07/01/08	5.96
87206	SMEAR, PRIMARY SOURCE W/ INTERP; FLUORESCENT & O ACID FAST STAIN FOR BACTERIA, FUNGI, PARA		
87206	32	270 07/01/08	7.49
87207	SMEAR, PRIMARY SOURCE W/ INTERP; SPECIAL STAIN FOR INCLUSION BODIES OR PARASITES		
87207	32	270 07/01/08	8.36
87207	SMEAR, PRIMARY SOURCE W/ INTERP; SPECIAL STAIN FOR INCLUSION BODIES OR PARASITES		
87207	26 32	270 07/01/08	20.12
87210	SMEAR, PRIMARY SOURCE WITH INTERPRETATION; WET MOUNT FOR INFECTIOUS AGENTS (SALINE, INDIA		
87210	32	270 07/01/08	5.96
87220	TISSUE EXAMINATION BY KOH SLIDE OF SAMPLES FROM SKIN, HAIR, OR NAILS FOR FUNGI OR ECTOPA		
87220	32	270 07/01/08	5.96
87230	TOXIN OR ANTITOXIN ASSAY, TISSUE CULTURE (EG, CLOSTRIDIUM		
87230	32	270 07/01/08	27.55
87250	VIRUS ISOLATION; INOCULATION OF EMBRYONATED EGGS/SMALL ANIMAL, INCL OBSERVATION & DISSEC		
87250	32	270 07/01/08	27.29
87252	VIRUS ISOLATION; TISSUE CULTURE INOCULATION, OBSERVATION, & PRESUMPTIVE IDENT BY CYTOPAT		
87252	32	270 07/01/08	36.38
87253	VIRUS ISOLATION, TISSUE CULTURE, ADDITIONAL STUDIES/DEFINITIVE IDENTIFICATION, EACH ISOL		
87253	32	270 07/01/08	19.46
87260	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; ADENOVIRUS		
87260	32	270 07/01/08	16.75
87265	INFECTIOUS AGENT ANTIGEN DETECT BY DIRECT FLUORESC ANTIBODY TECHN; BORDETELLA PERTUSSIS		
87265	32	270 07/01/08	16.75
87270	INFECTIOUS AGENT ANTIGEN DETECT BY FLUORESC ANTIBODY TECHN; CHLAMYDIA TRACHOMATIS		
87270	32	270 07/01/08	16.75
87271	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; CYTOMEGALOVIRUS, DIRE		
87271	32	270 01/01/03	16.76
87272	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; CRYPTOSPORIDIUM		
87272	32	270 07/01/08	16.75
87274	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; HERPES SIMPLEX VIRUS I		
87274	32	270 07/01/08	16.75
87276	INFECTIOUS AGENT ANTIGEN DETECT BY DIRECT FLUORESC ANTIBODY TECHN; INFLUENZA A VIRUS		
87276	32	270 07/01/08	16.75
87278	INFECTIOUS AGENT ANTIGEN DETECT BY DIRECT FLUORESC ANTIBODY TECHN; LEGIONELLA PNEUMOPHILA		
87278	32	270 07/01/08	16.75
87280	INFECTIOUS AGENT ANTIGEN DETECT BY DIRECT FLUORESC ANTIBODY TECHN; RESPIRATORY SYNCYTIAL		

87280	32	270	07/01/08	16.75
87285	INFECTIOUS AGENT ANTIGEN DETECT BY DIRECT	FLUORES ANTIBODY TECHN; TREPONEMA PALLIDUM		
87285	32	270	07/01/08	16.75
87290	INFECTIOUS AGENT ANTIGEN DETECT BY DIRECT	FLUORES ANTIBODY TECHN; VARICELLA ZOSTER VIRU		
87290	32	270	07/01/08	16.75
87299	INFECTIOUS AGENT ANTIGEN DETECTION	IMMUNOASSAY TECHN; NOT OTHERWISE SPECIFIED, EACH		
87299	32	270	07/01/08	16.75
87301	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; ADENOVIRUS ENTERIC TYPES 40		
87301	32	270	07/01/08	16.75
87320	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 CHLAMYDIA TRACHO		
87320	32	270	07/01/08	16.75
87324	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; MULTI STEP; CLOSTRIDIUM DIFFI		
87324	32	270	07/01/08	16.75
87328	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN, QUALT/SEMIQUANT, MULTI STEP		
87328	32	270	07/01/08	16.75
87332	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 CYTOMEGALOVIRUS		
87332	32	270	07/01/08	16.75
87335	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 ESCHERICHIA COL		
87335	32	270	07/01/08	16.75
87340	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 HEPATITIS B SURF		
87340	32	270	07/01/08	14.41
87350	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 HEPATITIS BE AN		
87350	32	270	07/01/08	16.08
87380	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 HEPATITIS, DELTA		
87380	32	270	07/01/08	22.92
87385	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 HISTOPLASMA CAP		
87385	32	270	07/01/08	16.75
87390	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 HIV-1		
87390	32	270	07/01/08	24.62
87391	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 HIV-2		
87391	32	270	07/01/08	24.62
87420	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 RESPIRATORY SYN		
87420	32	270	07/01/08	16.75
87425	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 ROTAVIRUS		
87425	32	270	07/01/08	16.75
87430	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; TYPES 40/41 STREPTOC, GRP A		
87430	32	270	07/01/08	16.75
87449	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; MULTI STEP, NOT OTHERWISE SPE		
87449	32	270	07/01/08	16.75
87450	INFECTIOUS AGENT ANTIGEN DETECT BY ENZYME	IMMUNOASSAY TECHN; SINGLE STEP, NOT OTHERWISE SP		
87450	32	270	07/01/08	13.38
87470	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	BARTONELLA HENSELAE & BARTONELLA QUINTANA, DIRE		
87470	32	270	07/01/08	27.99
87471	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	BARTONELLA HENSELAE & BARTONEL QUINT, AMPLIFIED		
87471	32	270	07/01/08	48.99
87472	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	BARTONELL HENSELAI & BARTONEL QUINT, QUANTIFICA		
87472	32	270	01/01/03	59.85
87475	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	BORRELIA BURGDORFERIA, DIRECT PROBE TECHNIQUE		
87475	32	270	07/01/08	27.99
87476	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	BORRELIA BURGDORFERI, AMPLIFIED PROBE TECHNIQUE		
87476	32	270	07/01/08	48.99
87477	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID;	BORRELIA BURGDORFERI, QUANTIFICATION		
87477	32	270	01/01/03	59.85
87480	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CANDIDA SPECIES, DIRECT PROBE TECHNIQUE		
87480	32	270	07/01/08	27.99
87481	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CANDIDA SPECIES, AMPLIFIED PROBE TECHNIQUE		
87481	32	270	07/01/08	48.99
87482	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CANDIDA SPECIES, QUANTIFICATION		
87482	32	270	01/01/03	58.33
87485	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CHLAMYDIA PNEUMONIAE, DIRECT PROBE TECHNIQUE		
87485	32	270	07/01/08	27.99
87486	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CHLAMYDIA PNEUMONIAE, AMPLIFIED PROBE TECHNIQUE		
87486	32	270	07/01/08	48.99
87487	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CHLAMYDIA PNEUMONIAE, QUANTIFICATION		
87487	32	270	01/01/03	59.85
87490	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CHLAMYDIA TRACHOMATIS, DIRECT PROBE TECHNIQUE		
87490	32	270	07/01/08	27.99
87491	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CHLAMYDIA TRACHOMATIS, AMPLIFIED PROBE TECHNIQ		
87491	32	270	07/01/08	48.99
87492	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CHLAMYDIA TRACHOMATIS, QUANTIFICATION		
87492	32	270	01/01/03	48.84
87495	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CYTOMEGALOVIRUS, DIRECT PROBE TECHNIQUE		
87495	32	270	07/01/08	27.99
87496	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CYTOMEGALOVIRUS, AMPLIFIED PROBE TECHNIQUE		
87496	32	270	07/01/08	48.99
87497	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	CYTOMEGALOVIRUS, QUANTIFICATION		
87497	32	270	01/01/03	59.85
87510	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	GARDNERELLA VAGINALIS, DIRECT PROBE TECHNIQUE		
87510	32	270	07/01/08	27.99
87511	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	GARDNERELLA VAGINALIS, AMPLIFIED PROBE TEHNIQ		
87511	32	270	07/01/08	48.99
87512	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	GARDNERELLA VAGINALIS, QUANTIFICATION		
87512	32	270	01/01/03	58.33
87515	INFECTIOUS AGENT DETECT BY NUCLEIC ACID;	HEPATITIS B VIRUS, DIRECT PROBE TECHNIQUE		
87515	32	270	07/01/08	27.99

87516	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HEPATITIS B VIRUS, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87517	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HEPATITIS B VIRUS, QUANTIFICATION	32	270	01/01/03	59.85
87520	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HEPATITIS C, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87521	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HEPATITIS C, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87522	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HEPATITIS C, QUANTIFICATION	32	270	01/01/03	59.85
87525	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HEPATITIS G, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87526	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HEPATITIS G, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87527	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HEPATITIS G, QUANTIFICATION	32	270	01/01/03	58.33
87528	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HERPES SIMPLEX VIRUS, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87529	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HERPES SIMPLEX VIRUS, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87530	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HERPES SIMPLEX VIRUS, QUANTIFICATION	32	270	01/01/03	59.85
87531	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HERPES VIRUS-6, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87532	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HERPES VIRUS-6, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87533	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HERPES VIRUS-6, QUANTIFICATION	32	270	01/01/03	58.33
87534	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HIV-1, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87535	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HIV-1, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87536	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HIV-1, QUANTIFICATION	32	270	01/01/03	118.89
87537	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HIV-2, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87538	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; HIV-2, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87539	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; HIV-2, QUANTIFICATION	32	270	01/01/03	59.85
87540	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; LEGIONELLA PNEUMOPHILA, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87541	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; LEGIONELLA PNEUMOPHILA, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87542	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; LEGIONELLA PNEUMOPHILA, QUANTIFICATION	32	270	01/01/03	58.33
87550	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOBACTERIA SPECIES, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87551	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOBACTERIA SPECIES, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87552	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOBACTERIA SPECIES, QUANTIFICATION	32	270	01/01/03	59.85
87555	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOBACTERIA TUBERCULOSIS, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87556	INFECTIOUS AGENT BY NUCLEIC ACID; MYCOBACTERIA TUBERCULOSIS, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87557	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; MYCOBACTERIA TUBERCULOSIS, QUANTIFICATION	32	270	01/01/03	59.85
87560	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOBACTERIA AVIUM-INTRACELLULARE, DIRECT PROBE	32	270	07/01/08	27.99
87561	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOBACTERIA AVIUM-INTRACELLULARE, AMPLIFIED PR	32	270	07/01/08	48.99
87562	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOBACTERIA AVIUM-INTRACELLULARE, QUANTIFICATI	32	270	01/01/03	59.85
87580	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOPLASMA PNEUMONIAE, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87581	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOPLASMA PNEUMONIAE, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87582	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; MYCOPLASMA PNEUMONIAE, QUANTIFICATION	32	270	01/01/03	58.33
87590	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; NEISSERIA GONORRHOEAE, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87591	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; NEISSERIA GONORRHOEAE, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87592	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; NEISSERIA GONORRHOEAE, QUANTIFICATION	32	270	07/01/08	59.85
87620	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; PAPILOMAVIRUS, HUMAN, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87621	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; PAPILOMAVIRUS, HUMAN, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99
87622	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; PAPILOMAVIRUS, HUMAN, QUANTIFICATION	32	270	01/01/03	58.33
87650	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; STREPTOCOCCUS, GROUP A, DIRECT PROBE TECHNIQUE	32	270	07/01/08	27.99
87651	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; STREPTOCOCCUS, GROUP A, AMPLIFIED PROBE TECHNIQUE	32	270	07/01/08	48.99

87651	32	270	07/01/08	48.99
87652	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; STREPTOCOCCUS, GROUP A, QUANTIFICATION	270	01/01/03	58.33
87652	32	270	07/01/08	27.99
87797	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; NOT OTHERWISE SPECIFIED, DIRECT PROBE TECHNIQUE	270	07/01/08	48.99
87797	32	270	01/01/03	59.85
87798	INFECTIOUS AGENT DETECT BY NUCLEIC ACID; NOT OTHERWISE SPECIFIED, AMPLIFIED PROBE TECHNI	270	07/01/08	48.99
87798	32	270	07/01/08	48.99
87799	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID, NOT OTHERWISE SPECIFIED, QUANTIFICATION, EACH	270	01/01/03	59.85
87799	32	270	01/01/03	59.85
87999	UNLISTED MICROBIOLOGY PROCEDURE	21J	07/01/92	
87999	32	21J	02/01/00	
87999	UNLISTED MICROBIOLOGY PROCEDURE	21J	02/01/00	
87999	26 32	21J	02/01/00	
88230	TISSUE CULTURE FOR NON-NEOPLASTIC DISORDERS; LYMPHOCYTE	270	07/01/08	69.51
88230	32	270	07/01/08	69.51
88233	TISSUE CULTURE FOR CHROMOSOME ANALYSIS	270	07/01/08	69.51
88233	32	270	07/01/08	69.51
88235	TISSUE CULTURE FOR CHROMOSOME ANALYSIS	270	07/01/08	69.51
88235	32	270	07/01/08	69.51
88237	TISSUE CULTURE FOR NEOPLASTIC DISORDERS; BONE MARROW, BLOOD CELLS	270	07/01/08	69.51
88237	32	270	07/01/08	69.51
88239	TISSUE CULTURE FOR NEOPLASTIC DISORDERS; SOLID TUMOR	270	07/01/08	69.51
88239	32	270	07/01/08	69.51
88245	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE SISTER CHROMATID EXCHANGE/20-25 CEL	270	07/01/08	207.78
88245	32	270	07/01/08	207.78
88248	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE BREAKAGE, SCORE 50-100 CELLS	270	07/01/08	241.71
88248	32	270	07/01/08	241.71
88263	CHROMOSOME ANALYSIS	270	07/01/08	209.75
88263	32	270	07/01/08	209.75
88269	CHROMOSOME ANALYSIS, IN SITU FOR AMNIOTIC FLUID CELLS, COUNT	270	07/01/08	232.15
88269	32	270	07/01/08	232.15
88283	CHROMOSOME ANALYSIS	270	07/01/08	95.74
88283	32	270	07/01/08	95.74
88289	CHROMOSOME ANALYSIS	270	07/01/08	48.06
88289	32	270	07/01/08	48.06
88358	MORPHOMETRIC ANALYSIS; TUMOR (EG, DNA PLOIDY)	270	07/01/08	71.52
88358	32	270	07/01/08	71.52
88358	MORPHOMETRIC ANALYSIS; TUMOR (EG, DNA PLOIDY)	270	07/01/08	53.83
88358	26 32	270	07/01/08	53.83
88362	NERVE TEASING PREPARATIONS	270	07/01/08	149.76
88362	32	270	07/01/08	149.76
88362	NERVE TEASING PREPARATIONS	270	07/01/08	112.96
88362	26 32	270	07/01/08	112.96
88365	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	270	07/01/08	60.61
88365	32	270	07/01/08	60.61
90585	BACILLUS CALMETTE-GUERIN VACCINE (BCG) FOR TUBERCULOSIS, LIVE, FOR PERCUTANEOUS USE	21J	10/01/03	
90585	32	21J	10/01/03	
97012	TRACTION/ MECHANICAL	270	07/01/08	13.73
97012	32	270	07/01/08	13.73
97016	VASOPNEUMATIC DEVICES	270	07/01/08	13.73
97016	32	270	07/01/08	13.73
97018	PARAFFIN BATH	270	07/01/08	13.73
97018	32	270	07/01/08	13.73
97022	WHIRLPOOL	270	07/01/08	13.73
97022	32	270	07/01/08	13.73
97024	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; DIATHERMY (EG, MICROWAVE)	270	07/01/08	13.73
97024	32	270	07/01/08	13.73
97026	INFRARED	270	07/01/08	13.73
97026	32	270	07/01/08	13.73
97028	ULTRAVIOLET	270	07/01/08	13.73
97028	32	270	07/01/08	13.73
97032	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (MANUAL), EA 15 MIN	270	07/01/08	14.72
97032	32	270	07/01/08	14.72
97033	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; IONTOPHORESIS, EACH 15 MINUTES	270	07/01/08	15.46
97033	32	270	07/01/08	15.46
97034	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CONTRAST BATHS, EACH 15 MINUTES	270	07/01/08	10.47
97034	32	270	07/01/08	10.47
97035	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ULTRASOUND, EACH 15 MINUTES	270	07/01/08	12.15
97035	32	270	07/01/08	12.15
97036	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HUBBARD TANK, EACH 15 MINUTES	270	07/01/08	22.44
97036	32	270	07/01/08	22.44
97039	UNLISTED MODALITY(SPECIFY TYPE AND TIME IF CONSTANT ATTENDANCE)	270	07/01/08	13.73
97039	32	270	07/01/08	13.73
97110	THERAPEUTIC PROC, ONE OR MORE AREAS, EA 15 MIN, THERAPEUTIC EXERCISES TO DEVELOP STRENGTH	270	07/01/08	16.47
97110	32	270	07/01/08	16.47
97112	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE	270	07/01/08	16.47
97112	32	270	07/01/08	16.47
97113	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS; AQUATIC THERAPY WITH THERAPEUTIC EXERCISES	270	07/01/08	24.28
97113	32	270	07/01/08	24.28
97116	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS; GAIT TRAINING (INCLUDES STAIR CLIMBING)	270	07/01/08	16.47
97116	32	270	07/01/08	16.47
97124	THERAPEUTIC PROC, ONE OR MORE AREAS; MASSAGE, INCL EFFLEURAGE, PETRISSAGE &/OR TAPOTEMEN	270	07/01/08	16.47
97124	32	270	07/01/08	16.47
97139	UNLISTED THERAPEUTIC PROCEDURE (SPECIFY)	270	07/01/08	16.47
97139	32	270	07/01/08	16.47



99000	HANDLING AND/OR CONVEYANCE OF SPECIMEN FOR TRANSFER FROM THE PHYSICIAN'S OFFICE TO A LAB			
99000	32	270	07/01/08	3.92
99001	HANDLING AND/OR CONVEYANCE OF SPECIMEN FOR TRANSFER FROM THE PATIENT IN OTHER THAN A PHY			
99001	32	270	07/01/08	3.92
99070	SUPPLIES AND MATERIALS (EXCEPT SPECTACLES), PROVIDED BY THE PHYSICIAN			
99070	32	270	07/01/08	16.20
99199	UNLISTED SPECIAL SERVICE, PROCEDURE OR REPORT			
99199	32	21J	07/01/74	
99201	OFFICE/OP VISIT-NEW PATIENT: PROB-FOCUSED HIST/EXAM & STRAIGHT MED DECISION (10 MIN)			
99201	32	270	07/01/08	22.00
99202	OFFICE/OP VISIT-NEW PATIENT:EXPAND PROB-FOCUSED HIST/EXAM & STRAIGHT MED DECISION(20MIN)			
99202	32	270	07/01/08	37.01
99203	OFFICE/OP VISIT-NEW PATIENT: DETAILED HIST/EXAM & MED DECISION-LOW COMPLEXITY (30 MIN)			
99203	32	270	07/01/08	55.33
99211	OFFICE/OP VISIT-ESTABLISHED PATIENT: (5 MINUTES)			
99211	32	270	07/01/08	12.19
99212	OFFICE/OP VISIT-ESTABLISHED PATIENT:(10 MINUTES)			
99212	32	270	07/01/08	21.96
99213	OFFICE/OP VISIT-ESTABLISHED PATIENT (15 MINUTES)			
99213	32	270	07/01/08	30.30
99221	INITIAL HOSP CARE/DAY:COMPREHENSIVE HIST/EXAM, STRAIGHTFORWARD/LOW COMPLEX MED DECISION			
99221	32	270	07/01/08	60.63
99222	INITIAL HOSP CARE/DAY:COMPREHENSIVE HIST/EXAM & MED DECISION-MOD COMPLEXITY (50 MIN)			
99222	32	270	07/01/08	66.79
99231	SUBSEQUENT HOSP CARE/DAY:PROB-FOCUS INTERVL HIST/EXAM, STRAIGHT MED DECSN-LOW COMP-15MIN			
99231	32	270	07/01/08	20.62
99232	SUBSEQUENT HOSP CARE/DAY:EXPAND PROB-FOCUS INTVL HIST/EXAM, MED DECISION-MOD COMP-25 MIN			
99232	32	270	07/01/08	25.82
99234	OBSERV OR INPATIENT HOSP CARE FOR THE EVAL/MNGT OF A PT INCL ADMIT & DISCH, LOW SEVERITY			
99234	32	270	07/01/08	104.21
99235	OBSERV OR INPATIENT HOSP CARE FOR EVAL/MGT OF A PT INCL ADMIT & DISCH, MODERATE SEVERITY			
99235	32	270	07/01/08	142.60
99236	OBSERV OR INPATIENT HOSP CARE FOR THE EVAL/MGT OF A PT INCL ADMIT & DISCH, HIGH SEVERITY			
99236	32	270	07/01/08	171.91
99238	HOSPITAL DISCHARGE DAY MANAGEMENT; 30 MINUTES OR LESS			
99238	32	270	07/01/08	37.97
99239	HOSPITAL DISCHARGE DAY MANAGEMENT; MORE THAN 30 MINUTES			
99239	32	270	07/01/08	78.42
99241	OFFICE CONSULT-NEW/ESTBLHD PAT:PROB-FOCUSED HIST/EXAM & STRAIGHT MED DECISION-(15 MIN)			
99241	32	270	07/01/08	47.56
99242	OFFICE CONSULT-NEW/ESTBLHD PAT:EXPAND PROB FOCUS HIST/EXAM, STRAIGHT MED DECISION-30 MIN			
99242	32	270	07/01/08	58.11
99251	INPT CONSULT-NEW/ESTBLH PAT; PROB FOCUSED HIST/EXAM, STRAIGHT MED DECISION (20 MIN)			
99251	32	270	07/01/08	47.56
99252	INPT CONSULT-NEW/ESTBLH PAT;EXPAND PROB-FOCUS HIST/EXAM, STRAIGHT MED DECISION (40 MIN)			
99252	32	270	07/01/08	58.11
99281	EMERGENCY DEPART VISIT:PROB-FOCUSED HIST/EXAM & STRAIGHT MED DECISION			
99281	32	270	07/01/08	20.21
99282	EMERGENCY DEPART VISIT:EXPANDED PROB-FOCUSED HIST/EXAM & MED DECISION-LOW COMPLEXITY			
99282	32	270	07/01/08	22.13
99283	EMERGENCY DEPART VISIT:EXPANDED PROB-FOCUSED HIST/EXAM & MED DECISION-MODERATE COMPLEXTY			
99283	32	270	07/01/08	22.98
99284	EMERGENCY DEPART VISIT:DETAILED HIST/EXAM & MED DECISION-MOD COMPLEXITY			
99284	32	270	07/01/08	27.26
99285	EMERGENCY DEPART VISIT:COMPREHENSIVE HIST/EXAM & MED DECISION-HIGH COMPLEXITY			
99285	32	270	07/01/08	37.77
99307	SUBSEQUENT NURSING FACILITY CARE, PER DAY, E/M OF PAT; STRAIGHTFORWARD MED DEC MAKING			
99307	32	270	07/01/08	28.66
99308	SUBSEQUENT NURSING FACILITY CARE, PER DAY, E/M OF PAT;MED DEC MAKING OF LOW COMPLEXITY			
99308	32	270	07/01/08	47.50
99315	NURSING FACILITY DISCHARGE DAY MANAGEMENT; 30 MINUTES OR LESS			
99315	32	270	07/01/08	54.61
99316	NURSING FACILITY DISCHARGE DAY MANAGEMENT; 30 MINUTES OR LESS MORE THAN 30 MINUTES			
99316	32	270	07/01/08	72.08
99324	DOMICILIARY OR REST HOME VISIT FOR E & M OF A NEW PATIENT,WHICH REQ 3 KEY COMPONENTS			
99324	32	270	07/01/08	49.31
99325	DOMICILIARY OR REST HOME VISIT FOR E & M OF A NEW PATIENT,WHICH REQ 3 KEY COMPONENTS			
99325	32	270	07/01/08	72.33
99326	DOMICILIARY OR REST HOME VISIT FOR E & M OF A NEW PATIENT,WHICH REQ 3 KEY COMPONENTS			
99326	32	270	07/01/08	104.43
99334	DOMICILIARY OR REST HOME VISIT FOR E & M OF AN ESTABLISHED PATIENT,REQ 2 OF 3 COMPONENTS			
99334	32	270	07/01/08	38.11
99335	DOMICILIARY OR REST HOME VISIT FOR E & M OF AN ESTABLISHED PATIENT,REQ 2 OF 3 COMPONENTS			
99335	32	270	07/01/08	60.50
99336	DOMICILIARY OR REST HOME VISIT FOR E & M OF AN ESTABLISHED PATIENT,REQ 2 OF 3 COMPONENTS			
99336	32	270	07/01/08	93.52
99341	HOME VISIT FOR THE E & M VISIT OF A NEW PATIENT			
99341	UA 32	270	07/01/08	22.21
99341	HOME VISIT-NEW PATIENT:PROB-FOCUSED HIST/EXAM & STRAIGHTFORWARD MEDICAL DECISION MAKING			
99341	32	270	07/01/08	23.56
99342	HOME VISIT-NEW PATIENT:EXPANDED PROB-FOCUSED HIST/EXAM & LOW COMPLEXITY MED DECISION			
99342	32	270	07/01/08	33.69
99343	HOME VISIT-NEW PATIENT:DETAILED HIST/EXAM & MOD COMPLEXITY MED DECISION MAKING			
99343	32	270	07/01/08	47.18
99344	HOME VISIT FOR THE EVALUATION AND MANAGMENT OF A NEW PATIENT, MODERATE COMPLEXITY			

99344	32	270	07/01/08	145.48
99345	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, HIGH COMPLEXITY	270	07/01/08	180.09
99345	32	270	07/01/08	180.09
99347	HOME VISIT FOR THE E & M VISIT OF AN ESTABLISHED PATIENT	270	07/01/08	19.04
99347	UA 32	270	07/01/08	19.04
99347	HOME VISIT FOR THE EXALUATION & MANAGEMENT OF AN ESTABLISHED PATIENT, MINOR	270	07/01/08	40.01
99347	32	270	07/01/08	40.01
99348	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, LOW-MOD SEVERITY	270	07/01/08	63.50
99348	32	270	07/01/08	63.50
99349	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, MOD-HIGH SEVERIT	270	07/01/08	98.45
99349	32	270	07/01/08	98.45
99350	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, MOD-HIGH SEVERITY	270	07/01/08	145.48
99350	32	270	07/01/08	145.48
99499	UNLISTED EVALUATION AND MANAGEMENT SERVICE	21J	01/01/92	
99499	32	21J	01/01/92	
A4490	SURGICAL STOCKINGS ABOVE KNEE LENGTH, EACH	120	07/01/77	
A4490	32	120	07/01/77	
A4495	SURGICAL STOCKINGS THIGH LENGTH, EACH	120	07/01/77	
A4495	32	120	07/01/77	
A4500	SURGICAL STOCKINGS BELOW KNEE LENGTH, EACH	120	07/01/77	
A4500	32	120	07/01/77	
A4510	SURGICAL STOCKINGS FULL LENGTH, EACH	120	07/01/77	
A4510	32	120	07/01/77	
A6244	HYRODCEL DRESSING, WOUND COVER, PAD SIZE>48 SQ.IN.WITHOUT ADHESIVE BORDER, EACH DRESSING	170	07/01/08	17.86
A6244	32	170	07/01/08	17.86
G0247	ROUTINE FOOT CARE BY A PHYSICIAN OF A DIABETIC PATIENT WITH DIABETIC SENSORY NEUROPATHY	220	01/01/03	
G0247	32	220	01/01/03	
J0120	INJECTION, TETRACYCLINE, UP TO 250 MG	270	10/01/05	7.82
J0120	32	270	10/01/05	7.82
J0170	INJECTION, ADRENALIN, EPINEPHRIN, UP TO 1 ML AMPULE	270	10/01/08	.74
J0170	32	270	10/01/08	.74
J0190	INJECTION, BIPERIDEN LACTATE, PER 5 MG	270	10/01/05	3.22
J0190	32	270	10/01/05	3.22
J0200	INJECTION, ALATROFLOXACIN MESYLATE, 100 MG	270	10/01/05	16.99
J0200	32	270	10/01/05	16.99
J0205	INJECTION, ALGLUCERASE, PER 10 UNITS	270	07/01/08	40.39
J0205	32	270	07/01/08	40.39
J0207	INJECTION, AMIFOSTINE, 500 MG	270	10/01/08	424.03
J0207	32	270	10/01/08	424.03
J0210	INJECTION, METHYLDOPATE HCI, UP TO 250 MG	270	10/01/05	1.62
J0210	32	270	10/01/05	1.62
J0256	INJECTION ALPHA 1 - PROTEINASE INHIBITOR - HUMAN, 10 MG	270	10/01/08	3.69
J0256	32	270	10/01/08	3.69
J0270	INJECTION, ALPROSTADIL, 1.25 MCG	270	10/01/08	.44
J0270	32	270	10/01/08	.44
J0280	INJECTION, AMINOPHYLLIN, UP TO 250 MG	270	10/01/08	.39
J0280	32	270	10/01/08	.39
J0290	INJECTION, AMPICILLIN SODIUM, 500 MG	270	10/01/08	2.16
J0290	32	270	10/01/08	2.16
J0295	INJECTION, AMPICILLIN SODIUM/SULBACTAM SODIUM, PER 1.5 GM	270	10/01/08	4.07
J0295	32	270	10/01/08	4.07
J0350	INJECTION, ANISTREPLASE, PER 30 UNITS	270	10/01/05	2381.89
J0350	32	270	10/01/05	2381.89
J0360	INJECTION, HYDRALAZINE HCI, UP TO 20 MG	270	10/01/08	4.99
J0360	32	270	10/01/08	4.99
J0380	INJECTION, METARAMINOL BITARTRATE, PER 10 MG	270	10/01/05	1.15
J0380	32	270	10/01/05	1.15
J0390	INJECTION, CHLOROQUINE HCI, UP TO 250 MG	270	10/01/05	3.72
J0390	32	270	10/01/05	3.72
J0456	INJECTION, AZITHROMYCIN, 500 MG	270	10/01/08	10.99
J0456	32	270	10/01/08	10.99
J0460	INJECTION, ATROPINE SULFATE, UP TO 0.3 MG	270	10/01/08	.21
J0460	32	270	10/01/08	.21
J0470	INJECTION, DIMERCAPROL, PER 100 MG	270	10/01/08	26.76
J0470	32	270	10/01/08	26.76
J0500	INJECTION, DICYCLOMINE HCI, UP TO 20 MG	270	10/01/05	8.02
J0500	32	270	10/01/05	8.02
J0515	INJECTION, BENZTROPINE MESYLATE, 1 MG	270	10/01/08	26.30
J0515	32	270	10/01/08	26.30
J0520	INJECTION, BETHANECHOL CHLORIDE, MYTONACHOL OR URECHOLINE, UP TO 5 MG	270	10/01/05	4.49
J0520	32	270	10/01/05	4.49
J0530	INJECTION, PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE, UP TO 600,000 UNITS	270	10/01/08	14.75
J0530	32	270	10/01/08	14.75
J0540	INJECTION, PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE, UP TO 1,200,000 UNITS	270	10/01/05	11.32
J0540	32	270	10/01/05	11.32
J0550	INJECTION, PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE, UP TO 2,400,000 UNITS	270	10/01/08	32.61
J0550	32	270	10/01/08	32.61
J0560	INJECTION PENICILLIN G BENZATHINE, UP TO 600,000 UNITS	270	10/01/08	23.44
J0560	32	270	10/01/08	23.44
J0570	INJECTION, PENICILLIN G BENZATHINE, UP TO 1,200,000 UNITS	270	10/01/05	10.97
J0570	32	270	10/01/05	10.97
J0580	INJECTION, PENICILLIN G BENZATHINE, UP TO 2,400,000 UNITS	270	10/01/05	19.93
J0580	32	270	10/01/05	19.93
J0585	BOTULINUM TOXIN TYPE A, PER UNIT	270	10/01/08	5.40
J0585	32	270	10/01/08	5.40

J0600	INJECTION, EDETATE CALCIUM DISODIUM, UP TO 1000 MG		
J0600	32	270 10/01/05	18.64
J0610	INJECTION, CALCIUM GLUCONATE, 10 ML		
J0610	32	270 10/01/08	.32
J0620	INJECTION, CALCIUM GLYCEROPHOSPHATE AND CALCIUM LACTATE, PER 10 ML		
J0620	32	270 10/01/05	8.96
J0630	INJECTION, CALCITONIN-SALMON, UP TO 400 UNITS		
J0630	32	270 10/01/05	30.74
J0640	INJECTION, LEUCOVORIN CALCIUM, PER 50 MG		
J0640	32	270 10/01/08	.84
J0690	INJECTION, CEFAZOLIN SODIUM, 500 MG		
J0690	32	270 07/01/08	.55
J0696	INJECTION, CEFTRIAXONE SODIUM, PER 250 MG		
J0696	32	270 10/01/08	1.42
J0697	INJECTION, STERILE CEFUROXIME SODIUM, PER 750 MG		
J0697	32	270 10/01/08	4.00
J0698	CEFOTAXIME SODIUM, PER GM		
J0698	32	270 10/01/08	4.81
J0702	INJECTION, BETAMETHASONE ACETATE 3MG AND BETAMETHASONE SODIUM PHOSPHATE 3MG		
J0702	32	270 10/01/05	.57
J0704	INJECTION, BETAMETHASONE SODIUM PHOSPHATE, PER 4 MG		
J0704	32	270 07/01/06	1.13
J0710	INJECTION, CEFAPIRIN SODIUM, UP TO 1 GM		
J0710	32	270 10/01/05	1.43
J0713	INJECTION, CEFTAZIDIME, PER 500 MG		
J0713	32	270 10/01/08	3.65
J0715	INJECTION, CEFTIZOXIME SODIUM, PER 500 MG		
J0715	32	270 04/01/08	5.24
J0720	INJECTION, CHLORAMPHENICOL SODIUM SUCCINATE, UP TO 1 GM		
J0720	32	270 10/01/08	15.07
J0725	INJECTION, CHORIONIC GONADATROPIN, PER 1,000 USP UNITS		
J0725	32	270 10/01/08	3.24
J0735	INJECTION, CLONIDINE HCI, 1 MG		
J0735	32	270 10/01/05	4.82
J0740	INJECTION, CIDOFOVIR, 375 MG		
J0740	32	270 10/01/08	762.08
J0743	INJECTION, CILASTATIN SODIUM; IMPENEM, PER 250 MG		
J0743	32	270 10/01/08	13.93
J0745	INJECTION, CODEINE PHOSPHATE, PER 30 MG		
J0745	32	270 10/01/08	1.17
J0760	INJECTION, COLCHICINE, PER 1 MG		
J0760	32	270 10/01/08	6.57
J0770	INJECTION, COLISIMETHATE SODIUM, UP TO 150 MG		
J0770	32	270 10/01/05	19.42
J0780	INJECTION PROCHLORPERAZINE, UP TO 10 MG		
J0780	32	270 10/01/08	2.05
J0800	INJECTION, CORTICOTROPIN, UP TO 40 UNITS		
J0800	32	270 10/01/05	17.47
J0835	INJECTION, COSYNTROPIN, PER 0.25 MG		
J0835	32	270 10/01/05	16.22
J0850	INJECTION, CYTOMEGALOVIRUS IMMUNE GLOBULIN IV, (HUMAN) PER VIAL		
J0850	32	270 10/01/05	607.72
J0900	INJECTION, TESTOSTERONE ENANTHATE AND ESTRADIOL VALERATE, UP TO 1 CC		
J0900	32	270 10/01/05	1.38
J0910	INJECTION, DECA-DURABOLIN, UP TO 50 MG		
J0910	32	220 04/01/94	
J0920	INJECTION, DECA-DURABOLIN, NANDROLINE DECANOATE, 100		
J0920	32	220 04/01/94	
J0930	INJECTION, DECA-DURABOLIN, NANDROLONE DECANOTE, 150 M		
J0930	32	220 04/01/94	
J0940	INJECTION, DECA-DURABOLIN, NANDROLONE DECANOATE, 200		
J0940	32	220 04/01/94	
J0945	INJECTION, BROMPHENIRAMINE MALEATE, PER 10 MG		
J0945	32	270 10/01/06	.80
J0970	INJECTION, ESTRADIOL VALERATE, UP TO 40 MG		
J0970	32	270 10/01/05	19.22
J1000	INJECTION, DEPO-ESTRADIOL CYPIONATE, UP TO 5 MG		
J1000	32	270 07/01/08	6.43
J1020	INJECTION, METHYLPREDNISOLONE ACETATE, 20 MG		
J1020	32	270 10/01/08	2.31
J1030	INJECTION, METHYLPREDNISOLONE ACETATE, 40 MG		
J1030	32	270 10/01/08	4.36
J1040	INJECTION, METHYLPREDNISOLONE ACETATE, 80 MG		
J1040	32	270 10/01/08	8.23
J1060	INJECTION, TESTOSTERONE CYPIONATE AND ESTRADIOL CYPIONATE, UP TO 1 ML		
J1060	32	270 01/01/06	4.14
J1070	INJECTION, TESTOSTERONE CYPIONATE, UP TO 100 MG		
J1070	32	270 10/01/08	4.22
J1080	INJECTION, TESTOSTERONE CYPIONATE, 1 CC, 200 MG		
J1080	32	270 10/01/05	10.10
J1094	INJECTION, DEXAMETHASONE ACETATE, 1 MG		
J1094	32	270 04/01/06	.23
J1100	INJECTION, DEXAMETHASONE SODIUM PHOSPHATE, 1 MG		
J1100	32	270 04/01/08	.08
J1110	INJECTION, DIHYDROERGOTAMINE MESYLATE, PER 1 MG		

J1110		32	270	10/01/08	20.59
J1120	INJECTION, ACETAZOLAMIDE SODIUM, UP TO 500 MG				
J1120		32	270	10/01/08	35.22
J1160	INJECTION, DIGOXIN, UP TO 0.5 MG				
J1160		32	270	10/01/08	1.37
J1165	INJECTION, PHENYTOIN SODIUM, PER 50 MG				
J1165		32	270	10/01/08	.55
J1170	INJECTION, HYDROMORPHINE, UP TO 4 MG				
J1170		32	270	10/01/08	1.35
J1180	INJECTION, DYPHYLLINE, UP TO 500 MG				
J1180		32	270	10/01/05	8.05
J1190	INJECTION, DEXAZOXANE HCl, PER 250 MG				
J1190		32	270	10/01/05	182.22
J1200	INJECTION, DIPHENHYDRAMINE HCl, UP TO 50 MG				
J1200		32	270	10/01/08	.69
J1205	INJECTION, CHLOROTHIAZIDE SODIUM, PER 500 MG				
J1205		32	270	10/01/08	193.23
J1212	INJECTION, DMSO, DIMETHYL SULFOXIDE, 50%, 50 ML				
J1212		32	270	10/01/05	32.07
J1230	INJECTION, METHADONE HCl, UP TO 10 MG				
J1230		32	270	10/01/08	3.38
J1240	INJECTION, DIMENHYDRINATE, UP TO 50 MG				
J1240		32	270	10/01/08	3.18
J1245	INJECTION, DIPYRIDAMOLE, PER 10 MG				
J1245		32	270	10/01/08	.98
J1250	INJECTION, DOBUTAMINE HCl, PER 250 MG				
J1250		32	270	10/01/08	5.63
J1320	INJECTION, AMITRIPTYLINE HCl, UP TO 20 MG				
J1320		32	270	10/01/05	2.24
J1325	INJECTION, EPOPROSTENOL, 0.5 MG				
J1325		32	270	10/01/08	14.33
J1327	INJECTION, EPTIFIBATIDE, 5 MG				
J1327		32	270	10/01/08	17.89
J1330	INJECTION, ERGONOVINE MALEATE, UP TO 0.2 MG				
J1330		32	270	10/01/05	2.22
J1364	INJECTION, ERYTHROMYCIN LACTOBIONATE, PER 500 MG				
J1364		32	270	07/01/08	6.97
J1380	INJECTION, ESTRADIOL VALERATE, UP TO 10 MG				
J1380		32	270	10/01/08	8.73
J1390	INJECTION, ESTRADIOL VALERATE, UP TO 20 MG				
J1390		32	270	10/01/05	10.22
J1410	INJECTION, ESTROGEN CONJUGATED, PER 25 MG				
J1410		32	270	10/01/05	52.92
J1435	INJECTION, ESTRONE, PER 1 MG				
J1435		32	270	04/01/07	.24
J1436	INJECTION, ETIDRONATE SODIUM, PER 300 MG				
J1436		32	270	10/01/05	60.94
J1438	INJECTION, ETANERCEPT, 25MG (CODE MAY BE USED FOR MEDICARE WHEN ADMINISTERED UNDER DIREC				
J1438		32	270	10/01/05	145.02
J1450	INJECTION FLUCONAZOLE, 200 MG				
J1450		32	270	10/01/08	8.08
J1455	INJECTION, FOSCARNET SODIUM, PER 1000 MG				
J1455		32	270	10/01/08	10.70
J1460	INJECTION, GAMA GLOBULIN, INTRAMUSCULAR, 1 CC				
J1460		32	270	10/01/05	1.57
J1470	INJECTION, GAMA GLOBULIN, INTRAMUSCULAR, 2 CC				
J1470		32	270	10/01/05	4.20
J1480	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 3 CC				
J1480		32	270	10/01/05	6.76
J1490	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 4 CC				
J1490		32	270	10/01/05	7.87
J1500	INJECTION, GAMA GLOBULIN, INTRAMUSCULAR, 5 CC				
J1500		32	270	10/01/05	7.87
J1510	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 6 CC				
J1510		32	270	10/01/05	9.72
J1520	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 7 CC				
J1520		32	270	10/01/05	11.22
J1530	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 8 CC				
J1530		32	270	10/01/05	12.92
J1540	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 9 CC				
J1540		32	270	10/01/05	14.47
J1550	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 10 CC				
J1550		32	270	10/01/05	16.12
J1560	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, OVER 10 CC				
J1560		32	270	10/01/05	16.12
J1565	INJECTION, RESPIRATORY SYNCYTIAL VIRUS IMMUNE GLOBULIN, INTRAVENOUS, 50 MG				
J1565		32	270	10/01/05	16.18
J1580	INJECTION, GARAMYCIN, GENTAMICIN, UP TO 80 MG				
J1580		32	270	10/01/08	.90
J1590	INJECTION, GATIFLOXACIN, 10MG				
J1590		32	270	04/01/07	.80
J1600	INJECTION, GOLD SODIUM THIOMALATE, UP TO 50 MG				
J1600		32	270	10/01/08	7.72
J1610	INJECTION GLUCAGON HCl, PER 1 MG				
J1610		32	270	10/01/08	72.77

J1620	INJECTION, GONADORELIN HCI, PER 100 MCG	270	01/01/07	180.30
J1620	32	270		
J1626	INJECTION, GRANISETRON HCI, 100 MCG	270	10/01/08	4.33
J1626	32	270		
J1630	INJECTION, HALOPERIDOL, UP TO 5 MG	270	10/01/08	1.59
J1630	32	270		
J1642	INJECTION, HEPARIN SODIUM, (HEPARIN LOCK FLUSH) PER 10 UNITS	270	10/01/08	.11
J1642	32	270		
J1644	INJECTION, HEPARIN SODIUM, PER 1000 UNITS	270	10/01/08	.12
J1644	32	270		
J1645	INJECTION, DALTEPARIN SODIUM, PER 2500 IU	270	10/01/08	11.26
J1645	32	270		
J1650	INJECTION, ENOXAPARIN SODIUM, 10 MG	270	10/01/08	6.31
J1650	32	270		
J1652	INJECTION, FONDAPARINUX SODIUM, 0.5 MG	270	10/01/08	6.15
J1652	32	270		
J1655	INJECTION, TINZAPRIN SODIUM, 1000 IU	270	10/01/08	2.10
J1655	32	270		
J1670	INJECTION, TETANUS IMMUNE GLOBULIN, HUMAN, UP TO 250 UNITS	270	10/01/08	137.55
J1670	32	270		
J1700	INJECTION, HYDROCORTISONE ACETATE, UP TO 25 MG	270	10/01/05	.66
J1700	32	270		
J1710	INJECTION, HYDROCORTISONE SODIUM PHOSPHATE, UP TO 50 MG	270	10/01/05	4.69
J1710	32	270		
J1720	INJECTION, HYDROCORTISONE SODIUM SUCCINATE, UP TO 100 MG	270	10/01/08	2.34
J1720	32	270		
J1730	INJECTION, DIAZOXIDE, UP TO 300 MG	270	10/01/05	65.30
J1730	32	270		
J1742	INJECTION, IBUTILIDE FUMARATE, 1 MG	270	10/01/08	371.11
J1742	32	270		
J1745	INJECTION INFLIXIMAB, 10 MG	270	10/01/08	57.08
J1745	32	270		
J1785	INJECTION, IMIGLUCERASE, PER UNIT	270	07/01/08	4.04
J1785	32	270		
J1800	INJECTION, PROPRANOIOL HCI, UP TO 1 MG	270	10/01/08	5.07
J1800	32	270		
J1825	INJECTION, INTERFERON BETA-1A, 33 MCG	270	10/01/05	239.05
J1825	32	270		
J1830	INJ INTERFERON BETA-1B, 0.25 MG (MAY BE USED FOR MEDICARE IF ADMIN UNDER DIRECT PHYS SUP	270	10/01/05	77.90
J1830	32	270		
J1840	INJECTION, KANAMYCIN SULFATE, UP TO 500 MG	270	10/01/08	4.55
J1840	32	270		
J1850	INJECTION, KANAMYCIN SULFATE, UP TO 75 MG	270	10/01/08	.68
J1850	32	270		
J1885	INJECTION, KETOROLAC TROMETHAMINE, PER 15 MG	270	10/01/08	.33
J1885	32	270		
J1890	INJECTION, CEPHALOTHIN SODIUM, UP TO 1 GM	270	10/01/05	8.64
J1890	32	270		
J1940	INJECTION, FUROSEMIDE, UP TO 20 MG	270	10/01/08	.21
J1940	32	270		
J1950	INJECTION, LEUPROLIDE ACETATE (FOR DEPOT SUSPENSION), PER 3.75 MG	270	10/01/08	444.10
J1950	32	270		
J1955	INJECTION, LEVOCARNITINE, PER 1 GM	270	10/01/08	7.03
J1955	32	270		
J1960	INJECTION, LEVORPHANOL TARTRATE, UP TO 2 MG	270	10/01/05	3.17
J1960	32	270		
J1980	INJECTION, HYOSCAMINE SULFATE, UP TO 0.25 MG	270	10/01/08	9.87
J1980	32	270		
J1990	INJECTION, CHLORDIAZEPOXIDE HCI, UP TO 100 MG	270	10/01/05	22.31
J1990	32	270		
J2150	INJECTION, MANNITOL 25% IN 50 ML	270	10/01/08	.86
J2150	32	270		
J2175	INJECTION, MEPERIDINE HCI, PER 100 MG	270	10/01/08	1.53
J2175	32	270		
J2180	INJECTION MEPERIDINE AND PROMETHAZINE HCI, UP TO 50 MG	270	10/01/05	3.79
J2180	32	270		
J2210	INJECTION, METHYLERGOVONINE MALEATE, UP TO 0.2 MG	270	10/01/08	5.53
J2210	32	270		
J2250	INJECTION, MIDAZOLAM HCI, PER 1 MG	270	10/01/08	.17
J2250	32	270		
J2260	INJECTION MILRINONE LACTATE, 5 MG	270	10/01/08	5.08
J2260	32	270		
J2270	INJECTION MORPHINE SULFATE, UP TO 10 MG	270	10/01/08	1.73
J2270	32	270		
J2275	INJECTION, MORPHINE SULFATE (PRESERVATIVE - FREE STERILE SOLUTION), PER 10 MG	270	10/01/08	2.89
J2275	32	270		
J2300	INJECTION, NALBUPHINE HCI, PER 10 MG	270	10/01/08	1.02
J2300	32	270		
J2310	INJECTION, NALOXONE HCI, PER 1 MG	270	10/01/08	3.08
J2310	32	270		
J2320	INJECTION, NANDROLONE DECANOATE, UP TO 50 MG	270	10/01/08	3.75
J2320	32	270		
J2321	INJECTION, NANDROLONE DECANOATE, UP TO 100 MG	270	01/01/08	7.13
J2321	32	270		
J2322	INJECTION, NANDROLONE DECANOATE, UP TO 200 MG			

J2322		32	270	10/01/08	15.02
J2360	INJECTION, ORPHENADRINE CITRATE, UP TO 60 MG	32	270	10/01/05	1.67
J2360		32	270	10/01/05	1.67
J2370	INJECTION, PHENYLEPHRINE HCI, UP TO 1 ML	32	270	10/01/08	.76
J2370		32	270	10/01/08	.76
J2405	INJECTION, ONDANSETRON HCI, PER 1 MG	32	270	10/01/08	.19
J2410	INJECTION, OXYMORPHONE HCI, UP TO 1 MG	32	270	10/01/08	2.38
J2410		32	270	10/01/08	2.38
J2430	INJECTION, PAMIDRONATE DISODIUM, PER 30 MG	32	270	10/01/08	29.24
J2430		32	270	10/01/08	29.24
J2440	INJECTION, PAPAVERINE HCI, UP TO 60 MG	32	270	10/01/08	.70
J2440		32	270	10/01/08	.70
J2460	INJECTION, OXYTETRACYCLINE, UP TO 50 MG	32	270	10/01/05	.94
J2460		32	270	10/01/05	.94
J2501	INJECTION, PARICALCITOL, 1 MCG	32	270	10/01/08	3.71
J2501		32	270	10/01/08	3.71
J2510	INJECTION, PENICILLIN, G PROCAINE, AQUEOUS, UP TO 600,000 UNITS	32	270	10/01/08	9.89
J2510		32	270	10/01/08	9.89
J2515	INJECTION, PENTOBARBITAL SODIUM, PER 50 MG	32	270	10/01/08	7.93
J2515		32	270	10/01/08	7.93
J2540	INJECTION, PENICILLIN G POTASSIUM, UP TO 600,000 UNITS	32	270	10/01/08	.79
J2540		32	270	10/01/08	.79
J2543	INJECTION, PIPERACILLIN SODIUM/TAZOBACTAM SODIUM, 1 GRAM/0.125 GR (1.125 GRAMS)	32	270	10/01/08	5.38
J2543		32	270	10/01/08	5.38
J2550	INJECTION PROMETHAZINE HCI, UP TO 50 MG	32	270	10/01/08	1.56
J2550		32	270	10/01/08	1.56
J2560	INJECTION PHENOBARBITAL SODIUM, UP TO 120 MG	32	270	10/01/08	3.06
J2560		32	270	10/01/08	3.06
J2590	INJECTION, OXYTOCIN, UP TO 10 UNITS	32	270	10/01/08	1.88
J2590		32	270	10/01/08	1.88
J2597	INJECTION, DESMOPRESSIN ACETATE, PER 1 MCG	32	270	10/01/08	1.31
J2597		32	270	10/01/08	1.31
J2650	INJECTION, PREDNISOLONE ACETATE, UP TO 1 ML	32	270	04/01/07	.17
J2650		32	270	04/01/07	.17
J2660	INJECTION, PRINCIPEN-N, UP TO 500 MG	32	220	10/01/05	
J2660		32	220	10/01/05	
J2670	INJECTION, TOLAZOLINE HCI, UP TO 25 MG	32	270	10/01/05	3.44
J2670		32	270	10/01/05	3.44
J2675	INJECTION PROGESTERONE, PER 50 MG	32	270	10/01/08	1.43
J2675		32	270	10/01/08	1.43
J2680	INJECTION FLUPHENAZINE DECANOATE, UP TO 25 MG	32	270	10/01/08	1.24
J2680		32	270	10/01/08	1.24
J2690	INJECTION, PROCAINAMIDE HCI, UP TO 1 GM	32	270	10/01/08	3.31
J2690		32	270	10/01/08	3.31
J2700	INJECTION, OXACILLIN SODIUM, UP TO 250 MG	32	270	10/01/08	1.74
J2700		32	270	10/01/08	1.74
J2710	INJECTION NEOSTIGMINE METHYLSULFATE, UP TO 0.5 MG	32	270	10/01/08	.09
J2710		32	270	10/01/08	.09
J2720	INJECTION, PROTAMINE SULFATE, PER 10 MG	32	270	10/01/08	.52
J2720		32	270	10/01/08	.52
J2725	INJECTION, PROTIRELIN, PER 250 MCG	32	270	10/01/05	21.78
J2725		32	270	10/01/05	21.78
J2730	INJECTION, PRALIDOXIME CHLORIDE, UP TO 1 GM	32	270	10/01/05	19.02
J2730		32	270	10/01/05	19.02
J2760	INJECTION, PHENTOLAMINE MESYLATE, UP TO 5 MG	32	270	10/01/08	52.86
J2760		32	270	10/01/08	52.86
J2765	INJECTION, METOCLOPERAMIDE HCI, UP TO 10 MG	32	270	10/01/08	.39
J2765		32	270	10/01/08	.39
J2780	INJECTION, RANITIDINE HCI, 25 MG	32	270	10/01/08	.84
J2780		32	270	10/01/08	.84
J2788	INJECTION, RHO D IMMUNE GLOBULIN, HUMAN, MINIDOSE, 50 MCG	32	270	10/01/08	26.86
J2788		32	270	10/01/08	26.86
J2790	INJECTION, RHO D IMMUNE GLOBULIN, HUMAN, FULL DOSE, 300 MCG	32	270	10/01/08	84.55
J2790		32	270	10/01/08	84.55
J2800	INJECTION, METHOCARBAMOL, UP TO 10 ML	32	270	10/01/08	24.38
J2800		32	270	10/01/08	24.38
J2910	INJECTION, AUROTHIOGLUCOSE, UP TO 50 MG	32	270	10/01/05	15.12
J2910		32	270	10/01/05	15.12
J2920	INJECTION, METHYLPREDNISOLONE SODIUM SUCCINATE, UP TO 40 MG	32	270	10/01/08	2.05
J2920		32	270	10/01/08	2.05
J2930	INJECTION, METHLPREDNISOLONE SODIUM SUCCINATE, UP TO 125 MG	32	270	10/01/08	3.10
J2930		32	270	10/01/08	3.10
J2950	INJECTION, PROMAZINE HCI, UP TO 25 MG	32	270	10/01/05	.38
J2950		32	270	10/01/05	.38
J2995	INJECTION, STREPTOKINASE, PER 250,000 IU	32	270	10/01/05	46.06
J2995		32	270	10/01/05	46.06
J3000	INJECTION STREPTOMYCIN UP TO 1 GM	32	270	10/01/08	7.50
J3000		32	270	10/01/08	7.50
J3030	INJ, SUMATRIPTAN SUCCINATE, 6 MG (MAY BE USED FOR MEDICARE IF ADMIN UNDER DIRECT MD SUPV	32	270	10/01/08	72.58
J3030		32	270	10/01/08	72.58
J3070	INJECTION, PENTAZOCINE, 30 MG	32	270	10/01/08	6.38
J3070		32	270	10/01/08	6.38
J3105	INJECTION, TERBUTALINE SULFATE, UP TO 1 MG	32	270	10/01/05	2.12
J3105		32	270	10/01/05	2.12

J3120	INJECTION, TESTOSTERONE ENANTHATE, UP TO 100 MG			
J3120	32	270	10/01/05	.62
J3130	INJECTION, TESTOSTERONE ENANTHATE, UP TO 200 MG			
J3130	32	270	10/01/05	1.12
J3140	INJECTION, TESTOSTERONE, SUSPENSION, UP TO 50 MG			
J3140	32	270	10/01/05	.56
J3150	INJECTION, TESTOSTERONE PROPRIONATE, UP TO 100 MG			
J3150	32	270	10/01/05	.79
J3230	INJECTION, CHLORPROMAZINE HCI, UP TO 50 MG			
J3230	32	270	10/01/08	7.57
J3240	INJECTION, THYTROPIN ALPHA, 0.9 MG, PROVIDED IN 1.1 MG VIAL			
J3240	32	270	10/01/05	159.53
J3250	INJECTION, TRIMETHOBENZAMIDE HCI, UP TO 200 MG			
J3250	32	270	10/01/05	1.12
J3260	INJECTION, TOBRAMYCIN SULFATE, UP TO 80 MG			
J3260	32	270	10/01/08	2.38
J3265	INJECTION, TORESEMIDE, 10 MG/ML			
J3265	32	270	10/01/08	2.19
J3280	INJECTION, THIETHYLPERAZINE MALEATE, UP TO 10 MG			
J3280	32	270	10/01/05	4.76
J3301	INJECTION TRIAMCINOLONE ACETONIDE, PER 10MG			
J3301	32	270	10/01/08	1.44
J3302	INJECTION TRIAMCINOLONE DIACETATE, PER 5 MG			
J3302	32	270	04/01/06	.28
J3303	INJECTION TRIAMCINOLONE HEXACETONIDE, PER 5 MG			
J3303	32	270	10/01/08	1.32
J3305	INJECTION, TRIMETREXATE GLUCORONATE, PER 25 MG			
J3305	32	270	10/01/07	149.71
J3310	INJECTION, PERPHENAZINE, UP TO 5 MG			
J3310	32	270	10/01/05	6.72
J3320	INJECTION, SPECTINOMYCIN DIHYDROCHLORIDE, UP TO 2 GM			
J3320	32	270	04/01/07	30.08
J3350	INJECTION, UREA, UP TO 40 GM			
J3350	32	270	10/01/05	55.43
J3360	INJECTION, DIAZEPAM, UP TO 5 MG			
J3360	32	270	10/01/08	1.01
J3364	INJECTION, UROKINASE, 5000 IU VIAL			
J3364	32	270	01/01/07	9.16
J3370	INJECTION, VANCOMYCIN HCI, 500 MG			
J3370	32	270	10/01/08	3.07
J3400	INJECTION, TRIFLUPROMAZINE HCI, UP TO 20 MG			
J3400	32	270	10/01/05	.92
J3410	INJECTION, HYDROXYZINE HCI, UP TO 25 MG			
J3410	32	270	10/01/08	.26
J3420	INJECTION, VITAMIN B-12, CYANCOBALAMIN, UP TO 1,000 MCG			
J3420	32	270	10/01/08	.23
J3430	INJECTION, PHYTONADIONE (VITAMIN K), PER 1 MG			
J3430	32	270	07/01/08	4.24
J3470	INJECTION, HYALURONIDASE, UP TO 150 UNITS			
J3470	32	270	10/01/05	5.82
J3475	INJECTION, MAGNESIUM SULFATE, PER 500 MG			
J3475	32	270	10/01/08	.05
J3490	UNLISTED DRUGS			
J3490	32	21J	10/01/03	
J3520	EDETATE DISODIUM, PER 150 MG			
J3520	32	270	10/01/05	2.86
J7030	INFUSION, NORMAL SALINE SOLUTION, 1000 CC			
J7030	32	270	10/01/08	1.12
J7040	INFUSION, NORMAL SALINE SOLUTION, STERILE (500 ML = 1 UNIT)			
J7040	32	270	10/01/08	.56
J7042	5% DEXTROSE/NORMAL SALINE SOLUTION, (500 ML = 1 UNIT)			
J7042	32	270	10/01/08	.31
J7050	INFUSION, NORMAL SALINE SOLUTION, 250 CC			
J7050	32	270	10/01/08	.28
J7060	5% DEXTROSE/WATER (500 ML = 1 UNITS)			
J7060	32	270	10/01/08	1.16
J7070	INFUSION, D-5-W, 1,000 CC			
J7070	32	270	10/01/08	2.31
J7100	INFUSION, DEXTRAN 40, 500 ML			
J7100	32	270	07/01/08	21.54
J7110	INFUSION, DEXTRAN 75, 500 ML			
J7110	32	270	10/01/08	10.41
J7120	RINGER'S LACTATE INFUSION, UP TO 1,000 CC			
J7120	32	270	10/01/08	.93
J7130	HYPERTONIC SALINE SOLUTION, 50 OR 100 MEQ, 20 CC VIAL			
J7130	32	270	10/01/05	1.35
J7190	FACTOR VIII (ANTIHEMOPHILIC FACTOR,HUMAN) PER IU			
J7190	32	270	10/01/08	.83
J7191	FACTOR VIII (ANTIHEMOPHILIC FACTOR(PORCINE), PER IU			
J7191	32	270	10/01/05	1.86
J7194	FACTOR IX COMPLEX, PER IU			
J7194	32	270	10/01/08	.82
J7198	ANTI-INHIBITOR, PER IU			
J7198	32	270	10/01/08	1.48
J7199	HEMOPHILIA CLOTTING FACTOR, NOT OTHERWISE CLASSIFIED			

J7199	32	21J	01/01/00	
J7310	GANCICLOVIR, 4.5 MG, LONG-ACTING IMPLANT			
J7310	32	270	10/01/08	16960.00
J7501	AZATHIOPRINE, PARENTERAL, 100 MG			
J7501	32	270	10/01/08	90.99
J7504	LYMPHOCYTE IMMUNE GLOBULIN, ANTITHYMOCYTE GLOBULIN, EQUINE, PARENTERAL, 250 MG			
J7504	32	270	10/01/05	147.26
J7505	MUROMONAB-CD3, PARENTERAL, 5 MG			
J7505	32	270	10/01/05	777.25
J7507	TACROLIMUS, ORAL, PER 1 MG			
J7507	32	270	07/01/08	3.90
J7509	METHYPREDNISOLONE, ORAL, PER 4 MG			
J7509	32	270	04/01/08	.08
J7510	PREDNISOLONE, ORAL, PER 5 MG			
J7510	32	270	10/01/08	.02
J7516	CYCLOSPORINE, PARENTERAL, 250 MG			
J7516	32	270	10/01/08	19.37
J7599	IMMUNOSUPPRESSIVE DRUG, NOT OTHERWISE CLASSIFIED			
J7599	32	21J	01/01/96	
J7699	NOC DRUGS, INHALATION SOLUTION ADMINISTERED THROUGH DME			
J7699	32	21J	01/01/93	
J7799	NOC DRUGS, OTHER THAN INHALATION DRUGS, ADMINISTERED THROUGH DME			
J7799	32	21J	01/01/93	
J8499	PRESCRIPTION DRUG, ORAL, NOW CHEMOTHERAPEUTIC, NOS			
J8499	32	21J	01/01/95	
J8530	CYCLOPHOSPHAMIDE, ORAL, 25 MG			
J8530	32	270	10/01/08	.91
J8560	ETOPOSIDE, ORAL, 50 MG			
J8560	32	270	10/01/08	29.35
J8600	MELPHALAN, ORAL 2 MG			
J8600	32	270	10/01/05	2.32
J8610	METHOTREXATE, ORAL, 2.5 MG			
J8610	32	270	04/01/08	.16
J8700	TEMOZOLOMIDE, ORAL, 5 MG			
J8700	32	270	10/01/08	8.24
J8999	PRESCRITPION DRUG, ORAL, CHEMOTHERAPEUTIC, NOS			
J8999	32	21J	01/01/95	
J9000	DOXORUBICIN HCI, 10 MG			
J9000	32	270	10/01/08	4.66
J9001	DOXORUBICIN HCI, ALL LIPID FORMULATIONS, 10 MG			
J9001	32	270	10/01/08	429.51
J9010	ALEMTUZUMAB, 10 MG			
J9010	32	270	10/01/08	551.24
J9015	ALDESLEUKIN, PER SINGLE USE VIAL			
J9015	32	270	10/01/08	808.02
J9017	ARSENIC TRIOXIDE, 1 MG			
J9017	32	270	10/01/05	26.92
J9020	ASPARAGINASE, 10,000 UNITS			
J9020	32	270	10/01/05	49.64
J9031	BCG LIVE (INTRAVESICAL), PER INSTALLATION			
J9031	32	270	10/01/08	114.49
J9040	BLEOMYCIN SULFATE, 15 UNITS			
J9040	32	270	10/01/08	34.83
J9045	CARBOPLATIN, 50 MG			
J9045	32	270	10/01/08	9.61
J9050	CARMUSTINE, 100 MG			
J9050	32	270	10/01/05	63.00
J9060	CISPLATIN, POWDER OR SOLUTION, PER 10 MG			
J9060	32	270	10/01/08	2.30
J9062	CISPLATIN, 50 MG			
J9062	32	270	10/01/08	11.52
J9065	INJECTION, CLADRIBINE, PER 1 MG			
J9065	32	270	10/01/08	29.35
J9070	CYCLOPHOSPHAMIDE, 100 MG			
J9070	32	270	10/01/08	2.16
J9080	CYCLOPHOSPHAMIDE, 200 MG			
J9080	32	270	10/01/08	4.32
J9090	CYCLOPHOSPHAMIDE, 500 MG			
J9090	32	270	10/01/08	10.80
J9091	CYCLOPHOSPHAMIDE, 1 GM			
J9091	32	270	10/01/08	21.61
J9092	CYCLOPHOSPHAMIDE, 2 GM			
J9092	32	270	10/01/08	43.21
J9093	CYCLOPHOSPHAMIDE, LYOPHILIZED, 100 MG			
J9093	32	270	10/01/08	1.86
J9094	CYCLOPHOSPHAMIDE, LYOPHILIZED, 200 MG			
J9094	32	270	10/01/08	3.73
J9095	CYCLOPHOSPHAMIDE, LYOPHILIZED, 500 MG			
J9095	32	270	10/01/08	9.32
J9096	CYCLOPHOSPHAMIDE, LYOPHILIZED, 1 GM			
J9096	32	270	10/01/08	18.64
J9097	CYCLOPHOSPHAMIDE, LYOPHILIZED, 2 GM			
J9097	32	270	10/01/08	37.29
J9100	CYTARABINE, 100 MG			
J9100	32	270	10/01/08	1.68



J9110	CYTARABINE, 500 MG				
J9110	32	270	10/01/08	8.42	
J9120	DACTINOMYCIN, 0.5 MG				
J9120	32	270	10/01/08	495.61	
J9130	DACARBAZINE, 100 MG				
J9130	32	270	10/01/08	4.46	
J9140	DACARBAZINE, 200 MG				
J9140	32	270	10/01/08	8.77	
J9150	DAUNORUBICIN HCl, 10 MG				
J9150	32	270	10/01/08	16.90	
J9165	DIETHYLSTILBESTROL DIPHOSPHATE, 250 MG				
J9165	32	270	10/01/05	12.14	
J9170	DOCETAXEL, 20 MG				
J9170	32	270	10/01/08	334.64	
J9181	ETOPOSIDE, 10 MG				
J9181	32	270	10/01/08	.48	
J9182	ETOPOSIDE, 100 MG				
J9182	32	270	10/01/08	4.84	
J9190	FLUOROURACIL, 500 MG				
J9190	32	270	10/01/08	1.68	
J9200	FLOXURIDINE, 500 MG				
J9200	32	270	10/01/08	50.54	
J9201	GEMCITABINE HCl, 200 MG				
J9201	32	270	10/01/08	135.08	
J9202	GOSERELIN ACETATE IMPLANT, PER 3.6 MG				
J9202	32	270	10/01/08	189.45	
J9206	IRINOTECAN, 20 MG				
J9206	32	270	10/01/08	37.00	
J9208	IFOSFAMIDE, PER 1 GM				
J9208	32	270	10/01/08	33.80	
J9209	MESNA, 200 MG				
J9209	32	270	10/01/08	6.97	
J9211	IDARUBICIN HCl, 5 MG				
J9211	32	270	10/01/08	234.51	
J9213	INTERFERON ALFA-2A, RECOMBINANT, 3 MILLION UNITS				
J9213	32	270	10/01/08	40.53	
J9214	INTERFERON ALFA-2B, RECOMBINANT, 1 MILLION UNITS				
J9214	32	270	10/01/08	14.73	
J9215	INTERFERON ALFA-N3, (HUMAN LEUKOCYTE DERIVED), 250,000 IU				
J9215	32	270	10/01/05	4.32	
J9216	INTERFERON GAMMA-1B, 3 MILLION UNITS				
J9216	32	270	10/01/08	351.79	
J9217	LEUPROLIDE ACETATE (FOR DEPOT SUSPENSION), 7.5 MG				
J9217	32	270	10/01/08	172.94	
J9218	LEUPROLIDE ACETATE, PER 1 MG				
J9218	32	270	10/01/08	6.68	
J9230	MECHLORETHAMINE HCl, (NITROGEN MUSTARD), 10 MG				
J9230	32	270	10/01/08	144.68	
J9245	INJECTION, MELPHALAN HCl, 50 MG				
J9245	32	270	10/01/05	408.72	
J9250	METHOTREXATE SODIUM, 5 MG				
J9250	32	270	10/01/08	.23	
J9260	METHOTREXATE SODIUM, 50 MG				
J9260	32	270	10/01/08	2.36	
J9266	PEGASPARGASE, PER SINGLE DOSE VIAL				
J9266	32	270	10/01/05	1333.72	
J9270	PLICAMYCIN, 2.5 MG				
J9270	32	270	10/01/05	69.09	
J9280	MITOMYCIN, 5 MG				
J9280	32	270	10/01/08	15.86	
J9290	MITOMYCIN, 20 MG				
J9290	32	270	10/01/08	63.45	
J9291	MITOMYCIN, 40 MG				
J9291	32	270	10/01/08	126.90	
J9293	INJECTION, MITOXANTRONE HCl, PER 5 MG				
J9293	32	270	10/01/05	143.28	
J9320	STREPTOZOCIN, 1 GM				
J9320	32	270	10/01/05	26.84	
J9340	THIOTEPA, 15 MG				
J9340	32	270	10/01/08	94.54	
J9350	TOPOTECAN, 4 MG				
J9350	32	270	10/01/08	930.67	
J9355	TRASTUZUMAB, 10 MG				
J9355	32	270	10/01/05	48.72	
J9357	VALRUBICIN, INTRAVESICAL, 200 MG				
J9357	32	270	10/01/05	369.60	
J9360	VINBLASTINE SULFATE, 1 MG				
J9360	32	270	10/01/08	1.01	
J9370	VINCRISTINE SULFATE, 1 MG				
J9370	32	270	10/01/08	6.80	
J9375	VINCRISTINE SULFATE, 2 MG				
J9375	32	270	10/01/08	13.60	
J9380	VINCRISTINE SULFATE, 5 MG				
J9380	32	270	10/01/08	33.99	
J9390	VINORELBINE TARTRATE, PER 10 MG				

J9390	32	270	10/01/08	16.57
J9600	32	270	10/01/08	2538.42
J9999	32	21J	07/01/77	
Q3025	32	270	10/01/08	146.66
Q3026	32	21J	01/01/03	
Q4025	32	270	07/01/08	27.42
Q4026	32	270	07/01/08	85.62
Q4027	32	270	07/01/08	13.72
Q4028	32	270	07/01/08	42.81
Q4029	32	270	07/01/08	20.96
Q4030	32	270	07/01/08	55.19
Q4031	32	270	07/01/08	10.48
Q4032	32	270	07/01/08	27.60
Q4033	32	270	07/01/08	19.55
Q4034	32	270	07/01/08	48.65
Q4035	32	270	07/01/08	9.78
Q4036	32	270	07/01/08	24.33
Q4037	32	270	07/01/08	11.94
Q4038	32	270	07/01/08	29.89
Q4039	32	270	07/01/08	5.97
Q4040	32	270	07/01/08	14.95
Q4041	32	270	07/01/08	14.51
Q4042	32	270	07/01/08	24.77
Q4043	32	270	07/01/08	7.25
Q4044	32	270	07/01/08	12.38
Q4045	32	270	07/01/08	8.42
Q4046	32	270	07/01/08	13.55
Q4047	32	270	07/01/08	4.21
Q4048	32	270	07/01/08	6.78
S0017	32	220	10/01/05	
S0020	32	220	10/01/05	
S0021	32	220	10/01/05	
S0023	32	220	10/01/05	
S0028	32	220	10/01/05	
S0030	32	220	10/01/05	
S0032	32	220	10/01/05	
S0034	32	220	10/01/05	
S0039	32	220	10/01/05	
S0040	32	220	10/01/05	
S0073	32	220	10/01/05	
S0074	32	220	10/01/05	
S0077	32	220	10/01/05	
S0078	32	220	10/01/05	

S0080	INJECTION, PENTAMIDINE ISETHIONATE, 300 MG			
S0080	32	220	10/01/05	
S0081	INJECTION, PIPERACILLIN SODIUM, 500 MG			
S0081	32	220	10/01/05	
S0390	ROUTINE FOOT CARE;REMOVAL &/OR TRIM OF CORNS,CALLUSES &/OR NAILS & PREVENT MAINT PER VIS			
S0390	U1	32	270	07/01/08 19.04
S0390	U2	32	270	07/01/08 20.31
S0390	U3	32	270	07/01/08 20.31
S2300	ARTHROSCOPY, SHOULDER, SURGICAL; WITH THERMALLY - INDUCED CAPSULORRHAPHY			
S2300	32	21J	01/01/00	
S2350	DISKECTOMY, ANTERIOR, W DECOMPRESSION OF SPINAL CORD &/OR NERVE ROOT, INCLUD OSTEOPHYTEC			
S2350	32	21J	01/01/00	
S2351	DISKECTOMY, ANTERIOR, W DECOMPRESSION OF SPINAL CORD &/ NERVE ROOT, EACH ADDITIONAL INTE			
S2351	32	21J	01/01/00	
S3645	HIV-1 ANTIBODY TESTING OF ORAL MUCOSAL TRANSUDATE			
S3645	32	21J	01/01/00	
S3650	SALIVA TEST, HORMONE LEVEL; DURING MENOPAUSE			
S3650	32	21J	01/01/00	
S8035	MAGNETIC SOURCE IMAGING			
S8035	32	21J	01/01/00	
S8035	MAGNETIC SOURCE IMAGING			
S8035	26 32	21J	01/01/00	
S8035	MAGNETIC SOURCE IMAGING			
S8035	TC 32	21J	01/01/00	

END OF REPORT