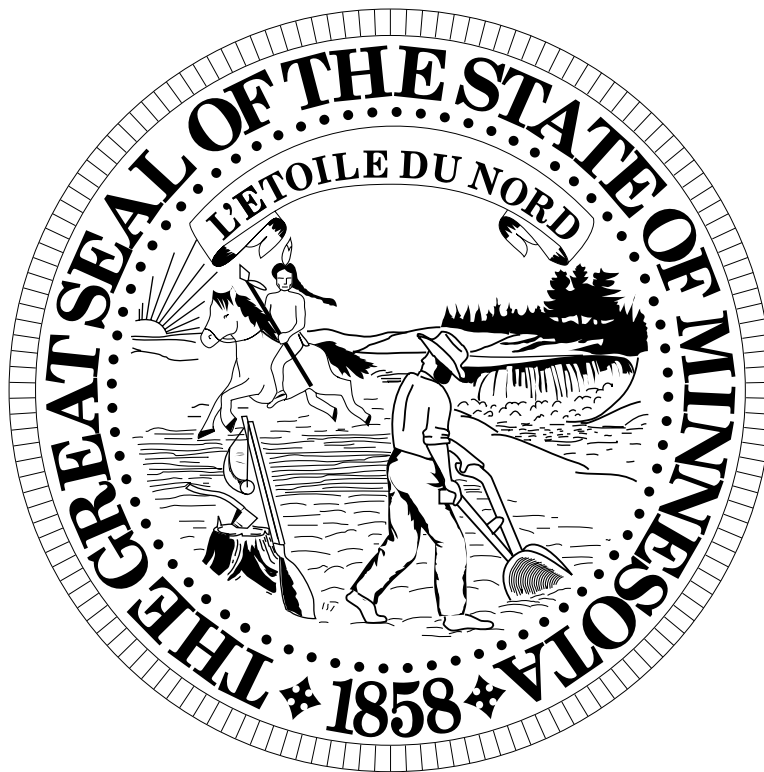


State of Minnesota
**State
Register**

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State Register

Judicial Notice Shall Be Taken of Material Published in the *State Register*

The *State Register* is the official publication of the State of Minnesota, published weekly to fulfill the legislative mandate set forth in *Minnesota Statutes* § 14.46. The *State Register* contains:

- proposed, adopted, exempt, expedited emergency and withdrawn rules
- executive orders of the governor
- appointments
- proclamations and commendations
- commissioners' orders
- revenue notices
- official notices
- state grants and loans
- contracts for professional, technical and consulting services
- non-state public bids, contracts and grants
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Vol. 25 Issue Number	PUBLISH DATE	Deadline for both Adopted and Proposed RULES	Deadline for: Emergency Rules, Executive and Commissioner's Orders, Revenue and Official Notices, State Grants, Professional-Technical-Consulting Contracts, Non-State Bids and Public Contracts
#6	Monday 7 August	Noon Wednesday 26 July	Noon Tuesday 1 August
#7	Monday 14 August	Noon Wednesday 2 August	Noon Tuesday 8 August
#8	Monday 21 August	Noon Wednesday 9 August	Noon Tuesday 15 August
#9	Monday 28 August	Noon Wednesday 16 August	Noon Tuesday 22 August

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Publications containing news and information from the Minnesota Senate and House of Representatives are available free to concerned citizens and the news media. To be placed on the mailing list, write or call the offices listed below:

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Minnesota Rules: Amendments & Additions		
Volume 25, Issues #1-6.....	210	
Proposed Rules		
Labor and Industry Department		
Workers' compensation medical fee schedule.....	212	
Adopted Rules		
Health Department		
Merit system.....	487	
Vital statistics.....	487	
Public Safety Department		
Merit system.....	487	
Executive Orders		
Office of the Governor		
Emergency Executive Order #00-6: Declaring a state of emergency in the State of Minnesota.....	488	
Emergency Executive Order #00-07: Providing for assistance to the Yellow Medicine County sheriff.....	489	
Appointments		
Commerce Department		
Appointment of Commissioner James Bernstein.....	490	
Commissioner's Orders		
Pollution Control Agency		
Findings of fact, conclusions and order regarding the petition for annexation of specified area adjacent to the Villard Area Lakes Sanitary District.....	490	
Revenue Notices		
Department of Revenue		
Revenue Notice #00-09: Individual income tax - taxation of qualified state tuition programs.....	493	
Official Notices		
Metropolitan Council		
Revised disadvantaged business enterprise program and goal.....	493	
Natural Resources Department		
Outside opinions sought regarding sunken log lease applications.....	494	
Revenue Department		
Presumed legal cigarette prices.....	494	
Office of Secretary of State		
Vacancies in multi-member agencies.....	495	
State Grants & Loans		
Administration Department		
STAR Program requests proposals for assistive technology employment grants.....	495	
Human Services Department		
Request for proposals for innovative service delivery models for Minnesota health care programs recipients in Cass, Crow Wing, Morrison, Todd and Wadena Counties.....	497	
Veterans Affairs Department		
Grant funds available and application requests accepted for placement on the funding list for the Minnesota county veterans service officer operational improvement grant program.....	498	
Contracts: Professional, Technical, Consulting		
Children, Families and Learning Department		
Request for proposals to conduct an economic impact analysis of child care in Minnesota.....	499	
Minnesota State Colleges and Universities (MnSCU)		
Request for proposals by St. Cloud Technical College for:		
• computer equipment.....	499	
Commerce Department		
Request for proposals from individuals or organizations qualified to perform market conduct examinations.....	500	
Health Department		
Request for proposals for conversion of existing legacy Oracle Forms to Oracle version 6.0 files.....	502	
Governor's Office		
Request for information from Minnesota companies interested in netcasting "Lunch with the Governor".....	502	
Minnesota Historical Society		
Request for proposals for parking lot and trail construction at Historic Fort Snelling.....	502	
Request for proposals for writer/editor of <i>The Minnesota History Interpreter</i> and <i>The Minnesota History Planner</i>	504	
Minnesota Supreme Court		
Request for proposals for court case management solution vendors.....	504	
Transportation Department		
Availability of agreement to develop and operate communications facilities.....	505	
Contract available for I-394 reversible lane gate study.....	505	
Contract available for Trunk Highway 60 preliminary design.....	506	
Request for proposal for installation, monitoring, and evaluation of a zinc hydrogel passive corrosion control system.....	506	
Non-State Public Bids, Contracts & Grants		
Metropolitan Council		
Availability of funds from the Metropolitan Livable Communities Act tax base revitalization account.....	507	
Request for proposals for transit planning services.....	508	
Request for proposals to provide equipment and computer communications systems for the council's SMARTCoM system.....	508	
University of Minnesota		
Bid Information Service (BIS) available for all potential vendors.....	509	
2000 prequalification of general contractors to perform construction services at the University of Minnesota Twin Cities campus.....	509	

Minnesota Rules: Amendments and Additions

NOTICE: How to Follow State Agency Rulemaking in the State Register

The *State Register* is the official source, and only complete listing, for all state agency rulemaking in its various stages. State agencies are required to publish notice of their rulemaking action in the *State Register*. Published every Monday, the *State Register* makes it easy to follow and participate in the important rulemaking process. Approximately 80 state agencies have the authority to issue rules. Each agency is assigned specific **Minnesota Rule** chapter numbers. Every odd-numbered year the **Minnesota Rules** are published. The current 1999 set is a 13-volume bound collection of all adopted rules in effect at the time. Supplements are published to update this set of rules. Generally speaking, proposed and adopted exempt rules do not appear in this set because of their short-term nature, but are published in the *State Register*.

An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency (*Minnesota Statutes* §§ 14.101). It does this by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, or within 60 days of the effective date of any new statutory grant of required rulemaking.

When rules are first drafted, state agencies publish them as **Proposed Rules**, along with a notice of hearing, or a notice of intent to adopt rules without a hearing in the case of noncontroversial rules. This notice asks for comment on the rules as proposed. Proposed emergency rules and withdrawn proposed rules are also published in the *State Register*. After proposed rules have gone through the comment period, and have been rewritten into their final form, they again appear in the *State Register* as **Adopted Rules**. These final adopted rules are not printed in their entirety in the *State Register*, only the changes made since their publication as Proposed Rules. To see the full rule, as adopted and in effect, a person simply needs two issues of the *State Register*, the issue the rule appeared in as proposed, and later as adopted. For a more detailed description of the rulemaking process, see the most current edition of the *Minnesota Guidebook to State Agency Services*.

The *State Register* features partial and cumulative listings of rules in this section on the following schedule: issues #1-13 inclusive; issues #14-25 inclusive; issue #26 cumulative for issues #1-26; issues #27-38 inclusive; issue #39, cumulative for issues #1-39; issues #40-51 inclusive; and issue 52 (or 53 in some years), cumulative for issues #1-52 (or 53). An annual subject matter index for rules was separately printed usually in August, but starting with Volume 19 now appears in the final issue of each volume. For copies or subscriptions to the *State Register*, contact Minnesota's Bookstore, 117 University Avenue, St. Paul, MN 55155 (651) 297-3000, or toll-free 1-800-657-3757.

Volume 25, Issues # 1-6

Agriculture Department

1562.0800 (adopted) 30

Chiropractic Examiners Board

2500.1150; .2515 (proposed) 109

2500.2530 (proposed) 110

Children, Families and Learning Department

3501.0320; .0330; .0370; .0400; .0420 (proposed) 5

3501.0360; .0370 s.1, 2, 4; .0420 s.4; .0430 (proposed repealer) ... 5

Health Department

4600.0100; .0200; .0300; .0400; .0500; .0600; .0700; .0800; .0900; .1000; .1100; .1200; .1300; .1400; .1500; .1600; .1700; .1900; .2000; .2100; .2200; .2300; .2400; .2500; .2600; .2700; .2800; .2900; .3000; .3100; .3200; .3300; .3400; .3500; .3600; .3700; .3800; .4000; .4100; .4200; .4300; .4400; .4500; .4600; .4700; .4800; .4900; .5000; .5100; .5200; .5300; .5400; .5500; .5600; .5700; .5800; .5900; .6000; .6100; .6200; .6300; .6400; .6500; .6600; .6700 (repealed) 487

4601.0100; .0200; .0300; .0400; .0500; .0600; .0700; .0800; .0900; .1000; .1100; .1200; .1300; .1400; .1500; .1600; .1700; .1800; .1900; .2000; .2100; .2200; .2300; .2400; .2500; .2525; .2550; .2600; (adopted) 487

4617.0002 (proposed) 137

4615.0900; .1000; .1100; .1200; .1300; .1400; .1500; .1600; .1700; .1800; .1900; .2000; .2100; .2200 s.1, 2, 3, 4, 5, 6, 7, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26; .2300; .2400; .2500; .2600; .2700; .2800; .2900; .3000; .3100; .3200; .3300;

4617.0002 s.6, 13, 20, 33; .0035; .0044; .0045; .0049; .0050; .0052; .0054; .0056; .0058 (proposed repealer) 137

4670.1320; .2670; .2900; .2910; .2920; .2930; .3530; .4210; .4220; .4230 (adopted) 142

4670.2940; .3100; .4240 (repealed) 142

4763.0110; .0125; .0135; .0140; .0160; .0190; .0205; .0215; .0220; .0240; .0270; .0285; .0295; .0300; .0320 (adopted) 487

4763.0120; .0130; .0140 s.2, 4; .0193 s.3; .0200; .0210; .0220 s.2; .0270 s.2; .0280; .0290; .0300 s.2 (repealed) 487

Housing Finance Agency

4900.0010 (proposed) 59

Labor and Industry Department

5208.1500 (adopted exempt) 31

5220.1900 (adopted) 81

5221.0100; .0405; .0410; .0420; .0430; .0500; .0600; .0700; .4000; .4020; .4030; .4032; .4033; .4035; .4040; .4041; .4050; .4051; .4060; .4061; .4062; .4070 (proposed) 212

5221.4030 s. 2a; .4033 s. 2a; .4034; .4040 s. 2a; .4050 s. 2a; .4060 s. 2a (proposed repealer) 212

Pharmacy Board

6800.0400; .1150; .1300; .1400; .3850 (adopted) 81

Natural Resources Department

6115.0150; .0160; .0170; .0190; .0200; .0210; .0211; .0221; .0230; .0231; .0240; .0250; .0255; .0260; .0270; .0271; .0280 (adopted exempt) 143

6236.0300; .700 (adopted expedited emergency) 183

Public Safety Department

7520.0650; .1000; .1100 (adopted) 487

Secretary of State

8240.0100; .0200; .0300; .1050; .1100; .1200; .1300; .1350; .1400; .1500; .1600; .1655; .1750; .1800; .1900; .1950; .2000; .2100; .2200; .2300; .2400; .2500; .2700; .2800; .2850; .2900 (adopted) 112

8240.1650; .1655 s.5; .1700 (repealed) 112

8280.0500; .0510 (adopted exempt) 114

Water and Soil Resources Board

8420.0100; .0102; .0103; .0105; .0110; .0112; .0115; .0122; .0200; .0210; .0220; .0225; .0230; .0240; .0250; .0260; .0290; .0300; .0350; .0505; .0510; .0520; .0530; .0540; .0650; .0720; .0730; .0740; .0750; .1070 (adopted exempt) 152

8420.0730 s.3 (repealed) 152

Teaching Board

8700.1100; .1300; .1400; .1600; .1700; .1800; .1900; .1910; .2100; .2200; .2300; 8710.7000; .7100; .7200 (proposed) 8

8700.0900; .1000; .1200; .2000; 8750.7000; .7100; .7200; .7300; .8000; .8100; .8200; .8300; .8400 (proposed repealer) 8

8710.0300; .0400; .0500; .0550; .0600; .0700; .0800; .0850; .0900; .1000; .1050; .1250; .1400; .3300; .6000; .6100; .6200; .6300; .6400 (proposed) 16

Minnesota Rules: Amendments and Additions

8710.0300 s.4; .0350; .1100; .1200; .1300; .6000 s.3; .6100 s.3; .6200 s. 3; .6300 s. 3; .6400 s. 4 (proposed repealer)	16	Transportation Department	
8710.0500 (proposed)	139	8835.0110 ; .0210; .0220; .0230; .0240; .0265; .0270; .0320; .0710; .0720; .0820; .0830; .0840; .0850; .0860; .0870; .0910; .1500; .1700; .1720; .1730; .1760; .1900 (adopted).....	61
8710.0500 s.9 (proposed repealer)	139	8835.0110 s.2, 3, 4, 5, 8, 9, 11, 12, 13, 14; .0610; .0730; .0740; .1600; .1800; .2300; .2400; .2500; .2600; .2700; .5700; .5800 (repealed)	61

Proposed Rules

Comments on Planned Rules or Rule Amendments

An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency (*Minnesota Statutes* §§ 14.101). It does this by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, and within 60 days of the effective date of any new statutory grant of required rulemaking.

Rules to be Adopted After a Hearing

After receiving comments and deciding to hold a public hearing on the rule, an agency drafts its rule. It then publishes its rules with a notice of hearing. All persons wishing to make a statement must register at the hearing. Anyone who wishes to submit written comments may do so at the hearing, or within five working days of the close of the hearing. Administrative law judges may, during the hearing, extend the period for receiving comments up to 20 calendar days. For five business days after the submission period the agency and interested persons may respond to any new information submitted during the written submission period and the record then is closed. The administrative law judge prepares a report within 30 days, stating findings of fact, conclusions and recommendations. After receiving the report, the agency decides whether to adopt, withdraw or modify the proposed rule based on consideration of the comments made during the rule hearing procedure and the report of the administrative law judge. The agency must wait five days after receiving the report before taking any action.

Rules to be Adopted Without a Hearing

Pursuant to *Minnesota Statutes* § 14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a public hearing. An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public. The agency then publishes a notice of intent to adopt rules without a public hearing, together with the proposed rules, in the *State Register*. If, during the 30-day comment period, 25 or more persons submit to the agency a written request for a hearing of the proposed rules, the agency must proceed under the provisions of §§ 14.14-14.20, which state that if an agency decides to hold a public hearing, it must publish a notice of intent in the *State Register*.

Department of Labor and Industry

Workers' Compensation Division

Proposed Permanent Rules Relating to Workers' Compensation; Medical Fee Schedule

NOTICE OF INTENT TO ADOPT RULES WITHOUT A PUBLIC HEARING

Proposed Permanent Rules Governing Workers' Compensation Medical Fee Schedule, *Minnesota Rules*, Parts 5221.0100 to 5221.4070.

Introduction. The Department of Labor and Industry intends to adopt rules without a public hearing following the procedures set forth in the Administrative Procedure Act, *Minnesota Statutes*, sections 14.22 to 14.28, and rules of the Office of Administrative Hearings, *Minnesota Rules*, parts 1400.2300 to 1400.2310. You have 30 days to submit written comments on the proposed rules and may also submit a written request that a hearing be held on the rules.

Agency Contact Person. Comments or questions on the rules and written requests for a public hearing on the rules must be submitted to the agency contact person. The agency contact person is:

Gloria Gebhard
Department of Labor and Industry
443 Lafayette Road
St. Paul, Minnesota 55155
Phone: (651) 297-5213
Fax: (651) 282-5448
email: gloria.gebhard@state.mn.us

If you are unable to reach Ms. Gebhard an alternate contact person is:

Kathryn Berger
Department of Labor and Industry
443 Lafayette Road
St. Paul, Minnesota 55155
Phone: (651) 297-4791
Fax: (651) 296-8899
email: kate.berger@state.mn.us

TTY users may call the Department of Labor and Industry at (651) 291-4198.

Subject of Rules and Statutory Authority. The statutory authority to adopt the rules is *Minnesota Statutes*, sections 176.135, subds. 2 and 7; 176.136, subds. 1, 1a and 2; 176.83, subds. 1, 4, 8 and 15; and 176.1351, subd. 6. A copy of the proposed rules is

published in the August 7, 2000 edition of the *State Register* (available on-line at www.comm.media.state.mn.us) . A free copy of the rules is available upon request from:

Cheryl Eliason
Department of Labor and Industry
443 Lafayette Road
St. Paul, Minnesota 55155
Phone: (651) 297-1114
Fax: (651) 282-5448
email: cheryl.eliason@state.mn.us

The proposed rules govern workers' compensation medical services and fees. A summary of the proposed amendments is as follows:

Part 5221.0100; Definitions:

Adds definitions for "ambulatory surgical center," "emergency care," and "revenue code," amends definition of the terms "procedure code", "modifier" and "relative value unit."

Part 5221.0405; Incorporations by Reference:

Updates the references for the documents incorporated by reference by year and refers to the requirements for medical billing and coding as specified in *Minnesota Statutes* §§ 62J.52 and 62J.61 (Minnesota Health Care Administrative Simplification Act.)

Part 5221.0410; Required Reporting and Filing Medical Information:

Deletes an outdated definition of maximum medical improvement (MMI) and refers to the statutory definition instead. Clarifies which CPT codes to use, and how to pay for required and supplementary reports.

Part 5221.0420; Health Care Provider Participation with Return to Work Planning.

Changes how a provider is to code for communication about an employee's return to work. The provider must include the charge for communicating with the employee in the applicable CPT evaluation and management code, but may charge and code separately for communication with all other parties and entities. Coding for this communication is standardized across provider types.

Part 5221.0430; Change of Health Care Provider.

Clarifies change of doctor due to conditions beyond the employee's control.

Part 5221.0500; Excessive Charges; Limitation of Payer Liability:

Clarifies payment to nursing homes participating in the Medical Assistance program. Adds a statutory reference for certified managed care plans to the list of statutes that preclude a provider from participation in the workers' compensation system under certain circumstances. States that the applicable travel expense reimbursement for injured workers whose employers do not have a travel reimbursement plan is the rate paid to state employees covered by the commissioner's plan. Cross-references *Minnesota Statutes* § 176.191, subd. 3 governing payment for medical services where liability for an injury is disputed.

Part 5221.0600; Payer Responsibilities:

Requires payers to specify the applicable rule, part and subpart supporting its denial or reduction of a charge.

Part 5221.0700; Provider Responsibilities:

Redefines when a hospital may charge directly for services by a provider who also has an independent practice. Provides that failure to submit a bill within sixty days is not a basis for denial of the bill, but is a basis for sanctions under *Minnesota Statutes* § 176.103. References to specific information required on uniform billing forms are deleted and reference is made instead to other state-wide billing forms (such as HCFA, 1500 and UB-92) and corresponding coding manuals specified in *Minnesota Statutes* § 62J.52. Dental services not included in CPT must be submitted on the dental claim form required by *Minnesota Statutes* § 62J.52, using any standard dental coding system. Requires a provider to use the most current CPT or HCPCS code in effect on the date of service, and to use the most comprehensive code that describes the service. Prohibits providers from using codes identified in the tables as being invalid for Medicare. Provides that the use of a coding modifier does not change the maximum fee unless otherwise specified. Adds physical and occupational therapy assistants to the list of providers whose services are included in part 5221.4050.

<p>KEY: PROPOSED RULES SECTION — <u>Underlining</u> indicates additions to existing rule language. Strike outs indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." ADOPTED RULES SECTION — <u>Underlining</u> indicates additions to proposed rule language. Strike outs indicate deletions from proposed rule language.</p>
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Proposed Rules

Part 5221.4000; Application Schedule; Instructions:

Adds a reference to the UB-92 manual and clarifies that the applicable billing code is the one in effect on the date of service.

Part 5221.4010; Employer's Liability for Services Under Medical Fee Schedule

Updates the cross reference to part 5221.4035.

Part 5221.4020; Determining Fee Schedule Payment Limits:

Requires payment under the fee schedule formula to be rounded to the nearest cent. Explains how to apply the columns in the tables of codes and relative value units based on the Medicare Relative Value Fee Schedule. Specifies which supplies may be paid separately when provided during the course of an office visit. Clarifies the non-applicability to workers' compensation of CPT codes 99455 and 99456.

Part 5221.4030; Medical/Surgical Procedure Codes:

Contains the new table of updated codes and relative value units for medical/surgical services based on the Medicare Relative Value Fee Schedule.

Part 5221.4032; Professional/Technical Components for Medical Surgical Services:

Corrects the cross references to the new tables.

Part 5221.4033; Outpatient Limitation for Medical/Surgical Facility Fees:

Clarifies how facility fees are paid if a separate facility fee is allowed. Also itemizes services that are included in the facility fee and those that may be paid separately. Updates the codes in the table.

Part 5221.4035; Fee Adjustments for Medical/Surgical Services:

Describes how certain indicators in the relative value fee schedule are to be applied based on the Medicare Relative Value Fee Schedule, and replaces and repeals part 5221.4034 in the current rule. Governs application of the global surgery package; multiple surgeries and procedures; bilateral surgeries; assistants-at-surgery; co-surgeons; and team surgeons; prohibits unbundling surgical services (specifically anterior arthrodesis).

- The proposed part 5221.4035, subparts 1 and 2 replace part 5221.4034, subpart 1. The proposed rules provide a general description of how the global surgery package is applied and add detail about what is included in the global surgery package.
- The proposed subpart 3 replaces part 5221.4034, subp. 2 and reflects a more detailed listing of services that are excluded (and therefore payable separately) from the global surgery package. Changes the formulas for calculating maximum fees for reoperations. Specifies how the multiple procedure, bilateral procedure and reoperation rules are to be coordinated. Allows payment of up to 125% of the maximum fee for significantly complex surgeries.
- The proposed subpart 4, governing services by more than one physician during the global period, replaces part 5221.4034, subp. 7. There is one percentage point difference in the formula for reimbursing providers who assume follow-up care after the surgery.
- The proposed subpart 5, governing payment for multiple surgical procedures on the same day by the same surgeon, replaces the current part 5221.4034, subpart 3. Increases the maximum fee for subsequent procedures from 25% of the maximum fee to 50% of the maximum fee. Adds instructions for coordinating the multiple procedure and bilateral procedure rules. Adds the instructions for reimbursing arthroscopies.
- The proposed subpart 6, governing payment for bilateral procedures, replaces part 5221.4034, subp. 4. Adds instructions for coordinating the multiple procedure and bilateral procedure rules.
- The proposed subpart 7, governing payment for assistants-at-surgery, replaces part 5221.4034, subp. 6. Adds instructions for coordinating the assistant-at-surgery rule with the cosurgeon and team surgeon rules. Provides a maximum fee of 10.4% of the global surgery fee (in addition to that paid to the surgeon) for an assistant-at-surgery who is not a physician, but who has advanced training as an assistant-at-surgery.
- Subpart 8, governing payment for cosurgeons, replaces part 5221.4034, subp. 5. Clarifies when the cosurgeon concept applies.
- Subpart 9, governing payment for team surgery, which applies to complex surgeries specified in the tables, has no corresponding provision in the current fee schedule. Provides that team surgeons are reimbursed at 85% of the amount charged according to *Minnesota Statutes* § 176.136, subd. 1b.
- Subpart 10, prohibits "unbundling" of a surgical procedure into separate codes. Specifies coding for anterior arthrodesis.

Part 5221.4040; Pathology and Laboratory Procedure Codes:

Contains the new table of codes and relative value units for pathology and laboratory services.

Part 5221.4041 Professional/Technical Components for Path/Lab Services

Corrects the cross reference to the new table in part 5221.4040

Part 5221.4050 Physical Medicine and Rehabilitation Procedure Codes:

Contains the new table of codes and relative value units for physical medicine and rehabilitation services based on Medicare relative value units, statistically adjusted according to *Minnesota Statutes* § 176.136, subd. 1a. Additional payment instructions and examples for certain physical medicine services are added.

Part 5221.4051; Fee Adjustments for Physical Medicine and Rehabilitation Services

The codes subject to the multiple procedure rule are amended to include only “modalities” listed in the CPT manual. The amount of the adjustment is clarified.

Part 5221.4060; Chiropractic Procedure Codes

Contains the new table of codes and relative value units for chiropractic services, based on Medicare relative value units, statistically adjusted according to *Minnesota Statutes* § 176.136, subd. 1a. Chiropractic “X” codes are replaced by the CPT physical medicine codes. Relative value units are modified from the Medicare relative value units for the physical medicine codes. Additional payment instructions and examples for certain services are added. Subpart 4 defines when a provider may charge a separate evaluation and management service on the same day as a manipulation.

Part 5221.4061; Fee Adjustments for Chiropractic Services

The codes subject to the multiple procedure rule are amended to include only “modalities” listed in the CPT manual. The amount of the adjustment is clarified. Payment is reduced by 50% where an extraspinal manipulation code is used in conjunction with a spinal manipulation code.

Part 5221.4062; Professional/Technical Components for Chiropractic Services:

Provides for a professional/technical adjustment of fees where appropriate for chiropractic imaging.

Part 5221.4070; Pharmacy:

Incorporates statutory requirements on payment for outpatient and inpatient small and large hospital services consistent with *Minnesota Statutes* § 176.136, subd. 1b.

Repealer:

Repeals *Minnesota Rules*, Part 5221.4034 and repeals the tables of codes and relative value units in parts 5221.4030, subp. 2a; 5221.4033, subp. 2a; 5221.4040, subp. 2a; 5221.4050, subp. 2a and 5221.4060, subp. 2a for services on or after the effective date of the rules.

Comments. You have until 4:30 p.m. on Wednesday, September 6, 2000, to submit written comment in support of or in opposition to the proposed rules and any part or subpart of the rules. Your comment must be in writing and received by the agency contact person by the due date. Comment is encouraged. Your comment should identify the portion of the proposed rules addressed and the reason for the comment. You are encouraged to propose any change desired. Any comments that you would like to make on the legality of the proposed rules must also be made during this comment period.

Request for a Hearing. In addition to submitting comments, you may also request that a hearing be held on the rules. Your request for a public hearing must be in writing and must be received by either of the agency contact persons by 4:30 p.m. on September 6, 2000. Your written request for a public hearing must include your name and address. You must identify the portion of the proposed rules to which you object or state that you oppose the entire set of rules. Any request that does not comply with these requirements is not valid and cannot be counted by the agency for determining whether a public hearing must be held. You are also encouraged to state the reason for the request and any changes you want made to the proposed rules.

Withdrawal of Requests. If 25 or more persons submit a written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If enough requests for hearing are withdrawn to reduce the number below 25, the agency must give written notice of this to all persons who requested a hearing, explain the actions the agency took to effect the withdrawal, and ask for written comments on this action. If a public hearing is required, the agency will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

<p>KEY: PROPOSED RULES SECTION — <u>Underlining</u> indicates additions to existing rule language. Strike outs indicate deletions from existing rule language. If a proposed rule is totally new, it is designated “all new material.” ADOPTED RULES SECTION — <u>Underlining</u> indicates additions to proposed rule language. Strike outs indicate deletions from proposed rule language.</p>
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Proposed Rules

Alternative Format. Upon request, this Notice can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request, please contact the agency contact person at the address or telephone number listed above.

Modifications. The proposed rules may be modified as a result of public comment. The modifications must be supported by comments and information submitted to the agency, and the adopted rules may not be substantially different than these proposed rules. If the proposed rules affect you in any way, you are encouraged to participate in the rulemaking process.

Statement of Need and Reasonableness. A statement of need and reasonableness is now available from:

Cheryl Eliason
Department of Labor and Industry
443 Lafayette Road
St. Paul, Minnesota 55155
Phone: (651) 297-1114
Fax: (651) 282-5448
email: cheryl.eliason@state.mn.us

This statement contains a summary of the justification for the proposed rules, including a description of who will be affected by the proposed rules and an estimate of the probable cost of the proposed rules. Copies of the statement may be obtained at the cost of reproduction from the agency.

Copyright Notice: The following copyright notice relates to the CPT codes and descriptions included in the proposed fee schedule. This notice is required by the American Medical Association:

The five-digit numeric codes and descriptions included in the proposed *Medical Services and Fees* rules are obtained from the *Physicians's Current Procedural Terminology*, copyright 1997 or 1998 by the American Medical Association (CPT). CPT is developed by the AMA as a listing of descriptive terms and numeric identifying codes and modifiers for reporting medical services and procedures performed by physicians.

This publication includes only CPT numeric identifying codes and modifiers for reporting medical services and procedures that were selected by the Minnesota Department of Labor & Industry. Any use of CPT outside the fee schedule should refer to the most current *Physician's Current Procedural Terminology*. The current CPT publications contains the complete and most current listings of CPT descriptive terms and numeric identifying codes and modifiers for reporting medical services and procedures.

No fee schedules, basis unit values, relative value guides, conversion factors or scales are included in any part of the *Physician's Current Procedural Terminology*, copyright 1997 or 1998, by the American Medical Association. All rights reserved.

Use of Physician's Current Procedural Terminology (CPT) as copyrighted by the American Medical Association as contained in this proposed rule is for the purpose of the rule adoption process. Any other use of CPT is strictly prohibited by the American Medical Association.

Adoption and Review of Rules. If no hearing is required, the agency may adopt the rules after the end of the comment period. The rules and supporting documents will then be submitted to the Office of Administrative Hearings for review for legality. You may ask to be notified of the date the rules are submitted to the office. If you want to be so notified, or want to receive a copy of the adopted rules, or want to register with the agency to receive notice of future rule proceedings, submit your request to the agency contact person listed above.

Dated: 25 July 2000

Gretchen B. Maglich
Commissioner

5221.0100 DEFINITIONS.

Subpart 1. **Scope.** The following terms have the meanings given in this chapter unless the context clearly indicates a different meaning.

Subp. 1a. **Ambulatory surgical center.** "Ambulatory surgical center" means a distinct entity that operates exclusively for the purpose of providing surgical services to patients not requiring hospitalization and is accredited by Medicare or is an outpatient surgical center as defined in part 4675.0100, subpart 8, and licensed by the Minnesota Department of Health.

Subp. 1b. **Appropriate record.** "Appropriate record" is a legible medical record or report which substantiates the nature and necessity of a service being billed and its relationship to the work injury.

[For text of subs 2 and 3, see M.R.]

Subp. 4. **Code.** “Code” means the alphabetic, numeric, or alphanumeric symbol used to identify a specific health care service, place of service, or diagnosis as follows:

[For text of items A to E, see M.R.]

F. “Procedure code” means a numeric or alphanumeric code used to identify a particular health care service. Procedure codes used in this chapter include CPT codes, HCPCS codes, ~~chiropractic procedure~~ revenue codes, dental codes, and prescription numbers.

G. “Revenue code” means a numeric or alphanumeric code included in the UB-92 manual, incorporated by reference in part 5221.0405, item G. Revenue codes are used in institutional settings such as hospitals to identify an individual or group of medical services, articles, or supplies.

[For text of subs 5 to 6b, see M.R.]

Subp. 6c. **Emergency care.** “Emergency care” means those medical services that are required for the immediate diagnosis and treatment of medical conditions that, if not immediately diagnosed and treated, could lead to serious physical or mental disability or death, or that are immediately necessary to alleviate severe pain. Emergency treatment includes treatment delivered in response to symptoms that may or may not represent an actual emergency, but is necessary to determine whether an emergency exists.

[For text of subs 9 and 10, see M.R.]

Subp. 10a. **Modifier.** “Modifier” means a two-digit number or two-letter symbol that is added to a procedure code to indicate that the service rendered differs in some material respect from the service as described in this chapter or in the CPT or HCPCS manual in effect on the date the service was rendered. Only those modifiers listed and described in the CPT or HCPCS manual in effect on the date the service was rendered may be used. Applicable modifiers must be used with a procedure code, even if the modifier has no effect on the payment level.

[For text of subs 11 to 12, see M.R.]

Subp. 14a. **Relative value unit or RVU.** “Relative value unit” or “RVU” means the numeric value assigned to a health care service or procedure to represent or quantify its worth, as compared to a standard service.

[For text of subp 15, see M.R.]

5221.0405 INCORPORATIONS BY REFERENCE.

The following documents are incorporated by reference to the extent cited in this chapter. Many of these documents may be accessed through the Internet by contacting the organization listed.

[For text of item A, see M.R.]

B. The Federal Health Care Financing Administration claim form (HCFA-1500)(U2)(12-90), and any subsequent revisions. It is not subject to frequent change. It is developed by the United States Department of Health and Human Services, Health Care Financing Administration, and may be purchased through the Superintendent of Documents, United States Government Printing Office, Washington, D.C. 20402, telephone number (202) 512-1800. It is available through the Minitex interlibrary loan system.

C. The Uniform Billing Claim form (UB-92, HCFA-1450) developed by the National Uniform Billing Committee, and any subsequent revisions. The federal Health Care Financing Administration determines the standards for printing this form. It is not subject to frequent change. It may be purchased from local commercial business office supply stores after April 1993. The form will be required by the federal Medicare program as of October 1993. It is available through the Minitex interlibrary loan system.

D. The Physician’s Current Procedural Terminology, (CPT manual) 4th edition, ~~1993~~ 1998, 1999, 2000, and any subsequent revisions. ~~It is~~ CPT codes are subject to frequent change. ~~It is~~ They are published by and may be purchased from the American Medical Association, Order Department: ~~OP054193~~ OP054196, P.O. Box 10950, Chicago, Illinois 60610. ~~It is~~ They are available through the Minitex interlibrary loan system.

E. The alphanumeric HCFA Common Procedural Coding System (HCPCS manual), January ~~1993 edition~~ 1998, 1999, and 2000 editions, and any subsequent revisions. It is subject to frequent change. It is published by the HCPCS subcommittee of Minnesota under the authority of the federal Health Care Financing Administration and may be ~~obtained from the Minnesota Department of Human Services, Claims Processing Section, 444 Lafayette Road, Saint Paul, Minnesota 55155-3849~~ purchased from Minnesota’s Bookstore, (651) 297-3000 or (800) 657-3757. It is available through the Minitex interlibrary loan system.

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Proposed Rules

F. Minnesota Standards for the Use of the HCFA 1500 Claim Form, third edition effective October 1, 1998, as referenced in the August 31, 1998, edition of the *State Register*, and any subsequent revisions adopted by the Department of Health under *Minnesota Statutes*, sections 62J.52 and 62J.61. It is subject to frequent change. It is published by the Administrative Uniformity Committee in conjunction with the Department of Health pursuant to *Minnesota Statutes*, sections 62J.52 and 62J.61. It may be purchased from Minnesota's Bookstore, (651) 297-3000 or (800) 657-3757. It is available through the Minitex interlibrary loan system.

G. The Manual for the Standards of Use of the UB-92 (HCFA 1450) form, 1994, and any subsequent revisions adopted by the Department of Health pursuant to *Minnesota Statutes*, sections 62J.52 and 62J.61. It is subject to frequent change. It is developed by the National Uniform Billing Committee and the Minnesota Uniform Billing Committee and published in conjunction with the Department of Health pursuant to *Minnesota Statutes*, sections 62J.52 and 62J.61. It may be purchased from the Minnesota Hospital and Health Care Partnership, (651) 641-1121. It is available through the Minitex interlibrary loan system.

5221.0410 REQUIRED REPORTING AND FILING OF MEDICAL INFORMATION.

[For text of subpart 1, see M.R.]

Subp. 2. **Health care provider report.** Within ten days of receipt of a request for information on the prescribed health care provider report form from an employer, insurer, or the commissioner, a health care provider must respond on the report form or in a narrative report that contains the same information requested on the form.

The health care provider's report form prescribed by the commissioner must include the information required by items A to M. ~~However, parties may also continue to use the maximum medical improvement and the physician's report forms prescribed by part 5220.2590 until January 1, 1994:~~

[For text of items A to M, see M.R.]

Subp. 3. **Maximum medical improvement.** For injuries occurring on or after January 1, 1984, or upon request for earlier injuries, the health care provider must report to the self-insured employer or insurer, maximum medical improvement, when ascertainable, on the health care provider report form or in a narrative report. "Maximum medical improvement" is a medical and legal concept defined by *Minnesota Statutes*, section 176.011, subdivision 25, ~~as the date after which no further significant recovery from or significant lasting improvement to a personal injury can reasonably be anticipated, based upon reasonable medical probability.~~

[For text of items A and B, see M.R.]

C. If the employer or insurer does not serve a notice of intention to discontinue benefits or a petition to discontinue benefits under *Minnesota Statutes*, section 176.238, at the same time a narrative maximum medical improvement report is served, then the report must be served with a cover letter containing the information in subitems (1) to (6). Serving the cover letter with the maximum medical improvement report does not replace the notice of intention to discontinue benefits or petition to discontinue benefits required by *Minnesota Statutes*, section 176.238. The cover letter must include:

[For text of subitems (1) to (4), see M.R.]

(5) ~~the statement: "definition of maximum medical improvement is as defined by *Minnesota Statutes*, section 176.011, subdivision 25, as the date after which no further significant recovery from or significant lasting improvement to a personal injury can reasonably be anticipated, based upon reasonable medical probability";~~ and

[For text of subitem (6), see M.R.]

[For text of subps 4 to 6, see M.R.]

Subp. 7. **Charge Payment and coding for required and supplementary reporting.**

A. No charge may be assessed for completion of a health care provider report or report of work ability required by subparts 2 and 6, or for a narrative or other report prepared in lieu of a health care provider report or report of work ability. ~~If a provider may charge a reasonable amount for requested supplementary reports using CPT codes itemizes this service on the billing form, the provider must use code 99080 (special reports); or X9198 (special chiropractic reports) when reporting this service.~~

B. A payer or other party may request supplementary reports from the health care provider for information not required in the health care provider report or the report of work ability. A provider may charge a reasonable amount for requested supplementary reports using code 99199 (unlisted special service or report). Payment for supplementary reports is not subject to the 85 percent payment limit as specified in part 5221.0500, subpart 2, item F.

[For text of subp 8, see M.R.]

5221.0420 HEALTH CARE PROVIDER PARTICIPATION WITH RETURN TO WORK PLANNING.

[For text of subps 1 and 2, see M.R.]

Subp. 3. **Reimbursement for services.** A health care provider may not require prepayment for communication required by this part. The provider must bill the employer and insurer for the services rendered. Return to work services ~~must be described, coded, and billed as special services, distinct from, and in addition to, all medical and chiropractic office and hospital visits and consultations. The following procedure codes must be used for these services: for communication directly with the employee alone must be included in the appropriate level of evaluation and management service. For a return to work service provided to anyone other than the employee, a provider may charge a reasonable amount under this part using code 99199 (unlisted special service or report). Payment for return to work services coded as 99199 under this subpart is not subject to the 85 percent payment limit as specified in part 5221.0500, subpart 2, item F.~~

- ~~A. 99080, special reports;~~
- ~~B. 99199, unlisted special service;~~
- ~~C. X9198, special chiropractic reports; or~~
- ~~D. X9199, unlisted special chiropractic service.~~

5221.0430 CHANGE OF HEALTH CARE PROVIDER.

[For text of subpart 1, see M.R.]

Subp. 2. **Change of health care provider.** Following selection of a primary provider, the employee may change primary providers once within the first 60 days after initiation of medical treatment for the injury without the need for approval from the insurer, the department, or a workers' compensation judge. ~~Transfer of medical care coordination due to conditions beyond the employee's control such as retirement, death, cessation from practice of the primary provider, or a referral from the primary provider to another provider does not exhaust the employee's right to a change of provider without approval under this subpart.~~ After the first 60 days following initiation of medical treatment for the injury, any further changes of primary provider must be approved by the insurer, the department, or a workers' compensation judge. However, at any time throughout the claim, transfer of medical care coordination due to conditions beyond the employee's control, such as retirement, death, cessation from practice of the primary provider, or a referral from the primary provider to another provider, does not require prior approval. If the employee is covered by a certified managed care plan, a change of providers is governed by chapter 5218, *Minnesota Statutes*, section 176.1351, subdivision 2, clause (11), and procedures under the plan.

[For text of subs 3 and 4, see M.R.]

5221.0500 EXCESSIVE CHARGES; LIMITATION OF PAYER LIABILITY.

Subpart 1. **Excessive health care provider charges.** A billing charge for services, articles, or supplies provided to an employee with a compensable injury is excessive if any of the conditions in items A to I apply to the charge. A payer is not liable for a charge which meets any of these conditions.

[For text of items A to D, see M.R.]

E. the service was performed by a provider prohibited from receiving reimbursement under *Minnesota Statutes*, chapter 176, pursuant to *Minnesota Statutes*, sections 176.83, 176.103, 176.1351, and 256B.0644; or

[For text of items F to I, see M.R.]

Subp. 2. **Limitation of payer liability.** A payer is not liable for health care charges which are excessive under subpart 1. If the charges are not excessive under subpart 1, a payer's liability for payment of charges is limited as provided in items A to F.

A. The payer's liability shall be limited to the maximum amount allowed for any service specified, article, or supply in the medical fee schedule ~~of this chapter~~ in effect on the date of the service, or the provider's usual and customary fee, whichever is lower.

B. Except as provided in items C to F, if the maximum fee for service, article, or supply is not ~~included in~~ limited by parts 5221.4000 to 5221.4070, the payer's liability for payment shall be limited to 85 percent of the provider's usual and customary charge, or 85 percent of the prevailing charge for similar treatment, articles, or supplies furnished to an injured person when paid for by the injured person, whichever is lower.

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Proposed Rules

[For text of subitems (1) and (2), see M.R.]

C. Under *Minnesota Statutes*, section 176.136, subdivision 1b, paragraph (a), payment for services, articles, and supplies provided to an employee while an inpatient or outpatient at a hospital with 100 or fewer licensed beds ~~or a patient at a nursing home participating in the medical assistance program~~ shall be 100 percent of the usual and customary charge as defined in item B, unless the charge is determined by the commissioner or compensation judge to be ~~unreasonable or unreasonably~~ excessive. The payer's liability for services provided by a nursing home that participates in the medical assistance program shall be the rate established by the commissioner of human services.

[For text of item D, see M.R.]

E. Charges for cost of copies of medical records and postage are governed by parts 5219.0100 to 5219.0300 and are not subject to the 85 percent reimbursement limit specified in item B. Travel expenses incurred by an employee for compensable medical services shall be paid at the rate equal to the rate paid by the employer for ordinary business travel expenses, or the rate paid by the state of Minnesota under the commissioner's plan for employment-related travel, whichever is lower. Reimbursement for employee travel expenses is not subject to the 85 percent reimbursement limit specified in item B.

[For text of item F, see M.R.]

Subp. 3. **Collection of excessive charges.** A provider may not collect or attempt to collect payment from an injured employee, or any other source, charges for a compensable injury which the payer has determined are excessive under subpart 1 or which exceed the maximum amount payable specified in subpart 2, unless payment is ordered by the commissioner, compensation judge, or workers' compensation court of appeals. Unless the provider or the employee has filed a claim for a determination of the amount payable with the commissioner, the health care provider must remove the charges from the billing statement. If a dispute exists as to whether an employee's injury is compensable under *Minnesota Statutes*, chapter 176, and the employee has general health insurance, payment of medical bills is governed by *Minnesota Statutes*, section 176.191, subdivision 3.

5221.0600 PAYER RESPONSIBILITIES.

[For text of subs 1 to 3, see M.R.]

Subp. 4. **Notification.** Within 30 calendar days of receipt of the bill, the payer shall provide written notification to the employee and provider of denial of part or all of a charge, or of any request for additional information. Written notification shall include:

[For text of item A to C, see M.R.]

D. a request for an appropriate record or the specific information requested to allow for proper determination of the bill under this part.

The payer shall specify the applicable rule, part, and subpart in this chapter supporting its denial or reduction of a charge. A general statement that a service or charge "exceeds the fee schedule or treatment parameters" is not adequate notification.

If payment is denied under item B, C, or D, the payer shall reconsider the charges in accordance with this rule as soon as reasonably possible, and no later than 30 calendar days after receipt of additional relevant information or documents. Notice of denial of part or all of a charge shall be given by the payer consistent with the guidelines in this subpart.

[For text of subs 5 and 6, see M.R.]

5221.0700 PROVIDER RESPONSIBILITIES.

[For text of subs 1 and 1a, see M.R.]

Subp. 2. **Submission of information.** Providers except for hospitals must supply with the bill a copy of an appropriate record that adequately documents the service and substantiates the nature and necessity of the service or charge. Hospitals must submit an appropriate record upon request by the payer. All charges billed after January 1, 1994, for workers' compensation health care services, articles, and supplies, except for United States government facilities rendering health care services for veterans must be submitted to the payer on the forms prescribed in subparts 2a, 2b, and 2c, and in accordance with items A to D.

A. Charges for services, articles, and supplies must be submitted to the payer directly by the health care provider actually furnishing the service, article, or supply. This includes but is not limited to the following:

[For text of subitems (1) and (2), see M.R.]

(3) services performed by a health care provider at a small or large hospital, as defined in part 5221.0500, subpart 2, items C and D, if the provider has an independent practice ~~and is not a salaried employee of the hospital~~, except that a hospital may charge for services furnished by a provider who receives at least a base payment from the hospital, which is paid regardless of the number of patients seen; and

[For text of subitem (4), see M.R.]

B. Charges must be submitted to the payer in the manner required by subparts 2a, 2b, and 2c within 60 days from the date the health care provider knew the condition being treated was claimed by the employee as compensable under workers' compensation. Failure to submit charges within the 60 days is not a basis to deny payment, but is a basis for disciplinary action against the provider under Minnesota Statutes, section 176.103.

[For text of items C and D, see M.R.]

Subp. 2a. **Federal health care financing administration claim form HCFA 1500 form.** Except as provided in subparts 2b and 2c, charges for all services, articles, and supplies that are provided for a claimed workers' compensation injury must be submitted to the payer on the HCFA 1500 form. Charges for dental services may be submitted on ~~any standard~~ the dental claim form required by Minnesota Statutes, section 62J.52, subdivision 3. ~~The following information must be submitted in the appropriate field of the claim form shown in item B as follows:~~ The HCFA 1500 form must be filled out in accordance with Minnesota Statutes, section 62J.52, and directions set forth in the "Minnesota Standards for the Use of the HCFA 1500 Claim Form" manual adopted by the Department of Health under Minnesota Statutes, section 62J.61.

~~(1) The name and address of the party making payment of the medical bill is the name and address of the self-insured employer or workers' compensation insurer at the time of injury, or workers' compensation third party administrator. This information must appear at the top of the form above the field labeled "HEALTH INSURANCE COVERAGES," position 1.~~

~~(2) The workers' compensation file number (the employee's social security number), if provided by employee, must appear in the field labeled "INSURED'S I.D. NUMBER," position 1a.~~

~~(3) The employee's name and address must appear in the fields labeled "PATIENT'S NAME" and "PATIENT'S ADDRESS," positions 2 and 5 respectively.~~

~~(4) The claim number, if known, of the workers' compensation payer listed in field 4 must appear in the field labeled "INSURED'S POLICY GROUP OR FECA NUMBER," position 11.~~

~~(5) If services were provided under a contract with or referral by a managed care plan certified for workers' compensation by the commissioner of labor and industry under Minnesota Statutes, section 176.1351, the name of the managed care organization must appear in the field labeled "INSURANCE PLAN NAME OR PROGRAM NAME," position 11e.~~

~~(6) The date of the injury must appear in the field labeled "DATE OF CURRENT ILLNESS OR INJURY," position 14.~~

~~(7) The name of the referring or ordering health care provider must appear in the field labeled "NAME OF REFERRING PHYSICIAN OR OTHER SOURCE," position 17 if the patient:~~

~~(a) was referred to the performing health care provider for consultation or treatment;~~

~~(b) was referred to an entity, such as a clinical laboratory, for a service; or~~

~~(c) obtained an order for an item or service from an entity, such as a durable medical equipment supplier.~~

~~(8) The Unique Physician Identifier Number (UPIN) of the referring or ordering health care provider listed in field 17 must appear in the field labeled "ID NUMBER OF REFERRING PHYSICIAN," position 17a. If the provider does not have a UPIN, the degree and license or registration number may be used instead of the UPIN.~~

~~(9) The appropriate ICD-9-CM code describing the principal diagnosis being treated must appear in the field labeled "DIAGNOSIS OR NATURE OF ILLNESS OR INJURY," position 21. Enter up to four codes in priority order for primary and secondary conditions.~~

~~(10) The date(s) of each service must appear separately in the field labeled "DATE(S) OF SERVICE," position 24A.~~

~~(11) The approved procedure codes and modifiers appropriate for the service, in accordance with subpart 3, must appear in the field labeled "PROCEDURES, SERVICES OR SUPPLIES," position 24D.~~

~~(12) The ICD-9-CM diagnosis code which relates to the date the service or procedure was performed must appear in the field labeled "DIAGNOSIS CODE," position 24E.~~

~~(13) The charge for each service must appear in the field labeled "\$ CHARGES," position 24F.~~

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Proposed Rules

~~(14) The code for Place of Service must appear in the field labeled "PLACE OF SERVICE," position 24B. The following Health Care Financing Administration (HCFA) codes must be used:~~

- ~~(a) 11 = office;~~
- ~~(b) 21 = hospital inpatient;~~
- ~~(c) 22 = hospital outpatient;~~
- ~~(d) 23 = emergency room - hospital; and~~
- ~~(e) 24 = ambulatory surgical center.~~

~~For all other places of service, the specific identifying code established by the HCFA must be used.~~

~~(15) The number of units of each service provided must appear in the field labeled "DAYS OR UNITS," position 24G.~~

~~(16) The health care provider who actually provided the service must be identified as appropriate in the field labeled "RESERVED FOR LOCAL USE," position 24K. The provider must be identified by a UPIN. If the provider does not have a UPIN, the degree and license or registration number may be used in lieu of the UPIN. If the provider does not have a UPIN or license or registration number, the name and degree of the person providing the service must be typed or printed.~~

~~(17) The signature of the health care provider, or the provider's representative, and the date signed must appear in the field labeled "SIGNATURE OF PHYSICIAN OR SUPPLIER," position 31.~~

~~(18) The name and address of the facility where the services were rendered must appear in the field labeled "NAME AND ADDRESS OF FACILITY WHERE SERVICES WERE RENDERED," position 32.~~

~~(19) The health care provider or supplier billing name, address, and telephone number must appear in the field labeled "PHYSICIAN'S, SUPPLIER'S BILLING NAME, ADDRESS, ZIP CODE & PHONE #," position 33.~~

Subp. 2b. **Uniform billing claim form UB-92 (HCFA 1450).** Hospitals licensed under *Minnesota Statutes*, section 144.50, must submit itemized charges on the uniform billing claim form, UB-92, (HCFA 1450). The UB-92 form must be filled out according to *Minnesota Statutes*, section 62J.52, and the manual for the standards of use of the UB-92 form published by the Minnesota Hospital and Health Care Partnership.

The following information must be submitted by hospitals in the appropriate fields of the UB-92 as follows:

~~(1) The name of the hospital submitting the bill and the complete mailing address to which the hospital wishes payment sent must appear in the form locator field 1.~~

~~(2) The patient's unique control number assigned by the provider to facilitate retrieval of financial records must appear in form locator field 3.~~

~~(3) The three digit code approved by the National Uniform Billing Committee for indicating the type of bill must appear in form locator field 4 in the following sequence:~~

~~(a) type of facility — 1st digit~~

hospital	1
skilled nursing	2
home health	3
intermediate care	6
clinic	7
special facility	8

~~(b) bill classification (except clinics and special facilities) — 2nd digit~~

IP	1 or 2
OP	3

~~(c) bill classification (clinics only) — 2nd digit~~

rural health	1
--------------	---

hospital-based or	
— independent renal	
— dialysis center	2

free-standing	3
---------------	---

~~outpatient rehab~~
~~— facility~~ 4

~~comprehensive~~
~~— outpatient rehab~~
~~— facility~~ 5

~~(d) bill classification (special facilities only) — 2nd digit~~

~~hospice (nonhospital-~~
~~— based)~~ 1

~~hospice (hospital~~
~~— based)~~ 2

~~ambulatory~~
~~— surgery center~~ 3

~~(e) frequency — 3rd digit in form locator is not information required by workers' compensation.~~

~~(4) The beginning and ending service dates of the period included on this bill must appear in form locator field 6.~~

~~(5) The patient's last name, first name, and middle initial must appear in this order in form locator field 12.~~

~~(6) The patient's address must appear in form locator field 13.~~

~~(7) The date the patient was admitted to the hospital for inpatient care must appear in form locator field 17.~~

~~(8) A code indicating the priority of this admission must appear in form locator field 19. Codes must be one of the following:~~

- ~~1~~ ~~Emergency~~
- ~~2~~ ~~Urgent~~
- ~~3~~ ~~Elective~~

~~(9) If the services billed were provided for an employment-related accident the code 04 and the date of injury must appear in form locator field 32a.~~

~~(10) All outpatient services must be itemized on the UB-92 form as follows:~~

~~(a) The approved billing codes and modifiers appropriate for the service, in accordance with subpart 3, must appear in the form locator field 44.~~

~~(b) The date each service was provided must appear in the form locator field 45.~~

~~(c) The number of units of each service provided must appear in the form locator field 46.~~

~~(d) The total charge for each service (charge per service x number of services) must appear in form locator field 47.~~

~~(e) The sum of all charges in column 47 on this bill must appear as the last line in form locator field 47. Revenue code 001 should appear to the left of this total in form locator field 42.~~

~~(11) Inpatient services must be submitted to the payer on the UB-92 form but may be summarized as follows:~~

~~(a) The revenue code which identifies a specific accommodation or ancillary service may appear in form locator field 42.~~

~~(b) A description of the related revenue categories must appear in the form locator field 43. Abbreviations may be used.~~

~~(c) The total charges for the category of service summarized must appear in form locator field 47.~~

~~(d) The sum of all charges in column 47 on this bill must appear as the last line in form locator field 47. Revenue code 001 should appear to the left of this total in form locator field 42.~~

When the UB-92 form provides only summary information, an itemized listing of all services and supplies provided during the inpatient hospitalization must be attached to the UB-92 form. The itemized list must include:

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Proposed Rules

i. A. where a code is assigned to a service, the approved procedure codes and modifiers appropriate for the service, in accordance with subpart 3. Charges for supplies need not be coded, but a description and charge for specific articles and supplies must be itemized;

ii. B. the charge for each service;

iii. C. the number of units of each service provided; and

iv. D. the date each service was provided.

(12) ~~The name of the payer from which the provider might expect payment for the bill must appear in the form locator field 50. This is the self insured employer, the workers' compensation insurer at the time of injury, or the third party administrator.~~

(13) ~~The workers' compensation file number (the employee's social security number) if provided by the employee, must appear in form locator field 60.~~

(14) ~~If services were provided under a contract with or referral by a managed care plan certified for workers' compensation by the commissioner of labor and industry under *Minnesota Statutes*, section 176.1351, the name of the managed care plan must appear in form locator field 61.~~

(15) ~~The ICD-9-CM codes describing the principal diagnosis (i.e., the condition established after study to be chiefly responsible for occasioning admission of the patient for care) must appear in form locator field 67. Enter codes for diagnosis other than the principal diagnosis in form locator fields 68-75.~~

(16) ~~The CPT-4 code that indicates the principal procedure performed during the period covered by this bill and the date on which the principal procedure was performed must appear in form locator field 80. Enter codes for procedures other than the principal procedure in form locator field 81.~~

(17) ~~The attending health care provider who has primary responsibility for the patient's medical care and treatment must be identified in form locator field 82. Enter the UPIN and the name of the provider. If the provider does not have a UPIN, the degree and license or registration number may be used in lieu of the UPIN.~~

(18) ~~The health care provider, other than the attending provider, who performed the principal procedure, if any, must appear in form locator field 83. Enter the UPIN and name of the provider. If the provider does not have a UPIN, the degree and license, or registration number may be used in lieu of the UPIN.~~

(19) ~~An authorized signature indicating that the information entered on the face of this bill is in conformance with the certifications on the back of this bill, must appear in form locator field 85. A facsimile signature is acceptable. The date the form is signed must be completed.~~

[For text of subp 2c, see M.R.]

Subp. 3. Billing code.

A. The provider shall undertake professional judgment to assign the correct approved billing code ~~for, and any applicable modifiers, in the CPT, HCPCS, or UB-92 manual in effect on the date the service, article, or supply was rendered,~~ using the appropriate provider group designation, and according to the instructions and guidelines in this chapter ~~and in the CPT or HCPCS manual in effect on the date the service was rendered.~~ No provider may use a billing code which is assigned a "D," "G," "H," or "I" status in part 5221.4030. Where several component services which have different CPT codes may be described in one more comprehensive CPT code, only the single CPT code most accurately describing the procedure performed or service rendered may be reported.

Dental procedures not included in CPT or HCPCS shall be coded using any standard dental coding system.

~~A. Billing codes must include the correct procedure code found in the CPT or HCPCS manual in effect on the date the service was rendered or the correct chiropractic procedure code found in the medical fee schedule in effect on the date the service was rendered or the correct prescription number. The billing code must also include any appropriate modifier.~~

~~B. The codes for services in parts 5221.4030 to 5221.4070 may be submitted with two-digit or two-letter suffixes called "modifiers;" as defined in part 5221.0100, subpart 10a. Modifiers indicate that the service rendered differs in some material respect from the service as described in this chapter or in the CPT or HCPCS manual. Modifiers used must be those listed and described in the CPT manual in effect on the date the service was rendered. Except as otherwise specifically provided in parts 5221.4000 to 5221.4070, the use of a modifier does not change the maximum fee to be calculated according to part 5221.4020.~~

C. Provider group designation.

[For text of subitems (1) to (3), see M.R.]

(4) Physical medicine and rehabilitation services. Procedure codes for services and supplies provided by a physician, an osteopathic physician, a physical therapist, ~~or an occupational therapist, a physical therapist assistant under the direction and supervision of a physical therapist, or a certified occupational therapy assistant under the direction and supervision of an occupational therapist,~~ or provided incident to the services of a physician, an osteopathic physician, a physical therapist, or an occupational therapist are listed in part 5221.4050.

[For text of subitems (5) and (6), see M.R.]

[For text of subp 4, see M.R.]

5221.4000 APPLICATION SCHEDULE; INSTRUCTIONS.

[For text of subps 1 and 2, see M.R.]

Subp. 3. **Applicability.** The medical fee schedule applies to a charge for a particular health care service if:

- A. the medical service is compensable under *Minnesota Statutes*, section 176.135;
- B. the service conforms to a billing code listed in ~~this chapter and meets the code descriptions which appear in this chapter or in the CPT or HCPCS manual, or UB-92 manual~~ in effect on the date the service was rendered; and
- C. the service is listed under the appropriate provider group designation for the health care provider that rendered the service.

5221.4010 EMPLOYER'S LIABILITY FOR SERVICES UNDER MEDICAL FEE SCHEDULE.

Unless the maximum fee is adjusted under part ~~5221.4034~~ 5221.4035, 5221.4041, 5221.4051, or 5221.4061, the employer's liability for services included in parts 5221.4030 to 5221.4060 is limited to 100 percent of the fee schedule amount calculated according to the formula in part 5221.4020 or the provider's usual and customary fee for the service, whichever is lower. The employer's liability for pharmacy services is as provided in part 5221.4070.

5221.4020 ~~FORMULA FOR DETERMINING FEE SCHEDULE PAYMENT LIMITS; CONVERSION FACTOR.~~

Subpart 1. **Formula Conversion factor.**

~~A.~~ A. Except as provided in parts ~~5221.4034~~ 5221.4035, 5221.4041, 5221.4051, 5221.4061, and 5221.4070, the maximum fee in dollars for a health care service subject to the medical fee schedule is calculated according to the following formula: maximum fee = relative value unit (RVU) x conversion factor (CF), rounded to the nearest cent, according to standard mathematical principles.

~~Relative value units~~ RVUs for all included services are listed in parts 5221.4030, 5221.4040, 5221.4050, and 5221.4060.

~~Subp. 2. Conversion factor.~~ B. The conversion factor shall be updated annually, pursuant to *Minnesota Statutes*, section 176.136, subdivision 1a. The conversion factor for services included in parts 5221.4030 to 5221.4060 provided after October 1, 1993, is \$52.05. This initial conversion factor is annually adjusted as follows:

- ~~A. (1)~~ (1) for dates of service from October 1, 1994, to September 30, 1995: \$52.91;
- ~~B. (2)~~ (2) for dates of service from October 1, 1995, to September 30, 1996: \$54.31;
- ~~C. (3)~~ (3) for dates of service from October 1, 1996, to September 30, 1997: \$56.35;
- ~~D. (4)~~ (4) for dates of service from October 1, 1997, to September 30, 1998: \$59.47;
- ~~E. (5)~~ (5) for dates of service from October 1, 1998, to September 30, 1999: \$62.27; and
- ~~F. (6)~~ (6) for dates of service from October 1, 1999, to September 30, 2000: \$66.14.

As a sample calculation, ~~assume the maximum fee RVU for a new patient office examination, nonfacility, by a physician, procedure code 99201, is 0.80 (relative value unit)~~ 0.84 RVU. If the date of service was September 1, 2000, ~~this RVU is multiplied by 52.05~~ 66.14 (conversion factor ~~for 1993~~ effective October 1, 1999). ~~The total payment maximum fee under parts 5221.4030 to 5221.4070, excluding any applicable adjustment, would be equal to \$41.64~~ \$55.56 for the service.

Subp. 2. Key to abbreviations and terms and payment instructions. Columns 1 to 12 found in parts 5221.4030, subpart 2b, 5221.4040, subpart 2b, 5221.4050, subpart 2b, and 5221.4060, subpart 2b, list indicators necessary to determine the maximum fee for the service. Further payment adjustments may apply as specified in this subpart.

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Proposed Rules

A. Column 1 identifies CPT/HCPCS code. This is the specific procedure code intended to identify the health care service described in column 4.

B. Column 2 identifies when there is a technical/professional modifier. Column 2 contains a modifier if there is a technical component (TC) and a professional component (26) for the service. Parts 5221.4032 and 5221.4062 provide additional instructions for applying these modifiers. The technical/professional modifier for pathology/laboratory services is as described in part 5221.4041. Column 2 also contains a modifier "53" to identify a separate RVU for a procedure that has been terminated by the physician before completion.

(1) 26 indicates professional component only codes. This indicator identifies codes that describe the physician work portion of selected services for which there is an associated code that describes the technical component of the service only.

(2) TC indicates technical component only codes. This indicator identifies codes that describe the technical component, such as staff and equipment costs, of selected services for which there is an associated code that describes the professional component of the service only.

C. Column 3 identifies the status of the code.

(1) "A" status indicates an active code. These services are separately paid under the medical fee schedule. The maximum fee for this service is calculated according to the formula in subpart 1 and as adjusted by other instructions in this subpart.

(2) "B" status indicates a bundled code. Payment for covered services are always bundled into payment for other services. There is no separate payment for these services even if an RVU is listed. When these services are covered, payment for them is subsumed by the payment for the services to which they are incident. An example is a telephone call from a hospital nurse regarding care of a patient.

(3) "C" status indicates a coverage status that is unique to the federal Medicare fee schedule. If the service is compensable for workers' compensation under *Minnesota Statutes*, section 176.135, the maximum fee for the service is governed by part 5221.0500, subpart 2, items B to F, and *Minnesota Statutes*, section 176.136, subdivision 1b.

(4) "D" status indicates an invalid or deleted CPT or HCPCS code. Another CPT or HCPCS code must be used to describe the service. No payment is allowed for codes with a "D" status even if a positive RVU is listed.

(5) "E" status indicates a coverage status that is unique to the federal Medicare fee schedule. If the service is compensable for workers' compensation under *Minnesota Statutes*, section 176.135, the maximum fee for the service is governed by part 5221.0500, subpart 2, items B to F, and *Minnesota Statutes*, section 176.136, subdivision 1b, if the code has an RVU of zero. If a positive RVU is listed, the liability for the service is limited to the listed RVU.

(6) "G" and "I" status indicates an invalid CPT or HCPCS code and "H" status indicates an invalid modifier code. Another code must be used to describe these services. No payment is allowed for codes with a "G," "H," or "I" status even if a positive RVU is listed.

(7) "N" status indicates a code that is unique to the federal Medicare fee schedule. If the service is compensable for workers' compensation under *Minnesota Statutes*, section 176.135, the liability for the service is governed by part 5221.0500, subpart 2, items B to F, and *Minnesota Statutes*, section 176.136, subdivision 1b, if the code has an RVU of zero. If a positive RVU is listed, the liability for the service is limited to the listed RVU.

(8) "P" status indicates a bundled or excluded code.

(a) If the item or service is covered as incident to a physician service and is provided on the same day as a physician service, payment for it is bundled into the payment for the physician service to which it is incident. An example is an elastic bandage furnished by a physician incident to physician service.

(b) If the item or service is covered as other than incident to a physician service, such as colostomy supplies, it may be paid for separately. If the item or service is not provided incident to the services of a licensed provider, the maximum fee for the service is governed by any listed positive RVU or, if there is a zero RVU listed, by part 5221.0500, subpart 2, items B to F, and *Minnesota Statutes*, section 176.136, subdivision 1b.

(9) "R" status indicates a coverage status that is unique to the federal Medicare fee schedule. If the service is compensable for workers' compensation under *Minnesota Statutes*, section 176.135, the maximum fee for the service is governed by part 5221.0500, subpart 2, items B to F, and *Minnesota Statutes*, section 176.136, subdivision 1b, if the code has an RVU of zero. If a positive RVU is listed, the liability for the service is limited to the listed RVU.

(10) "T" status indicates injections. There are RVUs listed for these services, but they are only paid if there are no other services payable under the fee schedule billed on the same date by the same provider. If any other services payable under the fee schedule are billed on the same date by the same provider, these services are bundled into the physician services for which payment is made. Payment for the injected material is separate from the injection services and is governed by part 5221.0500, subpart 2, items B to F.

(11) “X” status indicates a code that is unique to the federal Medicare fee schedule. If the service is compensable for workers’ compensation under *Minnesota Statutes*, section 176.135, the maximum fee for the service is governed by part 5221.0500, subpart 2, items B to F, and *Minnesota Statutes*, section 176.136, subdivision 1b, if the code has an RVU of zero. If a positive RVU is listed, the liability for the service is limited to the listed RVU.

D. Column 4 is an abbreviated CPT/HCPCS description. This is a short narrative description of the procedure code. A detailed description of the service appears in the CPT or HCPCS manual incorporated by reference in the applicable medical fee schedule.

E. Column 5 lists the total RVUs for the service when the service is provided by a health care provider in the provider’s office.

F. Column 6 lists the total RVUs for the professional service when the service is provided by a health care provider in a facility such as a hospital or ambulatory surgical center.

G. Column 7 indicates the application of the global surgery package. It provides time frames and other circumstances that apply to each surgical procedure. Part 5221.4035 provides additional factors affecting payment.

(1) 000 indicates endoscopic or minor procedure with related preoperative and postoperative relative values on the day of the procedure only included in the RVU amount.

(2) 010 indicates a procedure with preoperative relative values on the day of the procedure and postoperative relative values during a ten-day postoperative period included in the RVU amount.

(3) 090 indicates major surgery with a one-day preoperative period and a 90-day postoperative period included in the RVU amount.

(4) MMM indicates maternity codes. The usual global period does not apply.

(5) XXX indicates the global surgery package concept does not apply to the code.

(6) YYY indicates the global surgery package concept may apply. If the provider and payor cannot agree to a specified global period, the global period shall be determined by the commissioner or compensation judge. For purposes of this subitem, the global period shall include normal, uncomplicated follow-up care for the procedure.

(7) ZZZ indicates the code is related to a primary service and has the same global period as the primary service. However, it is considered an add-on code and is paid separately.

H. Column 8 governs payment for multiple procedures. Symbols in column 8 indicate applicable payment adjustment rule for multiple procedures.

(1) O indicates no payment adjustment rules for multiple procedures apply.

(2) 2 indicates standard payment adjustment rules for multiple procedures apply as provided in part 5221.4035, subpart 5.

(3) 3 indicates special rules for multiple endoscopic/arthroscopic procedures apply as provided in part 5221.4035, subpart 5, item E.

(4) 4 indicates special rules for multiple procedures. See parts 5221.4051 and 5221.4061 for specific instructions.

(5) 9 indicates that the concept of multiple procedure does not apply.

I. Column 9 governs payment for bilateral procedure. Symbols in column 9 indicate services subject to payment adjustment if they are bilateral procedures.

(1) 0 indicates that no payment adjustments apply to bilateral procedures.

(2) 1 indicates that bilateral payment adjustments apply.

(3) 2 indicates that no further bilateral payment adjustments apply.

(4) 3 indicates that no bilateral payment adjustments apply.

(5) 9 indicates that the concept of bilateral procedures does not apply.

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Proposed Rules

J. Column 10 governs payment for assistant-at-surgery. Symbols in column 10 indicate services when an assistant-at-surgery may be paid.

(1) 0 indicates an assistant-at-surgery may not be paid unless supporting documentation is submitted to establish medical necessity, in which case payment is according to part 5221.4035, subpart 7.

(2) 1 indicates an assistant-at-surgery may not be paid.

(3) 2 indicates that an assistant-at-surgery may be paid according to part 5221.4035, subpart 7.

(4) 9 indicates that the concept of assistant-at-surgery does not apply.

K. Column 11 governs payment for cosurgeons. Symbols in column 11 indicate services for which two surgeons may be paid.

(1) 0 indicates cosurgeons are not permitted for this procedure and no payment for a cosurgeon may be made.

(2) 1 indicates cosurgeons may be paid, with supporting documentation establishing the medical necessity of two surgeons for the procedure. Where necessity is established, payment is according to part 5221.4035, subpart 8.

(3) 2 indicates cosurgeons are paid according to part 5221.4035, subpart 8.

(4) 9 indicates that the concept of cosurgeons does not apply.

L. Column 12 governs payment for team surgery. Symbols in column 12 indicate services for which team surgeons may be paid. Part 5221.4035, subpart 9, defines team surgery.

(1) 0 indicates team surgeons are not permitted for this procedure and no payment may be made for team surgeons.

(2) 1 indicates team surgeons may be paid, if supporting documentation establishes medical necessity of a team. The maximum fee for the service is limited by part 5221.0500, subpart 2, items B to F, and *Minnesota Statutes*, section 176.136, subdivision 1b.

(3) 2 indicates team surgeons are permitted. The maximum fee for the service is limited by part 5221.0500, subpart 2, items B to F, and *Minnesota Statutes*, section 176.136, subdivision 1b.

(4) 9 indicates that the concept of team surgery does not apply.

Subp. 3. Supplies, separate billing allowed. Except as otherwise provided in subpart 2, charges for the following supplies provided during an evaluation and management service in the office may be billed separately and paid according to the assigned RVU or, if no positive RVU is assigned, the charges are limited by part 5221.0500, subpart 2:

A. surgical trays for services specified in part 5221.4035, subpart 3, item I;

B. injectable drugs and antigens;

C. splints, casts, and other devices used in the treatment of fractures and dislocations;

D. all take-home supplies provided by the health care provider or hospital, regardless of type;

E. orthotic device used for the purpose of supporting a weak or deformed body member or restricting or eliminating motion in a diseased or injured part of the body. Braces meet this definition. Elastic stockings and bandages applied in the office do not meet this definition; and

F. prosthetic devices which replace all or part of an internal body organ, or replace all or part of the function of a permanently inoperative or malfunctioning internal body organ. A foley catheter for a permanently incontinent patient meets this definition. A catheter used to obtain a urine specimen does not meet this definition.

Subp. 4. Codes 99455 and 99456. The CPT manual describes two codes for "Work Related or Medical Disability Evaluation Services" (codes 99455 and 99456). These codes are used to report evaluations performed to establish baseline information prior to life or disability insurance certificates being issued. They are not to be used for reporting services for treatment or evaluation of a compensable work injury under parts 5221.0410 and 5221.0420 or *Minnesota Statutes*, chapter 176.

5221.4030 MEDICAL/SURGICAL PROCEDURE CODES.

Subpart 1. **Key to abbreviations and terms.** For descriptions of columns, abbreviations, and terms, see part 5221.4020, subpart 2.

A. Column 1 in subpart 2a is labeled "CPT/HCPCS procedure code." This is the specific code intended to identify the health care service described in column 4.

B. Column 2 in subpart 2a is labeled "Tech/Prof. MOD." Column 2 contains a modifier if there is a technical component (TC) and a professional component (26) for the service.

C. Column 3 in subpart 2a is labeled “status.” These indicators, explained in subitems (1) to (5), provide additional information necessary to determine the maximum fee for the service.

(1) “A” indicates an active code. These services are separately paid under the medical fee schedule. There are RVUs for codes with this status. For example, procedure code number 99291, for critical care, first hour, is an active code with a total RVU of 5.27. The maximum fee for this service is calculated according to the formula in part 5221.4020.

(2) “B” indicates a bundled code. Payment for these services is always subsumed or bundled into payment for another service. There are no RVUs for these codes and no separate payment is made. For example, procedure code number 99371, for a telephone call from a hospital nurse regarding care of a patient, is a bundled code, with a total RVU of 0.00. This service is not separately payable because it is included in the payment for a hospital visit, procedure code number 99261.

(3) “P” indicates a bundled or excluded code. There are no RVUs for these services. Payment for these services is determined according to the following guidelines:

(a) If the item or service is provided incident to the services of a licensed provider, on the same day as the licensed provider service, payment for it is bundled into the payment for the licensed provider service to which it is incident. For example, an elastic bandage, procedure code number A4202, is a “P” code. If a provider furnished an employee an elastic bandage while treating the employee for a tibia fracture, the cost of the bandage is included in the cost of the treatment, procedure code number 27750. No separate payment for the bandage is allowed.

(b) If the item or service is not provided incident to the services of a licensed provider, it is excluded from the fee schedule and liability for the service is limited by Minnesota Statutes, section 176.136, subdivision 1b.

(4) “T” indicates injections. RVUs are listed for these services, but separate payment is made only when there are no other services billed on the same date by the same provider. If any other services are billed on the same date by the same provider, these injection services are bundled into the service for which payment is made.

(5) “Z” indicates electrocardiograms. RVUs are listed for these services, but no separate payment shall be made for these services if they are provided during, as a result of, or in conjunction with any visit or consultation, including visits in critical care and all other sites.

D. Column 4 in subpart 2a is labeled “CPT/HCPCS description.” This is a short narrative description of the procedure code. A complete description of the service appears in the CPT or HCPCS Manual in effect on the date the service was rendered.

E. Column 5 in subpart 2a is labeled “total RVU.” These are the total relative value units for the service.

F. Column 6 in subpart 2a is labeled “global period.” Symbols in column 6 indicate the application of the global surgery package in part 5221.4034, subpart 1.

Subp. 2a. [See repealer.]

Subp. 2b. List of medical/surgical procedure codes.

A. Procedure code numbers 10040 to 19499 relate to skin procedures.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(1) Skin, incision and drainage:											
10040	A	Acne surgery		1.40	1.24	010	2	0	1	0	0
10060	A	Drainage of skin abscess		1.51	1.30	010	2	0	1	0	0
10061	A	Drainage of skin abscess		2.83	2.52	010	2	0	1	0	0
10080	A	Drainage of pilondial		1.57	1.33	010	2	0	1	0	0
10081	A	Drainage of pilondial		3.38	2.85	010	2	0	1	0	0

*CPT codes and descriptions are copyright 1997 or 1998 American Medical Association. ALL RIGHTS RESERVED. Applicable FARS/DFARS apply.

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
10120	A		Remove foreign body	1.58	1.36	010	2	0	1	0	0
10121	A		Remove foreign body	3.47	2.99	010	2	0	1	0	0
10140	A		Drainage of hematoma	1.88	1.65	010	2	0	1	0	0
10160	A		Puncture drainage of cyst	1.48	1.30	010	2	0	1	0	0
10180	A		Complex drainage, cyst	3.16	3.16	010	2	0	1	0	0
(2) Skin, excision, debridement:											
11000	A		Debride infected skin	0.95	0.76	000	2	0	1	0	0
11001	A		Debride infected skin	0.53	0.41	ZZZ	0	0	1	0	0
11010	A		Debride skin, foreign	8.00	8.00	010	2	2	2	0	0
11011	A		Debride skin/muscle	9.48	9.48	000	2	2	2	0	0
11012	A		Debride skin/muscle	13.17	13.17	000	2	2	2	0	0
11040	A		Debride skin, partial	0.86	0.67	000	2	0	1	0	0
11041	A		Debride skin, full	1.32	1.05	000	2	0	1	0	0
11042	A		Debride skin/tissue	1.69	1.37	000	2	0	1	0	0
11043	A		Debride tissue/muscle	4.10	4.10	010	2	0	1	0	0
11044	A		Debride tissue/muscle	5.77	5.77	010	2	0	1	0	0
(3) Skin, paring or cutting:											
11050	D		Trim skin lesion	0.76	0.59	000	2	0	1	0	0
11051	D		Trim 2 to 4 skin lesions	1.11	0.87	000	2	0	1	0	0
11052	D		Trim over 4 skin lesions	1.20	1.00	000	2	0	1	0	0
11055	R		Trim skin lesion	0.50	0.38	000	2	0	1	0	0
11056	R		Trim 2 to 4 skin lesions	0.70	0.53	000	2	0	1	0	0
11057	R		Trim over 4 skin lesions	0.74	0.60	000	2	0	1	0	0
(4) Skin, biopsy:											
11100	A		Biopsy of skin	1.25	1.00	000	2	0	1	0	0
11101	A		Biopsy, each additional	0.66	0.52	ZZZ	0	0	1	0	0
(5) Skin, removal of skin tags:											
11200	A		Removal of skin tags	1.14	0.93	010	2	0	1	0	0
11201	A		Removal of additional	0.44	0.36	ZZZ	0	0	1	0	0
(6) Skin, shaving of epidermal or dermal lesions:											
11300	A		Shave skin lesion	1.00	0.75	000	2	0	0	0	0
11301	A		Shave skin lesion	1.45	1.13	000	2	0	0	0	0
11302	A		Shave skin lesion	1.86	1.43	000	2	0	0	0	0
11303	A		Shave skin lesion	2.53	1.88	000	2	0	0	2	0
11305	A		Shave skin lesion	1.14	0.89	000	2	0	0	0	0
11306	A		Shave skin lesion	1.62	1.28	000	2	0	0	0	0
11307	A		Shave skin lesion	2.00	1.54	000	2	0	0	0	0
11308	A		Shave skin lesion	2.73	2.05	000	2	0	0	0	0
11310	A		Shave skin lesion	1.36	1.03	000	2	0	0	0	0
11311	A		Shave skin lesion	1.82	1.41	000	2	0	0	0	0
11312	A		Shave skin lesion	2.23	1.69	000	2	0	0	0	0
11313	A		Shave skin lesion	2.99	2.27	000	2	0	0	0	0

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(7) Skin, excision, benign lesions:										
11400	A	Removal of skin	1.37	1.11	010	2	0	1	0	0
11401	A	Removal of skin	1.88	1.56	010	2	0	1	0	0
11402	A	Removal of skin	2.37	1.94	010	2	0	1	0	0
11403	A	Removal of skin	2.94	2.38	010	2	0	1	0	0
11404	A	Removal of skin	3.42	2.76	010	2	0	1	0	0
11406	A	Removal of skin	4.50	4.50	010	2	0	1	0	0
11420	A	Removal of skin	1.49	1.24	010	2	0	1	0	0
11421	A	Removal of skin	2.11	1.77	010	2	0	1	0	0
11422	A	Removal of skin	2.56	2.11	010	2	0	1	0	0
11423	A	Removal of skin	3.32	2.69	010	2	0	1	0	0
11424	A	Removal of skin	3.81	3.14	010	2	0	1	0	0
11426	A	Removal of skin	5.36	5.36	010	2	0	1	0	0
11440	A	Removal of skin	1.74	1.41	010	2	0	1	0	0
11441	A	Removal of skin	2.33	1.92	010	2	0	1	0	0
11442	A	Removal of skin	2.84	2.30	010	2	0	1	0	0
11443	A	Removal of skin	3.74	3.04	010	2	0	1	0	0
11444	A	Removal of skin	4.60	3.89	010	2	0	1	0	0
11446	A	Removal of skin	5.89	5.04	010	2	0	1	0	0
11450	A	Removal, sweat	5.31	5.31	090	2	0	1	0	0
11451	A	Removal, sweat	6.64	6.64	090	2	0	0	0	0
11462	A	Removal, sweat	4.81	4.81	090	2	0	0	0	0
11463	A	Removal, sweat	5.71	5.71	090	2	0	0	0	0
11470	A	Removal, sweat	5.88	5.88	090	2	0	1	0	0
11471	A	Removal, sweat	6.64	6.64	090	2	0	0	0	0

(8) Skin, excision, malignant lesions:

11600	A	Removal of skin	2.43	1.88	010	2	0	1	0	0
11601	A	Removal of skin	3.16	2.49	010	2	0	1	0	0
11602	A	Removal of skin	3.74	2.86	010	2	0	1	0	0
11603	A	Removal of skin	4.42	3.34	010	2	0	1	0	0
11604	A	Removal of skin	4.99	3.74	010	2	0	1	0	0
11606	A	Removal of skin	6.39	6.39	010	2	0	1	0	0
11620	A	Removal of skin	2.58	1.93	010	2	0	1	0	0
11621	A	Removal of skin	3.57	2.72	010	2	0	1	0	0
11622	A	Removal of skin	4.35	3.29	010	2	0	1	0	0
11623	A	Removal of skin	5.29	4.04	010	2	0	1	0	0
11624	A	Removal of skin	6.39	4.84	010	2	0	1	0	0
11626	A	Removal of skin	7.48	7.48	010	2	0	1	0	0
11640	A	Removal of skin	3.07	2.27	010	2	0	1	0	0
11641	A	Removal of skin	4.33	3.32	010	2	0	1	0	0
11642	A	Removal of skin	5.27	4.03	010	2	0	1	0	0
11643	A	Removal of skin	6.24	4.79	010	2	0	1	0	0
11644	A	Removal of skin	7.70	6.01	010	2	0	1	0	0
11646	A	Removal of skin	9.91	9.91	010	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(9) Nails:											
11719	R		Trim nails	0.34	0.16	000	2	0	1	0	0
11720	A		Debride nails, 1 to 5	0.62	0.46	000	0	0	1	0	0
11721	A		Debride nails, 6 or more	1.04	0.78	000	0	0	1	0	0
11730	A		Removal of nail	1.48	1.27	000	2	0	1	0	0
11731	A		Removal of second nail	1.04	0.79	ZZZ	0	0	1	0	0
11732	A		Remove additional nail	0.77	0.65	ZZZ	0	0	1	0	0
11740	A		Drain blood from	0.73	0.55	000	2	0	1	0	0
11750	A		Removal of nail	3.82	2.81	010	2	0	1	0	0
11752	A		Remove nail bed	5.35	3.98	010	2	0	1	0	0
11755	A		Biopsy of nail unit	2.21	2.21	000	2	0	0	0	0
11760	A		Reconstruction	2.38	1.93	010	2	0	1	0	0
11762	A		Reconstruction	5.24	4.00	010	2	0	1	0	0
11765	A		Excision of skin of nail	1.15	0.90	010	2	0	1	0	0
11770	A		Removal of pilondial	5.19	5.19	010	2	0	1	0	0
11771	A		Removal of pilondial	10.08	10.08	090	2	0	1	0	0
11772	A		Removal of pilondial	11.55	11.55	090	2	0	1	0	0
(10) Nails, introduction:											
11900	A		Injection, intralesiona	0.72	0.60	000	2	0	1	0	0
11901	A		Added skin lesions	1.14	0.94	000	2	0	1	0	0
11920	R		Correct skin color	2.73	2.73	000	2	0	0	0	0
11921	R		Correct skin color	3.26	3.26	000	2	0	0	0	0
11922	R		Correct skin color	0.83	0.83	ZZZ	0	0	0	0	0
11950	R		Therapy, contour defects	1.97	1.97	000	2	0	0	0	0
11951	R		Therapy, contour defects	2.29	2.29	000	2	0	0	0	0
11952	R		Therapy, contour defects	2.74	2.74	000	2	0	0	0	0
11954	R		Therapy, contour defects	2.89	2.89	000	2	0	0	0	0
11960	A		Insert tissue expander	16.53	16.53	090	2	0	1	0	0
11970	A		Replace tissue expander	14.80	14.80	090	2	0	1	0	0
11971	A		Remove tissue expander	4.61	4.61	090	2	0	0	0	0
11975	N		Insert contraceptive	0.00	0.00	XXX	9	9	9	9	9
11976	R		Remove contraceptive	3.02	3.02	XXX	2	0	0	0	0
11977	N		Removal/reinsertion	0.00	0.00	XXX	9	9	9	9	9
(11) Repair, simple:											
12001	A		Repair superficial	2.12	2.12	010	2	0	1	0	0
12002	A		Repair superficial	2.49	2.49	010	2	0	1	0	0
12004	A		Repair superficial	3.19	3.19	010	2	0	1	0	0
12005	A		Repair superficial	4.09	4.09	010	2	0	1	0	0
12006	A		Repair superficial	5.16	5.16	010	2	0	1	0	0
12007	A		Repair superficial	5.58	5.58	010	2	0	1	1	0
12011	A		Repair superficial	2.35	2.35	010	2	0	1	0	0
12013	A		Repair superficial	2.85	2.85	010	2	0	1	0	0
12014	A		Repair superficial	3.44	3.44	010	2	0	1	0	0
12015	A		Repair superficial	4.54	4.54	010	2	0	1	0	0
12016	A		Repair superficial	5.86	5.86	010	2	0	1	0	0
12017	A		Repair superficial	7.69	7.69	010	2	0	0	0	0
12018	A		Repair superficial	10.26	10.26	010	2	0	2	1	0
12020	A		Closure of split wound	3.63	3.63	010	2	0	1	0	0
12021	A		Closure of split wound	2.33	2.03	010	2	0	1	0	0

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(12) Repair, intermediate:										
12031	A	Layer closure of wounds	2.69	2.34	010	2	0	1	0	0
12032	A	Layer closure of wounds	3.31	2.80	010	2	0	1	0	0
12034	A	Layer closure of wounds	4.15	4.15	010	2	0	1	0	0
12035	A	Layer closure of wounds	5.10	5.10	010	2	0	1	0	0
12036	A	Layer closure of wounds	6.12	6.12	010	2	0	1	0	0
12037	A	Layer closure of wounds	7.49	7.49	010	2	0	0	1	0
12041	A	Layer closure of wounds	3.01	2.60	010	2	0	1	0	0
12042	A	Layer closure of wounds	3.68	3.12	010	2	0	1	0	0
12044	A	Layer closure of wounds	4.51	4.51	010	2	0	1	0	0
12045	A	Layer closure of wounds	5.49	5.49	010	2	0	1	0	0
12046	A	Layer closure of wounds	6.79	6.79	010	2	0	0	0	0
12047	A	Layer closure of wounds	8.41	8.41	010	2	0	2	1	0
12051	A	Layer closure of wounds	3.27	2.79	010	2	0	1	0	0
12052	A	Layer closure of wounds	4.01	3.30	010	2	0	1	0	0
12053	A	Layer closure of wounds	4.63	4.63	010	2	0	1	0	0
12054	A	Layer closure of wounds	5.79	5.79	010	2	0	1	0	0
12055	A	Layer closure of wounds	7.36	7.36	010	2	0	1	0	0
12056	A	Layer closure of wounds	9.62	9.62	010	2	0	0	0	0
12057	A	Layer closure of wounds	11.06	11.06	010	2	0	2	1	0

(13) Repair, complex:

13100	A	Repair of wound	4.01	3.45	010	2	0	1	0	0
13101	A	Repair of wound	5.68	4.68	010	2	0	1	0	0
13120	A	Repair of wound	4.39	3.74	010	2	0	1	0	0
13121	A	Repair of wound	6.67	5.39	010	2	0	1	0	0
13131	A	Repair of wound	5.48	4.52	010	2	0	1	0	0
13132	A	Repair of wound	10.06	7.85	010	2	0	1	0	0
13150	A	Repair of wound	5.29	5.29	010	2	0	1	0	0
13151	A	Repair of wound	6.60	5.42	010	2	0	1	0	0
13152	A	Repair of wound	11.08	8.60	010	2	0	1	0	0
13160	A	Late closure of wound	13.05	13.05	090	2	0	1	0	0
13300	A	Repair of wound	10.77	10.77	010	2	0	1	0	0

(14) Repair, adjacent tissue transfer or rearrangement:

14000	A	Rearrange skin tissue	8.85	7.20	090	2	0	1	0	0
14001	A	Rearrange skin tissue	12.70	12.70	090	2	0	1	0	0
14020	A	Rearrange skin tissue	10.99	10.99	090	2	0	1	0	0
14021	A	Rearrange skin tissue	15.65	15.65	090	2	0	1	0	0
14040	A	Rearrange skin tissue	14.04	10.77	090	2	0	1	0	0
14041	A	Rearrange skin tissue	18.61	14.80	090	2	0	1	0	0
14060	A	Rearrange skin tissue	15.78	15.78	090	2	0	1	0	0
14061	A	Rearrange skin tissue	21.99	16.92	090	2	0	1	0	0
14300	A	Rearrange skin tissue	22.62	22.62	090	2	0	1	0	0
14350	A	Rearrange skin tissue	15.17	15.17	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(15) Repair, free skin grafts:											
15000	A	Skin graft procedure		4.14	4.14	ZZZ	0	0	1	0	0
15050	A	Skin pinch graft		5.80	5.80	090	2	0	1	0	0
15100	A	Skin split graft		13.09	13.09	090	2	0	1	0	0
15101	A	Skin split graft		3.28	3.28	ZZZ	0	0	1	0	0
15120	A	Skin split graft		15.29	15.29	090	2	0	1	0	0
15121	A	Skin split graft		5.53	5.53	ZZZ	0	0	1	1	0
15200	A	Skin full graft		11.66	11.66	090	2	0	1	0	0
15201	A	Skin full graft		3.10	2.87	ZZZ	0	0	0	0	0
15220	A	Skin full graft		12.29	12.29	090	2	0	1	0	0
15221	A	Skin full graft		2.89	2.62	ZZZ	0	0	1	0	0
15240	A	Skin full graft		14.67	14.67	090	2	0	1	0	0
15241	A	Skin full graft		4.31	3.99	ZZZ	0	0	1	0	0
15260	A	Skin full graft		16.88	16.88	090	2	0	1	0	0
15261	A	Skin full graft		5.11	4.72	ZZZ	0	0	1	0	0
15350	A	Skin homograft		6.27	6.27	090	2	0	1	0	0
15400	A	Skin heterograft		6.36	6.36	090	2	0	1	0	0
(16) Repair, flaps:											
15570	A	Form skin pedicle		14.82	14.82	090	2	0	1	0	0
15572	A	Form skin pedicle		14.64	14.64	090	2	0	1	0	0
15574	A	Form skin pedicle		15.10	15.10	090	2	0	1	0	0
15576	A	Form skin pedicle		11.23	11.23	090	2	0	1	0	0
15580	A	Attach skin pedicle		13.47	13.47	090	2	0	0	0	0
15600	A	Skin graft procedure		4.64	4.25	090	2	0	0	0	0
15610	A	Skin graft procedure		5.36	5.21	090	2	0	0	0	0
15620	A	Skin graft procedure		6.47	6.26	090	2	0	1	0	0
15625	A	Skin graft procedure		4.19	4.19	090	2	0	0	0	0
15630	A	Skin graft procedure		6.94	6.94	090	2	0	1	0	0
15650	A	Transfer skin pedicle		8.34	8.34	090	2	0	0	0	0
15732	A	Muscle-skin graft		33.06	33.06	090	2	0	2	1	0
15734	A	Muscle-skin graft		36.30	36.30	090	2	0	2	1	0
15736	A	Muscle-skin graft		32.09	32.09	090	2	0	1	1	0
15738	A	Muscle-skin graft		30.53	30.53	090	2	0	2	1	0
(17) Repair, other flaps and grafts:											
15740	A	Island pedicle		20.23	20.23	090	2	0	1	0	0
15750	A	Neurovascular pedicle		23.03	23.03	090	2	0	2	0	0
15756	A	Free muscle flap		63.99	63.99	090	2	0	2	2	0
15757	A	Free skin flap		63.99	63.99	090	2	0	2	2	0
15758	A	Free fascial flap		63.87	63.87	090	2	0	2	2	0
15760	A	Composite skin		15.59	15.59	090	2	0	1	0	0
15770	A	Derma-fat-fascia		14.56	14.56	090	2	0	2	1	0
15775	R	Hair transplant		6.69	6.69	000	2	0	0	0	0
15776	R	Hair transplant		9.36	9.36	000	2	0	0	0	0
(18) Repair, other procedures:											
15780	A	Abrasion treatment		8.17	7.43	090	2	0	0	0	0
15781	A	Abrasion treatment		8.26	6.44	090	2	0	1	0	0
15782	A	Abrasion treatment		5.14	4.57	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
15783	A		Abrasion treatment	5.79	4.89	090	2	0	0	0	0
15786	A		Abrasion treatment	2.47	2.18	010	2	0	1	0	0
15787	A		Abrasion, additional	0.54	0.43	ZZZ	0	0	1	0	0
15788	R		Chemical peel	3.39	3.39	090	2	0	1	0	0
15789	R		Chemical peel	5.96	5.96	090	2	0	1	0	0
15792	R		Chemical peel	2.20	2.20	090	2	0	0	0	0
15793	A		Chemical peel	3.91	3.91	090	2	0	0	0	0
15810	A		Salabrasion	8.13	8.13	090	2	0	0	0	0
15811	A		Salabrasion	8.91	8.91	090	2	0	0	0	0
15819	A		Plastic surgery	16.73	16.73	090	2	0	0	0	0
15820	A		Revision of lower eyelid	10.51	10.51	090	2	1	0	0	0
15821	A		Revision of lower eyelid	11.64	11.64	090	2	1	0	0	0
15822	A		Revision of upper eyelid	9.08	9.08	090	2	1	1	0	0
15823	A		Revision of upper eyelid	14.18	14.18	090	2	1	1	0	0
15824	R		Removal of forehead	0.00	0.00	XXX	2	0	0	0	0
15825	R		Removal of neck	0.00	0.00	XXX	2	0	0	0	0
15826	R		Removal of brow	0.00	0.00	XXX	2	0	0	0	0
15828	R		Removal of face	0.00	0.00	XXX	2	0	0	0	0
15829	R		Removal of skin	0.00	0.00	XXX	2	0	0	0	0
15831	A		Excise excessive skin	21.87	21.87	090	2	0	2	1	0
15832	A		Excise excessive skin	19.26	19.26	090	2	0	2	1	0
15833	A		Excise excessive skin	16.28	16.28	090	2	0	0	0	0
15834	A		Excise excessive skin	17.46	17.46	090	2	0	0	0	0
15835	A		Excise excessive skin	18.03	18.03	090	2	0	0	0	0
15836	A		Excise excessive skin	14.69	14.69	090	2	0	0	0	0
15837	A		Excise excessive skin	13.89	13.89	090	2	0	0	0	0
15838	A		Excise excessive skin	12.56	12.56	090	2	0	0	0	0
15839	A		Excise excessive skin	11.13	11.13	090	2	0	0	0	0
15840	A		Graft for face	27.39	27.39	090	2	0	1	0	0
15841	A		Graft for face	38.93	38.93	090	2	0	2	1	0
15842	A		Graft for face	63.95	63.95	090	2	0	2	1	0
15845	A		Skin and muscle	26.17	26.17	090	2	0	2	0	0
15850	B		Removal of sutures	0.00	0.00	XXX	9	9	9	9	9
15851	A		Removal of sutures	1.09	0.94	000	2	0	1	0	0
15852	A		Dressing change	1.24	1.03	000	2	0	1	0	0
15860	A		Test for blood	3.21	3.21	000	2	0	0	0	0
15876	R		Suction assisted	0.00	0.00	XXX	2	0	0	0	0
15877	R		Suction assisted	0.00	0.00	XXX	2	0	0	0	0
15878	R		Suction assisted	0.00	0.00	XXX	2	0	0	0	0
15879	R		Suction assisted	0.00	0.00	XXX	2	0	0	0	0

(19) Repair, pressure ulcers:

15920	A		Removal of tail	10.41	10.41	090	2	0	0	0	0
15922	A		Removal of tail	15.42	15.42	090	2	0	2	1	0
15931	A		Remove sacrum ulcer	11.52	11.52	090	2	0	1	0	0
15933	A		Remove sacrum ulcer	17.32	17.32	090	2	0	0	0	0
15934	A		Remove sacrum ulcer	19.55	19.55	090	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
15935	A	Remove sacrum ulcer		25.34	25.34	090	2	0	2	1	0
15936	A	Remove sacrum ulcer		22.29	22.29	090	2	0	1	1	0
15937	A	Remove sacrum ulcer		27.38	27.38	090	2	0	2	1	0
15940	A	Remove ischial ulcer		12.31	12.31	090	2	0	1	0	0
15941	A	Remove ischial ulcer		17.95	17.95	090	2	0	0	0	0
15944	A	Remove ischial ulcer		20.35	20.35	090	2	0	0	0	0
15945	A	Remove ischial ulcer		23.43	23.43	090	2	0	0	0	0
15946	A	Remove ischial ulcer		37.41	37.41	090	2	0	2	1	0
15950	A	Remove thigh ulcer		10.07	10.07	090	2	0	1	0	0
15951	A	Remove thigh ulcer		17.99	17.99	090	2	0	0	1	0
15952	A	Remove thigh ulcer		17.98	17.98	090	2	0	2	1	0
15953	A	Remove thigh ulcer		21.27	21.27	090	2	0	1	1	0
15956	A	Remove thigh ulcer		32.45	32.45	090	2	0	2	1	0
15958	A	Remove thigh ulcer		32.58	32.58	090	2	0	2	1	0
15999	C	Remove ulcer		0.00	0.00	YYY	2	0	0	1	1

(20) Repair, burns, local treatment:

16000	A	Initial treatment		1.16	0.99	000	2	0	1	0	0
16010	A	Treatment of burn		1.12	0.96	000	2	0	1	0	0
16015	A	Treatment of burn		4.31	4.31	000	2	0	1	0	0
16020	A	Treatment of burn		1.07	0.91	000	2	0	1	0	0
16025	A	Treatment of burn		2.14	1.92	000	2	0	1	0	0
16030	A	Treatment of burn		2.43	2.43	000	2	0	1	0	0
16035	A	Incision of burn		6.38	6.38	090	2	0	1	0	0
16040	A	Burn wound excision		2.72	2.30	000	2	0	0	0	0
16041	A	Burn wound excision		5.61	5.61	000	2	0	0	0	0
16042	A	Burn wound excision		4.93	4.93	000	2	0	0	0	0

(21) Destruction, benign or premalignant lesions:

17000	A	Destroy lesions		0.97	0.76	010	2	0	1	0	0
17001	D	Destroy lesions		0.37	0.28	ZZZ	0	0	1	0	0
17002	D	Destroy lesions		0.27	0.23	ZZZ	0	0	1	0	0
17003	A	Destroy 2 to 14 lesions		0.27	0.20	ZZZ	0	0	1	0	0
17004	A	Destroy 15 or more		4.82	3.73	010	0	0	1	0	0
17010	D	Destroy lesions		1.45	1.22	010	2	0	1	0	0
17100	D	Destroy lesions		0.88	0.70	010	2	0	1	0	0
17101	D	Destroy lesions		0.23	0.17	ZZZ	0	0	1	0	0
17102	D	Destroy lesions		0.18	0.14	ZZZ	0	0	1	0	0
17104	D	Destroy lesions		1.93	1.89	010	2	0	1	0	0
17105	D	Destroy lesions		1.03	0.88	010	2	0	1	0	0
17106	A	Destroy lesions		6.13	5.20	090	2	0	1	0	0
17107	A	Destroy lesions		12.10	10.32	090	2	0	1	0	0
17108	A	Destroy lesions		21.37	21.37	090	2	0	0	0	0
17110	A	Destroy lesions		0.99	0.80	010	2	0	1	0	0
17111	A	Destroy lesions		1.44	1.15	010	2	0	1	0	0
17200	D	Electrocautery		1.00	0.80	010	2	0	1	0	0
17201	D	Electrocautery		0.50	0.42	ZZZ	0	0	1	0	0
17250	A	Chemical cauterization		0.80	0.64	000	2	0	1	0	0

(22) Destruction, malignant lesions, any method:

17260	A	Destroy lesions		1.97	1.43	010	2	0	1	0	0
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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
17261	A		Destroy lesions	2.47	1.80	010	2	0	1	0	0
17262	A		Destroy lesions	3.28	2.40	010	2	0	1	0	0
17263	A		Destroy lesions	3.91	2.83	010	2	0	1	0	0
17264	A		Destroy lesions	4.41	3.16	010	2	0	1	0	0
17266	A		Destroy lesions	5.40	3.90	010	2	0	1	0	0
17270	A		Destroy lesions	2.56	1.91	010	2	0	1	0	0
17271	A		Destroy lesions	3.13	2.29	010	2	0	1	0	0
17272	A		Destroy lesions	3.84	2.77	010	2	0	1	0	0
17273	A		Destroy lesions	4.49	3.24	010	2	0	1	0	0
17274	A		Destroy lesions	5.63	4.08	010	2	0	1	0	0
17276	A		Destroy lesions	6.48	4.83	010	2	0	1	0	0
17280	A		Destroy lesions	2.74	1.94	010	2	0	1	0	0
17281	A		Destroy lesions	3.68	2.67	010	2	0	1	0	0
17282	A		Destroy lesions	4.46	3.22	010	2	0	1	0	0
17283	A		Destroy lesions	5.46	4.00	010	2	0	1	0	0
17284	A		Destroy lesions	6.49	4.79	010	2	0	1	0	0
17286	A		Destroy lesions	8.53	6.45	010	2	0	1	0	0

(23) Destruction, Mohs' micrographic surgery:

17304	A		1st stage chemosurgery	10.95	9.01	000	0	0	1	0	0
17305	A		2nd stage chemosurgery	4.86	3.77	000	0	0	1	0	0
17306	A		3rd stage chemosurgery	4.00	3.32	000	0	0	1	0	0
17307	A		Follow-up skin, 1 to 5	4.07	3.36	000	0	0	1	0	0
17310	A		Extensive skin, over 5	0.99	0.93	000	0	0	1	0	0

(24) Destruction, other procedures:

17340	A		Cryotherapy for acne	0.97	0.84	010	2	0	1	0	0
17360	A		Skin peel therapy	1.57	1.44	010	2	0	1	0	0
17380	R		Hair removal	0.00	0.00	XXX	2	0	0	0	0
17999	C		Skin tissue procedure	0.00	0.00	YYY	2	0	0	1	1

(25) Breast, incision:

19000	A		Drainage of breast cyst	1.17	0.98	000	2	1	1	0	0
19001	A		Drain additional cyst	0.64	0.52	ZZZ	0	1	1	0	0
19020	A		Incision of breast	4.75	4.75	090	2	1	1	0	0
19030	A		Injection for breast	1.88	1.88	000	2	1	1	0	0

(26) Breast, excision:

19100	A		Biopsy of breast	1.84	1.53	000	2	1	1	0	0
19101	A		Biopsy of breast	5.40	5.40	010	2	1	1	0	0
19110	A		Nipple exploration	6.56	6.56	090	2	1	1	0	0
19112	A		Excise breast duct	5.79	5.79	090	2	1	0	0	0
19120	A		Removal of breast	8.18	8.18	090	2	1	1	0	0
19125	A		Excision, breast lesion	8.63	8.63	090	2	1	1	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
19126	A		Excision, additional	4.23	4.23	ZZZ	0	0	1	1	0
19140	A		Removal of breast	9.31	9.31	090	2	1	1	0	0
19160	A		Removal of breast	9.91	9.91	090	2	1	0	0	0
19162	A		Removal of breast	22.42	22.42	090	2	1	2	1	0
19180	A		Removal of breast	14.05	14.05	090	2	1	2	1	0
19182	A		Removal of breast	13.58	13.58	090	2	1	2	1	0
19200	A		Removal of breast	25.12	25.12	090	2	1	2	1	0
19220	A		Removal of breast	25.95	25.95	090	2	1	2	1	0
19240	A		Removal of breast	24.74	24.74	090	2	1	2	1	0
19260	A		Removal of chest tumor	19.47	19.47	090	2	0	2	1	0
19271	A		Revision of chest tumor	32.16	32.16	090	2	0	2	1	0
19272	A		Extensive chest	33.15	33.15	090	2	0	2	1	0

(27) Breast, introduction:

19290	A		Place needle wire	1.62	1.62	000	2	1	1	2	0
19291	A		Place needle wire	0.84	0.84	ZZZ	0	0	0	2	0

(28) Breast, repair and/or reconstruction:

19316	A		Suspension of breast	22.40	22.40	090	2	1	2	1	0
19318	A		Reduce large breast	29.66	29.66	090	2	1	2	1	0
19324	A		Enlarge breast	8.86	8.86	090	2	1	0	0	0
19325	A		Enlarge breast	13.96	13.96	090	2	1	0	0	0
19328	A		Removal of breast	9.19	9.19	090	2	1	1	0	0
19330	A		Removal of implant	11.05	11.05	090	2	1	1	0	0
19340	A		Immediate breast implant	13.60	13.60	ZZZ	0	1	1	1	0
19342	A		Delayed breast implant	21.73	21.73	090	2	1	0	1	0
19350	A		Breast reconstruction	15.70	15.70	090	2	1	1	0	0
19355	A		Correct inverted nipple	12.19	12.19	090	2	1	0	0	0
19357	A		Breast reconstruction	29.53	29.53	090	2	1	2	1	0
19361	A		Breast reconstruction	39.07	39.07	090	2	1	2	1	0
19364	A		Breast reconstruction	44.45	44.45	090	2	1	2	1	0
19366	A		Breast reconstruction	36.91	36.91	090	2	1	2	1	0
19367	A		Breast reconstruction	44.94	44.94	090	2	1	2	1	0
19368	A		Breast reconstruction	51.02	51.02	090	2	1	2	1	0
19369	A		Breast reconstruction	48.65	48.65	090	2	1	2	1	0
19370	A		Surgery of breast	13.92	13.92	090	2	1	1	0	0
19371	A		Removal of breast	16.98	16.98	090	2	1	1	0	0
19380	A		Breast reconstruction	17.00	17.00	090	2	1	1	0	0
19396	A		Design custom breast	3.66	3.66	000	2	1	0	0	0

(29) Breast, other procedures:

19499	C		Breast surgery	0.00	0.00	YYY	2	1	0	1	1
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B. Procedure code numbers 20000 to 29909 relate to musculoskeletal procedures.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(1) General, incision:											
20000	A	Incision of abscess		2.79	2.38	010	2	0	1	0	0
20005	A	Incision of deep abscess		5.03	5.03	010	2	0	1	0	0
(2) General, wound exploration, trauma:											
20100	A	Explore wound, neck		14.59	14.59	010	2	1	2	0	0
20101	A	Explore wound, chest		4.64	4.64	010	2	0	2	0	0
20102	A	Explore wound, abdomen		5.68	5.68	010	2	0	2	0	0
20103	A	Explore wound, extremity		7.64	7.64	010	2	0	0	0	0
(3) General, excision:											
20150	A	Excise epiphyseal bar		25.53	25.53	090	2	1	2	1	0
20200	A	Muscle biopsy		2.51	2.51	000	2	0	1	0	0
20205	A	Deep muscle biopsy		4.13	4.13	000	2	0	1	0	0
20206	A	Needle biopsy, muscle		1.90	1.90	000	2	0	1	0	0
20220	A	Bone biopsy, trocar		2.47	2.47	000	2	0	1	0	0
20225	A	Bone biopsy, trocar		4.16	3.84	000	2	0	1	0	0
20240	A	Bone biopsy, excisional		4.85	4.85	010	2	0	1	0	0
20245	A	Bone biopsy, excisional		7.29	7.29	010	2	0	1	0	0
20250	A	Open bone biopsy		9.88	9.88	010	2	0	1	0	0
20251	A	Open bone biopsy		11.20	11.20	010	2	0	2	0	0
(4) General, introduction or removal:											
20500	A	Injection of sinus tract		1.49	1.31	010	2	0	1	0	0
20501	A	Injection of sinus tract		0.99	0.99	000	2	0	1	0	0
20520	A	Removal of foreign body		2.41	2.07	010	2	0	1	0	0
20525	A	Removal of foreign body		5.51	5.51	010	2	0	1	0	0
20550	A	Inject tendon/ligament		1.17	0.99	000	2	0	1	0	0
20600	A	Drain or inject joint		1.08	0.85	000	2	1	1	0	0
20605	A	Drain or inject joint		1.08	0.86	000	2	1	1	0	0
20610	A	Drain or inject joint		1.18	0.96	000	2	1	1	0	0
20615	A	Treatment of bone cyst		2.58	2.34	010	2	0	1	0	0
20650	A	Insert and removal		3.14	3.14	010	2	0	1	1	0
20660	A	Apply, remove		3.90	3.90	000	0	0	1	0	0
20661	A	Application of halo		8.49	8.49	090	2	0	1	0	0
20662	A	Application of halo		12.40	12.40	090	2	0	0	0	0
20663	A	Application of halo		9.83	9.83	090	2	0	0	0	0
20664	A	Halo brace application		11.37	11.37	090	2	0	1	0	0
20665	A	Removal of fixation		1.71	1.71	010	2	0	0	0	0
20670	A	Removal of implant		2.36	2.00	010	2	0	1	0	0
20680	A	Removal of implant		6.54	6.54	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
20690	A		Apply bone fixation	7.05	7.05	ZZZ	0	0	1	0	0
20692	A		Apply bone fixation	11.63	11.63	ZZZ	0	0	2	1	0
20693	A		Adjust bone fixation	7.96	7.96	090	2	0	1	0	0
20694	A		Remove bone fixation	6.51	6.51	090	2	0	1	0	0

(5) General, replantation:

20802	A		Replantation, arm	77.19	77.19	090	2	1	2	1	0
20805	A		Replantation, forearm	94.16	94.16	090	2	1	2	1	0
20808	A		Replantation, hand	116.60	116.60	090	2	1	2	1	0
20816	A		Replantation, digit	57.98	57.98	090	2	0	2	1	0
20822	A		Replantation, digit	47.94	47.94	090	2	0	2	1	0
20824	A		Replantation, thumb	57.98	57.98	090	2	1	2	1	0
20827	A		Replantation, thumb	49.38	49.38	090	2	1	2	1	0
20838	A		Replantation, foot	77.43	77.43	090	2	1	2	1	0

(6) General, grafts:

20900	A		Removal of bone	8.02	8.02	090	2	0	2	1	0
20902	A		Removal of bone	12.08	12.08	090	2	0	2	1	0
20910	A		Remove cartilage	5.66	5.66	090	2	0	0	0	0
20912	A		Remove cartilage	10.58	10.58	090	2	0	0	0	0
20920	A		Removal of fascia	8.89	8.89	090	2	0	1	1	0
20922	A		Removal of fascia	10.63	10.63	090	2	0	2	1	0
20924	A		Removal of tendon	11.62	11.62	090	2	0	2	1	0
20926	A		Removal of tissue	7.74	7.74	090	2	0	1	0	0
20930	B		Spinal bone allograft	0.00	0.00	XXX	9	9	9	9	9
20931	A		Spinal bone allograft	3.47	3.47	ZZZ	0	1	1	1	0
20936	B		Spinal bone autograft	0.00	0.00	XXX	9	9	9	9	9
20937	A		Spinal bone autograft	5.34	5.34	ZZZ	0	1	2	1	0
20938	A		Spinal bone autograft	5.78	5.78	ZZZ	0	1	2	1	0

(7) General, other procedures:

20950	A		Record fluid pressure	2.29	2.29	000	2	0	0	0	0
20955	A		Fibula bone graft	73.45	73.45	090	2	0	2	1	0
20956	A		Iliac bone graft	64.53	64.53	090	2	0	2	1	0
20957	A		Metatarsal bone graft	66.83	66.83	090	2	0	2	1	0
20962	A		Other bone graft	64.53	64.53	090	2	0	2	1	0
20969	A		Bone/skin graft	82.26	82.26	090	2	0	2	1	0
20970	A		Bone/skin graft	80.61	80.61	090	2	0	2	1	0
20972	A		Bone/skin graft	80.87	80.87	090	2	0	2	0	0
20973	A		Bone/skin graft	86.16	86.16	090	2	0	2	1	0
20974	A		Electrical, bone healing	4.16	2.51	000	0	0	1	0	0
20975	A		Electrical, bone healing	5.43	5.43	ZZZ	0	0	2	1	0
20999	C		Musculoskeletal	0.00	0.00	YYY	2	0	0	1	1

(8) Head, incision:

21010	A		Incision of jaw	19.61	19.61	090	2	1	0	0	0
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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(9) Head, excision:											
21015	A		Resection of face	11.05	11.05	090	2	0	1	0	0
21025	A		Excision of bone	13.34	11.34	090	2	0	1	0	0
21026	A		Excision of face bone	7.59	6.07	090	2	0	1	0	0
21029	A		Contour of face bone	15.62	11.52	090	2	0	0	0	0
21030	A		Removal of face tumor	9.26	7.64	090	2	0	1	0	0
21031	A		Remove exostosis	6.67	4.90	090	2	0	1	0	0
21032	A		Remove exostosis	6.88	5.01	090	2	0	1	0	0
21034	A		Removal of face tumor	21.91	21.91	090	2	0	2	1	0
21040	A		Removal of jaw tumor	4.71	3.38	090	2	0	1	0	0
21041	A		Removal of jaw tumor	11.93	9.15	090	2	0	1	0	0
21044	A		Removal of jaw tumor	20.60	20.60	090	2	0	2	1	0
21045	A		Extensive jaw resection	28.91	28.91	090	2	0	2	1	0
21050	A		Removal of jaw	21.82	21.82	090	2	1	0	0	0
21060	A		Remove jaw joint	20.73	20.73	090	2	1	2	1	0
21070	A		Remove coronoidectomy	14.47	14.47	090	2	1	0	0	0

(10) Head, introduction or removal:

21076	A		Prepare face/oral	27.19	20.06	010	2	0	0	0	0
21077	A		Prepare face/oral	68.37	50.44	090	2	1	0	0	0
21079	A		Prepare face/oral	48.50	35.01	090	2	0	1	0	0
21080	A		Prepare face/oral	54.49	39.33	090	2	0	1	0	0
21081	A		Prepare face/oral	49.66	35.85	090	2	0	0	0	0
21082	A		Prepare face/oral	42.28	31.19	090	2	0	0	0	0
21083	A		Prepare face/oral	41.90	30.24	090	2	0	0	0	0
21084	A		Prepare face/oral	48.87	35.28	090	2	0	0	0	0
21085	A		Prepare face/oral	18.23	13.45	010	2	0	0	0	0
21086	A		Prepare face/oral	54.10	39.05	090	2	1	0	0	0
21087	A		Prepare face/oral	50.48	37.25	090	2	0	0	0	0
21088	C		Prepare face/oral	0.00	0.00	090	0	0	0	0	0
21089	C		Prepare face/oral	0.00	0.00	090	0	0	1	0	0
21100	A		Maxillofacial fixation	4.92	4.92	090	2	0	0	0	0
21110	A		Interdental fixation	10.33	7.65	090	2	0	1	0	0
21116	A		Injection, jaw joint	1.47	1.47	000	2	0	1	0	0

(11) Head, repair, revision, and/or reconstruction:

21120	A		Reconstruction	8.17	8.17	090	2	0	1	1	0
21121	A		Reconstruction	12.76	12.76	090	2	0	2	0	0
21122	A		Reconstruction	14.16	14.16	090	2	0	2	0	0
21123	A		Reconstruction	18.52	18.52	090	2	0	2	1	0
21125	A		Augmentation	14.50	14.50	090	2	0	2	0	0
21127	A		Augmentation	18.24	18.24	090	2	0	2	1	0
21137	A		Reduction of forehead	16.24	16.24	090	2	0	2	0	0
21138	A		Reduction of forehead	20.20	20.20	090	2	0	2	1	0
21139	A		Reduction of forehead	24.23	24.23	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
21141	A		Reconstruct midface	31.21	31.21	090	2	0	2	1	0
21142	A		Reconstruct midface	32.37	32.37	090	2	0	2	1	0
21143	A		Reconstruct midface	33.65	33.65	090	2	0	2	1	0
21145	A		Reconstruct midface	32.88	32.88	090	2	0	2	0	0
21146	A		Reconstruct midface	34.10	34.10	090	2	0	2	1	0
21147	A		Reconstruct midface	35.64	35.64	090	2	0	2	0	0
21150	A		Reconstruct midface	41.94	41.94	090	2	0	2	0	0
21151	A		Reconstruct midface	47.00	47.00	090	2	0	2	0	0
21154	A		Reconstruct midface	50.53	50.53	090	2	0	2	1	0
21155	A		Reconstruct midface	57.15	57.15	090	2	0	2	0	0
21159	A		Reconstruct midface	70.44	70.44	090	2	0	2	1	0
21160	A		Reconstruct midface	77.16	77.16	090	2	0	2	0	0
21172	A		Reconstruct orbital rim	46.15	46.15	090	2	0	2	1	0
21175	A		Reconstruct orbital rim	55.22	55.22	090	2	0	2	0	0
21179	A		Reconstruct forehead	36.93	36.93	090	2	0	2	0	0
21180	A		Reconstruct forehead	41.90	41.90	090	2	0	2	1	0
21181	A		Contour cranial bones	16.31	16.31	090	2	0	0	0	0
21182	A		Reconstruct cranial bone	53.58	53.58	090	2	0	2	1	0
21183	A		Reconstruct cranial bone	58.70	58.70	090	2	0	2	1	0
21184	A		Reconstruct cranial bone	63.63	63.63	090	2	0	2	0	0
21188	A		Reconstruct midface	37.12	37.12	090	2	0	2	0	0
21193	A		Reconstruct lower jaw	28.25	28.25	090	2	2	2	1	0
21194	A		Reconstruct lower jaw	32.71	32.71	090	2	2	2	0	0
21195	A		Reconstruct lower jaw	28.36	28.36	090	2	2	2	0	0
21196	A		Reconstruct lower jaw	31.18	31.18	090	2	2	2	1	0
21198	A		Reconstruct lower jaw	28.13	28.13	090	2	0	2	1	0
21206	A		Reconstruct upper jaw	23.25	23.25	090	2	0	2	1	0
21208	A		Augmentation of face	20.74	20.74	090	2	0	0	0	0
21209	A		Reduction of face	10.95	10.95	090	2	0	2	0	0
21210	A		Face bone graft	20.87	15.43	090	2	0	1	0	0
21215	A		Lower jaw bone graft	22.01	16.28	090	2	0	1	1	0
21230	A		Rib cartilage graft	20.73	20.73	090	2	0	0	0	0
21235	A		Ear cartilage graft	13.84	13.84	090	2	0	1	0	0
21240	A		Reconstruction	28.84	28.84	090	2	1	2	1	0
21242	A		Reconstruction	26.76	26.76	090	2	1	2	1	0
21243	A		Reconstruction	33.71	33.71	090	2	1	2	1	0
21244	A		Reconstruction	24.44	24.44	090	2	0	2	1	0
21245	A		Reconstruction	22.57	22.57	090	2	0	2	0	0
21246	A		Reconstruction	20.42	20.42	090	2	0	2	0	0
21247	A		Reconstruct lower jaw	45.84	45.84	090	2	0	2	1	0
21248	A		Reconstruction	23.59	17.49	090	2	0	1	0	0
21249	A		Reconstruction	36.33	27.03	090	2	0	0	0	0
21255	A		Reconstruct lower jaw	33.87	33.87	090	2	0	2	1	0
21256	A		Reconstruction	32.80	32.80	090	2	0	2	1	0
21260	A		Revise eye socket	33.46	33.46	090	2	0	2	1	0
21261	A		Revise eye socket	46.67	46.67	090	2	0	2	1	0
21263	A		Revise eye socket	57.57	57.57	090	2	0	2	1	0
21267	A		Revise eye socket	32.44	32.44	090	2	0	2	1	0
21268	A		Revise eye socket	38.78	38.78	090	2	0	2	1	0
21270	A		Augmentation, chin	19.34	19.34	090	2	0	2	1	0
21275	A		Revise orbitofacial	19.54	19.54	090	2	0	2	1	0
21280	A		Revision of eye	12.21	12.21	090	2	1	0	0	0
21282	A		Revision of eye	7.31	7.31	090	2	1	1	0	0
21295	A		Revision of jaw	2.39	2.39	090	2	0	0	0	0
21296	A		Revision of jaw	7.48	7.48	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(12) Head, other procedures:											
21299	C	Cranio/maxillofacial		0.00	0.00	YYY	2	0	0	1	1
(13) Head, fracture and/or dislocation:											
21300	A	Treatment of skull		1.60	1.48	000	2	0	0	0	0
21310	A	Treatment of nose		1.30	1.19	000	2	0	1	0	0
21315	A	Treatment of nose		3.23	3.09	010	2	0	1	0	0
21320	A	Treatment of nose		4.12	3.84	010	2	0	1	0	0
21325	A	Repair of nose		7.66	7.66	090	2	0	0	0	0
21330	A	Repair of nose		11.08	11.08	090	2	0	0	0	0
21335	A	Repair of nose		17.82	17.82	090	2	0	1	0	0
21336	A	Repair nasal septal		9.43	9.43	090	2	0	0	0	0
21337	A	Repair nasal septal		5.38	5.38	090	2	0	0	0	0
21338	A	Repair nasoethmoid		11.07	11.07	090	2	0	0	0	0
21339	A	Repair nasoethmoid		14.58	14.58	090	2	0	2	1	0
21340	A	Repair of nose		18.96	18.96	090	2	0	0	0	0
21343	A	Repair of sinus		21.21	21.21	090	2	0	2	1	0
21344	A	Repair of sinus		27.36	27.36	090	2	0	2	2	0
21345	A	Repair of nose		15.49	15.49	090	2	0	0	0	0
21346	A	Repair of nose		19.29	19.29	090	2	0	1	1	0
21347	A	Repair of nose		22.28	22.28	090	2	0	2	1	0
21348	A	Repair of nose		27.33	27.33	090	2	0	2	2	0
21355	A	Repair cheek bone		5.02	5.02	010	2	0	0	0	0
21356	A	Repair cheek bone		8.67	8.67	010	2	0	0	0	0
21360	A	Repair cheek bone		13.22	13.22	090	2	0	2	0	0
21365	A	Repair cheek bone		26.40	26.40	090	2	0	2	1	0
21366	A	Repair cheek bone		29.10	29.10	090	2	0	2	2	0
21385	A	Repair eye socket		18.20	18.20	090	2	0	2	1	0
21386	A	Repair eye socket		17.77	17.77	090	2	0	2	0	0
21387	A	Repair eye socket		16.53	16.53	090	2	0	2	0	0
21390	A	Repair eye socket		20.71	20.71	090	2	0	2	1	0
21395	A	Repair eye socket		21.57	21.57	090	2	0	2	1	0
21400	A	Treat eye socket		2.98	2.85	090	2	0	0	0	0
21401	A	Repair eye socket		5.63	5.63	090	2	0	2	0	0
21406	A	Repair eye socket		11.80	11.80	090	2	0	2	1	0
21407	A	Repair eye socket		15.10	15.10	090	2	0	2	1	0
21408	A	Repair eye socket		19.99	19.99	090	2	0	2	2	0
21421	A	Treat mouth roof		10.94	10.47	090	2	0	0	0	0
21422	A	Repair mouth roof		17.05	17.05	090	2	0	2	1	0
21423	A	Repair mouth roof		19.56	19.56	090	2	0	2	2	0
21431	A	Treat craniofacial		12.61	12.61	090	2	0	2	0	0
21432	A	Repair craniofacial		14.81	14.81	090	2	0	2	0	0
21433	A	Repair craniofacial		41.52	41.52	090	2	0	2	1	0
21435	A	Repair craniofacial		29.50	29.50	090	2	0	2	0	0
21436	A	Repair craniofacial		40.75	40.75	090	2	0	2	2	0
21440	A	Repair dental ridge		5.57	5.47	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
21445	A	Repair dental ridge		11.09	10.91	090	2	0	2	0	0
21450	A	Treat lower jaw		5.58	5.58	090	2	0	0	0	0
21451	A	Treat lower jaw		10.46	10.01	090	2	0	0	0	0
21452	A	Treat lower jaw		3.23	3.23	090	2	0	0	0	0
21453	A	Treat lower jaw		11.75	11.22	090	2	0	0	0	0
21454	A	Treat lower jaw		13.52	13.52	090	2	0	0	1	0
21461	A	Repair lower jaw		16.66	16.66	090	2	0	2	1	0
21462	A	Repair lower jaw		20.03	20.03	090	2	0	2	1	0
21465	A	Repair lower jaw		19.51	19.51	090	2	0	2	1	0
21470	A	Repair lower jaw		31.18	31.18	090	2	0	2	1	0
21480	A	Reset dislocation		1.36	1.25	000	2	1	1	0	0
21485	A	Reset dislocation		5.85	4.79	090	2	1	0	0	0
21490	A	Repair dislocation		17.15	17.15	090	2	1	2	1	0
21493	A	Treat hyoid bone		2.69	2.58	090	2	0	1	1	0
21494	A	Repair hyoid bone		13.31	13.31	090	2	0	2	1	0
21495	A	Repair hyoid bone		10.10	10.10	090	2	0	2	0	0
21497	A	Interdental wiring		7.55	7.55	090	2	0	0	0	0

(14) Head, other procedures:

21499	C	Head surgery procedure		0.00	0.00	YYY	2	0	0	1	1
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(15) Neck and thorax, incision:

21501	A	Drain neck/chest		5.36	5.36	090	2	0	1	0	0
21502	A	Drain chest lesion		10.95	10.95	090	2	0	2	0	0
21510	A	Drainage of bone		9.18	9.18	090	2	0	0	0	0

(16) Neck and thorax, excision

21550	A	Biopsy of neck		2.76	2.35	010	2	0	1	0	0
21555	A	Remove lesion, neck		5.63	5.63	090	2	0	1	0	0
21556	A	Remove lesion, neck		9.08	9.08	090	2	0	1	0	0
21557	A	Remove tumor, neck		17.05	17.05	090	2	0	2	1	0
21600	A	Partial removal		11.09	11.09	090	2	0	2	1	0
21610	A	Partial removal		18.68	18.68	090	2	0	2	0	0
21615	A	Removal of rib		19.83	19.83	090	2	1	2	1	0
21616	A	Removal of rib		18.77	18.77	090	2	1	2	0	0
21620	A	Partial removal		13.46	13.46	090	2	0	2	1	0
21627	A	Sternal debridement		11.54	11.54	090	2	0	2	0	0
21630	A	Extensive sternum		29.55	29.55	090	2	0	2	1	0
21632	A	Extensive sternum		28.84	28.84	090	2	0	2	1	0

(17) Neck and thorax, repair, revision, and/or reconstruction:

21700	A	Revision of neck		9.91	9.91	090	2	0	2	0	0
21705	A	Revision of neck		13.93	13.93	090	2	0	2	0	0
21720	A	Revision of neck		9.15	9.15	090	2	0	2	0	0
21725	A	Revision of neck		11.43	11.43	090	2	0	2	1	0
21740	A	Reconstruction		24.57	24.57	090	2	0	2	1	0
21750	A	Repair of sternum		17.65	17.65	090	2	0	2	1	0

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(18) Neck and thorax, fracture and/or dislocation:										
21800	A	Treat rib fracture	1.65	1.65	090	2	0	1	0	0
21805	A	Treat rib fracture	3.89	3.89	090	2	0	0	0	0
21810	A	Treat rib fracture	13.64	13.64	090	2	0	2	0	0
21820	A	Treat sternum fracture	2.57	2.57	090	2	0	1	0	0
21825	A	Repair sternum fracture	14.01	14.01	090	2	0	2	1	0
(19) Neck and thorax, other procedures:										
21899	C	Neck/chest surgery	0.00	0.00	YYY	2	0	0	1	1
(20) Back and flank, excision:										
21920	A	Biopsy soft tissue	2.69	2.31	010	2	0	1	0	0
21925	A	Biopsy soft tissue	6.14	6.14	090	2	0	1	0	0
21930	A	Remove lesion, back	7.44	7.44	090	2	0	1	0	0
21935	A	Remove tumor, back	23.39	23.39	090	2	0	1	1	0
(21) Spine, excision:										
22100	A	Remove part of vertebra	16.81	16.81	090	2	0	2	1	0
22101	A	Remove part of thoracic	17.40	17.40	090	2	0	2	1	0
22102	A	Remove part of lumbar	13.62	13.62	090	2	0	2	1	0
22103	A	Remove extra segment	4.48	4.48	ZZZ	0	0	2	1	0
21100	A	Remove part of lesion	21.86	21.86	090	2	0	2	1	0
22112	A	Remove part of thoracic	22.09	22.09	090	2	0	2	1	0
22114	A	Remove part of lumbar	19.28	19.28	090	2	0	2	1	0
22116	A	Remove extra segment	4.44	4.44	ZZZ	0	0	2	1	0
(22) Spine, osteotomy:										
22210	A	Revision of neck	36.32	36.32	090	2	0	2	1	0
22212	A	Revision of thoracic	35.89	35.89	090	2	0	0	0	0
22214	A	Revision of lumbar	33.73	33.73	090	2	0	2	1	0
22216	A	Revise extra segment	10.87	10.87	ZZZ	0	1	2	1	0
22220	A	Revision of neck	36.92	36.92	090	2	0	2	1	0
22222	A	Revision of thoracic	33.55	33.55	090	2	0	0	0	0
22224	A	Revision of lumbar	35.18	35.18	090	2	0	2	1	0
22226	A	Revise extra segment	10.87	10.87	ZZZ	0	1	2	1	0
(23) Spine, fracture and/or dislocation:										
22305	A	Treat spine process	4.25	4.25	090	2	0	1	0	0
22310	A	Treat spine fracture	5.18	5.18	090	2	0	1	0	0
22315	A	Treat spine fracture	13.82	13.82	090	2	0	1	0	0
22325	A	Repair of spine	25.39	25.39	090	2	0	2	1	0
22326	A	Repair cervical	34.68	34.68	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
22327	A	Repair thoracic		34.13	34.13	090	2	0	2	1	0
22328	A	Repair each additional		8.83	8.83	ZZZ	0	0	2	1	0
(24) Spine, manipulation:											
22505	A	Manipulation of spine		3.06	3.06	010	2	0	1	0	0
(25) Spine, anterior or anterolateral approach technique:											
22548	A	Neck spine fusion		47.51	47.51	090	2	0	2	2	0
22554	A	Neck spine fusion		37.98	37.98	090	2	0	2	2	0
22556	A	Thorax spine fusion		44.21	44.21	090	2	0	2	2	0
22558	A	Lumbar spine fusion		41.57	41.57	090	2	0	2	2	0
22585	A	Additional spine		10.75	10.75	ZZZ	0	0	2	2	0
(26) Spine, posterior, posterolateral or lateral transverse process technique:											
22590	A	Spine and skull		41.35	41.35	090	2	0	2	2	0
22595	A	Neck spine fusion		40.34	40.34	090	2	0	2	2	0
22600	A	Neck spine fusion		33.63	33.63	090	2	0	2	2	0
22610	A	Thorax spine fusion		33.08	33.08	090	2	0	2	2	0
22612	A	Lumbar spine fusion		40.80	40.80	090	2	0	2	2	0
22614	A	Spine fusion		11.81	11.81	ZZZ	0	0	2	2	0
22630	A	Lumbar spine fusion		38.47	38.47	090	2	0	2	2	0
22632	A	Spine fusion		10.02	10.02	ZZZ	0	0	2	2	0
(27) Spine, deformity:											
22800	A	Fusion of spine		37.94	37.94	090	2	0	2	1	0
22802	A	Fusion of spine		57.93	57.93	090	2	0	2	1	0
22804	A	Fusion of spine		62.82	62.82	090	2	0	2	1	0
22808	A	Fusion of spine		43.37	43.37	090	2	0	2	1	0
22810	A	Fusion of spine		47.00	47.00	090	2	0	2	1	0
22812	A	Fusion of spine		57.07	57.07	090	2	0	2	1	0
22818	A	Kyphectomy, 1-2 segments		58.86	58.86	090	2	0	2	2	2
22819	A	Kyphectomy, 3 or more		63.04	63.04	090	2	0	2	2	2
(28) Spine, exploration											
22830	A	Exploration of fusion		22.59	22.59	090	2	0	2	1	0
(29) Spine, spinal instrumentation:											
22840	A	Insert spine fixation		17.70	17.70	ZZZ	0	0	2	1	0
22841	B	Insert spine fixation		0.00	0.00	XXX	9	9	9	9	9
22842	A	Insert spine fixation		18.66	18.66	ZZZ	0	0	2	2	0
22843	A	Insert spine fixation		21.25	21.25	ZZZ	0	0	2	2	0
22844	A	Insert spine fixation		25.96	25.96	ZZZ	0	0	2	2	0
22845	A	Insert spine fixation		16.88	16.88	ZZZ	0	0	2	2	0
22846	A	Insert spine fixation		19.62	19.62	ZZZ	0	0	2	2	0
22847	A	Insert spine fixation		21.79	21.79	ZZZ	0	0	2	2	0
22848	A	Insert pelvic fixation		11.49	11.49	ZZZ	0	0	2	2	0
22849	A	Reinsert spine fixation		29.25	29.25	090	2	0	2	1	0
22850	A	Remove spine fixation		18.33	18.33	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
22851	A	Apply spine prosthesis		12.85	12.85	ZZZ	0	0	2	2	0
22852	A	Remove spine fixation		18.51	18.51	090	2	0	2	1	0
22855	A	Remove spine fixation		21.63	21.63	090	2	0	2	1	0
(30) Spine, other procedures:											
22899	C	Spine surgery procedure		0.00	0.00	YYY	2	0	2	1	1
(31) Abdomen, excision:											
22900	A	Remove abdominal tumor		8.52	8.52	090	2	0	2	1	0
(32) Abdomen, other procedures:											
22999	C	Abdomen surgery procedure		0.00	0.00	YYY	2	0	0	1	1
(33) Shoulder, incision:											
23000	A	Remove deposits		7.35	7.35	090	2	0	2	1	0
23020	A	Release shoulder		15.73	15.73	090	2	1	2	0	0
23030	A	Drain shoulder		5.39	5.39	010	2	0	1	0	0
23031	A	Drain shoulder		3.00	2.76	010	2	1	1	0	0
23035	A	Drain shoulder		14.40	14.40	090	2	1	2	0	0
23040	A	Exploratory, shoulder		18.12	18.12	090	2	1	2	1	0
23044	A	Exploratory, shoulder		13.79	13.79	090	2	1	1	1	0
(34) Shoulder, excision:											
23065	A	Biopsy of shoulder		2.75	2.75	010	2	1	1	0	0
23066	A	Biopsy of shoulder		4.97	4.97	090	2	1	1	0	0
23075	A	Removal of shoulder		3.95	3.95	010	2	1	1	0	0
23076	A	Removal of shoulder		10.70	10.70	090	2	1	1	0	0
23077	A	Remove tumor		22.50	22.50	090	2	1	2	1	0
23100	A	Biopsy of shoulder		12.56	12.56	090	2	1	2	1	0
23101	A	Shoulder joint		11.66	11.66	090	2	1	1	1	0
23105	A	Remove shoulder		17.17	17.17	090	2	1	2	1	0
23106	A	Incision of collar bone		10.44	10.44	090	2	1	1	1	0
23107	A	Explore, treat shoulder		17.86	17.86	090	2	1	2	1	0
23120	A	Partial removal		11.32	11.32	090	2	0	2	1	0
23125	A	Removal collar bone		17.43	17.43	090	2	1	2	1	0
23130	A	Partial removal		14.29	14.29	090	2	1	1	1	0
23140	A	Removal of bone		10.68	10.68	090	2	1	1	0	0
23145	A	Removal of bone		16.84	16.84	090	2	1	2	1	0
23146	A	Removal of bone		12.72	12.72	090	2	1	0	0	0
23150	A	Removal of humerus		14.67	14.67	090	2	1	2	1	0
23155	A	Removal of humerus		18.65	18.65	090	2	1	2	1	0
23156	A	Removal of humerus		15.95	15.95	090	2	1	2	0	0
23170	A	Remove collar bone		11.30	11.30	090	2	1	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
23172	A		Remove shoulder	11.65	11.65	090	2	1	2	0	0
23174	A		Remove humerus	17.56	17.56	090	2	1	2	1	0
23180	A		Remove collar bone	12.27	12.27	090	2	1	1	1	0
23182	A		Remove shoulder	14.37	14.37	090	2	1	2	0	0
23184	A		Remove humerus	17.86	17.86	090	2	1	2	1	0
23190	A		Partial removal	12.98	12.98	090	2	1	2	1	0
23195	A		Removal of humeral head	18.31	18.31	090	2	1	2	1	0
23200	A		Removal of collar bone	20.52	20.52	090	2	1	2	1	0
23210	A		Removal of shoulder	20.82	20.82	090	2	1	2	1	0
23220	A		Partial removal	25.98	25.98	090	2	1	2	1	0
23221	A		Partial removal	34.27	34.27	090	2	1	2	0	0
23222	A		Partial removal	37.49	37.49	090	2	1	2	1	0

(35) Shoulder, introduction or removal:

23330	A		Remove shoulder	2.25	1.98	010	2	1	0	0	0
23331	A		Remove shoulder	9.09	9.09	090	2	1	0	0	0
23332	A		Remove shoulder	20.80	20.80	090	2	1	2	1	0
23350	A		Injection for shoulder	1.44	1.44	000	2	1	1	0	0

(36) Shoulder, repair, revision, and/or reconstruction:

23395	A		Muscle transfer	27.06	27.06	090	2	0	2	1	0
23397	A		Muscle transfer	29.43	29.43	090	2	0	2	1	0
23400	A		Fixation of shoulder	22.72	22.72	090	2	1	2	1	0
23405	A		Incision of tendon	15.38	15.38	090	2	0	2	1	0
23406	A		Incision of tendons	19.76	19.76	090	2	0	2	0	0
23410	A		Repair of tendon	22.83	22.83	090	2	0	2	1	0
23412	A		Repair of tendon	26.19	26.19	090	2	1	2	1	0
23415	A		Release of shoulder	14.51	14.51	090	2	1	1	1	0
23420	A		Repair of shoulder	27.50	27.50	090	2	1	2	1	0
23430	A		Repair biceps tendon	16.81	16.81	090	2	1	2	1	0
23440	A		Removal/transplant	17.08	17.08	090	2	1	2	1	0
23450	A		Repair shoulder	25.61	25.61	090	2	1	2	1	0
23455	A		Repair shoulder	29.45	29.45	090	2	1	2	1	0
23460	A		Repair shoulder	28.78	28.78	090	2	1	2	1	0
23462	A		Repair shoulder	29.87	29.87	090	2	1	2	1	0
23465	A		Repair shoulder	29.31	29.31	090	2	1	2	1	0
23466	A		Repair shoulder	29.49	29.49	090	2	1	2	1	0
23470	A		Reconstruct shoulder	33.22	33.22	090	2	1	2	1	0
23472	A		Reconstruct shoulder	36.03	36.03	090	2	1	2	1	0
23480	A		Revision of collar bone	17.08	17.08	090	2	1	1	1	0
23485	A		Revision of collar bone	24.19	24.19	090	2	1	2	1	0
23490	A		Reinforce clavicle	20.85	20.85	090	2	1	2	0	0
23491	A		Reinforce shoulder	26.33	26.33	090	2	1	2	1	0

(37) Shoulder, fracture and/or dislocation:

23500	A		Treat clavicle	3.60	3.60	090	2	1	1	0	0
23505	A		Treat clavicle	6.04	6.04	090	2	1	1	0	0
23515	A		Repair clavicle	14.04	14.04	090	2	1	2	1	0
23520	A		Treat clavicle	3.40	3.40	090	2	1	0	0	0
23525	A		Treat clavicle	5.33	5.33	090	2	1	0	0	0
23530	A		Repair clavicle	13.49	13.49	090	2	1	2	0	0
23532	A		Repair clavicle	14.91	14.91	090	2	1	2	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
23540	A	Treat clavicle		3.63	3.63	090	2	1	1	0	0
23545	A	Treat clavicle		5.02	5.02	090	2	1	0	0	0
23550	A	Repair clavicle		15.07	15.07	090	2	1	2	1	0
23552	A	Repair clavicle		15.36	15.36	090	2	1	2	1	0
23570	A	Treat shoulder bone		3.80	3.80	090	2	1	1	0	0
23575	A	Treat shoulder bone		6.58	6.58	090	2	1	0	0	0
23585	A	Repair scapula		16.28	16.28	090	2	1	2	1	0
23600	A	Treat humerus fixation		5.70	5.70	090	2	1	1	0	0
23605	A	Treat humerus fixation		9.44	9.44	090	2	1	1	0	0
23615	A	Repair humerus		19.41	19.41	090	2	1	2	1	0
23616	A	Repair humerus		42.82	42.82	090	2	1	2	2	0
23620	A	Treat humerus		5.21	3.71	090	2	1	1	0	0
23625	A	Treat humerus		7.59	7.59	090	2	1	1	0	0
23630	A	Repair humerus		15.26	15.26	090	2	1	2	1	0
23650	A	Treat shoulder		5.24	5.24	090	2	1	1	0	0
23655	A	Treat shoulder		7.22	7.22	090	2	1	1	0	0
23660	A	Repair shoulder		15.53	15.53	090	2	1	2	1	0
23665	A	Treat dislocation		7.58	7.58	090	2	1	1	0	0
23670	A	Repair dislocation		16.59	16.59	090	2	1	2	1	0
23675	A	Treat dislocation		9.62	9.62	090	2	1	1	0	0
23680	A	Repair dislocation		21.00	21.00	090	2	1	2	1	0

(38) Shoulder, manipulation:

23700	A	Fixation of shoulder		4.49	4.49	010	2	0	1	0	0
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(39) Shoulder, arthrodesis:

23800	A	Fusion of shoulder		29.35	29.35	090	2	1	2	1	0
23802	A	Fusion of shoulder		29.90	29.90	090	2	0	2	1	0

(40) Shoulder, amputation:

23900	A	Amputation of arm		31.37	31.37	090	2	0	2	0	0
23920	A	Amputation of shoulder		28.04	28.04	090	2	0	2	1	0
23921	A	Amputation		9.52	9.52	090	2	0	1	0	0

(41) Shoulder, other procedures:

23929	C	Shoulder surgery		0.00	0.00	YYY	2	0	2	1	1
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(42) Humerus and elbow, incision:

23930	A	Drainage of arm		4.36	4.36	010	2	1	1	0	0
23931	A	Drainage of arm		2.41	2.05	010	2	1	1	0	0
23935	A	Drain arm/elbow		10.49	10.49	090	2	1	0	0	0
24000	A	Exploratory elbow		12.26	12.26	090	2	1	0	1	0
24006	A	Release elbow joint		15.99	15.99	090	2	1	2	2	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(43) Humerus and elbow, excision:											
24065	A	Biopsy arm or elbow		2.71	2.32	010	2	1	1	0	0
24066	A	Biopsy arm or elbow		7.57	7.57	090	2	1	1	0	0
24075	A	Remove arm or elbow		5.66	5.66	090	2	1	1	0	0
24076	A	Remove arm or elbow		9.64	9.64	090	2	1	1	0	0
24077	A	Remove tumor		21.16	21.16	090	2	1	2	1	0
24100	A	Biopsy elbow joint		8.94	8.94	090	2	1	2	1	0
24101	A	Explore/treat elbow		12.85	12.85	090	2	1	2	0	0
24102	A	Remove elbow joint		16.82	16.82	090	2	1	2	1	0
24105	A	Removal of elbow		7.27	7.27	090	2	1	1	0	0
24110	A	Remove humerus		14.81	14.81	090	2	1	1	1	0
24115	A	Remove/graft bone		16.89	16.89	090	2	1	2	1	0
24116	A	Remove/graft bone		20.92	20.92	090	2	1	2	0	0
24120	A	Remove elbow lesion		12.39	12.39	090	2	1	0	0	0
24125	A	Remove/graft bone		13.09	13.09	090	2	1	2	1	0
24126	A	Remove/graft bone		15.36	15.36	090	2	1	2	0	0
24130	A	Removal of radial head		12.76	12.76	090	2	1	1	1	0
24134	A	Removal of arm		17.91	17.91	090	2	1	2	0	0
24136	A	Remove radius bone		16.24	16.24	090	2	1	1	0	0
24138	A	Remove elbow bone		14.06	14.06	090	2	1	2	0	0
24140	A	Partial removal		17.60	17.60	090	2	1	2	0	0
24145	A	Partial removal		13.61	13.61	090	2	1	1	1	0
24147	A	Partial removal		13.83	13.83	090	2	1	1	1	0
24149	A	Radical resection		26.24	26.24	090	2	1	2	1	0
24150	A	Extensive humerus		26.88	26.88	090	2	1	2	1	0
24151	A	Extensive humerus		28.67	28.67	090	2	1	2	1	0
24152	A	Extensive radius		16.34	16.34	090	2	1	2	1	0
24153	A	Extensive radius		21.50	21.50	090	2	1	0	0	0
24155	A	Removal of elbow		21.98	21.98	090	2	1	2	1	0
(44) Humerus and elbow, introduction or removal:											
24160	A	Remove elbow joint		12.22	12.22	090	2	1	1	1	0
24164	A	Remove radial head		11.49	11.49	090	2	1	1	1	0
24200	A	Removal of arm		2.17	1.90	010	2	1	0	0	0
24201	A	Removal of arm		7.37	7.37	090	2	1	1	0	0
24220	A	Injection for elbow		1.71	1.71	000	2	1	0	0	0
(45) Humerus and elbow, repair, revision, and/or reconstruction:											
24301	A	Muscle/tendon transfer		17.57	17.57	090	2	0	2	1	0
24305	A	Arm tendon lengthening		9.90	9.90	090	2	0	0	0	0
24310	A	Revision of arm		8.54	8.54	090	2	0	0	0	0
24320	A	Repair of arm tenoplasty		19.18	19.18	090	2	0	2	1	0
24330	A	Revision of arm		17.95	17.95	090	2	1	2	0	0
24331	A	Revision of arm		19.83	19.83	090	2	1	2	0	0
24340	A	Repair of biceps		14.55	14.55	090	2	1	2	1	0
24341	A	Repair tendon/muscle		14.55	14.55	090	2	1	2	1	0
24342	A	Repair of rupture		20.64	20.64	090	2	1	2	1	0
24350	A	Repair of tennis elbow		9.23	9.23	090	2	1	0	0	0
24351	A	Repair of tennis elbow		10.18	10.18	090	2	1	0	0	0
24352	A	Repair of tennis elbow		11.85	11.85	090	2	1	2	1	0
24354	A	Repair of tennis elbow		11.82	11.82	090	2	1	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
24356	A		Revision of tennis elbow	13.75	13.75	090	2	1	0	0	0
24360	A		Reconstruct elbow	25.67	25.67	090	2	1	2	1	0
24361	A		Reconstruct elbow	26.57	26.57	090	2	1	2	1	0
24362	A		Reconstruct elbow	26.74	20.40	090	2	1	2	0	0
24363	A		Replace elbow joint	38.71	38.71	090	2	1	2	0	0
24365	A		Reconstruct radial head	15.54	15.54	090	2	1	2	1	0
24366	A		Reconstruct radial head	18.98	18.98	090	2	1	2	1	0
24400	A		Revision of humerus	18.94	18.94	090	2	1	2	1	0
24410	A		Revision of humerus	28.15	28.15	090	2	1	2	1	0
24420	A		Revision of humerus	25.19	25.19	090	2	1	2	1	0
24430	A		Repair of humerus	26.53	26.53	090	2	1	2	1	0
24435	A		Repair of humerus	27.52	27.52	090	2	1	2	1	0
24470	A		Revision of elbow	16.30	16.30	090	2	1	2	0	0
24495	A		Decompression of forearm	13.53	13.53	090	2	1	0	0	0
24498	A		Reinforce humerus	21.73	21.73	090	2	1	2	1	0

(46) Humerus and elbow, fracture and/or dislocation:

24500	A		Treat humerus fracture	5.57	5.57	090	2	1	1	0	0
24505	A		Treat humerus fracture	9.43	9.43	090	2	1	1	0	0
24515	A		Repair humerus	20.75	20.75	090	2	1	2	1	0
24516	A		Repair humerus	20.75	20.75	090	2	1	2	2	0
24530	A		Treat humerus fracture	6.05	6.05	090	2	1	1	0	0
24535	A		Treat humerus fracture	11.35	11.35	090	2	1	1	0	0
24538	A		Treat humerus fracture	16.96	16.96	090	2	1	1	0	0
24545	A		Repair humerus	20.00	20.00	090	2	1	2	1	0
24546	A		Repair humerus	24.75	24.75	090	2	1	2	2	0
24560	A		Treat humerus fracture	4.79	4.79	090	2	1	1	0	0
24565	A		Treat humerus fracture	8.68	8.68	090	2	1	1	0	0
24566	A		Treat humerus fracture	13.45	13.45	090	2	1	1	0	0
24575	A		Repair humerus	17.89	17.89	090	2	1	2	1	0
24576	A		Treat humerus fracture	4.86	4.86	090	2	1	1	0	0
24577	A		Treat humerus fracture	9.46	9.46	090	2	1	1	0	0
24579	A		Repair humerus	19.36	19.36	090	2	1	2	1	0
24582	A		Treat humerus fracture	14.74	14.74	090	2	1	1	0	0
24586	A		Repair elbow fracture	29.33	29.33	090	2	1	2	1	0
24587	A		Repair elbow fracture	28.21	28.21	090	2	1	2	1	0
24600	A		Treat elbow dislocation	5.87	5.87	090	2	1	1	0	0
24605	A		Treat elbow dislocation	7.34	7.34	090	2	1	1	0	0
24615	A		Repair elbow dislocation	18.34	18.34	090	2	1	2	1	0
24620	A		Treat elbow fracture	10.30	10.30	090	2	1	0	0	0
24635	A		Repair elbow fracture	23.64	23.64	090	2	1	2	1	0
24640	A		Treat elbow dislocation	2.11	2.11	010	2	1	0	0	0
24650	A		Treat radius fracture	4.32	3.23	090	2	1	1	0	0
24655	A		Treat radius fracture	7.15	7.15	090	2	1	1	0	0
24665	A		Repair radius fracture	14.91	14.91	090	2	1	2	1	0
24666	A		Repair radius fracture	19.42	19.42	090	2	1	2	1	0
24670	A		Treat ulnar fracture	4.34	4.34	090	2	1	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
24675	A		Treat ulnar fracture	7.97	7.97	090	2	1	1	0	0
24685	A		Repair ulnar fracture	16.84	16.84	090	2	1	2	1	0
(47) Humerus and elbow, arthrodesis:											
24800	A		Fusion of elbow	21.25	21.25	090	2	1	2	1	0
24802	A		Fusion/graft of elbow	25.29	25.29	090	2	1	2	0	0
(48) Humerus and elbow, amputation:											
24900	A		Amputation of ulna	16.90	16.90	090	2	1	2	1	0
24920	A		Amputation of ulna	15.87	15.87	090	2	1	2	1	0
24925	A		Amputation	12.89	12.89	090	2	1	2	0	0
24930	A		Amputation	17.83	17.83	090	2	1	2	0	0
24931	A		Upper arm and implant	23.35	23.35	090	2	1	2	0	0
24935	A		Revision of amputation	28.59	28.59	090	2	1	0	0	0
24940	C		Revision of extremity	0.00	0.00	090	2	1	2	0	0
(49) Humerus and elbow, other procedures:											
24999	C		Upper arm/elbow surgery	0.00	0.00	YYY	2	1	0	1	1
(50) Forearm and wrist, incision:											
25000	A		Incision of tendon	7.00	7.00	090	2	1	1	0	0
25020	A		Decompression	10.00	10.00	090	2	1	1	0	0
25023	A		Decompression	17.54	17.54	090	2	1	0	0	0
25028	A		Drainage of forearm	6.95	6.95	090	2	1	1	0	0
25031	A		Drainage of forearm	4.45	4.45	090	2	1	0	0	0
25035	A		Treat forearm	13.32	13.32	090	2	1	0	0	0
25040	A		Explore/treat wrist	12.51	12.51	090	2	1	0	0	0
(51) Forearm and wrist, excision:											
25065	A		Biopsy of forearm	2.58	2.22	010	2	1	1	0	0
25066	A		Biopsy of forearm	5.36	5.36	090	2	1	1	0	0
25075	A		Removal of forearm	5.71	5.71	090	2	1	1	0	0
25076	A		Removal of forearm	8.48	8.48	090	2	1	1	0	0
25077	A		Remove tumor, forearm	17.97	17.97	090	2	1	1	0	0
25085	A		Incision of wrist	9.85	9.85	090	2	1	2	0	0
25100	A		Biopsy of wrist	8.12	8.12	090	2	1	0	0	0
25101	A		Explore/treat wrist	9.78	9.78	090	2	1	0	0	0
25105	A		Remove wrist joint	12.19	12.19	090	2	1	0	1	0
25107	A		Remove wrist joint	11.43	11.43	090	2	1	2	1	0
25110	A		Remove wrist tendon	6.52	6.52	090	2	1	1	0	0
25111	A		Remove wrist tendon	6.49	6.49	090	2	1	1	0	0
25112	A		Reremove wrist tendon	8.07	8.07	090	2	1	1	0	0
25115	A		Remove wrist/forearm	15.58	15.58	090	2	1	1	0	0
25116	A		Remove wrist/forearm	14.77	14.77	090	2	1	0	1	0
25118	A		Excise wrist tendon	9.18	9.18	090	2	1	1	0	0
25119	A		Partial removal of ulna	12.62	12.62	090	2	1	2	1	0
25120	A		Removal of forearm	12.47	12.47	090	2	1	0	1	0
25125	A		Remove/graft forearm	13.97	13.97	090	2	1	0	0	0
25126	A		Remove/graft forearm	14.04	14.04	090	2	1	2	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
25130	A		Removal of wrist	9.21	9.21	090	2	1	0	0	0
25135	A		Remove and graft	12.06	12.06	090	2	1	2	1	0
25136	A		Remove and graft	10.47	10.47	090	2	1	2	1	0
25145	A		Remove forearm	11.94	11.94	090	2	1	2	0	0
25150	A		Partial removal	13.50	13.50	090	2	1	1	1	0
25151	A		Partial removal	12.83	12.83	090	2	1	2	1	0
25170	A		Extensive forearm	20.36	20.36	090	2	1	2	1	0
25210	A		Removal of wrist	10.56	10.56	090	2	0	0	1	0
25215	A		Removal of wrist	16.33	16.33	090	2	0	2	1	0
25230	A		Partial removal	10.60	10.60	090	2	1	1	1	0
25240	A		Partial removal	10.29	10.29	090	2	1	0	1	0

(52) Forearm and wrist, introduction or removal:

25246	A		Injection for wrist	1.83	1.83	000	2	1	1	0	0
25248	A		Removal of forearm	6.98	6.98	090	2	1	1	0	0
25250	A		Removal of wrist	11.93	11.93	090	2	1	2	0	0
25251	A		Removal of wrist	17.42	17.42	090	2	0	2	0	0

(53) Forearm and wrist, repair, revision, and/or reconstruction:

25260	A		Repair forearm	11.96	11.96	090	2	0	1	0	0
25263	A		Repair forearm	13.24	13.24	090	2	0	2	0	0
25265	A		Repair forearm	17.41	17.41	090	2	0	2	0	0
25270	A		Repair forearm	9.00	9.00	090	2	0	0	0	0
25272	A		Repair forearm	10.01	10.01	090	2	0	0	0	0
25274	A		Repair forearm	14.96	14.96	090	2	0	0	1	0
25280	A		Revise wrist/forearm	11.01	11.01	090	2	0	0	1	0
25290	A		Incise wrist/forearm	7.41	7.41	090	2	0	1	0	0
25295	A		Release wrist/forearm	9.18	9.18	090	2	0	1	0	0
25300	A		Fusion of tendon	15.75	15.75	090	2	1	2	0	0
25301	A		Fusion of tendon	14.82	14.82	090	2	1	2	0	0
25310	A		Transplant forearm	14.93	14.93	090	2	0	2	1	0
25312	A		Transplant forearm	16.78	16.78	090	2	0	2	1	0
25315	A		Revise palsy hand	17.78	17.78	090	2	1	2	0	0
25316	A		Revise palsy hand	22.39	22.39	090	2	1	2	0	0
25320	A		Repair/revise wrist	18.88	18.88	090	2	1	2	0	0
25332	A		Revise wrist joint	20.89	20.89	090	2	1	2	0	0
25335	A		Realignment of wrist	23.57	23.57	090	2	1	2	0	0
25337	A		Reconstruct ulna	18.34	18.34	090	2	1	1	0	0
25350	A		Revision of radius	16.02	16.02	090	2	1	2	0	0
25355	A		Revision of radius	18.86	18.86	090	2	1	2	0	0
25360	A		Revision of ulna	14.39	14.39	090	2	1	2	1	0
25365	A		Revise radius and ulna	22.08	22.08	090	2	1	2	0	0
25370	A		Revise radius or ulna	24.55	24.55	090	2	1	2	0	0
25375	A		Revise radius and ulna	25.24	25.24	090	2	1	2	1	0
25390	A		Shorten radius or ulna	18.79	18.79	090	2	1	2	1	0
25391	A		Lengthen radius or ulna	24.32	24.32	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
25392	A		Shorten radius and ulna	25.81	25.81	090	2	1	2	0	0
25393	A		Lengthen radius and ulna	29.41	29.41	090	2	1	2	0	0
25400	A		Repair radius or ulna	21.29	21.29	090	2	1	2	1	0
25405	A		Repair/graft radius	26.17	26.17	090	2	1	2	1	0
25415	A		Repair radius and ulna	24.21	24.21	090	2	1	2	1	0
25420	A		Repair/graft radius	30.28	30.28	090	2	1	2	1	0
25425	A		Repair/graft radius	24.63	24.63	090	2	1	2	1	0
25426	A		Repair/graft radius	26.86	26.86	090	2	1	2	1	0
25440	A		Repair/graft wrist	19.05	19.05	090	2	1	2	1	0
25441	A		Reconstruct wrist	23.73	23.73	090	2	1	2	1	0
25442	A		Reconstruct wrist	17.34	17.34	090	2	1	2	1	0
25443	A		Reconstruct wrist	19.33	19.33	090	2	1	2	1	0
25444	A		Reconstruct wrist	20.83	20.83	090	2	1	2	0	0
25445	A		Reconstruct wrist	19.75	19.75	090	2	1	1	1	0
25446	A		Wrist replacement	34.54	34.54	090	2	1	2	1	0
25447	A		Repair wrist joint	19.60	19.60	090	2	1	2	1	0
25449	A		Remove wrist joint	21.37	21.37	090	2	1	2	1	0
25450	A		Revision of wrist	14.86	14.86	090	2	1	1	0	0
25455	A		Revision of wrist	17.81	17.81	090	2	1	1	0	0
25490	A		Reinforce radius	17.84	17.84	090	2	1	2	0	0
25491	A		Reinforce ulna	18.65	18.65	090	2	1	2	0	0
25492	A		Reinforce radius	23.03	23.03	090	2	1	2	0	0

(54) Forearm and wrist, fracture and/or dislocation:

25500	A		Treat fracture	4.63	3.51	090	2	1	1	0	0
25505	A		Treat fracture	8.46	8.46	090	2	1	1	0	0
25515	A		Repair fracture	16.38	16.38	090	2	1	2	1	0
25520	A		Repair fracture	11.75	11.75	090	2	1	1	2	0
25525	A		Repair fracture	22.89	22.89	090	2	1	2	2	0
25526	A		Repair fracture	24.30	24.30	090	2	1	2	2	0
25530	A		Treat fracture	4.45	3.20	090	2	1	1	0	0
25535	A		Treat fracture	8.41	8.41	090	2	1	1	0	0
25545	A		Repair fracture	16.06	16.06	090	2	1	2	1	0
25560	A		Treat fracture	4.56	4.56	090	2	1	1	0	0
25565	A		Treat fracture	10.00	10.00	090	2	1	1	0	0
25574	A		Treat fracture	14.76	14.76	090	2	1	2	2	0
25575	A		Repair fracture	20.78	20.78	090	2	1	2	1	0
25600	A		Treat fracture	5.36	3.99	090	2	1	1	0	0
25605	A		Treat fracture	9.43	9.43	090	2	1	1	0	0
25611	A		Repair fracture	13.39	13.39	090	2	1	1	0	0
25620	A		Repair fracture	15.28	15.28	090	2	1	2	0	0
25622	A		Treat wrist bone	4.75	3.65	090	2	1	1	0	0
25624	A		Treat wrist bone	7.97	6.20	090	2	1	0	0	0
25628	A		Repair wrist bone	15.18	15.18	090	2	1	2	0	0
25630	A		Treat wrist bone	4.90	3.84	090	2	1	1	0	0
25635	A		Treat wrist bone	7.51	5.88	090	2	1	0	0	0
25645	A		Repair wrist bone	13.56	13.56	090	2	1	2	0	0
25650	A		Repair wrist bone	5.54	4.25	090	2	1	1	0	0
25660	A		Treat wrist dislocation	6.22	6.22	090	2	1	0	0	0
25670	A		Repair wrist dislocation	14.65	14.65	090	2	1	2	1	0
25675	A		Treat wrist dislocation	6.63	6.63	090	2	1	0	0	0
25676	A		Repair wrist dislocation	14.98	14.98	090	2	1	2	0	0
25680	A		Treat wrist fracture	7.99	7.99	090	2	1	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
25685	A	Repair	wrist fracture	18.16	18.16	090	2	1	2	0	0
25690	A	Treat	wrist dislocation	10.12	10.12	090	2	1	0	0	0
25695	A	Repair	wrist dislocation	15.02	15.02	090	2	1	2	1	0

(55) Forearm and wrist, arthrodesis:

25800	A	Fusion	of wrist	20.23	20.23	090	2	1	2	1	0
25805	A	Fusion/graft	of wrist	23.38	23.38	090	2	1	2	1	0
25810	A	Fusion/graft	of wrist	21.97	21.97	090	2	1	2	1	0
25820	A	Fusion	of hand	15.50	15.50	090	2	1	2	1	0
25825	A	Fusion	of hand bone	19.37	19.37	090	2	1	2	1	0
25830	A	Fusion	of radioulnar	18.24	18.24	090	2	1	2	1	0

(56) Forearm and wrist, amputation:

25900	A	Amputation	of forearm	15.74	15.74	090	2	1	0	0	0
25905	A	Amputation	of forearm	15.78	15.78	090	2	1	2	0	0
25907	A	Amputation	follow-up	13.18	13.18	090	2	1	2	0	0
25909	A	Amputation	follow-up	14.08	14.08	090	2	1	2	0	0
25915	A	Amputation		32.22	32.22	090	2	1	2	0	0
25920	A	Amputation	of hand	15.30	15.30	090	2	1	0	0	0
25922	A	Amputation	of hand	12.66	12.66	090	2	1	2	0	0
25924	A	Amputation	follow-up	15.60	15.60	090	2	1	2	0	0
25927	A	Amputation	of hand	14.74	14.74	090	2	1	0	0	0
25929	A	Amputation	follow-up	12.00	12.00	090	2	1	2	0	0
25931	A	Amputation	follow-up	11.97	11.97	090	2	1	1	0	0

(57) Forearm and wrist, other procedures:

25999	C	Forearm	or wrist surgery	0.00	0.00	YYY	2	1	0	1	1
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(58) Hand and fingers, incision:

26010	A	Drainage	of finger	1.89	1.66	010	2	0	1	0	0
26011	A	Drainage	of finger	3.61	3.61	010	2	0	1	0	0
26020	A	Drainage	of hand tendon	8.18	8.18	090	2	0	1	0	0
26025	A	Drainage	of palmar	9.15	9.15	090	2	0	0	0	0
26030	A	Drainage	of palmar	11.46	11.46	090	2	0	0	0	0
26034	A	Treat	hand bone	10.13	10.13	090	2	0	1	0	0
26035	A	Decompress	finger	14.10	14.10	090	2	0	0	0	0
26037	A	Decompress	finger	13.31	13.31	090	2	0	0	0	0
26040	A	Release	palm contracture	6.06	6.06	090	2	1	1	0	0
26045	A	Release	palm contracture	10.16	10.16	090	2	1	1	0	0
26055	A	Incise	finger tendon	5.92	5.92	090	2	0	1	0	0
26060	A	Incision	of finger	3.74	3.74	090	2	0	0	0	0
26070	A	Explore/treat	hand	6.25	4.91	090	2	1	1	0	0
26075	A	Explore/treat	finger	7.43	7.43	090	2	1	1	0	0
26080	A	Explore/treat	finger	7.16	7.16	090	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(59) Hand and fingers, excision:											
26100	A	Biopsy hand joint		6.47	6.47	090	2	1	0	0	0
26105	A	Biopsy finger joint		7.77	7.77	090	2	1	0	0	0
26110	A	Biopsy finger joint		6.31	6.31	090	2	0	1	0	0
26115	A	Removal of hand		5.63	5.63	090	2	0	1	0	0
26116	A	Removal of hand		8.95	8.95	090	2	0	1	0	0
26117	A	Remove tumor, hand		13.16	13.16	090	2	0	1	0	0
26121	A	Release palm contracture		15.74	15.74	090	2	1	1	0	0
26123	A	Release palm contracture		18.07	18.07	090	2	1	1	0	0
26125	A	Release palm contracture		6.96	6.96	ZZZ	0	0	1	0	0
26130	A	Remove wrist joint		10.23	10.23	090	2	1	1	0	0
26135	A	Revise finger joint		11.47	11.47	090	2	0	0	0	0
26140	A	Revise finger joint		10.26	10.26	090	2	0	1	0	0
26145	A	Tendon excision		10.73	10.73	090	2	0	1	0	0
26160	A	Remove tendon sheath		5.32	5.32	090	2	0	1	0	0
26170	A	Removal of palm		7.31	7.31	090	2	0	0	0	0
26180	A	Removal of finger		8.97	8.97	090	2	0	0	0	0
26185	A	Remove finger bone		9.09	9.09	090	2	1	2	1	0
26200	A	Remove hand bone		9.73	9.73	090	2	0	0	0	0
26205	A	Remove/graft bone		13.74	13.74	090	2	0	1	0	0
26210	A	Removal of finger		8.80	8.80	090	2	0	1	0	0
26215	A	Remove/graft finger		12.32	12.32	090	2	0	1	0	0
26230	A	Partial removal		10.24	10.24	090	2	0	0	0	0
26235	A	Partial removal		10.04	10.04	090	2	0	0	0	0
26236	A	Partial removal		8.92	8.92	090	2	0	1	0	0
26250	A	Extensive hand		13.24	13.24	090	2	0	0	0	0
26255	A	Extensive hand		20.77	20.77	090	2	0	2	1	0
26260	A	Extensive finger		12.45	12.45	090	2	0	2	0	0
26261	A	Extensive finger		16.41	16.41	090	2	0	2	0	0
26262	A	Partial removal		10.15	10.15	090	2	0	2	0	0
(60) Hand and fingers, introduction or removal:											
26320	A	Removal of implant		7.35	7.35	090	2	0	1	0	0
(61) Hand and fingers, repair, revision, and/or reconstruction:											
26350	A	Repair finger/hand		11.53	11.53	090	2	0	1	0	0
26352	A	Repair/graft hand		13.95	13.95	090	2	0	2	1	0
26356	A	Repair finger/hand		14.97	14.97	090	2	0	1	0	0
26357	A	Repair finger/hand		14.80	14.80	090	2	0	2	0	0
26358	A	Repair/graft hand		16.15	16.15	090	2	0	2	0	0
26370	A	Repair finger/hand		13.56	13.56	090	2	0	0	0	0
26372	A	Repair/graft hand		14.76	14.76	090	2	0	2	0	0
26373	A	Repair finger/hand		14.64	14.64	090	2	0	2	0	0
26390	A	Revise hand/finger		16.70	16.70	090	2	0	2	1	0
26392	A	Repair/graft hand		18.33	18.33	090	2	0	2	1	0
26410	A	Repair hand tendon		7.66	7.66	090	2	0	1	0	0
26412	A	Repair/graft hand		12.07	12.07	090	2	0	0	0	0
26415	A	Excision, hand		14.59	14.59	090	2	0	0	0	0
26416	A	Graft hand or finger		17.63	17.63	090	2	0	1	0	0
26418	A	Repair finger tendon		7.64	7.64	090	2	0	1	0	0
26420	A	Repair/graft finger		12.16	12.16	090	2	0	2	0	0
26426	A	Repair finger/hand		12.27	12.27	090	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
26428	A		Repair/graft finger	12.41	12.41	090	2	0	0	0	0
26432	A		Repair finger tendon	6.97	5.45	090	2	0	1	0	0
26433	A		Repair finger tendon	8.31	8.31	090	2	0	1	0	0
26434	A		Repair/graft finger	10.77	10.77	090	2	0	2	0	0
26437	A		Realignment of finger	9.57	9.57	090	2	0	1	0	0
26440	A		Release palm or finger	8.33	8.33	090	2	0	1	0	0
26442	A		Release palm and finger	10.99	10.99	090	2	0	1	0	0
26445	A		Release hand/finger	7.35	7.35	090	2	0	1	0	0
26449	A		Release forearm	12.26	12.26	090	2	0	0	0	0
26450	A		Incision of palm	5.73	5.73	090	2	0	0	0	0
26455	A		Incision of finger	5.31	5.31	090	2	0	0	0	0
26460	A		Incise hand/finger	4.97	4.97	090	2	0	1	0	0
26471	A		Fusion of finger	9.58	9.58	090	2	0	0	0	0
26474	A		Fusion of finger	9.70	9.70	090	2	0	2	0	0
26476	A		Tendon lengthening	7.64	7.64	090	2	0	1	0	0
26477	A		Tendon shortening	8.93	8.93	090	2	0	1	1	0
26478	A		Lengthen hand tendon	9.82	9.82	090	2	0	0	0	0
26479	A		Shorten hand tendon	10.79	10.79	090	2	0	2	0	0
26480	A		Transplant hand tendon	12.99	12.99	090	2	0	0	0	0
26483	A		Transplant/graft	16.51	16.51	090	2	0	2	1	0
26485	A		Transplant palm tendon	13.86	13.86	090	2	0	2	1	0
26489	A		Transplant/graft	12.24	12.24	090	2	0	0	0	0
26490	A		Revise thumb tendon	15.87	15.87	090	2	0	0	0	0
26492	A		Tendon transfer	17.85	17.85	090	2	0	2	1	0
26494	A		Hand tendon/muscle	15.40	15.40	090	2	0	2	1	0
26496	A		Revise thumb tendon	17.98	17.98	090	2	0	0	0	0
26497	A		Finger tendon transfer	17.20	17.20	090	2	0	2	0	0
26498	A		Finger tendon transfer	25.21	25.21	090	2	0	2	1	0
26499	A		Revision of finger	16.33	16.33	090	2	0	2	1	0
26500	A		Reconstruct hand tendon	9.11	9.11	090	2	0	0	0	0
26502	A		Reconstruct hand tendon	12.10	12.10	090	2	0	2	0	0
26504	A		Reconstruct hand tendon	13.88	13.88	090	2	0	2	0	0
26508	A		Release thumb contracture	9.86	9.86	090	2	0	0	0	0
26510	A		Thumb tendon transfer	9.31	9.31	090	2	0	0	0	0
26516	A		Fusion of knuckle	10.88	10.88	090	2	0	0	0	0
26517	A		Fusion of knuckle	15.52	15.52	090	2	0	2	0	0
26518	A		Fusion of knuckle	15.15	15.15	090	2	0	2	1	0
26520	A		Release knuckle	9.53	9.53	090	2	0	1	0	0
26525	A		Release finger	8.70	8.70	090	2	0	1	1	0
26530	A		Revise knuckle	11.53	11.53	090	2	0	2	0	0
26531	A		Revise knuckle	14.22	14.22	090	2	0	2	1	0
26535	A		Revise finger joint	9.75	9.75	090	2	0	1	0	0
26536	A		Revise/implant	13.21	13.21	090	2	0	0	0	0
26540	A		Repair hand joint	12.87	12.87	090	2	0	0	1	0
26541	A		Repair hand joint	17.27	17.27	090	2	0	2	1	0
26542	A		Repair hand joint	12.17	12.17	090	2	0	0	0	0
26545	A		Reconstruct finger	11.89	11.89	090	2	0	0	0	0
26546	A		Repair nonunion	16.66	16.66	090	2	1	2	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
26548	A		Reconstruct finger	13.43	13.43	090	2	0	0	0	0
26550	A		Construct thumb	40.20	40.20	090	2	0	2	0	0
26551	A		Great toe-hand	86.91	86.91	090	2	0	2	0	0
26553	A		Single toe-hand	86.32	86.32	090	2	0	2	1	0
26554	A		Double toe-hand	102.76	102.76	090	2	0	2	1	0
26555	A		Positional change	31.37	31.37	090	2	0	2	0	0
26556	A		Toe joint transfer	87.97	87.97	090	2	0	2	1	0
26560	A		Repair of web finger	9.74	9.74	090	2	0	2	0	0
26561	A		Repair of web finger	19.36	19.36	090	2	0	2	1	0
26562	A		Repair of web finger	19.53	19.53	090	2	0	2	0	0
26565	A		Correct metacarpal	12.21	12.21	090	2	0	2	0	0
26567	A		Correct finger	10.70	10.70	090	2	0	0	0	0
26568	A		Lengthen metacarpal	16.99	16.99	090	2	0	2	0	0
26580	A		Repair hand defect	34.34	34.34	090	2	0	2	0	0
26585	A		Repair finger defect	26.43	26.43	090	2	0	2	0	0
26587	C		Reconstruct extension	0.00	0.00	090	2	0	2	0	0
26590	A		Repair finger defect	33.87	33.87	090	2	0	2	0	0
26591	A		Repair muscles	5.38	5.38	090	2	0	0	0	0
26593	A		Release muscles	9.19	9.19	090	2	0	1	0	0
26596	A		Excision constriction	16.83	16.83	090	2	0	2	0	0
26597	A		Release of scar	17.42	17.42	090	2	0	0	0	0

(62) Hand and fingers, fracture and/or dislocation:

26600	A		Treat metacarpal	3.39	2.64	090	2	0	1	0	0
26605	A		Treat metacarpal	5.00	3.89	090	2	0	1	0	0
26607	A		Treat metacarpal	8.61	8.61	090	2	0	0	0	0
26608	A		Treat metacarpal	8.61	8.61	090	2	0	0	0	0
26615	A		Repair metacarpal	9.98	9.98	090	2	0	1	0	0
26641	A		Treat thumb dislocation	4.73	4.73	090	2	0	0	0	0
26645	A		Treat thumb fracture	6.31	6.31	090	2	0	0	0	0
26650	A		Repair thumb fracture	9.42	9.42	090	2	0	1	0	0
26665	A		Repair thumb fracture	13.67	13.67	090	2	0	1	1	0
26670	A		Treat hand dislocation	4.33	4.33	090	2	0	0	0	0
26675	A		Treat hand dislocation	8.74	8.74	090	2	0	0	0	0
26676	A		Pin hand dislocation	10.08	10.08	090	2	0	1	0	0
26685	A		Repair hand dislocation	12.40	12.40	090	2	0	1	1	0
26686	A		Repair hand dislocation	13.88	13.88	090	2	0	2	0	0
26700	A		Treat knuckle dislocation	4.26	4.26	090	2	0	1	0	0
26705	A		Treat knuckle dislocation	5.67	5.67	090	2	0	0	0	0
26706	A		Pin knuckle dislocation	9.58	9.58	090	2	0	1	0	0
26715	A		Repair knuckle	9.56	9.56	090	2	0	0	0	0
26720	A		Treat finger fracture	2.65	2.12	090	2	0	1	0	0
26725	A		Treat finger fracture	4.64	3.89	090	2	0	1	0	0
26727	A		Treat finger fracture	7.32	7.32	090	2	0	1	0	0
26735	A		Repair finger fracture	9.37	9.37	090	2	0	1	0	0
26740	A		Treat finger fracture	2.97	2.41	090	2	0	1	0	0
26742	A		Treat finger fracture	5.58	5.58	090	2	0	1	0	0
26746	A		Repair finger fracture	10.30	10.30	090	2	0	1	0	0
26750	A		Treat finger fracture	2.40	2.40	090	2	0	1	0	0
26755	A		Treat finger fracture	3.94	3.94	090	2	0	1	0	0
26756	A		Pin finger fracture	6.00	6.00	090	2	0	0	0	0
26765	A		Repair finger fracture	6.60	6.60	090	2	0	1	0	0
26770	A		Treat finger dislocation	3.52	3.52	090	2	0	1	0	0
26775	A		Treat finger dislocation	4.55	4.55	090	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
26776		A	Pin finger dislocation	6.56	6.56	090	2	0	1	0	0
26785		A	Repair finger dislocation	6.96	6.96	090	2	0	1	0	0

(63) Hand and fingers, arthrodesis:

26820		A	Thumb fusion with graft	14.50	14.50	090	2	0	2	1	0
26841		A	Fusion of thumb	12.98	12.98	090	2	0	0	1	0
26842		A	Thumb fusion with graft	16.52	16.52	090	2	0	2	1	0
26843		A	Fusion of hand	13.67	13.67	090	2	0	2	1	0
26844		A	Fusion/graft	15.68	15.68	090	2	0	2	1	0
26850		A	Fusion of knuckle	11.22	11.22	090	2	0	0	0	0
26852		A	Fusion of knuckle	13.76	13.76	090	2	0	2	1	0
26860		A	Fusion of finger	8.79	8.79	090	2	0	1	0	0
26861		A	Fusion of finger	3.66	3.66	ZZZ	0	0	1	0	0
26862		A	Fusion/graft	12.14	12.14	090	2	0	2	1	0
26863		A	Fusion/graft	7.11	7.11	ZZZ	0	0	2	0	0

(64) Hand and fingers, amputation:

26910		A	Amputation of metacarpal	12.40	12.40	090	2	0	1	0	0
26951		A	Amputation of finger	7.21	7.21	090	2	0	1	0	0
26952		A	Amputation of finger	9.97	9.97	090	2	0	1	0	0

(65) Hand and fingers, other procedures:

26989		C	Hand/finger surgery	0.00	0.00	YYY	2	0	1	0	1
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(66) Pelvis and hip joint, incision:

26990		A	Drainage of pelvis	10.07	10.07	090	2	0	1	0	0
26991		A	Drainage of pelvis	7.97	7.97	090	2	0	0	0	0
26992		A	Drainage of bone	18.56	18.56	090	2	0	0	0	0
27000		A	Incision of hip	7.02	7.02	090	2	1	1	1	0
27001		A	Incision of hip	8.77	8.77	090	2	1	2	1	0
27003		A	Incision of hip	13.80	13.80	090	2	1	2	1	0
27005		A	Incision of hip	12.32	12.32	090	2	1	2	1	0
27006		A	Incision of hip	13.69	13.69	090	2	1	2	1	0
27025		A	Incision of hip	16.61	16.61	090	2	1	0	1	0
27030		A	Drainage of hip	23.87	23.87	090	2	1	2	1	0
27033		A	Exploration of hip	24.30	24.30	090	2	1	2	1	0
27035		A	Denervation of hip	27.83	27.83	090	2	1	2	1	0
27036		A	Excision of hip	23.77	23.77	090	2	1	2	1	0

(67) Pelvis and hip joint, excision:

27040		A	Biopsy of soft tissue	3.36	3.36	010	2	1	1	0	0
27041		A	Biopsy of soft tissue	11.80	11.80	090	2	1	1	0	0
27047		A	Remove hip/pelvis	8.77	8.77	090	2	1	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
27048	A		Remove hip/pelvis	10.31	10.31	090	2	1	2	1	0
27049	A		Remove tumor, hip	23.23	23.23	090	2	1	2	1	0
27050	A		Biopsy of sacroiliac	9.07	9.07	090	2	1	0	1	0
27052	A		Biopsy of hip joint	13.15	13.15	090	2	1	2	1	0
27054	A		Removal of hip	18.07	18.07	090	2	1	2	1	0
27060	A		Removal of ischia	9.10	9.10	090	2	1	2	0	0
27062	A		Remove femur lesion	9.35	9.35	090	2	1	1	1	0
27065	A		Removal of hip	11.25	11.25	090	2	1	2	1	0
27066	A		Removal of hip	17.73	17.73	090	2	1	2	1	0
27067	A		Remove/graft hip	24.85	24.85	090	2	1	2	0	0
27070	A		Partial removal	17.56	17.56	090	2	1	2	1	0
27071	A		Partial removal	19.41	19.41	090	2	1	2	1	0
27075	A		Extensive hip	30.00	30.00	090	2	0	2	1	0
27076	A		Extensive hip	37.33	37.33	090	2	0	2	1	0
27077	A		Extensive hip	41.12	41.12	090	2	0	2	1	0
27078	A		Extensive hip	22.01	22.01	090	2	0	2	1	0
27079	A		Extensive hip	21.74	21.74	090	2	0	2	1	0
27080	A		Removal of tailbone	10.90	10.90	090	2	0	2	1	0

(68) Pelvis and hip joint, introduction or removal:

27086	A		Removal of hip	2.30	2.02	010	2	1	0	0	0
27087	A		Removal of hip	11.58	11.58	090	2	1	2	1	0
27090	A		Removal of hip	19.71	19.71	090	2	1	2	1	0
27091	A		Removal of hip	40.98	40.98	090	2	1	2	1	0
27093	A		Injection for hip	2.03	2.03	000	2	1	1	0	0
27095	A		Injection for hip	2.33	2.33	000	2	1	1	0	0

(69) Pelvis and hip joint, repair, revision, and/or reconstruction:

27097	A		Revision of hip	16.13	16.13	090	2	1	2	0	0
27098	A		Transfer tendon	16.16	16.16	090	2	1	2	0	0
27100	A		Transfer	18.26	18.26	090	2	1	2	1	0
27105	A		Transfer	17.12	17.12	090	2	1	2	0	0
27110	A		Transfer of iliopsoas	23.31	23.31	090	2	1	2	1	0
27111	A		Transfer of iliopsoas	23.17	23.17	090	2	1	2	1	0
27120	A		Reconstruction	35.46	35.46	090	2	1	2	1	0
27122	A		Reconstruction	31.14	31.14	090	2	1	2	1	0
27125	A		Partial hip replacement	30.61	30.61	090	2	1	2	1	0
27130	A		Total hip replacement	42.17	42.17	090	2	1	2	1	0
27132	A		Total hip replacement	48.72	48.72	090	2	1	2	1	0
27134	A		Revise hip joint	59.48	59.48	090	2	1	2	1	0
27137	A		Revise hip joint	44.37	44.37	090	2	1	2	1	0
27138	A		Revise hip joint	46.06	46.06	090	2	1	2	1	0
27140	A		Transplant	22.73	22.73	090	2	1	2	1	0
27146	A		Incision of hip	27.08	27.08	090	2	1	2	1	0
27147	A		Revision of hip	36.60	36.60	090	2	1	2	1	0
27151	A		Incision of hip	39.14	39.14	090	2	1	2	1	0
27156	A		Revision of hip	41.75	41.75	090	2	1	2	1	0
27158	A		Revision of pelvis	33.30	33.30	090	2	2	2	0	0
27161	A		Incision of neck	30.27	30.27	090	2	1	2	1	0
27165	A		Incision/fixation	33.90	33.90	090	2	0	2	1	0
27170	A		Repair/graft femur	31.90	31.90	090	2	1	2	1	0
27175	A		Treat slipped epiphysis	8.92	8.92	090	2	1	0	0	0
27176	A		Treat slipped epiphysis	21.91	21.91	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
27177	A		Repair slipped epiphysis	26.79	26.79	090	2	1	2	1	0
27178	A		Repair slipped epiphysis	21.84	21.84	090	2	1	2	1	0
27179	A		Revise head/neck	23.56	23.56	090	2	1	2	0	0
27181	A		Repair slipped epiphysis	27.21	27.21	090	2	1	2	0	0
27185	A		Revision of femur	11.49	11.49	090	2	1	1	1	0
27187	A		Reinforce hip bone	28.20	28.20	090	2	1	2	1	0

(70) Pelvis and hip joint, fracture and/or dislocation:

27193	A		Treat pelvic ring	7.59	7.59	090	2	1	1	2	0
27194	A		Treat pelvic ring	12.80	12.80	090	2	0	0	2	0
27200	A		Treat tailbone	3.20	3.20	090	2	0	1	0	0
27202	A		Repair tailbone	12.82	12.82	090	2	0	2	0	0
27215	A		Pelvic fracture	21.09	21.09	090	2	0	2	2	0
27216	A		Treat pelvic ring	18.31	18.31	090	2	0	2	2	0
27217	A		Treat pelvic ring	28.15	28.15	090	2	0	2	2	0
27218	A		Treat pelvic ring	33.63	33.63	090	2	0	2	2	0
27220	A		Treat hip socket	10.08	10.08	090	2	1	1	0	0
27222	A		Treat hip socket	18.25	18.25	090	2	1	1	0	0
27226	A		Treat hip wall	30.17	30.17	090	2	1	2	2	0
27227	A		Treat hip fracture	42.08	42.08	090	2	1	2	2	0
27228	A		Treat hip fracture	45.69	45.69	090	2	1	2	2	0
27230	A		Treat fracture	8.41	8.41	090	2	1	1	0	0
27232	A		Treat fracture	19.17	19.17	090	2	1	1	0	0
27235	A		Repair of thigh	25.40	25.40	090	2	1	1	1	0
27236	A		Repair of thigh	31.99	31.99	090	2	1	2	1	0
27238	A		Treatment of thigh	10.15	10.15	090	2	1	1	0	0
27240	A		Treatment of thigh	21.56	21.56	090	2	1	1	0	0
27244	A		Repair of thigh	31.66	31.66	090	2	1	2	1	0
27245	A		Repair of thigh	35.63	35.63	090	2	1	2	2	0
27246	A		Treatment of thigh	8.34	8.34	090	2	1	1	0	0
27248	A		Repair of thigh	21.76	21.76	090	2	1	2	1	0
27250	A		Treat hip dislocation	9.64	9.64	090	2	1	1	0	0
27252	A		Treat hip dislocation	14.00	14.00	090	2	1	1	0	0
27253	A		Repair of hip	25.59	25.59	090	2	1	2	1	0
27254	A		Repair of hip	30.84	30.84	090	2	1	2	1	0
27256	A		Treatment of hip	5.73	5.73	010	2	1	0	0	0
27257	A		Treatment of hip	9.60	9.60	010	2	1	0	0	0
27258	A		Repair of hip	28.51	28.51	090	2	1	2	1	0
27259	A		Repair of hip	37.73	37.73	090	2	1	2	0	0
27265	A		Treatment of hip	8.22	8.22	090	2	1	1	0	0
27266	A		Treatment of hip	11.49	11.49	090	2	1	1	0	0

(71) Pelvis and hip joint, manipulation:

27275	A		Manipulation of hip	4.04	4.04	010	2	0	1	0	0
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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(72) Pelvis and hip joint, arthrodesis:											
27280	A	Fusion of sacroiliac		22.85	22.85	090	2	1	2	1	0
27282	A	Fusion of pubis		19.93	19.93	090	2	0	2	1	0
27284	A	Fusion of hip joint		30.54	30.54	090	2	1	2	1	0
27286	A	Fusion of hip joint		31.17	31.17	090	2	1	2	1	0
(73) Pelvis and hip joint, amputation:											
27290	A	Amputation of limb		48.26	48.26	090	2	0	2	1	0
27295	A	Amputation of limb		34.53	34.53	090	2	0	2	1	0
(74) Pelvis and hip joint, other procedures:											
27299	C	Pelvis/hip joint surgery		0.00	0.00	YYY	2	1	2	1	1
(75) Femur and knee joint, incision:											
27301	A	Drain thigh/knee		8.49	8.49	090	2	1	1	0	0
27303	A	Drainage of bone		13.71	13.71	090	2	1	2	1	0
27305	A	Incise thigh tendon		9.42	9.42	090	2	1	2	1	0
27306	A	Incision of thigh		6.29	6.29	090	2	1	2	0	0
27307	A	Incision of thigh		8.44	8.44	090	2	1	0	1	0
27310	A	Exploration of knee		18.52	18.52	090	2	1	2	1	0
27315	A	Partial removal		12.05	12.05	090	2	1	2	0	0
27320	A	Partial removal		11.13	11.13	090	2	1	2	1	0
(76) Femur and knee joint, excision:											
27323	A	Biopsy thigh tissue		3.02	2.58	010	2	1	1	0	0
27324	A	Biopsy thigh tissue		7.24	7.24	090	2	1	1	0	0
27327	A	Removal of thigh		6.49	6.49	090	2	1	1	0	0
27328	A	Removal of thigh		9.39	9.39	090	2	1	1	0	0
27329	A	Remove tumor		25.31	25.31	090	2	1	2	1	0
27330	A	Biopsy knee joint		10.45	10.45	090	2	1	1	1	0
27331	A	Explore/treat knee		12.41	12.41	090	2	1	2	1	0
27332	A	Removal of knee		17.25	17.25	090	2	1	2	1	0
27333	A	Removal of knee		15.77	15.77	090	2	1	2	1	0
27334	A	Remove knee joint		18.12	18.12	090	2	1	2	1	0
27335	A	Remove knee joint		20.83	20.83	090	2	1	2	1	0
27340	A	Removal of knee		7.86	7.86	090	2	1	1	0	0
27345	A	Removal of knee		11.34	11.34	090	2	1	2	1	0
27350	A	Removal of knee		16.95	16.95	090	2	1	2	1	0
27355	A	Remove femur lesion		14.94	14.94	090	2	1	2	1	0
27356	A	Remove femur lesion		17.27	17.27	090	2	1	2	1	0
27357	A	Remove femur lesion		18.85	18.85	090	2	1	2	1	0
27358	A	Remove femur lesion		9.10	9.10	ZZZ	0	1	2	0	0
27360	A	Partial removal		18.57	18.57	090	2	1	2	1	0
27365	A	Extensive leg surgery		29.58	29.58	090	2	1	2	1	0
(77) Femur and knee joint, introduction or removal:											
27370	A	Injection for knee		1.48	1.48	000	2	1	1	0	0
27372	A	Removal of foreign body		8.20	8.20	090	2	1	0	0	0

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(78) Femur and knee joint, repair, revision, and/or reconstruction:										
27380	A	Repair of kneecap	14.82	14.82	090	2	1	2	1	0
27381	A	Repair/graft kneecap	21.28	21.28	090	2	1	2	1	0
27385	A	Repair of thigh	16.08	16.08	090	2	1	2	1	0
27386	A	Repair/graft thigh	21.92	21.92	090	2	1	2	1	0
27390	A	Incision of thigh	9.44	9.44	090	2	0	2	0	0
27391	A	Incision of thigh	12.27	12.27	090	2	0	0	1	0
27392	A	Incision of thigh	16.47	16.47	090	2	2	2	1	0
27393	A	Lengthening of hamstring	11.79	11.79	090	2	0	2	1	0
27394	A	Lengthening of hamstring	13.77	13.77	090	2	0	2	0	0
27395	A	Lengthening of hamstring	21.68	21.68	090	2	2	2	1	0
27396	A	Transplant of tendon	14.57	14.57	090	2	0	2	1	0
27397	A	Transplants of tendons	19.62	19.62	090	2	0	2	0	0
27400	A	Revise thigh muscle	16.49	16.49	090	2	1	2	1	0
27403	A	Repair of knee	16.85	16.85	090	2	1	2	1	0
27405	A	Repair of knee	17.97	17.97	090	2	1	2	1	0
27407	A	Repair of knee	18.68	18.68	090	2	1	2	1	0
27409	A	Repair of knee	26.79	26.79	090	2	1	2	1	0
27418	A	Repair degeneration	22.40	22.40	090	2	1	2	1	0
27420	A	Revision of patella	20.33	20.33	090	2	1	2	1	0
27422	A	Revision of patella	20.28	20.28	090	2	1	2	1	0
27424	A	Revision/removal	20.37	20.37	090	2	1	2	1	0
27425	A	Lateral retinacular	10.88	10.88	090	2	1	1	1	0
27427	A	Reconstruction	19.69	19.69	090	2	1	2	1	0
27428	A	Reconstruction	27.41	27.41	090	2	1	2	1	0
27429	A	Reconstruction	25.98	25.98	090	2	1	2	1	0
27430	A	Revision of thigh	18.65	18.65	090	2	1	2	1	0
27435	A	Incision of knee	16.03	16.03	090	2	1	2	1	0
27437	A	Revise kneecap	17.53	17.53	090	2	1	1	1	0
27438	A	Revise kneecap	23.30	23.30	090	2	1	2	1	0
27440	A	Revision of knee	21.71	21.71	090	2	1	2	1	0
27441	A	Revision of knee	19.48	19.48	090	2	1	2	1	0
27442	A	Revision of knee	25.11	25.11	090	2	1	2	1	0
27443	A	Revision of knee	23.37	23.37	090	2	1	2	1	0
27445	A	Revision of knee	37.16	37.16	090	2	1	2	1	0
27446	A	Revision of knee	33.34	33.34	090	2	1	2	1	0
27447	A	Total knee replacement	45.05	45.05	090	2	1	2	1	0
27448	A	Incision of thigh	22.95	22.95	090	2	1	2	1	0
27450	A	Incision of thigh	28.33	28.33	090	2	1	2	1	0
27454	A	Realignment	32.66	32.66	090	2	1	2	1	0
27455	A	Realignment	24.31	24.31	090	2	1	2	1	0
27457	A	Realignment	26.24	26.24	090	2	1	2	1	0
27465	A	Shortening femur	25.52	25.52	090	2	1	2	1	0
27466	A	Lengthening femur	29.05	29.05	090	2	1	2	1	0
27468	A	Shorten/lengthen	35.00	35.00	090	2	1	2	1	0
27470	A	Repair of thigh	32.12	32.12	090	2	1	2	1	0
27472	A	Repair/graft	36.66	36.66	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
27475	A	Surgery		16.02	16.02	090	2	1	1	1	0
27477	A	Surgery		20.83	20.83	090	2	1	1	1	0
27479	A	Surgery		23.90	23.90	090	2	1	2	0	0
27485	A	Surgery		16.38	16.38	090	2	1	1	0	0
27486	A	Revise knee joint		40.32	40.32	090	2	1	2	1	0
27487	A	Revise knee joint		53.05	53.05	090	2	1	2	1	0
27488	A	Removal of knee		31.32	31.32	090	2	1	2	1	0
27495	A	Reinforce thigh		32.20	32.20	090	2	1	2	1	0
27496	A	Decompression		10.33	10.33	090	2	1	1	2	0
27497	A	Decompression		12.37	12.37	090	2	1	0	2	0
27498	A	Decompression		13.93	13.93	090	2	1	2	2	0
27499	A	Decompression		15.86	15.86	090	2	1	2	2	0

(79) Femur and knee joint, fracture and/or dislocation:

27500	A	Treatment of thigh		11.05	11.05	090	2	1	1	0	0
27501	A	Treatment of thigh		11.05	11.05	090	2	1	0	0	0
27502	A	Treatment of thigh		17.68	17.68	090	2	1	1	0	0
27503	A	Treatment of thigh		17.68	17.68	090	2	1	0	0	0
27506	A	Repair of thigh		32.73	32.73	090	2	1	2	1	0
27507	A	Treatment of thigh		28.98	28.98	090	2	1	2	2	0
27508	A	Treatment of thigh		9.73	9.73	090	2	1	1	0	0
27509	A	Treatment of thigh		11.43	11.43	090	2	1	0	0	0
27510	A	Treatment of thigh		15.48	15.48	090	2	1	1	0	0
27511	A	Treatment of thigh		28.28	28.28	090	2	1	2	2	0
27513	A	Treatment of thigh		33.15	33.15	090	2	1	2	2	0
27514	A	Repair of thigh		32.32	32.32	090	2	1	2	1	0
27516	A	Repair of thigh		9.92	9.92	090	2	1	1	0	0
27517	A	Repair of thigh		16.23	16.23	090	2	1	0	0	0
27519	A	Repair of thigh		27.01	27.01	090	2	1	2	1	0
27520	A	Treat kneecap fracture		5.78	4.31	090	2	1	1	0	0
27524	A	Repair of kneecap		19.98	19.98	090	2	1	2	1	0
27530	A	Treatment of kneecap		7.00	7.00	090	2	1	1	0	0
27532	A	Treatment of kneecap		12.62	12.62	090	2	1	1	0	0
27535	A	Treatment of kneecap		22.77	22.77	090	2	1	2	2	0
27536	A	Repair of kneecap		26.54	26.54	090	2	1	2	1	0
27538	A	Treat knee fracture		7.96	7.96	090	2	1	0	0	0
27540	A	Repair of knee		23.43	23.43	090	2	1	2	1	0
27550	A	Treat knee dislocation		7.91	7.91	090	2	1	0	0	0
27552	A	Treat knee dislocation		10.78	10.78	090	2	1	0	0	0
27556	A	Repair of knee		26.21	26.21	090	2	1	2	1	0
27557	A	Repair of knee		30.67	30.67	090	2	1	2	1	0
27558	A	Repair of knee		31.53	31.53	090	2	1	2	2	0
27560	A	Treat kneecap		4.94	4.94	090	2	1	1	0	0
27562	A	Treat kneecap		10.68	10.68	090	2	1	0	0	0
27566	A	Repair kneecap		22.24	22.24	090	2	1	2	1	0

(80) Femur and knee joint, manipulation:

27570	A	Fixation of knee		3.40	3.40	010	2	0	1	0	0
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(81) Femur and knee joint, arthrodesis:

27580	A	Fusion of knee		34.16	34.16	090	2	1	2	1	0
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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(82) Femur and knee joint, amputation:											
27590	A	Amputate leg at thigh		20.71	20.71	090	2	1	2	1	0
27591	A	Amputate leg at thigh		24.04	24.04	090	2	1	2	1	0
27592	A	Amputate leg at thigh		17.82	17.82	090	2	1	2	1	0
27594	A	Amputation follow-up		10.18	10.18	090	2	1	1	0	0
27596	A	Amputation follow-up		17.52	17.52	090	2	1	1	1	0
27598	A	Amputate lower leg		20.24	20.24	090	2	1	2	1	0
(83) Femur and knee joint, other procedures:											
27599	C	Leg surgery		0.00	0.00	YYY	2	1	2	1	1
(84) Leg and ankle joint, incision:											
27600	A	Decompression of leg		8.76	8.76	090	2	1	1	1	0
27601	A	Decompression of leg		8.75	8.75	090	2	1	1	0	0
27602	A	Decompression of leg		11.01	11.01	090	2	1	2	1	0
27603	A	Drain lower leg		7.01	7.01	090	2	1	1	0	0
27604	A	Drain lower leg		5.12	4.63	090	2	1	0	0	0
27605	A	Incision of tendon		3.82	3.82	010	2	1	0	0	0
27606	A	Incision of tendon		6.00	6.00	010	2	1	1	1	0
27607	A	Treat lower leg		13.58	13.58	090	2	1	1	0	0
27610	A	Explore/treat ankle		15.37	15.37	090	2	1	1	0	0
27612	A	Exploration of ankle		15.07	15.07	090	2	1	2	1	0
(85) Leg and ankle joint, excision:											
27613	A	Biopsy lower leg		2.67	2.35	010	2	1	1	0	0
27614	A	Biopsy lower leg		7.53	7.53	090	2	1	1	0	0
27615	A	Remove tumor, leg		20.13	20.13	090	2	1	0	1	0
27618	A	Remove lower leg		6.83	6.83	090	2	1	1	0	0
27619	A	Remove lower leg		11.98	11.98	090	2	1	1	0	0
27620	A	Explore, treat		11.78	11.78	090	2	1	2	1	0
27625	A	Remove ankle joint		16.65	16.65	090	2	1	2	1	0
27626	A	Remove ankle joint		18.24	18.24	090	2	1	2	0	0
27630	A	Removal of tendon		7.61	7.61	090	2	1	1	0	0
27635	A	Remove lower leg		15.53	15.53	090	2	1	1	1	0
27637	A	Remove/graft leg		17.90	17.90	090	2	1	2	1	0
27638	A	Remove/graft leg		19.27	19.27	090	2	1	2	1	0
27640	A	Partial removal		20.66	20.66	090	2	1	1	1	0
27641	A	Partial removal		15.93	15.93	090	2	1	1	1	0
27645	A	Extensive lower leg		25.20	25.20	090	2	1	2	1	0
27646	A	Extensive lower leg		22.82	22.82	090	2	1	2	1	0
27647	A	Extensive ankle		21.47	21.47	090	2	1	2	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(86) Leg and ankle joint, introduction or removal:											
27648	A		Injection for ankle	1.40	1.40	000	2	1	0	0	0
(87) Leg and ankle joint, repair, revision, and/or reconstruction:											
27650	A		Repair Achilles	18.25	18.25	090	2	1	2	1	0
27652	A		Repair/graft Achilles	20.29	20.29	090	2	1	1	1	0
27654	A		Repair Achilles	20.56	20.56	090	2	1	2	1	0
27656	A		Repair leg	7.52	7.52	090	2	1	2	0	0
27658	A		Repair of leg tendon	8.73	8.73	090	2	0	2	1	0
27659	A		Repair of leg tendon	12.33	12.33	090	2	0	2	1	0
27664	A		Repair of leg tendon	7.75	7.75	090	2	0	0	0	0
27665	A		Repair of leg tendon	10.10	10.10	090	2	0	2	1	0
27675	A		Repair lower leg	13.22	13.22	090	2	1	2	1	0
27676	A		Repair lower leg	15.58	15.58	090	2	1	2	0	0
27680	A		Release of lower leg	9.53	9.53	090	2	0	1	1	0
27681	A		Release of lower leg	12.43	12.43	090	2	0	1	1	0
27685	A		Revision of lower leg	9.83	9.83	090	2	0	2	1	0
27686	A		Revise lower leg	13.61	13.61	090	2	0	1	1	0
27687	A		Revision of calf	11.35	11.35	090	2	1	2	1	0
27690	A		Revise lower leg	14.90	14.90	090	2	1	2	1	0
27691	A		Revise lower leg	17.34	17.34	090	2	1	2	1	0
27692	A		Revise additional	3.82	3.82	ZZZ	0	1	2	1	0
27695	A		Repair of ankle	13.55	13.55	090	2	1	1	1	0
27696	A		Repair of ankle	14.97	14.97	090	2	1	1	1	0
27698	A		Repair of ankle	19.47	19.47	090	2	1	2	1	0
27700	A		Revision of ankle	19.14	19.14	090	2	1	2	1	0
27702	A		Reconstruct ankle	29.14	29.14	090	2	1	2	1	0
27703	A		Reconstruction	29.00	29.00	090	2	1	2	0	0
27704	A		Removal of ankle	13.10	13.10	090	2	1	2	1	0
27705	A		Incision of tibia	20.77	20.77	090	2	1	2	1	0
27707	A		Incision of fibula	8.99	8.99	090	2	1	1	1	0
27709	A		Incision of tibia	20.79	20.79	090	2	1	2	1	0
27712	A		Realignment of rod	24.45	24.45	090	2	1	2	1	0
27715	A		Revision of lower leg	26.28	26.28	090	2	1	2	1	0
27720	A		Repair of tibia	24.47	24.47	090	2	1	2	1	0
27722	A		Repair/graft	21.78	21.78	090	2	1	2	1	0
27724	A		Repair/graft	30.16	30.16	090	2	1	2	1	0
27725	A		Repair of lower leg	25.07	25.07	090	2	1	2	1	0
27727	A		Repair of lower leg	22.79	22.79	090	2	1	2	1	0
27730	A		Repair of tibia	10.66	10.66	090	2	1	1	1	0
27732	A		Repair of fibula	9.94	9.94	090	2	1	1	0	0
27734	A		Repair lower leg	15.66	15.66	090	2	1	1	0	0
27740	A		Repair of leg	17.27	17.27	090	2	1	2	0	0
27742	A		Repair of leg	19.16	19.16	090	2	1	2	1	0
27745	A		Reinforce tibia	18.57	18.57	090	2	1	2	1	0
(88) Leg and ankle joint, fracture and/or dislocation:											
27750	A		Treatment of tibia	6.50	6.50	090	2	1	1	0	0
27752	A		Treatment of tibia	10.66	10.66	090	2	1	1	0	0
27756	A		Repair of tibia	14.30	14.30	090	2	1	2	1	0
27758	A		Repair of tibia	24.22	24.22	090	2	1	2	1	0
27759	A		Repair of tibia	26.99	26.99	090	2	1	2	2	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
27760	A		Treatment of ankle	5.43	4.18	090	2	1	1	0	0
27762	A		Treatment of ankle	8.29	8.29	090	2	1	1	0	0
27766	A		Repair of ankle	15.89	15.89	090	2	1	1	1	0
27780	A		Treatment of fibula	4.45	3.50	090	2	1	1	0	0
27781	A		Treatment of fibula	7.44	7.44	090	2	1	1	0	0
27784	A		Repair of fibula	12.33	12.33	090	2	1	1	1	0
27786	A		Treatment of ankle	5.22	4.00	090	2	1	1	0	0
27788	A		Treatment of ankle	7.47	5.89	090	2	1	1	0	0
27792	A		Repair of ankle	14.73	14.73	090	2	1	1	1	0
27808	A		Treatment of ankle	5.48	5.48	090	2	1	1	0	0
27810	A		Treatment of ankle	9.98	9.98	090	2	1	1	0	0
27814	A		Repair of ankle	20.24	20.24	090	2	1	2	1	0
27816	A		Treatment of ankle	6.28	6.00	090	2	1	1	0	0
27818	A		Treatment of ankle	11.42	11.42	090	2	1	1	0	0
27822	A		Repair of ankle	19.16	19.16	090	2	1	2	1	0
27823	A		Repair of ankle	24.20	24.20	090	2	1	2	1	0
27824	A		Treat lower leg	6.28	6.00	090	2	1	1	0	0
27825	A		Treat lower leg	12.49	12.49	090	2	1	0	0	0
27826	A		Treat lower leg	17.86	17.86	090	2	1	2	2	0
27827	A		Treat lower leg	25.11	25.11	090	2	1	2	2	0
27828	A		Treat lower leg	28.22	28.22	090	2	1	2	2	0
27829	A		Treat lower leg	11.57	11.57	090	2	1	2	2	0
27830	A		Treat lower leg	6.83	6.83	090	2	1	0	0	0
27831	A		Treat lower leg	8.31	8.31	090	2	1	0	0	0
27832	A		Repair lower leg	11.89	11.89	090	2	1	2	1	0
27840	A		Treat ankle dislocation	6.08	6.08	090	2	1	1	0	0
27842	A		Treat ankle dislocation	7.97	7.97	090	2	1	1	0	0
27846	A		Repair ankle dislocation	17.94	17.94	090	2	1	2	1	0
27848	A		Repair ankle dislocation	18.97	18.97	090	2	1	2	1	0

(89) Leg and ankle joint, manipulation:

27860	A		Fixation of ankle	3.59	3.59	010	2	0	0	0	0
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(90) Leg and ankle joint, arthrodesis:

27870	A		Fusion of ankle	26.74	26.74	090	2	1	2	1	0
27871	A		Fusion of tibiofibula	16.52	16.52	090	2	1	2	1	0

(91) Leg and ankle joint, amputation:

27880	A		Amputation of leg	19.72	19.72	090	2	1	2	1	0
27881	A		Amputation of leg	22.69	22.69	090	2	1	2	1	0
27882	A		Amputation of leg	16.01	16.01	090	2	1	0	1	0
27884	A		Amputation follow-up	11.04	11.04	090	2	1	1	0	0
27886	A		Amputation follow-up	16.13	16.13	090	2	1	1	1	0
27888	A		Amputation of fibula	18.86	18.86	090	2	1	2	1	0
27889	A		Amputation of fibula	18.06	18.06	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(92) Leg and ankle joint, other procedures:											
27892	A	Decompression of leg		10.34	10.34	090	2	1	0	2	0
27893	A	Decompression of leg		10.31	10.31	090	2	1	0	0	0
27894	A	Decompression of leg		13.86	13.86	090	2	1	2	2	0
27899	C	Leg/ankle surgery		0.00	0.00	YYY	2	1	0	1	1
(93) Foot and toes, incision:											
28001	A	Drainage of bursa		3.01	2.76	010	2	0	1	0	0
28002	A	Treatment of foot		6.55	6.55	010	2	0	1	0	0
28003	A	Treatment of foot		11.34	9.65	090	2	0	1	0	0
28005	A	Treat foot bone		12.16	12.16	090	2	0	1	0	0
28008	A	Incision of foot		6.79	6.79	090	2	0	1	0	0
28010	A	Incision of toe		6.26	4.51	090	2	0	1	0	0
28011	A	Incision of toe		5.57	4.72	090	2	0	1	0	0
28020	A	Exploration		9.11	9.11	090	2	0	1	1	0
28022	A	Exploration		7.06	5.73	090	2	0	1	0	0
28024	A	Exploration		6.42	5.26	090	2	0	1	0	0
28030	A	Removal of foot		9.61	9.61	090	2	0	0	0	0
28035	A	Decompression		11.09	10.53	090	2	0	1	1	0
(94) Foot and toes, excision:											
28043	A	Excision of foot		5.00	5.00	090	2	1	1	0	0
28045	A	Excision of foot		8.39	8.39	090	2	1	0	0	0
28046	A	Resection of tumor		14.85	14.85	090	2	1	1	1	0
28050	A	Biopsy of foot		7.86	7.86	090	2	1	1	1	0
28052	A	Biopsy of foot		7.50	5.66	090	2	1	1	1	0
28054	A	Biopsy of toe joint		5.45	5.45	090	2	1	0	0	0
28060	A	Partial removal		9.12	9.12	090	2	1	1	0	0
28062	A	Removal of foot		13.21	13.21	090	2	0	1	1	0
28070	A	Removal of foot		9.22	9.22	090	2	0	1	0	0
28072	A	Removal of foot		7.49	7.49	090	2	0	1	0	0
28080	A	Removal of foot		7.43	7.43	090	2	0	0	0	0
28086	A	Excise foot tendon		7.61	7.61	090	2	1	2	1	0
28088	A	Excise foot tendon		7.22	7.22	090	2	1	0	0	0
28090	A	Removal of foot		7.08	7.08	090	2	1	1	0	0
28092	A	Removal of toe		5.40	5.40	090	2	0	1	0	0
28100	A	Removal of ankle		9.87	9.87	090	2	1	2	1	0
28102	A	Remove/graft foot		14.09	14.09	090	2	1	2	0	0
28103	A	Remove/graft foot		11.70	11.70	090	2	1	2	0	0
28104	A	Removal of foot		9.10	9.10	090	2	0	2	1	0
28106	A	Remove/graft foot		13.14	13.14	090	2	0	2	1	0
28107	A	Remove/graft foot		10.01	10.01	090	2	0	2	0	0
28108	A	Removal of toe		8.04	6.01	090	2	0	1	0	0
28110	A	Partial removal of toe		7.28	7.28	090	2	1	1	1	0
28111	A	Partial removal of toe		9.78	9.78	090	2	1	1	1	0
28112	A	Partial removal of toe		8.15	8.15	090	2	1	1	1	0
28113	A	Partial removal of toe		8.90	8.90	090	2	1	0	0	0
28114	A	Removal of metatarsal		18.53	18.53	090	2	1	2	1	0
28116	A	Revision of foot		12.64	12.64	090	2	1	1	0	0
28118	A	Removal of heel		11.29	11.29	090	2	1	2	1	0
28119	A	Removal of heel		10.46	10.46	090	2	1	1	1	0
28120	A	Partial removal of bone		10.14	10.14	090	2	1	1	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
28122	A		Partial removal	11.24	11.24	090	2	1	2	1	0
28124	A		Partial removal	8.54	6.56	090	2	1	1	0	0
28126	A		Partial removal	7.24	5.32	090	2	0	1	0	0
28130	A		Removal of ankle	14.64	14.64	090	2	1	2	1	0
28140	A		Removal of metatarsal	11.38	11.38	090	2	0	1	1	0
28150	A		Removal of toe	7.10	7.10	090	2	0	1	0	0
28153	A		Partial removal	7.38	5.45	090	2	0	1	0	0
28160	A		Partial removal	7.58	5.59	090	2	0	1	0	0
28171	A		Extensive foot	16.92	16.92	090	2	0	2	0	0
28173	A		Extensive foot	13.94	13.94	090	2	0	1	1	0
28175	A		Extensive foot	11.01	11.01	090	2	0	1	1	0

(95) Foot and toes, introduction or removal:

28190	A		Removal of foot	2.31	2.06	010	2	1	1	0	0
28192	A		Removal of foot	6.23	6.23	090	2	1	1	0	0
28193	A		Removal of foot	7.67	7.67	090	2	1	1	0	0

(96) Foot and toes, repair, revision, and/or reconstruction:

28200	A		Repair of foot	9.34	9.34	090	2	0	1	1	0
28202	A		Repair/graft	12.26	12.26	090	2	0	2	1	0
28208	A		Repair of foot	6.84	6.84	090	2	0	1	1	0
28210	A		Repair/graft	11.50	11.50	090	2	0	2	0	0
28220	A		Release of foot	8.09	6.22	090	2	0	1	0	0
28222	A		Release of foot	11.63	8.54	090	2	0	1	0	0
28225	A		Release of foot	5.75	5.75	090	2	0	1	1	0
28226	A		Release of foot	7.60	7.60	090	2	0	1	0	0
28230	A		Incision of foot	6.32	5.14	090	2	0	1	0	0
28232	A		Incision of toe	4.71	3.93	090	2	0	1	0	0
28234	A		Incision of foot	4.61	3.88	090	2	0	1	0	0
28238	A		Revision of foot	14.47	14.47	090	2	1	2	1	0
28240	A		Release of big toe	6.14	6.14	090	2	1	1	0	0
28250	A		Revision of foot	9.96	9.96	090	2	1	2	1	0
28260	A		Release of midfoot	11.77	11.77	090	2	1	2	1	0
28261	A		Revision of foot	16.68	16.68	090	2	1	0	0	0
28262	A		Revision of foot	26.67	26.67	090	2	1	2	1	0
28264	A		Release of midfoot	19.28	19.28	090	2	1	2	0	0
28270	A		Release of foot	6.99	5.72	090	2	1	1	0	0
28272	A		Release of toe	5.52	4.53	090	2	1	1	0	0
28280	A		Fusion of toes	7.02	7.02	090	2	1	0	0	0
28285	A		Repair of hammertoe	8.60	8.60	090	2	0	1	1	0
28286	A		Repair of hammertoe	7.81	7.81	090	2	0	1	0	0
28288	A		Partial removal	8.16	8.16	090	2	0	1	0	0
28290	A		Correction of bunion	10.66	10.66	090	2	1	1	0	0
28292	A		Correction of bunion	13.61	13.61	090	2	1	2	1	0
28293	A		Correction of bunion	18.07	18.07	090	2	1	2	1	0
28294	A		Correction of bunion	17.09	17.09	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
28296	A		Correction of bunion	17.38	17.38	090	2	1	2	1	0
28297	A		Correction of bunion	17.63	17.63	090	2	1	2	1	0
28298	A		Correction of bunion	16.08	16.08	090	2	1	2	1	0
28299	A		Correction of bunion	18.09	18.09	090	2	1	2	1	0
28300	A		Incision of heel	15.39	15.39	090	2	1	2	1	0
28302	A		Incision of ankle	17.87	17.87	090	2	1	2	1	0
28304	A		Incision of midfoot	14.92	14.92	090	2	0	2	1	0
28305	A		Incise/graft midfoot	19.61	19.61	090	2	0	2	1	0
28306	A		Incision of metatarsal	9.99	9.99	090	2	0	2	1	0
28307	A		Incision of metatarsal	11.84	11.84	090	2	0	0	0	0
28308	A		Incision of metatarsal	10.59	10.59	090	2	0	2	1	0
28309	A		Incision of metatarsal	18.79	18.79	090	2	0	0	0	0
28310	A		Revision of big toe	9.19	9.19	090	2	0	1	1	0
28312	A		Revision of toe	8.78	8.78	090	2	0	1	1	0
28313	A		Repair deformity	7.20	5.96	090	2	0	1	0	0
28315	A		Removal of toe	8.73	8.73	090	2	1	1	1	0
28320	A		Repair of foot	17.30	17.30	090	2	0	2	1	0
28322	A		Repair of metatarsal	12.37	12.37	090	2	0	2	1	0
28340	A		Resect enlarged toe	12.96	12.96	090	2	0	1	0	0
28341	A		Resect enlarged toe	15.56	15.56	090	2	0	1	0	0
28344	A		Repair extra toe	7.77	7.77	090	2	0	1	1	0
28345	A		Repair webbed toes	10.94	10.94	090	2	0	0	0	0
28360	A		Reconstruct cleft foot	24.69	24.69	090	2	0	2	0	0

(97) Foot and toes, fracture and/or dislocation:

28400	A		Treatment of heel	4.66	3.42	090	2	1	1	0	0
28405	A		Treatment of heel	8.24	8.24	090	2	1	0	0	0
28406	A		Treatment of heel	12.12	12.12	090	2	1	0	0	0
28415	A		Repair of heel	23.98	23.98	090	2	1	2	1	0
28420	A		Repair/graft heel	26.52	26.52	090	2	1	2	1	0
28430	A		Treatment of ankle	4.46	3.27	090	2	1	1	0	0
28435	A		Treatment of ankle	6.61	6.61	090	2	1	0	0	0
28436	A		Treatment of ankle	8.70	8.70	090	2	1	1	0	0
28445	A		Repair of ankle	17.74	17.74	090	2	1	2	1	0
28450	A		Treat midfoot fracture	3.67	2.77	090	2	0	1	0	0
28455	A		Treat midfoot fracture	5.45	4.22	090	2	0	0	0	0
28456	A		Repair midfoot	4.84	4.84	090	2	0	1	0	0
28465	A		Repair midfoot	12.16	12.16	090	2	0	1	0	0
28470	A		Treat metatarsal	3.67	2.80	090	2	0	1	0	0
28475	A		Treat metatarsal	5.12	3.99	090	2	0	1	0	0
28476	A		Repair metatarsal	6.57	6.57	090	2	0	0	0	0
28485	A		Repair metatarsal	10.04	10.04	090	2	0	1	1	0
28490	A		Treat big toe fracture	1.91	1.48	090	2	0	1	0	0
28495	A		Treat big toe fracture	2.59	2.05	090	2	0	1	0	0
28496	A		Repair big toe	4.29	4.29	090	2	0	1	0	0
28505	A		Repair big toe	6.58	6.58	090	2	0	1	0	0
28510	A		Treatment of toe	1.90	1.47	090	2	0	1	0	0
28515	A		Treatment of toe	2.47	1.93	090	2	0	1	0	0
28525	A		Repair of toe fracture	5.16	5.16	090	2	0	0	0	0
28530	A		Treat sesamoid fracture	1.98	1.50	090	2	0	0	0	0
28531	A		Treat sesamoid fracture	4.15	4.15	090	2	0	1	2	0
28540	A		Treat foot dislocation	2.46	2.17	090	2	0	0	0	0
28545	A		Treat foot dislocation	3.57	3.57	090	2	0	0	0	0
28546	A		Treat foot dislocation	5.80	5.80	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
28555	A	Repair foot dislocation		11.51	11.51	090	2	0	2	1	0
28570	A	Treat foot dislocation		3.14	2.37	090	2	0	0	0	0
28575	A	Treat foot dislocation		5.91	5.91	090	2	0	0	0	0
28576	A	Treat foot dislocation		6.69	6.69	090	2	0	0	0	0
28585	A	Repair foot dislocation		12.35	12.35	090	2	0	2	1	0
28600	A	Treat foot dislocation		2.42	2.09	090	2	0	0	0	0
28605	A	Treat foot dislocation		4.83	4.83	090	2	0	0	0	0
28606	A	Treat foot dislocation		8.12	8.12	090	2	0	1	0	0
28615	A	Repair foot dislocation		12.27	12.27	090	2	0	2	1	0
28630	A	Treat toe dislocation		2.60	2.10	010	2	0	0	0	0
28635	A	Treat toe dislocation		3.23	2.53	010	2	0	0	0	0
28636	A	Treat toe dislocation		5.22	5.22	010	2	0	1	2	0
28645	A	Repair toe dislocation		7.17	7.17	090	2	0	1	1	0
28660	A	Treat toe dislocation		1.76	1.76	010	2	0	1	0	0
28665	A	Treat toe dislocation		2.75	2.28	010	2	0	0	0	0
28666	A	Treat toe dislocation		4.99	4.99	010	2	0	1	2	0
28675	A	Repair toe dislocation		5.77	5.77	090	2	0	1	0	0

(98) Foot and toes, arthrodesis:

28705	A	Fusion of foot		29.70	29.70	090	2	0	2	1	0
28715	A	Fusion of foot		24.84	24.84	090	2	0	2	1	0
28725	A	Fusion of foot		20.45	20.45	090	2	0	2	1	0
28730	A	Fusion of foot		19.20	19.20	090	2	0	2	1	0
28735	A	Fusion of foot		20.03	20.03	090	2	0	2	1	0
28737	A	Revision of foot		17.94	17.94	090	2	0	2	1	0
28740	A	Fusion of foot		12.64	12.64	090	2	0	2	1	0
28750	A	Fusion of big toe		12.22	12.22	090	2	1	0	0	0
28755	A	Fusion of big toe		8.12	8.12	090	2	1	1	1	0
28760	A	Fusion of big toe		12.61	12.61	090	2	1	2	1	0

(99) Foot and toes, amputation:

28800	A	Amputation of midtarsal		14.53	14.53	090	2	1	2	1	0
28805	A	Amputation		14.39	14.39	090	2	1	0	0	0
28810	A	Amputation of toe		9.83	9.83	090	2	0	0	0	0
28820	A	Amputation of toe		6.75	6.75	090	2	0	1	0	0
28825	A	Partial amputation		5.80	5.80	090	2	0	1	0	0

(100) Foot and toes, other procedures:

28899	C	Foot/toes surgery		0.00	0.00	YYY	2	0	0	1	1
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(101) Casts and strapping, body and upper extremity:

29000	A	Application of casts		3.95	3.95	000	2	0	0	0	0
29010	A	Application of casts		4.31	4.25	000	2	0	0	0	0
29015	A	Application of casts		4.62	3.50	000	2	0	0	0	0

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(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
29020	A		Application of casts	3.80	2.92	000	2	0	0	0	0
29025	A		Application of casts	2.98	2.62	000	2	0	0	0	0
29035	A		Application of casts	3.67	2.73	000	2	0	0	0	0
29040	A		Application of casts	4.13	4.13	000	2	0	0	0	0
29044	A		Application of casts	4.13	4.13	000	2	0	0	0	0
29046	A		Application of casts	4.54	4.54	000	2	0	0	0	0
29049	A		Application of casts	1.25	1.04	000	2	0	0	0	0
29055	A		Application of casts	2.87	2.87	000	2	0	0	0	0
29058	A		Application of casts	1.87	1.87	000	2	0	0	0	0
29065	A		Application of casts	1.63	1.25	000	2	1	1	0	0
29075	A		Application of casts	1.34	1.05	000	2	1	1	0	0
29085	A		Apply hand/wrist	1.32	1.08	000	2	1	1	0	0
29105	A		Apply long arm	1.32	1.08	000	2	1	1	0	0
29125	A		Apply forearm splint	0.92	0.74	000	2	1	1	0	0
29126	A		Apply forearm splint	1.12	0.93	000	2	1	1	0	0
29130	A		Application of splint	0.63	0.55	000	2	1	1	0	0
29131	A		Application of splint	0.91	0.72	000	2	1	1	0	0
29200	A		Strapping	0.87	0.74	000	2	0	1	0	0
29220	A		Strapping of low back	0.98	0.79	000	2	0	1	0	0
29240	A		Strapping of shoulder	0.92	0.92	000	2	0	1	0	0
29260	A		Strapping of elbow	0.74	0.63	000	2	1	1	0	0
29280	A		Strapping of hand	0.68	0.58	000	2	1	1	0	0

(102) Casts and strapping, lower extremity:

29305	A		Application of cast	3.83	3.83	000	2	0	0	0	0
29325	A		Application of cast	4.13	4.13	000	2	0	0	0	0
29345	A		Application of cast	2.34	1.85	000	2	1	1	0	0
29355	A		Application of cast	2.55	2.01	000	2	1	1	0	0
29358	A		Apply long leg cast	3.00	2.24	000	2	1	1	0	0
29365	A		Application of cast	1.98	1.56	000	2	1	1	0	0
29405	A		Apply short leg cast	1.61	1.23	000	2	1	1	0	0
29425	A		Apply short leg cast	1.93	1.46	000	2	1	1	0	0
29435	A		Apply short leg cast	2.31	1.74	000	2	1	1	0	0
29440	A		Addition of walker	0.76	0.65	000	2	1	1	0	0
29445	A		Apply rigid leg cast	3.41	3.41	000	2	1	1	0	0
29450	A		Application of cast	1.32	1.14	000	2	1	1	0	0
29505	A		Application of cast	1.22	1.22	000	2	1	1	0	0
29515	A		Application of splint	1.15	0.92	000	2	1	1	0	0
29520	A		Strapping of hip	0.85	0.68	000	2	0	0	0	0
29530	A		Strapping of knee	0.88	0.88	000	2	0	1	0	0
29540	A		Strapping of ankle	0.77	0.62	000	2	0	1	0	0
29550	A		Strapping of toe	0.71	0.58	000	2	0	1	0	0
29580	A		Application of unna boot	1.30	0.92	000	2	1	1	0	0
29590	A		Application of splint	0.98	0.84	000	2	0	1	0	0

(103) Casts and strapping, removal or repair:

29700	A		Removal/revision	0.85	0.70	000	2	0	1	0	0
29705	A		Removal/revision	1.06	0.89	000	2	1	1	0	0
29710	A		Removal/revision	1.69	1.47	000	2	1	0	0	0
29715	A		Removal/revision	1.75	1.33	000	2	0	0	0	0
29720	A		Repair of body cast	0.86	0.75	000	2	0	1	0	0
29730	A		Windowing of cast	0.95	0.83	000	2	0	1	0	0
29740	A		Wedging of cast	1.42	1.23	000	2	0	1	0	0
29750	A		Wedging of clubfoot cast	1.67	1.42	000	2	1	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(104) Casts and strapping, other procedures:											
29799	C	Casts/strapping procedure		0.00	0.00	YYY	2	0	0	1	1
(105) Endoscopy/Arthroscopy:											
29800	A	Jaw arthroscopy		9.96	9.96	090	2	1	0	0	0
29804	A	Jaw arthroscopy		16.84	16.84	090	2	1	2	1	0
29815	A	Shoulder arthroscopy		10.44	10.44	090	2	1	1	1	0
29819	A	Shoulder arthroscopy		15.97	15.97	090	3	1	1	1	0
29820	A	Shoulder arthroscopy		14.89	14.89	090	3	1	2	1	0
29821	A	Shoulder arthroscopy		16.38	16.38	090	3	1	2	1	0
29822	A	Shoulder arthroscopy		15.60	15.60	090	3	1	2	0	0
29823	A	Shoulder arthroscopy		17.38	17.38	090	3	1	2	1	0
29825	A	Shoulder arthroscopy		16.14	16.14	090	3	1	2	1	0
29826	A	Shoulder arthroscopy		18.99	18.99	090	3	1	2	1	0
29830	A	Elbow arthroscopy		10.83	10.83	090	2	1	1	0	0
29834	A	Elbow arthroscopy		11.87	11.87	090	3	1	2	1	0
29835	A	Elbow arthroscopy		12.25	12.25	090	3	1	2	1	0
29836	A	Elbow arthroscopy		14.28	14.28	090	3	1	2	1	0
29837	A	Elbow arthroscopy		13.00	13.00	090	3	1	2	1	0
29838	A	Elbow arthroscopy		14.44	14.44	090	3	1	0	0	0
29840	A	Wrist arthroscopy		8.51	8.51	090	2	1	0	0	0
29843	A	Wrist arthroscopy		11.37	11.37	090	3	1	2	1	0
29844	A	Wrist arthroscopy		11.71	11.71	090	3	1	2	0	0
29845	A	Wrist arthroscopy		14.22	14.22	090	3	1	2	1	0
29846	A	Wrist arthroscopy		14.52	14.52	090	3	1	0	0	0
29847	A	Wrist arthroscopy		13.51	13.51	090	3	1	2	0	0
29848	A	Wrist arthroscopy		9.00	9.00	090	2	1	1	0	0
29850	A	Knee arthroscopy		17.10	12.75	090	2	1	0	2	0
29851	A	Knee arthroscopy		23.43	23.43	090	2	1	2	2	0
29855	A	Tibial arthroscopy		21.96	21.96	090	2	1	2	2	0
29856	A	Tibial arthroscopy		25.17	25.17	090	2	1	2	2	0
29860	A	Hip arthroscopy		12.40	12.40	090	2	1	2	1	0
29861	A	Hip arthroscopy		18.32	18.32	090	3	1	2	1	0
29862	A	Hip arthroscopy		19.99	19.99	090	3	1	2	1	0
29863	A	Hip arthroscopy		18.36	18.36	090	3	1	2	1	0
29870	A	Knee arthroscopy		8.84	8.84	090	2	1	1	1	0
29871	A	Knee arthroscopy		13.02	13.02	090	3	1	1	0	0
29874	A	Knee arthroscopy		14.73	14.73	090	3	1	0	0	0
29875	A	Knee arthroscopy		13.32	13.32	090	3	1	0	0	0
29876	A	Knee arthroscopy		16.68	16.68	090	3	1	1	0	0
29877	A	Knee arthroscopy		15.48	15.48	090	3	1	0	0	0
29879	A	Knee arthroscopy		17.05	17.05	090	3	1	0	0	0
29880	A	Knee arthroscopy		17.97	17.97	090	3	1	0	1	0
29881	A	Knee arthroscopy		16.30	16.30	090	3	1	0	0	0
29882	A	Knee arthroscopy		18.10	18.10	090	3	1	1	0	0
29883	A	Knee arthroscopy		20.19	20.19	090	3	1	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
29884	A		Knee arthroscopy	15.30	15.30	090	3	1	2	1	0
29885	A		Knee arthroscopy	16.95	16.95	090	3	1	2	1	0
29886	A		Knee arthroscopy	14.03	14.03	090	3	1	2	0	0
29887	A		Knee arthroscopy	18.75	18.75	090	3	1	2	1	0
29888	A		Knee arthroscopy	29.14	29.14	090	2	1	2	1	0
29889	A		Knee arthroscopy	24.57	24.57	090	2	1	2	1	0
29891	A		Ankle arthroscopy	17.16	17.16	090	2	1	2	0	0
29892	A		Ankle arthroscopy	17.70	17.70	090	2	1	2	0	0
29893	A		Scope, plantar	10.02	10.02	090	2	1	2	1	0
29894	A		Ankle arthroscopy	15.02	15.02	090	2	1	2	1	0
29895	A		Ankle arthroscopy	14.61	14.61	090	2	1	2	1	0
29897	A		Ankle arthroscopy	15.12	15.12	090	2	1	2	0	0
29898	A		Ankle arthroscopy	17.44	17.44	090	2	1	2	1	0
29909	C		Arthroscopy of joint	0.00	0.00	YYY	2	1	1	1	1

C. Procedure code numbers 30000 to 49999 relate to respiratory, cardiovascular, lymphatic, and diaphragm procedures.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(1) Nose, incision:											
30000	A		Drainage of nose	1.89	1.61	010	2	0	0	0	0
30020	A		Drainage of nose	1.91	1.62	010	2	0	1	0	0
(2) Nose, excision:											
30100	A		Intranasal biopsy	1.56	1.23	000	2	0	1	0	0
30110	A		Remove nose polyp	2.80	2.18	010	2	1	1	0	0
30115	A		Remove nose polyp	6.83	6.83	090	2	1	1	0	0
30117	A		Remove intranasal lesion	5.78	5.78	090	2	0	1	0	0
30118	A		Remove intranasal lesion	17.04	17.04	090	2	0	2	1	0
30120	A		Revision of nose	10.94	10.94	090	2	0	1	0	0
30124	A		Remove nose cyst	4.20	3.55	090	2	0	1	0	0
30125	A		Remove nose cyst	12.26	12.26	090	2	0	2	0	0
30130	A		Removal of turbinate	4.78	4.78	090	2	1	1	0	0
30140	A		Removal of turbinate	6.24	6.24	090	2	1	1	0	0
30150	A		Partial removal of nose	16.54	16.54	090	2	0	1	1	0
30160	A		Removal of nose	19.83	19.83	090	2	0	2	1	0
(3) Nose, introduction:											
30200	A		Injection, therapeutic	1.09	0.91	000	2	0	1	0	0
30210	A		Nasal sinus therapy	1.25	1.12	010	2	0	1	0	0
30220	A		Insert nasal septal	2.94	2.22	010	2	0	1	0	0
(4) Nose, removal of foreign body:											
30300	A		Remove foreign body	1.42	1.19	010	2	0	1	0	0
30310	A		Remove foreign body	3.44	3.44	010	2	0	0	0	0
30320	A		Remove foreign body	8.48	8.48	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(5) Nose, repair:											
30400	R		Reconstruction	19.30	19.30	090	2	0	0	0	0
30410	R		Reconstruction	26.69	26.69	090	2	0	2	0	0
30420	R		Reconstruction	32.52	32.52	090	2	0	1	0	0
30430	R		Revision of nose	12.79	12.79	090	2	0	2	0	0
30435	R		Revision of nose	21.06	21.06	090	2	0	2	0	0
30450	R		Revision of nose	28.29	28.29	090	2	0	2	0	0
30460	A		Revision of nose	17.84	17.84	090	2	0	2	2	0
30462	A		Revision of nose	35.37	35.37	090	2	0	2	2	0
30520	A		Repair of nasal septum	11.76	11.76	090	2	0	1	0	0
30540	A		Repair nasal defect	13.83	13.83	090	2	0	2	0	0
30545	A		Repair nasal defect	21.31	21.31	090	2	0	2	0	0
30560	A		Release nasal adhesions	1.71	1.44	010	2	0	1	0	0
30580	A		Repair upper jaw	12.42	9.40	090	2	0	1	0	0
30600	A		Repair mouth/nose	9.31	9.31	090	2	0	0	0	0
30620	A		Intranasal dermatoplasty	12.37	12.37	090	2	0	1	0	0
30630	A		Repair nasal septal	12.88	12.88	090	2	0	0	0	0

(6) Nose, destruction:

30801	A		Cauterization, ablation	1.47	1.24	010	2	2	1	0	0
30802	A		Cauterization, intramural	2.81	2.81	010	2	2	1	0	0

(7) Nose, other procedures:

30901	A		Control hemorrhage	1.67	1.40	000	2	1	1	0	0
30903	A		Control hemorrhage	2.26	2.26	000	2	1	1	0	0
30905	A		Control hemorrhage	3.61	3.61	000	2	2	1	0	0
30906	A		Repeat control	3.33	3.33	000	2	2	1	0	0
30915	A		Ligation arteries	11.60	11.60	090	2	0	1	0	0
30920	A		Ligation upper artery	18.87	18.87	090	2	0	1	0	0
30930	A		Therapy fracture	1.87	1.87	010	2	0	1	0	0
30999	C		Nasal surgery	0.00	0.00	YYY	2	0	0	1	1

(8) Accessory sinuses, incision:

31000	A		Irrigation, maxillary	1.49	1.28	010	2	1	1	0	0
31002	A		Irrigation, sphenoid	2.21	1.98	010	2	1	0	0	0
31020	A		Exploration, maxillary	5.40	5.40	090	2	1	1	0	0
31030	A		Exploration, maxillary	12.14	12.14	090	2	1	1	0	0
31032	A		Explore sinus, radical	13.49	13.49	090	2	1	1	0	0
31040	A		Explore behind upper jaw	16.73	16.73	090	2	0	1	1	0
31050	A		Exploration, sphenoid	10.76	10.76	090	2	1	1	0	0
31051	A		Sphenoid sinus	14.48	14.48	090	2	1	1	0	0
31070	A		Exploration	8.69	8.69	090	2	1	1	0	0
31075	A		Exploration	18.66	18.66	090	2	1	2	1	0
31080	A		Removal of frontal	19.88	19.88	090	2	1	2	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
31081	A	Removal of frontal		22.26	22.26	090	2	1	2	1	0
31084	A	Removal of frontal		27.44	27.44	090	2	1	2	1	0
31085	A	Removal of frontal		28.95	28.95	090	2	1	2	1	0
31086	A	Removal of frontal		22.81	22.81	090	2	1	2	0	0
31087	A	Removal of frontal		22.66	22.66	090	2	1	2	1	0
31090	A	Exploration		19.94	19.94	090	2	1	1	0	0

(9) Accessory sinuses, excision:

31200	A	Remove ethmoidectomy		9.24	9.24	090	2	1	1	0	0
31201	A	Remove ethmoidectomy		14.78	14.78	090	2	1	1	0	0
31205	A	Remove ethmoidectomy		17.50	17.50	090	2	1	2	1	0
31225	A	Removal of upper jaw		37.54	37.54	090	2	1	2	1	0
31230	A	Removal of upper jaw		42.29	42.29	090	2	1	2	1	0

(10) Accessory sinuses, endoscopy:

31231	A	Nasal endoscopy		2.40	2.40	000	2	2	1	0	0
31233	A	Nasal/sinus endoscopy		4.85	3.50	000	2	1	1	0	0
31235	A	Nasal/sinus endoscopy		4.85	3.69	000	2	1	1	0	0
31237	A	Nasal/sinus endoscopy		6.08	4.49	000	2	1	1	0	0
31238	A	Nasal/sinus endoscopy		6.68	4.94	000	2	1	0	0	0
31239	A	Nasal/sinus endoscopy		17.79	17.79	010	2	1	0	0	0
31240	A	Nasal/sinus endoscopy		5.35	5.35	000	2	1	0	0	0
31254	A	Revise ethmoidectomy		9.55	9.55	000	2	1	1	0	0
31255	A	Remove ethmoidectomy		14.35	14.35	000	2	1	1	0	0
31256	A	Exploration, maxillary		6.71	6.71	000	2	1	1	0	0
31267	A	Endoscopy, maxillary		10.46	10.46	000	2	1	1	0	0
31276	A	Sinus, surgical		14.93	14.93	000	2	1	1	0	0
31287	A	Nasal/sinus endoscopy		8.08	8.08	000	2	1	0	0	0
31288	A	Nasal/sinus endoscopy		9.46	9.46	000	2	1	0	0	0
31290	A	Nasal/sinus endoscopy		32.55	32.55	010	2	1	0	0	0
31291	A	Nasal/sinus endoscopy		34.27	34.27	010	2	1	0	0	0
31292	A	Nasal/sinus endoscopy		27.12	27.12	010	2	1	0	0	0
31293	A	Nasal/sinus endoscopy		29.73	29.73	010	2	1	0	0	0
31294	A	Nasal/sinus endoscopy		34.46	34.46	010	2	1	0	0	0

(11) Accessory sinuses, other procedures:

31299	C	Sinus surgery		0.00	0.00	YYY	2	0	0	1	1
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(12) Larynx, excision:

31300	A	Removal of larynx		24.86	24.86	090	2	0	2	1	0
31320	A	Diagnostic		8.78	8.78	090	2	0	0	0	0
31360	A	Removal of larynx		34.86	34.86	090	2	0	2	1	0
31365	A	Removal of larynx		49.32	49.32	090	2	0	2	1	0
31367	A	Partial removal, larynx		37.52	37.52	090	2	0	2	1	0
31368	A	Partial removal, larynx		52.13	52.13	090	2	0	2	1	0
31370	A	Partial removal, larynx		37.04	37.04	090	2	0	2	1	0
31375	A	Partial removal, larynx		33.54	33.54	090	2	0	2	1	0
31380	A	Partial removal, larynx		36.07	36.07	090	2	0	2	1	0
31382	A	Partial removal, larynx		35.12	35.12	090	2	0	2	1	0
31390	A	Removal of larynx		53.38	53.38	090	2	0	2	1	0
31395	A	Reconstruct larynx		63.04	63.04	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
31400		A	Revision of larynx	17.41	17.41	090	2	0	2	0	0
31420		A	Epiglottidectomy	17.55	17.55	090	2	0	2	1	0

(13) Larynx, introduction:

31500		A	Intubation, emergency	3.29	3.29	000	0	0	1	0	0
31502		A	Change of windpipe	1.19	1.19	000	2	0	1	0	0

(14) Larynx, endoscopy:

31505		A	Diagnostic, larynx	1.00	0.79	000	2	0	1	0	0
31510		A	Laryngoscopy, biopsy	2.31	2.31	000	3	0	0	0	0
31511		A	Remove foreign body	2.94	2.94	000	3	0	1	0	0
31512		A	Removal of larynx	3.72	3.72	000	3	0	0	0	0
31513		A	Injection, vocal cord	4.35	4.35	000	3	0	0	0	0
31515		A	Laryngoscopy, aspiration	2.80	2.80	000	2	0	1	0	0
31520		A	Diagnostic, larynx	4.01	4.01	000	2	0	0	0	0
31525		A	Diagnostic, larynx	4.64	3.58	000	2	0	1	0	0
31526		A	Diagnostic, larynx	5.28	5.28	000	2	0	1	0	0
31527		A	Laryngoscopy	6.02	6.02	000	3	0	0	0	0
31528		A	Laryngoscopy	4.84	4.84	000	3	0	0	0	0
31529		A	Laryngoscopy	4.95	4.95	000	3	0	0	0	0
31530		A	Operative larynx	6.80	6.80	000	3	0	1	0	0
31531		A	Operative larynx	7.41	7.41	000	3	0	0	0	0
31535		A	Operative larynx	6.48	6.48	000	3	0	1	0	0
31536		A	Operative larynx	7.34	7.34	000	3	0	1	0	0
31540		A	Operative larynx	8.47	8.47	000	3	0	1	0	0
31541		A	Operative larynx	8.93	8.93	000	3	0	1	0	0
31560		A	Operative larynx	10.06	10.06	000	3	0	0	0	0
31561		A	Operative larynx	12.10	12.10	000	3	0	0	0	0
31570		A	Laryngoscopy, injection	7.96	5.90	000	3	0	1	0	0
31571		A	Laryngoscopy, injection	8.61	8.61	000	3	0	1	0	0
31575		A	Diagnostic, larynx	2.60	1.85	000	2	0	1	0	0
31576		A	Diagnostic, larynx	4.07	4.07	000	3	0	1	0	0
31577		A	Remove foreign body	5.07	5.07	000	3	0	0	0	0
31578		A	Removal of larynx	5.86	5.86	000	3	0	0	0	0
31579		A	Diagnostic, larynx	4.45	3.32	000	3	0	1	0	0

(15) Larynx, repair:

31580		A	Revision of larynx	25.29	25.29	090	2	0	2	1	0
31582		A	Revision of larynx	37.96	37.96	090	2	0	1	1	0
31584		A	Repair of larynx	30.86	30.86	090	2	0	2	1	0
31585		A	Repair of larynx	8.07	8.07	090	2	0	0	0	0
31586		A	Repair of larynx	14.01	14.01	090	2	0	0	0	0
31587		A	Revision of larynx	18.29	18.29	090	2	0	2	1	0
31588		A	Revision of larynx	22.88	22.88	090	2	0	2	0	0
31590		A	Reinnervation of larynx	12.23	12.23	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(16) Larynx, destruction:											
31595	A	Larynx nerve section		14.59	14.59	090	2	0	2	1	0
(17) Larynx, other procedures:											
31599	C	Larynx surgery		0.00	0.00	YYY	2	0	0	1	1
(18) Trachea and bronchi, incision:											
31600	A	Incision of windpipe		7.49	7.49	000	2	0	1	0	0
31601	A	Incision of windpipe		9.14	9.14	000	2	0	2	1	0
31603	A	Incision of windpipe		8.22	8.22	000	2	0	1	0	0
31605	A	Incision of windpipe		7.33	7.33	000	2	0	1	0	0
31610	A	Incision of windpipe		14.90	14.90	090	2	0	1	0	0
31611	A	Surgery/speech		11.92	11.92	090	2	0	2	1	0
31612	A	Puncture/clear		2.02	1.86	000	2	0	0	0	0
31613	A	Repair windpipe		6.46	6.46	090	2	0	1	0	0
31614	A	Repair windpipe		13.38	13.38	090	2	0	1	0	0
(19) Trachea and bronchi, endoscopy:											
31615	A	Visualization		3.90	3.90	000	2	0	1	0	0
31622	A	Diagnostic, bronchi		5.70	5.70	000	2	0	1	0	0
31625	A	Bronchoscopy, biopsy		6.84	6.84	000	3	0	1	0	0
31628	A	Bronchoscopy, biopsy		7.72	7.72	000	3	0	1	0	0
31629	A	Bronchoscopy, biopsy		6.83	6.83	000	3	0	1	0	0
31630	A	Bronchoscopy, dilation		7.34	7.34	000	3	0	1	0	0
31631	A	Bronchoscopy, removal		8.04	8.04	000	3	0	1	0	0
31635	A	Remove foreign body		7.55	7.55	000	3	0	1	0	0
31640	A	Bronchoscopy, excision		9.70	9.70	000	3	0	1	0	0
31641	A	Bronchoscopy, tumor		10.38	10.38	000	3	0	1	0	0
31645	A	Bronchoscopy		6.40	6.40	000	3	0	1	0	0
31646	A	Bronchoscopy		5.51	5.51	000	2	0	1	0	0
31656	A	Bronchoscopy, injection		4.45	4.45	000	2	0	0	0	0
(20) Trachea and bronchi, introduction:											
31700	A	Insertion of airway		2.64	2.64	000	2	0	0	0	0
31708	A	Instill airway		2.07	2.07	000	2	1	0	0	0
31710	A	Insertion of airway		2.12	2.12	000	2	1	0	0	0
31715	A	Injection for brush		1.49	1.49	000	2	1	0	0	0
31717	A	Bronchial brush biopsy		2.66	2.66	000	2	0	1	0	0
31720	A	Clearance of airway		1.73	1.73	000	2	0	1	0	0
31725	A	Clearance of airway		3.22	3.22	000	2	0	1	0	0
31730	A	Introduction, windpipe		5.10	5.10	000	2	0	1	2	0
(21) Trachea and bronchi, repair:											
31750	A	Repair of windpipe		21.00	21.00	090	2	0	2	1	0
31755	A	Repair of windpipe		28.10	28.10	090	2	0	2	1	0
31760	A	Repair of windpipe		32.24	32.24	090	2	0	2	1	0
31766	A	Reconstruction		46.02	46.02	090	2	0	2	1	0
31770	A	Repair/graft		36.14	36.14	090	2	0	2	1	0
31775	A	Reconstruct bronchi		38.24	38.24	090	2	0	2	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
31780	A		Reconstruct windpipe	33.97	33.97	090	2	0	2	1	0
31781	A		Reconstruct windpipe	38.73	38.73	090	2	0	2	1	0
31785	A		Remove windpipe	24.90	24.90	090	2	0	2	1	0
31786	A		Remove windpipe	35.85	35.85	090	2	0	2	1	0
31800	A		Repair of windpipe	11.90	11.90	090	2	0	0	0	0
31805	A		Repair of windpipe	22.18	22.18	090	2	0	2	1	0
31820	A		Closure of windpipe	7.79	7.79	090	2	0	0	0	0
31825	A		Repair of windpipe	11.33	11.33	090	2	0	0	0	0
31830	A		Revise windpipe	7.85	7.85	090	2	0	0	0	0

(22) Trachea and bronchi, other procedures:

31899	C		Airways surgery procedure	0.00	0.00	YYY	2	0	0	1	1
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(23) Lungs and pleura, incision:

32000	A		Drainage of chest	2.31	2.31	000	0	0	1	0	0
32002	A		Treat collapsed lung	3.40	3.40	000	0	0	1	1	0
32005	A		Treat lung lining	3.12	3.12	000	2	0	1	0	0
32020	A		Insertion of tube	6.39	6.39	000	0	0	1	0	0
32035	A		Exploration	15.09	15.09	090	2	0	2	1	0
32036	A		Exploration	16.40	16.40	090	2	0	2	1	0
32095	A		Biopsy of lung or pleura	16.36	16.36	090	2	0	2	1	0
32100	A		Exploration/biopsy	22.76	22.76	090	2	0	2	1	0
32110	A		Explore/repair	24.59	24.59	090	2	0	2	1	0
32120	A		Re-exploration	20.55	20.55	090	2	0	2	1	0
32124	A		Explore chest	23.33	23.33	090	2	0	2	1	0
32140	A		Removal of lung	25.93	25.93	090	2	0	2	1	0
32141	A		Remove/treat lung	27.07	27.07	090	2	0	2	1	0
32150	A		Removal of lung	23.94	23.94	090	2	0	2	1	0
32151	A		Remove lung foreign body	22.49	22.49	090	2	0	2	1	0
32160	A		Open chest heart	18.10	18.10	090	2	0	2	1	0
32200	A		Open drainage of abscess	21.05	21.05	090	2	0	2	1	0
32201	A		Percutaneous drainage	6.75	6.75	000	2	0	2	0	0
32215	A		Treat chest lining	18.35	18.35	090	2	0	2	1	0
32220	A		Release of lung	34.42	34.42	090	2	0	2	1	0
32225	A		Partial release of lung	25.37	25.37	090	2	0	2	1	0

(24) Lungs and pleura, excision:

32310	A		Removal of chest	24.60	24.60	090	2	0	2	1	0
32320	A		Free/remove chest	38.00	38.00	090	2	0	2	1	0
32400	A		Needle biopsy, chest	3.09	3.09	000	2	0	1	0	0
32402	A		Open biopsy, chest	14.92	14.92	090	2	0	2	1	0
32405	A		Biopsy, lung	3.90	3.90	000	2	0	1	0	0
32420	A		Puncture/clear lung	3.50	3.50	000	2	0	1	0	0
32440	A		Removal of lung	38.97	38.97	090	2	0	2	1	0
32442	A		Sleeve pneumonectomy	43.08	43.08	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
32445	A		Removal of lung	44.68	44.68	090	2	0	2	1	0
32480	A		Partial removal of lung	34.98	34.98	090	2	0	2	1	0
32482	A		Bilobectomy	36.24	36.24	090	2	0	2	1	0
32484	A		Segmentectomy	37.13	37.13	090	2	0	2	1	0
32486	A		Sleeve lobectomy	39.47	39.47	090	2	0	2	1	0
32488	A		Completion pneumonectomy	42.38	42.38	090	2	0	2	1	0
32491	R		Lung volume reduction	35.88	35.88	090	2	1	2	1	0
32500	A		Partial removal	27.40	27.40	090	2	0	2	1	0
32501	A		Repair bronchus	8.81	8.81	ZZZ	0	1	2	1	0
32520	A		Remove lung, resection	41.81	41.81	090	2	0	2	1	0
32522	A		Remove lung, resection	45.43	45.43	090	2	0	2	1	0
32525	A		Remove lung, resection	49.30	49.30	090	2	0	2	1	0
32540	A		Removal of lung	25.69	25.69	090	2	0	2	1	0

(25) Lungs and pleura, endoscopy:

32601	A		Thoracoscopy, diagnostic	8.62	8.62	000	2	0	0	0	0
32602	A		Thoracoscopy, diagnostic	9.50	9.50	000	2	0	0	0	0
32603	A		Thoracoscopy, diagnostic	10.76	10.76	000	2	0	0	0	0
32604	A		Thoracoscopy, diagnostic	12.06	12.06	000	2	0	0	0	0
32605	A		Thoracoscopy, diagnostic	9.96	9.96	000	2	0	0	0	0
32606	A		Thoracoscopy, diagnostic	11.72	11.72	000	2	0	0	0	0
32650	A		Thoracoscopy, surgical	17.83	17.83	090	2	0	2	1	0
32651	A		Thoracoscopy, surgical	24.41	24.41	090	2	0	2	1	0
32652	A		Thoracoscopy, surgical	33.87	33.87	090	2	0	2	1	0
32653	A		Thoracoscopy, surgical	22.78	22.78	090	2	0	2	1	0
32654	A		Thoracoscopy, surgical	23.52	23.52	090	2	0	2	1	0
32655	A		Thoracoscopy, surgical	26.25	26.25	090	2	0	2	1	0
32656	A		Thoracoscopy, surgical	25.93	25.93	090	2	0	2	1	0
32657	A		Thoracoscopy, surgical	26.81	26.81	090	2	0	2	1	0
32658	A		Thoracoscopy, surgical	24.30	24.30	090	2	0	2	1	0
32659	A		Thoracoscopy, surgical	24.28	24.28	090	2	0	2	1	0
32660	A		Thoracoscopy, surgical	36.30	36.30	090	2	0	2	1	0
32661	A		Thoracoscopy, surgical	21.77	21.77	090	2	0	2	1	0
32662	A		Thoracoscopy, surgical	30.49	30.49	090	2	0	2	1	0
32663	A		Thoracoscopy, surgical	35.11	35.11	090	2	0	2	1	0
32664	A		Thoracoscopy, surgical	24.21	24.21	090	2	1	2	1	0
32665	A		Thoracoscopy, surgical	29.41	29.41	090	2	0	2	1	0

(26) Lungs and pleura, repair:

32800	A		Repair lung hernia	21.30	21.30	090	2	0	2	1	0
32810	A		Close chest	18.78	18.78	090	2	0	2	0	0
32815	A		Close bronchial	37.16	37.16	090	2	0	2	1	0
32820	A		Reconstruct injury	39.65	39.65	090	2	0	2	1	0

(27) Lungs and pleura, lung transplantation:

32850	X		Donor pneumonectomy	0.00	0.00	XXX	9	9	9	9	9
32851	A		Lung transplant	62.50	62.50	090	2	0	2	1	2
32852	A		Lung transplant	67.70	67.70	090	2	0	2	1	2
32853	A		Lung transplant	77.70	77.70	090	2	2	2	1	2
32854	A		Lung transplant	82.90	82.90	090	2	2	2	1	2

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(28) Lungs and pleura, surgical collapse therapy; thoracoplasty:										
32900	A	Removal of ribs	27.48	27.48	090	2	0	2	1	0
32905	A	Revise and repair	32.58	32.58	090	2	0	2	1	0
32906	A	Revise and repair	40.81	40.81	090	2	0	2	1	0
32940	A	Revision of lung	29.59	29.59	090	2	0	2	1	0
32960	A	Therapeutic pneumothorax	2.64	2.64	000	2	0	1	0	0
(29) Lungs and pleura, other procedures:										
32999	C	Chest surgery	0.00	0.00	YYY	2	0	2	1	1
(30) Heart and pericardium:										
33010	A	Drainage of heart	3.60	3.60	000	2	0	1	0	0
33011	A	Repeat drainage	3.17	2.64	000	2	0	0	0	0
33015	A	Incision of heart	10.63	10.63	090	2	0	1	0	0
33020	A	Incision of heart	25.65	25.65	090	2	0	2	1	0
33025	A	Incision of heart	25.26	25.26	090	2	0	2	1	0
33030	A	Partial removal	39.03	39.03	090	2	0	2	1	0
33031	A	Partial removal	33.96	33.96	090	2	0	2	1	0
33050	A	Removal of heart	22.78	22.78	090	2	0	2	1	0
(31) Heart and pericardium, cardiac tumor:										
33120	A	Removal of heart	51.25	51.25	090	2	0	2	1	0
33130	A	Removal of heart	33.68	33.68	090	2	0	2	1	0
(32) Heart and pericardium, pacemaker or defibrillator:										
33200	A	Insertion of pacemaker	24.23	24.23	090	2	0	1	0	0
33201	A	Insertion of pacemaker	20.97	20.97	090	2	0	1	0	0
33206	A	Insertion of pacemaker	13.88	13.88	090	2	0	1	2	0
33207	A	Insertion of pacemaker	16.57	16.57	090	2	0	1	2	0
33208	A	Insertion of pacemaker	16.87	16.87	090	2	0	1	2	0
33210	A	Insertion of pacemaker	6.33	6.33	000	2	0	1	0	0
33211	A	Insertion of electrodes	6.42	6.42	000	2	0	1	0	0
33212	A	Insertion of pulse	10.69	10.69	090	2	0	1	0	0
33213	A	Insertion of pulse	11.46	11.46	090	2	0	1	0	0
33214	A	Upgrade of pacemaker	12.84	12.84	090	2	0	0	2	0
33216	A	Revision of implant	10.05	10.05	090	2	0	1	0	0
33217	A	Insert/revise	10.37	10.37	090	2	0	1	0	0
33218	A	Repair pacemaker	9.71	9.71	090	2	0	1	0	0
33220	A	Repair pacemaker	9.79	9.79	090	2	0	1	0	0
33222	A	Revision of pacemaker	10.33	10.33	090	2	0	1	0	0
33223	A	Revision of pacemaker	11.93	11.93	090	2	0	0	0	0
33233	A	Removal of pacemaker	5.56	5.56	090	2	0	1	0	0
33234	A	Removal of pacemaker	9.97	9.97	090	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
33235	A		Removal of pacemaker	11.75	11.75	090	2	0	1	0	0
33236	A		Remove electrodes	15.62	15.62	090	2	0	0	2	0
33237	A		Remove electrodes	22.34	22.34	090	2	0	0	2	0
33238	A		Remove electrodes	24.86	24.86	090	2	0	0	2	0
33240	A		Insert/replace	12.58	12.58	090	2	0	1	0	0
33241	A		Remove pulse generator	5.26	5.26	090	2	0	0	1	0
33242	A		Repair pulse generator	13.01	13.01	090	2	0	0	1	0
33243	A		Remove pulse generator	30.12	30.12	090	2	0	2	1	0
33244	A		Remove pulse generator	17.71	17.71	090	2	0	1	1	0
33245	A		Implant defibrillator	29.48	29.48	090	2	0	2	1	0
33246	A		Implant defibrillator	40.64	40.64	090	2	0	2	1	0
33247	A		Insert/replace	21.42	21.42	090	2	0	1	1	0
33249	A		Insert/replace	27.93	27.93	090	2	0	1	1	0
33250	A		Ablate heart	31.48	31.48	090	2	0	2	1	0
33251	A		Ablate heart	40.21	40.21	090	2	0	2	1	0
33253	A		Reconstruct atria	51.61	51.61	090	2	0	2	1	0
33261	A		Ablate heart	37.58	37.58	090	2	0	2	1	0

(33) Heart and pericardium, wounds of heart and great vessels:

33300	A		Repair of heart	31.57	31.57	090	2	0	2	1	0
33305	A		Repair of heart	37.96	37.96	090	2	0	2	1	0
33310	A		Exploratory, heart	28.76	28.76	090	2	0	2	1	0
33315	A		Exploratory, heart	35.71	35.71	090	2	0	2	1	0
33320	A		Repair major vessels	30.28	30.28	090	2	0	2	1	0
33321	A		Repair major vessels	41.34	41.34	090	2	0	2	1	0
33322	A		Repair major vessels	41.72	41.72	090	2	0	2	1	0
33330	A		Insert major vessels	32.76	32.76	090	2	0	2	1	0
33332	A		Insert major vessels	37.63	37.63	090	2	0	2	1	0
33335	A		Insert major vessels	43.12	43.12	090	2	0	2	1	0

(34) Heart and pericardium, cardiac valves:

33400	A		Repair of aortic valve	49.88	49.88	090	2	0	2	1	0
33401	A		Valvuloplasty	48.58	48.58	090	2	0	2	1	0
33403	A		Valvuloplasty	49.47	49.47	090	2	0	2	1	0
33404	A		Prepare heart-aortic	59.18	59.18	090	2	0	2	1	0
33405	A		Replace aortic valve	60.17	60.17	090	2	0	2	1	0
33406	A		Replace aortic valve	67.75	67.75	090	2	0	2	1	0
33411	A		Replace aortic valve	68.09	68.09	090	2	0	2	0	0
33412	A		Replace aortic valve	72.66	72.66	090	2	0	2	1	0
33413	A		Replace aortic valve	73.42	73.42	090	2	0	2	1	0
33414	A		Repair, aortic	63.91	63.91	090	2	0	2	1	0
33415	A		Revision, subvalvular	56.44	56.44	090	2	0	2	1	0
33416	A		Revise ventricular	57.49	57.49	090	2	0	2	1	0
33417	A		Repair of aortic	59.62	59.62	090	2	0	2	1	0
33420	A		Revision of mitral valve	41.10	41.10	090	2	0	2	1	0
33422	A		Revision of mitral valve	54.66	54.66	090	2	0	2	1	0
33425	A		Repair of mitral valve	56.19	56.19	090	2	0	2	1	0
33426	A		Repair of mitral valve	62.24	62.24	090	2	0	2	1	0
33427	A		Repair of mitral valve	67.61	67.61	090	2	0	2	1	0
33430	A		Replace mitral valve	65.29	65.29	090	2	0	2	1	0
33460	A		Revision of tricuspid	49.11	49.11	090	2	0	2	1	0
33463	A		Valvuloplasty	53.76	53.76	090	2	0	2	1	0
33464	A		Valvuloplasty	57.13	57.13	090	2	0	2	1	0

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(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
33465	A		Replace tricuspid valve	60.01	60.01	090	2	0	2	1	0
33468	A		Revision of tricuspid	62.82	62.82	090	2	0	2	1	0
33470	A		Revision of pulmonary	39.39	39.39	090	2	0	2	0	0
33471	A		Valvotomy, pulmonary	45.41	45.41	090	2	0	2	1	0
33472	A		Revision of pulmonary	45.41	45.41	090	2	0	2	0	0
33474	A		Revision of pulmonary	46.95	46.95	090	2	0	2	1	0
33475	A		Replacement, pulmonary	59.35	59.35	090	2	0	2	1	0
33476	A		Revision of heart	53.33	53.33	090	2	0	2	1	0
33478	A		Revision of heart	55.67	55.67	090	2	0	2	1	0

(35) Heart and pericardium, other valvular procedures:

33496	A		Repair, prosthetic	56.64	56.64	090	2	0	2	1	0
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(36) Heart and pericardium, coronary artery anomalies:

33500	A		Repair heart vein	53.21	53.21	090	2	0	2	1	0
33501	A		Repair heart vein	31.18	31.18	090	2	0	2	2	0
33502	A		Repair coronary artery	34.14	34.14	090	2	0	2	1	0
33503	A		Repair coronary artery	45.78	45.78	090	2	0	0	1	0
33504	A		Repair coronary artery	51.46	51.46	090	2	0	2	1	0
33505	A		Repair artery	56.21	56.21	090	2	0	2	1	0
33506	A		Repair artery	55.95	55.95	090	2	0	2	1	0

(37) Heart and pericardium, venous grafting only for bypass:

33510	A		CABG, vein, single	52.36	52.36	090	2	0	2	0	0
33511	A		CABG, vein, two	57.14	57.14	090	2	0	2	0	0
33512	A		CABG, vein, three	61.89	61.89	090	2	0	2	0	0
33513	A		CABG, vein, four	66.67	66.67	090	2	0	2	0	0
33514	A		CABG, vein, five	72.95	72.95	090	2	0	2	0	0
33516	A		CABG, vein, six	77.96	77.96	090	2	0	2	0	0

(38) Heart and pericardium, combined arterial-venous grafting for bypass:

33517	A		CABG, artery-vein	5.34	5.34	090	0	0	2	0	0
33518	A		CABG, artery-vein	10.12	10.12	ZZZ	0	0	2	0	0
33519	A		CABG, artery-vein	14.87	14.87	ZZZ	0	0	2	0	0
33521	A		CABG, artery-vein	19.64	19.64	ZZZ	0	0	2	0	0
33522	A		CABG, artery-vein	24.40	24.40	ZZZ	0	0	2	0	0
33523	A		CABG, artery-vein	29.17	29.17	ZZZ	0	0	2	0	0
33530	A		Coronary artery	12.75	12.75	ZZZ	0	0	2	0	0

(39) Heart and pericardium, arterial grafting for bypass:

33533	A		CABG, arterial, single	53.85	53.85	090	2	0	2	0	0
33534	A		CABG, arterial, two	60.11	60.11	090	2	0	2	0	0
33535	A		CABG, arterial, three	66.37	66.37	090	2	0	2	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
33536	A	CABG, arterial, four		72.61	72.61	090	2	0	2	0	0
33542	A	Removal of heart		58.92	58.92	090	2	0	2	1	0
33545	A	Repair of heart		70.58	70.58	090	2	0	2	1	0

(40) Heart and pericardium, coronary endarterectomy:

33572	A	Open coronary		7.51	7.51	ZZZ	0	0	2	0	0
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(41) Heart and pericardium, single ventricle and other anomalies:

33600	A	Closure of valve		61.51	61.51	090	2	0	2	1	0
33602	A	Closure of valve		58.29	58.29	090	2	0	2	1	0
33606	A	Anastomosis/artery		64.67	64.67	090	2	0	2	1	0
33608	A	Repair anomaly		65.37	65.37	090	2	0	2	1	0
33610	A	Repair by enlargement		64.42	64.42	090	2	0	2	1	0
33611	A	Repair double ventricle		67.75	67.75	090	2	0	2	1	0
33612	A	Repair double ventricle		69.65	69.65	090	2	0	2	1	0
33615	A	Repair (simple)		67.28	67.28	090	2	0	2	1	0
33617	A	Repair by modification		71.16	71.16	090	2	0	2	1	0
33619	A	Repair single ventricle		78.46	78.46	090	2	0	2	1	0

(42) Heart and pericardium, septal defect:

33641	A	Repair heart septal		44.83	44.83	090	2	0	2	1	0
33645	A	Revision of heart		51.59	51.59	090	2	0	2	1	0
33647	A	Repair heart septal		60.07	60.07	090	2	0	2	1	0
33660	A	Repair of heart		53.31	53.31	090	2	0	2	1	0
33665	A	Repair of heart		59.16	59.16	090	2	0	2	1	0
33670	A	Repair of heart		68.59	68.59	090	2	0	2	1	0
33681	A	Repair heart septal		57.98	57.98	090	2	0	2	1	0
33684	A	Repair heart septal		61.89	61.89	090	2	0	2	1	0
33688	A	Repair heart septal		63.79	63.79	090	2	0	2	1	0
33690	A	Reinforce pulmonary		40.89	40.89	090	2	0	2	1	0
33692	A	Repair of heart		64.70	64.70	090	2	0	2	1	0
33694	A	Repair of heart		66.62	66.62	090	2	0	2	1	0
33697	A	Repair of heart		70.53	70.53	090	2	0	2	1	0

(43) Heart and pericardium, sinus of Valsalva:

33702	A	Repair of heart		55.23	55.23	090	2	0	2	1	0
33710	A	Repair of heart		62.00	62.00	090	2	0	2	0	0
33720	A	Repair of heart		55.28	55.28	090	2	0	2	1	0
33722	A	Repair of heart		58.17	58.17	090	2	0	2	1	0

(44) Heart and pericardium, total anomalous pulmonary venous drainage:

33730	A	Repair of heart-venous		66.51	66.51	090	2	0	2	1	0
33732	A	Repair of heart-venous		58.48	58.48	090	2	0	2	1	0

(45) Heart and pericardium, shunting procedures:

33735	A	Revision of heart		46.92	46.92	090	2	0	2	0	0
33736	A	Revision of heart		48.85	48.85	090	2	0	2	1	0
33737	A	Revision of heart		45.56	45.56	090	2	0	2	1	0
33750	A	Major vessel shunt		43.15	43.15	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
33755	A		Major vessel shunt	43.49	43.49	090	2	0	2	1	0
33762	A		Major vessel shunt	43.49	43.49	090	2	0	2	1	0
33764	A		Major vessel shunt	43.49	43.49	090	2	0	2	1	0
33766	A		Major vessel shunt	44.37	44.37	090	2	0	2	1	0
33767	A		Atrial septectomy	49.74	49.74	090	2	0	2	1	0

(46) Heart and pericardium, transposition of great vessels:

33770	A		Repair great vein	69.70	69.70	090	2	0	2	1	0
33771	A		Repair great vein	72.39	72.39	090	2	0	2	1	0
33774	A		Repair great vein	61.32	61.32	090	2	0	2	1	0
33775	A		Repair great vein	62.43	62.43	090	2	0	2	0	0
33776	A		Repair great vein	68.10	68.10	090	2	0	2	1	0
33777	A		Repair great vein	63.57	63.57	090	2	0	2	0	0
33778	A		Repair great vein	74.64	74.64	090	2	0	2	1	0
33779	A		Repair great vein	75.41	75.41	090	2	0	2	1	0
33780	A		Repair great vein	76.84	76.84	090	2	0	2	1	0
33781	A		Repair great vein	75.89	75.89	090	2	0	2	0	0

(47) Heart and pericardium, truncus arteriosus:

33786	A		Repair arterial	72.75	72.75	090	2	0	2	1	0
33788	A		Revision of pulmonary	55.32	55.32	090	2	0	2	1	0

(48) Heart and pericardium, aortic anomalies:

33800	A		Aortic suspension	29.79	29.79	090	2	0	2	2	0
33802	A		Repair vessel division	37.17	37.17	090	2	0	2	1	0
33803	A		Repair vessel division	40.98	40.98	090	2	0	2	1	0
33813	A		Repair septal division	42.46	42.46	090	2	0	2	1	0
33814	A		Repair septal division	53.72	53.72	090	2	0	2	1	0
33820	A		Revise major vein	34.46	34.46	090	2	0	2	0	0
33822	A		Revise major vein	36.49	36.49	090	2	0	2	1	0
33824	A		Revise major vein	40.82	40.82	090	2	0	2	1	0
33840	A		Remove aorta coarctation	43.73	43.73	090	2	0	2	1	0
33845	A		Remove aorta coarctation	46.66	46.66	090	2	0	2	1	0
33851	A		Remove aorta coarctation	44.99	44.99	090	2	0	2	1	0
33852	A		Repair septal division	49.80	49.80	090	2	0	2	0	0
33853	A		Repair septal division	66.61	66.61	090	2	0	2	1	0

(49) Heart and pericardium, thoracic aortic aneurysm:

33860	A		Ascending aorta graft	67.76	67.76	090	2	0	2	1	0
33861	A		Ascending aorta graft	68.27	68.27	090	2	0	2	1	0
33863	A		Ascending aorta graft	70.04	70.04	090	2	0	2	1	0
33870	A		Transverse aorta graft	83.82	83.82	090	2	0	2	1	0
33875	A		Thoracic aorta graft	63.28	63.28	090	2	0	2	1	0
33877	A		Thoracoabdominal	85.90	85.90	090	2	0	2	1	0

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Proposed Rules

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(50) Heart and pericardium, pulmonary artery:											
33910	A	Remove lung artery		38.00	38.00	090	2	0	2	1	0
33915	A	Remove lung artery		31.92	31.92	090	2	0	2	1	0
33916	A	Surgery of pulmonary		42.31	42.31	090	2	0	2	1	0
33917	A	Repair pulmonary		51.75	51.75	090	2	0	2	1	0
33918	A	Repair pulmonary		54.99	54.99	090	2	0	2	1	0
33919	A	Repair pulmonary		68.48	68.48	090	2	0	2	1	0
33920	A	Repair pulmonary		67.07	67.07	090	2	0	2	1	0
33922	A	Transect pulmonary		47.90	47.90	090	2	0	2	1	0
33924	A	Remove pulmonary		9.29	9.29	ZZZ	0	0	2	1	0
(51) Heart and pericardium, heart/lung transplantation:											
33930	X	Removal of donor		0.00	0.00	XXX	9	9	9	9	9
33935	R	Transplantation		127.58	127.58	090	2	0	2	1	2
33940	X	Removal of donor		0.00	0.00	XXX	9	9	9	9	9
33945	R	Transplantation		89.04	89.04	090	2	0	2	1	2
(52) Heart and pericardium, cardiac assist:											
33960	A	External circulation		24.87	24.87	XXX	0	0	2	1	0
33961	A	External circulation		17.21	17.21	XXX	0	0	2	1	0
33970	A	Aortic circulation		13.86	13.86	000	2	0	2	1	0
33971	A	Aortic circulation		14.28	14.28	090	2	0	1	0	0
33973	A	Insert balloon		16.70	16.70	000	2	0	2	1	0
33974	A	Remove intra-aortic		18.95	18.95	090	2	0	1	0	0
33975	A	Implant ventricular		34.84	34.84	090	2	0	2	0	0
33976	A	Implant ventricular		47.17	47.17	090	2	2	2	0	0
33977	A	Remove ventricular		30.84	30.84	090	2	0	2	0	0
33978	A	Remove ventricular		34.96	34.96	090	2	2	2	0	0
(53) Heart and pericardium, other procedures:											
33999	C	Cardiac surgery		0.00	0.00	YYY	2	0	2	1	1
(54) Arteries and veins, embolectomy/thrombectomy:											
34001	A	Removal of artery		22.00	22.00	090	2	1	2	1	0
34051	A	Removal of artery		23.19	23.19	090	2	1	2	1	0
34101	A	Removal of artery		18.05	18.05	090	2	1	2	1	0
34111	A	Removal of arm		15.53	15.53	090	2	1	2	1	0
34151	A	Removal of artery		28.18	28.18	090	2	1	2	1	0
34201	A	Removal of artery		17.87	17.87	090	2	1	2	1	0
34203	A	Removal of leg		20.37	20.37	090	2	1	2	1	0
34401	A	Removal of vein		20.24	20.24	090	2	1	2	1	0
34421	A	Removal of vein		17.04	17.04	090	2	1	2	1	0
34451	A	Removal of vein		24.61	24.61	090	2	1	2	1	0
34471	A	Removal of vein		12.94	12.94	090	2	1	1	1	0
34490	A	Removal of vein		14.77	14.77	090	2	1	1	0	0
(55) Arteries and veins, venous reconstruction:											
34501	A	Repair valve, femoral		17.50	17.50	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
34502	A		Reconstruct, vena cava	44.49	44.49	090	2	0	2	0	0
34510	A		Transposition	21.19	21.19	090	2	1	2	1	0
34520	A		Cross-over vein graft	22.09	22.09	090	2	1	2	1	0
34530	A		Leg vein fusion	28.71	28.71	090	2	1	2	1	0

(56) Arteries and veins, repair of and graft for aneurysm:

35001	A		Repair defect occlusive	34.94	34.94	090	2	1	2	1	0
35002	A		Repair artery ruptured	32.60	32.60	090	2	1	2	1	0
35005	A		Repair defect occlusive	27.59	27.59	090	2	1	2	1	0
35011	A		Repair defect occlusive	24.48	24.48	090	2	1	2	1	0
35013	A		Repair artery ruptured	31.67	31.67	090	2	1	2	1	0
35021	A		Repair defect occlusive	37.04	37.04	090	2	1	2	1	0
35022	A		Repair artery ruptured	36.86	36.86	090	2	1	2	1	0
35045	A		Repair defect occlusive	23.53	23.53	090	2	1	2	1	0
35081	A		Repair defect occlusive	48.45	48.45	090	2	0	2	1	0
35082	A		Repair artery ruptured	57.66	57.66	090	2	0	2	1	0
35091	A		Repair defect occlusive	56.38	56.38	090	2	1	2	1	0
35092	A		Repair artery ruptured	63.10	63.10	090	2	1	2	1	0
35102	A		Repair defect occlusive	51.70	51.70	090	2	1	2	1	0
35103	A		Repair artery ruptured	58.62	58.62	090	2	1	2	1	0
35111	A		Repair defect occlusive	33.96	33.96	090	2	1	2	1	0
35112	A		Repair artery ruptured	28.29	28.29	090	2	1	2	1	0
35121	A		Repair defect occlusive	44.08	44.08	090	2	1	2	0	0
35122	A		Repair artery ruptured	49.86	49.86	090	2	1	2	1	0
35131	A		Repair defect occlusive	33.92	33.92	090	2	1	2	1	0
35132	A		Repair artery ruptured	39.94	39.94	090	2	1	2	1	0
35141	A		Repair defect occlusive	28.91	28.91	090	2	1	2	1	0
35142	A		Repair artery ruptured	31.74	31.74	090	2	1	2	1	0
35151	A		Repair defect occlusive	31.89	31.89	090	2	1	2	1	0
35152	A		Repair artery ruptured	25.19	25.19	090	2	1	2	1	0
35161	A		Repair defect occlusive	34.11	34.11	090	2	1	2	1	0
35162	A		Repair artery ruptured	37.97	37.97	090	2	1	2	1	0

(57) Arteries and veins, repair arteriovenous fistula:

35180	A		Repair blood vein	20.30	20.30	090	2	0	2	1	0
35182	A		Repair blood vein	27.28	27.28	090	2	0	2	1	0
35184	A		Repair blood vein	21.60	21.60	090	2	0	2	1	0
35188	A		Repair blood vein	21.67	21.67	090	2	0	2	1	0
35189	A		Repair blood vein	28.89	28.89	090	2	0	2	1	0
35190	A		Repair blood vein	22.74	22.74	090	2	0	2	1	0

(58) Arteries and veins, repair vessel, other than for fistula:

35201	A		Repair blood vein	19.87	19.87	090	2	1	2	1	0
35206	A		Repair blood vein	19.32	19.32	090	2	1	2	1	0
35207	A		Repair blood vein	20.71	20.71	090	2	1	1	1	0

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(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
35211	A		Repair blood vein	34.43	34.43	090	2	1	2	1	0
35216	A		Repair blood vein	28.48	28.48	090	2	1	2	1	0
35221	A		Repair blood vein	26.83	26.83	090	2	1	2	1	0
35226	A		Repair blood vein	18.93	18.93	090	2	1	2	1	0
35231	A		Repair blood vein	25.25	25.25	090	2	1	2	1	0
35236	A		Repair blood vein	22.18	22.18	090	2	1	2	1	0
35241	A		Repair blood vein	35.45	35.45	090	2	1	2	1	0
35246	A		Repair blood vein	35.57	35.57	090	2	1	2	1	0
35251	A		Repair blood vein	26.18	26.18	090	2	1	2	1	0
35256	A		Repair blood vein	23.63	23.63	090	2	1	2	1	0
35261	A		Repair blood vein	24.38	24.38	090	2	1	2	1	0
35266	A		Repair blood vein	21.62	21.62	090	2	1	2	1	0
35271	A		Repair blood vein	33.60	33.60	090	2	1	2	1	0
35276	A		Repair blood vein	28.75	28.75	090	2	1	2	1	0
35281	A		Repair blood vein	33.51	33.51	090	2	1	2	1	0
35286	A		Repair blood vein	23.37	23.37	090	2	1	2	1	0

(59) Arteries and veins, thromboendarterectomy:

35301	A		Rechanneling	32.49	32.49	090	2	1	2	1	0
35311	A		Rechanneling	45.50	45.50	090	2	1	2	1	0
35321	A		Rechanneling	24.87	24.87	090	2	1	2	1	0
35331	A		Rechanneling	35.70	35.70	090	2	1	2	1	0
35341	A		Rechanneling	41.52	41.52	090	2	1	2	1	0
35351	A		Rechanneling	34.33	34.33	090	2	1	2	1	0
35355	A		Rechanneling	31.15	31.15	090	2	1	2	1	0
35361	A		Rechanneling	42.27	42.27	090	2	1	2	1	0
35363	A		Rechanneling	46.81	46.81	090	2	1	2	1	0
35371	A		Rechanneling	24.03	24.03	090	2	1	2	1	0
35372	A		Rechanneling	24.39	24.39	090	2	1	2	1	0
35381	A		Rechanneling	29.05	29.05	090	2	1	2	1	0
35390	A		Reoperation, cartoid	4.72	4.72	ZZZ	0	1	2	1	0

(60) Arteries and veins, angiосcopy:

35400	A		Angioscopy	5.07	5.07	ZZZ	0	0	0	1	0
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(61) Arteries and veins, transluminal angioplasty:

35450	A		Repair arterial	20.61	20.61	000	2	1	2	1	0
35452	A		Repair arterial	10.81	10.81	000	2	1	2	1	0
35454	A		Repair arterial	12.74	12.74	000	2	1	2	1	0
35456	A		Repair arterial	15.42	15.42	000	2	1	2	1	0
35458	A		Repair arterial	19.41	19.41	000	2	1	2	1	0
35459	A		Repair arterial	17.93	17.93	000	2	1	2	1	0
35460	A		Repair venous	8.94	8.94	000	2	1	1	1	0
35470	A		Repair arterial	17.93	17.93	000	2	1	1	0	0
35471	A		Repair arterial	20.61	20.61	000	2	1	1	0	0
35472	A		Repair arterial	10.23	10.23	000	2	1	0	1	0
35473	A		Repair arterial	12.74	12.74	000	2	1	1	0	0
35474	A		Repair arterial	15.44	15.44	000	2	1	1	0	0
35475	R		Repair arterial	19.41	19.41	000	2	1	1	0	0
35476	A		Repair venous	8.94	8.94	000	2	1	1	0	0

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Proposed Rules

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(62) Arteries and veins, transluminal atherectomy:										
35480	A	Atherectomy, open	22.59	22.59	000	2	0	2	2	0
35481	A	Atherectomy, open	11.45	11.45	000	2	0	2	2	0
35482	A	Atherectomy, open	13.95	13.95	000	2	0	2	2	0
35483	A	Atherectomy, open	16.89	16.89	000	2	0	2	2	0
35484	A	Atherectomy, open	20.27	20.27	000	2	0	2	2	0
35485	A	Atherectomy, open	13.57	13.57	000	2	0	2	2	0
35490	A	Atherectomy, peripheral	22.59	22.59	000	2	0	2	2	0
35491	A	Atherectomy, peripheral	11.45	11.45	000	2	0	2	2	0
35492	A	Atherectomy, peripheral	13.95	13.95	000	2	0	2	2	0
35493	A	Atherectomy, peripheral	16.89	16.89	000	2	0	1	2	0
35494	A	Atherectomy, peripheral	20.27	20.27	000	2	0	1	2	0
35495	A	Atherectomy, peripheral	13.57	13.57	000	2	0	0	2	0

(63) Arteries and veins, bypass graft:

35501	A	Artery bypass graft	38.04	38.04	090	2	1	2	1	0
35506	A	Artery bypass graft	38.38	38.38	090	2	1	2	1	0
35507	A	Artery bypass graft	37.16	37.16	090	2	1	2	1	0
35508	A	Artery bypass graft	36.32	36.32	090	2	1	2	1	0
35509	A	Artery bypass graft	36.82	36.82	090	2	1	2	1	0
35511	A	Artery bypass graft	26.38	26.38	090	2	1	2	1	0
35515	A	Artery bypass graft	28.91	28.91	090	2	1	2	1	0
35516	A	Artery bypass graft	33.55	33.55	090	2	1	2	1	0
35518	A	Artery bypass graft	32.24	32.24	090	2	1	2	1	0
35521	A	Artery bypass graft	33.45	33.45	090	2	1	2	1	0
35526	A	Artery bypass graft	32.01	32.01	090	2	1	2	1	0
35531	A	Artery bypass graft	44.96	44.96	090	2	1	2	1	0
35533	A	Artery bypass graft	41.39	41.39	090	2	1	2	1	0
35536	A	Artery bypass graft	43.92	43.92	090	2	1	2	1	0
35541	A	Artery bypass graft	44.32	44.32	090	2	0	2	1	0
35546	A	Artery bypass graft	46.20	46.20	090	2	1	2	1	0
35548	A	Artery bypass graft	40.48	40.48	090	2	0	2	1	0
35549	A	Artery bypass graft	44.21	44.21	090	2	2	2	1	0
35551	A	Artery bypass graft	44.94	44.94	090	2	1	2	1	0
35556	A	Artery bypass graft	39.87	39.87	090	2	1	2	1	0
35558	A	Artery bypass graft	29.44	29.44	090	2	1	2	1	0
35560	A	Artery bypass graft	43.09	43.09	090	2	1	2	1	0
35563	A	Artery bypass graft	22.72	22.72	090	2	1	2	1	0
35565	A	Artery bypass graft	31.76	31.76	090	2	1	2	1	0
35566	A	Artery bypass graft	46.61	46.61	090	2	1	2	1	0
35571	A	Artery bypass graft	37.70	37.70	090	2	1	2	1	0
35582	A	Vein bypass graft	50.26	50.26	090	2	1	2	1	0
35583	A	Vein bypass graft	42.33	42.33	090	2	1	2	1	0
35585	A	Vein bypass graft	50.49	50.49	090	2	1	2	1	0
35587	A	Artery bypass graft	39.82	39.82	090	2	1	2	1	0
35601	A	Artery bypass graft	35.91	35.91	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
35606	A		Artery bypass graft	35.87	35.87	090	2	1	2	1	0
35612	A		Artery bypass graft	32.31	32.31	090	2	1	2	1	0
35616	A		Artery bypass graft	32.36	32.36	090	2	1	2	1	0
35621	A		Arterial transposition	30.74	30.74	090	2	1	2	1	0
35623	A		Artery bypass graft	23.91	23.91	090	2	1	2	1	0
35626	A		Artery bypass graft	43.51	43.51	090	2	1	2	1	0
35631	A		Artery bypass graft	41.56	41.56	090	2	1	2	1	0
35636	A		Artery bypass graft	34.78	34.78	090	2	1	2	1	0
35641	A		Artery bypass graft	44.41	44.41	090	2	0	2	1	0
35642	A		Artery bypass graft	27.51	27.51	090	2	1	2	1	0
35645	A		Artery bypass graft	27.76	27.76	090	2	1	2	1	0
35646	A		Artery bypass graft	49.01	49.01	090	2	1	2	1	0
35650	A		Artery bypass graft	30.26	30.26	090	2	1	2	1	0
35651	A		Artery bypass graft	48.59	48.59	090	2	1	2	1	0
35654	A		Artery bypass graft	39.10	39.10	090	2	1	2	1	0
35656	A		Artery bypass graft	36.84	36.84	090	2	1	2	1	0
35661	A		Artery bypass graft	27.79	27.79	090	2	1	2	1	0
35663	A		Artery bypass graft	30.02	30.02	090	2	1	2	1	0
35665	A		Artery bypass graft	32.31	32.31	090	2	1	2	1	0
35666	A		Artery bypass graft	39.00	39.00	090	2	1	2	1	0
35671	A		Artery bypass graft	30.75	30.75	090	2	1	2	1	0
35681	A		Artery bypass graft	17.81	17.81	ZZZ	0	1	2	1	0

(64) Arteries and veins, arterial transposition:

35691	A		Arterial transposition	37.44	37.44	090	2	1	2	1	0
35693	A		Arterial transposition	24.08	24.08	090	2	1	2	1	0
35694	A		Vein bypass graft	27.60	27.60	090	2	1	2	1	0
35695	A		Arterial transposition	27.60	27.60	090	2	1	2	1	0

(65) Arteries and veins, exploration:

35700	A		Reoperation	4.56	4.56	ZZZ	0	1	2	1	0
35701	A		Exploration, carotid	11.35	11.35	090	2	1	2	1	0
35721	A		Exploration, femoral	10.78	10.78	090	2	1	2	1	0
35741	A		Exploration, popliteal	11.04	11.04	090	2	1	2	1	0
35761	A		Exploration	11.12	11.12	090	2	1	2	1	0
35800	A		Explore neck	12.01	12.01	090	2	0	2	1	0
35820	A		Explore chest	20.13	20.13	090	2	0	2	1	0
35840	A		Explore abdominal	16.65	16.65	090	2	0	2	1	0
35860	A		Explore limb	11.28	11.28	090	2	0	2	1	0
35870	A		Repair vessel graft	31.77	31.77	090	2	0	2	1	0
35875	A		Removal of clot	17.93	17.93	090	2	0	1	1	0
35876	A		Removal of clot	21.25	21.25	090	2	0	2	1	0
35901	A		Excision, graft	15.18	15.18	090	2	0	2	1	0
35903	A		Excision, graft	16.26	16.26	090	2	0	2	1	0
35905	A		Excision, graft	24.25	24.25	090	2	0	2	1	0
35907	A		Excision, graft	25.21	25.21	090	2	0	2	1	0

(66) Arteries and veins, intravenous:

36000	A		Place needle	0.42	0.28	XXX	2	1	1	0	0
36005	A		Injection, venography	1.34	1.34	000	2	0	0	0	0
36010	A		Place catheter	4.42	4.42	XXX	2	1	1	0	0
36011	A		Place catheter	4.81	4.81	XXX	2	1	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
36012	A		Place catheter	5.95	5.95	XXX	2	1	1	0	0
36013	A		Place catheter	4.50	4.50	XXX	2	0	1	0	0
36014	A		Place catheter	5.09	5.09	XXX	2	1	1	0	0
36015	A		Place catheter	5.95	5.95	XXX	2	1	1	0	0

(67) Arteries and veins, intra-arterial, intra-aortic:

36100	A		Establish access	5.42	5.42	XXX	2	1	1	0	0
36120	A		Establish access	4.12	4.12	XXX	2	0	1	0	0
36140	A		Establish access	3.32	3.32	XXX	2	0	1	0	0
36145	A		Artery to vein	4.23	4.23	XXX	2	0	1	0	0
36160	A		Establish access	4.72	4.72	XXX	2	0	1	0	0
36200	A		Place catheter	5.53	5.53	XXX	2	1	1	0	0
36215	A		Place catheter	7.06	7.06	XXX	2	1	1	0	0
36216	A		Place catheter	8.12	8.12	XXX	2	1	1	0	0
36217	A		Place catheter	9.68	9.68	XXX	2	1	1	0	0
36218	A		Place catheter	1.54	1.54	XXX	0	0	1	0	0
36245	A		Place catheter	7.43	7.43	XXX	2	1	1	0	0
36246	A		Place catheter	8.12	8.12	XXX	2	1	1	0	0
36247	A		Place catheter	9.68	9.68	XXX	2	1	1	0	0
36248	A		Place catheter	1.54	1.54	XXX	0	0	1	0	0
36260	A		Insert infusion pump	16.10	16.10	090	2	0	1	0	0
36261	A		Revise infusion pump	7.33	7.33	090	2	0	2	0	0
36262	A		Remove infusion pump	5.73	5.73	090	2	0	1	0	0
36299	C		Vessel injection	0.00	0.00	YYY	2	0	0	1	1

(68) Arteries and veins, venous:

36400	A		Drawing blood	0.26	0.21	XXX	2	0	1	0	0
36405	A		Drawing blood	0.61	0.40	XXX	2	0	1	0	0
36406	A		Drawing blood	0.32	0.25	XXX	2	0	1	0	0
36410	A		Drawing blood	0.39	0.27	XXX	2	0	1	0	0
36415	I		Drawing blood	0.00	0.00	XXX	9	9	9	9	9
36420	A		Establish access	1.44	1.44	XXX	2	0	0	0	0
36425	A		Establish access	0.77	0.77	XXX	2	0	1	0	0
36430	A		Blood transfusion	0.97	0.50	XXX	0	0	1	0	0
36440	A		Blood transfusion	1.88	1.88	XXX	2	0	0	0	0
36450	A		Exchange transfusion	3.94	3.03	XXX	2	0	0	0	0
36455	A		Exchange transfusion	4.52	4.52	XXX	2	0	1	0	0
36460	A		Transfusion	11.13	11.13	XXX	2	0	2	0	0
36468	R		Injection(s)	0.00	0.00	XXX	2	0	0	0	0
36469	R		Injection(s)	0.00	0.00	XXX	2	0	0	0	0
36470	A		Injection therapy	1.27	1.14	010	2	0	1	0	0
36471	A		Injection therapy	1.83	1.64	010	2	0	1	0	0
36481	A		Insertion of catheter	11.80	11.80	000	2	0	1	0	0
36488	A		Insertion of catheter	2.24	2.24	000	0	0	1	0	0
36489	A		Insertion of catheter	2.28	2.28	000	0	0	1	0	0
36490	A		Insertion of catheter	2.96	2.96	000	0	0	1	0	0

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(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
36491	A		Insertion of catheter	2.99	2.99	000	0	0	1	0	0
36493	A		Repositioning catheter	1.80	1.80	000	2	0	1	0	0
36500	A		Insertion of catheter	3.28	3.28	000	2	0	1	0	0
36510	A		Insertion of catheter	1.33	1.16	000	2	0	0	0	0
36520	A		Plasma/cell exchange	3.49	3.49	000	2	0	1	0	0
36522	A		Photopheresis	4.12	3.50	000	2	0	1	0	0
36530	R		Insert infusion pump	10.85	10.85	010	2	0	0	0	0
36531	R		Revise infusion pump	8.79	8.79	010	2	0	0	0	0
36532	R		Remove infusion pump	4.91	4.91	010	2	0	0	0	0
36533	A		Insert access port	9.44	9.44	010	2	0	0	0	0
36534	A		Revise access port	5.63	5.63	010	2	0	0	0	0
36535	A		Remove access port	4.02	4.02	010	2	0	0	0	0

(69) Arteries and veins, arterial:

36600	A		Withdrawal of blood	0.57	0.57	XXX	2	0	1	0	0
36620	A		Insertion of catheter	1.76	1.76	000	0	0	1	0	0
36625	A		Insertion of catheter	2.85	2.85	000	0	0	1	0	0
36640	A		Insertion of catheter	4.36	4.36	000	2	0	1	0	0
36660	A		Insertion of catheter	1.77	1.77	000	0	0	0	0	0

(70) Arteries and veins, intraosseous:

36680	A		Insert needle, infusion	2.34	2.34	000	2	0	0	0	0
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(71) Arteries and veins, intervascular cannulization or shunt:

36800	A		Insertion of cannula	4.50	4.50	000	2	0	1	0	0
36810	A		Insertion of cannula	8.23	8.23	000	2	0	1	0	0
36815	A		Insertion of cannula	5.55	5.55	000	2	0	1	0	0
36821	A		Artery-vein	15.91	15.91	090	2	0	2	1	0
36822	A		Insertion of cannula	10.75	10.75	090	2	0	1	0	0
36825	A		Artery-vein graft	20.60	20.60	090	2	0	2	1	0
36830	A		Artery-vein graft	21.82	21.82	090	2	0	2	1	0
36832	A		Revise artery-vein	14.03	14.03	090	2	0	2	1	0
36834	A		Repair A-V aneurysm	17.46	17.46	090	2	0	2	1	0
36835	A		Artery to vein	10.23	10.23	090	2	0	1	0	0
36860	A		Cannula declotting	4.54	4.20	000	2	0	1	0	0
36861	A		Cannula declotting	5.52	5.52	000	2	0	1	0	0

(72) Arteries and veins, portal decompression procedures:

37140	A		Revision	39.00	39.00	090	2	0	1	1	0
37145	A		Revision	39.84	39.84	090	2	0	2	0	0
37160	A		Revision	38.83	38.83	090	2	0	2	1	0
37180	A		Revision	37.57	37.57	090	2	0	2	1	0
37181	A		Splice spleen/kidney	42.01	42.01	090	2	0	2	1	0

(73) Arteries and veins, transcatheter procedures:

37195	A		Thrombolytic therapy	7.72	7.72	XXX	0	0	0	0	0
37200	A		Transcatheter biopsy	5.75	5.75	000	2	0	1	0	0
37201	A		Transcatheter therapy	10.20	10.20	000	2	0	1	0	0
37202	A		Transcatheter therapy	9.59	9.59	000	2	0	1	0	0
37203	A		Transcatheter retrieval	8.50	8.50	000	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
37204	A		Transcatheter occlusion	30.64	30.64	000	2	0	1	0	0
37205	A		Transcatheter stents	12.73	12.73	000	2	0	0	2	0
37206	A		Transcatheter stents	6.36	6.36	ZZZ	0	0	0	2	0
37207	A		Transcatheter stents	12.73	12.73	000	2	1	2	2	0
37208	A		Transcatheter stents	6.36	6.36	ZZZ	0	0	2	2	0
37209	A		Exchange arterial	3.48	3.48	000	2	0	1	0	0

(74) Arteries and veins, intravascular ultrasound services:

37250	A		Intravascular ultrasound	3.08	3.08	ZZZ	0	0	0	1	0
37251	A		Intravascular ultrasound	2.35	2.35	ZZZ	0	0	0	1	0

(75) Arteries and veins, ligation and other procedures:

37565	A		Ligation of neck	8.10	8.10	090	2	0	0	1	0
37600	A		Ligation of neck	9.40	9.40	090	2	0	2	1	0
37605	A		Ligation of neck	11.56	11.56	090	2	0	2	1	0
37606	A		Ligation of neck	11.82	11.82	090	2	0	2	0	0
37607	A		Ligation of fistula	8.94	8.94	090	2	0	1	1	0
37609	A		Temporal artery	4.44	4.44	010	2	0	1	0	0
37615	A		Ligation of neck	11.24	11.24	090	2	0	2	1	0
37616	A		Ligation of chest	19.49	19.49	090	2	0	2	1	0
37617	A		Ligation of abdomen	23.06	23.06	090	2	0	2	1	0
37618	A		Ligation of extremity	9.79	9.79	090	2	0	2	1	0
37620	A		Revision of major vein	18.91	18.91	090	2	0	1	1	0
37650	A		Revision of major vein	8.83	8.83	090	2	1	1	1	0
37660	A		Revision of major vein	15.78	15.78	090	2	0	2	1	0
37700	A		Revise leg vein	7.30	7.30	090	2	1	1	0	0
37720	A		Removal of leg vein	10.65	10.65	090	2	1	1	1	0
37730	A		Removal of leg vein	14.14	14.14	090	2	1	1	1	0
37735	A		Removal of leg vein	18.54	18.54	090	2	1	2	1	0
37760	A		Revision of leg vein	17.57	17.57	090	2	0	2	1	0
37780	A		Revision of leg vein	5.50	5.50	090	2	1	1	1	0
37785	A		Revise secondary veins	4.57	4.57	090	2	1	1	0	0
37788	A		Revascularization	35.42	35.42	090	2	0	2	1	0
37790	A		Penile venous occlusive	13.38	13.38	090	2	0	0	0	0
37799	C		Vascular surgery	0.00	0.00	YYY	2	0	0	1	1

(76) Spleen, excision:

38100	A		Removal of spleen	21.07	21.07	090	2	0	2	1	0
38101	A		Removal of spleen	20.06	20.06	090	2	0	2	1	0
38102	A		Removal of spleen	7.10	7.10	ZZZ	0	0	2	1	0

(77) Spleen, repair:

38115	A		Repair ruptured spleen	21.08	21.08	090	2	0	2	1	0
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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(78) Spleen, introduction:											
38200	A	Splenoportography		4.13	4.13	000	2	0	0	0	0
(79) Bone marrow or stem cell transplantation services:											
38230	R	Bone marrow collection		6.92	6.92	010	2	0	0	0	0
38231	R	Stem cell collection		2.73	2.73	000	2	0	0	0	0
38240	R	Bone marrow/stem		4.12	4.12	XXX	2	0	0	0	0
38241	R	Bone marrow/stem		4.08	4.08	XXX	2	0	0	0	0
(80) Lymph nodes and lymphatic channels, incision:											
38300	A	Drain lymph abscess		2.00	1.72	010	2	0	1	0	0
38305	A	Drain lymph abscess		6.28	6.28	090	2	0	1	0	0
38308	A	Incision of lymph		8.00	8.00	090	2	0	2	1	0
38380	A	Thoracic duct		11.48	11.48	090	2	0	2	1	0
38381	A	Thoracic duct		19.82	19.82	090	2	0	2	1	0
38382	A	Thoracic duct		14.45	14.45	090	2	0	2	1	0
(81) Lymph nodes and lymphatic channels, excision:											
38500	A	Biopsy/removal		4.32	4.32	010	2	1	1	0	0
38505	A	Needle biopsy		2.21	1.67	000	2	1	1	0	0
38510	A	Biopsy/removal		6.46	6.46	090	2	1	1	0	0
38520	A	Biopsy/removal		7.84	7.84	090	2	1	1	0	0
38525	A	Biopsy/removal		7.02	7.02	090	2	1	1	0	0
38530	A	Biopsy/removal		8.99	8.99	090	2	1	2	1	0
38542	A	Explore deep node		9.81	9.81	090	2	1	2	1	0
38550	A	Removal of neck/arm		9.58	9.58	090	2	0	0	0	0
38555	A	Removal of neck/arm		20.74	20.74	090	2	0	2	1	0
(82) Lymph nodes and lymphatic channels, limited lymphadenectomy for staging:											
38562	A	Removal, pelvic		16.83	16.83	090	2	2	2	1	0
38564	A	Removal, abdomen		17.80	17.80	090	2	0	2	1	0
(83) Lymph nodes and lymphatic channels, radical lymphadenectomy:											
38700	A	Removal of lymph		16.95	16.95	090	2	1	2	1	0
38720	A	Removal of lymph		27.94	27.94	090	2	1	2	1	0
38724	A	Removal of lymph		28.17	28.17	090	2	0	2	1	0
38740	A	Remove armpit		11.26	11.26	090	2	0	2	1	0
38745	A	Remove armpits		16.99	16.99	090	2	0	2	1	0
38746	A	Remove thoracic lymph		6.49	6.49	ZZZ	0	0	2	1	0
38747	A	Remove abdominal lymph		7.24	7.24	ZZZ	0	0	2	1	0
38760	A	Remove groin lymph		15.08	15.08	090	2	1	2	1	0
38765	A	Remove groin lymph		28.15	28.15	090	2	1	2	1	0
38770	A	Remove pelvis lymph		27.02	27.02	090	2	1	2	1	0
38780	A	Remove abdomen lymph		32.30	32.30	090	2	0	2	1	0
(84) Lymph nodes and lymphatic channels, introduction:											
38790	A	Injection for lymphatic		2.86	2.65	000	2	1	1	0	0
38794	A	Access thoracic duct		6.99	6.99	090	2	0	0	0	0

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Proposed Rules

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(85) Lymph nodes and lymphatic channels, other procedures:											
38999	C	Blood/lymph system		0.00	0.00	YYY	2	0	2	1	1
(86) Mediastinum, incision:											
39000	A	Exploration		11.98	11.98	090	2	0	2	1	0
39010	A	Exploration		22.92	22.92	090	2	0	2	1	0
(87) Mediastinum, excision:											
39200	A	Removal of chest lesion		24.73	24.73	090	2	0	2	1	0
39220	A	Removal of chest lesion		31.81	31.81	090	2	0	2	1	0
(88) Mediastinum, endoscopy:											
39400	A	Visualization		10.56	10.56	010	2	0	1	0	0
(89) Mediastinum, other procedures:											
39499	C	Chest surgery		0.00	0.00	YYY	2	0	2	1	1
(90) Diaphragm, repair:											
39501	A	Repair of diaphragm		23.43	23.43	090	2	0	2	1	0
39502	A	Repair paraesophageal		27.70	27.70	090	2	0	2	1	0
39503	A	Repair of diaphragm		57.58	57.58	090	2	0	2	1	0
39520	A	Repair of diaphragm		28.08	28.08	090	2	0	2	1	0
39530	A	Repair of diaphragm		29.06	29.06	090	2	0	2	1	0
39531	A	Repair of diaphragm		25.56	25.56	090	2	0	2	1	0
39540	A	Repair of diaphragm		25.05	25.05	090	2	0	2	1	0
39541	A	Repair of diaphragm		26.13	26.13	090	2	0	2	1	0
39545	A	Revision of diaphragm		20.49	20.49	090	2	0	2	1	0
(91) Diaphragm, other procedures:											
39599	C	Diaphragm surgery		0.00	0.00	YYY	2	0	2	1	1
(92) Lips, excision:											
40490	A	Biopsy of lip		1.86	1.50	000	2	0	1	0	0
40500	A	Partial excision		8.95	8.95	090	2	0	1	0	0
40510	A	Partial excision		9.72	9.72	090	2	0	1	0	0
40520	A	Partial excision		8.96	8.96	090	2	0	1	0	0
40525	A	Reconstruct lip		15.67	15.67	090	2	0	1	0	0
40527	A	Reconstruct lip		18.90	18.90	090	2	0	0	0	0
40530	A	Partial removal of lip		10.24	10.24	090	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(93) Lips, repair:											
40650	A	Repair lip		7.53	7.53	090	2	0	0	0	0
40652	A	Repair lip		8.83	8.83	090	2	0	0	0	0
40654	A	Repair lip		11.01	11.01	090	2	0	1	0	0
40700	A	Repair cleft lip		20.49	20.49	090	2	0	0	0	0
40701	A	Repair cleft lip		33.95	33.95	090	2	2	2	0	0
40702	A	Repair cleft lip		21.50	21.50	090	2	2	2	0	0
40720	A	Repair cleft lip		22.55	22.55	090	2	1	0	0	0
40761	A	Repair cleft lip		24.79	24.79	090	2	0	1	0	0
(94) Lips, other procedures:											
40799	C	Lip surgery		0.00	0.00	YYY	2	0	2	1	1
(95) Vestibule of mouth, incision:											
40800	A	Drainage of mouth		1.82	1.46	010	2	0	1	0	0
40801	A	Drainage of mouth		4.03	3.21	010	2	0	1	0	0
40804	A	Removal of foreign body		1.72	1.44	010	2	0	0	0	0
40805	A	Removal of foreign body		5.02	5.02	010	2	0	0	0	0
40806	A	Incision of lip		0.65	0.65	000	2	0	0	0	0
(96) Vestibule of mouth, excision, destruction:											
40808	A	Biopsy of mouth		1.65	1.28	010	2	0	1	0	0
40810	A	Excision of mouth		2.39	1.82	010	2	0	1	0	0
40812	A	Excise/repair mouth		3.62	2.90	010	2	0	1	0	0
40814	A	Excise/repair mouth		6.40	4.84	090	2	0	1	0	0
40816	A	Excision of mouth		6.62	5.07	090	2	0	1	0	0
40818	A	Excise mucosa		4.47	4.47	090	2	0	0	0	0
40819	A	Excise lip or cheek		3.45	2.86	090	2	0	0	0	0
40820	A	Treatment of mouth		1.71	1.45	010	2	0	1	0	0
(97) Vestibule of mouth, repair:											
40830	A	Repair mouth laceration		2.28	2.28	010	2	0	0	0	0
40831	A	Repair mouth laceration		4.22	4.22	010	2	0	0	0	0
40840	R	Reconstruction		14.39	14.39	090	2	0	2	0	0
40842	R	Reconstruction		14.39	14.39	090	2	0	0	0	0
40843	R	Reconstruction		20.05	20.05	090	2	2	2	0	0
40844	R	Reconstruction		26.52	26.52	090	2	0	2	0	0
40845	R	Reconstruction		37.68	37.68	090	2	0	0	0	0
(98) Vestibule of mouth, other procedures:											
40899	C	Mouth surgery		0.00	0.00	YYY	2	0	0	1	1
(99) Tongue and floor of mouth, incision:											
41000	A	Drainage of mouth		1.96	1.59	010	2	0	1	0	0
41005	A	Drainage of mouth		1.78	1.78	010	2	0	0	0	0
41006	A	Drainage of mouth		3.98	3.98	090	2	0	0	0	0
41007	A	Drainage of mouth		5.78	5.78	090	2	0	0	0	0
41008	A	Drainage of mouth		4.14	3.63	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
41009	A		Drainage of mouth	6.64	6.64	090	2	0	0	0	0
41010	A		Incision of tongue	1.34	1.34	010	2	0	0	0	0
41015	A		Drainage of mouth	4.49	4.49	090	2	0	0	0	0
41016	A		Drainage of mouth	7.47	7.47	090	2	0	0	0	0
41017	A		Drainage of mouth	5.12	5.12	090	2	0	0	0	0
41018	A		Drainage of mouth	8.64	8.64	090	2	0	0	0	0

(100) Tongue and floor of mouth, excision:

41100	A		Biopsy of tongue	2.30	1.91	010	2	0	1	0	0
41105	A		Biopsy of tongue	2.35	1.85	010	2	0	1	0	0
41108	A		Biopsy of floor of mouth	1.82	1.41	010	2	0	1	0	0
41110	A		Excision of tongue	2.71	2.08	010	2	0	1	0	0
41112	A		Excision of tongue	4.91	3.76	090	2	0	1	0	0
41113	A		Excision of tongue	6.39	4.75	090	2	0	1	0	0
41114	A		Excision of tongue	14.26	14.26	090	2	0	0	0	0
41115	A		Excision of tongue	3.39	3.39	010	2	0	0	0	0
41116	A		Excision of mouth	4.77	4.77	090	2	0	1	0	0
41120	A		Partial removal, tongue	16.39	16.39	090	2	0	2	1	0
41130	A		Partial removal, tongue	19.50	19.50	090	2	0	2	1	0
41135	A		Tongue and neck	40.09	40.09	090	2	0	2	1	0
41140	A		Removal of tongue	42.75	42.75	090	2	0	2	1	0
41145	A		Removal of tongue, neck	50.93	50.93	090	2	0	2	1	0
41150	A		Tongue, mouth, and jaw	40.59	40.59	090	2	0	2	1	0
41153	A		Tongue, mouth, and neck	47.40	47.40	090	2	0	2	1	0
41155	A		Tongue, jaw, and neck	56.16	56.16	090	2	0	2	1	0

(101) Tongue and floor of mouth, repair:

41250	A		Repair tongue laceration	2.83	2.83	010	2	0	0	0	0
41251	A		Repair tongue laceration	4.18	4.18	010	2	0	0	0	0
41252	A		Repair tongue laceration	5.11	5.11	010	2	0	0	0	0

(102) Tongue and floor of mouth, other procedures:

41500	A		Fixation of tongue	6.69	6.69	090	2	0	0	0	0
41510	A		Tongue to lip suture	5.80	5.80	090	2	0	0	0	0
41520	A		Reconstruction	5.41	5.41	090	2	0	0	0	0
41599	C		Tongue and mouth surgery	0.00	0.00	YYY	2	0	0	1	1

(103) Dentoalveolar structures, incision:

41800	A		Drainage of gum	1.77	1.43	010	2	0	1	0	0
41805	A		Removal of foreign body	1.98	1.98	010	2	0	0	0	0
41806	A		Removal of foreign body	4.11	3.32	010	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(104) Dentoalveolar structures, excision, destruction:											
41820	R		Excision of gum	0.00	0.00	XXX	2	0	0	0	0
41821	R		Excision of gum	0.00	0.00	XXX	2	0	0	0	0
41822	R		Excision of gum	5.16	5.16	010	2	0	0	0	0
41823	R		Excision of gum	6.69	6.69	090	2	0	0	0	0
41825	A		Excision of gum	2.71	1.99	010	2	0	1	0	0
41826	A		Excision of gum	4.20	3.20	010	2	0	1	0	0
41827	A		Excision of gum	6.95	5.13	090	2	0	1	0	0
41828	R		Excision of gum	6.92	6.92	010	2	0	0	0	0
41830	R		Removal of gum	6.80	6.80	010	2	0	0	0	0
41850	R		Treatment of gum	0.00	0.00	XXX	2	0	0	0	0
(105) Dentoalveolar structures, other procedures:											
41870	R		Gum graft	0.00	0.00	XXX	2	0	0	0	0
41872	R		Repair gum	5.25	5.25	090	2	0	0	0	0
41874	R		Repair tooth sockets	6.27	6.27	090	2	0	0	0	0
41899	C		Dental surgery	0.00	0.00	YYY	2	0	0	1	1
(106) Palate and uvula, incision:											
42000	A		Drainage of mouth	1.75	1.45	010	2	0	0	0	0
(107) Palate and uvula, excision, destruction:											
42100	A		Biopsy roof of mouth	2.00	1.61	010	2	0	1	0	0
42104	A		Excision of lesion	3.15	2.36	010	2	0	1	0	0
42106	A		Excision of lesion	4.17	3.09	010	2	0	1	0	0
42107	A		Excision of lesion	9.02	6.66	090	2	0	1	0	0
42120	A		Remove palate/lesion	12.72	12.72	090	2	0	2	1	0
42140	A		Excision of uvula	2.86	2.86	090	2	0	1	0	0
42145	A		Repair of palate	16.67	16.67	090	2	0	1	0	0
42160	A		Treatment of mouth	3.20	2.46	010	2	0	0	0	0
(108) Palate and uvula, repair:											
42180	A		Repair palate	4.58	4.58	010	2	0	0	0	0
42182	A		Repair palate	7.04	7.04	010	2	0	0	0	0
42200	A		Reconstruct cleft palate	18.31	18.31	090	2	0	2	0	0
42205	A		Reconstruct cleft palate	19.33	19.33	090	2	0	2	0	0
42210	A		Reconstruct cleft palate	25.77	25.77	090	2	0	2	0	0
42215	A		Reconstruct cleft palate	15.90	15.90	090	2	0	2	0	0
42220	A		Reconstruct cleft palate	12.04	12.04	090	2	0	2	0	0
42225	A		Reconstruct cleft palate	15.92	15.92	090	2	0	2	0	0
42226	A		Lengthening of palate	17.18	17.18	090	2	0	2	0	0
42227	A		Lengthening of palate	16.01	16.01	090	2	0	2	0	0
42235	A		Repair palate	12.78	12.78	090	2	0	2	0	0
42260	A		Repair nose to lip	12.98	12.98	090	2	0	2	0	0
42280	A		Preparation, palate	3.41	3.41	010	2	0	0	0	0
42281	A		Insertion, palate	3.25	3.25	010	2	0	0	0	0
(109) Palate and uvula, other procedures:											
42299	C		Palate/uvula surgery	0.00	0.00	YYY	2	0	2	1	1

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(110) Salivary glands and ducts, incision:										
42300	A	Drain salivary gland	2.75	2.28	010	2	0	1	0	0
42305	A	Drain salivary gland	7.77	7.77	090	2	0	0	0	0
42310	A	Drain salivary gland	2.48	1.98	010	2	0	0	0	0
42320	A	Drain salivary gland	4.02	4.02	010	2	0	0	0	0
42325	A	Create salivary gland	4.65	4.65	090	2	0	2	0	0
42326	A	Create salivary gland	7.63	7.63	090	2	0	2	0	0
42330	A	Remove salivary gland	3.14	2.60	010	2	0	1	0	0
42335	A	Remove salivary gland	5.54	4.35	090	2	0	1	0	0
42340	A	Remove salivary gland	8.53	6.48	090	2	0	0	0	0
(111) Salivary glands and ducts, excision:										
42400	A	Biopsy of salivary gland	1.53	1.14	000	2	0	1	0	0
42405	A	Biopsy of salivary gland	4.58	3.84	010	2	0	1	0	0
42408	A	Excision of salivary cyst	7.46	7.46	090	2	0	0	0	0
42409	A	Drainage of salivary cyst	5.43	5.43	090	2	0	2	0	0
42410	A	Excise parotid	14.72	14.72	090	2	0	2	1	0
42415	A	Excise parotid	28.51	28.51	090	2	0	2	1	0
42420	A	Excise parotid	33.13	33.13	090	2	0	2	1	0
42425	A	Excise parotid	23.33	23.33	090	2	0	2	1	0
42426	A	Excise parotid	43.66	43.66	090	2	0	2	1	0
42440	A	Excise submaxillary	14.28	14.28	090	2	0	2	1	0
42450	A	Excise sublingual	7.69	7.69	090	2	0	0	0	0
(112) Salivary glands and ducts, repair:										
42500	A	Repair salivary duct	8.63	8.63	090	2	0	0	0	0
42505	A	Repair salivary duct	12.65	12.65	090	2	0	1	0	0
42507	A	Parotid duct diversion	10.41	10.41	090	2	2	2	0	0
42508	A	Parotid duct diversion	16.13	16.13	090	2	2	2	0	0
42509	A	Parotid duct diversion	18.22	18.22	090	2	2	0	0	0
42510	A	Parotid duct diversion	15.25	15.25	090	2	2	2	1	0
(113) Salivary glands and ducts, other procedures:										
42550	A	Injection, sialography	1.58	1.58	000	2	0	1	0	0
42600	A	Closure of salivary	8.39	8.39	090	2	0	0	0	0
42650	A	Dilation of salivary duct	1.10	0.91	000	2	0	1	0	0
42660	A	Dilation of salivary duct	1.54	1.30	000	2	0	0	0	0
42665	A	Ligation of salivary duct	4.41	4.41	090	2	0	0	0	0
42699	C	Salivary surgery	0.00	0.00	YYY	2	0	2	1	1
(114) Pharynx, adenoids, and tonsils, incision:										
42700	A	Drainage of tonsils	2.35	1.94	010	2	0	1	0	0
42720	A	Drainage of throat	6.87	6.87	010	2	0	0	0	0
42725	A	Drainage of throat	14.32	14.32	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(115) Pharynx, adenoids, and tonsils, excision, destruction:											
42800	A		Biopsy of throat	2.02	1.66	010	2	0	1	0	0
42802	A		Biopsy of throat	2.45	2.45	010	2	0	1	0	0
42804	A		Biopsy upper nose/throat	2.25	2.25	010	2	0	1	0	0
42806	A		Biopsy upper nose/throat	2.87	2.87	010	2	0	1	0	0
42808	A		Excise pharynx	4.68	4.68	010	2	0	1	0	0
42809	A		Remove pharynx	2.48	2.48	010	2	0	1	0	0
42810	A		Excision of neck	6.32	6.32	090	2	0	2	0	0
42815	A		Excision of neck	14.86	14.86	090	2	0	2	1	0
42820	A		Remove tonsils	6.77	6.77	090	2	0	0	0	0
42821	A		Remove tonsils	7.94	7.94	090	2	0	0	0	0
42825	A		Removal of tonsils	5.84	5.84	090	2	0	0	0	0
42826	A		Removal of tonsils	6.90	6.90	090	2	0	1	0	0
42830	A		Removal of adenoids	4.28	4.28	090	2	0	0	0	0
42831	A		Removal of adenoids	4.88	4.88	090	2	0	0	0	0
42835	A		Removal of adenoids	3.94	3.94	090	2	0	0	0	0
42836	A		Removal of adenoids	5.75	5.75	090	2	0	0	0	0
42842	A		Extensive surgery	14.82	14.82	090	2	0	0	0	0
42844	A		Extensive surgery	24.17	24.17	090	2	0	2	1	0
42845	A		Extensive surgery	41.26	41.26	090	2	0	2	1	0
42860	A		Excision of tonsil tags	3.96	3.96	090	2	0	0	0	0
42870	A		Excision of lingual	7.29	7.29	090	2	0	0	0	0
42890	A		Partial removal	21.00	21.00	090	2	0	2	1	0
42892	A		Revision of pharynx	25.62	25.62	090	2	0	2	1	0
42894	A		Revision of pharynx	37.29	37.29	090	2	0	2	1	0
(116) Pharynx, adenoids, and tonsils, repair:											
42900	A		Repair throat wound	9.15	9.15	010	2	0	0	0	0
42950	A		Reconstruction	16.57	16.57	090	2	0	2	1	0
42953	A		Repair throat	14.77	14.77	090	2	0	2	0	0
(117) Pharynx, adenoids, and tonsils, other procedures:											
42955	A		Surgical opening	10.15	10.15	090	2	0	2	0	0
42960	A		Control throat hemorrhage	3.22	3.22	010	2	0	0	0	0
42961	A		Control throat	6.87	6.87	090	2	0	2	0	0
42962	A		Control throat	12.63	12.63	090	2	0	2	0	0
42970	A		Control nose/throat	5.98	5.98	090	2	0	1	0	0
42971	A		Control nose/throat	8.63	8.63	090	2	0	2	0	0
42972	A		Control nose/throat	11.33	11.33	090	2	0	2	0	0
42999	C		Throat surgery	0.00	0.00	YYY	2	0	0	1	1
(118) Esophagus, incision:											
43020	A		Incision of esophagus	14.09	14.09	090	2	0	2	1	0
43030	A		Throat muscle surgery	15.82	15.82	090	2	0	2	1	0
43045	A		Incision of esophagus	31.59	31.59	090	2	0	2	1	0
(119) Esophagus, excision:											
43100	A		Excision of esophagus	14.85	14.85	090	2	0	2	1	0
43101	A		Excision of esophagus	24.94	24.94	090	2	0	2	1	0
43107	A		Removal of esophagus	50.31	50.31	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
43108	A		Removal of esophagus	58.08	58.08	090	2	0	2	1	0
43112	A		Removal of esophagus	51.58	51.58	090	2	0	2	2	0
43113	A		Removal of esophagus	59.06	59.06	090	2	0	2	2	0
43116	A		Partial removal	55.38	55.38	090	2	0	2	1	0
43117	A		Partial removal	54.29	54.29	090	2	0	2	2	0
43118	A		Partial removal	57.18	57.18	090	2	0	2	2	0
43121	A		Partial removal	49.44	49.44	090	2	0	2	2	0
43122	A		Partial removal	49.37	49.37	090	2	0	2	1	0
43123	A		Partial removal	57.18	57.18	090	2	0	2	1	0
43124	A		Removal of esophagus	48.97	48.97	090	2	0	2	1	0
43130	A		Removal of esophagus	21.70	21.70	090	2	0	2	1	0
43135	A		Removal of esophagus	27.13	27.13	090	2	0	2	1	0

(120) Esophagus, endoscopy:

43200	A		Esophagus endoscopy	3.56	3.28	000	2	0	1	0	0
43202	A		Esophagus endoscopy	4.21	3.90	000	3	0	1	0	0
43204	A		Esophagus endoscopy	7.63	7.63	000	3	0	1	0	0
43205	A		Esophagus endoscopy	6.15	6.15	000	3	0	0	0	0
43215	A		Esophagus endoscopy	5.38	5.38	000	3	0	1	0	0
43216	A		Esophagus endoscopy	4.93	4.93	000	3	0	0	0	0
43217	A		Esophagus endoscopy	5.92	5.92	000	3	0	1	0	0
43219	A		Esophagus endoscopy	5.70	5.70	000	3	0	1	0	0
43220	A		Esophagus endoscopy	4.29	4.29	000	3	0	1	0	0
43226	A		Esophagus endoscopy	4.75	4.75	000	3	0	1	0	0
43227	A		Esophagus endoscopy	7.28	7.28	000	3	0	1	0	0
43228	A		Esophagus endoscopy	7.64	7.64	000	3	0	1	0	0
43234	A		Upper GI endoscopy	4.47	4.12	000	2	0	1	0	0
43235	A		Upper GI endoscopy	5.30	4.87	000	2	0	1	0	0
43239	A		Upper GI endoscopy	5.95	5.48	000	3	0	1	0	0
43241	A		Upper GI endoscopy	5.31	5.31	000	3	0	1	0	0
43243	A		Upper GI endoscopy	9.22	9.22	000	3	0	1	0	0
43244	A		Upper GI endoscopy	7.74	7.74	000	3	0	0	0	0
43245	A		Operative upper endoscopy	6.90	6.90	000	3	0	1	0	0
43246	A		Place gastrostomy tube	8.81	8.81	000	3	0	0	2	0
43247	A		Operative upper endoscopy	6.89	6.89	000	3	0	1	0	0
43248	A		Upper GI endoscopy	6.40	6.40	000	2	0	1	0	0
43249	A		Esophagus endoscopy	5.88	5.88	000	3	0	1	0	0
43250	A		Upper GI endoscopy	6.54	6.54	000	3	0	1	0	0
43251	A		Operative upper endoscopy	7.53	7.53	000	3	0	1	0	0
43255	A		Operative upper endoscopy	8.88	8.88	000	3	0	1	0	0
43258	A		Operative upper endoscopy	9.18	9.18	000	3	0	1	0	0
43259	A		Endoscopic ultrasound	8.52	8.52	000	3	0	0	0	0
43260	A		Endoscopy, bile	11.40	11.40	000	2	0	1	0	0
43261	A		Endoscopy, bile	11.68	11.68	000	3	0	1	0	0
43262	A		Endoscopy, bile	14.88	14.88	000	3	0	1	0	0
43263	A		Endoscopy, bile	11.46	11.46	000	3	0	1	0	0
43264	A		Endoscopy, bile	17.03	17.03	000	3	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
43265	A		Endoscopy, bile	14.94	14.94	000	3	0	1	0	0
43267	A		Endoscopy, bile	14.13	14.13	000	3	0	1	0	0
43268	A		Endoscopy, bile	14.87	14.87	000	3	0	1	0	0
43269	A		Endoscopy, bile	12.18	12.18	000	3	0	1	0	0
43271	A		Endoscopy, bile	14.35	14.35	000	3	0	1	0	0
43272	A		Endoscopy, bile	12.35	12.35	000	3	0	0	0	0

(121) Esophagus, repair:

43300	A		Repair of esophagus	18.94	18.94	090	2	0	2	1	0
43305	A		Repair of esophagus	29.79	29.79	090	2	0	2	1	0
43310	A		Repair of esophagus	41.24	41.24	090	2	0	2	1	0
43312	A		Repair of esophagus	40.32	40.32	090	2	0	2	1	0
43320	A		Fuse esophagus	27.00	27.00	090	2	0	2	1	0
43324	A		Revise esophagus	27.92	27.92	090	2	0	2	1	0
43325	A		Revise esophagus	27.16	27.16	090	2	0	2	1	0
43326	A		Revise esophagus	22.67	22.67	090	2	0	2	1	0
43330	A		Repair of esophagus	26.76	26.76	090	2	0	2	1	0
43331	A		Repair of esophagus	30.03	30.03	090	2	0	2	1	0
43340	A		Fuse esophagus	27.76	27.76	090	2	0	2	1	0
43341	A		Fuse esophagus	25.68	25.68	090	2	0	2	1	0
43350	A		Surgical opening	19.79	19.79	090	2	0	2	1	0
43351	A		Surgical opening	22.74	22.74	090	2	0	2	1	0
43352	A		Surgical opening	20.54	20.54	090	2	0	2	1	0
43360	A		Gastrointestinal	49.07	49.07	090	2	0	2	1	0
43361	A		Gastrointestinal	56.68	56.68	090	2	0	2	1	0
43400	A		Ligate esophagus	26.87	26.87	090	2	0	2	1	0
43401	A		Esophagus surgery	26.50	26.50	090	2	0	2	1	0
43405	A		Ligate/staple esophagus	29.94	29.94	090	2	0	2	1	0
43410	A		Repair esophagus	19.30	19.30	090	2	0	2	1	0
43415	A		Repair esophagus	29.18	29.18	090	2	0	2	1	0
43420	A		Repair esophagus	16.61	16.61	090	2	0	0	1	0
43425	A		Repair esophagus	25.93	25.93	090	2	0	2	1	0

(122) Esophagus, manipulation:

43450	A		Dilate esophagus	1.94	1.94	000	2	0	1	0	0
43453	A		Dilate esophagus	2.89	2.89	000	2	0	1	0	0
43456	A		Dilate esophagus	4.85	4.85	000	2	0	1	0	0
43458	A		Dilate esophagus	4.40	4.40	000	2	0	1	0	0
43460	A		Pressure treatment	5.15	5.15	000	2	0	1	0	0

(123) Esophagus, other procedures:

43496	C		Free jejunum transfer	0.00	0.00	090	2	0	2	1	0
43499	C		Esophagus surgery	0.00	0.00	YYY	2	0	2	1	1

(124) Stomach, incision:

43500	A		Surgical opening	14.24	14.24	090	2	0	2	1	0
43501	A		Surgical repair	23.20	23.20	090	2	0	2	1	0
43502	A		Surgical repair	25.34	25.34	090	2	0	2	1	0
43510	A		Surgical opening	17.60	17.60	090	2	0	2	1	0
43520	A		Incise pyloric muscle	11.73	11.73	090	2	0	2	1	0

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(125) Stomach, excision:										
43600	A	Biopsy of stomach	2.24	2.24	000	2	0	1	0	0
43605	A	Biopsy of stomach	14.73	14.73	090	2	0	2	1	0
43610	A	Excision of stomach	18.96	18.96	090	2	0	2	1	0
43611	A	Excision of stomach	21.21	21.21	090	2	0	2	1	0
43620	A	Removal of stomach	37.08	37.08	090	2	0	2	1	0
43621	A	Removal of stomach	37.55	37.55	090	2	0	2	1	0
43622	A	Removal of stomach	38.77	38.77	090	2	0	2	1	0
43631	A	Removal of stomach	31.31	31.31	090	2	0	2	1	0
43632	A	Removal of stomach	31.31	31.31	090	2	0	2	1	0
43633	A	Removal of stomach	31.71	31.71	090	2	0	2	1	0
43634	A	Removal of stomach	42.49	42.49	090	2	0	2	1	0
43635	A	Partial removal	3.06	3.06	ZZZ	0	0	2	1	0
43638	A	Partial removal	33.58	33.58	090	2	0	2	1	0
43639	A	Removal of stomach	34.02	34.02	090	2	0	2	1	0
43640	A	Vagotomy, pyloroplasty	24.64	24.64	090	2	0	2	1	0
43641	A	Vagotomy, pyloroplasty	24.83	24.83	090	2	0	2	1	0
(126) Stomach, introduction:										
43750	A	Place gastrostomy tube	8.59	8.59	010	2	0	1	0	0
43760	A	Change gastrostomy tube	1.71	1.71	000	2	0	1	0	0
43761	A	Reposition gastric tube	2.99	2.99	000	2	0	1	0	0
(127) Stomach, other procedures:										
43800	A	Reconstruction	16.92	16.92	090	2	0	2	1	0
43810	A	Fusion of stoma	18.38	18.38	090	2	0	2	1	0
43820	A	Fusion of stoma	19.63	19.63	090	2	0	2	1	0
43825	A	Fusion of stoma	25.30	25.30	090	2	0	2	1	0
43830	A	Place gastrostomy tube	13.24	13.24	090	2	0	2	1	0
43831	A	Place gastrostomy tube	12.19	12.19	090	2	0	2	1	0
43832	A	Place gastrostomy tube	19.25	19.25	090	2	0	2	1	0
43840	A	Repair of stoma	19.28	19.28	090	2	0	2	1	0
43842	A	Gastroplasty	28.22	28.22	090	2	0	2	2	0
43843	A	Gastroplasty	28.35	28.35	090	2	0	2	2	0
43846	A	Gastric bypass	33.50	33.50	090	2	0	2	1	0
43847	A	Gastric bypass	35.58	35.58	090	2	0	2	1	0
43848	A	Revise gastroplasty	37.37	37.37	090	2	0	2	1	0
43850	A	Revise stomach-bowel	30.36	30.36	090	2	0	2	1	0
43855	A	Revise stomach-bowel	30.25	30.25	090	2	0	2	1	0
43860	A	Revise stomach-bowel	30.53	30.53	090	2	0	2	1	0
43865	A	Revise stomach-bowel	33.75	33.75	090	2	0	2	1	0
43870	A	Repair stomach opening	12.92	12.92	090	2	0	2	1	0
43880	A	Repair stomach-bowel	26.76	26.76	090	2	0	2	1	0
43999	C	Stomach surgery	0.00	0.00	YYY	2	0	0	1	1

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(128) Intestines, incision:											
44005	A	Freeing of bowel		21.53	21.53	090	2	0	2	1	0
44010	A	Incision of small bowel		17.15	17.15	090	2	0	2	1	0
44015	A	Insert needle catheter		5.41	5.41	ZZZ	0	0	2	1	0
44020	A	Explore small bowel		19.28	19.28	090	2	0	2	1	0
44021	A	Decompress small bowel		18.48	18.48	090	2	0	2	1	0
44025	A	Incision of large bowel		19.42	19.42	090	2	0	2	1	0
44050	A	Reduce bowel obstruction		18.76	18.76	090	2	0	2	1	0
44055	A	Correct malrotation		20.21	20.21	090	2	0	2	1	0
(129) Intestines, excision:											
44100	A	Biopsy of bowel		3.23	3.23	000	2	0	1	0	0
44110	A	Excision of bowel		17.42	17.42	090	2	0	2	1	0
44111	A	Excision of bowel		21.59	21.59	090	2	0	2	1	0
44120	A	Remove small intestine		23.41	23.41	090	2	0	2	1	0
44121	A	Remove small intestine		6.58	6.58	ZZZ	0	0	2	1	0
44125	A	Remove small intestine		25.22	25.22	090	2	0	2	1	0
44130	A	Bowel to bowel fusion		20.62	20.62	090	2	0	2	1	0
44139	A	Mobilization of flexure		3.30	3.30	ZZZ	0	0	2	1	0
44140	A	Partial removal of colon		28.96	28.96	090	2	0	2	1	0
44141	A	Partial removal of colon		30.57	30.57	090	2	0	2	1	0
44143	A	Partial removal of colon		31.60	31.60	090	2	0	2	1	0
44144	A	Partial removal of colon		30.19	30.19	090	2	0	2	1	0
44145	A	Partial removal of colon		35.37	35.37	090	2	0	2	1	0
44146	A	Partial removal of colon		38.13	38.13	090	2	0	2	1	0
44147	A	Partial removal of colon		33.13	33.13	090	2	0	2	1	0
44150	A	Removal of colon		35.16	35.16	090	2	0	2	1	0
44151	A	Removal of colon		29.28	29.28	090	2	0	2	1	0
44152	A	Removal of colon		38.93	38.93	090	2	0	2	1	0
44153	A	Removal of colon		45.05	45.05	090	2	0	2	1	0
44155	A	Removal of colon		40.20	40.20	090	2	0	2	1	0
44156	A	Removal of colon		33.29	33.29	090	2	0	2	1	0
44160	A	Removal of colon		27.91	27.91	090	2	0	2	1	0
(130) Intestines, enterostomy, external fistulization of intestines:											
44300	A	Open bowel to skin		14.60	14.60	090	2	0	2	1	0
44310	A	Ileostomy/jejunostomy		19.15	19.15	090	2	0	2	1	0
44312	A	Revision of ileostomy		8.56	8.56	090	2	0	0	0	0
44314	A	Revision of ileostomy		17.14	17.14	090	2	0	2	1	0
44316	A	Devise bowel pouch		24.14	24.14	090	2	0	2	1	0
44320	A	Colostomy		19.82	19.82	090	2	0	2	1	0
44322	A	Colostomy with biopsies		20.67	20.67	090	2	0	2	1	0
44340	A	Revision of colostomy		6.95	6.95	090	2	0	1	1	0
44345	A	Revision of colostomy		15.52	15.52	090	2	0	2	1	0
44346	A	Revision of colostomy		18.50	18.50	090	2	0	2	1	0
(131) Intestines, endoscopy, small bowel and stomach:											
44360	A	Small bowel endoscopy		5.93	5.93	000	2	0	1	0	0
44361	A	Small bowel endoscopy		6.55	6.55	000	3	0	1	0	0
44363	A	Small bowel endoscopy		6.66	6.66	000	3	0	0	0	0
44364	A	Small bowel endoscopy		8.71	8.71	000	3	0	0	0	0

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(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
44365	A		Small bowel endoscopy	7.74	7.74	000	3	0	0	0	0
44366	A		Small bowel endoscopy	10.04	10.04	000	3	0	1	0	0
44369	A		Small bowel endoscopy	10.31	10.31	000	3	0	0	0	0
44372	A		Small bowel endoscopy	10.17	10.17	000	3	0	1	0	0
44373	A		Small bowel endoscopy	8.04	8.04	000	3	0	1	0	0
44376	A		Small bowel endoscopy	9.22	9.22	000	2	0	0	0	0
44377	A		Small bowel endoscopy	9.70	9.70	000	3	0	0	0	0
44378	A		Small bowel endoscopy	12.28	12.28	000	3	0	0	0	0
44380	A		Small bowel endoscopy	3.10	3.10	000	2	0	1	0	0
44382	A		Small bowel endoscopy	3.74	3.74	000	2	0	1	0	0
44385	A		Endoscopy of bowel	4.09	3.77	000	2	0	1	0	0
44386	A		Endoscopy of bowel	3.49	3.49	000	2	0	0	0	0
44388	A		Colonoscopy	6.32	5.83	000	2	0	1	0	0
44389	A		Colonoscopy with biopsy	6.95	6.41	000	3	0	1	0	0
44390	A		Colonoscopy, foreign body	6.17	6.17	000	3	0	0	0	0
44391	A		Colonoscopy for bleeding	9.30	8.80	000	3	0	0	0	0
44392	A		Colonoscopy, polypectomy	8.84	7.91	000	3	0	1	0	0
44393	A		Colonoscopy, lesion	10.01	9.92	000	3	0	1	0	0
44394	A		Colonoscopy, snare	9.39	9.11	000	3	0	1	0	0

(132) Intestines, introduction:

44500	A		Gastrointestinal tube	0.80	0.80	000	0	0	0	0	0
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(133) Intestines, repair:

44602	A		Suture, small intestine	17.91	17.91	090	2	0	2	1	0
44603	A		Suture, small intestine	22.57	22.57	090	2	0	2	1	0
44604	A		Suture, large intestine	21.49	21.49	090	2	0	2	1	0
44605	A		Repair of bowel	24.12	24.12	090	2	0	2	1	0
44615	A		Strictureplasty	20.26	20.26	090	2	0	2	1	0
44620	A		Repair bowel opening	16.33	16.33	090	2	0	2	1	0
44625	A		Repair bowel opening	22.55	22.55	090	2	0	2	1	0
44626	A		Repair bowel opening	32.81	32.81	090	2	0	2	1	0
44640	A		Repair bowel-skin	20.52	20.52	090	2	0	2	1	0
44650	A		Repair bowel fistula	21.73	21.73	090	2	0	2	1	0
44660	A		Repair bowel-bladder	22.00	22.00	090	2	0	2	1	0
44661	A		Repair bowel-bladder	30.28	30.28	090	2	0	2	1	0
44680	A		Surgical revision	23.01	23.01	090	2	0	2	1	0

(134) Intestines, other procedures:

44700	A		Suspend bowel	25.33	25.33	090	2	0	2	1	0
44799	C		Intestine surgery	0.00	0.00	YYY	2	0	2	1	1

(135) Meckel's diverticulum and mesentery, excision:

44800	A		Excision of bowel	15.85	15.85	090	2	0	2	1	0
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Proposed Rules

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44820	A		Excision of mesentery	15.63	15.63	090	2	0	2	1	0
(136) Meckel's diverticulum and mesentery, suture:											
44850	A		Repair of mesentery	14.75	14.75	090	2	0	2	1	0
(137) Meckel's diverticulum and mesentery, other procedures:											
44899	C		Bowel surgery	0.00	0.00	YYY	2	0	2	1	1
(138) Appendix, incision:											
44900	A		Drain appendix abscess	12.63	12.63	090	2	0	2	1	0
44901	A		Drain appendix abscess	5.71	5.71	000	2	0	2	0	0
(139) Appendix, excision:											
44950	A		Appendectomy	13.18	13.18	090	2	0	2	1	0
44955	A		Appendectomy	3.34	3.34	ZZZ	0	0	2	1	0
44960	A		Appendectomy	16.12	16.12	090	2	0	2	1	0
(140) Rectum, incision:											
45000	A		Drain pelvic abscess	5.77	5.77	090	2	0	1	0	0
45005	A		Drain rectum abscess	3.17	3.17	010	2	0	1	0	0
45020	A		Drain rectum abscess	7.09	7.09	090	2	0	1	0	0
(141) Rectum, excision:											
45100	A		Biopsy of rectum	5.35	5.35	090	2	0	1	0	0
45108	A		Removal of anorectal	7.18	7.18	090	2	0	2	1	0
45110	A		Removal of rectum	39.26	39.26	090	2	0	2	1	0
45111	A		Partial removal	27.70	27.70	090	2	0	2	1	0
45112	A		Removal of rectum	40.93	40.93	090	2	0	2	1	0
45113	A		Partial removal	40.96	40.96	090	2	0	2	1	0
45114	A		Partial removal	37.73	37.73	090	2	0	2	1	0
45116	A		Partial removal	30.66	30.66	090	2	0	2	1	0
45119	A		Removal of rectum	41.16	41.16	090	2	0	2	1	0
45120	A		Removal of rectum	40.12	40.12	090	2	0	2	1	0
45121	A		Removal of rectum	36.08	36.08	090	2	0	2	1	0
45123	A		Partial removal	25.63	25.63	090	2	0	2	1	0
45130	A		Excision of rectum	22.29	22.29	090	2	0	2	1	0
45135	A		Excision of rectum	32.22	32.22	090	2	0	2	1	0
45150	A		Excision of rectum	8.76	8.76	090	2	0	0	0	0
45160	A		Excision of rectum	19.89	19.89	090	2	0	2	1	0
45170	A		Excision of rectum	13.86	13.86	090	2	0	2	1	0
(142) Rectum, destruction:											
45190	A		Destruction of rectum	13.02	13.02	090	2	0	2	1	0
(143) Rectum, endoscopy:											
45300	A		Proctosigmoidoscopy	1.21	0.94	000	2	0	1	0	0
45303	A		Proctosigmoidoscopy	1.41	1.10	000	3	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
45305		A	Proctosigmoidoscopy	1.81	1.40	000	3	0	1	0	0
45307		A	Proctosigmoidoscopy	2.88	2.88	000	3	0	0	0	0
45308		A	Proctosigmoidoscopy	2.57	2.03	000	3	0	1	0	0
45309		A	Proctosigmoidoscopy	3.03	2.48	000	3	0	1	0	0
45315		A	Proctosigmoidoscopy	3.55	3.55	000	3	0	1	0	0
45317		A	Proctosigmoidoscopy	3.80	3.80	000	3	0	1	0	0
45320		A	Proctosigmoidoscopy	4.61	4.61	000	3	0	1	0	0
45321		A	Proctosigmoidoscopy	3.49	3.49	000	3	0	1	0	0
45330		A	Sigmoidoscopy, flexible	2.13	1.45	000	2	0	1	0	0
45331		A	Sigmoidoscopy and biopsy	2.78	2.57	000	3	0	1	0	0
45332		A	Sigmoidoscopy	3.57	3.57	000	3	0	1	0	0
45333		A	Sigmoidoscopy/polypectomy	4.09	4.01	000	3	0	1	0	0
45334		A	Sigmoidoscopy, bleeding	5.46	5.46	000	3	0	1	0	0
45337		A	Sigmoidoscopy	4.86	4.86	000	3	0	1	0	0
45338		A	Sigmoidoscopy	4.64	4.64	000	3	0	1	0	0
45339		A	Sigmoidoscopy	6.15	6.15	000	3	0	1	0	0
45355		A	Surgical colonoscopy	4.38	4.38	000	2	0	1	0	0
45378		A	Diagnostic colonoscopy	7.56	7.51	000	2	0	1	0	0
45378	53	A	Diagnostic colonoscopy	2.13	1.96	000	2	0	1	0	0
45379		A	Colonoscopy	9.68	9.55	000	3	0	1	0	0
45380		A	Colonoscopy and biopsy	8.49	8.12	000	3	0	1	0	0
45382		A	Colonoscopy for bleeding	11.10	11.10	000	3	0	1	0	0
45383		A	Colonoscopy, lesion	11.32	11.32	000	3	0	1	0	0
45384		A	Colonoscopy	9.58	9.58	000	3	0	1	0	0
45385		A	Colonoscopy, lesion	11.56	10.78	000	3	0	1	0	0

(144) Rectum, repair:

45500		A	Repair of rectum	13.03	13.03	090	2	0	0	0	0
45505		A	Repair of rectum	12.22	12.22	090	2	0	1	0	0
45520		A	Treatment of rectum	1.14	0.85	000	2	0	1	0	0
45540		A	Correct rectal prolapse	22.44	22.44	090	2	0	2	1	0
45541		A	Correct rectal prolapse	20.61	20.61	090	2	0	2	1	0
45550		A	Repair rectum, remove	28.99	28.99	090	2	0	2	1	0
45560		A	Repair of rectocele	12.79	12.79	090	2	0	2	1	0
45562		A	Explore/repair injury	19.77	19.77	090	2	0	2	1	0
45563		A	Explore/repair injury	30.62	30.62	090	2	0	2	1	0
45800		A	Repair rectum/bladder	23.09	23.09	090	2	0	2	1	0
45805		A	Repair fistula	28.20	28.20	090	2	0	2	1	0
45820		A	Repair rectourethral	22.67	22.67	090	2	0	2	1	0
45825		A	Repair fistula	25.76	25.76	090	2	0	2	1	0

(145) Rectum, manipulation:

45900		A	Reduce rectal prolapse	2.28	2.28	010	2	0	0	0	0
45905		A	Dilate anal sphincter	2.21	2.21	010	2	0	1	0	0
45910		A	Dilate rectal stricture	2.69	2.69	010	2	0	1	0	0
45915		A	Remove rectal obstruction	2.80	2.80	010	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(146) Rectum, other procedures:											
45999	C	Rectum surgery		0.00	0.00	YYY	2	0	0	1	1
(147) Anus, incision:											
46030	A	Removal of rectum		1.54	1.54	010	2	0	0	0	0
46040	A	Incision of rectum		6.32	6.32	090	2	0	1	0	0
46045	A	Incision of rectum		5.92	5.92	090	2	0	1	0	0
46050	A	Incision of anal abscess		1.72	1.43	010	2	0	1	0	0
46060	A	Incision of rectum		10.95	10.95	090	2	0	1	0	0
46070	A	Incision of anal septum		3.97	3.97	090	2	0	0	0	0
46080	A	Incise anal sphincter		4.56	4.56	010	2	0	1	0	0
46083	A	Incise hemorrhoid		1.92	1.62	010	2	0	1	0	0
(148) Anus, excision:											
46200	A	Removal of anal fissure		6.65	6.65	090	2	0	1	0	0
46210	A	Removal of anal crypt		3.24	3.24	090	2	0	0	0	0
46211	A	Removal of anal crypts		5.90	5.90	090	2	0	0	0	0
46220	A	Removal of anal tab		2.09	2.09	010	2	0	1	0	0
46221	A	Ligation of hemorrhoid		2.01	1.69	010	2	0	1	0	0
46230	A	Removal of anal tabs		3.20	2.80	010	2	0	1	0	0
46250	A	Hemorrhoidectomy		7.14	7.14	090	2	0	1	0	0
46255	A	Hemorrhoidectomy		9.89	9.89	090	2	0	1	0	0
46257	A	Remove hemorrhoid		11.35	11.35	090	2	0	1	0	0
46258	A	Remove hemorrhoid		12.40	12.40	090	2	0	0	0	0
46260	A	Hemorrhoidectomy		13.29	13.29	090	2	0	1	0	0
46261	A	Remove hemorrhoid		14.61	14.61	090	2	0	1	0	0
46262	A	Remove hemorrhoid		15.18	15.18	090	2	0	1	0	0
46270	A	Removal of anal fistula		5.39	5.39	090	2	0	1	0	0
46275	A	Removal of anal fistula		9.61	9.61	090	2	0	1	0	0
46280	A	Removal of anal fistula		11.99	11.99	090	2	0	1	0	0
46285	A	Removal of anal fistula		6.15	6.15	090	2	0	2	0	0
46288	A	Repair anal fistula		10.38	10.38	090	2	0	1	0	0
46320	A	Removal of hemorrhoid		2.20	1.86	010	2	0	1	0	0
(149) Anus, introduction:											
46500	A	Injection, hemorrhoids		1.80	1.65	010	2	0	1	0	0
(150) Anus, endoscopy:											
46600	A	Diagnostic anoscopy		0.74	0.61	000	2	0	1	0	0
46604	A	Anoscopy and dilation		1.59	1.41	000	3	0	1	0	0
46606	A	Anoscopy and biopsy		1.12	0.94	000	3	0	1	0	0
46608	A	Anoscopy, remove foreign		2.47	2.47	000	3	0	0	0	0
46610	A	Anoscopy, remove tumor		2.10	2.10	000	3	0	1	0	0
46611	A	Anoscopy		2.55	2.14	000	3	0	0	0	0
46612	A	Anoscopy, remove tumor		3.58	3.58	000	3	0	0	0	0
46614	A	Anoscopy, bleeding		3.46	2.71	000	3	0	1	0	0
46615	A	Anoscopy		4.07	3.32	000	3	0	0	0	0
(151) Anus, repair:											
46700	A	Repair of anal stricture		13.20	13.20	090	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
46705	A		Repair of anal stricture	10.41	10.41	090	2	0	2	1	0
46715	A		Repair of anovaginal	10.61	10.61	090	2	0	2	0	0
46716	A		Repair of anovaginal	17.65	17.65	090	2	0	2	1	0
46730	A		Construction of absent	31.33	31.33	090	2	0	2	1	0
46735	A		Construction of absent	37.82	37.82	090	2	0	2	1	0
46740	A		Construction of absent	33.61	33.61	090	2	0	2	1	0
46742	A		Repair imperforated anus	47.08	47.08	090	2	0	2	1	0
46744	A		Repair, cloacalanomaly	52.76	52.76	090	2	0	2	1	0
46746	A		Repair, cloacalanomaly	58.09	58.09	090	2	0	2	1	0
46748	A		Repair, cloacalanomaly	64.35	64.35	090	2	0	2	1	0
46750	A		Repair of anal sphincter	13.86	13.86	090	2	0	2	1	0
46751	A		Repair of anal sphincter	12.23	12.23	090	2	0	2	1	0
46753	A		Reconstruction	11.26	11.26	090	2	0	1	0	0
46754	A		Removal of suture	2.99	2.99	010	2	0	0	0	0
46760	A		Repair of anal sphincter	17.75	17.75	090	2	0	2	1	0
46761	A		Repair of anal sphincter	17.32	17.32	090	2	0	2	1	0
46762	A		Implant sphincter	15.35	15.35	090	2	0	2	1	0

(152) Anus, destruction:

46900	A		Destruction, anus	2.14	1.96	010	2	0	1	0	0
46910	A		Destruction, anus	2.35	2.04	010	2	0	1	0	0
46916	A		Cryosurgery, anus	2.37	2.05	010	2	0	1	0	0
46917	A		Laser surgery, anus	3.73	2.80	010	2	0	1	0	0
46922	A		Excision of anus	3.05	3.05	010	2	0	1	0	0
46924	A		Destruction, anus	5.23	5.23	010	2	0	1	0	0
46934	A		Destruction, hemorrhoids	4.95	4.37	090	2	0	1	0	0
46935	A		Destruction, hemorrhoids	3.89	3.11	010	2	0	1	0	0
46936	A		Destruction, hemorrhoids	6.25	5.14	090	2	0	1	0	0
46937	A		Cryotherapy, rectal tumor	4.96	4.96	010	2	0	0	0	0
46938	A		Cryotherapy, rectal tumor	6.93	6.93	090	2	0	0	0	0
46940	A		Treatment of anus	2.65	2.40	010	2	0	1	0	0
46942	A		Treatment of anus	2.34	2.12	010	2	0	0	0	0

(153) Anus, suture:

46945	A		Ligation of hemorrhoids	2.62	2.31	090	2	0	1	0	0
46946	A		Ligation of hemorrhoids	3.73	3.27	090	2	0	1	0	0

(154) Anus, other procedures:

46999	C		Anus surgery	0.00	0.00	YYY	2	0	0	1	1
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(155) Liver, incision:

47000	A		Needle biopsy of liver	3.15	3.15	000	2	0	1	0	0
47001	A		Needle biopsy of liver	3.15	3.15	ZZZ	0	0	1	1	0
47010	A		Open drainage of abscess	16.48	16.48	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
47011		A	Percutaneous drainage	6.25	6.25	000	2	0	2	0	0
47015		A	Inject/aspirate	15.95	15.95	090	2	0	2	1	0
(156) Liver, excision:											
47100		A	Wedge biopsy of liver	10.35	10.35	090	2	0	2	1	0
47120		A	Partial removal	33.65	33.65	090	2	0	2	1	0
47122		A	Extensive removal	51.09	51.09	090	2	0	2	1	0
47125		A	Partial removal	47.50	47.50	090	2	0	2	1	0
47130		A	Partial removal	51.77	51.77	090	2	0	2	1	0
47133		X	Removal of donor	0.00	0.00	XXX	9	9	9	9	9
47134		R	Partial removal	57.95	57.95	XXX	2	0	2	1	2
47135		R	Transplantation	31.31	31.31	090	2	0	2	1	2
47136		R	Transplantation	98.93	98.93	090	2	0	2	1	2
(157) Liver, repair:											
47300		A	Surgery for liver	17.07	17.07	090	2	0	2	1	0
47350		A	Repair liver wound	19.43	19.43	090	2	0	2	1	0
47360		A	Repair liver wound	27.45	27.45	090	2	0	2	1	0
47361		A	Repair liver wound	43.48	43.48	090	2	0	2	1	0
47362		A	Repair liver wound	16.51	16.51	090	2	0	2	1	0
(158) Liver, other procedures:											
47399		C	Liver surgery	0.00	0.00	YYY	2	0	2	1	1
(159) Biliary tract, incision:											
47400		A	Incision of liver	27.93	27.93	090	2	0	2	1	0
47420		A	Incision of bile duct	25.43	25.43	090	2	0	2	1	0
47425		A	Incision of bile duct	27.80	27.80	090	2	0	2	1	0
47460		A	Incise bile duct	29.79	29.79	090	2	0	2	1	0
47480		A	Incision of gallbladder	16.48	16.48	090	2	0	2	1	0
47490		A	Incision of gallbladder	10.22	10.22	090	2	0	1	0	0
(160) Biliary tract, introduction:											
47500		A	Injection for liver	3.32	3.32	000	2	0	1	0	0
47505		A	Injection for liver	1.71	1.58	000	2	0	0	0	0
47510		A	Insert catheter	10.02	10.02	090	2	0	1	0	0
47511		A	Insert bile duct	12.44	12.44	090	2	1	1	0	0
47525		A	Change bile duct	6.66	6.66	010	2	0	1	0	0
47530		A	Revise/reinsert bile tube	6.87	6.87	090	2	0	1	0	0
(161) Biliary tract, endoscopy:											
47550		A	Biliary endoscopy	4.44	4.44	000	0	0	2	1	0
47552		A	Biliary endoscopy	6.91	6.91	000	2	0	1	1	0
47553		A	Biliary endoscopy	9.78	9.78	000	3	0	1	0	0
47554		A	Biliary endoscopy	12.39	12.39	000	3	0	1	1	0
47555		A	Biliary endoscopy	9.57	9.57	000	3	0	1	0	0
47556		A	Biliary endoscopy	10.48	10.48	000	3	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(162) Biliary tract, excision:											
47600	A	Removal of gallbladder		18.51	18.51	090	2	0	2	1	0
47605	A	Removal of gallbladder		20.05	20.05	090	2	0	2	1	0
47610	A	Removal of gallbladder		24.52	24.52	090	2	0	2	1	0
47612	A	Removal of gallbladder		29.77	29.77	090	2	0	2	1	0
47620	A	Removal of gallbladder		27.91	27.91	090	2	0	2	1	0
47630	A	Remove bile duct		12.11	12.11	090	2	0	1	1	0
47700	A	Explore bile ducts		21.80	21.80	090	2	0	2	1	0
47701	A	Bile duct revision		34.22	34.22	090	2	0	0	0	0
47711	A	Excision of bile duct		30.59	30.59	090	2	0	2	1	0
47712	A	Excision of bile duct		36.10	36.10	090	2	0	2	1	0
47715	A	Excision of bile duct		23.24	23.24	090	2	0	2	1	0
47716	A	Fusion of bile duct cyst		19.74	19.74	090	2	0	2	1	0

(163) Biliary tract, repair:

47720	A	Fuse gallbladder		22.06	22.06	090	2	0	2	1	0
47721	A	Fuse upper GI structures		26.99	26.99	090	2	0	2	1	0
47740	A	Fuse gallbladder		25.15	25.15	090	2	0	2	1	0
47741	A	Fuse gallbladder		31.82	31.82	090	2	0	2	1	0
47760	A	Fuse bile ducts		32.35	32.35	090	2	0	2	1	0
47765	A	Fuse liver ducts		34.75	34.75	090	2	0	2	1	0
47780	A	Fuse bile ducts		34.37	34.37	090	2	0	2	1	0
47785	A	Fuse bile ducts		37.94	37.94	090	2	0	2	1	0
47800	A	Reconstruction		31.90	31.90	090	2	0	2	1	0
47801	A	Placement, bile duct		17.32	17.32	090	2	0	2	1	0
47802	A	Fuse liver duct		27.34	27.34	090	2	0	2	1	0
47900	A	Suture bile duct		29.31	29.31	090	2	0	2	1	0

(164) Biliary tract, other procedures:

47999	C	Bile tract surgery		0.00	0.00	YYY	2	0	2	1	1
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(165) Pancreas, incision:

48000	A	Drainage of abdomen		21.12	21.12	090	2	0	2	1	0
48001	A	Placement of drains		25.99	25.99	090	2	0	2	1	0
48005	A	Resect/debride pancrea		30.39	30.39	090	2	0	2	1	0
48020	A	Removal of calculus		20.32	20.32	090	2	0	2	1	0

(166) Pancreas, excision:

48100	A	Biopsy of pancreas		14.56	14.56	090	2	0	2	1	0
48102	A	Needle biopsy, pancreas		6.71	6.71	010	2	0	1	0	0
48120	A	Removal of pancreas		23.57	23.57	090	2	0	2	1	0
48140	A	Partial removal		33.26	33.26	090	2	0	2	1	0
48145	A	Partial removal		36.67	36.67	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
48146	A		Pancreatectomy	38.69	38.69	090	2	0	2	1	0
48148	A		Removal of pancreas	23.14	23.14	090	2	0	2	1	0
48150	A		Partial removal	63.86	63.86	090	2	0	2	1	0
48152	A		Pancreatectomy	60.37	60.37	090	2	0	2	1	0
48153	A		Pancreatectomy	63.77	63.77	090	2	0	2	1	0
48154	A		Pancreatectomy	60.66	60.66	090	2	0	2	1	0
48155	A		Removal of pancreas	42.32	42.32	090	2	0	2	1	0
48160	N		Pancreas removal	0.00	0.00	XXX	9	9	9	9	9
48180	A		Fuse pancreas and bowel	33.95	33.95	090	2	0	2	1	0
(167) Pancreas, introduction:											
48400	A		Injection, intraoperative	2.90	2.90	ZZZ	0	0	0	0	0
(168) Pancreas, repair:											
48500	A		Surgery of pancreas	21.72	21.72	090	2	0	2	1	0
48510	A		Drain pancreatic cyst	19.84	19.84	090	2	0	2	1	0
48511	A		Drain pancreatic cyst	6.75	6.75	000	2	0	2	0	0
48520	A		Fuse pancreatic cyst	25.07	25.07	090	2	0	2	1	0
48540	A		Fuse pancreatic cyst	29.90	29.90	090	2	0	2	1	0
48545	A		Pancreatorrhaphy	23.34	23.34	090	2	0	2	1	0
48547	A		Duodenal exclusion	33.37	33.37	090	2	0	2	1	0
(169) Pancreas, transplantation:											
48550	N		Donor pancreatectomy	0.00	0.00	XXX	9	9	9	9	9
48554	N		Transplant allograft	0.00	0.00	XXX	9	9	9	9	9
48556	A		Removal, allograft	22.21	22.21	090	2	0	2	1	0
(170) Pancreas, other procedures:											
48999	C		Pancreas surgery	0.00	0.00	YYY	2	0	2	1	1
(171) Abdomen, peritoneum, and omentum, incision:											
49000	A		Exploration of abdomen	17.93	17.93	090	2	0	2	1	0
49002	A		Reopening of abdomen	16.03	16.03	090	2	0	2	1	0
49010	A		Explore behind abdomen	18.58	18.58	090	2	0	2	1	0
49020	A		Drain abdominal abscess	20.40	20.40	090	2	0	2	0	0
49021	A		Drain abdominal abscess	7.16	7.16	000	2	0	2	0	0
49040	A		Open drainage of abscess	16.04	16.04	090	2	0	2	1	0
49041	A		Percutaneous drainage	6.75	6.75	000	2	0	2	0	0
49060	A		Open drainage of abscess	16.49	16.49	090	2	0	2	1	0
49061	A		Percutaneous drainage	6.25	6.25	000	2	0	2	0	0
49062	A		Drain to peritoneal	18.54	18.54	090	2	0	2	1	0
49080	A		Puncture, peritoneal	2.11	2.11	000	2	0	1	0	0
49081	A		Removal of abdomen	1.91	1.91	000	2	0	1	0	0
49085	A		Removal of abdomen	11.82	11.82	090	2	0	1	1	0
(172) Abdomen, peritoneum, and omentum, excision, destruction:											
49180	A		Biopsy, abdominal mass	3.44	3.44	000	2	0	1	0	0
49200	A		Removal of abdomen	18.34	18.34	090	2	0	2	1	0
49201	A		Removal of abdomen	26.54	26.54	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
49215	A		Excise sacral tumor	29.39	29.39	090	2	0	2	1	0
49220	A		Multiple surgery	26.78	26.78	090	2	0	2	1	0
49250	A		Excision of umbilicus	12.48	12.48	090	2	0	1	1	0
49255	A		Removal of omentum	15.73	15.73	090	2	0	2	1	0

(173) Abdomen, peritoneum, and omentum, introduction, revision, and/or removal:

49400	A		Air injection	2.88	2.88	000	2	0	1	0	0
49420	A		Insert abdominal catheter	3.65	3.65	000	2	0	1	0	0
49421	A		Insert abdominal catheter	9.47	9.47	090	2	0	1	0	0
49422	A		Remove permanent	10.12	10.12	010	2	0	1	0	0
49423	A		Exchange drainage	2.46	2.46	000	2	0	0	0	0
49424	A		Assess cyst, contrast	1.28	1.28	000	2	0	0	0	0
49425	A		Insert abdomen-vein	19.49	19.49	090	2	0	2	1	0
49426	A		Revise abdomen-vein	14.54	14.54	090	2	0	1	0	0
49427	A		Injection, abdomen-vein	1.30	1.30	000	2	0	0	0	0
49428	A		Ligation of shunt	3.30	3.30	010	2	0	1	0	0
49429	A		Removal of shunt	10.35	10.35	010	2	0	1	0	0

(174) Abdomen, peritoneum, and omentum, repair:

49495	A		Repair inguinal hernia	10.68	10.68	090	2	1	2	1	0
49496	A		Repair inguinal hernia	13.44	13.44	090	2	1	2	1	0
49500	A		Repair inguinal hernia	9.58	9.58	090	2	1	2	1	0
49501	A		Repair inguinal hernia	12.35	12.35	090	2	1	2	1	0
49505	A		Repair inguinal hernia	10.77	10.77	090	2	1	2	1	0
49507	A		Repair inguinal hernia	12.88	12.88	090	2	1	2	1	0
49520	A		Re-repair inguinal	13.12	13.12	090	2	1	2	1	0
49521	A		Repair inguinal hernia	14.74	14.74	090	2	1	2	1	0
49525	A		Repair inguinal hernia	12.65	12.65	090	2	1	2	1	0
49540	A		Repair lumbar hernia	13.69	13.69	090	2	1	2	1	0
49550	A		Repair femoral hernia	11.68	11.68	090	2	1	2	1	0
49553	A		Repair femoral hernia	12.30	12.30	090	2	1	2	1	0
49555	A		Repair femoral hernia	13.56	13.56	090	2	1	2	1	0
49557	A		Repair femoral hernia	15.20	15.20	090	2	1	2	1	0
49560	A		Repair abdominal hernia	15.08	15.08	090	2	1	2	1	0
49561	A		Repair incision	17.16	17.16	090	2	1	2	1	0
49565	A		Re-repair hernia	15.91	15.91	090	2	1	2	1	0
49566	A		Repair incision	18.10	18.10	090	2	1	2	1	0
49568	A		Hernia repair with mesh	7.24	7.24	ZZZ	0	1	2	1	0
49570	A		Repair epigastric hernia	9.14	9.14	090	2	1	2	1	0
49572	A		Repair epigastric hernia	11.28	11.28	090	2	1	2	1	0
49580	A		Repair umbilical hernia	7.43	7.43	090	2	0	2	1	0
49582	A		Repair umbilical hernia	10.13	10.13	090	2	0	2	1	0
49585	A		Repair umbilical hernia	9.59	9.59	090	2	0	2	1	0
49587	A		Repair umbilical hernia	10.63	10.63	090	2	0	2	1	0
49590	A		Repair abdominal hernia	12.73	12.73	090	2	1	2	1	0
49600	A		Repair umbilical hernia	14.90	14.90	090	2	0	2	1	0
49605	A		Repair umbilical hernia	29.83	29.83	090	2	0	2	1	0
49606	A		Repair umbilical hernia	25.44	25.44	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
49610	A		Repair umbilical hernia	15.53	15.53	090	2	0	2	1	0
49611	A		Repair umbilical hernia	17.11	17.11	090	2	0	2	1	0

(174) Abdomen, peritoneum, and omentum, suture:

49900	A		Repair of abdominal wall	15.10	15.10	090	2	0	2	1	0
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(176) Abdomen, peritoneum, and omentum, other procedures:

49905	A		Omental flap	9.69	9.69	ZZZ	0	0	2	2	0
49906	C		Free omental flap	0.00	0.00	090	2	0	2	1	0
49999	C		Abdomen surgery	0.00	0.00	YYY	2	0	2	1	1

D. Procedure code numbers 50010 to 59899 relate to genitourinary and maternity procedures.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(1) Kidney, incision:											
50010	A		Exploration of renal	19.82	19.82	090	2	0	2	1	0
50020	A		Open drain renal	20.35	20.35	090	2	0	1	1	0
50021	A		Percutaneous drain renal	5.71	5.71	000	2	0	2	0	0
50040	A		Drainage of kidney	20.84	20.84	090	2	0	2	1	0
50045	A		Exploration of kidney	24.00	24.00	090	2	0	2	1	0
50060	A		Removal of kidney	30.02	30.02	090	2	0	2	1	0
50065	A		Incision of kidney	33.07	33.07	090	2	0	2	0	0
50070	A		Incision of kidney	31.62	31.62	090	2	0	2	1	0
50075	A		Removal of kidney	40.19	40.19	090	2	0	2	1	0
50080	A		Removal of kidney	25.77	25.77	090	2	0	1	0	0
50081	A		Removal of kidney	35.04	35.04	090	2	0	2	1	0
50100	A		Revise kidney	25.34	25.34	090	2	0	2	1	0
50120	A		Exploration	25.67	25.67	090	2	0	2	1	0
50125	A		Explore and drain	26.16	26.16	090	2	0	2	1	0
50130	A		Removal of kidney	28.76	28.76	090	2	0	2	1	0
50135	A		Exploration	34.78	34.78	090	2	0	2	1	0

(2) Kidney, excision:

50200	A		Biopsy of kidney	5.03	5.03	000	2	0	1	0	0
50205	A		Biopsy of kidney	16.10	16.10	090	2	0	2	1	0
50220	A		Removal of kidney	29.21	29.21	090	2	0	2	1	0
50225	A		Removal of kidney	35.26	35.26	090	2	0	2	1	0
50230	A		Removal of kidney	38.82	38.82	090	2	0	2	2	0
50234	A		Removal of kidney	37.33	37.33	090	2	0	2	1	0
50236	A		Removal of kidney	40.66	40.66	090	2	0	2	1	0
50240	A		Partial removal	36.36	36.36	090	2	0	2	1	0
50280	A		Removal of kidney	25.36	25.36	090	2	0	2	1	0
50290	A		Removal of kidney	22.60	22.60	090	2	0	2	1	0

(3) Kidney, renal transplantation:

50300	X		Removal of donor kidney	0.00	0.00	XXX	9	9	9	9	9
50320	A		Removal of donor kidney	37.41	37.41	090	2	1	2	1	0
50340	A		Removal of kidney	24.33	24.33	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
50360	A	Transplantation		54.58	54.58	090	2	0	2	2	2
50365	A	Transplantation		65.23	65.23	090	2	1	2	2	2
50370	A	Remove transplant		24.22	24.22	090	2	0	2	1	0
50380	A	Reimplantation		29.56	29.56	090	2	0	2	1	0

(4) Kidney, introduction:

50390	A	Drainage of kidney		3.49	3.49	000	2	1	1	0	0
50392	A	Insert kidney drain		5.46	5.46	000	2	1	1	0	0
50393	A	Insert ureteral catheter		6.83	6.83	000	2	1	1	0	0
50394	A	Injection for kidney		1.25	1.25	000	2	1	1	0	0
50395	A	Create passage		6.45	6.45	000	2	1	1	0	0
50396	A	Measure kidney		2.41	2.41	000	2	1	0	0	0
50398	A	Change kidney tube		1.86	1.86	000	2	1	1	0	0

(5) Kidney, repair:

50400	A	Revision of kidney		31.65	31.65	090	2	0	2	1	0
50405	A	Revision of kidney		39.39	39.39	090	2	0	2	1	0
50500	A	Repair of kidney		30.71	30.71	090	2	0	2	1	0
50520	A	Close kidney-skin		26.46	26.46	090	2	0	2	1	0
50525	A	Repair renal-abscess		33.50	33.50	090	2	0	2	1	0
50526	A	Repair renal-abscess		30.22	30.22	090	2	0	2	0	0
50540	A	Revision of horseshoe		31.90	31.90	090	2	2	2	1	0

(6) Kidney, endoscopy:

50551	A	Kidney endoscopy		7.32	7.32	000	2	1	0	0	0
50553	A	Kidney endoscopy		7.14	7.14	000	2	1	1	0	0
50555	A	Kidney endoscopy		10.72	10.72	000	3	1	0	0	0
50557	A	Kidney endoscopy		10.83	10.83	000	3	1	0	0	0
50559	A	Renal endoscopy		7.53	7.53	000	3	1	0	0	0
50561	A	Kidney endoscopy		12.11	12.11	000	3	1	0	0	0
50570	A	Kidney endoscopy		10.14	10.14	000	2	1	0	0	0
50572	A	Kidney endoscopy		16.81	16.81	000	3	1	0	0	0
50574	A	Kidney endoscopy		17.20	17.20	000	3	1	0	0	0
50575	A	Kidney endoscopy		22.82	22.82	000	3	1	1	0	0
50576	A	Kidney endoscopy		18.80	18.80	000	3	1	0	0	0
50578	A	Renal endoscopy		14.62	14.62	000	3	1	0	0	0
50580	A	Kidney endoscopy		14.42	14.42	000	3	1	0	0	0

(7) Kidney, other procedures:

50590	A	Fragmenting		18.45	18.45	090	2	1	1	0	0
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(8) Ureter, incision:

50600	A	Exploration		24.30	24.30	090	2	1	2	1	0
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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
50605	A		Insert ureteral	20.27	20.27	090	2	1	2	1	0
50610	A		Removal of ureteral	26.47	26.47	090	2	1	2	1	0
50620	A		Removal of ureteral	25.50	25.50	090	2	1	2	1	0
50630	A		Removal of ureteral	26.53	26.53	090	2	1	2	1	0

(9) Ureter, excision:

50650	A		Removal of ureteral	28.13	28.13	090	2	0	2	1	0
50660	A		Removal of ureteral	30.66	30.66	090	2	0	2	1	0

(10) Ureter, introduction:

50684	A		Injection, ureterography	1.19	1.19	000	2	1	1	0	0
50686	A		Measure ureteral	1.75	1.75	000	2	0	0	0	0
50688	A		Change of ureteral	1.46	1.46	010	2	0	1	0	0
50690	A		Ureteropyelography	1.38	1.38	000	2	0	1	0	0

(11) Ureter, repair:

50700	A		Revision of ureteral	26.66	26.66	090	2	0	2	1	0
50715	A		Release of ureteral	28.84	28.84	090	2	1	2	1	0
50722	A		Release of ureteral	25.90	25.90	090	2	0	2	1	0
50725	A		Release/revise	29.39	29.39	090	2	0	2	1	0
50727	A		Revise ureteral	12.89	12.89	090	2	0	2	2	0
50728	A		Revise ureteral	18.97	18.97	090	2	0	2	2	0
50740	A		Fusion of ureteral	30.35	30.35	090	2	0	2	1	0
50750	A		Fusion of ureteral	31.97	31.97	090	2	0	2	0	0
50760	A		Fusion of ureteral	30.55	30.55	090	2	0	2	1	0
50770	A		Splicing of ureteral	33.27	33.27	090	2	0	2	1	0
50780	A		Reimplant ureteral	30.78	30.78	090	2	1	2	1	0
50782	A		Reimplant ureteral	31.85	31.85	090	2	1	2	2	0
50783	A		Reimplant ureteral	32.77	32.77	090	2	1	2	2	0
50785	A		Reimplant ureteral	34.52	34.52	090	2	1	2	1	0
50800	A		Implant ureteral	28.18	28.18	090	2	1	2	1	0
50810	A		Fusion of ureteral	31.31	31.31	090	2	0	2	1	0
50815	A		Urine shunt	38.70	38.70	090	2	1	2	1	0
50820	A		Construct bowel	39.57	39.57	090	2	1	2	1	0
50825	A		Construct bowel	56.92	56.92	090	2	0	2	1	0
50830	A		Revise urine fluid	49.87	49.87	090	2	0	2	1	0
50840	A		Replace ureteral	31.77	31.77	090	2	1	2	1	0
50845	A		Appendico-vesicostomy	33.11	33.11	090	2	0	2	1	0
50860	A		Transplant ureteral	25.13	25.13	090	2	1	2	1	0
50900	A		Repair of ureteral	22.64	22.64	090	2	0	2	1	0
50920	A		Closure of ureter	22.75	22.75	090	2	0	2	1	0
50930	A		Closure of ureter	29.74	29.74	090	2	0	2	1	0
50940	A		Release of ureteral	23.26	23.26	090	2	1	2	1	0

(12) Ureter, endoscopy:

50951	A		Endoscopy of ureteral	7.01	7.01	000	2	1	0	0	0
50953	A		Endoscopy of ureteral	7.36	7.36	000	3	1	0	0	0
50955	A		Ureter endoscopy	8.73	8.73	000	3	1	0	0	0
50957	A		Ureter endoscopy	8.72	8.72	000	3	1	0	0	0
50959	A		Ureter endoscopy	7.42	7.42	000	3	1	0	0	0
50961	A		Ureter endoscopy	8.17	8.17	000	3	1	0	0	0

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(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
50970	A		Ureter endoscopy	11.76	11.76	000	2	1	0	0	0
50972	A		Ureter endoscopy	7.83	7.83	000	2	1	0	0	0
50974	A		Ureter endoscopy	15.45	15.45	000	3	1	0	0	0
50976	A		Ureter endoscopy	14.74	14.74	000	3	1	0	0	0
50978	A		Ureter endoscopy	8.81	8.81	000	2	1	0	0	0
50980	A		Ureter endoscopy	9.41	9.41	000	2	1	0	0	0

(13) Bladder, incision:

51000	A		Drainage of bladder	1.20	1.20	000	2	0	1	0	0
51005	A		Drainage of bladder	1.39	1.39	000	2	0	1	0	0
51010	A		Drainage of bladder	4.20	4.20	010	2	0	1	0	0
51020	A		Incise and treat	13.10	13.10	090	2	0	2	1	0
51030	A		Incise and treat	10.76	10.76	090	2	0	0	0	0
51040	A		Incise and drain	9.08	9.08	090	2	0	2	1	0
51045	A		Incise bladder	11.21	11.21	090	2	0	2	0	0
51050	A		Removal of bladder	13.55	13.55	090	2	0	2	1	0
51060	A		Removal of ureteral	18.10	18.10	090	2	0	2	1	0
51065	A		Removal of ureteral	15.26	15.26	090	2	0	0	0	0
51080	A		Drainage of bladder	10.73	10.73	090	2	0	2	1	0

(14) Bladder, excision:

51500	A		Removal of bladder	16.50	16.50	090	2	0	2	1	0
51520	A		Removal of bladder	17.15	17.15	090	2	0	2	1	0
51525	A		Removal of bladder	23.57	23.57	090	2	0	2	1	0
51530	A		Removal of bladder	20.74	20.74	090	2	0	2	1	0
51535	A		Repair of ureteral	19.46	19.46	090	2	1	2	1	0
51550	A		Partial removal	25.21	25.21	090	2	0	2	1	0
51555	A		Partial removal	31.84	31.84	090	2	0	2	1	0
51565	A		Revise bladder	35.85	35.85	090	2	0	2	1	0
51570	A		Removal of bladder	38.03	38.03	090	2	0	2	1	0
51575	A		Removal of bladder	50.98	50.98	090	2	2	2	1	0
51580	A		Remove bladder	48.61	48.61	090	2	0	2	1	0
51585	A		Removal of bladder	57.58	57.58	090	2	2	2	1	0
51590	A		Remove bladder	54.75	54.75	090	2	0	2	1	0
51595	A		Remove bladder	68.21	68.21	090	2	2	2	1	0
51596	A		Remove bladder	71.48	71.48	090	2	0	2	1	0
51597	A		Removal of pelvis	66.78	66.78	090	2	0	2	1	0

(15) Bladder, introduction:

51600	A		Injection for bladder	1.09	1.09	000	2	0	1	0	0
51605	A		Preparation for chain	.89	.89	000	2	0	1	0	0
51610	A		Injection for bladder	1.23	1.23	000	2	0	1	0	0
51700	A		Irrigation of bladder	1.02	0.92	000	2	0	1	0	0
51705	A		Change of bladder tube	1.32	1.13	010	2	0	1	0	0
51710	A		Change of bladder tube	1.94	1.66	010	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
51715		A	Endoscopic injection	6.10	6.10	000	2	0	0	0	0
51720		A	Treatment of bladder	2.24	2.02	000	2	0	1	0	0

(16) Bladder, urodynamics:

51725		A	Simple cystometrogram	2.41	2.41	000	2	0	0	0	0
51725	26	A	Simple cystometrogram	2.02	2.02	000	2	0	0	0	0
51725	TC	A	Simple cystometrogram	0.39	0.39	000	0	0	0	0	0
51726		A	Complex cystometrogram	2.87	2.87	000	2	0	1	0	0
51726	26	A	Complex cystometrogram	2.38	2.38	000	2	0	1	0	0
51726	TC	A	Complex cystometrogram	0.49	0.49	000	0	0	1	0	0
51736		A	Urine flow measure	0.97	0.97	000	2	0	0	0	0
51736	26	A	Urine flow measure	0.82	0.82	000	2	0	0	0	0
51736	TC	A	Urine flow measure	0.15	0.15	000	0	0	0	0	0
51741		A	Electro-uroflow	1.61	1.61	000	2	0	1	0	0
51741	26	A	Electro-uroflow	1.40	1.40	000	2	0	1	0	0
51741	TC	A	Electro-uroflow	0.21	0.21	000	0	0	1	0	0
51772		A	Urethra pressure	2.43	2.43	000	2	0	0	0	0
51772	26	A	Urethra pressure	2.00	2.00	000	2	0	0	0	0
51772	TC	A	Urethra pressure	0.43	0.43	000	0	0	0	0	0
51784		A	Anal/urinary muscle	2.45	2.45	000	2	0	1	0	0
51784	26	A	Anal/urinary muscle	2.06	2.06	000	2	0	1	0	0
51784	TC	A	Anal/urinary muscle	0.40	0.40	000	0	0	1	0	0
51785		A	Anal/urinary muscle	2.45	2.45	000	2	0	0	0	0
51785	26	A	Anal/urinary muscle	2.06	2.06	000	2	0	0	0	0
51785	TC	A	Anal/urinary muscle	0.40	0.40	000	0	0	0	0	0
51792		A	Urinary reflex	2.97	2.97	000	2	0	0	0	0
51792	26	A	Urinary reflex	1.60	1.60	000	2	0	0	0	0
51792	TC	A	Urinary reflex	1.37	1.37	000	0	0	0	0	0
51795		A	Urine voiding pressure	2.87	2.87	000	2	0	0	0	0
51795	26	A	Urine voiding pressure	1.97	1.97	000	2	0	0	0	0
51795	TC	A	Urine voiding pressure	0.90	0.90	000	0	0	0	0	0
51797		A	Intra-abdominal	2.43	2.43	000	2	0	0	0	0
51797	26	A	Intra-abdominal	1.97	1.97	000	2	0	0	0	0
51797	TC	A	Intra-abdominal	0.46	0.46	000	0	0	0	0	0

(17) Bladder, repair:

51800		A	Revision of bladder	28.24	28.24	090	2	0	2	1	0
51820		A	Revision of urine	24.11	24.11	090	2	2	2	1	0
51840		A	Attach bladder	19.32	19.32	090	2	0	2	1	0
51841		A	Attach bladder	23.28	23.28	090	2	0	2	1	0
51845		A	Repair bladder	19.77	19.77	090	2	0	2	1	0
51860		A	Repair of bladder	18.77	18.77	090	2	0	2	1	0
51865		A	Repair of bladder	24.94	24.94	090	2	0	2	1	0
51880		A	Repair of bladder	12.03	12.03	090	2	0	2	1	0
51900		A	Repair bladder	23.81	23.81	090	2	0	2	1	0
51920		A	Close bladder	18.38	18.38	090	2	0	2	1	0
51925		A	Hysterectomy/bladder	25.16	25.16	090	2	0	2	1	0
51940		A	Correction of bladder	43.87	43.87	090	2	0	2	1	0
51960		A	Revision of bladder	42.81	42.81	090	2	0	2	1	0
51980		A	Construct bladder	17.93	17.93	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(18) Bladder, endoscopy, cystoscopy, urethroscopy, cystourethroscopy:											
52000	A		Cystoscopy	3.19	2.54	000	2	0	1	0	0
52005	A		Cystoscopy and ureteral	4.40	4.40	000	2	0	1	0	0
52007	A		Cystoscopy	5.62	5.62	000	3	1	1	0	0
52010	A		Cystoscopy and duct	4.69	3.77	000	3	0	1	0	0
(19) Bladder, transurethral surgery:											
52204	A		Cystoscopy	4.58	4.58	000	3	0	1	0	0
52214	A		Cystoscopy	6.23	6.23	000	3	0	1	0	0
52224	A		Cystoscopy	5.81	5.81	000	3	0	1	0	0
52234	A		Cystoscopy	9.00	9.00	000	2	0	1	0	0
52235	A		Cystoscopy	11.19	11.19	000	2	0	1	0	0
52240	A		Cystoscopy	19.69	19.69	000	2	0	1	0	0
52250	A		Cystoscopy	7.01	7.01	000	3	0	1	0	0
52260	A		Cystoscopy	5.72	5.72	000	3	0	1	0	0
52265	A		Cystoscopy	4.05	3.40	000	3	0	1	0	0
52270	A		Cystoscopy	6.60	6.60	000	3	0	1	0	0
52275	A		Cystoscopy	7.76	7.76	000	3	0	1	0	0
52276	A		Cystoscopy	9.21	9.21	000	3	0	1	0	0
52277	A		Cystoscopy	10.52	10.52	000	3	0	0	0	0
52281	A		Cystoscopy	4.90	3.78	000	3	0	1	0	0
52282	A		Cystoscopy, implant	10.48	10.48	000	3	0	1	0	0
52283	A		Cystoscopy	4.94	4.94	000	3	0	1	0	0
52285	A		Cystoscopy	6.28	4.86	000	3	0	1	0	0
52290	A		Cystoscopy	6.56	6.56	000	3	2	1	0	0
52300	A		Cystoscopy	8.37	8.37	000	3	2	0	0	0
52301	A		Cystoscopy	8.55	8.55	000	3	2	0	0	0
52305	A		Cystoscopy	8.39	8.39	000	3	0	1	0	0
52310	A		Cystoscopy	5.60	5.60	000	3	0	1	0	0
52315	A		Cystoscopy	8.88	8.88	000	3	0	1	0	0
52317	A		Remove bladder	12.41	12.41	000	3	0	1	0	0
52318	A		Remove bladder	16.38	16.38	000	3	0	1	0	0
(20) Bladder, ureter and pelvis:											
52320	A		Cystoscopy	9.22	9.22	000	3	1	1	0	0
52325	A		Cystoscopy	12.52	12.52	000	3	1	1	0	0
52327	A		Cystoscopy, injection	8.47	8.47	000	3	0	1	0	0
52330	A		Cystoscopy	8.12	8.12	000	3	1	1	0	0
52332	A		Cystoscopy	5.85	5.75	000	3	1	1	0	0
52334	A		Create passage	7.79	7.79	000	3	1	1	0	0
52335	A		Endoscopy, ureteroscopy	10.10	10.10	000	2	0	1	0	0
52336	A		Cystoscopy	14.10	14.10	000	3	0	1	0	0
52337	A		Cystoscopy	16.30	16.30	000	3	1	1	0	0
52338	A		Cystoscopy	12.70	12.70	000	3	1	1	0	0
52339	A		Cystoscopy	14.04	14.04	000	3	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(21) Bladder, vesical neck and prostate:											
52340	A	Cystoscopy		14.04	14.04	090	2	0	1	0	0
52450	A	of prostate		12.03	12.03	090	2	0	1	0	0
52500	A	Revision of bladder		15.27	15.27	090	2	0	1	0	0
52510	A	Dilation prostate		13.65	13.65	090	2	0	1	0	0
52601	A	Prostatectomy		23.34	23.34	090	2	0	1	0	0
52606	A	Control postoperative		10.77	10.77	090	2	0	1	0	0
52612	A	Prostatectomy		16.27	16.27	090	2	0	1	0	0
52614	A	Prostatectomy		13.43	13.43	090	2	0	1	0	0
52620	A	Remove residual		11.43	11.43	090	2	0	1	0	0
52630	A	Remove prostate		14.93	14.93	090	2	0	1	0	0
52640	A	Relieve bladder		12.56	12.56	090	2	0	1	0	0
52647	A	Laser surgery		21.06	21.06	090	2	0	1	0	0
52648	A	Laser surgery		22.28	22.28	090	2	0	1	0	0
52700	A	Drainage of prostate		9.55	9.55	090	2	0	0	0	0
(22) Urethra, incision:											
53000	A	Incision of urethra		3.86	3.86	010	2	0	1	0	0
53010	A	Incision of urethra		6.91	6.91	090	2	0	1	0	0
53020	A	Incision of urethra		2.45	2.45	000	2	0	1	0	0
53025	A	Incision of urethra		1.84	1.84	000	2	0	0	0	0
53040	A	Drainage of urethra		7.70	7.70	090	2	0	0	0	0
53060	A	Drainage of urethra		2.92	2.92	010	2	0	1	0	0
53080	A	Drainage of urine		9.80	9.80	090	2	0	1	0	0
53085	A	Drainage of urine		16.23	16.23	090	2	0	2	1	0
(23) Urethra, excision:											
53200	A	Biopsy of urethra		3.48	3.48	000	2	0	1	0	0
53210	A	Removal of urethra		18.19	18.19	090	2	0	2	1	0
53215	A	Removal of urethra		24.33	24.33	090	2	0	2	1	0
53220	A	Treatment of urethra		11.23	11.23	090	2	0	0	0	0
53230	A	Removal of urethra		16.79	16.79	090	2	0	2	1	0
53235	A	Removal of urethra		14.32	14.32	090	2	0	2	1	0
53240	A	Surgery of urethra		10.29	10.29	090	2	0	1	0	0
53250	A	Removal of urethra		9.48	9.48	090	2	0	1	0	0
53260	A	Treatment of urethra		3.88	3.88	010	2	0	1	0	0
53265	A	Treatment of urethra		4.77	4.77	010	2	0	1	0	0
53270	A	Removal of urethra		3.72	3.31	010	2	0	1	0	0
53275	A	Repair of urethra		6.54	6.54	010	2	0	1	0	0
(24) Urethra, repair:											
53400	A	Revise urethra		19.23	19.23	090	2	0	2	1	0
53405	A	Revise urethra		23.84	23.84	090	2	0	2	1	0
53410	A	Reconstruction		23.66	23.66	090	2	0	2	1	0
53415	A	Reconstruction		29.72	29.72	090	2	0	2	1	0
53420	A	Reconstruct urethra		23.87	23.87	090	2	0	1	1	0
53425	A	Reconstruct urethra		23.93	23.93	090	2	0	2	1	0
53430	A	Reconstruction		22.17	22.17	090	2	0	2	1	0
53440	A	Correct bladder		24.66	24.66	090	2	0	2	1	0
53442	A	Remove perineal		13.52	13.52	090	2	0	2	0	0
53443	A	Reconstruction		28.34	28.34	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
53445	A	Correct	urine flow	28.83	28.83	090	2	0	2	1	0
53447	A	Remove	artificial	21.30	21.30	090	2	0	2	1	0
53449	A	Correct	artificial	17.38	17.38	090	2	0	2	1	0
53450	A	Revision	of urethra	8.37	8.37	090	2	0	1	0	0
53460	A	Revision	of urethra	8.96	8.96	090	2	0	0	0	0
53502	A	Repair	of urethra	12.04	12.04	090	2	0	1	0	0
53505	A	Repair	of urethra	12.21	12.21	090	2	0	2	0	0
53510	A	Repair	of urethra	16.28	16.28	090	2	0	2	1	0
53515	A	Repair	of urethra	21.29	21.29	090	2	0	2	1	0
53520	A	Repair	of urethra	13.88	13.88	090	2	0	1	0	0

(25) Urethra, manipulation:

53600	A	Dilate	urethra	1.43	1.27	000	2	0	1	0	0
53601	A	Dilate	urethra	1.19	1.05	000	2	0	1	0	0
53605	A	Dilate	urethra	1.63	1.63	000	2	0	1	0	0
53620	A	Dilate	urethra	1.95	1.73	000	2	0	1	0	0
53621	A	Dilate	urethra	1.61	1.43	000	2	0	1	0	0
53660	A	Dilation	of urethra	0.93	0.80	000	2	0	1	0	0
53661	A	Dilation	of urethra	0.91	0.79	000	2	0	1	0	0
53665	A	Dilation	of urethra	1.06	1.06	000	2	0	1	0	0
53670	A	Insert	urinary catheter	0.68	0.57	000	2	0	1	0	0
53675	A	Insert	urinary catheter	1.82	1.82	000	2	0	1	0	0

(26) Urethra, other procedures:

53850	A	Prostatic	microwave	15.42	15.42	090	2	0	1	0	0
53852	A	Prostatic	radiofrequency	16.12	16.12	090	2	0	1	0	0
53899	C	Urology	surgery	0.00	0.00	YYY	2	0	0	1	1

(27) Penis, incision:

54000	A	Slitting	of penis	2.05	2.05	010	2	0	0	0	0
54001	A	Slitting	of penis	2.85	2.85	010	2	0	1	0	0
54015	A	Drain	penis lesion	5.68	5.68	010	2	0	0	0	0

(28) Penis, destruction:

54050	A	Destruction,	penis	1.51	1.33	010	2	0	1	0	0
54055	A	Destruction,	penis	1.73	1.44	010	2	0	1	0	0
54056	A	Cryosurgery,	penis	1.66	1.40	010	2	0	1	0	0
54057	A	Laser surgery,	penis	2.71	2.56	010	2	0	1	0	0
54060	A	Excision	of penis	2.95	2.95	010	2	0	1	0	0
54065	A	Destruction,	penis	4.72	3.53	010	2	0	1	0	0

(29) Penis, excision:

54100	A	Biopsy	of penis	2.39	2.39	000	2	0	1	0	0
54105	A	Biopsy	of penis	4.21	4.21	010	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
54110		A	Treatment of penis	15.36	15.36	090	2	0	2	0	0
54111		A	Treat penis lesion	21.72	21.72	090	2	0	2	1	0
54112		A	Treat penis lesion	25.50	25.50	090	2	0	2	1	0
54115		A	Treatment of penis	9.86	9.86	090	2	0	2	0	0
54120		A	Partial removal of penis	15.64	15.64	090	2	0	2	1	0
54125		A	Removal of penis	24.09	24.09	090	2	0	2	1	0
54130		A	Removal of penis	33.17	33.17	090	2	2	2	1	0
54135		A	Removal of penis	42.04	42.04	090	2	2	2	0	0
54150		A	Circumcision	2.19	2.19	010	2	0	0	0	0
54152		A	Circumcision	3.97	3.97	010	2	0	1	0	0
54160		A	Circumcision	3.97	3.97	010	2	0	1	0	0
54161		A	Circumcision	5.19	5.19	010	2	0	1	0	0

(30) Penis, introduction:

54200		A	Treatment of penis	1.29	1.13	010	2	0	1	0	0
54205		A	Treatment of penis	12.41	12.41	090	2	0	2	0	0
54220		A	Treatment of penis	3.82	3.82	000	2	0	1	0	0
54230		A	Prepare penis	2.58	1.94	000	2	0	1	0	0
54231		A	Dynamic cavernosometry	3.32	3.32	000	2	0	1	0	0
54235		A	Penile injection	1.52	1.31	000	2	0	1	0	0
54240		A	Penis study	2.21	2.21	000	2	0	0	0	0
54240	26	A	Penis study	1.71	1.71	000	2	0	0	0	0
54240	TC	A	Penis study	0.50	0.50	000	0	0	0	0	0
54250		A	Penis study	2.83	2.83	000	2	0	0	0	0
54250	26	A	Penis study	2.53	2.53	000	2	0	0	0	0
54250	TC	A	Penis study	0.31	0.31	000	0	0	0	0	0

(31) Penis, repair:

54300		A	Revision of penis	16.58	16.58	090	2	0	2	1	0
54304		A	Revision of penis	20.20	20.20	090	2	0	2	0	0
54308		A	Reconstruction	16.79	16.79	090	2	0	2	1	0
54312		A	Reconstruction	21.87	21.87	090	2	0	2	1	0
54316		A	Reconstruction	26.84	26.84	090	2	0	2	1	0
54318		A	Reconstruction	18.10	18.10	090	2	0	2	1	0
54322		A	Reconstruction	19.57	19.57	090	2	0	2	0	0
54324		A	Reconstruction	26.01	26.01	090	2	0	2	1	0
54326		A	Reconstruction	24.99	24.99	090	2	0	2	1	0
54328		A	Revise penis	25.25	25.25	090	2	0	2	1	0
54332		A	Revise penis	28.22	28.22	090	2	0	2	1	0
54336		A	Revise penis	37.12	37.12	090	2	0	2	1	0
54340		A	Secondary urethra	14.28	14.28	090	2	0	2	1	0
54344		A	Secondary urethra	31.12	31.12	090	2	0	2	1	0
54348		A	Secondary urethra	27.42	27.42	090	2	0	2	1	0
54352		A	Reconstruct urethra	38.91	38.91	090	2	0	2	1	0
54360		A	Penis plastic surgery	18.01	18.01	090	2	0	2	1	0
54380		A	Repair penis	21.48	21.48	090	2	0	2	1	0
54385		A	Repair penis	24.57	24.57	090	2	0	2	1	0
54390		A	Repair penis	33.60	33.60	090	2	0	2	1	0
54400		A	Insert semi-rigid	18.41	18.41	090	2	0	1	1	0
54401		A	Insert self-contained	21.21	21.21	090	2	0	1	1	0
54402		A	Remove penis prosthesis	14.48	14.48	090	2	0	2	1	0
54405		A	Insert multicomponent	27.62	27.62	090	2	0	2	1	0
54407		A	Remove multicomponent	23.56	23.56	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
54409	A	Revise penis prosthesis		20.22	20.22	090	2	0	2	1	0
54420	A	Revision of penis		18.32	18.32	090	2	0	2	0	0
54430	A	Revision of penis		16.35	16.35	090	2	2	2	0	0
54435	A	Revision of penis		9.78	9.78	090	2	0	1	0	0
54440	C	Repair of penis		0.00	0.00	090	2	0	2	1	0

(32) Penis, manipulation:

54450	A	Preputial stretching		1.71	1.71	000	2	0	1	0	0
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(33) Testis, excision:

54500	A	Biopsy of testis		1.64	1.64	000	2	1	0	0	0
54505	A	Biopsy of testis		5.06	5.06	010	2	1	0	0	0
54510	A	Removal of testis		8.08	8.08	090	2	1	0	0	0
54520	A	Removal of testis		10.16	10.16	090	2	1	1	0	0
54530	A	Removal of testis		15.28	15.28	090	2	1	2	1	0
54535	A	Extensive testis		19.85	19.85	090	2	1	2	0	0
54550	A	Exploration		12.47	12.47	090	2	1	2	0	0
54560	A	Exploration		17.53	17.53	090	2	1	2	1	0

(34) Testis, repair:

54600	A	Reduce testis torsion		11.09	11.09	090	2	1	1	0	0
54620	A	Suspension of testis		7.84	7.84	010	2	1	1	0	0
54640	A	Suspension of testis		14.10	14.10	090	2	1	1	0	0
54650	A	Orchiopexy, abdominal		18.45	18.45	090	2	1	2	0	0
54660	A	Revision of testis		8.11	8.11	090	2	1	0	0	0
54670	A	Repair testis		10.21	10.21	090	2	1	0	0	0
54680	A	Relocation of testis		19.84	19.84	090	2	1	2	1	0

(35) Epididymis, incision:

54700	A	Drainage of scrotum		4.04	4.04	010	2	0	1	0	0
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(36) Epididymis, excision:

54800	A	Biopsy of epididymis		4.12	4.12	000	2	0	0	0	0
54820	A	Exploration of epididymis		7.36	7.36	090	2	0	0	0	0
54830	A	Removal of epididymis		8.49	8.49	090	2	0	0	0	0
54840	A	Removal of epididymis		9.66	9.66	090	2	0	1	0	0
54860	A	Removal of epididymis		11.01	11.01	090	2	0	1	0	0
54861	A	Removal of epididymis		15.53	15.53	090	2	0	0	0	0

(37) Epididymis, repair:

54900	A	Fusion of sperm		21.11	21.11	090	2	0	0	0	0
54901	A	Fusion of sperm		28.82	28.82	090	2	2	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(38) Tunica vaginalis, incision:											
55000	A	Drainage of hydrocele		1.71	1.51	000	2	0	1	0	0
(39) Tunica vaginalis, excision:											
55040	A	Removal of hydrocele		9.88	9.88	090	2	0	1	0	0
55041	A	Removal of hydrocele		14.69	14.69	090	2	2	1	0	0
(40) Tunica vaginalis, repair:											
55060	A	Repair of hydrocele		9.28	9.28	090	2	1	0	0	0
(41) Scrotum, incision:											
55100	A	Drainage of scrotum		2.58	2.58	010	2	0	1	0	0
55110	A	Exploration of scrotum		8.74	8.74	090	2	0	1	0	0
55120	A	Removal of scrotum		6.47	6.47	090	2	0	0	0	0
(42) Scrotum, excision:											
55150	A	Removal of scrotum		12.13	12.13	090	2	0	2	1	0
(43) Scrotum, repair:											
55175	A	Revision of scrotum		9.36	9.36	090	2	0	0	0	0
55180	A	Revision of scrotum		16.78	16.78	090	2	0	0	0	0
(44) Vas deferens, incision:											
55200	A	Incision		5.86	5.86	090	2	2	0	0	0
(45) Vas deferens, excision:											
55250	A	Removal		5.68	4.41	090	2	2	1	0	0
(46) Vas deferens, introduction:											
55300	A	Preparation		5.95	5.95	000	2	2	0	0	0
(47) Vas deferens, repair:											
55400	A	Repair of sperm		14.39	14.39	090	2	1	2	1	0
(48) Vas deferens, suture:											
55450	A	Ligation of sperm		6.44	6.44	010	2	2	0	0	0
(49) Spermatic cord, excision:											
55500	A	Removal of hydrocele		9.52	9.52	090	2	0	0	0	0
55520	A	Removal of sperm		8.77	8.77	090	2	0	2	1	0
55530	A	Revise spermatic		10.49	10.49	090	2	0	1	1	0
55535	A	Revise spermatic		10.45	10.45	090	2	0	2	1	0
55540	A	Revise hernia		11.85	11.85	090	2	0	2	1	0

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(50) Seminal vesicles, incision:										
55600	A	Incise sperm duct	10.26	10.26	090	2	1	0	0	0
55605	A	Incise sperm duct	12.96	12.96	090	2	1	0	0	0
(51) Seminal vesicles, excision:										
55650	A	Remove sperm duct	18.11	18.11	090	2	1	2	1	0
55680	A	Remove sperm	9.20	9.20	090	2	0	0	0	0
(52) Prostate, incision:										
55700	A	Biopsy of prostate	2.96	2.23	000	2	0	1	0	0
55705	A	Biopsy of prostate	7.59	7.59	010	2	0	1	1	0
55720	A	Drainage of prostate	10.53	10.53	090	2	0	2	1	0
55725	A	Drainage of prostate	13.61	13.61	090	2	0	2	1	0
(53) Prostate, excision:										
55801	A	Removal of prostate	29.28	29.28	090	2	0	2	1	0
55810	A	Extensive prostate	38.75	38.75	090	2	0	2	1	0
55812	A	Extensive prostate	43.12	43.12	090	2	0	2	1	0
55815	A	Extensive prostate	53.33	53.33	090	2	2	2	1	0
55821	A	Removal of prostate	26.81	26.81	090	2	0	2	1	0
55831	A	Removal of prostate	29.04	29.04	090	2	0	2	1	0
55840	A	Extensive prostate	37.52	37.52	090	2	0	2	1	0
55842	A	Extensive prostate	41.68	41.68	090	2	0	2	1	0
55845	A	Extensive prostate	51.51	51.51	090	2	2	2	1	0
55859	A	Percutaneous/needle	17.38	17.38	090	2	0	0	0	0
55860	A	Surgical exposure	20.39	20.39	090	2	0	1	1	0
55862	A	Extensive prostate	28.65	28.65	090	2	0	2	1	0
55865	A	Extensive prostate	45.77	45.77	090	2	2	2	1	0
(54) Prostate, other procedures:										
55870	A	Electroejaculation	4.21	4.21	000	2	0	1	1	0
55899	C	Genital surgery	0.00	0.00	YYY	2	0	2	1	1
(55) Intersex surgery:										
55970	N	Sex transformation	0.00	0.00	XXX	9	9	9	9	9
55980	N	Sex transformation	0.00	0.00	XXX	9	9	9	9	9
(56) Laparoscopy/hysteroscopy:										
56300	A	Laparoscopy, diagnostic	9.44	9.44	010	2	0	2	2	0
56301	A	Laparoscopy	10.34	10.34	010	3	0	1	2	0
56302	A	Laparoscopy	10.89	10.89	010	3	0	1	2	0
56303	A	Laparoscopy, excision	16.68	16.68	090	3	0	2	2	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
56304	A	Laparoscopy, lysis		16.32	16.32	090	3	0	2	2	0
56305	A	Laparoscopy, biopsy		10.07	10.07	010	3	0	2	2	0
56306	A	Laparoscopy, aspiration		10.53	10.53	010	3	0	2	2	0
56307	A	Laparoscopy, removal		17.83	17.83	010	3	0	2	2	0
56308	A	Laparoscopy/hysterectomy		23.09	23.09	010	3	0	2	2	0
56309	A	Laparoscopy, removal		18.07	18.07	010	3	0	2	2	0
56310	A	Laparoscopy, enterolysis		22.07	22.07	090	2	0	2	1	0
56311	A	Laparoscopy, lymph		15.37	15.37	010	3	0	2	2	0
56312	A	Laparoscopy, lymph		19.97	19.97	010	2	2	2	2	0
56313	A	Laparoscopy, lymph		23.94	23.94	010	2	2	2	2	0
56314	A	Laparoscopy, drainage		15.47	15.47	090	3	0	2	2	0
56315	A	Laparoscopy/appendectomy		13.18	13.18	090	2	0	2	2	0
56316	A	Laparoscopy, hernia		10.57	10.57	090	2	1	2	1	0
56317	A	Laparoscopy, hernia		13.13	13.13	090	2	1	2	1	0
56318	A	Laparoscopy, orchiectomy		17.38	17.38	090	2	1	2	1	0
56320	A	Laparoscopy, spermatic		10.46	10.46	090	2	1	2	1	0
56322	A	Laparoscopy, vagus		14.76	14.76	090	2	0	2	1	0
56323	A	Laparoscopy, vagus		17.69	17.69	090	2	0	2	1	0
56324	A	Cholecystoenterostomy		21.33	21.33	090	2	0	2	1	0
56340	A	Cholecystoenterostomy		18.74	18.74	090	2	0	2	1	0
56341	A	Cholecystoenterostomy		20.00	20.00	090	2	0	2	1	0
56342	A	Cholecystoenterostomy		23.07	23.07	090	2	0	2	1	0
56343	A	Salpingostomy		18.19	18.19	090	3	1	2	0	0
56344	A	Fimbrioplasty		17.28	17.28	090	3	1	2	0	0
56345	C	Laparoscopy, splenectomy		0.00	0.00	XXX	0	0	0	0	0
56346	A	Laparoscopy, gastrostomy		13.65	13.65	090	2	0	2	1	0
56347	C	Laparoscopy, jejunostomy		0.00	0.00	XXX	0	0	0	0	0
56348	A	Laparoscopy, resection		34.34	34.34	090	2	0	2	1	0
56349	A	Laparoscopy, fundoplasty		28.53	28.53	090	2	0	2	1	0
56350	A	Hysteroscopy, diagnostic		5.19	5.19	000	2	0	0	2	0
56351	A	Hysteroscopy, biopsy		6.48	6.48	000	3	0	1	2	0
56352	A	Hysteroscopy, lysis		9.71	9.71	000	3	0	1	2	0
56353	A	Hysteroscopy, resection		10.46	10.46	000	3	0	2	2	0
56354	A	Hysteroscopy, resection		14.56	14.56	000	3	0	0	2	0
56355	A	Hysteroscopy, resection		6.89	6.89	000	3	0	1	2	0
56356	A	Hysteroscopy, ablation		10.66	10.66	000	3	0	0	2	0
56362	A	Cholangiography		7.22	7.22	000	2	0	0	0	0
56363	A	Laparoscopy, biopsy		8.75	8.75	000	2	0	0	0	0

(57) Laparoscopy/hysteroscopy, other procedures:

56399	C	Laparoscopy procedure		0.00	0.00	YYY	2	1	2	0	0
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(58) Vulva, perineum and introitus, incision:

56405	A	Vulva incision, drainage		2.12	1.76	010	2	0	1	2	0
56420	A	Drainage of gland		2.11	1.72	010	2	0	1	0	0
56440	A	Surgery for vulva		5.41	5.41	010	2	0	1	0	0
56441	A	Lysis of labial adhesions		3.55	3.55	010	2	0	0	0	0

(59) Vulva, perineum and introitus, destruction:

56501	A	Destruction of vulva		1.97	1.71	010	2	0	1	0	0
56515	A	Destruction of vulva		4.35	4.07	010	2	0	1	0	0

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(60) Vulva, perineum and introitus, excision:										
56605	A	Biopsy of vulva	1.74	1.41	000	2	0	1	2	0
56606	A	Biopsy of vulva	0.88	0.71	000	0	0	1	2	0
56620	A	Partial removal	13.80	13.80	090	2	0	2	1	0
56625	A	Complete removal	17.73	17.73	090	2	0	2	1	0
56630	A	Extensive vulva	26.03	26.03	090	2	0	2	1	0
56631	A	Extensive vulva	34.41	34.41	090	2	0	2	2	0
56632	A	Extensive vulva	41.50	41.50	090	2	2	2	2	0
56633	A	Extensive vulva	32.19	32.19	090	2	0	2	2	0
56634	A	Extensive vulva	37.72	37.72	090	2	0	2	2	0
56637	A	Extensive vulva	43.12	43.12	090	2	0	2	2	0
56640	A	Extensive vulva	41.80	41.80	090	2	1	2	1	0
56700	A	Partial removal	4.24	4.24	010	2	0	2	1	0
56720	A	Incision	1.14	1.14	000	2	0	0	0	0
56740	A	Remove vagina gland	6.49	6.49	010	2	0	1	0	0
(61) Vulva, perineum and introitus, repair:										
56800	A	Repair of vagina	6.67	6.67	010	2	0	2	1	0
56805	A	Repair clitoris	29.23	29.23	090	2	0	2	1	0
56810	A	Repair of perineum	6.56	6.56	010	2	0	2	2	0
(62) Vagina, incision:										
57000	A	Exploration of colpotomy	4.85	4.85	010	2	0	0	0	0
57010	A	Drain pelvic abscess	8.32	8.32	090	2	0	0	0	0
57020	A	Drain pelvic abscess	2.07	2.07	000	2	0	0	0	0
(63) Vagina, destruction:										
57061	A	Destroy vaginal lesion	2.02	1.62	010	2	0	1	0	0
57065	A	Destroy vaginal lesion	5.55	5.55	010	2	0	1	0	0
(64) Vagina, excision:										
57100	A	Biopsy of vagina	1.55	1.25	000	2	0	1	0	0
57105	A	Biopsy of vagina	3.23	3.23	010	2	0	1	0	0
57108	A	Partial removal	11.48	11.48	090	2	0	2	1	0
57110	A	Removal of vagina	21.55	21.55	090	2	0	2	1	0
57120	A	Closure of vagina	14.31	14.31	090	2	0	2	1	0
57130	A	Remove vagina lesion	5.04	5.04	010	2	0	2	1	0
57135	A	Remove vagina lesion	4.50	4.50	010	2	0	1	0	0
(65) Vagina, introduction:										
57150	A	Treat vagina infection	0.70	0.61	000	2	0	1	0	0
57160	A	Insert pessary device	1.08	0.96	000	2	0	1	0	0

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57170	A		Fitting of diaphragm	1.17	1.01	000	2	0	0	0	0
57180	A		Treat vaginal bleeding	2.03	1.76	010	2	0	1	0	0

(66) Vagina, repair:

57200	A		Repair of vagina	6.53	6.53	090	2	0	2	1	0
57210	A		Repair vagina/perineum	8.21	8.21	090	2	0	2	1	0
57220	A		Revision of urethra	8.64	8.64	090	2	0	2	1	0
57230	A		Repair of urethra	9.18	9.18	090	2	0	2	1	0
57240	A		Repair bladder	12.85	12.85	090	2	0	2	1	0
57250	A		Repair rectum	11.82	11.82	090	2	0	2	1	0
57260	A		Repair of vagina	16.90	16.90	090	2	0	2	1	0
57265	A		Extensive repair	20.56	20.56	090	2	0	2	1	0
57268	A		Repair of bowel	13.74	13.74	090	2	0	2	1	0
57270	A		Repair of bowel	18.39	18.39	090	2	0	2	1	0
57280	A		Suspension of vagina	22.91	22.91	090	2	0	2	1	0
57282	A		Repair of vagina	17.51	17.51	090	2	0	2	1	0
57284	A		Repair paravaginal	20.29	20.29	090	2	0	2	2	0
57288	A		Repair bladder	22.92	22.92	090	2	0	2	1	0
57289	A		Repair bladder	19.05	19.05	090	2	0	2	1	0
57291	A		Construction of vagina	13.04	13.04	090	2	0	2	0	0
57292	A		Construction of vagina	18.97	18.97	090	2	0	2	1	0
57300	A		Repair rectum-vagina	15.46	15.46	090	2	0	2	1	0
57305	A		Repair rectum-vagina	20.65	20.65	090	2	0	2	1	0
57307	A		Fistula repair	21.07	21.07	090	2	0	2	1	0
57308	A		Fistula repair	16.78	16.78	090	2	0	2	1	0
57310	A		Repair urethrovaginal	10.59	10.59	090	2	0	2	1	0
57311	A		Repair urethrovaginal	12.86	12.86	090	2	0	2	1	0
57320	A		Repair bladder	16.53	16.53	090	2	0	2	1	0
57330	A		Repair bladder	19.67	19.67	090	2	0	2	1	0
57335	A		Repair vagina	24.13	24.13	090	2	0	2	1	0

(67) Vagina, manipulation:

57400	A		Dilation of vagina	2.41	2.41	000	2	0	0	0	0
57410	A		Pelvic examination	1.96	1.96	000	2	0	1	0	0
57415	A		Removal of foreign body	2.35	2.35	010	2	0	0	0	0

(68) Vagina, endoscopy:

57452	A		Examination	1.60	1.29	000	2	0	1	0	0
57454	A		Vagina examination	2.47	1.88	000	3	0	1	0	0
57460	A		Cervix excision	4.77	3.80	000	3	0	1	2	0

(69) Cervix uteri, excision:

57500	A		Biopsy of cervix	1.50	1.22	000	2	0	1	0	0
57505	A		Endocervical curettage	1.72	1.41	010	2	0	1	0	0
57510	A		Cauterization of cervix	2.28	2.03	010	2	0	1	0	0
57511	A		Cryocautery of cervix	2.64	2.23	010	2	0	1	0	0
57513	A		Laser surgery	4.11	4.11	010	2	0	1	0	0
57520	A		Conization of cervix	7.40	7.40	090	2	0	1	0	0
57522	A		Conization of cervix	6.79	6.79	090	2	0	1	0	0
57530	A		Removal of cervix	8.27	8.27	090	2	0	2	1	0
57531	A		Removal of cervix	39.31	39.31	090	2	2	2	1	0

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57540	A		Remove residual cervix	18.44	18.44	090	2	0	2	1	0
57545	A		Removal of cervix	16.82	16.82	090	2	0	2	1	0
57550	A		Remove residual cervix	11.74	11.74	090	2	0	2	1	0
57555	A		Removal of cervix	18.84	18.84	090	2	0	2	1	0
57556	A		Removal of cervix	17.55	17.55	090	2	0	2	1	0

(70) Cervix uteri, repair:

57700	A		Revision of cervix	5.72	5.72	090	2	0	0	0	0
57720	A		Revision of cervix	6.69	6.69	090	2	0	2	0	0

(71) Cervix uteri, manipulation:

57800	A		Dilation of cervix	1.22	0.99	000	2	0	1	0	0
57820	A		Dilation and curettage	3.78	3.78	010	2	0	1	0	0

(72) Corpus uteri, excision:

58100	A		Biopsy of uterus	1.36	1.04	000	2	0	1	0	0
58120	A		Dilation and curettage	5.89	5.89	010	2	0	1	0	0
58140	A		Removal of uterus	22.24	22.24	090	2	0	2	1	0
58145	A		Removal of uterus	16.11	16.11	090	2	0	2	1	0
58150	A		Total hysterectomy	24.23	24.23	090	2	0	2	1	0
58152	A		Total hysterectomy	26.71	26.71	090	2	0	2	1	0
58180	A		Partial hysterectomy	24.47	24.47	090	2	0	2	1	0
58200	A		Extensive hysterectomy	33.68	33.68	090	2	0	2	1	0
58210	A		Extensive hysterectomy	45.49	45.49	090	2	2	2	1	0
58240	A		Removal of pelvis	65.99	65.99	090	2	0	2	1	0
58260	A		Vaginal hysterectomy	21.29	21.29	090	2	0	2	1	0
58262	A		Vaginal hysterectomy	22.91	22.91	090	2	0	2	2	0
58263	A		Vaginal hysterectomy	25.06	25.06	090	2	0	2	2	0
58267	A		Hysterectomy	26.11	26.11	090	2	0	2	1	0
58270	A		Hysterectomy	23.43	23.43	090	2	0	2	1	0
58275	A		Hysterectomy	25.52	25.52	090	2	0	2	1	0
58280	A		Hysterectomy	25.40	25.40	090	2	0	2	1	0
58285	A		Extensive hysterectomy	29.55	29.55	090	2	0	2	1	0

(73) Corpus uteri, introduction:

58300	N		Insert IUD	0.00	0.00	XXX	9	9	9	9	9
58301	A		Remove IUD	1.63	1.41	000	2	0	0	0	0
58321	A		Artificial insemination	1.60	1.60	000	2	0	0	0	0
58322	A		Artificial insemination	1.77	1.77	000	2	0	0	0	0
58323	A		Sperm washing	0.39	0.39	000	2	0	0	0	0
58340	A		Catheter	1.39	1.39	000	2	0	1	0	0
58345	A		Reopen fallopian tube	7.83	7.83	010	2	1	2	2	0
58350	A		Reopen fallopian tube	1.67	1.67	010	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(74) Corpus uteri, repair:											
58400	A	Suspension of uterus		11.86	11.86	090	2	0	2	1	0
58410	A	Suspension of uterus		17.36	17.36	090	2	0	2	1	0
58520	A	Repair of rupture		15.46	15.46	090	2	0	2	1	0
58540	A	Revision of uterus		19.99	19.99	090	2	0	2	0	0
(75) Oviduct, incision:											
58600	A	Ligate fallopian tube		8.32	8.32	090	2	2	2	1	0
58605	A	Ligate fallopian tube		7.13	7.13	090	2	2	2	0	0
58611	A	Ligate oviduct(s)		1.08	1.08	ZZZ	0	0	2	0	0
58615	A	Occlude fallopian tube		6.54	6.54	010	2	0	2	0	0
(76) Oviduct, excision:											
58700	A	Remove fallopian tube		12.73	12.73	090	2	2	2	1	0
58720	A	Remove ovary		18.46	18.46	090	2	2	2	1	0
(77) Oviduct, repair:											
58740	A	Revise fallopian tube(s)		12.52	12.52	090	2	0	2	1	0
58750	A	Repair oviduct		20.37	20.37	090	2	0	2	1	0
58752	A	Revise ovarian tube(s)		20.50	20.50	090	2	0	2	0	0
58760	A	Remove tubal obstruction		17.51	17.51	090	2	1	2	1	0
58770	A	Create new tubal opening		18.39	18.39	090	2	1	2	0	0
(78) Ovary, incision:											
58800	A	Drainage of ovarian cyst		6.64	6.64	090	2	2	1	0	0
58805	A	Drainage of ovarian cyst		12.25	12.25	090	2	2	2	1	0
58820	A	Open drainage of cyst		6.77	6.77	090	2	0	2	0	0
58822	A	Percutaneous drainage		13.07	13.07	090	2	0	2	1	0
58823	A	Percutaneous drainage		5.71	5.71	000	2	0	2	0	0
58825	A	Transposition, ovary		9.97	9.97	090	2	0	2	1	0
(79) Ovary, excision:											
58900	A	Biopsy of ovary		11.04	11.04	090	2	2	2	1	0
58920	A	Partial removal of ovary		13.48	13.48	090	2	2	2	1	0
58925	A	Removal of ovary		17.41	17.41	090	2	2	2	1	0
58940	A	Removal of ovary		13.62	13.62	090	2	2	2	1	0
58943	A	Removal of ovary		29.88	29.88	090	2	0	2	1	0
58950	A	Resect malignancy		26.03	26.03	090	2	2	2	1	0
58951	A	Resect malignancy		39.68	39.68	090	2	2	2	1	0
58952	A	Resect malignancy		42.36	42.36	090	2	2	2	1	0
58960	A	Exploration		27.46	27.46	090	2	0	2	1	0
(80) In vitro fertilization:											
58970	A	Retrieval of oocyte		5.96	5.96	000	2	0	0	0	0
58974	C	Transfer of embryo		0.00	0.00	000	2	0	2	1	0
58976	A	Transfer of embryo		6.46	6.46	000	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(81) In vitro fertilization, other procedures:											
58999		C	Genital surgery	0.00	0.00	YYY	2	0	2	1	1
(82) Maternity care and delivery, antepartum services:											
59000		A	Amniocentesis	2.22	2.22	000	2	0	1	0	0
59012		A	Fetal cord puncture	5.83	5.83	000	2	0	0	0	0
59015		A	Chorion biopsy	3.21	3.21	000	2	0	0	0	0
59020		A	Fetal contraction	1.95	1.95	000	2	0	0	0	0
59020	26	A	Fetal contraction	1.41	1.41	000	2	0	0	0	0
59020	TC	A	Fetal contraction	0.54	0.54	000	0	0	0	0	0
59025		A	Fetal nonstress test	1.14	1.14	000	2	0	0	0	0
59025	26	A	Fetal nonstress test	0.90	0.90	000	2	0	0	0	0
59025	TC	A	Fetal nonstress test	0.23	0.23	000	0	0	0	0	0
59030		A	Fetal scalp blood sample	3.45	3.45	000	2	0	0	0	0
59050		A	Fetal monitor, report	1.67	1.67	XXX	0	0	0	0	0
59051		A	Fetal monitor, interpret	1.54	1.54	XXX	0	0	0	0	0
(83) Maternity care and delivery, excision:											
59100		A	Remove uterus	15.74	15.74	090	2	0	2	1	0
59120		A	Treat ectopic pregnancy	18.85	18.85	090	2	0	2	1	0
59121		A	Treat ectopic pregnancy	16.38	16.38	090	2	0	2	1	0
59130		A	Treat ectopic pregnancy	19.05	19.05	090	2	0	0	0	0
59135		A	Treat ectopic pregnancy	22.75	22.75	090	2	0	0	0	0
59136		A	Treat ectopic pregnancy	18.77	18.77	090	2	0	2	0	0
59140		A	Treat ectopic pregnancy	9.62	9.62	090	2	0	2	0	0
59150		A	Treat ectopic pregnancy	11.21	11.21	090	2	0	2	0	0
59151		A	Treat ectopic pregnancy	15.81	15.81	090	2	0	2	0	0
59160		A	Postpartum curettage	5.58	5.58	010	2	0	0	0	0
(84) Maternity care and delivery, introduction:											
59200		A	Insert cervical dilator	1.30	1.04	000	2	0	1	0	0
(85) Maternity care and delivery, repair:											
59300		A	Episiotomy, vagina repair	3.20	2.72	000	2	0	0	0	0
59320		A	Revision of cervix	4.20	4.20	000	2	0	0	0	0
59325		A	Revision of cervix	6.65	6.65	000	2	0	0	0	0
59350		A	Repair of uterus	8.37	8.37	000	2	0	2	0	0
(86) Maternity care and delivery, vaginal delivery, antepartum and postpartum care:											
59400		A	Obstetrical care	37.33	37.33	MMM	2	0	1	0	0
59409		A	Obstetrical care	22.63	22.63	MMM	2	0	0	0	0
59410		A	Obstetrical care	24.69	24.69	MMM	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
59412	A		Antepartum manipulation	2.89	2.89	MMM	0	0	0	0	0
59414	A		Deliver placenta	2.72	2.72	MMM	2	0	0	0	0
59425	A		Antepartum care	7.51	6.12	MMM	0	0	0	0	0
59426	A		Antepartum care	12.92	10.53	MMM	0	0	0	0	0
59430	A		Care after delivery	2.34	2.16	MMM	2	0	1	0	0

(87) Maternity care and delivery, Cesarean delivery:

59510	A		Cesarean delivery	42.29	42.29	MMM	2	0	1	0	0
59514	A		Cesarean delivery	26.52	26.52	MMM	2	0	2	1	0
59515	A		Cesarean delivery	28.69	28.69	MMM	2	0	1	0	0
59525	A		Remove uterus, Cesarean	11.92	11.92	MMM	0	0	2	1	0

(88) Maternity care and delivery, after previous Cesarean delivery:

59610	A		VBAC delivery	38.74	38.74	MMM	2	0	0	0	0
59612	A		VBAC delivery	24.04	24.04	MMM	2	0	0	0	0
59614	A		VBAC care after delivery	26.11	26.11	MMM	2	0	0	0	0
59618	A		Attempted VBAC	43.70	43.70	MMM	2	0	2	0	0
59620	A		Attempted VBAC	27.94	27.94	MMM	2	0	2	0	0
59622	A		Attempted VBAC	30.11	30.11	MMM	2	0	2	0	0

(89) Maternity care and delivery, abortion:

59812	A		Treatment of miscarriage	6.86	6.83	090	2	0	1	0	0
59820	A		Care of miscarriage	7.69	7.69	090	2	0	1	0	0
59821	A		Treatment of miscarriage	7.03	7.03	090	2	0	0	0	0
59830	A		Treat uterus	10.21	10.21	090	2	0	0	0	0
59840	A		Abortion	6.22	6.22	010	2	0	0	0	0
59841	A		Abortion	8.80	8.80	010	2	0	0	0	0
59850	A		Abortion	9.70	9.70	090	2	0	0	0	0
59851	A		Abortion	10.00	10.00	090	2	0	0	0	0
59852	A		Abortion	13.50	13.50	090	2	0	0	0	0
59855	A		Abortion	10.08	10.08	090	2	0	0	0	0
59856	A		Abortion	12.38	12.38	090	2	0	0	0	0
59857	A		Abortion	15.24	15.24	090	2	0	0	0	0

(90) Maternity care and delivery, other procedures:

59866	A		Abortion	6.76	6.76	000	2	0	2	1	0
59870	A		Evacuate mole	7.07	7.07	090	2	0	2	0	0
59871	A		Remove cerclage suture	3.88	3.88	000	2	0	0	0	0
59899	C		Maternity care	0.00	0.00	YYY	2	0	2	1	1

E. Procedure code numbers 60000 to 69979 relate to neurological procedures.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(1) Thyroid gland, incision:											
60000	A		Drain thyroid	2.23	1.94	010	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(2) Thyroid gland, excision:											
60001	A	Aspirate/inject thyroid		1.96	1.96	000	2	0	1	0	0
60100	A	Biopsy of thyroid		1.96	1.45	000	2	0	1	0	0
60200	A	Remove thyroid		15.06	15.06	090	2	0	2	1	0
60210	A	Partial excision		19.17	19.17	090	2	0	2	1	0
60212	A	Partial excision		24.24	24.24	090	2	0	2	1	0
60220	A	Partial removal		18.70	18.70	090	2	0	2	1	0
60225	A	Partial removal		24.07	24.07	090	2	0	2	1	0
60240	A	Removal of thyroid		25.88	25.88	090	2	0	2	1	0
60252	A	Removal of thyroid		31.11	31.11	090	2	0	2	1	0
60254	A	Extensive thyroid		41.93	41.93	090	2	0	2	1	0
60260	A	Repeat thyroid removal		17.26	17.26	090	2	2	2	1	0
60270	A	Removal of thyroid		31.18	31.18	090	2	0	2	1	0
60271	A	Removal of thyroid		26.48	26.48	090	2	0	2	1	0
60280	A	Remove thyroid		12.59	12.59	090	2	0	2	1	0
60281	A	Remove thyroid		13.14	13.14	090	2	0	2	1	0
(3) Parathyroid, thymus, adrenal glands, and carotid body, excision:											
60500	A	Parathyroidectomy		26.98	26.98	090	2	0	2	1	0
60502	A	Re-explore parathyroid		30.76	30.76	090	2	0	2	1	0
60505	A	Parathyroidectomy		33.61	33.61	090	2	0	2	1	0
60512	A	Autotransplant		6.58	6.58	ZZZ	0	0	2	1	0
60520	A	Removal of thymus		29.70	29.70	090	2	0	2	1	0
60521	A	Removal of thymus		31.57	31.57	090	2	0	2	1	0
60522	A	Removal of thymus		35.40	35.40	090	2	0	2	1	0
60540	A	Explore adrenal gland		28.25	28.25	090	2	1	2	1	0
60545	A	Explore adrenal gland		33.12	33.12	090	2	0	2	1	0
60600	A	Remove carotid tumor		28.38	28.38	090	2	0	2	1	0
60605	A	Remove carotid tumor		29.94	29.94	090	2	0	2	1	0
(4) Parathyroid, thymus, adrenal glands, and carotid body, other procedures:											
60699	C	Endocrine surgery		0.00	0.00	YYY	2	0	2	1	1
(5) Skull, meninges, and brain, injection, drainage, or aspiration:											
61000	A	Remove cranial		2.56	2.56	000	2	2	1	0	0
61001	A	Remove cranial		2.30	1.87	000	2	2	1	0	0
61020	A	Remove brain catheter		2.70	2.70	000	2	0	1	0	0
61026	A	Injection		3.45	3.45	000	2	0	1	0	0
61050	A	Remove brain catheter		2.64	2.64	000	2	0	0	0	0
61055	A	Injection		3.83	3.83	000	0	0	1	0	0
61070	A	Brain canal shunt		1.30	1.06	000	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(6) Skull, meninges, and brain, twist drill, burr holes, or trephine:											
61105	A	Drill skull		10.81	10.81	090	2	0	0	0	0
61106	A	Drill skull		9.74	9.74	ZZZ	0	0	1	0	0
61107	A	Drill skull		10.55	10.55	000	0	0	1	0	0
61108	A	Drill skull		21.30	21.30	090	2	0	1	0	0
61120	A	Pierce skull		14.30	14.30	090	2	0	0	0	0
61130	A	Pierce skull		11.09	11.09	ZZZ	0	0	1	1	0
61140	A	Pierce skull		29.49	29.49	090	2	0	2	0	0
61150	A	Pierce skull		31.55	31.55	090	2	0	1	1	0
61151	A	Pierce skull		13.54	13.54	090	2	0	1	0	0
61154	A	Pierce skull		31.34	31.34	090	2	1	2	1	0
61156	A	Pierce skull		32.14	32.14	090	2	0	2	1	0
61210	A	Pierce skull		11.98	11.98	000	0	0	1	0	0
61215	A	Insert brain fluid		10.53	10.53	090	2	0	1	1	0
61250	A	Pierce skull		18.01	18.01	090	2	1	2	1	0
61253	A	Pierce skull		21.44	21.44	090	2	2	2	0	0

(7) Skull, meninges, and brain, craniectomy or craniotomy:

61304	A	Open skull		45.91	45.91	090	2	0	2	1	0
61305	A	Open skull		55.06	55.06	090	2	0	2	1	0
61312	A	Open skull		48.07	48.07	090	2	0	2	1	0
61313	A	Open skull		48.27	48.27	090	2	0	2	1	0
61314	A	Open skull		49.32	49.32	090	2	0	2	1	0
61315	A	Open skull		51.17	51.17	090	2	0	2	1	0
61320	A	Open skull		43.20	43.20	090	2	0	2	1	0
61321	A	Open skull		46.98	46.98	090	2	0	2	1	0
61330	A	Decompress eye socket		34.37	34.37	090	2	1	2	1	0
61332	A	Explore/biopsy		46.30	46.30	090	2	0	2	1	0
61333	A	Explore/remove lesion		46.93	46.93	090	2	0	2	1	0
61334	A	Explore/remove object		31.74	31.74	090	2	0	2	1	0
61340	A	Relieve cranial		32.64	32.64	090	2	1	2	1	0
61343	A	Incise skull		58.96	58.96	090	2	0	2	1	0
61345	A	Relieve cranial		45.12	45.12	090	2	0	2	1	0
61440	A	Incise skull		45.87	45.87	090	2	0	2	1	0
61450	A	Incise skull		45.18	45.18	090	2	0	2	1	0
61458	A	Incise skull		53.81	53.81	090	2	0	2	1	0
61460	A	Incise skull		52.16	52.16	090	2	0	2	2	0
61470	A	Incise skull		38.44	38.44	090	2	0	2	1	0
61480	A	Incise skull		39.59	39.59	090	2	0	2	1	0
61490	A	Incise skull		35.81	35.81	090	2	1	2	1	0
61500	A	Removal of skull		37.28	37.28	090	2	0	2	1	0
61501	A	Remove infected		31.07	31.07	090	2	0	2	1	0
61510	A	Removal of brain		54.65	54.65	090	2	0	2	1	0
61512	A	Removal of brain		62.80	62.80	090	2	0	2	1	0
61514	A	Removal of brain		50.20	50.20	090	2	0	2	1	0
61516	A	Removal of brain		50.44	50.44	090	2	0	2	1	0
61518	A	Removal of brain		65.89	65.89	090	2	0	2	1	0
61519	A	Removal of brain		70.91	70.91	090	2	0	2	1	0
61520	A	Removal of brain		85.73	85.73	090	2	0	2	2	0
61521	A	Removal of brain		75.45	75.45	090	2	0	2	1	0
61522	A	Removal of brain		48.11	48.11	090	2	0	2	1	0
61524	A	Removal of brain		54.65	54.65	090	2	0	2	1	0
61526	A	Removal of brain		82.85	82.85	090	2	0	1	2	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
61530	A		Removal of brain	75.31	75.31	090	2	0	1	2	0
61531	A		Implant brain electrodes	28.72	28.72	090	2	0	2	2	0
61533	A		Implant brain electrodes	36.17	36.17	090	2	0	2	1	0
61534	A		Removal of brain	26.31	26.31	090	2	0	2	1	0
61535	A		Remove brain electrodes	18.65	18.65	090	2	0	2	1	0
61536	A		Removal of brain	55.66	55.66	090	2	0	2	1	0
61538	A		Removal of brain	55.17	55.17	090	2	0	2	1	0
61539	A		Removal of brain	53.55	53.55	090	2	0	2	1	0
61541	A		Incision of brain	47.40	47.40	090	2	0	2	1	0
61542	A		Removal of brain	49.54	49.54	090	2	0	2	1	0
61543	A		Removal of brain	44.55	44.55	090	2	0	2	1	0
61544	A		Remove and treat brain	51.41	51.41	090	2	0	2	0	0
61545	A		Excision of brain	67.20	67.20	090	2	0	2	1	0
61546	A		Remove pituitary tumor	57.14	57.14	090	2	0	2	1	0
61548	A		Remove pituitary tumor	44.64	44.64	090	2	0	2	2	0
61550	A		Release of skull	25.32	25.32	090	2	0	2	1	0
61552	A		Release of skull	32.60	32.60	090	2	0	2	1	0
61556	A		Incise skull	36.89	36.89	090	2	0	2	0	0
61557	A		Incise skull	37.09	37.09	090	2	0	2	0	0
61558	A		Excision of skull	42.27	42.27	090	2	0	2	0	0
61559	A		Excision of skull	54.47	54.47	090	2	0	2	1	0
61563	A		Excision of skull	44.56	44.56	090	2	0	2	1	0
61564	A		Excision of skull	56.19	56.19	090	2	0	2	1	0
61570	A		Remove foreign body	39.95	39.95	090	2	0	2	1	0
61571	A		Incise skull	43.42	43.42	090	2	0	2	1	0
61575	A		Skull base/brain	65.84	65.84	090	2	0	2	1	0
61576	A		Skull base/brain	77.02	77.02	090	2	0	2	1	0

(8) Skull, meninges, and brain, approach procedures:

61580	A		Craniofacial approach	50.11	50.11	090	2	1	2	1	2
61581	A		Craniofacial approach	57.01	57.01	090	2	1	2	1	2
61582	A		Craniofacial approach	51.98	51.98	090	2	0	2	1	2
61583	A		Craniofacial approach	59.39	59.39	090	2	0	2	1	2
61584	A		Orbitocranial approach	57.13	57.13	090	2	1	2	1	2
61585	A		Orbitocranial approach	63.77	63.77	090	2	1	2	1	2
61586	A		Resect	44.72	44.72	090	2	0	2	1	2
61590	A		Infratemporal approach	69.17	69.17	090	2	1	2	1	2
61591	A		Infratemporal approach	72.42	72.42	090	2	1	2	1	2
61592	A		Orbitocranial approach	65.71	65.71	090	2	1	2	1	2
61595	A		Transtemporal approach	48.79	48.79	090	2	1	2	1	2
61596	A		Transcochlear approach	59.02	59.02	090	2	1	2	1	2
61597	A		Transcondylar approach	62.66	62.66	090	2	1	2	1	2
61598	A		Transpetrosal approach	55.16	55.16	090	2	0	2	1	2

(9) Skull, meninges, and brain, definitive procedures:

61600	A		Resect/excise lesion	42.51	42.51	090	2	0	2	1	2
61601	A		Resect/excise lesion	45.75	45.75	090	2	0	2	1	2

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
61605	A		Resect/excise lesion	48.20	48.20	090	2	0	2	1	2
61606	A		Resect/excise lesion	64.13	64.13	090	2	0	2	1	2
61607	A		Resect/excise lesion	59.91	59.91	090	2	0	2	1	2
61608	A		Resect/excise lesion	69.61	69.61	090	2	0	2	1	2
61609	A		Transect, ligate artery	16.70	16.70	ZZZ	0	1	2	1	2
61610	A		Transect, ligate artery	50.09	50.09	ZZZ	0	1	2	1	2
61611	A		Transect, ligate artery	12.53	12.53	ZZZ	0	1	2	1	2
61612	A		Transect, ligate artery	47.07	47.07	ZZZ	0	1	2	1	2
61613	A		Remove aneurysm	67.88	67.88	090	2	1	2	1	2
61615	A		Resect/excise lesion	52.81	52.81	090	2	0	2	1	2
61616	A		Resect/excise lesion	71.57	71.57	090	2	0	2	1	2

(10) Skull, meninges, and brain, repair and/or reconstruction of surgical defects of skull base:

61618	A		Repair dura	27.61	27.61	090	2	0	2	1	2
61619	A		Repair dura	34.03	34.03	090	2	0	2	1	2

(11) Skull, meninges, and brain, endovascular therapy:

61624	A		Occlusion/embolism	34.04	34.04	000	2	0	1	0	0
61626	A		Occlusion/embolism	28.07	28.07	000	2	0	1	0	0

(12) Skull, meninges, and brain, surgery for aneurysm, arteriovenous malformation or vascular disease:

61680	A		Intracranial vein	61.07	61.07	090	2	0	2	1	0
61682	A		Intracranial vein	93.51	93.51	090	2	0	2	1	0
61684	A		Intracranial vein	66.80	66.80	090	2	0	2	1	0
61686	A		Intracranial vein	95.62	95.62	090	2	0	2	1	0
61690	A		Intracranial vein	55.39	55.39	090	2	0	2	1	0
61692	A		Intracranial vein	76.75	76.75	090	2	0	2	1	0
61700	A		Inner skull vessel	79.60	79.60	090	2	0	2	1	0
61702	A		Inner skull vessel	82.67	82.67	090	2	0	2	1	0
61703	A		Clamp neck artery	28.89	28.89	090	2	0	2	1	0
61705	A		Revise circulation	65.13	65.13	090	2	0	2	1	0
61708	A		Revise circulation	57.67	57.67	090	2	0	2	0	0
61710	A		Revise circulation	43.96	43.96	090	2	0	0	0	0
61711	A		Fusion of skull	68.31	68.31	090	2	0	2	1	0
61712	A		Skull or spine surgery	7.39	7.39	ZZZ	0	0	2	1	0

(13) Skull, meninges, and brain, stereotaxis:

61720	A		Incise skull/brain	35.28	35.28	090	2	0	1	0	0
61735	A		Incise skull/brain	31.90	31.90	090	2	0	1	1	0
61750	A		Incise skull/brain	31.98	31.98	090	2	0	1	1	0
61751	A		Brain biopsy	37.16	37.16	090	2	0	1	1	0
61760	A		Implant brain electrodes	35.65	35.65	090	2	0	1	2	0
61770	A		Incise skull	40.07	40.07	090	2	0	1	1	0
61790	A		Treat trigeminal	23.07	23.07	090	2	0	1	0	0
61791	A		Treat trigeminal	24.44	24.44	090	2	0	0	0	0
61793	A		Focus radiation	35.05	35.05	090	2	0	1	0	0
61795	A		Brain surgery	8.81	8.81	000	0	0	1	0	0

(14) Skull, meninges, and brain, neurostimulators:

61850	A		Implant neuroelectrodes	23.73	23.73	090	2	0	2	0	0
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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
61855	A	Implant neuroelectrodes		23.00	23.00	090	2	0	2	0	0
61860	A	Implant neuroelectrodes		27.69	27.69	090	2	0	2	0	0
61865	A	Implant neuroelectrodes		37.80	37.80	090	2	0	2	1	0
61870	A	Implant neuroelectrodes		18.06	18.06	090	2	0	2	1	0
61875	A	Implant neuroelectrodes		20.86	20.86	090	2	0	2	0	0
61880	A	Revise neuroelectrodes		10.70	10.70	090	2	0	2	1	0
61885	A	Implant neuroelectrodes		7.36	7.36	090	2	0	0	0	0
61888	A	Revise neuroelectrodes		7.02	7.02	010	2	0	1	0	0

(15) Skull, meninges, and brain, repair:

62000	A	Repair of skull		17.43	17.43	090	2	0	2	0	0
62005	A	Repair of skull		26.47	26.47	090	2	0	2	1	0
62010	A	Treatment		38.40	38.40	090	2	0	2	1	0
62100	A	Repair brain fluid		42.93	42.93	090	2	0	2	1	0
62115	A	Reduction of skull		35.65	35.65	090	2	0	2	1	0
62116	A	Reduction of skull		38.91	38.91	090	2	0	2	0	0
62117	A	Reduction of skull		43.94	43.94	090	2	0	2	1	0
62120	A	Repair of skull		38.61	38.61	090	2	0	2	1	0
62121	A	Incise skull		38.38	38.38	090	2	0	2	0	0
62140	A	Repair of skull		26.56	26.56	090	2	0	2	1	0
62141	A	Repair of skull		31.19	31.19	090	2	0	2	1	0
62142	A	Remove skull plate		22.72	22.72	090	2	0	2	0	0
62143	A	Replace skull plate		21.61	21.61	090	2	0	2	1	0
62145	A	Repair of skull		31.06	31.06	090	2	0	2	1	0
62146	A	Repair of skull		26.44	26.44	090	2	0	2	1	0
62147	A	Repair of skull		31.70	31.70	090	2	0	2	1	0

(16) Skull, meninges, and brain, CSF shunt:

62180	A	Establish brain		34.33	34.33	090	2	0	2	0	0
62190	A	Establish brain		23.58	23.58	090	2	0	1	1	0
62192	A	Establish brain		25.65	25.65	090	2	0	2	1	0
62194	A	Replace/irrigate catheter		6.54	6.54	010	2	0	0	0	0
62200	A	Establish brain		34.71	34.71	090	2	0	2	1	0
62201	A	Establish brain		22.92	22.92	090	2	0	1	0	0
62220	A	Establish brain		27.33	27.33	090	2	0	2	1	0
62223	A	Establish brain		27.03	27.03	090	2	0	2	1	0
62225	A	Replace/irrigate catheter		9.87	9.87	090	2	0	1	0	0
62230	A	Replace/revise catheter		20.07	20.07	090	2	0	2	1	0
62256	A	Remove brain catheter		12.80	12.80	090	2	0	2	0	0
62258	A	Replace brain catheter		28.88	28.88	090	2	0	2	1	0

(17) Spine and spinal cord, injection, drainage, or aspiration:

62268	A	Drain spinal cord		7.38	7.38	000	2	0	1	0	0
62269	A	Needle biopsy, spinal		6.40	6.40	000	2	0	0	0	0
62270	A	Spinal fluid tap		1.74	1.74	000	2	0	1	0	0

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62272	A		Drain spinal fluid	2.27	2.27	000	2	0	1	0	0
62273	A		Treat lumbar spine	3.18	3.18	000	2	0	1	0	0
62274	A		Inject spinal anesthetic	2.42	2.42	000	2	0	1	0	0
62275	A		Inject spinal anesthetic	2.30	2.30	000	2	0	1	0	0
62276	A		Inject spinal anesthetic	3.17	3.17	000	2	0	1	0	0
62277	A		Inject spinal anesthetic	2.89	2.89	000	2	0	1	0	0
62278	A		Inject spinal anesthetic	2.46	2.46	000	2	0	1	0	0
62279	A		Inject spinal anesthetic	2.36	2.36	000	2	0	1	0	0
62280	A		Treat spinal cord	3.15	3.15	010	2	0	1	0	0
62281	A		Treat spinal cord	3.41	3.41	010	2	0	1	0	0
62282	A		Treat spinal caudal	3.98	3.98	010	2	0	1	0	0
62284	A		Inject for myelography	3.50	3.22	000	0	0	1	0	0
62287	A		Percutaneous disk	15.52	15.52	090	2	0	1	0	0
62288	A		Injection	2.79	2.79	000	2	0	1	0	0
62289	A		Injection	2.68	2.68	000	2	0	1	0	0
62290	A		Inject for spine	4.65	4.65	000	2	0	1	0	0
62291	A		Inject for spine	4.58	4.58	000	2	0	1	0	0
62292	A		Injection	16.67	16.67	090	2	0	0	0	0
62294	A		Injection	16.76	16.76	090	2	0	1	0	0
62298	A		Injection	3.07	3.07	000	2	0	1	0	0

(18) Spine and spinal cord, catheter implantation:

62350	A		Implant spinal catheter	10.17	10.17	090	2	0	2	1	0
62351	A		Implant spinal catheter	14.89	14.89	090	2	0	2	2	0
62355	A		Remove spinal catheter	8.69	8.69	090	2	0	0	0	0

(19) Spine and spinal cord, reservoir/pump implantation:

62360	A		Insert spine infusion	3.64	3.64	090	2	0	0	1	0
62361	A		Implant spine infusion	7.94	7.94	090	2	0	0	1	0
62362	A		Implant spine infusion	10.34	10.34	090	2	0	0	1	0
62365	A		Remove spine infusion	8.65	8.65	090	2	0	0	0	0
62367	C		Analyze spine infusion	0.00	0.00	XXX	0	0	0	0	0
62367	26	A	Analyze spine infusion	0.81	0.81	XXX	0	0	0	0	0
62367	TC	C	Analyze spine infusion	0.00	0.00	XXX	0	0	0	0	0
62368	C		Analyze spine infusion	0.00	0.00	XXX	0	0	0	0	0
62368	26	A	Analyze spine infusion	1.27	1.27	XXX	0	0	0	0	0
62368	TC	C	Analyze spine infusion	0.00	0.00	XXX	0	0	0	0	0

(20) Spine and spinal cord, posterior extradural laminotomy or laminectomy for exploration/decompression of neural elements or excision of herniated intervertebral disks:

63001	A		Removal of spinal cord	33.05	33.05	090	2	0	2	2	0
63003	A		Removal of spinal cord	33.21	33.21	090	2	0	2	2	0
63005	A		Removal of spinal cord	31.10	31.10	090	2	0	2	2	0
63011	A		Removal of spinal cord	23.86	23.86	090	2	0	2	2	0
63012	A		Removal of spinal cord	32.08	32.08	090	2	0	2	2	0
63015	A		Removal of spinal cord	40.38	40.38	090	2	0	2	2	0
63016	A		Removal of spinal cord	40.10	40.10	090	2	0	2	2	0
63017	A		Removal of spinal cord	33.61	33.61	090	2	0	2	2	0
63020	A		Neck spine disk	30.80	30.80	090	2	1	2	2	0
63030	A		Low back disk space	25.19	25.19	090	2	1	2	2	0
63035	A		Added spinal disk	6.63	6.63	ZZZ	0	1	2	2	0
63040	A		Neck spine disk	39.43	39.43	090	2	1	2	2	0

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63042	A		Low back disk space	36.84	36.84	090	2	1	2	2	0
63045	A		Removal of spinal cord	34.93	34.93	090	2	2	2	2	0
63046	A		Removal of spinal cord	33.66	33.66	090	2	2	2	2	0
63047	A		Removal of spinal cord	31.26	31.26	090	2	2	2	2	0
63048	A		Removal of spinal cord	6.99	6.99	ZZZ	0	2	2	2	0

(21) Spine and spinal cord, transpedicular or costovertebral approach for posterolateral extradural exploration/decompression:

63055	A		Decompress spinal cord	45.19	45.19	090	2	0	2	1	0
63056	A		Decompress spinal cord	41.65	41.65	090	2	0	2	1	0
63057	A		Decompress spinal cord	8.95	8.95	ZZZ	0	0	2	1	0
63064	A		Decompress spinal cord	47.62	47.62	090	2	0	2	1	0
63066	A		Decompress spinal cord	5.60	5.60	ZZZ	0	0	2	1	0

(22) Spine and spinal cord, anterior or anterolateral approach for extradural exploration/decompression:

63075	A		Neck spine disk	36.36	36.36	090	2	0	2	2	0
63076	A		Neck spine disk	8.52	8.52	ZZZ	0	0	2	2	0
63077	A		Spine disk surgery	39.00	39.00	090	2	0	2	2	0
63078	A		Spine disk surgery	5.75	5.75	ZZZ	0	0	2	2	0
63081	A		Removal of vertebra	49.23	49.23	090	2	0	2	1	2
63082	A		Removal of vertebra	9.29	9.29	ZZZ	0	0	2	1	2
63085	A		Removal of vertebra	53.48	53.48	090	2	0	2	2	2
63086	A		Removal of vertebra	6.88	6.88	ZZZ	0	0	2	2	2
63087	A		Removal of vertebra	62.25	62.25	090	2	0	2	2	2
63088	A		Removal of vertebra	9.18	9.18	ZZZ	0	0	2	2	2
63090	A		Removal of vertebra	56.50	56.50	090	2	0	2	2	2
63091	A		Removal of vertebra	5.64	5.64	ZZZ	0	0	2	2	2

(23) Spine and spinal cord, incision:

63170	A		Incise spinal cord	38.05	38.05	090	2	0	2	1	0
63172	A		Drainage of spine	37.15	37.15	090	2	0	2	1	0
63173	A		Drainage of spine	35.90	35.90	090	2	0	2	1	0
63180	A		Revise spinal cord	28.93	28.93	090	2	0	2	1	0
63182	A		Revise spinal cord	35.71	35.71	090	2	0	2	1	0
63185	A		Incise spinal cord	30.29	30.29	090	2	0	2	1	0
63190	A		Incise spinal cord	36.54	36.54	090	2	0	2	1	0
63191	A		Incise spinal cord	29.74	29.74	090	2	1	2	1	0
63194	A		Incise spinal cord	31.28	31.28	090	2	0	2	1	0
63195	A		Incise spinal cord	31.65	31.65	090	2	0	2	1	0
63196	A		Incise spinal cord	36.31	36.31	090	2	0	2	1	0
63197	A		Incise spinal cord	34.48	34.48	090	2	0	2	1	0
63198	A		Incise spinal cord	40.56	40.56	090	2	0	2	1	0
63199	A		Incise spinal cord	46.52	46.52	090	2	0	2	1	0
63200	A		Release of spinal cord	30.49	30.49	090	2	0	2	0	0

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(24) Spine and spinal cord, excision by laminectomy of lesion other than herniated disk:											
63250	A	Revise spinal cord		66.92	66.92	090	2	0	2	1	0
63251	A	Revise spinal cord		61.75	61.75	090	2	0	2	1	0
63252	A	Revise spinal cord		67.72	67.72	090	2	0	2	1	0
63265	A	Excise intraspinal		42.98	42.98	090	2	0	2	1	0
63266	A	Excise intraspinal		46.38	46.38	090	2	0	2	1	0
63267	A	Excise intraspinal		37.69	37.69	090	2	0	2	1	0
63268	A	Excise intraspinal		30.30	30.30	090	2	0	2	1	0
63270	A	Excise intraspinal		43.74	43.74	090	2	0	2	1	0
63271	A	Excise intraspinal		52.77	52.77	090	2	0	2	1	0
63272	A	Excise intraspinal		47.70	47.70	090	2	0	2	1	0
63273	A	Excise intraspinal		40.73	40.73	090	2	0	2	0	0
63275	A	Biopsy/excise neoplasm		49.47	49.47	090	2	0	2	1	0
63276	A	Biopsy/excise neoplasm		48.28	48.28	090	2	0	2	1	0
63277	A	Biopsy/excise neoplasm		43.38	43.38	090	2	0	2	1	0
63278	A	Biopsy/excise neoplasm		42.90	42.90	090	2	0	2	1	0
63280	A	Biopsy/excise neoplasm		55.61	55.61	090	2	0	2	1	0
63281	A	Biopsy/excise neoplasm		54.93	54.93	090	2	0	2	1	0
63282	A	Biopsy/excise neoplasm		49.69	49.69	090	2	0	2	1	0
63283	A	Biopsy/excise neoplasm		42.72	42.72	090	2	0	2	1	0
63285	A	Biopsy/excise neoplasm		58.81	58.81	090	2	0	2	1	0
63286	A	Biopsy/excise neoplasm		62.84	62.84	090	2	0	2	1	0
63287	A	Biopsy/excise neoplasm		60.66	60.66	090	2	0	2	1	0
63290	A	Biopsy/excise neoplasm		62.73	62.73	090	2	0	2	1	0
(25) Spine and spinal cord, excision, anterior or anterolateral approach, intraspinal lesion:											
63300	A	Removal of vertebra		39.97	39.97	090	2	0	2	1	0
63301	A	Removal of vertebra		44.85	44.85	090	2	0	2	1	0
63302	A	Removal of vertebra		47.54	47.54	090	2	0	2	1	0
63303	A	Removal of vertebra		47.43	47.43	090	2	0	2	1	0
63304	A	Removal of vertebra		49.49	49.49	090	2	0	2	0	0
63305	A	Removal of vertebra		52.87	52.87	090	2	0	2	1	0
63306	A	Removal of vertebra		52.70	52.70	090	2	0	2	1	0
63307	A	Removal of vertebra		53.95	53.95	090	2	0	2	1	0
63308	A	Removal of vertebra		9.08	9.08	ZZZ	0	0	2	0	0
(26) Spine and spinal cord, stereotaxis:											
63600	A	Remove spinal cord		24.51	24.51	090	2	0	0	0	0
63610	A	Stimulate spinal cord		15.56	15.56	000	2	0	0	0	0
63615	A	Remove lesion		27.06	27.06	090	2	0	1	1	0
(27) Spine and spinal cord, neurostimulators:											
63650	A	Implant neuroelectrodes		14.45	14.45	090	2	0	1	0	0
63655	A	Implant neuroelectrodes		22.28	22.28	090	2	0	2	1	0
63660	A	Revise neuroelectrodes		13.00	13.00	090	2	0	2	1	0
63685	A	Implant neuroelectrodes		14.34	14.34	090	2	0	2	1	0
63688	A	Revise neuroelectrodes		11.32	11.32	090	2	0	1	0	0
63690	A	Analyze neuroelectrodes		1.03	0.72	XXX	0	0	0	0	0
63691	A	Analyze neuroelectrodes		1.05	0.85	XXX	2	0	1	0	0

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(28) Spine and spinal cord, repair:										
63700	A	Repair of spinal cord	27.19	27.19	090	2	0	2	1	0
63702	A	Repair of spinal cord	30.49	30.49	090	2	0	2	1	0
63704	A	Repair of spinal cord	34.46	34.46	090	2	0	2	1	0
63706	A	Repair of spinal cord	39.41	39.41	090	2	0	2	1	0
63707	A	Repair spinal fluid	23.60	23.60	090	2	0	2	1	0
63709	A	Repair spinal fluid	30.03	30.03	090	2	0	2	1	0
63710	A	Graft repair	23.06	23.06	090	2	0	2	1	0
(29) Spine and spinal cord, shunt, spinal CSF:										
63740	A	Install spinal shunt	24.04	24.04	090	2	0	2	1	0
63741	A	Install spinal shunt	17.58	17.58	090	2	0	2	1	0
63744	A	Revision of spine	16.15	16.15	090	2	0	2	1	0
63746	A	Removal of spine	11.76	11.76	090	2	0	0	0	0
(30) Extracranial nerves, peripheral nerves, and autonomic nervous system, introduction/injection of anesthetic agent, diagnostic or therapeutic:										
64400	A	Injection for nerve	1.50	1.27	000	2	0	1	0	0
64402	A	Injection for nerve	1.78	1.78	000	2	0	1	0	0
64405	A	Injection for nerve	1.86	1.55	000	2	0	1	0	0
64408	A	Injection for nerve	2.35	1.84	000	2	0	0	0	0
64410	A	Injection for nerve	2.07	2.07	000	2	0	0	0	0
64412	A	Injection for nerve	1.71	1.41	000	2	0	1	0	0
64413	A	Injection for nerve	2.03	1.67	000	2	0	1	0	0
64415	A	Injection for nerve	1.63	1.63	000	2	0	1	0	0
64417	A	Injection for nerve	2.00	2.00	000	2	0	1	0	0
64418	A	Injection for nerve	2.07	1.66	000	2	0	1	0	0
64420	A	Injection for nerve	1.73	1.73	000	2	0	1	0	0
64421	A	Injection for nerve	2.42	2.42	000	2	0	1	0	0
64425	A	Injection for nerve	2.19	2.19	000	2	0	1	0	0
64430	A	Injection for nerve	2.07	2.07	000	2	0	1	0	0
64435	A	Injection for nerve	1.82	1.59	000	2	0	1	0	0
64440	A	Injection for nerve	2.03	1.65	000	2	0	1	0	0
64441	A	Injection for nerve	2.67	2.18	000	2	0	1	0	0
64442	A	Injection for nerve	2.52	2.52	000	2	0	1	0	0
64443	A	Injection for nerve	1.56	1.56	ZZZ	0	0	1	0	0
64445	A	Injection for nerve	1.85	1.61	000	2	0	1	0	0
64450	A	Injection for nerve	1.69	1.44	000	2	0	1	0	0
64505	A	Injection for nerve	1.87	1.57	000	2	0	1	0	0
64508	A	Injection for nerve	2.07	1.56	000	2	0	0	0	0
64510	A	Injection for nerve	1.89	1.89	000	2	0	1	0	0
64520	A	Injection for nerve	2.01	2.01	000	2	0	1	0	0
64530	A	Injection for nerve	2.72	2.72	000	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(31) Extracranial nerves, peripheral nerves, and autonomic nervous system, neurostimulators:											
64550	A	Apply neurostimulator		0.61	0.40	000	0	0	1	0	0
64553	A	Implant neuroelectrodes		3.14	2.64	010	2	0	0	0	0
64555	A	Implant neuroelectrodes		2.52	2.32	010	2	0	1	0	0
64560	A	Implant neuroelectrodes		3.68	2.98	010	2	0	0	0	0
64565	A	Implant neuroelectrodes		2.38	2.01	010	2	0	1	0	0
64573	A	Implant neuroelectrodes		7.41	7.41	090	2	0	0	0	0
64575	A	Implant neuroelectrodes		7.14	7.14	090	2	0	1	0	0
64577	A	Implant neuroelectrodes		7.11	7.11	090	2	0	1	0	0
64580	A	Implant neuroelectrodes		6.66	6.66	090	2	0	2	0	0
64585	A	Revise neuroelectrodes		2.86	2.86	010	2	0	2	0	0
64590	A	Implant neuroelectrodes		4.15	4.15	010	2	0	2	1	0
64595	A	Revise neuroelectrodes		2.77	2.77	010	2	0	2	0	0
(32) Extracranial nerves, peripheral nerves, and autonomic nervous system, destruction by neurolytic agent:											
64600	A	Injection treatment		4.86	4.86	010	2	2	1	0	0
64605	A	Injection treatment		6.78	6.78	010	2	0	0	0	0
64610	A	Injection treatment		14.26	14.26	010	2	0	1	0	0
64612	A	Destroy nerve		3.27	2.57	010	2	0	1	0	0
64613	A	Destroy nerve		3.27	2.57	010	2	0	1	0	0
64620	A	Injection treatment		3.65	3.65	010	2	0	1	0	0
64622	A	Injection treatment		4.67	4.67	010	2	0	1	0	0
64623	A	Injection treatment		1.81	1.81	ZZZ	0	0	1	0	0
64630	A	Injection treatment		4.61	4.61	010	2	0	0	0	0
64640	A	Injection treatment		3.44	3.44	010	2	0	1	0	0
64680	A	Injection treatment		4.10	4.10	010	2	0	1	0	0
(33) Extracranial nerves, peripheral nerves, and autonomic nervous system, neuroplasty:											
64702	A	Revise finger/toe		8.30	8.30	090	2	0	1	0	0
64704	A	Revise hand/foot		9.42	9.42	090	2	0	2	1	0
64708	A	Revise arm/leg		12.75	12.75	090	2	0	2	1	0
64712	A	Revise sciatic nerve		16.20	16.20	090	2	0	2	1	0
64713	A	Revise arm		20.01	20.01	090	2	0	2	1	0
64714	A	Revise low back		16.08	16.08	090	2	0	2	1	0
64716	A	Revise cranial nerve		10.76	10.76	090	2	0	2	1	0
64718	A	Revise ulnar nerve		12.43	12.43	090	2	0	0	0	0
64719	A	Revise ulnar nerve		9.65	9.65	090	2	0	1	0	0
64721	A	Carpal tunnel		8.91	8.91	090	2	1	1	0	0
64722	A	Relieve pressure		9.87	9.87	090	2	0	2	1	0
64726	A	Release foot/toe		4.53	4.53	090	2	0	1	0	0
64727	A	Internal nerve		6.25	6.25	ZZZ	0	0	1	0	0
(34) Extracranial nerves, peripheral nerves, and autonomic nervous system, transection or avulsion:											
64732	A	Incision of brow nerve		8.56	8.56	090	2	0	2	0	0
64734	A	Incision of cheek		9.29	9.29	090	2	0	0	0	0
64736	A	Incision of chin		8.72	8.72	090	2	0	2	0	0
64738	A	Incision of jaw		10.44	10.44	090	2	0	2	0	0
64740	A	Incision of tongue nerve		10.42	10.42	090	2	0	2	0	0
64742	A	Incision of face		10.72	10.72	090	2	0	2	0	0
64744	A	Incision of back of head		10.93	10.93	090	2	1	0	0	0
64746	A	Incise diaphragm		9.45	9.45	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
64752	A		Incision of vagus	10.67	10.67	090	2	0	2	1	0
64755	A		Incision of stomach	23.64	23.64	090	2	0	2	1	0
64760	A		Incision of vagus	13.57	13.57	090	2	0	2	1	0
64761	A		Incision of pelvus nerve	10.60	10.60	090	2	1	2	0	0
64763	A		Incise hip/thigh	11.43	11.43	090	2	1	2	1	0
64766	A		Incise hip/thigh	14.98	14.98	090	2	1	2	0	0
64771	A		Sever cranial nerve	13.28	13.28	090	2	0	2	0	0
64772	A		Incision of spinal nerve	13.80	13.80	090	2	0	2	1	0

(35) Extracranial nerves, peripheral nerves, and autonomic nervous system, excision

64774	A		Remove skin nerve	7.59	7.59	090	2	0	1	0	0
64776	A		Remove digit nerve	7.56	7.56	090	2	0	0	0	0
64778	A		Additional digit nerve	5.70	5.70	ZZZ	0	0	1	0	0
64782	A		Remove limb nerve	10.45	10.45	090	2	0	1	1	0
64783	A		Additional limb nerve	6.79	6.79	ZZZ	0	0	1	0	0
64784	A		Remove nerve lesion	14.89	14.89	090	2	0	0	0	0
64786	A		Remove sciatic nerve	27.44	27.44	090	2	0	2	0	0
64787	A		Implant nerve end	7.59	7.59	ZZZ	0	0	0	0	0
64788	A		Remove skin nerve	7.97	7.97	090	2	0	1	0	0
64790	A		Removal of nerve	17.81	17.81	090	2	0	0	1	0
64792	A		Removal of nerve	23.14	23.14	090	2	0	2	1	0
64795	A		Biopsy of nerve	5.25	5.25	000	2	0	1	0	0
64802	A		Remove sympathetic nerve	14.13	14.13	090	2	1	2	1	0
64804	A		Remove sympathetic nerve	26.97	26.97	090	2	1	2	1	0
64809	A		Remove sympathetic nerve	23.73	23.73	090	2	1	2	1	0
64818	A		Remove sympathetic nerve	18.58	18.58	090	2	1	2	1	0
64820	A		Remove sympathetic nerve	17.22	17.22	090	2	0	1	0	0

(36) Extracranial nerves, peripheral nerves, and autonomic nervous system, neurorrhaphy:

64830	A		Microrepair of nerve	4.97	4.97	ZZZ	0	0	1	0	0
64831	A		Repair of digit	12.14	12.14	090	2	0	1	0	0
64832	A		Repair additional digit	6.62	6.62	ZZZ	0	0	0	0	0
64834	A		Repair of hand	12.94	12.94	090	2	0	0	0	0
64835	A		Repair of hand	16.26	16.26	090	2	0	2	0	0
64836	A		Repair of hand	17.08	17.08	090	2	0	2	0	0
64837	A		Repair additional nerve	10.45	10.45	ZZZ	0	0	2	0	0
64840	A		Repair of leg nerve	22.11	22.11	090	2	0	2	0	0
64856	A		Repair/transposition	21.26	21.26	090	2	0	1	1	0
64857	A		Repair arm/leg	23.21	23.21	090	2	0	2	1	0
64858	A		Repair sciatic nerve	26.74	26.74	090	2	0	2	1	0
64859	A		Repair additional nerve	7.57	7.57	ZZZ	0	0	2	1	0
64861	A		Repair of arm nerve	31.19	31.19	090	2	0	2	1	0
64862	A		Repair of low back	39.36	39.36	090	2	0	2	0	0
64864	A		Repair of facial nerve	19.63	19.63	090	2	0	2	1	0
64865	A		Repair of facial nerve	26.58	26.58	090	2	0	2	1	0
64866	A		Fusion of facial nerve	26.11	26.11	090	2	0	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
64868	A		Fusion of facial nerve	24.37	24.37	090	2	0	2	1	0
64870	A		Fusion of facial nerve	28.89	28.89	090	2	0	2	1	0
64872	A		Subsequent repair	3.36	3.36	ZZZ	0	0	2	1	0
64874	A		Repair and revise	5.04	5.04	ZZZ	0	0	2	1	0
64876	A		Repair nerve	5.71	5.71	ZZZ	0	0	2	1	0

(37) Extracranial nerves, peripheral nerves, and autonomic nervous system, neuroorrhaphy with nerve graft:

64885	A		Nerve graft, head/neck	28.99	28.99	090	2	0	2	1	0
64886	A		Nerve graft, head/neck	34.43	34.43	090	2	0	2	1	0
64890	A		Nerve graft, hand/foot	26.76	26.76	090	2	0	2	0	0
64891	A		Nerve graft, hand/foot	25.67	25.67	090	2	0	2	0	0
64892	A		Nerve graft, arm/leg	24.90	24.90	090	2	0	2	1	0
64893	A		Nerve graft, arm/leg	28.87	28.87	090	2	0	2	0	0
64895	A		Nerve graft, hand/foot	31.59	31.59	090	2	0	2	1	0
64896	A		Nerve graft, hand/foot	36.58	36.58	090	2	0	2	1	0
64897	A		Nerve graft, arm/leg	30.12	30.12	090	2	0	2	0	0
64898	A		Nerve graft, arm/leg	32.91	32.91	090	2	0	2	1	0
64901	A		Graft additional nerve	19.57	19.57	ZZZ	0	0	2	1	0
64902	A		Graft additional nerve	22.80	22.80	ZZZ	0	0	2	0	0
64905	A		Nerve pedicle transfer	22.19	22.19	090	2	0	2	1	0
64907	A		Nerve pedicle transfer	31.08	31.08	090	2	0	2	1	0

(38) Extracranial nerves, peripheral nerves, and autonomic nervous system, other procedures:

64999	C		Nervous system surgery	0.00	0.00	YYY	2	0	0	1	1
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(39) Eyeball, removal of eye:

65091	A		Revise eye	12.98	12.98	090	2	1	0	1	0
65093	A		Revise eye	13.83	13.83	090	2	1	1	1	0
65101	A		Removal of eye	14.11	14.11	090	2	1	1	0	0
65103	A		Remove eye/insert	15.19	15.19	090	2	1	1	1	0
65105	A		Remove eye/attached	17.03	17.03	090	2	1	2	1	0
65110	A		Removal of eye	28.12	28.12	090	2	1	2	1	0
65112	A		Removal of eye	27.22	27.22	090	2	1	2	1	0
65114	A		Removal of eye	29.45	29.45	090	2	1	2	1	0

(40) Eyeball, secondary implant procedures:

65125	A		Revise ocular implant	5.29	5.29	090	2	1	1	1	0
65130	A		Insert ocular implant	14.37	14.37	090	2	1	1	1	0
65135	A		Insert ocular implant	12.08	12.08	090	2	1	1	0	0
65140	A		Attach ocular implant	13.47	13.47	090	2	1	1	0	0
65150	A		Revise ocular implant	12.65	12.65	090	2	1	0	0	0
65155	A		Reinsert ocular implant	17.56	17.56	090	2	1	1	0	0
65175	A		Remove ocular implant	12.60	12.60	090	2	1	1	1	0

(41) Eyeball, removal of foreign body:

65205	A		Remove foreign body	1.01	0.83	000	2	1	1	0	0
65210	A		Remove foreign body	1.22	1.00	000	2	1	1	0	0
65220	A		Remove foreign body	1.17	0.92	000	2	1	1	0	0
65222	A		Remove foreign body	1.41	1.14	000	2	1	1	0	0
65235	A		Remove foreign body	12.46	12.46	090	2	1	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
65260		A	Remove foreign body	18.53	18.53	090	2	1	2	0	0
65265		A	Remove foreign body	21.41	21.41	090	2	1	2	1	0

(42) Eyeball, repair of laceration:

65270		A	Repair of eye	2.89	2.89	010	2	1	0	0	0
65272		A	Repair of eye	5.11	5.11	090	2	1	1	0	0
65273		A	Repair of eye	7.18	7.18	090	2	1	1	1	0
65275		A	Repair of eye	5.51	5.51	090	2	1	0	0	0
65280		A	Repair of eye	15.37	15.37	090	2	1	0	0	0
65285		A	Repair of eye	23.91	23.91	090	2	1	2	0	0
65286		A	Repair of eye	9.77	7.45	090	2	1	1	0	0
65290		A	Repair of eye	10.86	10.86	090	2	1	1	1	0

(43) Anterior segment, cornea:

65400		A	Removal of eye	11.93	11.93	090	2	1	1	0	0
65410		A	Biopsy of cornea	2.93	2.93	000	2	1	0	0	0
65420		A	Removal of eye	8.05	8.05	090	2	1	1	0	0
65426		A	Removal of eye	10.56	10.56	090	2	1	1	0	0
65430		A	Corneal smear	1.87	1.61	000	2	1	1	0	0
65435		A	Curette/treat cornea	1.60	1.23	000	2	1	1	0	0
65436		A	Curette/treat cornea	5.33	4.59	090	2	1	1	0	0
65450		A	Treatment of cornea	6.23	6.23	090	2	1	1	0	0
65600		A	Revision of cornea	5.69	4.43	090	2	1	1	0	0
65710		A	Corneal transplant	23.85	23.85	090	2	1	2	1	0
65730		A	Corneal transplant	28.27	28.27	090	2	1	2	1	0
65750		A	Corneal transplant	29.90	29.90	090	2	1	2	1	0
65755		A	Corneal transplant	29.84	29.84	090	2	1	2	1	0
65760		N	Revision of cornea	0.00	0.00	XXX	9	9	9	9	9
65765		N	Revision of cornea	0.00	0.00	XXX	9	9	9	9	9
65767		N	Corneal tissue	0.00	0.00	XXX	9	9	9	9	9
65770		A	Revise cornea	29.67	29.67	090	2	1	2	0	0
65771		N	Radial keratotomy	0.00	0.00	XXX	9	9	9	9	9
65772		A	Correct astigmatism	8.62	6.35	090	2	1	1	0	0
65775		A	Correct astigmatism	11.69	11.69	090	2	1	1	0	0

(44) Anterior segment, anterior chamber:

65800		A	Drainage of eye	3.45	3.45	000	2	1	1	0	0
65805		A	Drainage of eye	3.54	2.66	000	2	1	1	0	0
65810		A	Drainage of eye	9.76	9.76	090	2	1	1	0	0
65815		A	Drainage of eye	9.05	9.05	090	2	1	1	0	0
65820		A	Relieve inner eye	16.88	16.88	090	2	1	0	0	0
65850		A	Incision of eye	21.11	21.11	090	2	1	1	1	0
65855		A	Laser surgery	10.00	7.09	090	2	1	1	0	0
65860		A	Incise inner eye	7.20	5.32	090	2	1	0	0	0
65865		A	Incise inner eye	11.26	11.26	090	2	1	1	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
65870	A		Incise inner eye	11.52	11.52	090	2	1	1	1	0
65875	A		Incise inner eye	12.19	12.19	090	2	1	1	1	0
65880	A		Incise inner eye	13.26	13.26	090	2	1	1	0	0
65900	A		Remove eye lesion	18.07	18.07	090	2	1	2	0	0
65920	A		Remove implant	15.94	15.94	090	2	1	1	1	0
65930	A		Remove blood clot	14.40	14.40	090	2	1	1	1	0
66020	A		Injection treatment	3.21	3.21	010	2	1	1	0	0
66030	A		Injection treatment	1.67	1.41	010	2	1	1	0	0

(45) Anterior segment, anterior sclera:

66130	A		Remove eye lesion	12.24	12.24	090	2	1	0	0	0
66150	A		Glaucoma surgery	16.68	16.68	090	2	1	1	1	0
66155	A		Glaucoma surgery	16.61	16.61	090	2	1	1	0	0
66160	A		Glaucoma surgery	19.94	19.94	090	2	1	2	1	0
66165	A		Glaucoma surgery	16.10	16.10	090	2	1	2	0	0
66170	A		Glaucoma surgery	23.12	23.12	090	2	1	2	1	0
66172	A		Incision of eye	25.74	25.74	090	2	1	2	1	0
66180	A		Implant eye shunt	29.24	29.24	090	2	1	2	1	0
66185	A		Revise eye shunt	16.36	16.36	090	2	1	2	0	0
66220	A		Repair eye lesion	12.99	12.99	090	2	1	2	1	0
66225	A		Repair/graft eye	22.25	22.25	090	2	1	2	1	0
66250	A		Follow-up surgery	11.99	11.99	090	2	1	1	0	0

(46) Anterior segment, iris, ciliary body:

66500	A		Incision of iris	7.46	7.46	090	2	1	1	1	0
66505	A		Incision of iris	6.96	6.96	090	2	1	1	0	0
66600	A		Remove iris	17.20	17.20	090	2	1	1	0	0
66605	A		Removal of iris	23.45	23.45	090	2	1	1	0	0
66625	A		Removal of iris	10.37	10.37	090	2	1	1	0	0
66630	A		Removal of iris	12.39	12.39	090	2	1	1	0	0
66635	A		Removal of iris	12.59	12.59	090	2	1	1	0	0
66680	A		Repair iris and ciliary	10.91	10.91	090	2	1	1	1	0
66682	A		Repair iris and ciliary	12.44	12.44	090	2	1	1	0	0
66700	A		Destruction, ciliary	9.61	9.61	090	2	1	0	0	0
66710	A		Destruction, ciliary	9.65	9.65	090	2	1	1	0	0
66720	A		Destruction, ciliary	9.63	9.63	090	2	1	1	0	0
66740	A		Destruction, ciliary	9.64	9.64	090	2	1	1	0	0
66761	A		Revision of iris	8.28	6.12	090	2	1	1	0	0
66762	A		Revision of iris	9.33	6.90	090	2	1	1	0	0
66770	A		Remove inner eye lesion	10.46	7.70	090	2	1	1	0	0

(47) Anterior segment, lens:

66820	A		Incision, secondary	7.83	7.83	090	2	1	1	0	0
66821	A		After cataract	4.84	4.84	090	2	1	1	0	0
66825	A		Reposition intraocular	14.76	14.76	090	2	1	0	0	0
66830	A		Removal of lens	15.07	15.07	090	2	1	1	0	0
66840	A		Removal of lens	15.88	15.88	090	2	1	1	0	0
66850	A		Removal of lens	18.34	18.34	090	2	1	1	0	0
66852	A		Removal of lens	20.14	20.14	090	2	1	0	1	0
66920	A		Extraction of lens	17.79	17.79	090	2	1	0	1	0
66930	A		Extraction of lens	19.69	19.69	090	2	1	0	0	0
66940	A		Extraction of lens	17.93	17.93	090	2	1	0	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
66983	A		Remove cataract	18.24	18.24	090	2	1	1	0	0
66984	A		Remove cataract	20.78	20.78	090	2	1	1	0	0
66985	A		Insert lens procedure	16.88	16.88	090	2	1	1	1	0
66986	A		Exchange lens procedure	23.28	23.28	090	2	1	1	1	0

(48) Anterior segment, other procedures:

66999	C		Eye surgery	0.00	0.00	YYY	2	1	0	1	1
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(49) Posterior segment, vitreous:

67005	A		Partial removal	11.85	11.85	090	2	1	1	1	0
67010	A		Partial removal	14.11	14.11	090	2	1	2	1	0
67015	A		Release of eye	12.71	12.71	090	2	1	1	1	0
67025	A		Replace eye fluid	12.93	12.93	090	2	1	1	1	0
67027	A		Implant drug delivery	18.84	18.84	090	2	1	2	1	0
67028	A		Inject eye	5.50	5.06	000	2	1	1	0	0
67030	A		Incise inner eye	9.81	9.81	090	2	1	2	1	0
67031	A		Laser surgery	7.65	5.70	090	2	1	1	0	0
67036	A		Remove inner eye fluid	24.25	24.25	090	2	1	2	1	0
67038	A		Strip retinal membrane	42.84	42.84	090	2	1	2	1	0
67039	A		Laser treatment	29.53	29.53	090	2	1	2	1	0
67040	A		Laser treatment	34.91	34.91	090	2	1	2	1	0

(50) Posterior segment, retina or choroid:

67101	A		Repair detached retina	15.20	11.20	090	2	1	1	0	0
67105	A		Repair detached retina	16.00	11.58	090	2	1	1	0	0
67107	A		Repair detached retina	29.84	29.84	090	2	1	2	1	0
67108	A		Repair detached retina	41.99	41.99	090	2	1	2	1	0
67110	A		Repair detached retina	17.89	17.89	090	2	1	1	0	0
67112	A		Re-repair detached	31.73	31.73	090	2	1	2	1	0
67115	A		Release, encircling	10.08	10.08	090	2	1	1	0	0
67120	A		Remove eye implant	11.99	11.99	090	2	1	1	1	0
67121	A		Remove eye implant	19.06	19.06	090	2	1	2	1	0
67141	A		Treatment of retina	10.51	7.75	090	2	1	1	0	0
67145	A		Treatment of retina	11.42	8.28	090	2	1	1	0	0
67208	A		Treatment of retina	13.49	9.93	090	2	1	1	0	0
67210	A		Treatment of retina	18.10	13.74	090	2	1	1	0	0
67218	A		Treatment of retina	25.52	25.52	090	2	1	1	0	0
67227	A		Treatment of retina	13.25	13.25	090	2	1	1	0	0
67228	A		Treatment of retina	20.90	16.37	090	2	1	1	0	0

(51) Posterior segment, sclera:

67250	A		Reinforce eye	14.83	14.83	090	2	1	1	1	0
67255	A		Reinforce/graft eye	18.02	18.02	090	2	1	2	1	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(52) Posterior segment, other procedures:											
67299	C	Eye surgery		0.00	0.00	YYY	2	1	0	1	1
(53) Ocular adnexa, extraocular muscles:											
67311	A	Revise eye muscles		13.37	13.37	090	2	1	1	0	0
67312	A	Revise two eye muscles		17.12	17.12	090	2	1	1	1	0
67314	A	Revise eye muscles		15.14	15.14	090	2	1	1	0	0
67316	A	Revise two eye muscles		19.06	19.06	090	2	1	0	0	0
67318	A	Revise eye muscles		13.31	13.31	090	2	1	1	1	0
67320	A	Revise eye muscle		17.45	17.45	090	2	1	1	0	0
67331	A	Eye surgery		16.30	16.30	090	2	1	1	1	0
67332	A	Re-revise eye muscle		18.03	18.03	090	2	1	2	1	0
67334	A	Revise eye muscle		13.49	13.49	090	2	1	1	1	0
67335	A	Eye suture		5.14	5.14	ZZZ	0	1	1	1	0
67340	A	Revise eye muscle		16.78	16.78	090	2	1	2	0	0
67343	A	Release eye tissue		12.48	12.48	090	2	1	2	1	0
67345	A	Destroy nerve		4.97	3.90	010	2	1	1	0	0
67350	A	Biopsy eye muscle		4.99	4.99	000	2	1	0	0	0
67399	C	Eye muscle surgery		0.00	0.00	YYY	2	1	2	1	1
(54) Ocular adnexa, orbit:											
67400	A	Explore/biopsy eye		19.58	19.58	090	2	1	2	1	0
67405	A	Explore/drain eye		15.99	15.99	090	2	1	2	0	0
67412	A	Explore/treat eye		19.09	19.09	090	2	1	2	1	0
67413	A	Explore/treat eye		17.21	17.21	090	2	1	2	0	0
67414	A	Explore/decompress eye		18.45	18.45	090	2	1	2	1	0
67415	A	Aspirate orbital contents		3.54	3.54	000	2	1	0	0	0
67420	A	Explore/treat eye		35.03	35.03	090	2	1	2	1	0
67430	A	Explore/treat eye		22.74	22.74	090	2	1	2	0	0
67440	A	Explore/drain eye		26.33	26.33	090	2	1	2	1	0
67445	A	Explore/decompress eye		24.16	24.16	090	2	1	2	1	0
67450	A	Explore/biopsy eye		27.10	27.10	090	2	1	2	1	0
67500	A	Inject/treat eye		1.46	1.46	000	2	1	1	0	0
67505	A	Inject/treat eye		1.78	1.21	000	2	1	1	0	0
67515	A	Inject/treat eye		1.11	0.84	000	2	1	1	0	0
67550	A	Insert eye socket		18.93	18.93	090	2	1	1	1	0
67560	A	Revise eye socket		17.91	17.91	090	2	1	0	0	0
67570	A	Decompress optic nerve		19.85	19.85	090	2	1	2	1	0
67599	C	Orbit surgery procedure		0.00	0.00	YYY	2	1	2	1	1
(55) Ocular adnexa, eyelids:											
67700	A	Drainage of eyelid		1.72	1.48	010	2	1	1	0	0
67710	A	Incision of eyelid		1.93	1.45	010	2	1	1	0	0
67715	A	Incision of eyelid		2.45	2.45	010	2	1	1	0	0
67800	A	Remove eyelid lesion		2.19	1.73	010	2	0	1	0	0
67801	A	Remove eyelid lesion		3.09	2.42	010	2	0	1	0	0
67805	A	Remove eyelid lesion		3.39	2.73	010	2	0	1	0	0
67808	A	Remove eyelid lesion		5.58	5.58	090	2	0	1	0	0
67810	A	Biopsy of eyelid		2.15	1.76	000	2	0	1	0	0
67820	A	Revise eyelashes		1.19	1.00	000	2	0	1	0	0
67825	A	Revise eyelashes		2.15	1.72	010	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
67830	A		Revise eyelashes	3.68	3.44	010	2	0	1	0	0
67835	A		Revise eyelashes	11.21	11.21	090	2	0	0	0	0
67840	A		Remove eyelid lesion	3.07	2.48	010	2	0	1	0	0
67850	A		Treat eyelid lesion	2.35	1.96	010	2	0	1	0	0
67875	A		Closure of eyelid	2.96	2.74	000	2	0	1	0	0
67880	A		Revision of eyelid	7.38	7.38	090	2	0	1	0	0
67882	A		Revision of eyelid	10.20	10.20	090	2	0	1	0	0
67900	A		Repair brow	9.34	9.34	090	2	0	1	0	0
67901	A		Repair eyelid	14.09	14.09	090	2	1	1	0	0
67902	A		Repair eyelid	14.25	14.25	090	2	1	2	1	0
67903	A		Repair eyelid	12.96	12.96	090	2	1	1	1	0
67904	A		Repair eyelid	12.73	12.73	090	2	1	1	1	0
67906	A		Repair eyelid	11.64	11.64	090	2	1	1	0	0
67908	A		Repair eyelid	10.40	10.40	090	2	1	1	0	0
67909	A		Revise eyelid	10.90	10.90	090	2	1	1	0	0
67911	A		Revise eyelid	10.82	10.82	090	2	1	1	0	0
67914	A		Repair eyelid	7.47	7.47	090	2	1	1	0	0
67915	A		Repair eyelid	4.13	3.53	090	2	1	1	0	0
67916	A		Repair eyelid	10.67	10.67	090	2	1	1	0	0
67917	A		Repair eyelid	12.12	12.12	090	2	1	1	0	0
67921	A		Repair eyelid	6.81	6.81	090	2	1	1	0	0
67922	A		Repair eyelid	3.97	3.39	090	2	1	1	0	0
67923	A		Repair eyelid	11.80	11.80	090	2	1	1	0	0
67924	A		Repair eyelid	11.65	11.65	090	2	1	1	0	0
67930	A		Repair eyelid	4.55	3.93	010	2	0	1	0	0
67935	A		Repair eyelid	9.44	9.44	090	2	0	1	0	0
67938	A		Remove eyelid	1.73	1.48	010	2	0	1	0	0
67950	A		Revision of eyelid	11.71	11.71	090	2	0	2	1	0
67961	A		Revision of eyelid	11.49	11.49	090	2	0	0	0	0
67966	A		Revision of eyelid	13.31	13.31	090	2	0	1	0	0
67971	A		Reconstruction of eyelid	19.56	19.56	090	2	0	2	1	0
67973	A		Reconstruction of eyelid	25.26	25.26	090	2	0	2	1	0
67974	A		Reconstruction of eyelid	25.73	25.73	090	2	0	2	1	0
67975	A		Reconstruction of eyelid	12.43	12.43	090	2	0	1	0	0
67999	C		Revision of eyelid	0.00	0.00	YYY	2	0	0	1	1

(56) Conjunctiva, incision and drainage:

68020	A		Incise/drain eye	1.75	1.51	010	2	0	1	0	0
68040	A		Treatment of eye	1.22	1.00	000	2	0	1	0	0

(57) Conjunctiva, excision and/or drainage:

68100	A		Biopsy of eyelid	2.21	1.74	000	2	0	1	0	0
68110	A		Remove eyelid lesion	2.84	2.24	010	2	0	1	0	0
68115	A		Remove eyelid lesion	4.07	4.07	010	2	0	1	0	0
68130	A		Remove eyelid lesion	8.55	8.55	090	2	0	1	0	0
68135	A		Remove eyelid lesion	2.41	2.05	010	2	0	1	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(58) Conjunctiva, injection:											
68200	A	Treat eyelid		0.96	0.71	000	2	1	1	0	0
(59) Conjunctiva, conjunctivoplasty:											
68320	A	Revise/graft eyelid		10.82	10.82	090	2	0	1	1	0
68325	A	Revise/graft eyelid		14.85	14.85	090	2	0	1	1	0
68326	A	Revise/graft eyelid		14.36	14.36	090	2	0	1	0	0
68328	A	Revise/graft eyelid		16.57	16.57	090	2	0	0	0	0
68330	A	Revise eyelid		9.71	9.71	090	2	0	0	0	0
68335	A	Revise/graft eyelid		14.54	14.54	090	2	0	1	1	0
68340	A	Separate eyelid		6.91	6.91	090	2	0	0	0	0
(60) Conjunctiva, other procedures:											
68360	A	Revise eyelid		8.80	8.80	090	2	0	1	0	0
68362	A	Revise eyelid		14.63	14.63	090	2	0	1	1	0
68399	C	Eyelid lining surgery		0.00	0.00	YYY	2	0	0	1	1
(61) Conjunctiva, lacrimal system:											
68400	A	Incise/drain tear duct		2.53	2.05	010	2	0	1	0	0
68420	A	Incise/drain tear duct		3.11	2.61	010	2	0	1	0	0
68440	A	Incise tear duct		1.61	1.24	010	2	0	1	0	0
68500	A	Removal of tear duct		17.77	17.77	090	2	0	1	0	0
68505	A	Partial removal		18.60	18.60	090	2	0	1	0	0
68510	A	Biopsy of tear duct		7.90	7.90	000	2	0	0	0	0
68520	A	Removal of tear duct		15.08	15.08	090	2	0	0	0	0
68525	A	Biopsy of tear duct		7.70	7.70	000	2	0	1	1	0
68530	A	Clearance of tear duct		6.17	4.79	010	2	0	1	0	0
68540	A	Remove tear gland		17.93	17.93	090	2	0	1	1	0
68550	A	Remove tear gland		23.40	23.40	090	2	0	1	0	0
68700	A	Repair tear duct		8.67	8.67	090	2	0	1	0	0
68705	A	Revise tear duct		2.88	2.39	010	2	0	1	0	0
68720	A	Create tear sac		18.05	18.05	090	2	0	2	1	0
68745	A	Create tear duct		14.42	14.42	090	2	0	2	1	0
68750	A	Create tear duct		17.53	17.53	090	2	0	2	1	0
68760	A	Close tear duct		2.48	2.04	010	2	1	1	0	0
68761	A	Close tear duct		2.15	1.70	010	2	1	0	0	0
68770	A	Close tear system		10.60	8.55	090	2	0	0	0	0
68801	A	Dilate tear duct		1.27	1.07	010	2	1	1	0	0
68810	A	Probe nasolacrimal duct		2.27	2.01	010	2	1	1	0	0
68811	A	Probe nasolacrimal duct		3.62	3.62	010	2	1	1	0	0
68815	A	Probe nasolacrimal duct		4.82	3.89	010	2	1	1	0	0
68840	A	Explore/irrigate		1.62	1.39	010	2	0	1	0	0
68850	A	Injection		1.24	1.24	000	2	0	1	0	0
68899	C	Tear duct system surgery		0.00	0.00	YYY	2	0	0	1	1
(62) External ear, incision:											
69000	A	Drain external ear		1.67	1.50	010	2	0	1	0	0
69005	A	Drain external ear		3.11	2.55	010	2	0	1	0	0
69020	A	Drain outer ear		1.80	1.58	010	2	0	1	0	0
69090	N	Pierce earlobes		0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2) (3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(63) External ear, excision:										
69100	A	Biopsy of external ear	1.41	1.09	000	2	0	1	0	0
69105	A	Biopsy of external ear	1.59	1.21	000	2	0	1	0	0
69110	A	Partial removal	5.87	5.87	090	2	0	1	0	0
69120	A	Removal of external ear	4.47	4.47	090	2	0	1	0	0
69140	A	Remove ear canal	15.45	15.45	090	2	0	0	0	0
69145	A	Remove ear canal	4.96	4.96	090	2	0	1	0	0
69150	A	Extensive ear canal	22.99	22.99	090	2	0	2	1	0
69155	A	Extensive ear/neck	35.15	35.15	090	2	0	2	1	0
(64) External ear, removal of foreign body:										
69200	A	Clear outer ear	1.13	0.92	000	2	0	1	0	0
69205	A	Clear outer ear	2.18	2.18	010	2	0	1	0	0
69210	A	Remove impacted cerumen	0.79	0.68	000	2	2	1	0	0
69220	A	Clean out mastoid	1.26	1.02	000	2	1	1	0	0
69222	A	Clean out mastoid	2.03	1.67	010	2	1	1	0	0
(65) External ear, repair:										
69300	R	Revise external ear	11.05	11.05	YYY	0	0	0	0	0
69310	A	Rebuild outer ear	19.90	19.90	090	2	0	1	0	0
69320	A	Rebuild outer ear	30.46	30.46	090	2	0	2	0	0
(66) External ear, other procedures:										
69399	C	Outer ear surgery	0.00	0.00	YYY	2	0	0	1	1
(67) Middle ear, introduction:										
69400	A	Inflate middle ear	1.22	1.00	000	2	0	1	0	0
69401	A	Inflate middle ear	0.83	0.71	000	2	0	1	0	0
69405	A	Catheterize middle ear	2.87	2.64	010	2	0	0	0	0
69410	A	Inset middle ear	0.92	0.63	000	2	0	0	0	0
(68) Middle ear, incision:										
69420	A	Incision of ear	1.92	1.58	010	2	1	1	0	0
69421	A	Incision of ear	2.74	2.74	010	2	1	1	0	0
69424	A	Remove ventilation	1.38	1.09	000	2	1	1	0	0
69433	A	Create eardrum	2.75	2.10	010	2	1	1	0	0
69436	A	Create eardrum	3.96	3.96	010	2	1	1	0	0
69440	A	Exploration of ear	15.43	15.43	090	2	0	1	0	0
69450	A	Eardrum revision	11.61	11.61	090	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(69) Middle ear, excision:											
69501	A		Simple mastoidectomy	18.52	18.52	090	2	0	1	0	0
69502	A		Complete mastoidectomy	24.94	24.94	090	2	0	0	0	0
69505	A		Remove mastoid	26.58	26.58	090	2	0	0	0	0
69511	A		Extensive mastoid	27.65	27.65	090	2	0	0	0	0
69530	A		Extensive mastoid	34.51	34.51	090	2	0	2	0	0
69535	A		Remove part of bone	58.79	58.79	090	2	0	2	1	0
69540	A		Remove ear lesion	2.39	1.78	010	2	0	1	0	0
69550	A		Remove ear lesion	22.76	22.76	090	2	0	2	0	0
69552	A		Remove ear lesion	34.85	34.85	090	2	0	2	0	0
69554	A		Remove ear lesion	53.65	53.65	090	2	0	2	1	0
(70) Middle ear, repair:											
69601	A		Mastoid surgery	26.42	26.42	090	2	0	0	0	0
69602	A		Mastoid surgery	27.72	27.72	090	2	0	0	0	0
69603	A		Mastoid surgery	28.66	28.66	090	2	0	0	0	0
69604	A		Mastoid surgery	29.11	29.11	090	2	0	2	0	0
69605	A		Mastoid surgery	32.25	32.25	090	2	0	2	0	0
69610	A		Repair eardrum	4.98	4.53	010	2	0	1	0	0
69620	A		Repair eardrum	12.25	12.25	090	2	0	1	0	0
69631	A		Repair eardrum	20.32	20.32	090	2	0	1	0	0
69632	A		Rebuild eardrum	26.08	26.08	090	2	0	1	0	0
69633	A		Rebuild eardrum	24.82	24.82	090	2	0	1	0	0
69635	A		Repair eardrum	27.32	27.32	090	2	0	1	0	0
69636	A		Rebuild eardrum	31.15	31.15	090	2	0	0	0	0
69637	A		Rebuild eardrum	31.00	31.00	090	2	0	0	0	0
69641	A		Revise middle ear	26.07	26.07	090	2	0	1	0	0
69642	A		Revise middle ear	34.40	34.40	090	2	0	1	0	0
69643	A		Revise middle ear	31.57	31.57	090	2	0	1	0	0
69644	A		Revise middle ear	34.93	34.93	090	2	0	1	0	0
69645	A		Revise middle ear	33.66	33.66	090	2	0	1	0	0
69646	A		Revise middle ear	36.77	36.77	090	2	0	0	0	0
69650	A		Release middle ear	19.77	19.77	090	2	0	1	0	0
69660	A		Revise middle ear	24.45	24.45	090	2	0	1	0	0
69661	A		Revise middle ear	32.07	32.07	090	2	0	0	0	0
69662	A		Revise middle ear	31.49	31.49	090	2	0	1	0	0
69666	A		Repair middle ear	20.19	20.19	090	2	0	0	0	0
69667	A		Repair middle ear	20.15	20.15	090	2	0	0	0	0
69670	A		Remove mastoid	20.88	20.88	090	2	0	2	0	0
69676	A		Remove middle ear	17.36	17.36	090	2	1	1	0	0
(71) Middle ear, other procedures:											
69700	A		Close mastoid fistula	15.53	15.53	090	2	0	1	0	0
69710	N		Implant/replace hearing	0.00	0.00	XXX	9	9	9	9	9
69711	A		Remove/repair hearing	17.87	17.87	090	2	0	2	0	0
69720	A		Release facial nerve	29.59	29.59	090	2	0	0	1	0
69725	A		Release facial nerve	38.02	38.02	090	2	0	2	0	0
69740	A		Repair facial nerve	26.85	26.85	090	2	0	2	0	0
69745	A		Repair facial nerve	31.40	31.40	090	2	0	2	0	0
69799	C		Middle ear surgery	0.00	0.00	YYY	2	0	0	1	1

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(72) Inner ear, incision and/or destruction:											
69801		A	Incise inner ear	17.88	17.88	090	2	0	0	0	0
69802		A	Incise inner ear	23.42	23.42	090	2	0	2	0	0
69805		A	Explore inner ear	26.34	26.34	090	2	0	2	0	0
69806		A	Explore inner ear	25.74	25.74	090	2	0	1	0	0
69820		A	Establish inner ear	18.49	18.49	090	2	0	2	0	0
69840		A	Revise inner ear	17.80	17.80	090	2	0	2	0	0

(73) Inner ear, excision:

69905		A	Remove inner ear	23.01	23.01	090	2	0	1	0	0
69910		A	Remove inner ear	28.14	28.14	090	2	0	0	0	0
69915		A	Incise inner ear	37.49	37.49	090	2	0	2	1	0

(74) Inner ear, introduction:

69930		A	Implant cochlea	34.96	34.96	090	2	0	0	0	0
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(75) Inner ear, other procedures:

69949		C	Inner ear surgery	0.00	0.00	YYY	2	0	0	1	1
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(76) Temporal bone, middle fossa approach:

69950		A	Incise inner ear	41.93	41.93	090	2	0	2	1	0
69955		A	Release facial nerve	45.38	45.38	090	2	0	2	1	0
69960		A	Release inner ear	42.85	42.85	090	2	0	2	1	0
69970		A	Remove inner ear	47.54	47.54	090	2	0	2	1	0

(77) Temporal bone, middle fossa approach, other procedures:

69979		C	Temporal bone surgery	0.00	0.00	YYY	2	0	0	1	1
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F. Procedure code numbers 70010 to 79999 relate to radiology procedures.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(1) Diagnostic radiology, head and neck:											
70010		A	Contrast x-ray	5.76	5.76	XXX	0	0	0	0	0
70010	26	A	Contrast x-ray	1.63	1.63	XXX	0	0	0	0	0
70010	TC	A	Contrast x-ray	4.13	4.13	XXX	0	0	0	0	0
70015		A	Contrast x-ray	2.92	2.92	XXX	0	0	0	0	0
70015	26	A	Contrast x-ray	1.63	1.63	XXX	0	0	0	0	0
70015	TC	A	Contrast x-ray	1.30	1.30	XXX	0	0	0	0	0
70030		A	X-ray eye, foreign body	0.64	0.64	XXX	0	3	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
70030	26	A	X-ray eye, foreign body	0.24	0.24	XXX	0	3	0	0	0
70030	TC	A	X-ray eye, foreign body	0.40	0.40	XXX	0	3	0	0	0
70100		A	X-ray exam of jaw	0.76	0.76	XXX	0	0	0	0	0
70100	26	A	X-ray exam of jaw	0.26	0.26	XXX	0	0	0	0	0
70100	TC	A	X-ray exam of jaw	0.50	0.50	XXX	0	0	0	0	0
70110		A	X-ray exam of jaw	0.95	0.95	XXX	0	0	0	0	0
70110	26	A	X-ray exam of jaw	0.35	0.35	XXX	0	0	0	0	0
70110	TC	A	X-ray exam of jaw	0.59	0.59	XXX	0	0	0	0	0
70120		A	X-ray exam of mastoids	0.85	0.85	XXX	0	3	0	0	0
70120	26	A	X-ray exam of mastoids	0.26	0.26	XXX	0	3	0	0	0
70120	TC	A	X-ray exam of mastoids	0.59	0.59	XXX	0	3	0	0	0
70130		A	X-ray exam of mastoids	1.23	1.23	XXX	0	3	0	0	0
70130	26	A	X-ray exam of mastoids	0.47	0.47	XXX	0	3	0	0	0
70130	TC	A	X-ray exam of mastoids	0.75	0.75	XXX	0	3	0	0	0
70134		A	X-ray exam of meati	1.18	1.18	XXX	0	0	0	0	0
70134	26	A	X-ray exam of meati	0.47	0.47	XXX	0	0	0	0	0
70134	TC	A	X-ray exam of meati	0.70	0.70	XXX	0	0	0	0	0
70140		A	X-ray exam, facial bones	0.86	0.86	XXX	0	0	0	0	0
70140	26	A	X-ray exam, facial bones	0.26	0.26	XXX	0	0	0	0	0
70140	TC	A	X-ray exam, facial bones	0.59	0.59	XXX	0	0	0	0	0
70150		A	X-ray exam, facial bones	1.12	1.12	XXX	0	0	0	0	0
70150	26	A	X-ray exam, facial bones	0.36	0.36	XXX	0	0	0	0	0
70150	TC	A	X-ray exam, facial bones	0.75	0.75	XXX	0	0	0	0	0
70160		A	X-ray exam, nasal bones	0.74	0.74	XXX	0	0	0	0	0
70160	26	A	X-ray exam, nasal bones	0.24	0.24	XXX	0	0	0	0	0
70160	TC	A	X-ray exam, nasal bones	0.50	0.50	XXX	0	0	0	0	0
70170		A	X-ray exam of tear duct	1.32	1.32	XXX	0	0	0	0	0
70170	26	A	X-ray exam of tear duct	0.42	0.42	XXX	0	0	0	0	0
70170	TC	A	X-ray exam of tear duct	0.90	0.90	XXX	0	0	0	0	0
70190		A	X-ray exam of eye	0.88	0.88	XXX	0	3	0	0	0
70190	26	A	X-ray exam of eye	0.29	0.29	XXX	0	3	0	0	0
70190	TC	A	X-ray exam of eye	0.59	0.59	XXX	0	3	0	0	0
70200		A	X-ray exam of eye	1.14	1.14	XXX	0	0	0	0	0
70200	26	A	X-ray exam of eye	0.39	0.39	XXX	0	0	0	0	0
70200	TC	A	X-ray exam of eye	0.75	0.75	XXX	0	0	0	0	0
70210		A	X-ray exam of sinuses	0.83	0.83	XXX	0	0	0	0	0
70210	26	A	X-ray exam of sinuses	0.24	0.24	XXX	0	0	0	0	0
70210	TC	A	X-ray exam of sinuses	0.59	0.59	XXX	0	0	0	0	0
70220		A	X-ray exam of sinuses	1.11	1.11	XXX	0	0	0	0	0
70220	26	A	X-ray exam of sinuses	0.35	0.35	XXX	0	0	0	0	0
70220	TC	A	X-ray exam of sinuses	0.75	0.75	XXX	0	0	0	0	0
70240		A	X-ray exam, pituitary	0.67	0.67	XXX	0	0	0	0	0
70240	26	A	X-ray exam, pituitary	0.26	0.26	XXX	0	0	0	0	0
70240	TC	A	X-ray exam, pituitary	0.40	0.40	XXX	0	0	0	0	0
70250		A	X-ray exam of skull	0.93	0.93	XXX	0	0	0	0	0
70250	26	A	X-ray exam of skull	0.34	0.34	XXX	0	0	0	0	0
70250	TC	A	X-ray exam of skull	0.59	0.59	XXX	0	0	0	0	0
70260		A	X-ray exam of skull	1.33	1.33	XXX	0	0	0	0	0
70260	26	A	X-ray exam of skull	0.47	0.47	XXX	0	0	0	0	0
70260	TC	A	X-ray exam of skull	0.85	0.85	XXX	0	0	0	0	0
70300		A	X-ray exam of teeth	0.40	0.40	XXX	0	0	0	0	0
70300	26	A	X-ray exam of teeth	0.14	0.14	XXX	0	0	0	0	0
70300	TC	A	X-ray exam of teeth	0.25	0.25	XXX	0	0	0	0	0
70310		A	X-ray exam of teeth	0.62	0.62	XXX	0	0	0	0	0
70310	26	A	X-ray exam of teeth	0.22	0.22	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
70310	TC	A	X-ray exam of teeth	0.40	0.40	XXX	0	0	0	0	0
70320		A	Full mouth x-ray	1.06	1.06	XXX	0	0	0	0	0
70320	26	A	Full mouth x-ray	0.31	0.31	XXX	0	0	0	0	0
70320	TC	A	Full mouth x-ray	0.75	0.75	XXX	0	0	0	0	0
70328		A	X-ray exam of jaw	0.73	0.73	XXX	0	0	0	0	0
70328	26	A	X-ray exam of jaw	0.26	0.26	XXX	0	0	0	0	0
70328	TC	A	X-ray exam of jaw	0.47	0.47	XXX	0	0	0	0	0
70330		A	X-ray exam of jaw	1.14	1.14	XXX	0	2	0	0	0
70330	26	A	X-ray exam of jaw	0.34	0.34	XXX	0	2	0	0	0
70330	TC	A	X-ray exam of jaw	0.80	0.80	XXX	0	2	0	0	0
70332		A	X-ray exam of jaw	2.76	2.76	XXX	0	3	0	0	0
70332	26	A	X-ray exam of jaw	0.75	0.75	XXX	0	3	0	0	0
70332	TC	A	X-ray exam of jaw	2.00	2.00	XXX	0	3	0	0	0
70336		A	Magnetic image	12.48	12.48	XXX	0	3	0	0	0
70336	26	A	Magnetic image	1.79	1.79	XXX	0	3	0	0	0
70336	TC	A	Magnetic image	10.69	10.69	XXX	0	3	0	0	0
70350		A	X-ray head for teeth	0.60	0.60	XXX	0	0	0	0	0
70350	26	A	X-ray head for teeth	0.24	0.24	XXX	0	0	0	0	0
70350	TC	A	X-ray head for teeth	0.36	0.36	XXX	0	0	0	0	0
70355		A	Panoramic x-ray	0.82	0.82	XXX	0	0	0	0	0
70355	26	A	Panoramic x-ray	0.27	0.27	XXX	0	0	0	0	0
70355	TC	A	Panoramic x-ray	0.54	0.54	XXX	0	0	0	0	0
70360		A	X-ray exam of neck	0.64	0.64	XXX	0	0	0	0	0
70360	26	A	X-ray exam of neck	0.24	0.24	XXX	0	0	0	0	0
70360	TC	A	X-ray exam of neck	0.40	0.40	XXX	0	0	0	0	0
70370		A	Throat x-ray	1.69	1.69	XXX	0	0	0	0	0
70370	26	A	Throat x-ray	0.45	0.45	XXX	0	0	0	0	0
70370	TC	A	Throat x-ray	1.24	1.24	XXX	0	0	0	0	0
70371		A	Speech evaluation	3.17	3.17	XXX	0	0	0	0	0
70371	26	A	Speech evaluation	1.16	1.16	XXX	0	0	0	0	0
70371	TC	A	Speech evaluation	2.00	2.00	XXX	0	0	0	0	0
70373		A	Contrast x-ray	2.31	2.31	XXX	0	0	0	0	0
70373	26	A	Contrast x-ray	0.61	0.61	XXX	0	0	0	0	0
70373	TC	A	Contrast x-ray	1.70	1.70	XXX	0	0	0	0	0
70380		A	X-ray exam of salivary	0.88	0.88	XXX	0	0	0	0	0
70380	26	A	X-ray exam of salivary	0.24	0.24	XXX	0	0	0	0	0
70380	TC	A	X-ray exam of salivary	0.64	0.64	XXX	0	0	0	0	0
70390		A	X-ray exam of salivary	2.23	2.23	XXX	0	0	0	0	0
70390	26	A	X-ray exam of salivary	0.53	0.53	XXX	0	0	0	0	0
70390	TC	A	X-ray exam of salivary	1.70	1.70	XXX	0	0	0	0	0
70450		A	CAT scan of head	5.68	5.68	XXX	0	0	0	0	0
70450	26	A	CAT scan of head	1.17	1.17	XXX	0	0	0	0	0
70450	TC	A	CAT scan of head	4.51	4.51	XXX	0	0	0	0	0
70460		A	Contrast CAT scan	6.95	6.95	XXX	0	0	0	0	0
70460	26	A	Contrast CAT scan	1.55	1.55	XXX	0	0	0	0	0
70460	TC	A	Contrast CAT scan	5.40	5.40	XXX	0	0	0	0	0
70470		A	Contrast CAT scan	8.49	8.49	XXX	0	0	0	0	0
70470	26	A	Contrast CAT scan	1.74	1.74	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
70470	TC	A	Contrast CAT scan	6.75	6.75	XXX	0	0	0	0	0
70480		A	CAT scan of skull	6.27	6.27	XXX	0	0	0	0	0
70480	26	A	CAT scan of skull	1.76	1.76	XXX	0	0	0	0	0
70480	TC	A	CAT scan of skull	4.51	4.51	XXX	0	0	0	0	0
70481		A	Contrast CAT scan	7.29	7.29	XXX	0	0	0	0	0
70481	26	A	Contrast CAT scan	1.89	1.89	XXX	0	0	0	0	0
70481	TC	A	Contrast CAT scan	5.40	5.40	XXX	0	0	0	0	0
70482		A	Contrast CAT scan	8.74	8.74	XXX	0	0	0	0	0
70482	26	A	Contrast CAT scan	1.99	1.99	XXX	0	0	0	0	0
70482	TC	A	Contrast CAT scan	6.75	6.75	XXX	0	0	0	0	0
70486		A	CAT scan of face	6.07	6.07	XXX	0	0	0	0	0
70486	26	A	CAT scan of face	1.56	1.56	XXX	0	0	0	0	0
70486	TC	A	CAT scan of face	4.51	4.51	XXX	0	0	0	0	0
70487		A	Contrast CAT scan	7.18	7.18	XXX	0	0	0	0	0
70487	26	A	Contrast CAT scan	1.78	1.78	XXX	0	0	0	0	0
70487	TC	A	Contrast CAT scan	5.40	5.40	XXX	0	0	0	0	0
70488		A	Contrast CAT scan	8.70	8.70	XXX	0	0	0	0	0
70488	26	A	Contrast CAT scan	1.95	1.95	XXX	0	0	0	0	0
70488	TC	A	Contrast CAT scan	6.75	6.75	XXX	0	0	0	0	0
70490		A	CAT scan of neck	6.27	6.27	XXX	0	0	0	0	0
70490	26	A	CAT scan of neck	1.76	1.76	XXX	0	0	0	0	0
70490	TC	A	CAT scan of neck	4.51	4.51	XXX	0	0	0	0	0
70491		A	Contrast CAT scan	7.29	7.29	XXX	0	0	0	0	0
70491	26	A	Contrast CAT scan	1.89	1.89	XXX	0	0	0	0	0
70491	TC	A	Contrast CAT scan	5.40	5.40	XXX	0	0	0	0	0
70492		A	Contrast CAT scan	8.74	8.74	XXX	0	0	0	0	0
70492	26	A	Contrast CAT scan	1.99	1.99	XXX	0	0	0	0	0
70492	TC	A	Contrast CAT scan	6.75	6.75	XXX	0	0	0	0	0
70540		A	Magnetic image	12.72	12.72	XXX	0	0	0	0	0
70540	26	A	Magnetic image	2.04	2.04	XXX	0	0	0	0	0
70540	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
70541		R	Magnetic image	13.02	13.02	XXX	0	0	0	0	0
70541	26	R	Magnetic image	2.34	2.34	XXX	0	0	0	0	0
70541	TC	R	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
70551		A	Magnetic image	12.72	12.72	XXX	0	0	0	0	0
70551	26	A	Magnetic image	2.04	2.04	XXX	0	0	0	0	0
70551	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
70552		A	Magnetic image	15.28	15.28	XXX	0	0	0	0	0
70552	26	A	Magnetic image	2.45	2.45	XXX	0	0	0	0	0
70552	TC	A	Magnetic image	12.82	12.82	XXX	0	0	0	0	0
70553		A	Magnetic image	27.00	27.00	XXX	0	0	0	0	0
70553	26	A	Magnetic image	3.26	3.26	XXX	0	0	0	0	0
70553	TC	A	Magnetic image	23.73	23.73	XXX	0	0	0	0	0

(2) Diagnostic radiology, chest:

71010		A	Chest x-ray	0.70	0.70	XXX	0	0	0	0	0
71010	26	A	Chest x-ray	0.25	0.25	XXX	0	0	0	0	0
71010	TC	A	Chest x-ray	0.45	0.45	XXX	0	0	0	0	0
71015		A	X-ray exam of chest	0.79	0.79	XXX	0	0	0	0	0
71015	26	A	X-ray exam of chest	0.29	0.29	XXX	0	0	0	0	0
71015	TC	A	X-ray exam of chest	0.50	0.50	XXX	0	0	0	0	0
71020		A	Chest x-ray	0.89	0.89	XXX	0	0	0	0	0
71020	26	A	Chest x-ray	0.30	0.30	XXX	0	0	0	0	0
71020	TC	A	Chest x-ray	0.59	0.59	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
71021		A	Chest x-ray	1.08	1.08	XXX	0	0	0	0	0
71021	26	A	Chest x-ray	0.37	0.37	XXX	0	0	0	0	0
71021	TC	A	Chest x-ray	0.70	0.70	XXX	0	0	0	0	0
71022		A	Chest x-ray	1.13	1.13	XXX	0	0	0	0	0
71022	26	A	Chest x-ray	0.43	0.43	XXX	0	0	0	0	0
71022	TC	A	Chest x-ray	0.70	0.70	XXX	0	0	0	0	0
71023		A	Chest x-ray	1.28	1.28	XXX	0	0	0	0	0
71023	26	A	Chest x-ray	0.53	0.53	XXX	0	0	0	0	0
71023	TC	A	Chest x-ray	0.75	0.75	XXX	0	0	0	0	0
71030		A	Chest x-ray	1.18	1.18	XXX	0	0	0	0	0
71030	26	A	Chest x-ray	0.43	0.43	XXX	0	0	0	0	0
71030	TC	A	Chest x-ray	0.75	0.75	XXX	0	0	0	0	0
71034		A	Chest x-ray	2.01	2.01	XXX	0	0	0	0	0
71034	26	A	Chest x-ray	0.64	0.64	XXX	0	0	0	0	0
71034	TC	A	Chest x-ray	1.37	1.37	XXX	0	0	0	0	0
71035		A	Chest x-ray	0.75	0.75	XXX	0	0	0	0	0
71035	26	A	Chest x-ray	0.25	0.25	XXX	0	0	0	0	0
71035	TC	A	Chest x-ray	0.50	0.50	XXX	0	0	0	0	0
71036		A	X-ray guidance	2.26	2.26	XXX	0	0	0	0	0
71036	26	A	X-ray guidance	0.75	0.75	XXX	0	0	0	0	0
71036	TC	A	X-ray guidance	1.50	1.50	XXX	0	0	0	0	0
71038		A	X-ray guidance	2.36	2.36	XXX	0	0	0	0	0
71038	26	A	X-ray guidance	0.75	0.75	XXX	0	0	0	0	0
71038	TC	A	X-ray guidance	1.61	1.61	XXX	0	0	0	0	0
71040		A	Contrast x-ray	2.20	2.20	XXX	0	0	0	0	0
71040	26	A	Contrast x-ray	0.81	0.81	XXX	0	0	0	0	0
71040	TC	A	Contrast x-ray	1.39	1.39	XXX	0	0	0	0	0
71060		A	Contrast x-ray	3.13	3.13	XXX	0	2	0	0	0
71060	26	A	Contrast x-ray	1.03	1.03	XXX	0	2	0	0	0
71060	TC	A	Contrast x-ray	2.11	2.11	XXX	0	2	0	0	0
71090		A	X-ray and pacemaker	2.36	2.36	XXX	0	0	0	0	0
71090	26	A	X-ray and pacemaker	0.75	0.75	XXX	0	0	0	0	0
71090	TC	A	X-ray and pacemaker	1.61	1.61	XXX	0	0	0	0	0
71100		A	X-ray exam of ribs	0.85	0.85	XXX	0	0	0	0	0
71100	26	A	X-ray exam of ribs	0.31	0.31	XXX	0	0	0	0	0
71100	TC	A	X-ray exam of ribs	0.54	0.54	XXX	0	0	0	0	0
71101		A	X-ray exam of ribs	1.02	1.02	XXX	0	0	0	0	0
71101	26	A	X-ray exam of ribs	0.38	0.38	XXX	0	0	0	0	0
71101	TC	A	X-ray exam of ribs	0.64	0.64	XXX	0	0	0	0	0
71110		A	X-ray exam of ribs	1.13	1.13	XXX	0	2	0	0	0
71110	26	A	X-ray exam of ribs	0.38	0.38	XXX	0	2	0	0	0
71110	TC	A	X-ray exam of ribs	0.75	0.75	XXX	0	2	0	0	0
71111		A	X-ray exam of ribs	1.30	1.30	XXX	0	2	0	0	0
71111	26	A	X-ray exam of ribs	0.45	0.45	XXX	0	2	0	0	0
71111	TC	A	X-ray exam of ribs	0.85	0.85	XXX	0	2	0	0	0
71120		A	X-ray exam of sternum	0.89	0.89	XXX	0	0	0	0	0
71120	26	A	X-ray exam of sternum	0.27	0.27	XXX	0	0	0	0	0
71120	TC	A	X-ray exam of sternum	0.62	0.62	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
71130		A	X-ray exam of sternum	0.97	0.97	XXX	0	0	0	0	0
71130	26	A	X-ray exam of sternum	0.30	0.30	XXX	0	0	0	0	0
71130	TC	A	X-ray exam of sternum	0.67	0.67	XXX	0	0	0	0	0
71250		A	CAT scan of chest	7.23	7.23	XXX	0	0	0	0	0
71250	26	A	CAT scan of chest	1.59	1.59	XXX	0	0	0	0	0
71250	TC	A	CAT scan of chest	5.64	5.64	XXX	0	0	0	0	0
71260		A	Contrast CAT scan	8.45	8.45	XXX	0	0	0	0	0
71260	26	A	Contrast CAT scan	1.70	1.70	XXX	0	0	0	0	0
71260	TC	A	Contrast CAT scan	6.75	6.75	XXX	0	0	0	0	0
71270		A	Contrast CAT scan	10.32	10.32	XXX	0	0	0	0	0
71270	26	A	Contrast CAT scan	1.89	1.89	XXX	0	0	0	0	0
71270	TC	A	Contrast CAT scan	8.43	8.43	XXX	0	0	0	0	0
71550		A	Magnetic image	12.89	12.89	XXX	0	0	0	0	0
71550	26	A	Magnetic image	2.21	2.21	XXX	0	0	0	0	0
71550	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
71555		R	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
71555	26	R	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
71555	TC	R	Magnetic image	0.00	0.00	XXX	9	9	9	9	9

(3) Diagnostic radiology, spine and pelvis:

72010		A	X-ray exam of spine	1.60	1.60	XXX	0	0	0	0	0
72010	26	A	X-ray exam of spine	0.62	0.62	XXX	0	0	0	0	0
72010	TC	A	X-ray exam of spine	0.98	0.98	XXX	0	0	0	0	0
72020		A	X-ray exam of spine	0.61	0.61	XXX	0	0	0	0	0
72020	26	A	X-ray exam of spine	0.21	0.21	XXX	0	0	0	0	0
72020	TC	A	X-ray exam of spine	0.40	0.40	XXX	0	0	0	0	0
72040		A	X-ray exam of neck	0.87	0.87	XXX	0	0	0	0	0
72040	26	A	X-ray exam of neck	0.30	0.30	XXX	0	0	0	0	0
72040	TC	A	X-ray exam of neck	0.57	0.57	XXX	0	0	0	0	0
72050		A	X-ray exam of neck	1.28	1.28	XXX	0	0	0	0	0
72050	26	A	X-ray exam of neck	0.43	0.43	XXX	0	0	0	0	0
72050	TC	A	X-ray exam of neck	0.85	0.85	XXX	0	0	0	0	0
72052		A	X-ray exam of neck	1.58	1.58	XXX	0	0	0	0	0
72052	26	A	X-ray exam of neck	0.50	0.50	XXX	0	0	0	0	0
72052	TC	A	X-ray exam of neck	1.08	1.08	XXX	0	0	0	0	0
72069		A	X-ray exam, thoracolumbar	0.77	0.77	XXX	0	0	0	0	0
72069	26	A	X-ray exam, thoracolumbar	0.30	0.30	XXX	0	0	0	0	0
72069	TC	A	X-ray exam, thoracolumbar	0.47	0.47	XXX	0	0	0	0	0
72070		A	X-ray exam of thoracic	0.92	0.92	XXX	0	0	0	0	0
72070	26	A	X-ray exam of thoracic	0.30	0.30	XXX	0	0	0	0	0
72070	TC	A	X-ray exam of thoracic	0.62	0.62	XXX	0	0	0	0	0
72072		A	X-ray exam of thoracic	1.01	1.01	XXX	0	0	0	0	0
72072	26	A	X-ray exam of thoracic	0.30	0.30	XXX	0	0	0	0	0
72072	TC	A	X-ray exam of thoracic	0.70	0.70	XXX	0	0	0	0	0
72074		A	X-ray exam of thoracic	1.18	1.18	XXX	0	0	0	0	0
72074	26	A	X-ray exam of thoracic	0.30	0.30	XXX	0	0	0	0	0
72074	TC	A	X-ray exam of thoracic	0.87	0.87	XXX	0	0	0	0	0
72080		A	X-ray exam, thoracolumbar	0.94	0.94	XXX	0	0	0	0	0
72080	26	A	X-ray exam, thoracolumbar	0.30	0.30	XXX	0	0	0	0	0
72080	TC	A	X-ray exam, thoracolumbar	0.64	0.64	XXX	0	0	0	0	0
72090		A	X-ray exam, scoliosis	1.03	1.03	XXX	0	0	0	0	0
72090	26	A	X-ray exam, scoliosis	0.39	0.39	XXX	0	0	0	0	0
72090	TC	A	X-ray exam, scoliosis	0.64	0.64	XXX	0	0	0	0	0
72100		A	X-ray exam of lumbar	0.94	0.94	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
72100	26	A	X-ray exam of lumbar	0.30	0.30	XXX	0	0	0	0	0
72100	TC	A	X-ray exam of lumbar	0.64	0.64	XXX	0	0	0	0	0
72110		A	X-ray exam of lumbar	1.30	1.30	XXX	0	0	0	0	0
72110	26	A	X-ray exam of lumbar	0.43	0.43	XXX	0	0	0	0	0
72110	TC	A	X-ray exam of lumbar	0.87	0.87	XXX	0	0	0	0	0
72114		A	X-ray exam of lumbar	1.63	1.63	XXX	0	0	0	0	0
72114	26	A	X-ray exam of lumbar	0.50	0.50	XXX	0	0	0	0	0
72114	TC	A	X-ray exam of lumbar	1.13	1.13	XXX	0	0	0	0	0
72120		A	X-ray exam of lumbar	1.16	1.16	XXX	0	0	0	0	0
72120	26	A	X-ray exam of lumbar	0.30	0.30	XXX	0	0	0	0	0
72120	TC	A	X-ray exam of lumbar	0.85	0.85	XXX	0	0	0	0	0
72125		A	CAT scan of neck	7.23	7.23	XXX	0	0	0	0	0
72125	26	A	CAT scan of neck	1.59	1.59	XXX	0	0	0	0	0
72125	TC	A	CAT scan of neck	5.64	5.64	XXX	0	0	0	0	0
72126		A	Contrast CAT scan	8.41	8.41	XXX	0	0	0	0	0
72126	26	A	Contrast CAT scan	1.66	1.66	XXX	0	0	0	0	0
72126	TC	A	Contrast CAT scan	6.75	6.75	XXX	0	0	0	0	0
72127		A	Contrast CAT scan	10.17	10.17	XXX	0	0	0	0	0
72127	26	A	Contrast CAT scan	1.74	1.74	XXX	0	0	0	0	0
72127	TC	A	Contrast CAT scan	8.43	8.43	XXX	0	0	0	0	0
72128		A	CAT scan of thoracic	7.23	7.23	XXX	0	0	0	0	0
72128	26	A	CAT scan of thoracic	1.59	1.59	XXX	0	0	0	0	0
72128	TC	A	CAT scan of thoracic	5.64	5.64	XXX	0	0	0	0	0
72129		A	Contrast CAT scan	8.41	8.41	XXX	0	0	0	0	0
72129	26	A	Contrast CAT scan	1.66	1.66	XXX	0	0	0	0	0
72129	TC	A	Contrast CAT scan	6.75	6.75	XXX	0	0	0	0	0
72130		A	Contrast CAT scan	10.17	10.17	XXX	0	0	0	0	0
72130	26	A	Contrast CAT scan	1.74	1.74	XXX	0	0	0	0	0
72130	TC	A	Contrast CAT scan	8.43	8.43	XXX	0	0	0	0	0
72131		A	CAT scan of low back	7.23	7.23	XXX	0	0	0	0	0
72131	26	A	CAT scan of low back	1.59	1.59	XXX	0	0	0	0	0
72131	TC	A	CAT scan of low back	5.64	5.64	XXX	0	0	0	0	0
72132		A	Contrast CAT scan	8.41	8.41	XXX	0	0	0	0	0
72132	26	A	Contrast CAT scan	1.66	1.66	XXX	0	0	0	0	0
72132	TC	A	Contrast CAT scan	6.75	6.75	XXX	0	0	0	0	0
72133		A	Contrast CAT scan	10.17	10.17	XXX	0	0	0	0	0
72133	26	A	Contrast CAT scan	1.74	1.74	XXX	0	0	0	0	0
72133	TC	A	Contrast CAT scan	8.43	8.43	XXX	0	0	0	0	0
72141		A	Magnetic image	12.89	12.89	XXX	0	0	0	0	0
72141	26	A	Magnetic image	2.21	2.21	XXX	0	0	0	0	0
72141	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
72142		A	Magnetic image	15.47	15.47	XXX	0	0	0	0	0
72142	26	A	Magnetic image	2.65	2.65	XXX	0	0	0	0	0
72142	TC	A	Magnetic image	12.82	12.82	XXX	0	0	0	0	0
72146		A	Magnetic image	14.07	14.07	XXX	0	0	0	0	0
72146	26	A	Magnetic image	2.21	2.21	XXX	0	0	0	0	0
72146	TC	A	Magnetic image	11.86	11.86	XXX	0	0	0	0	0
72147		A	Magnetic image	15.47	15.47	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
72147	26	A	Magnetic image	2.65	2.65	XXX	0	0	0	0	0
72147	TC	A	Magnetic image	12.82	12.82	XXX	0	0	0	0	0
72148		A	Magnetic image	13.90	13.90	XXX	0	0	0	0	0
72148	26	A	Magnetic image	2.04	2.04	XXX	0	0	0	0	0
72148	TC	A	Magnetic image	11.86	11.86	XXX	0	0	0	0	0
72149		A	Magnetic image	15.28	15.28	XXX	0	0	0	0	0
72149	26	A	Magnetic image	2.45	2.45	XXX	0	0	0	0	0
72149	TC	A	Magnetic image	12.82	12.82	XXX	0	0	0	0	0
72156		A	Magnetic image	27.27	27.27	XXX	0	0	0	0	0
72156	26	A	Magnetic image	3.54	3.54	XXX	0	0	0	0	0
72156	TC	A	Magnetic image	23.73	23.73	XXX	0	0	0	0	0
72157		A	Magnetic image	27.27	27.27	XXX	0	0	0	0	0
72157	26	A	Magnetic image	3.54	3.54	XXX	0	0	0	0	0
72157	TC	A	Magnetic image	23.73	23.73	XXX	0	0	0	0	0
72158		A	Magnetic image	27.00	27.00	XXX	0	0	0	0	0
72158	26	A	Magnetic image	3.26	3.26	XXX	0	0	0	0	0
72158	TC	A	Magnetic image	23.73	23.73	XXX	0	0	0	0	0
72159		N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
72159	26	N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
72159	TC	N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
72170		A	X-ray exam of pelvis	0.73	0.73	XXX	0	0	0	0	0
72170	26	A	X-ray exam of pelvis	0.23	0.23	XXX	0	0	0	0	0
72170	TC	A	X-ray exam of pelvis	0.50	0.50	XXX	0	0	0	0	0
72190		A	X-ray exam of pelvis	0.93	0.93	XXX	0	0	0	0	0
72190	26	A	X-ray exam of pelvis	0.29	0.29	XXX	0	0	0	0	0
72190	TC	A	X-ray exam of pelvis	0.64	0.64	XXX	0	0	0	0	0
72192		A	CAT scan of pelvis	7.13	7.13	XXX	0	0	0	0	0
72192	26	A	CAT scan of pelvis	1.49	1.49	XXX	0	0	0	0	0
72192	TC	A	CAT scan of pelvis	5.64	5.64	XXX	0	0	0	0	0
72193		A	Contrast CAT scan	8.11	8.11	XXX	0	0	0	0	0
72193	26	A	Contrast CAT scan	1.59	1.59	XXX	0	0	0	0	0
72193	TC	A	Contrast CAT scan	6.52	6.52	XXX	0	0	0	0	0
72194		A	Contrast CAT scan	9.75	9.75	XXX	0	0	0	0	0
72194	26	A	Contrast CAT scan	1.66	1.66	XXX	0	0	0	0	0
72194	TC	A	Contrast CAT scan	8.09	8.09	XXX	0	0	0	0	0
72196		A	Magnetic image	12.89	12.89	XXX	0	0	0	0	0
72196	26	A	Magnetic image	2.21	2.21	XXX	0	0	0	0	0
72196	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
72198		N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
72198	26	N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
72198	TC	N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
72200		A	X-ray exam of sacroiliac	0.74	0.74	XXX	0	0	0	0	0
72200	26	A	X-ray exam of sacroiliac	0.24	0.24	XXX	0	0	0	0	0
72200	TC	A	X-ray exam of sacroiliac	0.50	0.50	XXX	0	0	0	0	0
72202		A	X-ray exam of sacroiliac	0.86	0.86	XXX	0	0	0	0	0
72202	26	A	X-ray exam of sacroiliac	0.26	0.26	XXX	0	0	0	0	0
72202	TC	A	X-ray exam of sacroiliac	0.59	0.59	XXX	0	0	0	0	0
72220		A	-ray exam of tailbone	0.78	0.78	XXX	0	0	0	0	0
72220	26	A	X-ray exam of tailbone	0.24	0.24	XXX	0	0	0	0	0
72220	TC	A	X-ray exam of tailbone	0.54	0.54	XXX	0	0	0	0	0
72240		A	Contrast x-ray	5.78	5.78	XXX	0	0	0	0	0
72240	26	A	Contrast x-ray	1.26	1.26	XXX	0	0	0	0	0
72240	TC	A	Contrast x-ray	4.53	4.53	XXX	0	0	0	0	0
72255		A	Contrast x-ray	5.39	5.39	XXX	0	0	0	0	0
72255	26	A	Contrast x-ray	1.26	1.26	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
72255	TC	A	Contrast x-ray	4.13	4.13	XXX	0	0	0	0	0
72265		A	Contrast x-ray	5.04	5.04	XXX	0	0	0	0	0
72265	26	A	Contrast x-ray	1.15	1.15	XXX	0	0	0	0	0
72265	TC	A	Contrast x-ray	3.89	3.89	XXX	0	0	0	0	0
72270		A	Contrast x-ray	7.64	7.64	XXX	0	0	0	0	0
72270	26	A	Contrast x-ray	1.83	1.83	XXX	0	0	0	0	0
72270	TC	A	Contrast x-ray	5.82	5.82	XXX	0	0	0	0	0
72285		A	X-ray of neck	9.15	9.15	XXX	0	0	0	0	0
72285	26	A	X-ray of neck	1.15	1.15	XXX	0	0	0	0	0
72285	TC	A	X-ray of neck	7.99	7.99	XXX	0	0	0	0	0
72295		A	X-ray of lower back	8.64	8.64	XXX	0	0	0	0	0
72295	26	A	X-ray of lower back	1.15	1.15	XXX	0	0	0	0	0
72295	TC	A	X-ray of lower back	7.49	7.49	XXX	0	0	0	0	0

(4) Diagnostic radiology, upper extremities:

73000		A	X-ray exam of clavicle	0.72	0.72	XXX	0	3	0	0	0
73000	26	A	X-ray exam of clavicle	0.22	0.22	XXX	0	3	0	0	0
73000	TC	A	X-ray exam of clavicle	0.50	0.50	XXX	0	3	0	0	0
73010		A	X-ray exam of scapula	0.74	0.74	XXX	0	3	0	0	0
73010	26	A	X-ray exam of scapula	0.24	0.24	XXX	0	3	0	0	0
73010	TC	A	X-ray exam of scapula	0.50	0.50	XXX	0	3	0	0	0
73020		A	X-ray exam of shoulder	0.66	0.66	XXX	0	3	0	0	0
73020	26	A	X-ray exam of shoulder	0.21	0.21	XXX	0	3	0	0	0
73020	TC	A	X-ray exam of shoulder	0.45	0.45	XXX	0	3	0	0	0
73030		A	X-ray exam of shoulder	0.79	0.79	XXX	0	3	0	0	0
73030	26	A	X-ray exam of shoulder	0.25	0.25	XXX	0	3	0	0	0
73030	TC	A	X-ray exam of shoulder	0.54	0.54	XXX	0	3	0	0	0
73040		A	Contrast x-ray	2.76	2.76	XXX	0	3	0	0	0
73040	26	A	Contrast x-ray	0.75	0.75	XXX	0	3	0	0	0
73040	TC	A	Contrast x-ray	2.00	2.00	XXX	0	3	0	0	0
73050		A	X-ray exam of shoulder	0.91	0.91	XXX	0	2	0	0	0
73050	26	A	X-ray exam of shoulder	0.27	0.27	XXX	0	2	0	0	0
73050	TC	A	X-ray exam of shoulder	0.64	0.64	XXX	0	2	0	0	0
73060		A	X-ray exam of humerus	0.78	0.78	XXX	0	3	0	0	0
73060	26	A	X-ray exam of humerus	0.24	0.24	XXX	0	3	0	0	0
73060	TC	A	X-ray exam of humerus	0.54	0.54	XXX	0	3	0	0	0
73070		A	X-ray exam of elbow	0.71	0.71	XXX	0	3	0	0	0
73070	26	A	X-ray exam of elbow	0.21	0.21	XXX	0	3	0	0	0
73070	TC	A	X-ray exam of elbow	0.50	0.50	XXX	0	3	0	0	0
73080		A	X-ray exam of elbow	0.78	0.78	XXX	0	3	0	0	0
73080	26	A	X-ray exam of elbow	0.24	0.24	XXX	0	3	0	0	0
73080	TC	A	X-ray exam of elbow	0.54	0.54	XXX	0	3	0	0	0
73085		A	Contrast x-ray	2.76	2.76	XXX	0	3	0	0	0
73085	26	A	Contrast x-ray	0.75	0.75	XXX	0	3	0	0	0
73085	TC	A	Contrast x-ray	2.00	2.00	XXX	0	3	0	0	0
73090		A	X-ray exam of forearm	0.72	0.72	XXX	0	3	0	0	0
73090	26	A	X-ray exam of forearm	0.22	0.22	XXX	0	3	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
73090	TC	A	X-ray exam of forearm	0.50	0.50	XXX	0	3	0	0	0
73092		A	X-ray exam of infant	0.69	0.69	XXX	0	3	0	0	0
73092	26	A	X-ray exam of infant	0.22	0.22	XXX	0	3	0	0	0
73092	TC	A	X-ray exam of infant	0.47	0.47	XXX	0	3	0	0	0
73100		A	X-ray exam of wrist	0.69	0.69	XXX	0	3	0	0	0
73100	26	A	X-ray exam of wrist	0.22	0.22	XXX	0	3	0	0	0
73100	TC	A	X-ray exam of wrist	0.47	0.47	XXX	0	3	0	0	0
73110		A	X-ray exam of wrist	0.75	0.75	XXX	0	3	0	0	0
73110	26	A	X-ray exam of wrist	0.24	0.24	XXX	0	3	0	0	0
73110	TC	A	X-ray exam of wrist	0.51	0.51	XXX	0	3	0	0	0
73115		A	Contrast x-ray	2.26	2.26	XXX	0	3	0	0	0
73115	26	A	Contrast x-ray	0.75	0.75	XXX	0	3	0	0	0
73115	TC	A	Contrast x-ray	1.50	1.50	XXX	0	3	0	0	0
73120		A	X-ray exam of hand	0.69	0.69	XXX	0	3	0	0	0
73120	26	A	X-ray exam of hand	0.22	0.22	XXX	0	3	0	0	0
73120	TC	A	X-ray exam of hand	0.47	0.47	XXX	0	3	0	0	0
73130		A	X-ray exam of hand	0.75	0.75	XXX	0	3	0	0	0
73130	26	A	X-ray exam of hand	0.24	0.24	XXX	0	3	0	0	0
73130	TC	A	X-ray exam of hand	0.51	0.51	XXX	0	3	0	0	0
73140		A	X-ray exam of fingers	0.58	0.58	XXX	0	3	0	0	0
73140	26	A	X-ray exam of fingers	0.18	0.18	XXX	0	3	0	0	0
73140	TC	A	X-ray exam of fingers	0.40	0.40	XXX	0	3	0	0	0
73200		A	CAT scan of arm	6.23	6.23	XXX	0	3	0	0	0
73200	26	A	CAT scan of arm	1.49	1.49	XXX	0	3	0	0	0
73200	TC	A	CAT scan of arm	4.73	4.73	XXX	0	3	0	0	0
73201		A	Contrast CAT scan	7.23	7.23	XXX	0	3	0	0	0
73201	26	A	Contrast CAT scan	1.59	1.59	XXX	0	3	0	0	0
73201	TC	A	Contrast CAT scan	5.64	5.64	XXX	0	3	0	0	0
73202		A	Contrast CAT scan	8.75	8.75	XXX	0	3	0	0	0
73202	26	A	Contrast CAT scan	1.66	1.66	XXX	0	3	0	0	0
73202	TC	A	Contrast CAT scan	7.09	7.09	XXX	0	3	0	0	0
73220		A	Magnetic image	12.72	12.72	XXX	0	3	0	0	0
73220	26	A	Magnetic image	2.04	2.04	XXX	0	3	0	0	0
73220	TC	A	Magnetic image	10.69	10.69	XXX	0	3	0	0	0
73221		A	Magnetic image	12.48	12.48	XXX	0	3	0	0	0
73221	26	A	Magnetic image	1.79	1.79	XXX	0	3	0	0	0
73221	TC	A	Magnetic image	10.69	10.69	XXX	0	3	0	0	0
73225		N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
73225	26	N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
73225	TC	N	Magnetic image	0.00	0.00	XXX	9	9	9	9	9

(5) Diagnostic radiology, lower extremities:

73500		A	X-ray exam of hip	0.69	0.69	XXX	0	0	0	0	0
73500	26	A	X-ray exam of hip	0.24	0.24	XXX	0	0	0	0	0
73500	TC	A	X-ray exam of hip	0.45	0.45	XXX	0	0	0	0	0
73510		A	X-ray exam of hip	0.84	0.84	XXX	0	0	0	0	0
73510	26	A	X-ray exam of hip	0.29	0.29	XXX	0	0	0	0	0
73510	TC	A	X-ray exam of hip	0.54	0.54	XXX	0	0	0	0	0
73520		A	X-ray exam of hip	1.00	1.00	XXX	0	2	0	0	0
73520	26	A	X-ray exam of hip	0.36	0.36	XXX	0	2	0	0	0
73520	TC	A	X-ray exam of hip	0.64	0.64	XXX	0	2	0	0	0
73525		A	Contrast x-ray	2.76	2.76	XXX	0	3	0	0	0
73525	26	A	Contrast x-ray	0.75	0.75	XXX	0	3	0	0	0
73525	TC	A	Contrast x-ray	2.00	2.00	XXX	0	3	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
73530		A	X-ray exam of hip	0.90	0.90	XXX	0	3	0	0	0
73530	26	A	X-ray exam of hip	0.40	0.40	XXX	0	3	0	0	0
73530	TC	A	X-ray exam of hip	0.50	0.50	XXX	0	3	0	0	0
73540		A	X-ray exam of pelvis	0.83	0.83	XXX	0	0	0	0	0
73540	26	A	X-ray exam of pelvis	0.28	0.28	XXX	0	0	0	0	0
73540	TC	A	X-ray exam of pelvis	0.54	0.54	XXX	0	0	0	0	0
73550		A	X-ray exam of thigh	0.78	0.78	XXX	0	3	0	0	0
73550	26	A	X-ray exam of thigh	0.24	0.24	XXX	0	3	0	0	0
73550	TC	A	X-ray exam of thigh	0.54	0.54	XXX	0	3	0	0	0
73560		A	X-ray exam of knee	0.73	0.73	XXX	0	3	0	0	0
73560	26	A	X-ray exam of knee	0.23	0.23	XXX	0	3	0	0	0
73560	TC	A	X-ray exam of knee	0.50	0.50	XXX	0	3	0	0	0
73562		A	X-ray exam of knee	0.80	0.80	XXX	0	3	0	0	0
73562	26	A	X-ray exam of knee	0.26	0.26	XXX	0	3	0	0	0
73562	TC	A	X-ray exam of knee	0.54	0.54	XXX	0	3	0	0	0
73564		A	X-ray exam of knee	0.90	0.90	XXX	0	3	0	0	0
73564	26	A	X-ray exam of knee	0.31	0.31	XXX	0	3	0	0	0
73564	TC	A	X-ray exam of knee	0.59	0.59	XXX	0	3	0	0	0
73565		A	X-ray exam of knee	0.70	0.70	XXX	0	2	0	0	0
73565	26	A	X-ray exam of knee	0.23	0.23	XXX	0	2	0	0	0
73565	TC	A	X-ray exam of knee	0.47	0.47	XXX	0	2	0	0	0
73580		A	Contrast x-ray	3.26	3.26	XXX	0	3	0	0	0
73580	26	A	Contrast x-ray	0.75	0.75	XXX	0	3	0	0	0
73580	TC	A	Contrast x-ray	2.51	2.51	XXX	0	3	0	0	0
73590		A	X-ray exam of calf	0.73	0.73	XXX	0	3	0	0	0
73590	26	A	X-ray exam of calf	0.23	0.23	XXX	0	3	0	0	0
73590	TC	A	X-ray exam of calf	0.50	0.50	XXX	0	3	0	0	0
73592		A	X-ray exam of calf	0.69	0.69	XXX	0	3	0	0	0
73592	26	A	X-ray exam of calf	0.22	0.22	XXX	0	3	0	0	0
73592	TC	A	X-ray exam of calf	0.47	0.47	XXX	0	3	0	0	0
73600		A	X-ray exam of ankle	0.69	0.69	XXX	0	3	0	0	0
73600	26	A	X-ray exam of ankle	0.22	0.22	XXX	0	3	0	0	0
73600	TC	A	X-ray exam of ankle	0.47	0.47	XXX	0	3	0	0	0
73610		A	X-ray exam of ankle	0.75	0.75	XXX	0	3	0	0	0
73610	26	A	X-ray exam of ankle	0.24	0.24	XXX	0	3	0	0	0
73610	TC	A	X-ray exam of ankle	0.51	0.51	XXX	0	3	0	0	0
73615		A	Contrast x-ray	2.76	2.76	XXX	0	3	0	0	0
73615	26	A	Contrast x-ray	0.75	0.75	XXX	0	3	0	0	0
73615	TC	A	Contrast x-ray	2.00	2.00	XXX	0	3	0	0	0
73620		A	X-ray exam of foot	0.69	0.69	XXX	0	3	0	0	0
73620	26	A	X-ray exam of foot	0.22	0.22	XXX	0	3	0	0	0
73620	TC	A	X-ray exam of foot	0.47	0.47	XXX	0	3	0	0	0
73630		A	X-ray exam of foot	0.75	0.75	XXX	0	3	0	0	0
73630	26	A	X-ray exam of foot	0.24	0.24	XXX	0	3	0	0	0
73630	TC	A	X-ray exam of foot	0.51	0.51	XXX	0	3	0	0	0
73650		A	X-ray exam of heel	0.67	0.67	XXX	0	3	0	0	0
73650	26	A	X-ray exam of heel	0.22	0.22	XXX	0	3	0	0	0
73650	TC	A	X-ray exam of heel	0.45	0.45	XXX	0	3	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
73660		A	X-ray exam of toes	0.58	0.58	XXX	0	3	0	0	0
73660	26	A	X-ray exam of toes	0.18	0.18	XXX	0	3	0	0	0
73660	TC	A	X-ray exam of toes	0.40	0.40	XXX	0	3	0	0	0
73700		A	CAT scan of leg	6.23	6.23	XXX	0	2	0	0	0
73700	26	A	CAT scan of leg	1.49	1.49	XXX	0	2	0	0	0
73700	TC	A	CAT scan of leg	4.73	4.73	XXX	0	2	0	0	0
73701		A	Contrast CAT scan	7.23	7.23	XXX	0	2	0	0	0
73701	26	A	Contrast CAT scan	1.59	1.59	XXX	0	2	0	0	0
73701	TC	A	Contrast CAT scan	5.64	5.64	XXX	0	2	0	0	0
73702		A	Contrast CAT scan	8.75	8.75	XXX	0	2	0	0	0
73702	26	A	Contrast CAT scan	1.66	1.66	XXX	0	2	0	0	0
73702	TC	A	Contrast CAT scan	7.09	7.09	XXX	0	2	0	0	0
73720		A	Magnetic image	12.72	12.72	XXX	0	2	0	0	0
73720	26	A	Magnetic image	2.04	2.04	XXX	0	2	0	0	0
73720	TC	A	Magnetic image	10.69	10.69	XXX	0	2	0	0	0
73721		A	Magnetic image	12.48	12.48	XXX	0	3	0	0	0
73721	26	A	Magnetic image	1.79	1.79	XXX	0	3	0	0	0
73721	TC	A	Magnetic image	10.69	10.69	XXX	0	3	0	0	0
73725		R	Magnetic image	13.03	13.03	XXX	0	2	0	0	0
73725	26	R	Magnetic image	2.34	2.34	XXX	0	2	0	0	0
73725	TC	R	Magnetic image	10.69	10.69	XXX	0	2	0	0	0

(6) Diagnostic radiology, abdomen:

74000		A	X-ray exam of abdomen	0.75	0.75	XXX	0	0	0	0	0
74000	26	A	X-ray exam of abdomen	0.25	0.25	XXX	0	0	0	0	0
74000	TC	A	X-ray exam of abdomen	0.50	0.50	XXX	0	0	0	0	0
74010		A	X-ray exam of abdomen	0.87	0.87	XXX	0	0	0	0	0
74010	26	A	X-ray exam of abdomen	0.33	0.33	XXX	0	0	0	0	0
74010	TC	A	X-ray exam of abdomen	0.54	0.54	XXX	0	0	0	0	0
74020		A	X-ray exam of abdomen	0.97	0.97	XXX	0	0	0	0	0
74020	26	A	X-ray exam of abdomen	0.38	0.38	XXX	0	0	0	0	0
74020	TC	A	X-ray exam of abdomen	0.59	0.59	XXX	0	0	0	0	0
74022		A	X-ray exam series	1.15	1.15	XXX	0	0	0	0	0
74022	26	A	X-ray exam series	0.45	0.45	XXX	0	0	0	0	0
74022	TC	A	X-ray exam series	0.70	0.70	XXX	0	0	0	0	0
74150		A	CAT scan of abdomen	7.03	7.03	XXX	0	0	0	0	0
74150	26	A	CAT scan of abdomen	1.63	1.63	XXX	0	0	0	0	0
74150	TC	A	CAT scan of abdomen	5.40	5.40	XXX	0	0	0	0	0
74160		A	Contrast CAT scan	8.27	8.27	XXX	0	0	0	0	0
74160	26	A	Contrast CAT scan	1.74	1.74	XXX	0	0	0	0	0
74160	TC	A	Contrast CAT scan	6.52	6.52	XXX	0	0	0	0	0
74170		A	Contrast CAT scan	10.02	10.02	XXX	0	0	0	0	0
74170	26	A	Contrast CAT scan	1.92	1.92	XXX	0	0	0	0	0
74170	TC	A	Contrast CAT scan	8.09	8.09	XXX	0	0	0	0	0
74181		A	Magnetic image	12.89	12.89	XXX	0	0	0	0	0
74181	26	A	Magnetic image	2.21	2.21	XXX	0	0	0	0	0
74181	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
74185		R	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
74185	26	R	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
74185	TC	R	Magnetic image	0.00	0.00	XXX	9	9	9	9	9
74190		A	X-ray exam of peritoneum	1.81	1.81	XXX	0	0	0	0	0
74190	26	A	X-ray exam of peritoneum	0.57	0.57	XXX	0	0	0	0	0
74190	TC	A	X-ray exam of peritoneum	1.24	1.24	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(7) Diagnostic radiology, gastrointestinal tract:											
74210		A	x-ray	1.62	1.62	XXX	0	0	0	0	0
74210	26	A	Contrast x-ray	0.49	0.49	XXX	0	0	0	0	0
74210	TC	A	Contrast x-ray	1.13	1.13	XXX	0	0	0	0	0
74220		A	Contrast x-ray	1.77	1.77	XXX	0	0	0	0	0
74220	26	A	Contrast x-ray	0.64	0.64	XXX	0	0	0	0	0
74220	TC	A	Contrast x-ray	1.13	1.13	XXX	0	0	0	0	0
74230		A	Cinema x-ray of throat	1.99	1.99	XXX	0	0	0	0	0
74230	26	A	Cinema x-ray of throat	0.74	0.74	XXX	0	0	0	0	0
74230	TC	A	Cinema x-ray of throat	1.24	1.24	XXX	0	0	0	0	0
74235		A	Remove obstruction	4.14	4.14	XXX	0	0	0	0	0
74235	26	A	Remove obstruction	1.63	1.63	XXX	0	0	0	0	0
74235	TC	A	Remove obstruction	2.51	2.51	XXX	0	0	0	0	0
74240		A	X-ray exam of upper	2.36	2.36	XXX	0	0	0	0	0
74240	26	A	X-ray exam of upper	0.96	0.96	XXX	0	0	0	0	0
74240	TC	A	X-ray exam of upper	1.39	1.39	XXX	0	0	0	0	0
74241		A	X-ray exam of upper	2.38	2.38	XXX	0	0	0	0	0
74241	26	A	X-ray exam of upper	0.96	0.96	XXX	0	0	0	0	0
74241	TC	A	X-ray exam of upper	1.42	1.42	XXX	0	0	0	0	0
74245		A	X-ray exam of upper	3.53	3.53	XXX	0	0	0	0	0
74245	26	A	X-ray exam of upper	1.26	1.26	XXX	0	0	0	0	0
74245	TC	A	X-ray exam of upper	2.28	2.28	XXX	0	0	0	0	0
74246		A	Contrast x-ray	2.53	2.53	XXX	0	0	0	0	0
74246	26	A	Contrast x-ray	0.96	0.96	XXX	0	0	0	0	0
74246	TC	A	Contrast x-ray	1.57	1.57	XXX	0	0	0	0	0
74247		A	Contrast x-ray	2.57	2.57	XXX	0	0	0	0	0
74247	26	A	Contrast x-ray	0.96	0.96	XXX	0	0	0	0	0
74247	TC	A	Contrast x-ray	1.61	1.61	XXX	0	0	0	0	0
74249		A	Contrast x-ray	3.71	3.71	XXX	0	0	0	0	0
74249	26	A	Contrast x-ray	1.26	1.26	XXX	0	0	0	0	0
74249	TC	A	Contrast x-ray	2.45	2.45	XXX	0	0	0	0	0
74250		A	X-ray exam of small bowel	1.89	1.89	XXX	0	0	0	0	0
74250	26	A	X-ray exam of small bowel	0.65	0.65	XXX	0	0	0	0	0
74250	TC	A	X-ray exam of small bowel	1.24	1.24	XXX	0	0	0	0	0
74251		A	X-ray exam of small bowel	2.09	2.09	XXX	0	0	0	0	0
74251	26	A	X-ray exam of small bowel	0.85	0.85	XXX	0	0	0	0	0
74251	TC	A	X-ray exam of small bowel	1.24	1.24	XXX	0	0	0	0	0
74260		A	X-ray exam of small bowel	2.11	2.11	XXX	0	0	0	0	0
74260	26	A	X-ray exam of small bowel	0.69	0.69	XXX	0	0	0	0	0
74260	TC	A	X-ray exam of small bowel	1.42	1.42	XXX	0	0	0	0	0
74270		A	Contrast x-ray	2.59	2.59	XXX	0	0	0	0	0
74270	26	A	Contrast x-ray	0.96	0.96	XXX	0	0	0	0	0
74270	TC	A	Contrast x-ray	1.63	1.63	XXX	0	0	0	0	0
74280		A	Contrast x-ray	3.51	3.51	XXX	0	0	0	0	0
74280	26	A	Contrast x-ray	1.37	1.37	XXX	0	0	0	0	0
74280	TC	A	Contrast x-ray	2.13	2.13	XXX	0	0	0	0	0
74283		A	Contrast x-ray	5.23	5.23	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
74283	26	A	Contrast x-ray	2.78	2.78	XXX	0	0	0	0	0
74283	TC	A	Contrast x-ray	2.45	2.45	XXX	0	0	0	0	0
74290		A	Contrast x-ray	1.15	1.15	XXX	0	0	0	0	0
74290	26	A	Contrast x-ray	0.45	0.45	XXX	0	0	0	0	0
74290	TC	A	Contrast x-ray	0.70	0.70	XXX	0	0	0	0	0
74291		A	Contrast x-rays	0.68	0.68	XXX	0	0	0	0	0
74291	26	A	Contrast x-rays	0.27	0.27	XXX	0	0	0	0	0
74291	TC	A	Contrast x-rays	0.40	0.40	XXX	0	0	0	0	0
74300		C	X-ray bile duct	0.00	0.00	XXX	0	0	0	0	0
74300	26	A	X-ray bile duct	0.50	0.50	XXX	0	0	0	0	0
74300	TC	C	X-ray bile duct	0.00	0.00	XXX	0	0	0	0	0
74301		C	Additional x-ray	0.00	0.00	XXX	0	0	0	0	0
74301	26	A	Additional x-ray	0.29	0.29	XXX	0	0	0	0	0
74301	TC	C	Additional x-ray	0.00	0.00	XXX	0	0	0	0	0
74305		A	X-ray bile duct	1.33	1.33	XXX	0	0	0	0	0
74305	26	A	X-ray bile duct	0.58	0.58	XXX	0	0	0	0	0
74305	TC	A	X-ray bile duct	0.75	0.75	XXX	0	0	0	0	0
74320		A	Contrast x-ray	3.76	3.76	XXX	0	0	0	0	0
74320	26	A	Contrast x-ray	0.75	0.75	XXX	0	0	0	0	0
74320	TC	A	Contrast x-ray	3.00	3.00	XXX	0	0	0	0	0
74327		A	X-ray bile duct	2.66	2.66	XXX	0	0	0	0	0
74327	26	A	X-ray bile duct	0.97	0.97	XXX	0	0	0	0	0
74327	TC	A	X-ray bile duct	1.68	1.68	XXX	0	0	0	0	0
74328		A	X-ray bile duct	3.97	3.97	XXX	0	0	0	0	0
74328	26	A	X-ray bile duct	0.97	0.97	XXX	0	0	0	0	0
74328	TC	A	X-ray bile duct	3.00	3.00	XXX	0	0	0	0	0
74329		A	X-ray pancreas	3.97	3.97	XXX	0	0	0	0	0
74329	26	A	X-ray pancreas	0.97	0.97	XXX	0	0	0	0	0
74329	TC	A	X-ray pancreas	3.00	3.00	XXX	0	0	0	0	0
74330		A	X-ray bile duct/pancreas	4.16	4.16	XXX	0	0	0	0	0
74330	26	A	X-ray bile duct/pancreas	1.15	1.15	XXX	0	0	0	0	0
74330	TC	A	X-ray bile duct/pancreas	3.00	3.00	XXX	0	0	0	0	0
74340		A	X-ray guide	3.26	3.26	XXX	0	0	0	0	0
74340	26	A	X-ray guide	0.75	0.75	XXX	0	0	0	0	0
74340	TC	A	X-ray guide	2.51	2.51	XXX	0	0	0	0	0
74350		A	X-ray guide	4.06	4.06	XXX	0	0	0	0	0
74350	26	A	X-ray guide	1.06	1.06	XXX	0	0	0	0	0
74350	TC	A	X-ray guide	3.00	3.00	XXX	0	0	0	0	0
74355		A	X-ray guide	3.56	3.56	XXX	0	0	0	0	0
74355	26	A	X-ray guide	1.06	1.06	XXX	0	0	0	0	0
74355	TC	A	X-ray guide	2.51	2.51	XXX	0	0	0	0	0
74360		A	X-ray guide, GI dilation	3.76	3.76	XXX	0	0	0	0	0
74360	26	A	X-ray guide, GI dilation	0.75	0.75	XXX	0	0	0	0	0
74360	TC	A	X-ray guide, GI dilation	3.00	3.00	XXX	0	0	0	0	0
74363		A	X-ray bile duct	7.03	7.03	XXX	0	0	0	0	0
74363	26	A	X-ray bile duct	1.22	1.22	XXX	0	0	0	0	0
74363	TC	A	X-ray bile duct	5.82	5.82	XXX	0	0	0	0	0

(8) Diagnostic radiology, urinary tract:

74400		A	Contrast x-ray	2.28	2.28	XXX	0	0	0	0	0
74400	26	A	Contrast x-ray	0.67	0.67	XXX	0	0	0	0	0
74400	TC	A	Contrast x-ray	1.61	1.61	XXX	0	0	0	0	0
74405		A	Contrast x-ray	2.57	2.57	XXX	0	0	0	0	0
74405	26	A	Contrast x-ray	0.67	0.67	XXX	0	0	0	0	0

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74405	TC	A	Contrast x-ray	1.90	1.90	XXX	0	0	0	0	0
74410		A	Contrast x-ray	2.54	2.54	XXX	0	0	0	0	0
74410	26	A	Contrast x-ray	0.67	0.67	XXX	0	0	0	0	0
74410	TC	A	Contrast x-ray	1.86	1.86	XXX	0	0	0	0	0
74415		A	Contrast x-ray	2.70	2.70	XXX	0	0	0	0	0
74415	26	A	Contrast x-ray	0.67	0.67	XXX	0	0	0	0	0
74415	TC	A	Contrast x-ray	2.02	2.02	XXX	0	0	0	0	0
74420		A	Contrast x-ray	3.00	3.00	XXX	0	0	0	0	0
74420	26	A	Contrast x-ray	0.49	0.49	XXX	0	0	0	0	0
74420	TC	A	Contrast x-ray	2.51	2.51	XXX	0	0	0	0	0
74425		A	Contrast x-ray	1.73	1.73	XXX	0	0	0	0	0
74425	26	A	Contrast x-ray	0.49	0.49	XXX	0	0	0	0	0
74425	TC	A	Contrast x-ray	1.24	1.24	XXX	0	0	0	0	0
74430		A	Contrast x-ray	1.45	1.45	XXX	0	0	0	0	0
74430	26	A	Contrast x-ray	0.45	0.45	XXX	0	0	0	0	0
74430	TC	A	Contrast x-ray	1.00	1.00	XXX	0	0	0	0	0
74440		A	X-ray exam of male	1.61	1.61	XXX	0	0	0	0	0
74440	26	A	X-ray exam of male	0.53	0.53	XXX	0	0	0	0	0
74440	TC	A	X-ray exam of male	1.08	1.08	XXX	0	0	0	0	0
74445		A	X-ray exam of penis	2.64	2.64	XXX	0	0	0	0	0
74445	26	A	X-ray exam of penis	1.56	1.56	XXX	0	0	0	0	0
74445	TC	A	X-ray exam of penis	1.08	1.08	XXX	0	0	0	0	0
74450		A	X-ray exam urethro	1.85	1.85	XXX	0	0	0	0	0
74450	26	A	X-ray exam urethro	0.46	0.46	XXX	0	0	0	0	0
74450	TC	A	X-ray exam urethro	1.39	1.39	XXX	0	0	0	0	0
74455		A	X-ray exam urethro	1.96	1.96	XXX	0	0	0	0	0
74455	26	A	X-ray exam urethro	0.46	0.46	XXX	0	0	0	0	0
74455	TC	A	X-ray exam urethro	1.50	1.50	XXX	0	0	0	0	0
74470		A	X-ray exam of kidney	1.95	1.95	XXX	0	0	0	0	0
74470	26	A	X-ray exam of kidney	0.75	0.75	XXX	0	0	0	0	0
74470	TC	A	X-ray exam of kidney	1.19	1.19	XXX	0	0	0	0	0
74475		A	X-ray control catheter	4.64	4.64	XXX	0	0	0	0	0
74475	26	A	X-ray control catheter	0.75	0.75	XXX	0	0	0	0	0
74475	TC	A	X-ray control catheter	3.89	3.89	XXX	0	0	0	0	0
74480		A	X-ray control catheter	4.64	4.64	XXX	0	0	0	0	0
74480	26	A	X-ray control catheter	0.75	0.75	XXX	0	0	0	0	0
74480	TC	A	X-ray control catheter	3.89	3.89	XXX	0	0	0	0	0
74485		A	X-ray guide, GU dilation	3.76	3.76	XXX	0	0	0	0	0
74485	26	A	X-ray guide, GU dilation	0.75	0.75	XXX	0	0	0	0	0
74485	TC	A	X-ray guide, GU dilation	3.00	3.00	XXX	0	0	0	0	0

(90) Diagnostic radiology, gynecological and obstetrical:

74710		A	X-ray measurement	1.48	1.48	XXX	0	0	0	0	0
74710	26	A	X-ray measurement	0.47	0.47	XXX	0	0	0	0	0
74710	TC	A	X-ray measurement	1.00	1.00	XXX	0	0	0	0	0
74740		A	X-ray of uterus, oviducts	1.77	1.77	XXX	0	0	0	0	0
74740	26	A	X-ray of uterus, oviducts	0.53	0.53	XXX	0	0	0	0	0

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Proposed Rules

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74740	TC	A	X-ray of uterus, oviducts	1.24	1.24	XXX	0	0	0	0	0
74742		A	X-ray of fallopian tube	3.82	3.82	XXX	0	0	0	0	0
74742	26	A	X-ray of fallopian tube	0.82	0.82	XXX	0	0	0	0	0
74742	TC	A	X-ray of fallopian tube	3.00	3.00	XXX	0	0	0	0	0
74775		A	X-ray exam of perineum	2.26	2.26	XXX	0	0	0	0	0
74775	26	A	X-ray exam of perineum	0.87	0.87	XXX	0	0	0	0	0
74775	TC	A	X-ray exam of perineum	1.39	1.39	XXX	0	0	0	0	0

(10) Diagnostic radiology, heart:

75552		A	Magnetic image	12.89	12.89	XXX	0	0	0	0	0
75552	26	A	Magnetic image	2.21	2.21	XXX	0	0	0	0	0
75552	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
75553		A	Magnetic image	13.26	13.26	XXX	0	0	0	0	0
75553	26	A	Magnetic image	2.57	2.57	XXX	0	0	0	0	0
75553	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
75554		A	Cardiac MRI/function	13.10	13.10	XXX	0	0	0	0	0
75554	26	A	Cardiac MRI/function	2.42	2.42	XXX	0	0	0	0	0
75554	TC	A	Cardiac MRI/function	10.69	10.69	XXX	0	0	0	0	0
75555		A	Cardiac MRI/limited	13.02	13.02	XXX	0	0	0	0	0
75555	26	A	Cardiac MRI/limited	2.34	2.34	XXX	0	0	0	0	0
75555	TC	A	Cardiac MRI/limited	10.69	10.69	XXX	0	0	0	0	0
75556		N	Cardiac MRI/flow mapping	0.00	0.00	XXX	9	9	9	9	9

(11) Diagnostic radiology, aorta and arteries:

75600		A	Contrast x-ray	12.69	12.69	XXX	0	0	0	0	0
75600	26	A	Contrast x-ray	0.67	0.67	XXX	0	0	0	0	0
75600	TC	A	Contrast x-ray	12.01	12.01	XXX	0	0	0	0	0
75605		A	Contrast x-ray	13.58	13.58	XXX	0	0	0	0	0
75605	26	A	Contrast x-ray	1.56	1.56	XXX	0	0	0	0	0
75605	TC	A	Contrast x-ray	12.01	12.01	XXX	0	0	0	0	0
75625		A	Contrast x-ray	13.58	13.58	XXX	0	0	0	0	0
75625	26	A	Contrast x-ray	1.56	1.56	XXX	0	0	0	0	0
75625	TC	A	Contrast x-ray	12.01	12.01	XXX	0	0	0	0	0
75630		A	X-ray of aorta	14.75	14.75	XXX	0	0	0	0	0
75630	26	A	X-ray of aorta	2.23	2.23	XXX	0	0	0	0	0
75630	TC	A	X-ray of aorta	12.52	12.52	XXX	0	0	0	0	0
75650		A	Artery x-ray	14.06	14.06	XXX	0	0	0	0	0
75650	26	A	Artery x-ray	2.05	2.05	XXX	0	0	0	0	0
75650	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75658		A	X-ray exam, arm arteries	13.81	13.81	XXX	0	0	0	0	0
75658	26	A	X-ray exam, arm arteries	1.80	1.80	XXX	0	0	0	0	0
75658	TC	A	X-ray exam, arm arteries	12.01	12.01	XXX	0	0	0	0	0
75660		A	Artery x-ray	13.81	13.81	XXX	0	0	0	0	0
75660	26	A	Artery x-ray	1.80	1.80	XXX	0	0	0	0	0
75660	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75662		A	Artery x-ray	14.30	14.30	XXX	0	2	0	0	0
75662	26	A	Artery x-ray	2.28	2.28	XXX	0	2	0	0	0
75662	TC	A	Artery x-ray	12.01	12.01	XXX	0	2	0	0	0
75665		A	Artery x-ray	13.81	13.81	XXX	0	0	0	0	0
75665	26	A	Artery x-ray	1.80	1.80	XXX	0	0	0	0	0
75665	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75671		A	Artery x-ray	14.30	14.30	XXX	0	2	0	0	0
75671	26	A	Artery x-ray	2.28	2.28	XXX	0	2	0	0	0

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75671	TC	A	Artery x-ray	12.01	12.01	XXX	0	2	0	0	0
75676		A	Artery x-ray	13.81	13.81	XXX	0	0	0	0	0
75676	26	A	Artery x-ray	1.80	1.80	XXX	0	0	0	0	0
75676	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75680		A	Artery x-ray	14.30	14.30	XXX	0	2	0	0	0
75680	26	A	Artery x-ray	2.28	2.28	XXX	0	2	0	0	0
75680	TC	A	Artery x-ray	12.01	12.01	XXX	0	2	0	0	0
75685		A	Artery x-ray	13.81	13.81	XXX	0	0	0	0	0
75685	26	A	Artery x-ray	1.80	1.80	XXX	0	0	0	0	0
75685	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75705		A	Artery x-ray	15.02	15.02	XXX	0	0	0	0	0
75705	26	A	Artery x-ray	3.01	3.01	XXX	0	0	0	0	0
75705	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75710		A	Artery x-ray	13.58	13.58	XXX	0	0	0	0	0
75710	26	A	Artery x-ray	1.56	1.56	XXX	0	0	0	0	0
75710	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75716		A	Artery x-ray	13.81	13.81	XXX	0	2	0	0	0
75716	26	A	Artery x-ray	1.80	1.80	XXX	0	2	0	0	0
75716	TC	A	Artery x-ray	12.01	12.01	XXX	0	2	0	0	0
75722		A	Artery x-ray	13.58	13.58	XXX	0	0	0	0	0
75722	26	A	Artery x-ray	1.56	1.56	XXX	0	0	0	0	0
75722	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75724		A	Artery x-ray	14.06	14.06	XXX	0	2	0	0	0
75724	26	A	Artery x-ray	2.05	2.05	XXX	0	2	0	0	0
75724	TC	A	Artery x-ray	12.01	12.01	XXX	0	2	0	0	0
75726		A	Artery x-ray	13.58	13.58	XXX	0	0	0	0	0
75726	26	A	Artery x-ray	1.56	1.56	XXX	0	0	0	0	0
75726	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75731		A	Artery x-ray	13.58	13.58	XXX	0	0	0	0	0
75731	26	A	Artery x-ray	1.56	1.56	XXX	0	0	0	0	0
75731	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75733		A	Artery x-ray	13.81	13.81	XXX	0	2	0	0	0
75733	26	A	Artery x-ray	1.80	1.80	XXX	0	2	0	0	0
75733	TC	A	Artery x-ray	12.01	12.01	XXX	0	2	0	0	0
75736		A	Artery x-ray	13.58	13.58	XXX	0	0	0	0	0
75736	26	A	Artery x-ray	1.56	1.56	XXX	0	0	0	0	0
75736	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75741		A	Artery x-ray	13.81	13.81	XXX	0	0	0	0	0
75741	26	A	Artery x-ray	1.80	1.80	XXX	0	0	0	0	0
75741	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75743		A	Artery x-ray	14.30	14.30	XXX	0	2	0	0	0
75743	26	A	Artery x-ray	2.28	2.28	XXX	0	2	0	0	0
75743	TC	A	Artery x-ray	12.01	12.01	XXX	0	2	0	0	0
75746		A	Artery x-ray	13.58	13.58	XXX	0	0	0	0	0
75746	26	A	Artery x-ray	1.56	1.56	XXX	0	0	0	0	0
75746	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75756		A	Artery x-ray	13.58	13.58	XXX	0	0	0	0	0
75756	26	A	Artery x-ray	1.56	1.56	XXX	0	0	0	0	0

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Proposed Rules

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75756	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75774		A	Artery x-ray	12.51	12.51	XXX	0	0	0	0	0
75774	26	A	Artery x-ray	0.49	0.49	XXX	0	0	0	0	0
75774	TC	A	Artery x-ray	12.01	12.01	XXX	0	0	0	0	0
75790		A	Visualize A-V shunt	3.83	3.83	XXX	0	0	0	0	0
75790	26	A	Visualize A-V shunt	2.54	2.54	XXX	0	0	0	0	0
75790	TC	A	Visualize A-V shunt	1.30	1.30	XXX	0	0	0	0	0

(12) Diagnostic radiology, veins and lymphatics:

75801		A	Lymph vessel x-ray	6.29	6.29	XXX	0	0	0	0	0
75801	26	A	Lymph vessel x-ray	1.12	1.12	XXX	0	0	0	0	0
75801	TC	A	Lymph vessel x-ray	5.17	5.17	XXX	0	0	0	0	0
75803		A	Lymph vessel x-ray	6.77	6.77	XXX	0	2	0	0	0
75803	26	A	Lymph vessel x-ray	1.60	1.60	XXX	0	2	0	0	0
75803	TC	A	Lymph vessel x-ray	5.17	5.17	XXX	0	2	0	0	0
75805		A	Lymph vessel x-ray	6.94	6.94	XXX	0	0	0	0	0
75805	26	A	Lymph vessel x-ray	1.12	1.12	XXX	0	0	0	0	0
75805	TC	A	Lymph vessel x-ray	5.82	5.82	XXX	0	0	0	0	0
75807		A	Lymph vessel x-ray	7.42	7.42	XXX	0	2	0	0	0
75807	26	A	Lymph vessel x-ray	1.60	1.60	XXX	0	2	0	0	0
75807	TC	A	Lymph vessel x-ray	5.82	5.82	XXX	0	2	0	0	0
75809		A	Nonvascular shunt	1.38	1.38	XXX	0	0	0	0	0
75809	26	A	Nonvascular shunt	0.63	0.63	XXX	0	0	0	0	0
75809	TC	A	Nonvascular shunt	0.75	0.75	XXX	0	0	0	0	0
75810		A	Vein x-ray	13.58	13.58	XXX	0	0	0	0	0
75810	26	A	Vein x-ray	1.56	1.56	XXX	0	0	0	0	0
75810	TC	A	Vein x-ray	12.01	12.01	XXX	0	0	0	0	0
75820		A	Vein x-ray, arm	1.87	1.87	XXX	0	0	0	0	0
75820	26	A	Vein x-ray, arm	0.97	0.97	XXX	0	0	0	0	0
75820	TC	A	Vein x-ray, arm	0.90	0.90	XXX	0	0	0	0	0
75822		A	Vein x-ray, arm	2.87	2.87	XXX	0	2	0	0	0
75822	26	A	Vein x-ray, arm	1.45	1.45	XXX	0	2	0	0	0
75822	TC	A	Vein x-ray, arm	1.41	1.41	XXX	0	2	0	0	0
75825		A	Vein x-ray, trunk	13.58	13.58	XXX	0	0	0	0	0
75825	26	A	Vein x-ray, trunk	1.56	1.56	XXX	0	0	0	0	0
75825	TC	A	Vein x-ray, trunk	12.01	12.01	XXX	0	0	0	0	0
75827		A	Vein x-ray, chest	13.58	13.58	XXX	0	0	0	0	0
75827	26	A	Vein x-ray, chest	1.56	1.56	XXX	0	0	0	0	0
75827	TC	A	Vein x-ray, chest	12.01	12.01	XXX	0	0	0	0	0
75831		A	Vein x-ray, kidney	13.58	13.58	XXX	0	0	0	0	0
75831	26	A	Vein x-ray, kidney	1.56	1.56	XXX	0	0	0	0	0
75831	TC	A	Vein x-ray, kidney	12.01	12.01	XXX	0	0	0	0	0
75833		A	Vein x-ray, kidney	14.06	14.06	XXX	0	2	0	0	0
75833	26	A	Vein x-ray, kidney	2.05	2.05	XXX	0	2	0	0	0
75833	TC	A	Vein x-ray, kidney	12.01	12.01	XXX	0	2	0	0	0
75840		A	Vein x-ray, adrenal	13.58	13.58	XXX	0	0	0	0	0
75840	26	A	Vein x-ray, adrenal	1.56	1.56	XXX	0	0	0	0	0
75840	TC	A	Vein x-ray, adrenal	12.01	12.01	XXX	0	0	0	0	0
75842		A	Vein x-ray, adrenal	14.06	14.06	XXX	0	2	0	0	0
75842	26	A	Vein x-ray, adrenal	2.05	2.05	XXX	0	2	0	0	0
75842	TC	A	Vein x-ray, adrenal	12.01	12.01	XXX	0	2	0	0	0
75860		A	Vein x-ray, neck	13.58	13.58	XXX	0	0	0	0	0
75860	26	A	Vein x-ray, neck	1.56	1.56	XXX	0	0	0	0	0
75860	TC	A	Vein x-ray, neck	12.01	12.01	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
75870		A	Vein x-ray, skull	13.58	13.58	XXX	0	0	0	0	0
75870	26	A	Vein x-ray, skull	1.56	1.56	XXX	0	0	0	0	0
75870	TC	A	Vein x-ray, skull	12.01	12.01	XXX	0	0	0	0	0
75872		A	Vein x-ray, skull	13.58	13.58	XXX	0	0	0	0	0
75872	26	A	Vein x-ray, skull	1.56	1.56	XXX	0	0	0	0	0
75872	TC	A	Vein x-ray, skull	12.01	12.01	XXX	0	0	0	0	0
75880		A	Vein x-ray, eye	1.87	1.87	XXX	0	0	0	0	0
75880	26	A	Vein x-ray, eye	0.97	0.97	XXX	0	0	0	0	0
75880	TC	A	Vein x-ray, eye	0.90	0.90	XXX	0	0	0	0	0
75885		A	Vein x-ray, liver	14.00	14.00	XXX	0	0	0	0	0
75885	26	A	Vein x-ray, liver	1.98	1.98	XXX	0	0	0	0	0
75885	TC	A	Vein x-ray, liver	12.01	12.01	XXX	0	0	0	0	0
75887		A	Vein x-ray, liver	14.00	14.00	XXX	0	0	0	0	0
75887	26	A	Vein x-ray, liver	1.98	1.98	XXX	0	0	0	0	0
75887	TC	A	Vein x-ray, liver	12.01	12.01	XXX	0	0	0	0	0
75889		A	Vein x-ray, liver	13.58	13.58	XXX	0	0	0	0	0
75889	26	A	Vein x-ray, liver	1.56	1.56	XXX	0	0	0	0	0
75889	TC	A	Vein x-ray, liver	12.01	12.01	XXX	0	0	0	0	0
75891		A	Vein x-ray, liver	13.58	13.58	XXX	0	0	0	0	0
75891	26	A	Vein x-ray, liver	1.56	1.56	XXX	0	0	0	0	0
75891	TC	A	Vein x-ray, liver	12.01	12.01	XXX	0	0	0	0	0
75893		A	Venous sampling	12.77	12.77	XXX	0	0	0	0	0
75893	26	A	Venous sampling	0.75	0.75	XXX	0	0	0	0	0
75893	TC	A	Venous sampling	12.01	12.01	XXX	0	0	0	0	0

(13) Diagnostic radiology, transcatheter procedures:

75894		A	X-ray, transcatheter	24.81	24.81	XXX	0	0	0	0	0
75894	26	A	X-ray, transcatheter	1.80	1.80	XXX	0	0	0	0	0
75894	TC	A	X-ray, transcatheter	23.01	23.01	XXX	0	0	0	0	0
75896		A	X-ray, transcatheter	21.81	21.81	XXX	0	0	0	0	0
75896	26	A	X-ray, transcatheter	1.80	1.80	XXX	0	0	0	0	0
75896	TC	A	X-ray, transcatheter	20.01	20.01	XXX	0	0	0	0	0
75898		A	Follow-up angiogram	3.28	3.28	XXX	0	0	0	0	0
75898	26	A	Follow-up angiogram	2.27	2.27	XXX	0	0	0	0	0
75898	TC	A	Follow-up angiogram	1.00	1.00	XXX	0	0	0	0	0
75900		A	Arterial catheter	20.69	20.69	XXX	0	0	0	0	0
75900	26	A	Arterial catheter	0.68	0.68	XXX	0	0	0	0	0
75900	TC	A	Arterial catheter	20.00	20.00	XXX	0	0	0	0	0
75940		A	X-ray placement	12.77	12.77	XXX	0	0	0	0	0
75940	26	A	X-ray placement	0.75	0.75	XXX	0	0	0	0	0
75940	TC	A	X-ray placement	12.01	12.01	XXX	0	0	0	0	0
75945		A	Intravascular ultrasound	4.95	4.95	XXX	0	0	0	0	0
75945	26	A	Intravascular ultrasound	0.59	0.59	XXX	0	0	0	0	0
75945	TC	A	Intravascular ultrasound	4.36	4.36	XXX	0	0	0	0	0
75946		A	Intravascular ultrasound	2.78	2.78	XXX	0	0	0	0	0
75946	26	A	Intravascular ultrasound	0.59	0.59	XXX	0	0	0	0	0
75946	TC	A	Intravascular ultrasound	2.18	2.18	XXX	0	0	0	0	0

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KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated “all new material.” **ADOPTED RULES SECTION** — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
75960		A	Transcatheter, stent	15.34	15.34	XXX	0	0	0	0	0
75960	26	A	Transcatheter, stent	1.13	1.13	XXX	0	0	0	0	0
75960	TC	A	Transcatheter, stent	14.20	14.20	XXX	0	0	0	0	0
75961		A	Retrieval	15.86	15.86	XXX	0	0	0	0	0
75961	26	A	Retrieval	5.85	5.85	XXX	0	0	0	0	0
75961	TC	A	Retrieval	10.01	10.01	XXX	0	0	0	0	0
75962		A	Repair arterial	15.76	15.76	XXX	0	0	0	0	0
75962	26	A	Repair arterial	0.75	0.75	XXX	0	0	0	0	0
75962	TC	A	Repair arterial	15.01	15.01	XXX	0	0	0	0	0
75964		A	Repair artery balloon	8.50	8.50	XXX	0	0	0	0	0
75964	26	A	Repair artery balloon	0.49	0.49	XXX	0	0	0	0	0
75964	TC	A	Repair artery balloon	8.00	8.00	XXX	0	0	0	0	0
75966		A	Repair arterial	16.81	16.81	XXX	0	0	0	0	0
75966	26	A	Repair arterial	1.80	1.80	XXX	0	0	0	0	0
75966	TC	A	Repair arterial	15.01	15.01	XXX	0	0	0	0	0
75968		A	Repair artery balloon	8.50	8.50	XXX	0	0	0	0	0
75968	26	A	Repair artery balloon	0.49	0.49	XXX	0	0	0	0	0
75968	TC	A	Repair artery balloon	8.00	8.00	XXX	0	0	0	0	0
75970		A	Vascular biopsy	12.16	12.16	XXX	0	0	0	0	0
75970	26	A	Vascular biopsy	1.15	1.15	XXX	0	0	0	0	0
75970	TC	A	Vascular biopsy	11.01	11.01	XXX	0	0	0	0	0
75978		A	Repair venous balloon	15.98	15.98	XXX	0	0	0	0	0
75978	26	A	Repair venous balloon	0.98	0.98	XXX	0	0	0	0	0
75978	TC	A	Repair venous balloon	15.01	15.01	XXX	0	0	0	0	0
75980		A	Contrast x-ray	7.15	7.15	XXX	0	0	0	0	0
75980	26	A	Contrast x-ray	1.98	1.98	XXX	0	0	0	0	0
75980	TC	A	Contrast x-ray	5.17	5.17	XXX	0	0	0	0	0
75982		A	Contrast x-ray	7.80	7.80	XXX	0	0	0	0	0
75982	26	A	Contrast x-ray	1.98	1.98	XXX	0	0	0	0	0
75982	TC	A	Contrast x-ray	5.82	5.82	XXX	0	0	0	0	0
75984		A	X-ray control catheter	2.86	2.86	XXX	0	0	0	0	0
75984	26	A	X-ray control catheter	1.00	1.00	XXX	0	0	0	0	0
75984	TC	A	X-ray control catheter	1.86	1.86	XXX	0	0	0	0	0
75989		A	Abscess drainage	4.63	4.63	XXX	0	0	0	0	0
75989	26	A	Abscess drainage	1.63	1.63	XXX	0	0	0	0	0
75989	TC	A	Abscess drainage	3.00	3.00	XXX	0	0	0	0	0

(14) Diagnostic radiology, transluminal atherectomy:

75992		A	Atherectomy, x-ray	15.76	15.76	XXX	0	0	0	0	0
75992	26	A	Atherectomy, x-ray	0.75	0.75	XXX	0	0	0	0	0
75992	TC	A	Atherectomy, x-ray	15.01	15.01	XXX	0	0	0	0	0
75993		A	Atherectomy, x-ray	8.50	8.50	XXX	0	0	0	0	0
75993	26	A	Atherectomy, x-ray	0.49	0.49	XXX	0	0	0	0	0
75993	TC	A	Atherectomy, x-ray	8.00	8.00	XXX	0	0	0	0	0
75994		A	Atherectomy, x-ray	16.81	16.81	XXX	0	0	0	0	0
75994	26	A	Atherectomy, x-ray	1.80	1.80	XXX	0	0	0	0	0
75994	TC	A	Atherectomy, x-ray	15.01	15.01	XXX	0	0	0	0	0
75995		A	Atherectomy, x-ray	16.81	16.81	XXX	0	0	0	0	0
75995	26	A	Atherectomy, x-ray	1.80	1.80	XXX	0	0	0	0	0
75995	TC	A	Atherectomy, x-ray	15.01	15.01	XXX	0	0	0	0	0
75996		A	Atherectomy, x-ray	8.50	8.50	XXX	0	0	0	0	0
75996	26	A	Atherectomy, x-ray	0.49	0.49	XXX	0	0	0	0	0
75996	TC	A	Atherectomy, x-ray	8.00	8.00	XXX	0	0	0	0	0

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**DEPARTMENT OF LABOR
AND INDUSTRY**

WORKERS' COMPENSATION DIVISION

**PROPOSED PERMANENT RULES RELATING
TO WORKERS' COMPENSATION
MEDICAL FEE SCHEDULE**

The above captioned rules are continued
in Part B of this issue of the
Minnesota *State Register*,
Volume 25, #6, August 7, 2000.

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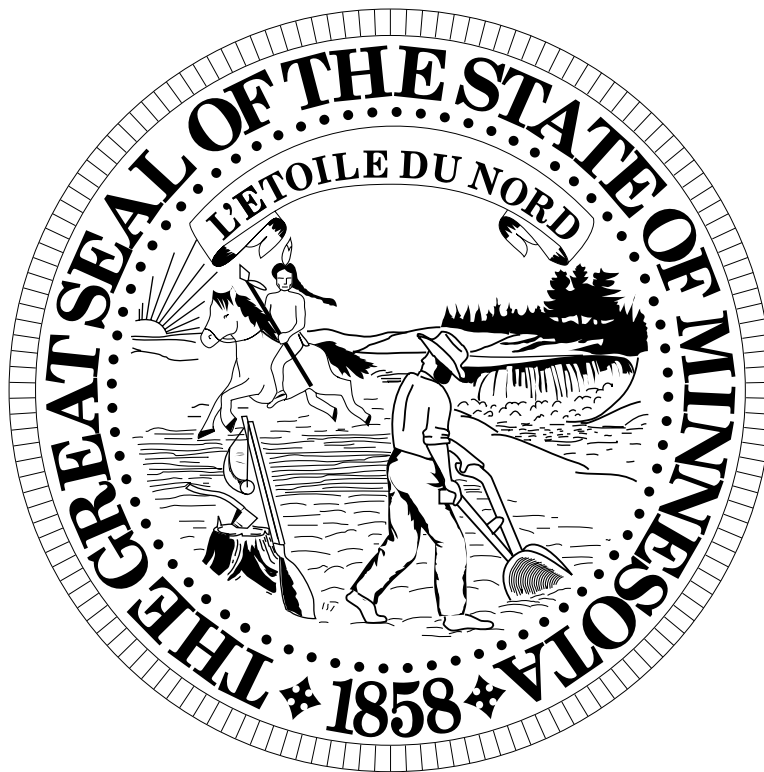
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State of Minnesota

State Register

Rules and Official Notices Edition



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DEPARTMENT OF LABOR AND INDUSTRY

WORKERS' COMPENSATION DIVISION

PROPOSED PERMANENT RULES RELATING TO WORKERS' COMPENSATION MEDICAL FEE SCHEDULE

These above titled rules, beginning on the next page,
are a continuation from Part A of the
Minnesota *State Register*,
Volume 25, #6, August 7, 2000.

Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(15) Diagnostic radiology, other procedures:											
76000		A	Fluoroscope exam	1.47	1.47	XXX	0	0	0	0	0
76000	26	A	Fluoroscope exam	0.23	0.23	XXX	0	0	0	0	0
76000	TC	A	Fluoroscope exam	1.24	1.24	XXX	0	0	0	0	0
76001		A	Fluoroscope exam	3.44	3.44	XXX	0	0	0	0	0
76001	26	A	Fluoroscope exam	0.94	0.94	XXX	0	0	0	0	0
76001	TC	A	Fluoroscope exam	2.51	2.51	XXX	0	0	0	0	0
76003		A	Needle localization	2.00	2.00	XXX	0	0	0	0	0
76003	26	A	Needle localization	0.75	0.75	XXX	0	0	0	0	0
76003	TC	A	Needle localization	1.24	1.24	XXX	0	0	0	0	0
76010		A	X-ray, nose to rectum	0.75	0.75	XXX	0	0	0	0	0
76010	26	A	X-ray, nose to rectum	0.25	0.25	XXX	0	0	0	0	0
76010	TC	A	X-ray, nose to rectum	0.50	0.50	XXX	0	0	0	0	0
76020		A	X-ray, bone age	0.76	0.76	XXX	0	0	0	0	0
76020	26	A	X-ray, bone age	0.26	0.26	XXX	0	0	0	0	0
76020	TC	A	X-ray, bone age	0.50	0.50	XXX	0	0	0	0	0
76040		A	X-ray, bone length	1.13	1.13	XXX	0	0	0	0	0
76040	26	A	X-ray, bone length	0.38	0.38	XXX	0	0	0	0	0
76040	TC	A	X-ray, bone length	0.75	0.75	XXX	0	0	0	0	0
76061		A	X-ray, bone survey	1.57	1.57	XXX	0	0	0	0	0
76061	26	A	X-ray, bone survey	0.62	0.62	XXX	0	0	0	0	0
76061	TC	A	X-ray, bone survey	0.95	0.95	XXX	0	0	0	0	0
76062		A	X-ray, bone survey	2.13	2.13	XXX	0	0	0	0	0
76062	26	A	X-ray, bone survey	0.75	0.75	XXX	0	0	0	0	0
76062	TC	A	X-ray, bone survey	1.37	1.37	XXX	0	0	0	0	0
76065		A	X-ray, bone, infant	1.09	1.09	XXX	0	0	0	0	0
76065	26	A	X-ray, bone, infant	0.39	0.39	XXX	0	0	0	0	0
76065	TC	A	X-ray, bone, infant	0.70	0.70	XXX	0	0	0	0	0
76066		A	Joint survey	1.49	1.49	XXX	0	0	0	0	0
76066	26	A	Joint survey	0.43	0.43	XXX	0	0	0	0	0
76066	TC	A	Joint survey	1.06	1.06	XXX	0	0	0	0	0
76070		I	CT scan, bone density	3.17	3.17	XXX	0	0	0	0	0
76070	26	I	CT scan, bone density	0.35	0.35	XXX	0	0	0	0	0
76070	TC	I	CT scan, bone density	2.81	2.81	XXX	0	0	0	0	0
76075		A	Dual energy x-ray	3.35	3.35	XXX	0	0	0	0	0
76075	26	A	Dual energy x-ray	0.40	0.40	XXX	0	0	0	0	0
76075	TC	A	Dual energy x-ray	2.95	2.95	XXX	0	0	0	0	0
76076		A	Dual energy x-ray	1.03	1.03	XXX	0	0	0	0	0
76076	26	A	Dual energy x-ray	0.31	0.31	XXX	0	0	0	0	0
76076	TC	A	Dual energy x-ray	0.72	0.72	XXX	0	0	0	0	0
76078		A	Photodensitometry	1.01	1.01	XXX	0	0	0	0	0
76078	26	A	Photodensitometry	0.29	0.29	XXX	0	0	0	0	0
76078	TC	A	Photodensitometry	0.72	0.72	XXX	0	0	0	0	0
76080		A	X-ray exam of fistula	1.76	1.76	XXX	0	0	0	0	0
76080	26	A	X-ray exam of fistula	0.75	0.75	XXX	0	0	0	0	0
76080	TC	A	X-ray exam of fistula	1.00	1.00	XXX	0	0	0	0	0
76086		A	X-ray of mammary	3.01	3.01	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
76086	26	A	X-ray of mammary	0.50	0.50	XXX	0	0	0	0	0
76086	TC	A	X-ray of mammary	2.51	2.51	XXX	0	0	0	0	0
76088		A	X-ray of mammary	4.11	4.11	XXX	0	0	0	0	0
76088	26	A	X-ray of mammary	0.62	0.62	XXX	0	0	0	0	0
76088	TC	A	X-ray of mammary	3.49	3.49	XXX	0	0	0	0	0
76090		A	Mammogram, one	1.66	1.66	XXX	0	0	0	0	0
76090	26	A	Mammogram, one	0.65	0.65	XXX	0	0	0	0	0
76090	TC	A	Mammogram, one	1.00	1.00	XXX	0	0	0	0	0
76091		A	Mammogram, both	2.06	2.06	XXX	0	2	0	0	0
76091	26	A	Mammogram, both	0.82	0.82	XXX	0	2	0	0	0
76091	TC	A	Mammogram, both	1.24	1.24	XXX	0	2	0	0	0
76092		X	Mammogram, screening	0.00	0.00	XXX	9	9	9	9	9
76093		A	Magnetic image	19.04	19.04	XXX	0	0	0	0	0
76093	26	A	Magnetic image	2.24	2.24	XXX	0	0	0	0	0
76093	TC	A	Magnetic image	16.81	16.81	XXX	0	0	0	0	0
76094		A	Magnetic image	25.03	25.03	XXX	0	2	0	0	0
76094	26	A	Magnetic image	2.24	2.24	XXX	0	2	0	0	0
76094	TC	A	Magnetic image	22.80	22.80	XXX	0	2	0	0	0
76095		A	Stereotactic breast	9.02	9.02	XXX	0	0	0	0	0
76095	26	A	Stereotactic breast	2.19	2.19	XXX	0	0	0	0	0
76095	TC	A	Stereotactic breast	6.83	6.83	XXX	0	0	0	0	0
76096		A	X-ray of needle	2.02	2.02	XXX	0	0	0	0	0
76096	26	A	X-ray of needle	0.78	0.78	XXX	0	0	0	0	0
76096	TC	A	X-ray of needle	1.24	1.24	XXX	0	0	0	0	0
76098		A	X-ray exam, breast	0.62	0.62	XXX	0	0	0	0	0
76098	26	A	X-ray exam, breast	0.22	0.22	XXX	0	0	0	0	0
76098	TC	A	X-ray exam, breast	0.40	0.40	XXX	0	0	0	0	0
76100		A	X-ray exam, body section	2.00	2.00	XXX	0	0	0	0	0
76100	26	A	X-ray exam, body section	0.81	0.81	XXX	0	0	0	0	0
76100	TC	A	X-ray exam, body section	1.19	1.19	XXX	0	0	0	0	0
76101		A	Complex body section	2.16	2.16	XXX	0	0	0	0	0
76101	26	A	Complex body section	0.81	0.81	XXX	0	0	0	0	0
76101	TC	A	Complex body section	1.35	1.35	XXX	0	0	0	0	0
76102		A	Complex body section	2.46	2.46	XXX	0	2	0	0	0
76102	26	A	Complex body section	0.81	0.81	XXX	0	2	0	0	0
76102	TC	A	Complex body section	1.65	1.65	XXX	0	2	0	0	0
76120		A	Cinematic x-ray	1.53	1.53	XXX	0	0	0	0	0
76120	26	A	Cinematic x-ray	0.53	0.53	XXX	0	0	0	0	0
76120	TC	A	Cinematic x-ray	1.00	1.00	XXX	0	0	0	0	0
76125		A	Cinematic x-ray	1.12	1.12	XXX	0	0	0	0	0
76125	26	A	Cinematic x-ray	0.37	0.37	XXX	0	0	0	0	0
76125	TC	A	Cinematic x-ray	0.75	0.75	XXX	0	0	0	0	0
76140		I	X-ray consultation	0.00	0.00	XXX	9	9	9	9	9
76150		A	X-ray exam, dry	0.40	0.40	XXX	0	0	0	0	0
76350		C	Special x-ray	0.00	0.00	XXX	0	0	0	0	0
76355		A	CAT scan for localization	9.53	9.53	XXX	0	0	0	0	0
76355	26	A	CAT scan for localization	1.65	1.65	XXX	0	0	0	0	0
76355	TC	A	CAT scan for localization	7.87	7.87	XXX	0	0	0	0	0
76360		A	CAT scan for needle	9.45	9.45	XXX	0	0	0	0	0
76360	26	A	CAT scan for needle	1.58	1.58	XXX	0	0	0	0	0
76360	TC	A	CAT scan for needle	7.87	7.87	XXX	0	0	0	0	0
76365		A	CAT scan for cyst	9.45	9.45	XXX	0	0	0	0	0
76365	26	A	CAT scan for cyst	1.58	1.58	XXX	0	0	0	0	0
76365	TC	A	CAT scan for cyst	7.87	7.87	XXX	0	0	0	0	0
76370		A	CAT scan for therapy	3.99	3.99	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
76370	26	A	CAT scan for therapy	1.17	1.17	XXX	0	0	0	0	0
76370	TC	A	CAT scan for therapy	2.81	2.81	XXX	0	0	0	0	0
76375		A	3-dimensional/holograph	3.59	3.59	XXX	0	0	0	0	0
76375	26	A	3-dimensional/holograph	0.22	0.22	XXX	0	0	0	0	0
76375	TC	A	3-dimensional/holograph	3.37	3.37	XXX	0	0	0	0	0
76380		A	CAT scan follow-up	4.70	4.70	XXX	0	0	0	0	0
76380	26	A	CAT scan follow-up	1.35	1.35	XXX	0	0	0	0	0
76380	TC	A	CAT scan follow-up	3.34	3.34	XXX	0	0	0	0	0

(16) Diagnostic radiology, other procedures:

76390		A	Magnetic spectroscopy	12.65	12.65	XXX	0	0	0	0	0
76390	26	A	Magnetic spectroscopy	1.96	1.96	XXX	0	0	0	0	0
76390	TC	A	Magnetic spectroscopy	10.69	10.69	XXX	0	0	0	0	0
76400		A	Magnetic image	12.89	12.89	XXX	0	0	0	0	0
76400	26	A	Magnetic image	2.21	2.21	XXX	0	0	0	0	0
76400	TC	A	Magnetic image	10.69	10.69	XXX	0	0	0	0	0
76499		C	Radiographic procedure	0.00	0.00	XXX	0	0	0	0	0
76499	26	C	Radiographic procedure	0.00	0.00	XXX	0	0	0	0	0
76499	TC	C	Radiographic procedure	0.00	0.00	XXX	0	0	0	0	0

(17) Diagnostic ultrasound, head and neck:

76506		A	Echo exam of head	2.23	2.23	XXX	0	0	0	0	0
76506	26	A	Echo exam of head	0.87	0.87	XXX	0	0	0	0	0
76506	TC	A	Echo exam of head	1.35	1.35	XXX	0	0	0	0	0
76511		A	Echo exam of eye	2.31	2.31	XXX	0	3	0	0	0
76511	26	A	Echo exam of eye	1.12	1.12	XXX	0	3	0	0	0
76511	TC	A	Echo exam of eye	1.19	1.19	XXX	0	3	0	0	0
76512		A	Echo exam of eye	2.37	2.37	XXX	0	3	0	0	0
76512	26	A	Echo exam of eye	0.92	0.92	XXX	0	3	0	0	0
76512	TC	A	Echo exam of eye	1.46	1.46	XXX	0	3	0	0	0
76513		A	Echo exam of eye	2.37	2.37	XXX	0	3	0	0	0
76513	26	A	Echo exam of eye	0.92	0.92	XXX	0	3	0	0	0
76513	TC	A	Echo exam of eye	1.46	1.46	XXX	0	3	0	0	0
76516		A	Echo exam of eye	1.95	1.95	XXX	0	2	0	0	0
76516	26	A	Echo exam of eye	0.75	0.75	XXX	0	2	0	0	0
76516	TC	A	Echo exam of eye	1.19	1.19	XXX	0	2	0	0	0
76519		A	Echo exam of eye	1.95	1.95	XXX	0	2	0	0	0
76519	26	A	Echo exam of eye	0.75	0.75	XXX	0	3	0	0	0
76519	TC	A	Echo exam of eye	1.19	1.19	XXX	0	2	0	0	0
76529		A	Echo exam of eye	2.10	2.10	XXX	0	3	0	0	0
76529	26	A	Echo exam of eye	0.79	0.79	XXX	0	3	0	0	0
76529	TC	A	Echo exam of eye	1.31	1.31	XXX	0	3	0	0	0
76536		A	Echo exam of head, neck	2.14	2.14	XXX	0	0	0	0	0
76536	26	A	Echo exam of head, neck	0.78	0.78	XXX	0	0	0	0	0
76536	TC	A	Echo exam of head, neck	1.35	1.35	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(18) Diagnostic ultrasound, chest:											
76604		A	Echo exam of chest	2.01	2.01	XXX	0	0	0	0	0
76604	26	A	Echo exam of chest	0.77	0.77	XXX	0	0	0	0	0
76604	TC	A	Echo exam of chest	1.24	1.24	XXX	0	0	0	0	0
76645		A	Echo exam of breasts	1.76	1.76	XXX	0	2	0	0	0
76645	26	A	Echo exam of breasts	0.75	0.75	XXX	0	2	0	0	0
76645	TC	A	Echo exam of breasts	1.00	1.00	XXX	0	2	0	0	0
(19) Diagnostic ultrasound, abdomen and retroperitoneum:											
76700		A	Echo exam of abdomen	3.00	3.00	XXX	0	0	0	0	0
76700	26	A	Echo exam of abdomen	1.12	1.12	XXX	0	0	0	0	0
76700	TC	A	Echo exam of abdomen	1.88	1.88	XXX	0	0	0	0	0
76705		A	Echo exam of abdomen	2.17	2.17	XXX	0	0	0	0	0
76705	26	A	Echo exam of abdomen	0.82	0.82	XXX	0	0	0	0	0
76705	TC	A	Echo exam of abdomen	1.35	1.35	XXX	0	0	0	0	0
76770		A	Echo exam of abdomen	2.91	2.91	XXX	0	0	0	0	0
76770	26	A	Echo exam of abdomen	1.03	1.03	XXX	0	0	0	0	0
76770	TC	A	Echo exam of abdomen	1.88	1.88	XXX	0	0	0	0	0
76775		A	Echo exam of abdomen	2.16	2.16	XXX	0	0	0	0	0
76775	26	A	Echo exam of abdomen	0.81	0.81	XXX	0	0	0	0	0
76775	TC	A	Echo exam of abdomen	1.35	1.35	XXX	0	0	0	0	0
76778		A	Echo exam of kidney	2.91	2.91	XXX	0	0	0	0	0
76778	26	A	Echo exam of kidney	1.03	1.03	XXX	0	0	0	0	0
76778	TC	A	Echo exam of kidney	1.88	1.88	XXX	0	0	0	0	0
(20) Diagnostic ultrasound, spinal canal:											
76800		A	Echo exam of spinal canal	2.91	2.91	XXX	0	0	0	0	0
76800	26	A	Echo exam of spinal canal	1.55	1.55	XXX	0	0	0	0	0
76800	TC	A	Echo exam of spinal canal	1.35	1.35	XXX	0	0	0	0	0
(21) Diagnostic ultrasound, pelvis:											
76805		A	Echo of pregnant uterus	3.38	3.38	XXX	0	0	0	0	0
76805	26	A	Echo of pregnant uterus	1.37	1.37	XXX	0	0	0	0	0
76805	TC	A	Echo of pregnant uterus	2.00	2.00	XXX	0	0	0	0	0
76810		A	Echo of pregnant uterus	6.71	6.71	XXX	0	0	0	0	0
76810	26	A	Echo of pregnant uterus	2.71	2.71	XXX	0	0	0	0	0
76810	TC	A	Echo of pregnant uterus	4.00	4.00	XXX	0	0	0	0	0
76815		A	Echo of pregnant uterus	2.26	2.26	XXX	0	0	0	0	0
76815	26	A	Echo of pregnant uterus	0.90	0.90	XXX	0	0	0	0	0
76815	TC	A	Echo of pregnant uterus	1.35	1.35	XXX	0	0	0	0	0
76816		A	Echo exam follow-up	1.85	1.85	XXX	0	0	0	0	0
76816	26	A	Echo exam follow-up	0.79	0.79	XXX	0	0	0	0	0
76816	TC	A	Echo exam follow-up	1.06	1.06	XXX	0	0	0	0	0
76818		A	Fetal biophysical profile	2.61	2.61	XXX	0	0	0	0	0
76818	26	A	Fetal biophysical profile	1.06	1.06	XXX	0	0	0	0	0
76818	TC	A	Fetal biophysical profile	1.54	1.54	XXX	0	0	0	0	0
76825		A	Echo exam of fetus	3.76	3.76	XXX	0	0	0	0	0
76825	26	A	Echo exam of fetus	1.88	1.88	XXX	0	0	0	0	0
76825	TC	A	Echo exam of fetus	1.88	1.88	XXX	0	0	0	0	0
76826		A	Echo exam of fetus	2.11	2.11	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
76826	26	A	Echo exam of fetus	1.44	1.44	XXX	0	0	0	0	0
76826	TC	A	Echo exam of fetus	0.67	0.67	XXX	0	0	0	0	0
76827		A	Echo exam of fetus	2.83	2.83	XXX	0	0	0	0	0
76827	26	A	Echo exam of fetus	1.17	1.17	XXX	0	0	0	0	0
76827	TC	A	Echo exam of fetus	1.66	1.66	XXX	0	0	0	0	0
76828		A	Echo exam of fetus	1.86	1.86	XXX	0	0	0	0	0
76828	26	A	Echo exam of fetus	0.79	0.79	XXX	0	0	0	0	0
76828	TC	A	Echo exam of fetus	1.07	1.07	XXX	0	0	0	0	0
76830		A	Echo exam, transvaginal	2.42	2.42	XXX	0	0	0	0	0
76830	26	A	Echo exam, transvaginal	0.96	0.96	XXX	0	0	0	0	0
76830	TC	A	Echo exam, transvaginal	1.46	1.46	XXX	0	0	0	0	0
76831		A	Echo exam of uterus	2.45	2.45	XXX	0	0	0	0	0
76831	26	A	Echo exam of uterus	0.99	0.99	XXX	0	0	0	0	0
76831	TC	A	Echo exam of uterus	1.46	1.46	XXX	0	0	0	0	0
76856		A	Echo exam of pelvis	2.42	2.42	XXX	0	0	0	0	0
76856	26	A	Echo exam of pelvis	0.96	0.96	XXX	0	0	0	0	0
76856	TC	A	Echo exam of pelvis	1.46	1.46	XXX	0	0	0	0	0
76857		A	Echo exam of pelvis	1.53	1.53	XXX	0	0	0	0	0
76857	26	A	Echo exam of pelvis	0.53	0.53	XXX	0	0	0	0	0
76857	TC	A	Echo exam of pelvis	1.00	1.00	XXX	0	0	0	0	0

(22) Diagnostic ultrasound, genitalia:

76870		A	Echo exam of scrotum	2.34	2.34	XXX	0	0	0	0	0
76870	26	A	Echo exam of scrotum	0.88	0.88	XXX	0	0	0	0	0
76870	TC	A	Echo exam of scrotum	1.46	1.46	XXX	0	0	0	0	0
76872		A	Echo exam of transrectal	2.42	2.42	XXX	0	0	0	0	0
76872	26	A	Echo exam of transrectal	0.96	0.96	XXX	0	0	0	0	0
76872	TC	A	Echo exam of transrectal	1.46	1.46	XXX	0	0	0	0	0

(23) Diagnostic ultrasound, extremities:

76880		A	Echo exam of extremity	2.17	2.17	XXX	0	0	0	0	0
76880	26	A	Echo exam of extremity	0.82	0.82	XXX	0	0	0	0	0
76880	TC	A	Echo exam of extremity	1.35	1.35	XXX	0	0	0	0	0
76885		A	Echo exam of infant	2.46	2.46	XXX	0	0	0	0	0
76885	26	A	Echo exam of infant	1.01	1.01	XXX	0	0	0	0	0
76885	TC	A	Echo exam of infant	1.46	1.46	XXX	0	0	0	0	0
76886		A	Echo exam of infant	2.20	2.20	XXX	0	0	0	0	0
76886	26	A	Echo exam of infant	0.85	0.85	XXX	0	0	0	0	0
76886	TC	A	Echo exam of infant	1.35	1.35	XXX	0	0	0	0	0

(24) Diagnostic ultrasound, ultrasonic guidance procedures:

76930		A	Echo guide, pericardium	2.39	2.39	XXX	0	0	0	0	0
76930	26	A	Echo guide, pericardium	0.94	0.94	XXX	0	0	0	0	0
76930	TC	A	Echo guide, pericardium	1.46	1.46	XXX	0	0	0	0	0
76932		A	Echo guide, biopsy	2.39	2.39	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
76932	26	A	Echo guide, biopsy	0.94	0.94	XXX	0	0	0	0	0
76932	TC	A	Echo guide, biopsy	1.46	1.46	XXX	0	0	0	0	0
76934		A	Echo guide, puncture	2.39	2.39	XXX	0	0	0	0	0
76934	26	A	Echo guide, puncture	0.94	0.94	XXX	0	0	0	0	0
76934	TC	A	Echo guide, puncture	1.46	1.46	XXX	0	0	0	0	0
76936		A	Echo guide, repair	9.06	9.06	XXX	0	0	0	0	0
76936	26	A	Echo guide, repair	3.06	3.06	XXX	0	0	0	0	0
76936	TC	A	Echo guide, repair	6.01	6.01	XXX	0	0	0	0	0
76938		A	Echo exam, cyst	2.39	2.39	XXX	0	0	0	0	0
76938	26	A	Echo exam, cyst	0.94	0.94	XXX	0	0	0	0	0
76938	TC	A	Echo exam, cyst	1.46	1.46	XXX	0	0	0	0	0
76941		A	Echo guide, fetal	3.32	3.32	XXX	0	0	0	0	0
76941	26	A	Echo guide, fetal	1.86	1.86	XXX	0	0	0	0	0
76941	TC	A	Echo guide, fetal	1.46	1.46	XXX	0	0	0	0	0
76942		A	Echo guide, fetal	2.39	2.39	XXX	0	0	0	0	0
76942	26	A	Echo guide, fetal	0.94	0.94	XXX	0	0	0	0	0
76942	TC	A	Echo guide, fetal	1.46	1.46	XXX	0	0	0	0	0
76945		A	Echo guide, villus	2.71	2.71	XXX	0	0	0	0	0
76945	26	A	Echo guide, villus	1.25	1.25	XXX	0	0	0	0	0
76945	TC	A	Echo guide, villus	1.46	1.46	XXX	0	0	0	0	0
76946		A	Echo guide, amniocentesis	1.98	1.98	XXX	0	0	0	0	0
76946	26	A	Echo guide, amniocentesis	0.53	0.53	XXX	0	0	0	0	0
76946	TC	A	Echo guide, amniocentesis	1.46	1.46	XXX	0	0	0	0	0
76948		A	Echo guide, ova	1.98	1.98	XXX	0	0	0	0	0
76948	26	A	Echo guide, ova	0.53	0.53	XXX	0	0	0	0	0
76948	TC	A	Echo guide, ova	1.46	1.46	XXX	0	0	0	0	0
76950		A	Echo guide radiotherapy	2.05	2.05	XXX	0	0	0	0	0
76950	26	A	Echo guide radiotherapy	0.81	0.81	XXX	0	0	0	0	0
76950	TC	A	Echo guide radiotherapy	1.24	1.24	XXX	0	0	0	0	0
76960		A	Echo guide radiotherapy	2.05	2.05	XXX	0	0	0	0	0
76960	26	A	Echo guide radiotherapy	0.81	0.81	XXX	0	0	0	0	0
76960	TC	A	Echo guide radiotherapy	1.24	1.24	XXX	0	0	0	0	0
76965		A	Echo guide radiotherapy	8.05	8.05	XXX	0	0	0	0	0
76965	26	A	Echo guide radiotherapy	2.74	2.74	XXX	0	0	0	0	0
76965	TC	A	Echo guide radiotherapy	5.31	5.31	XXX	0	0	0	0	0

(25) Diagnostic ultrasound, other procedures:

76970		A	Ultrasound follow-up	1.56	1.56	XXX	0	0	0	0	0
76970	26	A	Ultrasound follow-up	0.55	0.55	XXX	0	0	0	0	0
76970	TC	A	Ultrasound follow-up	1.00	1.00	XXX	0	0	0	0	0
76975		A	GI endoscopic ultrasound	2.55	2.55	XXX	0	0	0	0	0
76975	26	A	GI endoscopic ultrasound	1.09	1.09	XXX	0	0	0	0	0
76975	TC	A	GI endoscopic ultrasound	1.46	1.46	XXX	0	0	0	0	0
76986		A	Echo exam at surgery	4.15	4.15	XXX	0	0	0	0	0
76986	26	A	Echo exam at surgery	1.65	1.65	XXX	0	0	0	0	0
76986	TC	A	Echo exam at surgery	2.51	2.51	XXX	0	0	0	0	0
76999		C	Echo exam procedure	0.00	0.00	XXX	0	0	0	0	0
76999	26	C	Echo exam procedure	0.00	0.00	XXX	0	0	0	0	0
76999	TC	C	Echo exam procedure	0.00	0.00	XXX	0	0	0	0	0

(26) Radiation oncology, clinical treatment planning:

77261		A	Radiation therapy	1.91	1.91	XXX	0	0	0	0	0
77262		A	Radiation therapy	2.90	2.90	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
77263		A	Radiation therapy	4.31	4.31	XXX	0	0	0	0	0
77280		A	Set radiation therapy	4.29	4.29	XXX	0	0	0	0	0
77280	26	A	Set radiation therapy	0.97	0.97	XXX	0	0	0	0	0
77280	TC	A	Set radiation therapy	3.31	3.31	XXX	0	0	0	0	0
77285		A	Set radiation therapy	6.75	6.75	XXX	0	0	0	0	0
77285	26	A	Set radiation therapy	1.44	1.44	XXX	0	0	0	0	0
77285	TC	A	Set radiation therapy	5.32	5.32	XXX	0	0	0	0	0
77290		A	Set radiation therapy	8.36	8.36	XXX	0	0	0	0	0
77290	26	A	Set radiation therapy	2.15	2.15	XXX	0	0	0	0	0
77290	TC	A	Set radiation therapy	6.20	6.20	XXX	0	0	0	0	0
77295		A	Set radiation therapy	32.92	32.92	XXX	0	0	0	0	0
77295	26	A	Set radiation therapy	6.27	6.27	XXX	0	0	0	0	0
77295	TC	A	Set radiation therapy	26.65	26.65	XXX	0	0	0	0	0
77299		C	Radiation therapy	0.00	0.00	XXX	0	0	0	0	0
77299	26	C	Radiation therapy	0.00	0.00	XXX	0	0	0	0	0
77299	TC	C	Radiation therapy	0.00	0.00	XXX	0	0	0	0	0

(27) Radiation oncology, medical radiation physics, dosimetry, treatment devices, and special services:

77300		A	Radiation therapy	2.14	2.14	XXX	0	0	0	0	0
77300	26	A	Radiation therapy	0.86	0.86	XXX	0	0	0	0	0
77300	TC	A	Radiation therapy	1.28	1.28	XXX	0	0	0	0	0
77305		A	Radiation therapy	2.75	2.75	XXX	0	0	0	0	0
77305	26	A	Radiation therapy	0.97	0.97	XXX	0	0	0	0	0
77305	TC	A	Radiation therapy	1.78	1.78	XXX	0	0	0	0	0
77310		A	Radiation therapy	3.66	3.66	XXX	0	0	0	0	0
77310	26	A	Radiation therapy	1.44	1.44	XXX	0	0	0	0	0
77310	TC	A	Radiation therapy	2.23	2.23	XXX	0	0	0	0	0
77315		A	Radiation therapy	4.69	4.69	XXX	0	0	0	0	0
77315	26	A	Radiation therapy	2.15	2.15	XXX	0	0	0	0	0
77315	TC	A	Radiation therapy	2.54	2.54	XXX	0	0	0	0	0
77321		A	Radiation therapy	5.16	5.16	XXX	0	0	0	0	0
77321	26	A	Radiation therapy	1.31	1.31	XXX	0	0	0	0	0
77321	TC	A	Radiation therapy	3.85	3.85	XXX	0	0	0	0	0
77326		A	Radiation therapy	3.54	3.54	XXX	0	0	0	0	0
77326	26	A	Radiation therapy	1.28	1.28	XXX	0	0	0	0	0
77326	TC	A	Radiation therapy	2.26	2.26	XXX	0	0	0	0	0
77327		A	Radiation therapy	5.22	5.22	XXX	0	0	0	0	0
77327	26	A	Radiation therapy	1.91	1.91	XXX	0	0	0	0	0
77327	TC	A	Radiation therapy	3.31	3.31	XXX	0	0	0	0	0
77328		A	Radiation therapy	7.61	7.61	XXX	0	0	0	0	0
77328	26	A	Radiation therapy	2.87	2.87	XXX	0	0	0	0	0
77328	TC	A	Radiation therapy	4.73	4.73	XXX	0	0	0	0	0
77331		A	Special radiation	1.68	1.68	XXX	0	0	0	0	0
77331	26	A	Special radiation	1.20	1.20	XXX	0	0	0	0	0
77331	TC	A	Special radiation	0.48	0.48	XXX	0	0	0	0	0
77332		A	Radiation treatment	2.03	2.03	XXX	0	0	0	0	0
77332	26	A	Radiation treatment	0.75	0.75	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
77332	TC	A	Radiation treatment	1.28	1.28	XXX	0	0	0	0	0
77333		A	Radiation treatment	2.98	2.98	XXX	0	0	0	0	0
77333	26	A	Radiation treatment	1.16	1.16	XXX	0	0	0	0	0
77333	TC	A	Radiation treatment	1.81	1.81	XXX	0	0	0	0	0
77334		A	Radiation treatment	4.79	4.79	XXX	0	0	0	0	0
77334	26	A	Radiation treatment	1.69	1.69	XXX	0	0	0	0	0
77334	TC	A	Radiation treatment	3.10	3.10	XXX	0	0	0	0	0
77336		A	Radiation physics	2.84	2.84	XXX	0	0	0	0	0
77370		A	Radiation physics	3.33	3.33	XXX	0	0	0	0	0
77399		C	External radiation	0.00	0.00	XXX	0	0	0	0	0
77399	26	C	External radiation	0.00	0.00	XXX	0	0	0	0	0
77399	TC	C	External radiation	0.00	0.00	XXX	0	0	0	0	0

(28) Radiation oncology, radiation treatment delivery:

77401		A	Radiation treatment	1.69	1.69	XXX	0	0	0	0	0
77402		A	Radiation treatment	1.69	1.69	XXX	0	0	0	0	0
77403		A	Radiation treatment	1.69	1.69	XXX	0	0	0	0	0
77404		A	Radiation treatment	1.69	1.69	XXX	0	0	0	0	0
77406		A	Radiation treatment	1.69	1.69	XXX	0	0	0	0	0
77407		A	Radiation treatment	1.99	1.99	XXX	0	0	0	0	0
77408		A	Radiation treatment	1.99	1.99	XXX	0	0	0	0	0
77409		A	Radiation treatment	1.99	1.99	XXX	0	0	0	0	0
77411		A	Radiation treatment	1.99	1.99	XXX	0	0	0	0	0
77412		A	Radiation treatment	2.23	2.23	XXX	0	0	0	0	0
77413		A	Radiation treatment	2.23	2.23	XXX	0	0	0	0	0
77414		A	Radiation treatment	2.23	2.23	XXX	0	0	0	0	0
77416		A	Radiation treatment	2.23	2.23	XXX	0	0	0	0	0
77417		A	Radiology port films	0.56	0.56	XXX	0	0	0	0	0

(29) Radiation oncology, clinical treatment management:

77419		A	Weekly radiation	4.95	4.95	XXX	0	0	0	0	0
77420		A	Weekly radiation	2.22	2.22	XXX	0	0	0	0	0
77425		A	Weekly radiation	3.37	3.37	XXX	0	0	0	0	0
77430		A	Weekly radiation	4.95	4.95	XXX	0	0	0	0	0
77431		A	Radiation therapy	2.49	2.49	XXX	0	0	0	0	0
77432		A	Stereotactic radiation	12.19	12.19	XXX	0	0	0	0	0
77470		A	Special radiation	13.50	13.50	XXX	0	0	0	0	0
77470	26	A	Special radiation	2.87	2.87	XXX	0	0	0	0	0
77470	TC	A	Special radiation	10.62	10.62	XXX	0	0	0	0	0
77499		C	Radiation therapy	0.00	0.00	XXX	0	0	0	0	0
77499	26	C	Radiation therapy	0.00	0.00	XXX	0	0	0	0	0
77499	TC	C	Radiation therapy	0.00	0.00	XXX	0	0	0	0	0

(30) Radiation oncology, hyperthermia:

77600		R	Hyperthermia treatment	5.05	5.05	ZZZ	0	0	0	0	0
77600	26	R	Hyperthermia treatment	2.15	2.15	ZZZ	0	0	0	0	0
77600	TC	R	Hyperthermia treatment	2.90	2.90	ZZZ	0	0	0	0	0
77605		R	Hyperthermia treatment	6.75	6.75	ZZZ	0	0	0	0	0
77605	26	R	Hyperthermia treatment	2.87	2.87	ZZZ	0	0	0	0	0
77605	TC	R	Hyperthermia treatment	3.88	3.88	ZZZ	0	0	0	0	0
77610		R	Hyperthermia treatment	5.05	5.05	ZZZ	0	0	0	0	0
77610	26	R	Hyperthermia treatment	2.15	2.15	ZZZ	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
77610	TC	R	Hyperthermia treatment	2.90	2.90	ZZZ	0	0	0	0	0
77615		R	Hyperthermia treatment	6.75	6.75	ZZZ	0	0	0	0	0
77615	26	R	Hyperthermia treatment	2.87	2.87	ZZZ	0	0	0	0	0
77615	TC	R	Hyperthermia treatment	3.88	3.88	ZZZ	0	0	0	0	0

(31) Radiation oncology, clinical intracavitary hyperthermia:

77620		R	Hyperthermia treatment	5.05	5.05	ZZZ	0	0	0	0	0
77620	26	R	Hyperthermia treatment	2.15	2.15	ZZZ	0	0	0	0	0
77620	TC	R	Hyperthermia treatment	2.90	2.90	ZZZ	0	0	0	0	0

(32) Radiation oncology, clinical brachytherapy:

77750		A	Infuse radioelement	7.87	7.87	090	0	0	0	0	0
77750	26	A	Infuse radioelement	6.60	6.60	090	0	0	0	0	0
77750	TC	A	Infuse radioelement	1.27	1.27	090	0	0	0	0	0
77761		A	Radioelement application	7.52	7.52	090	0	0	0	0	0
77761	26	A	Radioelement application	5.12	5.12	090	0	0	0	0	0
77761	TC	A	Radioelement application	2.40	2.40	090	0	0	0	0	0
77762		A	Radioelement application	11.14	11.14	090	0	0	0	0	0
77762	26	A	Radioelement application	7.69	7.69	090	0	0	0	0	0
77762	TC	A	Radioelement application	3.44	3.44	090	0	0	0	0	0
77763		A	Radioelement application	15.80	15.80	090	0	0	0	0	0
77763	26	A	Radioelement application	11.51	11.51	090	0	0	0	0	0
77763	TC	A	Radioelement application	4.28	4.28	090	0	0	0	0	0
77776		A	Radioelement application	8.50	8.50	XXX	0	0	0	0	0
77776	26	A	Radioelement application	6.42	6.42	XXX	0	0	0	2	0
77776	TC	A	Radioelement application	2.08	2.08	XXX	0	0	0	0	0
77777		A	Radioelement application	14.11	14.11	090	0	0	0	0	0
77777	26	A	Radioelement application	10.06	10.06	090	0	0	0	2	0
77777	TC	A	Radioelement application	4.05	4.05	090	0	0	0	0	0
77778		A	Radioelement application	19.95	19.95	090	0	0	0	0	0
77778	26	A	Radioelement application	15.06	15.06	090	0	0	0	2	0
77778	TC	A	Radioelement application	4.89	4.89	090	0	0	0	0	0
77781		A	High intensity	21.59	21.59	090	0	0	0	0	0
77781	26	A	High intensity	2.23	2.23	090	0	0	0	0	0
77781	TC	A	High intensity	9.36	9.36	090	0	0	0	0	0
77782		A	High intensity	22.72	22.72	090	0	0	0	0	0
77782	26	A	High intensity	3.36	3.36	090	0	0	0	0	0
77782	TC	A	High intensity	19.36	19.36	090	0	0	0	0	0
77783		A	High intensity	24.37	24.37	090	0	0	0	0	0
77783	26	A	High intensity	5.01	5.01	090	0	0	0	0	0
77783	TC	A	High intensity	19.36	19.36	090	0	0	0	0	0
77784		A	High intensity	26.91	26.91	090	0	0	0	0	0
77784	26	A	High intensity	7.55	7.55	090	0	0	0	0	0
77784	TC	A	High intensity	19.36	19.36	090	0	0	0	0	0
77789		A	Radioelement application	1.93	1.93	090	0	0	0	0	0
77789	26	A	Radioelement application	1.50	1.50	090	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
77789	TC	A	Radioelement application	0.43	0.43	090	0	0	0	0	0
77790		A	Radioelement handling	1.92	1.92	XXX	0	0	0	0	0
77790	26	A	Radioelement handling	1.44	1.44	XXX	0	0	0	0	0
77790	TC	A	Radioelement handling	0.48	0.48	XXX	0	0	0	0	0
77799		C	Radium/radioisotope	0.00	0.00	XXX	0	0	0	0	0
77799	26	C	Radium/radioisotope	0.00	0.00	XXX	0	0	0	0	0
77799	TC	C	Radium/radioisotope	0.00	0.00	XXX	0	0	0	0	0

(33) Nuclear medicine, diagnostic:

78000		A	Thyroid, single	1.19	1.19	XXX	0	0	0	0	0
78000	26	A	Thyroid, single	0.26	0.26	XXX	0	0	0	0	0
78000	TC	A	Thyroid, single	0.92	0.92	XXX	0	0	0	0	0
78001		A	Thyroid, multiple	1.60	1.60	XXX	0	0	0	0	0
78001	26	A	Thyroid, multiple	0.36	0.36	XXX	0	0	0	0	0
78001	TC	A	Thyroid, multiple	1.24	1.24	XXX	0	0	0	0	0
78003		A	Thyroid, suppression	1.38	1.38	XXX	0	0	0	0	0
78003	26	A	Thyroid, suppression	0.46	0.46	XXX	0	0	0	0	0
78003	TC	A	Thyroid, suppression	0.92	0.92	XXX	0	0	0	0	0
78006		A	Thyroid imaging	2.95	2.95	XXX	0	0	0	0	0
78006	26	A	Thyroid imaging	0.67	0.67	XXX	0	0	0	0	0
78006	TC	A	Thyroid imaging	2.28	2.28	XXX	0	0	0	0	0
78007		A	Thyroid imaging	3.15	3.15	XXX	0	0	0	0	0
78007	26	A	Thyroid imaging	0.69	0.69	XXX	0	0	0	0	0
78007	TC	A	Thyroid imaging	2.45	2.45	XXX	0	0	0	0	0
78010		A	Thyroid imaging	2.27	2.27	XXX	0	0	0	0	0
78010	26	A	Thyroid imaging	0.53	0.53	XXX	0	0	0	0	0
78010	TC	A	Thyroid imaging	1.73	1.73	XXX	0	0	0	0	0
78011		A	Thyroid imaging	2.92	2.92	XXX	0	0	0	0	0
78011	26	A	Thyroid imaging	0.63	0.63	XXX	0	0	0	0	0
78011	TC	A	Thyroid imaging	2.29	2.29	XXX	0	0	0	0	0
78015		A	Thyroid metastases image	3.39	3.39	XXX	0	0	0	0	0
78015	26	A	Thyroid metastases image	0.94	0.94	XXX	0	0	0	0	0
78015	TC	A	Thyroid metastases image	2.45	2.45	XXX	0	0	0	0	0
78016		A	Thyroid metastases image	4.47	4.47	XXX	0	0	0	0	0
78016	26	A	Thyroid metastases image	1.14	1.14	XXX	0	0	0	0	0
78016	TC	A	Thyroid metastases image	3.32	3.32	XXX	0	0	0	0	0
78017		A	Thyroid metastases image	4.75	4.75	XXX	0	0	0	0	0
78017	26	A	Thyroid metastases image	1.20	1.20	XXX	0	0	0	0	0
78017	TC	A	Thyroid metastases image	3.55	3.55	XXX	0	0	0	0	0
78018		A	Thyroid metastases image	6.49	6.49	XXX	0	0	0	0	0
78018	26	A	Thyroid, met imaging	1.31	1.31	XXX	0	0	0	0	0
78018	TC	A	Thyroid, met imaging	5.18	5.18	XXX	0	0	0	0	0
78070		A	Parathyroid nuclear	2.72	2.72	XXX	0	0	0	0	0
78070	26	A	Parathyroid nuclear	0.99	0.99	XXX	0	0	0	0	0
78070	TC	A	Parathyroid nuclear	1.73	1.73	XXX	0	0	0	0	0
78075		A	Adrenal nuclear	6.20	6.20	XXX	0	0	0	0	0
78075	26	A	Adrenal nuclear	1.03	1.03	XXX	0	0	0	0	0
78075	TC	A	Adrenal nuclear	5.18	5.18	XXX	0	0	0	0	0
78099		C	Endocrine, nuclear	0.00	0.00	XXX	0	0	0	0	0
78099	26	C	Endocrine, nuclear	0.00	0.00	XXX	0	0	0	0	0
78099	TC	C	Endocrine, nuclear	0.00	0.00	XXX	0	0	0	0	0

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Proposed Rules

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(34) Nuclear medicine, hematopoietic, reticuloendothelial and lymphatic system:											
78102		A	Bone marrow imaging	2.71	2.71	XXX	0	0	0	0	0
78102	26	A	Bone marrow imaging	0.76	0.76	XXX	0	0	0	0	0
78102	TC	A	Bone marrow imaging	1.95	1.95	XXX	0	0	0	0	0
78103		A	Bone marrow imaging	4.06	4.06	XXX	0	0	0	0	0
78103	26	A	Bone marrow imaging	1.04	1.04	XXX	0	0	0	0	0
78103	TC	A	Bone marrow imaging	3.02	3.02	XXX	0	0	0	0	0
78104		A	Bone marrow imaging	5.00	5.00	XXX	0	0	0	0	0
78104	26	A	Bone marrow imaging	1.11	1.11	XXX	0	0	0	0	0
78104	TC	A	Bone marrow imaging	3.89	3.89	XXX	0	0	0	0	0
78110		A	Plasma volume	1.17	1.17	XXX	0	0	0	0	0
78110	26	A	Plasma volume	0.26	0.26	XXX	0	0	0	0	0
78110	TC	A	Plasma volume	0.90	0.90	XXX	0	0	0	0	0
78111		A	Plasma volume	2.76	2.76	XXX	0	0	0	0	0
78111	26	A	Plasma volume	0.31	0.31	XXX	0	0	0	0	0
78111	TC	A	Plasma volume	2.45	2.45	XXX	0	0	0	0	0
78120		A	Red cell mass, single	1.98	1.98	XXX	0	0	0	0	0
78120	26	A	Red cell mass, single	0.33	0.33	XXX	0	0	0	0	0
78120	TC	A	Red cell mass, single	1.65	1.65	XXX	0	0	0	0	0
78121		A	Red cell mass, multiple	3.22	3.22	XXX	0	0	0	0	0
78121	26	A	Red cell mass, multiple	0.45	0.45	XXX	0	0	0	0	0
78121	TC	A	Red cell mass, multiple	2.77	2.77	XXX	0	0	0	0	0
78122		A	Whole blood volume	5.01	5.01	XXX	0	0	0	0	0
78122	26	A	Whole blood volume	0.62	0.62	XXX	0	0	0	0	0
78122	TC	A	Whole blood volume	4.40	4.40	XXX	0	0	0	0	0
78130		A	Red cell survival	3.57	3.57	XXX	0	0	0	0	0
78130	26	A	Red cell survival	0.85	0.85	XXX	0	0	0	0	0
78130	TC	A	Red cell survival	2.72	2.72	XXX	0	0	0	0	0
78135		A	Red cell survival	5.53	5.53	XXX	0	0	0	0	0
78135	26	A	Red cell survival	0.88	0.88	XXX	0	0	0	0	0
78135	TC	A	Red cell survival	4.65	4.65	XXX	0	0	0	0	0
78140		A	Red cell sequestration	4.60	4.60	XXX	0	0	0	0	0
78140	26	A	Red cell sequestration	0.85	0.85	XXX	0	0	0	0	0
78140	TC	A	Red cell sequestration	3.75	3.75	XXX	0	0	0	0	0
78160		A	Plasma iron turnover	3.95	3.95	XXX	0	0	0	0	0
78160	26	A	Plasma iron turnover	0.46	0.46	XXX	0	0	0	0	0
78160	TC	A	Plasma iron turnover	3.49	3.49	XXX	0	0	0	0	0
78162		A	Iron absorption	3.67	3.67	XXX	0	0	0	0	0
78162	26	A	Iron absorption	0.62	0.62	XXX	0	0	0	0	0
78162	TC	A	Iron absorption	3.05	3.05	XXX	0	0	0	0	0
78170		A	Red cell iron use	5.63	5.63	XXX	0	0	0	0	0
78170	26	A	Red cell iron use	0.56	0.56	XXX	0	0	0	0	0
78170	TC	A	Red cell iron use	5.06	5.06	XXX	0	0	0	0	0
78172		C	Total body iron	0.00	0.00	XXX	0	0	0	0	0
78172	26	A	Total body iron	0.74	0.74	XXX	0	0	0	0	0
78172	TC	C	Total body iron	0.00	0.00	XXX	0	0	0	0	0
78185		A	Spleen imaging	2.81	2.81	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
78185	26	A	Spleen imaging	0.55	0.55	XXX	0	0	0	0	0
78185	TC	A	Spleen imaging	2.26	2.26	XXX	0	0	0	0	0
78190		A	Platelet survival	6.95	6.95	XXX	0	0	0	0	0
78190	26	A	Platelet survival	1.49	1.49	XXX	0	0	0	0	0
78190	TC	A	Platelet survival	5.46	5.46	XXX	0	0	0	0	0
78191		A	Platelet survival	7.84	7.84	XXX	0	0	0	0	0
78191	26	A	Platelet survival	0.85	0.85	XXX	0	0	0	0	0
78191	TC	A	Platelet survival	6.99	6.99	XXX	0	0	0	0	0
78195		A	Lymph system imaging	5.31	5.31	XXX	0	0	0	0	0
78195	26	A	Lymph system imaging	1.43	1.43	XXX	0	0	0	0	0
78195	TC	A	Lymph system imaging	3.89	3.89	XXX	0	0	0	0	0
78199		C	Blood/lymph, nuclear	0.00	0.00	XXX	0	0	0	0	0
78199	26	C	Blood/lymph, nuclear	0.00	0.00	XXX	0	0	0	0	0
78199	TC	C	Blood/lymph, nuclear	0.00	0.00	XXX	0	0	0	0	0

(35) Nuclear medicine, gastrointestinal system:

78201		A	Liver imaging	2.86	2.86	XXX	0	0	0	0	0
78201	26	A	Liver imaging	0.60	0.60	XXX	0	0	0	0	0
78201	TC	A	Liver imaging	2.26	2.26	XXX	0	0	0	0	0
78202		A	Liver imaging	3.46	3.46	XXX	0	0	0	0	0
78202	26	A	Liver imaging	0.71	0.71	XXX	0	0	0	0	0
78202	TC	A	Liver imaging	2.75	2.75	XXX	0	0	0	0	0
78205		A	Liver imaging	6.63	6.63	XXX	0	0	0	0	0
78205	26	A	Liver imaging	0.99	0.99	XXX	0	0	0	0	0
78205	TC	A	Liver imaging	5.64	5.64	XXX	0	0	0	0	0
78215		A	Liver and spleen imaging	3.47	3.47	XXX	0	0	0	0	0
78215	26	A	Liver and spleen imaging	0.67	0.67	XXX	0	0	0	0	0
78215	TC	A	Liver and spleen imaging	2.80	2.80	XXX	0	0	0	0	0
78216		A	Liver and spleen imaging	4.11	4.11	XXX	0	0	0	0	0
78216	26	A	Liver and spleen imaging	0.79	0.79	XXX	0	0	0	0	0
78216	TC	A	Liver and spleen imaging	3.32	3.32	XXX	0	0	0	0	0
78220		A	Liver function study	4.22	4.22	XXX	0	0	0	0	0
78220	26	A	Liver function study	0.67	0.67	XXX	0	0	0	0	0
78220	TC	A	Liver function study	3.55	3.55	XXX	0	0	0	0	0
78223		A	Hepatobiliary imaging	4.66	4.66	XXX	0	0	0	0	0
78223	26	A	Hepatobiliary imaging	1.16	1.16	XXX	0	0	0	0	0
78223	TC	A	Hepatobiliary imaging	3.49	3.49	XXX	0	0	0	0	0
78230		A	Salivary gland imaging	2.70	2.70	XXX	0	0	0	0	0
78230	26	A	Salivary gland imaging	0.63	0.63	XXX	0	0	0	0	0
78230	TC	A	Salivary gland imaging	2.08	2.08	XXX	0	0	0	0	0
78231		A	Serial salivary imaging	3.75	3.75	XXX	0	0	0	0	0
78231	26	A	Serial salivary imaging	0.73	0.73	XXX	0	0	0	0	0
78231	TC	A	Serial salivary imaging	3.02	3.02	XXX	0	0	0	0	0
78232		A	Salivary gland study	4.03	4.03	XXX	0	0	0	0	0
78232	26	A	Salivary gland study	0.66	0.66	XXX	0	0	0	0	0
78232	TC	A	Salivary gland study	3.37	3.37	XXX	0	0	0	0	0
78258		A	Esophageal motion	3.78	3.78	XXX	0	0	0	0	0
78258	26	A	Esophageal motion	1.03	1.03	XXX	0	0	0	0	0
78258	TC	A	Esophageal motion	2.75	2.75	XXX	0	0	0	0	0
78261		A	Gastric mucosa imaging	4.88	4.88	XXX	0	0	0	0	0
78261	26	A	Gastric mucosa imaging	0.96	0.96	XXX	0	0	0	0	0
78261	TC	A	Gastric mucosa imaging	3.91	3.91	XXX	0	0	0	0	0
78262		A	Gastroesophageal study	5.00	5.00	XXX	0	0	0	0	0
78262	26	A	Gastroesophageal study	0.94	0.94	XXX	0	0	0	0	0

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(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
78262	TC	A	Gastroesophageal study	4.06	4.06	XXX	0	0	0	0	0
78264		A	Gastric emptying study	5.02	5.02	XXX	0	0	0	0	0
78264	26	A	Gastric emptying study	1.08	1.08	XXX	0	0	0	0	0
78264	TC	A	Gastric emptying study	3.93	3.93	XXX	0	0	0	0	0
78270		A	Vitamin B-12 absorption	1.76	1.76	XXX	0	0	0	0	0
78270	26	A	Vitamin B-12 absorption	0.28	0.28	XXX	0	0	0	0	0
78270	TC	A	Vitamin B-12 absorption	1.48	1.48	XXX	0	0	0	0	0
78271		A	Vitamin B-12 absorption	1.86	1.86	XXX	0	0	0	0	0
78271	26	A	Vitamin B-12 absorption	0.28	0.28	XXX	0	0	0	0	0
78271	TC	A	Vitamin B-12 absorption	1.57	1.57	XXX	0	0	0	0	0
78272		A	Vitamin B-12 absorption	2.60	2.60	XXX	0	0	0	0	0
78272	26	A	Vitamin B-12 absorption	0.38	0.38	XXX	0	0	0	0	0
78272	TC	A	Vitamin B-12 absorption	2.22	2.22	XXX	0	0	0	0	0
78278		A	Acute GI blood loss	6.02	6.02	XXX	0	0	0	0	0
78278	26	A	Acute GI blood loss	1.37	1.37	XXX	0	0	0	0	0
78278	TC	A	Acute GI blood loss	4.65	4.65	XXX	0	0	0	0	0
78282		C	GI protein loss	0.00	0.00	XXX	0	0	0	0	0
78282	26	A	GI protein loss	0.53	0.53	XXX	0	0	0	0	0
78282	TC	C	GI protein loss	0.00	0.00	XXX	0	0	0	0	0
78290		A	Meckel's divert exam	3.84	3.84	XXX	0	0	0	0	0
78290	26	A	Meckel's divert exam	0.94	0.94	XXX	0	0	0	0	0
78290	TC	A	Meckel's divert exam	2.90	2.90	XXX	0	0	0	0	0
78291		A	Shunt patency test	4.13	4.13	XXX	0	0	0	0	0
78291	26	A	Shunt patency test	1.21	1.21	XXX	0	0	0	0	0
78291	TC	A	Shunt patency test	2.92	2.92	XXX	0	0	0	0	0
78299		C	GI nuclear procedure	0.00	0.00	XXX	0	0	0	0	0
78299	26	C	GI nuclear procedure	0.00	0.00	XXX	0	0	0	0	0
78299	TC	C	GI nuclear procedure	0.00	0.00	XXX	0	0	0	0	0

(36) Nuclear medicine, musculoskeletal system:

78300		A	Bone imaging, limited	3.24	3.24	XXX	0	0	0	0	0
78300	26	A	Bone imaging, limited	0.87	0.87	XXX	0	0	0	0	0
78300	TC	A	Bone imaging, limited	2.38	2.38	XXX	0	0	0	0	0
78305		A	Bone imaging, multiple	4.65	4.65	XXX	0	0	0	0	0
78305	26	A	Bone imaging, multiple	1.15	1.15	XXX	0	0	0	0	0
78305	TC	A	Bone imaging, multiple	3.49	3.49	XXX	0	0	0	0	0
78306		A	Bone imaging, whole body	5.27	5.27	XXX	2	0	0	0	0
78306	26	A	Bone imaging, whole body	1.19	1.19	XXX	2	0	0	0	0
78306	TC	A	Bone imaging, whole body	4.07	4.07	XXX	2	0	0	0	0
78315		A	Bone imaging, three	5.95	5.95	XXX	0	0	0	0	0
78315	26	A	Bone imaging, three	1.40	1.40	XXX	0	0	0	0	0
78315	TC	A	Bone imaging, three	4.56	4.56	XXX	0	0	0	0	0
78320		A	Bone imaging	7.06	7.06	XXX	2	0	0	0	0
78320	26	A	Bone imaging	1.43	1.43	XXX	2	0	0	0	0
78320	TC	A	Bone imaging	5.64	5.64	XXX	2	0	0	0	0
78350		A	Bone mineral, study	1.03	1.03	XXX	0	0	0	0	0
78350	26	A	Bone mineral, study	0.31	0.31	XXX	0	0	0	0	0

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Proposed Rules

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78350	TC	A	Bone mineral, study	0.72	0.72	XXX	0	0	0	0	0
78351		N	Bone mineral, dual	0.00	0.00	XXX	9	9	9	9	9
78399		C	Musculoskeletal procedure	0.00	0.00	XXX	0	0	0	0	0
78399	26	C	Musculoskeletal procedure	0.00	0.00	XXX	0	0	0	0	0
78399	TC	C	Musculoskeletal procedure	0.00	0.00	XXX	0	0	0	0	0

(37) Nuclear medicine, cardiovascular system:

78414		C	Nonimaging heart	0.00	0.00	XXX	0	0	0	0	0
78414	26	A	Nonimaging heart	0.62	0.62	XXX	0	0	0	0	0
78414	TC	C	Nonimaging heart	0.00	0.00	XXX	0	0	0	0	0
78428		A	Cardiac shunt imaging	3.24	3.24	XXX	0	0	0	0	0
78428	26	A	Cardiac shunt imaging	1.08	1.08	XXX	0	0	0	0	0
78428	TC	A	Cardiac shunt imaging	2.15	2.15	XXX	0	0	0	0	0
78445		A	Vascular flow imaging	2.47	2.47	XXX	0	0	0	0	0
78445	26	A	Vascular flow imaging	0.70	0.70	XXX	0	0	0	0	0
78445	TC	A	Vascular flow imaging	1.77	1.77	XXX	0	0	0	0	0
78455		A	Venous thrombosis study	4.81	4.81	XXX	0	0	0	0	0
78455	26	A	Venous thrombosis study	1.01	1.01	XXX	0	0	0	0	0
78455	TC	A	Venous thrombosis study	3.80	3.80	XXX	0	0	0	0	0
78457		A	Venous thrombosis imaging	3.60	3.60	XXX	0	0	0	0	0
78457	26	A	Venous thrombosis imaging	1.06	1.06	XXX	0	0	0	0	0
78457	TC	A	Venous thrombosis imaging	2.54	2.54	XXX	0	0	0	0	0
78458		A	Venous thrombosis imaging	5.07	5.07	XXX	0	2	0	0	0
78458	26	A	Venous thrombosis imaging	1.24	1.24	XXX	0	2	0	0	0
78458	TC	A	Venous thrombosis imaging	3.83	3.83	XXX	0	2	0	0	0
78459		I	Heart muscle imaging	0.00	0.00	XXX	9	9	9	9	9
78459	26	I	Heart muscle imaging	0.00	0.00	XXX	9	9	9	9	9
78459	TC	I	Heart muscle imaging	0.00	0.00	XXX	9	9	9	9	9
78460		A	Heart muscle blood	3.45	3.45	XXX	0	0	0	0	0
78460	26	A	Heart muscle blood	1.19	1.19	XXX	0	0	0	0	0
78460	TC	A	Heart muscle blood	2.26	2.26	XXX	0	0	0	0	0
78461		A	Heart muscle blood	6.19	6.19	XXX	0	0	0	0	0
78461	26	A	Heart muscle blood	1.68	1.68	XXX	0	0	0	0	0
78461	TC	A	Heart muscle blood	4.51	4.51	XXX	0	0	0	0	0
78464		A	Heart image	8.24	8.24	XXX	0	0	0	0	0
78464	26	A	Heart image	1.49	1.49	XXX	0	0	0	0	0
78464	TC	A	Heart image	6.75	6.75	XXX	0	0	0	0	0
78465		A	Heart image	3.25	3.25	XXX	0	0	0	0	0
78465	26	A	Heart image	2.01	2.01	XXX	0	0	0	0	0
78465	TC	A	Heart image	1.24	1.24	XXX	0	0	0	0	0
78466		A	Heart infarct image	3.47	3.47	XXX	0	0	0	0	0
78466	26	A	Heart infarct image	0.96	0.96	XXX	0	0	0	0	0
78466	TC	A	Heart infarct image	2.51	2.51	XXX	0	0	0	0	0
78468		A	Heart infarct image	4.59	4.59	XXX	0	0	0	0	0
78468	26	A	Heart infarct image	1.10	1.10	XXX	0	0	0	0	0
78468	TC	A	Heart infarct image	3.49	3.49	XXX	0	0	0	0	0
78469		A	Heart infarct image	6.25	6.25	XXX	0	0	0	0	0
78469	26	A	Heart infarct image	1.26	1.26	XXX	0	0	0	0	0
78469	TC	A	Heart infarct image	4.99	4.99	XXX	0	0	0	0	0
78472		A	Gated heart	6.61	6.61	XXX	0	0	0	0	0
78472	26	A	Gated heart	1.35	1.35	XXX	0	0	0	0	0
78472	TC	A	Gated heart	5.26	5.26	XXX	0	0	0	0	0
78473		A	Gated heart, multiple	9.89	9.89	XXX	0	0	0	0	0
78473	26	A	Gated heart, multiple	2.02	2.02	XXX	0	0	0	0	0

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78473	TC	A	Gated heart, multiple	7.87	7.87	XXX	0	0	0	0	0
78478		A	Heart wall motion	2.34	2.34	XXX	0	0	0	0	0
78478	26	A	Heart wall motion	0.86	0.86	XXX	0	0	0	0	0
78478	TC	A	Heart wall motion	1.48	1.48	XXX	0	0	0	0	0
78480		A	Heart function	2.34	2.34	XXX	0	0	0	0	0
78480	26	A	Heart function	0.86	0.86	XXX	0	0	0	0	0
78480	TC	A	Heart function	1.48	1.48	XXX	0	0	0	0	0
78481		A	Heart first pass	6.34	6.34	XXX	0	0	0	0	0
78481	26	A	Heart first pass	1.35	1.35	XXX	0	0	0	0	0
78481	TC	A	Heart first pass	4.99	4.99	XXX	0	0	0	0	0
78483		A	Heart first pass	9.52	9.52	XXX	0	0	0	0	0
78483	26	A	Heart first pass	2.02	2.02	XXX	0	0	0	0	0
78483	TC	A	Heart first pass	7.50	7.50	XXX	0	0	0	0	0
78491		I	Heart image	0.00	0.00	XXX	9	9	9	9	9
78491	26	I	Heart image	0.00	0.00	XXX	9	9	9	9	9
78491	TC	I	Heart image	0.00	0.00	XXX	9	9	9	9	9
78492		I	Heart image	0.00	0.00	XXX	9	9	9	9	9
78492	26	I	Heart image	0.00	0.00	XXX	9	9	9	9	9
78492	TC	I	Heart image	0.00	0.00	XXX	9	9	9	9	9
78499		C	Cardiovascular procedure	0.00	0.00	XXX	0	0	0	0	0
78499	26	C	Cardiovascular procedure	0.00	0.00	XXX	0	0	0	0	0
78499	TC	C	Cardiovascular procedure	0.00	0.00	XXX	0	0	0	0	0

(38) Nuclear medicine, respiratory system:

78580		A	Lung perfusion imaging	4.30	4.30	XXX	0	0	0	0	0
78580	26	A	Lung perfusion imaging	1.03	1.03	XXX	0	0	0	0	0
78580	TC	A	Lung perfusion imaging	3.27	3.27	XXX	0	0	0	0	0
78584		A	Lung V/Q imaging	4.42	4.42	XXX	0	0	0	0	0
78584	26	A	Lung V/Q imaging	1.37	1.37	XXX	0	0	0	0	0
78584	TC	A	Lung V/Q imaging	3.05	3.05	XXX	0	0	0	0	0
78585		A	Lung V/Q imaging	6.87	6.87	XXX	0	0	0	0	0
78585	26	A	Lung V/Q imaging	1.49	1.49	XXX	0	0	0	0	0
78585	TC	A	Lung V/Q imaging	5.37	5.37	XXX	0	0	0	0	0
78586		A	Aerosol lung imaging	3.03	3.03	XXX	0	0	0	0	0
78586	26	A	Aerosol lung imaging	0.55	0.55	XXX	0	0	0	0	0
78586	TC	A	Aerosol lung imaging	2.47	2.47	XXX	0	0	0	0	0
78587		A	Aerosol lung imaging	3.35	3.35	XXX	0	0	0	0	0
78587	26	A	Aerosol lung imaging	0.67	0.67	XXX	0	0	0	0	0
78587	TC	A	Aerosol lung imaging	2.67	2.67	XXX	0	0	0	0	0
78591		A	Vent imaging, 1 breath	3.27	3.27	XXX	0	0	0	0	0
78591	26	A	Vent imaging, 1 breath	0.55	0.55	XXX	0	0	0	0	0
78591	TC	A	Vent imaging, 1 breath	2.72	2.72	XXX	0	0	0	0	0
78593		A	Vent imaging, 1 pulse	3.97	3.97	XXX	0	0	0	0	0
78593	26	A	Vent imaging, 1 pulse	0.67	0.67	XXX	0	0	0	0	0
78593	TC	A	Vent imaging, 1 pulse	3.29	3.29	XXX	0	0	0	0	0
78594		A	Vent imaging, multiple	5.50	5.50	XXX	0	0	0	0	0
78594	26	A	Vent imaging, multiple	0.74	0.74	XXX	0	0	0	0	0

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Proposed Rules

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78594	TC	A	Vent imaging, multiple	4.75	4.75	XXX	0	0	0	0	0
78596		A	Lung differential	8.49	8.49	XXX	0	0	0	0	0
78596	26	A	Lung differential	1.74	1.74	XXX	0	0	0	0	0
78596	TC	A	Lung differential	6.75	6.75	XXX	0	0	0	0	0
78599		C	Respiratory, nuclear	0.00	0.00	XXX	0	0	0	0	0
78599	26	C	Respiratory, nuclear	0.00	0.00	XXX	0	0	0	0	0
78599	TC	C	Respiratory, nuclear	0.00	0.00	XXX	0	0	0	0	0

(39) Nuclear medicine, nervous system:

78600		A	Brain imaging	3.36	3.36	XXX	0	0	0	0	0
78600	26	A	Brain imaging	0.61	0.61	XXX	0	0	0	0	0
78600	TC	A	Brain imaging	2.75	2.75	XXX	0	0	0	0	0
78601		A	Brain ltd imaging	3.96	3.96	XXX	0	0	0	0	0
78601	26	A	Brain ltd imaging	0.72	0.72	XXX	0	0	0	0	0
78601	TC	A	Brain ltd imaging	3.24	3.24	XXX	0	0	0	0	0
78605		A	Brain imaging	3.98	3.98	XXX	0	0	0	0	0
78605	26	A	Brain imaging	0.74	0.74	XXX	0	0	0	0	0
78605	TC	A	Brain imaging	3.24	3.24	XXX	0	0	0	0	0
78606		A	Brain imaging	4.57	4.57	XXX	0	0	0	0	0
78606	26	A	Brain imaging	0.88	0.88	XXX	0	0	0	0	0
78606	TC	A	Brain imaging	3.69	3.69	XXX	0	0	0	0	0
78607		A	Brain imaging	7.93	7.93	XXX	0	0	0	0	0
78607	26	A	Brain imaging	1.68	1.68	XXX	0	0	0	0	0
78607	TC	A	Brain imaging	6.25	6.25	XXX	0	0	0	0	0
78608		N	Brain imaging	0.00	0.00	XXX	9	9	9	9	9
78609		N	Brain imaging	0.00	0.00	XXX	9	9	9	9	9
78610		A	Brain flow imaging	1.92	1.92	XXX	0	0	0	0	0
78610	26	A	Brain flow imaging	0.42	0.42	XXX	0	0	0	0	0
78610	TC	A	Brain flow imaging	1.50	1.50	XXX	0	0	0	0	0
78615		A	Cerebral blood flow	4.25	4.25	XXX	0	0	0	0	0
78615	26	A	Cerebral blood flow	0.58	0.58	XXX	0	0	0	0	0
78615	TC	A	Cerebral blood flow	3.67	3.67	XXX	0	0	0	0	0
78630		A	Cerebrospinal fluid flow	5.75	5.75	XXX	0	0	0	0	0
78630	26	A	Cerebrospinal fluid flow	0.94	0.94	XXX	0	0	0	0	0
78630	TC	A	Cerebrospinal fluid flow	4.81	4.81	XXX	0	0	0	0	0
78635		A	CSF ventriculography	3.27	3.27	XXX	0	0	0	0	0
78635	26	A	CSF ventriculography	0.85	0.85	XXX	0	0	0	0	0
78635	TC	A	CSF ventriculography	2.43	2.43	XXX	0	0	0	0	0
78645		A	CSF shunt evaluation	4.07	4.07	XXX	0	0	0	0	0
78645	26	A	CSF shunt evaluation	0.79	0.79	XXX	0	0	0	0	0
78645	TC	A	CSF shunt evaluation	3.27	3.27	XXX	0	0	0	0	0
78647		A	Cerebrospinal	6.88	6.88	XXX	0	0	0	0	0
78647	26	A	Cerebrospinal	1.25	1.25	XXX	0	0	0	0	0
78647	TC	A	Cerebrospinal	5.64	5.64	XXX	0	0	0	0	0
78650		A	CSF leakage imaging	5.27	5.27	XXX	0	0	0	0	0
78650	26	A	CSF leakage imaging	0.85	0.85	XXX	0	0	0	0	0
78650	TC	A	CSF leakage imaging	4.42	4.42	XXX	0	0	0	0	0
78660		A	Nuclear exam	2.77	2.77	XXX	0	0	0	0	0
78660	26	A	Nuclear exam	0.74	0.74	XXX	0	0	0	0	0
78660	TC	A	Nuclear exam	2.02	2.02	XXX	0	0	0	0	0
78699		C	Nervous system procedure	0.00	0.00	XXX	0	0	0	0	0
78699	26	C	Nervous system procedure	0.00	0.00	XXX	0	0	0	0	0
78699	TC	C	Nervous system procedure	0.00	0.00	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(40) Nuclear medicine, genitourinary system:											
78700		A	Kidney imaging	3.52	3.52	XXX	0	0	0	0	0
78700	26	A	Kidney imaging	0.62	0.62	XXX	0	0	0	0	0
78700	TC	A	Kidney imaging	2.90	2.90	XXX	0	0	0	0	0
78701		A	Kidney imaging	4.06	4.06	XXX	0	0	0	0	0
78701	26	A	Kidney imaging	0.67	0.67	XXX	0	0	0	0	0
78701	TC	A	Kidney imaging	3.39	3.39	XXX	0	0	0	0	0
78704		A	Imaging renogram	4.80	4.80	XXX	0	0	0	0	0
78704	26	A	Imaging renogram	1.03	1.03	XXX	0	0	0	0	0
78704	TC	A	Imaging renogram	3.77	3.77	XXX	0	0	0	0	0
78707		A	Kidney flow and function	5.57	5.57	XXX	0	0	0	0	0
78707	26	A	Kidney flow and function	1.31	1.31	XXX	0	0	0	0	0
78707	TC	A	Kidney flow and function	4.26	4.26	XXX	0	0	0	0	0
78708		A	Kidney flow and function	5.80	5.80	XXX	0	0	0	0	0
78708	26	A	Kidney flow and function	1.54	1.54	XXX	0	0	0	0	0
78708	TC	A	Kidney flow and function	4.26	4.26	XXX	0	0	0	0	0
78709		A	Kidney flow and function	5.98	5.98	XXX	0	0	0	0	0
78709	26	A	Kidney flow and function	1.72	1.72	XXX	0	0	0	0	0
78709	TC	A	Kidney flow and function	4.26	4.26	XXX	0	0	0	0	0
78710		A	Kidney imaging	6.55	6.55	XXX	0	0	0	0	0
78710	26	A	Kidney imaging	0.92	0.92	XXX	0	0	0	0	0
78710	TC	A	Kidney imaging	5.64	5.64	XXX	0	0	0	0	0
78715		A	Renal vascular	1.92	1.92	XXX	0	0	0	0	0
78715	26	A	Renal vascular	0.42	0.42	XXX	0	0	0	0	0
78715	TC	A	Renal vascular	1.50	1.50	XXX	0	0	0	0	0
78725		A	Kidney function study	2.23	2.23	XXX	0	0	0	0	0
78725	26	A	Kidney function study	0.53	0.53	XXX	0	0	0	0	0
78725	TC	A	Kidney function study	1.70	1.70	XXX	0	0	0	0	0
78726		D	Kidney function	4.02	4.02	XXX	0	0	0	0	0
78726	26	D	Kidney function	1.20	1.20	XXX	0	0	0	0	0
78726	TC	D	Kidney function	2.82	2.82	XXX	0	0	0	0	0
78727		D	Kidney transplant	5.18	5.18	XXX	0	0	0	0	0
78727	26	D	Kidney transplant	1.37	1.37	XXX	0	0	0	0	0
78727	TC	D	Kidney transplant	3.80	3.80	XXX	0	0	0	0	0
78730		A	Urinary bladder study	1.88	1.88	XXX	0	0	0	0	0
78730	26	A	Urinary bladder study	0.49	0.49	XXX	0	0	0	0	0
78730	TC	A	Urinary bladder study	1.39	1.39	XXX	0	0	0	0	0
78740		A	Ureteral reflux study	2.81	2.81	XXX	0	0	0	0	0
78740	26	A	Ureteral reflux study	0.79	0.79	XXX	0	0	0	0	0
78740	TC	A	Ureteral reflux study	2.02	2.02	XXX	0	0	0	0	0
78760		A	Testicular imaging	3.47	3.47	XXX	0	0	0	0	0
78760	26	A	Testicular imaging	0.91	0.91	XXX	0	0	0	0	0
78760	TC	A	Testicular imaging	2.56	2.56	XXX	0	0	0	0	0
78761		A	Testicular imaging	4.04	4.04	XXX	0	0	0	0	0
78761	26	A	Testicular imaging	0.99	0.99	XXX	0	0	0	0	0
78761	TC	A	Testicular imaging	3.05	3.05	XXX	0	0	0	0	0
78799		C	Genitourinary, nuclear	0.00	0.00	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
78799	26	C	Genitourinary, nuclear	0.00	0.00	XXX	0	0	0	0	0
78799	TC	C	Genitourinary, nuclear	0.00	0.00	XXX	0	0	0	0	0

(41) Nuclear medicine, other procedures:

78800		A	Tumor imaging	4.15	4.15	XXX	0	0	0	0	0
78800	26	A	Tumor imaging	0.91	0.91	XXX	0	0	0	0	0
78800	TC	A	Tumor imaging	3.24	3.24	XXX	0	0	0	0	0
78801		A	Tumor imaging	5.13	5.13	XXX	0	0	0	0	0
78801	26	A	Tumor imaging	1.09	1.09	XXX	0	0	0	0	0
78801	TC	A	Tumor imaging	4.04	4.04	XXX	0	0	0	0	0
78802		A	Tumor imaging	6.47	6.47	XXX	2	0	0	0	0
78802	26	A	Tumor imaging	1.19	1.19	XXX	2	0	0	0	0
78802	TC	A	Tumor imaging	5.28	5.28	XXX	2	0	0	0	0
78803		A	Tumor imaging	7.74	7.74	XXX	2	0	0	0	0
78803	26	A	Tumor imaging	1.49	1.49	XXX	2	0	0	0	0
78803	TC	A	Tumor imaging	6.25	6.25	XXX	2	0	0	0	0
78805		A	Abscess imaging	4.25	4.25	XXX	0	0	0	0	0
78805	26	A	Abscess imaging	1.01	1.01	XXX	0	0	0	0	0
78805	TC	A	Abscess imaging	3.24	3.24	XXX	0	0	0	0	0
78806		A	Abscess imaging	7.32	7.32	XXX	2	0	0	0	0
78806	26	A	Abscess imaging	1.18	1.18	XXX	2	0	0	0	0
78806	TC	A	Abscess imaging	6.14	6.14	XXX	2	0	0	0	0
78807		A	Nuclear localization	7.74	7.74	XXX	2	0	0	0	0
78807	26	A	Nuclear localization	1.49	1.49	XXX	2	0	0	0	0
78807	TC	A	Nuclear localization	6.25	6.25	XXX	2	0	0	0	0
78810		N	Tumor imaging	0.00	0.00	XXX	9	9	9	9	9
78810	26	N	Tumor imaging	0.00	0.00	XXX	9	9	9	9	9
78810	TC	N	Tumor imaging	0.00	0.00	XXX	9	9	9	9	9
78890		B	Nuclear medicine	0.00	0.00	XXX	9	9	9	9	9
78890	26	B	Nuclear medicine	0.00	0.00	XXX	9	9	9	9	9
78890	TC	B	Nuclear medicine	0.00	0.00	XXX	9	9	9	9	9
78891		B	Nuclear medicine data	0.00	0.00	XXX	9	9	9	9	9
78891	26	B	Nuclear medicine data	0.00	0.00	XXX	9	9	9	9	9
78891	TC	B	Nuclear medicine data	0.00	0.00	XXX	9	9	9	9	9
78990		I	Provide diagnostic	0.00	0.00	XXX	9	9	9	9	9
78999		C	Nuclear diagnostic	0.00	0.00	XXX	0	0	0	0	0
78999	26	C	Nuclear diagnostic	0.00	0.00	XXX	0	0	0	0	0
78999	TC	C	Nuclear diagnostic	0.00	0.00	XXX	0	0	0	0	0

(42) Nuclear medicine, therapeutic:

79000		A	Initial hyperthyroidism	4.99	4.99	XXX	0	0	0	0	0
79000	26	A	Initial hyperthyroidism	2.48	2.48	XXX	0	0	0	0	0
79000	TC	A	Initial hyperthyroidism	2.51	2.51	XXX	0	0	0	0	0
79001		A	Repeat hyperthyroidism	2.68	2.68	XXX	0	0	0	0	0
79001	26	A	Repeat hyperthyroidism	1.44	1.44	XXX	0	0	0	0	0
79001	TC	A	Repeat hyperthyroidism	1.24	1.24	XXX	0	0	0	0	0
79020		A	Thyroid ablation	5.00	5.00	XXX	0	0	0	0	0
79020	26	A	Thyroid ablation	2.49	2.49	XXX	0	0	0	0	0
79020	TC	A	Thyroid ablation	2.51	2.51	XXX	0	0	0	0	0
79030		A	Thyroid ablation	5.40	5.40	XXX	0	0	0	0	0
79030	26	A	Thyroid ablation	2.89	2.89	XXX	0	0	0	0	0
79030	TC	A	Thyroid ablation	2.51	2.51	XXX	0	0	0	0	0
79035		A	Thyroid metastases	5.98	5.98	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
79035	26	A	Thyroid metastases	3.47	3.47	XXX	0	0	0	0	0
79035	TC	A	Thyroid metastases	2.51	2.51	XXX	0	0	0	0	0
79100		A	Hematopoetic nuclear	4.32	4.32	XXX	0	0	0	0	0
79100	26	A	Hematopoetic nuclear	1.81	1.81	XXX	0	0	0	0	0
79100	TC	A	Hematopoetic nuclear	2.51	2.51	XXX	0	0	0	0	0
79200		A	Intracavitary nuclear	5.25	5.25	XXX	0	0	0	0	0
79200	26	A	Intracavitary nuclear	2.74	2.74	XXX	0	0	0	0	0
79200	TC	A	Intracavitary nuclear	2.51	2.51	XXX	0	0	0	0	0
79300		C	Interstitial nuclear	0.00	0.00	XXX	0	0	0	0	0
79300	26	A	nterstitial nuclear	2.20	2.20	XXX	0	0	0	0	0
79300	TC	C	Interstitial nuclear	0.00	0.00	XXX	0	0	0	0	0
79400		A	Nonhematologic nuclear	5.20	5.20	XXX	0	0	0	0	0
79400	26	A	Nonhematologic nuclear	2.69	2.69	XXX	0	0	0	0	0
79400	TC	A	Nonhematologic nuclear	2.51	2.51	XXX	0	0	0	0	0
79420		C	Intravascular nuclear	0.00	0.00	XXX	0	0	0	0	0
79420	26	A	Intravascular nuclear	2.07	2.07	XXX	0	0	0	0	0
79420	TC	C	Intravascular nuclear	0.00	0.00	XXX	0	0	0	0	0
79440		A	Nuclear joint therapy	5.25	5.25	XXX	0	0	0	0	0
79440	26	A	Nuclear joint therapy	2.74	2.74	XXX	0	0	0	0	0
79440	TC	A	Nuclear joint therapy	2.51	2.51	XXX	0	0	0	0	0
79900		C	Provide therapy	0.00	0.00	XXX	0	0	0	0	0
79999		C	Nuclear medicine	0.00	0.00	XXX	0	0	0	0	0
79999	26	C	Nuclear medicine	0.00	0.00	XXX	0	0	0	0	0
79999	TC	C	Nuclear medicine	0.00	0.00	XXX	0	0	0	0	0

G. For codes 80000 through 89999, see part 5221.4040.

H. Procedure code numbers 90700 to 99199 relate to medical services.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(1) Immunization injections:											
90281		I	Human ig, intramuscular	0.00	0.00	XXX	9	9	9	9	9
90283		I	Human ig, intravenous	0.00	0.00	XXX	9	9	9	9	9
90287		I	Botulinum antitoxin	0.00	0.00	XXX	9	9	9	9	9
90288		I	Botulism ig, intravenous	0.00	0.00	XXX	9	9	9	9	9
90291		I	Cmv ig, intravenous	0.00	0.00	XXX	9	9	9	9	9
90384		I	Rh ig, full-dose	0.00	0.00	XXX	9	9	9	9	9
90386		I	Rh ig, intravenous	0.00	0.00	XXX	9	9	9	9	9
90399		I	Immune globulin	0.00	0.00	XXX	9	9	9	9	9
90700		E	DTaP immunization	0.00	0.00	XXX	9	9	9	9	9
90701		E	DTP immunization	0.00	0.00	XXX	9	9	9	9	9
90702		E	DT immunization	0.00	0.00	XXX	9	9	9	9	9
90703		E	Tetanus immunization	0.00	0.00	XXX	9	9	9	9	9
90704		E	Mumps immunization	0.00	0.00	XXX	9	9	9	9	9
90705		E	Measles immunization	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
90706	E		Rubella immunization	0.00	0.00	XXX	9	9	9	9	9
90707	E		MMR virus immunization	0.00	0.00	XXX	9	9	9	9	9
90708	E		Measles and rubella	0.00	0.00	XXX	9	9	9	9	9
90709	E		Rubella and mumps	0.00	0.00	XXX	9	9	9	9	9
90710	E		Combined vaccine	0.00	0.00	XXX	9	9	9	9	9
90711	E		Combined vaccine	0.00	0.00	XXX	9	9	9	9	9
90712	E		Oral poliovirus vaccine	0.00	0.00	XXX	9	9	9	9	9
90713	E		Poliomyelitis vaccine	0.00	0.00	XXX	9	9	9	9	9
90714	E		Typhoid immunization	0.00	0.00	XXX	9	9	9	9	9
90716	E		Chicken pox vaccine	0.00	0.00	XXX	9	9	9	9	9
90717	E		Yellow fever immunization	0.00	0.00	XXX	9	9	9	9	9
90718	E		Td immunization	0.00	0.00	XXX	9	9	9	9	9
90719	E		Diphtheria immunization	0.00	0.00	XXX	9	9	9	9	9
90720	E		DTP/HIB vaccine	0.00	0.00	XXX	9	9	9	9	9
90721	E		DTaP/HIB vaccine	0.00	0.00	XXX	9	9	9	9	9
90724	X		Influenza immunization	0.00	0.00	XXX	9	9	9	9	9
90725	E		Cholera immunization	0.00	0.00	XXX	9	9	9	9	9
90726	E		Rabies immunization	0.00	0.00	XXX	9	9	9	9	9
90727	E		Plague immunization	0.00	0.00	XXX	9	9	9	9	9
90728	E		BCG immunization	0.00	0.00	XXX	9	9	9	9	9
90730	E		Hepatitis A vaccine	0.00	0.00	XXX	9	9	9	9	9
90732	X		Pneumococcal immunization	0.00	0.00	XXX	9	9	9	9	9
90733	E		Meningococcal vaccine	0.00	0.00	XXX	9	9	9	9	9
90735	E		Encephalitis vaccine	0.00	0.00	XXX	9	9	9	9	9
90737	E		Influenza B immunization	0.00	0.00	XXX	9	9	9	9	9
90741	E		Passive immunization	0.00	0.00	XXX	9	9	9	9	9
90742	E		Special passive	0.00	0.00	XXX	9	9	9	9	9
90744	X		Hepatitis B vaccine	0.00	0.00	XXX	9	9	9	9	9
90745	X		Hepatitis B vaccine	0.00	0.00	XXX	9	9	9	9	9
90746	X		Hepatitis B vaccine	0.00	0.00	XXX	9	9	9	9	9
90747	X		Hepatitis B vaccine	0.00	0.00	XXX	9	9	9	9	9
90748	X		Hepatitis B/HIB vaccine	0.00	0.00	XXX	9	9	9	9	9
90749	C		Immunization procedure	0.00	0.00	XXX	0	0	0	0	0

(2) Therapeutic or diagnostic infusions:

90780	A		IV infusion for therapy	1.07	1.07	XXX	0	0	0	0	0
90781	A		IV infusion, additional	0.53	0.53	XXX	0	0	0	0	0

(3) Therapeutic or diagnostic injections:

90782	T		Injection (SC)	0.10	0.10	XXX	0	0	0	0	0
90783	T		Injection (IA)	0.39	0.39	XXX	0	0	0	0	0
90784	T		Injection (IV)	0.46	0.46	XXX	0	0	0	0	0
90788	T		Injection of antibiotic	0.11	0.11	XXX	0	0	0	0	0
90799	C		Therapeutic/diagnostic	0.00	0.00	XXX	0	0	0	0	0

(4) Psychiatry, diagnostic or evaluative interview procedures:

90801	A		Diagnostic interview	3.24	3.24	XXX	0	0	0	0	0
90802	A		Interactive interview	3.13	3.13	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(5) Psychiatry, therapeutic procedures, office or other outpatient facility:											
90804	A		Psychotherapy, office	1.37	1.37	XXX	0	0	0	0	0
90805	A		Psychotherapy, office	1.70	1.70	XXX	0	0	0	0	0
90806	A		Psychotherapy, office	2.14	2.14	XXX	0	0	0	0	0
90807	A		Psychotherapy, office	2.38	2.38	XXX	0	0	0	0	0
90808	A		Psychotherapy, office	3.60	3.60	XXX	0	0	0	0	0
90809	A		Psychotherapy, office	3.96	3.96	XXX	0	0	0	0	0
90810	A		Interactive, office	1.70	1.70	XXX	0	0	0	0	0
90811	A		Interactive, office	2.05	2.05	XXX	0	0	0	0	0
90812	A		Interactive, office	2.31	2.31	XXX	0	0	0	0	0
90813	A		Interactive, office	2.57	2.57	XXX	0	0	0	0	0
90814	A		Interactive, office	3.32	3.32	XXX	0	0	0	0	0
90815	A		Interactive, office	3.70	3.70	XXX	0	0	0	0	0

(6) Psychiatry, therapeutic procedures, inpatient hospital, partial hospital, or residential care facility:

90816	A		Psychotherapy, hospital	1.49	1.49	XXX	0	0	0	0	0
90817	A		Psychotherapy, hospital	1.86	1.86	XXX	0	0	0	0	0
90818	A		Psychotherapy, hospital	2.33	2.33	XXX	0	0	0	0	0
90819	A		Psychotherapy, hospital	2.60	2.60	XXX	0	0	0	0	0
90820	D		Diagnostic interview	3.13	3.13	XXX	0	0	0	0	0
90821	A		Psychotherapy, hospital	3.90	3.90	XXX	0	0	0	0	0
90822	A		Psychotherapy, hospital	4.30	4.30	XXX	0	0	0	0	0
90823	A		Interactive, hospital	1.83	1.83	XXX	0	0	0	0	0
90824	A		Interactive, hospital	2.23	2.23	XXX	0	0	0	0	0
90825	D		Evaluation of therapy	1.20	1.20	XXX	9	9	9	9	9
90826	A		Interactive, hospital	2.51	2.51	XXX	0	0	0	0	0
90827	A		Interactive, hospital	2.81	2.81	XXX	0	0	0	0	0
90828	A		Interactive, hospital	3.63	3.63	XXX	0	0	0	0	0
90829	A		Interactive, hospital	4.07	4.07	XXX	0	0	0	0	0
90835	D		Special interview	3.10	3.10	XXX	0	0	0	0	0
90841	D		Psychotherapy	0.00	0.00	XXX	9	9	9	9	9
90842	D		Psychotherapy	3.94	3.94	XXX	0	0	0	0	0
90843	D		Psychotherapy	1.70	1.70	XXX	0	0	0	0	0
90844	D		Psychotherapy	2.38	2.38	XXX	0	0	0	0	0

(7) Psychiatry, therapeutic procedures, other psychotherapy:

90845	A		Psychoanalysis	2.05	2.05	XXX	0	0	0	0	0
90846	R		Family psychotherapy	2.30	2.30	XXX	0	0	0	0	0
90847	R		Family psychotherapy	2.61	2.61	XXX	0	0	0	0	0
90849	R		Multiple family	0.80	0.80	XXX	0	0	0	0	0
90853	A		Group psychotherapy	0.80	0.80	XXX	0	0	0	0	0
90855	D		Individual psychotherapy	2.57	2.57	XXX	0	0	0	0	0
90857	A		Interactive group	0.73	0.73	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(8) Psychiatry, therapeutic procedures, other services or procedures:											
90862	A		Medication management	1.25	1.25	XXX	0	0	0	0	0
90865	A		Narcosynthesis	3.10	3.10	XXX	0	0	0	0	0
90870	A		Electroconvulsive therapy	2.28	2.28	000	0	0	0	0	0
90871	A		Electroconvulsive therapy	3.34	3.34	000	0	0	0	0	0
90875	N		Psychophysiology therapy	1.09	1.09	XXX	9	9	9	9	9
90876	N		Psychophysiology therapy	1.72	1.72	XXX	9	9	9	9	9
90880	A		Hypnotherapy	2.64	2.64	XXX	0	0	0	0	0
90882	N		Environmental management	0.00	0.00	XXX	9	9	9	9	9
90885	B		Psychiatric evaluation	0.00	0.00	XXX	9	9	9	9	9
90887	B		Consultation	0.00	0.00	XXX	9	9	9	9	9
90889	B		Prepare report	0.00	0.00	XXX	9	9	9	9	9
90899	C		Psychiatric service	0.00	0.00	XXX	0	0	0	0	0
(9) Biofeedback:											
90901	A		Biofeedback training	1.35	1.35	000	0	0	0	0	0
90911	A		Biofeedback, perineal	2.05	2.05	000	0	0	0	0	0
(10) Dialysis, end stage renal disease services:											
90918	A		ESRD related services	2.34	2.34	XXX	0	0	0	0	0
90919	A		ESRD related services	9.95	9.95	XXX	0	0	0	0	0
90920	A		ESRD related services	8.79	8.79	XXX	0	0	0	0	0
90921	A		ESRD related services	6.25	6.25	XXX	0	0	0	0	0
90922	A		ESRD related services	0.41	0.41	XXX	0	0	0	0	0
90923	A		ESRD related services	0.33	0.33	XXX	0	0	0	0	0
90924	A		ESRD related services	0.29	0.29	XXX	0	0	0	0	0
90925	A		ESRD related services	0.21	0.21	XXX	0	0	0	0	0
(11) Dialysis, hemodialysis:											
90935	A		Hemodialysis, one	2.46	2.46	000	0	0	0	0	0
90937	A		Hemodialysis, repeated	4.26	4.26	000	0	0	0	0	0
(12) Dialysis, miscellaneous procedures:											
90945	A		Dialysis, one evaluation	2.43	2.43	000	0	0	0	0	0
90947	A		Dialysis, repeated	4.06	4.06	000	0	0	0	0	0
90989	X		Dialysis training	0.00	0.00	XXX	9	9	9	9	9
90993	X		Dialysis training	0.00	0.00	XXX	9	9	9	9	9
90997	A		Hemoperfusion	3.71	3.71	000	0	0	0	0	0
90999	C		Dialysis procedure	0.00	0.00	XXX	0	0	0	0	0
(13) Gastroenterology:											
91000	A		Esophageal intubation	1.33	1.33	000	0	0	0	0	0
91000	26	A	Esophageal intubation	1.26	1.26	000	0	0	0	0	0
91000	TC	A	Esophageal intubation	0.07	0.07	000	0	0	0	0	0
91010	A		Esophagus motility study	3.32	3.32	000	0	0	0	0	0
91010	26	A	Esophagus motility study	2.53	2.53	000	0	0	0	0	0
91010	TC	A	Esophagus motility study	0.79	0.79	000	0	0	0	0	0
91011	A		Esophagus motility study	4.00	4.00	000	0	0	0	0	0
91011	26	A	Esophagus motility study	3.02	3.02	000	0	0	0	0	0

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Proposed Rules

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91011	TC	A	Esophagus motility study	0.99	0.99	000	0	0	0	0	0
91012		A	Esophagus motility study	4.07	4.07	000	0	0	0	0	0
91012	26	A	Esophagus motility study	2.96	2.96	000	0	0	0	0	0
91012	TC	A	Esophagus motility study	1.11	1.11	000	0	0	0	0	0
91020		A	Gastric motility studies	3.64	3.64	000	0	0	0	0	0
91020	26	A	Gastric motility studies	2.90	2.90	000	0	0	0	0	0
91020	TC	A	Gastric motility studies	0.74	0.74	000	0	0	0	0	0
91030		A	Acid perfusion test	1.39	1.39	000	0	0	0	0	0
91030	26	A	Acid perfusion test	1.18	1.18	000	0	0	0	0	0
91030	TC	A	Acid perfusion test	0.21	0.21	000	0	0	0	0	0
91032		A	Esophagus, acid reflux	3.08	3.08	000	0	0	0	0	0
91032	26	A	Esophagus, acid reflux	2.36	2.36	000	0	0	0	0	0
91032	TC	A	Esophagus, acid reflux	0.72	0.72	000	0	0	0	0	0
91033		A	Prolonged recording	3.94	3.94	000	0	0	0	0	0
91033	26	A	Prolonged recording	2.64	2.64	000	0	0	0	0	0
91033	TC	A	Prolonged recording	1.30	1.30	000	0	0	0	0	0
91052		A	Gastric analysis test	1.55	1.55	000	0	0	0	0	0
91052	26	A	Gastric analysis test	1.22	1.22	000	0	0	0	0	0
91052	TC	A	Gastric analysis test	0.33	0.33	000	0	0	0	0	0
91055		A	Gastric intubation	1.66	1.66	000	0	0	0	0	0
91055	26	A	Gastric intubation	1.37	1.37	000	0	0	0	0	0
91055	TC	A	Gastric intubation	0.29	0.29	000	0	0	0	0	0
91060		A	Gastric saline load test	1.13	1.13	000	0	0	0	0	0
91060	26	A	Gastric saline load test	0.91	0.91	000	0	0	0	0	0
91060	TC	A	Gastric saline load test	0.21	0.21	000	0	0	0	0	0
91065		A	Breath hydrogen test	0.75	0.75	000	0	0	0	0	0
91065	26	A	Breath hydrogen test	0.41	0.41	000	0	0	0	0	0
91065	TC	A	Breath hydrogen test	0.34	0.34	000	0	0	0	0	0
91100		A	Pass intestine	1.55	1.55	000	0	0	0	0	0
91105		A	Gastric intubation	0.75	0.75	000	0	0	0	0	0
91122		A	Anal pressure	3.40	3.40	000	0	0	0	0	0
91122	26	A	Anal pressure	2.70	2.70	000	0	0	0	0	0
91122	TC	A	Anal pressure	0.70	0.70	000	0	0	0	0	0
91299		C	Gastroenterology	0.00	0.00	XXX	0	0	0	0	0
91299	26	C	Gastroenterology	0.00	0.00	XXX	0	0	0	0	0
91299	TC	C	Gastroenterology	0.00	0.00	XXX	0	0	0	0	0

(14) Ophthalmology, general services:

92002		A	Eye exam, new patient	1.28	1.05	XXX	0	2	0	0	0
92004		A	Eye exam, new patient	2.08	1.80	XXX	0	2	0	0	0
92012		A	Established patient	1.04	0.83	XXX	0	2	0	0	0
92014		A	Established patient	1.53	1.27	XXX	0	2	0	0	0

(15) Ophthalmology, special services:

92015		N	Refraction	0.00	0.00	XXX	9	9	9	9	9
92018		A	Eye exam and evaluation	1.84	1.84	XXX	0	0	0	0	0

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92019		A	Eye exam and treatment	1.66	1.43	XXX	0	0	0	0	0
92020		A	Special eye evaluation	0.62	0.48	XXX	0	2	0	0	0
92060		A	Special eye evaluation	1.01	1.01	XXX	0	2	0	0	0
92060	26	A	Special eye evaluation	0.83	0.83	XXX	0	2	0	0	0
92060	TC	A	Special eye evaluation	0.18	0.18	XXX	0	2	0	0	0
92065		A	Orthoptic/pleoptic train	0.69	0.69	XXX	0	2	0	0	0
92065	26	A	Orthoptic/pleoptic train	0.53	0.53	XXX	0	2	0	0	0
92065	TC	A	Orthoptic/pleoptic train	0.15	0.15	XXX	0	2	0	0	0
92070		A	Fitting of contact lens	1.83	1.25	XXX	0	3	0	0	0
92081		A	Visual field examination	0.64	0.64	XXX	0	2	0	0	0
92081	26	A	Visual field examination	0.50	0.50	XXX	0	2	0	0	0
92081	TC	A	Visual field examination	0.14	0.14	XXX	0	2	0	0	0
92082		A	Visual field examination	0.88	0.88	XXX	0	2	0	0	0
92082	26	A	Visual field examination	0.69	0.69	XXX	0	2	0	0	0
92082	TC	A	Visual field examination	0.19	0.19	XXX	0	2	0	0	0
92083		A	Visual field examination	1.28	1.28	XXX	0	2	0	0	0
92083	26	A	Visual field examination	1.00	1.00	XXX	0	2	0	0	0
92083	TC	A	Visual field examination	0.28	0.28	XXX	0	2	0	0	0
92100		A	Serial tonometry	1.08	0.96	XXX	0	2	0	0	0
92120		A	Tonography	1.05	0.90	XXX	0	2	0	0	0
92130		A	Water provocation	1.22	0.98	XXX	0	2	0	0	0
92140		A	Glaucoma provocation	0.75	0.60	XXX	0	2	0	0	0

(16) Ophthalmology, ophthalmoscopy:

92225		A	Special eye examination	0.79	0.57	XXX	0	3	0	0	0
92226		A	Special eye examination	0.70	0.50	XXX	0	3	0	0	0
92230		A	Eye exam with report	1.23	0.90	XXX	0	3	0	0	0
92235		A	Eye exam with report	2.31	2.31	XXX	0	3	0	0	0
92235	26	A	Eye exam with report	1.32	1.32	XXX	0	3	0	0	0
92235	TC	A	Eye exam with report	0.99	0.99	XXX	0	3	0	0	0
92240		A	ICG angiography	2.57	2.57	XXX	0	3	0	0	0
92240	26	A	ICG angiography	1.59	1.59	XXX	0	3	0	0	0
92240	TC	A	ICG angiography	0.99	0.99	XXX	0	3	0	0	0
92250		A	Eye exam with report	0.82	0.82	XXX	0	2	0	0	0
92250	26	A	Eye exam with report	0.65	0.65	XXX	0	2	0	0	0
92250	TC	A	Eye exam with report	0.17	0.17	XXX	0	2	0	0	0
92260		A	Ophthalmoscopy	0.72	0.46	XXX	0	2	0	0	0

(17) Ophthalmology, other specialized services:

92265		A	Eye muscle evaluation	1.03	1.03	XXX	0	2	0	0	0
92265	26	A	Eye muscle evaluation	0.80	0.80	XXX	0	2	0	0	0
92265	TC	A	Eye muscle evaluation	0.22	0.22	XXX	0	2	0	0	0
92270		A	Electro-oculography	1.41	1.41	XXX	0	2	0	0	0
92270	26	A	Electro-oculography	1.11	1.11	XXX	0	2	0	0	0
92270	TC	A	Electro-oculography	0.30	0.30	XXX	0	2	0	0	0
92275		A	Electroretinography	1.81	1.81	XXX	0	2	0	0	0
92275	26	A	Electroretinography	1.43	1.43	XXX	0	2	0	0	0
92275	TC	A	Electroretinography	0.39	0.39	XXX	0	2	0	0	0
92283		A	Color vision examination	0.44	0.44	XXX	0	2	0	0	0
92283	26	A	Color vision examination	0.32	0.32	XXX	0	2	0	0	0
92283	TC	A	Color vision examination	0.12	0.12	XXX	0	2	0	0	0
92284		A	Dark adaptation exam	0.66	0.66	XXX	0	2	0	0	0
92284	26	A	Dark adaptation exam	0.49	0.49	XXX	0	2	0	0	0

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92284	TC	A	Dark adaptation exam	0.17	0.17	XXX	0	2	0	0	0
92285		A	Eye photography	0.47	0.47	XXX	0	2	0	0	0
92285	26	A	Eye photography	0.36	0.36	XXX	0	2	0	0	0
92285	TC	A	Eye photography	0.11	0.11	XXX	0	2	0	0	0
92286		A	Internal eye photography	1.82	1.82	XXX	0	2	0	0	0
92286	26	A	Internal eye photography	1.43	1.43	XXX	0	2	0	0	0
92286	TC	A	Internal eye photography	0.39	0.39	XXX	0	2	0	0	0
92287		A	Internal eye photography	2.25	1.51	XXX	0	2	0	0	0

(18) Ophthalmology, contact lens services:

92310		N	Contact lens fitting	0.00	0.00	XXX	9	9	9	9	9
92311		A	Contact lens fitting	1.87	1.43	XXX	0	0	0	0	0
92312		A	Contact lens fitting	2.28	1.72	XXX	0	2	0	0	0
92313		A	Contact lens fitting	1.70	1.28	XXX	0	0	0	0	0
92314		N	Prescription	0.00	0.00	XXX	9	9	9	9	9
92315		A	Prescription	1.06	0.74	XXX	0	0	0	0	0
92316		A	Prescription	1.56	1.10	XXX	0	2	0	0	0
92317		A	Prescription	0.80	0.61	XXX	0	0	0	0	0
92325		A	Modify contact lens	0.37	0.37	XXX	0	0	0	0	0
92326		A	Replace contact lens	1.54	1.54	XXX	0	0	0	0	0

(19) Ophthalmology, ocular prosthetics, artificial eye:

92330		A	Fitting, artificial eye	2.12	1.58	XXX	0	0	0	0	0
92335		A	Fitting, artificial eye	2.37	1.42	XXX	0	0	0	0	0

(20) Ophthalmology, spectacle services:

92340		N	Fitting spectacles	0.00	0.00	XXX	9	9	9	9	9
92341		N	Fitting spectacles	0.00	0.00	XXX	9	9	9	9	9
92342		N	Fitting spectacles	0.00	0.00	XXX	9	9	9	9	9
92352		B	Special spectacles	0.00	0.00	XXX	9	9	9	9	9
92353		B	Special spectacles	0.00	0.00	XXX	9	9	9	9	9
92354		B	Special spectacles	0.00	0.00	XXX	9	9	9	9	9
92355		B	Special spectacles	0.00	0.00	XXX	9	9	9	9	9
92358		B	Eye prosthesis	0.00	0.00	XXX	9	9	9	9	9
92370		N	Repair and adjustment	0.00	0.00	XXX	9	9	9	9	9
92371		B	Repair and adjustment	0.00	0.00	XXX	9	9	9	9	9

(21) Ophthalmology, supply of materials:

92390		N	Supply of spectacles	0.00	0.00	XXX	9	9	9	9	9
92391		N	Supply of contact lenses	0.00	0.00	XXX	9	9	9	9	9
92392		I	Supply of low vision aids	0.00	0.00	XXX	9	9	9	9	9
92393		I	Supply of artificial eye	0.00	0.00	XXX	9	9	9	9	9
92395		I	Supply of spectacles	0.00	0.00	XXX	9	9	9	9	9
92396		I	Supply of contact lenses	0.00	0.00	XXX	9	9	9	9	9

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(22) Ophthalmology, other procedures:											
92499		C	Eye service or procedure	0.00	0.00	XXX	0	0	0	0	0
92499	26	C	Eye service or procedure	0.00	0.00	XXX	0	0	0	0	0
92499	TC	C	Eye service or procedure	0.00	0.00	XXX	0	0	0	0	0
(23) Special otorhinolaryngologic services:											
92502		A	Ear and throat exam	2.52	2.52	000	0	0	0	0	0
92504		A	Ear microscopy	0.43	0.30	XXX	0	0	0	0	0
92506		A	Speech and hearing	1.31	1.06	XXX	0	0	0	0	0
92507		A	Speech and hearing	0.81	0.65	XXX	0	0	0	0	0
92508		A	Speech and hearing	0.42	0.33	XXX	0	0	0	0	0
92510		A	Rehab for ear	2.76	2.10	XXX	0	0	0	0	0
92511		A	Nasopharyngoscopy	1.63	1.22	000	0	0	0	0	0
92512		A	Nasal function studies	0.98	0.75	XXX	0	0	0	0	0
92516		A	Facial nerve function	0.79	0.60	XXX	0	0	0	0	0
92520		A	Laryngeal function	1.23	0.97	XXX	0	0	0	0	0
92525		A	Oral function evaluation	2.41	1.92	XXX	0	0	0	0	0
92526		A	Oral function treatment	0.98	0.75	XXX	0	0	0	0	0
(24) Special otorhinolaryngologic services, vestibular function tests, with observation and evaluation by physician, without electrical recording:											
92531		B	Spontaneous nystagmus	0.00	0.00	XXX	9	9	9	9	9
92532		B	Positional nystagmus	0.00	0.00	XXX	9	9	9	9	9
92533		B	Caloric vestibular test	0.00	0.00	XXX	9	9	9	9	9
92534		B	Optokinetic nystagmus	0.00	0.00	XXX	9	9	9	9	9
(25) Special otorhinolaryngologic services, vestibular function tests, with recording, and medical diagnostic evaluation:											
92541		A	Spontaneous nystagmus	1.05	1.05	XXX	0	0	0	0	0
92541	26	A	Spontaneous nystagmus	0.83	0.83	XXX	0	0	0	0	0
92541	TC	A	Spontaneous nystagmus	0.22	0.22	XXX	0	0	0	0	0
92542		A	Positional nystagmus test	0.93	0.93	XXX	0	0	0	0	0
92542	26	A	Positional nystagmus test	0.67	0.67	XXX	0	0	0	0	0
92542	TC	A	Positional nystagmus test	0.26	0.26	XXX	0	0	0	0	0
92543		A	Caloric vestibular test	0.30	0.30	XXX	0	9	0	0	0
92543	26	A	Caloric vestibular test	0.20	0.20	XXX	0	9	0	0	0
92543	TC	A	Caloric vestibular test	0.10	0.10	XXX	0	9	0	0	0
92544		A	Optokinetic nystagmus	0.72	0.72	XXX	0	0	0	0	0
92544	26	A	Optokinetic nystagmus	0.51	0.51	XXX	0	0	0	0	0
92544	TC	A	Optokinetic nystagmus	0.20	0.20	XXX	0	0	0	0	0
92545		A	Oscillating tracking test	0.62	0.62	XXX	0	0	0	0	0
92545	26	A	Oscillating tracking test	0.41	0.41	XXX	0	0	0	0	0
92545	TC	A	Oscillating tracking test	0.20	0.20	XXX	0	0	0	0	0
92546		A	Sinusoidal rotation	0.80	0.80	XXX	0	0	0	0	0
92546	26	A	Sinusoidal rotation	0.57	0.57	XXX	0	0	0	0	0
92546	TC	A	Sinusoidal rotation	0.23	0.23	XXX	0	0	0	0	0
92547		A	Supplemental electrodes	0.55	0.55	XXX	0	0	0	0	0
92548		A	Posturography	2.35	2.35	XXX	0	0	0	0	0
92548	26	A	Posturography	0.92	0.92	XXX	0	0	0	0	0
92548	TC	A	Posturography	1.43	1.43	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(26) Special otorhinolaryngologic services, audiologic function tests with medical diagnostic evaluation:											
92551		N	Pure tone hearing	0.00	0.00	XXX	9	9	9	9	9
92552		A	Pure tone audiometry	0.43	0.43	XXX	0	2	0	0	0
92553		A	Audiometry, air and bone	0.65	0.65	XXX	0	2	0	0	0
92555		A	Speech threshold	0.37	0.37	XXX	0	2	0	0	0
92556		A	Speech audiometry	0.55	0.55	XXX	0	2	0	0	0
92557		A	Comprehensive hearing	1.16	1.16	XXX	0	2	0	0	0
92559		N	Group audiometry	0.00	0.00	XXX	9	9	9	9	9
92560		N	Bekesy audiometry	0.00	0.00	XXX	9	9	9	9	9
92561		A	Bekesy audiometry	0.70	0.70	XXX	0	2	0	0	0
92562		A	Loudness balance test	0.40	0.40	XXX	0	2	0	0	0
92563		A	Tone decay test	0.37	0.37	XXX	0	2	0	0	0
92564		A	SISI hearing test	0.46	0.46	XXX	0	2	0	0	0
92565		A	Stenger test, pure tone	0.39	0.21	XXX	0	2	0	0	0
92567		A	Tympanometry	0.52	0.52	XXX	0	2	0	0	0
92568		A	Acoustic reflex testing	0.37	0.37	XXX	0	2	0	0	0
92569		A	Acoustic reflex decay	0.40	0.40	XXX	0	2	0	0	0
92571		A	Filtered speech test	0.38	0.20	XXX	0	2	0	0	0
92572		A	Staggered spondaic test	0.08	0.08	XXX	0	2	0	0	0
92573		A	Lombard test	0.34	0.34	XXX	0	2	0	0	0
92575		A	Sensorineural acuity test	0.30	0.16	XXX	0	2	0	0	0
92576		A	Synthetic sentence test	0.43	0.23	XXX	0	2	0	0	0
92577		A	Stenger test, speech	0.70	0.37	XXX	0	2	0	0	0
92579		A	Visual audiometry	0.71	0.71	XXX	0	2	0	0	0
92582		A	Conditioning play	0.71	0.37	XXX	0	2	0	0	0
92583		A	Select picture audiometry	0.87	0.87	XXX	0	2	0	0	0
92584		A	Electrocochleography	2.42	2.42	XXX	0	2	0	0	0
92585		A	Auditory evoked	3.76	3.76	XXX	0	2	0	0	0
92585	26	A	Auditory evoked	1.97	1.97	XXX	0	2	0	0	0
92585	TC	A	Auditory evoked	1.79	1.79	XXX	0	2	0	0	0
92587		A	Evoked auditory emissions	1.49	1.49	XXX	0	2	0	0	0
92587	26	A	Evoked auditory emissions	0.23	0.23	XXX	0	2	0	0	0
92587	TC	A	Evoked auditory emissions	1.26	1.26	XXX	0	2	0	0	0
92588		A	Evoked auditory emissions	2.06	2.06	XXX	0	2	0	0	0
92588	26	A	Evoked auditory emissions	0.63	0.63	XXX	0	2	0	0	0
92588	TC	A	Evoked auditory emissions	1.43	1.43	XXX	0	2	0	0	0
92589		A	Auditory function test	0.53	0.53	XXX	0	2	0	0	0
92590		N	Hearing aid examination	0.00	0.00	XXX	9	9	9	9	9
92591		N	Hearing aid examination	0.00	0.00	XXX	9	9	9	9	9
92592		N	Hearing aid check	0.00	0.00	XXX	9	9	9	9	9
92593		N	Hearing aid check	0.00	0.00	XXX	9	9	9	9	9
92594		N	Electroacoustic test	0.00	0.00	XXX	9	9	9	9	9
92595		N	Electroacoustic test	0.00	0.00	XXX	9	9	9	9	9
92596		A	Ear protector	0.57	0.57	XXX	0	2	0	0	0
92597		A	Oral speech device	2.26	2.26	XXX	0	0	0	0	0
92598		A	Modify oral speech	1.57	1.57	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(27) Special otorhinolaryngologic services, other procedures:											
92599		C	ENT service or procedure	0.00	0.00	XXX	0	0	0	0	0
92599	26	C	ENT service or procedure	0.00	0.00	XXX	0	0	0	0	0
92599	TC	C	ENT service or procedure	0.00	0.00	XXX	0	0	0	0	0
(28) Cardiovascular, therapeutic services:											
92950		A	Heart/lung resuscitation	5.74	5.74	000	0	0	0	0	0
92953		A	Temporary pacing	0.53	0.53	000	0	0	0	0	0
92960		A	Heart electrocodes	3.95	3.95	000	0	0	0	0	0
92970		A	Cardioassist, internal	6.77	6.77	000	0	0	0	0	0
92971		A	Cardioassist, external	2.72	2.72	000	0	0	0	0	0
92975		A	Dissolve clot	12.33	12.33	000	2	0	0	0	0
92977		A	Dissolve clot	7.72	7.72	XXX	0	0	0	0	0
92978		A	Ultrasound, heart	7.06	7.06	ZZZ	0	0	0	0	0
92978	26	A	Ultrasound, heart	2.70	2.70	ZZZ	0	0	0	0	0
92978	TC	A	Ultrasound, heart	4.36	4.36	ZZZ	0	0	0	0	0
92979		A	Ultrasound, heart	4.34	4.34	ZZZ	0	0	0	0	0
92979	26	A	Ultrasound, heart	2.16	2.16	ZZZ	0	0	0	0	0
92979	TC	A	Ultrasound, heart	2.18	2.18	ZZZ	0	0	0	0	0
92980		A	Insert intracoronary	29.91	29.91	000	2	0	0	0	0
92981		A	Insert intracoronary	8.46	8.46	ZZZ	0	0	0	0	0
92982		A	Coronary artery	22.31	22.31	000	2	0	0	0	0
92984		A	Coronary artery	6.10	6.10	ZZZ	0	0	0	0	0
92986		A	Revision of aortic valve	31.92	31.92	090	2	0	0	0	0
92987		A	Revision of mitral valve	32.89	32.89	090	2	0	0	0	0
92990		A	Revision of pulmonary	25.40	25.40	090	2	0	0	0	0
92992		C	Revision of heart	0.00	0.00	090	2	0	2	0	0
92993		C	Revision of heart	0.00	0.00	090	2	0	2	0	0
92995		A	Coronary atherectomy	24.50	24.50	000	2	0	0	0	0
92996		A	Coronary atherectomy	6.67	6.67	ZZZ	0	0	0	0	0
92997		A	Pulmonary artery balloon	24.32	24.32	000	2	0	0	0	0
92998		A	Pulmonary artery balloon	9.36	9.36	ZZZ	0	0	0	0	0
(29) Cardiovascular, cardiography:											
93000		A	Electrocardiogram	0.75	0.75	XXX	0	0	0	0	0
93005		A	Electrocardiogram	0.43	0.43	XXX	0	0	0	0	0
93010		A	Electrocardiogram	0.31	0.31	XXX	0	0	0	0	0
93012		A	Transmission of rhythm	2.29	2.29	XXX	0	0	0	0	0
93014		A	Report on transmission	0.89	0.89	XXX	0	0	0	0	0
93015		A	Stress test	3.02	3.02	XXX	0	0	0	0	0
93016		A	Stress test	0.80	0.80	XXX	0	0	0	0	0
93017		A	Stress test	1.61	1.61	XXX	0	0	0	0	0
93018		A	Stress test	0.61	0.61	XXX	0	0	0	0	0
93024		A	Cardiac drug	3.47	3.47	XXX	0	0	0	0	0
93024	26	A	Cardiac drug	2.39	2.39	XXX	0	0	0	0	0
93024	TC	A	Cardiac drug	1.08	1.08	XXX	0	0	0	0	0
93040		A	Rhythm ECG with leads	0.41	0.41	XXX	0	0	0	0	0
93041		A	Rhythm ECG, tracing only	0.14	0.14	XXX	0	0	0	0	0
93042		A	Rhythm ECG, report only	0.27	0.27	XXX	0	0	0	0	0
93224		A	ECG monitor/report	4.34	4.34	XXX	0	0	0	0	0
93225		A	ECG monitor/recording	1.19	1.19	XXX	0	0	0	0	0
93226		A	ECG monitor/report	2.10	2.10	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
93227		A	ECG monitor/review	1.06	1.06	XXX	0	0	0	0	0
93230		A	ECG monitor/report	4.61	4.61	XXX	0	0	0	0	0
93231		A	ECG monitor/recording	1.46	1.46	XXX	0	0	0	0	0
93232		A	ECG monitor/report	2.08	2.08	XXX	0	0	0	0	0
93233		A	ECG monitor/review	1.07	1.07	XXX	0	0	0	0	0
93235		A	ECG monitor/report	3.43	3.43	XXX	0	0	0	0	0
93236		A	ECG monitor/report	2.51	2.51	XXX	0	0	0	0	0
93237		A	ECG monitor/review	0.92	0.92	XXX	0	0	0	0	0
93268		A	ECG record/review	4.37	4.37	XXX	0	0	0	0	0
93270		A	ECG recording	1.19	1.19	XXX	0	0	0	0	0
93271		A	ECG monitoring	2.29	2.29	XXX	0	0	0	0	0
93272		A	ECG review	0.89	0.89	XXX	0	0	0	0	0
93278		A	ECG, signal-averaged	1.66	1.66	XXX	0	0	0	0	0
93278	26	A	ECG, signal-averaged	0.53	0.53	XXX	0	0	0	0	0
93278	TC	A	ECG, signal-averaged	1.13	1.13	XXX	0	0	0	0	0

(30) Cardiovascular, echocardiography:

93303		A	Echo, transthoracic	5.90	5.90	XXX	0	0	0	0	0
93303	26	A	Echo, transthoracic	2.20	2.20	XXX	0	0	0	0	0
93303	TC	A	Echo, transthoracic	3.70	3.70	XXX	0	0	0	0	0
93304		A	Echo, transthoracic	3.23	3.23	XXX	0	0	0	0	0
93304	26	A	Echo, transthoracic	1.37	1.37	XXX	0	0	0	0	0
93304	TC	A	Echo, transthoracic	1.86	1.86	XXX	0	0	0	0	0
93307		A	Echo exam of heart	5.55	5.55	XXX	0	0	0	0	0
93307	26	A	Echo exam of heart	1.85	1.85	XXX	0	0	0	0	0
93307	TC	A	Echo exam of heart	3.70	3.70	XXX	0	0	0	0	0
93308		A	Echo exam of heart	2.93	2.93	XXX	0	0	0	0	0
93308	26	A	Echo exam of heart	1.07	1.07	XXX	0	0	0	0	0
93308	TC	A	Echo exam of heart	1.86	1.86	XXX	0	0	0	0	0
93312		A	Echo, transesophageal	7.03	7.03	XXX	0	0	0	0	0
93312	26	A	Echo, transesophageal	3.37	3.37	XXX	0	0	0	0	0
93312	TC	A	Echo, transesophageal	3.66	3.66	XXX	0	0	0	0	0
93313		A	Echo, transesophageal	1.54	1.54	XXX	0	0	0	0	0
93314		A	Echo, transesophageal	5.47	5.47	XXX	0	0	0	0	0
93314	26	A	Echo, transesophageal	1.82	1.82	XXX	0	0	0	0	0
93314	TC	A	Echo, transesophageal	3.66	3.66	XXX	0	0	0	0	0
93315		A	Echo, transesophageal	7.55	7.55	XXX	0	0	0	0	0
93315	26	A	Echo, transesophageal	3.89	3.89	XXX	0	0	0	0	0
93315	TC	A	Echo, transesophageal	3.66	3.66	XXX	0	0	0	0	0
93316		A	Echo, transesophageal	1.54	1.54	XXX	0	0	0	0	0
93317		A	Echo, transesophageal	6.00	6.00	XXX	0	0	0	0	0
93317	26	A	Echo, transesophageal	2.34	2.34	XXX	0	0	0	0	0
93317	TC	A	Echo, transesophageal	3.66	3.66	XXX	0	0	0	0	0
93320		A	Doppler echo exam	2.42	2.42	ZZZ	0	0	0	0	0
93320	26	A	Doppler echo exam	0.78	0.78	ZZZ	0	0	0	0	0
93320	TC	A	Doppler echo exam	1.65	1.65	ZZZ	0	0	0	0	0
93321		A	Doppler echo exam	1.38	1.38	ZZZ	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
93321	26	A	Doppler echo exam	0.31	0.31	ZZZ	0	0	0	0	0
93321	TC	A	Doppler echo exam	1.07	1.07	ZZZ	0	0	0	0	0
93325		A	Doppler color flow	2.91	2.91	ZZZ	0	0	0	0	0
93325	26	A	Doppler color flow	0.11	0.11	ZZZ	0	0	0	0	0
93325	TC	A	Doppler color flow	2.80	2.80	ZZZ	0	0	0	0	0
93350		A	Echo, transthoracic	3.29	3.29	XXX	0	0	0	0	0
93350	26	A	Echo, transthoracic	1.59	1.59	XXX	0	0	0	0	0
93350	TC	A	Echo, transthoracic	1.70	1.70	XXX	0	0	0	0	0

(31) Cardiovascular, cardiac catheterization:

93501		A	Right heart catheter	22.36	22.36	000	2	0	0	0	0
93501	26	A	Right heart catheter	6.14	6.14	000	2	0	0	0	0
93501	TC	A	Right heart catheter	16.22	16.22	000	0	0	0	0	0
93503		A	Insert/place catheter	5.13	5.13	000	0	0	0	0	0
93505		A	Biopsy of heart	8.98	8.98	000	2	0	0	0	0
93505	26	A	Biopsy of heart	7.06	7.06	000	2	0	0	0	0
93505	TC	A	Biopsy of heart	1.92	1.92	000	0	0	0	0	0
93508		A	Catheter placement	18.55	18.55	000	2	0	0	0	0
93508	26	A	Catheter placement	6.53	6.53	000	2	0	0	0	0
93508	TC	A	Catheter placement	12.01	12.01	000	0	0	0	0	0
93510		A	Left heart catheter	42.49	42.49	000	2	0	0	0	0
93510	26	A	Left heart catheter	7.01	7.01	000	2	0	0	0	0
93510	TC	A	Left heart catheter	35.47	35.47	000	0	0	0	0	0
93511		A	Left heart catheter	41.74	41.74	000	2	0	0	0	0
93511	26	A	Left heart catheter	7.21	7.21	000	2	0	0	0	0
93511	TC	A	Left heart catheter	34.53	34.53	000	0	0	0	0	0
93514		A	Left heart catheter	45.54	45.54	000	2	0	0	0	0
93514	26	A	Left heart catheter	11.00	11.00	000	2	0	0	0	0
93514	TC	A	Left heart catheter	34.53	34.53	000	0	0	0	0	0
93524		A	Left heart catheter	56.11	56.11	000	2	0	0	0	0
93524	26	A	Left heart catheter	10.99	10.99	000	2	0	0	0	0
93524	TC	A	Left heart catheter	45.12	45.12	000	0	0	0	0	0
93526		A	Right and left catheter	57.28	57.28	000	2	0	0	0	0
93526	26	A	Right and left catheter	10.92	10.92	000	2	0	0	0	0
93526	TC	A	Right and left catheter	46.36	46.36	000	0	0	0	0	0
93527		A	Right and left catheter	58.90	58.90	000	2	0	0	0	0
93527	26	A	Right and left catheter	13.78	13.78	000	2	0	0	0	0
93527	TC	A	Right and left catheter	45.12	45.12	000	0	0	0	0	0
93528		A	Right and left catheter	57.75	57.75	000	2	0	0	0	0
93528	26	A	Right and left catheter	12.63	12.63	000	2	0	0	0	0
93528	TC	A	Right and left catheter	45.12	45.12	000	0	0	0	0	0
93529		A	Right and left catheter	52.43	52.43	000	2	0	0	0	0
93529	26	A	Right and left catheter	7.31	7.31	000	2	0	0	0	0
93529	TC	A	Right and left catheter	45.12	45.12	000	0	0	0	0	0
93530		A	Right heart catheter	23.74	23.74	000	2	0	0	0	0
93530	26	A	Right heart catheter	7.51	7.51	000	2	0	0	0	0
93530	TC	A	Right heart catheter	16.22	16.22	000	0	0	0	0	0
93531		A	Right and left catheter	59.42	59.42	000	2	0	0	0	0
93531	26	A	Right and left catheter	13.06	13.06	000	2	0	0	0	0
93531	TC	A	Right and left catheter	46.36	46.36	000	0	0	0	0	0
93532		A	Right and left catheter	61.37	61.37	000	2	0	0	0	0
93532	26	A	Right and left catheter	16.25	16.25	000	2	0	0	0	0
93532	TC	A	Right and left catheter	45.12	45.12	000	0	0	0	0	0
93533		A	Right and left catheter	54.16	54.16	000	2	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
93533	26	A	Right and left catheter	9.03	9.03	000	2	0	0	0	0
93533	TC	A	Right and left catheter	45.12	45.12	000	0	0	0	0	0
93536		A	Insert circulation	9.95	9.95	000	2	0	0	0	0
93539		A	Injection, cardiac	1.32	0.90	000	0	0	0	0	0
93540		A	Injection, cardiac	1.35	0.95	000	0	0	0	0	0
93541		A	Injection for lung	0.66	0.66	000	0	0	0	0	0
93542		A	Injection for heart	0.66	0.66	000	0	0	0	0	0
93543		A	Injection for heart	0.87	0.63	000	0	0	0	0	0
93544		A	Injection for aorta	0.84	0.56	000	0	0	0	0	0
93545		A	Injection for coronary	0.92	0.92	000	0	0	0	0	0
93555		A	Imaging, cardiac	7.00	7.00	XXX	0	0	0	0	0
93555	26	A	Imaging, cardiac	1.02	1.02	XXX	0	0	0	0	0
93555	TC	A	Imaging, cardiac	5.99	5.99	XXX	0	0	0	0	0
93556		A	Imaging, cardiac	10.66	10.66	XXX	0	0	0	0	0
93556	26	A	Imaging, cardiac	1.23	1.23	XXX	0	0	0	0	0
93556	TC	A	Imaging, cardiac	9.43	9.43	XXX	0	0	0	0	0
93561		A	Cardiac output	1.56	1.56	000	0	0	0	0	0
93561	26	A	Cardiac output	1.03	1.03	000	0	0	0	0	0
93561	TC	A	Cardiac output	0.52	0.52	000	0	0	0	0	0
93562		A	Cardiac output	0.66	0.66	000	0	0	0	0	0
93562	26	A	Cardiac output	0.35	0.35	000	0	0	0	0	0
93562	TC	A	Cardiac output	0.31	0.31	000	0	0	0	0	0

(32) Cardiovascular, intracardiac eletrophysiological procedures:

93600		A	Bundle of His recording	6.18	6.18	000	0	0	0	0	0
93600	26	A	Bundle of His recording	4.31	4.31	000	0	0	0	0	0
93600	TC	A	Bundle of His recording	1.87	1.87	000	0	0	0	0	0
93602		A	Intra-atrial recording	4.78	4.78	000	0	0	0	0	0
93602	26	A	Intra-atrial recording	3.71	3.71	000	0	0	0	0	0
93602	TC	A	Intra-atrial recording	1.07	1.07	000	0	0	0	0	0
93603		A	Right ventricular	5.74	5.74	000	0	0	0	0	0
93603	26	A	Right ventricular	4.13	4.13	000	0	0	0	0	0
93603	TC	A	Right ventricular	1.61	1.61	000	0	0	0	0	0
93607		A	Left ventricular	6.62	6.62	000	0	0	0	0	0
93607	26	A	Left ventricular	5.19	5.19	000	0	0	0	0	0
93607	TC	A	Left ventricular	1.43	1.43	000	0	0	0	0	0
93609		A	Mapping of tachycardia	15.61	15.61	000	0	0	0	0	0
93609	26	A	Mapping of tachycardia	13.01	13.01	000	0	0	0	0	0
93609	TC	A	Mapping of tachycardia	2.61	2.61	000	0	0	0	0	0
93610		A	Intra-atrial pacing	6.37	6.37	000	0	0	0	0	0
93610	26	A	Intra-atrial pacing	5.07	5.07	000	0	0	0	0	0
93610	TC	A	Intra-atrial pacing	1.30	1.30	000	0	0	0	0	0
93612		A	Intraventricular pacing	6.65	6.65	000	0	0	0	0	0
93612	26	A	Intraventricular pacing	5.10	5.10	000	0	0	0	0	0
93612	TC	A	Intraventricular pacing	1.55	1.55	000	0	0	0	0	0
93615		A	Esophageal recording	1.55	1.55	000	0	0	0	0	0
93615	26	A	Esophageal recording	1.25	1.25	000	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
93615	TC	A	Esophageal recording	0.30	0.30	000	0	0	0	0	0
93616		A	Esophageal recording	3.01	3.01	000	0	0	0	0	0
93616	26	A	Esophageal recording	2.71	2.71	000	0	0	0	0	0
93616	TC	A	Esophageal recording	0.30	0.30	000	0	0	0	0	0
93618		A	Heart rhythm pacing	12.45	12.45	000	0	0	0	0	0
93618	26	A	Heart rhythm pacing	8.64	8.64	000	0	0	0	0	0
93618	TC	A	Heart rhythm pacing	3.81	3.81	000	0	0	0	0	0
93619		A	Electrophysiologic	22.28	22.28	000	0	0	0	0	0
93619	26	A	Electrophysiologic	14.90	14.90	000	0	0	0	0	0
93619	TC	A	Electrophysiologic	7.39	7.39	000	0	0	0	0	0
93620		A	Electrophysiologic	31.94	31.94	000	0	0	0	0	0
93620	26	A	Electrophysiologic	23.36	23.36	000	0	0	0	0	0
93620	TC	A	Electrophysiologic	8.58	8.58	000	0	0	0	0	0
93621		C	Electrophysiologic	0.00	0.00	000	0	0	0	0	0
93621	26	A	Electrophysiologic	25.56	25.56	000	0	0	0	0	0
93621	TC	C	Electrophysiologic	0.00	0.00	000	0	0	0	0	0
93622		C	Electrophysiologic	0.00	0.00	000	0	0	0	0	0
93622	26	A	Electrophysiologic	25.69	25.69	000	0	0	0	0	0
93622	TC	C	Electrophysiologic	0.00	0.00	000	0	0	0	0	0
93623		C	Stimulation and pacing	0.00	0.00	000	0	0	0	0	0
93623	26	A	Stimulation and pacing	5.38	5.38	000	0	0	0	0	0
93623	TC	C	Stimulation and pacing	0.00	0.00	000	0	0	0	0	0
93624		A	Electrophysiologic	9.27	9.27	000	0	0	0	0	0
93624	26	A	Electrophysiologic	7.37	7.37	000	0	0	0	0	0
93624	TC	A	Electrophysiologic	1.90	1.90	000	0	0	0	0	0
93631		A	Heart pacing and mapping	18.88	18.88	000	0	0	0	0	0
93631	26	A	Heart pacing and mapping	12.83	12.83	000	0	0	0	0	0
93631	TC	A	Heart pacing and mapping	6.05	6.05	000	0	0	0	0	0
93640		A	Evaluate heart device	14.14	14.14	000	0	0	0	0	0
93640	26	A	Evaluate heart device	7.27	7.27	000	0	0	0	0	0
93640	TC	A	Evaluate heart device	6.87	6.87	000	0	0	0	0	0
93641		A	Electrophysiologic	18.89	18.89	000	0	0	0	0	0
93641	26	A	Electrophysiologic	12.02	12.02	000	0	0	0	0	0
93641	TC	A	Electrophysiologic	6.87	6.87	000	0	0	0	0	0
93642		A	Electrophysiologic	16.84	16.84	000	0	0	0	0	0
93642	26	A	Electrophysiologic	9.97	9.97	000	0	0	0	0	0
93642	TC	A	Electrophysiologic	6.87	6.87	000	0	0	0	0	0
93650		A	Ablate heart	21.45	21.45	000	0	0	0	0	0
93651		A	Ablate heart	32.71	32.71	000	0	0	0	0	0
93652		A	Ablate heart	34.01	34.01	000	0	0	0	0	0
93660		C	Tilt table evaluation	0.00	0.00	000	0	0	0	0	0
93660	26	A	Tilt table evaluation	3.20	3.20	000	0	0	0	0	0
93660	TC	C	Tilt table evaluation	0.00	0.00	000	0	0	0	0	0

(33) Cardiovascular, other vascular studies:

93720		A	Body plethysmography	1.07	1.04	XXX	0	0	0	0	0
93721		A	Plethysmography	0.69	0.36	XXX	0	0	0	0	0
93722		A	Plethysmography	0.38	0.35	XXX	0	0	0	0	0
93724		A	Analyze pacemaker	11.15	11.15	000	0	0	0	0	0
93724	26	A	Analyze pacemaker	7.34	7.34	000	0	0	0	0	0
93724	TC	A	Analyze pacemaker	3.81	3.81	000	0	0	0	0	0
93731		A	Analyze pacemaker	1.21	1.21	XXX	0	0	0	0	0
93731	26	A	Analyze pacemaker	0.73	0.73	XXX	0	0	0	0	0
93731	TC	A	Analyze pacemaker	0.48	0.48	XXX	0	0	0	0	0

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Proposed Rules

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93732		A	Analyze pacemaker	1.76	1.76	XXX	0	0	0	0	0
93732	26	A	Analyze pacemaker	1.26	1.26	XXX	0	0	0	0	0
93732	TC	A	Analyze pacemaker	0.50	0.50	XXX	0	0	0	0	0
93733		A	Telephone analysis	1.05	1.05	XXX	0	0	0	0	0
93733	26	A	Telephone analysis	0.35	0.35	XXX	0	0	0	0	0
93733	TC	A	Telephone analysis	0.70	0.70	XXX	0	0	0	0	0
93734		A	Analyze pacemaker	1.00	1.00	XXX	0	0	0	0	0
93734	26	A	Analyze pacemaker	0.66	0.66	XXX	0	0	0	0	0
93734	TC	A	Analyze pacemaker	0.34	0.34	XXX	0	0	0	0	0
93735		A	Analyze pacemaker	1.54	1.54	XXX	0	0	0	0	0
93735	26	A	Analyze pacemaker	1.11	1.11	XXX	0	0	0	0	0
93735	TC	A	Analyze pacemaker	0.43	0.43	XXX	0	0	0	0	0
93736		A	Telephone analysis	0.93	0.93	XXX	0	0	0	0	0
93736	26	A	Telephone analysis	0.32	0.32	XXX	0	0	0	0	0
93736	TC	A	Telephone analysis	0.61	0.61	XXX	0	0	0	0	0
93737		A	Analyze cardio/defib	1.16	1.16	XXX	0	0	0	0	0
93737	26	A	Analyze cardio/defib	0.68	0.68	XXX	0	0	0	0	0
93737	TC	A	Analyze cardio/defib	0.48	0.48	XXX	0	0	0	0	0
93738		A	Analyze cardio/defib	1.72	1.72	XXX	0	0	0	0	0
93738	26	A	Analyze cardio/defib	1.23	1.23	XXX	0	0	0	0	0
93738	TC	A	Analyze cardio/defib	0.50	0.50	XXX	0	0	0	0	0
93740		A	Temperature gradient	0.60	0.60	XXX	0	0	0	0	0
93740	26	A	Temperature gradient	0.45	0.45	XXX	0	0	0	0	0
93740	TC	A	Temperature gradient	0.15	0.15	XXX	0	0	0	0	0
93760		N	Cephalic thermogram	0.00	0.00	XXX	9	9	9	9	9
93762		N	Peripheral thermogram	0.00	0.00	XXX	9	9	9	9	9
93770		A	Measure venous pressure	0.35	0.35	XXX	0	0	0	0	0
93770	26	A	Measure venous pressure	0.32	0.32	XXX	0	0	0	0	0
93770	TC	A	Measure venous pressure	0.03	0.03	XXX	0	0	0	0	0
93784		N	Ambulatory BP monitoring	0.00	0.00	XXX	9	9	9	9	9
93786		N	Ambulatory BP recording	0.00	0.00	XXX	9	9	9	9	9
93788		N	Ambulatory BP analysis	0.00	0.00	XXX	9	9	9	9	9
93790		N	Ambulatory BP review	0.00	0.00	XXX	9	9	9	9	9

(34) Cardiovascular, other procedures:

93797		A	Cardiac rehabilitation	0.37	0.27	000	0	0	0	0	0
93798		A	With monitoring	0.73	0.50	000	0	0	0	0	0
93799		C	Cardiovascular procedure	0.00	0.00	XXX	0	0	0	0	0
93799	26	C	Cardiovascular procedure	0.00	0.00	XXX	0	0	0	0	0
93799	TC	C	Cardiovascular procedure	0.00	0.00	XXX	0	0	0	0	0

(35) Noninvasive vascular diagnostic studies, cerebrovascular arterial studies:

93875		A	Extracranial studies	1.55	1.55	XXX	0	2	0	0	0
93875	26	A	Extracranial studies	0.46	0.46	XXX	0	2	0	0	0
93875	TC	A	Extracranial studies	1.08	1.08	XXX	0	2	0	0	0
93880		A	Extracranial studies	4.59	4.59	XXX	0	2	0	0	0

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93880	26	A	Extracranial studies	0.94	0.94	XXX	0	2	0	0	0
93880	TC	A	Extracranial studies	3.65	3.65	XXX	0	2	0	0	0
93882		A	Extracranial studies	3.05	3.05	XXX	0	0	0	0	0
93882	26	A	Extracranial studies	0.63	0.63	XXX	0	0	0	0	0
93882	TC	A	Extracranial studies	2.42	2.42	XXX	0	0	0	0	0
93886		A	Intracranial studies	5.42	5.42	XXX	0	0	0	0	0
93886	26	A	Intracranial studies	1.29	1.29	XXX	0	0	0	0	0
93886	TC	A	Intracranial studies	4.13	4.13	XXX	0	0	0	0	0
93888		A	Intracranial studies	3.61	3.61	XXX	0	0	0	0	0
93888	26	A	Intracranial studies	0.85	0.85	XXX	0	0	0	0	0
93888	TC	A	Intracranial studies	2.76	2.76	XXX	0	0	0	0	0

(36) Noninvasive vascular diagnostic studies, extremity arterial studies:

93922		A	Extremity study	1.66	1.66	XXX	0	2	0	0	0
93922	26	A	Extremity study	0.52	0.52	XXX	0	2	0	0	0
93922	TC	A	Extremity study	1.14	1.14	XXX	0	2	0	0	0
93923		A	Extremity study	3.09	3.09	XXX	0	2	0	0	0
93923	26	A	Extremity study	0.94	0.94	XXX	0	2	0	0	0
93923	TC	A	Extremity study	2.15	2.15	XXX	0	2	0	0	0
93924		A	Extremity study	3.38	3.38	XXX	0	2	0	0	0
93924	26	A	Extremity study	1.04	1.04	XXX	0	2	0	0	0
93924	TC	A	Extremity study	2.34	2.34	XXX	0	2	0	0	0
93925		A	Lower extremity study	4.59	4.59	XXX	0	2	0	0	0
93925	26	A	Lower extremity study	0.93	0.93	XXX	0	2	0	0	0
93925	TC	A	Lower extremity study	3.67	3.67	XXX	0	2	0	0	0
93926		A	Lower extremity study	3.07	3.07	XXX	0	0	0	0	0
93926	26	A	Lower extremity study	0.62	0.62	XXX	0	0	0	0	0
93926	TC	A	Lower extremity study	2.45	2.45	XXX	0	0	0	0	0
93930		A	Upper extremity study	4.71	4.71	XXX	0	2	0	0	0
93930	26	A	Upper extremity study	0.82	0.82	XXX	0	2	0	0	0
93930	TC	A	Upper extremity study	3.89	3.89	XXX	0	2	0	0	0
93931		A	Upper extremity study	3.14	3.14	XXX	0	0	0	0	0
93931	26	A	Upper extremity study	0.55	0.55	XXX	0	0	0	0	0
93931	TC	A	Upper extremity study	2.59	2.59	XXX	0	0	0	0	0

(37) Noninvasive vascular diagnostic studies, extremity venous studies:

93965		A	Extremity study	1.80	1.80	XXX	0	2	0	0	0
93965	26	A	Extremity study	0.73	0.73	XXX	0	2	0	0	0
93965	TC	A	Extremity study	1.08	1.08	XXX	0	2	0	0	0
93970		A	Extremity study	5.08	5.08	XXX	0	2	0	0	0
93970	26	A	Extremity study	1.03	1.03	XXX	0	2	0	0	0
93970	TC	A	Extremity study	4.05	4.05	XXX	0	2	0	0	0
93971		A	Extremity study	3.39	3.39	XXX	0	0	0	0	0
93971	26	A	Extremity study	0.69	0.69	XXX	0	0	0	0	0
93971	TC	A	Extremity study	2.70	2.70	XXX	0	0	0	0	0

(38) Noninvasive vascular diagnostic studies, visceral and penile vascular studies:

93975		A	Vascular study	6.67	6.67	XXX	0	0	0	0	0
93975	26	A	Vascular study	2.07	2.07	XXX	0	0	0	0	0
93975	TC	A	Vascular study	4.60	4.60	XXX	0	0	0	0	0
93976		A	Vascular study	4.46	4.46	XXX	0	0	0	0	0
93976	26	A	Vascular study	1.39	1.39	XXX	0	0	0	0	0

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93976	TC	A	Vascular study	3.08	3.08	XXX	0	0	0	0	0
93978		A	Vascular study	4.77	4.77	XXX	0	0	0	0	0
93978	26	A	Vascular study	0.99	0.99	XXX	0	0	0	0	0
93978	TC	A	Vascular study	3.78	3.78	XXX	0	0	0	0	0
93979		A	Vascular study	3.18	3.18	XXX	0	0	0	0	0
93979	26	A	Vascular study	0.67	0.67	XXX	0	0	0	0	0
93979	TC	A	Vascular study	2.51	2.51	XXX	0	0	0	0	0
93980		A	Penile vascular study	5.39	5.39	XXX	0	0	0	0	0
93980	26	A	Penile vascular study	1.97	1.97	XXX	0	0	0	0	0
93980	TC	A	Penile vascular study	3.43	3.43	XXX	0	0	0	0	0
93981		A	Penile vascular study	3.97	3.97	XXX	0	0	0	0	0
93981	26	A	Penile vascular study	0.80	0.80	XXX	0	0	0	0	0
93981	TC	A	Penile vascular study	3.16	3.16	XXX	0	0	0	0	0

(39) Noninvasive vascular diagnostic studies, extremity arterial-venous studies:

93990		A	Doppler flow test	2.87	2.87	XXX	0	0	0	0	0
93990	26	A	Doppler flow test	0.42	0.42	XXX	0	0	0	0	0
93990	TC	A	Doppler flow test	2.45	2.45	XXX	0	0	0	0	0

(40) Pulmonary:

94010		A	Breathing capacity	0.84	0.84	XXX	0	0	0	0	0
94010	26	A	Breathing capacity	0.44	0.44	XXX	0	0	0	0	0
94010	TC	A	Breathing capacity	0.40	0.40	XXX	0	0	0	0	0
94060		A	Bronchospasm evaluation	1.52	1.52	XXX	0	0	0	0	0
94060	26	A	Bronchospasm evaluation	0.63	0.63	XXX	0	0	0	0	0
94060	TC	A	Bronchospasm evaluation	0.89	0.89	XXX	0	0	0	0	0
94070		A	Bronchospasm evaluation	2.33	2.33	XXX	0	0	0	0	0
94070	26	A	Bronchospasm evaluation	0.93	0.93	XXX	0	0	0	0	0
94070	TC	A	Bronchospasm evaluation	1.40	1.40	XXX	0	0	0	0	0
94150		B	Vital capacity	0.00	0.00	XXX	9	9	9	9	9
94150	26	B	Vital capacity	0.00	0.00	XXX	9	9	9	9	9
94150	TC	B	Vital capacity	0.00	0.00	XXX	9	9	9	9	9
94200		A	Lung function	0.46	0.46	XXX	0	0	0	0	0
94200	26	A	Lung function	0.22	0.22	XXX	0	0	0	0	0
94200	TC	A	Lung function	0.24	0.24	XXX	0	0	0	0	0
94240		A	Residual lung capacity	1.12	1.12	XXX	0	0	0	0	0
94240	26	A	Residual lung capacity	0.47	0.47	XXX	0	0	0	0	0
94240	TC	A	Residual lung capacity	0.66	0.66	XXX	0	0	0	0	0
94250		A	Expired gas collection	0.35	0.35	XXX	0	0	0	0	0
94250	26	A	Expired gas collection	0.22	0.22	XXX	0	0	0	0	0
94250	TC	A	Expired gas collection	0.13	0.13	XXX	0	0	0	0	0
94260		A	Thoracic gas volume	0.79	0.79	XXX	0	0	0	0	0
94260	26	A	Thoracic gas volume	0.26	0.26	XXX	0	0	0	0	0
94260	TC	A	Thoracic gas volume	0.52	0.52	XXX	0	0	0	0	0
94350		A	Lung nitrogen	0.97	0.97	XXX	0	0	0	0	0
94350	26	A	Lung nitrogen	0.44	0.44	XXX	0	0	0	0	0

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94350	TC	A	Lung nitrogen	0.52	0.52	XXX	0	0	0	0	0
94360		A	Measure airflow	1.35	1.35	XXX	0	0	0	0	0
94360	26	A	Measure airflow	0.43	0.43	XXX	0	0	0	0	0
94360	TC	A	Measure airflow	0.92	0.92	XXX	0	0	0	0	0
94370		A	Breath airway closing	0.64	0.64	XXX	0	0	0	0	0
94370	26	A	Breath airway closing	0.38	0.38	XXX	0	0	0	0	0
94370	TC	A	Breath airway closing	0.26	0.26	XXX	0	0	0	0	0
94375		A	Respiratory flow	0.95	0.95	XXX	0	0	0	0	0
94375	26	A	Respiratory flow	0.49	0.49	XXX	0	0	0	0	0
94375	TC	A	Respiratory flow	0.46	0.46	XXX	0	0	0	0	0
94400		A	CO2 breathing response	1.21	1.21	XXX	0	0	0	0	0
94400	26	A	CO2 breathing response	0.89	0.89	XXX	0	0	0	0	0
94400	TC	A	CO2 breathing response	0.32	0.32	XXX	0	0	0	0	0
94450		A	Hypoxia response	0.98	0.98	XXX	0	0	0	0	0
94450	26	A	Hypoxia response	0.61	0.61	XXX	0	0	0	0	0
94450	TC	A	Hypoxia response	0.37	0.37	XXX	0	0	0	0	0
94620		A	Pulmonary stress testing	2.86	2.86	XXX	0	0	0	0	0
94620	26	A	Pulmonary stress testing	1.50	1.50	XXX	0	0	0	0	0
94620	TC	A	Pulmonary stress testing	1.36	1.36	XXX	0	0	0	0	0
94640		A	Airway inhalation	0.39	0.39	XXX	0	0	0	0	0
94642		C	Aerosol inhalation	0.00	0.00	XXX	0	0	0	0	0
94650		A	Pressure breathing	0.37	0.37	XXX	0	0	0	0	0
94651		A	Pressure breathing	0.36	0.36	XXX	0	0	0	0	0
94652		A	Pressure breathing	0.44	0.44	XXX	0	0	0	0	0
94656		A	Initial ventilation	2.27	2.27	XXX	0	0	0	0	0
94657		A	Subsequent ventilation	1.38	1.38	XXX	0	0	0	0	0
94660		A	Positive airway pressure	1.41	1.41	XXX	0	0	0	0	0
94662		A	Negative pressure	0.99	0.99	XXX	0	0	0	0	0
94664		A	Aerosol or vapor	0.51	0.51	XXX	0	0	0	0	0
94665		A	Aerosol or vapor	0.47	0.47	XXX	0	0	0	0	0
94667		A	Chest wall manipulation	0.56	0.56	XXX	0	0	0	0	0
94668		A	Chest wall manipulation	0.34	0.34	XXX	0	0	0	0	0
94680		A	Exhaled air analysis	1.04	1.04	XXX	0	0	0	0	0
94680	26	A	Exhaled air analysis	0.53	0.53	XXX	0	0	0	0	0
94680	TC	A	Exhaled air analysis	0.51	0.51	XXX	0	0	0	0	0
94681		A	Exhaled air analysis	1.76	1.76	XXX	0	0	0	0	0
94681	26	A	Exhaled air analysis	0.42	0.42	XXX	0	0	0	0	0
94681	TC	A	Exhaled air analysis	1.35	1.35	XXX	0	0	0	0	0
94690		A	Exhaled air analysis	0.63	0.63	XXX	0	0	0	0	0
94690	26	A	Exhaled air analysis	0.11	0.11	XXX	0	0	0	0	0
94690	TC	A	Exhaled air analysis	0.51	0.51	XXX	0	0	0	0	0
94720		A	Carbon monoxide diffusion	1.28	1.28	XXX	0	0	0	0	0
94720	26	A	Carbon monoxide diffusion	0.47	0.47	XXX	0	0	0	0	0
94720	TC	A	Carbon monoxide diffusion	0.81	0.81	XXX	0	0	0	0	0
94725		A	Membrane diffusion	2.09	2.09	XXX	0	0	0	0	0
94725	26	A	Membrane diffusion	0.42	0.42	XXX	0	0	0	0	0
94725	TC	A	Membrane diffusion	1.68	1.68	XXX	0	0	0	0	0
94750		A	Pulmonary compliance	1.01	1.01	XXX	0	0	0	0	0
94750	26	A	Pulmonary compliance	0.46	0.46	XXX	0	0	0	0	0
94750	TC	A	Pulmonary compliance	0.55	0.55	XXX	0	0	0	0	0
94760		A	Measure blood oxygen	0.25	0.25	XXX	0	0	0	0	0
94761		A	Measure blood oxygen	0.65	0.65	XXX	0	0	0	0	0
94762		A	Measure blood oxygen	1.10	1.10	XXX	0	0	0	0	0
94770		A	Exhaled carbon dioxide	0.58	0.58	XXX	0	0	0	0	0
94770	26	A	Exhaled carbon dioxide	0.26	0.26	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
94770	TC	A	Exhaled carbon dioxide	0.32	0.32	XXX	0	0	0	0	0
94772		C	Breath recording	0.00	0.00	XXX	0	0	0	0	0
94772	26	C	Breath recording	0.00	0.00	XXX	0	0	0	0	0
94772	TC	C	Breath recording	0.00	0.00	XXX	0	0	0	0	0
94799		C	Pulmonary procedure	0.00	0.00	XXX	0	0	0	0	0
94799	26	C	Pulmonary procedure	0.00	0.00	XXX	0	0	0	0	0
94799	TC	C	Pulmonary procedure	0.00	0.00	XXX	0	0	0	0	0

(41) Allergy and clinical immunology, allergy testing:

95004		A	Allergy skin testing	0.09	0.09	XXX	0	0	0	0	0
95010		A	Sensitivity skin test	0.25	0.19	XXX	0	0	0	0	0
95015		A	Sensitivity skin test	0.25	0.19	XXX	0	0	0	0	0
95024		A	Allergy skin test	0.14	0.14	XXX	0	0	0	0	0
95027		A	Skin end point	0.14	0.14	XXX	0	0	0	0	0
95028		A	Allergy skin test	0.22	0.22	XXX	0	0	0	0	0
95044		A	Allergy patch test	0.19	0.19	XXX	0	0	0	0	0
95052		A	Photo patch test	0.24	0.24	XXX	0	0	0	0	0
95056		A	Photosensitivity	0.17	0.09	XXX	0	0	0	0	0
95060		A	Eye allergy test	0.33	0.33	XXX	0	0	0	0	0
95065		A	Nose allergy test	0.19	0.10	XXX	0	0	0	0	0
95070		A	Bronchial allergy test	2.11	2.11	XXX	0	0	0	0	0
95071		A	Bronchial allergy test	2.70	2.70	XXX	0	0	0	0	0
95075		A	Ingestion challenge test	2.78	1.82	XXX	0	0	0	0	0
95078		A	Provocative testing	0.24	0.24	XXX	0	0	0	0	0

(42) Allergy and clinical immunology, allergen immunotherapy:

95115		A	Immunotherapy	0.37	0.37	000	0	0	0	0	0
95117		A	Immunotherapy	0.47	0.47	000	0	0	0	0	0
95120		I	Immunotherapy	0.00	0.00	XXX	9	9	9	9	9
95125		I	Immunotherapy	0.00	0.00	XXX	9	9	9	9	9
95130		I	Immunotherapy	0.00	0.00	XXX	9	9	9	9	9
95131		I	Immunotherapy	0.00	0.00	XXX	9	9	9	9	9
95132		I	Immunotherapy	0.00	0.00	XXX	9	9	9	9	9
95133		I	Immunotherapy	0.00	0.00	XXX	9	9	9	9	9
95134		I	Immunotherapy	0.00	0.00	XXX	9	9	9	9	9
95144		A	Antigen therapy	0.19	0.12	000	0	0	0	0	0
95145		A	Antigen therapy	0.40	0.24	000	0	0	0	0	0
95146		A	Antigen therapy	0.66	0.37	000	0	0	0	0	0
95147		A	Antigen therapy	0.95	0.51	000	0	0	0	0	0
95148		A	Antigen therapy	0.95	0.51	000	0	0	0	0	0
95149		A	Antigen therapy	1.17	0.62	000	0	0	0	0	0
95165		A	Antigen therapy	0.16	0.11	000	0	0	0	0	0
95170		A	Antigen therapy	0.41	0.24	000	0	0	0	0	0
95180		A	Rapid desensitization	1.97	1.90	000	0	0	0	0	0
95199		C	Allergy immunology	0.00	0.00	000	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(43) Neurology and neuromuscular procedures, sleep testing:											
95805		A	Multiple sleep latency	7.28	7.28	XXX	0	0	0	0	0
95805	26	A	Multiple sleep latency	2.29	2.29	XXX	0	0	0	0	0
95805	TC	A	Multiple sleep latency	4.99	4.99	XXX	0	0	0	0	0
95806		A	Sleep study, unattended	8.75	8.15	XXX	0	0	0	0	0
95806	26	A	Sleep study, unattended	3.98	3.38	XXX	0	0	0	0	0
95806	TC	A	Sleep study, unattended	4.77	4.77	XXX	0	0	0	0	0
95807		A	Sleep study, attended	9.73	9.73	XXX	0	0	0	0	0
95807	26	A	Sleep study, attended	3.38	3.38	XXX	0	0	0	0	0
95807	TC	A	Sleep study, attended	6.35	6.35	XXX	0	0	0	0	0
95808		A	Polysomnography	11.23	11.23	XXX	0	0	0	0	0
95808	26	A	Polysomnography	4.88	4.88	XXX	0	0	0	0	0
95808	TC	A	Polysomnography	6.35	6.35	XXX	0	0	0	0	0
95810		A	Polysomnography	12.03	12.03	XXX	0	0	0	0	0
95810	26	A	Polysomnography	5.68	5.68	XXX	0	0	0	0	0
95810	TC	A	Polysomnography	6.35	6.35	XXX	0	0	0	0	0
95811		A	Polysomnography	12.71	12.71	XXX	0	0	0	0	0
95811	26	A	Polysomnography	6.04	6.04	XXX	0	0	0	0	0
95811	TC	A	Polysomnography	6.67	6.67	XXX	0	0	0	0	0
95812		A	Electroencephalogram	2.85	2.85	XXX	0	0	0	0	0
95812	26	A	Electroencephalogram	1.49	1.49	XXX	0	0	0	0	0
95812	TC	A	Electroencephalogram	1.36	1.36	XXX	0	0	0	0	0
95813		A	Electroencephalogram	3.44	3.44	XXX	0	0	0	0	0
95813	26	A	Electroencephalogram	2.08	2.08	XXX	0	0	0	0	0
95813	TC	A	Electroencephalogram	1.36	1.36	XXX	0	0	0	0	0
95816		A	Electroencephalogram	2.54	2.54	XXX	0	0	0	0	0
95816	26	A	Electroencephalogram	1.27	1.27	XXX	0	0	0	0	0
95816	TC	A	Electroencephalogram	1.27	1.27	XXX	0	0	0	0	0
95819		A	Electroencephalogram	2.80	2.80	XXX	0	0	0	0	0
95819	26	A	Electroencephalogram	1.49	1.49	XXX	0	0	0	0	0
95819	TC	A	Electroencephalogram	1.31	1.31	XXX	0	0	0	0	0
95822		A	Sleep EEG	3.28	3.28	XXX	0	0	0	0	0
95822	26	A	Sleep EEG	1.54	1.54	XXX	0	0	0	0	0
95822	TC	A	Sleep EEG	1.74	1.74	XXX	0	0	0	0	0
95824		A	Cerebral death EEG	1.66	1.66	XXX	0	0	0	0	0
95824	26	A	Cerebral death EEG	1.25	1.25	XXX	0	0	0	0	0
95824	TC	A	Cerebral death EEG	0.40	0.40	XXX	0	0	0	0	0
95827		A	Night sleep EEG	4.07	4.07	XXX	0	0	0	0	0
95827	26	A	Night sleep EEG	1.87	1.87	XXX	0	0	0	0	0
95827	TC	A	Night sleep EEG	2.20	2.20	XXX	0	0	0	0	0
95829		A	Electrocorticogram	6.24	6.24	XXX	0	0	0	0	0
95829	26	A	Electrocorticogram	6.09	6.09	XXX	0	0	0	0	0
95829	TC	A	Electrocorticogram	0.15	0.15	XXX	0	0	0	0	0
95830		A	Insert electrodes	2.34	2.34	XXX	0	0	0	0	0
95831		A	Limb muscle test	0.55	0.41	XXX	0	0	0	0	0
95832		A	Hand muscle test	0.52	0.40	XXX	0	0	0	0	0
95833		A	Body muscle test	0.82	0.64	XXX	0	0	0	0	0
95834		A	Body muscle test	1.17	0.87	XXX	0	0	0	0	0
95851		A	Range of motion	0.39	0.27	XXX	0	0	0	0	0
95852		A	Range of motion	0.26	0.18	XXX	0	0	0	0	0
95857		A	Tensilon test	0.99	0.74	XXX	0	0	0	0	0
95858		A	Tensilon test, recording	2.45	2.45	XXX	0	0	0	0	0
95858	26	A	Tensilon test, recording	2.06	2.06	XXX	0	0	0	0	0
95858	TC	A	Tensilon test, recording	0.39	0.39	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
95860		A	Muscle test, one	1.97	1.97	XXX	0	0	0	0	0
95860	26	A	Muscle test, one	1.61	1.61	XXX	0	0	0	0	0
95860	TC	A	Muscle test, one	0.36	0.36	XXX	0	0	0	0	0
95861		A	Muscle test, two	3.39	3.39	XXX	0	0	0	0	0
95861	26	A	Muscle test, two	2.68	2.68	XXX	0	0	0	0	0
95861	TC	A	Muscle test, two	0.71	0.71	XXX	0	0	0	0	0
95863		A	Muscle test, three	4.02	4.02	XXX	0	0	0	0	0
95863	26	A	Muscle test, three	3.12	3.12	XXX	0	0	0	0	0
95863	TC	A	Muscle test, three	0.90	0.90	XXX	0	0	0	0	0
95864		A	Muscle test, four	5.29	5.29	XXX	0	0	0	0	0
95864	26	A	Muscle test, four	3.57	3.57	XXX	0	0	0	0	0
95864	TC	A	Muscle test, four	1.71	1.71	XXX	0	0	0	0	0
95867		A	Muscle test, head	1.86	1.86	XXX	0	0	0	0	0
95867	26	A	Muscle test, head	1.31	1.31	XXX	0	0	0	0	0
95867	TC	A	Muscle test, head	0.55	0.55	XXX	0	0	0	0	0
95868		A	Muscle test, head	3.01	3.01	XXX	0	2	0	0	0
95868	26	A	Muscle test, head	2.34	2.34	XXX	0	2	0	0	0
95868	TC	A	Muscle test, head	0.67	0.67	XXX	0	2	0	0	0
95869		A	Muscle test, thoracic	0.88	0.88	XXX	0	0	0	0	0
95869	26	A	Muscle test, thoracic	0.67	0.67	XXX	0	0	0	0	0
95869	TC	A	Muscle test, thoracic	0.20	0.20	XXX	0	0	0	0	0
95870		A	Nonparaspinal muscle test	0.88	0.88	XXX	0	0	0	0	0
95870	26	A	Nonparaspinal muscle test	0.67	0.67	XXX	0	0	0	0	0
95870	TC	A	Nonparaspinal muscle test	0.20	0.20	XXX	0	0	0	0	0
95872		A	Nonparaspinal muscle test	2.63	2.63	XXX	0	0	0	0	0
95872	26	A	Nonparaspinal muscle test	2.05	2.05	XXX	0	0	0	0	0
95872	TC	A	Nonparaspinal muscle test	0.58	0.58	XXX	0	0	0	0	0
95875		A	Limb exercise	1.85	1.85	XXX	0	0	0	0	0
95875	26	A	Limb exercise	1.45	1.45	XXX	0	0	0	0	0
95875	TC	A	Limb exercise	0.40	0.40	XXX	0	0	0	0	0
95900		A	Motor nerve conduction	1.01	1.01	XXX	0	0	0	0	0
95900	26	A	Motor nerve conduction	0.74	0.74	XXX	0	0	0	0	0
95900	TC	A	Motor nerve conduction	0.27	0.27	XXX	0	0	0	0	0
95903		A	Motor nerve conduction	1.14	1.14	XXX	0	0	0	0	0
95903	26	A	Motor nerve conduction	0.90	0.90	XXX	0	0	0	0	0
95903	TC	A	Motor nerve conduction	0.24	0.24	XXX	0	0	0	0	0
95904		A	Sensory nerve conduction	0.87	0.87	XXX	0	0	0	0	0
95904	26	A	Sensory nerve conduction	0.65	0.65	XXX	0	0	0	0	0
95904	TC	A	Sensory nerve conduction	0.21	0.21	XXX	0	0	0	0	0
95920		A	Intraoperative testing	4.60	4.60	XXX	0	0	0	0	0
95920	26	A	Intraoperative testing	3.36	3.36	XXX	0	0	0	0	0
95920	TC	A	Intraoperative testing	1.24	1.24	XXX	0	0	0	0	0
95921		A	Autonomic nervous system	1.50	1.50	XXX	0	0	0	0	0
95921	26	A	Autonomic nervous system	1.14	1.14	XXX	0	0	0	0	0
95921	TC	A	Autonomic nervous system	0.36	0.36	XXX	0	0	0	0	0
95922		A	Autonomic nervous system	1.58	1.58	XXX	0	0	0	0	0
95922	26	A	Autonomic nervous system	1.22	1.22	XXX	0	0	0	0	0
95922	TC	A	Autonomic nervous system	0.36	0.36	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
95923		A	Autonomic nervous system	1.50	1.50	XXX	0	0	0	0	0
95923	26	A	Autonomic nervous system	1.14	1.14	XXX	0	0	0	0	0
95923	TC	A	Autonomic nervous system	0.36	0.36	XXX	0	0	0	0	0
95925		A	Somatosensory study	2.02	2.02	XXX	0	2	0	0	0
95925	26	A	Somatosensory study	1.14	1.14	XXX	0	2	0	0	0
95925	TC	A	Somatosensory study	0.88	0.88	XXX	0	2	0	0	0
95926		A	Somatosensory study	2.02	2.02	XXX	0	2	0	0	0
95926	26	A	Somatosensory study	1.14	1.14	XXX	0	2	0	0	0
95926	TC	A	Somatosensory study	0.88	0.88	XXX	0	2	0	0	0
95927		A	Somatosensory study	2.02	2.02	XXX	0	0	0	0	0
95927	26	A	Somatosensory study	1.14	1.14	XXX	0	0	0	0	0
95927	TC	A	Somatosensory study	0.88	0.88	XXX	0	0	0	0	0
95930		A	Visual evoked potential	1.15	1.15	XXX	0	2	0	0	0
95930	26	A	Visual evoked potential	0.90	0.90	XXX	0	2	0	0	0
95930	TC	A	Visual evoked potential	0.25	0.25	XXX	0	2	0	0	0
95933		A	Blink reflex test	1.80	1.80	XXX	0	0	0	0	0
95933	26	A	Blink reflex test	1.04	1.04	XXX	0	0	0	0	0
95933	TC	A	Blink reflex test	0.76	0.76	XXX	0	0	0	0	0
95934		A	H-reflex study	1.01	1.01	XXX	0	1	0	0	0
95934	26	A	H-reflex study	0.81	0.81	XXX	0	1	0	0	0
95934	TC	A	H-reflex study	0.20	0.20	XXX	0	1	0	0	0
95936		A	H-reflex study	1.05	1.05	XXX	0	1	0	0	0
95936	26	A	H-reflex study	0.84	0.84	XXX	0	1	0	0	0
95936	TC	A	H-reflex study	0.20	0.20	XXX	0	1	0	0	0
95937		A	Neuromuscular junction	1.37	1.37	XXX	0	0	0	0	0
95937	26	A	Neuromuscular junction	1.05	1.05	XXX	0	0	0	0	0
95937	TC	A	Neuromuscular junction	0.33	0.33	XXX	0	0	0	0	0
95950		A	Ambulatory EEG	8.70	8.70	XXX	0	0	0	0	0
95950	26	A	Ambulatory EEG	2.59	2.59	XXX	0	0	0	0	0
95950	TC	A	Ambulatory EEG	6.11	6.11	XXX	0	0	0	0	0
95951		A	EEG monitoring	14.33	14.33	XXX	0	0	0	0	0
95951	26	A	EEG monitoring	6.96	6.96	XXX	0	0	0	0	0
95951	TC	A	EEG monitoring	7.37	7.37	XXX	0	0	0	0	0
95953		A	EEG monitoring	10.13	10.13	XXX	0	0	0	0	0
95953	26	A	EEG monitoring	4.02	4.02	XXX	0	0	0	0	0
95953	TC	A	EEG monitoring	6.11	6.11	XXX	0	0	0	0	0
95954		A	EEG monitoring	4.62	4.62	XXX	0	0	0	0	0
95954	26	A	EEG monitoring	4.15	4.15	XXX	0	0	0	0	0
95954	TC	A	EEG monitoring	0.47	0.47	XXX	0	0	0	0	0
95955		A	EEG during surgery	3.88	3.88	XXX	0	0	0	0	0
95955	26	A	EEG during surgery	1.97	1.97	XXX	0	0	0	0	0
95955	TC	A	EEG during surgery	1.91	1.91	XXX	0	0	0	0	0
95956		A	EEG monitoring	10.42	10.42	XXX	0	0	0	0	0
95956	26	A	EEG monitoring	4.31	4.31	XXX	0	0	0	0	0
95956	TC	A	EEG monitoring	6.11	6.11	XXX	0	0	0	0	0
95957		A	EEG digital analysis	4.07	4.07	XXX	0	0	0	0	0
95957	26	A	EEG digital analysis	2.43	2.43	XXX	0	0	0	0	0
95957	TC	A	EEG digital analysis	1.64	1.64	XXX	0	0	0	0	0
95958		A	EEG monitoring	8.87	8.87	XXX	0	0	0	0	0
95958	26	A	EEG monitoring	7.19	7.19	XXX	0	0	0	0	0
95958	TC	A	EEG monitoring	1.68	1.68	XXX	0	0	0	0	0
95961		A	Electrode stimulation	5.39	5.39	XXX	0	0	0	0	0
95961	26	A	Electrode stimulation	4.14	4.14	XXX	0	0	0	0	0
95961	TC	A	Electrode stimulation	1.24	1.24	XXX	0	0	0	0	0
95962		A	Electrode stimulation	5.60	5.60	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
95962	26	A	Electrode stimulation	4.36	4.36	XXX	0	0	0	0	0
95962	TC	A	Electrode stimulation	1.24	1.24	XXX	0	0	0	0	0
95999		C	Neurological procedure	0.00	0.00	XXX	0	0	0	0	0

(44) Central nervous system assessments/tests:

96100		A	Psychological testing	1.73	1.73	XXX	0	0	0	0	0
96105		A	Assessment of aphasia	1.73	1.73	XXX	0	0	0	0	0
96110		C	Developmental testing	0.00	0.00	XXX	0	0	0	0	0
96111		A	Developmental testing	1.73	1.73	XXX	0	0	0	0	0
96115		A	Neurobehavioral status	1.73	1.73	XXX	0	0	0	0	0
96117		A	Neuropsychological test	1.73	1.73	XXX	0	0	0	0	0

(45) Chemotherapy administration:

96400		A	Chemotherapy	0.13	0.13	XXX	0	0	0	0	0
96405		A	Intralesional chemo	0.86	0.67	000	2	0	1	0	0
96406		A	Intralesional chemo	1.29	1.02	000	2	0	1	0	0
96408		A	Chemotherapy, push	0.92	0.92	XXX	0	0	0	0	0
96410		A	Chemotherapy, infusion	1.47	1.47	XXX	0	0	0	0	0
96412		A	Chemotherapy, infusion	1.11	1.11	XXX	0	0	0	0	0
96414		A	Chemotherapy, infusion	1.28	1.28	XXX	0	0	0	0	0
96420		A	Chemotherapy, push	1.20	1.20	XXX	0	0	0	0	0
96422		A	Chemotherapy, infusion	1.18	1.18	XXX	0	0	0	0	0
96423		A	Chemotherapy, infusion	0.46	0.46	XXX	0	0	0	0	0
96425		A	Chemotherapy, infusion	1.36	1.36	XXX	0	0	0	0	0
96440		A	Chemotherapy	2.97	2.97	000	0	0	0	0	0
96445		A	Chemotherapy	2.99	2.52	000	0	0	0	0	0
96450		A	Chemotherapy	2.59	2.17	000	0	0	0	0	0
96520		A	Pump refilling	0.85	0.85	XXX	0	0	0	0	0
96530		A	Pump refilling	1.01	1.01	XXX	0	0	0	0	0
96542		A	Chemotherapy injection	2.41	1.89	XXX	0	0	0	0	0
96545		B	Provide chemotherapy	0.00	0.00	XXX	9	9	9	9	9
96549		C	Chemotherapy procedure	0.00	0.00	XXX	0	0	0	0	0

(46) Special dermatological procedures:

96900		A	Ultraviolet light	0.38	0.38	XXX	0	0	0	0	0
96902		B	Trichogram	0.00	0.00	XXX	9	9	9	9	9
96910		A	Photochemotherapy	0.55	0.55	XXX	0	0	0	0	0
96912		A	Photochemotherapy	0.64	0.64	XXX	0	0	0	0	0
96913		A	Photochemotherapy	1.30	1.30	XXX	0	0	0	0	0
96999		C	Dermatological procedure	0.00	0.00	XXX	0	0	0	0	0

(47) Osteopathic manipulative treatment:

98925		A	Osteopathic manipulation	0.66	0.66	000	0	0	0	0	0
98926		A	Osteopathic manipulation	0.99	0.99	000	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
98927	A		Osteopathic manipulation	1.17	1.17	000	0	0	0	0	0
98928	A		Osteopathic manipulation	1.36	1.36	000	0	0	0	0	0
98929	A		Osteopathic manipulation	1.47	1.47	000	0	0	0	0	0

(48) Special services and reports, miscellaneous services:

99000	B		Specimen handling	0.00	0.00	XXX	9	9	9	9	9
99001	B		Specimen handling	0.00	0.00	XXX	9	9	9	9	9
99002	B		Device handling	0.00	0.00	XXX	9	9	9	9	9
99024	B		Postoperative follow-up	0.00	0.00	XXX	9	9	9	9	9
99025	B		Initial surgical	0.00	0.00	XXX	9	9	9	9	9
99050	B		Medical services	0.00	0.00	XXX	9	9	9	9	9
99052	B		Medical services	0.00	0.00	XXX	9	9	9	9	9
99054	B		Medical services	0.00	0.00	XXX	9	9	9	9	9
99056	B		Non-office medical	0.00	0.00	XXX	9	9	9	9	9
99058	B		Office emergency	0.00	0.00	XXX	9	9	9	9	9
99070	B		Special supplies	0.00	0.00	XXX	9	9	9	9	9
99071	B		Patient education	0.00	0.00	XXX	9	9	9	9	9
99075	N		Medical testimony	0.00	0.00	XXX	9	9	9	9	9
99078	B		Group health education	0.00	0.00	XXX	9	9	9	9	9
99080	B		Special reports	0.00	0.00	XXX	9	9	9	9	9
99082	C		Unusual travel	0.00	0.00	XXX	0	0	0	0	0
99090	B		Computer data analysis	0.00	0.00	XXX	9	9	9	9	9

(49) Qualifying circumstances for anesthesia:

99100	B		Special anesthesia	0.00	0.00	XXX	9	9	9	9	9
99116	B		Anesthesia	0.00	0.00	XXX	9	9	9	9	9
99135	B		Special anesthesia	0.00	0.00	XXX	9	9	9	9	9
99140	B		Emergency anesthesia	0.00	0.00	XXX	9	9	9	9	9

(50) Sedation with or without analgesia:

99141	B		Sedation	0.00	0.00	XXX	9	9	9	9	9
99142	B		Sedation, oral	0.00	0.00	XXX	9	9	9	9	9

(51) Other services:

99175	A		Induction of vomiting	1.34	1.34	XXX	0	0	0	0	0
99183	A		Hyperbaric oxygen therapy	3.80	3.80	XXX	0	0	0	0	0
99185	A		Regional hypothermia	0.61	0.61	XXX	0	0	0	0	0
99186	A		Total body hypothermia	1.93	1.93	XXX	0	0	0	0	0
99190	X		Special pump	0.00	0.00	XXX	9	9	9	9	9
99191	X		Special pump	0.00	0.00	XXX	9	9	9	9	9
99192	X		Special pump	0.00	0.00	XXX	9	9	9	9	9
99195	A		Phlebotomy	0.42	0.42	XXX	0	0	0	0	0
99199	C		Special service	0.00	0.00	XXX	0	0	0	0	0

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I. Procedure code numbers 99201 to 99449 relate to evaluation and management services.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(1) Office or other outpatient services, new patient:											
99201	A	Office/outpatient visit		0.84	0.61	XXX	0	0	0	0	0
99202	A	Office/outpatient visit		1.32	1.04	XXX	0	0	0	0	0
99203	A	Office/outpatient visit		1.82	1.50	XXX	0	0	0	0	0
99204	A	Office/outpatient visit		2.71	2.24	XXX	0	0	0	0	0
99205	A	Office/outpatient visit		3.40	2.88	XXX	0	0	0	0	0
(2) Office or other outpatient services, established patient:											
99211	A	Office/outpatient visit		0.37	0.26	XXX	0	0	0	0	0
99212	A	Office/outpatient visit		0.73	0.55	XXX	0	0	0	0	0
99213	A	Office/outpatient visit		1.04	0.81	XXX	0	0	0	0	0
99214	A	Office/outpatient visit		1.57	1.26	XXX	0	0	0	0	0
99215	A	Office/outpatient visit		2.48	2.01	XXX	0	0	0	0	0
(3) Hospital observation services:											
99217	A	Observation care		1.69	1.69	XXX	0	0	0	0	0
99218	A	Observation care		1.85	1.85	XXX	0	0	0	0	0
99219	A	Observation care		3.01	3.01	XXX	0	0	0	0	0
99220	A	Observation care		3.87	3.87	XXX	0	0	0	0	0
(4) Hospital inpatient services, initial hospital care, new or established patient:											
99221	A	Initial hospital care		1.84	1.84	XXX	0	0	0	0	0
99222	A	Initial hospital care		3.00	3.00	XXX	0	0	0	0	0
99223	A	Initial hospital care		3.85	3.85	XXX	0	0	0	0	0
(5) Hospital inpatient services, subsequent hospital care:											
99231	A	Subsequent hospital care		0.96	0.96	XXX	0	0	0	0	0
99232	A	Subsequent hospital care		1.42	1.42	XXX	0	0	0	0	0
99233	A	Subsequent hospital care		1.98	1.98	XXX	0	0	0	0	0
(6) Observation or inpatient services:											
99234	A	Observation, hospital		3.01	3.01	XXX	0	0	0	0	0
99235	A	Observation, hospital		4.17	4.17	XXX	0	0	0	0	0
99236	A	Observation, hospital		5.03	5.03	XXX	0	0	0	0	0
99238	A	Hospital discharge day		1.68	1.68	XXX	0	0	0	0	0
99239	A	Hospital discharge day		2.10	2.10	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(7) Consultations, office or other inpatient consultations, new or established patient:											
99241	A	Initial office consult		1.24	0.93	XXX	0	0	0	0	0
99242	A	Initial office consult		1.96	1.59	XXX	0	0	0	0	0
99243	A	Initial office consult		2.55	2.09	XXX	0	0	0	0	0
99244	A	Initial office consult		3.59	3.00	XXX	0	0	0	0	0
99245	A	Initial office consult		4.83	4.02	XXX	0	0	0	0	0
(8) Consultations, initial inpatient consultations, new or established patient:											
99251	A	Initial inpatient consult		1.29	1.29	XXX	0	0	0	0	0
99252	A	Initial inpatient consult		1.98	1.98	XXX	0	0	0	0	0
99253	A	Initial inpatient consult		2.63	2.63	XXX	0	0	0	0	0
99254	A	Initial inpatient consult		3.62	3.62	XXX	0	0	0	0	0
99255	A	Initial inpatient consult		4.91	4.91	XXX	0	0	0	0	0
(9) Consultations, follow-up inpatient consultations, established patient:											
99261	A	Follow-up inpatient		0.72	0.72	XXX	0	0	0	0	0
99262	A	Follow-up inpatient		1.24	1.24	XXX	0	0	0	0	0
99263	A	Follow-up inpatient		1.82	1.82	XXX	0	0	0	0	0
(10) Confirmatory consultations:											
99271	A	Confirmatory consultation		1.01	0.73	XXX	0	0	0	0	0
99272	A	Confirmatory consultation		1.50	1.16	XXX	0	0	0	0	0
99273	A	Confirmatory consultation		2.13	1.63	XXX	0	0	0	0	0
99274	A	Confirmatory consultation		2.81	2.22	XXX	0	0	0	0	0
99275	A	Confirmatory consultation		3.87	3.87	XXX	0	0	0	0	0
(11) Emergency department services:											
99281	A	Emergency room visit		0.58	0.58	XXX	0	0	0	0	0
99282	A	Emergency room visit		0.88	0.88	XXX	0	0	0	0	0
99283	A	Emergency room visit		1.62	1.62	XXX	0	0	0	0	0
99284	A	Emergency room visit		2.48	2.48	XXX	0	0	0	0	0
99285	A	Emergency room visit		3.91	3.91	XXX	0	0	0	0	0
99288	B	Direct advanced support		0.00	0.00	XXX	9	9	9	9	9
(12) Critical care services:											
99291	A	Critical care, first hour		5.07	5.07	XXX	0	0	0	0	0
99292	A	Critical care, additional		2.45	2.45	XXX	0	0	0	0	0
(13) Neonatal intensive care:											
99295	A	Neonatal critical care		20.29	20.29	XXX	0	0	0	0	0
99296	A	Neonatal critical care		10.06	10.06	XXX	0	0	0	0	0
99297	A	Neonatal critical care		5.03	5.03	XXX	0	0	0	0	0
(14) Comprehensive nursing facility assessments, new or established patient:											
99301	A	Nursing facility care		1.54	1.54	XXX	0	0	0	0	0
99302	A	Nursing facility care		1.97	1.97	XXX	0	0	0	0	0
99303	A	Nursing facility care		2.78	2.78	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(15) Subsequent nursing facility care, new or established patient:											
99311	A	Nursing facility care		0.89	0.89	XXX	0	0	0	0	0
99312	A	Nursing facility care		1.32	1.32	XXX	0	0	0	0	0
99313	A	Nursing facility care		1.76	1.76	XXX	0	0	0	0	0
99315	A	Discharge		1.54	1.54	XXX	0	0	0	0	0
99316	A	Discharge		1.88	1.88	XXX	0	0	0	0	0
(16) Domiciliary, rest home, or custodial care, new or established patient:											
99321	A	Rest home visit		1.02	1.02	XXX	0	0	0	0	0
99322	A	Rest home visit		1.44	1.44	XXX	0	0	0	0	0
99323	A	Rest home visit		1.90	1.90	XXX	0	0	0	0	0
99331	A	Rest home visit		0.83	0.83	XXX	0	0	0	0	0
99332	A	Rest home visit		1.09	1.09	XXX	0	0	0	0	0
99333	A	Rest home visit		1.34	1.34	XXX	0	0	0	0	0
(17) Home services, new or established patient:											
99341	A	Home visit		1.46	1.46	XXX	0	0	0	0	0
99342	A	Home visit		1.99	1.99	XXX	0	0	0	0	0
99343	A	Home visit		2.84	2.84	XXX	0	0	0	0	0
99344	A	Home visit		3.62	3.62	XXX	0	0	0	0	0
99345	A	Home visit		4.31	4.31	XXX	0	0	0	0	0
99347	A	Home visit		1.15	1.15	XXX	0	0	0	0	0
99348	A	Home visit		1.68	1.68	XXX	0	0	0	0	0
99349	A	Home visit		2.45	2.45	XXX	0	0	0	0	0
99350	A	Home visit		3.52	3.52	XXX	0	0	0	0	0
99351	D	Home visit		1.21	1.21	XXX	0	0	0	0	0
99352	D	Home visit		1.55	1.55	XXX	0	0	0	0	0
99353	D	Home visit		1.96	1.96	XXX	0	0	0	0	0
(18) Prolonged services with direct patient contact, office or other outpatient:											
99354	A	Prolonged service		2.38	2.01	XXX	0	0	0	0	0
99355	A	Prolonged service		2.38	2.01	XXX	0	0	0	0	0
(19) Prolonged services with direct patient contact, inpatient:											
99356	A	Prolonged service		2.42	2.42	XXX	0	0	0	0	0
99357	A	Prolonged service		2.42	2.42	XXX	0	0	0	0	0
(20) Prolonged services without direct patient contact:											
99358	B	Prolonged service		0.00	0.00	XXX	9	9	9	9	9
99359	B	Prolonged service		0.00	0.00	XXX	9	9	9	9	9

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(21) Prolonged services, physician standby:											
99360	X		Physician standby	0.00	0.00	XXX	9	9	9	9	9
(22) Case management services:											
99361	B		Physician/team conference	0.00	0.00	XXX	9	9	9	9	9
99362	B		Physician/team conference	0.00	0.00	XXX	9	9	9	9	9
99371	B		Physician phone consult	0.00	0.00	XXX	9	9	9	9	9
99372	B		Physician phone consult	0.00	0.00	XXX	9	9	9	9	9
99373	B		Physician phone consult	0.00	0.00	XXX	9	9	9	9	9
(23) Care plan oversight services:											
99374	B		Home health care	0.00	0.00	XXX	9	9	9	9	9
99375	A		Home health care	2.09	2.09	XXX	0	0	0	0	0
99376	D		Care plan oversight	0.00	0.00	XXX	9	9	9	9	9
99377	B		Hospice care supervision	0.00	0.00	XXX	9	9	9	9	9
99378	A		Hospice care supervision	2.09	2.09	XXX	0	0	0	0	0
99379	B		Nursing facility care	0.00	0.00	XXX	9	9	9	9	9
99380	B		Nursing facility care	0.00	0.00	XXX	9	9	9	9	9
(24) Preventive medicine services:											
99381	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99382	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99383	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99384	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99385	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99386	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99387	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99391	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99392	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99393	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99394	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99395	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99396	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99397	N		Preventive visit	0.00	0.00	XXX	9	9	9	9	9
99401	N		Preventive counseling	0.00	0.00	XXX	9	9	9	9	9
99402	N		Preventive counseling	0.00	0.00	XXX	9	9	9	9	9
99403	N		Preventive counseling	0.00	0.00	XXX	9	9	9	9	9
99404	N		Preventive counseling	0.00	0.00	XXX	9	9	9	9	9
99411	N		Preventive counseling	0.00	0.00	XXX	9	9	9	9	9
99412	N		Preventive counseling	0.00	0.00	XXX	9	9	9	9	9
99420	N		Health risk assessment	0.00	0.00	XXX	9	9	9	9	9
99429	N		Unlisted preventive	0.00	0.00	XXX	9	9	9	9	9
(25) Newborn care:											
99431	A		Normal newborn care	2.28	2.28	XXX	0	0	0	0	0
99432	A		Normal newborn care	2.45	2.45	XXX	0	0	0	0	0
99433	A		Normal newborn care	1.20	1.20	XXX	0	0	0	0	0
99435	A		Newborn discharge day	2.91	2.91	XXX	0	0	0	0	0
99436	A		Attendance, birth	2.91	2.91	XXX	0	0	0	0	0
99440	A		Newborn resuscitation	5.70	5.70	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(26) Special evaluation and management services:											
99450	N		Life/disability	0.00	0.00	XXX	9	9	9	9	9
99455	R		Disability examination	0.00	0.00	XXX	0	0	0	0	0
99456	R		Disability examination	0.00	0.00	XXX	0	0	0	0	0
(27) Other evaluation and management services:											
99499	C		Unlisted E/M service	0.00	0.00	XXX	0	0	0	0	0

J. Procedure code numbers A0021 to V5299 relate to miscellaneous services and supplies. Note Errata: Issue 8 Pg. 560

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A0021	I		Outside state ambulance	0.00	0.00	XXX	9	9	9	9	9
A0030	X		Air ambulance service	0.00	0.00	XXX	9	9	9	9	9
A0040	X		Helicopter ambulance	0.00	0.00	XXX	9	9	9	9	9
A0050	X		Water ambulance service	0.00	0.00	XXX	9	9	9	9	9
A0080	I		Noninterested escort	0.00	0.00	XXX	9	9	9	9	9
A0090	I		Interested escort	0.00	0.00	XXX	9	9	9	9	9
A0100	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0110	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0120	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0130	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0140	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0160	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0170	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0180	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0190	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0200	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0210	I		Nonemergency transport	0.00	0.00	XXX	9	9	9	9	9
A0225	X		Neonatal emergency	0.00	0.00	XXX	9	9	9	9	9
A0300	X		BLS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0302	X		BLS emergency	0.00	0.00	XXX	9	9	9	9	9
A0304	X		ALS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0306	X		ALS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0308	X		ALS emergency	0.00	0.00	XXX	9	9	9	9	9
A0310	X		ALS emergency	0.00	0.00	XXX	9	9	9	9	9
A0320	X		BLS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0322	X		BLS emergency	0.00	0.00	XXX	9	9	9	9	9
A0324	X		ALS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0326	X		ALS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0328	X		ALS emergency	0.00	0.00	XXX	9	9	9	9	9
A0330	X		ALS emergency, special	0.00	0.00	XXX	9	9	9	9	9
A0340	X		BLS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0342	X		BLS emergency	0.00	0.00	XXX	9	9	9	9	9
A0344	X		ALS nonemergency	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A0346	X		ALS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0348	X		ALS emergency	0.00	0.00	XXX	9	9	9	9	9
A0350	X		ALS emergency, special	0.00	0.00	XXX	9	9	9	9	9
A0360	X		BLS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0362	X		BLS emergency	0.00	0.00	XXX	9	9	9	9	9
A0364	X		ALS nonemergency	0.00	0.00	XXX	9	9	9	9	9
A0366	X		ALS nonemergency, special	0.00	0.00	XXX	9	9	9	9	9
A0368	X		ALS emergency	0.00	0.00	XXX	9	9	9	9	9
A0370	X		ALS emergency, special	0.00	0.00	XXX	9	9	9	9	9
A0380	X		BLS mileage	0.00	0.00	XXX	9	9	9	9	9
A0382	X		BLS routine supplies	0.00	0.00	XXX	9	9	9	9	9
A0384	X		BLS defibrillator	0.00	0.00	XXX	9	9	9	9	9
A0390	X		ALS mileage	0.00	0.00	XXX	9	9	9	9	9
A0392	X		ALS defibrillator	0.00	0.00	XXX	9	9	9	9	9
A0394	X		ALS IV drug therapy	0.00	0.00	XXX	9	9	9	9	9
A0396	X		ALS esophageal intubation	0.00	0.00	XXX	9	9	9	9	9
A0398	X		ALS routine supplies	0.00	0.00	XXX	9	9	9	9	9
A0420	X		Ambulance waiting	0.00	0.00	XXX	9	9	9	9	9
A0422	X		Ambulance, life support	0.00	0.00	XXX	9	9	9	9	9
A0424	X		Extra attendant	0.00	0.00	XXX	9	9	9	9	9
A0888	N		Noncovered mileage	0.00	0.00	XXX	9	9	9	9	9
A0999	X		Unlisted ambulance	0.00	0.00	XXX	9	9	9	9	9
A4206	I		1 cc sterile syringe	0.00	0.00	XXX	9	9	9	9	9
A4207	I		2 cc sterile syringe	0.00	0.00	XXX	9	9	9	9	9
A4208	I		3 cc sterile syringe	0.00	0.00	XXX	9	9	9	9	9
A4209	I		5+ cc sterile syringe	0.00	0.00	XXX	9	9	9	9	9
A4210	N		Nonneedle injection	0.00	0.00	XXX	9	9	9	9	9
A4211	P		Supplies, self-injection	0.00	0.00	XXX	9	9	9	9	9
A4212	P		Noncoring needle	0.00	0.00	XXX	9	9	9	9	9
A4213	I		20+ cc sterile syringe	0.00	0.00	XXX	9	9	9	9	9
A4214	P		30 cc saline or water	0.00	0.00	XXX	9	9	9	9	9
A4215	I		Sterile needles	0.00	0.00	XXX	9	9	9	9	9
A4220	P		Infusion pump refill	0.00	0.00	XXX	9	9	9	9	9
A4221	X		Maintenance drug infusion	0.00	0.00	XXX	9	9	9	9	9
A4222	X		Drug infusion pump	0.00	0.00	XXX	9	9	9	9	9
A4230	N		Infusion for insulin pump	0.00	0.00	XXX	9	9	9	9	9
A4231	N		Infusion for insulin pump	0.00	0.00	XXX	9	9	9	9	9
A4232	N		Syringe with needle	0.00	0.00	XXX	9	9	9	9	9
A4244	I		Alcohol or peroxide	0.00	0.00	XXX	9	9	9	9	9
A4245	I		Alcohol wipes	0.00	0.00	XXX	9	9	9	9	9
A4246	I		Betadine or pHisoHex	0.00	0.00	XXX	9	9	9	9	9
A4247	I		Betadine or iodine	0.00	0.00	XXX	9	9	9	9	9
A4250	N		Urine test, Reagent	0.00	0.00	XXX	9	9	9	9	9
A4253	P		Blood glucose or Reagent	0.00	0.00	XXX	9	9	9	9	9
A4254	X		Battery, glucose monitor	0.00	0.00	XXX	9	9	9	9	9
A4255	X		Platforms, glucose	0.00	0.00	XXX	9	9	9	9	9
A4256	P		Calibrator solution	0.00	0.00	XXX	9	9	9	9	9
A4258	P		Lancet device, each	0.00	0.00	XXX	9	9	9	9	9
A4259	P		Lancets, per box of 100	0.00	0.00	XXX	9	9	9	9	9
A4260	N		Levonorgestrel (Norplant)	0.00	0.00	XXX	9	9	9	9	9
A4262	B		Temporary tear duct	0.00	0.00	XXX	9	9	9	9	9
A4263	A		Permanent tear duct	0.92	0.92	XXX	9	9	9	9	9
A4265	P		Paraffin, per pound	0.00	0.00	XXX	9	9	9	9	9
A4270	B		Disposable endoscope	0.00	0.00	XXX	9	9	9	9	9
A4300	A		Catheter implant vascular	0.92	0.92	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A4301	P		Implantable access total	0.00	0.00	XXX	9	9	9	9	9
A4305	P		Drug delivery system	0.00	0.00	XXX	9	9	9	9	9
A4306	P		Drug delivery system	0.00	0.00	XXX	9	9	9	9	9
A4310	P		Insert tray without bag	0.00	0.00	XXX	9	9	9	9	9
A4311	P		Catheter without bag	0.00	0.00	XXX	9	9	9	9	9
A4312	P		2-way catheter, no bag	0.00	0.00	XXX	9	9	9	9	9
A4313	P		3-way catheter, no bag	0.00	0.00	XXX	9	9	9	9	9
A4314	P		2-way catheter with bag	0.00	0.00	XXX	9	9	9	9	9
A4315	P		2-way catheter with bag	0.00	0.00	XXX	9	9	9	9	9
A4316	P		3-way catheter with bag	0.00	0.00	XXX	9	9	9	9	9
A4320	P		Irrigation tray	0.00	0.00	XXX	9	9	9	9	9
A4321	X		Catheter, therapeutic	0.00	0.00	XXX	9	9	9	9	9
A4322	P		Irrigation syringe, each	0.00	0.00	XXX	9	9	9	9	9
A4323	P		Saline irrigation	0.00	0.00	XXX	9	9	9	9	9
A4326	P		Male external catheter	0.00	0.00	XXX	9	9	9	9	9
A4327	P		Feminine urinary collect	0.00	0.00	XXX	9	9	9	9	9
A4328	P		Feminine urinary collect	0.00	0.00	XXX	9	9	9	9	9
A4329	P		External catheter starter	0.00	0.00	XXX	9	9	9	9	9
A4330	P		Stool collection pouch	0.00	0.00	XXX	9	9	9	9	9
A4335	P		Incontinence supply	0.00	0.00	XXX	9	9	9	9	9
A4338	P		Indwelling catheter	0.00	0.00	XXX	9	9	9	9	9
A4340	P		Indwelling catheter	0.00	0.00	XXX	9	9	9	9	9
A4344	P		Indwelling catheter	0.00	0.00	XXX	9	9	9	9	9
A4346	P		Indwelling catheter	0.00	0.00	XXX	9	9	9	9	9
A4347	P		Male external catheter	0.00	0.00	XXX	9	9	9	9	9
A4351	P		Straight urinary catheter	0.00	0.00	XXX	9	9	9	9	9
A4352	P		Coude urinary catheter	0.00	0.00	XXX	9	9	9	9	9
A4353	X		Intermittent catheter	0.00	0.00	XXX	9	9	9	9	9
A4354	P		Catheter insertion	0.00	0.00	XXX	9	9	9	9	9
A4355	P		Bladder irrigation	0.00	0.00	XXX	9	9	9	9	9
A4356	P		External urethral clamp	0.00	0.00	XXX	9	9	9	9	9
A4357	P		Bedside drainage bag	0.00	0.00	XXX	9	9	9	9	9
A4358	P		Urinary leg bag	0.00	0.00	XXX	9	9	9	9	9
A4359	P		Urinary suspensory	0.00	0.00	XXX	9	9	9	9	9
A4361	P		Ostomy faceplate, each	0.00	0.00	XXX	9	9	9	9	9
A4362	P		Solid skin barrier	0.00	0.00	XXX	9	9	9	9	9
A4363	P		Liquid skin barrier	0.00	0.00	XXX	9	9	9	9	9
A4364	P		Ostomy, catheter adhesive	0.00	0.00	XXX	9	9	9	9	9
A4365	X		Ostomy adhesive remover	0.00	0.00	XXX	9	9	9	9	9
A4367	P		Ostomy belt, each	0.00	0.00	XXX	9	9	9	9	9
A4368	X		Ostomy filter, each	0.00	0.00	XXX	9	9	9	9	9
A4397	P		Irrigation supply, each	0.00	0.00	XXX	9	9	9	9	9
A4398	P		Irrigation supply, each	0.00	0.00	XXX	9	9	9	9	9
A4399	P		Irrigation supply, cone	0.00	0.00	XXX	9	9	9	9	9
A4400	P		Ostomy irrigation set	0.00	0.00	XXX	9	9	9	9	9
A4402	P		Lubricant, per ounce	0.00	0.00	XXX	9	9	9	9	9
A4404	P		Ostomy ring, each	0.00	0.00	XXX	9	9	9	9	9
A4421	P		Ostomy miscellaneous	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A4454	P		Tape, all types	0.00	0.00	XXX	9	9	9	9	9
A4455	P		Adhesive remover	0.00	0.00	XXX	9	9	9	9	9
A4460	P		Elastic compression	0.00	0.00	XXX	9	9	9	9	9
A4462	X		Abdominal dressing	0.00	0.00	XXX	9	9	9	9	9
A4465	P		Nonelastic exterior	0.00	0.00	XXX	9	9	9	9	9
A4470	P		Gravlee jet washer	0.00	0.00	XXX	9	9	9	9	9
A4480	P		Vabra aspirator	0.00	0.00	XXX	9	9	9	9	9
A4481	X		Tracheostoma filter	0.00	0.00	XXX	9	9	9	9	9
A4490	N		Above knee stocking	0.00	0.00	XXX	9	9	9	9	9
A4495	N		Thigh length stocking	0.00	0.00	XXX	9	9	9	9	9
A4500	N		Below knee stocking	0.00	0.00	XXX	9	9	9	9	9
A4510	N		Full length stocking	0.00	0.00	XXX	9	9	9	9	9
A4550	A		Surgical trays	0.92	0.92	XXX	9	9	9	9	9
A4554	N		Disposable underpads	0.00	0.00	XXX	9	9	9	9	9
A4556	P		Electrodes	0.00	0.00	XXX	9	9	9	9	9
A4557	P		Lead wires	0.00	0.00	XXX	9	9	9	9	9
A4558	P		Conductive paste or gel	0.00	0.00	XXX	9	9	9	9	9
A4560	X		Pessary	0.00	0.00	XXX	9	9	9	9	9
A4565	X		Slings	0.00	0.00	XXX	9	9	9	9	9
A4570	X		Splint	0.00	0.00	XXX	9	9	9	9	9
A4572	X		Rib belt	0.00	0.00	XXX	9	9	9	9	9
A4575	N		Hyperbaric oxygen chamber	0.00	0.00	XXX	9	9	9	9	9
A4580	X		Cast supplies	0.00	0.00	XXX	9	9	9	9	9
A4590	X		Special casting material	0.00	0.00	XXX	9	9	9	9	9
A4595	X		TENS supplies, 2 lead	0.00	0.00	XXX	9	9	9	9	9
A4611	X		Heavy duty battery	0.00	0.00	XXX	9	9	9	9	9
A4612	X		Battery cables	0.00	0.00	XXX	9	9	9	9	9
A4613	X		Battery charger	0.00	0.00	XXX	9	9	9	9	9
A4615	X		Cannula, nasal	0.00	0.00	XXX	9	9	9	9	9
A4616	X		Tubing (oxygen), per foot	0.00	0.00	XXX	9	9	9	9	9
A4617	X		Mouth piece	0.00	0.00	XXX	9	9	9	9	9
A4618	X		Breathing circuits	0.00	0.00	XXX	9	9	9	9	9
A4619	X		Face tent	0.00	0.00	XXX	9	9	9	9	9
A4620	X		Variable mask	0.00	0.00	XXX	9	9	9	9	9
A4621	X		Tracheotomy mask	0.00	0.00	XXX	9	9	9	9	9
A4622	X		Tracheostomy tube	0.00	0.00	XXX	9	9	9	9	9
A4623	X		Tracheostomy, inner	0.00	0.00	XXX	9	9	9	9	9
A4624	X		Tracheal suction	0.00	0.00	XXX	9	9	9	9	9
A4625	X		Tracheostomy care kit	0.00	0.00	XXX	9	9	9	9	9
A4626	X		Tracheostomy cleaning	0.00	0.00	XXX	9	9	9	9	9
A4627	N		Spacer, bag or reservoir	0.00	0.00	XXX	9	9	9	9	9
A4628	X		Oropharyngeal suction	0.00	0.00	XXX	9	9	9	9	9
A4629	X		Tracheostomy care kit	0.00	0.00	XXX	9	9	9	9	9
A4630	X		Replacement battery, TENS	0.00	0.00	XXX	9	9	9	9	9
A4631	X		Wheelchair batteries	0.00	0.00	XXX	9	9	9	9	9
A4635	X		Underarm crutch pad	0.00	0.00	XXX	9	9	9	9	9
A4636	X		Handgrip, cane or crutch	0.00	0.00	XXX	9	9	9	9	9
A4637	X		Replace cane, crutch tip	0.00	0.00	XXX	9	9	9	9	9
A4640	X		Alternating pressure pad	0.00	0.00	XXX	9	9	9	9	9
A4641	E		Diagnostic imaging	0.00	0.00	XXX	9	9	9	9	9
A4642	E		Satumomab pendetide	0.00	0.00	XXX	9	9	9	9	9
A4643	E		High dose contrast	0.00	0.00	XXX	9	9	9	9	9
A4644	E		Osmolar contrast, 100-199	0.00	0.00	XXX	9	9	9	9	9
A4645	E		Osmolar contrast, 200-299	0.00	0.00	XXX	9	9	9	9	9
A4646	E		Osmolar contrast, 300-399	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A4647	B		Paramagnetic contrast	0.00	0.00	XXX	9	9	9	9	9
A4649	P		Surgical supplies	0.00	0.00	XXX	9	9	9	9	9
A4650	X		Centrifuge	0.00	0.00	XXX	9	9	9	9	9
A4655	X		Needles and syringes	0.00	0.00	XXX	9	9	9	9	9
A4660	X		Blood pressure apparatus	0.00	0.00	XXX	9	9	9	9	9
A4663	X		Blood pressure cuff	0.00	0.00	XXX	9	9	9	9	9
A4670	N		Automatic blood pressure	0.00	0.00	XXX	9	9	9	9	9
A4680	X		Activated carbon filters	0.00	0.00	XXX	9	9	9	9	9
A4690	X		Dialyzers	0.00	0.00	XXX	9	9	9	9	9
A4700	X		Standard dialysis	0.00	0.00	XXX	9	9	9	9	9
A4705	X		Bicarbonate dialysis	0.00	0.00	XXX	9	9	9	9	9
A4712	X		Sterile water	0.00	0.00	XXX	9	9	9	9	9
A4714	X		Treated water	0.00	0.00	XXX	9	9	9	9	9
A4730	X		Fistula cannulation	0.00	0.00	XXX	9	9	9	9	9
A4735	X		Local/topical anesthetics	0.00	0.00	XXX	9	9	9	9	9
A4740	X		Shunt accessories	0.00	0.00	XXX	9	9	9	9	9
A4750	X		Arterial or venous tubing	0.00	0.00	XXX	9	9	9	9	9
A4755	X		Arterial, venous tubing	0.00	0.00	XXX	9	9	9	9	9
A4760	X		Standard testing solution	0.00	0.00	XXX	9	9	9	9	9
A4765	X		Dialysis concentrate	0.00	0.00	XXX	9	9	9	9	9
A4770	X		Blood testing supplies	0.00	0.00	XXX	9	9	9	9	9
A4771	X		Blood clotting	0.00	0.00	XXX	9	9	9	9	9
A4772	X		Dextrostick or glucose	0.00	0.00	XXX	9	9	9	9	9
A4773	X		Hemostix	0.00	0.00	XXX	9	9	9	9	9
A4774	X		Ammonia test paper	0.00	0.00	XXX	9	9	9	9	9
A4780	X		Sterilizing agent	0.00	0.00	XXX	9	9	9	9	9
A4790	X		Cleansing agents	0.00	0.00	XXX	9	9	9	9	9
A4800	X		Heparin and antidote	0.00	0.00	XXX	9	9	9	9	9
A4820	X		Hemodialysis supplies	0.00	0.00	XXX	9	9	9	9	9
A4850	X		Rubber tipped hemostats	0.00	0.00	XXX	9	9	9	9	9
A4860	X		Disposable catheter caps	0.00	0.00	XXX	9	9	9	9	9
A4870	X		Plumbing, electrical work	0.00	0.00	XXX	9	9	9	9	9
A4880	X		Water storage tanks	0.00	0.00	XXX	9	9	9	9	9
A4890	R		Contracts, repair	0.00	0.00	XXX	0	0	0	0	0
A4900	X		CAPD supply kit	0.00	0.00	XXX	9	9	9	9	9
A4901	X		CCPD supply kit	0.00	0.00	XXX	9	9	9	9	9
A4905	X		IPD supply kit	0.00	0.00	XXX	9	9	9	9	9
A4910	X		Nonmedical supplies	0.00	0.00	XXX	9	9	9	9	9
A4912	X		Gomco drain bottle	0.00	0.00	XXX	9	9	9	9	9
A4913	X		Miscellaneous supplies	0.00	0.00	XXX	9	9	9	9	9
A4914	X		Preparation kits	0.00	0.00	XXX	9	9	9	9	9
A4918	X		Venous pressure clamps	0.00	0.00	XXX	9	9	9	9	9
A4919	X		Dialyzer holder	0.00	0.00	XXX	9	9	9	9	9
A4920	X		Harvard pressure clamp	0.00	0.00	XXX	9	9	9	9	9
A4921	X		Measuring cylinder	0.00	0.00	XXX	9	9	9	9	9
A4927	X		Gloves	0.00	0.00	XXX	9	9	9	9	9
A5051	P		Closed ostomy pouch	0.00	0.00	XXX	9	9	9	9	9
A5052	P		Closed ostomy pouch	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A5053	P		Closed ostomy pouch	0.00	0.00	XXX	9	9	9	9	9
A5054	P		Closed ostomy pouch	0.00	0.00	XXX	9	9	9	9	9
A5055	P		Stoma cap	0.00	0.00	XXX	9	9	9	9	9
A5061	P		Drainable ostomy pouch	0.00	0.00	XXX	9	9	9	9	9
A5062	P		Drainable ostomy pouch	0.00	0.00	XXX	9	9	9	9	9
A5063	P		Drainable ostomy pouch	0.00	0.00	XXX	9	9	9	9	9
A5064	I		Drainable ostomy pouch	0.00	0.00	XXX	9	9	9	9	9
A5065	I		Drainable ostomy pouch	0.00	0.00	XXX	9	9	9	9	9
A5071	P		Urinary pouch, barrier	0.00	0.00	XXX	9	9	9	9	9
A5072	P		Urinary pouch, no barrier	0.00	0.00	XXX	9	9	9	9	9
A5073	P		Urinary pouch, flange	0.00	0.00	XXX	9	9	9	9	9
A5074	I		Urinary pouch, faceplate	0.00	0.00	XXX	9	9	9	9	9
A5075	I		Urinary pouch, faceplate	0.00	0.00	XXX	9	9	9	9	9
A5081	P		Continent stoma	0.00	0.00	XXX	9	9	9	9	9
A5082	P		Continent stoma	0.00	0.00	XXX	9	9	9	9	9
A5093	P		Ostomy accessory	0.00	0.00	XXX	9	9	9	9	9
A5102	P		Bedside drainage bottle	0.00	0.00	XXX	9	9	9	9	9
A5105	P		Urinary suspensory	0.00	0.00	XXX	9	9	9	9	9
A5112	P		Urinary leg bag	0.00	0.00	XXX	9	9	9	9	9
A5113	P		Latex leg strap	0.00	0.00	XXX	9	9	9	9	9
A5114	P		Foam or fabric leg strap	0.00	0.00	XXX	9	9	9	9	9
A5119	P		Skin barrier, wipes	0.00	0.00	XXX	9	9	9	9	9
A5121	P		Skin barrier, solid	0.00	0.00	XXX	9	9	9	9	9
A5122	P		Skin barrier, solid	0.00	0.00	XXX	9	9	9	9	9
A5123	P		Skin barrier with flange	0.00	0.00	XXX	9	9	9	9	9
A5126	P		Adhesive, disc/foam pad	0.00	0.00	XXX	9	9	9	9	9
A5131	P		Appliance cleaner	0.00	0.00	XXX	9	9	9	9	9
A5149	P		Incontinence, ostomy	0.00	0.00	XXX	9	9	9	9	9
A5500	X		Diabetic, shoe fitting	0.00	0.00	XXX	9	9	9	9	9
A5501	X		Diabetic, custom shoe	0.00	0.00	XXX	9	9	9	9	9
A5502	X		Diabetic, shoe	0.00	0.00	XXX	9	9	9	9	9
A5503	X		Diabetic, shoe	0.00	0.00	XXX	9	9	9	9	9
A5504	X		Diabetic, shoe	0.00	0.00	XXX	9	9	9	9	9
A5505	X		Diabetic, shoe	0.00	0.00	XXX	9	9	9	9	9
A5506	X		Diabetic, shoe	0.00	0.00	XXX	9	9	9	9	9
A5507	X		Diabetic, modification	0.00	0.00	XXX	9	9	9	9	9
A6020	P		Collagen dressing	0.00	0.00	XXX	9	9	9	9	9
A6025	I		Silicone gel sheet	0.00	0.00	XXX	9	9	9	9	9
A6154	P		Wound pouch, each	0.00	0.00	XXX	9	9	9	9	9
A6196	P		Alginate dressing	0.00	0.00	XXX	9	9	9	9	9
A6197	P		Alginate dressing	0.00	0.00	XXX	9	9	9	9	9
A6198	P		Alginate dressing	0.00	0.00	XXX	9	9	9	9	9
A6199	P		Alginate dressing	0.00	0.00	XXX	9	9	9	9	9
A6203	P		Composite dressing	0.00	0.00	XXX	9	9	9	9	9
A6204	P		Composite dressing	0.00	0.00	XXX	9	9	9	9	9
A6205	P		Composite dressing	0.00	0.00	XXX	9	9	9	9	9
A6206	P		Contact layer LT=16	0.00	0.00	XXX	9	9	9	9	9
A6207	P		Contact layer GT=16	0.00	0.00	XXX	9	9	9	9	9
A6208	P		Contact layer GT=48	0.00	0.00	XXX	9	9	9	9	9
A6209	P		Foam dressing LT=16	0.00	0.00	XXX	9	9	9	9	9
A6210	P		Foam dressing GT=16 LT=48	0.00	0.00	XXX	9	9	9	9	9
A6211	P		Foam dressing GT=48	0.00	0.00	XXX	9	9	9	9	9
A6212	P		Foam dressing LT=16	0.00	0.00	XXX	9	9	9	9	9
A6213	P		Foam dressing GT=16 LT=48	0.00	0.00	XXX	9	9	9	9	9
A6214	P		Foam dressing GT=48	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A6215	P		Foam dressing	0.00	0.00	XXX	9	9	9	9	9
A6216	P		Nonsterile gauze	0.00	0.00	XXX	9	9	9	9	9
A6217	P		Nonsterile gauze	0.00	0.00	XXX	9	9	9	9	9
A6218	P		Nonsterile gauze	0.00	0.00	XXX	9	9	9	9	9
A6219	P		Gauze LT=16	0.00	0.00	XXX	9	9	9	9	9
A6220	P		Gauze GT=16 LT=48	0.00	0.00	XXX	9	9	9	9	9
A6221	P		Gauze GT=48	0.00	0.00	XXX	9	9	9	9	9
A6222	P		Gauze LT=16	0.00	0.00	XXX	9	9	9	9	9
A6223	P		Gauze GT=16 LT=48	0.00	0.00	XXX	9	9	9	9	9
A6224	P		Gauze GT=48	0.00	0.00	XXX	9	9	9	9	9
A6228	P		Gauze LT=16	0.00	0.00	XXX	9	9	9	9	9
A6229	P		Gauze GT=16 LT=48	0.00	0.00	XXX	9	9	9	9	9
A6230	P		Gauze GT=48	0.00	0.00	XXX	9	9	9	9	9
A6234	P		Hydrocolloid dressing	0.00	0.00	XXX	9	9	9	9	9
A6235	P		Hydrocolloid dressing	0.00	0.00	XXX	9	9	9	9	9
A6236	P		Hydrocolloid dressing	0.00	0.00	XXX	9	9	9	9	9
A6237	P		Hydrocolloid dressing	0.00	0.00	XXX	9	9	9	9	9
A6238	P		Hydrocolloid dressing	0.00	0.00	XXX	9	9	9	9	9
A6239	P		Hydrocolloid dressing	0.00	0.00	XXX	9	9	9	9	9
A6240	P		Hydrocolloid dressing	0.00	0.00	XXX	9	9	9	9	9
A6241	P		Hydrocolloid dressing	0.00	0.00	XXX	9	9	9	9	9
A6242	P		Hydrogel dressing LT=16	0.00	0.00	XXX	9	9	9	9	9
A6243	P		Hydrogel dressing GT=16	0.00	0.00	XXX	9	9	9	9	9
A6244	P		Hydrogel dressing GT=48	0.00	0.00	XXX	9	9	9	9	9
A6245	P		Hydrogel dressing LT=16	0.00	0.00	XXX	9	9	9	9	9
A6246	P		Hydrogel dressing GT=16	0.00	0.00	XXX	9	9	9	9	9
A6247	P		Hydrogel dressing GT=48	0.00	0.00	XXX	9	9	9	9	9
A6248	P		Hydrogel dressing gel	0.00	0.00	XXX	9	9	9	9	9
A6250	P		Skin seal protectants	0.00	0.00	XXX	9	9	9	9	9
A6251	P		Absorptive dressing LT=16	0.00	0.00	XXX	9	9	9	9	9
A6252	P		Absorptive dressing GT=16	0.00	0.00	XXX	9	9	9	9	9
A6253	P		Absorptive dressing GT=48	0.00	0.00	XXX	9	9	9	9	9
A6254	P		Absorptive dressing LT=16	0.00	0.00	XXX	9	9	9	9	9
A6255	P		Absorptive dressing GT=16	0.00	0.00	XXX	9	9	9	9	9
A6256	P		Absorptive dressing GT=48	0.00	0.00	XXX	9	9	9	9	9
A6257	P		Transparent film	0.00	0.00	XXX	9	9	9	9	9
A6258	P		Transparent film	0.00	0.00	XXX	9	9	9	9	9
A6259	P		Transparent film	0.00	0.00	XXX	9	9	9	9	9
A6260	P		Wound cleansers	0.00	0.00	XXX	9	9	9	9	9
A6261	P		Wound filler, gel, paste	0.00	0.00	XXX	9	9	9	9	9
A6262	P		Wound filler, dry	0.00	0.00	XXX	9	9	9	9	9
A6263	P		Nonsterile elastic gauze	0.00	0.00	XXX	9	9	9	9	9
A6264	P		Nonsterile gauze	0.00	0.00	XXX	9	9	9	9	9
A6265	P		Tape, 18 square inches	0.00	0.00	XXX	9	9	9	9	9
A6266	P		Impregnated gauze	0.00	0.00	XXX	9	9	9	9	9
A6402	P		Sterile gauze LT=16	0.00	0.00	XXX	9	9	9	9	9
A6403	P		Sterile gauze GT=16 LT=48	0.00	0.00	XXX	9	9	9	9	9
A6404	P		Sterile gauze GT=48	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A6405	P		Sterile elastic gauze	0.00	0.00	XXX	9	9	9	9	9
A6406	P		Sterile nonelastic gauze	0.00	0.00	XXX	9	9	9	9	9
A9150	E		Nonprescription drugs	0.00	0.00	XXX	9	9	9	9	9
A9160	N		Podiatrist, noncovered	0.00	0.00	XXX	9	9	9	9	9
A9170	N		Chiropractor, noncovered	0.00	0.00	XXX	9	9	9	9	9
A9190	N		Personal comfort item	0.00	0.00	XXX	9	9	9	9	9
A9270	N		Noncovered item	0.00	0.00	XXX	9	9	9	9	9
A9300	N		Exercise equipment	0.00	0.00	XXX	9	9	9	9	9
A9500	E		Technetium tc 99 m	0.00	0.00	XXX	9	9	9	9	9
A9502	X		Technetium tc 99 m	0.00	0.00	XXX	9	9	9	9	9
A9503	E		Technetium tc 99 m	0.00	0.00	XXX	9	9	9	9	9
A9505	E		Thallous chloride Tl 201	0.00	0.00	XXX	9	9	9	9	9
A9600	X		Strontium-89 chloride	0.00	0.00	XXX	9	9	9	9	9
D0120	N		Periodic oral evaluation	0.00	0.00	XXX	9	9	9	9	9
D0140	N		Limited oral evaluation	0.00	0.00	XXX	9	9	9	9	9
D0150	R		Comprehensive evaluation	0.00	0.00	YYY	0	0	0	0	0
D0160	N		Extensive oral evaluation	0.00	0.00	XXX	9	9	9	9	9
D0210	I		Intraoral, complete	0.00	0.00	XXX	9	9	9	9	9
D0220	I		Intraoral, periapical	0.00	0.00	XXX	9	9	9	9	9
D0230	I		Intraoral, periapical	0.00	0.00	XXX	9	9	9	9	9
D0240	R		Intraoral, occlusal	0.00	0.00	YYY	0	0	0	0	0
D0250	R		Extraoral, first	0.00	0.00	YYY	0	0	0	0	0
D0260	R		Extraoral, additional	0.00	0.00	YYY	0	0	0	0	0
D0270	R		Dental bitewing, one	0.00	0.00	YYY	0	0	0	0	0
D0272	R		Dental bitewing, two	0.00	0.00	YYY	0	0	0	0	0
D0274	R		Dental bitewing, four	0.00	0.00	YYY	0	0	0	0	0
D0290	I		Dental film, skull	0.00	0.00	XXX	9	9	9	9	9
D0310	I		Dental salivography	0.00	0.00	XXX	9	9	9	9	9
D0320	I		Dental TMJ arthrogram	0.00	0.00	XXX	9	9	9	9	9
D0321	I		Dental TMJ, other	0.00	0.00	XXX	9	9	9	9	9
D0322	I		Dental tomographic	0.00	0.00	XXX	9	9	9	9	9
D0330	I		Dental panoramic	0.00	0.00	XXX	9	9	9	9	9
D0340	I		Dental cephalometric	0.00	0.00	XXX	9	9	9	9	9
D0350	I		Oral/facial images	0.00	0.00	XXX	9	9	9	9	9
D0415	N		Bacteriologic studies	0.00	0.00	XXX	9	9	9	9	9
D0425	N		Caries susceptibility	0.00	0.00	XXX	9	9	9	9	9
D0460	R		Pulp vitality tests	0.00	0.00	YYY	0	0	0	0	0
D0470	N		Diagnostic casts	0.00	0.00	XXX	9	9	9	9	9
D0471	R		Diagnostic photographs	0.00	0.00	YYY	0	0	0	0	0
D0501	R		Histopathologic exams	0.00	0.00	YYY	0	0	0	0	0
D0502	R		Other oral pathology	0.00	0.00	YYY	0	0	0	0	0
D0999	R		Unspecified diagnostic	0.00	0.00	YYY	0	0	0	0	0
D1110	N		Dental prophylaxis	0.00	0.00	XXX	9	9	9	9	9
D1120	N		Dental prophylaxis	0.00	0.00	XXX	9	9	9	9	9
D1201	N		Topical fluoride	0.00	0.00	XXX	9	9	9	9	9
D1203	N		Topical fluoride	0.00	0.00	XXX	9	9	9	9	9
D1204	N		Topical fluoride	0.00	0.00	XXX	9	9	9	9	9
D1205	N		Topical fluoride	0.00	0.00	XXX	9	9	9	9	9
D1310	N		Nutritional counseling	0.00	0.00	XXX	9	9	9	9	9
D1320	N		Tobacco counseling	0.00	0.00	XXX	9	9	9	9	9
D1330	N		Oral hygiene instruction	0.00	0.00	XXX	9	9	9	9	9
D1351	N		Dental sealant	0.00	0.00	XXX	9	9	9	9	9
D1510	R		Space maintainer	0.00	0.00	YYY	0	0	0	0	0
D1515	R		Fixed bilateral spacer	0.00	0.00	YYY	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
D1520	R		Remove unilateral spacer	0.00	0.00	YYY	0	0	0	0	0
D1525	R		Remove bilateral spacer	0.00	0.00	YYY	0	0	0	0	0
D1550	R		Recement spacer	0.00	0.00	YYY	0	0	0	0	0
D2110	N		Amalgam, one surface	0.00	0.00	XXX	9	9	9	9	9
D2120	N		Amalgam, two surfaces	0.00	0.00	XXX	9	9	9	9	9
D2130	N		Amalgam, three surfaces	0.00	0.00	XXX	9	9	9	9	9
D2131	N		Amalgam, four or more	0.00	0.00	XXX	9	9	9	9	9
D2140	N		Amalgam, one surface	0.00	0.00	XXX	9	9	9	9	9
D2150	N		Amalgam, two surfaces	0.00	0.00	XXX	9	9	9	9	9
D2160	N		Amalgam, three surfaces	0.00	0.00	XXX	9	9	9	9	9
D2161	N		Amalgam, four or more	0.00	0.00	XXX	9	9	9	9	9
D2210	N		Silicate cement	0.00	0.00	XXX	9	9	9	9	9
D2330	N		Resin, one surface	0.00	0.00	XXX	9	9	9	9	9
D2331	N		Resin, two surfaces	0.00	0.00	XXX	9	9	9	9	9
D2332	N		Resin, three surfaces	0.00	0.00	XXX	9	9	9	9	9
D2335	N		Resin, four or more	0.00	0.00	XXX	9	9	9	9	9
D2336	N		Composite resin	0.00	0.00	XXX	9	9	9	9	9
D2380	N		Resin, one surface	0.00	0.00	XXX	9	9	9	9	9
D2381	N		Resin, two surfaces	0.00	0.00	XXX	9	9	9	9	9
D2382	N		Resin, three or more	0.00	0.00	XXX	9	9	9	9	9
D2385	N		Resin, one surface	0.00	0.00	XXX	9	9	9	9	9
D2386	N		Resin, two surfaces	0.00	0.00	XXX	9	9	9	9	9
D2387	N		Resin, three or more	0.00	0.00	XXX	9	9	9	9	9
D2410	N		Dental gold foil	0.00	0.00	XXX	9	9	9	9	9
D2420	N		Dental gold foil	0.00	0.00	XXX	9	9	9	9	9
D2430	N		Dental gold foil	0.00	0.00	XXX	9	9	9	9	9
D2510	N		Dental inlay, metallic	0.00	0.00	XXX	9	9	9	9	9
D2520	N		Dental inlay, metallic	0.00	0.00	XXX	9	9	9	9	9
D2530	N		Dental inlay, metallic	0.00	0.00	XXX	9	9	9	9	9
D2543	N		Dental onlay, metallic	0.00	0.00	XXX	9	9	9	9	9
D2544	N		Dental onlay, metallic	0.00	0.00	XXX	9	9	9	9	9
D2610	N		Dental inlay, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2620	N		Dental inlay, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2630	N		Dental inlay, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2642	N		Dental onlay, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2643	N		Dental onlay, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2644	N		Dental onlay, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2650	N		Dental inlay, composite	0.00	0.00	XXX	9	9	9	9	9
D2651	N		Dental inlay, composite	0.00	0.00	XXX	9	9	9	9	9
D2652	N		Dental inlay, resin	0.00	0.00	XXX	9	9	9	9	9
D2662	N		Dental onlay, resin	0.00	0.00	XXX	9	9	9	9	9
D2663	N		Dental onlay, resin	0.00	0.00	XXX	9	9	9	9	9
D2664	N		Dental onlay, resin	0.00	0.00	XXX	9	9	9	9	9
D2710	N		Crown, resin (laboratory)	0.00	0.00	XXX	9	9	9	9	9
D2720	N		Crown, resin	0.00	0.00	XXX	9	9	9	9	9
D2721	N		Crown, resin	0.00	0.00	XXX	9	9	9	9	9
D2722	N		Crown, resin	0.00	0.00	XXX	9	9	9	9	9
D2740	N		Crown, porcelain	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
D2750	N		Crown, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2751	N		Crown, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2752	N		Crown, porcelain	0.00	0.00	XXX	9	9	9	9	9
D2790	N		Crown, full cast	0.00	0.00	XXX	9	9	9	9	9
D2791	N		Crown, full cast	0.00	0.00	XXX	9	9	9	9	9
D2792	N		Crown, full cast	0.00	0.00	XXX	9	9	9	9	9
D2810	N		Crown, 3/4 cast	0.00	0.00	XXX	9	9	9	9	9
D2910	N		Recement inlay	0.00	0.00	XXX	9	9	9	9	9
D2920	N		Recement crown	0.00	0.00	XXX	9	9	9	9	9
D2930	N		Prefabricated stainless	0.00	0.00	XXX	9	9	9	9	9
D2931	N		Prefabricated stainless	0.00	0.00	XXX	9	9	9	9	9
D2932	N		Prefabricated resin crown	0.00	0.00	XXX	9	9	9	9	9
D2933	N		Prefabricated stainless	0.00	0.00	XXX	9	9	9	9	9
D2940	N		Sedative filling	0.00	0.00	XXX	9	9	9	9	9
D2950	N		Core build-up	0.00	0.00	XXX	9	9	9	9	9
D2951	N		Tooth pin retention	0.00	0.00	XXX	9	9	9	9	9
D2952	N		Cast post and core crown	0.00	0.00	XXX	9	9	9	9	9
D2954	N		Prefabricated post, core	0.00	0.00	XXX	9	9	9	9	9
D2955	N		Post removal	0.00	0.00	XXX	9	9	9	9	9
D2960	N		Laminate labial	0.00	0.00	XXX	9	9	9	9	9
D2961	N		Labial veneer, laboratory	0.00	0.00	XXX	9	9	9	9	9
D2962	N		Labial veneer, laboratory	0.00	0.00	XXX	9	9	9	9	9
D2970	R		Temporary, fracture	0.00	0.00	YYY	0	0	0	0	0
D2980	N		Crown repair	0.00	0.00	XXX	9	9	9	9	9
D2999	R		Dental restorative	0.00	0.00	YYY	0	0	0	0	0
D3110	N		Pulp cap, direct	0.00	0.00	XXX	9	9	9	9	9
D3120	N		Pulp cap, indirect	0.00	0.00	XXX	9	9	9	9	9
D3220	N		Therapeutic pulpotomy	0.00	0.00	XXX	9	9	9	9	9
D3230	N		Pulpal therapy	0.00	0.00	XXX	9	9	9	9	9
D3240	N		Pulpal therapy	0.00	0.00	XXX	9	9	9	9	9
D3310	N		Anterior	0.00	0.00	XXX	9	9	9	9	9
D3320	N		Root canal therapy	0.00	0.00	XXX	9	9	9	9	9
D3330	N		Root canal therapy	0.00	0.00	XXX	9	9	9	9	9
D3346	N		Retreat root canal	0.00	0.00	XXX	9	9	9	9	9
D3347	N		Retreat root canal	0.00	0.00	XXX	9	9	9	9	9
D3348	N		Retreat root canal	0.00	0.00	XXX	9	9	9	9	9
D3351	N		Apexification, initial	0.00	0.00	XXX	9	9	9	9	9
D3352	N		Apexification, interim	0.00	0.00	XXX	9	9	9	9	9
D3353	N		Apexification, final	0.00	0.00	XXX	9	9	9	9	9
D3410	N		Root surgery, anterior	0.00	0.00	XXX	9	9	9	9	9
D3421	N		Root surgery, bicuspid	0.00	0.00	XXX	9	9	9	9	9
D3425	N		Root surgery, molar	0.00	0.00	XXX	9	9	9	9	9
D3426	N		Root surgery, each	0.00	0.00	XXX	9	9	9	9	9
D3430	N		Retrograde filling	0.00	0.00	XXX	9	9	9	9	9
D3450	N		Root amputation	0.00	0.00	XXX	9	9	9	9	9
D3460	R		Endodontic endosseous	0.00	0.00	YYY	0	0	0	0	0
D3470	N		Intentional replantation	0.00	0.00	XXX	9	9	9	9	9
D3910	N		Isolation, tooth	0.00	0.00	XXX	9	9	9	9	9
D3920	N		Tooth splitting	0.00	0.00	XXX	9	9	9	9	9
D3950	N		Canal preparation and fit	0.00	0.00	XXX	9	9	9	9	9
D3960	N		Bleaching of tooth	0.00	0.00	XXX	9	9	9	9	9
D3999	R		Endodontic procedure	0.00	0.00	YYY	0	0	0	0	0
D4210	I		Gingivectomy	0.00	0.00	XXX	9	9	9	9	9
D4211	I		Gingivectomy	0.00	0.00	XXX	9	9	9	9	9
D4220	N		Gingival curettage	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

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D4240		N	Gingival flap procedures	0.00	0.00	XXX	9	9	9	9	9
D4249		N	Crown lengthening	0.00	0.00	XXX	9	9	9	9	9
D4250		R	Mucogingival surgery	0.00	0.00	YYY	0	0	0	0	0
D4260		R	Osseous surgery	0.00	0.00	YYY	0	0	0	0	0
D4263		R	Bone replacement graft	0.00	0.00	YYY	0	0	0	0	0
D4264		R	Bone replacement graft	0.00	0.00	YYY	0	0	0	0	0
D4266		N	Tissue regeneration	0.00	0.00	XXX	9	9	9	9	9
D4267		N	Tissue regeneration	0.00	0.00	XXX	9	9	9	9	9
D4270		R	Pedicle soft tissue graft	0.00	0.00	YYY	0	0	0	0	0
D4271		R	Free soft tissue graft	0.00	0.00	YYY	0	0	0	0	0
D4273		R	Subepithelial tissue	0.00	0.00	YYY	0	0	0	0	0
D4274		N	Distal or proximal wedge	0.00	0.00	XXX	9	9	9	9	9
D4320		N	Provisional splinting	0.00	0.00	XXX	9	9	9	9	9
D4321		N	Provisional splinting	0.00	0.00	XXX	9	9	9	9	9
D4341		N	Periodontal scaling	0.00	0.00	XXX	9	9	9	9	9
D4355		R	Full mouth debridement	0.00	0.00	YYY	0	0	0	0	0
D4381		R	Localized chemotherapy	0.00	0.00	YYY	0	0	0	0	0
D4910		N	Periodontal maintenance	0.00	0.00	XXX	9	9	9	9	9
D4920		N	Unscheduled dressing	0.00	0.00	XXX	9	9	9	9	9
D4999		N	Unspecified periodontal	0.00	0.00	XXX	9	9	9	9	9
D5110		N	Complete dentures	0.00	0.00	XXX	9	9	9	9	9
D5120		N	Complete dentures	0.00	0.00	XXX	9	9	9	9	9
D5130		N	Immediate dentures	0.00	0.00	XXX	9	9	9	9	9
D5140		N	Immediate dentures	0.00	0.00	XXX	9	9	9	9	9
D5211		N	Maxillary dentures	0.00	0.00	XXX	9	9	9	9	9
D5212		N	Mandibular dentures	0.00	0.00	XXX	9	9	9	9	9
D5213		N	Maxillary dentures	0.00	0.00	XXX	9	9	9	9	9
D5214		N	Mandibular dentures	0.00	0.00	XXX	9	9	9	9	9
D5281		N	Removable dentures	0.00	0.00	XXX	9	9	9	9	9
D5410		N	Adjust dentures	0.00	0.00	XXX	9	9	9	9	9
D5411		N	Adjust dentures	0.00	0.00	XXX	9	9	9	9	9
D5421		N	Adjust dentures	0.00	0.00	XXX	9	9	9	9	9
D5422		N	Adjust dentures	0.00	0.00	XXX	9	9	9	9	9
D5510		N	Repair broken denture	0.00	0.00	XXX	9	9	9	9	9
D5520		N	Replace denture	0.00	0.00	XXX	9	9	9	9	9
D5610		N	Repair denture base	0.00	0.00	XXX	9	9	9	9	9
D5620		N	Repair partial denture	0.00	0.00	XXX	9	9	9	9	9
D5630		N	Repair partial denture	0.00	0.00	XXX	9	9	9	9	9
D5640		N	Replace partial denture	0.00	0.00	XXX	9	9	9	9	9
D5650		N	Add tooth to partial	0.00	0.00	XXX	9	9	9	9	9
D5660		N	Add clasp to partial	0.00	0.00	XXX	9	9	9	9	9
D5710		N	Rebase dentures	0.00	0.00	XXX	9	9	9	9	9
D5711		N	Rebase dentures	0.00	0.00	XXX	9	9	9	9	9
D5720		N	Rebase dentures	0.00	0.00	XXX	9	9	9	9	9
D5721		N	Rebase dentures	0.00	0.00	XXX	9	9	9	9	9
D5730		N	Reline denture	0.00	0.00	XXX	9	9	9	9	9
D5731		N	Reline denture	0.00	0.00	XXX	9	9	9	9	9
D5740		N	Reline denture	0.00	0.00	XXX	9	9	9	9	9

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D5741	N		Reline denture	0.00	0.00	XXX	9	9	9	9	9
D5750	N		Reline denture	0.00	0.00	XXX	9	9	9	9	9
D5751	N		Reline denture	0.00	0.00	XXX	9	9	9	9	9
D5760	N		Reline denture	0.00	0.00	XXX	9	9	9	9	9
D5761	N		Reline denture	0.00	0.00	XXX	9	9	9	9	9
D5810	N		Interim denture	0.00	0.00	XXX	9	9	9	9	9
D5811	N		Interim denture	0.00	0.00	XXX	9	9	9	9	9
D5820	N		Interim denture	0.00	0.00	XXX	9	9	9	9	9
D5821	N		Interim denture	0.00	0.00	XXX	9	9	9	9	9
D5850	N		Tissue conditioning	0.00	0.00	XXX	9	9	9	9	9
D5851	N		Tissue conditioning	0.00	0.00	XXX	9	9	9	9	9
D5860	N		Overdenture, complete	0.00	0.00	XXX	9	9	9	9	9
D5861	N		Overdenture, partial	0.00	0.00	XXX	9	9	9	9	9
D5862	N		Precision attachment	0.00	0.00	XXX	9	9	9	9	9
D5899	N		Removable prosthodontic	0.00	0.00	XXX	9	9	9	9	9
D5911	R		Facial moulage, sectional	0.00	0.00	YYY	0	0	0	0	0
D5912	R		Facial moulage, complete	0.00	0.00	YYY	0	0	0	0	0
D5913	I		Nasal prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5914	I		Auricular prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5915	I		Orbital prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5916	I		Ocular prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5919	I		Facial prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5922	I		Nasal septal prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5923	I		Ocular prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5924	I		Cranial prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5925	I		Facial augmentation	0.00	0.00	XXX	9	9	9	9	9
D5926	I		Nasal replacement	0.00	0.00	XXX	9	9	9	9	9
D5927	I		Auricular replacement	0.00	0.00	XXX	9	9	9	9	9
D5928	I		Orbital replacement	0.00	0.00	XXX	9	9	9	9	9
D5929	I		Facial replacement	0.00	0.00	XXX	9	9	9	9	9
D5931	I		Surgical obturator	0.00	0.00	XXX	9	9	9	9	9
D5932	I		ostsurgical obturator	0.00	0.00	XXX	9	9	9	9	9
D5933	I		Refitting of obturator	0.00	0.00	XXX	9	9	9	9	9
D5934	I		Mandibular flange	0.00	0.00	XXX	9	9	9	9	9
D5935	I		Mandibular dent	0.00	0.00	XXX	9	9	9	9	9
D5936	I		Temporary obturator	0.00	0.00	XXX	9	9	9	9	9
D5937	I		Trismus appliance	0.00	0.00	XXX	9	9	9	9	9
D5951	R		Feeding aid	0.00	0.00	YYY	0	0	0	0	0
D5952	I		Pediatric speech aid	0.00	0.00	XXX	9	9	9	9	9
D5953	I		Adult speech aid	0.00	0.00	XXX	9	9	9	9	9
D5954	I		Superimposed prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5955	I		Palatal lift prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5958	I		Palatal lift prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5959	I		Palatal lift prosthesis	0.00	0.00	XXX	9	9	9	9	9
D5960	I		Modify speech aid	0.00	0.00	XXX	9	9	9	9	9
D5982	I		Surgical stent	0.00	0.00	XXX	9	9	9	9	9
D5983	R		Radiation carrier	0.00	0.00	YYY	0	0	0	0	0
D5984	R		Radiation shield	0.00	0.00	YYY	0	0	0	0	0
D5986	N		Fluoride application	0.00	0.00	XXX	9	9	9	9	9
D5987	R		Commissure splint	0.00	0.00	YYY	0	0	0	0	0
D5988	I		Surgical splint	0.00	0.00	XXX	9	9	9	9	9
D5999	I		Maxillofacial prosthesis	0.00	0.00	XXX	9	9	9	9	9
D6010	I		Odontics, endosteal	0.00	0.00	XXX	9	9	9	9	9
D6020	I		Odontics, abutment	0.00	0.00	XXX	9	9	9	9	9
D6040	I		Odontics, eposteal	0.00	0.00	XXX	9	9	9	9	9

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D6050	I		Odontics, transosteal	0.00	0.00	XXX	9	9	9	9	9
D6055	I		Implant connecting bar	0.00	0.00	XXX	9	9	9	9	9
D6080	I		Implant maintenance	0.00	0.00	XXX	9	9	9	9	9
D6090	I		Repair implant	0.00	0.00	XXX	9	9	9	9	9
D6095	I		Odontics, repair abutment	0.00	0.00	XXX	9	9	9	9	9
D6100	I		Removal of implant	0.00	0.00	XXX	9	9	9	9	9
D6199	I		Implant procedure	0.00	0.00	XXX	9	9	9	9	9
D6210	N		Prosthodont, high noble	0.00	0.00	XXX	9	9	9	9	9
D6211	N		Bridge, base metal cast	0.00	0.00	XXX	9	9	9	9	9
D6212	N		Bridge, noble metal cast	0.00	0.00	XXX	9	9	9	9	9
D6240	N		Bridge, porcelain	0.00	0.00	XXX	9	9	9	9	9
D6241	N		Bridge, porcelain	0.00	0.00	XXX	9	9	9	9	9
D6242	N		Bridge, porcelain	0.00	0.00	XXX	9	9	9	9	9
D6250	N		Bridge, resin with noble	0.00	0.00	XXX	9	9	9	9	9
D6251	N		Bridge, resin with base	0.00	0.00	XXX	9	9	9	9	9
D6252	N		Bridge, resin with noble	0.00	0.00	XXX	9	9	9	9	9
D6520	N		Dental retainer	0.00	0.00	XXX	9	9	9	9	9
D6530	N		Retainer metallic	0.00	0.00	XXX	9	9	9	9	9
D6543	N		Dental retainer	0.00	0.00	XXX	9	9	9	9	9
D6544	N		Dental retainer	0.00	0.00	XXX	9	9	9	9	9
D6545	N		Dental retainer	0.00	0.00	XXX	9	9	9	9	9
D6720	N		Crown, resin with high	0.00	0.00	XXX	9	9	9	9	9
D6721	N		Crown, resin with base	0.00	0.00	XXX	9	9	9	9	9
D6722	N		Crown, resin with noble	0.00	0.00	XXX	9	9	9	9	9
D6750	N		Crown, porcelain	0.00	0.00	XXX	9	9	9	9	9
D6751	N		Crown, porcelain	0.00	0.00	XXX	9	9	9	9	9
D6752	N		Crown, porcelain	0.00	0.00	XXX	9	9	9	9	9
D6780	N		Crown, 3/4 high noble	0.00	0.00	XXX	9	9	9	9	9
D6790	N		Crown, full high noble	0.00	0.00	XXX	9	9	9	9	9
D6791	N		Crown, full base metal	0.00	0.00	XXX	9	9	9	9	9
D6792	N		Crown, full noble metal	0.00	0.00	XXX	9	9	9	9	9
D6920	R		Dental, connector bar	0.00	0.00	YYY	0	0	0	0	0
D6930	N		Dental, recement bridge	0.00	0.00	XXX	9	9	9	9	9
D6940	N		Stress breaker	0.00	0.00	XXX	9	9	9	9	9
D6950	N		Precision attachment	0.00	0.00	XXX	9	9	9	9	9
D6970	N		Cast post and core plus	0.00	0.00	XXX	9	9	9	9	9
D6971	N		Cast post bridge	0.00	0.00	XXX	9	9	9	9	9
D6972	N		Prefabricated post, core	0.00	0.00	XXX	9	9	9	9	9
D6973	N		Core build up	0.00	0.00	XXX	9	9	9	9	9
D6975	N		Coping, metal	0.00	0.00	XXX	9	9	9	9	9
D6980	N		Bridge repair	0.00	0.00	XXX	9	9	9	9	9
D6999	N		Fixed prosthodontic	0.00	0.00	XXX	9	9	9	9	9
D7110	R		Oral surgery, single	0.00	0.00	YYY	0	0	0	0	0
D7120	R		Each additional tooth	0.00	0.00	YYY	0	0	0	0	0
D7130	R		Tooth root removal	0.00	0.00	YYY	0	0	0	0	0
D7210	R		Remove tooth	0.00	0.00	YYY	0	0	0	0	0
D7220	R		Remove impacted tooth	0.00	0.00	YYY	0	0	0	0	0
D7230	R		Remove impacted tooth	0.00	0.00	YYY	0	0	0	0	0

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D7240	R		Remove impacted tooth	0.00	0.00	YYY	0	0	0	0	0
D7241	R		Remove impacted tooth	0.00	0.00	YYY	0	0	0	0	0
D7250	R		Remove tooth root	0.00	0.00	YYY	0	0	0	0	0
D7260	R		Oral antral fistula	0.00	0.00	YYY	0	0	0	0	0
D7270	N		Tooth reimplant	0.00	0.00	XXX	9	9	9	9	9
D7272	N		Tooth transplant	0.00	0.00	XXX	9	9	9	9	9
D7280	N		Exposed impacted tooth	0.00	0.00	XXX	9	9	9	9	9
D7281	N		Exposed impacted tooth	0.00	0.00	XXX	9	9	9	9	9
D7285	I		Biopsy of oral tissue	0.00	0.00	XXX	9	9	9	9	9
D7286	I		Biopsy of oral tissue	0.00	0.00	XXX	9	9	9	9	9
D7290	N		Reposition teeth	0.00	0.00	XXX	9	9	9	9	9
D7291	R		Transseptal fiberotomy	0.00	0.00	YYY	0	0	0	0	0
D7310	I		Alveoplasty, extraction	0.00	0.00	XXX	9	9	9	9	9
D7320	I		Alveoplasty, no extract	0.00	0.00	XXX	9	9	9	9	9
D7340	I		Vestibuloplasty	0.00	0.00	XXX	9	9	9	9	9
D7350	I		Vestibuloplasty	0.00	0.00	XXX	9	9	9	9	9
D7410	I		Radical excision	0.00	0.00	XXX	9	9	9	9	9
D7420	I		Radical excision	0.00	0.00	XXX	9	9	9	9	9
D7430	I		Benign tumor excision	0.00	0.00	XXX	9	9	9	9	9
D7431	I		Benign tumor excision	0.00	0.00	XXX	9	9	9	9	9
D7440	I		Malignant tumor excision	0.00	0.00	XXX	9	9	9	9	9
D7441	I		Malignant tumor excision	0.00	0.00	XXX	9	9	9	9	9
D7450	I		Remove odontogenic cyst	0.00	0.00	XXX	9	9	9	9	9
D7451	I		Remove odontogenic cyst	0.00	0.00	XXX	9	9	9	9	9
D7460	I		Remove nonodontogenic	0.00	0.00	XXX	9	9	9	9	9
D7461	I		Remove nonodontogenic	0.00	0.00	XXX	9	9	9	9	9
D7465	I		Lesion destruction	0.00	0.00	XXX	9	9	9	9	9
D7470	D		Remove exostosis	0.00	0.00	XXX	9	9	9	9	9
D7471	I		Remove exostosis	0.00	0.00	XXX	9	9	9	9	9
D7480	I		Partial ostectomy	0.00	0.00	XXX	9	9	9	9	9
D7490	I		Mandible resection	0.00	0.00	XXX	9	9	9	9	9
D7510	I		Incise and drain abscess	0.00	0.00	XXX	9	9	9	9	9
D7520	I		Incise and drain abscess	0.00	0.00	XXX	9	9	9	9	9
D7530	I		Remove foreign body, skin	0.00	0.00	XXX	9	9	9	9	9
D7540	I		Remove foreign body	0.00	0.00	XXX	9	9	9	9	9
D7550	I		Remove slough off bone	0.00	0.00	XXX	9	9	9	9	9
D7560	I		Maxillary sinusotomy	0.00	0.00	XXX	9	9	9	9	9
D7610	I		Maxilla, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7620	I		Maxilla, closed reduction	0.00	0.00	XXX	9	9	9	9	9
D7630	I		Mandible, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7640	I		Mandible, closed	0.00	0.00	XXX	9	9	9	9	9
D7650	I		Malar, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7660	I		Malar, closed reduction	0.00	0.00	XXX	9	9	9	9	9
D7670	I		Alveolus, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7680	I		Facial bones, reduction	0.00	0.00	XXX	9	9	9	9	9
D7710	I		Maxilla, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7720	I		Maxilla, closed reduction	0.00	0.00	XXX	9	9	9	9	9
D7730	I		Mandible, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7740	I		Mandible, closed	0.00	0.00	XXX	9	9	9	9	9
D7750	I		Malar, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7760	I		Malar, closed reduction	0.00	0.00	XXX	9	9	9	9	9
D7770	I		Alveolus, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7780	I		Facial bones, reduction	0.00	0.00	XXX	9	9	9	9	9
D7810	I		TMJ, open reduction	0.00	0.00	XXX	9	9	9	9	9
D7820	I		TMJ, closed reduction	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

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D7830	I		TMJ, manipulation	0.00	0.00	XXX	9	9	9	9	9
D7840	I		Removal of TMJ	0.00	0.00	XXX	9	9	9	9	9
D7850	I		TMJ, meniscectomy	0.00	0.00	XXX	9	9	9	9	9
D7852	I		TMJ, repair of jaw	0.00	0.00	XXX	9	9	9	9	9
D7854	I		TMJ, excision of jaw	0.00	0.00	XXX	9	9	9	9	9
D7856	I		TMJ, cutting of muscle	0.00	0.00	XXX	9	9	9	9	9
D7858	I		TMJ, reconstruction	0.00	0.00	XXX	9	9	9	9	9
D7860	I		TMJ, cutting	0.00	0.00	XXX	9	9	9	9	9
D7865	I		TMJ, reshaping	0.00	0.00	XXX	9	9	9	9	9
D7870	I		TMJ, aspiration	0.00	0.00	XXX	9	9	9	9	9
D7872	I		TMJ, diagnostic	0.00	0.00	XXX	9	9	9	9	9
D7873	I		TMJ, arthroscopy	0.00	0.00	XXX	9	9	9	9	9
D7874	I		TMJ, arthroscopy	0.00	0.00	XXX	9	9	9	9	9
D7875	I		TMJ, arthroscopy	0.00	0.00	XXX	9	9	9	9	9
D7876	I		TMJ, arthroscopy	0.00	0.00	XXX	9	9	9	9	9
D7877	I		TMJ, arthroscopy	0.00	0.00	XXX	9	9	9	9	9
D7880	I		Occlusal orthotic	0.00	0.00	XXX	9	9	9	9	9
D7899	I		Unspecified TMJ therapy	0.00	0.00	XXX	9	9	9	9	9
D7910	I		Denture suture	0.00	0.00	XXX	9	9	9	9	9
D7911	I		Dental suture	0.00	0.00	XXX	9	9	9	9	9
D7912	I		Complicated suture	0.00	0.00	XXX	9	9	9	9	9
D7920	I		Dental skin graft	0.00	0.00	XXX	9	9	9	9	9
D7940	R		Reshaping bone	0.00	0.00	YYY	0	0	0	0	0
D7941	I		Bone cutting, ramus	0.00	0.00	XXX	9	9	9	9	9
D7942	D		Bone cutting, ramus	0.00	0.00	XXX	9	9	9	9	9
D7943	I		Bone cutting, ramus	0.00	0.00	XXX	9	9	9	9	9
D7944	I		Bone cutting, segmented	0.00	0.00	XXX	9	9	9	9	9
D7945	I		Bone cutting, body	0.00	0.00	XXX	9	9	9	9	9
D7946	I		Reconstruct maxilla	0.00	0.00	XXX	9	9	9	9	9
D7947	I		Reconstruct maxilla	0.00	0.00	XXX	9	9	9	9	9
D7948	I		Reconstruct midface	0.00	0.00	XXX	9	9	9	9	9
D7949	I		Reconstruct midface	0.00	0.00	XXX	9	9	9	9	9
D7950	I		Mandible graft	0.00	0.00	XXX	9	9	9	9	9
D7955	I		Repair maxillofacial	0.00	0.00	XXX	9	9	9	9	9
D7960	I		Frenulectomy	0.00	0.00	XXX	9	9	9	9	9
D7970	I		Excision of hyperplastic	0.00	0.00	XXX	9	9	9	9	9
D7971	I		Excision of pericoronal	0.00	0.00	XXX	9	9	9	9	9
D7980	I		Sialolithotomy	0.00	0.00	XXX	9	9	9	9	9
D7981	I		Excise salivary gland	0.00	0.00	XXX	9	9	9	9	9
D7982	I		Sialodochoplasty	0.00	0.00	XXX	9	9	9	9	9
D7983	I		Closure of salivary	0.00	0.00	XXX	9	9	9	9	9
D7990	I		Emergency tracheotomy	0.00	0.00	XXX	9	9	9	9	9
D7991	I		Dental coronoidectomy	0.00	0.00	XXX	9	9	9	9	9
D7995	I		Synthetic graft	0.00	0.00	XXX	9	9	9	9	9
D7996	I		Implant mandible	0.00	0.00	XXX	9	9	9	9	9
D7999	I		Oral surgery procedure	0.00	0.00	XXX	9	9	9	9	9
D8010	N		Limited dental	0.00	0.00	XXX	9	9	9	9	9
D8020	N		Limited dental	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

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D8030	N		Limited dental	0.00	0.00	XXX	9	9	9	9	9
D8040	N		Limited dental	0.00	0.00	XXX	9	9	9	9	9
D8050	N		Interceptive dental	0.00	0.00	XXX	9	9	9	9	9
D8060	N		Interceptive dental	0.00	0.00	XXX	9	9	9	9	9
D8070	N		Comprehensive dental	0.00	0.00	XXX	9	9	9	9	9
D8080	N		Comprehensive dental	0.00	0.00	XXX	9	9	9	9	9
D8090	N		Comprehensive dental	0.00	0.00	XXX	9	9	9	9	9
D8210	N		Orthodontic removal	0.00	0.00	XXX	9	9	9	9	9
D8220	N		Fixed appliance therapy	0.00	0.00	XXX	9	9	9	9	9
D8660	N		Preorthodontic visit	0.00	0.00	XXX	9	9	9	9	9
D8670	N		Periodic orthodontic	0.00	0.00	XXX	9	9	9	9	9
D8680	N		Orthodontic retention	0.00	0.00	XXX	9	9	9	9	9
D8690	N		Orthodontic treatment	0.00	0.00	XXX	9	9	9	9	9
D8999	N		Orthodontic procedure	0.00	0.00	XXX	9	9	9	9	9
D9110	R		Treat dental pain	0.00	0.00	YYY	0	0	0	0	0
D9210	I		Dental anesthesia	0.00	0.00	XXX	9	9	9	9	9
D9211	I		Regional block	0.00	0.00	XXX	9	9	9	9	9
D9212	I		Trigeminal block	0.00	0.00	XXX	9	9	9	9	9
D9215	I		Local anesthesia	0.00	0.00	XXX	9	9	9	9	9
D9220	I		General anesthesia	0.00	0.00	XXX	9	9	9	9	9
D9221	I		General anesthesia	0.00	0.00	XXX	9	9	9	9	9
D9230	R		Analgesia	0.00	0.00	YYY	0	0	0	0	0
D9240	D		Intravenous sedation	0.00	0.00	XXX	9	9	9	9	9
D9241	I		Intravenous sedation	0.00	0.00	XXX	9	9	9	9	9
D9242	I		IV sedation each addl.	0.00	0.00	XXX	9	9	9	9	9
D9310	I		Dental consultation	0.00	0.00	XXX	9	9	9	9	9
D9410	I		Dental house call	0.00	0.00	XXX	9	9	9	9	9
D9420	I		Hospital call	0.00	0.00	XXX	9	9	9	9	9
D9430	I		Office visit	0.00	0.00	XXX	9	9	9	9	9
D9440	I		Office visit	0.00	0.00	XXX	9	9	9	9	9
D9610	I		Dental, therapeutic	0.00	0.00	XXX	9	9	9	9	9
D9630	R		Other drugs, medicines	0.00	0.00	YYY	0	0	0	0	0
D9910	N		Appliance desensitizing	0.00	0.00	XXX	9	9	9	9	9
D9920	N		Behavior management	0.00	0.00	XXX	9	9	9	9	9
D9930	R		Treat complications	0.00	0.00	YYY	0	0	0	0	0
D9940	R		Dental occlusal guards	0.00	0.00	YYY	0	0	0	0	0
D9941	N		Fabrication, mouthguard	0.00	0.00	XXX	9	9	9	9	9
D9950	R		Occlusion analysis	0.00	0.00	YYY	0	0	0	0	0
D9951	R		Limited occlusal	0.00	0.00	YYY	0	0	0	0	0
D9952	R		Complete occlusal	0.00	0.00	YYY	0	0	0	0	0
D9970	N		Enamel microabrasion	0.00	0.00	XXX	9	9	9	9	9
D9999	I		Adjunctive procedure	0.00	0.00	XXX	9	9	9	9	9
G0002	A		Temporary urinalysis	1.14	1.14	000	2	0	1	0	0
G0004	A		ECG, transmission	7.89	7.89	XXX	0	0	0	0	0
G0005	A		ECG, 24 hour recording	1.19	1.19	XXX	0	0	0	0	0
G0006	A		ECG, transmission	5.82	5.82	XXX	0	0	0	0	0
G0007	A		ECG, physician review	0.89	0.89	XXX	0	0	0	0	0
G0008	X		Administer flu vaccine	0.00	0.00	XXX	9	9	9	9	9
G0009	X		Administer pneumococcal	0.00	0.00	XXX	9	9	9	9	9
G0010	X		Administer hepatitis B	0.00	0.00	XXX	9	9	9	9	9
G0015	A		Post symptom ECG	5.82	5.82	XXX	0	0	0	0	0
G0016	A		Post symptom ECG	0.89	0.89	XXX	0	0	0	0	0
G0025	A		Collagen skin test kit	0.92	0.92	XXX	9	9	9	9	9
G0026	X		Fecal leukocyte exam	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

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G0027		X	Semen analysis	0.00	0.00	XXX	9	9	9	9	9
G0030		C	PET imaging	0.00	0.00	XXX	0	0	0	0	0
G0030	26	A	PET imaging	1.86	1.86	XXX	0	0	0	0	0
G0030	TC	C	PET imaging	0.00	0.00	XXX	0	0	0	0	0
G0031		C	PET imaging	0.00	0.00	XXX	0	0	0	0	0
G0031	26	A	PET imaging	2.38	2.38	XXX	0	0	0	0	0
G0031	TC	C	PET imaging	0.00	0.00	XXX	0	0	0	0	0
G0032		C	PET following SPECT	0.00	0.00	XXX	0	0	0	0	0
G0032	26	A	PET following SPECT	1.86	1.86	XXX	0	0	0	0	0
G0032	TC	C	PET following SPECT	0.00	0.00	XXX	0	0	0	0	0
G0033		C	PET following SPECT	0.00	0.00	XXX	0	0	0	0	0
G0033	26	A	PET following SPECT	2.38	2.38	XXX	0	0	0	0	0
G0033	TC	C	PET following SPECT	0.00	0.00	XXX	0	0	0	0	0
G0034		C	PET following SPECT	0.00	0.00	XXX	0	0	0	0	0
G0034	26	A	PET following SPECT	1.86	1.86	XXX	0	0	0	0	0
G0034	TC	C	PET following SPECT	0.00	0.00	XXX	0	0	0	0	0
G0035		C	PET following SPECT	0.00	0.00	XXX	0	0	0	0	0
G0035	26	A	PET following SPECT	2.38	2.38	XXX	0	0	0	0	0
G0035	TC	C	PET following SPECT	0.00	0.00	XXX	0	0	0	0	0
G0036		C	PET following coronary	0.00	0.00	XXX	0	0	0	0	0
G0036	26	A	PET following coronary	1.86	1.86	XXX	0	0	0	0	0
G0036	TC	C	PET following coronary	0.00	0.00	XXX	0	0	0	0	0
G0037		C	PET following coronary	0.00	0.00	XXX	0	0	0	0	0
G0037	26	A	PET following coronary	2.38	2.38	XXX	0	0	0	0	0
G0037	TC	C	PET following coronary	0.00	0.00	XXX	0	0	0	0	0
G0038		C	PET following myocardial	0.00	0.00	XXX	0	0	0	0	0
G0038	26	A	PET following myocardial	1.86	1.86	XXX	0	0	0	0	0
G0038	TC	C	PET following myocardial	0.00	0.00	XXX	0	0	0	0	0
G0039		C	PET following myocardial	0.00	0.00	XXX	0	0	0	0	0
G0039	26	A	PET following myocardial	2.38	2.38	XXX	0	0	0	0	0
G0039	TC	C	PET following myocardial	0.00	0.00	XXX	0	0	0	0	0
G0040		C	PET following stress	0.00	0.00	XXX	0	0	0	0	0
G0040	26	A	PET following stress	1.86	1.86	XXX	0	0	0	0	0
G0040	TC	C	PET following stress	0.00	0.00	XXX	0	0	0	0	0
G0041		C	PET following stress	0.00	0.00	XXX	0	0	0	0	0
G0041	26	A	PET following stress	2.38	2.38	XXX	0	0	0	0	0
G0041	TC	C	PET following stress	0.00	0.00	XXX	0	0	0	0	0
G0042		C	PET follow ventriculogram	0.00	0.00	XXX	0	0	0	0	0
G0042	26	A	PET follow ventriculogram	1.86	1.86	XXX	0	0	0	0	0
G0042	TC	C	PET follow ventriculogram	0.00	0.00	XXX	0	0	0	0	0
G0043		C	PET follow ventriculogram	0.00	0.00	XXX	0	0	0	0	0
G0043	26	A	PET follow ventriculogram	2.38	2.38	XXX	0	0	0	0	0
G0043	TC	C	PET follow ventriculogram	0.00	0.00	XXX	0	0	0	0	0
G0044		C	PET following rest	0.00	0.00	XXX	0	0	0	0	0
G0044	26	A	PET following rest	1.86	1.86	XXX	0	0	0	0	0
G0044	TC	C	PET following rest	0.00	0.00	XXX	0	0	0	0	0
G0045		C	PET following rest	0.00	0.00	XXX	0	0	0	0	0
G0045	26	A	PET following rest	2.38	2.38	XXX	0	0	0	0	0

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Proposed Rules

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G0045	TC	C	PET following rest	0.00	0.00	XXX	0	0	0	0	0
G0046		C	PET following stress	0.00	0.00	XXX	0	0	0	0	0
G0046	26	A	PET following stress	1.86	1.86	XXX	0	0	0	0	0
G0046	TC	C	PET following stress	0.00	0.00	XXX	0	0	0	0	0
G0047		C	PET following stress	0.00	0.00	XXX	0	0	0	0	0
G0047	26	A	PET following stress	2.38	2.38	XXX	0	0	0	0	0
G0047	TC	C	PET following stress	0.00	0.00	XXX	0	0	0	0	0
G0050		A	Measure residual urine	0.81	0.81	XXX	0	0	0	0	0
G0051		D	Destroy benign, malignant	0.92	0.72	010	2	0	1	0	0
G0052		D	Destroy lesions	0.29	0.23	ZZZ	0	0	1	0	0
G0053		D	Destroy lesions	5.05	3.97	010	2	0	1	0	0
G0058		D	Auto multichannel test	0.00	0.00	XXX	9	9	9	9	9
G0059		D	Auto multichannel test	0.00	0.00	XXX	9	9	9	9	9
G0060		D	Auto multichannel test	0.00	0.00	XXX	9	9	9	9	9
G0062		D	Peripheral bone	1.03	1.03	XXX	0	0	0	0	0
G0062	26	D	Peripheral bone	0.31	0.31	XXX	0	0	0	0	0
G0062	TC	D	Peripheral bone	0.72	0.72	XXX	0	0	0	0	0
G0063		D	Central bone density	3.35	3.35	XXX	0	0	0	0	0
G0063	26	D	Central bone density	0.40	0.40	XXX	0	0	0	0	0
G0063	TC	D	Central bone density	2.95	2.95	XXX	0	0	0	0	0
G0064		D	Care plan oversight	2.09	2.09	XXX	0	0	0	0	0
G0065		D	Care plan oversight	2.09	2.09	XXX	0	0	0	0	0
G0066		D	Care plan oversight	0.00	0.00	XXX	9	9	9	9	9
G0071		D	Psychotherapy	1.37	1.37	XXX	0	0	0	0	0
G0072		D	Psychotherapy	1.70	1.70	XXX	0	0	0	0	0
G0073		D	Psychotherapy	2.14	2.14	XXX	0	0	0	0	0
G0074		D	Psychotherapy	2.38	2.38	XXX	0	0	0	0	0
G0075		D	Psychotherapy	3.60	3.60	XXX	0	0	0	0	0
G0076		D	Psychotherapy	3.96	3.96	XXX	0	0	0	0	0
G0077		D	Psychotherapy	1.70	1.70	XXX	0	0	0	0	0
G0078		D	Psychotherapy	2.05	2.05	XXX	0	0	0	0	0
G0079		D	Psychotherapy	2.31	2.31	XXX	0	0	0	0	0
G0080		D	Psychotherapy	2.57	2.57	XXX	0	0	0	0	0
G0081		D	Psychotherapy	3.32	3.32	XXX	0	0	0	0	0
G0082		D	Psychotherapy	3.70	3.70	XXX	0	0	0	0	0
G0083		D	Psychotherapy	1.49	1.49	XXX	0	0	0	0	0
G0084		D	Psychotherapy	1.86	1.86	XXX	0	0	0	0	0
G0085		D	Psychotherapy	2.33	2.33	XXX	0	0	0	0	0
G0086		D	Psychotherapy	2.60	2.60	XXX	0	0	0	0	0
G0087		D	Psychotherapy	3.90	3.90	XXX	0	0	0	0	0
G0088		D	Psychotherapy	4.30	4.30	XXX	0	0	0	0	0
G0089		D	Psychotherapy	1.83	1.83	XXX	0	0	0	0	0
G0090		D	Psychotherapy	2.23	2.23	XXX	0	0	0	0	0
G0091		D	Psychotherapy	2.51	2.51	XXX	0	0	0	0	0
G0092		D	Psychotherapy	2.81	2.81	XXX	0	0	0	0	0
G0093		D	Psychotherapy	3.63	3.63	XXX	0	0	0	0	0
G0094		D	Psychotherapy	4.07	4.07	XXX	0	0	0	0	0
G0100		D	HIV-1, viral load	0.00	0.00	XXX	9	9	9	9	9
G0101		A	CA screen, pelvis	0.69	0.69	XXX	0	0	0	0	0
G0104		A	CA screen, flexible	2.13	1.45	000	2	0	1	0	0
G0105		A	Colorectal screen	7.56	7.51	000	2	0	1	0	0
G0106		A	Colon CA screen	3.51	3.51	XXX	0	0	0	0	0
G0106	26	A	Colon CA screen	1.37	1.37	XXX	0	0	0	0	0
G0106	TC	A	Colon CA screen	2.13	2.13	XXX	0	0	0	0	0
G0107		X	CA screen, fecal	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
G0110		R	Nett pulm-rehab	1.09	1.09	XXX	0	0	0	0	0
G0111		R	Nett pulm-rehab	0.45	0.45	XXX	0	0	0	0	0
G0112		R	Nett, nutrition	2.55	2.55	XXX	0	0	0	0	0
G0113		R	Nett, nutrition	1.96	1.96	XXX	0	0	0	0	0
G0114		R	Nett, psychosocial	1.49	1.49	XXX	0	0	0	0	0
G0115		R	Nett, psychological	1.49	1.49	XXX	0	0	0	0	0
G0116		R	Nett, psychosocial	1.37	1.37	XXX	0	0	0	0	0
G0120		A	Colon CA screen	3.51	3.51	XXX	0	0	0	0	0
G0120	26	A	Colon CA screen	1.37	1.37	XXX	0	0	0	0	0
G0120	TC	A	Colon CA screen	2.13	2.13	XXX	0	0	0	0	0
G0121		N	Colon CA screen	0.00	0.00	XXX	9	9	9	9	9
G0122		N	Colon CA screen	0.00	0.00	XXX	9	9	9	9	9
G0122	26	N	Colon CA screen	0.00	0.00	XXX	9	9	9	9	9
G0122	TC	N	Colon CA screen	0.00	0.00	XXX	9	9	9	9	9
J0120		E	Tetracycline injection	0.00	0.00	XXX	9	9	9	9	9
J0150		E	Adenosine injection	0.00	0.00	XXX	9	9	9	9	9
J0170		E	Adrenalin, epinephrine	0.00	0.00	XXX	9	9	9	9	9
J0190		E	Biperiden injection	0.00	0.00	XXX	9	9	9	9	9
J0205		E	Alglucerase injection	0.00	0.00	XXX	9	9	9	9	9
J0207		E	Amifostine	0.00	0.00	XXX	9	9	9	9	9
J0210		E	Methyldopate HCL	0.00	0.00	XXX	9	9	9	9	9
J0256		E	Alpha 1, protein	0.00	0.00	XXX	9	9	9	9	9
J0270		E	Alprostadil	0.00	0.00	XXX	9	9	9	9	9
J0280		E	Aminophylline	0.00	0.00	XXX	9	9	9	9	9
J0290		E	Ampicillin sodium	0.00	0.00	XXX	9	9	9	9	9
J0295		E	Ampicillin sodium	0.00	0.00	XXX	9	9	9	9	9
J0300		E	Amobarbital	0.00	0.00	XXX	9	9	9	9	9
J0330		E	Succinylcholine chloride	0.00	0.00	XXX	9	9	9	9	9
J0340		E	Nandrolone phenpropionate	0.00	0.00	XXX	9	9	9	9	9
J0350		E	Anistreplase injection	0.00	0.00	XXX	9	9	9	9	9
J0360		E	Hydralazine HCL	0.00	0.00	XXX	9	9	9	9	9
J0380		E	Metaraminol injection	0.00	0.00	XXX	9	9	9	9	9
J0390		E	Chloroquine injection	0.00	0.00	XXX	9	9	9	9	9
J0400		E	Trimethaphan injection	0.00	0.00	XXX	9	9	9	9	9
J0460		E	Atropine sulfate	0.00	0.00	XXX	9	9	9	9	9
J0470		E	Dimercaprol injection	0.00	0.00	XXX	9	9	9	9	9
J0475		E	Baclofen	0.00	0.00	XXX	9	9	9	9	9
J0500		E	Dicyclomine injection	0.00	0.00	XXX	9	9	9	9	9
J0510		E	Benzquinamide injection	0.00	0.00	XXX	9	9	9	9	9
J0515		E	Benztropine injection	0.00	0.00	XXX	9	9	9	9	9
J0520		E	Bethanechol chloride	0.00	0.00	XXX	9	9	9	9	9
J0530		E	Penicillin G benzathine	0.00	0.00	XXX	9	9	9	9	9
J0540		E	Penicillin G benzathine	0.00	0.00	XXX	9	9	9	9	9
J0550		E	Penicillin G benzathine	0.00	0.00	XXX	9	9	9	9	9
J0560		E	Penicillin G benzathine	0.00	0.00	XXX	9	9	9	9	9
J0570		E	Penicillin G benzathine	0.00	0.00	XXX	9	9	9	9	9
J0580		E	Penicillin G benzathine	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
J0585	E		Botulinum toxin	0.00	0.00	XXX	9	9	9	9	9
J0590	E		Ethylnorepinephrine HCL	0.00	0.00	XXX	9	9	9	9	9
J0600	E		Edetate calcium disodium	0.00	0.00	XXX	9	9	9	9	9
J0610	E		Calcium gluconate	0.00	0.00	XXX	9	9	9	9	9
J0620	E		Calcium glycerophosphate	0.00	0.00	XXX	9	9	9	9	9
J0630	E		Calcitonin salmon	0.00	0.00	XXX	9	9	9	9	9
J0635	E		Calcitriol injection	0.00	0.00	XXX	9	9	9	9	9
J0640	E		Leucovorin calcium	0.00	0.00	XXX	9	9	9	9	9
J0670	E		Mepivacaine injection	0.00	0.00	XXX	9	9	9	9	9
J0690	E		Cefazolin sodium	0.00	0.00	XXX	9	9	9	9	9
J0694	E		Cefoxitin sodium	0.00	0.00	XXX	9	9	9	9	9
J0695	E		Cefonicid sodium	0.00	0.00	XXX	9	9	9	9	9
J0696	E		Ceftriaxone sodium	0.00	0.00	XXX	9	9	9	9	9
J0697	E		Sterile cefuroxime sodium	0.00	0.00	XXX	9	9	9	9	9
J0698	E		Cefotaxime sodium	0.00	0.00	XXX	9	9	9	9	9
J0702	E		Betamethasone acetate	0.00	0.00	XXX	9	9	9	9	9
J0704	E		Betamethasone sodium	0.00	0.00	XXX	9	9	9	9	9
J0710	E		Cephapirin sodium	0.00	0.00	XXX	9	9	9	9	9
J0713	E		Ceftazidime injection	0.00	0.00	XXX	9	9	9	9	9
J0715	E		Ceftizoxime sodium	0.00	0.00	XXX	9	9	9	9	9
J0720	E		Chloramphenicol	0.00	0.00	XXX	9	9	9	9	9
J0725	E		Chorionic gonadotropin	0.00	0.00	XXX	9	9	9	9	9
J0730	E		Chlorpheniramine maleate	0.00	0.00	XXX	9	9	9	9	9
J0735	E		Clonidine hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J0740	E		Cidofovir injection	0.00	0.00	XXX	9	9	9	9	9
J0743	E		Cilastatin sodium	0.00	0.00	XXX	9	9	9	9	9
J0745	E		Codeine phosphate	0.00	0.00	XXX	9	9	9	9	9
J0760	E		Colchicine injection	0.00	0.00	XXX	9	9	9	9	9
J0770	E		Colistimethate sodium	0.00	0.00	XXX	9	9	9	9	9
J0780	E		Prochlorperazine	0.00	0.00	XXX	9	9	9	9	9
J0800	E		Corticotropin	0.00	0.00	XXX	9	9	9	9	9
J0810	E		Cortisone injection	0.00	0.00	XXX	9	9	9	9	9
J0835	E		Cosyntropin injection	0.00	0.00	XXX	9	9	9	9	9
J0850	E		Cytomegalovirus	0.00	0.00	XXX	9	9	9	9	9
J0895	E		Deferoxamine mesylate	0.00	0.00	XXX	9	9	9	9	9
J0900	E		Testosterone enanthate	0.00	0.00	XXX	9	9	9	9	9
J0945	E		Brompheniramine maleate	0.00	0.00	XXX	9	9	9	9	9
J0970	E		Estradiol valerate	0.00	0.00	XXX	9	9	9	9	9
J1000	E		Depo-estradiol cypionate	0.00	0.00	XXX	9	9	9	9	9
J1020	E		Methylprednisolone	0.00	0.00	XXX	9	9	9	9	9
J1030	E		Methylprednisolone	0.00	0.00	XXX	9	9	9	9	9
J1040	E		Methylprednisolone	0.00	0.00	XXX	9	9	9	9	9
J1050	E		Medroxyprogesterone	0.00	0.00	XXX	9	9	9	9	9
J1055	N		Medroxyprogesterone	0.00	0.00	XXX	9	9	9	9	9
J1060	E		Testosterone cypionate	0.00	0.00	XXX	9	9	9	9	9
J1070	E		Testosterone cypionate	0.00	0.00	XXX	9	9	9	9	9
J1080	E		Testosterone cypionate	0.00	0.00	XXX	9	9	9	9	9
J1090	E		Testosterone cypionate	0.00	0.00	XXX	9	9	9	9	9
J1095	E		Dexamethasone injection	0.00	0.00	XXX	9	9	9	9	9
J1100	E		Dexamethasone acetate	0.00	0.00	XXX	9	9	9	9	9
J1110	E		Dihydroergotamine	0.00	0.00	XXX	9	9	9	9	9
J1120	E		Acetazolamide sodium\	0.00	0.00	XXX	9	9	9	9	9
J1160	E		Digoxin injection	0.00	0.00	XXX	9	9	9	9	9
J1165	E		Phenytoin sodium	0.00	0.00	XXX	9	9	9	9	9
J1170	E		Hydromorphone injection	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
J1180	E		Dyphylline injection	0.00	0.00	XXX	9	9	9	9	9
J1190	E		Dexrazoxane HCL	0.00	0.00	XXX	9	9	9	9	9
J1200	E		Diphenhydramine HCL	0.00	0.00	XXX	9	9	9	9	9
J1205	E		Chlorothiazide sodium	0.00	0.00	XXX	9	9	9	9	9
J1212	E		Dimethyl sulfoxide	0.00	0.00	XXX	9	9	9	9	9
J1230	E		Methadone injection	0.00	0.00	XXX	9	9	9	9	9
J1240	E		Dimenhydrinate	0.00	0.00	XXX	9	9	9	9	9
J1245	E		Dipyridamole	0.00	0.00	XXX	9	9	9	9	9
J1250	E		Dobutamine injection	0.00	0.00	XXX	9	9	9	9	9
J1320	E		Amitriptyline injection	0.00	0.00	XXX	9	9	9	9	9
J1325	E		Epoprostenol	0.00	0.00	XXX	9	9	9	9	9
J1330	E		Ergonovine maleate	0.00	0.00	XXX	9	9	9	9	9
J1362	E		Erythromycin gluceptate	0.00	0.00	XXX	9	9	9	9	9
J1364	E		Erythromycin lactobionate	0.00	0.00	XXX	9	9	9	9	9
J1380	E		Estradiol valerate	0.00	0.00	XXX	9	9	9	9	9
J1390	E		Estradiol valerate	0.00	0.00	XXX	9	9	9	9	9
J1410	E		Estrogen conjugated	0.00	0.00	XXX	9	9	9	9	9
J1435	E		Estrone injection	0.00	0.00	XXX	9	9	9	9	9
J1436	E		Etidronate disodium	0.00	0.00	XXX	9	9	9	9	9
J1440	E		Filgrastim	0.00	0.00	XXX	9	9	9	9	9
J1441	E		Filgrastim	0.00	0.00	XXX	9	9	9	9	9
J1455	E		Foscarnet sodium	0.00	0.00	XXX	9	9	9	9	9
J1460	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1470	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1480	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1490	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1500	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1510	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1520	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1530	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1540	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1550	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1560	E		Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
J1561	E		Immune globulin	0.00	0.00	XXX	9	9	9	9	9
J1562	E		Immune globulin	0.00	0.00	XXX	9	9	9	9	9
J1565	E		RSV-ivig	0.00	0.00	XXX	9	9	9	9	9
J1570	E		Ganciclovir sodium	0.00	0.00	XXX	9	9	9	9	9
J1580	E		Garamycin, gentamicin	0.00	0.00	XXX	9	9	9	9	9
J1600	E		Gold sodium thiomalate	0.00	0.00	XXX	9	9	9	9	9
J1610	E		Glucagon hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J1620	E		Gonadorelin hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J1625	D		Granisetron hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J1626	E		Granisetron hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J1630	E		Haloperidol injection	0.00	0.00	XXX	9	9	9	9	9
J1631	E		Haloperidol decanoate	0.00	0.00	XXX	9	9	9	9	9
J1642	E		Heparin sodium injection	0.00	0.00	XXX	9	9	9	9	9
J1644	E		Heparin sodium injection	0.00	0.00	XXX	9	9	9	9	9
J1645	E		Dalteparin sodium	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

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J1650	E		Enoxaparin sodium	0.00	0.00	XXX	9	9	9	9	9
J1670	E		Tetanus immune globulin	0.00	0.00	XXX	9	9	9	9	9
J1690	E		Prednisolone tebutate	0.00	0.00	XXX	9	9	9	9	9
J1700	E		Hydrocortisone	0.00	0.00	XXX	9	9	9	9	9
J1710	E		Hydrocortisone	0.00	0.00	XXX	9	9	9	9	9
J1720	E		Hydrocortisone	0.00	0.00	XXX	9	9	9	9	9
J1730	E		Diazoxide injection	0.00	0.00	XXX	9	9	9	9	9
J1739	E		Hydroxyprogesterone	0.00	0.00	XXX	9	9	9	9	9
J1741	E		Hydroxyprogesterone	0.00	0.00	XXX	9	9	9	9	9
J1742	E		Ibutilide fumar	0.00	0.00	XXX	9	9	9	9	9
J1760	E		Iron dextran	0.00	0.00	XXX	9	9	9	9	9
J1770	E		Iron dextran	0.00	0.00	XXX	9	9	9	9	9
J1780	E		Iron dextran	0.00	0.00	XXX	9	9	9	9	9
J1785	E		Imiglucerase injection	0.00	0.00	XXX	9	9	9	9	9
J1790	E		Droperidol injection	0.00	0.00	XXX	9	9	9	9	9
J1800	E		Propranolol injection	0.00	0.00	XXX	9	9	9	9	9
J1810	E		Droperidol and fentanyl	0.00	0.00	XXX	9	9	9	9	9
J1820	E		Insulin injection	0.00	0.00	XXX	9	9	9	9	9
J1825	E		Interferon beta	0.00	0.00	XXX	9	9	9	9	9
J1830	E		Interferon beta	0.00	0.00	XXX	9	9	9	9	9
J1840	E		Kanamycin sulfate	0.00	0.00	XXX	9	9	9	9	9
J1850	E		Kanamycin sulfate	0.00	0.00	XXX	9	9	9	9	9
J1885	E		Ketorolac tromethamine	0.00	0.00	XXX	9	9	9	9	9
J1890	E		Cephalothin sodium	0.00	0.00	XXX	9	9	9	9	9
J1910	E		Kutapressin injection	0.00	0.00	XXX	9	9	9	9	9
J1930	E		Propiomazine injection	0.00	0.00	XXX	9	9	9	9	9
J1940	E		Furosemide injection	0.00	0.00	XXX	9	9	9	9	9
J1950	E		Leuprolide acetate	0.00	0.00	XXX	9	9	9	9	9
J1955	E		Levocarnitine injection	0.00	0.00	XXX	9	9	9	9	9
J1960	E		Levorphanol tartrate	0.00	0.00	XXX	9	9	9	9	9
J1970	E		Methotrimeprazine	0.00	0.00	XXX	9	9	9	9	9
J1980	E		Hyoscyamine sulfate	0.00	0.00	XXX	9	9	9	9	9
J1990	E		Chlordiazepoxide HCL	0.00	0.00	XXX	9	9	9	9	9
J2000	E		Lidocaine injection	0.00	0.00	XXX	9	9	9	9	9
J2010	E		Lincomycin injection	0.00	0.00	XXX	9	9	9	9	9
J2060	E		Lorazepam injection	0.00	0.00	XXX	9	9	9	9	9
J2150	E		Mannitol injection	0.00	0.00	XXX	9	9	9	9	9
J2175	E		Meperidine hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J2180	E		Meperidine, promethazine	0.00	0.00	XXX	9	9	9	9	9
J2210	E		Methylergonovine	0.00	0.00	XXX	9	9	9	9	9
J2240	E		Metocurine iodine	0.00	0.00	XXX	9	9	9	9	9
J2250	E		Midazolam hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J2260	E		Milrinone injection	0.00	0.00	XXX	9	9	9	9	9
J2270	E		Morphine sulfate	0.00	0.00	XXX	9	9	9	9	9
J2275	E		Morphine sulfate	0.00	0.00	XXX	9	9	9	9	9
J2300	E		Nalbuphine hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J2310	E		Naloxone hydrochloride	0.00	0.00	XXX	9	9	9	9	9
J2320	E		Nandrolone decanoate	0.00	0.00	XXX	9	9	9	9	9
J2321	E		Nandrolone decanoate	0.00	0.00	XXX	9	9	9	9	9
J2322	E		Nandrolone decanoate	0.00	0.00	XXX	9	9	9	9	9
J2330	E		Thiothixene injection	0.00	0.00	XXX	9	9	9	9	9
J2350	E		Niacinamide, niacin	0.00	0.00	XXX	9	9	9	9	9
J2360	E		Orphenadrine citrate	0.00	0.00	XXX	9	9	9	9	9
J2370	E		Phenylephrine HCL	0.00	0.00	XXX	9	9	9	9	9
J2400	E		Chlorprocaine HCL	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
J2405	E		Ondansetron HCL	0.00	0.00	XXX	9	9	9	9	9
J2410	E		Oxymorphone HCL	0.00	0.00	XXX	9	9	9	9	9
J2430	E		Pamidronate disodium	0.00	0.00	XXX	9	9	9	9	9
J2440	E		Papaverine HCL	0.00	0.00	XXX	9	9	9	9	9
J2460	E		Oxytetracycline HCL	0.00	0.00	XXX	9	9	9	9	9
J2480	E		Hydrochlorides	0.00	0.00	XXX	9	9	9	9	9
J2510	E		Penicillin G procaine	0.00	0.00	XXX	9	9	9	9	9
J2512	E		Pentagastrin injection	0.00	0.00	XXX	9	9	9	9	9
J2515	E		Pentobarbital sodium	0.00	0.00	XXX	9	9	9	9	9
J2540	E		Penicillin G potassium	0.00	0.00	XXX	9	9	9	9	9
J2545	E		Pentamidine isethionate	0.00	0.00	XXX	9	9	9	9	9
J2550	E		Promethazine HCL	0.00	0.00	XXX	9	9	9	9	9
J2560	E		Phenobarbital sodium	0.00	0.00	XXX	9	9	9	9	9
J2590	E		Oxytocin injection	0.00	0.00	XXX	9	9	9	9	9
J2597	E		Desmopressin acetate	0.00	0.00	XXX	9	9	9	9	9
J2640	E		Prednisolone sodium	0.00	0.00	XXX	9	9	9	9	9
J2650	E		Prednisolone acetate	0.00	0.00	XXX	9	9	9	9	9
J2670	E		Tolazoline HCL	0.00	0.00	XXX	9	9	9	9	9
J2675	E		Progesterone injection	0.00	0.00	XXX	9	9	9	9	9
J2680	E		Fluphenazine decanoate	0.00	0.00	XXX	9	9	9	9	9
J2690	E		Procaïnamide HCL	0.00	0.00	XXX	9	9	9	9	9
J2700	E		Oxacillin sodium	0.00	0.00	XXX	9	9	9	9	9
J2710	E		Neostigmine methylsulfate	0.00	0.00	XXX	9	9	9	9	9
J2720	E		Protamine sulfate	0.00	0.00	XXX	9	9	9	9	9
J2725	E		Protirelin	0.00	0.00	XXX	9	9	9	9	9
J2730	E		Pralidoxime chloride	0.00	0.00	XXX	9	9	9	9	9
J2760	E		Phentolamine mesylate	0.00	0.00	XXX	9	9	9	9	9
J2765	E		Metoclopramide HCL	0.00	0.00	XXX	9	9	9	9	9
J2790	E		Rho D immune globulin	0.00	0.00	XXX	9	9	9	9	9
J2800	E		Methocarbamol injection	0.00	0.00	XXX	9	9	9	9	9
J2810	E		Theophylline injection	0.00	0.00	XXX	9	9	9	9	9
J2820	E		Sargramostim injection	0.00	0.00	XXX	9	9	9	9	9
J2860	E		Secobarbital sodium	0.00	0.00	XXX	9	9	9	9	9
J2910	E		Aurothioglucose	0.00	0.00	XXX	9	9	9	9	9
J2912	E		Sodium chloride	0.00	0.00	XXX	9	9	9	9	9
J2920	E		Methylprednisolone sodium	0.00	0.00	XXX	9	9	9	9	9
J2930	E		Methylprednisolone sodium	0.00	0.00	XXX	9	9	9	9	9
J2950	E		Promazine HCL injection	0.00	0.00	XXX	9	9	9	9	9
J2970	E		Methicillin sodium	0.00	0.00	XXX	9	9	9	9	9
J2995	E		Streptokinase injection	0.00	0.00	XXX	9	9	9	9	9
J2996	E		Alteplase recombinant	0.00	0.00	XXX	9	9	9	9	9
J3000	E		Streptomycin injection	0.00	0.00	XXX	9	9	9	9	9
J3005	D		Strontium-89 chloride	0.00	0.00	XXX	9	9	9	9	9
J3010	E		Fentanyl citrate	0.00	0.00	XXX	9	9	9	9	9
J3030	E		Sumatriptan succinate	0.00	0.00	XXX	9	9	9	9	9
J3070	E		Pentazocine HCL	0.00	0.00	XXX	9	9	9	9	9
J3080	E		Chlorprothixene	0.00	0.00	XXX	9	9	9	9	9
J3105	E		Terbutaline sulfate	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
J3120	E		Testosterone enanthate	0.00	0.00	XXX	9	9	9	9	9
J3130	E		Testosterone enanthate	0.00	0.00	XXX	9	9	9	9	9
J3140	E		Testosterone suspension	0.00	0.00	XXX	9	9	9	9	9
J3150	E		Testosterone propionate	0.00	0.00	XXX	9	9	9	9	9
J3230	E		Chlorpromazine HCL	0.00	0.00	XXX	9	9	9	9	9
J3240	E		Thyrotropin injection	0.00	0.00	XXX	9	9	9	9	9
J3250	E		Trimethobenzamide HCL	0.00	0.00	XXX	9	9	9	9	9
J3260	E		Tobramycin sulfate	0.00	0.00	XXX	9	9	9	9	9
J3265	E		Toraseamide injection	0.00	0.00	XXX	9	9	9	9	9
J3270	E		Imipramine HCL	0.00	0.00	XXX	9	9	9	9	9
J3280	E		Thiethylperazine maleate	0.00	0.00	XXX	9	9	9	9	9
J3301	E		Triamcinolone acetonide	0.00	0.00	XXX	9	9	9	9	9
J3302	E		Triamcinolone diacetate	0.00	0.00	XXX	9	9	9	9	9
J3303	E		Triamcinolone	0.00	0.00	XXX	9	9	9	9	9
J3305	E		Trimetrexate injection	0.00	0.00	XXX	9	9	9	9	9
J3310	E		Perphenazine injection	0.00	0.00	XXX	9	9	9	9	9
J3320	E		Spectinomycin	0.00	0.00	XXX	9	9	9	9	9
J3350	E		Urea injection	0.00	0.00	XXX	9	9	9	9	9
J3360	E		Diazepam injection	0.00	0.00	XXX	9	9	9	9	9
J3364	E		Urokinase	0.00	0.00	XXX	9	9	9	9	9
J3365	E		Urokinase	0.00	0.00	XXX	9	9	9	9	9
J3370	R		Vancomycin HCL	0.00	0.00	XXX	0	0	0	0	0
J3390	E		Methoxamine injection	0.00	0.00	XXX	9	9	9	9	9
J3400	E		Triflupromazine HCL	0.00	0.00	XXX	9	9	9	9	9
J3410	E		Hydroxyzine HCL	0.00	0.00	XXX	9	9	9	9	9
J3420	E		Vitamin B-12 injection	0.00	0.00	XXX	9	9	9	9	9
J3430	E		Phytoadione (Vitamin K)	0.00	0.00	XXX	9	9	9	9	9
J3450	E		Mephentermine sulfate	0.00	0.00	XXX	9	9	9	9	9
J3470	E		Hyaluronidase	0.00	0.00	XXX	9	9	9	9	9
J3475	E		Magnesium sulfate	0.00	0.00	XXX	9	9	9	9	9
J3480	E		Potassium chloride	0.00	0.00	XXX	9	9	9	9	9
J3490	E		Unclassified drugs	0.00	0.00	XXX	9	9	9	9	9
J3520	N		Edetate disodium	0.00	0.00	XXX	9	9	9	9	9
J3530	E		Nasal vaccine inhalation	0.00	0.00	XXX	9	9	9	9	9
J3535	N		Metered dose inhaler	0.00	0.00	XXX	9	9	9	9	9
J3570	N		Laetrile, amygdalin	0.00	0.00	XXX	9	9	9	9	9
J7030	E		Normal saline solution	0.00	0.00	XXX	9	9	9	9	9
J7040	E		Normal saline, sterile	0.00	0.00	XXX	9	9	9	9	9
J7042	E		5% dextrose/normal	0.00	0.00	XXX	9	9	9	9	9
J7050	E		Normal saline solution	0.00	0.00	XXX	9	9	9	9	9
J7051	E		Sterile saline or water	0.00	0.00	XXX	9	9	9	9	9
J7060	E		5% dextrose/water	0.00	0.00	XXX	9	9	9	9	9
J7070	E		D5W infusion	0.00	0.00	XXX	9	9	9	9	9
J7100	E		Dextran 40 infusion	0.00	0.00	XXX	9	9	9	9	9
J7110	E		Dextran 75 infusion	0.00	0.00	XXX	9	9	9	9	9
J7120	E		Ringers lactate infusion	0.00	0.00	XXX	9	9	9	9	9
J7130	E		Hypertonic saline	0.00	0.00	XXX	9	9	9	9	9
J7190	X		Factor VIII, human	0.00	0.00	XXX	9	9	9	9	9
J7191	X		Factor VIII, porcine	0.00	0.00	XXX	9	9	9	9	9
J7192	X		Factor VIII, recombinant	0.00	0.00	XXX	9	9	9	9	9
J7194	X		Factor IX, complex	0.00	0.00	XXX	9	9	9	9	9
J7196	X		Other hemophilia clotting	0.00	0.00	XXX	9	9	9	9	9
J7197	X		Antithrombin III, human	0.00	0.00	XXX	9	9	9	9	9
J7300	N		Intrauterine copper	0.00	0.00	XXX	9	9	9	9	9
J7310	E		Ganciclovir, long-acting	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
J7500	X		Azathioprine, oral tab	0.00	0.00	XXX	9	9	9	9	9
J7501	X		Azathioprine, parenteral	0.00	0.00	XXX	9	9	9	9	9
J7503	X		Cyclosporine, parenteral	0.00	0.00	XXX	9	9	9	9	9
J7504	X		Lymphocyte immune	0.00	0.00	XXX	9	9	9	9	9
J7505	X		Monoclonal antibodies	0.00	0.00	XXX	9	9	9	9	9
J7506	X		Prednisone, oral	0.00	0.00	XXX	9	9	9	9	9
J7507	E		Tacrolimus, oral	0.00	0.00	XXX	9	9	9	9	9
J7508	E		Tacrolimus, oral	0.00	0.00	XXX	9	9	9	9	9
J7509	X		Methylprednisolone oral	0.00	0.00	XXX	9	9	9	9	9
J7510	X		Prednisolone oral	0.00	0.00	XXX	9	9	9	9	9
J7599	X		Immunosuppressive drug	0.00	0.00	XXX	9	9	9	9	9
J7610	E		Acetylcysteine, 10%	0.00	0.00	XXX	9	9	9	9	9
J7615	E		Acetylcysteine, 20%	0.00	0.00	XXX	9	9	9	9	9
J7620	E		Albuterol sulfate, .083%	0.00	0.00	XXX	9	9	9	9	9
J7625	E		Albuterol sulfate, .5%	0.00	0.00	XXX	9	9	9	9	9
J7627	E		Bitolterol mesylate, .2%	0.00	0.00	XXX	9	9	9	9	9
J7630	E		Cromolyn sodium	0.00	0.00	XXX	9	9	9	9	9
J7640	E		Epinephrine, 2.25%	0.00	0.00	XXX	9	9	9	9	9
J7645	E		Ipratropium bromide, .02%	0.00	0.00	XXX	9	9	9	9	9
J7650	E		Isoetharine HCL, .1%	0.00	0.00	XXX	9	9	9	9	9
J7651	E		Isoetharine HCL, .125%	0.00	0.00	XXX	9	9	9	9	9
J7652	E		Isoetharine HCL, .167%	0.00	0.00	XXX	9	9	9	9	9
J7653	E		Isoetharine HCL, .2%	0.00	0.00	XXX	9	9	9	9	9
J7654	E		Isoetharine HCL, .25%	0.00	0.00	XXX	9	9	9	9	9
J7655	E		Isoetharine HCL, 1.0%	0.00	0.00	XXX	9	9	9	9	9
J7660	E		Isoproterenol HCL, .5%	0.00	0.00	XXX	9	9	9	9	9
J7665	E		Isoproterenol HCL, 1.0%	0.00	0.00	XXX	9	9	9	9	9
J7670	E		Metaproterenol sulfate	0.00	0.00	XXX	9	9	9	9	9
J7672	E		Metaproterenol sulfate	0.00	0.00	XXX	9	9	9	9	9
J7675	E		Metaproterenol sulfate	0.00	0.00	XXX	9	9	9	9	9
J7699	E		Inhalation solution	0.00	0.00	XXX	9	9	9	9	9
J7799	E		Noninhalation drugs	0.00	0.00	XXX	9	9	9	9	9
J8499	N		Oral prescription drugs	0.00	0.00	XXX	9	9	9	9	9
J8530	E		Cyclophosphamide, oral	0.00	0.00	XXX	9	9	9	9	9
J8560	E		Etoposide, oral	0.00	0.00	XXX	9	9	9	9	9
J8600	E		Melphalan, oral	0.00	0.00	XXX	9	9	9	9	9
J8610	E		Methotrexate, oral	0.00	0.00	XXX	9	9	9	9	9
J8999	E		Oral prescription drugs	0.00	0.00	XXX	9	9	9	9	9
J9000	E		Doxorubic HCL	0.00	0.00	XXX	9	9	9	9	9
J9015	E		Aldesleukin	0.00	0.00	XXX	9	9	9	9	9
J9020	E		Asparaginase	0.00	0.00	XXX	9	9	9	9	9
J9031	E		BCG (intravesical)	0.00	0.00	XXX	9	9	9	9	9
J9040	E		Bleomycin sulfate	0.00	0.00	XXX	9	9	9	9	9
J9045	E		Carboplatin	0.00	0.00	XXX	9	9	9	9	9
J9050	E		Carmustine	0.00	0.00	XXX	9	9	9	9	9
J9060	E		Cisplatin	0.00	0.00	XXX	9	9	9	9	9
J9062	E		Cisplatin	0.00	0.00	XXX	9	9	9	9	9
J9065	E		Cladribine	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

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J9070	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9080	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9090	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9091	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9092	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9093	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9094	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9095	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9096	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9097	E		Cyclophosphamide	0.00	0.00	XXX	9	9	9	9	9
J9100	E		Cytarabine	0.00	0.00	XXX	9	9	9	9	9
J9110	E		Cytarabine	0.00	0.00	XXX	9	9	9	9	9
J9120	E		Dactinomycin	0.00	0.00	XXX	9	9	9	9	9
J9130	E		Dacarbazine	0.00	0.00	XXX	9	9	9	9	9
J9140	E		Dacarbazine	0.00	0.00	XXX	9	9	9	9	9
J9150	E		Daunorubicin HCL	0.00	0.00	XXX	9	9	9	9	9
J9165	E		Diethylstilbestrol	0.00	0.00	XXX	9	9	9	9	9
J9170	E		Docetaxel	0.00	0.00	XXX	9	9	9	9	9
J9181	E		Etoposide	0.00	0.00	XXX	9	9	9	9	9
J9182	E		Etoposide	0.00	0.00	XXX	9	9	9	9	9
J9185	E		Fludarabine phosphate	0.00	0.00	XXX	9	9	9	9	9
J9190	E		Fluorouracil	0.00	0.00	XXX	9	9	9	9	9
J9200	E		Floxuridine	0.00	0.00	XXX	9	9	9	9	9
J9201	E		Gemcitabine HCL	0.00	0.00	XXX	9	9	9	9	9
J9202	E		Goserelin acetate implant	0.00	0.00	XXX	9	9	9	9	9
J9206	E		Irinotecan	0.00	0.00	XXX	9	9	9	9	9
J9208	E		Ifosfamide	0.00	0.00	XXX	9	9	9	9	9
J9209	E		Mesna	0.00	0.00	XXX	9	9	9	9	9
J9211	E		Idarubicin HCL	0.00	0.00	XXX	9	9	9	9	9
J9213	E		Interferon, alfa-2A	0.00	0.00	XXX	9	9	9	9	9
J9214	E		Interferon, alfa-2B	0.00	0.00	XXX	9	9	9	9	9
J9215	E		Interferon, alfa-N3	0.00	0.00	XXX	9	9	9	9	9
J9216	E		Interferon, gamma 1-B	0.00	0.00	XXX	9	9	9	9	9
J9217	E		Leuprolide acetate	0.00	0.00	XXX	9	9	9	9	9
J9218	E		Leuprolide acetate	0.00	0.00	XXX	9	9	9	9	9
J9230	E		Mechlorethamine HCL	0.00	0.00	XXX	9	9	9	9	9
J9245	E		Melphalan HCL	0.00	0.00	XXX	9	9	9	9	9
J9250	E		Methotrexate sodium	0.00	0.00	XXX	9	9	9	9	9
J9260	E		Methotrexate sodium	0.00	0.00	XXX	9	9	9	9	9
J9265	E		Paclitaxel	0.00	0.00	XXX	9	9	9	9	9
J9266	E		Pegaspargase	0.00	0.00	XXX	9	9	9	9	9
J9268	E		Pentostatin	0.00	0.00	XXX	9	9	9	9	9
J9270	E		Plicamycin	0.00	0.00	XXX	9	9	9	9	9
J9280	E		Mitomycin	0.00	0.00	XXX	9	9	9	9	9
J9290	E		Mitomycin	0.00	0.00	XXX	9	9	9	9	9
J9291	E		Mitomycin	0.00	0.00	XXX	9	9	9	9	9
J9293	E		Mitoxantrone HCL	0.00	0.00	XXX	9	9	9	9	9
J9320	E		Streptozocin	0.00	0.00	XXX	9	9	9	9	9
J9340	E		Thiotepa	0.00	0.00	XXX	9	9	9	9	9
J9350	E		Topotecan	0.00	0.00	XXX	9	9	9	9	9
J9360	E		Vinblastine sulfate	0.00	0.00	XXX	9	9	9	9	9
J9370	E		Vincristine sulfate	0.00	0.00	XXX	9	9	9	9	9
J9375	E		Vincristine sulfate	0.00	0.00	XXX	9	9	9	9	9
J9380	E		Vincristine sulfate	0.00	0.00	XXX	9	9	9	9	9
J9390	E		Vinorelbine tartrate	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
J9600		E	Porfimer sodium	0.00	0.00	XXX	9	9	9	9	9
J9999		E	Chemotherapy drug	0.00	0.00	XXX	9	9	9	9	9
M0064		A	Visit, drugs	0.54	0.54	XXX	0	0	0	0	0
M0075		N	Cellular therapy	0.00	0.00	XXX	9	9	9	9	9
M0076		N	Prolotherapy	0.00	0.00	XXX	9	9	9	9	9
M0100		N	Intragastric hypothermia	0.00	0.00	XXX	9	9	9	9	9
M0101		G	Foot care hygiene	0.74	0.58	XXX	0	0	0	0	0
M0300		N	IV chelation therapy	0.00	0.00	XXX	9	9	9	9	9
M0301		N	Fabric wrapping	0.00	0.00	XXX	9	9	9	9	9
M0302		N	Assess cardiac output	0.00	0.00	XXX	9	9	9	9	9
P2028		X	Cephalin flocculation test	0.00	0.00	XXX	9	9	9	9	9
P2029		X	Congo red blood	0.00	0.00	XXX	9	9	9	9	9
P2033		X	Blood thymol turbidity	0.00	0.00	XXX	9	9	9	9	9
P2038		X	Blood mucoprote	0.00	0.00	XXX	9	9	9	9	9
P7001		I	Culture bacteria	0.00	0.00	XXX	9	9	9	9	9
P9010		E	Whole blood transfusion	0.00	0.00	XXX	9	9	9	9	9
P9011		E	Blood, split unit	0.00	0.00	XXX	9	9	9	9	9
P9012		E	Cryoprecipitate	0.00	0.00	XXX	9	9	9	9	9
P9013		E	Fibrinogen unit	0.00	0.00	XXX	9	9	9	9	9
P9014		E	Gamma globulin	0.00	0.00	XXX	9	9	9	9	9
P9015		E	RH immune globulin	0.00	0.00	XXX	9	9	9	9	9
P9016		E	Leukocyte poor blood	0.00	0.00	XXX	9	9	9	9	9
P9017		E	One donor, fresh frozen	0.00	0.00	XXX	9	9	9	9	9
P9018		E	Plasma protein fraction	0.00	0.00	XXX	9	9	9	9	9
P9019		E	Platelet concentrate	0.00	0.00	XXX	9	9	9	9	9
P9020		E	Platelet rich plasma	0.00	0.00	XXX	9	9	9	9	9
P9021		E	Red blood cells	0.00	0.00	XXX	9	9	9	9	9
P9022		E	Washed red blood cells	0.00	0.00	XXX	9	9	9	9	9
Q0034		X	Administer flu vaccine	0.00	0.00	XXX	9	9	9	9	9
Q0035		A	Cardiokymography	0.65	0.65	XXX	0	0	0	0	0
Q0035	26	A	Cardiokymography	0.28	0.28	XXX	0	0	0	0	0
Q0035	TC	A	Cardiokymography	0.37	0.37	XXX	0	0	0	0	0
Q0068		A	Plasmapheresis	2.83	2.83	000	0	0	0	0	0
Q0091		A	Obtaining screening	0.62	0.62	XXX	0	0	0	0	0
Q0092		A	Set up portable x-ray	0.30	0.30	XXX	0	0	0	0	0
Q0132		X	Dispensing fee	0.00	0.00	XXX	9	9	9	9	9
Q0136		X	Non ESRD epoetin alpha	0.00	0.00	XXX	9	9	9	9	9
Q0144		N	Azithromycin dihydrate	0.00	0.00	XXX	9	9	9	9	9
Q0156		X	Human albumin 5%	0.00	0.00	XXX	9	9	9	9	9
Q0157		X	Human albumin, 25%	0.00	0.00	XXX	9	9	9	9	9
Q0158		D	Combined hib & hep B	0.00	0.00	XXX	9	9	9	9	9
Q9920		E	Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9921		E	Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9922		E	Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9923		E	Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9924		E	Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9925		E	Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
Q9926	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9927	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9928	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9929	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9930	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9931	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9932	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9933	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9934	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9935	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9936	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9937	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9938	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9939	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
Q9940	E		Epoetin with HCT	0.00	0.00	XXX	9	9	9	9	9
R0070	C		Transport portable x-ray	0.00	0.00	XXX	0	0	0	0	0
R0075	C		Transport portable x-ray	0.00	0.00	XXX	0	0	0	0	0
R0076	C		Transport portable EKG	0.00	0.00	XXX	0	0	0	0	0

K. Procedure codes S0009 to S9999 related to additional miscellaneous articles and supplies.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
S0009	I		Injection, butorphanol	0.00	0.00	XXX	9	9	9	9	9
S0010	I		Injection, somatrem	0.00	0.00	XXX	9	9	9	9	9
S0011	I		Injection, somotropin	0.00	0.00	XXX	9	9	9	9	9
S0012	I		Butorphanol tartrate	0.00	0.00	XXX	9	9	9	9	9
S0014	I		Tacrine hydrochloride	0.00	0.00	XXX	9	9	9	9	9
S0016	I		Injection, amikacin	0.00	0.00	XXX	9	9	9	9	9
S0017	I		Injection, aminocaproic	0.00	0.00	XXX	9	9	9	9	9
S0020	I		Injection, bupivaicaine	0.00	0.00	XXX	9	9	9	9	9
S0021	I		Injection, ceftoperazone	0.00	0.00	XXX	9	9	9	9	9
S0023	I		Injection, cimetidine	0.00	0.00	XXX	9	9	9	9	9
S0024	I		Injection, ciprofloxacin	0.00	0.00	XXX	9	9	9	9	9
S0028	I		Injection, famotidine	0.00	0.00	XXX	9	9	9	9	9
S0029	I		Injection, fluconazole	0.00	0.00	XXX	9	9	9	9	9
S0030	I		Injection, metronidazole	0.00	0.00	XXX	9	9	9	9	9
S0032	I		Injection, nafcillin	0.00	0.00	XXX	9	9	9	9	9
S0034	I		Injection, ofloxacin	0.00	0.00	XXX	9	9	9	9	9
S0039	I		Injection, sulfamethoxa.	0.00	0.00	XXX	9	9	9	9	9
S0040	I		Injection, ticarcillin	0.00	0.00	XXX	9	9	9	9	9
S0071	I		Injection, acyclovir	0.00	0.00	XXX	9	9	9	9	9
S0072	I		Injection, amikacin	0.00	0.00	XXX	9	9	9	9	9
S0073	I		Injection, aztreonam	0.00	0.00	XXX	9	9	9	9	9
S0074	I		Injection, cefotetan	0.00	0.00	XXX	9	9	9	9	9
S0077	I		Injection, clindamycin	0.00	0.00	XXX	9	9	9	9	9
S0078	I		Injection, fosphenytoin	0.00	0.00	XXX	9	9	9	9	9
S0080	I		Injection, pentamidine	0.00	0.00	XXX	9	9	9	9	9
S0081	I		Injection, piperacillin	0.00	0.00	XXX	9	9	9	9	9
S0090	I		Sildenafil citrate, 25 mg	0.00	0.00	XXX	9	9	9	9	9
S0096	I		Injection, itraconazole	0.00	0.00	XXX	9	9	9	9	9
S0097	I		Injection, ibutilide	0.00	0.00	XXX	9	9	9	9	9
S0098	I		Injection, sodium ferric	0.00	0.00	XXX	9	9	9	9	9
S0601	I		Screening proctoscopy	0.00	0.00	XXX	9	9	9	9	9
S0605	I		Digital rectal exam	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
S0610	I		Annual gynecological	0.00	0.00	XXX	9	9	9	9	9
S0612	I		Annual gynecological	0.00	0.00	XXX	9	9	9	9	9
S0620	I		Routine ophthalmological	0.00	0.00	XXX	9	9	9	9	9
S0621	I		Routine ophthalmological	0.00	0.00	XXX	9	9	9	9	9
S0800	I		Laser in situ	0.00	0.00	XXX	9	9	9	9	9
S0810	I		Photorefractive (PRK)	0.00	0.00	XXX	9	9	9	9	9
S2050	I		Donor enterectomy, prep	0.00	0.00	XXX	9	9	9	9	9
S2052	I		Transplant intestine	0.00	0.00	XXX	9	9	9	9	9
S2053	I		Transplant intestine	0.00	0.00	XXX	9	9	9	9	9
S2054	I		Transplant visceral	0.00	0.00	XXX	9	9	9	9	9
S2055	I		Harvesting of donor	0.00	0.00	XXX	9	9	9	9	9
S2109	I		Autologous chondrocyte	0.00	0.00	XXX	9	9	9	9	9
S2190	I		Subcutaneous implantation	0.00	0.00	XXX	9	9	9	9	9
S2204	I		Transmyocardial laser	0.00	0.00	XXX	9	9	9	9	9
S2205	I		Minimally invasive direct	0.00	0.00	XXX	9	9	9	9	9
S2206	I		Minimally invasive direct	0.00	0.00	XXX	9	9	9	9	9
S2207	I		Minimally invasive direct	0.00	0.00	XXX	9	9	9	9	9
S2208	I		Minimally invasive direct	0.00	0.00	XXX	9	9	9	9	9
S2209	I		Minimally invasive direct	0.00	0.00	XXX	9	9	9	9	9
S2210	I		Cryosurgical ablation	0.00	0.00	XXX	9	9	9	9	9
S2300	I		Arthroscopy shoulder	0.00	0.00	XXX	9	9	9	9	9
S2350	I		Diskectomy, anterior	0.00	0.00	XXX	9	9	9	9	9
S2351	I		Diskectomy, anterior	0.00	0.00	XXX	9	9	9	9	9
S3645	I		HIV-1 antibody testing	0.00	0.00	XXX	9	9	9	9	9
S3650	I		Saliva test, hormone	0.00	0.00	XXX	9	9	9	9	9
S3652	I		Saliva test, hormone	0.00	0.00	XXX	9	9	9	9	9
S8035	I		Magnetic source imaging	0.00	0.00	XXX	9	9	9	9	9
S8040	I		Topographic brain	0.00	0.00	XXX	9	9	9	9	9
S8048	I		Isolated limb perfusion	0.00	0.00	XXX	9	9	9	9	9
S8049	I		Intraoperative radiation	0.00	0.00	XXX	9	9	9	9	9
S8060	I		Supply of contrast	0.00	0.00	XXX	9	9	9	9	9
S8092	I		Electron beam computed	0.00	0.00	XXX	9	9	9	9	9
S8095	I		Wig, medical	0.00	0.00	XXX	9	9	9	9	9
S8096	I		Portable peak flow	0.00	0.00	XXX	9	9	9	9	9
S8110	I		Peak expiratory flow	0.00	0.00	XXX	9	9	9	9	9
S8200	I		Chest compression vest	0.00	0.00	XXX	9	9	9	9	9
S8205	I		Chest compression	0.00	0.00	XXX	9	9	9	9	9
S8260	I		Oral orthotic sleep apnea	0.00	0.00	XXX	9	9	9	9	9
S8300	I		Sacral nerve	0.00	0.00	XXX	9	9	9	9	9
S8950	I		Complex lymphedema	0.00	0.00	XXX	9	9	9	9	9
S9001	I		Home uterine monitor	0.00	0.00	XXX	9	9	9	9	9
S9022	I		Digital subtraction	0.00	0.00	XXX	9	9	9	9	9
S9023	I		Xenon regional cerebral	0.00	0.00	XXX	9	9	9	9	9
S9024	I		Paranasal sinus	0.00	0.00	XXX	9	9	9	9	9
S9033	I		Gait analysis	0.00	0.00	XXX	9	9	9	9	9
S9055	I		Procurin or other factor	0.00	0.00	XXX	9	9	9	9	9
S9056	I		Coma stimulation	0.00	0.00	XXX	9	9	9	9	9
S9075	I		Smoking cessation	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
S9085	I		Meniscal allograft	0.00	0.00	XXX	9	9	9	9	9
S9090	I		Vertebral axial	0.00	0.00	XXX	9	9	9	9	9
S9122	I		Home health aide	0.00	0.00	XXX	9	9	9	9	9
S9123	I		Nursing care in home	0.00	0.00	XXX	9	9	9	9	9
S9124	I		Nursing care in home	0.00	0.00	XXX	9	9	9	9	9
S9125	I		Respite care in home	0.00	0.00	XXX	9	9	9	9	9
S9126	I		Hospice care in home	0.00	0.00	XXX	9	9	9	9	9
S9127	I		Social work visit	0.00	0.00	XXX	9	9	9	9	9
S9128	I		Speech therapy	0.00	0.00	XXX	9	9	9	9	9
S9129	I		Occupational therapy	0.00	0.00	XXX	9	9	9	9	9
S9140	I		Diabetic management	0.00	0.00	XXX	9	9	9	9	9
S9141	I		Diabetic management	0.00	0.00	XXX	9	9	9	9	9
S9455	I		Diabetic management	0.00	0.00	XXX	9	9	9	9	9
S9460	I		Diabetic management	0.00	0.00	XXX	9	9	9	9	9
S9465	I		Diabetic management	0.00	0.00	XXX	9	9	9	9	9
S9470	I		Nutritional counseling	0.00	0.00	XXX	9	9	9	9	9
S9472	I		Cardiac rehabilitation	0.00	0.00	XXX	9	9	9	9	9
S9473	I		Pulmonary rehabilitation	0.00	0.00	XXX	9	9	9	9	9
S9474	I		Enterostomal therapy	0.00	0.00	XXX	9	9	9	9	9
S9475	I		Ambulatory setting	0.00	0.00	XXX	9	9	9	9	9
S9480	I		Intensive outpatient	0.00	0.00	XXX	9	9	9	9	9
S9485	I		Crisis intervention	0.00	0.00	XXX	9	9	9	9	9
S9524	I		Nursing services home IV	0.00	0.00	XXX	9	9	9	9	9
S9527	I		Insertion of catheter	0.00	0.00	XXX	9	9	9	9	9
S9528	I		Insertion of catheter	0.00	0.00	XXX	9	9	9	9	9
S9543	I		Administer medication	0.00	0.00	XXX	9	9	9	9	9
S9990	I		Services, clinical trial	0.00	0.00	XXX	9	9	9	9	9
S9991	I		Services phase III	0.00	0.00	XXX	9	9	9	9	9
S9992	I		Transportation costs	0.00	0.00	XXX	9	9	9	9	9
S9994	I		Lodging costs	0.00	0.00	XXX	9	9	9	9	9
S9996	I		Meals	0.00	0.00	XXX	9	9	9	9	9
S9999	I		Sales tax	0.00	0.00	XXX	9	9	9	9	9

L. Procedure codes V2020 to V5299 relate to miscellaneous vision and hearing services and supplies.

(All new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
V2020	X		Vision services, frames	0.00	0.00	XXX	9	9	9	9	9
V2025	N		Eyeglasses, deluxe frame	0.00	0.00	XXX	9	9	9	9	9
V2100	X		Single vision sphere	0.00	0.00	XXX	9	9	9	9	9
V2101	X		Single vision sphere	0.00	0.00	XXX	9	9	9	9	9
V2102	X		Single vision sphere	0.00	0.00	XXX	9	9	9	9	9
V2103	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2104	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2105	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2106	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2107	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2108	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2109	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2110	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2111	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2112	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2113	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2114	X		Sphero-cylinder	0.00	0.00	XXX	9	9	9	9	9
V2115	X		Lenticular lens	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
V2116	X		Nonaspheric lens	0.00	0.00	XXX	9	9	9	9	9
V2117	X		Aspheric lens	0.00	0.00	XXX	9	9	9	9	9
V2118	X		Aniseikonic lens	0.00	0.00	XXX	9	9	9	9	9
V2199	X		Single vision lens	0.00	0.00	XXX	9	9	9	9	9
V2200	X		Bifocal sphere	0.00	0.00	XXX	9	9	9	9	9
V2201	X		Bifocal sphere	0.00	0.00	XXX	9	9	9	9	9
V2202	X		Bifocal sphere	0.00	0.00	XXX	9	9	9	9	9
V2203	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2204	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2205	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2206	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2207	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2208	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2209	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2210	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2211	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2212	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2213	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2214	X		Bifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2215	X		Lenticular lens	0.00	0.00	XXX	9	9	9	9	9
V2216	X		Lenticular lens	0.00	0.00	XXX	9	9	9	9	9
V2217	X		Lenticular lens	0.00	0.00	XXX	9	9	9	9	9
V2218	X		Aniseikonic lens	0.00	0.00	XXX	9	9	9	9	9
V2219	X		Bifocal SEG lens	0.00	0.00	XXX	9	9	9	9	9
V2220	X		Bifocal add lens	0.00	0.00	XXX	9	9	9	9	9
V2299	X		Specialty bifocal lens	0.00	0.00	XXX	9	9	9	9	9
V2300	X		Sphere trifocal	0.00	0.00	XXX	9	9	9	9	9
V2301	X		Sphere trifocal	0.00	0.00	XXX	9	9	9	9	9
V2302	X		Sphere trifocal	0.00	0.00	XXX	9	9	9	9	9
V2303	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2304	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2305	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2306	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2307	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2308	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2309	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2310	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2311	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2312	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2313	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2314	X		Trifocal spherocylinder	0.00	0.00	XXX	9	9	9	9	9
V2315	X		Lenticular lens	0.00	0.00	XXX	9	9	9	9	9
V2316	X		Lenticular lens	0.00	0.00	XXX	9	9	9	9	9
V2317	X		Lenticular lens	0.00	0.00	XXX	9	9	9	9	9
V2318	X		Aniseikonic lens	0.00	0.00	XXX	9	9	9	9	9
V2319	X		Trifocal SEG lens	0.00	0.00	XXX	9	9	9	9	9
V2320	X		Trifocal add lens	0.00	0.00	XXX	9	9	9	9	9
V2399	X		Specialty trifocal lens	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
V2410	X		Variable asphericity lens	0.00	0.00	XXX	9	9	9	9	9
V2430	X		Variable asphericity lens	0.00	0.00	XXX	9	9	9	9	9
V2499	X		Variable asphericity lens	0.00	0.00	XXX	9	9	9	9	9
V2500	X		Contact lens, PMMA	0.00	0.00	XXX	9	9	9	9	9
V2501	X		Contact lens, PMMA	0.00	0.00	XXX	9	9	9	9	9
V2502	X		Contact lens, PMMA	0.00	0.00	XXX	9	9	9	9	9
V2503	X		Contact lens, PMMA	0.00	0.00	XXX	9	9	9	9	9
V2510	X		Gas permeable contact	0.00	0.00	XXX	9	9	9	9	9
V2511	X		Gas permeable contact	0.00	0.00	XXX	9	9	9	9	9
V2512	X		Gas permeable contact	0.00	0.00	XXX	9	9	9	9	9
V2513	X		Gas permeable contact	0.00	0.00	XXX	9	9	9	9	9
V2520	P		Contact lens hydrophilic	0.00	0.00	XXX	9	9	9	9	9
V2521	X		Contact lens hydrophilic	0.00	0.00	XXX	9	9	9	9	9
V2522	X		Contact lens hydrophilic	0.00	0.00	XXX	9	9	9	9	9
V2523	X		Contact lens hydrophilic	0.00	0.00	XXX	9	9	9	9	9
V2530	X		Contact lens, scleral	0.00	0.00	XXX	9	9	9	9	9
V2531	X		Contact lens, scleral	0.00	0.00	XXX	9	9	9	9	9
V2599	X		Contact lens, other type	0.00	0.00	XXX	9	9	9	9	9
V2600	X		Hand-held low vision aids	0.00	0.00	XXX	9	9	9	9	9
V2610	X		Single lens vision aids	0.00	0.00	XXX	9	9	9	9	9
V2615	X		Telescope, other compound	0.00	0.00	XXX	9	9	9	9	9
V2623	X		Prosthetic eye, plastic	0.00	0.00	XXX	9	9	9	9	9
V2624	X		Polish artificial eye	0.00	0.00	XXX	9	9	9	9	9
V2625	X		Enlarge artificial eye	0.00	0.00	XXX	9	9	9	9	9
V2626	X		Reduce artificial eye	0.00	0.00	XXX	9	9	9	9	9
V2627	X		Scleral cover shell	0.00	0.00	XXX	9	9	9	9	9
V2628	X		Fabrication and fitting	0.00	0.00	XXX	9	9	9	9	9
V2629	X		Prosthetic eye, other	0.00	0.00	XXX	9	9	9	9	9
V2630	X		Anterior chamber lens	0.00	0.00	XXX	9	9	9	9	9
V2631	X		Iris supported lens	0.00	0.00	XXX	9	9	9	9	9
V2632	X		Posterior chamber lens	0.00	0.00	XXX	9	9	9	9	9
V2700	X		Balance lens	0.00	0.00	XXX	9	9	9	9	9
V2710	X		Glass/plastic slab	0.00	0.00	XXX	9	9	9	9	9
V2715	X		Prism	0.00	0.00	XXX	9	9	9	9	9
V2718	X		Fresnell prism	0.00	0.00	XXX	9	9	9	9	9
V2730	X		Special base curve	0.00	0.00	XXX	9	9	9	9	9
V2740	X		Rose tint, plastic	0.00	0.00	XXX	9	9	9	9	9
V2741	X		Non-rose tint, plastic	0.00	0.00	XXX	9	9	9	9	9
V2742	X		Rose tint, glass	0.00	0.00	XXX	9	9	9	9	9
V2743	X		Non-rose tint, glass	0.00	0.00	XXX	9	9	9	9	9
V2744	X		Tint, photochromatic	0.00	0.00	XXX	9	9	9	9	9
V2750	X		Anti-reflective coating	0.00	0.00	XXX	9	9	9	9	9
V2755	X		UV lens	0.00	0.00	XXX	9	9	9	9	9
V2760	X		Scratch resistant coating	0.00	0.00	XXX	9	9	9	9	9
V2770	X		Occluder lens	0.00	0.00	XXX	9	9	9	9	9
V2780	X		Oversize lens	0.00	0.00	XXX	9	9	9	9	9
V2781	X		Progressive lens	0.00	0.00	XXX	9	9	9	9	9
V2785	X		Corneal tissue	0.00	0.00	XXX	9	9	9	9	9
V2799	X		Miscellaneous vision	0.00	0.00	XXX	9	9	9	9	9
V5008	N		Hearing screening	0.00	0.00	XXX	9	9	9	9	9
V5010	N		Assess for hearing aid	0.00	0.00	XXX	9	9	9	9	9
V5011	N		Hearing aid fitting	0.00	0.00	XXX	9	9	9	9	9
V5014	N		Hearing aid repair	0.00	0.00	XXX	9	9	9	9	9
V5020	N		Conformity evaluation	0.00	0.00	XXX	9	9	9	9	9
V5030	N		Body-worn hearing aid	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
V5040	N		Body-worn hearing aid	0.00	0.00	XXX	9	9	9	9	9
V5050	N		Hearing aid in ear	0.00	0.00	XXX	9	9	9	9	9
V5060	N		Hearing aid behind ear	0.00	0.00	XXX	9	9	9	9	9
V5070	N		Glasses, air conduction	0.00	0.00	XXX	9	9	9	9	9
V5080	N		Glasses, bone conduction	0.00	0.00	XXX	9	9	9	9	9
V5090	N		Hearing aid fee	0.00	0.00	XXX	9	9	9	9	9
V5100	N		Body-worn bilateral	0.00	0.00	XXX	9	9	9	9	9
V5110	N		Bilateral dispensing fee	0.00	0.00	XXX	9	9	9	9	9
V5120	N		Body-worn binaural	0.00	0.00	XXX	9	9	9	9	9
V5130	N		In ear binaural	0.00	0.00	XXX	9	9	9	9	9
V5140	N		Behind ear binaural	0.00	0.00	XXX	9	9	9	9	9
V5150	N		Glasses binaural	0.00	0.00	XXX	9	9	9	9	9
V5160	N		Binaural dispensing fee	0.00	0.00	XXX	9	9	9	9	9
V5170	N		In ear cros	0.00	0.00	XXX	9	9	9	9	9
V5180	N		Behind ear cros	0.00	0.00	XXX	9	9	9	9	9
V5190	N		Glasses cros	0.00	0.00	XXX	9	9	9	9	9
V5200	N		Cros dispensing fee	0.00	0.00	XXX	9	9	9	9	9
V5210	N		In ear bicros	0.00	0.00	XXX	9	9	9	9	9
V5220	N		Behind ear bicros	0.00	0.00	XXX	9	9	9	9	9
V5230	N		Glasses bicros	0.00	0.00	XXX	9	9	9	9	9
V5240	N		Bicros dispensing fee	0.00	0.00	XXX	9	9	9	9	9
V5299	R		Hearing service	0.00	0.00	XXX	0	0	0	0	0

5221.4032 PROFESSIONAL/TECHNICAL COMPONENTS FOR MEDICAL/SURGICAL SERVICES.

Subpart 1. **General.** Fees for certain services which are a combination of professional and technical care shall be adjusted when the professional and technical components of the service are performed by different individuals or entities. The professional component of the service represents the care rendered by the health care provider, such as examination of the patient, performance and supervision of the procedure, and consultation with other providers. The technical component of the service represents all other costs associated with the service, such as the cost of equipment, the salary of technicians, and supplies normally used in delivering the service. Services subject to this distinction are identified in part 5221.4030, subpart ~~2a~~ 2b, by modifiers appearing in column ~~3~~ 2 alongside the service codes. Modifier TC indicates relative RVUs for the technical component of the service and modifier 26 indicates RVUs for the professional component of the service. The maximum fee for either component of the service is calculated using the RVUs for the component provided and the formula in part 5221.4020.

[For text of subp 2, see M.R.]

Subp. 3. **One billing for both components.** If the same health care provider renders both the professional and technical components of the service, the maximum fee is calculated for the complete service by using the RVUs corresponding to the service code listed without a modifier in part 5221.4030, subpart ~~2a~~ 2b, and the formula in part 5221.4020.

5221.4033 OUTPATIENT LIMITATION FOR MEDICAL/SURGICAL SERVICES FACILITY FEE.

Subpart 1. **Limitation No facility fee.** Procedures whose codes are listed ~~below~~ in subpart ~~2b~~ are predominantly performed in office settings and, therefore, no additional facility fees are payable when the procedure is performed by the employee's treating health care provider, unless it is an emergency or medically necessary to perform the procedure in a nonoffice setting or after normal office hours. This part does not preclude payment of a facility fee where the employee is treated by emergency room or urgent care staff.

Subp. 1a. Payment of facility fee. Except where the facility fee is precluded from payment in subpart 1, fees for ambulatory surgical center and hospital outpatient surgical center are paid in accordance with part 5221.0500, subpart 2.

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Proposed Rules

A. Services and supplies included in facility fee. The services in subitems (1) to (8) are included in the facility fee. There may be no separate payment for these services and supplies:

(1) nursing, technician, and related services;

(2) use of the facilities where the surgical procedures are performed;

(3) drugs, biologicals, surgical dressings, supplies, splints, casts, appliances, and equipment directly related to the provision of surgical procedures;

(4) diagnostic or therapeutic services or items directly related to the provision of a surgical procedure;

(5) administrative, recordkeeping, and housekeeping items and services;

(6) materials for anesthesia;

(7) intraocular lenses (IOLs); and

(8) supervision of the services of an anesthetist by the operating surgeon.

B. Services and supplies in subitems (1) to (7) are paid separately from the facility fee:

(1) physician services;

(2) laboratory, X-ray, or diagnostic procedures, other than those directly related to performance of the surgical procedure;

(3) prosthetic devices, except IOLs;

(4) ambulance services;

(5) leg, arm, back, and neck braces and artificial limbs; and

(6) durable medical equipment for use in the patient's home or take-home supplies; and

(7) anesthetist services.

Subp. 2a. [See repealer.]

Subp. 2b. **Procedure codes subject to limitation.**

CPT/HCPCS

Procedure

Code

CPT/HCPCS Description

<u>10040</u>	<u>Acne surgery</u>
<u>10060</u>	<u>Drainage of skin abscess</u>
<u>10061</u>	<u>Drainage of skin abscess</u>
<u>10080</u>	<u>Drainage of pilonidal cyst</u>
<u>10081</u>	<u>Drainage of pilonidal cyst</u>
<u>10120</u>	<u>Remove foreign body</u>
<u>10121</u>	<u>Remove foreign body</u>
<u>10140</u>	<u>Drainage of hematoma/fluid</u>
<u>10160</u>	<u>Puncture drainage of lesion</u>
<u>11000</u>	<u>Surgical cleansing of skin</u>
<u>11001</u>	<u>Additional cleansing of skin</u>
<u>11040</u>	<u>Surgical cleansing, abrasion</u>
<u>11041</u>	<u>Surgical cleansing of skin</u>
<u>11050</u>	<u>Trim skin lesion</u>
<u>11051</u>	<u>Trim 2 to 4 skin lesions</u>
<u>11052</u>	<u>Trim over 4 skin lesions</u>
<u>11100</u>	<u>Biopsy of skin lesion</u>
<u>11101</u>	<u>Biopsy, each added lesion</u>
<u>11200</u>	<u>Removal of skin tags</u>
<u>11201</u>	<u>Removal of added skin tags</u>
<u>11300</u>	<u>Shave skin lesion</u>
<u>11301</u>	<u>Shave skin lesion</u>
<u>11302</u>	<u>Shave skin lesion</u>
<u>11303</u>	<u>Shave skin lesion</u>

<u>11305</u>	<u>Shave skin lesion</u>
<u>11306</u>	<u>Shave skin lesion</u>
<u>11307</u>	<u>Shave skin lesion</u>
<u>11308</u>	<u>Shave skin lesion</u>
<u>11310</u>	<u>Shave skin lesion</u>
<u>11311</u>	<u>Shave skin lesion</u>
<u>11312</u>	<u>Shave skin lesion</u>
<u>11313</u>	<u>Shave skin lesion</u>
<u>11400</u>	<u>Removal of skin lesion</u>
<u>11401</u>	<u>Removal of skin lesion</u>
<u>11402</u>	<u>Removal of skin lesion</u>
<u>11403</u>	<u>Removal of skin lesion</u>
<u>11420</u>	<u>Removal of skin lesion</u>
<u>11421</u>	<u>Removal of skin lesion</u>
<u>11422</u>	<u>Removal of skin lesion</u>
<u>11423</u>	<u>Removal of skin lesion</u>
<u>11440</u>	<u>Removal of skin lesion</u>
<u>11441</u>	<u>Removal of skin lesion</u>
<u>11442</u>	<u>Removal of skin lesion</u>
<u>11443</u>	<u>Removal of skin lesion</u>
<u>11600</u>	<u>Removal of skin lesion</u>
<u>11601</u>	<u>Removal of skin lesion</u>
<u>11602</u>	<u>Removal of skin lesion</u>
<u>11603</u>	<u>Removal of skin lesion</u>
<u>11620</u>	<u>Removal of skin lesion</u>
<u>11621</u>	<u>Removal of skin lesion</u>
<u>11622</u>	<u>Removal of skin lesion</u>
<u>11623</u>	<u>Removal of skin lesion</u>
<u>11640</u>	<u>Removal of skin lesion</u>
<u>11641</u>	<u>Removal of skin lesion</u>
<u>11642</u>	<u>Removal of skin lesion</u>
<u>11643</u>	<u>Removal of skin lesion</u>
<u>11730</u>	<u>Removal of nail plate</u>
<u>11731</u>	<u>Removal of second nail plate</u>
<u>11732</u>	<u>Remove additional nail plate</u>
<u>11740</u>	<u>Drain blood from under nail</u>
<u>11750</u>	<u>Removal of nail bed</u>
<u>11752</u>	<u>Remove nail bed/finger tip</u>
<u>11760</u>	<u>Reconstruction of nail bed</u>
<u>11762</u>	<u>Reconstruction of nail bed</u>
<u>11765</u>	<u>Excision of nail fold, toe</u>
<u>11900</u>	<u>Injection into skin lesions</u>
<u>11901</u>	<u>Added skin lesion injections</u>
<u>12031</u>	<u>Layer closure of wound(s)</u>
<u>12032</u>	<u>Layer closure of wound(s)</u>
<u>12041</u>	<u>Layer closure of wound(s)</u>
<u>12042</u>	<u>Layer closure of wound(s)</u>
<u>12051</u>	<u>Layer closure of wound(s)</u>
<u>12052</u>	<u>Layer closure of wound(s)</u>
<u>15780</u>	<u>Abrasion treatment of skin</u>
<u>15781</u>	<u>Abrasion treatment of skin</u>

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Proposed Rules

<u>15782</u>	<u>Abrasion treatment of skin</u>
<u>15783</u>	<u>Abrasion treatment of skin</u>
<u>15786</u>	<u>Abrasion treatment of lesion</u>
<u>15787</u>	<u>Abrasion, added skin lesions</u>
<u>15851</u>	<u>Removal of sutures</u>
<u>15852</u>	<u>Dressing change, not for burn</u>
<u>16000</u>	<u>Initial treatment of burn(s)</u>
<u>16010</u>	<u>Treatment of burn(s)</u>
<u>16020</u>	<u>Treatment of burn(s)</u>
<u>16025</u>	<u>Treatment of burn(s)</u>
<u>17000</u>	<u>Destroy benign/premal lesion</u>
<u>17001</u>	<u>Destruction of additional lesions</u>
<u>17002</u>	<u>Destruction of additional lesions</u>
<u>17010</u>	<u>Destruction of skin lesion(s)</u>
<u>17100</u>	<u>Destruction of skin lesion</u>
<u>17101</u>	<u>Destruction of second lesion</u>
<u>17102</u>	<u>Destruction of additional lesions</u>
<u>17104</u>	<u>Destruction of skin lesions</u>
<u>17105</u>	<u>Destruction of skin lesions</u>
<u>17106</u>	<u>Destruction of skin lesions</u>
<u>17107</u>	<u>Destruction of skin lesions</u>
<u>17110</u>	<u>Destruction of skin lesions</u>
<u>17200</u>	<u>Electrocautery of skin tags</u>
<u>17201</u>	<u>Electrocautery added lesions</u>
<u>17250</u>	<u>Chemical cautery, tissue</u>
<u>17260</u>	<u>Destruction of skin lesions</u>
<u>17261</u>	<u>Destruction of skin lesions</u>
<u>17262</u>	<u>Destruction of skin lesions</u>
<u>17263</u>	<u>Destruction of skin lesions</u>
<u>17264</u>	<u>Destruction of skin lesions</u>
<u>17266</u>	<u>Destruction of skin lesions</u>
<u>17270</u>	<u>Destruction of skin lesions</u>
<u>17271</u>	<u>Destruction of skin lesions</u>
<u>17272</u>	<u>Destruction of skin lesions</u>
<u>17273</u>	<u>Destruction of skin lesions</u>
<u>17274</u>	<u>Destruction of skin lesions</u>
<u>17276</u>	<u>Destruction of skin lesions</u>
<u>17280</u>	<u>Destruction of skin lesions</u>
<u>17281</u>	<u>Destruction of skin lesions</u>
<u>17282</u>	<u>Destruction of skin lesions</u>
<u>17283</u>	<u>Destruction of skin lesions</u>
<u>17284</u>	<u>Destruction of skin lesions</u>
<u>17286</u>	<u>Destruction of skin lesions</u>
<u>17304</u>	<u>Chemosurgery of skin lesion</u>
<u>17305</u>	<u>Second stage chemosurgery</u>
<u>17306</u>	<u>Third stage chemosurgery</u>
<u>17307</u>	<u>Follow-up skin lesion therapy</u>
<u>17310</u>	<u>Extensive skin chemosurgery</u>
<u>17340</u>	<u>Cryotherapy of skin</u>
<u>17360</u>	<u>Skin peel therapy</u>
<u>19000</u>	<u>Drainage of breast lesion</u>
<u>19001</u>	<u>Drain added breast lesion</u>
<u>20000</u>	<u>Incision of abscess</u>
<u>20500</u>	<u>Injection of sinus tract</u>
<u>20520</u>	<u>Removal of foreign body</u>
<u>20550</u>	<u>Inject tendon/ligament/cyst</u>
<u>20600</u>	<u>Drain/inject joint/bursa</u>

<u>20605</u>	<u>Drain/inject joint/bursa</u>
<u>20610</u>	<u>Drain/inject joint/bursa</u>
<u>20615</u>	<u>Treatment of bone cyst</u>
<u>20974</u>	<u>Electrical bone stimulation</u>
<u>21029</u>	<u>Contour of face bone lesion</u>
<u>21030</u>	<u>Removal of face bone lesion</u>
<u>21031</u>	<u>Remove exostosis, mandible</u>
<u>21032</u>	<u>Remove exostosis, maxilla</u>
<u>21079</u>	<u>Prepare face/oral prosthesis</u>
<u>21080</u>	<u>Prepare face/oral prosthesis</u>
<u>21081</u>	<u>Prepare face/oral prosthesis</u>
<u>21082</u>	<u>Prepare face/oral prosthesis</u>
<u>21083</u>	<u>Prepare face/oral prosthesis</u>
<u>21084</u>	<u>Prepare face/oral prosthesis</u>
<u>21085</u>	<u>Prepare face/oral prosthesis</u>
<u>21086</u>	<u>Prepare face/oral prosthesis</u>
<u>21087</u>	<u>Prepare face/oral prosthesis</u>
<u>21088</u>	<u>Prepare face/oral prosthesis</u>
<u>21089</u>	<u>Prepare face/oral prosthesis</u>
<u>21110</u>	<u>Interdental fixation</u>
<u>23031</u>	<u>Drain shoulder bursa</u>
<u>24200</u>	<u>Removal of arm foreign body</u>
<u>24650</u>	<u>Treat radius fracture</u>
<u>25500</u>	<u>Treat fracture of radius</u>
<u>25530</u>	<u>Treat fracture of ulna</u>
<u>25600</u>	<u>Treat fracture radius/ulna</u>
<u>25622</u>	<u>Treat wrist bone fracture</u>
<u>25630</u>	<u>Treat wrist bone fracture</u>
<u>25650</u>	<u>Repair wrist bone fracture</u>
<u>26010</u>	<u>Drainage of finger abscess</u>
<u>26600</u>	<u>Treat metacarpal fracture</u>
<u>26720</u>	<u>Treat finger fracture, each</u>
<u>26725</u>	<u>Treat finger fracture, each</u>
<u>26740</u>	<u>Treat finger fracture, each</u>
<u>28001</u>	<u>Drainage of bursa of foot</u>
<u>28010</u>	<u>Incision of toe tendon</u>
<u>28011</u>	<u>Incision of toe tendons</u>
<u>28022</u>	<u>Exploration of a foot joint</u>
<u>28024</u>	<u>Exploration of a toe joint</u>
<u>28052</u>	<u>Biopsy of foot joint lining</u>
<u>28108</u>	<u>Removal of toe lesions</u>
<u>28124</u>	<u>Partial removal of toe</u>
<u>28126</u>	<u>Partial removal of toe</u>
<u>28153</u>	<u>Partial removal of toe</u>
<u>28160</u>	<u>Partial removal of toe</u>
<u>28190</u>	<u>Removal of foot foreign body</u>
<u>28220</u>	<u>Release of foot tendon</u>
<u>28230</u>	<u>Incision of foot tendon(s)</u>
<u>28232</u>	<u>Incision of toe tendon</u>
<u>28234</u>	<u>Incision of foot tendon</u>
<u>28270</u>	<u>Release of foot contracture</u>

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Proposed Rules

<u>28272</u>	<u>Release of toe joint, each</u>
<u>28430</u>	<u>Treatment of ankle fracture</u>
<u>28450</u>	<u>Treat midfoot fracture, each</u>
<u>28455</u>	<u>Treat midfoot fracture, each</u>
<u>28470</u>	<u>Treat metatarsal fracture</u>
<u>28475</u>	<u>Treat metatarsal fracture</u>
<u>28490</u>	<u>Treat big toe fracture</u>
<u>28495</u>	<u>Treat big toe fracture</u>
<u>28510</u>	<u>Treatment of toe fracture</u>
<u>28515</u>	<u>Treatment of toe fracture</u>
<u>28530</u>	<u>Treat sesamoid bone fracture</u>
<u>28540</u>	<u>Treat foot dislocation</u>
<u>28570</u>	<u>Treat foot dislocation</u>
<u>28600</u>	<u>Treat foot dislocation</u>
<u>28630</u>	<u>Treat toe dislocation</u>
<u>29015</u>	<u>Application of body cast</u>
<u>29020</u>	<u>Application of body cast</u>
<u>29025</u>	<u>Application of body cast</u>
<u>29035</u>	<u>Application of body cast</u>
<u>29049</u>	<u>Application of shoulder cast</u>
<u>29065</u>	<u>Application of long arm cast</u>
<u>29075</u>	<u>Application of forearm cast</u>
<u>29085</u>	<u>Apply hand/wrist cast</u>
<u>29105</u>	<u>Apply long arm splint</u>
<u>29125</u>	<u>Apply forearm splint</u>
<u>29126</u>	<u>Apply forearm splint</u>
<u>29130</u>	<u>Application of finger splint</u>
<u>29131</u>	<u>Application of finger splint</u>
<u>29200</u>	<u>Strapping of chest</u>
<u>29220</u>	<u>Strapping of low back</u>
<u>29260</u>	<u>Strapping of elbow or wrist</u>
<u>29280</u>	<u>Strapping of hand or finger</u>
<u>29345</u>	<u>Application of long leg cast</u>
<u>29355</u>	<u>Application of long leg cast</u>
<u>29358</u>	<u>Apply long leg cast brace</u>
<u>29365</u>	<u>Application of long leg cast</u>
<u>29405</u>	<u>Apply short leg cast</u>
<u>29425</u>	<u>Apply short leg cast</u>
<u>29435</u>	<u>Apply short leg cast</u>
<u>29440</u>	<u>Addition of walker to cast</u>
<u>29450</u>	<u>Application of leg cast</u>
<u>29515</u>	<u>Application lower leg splint</u>
<u>29520</u>	<u>Strapping of hip</u>
<u>29530</u>	<u>Strapping of knee</u>
<u>29540</u>	<u>Strapping of ankle</u>
<u>29550</u>	<u>Strapping of toes</u>
<u>29580</u>	<u>Application of paste boot</u>
<u>29590</u>	<u>Application of foot splint</u>
<u>29700</u>	<u>Removal/revision of cast</u>
<u>29705</u>	<u>Removal/revision of cast</u>
<u>29710</u>	<u>Removal/revision of cast</u>
<u>29715</u>	<u>Removal/revision of cast</u>
<u>29720</u>	<u>Repair of body cast</u>
<u>29730</u>	<u>Windowing of cast</u>
<u>29740</u>	<u>Wedging of cast</u>
<u>29750</u>	<u>Wedging of clubfoot cast</u>
<u>29850</u>	<u>Knee arthroscopy/surgery</u>

<u>30000</u>	<u>Drainage of nose lesion</u>
<u>30020</u>	<u>Drainage of nose lesion</u>
<u>30100</u>	<u>Intranasal biopsy</u>
<u>30110</u>	<u>Removal of nose polyp(s)</u>
<u>30200</u>	<u>Injection treatment of nose</u>
<u>30210</u>	<u>Nasal sinus therapy</u>
<u>30220</u>	<u>Insert nasal septal button</u>
<u>30300</u>	<u>Remove nasal foreign body</u>
<u>30901</u>	<u>Control of nosebleed</u>
<u>31000</u>	<u>Irrigation maxillary sinus</u>
<u>31002</u>	<u>Irrigation sphenoid sinus</u>
<u>31505</u>	<u>Diagnostic laryngoscopy</u>
<u>31575</u>	<u>Diagnostic laryngoscopy</u>
<u>31579</u>	<u>Diagnostic laryngoscopy</u>
<u>36000</u>	<u>Place needle in vein</u>
<u>36400</u>	<u>Drawing blood</u>
<u>36405</u>	<u>Drawing blood</u>
<u>36406</u>	<u>Drawing blood</u>
<u>36410</u>	<u>Drawing blood</u>
<u>36430</u>	<u>Blood transfusion service</u>
<u>36450</u>	<u>Exchange transfusion service</u>
<u>36470</u>	<u>Injection therapy of vein</u>
<u>36471</u>	<u>Injection therapy of veins</u>
<u>36510</u>	<u>Insertion of catheter, vein</u>
<u>40490</u>	<u>Biopsy of lip</u>
<u>40800</u>	<u>Drainage of mouth lesion</u>
<u>40804</u>	<u>Removal foreign body, mouth</u>
<u>40808</u>	<u>Biopsy of mouth lesion</u>
<u>40810</u>	<u>Excision of mouth lesion</u>
<u>40812</u>	<u>Excise/repair mouth lesion</u>
<u>41100</u>	<u>Biopsy of tongue</u>
<u>41108</u>	<u>Biopsy of floor of mouth</u>
<u>41825</u>	<u>Excision of gum lesion</u>
<u>41826</u>	<u>Excision of gum lesion</u>
<u>42100</u>	<u>Biopsy roof of mouth</u>
<u>42330</u>	<u>Removal of salivary stone</u>
<u>42400</u>	<u>Biopsy of salivary gland</u>
<u>42650</u>	<u>Dilation of salivary duct</u>
<u>42660</u>	<u>Dilation of salivary duct</u>
<u>42800</u>	<u>Biopsy of throat</u>
<u>45300</u>	<u>Proctosigmoidoscopy</u>
<u>45303</u>	<u>Proctosigmoidoscopy</u>
<u>45330</u>	<u>Sigmoidoscopy, diagnostic</u>
<u>45520</u>	<u>Treatment of rectal prolapse</u>
<u>46083</u>	<u>Incise external hemorrhoid</u>
<u>46221</u>	<u>Ligation of hemorrhoid(s)</u>
<u>46230</u>	<u>Removal of anal tabs</u>
<u>46320</u>	<u>Removal of hemorrhoid clot</u>
<u>46500</u>	<u>Injection into hemorrhoids</u>
<u>46600</u>	<u>Diagnostic anoscopy</u>
<u>46604</u>	<u>Anoscopy and dilation</u>

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Proposed Rules

<u>46606</u>	<u>Anoscopy and biopsy</u>
<u>46614</u>	<u>Anoscopy, control bleeding</u>
<u>46615</u>	<u>Anoscopy</u>
<u>46900</u>	<u>Destruction, anal lesion(s)</u>
<u>46910</u>	<u>Destruction, anal lesion(s)</u>
<u>46916</u>	<u>Cryosurgery, anal lesion(s)</u>
<u>46917</u>	<u>Laser surgery, anal lesion(s)</u>
<u>46934</u>	<u>Destruction of hemorrhoids</u>
<u>46935</u>	<u>Destruction of hemorrhoids</u>
<u>46936</u>	<u>Destruction of hemorrhoids</u>
<u>46940</u>	<u>Treatment of anal fissure</u>
<u>46942</u>	<u>Treatment of anal fissure</u>
<u>46945</u>	<u>Ligation of hemorrhoids</u>
<u>46946</u>	<u>Ligation of hemorrhoids</u>
<u>51700</u>	<u>Irrigation of bladder</u>
<u>51705</u>	<u>Change of bladder tube</u>
<u>51720</u>	<u>Treatment of bladder lesion</u>
<u>52265</u>	<u>Cystoscopy and treatment</u>
<u>53270</u>	<u>Removal of urethra gland</u>
<u>53600</u>	<u>Dilate urethra stricture</u>
<u>53601</u>	<u>Dilate urethra stricture</u>
<u>53620</u>	<u>Dilate urethra stricture</u>
<u>53621</u>	<u>Dilate urethra stricture</u>
<u>53660</u>	<u>Dilation of urethra</u>
<u>53661</u>	<u>Dilation of urethra</u>
<u>53670</u>	<u>Insert urinary catheter</u>
<u>54050</u>	<u>Destruction, penis lesion(s)</u>
<u>54055</u>	<u>Destruction, penis lesion(s)</u>
<u>54056</u>	<u>Cryosurgery, penis lesion(s)</u>
<u>54200</u>	<u>Treatment of penis lesion</u>
<u>54230</u>	<u>Prepare penis study</u>
<u>54235</u>	<u>Penile injection</u>
<u>55000</u>	<u>Drainage of hydrocele</u>
<u>55250</u>	<u>Removal of sperm duct(s)</u>
<u>56420</u>	<u>Drainage of gland abscess</u>
<u>56501</u>	<u>Destruction, vulva lesion(s)</u>
<u>56606</u>	<u>Biopsy of vulva/perineum</u>
<u>57061</u>	<u>Destruction, vagina lesion(s)</u>
<u>57100</u>	<u>Biopsy of vagina</u>
<u>57150</u>	<u>Treat vagina infection</u>
<u>57160</u>	<u>Insertion of pessary</u>
<u>57170</u>	<u>Fitting of diaphragm/cap</u>
<u>57452</u>	<u>Examination of vagina</u>
<u>57454</u>	<u>Vagina examination and biopsy</u>
<u>57460</u>	<u>LEEP procedure</u>
<u>57500</u>	<u>Biopsy of cervix</u>
<u>57505</u>	<u>Endocervical curettage</u>
<u>57510</u>	<u>Cauterization of cervix</u>
<u>57511</u>	<u>Cryocautery of cervix</u>
<u>58100</u>	<u>Biopsy of uterus lining</u>
<u>58301</u>	<u>Remove intrauterine device</u>
<u>59200</u>	<u>Insert cervical dilator</u>
<u>59300</u>	<u>Episiotomy or vaginal repair</u>
<u>59425</u>	<u>Antepartum care only</u>
<u>59426</u>	<u>Antepartum care only</u>
<u>59430</u>	<u>Care after delivery</u>
<u>60100</u>	<u>Biopsy of thyroid</u>

61001	<u>Remove cranial cavity fluid</u>
63690	<u>Analysis of neuroreceiver</u>
63691	<u>Analysis of neuroreceiver</u>
64400	<u>Injection for nerve block</u>
64405	<u>Injection for nerve block</u>
64408	<u>Injection for nerve block</u>
64412	<u>Injection for nerve block</u>
64413	<u>Injection for nerve block</u>
64418	<u>Injection for nerve block</u>
64435	<u>Injection for nerve block</u>
64440	<u>Injection for nerve block</u>
64441	<u>Injection for nerve block</u>
64445	<u>Injection for nerve block</u>
64450	<u>Injection for nerve block</u>
64505	<u>Injection for nerve block</u>
64508	<u>Injection for nerve block</u>
64550	<u>Apply neurostimulator</u>
64553	<u>Implant neuroelectrodes</u>
64555	<u>Implant neuroelectrodes</u>
64560	<u>Implant neuroelectrodes</u>
64565	<u>Implant neuroelectrodes</u>
64612	<u>Destroy nerve, face muscle</u>
64613	<u>Destroy nerve, spine muscle</u>
65205	<u>Remove foreign body from eye</u>
65210	<u>Remove foreign body from eye</u>
65220	<u>Remove foreign body from eye</u>
65222	<u>Remove foreign body from eye</u>
65286	<u>Repair of eye wound</u>
65430	<u>Corneal smear</u>
65435	<u>Curette/treat cornea</u>
65436	<u>Curette/treat cornea</u>
65600	<u>Revision of cornea</u>
65772	<u>Correction of astigmatism</u>
65855	<u>Laser surgery of eye</u>
65860	<u>Incise inner eye adhesions</u>
66761	<u>Revision of iris</u>
66770	<u>Removal of inner eye lesion</u>
67145	<u>Treatment of retina</u>
67210	<u>Treatment of retinal lesion</u>
67228	<u>Treatment of retinal lesion</u>
67345	<u>Destroy nerve of eye muscle</u>
67505	<u>Inject/treat eye socket</u>
67515	<u>Inject/treat eye socket</u>
67700	<u>Drainage of eyelid abscess</u>
67710	<u>Incision of eyelid</u>
67800	<u>Remove eyelid lesion</u>
67801	<u>Remove eyelid lesions</u>
67805	<u>Remove eyelid lesions</u>
67810	<u>Biopsy of eyelid</u>
67820	<u>Revise eyelashes</u>
67825	<u>Revise eyelashes</u>

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Proposed Rules

<u>67840</u>	<u>Remove eyelid lesion</u>
<u>67850</u>	<u>Treat eyelid lesion</u>
<u>67915</u>	<u>Repair eyelid defect</u>
<u>67922</u>	<u>Repair eyelid defect</u>
<u>67930</u>	<u>Repair eyelid wound</u>
<u>67938</u>	<u>Remove eyelid foreign body</u>
<u>68020</u>	<u>Incise/drain eyelid lining</u>
<u>68040</u>	<u>Treatment of eyelid lesions</u>
<u>68100</u>	<u>Biopsy of eyelid lining</u>
<u>68110</u>	<u>Remove eyelid lining lesion</u>
<u>68135</u>	<u>Remove eyelid lining lesion</u>
<u>68200</u>	<u>Treat eyelid by injection</u>
<u>68400</u>	<u>Incise/drain tear gland</u>
<u>68420</u>	<u>Incise/drain tear sac</u>
<u>68440</u>	<u>Incise tear duct opening</u>
<u>68530</u>	<u>Clearance of tear duct</u>
<u>68705</u>	<u>Revise tear duct opening</u>
<u>68760</u>	<u>Close tear duct opening</u>
<u>68761</u>	<u>Close tear duct opening</u>
<u>68770</u>	<u>Close tear system fistula</u>
<u>68840</u>	<u>Explore/irrigate tear ducts</u>
<u>69000</u>	<u>Drain external ear lesion</u>
<u>69005</u>	<u>Drain external ear lesion</u>
<u>69020</u>	<u>Drain outer ear canal lesion</u>
<u>69100</u>	<u>Biopsy of external ear</u>
<u>69105</u>	<u>Biopsy of external ear canal</u>
<u>69200</u>	<u>Clear outer ear canal</u>
<u>69210</u>	<u>Remove impacted ear wax</u>
<u>69220</u>	<u>Clean out mastoid cavity</u>
<u>69222</u>	<u>Clean out mastoid cavity</u>
<u>69400</u>	<u>Inflate middle ear canal</u>
<u>69401</u>	<u>Inflate middle ear canal</u>
<u>69405</u>	<u>Catheterize middle ear canal</u>
<u>69410</u>	<u>Inset middle ear baffle</u>
<u>69420</u>	<u>Incision of eardrum</u>
<u>69433</u>	<u>Create eardrum opening</u>
<u>69540</u>	<u>Remove ear lesion</u>
<u>69610</u>	<u>Repair of eardrum</u>
<u>92002</u>	<u>Eye exam, new patient</u>
<u>92004</u>	<u>Eye exam, new patient</u>
<u>92012</u>	<u>Eye exam, established patient</u>
<u>92014</u>	<u>Eye exam and treatment</u>
<u>92019</u>	<u>Eye exam and treatment</u>
<u>92020</u>	<u>Special eye evaluation</u>
<u>92070</u>	<u>Fitting of contact lens</u>
<u>92100</u>	<u>Serial tonometry exam(s)</u>
<u>92120</u>	<u>Tonography and eye evaluation</u>
<u>92130</u>	<u>Water provocation tonography</u>
<u>92140</u>	<u>Glaucoma provocative tests</u>
<u>92225</u>	<u>Special eye exam, initial</u>
<u>92226</u>	<u>Special eye exam, subsequent</u>
<u>92230</u>	<u>Eye exam with photos</u>
<u>92260</u>	<u>Ophthalmoscopy/dynamometry</u>
<u>92287</u>	<u>Internal eye photography</u>
<u>92311</u>	<u>Contact lens fitting</u>
<u>92312</u>	<u>Contact lens fitting</u>
<u>92313</u>	<u>Contact lens fitting</u>

<u>92315</u>	<u>Prescription of contact lens</u>
<u>92316</u>	<u>Prescription of contact lens</u>
<u>92317</u>	<u>Prescription of contact lens</u>
<u>92330</u>	<u>Fitting of artificial eye</u>
<u>92335</u>	<u>Fitting of artificial eye</u>
<u>92352</u>	<u>Special spectacles fitting</u>
<u>92353</u>	<u>Special spectacles fitting</u>
<u>92354</u>	<u>Special spectacles fitting</u>
<u>92371</u>	<u>Repair and adjust spectacles</u>
<u>92504</u>	<u>Ear microscopy examination</u>
<u>92506</u>	<u>Speech and hearing evaluation</u>
<u>92507</u>	<u>Speech/hearing therapy</u>
<u>92508</u>	<u>Speech/hearing therapy</u>
<u>92511</u>	<u>Nasopharyngoscopy</u>
<u>92512</u>	<u>Nasal function studies</u>
<u>92516</u>	<u>Facial nerve function test</u>
<u>92520</u>	<u>Laryngeal function studies</u>
<u>92565</u>	<u>Stenger test, pure tone</u>
<u>92571</u>	<u>Filtered speech hearing test</u>
<u>92575</u>	<u>Sensorineural acuity test</u>
<u>92576</u>	<u>Synthetic sentence test</u>
<u>92577</u>	<u>Stenger test, speech</u>
<u>92582</u>	<u>Conditioning play audiometry</u>
<u>93721</u>	<u>Plethysmography tracing</u>
<u>93797</u>	<u>Cardiac rehab</u>
<u>93798</u>	<u>Cardiac rehab/monitor</u>
<u>95010</u>	<u>Sensitivity skin tests</u>
<u>95015</u>	<u>Sensitivity skin tests</u>
<u>95056</u>	<u>Photosensitivity tests</u>
<u>95065</u>	<u>Nose allergy test</u>
<u>95075</u>	<u>Ingestion challenge test</u>
<u>95144</u>	<u>Antigen therapy services</u>
<u>95145</u>	<u>Antigen therapy services</u>
<u>95146</u>	<u>Antigen therapy services</u>
<u>95147</u>	<u>Antigen therapy services</u>
<u>95148</u>	<u>Antigen therapy services</u>
<u>95149</u>	<u>Antigen therapy services</u>
<u>95165</u>	<u>Antigen therapy services</u>
<u>95170</u>	<u>Antigen therapy services</u>
<u>95180</u>	<u>Rapid desensitization</u>
<u>95831</u>	<u>Limb muscle testing, manual</u>
<u>95832</u>	<u>Hand muscle testing, manual</u>
<u>95833</u>	<u>Body muscle testing, manual</u>
<u>95834</u>	<u>Body muscle testing, manual</u>
<u>95851</u>	<u>Range of motion measurements</u>
<u>95852</u>	<u>Range of motion measurements</u>
<u>95857</u>	<u>Tensilon test</u>
<u>96405</u>	<u>Intralesional chemotherapy administration</u>
<u>96406</u>	<u>Intralesional chemotherapy administration</u>
<u>96445</u>	<u>Chemotherapy, intracavitary</u>
<u>96450</u>	<u>Chemotherapy, into central nervous system</u>

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Proposed Rules

<u>96542</u>	<u>Chemotherapy injection</u>
<u>98940</u>	<u>Chiropractor manip of spine</u>
<u>98941</u>	<u>Chiropractor manip of spine</u>
<u>98942</u>	<u>Chiropractor manip of spine</u>
<u>98943</u>	<u>Chiropractor manip extra spinal</u>
<u>99201</u>	<u>Office/outpatient visit, new</u>
<u>99202</u>	<u>Office/outpatient visit, new</u>
<u>99203</u>	<u>Office/outpatient visit, new</u>
<u>99204</u>	<u>Office/outpatient visit, new</u>
<u>99205</u>	<u>Office/outpatient visit, new</u>
<u>99211</u>	<u>Office/outpatient visit, established</u>
<u>99212</u>	<u>Office/outpatient visit, established</u>
<u>99213</u>	<u>Office/outpatient visit, established</u>
<u>99214</u>	<u>Office/outpatient visit, established</u>
<u>99215</u>	<u>Office/outpatient visit, established</u>
<u>99241</u>	<u>Office consultation</u>
<u>99242</u>	<u>Office consultation</u>
<u>99243</u>	<u>Office consultation</u>
<u>99244</u>	<u>Office consultation</u>
<u>99245</u>	<u>Office consultation</u>
<u>99271</u>	<u>Confirmatory consultation</u>
<u>99272</u>	<u>Confirmatory consultation</u>
<u>99273</u>	<u>Confirmatory consultation</u>
<u>99274</u>	<u>Confirmatory consultation</u>
<u>99354</u>	<u>Prolonged service, office</u>
<u>99355</u>	<u>Prolonged service, office</u>
<u>M0101</u>	<u>Foot care hygiene</u>

5221.4035 FEE ADJUSTMENTS FOR MEDICAL/SURGICAL SERVICES.

Subpart 1. Definition of a global surgical package. Coding and payment for all surgical procedures is based on a global surgical package as indicated in column 7 of parts 5221.4030 to 5221.4060 and as described in part 5221.4020, subpart 2, item G. The RVU listed for each procedure includes preoperative, postoperative, and intraoperative work related to the given surgical procedure as specified in this part. Column 7 of parts 5221.4030 to 5221.4060 provides the postoperative periods that apply to each surgical procedure.

To determine the global period for surgeries with a 090 global period, include the day immediately before the day of surgery, the day of surgery, and the 90 days immediately following the day of surgery.

EXAMPLE: Date of surgery, January 5; preoperative period, January 4; last day of global period, April 5.

To determine the global period for procedures with a 010 global period, count the day of surgery and the appropriate number of days immediately following the date of surgery.

EXAMPLE: Date of surgery, January 5; last day of global period, January 15.

The global period for procedures with a 000 global period include only the services provided on the day of surgery.

Physicians who perform the surgery and furnish all of the usual preoperative and postoperative work are paid for the global package according to the appropriate CPT code and any appropriate modifiers for the surgical procedure only. Payment for services in the global surgical package are based on the total RVUs listed in columns 5 and 6. Physicians are not paid separately for visits or other services that are included in the global package.

Other subparts may effect coding and payment for services for which a global period applies. Subpart 2 further defines services included in the global surgical package. Subpart 3 further defines services not included in the global surgical package. Subpart 4 governs coding and payment adjustment for physicians furnishing less than the full global package. Subpart 5 specifies additional coding and payment requirements for multiple surgeries. Subpart 6 specifies additional coding and payment requirements for bilateral procedures. Subpart 7 specifies additional coding and payment requirements for assistant-at-surgery. Subpart 8 specifies additional coding and payment requirements for cosurgeons. Subpart 9 specifies additional coding and payment requirements for team surgery.

Subp. 2. Components of a global surgical package. The global surgical package includes coding and payment instructions for the following services related to the surgery when furnished by the physician who performs the surgery. The services included in

the global surgical package may be furnished in any setting, for example, in hospitals, ambulatory surgical centers, outpatient hospital surgical centers, and physicians' offices. Visits to a patient in an intensive care or critical care unit are also included if made by the surgeon. However, certain critical care services identified by CPT codes 99291 and 99292 are payable separately as specified in subpart 3, item L. Included in the global surgical package are:

A. preoperative visits as follows:

(1) preoperative visits beginning with the day before the day of surgery for procedures with a global period of 090 days except that the evaluation and management service to determine the need for surgery is separately coded and paid in accordance with subpart 3, item A, subitem (1), even if the evaluation and management service is the day before or the day of surgery; and

(2) preoperative visits the day of surgery for procedures with a global period of 000 or 010 days unless a significant separately identifiable evaluation and management service is performed as described in subpart 3, item A, subitem (2);

B. intraoperative services which include services that are normally a usual and necessary part of a surgical procedure;

C. all additional medical or surgical services required of the surgeon during the postoperative period of the surgery because of complications which do not require additional trips to the operating room. Subpart 3, item G, governs services for postoperative complications which require a return trip to the operating room;

D. postoperative visits which include follow-up visits during the global period of the surgery that are related to recovery from the surgery;

E. postsurgical pain management by the surgeon;

F. supplies, except for those noted in subpart 3, item I; and

G. miscellaneous services such as dressing changes; local incisional care; removal of operative pack; removal of cutaneous sutures and staples, lines, wires, tubes, drains, casts, and splints; insertion, irrigation and removal of urinary catheters, routine peripheral intravenous lines, nasogastric and rectal tubes, and changes and removal of tracheostomy tubes.

Subp. 3, Services not included in global surgical package. The services listed in items A to O are not included in the global surgical package. These services may be coded and paid for separately. Physicians must use appropriate modifiers as set forth in this subpart.

A. The initial consultation or evaluation of the problem by the surgeon to determine the need for a surgical procedure is coded and paid as specified in subitems (1) and (2):

(1) for services with a global period of 090 days, a separate payment is allowed for the appropriate level of evaluation and management service. This circumstance must be coded by adding CPT modifier 57 to the appropriate level of evaluation and management service; or

(2) for services with a global period of 000 or 010, and endoscopies, the initial consultation or evaluation services by the same physician on the same day as the procedure, are included in the payment for the procedure, unless a significant, separately identifiable service is also performed. For example, an evaluation and management service on the same day could be properly billed in addition to suturing a scalp wound if a full neurological examination is made for a patient with head trauma. Payment for an evaluation and management service is not appropriate if the physician only identified the need for sutures and confirmed allergy and immunization status. The physician must document in the medical record that the patient's condition required a significant, separately identifiable evaluation and management service above and beyond the usual preoperative and postoperative care associated with the procedure or service that was performed. This circumstance must be coded by adding CPT modifier 25 to the appropriate level of evaluation and management service.

B. Services of other physicians are not included in the global surgical package and are separately coded and paid as follows:

(1) preoperative physical examination and postdischarge services of a physician other than the surgeon are coded by the appropriate evaluation and management code and are paid separately. No modifiers are necessary;

(2) physicians who provide follow-up services for procedures with a global period of 000 or 010 that were initially performed in emergency departments may charge the appropriate level of office visit code and are paid separately. The physician who performs the emergency room service codes for the surgical procedure without a modifier;

(3) if the services of a physician other than the surgeon are required during a postoperative period for an underlying condi-

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Proposed Rules

tion or medical complication, the other physician codes the appropriate evaluation and management service and is paid separately. No modifiers are necessary. An example is a cardiologist who manages underlying cardiovascular conditions of a patient:

(4) where the surgeon and another physician or physicians agree to transfer care otherwise included in the global period, coding and payment are governed by subpart 4.

C. Visits unrelated to the diagnosis for which the surgical procedure is performed, unless the visits occur due to complications of the surgery, are not included in the global surgical package and are separately payable. Physicians must use the following modifiers if appropriate:

(1) CPT modifier 79 identifies an unrelated procedure by the same physician during a postoperative period. The physician must document that the performance of a procedure during a postoperative period was unrelated to the original procedure; and

(2) CPT modifier 24 identifies an unrelated evaluation and management service by the same physician during a postoperative period. This circumstance must be coded by adding CPT modifier 24 to the appropriate level of evaluation and management service. The physician must document that an evaluation and management service was performed during the postoperative period of an unrelated procedure. An ICD-9-CM code that clearly indicates that the reason for the encounter was unrelated to the surgery is acceptable documentation.

D. Treatment for the underlying condition or an added course of treatment which is not part of normal recovery from surgery is not included in the global surgical package and is separately payable. Complications from the surgical procedure are governed by item G and subpart 2, item C.

E. Diagnostic tests and procedures, including diagnostic radiological procedures and diagnostic biopsies, are not included in the global surgical package and are separately coded and payable. If a diagnostic biopsy with a ten-day global period precedes a major surgery on the same day or in the ten-day period, the major surgery is payable separately.

F. Clearly distinct surgical procedures during the postoperative period which are not reoperations for complications (reoperations for complications are governed by item G) are not included in the global surgical package and are separately payable. This includes procedures done in two or more parts for which the decision to stage the procedure is made prospectively or at the time of the first procedure. Examples of this are procedures to diagnose and treat epilepsy, codes 61533, 61534-61536, 61539, 61541, and 61543, which may be performed in succession within 90 days of each other. CPT modifier 58 must be used to code for staged or related surgical procedures done during the global period of the first procedure. The global period for the staged or subsequent procedures is separate from the global period for the preceding procedure.

G. Treatment for postoperative complications which requires a return trip to the operating room is not included in the global surgical package and is separately coded and paid as specified in this item. This additional procedure is referred to as a reoperation.

“Operating room,” for this purpose, is defined as a place of service specifically equipped and staffed for the sole purpose of performing procedures. Operating room includes a cardiac catheterization suite, laser suite, and endoscopy suite. It does not include a patient’s room, minor treatment room, recovery room, or intensive care unit, unless the patient’s condition was so critical there would be insufficient time for transportation to an operating room.

(1) When coding for treatment for postoperative complications for services with a global period of 090 or 010 days which requires a return trip to the operating room, as defined in this item, physicians must code the CPT code that describes the procedures performed during the return trip as follows:

(a) Some reoperations have been assigned separate, distinct reoperation CPT procedure codes and RVUs. The maximum fee for these procedures is calculated using the RVUs for the coded reoperation and the formula in part 5221.4020.

(b) Reoperations which have not been assigned separate, distinct reoperation CPT codes and RVUs must be identified on the bill with the CPT procedure code that describes the procedure or treatment for the complication plus CPT modifier 78 which indicates a return to the operating room for a related procedure during the global period. The CPT procedure code may be the one used for the original procedure when the identical procedure is repeated or another CPT procedure code which describes the actual procedure or service performed. The reoperation is paid at 76 percent of the total RVU listed for the reoperation procedure. The maximum fee for a reoperation without a separate distinct reoperation CPT procedure code is calculated according to the following formula:

Maximum fee = .76 x (total RVUs for the reoperation) x (conversion factor)

(c) When no CPT code exists to describe the treatment for complications, use an unlisted surgical procedure code plus CPT modifier 78 which indicates a return to the operating room for a related procedure during the global period. The reoperation is paid at 38 percent of the total RVU listed for the original procedure. The maximum fee for a reoperation for a procedure identified by an unlisted CPT procedure code is calculated according to the following formula:

Maximum fee = .38 x (total RVUs for the original procedure) x (conversion factor)

(2) When coding for treatment for postoperative complications for a procedure with a 000 global period, physicians must

use CPT modifier 78 which indicates a return trip to the operating room for a related procedure during the postoperative global period. The full value for the repeat procedure is paid according to the formula in part 5221.4020.

(3) If additional procedures are performed during the same operative session as the original surgery to treat complications which occurred during the original surgery, the additional procedures are coded and paid as multiple surgeries as specified in subpart 5. Only surgeries that require a return to the operating room due to complications from the original surgery are coded and paid as specified in subitems (1) and (2).

(4) If the patient is returned to the operating room after the initial operative session and during the postoperative global surgery period of the original surgery, for one or more additional procedures as a result of complications from the original surgery, each procedure required to treat the complications from the original surgery is paid as specified in subitem (1) or (2).

The multiple surgery rules under subpart 5 do not also apply. The original operation session and the reoperation session are separate and distinct surgical sessions. The reoperation is not considered a multiple surgery, as described in subpart 5, of the original operation. If during the reoperation session multiple surgeries are performed, the additional surgeries are not governed by the multiple surgery payment rules in subpart 5 but are governed by subitems (1) and (2).

(5) If the patient is returned to the operating room during the postoperative global surgery period of the original surgery, not on the same day of the original surgery, for bilateral procedures that are required as a result of complications from the original surgery, subitems (1) to (4) apply. The bilateral rules in part 5221.4020, subpart 2, item I, do not apply.

H. If a less extensive procedure fails, and a more extensive procedure is required, the second procedure is coded and paid separately.

I. For surgical services listed in this item that are performed in a physician's office, separate payment may be made for a surgical tray (CPT code A4550): 19101, 19120, 19125, 19126, 20200, 20205, 20220, 20225, 20240, 25111, 28290, 28292, 28293, 28294, 28296, 28297, 28298, 28299, 32000, 36533, 37609, 38500, 43200, 43202, 43220, 43226, 43234, 43235, 43239, 43245, 43247, 43249, 43250, 43251, 43458, 45378, 45379, 45380, 45382, 45383, 45384, 45385, 49080, 49081, 52005, 52007, 52010, 52204, 52214, 52224, 52234, 52235, 52240, 52250, 52260, 52270, 52275, 52276, 52277, 52282, 52283, 52290, 52300, 52301, 52305, 52310, 52315, 57520, 57522, 58120, 62270, 68761, 85095, 85102, 95028, 96440, 96445, 96450, and G0105.

J. Splints, casting, and take-home supplies are coded and paid separately.

K. Immunosuppressive therapy for organ transplants is coded and paid separately.

L. Critical care services (CPT codes 99291 and 99292) unrelated to the surgery, where a seriously injured or burned patient is critically ill and requires constant attendance of the physician, provided during a global surgical period, are coded and paid separately.

M. Except as provided in part 5221.0410, subpart 7, item A, the physician may separately bill a reasonable amount for supplementary reports and services directly related to the employee's ability to return to work, fitness for job offers, and opinions as to whether or not the condition was related to a work-related injury. Coding and payment for these services is governed by parts 5221.0410, subpart 7; 5221.0420, subpart 3; and 5221.0500, subpart 2.

N. The global surgical package does not apply, and separate coding and payment is allowed, for an initial service that meets both of the conditions in subitems (1) and (2):

(1) the service is for initial care only to afford comfort to a patient or to stabilize or protect a fracture, dislocation, or other injury; and

(2) subsequent restorative treatment, such as surgical repair or reduction of a fracture or joint dislocation, is expected to be performed by a physician other than the physician rendering the initial care only.

O. Surgeries for which services performed are significantly greater or more complex than usually required must be coded with CPT modifier 22 added to the CPT code for the procedure. Additional requirements for use of this modifier are as follows:

(1) This modifier may only be used where circumstances create a more complex procedure such as congenital or developmental disorders of the anatomy, multiple fractures of the same long bone, coexisting disease, when there has been previous surgery on the same body part or where there is a significant amount of scar tissue.

(2) This modifier may only be reported with procedure codes that have a global period of 000, 010, or 090 days.

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Proposed Rules

(3) Physicians must provide:

- (a) a concise statement about how the service is significantly more complex than usually required; and
- (b) an operative report with the claim.

(4) The maximum fee for a surgical procedure that has satisfied all of the requirements for use of CPT modifier 22 is up to 125 percent of the total RVU for that CPT code listed in subpart 2b.

(5) CPT modifier 22 is not used to report additional procedures that are performed during the same operative session as the original surgery to treat complications which occurred during the original surgery. Additional procedures to treat complications which occurred during surgery are governed by subpart 5.

Subp. 4. Physicians furnishing less than full global package. There are occasions when more than one physician provides services included in the global surgical package. It may be the case that the physician who performs the surgical procedure does not furnish the follow-up care. Payment for the postoperative, postdischarge care is split between two or more physicians where the physicians agree on the transfer of care. Coding and payment requirements for physicians furnishing less than the full global package are:

A. When more than one physician furnishes services that are included in the global surgical package, the sum of the amount allowed for all physicians may not exceed what would have been paid if a single physician provides all services.

B. Where physicians agree on the transfer of care during the global period, they must add the appropriate CPT modifier to the surgical procedure code:

- (1) CPT modifier 54 for surgical care only; or
- (2) CPT modifier 55 for postoperative management only.

C. Physicians who share postoperative management with another physician must submit additional information showing when they assumed and relinquished responsibility for the postoperative care. If the physician who performed the surgery relinquishes care at the time of discharge, the physician need only show the date of surgery when billing with CPT modifier 54.

However, if the surgeon also cares for the patient for some period following discharge, the surgeon must show the date of surgery and the date on which postoperative care was relinquished to another physician. The physician providing the remaining postoperative care must show the date care was assumed.

D. If a surgeon performs a procedure with a global period of 010 or 090 days, and cares for the patient until time of discharge from a hospital or ambulatory surgical center, the maximum fee for this surgeon's services is paid at 87 percent of the total RVU and calculated according to the following formula:

$$\text{Maximum fee} = .87 \times (\text{total RUVs} \times \text{CF})$$

Modifier 54 is used to identify these services.

E. If a health care provider who did not perform the surgery assumes surgical follow-up care of a patient after discharge from the hospital or ambulatory surgical center, then the maximum fee for this practitioner's services is paid at 13 percent of the total RVU and is calculated according to the following formula:

$$\text{Maximum fee} = .13 \times (\text{total RVUs} \times \text{CF})$$

CPT modifier 55 is used to identify these services.

F. If several health care providers furnish postoperative care, the maximum fee for the postoperative period is divided among the practitioners based on the number of days for which each health care provider was primarily responsible for care of the patient. CPT modifier 55 (for postoperative management only) is used to identify postoperative services furnished by more than one provider.

G. If the providers have agreed to a payment distribution of the global fee that differs from the distributions set forth in items D to F, then payments will be made accordingly, if the agreed-upon distribution is documented and explained on the bill for the procedure and is not prohibited by *Minnesota Statutes*, section 147.091, subdivision 1, paragraph (p).

Subp. 5. Coding and payment for multiple surgeries and procedures. Part 5221.4020, subpart 2, item H, and column 8 in parts 5221.4030 to 5221.4060, describe codes subject to the multiple procedures payment restrictions. Multiple surgeries are separate surgeries performed by a single physician on the same patient at the same operative session or on the same day for which separate payment may be allowed.

A. The coding requirements in subitems (1) and (2) apply to multiple surgeries that have an indicator of 2 or 3 in column 8 by the same physician on the same day as specified in items D and E:

(1) the surgical procedure with the highest RVU is reported without the multiple procedures CPT modifier 51;

(2) the additional surgical procedures performed are reported with CPT modifier 51.

B. There may be instances in which two or more physicians each perform distinctly different, unrelated surgeries on the same patient on the same day, for example, in some multiple trauma cases. When this occurs, CPT modifier 51 is not used and the multiple procedure payment reductions do not apply unless one of the surgeons individually performs multiple surgeries.

C. If any of the multiple surgeries are bilateral or cosurgeries, first determine the allowed amount for the procedure as specified in subpart 6 or 8, next rank this amount with the remaining procedures, and finally, apply the appropriate multiple surgery payment reductions as specified in items D and E.

D. For procedures with an indicator of 2 in column 8, if the procedures are reported on the same day as another procedure with an indicator of 2, the maximum fee for the procedure with the highest RVU is paid at 100 percent of the listed RVU and the maximum fee for each additional procedure with an indicator of 2 is paid at 50 percent of the listed RVU.

E. For procedures with an indicator of 3 in column 8, the multiple endoscopy payment rules apply if the procedure is billed with another endoscopy in the same family (i.e., another endoscopy that has the same base procedure). For purposes of this item, the term "endoscopy" also includes arthroscopy procedures. If an endoscopy procedure is performed on the same day as another endoscopy procedure within the same family, the payment for the procedure with the highest RVU is 100 percent of the maximum allowed fee and the maximum allowed fee for every other procedure in that family is reduced by the value of the endobase code for that family of procedures. No separate payment is made for the endobase procedure when other endoscopy procedures in the same family are performed on the same day.

<u>Endobase CPT Code</u>	<u>CPT Procedure Codes in the same family</u>
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<u>29815</u>	<u>29819, 29820, 29821, 29822, 29823, 29825, 29826</u>
<u>29830</u>	<u>29834, 29835, 29836, 29837, 29838</u>
<u>29840</u>	<u>29843, 29844, 29845, 29846, 29847</u>
<u>29860</u>	<u>29861, 29862, 29863</u>
<u>29870</u>	<u>29871, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887</u>
<u>31505</u>	<u>31510, 31511, 31512, 31513</u>
<u>31525</u>	<u>31527, 31528, 31529, 31530, 31535, 31540, 31560, 31570</u>
<u>31526</u>	<u>31531, 31536, 31541, 31561, 31571</u>
<u>31575</u>	<u>31576, 31577, 31578, 31579</u>
<u>31622</u>	<u>31625, 31628, 31629, 31630, 31631, 31635, 31640, 31641, 31645</u>
<u>43200</u>	<u>43202, 43204, 43205, 43215, 43216, 43217, 43219, 43220, 43226, 43227, 43228</u>
<u>43235</u>	<u>43239, 43241, 43243, 43244, 43245, 43246, 43247, 43249, 43250, 43251, 43255, 43258, 43259</u>

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Proposed Rules

<u>43260</u>	<u>43261, 43262, 43263, 43264, 43265, 43267, 43268, 43269, 43271, 43272</u>
<u>44360</u>	<u>44361, 44363, 44364, 44365, 44366, 44369, 44372, 44373</u>
<u>44376</u>	<u>44377, 44378</u>
<u>44388</u>	<u>44389, 44390, 44391, 44392, 44393, 44394</u>
<u>45300</u>	<u>45303, 45305, 45307, 45308, 45309, 45315, 45317, 45320, 45321</u>
<u>45330</u>	<u>45331, 45332, 45333, 45334, 45337, 45338, 45339</u>
<u>45378</u>	<u>45379, 45380, 45382, 45383, 45384, 45385</u>
<u>46600</u>	<u>46604, 46606, 46608, 46610, 46611, 46612, 46614, 46615</u>
<u>47552</u>	<u>47553, 47554, 47555, 47556</u>
<u>50551</u>	<u>50555, 50557, 50559, 50561</u>
<u>50570</u>	<u>50572, 50574, 50575, 50576, 50578, 50580</u>
<u>50951</u>	<u>50953, 50955, 50957, 50959, 50961</u>
<u>50970</u>	<u>50974, 50976</u>
<u>52000</u>	<u>52007, 52010, 52204, 52214, 52224, 52250, 52260, 52265, 52270, 52275, 52276, 52277, 52281, 52282, 52283, 52285, 52290, 52300, 52301, 52305, 52310, 52315, 52317, 52318</u>
<u>52005</u>	<u>52320, 52325, 52327, 52330, 52332, 52334</u>
<u>52335</u>	<u>52336, 52337, 52338, 52339</u>
<u>56300</u>	<u>56301, 56302, 56303, 56304, 56305, 56306, 56307, 56308, 56309, 56311, 56314, 56343, 56344</u>
<u>56350</u>	<u>56351, 56352, 56353, 56354, 56355, 56356</u>
<u>57452</u>	<u>57454, 57460</u>

The following examples illustrate various applications of the endoscopy and multiple procedure payment rule.

Example 1. Endobase procedure plus one other procedure in that family.

<u>Procedures performed</u>	<u>Maximum allowed payment if no other procedures performed</u>	<u>Amount paid</u>	<u>Comments</u>
<u>52000 endobase code</u>	<u>\$100</u>	<u>0.00</u>	<u>No separate payment is made for the endobase procedure when other endoscopy procedures in the same family are performed on the same day</u>

<u>52214 (same family as endobase code)</u>	<u>\$200</u>	<u>\$200</u>	<u>Pay 100 percent for the procedure with the highest RVU</u>
		<u>\$200</u>	<u>Total amount paid is \$200 \$0 (for 52000) + \$200 (for 52214) = \$200</u>

Example 2. Endobase procedure plus two or more procedures in the same endoscopy family. The endoscopy pricing rule applies.

<u>Procedures performed</u>	<u>Maximum allowed payment if no other procedures performed</u>	<u>Amount paid</u>	<u>Comments</u>
<u>52000 endobase code</u>	<u>\$100</u>	<u>\$0</u>	<u>No separate payment is made for the endobase procedure when other endoscopy procedures in the same family are performed on the same day</u>
<u>52214 (same family as endobase code)</u>	<u>\$200</u>	<u>\$200</u>	<u>Pay 100 percent of the procedure with the highest RVU</u>
<u>52204 (same family as endobase code)</u>	<u>\$150</u>	<u>\$50</u>	<u>Pay the difference between the next highest valued endoscopy code and the base endoscopy code \$150 - \$100 = \$50</u>
		<u>\$250</u>	<u>Total amount paid is \$250 \$200 (for 52214) + \$50 (for 52204) + \$0 (for 52000) = \$250</u>

Example 3. Two unrelated endoscopy procedures. The multiple surgery rule as depicted by indicator 2 applies.

<u>Procedures performed</u>	<u>Maximum allowed payment if no other procedures performed</u>	<u>Amount Paid</u>	<u>Comments</u>
<u>45378 endobase code</u>	<u>\$150</u>	<u>\$150</u>	<u>Pay 100 percent of the procedure with the highest RVU with an indicator of 2</u>

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Proposed Rules

<u>43217</u> <u>endobase</u> <u>code</u>	<u>\$75</u>	<u>\$37.50</u>	<u>Pay 50 percent of all</u> <u>other procedures with</u> <u>an indicator of 2</u>
		<u>\$187.50</u>	<u>Total amount paid is</u> <u>\$187.50</u> <u>\$150 (for 45378) + \$37.50</u> <u>(for 43217) = \$187.50</u>

Example 4. Two unrelated series of endoscopy procedures. The endoscopy pricing rule is applied first, within each family of endoscopy codes. The multiple surgery pricing rule as depicted by indicator 2 is then applied. The codes in the series with the highest total value are allowed at 100 percent of the calculated maximum value. The codes in the series with the lower total value are allowed at 50 percent of total allowed calculated maximum value.

Example 5. Endoscopy procedures billed with other surgery procedures. All procedures subject to the multiple surgery pricing rule are ranked from highest to lowest to determine which codes, or groups of codes, are allowed at 100 percent or 50 percent of their calculated maximum value. If two or more of the billed codes belong to the same endoscopy family, the endoscopy pricing rule is applied first, and the total value of the endoscopy series is used in the array.

F. For procedures with an indicator of 4, special rules for multiple procedures are specified in parts 5221.4051 and 5221.4061.

G. For procedures with an indicator of 0 or 9, no payment rules for multiple or endoscopy procedures apply.

Subp. 6. Coding and payment for bilateral surgeries and procedures. Part 5221.4020, subpart 2, item I, and column 9 in parts 5221.4030 to 5221.4060 describe codes subject to the bilateral procedures payment restrictions. Bilateral surgeries are procedures performed on both sides of the body during the same operative session or on the same day.

A. For procedures with an indicator of 0, 3, or 9 in column 9, no bilateral payment provisions apply. For procedures with an indicator of 0, the bilateral adjustment is inappropriate because of physiology or anatomy or because the code description specifically states that it is a unilateral procedure and there is an existing code for the bilateral procedure. Services with an indicator of 3 are generally radiology procedures or other diagnostic tests which are not subject to bilateral payment adjustments. For procedures with an indicator of 9, the concept of bilateral surgeries does not apply.

B. For procedures with an indicator of 1 in column 9, if the procedures are billed as bilateral procedures, the allowed payment is 150 percent of the maximum amount allowed for a single procedure. The bilateral adjustment is applied before any multiple procedure rules as specified in subpart 5, item C, or cosurgery as specified in subpart 8, are applied.

C. For procedures with an indicator of 2, no further bilateral adjustments apply because the RVUs are already based on the procedure being performed as a bilateral procedure.

Subp. 7. Coding and payment for assistant-at-surgery. Part 5221.4020, subpart 2, item J, and column 10 in parts 5221.4030 to 5221.4060 describe codes subject to the assistant-at-surgery payment restrictions. An assistant-at-surgery must use the appropriate CPT or HCPCS modifier in accordance with their provider type. Payment for a physician assistant-at-surgery is not allowed when payment is made for cosurgeons or team surgeons for the same procedures. For procedures with an indicator of 0 (where medical necessity is established) or 2 in column 10 the maximum fee for an assistant-at-surgery is as follows:

A. For a physician who is an assistant-at-surgery, 16 percent of the global surgery fee is paid. This is paid in addition to the global fee paid to the surgeon.

B. If the assistant surgery service is performed by a provider who is not a physician, but who has advanced training to act as an assistant-at-surgery consistent with their scope of practice, 10.4 percent of the global surgery fee is paid. This is paid in addition to the global fee paid to the surgeon.

Subp. 8. Coding and payment for cosurgeons. Part 5221.4020, subpart 2, item K, and column 11 in parts 5221.4030 to 5221.4060 describe codes subject to the cosurgeon's payment adjustments. Under some circumstances, the individual skills of two or more surgeons are required to perform surgery on the same patient during the same operative session. This may be required because of the complex nature of the procedures or the patient's condition. It is cosurgery if two surgeons, each in a different specialty, are required to perform a specific procedure, for example, heart transplant. Cosurgery also refers to surgical procedures involving two surgeons performing the parts of the procedure simultaneously, for example, bilateral knee replacement. In these cases, the additional physicians are not acting as assistants-at-surgery.

A. If cosurgeons are required to do a procedure, each surgeon codes for the procedure with CPT modifier 62 which indicate two surgeons.

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B. For procedures with an indicator of 1, where necessity of cosurgeons is established, or 2 in column 11, the amount paid for the procedure is 125 percent of the global fee, divided equally between the two surgeons. If the cosurgeons have agreed to a different payment distribution, payments will be made accordingly, if the agreed-upon distribution is documented and explained on the bill for the procedure, and is not prohibited by Minnesota Statutes, section 147.091, subdivision 1, paragraph (p).

C. For procedures with an indicator of 0 or 9 in column 11, either cosurgeons are not allowed or the concept of cosurgery does not apply and cosurgery fee adjustments do not apply.

D. If surgeons of different specialties are each performing a distinctly different procedure with specific CPT codes, cosurgery fee adjustments do not apply even if the procedures are performed through the same incision. If one of the surgeons performs multiple procedures, the multiple procedure rules in subpart 5 apply to that surgeon's services.

Subp. 9. Coding and payment for team surgery. Part 5221.4020, subpart 2, item L, and column 12 in parts 5221.4030 to 5221.4060 govern application of the team surgery concept.

A. If a team of surgeons, that is, more than two surgeons of different specialties, is required to perform a specific procedure, each surgeon bills for the procedure with the CPT modifier 66 which indicates a surgical team.

B. For procedures with an indicator of 1, where necessity of a team is established, or 2 in column 12, the amount paid for the procedure is limited by part 5221.0500, subpart 2, items B to F, and Minnesota Statutes, section 176.136, subdivision 1b.

C. For procedures with an indicator of 0 or 9 in column 12, either team surgery is not allowed or the concept of team surgery does not apply.

Subp. 10. Unbundling surgical services. Where several component services which have different CPT codes may be described in one more comprehensive CPT code, only the single CPT code most accurately and comprehensively describing the procedure performed or service rendered may be reported. Intraoperative services, incidental surgeries, or components of more major surgeries are not separately billable or payable. For example, an anterior arthrodesis of the lumbar spine using the anterior interbody technique may be performed by two surgeons. One of the surgeons may perform opening or the approach for the anterior arthrodesis while a different surgeon performs the arthrodesis. In this instance, the surgeons are acting as cosurgeons performing different components of a major surgery. The opening or approach is not a separately billable or payable procedure. Both surgeons must code this service using the anterior arthrodesis code and are paid for the procedure as cosurgeons as specified in subpart 8.

5221.4040 PATHOLOGY AND LABORATORY PROCEDURE CODES.

Subpart 1. **Key to abbreviations and terms.** For descriptions of columns, abbreviations, and terms, see part 5221.4020, subpart 2.

A. Column 1 in subpart 2a is labeled "CPT/HCPCS procedure code." This is the specific code intended to identify the health care service described in column 2.

B. Column 2 in subpart 2a is labeled "CPT/HCPCS description." This is a short narrative description of the procedure code. A complete description of the service appears in the CPT or HCPCS Manual in effect on the date the service was rendered.

C. Column 3 in subpart 2a is labeled "total RVU." These are the total relative value units for the service.

Subp. 2a. [See repealer.]

Subp. 2b. List of pathology and laboratory procedure codes.

(all new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
80007	A	7	Clinical chemistry tests	0.71	0.71	XXX	0	0	0	0	0
80500	A		Lab pathology consult	0.45	0.45	XXX	0	0	0	0	0
80502	A		Lab pathology consult	1.28	1.28	XXX	0	0	0	0	0
81000	A		Urinalysis with microscopy	0.21	0.21	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
81002	A		Urinalysis, no microscopy	0.12	0.12	XXX	0	0	0	0	0
82565	A		Assay blood creatinine	0.08	0.08	XXX	0	0	0	0	0
82947	A		Assay body fluid	0.34	0.34	XXX	0	0	0	0	0
84132	A		Assay blood potassium	0.21	0.21	XXX	0	0	0	0	0
84295	A		Assay blood sodium	0.27	0.27	XXX	0	0	0	0	0
85007	A		Differential WBC count	0.25	0.25	XXX	0	0	0	0	0
85014	A		Hematocrit	0.14	0.14	XXX	0	0	0	0	0
85018	A		Hemoglobin	0.16	0.16	XXX	0	0	0	0	0
85021	A		Automated hemogram	0.22	0.22	XXX	0	0	0	0	0
85022	A		Automated hemogram	0.38	0.38	XXX	0	0	0	0	0
85023	A		Automated hemogram	0.48	0.48	XXX	0	0	0	0	0
85024	A		Automated hemogram	0.41	0.41	XXX	0	0	0	0	0
85025	A		Automated hemogram	0.59	0.59	XXX	0	0	0	0	0
85031	A		Manual hemogram	0.43	0.43	XXX	0	0	0	0	0
85048	A		White blood cell	0.15	0.15	XXX	0	0	0	0	0
85060	A		Blood smear interpretation	0.53	0.53	XXX	0	0	0	0	0
85095	A		Bone marrow aspiration	1.38	1.38	XXX	0	0	0	0	0
85097	A		Bone marrow interpretation	1.12	1.12	XXX	0	0	0	0	0
85105	A		Bone marrow, interpretation	0.86	0.86	XXX	0	0	0	0	0
85610	A		Prothrombin time	0.24	0.24	XXX	0	0	0	0	0
85651	A		RBC sedimentation	0.16	0.16	XXX	0	0	0	0	0
85730	A		Thromboplastin	0.33	0.33	XXX	0	0	0	0	0
86077	A		Physician blood bank	0.96	0.96	XXX	0	0	0	0	0
86078	A		Physician blood bank	1.00	1.00	XXX	0	0	0	0	0
86079	A		Physician blood bank	0.99	0.99	XXX	0	0	0	0	0
86490	A		Coccidioidomycosis	0.24	0.24	XXX	0	0	0	0	0
86510	A		Histoplasmosis	0.25	0.25	XXX	0	0	0	0	0
86580	A		TB intradermal	0.20	0.20	XXX	0	0	0	0	0
86585	A		TB tine test	0.16	0.16	XXX	0	0	0	0	0
87040	A		Blood culture	0.85	0.85	XXX	0	0	0	0	0
87070	A		Culture specimen	0.44	0.44	XXX	0	0	0	0	0
88104	A		Cytopathology	0.80	0.80	XXX	0	0	0	0	0
88106	A		Cytopathology	0.74	0.74	XXX	0	0	0	0	0
88107	A		Cytopathology	0.97	0.97	XXX	0	0	0	0	0
88108	A		Cytopathology, concentration	0.82	0.82	XXX	0	0	0	0	0
88125	A		Forensic cytopathology	0.29	0.29	XXX	0	0	0	0	0
88141	A		Cervical cytopathology	0.59	0.59	XXX	0	0	0	0	0
88160	A		Cytopathology, smears	0.66	0.66	XXX	0	0	0	0	0
88161	A		Cytopathology, smears	0.71	0.71	XXX	0	0	0	0	0
88162	A		Cytopathology, smears	1.24	1.24	XXX	0	0	0	0	0
88170	A		Fine needle aspiration	1.80	1.80	XXX	0	0	0	0	0
88171	A		Fine needle aspiration	2.09	2.09	XXX	0	0	0	0	0
88172	A		Evaluation of specimen(s)	1.05	1.05	XXX	0	0	0	0	0
88173	A		Interpretation and report	1.78	1.78	XXX	0	0	0	0	0
88180	A		Cell marker study	0.55	0.55	XXX	0	0	0	0	0
88182	A		Cell marker study	1.33	1.33	XXX	0	0	0	0	0
88300	A		Surgical pathology	0.23	0.23	XXX	0	0	0	0	0
88302	A		Tissue examination	0.44	0.44	XXX	0	0	0	0	0
88304	A		Tissue examination	0.64	0.64	XXX	0	0	0	0	0
88305	A		Tissue examination	1.44	1.44	XXX	0	0	0	0	0
88307	A		Tissue examination	2.49	2.49	XXX	0	0	0	0	0
88309	A		Tissue examination	3.34	3.34	XXX	0	0	0	0	0
88311	A		Decalcify tissue	0.36	0.36	XXX	0	0	0	0	0
88312	A		Special stains	0.62	0.62	XXX	0	0	0	0	0
88313	A		Special stains	0.36	0.36	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
88314	A		Histochemical staining	0.86	0.86	XXX	0	0	0	0	0
88318	A		Chemical histochemistry	0.52	0.52	XXX	0	0	0	0	0
88319	A		Enzyme histochemistry	0.82	0.82	XXX	0	0	0	0	0
88321	A		Microslide consultation	1.33	1.33	XXX	0	0	0	0	0
88323	A		Microslide consultation	1.63	1.63	XXX	0	0	0	0	0
88325	A		Comprehensive report	2.08	2.08	XXX	0	0	0	0	0
88329	A		Pathology consultation	0.82	0.82	XXX	0	0	0	0	0
88331	A		Pathology consultation	1.83	1.83	XXX	0	0	0	0	0
88332	A		Pathology consultation	0.92	0.92	XXX	0	0	0	0	0
88342	A		Immunocytochemistry	1.18	1.18	XXX	0	0	0	0	0
88346	A		Immunofluorescent study	1.14	1.14	XXX	0	0	0	0	0
88347	A		Immunofluorescent study	1.01	1.01	XXX	0	0	0	0	0
88348	A		Electron microscopy	3.06	3.06	XXX	0	0	0	0	0
88349	A		Electron microscopy	1.88	1.88	XXX	0	0	0	0	0
88355	A		Analysis, skeletal	2.87	2.87	XXX	0	0	0	0	0
88356	A		Analysis, nerve	4.52	4.52	XXX	0	0	0	0	0
88358	A		Analysis, tumor	4.08	4.08	XXX	0	0	0	0	0
88362	A		Nerve teasing preparations	3.29	3.29	XXX	0	0	0	0	0
88365	A		Tissue hybridization	1.33	1.33	XXX	0	0	0	0	0
89100	A		Sample intestine	0.81	0.81	XXX	0	0	0	0	0
89105	A		Sample intestine	0.71	0.71	XXX	0	0	0	0	0
89130	A		Sample stomach	0.69	0.69	XXX	0	0	0	0	0
89132	A		Sample stomach	0.31	0.31	XXX	0	0	0	0	0
89135	A		Sample stomach	1.09	1.09	XXX	0	0	0	0	0
89136	A		Sample stomach	0.35	0.35	XXX	0	0	0	0	0
89140	A		Sample stomach	1.40	1.40	XXX	0	0	0	0	0
89141	A		Sample stomach	1.26	1.26	XXX	0	0	0	0	0
89350	A		Sputum specimen	0.33	0.33	XXX	0	0	0	0	0
89360	A		Collect sweat	0.36	0.36	XXX	0	0	0	0	0

5221.4041 FEE ADJUSTMENTS FOR PROFESSIONAL/TECHNICAL COMPONENTS FOR PATHOLOGY/ LABORATORY SERVICES.

[For text of subps 1 to 4, see M.R.]

Subp. 5. **Services performed in an independent laboratory.** The maximum fee for physician pathology services performed in an independent laboratory is that calculated for the complete service, using the RVUs corresponding to the service code listed without a modifier in part 5221.4040, subpart ~~2a~~ 2b, and the formula in part 5221.4020.

5221.4050 PHYSICAL MEDICINE AND REHABILITATION PROCEDURE CODES.

Subpart 1. **Key to abbreviations and terms.** For descriptions of columns, abbreviations, and terms, see part 5221.4020, subpart 2.

~~A. Column 1 in subpart 2a is labeled "CPT/HCPCS procedure code." This is the specific code intended to identify the health care service described in column 2.~~

~~B. Column 2 in subpart 2a is labeled "CPT/HCPCS description." This is a short narrative description of the procedure code. A complete description of the service appears in the CPT or HCPCS Manual in effect on the date the service was rendered.~~

~~C. Column 3 in subpart 2a is labeled "total RVU." These are the total relative value units for the service.~~

Subp. 2a. [See repealer.]

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Proposed Rules

Subp. 2b. List of physical medicine and rehabilitation procedure codes.

(all new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A. Procedure codes 97001 to 97004 relate to physical and occupational therapy evaluation and reevaluation procedure codes.											
97001	A	PT evaluation		1.29	1.29	XXX	0	0	0	0	0
97002	A	PT reevaluation		0.51	0.51	XXX	0	0	0	0	0
97003	A	OT evaluation		1.29	1.29	XXX	0	0	0	0	0
97004	A	OT reevaluation		0.51	0.51	XXX	0	0	0	0	0
B. Procedure codes 97010 to 97799 relate to physical medicine and rehabilitation procedure codes.											
97010	B	Hot or cold packs		0.00	0.00	XXX	9	9	9	9	9
97012	A	Mechanical traction		0.37	0.37	XXX	4	0	0	0	0
97014	A	Electrical stimulation		0.32	0.32	XXX	4	0	0	0	0
97016	A	Vasopneumatic devices		0.36	0.36	XXX	4	0	0	0	0
97018	A	Paraffin bath therapy		0.26	0.26	XXX	4	0	0	0	0
97020	A	Microwave therapy		0.22	0.22	XXX	4	0	0	0	0
97022	A	Whirlpool therapy		0.30	0.30	XXX	4	0	0	0	0
97024	A	Diathermy treatment		0.23	0.23	XXX	4	0	0	0	0
97026	A	Infrared therapy		0.22	0.22	XXX	4	0	0	0	0
97028	A	Ultraviolet therapy		0.23	0.23	XXX	4	0	0	0	0
97032	A	Electrical stimulation		0.32	0.32	XXX	4	0	0	0	0
97033	A	Electric current		0.33	0.33	XXX	4	0	0	0	0
97034	A	Contrast bath therapy		0.25	0.25	XXX	4	0	0	0	0
97035	A	Ultrasound therapy		0.26	0.26	XXX	4	0	0	0	0
97036	A	Hydrotherapy		0.41	0.41	XXX	4	0	0	0	0
97039	A	Unlisted therapy service		0.37	0.37	XXX	4	0	0	0	0
97110	A	Therapeutic exercises		0.47	0.47	XXX	0	0	0	0	0
97112	A	Neuromuscular reeducation		0.47	0.47	XXX	0	0	0	0	0
97113	A	Aquatic therapy		0.52	0.52	XXX	0	0	0	0	0
97116	A	Gait training therapy		0.41	0.41	XXX	0	0	0	0	0
97124	A	Massage therapy		0.37	0.37	XXX	0	0	0	0	0
97139	A	Unlisted phys. med. service		0.31	0.31	XXX	0	0	0	0	0
97140	A	Manual therapy		0.53	0.41	XXX	0	0	0	0	0
97150	A	Group therapy procedure		0.39	0.39	XXX	0	0	0	0	0
97504	A	Orthotic training		0.48	0.48	XXX	0	0	0	0	0
97520	A	Prosthetic training		0.49	0.49	XXX	0	0	0	0	0
97530	A	Therapeutic activities		0.50	0.50	XXX	0	0	0	0	0
97535	A	Self care/home management		0.51	0.51	XXX	0	0	0	0	0
97537	A	Community/work training		0.51	0.51	XXX	0	0	0	0	0
97542	A	Wheelchair management		0.35	0.35	XXX	0	0	0	0	0
97545	R	Work hardening		0.00	0.00	XXX	0	0	0	0	0
97546	R	Work hardening		0.00	0.00	XXX	0	0	0	0	0
97703	A	Prosthetic checkout		0.36	0.36	XXX	0	0	0	0	0
97750	A	Physical performance test		0.57	0.57	XXX	0	0	0	0	0
97770	A	Cognitive skills		0.60	0.60	XXX	0	0	0	0	0
97780	N	Acupuncture, no stimulus		0.00	0.00	XXX	9	9	9	9	9
97781	N	Acupuncture with stimulus		0.00	0.00	XXX	9	9	9	9	9
97799	C	Physical medicine		0.00	0.00	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
C. Procedure codes V5336 to V5364 relate to miscellaneous physical medicine procedure codes.											
V5336		N	Repair communication device	0.00	0.00	XXX	9	9	9	9	9
V5362		R	Speech screening	0.00	0.00	XXX	0	0	0	0	0
V5363		R	Language screening	0.00	0.00	XXX	0	0	0	0	0
V5364		R	Dysphagia screening	0.00	0.00	XXX	0	0	0	0	0

Subp 3. Additional payment instructions. The instructions and examples in items A to D are in addition to CPT code descriptions found in the CPT manual. Additional instructions include both general instructions for a group of codes as well as specific instructions for an individual specific code.

A. Supervised modalities.

(1) Additional general instructions for supervised modality codes 97010 to 97028. All supervised modalities refer to one or more areas. For example, if diathermy is applied to the cervical and low back on the same day, the charge would be one unit. If the diathermy and electrical stimulation are applied to the low back, the charge would be one unit of diathermy and one unit of electrical stimulation.

(2) Additional specific instructions for supervised modalities.

CPT

<u>CPT Code</u>	<u>CPT Description</u>	<u>Specific Instructions and Examples</u>
97014	<u>Electrical stimulation</u>	<u>Unattended electrical stimulation includes muscle stimulation, low volt therapy, sine wave therapy, stimulation of peripheral nerve, galvanic, and unattended clinical application of TENS. RVU includes the use of disposable or reusable electrodes.</u>

B. Constant attendance modalities.

(1) Additional general instructions for constant attendance modality codes 97032 to 97039. The application of a constant attendance modality is to one or more areas. Where the CPT manual specifies a specific time frame, count only the actual treatment time, and do not count setup, preparation of the area, cleanup, or documentation time. For example, with ultrasound treatment for two areas, the shoulder and elbow, if total treatment time for both areas is less than 15 minutes, one unit of ultrasound is appropriate. All units billed require supporting documentation.

(2) Additional specific instructions for constant attendance modalities.

CPT

<u>CPT Code</u>	<u>CPT Description</u>	<u>Specific Instructions and Examples</u>
97032	<u>Electrical stimulation</u>	<u>Electrical stimulation (manual) includes attended clinical application of TENS. RVU includes the use of disposable or reusable electrodes.</u>
97033	<u>Electric</u>	<u>RVU includes the use of disposable or current reusable electrodes.</u>

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Proposed Rules

C. Additional specific instructions for therapeutic procedure codes 97110 to 97546.

<u>CPT Code</u>	<u>CPT Description</u>	<u>Specific Instructions and Examples</u>
<u>97110</u>	<u>Therapeutic exercises</u>	<u>Examples include, but are not limited to, any type of range of motion, stretching, or strengthening exercises; e.g., stabilization and closed kinetic chain exercises, passive range of motion, active and assistive range of motion, progressive resistive exercises, prolonged stretch, isokinetic, isotonic, or isometric strengthening exercises.</u>
<u>97112</u>	<u>Neuromuscular reeducation</u>	<u>Examples include, but are not limited to, facilitation techniques, NDT, Rood, Brunnstrom, PNF, and Feldenkrais.</u>
<u>97113</u>	<u>Aquatic therapy</u>	<u>This code applies to any water-based exercise program such as Hubbard Tank or pools.</u>
<u>97140</u>	<u>Manual therapy</u>	<u>In addition to the services included in the CPT manual incorporated by reference in part 5221.0405, item D, this code also includes, but is not limited to: myofascial release, joint mobilization and manipulation, manual lymphatic drainage, manual traction, soft tissue mobilization and manipulation, trigger point therapy, acupressure, muscle stimulation - manual (nonelectrical), and transverse friction massage. This code is not paid when reported with any of the osteopathic manipulative treatment (OMT) (98925-98929) or chiropractic manipulative treatment (CMT) (98940-98943) codes on the same region(s)/body part on the same day. This code may be paid when reported with CMT or OMT codes only if used on a different region(s)/body part on the same day and must be accompanied by CPT modifier 59 which identifies a distinct procedural service.</u>
<u>97150</u>	<u>Group therapeutic</u>	<u>Therapeutic procedure(s) for a group is used when two or more patients are present for the same type of service such as instruction in body mechanics training, or group exercises when participants are doing same type exercises, etc. There is no time definition for this code. Providers may charge only one unit, regardless of size of group, number of areas treated, or length of time involved.</u>

97504	<u>Orthotic training</u>	<u>This code applies to fabrication, instruction in use, fitting, and care and precautions of the orthotic.</u>
97530	<u>Therapeutic activities</u>	<u>This code is used for treatment promoting functional use of a muscle, muscle group, or body part. This code is not to be used for PROM, active assistive ROM, manual stretch, or manual therapy. Examples for use of code: A patient has had rotator cuff repair. When treatment incorporates functional motion of reaching to increase range of motion and strength, 97530 should be used. A patient has a herniated disc. When treatment incorporates instruction in body mechanics and positioning and simulated activities to improve functional performance, 97530 should be used.</u>
97537	<u>Community/work</u>	<u>Community/work reintegration training includes jobsite analysis.</u>
97545	<u>Work hardening/conditioning</u>	<u>Work hardening/conditioning units are for the initial two hours each visit. Codes 97545 and 97546 refer to services provided within a work hardening or work conditioning program described in part part 5221.6500, subpart 2, item D.</u>
97546	<u>Work hardening/conditioning</u>	<u>Work hardening/conditioning additional units are for each additional hour each visit. Refers to time beyond initial two hours of work conditioning or work hardening.</u>

D. Additional specific instructions and examples for other physical medicine activities.

<u>CPT Code</u>	<u>CPT Description</u>	<u>Specific Instructions and Examples</u>
97750	<u>Physical performance</u>	<u>Physical performance test or measurement includes isokinetic strength testing, comprehensive muscle strength or joint range of motion testing, or functional capacity evaluations.</u>

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Proposed Rules

5221.4051 FEE ADJUSTMENTS FOR PHYSICAL MEDICINE AND REHABILITATION SERVICES.

Maximum fees for the physical medicine and rehabilitation modalities in the following list are determined according to the following payment schedule when more than one modality on the list is provided to the same patient on the same day: 100 percent of the fee calculated according to the formula in part 5221.4020 for the ~~most expensive procedure~~ modality with the highest RVU and 75 percent of the fee calculated according to the formula in part 5221.4020 for each additional ~~procedure~~ modality. All modalities after the first, ~~most expensive~~ modality with the highest RVU shall be coded by adding modifier 51 to the applicable procedure code.

97010	Hot or cold packs therapy
97012	Mechanical traction therapy
97014	Electric stimulation therapy
97016	Vasopneumatic device therapy
97018	Paraffin bath therapy
97020	Microwave therapy
97022	Whirlpool therapy
97024	Diathermy treatment
97026	Infrared therapy
97028	Ultraviolet therapy
97032	Electrical stimulation (manual)
97033	Iontophoresis <u>Electric current</u>
97034	Contrast baths <u>bath therapy</u>
97035	Ultrasound <u>therapy</u>
97036	Hydrotherapy
97039	<u>Physical Unlisted therapy treatment service</u>
97113	Aquatic therapy with exercises
97122	Manual traction therapy
97124	Massage therapy
97139	<u>Physical medicine procedure</u>

5221.4060 CHIROPRACTIC PROCEDURE CODES.

Subpart 1. **Key to abbreviations and terms.** For descriptions of columns, abbreviations, and terms, see part 5221.4020, subpart 2.

A. Column 1 in subpart 2a is labeled "CPT/HCPCS procedure code." This is the specific code intended to identify the health care service described in column 3.

B. Column 2 in subpart 2a is labeled "CPT/HCPCS description." This is a short narrative description of the procedure code. Complete descriptions of included chiropractic services appear either in the CPT or HCPCS manual in effect on the date the service was rendered or in subpart 3.

C. Column 3 in subpart 2a is labeled "total RVU." These are the total relative value units for the service.

Subp. 2a. [See repealer.]

Subp. 2b. List of chiropractic procedure codes.

(all new material)

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
A. Procedure code numbers 72010 to 73610 relate to radiology procedure codes.											
72010	A	X-ray exam of spine		0.86	0.86	XXX	0	0	0	0	0
72010	26	A X-ray exam of spine		0.33	0.33	XXX	0	0	0	0	0
72010	TC	A X-ray exam of spine		0.53	0.53	XXX	0	0	0	0	0
72020	A	X-ray exam of spine		0.33	0.33	XXX	0	0	0	0	0
72020	26	A X-ray exam of spine		0.11	0.11	XXX	0	0	0	0	0
72020	TC	A X-ray exam of spine		0.22	0.22	XXX	0	0	0	0	0
72040	A	X-ray exam of neck		0.47	0.47	XXX	0	0	0	0	0
72040	26	A X-ray exam of neck		0.16	0.16	XXX	0	0	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
72040	TC	A	X-ray exam of neck	0.31	0.31	XXX	0	0	0	0	0
72050		A	X-ray exam of neck	0.69	0.69	XXX	0	0	0	0	0
72050	26	A	X-ray exam of neck	0.23	0.23	XXX	0	0	0	0	0
72050	TC	A	X-ray exam of neck	0.46	0.46	XXX	0	0	0	0	0
72052		A	X-ray exam of neck	0.86	0.86	XXX	0	0	0	0	0
72052	26	A	X-ray exam of neck	0.27	0.27	XXX	0	0	0	0	0
72052	TC	A	X-ray exam of neck	0.59	0.59	XXX	0	0	0	0	0
72070		A	X-ray exam of thoracic	0.50	0.50	XXX	0	0	0	0	0
72070	26	A	X-ray exam of thoracic	0.16	0.16	XXX	0	0	0	0	0
72070	TC	A	X-ray exam of thoracic	0.34	0.34	XXX	0	0	0	0	0
72074		A	X-ray exam of thoracic	0.64	0.64	XXX	0	0	0	0	0
72074	26	A	X-ray exam of thoracic	0.16	0.16	XXX	0	0	0	0	0
72074	TC	A	X-ray exam of thoracic	0.47	0.47	XXX	0	0	0	0	0
72080		A	X-ray exam of thoracic	0.51	0.51	XXX	0	0	0	0	0
72080	26	A	X-ray exam of thoracic	0.16	0.16	XXX	0	0	0	0	0
72080	TC	A	X-ray exam of thoracic	0.35	0.35	XXX	0	0	0	0	0
72090		A	X-ray exam of thoracic	0.56	0.56	XXX	0	0	0	0	0
72090	26	A	X-ray exam of thoracic	0.21	0.21	XXX	0	0	0	0	0
72090	TC	A	X-ray exam of thoracic	0.35	0.35	XXX	0	0	0	0	0
72100		A	X-ray exam of lumbosacral	0.51	0.51	XXX	0	0	0	0	0
72100	26	A	X-ray exam of lumbosacral	0.16	0.16	XXX	0	0	0	0	0
72100	TC	A	X-ray exam of lumbosacral	0.35	0.35	XXX	0	0	0	0	0
72110		A	X-ray exam of lumbosacral	0.70	0.70	XXX	0	0	0	0	0
72110	26	A	X-ray exam of lumbosacral	0.23	0.23	XXX	0	0	0	0	0
72110	TC	A	X-ray exam of lumbosacral	0.47	0.47	XXX	0	0	0	0	0
72114		A	X-ray exam of lumbosacral	0.88	0.88	XXX	0	0	0	0	0
72114	26	A	X-ray exam of lumbosacral	0.27	0.27	XXX	0	0	0	0	0
72114	TC	A	X-ray exam of lumbosacral	0.61	0.61	XXX	0	0	0	0	0
72120		A	X-ray exam of lumbosacral	0.63	0.63	XXX	0	0	0	0	0
72120	26	A	X-ray exam of lumbosacral	0.16	0.16	XXX	0	0	0	0	0
72120	TC	A	X-ray exam of lumbosacral	0.46	0.46	XXX	0	0	0	0	0
72170		A	X-ray exam of pelvis	0.39	0.39	XXX	0	0	0	0	0
72170	26	A	X-ray exam of pelvis	0.12	0.12	XXX	0	0	0	0	0
72170	TC	A	X-ray exam of pelvis	0.27	0.27	XXX	0	0	0	0	0
72190		A	X-ray exam of pelvis	0.50	0.50	XXX	0	0	0	0	0
72190	26	A	X-ray exam of pelvis	0.16	0.16	XXX	0	0	0	0	0
72190	TC	A	X-ray exam of pelvis	0.35	0.35	XXX	0	0	0	0	0
73020		A	X-ray exam of shoulder	0.36	0.36	XXX	0	3	0	0	0
73020	26	A	X-ray exam of shoulder	0.11	0.11	XXX	0	3	0	0	0
73020	TC	A	X-ray exam of shoulder	0.24	0.24	XXX	0	3	0	0	0
73030		A	X-ray exam of shoulder	0.43	0.43	XXX	0	3	0	0	0
73030	26	A	X-ray exam of shoulder	0.13	0.13	XXX	0	3	0	0	0
73030	TC	A	X-ray exam of shoulder	0.29	0.29	XXX	0	3	0	0	0
73070		A	X-ray exam of elbow	0.38	0.38	XXX	0	3	0	0	0
73070	26	A	X-ray exam of elbow	0.11	0.11	XXX	0	3	0	0	0
73070	TC	A	X-ray exam of elbow	0.27	0.27	XXX	0	3	0	0	0
73100		A	X-ray exam of wrist	0.37	0.37	XXX	0	3	0	0	0
73100	26	A	X-ray exam of wrist	0.12	0.12	XXX	0	3	0	0	0

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
73100	TC	A	X-ray exam of wrist	0.25	0.25	XXX	0	3	0	0	0
73500		A	X-ray exam of hip	0.37	0.37	XXX	0	0	0	0	0
73500	26	A	X-ray exam of hip	0.13	0.13	XXX	0	0	0	0	0
73500	TC	A	X-ray exam of hip	0.24	0.24	XXX	0	0	0	0	0
73562		A	X-ray exam of knee	0.43	0.43	XXX	0	3	0	0	0
73562	26	A	X-ray exam of knee	0.14	0.14	XXX	0	3	0	0	0
73562	TC	A	X-ray exam of knee	0.29	0.29	XXX	0	3	0	0	0
73610		A	X-ray exam of ankle	0.40	0.40	XXX	0	3	0	0	0
73610	26	A	X-ray exam of ankle	0.13	0.13	XXX	0	3	0	0	0
73610	TC	A	X-ray exam of ankle	0.28	0.28	XXX	0	3	0	0	0

B. Procedure code numbers 81000 and 81002 relate to pathology and laboratory procedure codes.

81000		X	Urinalysis, nonautomated	0.12	0.12	XXX	9	9	9	9	9
81002		X	Urinalysis, nonautomated	0.07	0.07	XXX	9	9	9	9	9

C. Procedure code numbers 97010 to 97799 relate to physical medicine and rehabilitation procedure codes.

97010		B	Hot or cold packs	0.00	0.00	XXX	9	9	9	9	9
97012		A	Mechanical traction	0.23	0.23	XXX	4	0	0	0	0
97014		A	Electric stimulation	0.20	0.20	XXX	4	0	0	0	0
97016		A	Vasopneumatic devices	0.23	0.23	XXX	4	0	0	0	0
97018		A	Paraffin bath therapy	0.16	0.16	XXX	4	0	0	0	0
97020		A	Microwave therapy	0.14	0.14	XXX	4	0	0	0	0
97022		A	Whirlpool therapy	0.19	0.19	XXX	4	0	0	0	0
97024		A	Diathermy treatment	0.15	0.15	XXX	4	0	0	0	0
97026		A	Infrared therapy	0.13	0.13	XXX	4	0	0	0	0
97028		A	Ultraviolet therapy	0.14	0.14	XXX	4	0	0	0	0
97032		A	Electrical stimulation	0.20	0.20	XXX	4	0	0	0	0
97033		A	Electric current	0.21	0.21	XXX	4	0	0	0	0
97034		A	Contrast bath therapy	0.16	0.16	XXX	4	0	0	0	0
97035		A	Ultrasound therapy	0.16	0.16	XXX	4	0	0	0	0
97036		A	Hydrotherapy	0.25	0.25	XXX	4	0	0	0	0
97039		A	Unlisted therapy service	0.23	0.23	XXX	4	0	0	0	0
97110		A	Therapeutic exercises	0.29	0.29	XXX	0	0	0	0	0
97112		A	Neuromuscular reeducation	0.29	0.29	XXX	0	0	0	0	0
97113		A	Aquatic therapy	0.33	0.33	XXX	0	0	0	0	0
97116		A	Gait training therapy	0.26	0.26	XXX	0	0	0	0	0
97124		A	Massage therapy	0.23	0.23	XXX	0	0	0	0	0
97139		A	Unlisted phys. med. service	0.19	0.19	XXX	0	0	0	0	0
97140		A	Manual therapy	0.33	0.26	XXX	0	0	0	0	0
97150		A	Group therapy procedure	0.24	0.24	XXX	0	0	0	0	0
97504		A	Orthotic training	0.30	0.30	XXX	0	0	0	0	0
97520		A	Prosthetic training	0.31	0.31	XXX	0	0	0	0	0
97530		A	Therapeutic activities	0.31	0.31	XXX	0	0	0	0	0
97535		A	Self care/home management	0.32	0.32	XXX	0	0	0	0	0
97537		A	Community/work training	0.32	0.32	XXX	0	0	0	0	0
97542		A	Wheelchair management	0.22	0.22	XXX	0	0	0	0	0
97545		R	Work hardening/conditioning	0.00	0.00	XXX	0	0	0	0	0
97546		R	Work hardening/conditioning	0.00	0.00	XXX	0	0	0	0	0
97703		A	Prosthetic checkout	0.23	0.23	XXX	0	0	0	0	0
97750		A	Physical performance test	0.36	0.36	XXX	0	0	0	0	0
97770		A	Cognitive skill	0.37	0.37	XXX	0	0	0	0	0
97780		N	Acupuncture, no stimulus	0.00	0.00	XXX	9	9	9	9	9

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Proposed Rules

(1)*	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
97781		N	Acupuncture with stimulus	0.00	0.00	XXX	9	9	9	9	9
97799		C	Physical medicine	0.00	0.00	XXX	0	0	0	0	0

D. Procedure code numbers 98940 to 98943 relate to chiropractic manipulative treatment codes.

98940	A	Chiropractic manipulation	0.38	0.30	XXX	0	0	0	0	0
98941	A	Chiropractic manipulation	0.47	0.40	XXX	0	0	0	0	0
98942	A	Chiropractic manipulation	0.58	0.51	XXX	0	0	0	0	0
98943	A	Chiropractic manipulation	0.35	0.35	XXX	4	0	0	0	0

E. Procedure code numbers 99201 to 99213 relate to evaluation and management services codes.

99201	A	Office/outpatient	0.45	0.33	XXX	0	0	0	0	0
99202	A	Office/outpatient	0.71	0.56	XXX	0	0	0	0	0
99203	A	Office/outpatient	0.98	0.81	XXX	0	0	0	0	0
99211	A	Office/outpatient	0.20	0.14	XXX	0	0	0	0	0
99212	A	Office/outpatient	0.39	0.30	XXX	0	0	0	0	0
99213	A	Office/outpatient	0.56	0.44	XXX	0	0	0	0	0

F. Procedure code number 99199 relates to miscellaneous procedures.

99199	C	Special service	0.00	0.00	XXX	0	0	0	0	0
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Subp. 3. **Select chiropractic procedure code descriptions, instructions, and examples.** The following instructions and examples are in addition to CPT code descriptions found in the CPT manual. Additional instructions include both general instructions for a group of codes as well as specific instructions for an individual specific code.

- ~~X9198 Special chiropractic report. Review of medical and vocational data and preparation of a report to clarify the patient's status, which report includes more information than that contained in the usual chiropractic communication or standard reporting form.~~
- ~~X9199 Unlisted special chiropractic service. Chiropractic services specifically related to planning and coordinating the employee's return to work, including but not limited to office visits, telephone calls, or conferences with the employee, the employer, the insurer, the qualified rehabilitation consultant, and/or other health care providers.~~
- ~~X9557 Conference. Conference by a chiropractor with the patient and/or the patient's representative and/or additional health care providers to coordinate activities of patient care; up to 25 minutes.~~

A. Supervised modalities.

(1) Additional general instructions for supervised modality codes 97010 to 97028. All supervised modalities refer to one or more areas. For example, if diathermy is applied to the cervical and low back on the same day, the charge would be one unit. If the diathermy and electrical stimulation are applied to the low back, the charge would be one unit of diathermy and one unit of electrical stimulation.

(2) Additional specific instructions for supervised modalities.

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Proposed Rules

<u>CPT Code</u>	<u>CPT Description</u>	<u>Specific Instructions and Examples</u>
<u>97014</u>	<u>Electrical stimulation</u>	<u>Unattended electrical stimulation includes muscle stimulation, low volt therapy, sine wave therapy, stimulation of peripheral nerve, galvanic, and unattended clinical application of TENS. RVU includes the use of disposable or reusable electrodes.</u>

B. Constant attendance modalities.

(1) Additional general instructions for constant attendance modality codes 97032 to 97039. The application of a constant attendance modality is to one or more areas. Where the CPT manual specifies a time frame, count only the actual treatment time, and do not count setup, preparation of the area, cleanup, or documentation time. For example, with ultrasound treatment for two areas, the shoulder and elbow, if total treatment time for both areas is less than 15 minutes, one unit of ultrasound is appropriate. All units billed require supporting documentation.

(2) Additional specific instructions for constant attendance modalities.

<u>CPT Code</u>	<u>CPT Description</u>	<u>Specific Instructions and Examples</u>
<u>97032</u>	<u>Electrical stimulation</u>	<u>Electrical stimulation (manual) includes attended clinical application of TENS. RVU includes the use of disposable or reusable electrodes.</u>
<u>97033</u>	<u>Electric current</u>	<u>RVU includes the use of disposable or reusable electrodes.</u>

C. Additional specific instructions for therapeutic procedure codes 97110 to 97546.

<u>CPT Code</u>	<u>CPT Description</u>	<u>Specific Instructions and Examples</u>
<u>97110</u>	<u>Therapeutic exercises</u>	<u>Examples include, but are not limited to, any type of range of motion, stretching, or strengthening exercises; e.g., stabilization and closed kinetic chain exercises, passive range of motion, active and assistive range of motion, progressive resistive exercises, prolonged stretch, isokinetic, isotonic, or isometric strengthening exercises.</u>
<u>97112</u>	<u>Neuromuscular reeducation</u>	<u>Examples include, but are not limited to, facilitation techniques, NDT, Rood, Brunnstrom, PNF, and Feldenkrais.</u>
<u>97113</u>	<u>Aquatic therapy</u>	<u>This code applies to any water-based exercise program such as Hubbard Tank or pools.</u>
<u>97140</u>	<u>Manual therapy</u>	<u>In addition to the services included in the CPT manual incorporated by reference in part 5221.0405, item D, this code also includes, but is not limited</u>

to: myofascial release, joint mobilization and manipulation, manual lymphatic drainage, manual traction, soft tissue mobilization and manipulation, trigger point therapy, acupressure, muscle stimulation - manual (nonelectrical), and transverse friction massage. This code is not paid when reported with any of the osteopathic manipulative treatment (OMT) (98925-98929) or chiropractic manipulative treatment (CMT) (98940-98943) codes on the same region(s)/body part on the same day. This code may be paid when reported with CMT or OMT codes only if used on a different region(s)/body part on the same day and must be accompanied by CPT modifier 59 which identifies a distinct procedural service.

97150 Group therapeutic

Therapeutic procedure(s) for a group is used when two or more patients are present for the same type of service such as instruction in body mechanics training, or group exercises when participants are doing same type exercises, etc. There is no time definition for this code. Providers may charge only one unit, regardless of size of group, number of areas treated, or length of time involved.

97504 Orthotic training

This code applies to fabrication, instruction in use, fitting, and care and precautions of the orthotic.

97530 Therapeutic activities

This code is used for treatment promoting functional use of a muscle, muscle group, or body part. This code is not to be used for PROM, active assistive ROM, manual stretch, or manual therapy. Examples for use of code: A patient has had rotator cuff repair. When treatment incorporates functional motion of reaching to increase range of motion and strength, 97530 should be used. A patient has a herniated disc. When treatment incorporates instruction in body mechanics and positioning and simulated activities to improve

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Proposed Rules

		<u>functional performance, 97530 should used.</u>
<u>97537</u>	<u>Community/work</u>	<u>Community/work reintegration training includes jobsite analysis.</u>
<u>97545</u>	<u>Work hardening/conditioning</u>	<u>Work hardening/conditioning units are for the initial two hours each visit. Codes 97545 and 97546 refer to services provided within a work hardening or work conditioning program described in part 5221.6500, subpart 2, item D.</u>
<u>97546</u>	<u>Work hardening/conditioning</u>	<u>Work hardening/conditioning additional units are for each additional hour each visit. Refers to time beyond initial two hours of work conditioning or work hardening.</u>

D. Additional specific instructions and examples for other physical medicine activities.

CPT

<u>Code</u>	<u>CPT Description</u>	<u>Specific Instructions and Examples</u>
<u>97750</u>	<u>Physical performance</u>	<u>Physical performance test or measurement includes isokinetic strength testing, comprehensive muscle strength or joint range of motion testing, or functional capacity evaluations.</u>

Subp. 4. Evaluation and management services coding and reporting.

A. Evaluation and management services may be coded and paid separately from the chiropractic manipulative therapy services described by CPT codes 98940 to 98943 only if the condition requires a significant, separately identifiable evaluation and management service above and beyond the usual preservice, intraservice, and postservice work associated with the manipulative procedure, as described in subitems (1) to (3). When performing the evaluation and management service on the same day as a spinal or extraspinal manipulation, the evaluation and management code must be coded using the CPT modifier 25.

(1) Preservice work for CPT codes 98940 to 98943 includes the following:

- (a) documentation and chart review;
- (b) imaging review;
- (c) test interpretation and care planning; and

(d) premanipulation procedures which include a brief evaluation of the current problem, including components of a review of symptoms, and a focused exam of the current problem and related areas.

(2) Intraservice work for CPT codes 98940 to 98943 includes the following:

- (a) manipulation; and
- (b) postmanipulation assessment and procedures.

(3) Postservice work for CPT codes 98940 to 98943 includes the following:

(a) chart documentation, including documentation of appropriate subjective and objective assessments as well as the procedural components of patient visit; and

(b) if necessary, arrange for further services and coordination of patient care. This may include telephone or written communications with other health care providers, family members, employers, medical case manager for a managed care organization certified under *Minnesota Statutes*, section 176.1351, or insurers regarding the coordination of patient care or consultation services.

B. Circumstances in which a separate evaluation and management service is appropriate under item A include the following:

- (1) if there is a new injury;
- (2) if there is an exacerbation of a previous injury; or
- (3) if there is an unanticipated change in condition.

C. A reexamination in the following circumstances may be coded and paid as a separate evaluation and management service if the reexamination is above and beyond the usual preservice, intraservice, and postservice work associated with the manipulative procedure as described in item A, subitems (1) to (3):

- (1) in preparation for a requested report other than a report of work ability;
- (2) if requested to render an opinion about a job offer;
- (3) when a job search is initiated;
- (4) to review the patient's condition after a period of treatment by another health care provider; or
- (5) to evaluate the patient's condition in anticipation of a change in the treatment plan.

5221.4061 FEE ADJUSTMENTS FOR CHIROPRACTIC SERVICES.

Subpart 1. Multiple modalities. Maximum fees for the chiropractic modalities in the following list are determined according to the following payment schedule when more than one modality on the list is provided to the same patient on the same day: 100 percent of the fee calculated according to the formula in part 5221.4020 for the ~~most expensive procedure~~ modality with the highest relative value and 75 percent of the fee calculated according to the formula in part 5221.4020 for each additional ~~procedure or~~ modality. All modalities after the first, ~~most expensive~~ modality with the highest relative value, shall be coded by adding modifier 51 to the applicable ~~procedure~~ modality code.

X2201	Application of hot pack
X2202	Application of cold pack
X2205	Diathermy
X2210	Electrical stimulation
X2212	Intersegmental motorized mobilization
X2214	Muscle stimulation, manual
X2220	Ultrasound therapy
X2225	Traction
X2230	Acupressure, manual or mechanical
X2245	Infrared - heat lamp
X2250	Ultraviolet
X2255	Trigger point therapy
<u>97012</u>	<u>Mechanical traction therapy</u>
<u>97014</u>	<u>Electrical stimulation therapy</u>
<u>97016</u>	<u>Vasopneumatic device therapy</u>
<u>97018</u>	<u>Paraffin bath therapy</u>
<u>97020</u>	<u>Microwave therapy</u>
<u>97022</u>	<u>Whirlpool therapy</u>
<u>97024</u>	<u>Diathermy treatment</u>
<u>97026</u>	<u>Infrared therapy</u>
<u>97028</u>	<u>Ultraviolet therapy</u>
<u>97032</u>	<u>Electrical stimulation</u>
<u>97033</u>	<u>Electric current</u>
<u>97034</u>	<u>Contrast bath therapy</u>
<u>97035</u>	<u>Ultrasound therapy</u>
<u>97036</u>	<u>Hydro therapy</u>
<u>97039</u>	<u>Unlisted therapy service</u>

KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." **ADOPTED RULES SECTION** — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

Proposed Rules

Subp. 2. **Extraspinal code.** If the extraspinal code (98943) is used in conjunction with any of the spinal chiropractic manipulative treatment (CMT) codes (98940 to 98942) on the same day, the extraspinal code must be coded with CPT modifier 51. The CPT modifier 51 reduces the RVU of 98943 when used in conjunction with any of the CMT codes (98940 to 98942) on the same day by 50 percent.

5221.4062 PROFESSIONAL/TECHNICAL COMPONENTS FOR CHIROPRACTIC SERVICES.

Subpart 1. **General.** Fees for certain services which are a combination of professional and technical care shall be adjusted when the professional and technical components of the service are performed by different individuals or entities. The professional component of the service represents the care rendered by the health care provider, such as examination of the patient, performance and supervision of the procedure, and consultation with other providers. The technical component of the service represents all other costs associated with the service, such as the cost of equipment, the salary of technicians, and supplies normally used in delivering the service. Services subject to this distinction are identified in part 5221.4060, subpart 2b, by modifiers appearing in column 2 next to the service codes. Modifier TC indicates relative RVUs for the technical component of the service and modifier 26 indicates RVUs for the professional component of the service. The maximum fee for either component of the service is calculated using the RVUs for the component provided and the formula in part 5221.4020.

Subp. 2. **Separate billing for both components.** If the professional component is split from the technical component and both are billed separately, the total cost for both cannot exceed the maximum fee allowed for the complete service, unless there are extenuating circumstances and there is documented justification for the additional cost.

Subp. 3. **One billing for both components.** If the same health care provider renders both the professional and technical components of the service, the maximum fee is calculated for the complete service by using the RVUs corresponding to the service code listed without a modifier in part 5221.4060, subpart 2b, and the formula in part 5221.4020.

5221.4070 PHARMACY.

[For text of subs 1 and 2, see M.R.]

Subp. 3. Maximum fee.

A. The employer's liability for compensable prescription medications provided for outpatient use by a large hospital, clinic, or an independent pharmacy shall be limited to the sum of the average wholesale price (AWP) of the medication on the date the medication was dispensed, and a professional dispensing fee of \$5.14 per medication.

B. The employer's liability for compensable nonprescription medications shall be the lower of the actual retail price of the medication or the sum of the average wholesale price (AWP) of the medication, on the date the medication was dispensed, and a professional dispensing fee of \$5.14 per medication.

C. The employer's liability for compensable prescription medications provided for inpatient use, including an inpatient who is being discharged, by a large hospital is limited to 85 percent of the usual and customary charge according to part 5221.0500, subpart 2, item D.

D. The employer's liability for compensable prescription medications provided by a small hospital is paid at 100 percent of the usual and customary fee according to part 5221.0500, subpart 2, item C.

REPEALER. Minnesota Rules, parts 5221.4030, subpart 2a; 5221.4033, subpart 2a; 5221.4034; 5221.4040, subpart 2a; 5221.4050, subpart 2a; and 5221.4060, subpart 2a, are repealed for services provided on or after the effective date of these rules.

EFFECTIVE DATE. The amendments to Minnesota Rules, parts 5221.4030; 5221.4032; 5221.4033; 5221.4040; 5221.4041; 5221.4050; 5221.4051; 5221.4060; 5221.4061; and 5221.4070 are effective for services provided on or after the effective date of these rules.

Minnesota Rules, parts 5221.4035 and 5221.4062 are effective for services provided on or after the effective date of these rules.

Adopted Rules

A rule becomes effective after the requirements of *Minnesota Statutes* §§14.05-14.28 have been met and five working days after the rule is published in the *State Register*, unless a later date is required by statutes or specified in the rule.

If an adopted rule is identical to its proposed form as previously published, a notice of adoption and a citation to its previous *State Register* publication will be printed.

If an adopted rule differs from its proposed form, language which has been deleted will be printed with strikeouts and new language will be underlined. The rule's previous *State Register* publication will be cited.

Exempt Rules

An exempt rule adopted under *Minnesota Statutes* §§ 14.386 or 14.388 is effective upon its publication in the *State Register*.

Emergency Expedited Rules

Provisions for the Commissioner of Natural Resources to adopt emergency expedited Game and Fish Rules are specified in *Minnesota Statutes* §§ 84.027. The commissioner may adopt emergency expedited rules when conditions exist that do not allow the Commissioner to comply with the requirements for emergency rules. The Commissioner must submit the rule to the attorney general for review and must publish a notice of adoption that includes a copy of the rule and the emergency conditions. Emergency expedited rules are effective upon publication in the *State Register*, and may be effective up to seven days before publication under certain emergency conditions. Emergency expedited rules are effective for the period stated or up to 18 months.

Department of Health

Adopted Permanent Rules Relating to the Merit System

The rules proposed and published at *State Register*, Volume 24, Number 45, pages 1611-1614, May 8, 2000 (24 SR 1611), are adopted as proposed.

Department of Health

Adopted Permanent Rules Relating to Vital Statistics

The rules proposed and published at *State Register*, Volume 24, Number 40, pages 1379-1398, April 3, 2000 (24 SR 1379), are adopted with the following modifications:

4601.0100 DEFINITIONS.

Subp. 15. **Induced termination of pregnancy.** "Induced termination of pregnancy" means the purposeful interruption of an intrauterine pregnancy, with the intention other than to produce a live-born infant, that does not result in a live birth. This definition excludes management of prolonged retention of products of conception following fetal death.

Department of Public Safety

Adopted Permanent Rules Relating to the Merit System

The rules proposed and published at *State Register*, Volume 24, Number 45, pages 1620-1622, May 8, 2000 (24 SR 1620), are adopted as proposed.

KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." **ADOPTED RULES SECTION** — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

Executive Orders

The governor has the authority to issue written statements of orders, called Executive Orders, as well as Emergency Executive Orders. The governor's authority is specified in the *Constitution of the State of Minnesota*, Article V, and in *Minnesota Statutes* 4.035. Emergency Executive Orders, for protection from an imminent threat to health and safety, become effective immediately, are filed with the secretary of state, and published in the *State Register* as soon as possible after they are issued. Other Executive Orders become effective 15 days after publication in the *State Register* and filing with the secretary of state. Unless otherwise specified, an executive order expires 90 days after the date the governor who issued the order vacates office.

Office of the Governor

Emergency Executive Order # 00-6: Declaring a State of Emergency in the State of Minnesota

I, **JESSE VENTURA, GOVERNOR OF THE STATE OF MINNESOTA**, by virtue of the authority vested in me by the Constitution and the applicable statutes, do hereby issue this Emergency Executive Order:

WHEREAS, during the period from July 25, 2000, and continuing, severe thunderstorms accompanied by tornadoes, torrential rain, hail and lightning devastated southwestern Minnesota;

WHEREAS, these events have inflicted widespread and considerable damage to the public infrastructure as well as to homes, farms and businesses; and

WHEREAS, as a result, there is a threat to public safety for citizens in the county of Yellow Medicine, and

WHEREAS, the resources of local government are inadequate to handle the crisis.

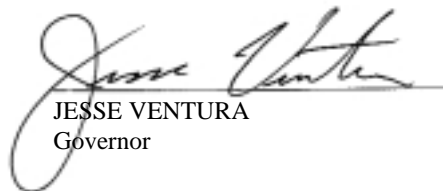
NOW, THEREFORE, I hereby order that:

A State of Emergency exists in the State of Minnesota and do:

- Direct the Division of Emergency Management to continue the activation of the State Emergency Operations Plan, and, in conjunction with the Federal Emergency Management Agency and other state and federal agencies, determine the need for supplementary disaster aid and coordinate the provision of any such assistance as necessary under existing state and federal authority;
- Direct all state agencies to provide assistance that is necessary to help local units of government respond to and recover from this emergency.

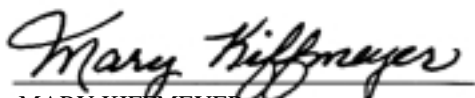
Pursuant to *Minnesota Statutes* 1998, section 4.035, subd. 2, this Order is effective immediately and shall remain in effect until rescinded by proper authority or it expires in accordance with *Minnesota Statutes* 1998, section 4.035, subd. 3.

IN TESTIMONY WHEREOF, I have set my hand this twenty-sixth day of July, 2000.



JESSE VENTURA
Governor

Filed According to Law:



MARY KIFFMEYER
Secretary of State

Office of the Governor

Emergency Executive Order # 00-7: Providing for Assistance to the Yellow Medicine County Sheriff

I, **JESSE VENTURA, GOVERNOR OF THE STATE OF MINNESOTA**, by virtue of the authority vested in me by the Constitution and the applicable statutes, do hereby issue this Executive Order:

WHEREAS, on the evening of July 25, 2000, a tornado ripped through the city of Granite Falls causing one death, at least 15 injuries and severe damage to homes and businesses; and

WHEREAS, the tornado, accompanied by strong winds and rain, downed thousands of trees and ravaged the city's west end, causing evacuations, power outages and debris-blocked roads; and

WHEREAS, the city and county do not have adequate local resources for providing security and traffic control and clearing debris; and

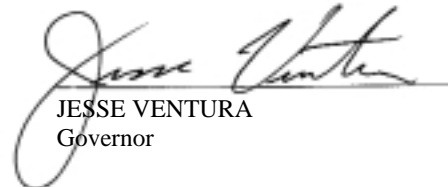
WHEREAS, the Yellow Medicine County sheriff requests assistance in providing security, traffic control and clearing debris;

NOW, THEREFORE, I hereby order that:

1. The Adjutant General of Minnesota order to state active duty on or about July 25, 2000, in the service of the State, such personnel and equipment of the military forces of the State as required, and for such period of time as necessary to assist with security and traffic control in the damaged area and to support debris removal.
2. The Adjutant General is authorized to purchase, lease or contract goods or services necessary to accomplish the mission.
3. The cost of subsistence, transportation, fuel, pay and allowances of said individuals shall be defrayed from the general fund of the State, as provided for in *Minnesota Statutes* 1998, Sections 192.49, subd. 1; 192.51 and 192.52.

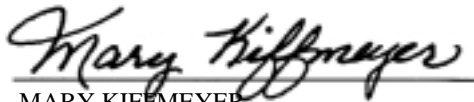
Pursuant to *Minnesota Statutes* 1998, Section 4.035, subd. 2, this Order is effective immediately and shall remain in effect until such date as elements of the military forces of the State are no longer required.

IN TESTIMONY WHEREOF, I have set my hand this twenty-sixth day of July, 2000.



JESSE VENTURA
Governor

Filed According to Law:



MARY KIFFMEYER
Secretary of State

Appointments

Minnesota Statutes, Section 15.06, Subd. 5 requires a notice of the designation of a commissioner or acting commissioner, or the assumption of office by a temporary commissioner, shall be filed with the president of the senate and the speaker of the house with a copy delivered to the secretary of state and published in the next available edition of the *State Register*.

Department of Commerce

Notice of Appointment of Commissioner

NOTICE IS HEREBY GIVEN, pursuant to *Minnesota Statutes*, Section 15.06, Subd. 5, that Governor Jesse Ventura appointed James Bernstein to the office of commissioner of the Minnesota Department of Commerce effective July 31, 2000. He succeeds Steve Minn, appointed commissioner effective March 9, 1999. This appointment carries with it all rights, powers, duties, and emoluments granted by law and pertaining to this position until this appointment is superseded or annulled.

The laws and rules governing the Department of Commerce are:

- *Minnesota Statutes*, Chapters 45 (department); 45-56, 59A, 168.66, 332 (banking); 45, 60-79 (insurance); 45, 80, 306, 332, 501 (securities); 82-83 (real estate); 345 (unclaimed property)
- *Minnesota Rules* 2600-2899

Commissioner Bernstein is a resident of Ramsey County, Congressional District Four. He can be reached at the Minnesota Department of Commerce, 133 East Seventh Street, St. Paul, MN 55101. **Telephone:** (651) 296-5769. **Website:** www.commerce.state.mn.us

Commissioners' Orders

Various agency commissioners are authorized to issue "commissioner's orders" on specified activities governed by their agency's enabling laws. See the *Minnesota Statutes* governing each agency to determine the specific applicable statutes. Commissioners' orders are approved by assistant attorneys general as to form and execution and published in the *State Register*. These commissioners' orders are compiled in the year-end subject matter index for each volume of the *State Register*.

Minnesota Pollution Control Agency

Commissioner's Order: Findings of Fact, Conclusions, and Order in the Matter of the Petition for Annexation of Specified Area Adjacent to the Villard Area Lakes Sanitary District

The Villard Area Lakes Sanitary District and St. Louis County petitioned the Minnesota Pollution Control Agency (MPCA) under *Minnesota Statutes* § 115.21 requesting the annexation of specified area adjacent to the Villard Area Lakes Sanitary District. The Chair of the Villard Area Lakes Sanitary District Board of Managers and the Chair of the Glenwood Township Board of Supervisors were authorized to sign the petition pursuant to resolutions passed by their respective bodies of government.

The MPCA published the Notice of Intent to Approve the Annexation of Specified Areas Adjacent to the Villard Area Lakes Sanitary District in the *State Register* on Tuesday, May 30, 2000. The MPCA also notified all property owners in the affected area by mail of the notification published in the *State Register*.

The MPCA, after having considered the petition, having published notice of the intent to approve the annexation to the sanitary district in the *State Register*, having notified the affected landowners of the intent to approve the annexation, having reviewed the comment letters received during the comment period, having not received twenty-five (25) or more hearing requests requisite for a hearing, and being fully advised in this matter, hereby makes the following:

FINDINGS OF FACT

1. The territory of the existing Villard Area Lakes Sanitary District is legally described as:

The Southeast Quarter of the Southwest Quarter, the South Half of the South Half of the Northeast Quarter, and the Southeast Quarter, all in Section 11, Township 126 North, Range 37 West; and

The South Half of the Southwest Quarter of the Northwest Quarter, and the Southwest Quarter, all in Section 12, Township 126 North, Range 37 West; and

The West Half, and the South Half of the Southeast Quarter, all in Section 13, Township 126 North, Range 37 West; and

The East Half, the Southwest Quarter, the South Half of the Northwest Quarter, and the Northeast Quarter of the Northwest Quarter, all in Section 14, Township 126 North, Range 37 West; and

The East Half of the Southeast Quarter of the Southeast Quarter of Section 15, Township 126 North, Range 37 West; and

The East Half of the East Half of the Northeast Quarter, and the East Half of the Northeast Quarter of the Southeast Quarter, all in Section 22, Township 126 North, Range 37 West; and

All of Section 23, Township 126 North, Range 37 West; and

The West Half of Section 24, Township 126 North, Range 37 West, and all of the East Half of Section 24, Township 126 North, Range 37 West lying North of the Right of Way to Minnesota Trunk Highway 28; and

All of Section 25, Township 126 North, Range 37 West lying North of the Right of Way of Minnesota Trunk Highway 28; and

All of Section 26, Township 126 North, Range 37 West; and

All of Section 35, Township 126 North, Range 37 West; and

All of the West Half of Section 36, Township 126 North, Range 37 West, lying North of the Right of Way of Minnesota Trunk Highway 28; and

The Southwest Quarter of the Southwest Quarter of Section 18, Township 126 North, Range 36 West; and

The West Half of the Northwest Quarter of Section 19, Township 126 North, Range 36 West.

All contained in Leven Township, Pope County.

2. The territory proposed to be annexed to the Villard Area Lakes Sanitary District is located in Glenwood Township, Pope County, Minnesota, and is legally described as:

Commencing at the Northeast corner of Section 2-125-37, which is the point of beginning of the tract to be described;

Thence South along the section line to the centerline of Minnesota Trunk Highway 28;

Thence Southwesterly along the centerline of Minnesota Trunk Highway 28 to the West line of Section 2;

Thence North along said section line to the Northwest corner of section 2-125-37;

Thence East along the North line of the said section 2-125-37 to the point of beginning.

A map displaying the boundaries of the existing district and the proposed annexation area is available at the MPCA.

3. On October 9, 1999, a public meeting was held at the Villard Community Center to consider the proposed annexation of the territory. Notice of the public meeting was published at least once each week for two weeks in the *Pope County Tribune*, a qualified newspaper published in the area. The Notice was published on September 27, 1999, and October 4, 1999, in the *Pope County Tribune*. The meeting Notice was mailed to all landowners on record within the proposed annexation area.
4. On June 3, 1999, the Villard Area Lakes Sanitary District Board of Managers adopted a resolution authorizing the submission of the petition for annexation to the Villard Area Lakes Sanitary District. The resolution was published in the *Pope County Tribune* on July 12, 1999, and became effective forty (40) days after the date of publication.
5. On July 6, 1999, the Glenwood Township Board of Supervisors adopted a resolution authorizing the Chair of the Board to sign a petition in support of the annexation. The resolution was published in the *Pope County Tribune* on July 12, 1999, and became effective forty (40) days after the date of publication.
6. On December 21, 1999, a petition was filed with the MPCA requesting approval of the annexation of specified areas to the Villard Area Lakes Sanitary District. The Chair of the Villard Area Lakes Sanitary District Board of Managers and the Chair of the Glenwood Township Board of Supervisors signed the petition for annexation of specified territory to the district as authorized by the resolutions. The petition requesting annexation to the Villard Area Lakes Sanitary District has met all the requirements of *Minnesota Statutes* § 115.21, subd. 1.
7. The annexation area is not within twenty-five (25) miles of the boundary of a city of the first class.
8. On May 30, 2000, the MPCA published the Notice of Intent to Approve the Annexation of Specified Areas Adjacent to the Villard Area Lakes Sanitary District in the *State Register* at 24 SR 1758. The Notice was mailed to each of the property owners in the area of the existing district and the annexation area using addresses provided by the county auditor. The public notice period lasted for 30 days and ended on June 28, 2000.

Commissioner's Orders

9. By June 28, 2000, the end of the public notice period, the MPCA had received four (4) written requests for a contested case hearing on the matter. *Minnesota Statutes* § 115.20 subd. 4(b) requires the MPCA to hold a contested case hearing if twenty-five (25) or more written requests are received by the end of the public notice period. During the public notice period, four (4) people requested a contested case hearing, three (3) people expressed opposition, five (5) people expressed support, and four (4) people requested more information.
10. In 1999, the Villard Area Lakes Sanitary District and Widseth Smith Nolting & Associates, Inc. sent out a wastewater survey to residents in Glenwood Township and to those on the west side of Lake Amelia in Leven Township. Of the one hundred fifty-one (151) responses out of a total of one hundred ninety-five (195) surveys that were sent, sixty-one percent (61%) indicated that the area had a need to improve the existing wastewater treatment systems. The survey showed that many lots around the lakes are small. The survey also indicated that twenty-six (26) residents had holding tanks and ninety-four (94) residents have a sand point well. Holding tanks are only allowable if it can be conclusively shown that a standard or alternative system cannot be installed. Sand point wells are susceptible to contamination from sources such as individual sewage treatment systems.
11. According to Pope County Environmental Services, forty-one percent (41%) of the housing units are estimated to not be in compliance with county individual sewage treatment system codes.
12. There is a need throughout the annexation area and the contiguous area of the existing sanitary district for an adequate and efficient means of treating and disposing of domestic sewage. Similar conditions exist in the annexation area as do in the territory of the existing sanitary district. The annexation of the specified area allows the sanitary district to provide continuous wastewater services, which is important for achieving the purposes of *Minnesota Statutes* § 115.19.
13. Annexation of specified territory to the Villard Area Lakes Sanitary District will serve the purpose of promoting the public health and welfare by providing an adequate and efficient system and means of collecting, conveying, pumping, treating, and disposing of domestic sewage within the district.
14. The maintenance of the sanitary district is administratively feasible and will further the public health, safety, and welfare. The district is administered by a five-member governing board who are voters within the sanitary district and who are appointed by the members of the Pope County Board. The Villard Area Lakes Sanitary District has adopted ordinances which adequately and equitably provide a means of collecting, conveying, pumping, treating, and disposing of domestic sewage and garbage and industrial wastes within the district.

CONCLUSIONS

1. The Commissioner of the MPCA has subject matter jurisdiction over the petition and annexation pursuant to *Minnesota Statutes* §§115.18 to 115.37 (1999).
2. The petitioners have substantially complied with all the procedural requirements of *Minnesota Statutes* § 115.20, as well as other substantive and procedural requirements of law and rule. This matter, therefore, is properly before the Commissioner.
3. The conditions described in *Minnesota Statutes* § 115.19 and 115.21 for annexation of territory to a sanitary district do exist within the area identified in the legal description.
4. Any of the foregoing Findings of Fact that might properly be termed Conclusions and Conclusions that might properly be termed Findings are hereby adopted as such.

NOW THEREFORE, the Commissioner hereby makes the following:

ORDER

It is ORDERED that the specified areas adjacent to the Villard Area Lakes Sanitary District, as identified in the legal description in the petition filed with the MPCA and stated herein, be annexed to the Villard Area Lakes Sanitary District.

Dated this 27th day of July, 2000.

Karen A. Studders
Commissioner

Revenue Notices

The Department of Revenue began issuing revenue notices in July of 1991. Revenue notices are statements of policy made by the department that provide interpretation, detail, or supplementary information concerning a particular statute, rule, or departmental practice. The authority to issue revenue notices is found in *Minnesota Statutes* § 270.0604.

Department of Revenue

Revenue Notice # 00-09: Individual Income Tax - Taxation of Qualified State Tuition Programs

Minnesota's income tax treatment of contributions and distributions from a qualified state tuition program under Internal Revenue Code § 529 follows the federal income tax treatment as to who, when, and how much money is includable in taxable income regardless of whether the program is the Minnesota Edvest Program established under *Minnesota Statutes*, section 136A.241 or another state's qualified tuition program. (See *Minnesota Statutes*, section 290.01, subdivision 19).

Further, income is taxable by Minnesota only if the taxpayer reporting the income is a Minnesota resident at the time the income is recognized (*Minnesota Statutes*, section 290.17, subdivisions 1 and 2(e), regardless of where the state program was established).

Jennifer L. Engh
Assistant Commissioner for Tax Policy

Official Notices

Pursuant to *Minnesota Statutes* §§ 14.101, an agency must first solicit comments from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, and within 60 days of the effective date of any new statutory grant of required rulemaking. The *State Register* also publishes other official notices of state agencies and non-state agencies, including notices of meetings and matters of public interest.

Metropolitan Council

Revised Disadvantaged Business Enterprise Program (DBE) and Goal

The Metropolitan Council's revised Disadvantaged Business Enterprise Program (DBE) and goal request for fiscal year 2000 has been approved by the Federal Transportation Administration (FTA), pursuant to part 26 of the *Code of Federal Regulations*, Chapter 49. The Council's overall DBE goal of 10% for DOT-assisted contracts is effective from October 1, 1999 through September 30, 2000.

This goal and a description of how it was set is available for inspection during normal business hours at the Metropolitan Council offices for 30 days from the date of this notice. The plan can also be accessed via the Internet from our **Website**: www.metrocouncil.org. Comments, which are for information purposes only, may be sent to the Manager, Office of Diversity and Equal Opportunity, Metropolitan Council, Mears Park Centre, 230 E. Fifth St., St. Paul, MN 55101; or the U.S. Department of Transportation, 400 7th St. S.W., Washington, D.C. 20590, within 45 days from the date of this notice.

This program confirms the Metropolitan Council's commitment to utilize businesses owned and controlled by socially and economically disadvantaged individuals in our procurement and contracting efforts.

Department of Natural Resources

Division of Lands and Minerals

Notice of Intent to Solicit Outside Opinions Regarding Sunken Log Lease Applications

NOTICE IS HEREBY GIVEN that the Department of Natural Resources, Division of Lands and Minerals, has received the following applications for leases to remove sunken logs from the lakes listed, pursuant to *Minnesota Statutes*, section 103G.650:

Lake Plantaganette in Hubbard County. The area requested for lease is Sections 1, 6, 7, 12, 13 and 18, Townships 145 and 146 North, Ranges 33 and 34 West. The applicant is Dan Winger, 4691 Big Rice Lake Road, N.E., Remer, MN 56672.

Cass Lake in Beltrami County. The area requested for lease is Sections 12, 13, 23, 24, 25, 27, 28, 29, 30, 31, and 32, Townships 145 and 146 North, Ranges 30 and 31 West. The applicant is Craig Waddell, 6343 S. Bass Lake Drive, N.E., Remer, MN 56672.

The complete applications are on file at the Department of Natural Resources, Division of Lands and Minerals, 500 Lafayette Road, St. Paul, MN and may be reviewed between 8:00 a.m. and 4:30 p.m. on regularly scheduled business days.

The Department of Natural Resources requests comments concerning these lease applications. Written comments should be addressed to: Minnesota Department of Natural Resources, Division of Lands and Minerals, 500 Lafayette Road, St. Paul, MN 55155-4045. Oral comments will be accepted between 8:00 a.m. and 4:30 p.m. by telephone at (651) 296-4807 or in person at the above address on regularly scheduled business days.

Comments shall be accepted until September 7, 2000.

Dated: 7 August 2000

Allen Garber
Commissioner of Natural Resources

Department of Revenue

Presumed Legal Cigarette Prices

The presumed prices for wholesalers and retailers, as provided for by *Minnesota Statutes*, chapter 325D, are shown in this schedule. The computations are based on manufacturers' list prices available as of July 31, 2000. All cigarettes in a wholesaler's or retailer's inventory must be priced to reflect the new presumed prices within seven (7) calendar days after the manufacturer's price change is reflected on a purchase invoice. A wholesaler or retailer may sell for less if they can show that their actual costs of doing business are lower than the presumed minimum.

	<u>Presumed Minimum Wholesale Price Per Carton</u>	<u>Presumed Minimum Retail Price Per Carton</u>	<u>Presumed Minimum Retail Price Per Pack</u>
Major Brands (Kings, Regulars, 100's, 120's) Examples of major brands: Marlboro, Winston, Merits, Virginia Slims, Kools, Capri, Kent, Newport, Carlton	\$29.20	\$31.54	\$3.15
Marlboro 25's (Kings)	\$29.20	\$31.54	\$3.94
Old Gold, Richland 20's, Best Value, Basics, Misty's, Raleigh Extra, Doral, Riviera, Magna, Sterling, Cambridge, Am Light, Montclair, Pyramid, Bristol, Alpine, Bucks, Stars & Bars, Quality Lights, Class A, Black and Yellow (Kings, Regulars 100's, 120's)	\$26.38	\$28.49	\$2.85

Ligget Private Label (Kings, Regulars, 100's,)	\$26.38	\$28.49	\$2.85
GPC's, Viceroy's	\$20.52	\$22.16	\$2.22

Office of the Secretary of State

Notice of Vacancies in Multi-Member Agencies

NOTICE IS HEREBY GIVEN to the public that vacancies in multi-member state agencies will be published once a month on the Secretary of State's World Wide Web site at www.sos.state.mn.us, as provided in *Minnesota Statutes* 15.0597, subdivision 4. A copy of the monthly listing of vacancies and application form may be obtained from the Office of the Secretary of State, Election Division, 180 State Office Building, 100 Constitution Ave., St. Paul, MN 55155-1299; (651) 297-5845, or in person at Room 174 of the State Office Building.

In accordance with the Minnesota Open Appointments Law, the Secretary of State acts as an administrator in publishing vacancies, receiving applications, and recording appointments. Applications will be reviewed and appointments made by the Appointing Authorities for these various agencies. Completed applications are to be submitted to the Secretary of State. The deadline date for applications will be indicated in the monthly listing of vacancies and on the Secretary of State's Web Site. Appointing Authorities for these agencies may also choose to review applications received by the Secretary of State after that date. Applications are kept on file for a one year period.

The Annual Compilation is available from the Minnesota Bookstore. This publication includes a complete listing of state boards and councils that follow the Open Appointments process, descriptions of these agencies and their memberships, and statistical information about appointments and vacancies made during the fiscal year. The Annual Compilation information is also available on the Secretary of State's Web Site.

To order copies of the Annual Compilation please call the Minnesota Bookstore at (651) 297-3000 or (800) 657-3757.

State Grants & Loans

In addition to requests by state agencies for technical/professional services (published in the State Contracts section), the *State Register* also publishes notices about grants and loans available through any agency or branch of state government. Although some grant and loan programs specifically require printing in a statewide publication such as the *State Register*, there is no requirement for publication in the *State Register* itself. Agencies are encouraged to publish grant and loan notices, and to provide financial estimates as well as sufficient time for interested parties to respond.

Minnesota Department of Administration

STAR Program

Request for Proposals for "Assistive Technology Employment Grants"

The STAR Program requests proposals to create and expand job and career opportunities for individuals with disabilities utilizing assistive technology devices and services.

Goal

It is the goal of this project that Minnesota residents with disabilities will have the opportunity to be employed in meaningful work through the utilization of assistive technology at a competitive wage in positions with career potential.

State Grants & Loans

Available Funds: Up to \$40,000
Proposals Due: August 31, 2000
Estimated Number of Awards: 1 - 3

Eligible Applicants: Assistive technology specialists with experience in employment-related assessment, accommodation, and training for individuals with disabilities. Applicants must be familiar with the Americans with Disabilities Act and the Rehabilitation Act as amended. Ineligible Applicants: Previous recipients of Assistive Technology Employment Grants.

Objectives and sample tasks

- 1) Create and expand job and career opportunities for individuals with disabilities by engaging private industry as a partner in application of assistive technology to the work setting.
 - A. Identify competitive job and career opportunities and the skills needed to perform these jobs.
 - B. Assess for the appropriate assistive technology needed to fill the gap between the capabilities of a qualified individual and the demands of the work tasks.
 - C. Assist in the acquisition of the appropriate assistive technology.
 - D. Provide training on the application of the assistive technology to the individual employee and the job site support personnel.
- 2) Present at least one conference session or workshop on Assistive Technology in Employment.
- 3) Engage post secondary settings and/or employer partner(s) in planning and implementation of job training using assistive technology for individuals with disabilities.
- 4) Produce written protocols for accommodation of disability in work tasks. These protocols must include resource information, time and cost estimates, as well as suggest alternate accommodations if any.
- 5) Demonstrate statewide availability for service and capacity building in employment-related accommodation for individuals with disabilities.

Responders are encouraged to propose additional tasks or activities if they will substantially improve the results of the project.

The contractor must work closely with STAR Program staff. It is possible that the contractor will prepare outlines or rough drafts of certain products, which will be completed by department staff. This contract will not include the creation of camera-ready mechanical, and the printing of materials, and will not include the cost of printing or distribution of materials.

The contract will begin immediately upon execution and will be completed by June 30, 2001.

This request for proposal does not obligate the state to complete the project, and the state reserves the right to cancel the solicitation if it is considered to be in its best interest.

Prospective responders who have any questions regarding this request for proposal may call or write:

Ronna Linroth, Acting Executive Director
STAR Program
300 COB, 658 Cedar Street
St. Paul, Minnesota 55155
Telephone: 651-297-1554

Other personnel are NOT allowed to discuss the request for proposal with anyone, including responders, before the proposal submission deadline.

All proposals must be sent to:

Ronna Linroth, Acting Executive Director
STAR Program
360 COB, 658 Cedar Street
St. Paul, Minnesota 55155

Full applications will be available on August 4, 2000.

All proposals must be received not later than 2:30 p.m. on August 31, 2000, as indicated by a notation made by the receptionist, 3rd floor, STAR Program.

Late proposals will not be considered.

STAR's Community Action Networks *may* compete for this grant.

Submit one original and two signed copies of the proposal. Proposals are to be sealed in mailing envelopes or packages with the responder's name and address written on the outside. An authorized member of the organization must sign each copy of the proposal in ink. Prices and terms of the proposal as stated must be valid for the length of any resulting contract.

The department has estimated that the cost of this/these contract (s) should not exceed \$40,000.

The following will be considered minimum contents of the proposal:

- 1) A statement of the objectives, goals and tasks to show or demonstrate the responder's view of the nature of the contract.
- 2) A description of the deliverables to be provided by the responder including the number of individuals with disabilities to be served between the signing of this contract and June 30, 2001.
- 3) A description of how the project will provide and involve individuals with disabilities in the assessment, acquisition, and training on assistive technology for employment.
- 4) A description of how the project will acquire and utilize labor market analysis or current and projected needs assessment information.
- 5) A description of how the project will engage private industry in job development, skills training, and career laddering.
- 6) A description of how the project will collaborate with Rehabilitation Services or other funders to maximize utilization of existing funding sources.
- 7) An outline of the responder's background and experience, with particular emphasis on local and state work, and examples of similar work done by the responder and a list of personnel who will conduct the project, detailing their training, work experience, and hourly fees. No change in personnel assigned to the project will be permitted without the written approval of the state program manager.
- 8) A detailed cost and work plan that will identify the major tasks to be accomplished and be used as a scheduling and managing tool, as well as the basis for invoicing.

Department of Human Services

Health Care Purchasing and Service Delivery Division

Notice of Request for Proposals from Qualified Proposers for Minnesota Health Care Programs Recipients in Cass, Crow Wing, Morrison, Todd and Wadena Counties

The Minnesota Department of Human Services (DHS) is seeking proposals for innovative service delivery models to persons in Cass, Crow Wing, Morrison, Todd and Wadena Counties who are covered by Medical Assistance (MA), General Assistance Medical Care (GAMC) or MinnesotaCare. Proposed models must demonstrate the ability to integrate health care services, with community, public health and social services and to provide a case management system that will encompass this package of health and community services. Covered populations include all persons enrolled in MinnesotaCare, and people in the Medical Assistance (MA) eligibility groups of Temporary Assistance to Needy Families (TANF), TANF-related, needy children, aged, and General Assistance Medical Care (GAMC). The enrollment process will begin no earlier than December 1, 2000. The estimated number of eligible enrollees is:

MA/GAMC:	9,938
MinnesotaCare:	<u>9,541</u>
Total:	19,479

Proposers qualified to respond to this Request for Proposals (RFP) must be able to provide all MA/GAMC/MinnesotaCare covered services **EXCEPT DENTAL** in the identified geographic region, and must be able to accept financial risk. **Dental services for these populations in these counties will be delivered through a new pilot project being developed by DHS to be implemented at a late date.** Capitation rates have been set by DHS in consultation with an independent actuary. Contracts will be awarded based on: (1) network capacity and geographic accessibility of service delivery sites; (2) ability to comply with service delivery standards appropriate to the demographic characteristics of the population to be enrolled; (3) ability to integrate health care services with other community services (4) financial and risk capability; and (5) ability to meet quality assurance, complaint, appeal and reporting requirements. The Commissioner reserves the right to reject any proposal.

State Grants & Loans

Interested parties may receive a copy of the RFP by contacting:

Pam Austin, Development Manager
Purchasing and Service Delivery Division
Minnesota Department of Human Services
444 Lafayette Road
St. Paul, Minnesota, 55155-3854
Telephone: (651) 297-2355 **Fax:** (651) 297-3230
Email: pam.austin@state.mn.us

Prospective respondents with questions regarding this RFP may call, write or e-mail Pam Austin at the above address. Ms. Austin is the only person at the Department of Human Services who is authorized to answer questions regarding this document.

A Proposers' Conference for prospective respondents has been scheduled for Wednesday August 16, 2000 from 9:30 a.m. to 10:30 a.m. at the following location:

Minnesota Department of Human Services
Rooms 5B/C
444 Lafayette Road
St. Paul, MN

All written questions submitted to Pam Austin at the above address prior to August 16, 2000 will be addressed at the conference. All responses to this RFP are due at the Department of Human Services, Purchasing and Service Delivery Division, Attention: Pam Austin, 444 Lafayette Road, St. Paul, MN 55155, by 4:30 p.m., September 18, 2000.

NOTE: All individuals who plan on attending the proposers conference will need a temporary security badge to access the 5th floor meeting room. Please call Alice Pedersen at (651) 297-7951 with the names of individuals who will be attending this meeting so a temporary security badge will be available at the DHS Information Desk.

Department of Veterans Affairs

Notice of Grant Funds Available: Application Requests Accepted for Placement on the Funding List for the Minnesota County Veterans Service Officer Operational Improvement Grant Program

NOTICE IS HEREBY GIVEN that the Minnesota Department of Veterans Affairs is accepting application requests for placement on the funding list for the Minnesota County Veterans Service Officer Operational Improvement Grant Program. This program was created to improve the efficiency of the County Veterans Service Officer system.

Applications will be reviewed and processed and grants will be awarded as required in *Minnesota Statutes* 197.608 and *Minnesota Rules*, parts 9055.0500 to 9055.0610.

Applications will be accepted at the address noted below until 4:30 p.m., September 8, 2000.

Only original applications, as provided to the applicants by the Minnesota Department of Veterans Affairs, will be accepted. Applications received on alternative formats will not be accepted.

Applications must be submitted by certified United States Mail to:

County Veterans Service Officer Operational Improvement Grant Program
Minnesota Department of Veterans Affairs
20 West 12th Street
St. Paul, Minnesota 55155-2079

To request an application or further information, contact:

Terrence A. Logan or Dennis Forsberg at:
Minnesota Department of Veterans Affairs
20 West 12th Street
St. Paul, Minnesota 55155-2079
(651) 296-2562

Professional, Technical & Consulting Contracts

Department of Administration procedures require that notice of any consultant services contract or professional and technical services contract which has an estimated cost of over \$25,000 be printed in the *State Register*. These procedures also require that the following information be included in the notice: agency name and address, name of agency contact person, description of project and tasks, cost estimate and final submission date and time of completed proposal. Certain quasi-state agencies and MnSCU institutions are exempted from these provisions. In accordance with *Minnesota Rules* 1230.1910, certified Targeted Group Businesses and individuals submitting proposals as prime contractors shall receive the equivalent of a 6% preference in the evaluation of their proposal. Certified Economically Disadvantaged Businesses and individuals shall receive the equivalent of a 4% preference in the evaluation of their proposal. For information regarding certification, call the Materials Management Helpline (651) 296-2600 or [TTY (651) 282-5799.]

Department of Children Families and Learning

Office of Community Services

Notice of Request for Proposal to Conduct an Economic Impact Analysis of Child Care in Minnesota

The Department of Children, Families and Learning is soliciting proposals from qualified parties to conduct an economic impact analysis of child care in Minnesota.

The Department of Children, Families and Learning has received federal funding for child care development activities. The Department will award one contract to an individual, organization or a collaboration representing several individuals/organizations with expertise in conducting economic impact of child care analyses and extensive knowledge of child care at the state and national level.

The goal of this project is to conduct an expert economic impact analysis of child care in four Minnesota counties.

The Department has estimated that the costs of this analysis should not exceed \$317,000.

The anticipated analysis period will be October 15, 2000 through October 31, 2001.

For a copy of the complete Request for Proposal, please contact:

Julie Nash
Office of Community Services
Department of Children, Families and Learning
1500 Highway 36 West
Roseville, Minnesota 55113-4567
Phone: (651) 582-8562
Fax: (651) 582-8496
Email: child.care@state.mn.us.

Completed proposals are due no later than 3:00 p.m. on September 6, 2000. Late proposals will not be considered.

In compliance with *Minnesota Statutes* 16C.07, the availability of this contracting opportunity is being offered to state employees. We will evaluate the responses of any state employee along with other responses to this Request for Proposal.

Minnesota State Colleges and Universities

St. Cloud Technical College

Request for Proposal (RFP) for Computer Equipment

Introduction:

St. Cloud Technical College is soliciting bids for Computer Equipment beginning August 7, 2000.

Professional, Technical & Consulting Contracts

Request for Proposals are available from:

St. Cloud Technical College
Jeri Fiereck
1540 Northway Drive
St. Cloud, MN, 56303
(320) 654-5479

Proposal Due Date:

Vendor proposals are due no later than 2:00 p.m., August 21, 2000.

Department of Commerce

Request for Proposals on Specifications for Organizations and Individuals Wishing to Act as Market Conduct Examiners on Behalf of the Minnesota Commerce Department *Minnesota Statute 60A.031, Subd. 3*

I. INTRODUCTION AND BACKGROUND

The Minnesota Department of Commerce (hereinafter the "Department") is soliciting bids from individuals or organizations qualified to perform market conduct examinations pursuant to *Minnesota Statute*, section 60A.031, subdivision 3. The individuals or organizations (hereinafter the "examiners") will conduct a targeted examination of a foreign domiciled insurance company conducting business in Minnesota.

Selection of the examiners will be made in the best interest of the Department based upon the proposals submitted and the quality of service necessary. The Department intends to select the examiners as soon as reasonably possible.

II. EXAMINER RESPONSIBILITIES

The examiners, in accordance with state examination policies and procedures and the procedures specified within the National Association of Insurance Commissioners Market Conduct Examiners Handbook, may:

- A. Conduct a review of the Company's operations and management, including, but not limited to; Internal audits of claim type specific claim handling and practices; Litigation involving claim type specific claim handling and practices
- B. Conduct a review of complaint handling practices to include, but not be limited to; Complaint register; claim type specific claim complaints.
- C. Conduct a review of claim practices to include, but not be limited to; claim investigation; medical claim utilization reviews; analysis of usual customary and reasonable methodology; and other procedures as deemed necessary.
- H. An examination report will be drafted in a factual unbiased manner, and written in the format required by the Commissioner of Commerce and that relates directly to statutory and regulatory standards or requirements.

Contractor will perform examination procedures as required by the Department and as requested by the Examiner-in-Charge while conducting the examination. The contractor will draft the examination report findings in the format required by the Department. Contractor will need an understanding of Minnesota statutes and regulations as well as the ability to understand applicable case law. Contractor will perform and assist in the administration of statements under oath and the delivery, collection and analysis of the data received through information requests and subpoenas. Data analysis skills will be necessary for the use of ACL, Access and Excel. Contractor may be required to testify at an administrative hearing or other legal proceedings involving the Company.

III. INFORMATION REQUIRED IN PROPOSAL

In addition to agreeing to and detailing how it intends to fulfill the preceding itemized responsibilities, any prospective examiners must provide the following information:

A. Qualifications and Background

The contractor must possess management and organizational skills and experience, oral and written communication skills; report drafting skills; computer skills related to ACL, Access and Excel; a familiarity with organizing and conducting market conduct examinations; problem-solving skills.

Professional, Technical & Consulting Contracts

B. References and Current Operations

A list of other state departments of insurance for which the contractor has conducted market conduct examinations, or is now conducting examinations for, similar to those sought by this Request for Proposal and the nature of the services provided to each. Departments listed as references may be contacted by the Department as part of the evaluation of this Request for Proposal.

C. Fees for Services

The fees that the contractor proposes to charge for services.

IV. FORM OF COMPENSATION

The examiners will be paid by direct billing of the company on either a bi-weekly or monthly billing cycle. Travel reimbursement will be in accordance with the Commissioners Plan and as otherwise agreed to in the contract.

V. DURATION OF CONTRACT

The proposed contract period for the examination will be for a maximum of four months commencing on, or about, August 28, 2000, and expiring on, or about, December 28, 2000.

VI. ADDITIONAL PROPOSAL AND CONTRACT REQUIREMENTS

The Commissioner of Commerce reserves the right to request clarification or elaboration of any segment of any proposal and to negotiate in the best interest of the department.

All proposals must indicate that they are valid for ninety (90) days. This period may be extended by mutual agreement between the examiners and the Department.

All proposals submitted in response to this Request for Proposals will become the property of the Department. Such proposals will also constitute public records and will be available for view and reproduction by any person after the choice of the examiners has been made.

VII. SCHEDULE FOR PROPOSALS

All proposals submitted in response to this Request for Proposals must be received in the Commerce Department by August 25, 2000, at 4:30 p.m. The Department of Commerce will make its decision on which examiners proposal to accept as soon as reasonably possible.

VIII. FURTHER CONTRACT INFORMATION

For purposes of inquiry, contact:

Paul Hanson, Chief Examiner
Enforcement Division
133 East 7th Street
St. Paul, MN 55101
(651) 297-5281
paul.hanson@state.mn.us

Statute mandates that examinations are confidential and nonpublic data under the Minnesota government data practices act and examination statutes. The Company is a large insurer specializing in the personal line property and casualty insurance markets. The examination site will be located in their offices in Minnesota. The examination is expected to last approximately two and one-half months. It is estimated that two examiners will be needed. Travel expenses will be at the rates promulgated by the Commissioner of Employee Relations (DOER) for the Commissioners Plan publicized at <http://www.doer.state.mn.us/lr-cmrpl/chptr-15.htm> on the DOER web site. A standard examination contract will be used. In compliance with *Minnesota Statute*, section 16C.08, the availability of this contracting opportunity is being offered to state employees. We will evaluate the responses of any state employee, along with other responses to this Request for Proposal.

Professional, Technical & Consulting Contracts

Minnesota Department of Health

Public Health Laboratory

Request for Proposals for Conversion of Existing Legacy Oracle Forms to Oracle Version 6.0 Files

The Minnesota Department of Health requests proposals from qualified firms with a demonstrated capability to convert existing legacy Oracle Forms version 3.0 files to Oracle version 6.0 files. The successful responder will be responsible for insuring error-free functionality of these files.

Conversion will include:

- Convert 255 Oracle Forms 3.0 character mode to Oracle Forms 6.0 mode
- Convert 19 Oracle Reports .1 character mode to Oracle Reports 6.0 mode
- Convert 6 Menu 5.0 files to Oracle Forms 6.0 Menu files.

For a complete request for proposals, prospective responders may call or write:

Douglas Turgeon
Minnesota Department of Health
717 Delaware St SE
Minneapolis, MN 55414
(612) 676-5578

Proposals must be received by no later than 4:30 p.m. central time August 28, 2000. Late proposals will not be considered.

Office of the Governor

Request for Information from Minnesota Companies Interested in Netcasting "Lunch with the Governor"

Office of Gov. Jesse Ventura is accepting Request for Information (RFI) from Minnesota Internet companies interested in netcasting the governor's radio show, "Lunch with the Governor." The Governor's Office will take RFI until August 31, 2000 at 2:00 p.m. Late submissions will not be considered. A Request for Proposal (RFP) will then be built from the RFI that were submitted.

Interested parties should contact David Ruth at (651) 296-0080 for details.

Minnesota Historical Society

Request for Proposals for Parking Lot and Trail Construction at Historic Fort Snelling

NOTICE TO CONTRACTORS – Sealed proposals will be RECEIVED until 2:00 p.m., August 28, 2000, by Chris M. Bonnell, Contracting Officer, Finance and Administration Division, Minnesota Historical Society, 4th Floor, History Center, 345 Kellogg Boulevard West, St. Paul, Minnesota 55102 on behalf of the Commissioner of Transportation as agent for said Agency for the construction of the county project(s) listed below. Proposals will be opened and read publicly by the Commissioner of Transportation or his representative at the History Center, St. Paul, Minnesota, immediately after the hour set for receiving bids.

Minimum wage rates to be paid by the Contractors have been predetermined and are subject to the Work Hours Act of 1962, P.L. 87-581 and implementing regulations.

READ CAREFULLY THE WAGE SCALES AND DIVISION A OF THE SPECIAL PROVISIONS AS THEY AFFECT THIS PROJECT(S)

The Minnesota Department of Transportation hereby notifies all bidders:

in accordance with Title VI of the Civil Rights Act of 1964 (Act), as amended and Title 49, *Code of Federal Regulations*, Subtitle A Part 21, Non-discrimination in Federally-assisted programs of the Department of Transportation, it will affirmatively assure that in any contract entered into pursuant to this advertisement, disadvantaged business enterprises will be

Professional, Technical & Consulting Contracts

afforded maximum opportunity to participate and/or to submit bids in response to this invitation, and will not be discriminated against on the grounds of race, color, disability, age, religion, sex or national origin in consideration for an award;

in accordance with Title VI of the Civil Rights Act of 1964 as amended, and Title 23, *Code of Federal Regulations*, Part 230 Subpart A-Equal Employment Opportunity on Federal and Federal-Aid Construction Contracts (including supportive services), it will affirmatively assure increased participation of minority groups and disadvantaged persons and women in all phases of the highway construction industry, and that on any project constructed pursuant to this advertisement equal employment opportunity will be provided to all persons without regard to their race, color, disability, age, religion, sex or national origin;

in accordance with the Minnesota Human Rights Act, *Minnesota Statute* 363.03 Unfair Discriminatory Practices, it will affirmatively assure that on any project constructed pursuant to this advertisement equal employment opportunity will be offered to all persons without regard to race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, membership or activity in a local commission, disability, sexual orientation, or age;

in accordance with the Minnesota Human Rights Act, *Minnesota Statute* 363.073 Certificates of Compliance for Public Contracts, and 363.074 Rules for Certificates of Compliance, it will assure that appropriate parties to any contract entered into pursuant to this advertisement possess valid Certificates of Compliance.

If you are not a current holder of a compliance certificate issued by the Minnesota Department of Human Rights and intend to bid on any job in this advertisement you must contact the Department of Human Rights immediately for assistance in obtaining a certificate.

The following notice from the Minnesota Department of Human Rights applies to all contractors:

“It is hereby agreed between the parties that *Minnesota Statute*, section 363.073 and *Minnesota Rules*, parts 5000.3400 to 5000.36000 are incorporated into any contract between these parties based on this specification or any modification of it. A copy of *Minnesota Statute* 363.073 and *Minnesota Rules*, parts 5000.3400 to 5000.3600 is available upon request from the contracting agency.”

“It is hereby agreed between the parties that this agency will require affirmative action requirements be met by contractors in relation to *Minnesota Statutes* 363.073 and *Minnesota Rules* 5000.3600. Failure by a contractor to implement an affirmative action plan or make a good faith effort shall result in revocation of its certificate or revocation of the contract (*Minnesota Statute* 363.073, Subd., 2 and 3).”

Parking Lot and Trail Construction – Grade, Aggregate Base, Bituminous Surface, Modular Block Retaining Wall, Pipe Culvert, Pipe Sewer, Concrete Walk, Concrete Curb & Gutter, Revise Lighting System, Chain Link Fence, Pavement Markings, Landscaping and Turf Establishment.

S.P. 94-100-17 (Fort Snelling), Minnesota Project No. TEAF 2797(029), located at Historic Fort Snelling. The major items of work are 9913 m3 of common Excavation, 1563 m3 of Aggregate Base, 501 t of Type 41 Wearing Course Mixture, 481 t of Type 41 binder Course Mixture, 295 m2 of Modular Block Retaining Wall, 37.9 m of 560 and 725 mm Span Reinforced Concrete Pipe Arch Culvert, 95.3 m of 430 mm Span Corrugated Steel Pipe Arch Culvert, 233 m. of 300, 375 and 600 mm Reinforced Concrete Pipe Sewer, 21 m of Construct Drainage Structures, 147 m3 of Random Riprap, 662 m2 of Special Concrete Walk, 1537 m of Concrete Curb & Gutter, 37 each Information Signs, Revise Lighting System, Relocate Utility Facilities (Lump Sum), 162 m of Chain Link Fence, 1326 m of Pavement Markings – Paint, 220 m2 of Pavement Marking – Epoxy, 14 Trees, 100 Shrubs, 513 m of Silt Fence, and 1.6 ha of Turf Establishment.

NOTICE TO BIDDERS: A Pre-Letting Conference will be held at the Project Site on August 21, 2000, at 10:00 a.m. All interested parties are invited to attend. Any questions regarding this Project should be directed to Deb Bartels at (651) 222-5754.

A minimum goal 9% Good Faith Effort to be subcontracted to Disadvantaged Business Enterprises.

<u>Item</u>	<u>Counter Price</u>
Plans and 1 Proposal	\$29.75
Proposals only, per copy	\$12.00

Proposals, plans and specifications may be examined and secured in Room 109 of the Minnesota Department of Transportation Building, St. Paul, Minnesota 55155. The Contracting Officer of the Minnesota Historical Society, St. Paul, Minnesota will have copies of the above for examination only.

REQUESTS FOR PLANS AND PROPOSALS MAY BE SUBMITTED ON CONSTRUCTION FORM NO. 21120, ACCOMPANIED BY CHECK, DRAFT OR MONEY ORDER, PAYABLE TO THE COMMISSIONER OF TRANSPORTATION. ALL MAIL ORDERS SHOULD BE ADDRESSED TO PLANS AND PROPOSALS, 395 JOHN IRELAND BOULEVARD, MAIL STOP 694, ST. PAUL, MN 55155.

Professional, Technical & Consulting Contracts

Bids must be accompanied by a certified check made payable to the Commissioner of Transportation, or a corporate surety bond made in favor of the State of Minnesota in an amount as designated on the proposal form.

PLEASE NOTE

7% MINNESOTA SALES TAX MUST BE INCLUDED ON ALL COUNTER PURCHASES MAIL ORDERS WITHIN ST. PAUL. 6.5% SALES TAX MUST BE INCLUDED ON ALL ORDERS SHIPPED TO POINTS IN MINNESOTA.

COUNTER PURCHASES MAY BE MADE BETWEEN 7:30 a.m. AND 4:00 p.m.

VISA AND MASTERCARD ARE NOT ACCEPTED.

Elwyn Tinklenberg
Commissioner of Transportation

Minnesota Historical Society

Request for Proposals for Writer/Editor of *The Minnesota History Interpreter* and *The Minnesota History Planner*

The Minnesota Historical Society is seeking proposals from qualified individuals to provide writing and editing services for two of its publications, *The Minnesota History Interpreter* and *The Minnesota Preservation Planner*. *The Minnesota History Interpreter* is published nine times a year with a distribution of approximately 2,475 copies. County and local historical organizations are the primary audience for this publication. *The Minnesota Preservation Planner* is a quarterly newsletter included as an insert in the *Interpreter* in the January/February, April, June/July, and October issues. Approximately 1,300 copies are also distributed through a separate mailing. The primary audiences for this publication are local Heritage Preservation Commissions, units of local government, state and federal agencies, and a wide range of preservation partners served by the Society's State Historic Preservation Office.

All proposals must be received by Chris M. Bonnell, Contracting Officer for the Minnesota Historical Society, 345 Kellogg Boulevard West, St. Paul, MN 55102 or an authorized agent no later than 2:00 p.m., Central Time, Wednesday, August 30, 2000. Proposals must be submitted in a sealed envelope with the project name clearly written on the envelope. Late proposals will not be considered.

Authorized agents for receipt of proposals are the following: Chris M. Bonnell, Contracting Officer, Mary Green-Toussaint, Contracting and Procurement Technician or any Work Service Center staff member in the Finance and Administration Division on the 4th floor of the History Center. Bids may not be delivered to the information desk, to the guard or to any location or individual other than as specified above.

The Request for Proposal is available by calling or writing Chris M. Bonnell, Contracting Officer, Minnesota Historical Society, 345 Kellogg Boulevard West, St. Paul, MN 55102. **Telephone:** (651) 297-5863, **email:** (chris.bonnell@mnhs.org).

Complete specifications and details concerning submission requirements are included in the Request for Proposal.

Minnesota Supreme Court

The Information Technology Division

Notice of Request for Proposal (RFP) for Court Case Management Solution Vendors

The Minnesota Court Information System project (MNCIS), sponsored by the Minnesota Supreme Court, is currently seeking Court Case Management Solution Vendors.

Interested vendors should visit the project website to view the RFP on August 15, 2000.

Deadline for Proposal Submissions is September 15, 2000.

All questions will be handled in writing through the project **website:** <http://www.courts.state.mn.us>

Department of Transportation

Office of Alternative Transportation Financing

Notice of Availability of Agreement to Develop and Operate Communications Facilities

The Minnesota Department of Transportation has entered into a private-public partnership agreement to build a state-wide fiber optic network. The private partner, ICS/UCN LLC was selected in a competitive process from respondents to a Mn/DOT "Request for Proposal" (RFP) issued in February 1996.

A hard or electronic copy of the agreement is available from this office and through the Minnesota Department of Transportation at www.dot.state.mn.us. The agreement can be obtained from the Agreement Administrator:

Adeel Lari, Director
Office of Alternative Transportation Financing
Mail Stop 445, Third Floor North
395 John Ireland Boulevard
St. Paul, MN 55155-1899
Fax: (651) 296-3311

A written request (by direct mail or fax) is required to receive a hard copy of the agreement. The party requesting a hard copy is responsible for all copying expenses.

Department of Transportation

Program Support Group

Notice of Availability of Contract for I-394 Reversible Lane Gate Study

The Minnesota Department of Transportation (Mn/DOT) is soliciting the proposals for the Reversible Lane Gate Study for the portion of I-394 located between I-94 in Minneapolis and TH 100 in Golden Valley.

Work is proposed to start November 1, 2000.

Request for Proposals will be available by mail from this office through August 22, 2000. **A written request (direct mail or FAX) is required to receive the Request for Proposal.** After August 22, 2000, the Request for Proposal must be picked up in person.

The Request for Proposal can be obtained from the Mn/DOT Agreement Administrator:

Alex Chernyaev, P.E.
Consultant Services Unit - 7th Floor North
Minnesota Department of Transportation
395 John Ireland Boulevard, MailStop 680
St. Paul, MN 55155
Fax: (651) 282-5127

Proposals in response to the Request for Proposals in this advertisement must be received at the above address no later than 2:00 P.M. CDT on August 29, 2000. **Late proposals will not be considered.** No time extensions will be granted.

This request does not obligate the State of Minnesota Department of Transportation to complete the work contemplated in this notice, and the Department reserves the right to cancel this solicitation. All expenses incurred in responding to this notice will be borne by the responder.

Professional, Technical & Consulting Contracts

Department of Transportation

Program Support Group

Notice of Availability of Contract for TH 60 Preliminary Design

The Minnesota Department of Transportation (Mn/DOT) is soliciting the proposals for Preliminary Design for the portion of TH 60 located between Minnesota/Iowa border and I-90 at the north edge of Worthington.

Work is proposed to start November 1, 2000.

Request for Proposals will be available by mail from this office through August 21, 2000. **A written request (direct mail or FAX) is required to receive the Request for Proposal.** After August 21, 2000, the Request for Proposal must be picked up in person.

The Request for Proposal can be obtained from the Mn/DOT Agreement Administrator:

Alex Chernyaev, P.E.
Consultant Services Unit - 7th Floor North
Minnesota Department of Transportation
395 John Ireland Boulevard, MailStop 680
St. Paul, MN 55155
Fax: (651) 282-5127

Proposals in response to the Request for Proposals in this advertisement must be received at the above address no later than 2:00 P.M. CDT on August 31, 2000. **Late proposals will not be considered.** No time extensions will be granted.

This request does not obligate the State of Minnesota Department of Transportation to complete the work contemplated in this notice, and the Department reserves the right to cancel this solicitation. All expenses incurred in responding to this notice will be borne by the responder.

Minnesota Department of Transportation

Program Support Division

Office of Bridges and Structures

Request for Proposal for Installation, Monitoring, and Evaluation of a Zinc Hydrogel Passive Corrosion Control System

The Minnesota Department of Transportation (Mn/DOT) is requesting proposals from qualified vendors to install, monitor and evaluate a Zinc Hydrogel Passive Corrosion Control System as a potential maintenance method for reducing the rate of corrosion on bridge piers. Pier 3 of in-place Bridge No. 6513 (Maryland Avenue over I-35E in St. Paul, Minnesota) is the subject of this research project.

To receive a copy of the complete Request for Proposal, prospective responders will be required to submit a written request either by direct mail or fax, to the address indicated below through August 21, 2000. After August 21, 2000, prospective responders will be required to pick up the Request for Proposal in person from our office.

This document is available in alternative formats for persons with disabilities by faxing the Agreement Administrator or for persons who are hearing or speech impaired by calling the Minnesota Relay Service at (800) 627-3529. Complete Requests for Proposal may be obtained from:

David B. Baker
Agreement Administrator
Minnesota Department of Transportation
Seventh Floor North
395 John Ireland Boulevard, Mail Stop 680
St. Paul, MN 55155-1899
Fax: (651) 282-5127

Professional, Technical & Consulting Contracts

The responses to the Request for Proposals must be received by 2:00 PM CST August 30, 2000, according to the time and date stamp on the Consultant Services Unit receptionist's desk, 7th floor north - Transportation Building. **Late Submittals will not be considered.**

The successful responders will be required to submit acceptable evidence of compliance with workers' compensation insurance coverage requirements prior to execution of the contract. This request does not obligate the Minnesota Department of Transportation to complete the work contemplated in this notice, and the Department reserves the right to cancel this solicitation at any time. All expenses incurred by submitting contractors responding to this notice will be borne by the responder.

All proposals will become public information after contract is awarded, under the Minnesota Data Practices Act, and will remain the property of the Minnesota Department of Transportation.

Non-State Public Bids, Contracts & Grants

The *State Register* also serves as a central marketplace for contracts let out on bid by the public sector. The *State Register* meets state and federal guidelines for statewide circulation of public notices. Any tax-supported institution or government jurisdiction may advertise contracts and requests for proposals from the private sector. It is recommended that contracts and RFPs include the following: 1) name of contact person; 2) institution name, address, and telephone number; 3) brief description of project and tasks; 4) cost estimate; and 5) final submission date of completed contract proposal. Allow at least three weeks from publication date (four weeks from date article is submitted for publication). Surveys show that subscribers are interested in hearing about contracts for estimates as low as \$1,000. Contact the editor for further details.

Metropolitan Council

Notice of Availability of Funds from the Metropolitan Livable Communities Act Tax Base Revitalization Account

Purpose: The Metropolitan Livable Communities Act (*Minnesota Statutes* Ch. 473.25) created a **Tax Base Revitalization Account** to make grants to clean up contaminated land for subsequent commercial/industrial redevelopment, job retention and job growth. Applications will be prioritized to the extent that they address the following: increase local tax base; create net gain in regional jobs; demonstrate market demand for proposed site; supplement a previously approved project; preserve and/or increase living wage jobs; improve the environment by reducing human health risk; promote compact development; provide living wage jobs; leverage private investment; and make more efficient use of current infrastructure capacity. This program is being coordinated with complementary programs at the Minnesota Pollution Control Agency (MPCA) and the Minnesota Department of Trade and Economic Development (DTED).

Eligible Applicants: Statutory or home rule charter cities participating in the Metropolitan Livable Communities Housing Incentive Program are eligible to apply. Metropolitan counties (Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, Washington) and development authorities (e.g., Housing and Redevelopment Authority, Economic Development Authority or Port Authority) may apply for projects in eligible communities.

Submission Date: An original and two (2) copies of each application are due at the Metropolitan Council, Attn: Wayne Nelson, 230 E. Fifth St., St. Paul, MN 55101, by 5 p.m., Tuesday, August 1, 2000.

Amount Available: Approximately \$2.6 million will be available for grants awarded this cycle. Grants will be awarded on a competitive basis. If applications for grants exceed the available funds for this cycle, no more than one-half of the funds may be granted to projects in a single city, and no more than three-quarters of the funds may be granted to projects located in cities of the first class.

Obtain Information: For a copy of the grant application guide and format, contact: Wayne Nelson, Metropolitan Council at (651) 602-1406 or (651) 291-0904 (TTY) or via **email:** wayne.nelson@metc.state.mn.us. The application form may be copied from the Metropolitan Council **web site:** at www.metrocouncil.org under the topic "Planning".

Non-State Public Bids, Contracts & Grants

Metropolitan Council

Public Notice for Request for Proposals for Professional Transit Planning Services

NOTICE OF HEREBY GIVEN that the Metro Transit Division of Metropolitan Council, which provides mass transit services to the Twin Cities area, is soliciting proposals to provide professional planning services for the St. Paul/Minneapolis Regions' Planning Sector 5. Metro Transit Project Number 56215. One of nine in the region, Sector 5 includes all or part of five cities, the International Airport, four major investment transit corridors, one of which is the Twin Cities first rail line.

Qualified firms should have significant prior experience with the development of transit service plans based on analysis of ridership, general trip data, review of cities' comprehensive plans and state and metropolitan government proposals for transit improvements. Innovative transit service delivery concepts will be welcome.

The tentative schedule for selecting a firm for this project is as follows:

Issue Request for Proposals	August 7, 2000
Proposals Due Date	September 12, 2000
Selection of Vendor	October 12, 2000
Notice to Proceed	October 18, 2000

All firms interested in this project should submit a Letter of Interest requesting a copy of the Request for Proposal package. Send or fax requests to:

Administrative Assistant, Contracts and Documents Unit
Metropolitan Council Environmental Services
Mears Park Centre
230 East Fifth Street
St. Paul, MN 55101
Fax: (651) 602-1138

Metropolitan Council

Public Notice for Request for Proposals for Computer Equipment and Professional Services

NOTICE IS HEREBY GIVEN that the Metro Transit Division of Metropolitan Council, which provides mass transit bus services to the Twin Cities area, is soliciting proposals to provide equipment and professional services for the St. Paul/Minneapolis Advanced Regional Transit Communication Management System (SMARTCoM), Metro Transit Project Number 64581, for their Transit Control Center (TCC).

The SMARTCoM will provide a new enhanced and expanded Computer Aided Dispatch (CAD) System, including Automatic Vehicle Location (AVL) and Automated Passenger Counter (APC) technology that will link the TCC to the new digital 800 MHz system. SMARTCoM will be installed on 900+ Metro Transit buses and support vehicles. The project will include design and installation of SMARTCoM software and hardware, console furniture, data base, data base stations, installation of hardware in the TCC, bus garages, vehicles, and remote locations.

Qualified firms should have significant prior experience with development, integration and startup of CAD/AVL and APC systems on comparably sized systems, vehicle and facility installation, project management and coordination.

The tentative schedule for selecting a firm for this project is as follows:

Issue Request for Proposals	July 25, 2000
Pre-Proposal Conference	August 17, 2000
Proposal Due Date	September 26, 2000
Vendor Presentations	October 17-19, 2000
Request Best and Finals Offers (if required)	October 26, 2000
Submittal of Best and Final Offers	November 10, 2000
Selection of Vendor	November 17, 2000
Contract Negotiations	November 20 – December 15, 2000
Council Approval	January 10, 2001
Notice to Proceed	January 19, 2001

Non-State Public Bids, Contracts & Grants

All firms interested in this project should submit a Letter of Interest requesting a copy of the Request for Proposal package. The first copy of the RFP is provided free of charge, additional copies require \$40 per copy with a check made payable to Metropolitan Council.

Send or fax requests to:

Administration Assistant, Contracts and Documents Unit
Metropolitan Council Environmental Services
Mears Park Centre
230 East Fifth Street
St. Paul, MN 55101
Fax: (651) 602-1138

University of Minnesota

Notice of Bid Information Service (BIS) Available for All Potential Vendors

The University of Minnesota offers 24 hour/day, 7 day/week access to all Request for Bids/Proposals through its web based Bid Information Services (BIS). Subscriptions to BIS are \$75/year. Visit our web site at bidinfo.umn.edu or call the BIS Coordinator at 612-625-5534.

Requests for Bids/Proposals are available to the public at no charge each business day from 8:00 a.m. to 4:30 p.m. in Purchasing Services lobby, Suite 560, 1300 S. 2nd Street, Mpls., MN 55454.

University of Minnesota

2000 Prequalification of General Contractors to Perform Construction Services at the University of Minnesota Twin Cities Campus

The University of Minnesota is accepting submittals for its General Contractor Prequalification Program. This year, the University is accepting submittals for both its Small Construction Contract Program, and its Major Construction Contract Program.

Only contractors who have successfully prequalified under this program may bid or propose on construction projects at the University of Minnesota's Twin Cities Campus.

All interested general contractors are required to submit information using the forms provided in the University of Minnesota's General Contractor Prequalification Document Package. Successful prequalification will be determined by evaluation of the information provided in the contractor's completed submittal of this document package.

Prequalification Document Packages will be available for distribution beginning Monday August 14, 2000. The prequalification package contains a hard copy (paper version), and a 3-1/2" IBM compatible diskette (electronic version) containing Microsoft Word 97 for Windows files.

Copies of the document package may be requested any time by contacting Kevin McCourt by **email:** (mccourt@fm.facm.umn.edu), or by **phone:** (612) 626-8973. Requests for document packages will be fulfilled by mail on August 14, 2000. Copies may also be picked up in person beginning August 14, 2000 at the following location:

University of Minnesota
400 Donhowe Building
319 15th Avenue Southeast
Minneapolis, MN 55455

The deadline for submittals is 2:00 p.m. Monday September 14, 2000.

New State Phone Directory & Handbook!

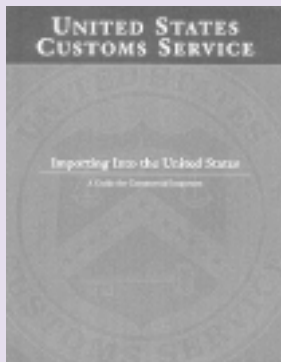


State of Minnesota Telephone Directory 2000-2001

Alphabetical listings of all Minnesota state employees plus state department listings (both metro area and greater Minnesota) including fax numbers, email addresses and TTY numbers. Softcover, 388pp. **Stock No. 1-87 \$13.95**

Handbook to Minnesota State Government

A great companion to the phone book, this easy-to-use handbook features the state agencies under the current Ventura administration. A tremendous resource for all state citizens, this reference will provide the information you need to best utilize the many services and programs provided by our state agencies. Each agency listing features contact information needed to reach the commissioner and other key contacts. You'll find hundreds of addresses, phone numbers, web sites, e-mail addresses, FAX numbers plus a brief outline of what each state agency does for you and photos of several commissioners. Softcover, pp. **Stock No. 1-1 \$7.95**



Gardening Calendar 2001

Stock No. 15-1 \$11.95

Weatherguide Calendar 2001

Stock No. 15-51 \$14.95

State Parks Calendar 2001

Stock No. 15-38 \$8.95



Importing into the United States

Just released, this federal government publication walks you through the commercial import process. Softcover, 109pp. **Stock No. 16-7 \$9.00**

Minnesota Almanac 2000

You're familiar with the Farmer's Almanac. Now check out the new Minnesota Almanac. From employment to sports records, geography to vital statistics, weather facts to business and organized labor-- you'll find scores of interesting facts in this handy reference. Softcover, 394pp. **Stock No. 19-106 \$15.95**

Emergency/Disaster Preparedness:

A Planning Guide for Schools

Developed by the Dept. of Public Safety and Children, Families, and Learning, this guide offers a quick reference for school officials to help them prepare for and respond to a variety of emergencies and other concerns. Topics include: severe weather, suicide, fire, assault/fights, bomb threats, shooting, hazardous materials, and more. Looseleaf with reinforced tabs, 26pp.

Stock No. 19-106 \$15.95

