

PREVAILING RATE/MAXIMUM FEE  
SCHEDULE FOR CHIROPRACTORS

| <u>CPT<br/>CODE</u> | <u>DESCRIPTION</u>   | <u>2009<br/>FEE</u> |
|---------------------|--|---------------------|
| RADIOLOGY           |  |                     |
| 70250               | Radiologic examination, skull less than four views                                 | \$82.14             |
| 70260               | Radiologic examination, skull; complete, minimum of four views                     | \$123.20            |
| 70328               | Radiologic examination, temporomandibular joint, open and closed mouth; unilateral | \$80.50             |
| 70330               | Radiologic examination, temporomandibular joint, open and closed mouth; bilateral  | \$98.57             |
| 71010               | Radiologic examination, chest, single view, frontal                                | \$55.43             |
| 71020               | Radiologic examination, chest, two views frontal and lateral;                      | \$78.52             |
| 71021               | wlth apical lordotic procedure   | \$100.20            |
| 71022               | with oblique projections   | \$108.42            |
| 71030               | Radiologic examination, chest, complete, minimum of four views                     | \$113.35            |
| 71100               | Radiologic examination, ribs, unilateral; two views                                | \$88.72             |
| 71101               | including posteroanterior chest, minimum of three                                  | \$105.14            |
| 71110               | Radiologic examination, ribs, bilateral; three views                               | \$111.70            |
| 71111               | including posteroanterior chest, minimum of four views                             | \$172.48            |
| 71120               | Radiologic examination; sternum, minimum of two views                              | \$87.07             |
| 71130               | sternoclavicular joint or joints, minimum of three views                           | \$92.44             |
| 72010               | Radiologic examination, spine, entire, survey study, anteroposterior and lateral   | \$126.14            |
| 72020               | Radiologic examination, spine, single view, specify level                          | \$59.16             |
| 72040               | Radiologic examination, spine, cervical; two or three views                        | \$80.83             |
| 72050               | minimum of four views  | \$124.49            |
| 72052               | complete, including oblique and flexion and/or extension studies                   | \$140.67            |
| 72069               | Radiologic examination, spine; thoracolumbar, standing (scoliosis)                 | \$77.17             |
| 72070               | Radiologic examination, spine; thoracic, two views                                 | \$92.16             |
| 72072               | thoracic, three views  | \$103.50            |
| 72074               | thoracic, minimum of four views  | \$128.14            |
| 72080               | thoracolumbar, two views   | \$77.17             |
| 72090               | scoliosis study, including spine and erect studies                                 | \$105.14            |
| 72100               | Radiologic examination, spine, lumbosacral; two views                              | \$105.09            |
| 72110               | minimum of four views  | \$139.05            |
| 72114               | complete, including bending views  | \$215.04            |
| 72120               | Radiologic examination, spine, lumbosacral, bending views only, minimum our views  | \$141.28            |
| 72170               | Radiologic examination, pelvis; one or two views                                   | \$78.85             |
| 72190               | complete, minimjum of three views  | \$106.76            |
| 72200               | Radiologic examination, sacroiliac joints; less than three views                   | \$90.35             |
| 72202               | three or more views  | \$100.20            |
| 72220               | Radiologic examination, sacrum and coccyx, minimum of two views                    | \$83.79             |
| 73000               | Radiologic examination; clavicle, complete   | \$67.37             |
| 73010               | scapula, complete  | \$82.14             |

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| 73020                     | Radiologic examination, shoulder; one view  | \$67.37                   |
| 73030                     | complete, minimum of two views  | \$83.79                   |
| 73050                     | Radiologic examination, acromioclavicular joints, bilateral, with or without weighted distraction                   | \$78.85                   |
| 73060                     | humerus, minimum of two views   | \$82.14                   |
| 73070                     | Radiologic examination, elbow; two views  | \$78.85                   |
| 73080                     | complete, minimum of three views  | \$87.07                   |
| 73090                     | Radiologic examination; forearm, two views  | \$78.85                   |
| 73100                     | Radiologic examination, wrist; two views  | \$67.37                   |
| 73110                     | complete, minimum of three views  | \$85.42                   |
| 73120                     | Radiologic examination, hand; two views   | \$62.43                   |
| 73130                     | minimum of three views  | \$80.50                   |
| 73140                     | Radiologic examination, finger(s), minimum of two views   | \$60.77                   |
| 73500                     | Radiologic examination, hip, unilateral; one view   | \$78.85                   |
| 73510                     | complete, minimum of two views  | \$92.60                   |
| 73520                     | Radiologic examination, hips, bilateral, minimum of two views of each hip, including anteroposterior view of pelvis | \$105.14                  |
| 73550                     | Radiologic examination, femur, two views  | \$83.79                   |
| 73560                     | Radiologic examination, knee; one or two views  | \$73.93                   |
| 73562                     | three views   | \$82.79                   |
| 73564                     | complete, four or more views  | \$100.20                  |
| 73565                     | both knees, standing, anteroposterior   | \$133.05                  |
| 73590                     | Radiologic examination; tibia and fibula, two views   | \$80.50                   |
| 73600                     | Radiologic examination, ankle; two views  | \$73.91                   |
| 73610                     | complete, minimum of three views  | \$85.42                   |
| 73620                     | Radiologic examination, foot; two views   | \$62.43                   |
| 73630                     | complete, minimum of three views  | \$85.42                   |
| 73650                     | Radiologic examination; calcaneus, minimum of two views   | \$73.91                   |
| 73660                     | toe(s), minimum of two views  | \$59.16                   |

#### EVALUATION AND MANAGEMENT

|       |  |          |
|-------|--|----------|
| 99201 | Problem focused history;<br>Problem focused examination; and<br>Straightforward medical decision making.                   | \$54.69  |
| 99202 | Expanded problem focused history;<br>Expanded problem focused examination; and<br>Straightforward medical decision making. | \$67.95  |
| 99203 | Detailed history;<br>Detailed examination; and<br>Medical decision making of low complexity.                               | \$96.13  |
| 99204 | Comprehensive history;<br>Comprehensive examination; and<br>Medical decision of moderate complexity.                       | \$116.02 |

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| 99205  | Comprehensive history;<br>Comprehensive examination; and<br>Medical decision making of high complexity.  | \$205.51            |
| 99211  | Office or other outpatient visit for the evaluation and management<br>of an established patient that may not require the presence of a<br>physician. | \$38.11             |
| 99212  | Problem focused history;<br>Problem focused examination; and<br>Straightforward medical decision making.   | \$51.37             |
| 99213  | Expanded problem focused history;<br>Expanded problem focused examination; and<br>Medical decision making of low complexity.                         | \$59.67             |
| 99214  | Detailed history;<br>Detailed examination; and<br>Medical decision making of moderate complexity.  | \$77.90             |
| 99215  | Comprehensive history;<br>Comprehensive examination; and<br>Medical decision making of high complexity.  | \$114.32            |
| 99244  | Comprehensive history;<br>Comprehensive examination; and<br>Medical decision making of moderate complexity.  | \$205.51            |
| 99245  | Comprehensive history;<br>Comprehensive examination; and<br>Medical decision making of high complexity.  | \$227.06            |
| <br>MODALITIES   |  |                     |
| Supervised: The application of a modality that does not require direct<br>(one-on-one) patient contact by the provider.  |  |                     |
| 97012  | Application of a modality to one or more areas; traction mechanical  | \$33.38             |
| 97014  | electrical stimulation (unattended)  | \$29.02             |
| 97016  | vasopneumatic devices  | \$32.65             |
| 97018  | paraffin bath  | \$27.57             |
| 97022  | whirlpool  | \$33.38             |
| 97024  | diathermy (eg, microwave)  | \$24.68             |
| 97026  | infrared   | \$23.22             |
| 97028  | ultraviolet  | \$29.02             |
| Constant attendance: The application of a modality that requires<br>direct (one-on-one) patient contact by the provider. |  |                     |
| 97032  | modality to one or more areas;<br>Application of a modality to one or more areas; electrical stimulation<br>(manual), each 15 minutes                | \$29.02             |
| 97033  | iontophoresis, each 15 minutes   | \$30.47             |
| 97034  | contrast baths, each 15 minutes  | \$23.22             |

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| 97035                     | ultrasound, each 15 minutes   | \$23.95            |
| 97036                     | Hubbard tank, each 15 minutes | \$44.25            |

#### THERAPEUTIC PROCEDURES

Physician or therapist required to have direct (one-on-one) patient contact.

|       |  |         |
|-------|--|---------|
| 97110 | Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility    | \$43.52 |
| 97112 | neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities | \$42.80 |
| 97113 | aquatic therapy with therapeutic exercise  | \$47.87 |
| 97116 | gait training (includes stair climbing)  | \$37.71 |
| 97124 | massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)  | \$34.11 |
| 97140 | Manual therapy techniques (eg, mobilization/manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes            | \$31.69 |
| 97150 | Therapeutic procedure(s), group (2 or more individuals)  | \$35.42 |
| 98940 | Chiropractic manipulative treatment (CMT); spinal one to two regions   | \$36.52 |
| 98941 | spinal, three to four regions  | \$46.34 |
| 98942 | spinal, five regions   | \$57.59 |
| 98943 | extraspinal, one or more regions   | \$33.70 |
| S8945 | Physical medicine treatment (constant attendance by provider) to one area, initial 30 minutes, each visit; phonophoresis                               | \$35.00 |

NOTE 1: Code 97010, Hot or cold packs, shall be global to the procedure(s) performed.

Effective: August 1, 2009