PREVAILING RATE/MAXIMUM PHYSICAL THERAPY/REHABILITATION FEE SCHEDULE

СРТ	2013	СРТ	2013
CODE	FEE	CODE	FEE
97001	\$132.69	97530	\$50.35
97002	\$51.94	97532	\$50.92
97003	\$132.69	97533	\$55.41
97004	\$51.94	97535	\$40.47
97012	\$36.75	97537	\$40.47
97014	\$31.99	97542	\$34.22
97016	\$35.97	97545	\$171.60
97018	\$30.36	97546	\$85.81
97022	\$36.75	97597	\$56.77
97024	\$27.16	97598	\$78.30
97026	\$25.56	97602	\$52.40
97028	\$31.99	97605	\$49.34
97032	\$31.99	97606	\$49.34
97033	\$33.57	97760	\$53.11
97034	\$25.56	97761	\$48.57
97035	\$26.38	97762	\$43.54
97036	\$48.76	97750	\$57.53
97110	\$47.94	97755	\$69.71
97112	\$48.59	90901	\$55.85
97113	\$52.67		
97116	\$41.55		
97124	\$37.56		
97140	\$34.36		
97150	\$39.15		

NOTE 1: Procedures performed, by either a therapist or physician, and listed on this Maximum Physical Therapy/Rehabilitation Fee Schedule shall be reimbursed in accordance with this schedule.

NOTE 2: Procedures performed by either a therapist or physician, and not listed in this schedule, shall be reimbursed in accordance with the CPT codes listed in the Maximum Fee Schedule for Physicians.

NOTE 3: For codes not listed in the Physical Therapy/Rehabilitation Schedule or the Maximum Fee Schedule for Physicians, reimbursement shall be determined by special report and based on usual, customary, and reasonable charges.

NOTE 4: Code 97010, Hot or cold packs, shall be global to the procedure(s) performed.

Effective: January 1, 2013