

**PREVAILING RATE/MAXIMUM
PHYSICAL THERAPY/REHABILITATION FEE SCHEDULE**

CPT	2018	CPT	2018
<u>CODE</u>	<u>FEE</u>	<u>CODE</u>	<u>FEE</u>
90901	\$59.28	97164	\$55.84
97012	\$39.01	97165	\$116.33
97014	\$33.95	97166	\$139.61
97016	\$38.18	97167	\$174.51
97018	\$32.22	97168	\$55.84
97022	\$39.01	97530	\$53.43
97024	\$28.82	97533	\$58.80
97026	\$27.13	97535	\$42.95
97028	\$33.95	97537	\$42.95
97032	\$33.95	97542	\$36.32
97033	\$35.63	97545	\$182.13
97034	\$27.13	97546	\$91.07
97035	\$27.99	97597	\$60.25
97036	\$51.75	97598	\$83.10
97110	\$50.88	97602	\$55.61
97112	\$51.57	97605	\$52.36
97113	\$55.90	97606	\$52.36
97116	\$44.10	97750	\$61.06
97124	\$39.87	97755	\$73.99
97140	\$36.46	97760	\$56.37
97150	\$41.55	97761	\$51.55
97161	\$116.33		
97162	\$139.61		
97163	\$174.51		

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, 2018