

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

CPT CODE	2019 FEE	CPT CODE	2019 FEE
90901	\$60.58	97164	\$57.07
97012	\$39.86	97165	\$118.89
97014	\$34.70	97166	\$142.68
97016	\$39.02	97167	\$178.35
97018	\$32.93	97168	\$57.07
97022	\$39.86	97530	\$54.61
97024	\$29.46	97533	\$60.10
97026	\$27.73	97535	\$43.89
97028	\$34.70	97537	\$43.89
97032	\$34.70	97542	\$37.11
97033	\$36.42	97545	\$186.13
97034	\$27.73	97546	\$93.08
97035	\$28.61	97597	\$61.58
97036	\$52.89	97598	\$84.93
97110	\$52.00	97602	\$56.83
97112	\$52.71	97605	\$53.51
97113	\$57.13	97606	\$53.51
97116	\$45.07	97750	\$62.41
97124	\$40.74	97755	\$75.62
97140	\$37.27	97760	\$57.61
97150	\$42.46	97761	\$52.69
97161	\$118.89	97763	\$49.60
97162	\$142.68		
97163	\$178.35		

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: March 1, 2019