

PROPOSED NOTICE OF PUBLIC INFORMATION
PUBLIC NOTICE

1. **Name of the Agency:** Arizona Health Care Cost Containment System (AHCCCS)
2. **The topic of the public information notice:** AHCCCS Fee-For-Service (FFS) rates for codes currently paid at “By Report” to be effective for dates of service beginning October 1, 2026.
3. **The public information relating to the topic:**

This Notice of Public Information describes changes to the Arizona Health Care Cost Containment System (AHCCCS) Fee-For-Service (FFS) rates to be effective October 1, 2026. The AHCCCS Administration has reviewed the HCPCS/CPT codes that currently have a rate set at 58.66% of billed charges or “By Report” and determined a rate for many of these codes. AHCCCS is proposing updating the FFS rates specified in this Notice to ensure that payments are consistent with efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available to the general population in the geographic area. The estimated cost savings in FFS payments, as a result of setting rates for these codes, is expected to be approximately \$1,856,000 for the time period of October 1, 2026, through September 30, 2027.

The Proposed fee schedule rates affect Clinical Laboratory, Dental, Durable Medical Equipment, and Physician Fee Schedule codes. The proposed rates are located at this [link](#) and are also listed below.

Arizona Health Care Cost Containment System
FFS Program Capped Fee Schedule
Proposed Physician Fee Schedule Rates for Currently Priced By Report Codes
Effective 10/01/2026

| Code | Description | Proposed Rate 10/1/2026 |
|-------|--|----------------------------|
| 20930 | PLACEMENT OF FRAGMENTED BONE GRAFT OR MATERIAL TO SPINE TO PROMOT | \$68.03 |
| 20936 | AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); LC | \$159.96 |
| 21743 | RECONSTRUCTIVE REPAIR OF PECTUS EXCAVATUM OR CARINATUM; MIN | \$1,125.16 |
| 36468 | INJECTION OF CHEMICAL AGENT INTO SPIDER VEIN OF ARM, LEG, OR TRI | \$49.31 |
| 41820 | GINGIVECTOMY, EXCISION GINGIVA, EACH QUADRANT | \$128.76 |
| 41821 | OPERCULECTOMY, EXCISION PERICORONAL TISSUES | \$66.16 |
| 41870 | GRAFT OF MOUTH TISSUE LINING TO GUM SURFACE | \$376.49 |
| 43882 | REMOVAL OR REVISION OF STIMULATOR ELECTRODES IN UPPER STOMW | \$910.82 |
| 53454 | ADJUSTMENT OF FLUID VOLUME IN ADJUSTABLE BALLOON CONTINENCE | \$92.57 |
| 62380 | RELEASE OF LOWER SPINAL CORD AND/OR NERVE ROOT USING ENDO | \$445.46 |
| 64596 | INSERTION OR REPLACEMENT OF A PERIPHERAL INTEGRATED NEUROS | \$1,974.73 |
| 64597 | INSERTION OR REPLACEMENT OF A PERIPHERAL INTEGRATED NEUROS | \$371.16 |
| 66988 | REMOVAL OF CATARACT WITH INSERTION OF PROSTHETIC LENS AND LA | \$404.87 |
| 93318 | ULTRASOUND OF HEART WITH PROBE IN ESOPHAGUS TO ASSESS HEAR | \$226.49 |
| 93593 | INSERTION OF CATHETER INTO RIGHT SIDE OF HEART FOR EVALUATION | \$133.69 |
| 93594 | INSERTION OF CATHETER INTO RIGHT SIDE OF HEART FOR EVALUATION | \$246.69 |
| 93595 | INSERTION OF CATHETER INTO LEFT SIDE OF HEART FOR EVALUATION (| \$285.86 |
| 93596 | INSERTION OF CATHETER INTO RIGHT AND LEFT SIDES OF HEART FOR E | \$360.27 |
| 93597 | INSERTION OF CATHETER INTO RIGHT AND LEFT SIDES OF HEART FOR E | \$430.07 |
| 94772 | TEST TO RECORD INFANT BREATHING PATTERN OVER 12 | \$78.35 |
| 94777 | TEST TO MONITOR PEDIATRIC BREATHING AND HEART RATE AT HOME IN | \$29.21 |
| 95130 | PROFESSIONAL SERVICE FOR INJECTION OF 1 STINGING INSECT VENOM | \$12.69 |
| 95700 | MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), CONTINUOUS | \$224.23 |
| 95705 | MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 2 | \$128.81 |
| 95706 | MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 2 | \$251.77 |
| 95707 | MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 2 | \$272.09 |
| 95708 | MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 12 | \$211.14 |
| 95709 | MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 12 | \$384.68 |
| 95710 | MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 12 | \$414.66 |
| 95711 | MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 2-12 hours | \$143.33 |
| 95712 | MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 2 monitore | \$330.58 |
| 95713 | MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 2 intermite | \$425.39 |
| 95714 | MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 12 | \$208.47 |
| 95715 | MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 12 | \$525.81 |
| 95716 | MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 12-26 hour | \$696.84 |
| 95965 | MEASUREMENT OF BRAIN MAGNETIC FIELD FOR SPONTANEOUS BRAIN M | \$720.79 |
| 95966 | MEASUREMENT OF BRAIN EXTERNALLY EVOKED MAGNETIC FIELD, SINGL | \$349.55 |
| 95967 | MEASUREMENT OF BRAIN EXTERNALLY EVOKED MAGNETIC FIELD, EACH | \$277.44 |
| 96376 | INJECTION OF ADDITIONAL DRUG OR SUBSTANCE INTO VEIN PROVIDED I | \$16.31 |
| 97602 | REMOVAL OF TISSUE FROM WOUND GRADUALLY | \$22.55 |
| 98978 | DEVICE SUPPLY FOR DATA ACCESS OR DATA TRANSMISSIONS TO SUPP | \$44.02 |
| 99051 | SERVICE PROVIDED IN AN OFFICE DURING REGULARLY SCHEDULED OFF | \$8.86 |
| 99601 | HOME INFUSION OR SPECIALTY DRUG ADMINISTRATION, PER VISIT, HOUF | \$136.23 |
| 99602 | HOME INFUSION OR SPECIALTY DRUG ADMINISTRATION, PER VISIT, EACH | \$4.63 |
| G0260 | INJECTION PROCEDURE FOR SACRO ILIAC JOINT; PROVISION OF ANESTH | \$94.62 |
| G0269 | PLACEMENT OF OCCLUSME DEVICE INTO EITHER A VENOUS OR ARTERI | \$77.20 |
| P9023 | PLASMA, POOLED MULTIPLE DONOR, SOLVENT/DETERGENT TREATED, F | \$0.85 |
| P9032 | PLATELETS, IRRADIATED, EACH UNIT | \$69.25 |
| P9038 | RED BLOOD CELLS, IRRADIATED, EACH UNIT | \$141.21 |
| P9039 | RED BLOOD CELLS, DEGLYCEROLIZED, EACH UNIT | \$266.34 |
| P9040 | RED BLOOD CELLS, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT | \$185.37 |
| P9051 | WHOLE BLOOD OR RED BLOOD CELLS, LEUKOCYTES REDUCED, CMV | \$117.66 |
| P9055 | PLATELETS, LEUKOCYTES REDUCED, CMV | \$137.47 |

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| P9056 | WHOLE BLOOD, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT | \$89.57 |
| P9057 | RED BLOOD CELLS, FROZEN/DEGLYCEROLIZED/WASHED, LEUKOCYTES | \$143.60 |
| P9058 | RED BLOOD CELLS, LEUKOCYTES REDUCED, CMV | \$172.69 |
| P9073 | PLATELETS, PHERESIS, PATHOGEN | \$471.77 |
| P9100 | PATHOGEN(S) TEST FOR PLATELETS | \$33.95 |
| P9603 | TRAVEL ALLOWANCE ONE WAY IN CONNECTION WITH MEDICALLY NECE: | \$0.84 |
| P9604 | TRAVEL ALLOWANCE ONE WAY IN CONNECTION WITH MEDICALLY NECE: | \$4.02 |
| R0076 | TRANSPORTATION OF PORTABLE EKG TO FACILITY OR LOCATION, PER | \$28.45 |
| S1040 | CRANIAL REMOLDING ORTHOSIS, PEDIATRIC, RIGID, WITH SOFT INTERFA | \$1,298.92 |
| S2083 | ADJUSTMENT OF GASTRIC BAND DIAMETER VIA SUBCUTANEOUS PORT E | \$30.83 |
| S5498 | HOME INFUSION THERAPY, CATHETER CARE / MAINTENANCE, SIMPLE (SII | \$3.35 |
| S5501 | HOME INFUSION THERAPY, CATHETER CARE / MAINTENANCE, COMPLEX / | \$4.91 |
| S5502 | HOME INFUSION THERAPY, CATHETER CARE / MAINTENANCE, IMPLANTED | \$7.25 |
| S8265 | HABERMAN FEEDER FOR CLEFT LIP/PALATE | \$19.27 |
| S8270 | ENURESIS ALARM, USING AUDITORY BUZZER AND/OR VIBRATION DEVICE | \$54.00 |
| S9327 | HOME INFUSION THERAPY, INTERMITTENT (LESS THAN TWENTY | \$17.00 |
| S9328 | HOME INFUSION THERAPY, IMPLANTED PUMP PAIN MANAGEMENT INFUSIO | \$25.25 |
| S9331 | HOME INFUSION THERAPY, INTERMITTENT (LESS THAN TWENTY | \$19.39 |
| S9336 | HOME INFUSION THERAPY, CONTINUOUS ANTICOAGULANT INFUSION THE | \$32.11 |
| S9338 | S9338 - HOME INFUSION THERAPY, IMMUNOTHERAPY, ADMINISTRATIVE SE | \$62.08 |
| S9346 | HOME INFUSION THERAPY, ALPHA-1-PROTEINASE INHIBITOR (E.G., PROLA | \$26.02 |
| S9347 | HOME INFUSION THERAPY, UNINTERRUPTED, LONG | \$27.22 |
| S9348 | HOME INFUSION THERAPY, SYMPATHOMIMETIC/INOTROPIC AGENT INFUS | \$36.20 |
| S9351 | HOME INFUSION THERAPY, CONTINUOUS OR INTERMITTENT ANTI | \$31.00 |
| S9353 | HOME INFUSION THERAPY, CONTINUOUS INSULIN INFUSION THERAPY; AD | \$32.84 |
| S9357 | HOME INFUSION THERAPY, ENZYME REPLACEMENT INTRAVENOUS THER | \$29.73 |
| S9359 | HOME INFUSION THERAPY, ANTI-TUMOR NECROSIS FACTOR INTRAVENOU | \$32.95 |
| S9361 | HOME INFUSION THERAPY, DIURETIC INTRAVENOUS THERAPY; ADMINISTF | \$40.56 |
| S9365 | HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); ONE LI | \$60.49 |
| S9367 | HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE | \$65.08 |
| S9368 | HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE | \$81.12 |
| S9370 | HOME THERAPY, INTERMITTENT ANTI-EMETIC INJECTION THERAPY; ADMIN | \$18.93 |
| S9372 | HOME THERAPY; INTERMITTENT ANTICOAGULANT INJECTION THERAPY (E | \$13.80 |
| S9373 | HOME INFUSION THERAPY, HYDRATION THERAPY; ADMINISTRATIVE SERV | \$60.05 |
| S9374 | HOME INFUSION THERAPY, HYDRATION THERAPY; ONE LITER PER DAY, A | \$28.70 |
| S9375 | HOME INFUSION THERAPY, HYDRATION THERAPY; MORE THAN ONE LITEI | \$29.26 |
| S9376 | HOME INFUSION THERAPY, HYDRATION THERAPY; MORE THAN TWO LITE | \$30.30 |
| S9377 | HOME INFUSION THERAPY, HYDRATION THERAPY; MORE THAN THREE LI | \$28.84 |
| S9470 | NUTRITIONAL COUNSELING, DIETITIAN VISIT | \$55.43 |
| S9490 | HOME INFUSION THERAPY, CORTICOSTEROID INFUSION; ADMINISTRATIV | \$69.02 |
| S9494 | HOME INFUSION THERAPY, ANTIBIOTIC, ANTMIRAL, OR ANTIFUNGAL THER | \$33.29 |
| S9500 | HOME INFUSION THERAPY, ANTIBIOTIC, ANTMIRAL, OR ANTIFUNGAL THER | \$32.99 |
| S9501 | HOME INFUSION THERAPY, ANTIBIOTIC, ANTMIRAL, OR ANTIFUNGAL THER | \$33.50 |
| S9502 | HOME INFUSION THERAPY, ANTIBIOTIC, ANTMIRAL, OR ANTIFUNGAL THER | \$34.38 |
| S9503 | HOME INFUSION THERAPY, ANTIBIOTIC, ANTMIRAL, OR ANTIFUNGAL; ONC | \$35.55 |
| S9504 | HOME INFUSION THERAPY, ANTIBIOTIC, ANTMIRAL, OR ANTIFUNGAL; ONC | \$35.29 |
| P9037 | PLATELETS, PHERESIS, LEUKOCYTES REDUCED, IRRADIATED, EACH UN | \$49.50 |
| P9044 | PLASMA, CRYOPRECIPITATE REDUCED, EACH UNIT | \$36.11 |
| P9059 | FRESH FROZEN PLASMA BETWEEN 8 | \$50.62 |
| P9060 | FRESH FROZEN PLASMA, DONOR RETESTED, EACH UNIT | \$60.47 |

Arizona Health Care Cost Containment System
FFS Program Capped Fee Schedule
Proposed Durable Medical Equipment Rates Currently Priced at By Report
Effective 10/01/2026

| Code | Description | Proposed Rate 10/1/2026 |
|-------------|---|------------------------------------|
| A4212 | NON-CORING NEEDLE OR STYLET WITH OR WITHOUT CATHE | \$5.88 |
| A4218 | STERILE SALINE OR WATER, METERED DOSE DISPENSER, 1 | \$0.38 |
| A4230 | INFUSION SET FOR EXTERNAL INSULIN PUMP, NON NEEDLE | \$7.64 |
| A4231 | INFUSION SET FOR EXTERNAL INSULIN PUMP, NEEDLE TYPE | \$4.13 |
| A4248 | CHLORHEXIDINE CONTAINING ANTISEPTIC, 1 ML | \$0.03 |
| A4250 | URINE TEST OR REAGENT STRIPS OR TABLETS (100 TABLET | \$21.80 |
| A4252 | BLOOD KETONE TEST OR REAGENT STRIP, EACH | \$2.15 |
| A4266 | DIAPHRAGM FOR CONTRACEPTIVE USE | \$32.41 |
| A4267 | CONTRACEPTIVE SUPPLY, CONDOM, MALE, EACH | \$0.26 |
| A4268 | CONTRACEPTIVE SUPPLY, CONDOM, FEMALE, EACH | \$0.12 |
| A4269 | CONTRACEPTIVE SUPPLY, SPERMICIDE (E.G., FOAM, GEL), E | \$0.53 |
| A4281 | TUBING FOR BREAST PUMP, REPLACEMENT | \$8.17 |
| A4282 | ADAPTER FOR BREAST PUMP, REPLACEMENT | \$10.40 |
| A4283 | CAP FOR BREAST PUMP BOTTLE, REPLACEMENT | \$2.37 |
| A4285 | POLYCARBONATE BOTTLE FOR USE WITH BREAST PUMP, R | \$3.95 |
| A4286 | LOCKING RING FOR BREAST PUMP, REPLACEMENT | \$3.10 |
| A4305 | DISPOSABLE DRUG DELIVERY SYSTEM, FLOW RATE OF 50 M | \$6.86 |
| A4306 | DISPOSABLE DRUG DELIVERY SYSTEM, FLOW RATE OF LES | \$9.47 |
| A4483 | MOISTURE EXCHANGER, DISPOSABLE, FOR USE WITH INVAS | \$4.30 |
| A4490 | SURGICAL STOCKINGS ABOVE KNEE LENGTH, EACH | \$13.31 |
| A4495 | SURGICAL STOCKINGS THIGH LENGTH, EACH | \$13.43 |
| A4500 | SURGICAL STOCKINGS BELOW KNEE LENGTH, EACH | \$8.90 |
| A4510 | SURGICAL STOCKINGS FULL LENGTH, EACH | \$15.20 |
| A4663 | BLOOD PRESSURE CUFF ONLY | \$13.45 |
| A4670 | AUTOMATIC BLOOD PRESSURE MONITOR | \$34.17 |
| A4802 | PROTAMINE SULFATE, FOR HEMODIALYSIS, PER 50 MG | \$14.85 |
| A4930 | GLOVES, STERILE, PER PAIR | \$0.52 |
| A5510 | FOR DIABETICS ONLY, DIRECT FORMED, COMPRESSION MC | \$36.20 |
| A6025 | GEL SHEET FOR DERMAL OR EPIDERMAL APPLICATION, (E.C | \$33.59 |
| A6198 | ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND CO | \$20.96 |
| A6206 | CONTACT LAYER, STERILE, 16 SQ. IN. OR LESS, EACH DRES | \$0.83 |
| A6213 | FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE MORE | \$11.26 |
| A6215 | FOAM DRESSING, WOUND FILLER, STERILE, PER GRAM | \$6.22 |
| A6217 | GAUZE, NON-IMPREGNATED, NON-STERILE, PAD SIZE MORE | \$0.16 |
| A6218 | GAUZE, NON-IMPREGNATED, NON-STERILE, PAD SIZE MORE | \$0.44 |
| A6221 | GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE MORE THAN | \$1.14 |
| A6230 | A6230 - GAUZE, IMPREGNATED, WATER OR NORMAL SALINE, | \$1.83 |
| A6239 | HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD | \$4.39 |
| A6250 | SKIN SEALANTS, PROTECTANTS, MOISTURIZERS, OINTMENT | \$3.29 |
| A6256 | SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STER | \$1.80 |
| A6404 | GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE MORE THAN | \$0.73 |
| A6411 | EYE PAD, NON-STERILE, EACH | \$0.26 |
| A6412 | EYE PATCH, OCCLUSIVE, EACH | \$1.39 |
| A6413 | ADHESIVE BANDAGE, FIRST-AID TYPE, ANY SIZE, EACH | \$0.35 |
| A6460 | SYNTHETIC RESORBABLE WOUND DRESSING, STERILE, PAI | \$6.74 |
| A6461 | SYNTHETIC RESORBABLE WOUND DRESSING, STERILE, PAI | \$8.18 |
| A6501 | COMPRESSION BURN GARMENT, BODYSUIT (HEAD TO FOOT | \$103.25 |
| A6511 | COMPRESSION BURN GARMENT, LOWER TRUNK INCLUDING | \$102.88 |
| A8002 | HELMET, PROTECTIVE, SOFT, CUSTOM FABRICATED, INCLU | \$195.42 |
| A8003 | HELMET, PROTECTIVE, HARD, CUSTOM FABRICATED, INCLU | \$327.20 |
| A9274 | EXTERNAL AMBULATORY INSULIN DELIVERY SYSTEM, DISPO | \$25.25 |
| A9276 | SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FO | \$11.84 |
| A9277 | TRANSMITTER; EXTERNAL, FOR USE WITH NON | \$522.65 |
| A9278 | RECEIVER (MONITOR); EXTERNAL, FOR USE WITH NON | \$413.71 |
| A9281 | REACHING/GRABBING DEVICE, ANY TYPE, ANY LENGTH, EAC | \$20.81 |
| A9286 | HYGIENIC ITEM OR DEVICE, DISPOSABLE OR NON | \$0.24 |
| A9500 | TECHNETIUM TC-99M SESTAMIBI, DIAGNOSTIC, PER STUDY D | \$58.54 |
| A9506 | GRAPHITE CRUCIBLE FOR PREPARATION OF TECHNETIUM T | \$310.00 |
| A9580 | SODIUM FLUORIDE F-18, DIAGNOSTIC, PER STUDY DOSE, UP | \$300.00 |
| B4100 | FOOD THICKENER, ADMINISTERED ORALLY, PER OUNCE | \$1.03 |
| B4102 | ENTERAL FORMULA, FOR ADULTS, USED TO REPLACE FLUID | \$3.85 |
| B4103 | ENTERAL FORMULA, FOR PEDIATRICS, USED TO REPLACE F | \$2.96 |
| B4104 | ADDITIVE FOR ENTERAL FORMULA (E.G. FIBER) | \$0.06 |

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| B4105 | In-line cartridge containing digestive enzyme(s) for enteral feeding, | \$145.95 |
| B4157 | ENTERAL FORMULA, NUTRITIONALLY COMPLETE, FOR SPEC | \$4.16 |
| B4158 | ENTERAL FORMULA, FOR PEDIATRICS, NUTRITIONALLY COM | \$1.46 |
| B4159 | ENTERAL FORMULA, FOR PEDIATRICS, NUTRITIONALLY COM | \$1.99 |
| B4160 | ENTERAL FORMULA, FOR PEDIATRICS, NUTRITIONALLY COM | \$0.90 |
| B4161 | ENTERAL FORMULA, FOR PEDIATRICS, HYDROLYZED/AMINO | \$2.79 |
| B4162 | ENTERAL FORMULA, FOR PEDIATRICS, SPECIAL METABOLIC | \$3.10 |
| B5200 | PARENTERAL NUTRITION SOLUTION COMPOUNDED AMINO A | \$2.23 |
| E0170 | COMMUNE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM | \$276.89 |
| E0183 | POWERED PRESSURE REDUCING UNDERLAY/PAD, ALTERN | \$111.62 |
| E0190 | POSITIONING CUSHION/PILLOW/WEDGE, ANY SHAPE OR SZ | \$49.31 |
| E0241 | BATH TUB WALL RAIL, EACH | \$20.47 |
| E0242 | BATH TUB RAIL, FLOOR BASE | \$24.64 |
| E0243 | TOILET RAIL, EACH | \$31.89 |
| E0244 | RAISED TOILET SEAT | \$24.87 |
| E0245 | TUB STOOL OR BENCH | \$41.57 |
| E0246 | TRANSFER TUB RAIL ATTACHMENT | \$56.27 |
| E0247 | TRANSFER BENCH FOR TUB OR TOILET WITH OR WITHOUT | \$42.21 |
| E0248 | TRANSFER BENCH, HEAVY DUTY, FOR TUB OR TOILET WITH | \$75.50 |
| E0273 | BED BOARD | \$23.45 |
| E0274 | OVER-BED TABLE | \$49.50 |
| E0277 | POWERED PRESSURE-REDUCING AIR MATTRESS | \$951.81 |
| E0301 | HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT C, | \$1,135.56 |
| E0302 | HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WE | \$3,354.62 |
| E0303 | HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT C, | \$1,170.90 |
| E0304 | HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WE | \$3,961.62 |
| E0315 | BED ACCESSORY: BOARD, TABLE, OR SUPPORT DEVICE, AI | \$35.65 |
| E0371 | NONPOWERED ADVANCED PRESSURE REDUCING OVERLA | \$1,753.96 |
| E0373 | NONPOWERED ADVANCED PRESSURE REDUCING MATTRE: | \$2,031.37 |
| E0445 | OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVEL | \$498.66 |
| E0470 | RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABI | \$943.84 |
| E0471 | RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABI | \$1,959.92 |
| E0472 | RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABI | \$2,917.22 |
| E0482 | COUGH STIMULATING DEVICE, ALTERNATING POSITIVE AND I | \$1,596.90 |
| E0483 | HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM, INCL | \$7,210.30 |
| E0574 | ULTRASONIC/ELECTRONIC AEROSOL GENERATOR WITH SM | \$232.46 |
| E0603 | BREAST PUMP, ELECTRIC (AC AND/OR DC), ANY TYPE | \$82.47 |
| E0604 | BREAST PUMP, HOSPITAL GRADE, ELECTRIC (AC AND / OR D | \$111.20 |
| E0606 | POSTURAL DRAINAGE BOARD | \$143.69 |
| E0617 | EXTERNAL DEFIBRILLATOR WITH INTEGRATED ELECTROCA | \$2,558.15 |
| E0618 | APNEA MONITOR, WITHOUT RECORDING FEATURE | \$494.27 |
| E0619 | APNEA MONITOR, WITH RECORDING FEATURE | \$1,151.29 |
| E0639 | PATIENT LIFT, MOVEABLE FROM ROOM TO ROOM WITH DISA | \$1,276.88 |
| E0641 | STANDING FRAME/TABLE SYSTEM, MULTI-POSITION (E.G. THF | \$593.38 |
| E0656 | SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMA | \$367.72 |
| E0657 | SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMA | \$394.79 |
| E0779 | AMBULATORY INFUSION PUMP, MECHANICAL, REUSABLE, FO | \$93.27 |
| E0784 | EXTERNAL AMBULATORY INFUSION PUMP, INSULIN | \$3,767.96 |
| E0911 | TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACI | \$324.66 |
| E0955 | WHEELCHAIR ACCESSORY, HEADREST, CUSHIONED, ANY T | \$175.62 |

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| E0958 | MANUAL WHEELCHAIR ACCESSORY, ONE-ARM DRIVE ATTACHMENT | \$218.34 |
| E0983 | MANUAL WHEELCHAIR ACCESSORY, POWER ADD-ON TO CAPTAIN'S CHAIR | \$1,603.45 |
| E0988 | MANUAL WHEELCHAIR ACCESSORY, LEVER-ACTIVATED, WHEEL LOCKS | \$2,854.72 |
| E1010 | WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM | \$948.13 |
| E1012 | WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM | \$953.08 |
| E1030 | WHEELCHAIR ACCESSORY, VENTILATOR TRAY, GIMBALED | \$915.89 |
| E1035 | MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED | \$4,550.42 |
| E1036 | MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE | \$5,100.05 |
| E1037 | TRANSPORT CHAIR, PEDIATRIC SIZE | \$922.39 |
| E1038 | TRANSPORT CHAIR, ADULT SIZE, PATIENT WEIGHT CAPACITY | \$134.44 |
| E1050 | FULLY-RECLINING WHEELCHAIR, FIXED FULL LENGTH ARMS, DESK | \$893.90 |
| E1060 | FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS, DESK | \$1,170.96 |
| E1086 | HEMI-WHEELCHAIR DETACHABLE ARMS DESK OR FULL LENGTH | \$588.45 |
| E1225 | WHEELCHAIR ACCESSORY, MANUAL SEMI-RECLINING BACK, ADJUSTABLE | \$229.84 |
| E1228 | SPECIAL BACK HEIGHT FOR WHEELCHAIR | \$251.27 |
| E1232 | WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE | \$2,010.69 |
| E1233 | WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE | \$2,187.16 |
| E1235 | WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITH SEATING | \$2,037.79 |
| E1236 | WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITH SEATING | \$1,517.85 |
| E1237 | WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITHOUT SEATING | \$1,679.19 |
| E1238 | WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITH SEATING | \$1,534.20 |
| E1290 | HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) | \$825.63 |
| E1300 | WHIRLPOOL, PORTABLE (OVERTUB TYPE) | \$186.46 |
| E1392 | PORTABLE OXYGEN CONCENTRATOR, RENTAL | \$47.17 |
| E1600 | DELIVERY AND/OR INSTALLATION CHARGES FOR HEMODIALYSIS | \$327.44 |
| E1639 | SCALE, EACH | \$22.78 |
| E1800 | DYNAMIC ADJUSTABLE ELBOW EXTENSION AND FLEXION DEVICE, INCL | \$1,282.41 |
| E1802 | DYNAMIC ADJUSTABLE FOREARM PRONATION/SUPINATION DEVICE, INCL | \$3,530.37 |
| E1803 | DYNAMIC ADJUSTABLE ELBOW EXTENSION ONLY DEVICE, INCLUDING | \$1,091.76 |
| E1804 | DYNAMIC ADJUSTABLE ELBOW FLEXION ONLY DEVICE, INCLUDING | \$1,091.76 |
| E1805 | DYNAMIC ADJUSTABLE WRIST EXTENSION AND FLEXION DEVICE, INCL | \$1,269.90 |
| E1807 | DYNAMIC ADJUSTABLE WRIST EXTENSION ONLY DEVICE, INCLUDING | \$1,110.91 |
| E1808 | DYNAMIC ADJUSTABLE WRIST FLEXION ONLY DEVICE, INCLUDING | \$1,110.91 |
| E1810 | DYNAMIC ADJUSTABLE KNEE EXTENSION AND FLEXION DEVICE, INCL | \$1,031.63 |
| E1814 | DYNAMIC ADJUSTABLE KNEE FLEXION ONLY DEVICE, INCLUDING | \$1,255.39 |
| E1815 | DYNAMIC ADJUSTABLE ANKLE EXTENSION AND FLEXION DEVICE, INCL | \$1,269.90 |
| E1822 | DYNAMIC ADJUSTABLE ANKLE EXTENSION ONLY DEVICE, INCLUDING | \$1,110.91 |
| E1825 | DYNAMIC ADJUSTABLE FINGER EXTENSION AND FLEXION DEVICE, INCL | \$1,269.90 |
| E1826 | DYNAMIC ADJUSTABLE FINGER EXTENSION ONLY DEVICE, INCLUDING | \$1,110.91 |
| E1827 | DYNAMIC ADJUSTABLE FINGER FLEXION ONLY DEVICE, INCLUDING | \$1,110.91 |
| E1828 | DYNAMIC ADJUSTABLE TOE EXTENSION ONLY DEVICE, INCLUDING | \$1,110.91 |
| E1829 | DYNAMIC ADJUSTABLE TOE FLEXION ONLY DEVICE, INCLUDING | \$1,110.91 |
| E1840 | DYNAMIC ADJUSTABLE SHOULDER FLEXION / ABDUCTION / FLEXION DE | \$2,869.43 |
| E2000 | GASTRIC SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY | \$451.88 |
| E2291 | BACK, PLANAR, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING | \$176.97 |
| E2292 | SEAT, PLANAR, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING | \$181.52 |
| E2293 | BACK, CONTOURED, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING | \$219.98 |
| E2294 | SEAT, CONTOURED, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING | \$219.98 |
| E8002 | GAIT TRAINER, PEDIATRIC SIZE, ANTERIOR SUPPORT, INCLUDING | \$2,556.17 |
| K0738 | PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL, HOME CONSUMPTION | \$47.17 |
| K0813 | POWER WHEELCHAIR GRP 1 STD. PORTABLE SLING/SOLID SEAT/BACK | \$1,425.02 |
| K0814 | POWER WHEELCHAIR, GRP 1 STANDARD PORTABLE CAPTAIN'S CHAIR | \$1,694.09 |
| K0815 | POWER WHEELCHAIR GRP 1, STD. SLING/SOLID SEAT & BACK | \$1,942.62 |
| K0816 | POWER WHEELCHAIR, GRP 1 STD. CAPTAIN'S CHAIR PT. WEIGHT | \$1,846.74 |
| K0820 | POWER WHEELCHAIR, GRP 2 STD. PORTABLE PT. WEIGHT | \$2,160.47 |
| K0821 | POWER WHEELCHAIR, GRP 2 STD. PORTABLE, CAPTAIN'S CHAIR | \$1,812.88 |
| K0822 | POWER WHEELCHAIR, GRP 2 STD. SLING/SOLID SEAT/BACK | \$2,146.95 |
| K0823 | POWER WHEELCHAIR, GRP 2 STD/ CAPTAIN'S CHAIR, PT WEIGHT | \$2,012.05 |
| K0824 | POWER WHEELCHAIR, GRP 2, HEAVY DUTY, SLING/SOLID SEAT/BACK | \$2,700.12 |
| K0825 | POWER WHEELCHAIR, GRP. 2 HEAVY DUTY, CAPTAIN'S CHAIR | \$2,502.83 |

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| K0826 | POWER WHEELCHAIR, GRP 2 VERY HEAVY DUTY, SLING/SOI | \$3,808.04 |
| K0827 | POWER WHEELCHAIR, GRP 2, VERY HEAVY DUTY, CAPTAINS | \$3,197.29 |
| K0828 | POWER WHEELCHAIR, GRP 2 EXTRA HEAVY DUTY, SLING/SC | \$7,251.55 |
| K0829 | POWER WHEELCHAIR, GRP. 2 EXTRA HEAVY DUTY, CAPTAIN | \$7,009.02 |
| K0831 | POWER WHEELCHAIR, GRP 2 STD SEAT ELEVATOR, CAPTAI | \$1,762.79 |
| K0835 | POWER WHEELCHAIR, GRP 2 STD, SINGLE POWER OPTION | \$2,269.73 |
| K0836 | POWER WHEELCHAIR, GRP 2 STD, SINGLE POWER OPTION | \$2,341.56 |
| K0837 | POWER WHEELCHAIR GRP 2 HEAVY DUTY SINGLE POWER C | \$2,756.77 |
| K0838 | POWER WHEELCHAIR, GRP 2 HVY DUTY SINGLE POWER OF | \$2,317.83 |
| K0839 | POWER WHEELCHAIR GRP 2 VERY HEAVY DUTY SINGLE PO | \$3,601.68 |
| K0840 | POWER WHEELCHAIR GRP 2 EXTRA HEAVY DUTY, SINGLE P | \$5,337.51 |
| K0841 | POWER WHEELCHAIR GRP 2 STD MULTIPLE POWER OPTIO | \$2,447.45 |
| K0842 | POWER WHEELCHAIR GRP 2 STD MULTIPLE POWER OPTIO | \$2,425.25 |
| K0843 | POWER WHEELCHAIR GRP 2 HVY DUTY MULTIPLE POWER C | \$2,448.77 |
| K0848 | POWER WHEELCHAIR GRP 3 STD SLING/SOLID SEAT/BACK I | \$3,478.83 |
| K0849 | POWER WHEELCHAIR, GRP 3 STD, CAPTAINS CHAIR PT WT | \$3,329.69 |
| K0850 | POWER WHEELCHAIR GRP 3 HVY DUTY SLING/DOLID SEAT/E | \$4,034.82 |
| K0851 | POWER WHEELCHAIR, GRP 3 HVY DUTY, CAPTAINS CHAIR, F | \$3,879.44 |
| K0852 | POWER WHEELCHAIR, GRP 3 VERY HVY DUTY SLING/SOLID | \$4,647.14 |
| K0853 | POWER WHEELCHAIR GRP 3 VERY HVY DUTY CAPTAINS CH | \$4,774.22 |
| K0854 | POWER WHEELCHAIR, GRP 3 EX. HVY DUTY SLING/SOLID SE | \$6,272.30 |
| K0855 | POWER WHEELCHAIR, GRP 3 EX. HVY DUTY CAPTAINS CHAI | \$5,913.17 |
| K0856 | POWER WHEELCHAIR, GRP 3 STD. SINGLE POWER OPTION | \$3,718.79 |
| K0857 | POWER WHEELCHAIR, GRP 3 STD SINGLE POWER OPTION | \$3,725.26 |
| K0858 | POWER WHEELCHAIR GRP 3 HVY DTY SINGLE POWER OPT. | \$4,617.65 |
| K0859 | POWER WHEELCHAIR, GRP 3 HVY DUTY SINGLE POWER OF | \$4,418.24 |
| K0860 | POWER WHEELCHAIR, GRP 3 VRY HVY DUTY SINGLE POWE | \$6,574.31 |
| K0861 | POWER WHEELCHAIR, GRP 3 STD. MULTI POWER OPT. SLIN | \$4,021.97 |
| K0862 | POWER WHEELCHAIR, GRP 3 HVY DUTY MULTIPLE POWER I | \$4,617.66 |
| K0863 | POWR ER WHEELCHAIR, GRP 3 VRY HVY DUTY MULTI POWE | \$6,574.36 |
| K0864 | POWER WHEELCHAIR GRP 3 EX. HVY DUTY MULTI POWER C | \$7,823.47 |
| K0884 | POWER WHEELCHAIR, GRP 4 STD. MULTIPLE POWER OPTIC | \$10,916.46 |
| K0890 | POWER WHEELCHAIR GRP 5 PED. SINGLE POWER OPTION | \$8,117.10 |
| L2861 | ADDITION TO LOWER EXTREMITY JOINT, KNEE OR ANKLE, C | \$272.16 |
| L3201 | ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONA | \$33.33 |
| L3202 | ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONA | \$33.33 |
| L3203 | ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONA | \$34.36 |
| L3204 | ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONA | \$31.44 |
| L3206 | ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONA | \$35.28 |
| L3207 | ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONA | \$35.89 |
| L3208 | SURGICAL BOOT, EACH, INFANT | \$18.60 |
| L3209 | SURGICAL BOOT, EACH, CHILD | \$38.63 |
| L3211 | SURGICAL BOOT, EACH, JUNIOR | \$35.29 |
| L3212 | BENESCH BOOT, PAIR, INFANT | \$36.04 |
| L3213 | BENESCH BOOT, PAIR, CHILD | \$44.59 |
| L3214 | BENESCH BOOT, PAIR, JUNIOR | \$48.50 |
| L3216 | ORTHOPEDIC FOOTWEAR, LADIES SHOE, DEPTH INLAY, EAC | \$52.66 |
| L3217 | ORTHOPEDIC FOOTWEAR, LADIES SHOE, HIGHTOP, DEPTH | \$57.82 |
| L3221 | ORTHOPEDIC FOOTWEAR, MENS SHOE, DEPTH INLAY, EACI | \$59.51 |
| L3222 | ORTHOPEDIC FOOTWEAR, MENS SHOE, HIGHTOP, DEPTH II | \$66.13 |
| L3230 | ORTHOPEDIC FOOTWEAR, CUSTOM SHOE, DEPTH INLAY, E | \$82.34 |
| L3250 | ORTHOPEDIC FOOTWEAR, CUSTOM MOLDED SHOE, REMO | \$148.43 |
| L3251 | FOOT, SHOE MOLDED TO PATIENT MODEL, SILICONE SHOE | \$71.94 |
| L3252 | FOOT, SHOE MOLDED TO PATIENT MODEL, PLASTAZOTE (O | \$124.86 |
| L3253 | FOOT, MOLDED SHOE PLASTAZOTE (OR SIMILAR) CUSTOM I | \$35.92 |
| L3257 | ORTHOPEDIC FOOTWEAR, ADDITIONAL CHARGE FOR SPLIT | \$16.05 |
| L3260 | SURGICAL BOOT/SHOE, EACH | \$16.29 |
| L3265 | PLASTAZOTE SANDAL, EACH | \$16.16 |
| L3320 | LIFT, ELEVATION, HEEL AND SOLE, CORK, PER INCH | \$69.55 |
| L3485 | HEEL, PAD, REMOVABLE FOR SPUR | \$13.76 |

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| L4210 | REPAIR OF ORTHOTIC DEVICE, REPAIR OR REPLACE MINOR | \$21.65 |
| L7510 | REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR | \$9.04 |
| L8692 | AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND FIELD | \$2,496.46 |
| T4521 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF | \$0.75 |
| T4522 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF | \$0.84 |
| T4523 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF | \$0.87 |
| T4524 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF | \$0.91 |
| T4525 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$0.89 |
| T4526 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$0.97 |
| T4527 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$1.08 |
| T4528 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$1.08 |
| T4529 | PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF | \$0.67 |
| T4530 | PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF | \$0.67 |
| T4531 | PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$0.86 |
| T4532 | PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$0.87 |
| T4533 | YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF | \$0.73 |
| T4534 | YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$1.03 |
| T4543 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$1.83 |
| T4544 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE | \$1.45 |
| T4545 | INCONTINENCE PRODUCT, DISPOSABLE, PENILE WRAP, EACH | \$2.33 |
| V2615 | TELESCOPIC AND OTHER COMPOUND LENS SYSTEM, INCLUDING | \$258.65 |
| V2781 | PROGRESSIVE LENS, PER LENS | \$33.19 |
| V5010 | ASSESSMENT FOR HEARING AID | \$48.84 |
| V5011 | FITTING/ORIENTATION/CHECKING OF HEARING AID | \$66.27 |
| V5014 | REPAIR/MODIFICATION OF A HEARING AID | \$44.40 |
| V5020 | V5020 - CONFORMITY EVALUATION | \$74.83 |
| V5130 | BINAURAL, IN THE EAR | \$924.44 |
| V5140 | BINAURAL, BEHIND THE EAR | \$1,084.99 |
| V5221 | HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL | \$1,158.87 |
| V5240 | DISPENSING FEE, CONTRALATERAL ROUTING SYSTEM, BINAURAL | \$205.04 |
| V5254 | HEARING AID, DIGITAL, MONAURAL, CIC | \$1,054.10 |
| V5255 | HEARING AID, DIGITAL, MONAURAL, ITC | \$1,054.10 |
| V5256 | HEARING AID, DIGITAL, MONAURAL, ITE | \$957.36 |
| V5257 | HEARING AID, DIGITAL, MONAURAL, BTE | \$957.36 |
| V5258 | HEARING AID, DIGITAL, BINAURAL, CIC | \$1,501.00 |
| V5259 | HEARING AID, DIGITAL, BINAURAL, ITC | \$1,357.66 |
| V5260 | HEARING AID, DIGITAL, BINAURAL, ITE | \$1,414.36 |
| V5261 | HEARING AID, DIGITAL, BINAURAL, BTE | \$1,701.67 |
| V5264 | EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE | \$51.64 |
| V5266 | BATTERY FOR USE IN HEARING DEVICE | \$1.32 |
| V5275 | EAR IMPRESSION, EACH | \$26.57 |

| Arizona Health Care Cost Containment System | | |
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| Proposed Dental Rates for Currently Priced By Report Codes | | |
| Effective 01/01/2026 | | |
| Code | Discription | Proposed Rate 10/1/2026 |
| D6089 | ACCESSING AND RETORQUING LOOSE IMPLANT SCREW | \$744.58 |
| D7292 | PLACEMENT OF TEMPORARY ANCHORAGE DEVICE [SCREW | \$274.30 |
| D7293 | PLACEMENT OF TEMPORARY ANCHORAGE DEVICE REQUIR | \$271.90 |
| D7298 | REMOVAL OF TEMPORARY ANCHORAGE DEVICE [SCREW R | \$91.48 |
| D7299 | REMOVAL OF TEMPORARY ANCHORAGE DEVICE, REQUIRING | \$2.59 |
| D7979 | NON-SURGICAL SIALOLITHOTOMY | \$338.70 |

| Arizona Health Care Cost Containment System | | |
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| FFS Program Capped Fee Schedule | | |
| Proposed Clinical Laboratory Rates for Codes Currently Priced By Report | | |
| Effective 10/01/2026 | | |
| Code | Discription | Proposed Rate 10/1/2026 |
| 70557 | MRI SCAN OF BRAIN WITHOUT CONTRAST DURING BRAIN PR | \$126.04 |
| 70558 | MRI SCAN OF BRAIN WITH CONTRAST DURING BRAIN PROCE | \$142.33 |
| 70559 | MRI SCAN OF BRAIN BEFORE AND AFTER CONTRAST DURIN | \$355.64 |
| 76984 | ULTRASOUND OF CHEST AORTA DURING SURGERY | \$55.87 |
| 76987 | ULTRASOUND OF HEART DURING SURGERY TO EVALUATE F | \$112.75 |
| 76988 | ULTRASOUND OF HEART DURING SURGERY TO EVALUATE F | \$85.57 |
| 76989 | ULTRASOUND OF HEART DURING SURGERY TO EVALUATE F | \$52.74 |
| 77061 | 3D BREAST MAMMOGRAPHY OF 1 BREAST | \$62.26 |
| 77062 | 3D BREAST MAMMOGRAPHY OF BOTH BREASTS | \$62.26 |
| 78429 | NUCLEAR MEDICINE STUDY OF HEART MUSCLE WITH METAE | \$104.87 |
| 78431 | NUCLEAR MEDICINE STUDIES OF BLOOD FLOW IN HEART M | \$102.16 |
| 78432 | NUCLEAR MEDICINE STUDY OF HEART MUSCLE WITH METAE | \$450.03 |
| 78433 | NUCLEAR MEDICINE STUDY OF HEART MUSCLE WITH METAE | \$486.35 |
| 78434 | NUCLEAR MEDICINE STUDY OF HEART MUSCLE BLOOD FLO | \$108.76 |
| 86930 | FROZEN BLOOD, EACH UNIT; FREEZING (INCLUDES PREPAR | \$43.45 |
| 86931 | FROZEN BLOOD, EACH UNIT; THAWING | \$50.17 |
| 86932 | FROZEN BLOOD, EACH UNIT; FREEZING (INCLUDES PREPAR | \$56.90 |
| 86950 | LEUKOCYTE TRANSFUSION | \$40.52 |
| 86972 | PRETREATMENT OF RED BLOOD CELLS FOR USE IN RED B | \$21.44 |
| 86975 | PRETREATMENT OF SERUM FOR USE IN RED BLOOD CELL / | \$16.90 |
| 86976 | PRETREATMENT OF SERUM FOR USE IN RED BLOOD CELL / | \$18.66 |
| 86977 | PRETREATMENT OF SERUM FOR USE IN RED BLOOD CELL / | \$18.44 |
| 86985 | SPLITTING OF BLOOD OR BLOOD PRODUCTS, EACH UNIT | \$12.78 |

- a. Individual FFS rates reflecting the changes to reimbursement described above can be obtained from the AHCCCS website at: <https://azahcccs.gov/PlansProviders/RatesAndBilling/FFS/>
- b. Many public libraries offer access to the internet. In addition, the information can be obtained at the Offices of the AHCCCS Administration, 150 N. 18th Avenue, Phoenix, AZ 85007.

c. Comments regarding the proposed AHCCCS FFS rates may be submitted electronically at FFSRates@azahcccs.gov. All comments must be received no later than 5:00 p.m. on May 21, 2026. If a public comment is submitted challenging the rates established herein, the email must include a demonstration of why a rate change should be considered, i.e. invoice or cost data that justifies the change in the rate.