

** PROPOSED **
Arizona Health Care Cost Containment System
FFS Outpatient Hospital Revenue Code 051X Rates
Effective 10/01/2016

Proc	Procedure Description	FFS Rate	Eff Date
10021	FINE NEEDLE ASPIRATION; WITHOUT IMAGING GUIDANCE	\$46.29	10/01/2016
10022	FINE NEEDLE ASPIRATION; WITH IMAGING GUIDANCE	\$65.86	10/01/2016
10030	IMAGE-GUIDED FLUID COLLECTION DRAINAGE BY CATHETER (EG, ABSCESS, HEMATOMA, SEROM	\$536.52	10/01/2016
10035	PLACEMENT OF SOFT TISSUE LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE	\$393.92	10/01/2016
10036	PLACEMENT OF SOFT TISSUE LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE	\$370.93	10/01/2016
10060	INCISION AND DRAINAGE OF ABSCESS (EG, CARBUNCLE, SUPPURATIVE HIDRADENITIS,	\$17.39	10/01/2016
10061	INCISION AND DRAINAGE OF ABSCESS (EG, CARBUNCLE, SUPPURATIVE HIDRADENITIS,	\$22.68	10/01/2016
10080	INCISION AND DRAINAGE OF PILONIDAL CYST; SIMPLE	\$66.79	10/01/2016
10081	INCISION AND DRAINAGE OF PILONIDAL CYST; COMPLICATED	\$85.74	10/01/2016
10120	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES; SIMPLE	\$41.94	10/01/2016
10121	INCISION AND REMOVAL OF FOREIGN BODY, SUBCUTANEOUS TISSUES; COMPLICATED	\$76.43	10/01/2016
10140	INCISION AND DRAINAGE OF HEMATOMA, SEROMA OR FLUID COLLECTION	\$38.52	10/01/2016
10160	PUNCTURE ASPIRATION OF ABSCESS, HEMATOMA, BULLA, OR CYST	\$29.51	10/01/2016
10180	INCISION AND DRAINAGE, COMPLEX, POSTOPERATIVE WOUND INFECTION	\$58.41	10/01/2016
11000	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS OR INFECTED SKIN; UP TO 10% OF BODY SURFACE	\$22.37	10/01/2016
11001	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS OR INFECTED SKIN; EACH ADDITIONAL 10% OF THE	\$6.22	10/01/2016
11010	DEBRIDEMENT INCLUDING REMOVAL OF FOREIGN MATERIAL AT THE SITE OF AN OPEN FRACTUR	\$184.85	10/01/2016
11011	DEBRIDEMENT INCLUDING REMOVAL OF FOREIGN MATERIAL AT THE SITE OF AN OPEN FRACTUR	\$204.73	10/01/2016
11012	DEBRIDEMENT INCLUDING REMOVAL OF FOREIGN MATERIAL AT THE SITE OF AN OPEN FRACTUR	\$248.84	10/01/2016
11042	DEBRIDEMENT, SUBCUTANEOUS TISSUE (INCLUDES EPIDERMIS AND DERMIS, IF PERFORMED);	\$47.53	10/01/2016
11043	DEBRIDEMENT, MUSCLE AND/OR FASCIA (INCLUDES EPIDERMIS, DERMIS, AND SUBCUTANEOUS	\$62.75	10/01/2016
11044	DEBRIDEMENT, BONE (INCLUDES EPIDERMIS, DERMIS, SUBCUTANEOUS TISSUE, MUSCLE AND/O	\$71.45	10/01/2016
11045	DEBRIDEMENT, SUBCUTANEOUS TISSUE (INCLUDES EPIDERMIS AND DERMIS, IF PERFORMED);	\$12.74	10/01/2016
11046	DEBRIDEMENT, MUSCLE AND/OR FASCIA (INCLUDES EPIDERMIS, DERMIS, AND SUBCUTANEOUS	\$14.91	10/01/2016
11047	DEBRIDEMENT, BONE (INCLUDES EPIDERMIS, DERMIS, SUBCUTANEOUS TISSUE, MUSCLE AND/O	\$20.82	10/01/2016
11055	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); SINGLE L	\$27.34	10/01/2016
11056	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); TWO TO	\$30.75	10/01/2016
11057	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); MORE	\$31.07	10/01/2016
11100	BIOPSY OF SKIN, SUBCUTANEOUS TISSUE AND/OR MUCOUS MEMBRANE (INCLUDING SIMPLE CLO	\$47.22	10/01/2016
11101	BIOPSY OF SKIN, SUBCUTANEOUS TISSUE AND/OR MUCOUS MEMBRANE (INCLUDING SIMPLE	\$6.52	10/01/2016

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11200	REMOVAL OF SKIN TAGS, MULTIPLE FIBRO CUTANEOUS TAGS, ANY AREA; UP TO AND INCLUDIN	\$12.43	10/01/2016
11201	REMOVAL OF SKIN TAGS, MULTIPLE FIBRO CUTANEOUS TAGS, ANY AREA; EACH ADDITIONAL 10	\$1.86	10/01/2016
11300	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS; LESIO	\$53.75	10/01/2016
11301	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS;	\$57.17	10/01/2016
11302	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS;	\$67.41	10/01/2016
11303	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS;	\$70.21	10/01/2016
11305	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP, NECK, HANDS, FEET,	\$51.88	10/01/2016
11306	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP, NECK, HANDS, FEET,	\$60.58	10/01/2016
11307	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP, NECK, HANDS, FEET,	\$66.49	10/01/2016
11308	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP, NECK, HANDS, FEET,	\$66.48	10/01/2016
11310	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE, EARS, EYELIDS,	\$57.16	10/01/2016
11311	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE, EARS, EYELIDS,	\$39.15	10/01/2016
11312	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE, EARS, EYELIDS,	\$70.84	10/01/2016
11313	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE, EARS, EYELIDS,	\$73.31	10/01/2016
11400	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED ELSEWH	\$37.59	10/01/2016
11401	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$38.83	10/01/2016
11402	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$44.11	10/01/2016
11403	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$37.59	10/01/2016
11404	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$47.22	10/01/2016
11406	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$56.54	10/01/2016
11420	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$35.10	10/01/2016
11421	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$40.08	10/01/2016
11422	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$33.86	10/01/2016
11423	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$37.90	10/01/2016
11424	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$45.67	10/01/2016
11426	EXCISION, BENIGN LESION INCLUDING MARGINS, EXCEPT SKIN TAG (UNLESS LISTED	\$49.08	10/01/2016
11440	EXCISION, OTHER BENIGN LESION INCLUDING MARGINS (UNLESS LISTED ELSEWHERE),	\$27.03	10/01/2016
11441	EXCISION, OTHER BENIGN LESION INCLUDING MARGINS (UNLESS LISTED ELSEWHERE),	\$30.76	10/01/2016
11442	EXCISION, OTHER BENIGN LESION INCLUDING MARGINS (UNLESS LISTED ELSEWHERE),	\$36.03	10/01/2016
11443	EXCISION, OTHER BENIGN LESION INCLUDING MARGINS (UNLESS LISTED ELSEWHERE),	\$38.52	10/01/2016

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11444	EXCISION, OTHER BENIGN LESION INCLUDING MARGINS (UNLESS LISTED ELSEWHERE),	\$45.66	10/01/2016
11446	EXCISION, OTHER BENIGN LESION INCLUDING MARGINS (UNLESS LISTED ELSEWHERE),	\$54.37	10/01/2016
11450	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, AXILLARY; WITH	\$111.21	10/01/2016
11451	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, AXILLARY; WITH	\$138.55	10/01/2016
11462	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, INGUINAL; WITH	\$113.39	10/01/2016
11463	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, INGUINAL; WITH	\$142.60	10/01/2016
11470	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, PERIANAL, PERINEAL,	\$113.71	10/01/2016
11471	EXCISION OF SKIN AND SUBCUTANEOUS TISSUE FOR HIDRADENITIS, PERIANAL, PERINEAL,	\$138.55	10/01/2016
11600	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED DIAM	\$63.06	10/01/2016
11601	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED	\$68.35	10/01/2016
11602	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED	\$72.39	10/01/2016
11603	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED	\$74.87	10/01/2016
11604	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED	\$85.13	10/01/2016
11606	EXCISION, MALIGNANT LESION INCLUDING MARGINS, TRUNK, ARMS, OR LEGS; EXCISED	\$111.21	10/01/2016
11620	EXCISION, MALIGNANT LESION INCLUDING MARGINS, SCALP, NECK, HANDS, FEET,	\$63.38	10/01/2016
11621	EXCISION, MALIGNANT LESION INCLUDING MARGINS, SCALP, NECK, HANDS, FEET,	\$68.35	10/01/2016
11622	EXCISION, MALIGNANT LESION INCLUDING MARGINS, SCALP, NECK, HANDS, FEET,	\$72.39	10/01/2016
11623	EXCISION, MALIGNANT LESION INCLUDING MARGINS, SCALP, NECK, HANDS, FEET,	\$75.18	10/01/2016
11624	EXCISION, MALIGNANT LESION INCLUDING MARGINS, SCALP, NECK, HANDS, FEET,	\$83.88	10/01/2016
11626	EXCISION, MALIGNANT LESION INCLUDING MARGINS, SCALP, NECK, HANDS, FEET,	\$96.62	10/01/2016
11640	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS;	\$64.93	10/01/2016
11641	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS;	\$69.90	10/01/2016
11642	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS;	\$74.56	10/01/2016
11643	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS;	\$76.11	10/01/2016
11644	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS;	\$92.89	10/01/2016
11646	EXCISION, MALIGNANT LESION INCLUDING MARGINS, FACE, EARS, EYELIDS, NOSE, LIPS;	\$100.66	10/01/2016
11719	TRIMMING OF NONDYSTROPHIC NAILS, ANY NUMBER	\$5.28	10/01/2016
11720	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); ONE TO FIVE	\$15.22	10/01/2016
11721	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); SIX OR MORE	\$17.40	10/01/2016
11730	AVULSION OF NAIL PLATE, PARTIAL OR COMPLETE, SIMPLE; SINGLE	\$41.63	10/01/2016

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11732	AVULSION OF NAIL PLATE, PARTIAL OR COMPLETE, SIMPLE; EACH ADDITIONAL NAIL PLATE	\$13.36	10/01/2016
11740	EVACUATION OF SUBUNGUAL HEMATOMA	\$14.60	10/01/2016
11750	EXCISION OF NAIL AND NAIL MATRIX, PARTIAL OR COMPLETE, (EG, INGROWN OR DEFORMED	\$34.17	10/01/2016
11752	EXCISION OF NAIL AND NAIL MATRIX, PARTIAL OR COMPLETE, (EG, INGROWN OR DEFORMED	\$52.51	10/01/2016
11755	BIOPSY OF NAIL UNIT (EG, PLATE, BED, MATRIX, HYPONYCHIUM, PROXIMAL AND LATERAL	\$48.15	10/01/2016
11760	REPAIR OF NAIL BED	\$67.10	10/01/2016
11762	RECONSTRUCTION OF NAIL BED WITH GRAFT	\$83.26	10/01/2016
11765	WEDGE EXCISION OF SKIN OF NAIL FOLD (EG, FOR INGROWN TOENAIL)	\$63.69	10/01/2016
11770	EXCISION OF PILONIDAL CYST OR SINUS; SIMPLE	\$79.84	10/01/2016
11771	EXCISION OF PILONIDAL CYST OR SINUS; EXTENSIVE	\$119.30	10/01/2016
11772	EXCISION OF PILONIDAL CYST OR SINUS; COMPLICATED	\$100.66	10/01/2016
11900	INJECTION, INTRALESIONAL; UP TO AND INCLUDING SEVEN LESIONS	\$20.82	10/01/2016
11901	INJECTION, INTRALESIONAL; MORE THAN SEVEN LESIONS	\$18.33	10/01/2016
11920	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT	\$48.16	10/01/2016
11921	TATTOOING, INTRADERMAL INTRODUCTION OF INSOLUBLE OPAQUE PIGMENTS TO CORRECT	\$54.37	10/01/2016
11971	REMOVAL OF TISSUE EXPANDER(S) WITHOUT INSERTION OF PROSTHESIS	\$130.17	10/01/2016
11976	REMOVAL, IMPLANTABLE CONTRACEPTIVE CAPSULES	\$41.94	10/01/2016
11980	SUBCUTANEOUS HORMONE PELLETT IMPLANTATION (IMPLANTATION OF ESTRADIOL AND/OR	\$32.62	10/01/2016
11981	INSERTION, NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	\$50.02	10/01/2016
11982	REMOVAL, NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	\$50.95	10/01/2016
11983	REMOVAL WITH REINSERTION, NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	\$41.01	10/01/2016
12001	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL GENITALIA,	\$38.84	10/01/2016
12002	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL	\$43.49	10/01/2016
12004	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL	\$47.54	10/01/2016
12005	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL	\$57.47	10/01/2016
12006	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL	\$64.62	10/01/2016
12007	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF SCALP, NECK, AXILLAE, EXTERNAL	\$65.55	10/01/2016
12011	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR	\$46.91	10/01/2016
12013	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR	\$48.78	10/01/2016
12014	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR	\$50.95	10/01/2016

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12015	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR	\$58.71	10/01/2016
12016	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR	\$66.49	10/01/2016
12020	TREATMENT OF SUPERFICIAL WOUND DEHISCENCE; SIMPLE CLOSURE	\$82.02	10/01/2016
12021	TREATMENT OF SUPERFICIAL WOUND DEHISCENCE; WITH PACKING	\$21.75	10/01/2016
12031	REPAIR OF WOUND (2.5 CENTIMETERS OR LESS) OF THE SCALP, UNDERARMS, TRUNK, ARMS,	\$71.76	10/01/2016
12032	REPAIR OF WOUND (2.6 TO 7.5 CENTIMETERS) OF THE SCALP, UNDERARMS, TRUNK, ARMS, A	\$92.58	10/01/2016
12034	REPAIR OF WOUND (7.6 TO 12.5 CENTIMETERS) OF THE SCALP, UNDERARMS, TRUNK, ARMS,	\$89.47	10/01/2016
12035	REPAIR OF WOUND (12.6 TO 20.0 CENTIMETERS) OF THE SCALP, UNDERARMS, TRUNK, ARMS,	\$122.09	10/01/2016
12036	REPAIR OF WOUND (20.1 TO 30.0 CENTIMETERS) OF THE SCALP, UNDERARMS, TRUNK, ARMS,	\$121.78	10/01/2016
12037	REPAIR OF WOUND (OVER 30.0 CENTIMETERS) OF THE SCALP, UNDERARMS, TRUNK, ARMS, AN	\$128.93	10/01/2016
12041	REPAIR, INTERMEDIATE, WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; 2.5	\$73.94	10/01/2016
12042	REPAIR, INTERMEDIATE, WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; 2.6	\$75.18	10/01/2016
12044	REPAIR, INTERMEDIATE, WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; 7.6	\$123.95	10/01/2016
12045	REPAIR, INTERMEDIATE, WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; 12.	\$113.40	10/01/2016
12046	REPAIR, INTERMEDIATE, WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; 20.	\$144.15	10/01/2016
12047	REPAIR, INTERMEDIATE, WOUNDS OF NECK, HANDS, FEET AND/OR EXTERNAL GENITALIA; OVE	\$148.81	10/01/2016
12051	REPAIR, INTERMEDIATE, WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS ME	\$73.94	10/01/2016
12052	REPAIR, INTERMEDIATE, WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS ME	\$76.73	10/01/2016
12053	REPAIR, INTERMEDIATE, WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS ME	\$109.05	10/01/2016
12054	REPAIR, INTERMEDIATE, WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS ME	\$118.36	10/01/2016
12055	REPAIR, INTERMEDIATE, WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS ME	\$138.25	10/01/2016
12056	REPAIR, INTERMEDIATE, WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS ME	\$143.53	10/01/2016
12057	REPAIR, INTERMEDIATE, WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS AND/OR MUCOUS ME	\$132.66	10/01/2016
13100	REPAIR, COMPLEX, TRUNK; 1.1 CM TO 2.5 CM	\$109.97	10/01/2016
13101	REPAIR, COMPLEX, TRUNK; 2.6 CM TO 7.5 CM	\$121.47	10/01/2016
13102	REPAIR, COMPLEX, TRUNK; EACH ADDITIONAL 5 CM OR LESS (LIST SEPARATELY IN	\$40.39	10/01/2016
13120	REPAIR, COMPLEX, SCALP, ARMS, AND/OR LEGS; 1.1 CM TO 2.5 CM	\$96.62	10/01/2016
13121	REPAIR, COMPLEX, SCALP, ARMS, AND/OR LEGS; 2.6 CM TO 7.5 CM	\$136.38	10/01/2016
13122	REPAIR, COMPLEX, SCALP, ARMS, AND/OR LEGS; EACH ADDITIONAL 5 CM OR LESS (LIST	\$40.69	10/01/2016
13131	REPAIR, COMPLEX, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, HANDS	\$115.26	10/01/2016

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13132	REPAIR, COMPLEX, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, HANDS	\$137.32	10/01/2016
13133	REPAIR, COMPLEX, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, AXILLAE, GENITALIA, HANDS	\$40.08	10/01/2016
13151	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; 1.1 CM TO 2.5 CM	\$114.32	10/01/2016
13152	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; 2.6 CM TO 7.5 CM	\$134.52	10/01/2016
13153	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIPS; EACH ADDITIONAL 5 CM OR LESS	\$44.11	10/01/2016
14000	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, TRUNK; DEFECT 10 SQ CM OR LESS	\$100.34	10/01/2016
14001	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, TRUNK; DEFECT 10.1 SQ CM TO 30.0 SQ	\$122.09	10/01/2016
14020	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, SCALP, ARMS AND/OR LEGS; DEFECT 10	\$107.18	10/01/2016
14021	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, SCALP, ARMS AND/OR LEGS; DEFECT 10.1	\$127.06	10/01/2016
14040	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK,	\$107.80	10/01/2016
14041	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, FOREHEAD, CHEEKS, CHIN, MOUTH, NECK,	\$137.63	10/01/2016
14060	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, EYELIDS, NOSE, EARS AND/OR LIPS;	\$84.82	10/01/2016
14061	ADJACENT TISSUE TRANSFER OR REARRANGEMENT, EYELIDS, NOSE, EARS AND/OR LIPS;	\$151.91	10/01/2016
15002	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS, B	\$103.45	10/01/2016
15003	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS, B	\$25.79	10/01/2016
15004	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS, B	\$112.15	10/01/2016
15005	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS, B	\$28.58	10/01/2016
15040	HARVEST OF SKIN FOR TISSUE CULTURED SKIN AUTOGRAFT, 100 SQ CM OR LESS	\$111.52	10/01/2016
15050	PINCH GRAFT, SINGLE OR MULTIPLE, TO COVER SMALL ULCER, TIP OF DIGIT, OR OTHER	\$100.96	10/01/2016
15100	SPLIT-THICKNESS AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR ONE PE	\$120.23	10/01/2016
15101	SPLIT GRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR EACH ADDITIONAL	\$64.62	10/01/2016
15110	EPIDERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR ONE PERCENT	\$89.47	10/01/2016
15111	EPIDERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR EACH ADDIT	\$9.63	10/01/2016
15115	EPIDERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA,	\$90.10	10/01/2016
15116	EPIDERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA,	\$13.05	10/01/2016
15120	SPLIT-THICKNESS AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENI	\$129.24	10/01/2016
15121	SPLIT GRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS,	\$65.24	10/01/2016
15130	DERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR ONE PERCENT OF	\$91.65	10/01/2016
15131	DERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR EACH ADDITION	\$7.15	10/01/2016
15135	DERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HA	\$89.78	10/01/2016

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15136	DERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HA	\$5.28	10/01/2016
15150	TISSUE CULTURED SKIN AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 25 SQ CM OR LESS	\$51.57	10/01/2016
15151	TISSUE CULTURED SKIN AUTOGRAFT, TRUNK, ARMS, LEGS; ADDITIONAL 1 SQ CM TO 75 SQ C	\$8.08	10/01/2016
15152	TISSUE CULTURED SKIN AUTOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR	\$8.39	10/01/2016
15155	TISSUE CULTURED SKIN AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS,	\$46.91	10/01/2016
15156	TISSUE CULTURED SKIN AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS,	\$7.14	10/01/2016
15157	TISSUE CULTURED SKIN AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS,	\$9.94	10/01/2016
15200	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, TRUNK; 20	\$133.90	10/01/2016
15201	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, TRUNK; EACH	\$59.96	10/01/2016
15220	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, SCALP,	\$131.10	10/01/2016
15221	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, SCALP, ARMS,	\$56.55	10/01/2016
15240	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, FOREHEAD,	\$109.35	10/01/2016
15241	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, FOREHEAD, CH	\$63.06	10/01/2016
15260	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, NOSE, EARS,	\$127.06	10/01/2016
15261	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, NOSE, EARS,	\$64.93	10/01/2016
15271	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE A	\$48.15	10/01/2016
15272	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE A	\$8.39	10/01/2016
15273	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE A	\$81.40	10/01/2016
15274	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE A	\$21.75	10/01/2016
15275	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS,	\$45.97	10/01/2016
15276	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS,	\$8.08	10/01/2016
15277	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS,	\$83.26	10/01/2016
15278	APPLICATION OF SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS,	\$23.92	10/01/2016
15570	FORMATION OF DIRECT OR TUBED PEDICLE, WITH OR WITHOUT TRANSFER; TRUNK	\$150.67	10/01/2016
15572	FORMATION OF DIRECT OR TUBED PEDICLE, WITH OR WITHOUT TRANSFER; SCALP, ARMS, OR	\$118.37	10/01/2016
15574	FORMATION OF DIRECT OR TUBED PEDICLE, WITH OR WITHOUT TRANSFER; FOREHEAD,	\$123.02	10/01/2016
15576	FORMATION OF DIRECT OR TUBED PEDICLE, WITH OR WITHOUT TRANSFER; EYELIDS, NOSE,	\$113.70	10/01/2016
15600	DELAY OF FLAP OR SECTIONING OF FLAP (DIVISION AND INSET); AT TRUNK	\$99.73	10/01/2016
15610	DELAY OF FLAP OR SECTIONING OF FLAP (DIVISION AND INSET); AT SCALP, ARMS, OR	\$98.17	10/01/2016
15620	DELAY OF FLAP OR SECTIONING OF FLAP (DIVISION AND INSET); AT FOREHEAD, CHEEKS,	\$96.93	10/01/2016

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15630	DELAY OF FLAP OR SECTIONING OF FLAP (DIVISION AND INSET); AT EYELIDS, NOSE,	\$95.99	10/01/2016
15650	TRANSFER, INTERMEDIATE, OF ANY PEDICLE FLAP (EG, ABDOMEN TO WRIST, WALKING	\$103.46	10/01/2016
15731	FOREHEAD FLAP WITH PRESERVATION OF VASCULAR PEDICLE (EG, AXIAL PATTERN FLAP, PAR	\$98.48	10/01/2016
15732	MUSCLE, MYOCUTANEOUS, OR FASCIOCUTANEOUS FLAP; HEAD AND NECK (EG, TEMPORALIS,	\$142.29	10/01/2016
15734	MUSCLE, MYOCUTANEOUS, OR FASCIOCUTANEOUS FLAP; TRUNK	\$155.65	10/01/2016
15736	MUSCLE, MYOCUTANEOUS, OR FASCIOCUTANEOUS FLAP; UPPER EXTREMITY	\$153.15	10/01/2016
15738	MUSCLE, MYOCUTANEOUS, OR FASCIOCUTANEOUS FLAP; LOWER EXTREMITY	\$143.84	10/01/2016
15740	FLAP; ISLAND PEDICLE REQUIRING IDENTIFICATION AND DISSECTION OF AN ANATOMICALLY	\$138.25	10/01/2016
15760	GRAFT; COMPOSITE (EG, FULL THICKNESS OF EXTERNAL EAR OR NASAL ALA), INCLUDING	\$121.78	10/01/2016
15788	CHEMICAL PEEL, FACIAL; EPIDERMAL	\$186.09	10/01/2016
15789	CHEMICAL PEEL, FACIAL; DERMAL	\$115.88	10/01/2016
15792	CHEMICAL PEEL, NONFACIAL; EPIDERMAL	\$156.57	10/01/2016
15793	CHEMICAL PEEL, NONFACIAL; DERMAL	\$107.80	10/01/2016
15823	BLEPHAROPLASTY, UPPER EYELID; WITH EXCESSIVE SKIN WEIGHTING DOWN LID	\$54.36	10/01/2016
15847	EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY), ABDOMEN (	\$76.43	10/01/2016
15850	REMOVAL OF SUTURES UNDER ANESTHESIA (OTHER THAN LOCAL), SAME SURGEON	\$41.32	10/01/2016
15851	REMOVAL OF SUTURES UNDER ANESTHESIA (OTHER THAN LOCAL), OTHER SURGEON	\$46.29	10/01/2016
16000	INITIAL TREATMENT, FIRST DEGREE BURN, WHEN NO MORE THAN LOCAL TREATMENT IS REQUI	\$19.57	10/01/2016
16020	DRESSINGS AND/OR DEBRIDEMENT OF PARTIAL-THICKNESS BURNS, INITIAL OR SUBSEQUENT;	\$23.61	10/01/2016
16025	DRESSINGS AND/OR DEBRIDEMENT OF PARTIAL-THICKNESS BURNS, INITIAL OR SUBSEQUENT;	\$30.75	10/01/2016
16030	DRESSINGS AND/OR DEBRIDEMENT OF PARTIAL-THICKNESS BURNS, INITIAL OR SUBSEQUENT;	\$44.42	10/01/2016
17000	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGI	\$11.49	10/01/2016
17003	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY,	\$2.79	10/01/2016
17004	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGI	\$43.18	10/01/2016
17106	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (EG, LASER TECHNIQUE);	\$55.30	10/01/2016
17107	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (EG, LASER TECHNIQUE);	\$73.63	10/01/2016
17108	DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (EG, LASER TECHNIQUE);	\$95.37	10/01/2016
17110	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY, SURGI	\$35.41	10/01/2016
17111	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY,	\$39.14	10/01/2016
17250	CHEMICAL CAUTERIZATION OF GRANULATION TISSUE (PROUD FLESH, SINUS OR FISTULA)	\$36.66	10/01/2016

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17260	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, C	\$20.81	10/01/2016
17261	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$44.73	10/01/2016
17262	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$50.01	10/01/2016
17263	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$52.82	10/01/2016
17264	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$57.16	10/01/2016
17266	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$60.58	10/01/2016
17270	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$43.49	10/01/2016
17271	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$44.43	10/01/2016
17272	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$49.40	10/01/2016
17273	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$53.74	10/01/2016
17274	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$58.40	10/01/2016
17276	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$60.89	10/01/2016
17280	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$42.87	10/01/2016
17281	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$45.05	10/01/2016
17282	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$51.26	10/01/2016
17283	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$54.68	10/01/2016
17284	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$58.72	10/01/2016
17286	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	\$64.62	10/01/2016
17311	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCI	\$242.63	10/01/2016
17312	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCI	\$161.54	10/01/2016
17313	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCI	\$239.83	10/01/2016
17314	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCI	\$160.61	10/01/2016
17315	MOHS MICROGRAPHIC TECHNIQUE, INCLUDING REMOVAL OF ALL GROSS TUMOR, SURGICAL EXCI	\$22.68	10/01/2016
17340	CRYOTHERAPY (CO2 SLUSH, LIQUID N2) FOR ACNE	\$1.86	10/01/2016
19000	PUNCTURE ASPIRATION OF CYST OF BREAST;	\$60.58	10/01/2016
19001	PUNCTURE ASPIRATION OF CYST OF BREAST; EACH ADDITIONAL CYST (LIST SEPARATELY IN	\$4.35	10/01/2016
19020	MASTOTOMY WITH EXPLORATION OR DRAINAGE OF ABSCESS, DEEP	\$144.46	10/01/2016
19030	INJECTION PROCEDURE ONLY FOR MAMMARY DUCTOGRAM OR GALACTOGRAM	\$76.12	10/01/2016
19081	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METAL	\$459.78	10/01/2016
19082	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METAL	\$429.65	10/01/2016

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19083	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METAL	\$449.22	10/01/2016
19084	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METAL	\$415.05	10/01/2016
19085	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METAL	\$741.56	10/01/2016
19086	BIOPSY, BREAST, WITH PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METAL	\$637.17	10/01/2016
19100	BIOPSY OF BREAST; PERCUTANEOUS, NEEDLE CORE, NOT USING IMAGING GUIDANCE (SEPARAT	\$70.21	10/01/2016
19101	BIOPSY OF BREAST; OPEN, INCISIONAL	\$103.76	10/01/2016
19105	ABLATION, CRYOSURGICAL, OF FIBROADENOMA, INCLUDING ULTRASOUND GUIDANCE, EACH FIB	\$1,712.70	10/01/2016
19110	NIPPLE EXPLORATION, WITH OR WITHOUT EXCISION OF A SOLITARY LACTIFEROUS DUCT OR	\$123.65	10/01/2016
19112	EXCISION OF LACTIFEROUS DUCT FISTULA	\$125.82	10/01/2016
19120	EXCISION OF CYST, FIBROADENOMA, OR OTHER BENIGN OR MALIGNANT TUMOR, ABERRANT BRE	\$68.97	10/01/2016
19125	EXCISION OF BREAST LESION IDENTIFIED BY PREOPERATIVE PLACEMENT OF RADIOLOGICAL	\$75.49	10/01/2016
19281	PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE/NEED	\$120.22	10/01/2016
19282	PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE/NEED	\$102.20	10/01/2016
19283	PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE/NEED	\$146.02	10/01/2016
19284	PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE/NEED	\$132.97	10/01/2016
19285	PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE/NEED	\$376.52	10/01/2016
19286	PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE/NEED	\$359.75	10/01/2016
19287	PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE/NEED	\$642.77	10/01/2016
19288	PLACEMENT OF BREAST LOCALIZATION DEVICE(S) (EG, CLIP, METALLIC PELLETT, WIRE/NEED	\$554.23	10/01/2016
19296	PLACEMENT OF RADIOTHERAPY AFTERLOADING EXPANDABLE CATHETER (SINGLE OR MULTICHANN	\$3,295.53	10/01/2016
19298	PLACEMENT OF RADIOTHERAPY AFTERLOADING BRACHYTHERAPY CATHETERS (MULTIPLE TUBE	\$635.31	10/01/2016
19300	MASTECTOMY FOR GYNECOMASTIA	\$95.06	10/01/2016
19350	NIPPLE/AREOLA RECONSTRUCTION	\$129.23	10/01/2016
19355	CORRECTION OF INVERTED NIPPLES	\$113.08	10/01/2016
19396	PREPARATION OF MOULAGE FOR CUSTOM BREAST IMPLANT	\$119.61	10/01/2016
20005	INCISION AND DRAINAGE OF SOFT TISSUE ABSCESS, SUBFASCIAL (IE, INVOLVES THE SOFT	\$65.55	10/01/2016
20101	EXPLORATION OF PENETRATING WOUND (SEPARATE PROCEDURE); CHEST	\$210.32	10/01/2016
20102	EXPLORATION OF PENETRATING WOUND (SEPARATE PROCEDURE); ABDOMEN/FLANK/BACK	\$205.35	10/01/2016
20103	EXPLORATION OF PENETRATING WOUND (SEPARATE PROCEDURE); EXTREMITY	\$203.80	10/01/2016
20200	BIOPSY, MUSCLE; SUPERFICIAL	\$97.55	10/01/2016

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20205	BIOPSY, MUSCLE; DEEP	\$116.19	10/01/2016
20206	BIOPSY, MUSCLE, PERCUTANEOUS NEEDLE	\$155.64	10/01/2016
20220	BIOPSY, BONE, TROCAR, OR NEEDLE; SUPERFICIAL (EG, ILIUM, STERNUM, SPINOUS	\$83.88	10/01/2016
20225	BIOPSY, BONE, TROCAR, OR NEEDLE; DEEP (EG, VERTEBRAL BODY, FEMUR)	\$367.52	10/01/2016
20500	INJECTION OF SINUS TRACT; THERAPEUTIC (SEPARATE PROCEDURE)	\$16.78	10/01/2016
20501	INJECTION OF SINUS TRACT; DIAGNOSTIC (SINOGRAM)	\$70.21	10/01/2016
20520	REMOVAL OF FOREIGN BODY IN MUSCLE OR TENDON SHEATH; SIMPLE	\$49.70	10/01/2016
20525	REMOVAL OF FOREIGN BODY IN MUSCLE OR TENDON SHEATH; DEEP OR COMPLICATED	\$201.93	10/01/2016
20526	INJECTION, THERAPEUTIC (EG, LOCAL ANESTHETIC, CORTICOSTEROID), CARPAL TUNNEL	\$16.77	10/01/2016
20527	INJECTION OF ENZYME IN PALM TISSUE	\$14.91	10/01/2016
20550	INJECTIONS OF TENDON SHEATH, LIGAMENT, OR MUSCLE MEMBRANE	\$14.60	10/01/2016
20551	INJECTION(S); SINGLE TENDON ORIGIN/INSERTION	\$15.22	10/01/2016
20552	INJECTION(S); SINGLE OR MULTIPLE TRIGGER POINT(S), ONE OR TWO MUSCLE(S)	\$14.91	10/01/2016
20553	INJECTION(S); SINGLE OR MULTIPLE TRIGGER POINT(S), THREE OR MORE MUSCLE(S)	\$17.70	10/01/2016
20600	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION; SMALL JOINT OR BURSA (EG, FINGERS,	\$10.25	10/01/2016
20604	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, SMALL JOINT OR BURSA (EG, FINGERS,	\$22.67	10/01/2016
20605	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION; INTERMEDIATE JOINT OR BURSA (EG,	\$10.87	10/01/2016
20606	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, INTERMEDIATE JOINT OR BURSA (EG, TE	\$23.61	10/01/2016
20610	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION; MAJOR JOINT OR BURSA (EG,	\$12.12	10/01/2016
20611	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION, MAJOR JOINT, OR BURSA (EG, SHOULDER	\$25.78	10/01/2016
20612	ASPIRATION AND/OR INJECTION OF GANGLION CYST(S) ANY LOCATION	\$16.15	10/01/2016
20615	ASPIRATION AND INJECTION FOR TREATMENT OF BONE CYST	\$70.52	10/01/2016
20650	INSERTION OF WIRE OR PIN WITH APPLICATION OF SKELETAL TRACTION, INCLUDING	\$43.81	10/01/2016
20665	REMOVAL OF TONGS OR HALO APPLIED BY ANOTHER INDIVIDUAL	\$12.74	10/01/2016
20670	REMOVAL OF IMPLANT; SUPERFICIAL, (EG, BURIED WIRE, PIN OR ROD) (SEPARATE	\$203.80	10/01/2016
20680	REMOVAL OF IMPLANT; DEEP (EG, BURIED WIRE, PIN, SCREW, METAL BAND, NAIL, ROD OR	\$169.94	10/01/2016
20694	REMOVAL, UNDER ANESTHESIA, OF EXTERNAL FIXATION SYSTEM	\$75.49	10/01/2016
20900	BONE GRAFT, ANY DONOR AREA; MINOR OR SMALL (EG, DOWEL OR BUTTON)	\$200.38	10/01/2016
20922	FASCIA LATA GRAFT; BY INCISION AND AREA EXPOSURE, COMPLEX OR SHEET	\$92.89	10/01/2016
20950	MONITORING OF INTERSTITIAL FLUID PRESSURE (INCLUDES INSERTION OF DEVICE, EG, WIC	\$141.35	10/01/2016

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20974	ELECTRICAL STIMULATION TO AID BONE HEALING; NONINVASIVE (NONOPERATIVE)	\$22.68	10/01/2016
20979	LOW INTENSITY ULTRASOUND STIMULATION TO AID BONE HEALING, NONINVASIVE	\$17.39	10/01/2016
20982	DESTRUCTION OF 1 OR MORE BONE GROWTHS ACCESSED THROUGH THE SKIN	\$2,327.19	10/01/2016
20983	ABLATION THERAPY FOR REDUCTION OR ERADICATION OF 1 OR MORE BONE TUMORS (EG, META	\$6,050.20	10/01/2016
21013	EXCISION, TUMOR, SOFT TISSUE OF FACE AND SCALP, SUBFASCIAL (EG, SUBGALEAL, INTRA	\$101.90	10/01/2016
21025	EXCISION OF BONE (EG, FOR OSTEOMYELITIS OR BONE ABSCESS); MANDIBLE	\$122.72	10/01/2016
21026	EXCISION OF BONE (EG, FOR OSTEOMYELITIS OR BONE ABSCESS); FACIAL BONE(S)	\$104.38	10/01/2016
21029	REMOVAL BY CONTOURING OF BENIGN TUMOR OF FACIAL BONE (EG, FIBROUS DYSPLASIA)	\$113.08	10/01/2016
21030	EXCISION OF BENIGN TUMOR OR CYST OF MAXILLA OR ZYGOMA BY ENUCLEATION AND	\$88.85	10/01/2016
21031	EXCISION OF TORUS MANDIBULARIS	\$88.23	10/01/2016
21032	EXCISION OF MAXILLARY TORUS PALATINUS	\$96.61	10/01/2016
21034	EXCISION OF MALIGNANT TUMOR OF MAXILLA OR ZYGOMA	\$137.94	10/01/2016
21040	EXCISION OF BENIGN TUMOR OR CYST OF MANDIBLE, BY ENUCLEATION AND/OR CURETTAGE	\$91.64	10/01/2016
21073	MANIPULATION OF TEMPOROMANDIBULAR JOINT(S) (TMJ), THERAPEUTIC, REQUIRING AN ANES	\$118.37	10/01/2016
21076	IMPRESSION AND CUSTOM PREPARATION; SURGICAL OBTURATOR PROSTHESIS	\$144.15	10/01/2016
21077	IMPRESSION AND CUSTOM PREPARATION; ORBITAL PROSTHESIS	\$358.82	10/01/2016
21079	IMPRESSION AND CUSTOM PREPARATION; INTERIM OBTURATOR PROSTHESIS	\$255.68	10/01/2016
21080	IMPRESSION AND CUSTOM PREPARATION; DEFINITIVE OBTURATOR PROSTHESIS	\$298.86	10/01/2016
21081	IMPRESSION AND CUSTOM PREPARATION; MANDIBULAR RESECTION PROSTHESIS	\$281.15	10/01/2016
21082	IMPRESSION AND CUSTOM PREPARATION; PALATAL AUGMENTATION PROSTHESIS	\$274.94	10/01/2016
21083	IMPRESSION AND CUSTOM PREPARATION; PALATAL LIFT PROSTHESIS	\$292.03	10/01/2016
21084	IMPRESSION AND CUSTOM PREPARATION; SPEECH AID PROSTHESIS	\$324.02	10/01/2016
21085	IMPRESSION AND CUSTOM PREPARATION; ORAL SURGICAL SPLINT	\$170.25	10/01/2016
21086	IMPRESSION AND CUSTOM PREPARATION; AURICULAR PROSTHESIS	\$272.45	10/01/2016
21087	IMPRESSION AND CUSTOM PREPARATION; NASAL PROSTHESIS	\$272.76	10/01/2016
21100	APPLICATION OF HALO TYPE APPLIANCE FOR MAXILLOFACIAL FIXATION, INCLUDES REMOVAL	\$469.73	10/01/2016
21110	APPLICATION OF INTERDENTAL FIXATION DEVICE FOR CONDITIONS OTHER THAN FRACTURE	\$115.88	10/01/2016
21116	INJECTION PROCEDURE FOR TEMPOROMANDIBULAR JOINT ARTHROGRAPHY	\$89.78	10/01/2016
21120	GENIOPLASTY; AUGMENTATION (AUTOGRAFT, ALLOGRAFT, PROSTHETIC MATERIAL)	\$121.47	10/01/2016
21121	GENIOPLASTY; SLIDING OSTEOTOMY, SINGLE PIECE	\$118.98	10/01/2016

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21125	AUGMENTATION, MANDIBULAR BODY OR ANGLE; PROSTHETIC MATERIAL	\$2,015.59	10/01/2016
21127	AUGMENTATION, MANDIBULAR BODY OR ANGLE; WITH BONE GRAFT, ONLAY OR	\$3,131.19	10/01/2016
21208	OSTEOPLASTY, FACIAL BONES; AUGMENTATION (AUTOGRAFT, ALLOGRAFT, OR PROSTHETIC	\$938.83	10/01/2016
21209	OSTEOPLASTY, FACIAL BONES; REDUCTION	\$171.80	10/01/2016
21210	GRAFT, BONE; NASAL, MAXILLARY OR MALAR AREAS (INCLUDES OBTAINING GRAFT)	\$1,269.07	10/01/2016
21215	GRAFT, BONE; MANDIBLE (INCLUDES OBTAINING GRAFT)	\$2,829.54	10/01/2016
21235	GRAFT; EAR CARTILAGE, AUTOGENOUS, TO NOSE OR EAR (INCLUDES OBTAINING GRAFT)	\$139.18	10/01/2016
21245	RECONSTRUCTION OF MANDIBLE OR MAXILLA, SUBPERIOSTEAL IMPLANT; PARTIAL	\$197.89	10/01/2016
21248	RECONSTRUCTION OF MANDIBLE OR MAXILLA, ENDOSTEAL IMPLANT (EG, BLADE, CYLINDER);	\$180.50	10/01/2016
21249	RECONSTRUCTION OF MANDIBLE OR MAXILLA, ENDOSTEAL IMPLANT (EG, BLADE, CYLINDER);	\$205.04	10/01/2016
21270	MALAR AUGMENTATION, PROSTHETIC MATERIAL	\$212.49	10/01/2016
21310	CLOSED TREATMENT OF NASAL BONE FRACTURE WITHOUT MANIPULATION	\$92.57	10/01/2016
21315	CLOSED TREATMENT OF NASAL BONE FRACTURE; WITHOUT STABILIZATION	\$110.91	10/01/2016
21320	CLOSED TREATMENT OF NASAL BONE FRACTURE; WITH STABILIZATION	\$107.49	10/01/2016
21337	CLOSED TREATMENT OF NASAL SEPTAL FRACTURE, WITH OR WITHOUT STABILIZATION	\$96.31	10/01/2016
21345	CLOSED TREATMENT OF NASOMAXILLARY COMPLEX FRACTURE (LEFORT II TYPE), WITH	\$138.24	10/01/2016
21355	PERCUTANEOUS TREATMENT OF FRACTURE OF MALAR AREA, INCLUDING ZYGOMATIC ARCH AND	\$95.69	10/01/2016
21356	OPEN TREATMENT OF DEPRESSED ZYGOMATIC ARCH FRACTURE (EG, GILLIES APPROACH)	\$108.11	10/01/2016
21400	CLOSED TREATMENT OF FRACTURE OF ORBIT, EXCEPT BLOWOUT; WITHOUT MANIPULATION	\$32.00	10/01/2016
21401	CLOSED TREATMENT OF FRACTURE OF ORBIT, EXCEPT BLOWOUT; WITH MANIPULATION	\$137.94	10/01/2016
21421	CLOSED TREATMENT OF PALATAL OR MAXILLARY FRACTURE (LEFORT I TYPE), WITH	\$105.31	10/01/2016
21440	CLOSED TREATMENT OF MANDIBULAR OR MAXILLARY ALVEOLAR RIDGE FRACTURE (SEPARATE	\$97.86	10/01/2016
21445	OPEN TREATMENT OF MANDIBULAR OR MAXILLARY ALVEOLAR RIDGE FRACTURE (SEPARATE	\$128.31	10/01/2016
21450	CLOSED TREATMENT OF MANDIBULAR FRACTURE; WITHOUT MANIPULATION	\$110.90	10/01/2016
21451	CLOSED TREATMENT OF MANDIBULAR FRACTURE; WITH MANIPULATION	\$109.67	10/01/2016
21452	PERCUTANEOUS TREATMENT OF MANDIBULAR FRACTURE, WITH EXTERNAL FIXATION	\$219.95	10/01/2016
21453	CLOSED TREATMENT OF MANDIBULAR FRACTURE WITH INTERDENTAL FIXATION	\$116.81	10/01/2016
21461	OPEN TREATMENT OF MANDIBULAR FRACTURE; WITHOUT INTERDENTAL FIXATION	\$1,073.97	10/01/2016
21462	OPEN TREATMENT OF MANDIBULAR FRACTURE; WITH INTERDENTAL FIXATION	\$1,094.79	10/01/2016
21480	CLOSED TREATMENT OF TEMPOROMANDIBULAR DISLOCATION; INITIAL OR SUBSEQUENT	\$59.33	10/01/2016

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21485	CLOSED TREATMENT OF TEMPOROMANDIBULAR DISLOCATION; COMPLICATED (EG, RECURRENT	\$103.14	10/01/2016
21497	INTERDENTAL WIRING, FOR CONDITION OTHER THAN FRACTURE	\$110.91	10/01/2016
21501	INCISION AND DRAINAGE, DEEP ABSCESS OR HEMATOMA, SOFT TISSUES OF NECK OR THORAX;	\$115.88	10/01/2016
21550	BIOPSY, SOFT TISSUE OF NECK OR THORAX	\$92.27	10/01/2016
21555	EXCISION, TUMOR, SOFT TISSUE OF NECK OR ANTERIOR THORAX, SUBCUTANEOUS; LESS THAN	\$95.38	10/01/2016
21920	BIOPSY, SOFT TISSUE OF BACK OR FLANK; SUPERFICIAL	\$84.81	10/01/2016
21925	BIOPSY, SOFT TISSUE OF BACK OR FLANK; DEEP	\$79.84	10/01/2016
21930	EXCISION, TUMOR, SOFT TISSUE OF BACK OR FLANK, SUBCUTANEOUS; LESS THAN 3 CM	\$93.82	10/01/2016
22305	CLOSED TREATMENT OF VERTEBRAL PROCESS FRACTURE(S)	\$15.53	10/01/2016
22310	CLOSED TREATMENT OF VERTEBRAL BODY FRACTURE(S), WITHOUT MANIPULATION, REQUIRING	\$21.12	10/01/2016
22315	CLOSED TREATMENT OF BROKEN AND/OR DISLOCATED SPINE BONES WITH CASTING AND/OR BRA	\$97.86	10/01/2016
22510	PERCUTANEOUS VERTEBROPLASTY (BONE BIOPSY INCLUDED WHEN PERFORMED), 1 VERTEBRAL B	\$1,158.78	10/01/2016
22511	PERCUTANEOUS VERTEBROPLASTY (BONE BIOPSY INCLUDED WHEN PERFORMED), 1 VERTEBRAL B	\$1,167.47	10/01/2016
22512	PERCUTANEOUS VERTEBROPLASTY (BONE BIOPSY INCLUDED WHEN PERFORMED), 1 VERTEBRAL B	\$679.11	10/01/2016
22513	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTI	\$5,997.38	10/01/2016
22514	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTI	\$6,022.24	10/01/2016
22515	PERCUTANEOUS VERTEBRAL AUGMENTATION, INCLUDING CAVITY CREATION (FRACTURE REDUCTI	\$3,715.55	10/01/2016
23000	REMOVAL OF SUBDELTOID CALCAREOUS DEPOSITS, OPEN	\$187.64	10/01/2016
23030	INCISION AND DRAINAGE, SHOULDER AREA; DEEP ABSCESS OR HEMATOMA	\$162.47	10/01/2016
23031	INCISION AND DRAINAGE, SHOULDER AREA; INFECTED BURSA	\$181.42	10/01/2016
23065	BIOPSY, SOFT TISSUE OF SHOULDER AREA; SUPERFICIAL	\$42.87	10/01/2016
23066	BIOPSY, SOFT TISSUE OF SHOULDER AREA; DEEP	\$174.91	10/01/2016
23075	EXCISION, TUMOR, SOFT TISSUE OF SHOULDER AREA, SUBCUTANEOUS; LESS THAN 3 CM	\$124.26	10/01/2016
23330	REMOVAL OF FOREIGN BODY, SHOULDER; SUBCUTANEOUS	\$77.05	10/01/2016
23350	INJECTION PROCEDURE FOR SHOULDER ARTHROGRAPHY OR ENHANCED CT/MRI SHOULDER	\$69.59	10/01/2016
23505	CLOSED TREATMENT OF CLAVICULAR FRACTURE; WITH MANIPULATION	\$17.09	10/01/2016
23525	CLOSED TREATMENT OF STERNOCLAVICULAR DISLOCATION; WITH MANIPULATION	\$24.86	10/01/2016
23545	CLOSED TREATMENT OF ACROMIOCLAVICULAR DISLOCATION; WITH MANIPULATION	\$27.03	10/01/2016
23575	CLOSED TREATMENT OF SCAPULAR FRACTURE; WITH MANIPULATION, WITH OR WITHOUT	\$21.75	10/01/2016
23600	CLOSED TREATMENT OF PROXIMAL HUMERAL (SURGICAL OR ANATOMICAL NECK) FRACTURE;	\$16.47	10/01/2016

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23605	CLOSED TREATMENT OF PROXIMAL HUMERAL (SURGICAL OR ANATOMICAL NECK) FRACTURE;	\$33.86	10/01/2016
23620	CLOSED TREATMENT OF GREATER HUMERAL TUBEROSITY FRACTURE; WITHOUT MANIPULATION	\$11.50	10/01/2016
23625	CLOSED TREATMENT OF GREATER HUMERAL TUBEROSITY FRACTURE; WITH MANIPULATION	\$22.99	10/01/2016
23650	CLOSED TREATMENT OF SHOULDER DISLOCATION, WITH MANIPULATION; WITHOUT ANESTHESIA	\$22.37	10/01/2016
23665	CLOSED TREATMENT OF SHOULDER DISLOCATION, WITH FRACTURE OF GREATER HUMERAL	\$25.47	10/01/2016
23675	CLOSED TREATMENT OF SHOULDER DISLOCATION, WITH SURGICAL OR ANATOMICAL NECK	\$42.87	10/01/2016
23930	INCISION AND DRAINAGE, UPPER ARM OR ELBOW AREA; DEEP ABSCESS OR HEMATOMA	\$120.23	10/01/2016
23931	INCISION AND DRAINAGE, UPPER ARM OR ELBOW AREA; BURSA	\$111.83	10/01/2016
24065	BIOPSY, SOFT TISSUE OF UPPER ARM OR ELBOW AREA; SUPERFICIAL	\$77.36	10/01/2016
24066	BIOPSY, SOFT TISSUE OF UPPER ARM OR ELBOW AREA; DEEP (SUBFASCIAL OR	\$182.99	10/01/2016
24075	EXCISION, TUMOR, SOFT TISSUE OF UPPER ARM OR ELBOW AREA, SUBCUTANEOUS; LESS THAN	\$140.42	10/01/2016
24200	REMOVAL OF FOREIGN BODY, UPPER ARM OR ELBOW AREA; SUBCUTANEOUS	\$58.72	10/01/2016
24201	REMOVAL OF FOREIGN BODY, UPPER ARM OR ELBOW AREA; DEEP (SUBFASCIAL OR	\$161.54	10/01/2016
24220	INJECTION PROCEDURE FOR ELBOW ARTHROGRAPHY	\$79.84	10/01/2016
24500	CLOSED TREATMENT OF HUMERAL SHAFT FRACTURE; WITHOUT MANIPULATION	\$27.96	10/01/2016
24505	CLOSED TREATMENT OF HUMERAL SHAFT FRACTURE; WITH MANIPULATION, WITH OR WITHOUT	\$41.63	10/01/2016
24530	CLOSED TREATMENT OF SUPRACONDYLAR OR TRANSCONDYLAR HUMERAL FRACTURE, WITH OR	\$31.38	10/01/2016
24535	CLOSED TREATMENT OF SUPRACONDYLAR OR TRANSCONDYLAR HUMERAL FRACTURE, WITH OR	\$41.01	10/01/2016
24560	CLOSED TREATMENT OF HUMERAL EPICONDYLAR FRACTURE, MEDIAL OR LATERAL; WITHOUT	\$29.21	10/01/2016
24565	CLOSED TREATMENT OF HUMERAL EPICONDYLAR FRACTURE, MEDIAL OR LATERAL; WITH	\$37.90	10/01/2016
24576	CLOSED TREATMENT OF HUMERAL CONDYLAR FRACTURE, MEDIAL OR LATERAL; WITHOUT	\$30.13	10/01/2016
24577	CLOSED TREATMENT OF HUMERAL CONDYLAR FRACTURE, MEDIAL OR LATERAL; WITH	\$39.15	10/01/2016
24600	TREATMENT OF CLOSED ELBOW DISLOCATION; WITHOUT ANESTHESIA	\$26.72	10/01/2016
24640	CLOSED TREATMENT OF RADIAL HEAD SUBLUXATION IN CHILD, NURSEMAID ELBOW, WITH	\$37.28	10/01/2016
24650	CLOSED TREATMENT OF RADIAL HEAD OR NECK FRACTURE; WITHOUT MANIPULATION	\$18.64	10/01/2016
24655	CLOSED TREATMENT OF RADIAL HEAD OR NECK FRACTURE; WITH MANIPULATION	\$33.86	10/01/2016
24670	CLOSED TREATMENT OF ULNAR FRACTURE, PROXIMAL END (EG, OLECRANON OR CORONOID PROC	\$24.54	10/01/2016
24675	CLOSED TREATMENT OF ULNAR FRACTURE, PROXIMAL END (EG, OLECRANON OR CORONOID PROC	\$34.79	10/01/2016
25065	BIOPSY, SOFT TISSUE OF FOREARM AND/OR WRIST; SUPERFICIAL	\$79.22	10/01/2016
25075	EXCISION, TUMOR, SOFT TISSUE OF FOREARM AND/OR WRIST AREA, SUBCUTANEOUS; LESS TH	\$141.35	10/01/2016

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25246	INJECTION PROCEDURE FOR WRIST ARTHROGRAPHY	\$75.80	10/01/2016
25500	CLOSED TREATMENT OF RADIAL SHAFT FRACTURE; WITHOUT MANIPULATION	\$19.57	10/01/2016
25505	CLOSED TREATMENT OF RADIAL SHAFT FRACTURE; WITH MANIPULATION	\$36.97	10/01/2016
25520	CLOSED TREATMENT OF BROKEN FOREARM AND DISLOCATED WRIST BONES	\$24.85	10/01/2016
25530	CLOSED TREATMENT OF ULNAR SHAFT FRACTURE; WITHOUT MANIPULATION	\$21.44	10/01/2016
25535	CLOSED TREATMENT OF ULNAR SHAFT FRACTURE; WITH MANIPULATION	\$31.69	10/01/2016
25560	CLOSED TREATMENT OF RADIAL AND ULNAR SHAFT FRACTURES; WITHOUT MANIPULATION	\$23.30	10/01/2016
25565	CLOSED TREATMENT OF RADIAL AND ULNAR SHAFT FRACTURES; WITH MANIPULATION	\$43.19	10/01/2016
25600	CLOSED TREATMENT OF DISTAL RADIAL FRACTURE (EG, COLLES OR SMITH TYPE) OR EPIPHYS	\$15.53	10/01/2016
25605	CLOSED TREATMENT OF DISTAL RADIAL FRACTURE (EG, COLLES OR SMITH TYPE) OR	\$28.27	10/01/2016
25622	CLOSED TREATMENT OF CARPAL SCAPHOID (NAVICULAR) FRACTURE; WITHOUT MANIPULATION	\$23.61	10/01/2016
25624	CLOSED TREATMENT OF CARPAL SCAPHOID (NAVICULAR) FRACTURE; WITH MANIPULATION	\$36.66	10/01/2016
25630	CLOSED TREATMENT OF CARPAL BONE FRACTURE (EXCLUDING CARPAL SCAPHOID	\$21.43	10/01/2016
25635	CLOSED TREATMENT OF CARPAL BONE FRACTURE (EXCLUDING CARPAL SCAPHOID	\$39.77	10/01/2016
25650	CLOSED TREATMENT OF ULNAR STYLOID FRACTURE	\$17.39	10/01/2016
25675	CLOSED TREATMENT OF DISTAL RADIOULNAR DISLOCATION WITH MANIPULATION	\$33.24	10/01/2016
26010	DRAINAGE OF FINGER ABSCESS; SIMPLE	\$110.60	10/01/2016
26011	DRAINAGE OF FINGER ABSCESS; COMPLICATED (EG, FELON)	\$178.95	10/01/2016
26055	TENDON SHEATH INCISION (EG, FOR TRIGGER FINGER)	\$216.85	10/01/2016
26115	EXCISION, TUMOR OR VASCULAR MALFORMATION, SOFT TISSUE OF HAND OR FINGER, SUBCUTA	\$149.43	10/01/2016
26160	EXCISION OF LESION OF TENDON SHEATH OR JOINT CAPSULE (EG, CYST, MUCOUS CYST, OR	\$210.01	10/01/2016
26341	MANIPULATION OF PALM PRETENDINOUS CORD FOLLOWING ENZYME INJECTION	\$20.82	10/01/2016
26600	CLOSED TREATMENT OF METACARPAL FRACTURE, SINGLE; WITHOUT MANIPULATION, EACH BONE	\$14.92	10/01/2016
26605	CLOSED TREATMENT OF METACARPAL FRACTURE, SINGLE; WITH MANIPULATION, EACH BONE	\$24.86	10/01/2016
26641	CLOSED TREATMENT OF CARPOMETACARPAL DISLOCATION, THUMB, WITH MANIPULATION	\$27.96	10/01/2016
26645	CLOSED TREATMENT OF CARPOMETACARPAL FRACTURE DISLOCATION, THUMB (BENNETT	\$29.83	10/01/2016
26670	CLOSED TREATMENT OF CARPOMETACARPAL DISLOCATION, OTHER THAN THUMB, WITH	\$27.34	10/01/2016
26675	CLOSED TREATMENT OF CARPOMETACARPAL DISLOCATION, OTHER THAN THUMB, WITH	\$32.00	10/01/2016
26700	CLOSED TREATMENT OF METACARPOPHALANGEAL DISLOCATION, SINGLE, WITH MANIPULATION;	\$17.08	10/01/2016
26705	CLOSED TREATMENT OF METACARPOPHALANGEAL DISLOCATION, SINGLE, WITH MANIPULATION;	\$30.44	10/01/2016

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26720	CLOSED TREATMENT OF PHALANGEAL SHAFT FRACTURE, PROXIMAL OR MIDDLE PHALANX,	\$12.12	10/01/2016
26725	CLOSED TREATMENT OF PHALANGEAL SHAFT FRACTURE, PROXIMAL OR MIDDLE PHALANX,	\$28.90	10/01/2016
26740	CLOSED TREATMENT OF ARTICULAR FRACTURE, INVOLVING METACARPOPHALANGEAL OR	\$12.12	10/01/2016
26742	CLOSED TREATMENT OF ARTICULAR FRACTURE, INVOLVING METACARPOPHALANGEAL OR	\$29.51	10/01/2016
26755	CLOSED TREATMENT OF DISTAL PHALANGEAL FRACTURE, FINGER OR THUMB; WITH	\$35.72	10/01/2016
26770	CLOSED TREATMENT OF INTERPHALANGEAL JOINT DISLOCATION, SINGLE, WITH	\$17.71	10/01/2016
26775	CLOSED TREATMENT OF INTERPHALANGEAL JOINT DISLOCATION, SINGLE, WITH	\$31.68	10/01/2016
26991	INCISION AND DRAINAGE, PELVIS OR HIP JOINT AREA; INFECTED BURSA	\$158.44	10/01/2016
27040	BIOPSY, SOFT TISSUE OF PELVIS AND HIP AREA; SUPERFICIAL	\$126.13	10/01/2016
27047	EXCISION, TUMOR, SOFT TISSUE OF PELVIS AND HIP AREA, SUBCUTANEOUS; LESS THAN 3 C	\$91.02	10/01/2016
27086	REMOVAL OF FOREIGN BODY, PELVIS OR HIP; SUBCUTANEOUS TISSUE	\$108.73	10/01/2016
27093	INJECTION PROCEDURE FOR HIP ARTHROGRAPHY; WITHOUT ANESTHESIA	\$103.14	10/01/2016
27095	INJECTION PROCEDURE FOR HIP ARTHROGRAPHY; WITH ANESTHESIA	\$139.49	10/01/2016
27096	INJECTION PROCEDURE FOR SACROILIAC JOINT, ANESTHETIC/STEROID, WITH IMAGE GUIDANC	\$67.11	10/01/2016
27220	CLOSED TREATMENT OF ACETABULUM (HIP SOCKET) FRACTURE(S); WITHOUT MANIPULATION	\$4.03	10/01/2016
27230	CLOSED TREATMENT OF FEMORAL FRACTURE, PROXIMAL END, NECK; WITHOUT MANIPULATION	\$2.49	10/01/2016
27256	TREATMENT OF SPONTANEOUS HIP DISLOCATION (DEVELOPMENTAL, INCLUDING CONGENITAL	\$56.23	10/01/2016
27301	INCISION AND DRAINAGE, DEEP ABSCESS, BURSA, OR HEMATOMA, THIGH OR KNEE REGION	\$148.50	10/01/2016
27323	BIOPSY, SOFT TISSUE OF THIGH OR KNEE AREA; SUPERFICIAL	\$81.09	10/01/2016
27327	EXCISION, TUMOR, SOFT TISSUE OF THIGH OR KNEE AREA, SUBCUTANEOUS; LESS THAN 3 CM	\$127.07	10/01/2016
27370	INJECTION OF CONTRAST FOR X-RAY IMAGING OF KNEE	\$91.64	10/01/2016
27372	REMOVAL OF FOREIGN BODY, DEEP, THIGH REGION OR KNEE AREA	\$177.70	10/01/2016
27500	CLOSED TREATMENT OF FEMORAL SHAFT FRACTURE, WITHOUT MANIPULATION	\$33.87	10/01/2016
27501	CLOSED TREATMENT OF SUPRACONDYLAR OR TRANSCONDYLAR FEMORAL FRACTURE WITH OR	\$3.42	10/01/2016
27508	CLOSED TREATMENT OF FEMORAL FRACTURE, DISTAL END, MEDIAL OR LATERAL CONDYLE,	\$27.03	10/01/2016
27516	CLOSED TREATMENT OF DISTAL FEMORAL EPIPHYSEAL SEPARATION; WITHOUT MANIPULATION	\$27.03	10/01/2016
27520	CLOSED TREATMENT OF PATELLAR FRACTURE, WITHOUT MANIPULATION	\$24.85	10/01/2016
27530	CLOSED TREATMENT OF TIBIAL FRACTURE, PROXIMAL (PLATEAU); WITHOUT MANIPULATION	\$18.64	10/01/2016
27532	CLOSED TREATMENT OF TIBIAL FRACTURE, PROXIMAL (PLATEAU); WITH OR WITHOUT	\$32.93	10/01/2016
27538	CLOSED TREATMENT OF INTERCONDYLAR SPINE(S) AND/OR TUBEROSITY FRACTURE(S) OF	\$26.09	10/01/2016

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27550	CLOSED TREATMENT OF KNEE DISLOCATION; WITHOUT ANESTHESIA	\$32.00	10/01/2016
27560	CLOSED TREATMENT OF PATELLAR DISLOCATION; WITHOUT ANESTHESIA	\$24.54	10/01/2016
27603	INCISION AND DRAINAGE, LEG OR ANKLE; DEEP ABSCESS OR HEMATOMA	\$124.27	10/01/2016
27604	INCISION AND DRAINAGE, LEG OR ANKLE; INFECTED BURSA	\$131.10	10/01/2016
27605	TENOTOMY, PERCUTANEOUS, ACHILLES TENDON (SEPARATE PROCEDURE); LOCAL ANESTHESIA	\$138.87	10/01/2016
27613	BIOPSY, SOFT TISSUE OF LEG OR ANKLE AREA; SUPERFICIAL	\$78.60	10/01/2016
27614	BIOPSY, SOFT TISSUE OF LEG OR ANKLE AREA; DEEP (SUBFASCIAL OR INTRAMUSCULAR)	\$152.85	10/01/2016
27618	EXCISION, TUMOR, SOFT TISSUE OF LEG OR ANKLE AREA, SUBCUTANEOUS; LESS THAN 3 CM	\$124.57	10/01/2016
27630	EXCISION OF LESION OF TENDON SHEATH OR CAPSULE (EG, CYST OR GANGLION), LEG	\$172.11	10/01/2016
27648	INJECTION PROCEDURE FOR ANKLE ARTHROGRAPHY	\$97.86	10/01/2016
27656	REPAIR, FASCIAL DEFECT OF LEG	\$210.63	10/01/2016
27685	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; SINGLE TENDON (SEPARATE	\$177.08	10/01/2016
27750	CLOSED TREATMENT OF TIBIAL SHAFT FRACTURE (WITH OR WITHOUT FIBULAR FRACTURE); WI	\$24.85	10/01/2016
27752	CLOSED TREATMENT OF TIBIAL SHAFT FRACTURE (WITH OR WITHOUT FIBULAR FRACTURE);	\$36.04	10/01/2016
27760	CLOSED TREATMENT OF MEDIAL MALLEOLUS FRACTURE; WITHOUT MANIPULATION	\$25.48	10/01/2016
27762	CLOSED TREATMENT OF MEDIAL MALLEOLUS FRACTURE; WITH MANIPULATION, WITH OR	\$36.66	10/01/2016
27780	CLOSED TREATMENT OF PROXIMAL FIBULA OR SHAFT FRACTURE; WITHOUT MANIPULATION	\$24.23	10/01/2016
27781	CLOSED TREATMENT OF PROXIMAL FIBULA OR SHAFT FRACTURE; WITH MANIPULATION	\$27.02	10/01/2016
27786	CLOSED TREATMENT OF DISTAL FIBULAR FRACTURE (LATERAL MALLEOLUS); WITHOUT	\$26.40	10/01/2016
27788	CLOSED TREATMENT OF DISTAL FIBULAR FRACTURE (LATERAL MALLEOLUS); WITH	\$31.69	10/01/2016
27808	CLOSED TREATMENT OF BIMALLEOLAR ANKLE FRACTURE (EG, LATERAL AND MEDIAL MALLEOLI,	\$29.82	10/01/2016
27810	CLOSED TREATMENT OF BIMALLEOLAR ANKLE FRACTURE (EG, LATERAL AND MEDIAL MALLEOLI,	\$37.59	10/01/2016
27816	CLOSED TREATMENT OF TRIMALLEOLAR ANKLE FRACTURE; WITHOUT MANIPULATION	\$28.89	10/01/2016
27818	CLOSED TREATMENT OF TRIMALLEOLAR ANKLE FRACTURE; WITH MANIPULATION	\$43.80	10/01/2016
27824	CLOSED TREATMENT OF FRACTURE OF WEIGHT BEARING ARTICULAR PORTION OF DISTAL	\$7.76	10/01/2016
27825	CLOSED TREATMENT OF FRACTURE OF WEIGHT BEARING ARTICULAR PORTION OF DISTAL	\$44.43	10/01/2016
27830	CLOSED TREATMENT OF PROXIMAL TIBIOFIBULAR JOINT DISLOCATION; WITHOUT ANESTHESIA	\$22.68	10/01/2016
28001	INCISION AND DRAINAGE, BURSA, FOOT	\$96.00	10/01/2016
28002	INCISION AND DRAINAGE BELOW FASCIA, WITH OR WITHOUT TENDON SHEATH INVOLVEMENT,	\$111.22	10/01/2016
28003	INCISION AND DRAINAGE BELOW FASCIA, WITH OR WITHOUT TENDON SHEATH INVOLVEMENT,	\$126.75	10/01/2016

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28008	FASCIOTOMY, FOOT AND/OR TOE	\$124.89	10/01/2016
28010	TENOTOMY, PERCUTANEOUS, TOE; SINGLE TENDON	\$20.51	10/01/2016
28011	TENOTOMY, PERCUTANEOUS, TOE; MULTIPLE TENDONS	\$30.76	10/01/2016
28020	ARTHROTOMY, INCLUDING EXPLORATION, DRAINAGE, OR REMOVAL OF LOOSE OR FOREIGN	\$161.24	10/01/2016
28022	ARTHROTOMY, INCLUDING EXPLORATION, DRAINAGE, OR REMOVAL OF LOOSE OR FOREIGN	\$146.95	10/01/2016
28024	ARTHROTOMY, INCLUDING EXPLORATION, DRAINAGE, OR REMOVAL OF LOOSE OR FOREIGN	\$141.04	10/01/2016
28035	RELEASE, TARSAL TUNNEL (POSTERIOR TIBIAL NERVE DECOMPRESSION)	\$154.40	10/01/2016
28039	EXCISION, TUMOR, SOFT TISSUE OF FOOT OR TOE, SUBCUTANEOUS; 1.5 CM OR GREATER	\$143.22	10/01/2016
28043	EXCISION, TUMOR, SOFT TISSUE OF FOOT OR TOE, SUBCUTANEOUS; LESS THAN 1.5 CM	\$123.65	10/01/2016
28045	EXCISION, TUMOR, SOFT TISSUE OF FOOT OR TOE, SUBFASCIAL (EG, INTRAMUSCULAR); LES	\$133.27	10/01/2016
28050	ARTHROTOMY WITH BIOPSY; INTERTARSAL OR TARSOMETATARSAL JOINT	\$130.79	10/01/2016
28052	ARTHROTOMY WITH BIOPSY; METATARSOPHALANGEAL JOINT	\$146.32	10/01/2016
28054	ARTHROTOMY WITH BIOPSY; INTERPHALANGEAL JOINT	\$132.65	10/01/2016
28060	FASCIECTOMY, PLANTAR FASCIA; PARTIAL (SEPARATE PROCEDURE)	\$145.70	10/01/2016
28062	FASCIECTOMY, PLANTAR FASCIA; RADICAL (SEPARATE PROCEDURE)	\$161.24	10/01/2016
28070	SYNOVECTOMY; INTERTARSAL OR TARSOMETATARSAL JOINT, EACH	\$159.99	10/01/2016
28072	SYNOVECTOMY; METATARSOPHALANGEAL JOINT, EACH	\$157.19	10/01/2016
28080	EXCISION, INTERDIGITAL (MORTON) NEUROMA, SINGLE, EACH	\$141.98	10/01/2016
28086	SYNOVECTOMY, TENDON SHEATH, FOOT; FLEXOR	\$168.38	10/01/2016
28088	SYNOVECTOMY, TENDON SHEATH, FOOT; EXTENSOR	\$149.12	10/01/2016
28090	EXCISION OF LESION, TENDON, TENDON SHEATH, OR CAPSULE (INCLUDING SYNOVECTOMY)	\$146.63	10/01/2016
28092	EXCISION OF LESION, TENDON, TENDON SHEATH, OR CAPSULE (INCLUDING SYNOVECTOMY)	\$139.18	10/01/2016
28100	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR, TALUS OR CALCANEUS;	\$175.21	10/01/2016
28104	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR, TARSAL OR METATARSAL,	\$157.51	10/01/2016
28107	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR, TARSAL OR METATARSAL,	\$166.83	10/01/2016
28108	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR, PHALANGES OF FOOT	\$137.62	10/01/2016
28110	OSTECTOMY, PARTIAL EXCISION, FIFTH METATARSAL HEAD (BUNIONETTE) (SEPARATE	\$156.57	10/01/2016
28111	OSTECTOMY, COMPLETE EXCISION; FIRST METATARSAL HEAD	\$150.36	10/01/2016
28112	OSTECTOMY, COMPLETE EXCISION; OTHER METATARSAL HEAD (SECOND, THIRD OR FOURTH)	\$158.75	10/01/2016
28113	OSTECTOMY, COMPLETE EXCISION; FIFTH METATARSAL HEAD	\$150.36	10/01/2016

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28114	OSTECTOMY, COMPLETE EXCISION; ALL METATARSAL HEADS, WITH PARTIAL PROXIMAL	\$213.74	10/01/2016
28116	OSTECTOMY, EXCISION OF TARSAL COALITION	\$166.51	10/01/2016
28118	OSTECTOMY, CALCANEUS;	\$163.10	10/01/2016
28119	OSTECTOMY, CALCANEUS; FOR SPUR, WITH OR WITHOUT PLANTAR FASCIAL RELEASE	\$148.50	10/01/2016
28120	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, SEQUESTRECTOMY, OR	\$162.17	10/01/2016
28122	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, SEQUESTRECTOMY, OR	\$143.22	10/01/2016
28124	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, SEQUESTRECTOMY, OR	\$132.65	10/01/2016
28126	RESECTION, PARTIAL OR COMPLETE, PHALANGEAL BASE, EACH TOE	\$132.97	10/01/2016
28140	METATARSECTOMY	\$141.66	10/01/2016
28150	PHALANGECTOMY, TOE, EACH TOE	\$132.34	10/01/2016
28153	RESECTION, CONDYLE(S), DISTAL END OF PHALANX, EACH TOE	\$133.59	10/01/2016
28160	HEMIPHALANGECTOMY OR INTERPHALANGEAL JOINT EXCISION, TOE, PROXIMAL END OF	\$136.69	10/01/2016
28190	REMOVAL OF FOREIGN BODY, FOOT; SUBCUTANEOUS	\$110.28	10/01/2016
28192	REMOVAL OF FOREIGN BODY, FOOT; DEEP	\$141.67	10/01/2016
28193	REMOVAL OF FOREIGN BODY, FOOT; COMPLICATED	\$146.01	10/01/2016
28200	REPAIR, TENDON, FLEXOR, FOOT; PRIMARY OR SECONDARY, WITHOUT FREE GRAFT, EACH TEN	\$151.92	10/01/2016
28202	REPAIR, TENDON, FLEXOR, FOOT; SECONDARY WITH FREE GRAFT, EACH TENDON (INCLUDES	\$154.08	10/01/2016
28208	REPAIR, TENDON, EXTENSOR, FOOT; PRIMARY OR SECONDARY, EACH TENDON	\$146.63	10/01/2016
28210	REPAIR, TENDON, EXTENSOR, FOOT; SECONDARY WITH FREE GRAFT, EACH TENDON	\$148.50	10/01/2016
28220	TENOLYSIS, FLEXOR, FOOT; SINGLE TENDON	\$134.21	10/01/2016
28222	TENOLYSIS, FLEXOR, FOOT; MULTIPLE TENDONS	\$142.28	10/01/2016
28225	TENOLYSIS, EXTENSOR, FOOT; SINGLE TENDON	\$135.76	10/01/2016
28226	TENOLYSIS, EXTENSOR, FOOT; MULTIPLE TENDONS	\$194.16	10/01/2016
28230	TENOTOMY, OPEN, TENDON FLEXOR; FOOT, SINGLE OR MULTIPLE TENDON(S) (SEPARATE	\$137.31	10/01/2016
28232	TENOTOMY, OPEN, TENDON FLEXOR; TOE, SINGLE TENDON (SEPARATE PROCEDURE)	\$130.48	10/01/2016
28234	TENOTOMY, OPEN, EXTENSOR, FOOT OR TOE, EACH TENDON	\$131.10	10/01/2016
28238	RECONSTRUCTION (ADVANCEMENT), POSTERIOR TIBIAL TENDON WITH EXCISION OF	\$165.89	10/01/2016
28240	TENOTOMY, LENGTHENING, OR RELEASE, ABDUCTOR HALLUCIS MUSCLE	\$137.00	10/01/2016
28250	DIVISION OF PLANTAR FASCIA AND MUSCLE (EG, STEINDLER STRIPPING) (SEPARATE	\$158.75	10/01/2016
28260	CAPSULOTOMY, MIDFOOT; MEDIAL RELEASE ONLY (SEPARATE PROCEDURE)	\$159.06	10/01/2016

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28261	CAPSULOTOMY, MIDFOOT; WITH TENDON LENGTHENING	\$184.53	10/01/2016
28262	CAPSULOTOMY, MIDFOOT; EXTENSIVE, INCLUDING POSTERIOR TALOTIBIAL CAPSULOTOMY AND	\$257.23	10/01/2016
28264	CAPSULOTOMY, MIDTARSAL (EG, HEYMAN TYPE PROCEDURE)	\$213.74	10/01/2016
28270	CAPSULOTOMY; METATARSOPHALANGEAL JOINT, WITH OR WITHOUT TENORRHAPHY, EACH JOINT	\$142.60	10/01/2016
28272	CAPSULOTOMY; INTERPHALANGEAL JOINT, EACH JOINT (SEPARATE PROCEDURE)	\$126.75	10/01/2016
28280	SYNDACTYLIZATION, TOES (EG, WEBBING OR KELIKIAN TYPE PROCEDURE)	\$151.60	10/01/2016
28285	CORRECTION, HAMMERTOES (EG, INTERPHALANGEAL FUSION, PARTIAL OR TOTAL	\$141.97	10/01/2016
28286	CORRECTION, COCK-UP FIFTH TOE, WITH PLASTIC SKIN CLOSURE (EG, RUIZ-MORA TYPE	\$137.93	10/01/2016
28288	OSTECTOMY, PARTIAL, EXOSTECTOMY OR CONDYLECTOMY, METATARSAL HEAD, EACH	\$158.12	10/01/2016
28289	HALLUX RIGIDUS CORRECTION WITH CHEILECTOMY, DEBRIDEMENT AND CAPSULAR RELEASE OF	\$167.76	10/01/2016
28290	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; SIMPLE	\$174.59	10/01/2016
28292	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; KELLER,	\$169.63	10/01/2016
28293	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; RESECTION	\$304.77	10/01/2016
28294	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; WITH TENDON	\$199.44	10/01/2016
28296	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; WITH	\$173.36	10/01/2016
28297	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; LAPIDUS	\$207.52	10/01/2016
28298	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; BY PHALANX	\$194.79	10/01/2016
28299	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; BY DOUBLE	\$197.90	10/01/2016
28304	OSTEOTOMY, TARSAL BONES, OTHER THAN CALCANEUS OR TALUS;	\$198.20	10/01/2016
28306	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION,	\$189.50	10/01/2016
28307	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION,	\$208.46	10/01/2016
28308	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION,	\$170.24	10/01/2016
28310	OSTEOTOMY, SHORTENING, ANGULAR OR ROTATIONAL CORRECTION; PROXIMAL PHALANX,	\$170.87	10/01/2016
28312	OSTEOTOMY, SHORTENING, ANGULAR OR ROTATIONAL CORRECTION; OTHER PHALANGES, ANY	\$171.48	10/01/2016
28313	RECONSTRUCTION, ANGULAR DEFORMITY OF TOE, SOFT TISSUE PROCEDURES ONLY (EG,	\$153.78	10/01/2016
28315	SESAMOIDECTOMY, FIRST TOE (SEPARATE PROCEDURE)	\$141.35	10/01/2016
28322	REPAIR, NONUNION OR MALUNION; METATARSAL, WITH OR WITHOUT BONE GRAFT (INCLUDES	\$190.74	10/01/2016
28340	RECONSTRUCTION, TOE, MACRODACTYLY; SOFT TISSUE RESECTION	\$149.74	10/01/2016
28341	RECONSTRUCTION, TOE, MACRODACTYLY; REQUIRING BONE RESECTION	\$162.17	10/01/2016
28344	RECONSTRUCTION, TOE(S); POLYDACTYLY	\$140.42	10/01/2016

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28345	RECONSTRUCTION, TOE(S); SYNDACTYLY, WITH OR WITHOUT SKIN GRAFT(S), EACH WEB	\$142.60	10/01/2016
28400	CLOSED TREATMENT OF CALCANEAL FRACTURE; WITHOUT MANIPULATION	\$18.64	10/01/2016
28405	CLOSED TREATMENT OF CALCANEAL FRACTURE; WITH MANIPULATION	\$32.31	10/01/2016
28430	CLOSED TREATMENT OF TALUS FRACTURE; WITHOUT MANIPULATION	\$23.30	10/01/2016
28435	CLOSED TREATMENT OF TALUS FRACTURE; WITH MANIPULATION	\$30.14	10/01/2016
28450	TREATMENT OF TARSAL BONE FRACTURE (EXCEPT TALUS AND CALCANEUS); WITHOUT	\$20.81	10/01/2016
28455	TREATMENT OF TARSAL BONE FRACTURE (EXCEPT TALUS AND CALCANEUS); WITH	\$25.79	10/01/2016
28470	CLOSED TREATMENT OF METATARSAL FRACTURE; WITHOUT MANIPULATION, EACH	\$12.74	10/01/2016
28475	CLOSED TREATMENT OF METATARSAL FRACTURE; WITH MANIPULATION, EACH	\$25.79	10/01/2016
28490	CLOSED TREATMENT OF FRACTURE GREAT TOE, PHALANX OR PHALANGES; WITHOUT	\$18.01	10/01/2016
28495	CLOSED TREATMENT OF FRACTURE GREAT TOE, PHALANX OR PHALANGES; WITH MANIPULATION	\$25.16	10/01/2016
28496	PERCUTANEOUS SKELETAL FIXATION OF FRACTURE GREAT TOE, PHALANX OR PHALANGES,	\$183.91	10/01/2016
28505	OPEN TREATMENT OF FRACTURE, GREAT TOE, PHALANX OR PHALANGES, INCLUDES INTERNAL F	\$151.29	10/01/2016
28510	CLOSED TREATMENT OF FRACTURE, PHALANX OR PHALANGES, OTHER THAN GREAT TOE;	\$2.79	10/01/2016
28515	CLOSED TREATMENT OF FRACTURE, PHALANX OR PHALANGES, OTHER THAN GREAT TOE; WITH	\$16.78	10/01/2016
28525	OPEN TREATMENT OF FRACTURE, PHALANX OR PHALANGES, OTHER THAN GREAT TOE, INCLUDES	\$151.29	10/01/2016
28530	CLOSED TREATMENT OF SESAMOID FRACTURE	\$11.49	10/01/2016
28531	OPEN TREATMENT OF SESAMOID FRACTURE, WITH OR WITHOUT INTERNAL FIXATION	\$145.70	10/01/2016
28540	CLOSED TREATMENT OF TARSAL BONE DISLOCATION, OTHER THAN TALOTARSAL; WITHOUT	\$18.01	10/01/2016
28545	CLOSED TREATMENT OF TARSAL BONE DISLOCATION, OTHER THAN TALOTARSAL; REQUIRING	\$29.21	10/01/2016
28546	PERCUTANEOUS SKELETAL FIXATION OF TARSAL BONE DISLOCATION, OTHER THAN	\$205.97	10/01/2016
28555	OPEN TREATMENT OF TARSAL BONE DISLOCATION, INCLUDES INTERNAL FIXATION, WHEN PERF	\$190.43	10/01/2016
28570	CLOSED TREATMENT OF TALOTARSAL JOINT DISLOCATION; WITHOUT ANESTHESIA	\$30.14	10/01/2016
28575	CLOSED TREATMENT OF TALOTARSAL JOINT DISLOCATION; REQUIRING ANESTHESIA	\$30.76	10/01/2016
28585	OPEN TREATMENT OF TALOTARSAL JOINT DISLOCATION, INCLUDES INTERNAL FIXATION, WHEN	\$165.90	10/01/2016
28600	CLOSED TREATMENT OF TARSOMETATARSAL JOINT DISLOCATION; WITHOUT ANESTHESIA	\$27.03	10/01/2016
28605	CLOSED TREATMENT OF TARSOMETATARSAL JOINT DISLOCATION; REQUIRING ANESTHESIA	\$28.90	10/01/2016
28630	CLOSED TREATMENT OF METATARSOPHALANGEAL JOINT DISLOCATION; WITHOUT ANESTHESIA	\$41.94	10/01/2016
28635	CLOSED TREATMENT OF METATARSOPHALANGEAL JOINT DISLOCATION; REQUIRING ANESTHESIA	\$38.52	10/01/2016
28636	PERCUTANEOUS SKELETAL FIXATION OF METATARSOPHALANGEAL JOINT DISLOCATION, WITH	\$91.33	10/01/2016

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28645	OPEN TREATMENT OF METATARSOPHALANGEAL JOINT DISLOCATION, INCLUDES INTERNAL FIXAT	\$155.03	10/01/2016
28660	CLOSED TREATMENT OF INTERPHALANGEAL JOINT DISLOCATION; WITHOUT ANESTHESIA	\$24.54	10/01/2016
28665	CLOSED TREATMENT OF INTERPHALANGEAL JOINT DISLOCATION; REQUIRING ANESTHESIA	\$20.19	10/01/2016
28675	OPEN TREATMENT OF INTERPHALANGEAL JOINT DISLOCATION, INCLUDES INTERNAL FIXATION,	\$155.33	10/01/2016
28740	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, SINGLE JOINT	\$201.31	10/01/2016
28750	ARTHRODESIS, GREAT TOE; METATARSOPHALANGEAL JOINT	\$200.38	10/01/2016
28755	ARTHRODESIS, GREAT TOE; INTERPHALANGEAL JOINT	\$160.61	10/01/2016
28760	ARTHRODESIS, WITH EXTENSOR HALLUCIS LONGUS TRANSFER TO FIRST METATARSAL NECK,	\$191.68	10/01/2016
28820	AMPUTATION, TOE; METATARSOPHALANGEAL JOINT	\$152.85	10/01/2016
28825	AMPUTATION, TOE; INTERPHALANGEAL JOINT	\$151.60	10/01/2016
28890	EXTRACORPOREAL SHOCK WAVE, HIGH ENERGY, PERFORMED BY A PHYSICIAN OR OTHER QUALIF	\$88.23	10/01/2016
29000	APPLICATION OF HALO TYPE BODY CAST (SEE 20661-20663 FOR INSERTION)	\$99.73	10/01/2016
29010	APPLICATION OF RISSER JACKET, LOCALIZER, BODY; ONLY	\$79.53	10/01/2016
29015	APPLICATION OF RISSER JACKET, LOCALIZER, BODY; INCLUDING HEAD	\$93.51	10/01/2016
29035	APPLICATION OF BODY CAST, SHOULDER TO HIPS;	\$65.86	10/01/2016
29040	APPLICATION OF BODY CAST, SHOULDER TO HIPS; INCLUDING HEAD, MINERVA TYPE	\$70.52	10/01/2016
29044	APPLICATION OF BODY CAST, SHOULDER TO HIPS; INCLUDING ONE THIGH	\$116.18	10/01/2016
29046	APPLICATION OF BODY CAST, SHOULDER TO HIPS; INCLUDING BOTH THIGHS	\$74.56	10/01/2016
29049	APPLICATION, CAST; FIGURE-OF-EIGHT	\$18.95	10/01/2016
29055	APPLICATION, CAST; SHOULDER SPICA	\$73.94	10/01/2016
29058	APPLICATION, CAST; PLASTER VELPEAU	\$25.78	10/01/2016
29065	APPLICATION, CAST; SHOULDER TO HAND (LONG ARM)	\$24.23	10/01/2016
29075	APPLICATION, CAST; ELBOW TO FINGER (SHORT ARM)	\$21.44	10/01/2016
29085	APPLICATION, CAST; HAND AND LOWER FOREARM (GAUNTLET)	\$24.54	10/01/2016
29086	APPLICATION, CAST; FINGER (EG, CONTRACTURE)	\$23.92	10/01/2016
29105	APPLICATION OF LONG ARM SPLINT (SHOULDER TO HAND)	\$25.16	10/01/2016
29125	APPLICATION OF SHORT ARM SPLINT (FOREARM TO HAND); STATIC	\$22.05	10/01/2016
29126	APPLICATION OF SHORT ARM SPLINT (FOREARM TO HAND); DYNAMIC	\$24.85	10/01/2016
29130	APPLICATION OF FINGER SPLINT; STATIC	\$10.87	10/01/2016
29131	APPLICATION OF FINGER SPLINT; DYNAMIC	\$15.84	10/01/2016

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29200	STRAPPING; THORAX	\$9.94	10/01/2016
29240	STRAPPING; SHOULDER (EG, VELPEAU)	\$9.01	10/01/2016
29260	STRAPPING; ELBOW OR WRIST	\$8.39	10/01/2016
29280	STRAPPING; HAND OR FINGER	\$8.07	10/01/2016
29305	APPLICATION OF HIP SPICA CAST; ONE LEG	\$77.35	10/01/2016
29325	APPLICATION OF HIP SPICA CAST; ONE AND ONE-HALF SPICA OR BOTH LEGS	\$82.64	10/01/2016
29345	APPLICATION OF LONG LEG CAST (THIGH TO TOES);	\$31.07	10/01/2016
29355	APPLICATION OF LONG LEG CAST (THIGH TO TOES); WALKER OR AMBULATORY TYPE	\$30.14	10/01/2016
29358	APPLICATION OF LONG LEG CAST BRACE	\$49.71	10/01/2016
29365	APPLICATION OF CYLINDER CAST (THIGH TO ANKLE)	\$30.75	10/01/2016
29405	APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES);	\$19.26	10/01/2016
29425	APPLICATION OF SHORT LEG CAST (BELOW KNEE TO TOES); WALKING OR AMBULATORY TYPE	\$19.26	10/01/2016
29435	APPLICATION OF PATELLAR TENDON BEARING (PTB) CAST	\$29.52	10/01/2016
29440	ADDING WALKER TO PREVIOUSLY APPLIED CAST	\$13.05	10/01/2016
29445	APPLICATION OF RIGID TOTAL CONTACT LEG CAST	\$26.72	10/01/2016
29450	APPLICATION OF CLUBFOOT CAST WITH MOLDING OR MANIPULATION, LONG OR SHORT LEG	\$27.03	10/01/2016
29505	APPLICATION OF LONG LEG SPLINT (THIGH TO ANKLE OR TOES)	\$29.52	10/01/2016
29515	APPLICATION OF SHORT LEG SPLINT (CALF TO FOOT)	\$19.57	10/01/2016
29520	STRAPPING; HIP	\$11.18	10/01/2016
29530	STRAPPING; KNEE	\$9.01	10/01/2016
29540	STRAPPING; ANKLE AND/OR FOOT	\$6.83	10/01/2016
29550	STRAPPING; TOES	\$6.52	10/01/2016
29580	STRAPPING; UNNA BOOT	\$14.91	10/01/2016
29581	APPLICATION OF MULTI-LAYER COMPRESSION SYSTEM; LEG (BELOW KNEE), INCLUDING ANKLE	\$43.18	10/01/2016
29582	APPLICATION OF MULTI-LAYER COMPRESSION SYSTEM; THIGH AND LEG, INCLUDING ANKLE A	\$47.84	10/01/2016
29583	APPLICATION OF MULTI-LAYER COMPRESSION SYSTEM; UPPER ARM AND FOREARM	\$28.58	10/01/2016
29584	APPLICATION OF MULTI-LAYER COMPRESSION SYSTEM; UPPER ARM, FOREARM, HAND, AND FI	\$47.84	10/01/2016
29700	REMOVAL OR BIVALVING; GAUNTLET, BOOT OR BODY CAST	\$25.79	10/01/2016
29705	REMOVAL OR BIVALVING; FULL ARM OR FULL LEG CAST	\$17.09	10/01/2016
29710	REMOVAL OR BIVALVING; SHOULDER OR HIP SPICA, MINERVA, OR RISSER JACKET, ETC.	\$34.17	10/01/2016

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29720	REPAIR OF SPICA, BODY CAST OR JACKET	\$35.73	10/01/2016
29730	WINDOWING OF CAST	\$17.08	10/01/2016
29740	WEDGING OF CAST (EXCEPT CLUBFOOT CASTS)	\$25.47	10/01/2016
29750	WEDGING OF CLUBFOOT CAST	\$19.26	10/01/2016
30000	DRAINAGE ABSCESS OR HEMATOMA, NASAL, INTERNAL APPROACH	\$99.11	10/01/2016
30020	DRAINAGE ABSCESS OR HEMATOMA, NASAL SEPTUM	\$100.96	10/01/2016
30100	BIOPSY, INTRANASAL	\$64.00	10/01/2016
30110	EXCISION, NASAL POLYP(S), SIMPLE	\$88.85	10/01/2016
30117	EXCISION OR DESTRUCTION (EG, LASER), INTRANASAL LESION; INTERNAL APPROACH	\$476.56	10/01/2016
30120	EXCISION OR SURGICAL PLANING OF SKIN OF NOSE FOR RHINOPHYMA	\$71.14	10/01/2016
30200	INJECTION INTO TURBINATE(S), THERAPEUTIC	\$48.16	10/01/2016
30210	DISPLACEMENT THERAPY (PROETZ TYPE)	\$44.73	10/01/2016
30220	INSERTION, NASAL SEPTAL PROSTHESIS (BUTTON)	\$158.13	10/01/2016
30300	REMOVAL FOREIGN BODY, INTRANASAL; OFFICE TYPE PROCEDURE	\$71.14	10/01/2016
30560	LYSIS INTRANASAL SYNECHIA	\$116.50	10/01/2016
30580	REPAIR FISTULA; OROMAXILLARY (COMBINE WITH 31030 IF ANTROTOMY IS INCLUDED)	\$124.58	10/01/2016
30600	REPAIR FISTULA; ORONASAL	\$126.44	10/01/2016
30801	ABLATION, SOFT TISSUE OF INFERIOR TURBINATES, UNILATERAL OR BILATERAL, ANY METHO	\$82.32	10/01/2016
30802	ABLATION, SOFT TISSUE OF INFERIOR TURBINATES, UNILATERAL OR BILATERAL, ANY METHO	\$89.16	10/01/2016
30901	CONTROL NASAL HEMORRHAGE, ANTERIOR, SIMPLE (LIMITED CAUTERY AND/OR PACKING) ANY	\$33.86	10/01/2016
30903	CONTROL NASAL HEMORRHAGE, ANTERIOR, COMPLEX (EXTENSIVE CAUTERY AND/OR PACKING)	\$123.96	10/01/2016
30905	CONTROL NASAL HEMORRHAGE, POSTERIOR, WITH POSTERIOR NASAL PACKS AND/OR CAUTERY,	\$144.77	10/01/2016
30906	CONTROL NASAL HEMORRHAGE, POSTERIOR, WITH POSTERIOR NASAL PACKS AND/OR CAUTERY,	\$186.39	10/01/2016
31000	LAVAGE BY CANNULATION; MAXILLARY SINUS (ANTRUM PUNCTURE OR NATURAL OSTIUM)	\$68.97	10/01/2016
31020	SINUSOTOMY, MAXILLARY (ANTROTOMY); INTRANASAL	\$110.91	10/01/2016
31030	SINUSOTOMY, MAXILLARY (ANTROTOMY); RADICAL (CALDWELL-LUC) WITHOUT REMOVAL OF	\$143.84	10/01/2016
31231	NASAL ENDOSCOPY, DIAGNOSTIC, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE)	\$128.31	10/01/2016
31233	NASAL/SINUS ENDOSCOPY, DIAGNOSTIC WITH MAXILLARY SINUSOSCOPY (VIA INFERIOR	\$111.22	10/01/2016
31235	NASAL/SINUS ENDOSCOPY, DIAGNOSTIC WITH SPHENOID SINUSOSCOPY (VIA PUNCTURE OF	\$121.16	10/01/2016
31237	NASAL/SINUS ENDOSCOPY, SURGICAL; WITH BIOPSY, POLYPECTOMY OR DEBRIDEMENT	\$85.43	10/01/2016

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31238	NASAL/SINUS ENDOSCOPY, SURGICAL; WITH CONTROL OF NASAL HEMORRHAGE	\$78.29	10/01/2016
31505	LARYNGOSCOPY, INDIRECT (SEPARATE PROCEDURE); DIAGNOSTIC	\$29.82	10/01/2016
31510	LARYNGOSCOPY, INDIRECT; WITH BIOPSY	\$78.60	10/01/2016
31511	LARYNGOSCOPY, INDIRECT; WITH REMOVAL OF FOREIGN BODY	\$71.76	10/01/2016
31512	LARYNGOSCOPY, INDIRECT; WITH REMOVAL OF LESION	\$66.17	10/01/2016
31515	LARYNGOSCOPY DIRECT, WITH OR WITHOUT TRACHEOSCOPY; FOR ASPIRATION	\$70.52	10/01/2016
31525	LARYNGOSCOPY DIRECT, WITH OR WITHOUT TRACHEOSCOPY; DIAGNOSTIC, EXCEPT NEWBORN	\$81.39	10/01/2016
31570	LARYNGOSCOPY, DIRECT, WITH INJECTION INTO VOCAL CORD(S), THERAPEUTIC;	\$95.69	10/01/2016
31575	LARYNGOSCOPY, FLEXIBLE FIBEROPTIC; DIAGNOSTIC	\$32.93	10/01/2016
31576	LARYNGOSCOPY, FLEXIBLE FIBEROPTIC; WITH BIOPSY	\$88.54	10/01/2016
31577	LARYNGOSCOPY, FLEXIBLE FIBEROPTIC; WITH REMOVAL OF FOREIGN BODY	\$80.77	10/01/2016
31578	LARYNGOSCOPY, FLEXIBLE FIBEROPTIC; WITH REMOVAL OF LESION	\$93.82	10/01/2016
31579	LARYNGOSCOPY, FLEXIBLE OR RIGID FIBEROPTIC, WITH STROBOSCOPY	\$60.89	10/01/2016
31612	TRACHEAL PUNCTURE, PERCUTANEOUS WITH TRANSTRACHEAL ASPIRATION AND/OR INJECTION	\$31.07	10/01/2016
31615	TRACHEOBRONCHOSCOPY THROUGH ESTABLISHED TRACHEOSTOMY INCISION	\$46.91	10/01/2016
31622	BRONCHOSCOPY, RIGID OR FLEXIBLE, INCLUDING FLUOROSCOPIC GUIDANCE, WHEN PERFORMED	\$140.11	10/01/2016
31623	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	\$161.85	10/01/2016
31624	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	\$145.08	10/01/2016
31625	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	\$198.83	10/01/2016
31628	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	\$200.38	10/01/2016
31629	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	\$261.58	10/01/2016
31632	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	\$22.06	10/01/2016
31633	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	\$24.85	10/01/2016
31635	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	\$139.80	10/01/2016
31645	BRONCHOSCOPY, RIGID OR FLEXIBLE, INCLUDING FLUOROSCOPIC GUIDANCE, WHEN PERFORMED	\$141.97	10/01/2016
31646	BRONCHOSCOPY, RIGID OR FLEXIBLE, INCLUDING FLUOROSCOPIC GUIDANCE, WHEN PERFORMED	\$132.03	10/01/2016
31717	CATHETERIZATION WITH BRONCHIAL BRUSH BIOPSY	\$133.58	10/01/2016
31730	INSERTION INTO WINDPIPE OF NEEDLE WIRE, DILATOR, STENT, OR TUBE FOR OXYGEN DELIV	\$954.98	10/01/2016
31820	SURGICAL CLOSURE TRACHEOSTOMY OR FISTULA; WITHOUT PLASTIC REPAIR	\$93.51	10/01/2016
31825	SURGICAL CLOSURE TRACHEOSTOMY OR FISTULA; WITH PLASTIC REPAIR	\$106.55	10/01/2016

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31830	REVISION OF TRACHEOSTOMY SCAR	\$88.23	10/01/2016
32400	BIOPSY, PLEURA; PERCUTANEOUS NEEDLE	\$55.92	10/01/2016
32405	BIOPSY, LUNG OR MEDIASTINUM, PERCUTANEOUS NEEDLE	\$304.45	10/01/2016
32550	INSERTION OF INDWELLING TUNNELED PLEURAL CATHETER WITH CUFF	\$491.78	10/01/2016
32560	INSTILLATION, VIA CHEST TUBE/CATHETER, AGENT FOR PLEURODESIS (EG, TALC FOR RECUR	\$146.02	10/01/2016
32561	INSTILLATION(S), VIA CHEST TUBE/CATHETER, AGENT FOR FIBRINOLYSIS (EG, FIBRINOLYT	\$20.81	10/01/2016
32960	PNEUMOTHORAX, THERAPEUTIC, INTRAPLEURAL INJECTION OF AIR	\$36.04	10/01/2016
32998	ABLATION THERAPY FOR REDUCTION OR ERADICATION OF ONE OR MORE PULMONARY TUMOR(S)	\$1,857.47	10/01/2016
35471	TRANSLUMINAL BALLOON ANGIOPLASTY, PERCUTANEOUS; RENAL OR VISCERAL ARTERY	\$1,786.95	10/01/2016
35472	TRANSLUMINAL BALLOON ANGIOPLASTY, PERCUTANEOUS; AORTIC	\$1,306.03	10/01/2016
35475	TRANSLUMINAL BALLOON ANGIOPLASTY, PERCUTANEOUS; BRACHIOCEPHALIC TRUNK OR	\$1,077.39	10/01/2016
35476	TRANSLUMINAL BALLOON ANGIOPLASTY, PERCUTANEOUS; VENOUS	\$1,020.85	10/01/2016
36000	INTRODUCTION OF NEEDLE OR INTRACATHETER, VEIN	\$14.29	10/01/2016
36002	INJECTION PROCEDURES (EG, THROMBIN) FOR PERCUTANEOUS TREATMENT OF EXTREMITY	\$47.84	10/01/2016
36005	INJECTION PROCEDURE FOR EXTREMITY VENOGRAPHY (INCLUDING INTRODUCTION OF NEEDLE	\$242.94	10/01/2016
36010	INTRODUCTION OF CATHETER, SUPERIOR OR INFERIOR VENA CAVA	\$333.34	10/01/2016
36011	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM; FIRST ORDER BRANCH (EG, RENAL	\$595.85	10/01/2016
36012	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM; SECOND ORDER, OR MORE SELECTIVE,	\$604.55	10/01/2016
36013	INTRODUCTION OF CATHETER, RIGHT HEART OR MAIN PULMONARY ARTERY	\$581.57	10/01/2016
36014	SELECTIVE CATHETER PLACEMENT, LEFT OR RIGHT PULMONARY ARTERY	\$581.87	10/01/2016
36015	SELECTIVE CATHETER PLACEMENT, SEGMENTAL OR SUBSEGMENTAL PULMONARY ARTERY	\$613.87	10/01/2016
36100	INTRODUCTION OF NEEDLE OR INTRACATHETER, CAROTID OR VERTEBRAL ARTERY	\$303.21	10/01/2016
36120	INTRODUCTION OF NEEDLE OR INTRACATHETER; RETROGRADE BRACHIAL ARTERY	\$283.95	10/01/2016
36140	INTRODUCTION OF NEEDLE OR INTRACATHETER; EXTREMITY ARTERY	\$294.20	10/01/2016
36147	INTRODUCTION OF NEEDLE AND/OR CATHETER, ARTERIOVENOUS SHUNT CREATED FOR DIALYSIS	\$573.80	10/01/2016
36148	INTRODUCTION OF NEEDLE AND/OR CATHETER, ARTERIOVENOUS SHUNT CREATED FOR DIALYSIS	\$187.64	10/01/2016
36160	INTRODUCTION OF NEEDLE OR INTRACATHETER, AORTIC, TRANSLUMBAR	\$325.27	10/01/2016
36200	INTRODUCTION OF CATHETER, AORTA	\$413.19	10/01/2016
36215	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; EACH FIRST ORDER THORACIC OR	\$782.88	10/01/2016
36216	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL SECOND ORDER THORACIC OR	\$806.17	10/01/2016

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36217	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL THIRD ORDER OR MORE	\$1,440.87	10/01/2016
36218	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; ADDITIONAL SECOND ORDER, THIRD	\$122.40	10/01/2016
36245	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; EACH FIRST ORDER ABDOMINAL, PELVI	\$983.57	10/01/2016
36246	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL SECOND ORDER ABDOMINAL, P	\$545.52	10/01/2016
36247	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; INITIAL THIRD ORDER OR MORE SELEC	\$1,109.38	10/01/2016
36248	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; ADDITIONAL SECOND ORDER, THIRD OR	\$90.71	10/01/2016
36400	VENIPUNCTURE, YOUNGER THAN AGE 3 YEARS, NECESSITATING THE SKILL OF A PHYSICIAN O	\$8.39	10/01/2016
36405	VENIPUNCTURE, YOUNGER THAN AGE 3 YEARS, NECESSITATING THE SKILL OF A PHYSICIAN O	\$8.70	10/01/2016
36406	VENIPUNCTURE, YOUNGER THAN AGE 3 YEARS, NECESSITATING THE SKILL OF A PHYSICIAN O	\$7.14	10/01/2016
36410	VENIPUNCTURE, AGE 3 YEARS OR OLDER, NECESSITATING THE SKILL OF A PHYSICIAN OR OT	\$6.53	10/01/2016
36470	INJECTION OF SCLEROSING SOLUTION; SINGLE VEIN	\$57.47	10/01/2016
36471	INJECTION OF SCLEROSING SOLUTION; MULTIPLE VEINS, SAME LEG	\$64.62	10/01/2016
36475	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL	\$1,105.66	10/01/2016
36476	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL	\$140.74	10/01/2016
36478	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL	\$814.87	10/01/2016
36479	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL	\$150.67	10/01/2016
36481	PERCUTANEOUS PORTAL VEIN CATHETERIZATION BY ANY METHOD	\$1,488.40	10/01/2016
36510	CATHETERIZATION OF UMBILICAL VEIN FOR DIAGNOSIS OR THERAPY, NEWBORN	\$30.45	10/01/2016
36514	THERAPEUTIC APHERESIS; FOR PLASMA PHERESIS	\$392.68	10/01/2016
36515	THERAPEUTIC APHERESIS; WITH EXTRACORPOREAL IMMUNOADSORPTION AND PLASMA	\$1,745.93	10/01/2016
36516	THERAPEUTIC APHERESIS; WITH EXTRACORPOREAL SELECTIVE ADSORPTION OR SELECTIVE	\$1,775.76	10/01/2016
36522	PHOTOPHERESIS, EXTRACORPOREAL	\$1,144.80	10/01/2016
36555	INSERTION OF NON-TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER; UNDER 5 YE	\$121.78	10/01/2016
36556	INSERTION OF NON-TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER; AGE 5	\$98.48	10/01/2016
36557	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER, WITHOUT	\$596.48	10/01/2016
36558	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER, WITHOUT	\$443.63	10/01/2016
36560	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH	\$840.04	10/01/2016
36561	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH	\$721.99	10/01/2016
36563	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE WITH	\$832.58	10/01/2016
36565	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE,	\$547.08	10/01/2016

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36566	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE,	\$4,471.09	10/01/2016
36568	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS CATHETER (PICC), WITHOUT	\$179.25	10/01/2016
36569	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS CATHETER (PICC), WITHOUT	\$139.18	10/01/2016
36570	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH	\$744.97	10/01/2016
36571	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH	\$863.34	10/01/2016
36575	REPAIR OF TUNNELED OR NON-TUNNELED CENTRAL VENOUS ACCESS CATHETER, WITHOUT SUBCU	\$115.88	10/01/2016
36576	REPAIR OF CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS PORT OR PUMP, CENTRAL	\$166.52	10/01/2016
36578	REPLACEMENT, CATHETER ONLY, OF CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS P	\$265.61	10/01/2016
36580	REPLACEMENT, COMPLETE, OF A NON-TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHE	\$130.16	10/01/2016
36581	REPLACEMENT, COMPLETE, OF A TUNNELED CENTRALLY INSERTED CENTRAL VENOUS	\$504.21	10/01/2016
36582	REPLACEMENT, COMPLETE, OF A TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS	\$699.31	10/01/2016
36583	REPLACEMENT, COMPLETE, OF A TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS	\$904.65	10/01/2016
36584	REPLACEMENT, COMPLETE, OF A PERIPHERALLY INSERTED CENTRAL VENOUS CATHETER	\$121.47	10/01/2016
36585	REPLACEMENT, COMPLETE, OF A PERIPHERALLY INSERTED CENTRAL VENOUS ACCESS DEVICE,	\$763.30	10/01/2016
36589	REMOVAL OF TUNNELED CENTRAL VENOUS CATHETER, WITHOUT SUBCUTANEOUS PORT OR PUMP	\$22.99	10/01/2016
36590	REMOVAL OF TUNNELED CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS PORT OR	\$76.42	10/01/2016
36595	MECHANICAL REMOVAL OF PERICATHETER OBSTRUCTIVE MATERIAL (EG, FIBRIN SHEATH) FROM	\$352.60	10/01/2016
36596	MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM	\$77.67	10/01/2016
36597	REPOSITIONING OF PREVIOUSLY PLACED CENTRAL VENOUS CATHETER UNDER FLUOROSCOPIC GU	\$57.47	10/01/2016
36598	CONTRAST INJECTION(S) FOR RADIOLOGIC EVALUATION OF EXISTING CENTRAL VENOUS ACCES	\$64.62	10/01/2016
36600	ARTERIAL PUNCTURE, WITHDRAWAL OF BLOOD FOR DIAGNOSIS	\$13.98	10/01/2016
36860	EXTERNAL CANNULA DECLOTTING (SEPARATE PROCEDURE); WITHOUT BALLOON CATHETER	\$85.44	10/01/2016
36870	THROMBECTOMY, PERCUTANEOUS, ARTERIOVENOUS FISTULA, AUTOGENOUS OR NONAUTOGENOUS	\$1,354.50	10/01/2016
37183	REVISION OF TRANSVENOUS INTRAHEPATIC PORTOSYSTEMIC SHUNT(S) (TIPS) (INCLUDES VEN	\$4,881.17	10/01/2016
37184	PRIMARY PERCUTANEOUS TRANSLUMINAL MECHANICAL THROMBECTOMY, NONCORONARY, ARTERIA	\$1,599.62	10/01/2016
37185	PRIMARY PERCUTANEOUS TRANSLUMINAL MECHANICAL THROMBECTOMY, NONCORONARY, ARTERIA	\$487.75	10/01/2016
37186	SECONDARY PERCUTANEOUS TRANSLUMINAL THROMBECTOMY (EG, NONPRIMARY MECHANICAL, SN	\$995.37	10/01/2016
37187	PERCUTANEOUS TRANSLUMINAL MECHANICAL THROMBECTOMY, VEIN(S), INCLUDING INTRAPROCE	\$1,458.57	10/01/2016
37188	PERCUTANEOUS TRANSLUMINAL MECHANICAL THROMBECTOMY, VEIN(S), INCLUDING INTRAPROCE	\$1,308.83	10/01/2016
37609	LIGATION OR BIOPSY, TEMPORAL ARTERY	\$89.79	10/01/2016

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37765	STAB PHLEBECTOMY OF VARICOSE VEINS, ONE EXTREMITY; 10-20 STAB INCISIONS	\$176.77	10/01/2016
37766	STAB PHLEBECTOMY OF VARICOSE VEINS, ONE EXTREMITY; MORE THAN 20 INCISIONS	\$196.96	10/01/2016
37785	LIGATION, DIVISION, AND/OR EXCISION OF VARICOSE VEIN CLUSTER(S), ONE LEG	\$81.08	10/01/2016
38220	BONE MARROW; ASPIRATION ONLY	\$90.41	10/01/2016
38221	BONE MARROW; BIOPSY, NEEDLE OR TROCAR	\$81.08	10/01/2016
38300	DRAINAGE OF LYMPH NODE ABSCESS OR LYMPHADENITIS; SIMPLE	\$80.15	10/01/2016
38500	BIOPSY OR EXCISION OF LYMPH NODE(S); OPEN, SUPERFICIAL	\$67.41	10/01/2016
38505	BIOPSY OR EXCISION OF LYMPH NODE(S); BY NEEDLE, SUPERFICIAL (EG, CERVICAL,	\$48.46	10/01/2016
38510	BIOPSY OR EXCISION OF LYMPH NODE(S); OPEN, DEEP CERVICAL NODE(S)	\$86.36	10/01/2016
40490	BIOPSY OF LIP	\$48.47	10/01/2016
40500	VERMILIONECTOMY (LIP SHAVE), WITH MUCOSAL ADVANCEMENT	\$124.57	10/01/2016
40510	EXCISION OF LIP; TRANSVERSE WEDGE EXCISION WITH PRIMARY CLOSURE	\$112.15	10/01/2016
40520	EXCISION OF LIP; V-EXCISION WITH PRIMARY DIRECT LINEAR CLOSURE	\$114.95	10/01/2016
40530	RESECTION OF LIP, MORE THAN ONE-FOURTH, WITHOUT RECONSTRUCTION	\$119.61	10/01/2016
40650	REPAIR LIP, FULL THICKNESS; VERMILION ONLY	\$125.20	10/01/2016
40652	REPAIR LIP, FULL THICKNESS; UP TO HALF VERTICAL HEIGHT	\$119.30	10/01/2016
40654	REPAIR LIP, FULL THICKNESS; OVER ONE-HALF VERTICAL HEIGHT, OR COMPLEX	\$126.75	10/01/2016
40800	DRAINAGE OF ABSCESS, CYST, HEMATOMA, VESTIBULE OF MOUTH; SIMPLE	\$72.39	10/01/2016
40801	DRAINAGE OF ABSCESS, CYST, HEMATOMA, VESTIBULE OF MOUTH; COMPLICATED	\$83.26	10/01/2016
40804	REMOVAL OF EMBEDDED FOREIGN BODY, VESTIBULE OF MOUTH; SIMPLE	\$65.86	10/01/2016
40805	REMOVAL OF EMBEDDED FOREIGN BODY, VESTIBULE OF MOUTH; COMPLICATED	\$130.16	10/01/2016
40806	INCISION OF LABIAL FRENUM (FRENOTOMY)	\$73.00	10/01/2016
40808	BIOPSY, VESTIBULE OF MOUTH	\$70.21	10/01/2016
40810	EXCISION OF LESION OF MUCOSA AND SUBMUCOSA, VESTIBULE OF MOUTH; WITHOUT REPAIR	\$70.83	10/01/2016
40812	EXCISION OF LESION OF MUCOSA AND SUBMUCOSA, VESTIBULE OF MOUTH; WITH SIMPLE	\$81.39	10/01/2016
40814	EXCISION OF LESION OF MUCOSA AND SUBMUCOSA, VESTIBULE OF MOUTH; WITH COMPLEX	\$71.14	10/01/2016
40816	EXCISION OF LESION OF MUCOSA AND SUBMUCOSA, VESTIBULE OF MOUTH; COMPLEX, WITH	\$76.11	10/01/2016
40818	EXCISION OF MUCOSA OF VESTIBULE OF MOUTH AS DONOR GRAFT	\$76.42	10/01/2016
40819	EXCISION OF FRENUM, LABIAL OR BUCCAL (FRENUMECTOMY, FRENULECTOMY, FRENECTOMY)	\$67.72	10/01/2016
40820	DESTRUCTION OF LESION OR SCAR OF VESTIBULE OF MOUTH BY PHYSICAL METHODS (EG,	\$83.57	10/01/2016

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40830	CLOSURE OF LACERATION, VESTIBULE OF MOUTH; 2.5 CM OR LESS	\$90.09	10/01/2016
40831	CLOSURE OF LACERATION, VESTIBULE OF MOUTH; OVER 2.5 CM OR COMPLEX	\$100.66	10/01/2016
40840	VESTIBULOPLASTY; ANTERIOR	\$162.79	10/01/2016
40842	VESTIBULOPLASTY; POSTERIOR, UNILATERAL	\$158.44	10/01/2016
40843	VESTIBULOPLASTY; POSTERIOR, BILATERAL	\$206.59	10/01/2016
40844	VESTIBULOPLASTY; ENTIRE ARCH	\$223.06	10/01/2016
40845	VESTIBULOPLASTY; COMPLEX (INCLUDING RIDGE EXTENSION, MUSCLE REPOSITIONING)	\$209.08	10/01/2016
41000	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR FLOOR	\$44.73	10/01/2016
41005	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR	\$91.95	10/01/2016
41006	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR	\$95.06	10/01/2016
41007	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR	\$96.31	10/01/2016
41008	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR	\$97.55	10/01/2016
41009	INTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF TONGUE OR	\$97.86	10/01/2016
41010	INCISION OF LINGUAL FRENUM (FRENOTOMY)	\$85.12	10/01/2016
41015	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF FLOOR OF	\$90.40	10/01/2016
41016	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF FLOOR OF	\$79.22	10/01/2016
41017	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF FLOOR OF	\$81.39	10/01/2016
41018	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA OF FLOOR OF	\$82.02	10/01/2016
41100	BIOPSY OF TONGUE; ANTERIOR TWO-THIRDS	\$54.06	10/01/2016
41105	BIOPSY OF TONGUE; POSTERIOR ONE-THIRD	\$53.12	10/01/2016
41108	BIOPSY OF FLOOR OF MOUTH	\$51.57	10/01/2016
41110	EXCISION OF LESION OF TONGUE WITHOUT CLOSURE	\$72.38	10/01/2016
41112	EXCISION OF LESION OF TONGUE WITH CLOSURE; ANTERIOR TWO-THIRDS	\$72.69	10/01/2016
41113	EXCISION OF LESION OF TONGUE WITH CLOSURE; POSTERIOR ONE-THIRD	\$76.43	10/01/2016
41115	EXCISION OF LINGUAL FRENUM (FRENECTOMY)	\$85.12	10/01/2016
41116	EXCISION, LESION OF FLOOR OF MOUTH	\$99.72	10/01/2016
41250	REPAIR OF LACERATION 2.5 CM OR LESS; FLOOR OF MOUTH AND/OR ANTERIOR TWO-THIRDS O	\$102.52	10/01/2016
41251	REPAIR OF LACERATION 2.5 CM OR LESS; POSTERIOR ONE-THIRD OF TONGUE	\$97.55	10/01/2016
41252	REPAIR OF LACERATION OF TONGUE, FLOOR OF MOUTH, OVER 2.6 CM OR COMPLEX	\$93.51	10/01/2016
41520	FRENOPLASTY (SURGICAL REVISION OF FRENUM, EG, WITH Z-PLASTY)	\$85.43	10/01/2016

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41530	SUBMUCOSAL ABLATION OF THE TONGUE BASE, RADIOFREQUENCY, ONE OR MORE SITES, PER S	\$546.77	10/01/2016
41800	DRAINAGE OF ABSCESS, CYST, HEMATOMA FROM DENTOALVEOLAR STRUCTURES	\$111.84	10/01/2016
41805	REMOVAL OF EMBEDDED FOREIGN BODY FROM DENTOALVEOLAR STRUCTURES; SOFT TISSUES	\$74.56	10/01/2016
41806	REMOVAL OF EMBEDDED FOREIGN BODY FROM DENTOALVEOLAR STRUCTURES; BONE	\$83.88	10/01/2016
41822	EXCISION OF FIBROUS TUBEROSITIES, DENTOALVEOLAR STRUCTURES	\$99.41	10/01/2016
41823	EXCISION OF OSSEOUS TUBEROSITIES, DENTOALVEOLAR STRUCTURES	\$93.20	10/01/2016
41825	EXCISION OF LESION OR TUMOR (EXCEPT LISTED ABOVE), DENTOALVEOLAR STRUCTURES;	\$80.46	10/01/2016
41826	EXCISION OF LESION OR TUMOR (EXCEPT LISTED ABOVE), DENTOALVEOLAR STRUCTURES;	\$91.96	10/01/2016
41827	EXCISION OF LESION OR TUMOR (EXCEPT LISTED ABOVE), DENTOALVEOLAR STRUCTURES;	\$119.61	10/01/2016
41828	EXCISION OF HYPERPLASTIC ALVEOLAR MUCOSA, EACH QUADRANT (SPECIFY)	\$86.37	10/01/2016
41830	ALVEOLECTOMY, INCLUDING CURETTAGE OF OSTEITIS OR SEQUESTRECTOMY	\$97.54	10/01/2016
41872	GINGIVOPLASTY, EACH QUADRANT (SPECIFY)	\$98.17	10/01/2016
41874	ALVEOLOPLASTY, EACH QUADRANT (SPECIFY)	\$107.80	10/01/2016
42000	DRAINAGE OF ABSCESS OF PALATE, UVULA	\$49.39	10/01/2016
42100	BIOPSY OF PALATE, UVULA	\$36.04	10/01/2016
42104	EXCISION, LESION OF PALATE, UVULA; WITHOUT CLOSURE	\$68.66	10/01/2016
42106	EXCISION, LESION OF PALATE, UVULA; WITH SIMPLE PRIMARY CLOSURE	\$85.44	10/01/2016
42107	EXCISION, LESION OF PALATE, UVULA; WITH LOCAL FLAP CLOSURE	\$102.83	10/01/2016
42140	UVULECTOMY, EXCISION OF UVULA	\$88.54	10/01/2016
42160	DESTRUCTION OF LESION, PALATE OR UVULA (THERMAL, CRYO OR CHEMICAL)	\$76.42	10/01/2016
42180	REPAIR, LACERATION OF PALATE; UP TO 2 CM	\$53.75	10/01/2016
42182	REPAIR, LACERATION OF PALATE; OVER 2 CM OR COMPLEX	\$57.47	10/01/2016
42260	REPAIR OF NASOLABIAL FISTULA	\$134.51	10/01/2016
42280	MAXILLARY IMPRESSION FOR PALATAL PROSTHESIS	\$49.71	10/01/2016
42281	INSERTION OF PIN-RETAINED PALATAL PROSTHESIS	\$48.46	10/01/2016
42300	DRAINAGE OF ABSCESS; PAROTID, SIMPLE	\$50.95	10/01/2016
42310	DRAINAGE OF ABSCESS; SUBMAXILLARY OR SUBLINGUAL, INTRAORAL	\$33.24	10/01/2016
42320	DRAINAGE OF ABSCESS; SUBMAXILLARY, EXTERNAL	\$66.80	10/01/2016
42330	SIALOLITHOTOMY; SUBMANDIBULAR (SUBMAXILLARY), SUBLINGUAL OR PAROTID,	\$60.27	10/01/2016
42335	SIALOLITHOTOMY; SUBMANDIBULAR (SUBMAXILLARY), COMPLICATED, INTRAORAL	\$105.01	10/01/2016

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42340	SIALOLITHOTOMY; PAROTID, EXTRAORAL OR COMPLICATED INTRAORAL	\$115.26	10/01/2016
42400	BIOPSY OF SALIVARY GLAND; NEEDLE	\$45.67	10/01/2016
42405	BIOPSY OF SALIVARY GLAND; INCISIONAL	\$64.61	10/01/2016
42408	EXCISION OF SUBLINGUAL SALIVARY CYST (RANULA)	\$113.08	10/01/2016
42409	MARSUPIALIZATION OF SUBLINGUAL SALIVARY CYST (RANULA)	\$99.73	10/01/2016
42450	EXCISION OF SUBLINGUAL GLAND	\$83.57	10/01/2016
42500	PLASTIC REPAIR OF SALIVARY DUCT, SIALODOCHOPLASTY; PRIMARY OR SIMPLE	\$81.40	10/01/2016
42505	PLASTIC REPAIR OF SALIVARY DUCT, SIALODOCHOPLASTY; SECONDARY OR COMPLICATED	\$91.02	10/01/2016
42550	INJECTION PROCEDURE FOR SIALOGRAPHY	\$63.38	10/01/2016
42600	CLOSURE SALIVARY FISTULA	\$117.12	10/01/2016
42650	DILATION SALIVARY DUCT	\$22.37	10/01/2016
42660	DILATION AND CATHETERIZATION OF SALIVARY DUCT, WITH OR WITHOUT INJECTION	\$34.49	10/01/2016
42665	LIGATION SALIVARY DUCT, INTRAORAL	\$93.51	10/01/2016
42700	INCISION AND DRAINAGE ABSCESS; PERITONSILLAR	\$48.46	10/01/2016
42720	INCISION AND DRAINAGE ABSCESS; RETROPHARYNGEAL OR PARAPHARYNGEAL, INTRAORAL	\$54.98	10/01/2016
42800	BIOPSY; OROPHARYNX	\$41.94	10/01/2016
42804	BIOPSY; NASOPHARYNX, VISIBLE LESION, SIMPLE	\$73.94	10/01/2016
42806	BIOPSY; NASOPHARYNX, SURVEY FOR UNKNOWN PRIMARY LESION	\$78.60	10/01/2016
42808	EXCISION OR DESTRUCTION OF LESION OF PHARYNX, ANY METHOD	\$58.09	10/01/2016
42809	REMOVAL OF FOREIGN BODY FROM PHARYNX	\$71.76	10/01/2016
42810	EXCISION BRANCHIAL CLEFT CYST OR VESTIGE, CONFINED TO SKIN AND SUBCUTANEOUS	\$88.23	10/01/2016
43197	ESOPHAGOSCOPY, FLEXIBLE, TRANSNASAL; DIAGNOSTIC, INCLUDES COLLECTION OF SPECIMEN	\$93.20	10/01/2016
43198	ESOPHAGOSCOPY, FLEXIBLE, TRANSNASAL; WITH BIOPSY, SINGLE OR MULTIPLE	\$96.93	10/01/2016
43200	DIAGNOSTIC EXAMINATION OF ESOPHAGUS USING AN ENDOSCOPE	\$155.65	10/01/2016
43201	INJECTIONS INTO ESOPHAGUS USING AN ENDOSCOPE	\$145.39	10/01/2016
43202	BIOPSY OF ESOPHAGUS USING AN ENDOSCOPE	\$221.50	10/01/2016
43206	MICROSCOPIC EXAMINATION OF ESOPHAGUS USING AN ENDOSCOPE	\$164.35	10/01/2016
43215	REMOVAL OF FOREIGN BODIES IN ESOPHAGUS USING AN ENDOSCOPE	\$235.80	10/01/2016
43216	REMOVAL OF ESOPHAGEAL POLYPS OR GROWTHS USING AN ENDOSCOPE	\$238.59	10/01/2016
43217	REMOVAL OF ESOPHAGEAL POLYPS OR GROWTHS USING AN ENDOSCOPE	\$243.25	10/01/2016

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43220	BALLOON DILATION OF ESOPHAGUS USING AN ENDOSCOPE	\$886.33	10/01/2016
43226	INSERTION OF GUIDE WIRE FOR DILATION OF ESOPHAGUS USING AN ENDOSCOPE	\$212.18	10/01/2016
43227	CONTROL OF ESOPHAGEAL BLEEDING USING AN ENDOSCOPE	\$457.30	10/01/2016
43229	ESOPHAGOSCOPY, FLEXIBLE TRANSORAL; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER	\$452.02	10/01/2016
43231	ULTRASOUND EXAMINATION OF ESOPHAGUS USING AN ENDOSCOPE	\$202.86	10/01/2016
43232	ULTRASOUND GUIDED FINE NEEDLE ASPIRATION OR BIOPSY OF ESOPHAGUS USING AN ENDOSCO	\$236.72	10/01/2016
43235	DIAGNOSTIC EXAMINATION OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING AN	\$158.13	10/01/2016
43236	INJECTIONS OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING AN ENDOSCOPE	\$210.32	10/01/2016
43239	BIOPSY OF THE ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING AN ENDOSCOPE	\$219.02	10/01/2016
43245	DILATION OF STOMACH OUTLET USING AN ENDOSCOPE	\$375.90	10/01/2016
43247	REMOVAL OF FOREIGN BODIES OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING	\$200.69	10/01/2016
43248	INSERTION OF GUIDE WIRE WITH DILATION OF ESOPHAGUS USING AN ENDOSCOPE	\$203.80	10/01/2016
43249	BALLOON DILATION OF ESOPHAGUS USING AN ENDOSCOPE	\$801.51	10/01/2016
43250	REMOVAL OF POLYPS OR GROWTHS OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USI	\$242.00	10/01/2016
43251	REMOVAL OF POLYPS OR GROWTHS OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USI	\$255.99	10/01/2016
43252	MICROSCOPIC EXAMINATION OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING AN	\$165.89	10/01/2016
43255	CONTROL OF BLEEDING OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING AN END	\$455.43	10/01/2016
43270	ESOPHAGOGASTRODUODENOSCOPY (EGD), FLEXIBLE, TRANSORAL; WITH ABLATION OF TUMOR(S)	\$445.50	10/01/2016
43450	DILATION OF ESOPHAGUS, BY UNGUIDED SOUND OR BOUGIE, SINGLE OR MULTIPLE PASSES	\$109.66	10/01/2016
43453	DILATION OF ESOPHAGUS, OVER GUIDE WIRE	\$770.14	10/01/2016
43754	GASTRIC INTUBATION AND ASPIRATION, DIAGNOSTIC; SINGLE SPECIMEN (EG, ACID ANALYSI	\$64.31	10/01/2016
43755	GASTRIC INTUBATION AND ASPIRATION, DIAGNOSTIC; COLLECTION OF MULTIPLE FRACTIONAL	\$68.97	10/01/2016
43756	DUODENAL INTUBATION AND ASPIRATION, DIAGNOSTIC, INCLUDES IMAGE GUIDANCE; SINGLE	\$135.45	10/01/2016
43757	DUODENAL INTUBATION AND ASPIRATION, DIAGNOSTIC, INCLUDES IMAGE GUIDANCE; COLLECT	\$186.40	10/01/2016
43760	CHANGE OF GASTROSTOMY TUBE, PERCUTANEOUS, WITHOUT IMAGING OR ENDOSCOPIC GUIDANCE	\$387.71	10/01/2016
43761	REPOSITIONING OF A NASO- OR ORO-GASTRIC FEEDING TUBE, THROUGH THE DUODENUM FOR E	\$11.80	10/01/2016
44380	DIAGNOSTIC EXAMINATION OF SMALL BOWEL USING AN ENDOSCOPE WHICH IS INSERTED THROU	\$138.25	10/01/2016
44381	ILLEOSCOPY, THROUGH STOMA; WITH TRANSENDOSCOPIC BALLOON DILATION	\$799.34	10/01/2016
44382	BIOPSY OF SMALL BOWEL USING AN ENDOSCOPE WHICH IS INSERTED THROUGH ABDOMINAL OPE	\$210.32	10/01/2016
44385	ENDOSCOPIC EVALUATION OF SMALL INTESTINAL (ABDOMINAL OR PELVIC) POUCH;	\$144.77	10/01/2016

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44386	BIOPSY OF SMALL BOWEL USING AN ENDOSCOPE	\$216.23	10/01/2016
44388	DIAGNOSTIC EXAMINATION OF LARGE BOWEL USING AN ENDOSCOPE WHICH IS INSERTED THROU	\$164.34	10/01/2016
44389	BIOPSIES OF LARGE BOWEL USING AN ENDOSCOPE WHICH IS INSERTED THROUGH ABDOMINAL O	\$231.13	10/01/2016
44390	REMOVAL OF FOREIGN BODIES FROM LARGE BOWEL USING AN ENDOSCOPE WHICH IS INSERTED	\$195.10	10/01/2016
44391	CONTROL OF BLEEDING IN LARGE BOWEL USING AN ENDOSCOPE WHICH IS INSERTED THROUGH	\$461.03	10/01/2016
44392	REMOVAL OF POLYPS OR GROWTHS OF LARGE BOWEL USING AN ENDOSCOPE WHICH IS INSERTED	\$183.60	10/01/2016
44394	COLONOSCOPY THROUGH STOMA; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHER	\$204.42	10/01/2016
44401	COLONOSCOPY THROUGH STOMA; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER LESION(	\$2,644.69	10/01/2016
44404	COLONOSCOPY THROUGH STOMA; WITH DIRECTED SUBMUCOSAL INJECTION(S), ANY SUBSTANCE	\$214.36	10/01/2016
44405	COLONOSCOPY THROUGH STOMA; WITH TRANSENDOSCOPIC BALLOON DILATION	\$367.52	10/01/2016
45005	INCISION AND DRAINAGE OF SUBMUCOSAL ABSCESS, RECTUM	\$99.10	10/01/2016
45300	PROCTOSIGMOIDOSCOPY, RIGID; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S	\$60.27	10/01/2016
45303	PROCTOSIGMOIDOSCOPY, RIGID; WITH DILATION (EG, BALLOON, GUIDE WIRE, BOUGIE)	\$764.54	10/01/2016
45305	PROCTOSIGMOIDOSCOPY, RIGID; WITH BIOPSY, SINGLE OR MULTIPLE	\$101.90	10/01/2016
45307	PROCTOSIGMOIDOSCOPY, RIGID; WITH REMOVAL OF FOREIGN BODY	\$111.22	10/01/2016
45308	PROCTOSIGMOIDOSCOPY, RIGID; WITH REMOVAL OF SINGLE TUMOR, POLYP, OR OTHER	\$110.91	10/01/2016
45309	PROCTOSIGMOIDOSCOPY, RIGID; WITH REMOVAL OF SINGLE TUMOR, POLYP, OR OTHER	\$114.63	10/01/2016
45315	PROCTOSIGMOIDOSCOPY, RIGID; WITH REMOVAL OF MULTIPLE TUMORS, POLYPS, OR OTHER	\$105.94	10/01/2016
45317	PROCTOSIGMOIDOSCOPY, RIGID; WITH CONTROL OF BLEEDING (EG, INJECTION, BIPOLAR	\$109.66	10/01/2016
45320	PROCTOSIGMOIDOSCOPY, RIGID; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER	\$116.19	10/01/2016
45330	SIGMOIDOSCOPY, FLEXIBLE; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S)	\$96.62	10/01/2016
45331	SIGMOIDOSCOPY, FLEXIBLE; WITH BIOPSY, SINGLE OR MULTIPLE	\$160.61	10/01/2016
45332	REMOVAL OF FOREIGN BODIES IN LARGE BOWEL USING AN ENDOSCOPE	\$173.35	10/01/2016
45333	SIGMOIDOSCOPY, FLEXIBLE; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHER LESION(S)	\$217.46	10/01/2016
45334	SIGMOIDOSCOPY, FLEXIBLE; WITH CONTROL OF BLEEDING (EG, INJECTION, BIPOLAR	\$424.99	10/01/2016
45335	SIGMOIDOSCOPY, FLEXIBLE; WITH DIRECTED SUBMUCOSAL INJECTION(S), ANY SUBSTANCE	\$189.50	10/01/2016
45338	SIGMOIDOSCOPY, FLEXIBLE; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHER LESION(S)	\$171.80	10/01/2016
45340	SIGMOIDOSCOPY, FLEXIBLE; WITH DILATION BY BALLOON, 1 OR MORE STRICTURES	\$356.33	10/01/2016
45346	SIGMOIDOSCOPY, FLEXIBLE; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER LESION(S)	\$2,596.85	10/01/2016
45350	SIGMOIDOSCOPY, FLEXIBLE; WITH BAND LIGATION(S) (EG, HEMORRHOIDS)	\$418.16	10/01/2016

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45378	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; DIAGNOSTIC, WITH OR WITHOUT	\$161.23	10/01/2016
45379	REMOVAL OF FOREIGN BODIES IN LARGE BOWEL USING AN ENDOSCOPE	\$198.82	10/01/2016
45380	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH BIOPSY, SINGLE OR	\$225.54	10/01/2016
45381	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH DIRECTED SUBMUCOSAL	\$209.70	10/01/2016
45382	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH CONTROL OF BLEEDING	\$457.92	10/01/2016
45384	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH REMOVAL OF TUMOR(S),	\$240.76	10/01/2016
45385	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH REMOVAL OF TUMOR(S),	\$196.34	10/01/2016
45386	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH DILATION BY BALLOON, 1	\$379.64	10/01/2016
45388	COLONOSCOPY, FLEXIBLE; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER LESION(S) (	\$2,635.06	10/01/2016
45398	COLONOSCOPY, FLEXIBLE; WITH BAND LIGATION(S), (EG, HEMORRHOIDS)	\$426.54	10/01/2016
45520	PERIRECTAL INJECTION OF SCLEROSING SOLUTION FOR PROLAPSE	\$102.83	10/01/2016
45915	REMOVAL OF FECAL IMPACTION OR FOREIGN BODY (SEPARATE PROCEDURE) UNDER ANESTHESIA	\$91.65	10/01/2016
46020	PLACEMENT OF SETON	\$36.04	10/01/2016
46030	REMOVAL OF ANAL SETON, OTHER MARKER	\$42.88	10/01/2016
46040	INCISION AND DRAINAGE OF ISCHIORECTAL AND/OR PERIRECTAL ABSCESS (SEPARATE	\$105.00	10/01/2016
46050	INCISION AND DRAINAGE, PERIANAL ABSCESS, SUPERFICIAL	\$91.33	10/01/2016
46080	SPHINCTEROTOMY, ANAL, DIVISION OF SPHINCTER (SEPARATE PROCEDURE)	\$77.35	10/01/2016
46083	INCISION OF THROMBOSED HEMORRHOID, EXTERNAL	\$60.89	10/01/2016
46200	FISSURECTOMY, INCLUDING SPHINCTEROTOMY, WHEN PERFORMED	\$104.08	10/01/2016
46220	EXCISION OF SINGLE EXTERNAL PAPILLA OR TAG, ANUS	\$76.43	10/01/2016
46221	HEMORRHOIDECTOMY, INTERNAL, BY RUBBER BAND LIGATION(S)	\$67.72	10/01/2016
46230	EXCISION OF MULTIPLE EXTERNAL PAPILLAE OR TAGS, ANUS	\$87.91	10/01/2016
46250	HEMORRHOIDECTOMY, EXTERNAL, 2 OR MORE COLUMNS/GROUPS	\$129.55	10/01/2016
46255	HEMORRHOIDECTOMY, INTERNAL AND EXTERNAL, SINGLE COLUMN/GROUP;	\$133.27	10/01/2016
46270	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); SUBCUTANEOUS	\$100.96	10/01/2016
46275	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); INTERSPHINCTERIC	\$107.80	10/01/2016
46285	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); SECOND STAGE	\$104.70	10/01/2016
46320	EXCISION OF THROMBOSED HEMORRHOID, EXTERNAL	\$63.68	10/01/2016
46500	INJECTION OF SCLEROSING SOLUTION, HEMORRHOIDS	\$62.44	10/01/2016
46505	CHEMODENERVATION OF INTERNAL ANAL SPHINCTER	\$40.08	10/01/2016

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46600	ANOSCOPY; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING OR W	\$41.63	10/01/2016
46601	ANOSCOPY; DIAGNOSTIC, WITH HIGH-RESOLUTION MAGNIFICATION (HRA) (EG, COLPOSCOPE,	\$37.28	10/01/2016
46604	ANOSCOPY; WITH DILATION (EG, BALLOON, GUIDE WIRE, BOUGIE)	\$486.50	10/01/2016
46606	ANOSCOPY; WITH BIOPSY, SINGLE OR MULTIPLE	\$131.41	10/01/2016
46607	ANOSCOPY; WITH HIGH-RESOLUTION MAGNIFICATION (HRA) (EG, COLPOSCOPE, OPERATING MI	\$56.54	10/01/2016
46608	ANOSCOPY; WITH REMOVAL OF FOREIGN BODY	\$132.65	10/01/2016
46610	ANOSCOPY; WITH REMOVAL OF SINGLE TUMOR, POLYP, OR OTHER LESION BY HOT BIOPSY	\$127.37	10/01/2016
46611	ANOSCOPY; WITH REMOVAL OF SINGLE TUMOR, POLYP, OR OTHER LESION BY SNARE	\$82.63	10/01/2016
46612	ANOSCOPY; WITH REMOVAL OF MULTIPLE TUMORS, POLYPS, OR OTHER LESIONS BY HOT	\$144.15	10/01/2016
46614	ANOSCOPY; WITH CONTROL OF BLEEDING (EG, INJECTION, BIPOLAR CAUTERY, UNIPOLAR	\$55.61	10/01/2016
46615	ANOSCOPY; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER LESION(S) NOT AMENABLE	\$44.42	10/01/2016
46754	REMOVAL OF THIERSCH WIRE OR SUTURE, ANAL CANAL	\$56.23	10/01/2016
46900	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM CONTAGIOSUM,	\$91.96	10/01/2016
46910	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM	\$107.49	10/01/2016
46916	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM	\$75.18	10/01/2016
46917	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM	\$280.22	10/01/2016
46922	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM	\$115.25	10/01/2016
46924	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM	\$306.94	10/01/2016
46930	DESTRUCTION OF INTERNAL HEMORRHOID(S) BY THERMAL ENERGY (EG, INFRARED COAGULATIO	\$50.95	10/01/2016
46940	CURETTAGE OR CAUTERY OF ANAL FISSURE, INCLUDING DILATION OF ANAL SPHINCTER	\$71.45	10/01/2016
46942	CURETTAGE OR CAUTERY OF ANAL FISSURE, INCLUDING DILATION OF ANAL SPHINCTER	\$73.94	10/01/2016
46945	HEMORRHOIDECTOMY, INTERNAL, BY LIGATION OTHER THAN RUBBER BAND; SINGLE HEMORRHOI	\$72.38	10/01/2016
46946	HEMORRHOIDECTOMY, INTERNAL, BY LIGATION OTHER THAN RUBBER BAND; SINGLE HEMORRHOI	\$77.05	10/01/2016
47000	BIOPSY OF LIVER, NEEDLE; PERCUTANEOUS	\$228.34	10/01/2016
47382	ABLATION, 1 OR MORE LIVER TUMOR(S), PERCUTANEOUS, RADIOFREQUENCY	\$3,736.99	10/01/2016
47383	ABLATION, 1 OR MORE LIVER TUMOR(S), PERCUTANEOUS, CRYOABLATION	\$6,220.75	10/01/2016
48102	BIOPSY OF PANCREAS, PERCUTANEOUS NEEDLE	\$254.44	10/01/2016
49082	ABDOMINAL PARACENTESIS (DIAGNOSTIC OR THERAPEUTIC); WITHOUT IMAGING GUIDANCE	\$102.83	10/01/2016
49083	ABDOMINAL PARACENTESIS (DIAGNOSTIC OR THERAPEUTIC); WITH IMAGING GUIDANCE	\$161.86	10/01/2016
49180	BIOPSY, ABDOMINAL OR RETROPERITONEAL MASS, PERCUTANEOUS NEEDLE	\$67.73	10/01/2016

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49400	INJECTION OF AIR OR CONTRAST INTO PERITONEAL CAVITY (SEPARATE PROCEDURE)	\$36.35	10/01/2016
49405	IMAGE-GUIDED FLUID COLLECTION DRAINAGE BY CATHETER (EG, ABSCESS, HEMATOMA, SEROM	\$583.12	10/01/2016
49406	IMAGE-GUIDED FLUID COLLECTION DRAINAGE BY CATHETER (EG, ABSCESS, HEMATOMA, SEROM	\$583.43	10/01/2016
49407	FLUID COLLECTION DRAINAGE BY CATHETER USING IMAGING GUIDANCE, ACCESSED THROUGH V	\$441.46	10/01/2016
49411	PLACEMENT OF INTERSTITIAL DEVICE(S) FOR RADIATION THERAPY GUIDANCE (EG, FIDUCIAL	\$306.63	10/01/2016
49423	EXCHANGE OF PREVIOUSLY PLACED ABSCESS OR CYST DRAINAGE CATHETER UNDER	\$420.95	10/01/2016
49424	CONTRAST INJECTION FOR ASSESSMENT OF ABSCESS OR CYST VIA PREVIOUSLY PLACED	\$95.06	10/01/2016
49440	INSERTION OF GASTROSTOMY TUBE, PERCUTANEOUS, UNDER FLUOROSCOPIC GUIDANCE INCLUDI	\$720.43	10/01/2016
49441	INSERTION OF DUODENOSTOMY OR JEJUNOSTOMY TUBE, PERCUTANEOUS, UNDER FLUOROSCOPIC	\$806.18	10/01/2016
49450	REPLACEMENT OF GASTROSTOMY OR CECOSTOMY (OR OTHER COLONIC) TUBE, PERCUTANEOUS, U	\$530.31	10/01/2016
49451	REPLACEMENT OF DUODENOSTOMY OR JEJUNOSTOMY TUBE, PERCUTANEOUS, UNDER FLUOROSCO	\$562.61	10/01/2016
49452	REPLACEMENT OF GASTRO-JEJUNOSTOMY TUBE, PERCUTANEOUS, UNDER FLUOROSCOPIC GUIDAN	\$670.73	10/01/2016
49460	MECHANICAL REMOVAL OF OBSTRUCTIVE MATERIAL FROM GASTROSTOMY, DUODENOSTOMY, JEJUN	\$606.42	10/01/2016
49465	CONTRAST INJECTION(S) FOR RADIOLOGICAL EVALUATION OF EXISTING GASTROSTOMY, DUODE	\$116.19	10/01/2016
50200	RENAL BIOPSY; PERCUTANEOUS, BY TROCAR OR NEEDLE	\$415.67	10/01/2016
50382	REMOVAL (VIA SNARE/CAPTURE) AND REPLACEMENT OF INTERNALLY DWELLING URETERAL STEN	\$806.80	10/01/2016
50384	REMOVAL (VIA SNARE/CAPTURE) OF INTERNALLY DWELLING URETERAL STENT VIA PERCUTANEO	\$616.67	10/01/2016
50385	REMOVAL (VIA SNARE/CAPTURE) AND REPLACEMENT OF INTERNALLY DWELLING URETERAL STEN	\$801.51	10/01/2016
50386	REMOVAL (VIA SNARE/CAPTURE) OF INTERNALLY DWELLING URETERAL STENT VIA TRANSURETH	\$499.86	10/01/2016
50387	REMOVAL AND REPLACEMENT OF EXTERNALLY ACCESSIBLE TRANSNEPHRIC URETERAL STENT (EG	\$394.23	10/01/2016
50389	REMOVAL OF NEPHROSTOMY TUBE, REQUIRING FLUOROSCOPIC GUIDANCE (EG, WITH CONCURREN	\$213.74	10/01/2016
50391	INSTILLATIONS OF DRUG INTO KIDNEY AND/OR URINARY DUCT (URETER)	\$20.51	10/01/2016
50551	RENAL ENDOSCOPY THROUGH ESTABLISHED NEPHROSTOMY OR PYELOSTOMY, WITH OR WITHOUT I	\$56.23	10/01/2016
50553	RENAL ENDOSCOPY THROUGH ESTABLISHED NEPHROSTOMY OR PYELOSTOMY, WITH OR WITHOUT	\$61.20	10/01/2016
50555	RENAL ENDOSCOPY THROUGH ESTABLISHED NEPHROSTOMY OR PYELOSTOMY, WITH OR WITHOUT	\$60.89	10/01/2016
50557	RENAL ENDOSCOPY THROUGH ESTABLISHED NEPHROSTOMY OR PYELOSTOMY, WITH OR WITHOUT	\$63.06	10/01/2016
50561	RENAL ENDOSCOPY THROUGH ESTABLISHED NEPHROSTOMY OR PYELOSTOMY, WITH OR WITHOUT	\$69.59	10/01/2016
50590	LITHOTRIPSY, EXTRACORPOREAL SHOCK WAVE	\$130.79	10/01/2016
50592	ABLATION, ONE OR MORE RENAL TUMOR(S), PERCUTANEOUS, UNILATERAL, RADIOFREQUENCY	\$1,922.09	10/01/2016
50593	ABLATION, RENAL TUMOR(S), UNILATERAL, PERCUTANEOUS, CRYOTHERAPY	\$3,665.22	10/01/2016

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50684	INJECTION PROCEDURE FOR URETEROGRAPHY OR URETEROPYELOGRAPHY THROUGH URETEROST	\$48.78	10/01/2016
50686	MANOMETRIC STUDIES THROUGH URETEROSTOMY OR INDWELLING URETERAL CATHETER	\$47.84	10/01/2016
50690	INJECTION OF BLADDER AND URINARY DUCT (URETER) FOR X-RAY IMAGING	\$24.24	10/01/2016
50951	URETERAL ENDOSCOPY THROUGH ESTABLISHED URETEROSTOMY, WITH OR WITHOUT IRRIGATION,	\$59.34	10/01/2016
50953	URETERAL ENDOSCOPY THROUGH ESTABLISHED URETEROSTOMY, WITH OR WITHOUT	\$61.52	10/01/2016
50955	URETERAL ENDOSCOPY THROUGH ESTABLISHED URETEROSTOMY, WITH OR WITHOUT	\$62.44	10/01/2016
50957	URETERAL ENDOSCOPY THROUGH ESTABLISHED URETEROSTOMY, WITH OR WITHOUT	\$64.00	10/01/2016
50961	URETERAL ENDOSCOPY THROUGH ESTABLISHED URETEROSTOMY, WITH OR WITHOUT	\$59.65	10/01/2016
51100	ASPIRATION OF BLADDER; BY NEEDLE	\$18.95	10/01/2016
51101	ASPIRATION OF BLADDER; BY TROCAR OR INTRACATHETER	\$63.07	10/01/2016
51102	ASPIRATION OF BLADDER; WITH INSERTION OF SUPRAPUBIC CATHETER	\$71.14	10/01/2016
51600	INJECTION PROCEDURE FOR CYSTOGRAPHY OR VOIDING URETHROCYSTOGRAPHY	\$122.09	10/01/2016
51610	INJECTION PROCEDURE FOR RETROGRADE URETHROCYSTOGRAPHY	\$36.66	10/01/2016
51700	BLADDER IRRIGATION, SIMPLE, LAVAGE AND/OR INSTILLATION	\$33.24	10/01/2016
51701	INSERTION OF NON-INDWELLING BLADDER CATHETER (EG, STRAIGHT CATHETERIZATION FOR	\$23.30	10/01/2016
51702	INSERTION OF TEMPORARY INDWELLING BLADDER CATHETER; SIMPLE (EG, FOLEY)	\$34.79	10/01/2016
51703	INSERTION OF TEMPORARY INDWELLING BLADDER CATHETER; COMPLICATED (EG, ALTERED	\$41.63	10/01/2016
51705	CHANGE OF CYSTOSTOMY TUBE; SIMPLE	\$33.86	10/01/2016
51710	CHANGE OF CYSTOSTOMY TUBE; COMPLICATED	\$41.94	10/01/2016
51715	ENDOSCOPIC INJECTION OF IMPLANT MATERIAL INTO THE SUBMUCOSAL TISSUES OF THE	\$78.29	10/01/2016
51720	BLADDER INSTILLATION OF ANTICARCINOGENIC AGENT (INCLUDING RETENTION TIME)	\$24.85	10/01/2016
52000	CYSTOURETHROSCOPY (SEPARATE PROCEDURE)	\$67.41	10/01/2016
52001	CYSTOURETHROSCOPY WITH IRRIGATION AND EVACUATION OF MULTIPLE OBSTRUCTING CLOTS	\$71.76	10/01/2016
52005	CYSTOURETHROSCOPY, WITH URETERAL CATHETERIZATION, WITH OR WITHOUT IRRIGATION,	\$114.95	10/01/2016
52007	CYSTOURETHROSCOPY, WITH URETERAL CATHETERIZATION, WITH OR WITHOUT IRRIGATION,	\$241.38	10/01/2016
52010	CYSTOURETHROSCOPY, WITH EJACULATORY DUCT CATHETERIZATION, WITH OR WITHOUT	\$178.01	10/01/2016
52204	CYSTOURETHROSCOPY, WITH BIOPSY(S)	\$197.28	10/01/2016
52214	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) OF	\$421.26	10/01/2016
52224	CYSTOURETHROSCOPY, WITH FULGURATION (INCLUDING CRYOSURGERY OR LASER SURGERY) OR	\$423.75	10/01/2016
52265	CYSTOURETHROSCOPY, WITH DILATION OF BLADDER FOR INTERSTITIAL CYSTITIS; LOCAL	\$176.15	10/01/2016

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52270	CYSTOURETHROSCOPY, WITH INTERNAL URETHROTOMY; FEMALE	\$150.37	10/01/2016
52275	CYSTOURETHROSCOPY, WITH INTERNAL URETHROTOMY; MALE	\$199.45	10/01/2016
52281	CYSTOURETHROSCOPY, WITH CALIBRATION AND/OR DILATION OF URETHRAL STRICTURE OR	\$103.76	10/01/2016
52283	CYSTOURETHROSCOPY, WITH STEROID INJECTION INTO STRICTURE	\$64.31	10/01/2016
52285	CYSTOURETHROSCOPY FOR TREATMENT OF THE FEMALE URETHRAL SYNDROME WITH ANY OR ALL	\$71.45	10/01/2016
52287	CYSTOURETHROSCOPY, WITH INJECTION(S) FOR CHEMODENERVATION OF THE BLADDER	\$123.02	10/01/2016
52310	CYSTOURETHROSCOPY, WITH REMOVAL OF FOREIGN BODY, CALCULUS, OR URETERAL STENT	\$78.91	10/01/2016
52315	CYSTOURETHROSCOPY, WITH REMOVAL OF FOREIGN BODY, CALCULUS, OR URETERAL STENT	\$118.67	10/01/2016
52317	LITHOLAPAXY: CRUSHING OR FRAGMENTATION OF CALCULUS BY ANY MEANS IN BLADDER AND	\$395.17	10/01/2016
52330	CYSTOURETHROSCOPY (INCLUDING URETERAL CATHETERIZATION); WITH MANIPULATION,	\$198.51	10/01/2016
52332	CYSTOURETHROSCOPY, WITH INSERTION OF INDWELLING URETERAL STENT (EG, GIBBONS OR	\$289.85	10/01/2016
52441	CYSTOURETHROSCOPY, WITH INSERTION OF PERMANENT ADJUSTABLE TRANSPROSTATIC IMPLANT	\$887.26	10/01/2016
52442	CYSTOURETHROSCOPY, WITH INSERTION OF PERMANENT ADJUSTABLE TRANSPROSTATIC IMPLANT	\$780.39	10/01/2016
52647	LASER COAGULATION OF PROSTATE, INCLUDING CONTROL OF POSTOPERATIVE BLEEDING, COMP	\$985.74	10/01/2016
52648	LASER VAPORIZATION OF PROSTATE, INCLUDING CONTROL OF POSTOPERATIVE BLEEDING, COM	\$993.51	10/01/2016
53060	DRAINAGE OF ABSCESS OR CYST OF SKENE'S GLANDS, MALE	\$16.15	10/01/2016
53200	BIOPSY OF URETHRA	\$11.80	10/01/2016
53260	EXCISION OR FULGURATION; URETHRAL POLYP(S), DISTAL URETHRA	\$18.02	10/01/2016
53265	EXCISION OR FULGURATION; URETHRAL CARUNCLE	\$27.34	10/01/2016
53270	REMOVAL OR DESTRUCTION OF BLADDER CANAL (URETHRA) MUCOUS GLANDS	\$18.96	10/01/2016
53600	DILATION OF URETHRAL STRICTURE BY PASSAGE OF SOUND OR URETHRAL DILATOR, MALE; IN	\$16.78	10/01/2016
53601	DILATION OF URETHRAL STRICTURE BY PASSAGE OF SOUND OR URETHRAL DILATOR, MALE;	\$23.61	10/01/2016
53620	DILATION OF URETHRAL STRICTURE BY PASSAGE OF FILIFORM AND FOLLOWER, MALE;	\$24.54	10/01/2016
53621	DILATION OF URETHRAL STRICTURE BY PASSAGE OF FILIFORM AND FOLLOWER, MALE;	\$31.99	10/01/2016
53660	DILATION OF FEMALE URETHRA INCLUDING SUPPOSITORY AND/OR INSTILLATION; INITIAL	\$24.86	10/01/2016
53661	DILATION OF FEMALE URETHRA INCLUDING SUPPOSITORY AND/OR INSTILLATION; SUBSEQUENT	\$24.85	10/01/2016
53850	TRANSURETHRAL DESTRUCTION OF PROSTATE TISSUE; BY MICROWAVE THERMOTHERAPY	\$1,277.46	10/01/2016
53852	TRANSURETHRAL DESTRUCTION OF PROSTATE TISSUE; BY RADIOFREQUENCY THERMOTHERAPY	\$1,121.19	10/01/2016
53855	INSERTION OF A TEMPORARY PROSTATIC URETHRAL STENT, INCLUDING URETHRAL MEASUREMENT	\$606.11	10/01/2016
54000	SLITTING OF PREPUCE, DORSAL OR LATERAL (SEPARATE PROCEDURE); NEWBORN	\$34.48	10/01/2016

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54001	SLITTING OF PREPUCE, DORSAL OR LATERAL (SEPARATE PROCEDURE); EXCEPT NEWBORN	\$39.76	10/01/2016
54050	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM CONTAGIOSUM)	\$22.99	10/01/2016
54055	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM)	\$22.37	10/01/2016
54056	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM)	\$26.72	10/01/2016
54057	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM)	\$35.10	10/01/2016
54060	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM)	\$42.25	10/01/2016
54065	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILOMA, MOLLUSCUM)	\$39.14	10/01/2016
54100	BIOPSY OF PENIS; (SEPARATE PROCEDURE)	\$62.75	10/01/2016
54105	BIOPSY OF PENIS; DEEP STRUCTURES	\$43.80	10/01/2016
54115	REMOVAL FOREIGN BODY FROM DEEP PENILE TISSUE (EG, PLASTIC IMPLANT)	\$23.30	10/01/2016
54162	LYSIS OR EXCISION OF PENILE POST-CIRCUMCISION ADHESIONS	\$50.02	10/01/2016
54200	INJECTION PROCEDURE FOR PEYRONIE DISEASE;	\$19.88	10/01/2016
54220	IRRIGATION OF CORPORA CAVERNOSA FOR PRIAPISM	\$60.58	10/01/2016
54230	INJECTION PROCEDURE FOR CORPORA CAVERNOSOGRAPHY	\$14.60	10/01/2016
54231	DYNAMIC CAVERNOSOMETRY, INCLUDING INTRACAVERNOSAL INJECTION OF VASOACTIVE DRUGS	\$20.51	10/01/2016
54235	INJECTION OF CORPORA CAVERNOSA WITH PHARMACOLOGIC AGENT(S) (EG, PAPAVERINE,	\$14.29	10/01/2016
54450	FORESKIN MANIPULATION INCLUDING LYSIS OF PREPUTIAL ADHESIONS AND STRETCHING	\$10.57	10/01/2016
55000	PUNCTURE ASPIRATION OF HYDROCELE, TUNICA VAGINALIS, WITH OR WITHOUT INJECTION OF	\$27.65	10/01/2016
55100	DRAINAGE OF SCROTAL WALL ABSCESS	\$42.87	10/01/2016
55200	VASOTOMY, CANNULIZATION WITH OR WITHOUT INCISION OF VAS, UNILATERAL OR BILATERAL	\$136.39	10/01/2016
55250	VASECTOMY, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE), INCLUDING POSTOPERATIVE	\$136.38	10/01/2016
55450	LIGATION (PERCUTANEOUS) OF VAS DEFERENS, UNILATERAL OR BILATERAL (SEPARATE PROCE	\$87.61	10/01/2016
55700	BIOPSY, PROSTATE; NEEDLE OR PUNCH, SINGLE OR MULTIPLE, ANY APPROACH	\$67.72	10/01/2016
55870	ELECTROEJACULATION	\$28.28	10/01/2016
55873	CRYOSURGICAL ABLATION OF THE PROSTATE (INCLUDES ULTRASONIC GUIDANCE AND MONITORI	\$5,544.75	10/01/2016
55876	PLACEMENT OF INTERSTITIAL DEVICE(S) FOR RADIATION THERAPY GUIDANCE (EG, FIDUCIAL	\$30.14	10/01/2016
56405	INCISION AND DRAINAGE OF VULVA OR PERINEAL ABSCESS	\$0.62	10/01/2016
56420	INCISION AND DRAINAGE OF FEMALE GENITAL GLAND ABSCESS	\$26.41	10/01/2016
56441	LYSIS OF LABIAL ADHESIONS	\$4.66	10/01/2016
56501	DESTRUCTION OF LESION(S), VULVA; SIMPLE (EG, LASER SURGERY, ELECTROSURGERY, CRYO	\$13.67	10/01/2016

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56515	DESTRUCTION OF LESION(S), VULVA; EXTENSIVE (EG, LASER SURGERY, ELECTROSURGERY,	\$21.44	10/01/2016
56605	BIOPSY OF VULVA OR PERINEUM (SEPARATE PROCEDURE); ONE LESION	\$18.95	10/01/2016
56606	BIOPSY OF VULVA OR PERINEUM (SEPARATE PROCEDURE); EACH SEPARATE ADDITIONAL	\$6.84	10/01/2016
56820	COLPOSCOPY OF THE VULVA;	\$22.06	10/01/2016
56821	COLPOSCOPY OF THE VULVA; WITH BIOPSY(S)	\$27.96	10/01/2016
57020	COLPOCENTESIS (SEPARATE PROCEDURE)	\$10.25	10/01/2016
57061	DESTRUCTION OF VAGINAL LESION(S); SIMPLE (EG, LASER SURGERY, ELECTROSURGERY, CRY	\$13.35	10/01/2016
57065	DESTRUCTION OF VAGINAL LESION(S); EXTENSIVE (EG, LASER SURGERY, ELECTROSURGERY,	\$17.40	10/01/2016
57100	BIOPSY OF VAGINAL MUCOSA; SIMPLE (SEPARATE PROCEDURE)	\$19.26	10/01/2016
57105	BIOPSY OF VAGINAL MUCOSA; EXTENSIVE, REQUIRING SUTURE (INCLUDING CYSTS)	\$8.69	10/01/2016
57130	EXCISION OF VAGINAL SEPTUM	\$15.53	10/01/2016
57135	EXCISION OF VAGINAL CYST OR TUMOR	\$16.16	10/01/2016
57150	IRRIGATION OF VAGINA AND/OR APPLICATION OF MEDICAMENT FOR TREATMENT OF BACTERIAL	\$13.98	10/01/2016
57155	INSERTION OF UTERINE TANDEM AND/OR VAGINAL OVOIDS FOR CLINICAL BRACHYTHERAPY	\$122.09	10/01/2016
57156	INSERTION OF A VAGINAL RADIATION AFTERLOADING APPARATUS FOR CLINICAL BRACHYTHERA	\$44.43	10/01/2016
57160	FITTING AND INSERTION OF PESSARY OR OTHER INTRAVAGINAL SUPPORT DEVICE	\$25.47	10/01/2016
57170	DIAPHRAGM OR CERVICAL CAP FITTING WITH INSTRUCTIONS	\$10.56	10/01/2016
57180	INTRODUCTION OF ANY HEMOSTATIC AGENT OR PACK FOR SPONTANEOUS OR TRAUMATIC	\$30.45	10/01/2016
57420	COLPOSCOPY OF THE ENTIRE VAGINA, WITH CERVIX IF PRESENT;	\$22.37	10/01/2016
57421	COLPOSCOPY OF THE ENTIRE VAGINA, WITH CERVIX IF PRESENT; WITH BIOPSY(S) OF VAGIN	\$28.58	10/01/2016
57452	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA;	\$14.29	10/01/2016
57454	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH BIOPSY(S) OF THE	\$14.60	10/01/2016
57455	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH BIOPSY(S) OF THE	\$27.65	10/01/2016
57456	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH ENDOCERVICAL	\$27.33	10/01/2016
57460	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH LOOP ELECTRODE	\$104.38	10/01/2016
57461	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH LOOP ELECTRODE	\$114.64	10/01/2016
57500	BIOPSY OF CERVIX, SINGLE OR MULTIPLE, OR LOCAL EXCISION OF LESION, WITH OR WITHO	\$45.05	10/01/2016
57505	ENDOCERVICAL CURETTAGE (NOT DONE AS PART OF A DILATION AND CURETTAGE)	\$8.39	10/01/2016
57510	CAUTERY OF CERVIX; ELECTRO OR THERMAL	\$13.36	10/01/2016
57511	CAUTERY OF CERVIX; CRYOCAUTERY, INITIAL OR REPEAT	\$11.18	10/01/2016

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57513	CAUTERY OF CERVIX; LASER ABLATION	\$9.32	10/01/2016
57520	CONIZATION OF CERVIX, WITH OR WITHOUT FULGURATION, WITH OR WITHOUT DILATION AND	\$27.33	10/01/2016
57522	CONIZATION OF CERVIX, WITH OR WITHOUT FULGURATION, WITH OR WITHOUT DILATION AND	\$16.78	10/01/2016
57558	DILATION AND CURETTAGE OF CERVICAL STUMP	\$9.63	10/01/2016
57800	DILATION OF CERVICAL CANAL, INSTRUMENTAL (SEPARATE PROCEDURE)	\$10.25	10/01/2016
58100	ENDOMETRIAL SAMPLING (BIOPSY) WITH OR WITHOUT ENDOCERVICAL SAMPLING (BIOPSY), WI	\$18.64	10/01/2016
58110	ENDOMETRIAL SAMPLING (BIOPSY) PERFORMED IN CONJUNCTION WITH COLPOSCOPY (LIST SEP	\$6.22	10/01/2016
58120	DILATION AND CURETTAGE, DIAGNOSTIC AND/OR THERAPEUTIC (NONOBSTETRICAL)	\$34.17	10/01/2016
58300	INSERTION OF INTRAUTERINE DEVICE (IUD)	\$16.15	10/01/2016
58301	REMOVAL OF INTRAUTERINE DEVICE (IUD)	\$23.62	10/01/2016
58340	CATHETERIZATION AND INTRODUCTION OF SALINE OR CONTRAST MATERIAL FOR SALINE	\$52.81	10/01/2016
58353	ENDOMETRIAL ABLATION, THERMAL, WITHOUT HYSTEROSCOPIC GUIDANCE	\$688.12	10/01/2016
58356	ENDOMETRIAL CRYOABLATION WITH ULTRASONIC GUIDANCE, INCLUDING ENDOMETRIAL	\$1,343.32	10/01/2016
58555	HYSTEROSCOPY, DIAGNOSTIC (SEPARATE PROCEDURE)	\$106.56	10/01/2016
58558	HYSTEROSCOPY, SURGICAL; WITH SAMPLING (BIOPSY) OF ENDOMETRIUM AND/OR	\$120.54	10/01/2016
58562	HYSTEROSCOPY, SURGICAL; WITH REMOVAL OF IMPACTED FOREIGN BODY	\$112.46	10/01/2016
58563	HYSTEROSCOPY, SURGICAL; WITH ENDOMETRIAL ABLATION (EG, ENDOMETRIAL RESECTION,	\$1,160.03	10/01/2016
58565	HYSTEROSCOPY, SURGICAL; WITH BILATERAL FALLOPIAN TUBE CANNULATION TO INDUCE	\$1,333.71	10/01/2016
58800	DRAINAGE OF OVARIAN CYST(S), UNILATERAL OR BILATERAL, (SEPARATE PROCEDURE); VAGI	\$16.77	10/01/2016
59000	AMNIOCENTESIS; DIAGNOSTIC	\$41.66	10/01/2016
59015	CHORIONIC VILLUS SAMPLING, ANY METHOD	\$21.82	10/01/2016
59070	TRANSABDOMINAL AMNIOINFUSION, INCLUDING ULTRASOUND GUIDANCE	\$89.59	10/01/2016
59074	FETAL FLUID DRAINAGE (EG, VESICOCENTESIS, THORACOCENTESIS, PARACENTESIS),	\$76.37	10/01/2016
59160	CURETTAGE, POSTPARTUM	\$28.43	10/01/2016
59200	INSERTION OF CERVICAL DILATOR (EG, LAMINARIA, PROSTAGLANDIN) (SEPARATE PROCEDURE	\$25.12	10/01/2016
59300	EPISIOTOMY OR VAGINAL REPAIR, BY OTHER THAN ATTENDING	\$41.33	10/01/2016
59425	ANTEPARTUM CARE ONLY; 4-6 VISITS	\$91.58	10/01/2016
59426	ANTEPARTUM CARE ONLY; 7 OR MORE VISITS	\$171.92	10/01/2016
59430	POSTPARTUM CARE ONLY (SEPARATE PROCEDURE)	\$41.99	10/01/2016
59812	TREATMENT OF INCOMPLETE ABORTION, ANY TRIMESTER, COMPLETED SURGICALLY	\$20.83	10/01/2016

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59820	TREATMENT OF MISSED ABORTION, COMPLETED SURGICALLY; FIRST TRIMESTER	\$21.16	10/01/2016
59821	TREATMENT OF MISSED ABORTION, COMPLETED SURGICALLY; SECOND TRIMESTER	\$23.14	10/01/2016
59840	INDUCED ABORTION, BY DILATION AND CURETTAGE	\$8.26	10/01/2016
59841	INDUCED ABORTION, BY DILATION AND EVACUATION	\$19.83	10/01/2016
60000	INCISION AND DRAINAGE OF THYROGLOSSAL DUCT CYST, INFECTED	\$15.22	10/01/2016
60100	BIOPSY THYROID, PERCUTANEOUS CORE NEEDLE	\$29.20	10/01/2016
60300	ASPIRATION AND/OR INJECTION, THYROID CYST	\$60.26	10/01/2016
62263	PERCUTANEOUS LYSIS OF EPIDURAL ADHESIONS USING SOLUTION INJECTION (EG, HYPERTONI	\$274.32	10/01/2016
62264	PERCUTANEOUS LYSIS OF EPIDURAL ADHESIONS USING SOLUTION INJECTION (EG,	\$160.92	10/01/2016
62267	PERCUTANEOUS ASPIRATION WITHIN THE NUCLEUS PULPOSUS, INTERVERTEBRAL DISC, OR PAR	\$77.67	10/01/2016
62270	SPINAL PUNCTURE, LUMBAR, DIAGNOSTIC	\$71.15	10/01/2016
62272	SPINAL PUNCTURE, THERAPEUTIC, FOR DRAINAGE OF CEREBROSPINAL FLUID (BY NEEDLE OR	\$103.77	10/01/2016
62273	INJECTION, EPIDURAL, OF BLOOD OR CLOT PATCH	\$51.88	10/01/2016
62280	INJECTION/INFUSION OF NEUROLYTIC SUBSTANCE (EG, ALCOHOL, PHENOL, ICED SALINE	\$126.75	10/01/2016
62281	INJECTION/INFUSION OF NEUROLYTIC SUBSTANCE (EG, ALCOHOL, PHENOL, ICED SALINE	\$73.01	10/01/2016
62282	INJECTION/INFUSION OF NEUROLYTIC SUBSTANCE (EG, ALCOHOL, PHENOL, ICED SALINE	\$129.55	10/01/2016
62284	INJECTION OF DYE FOR X-RAY IMAGING AND/OR CT OF LOWER SPINAL CANAL	\$84.50	10/01/2016
62302	MYELOGRAPHY VIA LUMBAR INJECTION, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPR	\$103.77	10/01/2016
62303	MYELOGRAPHY VIA LUMBAR INJECTION, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPR	\$110.28	10/01/2016
62304	MYELOGRAPHY VIA LUMBAR INJECTION, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPR	\$103.14	10/01/2016
62305	MYELOGRAPHY VIA LUMBAR INJECTION, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPR	\$117.43	10/01/2016
62310	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (INCLUDING ANESTHETIC, A	\$115.56	10/01/2016
62311	INJECTION(S), OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE(S) (INCLUDING ANESTHETIC, A	\$116.19	10/01/2016
62318	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR IN	\$114.94	10/01/2016
62319	INJECTION(S), INCLUDING INDWELLING CATHETER PLACEMENT, CONTINUOUS INFUSION OR IN	\$63.07	10/01/2016
62367	ELECTRONIC ANALYSIS OF PROGRAMMABLE, IMPLANTED PUMP FOR INTRATHECAL OR EPIDURAL	\$13.98	10/01/2016
62368	ELECTRONIC ANALYSIS OF PROGRAMMABLE, IMPLANTED PUMP FOR INTRATHECAL OR EPIDURAL	\$18.64	10/01/2016
62369	ELECTRONIC ANALYSIS OF PROGRAMMABLE, IMPLANTED PUMP FOR INTRATHECAL OR EPIDURAL	\$74.56	10/01/2016
62370	ELECTRONIC ANALYSIS OF PROGRAMMABLE, IMPLANTED PUMP FOR INTRATHECAL OR EPIDURAL	\$70.21	10/01/2016
63650	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY, EPIDURAL	\$806.18	10/01/2016

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64400	INJECTION, ANESTHETIC AGENT; TRIGEMINAL NERVE, ANY DIVISION OR BRANCH	\$49.39	10/01/2016
64402	INJECTION, ANESTHETIC AGENT; FACIAL NERVE	\$45.04	10/01/2016
64405	INJECTION, ANESTHETIC AGENT; GREATER OCCIPITAL NERVE	\$32.93	10/01/2016
64408	INJECTION, ANESTHETIC AGENT; VAGUS NERVE	\$23.92	10/01/2016
64410	INJECTION, ANESTHETIC AGENT; PHRENIC NERVE	\$45.98	10/01/2016
64413	INJECTION, ANESTHETIC AGENT; CERVICAL PLEXUS	\$39.76	10/01/2016
64415	INJECTION, ANESTHETIC AGENT; BRACHIAL PLEXUS, SINGLE	\$46.28	10/01/2016
64417	INJECTION, ANESTHETIC AGENT; AXILLARY NERVE	\$50.95	10/01/2016
64418	INJECTION, ANESTHETIC AGENT; SUPRASCAPULAR NERVE	\$60.58	10/01/2016
64420	INJECTION, ANESTHETIC AGENT; INTERCOSTAL NERVE, SINGLE	\$38.52	10/01/2016
64421	INJECTION, ANESTHETIC AGENT; INTERCOSTAL NERVES, MULTIPLE, REGIONAL BLOCK	\$51.26	10/01/2016
64425	INJECTION, ANESTHETIC AGENT; ILIOINGUINAL, ILIOHYPOGASTRIC NERVES	\$33.55	10/01/2016
64430	INJECTION, ANESTHETIC AGENT; PUDENDAL NERVE	\$49.09	10/01/2016
64435	INJECTION, ANESTHETIC AGENT; PARACERVICAL (UTERINE) NERVE	\$45.98	10/01/2016
64445	INJECTION, ANESTHETIC AGENT; SCIATIC NERVE, SINGLE	\$55.61	10/01/2016
64447	INJECTION, ANESTHETIC AGENT; FEMORAL NERVE, SINGLE	\$46.91	10/01/2016
64450	INJECTION, ANESTHETIC AGENT; OTHER PERIPHERAL NERVE OR BRANCH	\$29.82	10/01/2016
64455	INJECTIONS OF ANESTHETIC AND/OR STEROID DRUG INTO NERVE OF FOOT	\$11.18	10/01/2016
64461	PARAVERTEBRAL BLOCK (PVB) (PARASPINOUS BLOCK), THORACIC; SINGLE INJECTION SITE (	\$53.75	10/01/2016
64462	PARAVERTEBRAL BLOCK (PVB) (PARASPINOUS BLOCK), THORACIC; SECOND AND ANY ADDITION	\$25.48	10/01/2016
64463	PARAVERTEBRAL BLOCK (PVB) (PARASPINOUS BLOCK), THORACIC; CONTINUOUS INFUSION BY	\$67.72	10/01/2016
64479	INJECTION(S), ANESTHETIC AGENT AND/OR STEROID, TRANSFORAMINAL EPIDURAL, WITH IMA	\$90.40	10/01/2016
64480	INJECTION(S), ANESTHETIC AGENT AND/OR STEROID, TRANSFORAMINAL EPIDURAL, WITH IMA	\$43.49	10/01/2016
64483	INJECTION(S), ANESTHETIC AGENT AND/OR STEROID, TRANSFORAMINAL EPIDURAL, WITH IMA	\$93.51	10/01/2016
64484	INJECTION(S), ANESTHETIC AGENT AND/OR STEROID, TRANSFORAMINAL EPIDURAL, WITH IMA	\$31.07	10/01/2016
64486	TRANSVERSUS ABDOMINIS PLANE (TAP) BLOCK (ABDOMINAL PLANE BLOCK, RECTUS SHEATH BL	\$53.44	10/01/2016
64487	TRANSVERSUS ABDOMINIS PLANE (TAP) BLOCK (ABDOMINAL PLANE BLOCK, RECTUS SHEATH BL	\$69.28	10/01/2016
64488	TRANSVERSUS ABDOMINIS PLANE (TAP) BLOCK (ABDOMINAL PLANE BLOCK, RECTUS SHEATH BL	\$64.31	10/01/2016
64489	TRANSVERSUS ABDOMINIS PLANE (TAP) BLOCK (ABDOMINAL PLANE BLOCK, RECTUS SHEATH BL	\$108.43	10/01/2016
64490	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEA	\$73.32	10/01/2016

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64491	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEA	\$29.21	10/01/2016
64492	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEA	\$28.90	10/01/2016
64493	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEA	\$71.45	10/01/2016
64494	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEA	\$30.13	10/01/2016
64495	INJECTION(S), DIAGNOSTIC OR THERAPEUTIC AGENT, PARAVERTEBRAL FACET (ZYGAPOPHYSEA	\$29.82	10/01/2016
64505	INJECTION, ANESTHETIC AGENT; SPHENOPALATINE GANGLION	\$14.91	10/01/2016
64510	INJECTION, ANESTHETIC AGENT; STELLATE GANGLION (CERVICAL SYMPATHETIC)	\$46.60	10/01/2016
64517	INJECTION, ANESTHETIC AGENT; SUPERIOR HYPOGASTRIC PLEXUS	\$51.89	10/01/2016
64520	INJECTION, ANESTHETIC AGENT; LUMBAR OR THORACIC (PARAVERTEBRAL SYMPATHETIC)	\$92.26	10/01/2016
64530	INJECTION, ANESTHETIC AGENT; CELIAC PLEXUS, WITH OR WITHOUT RADIOLOGIC	\$86.36	10/01/2016
64550	APPLICATION OF SURFACE (TRANSCUTANEOUS) NEUROSTIMULATOR	\$6.21	10/01/2016
64553	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY; CRANIAL NERVE	\$45.66	10/01/2016
64555	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY; PERIPHERAL NERVE (	\$50.01	10/01/2016
64561	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY; SACRAL NERVE (TRAN	\$451.39	10/01/2016
64565	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY; NEUROMUSCULAR	\$50.02	10/01/2016
64566	POSTERIOR TIBIAL NEUROSTIMULATION, PERCUTANEOUS NEEDLE ELECTRODE, SINGLE TREATME	\$84.50	10/01/2016
64585	REVISION OR REMOVAL OF PERIPHERAL NEUROSTIMULATOR ELECTRODE ARRAY	\$88.54	10/01/2016
64590	INSERTION OR REPLACEMENT OF PERIPHERAL OR GASTRIC NEUROSTIMULATOR PULSE GENERATO	\$90.72	10/01/2016
64595	REVISION OR REMOVAL OF PERIPHERAL OR GASTRIC NEUROSTIMULATOR PULSE GENERATOR OR	\$104.08	10/01/2016
64600	DESTRUCTION BY NEUROLYTIC AGENT, TRIGEMINAL NERVE; SUPRAORBITAL, INFRAORBITAL, M	\$149.74	10/01/2016
64605	DESTRUCTION BY NEUROLYTIC AGENT, TRIGEMINAL NERVE; SECOND AND THIRD DIVISION	\$295.13	10/01/2016
64610	DESTRUCTION BY NEUROLYTIC AGENT, TRIGEMINAL NERVE; SECOND AND THIRD DIVISION	\$221.19	10/01/2016
64611	CHEMODENERVATION OF PAROTID AND SUBMANDIBULAR SALIVARY GLANDS, BILATERAL	\$12.73	10/01/2016
64612	CHEMODENERVATION OF MUSCLE(S); MUSCLE(S) INNERVATED BY FACIAL NERVE, UNILATERAL	\$12.43	10/01/2016
64615	CHEMODENERVATION OF MUSCLE(S) INNERVATED BY FACIAL, TRIGEMINAL, CERVICAL SPINE A	\$16.78	10/01/2016
64616	CHEMODENERVATION OF MUSCLE(S); NECK MUSCLE(S), EXCLUDING MUSCLES OF THE LARYNX,	\$14.60	10/01/2016
64617	CHEMODENERVATION OF MUSCLE(S); LARYNX, UNILATERAL, PERCUTANEOUS (EG, FOR SPASMOD	\$62.76	10/01/2016
64620	DESTRUCTION BY NEUROLYTIC AGENT, INTERCOSTAL NERVE	\$27.65	10/01/2016
64630	DESTRUCTION BY NEUROLYTIC AGENT; PUDENDAL NERVE	\$33.86	10/01/2016
64632	DESTRUCTION BY NEUROLYTIC AGENT; PLANTAR COMMON DIGITAL NERVE	\$14.29	10/01/2016

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64633	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGIN	\$171.49	10/01/2016
64634	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGIN	\$106.87	10/01/2016
64635	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGIN	\$169.94	10/01/2016
64636	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGIN	\$99.41	10/01/2016
64640	DESTRUCTION BY NEUROLYTIC AGENT; OTHER PERIPHERAL NERVE OR BRANCH	\$34.79	10/01/2016
64642	CHEMODENERVATION OF ONE EXTREMITY; 1-4 MUSCLE(S)	\$28.58	10/01/2016
64643	CHEMODENERVATION OF ONE EXTREMITY; EACH ADDITIONAL EXTREMITY, 1-4 MUSCLE(S) (LIS	\$17.39	10/01/2016
64644	CHEMODENERVATION OF ONE EXTREMITY; 5 OR MORE MUSCLE(S)	\$37.90	10/01/2016
64645	CHEMODENERVATION OF ONE EXTREMITY; EACH ADDITIONAL EXTREMITY, 5 OR MORE MUSCLE(S)	\$26.71	10/01/2016
64646	CHEMODENERVATION OF TRUNK MUSCLE(S); 1-5 MUSCLE(S)	\$28.58	10/01/2016
64647	CHEMODENERVATION OF TRUNK MUSCLE(S); 6 OR MORE MUSCLE(S)	\$35.11	10/01/2016
64650	CHEMODENERVATION OF ECCRINE GLANDS; BOTH AXILLAE	\$30.76	10/01/2016
64653	CHEMODENERVATION OF ECCRINE GLANDS; OTHER AREA(S) (EG, SCALP, FACE, NECK), PER D	\$36.97	10/01/2016
64680	DESTRUCTION BY NEUROLYTIC AGENT, WITH OR WITHOUT RADIOLOGIC MONITORING; CELIAC P	\$125.51	10/01/2016
64681	DESTRUCTION BY NEUROLYTIC AGENT, WITH OR WITHOUT RADIOLOGIC MONITORING;	\$133.27	10/01/2016
64721	NEUROPLASTY AND/OR TRANSPOSITION; MEDIAN NERVE AT CARPAL TUNNEL	\$2.48	10/01/2016
65125	MODIFICATION OF OCULAR IMPLANT WITH PLACEMENT OR REPLACEMENT OF PEGS (EG, DRILLI	\$143.84	10/01/2016
65205	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; CONJUNCTIVAL SUPERFICIAL	\$10.25	10/01/2016
65210	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; CONJUNCTIVAL EMBEDDED (INCLUDES	\$13.36	10/01/2016
65222	REMOVAL OF FOREIGN BODY, EXTERNAL EYE; CORNEAL, WITH SLIT LAMP	\$12.42	10/01/2016
65270	REPAIR OF LACERATION; CONJUNCTIVA, WITH OR WITHOUT NONPERFORATING LACERATION SCL	\$110.29	10/01/2016
65272	REPAIR OF LACERATION; CONJUNCTIVA, BY MOBILIZATION AND REARRANGEMENT, WITHOUT	\$131.72	10/01/2016
65275	REPAIR OF LACERATION; CORNEA, NONPERFORATING, WITH OR WITHOUT REMOVAL FOREIGN	\$100.66	10/01/2016
65286	REPAIR OF LACERATION; APPLICATION OF TISSUE GLUE, WOUNDS OF CORNEA AND/OR SCLERA	\$181.43	10/01/2016
65400	EXCISION OF LESION, CORNEA (KERATECTOMY, LAMELLAR, PARTIAL), EXCEPT PTERYGIUM	\$66.18	10/01/2016
65410	BIOPSY OF CORNEA	\$33.55	10/01/2016
65420	EXCISION OR TRANSPOSITION OF PTERYGIUM; WITHOUT GRAFT	\$120.54	10/01/2016
65426	EXCISION OR TRANSPOSITION OF PTERYGIUM; WITH GRAFT	\$150.98	10/01/2016
65430	SCRAPING OF CORNEA, DIAGNOSTIC, FOR SMEAR AND/OR CULTURE	\$9.32	10/01/2016
65435	REMOVAL OF CORNEAL EPITHELIUM; WITH OR WITHOUT CHEMOCAUTERIZATION (ABRASION,	\$8.70	10/01/2016

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65436	REMOVAL OF CORNEAL EPITHELIUM; WITH APPLICATION OF CHELATING AGENT (EG, EDTA)	\$13.36	10/01/2016
65450	DESTRUCTION OF LESION OF CORNEA BY CRYOTHERAPY, PHOTOCOAGULATION OR	\$2.49	10/01/2016
65600	MULTIPLE PUNCTURES OF ANTERIOR CORNEA (EG, FOR CORNEAL EROSION, TATTOO)	\$43.50	10/01/2016
65772	CORNEAL RELAXING INCISION FOR CORRECTION OF SURGICALLY INDUCED ASTIGMATISM	\$38.52	10/01/2016
65778	INSERTION OF AMNIOTIC MEMBRANE TO EYE SURFACE	\$1,207.87	10/01/2016
65779	INSERTION OF AMNIOTIC MEMBRANE TO EYE SURFACE WITH SUTURES	\$921.43	10/01/2016
65800	PARACENTESIS OF ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); WITH REMOVAL OF AQ	\$23.92	10/01/2016
65815	PARACENTESIS OF ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); WITH REMOVAL OF	\$139.49	10/01/2016
65855	TRABECULOPLASTY BY LASER SURGERY, ONE OR MORE SESSIONS (DEFINED TREATMENT	\$28.58	10/01/2016
65860	SEVERING ADHESIONS OF ANTERIOR SEGMENT, LASER TECHNIQUE (SEPARATE PROCEDURE)	\$48.16	10/01/2016
66020	INJECTION, ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); AIR OR LIQUID	\$47.84	10/01/2016
66030	INJECTION, ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); MEDICATION	\$47.84	10/01/2016
66130	EXCISION OF LESION, SCLERA	\$110.28	10/01/2016
66250	REVISION OR REPAIR OF OPERATIVE WOUND OF ANTERIOR SEGMENT, ANY TYPE, EARLY OR	\$166.83	10/01/2016
66700	CILIARY BODY DESTRUCTION; DIATHERMY	\$49.39	10/01/2016
66710	CILIARY BODY DESTRUCTION; CYCLOPHOTOCOAGULATION, TRANSSCLERAL	\$40.69	10/01/2016
66720	CILIARY BODY DESTRUCTION; CRYOTHERAPY	\$43.80	10/01/2016
66740	CILIARY BODY DESTRUCTION; CYCLODIALYSIS	\$38.21	10/01/2016
66761	IRIDOTOMY/IRIDECTOMY BY LASER SURGERY (EG, FOR GLAUCOMA) (PER SESSION)	\$52.51	10/01/2016
66762	IRIDOPLASTY BY PHOTOCOAGULATION (ONE OR MORE SESSIONS) (EG, FOR IMPROVEMENT OF	\$41.94	10/01/2016
66770	DESTRUCTION OF CYST OR LESION IRIS OR CILIARY BODY (NONEXCISIONAL PROCEDURE)	\$37.90	10/01/2016
66821	DISCISSION OF SECONDARY MEMBRANOUS CATARACT (OPACIFIED POSTERIOR LENS CAPSULE	\$16.16	10/01/2016
67025	INJECTION OF VITREOUS SUBSTITUTE, PARS PLANA OR LIMBAL APPROACH, (FLUID-GAS	\$81.08	10/01/2016
67028	INTRAVITREAL INJECTION OF A PHARMACOLOGIC AGENT (SEPARATE PROCEDURE)	\$1.55	10/01/2016
67031	SEVERING OF VITREOUS STRANDS, VITREOUS FACE ADHESIONS, SHEETS, MEMBRANES OR	\$27.34	10/01/2016
67101	REPAIR OF RETINAL DETACHMENT, ONE OR MORE SESSIONS; CRYOTHERAPY OR DIATHERMY, WI	\$95.38	10/01/2016
67105	REPAIR OF RETINAL DETACHMENT, ONE OR MORE SESSIONS; PHOTOCOAGULATION, WITH OR	\$65.24	10/01/2016
67110	REPAIR OF RETINAL DETACHMENT; BY INJECTION OF AIR OR OTHER GAS (EG, PNEUMATIC	\$55.30	10/01/2016
67120	REMOVAL OF IMPLANTED MATERIAL, POSTERIOR SEGMENT; EXTRAOCULAR	\$85.75	10/01/2016
67141	PROPHYLAXIS OF RETINAL DETACHMENT (EG, RETINAL BREAK, LATTICE DEGENERATION) WITH	\$31.07	10/01/2016

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67145	PROPHYLAXIS OF RETINAL DETACHMENT (EG, RETINAL BREAK, LATTICE DEGENERATION)	\$24.85	10/01/2016
67208	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), ONE OR MO	\$17.71	10/01/2016
67210	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), ONE OR	\$15.23	10/01/2016
67220	DESTRUCTION OF LOCALIZED LESION OF CHOROID (EG, CHOROIDAL NEOVASCULARIZATION);	\$29.21	10/01/2016
67221	DESTRUCTION OF LOCALIZED LESION OF CHOROID (EG, CHOROIDAL NEOVASCULARIZATION);	\$63.68	10/01/2016
67225	DESTRUCTION OF LOCALIZED LESION OF CHOROID (EG, CHOROIDAL NEOVASCULARIZATION);	\$1.55	10/01/2016
67227	DESTRUCTION OF EXTENSIVE OR PROGRESSIVE RETINOPATHY (EG, DIABETIC RETINOPATHY),	\$28.27	10/01/2016
67228	TREATMENT OF EXTENSIVE OR PROGRESSIVE RETINOPATHY, ONE OR MORE SESSIONS; (EG, DI	\$28.89	10/01/2016
67345	CHEMODENERVATION OF EXTRAOCULAR MUSCLE	\$21.12	10/01/2016
67500	RETROBULBAR INJECTION; MEDICATION (SEPARATE PROCEDURE, DOES NOT INCLUDE SUPPLY O	\$5.28	10/01/2016
67505	RETROBULBAR INJECTION; ALCOHOL	\$6.52	10/01/2016
67515	INJECTION OF MEDICATION OR SUBSTANCE INTO MEMBRANE COVERING EYEBALL	\$6.52	10/01/2016
67700	BLEPHAROTOMY, DRAINAGE OF ABSCESS, EYELID	\$132.34	10/01/2016
67710	SEVERING OF TARSORRHAPHY	\$109.97	10/01/2016
67715	CANTHOTOMY (SEPARATE PROCEDURE)	\$113.08	10/01/2016
67800	EXCISION OF CHALAZION; SINGLE	\$20.51	10/01/2016
67801	EXCISION OF CHALAZION; MULTIPLE, SAME LID	\$24.54	10/01/2016
67805	EXCISION OF CHALAZION; MULTIPLE, DIFFERENT LIDS	\$32.00	10/01/2016
67810	INCISIONAL BIOPSY OF EYELID SKIN INCLUDING LID MARGIN	\$87.30	10/01/2016
67825	CORRECTION OF TRICHIASIS; EPILATION BY OTHER THAN FORCEPS (EG, BY	\$5.90	10/01/2016
67830	CORRECTION OF TRICHIASIS; INCISION OF LID MARGIN	\$111.52	10/01/2016
67840	EXCISION OF LESION OF EYELID (EXCEPT CHALAZION) WITHOUT CLOSURE OR WITH SIMPLE	\$101.58	10/01/2016
67850	DESTRUCTION OF LESION OF LID MARGIN (UP TO 1 CM)	\$68.04	10/01/2016
67875	TEMPORARY CLOSURE OF EYELIDS BY SUTURE (EG, FROST SUTURE)	\$64.62	10/01/2016
67880	CONSTRUCTION OF INTERMARGINAL ADHESIONS, MEDIAN TARSORRHAPHY, OR CANTHORRHAPHY;	\$77.97	10/01/2016
67882	CONSTRUCTION OF INTERMARGINAL ADHESIONS, MEDIAN TARSORRHAPHY, OR CANTHORRHAPHY;	\$78.91	10/01/2016
67900	REPAIR OF BROW PTOSIS (SUPRACILIARY, MID-FOREHEAD OR CORONAL APPROACH)	\$113.08	10/01/2016
67901	REPAIR OF BLEPHAROPTOSIS; FRONTALIS MUSCLE TECHNIQUE WITH SUTURE OR OTHER MATERI	\$155.65	10/01/2016
67903	REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATOR RESECTION OR ADVANCEMENT, INTERNAL	\$94.76	10/01/2016
67904	REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATOR RESECTION OR ADVANCEMENT, EXTERNAL	\$116.50	10/01/2016

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67908	REMOVAL OF TISSUE, MUSCLE, AND MEMBRANE TO CORRECT EYELID DROOPING OR PARALYSIS	\$59.34	10/01/2016
67909	REDUCTION OF OVERCORRECTION OF PTOSIS	\$83.88	10/01/2016
67912	CORRECTION OF LAGOPHTHALMOS, WITH IMPLANTATION OF UPPER EYELID LID LOAD (EG,	\$341.11	10/01/2016
67914	REPAIR OF ECTROPION; SUTURE	\$123.02	10/01/2016
67915	REPAIR OF ECTROPION; THERMOCAUTERIZATION	\$82.02	10/01/2016
67916	REPAIR OF ECTROPION; EXCISION TARSAL WEDGE	\$139.49	10/01/2016
67917	REPAIR OF ECTROPION; EXTENSIVE (EG, TARSAL STRIP OPERATIONS)	\$124.88	10/01/2016
67921	REPAIR OF ENTROPION; SUTURE	\$129.86	10/01/2016
67922	REPAIR OF ENTROPION; THERMOCAUTERIZATION	\$80.15	10/01/2016
67923	REPAIR OF ENTROPION; EXCISION TARSAL WEDGE	\$139.17	10/01/2016
67924	REPAIR OF ENTROPION; EXTENSIVE (EG, TARSAL STRIP OR CAPSULOPALPEBRAL FASCIA	\$149.12	10/01/2016
67930	SUTURE OF RECENT WOUND, EYELID, INVOLVING LID MARGIN, TARSUS, AND/OR PALPEBRAL C	\$107.49	10/01/2016
67935	SUTURE OF RECENT WOUND, EYELID, INVOLVING LID MARGIN, TARSUS, AND/OR PALPEBRAL	\$131.10	10/01/2016
67938	REMOVAL OF EMBEDDED FOREIGN BODY, EYELID	\$109.98	10/01/2016
67950	CANTHOPLASTY (RECONSTRUCTION OF CANTHUS)	\$94.13	10/01/2016
67961	EXCISION AND REPAIR OF EYELID, INVOLVING LID MARGIN, TARSUS, CONJUNCTIVA,	\$103.45	10/01/2016
67966	EXCISION AND REPAIR OF EYELID, INVOLVING LID MARGIN, TARSUS, CONJUNCTIVA,	\$95.68	10/01/2016
68020	INCISION OF CONJUNCTIVA, DRAINAGE OF CYST	\$7.76	10/01/2016
68040	EXPRESSION OF CONJUNCTIVAL FOLLICLES (EG, FOR TRACHOMA)	\$10.26	10/01/2016
68100	BIOPSY OF CONJUNCTIVA	\$63.07	10/01/2016
68110	EXCISION OF LESION, CONJUNCTIVA; UP TO 1 CM	\$66.80	10/01/2016
68115	EXCISION OF LESION, CONJUNCTIVA; OVER 1 CM	\$110.91	10/01/2016
68130	EXCISION OF LESION, CONJUNCTIVA; WITH ADJACENT SCLERA	\$109.36	10/01/2016
68135	DESTRUCTION OF LESION, CONJUNCTIVA	\$4.66	10/01/2016
68200	SUBCONJUNCTIVAL INJECTION	\$5.59	10/01/2016
68320	CONJUNCTIVOPLASTY; WITH CONJUNCTIVAL GRAFT OR EXTENSIVE REARRANGEMENT	\$160.61	10/01/2016
68330	REPAIR OF SYMBLEPHARON; CONJUNCTIVOPLASTY, WITHOUT GRAFT	\$123.95	10/01/2016
68340	REPAIR OF SYMBLEPHARON; DIVISION OF SYMBLEPHARON, WITH OR WITHOUT INSERTION OF	\$126.13	10/01/2016
68360	CONJUNCTIVAL FLAP; BRIDGE OR PARTIAL (SEPARATE PROCEDURE)	\$103.45	10/01/2016
68400	INCISION, DRAINAGE OF LACRIMAL GLAND	\$132.35	10/01/2016

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68420	INCISION, DRAINAGE OF LACRIMAL SAC (DACRYOCYSTOTOMY OR DACRYOCYSTOSTOMY)	\$133.28	10/01/2016
68440	SNIP INCISION OF LACRIMAL PUNCTUM	\$2.48	10/01/2016
68510	BIOPSY OF LACRIMAL GLAND	\$132.97	10/01/2016
68530	REMOVAL OF FOREIGN BODY OR DACRYOLITH, LACRIMAL PASSAGES	\$147.87	10/01/2016
68705	CORRECTION OF EVERTED PUNCTUM, CAUTERY	\$60.58	10/01/2016
68760	CLOSURE OF THE LACRIMAL PUNCTUM; BY THERMOCAUTERIZATION, LIGATION, OR LASER	\$47.84	10/01/2016
68761	CLOSURE OF THE LACRIMAL PUNCTUM; BY PLUG, EACH	\$24.85	10/01/2016
68801	DILATION OF LACRIMAL PUNCTUM, WITH OR WITHOUT IRRIGATION	\$11.81	10/01/2016
68810	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION;	\$37.59	10/01/2016
68815	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; WITH INSERTION OF	\$152.84	10/01/2016
68816	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; WITH TRANSLUMINAL BALL	\$387.09	10/01/2016
68840	PROBING OF LACRIMAL CANALICULI, WITH OR WITHOUT IRRIGATION	\$9.32	10/01/2016
68850	INJECTION OF CONTRAST MEDIUM FOR DACRYOCYSTOGRAPHY	\$4.35	10/01/2016
69000	DRAINAGE EXTERNAL EAR, ABSCESS OR HEMATOMA; SIMPLE	\$59.96	10/01/2016
69005	DRAINAGE EXTERNAL EAR, ABSCESS OR HEMATOMA; COMPLICATED	\$50.64	10/01/2016
69020	DRAINAGE EXTERNAL AUDITORY CANAL, ABSCESS	\$79.84	10/01/2016
69100	BIOPSY EXTERNAL EAR	\$44.74	10/01/2016
69105	BIOPSY EXTERNAL AUDITORY CANAL	\$67.73	10/01/2016
69110	EXCISION EXTERNAL EAR; PARTIAL, SIMPLE REPAIR	\$117.43	10/01/2016
69145	EXCISION SOFT TISSUE LESION, EXTERNAL AUDITORY CANAL	\$130.17	10/01/2016
69200	REMOVAL FOREIGN BODY FROM EXTERNAL AUDITORY CANAL; WITHOUT GENERAL ANESTHESIA	\$45.67	10/01/2016
69210	REMOVAL OF IMPACT EAR WAX, ONE EAR	\$14.29	10/01/2016
69220	DEBRIDEMENT, MASTOIDECTOMY CAVITY, SIMPLE (EG, ROUTINE CLEANING)	\$51.88	10/01/2016
69222	DEBRIDEMENT, MASTOIDECTOMY CAVITY, COMPLEX (EG, WITH ANESTHESIA OR MORE THAN	\$73.01	10/01/2016
69300	OTOPLASTY, PROTRUDING EAR, WITH OR WITHOUT SIZE REDUCTION	\$227.72	10/01/2016
69420	MYRINGOTOMY INCLUDING ASPIRATION AND/OR EUSTACHIAN TUBE INFLATION	\$62.75	10/01/2016
69424	VENTILATING TUBE REMOVAL REQUIRING GENERAL ANESTHESIA	\$57.78	10/01/2016
69433	TYMPANOSTOMY (REQUIRING INSERTION OF VENTILATING TUBE), LOCAL OR TOPICAL	\$61.51	10/01/2016
69540	EXCISION AURAL POLYP	\$72.38	10/01/2016
69610	TYMPANIC MEMBRANE REPAIR, WITH OR WITHOUT SITE PREPARATION OF PERFORATION FOR	\$82.02	10/01/2016

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69620	MYRINGOPLASTY (SURGERY CONFINED TO DRUMHEAD AND DONOR AREA)	\$181.43	10/01/2016
69801	LABYRINTHOTOMY, WITH PERFUSION OF VESTIBULOACTIVE DRUG(S); TRANSCANAL	\$61.82	10/01/2016
92002	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVALUATION WITH INITIATION OF	\$28.89	10/01/2016
92004	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVALUATION WITH INITIATION	\$42.25	10/01/2016
92012	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVALUATION, WITH INITIATION O	\$28.27	10/01/2016
92014	OPHTHALMOLOGICAL SERVICES: MEDICAL EXAMINATION AND EVALUATION, WITH INITIATION	\$37.90	10/01/2016
92015	DETERMINATION OF REFRACTIVE STATE	\$0.31	10/01/2016
92020	GONIOSCOPY (SEPARATE PROCEDURE)	\$4.97	10/01/2016
92071	FITTING OF CONTACT LENS FOR TREATMENT OF OCULAR SURFACE DISEASE	\$3.72	10/01/2016
92072	FITTING OF CONTACT LENS FOR MANAGEMENT OF KERATOCONUS, INITIAL FITTING	\$27.65	10/01/2016
92100	SERIAL TONOMETRY (SEPARATE PROCEDURE) WITH MULTIPLE MEASUREMENTS OF INTRAOCULAR	\$40.07	10/01/2016
92140	PROVOCATIVE TESTS FOR GLAUCOMA, WITH INTERPRETATION AND REPORT, WITHOUT	\$31.68	10/01/2016
92225	OPHTHALMOSCOPY, EXTENDED, WITH RETINAL DRAWING (EG, FOR RETINAL DETACHMENT, MELA	\$4.97	10/01/2016
92226	OPHTHALMOSCOPY, EXTENDED, WITH RETINAL DRAWING (EG, FOR RETINAL DETACHMENT,	\$4.97	10/01/2016
92230	FLUORESCEIN ANGIOSCOPY WITH INTERPRETATION AND REPORT	\$21.43	10/01/2016
92260	OPHTHALMODYNAMOMETRY	\$6.53	10/01/2016
92310	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF AND FITTING OF CONTACT L	\$31.38	10/01/2016
92311	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF AND FITTING OF CONTACT	\$39.46	10/01/2016
92312	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF AND FITTING OF CONTACT	\$45.98	10/01/2016
92313	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF AND FITTING OF CONTACT	\$43.19	10/01/2016
92314	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF CONTACT LENS, WITH	\$38.84	10/01/2016
92315	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF CONTACT LENS, WITH	\$44.43	10/01/2016
92316	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF CONTACT LENS, WITH	\$51.26	10/01/2016
92317	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF CONTACT LENS, WITH	\$46.91	10/01/2016
92340	FITTING OF SPECTACLES, EXCEPT FOR APHAKIA; MONOFOCAL	\$14.60	10/01/2016
92341	FITTING OF SPECTACLES, EXCEPT FOR APHAKIA; BIFOCAL	\$14.29	10/01/2016
92342	FITTING OF SPECTACLES, EXCEPT FOR APHAKIA; MULTIFOCAL, OTHER THAN BIFOCAL	\$14.60	10/01/2016
92352	FITTING OF SPECTACLE PROSTHESIS FOR APHAKIA; MONOFOCAL	\$18.95	10/01/2016
92353	FITTING OF SPECTACLE PROSTHESIS FOR APHAKIA; MULTIFOCAL	\$18.95	10/01/2016
92370	REPAIR AND REFITTING SPECTACLES; EXCEPT FOR APHAKIA	\$12.74	10/01/2016

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92504	BINOCULAR MICROSCOPY (SEPARATE DIAGNOSTIC PROCEDURE)	\$18.02	10/01/2016
92511	NASOPHARYNGOSCOPY WITH ENDOSCOPE (SEPARATE PROCEDURE)	\$64.00	10/01/2016
92512	NASAL FUNCTION STUDIES (EG, RHINOMANOMETRY)	\$27.96	10/01/2016
92618	EVALUATION FOR PRESCRIPTION OF NON-SPEECH-GENERATING AUGMENTATIVE AND ALTERNATIV	\$0.62	10/01/2016
92950	CARDIOPULMONARY RESUSCITATION (EG, IN CARDIAC ARREST)	\$101.90	10/01/2016
92960	CARDIOVERSION, ELECTIVE, ELECTRICAL CONVERSION OF ARRHYTHMIA; EXTERNAL	\$73.00	10/01/2016
95144	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	\$8.08	10/01/2016
95145	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	\$16.15	10/01/2016
95146	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	\$31.37	10/01/2016
95147	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	\$27.96	10/01/2016
95148	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	\$42.87	10/01/2016
95149	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	\$58.71	10/01/2016
95165	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	\$8.39	10/01/2016
95170	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	\$5.59	10/01/2016
95180	RAPID DESENSITIZATION PROCEDURE, EACH HOUR (EG, INSULIN, PENICILLIN, EQUINE	\$28.27	10/01/2016
97597	DEBRIDEMENT (EG, HIGH PRESSURE WATERJET WITH/WITHOUT SUCTION, SHARP SELECTIVE DE	\$45.35	10/01/2016
97598	DEBRIDEMENT (EG, HIGH PRESSURE WATERJET WITH/WITHOUT SUCTION, SHARP SELECTIVE DE	\$11.81	10/01/2016
97605	NEGATIVE PRESSURE WOUND THERAPY (EG, VACUUM ASSISTED DRAINAGE COLLECTION),	\$13.98	10/01/2016
97606	NEGATIVE PRESSURE WOUND THERAPY (EG, VACUUM ASSISTED DRAINAGE COLLECTION),	\$18.64	10/01/2016
99170	EXAMINATION OF GENITAL AND ANAL REGION OF CHILD USING AN ENDOSCOPE, SUSPECTED TR	\$73.63	10/01/2016
99201	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, TYPICALLY 10 MINUTES	\$12.12	10/01/2016
99202	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, TYPICALLY 20 MINUTES	\$17.17	10/01/2016
99203	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, TYPICALLY 30 MINUTES	\$21.96	10/01/2016
99204	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, TYPICALLY 45 MINUTES	\$24.48	10/01/2016
99205	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, TYPICALLY 60 MINUTES	\$26.51	10/01/2016
99211	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLI	\$7.58	10/01/2016
99212	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, TYPICALLY 10 MINUTES	\$12.87	10/01/2016
99213	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, TYPICALLY 15 MINUTES	\$15.40	10/01/2016
99214	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT, VISIT TYPICALLY 25 MINUTES	\$20.45	10/01/2016
99215	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT, VISIT TYPICALLY 40 MINUTES	\$23.73	10/01/2016

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99241	PATIENT OFFICE CONSULTATION, TYPICALLY 15 MINUTES	\$11.87	10/01/2016
99242	PATIENT OFFICE CONSULTATION, TYPICALLY 30 MINUTES	\$16.67	10/01/2016
99243	PATIENT OFFICE CONSULTATION, TYPICALLY 40 MINUTES	\$21.20	10/01/2016
99244	PATIENT OFFICE CONSULTATION, TYPICALLY 60 MINUTES	\$23.18	10/01/2016
99245	PATIENT OFFICE CONSULTATION, TYPICALLY 80 MINUTES	\$26.00	10/01/2016
99291	CRITICAL CARE, EVALUATION AND MANAGEMENT OF THE CRITICALLY ILL OR CRITICALLY INJ	\$40.69	10/01/2016
99292	CRITICAL CARE, EVALUATION AND MANAGEMENT OF THE CRITICALLY ILL OR CRITICALLY	\$8.48	10/01/2016
99354	PROLONGED SERVICE IN THE OFFICE OR OTHER OUTPATIENT SETTING REQUIRING DIRECT PAT	\$5.66	10/01/2016
99355	PROLONGED SERVICE IN THE OFFICE OR OTHER OUTPATIENT SETTING REQUIRING DIRECT PAT	\$5.65	10/01/2016
99366	MEDICAL TEAM CONFERENCE WITH INTERDISCIPLINARY TEAM OF HEALTH CARE PROFESSIONALS	\$0.85	10/01/2016
99381	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AND MANAGEMENT OF AN INDIVI	\$24.68	10/01/2016
99382	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AND MANAGEMENT OF AN INDIVI	\$24.68	10/01/2016
99383	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AND MANAGEMENT OF AN INDIVI	\$24.42	10/01/2016
99384	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AND MANAGEMENT OF AN INDIVI	\$24.68	10/01/2016
99385	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AND MANAGEMENT OF AN INDIVI	\$24.42	10/01/2016
99386	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AND MANAGEMENT OF AN INDIVI	\$24.42	10/01/2016
99387	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AND MANAGEMENT OF AN INDIVI	\$27.31	10/01/2016
99391	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION INFANT YOUNGER THAN	\$21.54	10/01/2016
99392	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION, AGE 1 THROUGH 4 YE	\$21.53	10/01/2016
99393	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION, AGE 5 THROUGH 11 Y	\$21.27	10/01/2016
99394	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION, AGE 12 THROUGH 17	\$21.27	10/01/2016
99395	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION AGE 18-39 YEARS	\$21.27	10/01/2016
99396	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION AGE 40-64 YEARS	\$21.27	10/01/2016
99397	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION, AGE 65 YEARS AND O	\$24.68	10/01/2016
99401	PREVENTIVE MEDICINE COUNSELING AND/OR RISK FACTOR REDUCTION INTERVENTION(S) PROV	\$9.33	10/01/2016
99402	PREVENTIVE MEDICINE COUNSELING AND/OR RISK FACTOR REDUCTION INTERVENTION(S)	\$9.32	10/01/2016
99403	PREVENTIVE MEDICINE COUNSELING AND/OR RISK FACTOR REDUCTION INTERVENTION(S)	\$9.04	10/01/2016
99404	PREVENTIVE MEDICINE COUNSELING AND/OR RISK FACTOR REDUCTION INTERVENTION(S)	\$9.04	10/01/2016
99411	PREVENTIVE MEDICINE COUNSELING AND/OR RISK FACTOR REDUCTION INTERVENTION(S) PROV	\$6.78	10/01/2016
99412	PREVENTIVE MEDICINE COUNSELING AND/OR RISK FACTOR REDUCTION INTERVENTION(S)	\$6.78	10/01/2016

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G0102	PROSTATE CANCER SCREENING; DIGITAL RECTAL EXAMINATION	\$9.32	10/01/2016
G0104	COLORECTAL CANCER SCREENING; FLEXIBLE SIGMOIDOSCOPY	\$96.62	10/01/2016
G0105	COLORECTAL CANCER SCREENING; COLONOSCOPY ON INDIVIDUAL AT HIGH RISK	\$161.24	10/01/2016
G0121	COLORECTAL CANCER SCREENING; COLONOSCOPY ON INDIVIDUAL NOT MEETING CRITERIA FOR	\$161.23	10/01/2016
G0127	TRIMMING OF DYSTROPHIC NAILS, ANY NUMBER	\$13.36	10/01/2016
G0168	WOUND CLOSURE UTILIZING TISSUE ADHESIVE(S) ONLY	\$65.24	10/01/2016
G0186	DESTRUCTION OF LOCALIZED LESION OF CHOROID (FOR EXAMPLE, CHOROIDAL	\$39.53	10/01/2016
G0245	INITIAL PHYSICIAN EVALUATION AND MANAGEMENT OF A DIABETIC PATIENT WITH DIABETIC	\$19.88	10/01/2016
G0246	FOLLOW-UP PHYSICIAN EVALUATION AND MANAGEMENT OF A DIABETIC PATIENT WITH	\$14.60	10/01/2016
G0247	ROUTINE FOOT CARE BY A PHYSICIAN OF A DIABETIC PATIENT WITH DIABETIC SENSORY	\$43.18	10/01/2016
G0268	REMOVAL OF IMPACTED CERUMEN (ONE OR BOTH EARS) BY PHYSICIAN ON SAME DATE OF	\$17.09	10/01/2016
G0364	BONE MARROW ASPIRATION PERFORMED WITH BONE MARROW BIOPSY THROUGH THE SAME	\$3.11	10/01/2016