

Challis Area Health Center Fee Schedule Effective 10/1/2023

CPT	Description	2023/24 Fee
0001A	COVID-19 VACCINE ADMIN; PFIZER; FIRST DOSE	40
0002A	COVID-19 VACCINE ADMIN; PFIZER; SECOND DOSE	40
0003A	PFIZER; BOOSTER	40
0004A	PFIZER; BOOSTER #4	40
0011A	COVID-19 VACCINE ADMIN; MODERNA; FIRST DOSE	40
0012A	COVID-19 VACCINE ADMIN; MODERNA; SECOND DOSE	40
0013A	MODERNA; BOOSTER	40
0064A	MODERNA BOOSTER 4TH DOSE	40
0500F	INITIAL PRENATAL CARE VISIT	0
0502F	SUBSEQUENT PRENATAL CARE VISIT	0
0503F	POSTPARTUM CARE VISIT	0
1000F	TOBACCO USE ASSESSED	0
10060	INCISION & DRAINAGE ABSCESS SIMPLE/SINGLE	243
10061	INCISION & DRAINAGE ABSCESS COMPLICATED/MULTIPLE	416.67
10120	INCISION & REMOVAL FOREIGN BODY SUBQ TISS SIMPLE	291
10121	INCISION & REMOVAL FOREIGN BODY SUBQ TISS COMPL	536.11
10140	I&D HEMATOMA SEROMA/FLUID COLLECTION	300
10160	PUNCTURE ASPIRATION ABSCESS HEMATOMA BULLA/CYST	266
1034F	CURRENT TOBACCO SMOKER	0
1036F	CURRENT TOBACCO NON-USER	0
1090F	PRESENCE OR ABSENCE OF URINARY INCONTINENCE ASSESSED	0
1091F	URINARY INCONTINENCE CHARACTERIZED (EG, FREQUENCY, VOL	0
1100F	FALL SCREENING; MORE THAN 2 OR ANY WITH INJURY	0
1101F	FALL SCREENING; NO FALLS OR ONLY 1 W/O INJURY	0
11042	DEBRIDEMENT SUBCUTANEOUS TISSUE 20 SQ CM/<	225.26
11055	PARING/CUTTING BENIGN HYPERKERATOTIC LESION 1	124.83
11102	TANGENTIAL BIOPSY SKIN SINGLE LESION	200
11103	TANGENTIAL BIOPSY SKIN SINGLE EA SEP/ADDITIONAL LESION	107
11104	PUNCH BIOPSY SKIN SINGLE LESION	227
11105	PUNCH BIOPSY SKIN EA SEP/ADDITIONAL SINGLE LESION	122
11106	INCISIONAL BIOPSY SKIN SINGLE LESION	333.33
11107	INCISIONAL BIOPSY SKIN EA SEP/ADDITIONAL SINGLE LESION	181.94
1111F	MEDICATION RECONCILIATION AFTER DISCHARGE	0
11200	REMOVAL SKN TAGS MLT FIBRQ TAGS ANY AREA UPW/15	156.18
1123F	ADVANCE CARE PLANNING DISCUSSED AND DOCUMENTED	0
1124F	NO ADVANCED CARE PLANNING	0
1125F	PAIN SCALE GREATER THAN ZERO	0
1126F	PAIN SCALE EQUAL TO ZERO	0
11300	SHAVING SKIN LESION 1 TRUNK/ARM/LEG DIAM 0.5CM/<	177.27
11301	SHVG SKIN LESION 1 TRUNK/ARM/LEG DIAM 0.6-1.0 CM	232
11305	SHAVING SKIN LESION 1 S/N/H/F/G DIAM 0.5 CM/<	187.13
11306	SHAVING SKIN LESION 1 S/N/H/F/G DIAM 0.6-1.0 CM	214.92
11310	SHAVING SKIN LESION 1 F/E/E/N/L/M DIAM 0.5 CM/<	202.8
11311	SHVG SKIN LESION 1 F/E/E/N/L/M DIAM 0.6-1.0 CM	239.97

11400	EXC B9 LESION MRGN XCP SK TG T/A/L 0.5 CM/<	229
11402	EXC B9 LESION MRGN XCP SK TG T/A/L 1.1-2.0 CM	310
11403	EXC B9 LESION MRGN XCP SK TG T/A/L 2.1-3.0 CM	345
11420	EXC B9 LESION MRGN XCP SK TG S/N/H/F/G 0.5 CM/<	236.11
11421	EXC B9 LESION MRGN XCP SK TG S/N/H/F/G 0.6-1.0CM	322
11422	EXC B9 LESION MRGN XCP SK TG S/N/H/F/G 1.1-2.0CM	327
11441	EXC B9 LES MRGN XCP SK TG F/E/E/N/L/M 0.6-1.0CM	338.89
1157F	ADVANCE CARE PLAN/SIMILAR LEGAL DOCUMENT PRESENT IN C	0
1159F	MEDICATION LIST IN CHART	0
11602	EXCISION MAL LESION TRUNK/ARM/LEG 1.1-2.0 CM	435
11603	EXCISION MAL LESION TRUNK/ARM/LEG 2.1 TO 3.0 CM	495
1160F	MEDICATION REVIEWED	0
11621	EXCISION MALIGNANT LESION S/N/H/F/G 0.6-1.0 CM	398.79
11622	EXCISION MALIGNANT LESION S/N/H/F/G 1.1-2.0 CM	448.61
1170F	FUNCTIONAL STATUS ASSESSED	0
11719	TRIMMING NONDYSTROPHIC NAILS ANY NUMBER	42
11720	DEBRIDEMENT NAIL ANY METHOD 1-5	65
11730	AVULSION NAIL PLATE PARTIAL/COMPLETE SIMPLE 1	205
11732	AVULSION NAIL PLATE PARTIAL/COMP SIMPLE EA ADDL	95
11740	EVACUATION SUBUNGUAL HEMATOMA	108.33
11765	WEDGE EXCISION SKIN NAIL FOLD	289.15
11981	INSJ NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	273
11982	REMOVAL NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	304
12001	SIMPLE REPAIR SCALP/NECK/AX/GENIT/TRUNK 2.5CM/<	225
12002	SMPLE REPAIR SCALP/NECK/AX/GENIT/TRUNK 2.6-7.5CM	322
12004	SIMPLE RPR SCALP/NECK/AX/GENIT/TRUNK 7.6-12.5CM	510
12005	SMPLE RPR SCALP/NECK/AX/GENIT/TRUNK 12.6-20.0CM	587.5
12011	SIMPLE REPAIR F/E/E/N/L/M 2.5CM/<	313
12013	SIMPLE REPAIR F/E/E/N/L/M 2.6CM-5.0 CM	345
12031	REPAIR INTERMEDIATE WOUNDS OF SCALP, AXILLAE, TRUNK ANI	507
12032	REPAIR INTERMEDIATE S/A/T/E 2.6-7.5 CM	550
12035	REPAIR INTERMEDIATE S/A/T/E 12.6-20.0CM	841.67
12041	REPAIR INTERMEDIATE N/H/F/XTRNL GENT 2.5CM/<	477.78
12042	REPAIR INTERMEDIATE N/H/F/XTRNL GENT 2.6-7.5 CM	600
12051	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 2.5 CM/<	548
12052	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 2.6-5.0 CM	616
1220F	PATIENT SCREENED FOR DEPRESSION	0
16000	INITIAL TX 1ST DEGREE BURN LOCAL TX	150
16020	DRS&/DBRDMT PRTL-THKNS BURNS 1ST/SBSQ SMALL	275
16030	DRS&/DBRDMT PRTL-THKNS BURNS 1ST/SBSQ LARGE	547.22
17000	DESTRUCTION PREMALIGNANT LESION 1ST	139
17003	DESTRUCTION PREMALIGNANT LESION 2-14 EA	22
17004	DESTRUCTION PREMALIGNANT LESION 15/>	320
17110	DESTRUCTION BENIGN LESIONS UP TO 14	216
20103	EXPLORATION PENETRATING WOUND SPX EXTREMITY	1459.27
20550	INJECTION 1 TENDON SHEATH/LIGAMENT APONEUROSIS	152
20552	INJECTION SINGLE/MLT TRIGGER POINT 1/2 MUSCLES	184

20553	INJECTION SINGLE/MLT TRIGGER POINT 3/> MUSCLES	125
20600	ARTHROCENTESIS ASPIR&/INJ SMALL JT/BURSA W/O US	139
20605	ARTHROCENTESIS ASPIR&/INJ INTERM JT/BURS W/O US	153
20610	ARTHROCENTESIS ASPIR&/INJ MAJOR JT/BURSA W/O US	200
20612	ASPIRATION&/INJECTION GANGLION CYST ANY LOCATJ	154
21931	EXCISION TUMOR SOFT TIS BACK/FLANK SUBQ 3 CM/>	1241.03
23330	REMOVAL FOREIGN BODY SHOULDER SUBCUTANEOUS	520.94
23650	CLSD TX SHOULDER DISLC W/MANIPULATION W/O ANES	1707
26770	CLTX IPHAL JT DISLC W/MANJ W/O ANES	1146.75
27372	REMOVAL FOREIGN BODY DEEP THIGH/KNEE	1739.5
28660	CLTX INTERPHALANGEAL JOINT DISLOCATION W/O ANES	322.01
29065	APPLICATION CAST SHOULDER HAND LONG ARM	302
29075	APPLICATION CAST ELBOW FINGER SHORT ARM	221
29085	APPLICATION CAST HAND & LOWER FOREARM GAUNTLET	232.45
29105	APPLICATION LONG ARM SPLINT SHOULDER HAND	225
29125	APPLICATION SHORT ARM SPLINT FOREARM-HAND STATIC	179
29130	APPLICATION OF FINGER SPLINT	85
29260	STRAPPING ELBOW/WRIST	96.85
29405	APPLICATION SHORT LEG CAST BELOW KNEE-TOE	201
29505	APPLICATION LONG LEG SPLINT THIGH ANKLE/TOES	197.58
29515	APPLICATION OF SHORT LEG SPLINT	173
29580	STRAPPING UNNA BOOT	110.39
29581	APPL MLTLAYR COMPRES LEG BELOW KNEE W/ANKLE FOOT	164.85
3008F	BMI SCREENINGS	0
30100	BIOPSY INTRANASAL	272.48
3014F	SCREENING FOR MAMMO DOCUMENTED AND REVIEWED	0
3015F	CERVICAL CANCER SCREENING RESULTS DOCUMENTED AND REV	0
3017F	COLORECTAL CA SCREEN DOCUMENTED AND REVIEWED	0
30300	REMOVAL FOREIGN BODY INTRANASAL OFFICE PROCEDURE	499.57
3044F	DIABETES: A1C LESS THAN 7.0%	0
3046F	DIABETES: A1C CONTROL MOST RECENT >9.0%	0
3048F	DBP < 80 MMHG	0
3051F	DIABETES: AIC >7.0% AND <8.0%	0
3052F	DIABETES: A1C >8.0% AND <9.0%	0
3074F	BLOOD PRESSURE LESS THAN 130	0
3075F	SBP 130-139 MMHG	0
3077F	SBP > = 140 MMHG	0
3078F	DBP < 80MMHG	0
3079F	DBP 80-89 MMHG	0
3080F	DBP > = 90 MMHG	0
30901	CONTROL NASAL HEMORRHAGE ANTERIOR SIMPLE	285
30903	CONTROL NASAL HEMORRHAGE ANTERIOR COMPLEX	429.84
30905	CTRL NSL HEMRRG PST NASAL PACKS&/CAUTERY 1ST	613.71
30906	CTRL NSL HEMRRG PST NASAL PACKS&/CAUTERY SUBSQ	646.28
31500	INTUBATION ENDOTRACHEAL EMERGENCY PROCEDURE	1073
3288F	STEADI FALL RISK OR MORSE FALL SCALE	0
36000	INTRODUCTION NEEDLE/INTRACATHETER VEIN	60

36410	VNPNXR 3 YEARS/> PHYS/QHP SKILL	35.17
36415	COLLECTION VENOUS BLOOD VENIPUNCTURE	15
36415,MCAID1	VENIPUNCTURE MEDICAID OUR ORDER	0
36415,MCAID2	VENIPUNCTURE MEDICAID OUTSIDE ORDER	0
36415,MCARE1	VENIPUNCTURE MEDICARE OUR ORDER	0
36415,MCARE2	VENIPUNCTURE MEDICARE OUTSIDE ORDER	0
36416	COLLECTION CAPILLARY BLOOD SPECIMEN	11
36416,MCAID1	CAPILLARY BLOOD SPECIMEN MEDICAID INHOUSE ORDER	0
36416,MCAID2	CAPILLARY BLOOD SPECIMEN MEDICAID OUTSIDE ORDER	0
36416,MCARE1	CAPILLARY BLOOD SPECIMEN MEDICARE INHOUSE ORDER	0
36416,MCARE2	CAPILLARY BLOOD SPECIMEN MEDICARE OUTSIDE ORDER	0
36591	COLLECT BLOOD FROM IMPLANT VENOUS ACCESS DEVICE	58.22
36680	PLACEMENT NEEDLE INTRAOSSEOUS INFUSION	226.81
3725F	PHQ 9/ GAD 7/GERIATRIC DEP SCALE/EPDS/PSC-17-PERFORMED	0
40800	DRG ABSC CST HMTMA VESTIBULE MOUTH SMPL	354.81
49422	REMOVAL TUNNELED INTRAPERITONEAL CATHETER	1154.5
51701	INSJ NON-NDWELLG BLADDER CATHETER	151.09
51702	INSJ TEMP NDWELLG BLADDER CATHETER SIMPLE	214.37
51705	CHANGE CYSTOSTOMY TUBE SIMPLE	259.57
54161	CIRCUMCISION AGE >28 DAYS	574.71
57160	FIT&INSJ PESSARY/OTH INTRAVAGINAL SUPPORT DEVICE	174.43
58301	REMOVAL INTRAUTERINE DEVICE IUD	227
59425	ANTEPARTUM CARE ONLY 4-6 VISITS	985
59426	ANTEPARTUM CARE ONLY 7/> VISITS	1737.56
59430	POSTPARTUM CARE ONLY SEPARATE PROCEDURE	451.53
59510	OB ANTEPARTUM CARE CESAREAN DLVR & POSTPARTUM	4456.94
64450	INJECTION ANES OTHER PERIPHERAL NERVE/BRANCH	265
65220	RMVL FB XTRNL EYE CORNEAL W/O SLIT LAMP	184.67
65222	RMVL FB XTRNL EYE CORNEAL W/SLIT LAMP	160
67820	CORRECTION TRICHIASIS EPILATION FORCEPS ONLY	121.39
67938	REMOVAL EMBEDDED FOREIGN BODY EYELID	476.14
69200	RMVL FB XTRNL AUDITORY CANAL W/O ANES	269
69209	REMOVAL IMPACTED CERUMEN IRRIGATION/LVG UNILAT	38
69210	REMOVAL IMPACTED CERUMEN INSTRUMENTATION UNILAT	134
70110	RADIOLOG EXAM MANDIBLE COMPL MINIMUM 4 VIEWS	104.91
70140	RADIOLOGIC EXAM,FACIAL BONES LESS T	106.19
70140,MCAID1	XR FACE MEDICAID INHOUSE ORDER	0
70140,MCAID2	XR FACE MEDICAID OUTSIDE ORDER	0
70140,MCARE1	XR FACIAL BONES MEDICARE INHOUSE	0
70140,MCARE2	XR FACIAL BONES MEDICARE OUTSIDE ORDER	0
70150	RADEX FACIAL BONES COMPLETE MINIMUM 3 VIEWS	127.94
70150,MCAID1	XR FACE 3V MEDICAID INHOUSE ORDER	0
70150,MCAID2	XR FACE 3V MEDICAID OUTSIDE ORDER	0
70150,MCARE1	XR FACE 3V MEDICARE INHOUSE ORDER	0
70150,MCARE2	XR FACE 3V MEDICARE OUTSIDE ORDER	0
70200	RADIOLOG EXAM MANDIBLE COMPL MINIMUM 4 VIEWS	124.1
70250	RADIOLOGIC EXAMINATION SKULL 4/> VIEWS	101.07

70250,MCAID1	XR SKULL 4V MEDICAID INSIDE ORDER	0
70250,MCAID2	XR SKULL 4V MEDICAID OUTSIDE ORDER	0
70250,MCARE1	XR SKULL 4V MEDICARE INSIDE ORDER	0
70250,MCARE2	XR SKULL 4V MEDICARE OUTSIDE ORDER	0
71045	RADIOLOGIC EXAM CHEST SINGLE VIEW	76.76
71046	RADIOLOGIC EXAM CHEST 2 VIEWS	80
71046,MCAID1	RADIOLOGIC EXAM CHEST 2 VIEWS; MEDICAID OUR ORDER	0
71046,MCAID2	RADIOLOGIC EXAM CHEST 2 VIEWS; MEDICAID OUTSIDE ORDER	0
71046,MCARE1	RADIOLOGIC EXAM CHEST 2 VIEWS; MEDICARE OUR ORDER	0
71046,MCARE2	RADIOLOGIC EXAM CHEST 2 VIEWS; MEDICARE OUTSIDE ORDER	0
71047	RADIOLOGIC EXAM CHEST 3 VIEWS	150.97
71100	RADEX RIBS UNILATERAL 2 VIEWS	97.24
71100,MCAID1	XR UNILAT RIBS 2V MEDICAID INHOUSE ORDER	0
71100,MCAID2	XR UNILAT RIBS 2V MEDICAID OUTSIDE ORDER	0
71100,MCARE1	XR UNILAT RIBS 2V MEDICARE INSIDE ORDER	0
71100,MCARE2	XR UNILAT RIBS 2V MEDICARE OUTSIDE ORDER	0
71101	RADEX RIBS UNI W/POSTEROANT CH MINIMUM 3 VIEWS	94
71110	RADEX RIBS BILATERAL 3 VIEWS	120.26
71110,MCAID1	XR BILAT RIBS 3V MEDICAID INHOUSE ORDER	0
71110,MCAID2	XR BILAT RIBS 3V MEDICAID OUTSIDE ORDER	0
71110,MCARE1	XR BILAT RIBS 3V MEDICARE INHOUSE ORDER	0
71110,MCARE2	XR BILAT RIBS 3V MEDICARE OUTSIDE ORDER	0
72020	RADEX SPINE 1 VIEW SPECIFY LEVEL	65
72040	RADEX SPINE CERVICAL 2 OR 3 VIEWS	100
72040,MCAID1	XR C SPINE 2-3V MEDICAID INHOUSE ORDER	0
72040,MCAID2	XR C SPINE 2-3V MEDICAID OUTSIDE ORDER	0
72040,MCARE1	XR C SPINE 2-3V MEDICARE INHOUSE ORDER	0
72040,MCARE2	XR C SPINE 2-3V MEDICARE OUTSIDE ORDER	0
72050	RADEX SPINE CERVICAL 4 OR 5 VIEWS	155
72050,MCAID1	XR C SPINE 4-5V MEDICAID INHOUSE ORDER	0
72050,MCAID2	XR C SPINE 4-5V MEDICAID OUTSIDE ORDER	0
72050,MCARE1	XR C SPINE 4-5V MEDICARE INHOUSE ORDER	0
72050,MCARE2	XR C SPINE 4-5V MEDICARE OUTSIDE ORDER	0
72052	RADEX SPINE CERVICAL 6 OR MORE VIEWS	179.12
72070	RADEX SPINE THORACIC 2 VIEWS	80
72070,MCAID1	XR 2V THORACIC MEDICAID INHOUSE ORDER	0
72070,MCAID2	XR 2V THORACIC MEDICAID OUTSIDE ORDER	0
72070,MCARE1	XR 2V THORACIC MEDICARE INHOUSE ORDER	0
72070,MCARE2	XR 2V THORACIC MEDICARE OUTSIDE ORDER	0
72074,MCAID1	XR THORACIC 4V MEDICAID INHOUSE ORDER	0
72074,MCAID2	XR THORACIC 4V MEDICAID OUTSIDE ORDER	0
72074,MCARE1	XR THORACIC 4V MEDICARE INHOUSE ORDER	0
72074,MCARE2	XR THORACIC 4V MEDICARE OUTSIDE ORDER	0
72082	RADEX ENTIR THRC LMBR CRV SAC SPI W/SKULL 2/3 VW	253
72100	RADEX SPINE LUMBOSACRAL 2/3 VIEWS	103
72100,MCAID1	XR 2V LUMBAR MEDICAID INHOUSE ORDER	0
72100,MCAID2	XR 2V LUMBAR MEDICAID OUTSIDE ORDER	0

72100,MCARE1	XR 2V LUMBAR MEDICARE INHOUSE ORDER	0
72100,MCARE2	XR 2V LUMBAR MEDICARE OUTSIDE ORDER	0
72110	RADEX SPINE LUMBOSACRAL MINIMUM 4 VIEWS	182
72114	RADEX SPINE LUMBSACL COMPL W/BENDING VIEWS MIN 6	181
72114,MCAID1	XR LUMBAR 4V W/ BEND MEDICAID INHOUSE ORDER	0
72114,MCAID2	XR LUMBAR 4V W/ BEND MEDICAID OUTSIDE ORDER	0
72114,MCARE1	XR LUMBAR 4V W/ BEND MEDICARE INHOUSE ORDER.	0
72114,MCARE2	XR LUMBAR 4V W/ BEND MEDICARE OUTSIDE ORDER	0
72170	RADIOLOGIC EXAMINATION PELVIS 1/2 VIEWS	78
72170,MCAID1	XR PELVIS MEDICAID INHOUSE ORDER	0
72170,MCAID2	XR PELVIS MEDICAID OUTSIDE ORDER	0
72170,MCARE1	XR PELVIS MEDICARE INHOUSE ORDER	0
72170,MCARE2	XR PELVIS MEDICARE OUTSIDE ORDER	0
72202,MCAID1	XR SACROILIAC 3V OR MORE, MEDICAID OUR ORDER	0
72202,MCAID2	XR SACROILIAC 3V OR MORE, MEDICAID OUTSIDE ORDER	0
72202,MCARE1	XR SACROILIAC 3V OR MORE, MEDICARE OUR ORDER	0
72202,MCARE2	XR SACROILIAC 3V OR MORE, MEDICARE OUTSIDE ORDER	0
72220	RADEX SACRUM & COCCYX MINIMUM 2 VIEWS	84
73000	RADEX CLAVICLE COMPLETE	74
73000,MCAID1	XR CLAVICLE COMP MEDICAID INHOUSE ORDER	0
73000,MCAID2	XR CLAVICLE COMP MEDICAID OUTSIDE ORDER	0
73000,MCARE1	XR CLAVICLE COMPLETE MEDICARE INHOUSE ORDER	0
73000,MCARE2	XR CLAVICLE COMPLETE MEDICARE OUTSIDE ORDER	0
73020	RADEX SHOULDER 1 VIEW	75.49
73030	RADEX SHOULDER COMPLETE MINIMUM 2 VIEWS	83
73030,MCAID1	XR SHOULDER 2V MEDICAID INHOUSE ORDER	0
73030,MCAID2	XR SHOULDER 2V MEDICAID OUTSIDE ORDER	0
73030,MCARE1	XR SHOULDER 2V MEDICARE INHOUSE ORDER	0
73030,MCARE2	XR SHOULDER 2V MEDICARE OUTSIDE ORDER	0
73050	X-RAY ACROMIOCLAVICULAR JOINTS, BILAT, 2 VIEWS	105
73050,MCAID1	XR AC BILAT 2V MEDICAID INHOUSE ORDER	0
73050,MCAID2	XR AC JOINT 2V MEDICAID OUTSIDE ORDER	0
73050,MCARE1	XR AC BILAT 2V MEDICARE INHOUSE	0
73050,MCARE2	XR AC BILAT 2V MEDICARE OUTSIDE ORDER	0
73060	RADEX HUMERUS MINIMUM 2 VIEWS	84
73060,MCAID1	XR HUMERUS 2V MEDICAID INHOUSE ORDER	0
73060,MCAID2	XR HUMERUS 2V MEDICAID OUTSIDE ORDER	0
73060,MCARE1	XR HUMERUS 2V MEDICARE INHOUSE ORDER	0
73060,MCARE2	XR HUMERUS 2V MEDICARE OUTSIDE ORDER	0
73070	RADEX ELBOW 2 VIEWS	75
73070,MCAID1	XR ELBOW 2V MEDICAID INHOUSE ORDER	0
73070,MCAID2	XR ELBOW 2V MEDICAID OUTSIDE ORDER	0
73070,MCARE1	XR ELBOW 2V MEDICARE INHOUSE ORDER	0
73070,MCARE2	XR ELBOW 2V MEDICARE OUTSIDE ORDER	0
73080	RADEX ELBOW COMPLETE MINIMUM 3 VIEWS	86
73090	RADEX FOREARM 2 VIEWS	85
73090,MCAID1	XR FOREARM 2V MEDICAID INHOUSE ORDER	0

73090,MCAID2	XR FOREARM 2V MEDICAID OUTSIDE ORDER	0
73090,MCARE1	XR FOREARM 2V MEDICARE INHOUSE ORDER	0
73090,MCARE2	XR FOREARM 2V MEDICARE OUTSIDE ORDER	0
73100	RADEX WRIST 2 VIEWS	80
73100,MCAID1	XR WRIST 2V MEDICAID INHOUSE ORDER	0
73100,MCAID2	XR WRIST 2V MEDICAID OUTSIDE ORDER	0
73100,MCARE1	XR WRIST 2V MEDICARE INHOUSE ORDER	0
73100,MCARE2	XR WRIST 2V MEDICARE OUTSIDE ORDER	0
73110	RADEX WRIST COMPLETE MINIMUM 3 VIEWS	96
73110,MCAID1	XR WRIST 3V MEDICAID INHOUSE ORDER	0
73110,MCAID2	XR WRIST 3V MEDICAID OUTSIDE ORDER	0
73110,MCARE1	XR WRIST 3V MEDICARE INHOUSE ORDER	0
73110,MCARE2	XR WRIST 3V MEDICARE OUTSIDE ORDER	0
73120	RADEX HAND 2 VIEWS	70
73120,MCAID1	XR HAND 2V MEDICAID INHOUSE ORDER	0
73120,MCAID2	XR HAND 2V MEDICAID OUTSIDE ORDER	0
73120,MCARE1	XR HAND 2V MEDICARE INHOUSE ORDER	0
73120,MCARE2	XR HAND 2V MEDICARE OUTSIDE ORDER	0
73130	RADEX HAND MINIMUM 3 VIEWS	84
73130,MCAID1	XR HAND 3V MEDICAID INHOUSE ORDER	0
73130,MCAID2	XR HAND 3V MEDICAID OUTSIDE ORDER	0
73130,MCARE1	XR HAND 3V MEDICARE INHOUSE ORDER	0
73130,MCARE2	XR HAND 3V MEDICARE OUTSIDE ORDER	0
73140	RADEX FINGER MINIMUM 2 VIEWS	82
73140,MCARE1	XR FINGER 2V MEDICARE INHOUSE ORDER	0
73140,MCARE2	XR FINGER 2V MEDICARE OUTSIDE ORDER	0
73501	RADEX HIP UNILATERAL WITH PELVIS 1 VIEW	102.35
73501,MCAID1	XR HIP MEDICAID INHOUSE ORDER	0
73501,MCAID2	XR HIP MEDICAID OUTSIDE ORDER	0
73501,MCARE1	XR HIP MEDICARE INHOUSE ORDER	0
73501,MCARE2	XR HIP MEDICARE OUTSIDE ORDER	0
73502	RADEX HIP UNILATERAL WITH PELVIS 2-3 VIEWS	105
73502,MCAID1	XR HIP 2V MEDICAID INHOUSE ORDER	0
73502,MCAID2	XR HIP 2V MEDICAID OUTSIDE ORDER	0
73502,MCARE1	XR HIP 2V MEDICARE INHOUSE ORDER	0
73502,MCARE2	XR HIP 2V MEDICARE OUTSIDE ORDER	0
73503	RADEX HIP UNILATERAL WITH PELVIS MINIMUM 4 VIEWS	177.84
73521	RADEX HIPS BILATERAL WITH PELVIS 2 VIEWS	100
73521,MCAID1	XR BILAT HIP W/ PELVIS MEDICAID INHOUSE ORDER	0
73521,MCAID2	XR BILAT HIP W/ PELVIS MEDICAID OUTSIDE ORDER	0
73521,MCARE1	XR BILAT HIP W/ PELVIS MEDICARE INHOUSE ORDER	0
73521,MCARE2	XR BILAT HIP W/ PELVIS MEDICARE OUTSIDE ORDER	0
73522	RADEX HIPS BILATERAL WITH PELVIS 3-4 VIEWSS	168.88
73523	RADEX HIPS BILATERAL WITH PELVIS MINIMUM 5 VIEWS	195.75
73551	RADIOLOGIC EXAMINATION FEMUR 1 VIEW	95.96
73552	RADIOLOGIC EXAMINATION FEMUR MINIMUM 2 VIEWS	89
73552,MCAID1	XR FEMUR MEDICAID INHOUSE ORDER	0

73552,MCAID2	XR FEMUR MEDICAID OUTSIDE ORDER	0
73552,MCARE1	XR FEMUR MEDICARE INHOUSE ORDER	0
73552,MCARE2	XR FEMUR MEDICARE OUTSIDE ORDER	0
73560	RADIOLOGIC EXAMINATION KNEE 1/2 VIEWS	87
73560,MCAID1	XR KNEE 2V MEDICAID INHOUSE ORDER	0
73560,MCAID2	XR KNEE 2V MEDICAID OUTSIDE ORDER	0
73560,MCARE1	XR KNEE 2V MEDICARE INHOUSE ORDER	0
73560,MCARE2	XR KNEE 2V MEDICARE OUTSIDE ORDER	0
73562	RADIOLOGIC EXAMINATION KNEE 3 VIEWS	110
73562,MCAID1	XR KNEE 3V MEDICAID INHOUSE ORDER	0
73562,MCAID2	XR KNEE 3V MEDICAID OUTSIDE ORDER	0
73562,MCARE1	XR KNEE 3V MEDICARE INHOUSE ORDER	0
73562,MCARE2	XR KNEE 3V MEDICARE OUTSIDE ORDER	0
73590	RADIOLOGIC EXAMINATION TIBIA & FIBULA 2 VIEWS	80
73590,MCAID1	XR TIB/FIB MEDICAID INHOUSE ORDER	0
73590,MCAID2	XR TIB/FIB MEDICAID OUTSIDE ORDER	0
73590,MCARE1	XR TIB/FIB MEDICARE INHOUSE ORDER	0
73590,MCARE2	XR TIB/FIB MEDICARE OUTSIDE ORDER	0
73600	RADIOLOGIC EXAMINATION ANKLE 2 VIEWS	80
73600,MCAID1	XR ANKLE 2V MEDICAID INHOUSE ORDER	0
73600,MCAID2	XR ANKLE 2V MEDICAID OUTSIDE ORDER	0
73600,MCARE1	XR ANKLE 2V MEDICARE INHOUSE ORDER	0
73600,MCARE2	XR ANKLE 2V MEDICARE OUTSIDE ORDER	0
73610	RADEX ANKLE COMPLETE MINIMUM 3 VIEWS	93
73610,MCAID1	XR ANKLE 3V MEDICAID INHOUSE ORDER	0
73610,MCAID2	XR ANKLE 3V MEDICAID OUTSIDE ORDER	0
73610,MCARE1	XR ANKLE 3V MEDICARE INHOUSE ORDER	0
73610,MCARE2	XR ANKLE 3V MEDICARE OUTSIDE ORDER	0
73620	RADIOLOGIC EXAMINATION FOOT 2 VIEWS	83
73620,MCAID1	XR FOOT 2V MEDICAID INHOUSE ORDER	0
73620,MCAID2	XR FOOT 2V MEDICAID OUTSIDE ORDER	0
73620,MCARE1	XR FOOT 2V MEDICARE INHOUSE ORDER	0
73620,MCARE2	XR FOOT 2V MEDICARE OUTSIDE ORDER	0
73630	RADEX FOOT COMPLETE MINIMUM 3 VIEWS	90
73630,MCAID1	XR FOOT 3V MEDICAID INHOUSE ORDER	0
73630,MCAID2	XR FOOT 3V MEDICAID OUTSIDE ORDER	0
73630,MCARE1	XR FOOT 3V MEDICARE INHOUSE ORDER	0
73630,MCARE2	XR FOOT 3V MEDICARE OUTSIDE ORDER	0
73650	RADEX CALCANEUS MINIMUM 2 VIEWS	103
73650,MCAID1	XR CALCANEUS MEDICAID INHOUSE ORDER	0
73650,MCAID2	XR CALCANEUS MEDICAID OUTSIDE ORDER	0
73650,MCARE1	XR CALCANEUS MEDICARE INHOUSE ORDER	0
73650,MCARE2	XR CALCANEUS MEDICARE OUTSIDE ORDER	0
73660	RADEX TOE MINIMUM 2 VIEWS	80
73660,MCAID1	XR TOE MEDICAID INHOUSE ORDER	0
73660,MCAID2	XR TOE MEDICAID OUTSIDE ORDER	0
73660,MCARE1	XR TOE MEDICARE INHOUSE ORDER	0

73660,MCARE2	XR TOE MEDICARE OUTSIDE ORDER	0
74018	RADIOLOGIC EXAM, 1V ABD	60
74018,MCAID1	XR ABD MEDICAID INHOUSE ORDER	0
74018,MCAID2	XR ABD MEDICAID OUTSIDE ORDER	0
74018,MCARE1	XR ABD MEDICARE INHOUSE ORDER	0
74018,MCARE2	XR ABD MEDICARE OUTSIDE ORDER	0
74019	RADIOLOGIC EXAM ABDOMEN 2 VIEWS	75.57
74021	RADIOLOGIC EXAM ABDOMEN 3+ VIEWS	150.97
80048	BASIC METABOLIC PANEL CALCIUM TOTAL	48
80050	GENERAL HEALTH PANEL	118
80053	COMPREHENSIVE METABOLIC PANEL	53
80053,MCAID1	CMP MEDICAID INHOUSE ORDER	0
80053,MCAID2	CMP MEDICAID OUTSIDE ORDER	0
80053,MCARE1	CMP MEDICARE INHOUSE ORDER	0
80053,MCARE2	CMP MEDICARE OUTSIDE ORDER	0
80061	LIPID PANEL	57
80069	RENAL FUNCTION PANEL	51
80074	ACUTE HEPATITIS PANEL	98.25
80076	HEPATIC FUNCTION PANEL	56
80081	OBSTETRIC PANEL	300
80156	DRUG ASSAY CARBAMAZEPINE TOTAL	72.79
80162	DRUG SCREEN QUANTITATIVE DIGOXIN TOTAL	60
80164	DRUG ASSAY VALPROIC DIPROPYLACETIC ACID TOTAL	73.77
80165	DRUG SCREEN QUANT DIPROPYLACETIC ACID FREE	61.97
80175	DRUG SCREEN QUANTITATIVE LAMOTRIGINE	76.72
80178	DRUG SCREEN QUANTITATIVE LITHIUM	48
80185	DRUG SCREEN QUANTITATIVE PHENYTOIN TOTAL	65.9
80197	DRUG SCREEN QUANTITATIVE TACROLIMUS	50
80202	DRUG SCREEN QUANTITATIVE VANCOMYCIN	80.66
80299	QUANTITATION DRUG NOT ELSEWHERE SPECIFIED	84.59
80305	DRUG TEST PRSMV READ DIRECT OPTICAL OBS PR DATE	42
80307	DRUG TST PRSMV INSTRMNT CHEM ANALYZERS PR DATE	256
80320	DRUG SCREEN QUANTITATIVE ALCOHOLS	49.18
80323	ALKALOIDS NOT OTHERWISE SPECIFIED	94.43
80326	DRUG SCREEN QUANT AMPHETAMINES 5 OR MORE	38.36
80329	DRUG SCREEN ANALGESICS NON-OPIOID 1 OR 2	74.75
80332	ANTIDEPRESSANTS SEROTONERGIC CLASS 1 OR 2	62.95
80337	ANTIDEPRESSANTS TRICYCLIC OTHER CYCLICALS 6/MORE	93.44
80338	ANTIDEPRESSANTS NOT OTHERWISE SPECIFIED	58.03
80339	ANTIEPILEPTICS NOT OTHERWISE SPECIFIED 1-3	56.07
80342	ANTIPSYCHOTICS NOT OTHERWISE SPECIFIED 1-3	58.03
80345	DRUG SCREENING BARBITURATES	74.75
80358	DRUG SCREENING METHADONE	63.93
80361	DRUG SCREENING OPIATES 1 OR MORE	120.98
80363	DRUG SCREENING OPIOIDS AND OPIATE ANALOGS 3 OR 4	148.53
80365	DRUG SCREENING OXYCODONE	68.85
80368	DRUG SCREENING SEDATIVE HYPNOTICS	72.79

80370	DRUG SCREENING SKEL MUSCLE RELAXANTS 3 OR MORE	50.16
80377	DRUG/SUBSTANCE DEFINITIVE QUAL/QUANT NOS 7/MORE	71.8
81001	URNLS DIP STICK/TABLET REAGENT AUTO MICROSCOPY	26
81002	URNLS DIP STICK/TABLET RGNT NON-AUTO W/O MICRSCP	13
81002,MCAID1	UA MEDICAID INHOUSE ORDER	0
81002,MCAID2	UA MEDICAID OUTSIDE ORDER	0
81002,MCARE1	UA MEDICARE INHOUSE ORDER	0
81002,MCARE2	UA MEDICARE OUTSIDE ORDER	0
81025	URINE PREGNANCY TEST VISUAL COLOR CMPRSN METHS	24
81025,MCAID1	URINE PREGNANCY MEDICAID INHOUSE ORDER	0
81025,MCAID2	URINE PREGNANCY MEDICAID OUTSIDE ORDER	0
81025,MCARE1	URINE PREGNANCY MEDICARE INHOUSE ORDER	0
81025,MCARE2	URINE PREGNANCY MEDICARE OUTSIDE ORDER	0
81162	BRCA1&BRCA2 FULL SEQ ANALYS/FULL DUP/DEL ANALYS	2508.21
81240	F2 GENE ANALYSIS 20210G >A VARIANT	137.71
81241	F5 COAGULATION FACTOR V ANAL LEIDEN VARIANT	153.44
81256	HFE HEMOCHROMATOSIS GENE ANAL COMMON VARIANTS	366.89
81270	JAK2 GENE ANALYSIS P.VAL617PHE VARIANT	342.3
82024	ADRENOCORTICOTROPIC HORMONE ACTH	154.43
82040	ALBUMIN SERUM PLASMA/WHOLE BLOOD	23
82040,MCAID1	ALBUMIN MEDICAID INHOUSE ORDER	0
82040,MCARE1	ALBUMIN MEDICARE INHOUSE ORDER	0
82043	URINE ALBUMIN QUANTITATIVE	46
82075	ASSAY OF ALCOHOL BREATH	50
82075,BMR	BAT BLUE MTN REFUSE	50
82075,BPH	BREATH ETOH BENGAL PHARMACY	50
82075,CITY	BAT CITY OF CHALLIS	50
82075,RNB	CUSTER CO ROAD AND BRIDGE ALCOHOL TESTING	50
82075,SAFE	BREATH ALCOHOL TEST FOR SAFE HAVEN	50
82075,SRE	BAT SALMON RIVER ELECTRIC	50
82085	ASSAY OF ALDOLASE	52.13
82105	ALPHA-FETOPROTEIN SERUM	85
82107	AFP-L3 FRACTION ISOFORM & TOTAL AFP W/RATIO	188.85
82140	ASSAY OF AMMONIA	59.02
82150	ASSAY OF AMYLASE	51
82150,MCAID1	AMYLASE MEDICAID INHOUSE ORDER	0
82150,MCARE1	AMYLASE MEDICARE INHOUSE ORDER	0
82172	APOLIPOPROTEIN EACH	34.43
82175	ASSAY OF ARSENIC	89.51
82232	BETA-2 MICROGLOBULIN	82.62
82247	BILIRUBIN TOTAL	20
82247,MCAID1	BILIRUBIN TOTAL MEDICAID INHOUSE ORDER	0
82247,MCARE1	BILIRUBIN, TOTAL MEDICARE INHOUSE ORDER	0
82248	BILIRUBIN DIRECT	30
82270	BLOOD OCCULT PEROXIDASE ACTV QUAL FECES 1 DETER	30
82274	BLOOD OCCULT FECAL HGB DETER IA QUAL FECES 1-3	30
82274,MCAID1	BLOOD OCCULT FECAL MEDICAID INHOUSE ORDER	0

82274,MCAID2	BLOOD OCCULT FECAL MEDICAID OUTSIDE ORDER	0
82274,MCARE1	BLOOD OCCULT FECAL HGB DETER IA QUAL MEDICARE OUR ORD	0
82274,MCARE2	BLOOD OCCULT FECAL HGB DETER IA QUAL FECES MEDICARE OU	0
82306	25 HYDROXY INCLUDES FRACTIONS IF PERFORMED	65
82310	CALCIUM TOTAL	22
82310,MCAID1	CALCIUM MEDICAID INHOUSE ORDER	0
82310,MCARE1	CALCIUM MEDICARE INHOUSE ORDER	0
82330	CALCIUM IONIZED	80
82331	CALCIUM AFTER CALCIUM INFUSION TEST	16.72
82340	CALCIUM URINE QUANTITATIVE TIMED SPECIMEN	35
82365	CALCULUS INFRARED SPECTROSCOPY	63.93
82374	CARBON DIOXIDE BICARBONATE	8.85
82397	CHEMILUMINESCENT ASSAY	65
82465	CHOLESTEROL SERUM/WHOLE BLOOD TOTA	18.69
82523	COLLAGEN CROSS LINKS ANY METHOD	105.25
82525	ASSAY OF COPPER	30
82533	CORTISOL TOTAL	50
82542	COL-CHR/MS NONDRUG ANALYTE NES QUAL/QUAN EA SPEC	125
82550	CREATINE KINASE TOTAL	32.4
82552	CREATINE KINASE ISOENZYMES	51.15
82553	CREATINE KINASE MB FRACTION ONLY	35
82565	CREATININE BLOOD	29
82565,MCAID1	CREATININE, SERUM MEDICAID INHOUSE ORDER	0
82565,MCARE1	CREATININE, SERUM MEDICARE INHOUSE ORDER	0
82570	CREATININE OTHER SOURCE	24
82607	CYANOCOBALAMIN VITAMIN B-12	65
82610	CYSTATIN C	74.75
82627	DEHYDROEPIANDROSTERONE-SULFATE	54
82642	DIHYDROTESTOSTERONE (DHT)	148.57
82652	1 25 DIHYDROXY INCLUDES FRACTIONS IF PERFORMED	100
82668	ASSAY OF ERYTHROPOIETIN	99.34
82670	ASSAY OF ESTRADIOL	90
82672	ASSAY OF ESTROGENS TOTAL	100
82728	ASSAY OF FERRITIN	56
82746	ASSAY OF FOLIC ACID SERUM	33
82784	ASSAY OF GAMMAGLOBULIN IGA IGD IGG IGM EACH	65
82785	ASSAY OF GAMMAGLOBULIN IGE	62.95
82947	GLUCOSE QUANTITATIVE BLOOD XCPT REAGENT STRIP	18
82947,MCAID1	GLUCOSE MEDICAID INHOUSE ORDER	0
82947,MCAID2	GLUCOSE MEDICAID OUTSIDE ORDER	0
82947,MCARE1	GLUCOSE MEDICARE INHOUSE ORDER	0
82947,MCARE2	GLUCOSE MEDICARE OUTSIDE ORDER	0
82948	GLUCOSE BLOOD REAGENT STRIP	12
82950	GLUCOSE POST GLUCOSE DOSE	26
82951	GLUCOSE TOLERANCE TEST GTT 3 SPECIMENS	36
82962	GLUC BLD GLUC MNTR DEV CLEARED FDA SPEC HOME USE	14
82977	ASSAY OF GLUTAMYLTRASE GAMMA	32

82977,MCAID1	GAMMA GLUTAMYLTRANSFERASE MEDICAID INHOUSE ORDER	0
82977,MCARE1	GAMMA GLUTAMYLTRANSFERASE MEDICARE INHOUSE ORDER	0
83001	GONADOTROPIN FOLLICLE STIMULATING HORMONE	80
83002	GONADOTROPIN LUTEINIZING HORMONE	76
83010	ASSAY OF HAPTOGLOBIN QUANTITATIVE	68.85
83013	HELICOBACTER PYLORI, UREA BREATH TEST	149
83036	HEMOGLOBIN GLYCOSYLATED A1C	41
83036,MCAID1	HEMOGLOBIN GLYCOSYLATED A1C MEDICAID INHOUSE ORDER	0
83036,MCAID2	HEMOGLOBIN GLYCOSYLATED A1C MEDICAID OUTSIDE ORDER	0
83036,MCARE1	HEMOGLOBIN GLYCOSYLATED A1C MEDICARE INHOUSE ORDER	0
83036,MCARE2	HEMOGLOBIN GLYCOSYLATED A1C MEDICARE OUTSIDE ORDER	0
83090	ASSAY OF HOMOCYSTEINE	66
83516	IMMUNOASSAY ANALYTE QUAL/SEMIQUAL MULTIPLE STEP	66
83519	IMMUNOASSAY ANALYTE QUANT RADIOIMMUNOASSAY	101.31
83520	IMMUNOASSAY ANALYTE QUANTITATIVE NOS	84
83525	ASSAY OF INSULIN TOTAL	23
83540	ASSAY OF IRON	28
83550	IRON BINDING CAPACITY	40
83600,MCARE2	XR ANKLE 2V MEDICARE OUTSIDE ORDER	0
83615	LACTATE DEHYDROGENASE LDH	29
83655	ASSAY OF LEAD	31
83690	ASSAY OF LIPASE	45
83695	LIPOPROTEIN (A)	33.44
83704	LIPOPROTEIN BLOOD QUAN NUMBERS & SUBCLASSES	66.89
83721	LIPOPROTEIN DIRECT MEASUREMENT LDL CHOLESTEROL	47
83735	ASSAY OF MAGNESIUM	25
83789	MASS SPECT&TANDEM MASS SPECT NONDRG ANAL NES EA	35
83825	ASSAY OF MERCURY QUANTITATIVE	95.41
83835	METANEPHRINES	128.85
83872	MUCIN SYNOVIAL FLUID ROPES TEST	30.49
83874	MYOGLOBIN	58.03
83880	NATRIURETIC PEPTIDE	100
83883	ASSAY OF NEPHELOMETRY EACH ANALYTE NES	81.64
83921	ORGANIC ACID 1 QUANTITATIVE	110
83930	ASSAY OF OSMOLALITY BLOOD	42.3
83935	ASSAY OF OSMOLALITY URINE	45.25
83970	ASSAY OF PARATHORMONE	115
83992	ASSAY OF PHENCYCLIDINE	38.36
83993	ASSAY OF CALPROTECTIN FECAL	158.36
84075	ASSAY OF PHOSPHATASE ALKALINE	22
84075,MCAID1	ALK PHOS MEDICAID INHOUSE ORDER	0
84075,MCARE1	ALK PHOS MEDICARE INHOUSE ORDER	0
84100	ASSAY OF PHOSPHORUS INORGANIC	20
84132	POTASSIUM SERUM PLASMA/WHOLE BLOOD	17.7
84134	PREALBUMIN	67.87
84144	ASSAY OF PROGESTERONE	75
84146	ASSAY OF PROLACTIN	80

84152	ASSAY OF PROSTATE SPECIFIC ANTIGEN COMPLEXED	60.98
84153	ASSAY OF PROSTATE SPECIFIC ANTIGEN TOTAL	70
84154	ASSAY OF PROSTATE SPECIFIC ANTIGEN FREE	110.34
84155	PROTEIN XCPT REFRACTOMETRY SERUM PLASMA/WHL BLD	25
84155,MCAID1	PROTEIN TOTAL MEDICAID INHOUSE ORDER	0
84155,MCARE1	PROTEIN TOTAL MEDICARE INHOUSE ORDER	0
84156	PROTEIN TOTAL XCPT REFRACTOMETRY URINE	10
84165	PROTEIN ELECTROPHORETIC FRACTJ&QUANTJ SERUM	50
84207	ASSAY OF PYRIDOXAL PHOSPHATE	124.13
84270	ASSAY OF SEX HORMONE BINDING GLOBULIN	100
84300	ASSAY OF URINE SODIUM	18.69
84305	ASSAY OF SOMATOMEDIN	115
84402	ASSAY OF TESTOSTERONE FREE	45
84403	ASSAY OF TESTOSTERONE TOTAL	78
84425	ASSAY OF THIAMINE-VITAMIN B-1	100
84432	ASSAY OF THYROGLOBULIN	95
84436	ASSAY OF THYROXINE TOTAL	45
84439	ASSAY OF FREE THYROXINE	55
84443	ASSAY OF THYROID STIMULATING HORMONE TSH	55
84445	THYROID STIMULATING IMMUNE GLOBULINS TSI	236.07
84450	TRANSFERASE ASPARTATE AMINO AST SGOT	29
84450,MCAID1	AST SGOT MEDICAID INHOUSE ORDER	0
84450,MCARE1	AST SGOT MEDICARE INHOUSE ORDER	0
84460	TRANSFERASE ALANINE AMINO ALT SGPT	17
84460,MCAID	ALT SGPT MEDICAID INHOUSE ORDER	0
84460,MCARE1	ALT SGPT MEDICARE INHOUSE ORDER	0
84466	ASSAY OF L7383TRANSFERRIN	40
84479	THYROID HORM UPTK/THYROID HORMONE BINDING RATIO	29.51
84480	ASSAY OF TRIIODOTHYRONINE T3 TOTAL TT3	59
84481	ASSAY OF TRIIODOTHYRONINE T3 FREE	55
84482	TRIIODOTHYRONINE T3 REVERSE	45
84484	ASSAY OF TROPONIN QUANTITATIVE	60
84520	ASSAY OF UREA NITROGEN QUANTITATIVE	20
84520,MCAID1	BUN MEDICAID INHOUSE ORDER	0
84520,MCARE1	BUN MEDICARE INHOUSE ORDER	0
84550	ASSAY OF BLOOD/URIC ACID	29
84550,MCAID1	URIC ACID MEDICAID INHOUSE ORDER	0
84550,MCARE1	URIC ACID MEDICARE INHOUSE ORDER	0
84630	ASSAY OF ZINC	80
84681	ASSAY OF C-PEPTIDE	96
84702	GONADOTROPIN CHORIONIC QUANTITATIVE	50
84703	GONADOTROPIN CHORIONIC QUALITATIVE	40
85007	BLOOD COUNT SMEAR MCRSCP W/MNL DIFRNTL WBC COUNT	20
85013	BLOOD COUNT SPUN MICROHEMATOCRIT	11.8
85013,MCAID1	HEMATOCRIT MEDICAID INHOUSE ORDER	0
85013,MCAID2	HEMATOCRIT MEDICAID OUTSIDE ORDER	0
85013,MCARE1	HEMATOCRIT MEDICARE INHOUSE ORDER	0

85013,MCARE2	HEMATOCRIT MEDICARE OUTSIDE ORDER	0
85014	BLOOD COUNT HEMATOCRIT	8
85014,MCAID1	BLOOD COUNT HEMATOCRIT MEDICAID INHOUSE ORDER	0
85014,MCAID2	BLOOD COUNT HEMATOCRIT MEDICAID OUTSIDE ORDER	0
85014,MCARE1	BLOOD COUNT HEMATOCRIT MEDICARE INHOUSE ORDER	0
85014,MCARE2	BLOOD COUNT HEMATOCRIT MEDICARE OUTSIDE ORDER	0
85018	BLOOD COUNT HEMOGLOBIN	18
85025	BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC	29
85027	BLOOD COUNT COMPLETE AUTOMATED	35
85045	BLOOD COUNT RETICULOCYTE AUTOMATED	26.56
85048	BLOOD COUNT LEUKOCYTE WBC AUTOMATED	6.89
85049	BLOOD COUNT PLATELET AUTOMATED	21.64
85060	BLOOD SMEAR PERIPHERAL INTERP PHYS W/WRIT REPORT	85
85300	CLOTTING INHIBITORS ANTITHROMBIN III ACTIVITY	91.48
85301	CLOTTING INHIBITRS ANTITHROMBN III ANTIGEN ASSAY	77.71
85303	CLOTTING INHIBITORS PROTEIN C ACTIVITY	129.84
85306	CLOTTING INHIBITORS PROTEIN S FREE	112.13
85379	FIBRIN DGRADJ PRODUCTS D-DIMER QUANTITATIVE	65
85597	PHOSPHOLIPID NEUTRALIZATION PLATELET	79.67
85610	PROTHROMBIN TIME	25
85610,MCAID1	PT/INR MEDICAID INHOUSE ORDER	0
85610,MCAID2	PT/INR MEDICAID OUTSIDE ORDER	0
85613	RUSSELL VIPER VENOM TIME DILUTED	60
85651	SEDIMENTATION RATE RBC NON-AUTOMATED	28
85651,MCAID1	SED RATE MEDICAID INHOUSE ORDER	0
85651,MCAID2	SED RATE MEDICAID OUTSIDE ORDER	0
85651,MCARE1	SED RATE MEDICARE INHOUSE ORDER	0
85651,MCARE2	SED RATE MEDICARE OUTSIDE ORDER	0
85730	THROMBOPLASTIN TIME PARTIAL PLASMA/WHOLE BLOOD	37
86001	ALLERGEN SPECIFIC IGG QUAN/SEMIQUAN EA ALLERGEN	17.7
86003	ALLERGEN SPEC IGE CRUDE ALLERGEN EXTRACT EACH	30
86015	ACTIN SMOOTH MUSCLE ANTIBODY EACH	72.79
86021	ANTIBODY IDENTIFICATION LEUKOCYTE ANTIBODIES	97.38
86038	ANTINUCLEAR ANTIBODIES ANA	35
86039	ANTINUCLEAR ANTIBODIES ANA TITER	18
86140	C-REACTIVE PROTEIN	50
86146	BETA 2 GLYCOPROTEIN I ANTIBODY EACH	50
86147	CARDIOLIPIN ANTIBODY EACH IG CLASS	55
86148	ANTI-PHOSPHATIDYLSERINE ANTIBODY	50
86160	COMPLEMENT ANTIGEN EACH COMPONENT	30
86200	CYCLIC CITRULLINATED PEPTIDE ANTIBODY	96
86225	DNA ANTIBODY NATIVE/DOUBLE STRANDED	66
86235	EXTRACTABLE NUCLEAR ANTIGEN ANTIBODY ANY METHOD	80
86255	FLUORESCENT NONNFCT AGT ANTB SCREEN EA ANTIBODY	82
86300	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 15-3	91.48
86301	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 19-9	98.36
86304	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 125	91

86308	HETEROPHILE ANTIBODIES SCREEN	15
86316	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE	115.08
86317	IMMUNOASSAY INFECTIOUS AGENT ANTIBODY QUAN NOS	30
86318	IMMUNOASSAY NFCT AGT ANTB QUAL/SEMIQUAN 1 STEP	55
86334	IMMUNOFIXJ ELECTROPHORESIS SERUM	109.18
86337	INSULIN ANTIBODIES	134.75
86341	ISLET CELL ANTIBODY	116
86355	B CELLS TOTAL COUNT	96.39
86357	NATURAL KILLER CELLS TOTAL COUNT	77.71
86359	T CELLS TOTAL COUNT	110.16
86360	T CELLS ABSOLUTE CD4&CD8 COUNT RATIO	166.23
86376	MICROSOMAL ANTIBODIES EACH	85
86381	MITOCHONDRIAL ANTIBODY EACH	92.46
86431	RHEUMATOID FACTOR QUANTITATIVE	36
86480	TB CELL MEDIATED ANTIGN RESPNSE GAMMA INTERFERON	170
86580	SKIN TEST; TUBERCULOSIS, INTRADERMAL	25
86592	SYPHILIS TEST NON-TREPONEMAL ANTIBODY QUAL	18
86606	ANTIBODY ASPERGILLUS	51.15
86609	ANTIBODY BACTERIUM NOT ELSEWHERE SPECIFIED	27.54
86617	ANTIBODY BORRELIA BURGDORFERI CONFIRMATORY TST	50
86618	ANTIBODY BORRELIA BURGDORFERI LYME DISEASE	97.38
86644	ANTIBODY CYTOMEGALOVIRUS CMV	82.62
86663	ANTIBODY EPSTEIN-BARR EB VIRUS EARLY ANTIGEN EA	60.6
86664	ANTIBODY EPSTEIN-BARR EB VIRUS NUCLEAR AG EBNA	95
86665	ANTIBODY EPSTEIN-BARR EB VIRUS VIRAL CAPSID VCA	90
86677	ANTIBODY HELICOBACTER PYLORI	50
86696	ANTIBODY HERPES SMPLX TYPE 2	40
86703	ANTIBODY HIV-1&HIV-2 SINGLE RESULT	45
86704	HEPATITIS B CORE ANTIBODY HBCAB TOTAL	63.93
86706	HEPATITIS B SURF ANTIBODY HBSAB	70.59
86708	HEPATITIS A ANTIBODY HAAB	67.87
86735	ANTIBODY MUMPS	80
86762	ANTIBODY RUBELLA	52
86765	ANTIBODY RUBEOLA	79.67
86769	ANTB SEVERE AQT RESPIR SYND SARS-COV-2 COVID19	60
86780	ANTIBODY TREPONEMA PALLIDUM	40
86784	ANTIBODY TRICHINELLA	68.85
86787	ANTIBODY VARICELLA-ZOSTER	100
86800	THYROGLOBULIN ANTIBODY	80
86803	HEPATITIS C ANTIBODY	58
86812	HLA TYPING A/B/C SINGLE ANTIGEN	45
86850	ANTIBODY SCREEN RBC EACH SERUM TECHNIQUE	37
86900	BLOOD TYPING SEROLOGIC ABO	32
86901	BLOOD TYPING SEROLOGIC RH (D)	38
87015	CONCENTRATION INFECTIOUS AGENTS	26.56
87045	CUL BACT STOOL AEROBIC ISOL SALMONELLA&SHIGELL	70
87046	CUL BACT STOOL AEROBIC ADDL PATHOGENS&ID EA	39.34

87070	CUL BACT XCPT URINE BLOOD/STOOL AEROBIC ISOL	60
87075	CULTURE BACTERIAL ANY SOURCE ANAEROBIC ISO&ID	75
87077	CUL BACT AEROBIC ADDL METHS DEFINITIVE EA ISOL	66
87081	CUL PRSMPTV PTHGNC ORGANISM SCR N W/COLONY ESTIMJ	22
87086	CULTURE BACTERIAL QUANTTATIVE COLONY COUNT URINE	45
87088	CULTURE BCT ISOL&PRSMPTV ID ISOLATE EA URINE	35
87101	CUL FNGL MOLD/YEAST PRSMPTV ID SKN HAIR/NAIL	38.36
87102	CULTURE FNGL MOLD/YEAST PRSMPTV OTH XCPT BLOOD	34.43
87140	CULTURE TYPING IMMUNOFLUORESCENT EACH ANTISERUM	36.39
87147	CULTURE TYPING IMMUNOLOGIC OTH/THN IMMUNOFLUORES	22.62
87168	MACROSCOPIC EXAMINATION ARTHROPOD	33.44
87169	MACROSCOPIC EXAMINATION PARASITE	22.62
87177	OVA&PARASITES DIRECT SMEARS CONCENTRATION & ID	34.43
87181	SUSCEPTIBLTY STDY ANTIMICRBIAL AGNT AGAR DILUTJ	20.66
87186	SUSCEPTIBLTY STDY ANTIMICRBIAL MICRO/AGAR DILUTJ	43
87205	SMR PRIM SRC GRAM/GIEMSA STAIN BCT FUNGI/CELL	30
87209	SMR PRIM SRC CPLX SPEC STAIN OVA&PARASITS	60
87210	SMR PRIM SRC WET MOUNT NFCT AGT	15
87220	TISS KOH SLIDE SAMPS SKN/HR/NLS FNGL/ECTOPARASIT	25
87230	TOXIN/ANTITOXIN ASSAY TISSUE CULTURE	108.2
87272	IAADI CRYPTOSPORIDIUM	41.31
87324	IAAD IA CLOSTRIDIUM DIFFICILE TOXIN	62.95
87328	CRYPTO AG, EIA	58.03
87329	IAAD IA GIARDIA	54.1
87338	IAAD IA HPYLORI STOOL	40
87340	IAAD IA HEPATITIS B SURFACE ANTIGEN	50
87341	IAAD IA HEPATITIS B SURFACE AG NEUTRALIZATION	57.05
87385	IAAD IA HISTOPLASM CAPSULATUM	110.16
87389	IAAD IA HIV-1 AG W/HIV-1 & HIV-2 ANTBODY SINGLE	45
87426	COVID-19 ANITGEN TEST FOR TEACHERS, SCHOOL STAFF, STUDEI	75
87426,MCAID1	IDNOW COVID MEDICAID INHOUSE ORDER	0
87426,MCAID2	IDNOW COVID MEDICAID OUTSIDE ORDER	0
87426,MCARE1	IDNOW COVID TEST MEDICARE INHOUSE ORDER	0
87426,MCARE2	IDNOW COVID MEDICARE OUTSIDE ORDER	0
87427	IAAD IA SHIGA-LIKE TOXIN	44
87430	IAAD IA STREPTOCOCCUS GROUP A	35
87430,MCAID1	STREP MEDICAID INHOUSE ORDER	0
87430,MCAID2	STREP MEDICAID OUTSIDE ORDER	0
87430,MCARE1	STREP MEDICARE INHOUSE ORDER	0
87430,MCARE2	STREP MEDICARE OUTSIDE ORDER	0
87449	IAAD IA MULT STEP METHOD NOS EACH ORGANISM	62.95
87491	IADNA CHLAMYDIA TRACHOMATIS AMPLIFIED PROBE TQ	60
87493	INF AGENT DET NUCLEIC ACID CLOSTRIDIUM AMP PROBE	101.31
87502	INFECTIOUS AGENT DNA/RNA INFLUENZA 1ST 2 TYPES	175
87502,MCAID1	IDNOW FLU MEDICAID INHOUSE ORDER	0
87502,MCAID2	IDNOW FLU MEDICIAID OUTSIDE ORDER	0
87502,MCARE1	IDNOW FLU MEDICARE INHOUSE ORDER	0

87502,MCARE2	IDNOW FLU MEDICARE OUTSIDE ORDER	0
87517	IADNA HEPATITIS B VIRUS QUANTIFICATION	316.72
87522	IADNA HEPATITIS C QUANT & REVERSE TRANSCRIPTION	261.64
87530	NUCLEIC ACID DETECTION; HERPES SIMPLEX VIRUS, QUANTIFICA	158.36
87536	IADNA HIV-1 QUANT & REVERSE TRANSCRIPTION	304.92
87591	IADNA NEISSERIA GONORRHOEAE AMPLIFIED PROBE TQ	60
87623	IADNA HUMAN PAPILLOMAVIRUS LOW-RISK TYPES	98.36
87624	IADNA HUMAN PAPILLOMAVIRUS HIGH-RISK TYPES	55
87625	IADNA HUMAN PAPILLOMAVIRUS TYPES 16 & 18 ONLY	118.03
87635	IADNA SARS-COV-2 COVID-19 AMPLIFIED PROBE TQ	125
87641	IADNA S AUREUS METHICILLIN RESIST AMP PROBE TQ	65
87651	IADNA STREPTOCOCCUS GROUP A AMPLIFIED PROBE TQ	87
87651,MCAID1	IDNOW STREP MEDICAID INHOUSE ORDER	0
87651,MCAID2	IDNOW STREP MEDICAID OUTSIDE ORDER	0
87651,MCARE1	IDNOW STREP MEDICARE INHOUSE ORDER	0
87651,MCARE2	IDNOW STREP MEDICARE OUTSIDE ORDER	0
87653	IADNA STREPTOCOCCUS GROUP B AMPLIFIED PROBE TQ	98.72
87661	IADNA TRICHOMONAS VAGINALIS AMPLIFIED PROBE TECH	75
87798	IADNA NOS AMPLIFIED PROBE TQ EACH ORGANISM	70
87799	IADNA NOS QUANTIFICATION EACH ORGANISM	521
87804	IAADIADOO INFLUENZA	35
87804,MCAID1	INFLUENZA MEDICAID INHOUSE ORDER	0
87804,MCAID2	INFLUENZA MEDICAID OUTSIDE ORDER	0
87804,MCARE1	INFLUENZA TEST MEDICARE INHOUSE ORDER	0
87804,MCARE2	INFLUENZA TEST MEDICARE OUTSIDE ORDER	0
87807	IAADIADOO RESPIRATORY SYNCTIAL VIRUS	32
87811	COVID-19 ANITGEN TEST FOR UNINSURED OR UNDERINSURED	79
87811,MCAID1	COVID-19 ANITGEN TEST MEDICAID INHOUSE ORDER	0
87811,MCAID2	COVID-19 ANITGEN TEST MEDICAID OUTSIDE ORDER	0
87811,MCARE1	COVID-19 ANITGEN TEST MEDICARE INHOUSE ORDER	0
87811,MCARE2	COVID-19 ANITGEN TEST MEDICARE OUTSIDE ORDER	0
87880	IAADIADOO STREPTOCOCCUS GROUP A	30.57
87880,MCAID1	STREPTOCOCCUS MEDICAID INHOUSE ORDER	0
87880,MCAID2	STREPTOCOCCUS MEDICAID OUTSIDE ORDER	0
87880,MCARE1	STREPTOCOCCUS MEDICARE INHOUSE ORDER	0
87880,MCARE2	STREPTOCOCCUS MEDICARE OUTSIDE ORDER	0
87902	NFCT AGNT GENOTYP NUCLEIC ACID HEPATITIS C VIRUS	520.33
88104	CYTP FLU WASHGS/BRUSHINGS XCPT C/V SMRS INTERPJ	182.95
88142	CYTP CERV/VAG AUTO THIN LAYER PREP MNL SCREEN	59
88175	CYTP C/V AUTO THIN LYR PREPJ SCR MNL RESCR PHYS	66
88300	LEVEL I SURG PATHOLOGY GROSS EXAMINATION ONLY	90
89051	CELL COUNT, MSIC BODY FLUID WITH DIFF	37.38
89055	LEUKOCYTE ASSMT FECAL QUAL/SEMIQUANTITATIVE	27.54
89060	CRYSTAL ID BY LIGHT MICROSCOPY TISSUE/BODY FLUID EXCEPT I	48.2
90460	IMMUNIZATION ADMIN THROUGH 18 YRS OF AGE	38
90471	IM ADM PRQ ID SUBQ/IM NJXS 1 VACCINE	42
90471,FLU	INFLUENZA ADMINISTRATION	19.91

90472	IM ADM PRQ ID SUBQ/IM NJXS EA VACCINE	25
90632	HEPA VACCINE ADULT DOSE FOR INTRAMUSCULAR USE	108.13
90653	IIV ADJUVANTED VACCINE FOR INTRAMUSCULAR USE	76
90656	IIV3 VACC PRESERVATIVE FREE 0.5 ML DOSAGE IM USE	26.67
90658	IIV3 VACCINE SPLIT VIRUS 0.5 ML DOSAGE IM USE	26.37
90662	IIV VACCINE PRESERV FREE INCREASED AG COUNT IM	69.94
90674	CCIIV4 VACCINE PRESERVATIVE FREE 0.5 ML IM USE	35
90686	IIV4 VACC PRESRV FREE 0.5 ML DOS FOR IM USE	30
90694	AIIIV4 VACC INACTIVATED PRSRV FR 0.5ML DOS IM USE	71.68
90715	TDAP VACCINE 7 YRS/> IM	85
90785	PSYCHOTHERAPY COMPLEX INTERACTIVE	26.87
90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	322.07
90832	PSYCHOTHERAPY W/PATIENT 30 MINUTES	139.86
90833	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 30 MIN	150
90834	PSYCHOTHERAPY W/PATIENT 45 MINUTES	184.66
90836	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 45 MIN	190
90837	PSYCHOTHERAPY W/PATIENT 60 MINUTES	271.92
90838	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 60 MIN	250
90839	PSYCHOTHERAPY FOR CRISIS INITIAL 60 MINUTES	259.34
90840	PYSCHOTHERAPY CRISIS ADDITIONAL 30 MINS	174.05
90846	FAMILY PSYCHOTHERAPY W/O PATIENT PRESENT 50 MINS	178.52
90847	FAMILY PSYCHOTHERAPY W/PATIENT PRESENT 50 MINS	185.03
91300	COVID-19 VACCINE; PFIZER	30.67
91301	COVID-19 VACCINE; MODERNA	38.67
91306	MODERNA; VACCINE	46.67
91312	PFIZER; BIVALENT (12 & OLDER)	59.34
91313	MODERNA; BIVALENT (18 & OLDER)	67.25
91314	MODERNA; BIVALENT (>18 YRS)	40
91315	PFIZER; BIVALENT (5-11 YRS)	71.21
92552	PURE TONE AUDIOMETRY AIR ONLY	56.18
92950	CARDIOPULMONARY RESUSCITATION	726.42
93000	EKG ROUTINE ECG W/LEAST 12 LDS W/I&R	50
93000,MCAID1	EKG INHOUSE ORDER FOR MEDICAID WITH NO ENCOUNTER	0
93000,MCAID2	EKG, OUTSIDE ORDER FOR MEDICAID	0
93000,MCARE1	EKG INHOUSE ORDER FOR MEDICARE WITHOUT ENCOUNTER	0
93000,MCARE2	EKG OUTSIDE ORDER FOR MEDICARE WITHOUT ENCOUNTER	0
93005	EKG ROUTINE ECG W/LEAST 12 LDS TRCG ONLY W/O I&R	29
93010	ECG ROUTINE ECG W/LEAST 12 LDS I&R ONLY	63
93040	RHYTHM ECG 1-3 LEADS W/INTERPRETATION & REPORT	43.52
93041	RHYTHM ECG 1-3 LEADS TRACING ONLY W/O I&R	52
94010	SPIROMETRY W/VC EXPIRATORY FLO W/WO MXML VOL VNTJ	62
94010,MCAID1	SPIROMETRY, MEDICAID, OUR ORDER	0
94010,MCAID2	SPIROMETRY, MEDICAID, OUTSIDE ORDER	0
94010,MCARE1	SPIROMETRY, MEDICARE, OUR ORDER	0
94010,MCARE2	SPIROMETRY, MEDICARE, OUTSIDE ORDER	0
94060	BRNCDILAT RSPSE SPMTRY PRE&POST-BRONCDILAT ADMIN	126.95
94150	VITAL CAPACITY TOTAL SEPARATE PROCEDURE	41.61

94618	PULMONARY STRESS TESTING	109.45
94640	PRESSURIZED/NONPRESSURIZED INHALATION TREATMENT	37
95115	PROF SVCS ALLG IMMNTX X W/PRV ALLGIC XTRCS 1 NJX	16.5
95117	PROF SVCS ALLG IMMNTX X W/PRV ALLGIC XTRCS NJXS	29
95992	CANALITH REPOSITIONING PROCEDURE	77.82
96110	DEVELOPMENTAL SCREEN W/SCORING & DOC STD INSTRM	18.56
96127	BEHAV ASSMT W/SCORE & DOCD/STAND INSTRUMENT	17
96156	HEALTH BEHAVIOR ASSESSMENT/RE-ASSESSMENT	325.78
96160	PT-FOCUSED HLTH RISK ASSMT SCORE DOC STND INSTRM	10
96360	IV INFUSION HYDRATION INITIAL 31 MIN-1 HOUR	113
96361	IV INFUSION HYDRATION EACH ADDITIONAL HOUR	40
96365	IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST TO 1 HR	135
96372	THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/IM	47
96374	THER PROPH/DX NJX IV PUSH SINGLE/1ST SBST/DRUG	101
96375	THERAPEUTIC INJECTION IV PUSH EACH NEW DRUG	40
96523	IRRIGAJ IMPLNTD VENOUS ACCESS DRUG DELIVERY SYST	74.67
97597	DEBRIDEMENT OPEN WOUND 20 SQ CM/<	175
97602	RMVL DEVITAL TISS N-SLCTV DBRDMT W/O ANES 1 SESS	82.56
99000	HANDLG&/OR CONVEY OF SPEC FOR TR OFFICE TO LAB	16
99000,1ST	1ST FRUITS COLLECTION	35
99000,ACG	ACG, INC. THROUGH SAFE TRACK	35
99000,ADA	ADA COUNTY DRUG SCREEN COLLECTION	35
99000,APPINS	COLLECTION FOR APPLICANT INSIGHT	35
99000,BAV	DSC BLACK & VEATCH ACCT 80800	35
99000,BMR	BLUE MTN REFUSE COLLECTION	35
99000,BPH	BENGAL PHARMACY COLLECTION	35
99000,CITY	CITY OF CHALLIS COLLECTION	35
99000,CRM	CHALLIS REDI-MIX COLLECTION	35
99000,CTC	CUSTERTEL COLLECTION	35
99000,DEBCO	DEBCO CONSTRUCTION COLLECTION	35
99000,DOL	DEPT. OF LABOR	35
99000,DP	DRUG SCREEN COLLECTION FOR DIAMOND PEAK	35
99000,DRGSCR	DRUG SCREEN COLLECTION NOT OUR LAB	35
99000,FISH	FISH AND GAME, IDAHO	35
99000,GALELIM	COLLECTION FOR GALE LIM CONSTRUCTION	35
99000,GRAN	GRANITE CONSTRUCTION COLLECTION	35
99000,IDT	COLLECTION FOR ID DEPT TRAN (HWY DEPT)	35
99000,IMCO	IMCO GENERAL CONSTRUCTION	35
99000,IPLH	IDAHO PRECISION LOG HOME, LLC DRUG SCREEN	35
99000,ITD	IDAHO TRANSPORTATION DEPT. DOT DRUG SCREEN	35
99000,K9PIPE	K9 PIPE INSPECTIONS FOR DRUG FREE IDAHO	35
99000,KMB	KIMBLE OIL COLLECTION	35
99000,KNIFE	KNIFE RIVER CONSTRUCTION	35
99000,LRMC	LOST RIVER MED CTR COLLECTION	35
99000,MFA	DRUG SCREEN FOR MIDDLE FORK AVIATION	35
99000,NWTC	NORTHWEST TRAFFIC CONTROL COLLECTION	35
99000,PEM	PEMBROOK COLLECTION	35

99000,POCON	USPS CONTRACT COURIER COLLECTIONS	35
99000,RNB	CUSTER COUNTY ROAD AND BRIDGE COLLECTION	35
99000,SAFE	SAFE HAVEN COLLECTION	35
99000,SCH	SCHOOL DIST 181 CHALLIS, COLLECTION	35
99000,SRE	SALMON RIVER ELECTRIC COLLECTION	35
99000,SRP	SALMON RIVER PROPANE COLLECTION	35
99000,SS88	STINKER STATION, CHALLIS, COLLECTION	35
99000,STURGEON	STURGEON ELECTRIC VIA MINERT COLLECTION	35
99000,SWE	SOUTHWEST ENERGY COLLECTION	35
99000,TCM	DRUG SCREEN COLLECTION THOMPSON CREEK MINE	35
99000,TCP	T-CUP COLLECTION	35
99000,TDCI	DRUG SCREEN COLLECTION TANDEM DIABETES CARE, INC.	35
99000,UPS	UNITED PARCEL SERVICE DRUG/ALC SCREEN	35
99024	POSTOP FOLLOW UP VISIT RELATED TO ORIGINAL PX	81.82
99050	SERVICES PROVIDED OFFICE OTH/THN REG SCHED HOURS	53.55
99058	SVC PRV EMER BASIS IN OFFICE DISRUPTING SVCS	74.38
99151	MOD SED SAME PHYS/QHP INITIAL 15 MINS <5 YRS	148
99152	MOD SED SAME PHYS/QHP INITIAL 15 MINS 5/> YRS	118
99153	MOD SED SAME PHYS/QHP EACH ADDL 15 MINS	134
99188	APPLICATION TOPICAL FLUORIDE VARNISH BY PHS/QHP	24
99195	PHLEBOTOMY THERAPEUTIC SEPARATE PROCEDURE	169.62
99202	OFFICE OUTPATIENT NEW 15-29 MINUTES	140
99203	OFFICE OUTPATIENT NEW 30-44 MINUTES	216
99204	OFFICE OUTPATIENT NEW 45-59 MINUTES	320
99205	OFFICE OUTPATIENT NEW 60-74 MINUTES	403
99211	OFFICE OUTPATIENT VISIT 5 MINUTES	40
99212	OFFICE OUTPATIENT VISIT 10-19 MINUTES	98.2
99213	OFFICE OUTPATIENT VISIT 20-29 MINUTES	159.15
99214	OFFICE OUTPATIENT VISIT 30-39 MINUTES	225.7
99215	OFFICE OUTPATIENT VISIT 40-54 MINUTES	322
99242	OFFICE/OP CONSLTJ NEW/EST PT SF MDM 20 MINUTES	258.05
99243	OFFICE/OP CONSLTJ NEW/EST PT LOW MDM 30 MINUTES	343.51
99244	OFFICE/OP CONSLTJ NEW/EST PT MOD MDM 40 MINUTES	470.87
99245	OFFICE/OP CONSLTJ NEW/EST PT HIGH MDM 55 MINUTES	581.46
99291	CRITICAL CARE ILL/INJURED PATIENT INIT 30-74 MIN	620
99292	CRITICAL CARE ILL/INJURED PATIENT ADDL 30 MIN	311
99348	HOME VISIT EST PT LOW-MOD SEVERITY 25 MINUTES	146.7
99349	HOME VISIT EST PT MOD-HI SEVERITY 40 MINUTES	242
99354	PROLNG E&M/PSYCTX SVC OFFICE O/P DIR CON 1ST HR	225.2
99355	PROLNG E&M/PSYCTX SVC OFFICE O/P DIR CON ADDL 30	197.9
99356	PROLONGED SVC I/P OR OBS SETTING 1ST HOUR	215
99357	PROLONGED SVC I/P OR OBS SETTING EA ADDL 30 MIN	165
99381	INITIAL PREVENTIVE MEDICINE NEW PATIENT <1YEAR	209
99382	INITIAL PREVENTIVE MEDICINE NEW PT AGE 1-4 YRS	220
99383	INITIAL PREVENTIVE MEDICINE NEW PT AGE 5-11 YRS	225
99384	INITIAL PREVENTIVE MEDICINE NEW PT AGE 12-17 YR	250
99385	INITIAL PREVENTIVE MEDICINE NEW PT AGE 18-39YRS	252

99386	INITIAL PREVENTIVE MEDICINE NEW PATIENT 40-64YRS	291
99387	INITIAL PREVENTIVE MEDICINE NEW PATIENT 65YRS&>	300
99391	PERIODIC PREVENTIVE MED ESTABLISHED PATIENT <1Y	188
99392	PERIODIC PREVENTIVE MED EST PATIENT 1-4YRS	199
99393	PERIODIC PREVENTIVE MED EST PATIENT 5-11YRS	200
99394	PERIODIC PREVENTIVE MED EST PATIENT 12-17YRS	225
99395	PERIODIC PREVENTIVE MED EST PATIENT 18-39 YRS	237
99396	PERIODIC PREVENTIVE MED EST PATIENT 40-64YRS	236
99397	PERIODIC PREVENTIVE MED EST PATIENT 65YRS& OLDER	259
99401	PREVENT MED COUNSEL&/RISK FACTOR REDJ SPX 15 MIN	88.81
99402	PREVENT MED COUNSEL&/RISK FACTOR REDJ SPX 30 MIN	134.05
99403	PREVENT MED COUNSEL&/RISK FACTOR REDJ SPX 45 MIN	167.57
99404	PREVENT MED COUNSEL&/RISK FACTOR REDJ SPX 60 MIN	199.34
99406	TOBACCO USE CESSATION INTERMEDIATE 3-10 MINUTES	40
99407	TOBACCO USE CESSATION INTENSIVE >10 MINUTES	72.05
99408	ALCOHOL/SUBSTANCE SCREEN & INTERVEN 15-30 MIN	97.19
99409	ALCOHOL/SUBSTANCE SCREEN & INTERVENTION >30 MIN	172.6
99415	PROLONGED CLINICAL STAFF SVC OFFICE/O/P 1ST HR	41.89
99416	PROLONGED CLINICAL STAFF SVC OFFICE/O/P EA ADDL	31.84
99417	PROLONGED OFFICE/OUTPATIENT E/M SVC EA 15 MIN	62.38
99429	DOT/USFS/FAA PHYSICAL	200
99495	TRANSITIONAL CARE MANAGE SRVC 14 DAY DISCHARGE	361.12
99496	TRANSITIONAL CARE MANAGE SRVC 7 DAY DISCHARGE	487.5
99497	ADVANCE CARE PLANNING FIRST 30 MINS	193
99999X	OB CODE	0
99AFT	AFTER HOURS DRAW FOR LAW ENFORCEMENT	50
A4300	IV CATHETER	30
A4351	INTERMITTENT URINARY CATHETER/ STRA	4.35
A4355	FOLEY CATH	22.5
A4357	BEDSIDE DRAINAGE BAG	15.96
A4364	DERMABOND	9.4
A4467	BELT STRAP SLEEV GRMNT COVER	40
A4565	SLING	19.99
A4566	SHOULDER SLING/VEST/ABRESTRAIN	30
A4590	CASTING FIBERGLASS	80.03
A4615	NASAL CANNULA	2
A4620	NON-REBREATHER MASK ADULT	5
A4750	IV TUBING SET UP	75
A6238	HYDROCOLLOID DRESSING, WOUND COVER	33.35
A6257	TEGADERM-TRANSPARENT FILM	2.26
COUNALC	ALCOHOL USE CESSATION COUNSELING	0
COUNDRG	DRUG USE CESSATION COUNSELING	0
COUNTOB	TOBACCO USE CESSATION COUNSELING	0
G0008	ADMINISTRATION OF INFLUENZA VIRUS VACCINE	49
G0071	PMT COMMUNICATION TECH-BASED SERVICES 5 MIN OR MORE	41.66
G0101	CA SCREEN;PELVIC/BREAST EXAM	109.98
G0108	DIAB MANAGE TRN PER INDIV	134.96

G0168	WOUND CLOSURE BY ADHESIVE	215.46
G0396	ALCOHOL/SUBS INTERV 15-30MN	67.02
G0397	ALCOHOL/SUBS INTERV >30 MIN	265.58
G0402	WELCOME INITIAL PREV EXAM MEDICARE	325.08
G0438	MEDICARE INIT ANNUAL EXAM	309.12
G0439	SUBSEQUENT ANNUAL MEDICARE WELLNESS	255
G0444	ANNUAL DEPRESSION SCREENING, MEDICARE	44
G0466	FQHC VISIT, NEW PATIENT	245.93
G0467	FQHC VISIT, ESTABLISHED PATIENT	210.97
G0468	FQHC VISIT, IPPE OR AWW	259.98
G0469	FQHC VISIT, MENTAL HEALTH, NEW PATIENT	270.05
G0470	FQHC VISIT, MENTAL HEALTH, EST. PATIENT	225.03
G0511	CHRONIC CARE MANAGEMENT	138.08
G2012	BRIEF CHECK IN BY MD OR OTHER QUALIFIED HEALTH CARE PROI	38.57
H0001	INDIVIDUAL ASSESSMENT AND TREATMENT PLAN FOR SUBSTANCI	100
H0004	ALCOHOL AND/OR DRUG SERVICES	39.15
H0049	ALCOHOL/DRUG SCREENING	36.99
H0050	ALCOHOL/DRUG SERVICE 15 MIN	100
IBHC	INTEGRATED BEHAVIORAL HEALTH	0
J0171	INJECTION ADRENALIN EPINEPHRINE	7
J0690	CEFAZOLIN SODIUM	6
J0696	ROCEPHIN	15
J0702	BETAMETHASONE ACET&SOD PHOSP	15.54
J1100	DEXAMETHASONE SODIUM PHOS	2
J1170	HYDROMORPHONE INJECTION	6
J1200	DIPHENHYDRAMINE HCL 50 IV OR IM	4.53
J1642	HEP LOCK / J LOOP	0.26
J1644	HEPARIN PER 10K UNITS	1.11
J1650	LOVENOX 10MG SC	5.13
J1815	INSULIN	2.8
J1885	TORADOL PER 15 MG	7.98
J1940	LASIX UP TO 20MG	7
J2060	LORAZEPAM TABLETS	3
J2175	DERMROL PER 100MG	13.01
J2180	PROMETHAZINE UP TO 50 MG	78
J2250	MIDAZOLAM PER ML	5
J2270	MORPHINE UP TO 10 MG	18
J2310	NARCAN PER 1ML	40.25
J2405	ZOFRAN	2
J2550	PHENERGAN UP TO 50 MG	10
J2930	INJ. METHYLPREDNISOLONE UP TO 125MG	17.39
J3101	TENECTEPLASE INJECTION PER 1MG	174.95
J3105	TERBUTALINE SULFATE INJ	20.01
J3300	TRIMCINOLONE ACETONIDE 1MG (KENALOG)	8.75
J3301	KENALOG 10 MG	6
J3360	INJECTION, DIAZEPAM, UP TO 5MG	15.89
J3420	VITAMIN B12 INJECTION	10

J3475	MGSO4 500MG	3
J3490	UNCLASSIFIED DRUG	0
J7030	NORMAL SALINE	19.01
J7060	DEXTROSE 500ML RTE IV	10.25
J7120	RINGERS LACTATE INFUSION	19.87
J7626	BUDESONIDE NON-COMP UNIT	12.86
J8540	DEXAMETHASONE, ORAL, 0.25MG	1
L0120	CERVICAL FLEXABLE NONADJUSTABLE FOA	41.73
L1820	KO ELAS W/ CONDYLE PADS & JO	179.04
L1830	KO IMMOB CANVAS LONG PRE OTS	111.41
L1831	KNEE ORTH POS LOCKING JOINT	362.38
L1902	ANKLE FOOT ORTHOSIS, PREFABRICATED	118.1
L3260	POST OP SHOE RIGID ROCKER	45.39
L3650	SHOULDER ORTHOSIS FIGURE 8 DESIGN ABDUCTION RESTRAINEF	85.04
L3670	SO ACRO/CLAV CAN WEB PRE OTS	175
L3702	EO W/O JOINTS CF	389.91
L3807	THUMBKEEPER SPLINT	325
L3809	WRIST/THUMB SUPPORT OST	280.2
L3908	COMFORT FORM WRIST	92.2
L3923	WRIST SPLINT	110.35
L3924	HFO WITHOUT JOINTS PRE OTS	112
L4350	ANKLE CONTROL ORTHO PRE OTS	119.29
L4386	WALKING BOOT,PREFABRICATED,FITTING/	242
L4387	WALKING BOOT	195.2
MISCMR	MEDICAL RECORD COPY 1-10	5
MISCMR2	MEDICAL RECORD COPY 11-20	15
MISCMR3	MEDICAL RECORD COPY 20+	20
MISCNS	NO SHOW	0
MISCNSF	INSUFFICIENT FUNDS	35
NURSECCMA	NURSE CCMA	0
NURSECMA	CMA	0
NURSECNA	NURSE VISIT	0
NURSELPN	LPN	0
NURSERN	RN	0
Q0091	PAP	89.03
Q0163	DIPHENHYDRAMINE HCL, 50MG, ORAL	1
Q4006	CAST SUP LONG ARM ADULT FBRG	69.01
Q4008	CAST SUP LONG ARM PED FBRGLS	40.01
Q4012	CAST SUP SHORT ARM PED FBRGLAS	28.99
Q4014	CAST SUP GAUNTLET FIBERGLASS	60
Q4017	CAST SUP LNG ARM SPLINT, ADULT (11 YEARS +)	30
Q4020	CAST SUP LNG ARM SPLNT PED FIBERGLASS (0-11 YRS)	22
Q4022	CAST SUPPLIES, SHORT ARM SPLINT, ADULT (11 YRS +)	35
Q4024	CAST SUP SHT ARM SPLNT PED F	20
Q4038	SHORT LEG CAST 11+ YEARS OLD	85.04
Q4040	CAST SUP SHRT LEG PED FBRGLS	50
Q4042	CAST SUPPLIES, LONG LEG SPLINT, ADULT (11 YEARS +), FIBERGL	71.99

Q4046	SHORT LEG SPLINT SUPPLIES	50
Q4049	FINGER SPLINT	15
S0020	MARCAINE 30 ML	10
S8450	SPLINT, FINGER	24
SPORT	SPORT PHYSICAL	29
T1015	FQHC, ALL INCLUSIVE VISIT	353.75
T1502	ADMINISTRATION OF ORAL, INTRAMUSCULAR AND/OR SUBCUT/	40
T1503	ADMINISTRATION OF MEDICATION, OTHER THAN ORAL AND/OR	51.01
TCMDA	DRUG AND ALCOHOL - TCM	0
TCMFIT	TCM FIT FOR DUTY TEST	200
WARM	WARM HANDOFF WITH BH PROVIDER	0
WOUNDCARE	WOUND CARE DONE BY NURSES	0