

Challis Area Health Center Fee Schedule Effective 10/1/2024

CPT	Description	2024/25 Fee
10060	INCISION & DRAINAGE ABSCESS SIMPLE/SINGLE	244
10061	INCISION & DRAINAGE ABSCESS COMPLICATED/MULTIPLE	418.37
10120	INCISION & REMOVAL FOREIGN BODY SUBQ TISS SIMPLE	292.41
10121	INCISION & REMOVAL FOREIGN BODY SUBQ TISS COMPL	538.31
10140	I&D HEMATOMA SEROMA/FLUID COLLECTION	291.47
10160	PUNCTURE ASPIRATION ABSCESS HEMATOMA BULLA/CYST	238.47
11042	DEBRIDEMENT SUBCUTANEOUS TISSUE 20 SQ CM/<	207.85
11045	DEBRIDEMENT SUBCUTANEOUS TISSUE EA ADDL 20 SQ CM	83.67
11055	PARING/CUTTING BENIGN HYPERKERATOTIC LESION 1	124.26
11102	TANGENTIAL BIOPSY SKIN SINGLE LESION	200.82
11103	TANGENTIAL BIOPSY SKIN SINGLE EA SEP/ADDITIONAL LESION	107.44
11104	PUNCH BIOPSY SKIN SINGLE LESION	235.49
11105	PUNCH BIOPSY SKIN EA SEP/ADDITIONAL SINGLE LESION	110.23
11106	INCISIONAL BIOPSY SKIN SINGLE LESION	334.7
11107	INCISIONAL BIOPSY SKIN EA SEP/ADDITIONAL SINGLE LESION	182.69
11200	REMOVAL SKN TAGS MLT FIBRQ TAGS ANY AREA UPW/15	166.95
11300	SHAVING SKIN LESION 1 TRUNK/ARM/LEG DIAM 0.5CM/<	159.86
11301	SHVG SKIN LESION 1 TRUNK/ARM/LEG DIAM 0.6-1.0 CM	215.88
11305	SHAVING SKIN LESION 1 S/N/H/F/G DIAM 0.5 CM/<	177.73
11306	SHAVING SKIN LESION 1 S/N/H/F/G DIAM 0.6-1.0 CM	186.15
11310	SHAVING SKIN LESION 1 F/E/E/N/L/M DIAM 0.5 CM/<	196.8
11311	SHVG SKIN LESION 1 F/E/E/N/L/M DIAM 0.6-1.0 CM	207.56
11400	EXC B9 LESION MRGN XCP SK TG T/A/L 0.5 CM/<	228.71
11402	EXC B9 LESION MRGN XCP SK TG T/A/L 1.1-2.0 CM	313.66
11403	EXC B9 LESION MRGN XCP SK TG T/A/L 2.1-3.0 CM	359.19
11420	EXC B9 LESION MRGN XCP SK TG S/N/H/F/G 0.5 CM/<	237.08
11421	EXC B9 LESION MRGN XCP SK TG S/N/H/F/G 0.6-1.0CM	287.28
11422	EXC B9 LESION MRGN XCP SK TG S/N/H/F/G 1.1-2.0CM	414.87
11441	EXC B9 LES MRGN XCP SK TG F/E/E/N/L/M 0.6-1.0CM	340.28
11602	EXCISION MAL LESION TRUNK/ARM/LEG 1.1-2.0 CM	450.84
11603	EXCISION MAL LESION TRUNK/ARM/LEG 2.1 TO 3.0 CM	488.1
11621	EXCISION MALIGNANT LESION S/N/H/F/G 0.6-1.0 CM	400.24
11622	EXCISION MALIGNANT LESION S/N/H/F/G 1.1-2.0 CM	450.45
11719	TRIMMING NONDYSTROPHIC NAILS ANY NUMBER	36.26
11720	DEBRIDEMENT NAIL ANY METHOD 1-5	66.07
11721	DEBRIDEMENT NAIL ANY METHOD 6/>	85.18
11730	AVULSION NAIL PLATE PARTIAL/COMPLETE SIMPLE 1	222.47
11732	AVULSION NAIL PLATE PARTIAL/COMP SIMPLE EA ADDL	90.65
11740	EVACUATION SUBUNGUAL HEMATOMA	108.78
11765	WEDGE EXCISION SKIN NAIL FOLD	253.04
11981	INSJ NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	273.57
11982	REMOVAL NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	307.59

12001	SIMPLE REPAIR SCALP/NECK/AX/GENIT/TRUNK 2.5CM/<	202.36
12002	SMPL REPAIR SCALP/NECK/AX/GENIT/TRUNK 2.6-7.5CM	273.93
12004	SIMPLE RPR SCALP/NECK/AX/GENIT/TRUNK 7.6-12.5CM	489.5
12005	SMPL RPR SCALP/NECK/AX/GENIT/TRUNK 12.6-20.0CM	589.91
12011	SIMPLE REPAIR F/E/E/N/L/M 2.5CM/<	314.28
12013	SIMPLE REPAIR F/E/E/N/L/M 2.6CM-5.0 CM	345.72
12031	REPAIR INTERMEDIATE WOUNDS OF SCALP, AXILLAE, TRUNK AND/OR EX	508.07
12032	REPAIR INTERMEDIATE S/A/T/E 2.6-7.5 CM	563.7
12035	REPAIR INTERMEDIATE S/A/T/E 12.6-20.0CM	845.12
12041	REPAIR INTERMEDIATE N/H/F/XTRNL GENT 2.5CM/<	479.74
12042	REPAIR INTERMEDIATE N/H/F/XTRNL GENT 2.6-7.5 CM	529.94
12051	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 2.5 CM/<	554.47
12052	REPAIR INTERMEDIATE F/E/E/N/L&/MUC 2.6-5.0 CM	617.3
12054	INTRMDT REPAIR-FACE, EARS, EYELIDS, LIPS, MUC MMBRNS 7.6-12.5 CM	870.22
16000	INITIAL TX 1ST DEGREE BURN LOCAL TX	150.61
16020	DRS&/DBRDMT PRTL-THKNS BURNS 1ST/SBSQ SMALL	165.93
16030	DRS&/DBRDMT PRTL-THKNS BURNS 1ST/SBSQ LARGE	549.46
17000	DESTRUCTION PREMALIGNANT LESION 1ST	137.6
17003	DESTRUCTION PREMALIGNANT LESION 2-14 EA	22.26
17004	DESTRUCTION PREMALIGNANT LESION 15/>	323.78
17110	DESTRUCTION BENIGN LESIONS UP TO 14	220.45
20103	EXPLORATION PENETRATING WOUND SPX EXTREMITY	1425.86
20550	INJECTION 1 TENDON SHEATH/LIGAMENT APONEUROSIS	157.84
20552	INJECTION SINGLE/MLT TRIGGER POINT 1/2 MUSCLES	218.09
20553	INJECTION SINGLE/MLT TRIGGER POINT 3/> MUSCLES	130.27
20600	ARTHROCENTESIS ASPIR&/INJ SMALL JT/BURSA W/O US	143.59
20605	ARTHROCENTESIS ASPIR&/INJ INTERM JT/BURS W/O US	157.03
20610	ARTHROCENTESIS ASPIR&/INJ MAJOR JT/BURSA W/O US	202.36
20612	ASPIRATION&/INJECTION GANGLION CYST ANY LOCATJ	150.16
21931	EXCISION TUMOR SOFT TIS BACK/FLANK SUBQ 3 CM/>	1212.61
23330	REMOVAL FOREIGN BODY SHOULDER SUBCUTANEOUS	482.02
23650	CLSD TX SHOULDER DISLC W/MANIPULATION W/O ANES	2174.88
26770	CLTX IPHAL JT DISLC W/MANJ W/O ANES	1120.5
27372	REMOVAL FOREIGN BODY DEEP THIGH/KNEE	1699.67
28660	CLTX INTERPHALANGEAL JOINT DISLOCATION W/O ANES	311.67
29065	APPLICATION CAST SHOULDER HAND LONG ARM	261.55
29075	APPLICATION CAST ELBOW FINGER SHORT ARM	223.61
29085	APPLICATION CAST HAND & LOWER FOREARM GAUNTLET	227.13
29105	APPLICATION LONG ARM SPLINT SHOULDER HAND	195.28
29125	APPLICATION SHORT ARM SPLINT FOREARM-HAND STATIC	164.38
29130	APPLICATION OF FINGER SPLINT	85.35
29260	STRAPPING ELBOW/WRIST	94.64
29405	APPLICATION SHORT LEG CAST BELOW KNEE-TOE	194.41
29505	APPLICATION LONG LEG SPLINT THIGH ANKLE/TOES	193.06

29515	APPLICATION OF SHORT LEG SPLINT	160.88
29580	STRAPPING UNNA BOOT	148.61
29581	APPL MLTLAYR COMPRES LEG BELOW KNEE W/ANKLE FOOT	134.43
30100	BIOPSY INTRANASAL	266.24
30300	REMOVAL FOREIGN BODY INTRANASAL OFFICE PROCEDURE	370.98
30901	CONTROL NASAL HEMORRHAGE ANTERIOR SIMPLE	286.17
30903	CONTROL NASAL HEMORRHAGE ANTERIOR COMPLEX	370.98
30905	CTRL NSL HEMRRG PST NASAL PACKS&/CAUTERY 1ST	525.46
30906	CTRL NSL HEMRRG PST NASAL PACKS&/CAUTERY SUBSQ	582.96
31500	INTUBATION ENDOTRACHEAL EMERGENCY PROCEDURE	1077.26
36000	INTRODUCTION NEEDLE/INTRACATHETER VEIN	75.18
36410	VNPNXR 3 YEARS/> PHYS/QHP SKILL	36.95
36415	COLLECTION VENOUS BLOOD VENIPUNCTURE	14.17
36416	COLLECTION CAPILLARY BLOOD SPECIMEN	10.12
36591	COLLECT BLOOD FROM IMPLANT VENOUS ACCESS DEVICE	61.16
36680	PLACEMENT NEEDLE INTRAOSSEOUS INFUSION	238.28
40800	DRG ABSC CST HMTMA VESTIBULE MOUTH SMPL	329.34
49422	REMOVAL TUNNELED INTRAPERITONEAL CATHETER	1128.07
51701	INSJ NON-NDWELLG BLADDER CATHETER	147.63
51702	INSJ TEMP NDWELLG BLADDER CATHETER SIMPLE	209.46
51705	CHANGE CYSTOSTOMY TUBE SIMPLE	147.95
54150	CIRCUMCISION W/CLAMP/OTH DEV W/BLOCK	376.54
54160	CIRCUMCISION NEONATE	609.37
54161	CIRCUMCISION AGE >28 DAYS	577.06
57160	FIT&INSJ PESSARY/OTH INTRAVAGINAL SUPPORT DEVICE	177.67
58301	REMOVAL INTRAUTERINE DEVICE IUD	235.49
59425	ANTEPARTUM CARE ONLY 4-6 VISITS	1102.31
59426	ANTEPARTUM CARE ONLY 7/> VISITS	2008.18
59430	POSTPARTUM CARE ONLY SEPARATE PROCEDURE	392.61
59510	OB ANTEPARTUM CARE CESAREAN DLVR & POSTPARTUM	4610.84
64450	INJECTION ANES OTHER PERIPHERAL NERVE/BRANCH	268.13
65205	REMOVAL FB EYE CONJUNCTIVAL SUPERFICIAL	138.8
65220	RMVL FB XTRNL EYE CORNEAL W/O SLIT LAMP	180.44
65222	RMVL FB XTRNL EYE CORNEAL W/SLIT LAMP	151.77
67820	CORRECTION TRICHIASIS EPILATION FORCEPS ONLY	118.61
67938	REMOVAL EMBEDDED FOREIGN BODY EYELID	407.69
69200	RMVL FB XTRNL AUDITORY CANAL W/O ANES	230.94
69209	REMOVAL IMPACTED CERUMEN IRRIGATION/LVG UNILAT	50.21
69210	REMOVAL IMPACTED CERUMEN INSTRUMENTATION UNILAT	138.62
70110	RADIOLOG EXAM MANDIBLE COMPL MINIMUM 4 VIEWS	118.43
70140	RADIOLOGIC EXAM,FACIAL BONES LESS T	119.87
70150	RADEX FACIAL BONES COMPLETE MINIMUM 3 VIEWS	144.43
70200	X-RAY OF EYE BONES, MINIMUM OF 4 VIEWS	140.09
70250	RADIOLOGIC EXAMINATION SKULL 4/> VIEWS	114.1

70360	RADIOLOGIC EXAMINATION NECK SOFT TISSUE	90.99
71045	RADIOLOGIC EXAM CHEST SINGLE VIEW	86.66
71046	RADIOLOGIC EXAM CHEST 2 VIEWS	98.73
71047	RADIOLOGIC EXAM CHEST 3 VIEWS	170.42
71100	RADEX RIBS UNILATERAL 2 VIEWS	109.76
71101	RADEX RIBS UNI W/POSTEROANT CH MINIMUM 3 VIEWS	131.43
71110	RADEX RIBS BILATERAL 3 VIEWS	135.76
72020	RADEX SPINE 1 VIEW SPECIFY LEVEL	72.21
72040	RADEX SPINE CERVICAL 2 OR 3 VIEWS	150.62
72050	RADEX SPINE CERVICAL 4 OR 5 VIEWS	190.78
72052	RADEX SPINE CERVICAL 6 OR MORE VIEWS	202.2
72070	RADEX SPINE THORACIC 2 VIEWS	101.21
72082	RADEX ENTIR THRC LMBR CRV SAC SPI W/SKULL 2/3 VW	254.67
72100	RADEX SPINE LUMBOSACRAL 2/3 VIEWS	150.32
72110	RADEX SPINE LUMBOSACRAL MINIMUM 4 VIEWS	183.2
72114	RADEX SPINE LUMBSCRL COMPL W/BENDING VIEWS MIN 6	227.65
72170	RADIOLOGIC EXAMINATION PELVIS 1/2 VIEWS	78.51
72202	X-RAY SACROILIAC JOINTS;3 OR MORE VIEWS	141.93
72220	RADEX SACRUM & COCCYX MINIMUM 2 VIEWS	102.54
73000	RADEX CLAVICLE COMPLETE	95.2
73020	RADEX SHOULDER 1 VIEW	85.21
73030	RADEX SHOULDER COMPLETE MINIMUM 2 VIEWS	86
73050	X-RAY ACROMIOCLAVICULAR JOINTS, BILAT, 2 VIEWS	116.98
73060	RADEX HUMERUS MINIMUM 2 VIEWS	78.92
73070	RADEX ELBOW 2 VIEWS	75.31
73080	RADEX ELBOW COMPLETE MINIMUM 3 VIEWS	95.2
73090	RADEX FOREARM 2 VIEWS	86
73100	RADEX WRIST 2 VIEWS	80.53
73110	RADEX WRIST COMPLETE MINIMUM 3 VIEWS	120.79
73120	RADEX HAND 2 VIEWS	70.46
73130	RADEX HAND MINIMUM 3 VIEWS	109.72
73140	RADEX FINGER MINIMUM 2 VIEWS	86.35
73501	RADEX HIP UNILATERAL WITH PELVIS 1 VIEW	115.54
73502	RADEX HIP UNILATERAL WITH PELVIS 2-3 VIEWS	131.53
73503	RADEX HIP UNILATERAL WITH PELVIS MINIMUM 4 VIEWS	200.75
73521	RADEX HIPS BILATERAL WITH PELVIS 2 VIEWS	154.53
73522	RADEX HIPS BILATERAL WITH PELVIS 3-4 VIEWSS	190.64
73523	RADEX HIPS BILATERAL WITH PELVIS MINIMUM 5 VIEWS	220.97
73551	RADIOLOGIC EXAMINATION FEMUR 1 VIEW	108.32
73552	RADIOLOGIC EXAMINATION FEMUR MINIMUM 2 VIEWS	103.2
73560	RADIOLOGIC EXAMINATION KNEE 1/2 VIEWS	90.37
73562	RADIOLOGIC EXAMINATION KNEE 3 VIEWS	140.29
73564	RADIOLOGIC EXAM KNEE COMPLETE 4/MORE VIEWS	157.33
73590	RADIOLOGIC EXAMINATION TIBIA & FIBULA 2 VIEWS	113.24

73600	RADIOLOGIC EXAMINATION ANKLE 2 VIEWS	93.38
73610	RADEX ANKLE COMPLETE MINIMUM 3 VIEWS	111.3
73620	RADIOLOGIC EXAMINATION FOOT 2 VIEWS	111.3
73630	RADEX FOOT COMPLETE MINIMUM 3 VIEWS	102.42
73650	RADEX CALCANEUS MINIMUM 2 VIEWS	106.24
73660	RADEX TOE MINIMUM 2 VIEWS	86
74018	RADIOLOGIC EXAM, 1V ABD	88.93
74019	RADIOLOGIC EXAM ABDOMEN 2 VIEWS	76.07
74021	RADIOLOGIC EXAM ABDOMEN 3+ VIEWS	170.42
80048	BASIC METABOLIC PANEL CALCIUM TOTAL	48.2
80050	GENERAL HEALTH PANEL	118.78
80053	COMPREHENSIVE METABOLIC PANEL	53.35
80061	LIPID PANEL	57.38
80069	RENAL FUNCTION PANEL	51.34
80074	ACUTE HEPATITIS PANEL	85.56
80076	HEPATIC FUNCTION PANEL	56.37
80081	OBSTETRIC PANEL	300.63
80156	DRUG ASSAY CARBAMAZEPINE TOTAL	72.01
80162	DRUG SCREEN QUANTITATIVE DIGOXIN TOTAL	59.36
80164	DRUG ASSAY VALPROIC DIPROPYLACETIC ACID TOTAL	72.98
80165	DRUG SCREEN QUANT DIPROPYLACETIC ACID FREE	61.3
80175	DRUG SCREEN QUANTITATIVE LAMOTRIGINE	75.9
80178	DRUG SCREEN QUANTITATIVE LITHIUM	48.2
80185	DRUG SCREEN QUANTITATIVE PHENYTOIN TOTAL	65.19
80197	DRUG SCREEN QUANTITATIVE TACROLIMUS	50.33
80202	DRUG SCREEN QUANTITATIVE VANCOMYCIN	79.79
80299	QUANTITATION DRUG NOT ELSEWHERE SPECIFIED	83.68
80305	DRUG TEST PRSMV READ DIRECT OPTICAL OBS PR DATE	40.08
80307	DRUG TST PRSMV INSTRMNT CHEM ANALYZERS PR DATE	200.82
80320	DRUG SCREEN QUANTITATIVE ALCOHOLS	48.65
80323	ALKALOIDS NOT OTHERWISE SPECIFIED	93.41
80326	DRUG SCREEN QUANT AMPHETAMINES 5 OR MORE	37.95
80329	DRUG SCREEN ANALGESICS NON-OPIOID 1 OR 2	73.95
80332	ANTIDEPRESSANTS SEROTONERGIC CLASS 1 OR 2	62.28
80337	ANTIDEPRESSANTS TRICYCLIC OTHER CYCLICALS 6/MORE	92.44
80338	ANTIDEPRESSANTS NOT OTHERWISE SPECIFIED	57.41
80339	ANTIEPILEPTICS NOT OTHERWISE SPECIFIED 1-3	55.46
80342	ANTIPSYCHOTICS NOT OTHERWISE SPECIFIED 1-3	57.41
80345	DRUG SCREENING BARBITURATES	73.95
80358	DRUG SCREENING METHADONE	63.25
80361	DRUG SCREENING OPIATES 1 OR MORE	119.69
80363	DRUG SCREENING OPIOIDS AND OPIATE ANALOGS 3 OR 4	146.93
80365	DRUG SCREENING OXYCODONE	68.11
80368	DRUG SCREENING SEDATIVE HYPNOTICS	72.01

80370	DRUG SCREENING SKEL MUSCLE RELAXANTS 3 OR MORE	49.63
80377	DRUG/SUBSTANCE DEFINITIVE QUAL/QUANT NOS 7/MORE	71.03
81001	URNLS DIP STICK/TABLET REAGENT AUTO MICROSCOPY	27.06
81002	URNLS DIP STICK/TABLET RGNT NON-AUTO W/O MICRSCP	12.03
81015	URINALYSIS, MICROSCOPIC	15.57
81025	URINE PREGNANCY TEST VISUAL COLOR CMPRSN METHS	21.14
81162	BRCA1&BRCA2 FULL SEQ ANALYS/FULL DUP/DEL ANALYS	2481.28
81240	F2 GENE ANALYSIS 20210G >A VARIANT	136.23
81241	F5 COAGULATION FACTOR V ANAL LEIDEN VARIANT	151.8
81256	HFE HEMOCHROMATOSIS GENE ANAL COMMON VARIANTS	362.95
81270	JAK2 GENE ANALYSIS P.VAL617PHE VARIANT	338.62
82024	ADRENOCORTICOTROPIC HORMONE ACTH	152.77
82040	ALBUMIN SERUM PLASMA/WHOLE BLOOD	23.09
82043	URINE ALBUMIN QUANTITATIVE	46.3
82075	ASSAY OF ALCOHOL BREATH	50.21
82085	ASSAY OF ALDOLASE	51.57
82105	ALPHA-FETOPROTEIN SERUM	74.92
82107	AFP-L3 FRACTION ISOFORM & TOTAL AFP W/RATIO	186.83
82140	ASSAY OF AMMONIA	58.38
82150	ASSAY OF AMYLASE	51.21
82172	APOLIPOPROTEIN EACH	45.3
82175	ASSAY OF ARSENIC	88.55
82232	BETA-2 MICROGLOBULIN	81.74
82247	BILIRUBIN TOTAL	20.13
82248	BILIRUBIN DIRECT	30.12
82270	BLOOD OCCULT PEROXIDASE ACTV QUAL FECES 1 DETER	30.12
82274	BLOOD OCCULT FECAL HGB DETER IA QUAL FECES 1-3	30.06
82306	25 HYDROXY INCLUDES FRACTIONS IF PERFORMED	65.77
82310	CALCIUM TOTAL	22.15
82330	CALCIUM IONIZED	80.53
82331	CALCIUM AFTER CALCIUM INFUSION TEST	16.54
82340	CALCIUM URINE QUANTITATIVE TIMED SPECIMEN	35.23
82365	CALCULUS INFRARED SPECTROSCOPY	63.25
82374	CARBON DIOXIDE BICARBONATE	8.76
82378	CARCINOEMBRYONIC ANTIGEN CEA	78.82
82397	CHEMILUMINESCENT ASSAY	65.77
82465	CHOLESTEROL SERUM/WHOLE BLOOD TOTA	18.49
82523	COLLAGEN CROSS LINKS ANY METHOD	104.12
82525	ASSAY OF COPPER	30.35
82530	CORTISOL FREE	75.9
82533	CORTISOL TOTAL	50.33
82542	COL-CHR/MS NONDRUG ANALYTE NES QUAL/QUAN EA SPEC	53.52
82550	CREATINE KINASE TOTAL	35.07
82552	CREATINE KINASE ISOENZYMES	50.6

82553	CREATINE KINASE MB FRACTION ONLY	39.9
82565	CREATININE BLOOD	29.34
82570	CREATININE OTHER SOURCE	24.16
82607	CYANOCOBALAMIN VITAMIN B-12	65.43
82610	CYSTATIN C	73.95
82626	DEHYDROEPIANDROSTERONE	123.58
82627	DEHYDROEPIANDROSTERONE-SULFATE	54.36
82642	DIHYDROTESTOSTERONE (DHT)	75.5
82652	1 25 DIHYDROXY INCLUDES FRACTIONS IF PERFORMED	100.66
82668	ASSAY OF ERYTHROPOIETIN	98.28
82670	ASSAY OF ESTRADIOL	90.59
82672	ASSAY OF ESTROGENS TOTAL	100.66
82728	ASSAY OF FERRITIN	56.37
82746	ASSAY OF FOLIC ACID SERUM	33.39
82784	ASSAY OF GAMMAGLOBULIN IGA IGD IGG IGM EACH	65.27
82785	ASSAY OF GAMMAGLOBULIN IGE	35.23
82787	GAMMAGLOBULIN IMMUNOGLOBULIN SUBCLASSE	57.41
82947	GLUCOSE QUANTITATIVE BLOOD XCPT REAGENT STRIP	18.12
82948	GLUCOSE BLOOD REAGENT STRIP	12.08
82950	GLUCOSE POST GLUCOSE DOSE	26.11
82951	GLUCOSE TOLERANCE TEST GTT 3 SPECIMENS	45.09
82962	GLUC BLD GLUC MNTR DEV CLEARED FDA SPEC HOME USE	24.31
82977	ASSAY OF GLUTAMYLTRASE GAMMA	27.59
83001	GONADOTROPIN FOLLICLE STIMULATING HORMONE	80.33
83002	GONADOTROPIN LUTEINIZING HORMONE	76.31
83010	ASSAY OF HAPTOGLOBIN QUANTITATIVE	68.11
83013	HELICOBACTER PYLORI, UREA BREATH TEST	126.47
83036	HEMOGLOBIN GLYCOSYLATED A1C	41.27
83090	ASSAY OF HOMOCYSTEINE	66.44
83516	IMMUNOASSAY ANALYTE QUAL/SEMIQUAL MULTIPLE STEP	45.18
83519	IMMUNOASSAY ANALYTE QUANT RADIOIMMUNOASSAY	100.22
83520	IMMUNOASSAY ANALYTE QUANTITATIVE NOS	84.55
83521	IMMUNOGLOBULIN LIGHT CHAINS FREE EACH	40.26
83525	ASSAY OF INSULIN TOTAL	23.27
83540	ASSAY OF IRON	28.18
83550	IRON BINDING CAPACITY	40.26
83615	LACTATE DEHYDROGENASE LDH	29.19
83655	ASSAY OF LEAD	31.13
83690	ASSAY OF LIPASE	45.09
83695	LIPOPROTEIN (A)	45.3
83704	LIPOPROTEIN BLOOD QUAN NUMBERS & SUBCLASSES	66.17
83721	LIPOPROTEIN DIRECT MEASUREMENT LDL CHOLESTEROL	47.31
83735	ASSAY OF MAGNESIUM	25.17
83789	MASS SPECT&TANDEM MASS SPECT NONDRG ANAL NES EA	47.68

83825	ASSAY OF MERCURY QUANTITATIVE	94.39
83835	METANEPHRINES	127.47
83872	MUCIN SYNOVIAL FLUID ROPES TEST	30.16
83874	MYOGLOBIN	57.41
83880	NATRIURETIC PEPTIDE	100.66
83883	ASSAY OF NEPHELOMETRY EACH ANALYTE NES	80.76
83921	ORGANIC ACID 1 QUANTITATIVE	110.73
83930	ASSAY OF OSMOLALITY BLOOD	41.84
83935	ASSAY OF OSMOLALITY URINE	44.76
83970	ASSAY OF PARATHORMONE	101.18
83992	ASSAY OF PHENCYCLIDINE	37.95
83993	ASSAY OF CALPROTECTIN FECAL	156.66
84075	ASSAY OF PHOSPHATASE ALKALINE	14.6
84100	ASSAY OF PHOSPHORUS INORGANIC	20.13
84132	POTASSIUM SERUM PLASMA/WHOLE BLOOD	17.51
84134	PREALBUMIN	67.14
84144	ASSAY OF PROGESTERONE	75.31
84146	ASSAY OF PROLACTIN	80.33
84152	ASSAY OF PROSTATE SPECIFIC ANTIGEN COMPLEXED	60.33
84153	ASSAY OF PROSTATE SPECIFIC ANTIGEN TOTAL	70.29
84154	ASSAY OF PROSTATE SPECIFIC ANTIGEN FREE	35.23
84155	PROTEIN XCPT REFRACTOMETRY SERUM PLASMA/WHL BLD	25.16
84156	PROTEIN TOTAL XCPT REFRACTOMETRY URINE	10.07
84165	PROTEIN ELECTROPHORETIC FRACTJ&QUANTJ SERUM	50.59
84166	PROTEIN ELECTROP FXJ&QUAN OTH FLUS CONCENTRATION	77.84
84207	ASSAY OF PYRIDOXAL PHOSPHATE	123.58
84270	ASSAY OF SEX HORMONE BINDING GLOBULIN	100.66
84300	ASSAY OF URINE SODIUM	18.49
84305	ASSAY OF SOMATOMEDIN	115.47
84402	ASSAY OF TESTOSTERONE FREE	45.3
84403	ASSAY OF TESTOSTERONE TOTAL	78.92
84425	ASSAY OF THIAMINE-VITAMIN B-1	100.66
84432	ASSAY OF THYROGLOBULIN	95.63
84436	ASSAY OF THYROXINE TOTAL	45.18
84439	ASSAY OF FREE THYROXINE	55.23
84443	ASSAY OF THYROID STIMULATING HORMONE TSH	55.36
84445	THYROID STIMULATING IMMUNE GLOBULINS TSI	233.53
84450	TRANSFERASE ASPARTATE AMINO AST SGOT	29.19
84460	TRANSFERASE ALANINE AMINO ALT SGPT	17.11
84466	ASSAY OF L7383TRANSFERRIN	40.47
84478	ASSAY OF TRIGLYCERIDES	32.21
84479	THYROID HORM UPTK/THYROID HORMONE BINDING RATIO	29.19
84480	ASSAY OF TRIIODOTHYRONINE T3 TOTAL TT3	40.08
84481	ASSAY OF TRIIODOTHYRONINE T3 FREE	55.36

84482	TRIIODOTHYRONINE T3 REVERSE	1607
84484	ASSAY OF TROPONIN QUANTITATIVE	45.3
84520	ASSAY OF UREA NITROGEN QUANTITATIVE	20.13
84550	ASSAY OF BLOOD/URIC ACID	29.12
84590	ASSAY OF VITAMIN A	75.9
84630	ASSAY OF ZINC	80.53
84681	ASSAY OF C-PEPTIDE	96.63
84702	GONADOTROPIN CHORIONIC QUANTITATIVE	50.59
84703	GONADOTROPIN CHORIONIC QUALITATIVE	40.26
85007	BLOOD COUNT SMEAR MCRSCP W/MNL DIFRNTL WBC COUNT	20.04
85013	BLOOD COUNT SPUN MICROHEMATOCRIT	11.68
85014	BLOOD COUNT HEMATOCRIT	18.04
85018	BLOOD COUNT HEMOGLOBIN	18.04
85025	BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC	29.34
85027	BLOOD COUNT COMPLETE AUTOMATED	35.23
85045	BLOOD COUNT RETICULOCYTE AUTOMATED	26.27
85048	BLOOD COUNT LEUKOCYTE WBC AUTOMATED	6.81
85049	BLOOD COUNT PLATELET AUTOMATED	21.41
85060	BLOOD SMEAR PERIPHERAL INTERP PHYS W/WRIT REPORT	85.56
85300	CLOTTING INHIBITORS ANTITHROMBIN III ACTIVITY	90.49
85301	CLOTTING INHIBITRS ANTITHROMBN III ANTIGEN ASSAY	135.25
85303	CLOTTING INHIBITORS PROTEIN C ACTIVITY	128.44
85306	CLOTTING INHIBITORS PROTEIN S FREE	110.93
85379	FIBRIN DGRADJ PRODUCTS D-DIMER QUANTITATIVE	65.27
85597	PHOSPHOLIPID NEUTRALIZATION PLATELET	78.82
85610	PROTHROMBIN TIME	25.1
85613	RUSSELL VIPER VENOM TIME DILUTED	51.57
85651	SEDIMENTATION RATE RBC NON-AUTOMATED	28.11
85652	SEDIMENTATION RATE RBC AUTOMATED	20.24
85730	THROMBOPLASTIN TIME PARTIAL PLASMA/WHOLE BLOOD	37.15
86001	ALLERGEN SPECIFIC IGG QUAN/SEMIQUAN EA ALLERGEN	17.51
86003	ALLERGEN SPEC IGE CRUDE ALLERGEN EXTRACT EACH	30.2
86015	ACTIN SMOOTH MUSCLE ANTIBODY EACH	72.01
86021	ANTIBODY IDENTIFICATION LEUKOCYTE ANTIBODIES	96.33
86038	ANTINUCLEAR ANTIBODIES ANA	35.23
86039	ANTINUCLEAR ANTIBODIES ANA TITER	18.12
86140	C-REACTIVE PROTEIN	50.1
86146	BETA 2 GLYCOPROTEIN I ANTIBODY EACH	50.1
86147	CARDIOLIPIN ANTIBODY EACH IG CLASS	55.23
86148	ANTI-PHOSPHATIDYLSERINE ANTIBODY	68.11
86160	COMPLEMENT ANTIGEN EACH COMPONENT	30.2
86162	COMPLEMENT TOTAL HEMOLYTIC	103.14
86200	CYCLIC CITRULLINATED PEPTIDE ANTIBODY	96.39
86225	DNA ANTIBODY NATIVE/DOUBLE STRANDED	66.14

86235	EXTRACTABLE NUCLEAR ANTIGEN ANTIBODY ANY METHOD	80.17
86255	FLUORESCENT NONNFCT AGT ANTB SCREEN EA ANTIBODY	80.76
86300	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 15-3	90.49
86301	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 19-9	97.31
86304	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 125	91.6
86308	HETEROPHILE ANTIBODIES SCREEN	15.18
86316	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE	113.85
86317	IMMUNOASSAY INFECTIOUS AGENT ANTIBODY QUAN NOS	30.12
86318	IMMUNOASSAY NFCT AGT ANTB QUAL/SEMIQUAN 1 STEP	25.1
86334	IMMUNOFIXJ ELECTROPHORESIS SERUM	108.01
86337	INSULIN ANTIBODIES	133.31
86341	ISLET CELL ANTIBODY	128.44
86355	B CELLS TOTAL COUNT	95.36
86357	NATURAL KILLER CELLS TOTAL COUNT	76.87
86359	T CELLS TOTAL COUNT	108.98
86360	T CELLS ABSOLUTE CD4&CD8 COUNT RATIO	164.45
86364	TISSUE TRANSGLUTAMINASE EA IMMUNOGLOBULIN CLASS	30.2
86376	MICROSOMAL ANTIBODIES EACH	85.56
86381	MITOCHONDRIAL ANTIBODY EACH	91.47
86431	RHEUMATOID FACTOR QUANTITATIVE	36.15
86480	TB CELL MEDIATED ANTIGN RESPNSE GAMMA INTERFERON	126.47
86580	SKIN TEST; TUBERCULOSIS, INTRADERMAL	25.1
86592	SYPHILIS TEST NON-TREPONEMAL ANTIBODY QUAL	27.06
86606	ANTIBODY ASPERGILLUS	50.6
86609	ANTIBODY BACTERIUM NOT ELSEWHERE SPECIFIED	27.25
86617	ANTIBODY BORRELIA BURGDORFERI CONFIRMATORY TST	104.12
86618	ANTIBODY BORRELIA BURGDORFERI LYME DISEASE	96.33
86644	ANTIBODY CYTOMEGALOVIRUS CMV	81.74
86663	ANTIBODY EPSTEIN-BARR EB VIRUS EARLY ANTIGEN EA	60.33
86664	ANTIBODY EPSTEIN-BARR EB VIRUS NUCLEAR AG EBNA	95.63
86665	ANTIBODY EPSTEIN-BARR EB VIRUS VIRAL CAPSID VCA	90.59
86677	ANTIBODY HELICOBACTER PYLORI	50.33
86684	ANTIBODY HAEMOPHILUS INFLUENZA	100.22
86696	ANTIBODY HERPES SMPLX TYPE 2	40.47
86703	ANTIBODY HIV-1&HIV-2 SINGLE RESULT	45.3
86704	HEPATITIS B CORE ANTIBODY HBCAB TOTAL	63.25
86706	HEPATITIS B SURF ANTIBODY HBSAB	53.12
86708	HEPATITIS A ANTIBODY HAAB	67.14
86735	ANTIBODY MUMPS	80.53
86762	ANTIBODY RUBELLA	52.21
86765	ANTIBODY RUBEOLA	50.33
86769	ANTB SEVERE AQT RESPIR SYND SARS-COV-2 COVID19	55.46
86780	ANTIBODY TREPONEMA PALLIDUM	40.26
86784	ANTIBODY TRICHINELLA	68.11

86787	ANTIBODY VARICELLA-ZOSTER	100.66
86800	THYROGLOBULIN ANTIBODY	80.53
86803	HEPATITIS C ANTIBODY	32.38
86812	HLA TYPING A/B/C SINGLE ANTIGEN	45.3
86850	ANTIBODY SCREEN RBC EACH SERUM TECHNIQUE	37.24
86900	BLOOD TYPING SEROLOGIC ABO	32.21
86901	BLOOD TYPING SEROLOGIC RH (D)	38.25
87015	CONCENTRATION INFECTIOUS AGENTS	26.27
87045	CUL BACT STOOL AEROBIC ISOL SALMONELLA&SHIGELL	39.9
87046	CUL BACT STOOL AEROBIC ADDL PATHOGENS&ID EA	38.92
87070	CUL BACT XCPT URINE BLOOD/STOOL AEROBIC ISOL	60.25
87075	CULTURE BACTERIAL ANY SOURCE ANAEROBIC ISO&ID	57.41
87077	CUL BACT AEROBIC ADDL METHS DEFINITIVE EA ISOL	66.27
87081	CUL PRSMPTV PTHGNC ORGANISM SCR N W/COLONY ESTIMJ	22.26
87086	CULTURE BACTERIAL QUANTTATIVE COLONY COUNT URINE	45.18
87088	CULTURE BCT ISOL&PRSMPTV ID ISOLATE EA URINE	35.14
87101	CUL FNGI MOLD/YEAST PRSMPTV ID SKN HAIR/NAIL	37.95
87102	CULTURE FNGI MOLD/YEAST PRSMPTV OTH XCPT BLOOD	34.06
87140	CULTURE TYPING IMMUNOFLUORESCENT EACH ANTISERUM	36
87147	CULTURE TYPING IMMUNOLOGIC OTH/THN IMMUNOFLUORES	22.38
87168	MACROSCOPIC EXAMINATION ARTHROPOD	33.08
87169	MACROSCOPIC EXAMINATION PARASITE	22.38
87177	OVA&PARASITES DIRECT SMEARS CONCENTRATION & ID	34.06
87181	SUSCEPTBILTY STDY ANTIMICRBIAL AGNT AGAR DILUTJ	20.43
87186	SUSCEPTBILTY STDY ANTIMICRBIAL MICRO/AGAR DILUTJ	43.28
87205	SMR PRIM SRC GRAM/GIEMSA STAIN BCT FUNGI/CELL	30.2
87209	SMR PRIM SRC CPLX SPEC STAIN OVA&PARASITS	59.36
87210	SMR PRIM SRC WET MOUNT NFCT AGT	15.18
87220	TISS KOH SLIDE SAMPS SKN/HR/NLS FNGI/ECTOPARASIT	20.04
87230	TOXIN/ANTITOXIN ASSAY TISSUE CULTURE	107.04
87272	IAADI CRYPTOSPORIDIUM	40.87
87324	IAAD IA CLOSTRIDIUM DIFFICILE TOXIN	62.28
87328	CRYPTO AG, EIA	57.41
87329	IAAD IA GIARDIA	53.52
87338	IAAD IA HPYLORI STOOL	111.9
87340	IAAD IA HEPATITIS B SURFACE ANTIGEN	50.2
87341	IAAD IA HEPATITIS B SURFACE AG NEUTRALIZATION	56.44
87385	IAAD IA HISTOPLASM CAPSULATUM	108.98
87389	IAAD IA HIV-1 AG W/HIV-1 & HIV-2 ANTBDY SINGLE	45.3
87426	COVID-19 ANITGEN TEST FOR TEACHERS, SCHOOL STAFF, STUDENTS, H	65.14
87427	IAAD IA SHIGA-LIKE TOXIN	60.33
87430	IAAD IA STREPTOCOCCUS GROUP A	35.14
87449	IAAD IA MULT STEP METHOD NOS EACH ORGANISM	62.28
87491	IADNA CHLAMYDIA TRACHOMATIS AMPLIFIED PROBE TQ	60.4

87493	INF AGENT DET NUCLEIC ACID CLOSTRIDIUM AMP PROBE	100.22
87502	INFECTIOUS AGENT DNA/RNA INFLUENZA 1ST 2 TYPES	145.31
87517	IADNA HEPATITIS B VIRUS QUANTIFICATION	313.32
87522	IADNA HEPATITIS C QUANT & REVERSE TRANSCRIPTION	258.83
87530	NUCLEIC ACID DETECTION; HERPES SIMPLEX VIRUS, QUANTIFICATION	156.66
87536	IADNA HIV-1 QUANT & REVERSE TRANSCRIPTION	301.65
87591	IADNA NEISSERIA GONORRHOEAE AMPLIFIED PROBE TQ	60.4
87623	IADNA HUMAN PAPILLOMAVIRUS LOW-RISK TYPES	97.31
87624	IADNA HUMAN PAPILLOMAVIRUS HIGH-RISK TYPES	55.36
87625	IADNA HUMAN PAPILLOMAVIRUS TYPES 16 & 18 ONLY	116.77
87635	IADNA SARS-COV-2 COVID-19 AMPLIFIED PROBE TQ	125.26
87641	IADNA S AUREUS METHICILLIN RESIST AMP PROBE TQ	75.16
87651	IADNA STREPTOCOCCUS GROUP A AMPLIFIED PROBE TQ	87.18
87653	IADNA STREPTOCOCCUS GROUP B AMPLIFIED PROBE TQ	75.89
87661	IADNA TRICHOMONAS VAGINALIS AMPLIFIED PROBE TECH	75.49
87798	IADNA NOS AMPLIFIED PROBE TQ EACH ORGANISM	80.94
87799	IADNA NOS QUANTIFICATION EACH ORGANISM	97.31
87804	IAADIADOO INFLUENZA	33.22
87807	IAADIADOO RESPIRATORY SYNCTIAL VIRUS	26.17
87811	COVID-19 ANITGEN TEST FOR UNINSURED OR UNDERINSURED	65.43
87880	IAADIADOO STREPTOCOCCUS GROUP A	30.35
87902	NFCT AGNT GENOTYP NUCLEIC ACID HEPATITIS C VIRUS	514.74
88104	CYTP FLU WASHGS/BRUSHINGS XCPT C/V SMRS INTERPJ	180.99
88142	CYTP CERV/VAG AUTO THIN LAYER PREP MNL SCREEN	59.7
88175	CYTP C/V AUTO THIN LYR PREPJ SCR MNL RESCR PHYS	45.3
88300	LEVEL I SURG PATHOLOGY GROSS EXAMINATION ONLY	90.59
89051	CELL COUNT, MSIC BODY FLUID WITH DIFF	36.98
89055	LEUKOCYTE ASSMT FECAL QUAL/SEMIQUANTITATIVE	27.25
89060	CRYSTAL ID BY LIGHT MICROSCOPY TISSUE/BODY FLUID EXCEPT URINE	47.68
90460	IMMUNIZATION ADMIN THROUGH 18 YRS OF AGE	40.08
90471	IM ADM PRQ ID SUBQ/IM NJXS 1 VACCINE	42.17
90472	IM ADM PRQ ID SUBQ/IM NJXS EA VACCINE	25.1
90632	HEPA VACCINE ADULT DOSE FOR INTRAMUSCULAR USE	86.18
90653	IIV ADJUVANTED VACCINE FOR INTRAMUSCULAR USE	76.66
90656	IIV3 VACC PRESERVATIVE FREE 0.5 ML DOSAGE IM USE	26.9
90658	IIV3 VACCINE SPLIT VIRUS 0.5 ML DOSAGE IM USE	26.9
90662	IIV VACCINE PRESERV FREE INCREASED AG COUNT IM	73.15
90674	CCIIV4 VACCINE PRESERVATIVE FREE 0.5 ML IM USE	40.26
90686	IIV4 VACC PRESRV FREE 0.5 ML DOS FOR IM USE	30.06
90694	AIV4 VACC INACTIVATED PRSRV FR 0.5ML DOS IM USE	81.6
90715	TDAP VACCINE 7 YRS/> IM	82.97
90785	PSYCHOTHERAPY COMPLEX INTERACTIVE	25.3
90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	300.63
90832	PSYCHOTHERAPY W/PATIENT 30 MINUTES	136.59

90833	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 30 MIN	150.61
90834	PSYCHOTHERAPY W/PATIENT 45 MINUTES	180.74
90836	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 45 MIN	195.41
90837	PSYCHOTHERAPY W/PATIENT 60 MINUTES	243.21
90838	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 60 MIN	251.02
90839	PSYCHOTHERAPY FOR CRISIS INITIAL 60 MINUTES	233.53
90840	PYSCHOTHERAPY CRISIS ADDITIONAL 30 MINS	114.67
90846	FAMILY PSYCHOTHERAPY W/O PATIENT PRESENT 50 MINS	157.07
90847	FAMILY PSYCHOTHERAPY W/PATIENT PRESENT 50 MINS	164.61
92552	PURE TONE AUDIOMETRY AIR ONLY	56.6
92950	CARDIOPULMONARY RESUSCITATION	756.18
92960	CARDIOVERSION ELECTIVE ARRHYTHMIA EXTERNAL	378.41
93000	EKG ROUTINE ECG W/LEAST 12 LDS W/I&R	50.2
93005	EKG ROUTINE ECG W/LEAST 12 LDS TRCG ONLY W/O I&R	29.06
93010	ECG ROUTINE ECG W/LEAST 12 LDS I&R ONLY	33.3
93040	RHYTHM ECG 1-3 LEADS W/INTERPRETATION & REPORT	44.38
93041	RHYTHM ECG 1-3 LEADS TRACING ONLY W/O I&R	52.45
94010	SPIROMETRY W/VC EXPIRATORY FLO W/WO MXML VOL VNTJ	62.41
94060	BRNCDILAT RSPSE SPMTRY PRE&POST-BRONCDILAT ADMIN	143.91
94150	VITAL CAPACITY TOTAL SEPARATE PROCEDURE	40.35
94618	PULMONARY STRESS TESTING	111.63
94640	PRESSURIZED/NONPRESSURIZED INHALATION TREATMENT	37.08
95115	PROF SVCS ALLG IMMNTX X W/PRV ALLGIC XTRCS 1 NJX	18.12
95117	PROF SVCS ALLG IMMNTX X W/PRV ALLGIC XTRCS NJXS	25.29
95992	CANALITH REPOSITIONING PROCEDURE	107.59
96110	DEVELOPMENTAL SCREEN W/SCORING & DOC STD INSTRM	18.6
96127	BEHAV ASSMT W/SCORE & DOCD/STAND INSTRUMENT	15.1
96156	HEALTH BEHAVIOR ASSESSMENT/RE-ASSESSMENT	351.14
96158	HEALTH BEHAVIOR IVNTJ INDIV F2F 1ST 30 MIN	106.93
96159	HEALTH BEHAVIOR IVNTJ INDIV F2F EA ADDL 15 MIN	36.29
96160	PT-FOCUSED HLTH RISK ASSMT SCORE DOC STND INSTRM	20.13
96360	IV INFUSION HYDRATION INITIAL 31 MIN-1 HOUR	106.24
96361	IV INFUSION HYDRATION EACH ADDITIONAL HOUR	30.2
96365	IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST TO 1 HR	135.55
96372	THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/IM	47.55
96374	THER PROPH/DX NJX IV PUSH SINGLE/1ST SBST/DRUG	90.37
96375	THERAPEUTIC INJECTION IV PUSH EACH NEW DRUG	40.26
96523	IRRIGAJ IMPLNTD VENOUS ACCESS DRUG DELIVERY SYST	75.32
97597	DEBRIDEMENT OPEN WOUND 20 SQ CM/<	175.37
97602	RMVL DEVITAL TISS N-SLCTV DBRDMT W/O ANES 1 SESS	84.87
99000	HANDLG&/OR CONVEY OF SPEC FOR TR OFFICE TO LAB	22.05
99024	POSTOP FOLLOW UP VISIT RELATED TO ORIGINAL PX	88.18
99050	SERVICES PROVIDED OFFICE OTH/THN REG SCHED HOURS	43.65
99058	SVC PRV EMER BASIS IN OFFICE DISRUPTING SVCS	80.17

99151	MOD SED SAME PHYS/QHP INITIAL 15 MINS <5 YRS	149.29
99152	MOD SED SAME PHYS/QHP INITIAL 15 MINS 5/> YRS	75.82
99153	MOD SED SAME PHYS/QHP EACH ADDL 15 MINS	134.28
99188	APPLICATION TOPICAL FLUORIDE VARNISH BY PHS/QHP	24.28
99195	PHLEBOTOMY THERAPEUTIC SEPARATE PROCEDURE	151.77
99202	OFFICE OUTPATIENT NEW 15-29 MINUTES	140.92
99203	OFFICE OUTPATIENT NEW 30-44 MINUTES	217.43
99204	OFFICE OUTPATIENT NEW 45-59 MINUTES	333.89
99205	OFFICE OUTPATIENT NEW 60-74 MINUTES	422.77
99211	OFFICE OUTPATIENT VISIT 5 MINUTES	45.18
99212	OFFICE OUTPATIENT VISIT 10-19 MINUTES	107.22
99213	OFFICE OUTPATIENT VISIT 20-29 MINUTES	171.7
99214	OFFICE OUTPATIENT VISIT 30-39 MINUTES	241.82
99215	OFFICE OUTPATIENT VISIT 40-54 MINUTES	336.37
99242	OFFICE/OP CONSLTJ NEW/EST PT SF MDM 20 MINUTES	280.62
99243	OFFICE/OP CONSLTJ NEW/EST PT LOW MDM 30 MINUTES	373.55
99244	OFFICE/OP CONSLTJ NEW/EST PT MOD MDM 40 MINUTES	512.04
99245	OFFICE/OP CONSLTJ NEW/EST PT HIGH MDM 55 MINUTES	632.3
99291	CRITICAL CARE ILL/INJURED PATIENT INIT 30-74 MIN	621.3
99292	CRITICAL CARE ILL/INJURED PATIENT ADDL 30 MIN	401.79
99348	HOME VISIT EST PT LOW-MOD SEVERITY 25 MINUTES	336.37
99349	HOME VISIT EST PT MOD-HI SEVERITY 40 MINUTES	297.47
99381	INITIAL PREVENTIVE MEDICINE NEW PATIENT <1YEAR	209.86
99382	INITIAL PREVENTIVE MEDICINE NEW PT AGE 1-4 YRS	222.6
99383	INITIAL PREVENTIVE MEDICINE NEW PT AGE 5-11 YRS	227.93
99384	INITIAL PREVENTIVE MEDICINE NEW PT AGE 12-17 YR	254.37
99385	INITIAL PREVENTIVE MEDICINE NEW PT AGE 18-39YRS	265.08
99386	INITIAL PREVENTIVE MEDICINE NEW PATIENT 40-64YRS	296.93
99387	INITIAL PREVENTIVE MEDICINE NEW PATIENT 65YRS&>	366.26
99391	PERIODIC PREVENTIVE MED ESTABLISHED PATIENT <1Y	188.77
99392	PERIODIC PREVENTIVE MED EST PATIENT 1-4YRS	201.42
99393	PERIODIC PREVENTIVE MED EST PATIENT 5-11YRS	201.42
99394	PERIODIC PREVENTIVE MED EST PATIENT 12-17YRS	225.47
99395	PERIODIC PREVENTIVE MED EST PATIENT 18-39 YRS	239.8
99396	PERIODIC PREVENTIVE MED EST PATIENT 40-64YRS	247.89
99397	PERIODIC PREVENTIVE MED EST PATIENT 65YRS& OLDER	263.07
99401	PREVENT MED COUNSEL&/RISK FACTOR REDJ SPX 15 MIN	100.21
99402	PREVENT MED COUNSEL&/RISK FACTOR REDJ SPX 30 MIN	145.78
99403	PREVENT MED COUNSEL&/RISK FACTOR REDJ SPX 45 MIN	182.22
99404	PREVENT MED COUNSEL&/RISK FACTOR REDJ SPX 60 MIN	211.38
99406	TOBACCO USE CESSATION INTERMEDIATE 3-10 MINUTES	48.17
99407	TOBACCO USE CESSATION INTENSIVE >10 MINUTES	78.35
99408	ALCOHOL/SUBSTANCE SCREEN & INTERVEN 15-30 MIN	105.69
99409	ALCOHOL/SUBSTANCE SCREEN & INTERVENTION >30 MIN	187.69

99415	PROLONGED CLINICAL STAFF SVC OFFICE/O/P 1ST HR	45.56
99416	PROLONGED CLINICAL STAFF SVC OFFICE/O/P EA ADDL	34.62
99417	PROLONGED OFFICE/OUTPATIENT E/M SVC EA 15 MIN	62.64
99429	DOT/USFS/FAA PHYSICAL	200
99495	TRANSITIONAL CARE MANAGE SRVC 14 DAY DISCHARGE	352.31
99496	TRANSITIONAL CARE MANAGE SRVC 7 DAY DISCHARGE	521.42
99497	ADVANCE CARE PLANNING FIRST 30 MINS	161.56
0500F	INITIAL PRENATAL CARE VISIT	0
0502F	SUBSEQUENT PRENATAL CARE VISIT	0
0503F	POSTPARTUM CARE VISIT	0
1000F	TOBACCO USE ASSESSED	0
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, VOLUME,	0
1100F	FALL SCREENING; MORE THAN 2 OR ANY WITH INJURY	0
1101F	FALL SCREENING; NO FALLS OR ONLY 1 W/O INJURY	0
1111F	MEDICATION RECONCILIATION AFTER DISCHARGE	0
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
1157F	ADVANCE CARE PLAN/SIMILAR LEGAL DOCUMENT PRESENT IN CHART	0
1159F	MEDICATION LIST IN CHART	0
1160F	MEDICATION REVIEWED	0
1170F	FUNCTIONAL STATUS ASSESSED	0
1220F	PATIENT SCREENED FOR DEPRESSION	0
3008F	BMI SCREENINGS	0
3014F	SCREENING FOR MAMMO DOCUMENTED AND REVIEWED	0
3015F	CERVICAL CANCER SCREENING RESULTS DOCUMENTED AND REVIEWEI	0
3017F	COLORECTAL CA SCREEN DOCUMENTED AND REVIEWED	0
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
3288F	STEADI FALL RISK OR MORSE FALL SCALE	0
36415,MC/	VENIPUNCTURE MEDICAID OUR ORDER	0

36415,MC/ VENIPUNCTURE MEDICAID OUTSIDE ORDER	0
36415,MC/ VENIPUNCTURE MEDICARE OUR ORDER	0
36415,MC/ VENIPUNCTURE MEDICARE OUTSIDE ORDER	0
36416,MC/ CAPILLARY BLOOD SPECIMEN MEDICAID INHOUSE ORDER	0
36416,MC/ CAPILLARY BLOOD SPECIMEN MEDICAID OUTSIDE ORDER	0
36416,MC/ CAPILLARY BLOOD SPECIMEN MEDICARE INHOUSE ORDER	0
36416,MC/ CAPILLARY BLOOD SPECIMEN MEDICARE OUTSIDE ORDER	0
3725F PHQ 9/ GAD 7/GERIATRIC DEP SCALE/EPDS/PSC-17-PERFORMED	0
70140,MC/ XR FACE MEDICAID INHOUSE ORDER	0
70140,MC/ XR FACE MEDICAID OUTSIDE ORDER	0
70140,MC/ XR FACIAL BONES MEDICARE INHOUSE	0
70140,MC/ XR FACIAL BONES MEDICARE OUTSIDE ORDER	0
70150,MC/ XR FACE 3V MEDICAID INHOUSE ORDER	0
70150,MC/ XR FACE 3V MEDICAID OUTSIDE ORDER	0
70150,MC/ XR FACE 3V MEDICARE INHOUSE ORDER	0
70150,MC/ XR FACE 3V MEDICARE OUTSIDE ORDER	0
70250,MC/ XR SKULL 4V MEDICAID INSIDE ORDER	0
70250,MC/ XR SKULL 4V MEDICAID OUTSIDE ORDER	0
70250,MC/ XR SKULL 4V MEDICARE INSIDE ORDER	0
70250,MC/ XR SKULL 4V MEDICARE OUTSIDE ORDER	0
71045,MC/ CXR 1V, MEDICARE, OUTSIDE ORDER	0
71046,MC/ RADIOLOGIC EXAM CHEST 2 VIEWS; MEDICAID OUR ORDER	0
71046,MC/ RADIOLOGIC EXAM CHEST 2 VIEWS; MEDICAID OUTSIDE ORDER	0
71046,MC/ RADIOLOGIC EXAM CHEST 2 VIEWS; MEDICARE OUR ORDER	0
71046,MC/ RADIOLOGIC EXAM CHEST 2 VIEWS; MEDICARE OUTSIDE ORDER	0
71100,MC/ XR UNILAT RIBS 2V MEDICAID INHOUSE ORDER	0
71100,MC/ XR UNILAT RIBS 2V MEDICAID OUTSIDE ORDER	0
71100,MC/ XR UNILAT RIBS 2V MEDICARE INSIDE ORDER	0
71100,MC/ XR UNILAT RIBS 2V MEDICARE OUTSIDE ORDER	0
71110,MC/ XR BILAT RIBS 3V MEDICAID INHOUSE ORDER	0
71110,MC/ XR BILAT RIBS 3V MEDICAID OUTSIDE ORDER	0
71110,MC/ XR BILAT RIBS 3V MEDICARE INHOUSE ORDER	0
71110,MC/ XR BILAT RIBS 3V MEDICARE OUTSIDE ORDER	0
72020,MC/ 1V SPINE MEDICARE, OUR ORDER	0
72040,MC/ XR C SPINE 2-3V MEDICAID INHOUSE ORDER	0
72040,MC/ XR C SPINE 2-3V MEDICAID OUTSIDE ORDER	0
72040,MC/ XR C SPINE 2-3V MEDICARE INHOUSE ORDER	0
72040,MC/ XR C SPINE 2-3V MEDICARE OUTSIDE ORDER	0
72050,MC/ XR C SPINE 4-5V MEDICAID INHOUSE ORDER	0
72050,MC/ XR C SPINE 4-5V MEDICAID OUTSIDE ORDER	0
72050,MC/ XR C SPINE 4-5V MEDICARE INHOUSE ORDER	0
72050,MC/ XR C SPINE 4-5V MEDICARE OUTSIDE ORDER	0
72070,MC/ XR 2V THORACIC MEDICAID INHOUSE ORDER	0
72070,MC/ XR 2V THORACIC MEDICAID OUTSIDE ORDER	0

72070,MC/ XR 2V THORACIC MEDICARE INHOUSE ORDER	0
72070,MC/ XR 2V THORACIC MEDICARE OUTSIDE ORDER	0
72074,MC/ XR THORACIC 4V MEDICAID INHOUSE ORDER	0
72074,MC/ XR THORACIC 4V MEDICAID OUTSIDE ORDER	0
72074,MC/ XR THORACIC 4V MEDICARE INHOUSE ORDER	0
72074,MC/ XR THORACIC 4V MEDICARE OUTSIDE ORDER	0
72082,MC/ RADEX ENTIR THRC LMBR CRV SAC SPI W/SKULL 2/3 VW MEDICAID INHC	0
72082,MC/ RADEX ENTIR THRC LMBR CRV SAC SPI W/SKULL 2/3 VW MEDICAID OUTS	0
72082,MC/ RADEX ENTIR THRC LMBR CRV SAC SPI W/SKULL 2/3 VW MEDICARE INHC	0
72082,MC/ RADEX ENTIR THRC LMBR CRV SAC SPI W/SKULL 2/3 V MEDICARE OUTSI	0
72100,MC/ XR 2V LUMBAR MEDICAID INHOUSE ORDER	0
72100,MC/ XR 2V LUMBAR MEDICAID OUTSIDE ORDER	0
72100,MC/ XR 2V LUMBAR MEDICARE INHOUSE ORDER	0
72100,MC/ XR 2V LUMBAR MEDICARE OUTSIDE ORDER	0
72114,MC/ XR LUMBAR 4V W/ BEND MEDICAID INHOUSE ORDER	0
72114,MC/ XR LUMBAR 4V W/ BEND MEDICAID OUTSIDE ORDER	0
72114,MC/ XR LUMBAR 4V W/ BEND MEDICARE INHOUSE ORDER.	0
72114,MC/ XR LUMBAR 4V W/ BEND MEDICARE OUTSIDE ORDER	0
72170,MC/ XR PELVIS MEDICAID INHOUSE ORDER	0
72170,MC/ XR PELVIS MEDICAID OUTSIDE ORDER	0
72170,MC/ XR PELVIS MEDICARE INHOUSE ORDER	0
72170,MC/ XR PELVIS MEDICARE OUTSIDE ORDER	0
72202,MC/ XR SACROILIAC 3V OR MORE, MEDICAID OUR ORDER	0
72202,MC/ XR SACROILIAC 3V OR MORE, MEDICAID OUTSIDE ORDER	0
72202,MC/ XR SACROILIAC 3V OR MORE, MEDICARE OUR ORDER	0
72202,MC/ XR SACROILIAC 3V OR MORE, MEDICARE OUTSIDE ORDER	0
73000,MC/ XR CLAVICLE COMP MEDICAID INHOUSE ORDER	0
73000,MC/ XR CLAVICLE COMP MEDICAID OUTSIDE ORDER	0
73000,MC/ XR CLAVICLE COMPLETE MEDICARE INHOUSE ORDER	0
73000,MC/ XR CLAVICLE COMPLETE MEDICARE OUTSIDE ORDER	0
73030,MC/ XR SHOULDER 2V MEDICAID INHOUSE ORDER	0
73030,MC/ XR SHOULDER 2V MEDICAID OUTSIDE ORDER	0
73030,MC/ XR SHOULDER 2V MEDICARE INHOUSE ORDER	0
73030,MC/ XR SHOULDER 2V MEDICARE OUTSIDE ORDER	0
73050,MC/ XR AC BILAT 2V MEDICAID INHOUSE ORDER	0
73050,MC/ XR AC JOINT 2V MEDICAID OUTSIDE ORDER	0
73050,MC/ XR AC BILAT 2V MEDICARE INHOUSE	0
73050,MC/ XR AC BILAT 2V MEDICARE OUTSIDE ORDER	0
73060,MC/ XR HUMERUS 2V MEDICAID INHOUSE ORDER	0
73060,MC/ XR HUMERUS 2V MEDICAID OUTSIDE ORDER	0
73060,MC/ XR HUMERUS 2V MEDICARE INHOUSE ORDER	0
73060,MC/ XR HUMERUS 2V MEDICARE OUTSIDE ORDER	0
73070,MC/ XR ELBOW 2V MEDICAID INHOUSE ORDER	0
73070,MC/ XR ELBOW 2V MEDICAID OUTSIDE ORDER	0

73070,MC/ XR ELBOW 2V MEDICARE INHOUSE ORDER	0
73070,MC/ XR ELBOW 2V MEDICARE OUTSIDE ORDER	0
73090,MC/ XR FOREARM 2V MEDICAID INHOUSE ORDER	0
73090,MC/ XR FOREARM 2V MEDICAID OUTSIDE ORDER	0
73090,MC/ XR FOREARM 2V MEDICARE INHOUSE ORDER	0
73090,MC/ XR FOREARM 2V MEDICARE OUTSIDE ORDER	0
73100,MC/ XR WRIST 2V MEDICAID INHOUSE ORDER	0
73100,MC/ XR WRIST 2V MEDICAID OUTSIDE ORDER	0
73100,MC/ XR WRIST 2V MEDICARE INHOUSE ORDER	0
73100,MC/ XR WRIST 2V MEDICARE OUTSIDE ORDER	0
73110,MC/ XR WRIST 3V MEDICAID INHOUSE ORDER	0
73110,MC/ XR WRIST 3V MEDICAID OUTSIDE ORDER	0
73110,MC/ XR WRIST 3V MEDICARE INHOUSE ORDER	0
73110,MC/ XR WRIST 3V MEDICARE OUTSIDE ORDER	0
73120,MC/ XR HAND 2V MEDICAID INHOUSE ORDER	0
73120,MC/ XR HAND 2V MEDICAID OUTSIDE ORDER	0
73120,MC/ XR HAND 2V MEDICARE INHOUSE ORDER	0
73120,MC/ XR HAND 2V MEDICARE OUTSIDE ORDER	0
73130,MC/ XR HAND 3V MEDICAID INHOUSE ORDER	0
73130,MC/ XR HAND 3V MEDICAID OUTSIDE ORDER	0
73130,MC/ XR HAND 3V MEDICARE INHOUSE ORDER	0
73130,MC/ XR HAND 3V MEDICARE OUTSIDE ORDER	0
73140,MC/ 2V FINGER/THUMB MEDICAID, OUR ORDER	0
73140,MC/ XR FINGER 2V MEDICARE INHOUSE ORDER	0
73140,MC/ XR FINGER 2V MEDICARE OUTSIDE ORDER	0
73501,MC/ XR HIP MEDICAID INHOUSE ORDER	0
73501,MC/ XR HIP MEDICAID OUTSIDE ORDER	0
73501,MC/ XR HIP MEDICARE INHOUSE ORDER	0
73501,MC/ XR HIP MEDICARE OUTSIDE ORDER	0
73502,MC/ XR HIP 2V MEDICAID INHOUSE ORDER	0
73502,MC/ XR HIP 2V MEDICAID OUTSIDE ORDER	0
73502,MC/ XR HIP 2V MEDICARE INHOUSE ORDER	0
73502,MC/ XR HIP 2V MEDICARE OUTSIDE ORDER	0
73521,MC/ XR BILAT HIP W/ PELVIS MEDICAID INHOUSE ORDER	0
73521,MC/ XR BILAT HIP W/ PELVIS MEDICAID OUTSIDE ORDER	0
73521,MC/ XR BILAT HIP W/ PELVIS MEDICARE INHOUSE ORDER	0
73521,MC/ XR BILAT HIP W/ PELVIS MEDICARE OUTSIDE ORDER	0
73552,MC/ XR FEMUR MEDICAID INHOUSE ORDER	0
73552,MC/ XR FEMUR MEDICAID OUTSIDE ORDER	0
73552,MC/ XR FEMUR MEDICARE INHOUSE ORDER	0
73552,MC/ XR FEMUR MEDICARE OUTSIDE ORDER	0
73560,MC/ XR KNEE 2V MEDICAID INHOUSE ORDER	0
73560,MC/ XR KNEE 2V MEDICAID OUTSIDE ORDER	0
73560,MC/ XR KNEE 2V MEDICARE INHOUSE ORDER	0

73560,MC/ XR KNEE 2V MEDICARE OUTSIDE ORDER	0
73562,MC/ XR KNEE 3V MEDICAID INHOUSE ORDER	0
73562,MC/ XR KNEE 3V MEDICAID OUTSIDE ORDER	0
73562,MC/ XR KNEE 3V MEDICARE INHOUSE ORDER	0
73562,MC/ XR KNEE 3V MEDICARE OUTSIDE ORDER	0
73564,MC/ RADIOLOGIC EXAM KNEE COMPLETE 4/MORE VIEWS OUTSIDE ORDER	0
73590,MC/ XR TIB/FIB MEDICAID INHOUSE ORDER	0
73590,MC/ XR TIB/FIB MEDICAID OUTSIDE ORDER	0
73590,MC/ XR TIB/FIB MEDICARE INHOUSE ORDER	0
73590,MC/ XR TIB/FIB MEDICARE OUTSIDE ORDER	0
73600,MC/ XR ANKLE 2V MEDICAID INHOUSE ORDER	0
73600,MC/ XR ANKLE 2V MEDICAID OUTSIDE ORDER	0
73600,MC/ XR ANKLE 2V MEDICARE INHOUSE ORDER	0
73600,MC/ XR ANKLE 2V MEDICARE OUTSIDE ORDER	0
73610,MC/ XR ANKLE 3V MEDICAID INHOUSE ORDER	0
73610,MC/ XR ANKLE 3V MEDICAID OUTSIDE ORDER	0
73610,MC/ XR ANKLE 3V MEDICARE INHOUSE ORDER	0
73610,MC/ XR ANKLE 3V MEDICARE OUTSIDE ORDER	0
73620,MC/ XR FOOT 2V MEDICAID INHOUSE ORDER	0
73620,MC/ XR FOOT 2V MEDICAID OUTSIDE ORDER	0
73620,MC/ XR FOOT 2V MEDICARE INHOUSE ORDER	0
73620,MC/ XR FOOT 2V MEDICARE OUTSIDE ORDER	0
73630,MC/ XR FOOT 3V MEDICAID INHOUSE ORDER	0
73630,MC/ XR FOOT 3V MEDICAID OUTSIDE ORDER	0
73630,MC/ XR FOOT 3V MEDICARE INHOUSE ORDER	0
73630,MC/ XR FOOT 3V MEDICARE OUTSIDE ORDER	0
73650,MC/ XR CALCANEUS MEDICAID INHOUSE ORDER	0
73650,MC/ XR CALCANEUS MEDICAID OUTSIDE ORDER	0
73650,MC/ XR CALCANEUS MEDICARE INHOUSE ORDER	0
73650,MC/ XR CALCANEUS MEDICARE OUTSIDE ORDER	0
73660,MC/ XR TOE MEDICAID INHOUSE ORDER	0
73660,MC/ XR TOE MEDICAID OUTSIDE ORDER	0
73660,MC/ XR TOE MEDICARE INHOUSE ORDER	0
73660,MC/ XR TOE MEDICARE OUTSIDE ORDER	0
74018,MC/ XR ABD MEDICAID INHOUSE ORDER	0
74018,MC/ XR ABD MEDICAID OUTSIDE ORDER	0
74018,MC/ XR ABD MEDICARE INHOUSE ORDER	0
74018,MC/ XR ABD MEDICARE OUTSIDE ORDER	0
74019,MC/ XR ABD 2V MEDICARE, OUTSIDE ORDER	0
80053,MC/ CMP MEDICAID INHOUSE ORDER	0
80053,MC/ CMP MEDICAID OUTSIDE ORDER	0
80053,MC/ CMP MEDICARE INHOUSE ORDER	0
80053,MC/ CMP MEDICARE OUTSIDE ORDER	0
81002,MC/ UA MEDICAID INHOUSE ORDER	0

81002,MC/ UA MEDICAID OUTSIDE ORDER	0
81002,MC/ UA MEDICARE INHOUSE ORDER	0
81002,MC/ UA MEDICARE OUTSIDE ORDER	0
81025,MC/ URINE PREGNANCY MEDICAID INHOUSE ORDER	0
81025,MC/ URINE PREGNANCY MEDICAID OUTSIDE ORDER	0
81025,MC/ URINE PREGNANCY MEDICARE INHOUSE ORDER	0
81025,MC/ URINE PREGNANCY MEDICARE OUTSIDE ORDER	0
82040,MC/ ALBUMIN MEDICAID INHOUSE ORDER	0
82040,MC/ ALBUMIN MEDICARE INHOUSE ORDER	0
82075,BMF 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,SAFI BREATH ALCOHOL TEST FOR SAFE HAVEN	50
82075,SRE BAT SALMON RIVER ELECTRIC	50
82150,MC/ AMYLASE MEDICAID INHOUSE ORDER	0
82150,MC/ AMYLASE MEDICARE INHOUSE ORDER	0
82247,MC/ BILIRUBIN TOTAL MEDICAID INHOUSE ORDER	0
82247,MC/ BILIRUBIN, TOTAL MEDICARE INHOUSE ORDER	0
82274,MC/ BLOOD OCCULT FECAL MEDICAID INHOUSE ORDER	0
82274,MC/ BLOOD OCCULT FECAL MEDICAID OUTSIDE ORDER	0
82274,MC/ BLOOD OCCULT FECAL HGB DETER IA QUAL MEDICARE OUR ORDER	0
82274,MC/ BLOOD OCCULT FECAL HGB DETER IA QUAL FECES MEDICARE OUTSIDE	0
82310,MC/ CALCIUM MEDICAID INHOUSE ORDER	0
82310,MC/ CALCIUM MEDICARE INHOUSE ORDER	0
82565,MC/ CREATININE, SERUM MEDICAID INHOUSE ORDER	0
82565,MC/ CREATININE, SERUM MEDICARE INHOUSE ORDER	0
82947,MC/ GLUCOSE MEDICAID INHOUSE ORDER	0
82947,MC/ GLUCOSE MEDICAID OUTSIDE ORDER	0
82947,MC/ GLUCOSE MEDICARE INHOUSE ORDER	0
82947,MC/ GLUCOSE MEDICARE OUTSIDE ORDER	0
82977,MC/ GAMMA GLUTAMYLTRANSFERASE MEDICAID INHOUSE ORDER	0
82977,MC/ GAMMA GLUTAMYLTRANSFERASE MEDICARE INHOUSE ORDER	0
83036,MC/ HEMOGLOBIN GLYCOSYLATED A1C MEDICAID INHOUSE ORDER	0
83036,MC/ HEMOGLOBIN GLYCOSYLATED A1C MEDICAID OUTSIDE ORDER	0
83036,MC/ HEMOGLOBIN GLYCOSYLATED A1C MEDICARE INHOUSE ORDER	0
83036,MC/ HEMOGLOBIN GLYCOSYLATED A1C MEDICARE OUTSIDE ORDER	0
83600,MC/ XR ANKLE 2V MEDICARE OUTSIDE ORDER	0
84075,MC/ ALK PHOS MEDICAID INHOUSE ORDER	0
84075,MC/ ALK PHOS MEDICARE INHOUSE ORDER	0
84155,MC/ PROTEIN TOTAL MEDICAID INHOUSE ORDER	0
84155,MC/ PROTEIN TOTAL MEDICARE INHOUSE ORDER	0
84450,MC/ AST SGOT MEDICAID INHOUSE ORDER	0
84450,MC/ AST SGOT MEDICARE INHOUSE ORDER	0

84460,MC/ ALT SGPT MEDICAID INHOUSE ORDER	0
84460,MC/ ALT SGPT MEDICARE INHOUSE ORDER	0
84520,MC/ BUN MEDICAID INHOUSE ORDER	0
84520,MC/ BUN MEDICARE INHOUSE ORDER	0
84550,MC/ URIC ACID MEDICAID INHOUSE ORDER	0
84550,MC/ URIC ACID MEDICARE INHOUSE ORDER	0
85013,MC/ HEMATOCRIT MEDICAID INHOUSE ORDER	0
85013,MC/ HEMATOCRIT MEDICAID OUTSIDE ORDER	0
85013,MC/ HEMATOCRIT MEDICARE INHOUSE ORDER	0
85013,MC/ HEMATOCRIT MEDICARE OUTSIDE ORDER	0
85014,MC/ BLOOD COUNT HEMATOCRIT MEDICAID INHOUSE ORDER	0
85014,MC/ BLOOD COUNT HEMATOCRIT MEDICAID OUTSIDE ORDER	0
85014,MC/ BLOOD COUNT HEMATOCRIT MEDICARE INHOUSE ORDER	0
85014,MC/ BLOOD COUNT HEMATOCRIT MEDICARE OUTSIDE ORDER	0
85610,MC/ PT/INR MEDICAID INHOUSE ORDER	0
85610,MC/ PT/INR MEDICAID OUTSIDE ORDER	0
85651,MC/ SED RATE MEDICAID INHOUSE ORDER	0
85651,MC/ SED RATE MEDICAID OUTSIDE ORDER	0
85651,MC/ SED RATE MEDICARE INHOUSE ORDER	0
85651,MC/ SED RATE MEDICARE OUTSIDE ORDER	0
87426,MC/ IDNOW COVID MEDICAID INHOUSE ORDER	0
87426,MC/ IDNOW COVID MEDICAID OUTSIDE ORDER	0
87426,MC/ IDNOW COVID TEST MEDICARE INHOUSE ORDER	0
87426,MC/ IDNOW COVID MEDICARE OUTSIDE ORDER	0
87430,MC/ STREP MEDICAID INHOUSE ORDER	0
87430,MC/ STREP MEDICAID OUTSIDE ORDER	0
87430,MC/ STREP MEDICARE INHOUSE ORDER	0
87430,MC/ STREP MEDICARE OUTSIDE ORDER	0
87502,MC/ IDNOW FLU MEDICAID INHOUSE ORDER	0
87502,MC/ IDNOW FLU MEDICAIAD OUTSIDE ORDER	0
87502,MC/ IDNOW FLU MEDICARE INHOUSE ORDER	0
87502,MC/ IDNOW FLU MEDICARE OUTSIDE ORDER	0
87651,MC/ IDNOW STREP MEDICAID INHOUSE ORDER	0
87651,MC/ IDNOW STREP MEDICAID OUTSIDE ORDER	0
87651,MC/ IDNOW STREP MEDICARE INHOUSE ORDER	0
87651,MC/ IDNOW STREP MEDICARE OUTSIDE ORDER	0
87804,MC/ INFLUENZA MEDICAID INHOUSE ORDER	0
87804,MC/ INFLUENZA MEDICAID OUTSIDE ORDER	0
87804,MC/ INFLUENZA TEST MEDICARE INHOUSE ORDER	0
87804,MC/ INFLUENZA MEDICARE OUTSIDE ORDER	0
87811,MC/ COVID-19 ANITGEN TEST MEDICAID INHOUSE ORDER	0
87811,MC/ COVID-19 ANITGEN TEST MEDICAID OUTSIDE ORDER	0
87811,MC/ COVID-19 ANITGEN TEST MEDICARE INHOUSE ORDER	0
87811,MC/ COVID-19 ANITGEN TEST MEDICARE OUTSIDE ORDER	0

87880,MC/ STREPTOCOCCUS MEDICAID INHOUSE ORDER	0
87880,MC/ STREPTOCOCCUS MEDICAID OUTSIDE ORDER	0
87880,MC/ STREPTOCOCCUS MEDICARE INHOUSE ORDER	0
87880,MC/ STREPTOCOCCUS MEDICARE OUTSIDE ORDER	0
90471,FLU INFLUENZA ADMINISTRATION	42.17
93000,MC/ EKG INHOUSE ORDER FOR MEDICAID WITH NO ENCOUNTER	0
93000,MC/ EKG, OUTSIDE ORDER FOR MEDICAID	0
93000,MC/ EKG INHOUSE ORDER FOR MEDICARE WITHOUT ENCOUNTER	0
93000,MC/ EKG OUTSIDE ORDER FOR MEDICARE WITHOUT ENCOUNTER	0
94010,MC/ SPIROMETRY, MEDICAID, OUR ORDER	0
94010,MC/ SPIROMETRY, MEDICAID, OUTSIDE ORDER	0
94010,MC/ SPIROMETRY, MEDICARE, OUR ORDER	0
94010,MC/ SPIROMETRY, MEDICARE, OUTSIDE ORDER	0
99000,1ST 1ST FRUITS COLLECTION	35
99000,ACG ACG, INC. THROUGH SAFE TRACK	35
99000,ADA ADA COUNTY DRUG SCREEN COLLECTION	35
99000,APP COLLECTION FOR APPLICANT INSIGHT	35
99000,BAV DSC BLACK & VEATCH ACCT 80800	35
99000,BMF BLUE MTN REFUSE COLLECTION	35
99000,BPH BENGAL PHARMACY COLLECTION	35
99000,CCS CUSTER CO SHERIFF'S OFFICE COLLECTION	35
99000,CITY CITY OF CHALLIS COLLECTION	35
99000,CRM CHALLIS REDI-MIX COLLECTION	35
99000,CTC CUSTERTEL COLLECTION	35
99000,DEB DEBCO CONSTRUCTION COLLECTION	35
99000,DOL DEPT. OF LABOR	35
99000,DP DRUG SCREEN COLLECTION FOR DIAMOND PEAK	35
99000,DRG DRUG SCREEN COLLECTION NOT OUR LAB	35
99000,FISH FISH AND GAME, IDAHO	35
99000,GAL COLLECTION FOR GALE LIM CONSTRUCTION	35
99000,GRA GRANITE CONSTRUCTION COLLECTION	35
99000,IDT COLLECTION FOR ID DEPT TRAN (HWY DEPT)	35
99000,IMC IMCO GENERAL CONSTRUCTION	35
99000,IPLF IDAHO PRECISION LOG HOME, LLC DRUG SCREEN	35
99000,ITD IDAHO TRANSPORTATION DEPT. DOT DRUG SCREEN	35
99000,K9P K9 PIPE INSPECTIONS FOR DRUG FREE IDAHO	35
99000,KME KIMBLE OIL COLLECTION	35
99000,KNIF KNIFE RIVER CONSTRUCTION	35
99000,LRM LOST RIVER MED CTR COLLECTION	35
99000,MFA DRUG SCREEN FOR MIDDLE FORK AVIATION	35
99000,NW1 NORTHWEST TRAFFIC CONTROL COLLECTION	35
99000,PEM PEMBROOK COLLECTION	35
99000,POC USPS CONTRACT COURIER COLLECTIONS	35
99000,PPP TRIPLE P COLLECTION/PAYETTE	35

99000,RNB CUSTER COUNTY ROAD AND BRIDGE COLLECTION	35
99000,SAFI 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,SS8: STINKER STATION, CHALLIS, COLLECTION	35
99000,STU 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,TDC DRUG SCREEN COLLECTION TANDEM DIABETES CARE, INC.	35
99000,UPS UNITED PARCEL SERVICE DRUG/ALC SCREEN	35
99999X OB CODE	0
99AFT AFTER HOURS DRAW FOR LAW ENFORCEMENT	50
A4300 IV CATHETER	25
A4351 INTERMITTENT URINARY CATHETER/ STRA	4.35
A4355 FOLEY CATH	15.02
A4357 BEDSIDE DRAINAGE BAG	15.74
A4364 DERMABOND	8.28
A4467 BELT STRAP SLEEV GRMNT COVER	37.68
A4565 SLING	20.01
A4566 SHOULDER SLING/VEST/ABRESTRAIN	25.44
A4590 CASTING FIBERGLASS	81.45
A4615 NASAL CANNULA	2.36
A4620 NON-REBREATHER MASK ADULT	4.96
A4750 IV TUBING SET UP	17.3
A6238 HYDROCOLLOID DRESSING, WOUND COVER	34.22
A6257 TEGADERM-TRANSPARENT FILM	2.41
BH6PP BEHAVIORAL HEALTH 6 MONTH POST-PARTUM PHONE CALL	0
COUNALC ALCOHOL USE CESSATION COUNSELING	0
COUNDRG DRUG USE CESSATION COUNSELING	0
COUNTOB TOBACCO USE CESSATION COUNSELING	0
G0008 ADMINISTRATION OF INFLUENZA VIRUS VACCINE	50.04
G0071 PMT COMMUNICATION TECH-BASED SERVICES 5 MIN OR MORE VIRTUAL	125.47
G0101 CA SCREEN;PELVIC/BREAST EXAM	111.06
G0108 DIAB MANAGE TRN PER INDIV	140.56
G0168 WOUND CLOSURE BY ADHESIVE	209.6
G0396 ALCOHOL/SUBS INTERV 15-30MN	70.08
G0397 ALCOHOL/SUBS INTERV >30 MIN	263.62
G0402 WELCOME INITIAL PREV EXAM MEDICARE	330.12
G0438 MEDICARE INIT ANNUAL EXAM	324.24
G0439 SUBSEQUENT ANNUAL MEDICARE WELLNESS	254.4
G0444 ANNUAL DEPRESSION SCREENING, MEDICARE	42.04
G0466 FQHC VISIT, NEW PATIENT	235.13

G0467	FQHC VISIT, ESTABLISHED PATIENT	198.56
G0468	FQHC VISIT, IPPE OR AWW	255.57
G0469	FQHC VISIT, MENTAL HEALTH, NEW PATIENT	297.71
G0470	FQHC VISIT, MENTAL HEALTH, EST. PATIENT	213.72
G0511	CHRONIC CARE MANAGEMENT	112.91
G2012	BRIEF CHECK IN BY MD OR OTHER QUALIFIED HEALTH CARE PROFESSIO	30.06
G8431	SCREENING FOR DEPRESSION IS DOCUMENTED AS BEING POSITIVE ANI	0
G8510	SCREENING FOR DEPRESSION IS DOCUMENTED AS NEGATIVE, A FOLLO	0
H0001	INDIVIDUAL ASSESSMENT AND TREATMENT PLAN FOR SUBSTANCE ABUS	122.8
H0004	ALCOHOL AND/OR DRUG SERVICES	39.78
H0049	ALCOHOL/DRUG SCREENING	38.7
H0050	ALCOHOL/DRUG SERVICE 15 MIN	50.9
IBHC	INTEGRATED BEHAVIORAL HEALTH	0
J0153	ADENOSINE INJ 1MG	5.09
J0171	INJECTION ADRENALIN EPINEPHRINE	4.57
J0690	CEFAZOLIN SODIUM	4.38
J0696	ROCEPHIN	14.74
J0702	BETAMETHASONE ACET&SOD PHOSP	15.87
J1100	DEXAMETHASONE SODIUM PHOS	1.98
J1170	HYDROMORPHONE INJECTION	6
J1200	DIPHENHYDRAMINE HCL 50 IV OR IM	4.91
J1642	HEP LOCK / J LOOP	0.26
J1644	HEPARIN PER 10K UNITS	1.02
J1650	LOVENOX 10MG SC	4.39
J1815	INSULIN	2.7
J1885	TORADOL PER 15 MG	6.95
J1940	LASIX UP TO 20MG	6.1
J2060	LORAZEPAM TABLETS	3.05
J2175	DERMROL PER 100MG	13.01
J2180	PROMETHAZINE UP TO 50 MG	0
J2250	MIDAZOLAM PER ML	2.95
J2270	MORPHINE UP TO 10 MG	7.81
J2310	NARCAN PER 1ML	73.9
J2405	ZOFRAN	1.99
J2550	PHENERGAN UP TO 50 MG	11
J2919	INJECTION METHYLPREDNISOLONE NA SUCCINATE 5 MG	0.98
J3101	TENECTEPLASE INJECTION PER 1MG	246.41
J3105	TERBUTALINE SULFATE INJ	19.85
J3300	TRIMCINOLONE ACETONIDE 1MG (KENALOG)	24.07
J3301	KENALOG 10 MG	5.96
J3360	INJECTION, DIAZEPAM, UP TO 5MG	12.18
J3420	VITAMIN B12 INJECTION	10.01
J3475	MGSO4 500MG	3
J3490	UNCLASSIFIED DRUG	0

J7030	NORMAL SALINE	18.67
J7060	DEXTROSE 500ML RTE IV	14.01
J7120	RINGERS LACTATE INFUSION	14.74
J7626	BUDESONIDE NON-COMP UNIT	12.76
J8540	DEXAMETHASONE, ORAL, 0.25MG	0.98
L0120	CERVICAL FLEXABLE NONADJUSTABLE FOA	42.82
L1820	KO ELAS W/ CONDYLE PADS & JO	185.12
L1830	KO IMMOB CANVAS LONG PRE OTS	114.14
L1831	KNEE ORTH POS LOCKING JOINT	371.81
L1902	ANKLE FOOT ORTHOSIS, PREFABRICATED	121.4
L3260	POST OP SHOE RIGID ROCKER	40.72
L3650	SHOULDER ORTHOSIS FIGURE 8 DESIGN ABDUCTION RESTRAINER PREF	82.67
L3670	SO ACRO/CLAV CAN WEB PRE OTS	186.47
L3702	EO W/O JOINTS CF	396.88
L3807	THUMBKEEPER SPLINT	335.92
L3809	WRIST/THUMB SUPPORT OST	304.21
L3908	COMFORT FORM WRIST	94.6
L3923	WRIST SPLINT	117
L3924	HFO WITHOUT JOINTS PRE OTS	120.1
L4350	ANKLE CONTROL ORTHO PRE OTS	199.11
L4386	WALKING BOOT,PREFABRICATED,FITTING/	248.2
L4387	WALKING BOOT	200.26
MISCNS	NO SHOW	0
MISCNSF	INSUFFICIENT FUNDS	35
NURSECCN	NURSE CCMA	0
NURSECM/	CMA	0
NURSECNA/	NURSE VISIT	0
NURSELPN	LPN	0
NURSERN	RN	0
Q0091	PAP	92.48
Q0163	DIPHENHYDRAMINE HCL, 50MG, ORAL	1.02
Q4006	CAST SUP LONG ARM ADULT FBRG	73.04
Q4008	CAST SUP LONG ARM PED FBRGLS	41.72
Q4012	CAST SUP SHORT ARM PED FBRGLAS	29.02
Q4014	CAST SUP GAUNTLET FIBERGLASS	60.06
Q4017	CAST SUP LNG ARM SPLINT, ADULT (11 YEARS +)	30.45
Q4020	CAST SUP LNG ARM SPLNT PED FIBERGLASS (0-11 YRS)	23.01
Q4022	CAST SUPPLIES, SHORT ARM SPLINT, ADULT (11 YRS +)	35.39
Q4024	CAST SUP SHT ARM SPLNT PED F	22.7
Q4038	SHORT LEG CAST 11+ YEARS OLD	88.4
Q4040	CAST SUP SHRT LEG PED FBRGLS	54.05
Q4042	CAST SUPPLIES, LONG LEG SPLINT, ADULT (11 YEARS +), FIBERGLASS	74.34
Q4046	SHORT LEG SPLINT SUPPLIES	50.88
Q4049	FINGER SPLINT	13.01

S0020	MARCAINE 30 ML	3.06
S8450	SPLINT, FINGER	22.4
SPORT	SPORT PHYSICAL	29
T1015	FQHC, ALL INCLUSIVE VISIT	370.02
T1502	ADMINISTRATION OF ORAL, INTRAMUSCULAR AND/OR SUBCUTANEOUS	29.8
T1503	ADMINISTRATION OF MEDICATION, OTHER THAN ORAL AND/OR INJECTA	27.79
TCMDA	DRUG AND ALCOHOL - TCM	0
TCMFIT	TCM FIT FOR DUTY TEST	200
TCMPEP	TCM PRE-EMPLOYMENT PHYSICAL	200
TCMPT	TCM PHYSICAL TEST	100
WARM	WARM HANDOFF WITH BH PROVIDER	0
WOUNDCA	WOUND CARE DONE BY NURSES	0