#20-020

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
APPLICATION FOR PERMIT

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

This Section must be completed for all projects.

Facility/Project Identification

Facility Name: South Loop Surgery Center		
Street Address: 2335 South Michigan Ave, Floor Three		
City and Zip Code: Chicago, IL 60616		
County: Cook	Health Service Area: 006	Health Planning Area:

Applicant(s) [Provide for each applicant (refer to Part 1130.220)]

Exact Legal Name: Chicago Cosmetic Surgery Institute LLC d/b/a South Loop Surgery Center
Street Address: 2335 South Michigan Ave, Floor Three
City and Zip Code: Chicago, IL 60616
Name of Registered Agent: David A. Shifrin, M.D.
Registered Agent Street Address: 2335 South Michigan Ave, Floor Three
Registered Agent City and Zip Code: Chicago, IL 60616
Name of Chief Executive Officer: David A. Shifrin, M.D.
CEO Street Address: 2335 South Michigan Ave, Floor Three
CEO City and Zip Code: Chicago, IL 60616
CEO Telephone Number: (312) 502-6200

Type of Ownership of Applicants

- ☐ Non-profit Corporation
- ☐ For-profit Corporation
- ☒ Limited Liability Company
- ☐ Partnership
- ☐ Governmental
- ☐ Sole Proprietorship
- ☐ Other

- Corporations and limited liability companies must provide an **Illinois certificate of good standing.**
- Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.

APPEND DOCUMENTATION AS ATTACHMENT 1 IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Primary Contact [Person to receive ALL correspondence or inquiries]

Name: Donna Chase
Title: Practice Administrator
Company Name: South Loop Surgery Center
Address: 2335 South Michigan Ave, Floor Three, Chicago, IL 60616
Telephone Number: (312) 502-6200
E-mail Address: donna@shifrinplasticsurgery.com
Fax Number: (888) 850-9557

Additional Contact [Person who is also authorized to discuss the application for permit]

Name:
Title:
Company Name:
Address:
Telephone Number:
E-mail Address:
Fax Number:

#20-020

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
APPLICATION FOR PERMIT

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

This Section must be completed for all projects.

Facility/Project Identification

Facility Name: South Loop Surgery Center		
Street Address: 2335 South Michigan Ave, Floor Three		
City and Zip Code: Chicago, IL 60616		
County: Cook	Health Service Area: 006	Health Planning Area:

Applicant(s) [Provide for each applicant (refer to Part 1130.220)]

Exact Legal Name: RES Investments LLC
Street Address: 2335 South Michigan Ave, Floor Three
City and Zip Code: Chicago, IL 60616
Name of Registered Agent: Louis H. Levinson
Registered Agent Street Address: 33 N. LaSalle Street, Ste 3200
Registered Agent City and Zip Code: Chicago, IL 60602
Name of Chief Executive Officer: David A. Shifrin, M.D.
CEO Street Address: 2335 South Michigan Ave, Floor Three
CEO City and Zip Code: Chicago, IL 60616
CEO Telephone Number: (312) 502-6200

Type of Ownership of Applicants

- ☐ Non-profit Corporation
- ☐ For-profit Corporation
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- ☐ Partnership
- ☐ Governmental
- ☐ Sole Proprietorship
- ☐ Other

- Corporations and limited liability companies must provide an **Illinois certificate of good standing.**
- Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.

APPEND DOCUMENTATION AS ATTACHMENT 1 IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Primary Contact [Person to receive ALL correspondence or inquiries]

Name: Anne Cooper
Title: Attorney
Company Name: Polsinelli, P.C.
Address: 150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606
Telephone Number: 312-873-3606
E-mail Address: acooper@polsinelli.com
Fax Number:

Additional Contact [Person who is also authorized to discuss the application for permit]

Name:
Title:
Company Name:
Address:
Telephone Number:
E-mail Address:
Fax Number:

#20-020

Post Permit Contact

[Person to receive all correspondence subsequent to permit issuance-**THIS PERSON MUST BE EMPLOYED BY THE LICENSED HEALTH CARE FACILITY AS DEFINED AT 20 ILCS 3960]**

Name: Donna Chase
Title: Practice Administrator
Company Name: South Loop Surgery Center
Address: 2335 South Michigan Ave, Floor Three, Chicago, IL 60616
Telephone Number: (312) 502-6200
E-mail Address: donna@shifrinplasticsurgery.com
Fax Number: (888) 850-9557

Site Ownership

[Provide this information for each applicable site]

Exact Legal Name of Site Owner: RES Investments, LLC

Address of Site Owner: 2335 South Michigan Ave, Floor Three, Chicago, IL 60616

Street Address or Legal Description of the Site: 2335 South Michigan Ave, Floor Three, Chicago, IL 60616

Proof of ownership or control of the site is to be provided as Attachment 2. Examples of proof of ownership are property tax statements, tax assessor's documentation, deed, notarized statement of the corporation attesting to ownership, an option to lease, a letter of intent to lease, or a lease.

APPEND DOCUMENTATION AS ATTACHMENT 2, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Operating Identity/Licensee

[Provide this information for each applicable facility and insert after this page.]

Exact Legal Name: Chicago Cosmetic Surgery Institute, LLC

Address: 2335 South Michigan Ave, Floor Three, Chicago, IL 60616

- ☐ Non-profit Corporation
- ☐ For-profit Corporation
- ☒ Limited Liability Company
- ☐ Partnership
- ☐ Governmental
- ☐ Sole Proprietorship
- ☐ Other

- Corporations and limited liability companies must provide an Illinois Certificate of Good Standing.
- Partnerships must provide the name of the state in which organized and the name and address of each partner specifying whether each is a general or limited partner.
- **Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.**

APPEND DOCUMENTATION AS ATTACHMENT 3, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Organizational Relationships

Provide (for each applicant) an organizational chart containing the name and relationship of any person or entity who is related (as defined in Part 1130.140). If the related person or entity is participating in the development or funding of the project, describe the interest and the amount and type of any financial contribution.

APPEND DOCUMENTATION AS ATTACHMENT 4, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Flood Plain Requirements

[Refer to application instructions.]

Provide documentation that the project complies with the requirements of Illinois Executive Order #2006-5 pertaining to construction activities in special flood hazard areas. As part of the flood plain requirements, please provide a map of the proposed project location showing any identified floodplain areas. Floodplain maps can be printed at **www.FEMA.gov** or **www.illinoisfloodmaps.org**. **This map must be in a readable format**. In addition, please provide a statement attesting that the project complies with the requirements of Illinois Executive Order #2006-5 (**http://www.hfsrb.illinois.gov**).

APPEND DOCUMENTATION AS ATTACHMENT 5, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Historic Resources Preservation Act Requirements

[Refer to application instructions.]

Provide documentation regarding compliance with the requirements of the Historic Resources Preservation Act.

APPEND DOCUMENTATION AS ATTACHMENT 6, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

DESCRIPTION OF PROJECT

1. Project Classification

[Check those applicable - refer to Part 1110.20 and Part 1120.20(b)]

Part 1110 Classification:

☒ Substantive

☐ Non-substantive

2. Narrative Description

In the space below, provide a brief narrative description of the project. Explain **WHAT** is to be done in **State Board defined terms**, **NOT WHY** it is being done. If the project site does NOT have a street address, include a legal description of the site. Include the rationale regarding the project's classification as substantive or non-substantive.

Chicago Cosmetic Surgery Institute LLC and RES Investments, LLC (the "Applicants") seek authority from the Illinois Health Facilities and Services Review Board (the "State Board") to convert the third floor of medical office space to an ambulatory surgical treatment center with 2 procedure rooms and 4 recovery stations in a medical office building located at 2335 South Michigan Avenue Floor Three Chicago Illinois 60616 (the "ASTC"). The ASTC will consist of 4,000 Square feet of clinical space.

This project is classified as substantive project because it proposes the establishment of a health care facility.

Project Costs and Sources of Funds

Complete the following table listing all costs (refer to Part 1120.110) associated with the project. When a project or any component of a project is to be accomplished by lease, donation, gift, or other means, the fair market or dollar value (refer to Part 1130.140) of the component must be included in the estimated project cost. If the project contains non-reviewable components that are not related to the provision of health care, complete the second column of the table below. Note, the use and sources of funds must be equal.

Project Costs and Sources of Funds			
USE OF FUNDS	**CLINICAL**	**NONCLINICAL**	**TOTAL**
Preplanning Costs			
Site Survey and Soil Investigation			
Site Preparation			
Off Site Work			
New Construction Contracts			
Modernization Contracts			
Contingencies			
Architectural/Engineering Fees			
Consulting and Other Fees	$100,000		$100,000
Movable or Other Equipment (not in construction contracts)			
Bond Issuance Expense (project related)			
Net Interest Expense During Construction (project related)			
Fair Market Value of Leased Space or Equipment	$985,536		$985,536
Other Costs To Be Capitalized			
Acquisition of Building or Other Property (excluding land)			
TOTAL USES OF FUNDS	**$1,085,536**		**$1,085,536**
SOURCE OF FUNDS	**CLINICAL**	**NONCLINICAL**	**TOTAL**
Cash and Securities	$100,000		$100,000
Pledges			
Gifts and Bequests			
Bond Issues (project related)			
Mortgages			
Leases (fair market value)	$985,536		$985,536
Governmental Appropriations			
Grants			
Other Funds and Sources			
TOTAL SOURCES OF FUNDS	**$1,085,536**		**$1,085,536**
NOTE: ITEMIZATION OF EACH LINE ITEM MUST BE PROVIDED AT ATTACHMENT 7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.			

Related Project Costs
Provide the following information, as applicable, with respect to any land related to the project that will be or has been acquired during the last two calendar years:

Land acquisition is related to project ☐ Yes ☒ No
Purchase Price: $_____
Fair Market Value: $_____

The project involves the establishment of a new facility or a new category of service
☒ Yes ☐ No

If yes, provide the dollar amount of all **non-capitalized** operating start-up costs (including operating deficits) through the first full fiscal year when the project achieves or exceeds the target utilization specified in Part 1100.

Estimated start-up costs and operating deficit cost is $ 0.

Project Status and Completion Schedules

For facilities in which prior permits have been issued please provide the permit numbers.

Indicate the stage of the project's architectural drawings:

☒ None or not applicable ☐ Preliminary
☐ Schematics ☐ Final Working

Anticipated project completion date (refer to Part 1130.140): September 30, 2021

Indicate the following with respect to project expenditures or to financial commitments (refer to Part 1130.140):

☐ Purchase orders, leases or contracts pertaining to the project have been executed.
☐ Financial commitment is contingent upon permit issuance. Provide a copy of the contingent "certification of financial commitment" document, highlighting any language related to CON Contingencies
☒ Financial Commitment will occur after permit issuance.

APPEND DOCUMENTATION AS ATTACHMENT 8, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

State Agency Submittals [Section 1130.620(c)]

Are the following submittals up to date as applicable: Not applicable
☐ Cancer Registry
☐ APORS
☐ All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted
☐ All reports regarding outstanding permits
Failure to be up to date with these requirements will result in the application for permit being deemed incomplete.

Cost Space Requirements

Provide in the following format, the **Departmental Gross Square Feet (DGSF)** or the **Building Gross Square Feet (BGSF)** and cost. The type of gross square footage either **DGSF** or **BGSF** must be identified. The sum of the department costs **MUST** equal the total estimated project costs. Indicate if any space is being reallocated for a different purpose. Include outside wall measurements plus the department's or area's portion of the surrounding circulation space. **Explain the use of any vacated space.**

		Gross Square Feet		Amount of Proposed Total Gross Square Feet That Is:			
Dept. / Area	**Cost**	**Existing**	**Proposed**	**New Const.**	**Modernized**	**As Is**	**Vacated Space**
REVIEWABLE							
Medical Surgical							
Intensive Care							
Diagnostic Radiology							
MRI							
Total Clinical							
NON REVIEWABLE							
Administrative							
Parking							
Gift Shop							
Total Non-clinical							
TOTAL							

APPEND DOCUMENTATION AS ATTACHMENT 9, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

CERTIFICATION

The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are:

- in the case of a corporation, any two of its officers or members of its Board of Directors;
- in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
- in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist);
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of Chicago Cosmetic Surgery Institute, LLC * **in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.**

SIGNATURE	SIGNATURE
David A. Shifrin PRINTED NAME	PRINTED NAME
Manager PRINTED TITLE	PRINTED TITLE
Notarization: Subscribed and sworn to before me this _____ day of _____	Notarization: Subscribed and sworn to before me this _____ day of _____
Signature of Notary	Signature of Notary
Seal	Seal

*Insert the EXACT legal name of the applicant

#20-020

CERTIFICATION

The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are:

- in the case of a corporation, any two of its officers or members of its Board of Directors;
- in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
- in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist);
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of RES Investment, LLC * **in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.**

SIGNATURE	SIGNATURE
David A. Shifrin PRINTED NAME	PRINTED NAME
Manager PRINTED TITLE	PRINTED TITLE
Notarization: Subscribed and sworn to before me this _____ day of _____	Notarization: Subscribed and sworn to before me this _____ day of _____
Signature of Notary	Signature of Notary
Seal	Seal

*Insert the EXACT legal name of the applicant

SECTION III. BACKGROUND, PURPOSE OF THE PROJECT, AND ALTERNATIVES - INFORMATION REQUIREMENTS

This Section is applicable to all projects except those that are solely for discontinuation with no project costs.

1110.110(a) – Background of the Applicant

READ THE REVIEW CRITERION and provide the following required information:

BACKGROUND OF APPLICANT

1. A listing of all health care facilities owned or operated by the applicant, including licensing, and certification if applicable.
2. A listing of all health care facilities currently owned and/or operated in Illinois, by any corporate officers or directors, LLC members, partners, or owners of at least 5% of the proposed health care facility.
3. For the following questions, please provide information for each applicant, including corporate officers or directors, LLC members, partners and owners of at least 5% of the proposed facility. A health care facility is considered owned or operated by every person or entity that owns, directly or indirectly, an ownership interest.
   a. A certified listing of any adverse action taken against any facility owned and/or operated by the applicant, directly or indirectly, during the three years prior to the filing of the application.
   b. A certified listing of each applicant, identifying those individuals that have been cited, arrested, taken into custody, charged with, indicted, convicted or tried for, or pled guilty to the commission of any felony or misdemeanor or violation of the law, except for minor parking violations; or the subject of any juvenile delinquency or youthful offender proceeding. Unless expunged, provide details about the conviction and submit any police or court records regarding any matters disclosed.
   c. A certified and detailed listing of each applicant or person charged with fraudulent conduct or any act involving moral turpitude.
   d. A certified listing of each applicant with one or more unsatisfied judgements against him or her.
   e. A certified and detailed listing of each applicant who is in default in the performance or discharge of any duty or obligation imposed by a judgment, decree, order or directive of any court or governmental agency.
4. Authorization permitting HFSRB and DPH access to any documents necessary to verify the information submitted, including, but not limited to official records of DPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. **Failure to provide such authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.**
5. If, during a given calendar year, an applicant submits more than one application for permit, the documentation provided with the prior applications may be utilized to fulfill the information requirements of this criterion. In such instances, the applicant shall attest that the information was previously provided, cite the project number of the prior application, and certify that no changes have occurred regarding the information that has been previously provided. The applicant is able to submit amendments to previously submitted information, as needed, to update and/or clarify data.

APPEND DOCUMENTATION AS ATTACHMENT 11, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-4) MUST BE IDENTIFIED IN ATTACHMENT 11.

Criterion 1110.110(b) & (d)

PURPOSE OF PROJECT

1. Document that the project will provide health services that improve the health care or well-being of the market area population to be served.
2. Define the planning area or market area, or other relevant area, per the applicant's definition.
3. Identify the existing problems or issues that need to be addressed as applicable and appropriate for the project.
4. Cite the sources of the documentation.
5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.
6. Provide goals with quantified and measurable objectives, with specific timeframes that relate to achieving the stated goals **as appropriate**.

For projects involving modernization, describe the conditions being upgraded, if any. For facility projects, include statements of the age and condition of the project site, as well as regulatory citations, if any. For equipment being replaced, include repair and maintenance records.

NOTE: Information regarding the "Purpose of the Project" will be included in the State Board Staff Report.

APPEND DOCUMENTATION AS ATTACHMENT 12, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-6) MUST BE IDENTIFIED IN ATTACHMENT 12.

ALTERNATIVES

1) Identify **ALL** of the alternatives to the proposed project:

Alternative options **must** include:

A) Proposing a project of greater or lesser scope and cost;

B) Pursuing a joint venture or similar arrangement with one or more providers or entities to meet all or a portion of the project's intended purposes; developing alternative settings to meet all or a portion of the project's intended purposes;

C) Utilizing other health care resources that are available to serve all or a portion of the population proposed to be served by the project; and

D) Provide the reasons why the chosen alternative was selected.

2) Documentation shall consist of a comparison of the project to alternative options. The comparison shall address issues of total costs, patient access, quality and financial benefits in both the short-term (within one to three years after project completion) and long-term. This may vary by project or situation. **FOR EVERY ALTERNATIVE IDENTIFIED, THE TOTAL PROJECT COST AND THE REASONS WHY THE ALTERNATIVE WAS REJECTED MUST BE PROVIDED.**

3) The applicant shall provide empirical evidence, including quantified outcome data that verifies improved quality of care, as available.

APPEND DOCUMENTATION AS ATTACHMENT 13, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION IV. PROJECT SCOPE, UTILIZATION, AND UNFINISHED/SHELL SPACE

Criterion 1110.120 - Project Scope, Utilization, and Unfinished/Shell Space

READ THE REVIEW CRITERION and provide the following information:

SIZE OF PROJECT:

1. Document that the amount of physical space proposed for the proposed project is necessary and not excessive. **This must be a narrative and it shall include the basis used for determining the space and the methodology applied.**

2. If the gross square footage exceeds the BGSF/DGSF standards in Appendix B, justify the discrepancy by documenting one of the following:

   a. Additional space is needed due to the scope of services provided, justified by clinical or operational needs, as supported by published data or studies and certified by the facility's Medical Director.

   b. The existing facility's physical configuration has constraints or impediments and requires an architectural design that delineates the constraints or impediments.

   c. The project involves the conversion of existing space that results in excess square footage.

   d. Additional space is mandated by governmental or certification agency requirements that were not in existence when Appendix B standards were adopted.

Provide a narrative for any discrepancies from the State Standard. A table must be provided in the following format with Attachment 14.

SIZE OF PROJECT				
DEPARTMENT/SERVICE	PROPOSED BGSF/DGSF	STATE STANDARD	DIFFERENCE	MET STANDARD?

APPEND DOCUMENTATION AS ATTACHMENT 14, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

PROJECT SERVICES UTILIZATION:

This criterion is applicable only to projects or portions of projects that involve services, functions or equipment for which HFSRB has established utilization standards or occupancy targets in 77 Ill. Adm. Code 1100.

Document that in the second year of operation, the annual utilization of the service or equipment shall meet or exceed the utilization standards specified in 1110.Appendix B. **A narrative of the rationale that supports the projections must be provided.**

A table must be provided in the following format with Attachment 15.

UTILIZATION					
	DEPT./ SERVICE	HISTORICAL UTILIZATION (PATIENT DAYS) (TREATMENTS) ETC.	PROJECTED UTILIZATION	STATE STANDARD	MEET STANDARD?
YEAR 1					
YEAR 2					

APPEND DOCUMENTATION AS ATTACHMENT 15, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

UNFINISHED OR SHELL SPACE:

Provide the following information:

1. Total gross square footage (GSF) of the proposed shell space.

2. The anticipated use of the shell space, specifying the proposed GSF to be allocated to each department, area or function.

3. Evidence that the shell space is being constructed due to:
   a. Requirements of governmental or certification agencies; or
   b. Experienced increases in the historical occupancy or utilization of those areas proposed to occupy the shell space.

4. Provide:
   a. Historical utilization for the area for the latest five-year period for which data is available; and
   b. Based upon the average annual percentage increase for that period, projections of future utilization of the area through the anticipated date when the shell space will be placed into operation.

APPEND DOCUMENTATION AS ATTACHMENT 16, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

ASSURANCES:

Submit the following:

1. Verification that the applicant will submit to HFSRB a CON application to develop and utilize the shell space, regardless of the capital thresholds in effect at the time or the categories of service involved.

2. The estimated date by which the subsequent CON application (to develop and utilize the subject shell space) will be submitted; and

3. The anticipated date when the shell space will be completed and placed into operation.

APPEND DOCUMENTATION AS ATTACHMENT 17, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION V. SERVICE SPECIFIC REVIEW CRITERIA

G. Non-Hospital Based Ambulatory Surgery

Applicants proposing to establish, expand and/or modernize the Non-Hospital Based Ambulatory Surgery category of service must submit the following information.

ASTC Service
☐ Cardiovascular
☐ Colon and Rectal Surgery
☐ Dermatology
☐ General Dentistry
☒ General Surgery
☐ Gastroenterology
☒ Neurological Surgery
☐ Nuclear Medicine
☒ Obstetrics/Gynecology
☒ Ophthalmology
☐ Oral/Maxillofacial Surgery
☒ Orthopedic Surgery
☒ Otolaryngology
☒ Pain Management
☐ Physical Medicine and Rehabilitation
☒ Plastic Surgery
☒ Podiatric Surgery
☐ Radiology
☐ Thoracic Surgery
☐ Urology
☐ Other_____

3. READ the applicable review criteria outlined below and **submit the required documentation for the criteria:**

APPLICABLE REVIEW CRITERIA	Establish New ASTC or Service	Expand Existing Service
1110.235(c)(2)(B) – Service to GSA Residents	X	X
1110.235(c)(3) – Service Demand – Establishment of an ASTC or Additional ASTC Service	X	
1110.235(c)(4) – Service Demand – Expansion of Existing ASTC Service		X
1110.235(c)(5) – Treatment Room Need Assessment	X	X
1110.235(c)(6) – Service Accessibility	X	
1110.235(c)(7)(A) – Unnecessary Duplication/Maldistribution	X	
1110.235(c)(7)(B) – Maldistribution	X	

1110.235(c)(7)(C) – Impact to Area Providers	X	
1110.235(c)(8) – Staffing	X	X
1110.235(c)(9) – Charge Commitment	X	X
1110.235(c)(10) – Assurances	X	X

APPEND DOCUMENTATION AS ATTACHMENT 24, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

The following Sections DO NOT need to be addressed by the applicants or co-applicants responsible for funding or guaranteeing the funding of the project if the applicant has a bond rating of A- or better from Fitch's or Standard and Poor's rating agencies, or A3 or better from Moody's (the rating shall be affirmed within the latest 18-month period prior to the submittal of the application):

- **Section 1120.120 Availability of Funds – Review Criteria**
- **Section 1120.130 Financial Viability – Review Criteria**
- **Section 1120.140 Economic Feasibility – Review Criteria, subsection (a)**

VI. 1120.120 - AVAILABILITY OF FUNDS

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable **[Indicate the dollar amount to be provided from the following sources]:**

$100,000	a) Cash and Securities – statements (e.g., audited financial statements, letters from financial institutions, board resolutions) as to: 1) the amount of cash and securities available for the project, including the identification of any security, its value and availability of such funds; and 2) interest to be earned on depreciation account funds or to be earned on any asset from the date of applicant's submission through project completion;
_____	b) Pledges – for anticipated pledges, a summary of the anticipated pledges showing anticipated receipts and discounted value, estimated time table of gross receipts and related fundraising expenses, and a discussion of past fundraising experience.
_____	c) Gifts and Bequests – verification of the dollar amount, identification of any conditions of use, and the estimated time table of receipts;
$985,536 (FMV of Lease)	d) Debt – a statement of the estimated terms and conditions (including the debt time period, variable or permanent interest rates over the debt time period, and the anticipated repayment schedule) for any interim and for the permanent financing proposed to fund the project, including: 1) For general obligation bonds, proof of passage of the required referendum or evidence that the governmental unit has the authority to issue the bonds and evidence of the dollar amount of the issue, including any discounting anticipated; 2) For revenue bonds, proof of the feasibility of securing the specified amount and interest rate; 3) For mortgages, a letter from the prospective lender attesting to the expectation of making the loan in the amount and time indicated, including the anticipated interest rate and any conditions associated with the mortgage, such as, but not limited to, adjustable interest rates, balloon payments, etc.; 4) For any lease, a copy of the lease, including all the terms and conditions, including any purchase options, any capital improvements to the property and provision of capital equipment; 5) For any option to lease, a copy of the option, including all terms and conditions.

_____	e) Governmental Appropriations – a copy of the appropriation Act or ordinance accompanied by a statement of funding availability from an official of the governmental unit. If funds are to be made available from subsequent fiscal years, a copy of a resolution or other action of the governmental unit attesting to this intent;
_____	f) Grants – a letter from the granting agency as to the availability of funds in terms of the amount and time of receipt;
_____	g) All Other Funds and Sources – verification of the amount and type of any other funds that will be used for the project.
$1,085,536	**TOTAL FUNDS AVAILABLE**

APPEND DOCUMENTATION AS ATTACHMENT 33, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION VII. 1120.130 - FINANCIAL VIABILITY

All the applicants and co-applicants shall be identified, specifying their roles in the project funding or guaranteeing the funding (sole responsibility or shared) and percentage of participation in that funding.

Financial Viability Waiver

The applicant is not required to submit financial viability ratios if:

1. "A" Bond rating or better
2. All of the projects capital expenditures are completely funded through internal sources
3. The applicant's current debt financing or projected debt financing is insured or anticipated to be insured by MBIA (Municipal Bond Insurance Association Inc.) or equivalent
4. The applicant provides a third party surety bond or performance bond letter of credit from an A rated guarantor.

See Section 1120.130 Financial Waiver for information to be provided

APPEND DOCUMENTATION AS ATTACHMENT 34, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

The applicant or co-applicant that is responsible for funding or guaranteeing funding of the project shall provide viability ratios for the latest three years for which **audited financial statements are available and for the first full fiscal year at target utilization, but no more than two years following project completion.** When the applicant's facility does not have facility specific financial statements and the facility is a member of a health care system that has combined or consolidated financial statements, the system's viability ratios shall be provided. If the health care system includes one or more hospitals, the system's viability ratios shall be evaluated for conformance with the applicable hospital standards.

	Historical 3 Years			Projected
Enter Historical and/or Projected Years:				
Current Ratio				
Net Margin Percentage				
Percent Debt to Total Capitalization				
Projected Debt Service Coverage				
Days Cash on Hand				
Cushion Ratio				

Provide the methodology and worksheets utilized in determining the ratios detailing the calculation and applicable line item amounts from the financial statements. Complete a separate table for each co-applicant and provide worksheets for each.

Variance

Applicants not in compliance with any of the viability ratios shall document that another organization, public or private, shall assume the legal responsibility to meet the debt obligations should the applicant default.

APPEND DOCUMENTATION AS ATTACHMENT 35, IN NUMERICAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION VIII.1120.140 - ECONOMIC FEASIBILITY

This section is applicable to all projects subject to Part 1120.

A. Reasonableness of Financing Arrangements

The applicant shall document the reasonableness of financing arrangements by submitting a notarized statement signed by an authorized representative that attests to one of the following:

1) That the total estimated project costs and related costs will be funded in total with cash and equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation; or

2) That the total estimated project costs and related costs will be funded in total or in part by borrowing because:

   A) A portion or all of the cash and equivalents must be retained in the balance sheet asset accounts in order to maintain a current ratio of at least 2.0 times for hospitals and 1.5 times for all other facilities; or

   B) Borrowing is less costly than the liquidation of existing investments, and the existing investments being retained may be converted to cash or used to retire debt within a 60-day period.

B. Conditions of Debt Financing

This criterion is applicable only to projects that involve debt financing. The applicant shall document that the conditions of debt financing are reasonable by submitting a notarized statement signed by an authorized representative that attests to the following, as applicable:

1) That the selected form of debt financing for the project will be at the lowest net cost available;

2) That the selected form of debt financing will not be at the lowest net cost available, but is more advantageous due to such terms as prepayment privileges, no required mortgage, access to additional indebtedness, term (years), financing costs and other factors;

3) That the project involves (in total or in part) the leasing of equipment or facilities and that the expenses incurred with leasing a facility or equipment are less costly than constructing a new facility or purchasing new equipment.

C. Reasonableness of Project and Related Costs

Read the criterion and provide the following:

1. Identify each department or area impacted by the proposed project and provide a cost and square footage allocation for new construction and/or modernization using the following format (insert after this page).

COST AND GROSS SQUARE FEET BY DEPARTMENT OR SERVICE									
Department (list below)	A	B	C	D	E	F	G	H	Total Cost (G + H)
	Cost/Square Foot New	Cost/Square Foot Mod.	Gross Sq. Ft. New	Gross Sq. Ft. Circ.*	Gross Sq. Ft. Mod.	Gross Sq. Ft. Circ.*	Const. $ (A x C)	Mod. $ (B x E)	
Contingency									
TOTALS									

* Include the percentage (%) of space for circulation

D. Projected Operating Costs

The applicant shall provide the projected direct annual operating costs (in current dollars per equivalent patient day or unit of service) for the first full fiscal year at target utilization but no more than two years following project completion. Direct cost means the fully allocated costs of salaries, benefits and supplies for the service.

E. Total Effect of the Project on Capital Costs

The applicant shall provide the total projected annual capital costs (in current dollars per equivalent patient day) for the first full fiscal year at target utilization but no more than two years following project completion.

APPEND DOCUMENTATION AS ATTACHMENT 36, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION IX. SAFETY NET IMPACT STATEMENT

SAFETY NET IMPACT STATEMENT that describes all the following must be submitted for ALL SUBSTANTIVE PROJECTS AND PROJECTS TO DISCONTINUE HEALTH CARE FACILITIES [20 ILCS 3960/5.4]:

1.The project's material impact, if any, on essential safety net services in the community, to the extent that it is feasible for an applicant to have such knowledge.

2.The project's impact on the ability of another provider or health care system to cross-subsidize safety net services, if reasonably known to the applicant.

3. How the discontinuation of a facility or service might impact the remaining safety net providers in a given community, if reasonably known by the applicant.

Safety Net Impact Statements shall also include all of the following:

1.For the 3 fiscal years prior to the application, a certification describing the amount of charity care provided by the applicant. The amount calculated by hospital applicants shall be in accordance with the reporting requirements for charity care reporting in the Illinois Community Benefits Act. Non-hospital applicants shall report charity care, at cost, in accordance with an appropriate methodology specified by the Board.

2. For the 3 fiscal years prior to the application, a certification of the amount of care provided to Medicaid patients. Hospital and non-hospital applicants shall provide Medicaid information in a manner consistent with the information reported each year to the Illinois Department of Public Health regarding "Inpatients and Outpatients Served by Payor Source" and "Inpatient and Outpatient Net Revenue by Payor Source" as required by the Board under Section 13 of this Act and published in the Annual Hospital Profile.

3. Any information the applicant believes is directly relevant to safety net services, including information regarding teaching, research, and any other service.

A table in the following format must be provided as part of Attachment 37.

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
Total			
Charity (cost in dollars)			
Inpatient			
Outpatient			
Total			
MEDICAID			
Medicaid (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
Total			
Medicaid (revenue)			
Inpatient			
Outpatient			
Total			

APPEND DOCUMENTATION AS ATTACHMENT 37, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION X. CHARITY CARE INFORMATION

Charity Care information MUST be furnished for ALL projects [1120.20(c)].

1. All applicants and co-applicants shall indicate the amount of charity care for the latest three **audited** fiscal years, the cost of charity care and the ratio of that charity care cost to net patient revenue.

2. If the applicant owns or operates one or more facilities, the reporting shall be for each individual facility located in Illinois. If charity care costs are reported on a consolidated basis, the applicant shall provide documentation as to the cost of charity care; the ratio of that charity care to the net patient revenue for the consolidated financial statement; the allocation of charity care costs; and the ratio of charity care cost to net patient revenue for the facility under review.

3. If the applicant is not an existing facility, it shall submit the facility's projected patient mix by payer source, anticipated charity care expense and projected ratio of charity care to net patient revenue by the end of its second year of operation.

Charity care" means care provided by a health care facility for which the provider does not expect to receive payment from the patient or a third-party payer (20 ILCS 3960/3). Charity Care must be provided at cost.

A table in the following format must be provided for all facilities as part of Attachment 39.

CHARITY CARE			
	Year	Year	Year
Net Patient Revenue			
Amount of Charity Care (charges)			
Cost of Charity Care			

APPEND DOCUMENTATION AS ATTACHMENT 38, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Section I, Identification, General Information, and Certification

Applicants

The Illinois Certificates of Good Standing for Chicago Cosmetic Surgery Institute LLC d/b/a South Loop Surgery Center and RES Investments LLC are attached at Attachment – 1.

Chicago Cosmetic Surgery Institute, LLC will be the operator/licensee of South Loop Surgery Center. South Loop Surgery Center is a trade name of Chicago Cosmetic Surgery Institute, LLC and is not separately organized.

As the person who controls capital assets that are part of the project, RES Investments LLC is named as an applicant for this certificate of need application.

Attachment – 1

File Number 0633644-2

STATE OF ILLINOIS
OFFICE OF THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

CHICAGO COSMETIC SURGERY INSTITUTE LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 22, 2017, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 14TH *day of* APRIL *A.D.* 2020 .

SEAL OF THE STATE OF ILLINOIS — AUG. 26TH 1818

Authentication #: 2010503606 verifiable until 04/14/2021
Authenticate at: http://www.cyberdriveillinois.com

Jesse White
SECRETARY OF STATE

Attachment - 1

File Number 0563412-1

STATE OF ILLINOIS
OFFICE OF THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RES INVESTMENTS LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON FEBRUARY 23, 2016, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 14TH *day of* APRIL *A.D.* 2020 .

SEAL OF THE STATE OF ILLINOIS
AUG. 26TH 1818

Authentication #: 2010503636 verifiable until 04/14/2021
Authenticate at: http://www.cyberdriveillinois.com

Jesse White
SECRETARY OF STATE

Attachment - 1

Section I, Identification, General Information, and Certification

Site Ownership

A copy of the lease between Chicago Cosmetic Surgery Institute LLC and RES Investments LLC is attached at Attachment – 2A.

A copy of the property tax statement documenting RES Investment's ownership of the building housing South Loop Surgery Center is attached at Attachment – 2B.

LEASE

THIS LEASE is effective as of this 1st day of July, 2018 (the "Effective Date"), by and between RES Investments LLC, an Illinois limited liability company ("Landlord"), and Chicago Cosmetic Surgery Institute LLC, an Illinois limited liability company ("Tenant").

ARTICLE 1 - LEASE OF PREMISES

Section 1.01. Basic Lease Provisions and Definitions.

(a) **Leased Premises**: The real estate premises described on **Exhibit A** attached hereto (the "Real Estate"), constituting a portion of the buildings and improvements (the "Building") commonly known as 2335 S. Michigan Avenue, Chicago, Illinois 60616 (collectively, the "Leased Premises")

(b) **Commencement Date**: The Effective Date.

(c) **Lease Term**: The period beginning on July 1, 2018 and ending on December 31, 2030 (the "Lease Term").

(d) **Permitted Use**: The operation of a cosmetic surgery center, a related medical practice and/or related medical services and uses ancillary thereto.

(e) **Notices**: Addresses for notices are as follows:

Landlord:	RES Investments LLC 2335 S. Michigan Avenue Chicago, Illinois 60616 Attn: David Shifrin
Tenant:	Chicago Cosmetic Surgery Institute LLC 2335 S. Michigan Avenue Chicago, Illinois 60616 Attn: David Shifrin

(f) **Payments**: All payments made by Tenant to Landlord hereunder shall be made by electronic payment method, as per instructions provided by Landlord.

(g) **Exhibits**: Exhibit A Legal Description of Leased Premises

Section 1.02. Lease of Premises. Subject to the terms and conditions in this Lease, Landlord hereby leases to Tenant and Tenant hereby leases from Landlord the Leased Premises for the Lease Term as further set forth herein.

ARTICLE 2 - TERM AND POSSESSION

Section 2.01. Lease Term. The Lease Term shall commence on the Effective Date (the "Commencement Date"), and shall end, unless terminated sooner in accordance with the terms of this Lease, upon expiration of the Lease Term.

Section 2.02. Condition of the Leased Premises. Landlord shall deliver possession of the Leased Premises to Tenant in its "**AS-IS, WHERE IS**" condition. Tenant has inspected the Leased Premises, including all electrical, mechanical and communications systems therein, or has had an opportunity to do so, and agrees to accept the same "**AS-IS, WHERE IS**" without any agreements, representations, understandings or obligations on the part of Landlord to perform any alterations, repairs or improvements.

Section 2.03. Surrender of the Leased Premises. Upon the expiration or earlier termination of this Lease, Tenant shall, at its sole cost and expense, immediately: (a) surrender the Leased Premises to Landlord in broom-clean condition and in good order, condition and repair; (b) remove from the Leased Premises or where located (i) Tenant's Property (as defined in Section 8.01 below), and (ii) any alterations required to be removed pursuant to Section 7.02 below; (c) repair any damage caused by any such removal; and (d) restore the Leased Premises to the condition existing upon the Commencement Date, reasonable wear and tear excepted. All of Tenant's Property that is not removed within ten (10) days following Landlord's written demand therefor shall be conclusively deemed to have been abandoned and Landlord shall be entitled to dispose of such property at Tenant's cost without incurring any liability to Tenant. This Section 2.03 shall survive the expiration or any earlier termination of this Lease.

Section 2.04. Holding Over. If Tenant retains possession of the Leased Premises after the expiration of the Lease Term or earlier termination of this Lease, Tenant shall be a tenant at sufferance at one hundred fifty (150%) of the monthly Base Rent due during the Lease Term for the Leased Premises, and otherwise upon the terms, covenants and conditions herein specified, so far as applicable. Acceptance by Landlord of Base Rent after such expiration or earlier termination shall not result in a renewal of this Lease, nor shall such acceptance create a month-to-month tenancy. In the event a month-to-month tenancy is created by operation of law, either party shall have the right to terminate such month-to-month tenancy upon thirty (30) days' prior written notice to the other, whether or not said notice is given on the rent paying date. This Section 2.04 shall in no way constitute consent by Landlord to any holding over by Tenant upon the expiration or earlier termination of this Lease, nor limit Landlord's remedies in such event.

ARTICLE 3 - RENT

Section 3.01. Base Rent. Tenant shall pay Landlord base rent for the use and occupancy of the Leased Premises during the Lease Term ("Base Rent") in the monthly amount of $11,333 per month. Rent for any partial month during the Lease Term shall be prorated based on the actual number of days in such month. Base Rent shall be payable monthly, in advance, without demand, deduction or offset, on the Commencement Date and on or before the first day of each and every calendar month thereafter during the Lease Term. Tenant shall be responsible for delivering Base Rent to the payment address set forth in Section 1.01(e) above in accordance with this Section 3.01.

Section 3.02. Payment of Additional Rent.

(a) This Lease is and shall be deemed and construed to be a triple net lease and the Base Rent specified herein shall be net to Landlord in each month during the Lease Term. Except as otherwise set forth herein, Tenant shall pay all costs, expenses and obligations of every kind whatsoever relating to the Leased Premises which may arise or become due during the Lease Term and agrees to indemnify, defend and hold harmless Landlord against any such costs, expenses and obligations. Any amount required to be paid by Tenant hereunder (in addition to Base Rent) and any charges or expenses incurred by Landlord on behalf of Tenant under the terms of this Lease shall be considered "Additional Rent" payable in the same manner and upon the same terms and conditions as Base Rent reserved hereunder, except as set forth herein to the contrary. Base Rent, Additional Rent and any other amounts which Tenant is or becomes obligated to pay Landlord under this Lease or other agreement entered in connection herewith, are sometimes referred to collectively herein as "Rent." Any failure on the part of Tenant to pay such Rent when and as the same shall become due shall entitle Landlord to the remedies available to it for non-payment of Base Rent.

(b) Tenant shall be responsible for the payment of all real estate tax or assessment or service payments in lieu thereof, and any license fee, commercial rental tax, improvement bond or other similar charge or tax (other than inheritance, personal income or estate taxes) imposed upon the Building or Real Estate during the Lease Term by any authority having the power to so charge or tax ("Real Estate Taxes"). Notwithstanding the foregoing, Landlord and Tenant agree that Tenant's obligation to pay its pro rata share of Real Estate Taxes for the Leased Premises during the Lease Term is included in the Base Rent hereunder and Landlord shall be responsible for the timely payment of all Real Estate Taxes for the Leased Premises during the Term without further reimbursement from Tenant.

Section 3.03. Late Charges. Tenant acknowledges that Landlord shall incur certain additional unanticipated administrative and legal costs and expenses if Tenant fails to pay timely any payment required hereunder. Therefore, in addition to the other remedies available to Landlord hereunder, if any payment required to be paid by Tenant to Landlord hereunder shall become overdue, such unpaid amount shall bear interest from the due date thereof to the date of payment at the prime rate of interest, as reported in the Wall Street Journal (the "Prime Rate") plus six percent (6%) per annum.

ARTICLE 4 – INTENTIONALLY OMITTED

ARTICLE 5 – OCCUPANCY AND USE

Section 5.01. Use. Tenant shall use the Leased Premises for the Permitted Use and for no other purpose without the prior written consent of Landlord.

Section 5.02. Covenants of Tenant Regarding Use. Tenant shall: (i) use and maintain the Leased Premises and conduct its business thereon in a safe, careful, reputable and lawful manner; (ii) comply with all covenants that encumber the Leased Premises and all laws, rules, regulations, orders, ordinances, directions and requirements of any governmental authority or agency, now in

force or which may hereafter be in force, including, without limitation, those which shall impose upon Landlord or Tenant any duty with respect to or triggered by a change in the use or occupation of, or any improvement or alteration to, the Leased Premises; and (iii) comply with and obey all reasonable directions, rules and regulations promulgated by Landlord from time to time, as may be modified by Landlord on reasonable notice to Tenant. Tenant shall not use the Leased Premises, nor allow the Leased Premises to be used, for any purpose or in any manner that would: (i) invalidate any policy of insurance now or hereafter carried by Landlord on the Building; or (ii) increase the rate of premiums payable on any such insurance policy unless Tenant reimburses Landlord for any increase in premium charged.

Section 5.03. Landlord's Rights Regarding Use. Without limiting any of Landlord's rights specified elsewhere in this Lease, Landlord, its agents, employees and contractors and any mortgagee of the Leased Premises shall have the right to enter any part of the Leased Premises at reasonable times upon reasonable notice (except in the event of an emergency where no notice shall be required) for the purposes of examining or inspecting the same (including, without limitation, testing to confirm Tenant's compliance with this Lease), showing the same to prospective purchasers, mortgagees or tenants, and making such repairs, alterations or improvements to the Leased Premises or the Leased Premises as Landlord may deem necessary or desirable. Landlord shall incur no liability to Tenant for such entry, nor shall such entry constitute an eviction of Tenant or a termination of this Lease, or entitle Tenant to any abatement of Rent therefor. Without limiting the foregoing, Landlord covenants and agrees that in exercising any of its rights under this Section 5.03, Landlord shall use reasonable efforts to minimize any interference with Tenant's use of the Leased Premises for the Permitted Use.

ARTICLE 6 – UTILITIES

During the Lease Term, Tenant shall obtain in its own name and pay directly to the appropriate supplier the cost of all utilities and services serving the Leased Premises. Landlord shall not be liable in damages or otherwise for any failure or interruption of any utility or other service and no such failure or interruption shall entitle Tenant to terminate this Lease or withhold sums due hereunder.

ARTICLE 7 – REPAIRS, MAINTENANCE AND ALTERATIONS

Section 7.01. Repair and Maintenance Obligations. During the Lease Term, Tenant shall make all necessary repairs, replacements and maintenance to the Leased Premises, including, without limitation, the electrical, plumbing and other mechanical systems, plate glass, floors, windows and doors, interior and exterior lighting, walls, roof, foundation, structural frame of the Building and the parking and landscaped areas located on the Real Estate, provided that during the Additional Term, Landlord shall make all necessary repairs, replacements and maintenance to the exterior walls, roof, foundation, structural frame of the Building and the parking and landscaped areas located on the Land, provided however, to the extent any such repairs, replacements or maintenance are required because of the negligence, misuse or default of Tenant, its employees, agents, contractors, customers or invitees, Landlord shall make such repairs at Tenant's sole expense.

Section 7.02. Alterations. Tenant shall not permit alterations in or to the Leased Premises unless and until Landlord has approved the plans therefor in writing, which Landlord may withhold in Landlord's sole discretion. As a condition of any approval, Landlord may, as a part of the approval process, require Tenant to remove the alterations and restore the Leased Premises upon termination or expiration of this Lease; otherwise, all such alterations shall at Landlord's option become a part of the realty and the property of Landlord, and shall not be removed by Tenant. Tenant must construct all approved alterations or cause all approved alterations to be constructed: (a) in accordance with all applicable laws, regulations and building codes; (b) in a good and workmanlike manner and of quality equal to or better than the original construction of the Building; (c) promptly by a contractor approved by Landlord in writing; and (d) in full compliance with all of Landlord's rules and regulations applicable to third party contractors, subcontractors and suppliers performing work at the Leased Premises. No person shall be entitled to any lien derived through or under Tenant for any labor or material furnished to the Leased Premises, and nothing in this Lease shall be construed to constitute Landlord's consent to the creation of any lien. Tenant will pay the cost and expense of all alterations, including, without limitation, a reasonable charge for Landlord's review, inspection and engineering time for alterations, and for any painting, restoring or repairing of the Leased Premises or the Building necessitated by the alterations. Prior to commencing the alterations, Tenant will deliver the following to Landlord in form and amount reasonably satisfactory to Landlord: (a) demolition (if applicable) and payment and performance bonds; (b) builder's "all risk" insurance in an amount at least equal to the replacement value of the alterations; and (c) evidence that Tenant and each of Tenant's contractors have in force liability insurance insuring against construction related risks in at least the form, amounts and coverages required of Tenant by Landlord in its sole discretion. The insurance policies described in clauses (b) and (c) of this section must name Landlord and Landlord's lender (if any) as additional insureds, specifically including completed operations. Landlord may inspect construction of the alterations at any time. Immediately after completing the alterations, Tenant will furnish Landlord with contractor affidavits and full and final lien waivers covering all labor and materials expended and used in connection with the alterations.

Section 7.03. Liens. Tenant will keep the Leased Premises and Real Estate free from any mechanics', materialmens', designers' or other liens arising out of any work performed, materials furnished or obligations incurred by or for Tenant or any person or entity claiming by, through or under Tenant, including but not limited to any Tenant's Work or alterations. If any such liens are filed and Tenant, within fifteen (15) days after such filing, does not release the same of record or provide Landlord with a bond or other security satisfactory to Landlord protecting Landlord and the Leased Premises and Real Estate against such liens, Landlord may, without waiving its rights and remedies based upon such breach by Tenant and without releasing Tenant from any obligation under this Lease, cause such liens to be released by any means Landlord deems proper, including, but not limited to, paying the claim giving rise to the lien or posting security to cause the discharge of the lien. In such event, Tenant will reimburse Landlord, as Additional Rent, for all amounts Landlord pays (including, without limitation, reasonable attorneys' fees and costs). To the fullest extent allowable under the Laws, Tenant releases and will indemnify, protect, defend (with counsel reasonably acceptable to Landlord) and hold harmless the Landlord and Landlord's mortgagee and the Leased Premises from and against any claims in any manner relating to or arising out of any alterations or any other work performed, materials furnished or obligations incurred by or for Tenant or any person or entity claiming by, through or under Tenant.

ARTICLE 8 – INDEMNITY AND INSURANCE

Section 8.01. Release. All of Tenant's trade fixtures, merchandise, inventory, special fire protection equipment, telecommunication and computer equipment, supplemental air conditioning equipment and all other personal property in or about the Leased Premises, the Building or the Real Estate, which is deemed to include the trade fixtures, merchandise, inventory and personal property of others located in or about the Leased Premises or Real Estate at the invitation, direction or acquiescence (express or implied) of Tenant (all of which property shall be referred to herein, collectively, as "Tenant's Property"), shall be and remain at Tenant's sole risk. Landlord shall not be liable to Tenant or to any other person for, and Tenant hereby releases Landlord (and its affiliates, property managers and mortgagees) from (a) any and all liability for theft or damage to Tenant's Property, and (b) any and all liability for any injury to Tenant or its employees, agents, contractors, guests and invitees in or about the Leased Premises, the Building or the Land, except to the extent of personal injury caused directly by the negligence or willful misconduct of Landlord, its agents, employees or contractors. Nothing contained in this Section 8.01 shall limit (or be deemed to limit) the waivers contained in Section 8.06 below. In the event of any conflict between the provisions of Section 8.06 below and this Section 8.01, the provisions of Section 8.06 shall prevail. This Section 8.01 shall survive the expiration or earlier termination of this Lease.

Section 8.02. Indemnification by Tenant. Tenant shall protect, defend, indemnify and hold Landlord, its agents, employees and contractors of all tiers harmless from and against any and all claims, damages, demands, penalties, costs, liabilities, losses, and expenses (including reasonable attorneys' fees and expenses at the trial and appellate levels) to the extent (a) arising out of or relating to any act, omission, negligence, or willful misconduct of Tenant or Tenant's agents, employees, contractors, customers or invitees in or about the Leased Premises, the Building or the Real Estate, (b) arising out of or relating to any of Tenant's Property, or (c) arising out of any other act or occurrence within the Leased Premises, in all such cases except to the extent of personal injury caused directly by the gross negligence or willful misconduct of Landlord, its agents, employees or contractors. Nothing contained in this Section 8.02 shall limit (or be deemed to limit) the waivers contained in Section 8.06 below. In the event of any conflict between the provisions of Section 8.06 below and this Section 8.02, the provisions of Section 8.06 shall prevail. This Section 8.02 shall survive the expiration or earlier termination of this Lease.

Section 8.03. Indemnification by Landlord. Landlord shall protect, defend, indemnify and hold Tenant, its agents, employees and contractors of all tiers harmless from and against any and all claims, damages, demands, penalties, costs, liabilities, losses and expenses (including reasonable attorneys' fees and expenses at the trial and appellate levels) to the extent arising out of or relating to any negligence or willful misconduct of Landlord or Landlord's agents, employees or contractors. Nothing contained in this Section 8.03 shall limit (or be deemed to limit) the waivers contained in Section 8.06 below. In the event of any conflict between the provisions of Section 8.06 below and this Section 8.03, the provisions of Section 8.06 shall prevail. This Section 8.03 shall survive the expiration or earlier termination of this Lease.

Section 8.04. Tenant's Insurance.

(a) During the Lease Term (and any period of early entry or occupancy or holding over by Tenant, if applicable), Tenant shall maintain the following types of insurance, in the amounts specified below:

(i) Liability Insurance. Commercial General Liability Insurance, ISO Form CG 00 01, or its equivalent, covering Tenant's use of the Leased Premises against claims for bodily injury or death or property damage, which insurance shall be primary and non-contributory and shall provide coverage on an occurrence basis with a per occurrence limit in an amount satisfactory to Landlord, for each policy year, which limit may be satisfied by any combination of primary and excess or umbrella per occurrence policies.

(ii) Property Insurance. Special Form Insurance in the amount of the full replacement cost of Tenant's Property (including, without limitation, alterations or additions performed by Tenant pursuant hereto), which insurance shall waive coinsurance limitations.

(b) All insurance required to be carried by Tenant hereunder shall (i) be issued by one or more insurance companies reasonably acceptable to Landlord, licensed to do business in the State in which the Leased Premises is located and having an AM Best's rating of A IX or better, and (ii) provide that said insurance shall not be materially changed, canceled or permitted to lapse without written notice to Landlord. In addition, upon Landlord's request, Tenant shall name Landlord, Landlord's managing agent, and any mortgagee requested by Landlord, as additional insureds under its commercial general liability, excess and umbrella policies (but only to the extent of the limits required hereunder). On or before the Commencement Date (or the date of any earlier entry or occupancy by Tenant), and thereafter, within thirty (30) days prior to the expiration of each such policy, in each case upon Landlord's request, Tenant shall furnish Landlord with certificates of insurance in the form of ACORD 25 (or other evidence of insurance reasonably acceptable to Landlord), evidencing all required coverages, and that with the exception of Worker's Compensation insurance, such insurance is primary and non-contributory. Upon Tenant's receipt of a request from Landlord, Tenant shall provide Landlord with copies of all insurance policies, including all endorsements, evidencing the coverages required hereunder. If Tenant fails to carry such insurance and furnish Landlord with such certificates of insurance or copies of insurance policies (if applicable), Landlord may obtain such insurance on Tenant's behalf and Tenant shall reimburse Landlord upon demand for the cost thereof as Additional Rent. Landlord reserves the right from time to time to require Tenant to obtain higher minimum amounts or different types of insurance if it becomes customary for other landlords of similar buildings in the area to require similar sized tenants in similar industries to carry insurance of such higher minimum amounts or of such different types.

Section 8.05. Landlord's Insurance. During the Lease Term, Landlord shall maintain the following types of insurance, in the amounts specified below:

(a) Liability Insurance. Commercial General Liability Insurance, ISO Form CG 00 01, or its equivalent, covering the Landlord against claims for bodily injury or death and property damage, which insurance shall be primary and non-contributory and shall provide coverage on an occurrence basis with a per occurrence limit of an amount satisfactory to Landlord for each policy

year, which limit may be satisfied by any combination of primary and excess or umbrella per occurrence policies.

(b) Property Insurance. Special Form Insurance in the amount of the full replacement cost of the Building, but excluding Tenant's Property and any other items required to be insured by Tenant pursuant to Section 8.04 above.

Section 8.06. Waiver of Subrogation. Notwithstanding anything contained in this Lease to the contrary, Landlord (and its affiliates, property managers and mortgagees) and Tenant (and its affiliates) hereby waive any rights each may have against the other on account of any loss of or damage to their respective property, the Leased Premises, its contents, or other portions of the Leased Premises or Real Estate arising from any risk which is required to be insured against by Sections 8.04(a)(ii), 8.04(a)(iii) and 8.05(b) above. The special form property insurance policies and worker's compensation insurance policies maintained by Landlord and Tenant as provided in this Lease shall include an endorsement containing an express waiver of any rights of subrogation by the insurance company against Landlord and Tenant, as applicable.

ARTICLE 9 – CASUALTY

Section 9.01. Landlord's Rights. If all or any part of the Building and/or the Leased Premises is(are) damaged by fire or other casualty (a "Casualty"), and if Landlord makes a good faith determination that: (a) restoring the Leased Premises would be uneconomical; or (b) Landlord is required to pay any insurance proceeds arising out of the Casualty to Landlord's mortgagee, then Landlord may terminate this Lease by giving Tenant written notice of Landlord's election to terminate (the "Casualty Termination Notice") within sixty (60) days after the Casualty has occurred, and Rent will abate as of the date of the Casualty. Such termination shall be effective sixty (60) days after the date of the Casualty Termination Notice.

Section 9.02. Repair Obligation. If Landlord elects not to terminate this Lease following a Casualty, then Landlord, within a reasonable time after such Casualty, will proceed with reasonable diligence to repair, restore or rehabilitate the Building and/or the Leased Premises, as the case may be, to substantially the same condition as they existed immediately before such Casualty. However, Landlord will not be required to repair or replace any of the furniture, equipment, fixtures, and other leasehold improvements which may have been placed by or at the request of Tenant and required to be insured by Tenant, and Landlord's obligation to repair or restore the Building and/or the Leased Premises will be limited to the extent of the insurance proceeds actually received by Landlord for the Casualty in question. In the event that Landlord elects not to terminate the Lease and Landlord proceeds to repair the Building and/or the Leased Premises, then Tenant must apply to the replacement or restoration of the furniture, equipment, fixtures and other improvements in the Leased Premises (if replacement or restoration is necessary because of the Casualty) any proceeds of insurance that it may have received from its policy(ies) on account of the Casualty. During such repair or rebuilding of the Building and/or the Leased Premises, Rent for the portion of the Leased Premises rendered untenantable by the damage will be abated on a reasonable basis determined by Landlord from the date of damage until the completion of the repair, restoration or rehabilitation, unless the Casualty was caused by Tenant or any of Tenant's affiliates, in which event Tenant shall continue to pay Rent without abatement.

ARTICLE 10 – EMINENT DOMAIN

If all or any substantial part of the Building or Real Estate shall be acquired by the exercise of eminent domain, Landlord may terminate this Lease by giving written notice to Tenant on or before the date possession thereof is so taken. If all or any part of the Leased Premises shall be acquired by the exercise of eminent domain so that the Leased Premises shall become impractical for Tenant to use for the Permitted Use, Tenant may terminate this Lease by giving written notice to Landlord as of the date possession thereof is so taken. All damages awarded shall belong to Landlord; provided, however, that Tenant may pursue dislocation damages if such amount is not subtracted from Landlord's award.

ARTICLE 11 – ASSIGNMENT AND SUBLEASE

Tenant shall not assign this Lease or sublet the Leased Premises in whole or in part without Landlord's prior written consent. In the event of any permitted assignment or subletting, Tenant shall remain primarily liable hereunder, and any extension, expansion, rights of first offer, rights of first refusal or other options granted to Tenant under this Lease shall be rendered void and of no further force or effect. The acceptance of Rent from any other person shall not be deemed to be a waiver of any of the provisions of this Lease or to be a consent to the assignment of this Lease or the subletting of the Leased Premises. Any assignment or sublease consented to by Landlord shall not relieve Tenant (or its assignee) from obtaining Landlord's consent to any subsequent assignment or sublease. By way of example and not limitation, Landlord shall be deemed to have reasonably withheld consent to a proposed assignment or sublease if in Landlord's opinion: (i) the Leased Premises are or may be in any way adversely affected; (ii) the business reputation of the proposed assignee or subtenant is unacceptable; (iii) the financial worth of the proposed assignee or subtenant is insufficient to meet the obligations hereunder, or (iv) the prospective assignee or subtenant is a bona-fide third-party prospective tenant of Landlord. If Landlord refuses to give its consent to any proposed assignment or subletting, Landlord may, at its option, within thirty (30) days after receiving a request to consent, terminate this Lease by giving Tenant thirty (30) days' prior written notice of such termination, whereupon each party shall be released from all further obligations and liability hereunder, except those which expressly survive the termination of this Lease.

ARTICLE 12 – ESTOPPEL CERTIFICATES AND SNDA

Section 12.01. Estoppel Certificate. Within ten (10) days following receipt of a written request from Landlord, Tenant shall execute and deliver to Landlord, without cost to Landlord, an estoppel certificate in such form as Landlord may reasonably request certifying: (a) that this Lease is in full force and effect and unmodified or stating the nature of any modification; (b) the date to which Rent has been paid; (c) that there are not, to Tenant's knowledge, any uncured defaults or specifying such defaults if any are claimed; and (d) any other matters or state of facts reasonably required respecting the Lease. Such estoppel may be relied upon by Landlord and by any purchaser or mortgagee of the Leased Premises.

Section 12.02. Subordination. This Lease is and shall be expressly subject and subordinate at all times to the lien of any present or future mortgage or deed of trust encumbering fee title to

the Leased Premises. If any such mortgage or deed of trust be foreclosed, upon request of the mortgagee or beneficiary ("Landlord's Mortgagee"), as the case may be, Tenant will attorn to the purchaser at the foreclosure sale. The foregoing provisions are declared to be self-operative and no further instruments shall be required to effect such subordination and/or attornment; provided, however, that subordination of this Lease to any present or future mortgage or trust deed shall be conditioned upon the mortgagee, beneficiary, or purchaser at foreclosure, as the case may be agreeing that Tenant's occupancy of the Leased Premises and other rights under this Lease shall not be disturbed by reason of the foreclosure of such mortgage or trust deed, as the case may be, so long as Tenant is not in default under this Lease. Within ten (10) days following receipt of a written request from Landlord, Tenant shall execute and deliver to Landlord, without cost, any instrument that Landlord deems reasonably necessary or desirable to confirm the subordination of this Lease.

ARTICLE 13 – DEFAULT AND REMEDY

Section 13.01. Default. The occurrence of any of the following shall be a "Default":

(a) Tenant fails to make any payment of Rent within five (5) days after the same is due.

(b) Tenant fails to perform or observe any other term, condition, covenant or obligation required under this Lease for a period of thirty (30) days after written notice thereof from Landlord.

(c) Tenant shall vacate or abandon the Leased Premises, or fail to occupy the Leased Premises or any substantial portion thereof for a period of thirty (30) days without the express written permission of the Landlord.

(d) Tenant shall assign or sublet all or a portion of the Leased Premises in contravention of the provisions of Article 11 of this Lease.

(e) All or substantially all of Tenant's assets in the Leased Premises or Tenant's interest in this Lease are attached or levied under execution (and Tenant does not discharge the same within sixty (60) days thereafter); a petition in bankruptcy, insolvency or for reorganization or arrangement is filed by or against Tenant (and Tenant fails to secure a stay or discharge thereof within sixty (60) days thereafter); Tenant is insolvent and unable to pay its debts as they become due; Tenant makes a general assignment for the benefit of creditors; Tenant takes the benefit of any insolvency action or law; the appointment of a receiver or trustee in bankruptcy for Tenant or its assets if such receivership has not been vacated or set aside within thirty (30) days thereafter; or, dissolution or other termination of Tenant's corporate charter if Tenant is a corporation.

In addition to the defaults described above, the parties agree that if Tenant receives written notice of a violation of the performance of any (but not necessarily the same) term or condition of this Lease three (3) or more times during any twelve (12) month period, regardless of whether such violations are ultimately cured, then such conduct shall, at Landlord's option, represent a separate Default.

Section 13.02. Remedies. Upon the occurrence of any Default, Landlord shall have the following rights and remedies, in addition to those stated elsewhere in this Lease and those allowed by law or in equity, any one or more of which may be exercised without further notice to Tenant:

(a) Landlord may enter the Leased Premises and cure any Default of Tenant, and Tenant shall reimburse Landlord as Additional Rent for any costs and expenses that Landlord thereby incurs; and Landlord shall not be liable to Tenant for any loss or damage that Tenant may sustain by reason of Landlord's action.

(b) Landlord may terminate this Lease by giving Tenant notice of termination, in which event this Lease shall expire and terminate on the date specified in such notice of termination and all rights of Tenant under this Lease and in and to the Leased Premises shall terminate. Tenant shall remain liable for all obligations under this Lease arising up to the date of such termination, and Tenant shall surrender the Leased Premises to Landlord on the date specified in such notice. Furthermore, Tenant shall be liable to Landlord for the unamortized balance of any leasehold improvement allowance and brokerage fees paid in connection with the Lease.

(c) Without terminating this Lease, Landlord may terminate Tenant's right to possession of the Leased Premises, and thereafter, neither Tenant nor any person claiming under or through Tenant shall be entitled to possession of the Leased Premises. In such event, Tenant shall immediately surrender the Leased Premises to Landlord, and Landlord may re-enter the Leased Premises and dispossess Tenant and any other occupants of the Leased Premises by any lawful means and may remove their effects, without prejudice to any other remedy that Landlord may have. Upon termination of possession, Landlord may re-let all or any part thereof as the agent of Tenant for a term different from that which would otherwise have constituted the balance of the Lease Term and for rent and on terms and conditions different from those contained herein, whereupon Tenant shall be immediately obligated to pay to Landlord an amount equal to: (i) the difference between the rent provided for herein and that provided for in any lease covering a subsequent re-letting of the Leased Premises, for the period which would otherwise have constituted the balance of the Lease Term had this Lease not been terminated (said period being referred to herein as the "Remaining Term"); (ii) the costs of recovering possession of the Leased Premises and all other expenses, loss or damage incurred by Landlord by reason of Tenant's Default ("Default Damages"), which shall include, without limitation, expenses of preparing the Leased Premises for re-letting, demolition, repairs, tenant finish improvements, brokers' commissions and attorneys' fees; and (iii) all unpaid Base Rent and Additional Rent that accrued prior to the date of termination of possession, plus any interest and late fees due hereunder (the "Prior Obligations"). Neither the filing of any dispossessory proceeding nor an eviction of personalty in the Leased Premises shall be deemed to terminate the Lease.

(d) Landlord may terminate this Lease and recover from Tenant all damages Landlord may incur by reason of Tenant's default, including, without limitation, an amount which, at the date of such termination is equal to the sum of the following: (i) the value of the excess, if any, discounted at the prime rate of interest (as reported in the *Wall Street Journal*), of: (A) the Base Rent, Additional Rent and all other sums that would have been payable hereunder by Tenant for the Remaining Term; less (B) the aggregate reasonable rental value of the Leased Premises for the Remaining Term, as determined by a real estate broker licensed in the State of Illinois who has at

least ten (10) years of experience; (ii) all of Landlord's Default Damages; and (iii) all Prior Obligations. Landlord and Tenant acknowledge and agree that the payment of the amount set forth in clause (i) above shall not be deemed a penalty, but shall merely constitute payment of liquidated damages, it being understood that actual damages to Landlord are extremely difficult, if not impossible, to ascertain. It is expressly agreed and understood that all of Tenant's liabilities and obligations set forth in this subsection (d) shall survive termination.

(e) With or without terminating this Lease, declare immediately due and payable the sum of the following: (i) the present value (discounted at the prime rate of interest, as reported in the *Wall Street Journal*) of all Base Rent and Additional Rent due and coming due under this Lease for the entire Remaining Term (as if by the terms of this Lease they were payable in advance); (ii) all Default Damages; and (iii) all Prior Obligations, whereupon Tenant shall be obligated to pay the same to Landlord; provided, however, that such payment shall not be deemed a penalty or liquidated damages, but shall merely constitute payment in advance of all Base Rent and Additional Rent payable hereunder throughout the Remaining Term, and provided further, however, that upon Landlord receiving such payment, Tenant shall be entitled to receive from Landlord all rents received by Landlord from other assignees, tenant and subtenants on account of said Leased Premises during the Remaining Term (but only to the extent that the monies to which Tenant shall so become entitled do not exceed the entire amount actually paid by Tenant to Landlord pursuant to this subsection I), less all Default Damages of Landlord incurred but not yet reimbursed by Tenant.

(f) Landlord may sue for injunctive relief or to recover damages for any loss resulting from the Default.

Section 13.04. Limitation of Landlord's Liability. If Landlord shall fail to perform any term, condition, covenant or obligation required to be performed by it under this Lease and if Tenant shall, as a consequence thereof, recover a money judgment against Landlord, Tenant agrees that it shall look solely to Landlord's right, title and interest in and to the Leased Premises for the collection of such judgment; and Tenant further agrees that no other assets of Landlord shall be subject to levy, execution or other process for the satisfaction of Tenant's judgment.

Section 13.05. Nonwaiver of Defaults. Neither party's failure nor delay in exercising any of its rights or remedies or other provisions of this Lease shall constitute a waiver thereof or affect its right thereafter to exercise or enforce such right or remedy or other provision. No waiver of any default shall be deemed to be a waiver of any other default. Landlord's receipt of less than the full Rent due shall not be construed to be other than a payment on account of Rent then due, nor shall any statement on Tenant's check or any letter accompanying Tenant's check be deemed an accord and satisfaction. No act or omission by Landlord or its employees or agents during the Lease Term shall be deemed an acceptance of a surrender of the Leased Premises, and no agreement to accept such a surrender shall be valid unless in writing and signed by Landlord.

Section 13.06. Attorneys' Fees. If either party defaults in the performance or observance of any of the terms, conditions, covenants or obligations contained in this Lease and the non-defaulting party obtains a judgment against the defaulting party, then the defaulting party agrees to reimburse the non-defaulting party for reasonable attorneys' fees incurred in connection

therewith. In addition, if a monetary Default shall occur and Landlord engages outside counsel to exercise its remedies hereunder, and then Tenant cures such monetary Default, Tenant shall pay to Landlord, on demand, all expenses incurred by Landlord as a result thereof, including reasonable attorneys' fees, court costs and expenses actually incurred.

ARTICLE 14 – TENANT'S RESPONSIBILITY REGARDING ENVIRONMENTAL LAWS AND HAZARDOUS SUBSTANCES

Section 14.01. Environmental Definitions.

(a) "Environmental Laws" shall mean all present or future federal, state and municipal laws, ordinances, rules and regulations applicable to the environmental and ecological condition of the Leased Premises, and the rules and regulations of the Federal Environmental Protection Agency and any other federal, state or municipal agency or governmental board or entity having jurisdiction over the Leased Premises.

(b) "Hazardous Substances" shall mean those substances included within the definitions of "hazardous substances," "hazardous materials," "toxic substances" "solid waste" or "infectious waste" under Environmental Laws and petroleum products.

Section 14.02. Restrictions on Tenant. Tenant shall not cause or permit the use, generation, release, manufacture, refining, production, processing, storage or disposal of any Hazardous Substances on, under or about the Leased Premises, or the transportation to or from the Leased Premises of any Hazardous Substances, except as necessary and appropriate for its Permitted Use in which case the use, storage or disposal of such Hazardous Substances shall be performed in compliance with the Environmental Laws and the highest standards prevailing in the industry.

Section 14.03. Notices, Affidavits, Etc. Tenant shall immediately (a) notify Landlord of (i) any violation by Tenant, its employees, agents, representatives, customers, invitees or contractors of any Environmental Laws on, under or about the Leased Premises, or (ii) the presence or suspected presence of any Hazardous Substances on, under or about the Leased Premises, and (b) deliver to Landlord any notice received by Tenant relating to (a)(i) and (a)(ii) above from any source. Tenant shall execute affidavits, representations and the like within five (5) days of Landlord's request therefor concerning Tenant's best knowledge and belief regarding the presence of any Hazardous Substances on, under or about the Leased Premises.

Section 14.04. Tenant's Indemnification. Tenant shall indemnify Landlord and Landlord's managing agent from any and all claims, losses, liabilities, costs, expenses and damages, including attorneys' fees, costs of testing and remediation costs, incurred by Landlord in connection with any breach by Tenant of its obligations under this Article 14. The covenants and obligations under this Article 14 shall survive the expiration or earlier termination of this Lease.

ARTICLE 15 – MISCELLANEOUS

Section 15.01. Benefit of Landlord and Tenant. This Lease shall inure to the benefit of and be binding upon Landlord and Tenant and their respective successors and assigns.

Section 15.02. Governing Law. This Lease shall be governed in accordance with the laws of the State of Illinois.

Section 15.03. Force Majeure. Landlord and Tenant (except with respect to the payment of any monetary obligation) shall be excused for the period of any delay in the performance of any obligation hereunder when such delay is occasioned by causes beyond its control, including but not limited to work stoppages, boycotts, slowdowns or strikes; shortages of materials, equipment, labor or energy; unusual weather conditions; or acts or omissions of governmental or political bodies.

Section 15.04. Examination of Lease. Submission of this instrument by Landlord to Tenant for examination or signature does not constitute an offer by Landlord to lease the Leased Premises. This Lease shall become effective, if at all, only upon the execution by and delivery to both Landlord and Tenant. Execution and delivery of this Lease by Tenant to Landlord constitutes an offer to lease the Leased Premises on the terms contained herein.

Section 15.05. Indemnification for Leasing Commissions. The parties hereby represent and warrant that no real estate brokers were involved in the negotiation and execution of this Lease and that no other party is entitled, as a result of the actions of the respective party, to a commission or other fee resulting from the execution of this Lease. Each party shall indemnify the other from any and all liability for the breach of this representation and warranty on its part and shall pay any compensation to any other broker or person who may be entitled thereto.

Section 15.06. Notices. All notices and demands which may or are required or permitted to be given by either party to the other under this Lease or by law shall be deemed to have been given if it is in writing, and delivered in person (by hand delivery or messenger) or by overnight courier or mailed by or sent by either United States certified mail, return receipt requested, postage prepaid or by Federal Express or other nationally recognized overnight delivery service, to the party who is to receive such notice at the address specified in Section 1.01. Such notices under this section shall be effective on: (i) the date of delivery or refusal of delivery if delivered in person; (ii) the third (3rd) business day after deposit in the United States mail and signed for upon receipt if certified mail, return receipt requested, postage prepaid; and (iii) the first (1st) business day after proper and timely deposit for next business day delivery, charges prepaid, with a nationally recognized service providing next business day service. Either party may change its respective notice address by giving written notice thereof to the other party.

Section 15.07. Partial Invalidity; Complete Agreement. If any provision of this Lease shall be held to be invalid, void or unenforceable, the remaining provisions shall remain in full force and effect. This Lease represents the entire agreement between Landlord and Tenant covering everything agreed upon or understood in this transaction. There are no oral promises, conditions, representations, understandings, interpretations or terms of any kind as conditions or inducements to the execution hereof or in effect between the parties. No change or addition shall be made to this Lease except by a written agreement executed by Landlord and Tenant.

Section 15.08. Representations and Warranties.

(a) Tenant hereby represents and warrants for itself that (i) it is duly organized, validly existing and in good standing (if applicable) in accordance with the laws of the State under which it was organized; (ii) it is authorized to do business in the State where the Leased Premises is located; and (iii) the individual(s) executing and delivering this Lease on behalf of it has been properly authorized to do so, and such execution and delivery shall bind it to its terms.

(b) Landlord hereby represents and warrants that (i) Landlord is duly organized, validly existing and in good standing (if applicable) in accordance with the laws of the State under which it was organized; (ii) Landlord is authorized to do business in the State where the Leased Premises is located; and (iii) the individual(s) executing and delivering this Lease on behalf of Landlord has been properly authorized to do so, and such execution and delivery shall bind Landlord to its terms.

Section 15.10. Consent. Where the consent of a party is required, such consent will not be unreasonably withheld.

Section 15.11. Time. Time is of the essence of each term and provision of this Lease.

Section 15.12. Patriot Act. Each of Landlord and Tenant, each as to itself, hereby represents its compliance and its agreement to continue to comply with all applicable anti-money laundering laws, including, without limitation, the USA Patriot Act, and the laws administered by the United States Treasury Department's Office of Foreign Assets Control, including, without limitation, Executive Order 13224 ("Executive Order"). Each of Landlord and Tenant further represents (such representation to be true throughout the Lease Term) (i) that it is not, and it is not owned or controlled directly or indirectly by any person or entity, on the SDN List published by the United States Treasury Department's Office of Foreign Assets Control and (ii) that it is not a person otherwise identified by government or legal authority as a person with whom a U.S. Person is prohibited from transacting business. As of the date hereof, a list of such designations and the text of the Executive Order are published under the internet website address www.ustreas.gov/offices/enforcement/ofac.

[SIGNATURE PAGE FOLLOWS]

IN WITNESS WHEREOF, the parties hereto have executed this Lease as of the day and year first above written.

LANDLORD:

RES INVESTMENTS LLC

By: _____
Name: David Shifrin
Its: Manager

TENANT:

CHICAGO COSMETIC SURGERY INSTITUTE LLC

By: _____
Name: David Shifrin
Its: Manager

EXHIBIT A

LEGAL DESCRIPTION

TOTAL PAYMENT DUE

$0.00

By 05/01/2020

2019 First Installment Property Tax Bill - Cook County Electronic Bill

#20-020

Property Index Number (PIN)	Volume	Code	Tax Year	(Payable In)	Township	Classification
17-27-110-011-0000	513	76041	2019	(2020)	SOUTH CHICAGO	2-12

IF PAYING LATE, PLEASE PAY	05/02/2020 - 06/01/2020	06/02/2020 - 07/01/2020	07/02/2020 - 08/01/2020	LATE INTEREST IS 1.5% PER MONTH, BY STATE LAW
	$0.00	$0.00	$0.00	

TAXING DISTRICT DEBT AND FINANCIAL DATA

Your Taxing Districts	Money Owed by Your Taxing Districts	Pension and Healthcare Amounts Promised by Your Taxing Districts	Amount of Pension and Healthcare Shortage	% of Pension and Healthcare Costs Taxing Districts Can Pay
Metro Water Reclamation Dist of Chicago	$3,460,595,000	$2,795,614,000	$1,098,822,000	60.70%
Chicago Park District	$1,247,590,000	$1,665,945,000	$1,258,296,000	23.87%
Board of Education Chicago	$13,038,234,000	$25,446,481,999	$12,382,417,072	51.34%
Chicago Community College Dist	$514,035,889	$98,287,002	$98,287,002	0.00%
City of Chicago	$43,683,916,000	$39,752,268,000	$30,802,435,000	22.51%
Cook County Forest Preserve District	$193,646,842	$457,040,680	$246,669,734	46.03%
County of Cook	$7,490,403,508	$25,089,044,035	$14,681,160,592	41.46%
Total	$69,628,421,239	$95,304,680,716	$60,577,887,400	

For a more in-depth look at government finances and how they affect your taxes, visit *cookcountytreasurer.com*

PAY YOUR TAXES ONLINE
Pay at cookcountytreasurer.com from your bank account or credit card.

TAX CALCULATOR

2018 TOTAL TAX		23,684.71
2019 ESTIMATE	X	55%
2019 1st INSTALLMENT	=	13,026.59

The First Installment amount is 55% of last year's total taxes. All exemptions, such as homeowner and senior exemptions, will be reflected on your Second Installment tax bill.

IMPORTANT MESSAGES

PROPERTY LOCATION

2335 S MICHIGAN AVE
CHICAGO IL 60616

MAILING ADDRESS

RES INV LLC
1928 N WOOD ST
CHICAGO IL 606221130

****** Please see 2019 First Installment Payment Coupon next page ******

Attachment - 2B

Section I, Identification, General Information, and Certification

Operating Identity/Licensee

The Illinois Certificate of Good Standing for Chicago Cosmetic Surgery Institute LLC d/b/a South Loop Surgery Center is attached at Attachment – 3.

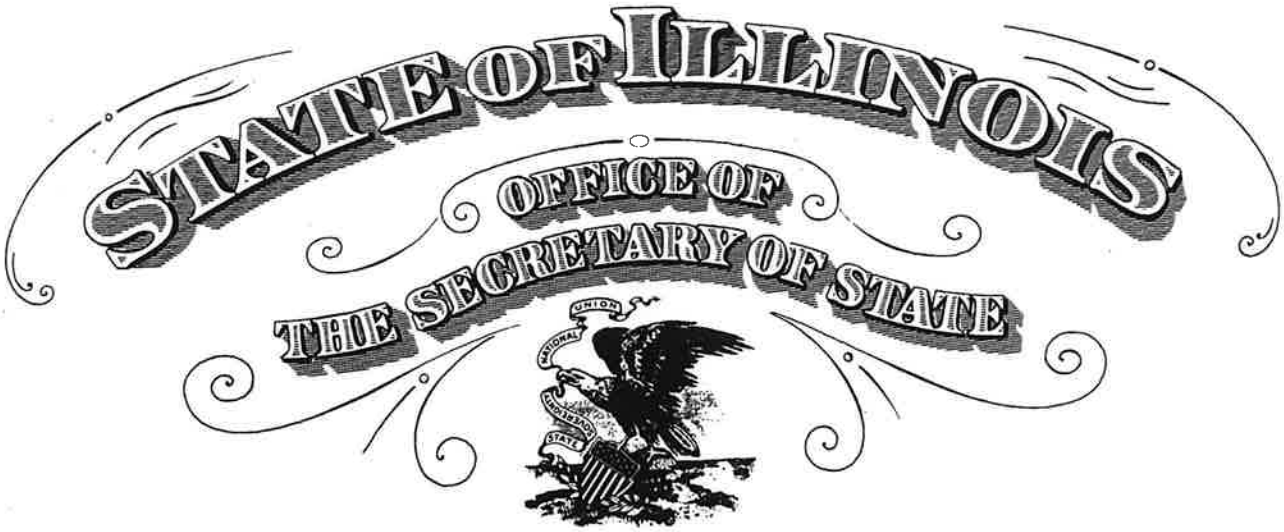
The person owning a 5% or greater interest in Chicago Cosmetic Surgery Institute LLC is listed in the table below:

Name	Address	City	State	Ownership Interest
David A Shifrin, M.D.	2335 South Michigan Ave	Chicago	IL	100%

Attachment – 3

#20-020

File Number 0633644-2



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

CHICAGO COSMETIC SURGERY INSTITUTE LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 22, 2017, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 14TH *day of* APRIL *A.D.* 2020 .

Authentication #: 2010503606 verifiable until 04/14/2021
Authenticate at: http://www.cyberdriveillinois.com

Jesse White
SECRETARY OF STATE

Attachment - 3

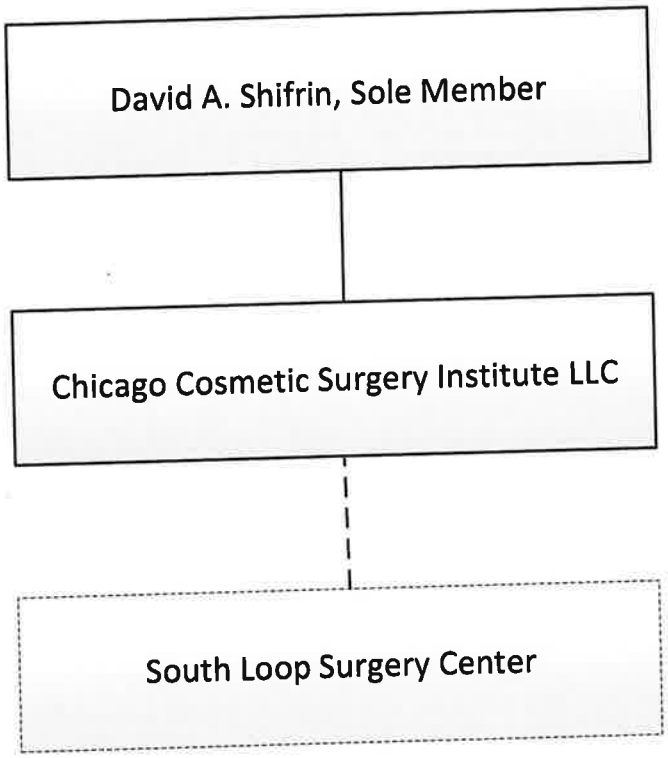
Section I, Identification, General Information, and Certification

Organizational Relationships

The organizational chart for Chicago Cosmetic Surgery Institute LLC is attached at Attachment – 4.

Attachment – 4

ORGANIZATIONAL STRUCTURE



ATTACHMENT - 4

Section I, Identification, General Information, and Certification

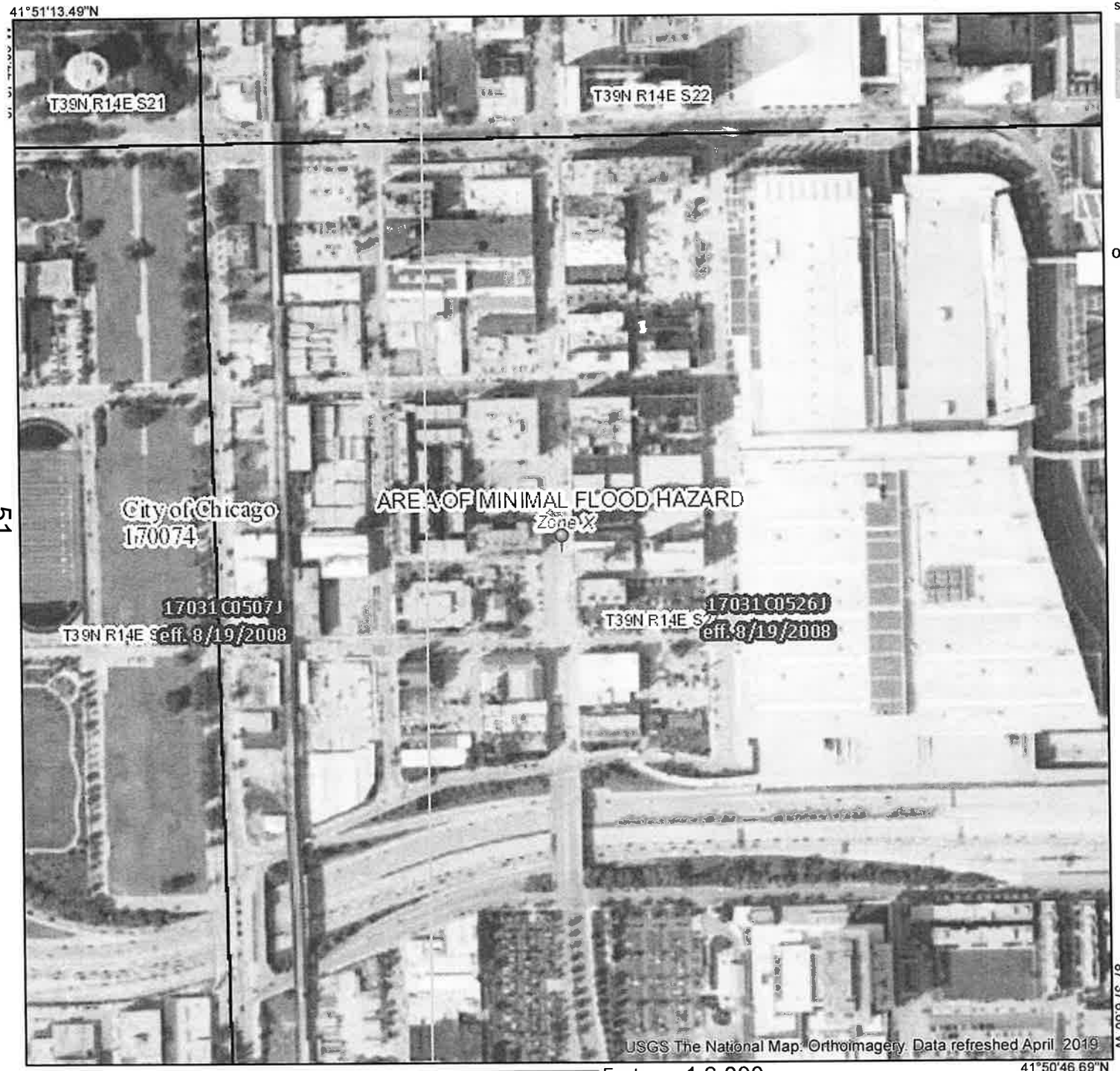
Flood Plain Requirements

The proposed project is for the conversion of the third floor of an existing medical office building to an ASTC, located at 2335 South Michigan Avenue, Chicago, Illinois 60616. As shown on the FEMA MAP 17031C0526J, attached at Attachment – 5, the site of the proposed ASTC is located in an area of minimal flood hazard.

Attachment – 5

National Flood Hazard Layer FIRMette

FEMA



0 250 500 1,000 1,500 2,000 Feet 1:6,000

Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

SPECIAL FLOOD HAZARD AREAS
- Without Base Flood Elevation (BFE) *Zone A, V, A99*
- With BFE or Depth *Zone AE, AO, AH, VE, AR*
- Regulatory Floodway

OTHER AREAS OF FLOOD HAZARD
- 0.2% Annual Chance Flood Hazard, A of 1% annual chance flood with avera depth less than one foot or with drain areas of less than one square mile *Zo*
- Future Conditions 1% Annual Chance Flood Hazard *Zone X*
- Area with Reduced Flood Risk due to Levee. See Notes. *Zone X*
- Area with Flood Risk due to Levee *Zon*

OTHER AREAS
- NO SCREEN Area of Minimal Flood Hazard *Zone X*
- Effective LOMRs
- Area of Undetermined Flood Hazard

GENERAL STRUCTURES
- Channel, Culvert, or Storm Sewer
- Levee, Dike, or Floodwall

OTHER FEATURES
- 20.2 Cross Sections with 1% Annual Chan
- 17.5 Water Surface Elevation
- Coastal Transect
- 513 Base Flood Elevation Line (BFE)
- Limit of Study
- Jurisdiction Boundary
- Coastal Transect Baseline
- Profile Baseline
- Hydrographic Feature

MAP PANELS
- Digital Data Available
- No Digital Data Available
- Unmapped

N

The pin displayed on the map is an approxi point selected by the user and does not rep an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 4/15/2020 at 1:50:30 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following ma elements do not appear: basemap imagery, flood zone labels legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images fo unmapped and unmodernized areas cannot be used for regulatory purposes.

#2020

Section I, Identification, General Information, and Certification

Historic Resources Preservation Act Requirements

The applicants submitted a request for determination that the proposed location is compliant with the Historic Resources Preservation Act from the Illinois Historic Preservation Agency. A copy of the letter is attached at Attachment – 6.

Attachment – 6

#20-020

ORIGIN ID:CHIA (312) 819-1900
LYNETTE KELECICH
POLSINELLI PC
150 N. RIVERSIDE PLAZA
SUITE 3000
CHICAGO, IL 60606
UNITED STATES US

SHIP DATE: 16APR20
ACTWGT: 1.00 LB
CAD: 250161844/WSXI3400

BILL SENDER

TO ROBERT APPLEMAN
ILLINOIS DEPT OF NATIONAL RESOURCES
1 NATURAL RESOURCES WAY

SPRINGFIELD IL 62702
(312) 819-1900
REF: 107849.655790.3354
INV:
PO:
DEPT:

56BJ4/7B3A/FE4A

FedEx Express

J201020011301uv

REL# 3785346

FRI - 17 APR 10:30A
PRIORITY OVERNIGHT

TRK# 0201 3919 5473 6100

XX SPIA

62702
IL-US STL

FOLD on this line and place in shipping pouch with bar code and delivery address visible

1. Fold the first printed page in half and use as the shipping label.
2. Place the label in a waybill pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.
3. Keep the second page as a receipt for your records. The receipt contains the terms and conditions of shipping and information useful for tracking your package.

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ATTACHMENT - 6

POLSINELLI

150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606 • (312) 819-1900

April 16, 2020

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Federal Express

Robert F. Appleman
Deputy State Historic Preservation. Officer
Illinois Department of National Resources
Illinois State Historic Preservation
One Natural Resources Way
Springfield, IL 62702

Re: Historic Preservation Act Determination
Chicago Cosmetic Surgery Institute LLC and RES Investments LLC

Dear Mr. Appleman:

This office represents Chicago Cosmetic Surgery Institute LLC and RES Investments LLC (the "Requestors"). Pursuant to Section 4 of the Illinois State Agency Historic Resources Preservation Act, Requestors seek a formal determination from the Illinois Historic Preservation Agency as to whether Requestors' proposed project to convert the third floor of an existing medical office to an ambulatory surgical treatment center located at 2335 South Michigan Avenue, Chicago, IL 60616 ("Proposed Project") affects historic resources.

1. Project Description and Address

The Requestors are seeking a certificate of need from the Illinois Health Facilities and Services Review Board to convert the third floor of an existing medical office to an ambulatory surgical treatment center. This project will involve the internal modernization of an existing building. No demolition or physical alteration of the exterior of the existing building will occur as a result of the Proposed Project.

2. Topographical or Metropolitan Map

A metropolitan map showing the location of the Proposed Project is attached at Attachment 1.

3. Historic Architectural Resources Geographic Information System

A map from the Historic Architectural Resources Geographic Information System is attached at Attachment 2. The property is not listed on the (i) National Register, (ii) within a local historic district, or (iii) within a local landmark.

4. Photographs of Standing Buildings/Structure

Photographs of the site of the proposed facility is attached at Attachment 3.

5. Addresses for Buildings/Structures

The Proposed Project is located at 2335 South Michigan Ave, Floor Three, Chicago, IL 60616.

Thank you for your time and consideration of our request for Historic Preservation Determination. If you have any questions or need any additional information, please feel free to contact me at 312-873-3606 or acooper@polsinelli.com

Sincerely,

Anne M. Cooper

Anne M. Cooper

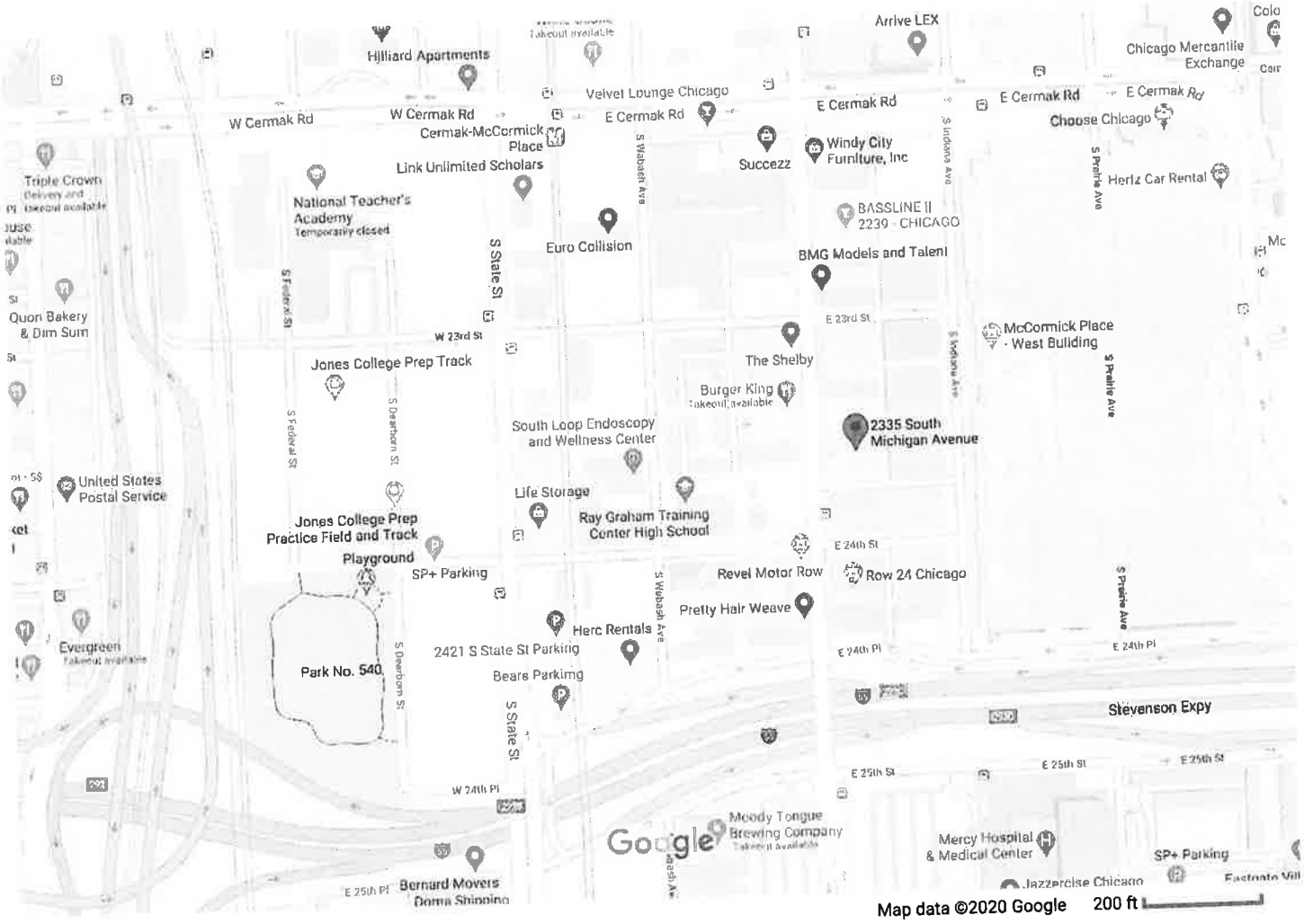
Attachments

73119844.1

ATTACHMENT 1

#20-020

2335 S Michigan Ave

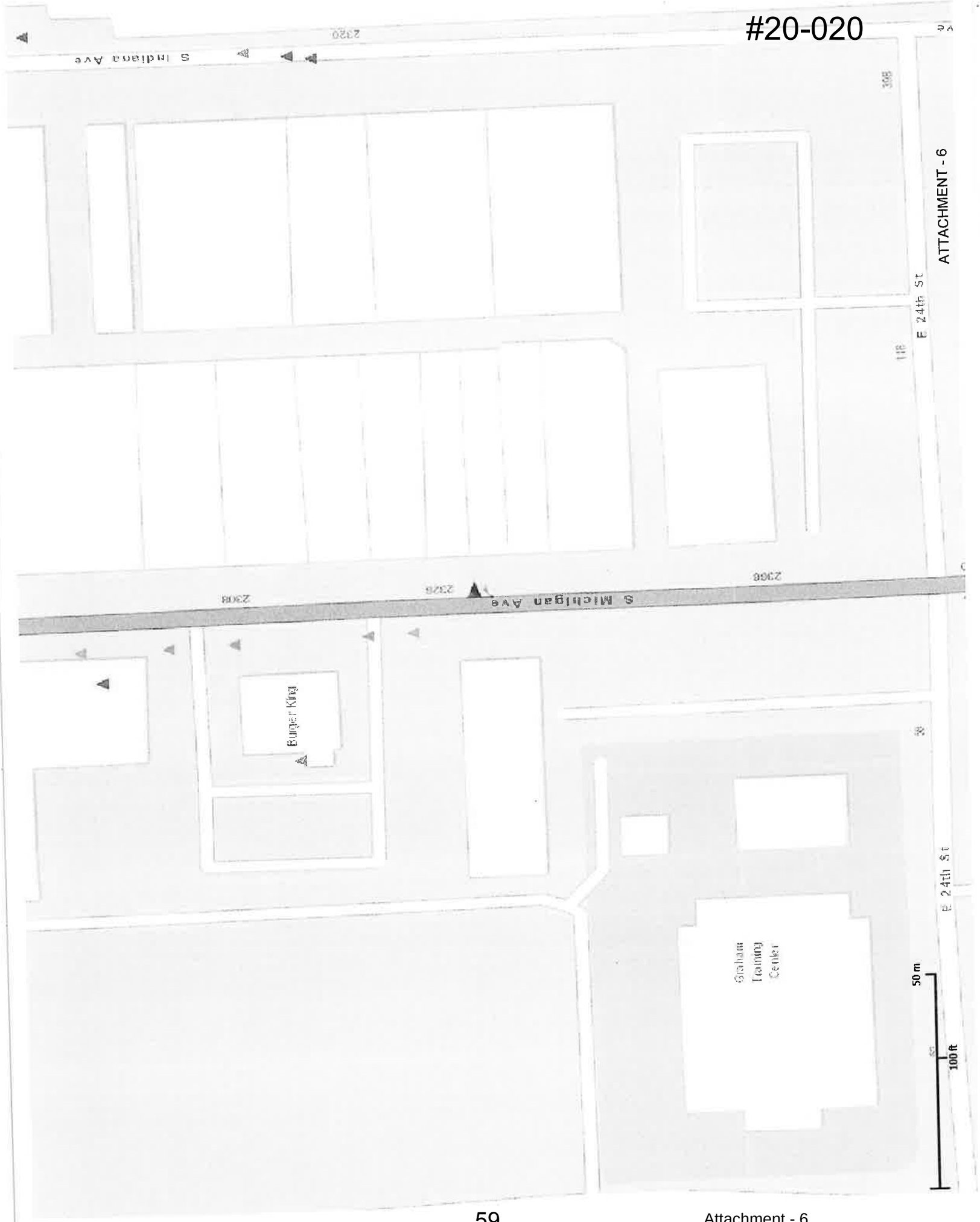


ATTACHMENT - 6

ATTACHMENT 2

#20-020

ATTACHMENT - 6



ATTACHMENT 3

#20-020

2333 S Michigan Ave

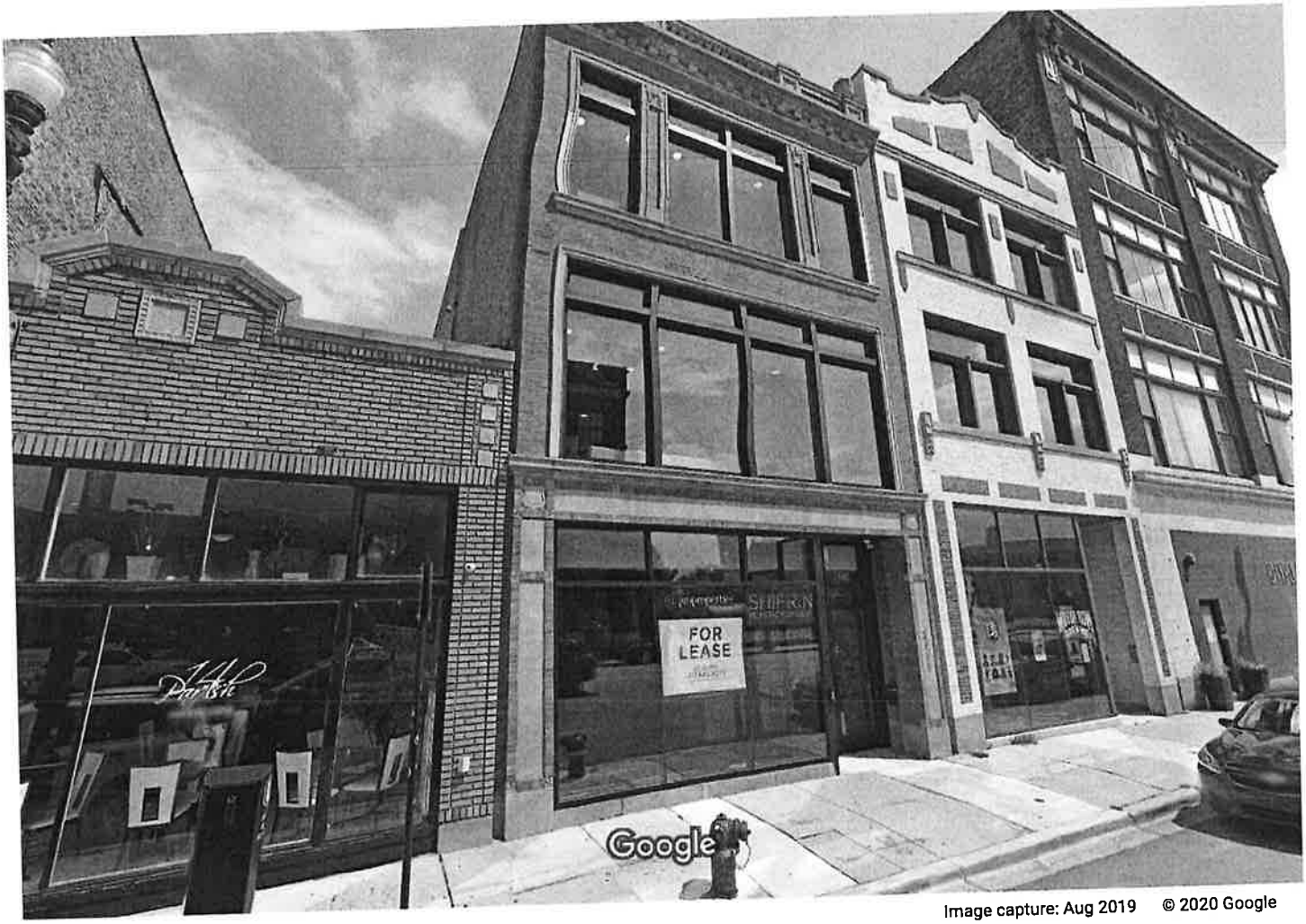
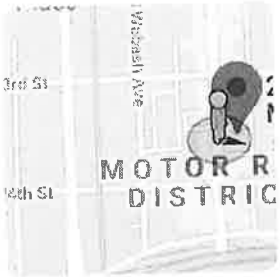


Image capture: Aug 2019 © 2020 Google

Chicago, Illinois

Google

Street View



ATTACHMENT - 6

#20-020

Google Maps 2333 S Michigan Ave

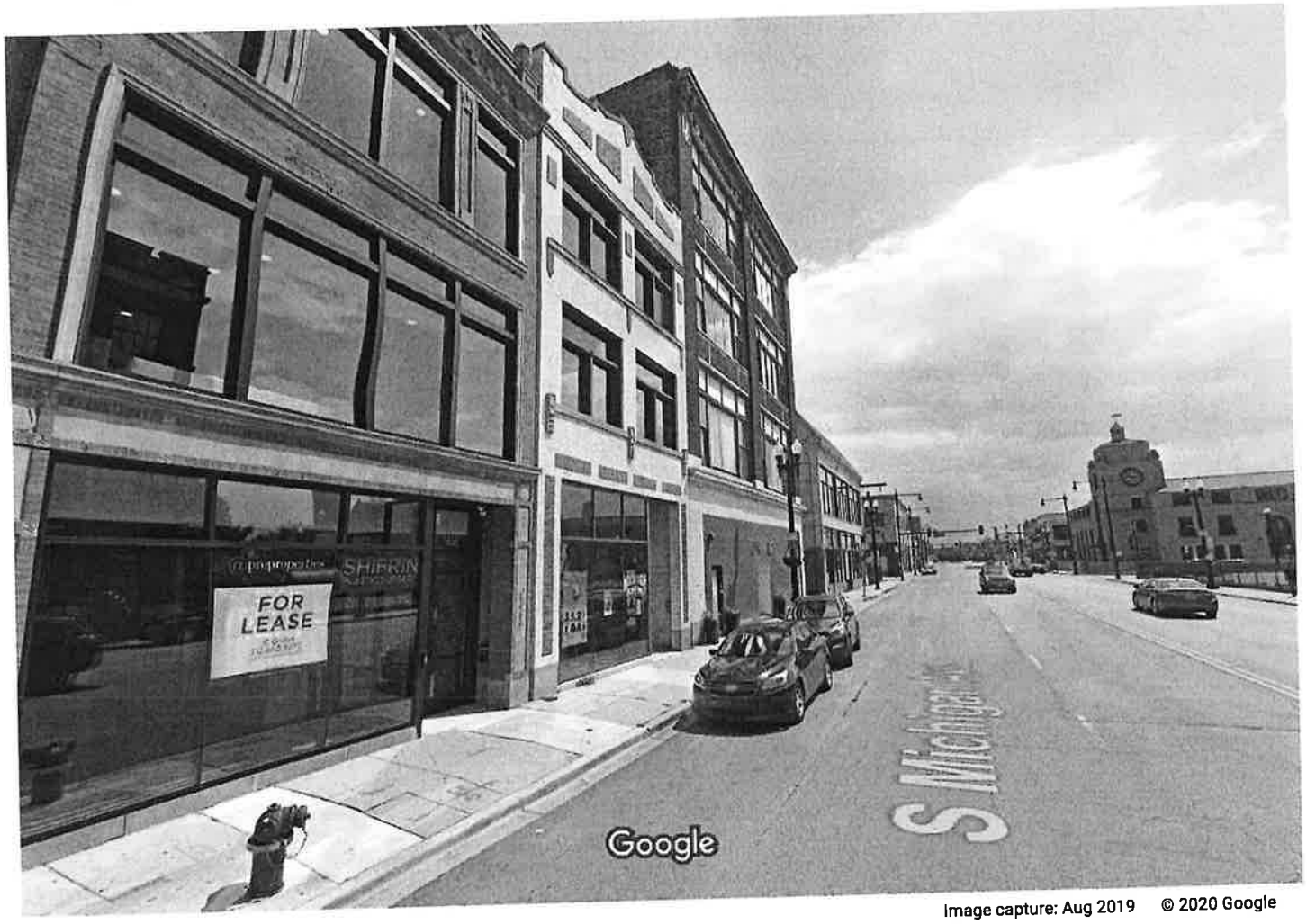
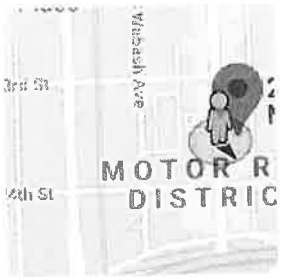


Image capture: Aug 2019 © 2020 Google

Chicago, Illinois

Google

Street View



ATTACHMENT - 6

Section I, Identification, General Information, and Certification
Project Costs and Sources of Funds

Table 1120.110			
Project Cost	**Clinical**	**Non-Clinical**	**Total**
Fair Market Value of Leased Space	$985,536		$985,536
Consulting and Other Fees	$100,000		$100,000
Total Project Costs	**$1,085,536**		**$1,085,536**

Attachment –7

73079641.3

Section I, Identification, General Information, and Certification

Cost Space Requirements

Cost Space Table							
		Gross Square Feet		Amount of Proposed Total Gross Square Feet That Is:			
Dept. / Area	Cost	Existing	Proposed	New Const.	Modernized	As Is	Vacated Space
CLINICAL							
ASTC	$1,085,536	4,000				4,000	
Total Clinical	$1,085,536	4,000				4,000	
NON CLINICAL							
Total Non-clinical							
TOTAL	**$1,085,536**	**4,000**				**4,000**	

Attachment –9

73079641.3

Section III, Project Purpose, Background and Alternatives – Information Requirements
Criterion 1110.110 (a), Project Purpose, Background and Alternatives

Background of the Applicant

1. The Applicants do not currently own or operate any health care facilities in Illinois.

2. A letter from David A. Shifrin, M.D., Manager, Chicago Cosmetic Surgery Institute, LLC d/b/a South Loop Surgery Center and RES Investments, LLC certifying no adverse action has been taken against any facility owned and/or operated by the Applicants during the three years prior to filing this application is attached at Attachment – 11.

3. An authorization permitting the State Board and the Illinois Department of Public Health ("IDPH") access to any documents necessary to verify information submitted, including, but not limited to: official records of IDPH or other State agencies; and the records of nationally recognized accreditation organizations is attached at Attachment – 11.

4. The Applicant has not previously submitted an application for permit during this calendar year. Accordingly, this criterion is not applicable.

April 13, 2020

Debra Savage
Chair
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Chair Savage:

I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109 that no adverse action as defined in 77 Ill. Admin. Code § 1130.140 has been taken against any health care facility owned or operated by The Chicago Cosmetic Surgery Institute LLC or RES Investments LLC in the State of Illinois during the three year period prior to filing this application.

Additionally, pursuant to 77 Ill. Admin. Code § 1110.110(a)(2)(J), I hereby authorize the Health Facilities and Services Review Board ("HFSRB") and the Illinois Department of Public Health ("IDPH") access to any documents necessary to verify information submitted as part of this application for permit. I further authorize HFSRB and IDPH to obtain any additional information or documents from other government agencies which HFSRB or IDPH deem pertinent to process this application for permit.

Sincerely,

David A. Shifrin, M.D.
Manager
The Chicago Cosmetic Surgery Institute LLC
d/b/a South Loop Surgery Center
RES Investments LLC

Subscribed and sworn to me
This ___ day of _____, 2020

_____
Notary Public

Section III, Project Purpose, Background and Alternatives – Information Requirements
Criterion 1110.110(b), Project Purpose, Background and Alternatives

Purpose of the Project

1. The purpose of this project is to ensure patients residing in Bronzeville and communities on the South Side of Chicago maintain access to surgical services. On January 23, 2020, Mercy Hospital & Medical Center along with Advocate Trinity Hospital, South Shore Hospital and St. Bernard Hospital announced plans to create a new health care delivery system to expand access to primary and preventative care services on the South Side of Chicago. The new health care system will address these needs by constructing community health centers and "building at least one new, state-of-the-art, destination hospital, thereby replacing outmoded, aging facilities." See Attachment - 12A. As set forth in Lawrence Iteld, M.D.'s support letter the potential closing of Mercy Hospital and Medical Center will create significant need for qualified operating rooms in the local area. South Loop Surgery Center is well situated to address that need. See Attachment – 12B.

   Importantly, the South Loop Surgery Center geographic service area ("GSA") is an economically disadvantaged community with significant populations of two ethnic groups: African-American (30%) and Hispanic (33%). Due to a large immigrant population, cultural barriers to access health care are high, and the potential closure of Mercy Hospital and Medical Center will only exacerbate those barriers. Further, the South Loop Surgery Center GSA is an area with many low-income residents. Twenty percent of the population lives below the Federal Poverty Level (compared to 12% Statewide). Due to barriers faced by members of this community, the Health Resources & Services Administration ("HRSA") has designated this area a primary care Health Professional Shortage Area, a Medically Underserved Area, and a Medically Underserved Population. See Attachment – 12C. Further, as noted in the support letter from 21st Ward Alderman Howard B. Brookings, Jr., the potential closure of Mercy Hospital & Medical Center will affect residents on the South Side of Chicago, as "[t]here is no other facility in the is immediately available to these neighborhoods . . . the need for a facility or facilities that offer accredited operating rooms is essential in maintaining appropriate surgical healthcare access." See Attachment -12D.

   Currently, there are 29 acute care hospitals and 13 ambulatory surgical treatment centers within South Loop Surgery Center's GSA. Utilizing hospitals for procedures that can be safely performed in an outpatient surgery center is not an efficient use of scarce health care resources. A 2013 article in the New York Times noted the escalation in health care costs is largely attributed to high prices charged by hospitals.[1] This article highlighted that hospitals are the most powerful players in a health care system that has little or no price regulation in the private market. Prices set by hospitals are discretionary and not connected to underlying costs or market prices. Further, according to the March 2020 MedPac Report to Congress, Medicare payment rates for most ambulatory surgical procedures performed in

[1] Elisabeth Rosenthal, *As Hospital Prices Soar, a Stitch Tops $500*, N.Y. TIMES, Dec. 2, 2013

hospital outpatient departments (HOPDs) are much higher than in surgery centers. For 2020, Medicare rates are 98% higher in HOPDs than surgery centers.[2]

While there are 13 licensed ambulatory surgical treatment centers within South Loop Surgery Center's GSA, the only surgery center that provides the same surgical services as proposed at South Loop Surgery Center does not serve Medicaid patients or provide charity care.[3] Accordingly, it is not an option for low-income patients residing in Bronzeville and other communities on the South Side of Chicago.

The proposed South Loop Surgery Center will ensure continued access to needed surgical services to the most vulnerable patients on the South Side of Chicago.

2. South Loop Surgery Center will serve patients residing in Bronzeville and other communities on the South Side of Chicago. A map of the market area of South Loop Surgery Center is attached at Attachment – 12E. Travel times from SLSC to the geographic service area ("GSA") borders are as follows:

   - East: Approximate 10 mile radius to Lake Michigan
   - Southeast: Approximate 10 mile radius to Lake Michigan
   - South: Approximate 10 mile radius to Evergreen Park
   - Southwest: Approximate 10 mile radius time to Bridgeview
   - West: Approximate 10 mile radius to North Riverside
   - Northwest: Approximate 10 mile radius to Hardwood Heights
   - North: Approximate 10 mile radius to Lake Michigan
   - Northeast: Approximate 10 mile radius to Lake Michigan

3. This project will ensure patients residing in Bronzeville and communities on the South Side of Chicago maintain access to surgical services. The potential closing of Mercy Hospital and Medical Center will create significant need for qualified operating rooms in the local area. While there are 28 acute care hospitals and 14 ambulatory surgical treatment centers within South Loop Surgery Center's GSA, there are no viable options to the economically disadvantaged residents in Bronzeville and other communities on the South Side of Chicago. Utilizing hospitals for procedures that can be safely performed in an outpatient surgery center is not an efficient use of scarce health care resources. A 2013 article in the New York Times noted the escalation in health care costs is largely attributed to high prices charged by hospitals.[4] This article highlighted that hospitals are the most powerful players in a health care system that has little or no price regulation in the private market. Prices set by hospitals are discretionary and not connected to underlying costs or market prices. Further,

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[2] Medicare Payment Advisory Commission, Report to the Congress: Medicare Payment Policy 147 (Mar. 13, 2020) *available at* http://www.medpac.gov/docs/default-source/reports/mar20_medpac_ch5_ sec.pdf?sfvrsn=0 (last visited April 27, 2020)

[3] Illinois Health Facilities and Services Review Board, Ambulatory Surgical Treatment Center Profile – 2018 111 (Sep. 2019) *available at* _https://www2.illinois.gov/sites/hfsrb/InventoriesData/FacilityProfiles/Documents/2018%20ASTC%20Facility%20Profiles%202-7-2020.pdf (last visited Apr. 29, 2020).

[4] Elisabeth Rosenthal, *As Hospital Prices Soar, a Stitch Tops $500*, N.Y. TIMES, Dec. 2, 2013

according to the March 2020 MedPac Report to Congress, Medicare payment rates for most ambulatory surgical procedures performed in hospital outpatient departments (HOPDs) are much higher than in surgery centers. For 2020, Medicare rates are 98% higher in HOPDs than surgery centers.[5]

While there are 14 licensed ambulatory surgical treatment centers within South Loop Surgery Center's GSA, the only surgery center that provides the same surgical services as proposed at South Loop Surgery Center does not serve Medicaid patients or provide charity care.[6] Accordingly, it is not an option for low-income patients residing in Bronzeville and other communities on the South Side of Chicago.

South Loop Surgery Center will ensure continued access to needed surgical services to patients on the South Side of Chicago.

4. Sources

Medicare Payment Advisory Commission, Report to the Congress: Medicare Payment Policy 147 (Mar. 13, 2020) *available at* http://www.medpac.gov/docs/default-source/reports/mar20_medpac_ch5_ sec.pdf?sfvrsn=0 (last visited April 27, 2020).

Elisabeth Rosenthal, *As Hospital Prices Soar, a Stitch Tops $500*, N.Y. TIMES, Dec. 2, 2013

5. The goal of this project is to ensure residents in Bronzeville and other communities on the South Side of Chicago maintain access outpatient surgical services that are necessary for appropriate health care access.

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[5] Medicare Payment Advisory Commission, Report to the Congress: Medicare Payment Policy 147 (Mar. 13, 2020) *available at* http://www.medpac.gov/docs/default-source/reports/mar20_medpac_ch5_ sec.pdf?sfvrsn=0 (last visited April 27, 2020)

[6] Illinois Health Facilities and Services Review Board, Ambulatory Surgical Treatment Center Profile – 2018 111 (Sep. 2019) *available at* _https://www2.illinois.gov/sites/hfsrb/InventoriesData/FacilityProfiles/Documents/2018%20ASTC%20Facility%20Profiles%202-7-2020.pdf (last visited Apr. 29, 2020).

#20-020

News

Announcements

Title
Four South Chicago hospitals to pursue transformative solutions to address health equity on Chicago's South Side
Date
01/23/2020
Article
Group launches community input sessions to inform plan to modernize and transform care delivery in region

Chicago, IL – Four South Chicago hospitals – Advocate Trinity Hospital, Mercy Hospital & Medical Center (a member of Trinity Health), South Shore Hospital and St. Bernard Hospital – announced today that they have signed a nonbinding agreement to offer bold solutions that create a new health care delivery system. The system will expand access to preventive care and quality services, reduce drastic health inequities and provide economic development, jobs and training programs in the region.

The providers are calling on neighborhood leaders and area residents to participate in a series of community input sessions to help shape robust solutions tailored specifically to the local community's needs.

Despite state effort and local community investment, health inequities persist in this region. Significantly lower life expectancy, higher incidences of chronic disease and other disparities are aggravated by social determinants of health including food insecurity, housing and trauma. The four providers said addressing these inequities was a key driver for the need to develop a progressive, patient-centered approach and transformative model.

"Significant challenges require all stakeholders to be at the table and be part of the solution," said Carol Schneider, president, Mercy Hospital & Medical Center, a member of Trinity Health. "We have a unique opportunity to come together around a common vision to serve patients in a better way that strengthens our communities."

"Working individually, our hospitals will not be able to provide sustained, quality care on the South Side," said Charles Holland, president and chief executive officer of St. Bernard Hospital. "We have to aggressively address the need for better health care among tens of thousands of Chicagoans. By forging a system that can better respond to and manage the chronic illnesses that are so pervasive in our communities, we can truly achieve greater health equity and narrow significant disparities in access to quality care and the resulting outcomes."

The goal of the new system is to combine the four hospitals into an independent, integrated health care system that will transform care delivery for area residents through a multi-year investment plan. After analyzing community health needs assessments and service area and demographic data, the four providers arrived at two primary needs—expand access to quality primary and preventive care services by constructing vibrant community health centers, and build at least one new, state-of-the-art, destination hospital, thereby replacing outmoded, aging facilities. The estimated capital investment to achieve these goals is $1.1 billion.

Community input will help shape future hospital services, and the expansion of urgent care, ambulatory surgery, infusion therapy and behavioral health services at new community health centers, as well as specialty care, imaging and diagnostic services. Stakeholder outreach has already begun, and community input sessions will begin in February.

The group is committed to ensuring new facilities open before any existing facilities close, a net increase in jobs in the region, and re-deployment and re-training programs that are reflective of the growing health care jobs of the future. They will seek significant private philanthropic involvement to support the new system and help achieve health equity for these affected communities.

Attachment - 2A

"This is the right thing to do for those we serve," said Rashard Johnson, president of Advocate Trinity Hospital. "We have a moral obligation to address health equity and that requires a transformational approach to how, when and where we deliver care."

Under the agreement, each provider will contribute or transfer existing hospital assets to and help capitalize the new system. The new system will have independent leadership and an independent board of directors, which will include a delegate from each of the providers. A CEO and leadership team will be named following the signing of a definitive agreement, expected by midyear.

"We look forward to input from our patients and communities," said Tim Caveney, president and chief executive officer of South Shore Hospital. "Empowering our neighborhoods, improving access to care and making critical economic investments is what's right for the South Side of Chicago and what's necessary for our long-term health and wellness."

Advocate Trinity Hospital | MERCY A Member of Trinity Health | South Shore hospital | St. Bernard Hospital and Health Care Center

Media Contact:

Adam Mesirow
Adam.mesirow@advocatehealth.com (mailto:Adam.mesirow@advocatehealth.com)
708-280-4811

About Advocate Trinity Hospital

Advocate Trinity Hospital, a designated Primary Stroke Center, has provided high-quality, compassionate care to the residents of Chicago's Southeast Side for more than 120 years. Our board-certified physicians have expertise in more than 50 subspecialties, including advanced heart attack and stroke care, advanced levels of treatment in surgery, and a limb salvage program that serves as a model for other health care providers. Our Emergency Department team care model and triage delivery system minimize wait time and enhance care coordination, while our multi-disciplinary approach to in-patient care optimizes discharge planning and bedside engagement between providers, patients and family members.

#20-020

About Mercy Hospital & Medical Center

Mercy Hospital & Medical Center is a member of Trinity Health. As Chicago's first teaching hospital, Mercy has served Chicago for over 165 years, leading the way with innovative technology and healthcare delivery models. Mercy, which has over 500 primary care and specialist providers and 1,540 colleagues, is a provider of comprehensive healthcare services. Its network includes the 402-licensed-bed Mercy Hospital & Medical Center, 2525 S. Michigan Avenue, 7 ambulatory care facilities, MercyWorks occupational health program and two school-based health centers in Wendell Phillips and Paul Laurence Dunbar Career Academies. Learn more about Mercy, visit mercy-chicago.org (http://www.mercy-chicago.org).

About South Shore Hospital

South Shore Hospital is an independent hospital providing General Acute Care, Geriatric Psych and Drug Abuse Treatment and Rehab Services for the southeast side of Chicago for over 107 years. South Shore has over 100 primary care and specialist providers and 350 employees focused on providing the safest, highest quality healthcare experience possible, irrespective of one's ability to pay. Our not-for-profit community organization includes a 136 staffed bed hospital and 5 ambulatory care clinics. To learn more about South Shore Hospital visit southshorehospital.com (http://www.southshorehospital.com).

About St. Bernard Hospital

Opened in 1904, St. Bernard Hospital continues to be a beacon of quality healthcare in Chicago's Englewood community. Founded by sisters from the Religious Hospitallers of St. Joseph, St. Bernard is currently sponsored by Catholic Health International, which sponsors 40 facilities in the United States and Canada. St. Bernard has more than 800 employees and 150 physicians, and it provides extensive healthcare services to adults and children through a 196-bed hospital and its modern Ambulatory Care Center. The network offers a range of specialty services focused on wellness and prevention. To learn more, visit our website at www.stbh.org (http://www.stbh.org).

Back

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2525 S Michigan Ave, Chicago, IL 60616 • 312-567-2000

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A Member of Trinity Health (http://www.trinity-health.org/)

Iteld
plastic surgery

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage,

My name is Lawrence Iteld. I am writing this letter of support for the South Loop Surgery Center being submitted by Chicago Cosmetic Surgery Institute, LLC and David Shifrin, MD. I have known Dr. Shifrin for over 10 years as we are colleagues in Chicago in a small subspecialty of medicine. Dr. Shifrin is a sound surgeon who has built a well-respected practice over years of dedication to excellence in patient care. As a person, he is ethical, honest, transparent and caring. He is one of a few surgeons I would allow to operate on me or my family members.

I served as the chairman of plastic surgery at Mercy Hospital and Medical Center for the last 11 years or so. During that time, I have had the opportunity to care for the patients of Bronzeville, the South Loop, Chinatown and all the neighborhoods surrounding moving south. There is no other facility in the area that is immediately available to these neighborhoods. With the recent announcement of the planned closing of Mercy in the future and merger with three other struggling hospitals I believe that the need for qualified operating rooms in the local area is significant. While it is not of an emergent nature it is urgent and will become so if planning is not undertaken in advance. Dr Shifrin's facility is well situated to serve all of these areas and has my full support. I would be happy to answer any questions that may arise.

Thank You,

Lawrence Iteld MD
04/17/20

939 W North Avenue, Suite 600 · Chicago, IL 60642
phone 312.757.4505 fax 312.757.4605 · email info@Driteld.com · website www.driteld.com

#20-020

Health Resources & Services Administration (https://www.hrsa.gov)

Home (/) › Tools › Find Shortage Areas (/tools/shortage-area) › **Find Shortage Areas by Address**

Find Shortage Areas by Address

Enter an address to determine whether it is located in a shortage area: HPSA Geographic, HPSA Geographic High Needs, or Population Group HPSA or an MUA/P.

Note: This search will not identify facility HPSAs. To find these HPSAs, use the HPSA Find (/tools/shortage-area/hpsa-find) tool.

Start Over | Print

HPSA Data as of 04/29/2020
MUA Data as of 04/29/2020

Address
2335 south michigan avenue, chicago, IL, 60616

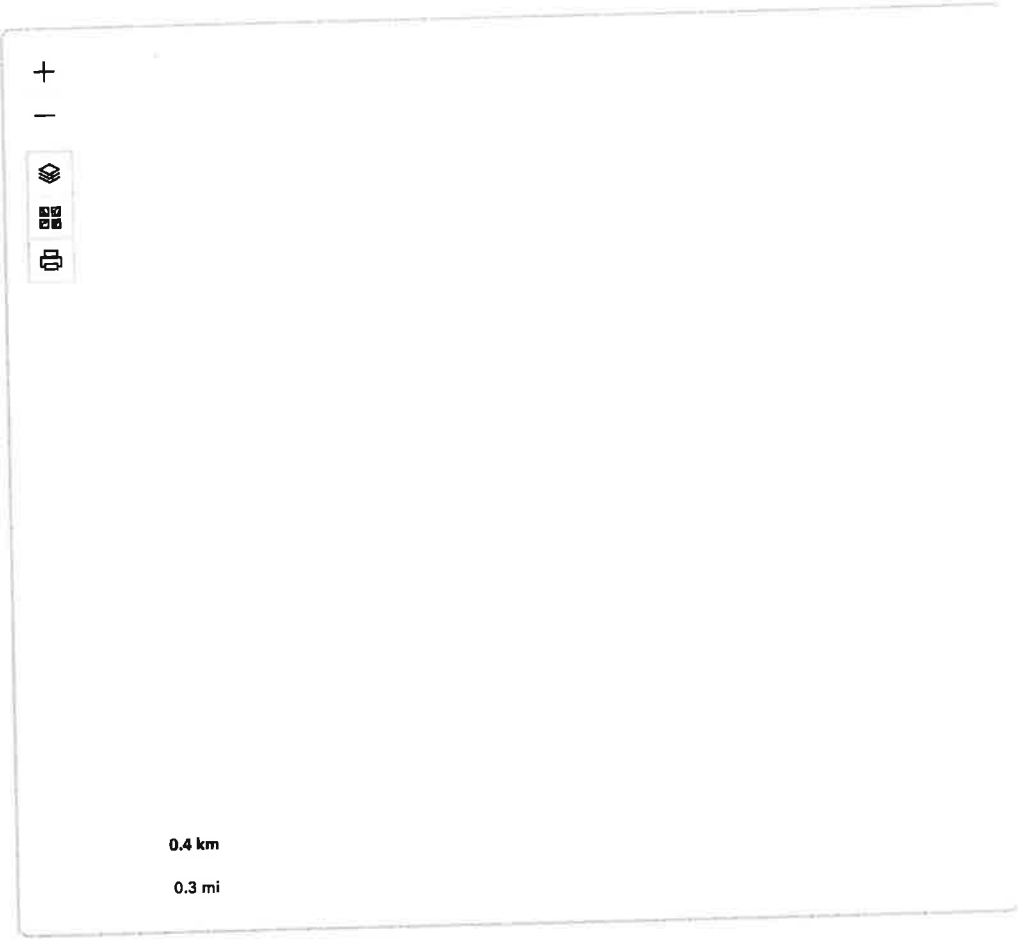
Standardized address
2335 S Michigan Ave, Chicago, Illinois, 60616

[+] More about this address

In a Dental Health HPSA: ✔ **Yes**
HPSA Name: LI- Near South (Chicago)
ID: 6173326270
Designation Type: HPSA Population
Status: Designated
Score: 17
Designation Date: 08/25/2000
Last Update Date: 12/31/2018

In a Mental Health HPSA: ✔ **Yes**
HPSA Name: Low income - Chicago Near South
ID: 7171659449
Designation Type: HPSA Population
Status: Designated
Score: 12
Designation Date: 05/17/2012
Last Update Date: 10/28/2017

In a Primary Care HPSA: ✔ **Yes**
HPSA Name: LI-Near South/Armour Sq/Douglas
ID: 1175171252
Designation Type: HPSA Population
Status: Designated
Score: 10
Designation Date: 03/30/2007
Last Update Date: 10/16/2017



#20-020

In a MUA/P: ✔ **Yes**
Service Area Name: Communities Asian-American Population
ID: 00801
Designation Type: Medically Underserved Population – Governor's Exception
Designation Date: 03/31/1988
Last Update Date: 03/31/1988
Service Area Name: Cook Service Area
ID: 00828
Designation Type: Medically Underserved Area
Designation Date: 08/13/1992
Last Update Date: 02/03/1994

Note: The address you entered is geocoded and then compared against the HPSA and MUA/P data in data.HRSA.gov. Due to geoprocessing limitations, the designation cannot be guaranteed to be 100% accurate and does not constitute an official determination.

About HRSA

HRSA programs provide health care to people who are geographically isolated, economically or medically vulnerable. This includes people living with HIV/AIDS, pregnant women, mothers and their families, and those otherwise unable to access high quality health care. HRSA also supports access to health care in rural areas, the training of health professionals, the distribution of providers to areas where they are needed most, and improvements in health care delivery. Learn more about HRSA » (https://www.hrsa.gov)

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What's New (https://data.hrsa.gov/whats-new)

HRSA Data Warehouse (https://data.hrsa.gov/)

(https://www.hhs.gov)

Howard B. Brookins, Jr.
ALDERMAN, 21st WARD
9011 South Ashland Ave Suite B
Telephone: (773) 881-9300
Fax: (773) 881-2152

CITY COUNCIL
CITY OF CHICAGO

CITY HALL – ROOM 305
121 NORTH LASALLE STREET
CHICAGO, ILLINOIS 60602
TELEPHONE: 312-744-7739
FAX: 312-744-7738

COMMITTEE MEMBERSHIPS
#20-020
TRANSPORTATION AND PUBLIC WAY
(CHAIRMAN)

Aviation

Budget & Government Operations

Economic, Capital & Technology Development

Finance

Pedestrian &Traffic Safety

Rules & Ethics

Special Events, Cultural Affairs & Recreation

Workforce Development & Audit

Zoning, Landmarks and Building Standards

April 22, 2020

Ms. Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage,

As Alderman of the 21st Ward, where my constituency resides on the south side of Chicago, I write this letter of support for South Loop Surgery Center being submitted by Chicago Cosmetic Surgery Institute LLC and David Shifrin MD. I have known Dr. Shifrin and his family for the past 5 years. His father is a businessman in my ward and has demonstrated a desire to help the less fortunate. Likewise, Dr. Shifrin's surgery practice is diverse and cares for a large population of African American and Hispanic patients. His office is located close to the 21st Ward which is also mostly populated by the same mix of people. We need surgeons in Chicago who are accessible to the near and far south side and loop.

Mercy hospital and medical center is the largest facility serving this geographic population and it is scheduled to be closed. There is no other facility in the area that is immediately available to these neighborhoods and constituents. With the recent announcement of the planned closing of Mercy, I believe that the need for a facility or facilities that offer accredited operating rooms is essential in maintaining appropriate surgical healthcare access.

Dr. Shifrin's facility is well situated to serve all of these areas and has my full support. I am confident that the South Loop Surgery Center will be a viable option for our community's needs. I would be happy to answer any questions that may arise.

If you have any questions or need additional information, please feel free to contact my office at (773) 881-9300.

Sincerely,

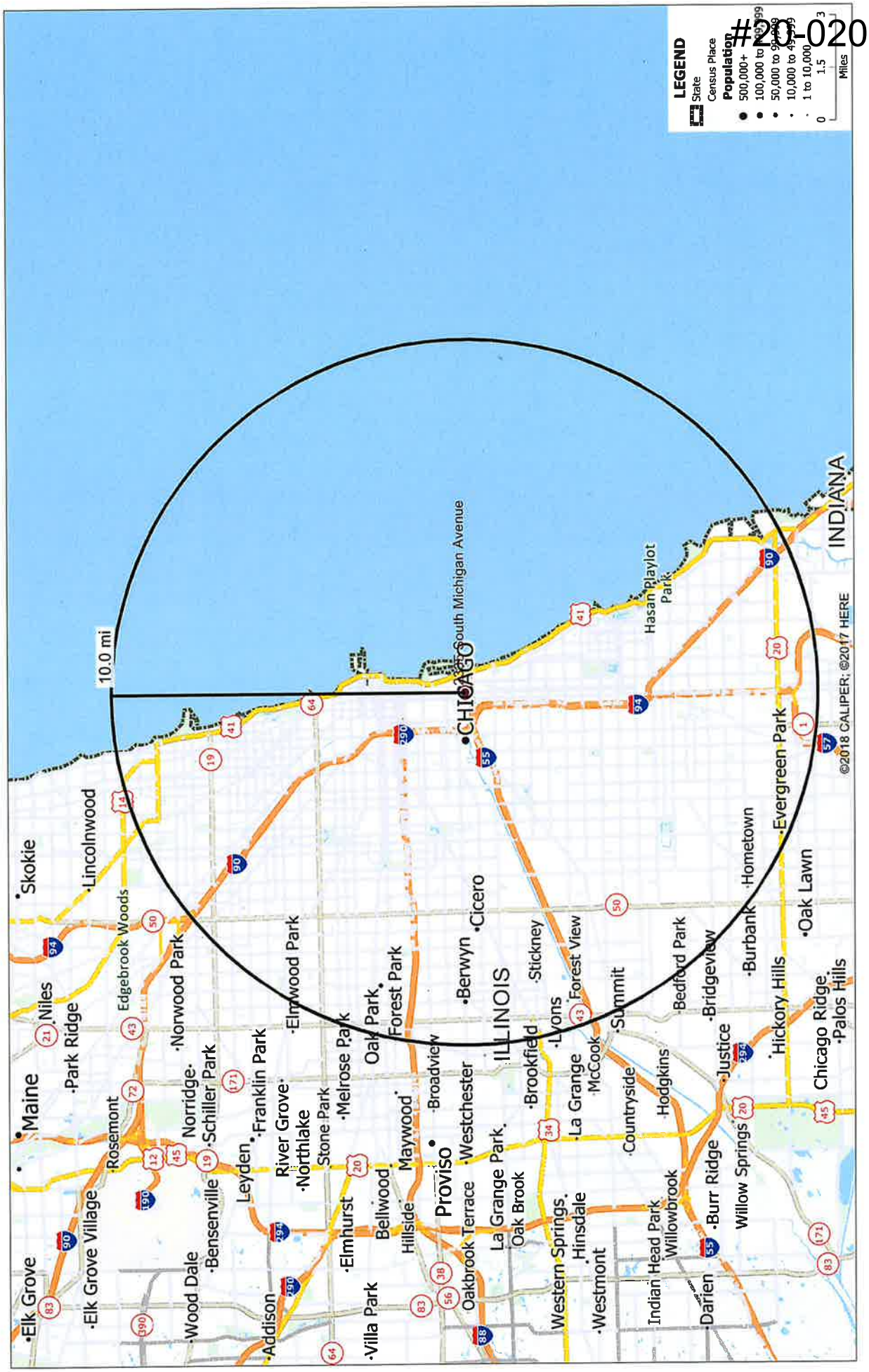
Howard B. Brookins, Jr.
Alderman – 21st Ward

cc: HBBJR: cg

Attachment - 12D

South Loop Surgery Center Geographic Service Area

#20-020



Attachment - 12E

Section III, Project Purpose, Background and Alternatives – Information Requirements
Criterion 1110.110(d), Project Purpose, Background and Alternatives

Alternatives

The Applicant explored several options prior to determining to establish South Loop Surgery Center. The options considered are as follows:

a. Do nothing;

b. Utilize existing facilities;

c. Establish South Loop Surgery Center.

After exploring these options, which are discussed in more detail below, the Applicant decided to establish South Loop Surgery Center. A review of each of the options considered and the reasons they were rejected follows.

Do Nothing

The first alternative considered was to maintain the status quo. On January 23, 2020, Mercy Hospital & Medical Center along with Advocate Trinity Hospital, South Shore Hospital and St. Bernard Hospital announced plans to create a new health care delivery system to expand access to primary and preventative care services on the South Side of Chicago. The new health care system will address these needs by constructing community health centers and "building at least one new, state-of-the-art, destination hospital, thereby replacing outmoded, aging facilities." The potential closing of Mercy Hospital and Medical Center will create significant need for qualified operating rooms in the local area. As noted in the support letter from 21st Ward Alderman Howard B. Brookings, Jr., the potential closure of Mercy Hospital & Medical Center will affect residents on the South Side of Chicago, as "[t]here is no other facility in the is immediately available to these neighborhoods . . . the need for a facility or facilities that offer accredited operating rooms is essential in maintaining appropriate surgical healthcare access." Accordingly, the option to do nothing was rejected.

There is no cost to this option.

Utilize Other Health Care Facilities

Another alternative the Applicants considered was utilizing existing health care facilities to provide an option for outpatient surgery in the South Loop Surgery Center GSA. As previously discussed, the South Loop Surgery Center GSA is an economically disadvantaged community with significant populations of two ethnic groups: African-American (30%) and Hispanic (33%). Due to a large immigrant population, cultural barriers to access health care are high. The potential closure of Mercy Hospital and Medical Center will exacerbate those barriers. Further, South Loop Surgery Center GSA is an area with many low-income

residents. Twenty percent of the population lives below the Federal Poverty Level (compared to 12% Statewide). Due to barriers faced by members of this community, the HRSA has designated this area a primary care Health Professional Shortage Area, a Medically Underserved Area, and a Medically Underserved Population.

Currently, there are 29 acute care hospitals and 13 ambulatory surgical treatment centers within South Loop Surgery Center's GSA. Utilizing hospitals for procedures that can be safely performed in an outpatient surgery center is not an efficient use of scarce health care resources. A 2013 article in the New York Times noted the escalation in health care costs is largely attributed to high prices charged by hospitals.[7] This article highlighted that hospitals are the most powerful players in a health care system that has little or no price regulation in the private market. Prices set by hospitals are discretionary and not connected to underlying costs or market prices. Further, according to the March 2020 MedPac Report to Congress, Medicare payment rates for most ambulatory surgical procedures performed in HOPDs are much higher than in surgery centers. For 2020, Medicare rates are 98% higher in HOPDs than surgery centers.[8]

While there are 13 licensed ambulatory surgical treatment centers within South Loop Surgery Center's GSA, the only surgery center that provides the same surgical services as proposed at South Loop Surgery Center does not serve Medicaid patients or provide charity care.[9]

There is no viable outpatient surgery option for low-income patients residing in Bronzeville and other communities on the South Side of Chicago. Accordingly, this option was rejected.

There was no cost to this option.

Establish South Loop Surgery Center

With the potential closing of Mercy Hospital & Medical Center, patients in Bronzeville and other communities on the South Side of Chicago will lack access to outpatient surgical services. The establishment of South Loop Surgery Center will ensure patients maintain access to low-cost, high quality outpatient surgical services. After weighing this option against others, it was determined that this alternative would provide the greatest benefit in terms of increased access to health care services for residents in Bronzeville and other communities on the South Side of Chicago.

The cost of this alternative is $1,085,536.

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[7] Elisabeth Rosenthal, *As Hospital Prices Soar, a Stitch Tops $500*, N.Y. TIMES, Dec. 2, 2013

[8] Medicare Payment Advisory Commission, Report to the Congress: Medicare Payment Policy 147 (Mar. 13, 2020) *available at* http://www.medpac.gov/docs/default-source/reports/mar20_medpac_ch5_ sec.pdf?sfvrsn=0 (last visited April 27, 2020)

[9] Illinois Health Facilities and Services Review Board, Ambulatory Surgical Treatment Center Profile – 2018 111 (Sep. 2019) *available at* _https://www2.illinois.gov/sites/hfsrb/InventoriesData/FacilityProfiles/Documents/2018%20ASTC%20Facility%20Profiles%202-7-2020.pdf (last visited Apr. 29, 2020).

Section IV, Project Scope, Utilization, and Unfinished/Shell Space
Criterion 1110.120 - Project Scope, Utilization, and Unfinished/Shell Space

There is no construction associated with this project. Thus, this criterion is not applicable.

The proposed project will offer Plastic Surgery, OB/Gyn, Ophthalmology, Orthopedics, Podiatry, Pain Management, Dermatology, Neurosurgery and General Surgery. The ASTC consists of two procedure rooms and four recovery stations.

Section IV, Project Scope, Utilization, and Unfinished/Shell Space

Criterion 1110.120 – Size of the Project

The Applicants propose to establish and ambulatory surgical treatment center a two operating rooms and four recovery stations. Pursuant to Section 1110, Appendix B of the State Board's rules, the State standard is 2,750 gross square feet per operating room for a total of 5,500 gross square feet for 2 operating rooms. The total gross square footage of the clinical space of South Loop Surgery Center is 4,000 of gross square feet (or 2,000 GSF per operating room). Accordingly, South Loop Surgery Center meets the State standard per operating room.

SIZE OF PROJECT				
DEPARTMENT/SERVICE	PROPOSED BGSF/DGSF	STATE STANDARD	DIFFERENCE	MET STANDARD?
ESRD	4,000	5,500	N/A	Below State Standard

Section IV, Project Scope, Utilization, and Unfinished/Shell Space
Criterion 1110.120 - Project Services Utilization

By the second year after project completion, South Loop Surgery Center's annual utilization shall meet or exceed the State Board's utilization standards. Pursuant to Section 1110, Appendix B of the State Board's rules, utilization for ASTCs is based upon 1,500 hours per operating/procedure room. Based upon historical utilization and projected procedures documented in physician referral letters attached at Appendix – 1, approximately 817 procedures will be performed at SLSC within two years after project completion. Based upon the current experience of the referring physicians, the estimated surgical hours, including prep and cleanup, in the first year after project completion are as follows:

Surgical Specialty	Projected Referrals	Estimated Surgical Time	Estimated Total Surgical Hours After First Year Project Completion
Plastic Surgery	477	3.10 hours	1,478.70
Ophthalmology	150	0.90 hours	135.00
Orthopedic	35	1.80 hours	63.00
Pain Management	60	0.90 hours	54.00
Podiatry	20	2.10 hours	42.00
Neurosurgery	20	1.45 hours	29.00
General Surgery	10	1.60 hours	16.00
Otolaryngology	45	3.00 hours	135.00
Total	**817**		**1,952.7**

Attachment – 15

73079641.3

Section IV, Project Scope, Utilization, and Unfinished/Shell Space

Criterion 1110.120 Unfinished or Shell Space

This project will not include unfinished space designed to meet an anticipated future demand for service. Accordingly, this criterion is not applicable.

Section IV, Project Scope, Utilization, and Unfinished/Shell Space

Criterion 1110.120 Assurances

This project will not include unfinished space designed to meet an anticipated future demand for service. Accordingly, this criterion is not applicable.

Section V, Service Specific Review Criteria
Non-Hospital Based Ambulatory Surgery
Criterion 1110.235(c)(2)(B), Service to GSA Residents

a. Attached at Attachment – 24A is a map outlining the intended geographic service area ("GSA") for South Loop Surgery Center. As set forth in Criterion 1110.230, the surgery center will serve patients residing in Bronzeville and other communities on the South Side of Chicago. Accordingly, the intended primary GSA consists of those areas within a 10 mile radius from South Loop Surgery Center.

b. Pursuant to Section 1100.510(d) of the State Board's rules, the normal drive time should be based upon the location of the applicant facility. South Loop Surgery Center is located in Cook County therefore the intended GSA is the radius of 10 miles from the proposed ASTC. South Loop Surgery Center serves Bronzeville and other communities on the South Side of Chicago within a 10 mile radius of the surgery center. A list of all zip codes located, in whole or in part, within a 10 mile radius of South Loop Surgery Center as well as the 2018 U.S. Census estimates figures for each zip code is provided in Table 1110.1540(b).

Table 1110.235
Geographic Service Area Population

Zip Code	City	Population
60130	Forest Park	14,041
60301	Oak Park	2,536
60304	Oak Park	17,641
60402	Berwyn	63,554
60456	Hometown	4,308
60601	Chicago	14,675
60602	Chicago	1,244
60603	Chicago	1,174
60604	Chicago	782
60605	Chicago	27,519
60606	Chicago	3,101
60607	Chicago	29,591
60608	Chicago	82,739
60609	Chicago	61,495
60610	Chicago	39,019
60611	Chicago	32,426
60612	Chicago	34,311
60613	Chicago	50,113
60614	Chicago	71,308
60615	Chicago	41,563

Table 1110.235 Geographic Service Area Population		
Zip Code	**City**	**Population**
60616	Chicago	54,464
60618	Chicago	94,395
60619	Chicago	61,258
60620	Chicago	68,096
60621	Chicago	29,042
60622	Chicago	52,793
60623	Chicago	85,979
60624	Chicago	36,158
60625	Chicago	79,243
60629	Chicago	111,850
60632	Chicago	91,039
60636	Chicago	32,203
60637	Chicago	47,454
60638	Chicago	58,797
60639	Chicago	90,517
60640	Chicago	69,715
60641	Chicago	71,023
60642	Chicago	20,201
60643	Chicago	49,870
60644	Chicago	47,712
60647	Chicago	87,509
60649	Chicago	46,024
60651	Chicago	63,218
60652	Chicago	43,907
60653	Chicago	31,972
60654	Chicago	19,135
60657	Chicago	70,052
60661	Chicago	9,926
60804	Cicero	83,147
60805	Evergreen Park	19,666
Total		**2,319,505**

Source: U.S. Census Bureau, Data Census 2018 ASC 5-Year Estimates Data Profiles available at https://data.census.gov/cedsci/table?g=8600000US60456&tid=ACSDP5Y2018.DP05

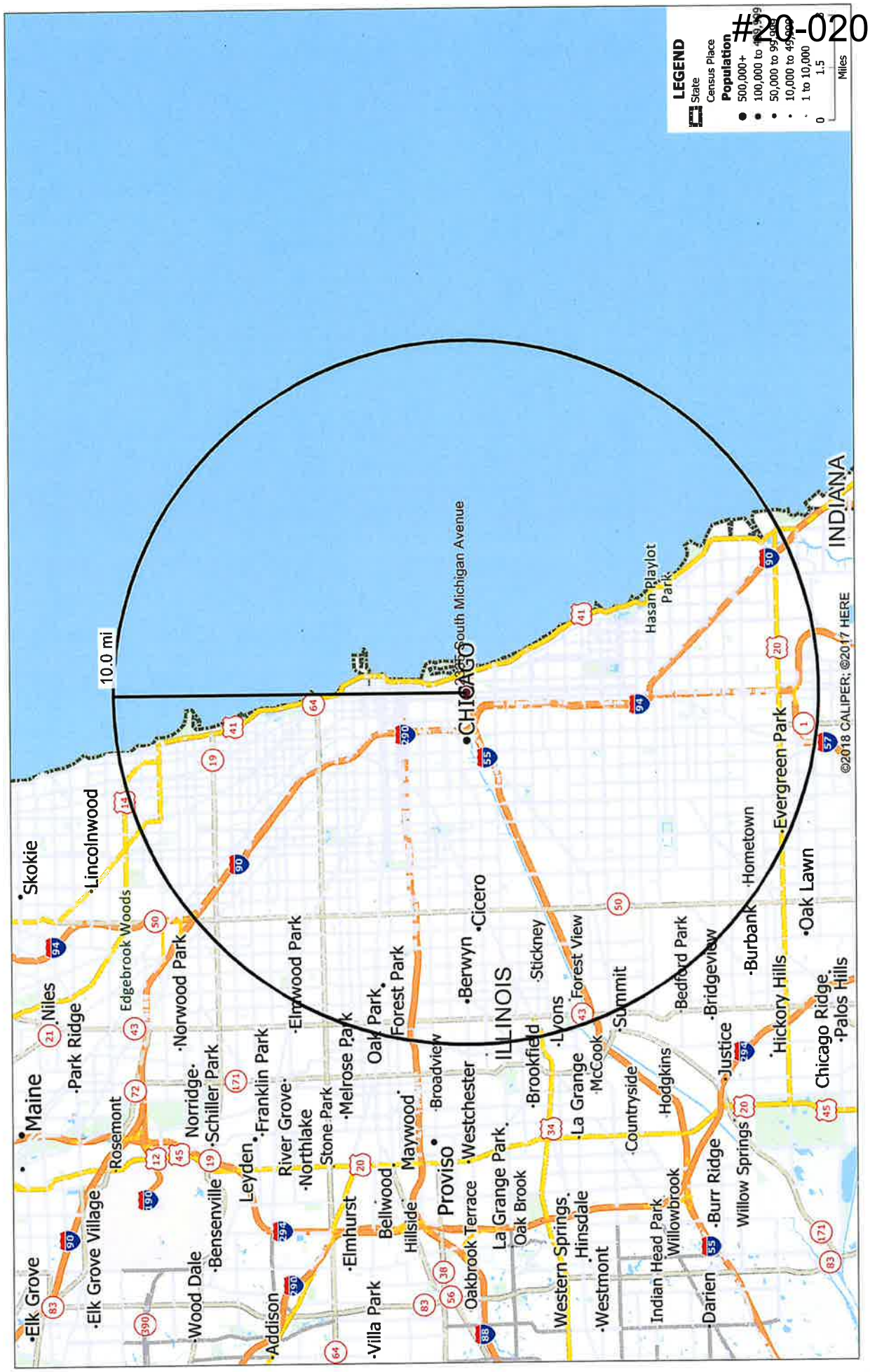
c. Patient origin information by zip code for all admission for the last 12- month period is proved in Table 1110.235(c)(2)(B)(ii) below. As documented in Table 1110.235(c)(2)(B)(ii) 1,765 cases were from patients residing in the South Loop Surgery Center GSA.

Table 1110.235(c)(2)(B)(ii) Patient Origin by Zip Code	
Zip Code	Number of Cases
46321	20
60005	100
60035	40
60062	40
60076	100
60101	15
60121	40
60126	75
60159	200
60169	500
60181	15
60402	75
60423	20
60438	35
60443	50
60453	125
60461	75
60462	35
60540	45
60608	20
60609	165
60610	50
60611	45
60613	30
60615	20
60616	410
60617	140
60621	35
60622	95
60628	85
60638	150
60653	305
60654	50
60804	75

Table 1110.235(c)(2)(B)(ii) Patient Origin by Zip Code	
Zip Code	Number of Cases
60805	100
61820	30
62629	95
Total	**3,505**

Attachment – 24A

South Loop Surgery Center Geographic Service Area



Attachment - 24A

#20-020

Section V, Service Specific Review Criteria
Non-Hospital Based Ambulatory Surgery
Criterion 1110.235(c)(3) – Service Demand - Establishment

Physician referral letters providing the name and number of patients referred to health care facilities within the past 12 months and the projected number of referrals to the surgery center are attached at Appendix - 1. A summary of the physician referral letters is provided in Table 1110.235(c)(3) below.

Table 1110.235(c)(3)

Hospital/ASTC	Cases Performed in the Last 12 Months	Anticipated Referral to SLSC
Mercy Hospital and Medical Center	322	52
Illinois Masonic Hospital	75	0
900 North Michigan Avenue Surgery Center	335	55
St. Joseph Hospital	3	0
Advocate Trinity Hospital	400	0
Chicago Cosmetic Surgery Institute	410	410
Magna Surgery Center	5	5
Lift Center Schaumburg	600	0
Advocate Christ Medical Center	5	0
Tinley Woods Surgery Center	190	145
West Suburban Medical Center	100	10
Weiss Memorial Hospital	100	20
Loop Medical Center	100	0
NorthShore Skokie Hospital	100	0
Golf Surgical Center	180	45
Lutheran General Hospital	20	0
River North Surgery Center	20	20
Northwest Community Hospital	300	35
Elmhurst Memorial Hospital	125	10
MacNeal Hospital	125	10
Total	**3,515**	**817**

Section V, Service Specific Review Criteria
Non-Hospital Based Ambulatory Surgery
Criterion 1110.235(c)(5) Treatment Room Need Assessment

Pursuant to Section 1100.640(c) of the State Board's rules, ASTCs should operate 1,500 hours per room per year (including set up and clean up). South Loop Surgery Center will have two operating rooms with capacity for 3,000 surgical hours. As shown in Table 1110.235(c)(5) below, the Applicant projects 817 surgical cases (or 1,952.7 surgical hours) will be referred to South Loop Surgery Center in the first year after project completion.

Average time (including set up and cleanup time) is based on the 2018 average case time in HSA 6.

Table 1110.235(c)(5)
Projected Referrals and Surgical Hours

Surgical Specialty	Projected Referrals	Estimated Surgical Time	Estimated Total Surgical Hours After First Year Project Completion
Plastic Surgery	477	3.10 hours	1,478.70
Ophthalmology	150	0.90 hours	135.00
Orthopedic	35	1.80 hours	63.00
Pain Management	60	0.90 hours	54.00
Podiatry	20	2.10 hours	42.00
Neurosurgery	20	1.45 hours	29.00
General Surgery	10	1.60 hours	16.00
Otolaryngology	45	3.00 hours	135.00
Total	**817**		**1,952.7**

V, Service Specific Review Criteria
Non-Hospital Based Ambulatory Surgery
Criterion 1110.235(c)(6), Service Accessibility

The purpose of this project is to ensure patients residing in Bronzeville and communities on the South Side of Chicago maintain access to surgical services. Currently, there are 29 acute care hospitals and 13 ambulatory surgical treatment centers within South Loop Surgery Center's GSA. Utilizing hospitals for procedures that can be safely performed in an outpatient surgery center is not an efficient use of scarce health care resources. A 2013 article in the New York Times noted the escalation in health care costs is largely attributed to high prices charged by hospitals.[10] This article highlighted that hospitals are the most powerful players in a health care system that has little or no price regulation in the private market. Prices set by hospitals are discretionary and not connected to underlying costs or market prices. Further, according to the March 2020 MedPac Report to Congress, Medicare payment rates for most ambulatory surgical procedures performed in HOPDs are much higher than in surgery centers. For 2020, Medicare rates are 98% higher in HOPDs than surgery centers.[11]

While there are 13 licensed ambulatory surgical treatment centers within South Loop Surgery Center's GSA, the only surgery center that provides the same surgical services as proposed at South Loop Surgery Center does not serve Medicaid patients or provide charity care.[12] South Loop Surgery Center will provide a low-cost, high quality option for outpatient surgical services to patients residing in Bronzeville and other communities on the South Side of Chicago.

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[10] Elisabeth Rosenthal, *As Hospital Prices Soar, a Stitch Tops $500*, N.Y. TIMES, Dec. 2, 2013

[11] Medicare Payment Advisory Commission, Report to the Congress: Medicare Payment Policy 147 (Mar. 13, 2020) *available at* http://www.medpac.gov/docs/default-source/reports/mar20_medpac_ch5_ sec.pdf?sfvrsn=0 (last visited April 27, 2020)

[12] Illinois Health Facilities and Services Review Board, Ambulatory Surgical Treatment Center Profile – 2018 111 (Sep. 2019) *available at* _https://www2.illinois.gov/sites/hfsrb/InventoriesData/FacilityProfiles/Documents/2018%20ASTC%20Facility%20Profiles%202-7-2020.pdf (last visited Apr. 29, 2020).

Section V, Service Specific Review Criteria
Non-Hospital Based Ambulatory Surgery
Criterion 1110.235(c)(7), Unnecessary Duplication/Maldistribution

1. **Unnecessary Duplication of Services**

a. South Loop Surgery Center will be located at 2335 South Michigan Avenue, Chicago, Illinois. A map of the proposed facility's market area is attached at Attachment – 24A. A list of all zip codes located, in or in part within 10 miles of the South Loop Surgery Center as well as the U.S. Census Bureau 2018 population estimates for each zip code is provided in Table 1110.235(c)(7)(A)(i).

Table 1110.235(c)(7)(A)(i)
Geographic Service Area Population

Zip Code	City	Population
60130	Forest Park	14,041
60301	Oak Park	2,536
60304	Oak Park	17,641
60402	Berwyn	63,554
60456	Hometown	4,308
60601	Chicago	14,675
60602	Chicago	1,244
60603	Chicago	1,174
60604	Chicago	782
60605	Chicago	27,519
60606	Chicago	3,101
60607	Chicago	29,591
60608	Chicago	82,739
60609	Chicago	61,495
60610	Chicago	39,019
60611	Chicago	32,426
60612	Chicago	34,311
60613	Chicago	50,113
60614	Chicago	71,308
60615	Chicago	41,563
60616	Chicago	54,464
60618	Chicago	94,395
60619	Chicago	61,258
60620	Chicago	68,096
60621	Chicago	29,042
60622	Chicago	52,793

Table 1110.235(c)(7)(A)(i) Geographic Service Area Population		
Zip Code	**City**	**Population**
60623	Chicago	85,979
60624	Chicago	36,158
60625	Chicago	79,243
60629	Chicago	111,850
60632	Chicago	91,039
60636	Chicago	32,203
60637	Chicago	47,454
60638	Chicago	58,797
60639	Chicago	90,517
60640	Chicago	69,715
60641	Chicago	71,023
60642	Chicago	20,201
60643	Chicago	49,870
60644	Chicago	47,712
60647	Chicago	87,509
60649	Chicago	46,024
60651	Chicago	63,218
60652	Chicago	43,907
60653	Chicago	31,972
60654	Chicago	19,135
60657	Chicago	70,052
60661	Chicago	9,926
60804	Cicero	83,147
60805	Evergreen Park	19,666
Total		**2,319,505**

Source: U.S. Census Bureau, Data Census 2018 ASC 5-Year Estimates Data Profiles available at https://data.census.gov/cedsci/table?g=8600000US60456&tid=ACSDP5Y2018.DP05

b. A list of all existing and approved health care facilities located within the South Loop Surgery Center geographic service area are identified in the table below.

Table 1110.235(c)(7)(A)(ii) Health Care Facilities within South Loop Surgery Center Geographic Service Area	
Facility Name	**Distance in Miles**
South Loop Endoscopy & Wellness Center LLC	0.10
Mercy Hospital & Medical Center	0.20
University of Illinois Hospital at Chicago	2.76
Rush University Medical Center	2.87
Grand Avenue Surgical Center	2.88
Rush Surgicenter at the Professional Bldg. Ltd.	2.92
River North Same Day Surgery Center, LLC	3.04
John H. Stroger, Jr. Hospital of Cook County	3.09
Northwestern Memorial Hospital	3.10
Gold Coast Surgicenter, LLC	3.33
Provident Hospital of Cook County	3.33
The Surgery Center at 900 North Michigan Ave, LLC	3.40
Mount Sinai Hospital Medical Center	3.75
Saint Anthony Hospital	3.91
Hyde Park Same Day Surgicenter	4.01
The University of Chicago Medical Center	4.35
Presence Saint Mary of Nazareth Hospital	4.77
St. Bernard Hospital	4.98
Presence Saint Elizabeth Hospital	5.12
Norwegian-American Hospital, Inc.	5.23
Presence Saint Joseph Hospital – Chicago	6.12
Holy Cross Hospital	6.52
Western Diversey Surgical Center	6.55
Jackson Park Hospital	6.71
Fullerton Kimball Medical & Surgical Center	6.90
Chicago Surgery Center	7.02
Thorek Memorial Hospital	7.36
Loretto Hospital	7.43
South Shore Hospital	7.49
Louis A Weiss Memorial Hospital	8.14
Fullerton Surgery Center	8.23
West Suburban Medical Center	8.37
MacNeal Hospital	8.81
Methodist Hospital of Chicago	8.86
Magna Surgical Center	8.94

Table 1110.235(c)(7)(A)(ii) Health Care Facilities within South Loop Surgery Center Geographic Service Area	
Facility Name	**Distance in Miles**
Advocate Trinity Hospital	9.02
Swedish Covenant Hospital	9.45
Rush Oak Park Hospital, Inc.	9.50
OSF Little Company of Mary Hospital	9.58
Six Corners Same Day Surgery, LLC	9.79
Community First Medical Center	9.98

2. Maldistribution of Services

South Loop Surgery Center will not result in a maldistribution of services. A maldistribution exists when an identified area has an excess supply of surgical/treatment rooms characterized by such factors as, but not limited to: (1) ratio of surgical/treatment rooms to population exceeds one and one-half times the State Average; (2) historical utilization of existing surgical/treatment rooms is below the State Board's utilization standard; or (3) insufficient population to provide the volume or caseload necessary to utilize the services proposed by the project at or above utilization standards.

a. Ratio of operating rooms to population.

As shown in Table 110.235(c)(7)(B)(i), the ratio of operating/procedure rooms is 102% of the State Average.

TABLE 110.235(c)(7)(B)(ii) Ratio of Surgical/Treatment Rooms to Population				
	Population	**Operating/ Procedure Rooms**	**Rooms to Population**	**Standard Met?**
Geographic Service Area	2,319,505	507	1:4,575	YES
State	12,741,080	2,739	1:4,652	

b. Historical Utilization of Existing Health Care Facilities

Currently, there are 29 acute care hospitals and 13 ambulatory surgical treatment centers within South Loop Surgery Center's GSA. Utilizing hospitals for procedures that can be safely performed in an outpatient surgery center is not an efficient use of scarce health care resources. A 2013 article in the New York Times noted the escalation in health care costs is largely attributed to high prices charged by

hospitals.[13] This article highlighted that hospitals are the most powerful players in a health care system that has little or no price regulation in the private market. Prices set by hospitals are discretionary and not connected to underlying costs or market prices. Further, according to the March 2020 MedPac Report to Congress, Medicare payment rates for most ambulatory surgical procedures performed in HOPDs are much higher than in surgery centers. For 2020, Medicare rates are 98% higher in HOPDs than surgery centers.[14]

While there are 13 licensed ambulatory surgical treatment centers within South Loop Surgery Center's GSA, the only surgery center that provides the same surgical services as proposed at South Loop Surgery Center does not serve Medicaid patients or provide charity care.[15] South Loop Surgery Center will provide a low-cost, high quality option for outpatient surgical services to patients residing in Bronzeville and other communities on the South Side of Chicago.

c. Sufficient Population to Provide the Necessary Volume or Caseload

The Applicant proposes to establish an ambulatory surgical treatment center with two operating rooms. To justify the two operating rooms, the Applicants would need over 1,500 surgical hours. As shown in Table 1110.235(c)(7)(B)(iii), the Applicant projects 1,952.7 surgical hours during the first year after project completion. Accordingly, there is sufficient population to provide the volume necessary to utilize the operating rooms proposed by the project.

Table 1110.235(c)(7)(B)(iii)
Projected Referrals and Surgical Hours

Surgical Specialty	Projected Referrals	Estimated Surgical Time	Estimated Total Surgical Hours After First Year Project Completion
Plastic Surgery	477	3.10 hours	1,478.70
Ophthalmology	150	0.90 hours	135.00
Orthopedic	35	1.80 hours	63.00
Pain Management	60	0.90 hours	54.00
Podiatry	20	2.10 hours	42.00
Neurosurgery	20	1.45 hours	29.00

[13] Elisabeth Rosenthal, *As Hospital Prices Soar, a Stitch Tops $500*, N.Y. TIMES, Dec. 2, 2013

[14] Medicare Payment Advisory Commission, Report to the Congress: Medicare Payment Policy 147 (Mar. 13, 2020) *available at* http://www.medpac.gov/docs/default-source/reports/mar20_medpac_ch5_ sec.pdf?sfvrsn=0 (last visited April 27, 2020)

[15] Illinois Health Facilities and Services Review Board, Ambulatory Surgical Treatment Center Profile – 2018 111 (Sep. 2019) *available at* _https://www2.illinois.gov/sites/hfsrb/InventoriesData/FacilityProfiles/Documents/2018%20ASTC%20Facility%20Profiles%202-7-2020.pdf (last visited Apr. 29, 2020).

Table 1110.235(c)(7)(B)(iii) Projected Referrals and Surgical Hours			
Surgical Specialty	**Projected Referrals**	**Estimated Surgical Time**	**Estimated Total Surgical Hours After First Year Project Completion**
General Surgery	10	1.60 hours	16.00
Otolaryngology	45	3.00 hours	135.00
Total	**817**		**1,952.7**

3. Impact on Other Health Care Facilities

a. South Loop Surgery Center will not have an adverse impact on existing health care facilities in the GSA. Most of the surgical procedures to be performed at the surgery center are primarily performed in an office-based setting.

b. South Loop Surgery Center will not lower the utilization of other area providers that are operating below the occupancy standards.

Section V, Service Specific Review Criteria
Non-Hospital Based Ambulatory Surgery
Criterion 1110.235(c)(8), Staffing

South Loop Surgery Center will be staffed in accordance with all State and Medicare staffing requirements. Staffing for South Loop Surgery Center will be as follows:

Registered Nurse
Medical Assistant (2)
Anesthesiologist

As surgical volumes increase, nursing and clinical staffing will increase accordingly.

Section V, Service Specific Review Criteria
Non-Hospital Based Ambulatory Surgery
Criterion 1110.235(c)(9) Charge Commitment

a. A list of the procedures to be performed at the South Loop Surgery Center with the proposed charge is attached at Attachment – 24G.

b. A letter from David A. Shifrin, M.D., Manager, Chicago Cosmetic Surgery Institute, LLC d/b/a South Loop Surgery Center, committing to maintain the charges listed in Table 1110.235(c)(9) is attached at Attachment – 24G.

April 13, 2020

Debra Savage
Chair
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Re: Charge Commitment

Dear Chair Savage:

Pursuant to 77 Ill. Admin. Code § 110.235(e)(9)(B), I hereby commit that the attached charge schedule will not be increased, at a minimum, for the first two years of operation of The Chicago Cosmetic Surgery Institute LLC d/b/a South Loop Surgery Center unless a permit is first obtained pursuant to 77 Ill. Admin. Code § 1130.310(a).

Sincerely,

David A. Shifrin, M.D.
Manager
The Chicago Cosmetic Surgery Institute LLC
d/b/a South Loop Surgery Center

Subscribed and sworn to me
This ___ day of _____, 2020

_____
Notary Public

Shifrin Plastic Surgery | 2335 S. Michigan Ave. Chicago, IL 60616 | 312-502-6200

Procedure Code	Modifier	Fee
10021	Under Fine Needle Aspiration Biopsy Procedures	$1,592
10030	Under Introduction and Removal	$7,299
10035	Under Introduction and Removal	$6,697
10036	Under Introduction and Removal	$5,867
10040	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$1,435
10060	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$1,543
10061	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$2,688
10080	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$2,346
10081	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$3,521
10120	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$2,000
10121	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$3,596
10140	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$2,148
10160	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$1,699
10180	Under Incision and Drainage Procedures on the Skin, Subcutaneous and Accessory Structures	$3,278
11000	Under Debridement Procedures on the Skin	$709
11001	Under Debridement Procedures on the Skin	$278
11004	Under Debridement Procedures on the Skin	$7,820
11005	Under Debridement Procedures on the Skin	$10,734
11006	Under Debridement Procedures on the Skin	$9,622
11008	Under Debridement Procedures on the Skin	$3,776
11010	Under Debridement Procedures on the Skin	$6,664
11011	Under Debridement Procedures on the Skin	$7,160
11012	Under Debridement Procedures on the Skin	$9,377
11042	Under Debridement Procedures on the Skin	$1,531
11043	Under Debridement Procedures on the Skin	$3,003
11044	Under Debridement Procedures on the Skin	$4,130
11045	Under Debridement Procedures on the Skin	$545
11046	Under Debridement Procedures on the Skin	$971
11047	Under Debridement Procedures on the Skin	$1,649
11055	Under Paring or Cutting Procedures on the Skin	$621
11056	Under Paring or Cutting Procedures on the Skin	$757
11057	Under Paring or Cutting Procedures on the Skin	$858
11200	Under Removal of Skin Tags Procedures	$1,169
11201	Under Removal of Skin Tags Procedures	$254
11300	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,275
11301	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,565
11302	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,846

Procedure Code	Modifier	Fee
11303	Under Shaving of Epidermal or Dermal Lesions Procedures	$2,040
11305	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,283
11306	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,589
11307	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,889
11308	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,964
11310	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,488
11311	Under Shaving of Epidermal or Dermal Lesions Procedures	$1,459
11312	Under Shaving of Epidermal or Dermal Lesions Procedures	$2,101
11313	Under Shaving of Epidermal or Dermal Lesions Procedures	$2,439
11400	Under Excision-Benign Lesions Procedures on the Skin	$1,640
11401	Under Excision-Benign Lesions Procedures on the Skin	$1,960
11402	Under Excision-Benign Lesions Procedures on the Skin	$2,189
11403	Under Excision-Benign Lesions Procedures on the Skin	$2,535
11404	Under Excision-Benign Lesions Procedures on the Skin	$2,878
11406	Under Excision-Benign Lesions Procedures on the Skin	$4,177
11420	Under Excision-Benign Lesions Procedures on the Skin	$1,599
11421	Under Excision-Benign Lesions Procedures on the Skin	$2,054
11422	Under Excision-Benign Lesions Procedures on the Skin	$2,318
11423	Under Excision-Benign Lesions Procedures on the Skin	$2,643
11424	Under Excision-Benign Lesions Procedures on the Skin	$3,078
11426	Under Excision-Benign Lesions Procedures on the Skin	$4,435
11440	Under Excision-Benign Lesions Procedures on the Skin	$1,769
11441	Under Excision-Benign Lesions Procedures on the Skin	$2,203
11442	Under Excision-Benign Lesions Procedures on the Skin	$2,469
11443	Under Excision-Benign Lesions Procedures on the Skin	$2,937
11444	Under Excision-Benign Lesions Procedures on the Skin	$3,698
11446	Under Excision-Benign Lesions Procedures on the Skin	$5,147
11450	Under Excision-Benign Lesions Procedures on the Skin	$5,091
11451	Under Excision-Benign Lesions Procedures on the Skin	$6,442
11462	Under Excision-Benign Lesions Procedures on the Skin	$4,959
11463	Under Excision-Benign Lesions Procedures on the Skin	$6,499
11470	Under Excision-Benign Lesions Procedures on the Skin	$5,469
11471	Under Excision-Benign Lesions Procedures on the Skin	$6,759
11600	Under Excision-Malignant Lesions Procedures on the Skin	$2,533
11601	Under Excision-Malignant Lesions Procedures on the Skin	$2,997
11602	Under Excision-Malignant Lesions Procedures on the Skin	$3,250
11603	Under Excision-Malignant Lesions Procedures on the Skin	$3,733
11604	Under Excision-Malignant Lesions Procedures on the Skin	$4,142
11606	Under Excision-Malignant Lesions Procedures on the Skin	$5,951
11620	Under Excision-Malignant Lesions Procedures on the Skin	$2,553
11621	Under Excision-Malignant Lesions Procedures on the Skin	$3,013
11622	Under Excision-Malignant Lesions Procedures on the Skin	$3,364
11623	Under Excision-Malignant Lesions Procedures on the Skin	$3,957

Procedure Code	Modifier	Fee
11624	Under Excision-Malignant Lesions Procedures on the Skin	$4,465
11626	Under Excision-Malignant Lesions Procedures on the Skin	$5,380
11640	Under Excision-Malignant Lesions Procedures on the Skin	$2,630
11641	Under Excision-Malignant Lesions Procedures on the Skin	$3,114
11642	Under Excision-Malignant Lesions Procedures on the Skin	$3,560
11643	Under Excision-Malignant Lesions Procedures on the Skin	$4,201
11644	Under Excision-Malignant Lesions Procedures on the Skin	$5,194
11646	Under Excision-Malignant Lesions Procedures on the Skin	$6,778
11719	Under Surgical Procedures on the Nails	$185
11720	Under Surgical Procedures on the Nails	$426
11721	Under Surgical Procedures on the Nails	$585
11730	Under Surgical Procedures on the Nails	$1,367
11732	Under Surgical Procedures on the Nails	$409
11740	Under Surgical Procedures on the Nails	$650
11750	Under Surgical Procedures on the Nails	$1,984
11755	Under Surgical Procedures on the Nails	$1,703
11760	Under Surgical Procedures on the Nails	$2,442
11762	Under Surgical Procedures on the Nails	$3,627
11765	Under Surgical Procedures on the Nails	$2,167
11770	Under Surgical Procedures on the Pilonidal Cyst	$3,662
11771	Under Surgical Procedures on the Pilonidal Cyst	$7,691
11772	Under Surgical Procedures on the Pilonidal Cyst	$9,253
11900	Under Introduction or Removal Procedures on the Integumentary System	$733
11901	Under Introduction or Removal Procedures on the Integumentary System	$923
11920	Under Introduction or Removal Procedures on the Integumentary System	$2,260
11921	Under Introduction or Removal Procedures on the Integumentary System	$2,591
11922	Under Introduction or Removal Procedures on the Integumentary System	$804
11950	Under Introduction or Removal Procedures on the Integumentary System	$918
11951	Under Introduction or Removal Procedures on the Integumentary System	$1,327
11952	Under Introduction or Removal Procedures on the Integumentary System	$1,715
11954	Under Introduction or Removal Procedures on the Integumentary System	$2,058
11960	Under Introduction or Removal Procedures on the Integumentary System	$12,663
11970	Under Introduction or Removal Procedures on the Integumentary System	$8,109
11971	Under Introduction or Removal Procedures on the Integumentary System	$6,164
11976	Under Introduction or Removal Procedures on the Integumentary System	$1,878
11980	Under Introduction or Removal Procedures on the Integumentary System	$1,238
11981	Under Introduction or Removal Procedures on the Integumentary System	$1,872
11982	Under Introduction or Removal Procedures on the Integumentary System	$2,091
11983	Under Introduction or Removal Procedures on the Integumentary System	$3,016
12001	Under Repair-Simple Procedures on the Integumentary System	$1,187
12002	Under Repair-Simple Procedures on the Integumentary System	$1,444

Procedure Code	Modifier	Fee
12004	Under Repair-Simple Procedures on the Integumentary System	$1,689
12005	Under Repair-Simple Procedures on the Integumentary System	$2,128
12006	Under Repair-Simple Procedures on the Integumentary System	$2,532
12007	Under Repair-Simple Procedures on the Integumentary System	$2,935
12011	Under Repair-Simple Procedures on the Integumentary System	$1,448
12013	Under Repair-Simple Procedures on the Integumentary System	$1,520
12014	Under Repair-Simple Procedures on the Integumentary System	$1,775
12015	Under Repair-Simple Procedures on the Integumentary System	$2,137
12016	Under Repair-Simple Procedures on the Integumentary System	$2,697
12017	Under Repair-Simple Procedures on the Integumentary System	$2,047
12018	Under Repair-Simple Procedures on the Integumentary System	$2,318
12020	Under Repair-Simple Procedures on the Integumentary System	$3,677
12021	Under Repair-Simple Procedures on the Integumentary System	$2,155
12031	Under Repair-Simple Procedures on the Integumentary System	$3,113
12032	Under Repair-Simple Procedures on the Integumentary System	$3,951
12034	Under Repair-Simple Procedures on the Integumentary System	$4,107
12035	Under Repair-Simple Procedures on the Integumentary System	$5,000
12036	Under Repair-Simple Procedures on the Integumentary System	$5,578
12037	Under Repair-Simple Procedures on the Integumentary System	$6,358
12041	Under Repair-Simple Procedures on the Integumentary System	$3,106
12042	Under Repair-Simple Procedures on the Integumentary System	$3,786
12044	Under Repair-Simple Procedures on the Integumentary System	$4,715
12045	Under Repair-Simple Procedures on the Integumentary System	$5,245
12046	Under Repair-Simple Procedures on the Integumentary System	$6,378
12047	Under Repair-Simple Procedures on the Integumentary System	$7,033
12051	Under Repair-Simple Procedures on the Integumentary System	$3,381
12052	Under Repair-Simple Procedures on the Integumentary System	$3,857
12053	Under Repair-Simple Procedures on the Integumentary System	$4,527
12054	Under Repair-Simple Procedures on the Integumentary System	$4,720
12055	Under Repair-Simple Procedures on the Integumentary System	$6,106
12056	Under Repair-Simple Procedures on the Integumentary System	$7,311
12057	Under Repair-Simple Procedures on the Integumentary System	$7,765
13100	Under Repair-Complex Procedures on the Integumentary System	$4,384
13101	Under Repair-Complex Procedures on the Integumentary System	$5,175
13102	Under Repair-Complex Procedures on the Integumentary System	$1,601
13120	Under Repair-Complex Procedures on the Integumentary System	$4,587
13121	Under Repair-Complex Procedures on the Integumentary System	$5,586
13122	Under Repair-Complex Procedures on the Integumentary System	$1,750
13131	Under Repair-Complex Procedures on the Integumentary System	$5,048
13132	Under Repair-Complex Procedures on the Integumentary System	$6,235
13133	Under Repair-Complex Procedures on the Integumentary System	$2,342
13151	Under Repair-Complex Procedures on the Integumentary System	$5,525
13152	Under Repair-Complex Procedures on the Integumentary System	$6,635
13153	Under Repair-Complex Procedures on the Integumentary System	$2,543
13160	Under Repair-Complex Procedures on the Integumentary System	$10,693

Procedure Code	Modifier	Fee
14000	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$8,190
14001	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$10,593
14020	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$9,138
14021	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$11,437
14040	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$9,993
14041	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$12,382
14060	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$10,197
14061	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$13,320
14301	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$14,180
14302	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$2,975
14350	Under Adjacent Tissue Transfer or Rearrangement Procedures on the Integumentary System	$8,988
15002	Under Surgical Preparation for Skin Replacement Surgery	$4,589
15003	Under Surgical Preparation for Skin Replacement Surgery	$1,003
15004	Under Surgical Preparation for Skin Replacement Surgery	$5,227
15005	Under Surgical Preparation for Skin Replacement Surgery	$1,653
15040	Under Autografts/Tissue Cultured Autograft	$3,305
15050	Under Autografts/Tissue Cultured Autograft	$7,358
15100	Under Autografts/Tissue Cultured Autograft	$11,345
15101	Under Autografts/Tissue Cultured Autograft	$2,447
15110	Under Autografts/Tissue Cultured Autograft	$10,507
15111	Under Autografts/Tissue Cultured Autograft	$1,602
15115	Under Autografts/Tissue Cultured Autograft	$10,321
15116	Under Autografts/Tissue Cultured Autograft	$2,254
15120	Under Autografts/Tissue Cultured Autograft	$11,196
15121	Under Autografts/Tissue Cultured Autograft	$2,734
15130	Under Autografts/Tissue Cultured Autograft	$8,730
15131	Under Autografts/Tissue Cultured Autograft	$1,335
15135	Under Autografts/Tissue Cultured Autograft	$11,139
15136	Under Autografts/Tissue Cultured Autograft	$1,321
15150	Under Autografts/Tissue Cultured Autograft	$9,383
15151	Under Autografts/Tissue Cultured Autograft	$1,649
15152	Under Autografts/Tissue Cultured Autograft	$2,137
15155	Under Autografts/Tissue Cultured Autograft	$10,584
15156	Under Autografts/Tissue Cultured Autograft	$2,209
15157	Under Autografts/Tissue Cultured Autograft	$2,465
15200	Under Autografts/Tissue Cultured Autograft	$10,975
15201	Under Autografts/Tissue Cultured Autograft	$1,943

Procedure Code	Modifier	Fee
15220	Under Autografts/Tissue Cultured Autograft	$10,134
15221	Under Autografts/Tissue Cultured Autograft	$1,789
15240	Under Autografts/Tissue Cultured Autograft	$12,265
15241	Under Autografts/Tissue Cultured Autograft	$2,415
15260	Under Autografts/Tissue Cultured Autograft	$13,290
15261	Under Autografts/Tissue Cultured Autograft	$2,812
15271	Under Skin Substitute Grafts	$1,851
15272	Under Skin Substitute Grafts	$360
15273	Under Skin Substitute Grafts	$3,985
15274	Under Skin Substitute Grafts	$946
15275	Under Skin Substitute Grafts	$1,943
15276	Under Skin Substitute Grafts	$454
15277	Under Skin Substitute Grafts	$4,355
15278	Under Skin Substitute Grafts	$1,131
15570	Under Flaps (Skin and/or Deep Tissues) Procedures	$12,072
15572	Under Flaps (Skin and/or Deep Tissues) Procedures	$11,738
15574	Under Flaps (Skin and/or Deep Tissues) Procedures	$11,972
15576	Under Flaps (Skin and/or Deep Tissues) Procedures	$10,560
15600	Under Flaps (Skin and/or Deep Tissues) Procedures	$4,231
15610	Under Flaps (Skin and/or Deep Tissues) Procedures	$4,655
15620	Under Flaps (Skin and/or Deep Tissues) Procedures	$5,709
15630	Under Flaps (Skin and/or Deep Tissues) Procedures	$5,994
15650	Under Flaps (Skin and/or Deep Tissues) Procedures	$6,603
15730	Under Flaps (Skin and/or Deep Tissues) Procedures	$20,270
15731	Under Flaps (Skin and/or Deep Tissues) Procedures	$14,754
15733	Under Flaps (Skin and/or Deep Tissues) Procedures	$13,899
15734	Under Flaps (Skin and/or Deep Tissues) Procedures	$20,384
15736	Under Flaps (Skin and/or Deep Tissues) Procedures	$16,476
15738	Under Flaps (Skin and/or Deep Tissues) Procedures	$17,721
15740	Under Flaps (Skin and/or Deep Tissues) Procedures	$13,345
15750	Under Flaps (Skin and/or Deep Tissues) Procedures	$12,197
15756	Under Flaps (Skin and/or Deep Tissues) Procedures	$30,732
15757	Under Other Flaps and Grafts Procedures	$30,188
15758	Under Other Flaps and Grafts Procedures	$30,495
15760	Under Other Flaps and Grafts Procedures	$11,167
15770	Under Other Flaps and Grafts Procedures	$8,814
15775	Under Other Flaps and Grafts Procedures	$3,972
15776	Under Other Flaps and Grafts Procedures	$6,354
15777	Under Other Flaps and Grafts Procedures	$2,915
15780	Under Other Repair (Closure) Procedures on the Integumentary System	$12,292
15781	Under Other Repair (Closure) Procedures on the Integumentary System	$7,303
15782	Under Other Repair (Closure) Procedures on the Integumentary System	$7,911
15783	Under Other Repair (Closure) Procedures on the Integumentary System	$6,367
15786	Under Other Repair (Closure) Procedures on the Integumentary System	$3,252
15787	Under Other Repair (Closure) Procedures on the Integumentary System	$646

Procedure Code	Modifier	Fee
15788	Under Other Repair (Closure) Procedures on the Integumentary System	$6,029
15789	Under Other Repair (Closure) Procedures on the Integumentary System	$7,359
15792	Under Other Repair (Closure) Procedures on the Integumentary System	$5,715
15793	Under Other Repair (Closure) Procedures on the Integumentary System	$6,460
15819	Under Other Repair (Closure) Procedures on the Integumentary System	$10,535
15820	Under Other Repair (Closure) Procedures on the Integumentary System	$7,229
15821	Under Other Repair (Closure) Procedures on the Integumentary System	$7,913
15822	Under Other Repair (Closure) Procedures on the Integumentary System	$5,818
15823	Under Other Repair (Closure) Procedures on the Integumentary System	$7,896
15830	Under Other Repair (Closure) Procedures on the Integumentary System	$15,738
15832	Under Other Repair (Closure) Procedures on the Integumentary System	$12,167
15833	Under Other Repair (Closure) Procedures on the Integumentary System	$11,600
15834	Under Other Repair (Closure) Procedures on the Integumentary System	$11,815
15835	Under Other Repair (Closure) Procedures on the Integumentary System	$12,483
15836	Under Other Repair (Closure) Procedures on the Integumentary System	$10,502
15837	Under Other Repair (Closure) Procedures on the Integumentary System	$11,415
15838	Under Other Repair (Closure) Procedures on the Integumentary System	$8,477
15839	Under Other Repair (Closure) Procedures on the Integumentary System	$11,644
15840	Under Other Repair (Closure) Procedures on the Integumentary System	$13,252
15841	Under Other Repair (Closure) Procedures on the Integumentary System	$23,781
15842	Under Other Repair (Closure) Procedures on the Integumentary System	$36,274
15845	Under Other Repair (Closure) Procedures on the Integumentary System	$13,115
15847	Under Other Repair (Closure) Procedures on the Integumentary System	$ -
15851	Under Other Repair (Closure) Procedures on the Integumentary System	$1,291
15852	Under Other Repair (Closure) Procedures on the Integumentary System	$622
15860	Under Other Repair (Closure) Procedures on the Integumentary System	$1,457
15920	Under Other Repair (Closure) Procedures on the Integumentary System	$8,145
15922	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$10,388
15931	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$9,304
15933	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$11,356
15934	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$12,582
15935	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$14,635
15936	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$11,947
15937	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$13,841
15940	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$9,378
15941	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$12,043
15944	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$11,865
15945	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$13,140
15946	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$21,856
15950	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$7,975
15951	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$11,672
15952	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$12,026
15953	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$13,231
15956	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$15,430
15958	Under Pressure Ulcers (Decubitus Ulcers) Procedures	$15,745

Procedure Code	Modifier	Fee
16000	Under Local Treatment Procedures for Burns	$899
16020	Under Local Treatment Procedures for Burns	$1,078
16025	Under Local Treatment Procedures for Burns	$1,944
16030	Under Local Treatment Procedures for Burns	$2,467
16035	Under Local Treatment Procedures for Burns	$2,591
16036	Under Local Treatment Procedures for Burns	$1,105
17000	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$861
17003	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$70
17004	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$1,886
17106	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$4,505
17107	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$5,759
17108	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$8,484
17110	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$1,453
17111	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$1,721
17250	Under Destruction Procedures on Benign or Premalignant Lesions of the Integumentary System	$1,048
17260	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$1,250
17261	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$1,886
17262	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$2,294
17263	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$2,502
17264	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$2,687
17266	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$3,034
17270	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$1,979
17271	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$2,139
17272	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$2,443
17273	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$2,713
17274	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$3,211
17276	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$3,720
17280	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$1,850
17281	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$2,335

Procedure Code	Modifier	Fee
17282	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$2,672
17283	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$3,204
17284	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$3,671
17286	Under Destruction Procedures on Malignant Lesions of the Integumentary System	$4,689
17311	Under Mohs Micrographic Surgery Procedures	$8,647
17312	Under Mohs Micrographic Surgery Procedures	$5,084
17313	Under Mohs Micrographic Surgery Procedures	$8,084
17314	Under Mohs Micrographic Surgery Procedures	$4,854
17315	Under Mohs Micrographic Surgery Procedures	$1,049
17340	Under Other Procedures on the Integumentary System	$688
17360	Under Other Procedures on the Integumentary System	$1,679
19000	Under Incision Procedures on the Breast	$1,464
19001	Under Incision Procedures on the Breast	$353
19020	Under Incision Procedures on the Breast	$6,284
19030	Under Incision Procedures on the Breast	$2,131
19081	Under Incision Procedures on the Breast	$8,947
19082	Under Incision Procedures on the Breast	$7,384
19083	Under Incision Procedures on the Breast	$8,698
19084	Under Incision Procedures on the Breast	$7,084
19085	Under Incision Procedures on the Breast	$12,973
19086	Under Incision Procedures on the Breast	$10,513
19100	Under Incision Procedures on the Breast	$1,991
19101	Under Incision Procedures on the Breast	$4,531
19105	Under Incision Procedures on the Breast	$38,426
19110	Under Incision Procedures on the Breast	$6,484
19112	Under Incision Procedures on the Breast	$6,115
19120	Under Incision Procedures on the Breast	$6,636
19125	Under Incision Procedures on the Breast	$7,357
19126	Under Incision Procedures on the Breast	$2,223
19281	Under Introduction Procedures on the Breast	$3,109
19282	Under Introduction Procedures on the Breast	$2,157
19283	Under Introduction Procedures on the Breast	$3,520
19284	Under Introduction Procedures on the Breast	$2,653
19285	Under Introduction Procedures on the Breast	$6,706
19286	Under Introduction Procedures on the Breast	$5,867
19287	Under Introduction Procedures on the Breast	$11,115
19288	Under Introduction Procedures on the Breast	$8,980
19294	Under Introduction Procedures on the Breast	$2,214
19296	Under Introduction Procedures on the Breast	$51,590
19297	Under Introduction Procedures on the Breast	$1,302
19298	Under Introduction Procedures on the Breast	$13,023
19300	Under Mastectomy Procedures	$7,008

Procedure Code	Modifier	Fee
19301	Under Mastectomy Procedures	$8,868
19302	Under Mastectomy Procedures	$12,237
19303	Under Mastectomy Procedures	$13,062
19305	Under Mastectomy Procedures	$15,364
19306	Under Mastectomy Procedures	$16,345
19307	Under Mastectomy Procedures	$16,282
19316	Under Repair and/or Reconstruction Procedures on the Breast	$10,292
19318	Under Repair and/or Reconstruction Procedures on the Breast	$14,694
19324	Under Repair and/or Reconstruction Procedures on the Breast	$7,053
19325	Under Repair and/or Reconstruction Procedures on the Breast	$8,540
19328	Under Repair and/or Reconstruction Procedures on the Breast	$6,604
19330	Under Repair and/or Reconstruction Procedures on the Breast	$8,458
19340	Under Repair and/or Reconstruction Procedures on the Breast	$13,366
19342	Under Repair and/or Reconstruction Procedures on the Breast	$12,286
19350	Under Repair and/or Reconstruction Procedures on the Breast	$10,891
19355	Under Repair and/or Reconstruction Procedures on the Breast	$9,962
19357	Under Repair and/or Reconstruction Procedures on the Breast	$20,024
19361	Under Repair and/or Reconstruction Procedures on the Breast	$21,043
19364	Under Repair and/or Reconstruction Procedures on the Breast	$36,895
19366	Under Repair and/or Reconstruction Procedures on the Breast	$18,963
19367	Under Repair and/or Reconstruction Procedures on the Breast	$23,956
19368	Under Repair and/or Reconstruction Procedures on the Breast	$29,445
19369	Under Repair and/or Reconstruction Procedures on the Breast	$27,325
19370	Under Repair and/or Reconstruction Procedures on the Breast	$9,146
19371	Under Repair and/or Reconstruction Procedures on the Breast	$10,445
19380	Under Repair and/or Reconstruction Procedures on the Breast	$10,306
19396	Under Repair and/or Reconstruction Procedures on the Breast	$3,828
20100	Under Wound Exploration-Trauma (eg, Penetrating Gunshot, Stab Wound) Procedures on the Musculoskeletal System	$8,218
20101	Under Wound Exploration-Trauma (eg, Penetrating Gunshot, Stab Wound) Procedures on the Musculoskeletal System	$5,984
20102	Under Wound Exploration-Trauma (eg, Penetrating Gunshot, Stab Wound) Procedures on the Musculoskeletal System	$6,490
20103	Under Wound Exploration-Trauma (eg, Penetrating Gunshot, Stab Wound) Procedures on the Musculoskeletal System	$7,710
20150	Under General Excision Procedures on the Musculoskeletal System	$13,630
20200	Under General Excision Procedures on the Musculoskeletal System	$2,731
20205	Under General Excision Procedures on the Musculoskeletal System	$3,859
20206	Under General Excision Procedures on the Musculoskeletal System	$3,051
20220	Under General Excision Procedures on the Musculoskeletal System	$2,170
20225	Under General Excision Procedures on the Musculoskeletal System	$6,723
20240	Under General Excision Procedures on the Musculoskeletal System	$2,022
20245	Under General Excision Procedures on the Musculoskeletal System	$4,731
20250	Under General Excision Procedures on the Musculoskeletal System	$5,301
20251	Under General Excision Procedures on the Musculoskeletal System	$5,820
20500	Under General Introduction or Removal Procedures on the Musculoskeletal System	$1,369

Procedure Code	Modifier	Fee
20501	Under General Introduction or Removal Procedures on the Musculoskeletal System	$1,525
20520	Under General Introduction or Removal Procedures on the Musculoskeletal System	$2,683
20525	Under General Introduction or Removal Procedures on the Musculoskeletal System	$6,297
20526	Under General Introduction or Removal Procedures on the Musculoskeletal System	$1,023
20527	Under General Introduction or Removal Procedures on the Musculoskeletal System	$1,117
20550	Under General Introduction or Removal Procedures on the Musculoskeletal System	$693
20551	Under General Introduction or Removal Procedures on the Musculoskeletal System	$790
20552	Under General Introduction or Removal Procedures on the Musculoskeletal System	$717
20553	Under General Introduction or Removal Procedures on the Musculoskeletal System	$827
20555	Under General Introduction or Removal Procedures on the Musculoskeletal System	$4,303
20600	Under General Introduction or Removal Procedures on the Musculoskeletal System	$626
20604	Under General Introduction or Removal Procedures on the Musculoskeletal System	$938
20605	Under General Introduction or Removal Procedures on the Musculoskeletal System	$660
20606	Under General Introduction or Removal Procedures on the Musculoskeletal System	$1,045
20610	Under General Introduction or Removal Procedures on the Musculoskeletal System	$794
20611	Under General Introduction or Removal Procedures on the Musculoskeletal System	$1,186
20612	Under General Introduction or Removal Procedures on the Musculoskeletal System	$789
20615	Under General Introduction or Removal Procedures on the Musculoskeletal System	$3,147
20650	Under General Introduction or Removal Procedures on the Musculoskeletal System	$2,780
20660	Under General Introduction or Removal Procedures on the Musculoskeletal System	$3,444
20661	Under General Introduction or Removal Procedures on the Musculoskeletal System	$6,894
20662	Under General Introduction or Removal Procedures on the Musculoskeletal System	$6,864
20663	Under General Introduction or Removal Procedures on the Musculoskeletal System	$6,291
20664	Under General Introduction or Removal Procedures on the Musculoskeletal System	$12,213
20665	Under General Introduction or Removal Procedures on the Musculoskeletal System	$1,393
20670	Under General Introduction or Removal Procedures on the Musculoskeletal System	$4,943

Procedure Code	Modifier	Fee
20680	Under General Introduction or Removal Procedures on the Musculoskeletal System	$8,148
20690	Under General Introduction or Removal Procedures on the Musculoskeletal System	$8,008
20692	Under General Introduction or Removal Procedures on the Musculoskeletal System	$14,946
20693	Under General Introduction or Removal Procedures on the Musculoskeletal System	$5,901
20694	Under General Introduction or Removal Procedures on the Musculoskeletal System	$5,636
20696	Under General Introduction or Removal Procedures on the Musculoskeletal System	$16,170
20697	Under General Introduction or Removal Procedures on the Musculoskeletal System	$27,505
20802	Under General Replantation Procedures on the Musculoskeletal System	$37,344
20805	Under General Replantation Procedures on the Musculoskeletal System	$44,489
20808	Under General Replantation Procedures on the Musculoskeletal System	$53,788
20816	Under General Replantation Procedures on the Musculoskeletal System	$27,990
20822	Under General Replantation Procedures on the Musculoskeletal System	$24,030
20824	Under General Replantation Procedures on the Musculoskeletal System	$28,035
20827	Under General Replantation Procedures on the Musculoskeletal System	$24,666
20838	Under General Replantation Procedures on the Musculoskeletal System	$34,369
20900	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$5,469
20902	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$3,854
20910	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$6,259
20912	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$6,240
20920	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$5,231
20922	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$7,888
20924	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$6,775
20931	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$1,586
20937	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$2,340
20938	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$2,605
20939	Under General Grafts (or Implants) Procedures on the Musculoskeletal System	$902
20950	Under Other Procedures on the Musculoskeletal System	$3,266
20955	Under Other Procedures on the Musculoskeletal System	$33,132
20956	Under Other Procedures on the Musculoskeletal System	$35,922
20957	Under Other Procedures on the Musculoskeletal System	$37,340
20962	Under Other Procedures on the Musculoskeletal System	$36,090
20969	Under Other Procedures on the Musculoskeletal System	$36,583
20970	Under Other Procedures on the Musculoskeletal System	$38,851
20972	Under Other Procedures on the Musculoskeletal System	$38,782
20973	Under Other Procedures on the Musculoskeletal System	$40,939
20974	Under Other Procedures on the Musculoskeletal System	$1,020
20975	Under Other Procedures on the Musculoskeletal System	$2,448
20979	Under Other Procedures on the Musculoskeletal System	$675
20982	Under Other Procedures on the Musculoskeletal System	$50,693
20983	Under Other Procedures on the Musculoskeletal System	$77,653

Procedure Code	Modifier	Fee
20985	Under Other Procedures on the Musculoskeletal System	$2,001
21010	Under Incision Procedures on the Head	$10,184
21011	Under Excision Procedures on the Head	$4,571
21012	Under Excision Procedures on the Head	$4,550
21013	Under Excision Procedures on the Head	$6,858
21014	Under Excision Procedures on the Head	$6,991
21015	Under Excision Procedures on the Head	$9,456
21016	Under Excision Procedures on the Head	$13,574
21025	Under Excision Procedures on the Head	$11,744
21026	Under Excision Procedures on the Head	$8,110
21029	Under Excision Procedures on the Head	$10,170
21030	Under Excision Procedures on the Head	$6,848
21031	Under Excision Procedures on the Head	$5,245
21032	Under Excision Procedures on the Head	$5,285
21034	Under Excision Procedures on the Head	$17,237
21040	Under Excision Procedures on the Head	$6,893
21044	Under Excision Procedures on the Head	$11,540
21045	Under Excision Procedures on the Head	$16,221
21046	Under Excision Procedures on the Head	$14,842
21047	Under Excision Procedures on the Head	$17,460
21048	Under Excision Procedures on the Head	$15,130
21049	Under Excision Procedures on the Head	$15,857
21050	Under Excision Procedures on the Head	$12,014
21060	Under Excision Procedures on the Head	$10,925
21070	Under Excision Procedures on the Head	$8,557
21073	Under Manipulation Procedures of Head	$5,080
21076	Under Head Prosthesis Preparation	$13,089
21077	Under Head Prosthesis Preparation	$32,970
21079	Under Head Prosthesis Preparation	$22,242
21080	Under Head Prosthesis Preparation	$25,042
21081	Under Head Prosthesis Preparation	$23,030
21082	Under Head Prosthesis Preparation	$21,676
21083	Under Head Prosthesis Preparation	$20,650
21084	Under Head Prosthesis Preparation	$23,697
21085	Under Head Prosthesis Preparation	$9,939
21086	Under Head Prosthesis Preparation	$24,463
21087	Under Head Prosthesis Preparation	$24,499
21100	Under Introduction Procedures on the Head	$9,483
21110	Under Introduction Procedures on the Head	$10,497
21116	Under Introduction Procedures on the Head	$2,144
21120	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$9,048
21121	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$10,160
21122	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$10,556
21123	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$12,237
21125	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$38,599

Procedure Code	Modifier	Fee
21127	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$49,352
21137	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$10,041
21138	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$12,276
21139	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$15,031
21141	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$18,194
21142	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$18,708
21143	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$19,625
21145	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$21,373
21146	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$22,284
21147	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$23,492
21150	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$21,960
21151	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$23,541
21154	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$25,988
21155	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$28,831
21159	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$34,555
21160	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$37,472
21172	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$29,367
21175	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$29,602
21179	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$20,320
21180	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$22,775
21181	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$9,883
21182	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$28,475
21183	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$31,035
21184	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$33,426
21188	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$22,526
21193	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$17,095
21194	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$19,582
21195	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$19,151
21196	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$19,701
21198	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$15,539
21199	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$14,444
21206	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$15,986
21208	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$23,223
21209	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$11,688
21210	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$29,227
21215	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$50,810
21230	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$9,853
21235	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$9,487
21240	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$14,953
21242	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$13,873
21243	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$22,862
21244	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$14,014
21245	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$15,967
21246	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$11,786
21247	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$21,930

Procedure Code	Modifier	Fee
21248	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$14,613
21249	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$20,644
21255	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$18,990
21256	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$16,640
21260	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$18,792
21261	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$33,270
21263	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$30,768
21267	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$21,993
21268	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$27,526
21270	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$13,483
21275	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$11,182
21280	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$7,441
21282	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$5,004
21295	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$2,439
21296	Under Repair, Revision, and/or Reconstruction Procedures on the Head	$5,427
21310	Under Fracture and/or Dislocation Procedures on the Head	$1,767
21315	Under Fracture and/or Dislocation Procedures on the Head	$3,562
21320	Under Fracture and/or Dislocation Procedures on the Head	$3,299
21325	Under Fracture and/or Dislocation Procedures on the Head	$6,151
21330	Under Fracture and/or Dislocation Procedures on the Head	$7,429
21335	Under Fracture and/or Dislocation Procedures on the Head	$9,459
21336	Under Fracture and/or Dislocation Procedures on the Head	$8,422
21337	Under Fracture and/or Dislocation Procedures on the Head	$5,268
21338	Under Fracture and/or Dislocation Procedures on the Head	$8,624
21339	Under Fracture and/or Dislocation Procedures on the Head	$9,804
21340	Under Fracture and/or Dislocation Procedures on the Head	$9,752
21343	Under Fracture and/or Dislocation Procedures on the Head	$14,101
21344	Under Fracture and/or Dislocation Procedures on the Head	$18,142
21345	Under Fracture and/or Dislocation Procedures on the Head	$10,102
21346	Under Fracture and/or Dislocation Procedures on the Head	$11,738
21347	Under Fracture and/or Dislocation Procedures on the Head	$13,209
21348	Under Fracture and/or Dislocation Procedures on the Head	$14,162
21355	Under Fracture and/or Dislocation Procedures on the Head	$5,529
21356	Under Fracture and/or Dislocation Procedures on the Head	$6,581
21360	Under Fracture and/or Dislocation Procedures on the Head	$7,094
21365	Under Fracture and/or Dislocation Procedures on the Head	$14,797
21366	Under Fracture and/or Dislocation Procedures on the Head	$17,056
21385	Under Fracture and/or Dislocation Procedures on the Head	$10,175
21386	Under Fracture and/or Dislocation Procedures on the Head	$9,302
21387	Under Fracture and/or Dislocation Procedures on the Head	$10,612
21390	Under Fracture and/or Dislocation Procedures on the Head	$10,504
21395	Under Fracture and/or Dislocation Procedures on the Head	$13,488
21400	Under Fracture and/or Dislocation Procedures on the Head	$2,531
21401	Under Fracture and/or Dislocation Procedures on the Head	$6,822
21406	Under Fracture and/or Dislocation Procedures on the Head	$7,650

Procedure Code	Modifier	Fee
21407	Under Fracture and/or Dislocation Procedures on the Head	$8,496
21408	Under Fracture and/or Dislocation Procedures on the Head	$12,030
21421	Under Fracture and/or Dislocation Procedures on the Head	$9,730
21422	Under Fracture and/or Dislocation Procedures on the Head	$8,937
21423	Under Fracture and/or Dislocation Procedures on the Head	$10,490
21431	Under Fracture and/or Dislocation Procedures on the Head	$9,540
21432	Under Fracture and/or Dislocation Procedures on the Head	$9,574
21433	Under Fracture and/or Dislocation Procedures on the Head	$23,307
21435	Under Fracture and/or Dislocation Procedures on the Head	$18,783
21436	Under Fracture and/or Dislocation Procedures on the Head	$27,347
21440	Under Fracture and/or Dislocation Procedures on the Head	$7,612
21445	Under Fracture and/or Dislocation Procedures on the Head	$10,219
21450	Under Fracture and/or Dislocation Procedures on the Head	$7,424
21451	Under Fracture and/or Dislocation Procedures on the Head	$9,874
21452	Under Fracture and/or Dislocation Procedures on the Head	$8,367
21453	Under Fracture and/or Dislocation Procedures on the Head	$11,999
21454	Under Fracture and/or Dislocation Procedures on the Head	$7,522
21461	Under Fracture and/or Dislocation Procedures on the Head	$27,944
21462	Under Fracture and/or Dislocation Procedures on the Head	$29,830
21465	Under Fracture and/or Dislocation Procedures on the Head	$12,419
21470	Under Fracture and/or Dislocation Procedures on the Head	$16,045
21480	Under Fracture and/or Dislocation Procedures on the Head	$1,291
21485	Under Fracture and/or Dislocation Procedures on the Head	$10,208
21490	Under Fracture and/or Dislocation Procedures on the Head	$12,256
21497	Under Fracture and/or Dislocation Procedures on the Head	$8,832
21501	Under Incision Procedures on the Neck (Soft Tissues) and Thorax	$5,983
21502	Under Incision Procedures on the Neck (Soft Tissues) and Thorax	$6,846
21510	Under Incision Procedures on the Neck (Soft Tissues) and Thorax	$5,989
21550	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$3,426
21552	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$6,052
21554	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$9,879
21555	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$5,506
21556	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$7,058
21557	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$12,825
21558	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$18,147
21600	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$7,438
21610	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$17,086
21615	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$8,402
21616	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$9,796
21620	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$6,816
21627	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$7,268
21630	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$16,568
21632	Under Excision Procedures on the Neck (Soft Tissues) and Thorax	$16,485
21685	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$12,975

Procedure Code	Modifier	Fee
21700	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$4,929
21705	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$7,380
21720	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$7,317
21725	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$7,276
21740	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$14,153
21742	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$ -
21750	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$9,320
21811	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$8,168
21812	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$9,950
21813	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$13,642
21820	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$1,879
21825	Under Repair, Revision, and/or Reconstruction Procedures on the Neck (Soft Tissues) and Thorax	$7,295
21920	Under Excision Procedures on the Back and Flank	$3,367
21925	Under Excision Procedures on the Back and Flank	$5,981
21930	Under Excision Procedures on the Back and Flank	$6,309
21931	Under Excision Procedures on the Back and Flank	$6,383
21932	Under Excision Procedures on the Back and Flank	$8,979
21933	Under Excision Procedures on the Back and Flank	$10,017
21935	Under Excision Procedures on the Back and Flank	$13,920
21936	Under Excision Procedures on the Back and Flank	$19,276
22010	Under Incision Procedures on the Spine (Vertebral Column)	$13,077
22015	Under Incision Procedures on the Spine (Vertebral Column)	$12,957
22100	Under Excision Procedures on the Spine (Vertebral Column)	$12,729
22101	Under Excision Procedures on the Spine (Vertebral Column)	$12,648
22102	Under Excision Procedures on the Spine (Vertebral Column)	$10,742
22103	Under Excision Procedures on the Spine (Vertebral Column)	$1,958
22110	Under Excision Procedures on the Spine (Vertebral Column)	$14,436
22112	Under Excision Procedures on the Spine (Vertebral Column)	$15,856
22114	Under Excision Procedures on the Spine (Vertebral Column)	$15,856
22116	Under Excision Procedures on the Spine (Vertebral Column)	$1,992
22206	Under Osteotomy Procedures on the Spine (Vertebral Column)	$33,876
22207	Under Osteotomy Procedures on the Spine (Vertebral Column)	$33,270
22208	Under Osteotomy Procedures on the Spine (Vertebral Column)	$8,370
22210	Under Osteotomy Procedures on the Spine (Vertebral Column)	$24,906
22212	Under Osteotomy Procedures on the Spine (Vertebral Column)	$20,439
22214	Under Osteotomy Procedures on the Spine (Vertebral Column)	$20,502
22216	Under Osteotomy Procedures on the Spine (Vertebral Column)	$5,072

Procedure Code	Modifier	Fee
22220	Under Osteotomy Procedures on the Spine (Vertebral Column)	$22,141
22222	Under Osteotomy Procedures on the Spine (Vertebral Column)	$24,805
22224	Under Osteotomy Procedures on the Spine (Vertebral Column)	$21,686
22226	Under Osteotomy Procedures on the Spine (Vertebral Column)	$5,070
22310	Under Fracture and/or Dislocation Procedures on the Spine (Vertebral Column)	$4,145
22315	Under Fracture and/or Dislocation Procedures on the Spine (Vertebral Column)	$11,924
22318	Under Fracture and/or Dislocation Procedures on the Spine (Vertebral Column)	$23,110
22319	Under Fracture and/or Dislocation Procedures on the Spine (Vertebral Column)	$26,124
22325	Under Fracture and/or Dislocation Procedures on the Spine (Vertebral Column)	$19,957
22326	Under Fracture and/or Dislocation Procedures on the Spine (Vertebral Column)	$20,895
22327	Under Fracture and/or Dislocation Procedures on the Spine (Vertebral Column)	$20,881
22328	Under Fracture and/or Dislocation Procedures on the Spine (Vertebral Column)	$3,988
22505	Under Manipulation Procedures on the Spine (Vertebral Column)	$1,779
22510	Under Percutaneous Vertebroplasty and Vertebral Augmentation Procedures	$21,890
22511	Under Percutaneous Vertebroplasty and Vertebral Augmentation Procedures	$21,608
22512	Under Percutaneous Vertebroplasty and Vertebral Augmentation Procedures	$12,414
22513	Under Percutaneous Vertebroplasty and Vertebral Augmentation Procedures	$92,789
22514	Under Percutaneous Vertebroplasty and Vertebral Augmentation Procedures	$92,339
22515	Under Percutaneous Vertebroplasty and Vertebral Augmentation Procedures	$55,891
22532	Under Lateral Extracavitary Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$24,975
22533	Under Lateral Extracavitary Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$22,743
22534	Under Lateral Extracavitary Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$5,039
22548	Under Anterior or Anterolateral Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$28,038
22551	Under Anterior or Anterolateral Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$23,902
22552	Under Anterior or Anterolateral Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$5,623
22554	Under Anterior or Anterolateral Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$17,410
22556	Under Anterior or Anterolateral Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$23,161
22558	Under Anterior or Anterolateral Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$21,141
22585	Under Anterior or Anterolateral Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$4,589
22586	Under Anterior or Anterolateral Approach Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$28,525
22590	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$22,171
22595	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$21,145
22600	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$17,972
22610	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$17,543

Procedure Code	Modifier	Fee
22612	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$21,934
22614	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$5,497
22630	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$22,037
22632	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$4,568
22633	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$25,765
22634	Under Posterior, Posterolateral or Lateral Transverse Process Technique Arthrodesis Procedures on the Spine (Vertebral Column)	$6,978
22800	Under Arthrodesis Procedures for Spine Deformity (eg, Scoliosis, Kyphosis)	$18,562
22802	Under Arthrodesis Procedures for Spine Deformity (eg, Scoliosis, Kyphosis)	$28,993
22804	Under Arthrodesis Procedures for Spine Deformity (eg, Scoliosis, Kyphosis)	$33,423
22808	Under Arthrodesis Procedures for Spine Deformity (eg, Scoliosis, Kyphosis)	$25,830
22810	Under Arthrodesis Procedures for Spine Deformity (eg, Scoliosis, Kyphosis)	$26,862
22812	Under Arthrodesis Procedures for Spine Deformity (eg, Scoliosis, Kyphosis)	$30,036
22818	Under Arthrodesis Procedures for Spine Deformity (eg, Scoliosis, Kyphosis)	$29,531
22819	Under Arthrodesis Procedures for Spine Deformity (eg, Scoliosis, Kyphosis)	$33,944
22830	Under Exploration Procedures on the Spine (Vertebral Column)	$11,210
22840	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$10,679
22842	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$10,728
22843	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$11,472
22844	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$13,767
22845	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$10,308
22846	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$10,694
22847	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$11,070
22848	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$5,017
22849	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$17,982
22850	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$9,958
22852	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$9,549
22853	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$3,459
22854	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$4,475
22855	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$15,383
22856	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$22,810
22857	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$23,290
22858	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$7,185
22859	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$4,475
22861	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$33,373
22862	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$33,175
22864	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$29,753
22865	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$27,972
22867	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$12,705
22868	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$3,273
22869	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$7,227
22870	Under Spinal Instrumentation Procedures on the Spine (Vertebral Column)	$1,874

Procedure Code	Modifier	Fee
22900	Under Excision Procedures on the Abdomen	$7,657
22901	Under Excision Procedures on the Abdomen	$9,060
22902	Under Excision Procedures on the Abdomen	$5,855
22903	Under Excision Procedures on the Abdomen	$5,969
22904	Under Excision Procedures on the Abdomen	$14,278
22905	Under Excision Procedures on the Abdomen	$18,160
23000	Under Incision Procedures on the Shoulder	$7,681
23020	Under Incision Procedures on the Shoulder	$9,247
23030	Under Incision Procedures on the Shoulder	$5,914
23031	Under Incision Procedures on the Shoulder	$5,505
23035	Under Incision Procedures on the Shoulder	$9,117
23040	Under Incision Procedures on the Shoulder	$9,619
23044	Under Incision Procedures on the Shoulder	$7,615
23065	Under Excision Procedures on the Shoulder	$2,868
23066	Under Excision Procedures on the Shoulder	$7,396
23071	Under Excision Procedures on the Shoulder	$5,691
23073	Under Excision Procedures on the Shoulder	$9,397
23075	Under Excision Procedures on the Shoulder	$6,269
23076	Under Excision Procedures on the Shoulder	$7,287
23077	Under Excision Procedures on the Shoulder	$15,473
23078	Under Excision Procedures on the Shoulder	$19,504
23100	Under Excision Procedures on the Shoulder	$6,725
23101	Under Excision Procedures on the Shoulder	$6,123
23105	Under Excision Procedures on the Shoulder	$8,562
23106	Under Excision Procedures on the Shoulder	$6,663
23107	Under Excision Procedures on the Shoulder	$8,868
23120	Under Excision Procedures on the Shoulder	$7,822
23125	Under Excision Procedures on the Shoulder	$9,544
23130	Under Excision Procedures on the Shoulder	$8,178
23140	Under Excision Procedures on the Shoulder	$7,179
23145	Under Excision Procedures on the Shoulder	$9,344
23146	Under Excision Procedures on the Shoulder	$8,345
23150	Under Excision Procedures on the Shoulder	$8,915
23155	Under Excision Procedures on the Shoulder	$10,677
23156	Under Excision Procedures on the Shoulder	$9,109
23170	Under Excision Procedures on the Shoulder	$7,532
23172	Under Excision Procedures on the Shoulder	$7,605
23174	Under Excision Procedures on the Shoulder	$10,188
23180	Under Excision Procedures on the Shoulder	$8,799
23182	Under Excision Procedures on the Shoulder	$8,805
23184	Under Excision Procedures on the Shoulder	$9,783
23190	Under Excision Procedures on the Shoulder	$7,682
23195	Under Excision Procedures on the Shoulder	$10,173
23200	Under Excision Procedures on the Shoulder	$20,524
23210	Under Excision Procedures on the Shoulder	$24,131

Procedure Code	Modifier	Fee
23220	Under Excision Procedures on the Shoulder	$26,515
23330	Under Introduction or Removal Procedures on the Shoulder	$3,610
23333	Under Introduction or Removal Procedures on the Shoulder	$6,216
23334	Under Introduction or Removal Procedures on the Shoulder	$14,500
23335	Under Introduction or Removal Procedures on the Shoulder	$17,270
23350	Under Introduction or Removal Procedures on the Shoulder	$1,684
23395	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$17,230
23397	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$15,338
23400	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$13,097
23405	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$8,291
23406	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$10,318
23410	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$11,028
23412	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$11,443
23415	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$9,352
23420	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$13,029
23430	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$9,966
23440	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$10,116
23450	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$12,800
23455	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$13,407
23460	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$14,718
23462	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$14,374
23465	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$15,104
23466	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$15,169
23470	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$16,147
23472	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$19,623
23473	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$21,912
23474	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$23,664
23480	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$11,065
23485	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$12,790
23490	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$11,624
23491	Under Repair, Revision, and/or Reconstruction Procedures on the Shoulder	$13,686
23500	Under Fracture and/or Dislocation Procedures on the Shoulder	$2,892
23505	Under Fracture and/or Dislocation Procedures on the Shoulder	$4,681
23515	Under Fracture and/or Dislocation Procedures on the Shoulder	$9,646
23520	Under Fracture and/or Dislocation Procedures on the Shoulder	$3,090
23525	Under Fracture and/or Dislocation Procedures on the Shoulder	$5,132
23530	Under Fracture and/or Dislocation Procedures on the Shoulder	$7,686
23532	Under Fracture and/or Dislocation Procedures on the Shoulder	$8,388
23540	Under Fracture and/or Dislocation Procedures on the Shoulder	$2,975
23545	Under Fracture and/or Dislocation Procedures on the Shoulder	$4,514
23550	Under Fracture and/or Dislocation Procedures on the Shoulder	$7,514
23552	Under Fracture and/or Dislocation Procedures on the Shoulder	$8,763
23570	Under Fracture and/or Dislocation Procedures on the Shoulder	$3,087
23575	Under Fracture and/or Dislocation Procedures on the Shoulder	$5,357
23585	Under Fracture and/or Dislocation Procedures on the Shoulder	$13,168

Procedure Code	Modifier	Fee
23600	Under Fracture and/or Dislocation Procedures on the Shoulder	$4,322
23605	Under Fracture and/or Dislocation Procedures on the Shoulder	$6,148
23615	Under Fracture and/or Dislocation Procedures on the Shoulder	$11,881
23616	Under Fracture and/or Dislocation Procedures on the Shoulder	$16,698
23620	Under Fracture and/or Dislocation Procedures on the Shoulder	$3,567
23625	Under Fracture and/or Dislocation Procedures on the Shoulder	$5,017
23630	Under Fracture and/or Dislocation Procedures on the Shoulder	$10,449
23650	Under Fracture and/or Dislocation Procedures on the Shoulder	$4,153
23655	Under Fracture and/or Dislocation Procedures on the Shoulder	$5,351
23660	Under Fracture and/or Dislocation Procedures on the Shoulder	$7,808
23665	Under Fracture and/or Dislocation Procedures on the Shoulder	$5,644
23670	Under Fracture and/or Dislocation Procedures on the Shoulder	$11,738
23675	Under Fracture and/or Dislocation Procedures on the Shoulder	$7,286
23680	Under Fracture and/or Dislocation Procedures on the Shoulder	$12,489
23700	Under Manipulation Procedures on the Shoulder	$2,634
23800	Under Arthrodesis Procedures on the Shoulder	$13,837
23802	Under Arthrodesis Procedures on the Shoulder	$17,344
23900	Under Amputation Procedures on the Shoulder	$18,783
23920	Under Amputation Procedures on the Shoulder	$15,230
23921	Under Amputation Procedures on the Shoulder	$6,273
23930	Under Incision Procedures on the Humerus (Upper Arm) and Elbow	$4,752
23931	Under Incision Procedures on the Humerus (Upper Arm) and Elbow	$3,802
23935	Under Incision Procedures on the Humerus (Upper Arm) and Elbow	$6,745
24000	Under Incision Procedures on the Humerus (Upper Arm) and Elbow	$6,373
24006	Under Incision Procedures on the Humerus (Upper Arm) and Elbow	$9,511
24065	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$3,374
24066	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$8,236
24071	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$5,504
24073	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$9,378
24075	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$6,519
24076	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$7,326
24077	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$14,043
24079	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$18,020
24100	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$5,595
24101	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$6,669
24102	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$8,233
24105	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$4,675
24110	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$7,871
24115	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$9,923
24116	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$11,620
24120	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$7,088
24125	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$8,337
24126	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$8,727
24130	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$6,798
24134	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$10,060

Procedure Code	Modifier	Fee
24136	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$8,479
24138	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$9,055
24140	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$9,414
24145	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$7,955
24147	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$8,341
24149	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$15,749
24150	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$21,077
24152	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$18,288
24155	Under Excision Procedures on the Humerus (Upper Arm) and Elbow	$11,509
24160	Under Introduction or Removal Procedures on the Humerus (Upper Arm) and Elbow	$17,000
24164	Under Introduction or Removal Procedures on the Humerus (Upper Arm) and Elbow	$9,776
24200	Under Introduction or Removal Procedures on the Humerus (Upper Arm) and Elbow	$2,727
24201	Under Introduction or Removal Procedures on the Humerus (Upper Arm) and Elbow	$7,315
24220	Under Introduction or Removal Procedures on the Humerus (Upper Arm) and Elbow	$2,037
24300	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm)	$5,520
24301	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$10,068
24305	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$7,691
24310	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$6,234
24320	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$10,517
24330	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$9,661
24331	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$10,593
24332	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$8,225
24340	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$8,200
24341	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$9,964
24342	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$10,393
24343	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$9,443
24344	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$14,826
24345	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$9,397
24346	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$14,803
24357	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$5,559
24358	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$6,985

Procedure Code	Modifier	Fee
24359	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$8,835
24360	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$12,125
24361	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$13,575
24362	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$14,312
24363	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$19,608
24365	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$8,600
24366	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$9,109
24370	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$20,782
24371	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$24,348
24400	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$11,002
24410	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$14,257
24420	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$13,398
24430	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$14,189
24435	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$14,433
24470	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$9,019
24495	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$9,871
24498	Under Repair, Revision, and/or Reconstruction Procedures on the Humerus (Upper Arm) and Elbow	$11,662
24500	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$4,749
24505	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$6,589
24515	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$11,762
24516	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$11,553
24530	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$5,045
24535	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$8,222
24538	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$9,989
24545	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$12,496
24546	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$13,969
24560	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$4,243

Procedure Code	Modifier	Fee
24565	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$7,120
24566	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$9,617
24575	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$9,839
24576	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$4,501
24577	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$7,341
24579	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$11,209
24582	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$10,846
24586	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$14,577
24587	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$14,748
24600	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$4,825
24605	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$6,277
24615	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$9,557
24620	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$7,342
24635	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$9,025
24640	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$1,286
24650	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$3,461
24655	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$5,800
24665	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$8,740
24666	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$9,813
24670	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$3,849
24675	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$6,031
24685	Under Fracture and/or Dislocation Procedures on the Humerus (Upper Arm) and Elbow	$8,756
24800	Under Arthrodesis Procedures on the Humerus (Upper Arm) and Elbow	$11,175
24802	Under Arthrodesis Procedures on the Humerus (Upper Arm) and Elbow	$13,509
24900	Under Amputation Procedures on the Humerus (Upper Arm) and Elbow	$9,956
24920	Under Amputation Procedures on the Humerus (Upper Arm) and Elbow	$9,859
24925	Under Amputation Procedures on the Humerus (Upper Arm) and Elbow	$7,524
24930	Under Amputation Procedures on the Humerus (Upper Arm) and Elbow	$10,432
24931	Under Amputation Procedures on the Humerus (Upper Arm) and Elbow	$12,589
24935	Under Amputation Procedures on the Humerus (Upper Arm) and Elbow	$15,544

Procedure Code	Modifier	Fee
24940	Under Amputation Procedures on the Humerus (Upper Arm) and Elbow	$ -
25000	Under Incision Procedures on the Forearm and Wrist	$4,480
25001	Under Incision Procedures on the Forearm and Wrist	$4,573
25020	Under Incision Procedures on the Forearm and Wrist	$7,627
25023	Under Incision Procedures on the Forearm and Wrist	$14,814
25024	Under Incision Procedures on the Forearm and Wrist	$10,399
25025	Under Incision Procedures on the Forearm and Wrist	$16,378
25028	Under Incision Procedures on the Forearm and Wrist	$7,001
25031	Under Incision Procedures on the Forearm and Wrist	$4,715
25035	Under Incision Procedures on the Forearm and Wrist	$7,824
25040	Under Incision Procedures on the Forearm and Wrist	$7,516
25065	Under Incision Procedures on the Forearm and Wrist	$3,328
25066	Under Incision Procedures on the Forearm and Wrist	$4,786
25071	Under Incision Procedures on the Forearm and Wrist	$5,739
25073	Under Excision Procedures on the Forearm and Wrist	$7,161
25075	Under Excision Procedures on the Forearm and Wrist	$6,338
25076	Under Excision Procedures on the Forearm and Wrist	$6,935
25077	Under Excision Procedures on the Forearm and Wrist	$11,940
25078	Under Excision Procedures on the Forearm and Wrist	$15,769
25085	Under Excision Procedures on the Forearm and Wrist	$5,993
25100	Under Excision Procedures on the Forearm and Wrist	$4,620
25101	Under Excision Procedures on the Forearm and Wrist	$5,370
25105	Under Excision Procedures on the Forearm and Wrist	$6,420
25107	Under Excision Procedures on the Forearm and Wrist	$8,226
25109	Under Excision Procedures on the Forearm and Wrist	$7,180
25110	Under Excision Procedures on the Forearm and Wrist	$4,542
25111	Under Excision Procedures on the Forearm and Wrist	$4,266
25112	Under Excision Procedures on the Forearm and Wrist	$5,160
25115	Under Excision Procedures on the Forearm and Wrist	$10,146
25116	Under Excision Procedures on the Forearm and Wrist	$8,004
25118	Under Excision Procedures on the Forearm and Wrist	$5,077
25119	Under Excision Procedures on the Forearm and Wrist	$6,693
25120	Under Excision Procedures on the Forearm and Wrist	$6,620
25125	Under Excision Procedures on the Forearm and Wrist	$7,955
25126	Under Excision Procedures on the Forearm and Wrist	$8,011
25130	Under Excision Procedures on the Forearm and Wrist	$5,943
25135	Under Excision Procedures on the Forearm and Wrist	$7,498
25136	Under Excision Procedures on the Forearm and Wrist	$6,612
25145	Under Excision Procedures on the Forearm and Wrist	$6,936
25150	Under Excision Procedures on the Forearm and Wrist	$7,615
25151	Under Excision Procedures on the Forearm and Wrist	$7,781
25170	Under Excision Procedures on the Forearm and Wrist	$20,013
25210	Under Excision Procedures on the Forearm and Wrist	$6,484
25215	Under Excision Procedures on the Forearm and Wrist	$8,247
25230	Under Excision Procedures on the Forearm and Wrist	$5,774

Procedure Code	Modifier	Fee
25240	Under Excision Procedures on the Forearm and Wrist	$5,702
25246	Under Introduction or Removal Procedures on the Forearm and Wrist	$2,091
25248	Under Introduction or Removal Procedures on the Forearm and Wrist	$5,517
25250	Under Introduction or Removal Procedures on the Forearm and Wrist	$7,114
25251	Under Introduction or Removal Procedures on the Forearm and Wrist	$9,681
25259	Under Introduction or Removal Procedures on the Forearm and Wrist	$5,520
25260	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$8,408
25263	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$8,416
25265	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,162
25270	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$6,531
25272	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$7,478
25274	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,037
25275	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$8,961
25280	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$7,516
25290	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$5,818
25295	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$7,004
25300	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,256
25301	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$8,602
25310	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$8,273
25312	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,594
25315	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,371
25316	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$12,305
25320	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$13,179
25332	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$11,272
25335	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$12,706
25337	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$11,939
25350	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,015
25355	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,308
25360	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$8,746

Procedure Code	Modifier	Fee
25365	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$12,320
25370	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$13,545
25375	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$12,837
25390	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,288
25391	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$13,419
25392	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$13,665
25393	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$15,260
25394	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,554
25400	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,769
25405	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$13,899
25415	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$13,035
25420	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$15,762
25425	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$12,968
25426	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$15,171
25430	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,827
25431	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,624
25440	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,291
25441	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$12,618
25442	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,760
25443	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$10,508
25444	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$11,125
25445	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,665
25446	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$15,721
25447	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$11,071
25449	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$13,821
25450	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$8,270

Procedure Code	Modifier	Fee
25455	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,745
25490	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,669
25491	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$9,945
25492	Under Repair, Revision, and/or Reconstruction Procedures on the Forearm and Wrist	$12,180
25500	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$3,614
25505	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$6,578
25515	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$8,959
25520	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$7,594
25525	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$10,513
25526	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$12,855
25530	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$3,476
25535	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$6,447
25545	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$8,308
25560	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$3,676
25565	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$6,847
25574	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$9,018
25575	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$12,081
25600	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$4,343
25605	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$7,194
25606	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$8,879
25607	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$9,826
25608	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$11,040
25609	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$14,030
25622	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$4,038
25624	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$6,374
25628	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$9,613
25630	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$4,047
25635	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$6,075
25645	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$7,640
25650	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$4,223
25651	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$6,451
25652	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$8,335
25660	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$5,528
25670	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$8,064
25671	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$7,115
25675	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$5,720
25676	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$8,419
25680	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$6,970
25685	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$9,894
25690	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$6,432
25695	Under Fracture and/or Dislocation Procedures on the Forearm and Wrist	$8,509
25800	Under Arthrodesis Procedures on the Forearm and Wrist	$9,793

Procedure Code	Modifier	Fee
25805	Under Arthrodesis Procedures on the Forearm and Wrist	$11,371
25810	Under Arthrodesis Procedures on the Forearm and Wrist	$11,598
25820	Under Arthrodesis Procedures on the Forearm and Wrist	$8,214
25825	Under Arthrodesis Procedures on the Forearm and Wrist	$10,115
25830	Under Arthrodesis Procedures on the Forearm and Wrist	$12,739
25900	Under Amputation Procedures on the Forearm and Wrist	$9,459
25905	Under Amputation Procedures on the Forearm and Wrist	$9,427
25907	Under Amputation Procedures on the Forearm and Wrist	$8,231
25909	Under Amputation Procedures on the Forearm and Wrist	$9,200
25915	Under Amputation Procedures on the Forearm and Wrist	$15,827
25920	Under Amputation Procedures on the Forearm and Wrist	$9,342
25922	Under Amputation Procedures on the Forearm and Wrist	$8,197
25924	Under Amputation Procedures on the Forearm and Wrist	$9,133
25927	Under Amputation Procedures on the Forearm and Wrist	$10,831
25929	Under Amputation Procedures on the Forearm and Wrist	$8,009
25931	Under Amputation Procedures on the Forearm and Wrist	$9,949
26010	Under Incision Procedures on the Hand and Fingers	$3,469
26011	Under Incision Procedures on the Hand and Fingers	$5,127
26020	Under Incision Procedures on the Hand and Fingers	$5,770
26025	Under Incision Procedures on the Hand and Fingers	$5,620
26030	Under Incision Procedures on the Hand and Fingers	$6,584
26034	Under Incision Procedures on the Hand and Fingers	$7,231
26035	Under Incision Procedures on the Hand and Fingers	$11,533
26037	Under Incision Procedures on the Hand and Fingers	$7,565
26040	Under Incision Procedures on the Hand and Fingers	$4,140
26045	Under Incision Procedures on the Hand and Fingers	$6,239
26055	Under Incision Procedures on the Hand and Fingers	$7,334
26060	Under Incision Procedures on the Hand and Fingers	$3,453
26070	Under Incision Procedures on the Hand and Fingers	$4,240
26075	Under Incision Procedures on the Hand and Fingers	$4,425
26080	Under Incision Procedures on the Hand and Fingers	$5,194
26100	Under Excision Procedures on the Hand and Fingers	$4,481
26105	Under Excision Procedures on the Hand and Fingers	$4,508
26110	Under Excision Procedures on the Hand and Fingers	$4,275
26111	Under Excision Procedures on the Hand and Fingers	$5,590
26113	Under Excision Procedures on the Hand and Fingers	$7,335
26115	Under Excision Procedures on the Hand and Fingers	$6,650
26116	Under Excision Procedures on the Hand and Fingers	$7,045
26117	Under Excision Procedures on the Hand and Fingers	$9,990
26118	Under Excision Procedures on the Hand and Fingers	$14,137
26121	Under Excision Procedures on the Hand and Fingers	$7,991
26123	Under Excision Procedures on the Hand and Fingers	$11,144
26125	Under Excision Procedures on the Hand and Fingers	$3,699
26130	Under Excision Procedures on the Hand and Fingers	$6,160
26135	Under Excision Procedures on the Hand and Fingers	$7,355

Procedure Code	Modifier	Fee
26140	Under Excision Procedures on the Hand and Fingers	$6,714
26145	Under Excision Procedures on the Hand and Fingers	$6,838
26160	Under Excision Procedures on the Hand and Fingers	$7,557
26170	Under Excision Procedures on the Hand and Fingers	$5,408
26180	Under Excision Procedures on the Hand and Fingers	$5,895
26185	Under Excision Procedures on the Hand and Fingers	$7,376
26200	Under Excision Procedures on the Hand and Fingers	$5,986
26205	Under Excision Procedures on the Hand and Fingers	$8,080
26210	Under Excision Procedures on the Hand and Fingers	$5,888
26215	Under Excision Procedures on the Hand and Fingers	$7,561
26230	Under Excision Procedures on the Hand and Fingers	$6,664
26235	Under Excision Procedures on the Hand and Fingers	$6,566
26236	Under Excision Procedures on the Hand and Fingers	$5,879
26250	Under Excision Procedures on the Hand and Fingers	$14,448
26260	Under Excision Procedures on the Hand and Fingers	$10,825
26262	Under Excision Procedures on the Hand and Fingers	$8,523
26320	Under Introduction or Removal Procedures on the Hand and Fingers	$4,612
26340	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$4,402
26341	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$1,312
26350	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,307
26352	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,758
26356	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,563
26357	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,895
26358	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$13,182
26370	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,909
26372	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,667
26373	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,190
26390	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,056
26392	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$12,874
26410	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,385
26412	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,003
26415	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,738
26416	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,690
26418	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,527

Procedure Code	Modifier	Fee
26420	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,414
26426	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$6,676
26428	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,962
26432	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$6,512
26433	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$6,936
26434	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,527
26437	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,156
26440	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,087
26442	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$12,652
26445	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,521
26449	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,159
26450	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$5,326
26455	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$5,278
26460	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$5,159
26471	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,063
26474	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,899
26476	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,786
26477	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,590
26478	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,082
26479	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,239
26480	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,824
26483	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,038
26485	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,547
26489	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$12,355
26490	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,513
26492	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,669

Procedure Code	Modifier	Fee
26494	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,567
26496	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,476
26497	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,447
26498	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$15,174
26499	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,961
26500	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,158
26502	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,361
26508	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,235
26510	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,771
26516	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,169
26517	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,890
26518	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,046
26520	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,478
26525	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,507
26530	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,176
26531	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,325
26535	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$5,657
26536	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,282
26540	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,603
26541	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,522
26542	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,874
26545	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,217
26546	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$13,049
26548	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$9,979
26550	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$21,939
26551	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$44,345

Procedure Code	Modifier	Fee
26553	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$44,046
26554	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$51,407
26555	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$18,238
26556	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$45,749
26560	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,767
26561	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$12,525
26562	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$17,851
26565	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,994
26567	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$8,921
26568	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$11,874
26580	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$20,165
26587	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$13,987
26590	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$18,772
26591	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$5,691
26593	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$7,841
26596	Under Repair, Revision, and/or Reconstruction Procedures on the Hand and Fingers	$10,116
26600	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$3,883
26605	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$4,251
26607	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$6,130
26608	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$6,323
26615	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$7,686
26641	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$5,100
26645	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$5,705
26650	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$6,331
26665	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$8,364
26670	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$4,511
26675	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$6,061
26676	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$6,662
26685	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$7,688
26686	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$8,368
26700	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$4,266
26705	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$5,475
26706	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$5,841
26715	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$7,639

Procedure Code	Modifier	Fee
26720	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$2,610
26725	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$4,445
26727	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$6,241
26735	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$7,956
26740	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$3,047
26742	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$4,901
26746	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$9,915
26750	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$2,425
26755	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$4,145
26756	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$5,519
26765	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$6,660
26770	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$3,631
26775	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$5,039
26776	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$5,890
26785	Under Fracture and/or Dislocation Procedures on the Hand and Fingers	$7,289
26820	Under Arthrodesis Procedures on the Hand and Fingers	$10,396
26841	Under Arthrodesis Procedures on the Hand and Fingers	$9,498
26842	Under Arthrodesis Procedures on the Hand and Fingers	$10,255
26843	Under Arthrodesis Procedures on the Hand and Fingers	$9,736
26844	Under Arthrodesis Procedures on the Hand and Fingers	$10,817
26850	Under Arthrodesis Procedures on the Hand and Fingers	$9,050
26852	Under Arthrodesis Procedures on the Hand and Fingers	$10,433
26860	Under Arthrodesis Procedures on the Hand and Fingers	$7,380
26861	Under Arthrodesis Procedures on the Hand and Fingers	$1,391
26862	Under Arthrodesis Procedures on the Hand and Fingers	$9,517
26863	Under Arthrodesis Procedures on the Hand and Fingers	$3,126
26910	Under Amputation Procedures on the Hand and Fingers	$9,514
26951	Under Amputation Procedures on the Hand and Fingers	$8,544
26952	Under Amputation Procedures on the Hand and Fingers	$8,442
26990	Under Incision Procedures on the Pelvis and Hip Joint	$8,418
26991	Under Incision Procedures on the Pelvis and Hip Joint	$9,410
26992	Under Incision Procedures on the Pelvis and Hip Joint	$12,849
27000	Under Incision Procedures on the Pelvis and Hip Joint	$5,440
27001	Under Incision Procedures on the Pelvis and Hip Joint	$7,220
27003	Under Incision Procedures on the Pelvis and Hip Joint	$8,005
27005	Under Incision Procedures on the Pelvis and Hip Joint	$9,682
27006	Under Incision Procedures on the Pelvis and Hip Joint	$9,759
27025	Under Incision Procedures on the Pelvis and Hip Joint	$12,345
27027	Under Incision Procedures on the Pelvis and Hip Joint	$11,797
27030	Under Incision Procedures on the Pelvis and Hip Joint	$12,597
27033	Under Incision Procedures on the Pelvis and Hip Joint	$13,052
27035	Under Incision Procedures on the Pelvis and Hip Joint	$14,828
27036	Under Incision Procedures on the Pelvis and Hip Joint	$13,597
27040	Under Excision Procedures on the Pelvis and Hip Joint	$4,538
27041	Under Excision Procedures on the Pelvis and Hip Joint	$9,318

Procedure Code	Modifier	Fee
27043	Under Excision Procedures on the Pelvis and Hip Joint	$6,373
27045	Under Excision Procedures on the Pelvis and Hip Joint	$10,084
27047	Under Excision Procedures on the Pelvis and Hip Joint	$6,211
27048	Under Excision Procedures on the Pelvis and Hip Joint	$8,245
27049	Under Excision Procedures on the Pelvis and Hip Joint	$18,211
27050	Under Excision Procedures on the Pelvis and Hip Joint	$5,381
27052	Under Excision Procedures on the Pelvis and Hip Joint	$7,781
27054	Under Excision Procedures on the Pelvis and Hip Joint	$9,178
27057	Under Excision Procedures on the Pelvis and Hip Joint	$13,701
27059	Under Excision Procedures on the Pelvis and Hip Joint	$24,721
27060	Under Excision Procedures on the Pelvis and Hip Joint	$6,245
27062	Under Excision Procedures on the Pelvis and Hip Joint	$6,106
27065	Under Excision Procedures on the Pelvis and Hip Joint	$6,966
27066	Under Excision Procedures on the Pelvis and Hip Joint	$10,818
27067	Under Excision Procedures on the Pelvis and Hip Joint	$13,946
27070	Under Excision Procedures on the Pelvis and Hip Joint	$11,330
27071	Under Excision Procedures on the Pelvis and Hip Joint	$12,307
27075	Under Excision Procedures on the Pelvis and Hip Joint	$28,500
27076	Under Excision Procedures on the Pelvis and Hip Joint	$34,534
27077	Under Excision Procedures on the Pelvis and Hip Joint	$38,520
27078	Under Excision Procedures on the Pelvis and Hip Joint	$28,103
27080	Under Excision Procedures on the Pelvis and Hip Joint	$6,926
27086	Under Introduction or Removal Procedures on the Pelvis and Hip Joint	$3,921
27087	Under Introduction or Removal Procedures on the Pelvis and Hip Joint	$8,192
27090	Under Introduction or Removal Procedures on the Pelvis and Hip Joint	$11,152
27091	Under Introduction or Removal Procedures on the Pelvis and Hip Joint	$21,551
27093	Under Introduction or Removal Procedures on the Pelvis and Hip Joint	$2,431
27095	Under Introduction or Removal Procedures on the Pelvis and Hip Joint	$3,200
27096	Under Introduction or Removal Procedures on the Pelvis and Hip Joint	$2,059
27097	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$9,162
27098	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$9,323
27100	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$11,122
27105	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$11,676
27110	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$13,067
27111	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$12,122
27120	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$17,580
27122	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$14,820
27125	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$15,291
27130	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$18,304

Procedure Code	Modifier	Fee
27132	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$22,609
27134	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$25,899
27137	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$19,888
27138	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$20,669
27140	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$12,010
27146	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$17,318
27147	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$19,904
27151	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$21,568
27156	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$23,261
27158	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$18,981
27161	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$16,331
27165	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$18,457
27170	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$15,858
27175	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$8,978
27176	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$12,375
27177	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$15,053
27178	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$12,375
27179	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$13,172
27181	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$15,177
27185	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$9,661
27187	Under Repair, Revision, and/or Reconstruction Procedures on the Pelvis and Hip Joint	$13,343
27197	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$1,604
27198	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$4,021
27200	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$2,418
27202	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$7,173
27220	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$7,117
27222	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$13,079
27226	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$14,191
27227	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$22,442
27228	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$25,479

Procedure Code	Modifier	Fee
27230	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$6,356
27232	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$10,001
27235	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$12,253
27236	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$16,122
27238	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$6,150
27240	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$12,906
27244	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$16,604
27245	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$16,604
27246	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$5,150
27248	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$9,999
27250	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$2,412
27252	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$10,176
27253	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$12,635
27254	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$17,161
27256	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$4,027
27257	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$4,917
27258	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$14,999
27259	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$21,024
27265	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$5,292
27266	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$7,796
27267	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$5,773
27268	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$7,243
27269	Under Fracture and/or Dislocation Procedures on the Pelvis and Hip Joint	$16,788
27275	Under Manipulation Procedures on the Pelvis and Hip Joint	$2,446
27279	Under Arthrodesis Procedures on the Pelvis and Hip Joint	$9,479
27280	Under Arthrodesis Procedures on the Pelvis and Hip Joint	$18,642
27282	Under Arthrodesis Procedures on the Pelvis and Hip Joint	$11,525
27284	Under Arthrodesis Procedures on the Pelvis and Hip Joint	$21,959
27286	Under Arthrodesis Procedures on the Pelvis and Hip Joint	$22,402
27290	Under Amputation Procedures on the Pelvis and Hip Joint	$22,003
27295	Under Amputation Procedures on the Pelvis and Hip Joint	$17,128
27301	Under Incision Procedures on the Femur (Thigh Region) and Knee Joint	$8,983
27303	Under Incision Procedures on the Femur (Thigh Region) and Knee Joint	$8,571
27305	Under Incision Procedures on the Femur (Thigh Region) and Knee Joint	$6,392
27306	Under Incision Procedures on the Femur (Thigh Region) and Knee Joint	$4,585
27307	Under Incision Procedures on the Femur (Thigh Region) and Knee Joint	$5,736
27310	Under Incision Procedures on the Femur (Thigh Region) and Knee Joint	$9,810
27323	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$3,592
27324	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$5,399
27325	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$7,485
27326	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$6,897
27327	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$6,095
27328	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$8,404
27329	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$14,061
27330	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$5,560

Procedure Code	Modifier	Fee
27331	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$6,340
27332	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$8,644
27333	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$7,862
27334	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$9,171
27335	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$10,227
27337	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$5,670
27339	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$10,191
27340	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$4,964
27345	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$6,425
27347	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$7,081
27350	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$8,732
27355	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$8,083
27356	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$9,944
27357	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$10,957
27358	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$3,798
27360	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$11,420
27364	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$21,239
27365	Under Excision Procedures on the Femur (Thigh Region) and Knee Joint	$27,954
27370	Deleted Codes	$2,010
27372	Under Introduction or Removal Procedures on the Femur (Thigh Region) and Knee Joint	$7,876
27380	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) a	$7,933
27381	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$10,697
27385	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$7,673
27386	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$11,113
27390	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$6,017
27391	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$7,690
27392	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,585
27393	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$6,824
27394	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$8,553
27395	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$11,829
27396	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$8,273
27397	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$12,353
27400	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,332
27403	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$8,566
27405	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,042

Procedure Code	Modifier	Fee
27407	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$10,668
27409	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$13,014
27412	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$22,395
27415	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$18,415
27416	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$13,235
27418	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$11,063
27420	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,964
27422	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,963
27424	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$10,068
27425	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$5,998
27427	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,505
27428	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$15,059
27429	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$16,748
27430	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,912
27435	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$10,827
27437	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$8,887
27438	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$11,264
27440	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$10,756
27441	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$11,111
27442	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$11,673
27443	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$10,952
27445	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$16,888
27446	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$15,629
27447	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$18,284
27448	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$10,373
27450	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$13,497

Procedure Code	Modifier	Fee
27454	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$17,577
27455	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$12,700
27457	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$12,830
27465	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$16,333
27466	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$15,994
27468	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$18,164
27470	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$15,836
27472	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$17,016
27475	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$8,896
27477	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,868
27479	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$12,413
27485	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,013
27486	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$18,967
27487	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$23,743
27488	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$16,186
27495	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$15,168
27496	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$7,302
27497	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$7,837
27498	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$8,811
27499	Under Repair, Revision, and/or Reconstruction Procedures on the Femur (Thigh Region) and Knee Joint	$9,418
27500	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joi	$6,926
27501	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$6,759
27502	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$10,174
27503	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$10,773
27506	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$18,041
27507	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$13,106
27508	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$6,992

Procedure Code	Modifier	Fee
27509	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$8,588
27510	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$9,148
27511	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$13,446
27513	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$16,757
27514	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$13,035
27516	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$6,783
27517	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$9,209
27519	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$12,052
27520	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$4,281
27524	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$10,094
27530	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$4,009
27532	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$8,229
27535	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$12,090
27536	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$16,033
27538	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$6,309
27540	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$10,841
27550	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$6,814
27552	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$8,348
27556	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$11,850
27557	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$14,189
27558	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$16,192
27560	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$4,817
27562	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$6,484
27566	Under Fracture and/or Dislocation Procedures on the Femur (Thigh Region) and Knee Joint	$12,067
27570	Under Manipulation Procedures on the Femur (Thigh Region) and Knee Joint	$2,015
27580	Under Arthrodesis Procedures on the Femur (Thigh Region) and Knee Joint	$19,359
27590	Under Amputation Procedures on the Femur (Thigh Region) and Knee Joint	$10,902
27591	Under Amputation Procedures on the Femur (Thigh Region) and Knee Joint	$13,048

Procedure Code	Modifier	Fee
27592	Under Amputation Procedures on the Femur (Thigh Region) and Knee Joint	$9,265
27594	Under Amputation Procedures on the Femur (Thigh Region) and Knee Joint	$6,832
27596	Under Amputation Procedures on the Femur (Thigh Region) and Knee Joint	$9,793
27598	Under Amputation Procedures on the Femur (Thigh Region) and Knee Joint	$9,715
27600	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,455
27601	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,005
27602	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,616
27603	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,018
27604	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,306
27605	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,523
27606	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$3,733
27607	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,119
27610	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,684
27612	Under Incision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,444
27613	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$3,329
27614	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,685
27615	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$13,851
27616	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$17,206
27618	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,975
27619	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,183
27620	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,952
27625	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,714
27626	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,023
27630	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,375
27632	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,587
27634	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,177
27635	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,833
27637	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$10,290
27638	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$10,422
27640	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$11,153
27641	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,887
27645	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$24,131
27646	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$20,923
27647	Under Excision Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$13,289
27648	Under Injection Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$2,185
27650	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) a	$8,741
27652	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,962
27654	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,393
27656	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,434
27658	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,913
27659	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,269

Procedure Code	Modifier	Fee
27664	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,798
27665	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,473
27675	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,475
27676	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,068
27680	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,671
27681	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,351
27685	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,754
27686	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,353
27687	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,002
27690	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,415
27691	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,948
27692	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$1,407
27695	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,317
27696	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,397
27698	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,531
27700	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,520
27702	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$12,866
27703	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$14,833
27704	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,622
27705	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$10,243
27707	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,310
27709	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$15,727
27712	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$14,933
27715	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$14,465
27720	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$11,716
27722	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$12,005

Procedure Code	Modifier	Fee
27724	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$17,068
27725	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$16,476
27726	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$12,930
27727	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$13,996
27730	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,879
27732	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,001
27734	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,828
27740	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,522
27742	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$10,479
27745	Under Repair, Revision, and/or Reconstruction Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$10,146
27750	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joi	$4,595
27752	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,133
27756	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,764
27758	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$11,983
27759	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$13,450
27760	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,403
27762	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,220
27766	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,129
27767	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$3,716
27768	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,893
27769	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,832
27780	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,055
27781	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,687
27784	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,542
27786	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,165
27788	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,575
27792	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,703

Procedure Code	Modifier	Fee
27808	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,417
27810	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,173
27814	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$10,334
27816	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,253
27818	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,411
27822	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$11,487
27823	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$13,022
27824	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,166
27825	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,289
27826	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$11,292
27827	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$14,733
27828	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$17,632
27829	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,293
27830	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,096
27831	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$5,358
27832	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$10,179
27840	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$4,902
27842	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$6,593
27846	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,614
27848	Under Fracture and/or Dislocation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$10,705
27860	Under Manipulation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$2,324
27870	Under Arthrodesis Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$13,781
27871	Under Arthrodesis Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,158
27880	Under Amputation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$12,487
27881	Under Amputation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$11,735
27882	Under Amputation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,175
27884	Under Amputation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,766
27886	Under Amputation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,930
27888	Under Amputation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$9,109
27889	Under Amputation Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,856
27892	Under Other Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$7,514

Procedure Code	Modifier	Fee
27893	Under Other Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$8,194
27894	Under Other Procedures on the Leg (Tibia and Fibula) and Ankle Joint	$11,332
28001	Under Incision Procedures on the Foot and Toes	$3,610
28002	Under Incision Procedures on the Foot and Toes	$5,777
28003	Under Incision Procedures on the Foot and Toes	$9,180
28005	Under Incision Procedures on the Foot and Toes	$7,537
28008	Under Incision Procedures on the Foot and Toes	$5,678
28010	Under Incision Procedures on the Foot and Toes	$3,026
28011	Under Incision Procedures on the Foot and Toes	$4,185
28020	Under Incision Procedures on the Foot and Toes	$7,169
28022	Under Incision Procedures on the Foot and Toes	$6,385
28024	Under Incision Procedures on the Foot and Toes	$6,046
28035	Under Incision Procedures on the Foot and Toes	$6,982
28039	Under Excision Procedures on the Foot and Toes	$6,667
28041	Under Excision Procedures on the Foot and Toes	$6,012
28043	Under Excision Procedures on the Foot and Toes	$5,274
28045	Under Excision Procedures on the Foot and Toes	$6,535
28046	Under Excision Procedures on the Foot and Toes	$9,636
28047	Under Excision Procedures on the Foot and Toes	$14,022
28050	Under Excision Procedures on the Foot and Toes	$5,553
28052	Under Excision Procedures on the Foot and Toes	$5,970
28054	Under Excision Procedures on the Foot and Toes	$4,923
28055	Under Excision Procedures on the Foot and Toes	$4,967
28060	Under Excision Procedures on the Foot and Toes	$6,838
28062	Under Excision Procedures on the Foot and Toes	$7,698
28070	Under Excision Procedures on the Foot and Toes	$7,152
28072	Under Excision Procedures on the Foot and Toes	$6,660
28080	Under Excision Procedures on the Foot and Toes	$6,910
28086	Under Excision Procedures on the Foot and Toes	$7,235
28088	Under Excision Procedures on the Foot and Toes	$5,933
28090	Under Excision Procedures on the Foot and Toes	$6,204
28092	Under Excision Procedures on the Foot and Toes	$5,587
28100	Under Excision Procedures on the Foot and Toes	$8,120
28102	Under Excision Procedures on the Foot and Toes	$8,153
28103	Under Excision Procedures on the Foot and Toes	$5,092
28104	Under Excision Procedures on the Foot and Toes	$6,988
28106	Under Excision Procedures on the Foot and Toes	$5,571
28107	Under Excision Procedures on the Foot and Toes	$6,755
28108	Under Excision Procedures on the Foot and Toes	$5,795
28110	Under Excision Procedures on the Foot and Toes	$6,122
28111	Under Excision Procedures on the Foot and Toes	$6,486
28112	Under Excision Procedures on the Foot and Toes	$6,453
28113	Under Excision Procedures on the Foot and Toes	$7,768
28114	Under Excision Procedures on the Foot and Toes	$14,221
28116	Under Excision Procedures on the Foot and Toes	$10,203

Procedure Code	Modifier	Fee
28118	Under Excision Procedures on the Foot and Toes	$7,894
28119	Under Excision Procedures on the Foot and Toes	$6,901
28120	Under Excision Procedures on the Foot and Toes	$8,960
28122	Under Excision Procedures on the Foot and Toes	$7,898
28124	Under Excision Procedures on the Foot and Toes	$6,273
28126	Under Excision Procedures on the Foot and Toes	$5,215
28130	Under Excision Procedures on the Foot and Toes	$9,801
28140	Under Excision Procedures on the Foot and Toes	$7,904
28150	Under Excision Procedures on the Foot and Toes	$5,585
28153	Under Excision Procedures on the Foot and Toes	$5,437
28160	Under Excision Procedures on the Foot and Toes	$5,497
28171	Under Excision Procedures on the Foot and Toes	$15,097
28173	Under Excision Procedures on the Foot and Toes	$9,810
28175	Under Excision Procedures on the Foot and Toes	$6,207
28190	Under Removal of Foreign Body Procedures on the Foot and Toes	$3,400
28192	Under Removal of Foreign Body Procedures on the Foot and Toes	$6,166
28193	Under Removal of Foreign Body Procedures on the Foot and Toes	$6,981
28200	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,516
28202	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$7,888
28208	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,341
28210	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$7,791
28220	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$5,923
28222	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,709
28225	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$5,453
28226	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$8,173
28230	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$5,721
28232	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$5,088
28234	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$5,355
28238	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$8,839
28240	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,080
28250	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$7,704
28260	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$9,073
28261	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$13,474
28262	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$19,850
28264	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$13,565
28270	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,508
28272	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$5,157
28280	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,821
28285	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$7,054
28286	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$5,929
28288	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$7,983
28289	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$9,831
28291	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$9,536
28292	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$9,907
28295	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$12,380

Procedure Code	Modifier	Fee
28296	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$11,984
28297	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$13,803
28298	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$11,254
28299	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$13,269
28300	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$8,663
28302	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$9,637
28304	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$10,981
28305	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$8,835
28306	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$8,149
28307	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$8,936
28308	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$7,493
28309	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$11,882
28310	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$7,210
28312	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,679
28313	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,910
28315	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,368
28320	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$8,088
28322	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$10,488
28340	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$7,578
28341	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$8,781
28344	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$5,917
28345	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$6,839
28360	Under Repair, Revision, and/or Reconstruction Procedures on the Foot and Toes	$14,625
28400	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$3,291
28405	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$5,158
28406	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$6,924
28415	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$14,939
28420	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$17,060
28430	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$3,108
28435	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$4,827
28436	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$6,019
28445	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$14,113
28446	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$16,542
28450	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,832
28455	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$3,780
28456	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$4,259
28465	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$8,397
28470	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,891
28475	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$3,350
28476	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$4,638
28485	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$7,156
28490	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$1,926
28495	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,337
28496	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$6,069
28505	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$8,826

Procedure Code	Modifier	Fee
28510	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$1,630
28515	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,126
28525	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$7,513
28530	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$1,527
28531	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$4,499
28540	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,503
28545	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$3,966
28546	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$7,701
28555	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$11,571
28570	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$3,005
28575	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$4,890
28576	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$5,309
28585	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$11,374
28600	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,867
28605	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$4,383
28606	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$5,350
28615	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$10,724
28630	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,069
28635	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,336
28636	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$4,352
28645	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$8,615
28660	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$1,533
28665	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,047
28666	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$2,336
28675	Under Fracture and/or Dislocation Procedures on the Foot and Toes	$7,622
28705	Under Arthrodesis Procedures on the Foot and Toes	$16,651
28715	Under Arthrodesis Procedures on the Foot and Toes	$12,545
28725	Under Arthrodesis Procedures on the Foot and Toes	$10,386
28730	Under Arthrodesis Procedures on the Foot and Toes	$9,792
28735	Under Arthrodesis Procedures on the Foot and Toes	$10,386
28737	Under Arthrodesis Procedures on the Foot and Toes	$9,198
28740	Under Arthrodesis Procedures on the Foot and Toes	$11,218
28750	Under Arthrodesis Procedures on the Foot and Toes	$10,704
28755	Under Arthrodesis Procedures on the Foot and Toes	$6,734
28760	Under Arthrodesis Procedures on the Foot and Toes	$10,506
28800	Under Amputation Procedures on the Foot and Toes	$7,104
28805	Under Amputation Procedures on the Foot and Toes	$9,696
28810	Under Amputation Procedures on the Foot and Toes	$5,749
28820	Under Amputation Procedures on the Foot and Toes	$7,461
28825	Under Amputation Procedures on the Foot and Toes	$7,129
28890	Under Other Procedures on the Foot and Toes	$4,293
29000	Under Body and Upper Extremity Application of Casts	$4,732
29010	Under Body and Upper Extremity Application of Casts	$3,640
29015	Under Body and Upper Extremity Application of Casts	$3,918
29035	Under Body and Upper Extremity Application of Casts	$3,399

Procedure Code	Modifier	Fee
29040	Under Body and Upper Extremity Application of Casts	$3,903
29044	Under Body and Upper Extremity Application of Casts	$3,824
29046	Under Body and Upper Extremity Application of Casts	$4,195
29049	Under Body and Upper Extremity Application of Casts	$1,319
29055	Under Body and Upper Extremity Application of Casts	$2,962
29058	Under Body and Upper Extremity Application of Casts	$1,657
29065	Under Body and Upper Extremity Application of Casts	$1,272
29075	Under Body and Upper Extremity Application of Casts	$1,147
29085	Under Body and Upper Extremity Application of Casts	$1,261
29086	Under Body and Upper Extremity Application of Casts	$1,048
29105	Under Body and Upper Extremity Application of Splints	$1,159
29125	Under Body and Upper Extremity Application of Splints	$852
29126	Under Body and Upper Extremity Application of Splints	$1,010
29130	Under Body and Upper Extremity Application of Splints	$547
29131	Under Body and Upper Extremity Application of Splints	$690
29200	Under Body and Upper Extremity Application of Strapping-Any Age	$402
29240	Under Body and Upper Extremity Application of Strapping-Any Age	$388
29260	Under Body and Upper Extremity Application of Strapping-Any Age	$386
29280	Under Body and Upper Extremity Application of Strapping-Any Age	$390
29305	Under Lower Extremity Application of Casts	$3,291
29325	Under Lower Extremity Application of Casts	$3,651
29345	Under Lower Extremity Application of Casts	$1,803
29355	Under Lower Extremity Application of Casts	$1,857
29358	Under Lower Extremity Application of Casts	$2,139
29365	Under Lower Extremity Application of Casts	$1,632
29405	Under Lower Extremity Application of Casts	$1,071
29425	Under Lower Extremity Application of Casts	$1,026
29435	Under Lower Extremity Application of Casts	$1,566
29440	Under Lower Extremity Application of Casts	$567
29445	Under Lower Extremity Application of Casts	$1,712
29450	Under Lower Extremity Application of Casts	$1,906
29505	Under Lower Extremity Application of Casts	$1,117
29515	Under Lower Extremity Application of Splints	$943
29520	Under Lower Extremity Application of Strapping-Any Age	$425
29530	Under Lower Extremity Application of Strapping-Any Age	$384
29540	Under Lower Extremity Application of Strapping-Any Age	$340
29550	Under Lower Extremity Application of Strapping-Any Age	$245
29580	Under Lower Extremity Application of Strapping-Any Age	$801
29581	Under Lower Extremity Application of Strapping-Any Age	$1,094
29584	Under Lower Extremity Application of Strapping-Any Age	$1,019
29700	Under Removal or Repair of Casts and Strapping	$853
29705	Under Removal or Repair of Casts and Strapping	$879
29710	Under Removal or Repair of Casts and Strapping	$1,654
29720	Under Removal or Repair of Casts and Strapping	$1,133
29730	Under Removal or Repair of Casts and Strapping	$833

Procedure Code	Modifier	Fee
29740	Under Removal or Repair of Casts and Strapping	$1,331
29750	Under Removal or Repair of Casts and Strapping	$1,444
29800	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,103
29804	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,563
29805	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,335
29806	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$14,295
29807	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$13,964
29819	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,851
29820	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,129
29821	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,807
29822	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,572
29823	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,246
29824	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,886
29825	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,686
29826	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$2,387
29827	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$14,076
29828	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$12,159
29830	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,135
29834	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,485
29835	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,837
29836	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,834
29837	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,992
29838	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,877
29840	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,071
29843	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,519
29844	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,616
29845	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,679
29846	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,956
29847	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,323
29848	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,849
29850	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,402
29851	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$12,589
29855	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$10,520
29856	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$13,460
29860	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,988
29861	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$9,659
29862	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$10,755
29863	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$10,750
29866	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$14,168
29867	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$17,297
29868	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$22,681
29870	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,669
29871	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,922
29873	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,045
29874	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,199

Procedure Code	Modifier	Fee
29875	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,656
29876	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,847
29877	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,341
29879	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,900
29880	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,552
29881	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,266
29882	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$9,413
29883	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$11,359
29884	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,206
29885	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$10,160
29886	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,587
29887	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$10,111
29888	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$13,246
29889	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$16,530
29891	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,939
29892	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$9,210
29893	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,010
29894	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,516
29895	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,223
29897	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,689
29898	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,475
29899	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$13,864
29900	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$6,649
29901	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,174
29902	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,624
29904	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$8,604
29905	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$7,164
29906	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$9,366
29907	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$11,830
29914	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$13,121
29915	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$13,440
29916	Under Endoscopy/Arthroscopy Procedures on the Musculoskeletal System	$13,526
30000	Under Incision Procedures on the Nose	$2,955
30020	Under Incision Procedures on the Nose	$2,980
30100	Under Excision Procedures on the Nose	$1,799
30110	Under Excision Procedures on the Nose	$2,953
30115	Under Excision Procedures on the Nose	$5,557
30117	Under Excision Procedures on the Nose	$11,194
30118	Under Excision Procedures on the Nose	$9,994
30120	Under Excision Procedures on the Nose	$6,795
30124	Under Excision Procedures on the Nose	$3,671
30125	Under Excision Procedures on the Nose	$7,820
30130	Under Excision Procedures on the Nose	$4,901
30140	Under Excision Procedures on the Nose	$3,593
30150	Under Excision Procedures on the Nose	$9,972

Procedure Code	Modifier	Fee
30160	Under Excision Procedures on the Nose	$9,977
30200	Under Introduction Procedures on the Nose	$1,442
30210	Under Introduction Procedures on the Nose	$1,929
30220	Under Introduction Procedures on the Nose	$3,864
30300	Under Removal of Foreign Body Procedures on the Nose	$2,294
30310	Under Removal of Foreign Body Procedures on the Nose	$2,610
30320	Under Removal of Foreign Body Procedures on the Nose	$5,803
30400	Under Repair Procedures on the Nose	$13,751
30410	Under Repair Procedures on the Nose	$16,217
30420	Under Repair Procedures on the Nose	$17,697
30430	Under Repair Procedures on the Nose	$12,051
30435	Under Repair Procedures on the Nose	$15,155
30450	Under Repair Procedures on the Nose	$20,140
30460	Under Repair Procedures on the Nose	$10,792
30462	Under Repair Procedures on the Nose	$20,714
30465	Under Repair Procedures on the Nose	$12,666
30520	Under Repair Procedures on the Nose	$8,017
30540	Under Repair Procedures on the Nose	$8,847
30545	Under Repair Procedures on the Nose	$12,124
30560	Under Repair Procedures on the Nose	$3,420
30580	Under Repair Procedures on the Nose	$8,516
30600	Under Repair Procedures on the Nose	$7,673
30620	Under Repair Procedures on the Nose	$8,004
30630	Under Repair Procedures on the Nose	$8,016
30801	Under Destruction Procedures on the Nose	$2,927
30802	Under Destruction Procedures on the Nose	$3,709
30901	Under Other Procedures on the Nose	$1,775
30903	Under Other Procedures on the Nose	$2,726
30905	Under Other Procedures on the Nose	$4,207
30906	Under Other Procedures on the Nose	$4,373
30915	Under Other Procedures on the Nose	$7,421
30920	Under Other Procedures on the Nose	$10,777
30930	Under Other Procedures on the Nose	$1,589
31000	Under Incision Procedures on the Accessory Sinuses	$2,357
31002	Under Incision Procedures on the Accessory Sinuses	$2,416
31020	Under Incision Procedures on the Accessory Sinuses	$6,239
31030	Under Incision Procedures on the Accessory Sinuses	$8,898
31032	Under Incision Procedures on the Accessory Sinuses	$7,427
31040	Under Incision Procedures on the Accessory Sinuses	$9,881
31050	Under Incision Procedures on the Accessory Sinuses	$6,232
31051	Under Incision Procedures on the Accessory Sinuses	$8,287
31070	Under Incision Procedures on the Accessory Sinuses	$5,633
31075	Under Incision Procedures on the Accessory Sinuses	$10,059
31080	Under Incision Procedures on the Accessory Sinuses	$13,254
31081	Under Incision Procedures on the Accessory Sinuses	$15,844

Procedure Code	Modifier	Fee
31084	Under Incision Procedures on the Accessory Sinuses	$14,853
31085	Under Incision Procedures on the Accessory Sinuses	$16,918
31086	Under Incision Procedures on the Accessory Sinuses	$14,421
31087	Under Incision Procedures on the Accessory Sinuses	$13,944
31090	Under Incision Procedures on the Accessory Sinuses	$13,216
31200	Under Excision Procedures on the Accessory Sinuses	$7,421
31201	Under Excision Procedures on the Accessory Sinuses	$9,647
31205	Under Excision Procedures on the Accessory Sinuses	$11,675
31225	Under Excision Procedures on the Accessory Sinuses	$24,412
31230	Under Excision Procedures on the Accessory Sinuses	$26,885
31231	Under Endoscopy Procedures on the Accessory Sinuses	$2,726
31233	Under Endoscopy Procedures on the Accessory Sinuses	$3,355
31235	Under Endoscopy Procedures on the Accessory Sinuses	$3,839
31237	Under Endoscopy Procedures on the Accessory Sinuses	$3,412
31238	Under Endoscopy Procedures on the Accessory Sinuses	$3,403
31239	Under Endoscopy Procedures on the Accessory Sinuses	$8,022
31240	Under Endoscopy Procedures on the Accessory Sinuses	$2,097
31241	Under Endoscopy Procedures on the Accessory Sinuses	$5,954
31253	Under Endoscopy Procedures on the Accessory Sinuses	$6,658
31254	Under Endoscopy Procedures on the Accessory Sinuses	$5,303
31255	Under Endoscopy Procedures on the Accessory Sinuses	$4,298
31256	Under Endoscopy Procedures on the Accessory Sinuses	$2,392
31257	Under Endoscopy Procedures on the Accessory Sinuses	$5,923
31259	Under Endoscopy Procedures on the Accessory Sinuses	$6,282
31267	Under Endoscopy Procedures on the Accessory Sinuses	$3,526
31276	Under Endoscopy Procedures on the Accessory Sinuses	$5,020
31287	Under Endoscopy Procedures on the Accessory Sinuses	$2,673
31288	Under Endoscopy Procedures on the Accessory Sinuses	$3,109
31290	Under Endoscopy Procedures on the Accessory Sinuses	$15,160
31291	Under Endoscopy Procedures on the Accessory Sinuses	$16,330
31292	Under Endoscopy Procedures on the Accessory Sinuses	$13,000
31293	Under Endoscopy Procedures on the Accessory Sinuses	$14,104
31294	Under Endoscopy Procedures on the Accessory Sinuses	$16,158
31295	Under Endoscopy Procedures on the Accessory Sinuses	$25,993
31296	Under Endoscopy Procedures on the Accessory Sinuses	$26,333
31297	Under Endoscopy Procedures on the Accessory Sinuses	$25,807
31298	Under Endoscopy Procedures on the Accessory Sinuses	$50,021
31300	Under Excision Procedures on the Larynx	$16,917
31360	Under Excision Procedures on the Larynx	$27,544
31365	Under Excision Procedures on the Larynx	$33,952
31367	Under Excision Procedures on the Larynx	$29,114
31368	Under Excision Procedures on the Larynx	$32,370
31370	Under Excision Procedures on the Larynx	$27,364
31375	Under Excision Procedures on the Larynx	$25,947
31380	Under Excision Procedures on the Larynx	$25,579

Procedure Code	Modifier	Fee
31382	Under Excision Procedures on the Larynx	$28,092
31390	Under Excision Procedures on the Larynx	$37,786
31395	Under Excision Procedures on the Larynx	$39,982
31400	Under Excision Procedures on the Larynx	$12,840
31420	Under Excision Procedures on the Larynx	$10,797
31500	Under Introduction Procedures on the Larynx	$1,867
31502	Under Introduction Procedures on the Larynx	$460
31505	Under Endoscopy Procedures on the Larynx	$1,066
31510	Under Endoscopy Procedures on the Larynx	$2,725
31511	Under Endoscopy Procedures on the Larynx	$2,736
31512	Under Endoscopy Procedures on the Larynx	$2,659
31513	Under Endoscopy Procedures on the Larynx	$1,728
31515	Under Endoscopy Procedures on the Larynx	$2,648
31520	Under Endoscopy Procedures on the Larynx	$2,055
31525	Under Endoscopy Procedures on the Larynx	$3,266
31526	Under Endoscopy Procedures on the Larynx	$2,064
31527	Under Endoscopy Procedures on the Larynx	$2,576
31528	Under Endoscopy Procedures on the Larynx	$1,900
31529	Under Endoscopy Procedures on the Larynx	$2,126
31530	Under Endoscopy Procedures on the Larynx	$2,639
31531	Under Endoscopy Procedures on the Larynx	$2,801
31535	Under Endoscopy Procedures on the Larynx	$2,509
31536	Under Endoscopy Procedures on the Larynx	$2,779
31540	Under Endoscopy Procedures on the Larynx	$3,186
31541	Under Endoscopy Procedures on the Larynx	$3,479
31545	Under Endoscopy Procedures on the Larynx	$4,776
31546	Under Endoscopy Procedures on the Larynx	$7,264
31551	Under Repair Procedures on the Larynx	$18,863
31552	Under Repair Procedures on the Larynx	$18,954
31553	Under Repair Procedures on the Larynx	$20,800
31554	Under Repair Procedures on the Larynx	$21,740
31560	Under Endoscopy Procedures on the Larynx	$4,131
31561	Under Endoscopy Procedures on the Larynx	$4,514
31570	Under Endoscopy Procedures on the Larynx	$4,388
31571	Under Endoscopy Procedures on the Larynx	$3,288
31572	Under Endoscopy Procedures on the Larynx	$6,406
31573	Under Endoscopy Procedures on the Larynx	$3,427
31574	Under Endoscopy Procedures on the Larynx	$13,130
31575	Under Endoscopy Procedures on the Larynx	$1,467
31576	Under Endoscopy Procedures on the Larynx	$3,429
31577	Under Endoscopy Procedures on the Larynx	$3,566
31578	Under Endoscopy Procedures on the Larynx	$3,900
31579	Under Endoscopy Procedures on the Larynx	$2,337
31580	Under Repair Procedures on the Larynx	$16,254
31584	Under Repair Procedures on the Larynx	$18,016

Procedure Code	Modifier	Fee
31587	Under Repair Procedures on the Larynx	$15,058
31590	Under Repair Procedures on the Larynx	$11,389
31591	Under Repair Procedures on the Larynx	$13,605
31592	Under Repair Procedures on the Larynx	$22,222
31595	Depleted	$9,848
31600	Under Incision Procedures on the Trachea and Bronchi	$4,346
31601	Under Incision Procedures on the Trachea and Bronchi	$5,973
31603	Under Incision Procedures on the Trachea and Bronchi	$4,328
31605	Under Incision Procedures on the Trachea and Bronchi	$4,519
31610	Under Incision Procedures on the Trachea and Bronchi	$12,434
31611	Under Incision Procedures on the Trachea and Bronchi	$6,970
31612	Under Incision Procedures on the Trachea and Bronchi	$1,087
31613	Under Incision Procedures on the Trachea and Bronchi	$5,924
31614	Under Incision Procedures on the Trachea and Bronchi	$9,788
31615	Under Endoscopy Procedures on the Trachea and Bronchi	$2,186
31622	Under Endoscopy Procedures on the Trachea and Bronchi	$3,132
31623	Under Endoscopy Procedures on the Trachea and Bronchi	$3,524
31624	Under Endoscopy Procedures on the Trachea and Bronchi	$3,290
31625	Under Endoscopy Procedures on the Trachea and Bronchi	$4,299
31626	Under Endoscopy Procedures on the Trachea and Bronchi	$10,997
31627	Under Endoscopy Procedures on the Trachea and Bronchi	$18,163
31628	Under Endoscopy Procedures on the Trachea and Bronchi	$4,568
31629	Under Endoscopy Procedures on the Trachea and Bronchi	$5,636
31630	Under Endoscopy Procedures on the Trachea and Bronchi	$2,647
31631	Under Endoscopy Procedures on the Trachea and Bronchi	$3,041
31632	Under Endoscopy Procedures on the Trachea and Bronchi	$826
31633	Under Endoscopy Procedures on the Trachea and Bronchi	$1,041
31634	Under Endoscopy Procedures on the Trachea and Bronchi	$23,047
31635	Under Endoscopy Procedures on the Trachea and Bronchi	$3,649
31636	Under Endoscopy Procedures on the Trachea and Bronchi	$2,931
31637	Under Endoscopy Procedures on the Trachea and Bronchi	$970
31638	Under Endoscopy Procedures on the Trachea and Bronchi	$3,311
31640	Under Endoscopy Procedures on the Trachea and Bronchi	$3,324
31641	Under Endoscopy Procedures on the Trachea and Bronchi	$3,399
31643	Under Endoscopy Procedures on the Trachea and Bronchi	$2,325
31645	Under Endoscopy Procedures on the Trachea and Bronchi	$3,360
31646	Under Endoscopy Procedures on the Trachea and Bronchi	$1,865
31647	Under Endoscopy Procedures on the Trachea and Bronchi	$2,816
31648	Under Endoscopy Procedures on the Trachea and Bronchi	$2,546
31649	Under Endoscopy Procedures on the Trachea and Bronchi	$884
31651	Under Endoscopy Procedures on the Trachea and Bronchi	$970
31652	Under Endoscopy Procedures on the Trachea and Bronchi	$10,753
31653	Under Endoscopy Procedures on the Trachea and Bronchi	$11,368
31654	Under Endoscopy Procedures on the Trachea and Bronchi	$1,628
31660	Under Thermoplasty Procedures on the Trachea and Bronchi	$2,551

Procedure Code	Modifier	Fee
31661	Under Thermoplasty Procedures on the Trachea and Bronchi	$2,701
31717	Under Introduction Procedures on the Trachea and Bronchi	$3,477
31720	Under Introduction Procedures on the Trachea and Bronchi	$648
31725	Under Introduction Procedures on the Trachea and Bronchi	$1,042
31730	Under Introduction Procedures on the Trachea and Bronchi	$16,098
31750	Under Repair Procedures on the Trachea and Bronchi	$18,324
31755	Under Repair Procedures on the Trachea and Bronchi	$23,044
31760	Under Repair Procedures on the Trachea and Bronchi	$18,791
31766	Under Repair Procedures on the Trachea and Bronchi	$24,427
31770	Under Repair Procedures on the Trachea and Bronchi	$18,294
31775	Under Repair Procedures on the Trachea and Bronchi	$19,207
31780	Under Repair Procedures on the Trachea and Bronchi	$15,695
31781	Under Repair Procedures on the Trachea and Bronchi	$19,033
31785	Under Repair Procedures on the Trachea and Bronchi	$14,057
31786	Under Repair Procedures on the Trachea and Bronchi	$19,808
31800	Under Repair Procedures on the Trachea and Bronchi	$9,520
31805	Under Repair Procedures on the Trachea and Bronchi	$11,154
31820	Under Repair Procedures on the Trachea and Bronchi	$5,634
31825	Under Repair Procedures on the Trachea and Bronchi	$7,783
31830	Under Repair Procedures on the Trachea and Bronchi	$5,760
32035	Under Incision Procedures on the Lungs and Pleura	$9,911
32036	Under Incision Procedures on the Lungs and Pleura	$10,525
32096	Under Incision Procedures on the Lungs and Pleura	$10,994
32097	Under Incision Procedures on the Lungs and Pleura	$10,982
32098	Under Incision Procedures on the Lungs and Pleura	$10,415
32100	Under Incision Procedures on the Lungs and Pleura	$11,055
32110	Under Incision Procedures on the Lungs and Pleura	$20,042
32120	Under Incision Procedures on the Lungs and Pleura	$11,890
32124	Under Incision Procedures on the Lungs and Pleura	$12,651
32140	Under Incision Procedures on the Lungs and Pleura	$13,592
32141	Under Incision Procedures on the Lungs and Pleura	$20,859
32150	Under Incision Procedures on the Lungs and Pleura	$13,672
32151	Under Incision Procedures on the Lungs and Pleura	$13,791
32160	Under Incision Procedures on the Lungs and Pleura	$10,755
32200	Under Incision Procedures on the Lungs and Pleura	$15,589
32215	Under Incision Procedures on the Lungs and Pleura	$10,998
32220	Under Incision Procedures on the Lungs and Pleura	$21,613
32225	Under Incision Procedures on the Lungs and Pleura	$13,571
32310	Under Excision/Resection Procedures on the Lungs and Pleura	$12,443
32320	Under Excision/Resection Procedures on the Lungs and Pleura	$21,812
32400	Under Excision/Resection Procedures on the Lungs and Pleura	$1,953
32405	Under Excision/Resection Procedures on the Lungs and Pleura	$5,064
32440	Under Removal Procedures on the Lungs and Pleura	$21,387
32442	Under Removal Procedures on the Lungs and Pleura	$42,172
32445	Under Removal Procedures on the Lungs and Pleura	$48,536

Procedure Code	Modifier	Fee
32480	Under Removal Procedures on the Lungs and Pleura	$20,215
32482	Under Removal Procedures on the Lungs and Pleura	$21,624
32484	Under Removal Procedures on the Lungs and Pleura	$19,653
32486	Under Removal Procedures on the Lungs and Pleura	$32,303
32488	Under Removal Procedures on the Lungs and Pleura	$32,970
32491	Under Removal Procedures on the Lungs and Pleura	$19,826
32501	Under Removal Procedures on the Lungs and Pleura	$3,368
32503	Under Removal Procedures on the Lungs and Pleura	$24,699
32504	Under Removal Procedures on the Lungs and Pleura	$28,151
32505	Under Removal Procedures on the Lungs and Pleura	$12,709
32506	Under Removal Procedures on the Lungs and Pleura	$2,156
32507	Under Removal Procedures on the Lungs and Pleura	$2,156
32540	Under Removal Procedures on the Lungs and Pleura	$23,646
32550	Under Introduction and Removal Procedures on the Lungs and Pleura	$9,243
32551	Under Introduction and Removal Procedures on the Lungs and Pleura	$2,118
32552	Under Introduction and Removal Procedures on the Lungs and Pleura	$2,420
32553	Under Introduction and Removal Procedures on the Lungs and Pleura	$6,765
32554	Under Introduction and Removal Procedures on the Lungs and Pleura	$2,637
32555	Under Introduction and Removal Procedures on the Lungs and Pleura	$3,756
32556	Under Introduction and Removal Procedures on the Lungs and Pleura	$7,245
32557	Under Introduction and Removal Procedures on the Lungs and Pleura	$6,612
32560	Under Destruction Procedures on the Lungs and Pleura	$3,203
32561	Under Destruction Procedures on the Lungs and Pleura	$1,217
32562	Under Destruction Procedures on the Lungs and Pleura	$1,097
32601	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$4,225
32604	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$6,628
32606	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$6,343
32607	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$4,221
32608	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$5,174
32609	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$3,526
32650	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$9,070
32651	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$14,975
32652	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$22,727
32653	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$14,470
32654	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$15,636
32655	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$13,061
32656	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$10,917

Procedure Code	Modifier	Fee
32658	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$9,761
32659	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$9,959
32661	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$10,942
32662	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$12,158
32663	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$19,152
32664	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$11,621
32665	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$16,936
32666	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$11,888
32667	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$2,161
32668	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$2,161
32669	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$18,417
32670	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$21,967
32671	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$24,463
32672	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$20,984
32673	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$16,685
32674	Under Thoracoscopy (Video-assisted thoracic surgery [VATS]) on the Lungs and Pleura	$2,964
32701	Under Stereotactic Radiation Therapy Procedures on the Lungs and Pleura	$2,918
32800	Under Repair Procedures on the Lungs and Pleura	$12,916
32810	Under Repair Procedures on the Lungs and Pleura	$12,338
32815	Under Repair Procedures on the Lungs and Pleura	$38,161
32820	Under Repair Procedures on the Lungs and Pleura	$18,240
32851	Under Lung Transplantation Procedures	$45,156
32852	Under Lung Transplantation Procedures	$49,137
32853	Under Lung Transplantation Procedures	$62,889
32854	Under Lung Transplantation Procedures	$66,687
32855	Under Lung Transplantation Procedures	$ -
32856	Under Lung Transplantation Procedures	$ -
32900	Under Surgical Collapse Therapy Procedures on the Lungs and Pleura	$19,372
32905	Under Surgical Collapse Therapy Procedures on the Lungs and Pleura	$18,365
32906	Under Surgical Collapse Therapy Procedures on the Lungs and Pleura	$22,690
32940	Under Surgical Collapse Therapy Procedures on the Lungs and Pleura	$16,953
32960	Under Surgical Collapse Therapy Procedures on the Lungs and Pleura	$1,643
32994	Under Other Procedures on the Lungs and Pleura	$79,781
32997	Under Other Procedures on the Lungs and Pleura	$4,466

Procedure Code	Modifier	Fee
32998	Under Other Procedures on the Lungs and Pleura	$46,825
33010	Deleted	$1,479
33011	Deleted	$1,494
33015	Deleted	$6,949
33020	Under Surgical Procedures on the Pericardium	$12,029
33025	Under Surgical Procedures on the Pericardium	$10,917
33030	Under Surgical Procedures on the Pericardium	$27,465
33031	Under Surgical Procedures on the Pericardium	$33,872
33050	Under Surgical Procedures on the Pericardium	$13,856
33120	Under Excision Procedures of Cardiac Tumor	$28,740
33130	Under Excision Procedures of Cardiac Tumor	$18,895
33140	Under Transmyocardial Revascularization Procedures	$21,619
33141	Under Transmyocardial Revascularization Procedures	$1,811
33202	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$10,649
33203	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$11,111
33206	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$6,191
33207	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$6,605
33208	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$7,150
33210	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$2,262
33211	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$2,333
33212	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,387
33213	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,593
33214	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$6,555
33215	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,260
33216	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,071
33217	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,981
33218	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,308
33220	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,363
33221	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,931
33222	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,607
33223	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,596
33224	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$7,100
33225	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$6,480
33226	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$6,830
33227	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,630
33228	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,850
33229	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,131
33230	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,237
33231	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,502
33233	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$3,134
33234	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$6,649
33235	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$8,741
33236	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$10,714
33237	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$11,510
33238	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$12,895

Procedure Code	Modifier	Fee
33240	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,010
33241	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$2,942
33243	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$18,785
33244	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$11,810
33249	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$12,587
33250	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$20,145
33251	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$22,301
33254	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$18,698
33255	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$22,523
33256	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$26,750
33257	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$7,955
33258	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$9,016
33259	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$11,545
33261	Under Incisional Electrophysiologic Procedures on the Heart and Pericardium	$22,305
33262	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,103
33263	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,330
33264	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,549
33265	Under Endoscopic Electrophysiologic Procedures on the Heart and Pericardium	$18,597
33266	Under Endoscopic Electrophysiologic Procedures on the Heart and Pericardium	$25,302
33270	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$7,797
33271	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$6,283
33272	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$4,786
33273	Under Pacemaker or Pacing Cardioverter-Defibrillator Procedures	$5,530
33282	Deleted	$3,084
33284	Deleted	$2,698
33300	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$33,622
33305	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$56,293
33310	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$16,160
33315	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$26,191
33320	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$14,469
33321	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$16,425
33322	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$19,010
33330	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$19,714
33335	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$26,010
33340	Under Surgical Procedures on the Heart (Including Valves) and Great Vessels	$10,923
33361	Under Surgical Procedures on the Aortic Valve	$18,751
33362	Under Surgical Procedures on the Aortic Valve	$20,478
33363	Under Surgical Procedures on the Aortic Valve	$21,251
33364	Under Surgical Procedures on the Aortic Valve	$22,383
33365	Under Surgical Procedures on the Aortic Valve	$24,605
33366	Under Surgical Procedures on the Aortic Valve	$26,616
33367	Under Surgical Procedures on the Aortic Valve	$8,693
33368	Under Surgical Procedures on the Aortic Valve	$10,341
33369	Under Surgical Procedures on the Aortic Valve	$13,651
33390	Under Surgical Procedures on the Aortic Valve	$25,881

Procedure Code	Modifier	Fee
33391	Under Surgical Procedures on the Aortic Valve	$30,717
33404	Under Surgical Procedures on the Aortic Valve	$24,218
33405	Under Surgical Procedures on the Aortic Valve	$31,104
33406	Under Surgical Procedures on the Aortic Valve	$39,352
33410	Under Surgical Procedures on the Aortic Valve	$34,885
33411	Under Surgical Procedures on the Aortic Valve	$45,945
33412	Under Surgical Procedures on the Aortic Valve	$43,720
33413	Under Surgical Procedures on the Aortic Valve	$44,703
33414	Under Surgical Procedures on the Aortic Valve	$29,692
33415	Under Surgical Procedures on the Aortic Valve	$27,766
33416	Under Surgical Procedures on the Aortic Valve	$27,800
33417	Under Surgical Procedures on the Aortic Valve	$22,967
33418	Under Surgical Procedures on the Aortic Valve	$24,755
33419	Under Surgical Procedures on the Aortic Valve	$5,854
33420	Under Surgical Procedures on the Mitral Valve	$20,070
33422	Under Surgical Procedures on the Mitral Valve	$23,039
33425	Under Surgical Procedures on the Mitral Valve	$37,496
33426	Under Surgical Procedures on the Mitral Valve	$32,649
33427	Under Surgical Procedures on the Mitral Valve	$33,532
33430	Under Surgical Procedures on the Mitral Valve	$38,343
33460	Under Surgical Procedures on the Tricuspid Valve	$33,361
33463	Under Surgical Procedures on the Tricuspid Valve	$42,324
33464	Under Surgical Procedures on the Tricuspid Valve	$33,469
33465	Under Surgical Procedures on the Tricuspid Valve	$37,844
33468	Under Surgical Procedures on the Tricuspid Valve	$33,859
33470	Under Surgical Procedures on the Pulmonary Valve	$17,043
33471	Under Surgical Procedures on the Pulmonary Valve	$18,246
33474	Under Surgical Procedures on the Pulmonary Valve	$30,053
33475	Under Surgical Procedures on the Pulmonary Valve	$32,194
33476	Under Surgical Procedures on the Pulmonary Valve	$20,970
33477	Under Surgical Procedures on the Pulmonary Valve	$18,853
33478	Under Surgical Procedures on the Pulmonary Valve	$21,671
33496	Under Other Cardiac Valvular Procedures	$23,046
33500	Under Coronary Artery Anomaly Procedures	$21,609
33501	Under Coronary Artery Anomaly Procedures	$15,413
33502	Under Coronary Artery Anomaly Procedures	$17,562
33503	Under Coronary Artery Anomaly Procedures	$18,249
33504	Under Coronary Artery Anomaly Procedures	$20,192
33505	Under Coronary Artery Anomaly Procedures	$28,531
33506	Under Coronary Artery Anomaly Procedures	$28,402
33507	Under Coronary Artery Anomaly Procedures	$23,812
33508	Under Endoscopy Procedures on the Heart and Pericardium	$223
33510	Under Venous Grafting Only for Coronary Artery Bypass	$26,480
33511	Under Venous Grafting Only for Coronary Artery Bypass	$29,104
33512	Under Venous Grafting Only for Coronary Artery Bypass	$33,108

Procedure Code	Modifier	Fee
33513	Under Venous Grafting Only for Coronary Artery Bypass	$34,067
33514	Under Venous Grafting Only for Coronary Artery Bypass	$36,210
33516	Under Venous Grafting Only for Coronary Artery Bypass	$37,493
33517	Under Combined Arterial-Venous Grafting for Coronary Bypass	$2,581
33518	Under Combined Arterial-Venous Grafting for Coronary Bypass	$5,670
33519	Under Combined Arterial-Venous Grafting for Coronary Bypass	$7,492
33521	Under Combined Arterial-Venous Grafting for Coronary Bypass	$8,977
33522	Under Combined Arterial-Venous Grafting for Coronary Bypass	$10,094
33523	Under Combined Arterial-Venous Grafting for Coronary Bypass	$11,548
33530	Under Combined Arterial-Venous Grafting for Coronary Bypass	$7,244
33533	Under Arterial Grafting for Coronary Artery Bypass	$25,615
33534	Under Arterial Grafting for Coronary Artery Bypass	$30,150
33535	Under Arterial Grafting for Coronary Artery Bypass	$33,584
33536	Under Arterial Grafting for Coronary Artery Bypass	$36,044
33542	Under Arterial Grafting for Coronary Artery Bypass	$35,947
33545	Under Arterial Grafting for Coronary Artery Bypass	$42,557
33548	Under Arterial Grafting for Coronary Artery Bypass	$40,929
33572	Under Coronary Endarterectomy Procedures	$3,169
33600	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$23,691
33602	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$22,983
33606	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$24,512
33608	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$24,819
33610	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$24,471
33611	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$26,970
33612	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$27,675
33615	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$27,546
33617	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$29,839
33619	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$37,579
33620	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$22,797
33621	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$12,831
33622	Under Repair Procedures for Single Ventricle and Other Complex Cardiac Anomalies	$47,384
33641	Under Repair Procedures for Septal Defect	$22,635
33645	Under Repair Procedures for Septal Defect	$23,905
33647	Under Repair Procedures for Septal Defect	$25,105
33660	Under Repair Procedures for Septal Defect	$24,260
33665	Under Repair Procedures for Septal Defect	$26,446
33670	Under Repair Procedures for Septal Defect	$27,276

Procedure Code	Modifier	Fee
33675	Under Repair Procedures for Septal Defect	$27,246
33676	Under Repair Procedures for Septal Defect	$27,972
33677	Under Repair Procedures for Septal Defect	$29,056
33681	Under Repair Procedures for Septal Defect	$25,348
33684	Under Repair Procedures for Septal Defect	$26,096
33688	Under Repair Procedures for Septal Defect	$26,061
33690	Under Repair Procedures for Septal Defect	$16,514
33692	Under Repair Procedures for Septal Defect	$27,054
33694	Under Repair Procedures for Septal Defect	$26,970
33697	Under Repair Procedures for Septal Defect	$28,414
33702	Under Repair Procedures for the Sinus of Valsalva	$21,316
33710	Under Repair Procedures for the Sinus of Valsalva	$28,361
33720	Under Repair Procedures for the Sinus of Valsalva	$21,336
33722	Under Repair Procedures for the Sinus of Valsalva	$22,431
33724	Under Repair Procedures for Venous Anomalies	$21,255
33726	Under Repair Procedures for Venous Anomalies	$28,103
33730	Under Repair Procedures for Venous Anomalies	$27,668
33732	Under Repair Procedures for Venous Anomalies	$22,700
33735	Under Shunting Procedures on the Heart and Pericardium	$17,837
33736	Under Shunting Procedures on the Heart and Pericardium	$19,356
33737	Under Shunting Procedures on the Heart and Pericardium	$17,874
33750	Under Shunting Procedures on the Heart and Pericardium	$17,397
33755	Under Shunting Procedures on the Heart and Pericardium	$18,135
33762	Under Shunting Procedures on the Heart and Pericardium	$17,680
33764	Under Shunting Procedures on the Heart and Pericardium	$18,135
33766	Under Shunting Procedures on the Heart and Pericardium	$18,361
33767	Under Shunting Procedures on the Heart and Pericardium	$19,629
33768	Under Shunting Procedures on the Heart and Pericardium	$5,766
33770	Under Repair Procedures for Transposition of the Great Vessels	$29,257
33771	Under Repair Procedures for Transposition of the Great Vessels	$30,128
33774	Under Repair Procedures for Transposition of the Great Vessels	$24,799
33775	Under Repair Procedures for Transposition of the Great Vessels	$25,565
33776	Under Repair Procedures for Transposition of the Great Vessels	$27,025
33777	Under Repair Procedures for Transposition of the Great Vessels	$26,107
33778	Under Repair Procedures for Transposition of the Great Vessels	$32,432
33779	Under Repair Procedures for Transposition of the Great Vessels	$32,149
33780	Under Repair Procedures for Transposition of the Great Vessels	$32,747
33781	Under Repair Procedures for Transposition of the Great Vessels	$31,974
33782	Under Repair Procedures for Transposition of the Great Vessels	$44,591
33783	Under Repair Procedures for Transposition of the Great Vessels	$48,158
33786	Under Repair Procedures for Truncus Arteriosus	$31,449
33788	Under Repair Procedures for Truncus Arteriosus	$21,155
33800	Under Repair Procedures for Aortic Anomalies	$13,607
33802	Under Repair Procedures for Aortic Anomalies	$14,926
33803	Under Repair Procedures for Aortic Anomalies	$15,871

Procedure Code	Modifier	Fee
33813	Under Repair Procedures for Aortic Anomalies	$17,067
33814	Under Repair Procedures for Aortic Anomalies	$20,993
33820	Under Repair Procedures for Aortic Anomalies	$13,341
33822	Under Repair Procedures for Aortic Anomalies	$14,082
33824	Under Repair Procedures for Aortic Anomalies	$16,241
33840	Under Repair Procedures for Aortic Anomalies	$17,058
33845	Under Repair Procedures for Aortic Anomalies	$18,381
33851	Under Repair Procedures for Aortic Anomalies	$17,520
33852	Under Repair Procedures for Aortic Anomalies	$19,267
33853	Under Repair Procedures for Aortic Anomalies	$25,277
33860	Deleted	$44,082
33863	Under Repair Procedures for Thoracic Aortic Aneurysm	$43,266
33864	Under Repair Procedures for Thoracic Aortic Aneurysm	$44,297
33870	Deleted	$34,628
33875	Under Repair Procedures for Thoracic Aortic Aneurysm	$37,739
33877	Under Repair Procedures for Thoracic Aortic Aneurysm	$49,886
33880	Under Endovascular Repair Procedures of the Descending Thoracic Aorta	$24,771
33881	Under Endovascular Repair Procedures of the Descending Thoracic Aorta	$21,275
33883	Under Endovascular Repair Procedures of the Descending Thoracic Aorta	$15,401
33884	Under Endovascular Repair Procedures of the Descending Thoracic Aorta	$5,753
33886	Under Endovascular Repair Procedures of the Descending Thoracic Aorta	$13,407
33889	Under Endovascular Repair Procedures of the Descending Thoracic Aorta	$10,994
33891	Under Endovascular Repair Procedures of the Descending Thoracic Aorta	$13,388
33910	Under Surgical Procedures on the Pulmonary Artery	$36,149
33915	Under Surgical Procedures on the Pulmonary Artery	$19,077
33916	Under Surgical Procedures on the Pulmonary Artery	$58,156
33917	Under Surgical Procedures on the Pulmonary Artery	$20,079
33920	Under Surgical Procedures on the Pulmonary Artery	$24,983
33922	Under Surgical Procedures on the Pulmonary Artery	$19,135
33924	Under Surgical Procedures on the Pulmonary Artery	$3,975
33925	Under Surgical Procedures on the Pulmonary Artery	$23,741
33926	Under Surgical Procedures on the Pulmonary Artery	$33,406
33927	Under Heart/Lung Transplantation Procedures	$35,170
33933	Under Heart/Lung Transplantation Procedures	$ -
33935	Under Heart/Lung Transplantation Procedures	$67,148
33944	Under Heart/Lung Transplantation Procedures	$ -
33945	Under Heart/Lung Transplantation Procedures	$66,463
33946	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services ar	$4,227
33947	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$4,732
33948	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$3,235
33949	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$3,149
33951	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$5,895

Procedure Code	Modifier	Fee
33952	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$5,900
33953	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$6,594
33954	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$6,601
33955	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$11,556
33956	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$11,492
33957	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$2,567
33958	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$2,571
33959	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$3,257
33962	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$3,266
33963	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$6,512
33964	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$6,875
33965	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$2,567
33966	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedures	$3,268
33967	Under Cardiac Assist Procedures	$3,584
33968	Under Cardiac Assist Procedures	$462
33969	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedure	$3,801
33970	Under Cardiac Assist Procedures	$4,896
33971	Under Cardiac Assist Procedures	$9,706
33973	Under Cardiac Assist Procedures	$7,161
33974	Under Cardiac Assist Procedures	$12,229
33975	Under Cardiac Assist Procedures	$18,049
33976	Under Cardiac Assist Procedures	$22,101
33977	Under Cardiac Assist Procedures	$15,481
33978	Under Cardiac Assist Procedures	$18,514
33979	Under Cardiac Assist Procedures	$26,928
33980	Under Cardiac Assist Procedures	$24,614
33981	Under Cardiac Assist Procedures	$11,579
33982	Under Cardiac Assist Procedures	$27,203
33983	Under Cardiac Assist Procedures	$31,888
33984	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedure	$3,933
33985	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedure	$7,155
33986	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedure	$7,213
33987	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedure	$2,901

Procedure Code	Modifier	Fee
33988	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedure	$10,817
33989	Under Extracorporeal Membrane Oxygenation or Extracorporeal Life Support Services and Procedure	$6,875
33990	Under Cardiac Assist Procedures	$5,884
33991	Under Cardiac Assist Procedures	$8,689
33992	Under Cardiac Assist Procedures	$2,764
33993	Under Cardiac Assist Procedures	$2,415
34001	Under Arterial Embolectomy/Thrombectomy Procedures, With or Without Catheter	$12,653
34051	Under Arterial Embolectomy/Thrombectomy Procedures, With or Without Catheter	$13,645
34101	Under Arterial Embolectomy/Thrombectomy Procedures, With or Without Catheter	$8,272
34111	Under Arterial Embolectomy/Thrombectomy Procedures, With or Without Catheter	$8,261
34151	Under Arterial Embolectomy/Thrombectomy Procedures, With or Without Catheter	$19,296
34201	Under Arterial Embolectomy/Thrombectomy Procedures, With or Without Catheter	$14,243
34203	Under Arterial Embolectomy/Thrombectomy Procedures, With or Without Catheter	$13,179
34401	Under Venous Embolectomy/Thrombectomy, Direct or With Catheter	$20,317
34421	Under Venous Embolectomy/Thrombectomy, Direct or With Catheter	$10,144
34451	Under Venous Embolectomy/Thrombectomy, Direct or With Catheter	$19,858
34471	Under Venous Embolectomy/Thrombectomy, Direct or With Catheter	$14,910
34490	Under Venous Embolectomy/Thrombectomy, Direct or With Catheter	$8,522
34501	Under Venous Reconstruction Procedures	$12,313
34502	Under Venous Reconstruction Procedures	$21,215
34510	Under Venous Reconstruction Procedures	$14,093
34520	Under Venous Reconstruction Procedures	$13,659
34530	Under Venous Reconstruction Procedures	$12,946
34701	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$16,884
34702	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$25,192
34703	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$19,121
34704	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$31,749
34705	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$20,979
34706	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$31,583
34707	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$15,749
34708	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$25,334
34709	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$4,451
34710	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$10,992

Procedure Code	Modifier	Fee
34711	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$4,111
34712	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$9,337
34713	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$1,767
34714	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$3,699
34715	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$4,123
34716	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$5,127
34808	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$2,893
34812	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$2,868
34813	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$3,280
34820	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$4,893
34830	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$24,385
34831	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$26,733
34832	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$26,228
34833	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$5,610
34834	Under Endovascular Repair Procedures of the Abdominal Aorta and/or Iliac Arteries	$1,806
34841	Under Fenestrated Endovascular Repair Procedures of the Visceral and Infrarenal Aorta	$ -
34842	Under Fenestrated Endovascular Repair Procedures of the Visceral and Infrarenal Aorta	$ -
34843	Under Fenestrated Endovascular Repair Procedures of the Visceral and Infrarenal Aorta	$ -
34844	Under Fenestrated Endovascular Repair Procedures of the Visceral and Infrarenal Aorta	$ -
34845	Under Fenestrated Endovascular Repair Procedures of the Visceral and Infrarenal Aorta	$ -
34846	Under Fenestrated Endovascular Repair Procedures of the Visceral and Infrarenal Aorta	$ -
34847	Under Fenestrated Endovascular Repair Procedures of the Visceral and Infrarenal Aorta	$ -
34848	Under Fenestrated Endovascular Repair Procedures of the Visceral and Infrarenal Aorta	$ -
35001	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Ane	$15,485
35002	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$15,683
35005	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$13,716

Procedure Code	Modifier	Fee
35011	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$13,892
35013	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$17,359
35021	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$17,373
35022	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$19,912
35045	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$13,577
35081	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$24,068
35082	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$30,329
35091	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$24,788
35092	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$35,989
35102	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$26,062
35103	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$31,028
35111	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$18,368
35112	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$22,609
35121	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$22,855
35122	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$26,160
35131	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$19,260
35132	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$22,609

Procedure Code	Modifier	Fee
35141	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$15,298
35142	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$18,353
35151	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$17,195
35152	Under Direct Repair of Aneurysm or Excision (Partial or Total) and Graft Insertion for Aneurysm, Pseudoaneurysm, Ruptured Aneurysm, and Associated Occlusive Disease Procedures	$19,327
35180	Under Arteriovenous Fistula Repair Procedures	$12,037
35182	Under Arteriovenous Fistula Repair Procedures	$24,624
35184	Under Arteriovenous Fistula Repair Procedures	$13,328
35188	Under Arteriovenous Fistula Repair Procedures	$18,437
35189	Under Arteriovenous Fistula Repair Procedures	$20,865
35190	Under Arteriovenous Fistula Repair Procedures	$10,522
35201	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Ang	$12,917
35206	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$10,744
35207	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$10,140
35211	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$18,948
35216	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$28,225
35221	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$20,149
35226	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$11,512
35231	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$16,821
35236	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$13,714
35241	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$19,976
35246	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$21,657
35251	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$24,137
35256	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$14,126
35261	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$14,549
35266	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$11,949
35271	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$19,032
35276	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$20,130

Procedure Code	Modifier	Fee
35281	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$22,247
35286	Under Repair Procedures Blood Vessel Other Than for Fistula, With or Without Patch Angioplasty	$12,868
35301	Under Thromboendarterectomy Procedures on Arteries and Veins	$15,677
35302	Under Thromboendarterectomy Procedures on Arteries and Veins	$15,546
35303	Under Thromboendarterectomy Procedures on Arteries and Veins	$17,188
35304	Under Thromboendarterectomy Procedures on Arteries and Veins	$17,766
35305	Under Thromboendarterectomy Procedures on Arteries and Veins	$17,092
35306	Under Thromboendarterectomy Procedures on Arteries and Veins	$6,193
35311	Under Thromboendarterectomy Procedures on Arteries and Veins	$21,577
35321	Under Thromboendarterectomy Procedures on Arteries and Veins	$12,318
35331	Under Thromboendarterectomy Procedures on Arteries and Veins	$20,115
35341	Under Thromboendarterectomy Procedures on Arteries and Veins	$19,047
35351	Under Thromboendarterectomy Procedures on Arteries and Veins	$17,750
35355	Under Thromboendarterectomy Procedures on Arteries and Veins	$14,292
35361	Under Thromboendarterectomy Procedures on Arteries and Veins	$21,042
35363	Under Thromboendarterectomy Procedures on Arteries and Veins	$24,333
35371	Under Thromboendarterectomy Procedures on Arteries and Veins	$11,312
35372	Under Thromboendarterectomy Procedures on Arteries and Veins	$13,592
35390	Under Thromboendarterectomy Procedures on Arteries and Veins	$2,209
35400	Under Angioscopy Procedures on Arteries and Veins	$2,074
35500	Under Vein Bypass Graft Procedures	$4,442
35501	Under Vein Bypass Graft Procedures	$20,208
35506	Under Vein Bypass Graft Procedures	$17,637
35508	Under Vein Bypass Graft Procedures	$18,370
35509	Under Vein Bypass Graft Procedures	$19,573
35510	Under Vein Bypass Graft Procedures	$17,024
35511	Under Vein Bypass Graft Procedures	$15,506
35512	Under Vein Bypass Graft Procedures	$16,691
35515	Under Vein Bypass Graft Procedures	$18,370
35516	Under Vein Bypass Graft Procedures	$16,880
35518	Under Vein Bypass Graft Procedures	$15,806
35521	Under Vein Bypass Graft Procedures	$16,961
35522	Under Vein Bypass Graft Procedures	$16,767
35523	Under Vein Bypass Graft Procedures	$17,639
35525	Under Vein Bypass Graft Procedures	$15,783
35526	Under Vein Bypass Graft Procedures	$23,991
35531	Under Vein Bypass Graft Procedures	$28,193
35533	Under Vein Bypass Graft Procedures	$20,827
35535	Under Vein Bypass Graft Procedures	$26,348
35536	Under Vein Bypass Graft Procedures	$23,388
35537	Under Vein Bypass Graft Procedures	$28,851
35538	Under Vein Bypass Graft Procedures	$32,294
35539	Under Vein Bypass Graft Procedures	$30,347
35540	Under Vein Bypass Graft Procedures	$33,823

Procedure Code	Modifier	Fee
35556	Under Vein Bypass Graft Procedures	$19,380
35558	Under Vein Bypass Graft Procedures	$17,034
35560	Under Vein Bypass Graft Procedures	$23,589
35563	Under Vein Bypass Graft Procedures	$18,294
35565	Under Vein Bypass Graft Procedures	$18,314
35566	Under Vein Bypass Graft Procedures	$23,148
35570	Under Vein Bypass Graft Procedures	$21,039
35571	Under Vein Bypass Graft Procedures	$18,372
35572	Under Vein Bypass Graft Procedures	$4,810
35583	Under In-Situ Vein Bypass Graft Procedures	$20,035
35585	Under In-Situ Vein Bypass Graft Procedures	$23,205
35587	Under In-Situ Vein Bypass Graft Procedures	$18,948
35600	Under Bypass Graft Procedures other than Vein	$3,513
35601	Under Bypass Graft Procedures other than Vein	$19,301
35606	Under Bypass Graft Procedures other than Vein	$16,251
35612	Under Bypass Graft Procedures other than Vein	$14,427
35616	Under Bypass Graft Procedures other than Vein	$15,252
35621	Under Bypass Graft Procedures other than Vein	$15,223
35623	Under Bypass Graft Procedures other than Vein	$18,166
35626	Under Bypass Graft Procedures other than Vein	$21,855
35631	Under Bypass Graft Procedures other than Vein	$25,663
35632	Under Bypass Graft Procedures other than Vein	$25,011
35633	Under Bypass Graft Procedures other than Vein	$27,706
35634	Under Bypass Graft Procedures other than Vein	$24,470
35636	Under Bypass Graft Procedures other than Vein	$22,061
35637	Under Bypass Graft Procedures other than Vein	$23,852
35638	Under Bypass Graft Procedures other than Vein	$24,324
35642	Under Bypass Graft Procedures other than Vein	$13,619
35645	Under Bypass Graft Procedures other than Vein	$13,077
35646	Under Bypass Graft Procedures other than Vein	$23,770
35647	Under Bypass Graft Procedures other than Vein	$21,494
35650	Under Bypass Graft Procedures other than Vein	$15,018
35654	Under Bypass Graft Procedures other than Vein	$18,971
35656	Under Bypass Graft Procedures other than Vein	$14,991
35661	Under Bypass Graft Procedures other than Vein	$15,010
35663	Under Bypass Graft Procedures other than Vein	$16,829
35665	Under Bypass Graft Procedures other than Vein	$16,236
35666	Under Bypass Graft Procedures other than Vein	$17,510
35671	Under Bypass Graft Procedures other than Vein	$15,438
35681	Under Composite Graft Procedures on Arteries and Veins	$1,114
35682	Under Composite Graft Procedures on Arteries and Veins	$4,902
35683	Under Composite Graft Procedures on Arteries and Veins	$5,674
35685	Under Adjuvant Techniques Procedures on Arteries and Veins	$2,756
35686	Under Adjuvant Techniques Procedures on Arteries and Veins	$2,240
35691	Under Arterial Transposition Procedures	$13,068

Procedure Code	Modifier	Fee
35693	Under Arterial Transposition Procedures	$11,499
35694	Under Arterial Transposition Procedures	$13,632
35695	Under Arterial Transposition Procedures	$14,165
35697	Under Arterial Transposition Procedures	$2,061
35700	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$2,121
35701	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$7,605
35721	Deleted	$6,306
35741	Deleted	$7,079
35761	Deleted	$5,347
35800	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$9,758
35820	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$27,662
35840	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$16,432
35860	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$11,579
35870	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$17,199
35875	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$8,244
35876	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$13,126
35879	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$12,814
35881	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$14,096
35883	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$16,683
35884	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$17,169
35901	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$6,468
35903	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$7,759
35905	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$23,244
35907	Under Repair, Excision, Exploration, Revision Procedures on Arteries and Veins	$26,500
36002	Under Intravenous Vascular Introduction and Injection Procedures	$2,115
36005	Under Intravenous Vascular Introduction and Injection Procedures	$4,209
36010	Under Intravenous Vascular Introduction and Injection Procedures	$6,257
36011	Under Intravenous Vascular Introduction and Injection Procedures	$10,743
36012	Under Intravenous Vascular Introduction and Injection Procedures	$11,022
36013	Under Intravenous Vascular Introduction and Injection Procedures	$9,924
36014	Under Intravenous Vascular Introduction and Injection Procedures	$10,287
36015	Under Intravenous Vascular Introduction and Injection Procedures	$11,171
36100	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$6,355
36140	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$5,557
36160	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$6,371
36200	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$7,311
36215	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$13,084
36216	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$14,243
36217	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$24,137
36218	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$3,282
36221	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$13,344
36222	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$15,754
36223	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$19,718
36224	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$25,052
36225	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$18,990

Procedure Code	Modifier	Fee
36226	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$24,288
36227	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$3,398
36228	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$17,253
36245	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$16,979
36246	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$10,725
36247	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$19,450
36248	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$1,975
36251	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$17,941
36252	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$19,493
36253	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$28,535
36254	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$28,095
36260	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$8,858
36261	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$5,466
36262	Under Intra-Arterial-Intra-Aortic Vascular Injection Procedures	$4,144
36400	Under Venous Procedures	$338
36405	Under Venous Procedures	$299
36406	Under Venous Procedures	$213
36410	Under Venous Procedures	$219
36420	Under Venous Procedures	$630
36425	Under Venous Procedures	$535
36430	Under Venous Procedures	$459
36440	Under Venous Procedures	$660
36450	Under Venous Procedures	$2,232
36455	Under Venous Procedures	$1,754
36456	Under Venous Procedures	$1,439
36460	Under Venous Procedures	$4,544
36465	Under Venous Procedures	$20,586
36466	Under Venous Procedures	$21,519
36470	Under Venous Procedures	$1,381
36471	Under Venous Procedures	$2,481
36473	Under Venous Procedures	$19,567
36474	Under Venous Procedures	$3,624
36475	Under Venous Procedures	$19,717
36476	Under Venous Procedures	$3,876
36478	Under Venous Procedures	$15,741
36479	Under Venous Procedures	$4,079
36481	Under Venous Procedures	$25,399
36482	Under Venous Procedures	$27,409
36483	Under Venous Procedures	$1,898
36500	Under Venous Procedures	$2,481
36510	Under Venous Procedures	$1,050
36511	Under Venous Procedures	$1,412
36512	Under Venous Procedures	$1,417
36513	Under Venous Procedures	$1,482
36514	Under Venous Procedures	$10,061

Procedure Code	Modifier	Fee
36516	Under Venous Procedures	$28,233
36522	Under Venous Procedures	$32,097
36555	Under Insertion of Central Venous Access Device	$2,394
36556	Under Insertion of Central Venous Access Device	$2,727
36557	Under Insertion of Central Venous Access Device	$12,282
36558	Under Insertion of Central Venous Access Device	$9,280
36560	Under Insertion of Central Venous Access Device	$17,094
36561	Under Insertion of Central Venous Access Device	$14,127
36563	Under Insertion of Central Venous Access Device	$16,138
36565	Under Insertion of Central Venous Access Device	$11,618
36566	Under Insertion of Central Venous Access Device	$66,766
36568	Under Insertion of Central Venous Access Device	$2,822
36569	Under Insertion of Central Venous Access Device	$3,199
36570	Under Insertion of Central Venous Access Device	$18,234
36571	Under Insertion of Central Venous Access Device	$15,934
36575	Under Repair of Central Venous Access Device	$2,141
36576	Under Repair of Central Venous Access Device	$4,141
36578	Under Partial Replacement of Central Venous Access Device (Catheter Only)	$5,873
36580	Under Complete Replacement of Central Venous Access Device Through Same Venous A	$2,779
36581	Under Complete Replacement of Central Venous Access Device Through Same Venous Access Site	$9,145
36582	Under Complete Replacement of Central Venous Access Device Through Same Venous Access Site	$13,053
36583	Under Complete Replacement of Central Venous Access Device Through Same Venous Access Site	$16,573
36584	Under Complete Replacement of Central Venous Access Device Through Same Venous Access Site	$2,654
36585	Under Complete Replacement of Central Venous Access Device Through Same Venous Access Site	$13,784
36589	Under Removal of Central Venous Access Device	$2,154
36590	Under Removal of Central Venous Access Device	$2,942
36591	Under Other Central Venous Access Procedures	$312
36592	Under Other Central Venous Access Procedures	$348
36593	Under Other Central Venous Access Procedures	$414
36595	Under Other Central Venous Access Procedures	$7,644
36596	Under Other Central Venous Access Procedures	$1,705
36597	Under Other Central Venous Access Procedures	$1,655
36598	Under Other Central Venous Access Procedures	$1,448
36600	Under Arterial Procedures	$424
36620	Under Arterial Procedures	$576
36625	Under Arterial Procedures	$1,416
36640	Under Arterial Procedures	$1,492
36660	Under Arterial Procedures	$894
36680	Under Intraosseous Procedures on Arteries and Veins	$786
36800	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or S	$1,637
36810	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$2,859

Procedure Code	Modifier	Fee
36815	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$1,875
36818	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$9,586
36819	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$10,104
36820	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$10,136
36821	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$9,168
36823	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$19,146
36825	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$11,016
36830	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$9,202
36831	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$8,520
36832	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$10,450
36833	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$11,221
36835	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$6,526
36838	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$15,862
36860	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$2,936
36861	Under Hemodialysis Access, Intervascular Cannulation for Extracorporeal Circulation, or Shunt Insertion Procedures on Arteries and Veins	$1,916
36901	Under Dialysis Circuit Procedures	$7,766
36902	Under Dialysis Circuit Procedures	$16,132
36903	Under Dialysis Circuit Procedures	$72,435
36904	Under Dialysis Circuit Procedures	$23,451
36905	Under Dialysis Circuit Procedures	$29,723
36906	Under Dialysis Circuit Procedures	$87,928
36907	Under Dialysis Circuit Procedures	$9,768
36908	Under Dialysis Circuit Procedures	$34,978
36909	Under Dialysis Circuit Procedures	$25,448
37140	Under Portal Decompression Procedures on Arteries and Veins	$31,923
37145	Under Portal Decompression Procedures on Arteries and Veins	$29,621
37160	Under Portal Decompression Procedures on Arteries and Veins	$30,408
37180	Under Portal Decompression Procedures on Arteries and Veins	$29,267
37181	Under Portal Decompression Procedures on Arteries and Veins	$31,923
37182	Under Portal Decompression Procedures on Arteries and Veins	$10,874
37183	Under Portal Decompression Procedures on Arteries and Veins	$74,985
37184	Under Arterial Mechanical Thrombectomy Procedures	$28,794
37185	Under Arterial Mechanical Thrombectomy Procedures	$9,174
37186	Under Arterial Mechanical Thrombectomy Procedures	$17,311
37187	Under Venous Mechanical Thrombectomy Procedures	$25,703

Procedure Code	Modifier	Fee
37188	Under Venous Mechanical Thrombectomy Procedures	$21,658
37191	Under Other Transcatheteral Procedures	$33,132
37192	Under Other Transcatheteral Procedures	$17,675
37193	Under Other Transcatheteral Procedures	$19,824
37195	Under Other Transcatheteral Procedures	$ -
37197	Under Other Transcatheteral Procedures	$18,805
37200	Under Other Transcatheteral Procedures	$2,870
37211	Under Other Transcatheteral Procedures	$5,244
37212	Under Other Transcatheteral Procedures	$4,574
37213	Under Other Transcatheteral Procedures	$3,149
37214	Under Other Transcatheteral Procedures	$1,654
37215	Under Other Transcatheteral Procedures	$13,859
37217	Under Other Transcatheteral Procedures	$14,946
37218	Under Other Transcatheteral Procedures	$11,174
37220	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$39,667
37221	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$58,778
37222	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$11,192
37223	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$32,907
37224	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$48,129
37225	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$140,979
37226	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$115,270
37227	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$190,717
37228	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$68,834
37229	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$139,066
37230	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$106,383
37231	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$172,320
37232	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$15,399
37233	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$18,680
37234	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$50,308
37235	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$53,227
37236	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$49,795
37237	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$31,310

Procedure Code	Modifier	Fee
37238	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$53,786
37239	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$26,078
37241	Under Vascular Embolization and Occlusion	$61,198
37242	Under Vascular Embolization and Occlusion	$94,566
37243	Under Vascular Embolization and Occlusion	$125,102
37244	Under Vascular Embolization and Occlusion	$87,222
37246	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$27,675
37247	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$11,184
37248	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$19,207
37249	Under Endovascular Revascularization (Open or Percutaneous, Transcatheter) Procedures	$8,218
37252	Under Intravascular Ultrasound Procedures on Arteries and Veins	$17,713
37253	Under Intravascular Ultrasound Procedures on Arteries and Veins	$2,707
37500	Under Vascular Endoscopy Procedures	$8,766
37565	Under Ligation Procedures on Arteries and Veins	$9,690
37600	Under Ligation Procedures on Arteries and Veins	$9,733
37605	Under Ligation Procedures on Arteries and Veins	$10,207
37606	Under Ligation Procedures on Arteries and Veins	$10,125
37607	Under Ligation Procedures on Arteries and Veins	$5,158
37609	Under Ligation Procedures on Arteries and Veins	$4,094
37615	Under Ligation Procedures on Arteries and Veins	$7,146
37616	Under Ligation Procedures on Arteries and Veins	$15,321
37617	Under Ligation Procedures on Arteries and Veins	$18,372
37618	Under Ligation Procedures on Arteries and Veins	$5,231
37619	Under Ligation Procedures on Arteries and Veins	$23,769
37650	Under Ligation Procedures on Arteries and Veins	$6,320
37660	Under Ligation Procedures on Arteries and Veins	$18,114
37700	Under Ligation Procedures on Arteries and Veins	$3,377
37718	Under Ligation Procedures on Arteries and Veins	$5,925
37722	Under Ligation Procedures on Arteries and Veins	$6,518
37735	Under Ligation Procedures on Arteries and Veins	$8,004
37760	Under Ligation Procedures on Arteries and Veins	$8,491
37761	Under Ligation Procedures on Arteries and Veins	$7,449
37765	Under Ligation Procedures on Arteries and Veins	$8,664
37766	Under Ligation Procedures on Arteries and Veins	$10,326
37780	Under Ligation Procedures on Arteries and Veins	$3,213
37785	Under Ligation Procedures on Arteries and Veins	$4,714
37788	Under Other Artery and Vein Procedures	$16,785
37790	Under Other Artery and Vein Procedures	$6,471
38100	Under Excision Procedures on the Spleen	$15,815
38101	Under Excision Procedures on the Spleen	$16,030
38102	Under Excision Procedures on the Spleen	$3,630

Procedure Code	Modifier	Fee
38115	Under Repair Procedures on the Spleen	$17,490
38120	Under Laparoscopic Procedures on the Spleen	$14,407
38200	Under Injection Procedure on the Spleen	$1,747
38205	Under Bone Marrow or Stem Cell Services/Procedures	$1,090
38206	Under Bone Marrow or Stem Cell Services/Procedures	$1,085
38220	Under Bone Marrow or Stem Cell Services/Procedures	$2,219
38221	Under Bone Marrow or Stem Cell Services/Procedures	$1,979
38222	Under Bone Marrow or Stem Cell Services/Procedures	$2,196
38230	Under Bone Marrow or Stem Cell Services/Procedures	$2,818
38232	Under Bone Marrow or Stem Cell Services/Procedures	$2,664
38240	Under Transplantation and Post-Transplantation Cellular Infusion Procedures on the Hemic and Lymphatic Systems	$2,947
38241	Under Transplantation and Post-Transplantation Cellular Infusion Procedures on the Hemic and Lymphatic Systems	$2,207
38242	Under Transplantation and Post-Transplantation Cellular Infusion Procedures on the Hemic and Lymphatic Systems	$1,553
38243	Under Transplantation and Post-Transplantation Cellular Infusion Procedures on the Hemic and Lymphatic Systems	$1,410
38300	Under Incision Procedures on the Lymph Nodes and Lymphatic Channels	$4,193
38305	Under Incision Procedures on the Lymph Nodes and Lymphatic Channels	$6,575
38308	Under Incision Procedures on the Lymph Nodes and Lymphatic Channels	$6,061
38380	Under Incision Procedures on the Lymph Nodes and Lymphatic Channels	$7,444
38381	Under Incision Procedures on the Lymph Nodes and Lymphatic Channels	$10,967
38382	Under Incision Procedures on the Lymph Nodes and Lymphatic Channels	$9,187
38500	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$4,446
38505	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$1,631
38510	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$6,887
38520	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$6,273
38525	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$5,957
38530	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$7,561
38542	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$6,884
38550	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$6,921
38555	Under Excision Procedures on the Lymph Nodes and Lymphatic Channels	$13,782
38562	Under Limited Lymphadenectomy for Staging Procedures	$9,543
38564	Under Limited Lymphadenectomy for Staging Procedures	$9,560
38570	Under Laparoscopic Procedures on the Lymph Nodes and Lymphatic Channels	$6,824
38571	Under Laparoscopic Procedures on the Lymph Nodes and Lymphatic Channels	$8,834
38572	Under Laparoscopic Procedures on the Lymph Nodes and Lymphatic Channels	$12,487
38573	Under Laparoscopic Procedures on the Lymph Nodes and Lymphatic Channels	$15,667
38700	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$10,614
38720	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$17,849
38724	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$19,171
38740	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$9,484
38745	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$11,989
38746	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$2,964
38747	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$3,680

Procedure Code	Modifier	Fee
38760	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$11,463
38765	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$17,632
38770	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$10,839
38780	Under Radical Lymphadenectomy (Radical Resection of Lymph Nodes)	$13,775
38790	Under Introduction Procedures on the Lymph Nodes and Lymphatic Channels	$1,114
38792	Under Introduction Procedures on the Lymph Nodes and Lymphatic Channels	$522
38794	Under Introduction Procedures on the Lymph Nodes and Lymphatic Channels	$3,920
38900	Under Other Procedures of the Hemic or Lymphatic System	$1,898
39000	Under Incision Procedures on the Mediastinum	$6,737
39010	Under Incision Procedures on the Mediastinum	$10,746
39200	Under Excision/Resection Procedures on the Mediastinum	$12,005
39220	Under Excision/Resection Procedures on the Mediastinum	$15,541
39401	Under Endoscopy Procedures on the Mediastinum	$4,276
39402	Under Endoscopy Procedures on the Mediastinum	$5,583
39501	Under Repair Procedures on the Diaphragm	$11,601
39503	Under Repair Procedures on the Diaphragm	$79,505
39540	Under Repair Procedures on the Diaphragm	$11,877
39541	Under Repair Procedures on the Diaphragm	$12,809
39545	Under Repair Procedures on the Diaphragm	$12,169
39560	Under Repair Procedures on the Diaphragm	$10,928
39561	Under Repair Procedures on the Diaphragm	$16,973
40490	Under Excision Procedures on the Lips	$1,688
40500	Under Excision Procedures on the Lips	$6,645
40510	Under Excision Procedures on the Lips	$6,354
40520	Under Excision Procedures on the Lips	$6,443
40525	Under Excision Procedures on the Lips	$7,331
40527	Under Excision Procedures on the Lips	$8,096
40530	Under Excision Procedures on the Lips	$7,038
40650	Under Repair Procedures on the Lips	$5,788
40652	Under Repair Procedures on the Lips	$6,487
40654	Under Repair Procedures on the Lips	$7,551
40700	Under Repair Procedures on the Lips	$13,524
40701	Under Repair Procedures on the Lips	$16,024
40702	Under Repair Procedures on the Lips	$13,447
40720	Under Repair Procedures on the Lips	$13,820
40761	Under Repair Procedures on the Lips	$14,580
40800	Under Incision Procedures on the Vestibule of Mouth	$2,805
40801	Under Incision Procedures on the Vestibule of Mouth	$4,146
40804	Under Incision Procedures on the Vestibule of Mouth	$2,415
40805	Under Incision Procedures on the Vestibule of Mouth	$4,234
40806	Under Incision Procedures on the Vestibule of Mouth	$1,365
40808	Under Excision and Destruction Procedures on the Vestibule of Mouth	$2,450
40810	Under Excision and Destruction Procedures on the Vestibule of Mouth	$2,718
40812	Under Excision and Destruction Procedures on the Vestibule of Mouth	$3,815
40814	Under Excision and Destruction Procedures on the Vestibule of Mouth	$5,113

Procedure Code	Modifier	Fee
40816	Under Excision and Destruction Procedures on the Vestibule of Mouth	$5,317
40818	Under Excision and Destruction Procedures on the Vestibule of Mouth	$4,764
40819	Under Excision and Destruction Procedures on the Vestibule of Mouth	$4,205
40820	Under Excision and Destruction Procedures on the Vestibule of Mouth	$3,478
40830	Under Repair Procedures on the Vestibule of Mouth	$3,553
40831	Under Repair Procedures on the Vestibule of Mouth	$4,495
40840	Under Repair Procedures on the Vestibule of Mouth	$10,734
40842	Under Repair Procedures on the Vestibule of Mouth	$10,466
40843	Under Repair Procedures on the Vestibule of Mouth	$14,232
40844	Under Repair Procedures on the Vestibule of Mouth	$17,671
40845	Under Repair Procedures on the Vestibule of Mouth	$19,251
41000	Under Incision Procedures on the Tongue and Floor of Mouth	$2,141
41005	Under Incision Procedures on the Tongue and Floor of Mouth	$2,937
41006	Under Incision Procedures on the Tongue and Floor of Mouth	$4,782
41007	Under Incision Procedures on the Tongue and Floor of Mouth	$4,689
41008	Under Incision Procedures on the Tongue and Floor of Mouth	$5,044
41009	Under Incision Procedures on the Tongue and Floor of Mouth	$5,378
41010	Under Incision Procedures on the Tongue and Floor of Mouth	$2,639
41015	Under Incision Procedures on the Tongue and Floor of Mouth	$5,675
41016	Under Incision Procedures on the Tongue and Floor of Mouth	$5,864
41017	Under Incision Procedures on the Tongue and Floor of Mouth	$5,950
41018	Under Incision Procedures on the Tongue and Floor of Mouth	$6,760
41019	Under Incision Procedures on the Tongue and Floor of Mouth	$6,185
41100	Under Excision Procedures on the Tongue and Floor of Mouth	$2,217
41105	Under Excision Procedures on the Tongue and Floor of Mouth	$2,261
41108	Under Excision Procedures on the Tongue and Floor of Mouth	$1,955
41110	Under Excision Procedures on the Tongue and Floor of Mouth	$2,787
41112	Under Excision Procedures on the Tongue and Floor of Mouth	$4,426
41113	Under Excision Procedures on the Tongue and Floor of Mouth	$4,847
41114	Under Excision Procedures on the Tongue and Floor of Mouth	$8,433
41115	Under Excision Procedures on the Tongue and Floor of Mouth	$3,221
41116	Under Excision Procedures on the Tongue and Floor of Mouth	$4,362
41120	Under Excision Procedures on the Tongue and Floor of Mouth	$14,257
41130	Under Excision Procedures on the Tongue and Floor of Mouth	$17,577
41135	Under Excision Procedures on the Tongue and Floor of Mouth	$28,958
41140	Under Excision Procedures on the Tongue and Floor of Mouth	$29,022
41145	Under Excision Procedures on the Tongue and Floor of Mouth	$36,794
41150	Under Excision Procedures on the Tongue and Floor of Mouth	$29,246
41153	Under Excision Procedures on the Tongue and Floor of Mouth	$31,695
41155	Under Excision Procedures on the Tongue and Floor of Mouth	$40,239
41250	Under Repair Procedures on the Tongue and Floor of Mouth	$3,537
41251	Under Repair Procedures on the Tongue and Floor of Mouth	$3,927
41252	Under Repair Procedures on the Tongue and Floor of Mouth	$4,166
41500	Deleted	$6,197
41510	Under Other Procedures on the Tongue and Floor of Mouth	$5,994

Procedure Code	Modifier	Fee
41512	Under Other Procedures on the Tongue and Floor of Mouth	$8,702
41520	Under Other Procedures on the Tongue and Floor of Mouth	$4,561
41530	Under Other Procedures on the Tongue and Floor of Mouth	$12,654
41800	Under Incision Procedures on the Dentoalveolar Structures	$3,716
41805	Under Incision Procedures on the Dentoalveolar Structures	$3,710
41806	Under Incision Procedures on the Dentoalveolar Structures	$5,157
41822	Under Excision and Destruction Procedures on the Dentoalveolar Structures	$4,003
41823	Under Excision and Destruction Procedures on the Dentoalveolar Structures	$5,913
41825	Under Excision and Destruction Procedures on the Dentoalveolar Structures	$2,808
41826	Under Excision and Destruction Procedures on the Dentoalveolar Structures	$4,189
41827	Under Excision and Destruction Procedures on the Dentoalveolar Structures	$5,830
41828	Under Excision and Destruction Procedures on the Dentoalveolar Structures	$4,181
41830	Under Excision and Destruction Procedures on the Dentoalveolar Structures	$5,340
41872	Under Other Procedures on the Dentoalveolar Structures	$4,571
41874	Under Other Procedures on the Dentoalveolar Structures	$5,092
42000	Under Incision Procedures on the Palate and Uvula	$2,006
42100	Under Excision and Destruction Procedures on the Palate and Uvula	$1,972
42104	Under Excision and Destruction Procedures on the Palate and Uvula	$2,828
42106	Under Excision and Destruction Procedures on the Palate and Uvula	$3,619
42107	Under Excision and Destruction Procedures on the Palate and Uvula	$6,102
42120	Under Excision and Destruction Procedures on the Palate and Uvula	$13,411
42140	Under Excision and Destruction Procedures on the Palate and Uvula	$3,298
42145	Under Excision and Destruction Procedures on the Palate and Uvula	$9,244
42160	Under Excision and Destruction Procedures on the Palate and Uvula	$3,029
42180	Under Repair Procedures on the Palate and Uvula	$3,174
42182	Under Repair Procedures on the Palate and Uvula	$4,178
42200	Under Repair Procedures on the Palate and Uvula	$12,765
42205	Under Repair Procedures on the Palate and Uvula	$13,320
42210	Under Repair Procedures on the Palate and Uvula	$14,826
42215	Under Repair Procedures on the Palate and Uvula	$9,695
42220	Under Repair Procedures on the Palate and Uvula	$7,997
42225	Under Repair Procedures on the Palate and Uvula	$13,253
42226	Under Repair Procedures on the Palate and Uvula	$11,658
42227	Under Repair Procedures on the Palate and Uvula	$10,950
42235	Under Repair Procedures on the Palate and Uvula	$9,571
42260	Under Repair Procedures on the Palate and Uvula	$10,605
42280	Under Repair Procedures on the Palate and Uvula	$2,311
42281	Under Repair Procedures on the Palate and Uvula	$2,997
42300	Under Incision Procedures on the Salivary Gland and Ducts	$2,733
42305	Under Incision Procedures on the Salivary Gland and Ducts	$5,692
42310	Under Incision Procedures on the Salivary Gland and Ducts	$2,345
42320	Under Incision Procedures on the Salivary Gland and Ducts	$3,246
42330	Under Incision Procedures on the Salivary Gland and Ducts	$3,037
42335	Under Incision Procedures on the Salivary Gland and Ducts	$4,895
42340	Under Incision Procedures on the Salivary Gland and Ducts	$6,106

Procedure Code	Modifier	Fee
42400	Under Excision Procedures on the Salivary Gland and Ducts	$1,358
42405	Under Excision Procedures on the Salivary Gland and Ducts	$3,911
42408	Under Excision Procedures on the Salivary Gland and Ducts	$6,584
42409	Under Excision Procedures on the Salivary Gland and Ducts	$4,343
42410	Under Excision Procedures on the Salivary Gland and Ducts	$8,233
42415	Under Excision Procedures on the Salivary Gland and Ducts	$13,903
42420	Under Excision Procedures on the Salivary Gland and Ducts	$15,623
42425	Under Excision Procedures on the Salivary Gland and Ducts	$11,028
42426	Under Excision Procedures on the Salivary Gland and Ducts	$17,808
42440	Under Excision Procedures on the Salivary Gland and Ducts	$5,423
42450	Under Excision Procedures on the Salivary Gland and Ducts	$5,942
42500	Under Repair Procedures on the Salivary Gland and Ducts	$5,682
42505	Under Repair Procedures on the Salivary Gland and Ducts	$7,278
42507	Under Repair Procedures on the Salivary Gland and Ducts	$6,706
42509	Under Repair Procedures on the Salivary Gland and Ducts	$11,079
42510	Under Repair Procedures on the Salivary Gland and Ducts	$8,224
42550	Under Other Procedures on the Salivary Gland and Ducts	$1,768
42600	Under Other Procedures on the Salivary Gland and Ducts	$6,250
42650	Under Other Procedures on the Salivary Gland and Ducts	$1,088
42660	Under Other Procedures on the Salivary Gland and Ducts	$1,746
42665	Under Other Procedures on the Salivary Gland and Ducts	$4,085
42700	Under Incision Procedures on the Pharynx, Adenoids, and Tonsils	$2,473
42720	Under Incision Procedures on the Pharynx, Adenoids, and Tonsils	$5,979
42725	Under Incision Procedures on the Pharynx, Adenoids, and Tonsils	$10,874
42800	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,062
42804	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,529
42806	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,852
42808	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,953
42809	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,642
42810	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$5,062
42815	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$7,319
42820	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$3,805
42821	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$3,948
42825	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$3,433
42826	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$3,302
42830	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,711

Procedure Code	Modifier	Fee
42831	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,928
42835	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,518
42836	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$3,158
42842	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$13,381
42844	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$18,435
42845	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$29,680
42860	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$2,456
42870	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$7,842
42890	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$19,043
42892	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$25,010
42894	Under Excision and Destruction Procedures on the Pharynx, Adenoids, and Tonsils	$31,551
42900	Under Repair Procedures on the Pharynx, Adenoids, and Tonsils	$4,453
42950	Under Repair Procedures on the Pharynx, Adenoids, and Tonsils	$10,789
42953	Under Repair Procedures on the Pharynx, Adenoids, and Tonsils	$12,940
42955	Under Other Procedures on the Pharynx, Adenoids, and Tonsils	$10,180
42960	Under Other Procedures on the Pharynx, Adenoids, and Tonsils	$2,232
42961	Under Other Procedures on the Pharynx, Adenoids, and Tonsils	$5,526
42962	Under Other Procedures on the Pharynx, Adenoids, and Tonsils	$6,828
42970	Under Other Procedures on the Pharynx, Adenoids, and Tonsils	$5,436
42971	Under Other Procedures on the Pharynx, Adenoids, and Tonsils	$6,001
42972	Under Other Procedures on the Pharynx, Adenoids, and Tonsils	$6,718
43020	Under Incision Procedures on the Esophagus	$7,610
43030	Under Incision Procedures on the Esophagus	$6,855
43045	Under Incision Procedures on the Esophagus	$17,845
43100	Under Excision Procedures on the Esophagus	$8,228
43101	Under Excision Procedures on the Esophagus	$13,800
43107	Under Excision Procedures on the Esophagus	$40,960
43108	Under Excision Procedures on the Esophagus	$61,226
43112	Under Excision Procedures on the Esophagus	$48,050
43113	Under Excision Procedures on the Esophagus	$59,796
43116	Under Excision Procedures on the Esophagus	$68,347
43117	Under Excision Procedures on the Esophagus	$44,624
43118	Under Excision Procedures on the Esophagus	$49,987
43121	Under Excision Procedures on the Esophagus	$39,360
43122	Under Excision Procedures on the Esophagus	$35,088
43123	Under Excision Procedures on the Esophagus	$61,969
43124	Under Excision Procedures on the Esophagus	$52,361

Procedure Code	Modifier	Fee
43130	Under Excision Procedures on the Esophagus	$10,463
43135	Under Excision Procedures on the Esophagus	$20,500
43180	Under Esophagoscopy	$7,255
43191	Under Esophagoscopy	$2,057
43192	Under Esophagoscopy	$2,239
43193	Under Esophagoscopy	$2,253
43194	Under Esophagoscopy	$2,593
43195	Under Esophagoscopy	$2,468
43196	Under Esophagoscopy	$2,627
43197	Under Esophagoscopy	$2,503
43198	Under Esophagoscopy	$2,759
43200	Under Esophagoscopy	$2,810
43201	Under Esophagoscopy	$2,877
43202	Under Esophagoscopy	$4,005
43204	Under Esophagoscopy	$1,826
43205	Under Esophagoscopy	$1,910
43206	Under Esophagoscopy	$3,478
43210	Under Esophagogastroduodenoscopy	$6,189
43211	Under Esophagoscopy	$3,189
43212	Under Esophagoscopy	$2,597
43213	Under Esophagoscopy	$14,942
43214	Under Esophagoscopy	$2,612
43215	Under Esophagoscopy	$4,707
43216	Under Esophagoscopy	$4,660
43217	Under Esophagoscopy	$4,964
43220	Under Esophagoscopy	$13,905
43226	Under Esophagoscopy	$4,136
43227	Under Esophagoscopy	$8,194
43229	Under Esophagoscopy	$8,442
43231	Under Esophagoscopy	$4,359
43232	Under Esophagoscopy	$5,281
43233	Under Esophagogastroduodenoscopy	$3,105
43235	Under Esophagogastroduodenoscopy	$3,350
43236	Under Esophagogastroduodenoscopy	$4,290
43237	Under Esophagogastroduodenoscopy	$2,658
43238	Under Esophagogastroduodenoscopy	$3,150
43239	Under Esophagogastroduodenoscopy	$4,472
43240	Under Esophagogastroduodenoscopy	$5,310
43241	Under Esophagogastroduodenoscopy	$1,929
43242	Under Esophagogastroduodenoscopy	$3,557
43243	Under Esophagogastroduodenoscopy	$3,213
43244	Under Esophagogastroduodenoscopy	$3,318
43245	Under Esophagogastroduodenoscopy	$7,224
43246	Under Esophagogastroduodenoscopy	$2,729
43247	Under Esophagogastroduodenoscopy	$4,578

Procedure Code	Modifier	Fee
43248	Under Esophagogastroduodenoscopy	$4,566
43249	Under Esophagogastroduodenoscopy	$13,232
43250	Under Esophagogastroduodenoscopy	$5,211
43251	Under Esophagogastroduodenoscopy	$5,761
43252	Under Esophagogastroduodenoscopy	$3,969
43253	Under Esophagogastroduodenoscopy	$3,557
43254	Under Esophagogastroduodenoscopy	$3,661
43255	Under Esophagogastroduodenoscopy	$8,668
43257	Under Esophagogastroduodenoscopy	$3,156
43259	Under Esophagogastroduodenoscopy	$3,059
43260	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$4,369
43261	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$4,591
43262	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$4,832
43263	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$4,841
43264	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$4,929
43265	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$5,859
43266	Under Esophagogastroduodenoscopy	$2,963
43270	Under Esophagogastroduodenoscopy	$8,698
43273	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$1,618
43274	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$6,267
43275	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$5,102
43276	Under Endoscopic Retrograde Cholangiopancreatography (ERCP)	$6,523
43277	Under Endoscopic Retrograde Cholangiopancreatography	$5,129
43278	Under Endoscopic Retrograde Cholangiopancreatography	$5,868
43279	Under Laparoscopic Procedures on the Esophagus	$17,702
43280	Under Laparoscopic Procedures on the Esophagus	$14,832
43281	Under Laparoscopic Procedures on the Esophagus	$21,202
43282	Under Laparoscopic Procedures on the Esophagus	$23,850
43283	Under Laparoscopic Procedures on the Esophagus	$2,191
43284	Under Laparoscopic Procedures on the Esophagus	$8,911
43285	Under Laparoscopic Procedures on the Esophagus	$8,324
43286	Under Laparoscopic Procedures on the Esophagus	$42,752
43287	Under Laparoscopic Procedures on the Esophagus	$48,953
43288	Under Laparoscopic Procedures on the Esophagus	$50,913
43300	Under Repair Procedures on the Esophagus	$8,080
43305	Under Repair Procedures on the Esophagus	$14,351
43310	Under Repair Procedures on the Esophagus	$20,412
43312	Under Repair Procedures on the Esophagus	$22,014
43313	Under Repair Procedures on the Esophagus	$37,583
43314	Under Repair Procedures on the Esophagus	$40,495
43320	Under Repair Procedures on the Esophagus	$19,203
43325	Under Repair Procedures on the Esophagus	$18,685
43327	Under Repair Procedures on the Esophagus	$11,272
43328	Under Repair Procedures on the Esophagus	$15,527
43330	Under Repair Procedures on the Esophagus	$18,370

Procedure Code	Modifier	Fee
43331	Under Repair Procedures on the Esophagus	$18,440
43332	Under Repair Procedures on the Esophagus	$15,924
43333	Under Repair Procedures on the Esophagus	$17,349
43334	Under Repair Procedures on the Esophagus	$17,161
43335	Under Repair Procedures on the Esophagus	$18,453
43336	Under Repair Procedures on the Esophagus	$20,676
43337	Under Repair Procedures on the Esophagus	$21,328
43338	Under Repair Procedures on the Esophagus	$1,604
43340	Under Repair Procedures on the Esophagus	$18,966
43341	Under Repair Procedures on the Esophagus	$19,257
43351	Under Repair Procedures on the Esophagus	$18,051
43352	Under Repair Procedures on the Esophagus	$14,637
43360	Under Repair Procedures on the Esophagus	$31,032
43361	Under Repair Procedures on the Esophagus	$37,074
43400	Under Repair Procedures on the Esophagus	$20,948
43401	Under Repair Procedures on the Esophagus	$21,630
43405	Under Repair Procedures on the Esophagus	$19,984
43410	Under Repair Procedures on the Esophagus	$13,518
43415	Under Repair Procedures on the Esophagus	$35,458
43420	Under Repair Procedures on the Esophagus	$13,379
43425	Under Repair Procedures on the Esophagus	$19,850
43450	Under Manipulation Procedures on the Esophagus	$2,051
43453	Under Manipulation Procedures on the Esophagus	$11,836
43460	Under Manipulation Procedures on the Esophagus	$2,891
43496	Under Other Procedures on the Esophagus	$ -
43500	Under Incision Procedures on the Stomach	$10,733
43501	Under Incision Procedures on the Stomach	$18,438
43502	Under Incision Procedures on the Stomach	$20,992
43510	Under Incision Procedures on the Stomach	$12,977
43520	Under Incision Procedures on the Stomach	$9,332
43605	Under Excision Procedures on the Stomach	$11,445
43610	Under Excision Procedures on the Stomach	$13,408
43611	Under Excision Procedures on the Stomach	$16,796
43620	Under Excision Procedures on the Stomach	$27,205
43621	Under Excision Procedures on the Stomach	$31,208
43622	Under Excision Procedures on the Stomach	$31,868
43631	Under Excision Procedures on the Stomach	$19,882
43632	Under Excision Procedures on the Stomach	$27,932
43633	Under Excision Procedures on the Stomach	$26,397
43634	Under Excision Procedures on the Stomach	$29,312
43635	Under Excision Procedures on the Stomach	$1,563
43640	Under Excision Procedures on the Stomach	$16,158
43641	Under Excision Procedures on the Stomach	$16,538
43644	Under Laparoscopic Procedures on the Stomach	$23,758
43645	Under Laparoscopic Procedures on the Stomach	$25,282

Procedure Code	Modifier	Fee
43647	Under Laparoscopic Procedures on the Stomach	$ -
43648	Under Laparoscopic Procedures on the Stomach	$ -
43651	Under Laparoscopic Procedures on the Stomach	$8,965
43652	Under Laparoscopic Procedures on the Stomach	$10,484
43653	Under Laparoscopic Procedures on the Stomach	$7,821
43752	Under Introduction Procedures on the Stomach	$539
43753	Under Introduction Procedures on the Stomach	$291
43754	Under Introduction Procedures on the Stomach	$1,749
43755	Under Introduction Procedures on the Stomach	$1,792
43756	Under Introduction Procedures on the Stomach	$2,696
43757	Under Introduction Procedures on the Stomach	$3,819
43760	Deleted	$6,426
43761	Under Introduction Procedures on the Stomach	$1,548
43770	Under Laparoscopic Bariatric Surgery Procedures	$15,350
43771	Under Laparoscopic Bariatric Surgery Procedures	$17,514
43772	Under Laparoscopic Bariatric Surgery Procedures	$13,102
43773	Under Laparoscopic Bariatric Surgery Procedures	$17,555
43774	Under Laparoscopic Bariatric Surgery Procedures	$13,154
43775	Under Laparoscopic Bariatric Surgery Procedures	$15,363
43800	Under Other Procedures on the Stomach	$12,728
43810	Under Other Procedures on the Stomach	$14,001
43820	Under Other Procedures on the Stomach	$18,430
43825	Under Other Procedures on the Stomach	$18,006
43830	Under Other Procedures on the Stomach	$9,549
43831	Under Other Procedures on the Stomach	$8,112
43832	Under Other Procedures on the Stomach	$14,182
43840	Under Other Procedures on the Stomach	$18,652
43843	Under Other Procedures on the Stomach	$17,610
43845	Under Other Procedures on the Stomach	$27,065
43846	Under Other Procedures on the Stomach	$22,187
43847	Under Other Procedures on the Stomach	$24,810
43848	Under Other Procedures on the Stomach	$26,410
43850	Under Other Procedures on the Stomach	$22,424
43855	Under Other Procedures on the Stomach	$23,261
43860	Under Other Procedures on the Stomach	$22,461
43865	Under Other Procedures on the Stomach	$23,545
43870	Under Other Procedures on the Stomach	$9,697
43880	Under Other Procedures on the Stomach	$21,927
43881	Under Other Procedures on the Stomach	$ -
43882	Under Other Procedures on the Stomach	$ -
43886	Under Other Procedures on the Stomach	$4,931
43887	Under Other Procedures on the Stomach	$4,451
43888	Under Other Procedures on the Stomach	$6,293
44005	Under Incision Procedures on the Intestines (Except Rectum)	$15,023
44010	Under Incision Procedures on the Intestines (Except Rectum)	$11,686

Procedure Code	Modifier	Fee
44015	Under Incision Procedures on the Intestines (Except Rectum)	$1,966
44020	Under Incision Procedures on the Intestines (Except Rectum)	$13,329
44021	Under Incision Procedures on the Intestines (Except Rectum)	$13,328
44025	Under Incision Procedures on the Intestines (Except Rectum)	$13,422
44050	Under Incision Procedures on the Intestines (Except Rectum)	$12,795
44055	Under Incision Procedures on the Intestines (Except Rectum)	$20,445
44100	Under Excision Procedures on the Intestines (Except Rectum)	$1,463
44110	Under Excision Procedures on the Intestines (Except Rectum)	$11,603
44111	Under Excision Procedures on the Intestines (Except Rectum)	$13,386
44120	Under Excision Procedures on the Intestines (Except Rectum)	$16,792
44121	Under Excision Procedures on the Intestines (Except Rectum)	$3,335
44125	Under Excision Procedures on the Intestines (Except Rectum)	$16,141
44126	Under Excision Procedures on the Intestines (Except Rectum)	$33,960
44127	Under Excision Procedures on the Intestines (Except Rectum)	$39,286
44128	Under Excision Procedures on the Intestines (Except Rectum)	$3,377
44130	Under Excision Procedures on the Intestines (Except Rectum)	$17,974
44139	Under Excision Procedures on the Intestines (Except Rectum)	$1,674
44140	Under Excision Procedures on the Intestines (Except Rectum)	$18,378
44141	Under Excision Procedures on the Intestines (Except Rectum)	$25,000
44143	Under Excision Procedures on the Intestines (Except Rectum)	$22,803
44144	Under Excision Procedures on the Intestines (Except Rectum)	$24,229
44145	Under Excision Procedures on the Intestines (Except Rectum)	$22,646
44146	Under Excision Procedures on the Intestines (Except Rectum)	$28,919
44147	Under Excision Procedures on the Intestines (Except Rectum)	$26,593
44150	Under Excision Procedures on the Intestines (Except Rectum)	$25,523
44151	Under Excision Procedures on the Intestines (Except Rectum)	$29,684
44155	Under Excision Procedures on the Intestines (Except Rectum)	$28,322
44156	Under Excision Procedures on the Intestines (Except Rectum)	$31,798
44157	Under Excision Procedures on the Intestines (Except Rectum)	$30,139
44158	Under Excision Procedures on the Intestines (Except Rectum)	$30,917
44160	Under Excision Procedures on the Intestines (Except Rectum)	$16,996
44180	Under Laparoscopic Incision Procedures on the Intestines (Except Rectum)	$12,587
44186	Under Laparoscopic Enterostomy - External Fistulization of Intestines	$8,901
44187	Under Laparoscopic Enterostomy - External Fistulization of Intestines	$14,971
44188	Under Laparoscopic Enterostomy - External Fistulization of Intestines	$16,706
44202	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$18,960
44203	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$3,382
44204	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$21,011
44205	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$18,253
44206	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$23,924
44207	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$24,789
44208	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$27,006
44210	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$24,175
44211	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$28,680
44212	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$27,642

Procedure Code	Modifier	Fee
44213	Under Laparoscopic Excision Procedures on the Intestines (Except Rectum)	$2,579
44227	Under Laparoscopic Repair Procedure on the Intestines (Except Rectum)	$22,776
44300	Under Enterostomy-External Fistulization of Intestines Procedures	$11,548
44310	Under Enterostomy-External Fistulization of Intestines Procedures	$14,251
44312	Under Enterostomy-External Fistulization of Intestines Procedures	$8,013
44314	Under Enterostomy-External Fistulization of Intestines Procedures	$13,651
44316	Under Enterostomy-External Fistulization of Intestines Procedures	$19,454
44320	Under Enterostomy-External Fistulization of Intestines Procedures	$16,423
44322	Under Enterostomy-External Fistulization of Intestines Procedures	$13,644
44340	Under Enterostomy-External Fistulization of Intestines Procedures	$8,481
44345	Under Enterostomy-External Fistulization of Intestines Procedures	$14,347
44346	Under Enterostomy-External Fistulization of Intestines Procedures	$16,152
44360	Under Endoscopy, Small Intestine	$1,941
44361	Under Endoscopy, Small Intestine	$2,145
44363	Under Endoscopy, Small Intestine	$2,607
44364	Under Endoscopy, Small Intestine	$2,773
44365	Under Endoscopy, Small Intestine	$2,448
44366	Under Endoscopy, Small Intestine	$3,249
44369	Under Endoscopy, Small Intestine	$3,322
44370	Under Endoscopy, Small Intestine	$3,619
44372	Under Endoscopy, Small Intestine	$3,258
44373	Under Endoscopy, Small Intestine	$2,614
44376	Under Endoscopy, Small Intestine	$3,855
44377	Under Endoscopy, Small Intestine	$4,062
44378	Under Endoscopy, Small Intestine	$5,204
44379	Under Endoscopy, Small Intestine	$5,540
44380	Under Endoscopy, Stomal	$2,191
44381	Under Endoscopy, Stomal	$11,986
44382	Under Endoscopy, Stomal	$3,443
44384	Under Endoscopy, Stomal	$2,061
44385	Under Endoscopy, Stomal	$2,508
44386	Under Endoscopy, Stomal	$3,730
44388	Under Endoscopy, Stomal	$3,798
44388	Under Endoscopy, Stomal	$1,881
44389	Under Endoscopy, Stomal	$4,966
44390	Under Endoscopy, Stomal	$4,927
44391	Under Endoscopy, Stomal	$9,039
44392	Under Endoscopy, Stomal	$4,626
44394	Under Endoscopy, Stomal	$5,301
44401	Under Endoscopy, Stomal	$41,454
44402	Under Endoscopy, Stomal	$3,546
44403	Under Endoscopy, Stomal	$4,119
44404	Under Endoscopy, Stomal	$4,759
44405	Under Endoscopy, Stomal	$6,998
44406	Under Endoscopy, Stomal	$3,114

Procedure Code	Modifier	Fee
44407	Under Endoscopy, Stomal	$3,736
44408	Under Endoscopy, Stomal	$3,141
44500	Under Introduction Procedures on the Intestines (Except Rectum)	$254
44602	Under Repair Procedures on the Intestines (Except Rectum)	$19,372
44603	Under Repair Procedures on the Intestines (Except Rectum)	$22,213
44604	Under Repair Procedures on the Intestines (Except Rectum)	$14,504
44605	Under Repair Procedures on the Intestines (Except Rectum)	$17,841
44615	Under Repair Procedures on the Intestines (Except Rectum)	$14,714
44620	Under Repair Procedures on the Intestines (Except Rectum)	$11,832
44625	Under Repair Procedures on the Intestines (Except Rectum)	$13,833
44626	Under Repair Procedures on the Intestines (Except Rectum)	$21,931
44640	Under Repair Procedures on the Intestines (Except Rectum)	$19,172
44650	Under Repair Procedures on the Intestines (Except Rectum)	$19,741
44660	Under Repair Procedures on the Intestines (Except Rectum)	$18,061
44661	Under Repair Procedures on the Intestines (Except Rectum)	$21,142
44680	Under Repair Procedures on the Intestines (Except Rectum)	$14,524
44700	Under Other Procedures on the Intestines (Except Rectum)	$13,662
44701	Under Other Procedures on the Intestines (Except Rectum)	$2,363
44720	Under Other Procedures on the Intestines (Except Rectum)	$3,807
44721	Under Other Procedures on the Intestines (Except Rectum)	$5,326
44800	Under Excision Procedures on the Meckel's Diverticulum and the Mesentery	$10,421
44820	Under Excision Procedures on the Meckel's Diverticulum and the Mesentery	$11,611
44850	Under Suture Procedures on the Meckel's Diverticulum and the Mesentery	$10,227
44900	Under Incision Procedures on the Appendix	$10,641
44950	Under Excision Procedures on the Appendix	$8,792
44955	Under Excision Procedures on the Appendix	$1,154
44960	Under Excision Procedures on the Appendix	$11,990
44970	Under Laparoscopic Procedures on the Appendix	$8,224
45000	Under Incision Procedures on the Rectum	$5,743
45005	Under Incision Procedures on the Rectum	$3,664
45020	Under Incision Procedures on the Rectum	$7,805
45100	Under Excision Procedures on the Rectum	$4,033
45108	Under Excision Procedures on the Rectum	$5,040
45110	Under Excision Procedures on the Rectum	$25,057
45111	Under Excision Procedures on the Rectum	$14,762
45112	Under Excision Procedures on the Rectum	$25,328
45113	Under Excision Procedures on the Rectum	$25,468
45114	Under Excision Procedures on the Rectum	$25,033
45116	Under Excision Procedures on the Rectum	$20,960
45119	Under Excision Procedures on the Rectum	$25,567
45120	Under Excision Procedures on the Rectum	$21,887
45121	Under Excision Procedures on the Rectum	$23,924
45123	Under Excision Procedures on the Rectum	$15,178
45126	Under Excision Procedures on the Rectum	$36,779
45130	Under Excision Procedures on the Rectum	$14,699

Procedure Code	Modifier	Fee
45135	Under Excision Procedures on the Rectum	$17,496
45136	Under Excision Procedures on the Rectum	$24,317
45150	Under Excision Procedures on the Rectum	$5,662
45160	Under Excision Procedures on the Rectum	$14,031
45171	Under Excision Procedures on the Rectum	$8,115
45172	Under Excision Procedures on the Rectum	$10,955
45190	Under Destruction Procedures on the Rectum	$9,339
45300	Under Endoscopy Procedures on the Rectum	$1,642
45303	Under Endoscopy Procedures on the Rectum	$11,717
45305	Under Endoscopy Procedures on the Rectum	$1,894
45307	Under Endoscopy Procedures on the Rectum	$2,190
45308	Under Endoscopy Procedures on the Rectum	$2,141
45309	Under Endoscopy Procedures on the Rectum	$2,225
45315	Under Endoscopy Procedures on the Rectum	$2,469
45317	Under Endoscopy Procedures on the Rectum	$2,423
45320	Under Endoscopy Procedures on the Rectum	$2,395
45321	Under Endoscopy Procedures on the Rectum	$1,415
45327	Under Endoscopy Procedures on the Rectum	$1,619
45330	Under Endoscopy Procedures on the Rectum	$2,199
45331	Under Endoscopy Procedures on the Rectum	$3,360
45332	Under Endoscopy Procedures on the Rectum	$3,295
45333	Under Endoscopy Procedures on the Rectum	$3,845
45334	Under Endoscopy Procedures on the Rectum	$7,179
45335	Under Endoscopy Procedures on the Rectum	$3,057
45337	Under Endoscopy Procedures on the Rectum	$1,564
45338	Under Endoscopy Procedures on the Rectum	$3,519
45340	Under Endoscopy Procedures on the Rectum	$5,632
45341	Under Endoscopy Procedures on the Rectum	$1,664
45342	Under Endoscopy Procedures on the Rectum	$2,295
45346	Under Endoscopy Procedures on the Rectum	$39,820
45347	Under Endoscopy Procedures on the Rectum	$2,089
45349	Under Endoscopy Procedures on the Rectum	$2,698
45350	Under Endoscopy Procedures on the Rectum	$6,872
45378	Under Endoscopy Procedures on the Rectum	$4,145
45378	Under Endoscopy Procedures on the Rectum	$2,078
45379	Under Endoscopy Procedures on the Rectum	$5,337
45380	Under Endoscopy Procedures on the Rectum	$5,292
45381	Under Endoscopy Procedures on the Rectum	$5,065
45382	Under Endoscopy Procedures on the Rectum	$9,401
45384	Under Endoscopy Procedures on the Rectum	$5,896
45385	Under Endoscopy Procedures on the Rectum	$5,566
45386	Under Endoscopy Procedures on the Rectum	$7,635
45388	Under Endoscopy Procedures on the Rectum	$41,801
45389	Under Endoscopy Procedures on the Rectum	$3,938
45390	Under Endoscopy Procedures on the Rectum	$4,509

Procedure Code	Modifier	Fee
45391	Under Endoscopy Procedures on the Rectum	$3,490
45392	Under Endoscopy Procedures on the Rectum	$4,126
45393	Under Endoscopy Procedures on the Rectum	$3,437
45395	Under Excisional Laparoscopic Procedures on the Rectum	$26,763
45397	Under Excisional Laparoscopic Procedures on the Rectum	$29,072
45398	Under Endoscopy Procedures on the Rectum	$8,939
45400	Under Laparoscopic Repair Procedures on the Rectum	$15,421
45402	Under Laparoscopic Repair Procedures on the Rectum	$20,556
45500	Under Repair Procedures on the Rectum	$7,543
45505	Under Repair Procedures on the Rectum	$7,969
45520	Under Repair Procedures on the Rectum	$2,041
45540	Under Repair Procedures on the Rectum	$14,277
45541	Under Repair Procedures on the Rectum	$12,766
45550	Under Repair Procedures on the Rectum	$19,737
45560	Under Repair Procedures on the Rectum	$9,116
45562	Under Repair Procedures on the Rectum	$15,105
45563	Under Repair Procedures on the Rectum	$22,647
45800	Under Repair Procedures on the Rectum	$17,119
45805	Under Repair Procedures on the Rectum	$20,078
45820	Under Repair Procedures on the Rectum	$17,361
45825	Under Repair Procedures on the Rectum	$20,952
45900	Under Manipulation Procedures on the Rectum	$2,877
45905	Under Manipulation Procedures on the Rectum	$2,275
45910	Under Manipulation Procedures on the Rectum	$2,597
45915	Under Manipulation Procedures on the Rectum	$4,417
45990	Under Other Procedures	$1,447
46020	Under Incision Procedures on the Anus	$3,679
46030	Under Incision Procedures on the Anus	$1,853
46040	Under Incision Procedures on the Anus	$7,174
46045	Under Incision Procedures on the Anus	$5,845
46050	Under Incision Procedures on the Anus	$2,679
46060	Under Incision Procedures on the Anus	$6,406
46070	Under Incision Procedures on the Anus	$3,470
46080	Under Incision Procedures on the Anus	$3,329
46083	Under Incision Procedures on the Anus	$2,355
46200	Under Excision Procedures on the Anus	$5,928
46220	Under Excision Procedures on the Anus	$2,738
46221	Under Excision Procedures on the Anus	$3,547
46230	Under Excision Procedures on the Anus	$3,632
46250	Under Excision Procedures on the Anus	$6,180
46255	Under Excision Procedures on the Anus	$6,755
46257	Under Excision Procedures on the Anus	$5,726
46258	Under Excision Procedures on the Anus	$6,337
46260	Under Excision Procedures on the Anus	$6,425
46261	Under Excision Procedures on the Anus	$7,051

Procedure Code	Modifier	Fee
46262	Under Excision Procedures on the Anus	$7,435
46270	Under Excision Procedures on the Anus	$6,783
46275	Under Excision Procedures on the Anus	$7,180
46280	Under Excision Procedures on the Anus	$6,304
46285	Under Excision Procedures on the Anus	$7,151
46288	Under Excision Procedures on the Anus	$7,362
46320	Under Excision Procedures on the Anus	$2,448
46500	Under Introduction Procedures on the Anus	$2,487
46505	Under Introduction Procedures on the Anus	$3,803
46600	Under Endoscopy Procedures on the Anus	$1,169
46601	Under Endoscopy Procedures on the Anus	$1,770
46604	Under Endoscopy Procedures on the Anus	$8,136
46606	Under Endoscopy Procedures on the Anus	$2,992
46607	Under Endoscopy Procedures on the Anus	$2,508
46608	Under Endoscopy Procedures on the Anus	$3,160
46610	Under Endoscopy Procedures on the Anus	$3,031
46611	Under Endoscopy Procedures on the Anus	$2,348
46612	Under Endoscopy Procedures on the Anus	$3,654
46614	Under Endoscopy Procedures on the Anus	$1,715
46615	Under Endoscopy Procedures on the Anus	$1,912
46700	Under Repair Procedures on the Anus	$8,805
46705	Under Repair Procedures on the Anus	$7,506
46706	Under Repair Procedures on the Anus	$2,400
46707	Under Repair Procedures on the Anus	$6,565
46710	Under Repair Procedures on the Anus	$15,151
46712	Under Repair Procedures on the Anus	$30,640
46715	Under Repair Procedures on the Anus	$7,368
46716	Under Repair Procedures on the Anus	$16,496
46730	Under Repair Procedures on the Anus	$26,879
46735	Under Repair Procedures on the Anus	$31,040
46740	Under Repair Procedures on the Anus	$29,398
46742	Under Repair Procedures on the Anus	$34,065
46744	Under Repair Procedures on the Anus	$48,338
46746	Under Repair Procedures on the Anus	$53,257
46748	Under Repair Procedures on the Anus	$57,741
46750	Under Repair Procedures on the Anus	$10,025
46751	Under Repair Procedures on the Anus	$8,884
46753	Under Repair Procedures on the Anus	$8,329
46754	Under Repair Procedures on the Anus	$4,066
46760	Under Repair Procedures on the Anus	$14,623
46761	Under Repair Procedures on the Anus	$12,242
46900	Under Destruction Procedures on the Anus	$3,185
46910	Under Destruction Procedures on the Anus	$3,396
46916	Under Destruction Procedures on the Anus	$3,033
46917	Under Destruction Procedures on the Anus	$5,907

Procedure Code	Modifier	Fee
46922	Under Destruction Procedures on the Anus	$3,541
46924	Under Destruction Procedures on the Anus	$6,867
46930	Under Destruction Procedures on the Anus	$2,731
46940	Under Destruction Procedures on the Anus	$3,017
46942	Under Destruction Procedures on the Anus	$2,877
46945	Under Excision Procedures on the Anus	$4,084
46946	Under Excision Procedures on the Anus	$4,159
46947	Under Repair Procedures on the Anus	$5,184
47000	Under Incision Procedures on the Liver	$3,964
47001	Under Incision Procedures on the Liver	$1,442
47010	Under Incision Procedures on the Liver	$16,442
47015	Under Incision Procedures on the Liver	$15,953
47100	Under Excision Procedures on the Liver	$11,522
47120	Under Excision Procedures on the Liver	$31,958
47122	Under Excision Procedures on the Liver	$46,941
47125	Under Excision Procedures on the Liver	$42,227
47130	Under Excision Procedures on the Liver	$45,396
47135	Under Liver Transplantation Procedures	$73,336
47140	Under Liver Transplantation Procedures	$48,982
47141	Under Liver Transplantation Procedures	$58,465
47142	Under Liver Transplantation Procedures	$64,405
47143	Under Liver Transplantation Procedures	$ -
47144	Under Liver Transplantation Procedures	$ -
47145	Under Liver Transplantation Procedures	$ -
47146	Under Liver Transplantation Procedures	$4,571
47147	Under Liver Transplantation Procedures	$5,299
47300	Under Repair Procedures on the Liver	$15,453
47350	Under Repair Procedures on the Liver	$18,737
47360	Under Repair Procedures on the Liver	$25,812
47361	Under Repair Procedures on the Liver	$41,420
47362	Under Repair Procedures on the Liver	$19,912
47370	Under Laparoscopic Procedures on the Liver	$17,119
47371	Under Laparoscopic Procedures on the Liver	$17,273
47380	Under Other Procedures on the Liver	$19,698
47381	Under Other Procedures on the Liver	$20,374
47382	Under Other Procedures on the Liver	$62,498
47383	Under Other Procedures on the Liver	$88,742
47400	Under Incision Procedures on the Biliary Tract	$29,657
47420	Under Incision Procedures on the Biliary Tract	$18,345
47425	Under Incision Procedures on the Biliary Tract	$18,793
47460	Under Incision Procedures on the Biliary Tract	$17,418
47480	Under Incision Procedures on the Biliary Tract	$11,959
47490	Under Introduction Procedures on the Biliary Tract	$4,331
47531	Under Introduction Procedures on the Biliary Tract	$4,096
47532	Under Introduction Procedures on the Biliary Tract	$10,306

Procedure Code	Modifier	Fee
47533	Under Introduction Procedures on the Biliary Tract	$15,932
47534	Under Introduction Procedures on the Biliary Tract	$19,025
47535	Under Introduction Procedures on the Biliary Tract	$13,137
47536	Under Introduction Procedures on the Biliary Tract	$8,913
47537	Under Introduction Procedures on the Biliary Tract	$4,740
47538	Under Introduction Procedures on the Biliary Tract	$55,875
47539	Under Introduction Procedures on the Biliary Tract	$61,910
47540	Under Introduction Procedures on the Biliary Tract	$63,260
47541	Under Introduction Procedures on the Biliary Tract	$15,180
47542	Under Introduction Procedures on the Biliary Tract	$5,974
47543	Under Introduction Procedures on the Biliary Tract	$6,164
47544	Under Introduction Procedures on the Biliary Tract	$13,908
47550	Under Endoscopy Procedures on the Biliary Tract	$2,283
47552	Under Endoscopy Procedures on the Biliary Tract	$4,067
47553	Under Endoscopy Procedures on the Biliary Tract	$4,007
47554	Under Endoscopy Procedures on the Biliary Tract	$7,129
47555	Under Endoscopy Procedures on the Biliary Tract	$4,290
47556	Under Endoscopy Procedures on the Biliary Tract	$4,859
47562	Under Laparoscopic Procedures on the Biliary Tract	$9,004
47563	Under Laparoscopic Procedures on the Biliary Tract	$9,780
47564	Under Laparoscopic Procedures on the Biliary Tract	$15,245
47570	Under Laparoscopic Procedures on the Biliary Tract	$10,646
47600	Under Excision Procedures on the Biliary Tract	$14,617
47605	Under Excision Procedures on the Biliary Tract	$15,404
47610	Under Excision Procedures on the Biliary Tract	$17,210
47612	Under Excision Procedures on the Biliary Tract	$17,488
47620	Under Excision Procedures on the Biliary Tract	$18,964
47700	Under Excision Procedures on the Biliary Tract	$14,423
47701	Under Excision Procedures on the Biliary Tract	$23,845
47711	Under Excision Procedures on the Biliary Tract	$21,312
47712	Under Excision Procedures on the Biliary Tract	$27,527
47715	Under Excision Procedures on the Biliary Tract	$18,272
47720	Under Repair Procedures on the Biliary Tract	$15,834
47721	Under Repair Procedures on the Biliary Tract	$18,607
47740	Under Repair Procedures on the Biliary Tract	$18,029
47741	Under Repair Procedures on the Biliary Tract	$20,290
47760	Under Repair Procedures on the Biliary Tract	$31,019
47765	Under Repair Procedures on the Biliary Tract	$41,835
47780	Under Repair Procedures on the Biliary Tract	$33,992
47785	Under Repair Procedures on the Biliary Tract	$44,413
47800	Under Repair Procedures on the Biliary Tract	$21,614
47801	Under Repair Procedures on the Biliary Tract	$14,691
47802	Under Repair Procedures on the Biliary Tract	$20,975
47900	Under Repair Procedures on the Biliary Tract	$18,886
48000	Under Incision Procedures on the Pancreas	$25,981

Procedure Code	Modifier	Fee
48001	Under Incision Procedures on the Pancreas	$31,811
48020	Under Incision Procedures on the Pancreas	$16,173
48100	Under Excision Procedures on the Pancreas	$12,132
48102	Under Excision Procedures on the Pancreas	$6,893
48105	Under Excision Procedures on the Pancreas	$38,997
48120	Under Excision Procedures on the Pancreas	$15,108
48140	Under Excision Procedures on the Pancreas	$21,462
48145	Under Excision Procedures on the Pancreas	$22,474
48146	Under Excision Procedures on the Pancreas	$25,822
48148	Under Excision Procedures on the Pancreas	$17,172
48150	Under Excision Procedures on the Pancreas	$42,735
48152	Under Excision Procedures on the Pancreas	$39,706
48153	Under Excision Procedures on the Pancreas	$42,503
48154	Under Excision Procedures on the Pancreas	$39,870
48155	Under Excision Procedures on the Pancreas	$24,927
48400	Under Introduction Procedures on the Pancreas	$1,493
48500	Under Repair Procedures on the Pancreas	$15,792
48510	Under Repair Procedures on the Pancreas	$15,052
48520	Under Repair Procedures on the Pancreas	$14,961
48540	Under Repair Procedures on the Pancreas	$18,041
48545	Under Repair Procedures on the Pancreas	$18,513
48547	Under Repair Procedures on the Pancreas	$24,696
48548	Under Repair Procedures on the Pancreas	$22,782
48551	Under Pancreas Transplantation Procedures	$ -
48552	Under Pancreas Transplantation Procedures	$3,267
48554	Under Pancreas Transplantation Procedures	$34,714
48556	Under Pancreas Transplantation Procedures	$17,455
49000	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$10,509
49002	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$14,310
49010	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$12,726
49020	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$21,746
49040	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$13,667
49060	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$15,014
49062	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$10,280
49082	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$2,541
49083	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$3,823
49084	Under Incision Procedures on the Abdomen, Peritoneum, and Omentum	$1,492
49180	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$2,120
49185	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$12,247
49203	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$16,331
49204	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$20,932
49205	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$24,064

Procedure Code	Modifier	Fee
49215	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$30,272
49220	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$13,336
49250	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$8,006
49255	Under Excision and Destruction Procedures on the Abdomen, Peritoneum, and Omentum	$10,775
49320	Under Laparoscopic Procedures on the Abdomen, Peritoneum, and Omentum	$4,424
49321	Under Laparoscopic Procedures on the Abdomen, Peritoneum, and Omentum	$4,691
49322	Under Laparoscopic Procedures on the Abdomen, Peritoneum, and Omentum	$5,010
49323	Under Laparoscopic Procedures on the Abdomen, Peritoneum, and Omentum	$8,625
49324	Under Laparoscopic Procedures on the Abdomen, Peritoneum, and Omentum	$5,314
49325	Under Laparoscopic Procedures on the Abdomen, Peritoneum, and Omentum	$5,649
49326	Under Laparoscopic Procedures on the Abdomen, Peritoneum, and Omentum	$2,608
49327	Under Laparoscopic Procedures on the Abdomen, Peritoneum, and Omentum	$1,805
49400	Under Introduction, Revision, and/or Removal	$1,764
49402	Under Introduction, Revision, and/or Removal	$11,719
49405	Under Introduction, Revision, and/or Removal	$10,443
49406	Under Introduction, Revision, and/or Removal	$10,439
49407	Under Introduction, Revision, and/or Removal	$8,446
49411	Under Introduction, Revision, and/or Removal	$6,244
49412	Under Introduction, Revision, and/or Removal	$1,143
49418	Under Introduction, Revision, and/or Removal	$17,620
49419	Under Introduction, Revision, and/or Removal	$6,031
49421	Under Introduction, Revision, and/or Removal	$3,153
49422	Under Introduction, Revision, and/or Removal	$5,189
49423	Under Introduction, Revision, and/or Removal	$7,070
49424	Under Introduction, Revision, and/or Removal	$1,889
49425	Under Introduction, Revision, and/or Removal	$9,648
49426	Under Introduction, Revision, and/or Removal	$8,365
49427	Under Introduction, Revision, and/or Removal	$617
49428	Under Introduction, Revision, and/or Removal	$5,925
49429	Under Introduction, Revision, and/or Removal	$6,305
49435	Under Introduction, Revision, and/or Removal	$1,648
49436	Under Introduction, Revision, and/or Removal	$2,537
49440	Under Initial Placement Procedures on the Abdomen, Peritoneum, and Omentum	$12,505
49441	Under Initial Placement Procedures on the Abdomen, Peritoneum, and Omentum	$14,185
49442	Under Initial Placement Procedures on the Abdomen, Peritoneum, and Omentum	$11,758
49446	Under Conversion Procedures on the Abdomen, Peritoneum, and Omentum	$12,043
49450	Under Replacement Procedures on the Abdomen, Peritoneum, and Omentum	$8,619
49451	Under Replacement Procedures on the Abdomen, Peritoneum, and Omentum	$9,412
49452	Under Replacement Procedures on the Abdomen, Peritoneum, and Omentum	$11,644

Procedure Code	Modifier	Fee
49460	Under Mechanical Removal of Obstructive Material on the Abdomen, Peritoneum, and Omentum	$9,547
49465	Under Other Procedures on the Abdomen, Peritoneum, and Omentum	$2,119
49491	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$10,872
49492	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$13,123
49495	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$5,607
49496	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$8,406
49500	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$5,621
49501	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$8,285
49505	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$7,093
49507	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$8,004
49520	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$8,632
49521	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$9,793
49525	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$7,810
49540	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$9,178
49550	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$7,865
49553	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$8,633
49555	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$8,167
49557	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$9,897
49560	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$10,082
49561	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$12,727
49565	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$10,487
49566	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$12,838
49568	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$3,687
49570	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$5,692
49572	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$7,028
49580	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$4,525
49582	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$6,591
49585	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$6,063
49587	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$6,483
49590	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$7,815
49600	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$10,005
49605	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$67,727
49606	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$15,575
49610	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$9,413
49611	Under Hernioplasty, Herniorrhaphy, Herniotomy Procedures	$8,290
49650	Under Hernia Laparoscopic Procedures	$5,845
49651	Under Hernia Laparoscopic Procedures	$7,575
49652	Under Hernia Laparoscopic Procedures	$10,169
49653	Under Hernia Laparoscopic Procedures	$12,684
49654	Under Hernia Laparoscopic Procedures	$11,573
49655	Under Hernia Laparoscopic Procedures	$14,123
49656	Under Hernia Laparoscopic Procedures	$12,556
49657	Under Hernia Laparoscopic Procedures	$18,082
49900	Under Suture Procedures on the Abdomen, Peritoneum, and Omentum	$11,096

Procedure Code	Modifier	Fee
49904	Under Surgical Procedures on the Omental Flap	$19,261
49905	Under Surgical Procedures on the Omental Flap	$4,846
49906	Under Surgical Procedures on the Omental Flap	$ -
50010	Under Incision Procedures on the Kidney	$9,828
50020	Under Incision Procedures on the Kidney	$13,436
50040	Under Incision Procedures on the Kidney	$12,267
50045	Under Incision Procedures on the Kidney	$12,372
50060	Under Incision Procedures on the Kidney	$15,145
50065	Under Incision Procedures on the Kidney	$16,066
50070	Under Incision Procedures on the Kidney	$15,750
50075	Under Incision Procedures on the Kidney	$19,361
50080	Under Incision Procedures on the Kidney	$11,547
50081	Under Incision Procedures on the Kidney	$16,959
50100	Under Incision Procedures on the Kidney	$14,810
50120	Under Incision Procedures on the Kidney	$12,603
50125	Under Incision Procedures on the Kidney	$13,041
50130	Under Incision Procedures on the Kidney	$13,717
50135	Under Incision Procedures on the Kidney	$14,906
50200	Under Excision Procedures on the Kidney	$6,959
50205	Under Excision Procedures on the Kidney	$10,301
50220	Under Excision Procedures on the Kidney	$14,024
50225	Under Excision Procedures on the Kidney	$16,025
50230	Under Excision Procedures on the Kidney	$17,066
50234	Under Excision Procedures on the Kidney	$17,307
50236	Under Excision Procedures on the Kidney	$19,541
50240	Under Excision Procedures on the Kidney	$17,602
50250	Under Excision Procedures on the Kidney	$16,157
50280	Under Excision Procedures on the Kidney	$12,704
50290	Under Excision Procedures on the Kidney	$11,937
50320	Under Renal Transplantation Procedures	$20,560
50323	Under Renal Transplantation Procedures	$ -
50325	Under Renal Transplantation Procedures	$ -
50327	Under Renal Transplantation Procedures	$2,980
50328	Under Renal Transplantation Procedures	$2,617
50329	Under Renal Transplantation Procedures	$2,459
50340	Under Renal Transplantation Procedures	$12,943
50360	Under Renal Transplantation Procedures	$33,066
50365	Under Renal Transplantation Procedures	$39,012
50370	Under Renal Transplantation Procedures	$16,448
50380	Under Renal Transplantation Procedures	$27,365
50382	Under Internally Dwelling Renal Pelvis Catheter Introduction Procedures	$14,395
50384	Under Internally Dwelling Renal Pelvis Catheter Introduction Procedures	$11,307
50385	Under Internally Dwelling Renal Pelvis Catheter Introduction Procedures	$14,090
50386	Under Internally Dwelling Renal Pelvis Catheter Introduction Procedures	$9,099
50387	Under Externally Accessible Renal Pelvis Catheter Introduction Procedures	$6,341

Procedure Code	Modifier	Fee
50389	Under Externally Accessible Renal Pelvis Catheter Introduction Procedures	$3,854
50390	Under Other Renal Introduction Procedures	$1,265
50391	Under Other Renal Introduction Procedures	$1,597
50396	Under Other Renal Introduction Procedures	$1,542
50400	Under Repair Procedures on the Kidney	$15,415
50405	Under Repair Procedures on the Kidney	$18,539
50430	Under Other Renal Introduction Procedures	$5,939
50431	Under Other Renal Introduction Procedures	$2,112
50432	Under Other Renal Introduction Procedures	$9,989
50433	Under Other Renal Introduction Procedures	$13,664
50434	Under Other Renal Introduction Procedures	$10,699
50435	Under Other Renal Introduction Procedures	$6,105
50500	Under Repair Procedures on the Kidney	$17,665
50520	Under Repair Procedures on the Kidney	$15,882
50525	Under Repair Procedures on the Kidney	$20,186
50526	Under Repair Procedures on the Kidney	$21,643
50540	Under Repair Procedures on the Kidney	$15,251
50541	Under Laparoscopic Procedures on the Kidney	$12,214
50542	Under Laparoscopic Procedures on the Kidney	$15,482
50543	Under Laparoscopic Procedures on the Kidney	$19,764
50544	Under Laparoscopic Procedures on the Kidney	$16,555
50545	Under Laparoscopic Procedures on the Kidney	$17,815
50546	Under Laparoscopic Procedures on the Kidney	$16,028
50547	Under Laparoscopic Procedures on the Kidney	$21,907
50548	Under Laparoscopic Procedures on the Kidney	$17,903
50551	Under Endoscopy Procedures on the Kidney	$4,778
50553	Under Endoscopy Procedures on the Kidney	$5,123
50555	Under Endoscopy Procedures on the Kidney	$5,476
50557	Under Endoscopy Procedures on the Kidney	$5,567
50561	Under Endoscopy Procedures on the Kidney	$6,308
50562	Under Endoscopy Procedures on the Kidney	$7,737
50570	Under Endoscopy Procedures on the Kidney	$6,547
50572	Under Endoscopy Procedures on the Kidney	$7,084
50574	Under Endoscopy Procedures on the Kidney	$7,532
50575	Under Endoscopy Procedures on the Kidney	$9,507
50576	Under Endoscopy Procedures on the Kidney	$7,515
50580	Under Endoscopy Procedures on the Kidney	$8,091
50590	Under Lithotripsy and Ablation Procedures on the Kidney	$9,519
50592	Under Lithotripsy and Ablation Procedures on the Kidney	$42,943
50593	Under Lithotripsy and Ablation Procedures on the Kidney	$58,516
50600	Under Incision Procedures on the Ureter	$12,465
50605	Under Incision Procedures on the Ureter	$13,416
50606	Under Incision Procedures on the Ureter	$9,070
50610	Under Incision Procedures on the Ureter	$12,552
50620	Under Incision Procedures on the Ureter	$12,015

Procedure Code	Modifier	Fee
50630	Under Incision Procedures on the Ureter	$11,863
50650	Under Excision Procedures on the Ureter	$13,776
50660	Under Excision Procedures on the Ureter	$15,196
50684	Under Introduction Procedures on the Ureter	$1,400
50686	Under Introduction Procedures on the Ureter	$1,906
50688	Under Introduction Procedures on the Ureter	$1,039
50690	Under Introduction Procedures on the Ureter	$1,299
50693	Under Introduction Procedures on the Ureter	$12,778
50694	Under Introduction Procedures on the Ureter	$14,026
50695	Under Introduction Procedures on the Ureter	$17,223
50700	Under Repair Procedures on the Ureter	$12,285
50705	Under Repair Procedures on the Ureter	$24,983
50706	Under Repair Procedures on the Ureter	$12,774
50715	Under Repair Procedures on the Ureter	$16,519
50722	Under Repair Procedures on the Ureter	$13,406
50725	Under Repair Procedures on the Ureter	$14,645
50727	Under Repair Procedures on the Ureter	$6,769
50728	Under Repair Procedures on the Ureter	$9,276
50740	Under Repair Procedures on the Ureter	$16,806
50750	Under Repair Procedures on the Ureter	$15,328
50760	Under Repair Procedures on the Ureter	$15,067
50770	Under Repair Procedures on the Ureter	$15,328
50780	Under Repair Procedures on the Ureter	$14,798
50782	Under Repair Procedures on the Ureter	$14,283
50783	Under Repair Procedures on the Ureter	$14,986
50785	Under Repair Procedures on the Ureter	$16,144
50800	Under Repair Procedures on the Ureter	$12,302
50810	Under Repair Procedures on the Ureter	$19,181
50815	Under Repair Procedures on the Ureter	$16,238
50820	Under Repair Procedures on the Ureter	$17,486
50825	Under Repair Procedures on the Ureter	$21,915
50830	Under Repair Procedures on the Ureter	$23,947
50840	Under Repair Procedures on the Ureter	$16,326
50845	Under Repair Procedures on the Ureter	$16,589
50860	Under Repair Procedures on the Ureter	$12,546
50900	Under Repair Procedures on the Ureter	$11,210
50920	Under Repair Procedures on the Ureter	$11,707
50930	Under Repair Procedures on the Ureter	$14,641
50940	Under Repair Procedures on the Ureter	$11,784
50945	Under Laparoscopic Procedures on the Ureter	$12,931
50947	Under Laparoscopic Procedures on the Ureter	$18,411
50948	Under Laparoscopic Procedures on the Ureter	$16,942
50951	Under Endoscopy Procedures on the Ureter	$4,985
50953	Under Endoscopy Procedures on the Ureter	$5,315
50955	Under Endoscopy Procedures on the Ureter	$5,644

Procedure Code	Modifier	Fee
50957	Under Endoscopy Procedures on the Ureter	$5,700
50961	Under Endoscopy Procedures on the Ureter	$5,142
50970	Under Endoscopy Procedures on the Ureter	$4,936
50972	Under Endoscopy Procedures on the Ureter	$4,773
50974	Under Endoscopy Procedures on the Ureter	$6,299
50976	Under Endoscopy Procedures on the Ureter	$6,207
50980	Under Endoscopy Procedures on the Ureter	$4,751
51020	Under Incision Procedures on the Bladder	$6,228
51030	Under Incision Procedures on the Bladder	$6,246
51040	Under Incision Procedures on the Bladder	$3,842
51045	Under Incision Procedures on the Bladder	$6,543
51050	Under Incision Procedures on the Bladder	$6,275
51060	Under Incision Procedures on the Bladder	$7,712
51065	Under Incision Procedures on the Bladder	$7,680
51080	Under Incision Procedures on the Bladder	$5,427
51100	Under Removal Procedures on the Bladder	$810
51101	Under Removal Procedures on the Bladder	$1,622
51102	Under Removal Procedures on the Bladder	$2,974
51500	Under Excision Procedures on the Bladder	$8,457
51520	Under Excision Procedures on the Bladder	$7,887
51525	Under Excision Procedures on the Bladder	$11,407
51530	Under Excision Procedures on the Bladder	$10,361
51535	Under Excision Procedures on the Bladder	$10,359
51550	Under Excision Procedures on the Bladder	$12,882
51555	Under Excision Procedures on the Bladder	$16,857
51565	Under Excision Procedures on the Bladder	$17,133
51570	Under Excision Procedures on the Bladder	$19,635
51575	Under Excision Procedures on the Bladder	$24,232
51580	Under Excision Procedures on the Bladder	$25,193
51585	Under Excision Procedures on the Bladder	$28,055
51590	Under Excision Procedures on the Bladder	$25,760
51595	Under Excision Procedures on the Bladder	$29,095
51596	Under Excision Procedures on the Bladder	$31,284
51597	Under Excision Procedures on the Bladder	$30,594
51600	Under Introduction Procedures on the Bladder	$2,396
51605	Under Introduction Procedures on the Bladder	$513
51610	Under Introduction Procedures on the Bladder	$1,394
51700	Under Introduction Procedures on the Bladder	$962
51701	Under Introduction Procedures on the Bladder	$618
51702	Under Introduction Procedures on the Bladder	$836
51703	Under Introduction Procedures on the Bladder	$1,654
51705	Under Introduction Procedures on the Bladder	$1,197
51710	Under Introduction Procedures on the Bladder	$1,691
51715	Under Introduction Procedures on the Bladder	$3,836
51720	Under Introduction Procedures on the Bladder	$1,100

Procedure Code	Modifier	Fee
51725	Under Urodynamic Procedures on the Bladder	$2,445
51725	26	$1,001
51725	TC	$1,444
51726	Under Urodynamic Procedures on the Bladder	$3,456
51726	26	$1,117
51726	TC	$2,338
51727	Under Urodynamic Procedures on the Bladder	$4,066
51727	26	$1,396
51727	TC	$2,670
51728	Under Urodynamic Procedures on the Bladder	$4,141
51728	26	$1,371
51728	TC	$2,770
51729	Under Urodynamic Procedures on the Bladder	$4,447
51729	26	$1,655
51729	TC	$2,793
51736	Under Urodynamic Procedures on the Bladder	$201
51736	26	$108
51736	TC	$93
51741	Under Urodynamic Procedures on the Bladder	$206
51741	26	$108
51741	TC	$98
51784	Under Urodynamic Procedures on the Bladder	$902
51784	26	$490
51784	TC	$412
51785	Under Urodynamic Procedures on the Bladder	$3,646
51785	26	$1,253
51785	TC	$2,393
51792	Under Urodynamic Procedures on the Bladder	$2,774
51792	26	$722
51792	TC	$2,051
51797	Under Urodynamic Procedures on the Bladder	$1,474
51797	26	$528
51797	TC	$946
51798	Under Urodynamic Procedures on the Bladder	$207
51800	Under Repair Procedures on the Bladder	$13,812
51820	Under Repair Procedures on the Bladder	$14,387
51840	Under Repair Procedures on the Bladder	$8,698
51841	Under Repair Procedures on the Bladder	$10,143
51845	Under Repair Procedures on the Bladder	$7,747
51860	Under Repair Procedures on the Bladder	$9,991
51865	Under Repair Procedures on the Bladder	$11,933
51880	Under Repair Procedures on the Bladder	$6,220
51900	Under Repair Procedures on the Bladder	$10,950
51920	Under Repair Procedures on the Bladder	$10,139
51925	Under Repair Procedures on the Bladder	$13,324

Procedure Code	Modifier	Fee
51940	Under Repair Procedures on the Bladder	$21,811
51960	Under Repair Procedures on the Bladder	$18,405
51980	Under Repair Procedures on the Bladder	$9,476
51990	Under Laparoscopic Procedures on the Bladder	$9,965
51992	Under Laparoscopic Procedures on the Bladder	$11,081
52000	Under Endoscopy-Cystoscopy, Urethroscopy, Cystourethroscopy Procedures on the Bladder	$2,160
52001	Under Endoscopy-Cystoscopy, Urethroscopy, Cystourethroscopy Procedures on the Bladder	$4,915
52005	Under Endoscopy-Cystoscopy, Urethroscopy, Cystourethroscopy Procedures on the Bladder	$3,501
52007	Under Endoscopy-Cystoscopy, Urethroscopy, Cystourethroscopy Procedures on the Bladder	$5,834
52010	Under Endoscopy-Cystoscopy, Urethroscopy, Cystourethroscopy Procedures on the Bladder	$4,837
52204	Under Urethra and Bladder Transurethral Surgical Procedures	$4,855
52214	Under Urethra and Bladder Transurethral Surgical Procedures	$8,715
52224	Under Urethra and Bladder Transurethral Surgical Procedures	$9,107
52234	Under Urethra and Bladder Transurethral Surgical Procedures	$3,277
52235	Under Urethra and Bladder Transurethral Surgical Procedures	$3,841
52240	Under Urethra and Bladder Transurethral Surgical Procedures	$5,215
52250	Under Urethra and Bladder Transurethral Surgical Procedures	$3,191
52260	Under Urethra and Bladder Transurethral Surgical Procedures	$2,802
52265	Under Urethra and Bladder Transurethral Surgical Procedures	$4,782
52270	Under Urethra and Bladder Transurethral Surgical Procedures	$4,690
52275	Under Urethra and Bladder Transurethral Surgical Procedures	$6,319
52276	Under Urethra and Bladder Transurethral Surgical Procedures	$3,520
52277	Under Urethra and Bladder Transurethral Surgical Procedures	$4,305
52281	Under Urethra and Bladder Transurethral Surgical Procedures	$3,590
52282	Under Urethra and Bladder Transurethral Surgical Procedures	$4,491
52283	Under Urethra and Bladder Transurethral Surgical Procedures	$3,654
52285	Under Urethra and Bladder Transurethral Surgical Procedures	$3,682
52287	Under Urethra and Bladder Transurethral Surgical Procedures	$4,097
52290	Under Urethra and Bladder Transurethral Surgical Procedures	$3,255
52300	Under Urethra and Bladder Transurethral Surgical Procedures	$3,737
52301	Under Urethra and Bladder Transurethral Surgical Procedures	$3,865
52305	Under Urethra and Bladder Transurethral Surgical Procedures	$3,703
52310	Under Urethra and Bladder Transurethral Surgical Procedures	$3,213
52315	Under Urethra and Bladder Transurethral Surgical Procedures	$5,456
52317	Under Urethra and Bladder Transurethral Surgical Procedures	$10,590
52318	Under Urethra and Bladder Transurethral Surgical Procedures	$6,304
52320	Under Ureter and Pelvis Transurethral Surgical Procedures	$3,287
52325	Under Ureter and Pelvis Transurethral Surgical Procedures	$4,273
52327	Under Ureter and Pelvis Transurethral Surgical Procedures	$3,496
52330	Under Ureter and Pelvis Transurethral Surgical Procedures	$6,515
52332	Under Ureter and Pelvis Transurethral Surgical Procedures	$6,433

Procedure Code	Modifier	Fee
52334	Under Ureter and Pelvis Transurethral Surgical Procedures	$3,410
52341	Under Ureter and Pelvis Transurethral Surgical Procedures	$3,782
52342	Under Ureter and Pelvis Transurethral Surgical Procedures	$4,111
52343	Under Ureter and Pelvis Transurethral Surgical Procedures	$4,584
52344	Under Ureter and Pelvis Transurethral Surgical Procedures	$4,924
52345	Under Ureter and Pelvis Transurethral Surgical Procedures	$5,246
52346	Under Ureter and Pelvis Transurethral Surgical Procedures	$5,945
52351	Under Ureter and Pelvis Transurethral Surgical Procedures	$4,035
52352	Under Ureter and Pelvis Transurethral Surgical Procedures	$4,723
52353	Under Ureter and Pelvis Transurethral Surgical Procedures	$5,215
52354	Under Ureter and Pelvis Transurethral Surgical Procedures	$5,556
52355	Under Ureter and Pelvis Transurethral Surgical Procedures	$6,225
52356	Under Ureter and Pelvis Transurethral Surgical Procedures	$5,538
52400	Under Vesical Neck and Prostate Surgical Procedures	$6,350
52402	Under Vesical Neck and Prostate Surgical Procedures	$3,554
52441	Under Vesical Neck and Prostate Surgical Procedures	$16,297
52442	Under Vesical Neck and Prostate Surgical Procedures	$12,470
52450	Under Vesical Neck and Prostate Surgical Procedures	$6,238
52500	Under Vesical Neck and Prostate Surgical Procedures	$6,474
52601	Under Vesical Neck and Prostate Surgical Procedures	$9,694
52630	Under Vesical Neck and Prostate Surgical Procedures	$5,311
52640	Under Vesical Neck and Prostate Surgical Procedures	$4,188
52647	Under Vesical Neck and Prostate Surgical Procedures	$23,423
52648	Under Vesical Neck and Prostate Surgical Procedures	$24,102
52649	Under Vesical Neck and Prostate Surgical Procedures	$10,931
52700	Under Vesical Neck and Prostate Surgical Procedures	$5,853
53000	Under Incision Procedures on the Urethra	$1,969
53010	Under Incision Procedures on the Urethra	$3,911
53020	Under Incision Procedures on the Urethra	$1,293
53025	Under Incision Procedures on the Urethra	$913
53040	Under Incision Procedures on the Urethra	$5,211
53060	Under Incision Procedures on the Urethra	$2,401
53080	Under Incision Procedures on the Urethra	$5,577
53085	Under Incision Procedures on the Urethra	$8,616
53200	Under Excision Procedures on the Urethra	$2,085
53210	Under Excision Procedures on the Urethra	$10,226
53215	Under Excision Procedures on the Urethra	$12,321
53220	Under Excision Procedures on the Urethra	$5,993
53230	Under Excision Procedures on the Urethra	$8,032
53235	Under Excision Procedures on the Urethra	$8,406
53240	Under Excision Procedures on the Urethra	$5,642
53250	Under Excision Procedures on the Urethra	$5,253
53260	Under Excision Procedures on the Urethra	$2,663
53265	Under Excision Procedures on the Urethra	$2,883
53270	Under Excision Procedures on the Urethra	$2,727

Procedure Code	Modifier	Fee
53275	Under Excision Procedures on the Urethra	$3,488
53400	Under Repair Procedures on the Urethra	$10,619
53405	Under Repair Procedures on the Urethra	$11,601
53410	Under Repair Procedures on the Urethra	$12,987
53415	Under Repair Procedures on the Urethra	$15,036
53420	Under Repair Procedures on the Urethra	$11,176
53425	Under Repair Procedures on the Urethra	$12,433
53430	Under Repair Procedures on the Urethra	$12,880
53431	Under Repair Procedures on the Urethra	$15,338
53440	Under Repair Procedures on the Urethra	$10,001
53442	Under Repair Procedures on the Urethra	$10,399
53444	Under Repair Procedures on the Urethra	$10,533
53445	Under Repair Procedures on the Urethra	$10,008
53446	Under Repair Procedures on the Urethra	$8,526
53447	Under Repair Procedures on the Urethra	$10,738
53448	Under Repair Procedures on the Urethra	$17,008
53449	Under Repair Procedures on the Urethra	$8,117
53450	Under Repair Procedures on the Urethra	$5,428
53460	Under Repair Procedures on the Urethra	$6,088
53500	Under Repair Procedures on the Urethra	$9,917
53502	Under Repair Procedures on the Urethra	$6,451
53505	Under Repair Procedures on the Urethra	$6,447
53510	Under Repair Procedures on the Urethra	$8,388
53515	Under Repair Procedures on the Urethra	$10,565
53520	Under Repair Procedures on the Urethra	$7,387
53600	Under Manipulation Procedures on the Urethra	$1,093
53601	Under Manipulation Procedures on the Urethra	$1,070
53605	Under Manipulation Procedures on the Urethra	$864
53620	Under Manipulation Procedures on the Urethra	$1,533
53621	Under Manipulation Procedures on the Urethra	$1,440
53660	Under Manipulation Procedures on the Urethra	$928
53661	Under Manipulation Procedures on the Urethra	$909
53665	Under Manipulation Procedures on the Urethra	$515
53850	Under Other Procedures on the Urethra	$27,229
53852	Under Other Procedures on the Urethra	$25,142
53855	Under Other Procedures on the Urethra	$10,221
53860	Under Other Procedures on the Urethra	$20,624
54000	Under Incision Procedures on the Penis	$1,966
54001	Under Incision Procedures on the Penis	$2,442
54015	Under Incision Procedures on the Penis	$4,077
54050	Under Destruction Procedures on the Penis	$1,755
54055	Under Destruction Procedures on the Penis	$1,576
54056	Under Destruction Procedures on the Penis	$1,876
54057	Under Destruction Procedures on the Penis	$1,828
54060	Under Destruction Procedures on the Penis	$2,381

Procedure Code	Modifier	Fee
54065	Under Destruction Procedures on the Penis	$2,890
54100	Under Excision Procedures on the Penis	$2,619
54105	Under Excision Procedures on the Penis	$3,501
54110	Under Excision Procedures on the Penis	$8,291
54111	Under Excision Procedures on the Penis	$10,633
54112	Under Excision Procedures on the Penis	$12,446
54115	Under Excision Procedures on the Penis	$5,997
54120	Under Excision Procedures on the Penis	$8,405
54125	Under Excision Procedures on the Penis	$10,808
54130	Under Excision Procedures on the Penis	$15,848
54135	Under Excision Procedures on the Penis	$20,093
54150	Under Excision Procedures on the Penis	$2,055
54160	Under Excision Procedures on the Penis	$2,896
54161	Under Excision Procedures on the Penis	$2,612
54162	Under Excision Procedures on the Penis	$3,403
54163	Under Excision Procedures on the Penis	$2,903
54164	Under Excision Procedures on the Penis	$2,567
54200	Under Introduction Procedures on the Penis	$1,425
54205	Under Introduction Procedures on the Penis	$7,065
54220	Under Introduction Procedures on the Penis	$2,716
54230	Under Introduction Procedures on the Penis	$1,290
54231	Under Introduction Procedures on the Penis	$1,868
54235	Under Introduction Procedures on the Penis	$1,202
54240	Under Introduction Procedures on the Penis	$1,413
54240	26	$938
54240	TC	$475
54250	Under Introduction Procedures on the Penis	$1,587
54250	26	$1,440
54250	TC	$148
54300	Under Repair Procedures on the Penis	$8,531
54304	Under Repair Procedures on the Penis	$9,971
54308	Under Repair Procedures on the Penis	$9,502
54312	Under Repair Procedures on the Penis	$10,866
54316	Under Repair Procedures on the Penis	$13,259
54318	Under Repair Procedures on the Penis	$9,447
54322	Under Repair Procedures on the Penis	$10,367
54324	Under Repair Procedures on the Penis	$12,858
54326	Under Repair Procedures on the Penis	$12,554
54328	Under Repair Procedures on the Penis	$12,473
54332	Under Repair Procedures on the Penis	$13,476
54336	Under Repair Procedures on the Penis	$15,802
54340	Under Repair Procedures on the Penis	$7,571
54344	Under Repair Procedures on the Penis	$12,583
54348	Under Repair Procedures on the Penis	$13,475
54352	Under Repair Procedures on the Penis	$18,807

Procedure Code	Modifier	Fee
54360	Under Repair Procedures on the Penis	$9,569
54380	Under Repair Procedures on the Penis	$10,615
54385	Under Repair Procedures on the Penis	$12,322
54390	Under Repair Procedures on the Penis	$16,476
54400	Under Repair Procedures on the Penis	$7,032
54401	Under Repair Procedures on the Penis	$8,703
54405	Under Repair Procedures on the Penis	$10,734
54406	Under Repair Procedures on the Penis	$9,713
54408	Under Repair Procedures on the Penis	$10,491
54410	Under Repair Procedures on the Penis	$11,412
54411	Under Repair Procedures on the Penis	$13,617
54415	Under Repair Procedures on the Penis	$7,017
54416	Under Repair Procedures on the Penis	$9,431
54417	Under Repair Procedures on the Penis	$11,940
54420	Under Repair Procedures on the Penis	$9,365
54430	Under Repair Procedures on the Penis	$8,507
54435	Under Repair Procedures on the Penis	$5,536
54437	Under Repair Procedures on the Penis	$8,953
54438	Under Repair Procedures on the Penis	$17,763
54440	Under Repair Procedures on the Penis	$ -
54450	Under Manipulation Procedures on the Penis	$935
54500	Under Excision Procedures on the Testis	$995
54505	Under Excision Procedures on the Testis	$2,783
54512	Under Excision Procedures on the Testis	$7,192
54520	Under Excision Procedures on the Testis	$4,353
54522	Under Excision Procedures on the Testis	$7,843
54530	Under Excision Procedures on the Testis	$6,716
54535	Under Excision Procedures on the Testis	$9,889
54550	Under Exploration Procedures on the Testis	$6,530
54560	Under Exploration Procedures on the Testis	$9,121
54600	Under Repair Procedures on the Testis	$6,029
54620	Under Repair Procedures on the Testis	$3,980
54640	Under Repair Procedures on the Testis	$6,377
54650	Under Repair Procedures on the Testis	$9,456
54660	Under Repair Procedures on the Testis	$4,743
54670	Under Repair Procedures on the Testis	$5,385
54680	Under Repair Procedures on the Testis	$10,454
54690	Under Laparoscopic Procedures on the Testis	$8,744
54692	Under Laparoscopic Procedures on the Testis	$10,085
54700	Under Incision Procedures on the Epididymis	$2,847
54800	Under Excision Procedures on the Epididymis	$1,678
54830	Under Excision Procedures on the Epididymis	$4,956
[illegible]	Under Excision Procedures on the Epididymis	$4,270
[illegible]	Under Excision Procedures on the Epididymis	$5,572
[illegible]	Under Excision Procedures on the Epididymis	$7,522

Procedure Code	Modifier	Fee
54865	Under Exploration of Epididymis	$4,767
54900	Under Repair Procedures on the Epididymis	$10,633
54901	Under Repair Procedures on the Epididymis	$14,030
55000	Under Incision Procedures on the Tunica Vaginalis	$1,562
55040	Under Excision Procedures on the Tunica Vaginalis	$4,498
55041	Under Excision Procedures on the Tunica Vaginalis	$6,778
55060	Under Repair Procedures on the Tunica Vaginalis	$5,064
55100	Under Incision Procedures on the Scrotum	$2,854
55110	Under Incision Procedures on the Scrotum	$5,159
55120	Under Incision Procedures on the Scrotum	$4,698
55150	Under Excision Procedures on the Scrotum	$6,535
55175	Under Repair Procedures on the Scrotum	$4,824
55180	Under Repair Procedures on the Scrotum	$9,111
55200	Under Incision Procedures on the Vas Deferens	$5,760
55250	Under Excision Procedures on the Vas Deferens	$5,076
55300	Under Introduction Procedures on the Vas Deferens	$2,488
55400	Under Repair Procedures on the Vas Deferens	$6,617
55500	Under Excision Procedures on the Spermatic Cord	$5,294
55520	Under Excision Procedures on the Spermatic Cord	$6,157
55530	Under Excision Procedures on the Spermatic Cord	$4,677
55535	Under Excision Procedures on the Spermatic Cord	$5,713
55540	Under Excision Procedures on the Spermatic Cord	$7,547
55550	Under Laparoscopic Procedures on the Spermatic Cord	$5,692
55600	Under Incision Procedures on the Seminal Vesicles	$5,600
55605	Under Incision Procedures on the Seminal Vesicles	$6,919
55650	Under Excision Procedures on the Seminal Vesicles	$9,531
55680	Under Excision Procedures on the Seminal Vesicles	$4,596
55700	Under Incision Procedures on the Prostate	$3,260
55705	Under Incision Procedures on the Prostate	$3,532
55706	Under Incision Procedures on the Prostate	$4,937
55720	Under Incision Procedures on the Prostate	$6,011
55725	Under Incision Procedures on the Prostate	$7,876
55801	Under Excision Procedures on the Prostate	$14,530
55810	Under Excision Procedures on the Prostate	$17,421
55812	Under Excision Procedures on the Prostate	$21,385
55815	Under Excision Procedures on the Prostate	$23,426
55821	Under Excision Procedures on the Prostate	$11,603
55831	Under Excision Procedures on the Prostate	$12,546
55840	Under Excision Procedures on the Prostate	$15,573
55842	Under Excision Procedures on the Prostate	$15,582
55845	Under Excision Procedures on the Prostate	$18,118
55860	Under Excision Procedures on the Prostate	$11,624
55862	Under Excision Procedures on the Prostate	$14,571
55865	Under Excision Procedures on the Prostate	$17,723
55866	Under Laparoscopic Procedures on the Prostate	$19,185

Procedure Code	Modifier	Fee
55870	Under Other Procedures on the Prostate	$2,321
55873	Under Other Procedures on the Prostate	$92,698
55874	Under Other Procedures on the Prostate	$48,011
55875	Under Other Procedures on the Prostate	$10,123
55876	Under Other Procedures on the Prostate	$1,799
55920	Under Reproductive System Procedures	$5,903
56405	Under Incision Procedures on the Vulva, Perineum and Introitus	$1,424
56420	Under Incision Procedures on the Vulva, Perineum and Introitus	$1,591
56440	Under Incision Procedures on the Vulva, Perineum and Introitus	$2,370
56441	Under Incision Procedures on the Vulva, Perineum and Intro	$1,889
56442	Under Incision Procedures on the Vulva, Perineum and Introitus	$623
56501	Under Destruction Procedures on the Vulva, Perineum and Introitus	$1,720
56515	Under Destruction Procedures on the Vulva, Perineum and Introitus	$2,975
56605	Under Excision Procedures on the Vulva, Perineum and Introitus	$1,070
56606	Under Excision Procedures on the Vulva, Perineum and Introitus	$499
56620	Under Excision Procedures on the Vulva, Perineum and Introitus	$6,969
56625	Under Excision Procedures on the Vulva, Perineum and Introitus	$8,479
56630	Under Excision Procedures on the Vulva, Perineum and Introitus	$12,589
56631	Under Excision Procedures on the Vulva, Perineum and Introitus	$16,113
56632	Under Excision Procedures on the Vulva, Perineum and Introitus	$18,734
56633	Under Excision Procedures on the Vulva, Perineum and Introitus	$16,412
56634	Under Excision Procedures on the Vulva, Perineum and Introitus	$17,927
56637	Under Excision Procedures on the Vulva, Perineum and Introitus	$20,999
56640	Under Excision Procedures on the Vulva, Perineum and Introitus	$21,008
56700	Under Excision Procedures on the Vulva, Perineum and Introitus	$2,416
56740	Under Excision Procedures on the Vulva, Perineum and Introitus	$3,940
56800	Under Repair Procedures on the Vulva, Perineum and Introitus	$3,136
56805	Under Repair Procedures on the Vulva, Perineum and Introitus	$14,785
56810	Under Repair Procedures on the Vulva, Perineum and Introitus	$3,388
56820	Under Endoscopy Procedures on the Vulva, Perineum and Introitus	$1,480
56821	Under Endoscopy Procedures on the Vulva, Perineum and Introitus	$1,936
57000	Under Incision Procedures on the Vagina	$2,445
57010	Under Incision Procedures on the Vagina	$5,603
57020	Under Incision Procedures on the Vagina	$1,203
57022	Under Incision Procedures on the Vagina	$2,168
57023	Under Incision Procedures on the Vagina	$4,010
57061	Under Destruction Procedures on the Vagina	$1,487
57065	Under Destruction Procedures on the Vagina	$2,563
57100	Under Excision Procedures on the Vagina	$1,175
57105	Under Excision Procedures on the Vagina	$1,789
57106	Under Excision Procedures on the Vagina	$6,553
57107	Under Excision Procedures on the Vagina	$19,362
57109	Under Excision Procedures on the Vagina	$24,020
57110	Under Excision Procedures on the Vagina	$11,585
57111	Under Excision Procedures on the Vagina	$24,020

Procedure Code	Modifier	Fee
57112	Under Excision Procedures on the Vagina	$25,728
57120	Under Excision Procedures on the Vagina	$6,598
57130	Under Excision Procedures on the Vagina	$2,292
57135	Under Excision Procedures on the Vagina	$2,510
57150	Under Introduction Procedures on the Vagina	$585
57155	Under Introduction Procedures on the Vagina	$4,776
57156	Under Introduction Procedures on the Vagina	$2,591
57160	Under Introduction Procedures on the Vagina	$983
57170	Under Introduction Procedures on the Vagina	$785
57180	Under Introduction Procedures on the Vagina	$1,824
57200	Under Repair Procedures on the Vagina	$3,965
57210	Under Repair Procedures on the Vagina	$4,793
57220	Under Repair Procedures on the Vagina	$4,137
57230	Under Repair Procedures on the Vagina	$5,100
57240	Under Repair Procedures on the Vagina	$7,696
57250	Under Repair Procedures on the Vagina	$7,732
57260	Under Repair Procedures on the Vagina	$9,908
57265	Under Repair Procedures on the Vagina	$11,133
57267	Under Repair Procedures on the Vagina	$3,349
57268	Under Repair Procedures on the Vagina	$6,303
57270	Under Repair Procedures on the Vagina	$10,537
57280	Under Repair Procedures on the Vagina	$12,436
57282	Under Repair Procedures on the Vagina	$6,509
57283	Under Repair Procedures on the Vagina	$8,938
57284	Under Repair Procedures on the Vagina	$10,623
57285	Under Repair Procedures on the Vagina	$8,755
57287	Under Repair Procedures on the Vagina	$8,910
57288	Under Repair Procedures on the Vagina	$9,357
57289	Under Repair Procedures on the Vagina	$9,848
57291	Under Repair Procedures on the Vagina	$6,839
57292	Under Repair Procedures on the Vagina	$10,545
57295	Under Repair Procedures on the Vagina	$6,214
57296	Under Repair Procedures on the Vagina	$12,248
57300	Under Repair Procedures on the Vagina	$7,459
57305	Under Repair Procedures on the Vagina	$12,529
57307	Under Repair Procedures on the Vagina	$13,576
57308	Under Repair Procedures on the Vagina	$8,771
57310	Under Repair Procedures on the Vagina	$6,120
57311	Under Repair Procedures on the Vagina	$6,957
57320	Under Repair Procedures on the Vagina	$7,003
57330	Under Repair Procedures on the Vagina	$9,820
57335	Under Repair Procedures on the Vagina	$14,930
57400	Under Manipulation Procedures on the Vagina	$1,734
57410	Under Manipulation Procedures on the Vagina	$1,416
57415	Under Manipulation Procedures on the Vagina	$2,093

Procedure Code	Modifier	Fee
57420	Under Endoscopy/Laparascopy Procedures on the Vagina	$1,556
57421	Under Endoscopy/Laparascopy Procedures on the Vagina	$2,069
57423	Under Endoscopy/Laparascopy Procedures on the Vagina	$11,876
57425	Under Endoscopy/Laparascopy Procedures on the Vagina	$12,633
57426	Under Endoscopy/Laparascopy Procedures on the Vagina	$10,908
57452	Under Endoscopy Procedures on the Cervix Uteri	$1,421
57454	Under Endoscopy Procedures on the Cervix Uteri	$1,976
57455	Under Endoscopy Procedures on the Cervix Uteri	$1,855
57456	Under Endoscopy Procedures on the Cervix Uteri	$1,749
57460	Under Endoscopy Procedures on the Cervix Uteri	$3,647
57461	Under Endoscopy Procedures on the Cervix Uteri	$4,133
57500	Under Excision Procedures on the Cervix Uteri	$1,653
57505	Under Excision Procedures on the Cervix Uteri	$1,337
57510	Under Excision Procedures on the Cervix Uteri	$1,712
57511	Under Excision Procedures on the Cervix Uteri	$1,888
57513	Under Excision Procedures on the Cervix Uteri	$1,919
57520	Under Excision Procedures on the Cervix Uteri	$4,033
57522	Under Excision Procedures on the Cervix Uteri	$3,432
57530	Under Excision Procedures on the Cervix Uteri	$4,524
57531	Under Excision Procedures on the Cervix Uteri	$21,858
57540	Under Excision Procedures on the Cervix Uteri	$10,055
57545	Under Excision Procedures on the Cervix Uteri	$10,610
57550	Under Excision Procedures on the Cervix Uteri	$5,261
57555	Under Excision Procedures on the Cervix Uteri	$7,758
57556	Under Excision Procedures on the Cervix Uteri	$7,339
57558	Under Excision Procedures on the Cervix Uteri	$1,608
57700	Under Repair Procedures on the Cervix Uteri	$4,008
57720	Under Repair Procedures on the Cervix Uteri	$3,964
57800	Under Manipulation Procedures on the Cervix Uteri	$781
58100	Under Excision Procedures on the Corpus Uteri	$1,414
58110	Under Excision Procedures on the Corpus Uteri	$631
58120	Under Excision Procedures on the Corpus Uteri	$3,379
58140	Under Excision Procedures on the Corpus Uteri	$11,976
58145	Under Excision Procedures on the Corpus Uteri	$7,190
58146	Under Excision Procedures on the Corpus Uteri	$14,881
58150	Under Hysterectomy Procedures	$13,433
58152	Under Hysterectomy Procedures	$16,314
58180	Under Hysterectomy Procedures	$12,603
58200	Under Hysterectomy Procedures	$18,547
58210	Under Hysterectomy Procedures	$25,056
58240	Under Hysterectomy Procedures	$39,292
58260	Under Hysterectomy Procedures	$10,706
58262	Under Hysterectomy Procedures	$11,929
58263	Under Hysterectomy Procedures	$12,815
58267	Under Hysterectomy Procedures	$13,605

Procedure Code	Modifier	Fee
58270	Under Hysterectomy Procedures	$11,438
58275	Under Hysterectomy Procedures	$12,791
58280	Under Hysterectomy Procedures	$13,567
58285	Under Hysterectomy Procedures	$19,633
58290	Under Hysterectomy Procedures	$14,862
58291	Under Hysterectomy Procedures	$16,130
58292	Under Hysterectomy Procedures	$16,952
58293	Under Hysterectomy Procedures	$17,627
58294	Under Hysterectomy Procedures	$15,705
58301	Under Introduction Procedures on the Corpus Uteri	$1,237
58321	Under Introduction Procedures on the Corpus Uteri	$994
58322	Under Introduction Procedures on the Corpus Uteri	$1,118
58323	Under Introduction Procedures on the Corpus Uteri	$202
58340	Under Introduction Procedures on the Corpus Uteri	$1,552
58345	Under Introduction Procedures on the Corpus Uteri	$3,596
58346	Under Introduction Procedures on the Corpus Uteri	$5,844
58350	Under Introduction Procedures on the Corpus Uteri	$1,255
58353	Under Introduction Procedures on the Corpus Uteri	$12,950
58356	Under Introduction Procedures on the Corpus Uteri	$24,121
58400	Under Repair Procedures on the Corpus Uteri	$5,734
58410	Under Repair Procedures on the Corpus Uteri	$10,377
58520	Under Repair Procedures on the Corpus Uteri	$10,156
58540	Under Repair Procedures on the Corpus Uteri	$11,715
58541	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$9,292
58542	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$10,608
58543	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$10,727
58544	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$11,707
58545	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$11,818
58546	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$14,520
58548	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$25,737
58550	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$11,438
58552	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$12,929
58553	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$14,604
58554	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$17,390
58555	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$3,478
58558	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$17,556
58559	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$3,805
58560	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$4,133
58561	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$4,732
58562	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$4,406
58563	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$20,477
58565	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$24,010
58570	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$10,198
58571	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$11,901
58572	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$13,465

Procedure Code	Modifier	Fee
58573	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$16,157
58575	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$24,882
58600	Under Incision Procedures on the Oviduct/Ovary	$4,703
58605	Under Incision Procedures on the Oviduct/Ovary	$4,251
58611	Under Incision Procedures on the Oviduct/Ovary	$1,002
58615	Under Incision Procedures on the Oviduct/Ovary	$3,147
58660	Under Laparoscopic Procedures on the Oviduct/Ovary	$8,815
58661	Under Laparoscopic Procedures on the Oviduct/Ovary	$8,535
58662	Under Laparoscopic Procedures on the Oviduct/Ovary	$9,307
58670	Under Laparoscopic Procedures on the Oviduct/Ovary	$4,719
58671	Under Laparoscopic Procedures on the Oviduct/Ovary	$4,707
58672	Under Laparoscopic Procedures on the Oviduct/Ovary	$9,487
58673	Under Laparoscopic Procedures on the Oviduct/Ovary	$10,315
58674	Under Laparoscopic/Hysteroscopic Procedures on the Corpus Uteri	$10,542
58700	Under Excision Procedures on the Oviduct/Ovary	$10,267
58720	Under Excision Procedures on the Oviduct/Ovary	$9,773
58740	Under Repair Procedures on the Oviduct/Ovary	$11,720
58750	Under Repair Procedures on the Oviduct/Ovary	$11,625
58752	Under Repair Procedures on the Oviduct/Ovary	$11,594
58760	Under Repair Procedures on the Oviduct/Ovary	$10,445
58770	Under Repair Procedures on the Oviduct/Ovary	$10,997
58800	Under Incision Procedures on the Ovary	$4,112
58805	Under Incision Procedures on the Ovary	$5,221
58820	Under Incision Procedures on the Ovary	$4,024
58822	Under Incision Procedures on the Ovary	$9,031
58825	Under Incision Procedures on the Ovary	$8,968
58900	Under Excision Procedures on the Ovary	$5,340
58920	Under Excision Procedures on the Ovary	$9,037
58925	Under Excision Procedures on the Ovary	$9,837
58940	Under Excision Procedures on the Ovary	$7,001
58943	Under Excision Procedures on the Ovary	$15,862
58950	Under Excision Procedures on the Ovary	$15,314
58951	Under Excision Procedures on the Ovary	$19,714
58952	Under Excision Procedures on the Ovary	$22,275
58953	Under Excision Procedures on the Ovary	$27,633
58954	Under Excision Procedures on the Ovary	$30,084
58956	Under Excision Procedures on the Ovary	$18,711
58957	Under Excision Procedures on the Ovary	$21,561
58958	Under Excision Procedures on the Ovary	$21,936
58960	Under Excision Procedures on the Ovary	$13,178
58970	Under Surgical Procedures for In Vitro Fertilization	$2,876
58974	Under Surgical Procedures for In Vitro Fertilization	$ -
58976	Under Surgical Procedures for In Vitro Fertilization	$3,193
59000	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$1,688
59001	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$2,470

Procedure Code	Modifier	Fee
59012	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$2,784
59015	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$2,125
59020	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$942
59020	26	$507
59020	TC	$434
59025	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$646
59025	26	$408
59025	TC	$239
59030	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$1,558
59050	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$703
59051	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$583
59070	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$5,492
59072	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$7,216
59074	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$5,305
59076	Under Antepartum and Fetal Invasive Services for Maternity Care and Delivery	$7,216
59100	Under Excision Procedures for Maternity Care and Delivery	$11,408
59120	Under Excision Procedures for Maternity Care and Delivery	$10,859
59121	Under Excision Procedures for Maternity Care and Delivery	$10,875
59130	Under Excision Procedures for Maternity Care and Delivery	$12,710
59135	Under Excision Procedures for Maternity Care and Delivery	$12,559
59136	Under Excision Procedures for Maternity Care and Delivery	$12,027
59140	Under Excision Procedures for Maternity Care and Delivery	$5,457
59150	Under Excision Procedures for Maternity Care and Delivery	$10,534
59151	Under Excision Procedures for Maternity Care and Delivery	$10,209
59160	Under Excision Procedures for Maternity Care and Delivery	$2,775
59200	Under Introduction Procedures for Maternity Care and Delivery	$969
59300	Under Repair Procedures for Maternity Care and Delivery	$2,621
59320	Under Repair Procedures for Maternity Care and Delivery	$2,094
59325	Under Repair Procedures for Maternity Care and Delivery	$3,337
59350	Under Repair Procedures for Maternity Care and Delivery	$3,881
59400	Under Vaginal Delivery, Antepartum and Postpartum Care Procedures	$28,331
59409	Under Vaginal Delivery, Antepartum and Postpartum Care Procedures	$11,137
59410	Under Vaginal Delivery, Antepartum and Postpartum Care Procedures	$14,228
59412	Under Vaginal Delivery, Antepartum and Postpartum Care Procedures	$1,420
59414	Under Vaginal Delivery, Antepartum and Postpartum Care Procedures	$1,266
59425	Under Vaginal Delivery, Antepartum and Postpartum Care Procedures	$6,130
59426	Under Vaginal Delivery, Antepartum and Postpartum Care Procedures	$10,922
59430	Under Vaginal Delivery, Antepartum and Postpartum Care Procedures	$2,472
59510	Under Cesarean Delivery Procedures	$31,543
59514	Under Cesarean Delivery Procedures	$12,569
59515	Under Cesarean Delivery Procedures	$17,337
59525	Under Cesarean Delivery Procedures	$6,693
59610	Under Delivery Procedures After Previous Cesarean Delivery	$29,955
59612	Under Delivery Procedures After Previous Cesarean Delivery	$12,615
59614	Under Delivery Procedures After Previous Cesarean Delivery	$15,676

Procedure Code	Modifier	Fee
59618	Under Delivery Procedures After Previous Cesarean Delivery	$31,969
59620	Under Delivery Procedures After Previous Cesarean Delivery	$13,067
59622	Under Delivery Procedures After Previous Cesarean Delivery	$17,783
59812	Under Abortion Procedures	$4,307
59820	Under Abortion Procedures	$5,134
59821	Under Abortion Procedures	$5,188
59830	Under Abortion Procedures	$5,946
59840	Under Abortion Procedures	$2,952
59841	Under Abortion Procedures	$5,195
59850	Under Abortion Procedures	$5,182
59851	Under Abortion Procedures	$5,425
59852	Under Abortion Procedures	$6,593
59855	Under Abortion Procedures	$5,667
59856	Under Abortion Procedures	$6,670
59857	Under Abortion Procedures	$6,762
59866	Under Other Procedures for Maternity Care and Delivery	$2,831
59870	Under Other Procedures for Maternity Care and Delivery	$6,406
59871	Under Other Procedures for Maternity Care and Delivery	$1,830
60000	Under Incision Procedures on the Thyroid Gland	$2,211
60100	Under Excision Procedures on the Thyroid Gland	$1,470
60200	Under Excision Procedures on the Thyroid Gland	$8,807
60210	Under Excision Procedures on the Thyroid Gland	$9,487
60212	Under Excision Procedures on the Thyroid Gland	$14,076
60220	Under Excision Procedures on the Thyroid Gland	$9,416
60225	Under Excision Procedures on the Thyroid Gland	$12,454
60240	Under Excision Procedures on the Thyroid Gland	$12,335
60252	Under Excision Procedures on the Thyroid Gland	$17,735
60254	Under Excision Procedures on the Thyroid Gland	$22,300
60260	Under Excision Procedures on the Thyroid Gland	$14,630
60270	Under Excision Procedures on the Thyroid Gland	$18,418
60271	Under Excision Procedures on the Thyroid Gland	$14,156
60280	Under Excision Procedures on the Thyroid Gland	$5,795
60281	Under Excision Procedures on the Thyroid Gland	$7,678
60300	Under Removal Procedures on the Thyroid Gland	$1,534
60500	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$13,023
60502	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$17,429
60505	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$18,628
60512	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$3,303
60520	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$14,279
60521	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$15,298

Procedure Code	Modifier	Fee
60522	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$18,642
60540	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$14,366
60545	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$16,481
60600	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$18,818
60605	Under Excision Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$22,971
60650	Under Laparoscopic Procedures on the Parathyroid, Thymus, Adrenal Glands, Pancreas, and Carotid Body	$16,189
61000	Under Injection, Drainage, or Aspiration Procedures on the Skull, Meninges, and Brain	$1,633
61001	Under Injection, Drainage, or Aspiration Procedures on the Skull, Meninges, and Brain	$1,549
61020	Under Injection, Drainage, or Aspiration Procedures on the Skull, Meninges, and Brain	$1,354
61026	Under Injection, Drainage, or Aspiration Procedures on the Skull, Meninges, and Brain	$1,422
61050	Under Injection, Drainage, or Aspiration Procedures on the Skull, Meninges, and Brain	$1,142
61055	Under Injection, Drainage, or Aspiration Procedures on the Skull, Meninges, and Brain	$1,679
61070	Under Injection, Drainage, or Aspiration Procedures on the Skull, Meninges, and Brain	$767
61105	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$6,556
61107	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$4,522
61108	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$12,641
61120	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$10,637
61140	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$17,960
61150	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$19,441
61151	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$14,227
61154	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$18,043
61156	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$17,890
61210	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$5,349
61215	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$7,143
61250	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$12,384
61253	Under Twist Drill, Burr Hole(s), or Trephine Procedures on the Skull, Meninges, and Brain	$14,227
61304	Under Craniectomy or Craniotomy Procedures	$23,310

Procedure Code	Modifier	Fee
61305	Under Craniectomy or Craniotomy Procedures	$28,862
61312	Under Craniectomy or Craniotomy Procedures	$29,680
61313	Under Craniectomy or Craniotomy Procedures	$28,246
61314	Under Craniectomy or Craniotomy Procedures	$26,069
61315	Under Craniectomy or Craniotomy Procedures	$29,500
61316	Under Craniectomy or Craniotomy Procedures	$1,282
61320	Under Craniectomy or Craniotomy Procedures	$27,110
61321	Under Craniectomy or Craniotomy Procedures	$30,597
61322	Under Craniectomy or Craniotomy Procedures	$33,893
61323	Under Craniectomy or Craniotomy Procedures	$34,394
61330	Under Craniectomy or Craniotomy Procedures	$25,774
61333	Under Craniectomy or Craniotomy Procedures	$29,166
61340	Under Craniectomy or Craniotomy Procedures	$20,739
61343	Under Craniectomy or Craniotomy Procedures	$31,289
61345	Under Craniectomy or Craniotomy Procedures	$29,320
61450	Under Craniectomy or Craniotomy Procedures	$27,656
61458	Under Craniectomy or Craniotomy Procedures	$28,680
61460	Under Craniectomy or Craniotomy Procedures	$30,246
61500	Under Craniectomy or Craniotomy Procedures	$18,367
61501	Under Craniectomy or Craniotomy Procedures	$15,747
61510	Under Craniectomy or Craniotomy Procedures	$31,105
61512	Under Craniectomy or Craniotomy Procedures	$36,331
61514	Under Craniectomy or Craniotomy Procedures	$27,082
61516	Under Craniectomy or Craniotomy Procedures	$26,544
61517	Under Craniectomy or Craniotomy Procedures	$1,278
61518	Under Craniectomy or Craniotomy Procedures	$39,227
61519	Under Craniectomy or Craniotomy Procedures	$41,841
61520	Under Craniectomy or Craniotomy Procedures	$52,824
61521	Under Craniectomy or Craniotomy Procedures	$45,667
61522	Under Craniectomy or Craniotomy Procedures	$31,437
61524	Under Craniectomy or Craniotomy Procedures	$29,922
61526	Under Craniectomy or Craniotomy Procedures	$50,836
61530	Under Craniectomy or Craniotomy Procedures	$44,165
61531	Under Craniectomy or Craniotomy Procedures	$17,464
61533	Under Craniectomy or Craniotomy Procedures	$21,753
61534	Under Craniectomy or Craniotomy Procedures	$23,599
61535	Under Craniectomy or Craniotomy Procedures	$14,284
61536	Under Craniectomy or Craniotomy Procedures	$37,071
61537	Under Craniectomy or Craniotomy Procedures	$35,254
61538	Under Craniectomy or Craniotomy Procedures	$38,385
61539	Under Craniectomy or Craniotomy Procedures	$33,935
61540	Under Craniectomy or Craniotomy Procedures	$31,369
61541	Under Craniectomy or Craniotomy Procedures	$30,880
61543	Under Craniectomy or Craniotomy Procedures	$31,220
61544	Under Craniectomy or Craniotomy Procedures	$27,356

Procedure Code	Modifier	Fee
61545	Under Craniectomy or Craniotomy Procedures	$45,607
61546	Under Craniectomy or Craniotomy Procedures	$33,168
61548	Under Craniectomy or Craniotomy Procedures	$22,164
61550	Under Craniectomy or Craniotomy Procedures	$16,915
61552	Under Craniectomy or Craniotomy Procedures	$21,206
61556	Under Craniectomy or Craniotomy Procedures	$24,463
61557	Under Craniectomy or Craniotomy Procedures	$24,084
61558	Under Craniectomy or Craniotomy Procedures	$26,954
61559	Under Craniectomy or Craniotomy Procedures	$34,305
61563	Under Craniectomy or Craniotomy Procedures	$28,459
61564	Under Craniectomy or Craniotomy Procedures	$34,571
61566	Under Craniectomy or Craniotomy Procedures	$32,309
61567	Under Craniectomy or Craniotomy Procedures	$36,777
61570	Under Craniectomy or Craniotomy Procedures	$26,817
61571	Under Craniectomy or Craniotomy Procedures	$28,571
61575	Under Craniectomy or Craniotomy Procedures	$36,008
61576	Under Craniectomy or Craniotomy Procedures	$59,422
61580	Under Anterior Cranial Fossa Skull Base Procedures	$32,945
61581	Under Anterior Cranial Fossa Skull Base Procedures	$34,553
61582	Under Anterior Cranial Fossa Skull Base Procedures	$42,396
61583	Under Anterior Cranial Fossa Skull Base Procedures	$40,400
61584	Under Anterior Cranial Fossa Skull Base Procedures	$40,098
61585	Under Anterior Cranial Fossa Skull Base Procedures	$45,673
61586	Under Anterior Cranial Fossa Skull Base Procedures	$34,018
61590	Under Middle Cranial Fossa Skull Base Procedures	$41,098
61591	Under Middle Cranial Fossa Skull Base Procedures	$41,558
61592	Under Middle Cranial Fossa Skull Base Procedures	$44,376
61595	Under Posterior Cranial Fossa Skull Base Procedures	$31,553
61596	Under Posterior Cranial Fossa Skull Base Procedures	$32,070
61597	Under Posterior Cranial Fossa Skull Base Procedures	$42,322
61598	Under Posterior Cranial Fossa Skull Base Procedures	$40,273
61600	Under Base of Anterior Cranial Fossa Procedures	$28,733
61601	Under Base of Anterior Cranial Fossa Procedures	$33,484
61605	Under Base of Middle Cranial Fossa Procedures	$28,543
61606	Under Base of Middle Cranial Fossa Procedures	$41,083
61607	Under Base of Middle Cranial Fossa Procedures	$40,889
61608	Under Base of Middle Cranial Fossa Procedures	$45,782
61611	Under Base of Middle Cranial Fossa Procedures	$6,841
61612	Deleted CPT Codes	$25,669
61613	Under Base of Middle Cranial Fossa Procedures	$46,763
61615	Under Base of Posterior Cranial Fossa Procedures	$39,703
61616	Under Base of Posterior Cranial Fossa Procedures	$46,495
61618	Under Repair and/or Reconstruction of Surgical Defects of Skull Base Procedures	$18,070
61619	Under Repair and/or Reconstruction of Surgical Defects of Skull Base Procedures	$19,803

Procedure Code	Modifier	Fee
61623	Under Endovascular Therapy Procedures on the Skull, Meninges, and Brain	$8,068
61624	Under Endovascular Therapy Procedures on the Skull, Meninges, and Brain	$16,107
61626	Under Endovascular Therapy Procedures on the Skull, Meninges, and Brain	$11,756
61630	Under Endovascular Therapy Procedures on the Skull, Meninges, and Brain	$19,094
61635	Under Endovascular Therapy Procedures on the Skull, Meninges, and Brain	$20,226
61645	Under Endovascular Therapy Procedures on the Skull, Meninges, and Brain	$11,418
61650	Under Endovascular Therapy Procedures on the Skull, Meninges, and Brain	$7,451
61651	Under Endovascular Therapy Procedures on the Skull, Meninges, and Brain	$3,170
61680	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$31,946
61682	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$59,267
61684	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$40,819
61686	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$63,122
61690	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$31,403
61692	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$52,359
61697	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$59,821
61698	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$64,609
61700	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$48,522
61702	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$57,357
61703	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$19,475
61705	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$37,413
61708	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$36,593
61710	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$30,804
61711	Under Surgery for Aneurysm, Arteriovenous Malformation or Vascular Disease Procedures on the Skull, Meninges, and Brain	$37,389
61720	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$18,213
61735	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$22,804
61750	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$20,220
61751	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$19,712
61760	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$22,630
61770	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$23,341
61781	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$3,418
61782	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$2,327
61783	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$3,314
61790	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$12,517
61791	Under Stereotaxis Procedures on the Skull, Meninges, and Brain	$16,105

Procedure Code	Modifier	Fee
61796	Under Stereotactic Radiosurgery (Cranial) Procedures on the Skull, Meninges, and Brain	$14,484
61797	Under Stereotactic Radiosurgery (Cranial) Procedures on the Skull, Meninges, and Brain	$3,218
61798	Under Stereotactic Radiosurgery (Cranial) Procedures on the Skull, Meninges, and Brain	$19,759
61799	Under Stereotactic Radiosurgery (Cranial) Procedures on the Skull, Meninges, and Brain	$4,413
61800	Under Stereotactic Radiosurgery (Cranial) Procedures on the Skull, Meninges, and Brain	$2,219
61850	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$14,055
61860	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$22,474
61863	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$21,410
61864	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$4,122
61867	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$32,611
61868	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$7,254
61870	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$16,954
61880	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$7,994
61885	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$7,177
61886	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$11,851
61888	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain	$5,619
62000	Under Repair Procedures on the Skull, Meninges, and Brain	$14,731
62005	Under Repair Procedures on the Skull, Meninges, and Brain	$18,218
62010	Under Repair Procedures on the Skull, Meninges, and Brain	$21,980
62100	Under Repair Procedures on the Skull, Meninges, and Brain	$22,277
62115	Under Repair Procedures on the Skull, Meninges, and Brain	$23,933
62117	Under Repair Procedures on the Skull, Meninges, and Brain	$28,226
62120	Under Repair Procedures on the Skull, Meninges, and Brain	$30,068
62121	Under Repair Procedures on the Skull, Meninges, and Brain	$24,140
62140	Under Repair Procedures on the Skull, Meninges, and Brain	$14,410
62141	Under Repair Procedures on the Skull, Meninges, and Brain	$15,996
62142	Under Repair Procedures on the Skull, Meninges, and Brain	$12,511
62143	Under Repair Procedures on the Skull, Meninges, and Brain	$14,722
62145	Under Repair Procedures on the Skull, Meninges, and Brain	$20,029
62146	Under Repair Procedures on the Skull, Meninges, and Brain	$17,618
62147	Under Repair Procedures on the Skull, Meninges, and Brain	$20,950
62148	Under Repair Procedures on the Skull, Meninges, and Brain	$1,845
62160	Under Neuroendoscopy Procedures on the Skull, Meninges, and Brain	$2,767
62161	Under Neuroendoscopy Procedures on the Skull, Meninges, and Brain	$21,747

Procedure Code	Modifier	Fee
62162	Under Neuroendoscopy Procedures on the Skull, Meninges, and Brain	$27,138
62163	Under Neuroendoscopy Procedures on the Skull, Meninges, and Brain	$17,500
62164	Under Neuroendoscopy Procedures on the Skull, Meninges, and Brain	$29,977
62165	Under Neuroendoscopy Procedures on the Skull, Meninges, and Brain	$21,313
62180	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$22,978
62190	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$13,184
62192	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$13,855
62194	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$6,878
62200	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$19,758
62201	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$17,154
62220	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$14,333
62223	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$14,716
62225	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$7,338
62230	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$11,899
62252	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$1,153
62252	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$660
62252	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$493
62256	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$8,443
62258	Under Cerebrospinal Fluid (CSF) Shunt Procedures	$15,814
62263	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$7,731
62264	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$5,432
62267	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,217
62268	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,405
62269	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,432
62270	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$2,068
62272	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$2,668
62273	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$2,253
62280	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$4,098
62281	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,096
62282	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,759
62284	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$2,476
62287	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$7,604
62290	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$4,222
62291	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$4,194

Procedure Code	Modifier	Fee
62292	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$7,494
62294	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$13,585
62302	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,146
62303	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,217
62304	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,104
62305	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,377
62320	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$2,151
62321	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,205
62322	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$2,021
62323	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$3,167
62324	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$1,881
62325	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$2,850
62326	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$1,983
62327	Under Injection, Drainage, or Aspiration Procedures on the Spine and Spinal Cord	$2,906
62350	Under Catheter Implantation Procedures on the Spine and Spinal Cord	$5,371
62351	Under Catheter Implantation Procedures on the Spine and Spinal Cord	$11,823
62355	Under Catheter Implantation Procedures on the Spine and Spinal Cord	$3,613
62360	Under Reservoir/Pump Implantation Procedures on the Spine and Spinal Cord	$4,217
62361	Under Reservoir/Pump Implantation Procedures on the Spine and Spinal Cord	$6,024
62362	Under Reservoir/Pump Implantation Procedures on the Spine and Spinal Cord	$5,192
62365	Under Reservoir/Pump Implantation Procedures on the Spine and Spinal Cord	$4,016
62367	Under Reservoir/Pump Implantation Procedures on the Spine and Spinal Cord	$552
62368	Under Reservoir/Pump Implantation Procedures on the Spine and Spinal Cord	$744
62369	Under Reservoir/Pump Implantation Procedures on the Spine and Spinal Cord	$1,554
62370	Under Reservoir/Pump Implantation Procedures on the Spine and Spinal Cord	$1,638
63001	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$17,451
63003	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$17,465
63005	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$16,548
63011	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$15,019

Procedure Code	Modifier	Fee
63012	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$16,643
63015	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$20,902
63017	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$17,673
63020	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$16,136
63030	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$13,471
63035	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$2,682
63040	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$19,528
63042	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$17,958
63043	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$ -
63044	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$ -
63045	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$18,007
63046	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$17,058
63047	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$15,295
63048	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$2,975
63050	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$22,513
63051	Under Posterior Extradural Laminotomy or Laminectomy for Exploration/ Decompression of Neural Elements or Excision of Herniated Intervertebral Disks Procedures	$23,746
63055	Under Transpedicular or Costovertebral Approach for Posterolateral Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$22,918

Procedure Code	Modifier	Fee
63056	Under Transpedicular or Costovertebral Approach for Posterolateral Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$20,738
63057	Under Transpedicular or Costovertebral Approach for Posterolateral Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$4,505
63064	Under Transpedicular or Costovertebral Approach for Posterolateral Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$25,034
63066	Under Transpedicular or Costovertebral Approach for Posterolateral Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$3,016
63075	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$18,811
63076	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$3,477
63077	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$20,675
63078	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$3,029
63081	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$24,536
63082	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$3,757
63085	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$26,651
63086	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$2,679
63087	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$33,689
63088	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$3,392
63090	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$27,013
63091	Under Anterior or Anterolateral Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$2,467
63101	Under Lateral Extracavitary Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$32,633
63102	Under Lateral Extracavitary Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$31,503
63103	Under Lateral Extracavitary Approach for Extradural Exploration/Decompression Procedures on the Spine and Spinal Cord	$4,141
63170	Under Incision Procedures on the Spine and Spinal Cord	$22,830
63172	Under Incision Procedures on the Spine and Spinal Cord	$20,251
63173	Under Incision Procedures on the Spine and Spinal Cord	$24,770
63180	Under Incision Procedures on the Spine and Spinal Cord	$21,301
63182	Under Incision Procedures on the Spine and Spinal Cord	$23,405
63185	Under Incision Procedures on the Spine and Spinal Cord	$15,644
63190	Under Incision Procedures on the Spine and Spinal Cord	$16,932
63191	Under Incision Procedures on the Spine and Spinal Cord	$19,739
63194	Under Incision Procedures on the Spine and Spinal Cord	$22,893

Procedure Code	Modifier	Fee
63195	Under Incision Procedures on the Spine and Spinal Cord	$22,077
63196	Under Incision Procedures on the Spine and Spinal Cord	$25,591
63197	Under Incision Procedures on the Spine and Spinal Cord	$24,556
63198	Under Incision Procedures on the Spine and Spinal Cord	$30,049
63199	Under Incision Procedures on the Spine and Spinal Cord	$31,491
63200	Under Incision Procedures on the Spine and Spinal Cord	$21,762
63250	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$42,616
63251	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$43,525
63252	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$43,521
63265	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$23,642
63266	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$24,312
63267	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$19,164
63268	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$20,650
63270	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$29,849
63271	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$29,383
63272	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$26,827
63273	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$26,775
63275	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$25,504
63276	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$25,252
63277	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$21,799
63278	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$22,781
63280	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$30,087
63281	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$29,776
63282	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$27,947
63283	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$27,264
63285	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$37,566
63286	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$37,111
63287	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$39,411
63290	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$40,070

Procedure Code	Modifier	Fee
63295	Under Excision by Laminectomy of Lesion Other Than Herniated Disk Procedures	$4,850
63300	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$25,805
63301	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$31,680
63302	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$31,278
63303	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$33,266
63304	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$33,756
63305	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$35,926
63306	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$35,304
63307	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$34,589
63308	Under Excision, Anterior or Anterolateral Approach, Intraspinal Lesion Procedures on the Spine and Spinal Cord	$4,559
63600	Under Stereotaxis Procedures on the Spine and Spinal Cord	$14,917
63610	Under Stereotaxis Procedures on the Spine and Spinal Cord	$8,434
63620	Under Stereotactic Radiosurgery (Spinal) Procedures on the Spine and Spinal Cord	$16,020
63621	Under Stereotactic Radiosurgery (Spinal) Procedures on the Spine and Spinal Cord	$3,701
63650	Under Neurostimulators (Spinal) Procedures	$17,114
63655	Under Neurostimulators (Spinal) Procedures	$11,545
63661	Under Neurostimulators (Spinal) Procedures	$7,693
63662	Under Neurostimulators (Spinal) Procedures	$11,672
63663	Under Neurostimulators (Spinal) Procedures	$10,300
63664	Under Neurostimulators (Spinal) Procedures	$12,166
63685	Under Neurostimulators (Spinal) Procedures	$4,905
63688	Under Neurostimulators (Spinal) Procedures	$5,053
63700	Under Repair Procedures on the Spine and Spinal Cord	$18,565
63702	Under Repair Procedures on the Spine and Spinal Cord	$20,354
63704	Under Repair Procedures on the Spine and Spinal Cord	$23,578
63706	Under Repair Procedures on the Spine and Spinal Cord	$26,285
63707	Under Repair Procedures on the Spine and Spinal Cord	$12,833
63709	Under Repair Procedures on the Spine and Spinal Cord	$15,260
63710	Under Repair Procedures on the Spine and Spinal Cord	$15,006
63740	Under Shunt, Spinal CSF Procedures	$13,859
63741	Under Shunt, Spinal CSF Procedures	$9,498
63744	Under Shunt, Spinal CSF Procedures	$9,211
63746	Under Shunt, Spinal CSF Procedures	$8,505
64400	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,733
64405	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,359

Procedure Code	Modifier	Fee
64408	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,503
64413	Deleted CPT Codes	$1,671
64415	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,531
64416	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,029
64417	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,678
64418	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,525
64420	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,448
64421	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,955
64425	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,742
64430	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,782
64435	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,780
64445	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,784
64446	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,029
64447	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,572
64448	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$930
64449	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,111
64450	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,038
64455	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$618
64461	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,928
64462	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,057
64463	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$2,049
64479	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$3,039
64480	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,468
64483	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$2,820
64484	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,191
64486	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,517

Procedure Code	Modifier	Fee
64487	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,727
64488	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$1,743
64489	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Somatic Nerves	$2,358
64490	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Paravertebral Spinal Nerves and Branches	$2,448
64491	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Paravertebral Spinal Nerves and Branches	$1,206
64492	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Paravertebral Spinal Nerves and Branches	$1,215
64493	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Paravertebral Spinal Nerves and Branches	$2,220
64494	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Paravertebral Spinal Nerves and Branches	$1,115
64495	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Paravertebral Spinal Nerves and Branches	$1,115
64505	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Autonomic Nerves	$1,442
64508	Deleted CPT Codes	$640
64510	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Autonomic Nerves	$1,646
64517	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Autonomic Nerves	$2,457
64520	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Autonomic Nerves	$2,428
64530	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Autonomic Nerves	$2,437
64550	Deleted CPT Codes	$231
64553	Under Neurostimulator Procedures on the Peripheral Nerves	$15,061
64555	Under Neurostimulator Procedures on the Peripheral Nerves	$15,666
64561	Under Neurostimulator Procedures on the Peripheral Nerves	$10,810
64566	Under Neurostimulator Procedures on the Peripheral Nerves	$1,676
64568	Under Neurostimulator Procedures on the Peripheral Nerves	$8,848
64569	Under Neurostimulator Procedures on the Peripheral Nerves	$10,736
64570	Under Neurostimulator Procedures on the Peripheral Nerves	$10,428
64575	Under Neurostimulator Procedures on the Peripheral Nerves	$4,343
64580	Under Neurostimulator Procedures on the Peripheral Nerves	$4,151
64581	Under Neurostimulator Procedures on the Peripheral Nerves	$8,811
64585	Under Neurostimulator Procedures on the Peripheral Nerves	$3,202
64590	Under Neurostimulator Procedures on the Peripheral Nerves	$3,488
64595	Under Neurostimulator Procedures on the Peripheral Nerves	$3,215
64600	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$5,352
64605	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$7,149
64610	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$10,022

Procedure Code	Modifier	Fee
64611	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$1,636
64612	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$1,770
64615	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$2,017
64616	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$1,787
64617	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$2,111
64620	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$2,655
64630	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$3,023
64632	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$1,106
64633	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$5,416
64634	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$2,437
64635	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$5,355
64636	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$2,213
64640	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$1,714
64642	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$1,927
64643	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$1,235
64644	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$2,196
64645	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$1,530
64646	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$2,019
64647	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Somatic Nerves	$2,424
64650	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Sympathetic Nerves	$1,030
64653	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Sympathetic Nerves	$1,281
64680	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Sympathetic Nerves	$3,921
64681	Under Destruction by Neurolytic Agent (eg, Chemical, Thermal, Electrical or Radiofrequency) Procedures on the Sympathetic Nerves	$6,720
64702	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$6,664
64704	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$4,193

Procedure Code	Modifier	Fee
64708	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$6,672
64712	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$7,750
64713	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$10,365
64714	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$9,507
64716	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$7,029
64718	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$7,934
64719	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$5,351
64721	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$5,738
64722	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$4,784
64726	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$3,542
64727	Under Neuroplasty (Exploration, Neurolysis or Nerve Decompression) Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$2,507
64732	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$6,183
64734	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$7,004
64736	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$5,163
64738	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$6,184
64740	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$6,564
64742	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$6,413
64744	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$6,948
64746	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$5,852
64755	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$12,612

Procedure Code	Modifier	Fee
64760	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$7,013
64763	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$6,944
64766	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$8,562
64771	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$7,924
64772	Under Transection or Avulsion Procedures on the Extracranial Nerves, Peripheral Nerves, and Autonomic Nervous System	$7,604
64774	Under Excision and Implantation Procedures on the Somatic Nerves	$5,499
64776	Under Excision and Implantation Procedures on the Somatic Nerves	$5,186
64778	Under Excision and Implantation Procedures on the Somatic Nerves	$2,496
64782	Under Excision and Implantation Procedures on the Somatic Nerves	$6,035
64783	Under Excision and Implantation Procedures on the Somatic Nerves	$2,986
64784	Under Excision and Implantation Procedures on the Somatic Nerves	$9,732
64786	Under Excision and Implantation Procedures on the Somatic Nerves	$13,709
64787	Under Excision and Implantation Procedures on the Somatic Nerves	$3,242
64788	Under Excision and Implantation Procedures on the Somatic Nerves	$5,307
64790	Under Excision and Implantation Procedures on the Somatic Nerves	$11,451
64792	Under Excision and Implantation Procedures on the Somatic Nerves	$16,973
64795	Under Excision and Implantation Procedures on the Somatic Nerves	$2,688
64802	Under Excision Procedures on the Sympathetic Nerves	$11,778
64804	Under Excision Procedures on the Sympathetic Nerves	$16,881
64809	Under Excision Procedures on the Sympathetic Nerves	$15,526
64818	Under Excision Procedures on the Sympathetic Nerves	$8,565
64820	Under Excision Procedures on the Sympathetic Nerves	$9,473
64821	Under Excision Procedures on the Sympathetic Nerves	$9,318
64822	Under Excision Procedures on the Sympathetic Nerves	$9,318
64823	Under Excision Procedures on the Sympathetic Nerves	$10,625
64831	Under Neurorrhaphy Procedures	$9,182
64832	Under Neurorrhaphy Procedures	$4,563
64834	Under Neurorrhaphy Procedures	$9,904
64835	Under Neurorrhaphy Procedures	$11,002
64836	Under Neurorrhaphy Procedures	$11,002
64837	Under Neurorrhaphy Procedures	$5,034
64840	Under Neurorrhaphy Procedures	$12,999
64856	Under Neurorrhaphy Procedures	$13,638
64857	Under Neurorrhaphy Procedures	$14,233
64858	Under Neurorrhaphy Procedures	$15,958
64859	Under Neurorrhaphy Procedures	$3,419
64861	Under Neurorrhaphy Procedures	$21,678
64862	Under Neurorrhaphy Procedures	$18,696
64864	Under Neurorrhaphy Procedures	$11,630
64865	Under Neurorrhaphy Procedures	$14,477
64866	Under Neurorrhaphy Procedures	$17,178

Procedure Code	Modifier	Fee
64868	Under Neurorrhaphy Procedures	$13,255
64872	Under Neurorrhaphy Procedures	$1,593
64874	Under Neurorrhaphy Procedures	$2,398
64876	Under Neurorrhaphy Procedures	$2,713
64885	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$14,880
64886	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$17,076
64890	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$14,639
64891	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$15,569
64892	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$14,228
64893	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$15,190
64895	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$18,021
64896	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$19,433
64897	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$17,207
64898	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$18,657
64901	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$8,199
64902	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$9,491
64905	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$13,720
64907	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$17,673
64910	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$10,702
64911	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$13,836
64912	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$10,346
64913	Under Neurorrhaphy With Nerve Graft, Vein Graft or Conduit Procedures	$2,110
65091	Under Removal Procedures of Eye Contents	$8,206
65093	Under Removal Procedures of Eye Contents	$8,119
65101	Under Removal Procedures of Eye Contents	$9,537
65103	Under Removal Procedures of Eye Contents	$9,954
65105	Under Removal Procedures of Eye Contents	$10,972
65110	Under Removal Procedures of Eye Contents	$15,768
65112	Under Removal Procedures of Eye Contents	$18,290
65114	Under Removal Procedures of Eye Contents	$19,180
65125	Under Secondary Implant(s) Procedures on the Eyeball	$5,936
65130	Under Secondary Implant(s) Procedures on the Eyeball	$9,459
65135	Under Secondary Implant(s) Procedures on the Eyeball	$9,595
65140	Under Secondary Implant(s) Procedures on the Eyeball	$10,429
65150	Under Secondary Implant(s) Procedures on the Eyeball	$7,469
65155	Under Secondary Implant(s) Procedures on the Eyeball	$10,928
65175	Under Secondary Implant(s) Procedures on the Eyeball	$8,492
65205	Under Removal of Foreign Body Procedures on the Eyeball	$732
65210	Under Removal of Foreign Body Procedures on the Eyeball	$891
65220	Under Removal of Foreign Body Procedures on the Eyeball	$773
65222	Under Removal of Foreign Body Procedures on the Eyeball	$873
65235	Under Removal of Foreign Body Procedures on the Eyeball	$9,182
65260	Under Removal of Foreign Body Procedures on the Eyeball	$12,411
65265	Under Removal of Foreign Body Procedures on the Eyeball	$13,923
65270	Under Repair of Laceration Procedures on the Eyeball	$3,474

Procedure Code	Modifier	Fee
65272	Under Repair of Laceration Procedures on the Eyeball	$6,513
65273	Under Repair of Laceration Procedures on the Eyeball	$4,919
65275	Under Repair of Laceration Procedures on the Eyeball	$7,492
65280	Under Repair of Laceration Procedures on the Eyeball	$8,684
65285	Under Repair of Laceration Procedures on the Eyeball	$14,328
65286	Under Repair of Laceration Procedures on the Eyeball	$9,135
65290	Under Repair of Laceration Procedures on the Eyeball	$6,346
65400	Under Excision Procedures on the Cornea	$8,802
65410	Under Excision Procedures on the Cornea	$1,866
65420	Under Excision Procedures on the Cornea	$6,700
65426	Under Excision Procedures on the Cornea	$8,452
65430	Under Removal or Destruction Procedures on the Cornea	$1,495
65435	Under Removal or Destruction Procedures on the Cornea	$1,051
65436	Under Removal or Destruction Procedures on the Cornea	$5,019
65450	Under Removal or Destruction Procedures on the Cornea	$4,227
65600	Under Removal or Destruction Procedures on the Cornea	$5,102
65710	Under Keratoplasty Procedures on the Cornea	$14,278
65730	Under Keratoplasty Procedures on the Cornea	$15,858
65750	Under Keratoplasty Procedures on the Cornea	$15,927
65755	Under Keratoplasty Procedures on the Cornea	$15,851
65756	Under Keratoplasty Procedures on the Cornea	$15,300
65757	Under Keratoplasty Procedures on the Cornea	$ -
65770	Under Other Procedures on the Cornea	$18,098
65772	Under Other Procedures on the Cornea	$5,842
65775	Under Other Procedures on the Cornea	$7,130
65778	Under Other Procedures on the Cornea	$18,285
65779	Under Other Procedures on the Cornea	$15,670
65780	Under Other Procedures on the Cornea	$8,618
65781	Under Other Procedures on the Cornea	$17,235
65782	Under Other Procedures on the Cornea	$14,873
65785	Under Other Procedures on the Cornea	$32,495
65800	Under Incision Procedures on the Anterior Chamber of the Eye	$1,551
65810	Under Incision Procedures on the Anterior Chamber of the Eye	$6,021
65815	Under Incision Procedures on the Anterior Chamber of the Eye	$8,276
65820	Under Incision Procedures on the Anterior Chamber of the Eye	$9,684
65850	Under Incision Procedures on the Anterior Chamber of the Eye	$10,844
65855	Under Incision Procedures on the Anterior Chamber of the Eye	$3,176
65860	Under Incision Procedures on the Anterior Chamber of the Eye	$4,006
65865	Under Incision Procedures on the Anterior Chamber of the Eye	$6,113
65870	Under Incision Procedures on the Anterior Chamber of the Eye	$7,637
65875	Under Incision Procedures on the Anterior Chamber of the Eye	$8,150
65880	Under Incision Procedures on the Anterior Chamber of the Eye	$8,576
65900	Under Removal Procedures on the Anterior Chamber of the Eye	$12,453
65920	Under Removal Procedures on the Anterior Chamber of the Eye	$10,186
65930	Under Removal Procedures on the Anterior Chamber of the Eye	$8,236

Procedure Code	Modifier	Fee
66020	Under Introduction Procedures on the Anterior Chamber of the Eye	$2,424
66030	Under Introduction Procedures on the Anterior Chamber of the Eye	$2,167
66130	Under Excision Procedures on the Anterior Sclera of the Eye	$9,014
66150	Under Excision Procedures on the Anterior Sclera of the Eye	$11,336
66155	Under Excision Procedures on the Anterior Sclera of the Eye	$11,327
66160	Under Excision Procedures on the Anterior Sclera of the Eye	$12,767
66170	Under Excision Procedures on the Anterior Sclera of the Eye	$14,140
66172	Under Excision Procedures on the Anterior Sclera of the Eye	$15,403
66174	Under Excision Procedures on the Anterior Sclera of the Eye	$12,246
66175	Under Excision Procedures on the Anterior Sclera of the Eye	$12,823
66179	Under Shunt Procedures on the Anterior Sclera of the Eye	$13,932
66180	Under Shunt Procedures on the Anterior Sclera of the Eye	$14,697
66183	Under Shunt Procedures on the Anterior Sclera of the Eye	$13,315
66184	Under Shunt Procedures on the Anterior Sclera of the Eye	$10,151
66185	Under Shunt Procedures on the Anterior Sclera of the Eye	$10,916
66220	Deleted	$9,658
66225	Under Repair or Revision Procedures on the Anterior Sclera of the Eye	$12,043
66250	Under Repair or Revision Procedures on the Anterior Sclera of the Eye	$9,703
66500	Under Incision Procedures on the Iris, Ciliary Body of the Eye	$4,572
66505	Under Incision Procedures on the Iris, Ciliary Body of the Eye	$5,017
66600	Under Excision Procedures on the Iris, Ciliary Body of the Eye	$10,768
66605	Under Excision Procedures on the Iris, Ciliary Body of the Eye	$13,643
66625	Under Excision Procedures on the Iris, Ciliary Body of the Eye	$5,551
66630	Under Excision Procedures on the Iris, Ciliary Body of the Eye	$7,360
66635	Under Excision Procedures on the Iris, Ciliary Body of the Eye	$7,433
66680	Under Repair Procedures on the Iris, Ciliary Body of the Eye	$6,692
66682	Under Repair Procedures on the Iris, Ciliary Body of the Eye	$8,252
66700	Under Destruction Procedures on the Iris, Ciliary Body of the Eye	$5,843
66710	Under Destruction Procedures on the Iris, Ciliary Body of the Eye	$5,716
66711	Under Destruction Procedures on the Iris, Ciliary Body of the Eye	$8,313
66720	Under Destruction Procedures on the Iris, Ciliary Body of the Eye	$5,967
66740	Under Destruction Procedures on the Iris, Ciliary Body of the Eye	$5,675
66761	Under Destruction Procedures on the Iris, Ciliary Body of the Eye	$3,849
66762	Under Destruction Procedures on the Iris, Ciliary Body of the Eye	$6,159
66770	Under Destruction Procedures on the Iris, Ciliary Body of the Eye	$6,843
66820	Under Incision Procedures on the Lens of the Eye	$5,110
66821	Under Incision Procedures on the Lens of the Eye	$4,266
66825	Under Incision Procedures on the Lens of the Eye	$9,821
66830	Under Removal of Lens Material Procedures of the Eye	$9,200
66840	Under Removal of Lens Material Procedures of the Eye	$9,006
66850	Under Removal of Lens Material Procedures of the Eye	$10,248
66852	Under Removal of Lens Material Procedures of the Eye	$10,914
66920	Under Removal of Lens Material Procedures of the Eye	$9,745
66930	Under Removal of Lens Material Procedures of the Eye	$11,067
66940	Under Removal of Lens Material Procedures of the Eye	$10,113

Procedure Code	Modifier	Fee
66982	Under Intraocular Lens Procedures	$10,267
66983	Under Intraocular Lens Procedures	$9,630
66984	Under Intraocular Lens Procedures	$8,263
66985	Under Intraocular Lens Procedures	$9,957
66986	Under Intraocular Lens Procedures	$11,743
66990	Under Other Procedures of the Anterior Segment of Eye	$1,165
67005	Under Vitreous Procedures on the Posterior Segment of the Eye	$6,111
67010	Under Vitreous Procedures on the Posterior Segment of the Eye	$7,016
67015	Under Vitreous Procedures on the Posterior Segment of the Eye	$7,501
67025	Under Vitreous Procedures on the Posterior Segment of the Eye	$9,406
67027	Under Vitreous Procedures on the Posterior Segment of the Eye	$11,012
67028	Under Vitreous Procedures on the Posterior Segment of the Eye	$1,316
67030	Under Vitreous Procedures on the Posterior Segment of the Eye	$6,893
67031	Under Vitreous Procedures on the Posterior Segment of the Eye	$5,040
67036	Under Vitreous Procedures on the Posterior Segment of the Eye	$11,648
67039	Under Vitreous Procedures on the Posterior Segment of the Eye	$12,473
67040	Under Vitreous Procedures on the Posterior Segment of the Eye	$13,478
67041	Under Vitreous Procedures on the Posterior Segment of the Eye	$14,894
67042	Under Vitreous Procedures on the Posterior Segment of the Eye	$14,894
67043	Under Vitreous Procedures on the Posterior Segment of the Eye	$15,739
67101	Under Repair Procedures on the Retina or Choroid	$4,249
67105	Under Repair Procedures on the Retina or Choroid	$3,839
67107	Under Repair Procedures on the Retina or Choroid	$14,630
67108	Under Repair Procedures on the Retina or Choroid	$15,515
67110	Under Repair Procedures on the Retina or Choroid	$11,337
67113	Under Repair Procedures on the Retina or Choroid	$17,314
67115	Under Repair Procedures on the Retina or Choroid	$6,466
67120	Under Repair Procedures on the Retina or Choroid	$8,489
67121	Under Repair Procedures on the Retina or Choroid	$11,739
67141	Under Prophylaxis Procedures on the Retina or Choroid	$6,788
67145	Under Prophylaxis Procedures on the Retina or Choroid	$6,832
67208	Under Destruction Procedures on the Retina or Choroid	$7,746
67210	Under Destruction Procedures on the Retina or Choroid	$6,702
67218	Under Destruction Procedures on the Retina or Choroid	$17,865
67220	Under Destruction Procedures on the Retina or Choroid	$6,911
67221	Under Destruction Procedures on the Retina or Choroid	$3,706
67225	Under Destruction Procedures on the Retina or Choroid	$384
67227	Under Destruction Procedures on the Retina or Choroid	$3,771
67228	Under Destruction Procedures on the Retina or Choroid	$4,420
67229	Under Destruction Procedures on the Retina or Choroid	$15,067
67250	Under Repair Procedures on the Posterior Sclera of the Eye	$10,091
67255	Under Repair Procedures on the Posterior Sclera of the Eye	$8,841
67311	Under Extraocular Muscles Procedures	$7,723
67312	Under Extraocular Muscles Procedures	$9,192
67314	Under Extraocular Muscles Procedures	$8,690

Procedure Code	Modifier	Fee
67316	Under Extraocular Muscles Procedures	$10,364
67318	Under Extraocular Muscles Procedures	$9,132
67320	Under Extraocular Muscles Procedures	$4,173
67331	Under Extraocular Muscles Procedures	$3,956
67332	Under Extraocular Muscles Procedures	$4,291
67334	Under Extraocular Muscles Procedures	$3,900
67335	Under Extraocular Muscles Procedures	$1,917
67340	Under Extraocular Muscles Procedures	$4,641
67343	Under Extraocular Muscles Procedures	$8,432
67345	Under Extraocular Muscles Procedures	$3,213
67346	Under Extraocular Muscles Procedures	$2,512
67400	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$12,025
67405	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$10,246
67412	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$11,015
67413	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$11,054
67414	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$17,127
67415	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$1,355
67420	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$20,943
67430	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$16,110
67440	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$15,585
67445	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$18,110
67450	Under Exploration, Excision, Decompression on the Orbit of the Ocular Adnexa	$16,206
67500	Under Other Procedures on the Orbit	$1,030
67505	Under Other Procedures on the Orbit	$1,128
67515	Under Other Procedures on the Orbit	$1,251
67550	Under Other Procedures on the Orbit	$12,476
67560	Under Other Procedures on the Orbit	$12,797
67570	Under Other Procedures on the Orbit	$15,210
67700	Under Incision Procedures on the Eyelids	$3,491
67710	Under Incision Procedures on the Eyelids	$2,909
67715	Under Incision Procedures on the Eyelids	$3,130
67800	Under Excision and Destruction Procedures on the Eyelids	$1,651
67801	Under Excision and Destruction Procedures on the Eyelids	$2,105
67805	Under Excision and Destruction Procedures on the Eyelids	$2,619
67808	Under Excision and Destruction Procedures on the Eyelids	$4,771
67810	Under Incision Procedures on the Eyelids	$2,235
67820	Under Excision and Destruction Procedures on the Eyelids	$521
67825	Under Excision and Destruction Procedures on the Eyelids	$1,660
67830	Under Excision and Destruction Procedures on the Eyelids	$3,464
67835	Under Excision and Destruction Procedures on the Eyelids	$5,673
67840	Under Excision and Destruction Procedures on the Eyelids	$3,576
67850	Under Excision and Destruction Procedures on the Eyelids	$2,793
67875	Under Tarsorrhaphy Procedures on the Eyelids	$2,241
67880	Under Tarsorrhaphy Procedures on the Eyelids	$5,938
67882	Under Tarsorrhaphy Procedures on the Eyelids	$7,316

Procedure Code	Modifier	Fee
67900	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$8,298
67901	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$9,796
67902	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$9,361
67903	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$7,684
67904	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$9,491
67906	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$6,570
67908	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$6,390
67909	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$6,960
67911	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$7,275
67912	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$11,386
67914	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$6,084
67915	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$3,802
67916	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$7,672
67917	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$7,815
67921	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$5,969
67922	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$3,766
67923	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$7,661
67924	Under Repair (Brow Ptosis, Blepharoptosis, Lid Retraction, Ectropion, Entropion) Procedures on the Eyelids	$8,177
67930	Under Reconstruction Procedures on the Eyelids	$4,726
67935	Under Reconstruction Procedures on the Eyelids	$7,707
67938	Under Reconstruction Procedures on the Eyelids	$3,169
67950	Under Reconstruction Procedures on the Eyelids	$7,425
67961	Under Reconstruction Procedures on the Eyelids	$7,455
67966	Under Reconstruction Procedures on the Eyelids	$9,946
67971	Under Reconstruction Procedures on the Eyelids	$9,364
67973	Under Reconstruction Procedures on the Eyelids	$12,044
67974	Under Reconstruction Procedures on the Eyelids	$12,007
67975	Under Reconstruction Procedures on the Eyelids	$8,863
68020	Under Incision and Drainage Procedures on the Conjunctiva	$1,560
68040	Under Incision and Drainage Procedures on the Conjunctiva	$805
68100	Under Excision and/or Destruction Procedures on the Conjunctiva	$2,216
68110	Under Excision and/or Destruction Procedures on the Conjunctiva	$2,928
68115	Under Excision and/or Destruction Procedures on the Conjunctiva	$4,043

Procedure Code	Modifier	Fee
68130	Under Excision and/or Destruction Procedures on the Conjunctiva	$6,977
68135	Under Excision and/or Destruction Procedures on the Conjunctiva	$2,038
68200	Under Conjunctivoplasty Procedures	$536
68320	Under Conjunctivoplasty Procedures	$9,387
68325	Under Conjunctivoplasty Procedures	$8,507
68326	Under Conjunctivoplasty Procedures	$8,358
68328	Under Conjunctivoplasty Procedures	$9,180
68330	Under Conjunctivoplasty Procedures	$7,832
68335	Under Conjunctivoplasty Procedures	$8,396
68340	Under Conjunctivoplasty Procedures	$7,059
68360	Under Other Procedures on the Conjunctiva	$6,871
68362	Under Other Procedures on the Conjunctiva	$8,489
68371	Under Other Procedures on the Conjunctiva	$5,337
68400	Under Incision Procedures on the Lacrimal System	$3,689
68420	Under Incision Procedures on the Lacrimal System	$4,173
68440	Under Incision Procedures on the Lacrimal System	$1,320
68500	Under Excision Procedures on the Lacrimal System	$12,607
68505	Under Excision Procedures on the Lacrimal System	$12,542
68510	Under Excision Procedures on the Lacrimal System	$5,769
68520	Under Excision Procedures on the Lacrimal System	$8,899
68525	Under Excision Procedures on the Lacrimal System	$3,414
68530	Under Excision Procedures on the Lacrimal System	$5,535
68540	Under Excision Procedures on the Lacrimal System	$12,002
68550	Under Excision Procedures on the Lacrimal System	$14,714
68700	Under Repair Procedures on the Lacrimal System	$7,816
68705	Under Repair Procedures on the Lacrimal System	$3,075
68720	Under Repair Procedures on the Lacrimal System	$9,793
68745	Under Repair Procedures on the Lacrimal System	$9,829
68750	Under Repair Procedures on the Lacrimal System	$10,179
68760	Under Repair Procedures on the Lacrimal System	$2,615
68761	Under Repair Procedures on the Lacrimal System	$1,917
68770	Under Repair Procedures on the Lacrimal System	$8,136
68801	Under Probing and/or Related Procedures on the Lacrimal System	$1,142
68810	Under Probing and/or Related Procedures on the Lacrimal System	$2,001
68811	Under Probing and/or Related Procedures on the Lacrimal System	$1,767
68815	Under Probing and/or Related Procedures on the Lacrimal System	$5,149
68816	Under Probing and/or Related Procedures on the Lacrimal System	$8,397
68840	Under Probing and/or Related Procedures on the Lacrimal System	$1,660
68850	Under Probing and/or Related Procedures on the Lacrimal System	$810
69000	Under Incision Procedures on the External Ear	$2,424
69005	Under Incision Procedures on the External Ear	$2,771
69020	Under Incision Procedures on the External Ear	$2,981
69100	Under Excision Procedures on the External Ear	$1,314
69105	Under Excision Procedures on the External Ear	$1,798
69110	Under Excision Procedures on the External Ear	$5,964

Procedure Code	Modifier	Fee
69120	Under Excision Procedures on the External Ear	$5,272
69140	Under Excision Procedures on the External Ear	$11,356
69145	Under Excision Procedures on the External Ear	$5,087
69150	Under Excision Procedures on the External Ear	$13,648
69155	Under Excision Procedures on the External Ear	$21,654
69200	Under Removal Procedures on the External Ear	$1,067
69205	Under Removal Procedures on the External Ear	$1,309
69209	Under Removal Procedures on the External Ear	$184
69210	Under Removal Procedures on the External Ear	$632
69220	Under Removal Procedures on the External Ear	$1,066
69222	Under Removal Procedures on the External Ear	$2,807
69300	Under Repair Procedures on the External Ear	$8,203
69310	Under Repair Procedures on the External Ear	$14,131
69320	Under Repair Procedures on the External Ear	$19,821
69420	Under Incision Procedures on the Middle Ear	$2,470
69421	Under Incision Procedures on the Middle Ear	$1,934
69424	Under Incision Procedures on the Middle Ear	$1,648
69433	Under Incision Procedures on the Middle Ear	$2,609
69436	Under Incision Procedures on the Middle Ear	$2,082
69440	Under Incision Procedures on the Middle Ear	$8,922
69450	Under Incision Procedures on the Middle Ear	$7,085
69501	Under Excision Procedures on the Middle Ear	$9,515
69502	Under Excision Procedures on the Middle Ear	$12,651
69505	Under Excision Procedures on the Middle Ear	$15,596
69511	Under Excision Procedures on the Middle Ear	$15,981
69530	Under Excision Procedures on the Middle Ear	$21,468
69535	Under Excision Procedures on the Middle Ear	$35,354
69540	Under Excision Procedures on the Middle Ear	$2,684
69550	Under Excision Procedures on the Middle Ear	$13,491
69552	Under Excision Procedures on the Middle Ear	$20,408
69554	Under Excision Procedures on the Middle Ear	$32,860
69601	Under Repair Procedures on the Middle Ear	$13,593
69602	Under Repair Procedures on the Middle Ear	$14,137
69603	Under Repair Procedures on the Middle Ear	$16,348
69604	Under Repair Procedures on the Middle Ear	$14,456
69605	Under Repair Procedures on the Middle Ear	$20,251
69610	Under Repair Procedures on the Middle Ear	$4,983
69620	Under Repair Procedures on the Middle Ear	$8,935
69631	Under Repair Procedures on the Middle Ear	$11,475
69632	Under Repair Procedures on the Middle Ear	$13,983
69633	Under Repair Procedures on the Middle Ear	$13,574
69635	Under Repair Procedures on the Middle Ear	$16,099
69636	Under Repair Procedures on the Middle Ear	$17,902
69637	Under Repair Procedures on the Middle Ear	$18,066
69641	Under Repair Procedures on the Middle Ear	$13,524

Procedure Code	Modifier	Fee
69642	Under Repair Procedures on the Middle Ear	$17,367
69643	Under Repair Procedures on the Middle Ear	$15,911
69644	Under Repair Procedures on the Middle Ear	$19,190
69645	Under Repair Procedures on the Middle Ear	$18,812
69646	Under Repair Procedures on the Middle Ear	$20,084
69650	Under Repair Procedures on the Middle Ear	$10,440
69660	Under Repair Procedures on the Middle Ear	$12,056
69661	Under Repair Procedures on the Middle Ear	$15,720
69662	Under Repair Procedures on the Middle Ear	$15,092
69666	Under Repair Procedures on the Middle Ear	$10,556
69667	Under Repair Procedures on the Middle Ear	$10,570
69670	Under Repair Procedures on the Middle Ear	$12,328
69676	Under Other Procedures on the Middle Ear	$10,786
69700	Under Other Procedures on the Middle Ear	$8,904
69711	Under Other Procedures on the Middle Ear	$11,195
69714	Under Other Procedures on the Middle Ear	$14,046
69715	Under Other Procedures on the Middle Ear	$17,316
69717	Under Other Procedures on the Middle Ear	$14,709
69718	Under Other Procedures on the Middle Ear	$17,502
69720	Under Other Procedures on the Middle Ear	$15,987
69725	Under Other Procedures on the Middle Ear	$24,530
69740	Under Other Procedures on the Middle Ear	$15,211
69745	Under Other Procedures on the Middle Ear	$16,174
69801	Under Incision and/or Destruction Procedures on the Inner Ear	$2,531
69805	Under Incision and/or Destruction Procedures on the Inner Ear	$13,741
69806	Under Incision and/or Destruction Procedures on the Inner Ear	$12,288
69905	Under Excision Procedures on the Inner Ear	$11,919
69910	Under Excision Procedures on the Inner Ear	$13,247
69915	Under Excision Procedures on the Inner Ear	$20,087
69930	Under Introduction Procedures on the Inner Ear	$15,964
69950	Under Surgical Procedures on the Temporal Bone, Middle Fossa Approach	$23,293
69955	Under Surgical Procedures on the Temporal Bone, Middle Fossa Approach	$25,835
69960	Under Surgical Procedures on the Temporal Bone, Middle Fossa Approach	$25,152
69970	Under Surgical Procedures on the Temporal Bone, Middle Fossa Approach	$27,986
69990	Under Operating Microscope Procedures	$3,155
70010	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$786
70015	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$1,856
70015	26	$766
70015	TC	$1,089
70030	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$361
70030	26	$108
70030	TC	$252

Procedure Code	Modifier	Fee
70100	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$424
70100	26	$117
70100	TC	$307
70110	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$486
70110	26	$161
70110	TC	$325
70120	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$429
70120	26	$117
70120	TC	$312
70130	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$696
70130	26	$221
70130	TC	$475
70134	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$639
70134	26	$219
70134	TC	$421
70140	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$383
70140	26	$135
70140	TC	$248
70150	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$532
70150	26	$170
70150	TC	$362
70160	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$424
70160	26	$113
70160	TC	$312
70170	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$ -
70170	26	$194
70170	TC	$ -
70190	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$460
70190	26	$144
70190	TC	$316
70200	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$545
70200	26	$183
70200	TC	$362
70210	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$383
70210	26	$113
70210	TC	$271

Procedure Code	Modifier	Fee
70220	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$482
70220	26	$161
70220	TC	$321
70240	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$397
70240	26	$126
70240	TC	$271
70250	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$468
70250	26	$161
70250	TC	$307
70260	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$587
70260	26	$225
70260	TC	$362
70300	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$194
70300	26	$78
70300	TC	$116
70310	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$479
70310	26	$104
70310	TC	$375
70320	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$680
70320	26	$159
70320	TC	$521
70328	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$392
70328	26	$117
70328	TC	$275
70330	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$605
70330	26	$157
70330	TC	$448
70332	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$908
70332	26	$347
70332	TC	$562
70336	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$4,143
70336	26	$940
70336	TC	$3,202
70350	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$254
70350	26	$129
70350	TC	$125

Procedure Code	Modifier	Fee
70355	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$271
70355	26	$146
70355	TC	$125
70360	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$365
70360	26	$108
70360	TC	$257
70370	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$922
70370	26	$201
70370	TC	$721
70371	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$1,144
70371	26	$536
70371	TC	$607
70380	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$415
70380	26	$108
70380	TC	$307
70390	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$1,209
70390	26	$243
70390	TC	$967
70450	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$1,489
70450	26	$545
70450	TC	$944
70460	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$2,098
70460	26	$731
70460	TC	$1,367
70470	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$2,459
70470	26	$815
70470	TC	$1,644
70480	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$2,991
70480	26	$819
70480	TC	$2,172
70481	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$3,542
70481	26	$888
70481	TC	$2,654
70482	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$3,861
70482	26	$927
70482	TC	$2,934

Procedure Code	Modifier	Fee
70486	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$1,789
70486	26	$550
70486	TC	$1,240
70487	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$2,150
70487	26	$720
70487	TC	$1,431
70488	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$2,623
70488	26	$815
70488	TC	$1,808
70490	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$2,159
70490	26	$824
70490	TC	$1,335
70491	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$2,609
70491	26	$888
70491	TC	$1,722
70492	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$3,144
70492	26	$1,040
70492	TC	$2,104
70496	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$3,764
70496	26	$1,122
70496	TC	$2,643
70498	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$3,755
70498	26	$1,122
70498	TC	$2,634
70540	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$3,488
70540	26	$865
70540	TC	$2,622
70542	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$4,138
70542	26	$1,040
70542	TC	$3,098
70543	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$5,194
70543	26	$1,369
70543	TC	$3,826
70544	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$4,218
70544	26	$771
70544	TC	$3,448

Procedure Code	Modifier	Fee
70545	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$4,182
70545	26	$771
70545	TC	$3,412
70546	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$6,228
70546	26	$945
70546	TC	$5,283
70547	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$4,241
70547	26	$775
70547	TC	$3,466
70548	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$4,631
70548	26	$965
70548	TC	$3,666
70549	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$6,472
70549	26	$1,152
70549	TC	$5,320
70551	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$2,974
70551	26	$956
70551	TC	$2,017
70552	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$4,123
70552	26	$1,144
70552	TC	$2,979
70553	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$4,862
70553	26	$1,464
70553	TC	$3,398
70554	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$5,788
70554	26	$1,356
70554	TC	$4,433
70555	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$ -
70555	26	$1,600
70555	TC	$ -
70557	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$ -
70557	26	$2,064
70557	TC	$ -
70558	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$ -
70558	26	$2,272
70558	TC	$ -

Procedure Code	Modifier	Fee
70559	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Head and Neck	$ -
70559	26	$2,096
70559	TC	$ -
71045	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$256
71045	26	$117
71045	TC	$139
71046	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$391
71046	26	$139
71046	TC	$252
71047	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$500
71047	26	$179
71047	TC	$321
71048	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$535
71048	26	$206
71048	TC	$330
71100	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$428
71100	26	$144
71100	TC	$284
71101	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$493
71101	26	$177
71101	TC	$316
71110	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$513
71110	26	$188
71110	TC	$325
71111	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$606
71111	26	$212
71111	TC	$393
71120	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$383
71120	26	$130
71120	TC	$252
71130	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$464
71130	26	$144
71130	TC	$321
71250	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$2,093
71250	26	$749
71250	TC	$1,344
71260	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$2,523
71260	26	$797
71260	TC	$1,726
71270	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$3,023
71270	26	$888
71270	TC	$2,136
71275	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$3,854
71275	26	$1,166

Procedure Code	Modifier	Fee
71275	TC	$2,688
71550	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$5,344
71550	26	$936
71550	TC	$4,408
71551	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$5,884
71551	26	$1,108
71551	TC	$4,776
71552	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$7,457
71552	26	$1,446
71552	TC	$6,011
71555	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Chest	$5,139
71555	26	$1,145
71555	TC	$3,994
72020	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$288
72020	26	$99
72020	TC	$189
72040	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$428
72040	26	$144
72040	TC	$284
72050	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$583
72050	26	$203
72050	TC	$380
72052	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$719
72052	26	$234
72052	TC	$484
72070	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$437
72070	26	$144
72070	TC	$293
72072	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$446
72072	26	$139
72072	TC	$307
72074	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$501
72074	26	$139
72074	TC	$362
72080	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$432
72080	26	$144
72080	TC	$289
72081	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$498

Procedure Code	Modifier	Fee
72081	26	$172
72081	TC	$325
72082	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$801
72082	26	$208
72082	TC	$594
72083	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$964
72083	26	$234
72083	TC	$730
72084	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,125
72084	26	$276
72084	TC	$848
72100	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$451
72100	26	$144
72100	TC	$307
72110	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$628
72110	26	$203
72110	TC	$425
72114	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$792
72114	26	$212
72114	TC	$580
72120	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$523
72120	26	$144
72120	TC	$380
72125	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,370
72125	26	$684
72125	TC	$1,685
72126	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,929
72126	26	$784
72126	TC	$2,145
72127	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$3,469
72127	26	$810
72127	TC	$2,659
72128	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,321
72128	26	$645
72128	TC	$1,676
72129	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,942

Procedure Code	Modifier	Fee
72129	26	$784
72129	TC	$2,158
72130	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$3,492
72130	26	$815
72130	TC	$2,677
72131	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,312
72131	26	$645
72131	TC	$1,667
72132	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,929
72132	26	$784
72132	TC	$2,145
72133	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$3,462
72133	26	$817
72133	TC	$2,645
72141	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,892
72141	26	$956
72141	TC	$1,935
72142	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$4,200
72142	26	$1,148
72142	TC	$3,052
72146	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,896
72146	26	$956
72146	TC	$1,940
72147	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$4,169
72147	26	$1,144
72147	TC	$3,025
72148	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,892
72148	26	$956
72148	TC	$1,935
72149	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$4,148
72149	26	$1,150
72149	TC	$2,998
72156	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$4,889
72156	26	$1,464
72156	TC	$3,425
72157	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$4,898

Procedure Code	Modifier	Fee
72157	26	$1,464
72157	TC	$3,434
72158	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$4,880
72158	26	$1,468
72158	TC	$3,412
72159	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$5,255
72159	26	$1,148
72159	TC	$4,108
72170	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$411
72170	26	$113
72170	TC	$298
72190	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$487
72190	26	$139
72190	TC	$348
72191	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$3,929
72191	26	$1,154
72191	TC	$2,775
72192	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,873
72192	26	$698
72192	TC	$1,176
72193	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$2,902
72193	26	$749
72193	TC	$2,154
72194	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$3,343
72194	26	$784
72194	TC	$2,559
72195	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$4,073
72195	26	$936
72195	TC	$3,136
72196	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$4,474
72196	26	$1,113
72196	TC	$3,362
72197	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$5,482
72197	26	$1,411
72197	TC	$4,071
72198	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$5,155

Procedure Code	Modifier	Fee
72198	26	$1,139
72198	TC	$4,017
72200	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$365
72200	26	$113
72200	TC	$252
72202	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$424
72202	26	$121
72202	TC	$302
72220	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$365
72220	26	$113
72220	TC	$252
72240	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,256
72240	26	$581
72240	TC	$675
72255	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,263
72255	26	$596
72255	TC	$666
72265	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,180
72265	26	$528
72265	TC	$653
72270	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,641
72270	26	$866
72270	TC	$776
72275	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,484
72275	26	$499
72275	TC	$985
72285	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,438
72285	26	$767
72285	TC	$671
72295	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Spine and Pelvis	$1,251
72295	26	$557
72295	TC	$694
73000	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$361
73000	26	$108
73000	TC	$252
73010	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$392

Procedure Code	Modifier	Fee
73010	26	$117
73010	TC	$275
73020	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$297
73020	26	$104
73020	TC	$193
73030	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$379
73030	26	$122
73030	TC	$257
73040	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$1,300
73040	26	$351
73040	TC	$948
73050	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$460
73050	26	$135
73050	TC	$325
73060	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$374
73060	26	$108
73060	TC	$266
73070	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$352
73070	26	$104
73070	TC	$248
73080	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$406
73080	26	$113
73080	TC	$293
73085	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$1,234
73085	26	$372
73085	TC	$862
73090	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$333
73090	26	$108
73090	TC	$225
73092	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$352
73092	26	$104
73092	TC	$248
73100	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$406
73100	26	$113
73100	TC	$293
73110	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$452

Procedure Code	Modifier	Fee
73110	26	$113
73110	TC	$339
73115	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$1,375
73115	26	$367
73115	TC	$1,008
73120	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$365
73120	26	$108
73120	TC	$257
73130	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$411
73130	26	$113
73130	TC	$298
73140	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$416
73140	26	$91
73140	TC	$325
73200	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$2,307
73200	26	$645
73200	TC	$1,663
73201	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$2,861
73201	26	$749
73201	TC	$2,113
73202	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$3,570
73202	26	$784
73202	TC	$2,786
73206	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$4,214
73206	26	$1,148
73206	TC	$3,066
73218	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$4,723
73218	26	$870
73218	TC	$3,853
73219	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$5,188
73219	26	$1,040
73219	TC	$4,148
73220	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$6,431
73220	26	$1,378
73220	TC	$5,054
73221	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$3,058

Procedure Code	Modifier	Fee
73221	26	$875
73221	TC	$2,183
73222	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$4,884
73222	26	$1,044
73222	TC	$3,839
73223	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$6,054
73223	26	$1,378
73223	TC	$4,676
73225	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Upper Extremities	$5,252
73225	26	$1,099
73225	TC	$4,153
73501	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$388
73501	26	$122
73501	TC	$266
73502	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$532
73502	26	$144
73502	TC	$389
73503	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$666
73503	26	$186
73503	TC	$480
73521	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$482
73521	26	$144
73521	TC	$339
73522	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$629
73522	26	$195
73522	TC	$434
73523	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$729
73523	26	$208
73523	TC	$521
73525	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$1,331
73525	26	$378
73525	TC	$953
73551	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$361
73551	26	$108
73551	TC	$252
73552	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$424

Procedure Code	Modifier	Fee
73552	26	$122
73552	TC	$302
73560	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$402
73560	26	$108
73560	TC	$293
73562	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$460
73562	26	$122
73562	TC	$339
73564	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$510
73564	26	$144
73564	TC	$366
73565	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$461
73565	26	$113
73565	TC	$348
73580	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$1,509
73580	26	$374
73580	TC	$1,135
73590	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$370
73590	26	$108
73590	TC	$261
73592	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$352
73592	26	$104
73592	TC	$248
73600	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$383
73600	26	$108
73600	TC	$275
73610	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$406
73610	26	$113
73610	TC	$293
73615	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$1,375
73615	26	$372
73615	TC	$1,003
73620	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$338
73620	26	$99
73620	TC	$239
73630	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$379

Procedure Code	Modifier	Fee
73630	26	$108
73630	TC	$271
73650	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$352
73650	26	$104
73650	TC	$248
73660	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$366
73660	26	$86
73660	TC	$280
73700	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$2,312
73700	26	$645
73700	TC	$1,667
73701	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$2,902
73701	26	$749
73701	TC	$2,154
73702	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$3,524
73702	26	$779
73702	TC	$2,745
73706	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$4,571
73706	26	$1,212
73706	TC	$3,359
73718	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$3,952
73718	26	$870
73718	TC	$3,082
73719	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$4,401
73719	26	$1,040
73719	TC	$3,362
73720	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$5,472
73720	26	$1,373
73720	TC	$4,098
73721	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$3,058
73721	26	$875
73721	TC	$2,183
73722	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$4,915
73722	26	$1,044
73722	TC	$3,871
73723	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$6,045

Procedure Code	Modifier	Fee
73723	26	$1,373
73723	TC	$4,672
73725	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Lower Extremities	$5,160
73725	26	$1,152
73725	TC	$4,007
74018	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$351
74018	26	$117
74018	TC	$234
74019	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$428
74019	26	$148
74019	TC	$280
74021	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$502
74021	26	$177
74021	TC	$325
74022	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$574
74022	26	$208
74022	TC	$366
74150	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$1,924
74150	26	$766
74150	TC	$1,158
74160	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$2,964
74160	26	$815
74160	TC	$2,149
74170	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$3,373
74170	26	$901
74170	TC	$2,472
74174	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$4,986
74174	26	$1,397
74174	TC	$3,589
74175	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$3,945
74175	26	$1,157
74175	TC	$2,788
74176	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$2,575
74176	26	$1,117
74176	TC	$1,458
74177	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$4,002
74177	26	$1,170
74177	TC	$2,832
74178	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$4,535
74178	26	$1,283
74178	TC	$3,252
74181	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$3,631
74181	26	$936
74181	TC	$2,695

Procedure Code	Modifier	Fee
74182	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$4,929
74182	26	$1,113
74182	TC	$3,816
74183	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$5,496
74183	26	$1,411
74183	TC	$4,085
74185	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$5,187
74185	26	$1,143
74185	TC	$4,044
74190	Diagnostic Radiology (Diagnostic Imaging) Procedures of the Abdomen	$ -
74190	26	$302
74190	TC	$ -
74210	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$1,001
74210	26	$230
74210	TC	$771
74220	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$1,137
74220	26	$298
74220	TC	$839
74230	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$1,659
74230	26	$342
74230	TC	$1,317
74235	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74235	26	$798
74235	TC	$ -
74240	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$1,449
74240	26	$446
74240	TC	$1,003
74241	Deleted CPT Co	$1,504
74241	26	$442
74241	TC	$1,062
74245	Deleted CPT Codes	$2,193
74245	26	$585
74245	TC	$1,608
74246	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$1,622
74246	26	$442
74246	TC	$1,180
74247	Deleted CPT Codes	$1,813
74247	26	$442
74247	TC	$1,371
74249	Deleted CPT Codes	$2,352
74249	26	$585

Procedure Code	Modifier	Fee
74249	TC	$1,767
74250	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$1,328
74250	26	$302
74250	TC	$1,026
74251	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$5,379
74251	26	$442
74251	TC	$4,938
74260	Deleted CPT Codes	$4,471
74260	26	$325
74260	TC	$4,146
74261	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$6,249
74261	26	$1,541
74261	TC	$4,708
74262	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$6,998
74262	26	$1,603
74262	TC	$5,395
74270	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$1,927
74270	26	$442
74270	TC	$1,485
74280	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$2,735
74280	26	$636
74280	TC	$2,099
74283	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$2,692
74283	26	$1,321
74283	TC	$1,371
74290	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$897
74290	26	$208
74290	TC	$689
74300	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74300	26	$236
74300	TC	$ -
74301	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74301	26	$137
74301	TC	$ -
74328	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74328	26	$455
74328	TC	$ -

Procedure Code	Modifier	Fee
74329	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74329	26	$460
74329	TC	$ -
74330	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74330	26	$585
74330	TC	$ -
74340	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74340	26	$347
74340	TC	$ -
74355	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74355	26	$511
74355	TC	$ -
74360	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74360	26	$365
74360	TC	$ -
74363	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Gastrointestinal Tract	$ -
74363	26	$545
74363	TC	$ -
74400	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$1,410
74400	26	$316
74400	TC	$1,094
74410	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$1,428
74410	26	$316
74410	TC	$1,112
74415	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$1,751
74415	26	$316
74415	TC	$1,435
74420	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$ -
74420	26	$223
74420	TC	$ -
74425	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$ -
74425	26	$225
74425	TC	$ -
74430	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$492
74430	26	$208
74430	TC	$284

Procedure Code	Modifier	Fee
74440	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$1,030
74440	26	$232
74440	TC	$798
74445	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$ -
74445	26	$710
74445	TC	$ -
74450	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$ -
74450	26	$212
74450	TC	$ -
74455	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$1,060
74455	26	$212
74455	TC	$848
74470	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$ -
74470	26	$338
74470	TC	$ -
74485	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Urinary Tract	$1,188
74485	26	$331
74485	TC	$857
74710	Under Gynecological and Obstetrical Diagnostic Radiology (Diagnostic Imaging) Procedures	$469
74710	26	$221
74710	TC	$248
74712	Under Gynecological and Obstetrical Diagnostic Radiology (Diagnostic Imaging) Procedures	$6,335
74712	26	$1,928
74712	TC	$4,408
74713	Under Gynecological and Obstetrical Diagnostic Radiology (Diagnostic Imaging) Procedures	$3,062
74713	26	$1,195
74713	TC	$1,867
74740	Under Gynecological and Obstetrical Diagnostic Radiology (Diagnostic Imaging) Procedures	$959
74740	26	$243
74740	TC	$716
74742	Under Gynecological and Obstetrical Diagnostic Radiology (Diagnostic Imaging) Procedures	$ -
74742	26	$398
74742	TC	$ -
74775	Under Gynecological and Obstetrical Diagnostic Radiology (Diagnostic Imaging) Procedures	$ -
74775	26	$402
74775	TC	$ -

Procedure Code	Modifier	Fee
75557	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$4,226
75557	26	$1,476
75557	TC	$2,750
75559	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$5,700
75559	26	$1,815
75559	TC	$3,885
75561	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$5,572
75561	26	$1,628
75561	TC	$3,944
75563	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$6,624
75563	26	$1,866
75563	TC	$4,758
75565	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$703
75565	26	$157
75565	TC	$546
75571	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$1,326
75571	26	$369
75571	TC	$957
75572	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$3,667
75572	26	$1,110
75572	TC	$2,556
75573	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$4,995
75573	26	$1,607
75573	TC	$3,389
75574	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Heart	$5,451
75574	26	$1,509
75574	TC	$3,941
75600	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,583
75600	26	$316
75600	TC	$2,268
75605	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$1,777
75605	26	$719
75605	TC	$1,058
75625	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$1,776
75625	26	$733
75625	TC	$1,044
75630	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,201
75630	26	$1,143
75630	TC	$1,058
75635	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$5,669
75635	26	$1,518
75635	TC	$4,151

Procedure Code	Modifier	Fee
75705	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$3,298
75705	26	$1,524
75705	TC	$1,774
75710	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,231
75710	26	$1,128
75710	TC	$1,103
75716	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,525
75716	26	$1,253
75716	TC	$1,271
75726	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$1,918
75726	26	$710
75726	TC	$1,208
75731	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,214
75731	26	$735
75731	TC	$1,478
75733	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,372
75733	26	$810
75733	TC	$1,562
75736	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,061
75736	26	$710
75736	TC	$1,351
75741	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$1,924
75741	26	$807
75741	TC	$1,117
75743	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,167
75743	26	$1,037
75743	TC	$1,130
75746	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$1,950
75746	26	$713
75746	TC	$1,237
75756	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$2,236
75756	26	$748
75756	TC	$1,487
75774	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Aorta and Arteries	$1,116
75774	26	$223
75774	TC	$894

Attachment - 24G
Attachment - 24G

Procedure Code	Modifier	Fee
75801	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$ -
75801	26	$593
75801	TC	$ -
75803	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$ -
75803	26	$778
75803	TC	$ -
75805	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$ -
75805	26	$505
75805	TC	$ -
75807	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$ -
75807	26	$726
75807	TC	$ -
75809	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,274
75809	26	$307
75809	TC	$967
75810	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$ -
75810	26	$699
75810	TC	$ -
75820	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,490
75820	26	$450
75820	TC	$1,039
75822	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,749
75822	26	$673
75822	TC	$1,076
75825	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,742
75825	26	$730
75825	TC	$1,012
75827	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,799
75827	26	$737
75827	TC	$1,062
75831	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,809
75831	26	$715
75831	TC	$1,094
75833	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$2,156
75833	26	$955
75833	TC	$1,201

Procedure Code	Modifier	Fee
75840	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,907
75840	26	$735
75840	TC	$1,171
75842	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$2,284
75842	26	$961
75842	TC	$1,324
75860	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,859
75860	26	$724
75860	TC	$1,135
75870	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,907
75870	26	$735
75870	TC	$1,171
75872	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,907
75872	26	$735
75872	TC	$1,171
75880	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,617
75880	26	$450
75880	TC	$1,167
75885	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$2,010
75885	26	$875
75885	TC	$1,135
75887	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$2,012
75887	26	$873
75887	TC	$1,139
75889	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,843
75889	26	$699
75889	TC	$1,144
75891	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,857
75891	26	$708
75891	TC	$1,149
75893	Under Diagnostic Radiology (Diagnostic Imaging) Procedures of the Veins and Lymphatics	$1,547
75893	26	$349
75893	TC	$1,199
75894	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$ -
75894	26	$961
75894	TC	$ -
75898	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$ -

Procedure Code	Modifier	Fee
75898	26	$1,197
75898	TC	$ -
75901	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$2,306
75901	26	$302
75901	TC	$2,004
75902	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$929
75902	26	$245
75902	TC	$685
75956	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$4,638
75957	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$3,973
75958	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$2,642
75959	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$2,322
75970	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$ -
75970	26	$509
75970	TC	$ -
75984	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$1,362
75984	26	$446
75984	TC	$917
75989	Under Transcatheter Diagnostic Radiology (Diagnostic Imaging) Procedures	$1,562
75989	26	$750
75989	TC	$812
76000	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$618
76000	26	$115
76000	TC	$503
76010	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$338
76010	26	$117
76010	TC	$221
76080	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$704
76080	26	$333
76080	TC	$371
76098	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$220
76098	26	$104
76098	TC	$116
76100	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$1,180
76100	26	$409
76100	TC	$771
76101	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$1,387
76101	26	$384
76101	TC	$1,003
76102	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$2,204
76102	26	$457
76102	TC	$1,747
76120	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$1,191
76120	26	$229
76120	TC	$962

Procedure Code	Modifier	Fee
76125	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$ -
76125	26	$181
76125	TC	$ -
76376	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$301
76376	26	$126
76376	TC	$175
76377	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$913
76377	26	$510
76377	TC	$403
76380	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$1,866
76380	26	$627
76380	TC	$1,240
76496	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$ -
76497	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$ -
76498	Under Other Diagnostic Radiology (Diagnostic Imaging) Related Procedures	$ -
76506	Under Diagnostic Ultrasound Procedures of the Head and Neck	$1,521
76506	26	$413
76506	TC	$1,108
76510	Under Diagnostic Ultrasound Procedures of the Head and Neck	$1,761
76510	26	$917
76510	TC	$844
76511	Under Diagnostic Ultrasound Procedures of the Head and Neck	$1,052
76511	26	$545
76511	TC	$507
76512	Under Diagnostic Ultrasound Procedures of the Head and Neck	$963
76512	26	$547
76512	TC	$416
76513	Under Diagnostic Ultrasound Procedures of the Head and Neck	$1,229
76513	26	$454
76513	TC	$776
76514	Under Diagnostic Ultrasound Procedures of the Head and Neck	$201
76514	26	$126
76514	TC	$75
76516	Under Diagnostic Ultrasound Procedures of the Head and Neck	$816
76516	26	$318
76516	TC	$498
76519	Under Diagnostic Ultrasound Procedures of the Head and Neck	$954
76519	26	$397
76519	TC	$557
76529	Under Diagnostic Ultrasound Procedures of the Head and Neck	$1,031
76529	26	$419
76529	TC	$612
76536	Under Diagnostic Ultrasound Procedures of the Head and Neck	$1,508
76536	26	$360
76536	TC	$1,149

Procedure Code	Modifier	Fee
76604	Under Diagnostic Ultrasound Procedures of the Chest	$1,154
76604	26	$346
76604	TC	$807
76641	Under Diagnostic Ultrasound Procedures of the Chest	$1,389
76641	26	$468
76641	TC	$921
76642	Under Diagnostic Ultrasound Procedures of the Chest	$1,140
76642	26	$437
76642	TC	$703
76700	Under Diagnostic Ultrasound Procedures of the Abdomen and Retroperitoneum	$1,583
76700	26	$517
76700	TC	$1,067
76705	Under Diagnostic Ultrasound Procedures of the Abdomen and Retroperitoneum	$1,185
76705	26	$378
76705	TC	$807
76706	Under Diagnostic Ultrasound Procedures of the Abdomen and Retroperitoneum	$1,224
76706	26	$358
76706	TC	$867
76770	Under Diagnostic Ultrasound Procedures of the Abdomen and Retroperitoneum	$1,466
76770	26	$472
76770	TC	$994
76775	Under Diagnostic Ultrasound Procedures of the Abdomen and Retroperitoneum	$748
76775	26	$369
76775	TC	$380
76776	Under Diagnostic Ultrasound Procedures of the Abdomen and Retroperitoneum	$2,030
76776	26	$486
76776	TC	$1,544
76800	Under Diagnostic Ultrasound Procedures of the Spinal Canal	$1,904
76800	26	$787
76800	TC	$1,117
76801	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,598
76801	26	$640
76801	TC	$957
76802	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$839
76802	26	$548
76802	TC	$291
76805	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,846
76805	26	$652
76805	TC	$1,194
76810	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,207
76810	26	$647
76810	TC	$560
76811	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$2,378
76811	26	$1,268
76811	TC	$1,110

Procedure Code	Modifier	Fee
76812	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$2,654
76812	26	$1,191
76812	TC	$1,462
76813	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,585
76813	26	$787
76813	TC	$798
76814	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,054
76814	26	$670
76814	TC	$384
76815	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,095
76815	26	$420
76815	TC	$675
76816	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,503
76816	26	$568
76816	TC	$935
76817	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,259
76817	26	$488
76817	TC	$771
76818	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,606
76818	26	$705
76818	TC	$901
76819	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,165
76819	26	$508
76819	TC	$657
76820	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$625
76820	26	$331
76820	TC	$293
76821	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$1,212
76821	26	$469
76821	TC	$744
76825	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$3,602
76825	26	$1,078
76825	TC	$2,525
76826	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$2,124
76826	26	$530
76826	TC	$1,594
76827	Under Diagnostic Ultrasound Procedures of the Pelvis Obstetrical	$976
76827	26	$369
76827	TC	$607
76828	Under Diagnostic Ultrasound Procedures of the Pelvis Non-Obstetrical	$692
76828	26	$367
76828	TC	$325
76830	Under Diagnostic Ultrasound Procedures of the Pelvis Non-Obstetrical	$1,581
76830	26	$446
76830	TC	$1,135

Procedure Code	Modifier	Fee
76831	Under Diagnostic Ultrasound Procedures of the Pelvis Non-Obstetrical	$1,551
76831	26	$475
76831	TC	$1,076
76856	Under Diagnostic Ultrasound Procedures of the Pelvis Non-Obstetrical	$1,426
76856	26	$442
76856	TC	$985
76857	Under Diagnostic Ultrasound Procedures of the Pelvis Non-Obstetrical	$627
76857	26	$320
76857	TC	$307
76870	Under Diagnostic Ultrasound Procedures of the Extremities	$877
76870	26	$411
76870	TC	$466
76872	Under Diagnostic Ultrasound Procedures of the Extremities	$1,244
76872	26	$428
76872	TC	$816
76873	Under Diagnostic Ultrasound Procedures of the Extremities	$2,229
76873	26	$994
76873	TC	$1,235
76881	Under Diagnostic Ultrasound Procedures of the Extremities	$1,312
76881	26	$404
76881	TC	$907
76882	Under Diagnostic Ultrasound Procedures of the Extremities	$746
76882	26	$316
76882	TC	$430
76885	Under Diagnostic Ultrasound Procedures of the Extremities	$1,871
76885	26	$477
76885	TC	$1,394
76886	Under Diagnostic Ultrasound Procedures of the Extremities	$1,368
76886	26	$402
76886	TC	$967
76930	26	$421
76932	Under Ultrasonic Guidance Procedures	$ -
76932	26	$417
76932	TC	$ -
76936	Under Ultrasonic Guidance Procedures	$3,541
76936	26	$1,280
76936	TC	$2,261
76937	Under Ultrasonic Guidance Procedures	$404
76937	26	$185
76937	TC	$218
76940	Under Ultrasonic Guidance Procedures	$ -
76940	26	$1,352
76940	TC	$ -
76941	Under Ultrasonic Guidance Procedures	$ -
76941	26	$877

Procedure Code	Modifier	Fee
76941	TC	$ -
76942	Under Ultrasonic Guidance Procedures	$769
76942	26	$412
76942	TC	$357
76945	Under Ultrasonic Guidance Procedures	$ -
76945	26	$440
76945	TC	$ -
76946	Under Ultrasonic Guidance Procedures	$425
76946	26	$254
76946	TC	$171
76948	Under Ultrasonic Guidance Procedures	$926
76948	26	$451
76948	TC	$475
76965	Under Ultrasonic Guidance Procedures	$1,175
76965	26	$859
76965	TC	$316
76970	Under Other Diagnostic Ultrasound Procedures	$1,191
76970	26	$242
76970	TC	$948
76975	Under Other Diagnostic Ultrasound Procedures	$ -
76975	26	$548
76975	TC	$ -
76977	Under Other Diagnostic Ultrasound Procedures	$99
76977	26	$38
76977	TC	$61
76998	Under Other Diagnostic Ultrasound Procedures	$ -
76998	26	$849
76998	TC	$ -
77001	Under Computed Tomography Guidance	$1,084
77001	26	$241
77001	TC	$844
77002	Under Computed Tomography Guidance	$1,215
77002	26	$362
77002	TC	$853
77003	Under Fluoroscopic Guidance	$1,212
77003	26	$382
77003	TC	$830
77011	Under Computed Tomography Guidance	$2,913
77011	26	$804
77011	TC	$2,108
77012	Under Computed Tomography Guidance	$1,601
77012	26	$735
77012	TC	$867
77013	Under Computed Tomography Guidance	$ -
77013	26	$2,468

Procedure Code	Modifier	Fee
77013	TC	$ -
77014	Under Computed Tomography Guidance	$1,542
77014	26	$566
77014	TC	$976
77021	Under Magnetic Resonance Guidance	$5,022
77021	26	$940
77021	TC	$4,083
77022	Under Magnetic Resonance Guidance	$ -
77022	26	$2,770
77022	TC	$ -
77053	Under Breast, Mammography	$750
77053	26	$230
77053	TC	$521
77054	Under Breast, Mammography	$983
77054	26	$294
77054	TC	$689
77063	Under Breast, Mammography	$705
77063	26	$382
77063	TC	$323
77065	Under Breast, Mammography	$1,722
77065	26	$505
77065	TC	$1,217
77066	Under Breast, Mammography	$2,180
77066	26	$627
77066	TC	$1,553
77067	Under Breast, Mammography	$1,762
77067	26	$477
77067	TC	$1,285
77071	Under Bone/Joint Studies	$631
77072	Under Bone/Joint Studies	$296
77072	26	$121
77072	TC	$175
77073	Under Bone/Joint Studies	$465
77073	26	$186
77073	TC	$280
77074	Under Bone/Joint Studies	$828
77074	26	$294
77074	TC	$534
77075	Under Bone/Joint Studies	$1,122
77075	26	$347
77075	TC	$776
77076	Under Bone/Joint Studies	$1,231
77076	26	$450
77076	TC	$780
77077	Under Bone/Joint Studies	$478

Procedure Code	Modifier	Fee
77077	26	$208
77077	TC	$271
77078	Under Bone/Joint Studies	$1,483
77078	26	$157
77078	TC	$1,326
77080	Under Bone/Joint Studies	$542
77080	26	$130
77080	TC	$412
77081	Under Bone/Joint Studies	$364
77081	26	$139
77081	TC	$225
77084	Under Bone/Joint Studies	$5,011
77084	26	$1,031
77084	TC	$3,980
77085	Under Bone/Joint Studies	$733
77085	26	$194
77085	TC	$539
77086	Under Bone/Joint Studies	$470
77086	26	$113
77086	TC	$357
77261	Under Clinical Treatment Planning (External and Internal Sources) for Radiation Treatment	$919
77262	Under Clinical Treatment Planning (External and Internal Sources) for Radiation Treatment	$1,385
77263	Under Clinical Treatment Planning (External and Internal Sources) for Radiation Treatment	$2,147
77280	Under Clinical Treatment Planning (External and Internal Sources) for Radiation Treatment	$3,626
77280	26	$466
77280	TC	$3,159
77285	Under Clinical Treatment Planning (External and Internal Sources) for Radiation Treatment	$5,921
77285	26	$714
77285	TC	$5,206
77290	Under Clinical Treatment Planning (External and Internal Sources) for Radiation Treatment	$6,795
77290	26	$1,041
77290	TC	$5,754
77293	Under Clinical Treatment Planning (External and Internal Sources) for Radiation Treatment	$6,114
77293	26	$1,328
77293	TC	$4,785
77295	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$6,401
77295	26	$2,847
77295	TC	$3,555
77300	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$866

Procedure Code	Modifier	Fee
77300	26	$413
77300	TC	$453
77301	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$25,669
77301	26	$5,293
77301	TC	$20,375
77306	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$1,952
77306	26	$933
77306	TC	$1,019
77307	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$3,758
77307	26	$1,918
77307	TC	$1,840
77316	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$2,463
77316	26	$933
77316	TC	$1,531
77317	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$3,212
77317	26	$1,211
77317	TC	$2,001
77318	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$4,638
77318	26	$1,918
77318	TC	$2,720
77321	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$1,212
77321	26	$632
77321	TC	$580
77331	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$832
77331	26	$579
77331	TC	$252
77332	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$762
77332	26	$305
77332	TC	$457
77333	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$1,264
77333	26	$497
77333	TC	$766
77334	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$1,670
77334	26	$767
77334	TC	$903
77336	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$1,062

Procedure Code	Modifier	Fee
77338	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$6,636
77338	26	$2,847
77338	TC	$3,789
77370	Under Medical Radiation Physics, Dosimetry, Treatment Devices, and Special Services for Radiation Treatment	$1,637
77371	Under Stereotactic Radiation Treatment Delivery	$ -
77372	Under Stereotactic Radiation Treatment Delivery	$14,169
77373	Under Stereotactic Radiation Treatment Delivery	$18,022
77401	Under Radiation Treatment Delivery	$325
77417	Under Radiation Treatment Delivery	$148
77427	Under Radiation Treatment Management	$2,404
77431	Under Radiation Treatment Management	$1,323
77432	Under Radiation Treatment Management	$5,411
77435	Under Radiation Treatment Management	$8,160
77469	Under Radiation Treatment Management	$4,123
77470	Under Radiation Treatment Management	$1,753
77470	26	$1,346
77470	TC	$407
77520	Under Proton Beam Radiation Treatment Delivery	$ -
77522	Under Proton Beam Radiation Treatment Delivery	$ -
77523	Under Proton Beam Radiation Treatment Delivery	$ -
77525	Under Proton Beam Radiation Treatment Delivery	$ -
77600	Under Radiation Hyperthermia Treatment	$5,590
77600	26	$905
77600	TC	$4,685
77605	Under Radiation Hyperthermia Treatment	$9,902
77605	26	$1,355
77605	TC	$8,547
77610	Under Radiation Hyperthermia Treatment	$9,905
77610	26	$839
77610	TC	$9,066
77615	Under Radiation Hyperthermia Treatment	$13,515
77615	26	$1,215
77615	TC	$12,300
77750	Under Clinical Brachytherapy Radiation Treatment	$4,818
77750	26	$3,313
77750	TC	$1,505
77761	Under Clinical Brachytherapy Radiation Treatment	$5,091
77761	26	$2,555
77761	TC	$2,536
77762	Under Clinical Brachytherapy Radiation Treatment	$6,742
77762	26	$3,826
77762	TC	$2,915
77763	Under Clinical Brachytherapy Radiation Treatment	$9,658
77763	26	$5,798

Procedure Code	Modifier	Fee
77763	TC	$3,859
77767	Under Clinical Brachytherapy Radiation Treatment	$2,948
77767	26	$694
77767	TC	$2,254
77768	Under Clinical Brachytherapy Radiation Treatment	$4,633
77768	26	$933
77768	TC	$3,700
77770	Under Clinical Brachytherapy Radiation Treatment	$4,215
77770	26	$1,291
77770	TC	$2,925
77771	Under Clinical Brachytherapy Radiation Treatment	$7,835
77771	26	$2,524
77771	TC	$5,310
77772	Under Clinical Brachytherapy Radiation Treatment	$11,961
77772	26	$3,574
77772	TC	$8,387
77778	Under Clinical Brachytherapy Radiation Treatment	$10,686
77778	26	$5,801
77778	TC	$4,885
77789	Under Clinical Brachytherapy Radiation Treatment	$1,570
77789	26	$763
77789	TC	$807
77790	Under Clinical Brachytherapy Radiation Treatment	$198
78012	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$1,081
78012	26	$121
78012	TC	$960
78013	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$2,565
78013	26	$234
78013	TC	$2,331
78014	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$3,224
78014	26	$316
78014	TC	$2,909
78015	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$2,973
78015	26	$424
78015	TC	$2,549
78016	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$3,753
78016	26	$428
78016	TC	$3,325
78018	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$4,173
78018	26	$525
78018	TC	$3,648
78020	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$1,112
78020	26	$352
78020	TC	$760
78070	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$4,003

Procedure Code	Modifier	Fee
78070	26	$499
78070	TC	$3,505
78071	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$4,767
78071	26	$750
78071	TC	$4,016
78072	Under Diagnostic Nuclear Medicine Procedures on the Endocrine System	$5,519
78072	26	$983
78072	TC	$4,535
78102	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$2,259
78102	26	$337
78102	TC	$1,922
78103	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$2,883
78103	26	$447
78103	TC	$2,436
78104	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$3,294
78104	26	$494
78104	TC	$2,800
78110	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$1,083
78110	26	$103
78110	TC	$980
78111	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$1,037
78111	26	$121
78111	TC	$916
78120	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$1,019
78120	26	$125
78120	TC	$894
78121	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$1,131
78121	26	$169
78121	TC	$962
78122	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$1,272
78122	26	$269
78122	TC	$1,003
78130	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$1,810
78130	26	$318
78130	TC	$1,492
78135	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$3,806
78135	26	$336
78135	TC	$3,471

Procedure Code	Modifier	Fee
78140	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$1,494
78140	26	$318
78140	TC	$1,176
78185	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$2,285
78185	26	$213
78185	TC	$2,072
78191	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$1,810
78191	26	$318
78191	TC	$1,492
78195	Under Diagnostic Nuclear Medicine Procedures on the Hematopoietic, Reticuloendothelial and Lymphatic System	$4,751
78195	26	$752
78195	TC	$3,998
78201	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$2,527
78201	26	$269
78201	TC	$2,258
78202	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$2,662
78202	26	$300
78202	TC	$2,363
78215	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$2,597
78215	26	$311
78215	TC	$2,286
78216	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$1,686
78216	26	$351
78216	TC	$1,335
78226	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$4,421
78226	26	$468
78226	TC	$3,953
78227	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$5,991
78227	26	$572
78227	TC	$5,420
78231	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$1,395
78231	26	$274
78231	TC	$1,121
78232	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$1,333
78232	26	$248
78232	TC	$1,085
78258	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$2,999
78258	26	$468
78258	TC	$2,531
78261	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$2,684
78261	26	$362
78261	TC	$2,322

Procedure Code	Modifier	Fee
78262	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$3,216
78262	26	$421
78262	TC	$2,795
78264	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$4,483
78264	26	$494
78264	TC	$3,989
78265	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$5,321
78265	26	$616
78265	TC	$4,706
78266	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$6,340
78266	26	$684
78266	TC	$5,656
78278	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$4,655
78278	26	$625
78278	TC	$4,030
78282	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$ -
78282	26	$243
78282	TC	$ -
78290	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$4,422
78290	26	$428
78290	TC	$3,994
78291	Under Diagnostic Nuclear Medicine Procedures on the Gastrointestinal System	$3,415
78291	26	$543
78291	TC	$2,872
78300	Under Diagnostic Nuclear Medicine Procedures on the Musculoskeletal System	$3,081
78300	26	$402
78300	TC	$2,679
78305	Under Diagnostic Nuclear Medicine Procedures on the Musculoskeletal System	$3,755
78305	26	$528
78305	TC	$3,227
78306	Under Diagnostic Nuclear Medicine Procedures on the Musculoskeletal System	$4,050
78306	26	$545
78306	TC	$3,505
78315	Under Diagnostic Nuclear Medicine Procedures on the Musculoskeletal System	$4,618
78315	26	$638
78315	TC	$3,980
78414	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$ -
78414	26	$282
78414	TC	$ -
78428	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$2,428
78428	26	$479
78428	TC	$1,949
78445	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$2,494
78445	26	$318
78445	TC	$2,176

Procedure Code	Modifier	Fee
78451	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$4,536
78451	26	$856
78451	TC	$3,680
78452	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$6,321
78452	26	$1,008
78452	TC	$5,313
78453	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$4,054
78453	26	$629
78453	TC	$3,425
78454	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$5,828
78454	26	$850
78454	TC	$4,978
78456	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$4,129
78456	26	$618
78456	TC	$3,512
78457	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$2,555
78457	26	$479
78457	TC	$2,076
78458	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$2,721
78458	26	$576
78458	TC	$2,145
78459	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$ -
78459	26	$899
78459	TC	$ -
78466	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$2,629
78466	26	$448
78466	TC	$2,181
78468	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$2,564
78468	26	$492
78468	TC	$2,072
78469	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$3,048
78469	26	$571
78469	TC	$2,477
78472	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$3,051
78472	26	$616
78472	TC	$2,436
78473	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$3,843
78473	26	$904
78473	TC	$2,938
78481	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$2,324
78481	26	$609
78481	TC	$1,715
78483	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$3,203
78483	26	$904
78483	TC	$2,299

Procedure Code	Modifier	Fee
78491	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$ -
78491	26	$904
78491	TC	$ -
78492	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$ -
78492	26	$1,140
78492	TC	$ -
78494	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$2,993
78494	26	$739
78494	TC	$2,254
78496	Under Diagnostic Nuclear Medicine Procedures on the Cardiovascular System	$575
78496	26	$309
78496	TC	$266
78579	Under Diagnostic Nuclear Medicine Procedures on the Respiratory System	$2,495
78579	26	$304
78579	TC	$2,190
78580	Under Diagnostic Nuclear Medicine Procedures on the Respiratory System	$3,186
78580	26	$468
78580	TC	$2,718
78582	Under Diagnostic Nuclear Medicine Procedures on the Respiratory System	$4,460
78582	26	$675
78582	TC	$3,784
78597	Under Diagnostic Nuclear Medicine Procedures on the Respiratory System	$2,706
78597	26	$452
78597	TC	$2,254
78598	Under Diagnostic Nuclear Medicine Procedures on the Respiratory System	$4,068
78598	26	$525
78598	TC	$3,543
78600	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$2,466
78600	26	$285
78600	TC	$2,181
78601	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$2,865
78601	26	$320
78601	TC	$2,545
78605	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$2,655
78605	26	$342
78605	TC	$2,313
78606	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$4,398
78606	26	$399
78606	TC	$3,998
78608	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$ -
78608	26	$915
78608	TC	$ -
78610	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$2,339
78610	26	$194
78610	TC	$2,145

Procedure Code	Modifier	Fee
78630	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$4,522
78630	26	$433
78630	TC	$4,089
78635	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$4,528
78635	26	$398
78635	TC	$4,130
78645	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$4,344
78645	26	$355
78645	TC	$3,989
78650	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$3,634
78650	26	$318
78650	TC	$3,316
78660	Under Diagnostic Nuclear Medicine Procedures on the Nervous System	$2,403
78660	26	$331
78660	TC	$2,072
78700	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$2,300
78700	26	$282
78700	TC	$2,017
78701	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$2,863
78701	26	$304
78701	TC	$2,559
78707	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$3,097
78707	26	$593
78707	TC	$2,504
78708	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$2,333
78708	26	$754
78708	TC	$1,578
78709	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$4,883
78709	26	$871
78709	TC	$4,012
78725	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$1,428
78725	26	$234
78725	TC	$1,194
78730	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$1,043
78730	26	$104
78730	TC	$939
78740	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$2,907
78740	26	$348
78740	TC	$2,559
78761	Under Diagnostic Nuclear Medicine Procedures on the Genitourinary System	$2,809
78761	26	$455
78761	TC	$2,354
78800	Under Other Diagnostic Nuclear Medicine Procedures	$2,577
78800	26	$437
78800	TC	$2,140

Procedure Code	Modifier	Fee
78801	Under Other Diagnostic Nuclear Medicine Procedures	$3,467
78801	26	$508
78801	TC	$2,959
78802	Under Other Diagnostic Nuclear Medicine Procedures	$4,318
78802	26	$529
78802	TC	$3,789
78803	Under Other Diagnostic Nuclear Medicine Procedures	$4,566
78803	26	$659
78803	TC	$3,907
78804	Under Other Diagnostic Nuclear Medicine Procedures	$7,580
78804	26	$664
78804	TC	$6,916
78808	Under Other Diagnostic Nuclear Medicine Procedures	$510
78811	Under Other Diagnostic Nuclear Medicine Procedures	$ -
78811	26	$976
78811	TC	$ -
78812	Under Other Diagnostic Nuclear Medicine Procedures	$ -
78812	26	$1,189
78812	TC	$ -
78813	Under Other Diagnostic Nuclear Medicine Procedures	$ -
78813	26	$1,228
78813	TC	$ -
78814	Under Other Diagnostic Nuclear Medicine Procedures	$ -
78814	26	$1,370
78814	TC	$ -
78815	Under Other Diagnostic Nuclear Medicine Procedures	$ -
78815	26	$1,518
78815	TC	$ -
78816	Under Other Diagnostic Nuclear Medicine Procedures	$ -
78816	26	$1,535
78816	TC	$ -
79005	Under Therapeutic Nuclear Medicine Procedures	$1,762
79005	26	$1,121
79005	TC	$641
79101	Under Therapeutic Nuclear Medicine Procedures	$1,857
79101	26	$1,227
79101	TC	$630
79200	Under Therapeutic Nuclear Medicine Procedures	$1,706
79200	26	$1,042
79200	TC	$664
79300	Under Therapeutic Nuclear Medicine Procedures	$ -
79300	26	$1,024
79300	TC	$ -
79403	Under Therapeutic Nuclear Medicine Procedures	$2,483
79403	26	$1,399

Procedure Code	Modifier	Fee
79403	TC	$1,085
79440	Under Therapeutic Nuclear Medicine Procedures	$1,577
79440	26	$1,042
79440	TC	$534
79445	Under Therapeutic Nuclear Medicine Procedures	$ -
79445	26	$1,464
79445	TC	$ -
80500	Under Clinical Pathology Consultations	$298
80502	Under Clinical Pathology Consultations	$945
83020	Under Chemistry Procedures	$232
84165	Under Chemistry Procedures	$232
84166	Under Chemistry Procedures	$232
84181	Under Chemistry Procedures	$232
84182	Under Chemistry Procedures	$232
85060	Under Hematology and Coagulation Procedures	$319
85097	Under Hematology and Coagulation Procedures	$1,176
85390	Under Hematology and Coagulation Procedures	$232
85396	Under Hematology and Coagulation Procedures	$266
85576	Under Hematology and Coagulation Procedures	$232
86077	Under Qualitative or Semiquantitative Immunoassays	$721
86078	Under Qualitative or Semiquantitative Immunoassays	$721
86079	Under Qualitative or Semiquantitative Immunoassays	$716
86153	Under Qualitative or Semiquantitative Immunoassays	$437
86255	Under Qualitative or Semiquantitative Immunoassays	$232
86256	Under Qualitative or Semiquantitative Immunoassays	$232
86320	Under Qualitative or Semiquantitative Immunoassays	$232
86325	Under Qualitative or Semiquantitative Immunoassays	$232
86327	Under Qualitative or Semiquantitative Immunoassays	$263
86334	Under Qualitative or Semiquantitative Immunoassays	$232
86335	Under Qualitative or Semiquantitative Immunoassays	$232
86485	Under Qualitative or Semiquantitative Immunoassays	$ -
86486	Under Qualitative or Semiquantitative Immunoassays	$66
86490	Under Qualitative or Semiquantitative Immunoassays	$1,158
86510	Under Qualitative or Semiquantitative Immunoassays	$84
86580	Under Qualitative or Semiquantitative Immunoassays	$107
87164	Under Microbiology Procedures	$232
87207	Under Microbiology Procedures	$232
88104	Under Cytopathology Procedures	$931
88104	26	$369
88104	TC	$562
88106	Under Cytopathology Procedures	$830
88106	26	$254
88106	TC	$575
88108	Under Cytopathology Procedures	$783
88108	26	$294

Procedure Code	Modifier	Fee
88108	TC	$489
88112	Under Cytopathology Procedures	$881
88112	26	$365
88112	TC	$516
88120	Under Cytopathology Procedures	$8,199
88120	26	$753
88120	TC	$7,446
88121	Under Cytopathology Procedures	$6,834
88121	26	$645
88121	TC	$6,189
88125	Under Cytopathology Procedures	$345
88125	26	$184
88125	TC	$161
88141	Under Cytopathology Procedures	$415
88160	Under Cytopathology Procedures	$932
88160	26	$338
88160	TC	$594
88161	Under Cytopathology Procedures	$846
88161	26	$325
88161	TC	$521
88162	Under Cytopathology Procedures	$1,245
88162	26	$504
88162	TC	$741
88172	Under Cytopathology Procedures	$740
88172	26	$473
88172	TC	$266
88173	Under Cytopathology Procedures	$1,982
88173	26	$926
88173	TC	$1,055
88177	Under Cytopathology Procedures	$390
88177	26	$290
88177	TC	$100
88182	Under Cytopathology Procedures	$1,689
88182	26	$504
88182	TC	$1,185
88184	Under Cytopathology Procedures	$864
88185	Under Cytopathology Procedures	$387
88187	Under Cytopathology Procedures	$604
88188	Under Cytopathology Procedures	$832
88189	Under Cytopathology Procedures	$1,109
88291	Under Cytogenetic Studies	$422
88300	Under Surgical Pathology Procedures	$217
88300	26	$60
88300	TC	$157
88302	Under Surgical Pathology Procedures	$402

Procedure Code	Modifier	Fee
88302	26	$95
88302	TC	$307
88304	Under Surgical Pathology Procedures	$528
88304	26	$153
88304	TC	$375
88305	Under Surgical Pathology Procedures	$879
88305	26	$495
88305	TC	$384
88307	Under Surgical Pathology Procedures	$3,395
88307	26	$1,089
88307	TC	$2,306
88309	Under Surgical Pathology Procedures	$5,150
88309	26	$1,932
88309	TC	$3,218
88311	Under Surgical Pathology Procedures	$286
88311	26	$166
88311	TC	$120
88312	Under Surgical Pathology Procedures	$1,250
88312	26	$347
88312	TC	$903
88313	Under Surgical Pathology Procedures	$910
88313	26	$157
88313	TC	$753
88314	Under Surgical Pathology Procedures	$1,097
88314	26	$294
88314	TC	$803
88319	Under Surgical Pathology Procedures	$1,132
88319	26	$347
88319	TC	$785
88321	Under Surgical Pathology Procedures	$1,315
88323	Under Surgical Pathology Procedures	$1,553
88323	26	$1,127
88323	TC	$425
88325	Under Surgical Pathology Procedures	$2,374
88329	Under Surgical Pathology Procedures	$669
88331	Under Surgical Pathology Procedures	$1,246
88331	26	$826
88331	TC	$421
88332	Under Surgical Pathology Procedures	$680
88332	26	$405
88332	TC	$275
88333	Under Surgical Pathology Procedures	$1,146
88333	26	$825
88333	TC	$321
88334	Under Surgical Pathology Procedures	$709

Procedure Code	Modifier	Fee
88334	26	$505
88334	TC	$205
88341	Under Surgical Pathology Procedures	$1,188
88341	26	$369
88341	TC	$819
88342	Under Surgical Pathology Procedures	$1,403
88342	26	$464
88342	TC	$939
88344	Under Surgical Pathology Procedures	$2,248
88344	26	$508
88344	TC	$1,740
88346	Under Surgical Pathology Procedures	$1,200
88346	26	$466
88346	TC	$735
88348	Under Surgical Pathology Procedures	$4,465
88348	26	$988
88348	TC	$3,477
88350	Under Surgical Pathology Procedures	$924
88350	26	$373
88350	TC	$550
88355	Under Surgical Pathology Procedures	$1,666
88355	26	$1,050
88355	TC	$616
88356	Under Surgical Pathology Procedures	$2,812
88356	26	$1,595
88356	TC	$1,217
88358	Under Surgical Pathology Procedures	$1,212
88358	26	$605
88358	TC	$607
88360	Under Surgical Pathology Procedures	$1,715
88360	26	$580
88360	TC	$1,135
88361	Under Surgical Pathology Procedures	$1,863
88361	26	$614
88361	TC	$1,249
88362	Under Surgical Pathology Procedures	$2,676
88362	26	$1,439
88362	TC	$1,237
88363	Under Surgical Pathology Procedures	$307
88364	Under Surgical Pathology Procedures	$1,699
88364	26	$455
88364	TC	$1,244
88365	Under Surgical Pathology Procedures	$2,310
88365	26	$575
88365	TC	$1,735

Procedure Code	Modifier	Fee
88366	Under Surgical Pathology Procedures	$3,374
88366	26	$811
88366	TC	$2,563
88367	Under Surgical Pathology Procedures	$1,373
88367	26	$448
88367	TC	$926
88368	Under Surgical Pathology Procedures	$1,550
88368	26	$538
88368	TC	$1,012
88369	Under Surgical Pathology Procedures	$1,401
88369	26	$417
88369	TC	$985
88371	Under Surgical Pathology Procedures	$232
88372	Under Surgical Pathology Procedures	$232
88373	Under Surgical Pathology Procedures	$1,006
88373	26	$355
88373	TC	$650
88374	Under Surgical Pathology Procedures	$4,426
88374	26	$567
88374	TC	$3,860
88375	Under Surgical Pathology Procedures	$653
88377	Under Surgical Pathology Procedures	$5,259
88377	26	$824
88377	TC	$4,435
88380	Under Surgical Pathology Procedures	$1,757
88380	26	$711
88380	TC	$1,046
88381	Under Surgical Pathology Procedures	$1,575
88381	26	$324
88381	TC	$1,251
88387	Under Surgical Pathology Procedures	$445
88387	26	$366
88387	TC	$80
88388	Under Surgical Pathology Procedures	$442
88388	26	$312
88388	TC	$130
89049	Under Other Pathology and Laboratory Procedures	$3,136
89060	26	$232
89220	Under Other Pathology and Laboratory Procedures	$211
89230	Under Other Pathology and Laboratory Procedures	$48
90460	Under Immunization Administration for Vaccines/Toxoids	$263
90461	Under Immunization Administration for Vaccines/Toxoids	$163
90471	Under Immunization Administration for Vaccines/Toxoids	$263
90472	Under Immunization Administration for Vaccines/Toxoids	$163
90473	Under Immunization Administration for Vaccines/Toxoids	$263

Procedure Code	Modifier	Fee
90474	Under Immunization Administration for Vaccines/Toxoids	$163
90785	Under Interactive Complexity Psychiatry Services and Procedures	$182
90791	Under Psychiatric Diagnostic Procedures	$1,691
90792	Under Psychiatric Diagnostic Procedures	$1,900
90832	Under Other Psychotherapy Procedures	$820
90833	Under Other Psychotherapy Procedures	$860
90834	Under Other Psychotherapy Procedures	$1,096
90836	Under Other Psychotherapy Procedures	$1,082
90837	Under Other Psychotherapy Procedures	$1,646
90838	Under Other Psychotherapy Procedures	$1,432
90839	Under Other Psychotherapy Procedures	$1,716
90840	Under Other Psychotherapy Procedures	$820
90845	Under Other Psychotherapy Procedures	$1,179
90846	Under Other Psychotherapy Procedures	$1,325
90847	Under Other Psychotherapy Procedures	$1,378
90849	Under Other Psychotherapy Procedures	$469
90853	Under Other Psychotherapy Procedures	$330
90865	Under Other Psychiatric Services or Procedures	$2,127
90867	Under Other Psychiatric Services or Procedures	$ -
90868	Under Other Psychiatric Services or Procedures	$ -
90869	Under Other Psychiatric Services or Procedures	$ -
90870	Under Other Psychiatric Services or Procedures	$2,231
90880	Under Other Psychiatric Services or Procedures	$1,309
90901	Under Biofeedback Services and Procedures	$506
90935	Under Hemodialysis Procedures	$929
90937	Under Hemodialysis Procedures	$1,324
90945	Under Miscellaneous Dialysis Services and Procedures	$1,091
90947	Under Miscellaneous Dialysis Services and Procedures	$1,577
90951	Under End-Stage Renal Disease Services	$12,049
90954	Under End-Stage Renal Disease Services	$10,373
90955	Under End-Stage Renal Disease Services	$5,818
90956	Under End-Stage Renal Disease Services	$4,042
90957	Under End-Stage Renal Disease Services	$8,202
90958	Under End-Stage Renal Disease Services	$5,563
90959	Under End-Stage Renal Disease Services	$3,778
90960	Under End-Stage Renal Disease Services	$3,609
90961	Under End-Stage Renal Disease Services	$3,040
90962	Under End-Stage Renal Disease Services	$2,350
90963	Under End-Stage Renal Disease Services	$6,958
90964	Under End-Stage Renal Disease Services	$6,075
90965	Under End-Stage Renal Disease Services	$5,775
90966	Under End-Stage Renal Disease Services	$3,029
90967	Under End-Stage Renal Disease Services	$230
90968	Under End-Stage Renal Disease Services	$199
90969	Under End-Stage Renal Disease Services	$195

Procedure Code	Modifier	Fee
90970	Under End-Stage Renal Disease Services	$100
90997	Under Other Dialysis Procedures	$1,133
91010	Under Gastroenterology	$2,284
91010	26	$862
91010	TC	$1,421
91013	Under Gastroenterology	$326
91013	26	$122
91013	TC	$205
91020	Under Gastroenterology	$3,038
91020	26	$959
91020	TC	$2,079
91022	Under Gastroenterology	$2,183
91022	26	$959
91022	TC	$1,224
91030	Under Gastroenterology	$1,768
91030	26	$610
91030	TC	$1,158
91034	Under Gastroenterology	$2,433
91034	26	$657
91034	TC	$1,776
91035	Under Gastroenterology	$6,235
91035	26	$1,084
91035	TC	$5,152
91037	Under Gastroenterology	$2,083
91037	26	$648
91037	TC	$1,435
91038	Under Gastroenterology	$5,799
91038	26	$738
91038	TC	$5,061
91040	Under Gastroenterology	$5,788
91040	26	$623
91040	TC	$5,165
91065	Under Gastroenterology	$933
91065	26	$130
91065	TC	$803
91110	Under Gastroenterology	$11,684
91110	26	$1,656
91110	TC	$10,028
91111	Under Gastroenterology	$9,638
91111	26	$670
91111	TC	$8,968
91112	Under Gastroenterology	$13,865
91112	26	$1,395
91112	TC	$12,471
91117	Under Gastroenterology	$1,801

Procedure Code	Modifier	Fee
91120	Under Gastroenterology	$5,501
91120	26	$641
91120	TC	$4,860
91122	Under Gastroenterology	$2,977
91122	26	$1,167
91122	TC	$1,810
91132	Under Gastric Physiology Procedures	$1,944
91132	26	$345
91132	TC	$1,599
91133	Under Gastric Physiology Procedures	$2,234
91133	26	$440
91133	TC	$1,794
91200	Under Other Diagnostic Gastroenterology Procedures	$518
91200	26	$179
91200	TC	$339
92002	Under New Patient General Ophthalmological Services and Procedures	$1,063
92004	Under New Patient General Ophthalmological Services and Procedures	$1,923
92012	Under Established Patient General Ophthalmological Services and Procedures	$1,119
92014	Under Established Patient General Ophthalmological Services and Procedures	$1,610
92018	Under Special Ophthalmological Services	$1,856
92019	Under Special Ophthalmological Services	$923
92020	Under Special Ophthalmological Services	$341
92025	Under Special Ophthalmological Services	$489
92025	26	$255
92025	TC	$234
92060	Under Special Ophthalmological Services	$828
92060	26	$485
92060	TC	$343
92065	Under Special Ophthalmological Services	$693
92065	26	$227
92065	TC	$466
92071	Under Special Ophthalmological Services	$480
92072	Under Special Ophthalmological Services	$1,693
92081	Under Special Ophthalmological Services	$445
92081	26	$210
92081	TC	$234
92082	Under Special Ophthalmological Services	$620
92082	26	$277
92082	TC	$343
92083	Under Special Ophthalmological Services	$823
92083	26	$352
92083	TC	$471
92100	Under Special Ophthalmological Services	$1,039
92132	Under Special Ophthalmological Services	$404
92132	26	$210

Procedure Code	Modifier	Fee
92132	TC	$193
92133	Under Special Ophthalmological Services	$484
92133	26	$286
92133	TC	$198
92134	Under Special Ophthalmological Services	$533
92134	26	$330
92134	TC	$202
92136	Under Special Ophthalmological Services	$1,009
92136	26	$397
92136	TC	$612
92145	Under Special Ophthalmological Services	$229
92145	26	$122
92145	TC	$107
92227	Under Ophthalmoscopy Procedures	$193
92228	Under Ophthalmoscopy Procedures	$434
92228	26	$259
92228	TC	$175
92230	Under Ophthalmoscopy Procedures	$741
92235	Under Ophthalmoscopy Procedures	$1,100
92235	26	$552
92235	TC	$548
92240	Under Ophthalmoscopy Procedures	$2,698
92240	26	$594
92240	TC	$2,104
92242	Under Ophthalmoscopy Procedures	$2,934
92242	26	$694
92242	TC	$2,240
92250	Under Ophthalmoscopy Procedures	$734
92250	26	$277
92250	TC	$457
92260	Under Ophthalmoscopy Procedures	$235
92265	Under Other Specialized Ophthalmological Services and Procedures	$1,126
92265	26	$596
92265	TC	$530
92270	Under Other Specialized Ophthalmological Services and Procedures	$1,192
92270	26	$521
92270	TC	$671
92283	Under Other Specialized Ophthalmological Services and Procedures	$711
92283	26	$117
92283	TC	$594
92284	Under Other Specialized Ophthalmological Services and Procedures	$810
92284	26	$161
92284	TC	$648
92285	Under Other Specialized Ophthalmological Services and Procedures	$272
92285	26	$42

Procedure Code	Modifier	Fee
92285	TC	$230
92286	Under Other Specialized Ophthalmological Services and Procedures	$493
92286	26	$281
92286	TC	$211
92287	Under Other Specialized Ophthalmological Services and Procedures	$1,779
92287	26	$592
92287	TC	$1,187
92311	Under Contact Lens Services	$1,303
92312	Under Contact Lens Services	$1,509
92313	Under Contact Lens Services	$1,236
92315	Under Contact Lens Services	$965
92316	Under Contact Lens Services	$1,202
92317	Under Contact Lens Services	$1,010
92325	Under Contact Lens Services	$562
92326	Under Contact Lens Services	$475
92502	Under Special Otorhinolaryngologic Services	$1,242
92504	Under Special Otorhinolaryngologic Services	$376
92507	Under Special Otorhinolaryngologic Services	$996
92508	Under Special Otorhinolaryngologic Services	$292
92511	Under Special Otorhinolaryngologic Services	$1,403
92512	Under Special Otorhinolaryngologic Services	$763
92516	Under Special Otorhinolaryngologic Services	$881
92520	Under Special Otorhinolaryngologic Services	$988
92521	Under Special Otorhinolaryngologic Services	$1,452
92522	Under Special Otorhinolaryngologic Services	$1,172
92523	Under Special Otorhinolaryngologic Services	$2,515
92524	Under Special Otorhinolaryngologic Services	$1,120
92526	Under Special Otorhinolaryngologic Services	$1,091
92537	Under Vestibular Function Tests, With Recording (eg, ENG)	$518
92537	26	$402
92537	TC	$116
92538	Under Vestibular Function Tests, With Recording (eg, ENG)	$267
92538	26	$201
92538	TC	$66
92540	Under Vestibular Function Tests, With Recording (eg, ENG)	$1,297
92540	26	$1,013
92540	TC	$284
92541	Under Vestibular Function Tests, With Recording (eg, ENG)	$315
92541	26	$268
92541	TC	$48
92542	Under Vestibular Function Tests, With Recording (eg, ENG)	$361
92542	26	$318
92542	TC	$43
92544	Under Vestibular Function Tests, With Recording (eg, ENG)	$218
92544	26	$184

Procedure Code	Modifier	Fee
92544	TC	$34
92545	Under Vestibular Function Tests, With Recording (eg, ENG)	$204
92545	26	$170
92545	TC	$34
92546	Under Vestibular Function Tests, With Recording (eg, ENG)	$1,348
92546	26	$192
92546	TC	$1,155
92547	Under Vestibular Function Tests, With Recording (eg, ENG)	$77
92548	Under Vestibular Function Tests, With Recording (eg, ENG)	$1,271
92548	26	$332
92548	TC	$939
92550	Under Audiologic Function Tests	$275
92552	Under Audiologic Function Tests	$412
92553	Under Audiologic Function Tests	$493
92555	Under Audiologic Function Tests	$312
92556	Under Audiologic Function Tests	$493
92557	Under Audiologic Function Tests	$482
92561	Under Audiologic Function Tests	$509
92562	Under Audiologic Function Tests	$603
92563	Under Audiologic Function Tests	$403
92564	Under Audiologic Function Tests	$339
92565	Under Audiologic Function Tests	$202
92567	Under Audiologic Function Tests	$185
92568	Under Audiologic Function Tests	$204
92570	Under Audiologic Function Tests	$410
92571	Under Audiologic Function Tests	$357
92572	Under Audiologic Function Tests	$685
92575	Under Audiologic Function Tests	$614
92576	Under Audiologic Function Tests	$489
92577	Under Audiologic Function Tests	$189
92579	Under Audiologic Function Tests	$585
92582	Under Audiologic Function Tests	$882
92583	Under Audiologic Function Tests	$639
92584	Under Audiologic Function Tests	$960
92585	Under Audiologic Function Tests	$1,746
92585	26	$341
92585	TC	$1,405
92586	Under Audiologic Function Tests	$1,155
92587	Under Audiologic Function Tests	$275
92587	26	$232
92587	TC	$43
92588	Under Audiologic Function Tests	$417
92588	26	$365
92588	TC	$52
92596	Under Audiologic Function Tests	$885

Procedure Code	Modifier	Fee
92597	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$920
92601	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$2,103
92602	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,303
92603	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,951
92604	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,156
92607	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,668
92608	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$669
92609	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,397
92610	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,094
92611	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,120
92612	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$2,452
92613	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$489
92614	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,854
92615	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$424
92616	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$2,656
92617	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$533
92620	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,204
92621	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$287
92625	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$894
92626	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$1,144
92627	Under Evaluative and Therapeutic Otorhinolaryngologic Services	$287
92640	Under Special Diagnostic Otorhinolaryngologic Procedures	$1,463
92920	Under Coronary Therapeutic Services and Procedures	$7,343
92924	Under Coronary Therapeutic Services and Procedures	$8,758
92928	Under Coronary Therapeutic Services and Procedures	$8,171
92933	Under Coronary Therapeutic Services and Procedures	$9,158
92937	Under Coronary Therapeutic Services and Procedures	$8,162
92941	Under Coronary Therapeutic Services and Procedures	$9,178
92943	Under Coronary Therapeutic Services and Procedures	$9,176
92950	Under Other Therapeutic Cardiovascular Services and Procedures	$3,932
92953	Under Other Therapeutic Cardiovascular Services and Procedures	$16
92960	Under Other Therapeutic Cardiovascular Services and Procedures	$2,054
92961	Under Other Therapeutic Cardiovascular Services and Procedures	$3,435
92970	Under Other Therapeutic Cardiovascular Services and Procedures	$2,726
92971	Under Other Therapeutic Cardiovascular Services and Procedures	$1,376
92973	Under Coronary Therapeutic Services and Procedures	$2,446
92974	Under Coronary Therapeutic Services and Procedures	$2,245
92975	Under Coronary Therapeutic Services and Procedures	$5,198
92977	Under Coronary Therapeutic Services and Procedures	$773
92978	Under Coronary Therapeutic Services and Procedures	$ -
92978	26	$1,303
92978	TC	$ -
92979	Under Coronary Therapeutic Services and Procedures	$ -
92979	26	$1,051
92979	TC	$ -

Procedure Code	Modifier	Fee
92986	Under Other Therapeutic Cardiovascular Services and Procedures	$18,145
92987	Under Other Therapeutic Cardiovascular Services and Procedures	$18,712
92990	Under Other Therapeutic Cardiovascular Services and Procedures	$14,969
92992	Under Other Therapeutic Cardiovascular Services and Procedures	$ -
92993	Under Other Therapeutic Cardiovascular Services and Procedures	$ -
92997	Under Other Therapeutic Cardiovascular Services and Procedures	$9,057
92998	Under Other Therapeutic Cardiovascular Services and Procedures	$4,499
93000	Under Cardiography Procedures	$220
93005	Under Cardiography Procedures	$111
93010	Under Cardiography Procedures	$108
93015	Under Cardiography Procedures	$913
93016	Under Cardiography Procedures	$282
93017	Under Cardiography Procedures	$443
93018	Under Cardiography Procedures	$188
93024	Under Cardiography Procedures	$1,428
93024	26	$724
93024	TC	$705
93025	Under Cardiography Procedures	$2,101
93025	26	$470
93025	TC	$1,631
93040	Under Cardiography Procedures	$165
93041	Under Cardiography Procedures	$75
93042	Under Cardiography Procedures	$90
93050	Under Cardiography Procedures	$215
93050	26	$108
93050	TC	$107
93224	Under Cardiovascular Monitoring Services	$1,173
93225	Under Cardiovascular Monitoring Services	$343
93226	Under Cardiovascular Monitoring Services	$489
93227	Under Cardiovascular Monitoring Services	$340
93228	Under Cardiovascular Monitoring Services	$333
93229	Under Cardiovascular Monitoring Services	$9,407
93260	Under Implantable and Wearable Cardiac Device Evaluations	$834
93260	26	$550
93260	TC	$284
93261	Under Implantable and Wearable Cardiac Device Evaluations	$759
93261	26	$479
93261	TC	$280
93268	Under Cardiovascular Monitoring Services	$2,651
93270	Under Cardiovascular Monitoring Services	$120
93271	Under Cardiovascular Monitoring Services	$2,208
93272	Under Cardiovascular Monitoring Services	$322
93278	Under Cardiovascular Monitoring Services	$400
93278	26	$161
93278	TC	$239

Procedure Code	Modifier	Fee
93279	Under Implantable and Wearable Cardiac Device Evaluations	$631
93279	26	$411
93279	TC	$221
93280	Under Implantable and Wearable Cardiac Device Evaluations	$745
93280	26	$488
93280	TC	$257
93281	Under Implantable and Wearable Cardiac Device Evaluations	$807
93281	26	$545
93281	TC	$261
93282	Under Implantable and Wearable Cardiac Device Evaluations	$780
93282	26	$541
93282	TC	$239
93283	Under Implantable and Wearable Cardiac Device Evaluations	$995
93283	26	$733
93283	TC	$261
93284	Under Implantable and Wearable Cardiac Device Evaluations	$1,086
93284	26	$802
93284	TC	$284
93285	Under Implantable and Wearable Cardiac Device Evaluations	$547
93285	26	$336
93285	TC	$211
93286	Under Implantable and Wearable Cardiac Device Evaluations	$385
93286	26	$192
93286	TC	$193
93287	Under Implantable and Wearable Cardiac Device Evaluations	$489
93287	26	$296
93287	TC	$193
93288	Under Implantable and Wearable Cardiac Device Evaluations	$494
93288	26	$274
93288	TC	$221
93289	Under Implantable and Wearable Cardiac Device Evaluations	$695
93289	26	$475
93289	TC	$221
93290	Under Implantable and Wearable Cardiac Device Evaluations	$472
93290	26	$278
93290	TC	$193
93291	Under Implantable and Wearable Cardiac Device Evaluations	$420
93291	26	$232
93291	TC	$189
93292	Under Implantable and Wearable Cardiac Device Evaluations	$472
93292	26	$274
93292	TC	$198
93293	Under Implantable and Wearable Cardiac Device Evaluations	$685
93293	26	$192
93293	TC	$493

Procedure Code	Modifier	Fee
93294	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$393
93295	Under Implantable and Wearable Cardiac Device Evaluations	$707
93296	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$343
93298	Under Implantable and Wearable Cardiac Device Evaluations	$342
93303	Under Echocardiography Procedures	$3,107
93303	26	$810
93303	TC	$2,297
93304	Under Echocardiography Procedures	$2,069
93304	26	$465
93304	TC	$1,603
93306	Under Echocardiography Procedures	$2,689
93306	26	$929
93306	TC	$1,760
93307	Under Echocardiography Procedures	$1,829
93307	26	$571
93307	TC	$1,258
93308	Under Echocardiography Procedures	$1,361
93308	26	$326
93308	TC	$1,035
93312	Under Echocardiography Procedures	$3,178
93312	26	$1,391
93312	TC	$1,788
93313	Under Echocardiography Procedures	$150
93314	Under Echocardiography Procedures	$3,096
93314	26	$1,190
93314	TC	$1,906
93315	Under Echocardiography Procedures	$ -
93315	26	$1,643
93315	TC	$ -
93316	Under Echocardiography Procedures	$354
93317	Under Echocardiography Procedures	$ -
93317	26	$1,208
93317	TC	$ -
93318	Under Echocardiography Procedures	$ -
93318	26	$1,355
93318	TC	$ -
93320	Under Echocardiography Procedures	$696
93320	26	$232
93320	TC	$464
93321	Under Echocardiography Procedures	$354
93321	26	$95
93321	TC	$259
93325	Under Echocardiography Procedures	$331
93325	26	$40
93325	TC	$291

Procedure Code	Modifier	Fee
93350	Under Echocardiography Procedures	$2,667
93350	26	$902
93350	TC	$1,765
93351	Under Echocardiography Procedures	$3,007
93351	26	$1,081
93351	TC	$1,926
93355	Under Echocardiography Procedures	$2,932
93451	Under Cardiac Catheterization	$9,475
93451	26	$1,783
93451	TC	$7,692
93452	Under Cardiac Catheterization	$10,813
93452	26	$3,250
93452	TC	$7,562
93453	Under Cardiac Catheterization	$14,069
93453	26	$4,362
93453	TC	$9,707
93454	Under Cardiac Catheterization	$10,975
93454	26	$3,290
93454	TC	$7,685
93455	Under Cardiac Catheterization	$12,848
93455	26	$3,844
93455	TC	$9,004
93456	Under Cardiac Catheterization	$13,898
93456	26	$4,284
93456	TC	$9,614
93457	Under Cardiac Catheterization	$15,741
93457	26	$4,824
93457	TC	$10,917
93458	Under Cardiac Catheterization	$13,240
93458	26	$4,069
93458	TC	$9,170
93459	Under Cardiac Catheterization	$14,682
93459	26	$4,620
93459	TC	$10,062
93460	Under Cardiac Catheterization	$15,825
93460	26	$5,171
93460	TC	$10,653
93461	Under Cardiac Catheterization	$18,100
93461	26	$5,705
93461	TC	$12,396
93462	Under Cardiac Catheterization	$2,899
93463	Under Cardiac Catheterization	$1,269
93464	Under Cardiac Catheterization	$3,286
93464	26	$1,114
93464	TC	$2,172

Procedure Code	Modifier	Fee
93503	Under Cardiac Catheterization	$1,360
93505	Under Cardiac Catheterization	$9,192
93505	26	$2,983
93505	TC	$6,209
93530	Under Cardiac Catheterization	$ -
93530	26	$2,759
93530	TC	$ -
93531	Under Cardiac Catheterization	$ -
93531	26	$5,732
93531	TC	$ -
93532	Under Cardiac Catheterization	$ -
93532	26	$6,920
93532	TC	$ -
93533	Under Cardiac Catheterization	$ -
93533	26	$4,672
93533	TC	$ -
93561	Under Injection Procedures During Cardiac Catheterizations	$ -
93561	26	$157
93561	TC	$ -
93562	Under Injection Procedures During Cardiac Catheterizations	$ -
93562	26	$16
93562	TC	$ -
93563	Under Injection Procedures During Cardiac Catheterizations	$792
93564	Under Injection Procedures During Cardiac Catheterizations	$846
93565	Under Injection Procedures During Cardiac Catheterizations	$613
93566	Under Injection Procedures During Cardiac Catheterizations	$2,127
93567	Under Injection Procedures During Cardiac Catheterizations	$1,800
93568	Under Injection Procedures During Cardiac Catheterizations	$1,904
93571	Under Injection Procedures During Cardiac Catheterizations	$ -
93571	26	$1,303
93571	TC	$ -
93572	26	$1,051
93580	Under Repair Procedures of Structural Heart	$13,453
93581	Under Repair Procedures of Structural Heart	$18,408
93582	Under Repair Procedures of Structural Heart	$9,205
93583	Under Repair Procedures of Structural Heart	$10,252
93590	Under Repair Procedures of Structural Heart	$14,048
93591	Under Repair Procedures of Structural Heart	$11,669
93592	Under Repair Procedures of Structural Heart	$5,135
93600	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93600	26	$1,631
93600	TC	$ -
93602	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93602	26	$1,579
93602	TC	$ -

Procedure Code	Modifier	Fee
93603	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93603	26	$1,579
93603	TC	$ -
93609	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93609	26	$3,809
93609	TC	$ -
93610	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93610	26	$2,238
93610	TC	$ -
93612	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93612	26	$2,216
93612	TC	$ -
93613	Under Intracardiac Electrophysiological Procedures/Studies	$4,435
93615	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93615	26	$493
93615	TC	$ -
93616	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93616	26	$793
93616	TC	$ -
93618	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93618	26	$3,030
93618	TC	$ -
93619	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93619	26	$5,354
93619	TC	$ -
93620	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93620	26	$8,593
93620	TC	$ -
93621	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93621	26	$1,606
93621	TC	$ -
93622	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93622	26	$2,357
93622	TC	$ -
93623	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93623	26	$2,173
93623	TC	$ -
93624	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93624	26	$3,413
93624	TC	$ -
93631	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93631	26	$5,434
93631	TC	$ -
93640	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93640	26	$2,447

Procedure Code	Modifier	Fee
93640	TC	$ -
93641	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93641	26	$4,279
93641	TC	$ -
93642	Under Intracardiac Electrophysiological Procedures/Studies	$4,589
93642	26	$3,511
93642	TC	$1,078
93644	Under Intracardiac Electrophysiological Procedures/Studies	$2,612
93644	26	$1,909
93644	TC	$703
93650	Under Intracardiac Electrophysiological Procedures/Studies	$8,147
93653	Under Intracardiac Electrophysiological Procedures/Studies	$11,535
93654	Under Intracardiac Electrophysiological Procedures/Studies	$15,449
93655	Under Intracardiac Electrophysiological Procedures/Studies	$5,881
93656	Under Intracardiac Electrophysiological Procedures/Studies	$15,492
93657	Under Intracardiac Electrophysiological Procedures/Studies	$5,878
93660	Under Intracardiac Electrophysiological Procedures/Studies	$2,049
93660	26	$1,194
93660	TC	$855
93662	Under Intracardiac Electrophysiological Procedures/Studies	$ -
93662	26	$1,825
93662	TC	$ -
93668	Under Peripheral Arterial Disease Rehabilitation	$252
93701	Under Non-invasive Physiologic Studies and Procedures	$316
93702	Under Non-invasive Physiologic Studies and Procedures	$1,597
93724	Under Non-invasive Physiologic Studies and Procedures	$3,466
93724	26	$3,090
93724	TC	$375
93745	Under Non-invasive Physiologic Studies and Procedures	$ -
93745	26	$ -
93745	TC	$ -
93750	Under Non-invasive Physiologic Studies and Procedures	$721
93784	Under Non-invasive Physiologic Studies and Procedures	$691
93786	Under Non-invasive Physiologic Studies and Procedures	$384
93788	Under Non-invasive Physiologic Studies and Procedures	$70
93790	Under Non-invasive Physiologic Studies and Procedures	$236
93792	Under Home and Outpatient International Normalized Ratio (INR) Monitoring Services	$700
93793	Under Home and Outpatient International Normalized Ratio (INR) Monitoring Services	$153
93797	Under Other Cardiovascular Procedures	$208
93798	Under Other Cardiovascular Procedures	$322
93880	Under Non-Invasive Cerebrovascular Arterial	$2,648
93880	26	$519
93880	TC	$2,129
93882	Under Non-Invasive Cerebrovascular Arterial	$1,700

Procedure Code	Modifier	Fee
93882	26	$334
93882	TC	$1,367
93886	Under Non-Invasive Cerebrovascular Arterial	$3,539
93886	26	$606
93886	TC	$2,934
93888	Under Non-Invasive Cerebrovascular Arterial	$2,014
93888	26	$338
93888	TC	$1,676
93890	Under Non-Invasive Cerebrovascular Arterial	$3,620
93890	26	$658
93890	TC	$2,961
93892	Under Non-Invasive Cerebrovascular Arterial	$4,156
93892	26	$776
93892	TC	$3,380
93893	Under Non-Invasive Cerebrovascular Arterial	$4,501
93893	26	$767
93893	TC	$3,735
93922	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$1,146
93922	26	$166
93922	TC	$980
93923	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$1,776
93923	26	$289
93923	TC	$1,487
93924	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$2,208
93924	26	$320
93924	TC	$1,888
93925	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$3,396
93925	26	$514
93925	TC	$2,882
93926	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$1,989
93926	26	$315
93926	TC	$1,674
93930	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$2,723
93930	26	$521
93930	TC	$2,202
93931	Under Non-Invasive Extremity Arterial Studies (Including Digits)	$1,691
93931	26	$320
93931	TC	$1,371
93970	Under Non-Invasive Extremity Venous Studies (Including Digits)	$2,556
93970	26	$446
93970	TC	$2,111
93971	Under Non-Invasive Extremity Venous Studies (Including Digits)	$1,567
93971	26	$291
93971	TC	$1,276
93975	Under Non-Invasive Visceral and Penile Vascular Studies	$3,682

Procedure Code	Modifier	Fee
93975	26	$751
93975	TC	$2,932
93976	Under Non-Invasive Visceral and Penile Vascular Studies	$2,136
93976	26	$510
93976	TC	$1,626
93978	Under Non-Invasive Visceral and Penile Vascular Studies	$2,502
93978	26	$519
93978	TC	$1,983
93979	Under Non-Invasive Visceral and Penile Vascular Studies	$1,580
93979	26	$327
93979	TC	$1,253
93980	Under Non-Invasive Visceral and Penile Vascular Studies	$1,623
93980	26	$788
93980	TC	$835
93981	Under Non-Invasive Visceral and Penile Vascular Studies	$997
93981	26	$280
93981	TC	$716
93990	Under Non-Invasive Extremity Arterial-Venous Studies	$2,082
93990	26	$327
93990	TC	$1,756
94002	Under Ventilator Management	$1,194
94003	Under Ventilator Management	$863
94004	Under Ventilator Management	$636
94010	Under Pulmonary Diagnostic Testing and Therapies	$465
94010	26	$108
94010	TC	$357
94011	Under Pulmonary Diagnostic Testing and Therapies	$1,115
94012	Under Pulmonary Diagnostic Testing and Therapies	$1,814
94013	Under Pulmonary Diagnostic Testing and Therapies	$249
94014	Under Pulmonary Diagnostic Testing and Therapies	$725
94015	Under Pulmonary Diagnostic Testing and Therapies	$403
94016	Under Pulmonary Diagnostic Testing and Therapies	$322
94060	Under Pulmonary Diagnostic Testing and Therapies	$782
94060	26	$165
94060	TC	$616
94070	Under Pulmonary Diagnostic Testing and Therapies	$780
94070	26	$368
94070	TC	$412
94200	Under Pulmonary Diagnostic Testing and Therapies	$357
94200	26	$73
94200	TC	$284
94250	Under Pulmonary Diagnostic Testing and Therapies	$366
94250	26	$73
94250	TC	$293
94375	Under Pulmonary Diagnostic Testing and Therapies	$513

Procedure Code	Modifier	Fee
94375	26	$187
94375	TC	$325
94400	Under Pulmonary Diagnostic Testing and Therapies	$745
94400	26	$252
94400	TC	$493
94450	Under Pulmonary Diagnostic Testing and Therapies	$925
94450	26	$256
94450	TC	$669
94452	Under Pulmonary Diagnostic Testing and Therapies	$745
94452	26	$183
94452	TC	$562
94453	Under Pulmonary Diagnostic Testing and Therapies	$1,032
94453	26	$242
94453	TC	$789
94610	Under Pulmonary Diagnostic Testing and Therapies	$721
94617	Under Pulmonary Diagnostic Testing and Therapies	$1,226
94617	26	$425
94617	TC	$800
94618	Under Pulmonary Diagnostic Testing and Therapies	$439
94618	26	$291
94618	TC	$148
94621	Under Pulmonary Diagnostic Testing and Therapies	$2,120
94621	26	$878
94621	TC	$1,242
94640	Under Pulmonary Diagnostic Testing and Therapies	$243
94642	Under Pulmonary Diagnostic Testing and Therapies	$ -
94644	Under Pulmonary Diagnostic Testing and Therapies	$584
94645	Under Pulmonary Diagnostic Testing and Therapies	$211
94660	Under Pulmonary Diagnostic Testing and Therapies	$836
94662	Under Pulmonary Diagnostic Testing and Therapies	$467
94664	Under Pulmonary Diagnostic Testing and Therapies	$225
94667	Under Pulmonary Diagnostic Testing and Therapies	$350
94668	Under Pulmonary Diagnostic Testing and Therapies	$418
94669	Under Pulmonary Diagnostic Testing and Therapies	$430
94680	Under Pulmonary Diagnostic Testing and Therapies	$755
94680	26	$161
94680	TC	$594
94681	Under Pulmonary Diagnostic Testing and Therapies	$738
94681	26	$130
94681	TC	$607
94690	Under Pulmonary Diagnostic Testing and Therapies	$722
94690	26	$51
94690	TC	$671
94726	Under Pulmonary Diagnostic Testing and Therapies	$709
94726	26	$156

Procedure Code	Modifier	Fee
94726	TC	$553
94727	Under Pulmonary Diagnostic Testing and Therapies	$568
94727	26	$156
94727	TC	$412
94728	Under Pulmonary Diagnostic Testing and Therapies	$532
94728	26	$161
94728	TC	$371
94729	Under Pulmonary Diagnostic Testing and Therapies	$706
94729	26	$117
94729	TC	$589
94750	Under Pulmonary Diagnostic Testing and Therapies	$1,064
94750	26	$139
94750	TC	$926
94760	Under Pulmonary Diagnostic Testing and Therapies	$39
94761	Under Pulmonary Diagnostic Testing and Therapies	$61
94762	Under Pulmonary Diagnostic Testing and Therapies	$321
94770	Under Pulmonary Diagnostic Testing and Therapies	$95
94780	Under Pulmonary Diagnostic Testing and Therapies	$671
94781	Under Pulmonary Diagnostic Testing and Therapies	$267
95004	Under Allergy Testing Procedures	$70
95012	Under Allergy Testing Procedures	$261
95017	Under Allergy Testing Procedures	$101
95018	Under Allergy Testing Procedures	$272
95024	Under Allergy Testing Procedures	$107
95027	Under Allergy Testing Procedures	$61
95028	Under Allergy Testing Procedures	$171
95044	Under Allergy Testing Procedures	$75
95052	Under Allergy Testing Procedures	$89
95056	Under Allergy Testing Procedures	$596
95060	Under Allergy Testing Procedures	$457
95065	Under Allergy Testing Procedures	$325
95070	Under Allergy Testing Procedures	$405
95071	Under Allergy Testing Procedures	$457
95076	Under Ingestion Challenge Allergy and Clinical Immunology Testing Procedures	$1,527
95079	Under Ingestion Challenge Allergy and Clinical Immunology Testing Procedures	$1,067
95115	Under Allergen Immunotherapy Services and Procedures	$116
95117	Under Allergen Immunotherapy Services and Procedures	$134
95144	Under Allergen Immunotherapy Services and Procedures	$174
95145	Under Allergen Immunotherapy Services and Procedures	$333
95146	Under Allergen Immunotherapy Services and Procedures	$611
95147	Under Allergen Immunotherapy Services and Procedures	$652
95148	Under Allergen Immunotherapy Services and Procedures	$929
95149	Under Allergen Immunotherapy Services and Procedures	$1,220
95165	Under Allergen Immunotherapy Services and Procedures	$169
95170	Under Allergen Immunotherapy Services and Procedures	$128

Procedure Code	Modifier	Fee
95180	Under Allergen Immunotherapy Services and Procedures	$1,735
95249	Under Endocrinology Services	$716
95250	Under Endocrinology Services	$1,988
95251	Under Endocrinology Services	$460
95782	Under Sleep Medicine Testing Procedures	$11,831
95782	26	$1,604
95782	TC	$10,227
95783	Under Sleep Medicine Testing Procedures	$12,618
95783	26	$1,747
95783	TC	$10,871
95800	Under Sleep Medicine Testing Procedures	$2,277
95800	26	$664
95800	TC	$1,613
95801	Under Sleep Medicine Testing Procedures	$1,161
95801	26	$627
95801	TC	$534
95803	Under Sleep Medicine Testing Procedures	$1,841
95803	26	$560
95803	TC	$1,280
95805	Under Sleep Medicine Testing Procedures	$5,572
95805	26	$752
95805	TC	$4,819
95806	Under Sleep Medicine Testing Procedures	$2,182
95806	26	$779
95806	TC	$1,403
95807	Under Sleep Medicine Testing Procedures	$5,941
95807	26	$794
95807	TC	$5,147
95808	Under Sleep Medicine Testing Procedures	$9,036
95808	26	$1,131
95808	TC	$7,906
95810	Under Sleep Medicine Testing Procedures	$8,073
95810	26	$1,551
95810	TC	$6,523
95811	Under Sleep Medicine Testing Procedures	$8,478
95811	26	$1,615
95811	TC	$6,864
95812	Under Routine Electroencephalography (EEG) Procedures	$4,164
95812	26	$743
95812	TC	$3,421
95813	Under Routine Electroencephalography (EEG) Procedures	$5,231
95813	26	$1,113
95813	TC	$4,119
95816	Under Routine Electroencephalography (EEG) Procedures	$4,698
95816	26	$743

Procedure Code	Modifier	Fee
95816	TC	$3,955
95819	Under Routine Electroencephalography (EEG) Procedures	$5,465
95819	26	$743
95819	TC	$4,722
95822	Under Routine Electroencephalography (EEG) Procedures	$4,921
95822	26	$743
95822	TC	$4,178
95824	26	$509
95829	Under Electrocorticography Procedures	$24,702
95829	26	$4,382
95829	TC	$20,320
95830	Under Routine Electroencephalography (EEG) Procedures	$3,024
95851	Under Muscle and Range of Motion Testing Procedures	$258
95852	Under Muscle and Range of Motion Testing Procedures	$237
95857	Under Muscle and Range of Motion Testing Procedures	$695
95860	Under Electromyography Procedures	$1,585
95860	26	$664
95860	TC	$921
95861	Under Electromyography Procedures	$2,249
95861	26	$1,064
95861	TC	$1,185
95863	Under Electromyography Procedures	$2,866
95863	26	$1,281
95863	TC	$1,585
95864	Under Electromyography Procedures	$3,209
95864	26	$1,369
95864	TC	$1,840
95865	Under Electromyography Procedures	$1,894
95865	26	$1,077
95865	TC	$816
95866	Under Electromyography Procedures	$1,732
95866	26	$861
95866	TC	$871
95867	Under Electromyography Procedures	$1,313
95867	26	$546
95867	TC	$766
95868	Under Electromyography Procedures	$1,744
95868	26	$810
95868	TC	$935
95869	Under Electromyography Procedures	$1,210
95869	26	$257
95869	TC	$953
95870	Under Electromyography Procedures	$1,228
95870	26	$257
95870	TC	$971

Procedure Code	Modifier	Fee
95872	Under Electromyography Procedures	$2,541
95872	26	$1,993
95872	TC	$548
95873	Under Guidance for Chemodenervation and Ischemic Muscle Testing	$946
95873	26	$254
95873	TC	$691
95874	Under Guidance for Chemodenervation and Ischemic Muscle Testing	$966
95874	26	$257
95874	TC	$710
95875	Under Guidance for Chemodenervation and Ischemic Muscle Testing	$1,682
95875	26	$761
95875	TC	$921
95885	Under Electromyography Procedures	$762
95885	26	$243
95885	TC	$519
95886	Under Electromyography Procedures	$1,175
95886	26	$593
95886	TC	$582
95887	Under Electromyography Procedures	$1,042
95887	26	$491
95887	TC	$550
95905	Under Nerve Conduction Tests	$941
95905	26	$38
95905	TC	$903
95907	Under Nerve Conduction Tests	$1,259
95907	26	$688
95907	TC	$571
95908	Under Nerve Conduction Tests	$1,629
95908	26	$867
95908	TC	$762
95909	Under Nerve Conduction Tests	$1,941
95909	26	$1,033
95909	TC	$907
95910	Under Nerve Conduction Tests	$2,556
95910	26	$1,381
95910	TC	$1,176
95911	Under Nerve Conduction Tests	$3,047
95911	26	$1,721
95911	TC	$1,326
95912	Under Nerve Conduction Tests	$3,381
95912	26	$2,046
95912	TC	$1,335
95913	Under Nerve Conduction Tests	$3,900
95913	26	$2,424
95913	TC	$1,476

Procedure Code	Modifier	Fee
95921	Under Autonomic Function Testing Procedures	$1,072
95921	26	$579
95921	TC	$493
95922	Under Autonomic Function Testing Procedures	$1,253
95922	26	$618
95922	TC	$635
95923	Under Autonomic Function Testing Procedures	$1,675
95923	26	$590
95923	TC	$1,085
95924	Under Autonomic Function Testing Procedures	$1,945
95924	26	$1,147
95924	TC	$798
95925	Under Evoked Potentials and Reflex Testing Procedures	$1,711
95925	26	$356
95925	TC	$1,355
95926	Under Evoked Potentials and Reflex Testing Procedures	$1,679
95926	26	$351
95926	TC	$1,328
95927	Under Evoked Potentials and Reflex Testing Procedures	$1,763
95927	26	$351
95927	TC	$1,412
95928	Under Evoked Potentials and Reflex Testing Procedures	$2,743
95928	26	$1,026
95928	TC	$1,717
95929	Under Evoked Potentials and Reflex Testing Procedures	$2,821
95929	26	$1,035
95929	TC	$1,785
95930	Under Evoked Potentials and Reflex Testing Procedures	$898
95930	26	$241
95930	TC	$657
95933	Under Evoked Potentials and Reflex Testing Procedures	$1,007
95933	26	$405
95933	TC	$603
95937	Under Evoked Potentials and Reflex Testing Procedures	$1,056
95937	26	$440
95937	TC	$616
95938	Under Evoked Potentials and Reflex Testing Procedures	$4,459
95938	26	$595
95938	TC	$3,864
95939	Under Evoked Potentials and Reflex Testing Procedures	$6,543
95939	26	$1,540
95939	TC	$5,004
95940	Under Intraoperative Neurophysiology	$423
95943	Under Autonomic Function Testing Procedures	$ -
95943	26	$ -

Procedure Code	Modifier	Fee
95943	TC	$ -
95954	Under Special EEG Test	$5,507
95954	26	$1,547
95954	TC	$3,960
95955	Under Special EEG Test	$2,764
95955	26	$692
95955	TC	$2,072
95956	Under Special EEG Test	$20,601
95956	26	$2,464
95956	TC	$18,138
95957	Under Special EEG Test	$3,710
95957	26	$1,338
95957	TC	$2,372
95958	Under Special EEG Test	$7,516
95958	26	$2,940
95958	TC	$4,576
95961	Under Special EEG Test	$3,938
95961	26	$2,098
95961	TC	$1,840
95962	Under Special EEG Test	$3,390
95962	26	$2,242
95962	TC	$1,149
95965	Under Special EEG Test	$ -
95965	26	$5,436
95965	TC	$ -
95966	Under Special EEG Test	$ -
95966	26	$2,803
95966	TC	$ -
95967	Under Special EEG Test	$ -
95967	26	$2,492
95967	TC	$ -
95970	Under Neurostimulators and Analysis-Programming Procedures	$896
95971	Under Neurostimulators and Analysis-Programming Procedures	$660
95972	Under Neurostimulators and Analysis-Programming Procedures	$762
95980	Under Neurostimulators and Analysis-Programming Procedures	$623
95981	Under Neurostimulators and Analysis-Programming Procedures	$435
95982	Under Neurostimulators and Analysis-Programming Procedures	$704
95990	Under Other Neurology and Neuromuscular Procedures	$1,212
95991	Under Other Neurology and Neuromuscular Procedures	$1,541
95992	Under Other Neurology and Neuromuscular Procedures	$554
96000	Under Motion Analysis Procedures	$1,243
96001	Under Motion Analysis Procedures	$1,737
96002	Under Motion Analysis Procedures	$285
96003	Under Motion Analysis Procedures	$218
96004	Under Motion Analysis Procedures	$1,491

Procedure Code	Modifier	Fee
96020	Under Functional Brain Mapping	$ -
96020	26	$2,058
96020	TC	$ -
96105	Under Assessment of Aphasia and Cognitive Performance Testing	$1,379
96116	Under Neurobehavioral Status Examination	$1,190
96125	Under Assessment of Aphasia and Cognitive Performance Testing	$1,512
96127	Under Developmental and Behavioral Screening and Testing	$84
96160	Under Health and Behavior Assessment/Intervention Procedures	$50
96161	Under Health and Behavior Assessment/Intervention Procedures	$50
96360	Under Hydration Infusion	$602
96361	Under Hydration Infusion	$178
96365	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$942
96366	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$281
96367	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$406
96368	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$267
96369	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$2,236
96370	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$199
96371	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$819
96372	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$263
96373	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$245
96374	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$597
96375	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$232
96377	Under Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)	$263
96401	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$1,040
96402	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$394

Procedure Code	Modifier	Fee
96405	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$1,038
96406	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$1,526
96409	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$1,421
96411	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$758
96413	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$1,841
96415	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$401
96416	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$1,874
96417	Under Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$883
96420	Under Intra-Arterial Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$1,379
96422	Under Intra-Arterial Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$2,407
96423	Under Intra-Arterial Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$1,093
96425	Under Intra-Arterial Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration	$2,521
96440	Under Other Injection and Infusion Services	$10,228
96446	Under Other Injection and Infusion Services	$2,730
96450	Under Other Injection and Infusion Services	$2,358
96521	Under Other Injection and Infusion Services	$1,911
96522	Under Other Injection and Infusion Services	$1,553
96523	Under Other Injection and Infusion Services	$363
96542	Under Other Injection and Infusion Services	$1,725
96567	Under Photodynamic Therapy Procedures	$1,476
96570	Under Photodynamic Therapy Procedures	$670
96571	Under Photodynamic Therapy Procedures	$381
96573	Under Photodynamic Therapy Procedures	$2,440
96574	Under Photodynamic Therapy Procedures	$3,140
96900	Under Special Dermatological Procedures	$271
96904	Under Special Dermatological Procedures	$810
96910	Under Special Dermatological Procedures	$1,465
96912	Under Special Dermatological Procedures	$1,237
96913	Under Special Dermatological Procedures	$1,726
96920	Under Special Dermatological Procedures	$2,116
96921	Under Special Dermatological Procedures	$2,320
96922	Under Special Dermatological Procedures	$3,155
96931	Under Special Dermatological Procedures	$2,170
96932	Under Special Dermatological Procedures	$1,583
96933	Under Special Dermatological Procedures	$524
96934	Under Special Dermatological Procedures	$952
96935	Under Special Dermatological Procedures	$453

Procedure Code	Modifier	Fee
96936	Under Special Dermatological Procedures	$502
97012	Under Supervised Physical Medicine and Rehabilitation Modalities	$189
97016	Under Supervised Physical Medicine and Rehabilitation Modalities	$203
97018	Under Supervised Physical Medicine and Rehabilitation Modalities	$115
97022	Under Supervised Physical Medicine and Rehabilitation Modalities	$245
97024	Under Supervised Physical Medicine and Rehabilitation Modalities	$92
97026	Under Supervised Physical Medicine and Rehabilitation Modalities	$83
97028	Under Supervised Physical Medicine and Rehabilitation Modalities	$105
97032	Under Constant Attendance Physical Medicine and Rehabilitation Modalities	$198
97033	Under Constant Attendance Physical Medicine and Rehabilitation Modalities	$266
97034	Under Constant Attendance Physical Medicine and Rehabilitation Modalities	$194
97035	Under Constant Attendance Physical Medicine and Rehabilitation Modalities	$171
97036	Under Constant Attendance Physical Medicine and Rehabilitation Modalities	$456
97110	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$392
97112	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$445
97113	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$500
97116	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$387
97124	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$391
97140	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$353
97150	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$233
97161	Under Physical Therapy Evaluations	$1,071
97162	Under Physical Therapy Evaluations	$1,071
97163	Under Physical Therapy Evaluations	$1,071
97164	Under Physical Therapy Evaluations	$725
97165	Under Occupational Therapy Evaluations	$1,157
97166	Under Occupational Therapy Evaluations	$1,157
97167	Under Occupational Therapy Evaluations	$1,157
97168	Under Occupational Therapy Evaluations	$788
97530	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$519
97533	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$437
97535	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$442
97537	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$423
97542	Under Physical Medicine and Rehabilitation Therapeutic Procedures	$427
97597	Under Active Wound Care Management	$1,073
97598	Under Active Wound Care Management	$357
97605	Under Active Wound Care Management	$563
97606	Under Active Wound Care Management	$666
97607	Under Active Wound Care Management	$ -
97608	Under Active Wound Care Management	$ -
97610	Under Active Wound Care Management	$1,722
97750	Under Physical Medicine and Rehabilitation Tests and Measurements	$483
97755	Under Physical Medicine and Rehabilitation Tests and Measurements	$498
97760	Under Orthotic Management and Training and Prosthetic Training	$600
97761	Under Orthotic Management and Training and Prosthetic Training	$518
97763	Under Orthotic Management and Training and Prosthetic Training	$619

Procedure Code	Modifier	Fee
97802	Under Medical Nutrition Therapy Procedures	$440
97803	Under Medical Nutrition Therapy Procedures	$383
97804	Under Medical Nutrition Therapy Procedures	$202
98925	Under Osteopathic Manipulative Treatment Procedures	$407
98926	Under Osteopathic Manipulative Treatment Procedures	$587
98927	Under Osteopathic Manipulative Treatment Procedures	$766
98928	Under Osteopathic Manipulative Treatment Procedures	$927
98929	Under Osteopathic Manipulative Treatment Procedures	$1,107
98940	Under Chiropractic Manipulative Treatment Procedures	$364
98941	Under Chiropractic Manipulative Treatment Procedures	$519
98942	Under Chiropractic Manipulative Treatment Procedures	$675
99091	Under Moderate (Conscious) Sedation	$736
99151	Under Moderate (Conscious) Sedation	$1,002
99152	Under Moderate (Conscious) Sedation	$666
99153	Under Moderate (Conscious) Sedation	$143
99155	Under Moderate (Conscious) Sedation	$1,241
99156	Under Moderate (Conscious) Sedation	$980
99157	Under Moderate (Conscious) Sedation	$747
99170	Under Other Medicine Services and Procedures	$2,034
99175	Under Other Medicine Services and Procedures	$334
99183	Under Other Medicine Services and Procedures	$1,446
99184	Under Other Medicine Services and Procedures	$2,854
99195	Under Other Medicine Services and Procedures	$1,328
99201	Under New Patient Office or Other Outpatient Services	$575
99202	Under New Patient Office or Other Outpatient Services	$964
99203	Under New Patient Office or Other Outpatient Services	$1,394
99204	Under New Patient Office or Other Outpatient Services	$2,118
99205	Under New Patient Office or Other Outpatient Services	$2,665
99211	Under Established Patient Office or Other Outpatient Services	$276
99212	Under Established Patient Office or Other Outpatient Services	$564
99213	Under Established Patient Office or Other Outpatient Services	$934
99214	Under Established Patient Office or Other Outpatient Services	$1,376
99215	Under Established Patient Office or Other Outpatient Services	$1,858
99217	Under Hospital Observation Care Discharge Services	$937
99218	Under New or Established Patient Initial Hospital Observation Care Services	$1,286
99219	Under New or Established Patient Initial Hospital Observation Care Services	$1,744
99220	Under New or Established Patient Initial Hospital Observation Care Services	$2,385
99221	Under New or Established Patient Initial Hospital Inpatient Care Services	$1,311
99222	Under New or Established Patient Initial Hospital Inpatient Care Services	$1,757
99223	Under New or Established Patient Initial Hospital Inpatient Care Services	$2,602
99224	Under Subsequent Hospital Observation Care Services	$513
99225	Under Subsequent Hospital Observation Care Services	$935
99226	Under Subsequent Hospital Observation Care Services	$1,342
99231	Under Subsequent Hospital Care	$504
99232	Under Subsequent Hospital Care	$933

Procedure Code	Modifier	Fee
99233	Under Subsequent Hospital Care	$1,335
99234	Under Observation or Inpatient Care Services (Including Admission and Discharge Services)	$1,711
99235	Under Observation or Inpatient Care Services (Including Admission and Discharge Services)	$2,168
99236	Under Observation or Inpatient Care Services (Including Admission and Discharge Services)	$2,796
99238	Under Hospital Discharge Services	$937
99239	Under Hospital Discharge Services	$1,378
99281	Under New or Established Patient Emergency Department Services	$273
99282	Under New or Established Patient Emergency Department Services	$533
99283	Under New or Established Patient Emergency Department Services	$797
99284	Under New or Established Patient Emergency Department Services	$1,512
99285	Under New or Established Patient Emergency Department Services	$2,227
99291	Under Critical Care Services	$3,528
99292	Under Critical Care Services	$1,580
99304	Under New or Established Patient Comprehensive Nursing Facility Assessments	$1,167
99305	Under New or Established Patient Comprehensive Nursing Facility Assessments	$1,667
99306	Under New or Established Patient Comprehensive Nursing Facility Assessments	$2,131
99307	Under Subsequent Nursing Facility Care	$570
99308	Under Subsequent Nursing Facility Care	$887
99309	Under Subsequent Nursing Facility Care	$1,173
99310	Under Subsequent Nursing Facility Care	$1,742
99315	Under Nursing Facility Discharge Services	$930
99316	Under Nursing Facility Discharge Services	$1,357
99318	Under Other Nursing Facility Services	$1,229
99324	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$706
99325	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$1,026
99326	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$1,780
99327	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$2,382
99328	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$2,786
99334	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$768
99335	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$1,211
99336	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$1,733
99337	Under Established Patient Domiciliary, Rest Home (eg, Boarding Home), or Custodial Care Services	$2,473
99341	Under Established Patient Home Services	$701
99342	Under Established Patient Home Services	$1,019
99343	Under Established Patient Home Services	$1,670
99344	Under Established Patient Home Services	$2,338
99345	Under Established Patient Home Services	$2,843

Procedure Code	Modifier	Fee
99347	Under Established Patient Home Services	$706
99348	Under Established Patient Home Services	$1,077
99349	Under Established Patient Home Services	$1,647
99350	Under Established Patient Home Services	$2,290
99354	Under Prolonged Service Without Direct Patient Contact	$1,670
99355	Under Prolonged Service Without Direct Patient Contact	$1,262
99356	Under Prolonged Service Without Direct Patient Contact	$1,179
99357	Under Prolonged Service Without Direct Patient Contact	$1,184
99358	Under Prolonged Service Without Direct Patient Contact	$1,431
99359	Under Prolonged Service Without Direct Patient Contact	$688
99406	Under Behavior Change Interventions, Individual Services	$186
99407	Under Behavior Change Interventions, Individual Services	$359
99415	Under Prolonged Clinical Staff Services With Physician or Other Qualified Health Care Professional Supervision	$130
99416	Under Prolonged Clinical Staff Services With Physician or Other Qualified Health Care Professional Supervision	$59
99460	Under Newborn Care Services	$1,223
99461	Under Newborn Care Services	$1,163
99462	Under Newborn Care Services	$532
99463	Under Newborn Care Services	$1,419
99464	Under Delivery/Birthing Room Attendance and Resuscitation Services	$958
99465	Under Delivery/Birthing Room Attendance and Resuscitation Services	$1,865
99466	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$3,050
99467	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$1,525
99468	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$11,753
99469	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$5,088
99471	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$10,173
99472	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$5,303
99475	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$7,165
99476	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$4,438
99477	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$4,461
99478	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$1,753
99479	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$1,589
99480	Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services	$1,530
99483	Cognitive Assessment and Care Planing Services	$3,036
99484	General Behavioral Helath Integration Care Management	$611
99487	Care Management Evaluation and Management Services	$1,191

Procedure Code	Modifier	Fee
99489	Care Management Evaluation and Management Services	$593
99490	Care Management Evaluation and Management Services	$539
99492	Psychiatric Collaborative Care Management Services	$2,030
99493	Psychiatric Collaborative Care Management Services	$1,622
99494	Psychiatric Collaborative Care Management Services	$837
99495	Under Transitional Care Evaluation and Management Services	$2,099
99496	Under Transitional Care Evaluation and Management Services	$2,975
99497	Under Advance Care Planning Evaluation and Management Services	$1,081
99498	Under Advance Care Planning Evaluation and Management Services	$953

Section V, Service Specific Review Criteria
Non-Hospital Based Ambulatory Surgery

Criterion 1110.235(c)(10), Assurances

Attached at Attachment – 24H is a letter from David A. Shifrin, M.D., Manager, Chicago Cosmetic Surgery Institute, LLC d/b/a South Loop Surgery Center, certifying that a peer review program exists or will be implemented for ASTC services and South Loop Surgery Center will meet the State Board utilization standard by the second year after project completion.

April 13, 2020

Debra Savage
Chair
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, IL 62761

Dear Chair Savage:

Pursuant to 77 Ill. Admin. Code § 1110.235(c)(10), I hereby certify that a peer review program exists or will be implemented that evaluates whether patient outcomes are consistent with quality standards established by professional organizations for the ASTC services, and if outcomes do not meet or exceed those standards, that a quality improvement plan will be initiated.

I further certify that by the second year of operation after project completion, the annual utilization of operating rooms will meet or exceed the utilization standard specified in 77 Ill. Admin. Code § 1100.

Sincerely,

David A. Shifrin, M.D.
Manager
The Chicago Cosmetic Surgery Institute LLC
d/b/a South Loop Surgery Center
RES Investments LLC

Subscribed and sworn to me
This ___ day of _____, 2020

_____
Notary Public

Section VI, Availability of Funds
Criterion 1120.120

Copies of 2018 and 2019 Chicago Cosmetic Surgery Institute, LLC d/b/a South Loop Surgery Center financial statements as well as the lease between RES Investments LLC and Chicago Cosmetic Surgery Institute, LLC are attached at Attachments – 33A and 33B.

2:00 PM
04/16/20
Cash Basis

Chicago Cosmetic Surgery Institute LLC
Profit & Loss
January through December 2019

		Jan - Dec 19
Ordinary Income/Expense		
Income		
Anesthesia Fee Income		248,165.00
Rental Income		415,989.55
Total Income		664,154.55
Expense		
Advertising and Promotion		1,296.00
Automobile Expense		16.07
Computer and Internet Expenses		398.00
Dues and Subscriptions		2,005.00
Finance Charge		0.00
Late Fees/Penalties		0.00
Meals		587.87
Medical Records and Supplies		
Anesthesia Supplies	405.00	
Medical Supplies	81,297.44	
Small Medical Equipment	455.81	
Surgical Instruments	7,612.74	
Surgical Supplies	4,616.28	
Total Medical Records and Supplies		94,387.27
Office Expense		687.50
Office Supplies		2,882.60
Professional Fees		
Accounting	881.75	
Anesthesiologists	327,532.50	
Subcontractors	67,255.00	
Total Professional Fees		395,669.25
Repairs and Maintenance		12,582.21
Travel Expense		1,937.28
Uniforms		4,534.96
Total Expense		516,984.01
Net Ordinary Income		147,170.54
Other Income/Expense		
Other Income		
Other Income		214.81
Total Other Income		214.81
Net Other Income		214.81
Net Income		**147,385.35**

2:01 PM
04/16/20
Accrual Basis

Chicago Cosmetic Surgery Institute LLC
Unaudited Balance Sheet
As of March 31, 2020

	Mar 31, 20
ASSETS	
Current Assets	
Checking/Savings	
Evergreen Bank Group	22,076.82
Total Checking/Savings	22,076.82
Total Current Assets	22,076.82
Fixed Assets	
Anesthesia Equipment	14,895.00
Medical Equipment	94,229.83
Total Fixed Assets	109,124.83
Other Assets	
Due From RES Investments	3,060.00
Total Other Assets	3,060.00
TOTAL ASSETS	**134,261.65**
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	
AMEX _ 2006	380.00
Total Credit Cards	380.00
Total Current Liabilities	380.00
Total Liabilities	380.00
Equity	
Member Contribution	63,626.30
Members Draw	-100,103.93
Members Equity	208,495.02
Net Income	-38,135.74
Total Equity	133,881.65
TOTAL LIABILITIES & EQUITY	**134,261.65**

4:19 PM
04/16/20
Cash Basis

Chicago Cosmetic Surgery Institute LLC
Unaudited Profit & Loss
January through December 2018

		Jan - Dec 18
Ordinary Income/Expense		
Income		
Rental Income		222,264.78
Total Income		222,264.78
Expense		
Automobile Expense		986.61
Computer and Internet Expenses		78.28
Dues and Subscriptions		450.00
Laboratory Fees		1,733.78
Meals		58.00
Medical Records and Supplies		
Medical Supplies	51,513.42	
Small Medical Equipment	68.41	
Surgical Instruments	458.22	
Surgical Supplies	630.45	
Total Medical Records and Supplies		52,670.50
Office Expense		75.00
Office Supplies		115.46
Professional Fees		
Anesthesiologists	57,189.98	
Subcontractors	21,600.00	
Total Professional Fees		78,789.98
Uniforms		1,177.56
Total Expense		136,135.17
Net Ordinary Income		86,129.61
Net Income		**86,129.61**

4:18 PM
04/16/20
Accrual Basis

Chicago Cosmetic Surgery Institute LLC
Unaudited Balance Sheet
As of December 31, 2018

	Dec 31, 18
ASSETS	
Current Assets	
Checking/Savings	
Evergreen Bank Group	109,205.72
Total Checking/Savings	109,205.72
Total Current Assets	109,205.72
Fixed Assets	
Anesthesia Equipment	14,895.00
Medical Equipment	19,571.68
Total Fixed Assets	34,466.68
TOTAL ASSETS	**143,672.40**
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	
AMEX _ 2006	27,551.43
Total Credit Cards	27,551.43
Total Current Liabilities	27,551.43
Total Liabilities	27,551.43
Equity	
Member Contribution	55,011.30
Members Draw	-25,019.94
Net Income	86,129.61
Total Equity	116,120.97
TOTAL LIABILITIES & EQUITY	**143,672.40**

LEASE

THIS LEASE is effective as of this 1st day of July, 2018 (the "Effective Date"), by and between RES Investments LLC, an Illinois limited liability company ("Landlord"), and Chicago Cosmetic Surgery Institute LLC, an Illinois limited liability company ("Tenant").

ARTICLE 1 - LEASE OF PREMISES

Section 1.01. Basic Lease Provisions and Definitions.

(a) **Leased Premises**: The real estate premises described on **Exhibit A** attached hereto (the "Real Estate"), constituting a portion of the buildings and improvements (the "Building") commonly known as 2335 S. Michigan Avenue, Chicago, Illinois 60616 (collectively, the "Leased Premises")

(b) **Commencement Date**: The Effective Date.

(c) **Lease Term**: The period beginning on July 1, 2018 and ending on December 31, 2030 (the "Lease Term").

(d) **Permitted Use**: The operation of a cosmetic surgery center, a related medical practice and/or related medical services and uses ancillary thereto.

(e) **Notices**: Addresses for notices are as follows:

Landlord:	RES Investments LLC 2335 S. Michigan Avenue Chicago, Illinois 60616 Attn: David Shifrin
Tenant:	Chicago Cosmetic Surgery Institute LLC 2335 S. Michigan Avenue Chicago, Illinois 60616 Attn: David Shifrin

(f) **Payments**: All payments made by Tenant to Landlord hereunder shall be made by electronic payment method, as per instructions provided by Landlord.

(g) **Exhibits**: Exhibit A Legal Description of Leased Premises

Section 1.02. Lease of Premises. Subject to the terms and conditions in this Lease, Landlord hereby leases to Tenant and Tenant hereby leases from Landlord the Leased Premises for the Lease Term as further set forth herein.

ARTICLE 2 - TERM AND POSSESSION

Section 2.01. Lease Term. The Lease Term shall commence on the Effective Date (the "Commencement Date"), and shall end, unless terminated sooner in accordance with the terms of this Lease, upon expiration of the Lease Term.

Section 2.02. Condition of the Leased Premises. Landlord shall deliver possession of the Leased Premises to Tenant in its "**AS-IS, WHERE IS**" condition. Tenant has inspected the Leased Premises, including all electrical, mechanical and communications systems therein, or has had an opportunity to do so, and agrees to accept the same "**AS-IS, WHERE IS**" without any agreements, representations, understandings or obligations on the part of Landlord to perform any alterations, repairs or improvements.

Section 2.03. Surrender of the Leased Premises. Upon the expiration or earlier termination of this Lease, Tenant shall, at its sole cost and expense, immediately: (a) surrender the Leased Premises to Landlord in broom-clean condition and in good order, condition and repair; (b) remove from the Leased Premises or where located (i) Tenant's Property (as defined in Section 8.01 below), and (ii) any alterations required to be removed pursuant to Section 7.02 below; (c) repair any damage caused by any such removal; and (d) restore the Leased Premises to the condition existing upon the Commencement Date, reasonable wear and tear excepted. All of Tenant's Property that is not removed within ten (10) days following Landlord's written demand therefor shall be conclusively deemed to have been abandoned and Landlord shall be entitled to dispose of such property at Tenant's cost without incurring any liability to Tenant. This Section 2.03 shall survive the expiration or any earlier termination of this Lease.

Section 2.04. Holding Over. If Tenant retains possession of the Leased Premises after the expiration of the Lease Term or earlier termination of this Lease, Tenant shall be a tenant at sufferance at one hundred fifty (150%) of the monthly Base Rent due during the Lease Term for the Leased Premises, and otherwise upon the terms, covenants and conditions herein specified, so far as applicable. Acceptance by Landlord of Base Rent after such expiration or earlier termination shall not result in a renewal of this Lease, nor shall such acceptance create a month-to-month tenancy. In the event a month-to-month tenancy is created by operation of law, either party shall have the right to terminate such month-to-month tenancy upon thirty (30) days' prior written notice to the other, whether or not said notice is given on the rent paying date. This Section 2.04 shall in no way constitute consent by Landlord to any holding over by Tenant upon the expiration or earlier termination of this Lease, nor limit Landlord's remedies in such event.

ARTICLE 3 - RENT

Section 3.01. Base Rent. Tenant shall pay Landlord base rent for the use and occupancy of the Leased Premises during the Lease Term ("Base Rent") in the monthly amount of $11,333 per month. Rent for any partial month during the Lease Term shall be prorated based on the actual number of days in such month. Base Rent shall be payable monthly, in advance, without demand, deduction or offset, on the Commencement Date and on or before the first day of each and every calendar month thereafter during the Lease Term. Tenant shall be responsible for delivering Base Rent to the payment address set forth in Section 1.01(e) above in accordance with this Section 3.01.

Section 3.02. Payment of Additional Rent.

(a) This Lease is and shall be deemed and construed to be a triple net lease and the Base Rent specified herein shall be net to Landlord in each month during the Lease Term. Except as otherwise set forth herein, Tenant shall pay all costs, expenses and obligations of every kind whatsoever relating to the Leased Premises which may arise or become due during the Lease Term and agrees to indemnify, defend and hold harmless Landlord against any such costs, expenses and obligations. Any amount required to be paid by Tenant hereunder (in addition to Base Rent) and any charges or expenses incurred by Landlord on behalf of Tenant under the terms of this Lease shall be considered "Additional Rent" payable in the same manner and upon the same terms and conditions as Base Rent reserved hereunder, except as set forth herein to the contrary. Base Rent, Additional Rent and any other amounts which Tenant is or becomes obligated to pay Landlord under this Lease or other agreement entered in connection herewith, are sometimes referred to collectively herein as "Rent." Any failure on the part of Tenant to pay such Rent when and as the same shall become due shall entitle Landlord to the remedies available to it for non-payment of Base Rent.

(b) Tenant shall be responsible for the payment of all real estate tax or assessment or service payments in lieu thereof, and any license fee, commercial rental tax, improvement bond or other similar charge or tax (other than inheritance, personal income or estate taxes) imposed upon the Building or Real Estate during the Lease Term by any authority having the power to so charge or tax ("Real Estate Taxes"). Notwithstanding the foregoing, Landlord and Tenant agree that Tenant's obligation to pay its pro rata share of Real Estate Taxes for the Leased Premises during the Lease Term is included in the Base Rent hereunder and Landlord shall be responsible for the timely payment of all Real Estate Taxes for the Leased Premises during the Term without further reimbursement from Tenant.

Section 3.03. Late Charges. Tenant acknowledges that Landlord shall incur certain additional unanticipated administrative and legal costs and expenses if Tenant fails to pay timely any payment required hereunder. Therefore, in addition to the other remedies available to Landlord hereunder, if any payment required to be paid by Tenant to Landlord hereunder shall become overdue, such unpaid amount shall bear interest from the due date thereof to the date of payment at the prime rate of interest, as reported in the Wall Street Journal (the "Prime Rate") plus six percent (6%) per annum.

ARTICLE 4 – INTENTIONALLY OMITTED

ARTICLE 5 – OCCUPANCY AND USE

Section 5.01. Use. Tenant shall use the Leased Premises for the Permitted Use and for no other purpose without the prior written consent of Landlord.

Section 5.02. Covenants of Tenant Regarding Use. Tenant shall: (i) use and maintain the Leased Premises and conduct its business thereon in a safe, careful, reputable and lawful manner; (ii) comply with all covenants that encumber the Leased Premises and all laws, rules, regulations, orders, ordinances, directions and requirements of any governmental authority or agency, now in

force or which may hereafter be in force, including, without limitation, those which shall impose upon Landlord or Tenant any duty with respect to or triggered by a change in the use or occupation of, or any improvement or alteration to, the Leased Premises; and (iii) comply with and obey all reasonable directions, rules and regulations promulgated by Landlord from time to time, as may be modified by Landlord on reasonable notice to Tenant. Tenant shall not use the Leased Premises, nor allow the Leased Premises to be used, for any purpose or in any manner that would: (i) invalidate any policy of insurance now or hereafter carried by Landlord on the Building; or (ii) increase the rate of premiums payable on any such insurance policy unless Tenant reimburses Landlord for any increase in premium charged.

Section 5.03. Landlord's Rights Regarding Use. Without limiting any of Landlord's rights specified elsewhere in this Lease, Landlord, its agents, employees and contractors and any mortgagee of the Leased Premises shall have the right to enter any part of the Leased Premises at reasonable times upon reasonable notice (except in the event of an emergency where no notice shall be required) for the purposes of examining or inspecting the same (including, without limitation, testing to confirm Tenant's compliance with this Lease), showing the same to prospective purchasers, mortgagees or tenants, and making such repairs, alterations or improvements to the Leased Premises or the Leased Premises as Landlord may deem necessary or desirable. Landlord shall incur no liability to Tenant for such entry, nor shall such entry constitute an eviction of Tenant or a termination of this Lease, or entitle Tenant to any abatement of Rent therefor. Without limiting the foregoing, Landlord covenants and agrees that in exercising any of its rights under this Section 5.03, Landlord shall use reasonable efforts to minimize any interference with Tenant's use of the Leased Premises for the Permitted Use.

ARTICLE 6 – UTILITIES

During the Lease Term, Tenant shall obtain in its own name and pay directly to the appropriate supplier the cost of all utilities and services serving the Leased Premises. Landlord shall not be liable in damages or otherwise for any failure or interruption of any utility or other service and no such failure or interruption shall entitle Tenant to terminate this Lease or withhold sums due hereunder.

ARTICLE 7 – REPAIRS, MAINTENANCE AND ALTERATIONS

Section 7.01. Repair and Maintenance Obligations. During the Lease Term, Tenant shall make all necessary repairs, replacements and maintenance to the Leased Premises, including, without limitation, the electrical, plumbing and other mechanical systems, plate glass, floors, windows and doors, interior and exterior lighting, walls, roof, foundation, structural frame of the Building and the parking and landscaped areas located on the Real Estate, provided that during the Additional Term, Landlord shall make all necessary repairs, replacements and maintenance to the exterior walls, roof, foundation, structural frame of the Building and the parking and landscaped areas located on the Land, provided however, to the extent any such repairs, replacements or maintenance are required because of the negligence, misuse or default of Tenant, its employees, agents, contractors, customers or invitees, Landlord shall make such repairs at Tenant's sole expense.

Section 7.02. Alterations. Tenant shall not permit alterations in or to the Leased Premises unless and until Landlord has approved the plans therefor in writing, which Landlord may withhold in Landlord's sole discretion. As a condition of any approval, Landlord may, as a part of the approval process, require Tenant to remove the alterations and restore the Leased Premises upon termination or expiration of this Lease; otherwise, all such alterations shall at Landlord's option become a part of the realty and the property of Landlord, and shall not be removed by Tenant. Tenant must construct all approved alterations or cause all approved alterations to be constructed: (a) in accordance with all applicable laws, regulations and building codes; (b) in a good and workmanlike manner and of quality equal to or better than the original construction of the Building; (c) promptly by a contractor approved by Landlord in writing; and (d) in full compliance with all of Landlord's rules and regulations applicable to third party contractors, subcontractors and suppliers performing work at the Leased Premises. No person shall be entitled to any lien derived through or under Tenant for any labor or material furnished to the Leased Premises, and nothing in this Lease shall be construed to constitute Landlord's consent to the creation of any lien. Tenant will pay the cost and expense of all alterations, including, without limitation, a reasonable charge for Landlord's review, inspection and engineering time for alterations, and for any painting, restoring or repairing of the Leased Premises or the Building necessitated by the alterations. Prior to commencing the alterations, Tenant will deliver the following to Landlord in form and amount reasonably satisfactory to Landlord: (a) demolition (if applicable) and payment and performance bonds; (b) builder's "all risk" insurance in an amount at least equal to the replacement value of the alterations; and (c) evidence that Tenant and each of Tenant's contractors have in force liability insurance insuring against construction related risks in at least the form, amounts and coverages required of Tenant by Landlord in its sole discretion. The insurance policies described in clauses (b) and (c) of this section must name Landlord and Landlord's lender (if any) as additional insureds, specifically including completed operations. Landlord may inspect construction of the alterations at any time. Immediately after completing the alterations, Tenant will furnish Landlord with contractor affidavits and full and final lien waivers covering all labor and materials expended and used in connection with the alterations.

Section 7.03. Liens. Tenant will keep the Leased Premises and Real Estate free from any mechanics', materialmens', designers' or other liens arising out of any work performed, materials furnished or obligations incurred by or for Tenant or any person or entity claiming by, through or under Tenant, including but not limited to any Tenant's Work or alterations. If any such liens are filed and Tenant, within fifteen (15) days after such filing, does not release the same of record or provide Landlord with a bond or other security satisfactory to Landlord protecting Landlord and the Leased Premises and Real Estate against such liens, Landlord may, without waiving its rights and remedies based upon such breach by Tenant and without releasing Tenant from any obligation under this Lease, cause such liens to be released by any means Landlord deems proper, including, but not limited to, paying the claim giving rise to the lien or posting security to cause the discharge of the lien. In such event, Tenant will reimburse Landlord, as Additional Rent, for all amounts Landlord pays (including, without limitation, reasonable attorneys' fees and costs). To the fullest extent allowable under the Laws, Tenant releases and will indemnify, protect, defend (with counsel reasonably acceptable to Landlord) and hold harmless the Landlord and Landlord's mortgagee and the Leased Premises from and against any claims in any manner relating to or arising out of any alterations or any other work performed, materials furnished or obligations incurred by or for Tenant or any person or entity claiming by, through or under Tenant.

ARTICLE 8 – INDEMNITY AND INSURANCE

Section 8.01. Release. All of Tenant's trade fixtures, merchandise, inventory, special fire protection equipment, telecommunication and computer equipment, supplemental air conditioning equipment and all other personal property in or about the Leased Premises, the Building or the Real Estate, which is deemed to include the trade fixtures, merchandise, inventory and personal property of others located in or about the Leased Premises or Real Estate at the invitation, direction or acquiescence (express or implied) of Tenant (all of which property shall be referred to herein, collectively, as "Tenant's Property"), shall be and remain at Tenant's sole risk. Landlord shall not be liable to Tenant or to any other person for, and Tenant hereby releases Landlord (and its affiliates, property managers and mortgagees) from (a) any and all liability for theft or damage to Tenant's Property, and (b) any and all liability for any injury to Tenant or its employees, agents, contractors, guests and invitees in or about the Leased Premises, the Building or the Land, except to the extent of personal injury caused directly by the negligence or willful misconduct of Landlord, its agents, employees or contractors. Nothing contained in this Section 8.01 shall limit (or be deemed to limit) the waivers contained in Section 8.06 below. In the event of any conflict between the provisions of Section 8.06 below and this Section 8.01, the provisions of Section 8.06 shall prevail. This Section 8.01 shall survive the expiration or earlier termination of this Lease.

Section 8.02. Indemnification by Tenant. Tenant shall protect, defend, indemnify and hold Landlord, its agents, employees and contractors of all tiers harmless from and against any and all claims, damages, demands, penalties, costs, liabilities, losses, and expenses (including reasonable attorneys' fees and expenses at the trial and appellate levels) to the extent (a) arising out of or relating to any act, omission, negligence, or willful misconduct of Tenant or Tenant's agents, employees, contractors, customers or invitees in or about the Leased Premises, the Building or the Real Estate, (b) arising out of or relating to any of Tenant's Property, or (c) arising out of any other act or occurrence within the Leased Premises, in all such cases except to the extent of personal injury caused directly by the gross negligence or willful misconduct of Landlord, its agents, employees or contractors. Nothing contained in this Section 8.02 shall limit (or be deemed to limit) the waivers contained in Section 8.06 below. In the event of any conflict between the provisions of Section 8.06 below and this Section 8.02, the provisions of Section 8.06 shall prevail. This Section 8.02 shall survive the expiration or earlier termination of this Lease.

Section 8.03. Indemnification by Landlord. Landlord shall protect, defend, indemnify and hold Tenant, its agents, employees and contractors of all tiers harmless from and against any and all claims, damages, demands, penalties, costs, liabilities, losses and expenses (including reasonable attorneys' fees and expenses at the trial and appellate levels) to the extent arising out of or relating to any negligence or willful misconduct of Landlord or Landlord's agents, employees or contractors. Nothing contained in this Section 8.03 shall limit (or be deemed to limit) the waivers contained in Section 8.06 below. In the event of any conflict between the provisions of Section 8.06 below and this Section 8.03, the provisions of Section 8.06 shall prevail. This Section 8.03 shall survive the expiration or earlier termination of this Lease.

Section 8.04. Tenant's Insurance.

(a) During the Lease Term (and any period of early entry or occupancy or holding over by Tenant, if applicable), Tenant shall maintain the following types of insurance, in the amounts specified below:

(i) Liability Insurance. Commercial General Liability Insurance, ISO Form CG 00 01, or its equivalent, covering Tenant's use of the Leased Premises against claims for bodily injury or death or property damage, which insurance shall be primary and non-contributory and shall provide coverage on an occurrence basis with a per occurrence limit in an amount satisfactory to Landlord, for each policy year, which limit may be satisfied by any combination of primary and excess or umbrella per occurrence policies.

(ii) Property Insurance. Special Form Insurance in the amount of the full replacement cost of Tenant's Property (including, without limitation, alterations or additions performed by Tenant pursuant hereto), which insurance shall waive coinsurance limitations.

(b) All insurance required to be carried by Tenant hereunder shall (i) be issued by one or more insurance companies reasonably acceptable to Landlord, licensed to do business in the State in which the Leased Premises is located and having an AM Best's rating of A IX or better, and (ii) provide that said insurance shall not be materially changed, canceled or permitted to lapse without written notice to Landlord. In addition, upon Landlord's request, Tenant shall name Landlord, Landlord's managing agent, and any mortgagee requested by Landlord, as additional insureds under its commercial general liability, excess and umbrella policies (but only to the extent of the limits required hereunder). On or before the Commencement Date (or the date of any earlier entry or occupancy by Tenant), and thereafter, within thirty (30) days prior to the expiration of each such policy, in each case upon Landlord's request, Tenant shall furnish Landlord with certificates of insurance in the form of ACORD 25 (or other evidence of insurance reasonably acceptable to Landlord), evidencing all required coverages, and that with the exception of Worker's Compensation insurance, such insurance is primary and non-contributory. Upon Tenant's receipt of a request from Landlord, Tenant shall provide Landlord with copies of all insurance policies, including all endorsements, evidencing the coverages required hereunder. If Tenant fails to carry such insurance and furnish Landlord with such certificates of insurance or copies of insurance policies (if applicable), Landlord may obtain such insurance on Tenant's behalf and Tenant shall reimburse Landlord upon demand for the cost thereof as Additional Rent. Landlord reserves the right from time to time to require Tenant to obtain higher minimum amounts or different types of insurance if it becomes customary for other landlords of similar buildings in the area to require similar sized tenants in similar industries to carry insurance of such higher minimum amounts or of such different types.

Section 8.05. Landlord's Insurance. During the Lease Term, Landlord shall maintain the following types of insurance, in the amounts specified below:

(a) Liability Insurance. Commercial General Liability Insurance, ISO Form CG 00 01, or its equivalent, covering the Landlord against claims for bodily injury or death and property damage, which insurance shall be primary and non-contributory and shall provide coverage on an occurrence basis with a per occurrence limit of an amount satisfactory to Landlord for each policy

year, which limit may be satisfied by any combination of primary and excess or umbrella per occurrence policies.

(b) Property Insurance. Special Form Insurance in the amount of the full replacement cost of the Building, but excluding Tenant's Property and any other items required to be insured by Tenant pursuant to Section 8.04 above.

Section 8.06. Waiver of Subrogation. Notwithstanding anything contained in this Lease to the contrary, Landlord (and its affiliates, property managers and mortgagees) and Tenant (and its affiliates) hereby waive any rights each may have against the other on account of any loss of or damage to their respective property, the Leased Premises, its contents, or other portions of the Leased Premises or Real Estate arising from any risk which is required to be insured against by Sections 8.04(a)(ii), 8.04(a)(iii) and 8.05(b) above. The special form property insurance policies and worker's compensation insurance policies maintained by Landlord and Tenant as provided in this Lease shall include an endorsement containing an express waiver of any rights of subrogation by the insurance company against Landlord and Tenant, as applicable.

ARTICLE 9 – CASUALTY

Section 9.01. Landlord's Rights. If all or any part of the Building and/or the Leased Premises is(are) damaged by fire or other casualty (a "Casualty"), and if Landlord makes a good faith determination that: (a) restoring the Leased Premises would be uneconomical; or (b) Landlord is required to pay any insurance proceeds arising out of the Casualty to Landlord's mortgagee, then Landlord may terminate this Lease by giving Tenant written notice of Landlord's election to terminate (the "Casualty Termination Notice") within sixty (60) days after the Casualty has occurred, and Rent will abate as of the date of the Casualty. Such termination shall be effective sixty (60) days after the date of the Casualty Termination Notice.

Section 9.02. Repair Obligation. If Landlord elects not to terminate this Lease following a Casualty, then Landlord, within a reasonable time after such Casualty, will proceed with reasonable diligence to repair, restore or rehabilitate the Building and/or the Leased Premises, as the case may be, to substantially the same condition as they existed immediately before such Casualty. However, Landlord will not be required to repair or replace any of the furniture, equipment, fixtures, and other leasehold improvements which may have been placed by or at the request of Tenant and required to be insured by Tenant, and Landlord's obligation to repair or restore the Building and/or the Leased Premises will be limited to the extent of the insurance proceeds actually received by Landlord for the Casualty in question. In the event that Landlord elects not to terminate the Lease and Landlord proceeds to repair the Building and/or the Leased Premises, then Tenant must apply to the replacement or restoration of the furniture, equipment, fixtures and other improvements in the Leased Premises (if replacement or restoration is necessary because of the Casualty) any proceeds of insurance that it may have received from its policy(ies) on account of the Casualty. During such repair or rebuilding of the Building and/or the Leased Premises, Rent for the portion of the Leased Premises rendered untenantable by the damage will be abated on a reasonable basis determined by Landlord from the date of damage until the completion of the repair, restoration or rehabilitation, unless the Casualty was caused by Tenant or any of Tenant's affiliates, in which event Tenant shall continue to pay Rent without abatement.

ARTICLE 10 – EMINENT DOMAIN

If all or any substantial part of the Building or Real Estate shall be acquired by the exercise of eminent domain, Landlord may terminate this Lease by giving written notice to Tenant on or before the date possession thereof is so taken. If all or any part of the Leased Premises shall be acquired by the exercise of eminent domain so that the Leased Premises shall become impractical for Tenant to use for the Permitted Use, Tenant may terminate this Lease by giving written notice to Landlord as of the date possession thereof is so taken. All damages awarded shall belong to Landlord; provided, however, that Tenant may pursue dislocation damages if such amount is not subtracted from Landlord's award.

ARTICLE 11 – ASSIGNMENT AND SUBLEASE

Tenant shall not assign this Lease or sublet the Leased Premises in whole or in part without Landlord's prior written consent. In the event of any permitted assignment or subletting, Tenant shall remain primarily liable hereunder, and any extension, expansion, rights of first offer, rights of first refusal or other options granted to Tenant under this Lease shall be rendered void and of no further force or effect. The acceptance of Rent from any other person shall not be deemed to be a waiver of any of the provisions of this Lease or to be a consent to the assignment of this Lease or the subletting of the Leased Premises. Any assignment or sublease consented to by Landlord shall not relieve Tenant (or its assignee) from obtaining Landlord's consent to any subsequent assignment or sublease. By way of example and not limitation, Landlord shall be deemed to have reasonably withheld consent to a proposed assignment or sublease if in Landlord's opinion: (i) the Leased Premises are or may be in any way adversely affected; (ii) the business reputation of the proposed assignee or subtenant is unacceptable; (iii) the financial worth of the proposed assignee or subtenant is insufficient to meet the obligations hereunder, or (iv) the prospective assignee or subtenant is a bona-fide third-party prospective tenant of Landlord. If Landlord refuses to give its consent to any proposed assignment or subletting, Landlord may, at its option, within thirty (30) days after receiving a request to consent, terminate this Lease by giving Tenant thirty (30) days' prior written notice of such termination, whereupon each party shall be released from all further obligations and liability hereunder, except those which expressly survive the termination of this Lease.

ARTICLE 12 – ESTOPPEL CERTIFICATES AND SNDA

Section 12.01. Estoppel Certificate. Within ten (10) days following receipt of a written request from Landlord, Tenant shall execute and deliver to Landlord, without cost to Landlord, an estoppel certificate in such form as Landlord may reasonably request certifying: (a) that this Lease is in full force and effect and unmodified or stating the nature of any modification; (b) the date to which Rent has been paid; (c) that there are not, to Tenant's knowledge, any uncured defaults or specifying such defaults if any are claimed; and (d) any other matters or state of facts reasonably required respecting the Lease. Such estoppel may be relied upon by Landlord and by any purchaser or mortgagee of the Leased Premises.

Section 12.02. Subordination. This Lease is and shall be expressly subject and subordinate at all times to the lien of any present or future mortgage or deed of trust encumbering fee title to

the Leased Premises. If any such mortgage or deed of trust be foreclosed, upon request of the mortgagee or beneficiary ("Landlord's Mortgagee"), as the case may be, Tenant will attorn to the purchaser at the foreclosure sale. The foregoing provisions are declared to be self-operative and no further instruments shall be required to effect such subordination and/or attornment; provided, however, that subordination of this Lease to any present or future mortgage or trust deed shall be conditioned upon the mortgagee, beneficiary, or purchaser at foreclosure, as the case may be agreeing that Tenant's occupancy of the Leased Premises and other rights under this Lease shall not be disturbed by reason of the foreclosure of such mortgage or trust deed, as the case may be, so long as Tenant is not in default under this Lease. Within ten (10) days following receipt of a written request from Landlord, Tenant shall execute and deliver to Landlord, without cost, any instrument that Landlord deems reasonably necessary or desirable to confirm the subordination of this Lease.

ARTICLE 13 – DEFAULT AND REMEDY

Section 13.01. Default. The occurrence of any of the following shall be a "Default":

(a) Tenant fails to make any payment of Rent within five (5) days after the same is due.

(b) Tenant fails to perform or observe any other term, condition, covenant or obligation required under this Lease for a period of thirty (30) days after written notice thereof from Landlord.

(c) Tenant shall vacate or abandon the Leased Premises, or fail to occupy the Leased Premises or any substantial portion thereof for a period of thirty (30) days without the express written permission of the Landlord.

(d) Tenant shall assign or sublet all or a portion of the Leased Premises in contravention of the provisions of Article 11 of this Lease.

(e) All or substantially all of Tenant's assets in the Leased Premises or Tenant's interest in this Lease are attached or levied under execution (and Tenant does not discharge the same within sixty (60) days thereafter); a petition in bankruptcy, insolvency or for reorganization or arrangement is filed by or against Tenant (and Tenant fails to secure a stay or discharge thereof within sixty (60) days thereafter); Tenant is insolvent and unable to pay its debts as they become due; Tenant makes a general assignment for the benefit of creditors; Tenant takes the benefit of any insolvency action or law; the appointment of a receiver or trustee in bankruptcy for Tenant or its assets if such receivership has not been vacated or set aside within thirty (30) days thereafter; or, dissolution or other termination of Tenant's corporate charter if Tenant is a corporation.

In addition to the defaults described above, the parties agree that if Tenant receives written notice of a violation of the performance of any (but not necessarily the same) term or condition of this Lease three (3) or more times during any twelve (12) month period, regardless of whether such violations are ultimately cured, then such conduct shall, at Landlord's option, represent a separate Default.

Section 13.02. Remedies. Upon the occurrence of any Default, Landlord shall have the following rights and remedies, in addition to those stated elsewhere in this Lease and those allowed by law or in equity, any one or more of which may be exercised without further notice to Tenant:

(a) Landlord may enter the Leased Premises and cure any Default of Tenant, and Tenant shall reimburse Landlord as Additional Rent for any costs and expenses that Landlord thereby incurs; and Landlord shall not be liable to Tenant for any loss or damage that Tenant may sustain by reason of Landlord's action.

(b) Landlord may terminate this Lease by giving Tenant notice of termination, in which event this Lease shall expire and terminate on the date specified in such notice of termination and all rights of Tenant under this Lease and in and to the Leased Premises shall terminate. Tenant shall remain liable for all obligations under this Lease arising up to the date of such termination, and Tenant shall surrender the Leased Premises to Landlord on the date specified in such notice. Furthermore, Tenant shall be liable to Landlord for the unamortized balance of any leasehold improvement allowance and brokerage fees paid in connection with the Lease.

(c) Without terminating this Lease, Landlord may terminate Tenant's right to possession of the Leased Premises, and thereafter, neither Tenant nor any person claiming under or through Tenant shall be entitled to possession of the Leased Premises. In such event, Tenant shall immediately surrender the Leased Premises to Landlord, and Landlord may re-enter the Leased Premises and dispossess Tenant and any other occupants of the Leased Premises by any lawful means and may remove their effects, without prejudice to any other remedy that Landlord may have. Upon termination of possession, Landlord may re-let all or any part thereof as the agent of Tenant for a term different from that which would otherwise have constituted the balance of the Lease Term and for rent and on terms and conditions different from those contained herein, whereupon Tenant shall be immediately obligated to pay to Landlord an amount equal to: (i) the difference between the rent provided for herein and that provided for in any lease covering a subsequent re-letting of the Leased Premises, for the period which would otherwise have constituted the balance of the Lease Term had this Lease not been terminated (said period being referred to herein as the "Remaining Term"); (ii) the costs of recovering possession of the Leased Premises and all other expenses, loss or damage incurred by Landlord by reason of Tenant's Default ("Default Damages"), which shall include, without limitation, expenses of preparing the Leased Premises for re-letting, demolition, repairs, tenant finish improvements, brokers' commissions and attorneys' fees; and (iii) all unpaid Base Rent and Additional Rent that accrued prior to the date of termination of possession, plus any interest and late fees due hereunder (the "Prior Obligations"). Neither the filing of any dispossessory proceeding nor an eviction of personalty in the Leased Premises shall be deemed to terminate the Lease.

(d) Landlord may terminate this Lease and recover from Tenant all damages Landlord may incur by reason of Tenant's default, including, without limitation, an amount which, at the date of such termination is equal to the sum of the following: (i) the value of the excess, if any, discounted at the prime rate of interest (as reported in the *Wall Street Journal*), of: (A) the Base Rent, Additional Rent and all other sums that would have been payable hereunder by Tenant for the Remaining Term; less (B) the aggregate reasonable rental value of the Leased Premises for the Remaining Term, as determined by a real estate broker licensed in the State of Illinois who has at

least ten (10) years of experience; (ii) all of Landlord's Default Damages; and (iii) all Prior Obligations. Landlord and Tenant acknowledge and agree that the payment of the amount set forth in clause (i) above shall not be deemed a penalty, but shall merely constitute payment of liquidated damages, it being understood that actual damages to Landlord are extremely difficult, if not impossible, to ascertain. It is expressly agreed and understood that all of Tenant's liabilities and obligations set forth in this subsection (d) shall survive termination.

(e) With or without terminating this Lease, declare immediately due and payable the sum of the following: (i) the present value (discounted at the prime rate of interest, as reported in the *Wall Street Journal*) of all Base Rent and Additional Rent due and coming due under this Lease for the entire Remaining Term (as if by the terms of this Lease they were payable in advance); (ii) all Default Damages; and (iii) all Prior Obligations, whereupon Tenant shall be obligated to pay the same to Landlord; provided, however, that such payment shall not be deemed a penalty or liquidated damages, but shall merely constitute payment in advance of all Base Rent and Additional Rent payable hereunder throughout the Remaining Term, and provided further, however, that upon Landlord receiving such payment, Tenant shall be entitled to receive from Landlord all rents received by Landlord from other assignees, tenant and subtenants on account of said Leased Premises during the Remaining Term (but only to the extent that the monies to which Tenant shall so become entitled do not exceed the entire amount actually paid by Tenant to Landlord pursuant to this subsection I), less all Default Damages of Landlord incurred but not yet reimbursed by Tenant.

(f) Landlord may sue for injunctive relief or to recover damages for any loss resulting from the Default.

Section 13.04. Limitation of Landlord's Liability. If Landlord shall fail to perform any term, condition, covenant or obligation required to be performed by it under this Lease and if Tenant shall, as a consequence thereof, recover a money judgment against Landlord, Tenant agrees that it shall look solely to Landlord's right, title and interest in and to the Leased Premises for the collection of such judgment; and Tenant further agrees that no other assets of Landlord shall be subject to levy, execution or other process for the satisfaction of Tenant's judgment.

Section 13.05. Nonwaiver of Defaults. Neither party's failure nor delay in exercising any of its rights or remedies or other provisions of this Lease shall constitute a waiver thereof or affect its right thereafter to exercise or enforce such right or remedy or other provision. No waiver of any default shall be deemed to be a waiver of any other default. Landlord's receipt of less than the full Rent due shall not be construed to be other than a payment on account of Rent then due, nor shall any statement on Tenant's check or any letter accompanying Tenant's check be deemed an accord and satisfaction. No act or omission by Landlord or its employees or agents during the Lease Term shall be deemed an acceptance of a surrender of the Leased Premises, and no agreement to accept such a surrender shall be valid unless in writing and signed by Landlord.

Section 13.06. Attorneys' Fees. If either party defaults in the performance or observance of any of the terms, conditions, covenants or obligations contained in this Lease and the non-defaulting party obtains a judgment against the defaulting party, then the defaulting party agrees to reimburse the non-defaulting party for reasonable attorneys' fees incurred in connection

therewith. In addition, if a monetary Default shall occur and Landlord engages outside counsel to exercise its remedies hereunder, and then Tenant cures such monetary Default, Tenant shall pay to Landlord, on demand, all expenses incurred by Landlord as a result thereof, including reasonable attorneys' fees, court costs and expenses actually incurred.

ARTICLE 14 – TENANT'S RESPONSIBILITY REGARDING ENVIRONMENTAL LAWS AND HAZARDOUS SUBSTANCES

Section 14.01. Environmental Definitions.

(a) "Environmental Laws" shall mean all present or future federal, state and municipal laws, ordinances, rules and regulations applicable to the environmental and ecological condition of the Leased Premises, and the rules and regulations of the Federal Environmental Protection Agency and any other federal, state or municipal agency or governmental board or entity having jurisdiction over the Leased Premises.

(b) "Hazardous Substances" shall mean those substances included within the definitions of "hazardous substances," "hazardous materials," "toxic substances" "solid waste" or "infectious waste" under Environmental Laws and petroleum products.

Section 14.02. Restrictions on Tenant. Tenant shall not cause or permit the use, generation, release, manufacture, refining, production, processing, storage or disposal of any Hazardous Substances on, under or about the Leased Premises, or the transportation to or from the Leased Premises of any Hazardous Substances, except as necessary and appropriate for its Permitted Use in which case the use, storage or disposal of such Hazardous Substances shall be performed in compliance with the Environmental Laws and the highest standards prevailing in the industry.

Section 14.03. Notices, Affidavits, Etc. Tenant shall immediately (a) notify Landlord of (i) any violation by Tenant, its employees, agents, representatives, customers, invitees or contractors of any Environmental Laws on, under or about the Leased Premises, or (ii) the presence or suspected presence of any Hazardous Substances on, under or about the Leased Premises, and (b) deliver to Landlord any notice received by Tenant relating to (a)(i) and (a)(ii) above from any source. Tenant shall execute affidavits, representations and the like within five (5) days of Landlord's request therefor concerning Tenant's best knowledge and belief regarding the presence of any Hazardous Substances on, under or about the Leased Premises.

Section 14.04. Tenant's Indemnification. Tenant shall indemnify Landlord and Landlord's managing agent from any and all claims, losses, liabilities, costs, expenses and damages, including attorneys' fees, costs of testing and remediation costs, incurred by Landlord in connection with any breach by Tenant of its obligations under this Article 14. The covenants and obligations under this Article 14 shall survive the expiration or earlier termination of this Lease.

ARTICLE 15 – MISCELLANEOUS

Section 15.01. Benefit of Landlord and Tenant. This Lease shall inure to the benefit of and be binding upon Landlord and Tenant and their respective successors and assigns.

Section 15.02. Governing Law. This Lease shall be governed in accordance with the laws of the State of Illinois.

Section 15.03. Force Majeure. Landlord and Tenant (except with respect to the payment of any monetary obligation) shall be excused for the period of any delay in the performance of any obligation hereunder when such delay is occasioned by causes beyond its control, including but not limited to work stoppages, boycotts, slowdowns or strikes; shortages of materials, equipment, labor or energy; unusual weather conditions; or acts or omissions of governmental or political bodies.

Section 15.04. Examination of Lease. Submission of this instrument by Landlord to Tenant for examination or signature does not constitute an offer by Landlord to lease the Leased Premises. This Lease shall become effective, if at all, only upon the execution by and delivery to both Landlord and Tenant. Execution and delivery of this Lease by Tenant to Landlord constitutes an offer to lease the Leased Premises on the terms contained herein.

Section 15.05. Indemnification for Leasing Commissions. The parties hereby represent and warrant that no real estate brokers were involved in the negotiation and execution of this Lease and that no other party is entitled, as a result of the actions of the respective party, to a commission or other fee resulting from the execution of this Lease. Each party shall indemnify the other from any and all liability for the breach of this representation and warranty on its part and shall pay any compensation to any other broker or person who may be entitled thereto.

Section 15.06. Notices. All notices and demands which may or are required or permitted to be given by either party to the other under this Lease or by law shall be deemed to have been given if it is in writing, and delivered in person (by hand delivery or messenger) or by overnight courier or mailed by or sent by either United States certified mail, return receipt requested, postage prepaid or by Federal Express or other nationally recognized overnight delivery service, to the party who is to receive such notice at the address specified in Section 1.01. Such notices under this section shall be effective on: (i) the date of delivery or refusal of delivery if delivered in person; (ii) the third (3rd) business day after deposit in the United States mail and signed for upon receipt if certified mail, return receipt requested, postage prepaid; and (iii) the first (1st) business day after proper and timely deposit for next business day delivery, charges prepaid, with a nationally recognized service providing next business day service. Either party may change its respective notice address by giving written notice thereof to the other party.

Section 15.07. Partial Invalidity; Complete Agreement. If any provision of this Lease shall be held to be invalid, void or unenforceable, the remaining provisions shall remain in full force and effect. This Lease represents the entire agreement between Landlord and Tenant covering everything agreed upon or understood in this transaction. There are no oral promises, conditions, representations, understandings, interpretations or terms of any kind as conditions or inducements to the execution hereof or in effect between the parties. No change or addition shall be made to this Lease except by a written agreement executed by Landlord and Tenant.

Section 15.08. Representations and Warranties.

(a) Tenant hereby represents and warrants for itself that (i) it is duly organized, validly existing and in good standing (if applicable) in accordance with the laws of the State under which it was organized; (ii) it is authorized to do business in the State where the Leased Premises is located; and (iii) the individual(s) executing and delivering this Lease on behalf of it has been properly authorized to do so, and such execution and delivery shall bind it to its terms.

(b) Landlord hereby represents and warrants that (i) Landlord is duly organized, validly existing and in good standing (if applicable) in accordance with the laws of the State under which it was organized; (ii) Landlord is authorized to do business in the State where the Leased Premises is located; and (iii) the individual(s) executing and delivering this Lease on behalf of Landlord has been properly authorized to do so, and such execution and delivery shall bind Landlord to its terms.

Section 15.10. Consent. Where the consent of a party is required, such consent will not be unreasonably withheld.

Section 15.11. Time. Time is of the essence of each term and provision of this Lease.

Section 15.12. Patriot Act. Each of Landlord and Tenant, each as to itself, hereby represents its compliance and its agreement to continue to comply with all applicable anti-money laundering laws, including, without limitation, the USA Patriot Act, and the laws administered by the United States Treasury Department's Office of Foreign Assets Control, including, without limitation, Executive Order 13224 ("Executive Order"). Each of Landlord and Tenant further represents (such representation to be true throughout the Lease Term) (i) that it is not, and it is not owned or controlled directly or indirectly by any person or entity, on the SDN List published by the United States Treasury Department's Office of Foreign Assets Control and (ii) that it is not a person otherwise identified by government or legal authority as a person with whom a U.S. Person is prohibited from transacting business. As of the date hereof, a list of such designations and the text of the Executive Order are published under the internet website address www.ustreas.gov/offices/enforcement/ofac.

[SIGNATURE PAGE FOLLOWS]

IN WITNESS WHEREOF, the parties hereto have executed this Lease as of the day and year first above written.

LANDLORD:

RES INVESTMENTS LLC

By: _____

Name: David Shifrin

Its: Manager

TENANT:

CHICAGO COSMETIC SURGERY INSTITUTE LLC

By: _____

Name: David Shifrin

Its: Manager

EXHIBIT A

LEGAL DESCRIPTION

Section VII, 1120.130 Financial Viability
Financial Viability Waiver

The project will be funded entirely with cash and cash equivalents. Copies of 2018 and 2019 Chicago Cosmetic Surgery Institute, LLC d/b/a South Loop Surgery Center financial statements are attached at Attachment – 33A.

Section VIII, Economic Feasibility Review Criteria
Criterion 1120.140(A), Reasonableness of Financing Arrangements

Attached at Attachment – 36A is a letter from David A. Shifrin, M.D., Manager, Chicago Cosmetic Surgery Institute, LLC d/b/a South Loop Surgery Center attesting that the total estimated project costs will be funded entirely with cash.

April 13, 2020

Debra Savage
Chair
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Re: Reasonableness of Financing Arrangements

Dear Chair Savage:

I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109 and pursuant to 77 Ill. Admin. Code § 1120.140(a) that the total estimated project costs and related costs will be funded in total by cash and equivalents, including but not limited to investment securities.

Sincerely,

David A. Shifrin, M.D.
Manager
The Chicago Cosmetic Surgery Institute LLC
d/b/a South Loop Surgery Center
RES Investments LLC

Subscribed and sworn to me
This ___ day of _____, 2020

_____
Notary Public

Section VIII, Economic Feasibility Review Criteria
Criterion 1120.140(B), Conditions of Debt Financing

This project will be funded in total with cash and cash equivalents. Accordingly, this criterion is not applicable.

Section VIII, Economic Feasibility Review Criteria
Criterion 1120.140C, Reasonableness of Project and Related Costs

6. This project will not include any construction. Accordingly, this criterion is not applicable.

COST AND GROSS SQUARE FEET BY DEPARTMENT OR SERVICE									
Department (list below) CLINICAL	A	B	C	D	E	F	G	H	Total Cost (G + H)
	Cost/Square Foot New	Mod.	Gross Sq. Ft. New	Circ.*	Gross Sq. Ft. Mod.	Circ.*	Const. $ (A x C)	Mod. $ (B x E)	
CLINICAL									
Contingency									
TOTAL CLINICAL									
NON-CLINICAL									
Admin									
Contingency									
TOTAL NON-CLINICAL									
TOTAL									
* Include the percentage (%) of space for circulation									

2. As shown in Table 1120.310(c) below, the project costs are below the State Standard.

Table 1120.310(c)			
	Proposed Project	**State Standard**	**Above/Below State Standard**
Consulting and Other Fees	$100,000	No State Standard	No State Standard
Fair Market Value of Leased Space or Equipment	$985,536	No State Standard	No State Standard

Section VIII, Economic Feasibility Review Criteria
Criterion 1120.140D, Projected Operating Costs

Operating Expenses:	$483,989
Procedures (2018):	817 procedures
Operating Expense per Procedure:	$592.40 per procedure

Section VIII, Economic Feasibility Review Criteria
Criterion 1120.140E, Total Effect of Project on Capital Costs

Capital Costs:	$0
Procedures:	817 procedures
Capital Costs per Procedure:	$0.00 per procedure

Section IX, Safety Net Impact Statement

1. South Loop Surgery Center will improve access to outpatient surgery services to patients residing in Bronzeville and other communities on the South Side of Chicago. As discussed throughout this application the potential closure of Mercy Hospital & Medical Center will adversely affect this medically underserved community as there are no other facilities in the in the immediate area that provide surgical services. As stated in the letter from David A. Shifrin, M.D., Manager, Chicago Cosmetic Surgery Institute, LLC d/b/a South Loop Surgery Center, South Loop Surgery Center will accept all patients who are clinically appropriate for outpatient surgery, regardless of ability to pay. See Attachment – 37A. Further, South Loop Surgery Center has Charity Care Financial Assistance Program to provide eligible patients with financial assistance for medically necessary care. See Attachment – 37B. South Loop Surgery Center will address the need for a high quality, low-cost outpatient surgery option for residents of Bronzeville and surrounding communities.

2. The establishment of South Loop Surgery Center will not impact the ability of other providers or health care systems to cross-subsidize safety net services. Most of the surgical procedures to be performed at the surgery center are primarily performed in an office-based setting. Further, South Loop Surgery Center will provide a high quality, low cost outpatient surgical option to patients residing in Bronzeville and other communities on the South Side of Chicago, many of which are economically disadvantaged.

3. The Applicants propose the establishment of an ambulatory surgical treatment center. Accordingly, this criterion is not applicable.

4. As a for-profit entity, South Loop Surgery Center does not track charity care. Its payor mix is provided below.

Medicare	85%
Medicaid	5%
Private Pay	10%

South Loop Surgery Center
2335 South Michigan Ave, Floor 3
Chicago, IL 60616

April 16, 2020

Illinois Health Facilities and Services
Review Board
525 West Jefferson Street, 2nd Floor
Springfield, IL 62761
Attn: Michael Constantino

RE: South Loop Surgery Center Admission Policy

Dear Mr. Constantino:

I am writing to inform you of the patient admission policy for Chicago Cosmetic Surgery Institute LLC d/b/a South Loop Surgery Center ("SLSC"). SLSC is committed to operating the proposed ambulatory surgical treatment center ("ASTC") in a manner that will maintain the financial viability of the facility while at the same time operating for the benefit of the community by promoting health care access for a broad cross-section of the community. To this end, SLSC, will accept patients who are clinically appropriate for outpatient surgery, regardless of their ability to pay and will not discriminate against individuals based on their race, color, religion, sex, sexual orientation, gender identity or national origin.

SLSC's commitment to charity care will be in line with other ASTCs in the Chicagoland area.

Please let me know if you have any questions or would like additional information regarding SLSC's admission policy or charity care commitment.

Sincerely,

4/16/20

David A. Shifrin
Manager
Chicago Cosmetic Surgery Institute, LLC

73119434.1

Charity Care at South Loop Surgery Center

As a caring member of the health care community, the South Loop Surgery Center has a Charity Care Financial Assistance Program to provide eligible patients financial assistance for medically necessary care. Under the Program, a range of discounts is available to patients who are Illinois residents, submit an application and meet financial eligibility criteria. No eligible patients will be charged more for medically necessary care than the amounts generally billed to patients who have insurance. All patients may apply, however, not all patients and/or services may be eligible.

South Loop Surgery Center Charity Care Application

YOU MAY BE ABLE TO RECEIVE FREE OR DISCOUNTED CARE. Completing this application will help South Loop Surgery Center determine if you can receive free or discounted services or other public programs that can help pay for your healthcare. Please note that Financial Assistance is available only to residents of Illinois.

IF YOU ARE UNINSURED, A SOCIAL SECURITY NUMBER IS NOT REQUIRED TO QUALIFY FOR FREE OR DISCOUNTED CARE. However, a Social Security Number is required for some public programs, including Medicaid. Providing a Social Security Number is not required but will help the facility determine whether you qualify for any public programs.

Please complete this form and submit it in person, by mail, or by fax to apply for free or discounted care as soon as possible after the date of service. We will accept your Application for up to 90 days following the first billing statement for your care. Patient acknowledges that he or she has made a good faith effort to provide all information requested in the application to assist in determining whether the patient is eligible for financial assistance.

Patient Information

Name:	Social Security #:	DOB:
Phone:	Home Address:	Monthly Income:
Employer:	Employer Address:	Patient Insurance:

Spouse / Guarantor Information

Name:	Relationship to Patient:	DOB:
Phone:	Home Address:	Monthly Income:
Employer:	Employer Address:	

Household Income

Please list all sources of income including, but not limited to, employment, Social Security, retirement, interest, rental income, child support, alimony, and government assistance. Sources of income should be from the patient, the patients spouse or partner (if guarantor), or the patient's parent or guardian (if guarantor and patient is a minor).

Household Member Name	Source of Income / Benefit	Gross Monthly Amount

Dependent Household Members

Name	Age	Relationship

Supporting Documents

Please provide the documents requested below. Your application may be delayed or denied if any required documents are not included. If you cannot provide an applicable document, please attached a written explanation.

Required

1. Identification: Please provide one of the following:
   - Government-issued photo ID, if available (e.g., State of Illinois Drivers License, State of Illinois Identification Card, Passport) ♦ Other official form of identification
2. Proof of Illinois Residency: If you did not produce a current State of Illinois Drivers License or State of Illinois Identification Card for item #1 above, please provide at least one of the following documents, in your name:
   - Recent residential utility bill
   - Lease agreement
   - Illinois vehicle registration card
   - Voter registration card
   - Current mail addressed to applicant from the government or other credible source
   - Letter from homeless shelter
   - Statement from family member of patient who resides at the same address and presents verification of residency
3. Household Income Verification: Please provide the following documents, as applicable: ♦ Most recent federal and state tax returns, including all schedules
   - ♦ Most recent W-2 and 1099
   - ♦ 2 most recent income stubs, including paychecks, unemployment benefits, and/or social security checks
   - ♦ Employer's written verification of income, if paid in cash

- ◆ Statement of Alimony, business or retirement/pension income (if not reflected on most recent tax return, or if current year's amount will vary from that reflected in most recent tax return)

4. Assets: Please provide the following documents, if applicable:
   - ◆ Most recent statement for all checking, savings, and/or credit union accounts
   - ◆ Information regarding value of and income received from owned properties (buildings/land) other than primary residence ◆ Other investment information (bonds, stocks, etc.) besides IRA/401k retirement and 529 college savings accounts

Patient Certification

I certify that the information in this application is true and correct to the best of my knowledge. I will apply for any state, federal, or local assistance for which I may be eligible to help pay for this hospital bill. I understand that the information provided may be verified by the hospital, and I authorize the hospital to contact third parties to verify the accuracy of the information provided in this application. I understand that if I knowingly provide untrue information in this application, I will be ineligible for financial assistance, any financial assistance granted to me may be reversed, and I will be responsible for the payment of the hospital bill.

Patient (or Applicant) Name:

Patient (or Applicant) Signature:

Date:

Please call **(312) 502-6200** if you have any questions regarding this application. Return your completed application and supporting documents to:

By mail or in person:

South Loop Surgery Center Patient Financial Services Department

2335 South Michigan Avenue Floor Three Chicago IL 60616

Section X, Charity Care Information

As a for-profit entity, South Loop Surgery Center does not track charity care. As noted in the Safety Net Impact Statement, South Loop Surgery Center accepts all patients who are clinically appropriate for outpatient surgery, regardless of their ability to pay and provides eligible patients with discounted care not to exceed amounts generally billed to insured patients. The Applicants anticipate charity care provided at South Loop Surgery Center will be approximately 0.5% of Net Patient Revenue.

Appendix I – Physician Referral Letter

Attached as Appendix 1 are the physician referral letters projecting 817 patients will be referred to South Loop Surgery Center within 12 to 24 months of project completion.

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am a general surgeon. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient general surgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of 410 outpatient surgical procedures at the following hospitals and surgery centers. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 80% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Mercy Hospital and Medical Center	10	10
Advocate Trinity Hospital	400	0
Total	**410**	**10**

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

Ken Richards MD

Exhibit 1

Referrals by Patient Zip Code

General Surgery	
Zip Code	**Number of Cases**
60616	50
60653	75
60609	30
60804	20
60805	25
60617	35
60628	20
60622	5
60453	20
60638	45
46321	5
60540	5
61820	5
62629	20
60621	10
60443	20
60438	15
Total	**410**

72954304.1

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am a neurosurgeon. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient neurosurgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of 250 outpatient surgical procedures at my offices. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 20% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Elmhurst Memorial Hospital	125	10
Macneal Hospital	125	10
Total	**250**	**20**

These referrals have not been used to support another pending or approved certificate of need application.

72954304.1

#20-020

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

John Song MD
1 Westbrook Corporate Center
Suite 800
Westchester, IL 60154

Subscribed and sworn to me
This ___ day of _____, 2020

Notary Public

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60616	15
60653	15
60402	75
60126	75
60622	15
60453	25
60181	15
60101	15
Total	**250**

72954304.1

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am a ophthalmic surgeon. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient plastic surgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of 200 outpatient surgical procedures at the following hospitals and surgery centers. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 70% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Advocate Christ Medical Center	5	0
Tinley Woods Surgery Center	190	145
900 North Michigan Avenue Surgery Center	5	5
Total	**200**	**150**

72954304.1

#20-020

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

4/14/20

Kabita S Shifrin DO
Owner / Surgeon
Shifrin Plastic Surgery
2335 South Michigan Avenue Floor Two
Chicago, IL 60616

Shifrin Plastic Surgery
20303 Crawford Avenue Lower Level One
Olympia Fields 60461

Subscribed and sworn to me
This ___ day of _____, 2020

Notary Public

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60616	25
60461	75
60462	35
60423	20
60617	15
60628	05
60622	5
60453	10
60638	5
60438	5
Total	**200**

72954304.1

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am an Orthopaedic surgeon. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient Orthopaedic surgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of 300 outpatient surgical procedures at the following hospitals and surgery centers. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 20% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Northwest community hospital	300	35
Total	**300**	**35**

72954304.1

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

4/17/2020

Brian Moss DO
Owner / Surgeon
Orthopaedic Associates, S.C. - Suburb
415 West Golf Rd #68
Arlington Heights, IL 60005

Subscribed and sworn to me
This ___ day of _____, 2020

_____
Notary Public

72954304.1

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60616	60
60005	100
60159	100
60121	40
Total	**300**

72954304.1

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am an Ear Nose and Throat (ENT) surgeon. I am writing in support of the establishment of [South Loop Surgery Center]. Outpatient ear, nose and throat surgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of 300 outpatient surgical procedures at the following hospitals and surgery centers. With the opening of the proposed the South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 33% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Northshore Skokie Hospital	100	0
Golf Surgical Center	180	45
Lutheran General Hospital	20	0
Total	**300**	**45**

72954304.1

#20-020

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

_____

Ryan Vaughn MD
Owner / Surgeon
Exhale Sinus and Facial Pain Center Suburb
814 East Woodfield Rd
Schaumburg, IL 60173

Exhale Sinus and Facial Pain Center City
2335 South Michigan Floor Two
Chicago, IL 60616

Subscribed and sworn to me
This _14 day of _April_____, 2020

_____
Notary Public

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60616	50
60159	100
60076	100
60654	50
Total	**300**

72954304.1

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am an anesthesiologist who specializes in pain management. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient pain surgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of outpatient surgical procedures at the following hospitals and surgery centers. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 80% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Mercy Hospital and Medical Center	300	30
West Suburban Hospital	100	10
Weiss Memorial Hospital	100	20
Loop Medical Center	100	0
Total	**600**	**60**

72954304.1

Appendix - 1

#20-020

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

MD 04/14/2020

Nidal Elbaridi MD, PT
Owner /Pain Specialist
Loop Medical Center-Nidal Elbaridi MD
1921 South Michigan Ave
Chicago, IL 60616

Subscribed and sworn to me
This ___ day of _____, 2020

_____
Notary Public

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60616	50
60653	55
60609	35
60804	15
60805	25
60617	30
60628	20
60622	15
60453	20
60062	5
60035	5
60638	25
46321	5
60540	5
61820	10
62629	10
60621	5
60443	10
60438	5
60169	250
Total	**600**

72954304.1

Iteld
plastic surgery

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

April 24, 2020

Dear Ms. Savage:

I am a plastic surgeon. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient plastic surgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), I performed a total of 400 outpatient surgical procedures at the following hospitals and surgery centers. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, **>50%** percent reside within 10 miles of the 60616 zip code; the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Mercy Hospital and Medical Center	2	2
Illinois Masonic Hospital	75	0
900 North Michigan Avenue Surgery Center	320	40
St Joseph's Hospital	3	0
Total	**400**	**42**

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

939 W North Avenue, Suite 600 • Chicago, IL 60642
phone 312.757.4505 fax 312.757.4605 • email info@DrIteld.com • online www.driteld.com

Sincerely,

#20-020

Lawrence Iteld, MD
Owner / Surgeon
Iteld Plastic Surgery
939 W North Avenue, Suite 600
Chicago, IL 60642

Subscribed and sworn to me
This __ day of _____, 2020

_____
Notary Public

1460 N. Halsted Street, Suite 505 • Chicago, IL 60642
phone 312.757.4505 fax 312.757.4605 • email info@Driteld.com • online www.driteld.com

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60616	50
60035	25
60611	35
62629	35
60062	25
60540	25
60622	25
60610	50
60613	30
60653	30
60609	30
60608	20
60615	20
Total	**400**

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am a plastic surgeon. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient plastic surgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of 600 outpatient surgical procedures at the following hospitals and surgery centers. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 70% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Mercy Hospital and Medical Center	5	5
Chicago Cosmetic Surgery Institute LLC	5	5
900 North Michigan Avenue Surgery Center	5	5
Lift Center Schaumburg	600	0
Total	**615**	**15**

These referrals have not been used to support another pending or approved certificate of need application.

#20-020

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

4/14/20

Brian Rosett MD
Owner / Surgeon
Rosett Plastic Surgery
777 North Green Street #4
Chicago, IL 60642

Subscribed and sworn to me
This ___ day of _____, 2020

_____
Notary Public

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60616	50
60653	55
60609	35
60804	20
60805	25
60617	25
60628	20
60622	15
60453	25
60062	5
60035	5
60638	30
46321	5
60540	5
61820	10
62629	10
60621	10
60443	10
60438	5
60169	250
Total	**615**

72954304.1

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am a plastic surgeon. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient plastic surgery cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of 420 outpatient surgical procedures at the following hospitals and surgery centers. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 80% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
Mercy Hospital and Medical Center	5	5
Chicago Cosmetic Surgery Institute LLC	405	405
900 North Michigan Avenue Surgery Center	5	5
Magna Surgery Center	5	5
Total	**420**	**420**

These referrals have not been used to support another pending or approved certificate of need application.

72954304.1

#20-020

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

04/14/20

David A Shifrin MD
Owner / Surgeon
Shifrin Plastic Surgery
2335 South Michigan Avenue Floor Two
Chicago, IL 60616

Subscribed and sworn to me
This ___ day of _____, 2020

Notary Public

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60616	50
60653	75
60609	35
60804	20
60805	25
60617	35
60628	20
60622	15
60453	25
60062	5
60035	5
60638	45
46321	5
60540	5
61820	5
62629	20
60621	10
60443	10
60438	5
Total	**420**

72954304.1

Debra Savage
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Savage:

I am a podiatrist. I am writing in support of the establishment of the South Loop Surgery Center. Outpatient podiatry cases will constitute the majority of my work in the future.

Over the past twelve months (from April 1, 2019 to March 31, 2020), for the zip codes listed on Exhibit 1, I performed a total of 250 outpatient surgical procedures at my offices. With the opening of the proposed South Loop Surgery Center, I expect to refer my cases as noted below. Of the total cases, 100% percent will reside within the proposed geographic service area of South Loop Surgery Center.

Hospital / Licensed ASTC	Hospital and Licensed ASTC (number of cases) Most recent 12 months	Projected Referrals to [South Loop Surgery Center] after Project Completion
River North Surgery Center	20	20
Total	**20**	**20**

These referrals have not been used to support another pending or approved certificate of need application.

72954304.1

#20-020

The information in this letter is true and correct to the best of my knowledge.

I support the establishment of South Loop Surgery Center.

Sincerely,

Steve Sharlin DPM
Owner
Sharlin Podiatry
150 East Huron
Suite 801
Chicago, IL 60611

Subscribed and sworn to me
This ___ day of _____, 2020

_____
Notary Public

Exhibit 1

Referrals by Patient Zip Code

Plastic Surgery	
Zip Code	**Number of Cases**
60611	10
60616	10
Total	**20**

72954304.1

After paginating the entire completed application, indicate, in the chart below, the page numbers for the included attachments:

INDEX OF ATTACHMENTS

ATTACHMENT NO.		PAGES
1	Applicant Identification including Certificate of Good Standing	24-26
2	Site Ownership	27-45
3	Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.	46-47
4	Organizational Relationships (Organizational Chart) Certificate of Good Standing Etc.	48-49
5	Flood Plain Requirements	50-51
6	Historic Preservation Act Requirements	52-62
7	Project and Sources of Funds Itemization	63
8	Financial Commitment Document if required	
9	Cost Space Requirements	64
10	Discontinuation	
11	Background of the Applicant	65-66
12	Purpose of the Project	67-76
13	Alternatives to the Project	77-78
14	Size of the Project	80
15	Project Service Utilization	81
16	Unfinished or Shell Space	82
17	Assurances for Unfinished/Shell Space	83
	Service Specific:	
18	Medical Surgical Pediatrics, Obstetrics, ICU	
19	Comprehensive Physical Rehabilitation	
20	Acute Mental Illness	
21	Open Heart Surgery	
22	Cardiac Catheterization	
23	In-Center Hemodialysis	
24	Non-Hospital Based Ambulatory Surgery	84-323
25	Selected Organ Transplantation	
26	Kidney Transplantation	
27	Subacute Care Hospital Model	
28	Community-Based Residential Rehabilitation Center	
29	Long Term Acute Care Hospital	
30	Clinical Service Areas Other than Categories of Service	
31	Freestanding Emergency Center Medical Services	
32	Birth Center	
	Financial and Economic Feasibility:	
33	Availability of Funds	324-345
34	Financial Waiver	346
35	Financial Viability	
36	Economic Feasibility	347-352
37	Safety Net Impact Statement	353-358
38	Charity Care Information	359
Appendix 1	Physician Referral Letters	360-389