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## **Director's Interpretations of Issues Impacting the Colorado Workers' Compensation System**

In an effort to provide guidance on the practical applications of the Colorado Workers' Compensation Act, we are publishing Director's interpretations of statutes and other factors affecting the system, in the form of *Interpretive Bulletins*. The purpose is to provide greater levels of consistency and predictability as to how the Colorado system is intended to operate. While the opinions do not have the force and effect of rule, they are offered as navigational tools to clarify and simplify processes, create efficiencies and to reduce litigation.

If you have questions regarding this information or issues you would like to see addressed in future bulletins, please direct your inquiries to Paul Tauriello, Director of the Division of Workers' Compensation, at 633 17<sup>th</sup> St., Suite 400, Denver, CO 80202-3660, fax 303.318.8632, or e-mail at [paul.tauriello@state.co.us](mailto:paul.tauriello@state.co.us).

### **Colorado Workers' Compensation Fee Schedule Implementation Data (CWCFSID) Rule 18 Medical Fee Schedule, Effective January 1, 2007**

**Release Date: October 1, 2006**  
**Revision Date:**

For medical services rendered after January 1, 2007, Rule 18 makes a number of references to medical procedures. This interpretive bulletin identifies *Current Procedural Terminology* (CPT®) codes for many of those procedures and identifies the citations within Rule 18 where these CPT® codes logically fit into that language. There are a few instances in *Relative Values for Physicians* (RVP©) with no assigned relative value units (RVU) where the Division believes it would be appropriate to provide reasonable values. These codes are referenced in the paragraphs below under their respective sections of the RVP©. The full text of Rule 18 can be found on the Division's webpage under "Rules of Procedure."

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**Rule 18, effective January 1, 2007**

In some instances of high frequency services, the 2006 RVP© has not established RVUs. The Division considers the following RVU values would be appropriate:

Code	DOWC Recommended Relative Value Unit	Dollar Value	Descriptor
64449	7		Surgery-X Code, Lumbar plexus spine anesthetic injection
96101	26.6		Medicine
96102	19.95		Medicine
96103	19.95		Medicine
96116	30.8		Medicine
96118	32.4		Medicine
96119	29		Medicine
96120	21.5		Medicine
96416	17		Medicine
96522	10		Medicine
97152	1.5		Physical Medicine
97602	7.9		Physical Medicine
97605	7.8		Physical Medicine
97606	13.2		Physical Medicine
97760	4.8		Physical Medicine
97761	4.8		Physical Medicine
97762	7.5		Physical Medicine
99053	8		Medicine
99144	7.4		Medicine
99145	2.2		Medicine
99148	16.1		Medicine
99149	5.1		Medicine
99150	2.2		Medicine
99183	24		Medicine
99304	13		Evaluation & Management
99305	17.5		Evaluation & Management
99306	23.5		Evaluation & Management
99307	7.5		Evaluation & Management
99308	12		Evaluation & Management
99309	19.5		Evaluation & Management
99310	24.4		Evaluation & Management
0062T		\$1,633.49	Surgery, IDEA, single level, uni or bilateral including fluoroscopic guidance; Rule 18-5(D)(2)(g)
0063T		\$639.38	Surgery, IDEA additional levels; Rule 18-5(D)(2)(g)
0091T	67.5		Surgery, lumbar artificial disc arthroplasty, one interspace; Rule 18-5(D)(2)(h)

Code	DOWC Recommended Relative Value Unit	Dollar Value	Descriptor
0092T	25		Surgery, lumbar artificial disc arthroplasty, additional interspace; Rule 18-5(D)(2)(h)

#### Rule 18-4

The conversion factors (CF) found in Rule 18-4 are listed here with their applicable code ranges for your convenience. Maximum reimbursement is calculated by multiplying the respective CF by the RVU from the RVP©.

RVP©	Code Range	CONVERSION FACTOR
Medicine	(CPT® 90000 - 96999 and 98925 – 99199)	\$ 7.56/RVU
Physical Medicine	(CPT® 97000-97804 and 97810-97814)	\$ 5.41/RVU
Evaluation & Management	(CPT® 99201 – 99499)	\$ 8.22/RVU
Anesthesia	(CPT® 00100 –01999 and 99100-99140)	\$47.96/RVU
Surgery X Codes	(See Rule 18-5(D)(1)(d))	\$37.69/RVU
Surgery	(CPT® 10000-69999)	\$90.97/RVU
Radiology	(CPT® 70000-79999)	\$17.26/RVU
Pathology	(CPT® 80000-89999)	\$12.99/RVU

#### Rule 18-5(D)(1)

Anesthesia codes range from 00100 – 01999. Anesthesia add-on codes 99100-99140 found in the medicine section of the RVP© are reimbursed using the anesthesia CF and unit values found in the RVP©, Anesthesia Guidelines IX, "Qualifying Circumstances".

The surgery-X codes, referred to in section 18-5(D)(1)(d)(1) are:

01995 01996 31500 36400 36420 36425 36600 36620 36625 36660 62273 62280  
62281 62282 62310 62311 62318 62319 64400 64402 64405 64408 64410 64412  
64413 64415 64416 64417 64418 64420 64421 64425 64430 64435 64445 64446  
64447 64448 64449 64450 64470 64472 64475 64476 64479 64480 64483 64484  
64505 64508 64510 64520 64530 64600 64605 64610 64620 64622 64623 64626  
64627 64630 64640 64680

It is recommended that providers use codes 76360 or 76393 when billing for CT or MRI fees involved with IDEA.

## Rule 18-5(G)

The medicine section of the RVP©:

- Home therapy codes are 99500-99602. However, per Rule 18-5(G)(1) these codes are not for use in billing workers' compensation.
- Biofeedback training codes are 90901 and 90911.
- Electrodiagnostic study codes are 95860-95864, 95867-95870, 95900, 95903-95904, 95934, 95936 and 95937.
- Osteopathic manipulation codes are 98925-98929.
- Chiropractic manipulation codes are 98940-98943.
- Psychological evaluation procedures are 90801-90802.
- CNS testing procedures are 96100-96120.
- Psychotherapy services are 90804-90829, 90846-90849, and 90875-90876.
- Hyperbaric oxygen therapy service code is 99183.

## Rule 18-5(H)

Physical Medicine and Rehabilitation:

- Medical nutrition therapy codes are 97802-97804.
- Procedure codes are 97110-97535 and 97542.
- Unattended, non-timed modality codes are 97010-07028.
- Attended, timed modality codes are 97032-97039.
- Physical therapist evaluation codes are 97001, evaluation, and 97002, reevaluation.
- Occupational therapist evaluation codes are 97003, evaluation, and 97004, re-evaluation.
- Athletic training evaluation codes are 97005, evaluation, and 97006, re-evaluation.
- Codes for telephone coordination of care with professionals are 99371-99373.
- Interdisciplinary team conference codes are 99361-99362.
- Job site evaluation is 97537.

- Computer enhanced evaluation, functional capacity evaluation and/or work tolerance screening code is 97750.
- Assistive technology assessment code is 97755.
- Speech therapy codes are 96105 – 96115.
- Work conditioning, work hardening, and work simulation codes are 97545 and 97546.

#### Rule 18-5(l)

##### Evaluation and Management (E&M):

- Telephone medical management services are codes 99371 – 99372.
- Interdisciplinary team conference codes are 99361-99362 at 50 percent of the 30 minute value.

#### Rule 18-6

##### Division Established Codes and Values

- Depositions are code CPT® 99075 using Division established values Rule 18-6(D)(2).
- Permanent Impairment ratings by a Level II treating physician are CPT® code 99455 with the values in Rule 18-6(F)(4)(b)(1).
- Permanent Impairment ratings by referral to Level II physicians are CPT® code 99456 with the values in Rule 18-6(F)(4)(b)(2).
- Special reports are CPT® code 99080 with the value in Rule 18-6(G)(3).

#### Rule 18-6(J)

Outpatient surgery facility fees for both hospitals and ASCs are based upon Medicare's APC system. To assist in the determination of the appropriate APC Grouper under Rule 18-6(J)(3)(c), a list of CPT® codes and their respective APC Grouper is given in the "Exhibit for Outpatient Surgery Facility Codes and Fees" to this interpretive bulletin. Grouper code 210, found in that exhibit, was created by DOWC to reimburse CPT® spinal fusion codes not listed in Medicare's Addendum B. For CPT® codes not contained in that Exhibit, refer to Rule 18-6(J)(3)(c).

The April 2006 Addendum B can be found on Medicare's Hospital Outpatient Prospective Payment System (PPS) website. The address as of September 22, 2006 was:

<http://www.cms.hhs.gov/HospitalOutpatientPPS/AU/list.asp?filterType=none&filterByDID=-99&sortByDID=1&sortOrder=ascending>.

Facility fees for the following outpatient surgery arthrogram and myelogram injection codes are best billed by using the corresponding radiology code with an appropriate modifier [see Rule 18-6(J)(3)(c)(3)]:

<u>Surgery Code</u>	<u>Radiology Code</u>
23350	73040
25246	73115
62284	72240-72270
62290	72295 for each level
62291	72285 for each level

Rule 18-6(M)(3)(d)

Outpatient emergency room department (ERD) facility fees, ERD levels 1-5 are billed using E&M codes 99281-99285 as required by Medicare. When billed on a UB-92, the billing of these codes should not be confused with the professional services of the physician.

Level	Code
Level 1	99281
Level 2	99282
Level 3	99283
Level 4	99284
Level 5	99285

Pharmacy fees for pharmaceuticals that have no NDC code are appropriately billed as a supply using the RVP© supply code 99070. [See Rule 18-6(O)(13).]

Under Rule 18-6(Q), the acupuncture codes are the physical medicine codes 97810-97814.

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Colorado Division of Workers' Compensation

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

Effective January 1, 2007

<i>CPT® Codes</i>	APC*	Description	Value
10140	7	Level II Incision & Drainage	\$1,418.84
10180	8	Level III Incision and Drainage	\$1,418.84
11043	16	Level IV Debridement & Destruction	\$322.77
11044	682	Level V Debridement & Destruction	\$833.23
14001	27	Level IV Skin Repair	\$1,918.68
14020	686	Level III Skin Repair	\$1,743.03
14021	27	Level IV Skin Repair	\$1,918.68
14040	686	Level III Skin Repair	\$1,743.03
14041	27	Level IV Skin Repair	\$1,918.68
14060	27	Level IV Skin Repair	\$1,918.68
14061	686	Level III Skin Repair	\$1,743.03
14300	27	Level IV Skin Repair	\$1,918.68
14350	27	Level IV Skin Repair	\$1,918.68
15000	25	Level II Skin Repair	\$947.13
15001	25	Level II Skin Repair	\$947.13
15050	25	Level II Skin Repair	\$947.13
15100	27	Level IV Skin Repair	\$1,918.68
15101	27	Level IV Skin Repair	\$1,918.68
15120	27	Level IV Skin Repair	\$1,918.68
15121	27	Level IV Skin Repair	\$1,918.68
15170	24	Level I Skin Repair	\$184.64
15171	24	Level I Skin Repair	\$184.64
15175	24	Level I Skin Repair	\$184.64
15176	24	Level I Skin Repair	\$184.64
15200	27	Level IV Skin Repair	\$1,918.68
15201	25	Level II Skin Repair	\$947.13
15220	27	Level IV Skin Repair	\$1,918.68
15221	25	Level II Skin Repair	\$947.13
15240	686	Level III Skin Repair	\$1,743.03
15241	25	Level II Skin Repair	\$947.13
15260	686	Level III Skin Repair	\$1,743.03
15261	25	Level II Skin Repair	\$947.13
15300	27	Level IV Skin Repair	\$1,918.68
15301	25	Level II Skin Repair	\$947.13
15320	25	Level II Skin Repair	\$947.13
15321	25	Level II Skin Repair	\$947.13
15330	25	Level II Skin Repair	\$947.13
15331	25	Level II Skin Repair	\$947.13
15335	25	Level II Skin Repair	\$947.13
15336	25	Level II Skin Repair	\$947.13
15400	25	Level II Skin Repair	\$947.13
15401	25	Level II Skin Repair	\$947.13

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

Effective January 1, 2007

<u>CPT® Codes</u>	APC*	Description	Value
15570	27	Level IV Skin Repair	\$1,918.68
15572	27	Level IV Skin Repair	\$1,918.68
15574	27	Level IV Skin Repair	\$1,918.68
15576	686	Level III Skin Repair	\$1,743.03
15600	27	Level IV Skin Repair	\$1,918.68
15610	27	Level IV Skin Repair	\$1,918.68
15620	27	Level IV Skin Repair	\$1,918.68
15630	27	Level IV Skin Repair	\$1,918.68
15650	27	Level IV Skin Repair	\$1,918.68
15732	27	Level IV Skin Repair	\$1,918.68
15734	27	Level IV Skin Repair	\$1,918.68
15736	27	Level IV Skin Repair	\$1,918.68
15738	27	Level IV Skin Repair	\$1,918.68
15740	686	Level III Skin Repair	\$1,743.03
15750	27	Level IV Skin Repair	\$1,918.68
15760	27	Level IV Skin Repair	\$1,918.68
15770	27	Level IV Skin Repair	\$1,918.68
15775	25	Level II Skin Repair	\$947.13
15776	25	Level II Skin Repair	\$947.13
15850	16	Level IV Debridement & Destruction	\$322.77
15851	16	Level IV Debridement & Destruction	\$322.77
15852	340	Minor Ancillary Procedures	\$72.13
16030	15	Level III Debridement & Destruction	\$196.56
20610	204	Level I Nerve Injections	\$372.69
20650	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
20670	21	Level III Excision/ Biopsy	\$1,696.64
20680	22	Level IV Excision/ Biopsy	\$2,207.52
20690	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
20692	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
20693	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
20694	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
20900	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
20902	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
20910	27	Level IV Skin Repair	\$1,918.68
20912	27	Level IV Skin Repair	\$1,918.68
20920	686	Level III Skin Repair	\$1,743.03
20922	27	Level IV Skin Repair	\$1,918.68
20924	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
20926	686	Level III Skin Repair	\$1,743.03
20931	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
20936	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59



Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
20937	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
20938	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
21010	254	Level IV ENT Procedures	\$2,660.44
21235	254	Level IV ENT Procedures	\$2,660.44
21270	256	Level V ENT Procedures	\$4,208.75
21330	254	Level IV ENT Procedures	\$2,660.44
21335	254	Level IV ENT Procedures	\$2,660.44
22505	45	Bone/Joint Manipulation Under Anesthesia	\$1,619.37
22520	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
22521	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
22522	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
22532	210	Spinal Fusions	\$5,579.28
22533	210	Spinal Fusions	\$5,579.28
22534	210	Spinal Fusions	\$5,579.28
22554	210	Spinal Fusions	\$5,579.28
22556	210	Spinal Fusions	\$5,579.28
22558	210	Spinal Fusions	\$5,579.28
22585	210	Spinal Fusions	\$5,579.28
22600	210	Spinal Fusions	\$5,579.28
22610	210	Spinal Fusions	\$5,579.28
22612	210	Spinal Fusions	\$5,579.28
22614	210	Spinal Fusions	\$5,579.28
22630	210	Spinal Fusions	\$5,579.28
22632	210	Spinal Fusions	\$5,579.28
22830	210	Spinal Fusions	\$5,579.28
22840	210	Spinal Fusions	\$5,579.28
22841	210	Spinal Fusions	\$5,579.28
22842	210	Spinal Fusions	\$5,579.28
22845	210	Spinal Fusions	\$5,579.28
22849	210	Spinal Fusions	\$5,579.28
22850	210	Spinal Fusions	\$5,579.28
22851	210	Spinal Fusions	\$5,579.28
22852	210	Spinal Fusions	\$5,579.28
22855	210	Spinal Fusions	\$5,579.28
23000	21	Level III Excision/ Biopsy	\$1,696.64
23020	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23030	8	Level III Incision and Drainage	\$1,418.84
23031	8	Level III Incision and Drainage	\$1,418.84
23035	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
23040	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23044	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23065	21	Level III Excision/ Biopsy	\$1,696.64

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
23066	22	Level IV Excision/ Biopsy	\$2,207.52
23075	21	Level III Excision/ Biopsy	\$1,696.64
23076	22	Level IV Excision/ Biopsy	\$2,207.52
23077	22	Level IV Excision/ Biopsy	\$2,207.52
23100	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
23101	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23105	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23106	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23107	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23120	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23125	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23130	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23170	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23172	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23174	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23180	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23182	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23184	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23190	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23195	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23395	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23397	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23400	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23405	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23406	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
23410	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23412	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23415	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23420	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23430	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23440	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23450	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23455	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23460	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23462	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23465	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

Effective January 1, 2007

<u>CPT® Codes</u>	APC*	Description	Value
23466	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23470	425	Level II Arthroplasty with Prosthesis	\$6,232.90
23472	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
23480	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23485	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23490	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23491	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23550	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
23552	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
23585	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
23615	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
23616	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
23630	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
23670	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
23680	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
23700	45	Bone/Joint Manipulation Under Anesthesia	\$1,619.37
23800	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23802	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
23921	25	Level II Skin Repair	\$947.13
23930	8	Level III Incision and Drainage	\$1,418.84
23931	8	Level III Incision and Drainage	\$1,418.84
23935	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
24000	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24006	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24100	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
24101	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24102	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24105	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
24130	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24134	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24136	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24138	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24140	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24145	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24147	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24155	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24160	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
24164	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24300	45	Bone/Joint Manipulation Under Anesthesia	\$1,619.37
24301	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24305	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24310	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
24320	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24330	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24331	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24332	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
24340	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24341	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24342	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24343	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24344	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24345	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24346	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24350	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24351	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24352	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24354	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24356	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24360	47	Arthroplasty without Prosthesis	\$3,538.56
24361	425	Level II Arthroplasty with Prosthesis	\$6,232.90
24362	48	Level I Arthroplasty with Prosthesis	\$3,538.56
24363	425	Level II Arthroplasty with Prosthesis	\$6,232.90
24365	47	Arthroplasty without Prosthesis	\$3,538.56
24366	425	Level II Arthroplasty with Prosthesis	\$6,232.90
24400	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24410	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24420	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24430	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24435	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24470	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24495	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
24515	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24516	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24579	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
24582	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24586	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24587	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24635	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24665	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24666	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24685	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
24800	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24802	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
24925	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
24935	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
25000	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25001	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25020	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25023	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25024	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25025	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25028	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25031	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25035	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25040	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25085	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25100	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25101	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25105	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25107	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25110	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25111	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
25112	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
25115	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25116	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25118	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25119	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25145	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25150	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25151	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25210	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
25215	54	Level II Hand Musculoskeletal Procedures	\$2,834.69

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

Effective January 1, 2007

<u>CPT® Codes</u>	APC*	Description	Value
25230	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25240	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25248	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25250	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25251	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25260	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25263	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25265	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25270	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25272	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25274	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25275	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25280	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25290	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25295	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
25300	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25301	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25310	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25312	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25315	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25316	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25320	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25332	47	Arthroplasty without Prosthesis	\$3,538.56
25335	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25337	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25350	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25355	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25360	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25365	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25370	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25375	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25390	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25391	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
25392	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25393	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25394	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
25400	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25405	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25415	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
25420	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25425	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25426	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25430	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
25431	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
25440	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25441	425	Level II Arthroplasty with Prosthesis	\$6,232.90
25442	425	Level II Arthroplasty with Prosthesis	\$6,232.90
25443	48	Level I Arthroplasty with Prosthesis	\$3,538.56
25444	48	Level I Arthroplasty with Prosthesis	\$3,538.56
25445	48	Level I Arthroplasty with Prosthesis	\$3,538.56
25446	425	Level II Arthroplasty with Prosthesis	\$6,232.90
25447	47	Arthroplasty without Prosthesis	\$3,538.56
25449	47	Arthroplasty without Prosthesis	\$3,538.56
25450	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25455	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25525	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25526	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25545	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25574	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25575	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25611	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25620	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25645	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25651	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25652	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25670	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25676	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25685	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25695	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
25800	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25805	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25810	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
25820	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
25825	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
25830	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
26037	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26040	54	Level II Hand Musculoskeletal Procedures	\$2,834.69

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
26045	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26055	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26060	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26070	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26075	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26080	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26100	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26105	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26110	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26115	22	Level IV Excision/ Biopsy	\$2,207.52
26116	22	Level IV Excision/ Biopsy	\$2,207.52
26117	22	Level IV Excision/ Biopsy	\$2,207.52
26121	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26123	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26125	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26130	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26135	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26140	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26145	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26160	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26170	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26180	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26185	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26230	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26235	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26236	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26250	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26255	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26260	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26261	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26262	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26320	21	Level III Excision/ Biopsy	\$1,696.64
26350	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26352	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26356	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26357	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26358	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26370	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26372	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26373	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26390	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26392	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26410	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26412	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26415	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26416	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26418	53	Level I Hand Musculoskeletal Procedures	\$1,767.55



**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

Effective January 1, 2007

<u>CPT® Codes</u>	APC*	Description	Value
26420	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26426	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26428	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26433	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26434	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26437	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26440	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26442	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26445	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26449	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26450	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26455	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26460	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26471	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26474	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26476	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26477	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26478	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26479	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26480	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26483	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26485	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26489	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26490	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26492	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26494	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26496	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26497	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26498	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26499	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26500	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26502	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26504	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26508	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26510	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26516	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26517	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26518	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26520	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26525	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26530	47	Arthroplasty without Prosthesis	\$3,538.56
26531	48	Level I Arthroplasty with Prosthesis	\$3,538.56
26535	47	Arthroplasty without Prosthesis	\$3,538.56
26536	48	Level I Arthroplasty with Prosthesis	\$3,538.56
26540	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26541	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26542	53	Level I Hand Musculoskeletal Procedures	\$1,767.55

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

Effective January 1, 2007

<u>CPT® Codes</u>	APC*	Description	Value
26545	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26546	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26548	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26550	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26555	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26560	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26561	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26562	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26565	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26567	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26568	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26580	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26587	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26590	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26591	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26593	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26596	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26608	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26615	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26650	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26665	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26676	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26685	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26686	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26727	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26735	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26746	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26756	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26765	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
26841	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26842	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26843	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26844	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26850	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26852	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26860	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26861	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26862	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26863	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26910	54	Level II Hand Musculoskeletal Procedures	\$2,834.69
26951	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
26952	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
27096	207	Level III Nerve Injections	\$1,073.70
27275	45	Bone/Joint Manipulation Under Anesthesia	\$1,619.37
27330	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27331	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
27332	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27333	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27334	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27335	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27340	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27345	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27347	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27350	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27360	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27372	22	Level IV Excision/ Biopsy	\$2,207.52
27380	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27381	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27403	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27405	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27407	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27409	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27412	42	Level II Arthroscopy	\$4,966.67
27415	42	Level II Arthroscopy	\$4,966.67
27418	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27420	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27422	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27424	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27425	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27427	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
27428	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
27429	52	Level IV Musculoskeletal Procedures Except Hand and Foot	\$4,966.12
27430	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27435	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27437	47	Arthroplasty without Prosthesis	\$3,538.56
27438	48	Level I Arthroplasty with Prosthesis	\$3,538.56
27440	47	Arthroplasty without Prosthesis	\$3,538.56
27441	47	Arthroplasty without Prosthesis	\$3,538.56
27442	47	Arthroplasty without Prosthesis	\$3,538.56
27443	47	Arthroplasty without Prosthesis	\$3,538.56
27446	681	Knee Arthroplasty	\$8,061.62
27447	681	Knee Arthroplasty	\$8,061.62
27524	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27570	45	Bone/Joint Manipulation Under Anesthesia	\$1,619.37
27603	8	Level III Incision and Drainage	\$1,418.84
27604	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
27612	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27620	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27625	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27626	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27630	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27640	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27641	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27647	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27650	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27652	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27654	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27656	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27658	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27659	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27664	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27665	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27675	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27676	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27680	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27681	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27685	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27686	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27687	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27690	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27691	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27692	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27695	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27696	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27698	50	Level II Musculoskeletal Procedures Except Hand and Foot and Allograft and Autograft for Spine Surgery	\$2,803.59
27700	47	Arthroplasty without Prosthesis	\$3,538.56
27704	49	Level I Musculoskeletal Procedures Except Hand and Foot	\$2,302.64
27756	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27758	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27759	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27766	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27784	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
27792	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27814	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27822	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27823	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27826	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27827	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27828	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27829	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27832	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27842	45	Bone/Joint Manipulation Under Anesthesia	\$1,619.37
27846	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27848	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
27860	45	Bone/Joint Manipulation Under Anesthesia	\$1,619.37
27870	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
27871	51	Level III Musculoskeletal Procedures Except Hand and Foot	\$4,086.91
28005	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28008	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28010	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28011	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28020	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28022	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28024	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28030	220	Level I Nerve Procedures	\$1,971.21
28035	220	Level I Nerve Procedures	\$1,971.21
28043	21	Level III Excision/ Biopsy	\$1,696.64
28045	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28046	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28050	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28052	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28054	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28060	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28062	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28070	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28072	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28080	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28086	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28088	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28090	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28092	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28108	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28110	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28111	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28112	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28113	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28114	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28116	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28118	55	Level I Foot Musculoskeletal Procedures	\$2,204.62

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

Effective January 1, 2007

<u>CPT® Codes</u>	APC*	Description	Value
28119	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28120	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28122	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28124	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28126	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28130	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28140	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28150	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28153	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28160	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28171	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28173	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28175	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28192	21	Level III Excision/ Biopsy	\$1,696.64
28193	20	Level II Excision/ Biopsy	\$826.14
28200	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28202	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28208	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28210	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28220	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28222	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28225	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28226	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28230	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28232	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28234	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28238	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28240	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28250	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28260	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28261	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28262	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28264	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28270	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28272	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28280	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28285	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28286	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28288	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28289	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28290	57	Bunion Procedures	\$3,077.42
28292	57	Bunion Procedures	\$3,077.42
28293	57	Bunion Procedures	\$3,077.42
28294	57	Bunion Procedures	\$3,077.42
28296	57	Bunion Procedures	\$3,077.42
28297	57	Bunion Procedures	\$3,077.42
28298	57	Bunion Procedures	\$3,077.42

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

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<u>CPT® Codes</u>	APC*	Description	Value
28299	57	Bunion Procedures	\$3,077.42
28300	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28302	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28304	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28305	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28306	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28307	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28308	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28309	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28310	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28312	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28313	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28315	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28320	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28322	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28340	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28341	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28344	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28345	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28415	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28420	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28465	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28485	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28505	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28525	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28531	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28555	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28585	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28606	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28615	46	Open/Percutaneous Treatment Fracture or Dislocation	\$4,001.40
28705	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28715	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28725	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28730	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28735	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28737	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28740	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28750	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28755	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28760	56	Level II Foot Musculoskeletal Procedures	\$3,029.38
28810	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28820	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
28825	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
29800	41	Level I Arthroscopy	\$3,193.95
29804	41	Level I Arthroscopy	\$3,193.95
29805	41	Level I Arthroscopy	\$3,193.95
29806	42	Level II Arthroscopy	\$4,966.67

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

**For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).**

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<u>CPT® Codes</u>	APC*	Description	Value
29807	42	Level II Arthroscopy	\$4,966.67
29819	41	Level I Arthroscopy	\$3,193.95
29820	41	Level I Arthroscopy	\$3,193.95
29821	41	Level I Arthroscopy	\$3,193.95
29822	41	Level I Arthroscopy	\$3,193.95
29823	41	Level I Arthroscopy	\$3,193.95
29824	41	Level I Arthroscopy	\$3,193.95
29825	41	Level I Arthroscopy	\$3,193.95
29826	42	Level II Arthroscopy	\$4,966.67
29827	42	Level II Arthroscopy	\$4,966.67
29830	41	Level I Arthroscopy	\$3,193.95
29834	41	Level I Arthroscopy	\$3,193.95
29835	41	Level I Arthroscopy	\$3,193.95
29836	41	Level I Arthroscopy	\$3,193.95
29837	41	Level I Arthroscopy	\$3,193.95
29838	41	Level I Arthroscopy	\$3,193.95
29840	41	Level I Arthroscopy	\$3,193.95
29843	41	Level I Arthroscopy	\$3,193.95
29844	41	Level I Arthroscopy	\$3,193.95
29845	41	Level I Arthroscopy	\$3,193.95
29846	41	Level I Arthroscopy	\$3,193.95
29847	41	Level I Arthroscopy	\$3,193.95
29848	41	Level I Arthroscopy	\$3,193.95
29850	41	Level I Arthroscopy	\$3,193.95
29851	42	Level II Arthroscopy	\$4,966.67
29855	42	Level II Arthroscopy	\$4,966.67
29856	41	Level I Arthroscopy	\$3,193.95
29860	41	Level I Arthroscopy	\$3,193.95
29861	41	Level I Arthroscopy	\$3,193.95
29862	42	Level II Arthroscopy	\$4,966.67
29863	42	Level II Arthroscopy	\$4,966.67
29866	42	Level II Arthroscopy	\$4,966.67
29867	42	Level II Arthroscopy	\$4,966.67
29868	42	Level II Arthroscopy	\$4,966.67
29870	41	Level I Arthroscopy	\$3,193.95
29871	41	Level I Arthroscopy	\$3,193.95
29873	41	Level I Arthroscopy	\$3,193.95
29874	41	Level I Arthroscopy	\$3,193.95
29875	41	Level I Arthroscopy	\$3,193.95
29876	41	Level I Arthroscopy	\$3,193.95
29877	41	Level I Arthroscopy	\$3,193.95
29879	41	Level I Arthroscopy	\$3,193.95
29880	41	Level I Arthroscopy	\$3,193.95
29881	41	Level I Arthroscopy	\$3,193.95
29882	41	Level I Arthroscopy	\$3,193.95
29883	41	Level I Arthroscopy	\$3,193.95
29884	41	Level I Arthroscopy	\$3,193.95



Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
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Effective January 1, 2007			
<u>CPT® Codes</u>	APC*	Description	Value
29885	42	Level II Arthroscopy	\$4,966.67
29886	41	Level I Arthroscopy	\$3,193.95
29887	41	Level I Arthroscopy	\$3,193.95
29888	42	Level II Arthroscopy	\$4,966.67
29889	42	Level II Arthroscopy	\$4,966.67
29891	41	Level I Arthroscopy	\$3,193.95
29892	41	Level I Arthroscopy	\$3,193.95
29893	55	Level I Foot Musculoskeletal Procedures	\$2,204.62
29894	41	Level I Arthroscopy	\$3,193.95
29895	41	Level I Arthroscopy	\$3,193.95
29897	41	Level I Arthroscopy	\$3,193.95
29898	41	Level I Arthroscopy	\$3,193.95
29899	42	Level II Arthroscopy	\$4,966.67
29900	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
29901	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
29902	53	Level I Hand Musculoskeletal Procedures	\$1,767.55
30140	254	Level IV ENT Procedures	\$2,660.44
30400	256	Level V ENT Procedures	\$4,208.75
30410	256	Level V ENT Procedures	\$4,208.75
30420	256	Level V ENT Procedures	\$4,208.75
30465	256	Level V ENT Procedures	\$4,208.75
30520	254	Level IV ENT Procedures	\$2,660.44
30540	256	Level V ENT Procedures	\$4,208.75
30545	256	Level V ENT Procedures	\$4,208.75
30580	256	Level V ENT Procedures	\$4,208.75
30600	256	Level V ENT Procedures	\$4,208.75
30620	256	Level V ENT Procedures	\$4,208.75
30630	254	Level IV ENT Procedures	\$2,660.44
30801	252	Level II ENT Procedures	\$999.00
30802	252	Level II ENT Procedures	\$999.00
31254	75	Level V Endoscopy Upper Airway	\$2,386.03
31255	75	Level V Endoscopy Upper Airway	\$2,386.03
31256	75	Level V Endoscopy Upper Airway	\$2,386.03
31267	75	Level V Endoscopy Upper Airway	\$2,386.03
31276	75	Level V Endoscopy Upper Airway	\$2,386.03
31287	75	Level V Endoscopy Upper Airway	\$2,386.03
31288	75	Level V Endoscopy Upper Airway	\$2,386.03
31541	75	Level V Endoscopy Upper Airway	\$2,386.03
31571	75	Level V Endoscopy Upper Airway	\$2,386.03
31575	72	Level II Endoscopy Upper Airway	\$158.44
31579	73	Level III Endoscopy Upper Airway	\$471.53
31622	76	Level I Endoscopy Lower Airway	\$1,075.52
31624	76	Level I Endoscopy Lower Airway	\$1,075.52
31628	76	Level I Endoscopy Lower Airway	\$1,075.52
31631	415	Level II Endoscopy Lower Airway	\$2,506.25
43248	141	Level I Upper GI Procedures	\$920.03
49505	154	Hernia/Hydrocele Procedures	\$3,199.70

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

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<u>CPT® Codes</u>	APC*	Description	Value
49507	154	Hernia/Hydrocele Procedures	\$3,199.70
49520	154	Hernia/Hydrocele Procedures	\$3,199.70
49521	154	Hernia/Hydrocele Procedures	\$3,199.70
49525	154	Hernia/Hydrocele Procedures	\$3,199.70
49540	154	Hernia/Hydrocele Procedures	\$3,199.70
49550	154	Hernia/Hydrocele Procedures	\$3,199.70
49553	154	Hernia/Hydrocele Procedures	\$3,199.70
49555	154	Hernia/Hydrocele Procedures	\$3,199.70
49557	154	Hernia/Hydrocele Procedures	\$3,199.70
49560	154	Hernia/Hydrocele Procedures	\$3,199.70
49561	154	Hernia/Hydrocele Procedures	\$3,199.70
49565	154	Hernia/Hydrocele Procedures	\$3,199.70
49566	154	Hernia/Hydrocele Procedures	\$3,199.70
49568	154	Hernia/Hydrocele Procedures	\$3,199.70
49570	154	Hernia/Hydrocele Procedures	\$3,199.70
49572	154	Hernia/Hydrocele Procedures	\$3,199.70
49585	154	Hernia/Hydrocele Procedures	\$3,199.70
49587	154	Hernia/Hydrocele Procedures	\$3,199.70
49590	154	Hernia/Hydrocele Procedures	\$3,199.70
49600	154	Hernia/Hydrocele Procedures	\$3,199.70
49650	131	Level II Laparoscopy	\$4,872.35
49651	131	Level II Laparoscopy	\$4,872.35
50200	685	Level III Needle Biopsy/Aspiration Except Bone Marrow	\$689.53
50590	169	Lithotripsy	\$5,085.56
51726	156	Level II Urinary and Anal Procedures	\$282.44
52005	161	Level II Cystourethroscopy and other Genitourinary Procedures	\$2,123.02
62263	203	Level IV Nerve Injections	\$1,244.86
62264	203	Level IV Nerve Injections	\$1,244.86
62268	212	Nervous System Injections	\$335.81
62270	204	Level I Nerve Injections	\$372.69
62272	204	Level I Nerve Injections	\$372.69
62273	206	Level II Nerve Injections	\$999.01
62280	207	Level III Nerve Injections	\$1,073.70
62281	207	Level III Nerve Injections	\$1,073.70
62282	207	Level III Nerve Injections	\$1,073.70
62287	221	Level II Nerve Procedures	\$3,271.75
62292	212	Nervous System Injections	\$335.81
62294	212	Nervous System Injections	\$335.81
62310	207	Level III Nerve Injections	\$1,073.70
62311	207	Level III Nerve Injections	\$1,073.70
62318	207	Level III Nerve Injections	\$1,073.70
62319	207	Level III Nerve Injections	\$1,073.70
62350	223	Implantation or Revision of Pain Management Catheter	\$1,699.85
62351	208	Laminotomies, Laminectomies	\$4,851.56
62355	203	Level IV Nerve Injections	\$1,244.86
62360	226	Implantation of Drug Infusion Reservoir	\$1,295.80

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

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Effective January 1, 2007

<u>CPT® Codes</u>	APC*	Description	Value
62361	227	Implantation of Drug Infusion Device	\$4,059.78
62362	227	Implantation of Drug Infusion Device	\$4,059.78
62365	221	Level II Nerve Procedures	\$3,271.75
63020	208	Laminotomies, Laminectomies	\$4,851.56
63030	208	Laminotomies, Laminectomies	\$4,851.56
63035	208	Laminotomies, Laminectomies	\$4,851.56
63040	208	Laminotomies, Laminectomies	\$4,851.56
63042	208	Laminotomies, Laminectomies	\$4,851.56
63043	208	Laminotomies, Laminectomies	\$4,851.56
63044	208	Laminotomies, Laminectomies	\$4,851.56
63045	208	Laminotomies, Laminectomies	\$4,851.56
63046	208	Laminotomies, Laminectomies	\$4,851.56
63047	208	Laminotomies, Laminectomies	\$4,851.56
63048	208	Laminotomies, Laminectomies	\$4,851.56
63055	208	Laminotomies, Laminectomies	\$4,851.56
63056	208	Laminotomies, Laminectomies	\$4,851.56
63057	208	Laminotomies, Laminectomies	\$4,851.56
63064	208	Laminotomies, Laminectomies	\$4,851.56
63066	208	Laminotomies, Laminectomies	\$4,851.56
63075	208	Laminotomies, Laminectomies	\$4,851.56
63076	208	Laminotomies, Laminectomies	\$4,851.56
63077	208	Laminotomies, Laminectomies	\$4,851.56
63078	208	Laminotomies, Laminectomies	\$4,851.56
63081	208	Laminotomies, Laminectomies	\$4,851.56
63082	208	Laminotomies, Laminectomies	\$4,851.56
63090	208	Laminotomies, Laminectomies	\$4,851.56
63091	208	Laminotomies, Laminectomies	\$4,851.56
63610	220	Level I Nerve Procedures	\$1,971.21
63615	220	Level I Nerve Procedures	\$1,971.21
63650	40	Percutaneous Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,480.57
63655	61	Laminectomy or Incision for Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,779.35
63660	687	Revision/Removal of Neurostimulator Electrodes	\$2,284.78
63685	222	Implantation of Neurological Device	\$3,665.78
63688	688	Revision/Removal of Neurostimulator Pulse Generator Receiver	\$4,922.60
64400	204	Level I Nerve Injections	\$372.69
64402	204	Level I Nerve Injections	\$372.69
64405	204	Level I Nerve Injections	\$372.69
64408	204	Level I Nerve Injections	\$372.69
64410	206	Level II Nerve Injections	\$999.01
64412	206	Level II Nerve Injections	\$999.01
64413	204	Level I Nerve Injections	\$372.69
64415	204	Level I Nerve Injections	\$372.69
64417	204	Level I Nerve Injections	\$372.69
64418	204	Level I Nerve Injections	\$372.69
64420	204	Level I Nerve Injections	\$372.69

Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees			
For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).			
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<u>CPT® Codes</u>	APC*	Description	Value
64421	206	Level II Nerve Injections	\$999.01
64425	204	Level I Nerve Injections	\$372.69
64430	204	Level I Nerve Injections	\$372.69
64435	204	Level I Nerve Injections	\$372.69
64445	204	Level I Nerve Injections	\$372.69
64446	206	Level II Nerve Injections	\$999.01
64447	204	Level I Nerve Injections	\$372.69
64448	204	Level I Nerve Injections	\$372.69
64449	204	Level I Nerve Injections	\$372.69
64450	204	Level I Nerve Injections	\$372.69
64470	207	Level III Nerve Injections	\$1,073.70
64472	206	Level II Nerve Injections	\$999.01
64475	207	Level III Nerve Injections	\$1,073.70
64476	206	Level II Nerve Injections	\$999.01
64479	207	Level III Nerve Injections	\$1,073.70
64480	207	Level III Nerve Injections	\$1,073.70
64483	207	Level III Nerve Injections	\$1,073.70
64484	207	Level III Nerve Injections	\$1,073.70
64505	204	Level I Nerve Injections	\$372.69
64508	204	Level I Nerve Injections	\$372.69
64510	207	Level III Nerve Injections	\$1,073.70
64520	207	Level III Nerve Injections	\$1,073.70
64530	207	Level III Nerve Injections	\$1,073.70
64553	225	Implantation of Neurostimulator Electrodes, Cranial Nerve	\$7,464.12
64555	40	Percutaneous Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,480.57
64560	40	Percutaneous Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,480.57
64561	40	Percutaneous Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,480.57
64565	40	Percutaneous Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,480.57
64573	225	Implantation of Neurostimulator Electrodes, Cranial Nerve	\$7,464.12
64575	61	Laminectomy or Incision for Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,779.35
64577	61	Laminectomy or Incision for Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,779.35
64580	61	Laminectomy or Incision for Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,779.35
64581	61	Laminectomy or Incision for Implantation of Neurostimulator Electrodes, Excluding Cranial Nerve	\$2,779.35
64585	687	Revision/Removal of Neurostimulator Electrodes	\$2,284.78
64590	222	Implantation of Neurological Device	\$3,665.78
64595	688	Revision/Removal of Neurostimulator Pulse Generator Receiver	\$4,922.60
64600	203	Level IV Nerve Injections	\$1,244.86
64605	203	Level IV Nerve Injections	\$1,244.86
64610	203	Level IV Nerve Injections	\$1,244.86
64612	204	Level I Nerve Injections	\$372.69

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

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<u>CPT® Codes</u>	APC*	Description	Value
64613	204	Level I Nerve Injections	\$372.69
64614	204	Level I Nerve Injections	\$372.69
64620	203	Level IV Nerve Injections	\$1,244.86
64622	203	Level IV Nerve Injections	\$1,244.86
64623	207	Level III Nerve Injections	\$1,073.70
64626	203	Level IV Nerve Injections	\$1,244.86
64627	207	Level III Nerve Injections	\$1,073.70
64630	206	Level II Nerve Injections	\$999.01
64640	206	Level II Nerve Injections	\$999.01
64650	204	Level I Nerve Injections	\$372.69
64653	204	Level I Nerve Injections	\$372.69
64680	207	Level III Nerve Injections	\$1,073.70
64681	203	Level IV Nerve Injections	\$1,244.86
64702	220	Level I Nerve Procedures	\$1,971.21
64704	220	Level I Nerve Procedures	\$1,971.21
64708	220	Level I Nerve Procedures	\$1,971.21
64712	220	Level I Nerve Procedures	\$1,971.21
64713	220	Level I Nerve Procedures	\$1,971.21
64714	220	Level I Nerve Procedures	\$1,971.21
64716	220	Level I Nerve Procedures	\$1,971.21
64718	220	Level I Nerve Procedures	\$1,971.21
64719	220	Level I Nerve Procedures	\$1,971.21
64721	220	Level I Nerve Procedures	\$1,971.21
64722	220	Level I Nerve Procedures	\$1,971.21
64726	220	Level I Nerve Procedures	\$1,971.21
64727	220	Level I Nerve Procedures	\$1,971.21
64774	220	Level I Nerve Procedures	\$1,971.21
64776	220	Level I Nerve Procedures	\$1,971.21
64778	220	Level I Nerve Procedures	\$1,971.21
64782	220	Level I Nerve Procedures	\$1,971.21
64783	220	Level I Nerve Procedures	\$1,971.21
64784	220	Level I Nerve Procedures	\$1,971.21
64786	221	Level II Nerve Procedures	\$3,271.75
64787	220	Level I Nerve Procedures	\$1,971.21
64831	221	Level II Nerve Procedures	\$3,271.75
64832	221	Level II Nerve Procedures	\$3,271.75
64834	221	Level II Nerve Procedures	\$3,271.75
64835	221	Level II Nerve Procedures	\$3,271.75
64836	221	Level II Nerve Procedures	\$3,271.75
64837	221	Level II Nerve Procedures	\$3,271.75
64890	221	Level II Nerve Procedures	\$3,271.75
64892	221	Level II Nerve Procedures	\$3,271.75
65105	242	Level V Repair and Plastic Eye Procedures	\$3,446.84
65265	237	Level III Posterior Segment Eye Procedures	\$2,433.25
65280	236	Level II Posterior Segment Eye Procedures	\$2,433.25
65285	672	Level IV Posterior Segment Eye Procedures	\$3,934.98
65770	244	Corneal Transplant	\$2,433.24

**Rule 18 Interpretive Bulletin: Exhibit for Outpatient Surgery Facility Codes & Fees**

For CPT® codes not contained in this Exhibit, refer to Rule 18-6(J)(3)(c).

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<u>CPT® Codes</u>	APC*	Description	Value
66682	234	Level III Anterior Segment Eye Procedures	\$2,522.76
66825	234	Level III Anterior Segment Eye Procedures	\$2,522.76
66920	249	Level II Cataract Procedures without IOL Insert	\$3,243.66
66986	246	Cataract Procedures with IOL Insert	\$2,658.96
67036	672	Level IV Posterior Segment Eye Procedures	\$3,934.98
67038	672	Level IV Posterior Segment Eye Procedures	\$3,934.98
67039	672	Level IV Posterior Segment Eye Procedures	\$3,934.98
67040	672	Level IV Posterior Segment Eye Procedures	\$3,934.98
67107	672	Level IV Posterior Segment Eye Procedures	\$3,934.98
67108	672	Level IV Posterior Segment Eye Procedures	\$3,934.98
67110	236	Level II Posterior Segment Eye Procedures	\$2,433.25
67400	241	Level IV Repair and Plastic Eye Procedures	\$2,682.18
67405	241	Level IV Repair and Plastic Eye Procedures	\$2,682.18
67412	241	Level IV Repair and Plastic Eye Procedures	\$2,682.18
67413	241	Level IV Repair and Plastic Eye Procedures	\$2,682.18
67414	242	Level V Repair and Plastic Eye Procedures	\$3,446.84
67550	242	Level V Repair and Plastic Eye Procedures	\$3,446.84
67560	241	Level IV Repair and Plastic Eye Procedures	\$2,682.18
67830	239	Level II Repair and Plastic Eye Procedures	\$763.74
67835	240	Level III Repair and Plastic Eye Procedures	\$2,059.54
67875	239	Level II Repair and Plastic Eye Procedures	\$763.74
67914	240	Level III Repair and Plastic Eye Procedures	\$2,059.54
67917	240	Level III Repair and Plastic Eye Procedures	\$2,059.54
67924	240	Level III Repair and Plastic Eye Procedures	\$2,059.54
67950	240	Level III Repair and Plastic Eye Procedures	\$2,059.54
67961	240	Level III Repair and Plastic Eye Procedures	\$2,059.54
67966	240	Level III Repair and Plastic Eye Procedures	\$2,059.54
68115	240	Level III Repair and Plastic Eye Procedures	\$2,059.54
68325	242	Level V Repair and Plastic Eye Procedures	\$3,446.84
68328	241	Level IV Repair and Plastic Eye Procedures	\$2,682.18
68750	242	Level V Repair and Plastic Eye Procedures	\$3,446.84
69440	254	Level IV ENT Procedures	\$2,660.44
69631	256	Level V ENT Procedures	\$4,208.75
69643	256	Level V ENT Procedures	\$4,208.75
69666	256	Level V ENT Procedures	\$4,208.75
69667	256	Level V ENT Procedures	\$4,208.75

\*Group code 210 was created by DOWC to reimburse spinal fusion codes not listed in Medicare's Addendum B.

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